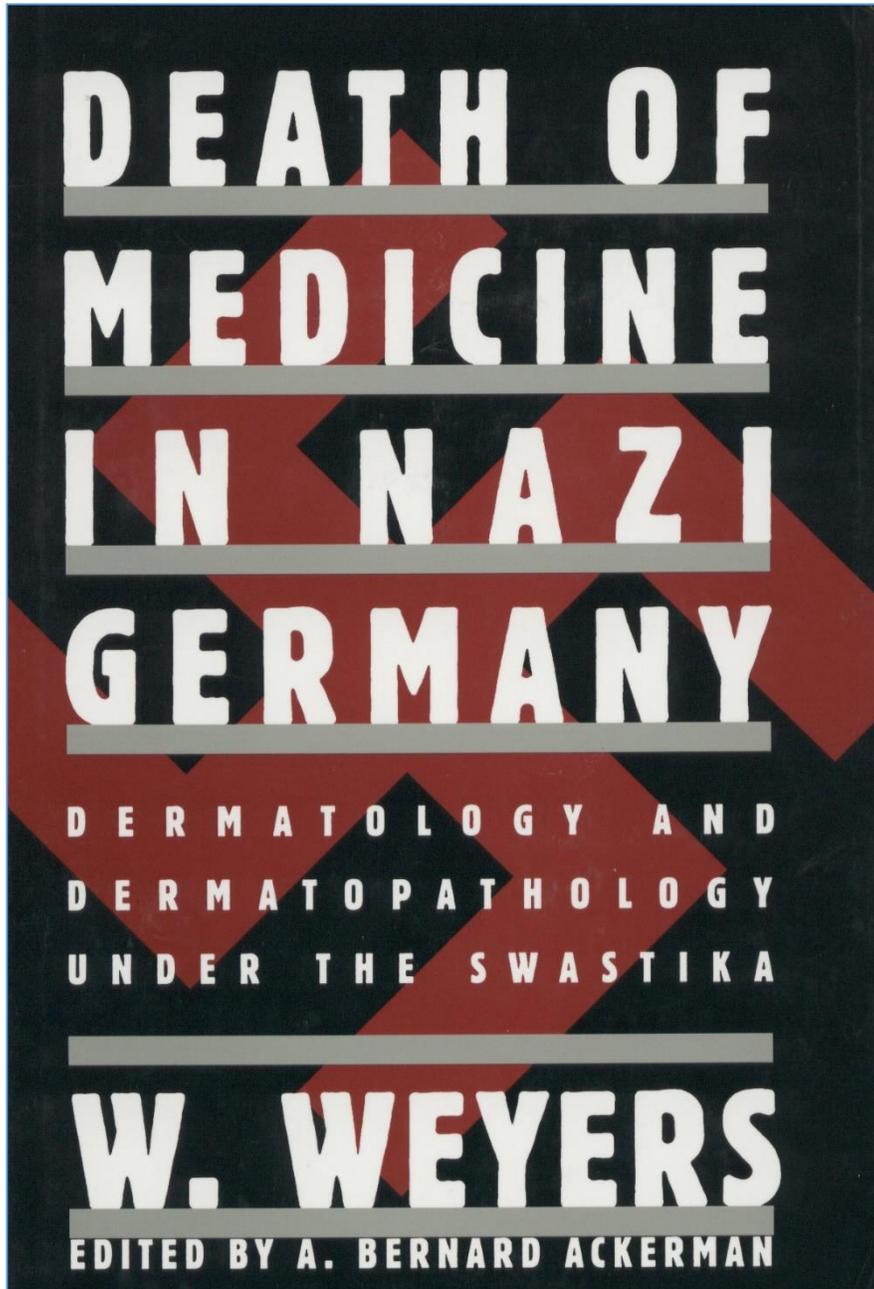


DERMATOLOGY IN NAZI GERMANY

Dermatology in Nazi Germany

46th Annual Meeting of the Puerto Rican Dermatological Society, Rio Mar, June 28th- July 1st, 2018

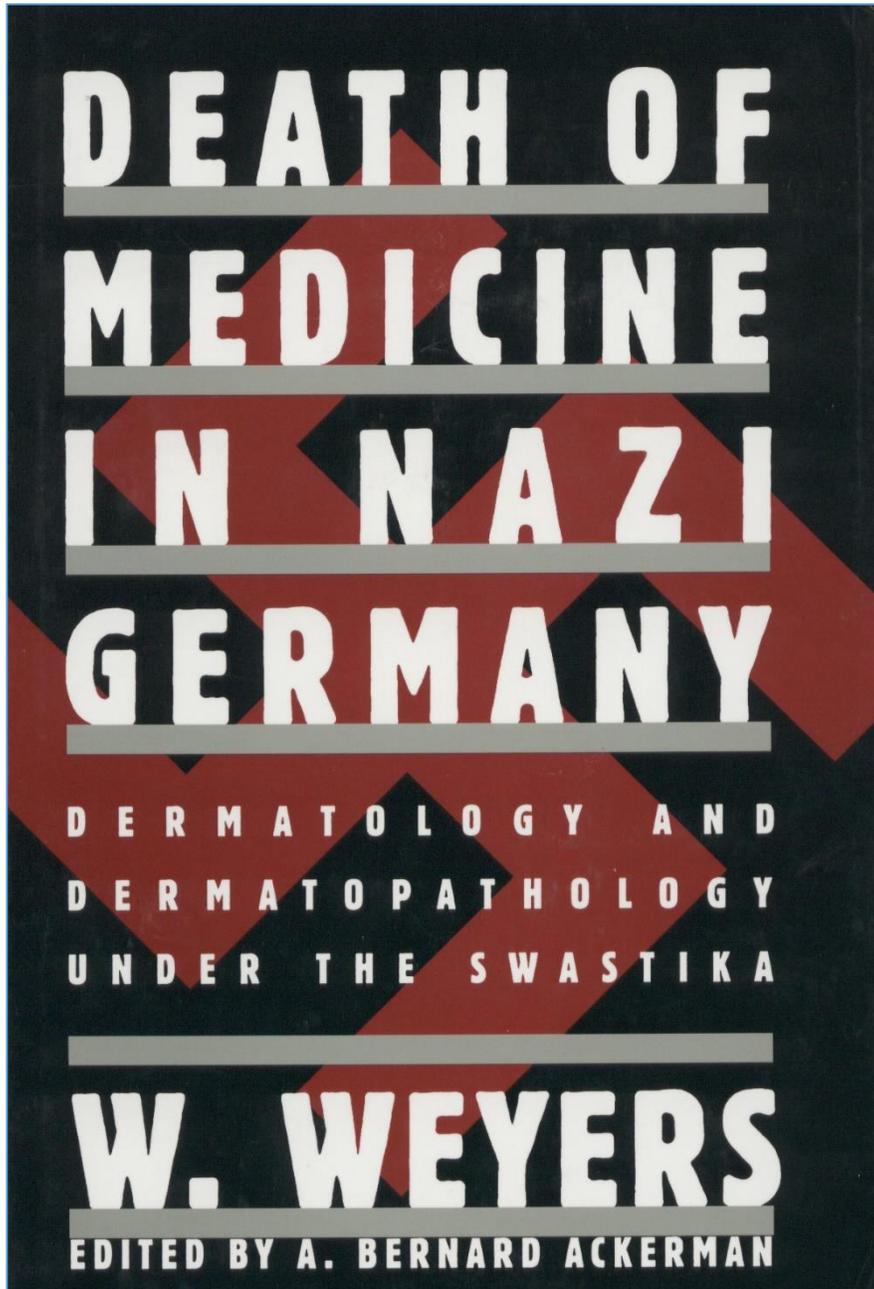
It is twenty years now that my book about “Dermatology and Dermatopathology under the Swastika” has been published. At that time, it seemed to be a merely historical endeavour without immediate relevancy for the presence. The superiority of Western democracies, with their free exchange of ideas and uninhibited interaction among individuals, over totalitarianism and dictatorship seemed to have been established,



and the world seemed to grow together. For a century, this had been far from clear.

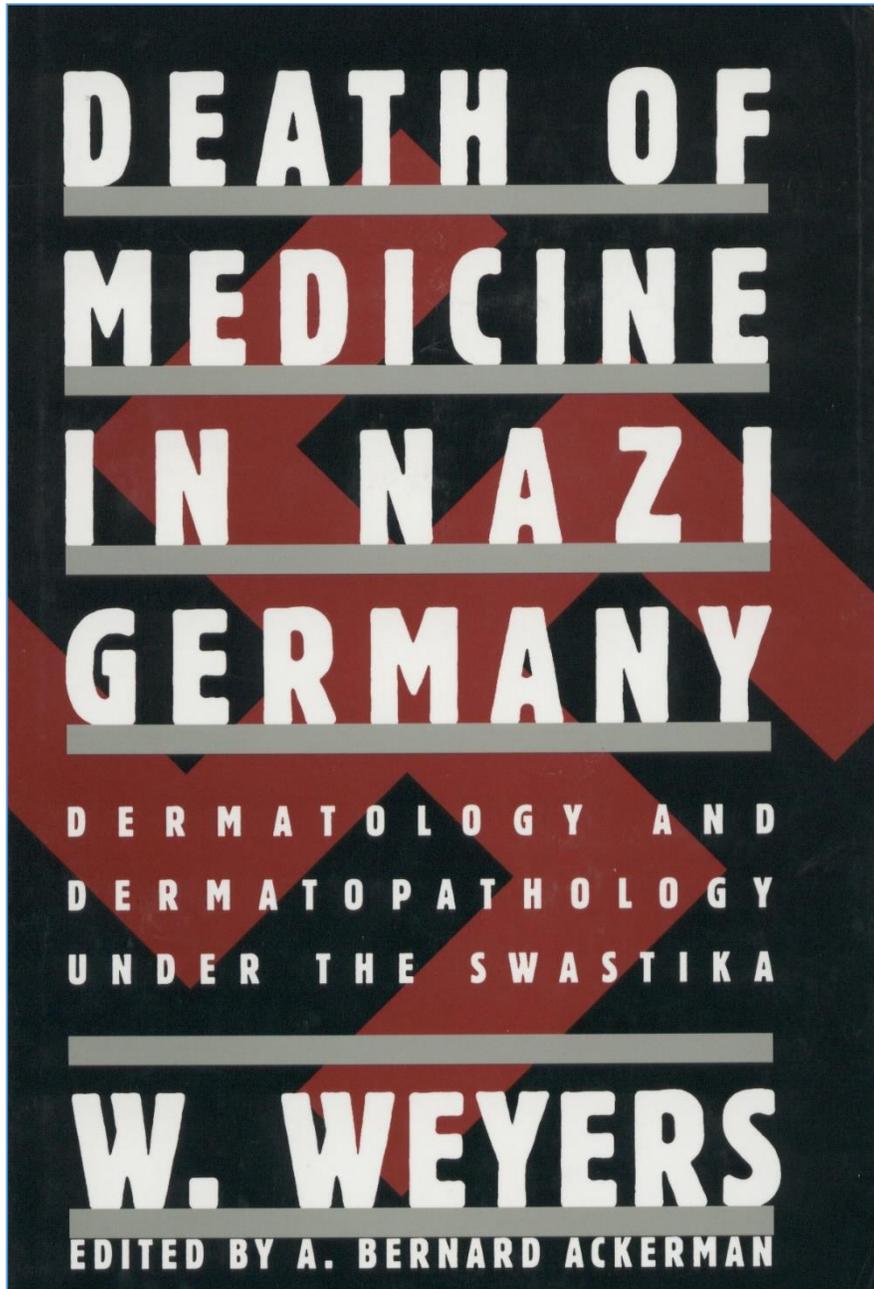


Dermatology in Nazi Germany



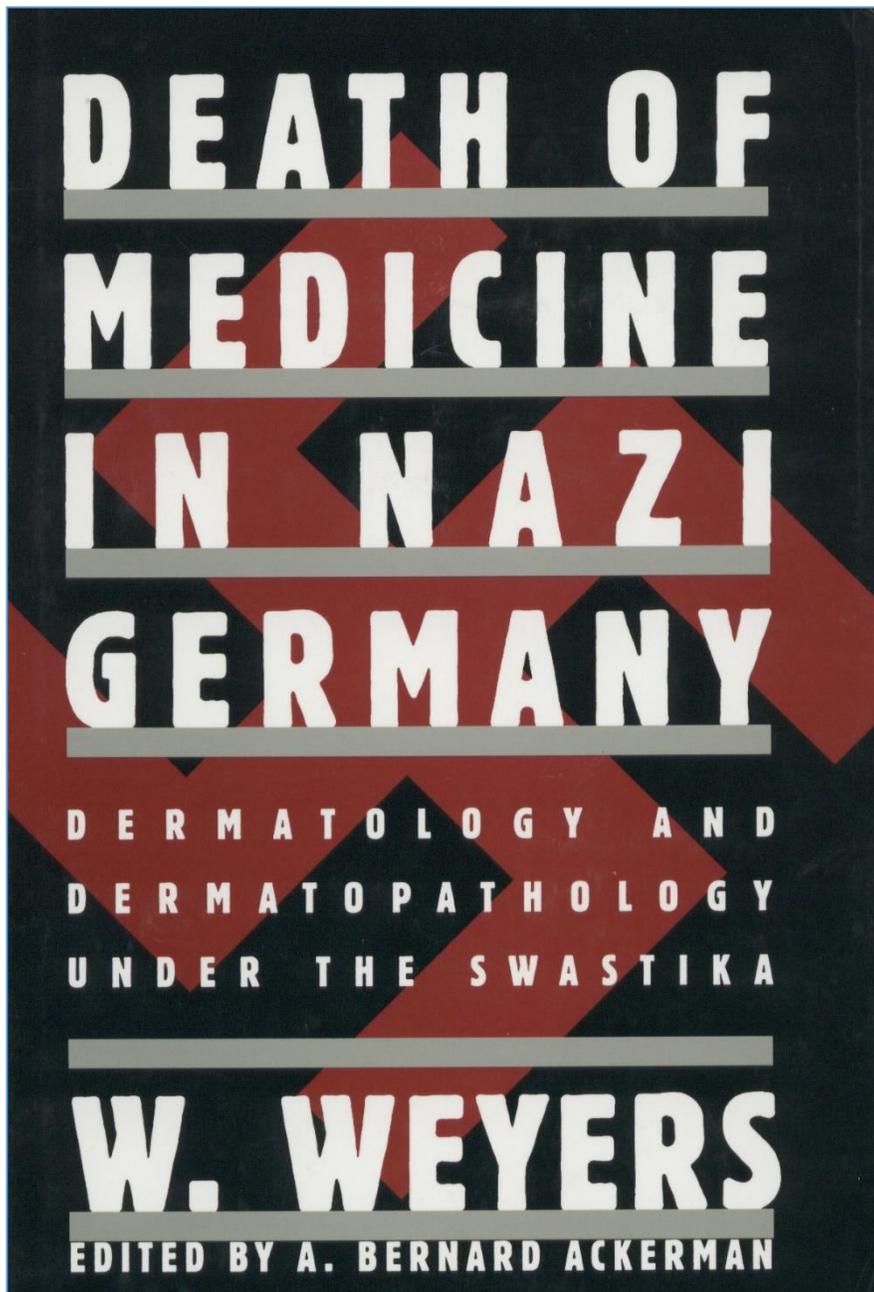
When 100 years ago, at the end of the First World War in 1918, parliaments with full political responsibility elected freely by all adult citizens were established in countries such as Germany, Austria, Hungary, Sweden, Norway, and the Netherlands,

Dermatology in Nazi Germany



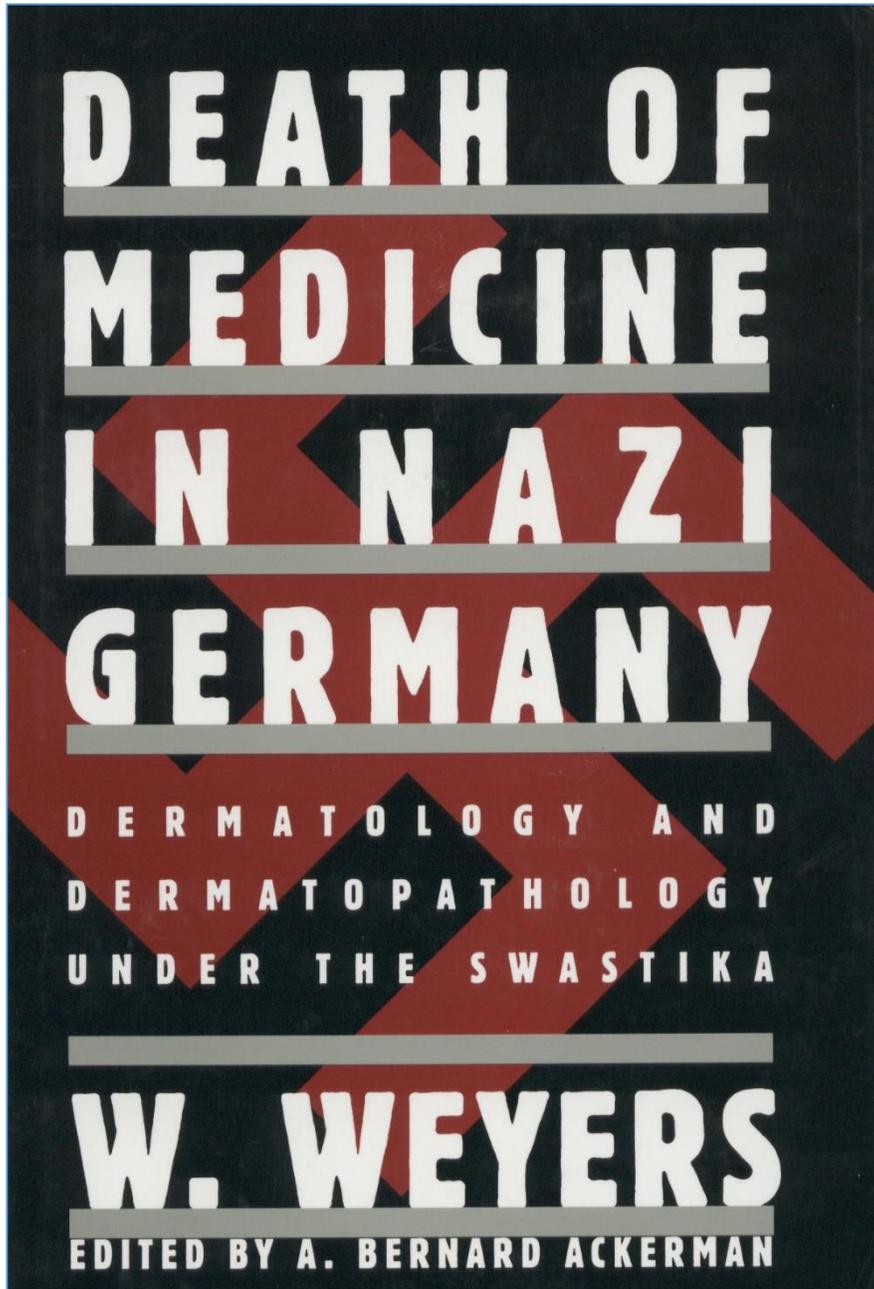
democracy with its inherent opposition, disputes, and demonstrations was widely regarded as inefficient and weak, and in the ensuing years,

Dermatology in Nazi Germany



Dermatology in Nazi Germany

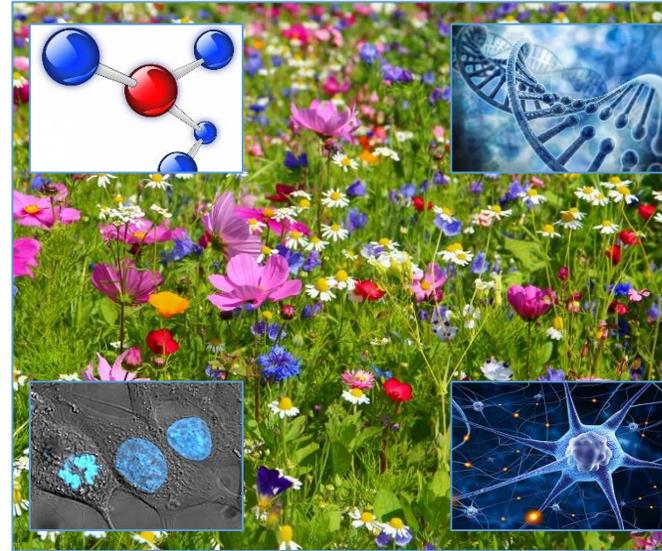
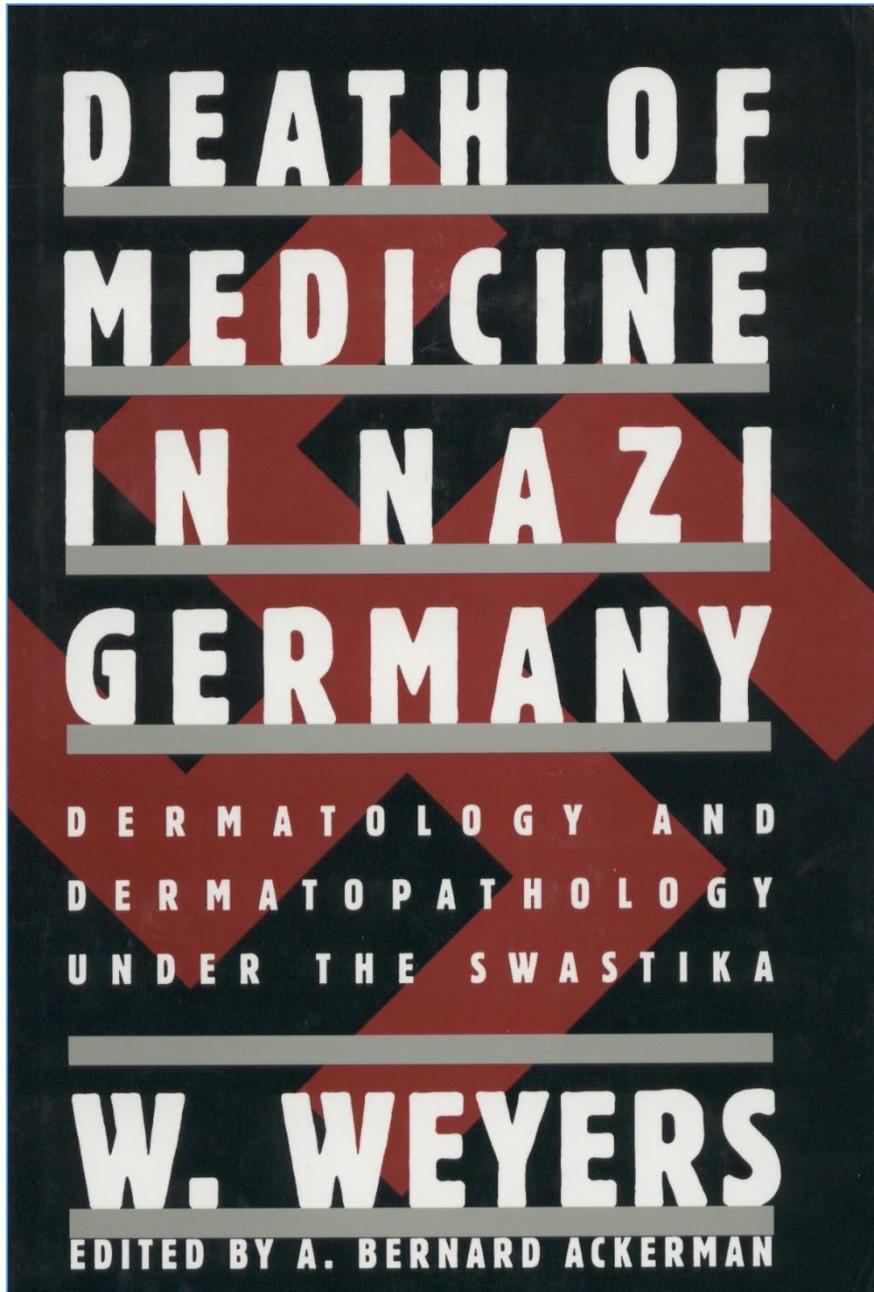
the autocratic regimes established in countries such as Japan, Italy, and Germany, with all citizens being obliged to pull together, seemed to hold far greater promise.



That illusion was rebutted
devastatingly.

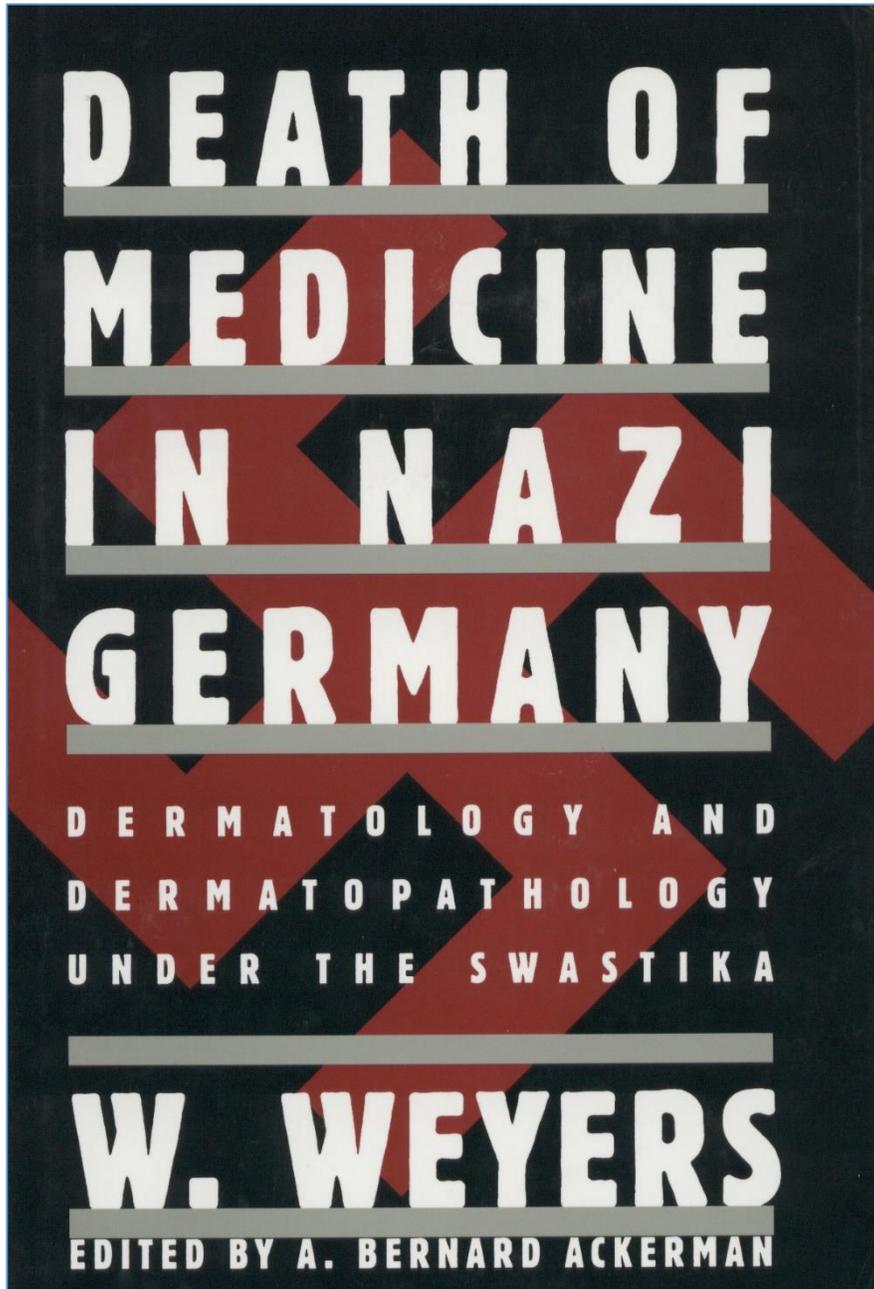


Dermatology in Nazi Germany



Just as nature flourishes because of the free interaction of atoms, molecules, and cells governed by a circumscribed set of natural laws, societies flourish due to the free exchange of ideas. This seemed to have been understood,

Dermatology in Nazi Germany



Dermatology in Nazi Germany

and it is alarming to note the appeal exerted once again by powerful leaders and the renaissance of autocratic regimes in countries such as Russia and Turkey. A review of what happened in Germany under the Swastika, therefore, may now more relevant now than when my book was published.



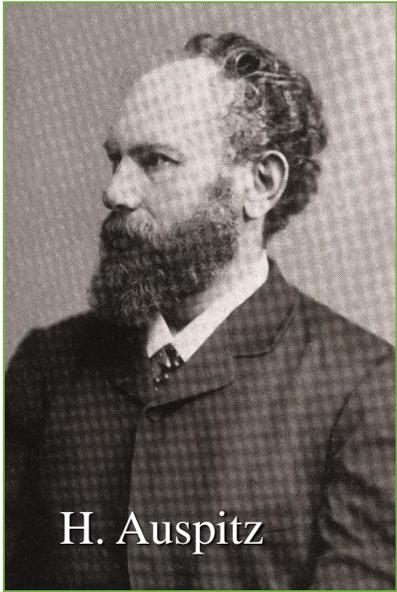
In the 1930s, medicine in Germany was turned upside down by the Nazis - from serving patients to serving the state,



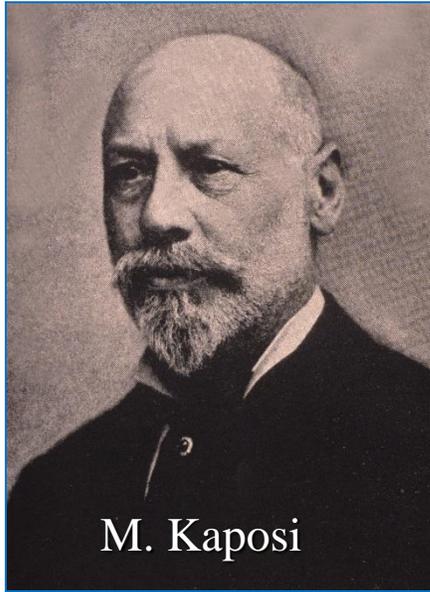
from being premier in the world to being backward, from highest ethical standards



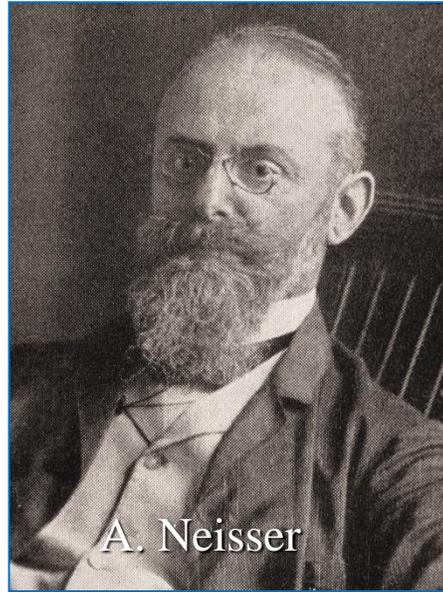
to the most brutal
perversion of them. By
that development,
dermatology was affected
especially



H. Auspitz



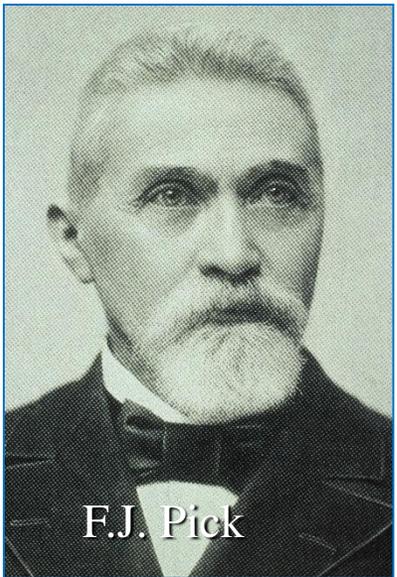
M. Kaposi



A. Neisser



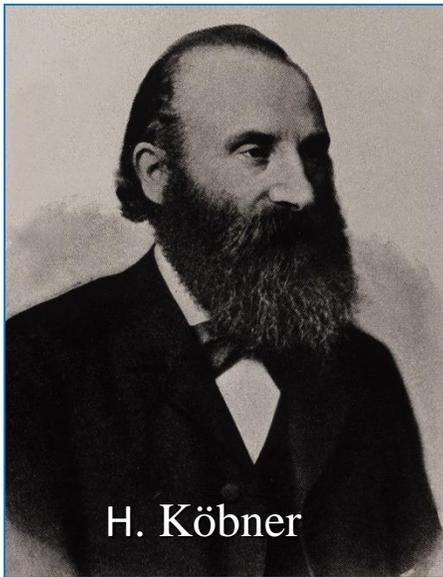
E. Lesser



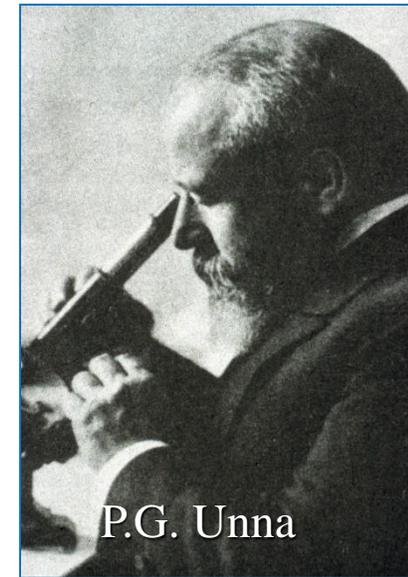
F.J. Pick



I. Neumann



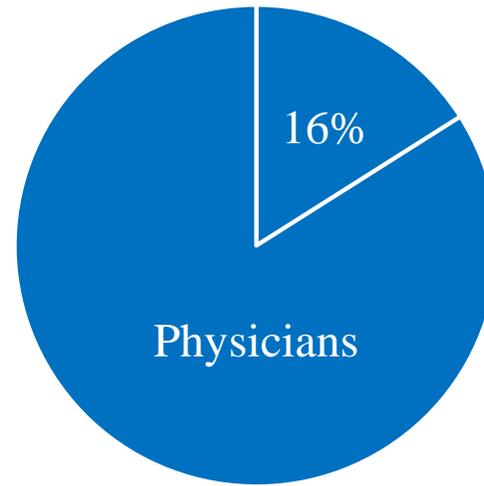
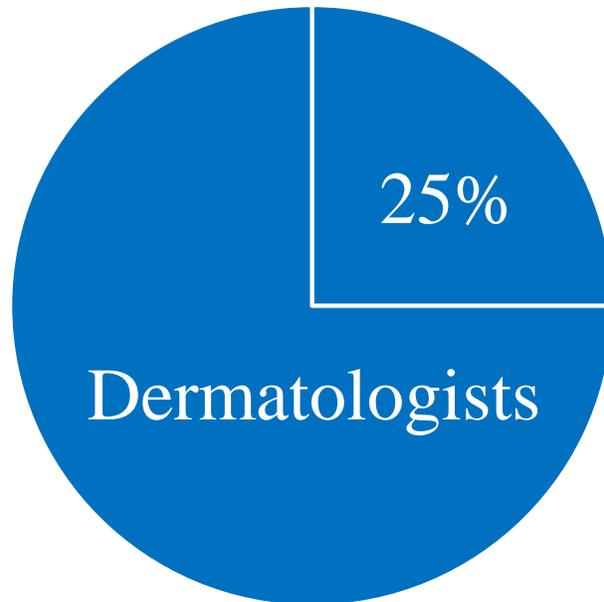
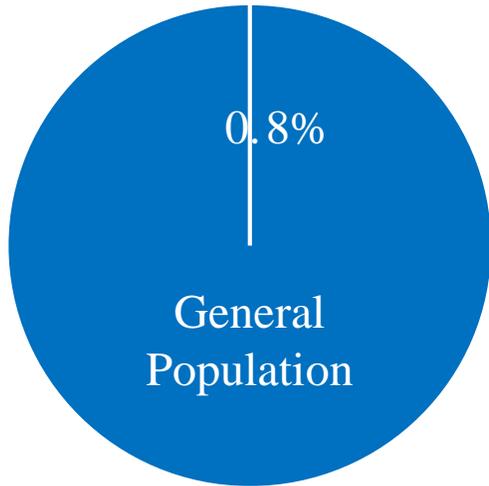
H. Köbner



P.G. Unna

because it was identified with Jews in the eyes of the public. At the end of the 19th century, German and Austrian dermatology had been brought to preeminence in the world chiefly by Jewish practitioners, such as Auspitz and Pick, Kaposi and Neumann, Neisser and Köbner, Lesser and Unna.

Percentage of Jews in Germany 1933



At the beginning of 1933, Jews accounted for 0.8% of the German population, for 16% of German physicians, and for 25% of German dermatologists, a number that exceeded that of all other medical specialists, except for pediatricians. To exclude those Jewish practitioners from the medical profession was one of the highest goals of the Nazis.



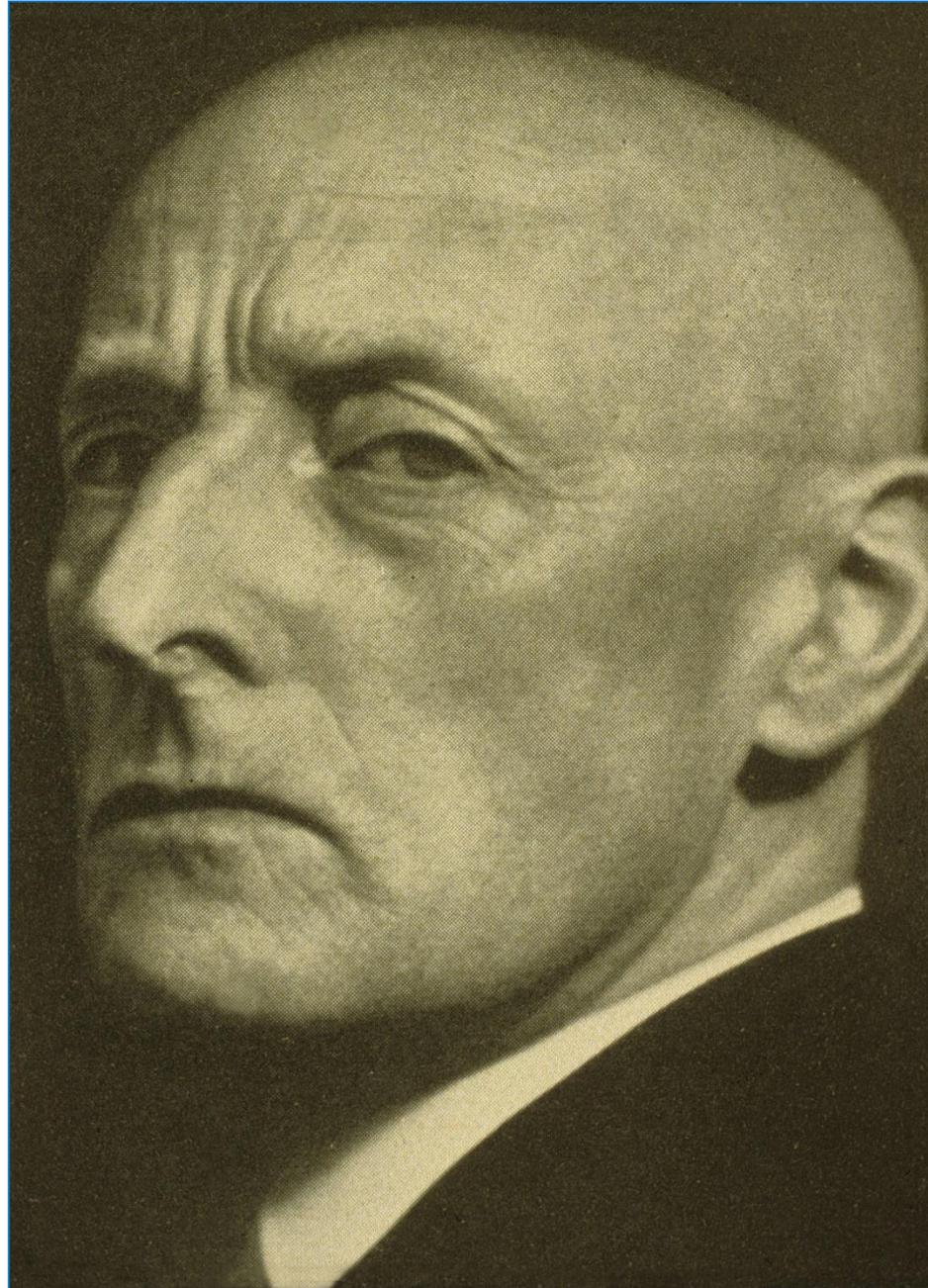
The Führer holds the cleansing of the medical profession far more important than, for example, that of the bureaucracy, since in his opinion the duty of the physician is or should be one of racial leadership.

Martin Bormann

According to Martin Bormann, the secretary of Adolf Hitler, *“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.”* In other words, physicians had to enhance the racial quality of the German people by stimulating the reproduction of valuable human beings, and because venereal diseases could interfere with that goal, dermatology and venerology were considered to be of prime importance.

In the fight against venereal diseases, everybody should be guided by the idea that, in the words of our Führer, Adolf Hitler, the fight against this plague is not only one task but the main task of the nation.

Bodo Spiethoff, 1933



The dermatologist, Bodo Spiethoff, stated in 1933: *“In the fight against venereal diseases everybody should be guided by the idea that, in the words of our Führer, Adolf Hitler, the fight against this plague is not only one task but the main task of the nation.”*



helf! geb
für die
Berliner Winterhilfe

Bis Sonnabend früh

10 Uhr

hat das Judentum Bedentzeit!

Dann beginnt der Kampf!

Die Juden aller Welt
wollen Deutschland vernichten!

Deutsches Volk!

Wehr Dich!

Kauf nicht beim Juden!

Verbreitet von
für Ernst Stern

MARKTHALLE

The Nazis wasted no time.
April 1st, 1933, was
declared “day of the
general boycott of Jews.”



Storm troopers appeared in front of Jewish shops and the offices of doctors, molested everybody who wanted to enter them,



and warned the public not to attend Jewish physicians and lawyers.

Der Preussische Minister
für Wissenschaft, Kunst und
Volksbildung

U I Nr. 24141

Bei Beantwortung wird um Angabe
der Geschäftsnummer gebeten.

Berlin den 6. Dezember 1933.
H 8 Unter den Linden 4
Fernsprecher: A 1 Jäger 0030
Postfachkonto: Berlin 14402 | Bäckerei d. Pr. H.
Reichsbank-Giro-Konto | f. H., K. u. H.
— Postfach —

Universität Frankfurt a.M.
Eingeg. - 7. DEZ 33 U.S.
T.-Nr. 6/10 ✓
Anl. *M...*

Auf Grund von § 3 des Gesetzes zur Wiederherstellung
des Berufsbeamtentums vom 7. April 1933 werden Sie hiermit
in den Ruhestand versetzt.

Wegen Regelung Ihrer Bezüge ergeht demnächst weitere
Verfügung.

Berlin den 6. Dezember 1933.

(Siegel)

Der Preussische Minister
für Wissenschaft, Kunst und Volksbildung

In Vertretung
gez. Jäger.

An den ordentlichen Professor Herrn Dr. Oskar Gans in
Frankfurt a/M., An Leonhardsbrunn 2.

Abschrift zur Kenntnisnahme.

In Vertretung
gez. Jäger.

An
den Herrn Rektor und den Senat
der Universität

in

Frankfurt a/M.



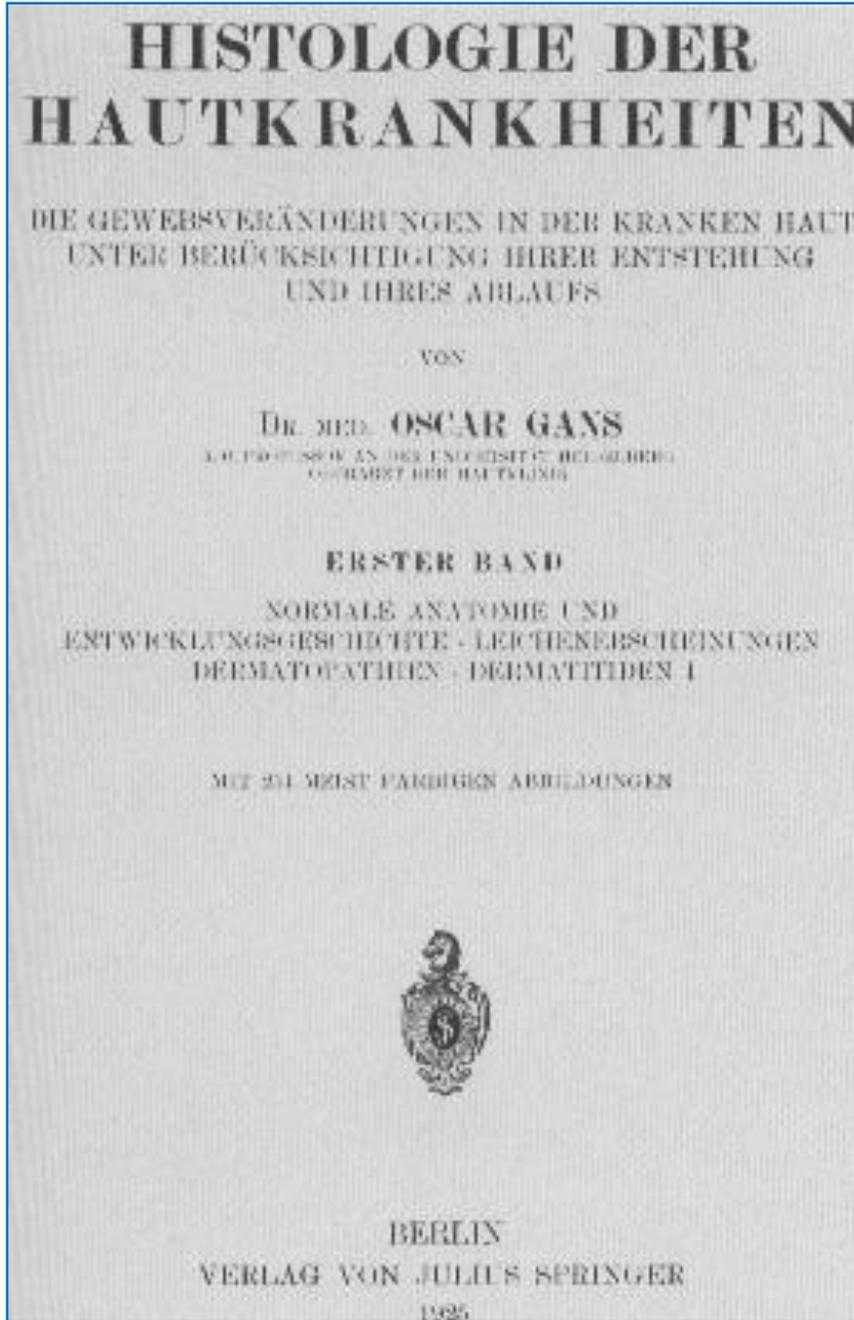
Beglaubigt.

Ministerial-Mantelstempel

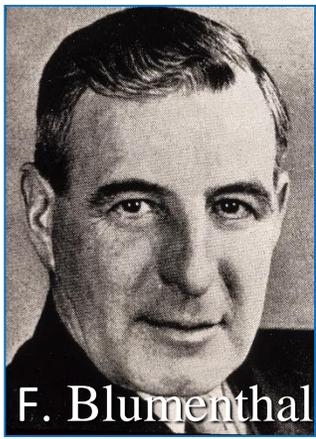
Six days later, the “Gesetz zur Wiederherstellung des Berufsbeamtentums” – “Law for the Restoration of Professional Civil Service” was enacted, according to which Jews and political opponents could be eliminated from the Civil Service. Their dismissal was notified to them in short, impersonal letters like this one to Oscar Gans, the chairman of dermatology in Frankfurt,



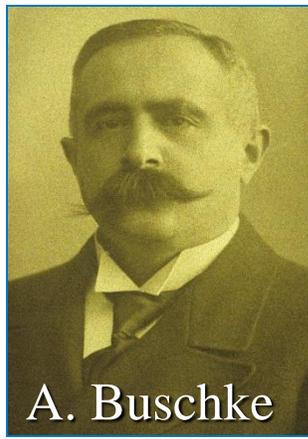
Oscar Gans



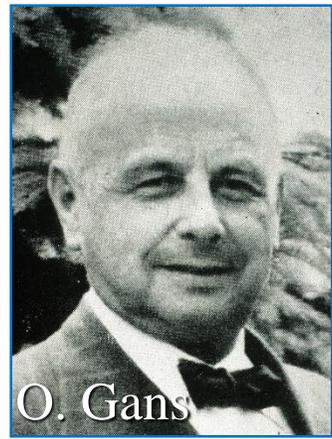
who had just published a two-volume update of Unna's classical textbook of dermatopathology under the title "Histologie der Hautkrankheiten." Shortly after his dismissal, Gans emigrated to Bombay. But this is only one example.



F. Blumenthal



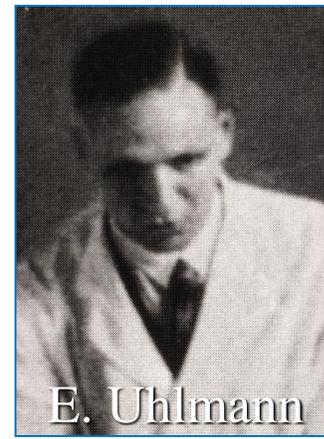
A. Buschke



O. Gans



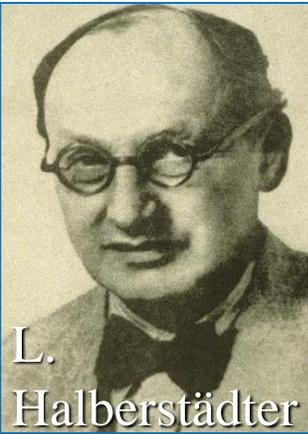
E. Sklarz



E. Uhlmann



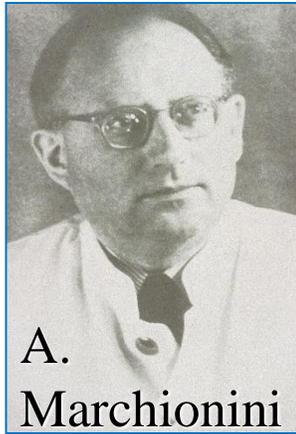
F. Herrmann



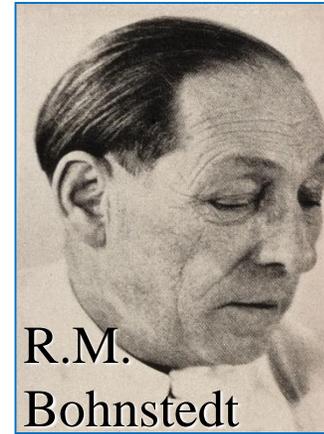
L.
Halberstädter



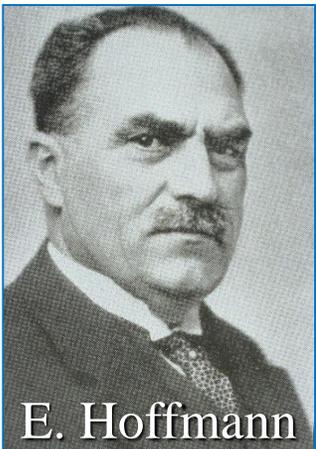
B. Ottenstein



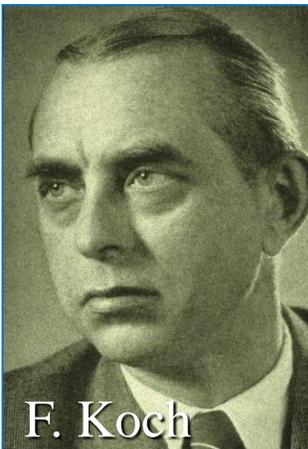
A.
Marchionini



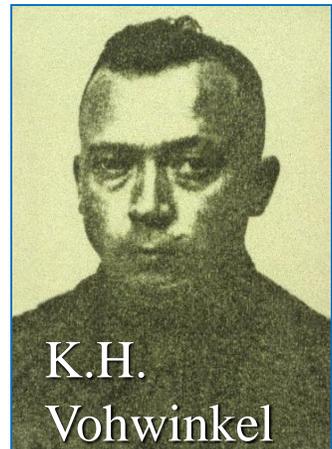
R.M.
Bohnstedt



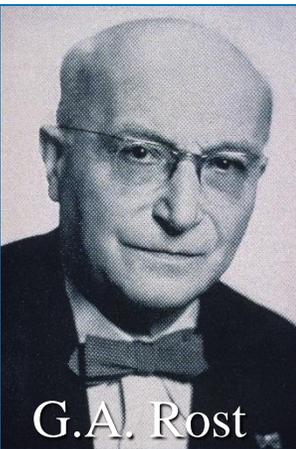
E. Hoffmann



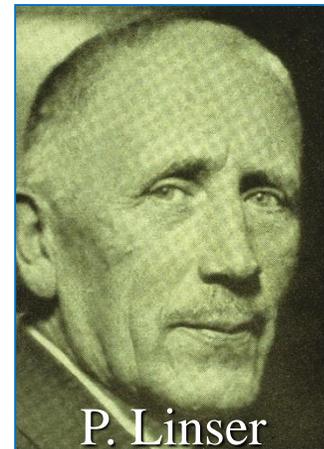
F. Koch



K.H.
Vohwinkel

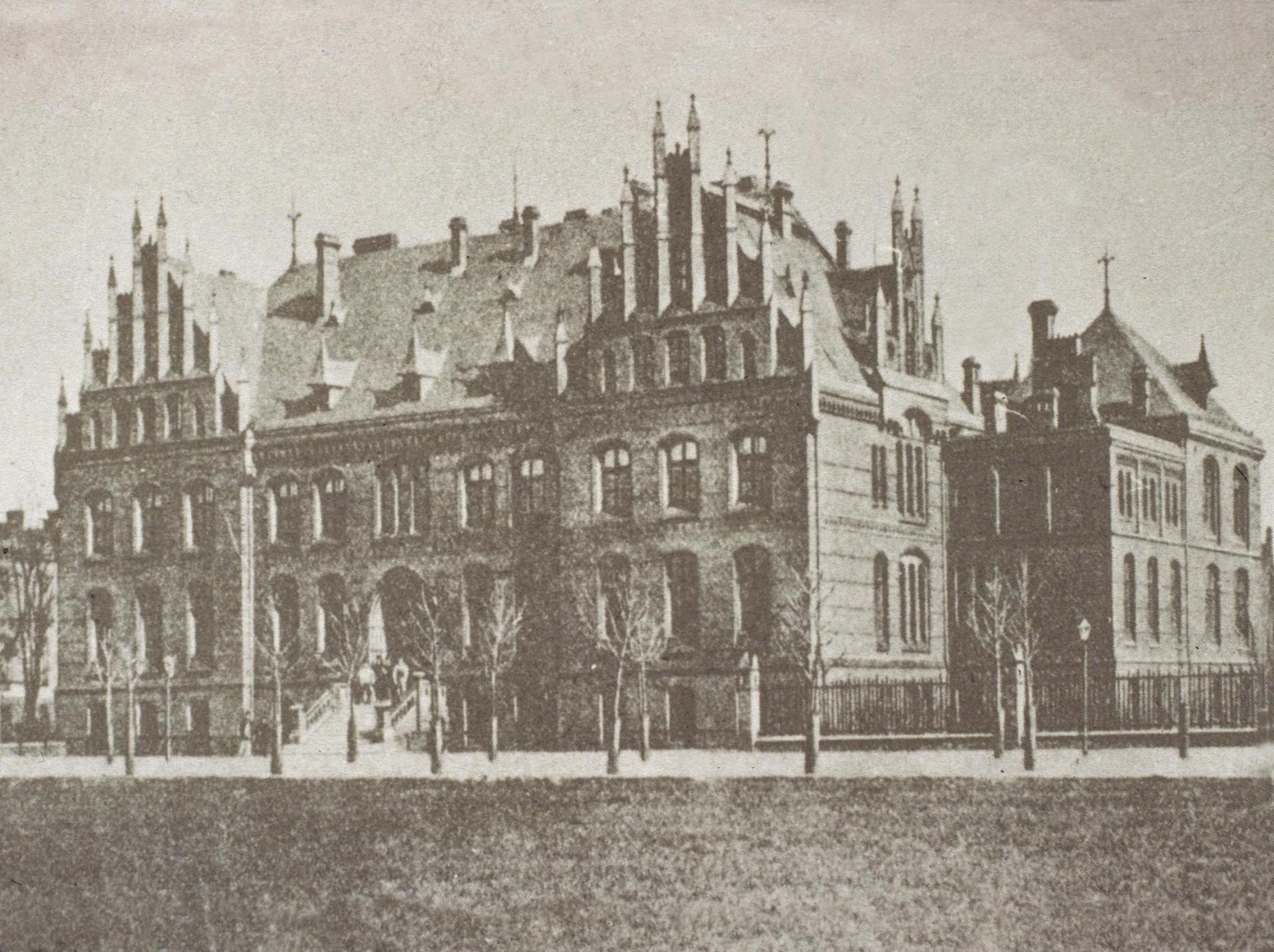


G.A. Rost



P. Linser

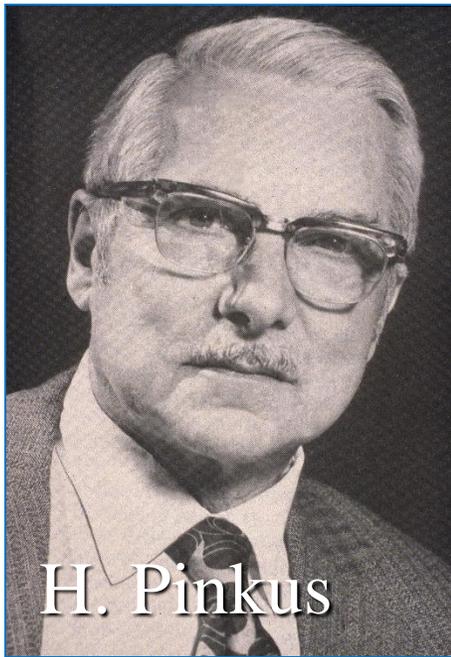
Dermatologists were fired at almost all German universities, either because they were Jewish, or affiliated with Jews, such as Alfred Marchionini, whose wife's grandmother had been born Jewish, or because they were deemed unreliable politically. I simply do not have the time to mention all those names.



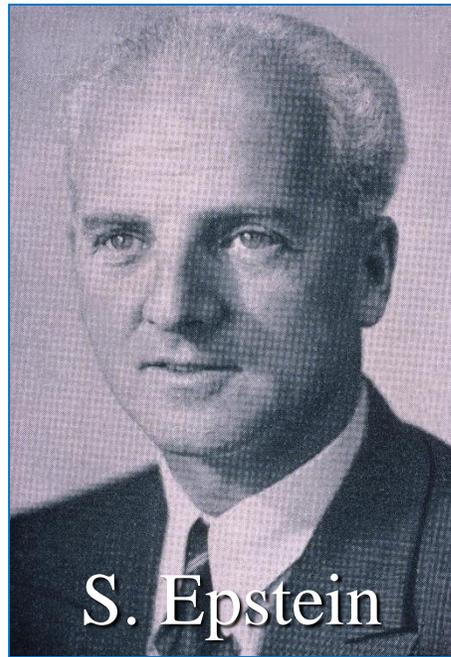
In some cities, that policy seriously challenged medical care for the inhabitants, especially in Breslau, where most physicians were of Jewish descent and where the skin clinic



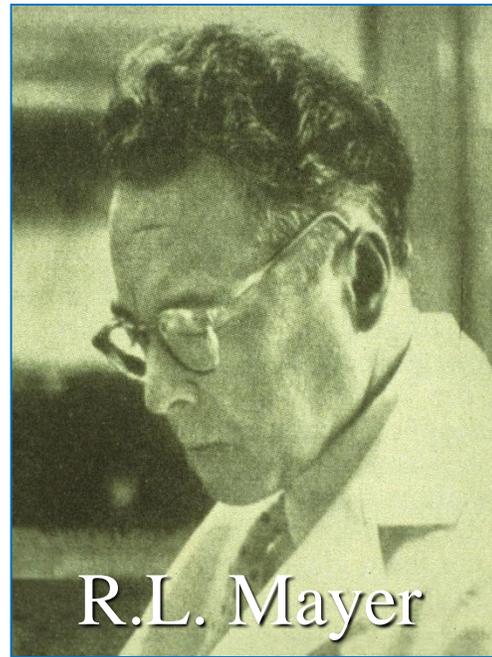
was even decorated with Stars of David. The quality of medical care, however, was of no concern for the government. Within a few months, the University of Breslau was forced to dismiss numerous outstanding dermatologists,



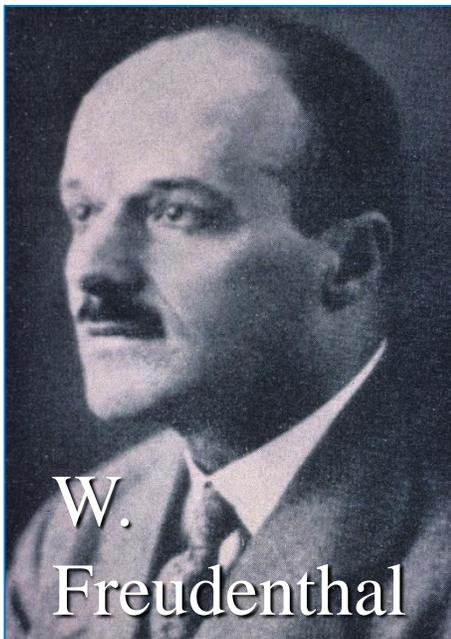
H. Pinkus



S. Epstein



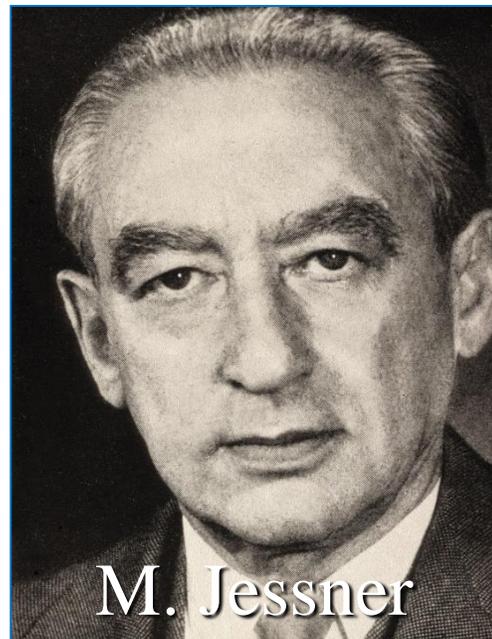
R.L. Mayer



W.
Freudenthal



H. Biberstein

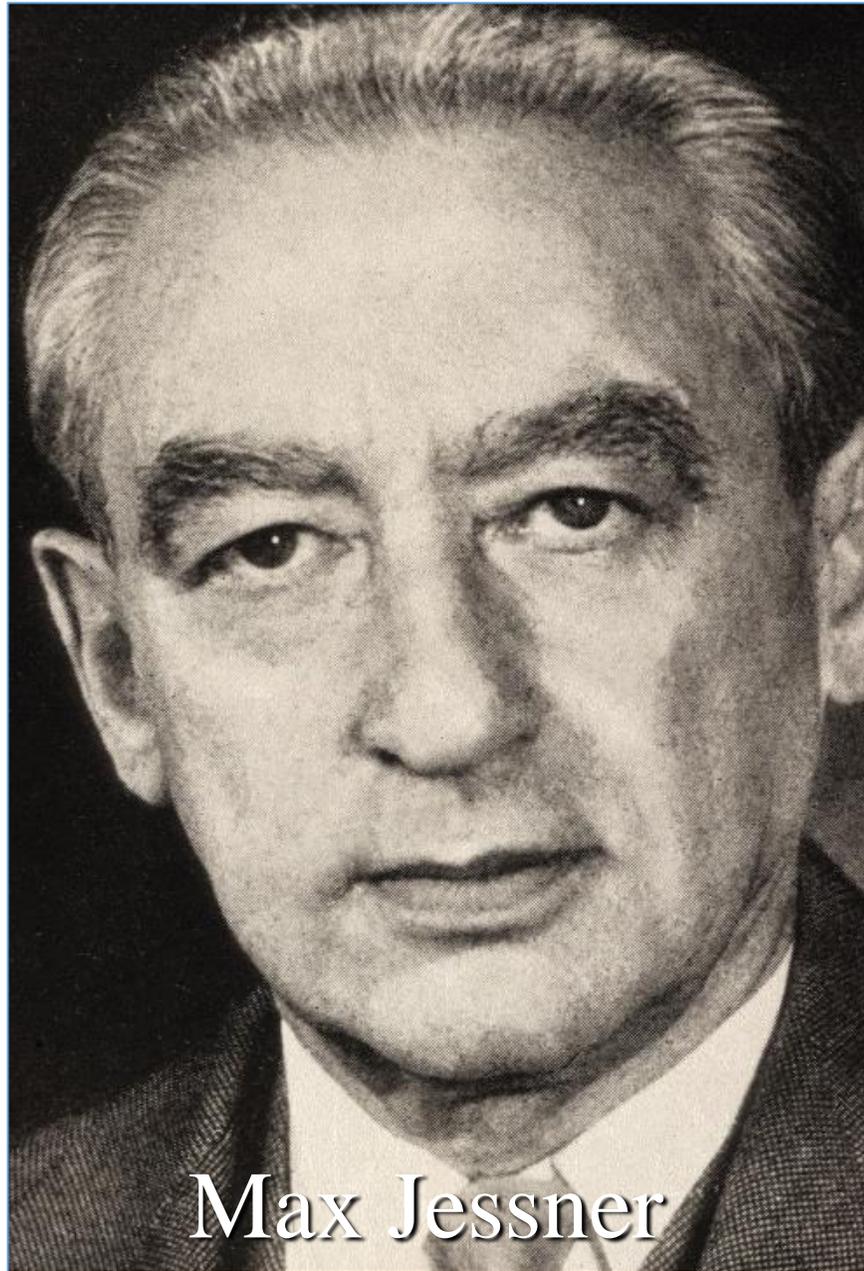


M. Jessner

among them Hermann Pinkus, who eventually described alopecia mucinosa, eccrine poroma, and fibroepithelial tumor of Pinkus and wrote one of the leading textbooks of dermatopathology of the 20th century; Stephen Epstein who developed the concept of photoallergies and became vice-president of the Society for Investigative Dermatology; Rudolph Leopold Mayer, a leading dermatopharmacologist; Walter Freudenthal who coined the terms „keratoacanthoma“ and „lichen amyloidosis“ and was the first to distinguish solar and seborrheic keratoses from one another; Hans Biberstein who developed immunotherapy for warts; and the chairman of the department Max Jessner, who introduced chemical peeling is still known for his description of “lymphocytic infiltration of the skin” in 1953.



Hans Biberstein



Max Jessner

Those brief data, however, do not communicate what it meant to those men be suddenly turned into outcasts. Biberstein and Jessner had fought for Germany in World War I and were German patriots. Like them, most Jews had a much stronger German than Jewish identity, and many of them, such as Hermann Pinkus, did not even belong to the Jewish religious community.



Siegfried Bettmann



Franz Herrmann

Likewise, Siegfried Bettmann, chair of dermatology in Heidelberg, was a professed Lutheran; nevertheless, he was removed from office in 1933. Franz Herrmann, an associate of Oskar Gans in Frankfurt, was also Christian, but was dismissed because of his Jewish ancestry. After emigration to the United States, he was in charge of basic and laboratory research at the Skin and Cancer Unit of New York University.

1938



Nachweisung

aller jüdischen Firmen, Aerzte, Zahnärzte und Rechtsanwälte
in der Stadt Erfurt.

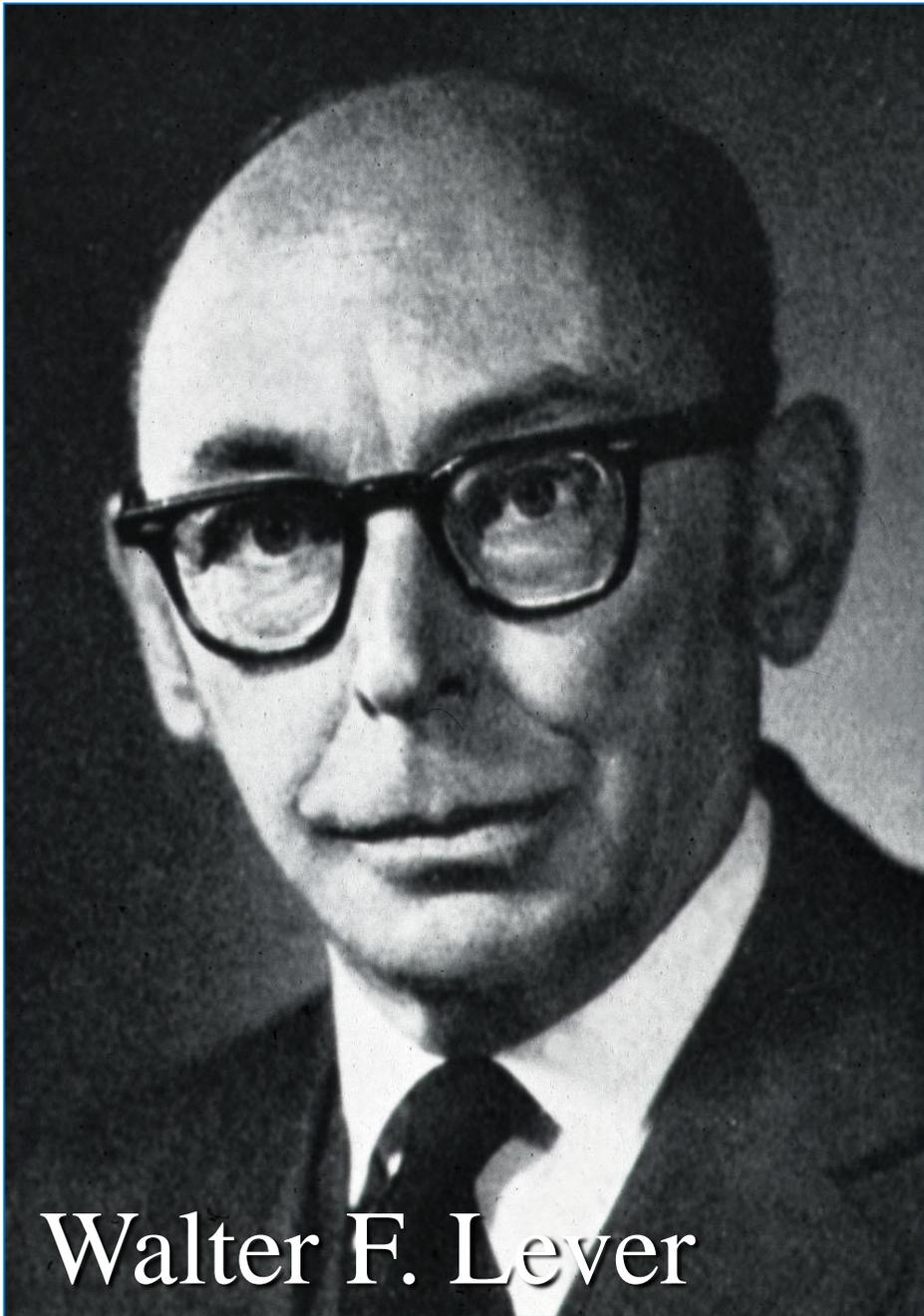
Name bzw. Inhaber	Firmenbezeichnung	Straße
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Dr. Lever, Alex

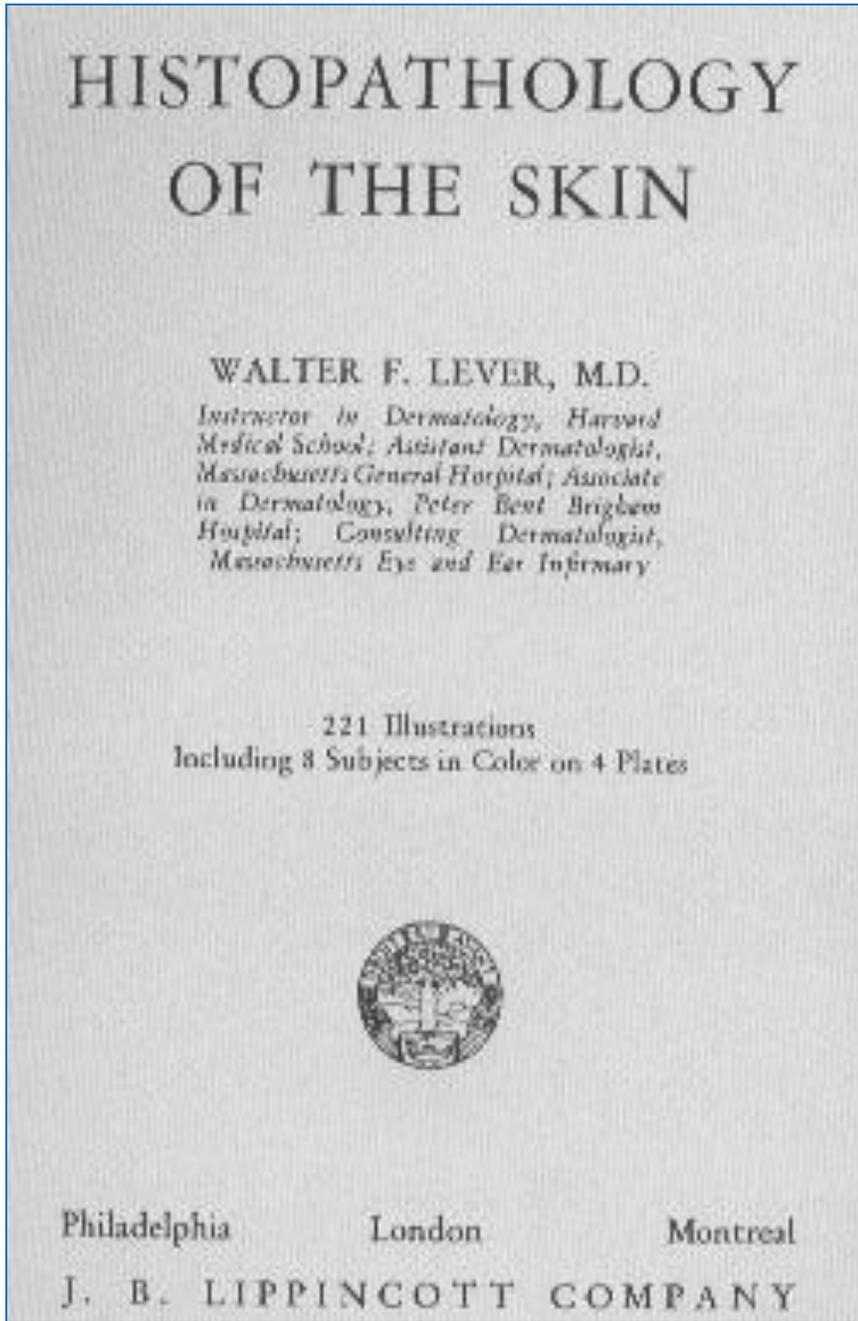
Facharzt für Haut-u.
Geschlechtskrankheiten

Adolf-Hitler-Str. 4

Walter Lever was what the Nazis called "Jewish half-breed, second degree," because his father, Alexander Lever, was half-Jewish. He had a private practice in Erfurt, Adolf Hitler street 4, and was listed in the archives of the city under the heading "Jewish firms, physicians, dentists, and lawyers." Alexander Lever stayed in Germany,



Walter F. Lever



while his son, Walter, emigrated to the Boston where had a superb academic career, described bullous pemphigoid, and wrote his influential textbook, "Histopathology of the Skin." Walter Lever never considered himself to be Jewish,

SEVENTH EDITION

Histopathology
of the
SKIN

Walter F. Lever
Gundula Schaumburg-Lever

and after his death, his widow and co-author of the 7th edition of his textbook, Gundula Schaumburg-Lever, responded to the question

Why did Walter Lever leave Germany in 1936? Did he leave because of some Jewish origin, or for any political reasons?

There was no Jewish origin. He left because he wanted to have an academic career and he did not think he could do this in Nazi Germany. When he was an intern in Cologne and studied in the library, he was told to go out and march for Hitler instead of reading.

Why and when did he go back to Germany for the first time after the war and how did he feel?

I don't know when he went back, probably in the early fifties.

whether Walter had left Germany because of some Jewish origin or for any political reasons: "There was no Jewish origin." In truth, despite his self-identification as Christian, Walter Lever would never have had the slightest chance of an academic career in Nazi Germany.

In short, for most of those who were regarded as Jews by the Nazis, the loss of their German identity was very hard to accept,



Ernst Delbanco

and some of them eventually committed suicide, e.g., Ernst Delbanco, a close co-worker of Paul Gerson Unna,

Aus der königl. dermatologischen Universitätsklinik zu Breslau.

and Fritz Juliusberg, who is remembered for his original description of pityriasis lichenoides chronica.

The new anti-Jewish legislation affected not only universities, but also physicians in private practice.

Ueber die Pityriasis lichenoides chronica
(psoriasiform-lichenoides Exanthem).

Von

Dr. Fritz Juliusberg,
Assistenzarzt an der Klinik.

The practice of insurance panel doctors of non-Aryan descent and panel doctors who have been active in Communist causes is now terminated. New admissions of such physicians to practice in the scope of health insurance will not happen any more.

German Ministry of Labour, April 22nd, 1933

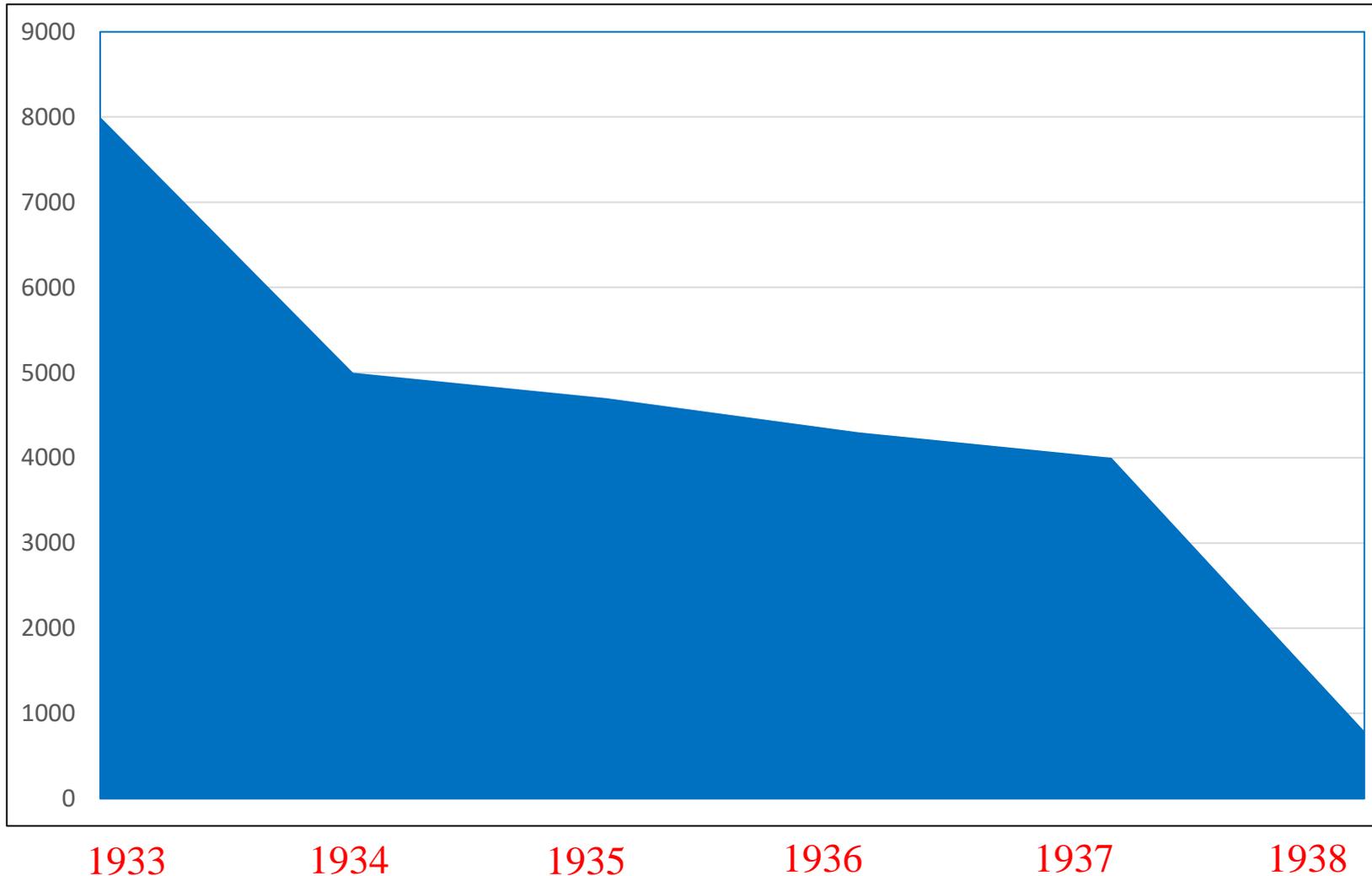
In April 1933, a decree was issued by the German Ministry of Labor according to which *“the practice of insurance panel doctors of non-Aryan descent and panel doctors who have been active in Communist causes is now terminated. New admissions of such physicians to practice in the scope of health insurance will not happen any more.”*

Praxis abgemeldet:

Dr. Max van Wien
Dr. Martha Gernichowski
Dr. Albert Reißner
Dr. Siegfried Levinger
Dr. Ludwig Haydn
Dr. Dionis Heinle
Dr. Wladimir Eliasberg
Dr. Eugen Doernberger
Dr. Hans Luxenburger
Dr. Heinrich Seitz
Dr. David Roßnitz
Dr. Eugen Koenigsberger
San. Rat. Franz Kleinschrod

As a result, many Jewish physicians had to close down the practices, and many of them left Germany:

Jewish physicians in Nazi Germany



Of about 8000 Jewish physicians in 1933, some 3000 emigrated during the first year of Nazi rule. Subsequently, however, only few left the country. In 1937, there were still 4220 practicing Jewish physicians in Germany. Those numbers were considered by the Nazis to be unacceptable. As a consequence, a decree was issued, in July 1938, that forbade Jewish physicians from practicing and withdrew their licences. Of more than 3000 Jewish physicians, only 709 were allowed to continue treating exclusively Jewish patients – not as doctors but as “health attendants.”



Felix Pinkus

Über eine neue knötchenförmige Haut- eruption: Lichen nitidus.

Von

Felix Pinkus.

(Hiezu Taf. II—IV.)

Bereits während meiner Assistentenzeit an der Breslauer Universitätsklinik für Hautkrankheiten, 1897, ist mir eine Hautaffektion aufgefallen, die bei genauester Analyse in kein bekanntes Krankheitsbild eingeordnet werden konnte und die, beim Versuch, ihr durch histologische Untersuchung näher zu kommen, nicht minder Neuheiten in ihrem Bau enthüllte. Nach langen und immer wiederholten vergeblichen Versuchen, ob sie dem Lichen planus, dem sie am ähnlichsten war, oder einer der bekannten Granulationsgeschwülste anzugliedern wäre, mußte ich sie zum Schluß als unbekannt ansehen. Ich habe sie mit Eifer die ganzen Jahre weiter verfolgt und habe dabei ein recht großes Beobachtungsmaterial angesammelt, für dessen Mitteilung ich hier den würdigsten Platz gefunden zu haben glaube.

Es handelt sich um einen unbedeutenden, sehr kleinen, und wie gleich von vornherein gesagt sein muß; in praktischer Beziehung völlig unbedeutenden Hautausschlag; diese Eigenschaften sind es wohl, welche über ihn bisher haben hinwegsehen lassen. Zudem gleicht er oberflächlich anderen, wohlbekannteren Eruptionen, namentlich dem Lichen planus in seiner mildesten Form, und ist, wie ich an mehreren Beispielen

One of them was Felix Pinkus who is best known for his original description of lichen nitidus, but who also made

Die normale Anatomie der Haut.

Von
FELIX PINKUS-Berlin.

Mit 336 Abbildungen.

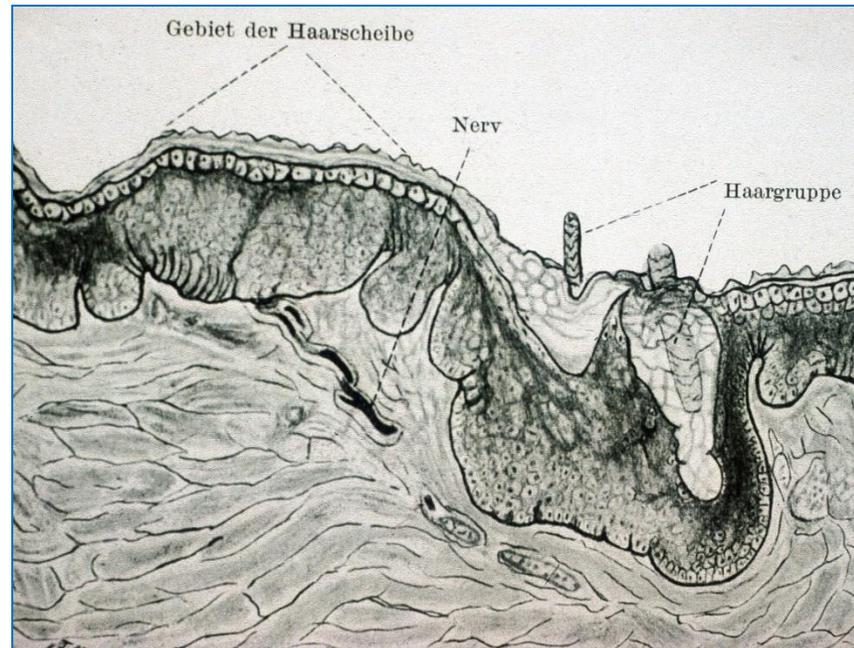
Unsere allgemeine Körperbedeckung, das Integumentum commune, nennen wir *Haut*. Sie ist das Organ, dessen Aufgabe in der Vermittlung eines großen Teils der Beziehungen des Körpers zur Außenwelt besteht.

Die Haut ist *Schutzmittel* gegen die äußere Umgebung, mit der der Körper in untrennbarem Zusammenhang und Stoffaustausch steht, denn der Körper ist zwar ein umschriebenes Gebilde, aber von der Umgebung nie völlig abgetrennt vorstellbar; *die Haut ist Organ der Wärmeregulierung und Organ der Stoffabsonderung*, unendlich viel weniger der Stoffeinnahme, ja sogar starker Schutz gegen die Einnahme; die Haut ist *Gefühlsapparat* in weitestem Sinne.

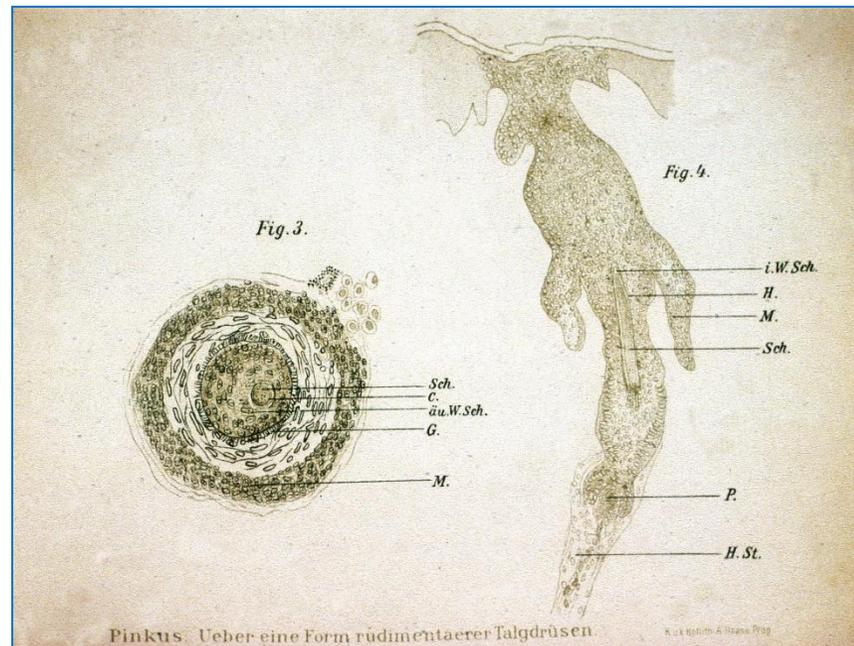
Jede Verletzung der Haut, worunter nicht nur grobe Kontinuitätstrennungen, sondern auch biologische, durch geänderten Chemismus des Körpers erzeugte Widerstandsverluste zu verstehen sind, vernichtet einen Teil dieser Eigenschaften, die nur normal funktionierend die Grundlage für völliges Wohlbefinden des Menschen bilden. Ein Nadelstich ist die Eingangspforte für den Tod“ (VELPEAU).

Die Haut ist ein gleichmäßiger, untrennbarer, bei jeder, auch der geringsten Trennung mit großen Unannehmlichkeiten reagierender Überzug des Körpers, schmiegsam und sich faltend, stets dicht anliegend. Sie ist aus Abkömmlingen des äußeren und des mittleren Keimblatts, deren Grenzen auch heute noch umstritten sind, zu einer einheitlichen Masse innig zusammengewebt.

Die anatomische Beschreibung der Haut, die nur möglich ist durch die Auseinanderreißung, durch Zerstückelung in die kleinsten Bestandteile, muß das Ganze in jedem Moment vor Augen stellen. Wenn auch Zellart für Zellart, Gewebsform für Gewebsform einzeln abgehandelt werden muß, ist es doch notwendig, diese alle stets nur als Bestandteile des großen und einheitlichen Ganzen sich vorzustellen; jede Falte an der Haut hat ihren mechanischen Wert, jede Papille besteht als Bildung von bestimmter Bedeutung, jede Zelle, jede Nervenfasern, jedes Blutgefäß erhält den bestimmten Platz durch die Mechanik des Körperaufbaues und bewahrt ihn durch seinen nach außen wirkenden Eigendruck, durch den Zug und Druck seiner Umgebung. Das uns als Ruhestadium erscheinende Bild ist das Ergebnis dauernder Spannungen nicht nur mechanischer Art, wie es uns die morphologische Entwicklung, die Durchtrennung des fertigen Körpers (LANGER) schon lange gelehrt hat, sondern feiner *elektro-chemischer Vorgänge*, Strömungen und Kräfte, unter welchem Namen wir die erst teilweise erforschten feinsten Lebensbewegungen zusammenfassen können. In der Haut sind dauernd Zug- und Spannungsvorgänge vorhanden. Das uns als solches erscheinende Gleichgewicht ist ein labiles Gleichgewicht. Nachlaß eines Moments



important contributions to the anatomy of the skin, such as the description of the “Haarscheibe” and of the mantle of the follicle, a cord of undifferentiated sebaceous cells.



Bestellung auf Thorium-X-Degea zur äußeren Behandlung von Hautkrankheiten

Thorium-X-Alkohol

2000 e. s. E. in *10* ccm
..... e. s. E. in ccm
..... e. s. E. in ccm

~~Thorium-X-Lack~~

~~..... e. s. E. in ccm
..... e. s. E. in ccm
..... e. s. E. in ccm~~

~~Thorium-X-Salbe~~

~~..... e. s. E. in g
..... e. s. E. in g
..... e. s. E. in g~~

Bemerkungen:

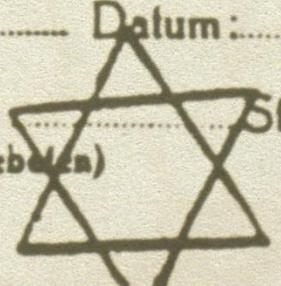
Herstellung und Versand sollen
erfolgen per Briefpost (Eilbrief) am..... zur Verwendung am.....
(Eilbrief unterstreichen, wenn erwünscht)

Zu senden an: *Frau J. Frank*

Zu berechnen an:

Name des Arztes: Datum:

Dr. Felix Pinkus
Prof. Dr. Felix Pinkus
Berlin W 50, Rankestr. 33
Postfach 36555



Zur ärztlichen
Behandlung ausschließ-
lich für Juden berechtigt

From 1938 on, all the orders and prescriptions of Felix Pinkus had to be stamped with a Star of David and a note that Pinkus was allowed to practice medicine exclusively on Jews. But the year 1938 brought many other changes:



Geb. Nr. 3-000 Nr. 375691/2
Geb. Nach Nr. 4142/39

NAMÉ DES PASSINHABERS
Felix Fraael Pinkus

BEGLEITET VON SEINER EHEFRAU

UND VON / KINDERN

STAATSANGEHÖRIGKEIT:
DEUTSCHES REICH

all Jews had to have their passports for foreign travel stamped with a large "J". By law, they had to acquire Jewish sounding surnames, Sarah for women and Israel for men. Hence, it was no Felix Pinkus any more, but Felix Israel Pinkus.

Die Bibliothek
ist täglich
von 12-20 Uhr
geöffnet

**Juden
Zutritt verboten!**

Jews were barred from schools, resorts, and libraries. On the front doors of public buildings, signs were attached saying "Access for Jews Prohibited,"



and even the benches in parks and on sidewalks were reserved "Only for Aryans."

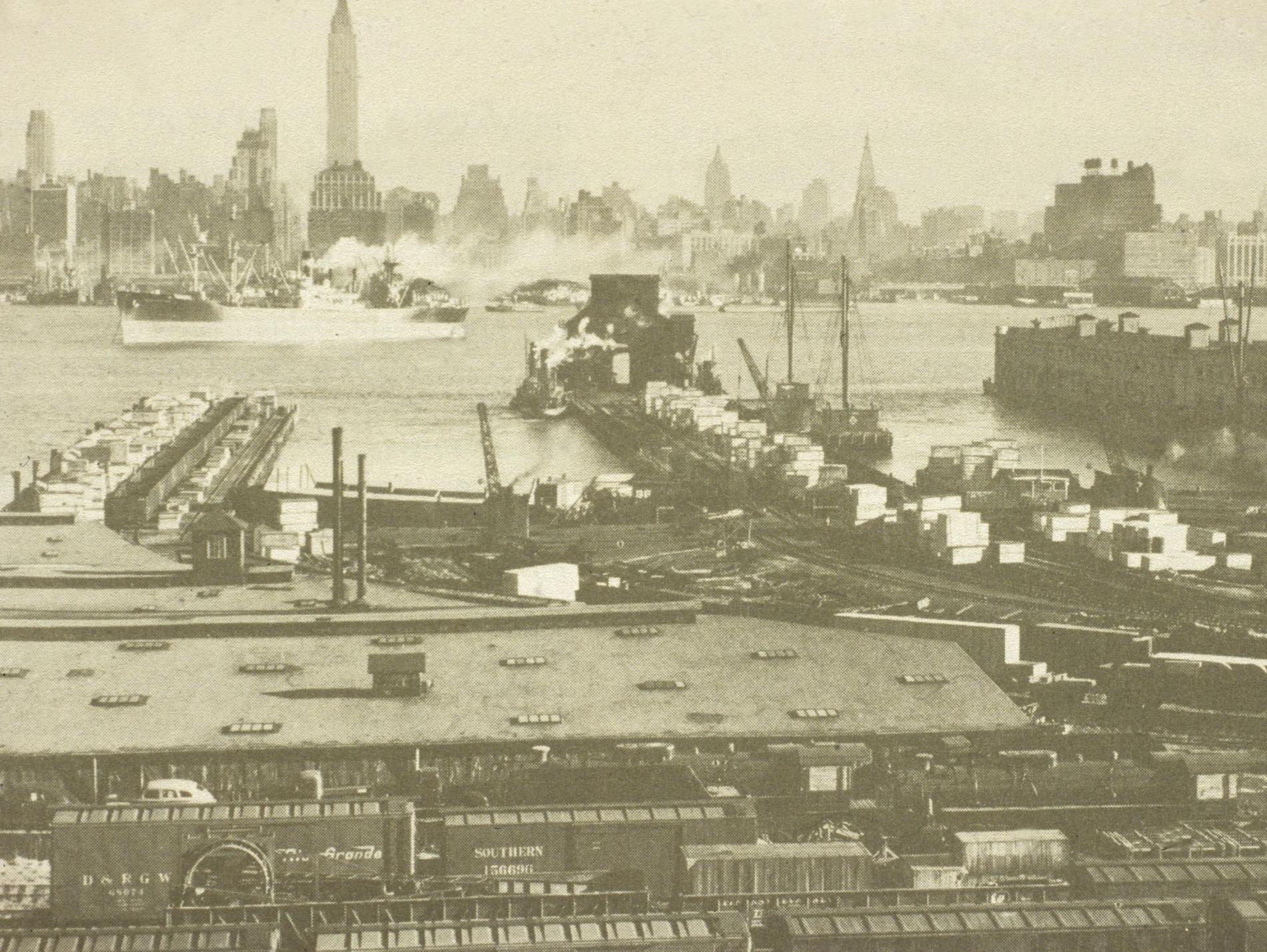


During the nationwide program of November 9, 1938, almost a hundred Jews were killed, their shops and houses were destroyed,



and synagogues were set on fire.

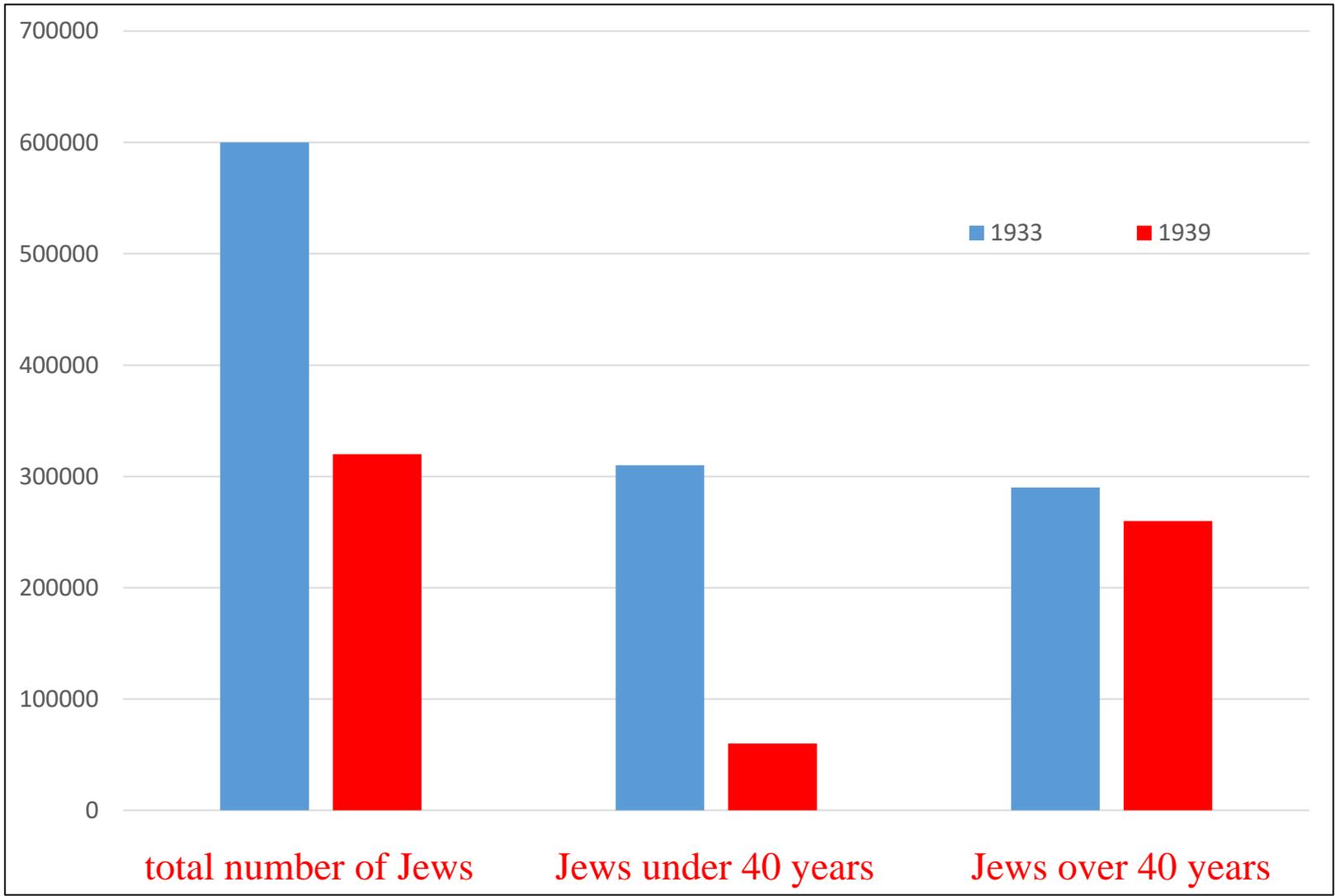
These events ultimately destroyed the illusion that there might be a future for Jews in Germany. Many of those who had borne their fate and hoped for changes to the better, were now willing to emigrate, but by now it was extremely difficult to find a place of refuge.



The United States, for instance, accepted only 21.000 Jewish immigrants during the entire war, and those arrived without any means,



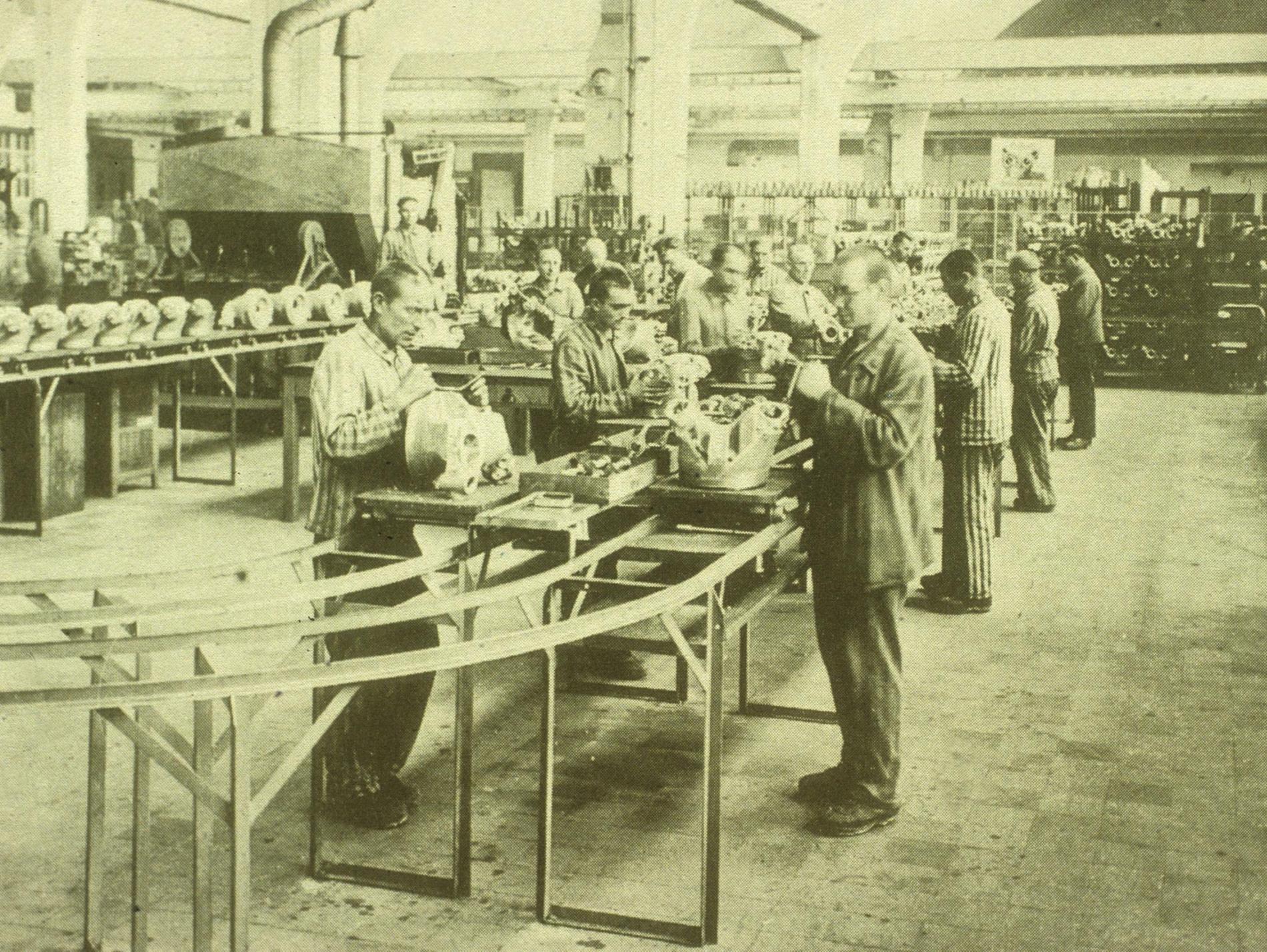
just with a basket in their hands.
Those poor perspectives influenced the decision to emigrate,



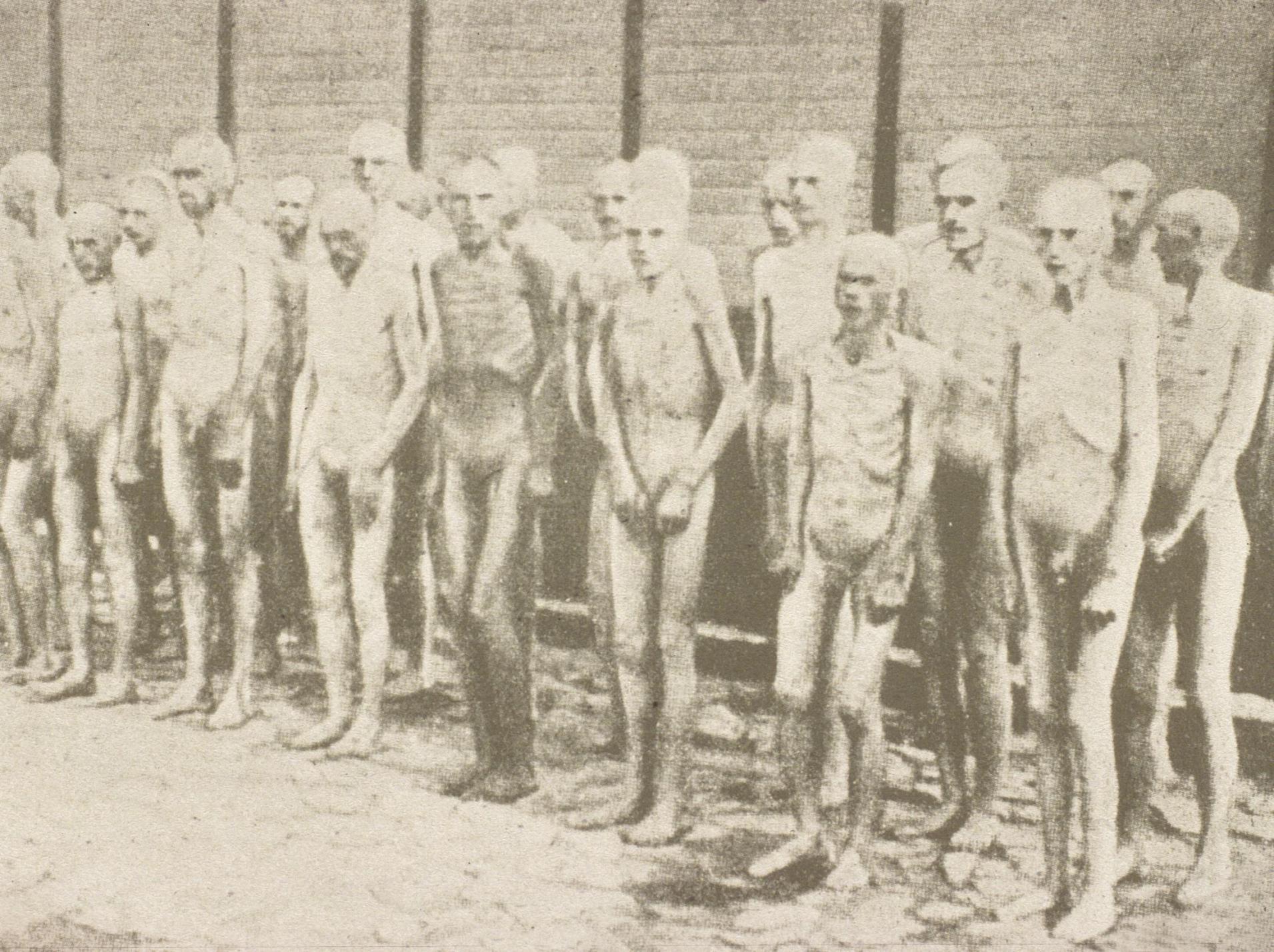
a decision that was made predominately by young people, persons under 40 years of age, who were responsible for the shrinking population of Jews in Germany. In contrast, the population of Jews over 40 years of age remained relatively constant. Those older persons were rooted in Germany and did not see a future abroad - therefore they stayed, and were subjected to a constantly increasing degree of suppression and violence. With the beginning of the war in September, 1939, the movements of Jews were restricted, and their rations cut.



Since 1941, Jews had to wear a badge with a yellow Star of David.



They were pushed into forced labor, and most of them were taken to labor camps



that were later changed
into annihilation camps



where approximately five million persons were gassed.

Among the Jews who died in concentration camps were several prominent dermatologists,

II. Aus der Hautkrankenstation des städtischen Krankenhauses in Frankfurt a. M.

Ueber eine bei Syphilitischen vorkommende Quecksilberreaktion.

Von Oberarzt Dr. Karl Herxheimer und Stabsarzt a. D.
Dr. Krause.

Schon vor mehreren Jahren hatte der eine von uns auffällige Veränderungen syphilitischer Exantheme nach Hg-Zuführung gesehen. Vor mehr als Jahresfrist machten wir dann wieder eine solche Beobachtung an einem mit makulösem Syphilid behafteten Patienten, die unsere Aufmerksamkeit rege machte. Das Exanthem war nämlich nach erstmaliger Einklatschung mit 4,0 grauer Quecksilbersalbe nach etwa 24 Stunden derart verändert, dass weder Grösse, noch Gestalt, noch Farbe der Einzeleffloreszenz mehr in der ursprünglichen Weise vorhanden war. Dieselbe war grösser, über die Haut erhaben geworden und hatte eine hochrothe Farbe angenommen, besass also jetzt eher die Eigenschaften einer Effloreszenz des Erythema exsudativum multiforme. Nach abermals 24 Stunden war der Ausschlag völlig geschwunden.

including Karl Herxheimer, the former chairman of dermatology in Frankfurt who is best known for his description of the Herxheimer reaction in the treatment of syphilis

Aus der dermatologischen Abtheilung des städtischen Krankenhauses zu Frankfurt a/M.

Ueber Acrodermatitis chronica atrophicans.

Von

Dr. **Karl Herxheimer**,
Oberarzt. und Dr. **Kuno Hartmann**,
Assistenzarzt.

Wer bei der ins Ungemessene gewachsenen und geradezu verwirrenden Nomenclatur der Dermatologen sich unterfängt, einen neuen Namen für eine Hautkrankheit einzuführen, der trägt eine besondere Verantwortung. Er muss erweisen können, dass die bisherigen Namen nicht zweckmässig sind, und dazu bedarf es einer besonderen Erfahrung auf dem Gebiet der betreffenden Erkrankung. Beiden Bedingungen — so hoffen wir — wird durch das, was wir in dem Folgenden niedergeschrieben haben, Genüge geleistet. Die Krankengeschichten entstammen dem letzten Jahrzehnt und beziehen sich auf Patienten, die sowohl in der Privatpraxis des Dr. K. Herxheimer, als auch auf der dermatologischen Abtheilung des hiesigen städtischen Krankenhauses, als endlich in der hiesigen städtischen Poliklinik für Hautkranke zur Beobachtung kamen.

Krankengeschichte.

Fall I. Priv. Pat. V., 41 J., verh., Schuhwaarenhändler in einem Dorfe bei Worms. Vater starb mit 71 Jahren, Mutter lebt, ist 71 Jahre alt und gesund. Die 3 Geschwister des Patienten sind gesund, ebenso seine Kinder. Eltern und Geschwister hatten keine Hautkrankheiten. Patient selbst will keine Kinderkrankheiten gehabt haben. Mit 11 Jahren stellte sich eine „Nervengeschwulst“ (nach der Beschreibung ein Neurofibrom) am rechten Oberschenkel an dessen Aussenseite ein, die mit 21 Jahren in einer chirurgischen Universitätsklinik excidirt wurde. An der Exciisionsstelle befindet sich jetzt eine 30 Cm. lange, glatte, weisse Narbe, die keine Besonderheiten aufweist

Originalarbeiten.

VIII.

(Aus der Dermatologischen Universitätsklinik zu Frankfurt a. M.)

Über die epidermidale Basalmembran.

Von

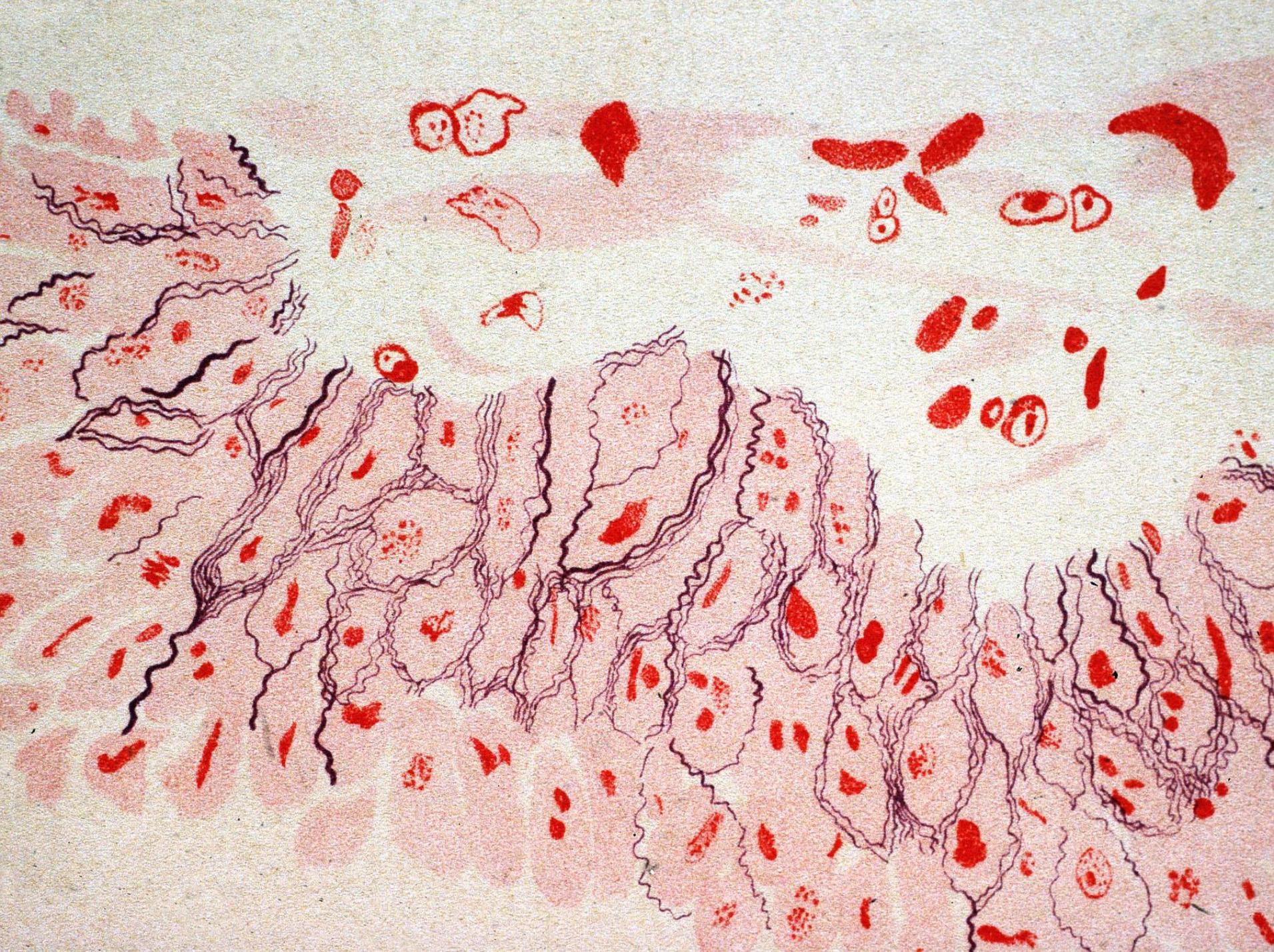
Prof. Dr. **KARL HERXHEIMER**.

(Hierzu Taf. VIII)

Überblickt man die Literatur der Basalmembran der Epidermis, so muß man gestehen, daß die Ansichten darüber kaum geklärt sind, ja sogar sich mehrfach diametral gegenüberstehen.

Kaposi schreibt in seinem Lehrbuch der Hautkrankheiten: „Die Malpighische Schicht bekleidet unmittelbar die mit einer Art strukturlosen Membran sich absetzende Coriumoberfläche.“ *Unna* setzt in *Ziemssens* Handbuch der speziellen Pathologie und Therapie seine Ansicht mit folgenden Worten auseinander: „Eine durchsichtige Substanz überzieht den ganzen Papillarkörper in minimaler Dicke, aber ohne daß irgendwo doppelte Konturen das Vorhandensein einer eigenen Membran kundgeben, wie solche schon von *Todd* und *Bowman* und noch neuerdings von *Ranvier* behauptet wurde, während andere Forscher, wie *Kölliker*, dieselbe stets leugneten. Diese Zwischensubstanz, welche sich auch in das Innere des Papillarkörpers fortsetzt und wahrscheinlich mit der Kittsubstanz identisch ist, läßt sich mit Trypsinbehandlung entfernen und dann verschwindet mit dem Relief der Furchen auch der äußere helle Saum der Papillen und die Bindegewebsfibrillen stehen nackt zu Tage.“ *Duhring* (Diseases of skin. Bd. 1. S. 7) läßt sich über die beregte Frage wie folgt vernehmen: „The boundary between the corium and the epidermis is marked by a pale, thin, membranous structure, with oval nuclei, the so-called Basement or Basal membrane conspicuous in stained preparations. According to *E. Kleins* observations, it is made up to the basis of the individual cells which has undergone a chemical and morphological change, and here is a product of the deepest layers of the epithelium.“ *Darier* (la Pratique. Dermatol. Bd. I. S. 21) schildert die Mem-

and of acrodermatitis chronica atrophicans, but who also made important contributions to the anatomy of the skin, such as the description of the epidermal basement membrane

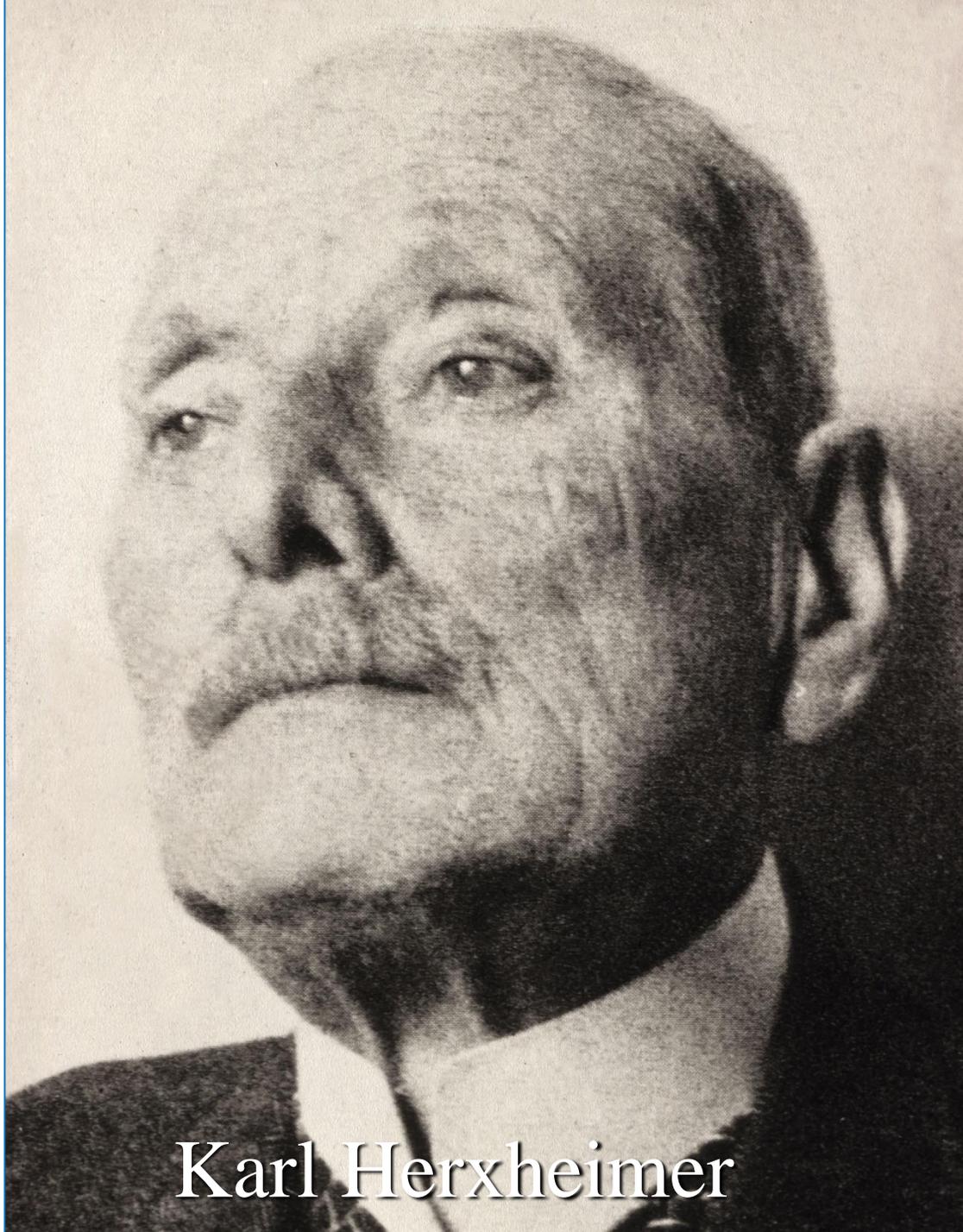


and of tonofibrils within keratocytes. Herxheimer had already retired in 1930. After the Nazis had assumed power, his friends urged him repeatedly to leave the country,



Karl Herxheimer

but Herxheimer insisted to stay in his hometown Frankfurt which he knew and where he was known and respected. However, his living conditions soon deteriorated; within a few years the proud and self-assured professor



Karl Herxheimer

was turned into a man marked by the hardships of his time, isolated and impoverished because his house, his books, and most of his personal belongings had been confiscated.

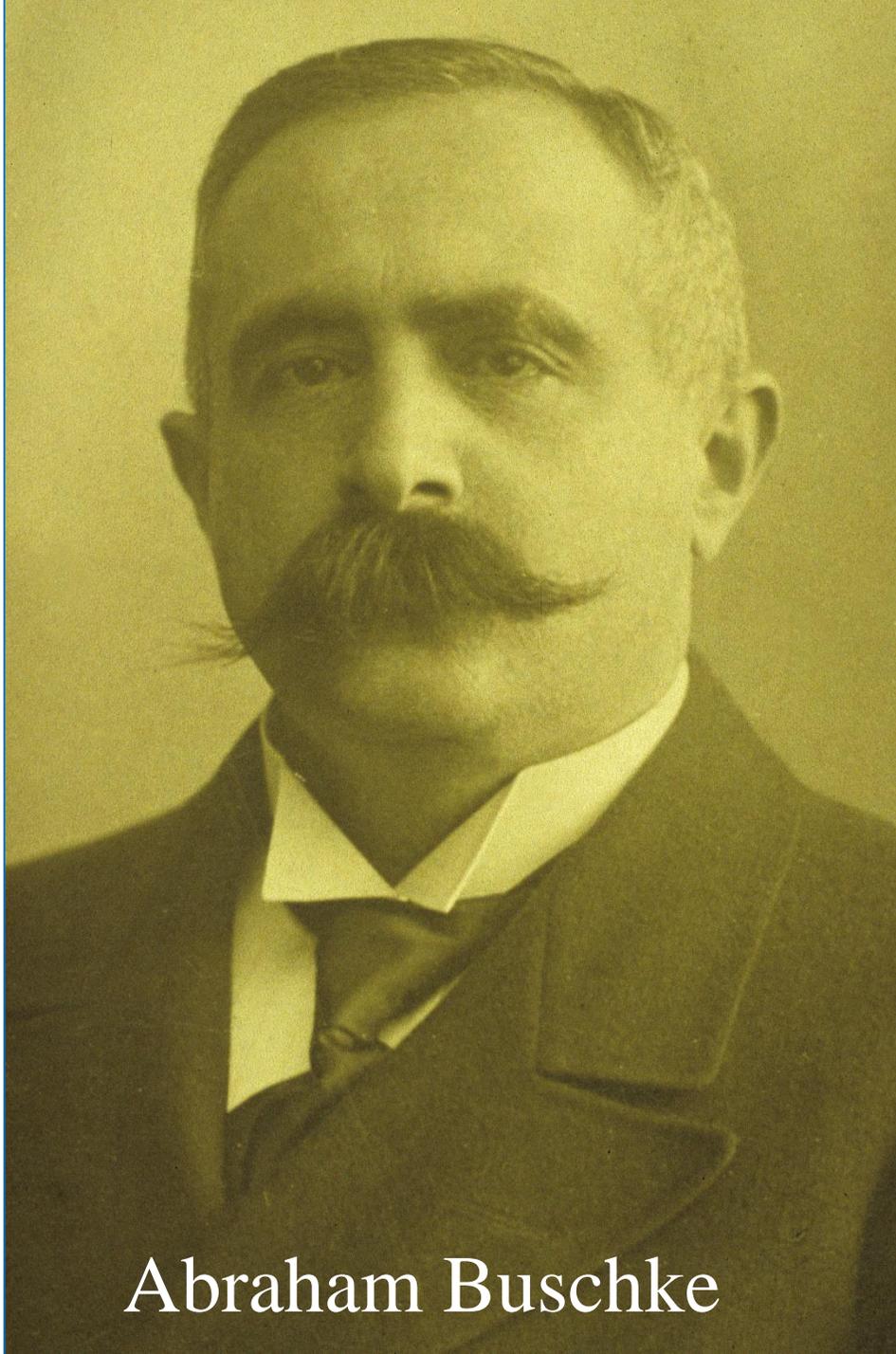
The former Jewish university professor, Dr. Karl Israel Herxheimer, resident here, Friedrichstr. 26 I, identification number Q 02182, still receives public benefits from the local university cashdesk. In order to avoid overpayment, I ask for information of my office in the case that Herxheimer should be evacuated.

Registrar of the University of Frankfurt, August 24, 1942

On August 24, 1942, the registrar of the University of Frankfurt wrote this letter to the Gestapo: *“The former Jewish university professor, Dr. Karl Israel Herxheimer, resident here, Friedrichstr. 26 I, identification number Q 02182, still receives public benefits from the local university cashdesk. In order to avoid overpayment, I ask for information of my office in the case that Herxheimer should be evacuated.”* Three days later, Herxheimer was arrested, taken to the railway station,



put in a sealed waggon,
and together with
hundreds of other Jews
transported to
Theresienstadt where he
died of dysenterie and
starvation only three
months later.



Abraham Buschke

At about the same time,
another giant of
dermatology arrived in
Theresienstadt: Abraham
Buschke,

Aus der Dermatologischen Abteilung des Virchow-Krankenhauses
(Dirigierender Arzt: Prof. BUSCHKE) in Berlin

Ein Fall von Dermatofibrosis lenticularis disseminata und Osteopathia condensans disseminata

Von

Prof. Dr. A. BUSCHKE und Dr. HELENE OLLENDORFF, Assistentin

Mit 5 Abbildungen im Text

Die Beschreibung des folgenden Hautleidens erscheint von Interesse seiner Besonderheit und seiner Koinzidenz mit seltenen Knochenbefunden wegen.

Bei einer Patientin¹⁾, die Anfang Mai 1927 wegen Magenbeschwerden unsere Ambulanz aufsuchte, wird das unten beschriebene Hautleiden als Nebenfund konstatiert.

Anamnese: Vater und ein Bruder Trinker. Als Kind Typhus, Diphtherie, Masern. Erste Regel mit 15 Jahren, immer pünktlich bis vor einem halben Jahre, seitdem in größeren Zeitabständen. Nie Verkehr gehabt. Im Krankenhaus (speziell im Virchow-Krankenhaus) wiederholt schon wegen Bronchitiden und chronischer Gastritis in Behandlung gewesen. Wegen angeblicher „geschlossener“ Lungentuberkulose in verschiedenen Lungenheilstätten verschickt gewesen. Das Hautleiden, das der Patientin keinerlei Beschwerden verursacht, ist in den früheren Krankengeschichten, die uns zugänglich waren, nicht vermerkt. Es ist angeblich von der Patientin selbst erst vor etwa 6 Jahren zum erstenmal am Körper gesehen worden. Doch erscheinen die Angaben der stark debilen Patientin nicht zuverlässig.

Status: 41 jähr. infantil aussehende, debile Frau in leidlichem Ernährungszustand. Säbelscheidentibien.

Pupillen prompt auf Licht und Konvergenz. Sehkraft rechts und links $\frac{5}{6}$. Fundus rechts und links normal. Gesichtsfeld nicht aufzunehmen. (Augenabteilung Direktor: Prof. FEHR.)

Mund: Tonsillen beiderseits gering vergrößert und mit einzelnen Pfröpfen besetzt. Zähne rachitisch verändert, Zunge o. B.

Ohren: Rechts randständiger trockener Defekt hinten oben mit epithelisierter Pauke. Nase o. B.

Cor.: Grenzen normal. Systol. Unreinheit über der Spitze, zweiter A. T. stark akzentuiert.

Lungen: Linke Spitze vorn und hinten gedämpft. Über der ganzen linken Lunge Atemgeräusch verschärft. Untere Grenzen beiderseits gut verschieblich.

Abdomen: Weich, Leber, Milz nicht vergrößert. Druck- und spontane Schmerzempfindlichkeit in der Magengegend.

Genitale: Hymen intakt. Geringer schleimig-weißlicher Ausfluß. Innere Untersuchung (Gynäkologische Abteilung: Direktor Prof. STICKEL): Uterus normalgroß, antevvertiert, Adnexe nicht verdickt. Kein Infantilismus genitalis.

¹⁾ Eine kurze Demonstration der Patientin, ohne sichere Diagnose, fand in der Berliner Dermatologischen Gesellschaft am 10. V. 1927 statt.

ÜBER CARCINOMÄHNLICHE CONDYLOMATA ACUMINATA DES PENIS*).

Von

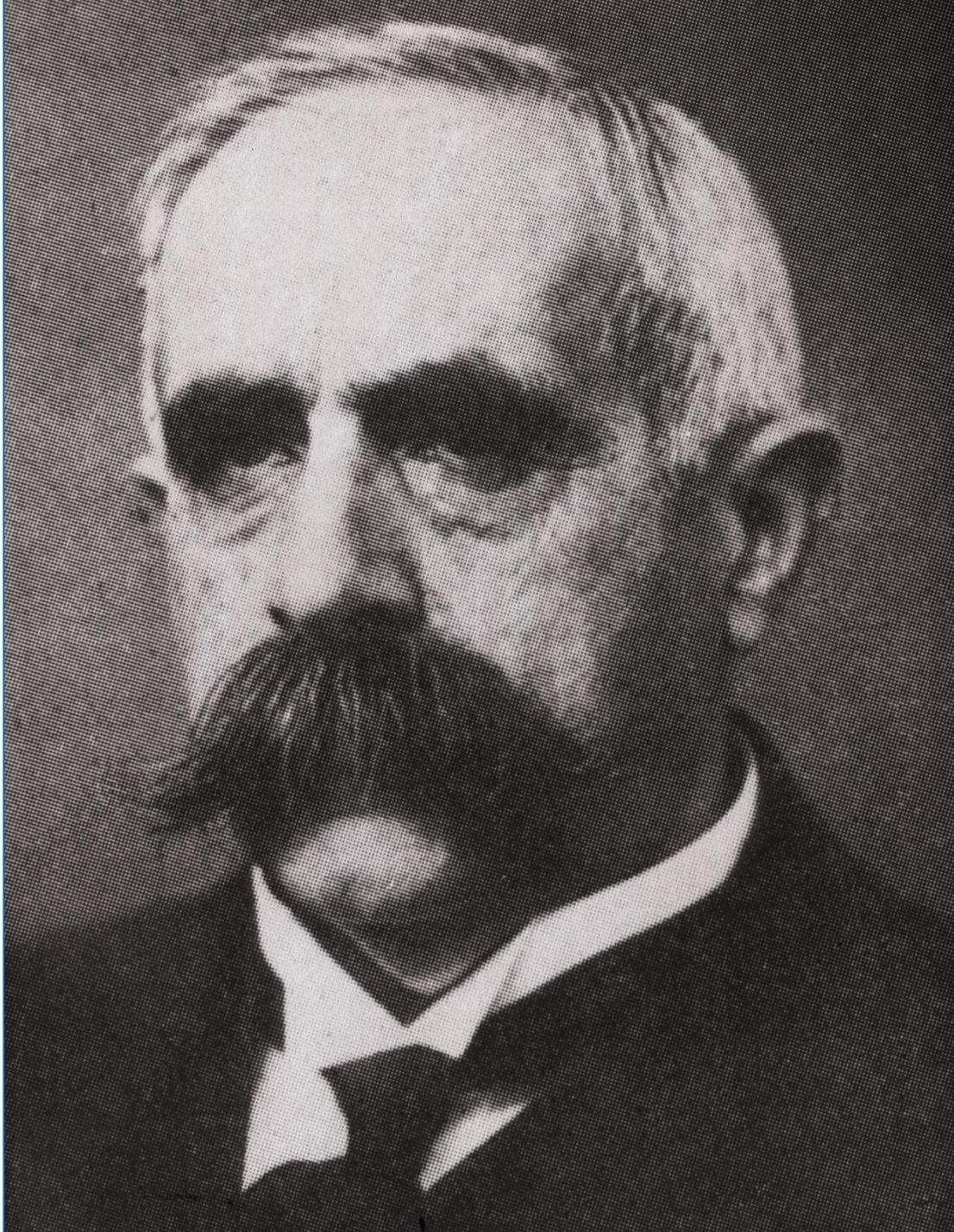
Prof. Dr. A. BUSCHKE und Dr. LUDWIG LOEWENSTEIN,
Assistenzarzt.

Aus der Dermatologischen Abteilung des Rudolf-Virchow-Krankenhauses zu Berlin
(dirig. Arzt: Prof. Dr. A. BUSCHKE).

Nach seinem histologischen Charakter kann man das spitze Kondylom als papilläres Fibroepitheliom bezeichnen.

Es setzt sich aus vielfach verzweigten Papillen zusammen, deren Summe den an Blut- und Lymphgefäßen sowie an Spindel- und Mastzellen reichen Bindegewebsstock bildet. Der Grundstock wird von üppig wucherndem dick geschichtetem Epithel überzogen, welches in der Hauptmasse weich, unverhornt ist. Bezüglich der Ätiologie neigen wir auf Grund klinischer Erfahrungen zu der auch von anderen Autoren geteilten Ansicht, daß es sich wohl um eine Infektionskrankheit handle (vgl. auch die experimentellen Untersuchungen aus der Jadassohnschen Klinik); uns ist eine Übertragung allerdings bisher nicht geglückt. Gelegentlich haben wir bei Eheleuten und Geschwistern die Affektion beobachtet. Vielleicht kommt ein filtrierbares Virus ätiologisch in Betracht. LIPSCHÜTZ vermochte jüngst durch histologische Untersuchungen die Erregerfrage des spitzen Kondyloms und verwandter Gebilde aufs Neue in Fluß zu bringen; er konnte in der akanthotischen Stachelschicht konstant und in großer Menge Zellkernveränderungen nachweisen, die ihn veranlaßten das spitze Kondylom unter die „Einschlußkrankheiten“ der Haut einzureihen. Alle diese Fragen harren aber noch der definitiven Lösung.

whose name is linked
eponymically to several
diseases, e.g., scleredema
of Buschke, the Buschke
Ollendorff syndrome, and
the giant condyloma of
Buschke and Löwenstein.



Buschke was dismissed from his position as director of dermatology at the Rudolf Virchow hospital in Berlin in 1933. Subsequently, he worked at the hospital of the Jewish community, and because he did not want to give up these duties, he even returned from a trip to the United States in 1937. Five years later, Buschke and his wife, were taken to Theresienstadt. Still in the concentration camp, a few weeks after her husband's death,

... he worked until Nov. 4, 1942, when fate caught up with us, and we were evacuated to Theresienstadt. This shock was probably the beginning of the end. He could not adjust to the changed life so devoid of the possibility of working, under the dreary conditions here in Hell, and he died, totally exhausted and weakened, from severe enteritis, on Febr. 24, 1943.

Erna Buschke, 1943

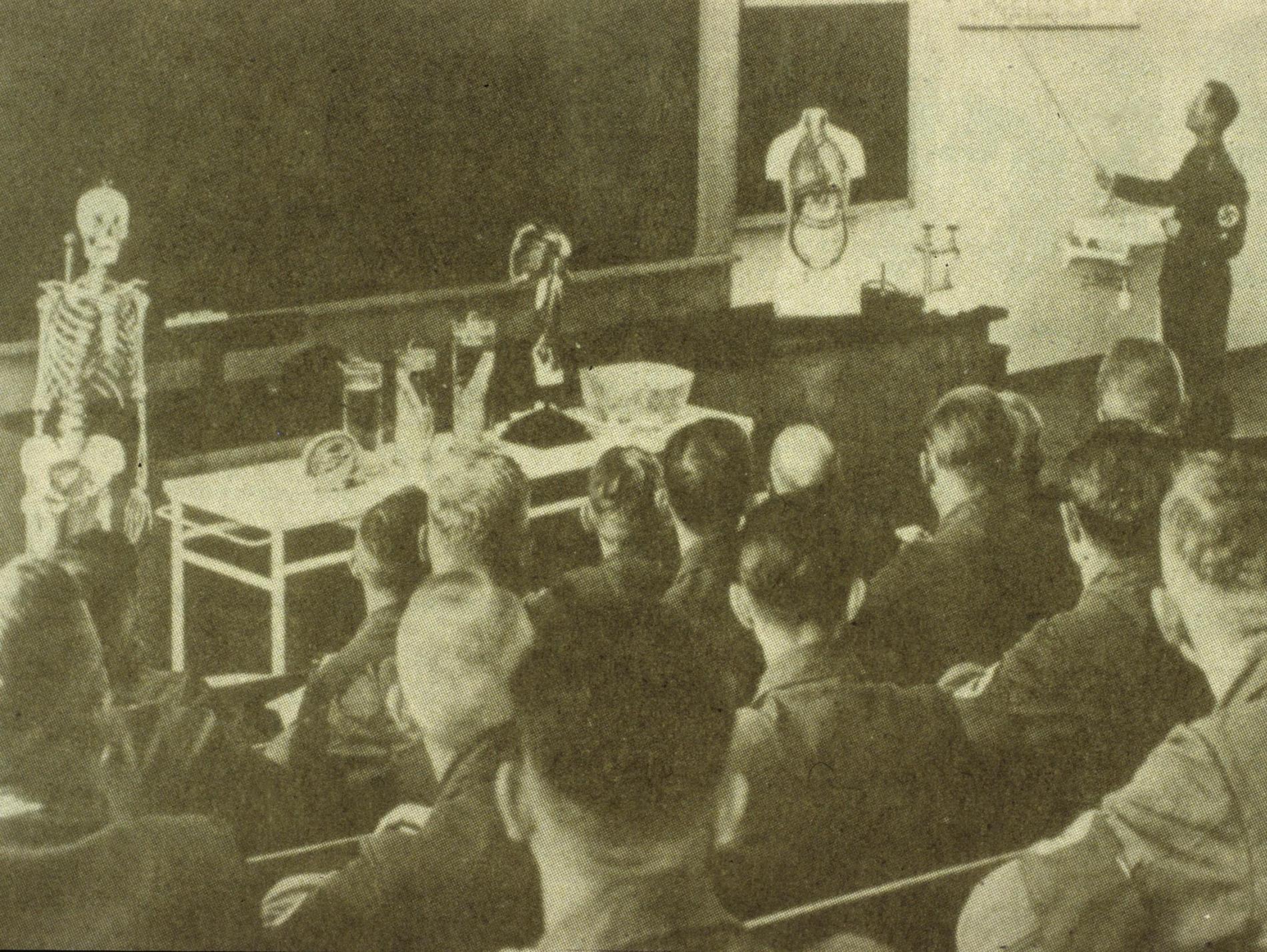
Erna Buschke wrote in a short, secretly kept biography:

"... he worked until Nov. 4, 1942, when fate caught up with us, and we were evacuated to Theresienstadt. This shock was probably the beginning of the end. He could not adjust to the changed life so devoid of the possibility of working, under the dreary conditions here in Hell, and he died, totally exhausted and weakened, from severe enteritis, on Febr. 24, 1943."

How was it possible that all this happened? Why did not the public resist, especially physicians with their allegedly high ethical code?



One reason surely was pressure. For example, at the medical faculty of the University of Düsseldorf, all residents who did not join the Nazi party were dismissed. It must be acknowledged, however, that physicians belonged to the strongest carriers of Naziism.



At the universities, doctors in Nazi uniform became a usual sight. The ideology of racial hygiene began to be taught at medical schools, and its proponents advanced to top positions,



Hans Reiter

e.g., Hans Reiter who is remembered for his original description of Reiter's disease. Reiter had taught hygienics with a strong racist emphasis already in the Weimar Republic and had belonged to the first group of professors to sign an oath of allegiance to Hitler. In 1933, he was made full professor and eventually became head of the Federation of Scientific Societies and president of the Robert Koch Institute in Berlin.

Erblichkeit, Rassenhygiene und Bevölkerungspolitik.

Anlage, Vererbung und Rasse.

Ein geschichtlicher Rückblick. (Schluß.)

Von Georg Sticker.

Die heutige Forschung nach den Erscheinungen und Gründen vollwertiger und minderwertiger Einzelanlagen, Stämme, Rassen, die Erbbiologie, bedient sich im wesentlichen der folgenden Mittel:

1. Aerztliche Beobachtung und Ueberlegung nach dem alten hippokratischen Vorbilde, unter Aufstellung möglichst langer und breiter Ahnentafeln mit genauester Feststellung der Lebensgeschichte und einfallender Krankheitserscheinungen; sogenannte Pathographien wie sie vorbildlich Paul Moobius geschrieben hat; dazu Kriminalbiologie im engeren Sinne.

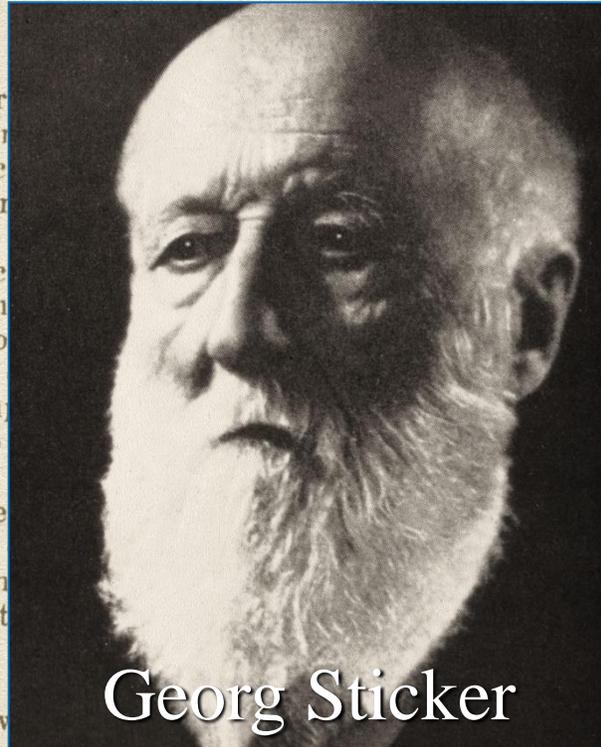
2. Die zahlenmäßige Feststellung der Artmerkmale, der Abweichungen von der Art nach Form und Breite und Ziffer, gemäß den Grundsätzen der sogenannten Statistik oder numerischen Methode, wie sie der Mediziner und Theologe Johann Peter Süßmilch (1707—1767) vor zweihundert Jahren in die Naturwissenschaft eingeführt, der Engländer William Farr (1807—1883) und der französische Kliniker Pierre Louis (1787—1872) gefördert und wie sie dann die Arbeiten

des belgischen Anthr und des Londoner An unentbehrlich gemac

3. Die Ausdehnung schengestalt auf ihr physikalische, e der Marburger Path neke (1824—1882) vo und wie sie in Form suchen von Blutgruppen, Max v. Grub angeregt haben.

4. Die Erweiterung der menschl des ganzen tierischen bilde des Aristot Charles Darwin gegeben hat.

5. Der naturv



Georg Sticker

The racist beliefs of the Nazis were spread in respected medical journals. For example, Georg Sticker, medical historian at the University of Würzburg who is remembered for describing and naming erythema infectiosum, wrote the following in an article on “Genetics, race hygiene, and population politics” in the prestigious Münchener Medizinische Wochenschrift:

The German people ... has often been close ... to giving away its house, stove, and right of homeland to parasitic rabble that hardly has a right to live. At last it feels that the own existence means duty, and that destiny demands from everybody willing to live to maintain himself. A Führer has arisen with a strong will who speaks out what we have to want and ought to do, unconcerned of the wimpering of a false, hypocritical humanity. If the German people, says Adolf Hitler, wants to recover and continue to live, it has to recognize the duties of the national racial state and must not have ears for the weaklings who cry and bemoan interferences into the holy rights of men.

Georg Sticker, 1933

“The German people ... has often been close ... to giving away its house, stove, and right of homeland to parasitic rabble that hardly has a right to live. At last it feels that the own existence means duty, and that destiny demands from everybody willing to live to maintain himself. A Führer has arisen with a strong will who speaks out what we have to want and ought to do, unconcerned of the wimpering of a false, hypocritical humanity. If the German people, says Adolf Hitler, wants to recover and continue to live, it has to recognize the duties of the national racial state and must not have ears for the weaklings who cry and bemoan interferences into the holy rights of men.” Parenthetically, with the refugee crisis, statements such as this one are currently being uttered again in political fora, in Europe as well as in the United States and many other countries.



In short, among the established teachers of medicine, there were many fanatical Nazis. This was even more so among younger physicians who faced an insecure future in the Weimar Republic because of a substantial unemployment rate.

The misery of the rising generation of German physicians ... will be solved immediately when, in the Future Third Reich, fellow Germans will have themselves treated only by physicians of German descent.

NSDAP, 1930

To them, the Nazi party had offered a solution by proclaiming in 1930: *“The misery of the rising generation of German physicians ... will be solved immediately when, in the Future Third Reich, fellow Germans will have themselves treated only by physicians of German descent.”*

Verwaltung der Städt. Krankenanstalten
Landsberg (Warthe).

Sofort

Jüngerer Arzt (Pg.) für hauptamtliche Stellung

gesucht. Bedingung: Gründliche wissenschaftl. Ausbildung, schnelle Auffassungsgabe und schriftstellerische Befähigung. Schriftliche Angebote nebst Lebenslauf, Ahnentafel einschl. der Urgroßeltern, Zeugnisabschriften und Lichtbild unter W. 8273 beförd. Walbel & Co. Anzeigen-Gesellschaft, München 23, Leopoldstr. 4.

Die Stelle eines

ärztlichen Direktors

der Städt. Frauenklinik Stuttgart mit 192 Betten (Geburtshilfe und Gynäkologie) ist zu besetzen. Gehalt nach besonderer Vereinbarung. Konsiliarpraxis, Sprechstunden- u. Gutachtertätigkeit sind gestattet. Eintritt möglichst bald. Reichsrechtliche Regelung der Anstellungsbestimmungen ist in Aussicht zu nehmen.

Bewerber mit besonderer Befähigung, die langere erfolgreiche klinische Tätigkeit nachweisen können, werden ersucht, ihre Bewerbung m. Lebenslauf, Stammliste, Zeugnisabschriften, Nachweis über die arische Abstammung und einem Ausweise über wissenschaftliche Arbeiten bis zum 30. Dezember 1933.

Stuttgart, 4. Dezember 1933.

Bürgermeisteramt.

Bayerische Landesärztekammer Abteilung Unterstützungswesen

Verzeichnis der Weihnachtsspenden (zugleich Quittung).
4.-9. 12. 1933.

Uebertrag: 3514 RM, Eckart-Traunstein 10 RM, Mößmer-
Landshut 10 RM, Müller-Haldenwang 10 RM, Ungenannt
30 RM, San.-Rat Maier-Augsburg 10 RM, Kunstmann-Fürth

Rassen- kundliche u. rassen- hygienische Werke J. F. LEHMANN'S VERLAG MÜNCHEN

Kankeleit: Unfruchtbar-
machung aus rassenhygienischen
und sozialen Gründen. Mit
7 Abb. u. 10 Tabellen. 1929.
Geh. 4,90 RM., geb. 6,30 RM.

Kaup, Konstitution u. Umwelt
im Lehrlingsalter: 1. Kaup:
Konstitutionsdienstpflicht 2,70
RM.

2. Epstein: Maschinen-
bauer, Schlosser, Schmiede.
Alexander: Jugendliebe
Kaufleute. 1,50 RM.

Kern, Stammbaum und Art-
bildung der Deutschen. Ein
kultur- und rassengeschicht-
licher Versuch. Mit 445 Abb.
Geh. 11,70 RM., geb. 13,50 RM.

Konopath H., Ist Rasse
Schicksal! Grundgedanken der
völkischen Bewegung. 3. Aufl.
Mit 28 Abb. Geh. 1 RM.

Kynast, Dr. K., Apollon und
Dionisos. Nordisches u. Un-
nordisches innerhalb der Re-
ligion der Griechen. Eine
rassenkundl. Untersuchung
Mit 4 Bildtafeln. Kart. 4 RM.,
geb. 5,40 RM.

Lenz, Ueber die biologischen
Grundlagen der Erziehung.
2. Aufl., 1927. 1,35 RM.

Lichtbilder zur Rassenkunde
6 1/2 x 10 cm. Kaufpreis 35 M.,
Leihgebühr für einen Abend
10 M. 1 Film mit 69 Bildern.
Filmbandbreite 3,4 cm. 6,50 M.

gendiagn. Bedingung. Meldungen mit Zeugn., Bild und
Lebenslauf unter W. 8265 befördert Walbel & Co. Anzei-
gen-Gesellschaft, München 23, Leopoldstr. 4.

Deutscher Arzt im Ausland

welcher nach Deutschland zurückkehren möchte, hat
ausgezeichnete Praxis mit vollkommener Einrichtung
wie Röntgenappar., Diathermie etc., Haus, Möbel, Auto
etc. in fast rein deutscher Stadt nahe Großstadt abzu-
geben. Gute Kenntnisse in Gynäkologie und Chirurgie
erforderlich, da selbst Operateur, Hospital gegenüber
Wohnung. Angeb. unter W. 8266 befördert Walbel & Co.
Anzeigen-Gesellschaft, München 23, Leopoldstr. 4.

Wir suchen für die städtische Frauenklinik Stuttgart
zu möglichst baldigem Eintritt einen

Assistenzarzt

Anstellung privatrechtlich. Besoldung nach Gruppe 6
der städt. Besoldungsordnung (in den Anfangsstufen
gleichlautend mit Gruppe 2c der Reichsbesoldungs-
ordnung). Bewerbungen von Herren mit entsprechender
Vorbildung unter Einschluss von Lebenslauf,
abschriften und Nachweis der arischen Abstammung
bis 30. Dezember 1933.

Bürgermeisteramt.

Baldige Praxis-Abgabe

an zulassungsberechtigten arischen Kollegen. Meiniger
Arzt am Ort, Bahnstation etwa 60 Kilometer von Frank-
furt a. M. entfernt. Gute Durchschnitts-Einnahme
in den letzten 4 Jahren 120.000 RM. ohne Autobenüt-
zung. Hausübernahme mit Anzahlung von RM 10.000.—
unerläßliche Bedingung. Anwesen hat el. Licht, Wasser-
leitung, Bad, 8 Zimmer, reichlich Nebenräume und liegt
in wundervollem parkartigem Garten, das ganze umfaßt
etwa 36 Ar. Höhere Schulen leicht erreichbar. Angeb.
unter W. 8270 befördert Walbel & Co. Anzeigen-Gesell-
schaft, München 23, Leopoldstr. 4.

And so it came. After the Nazis' assumption of power, the future suddenly looked brighter for physicians as long as they were "Aryan." In advertisements for directors as well as assistant physicians, „Aryan descent“ was the chief requirement, and sometimes applicants even had to be "Pg.," i.e., "Parteigenosse," fellow member of the Nazi party.



Wherever Jewish professors or lecturers of dermatology had been dismissed from German universities,



younger colleagues with strong Nazi affiliations took over. Several dermatological departments in Germany were already directed by active party members, e.g., the one in Hamburg by Paul Mulzer and the one Würzburg by Karl Zieler, the new president of the German Dermatological Society,



Karl Zieler

who, despite his friendly looks, was an ardent anti-Semite. At seven other universities, the chairs of dermatology were vacant because their former holders had been dismissed for racial or political reasons:

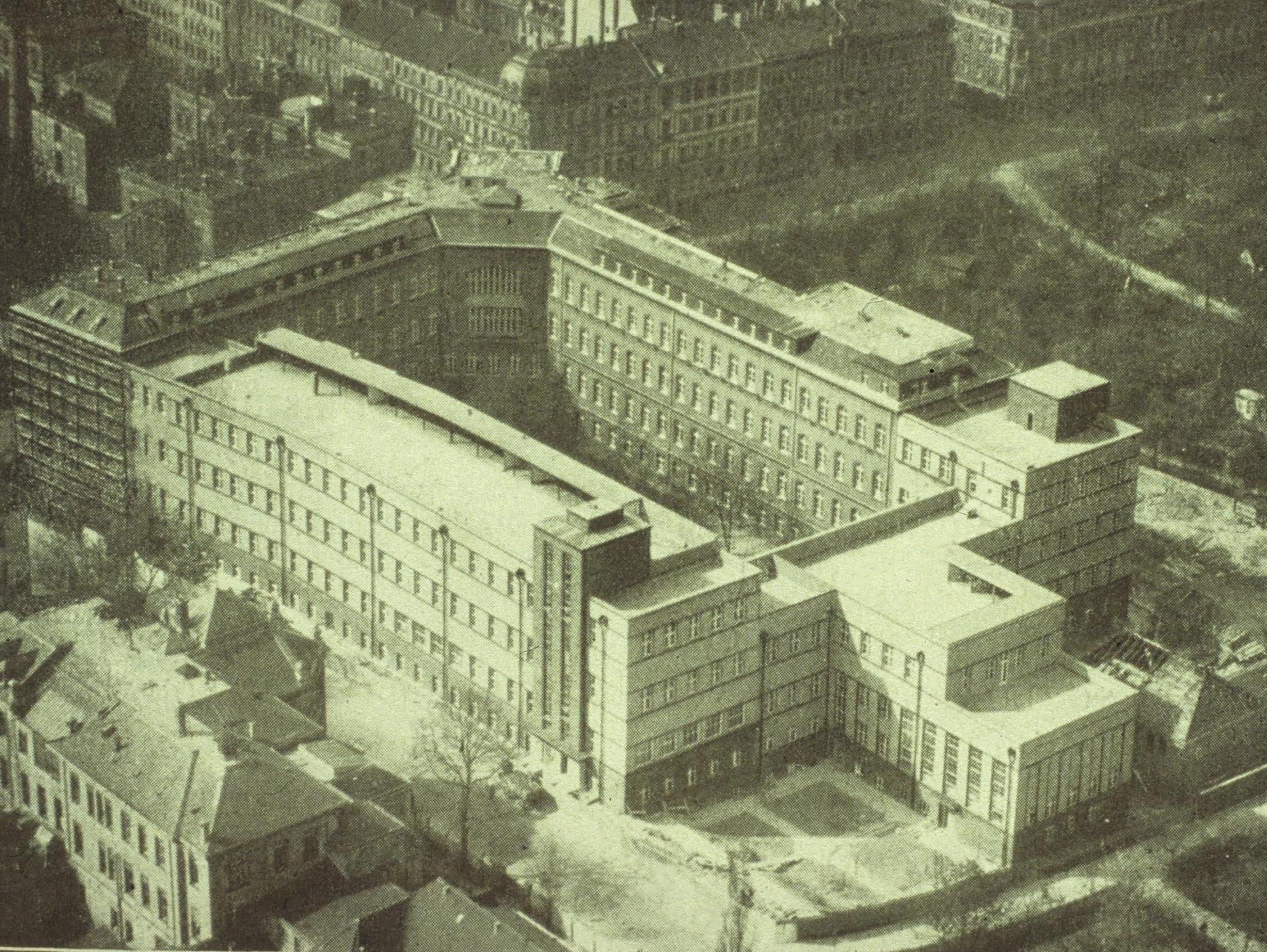
Changes of Chairmen in Dermatology 1933-1945

City	Old Chairman	New Chairman	Year	Reason
Bonn	E. Hoffmann	W. Richter	1934	political
		O. Grütz	1934	
Breslau	M. Jessner	H.A. Gottron	1934	racial
Frankfurt	O. Gans	M. Schubert	1933	racial
Freiburg	G.A. Rost	J. Mayr	1933	political
		A. Stühmer	1934	
Heidelberg	S. Bettmann	W. Schönfeld	1935	racial
Munich	L.v. Zumbusch	A. Poehlmann	1935	political
		J. Mayr	1937	
Tübingen	P. Linser	W. Engelhardt	1935	political

in Bonn, Breslau, Frankfurt, Freiburg, Heidelberg, Tübingen, and Munich.

If one compares the names of the old chairmen to those of the new, a marked incongruity becomes apparent. To the former group belong men like Hoffmann, Jessner, Gans, and von Zumbusch whose names are still well known today. The names of the latter group, apart from that of Heinrich Adolf Gottron, are almost completely forgotten.

The reason is that qualification was only of secondary importance for the appointment of new professors. The primary criterion was vigorous support for the National Socialist State.



This can be illustrated by the negotiations about the appointment of a new chairman of dermatology in Leipzig which, at that time, was the most modern department in Germany.

Candidates for the Chair of Dermatology at the University of Leipzig 1933

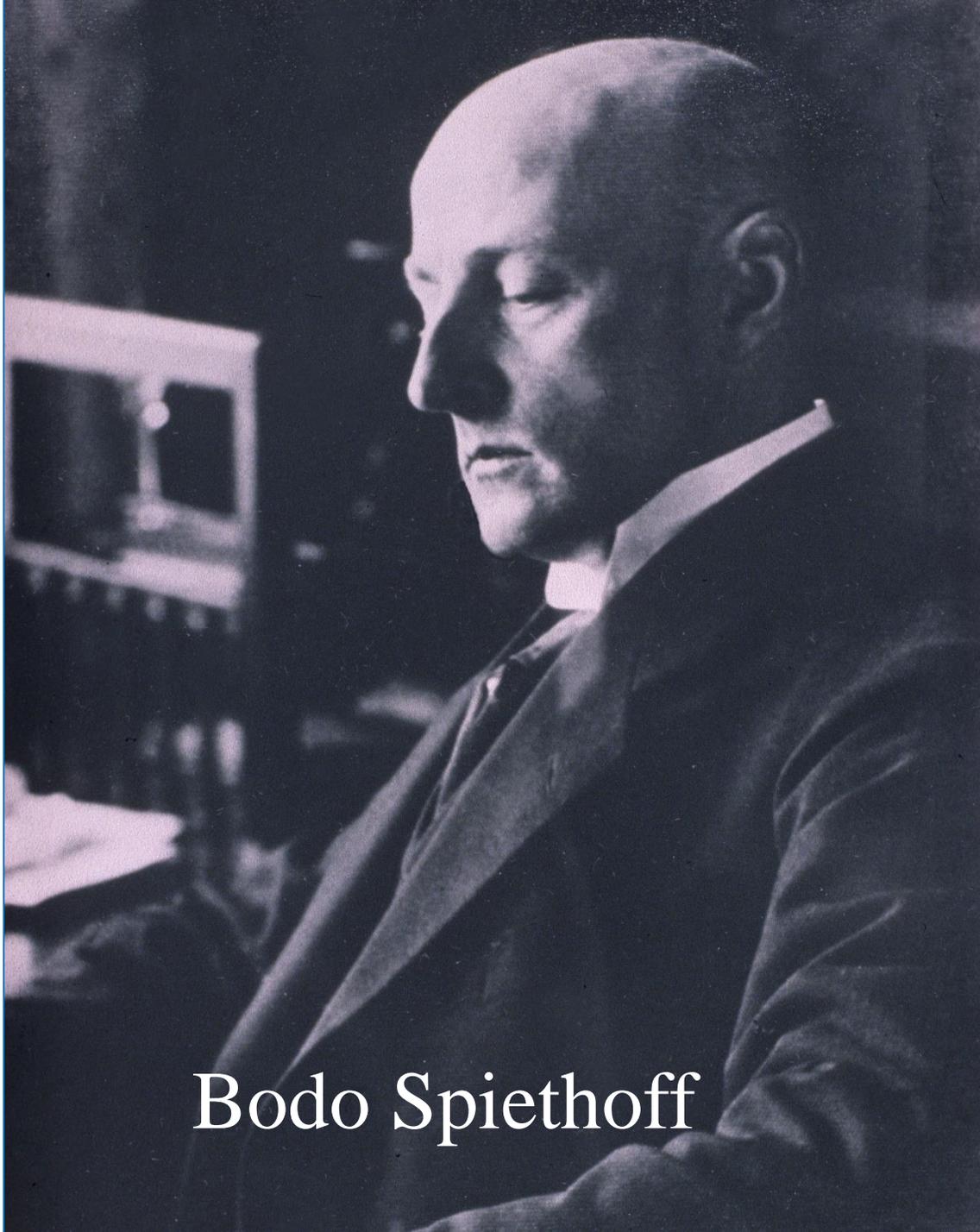
The list of candidates originally included Bruno Bloch, Otto Kren, Alfred Stühmer, Walter Schönfeld, Paul Mulzer, Leo Kumer, and Hermann Werner Siemens

- | | |
|---------------------------|------------|
| 1. Bruno Bloch | Zurich |
| 2. Otto Kren | Vienna |
| 3. Alfred Stühmer | Münster |
| 4. Walther Schönfeld | Greifswald |
| 5. Paul Mulzer | Hamburg |
| 6. Leo Kumer | Innsbruck |
| 7. Hermann Werner Siemens | Frühwald |



Hermann Werner Siemens

who is best known for his description of dystrophic epidermolysis bullosa. Siemens was already told that he had been chosen by the committee of the university, however, he was not a member of the party. Due to the intervention of the Ministry of Education, a new name suddenly appeared on the list,



Bodo Spiethoff

Spiethoff was a party member since 1931. He also belonged to an expert committee for population and racial politics at the German Ministry of the Interior. The Reichsführer of physicians, Dr. Gerhard Wagner, enforced his appointment as new chairman of dermatology in Leipzig,

A leading office outside our ministry, whose approval had to be obtained and from whose decision we cannot diverge, has declared itself against your appointment.

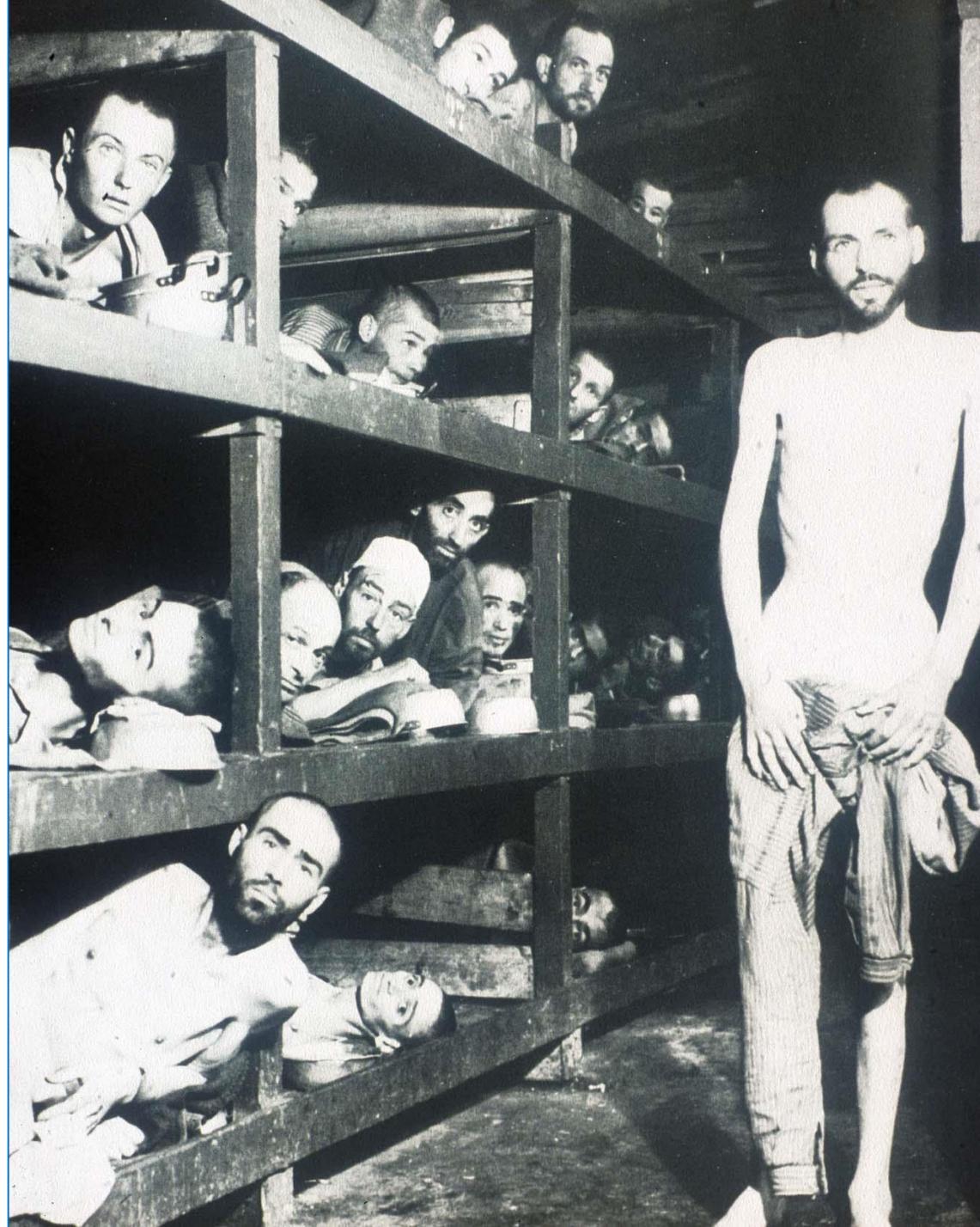
Letter to H.W. Siemens, 1934

and Hermann Werner
Siemens received a letter saying *“a leading office outside our ministry, whose approval had to be obtained and from whose decision we cannot diverge, has declared itself against your appointment.”*

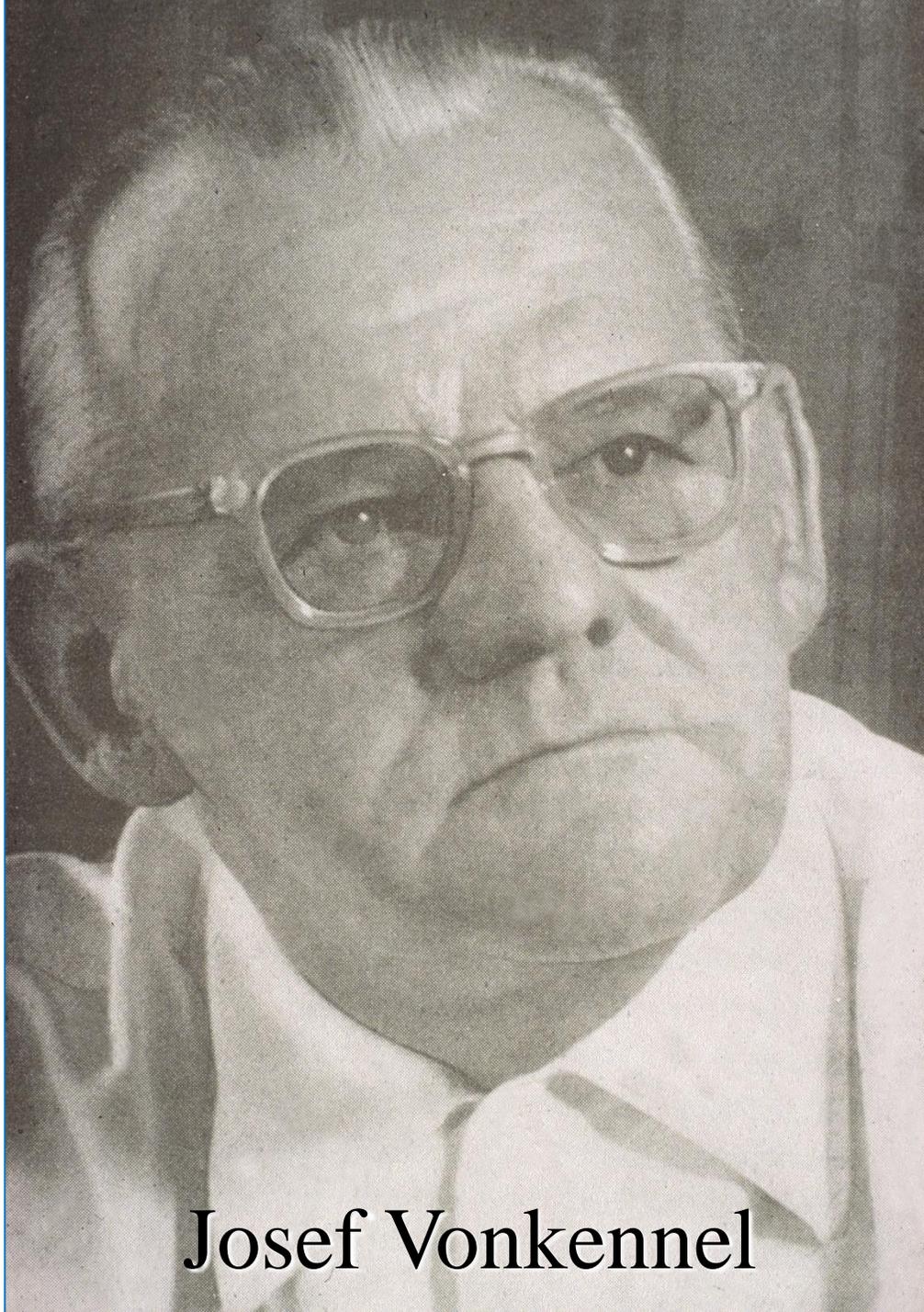


Josef Vonkennel

In a similar fashion, the government also took good care of other loyal followers, e.g., Josef Vonkennel. In 1934, Vonkennel was made chairman of dermatology in Kiel, and in 1937 he succeeded Bodo Spiethoff as chairman in Leipzig. Vonkennel was a member of the Nazi party, the defense corps, and the consulting dermatologist of the weapon-SS.



He also was involved in medical experiments on inmates of the concentration camp at Buchenwald. Interestingly, the University of Leipzig declared upon inquiry in 1948 that there was no evidence of any activity of Vonkennel in the NSDAP.



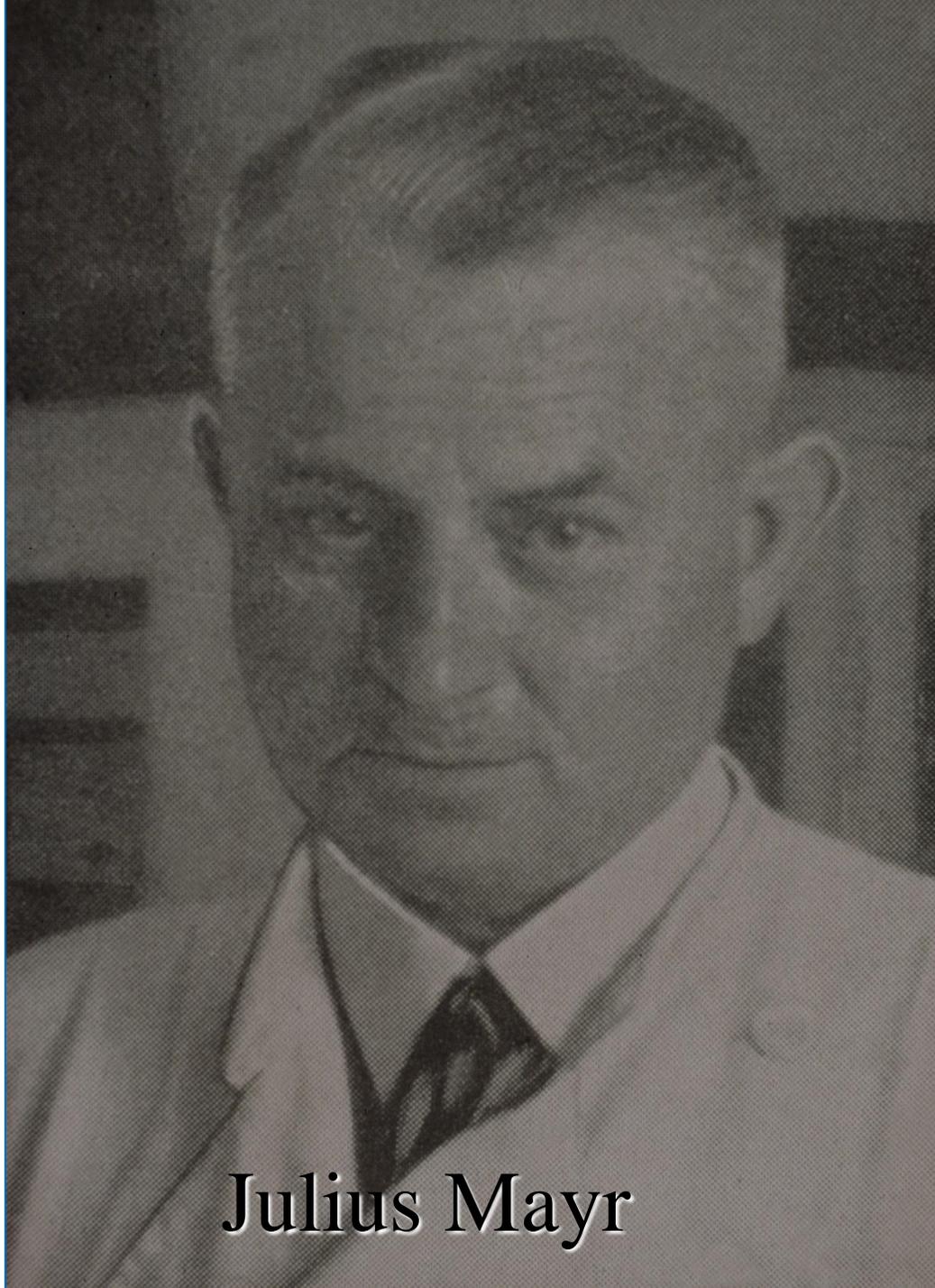
Josef Vonkennel

In 1950, Vonkennel was appointed chairman of dermatology in Cologne, and in 1963, after his Nazi past had been uncovered, he committed suicide.



Ernst Heinrich Brill

Ernst Heinrich Brill, a disciple of Spiethoff, was appointed chairman of dermatology in Rostock. He was a member of the Nazi party, the storm troopers, the Death's Head Units of the Defense Corps, and district leader of the National Socialist Union of Lecturers. Scientifically, however, his record was not so impressive. After having reviewed the documents of the two candidates for the chair of dermatology, Ernst Heinrich Brill



Julius Mayr

and Julius Mayr from Munich, another early member of the Nazi party, the medical faculty of Rostock University came to the conclusion

On the basis of the study of their scientific publications and on the basis of comments of representatives of their specialty, the faculty cannot undertake the responsibility to recommend either of the two gentlemen to the ministry.

that “on the basis of the study of their scientific publications and on the basis of comments of representatives of their specialty, the faculty cannot undertake the responsibility to recommend either of the two gentlemen to the ministry.” Nevertheless, Brill got the chair of dermatology, and,

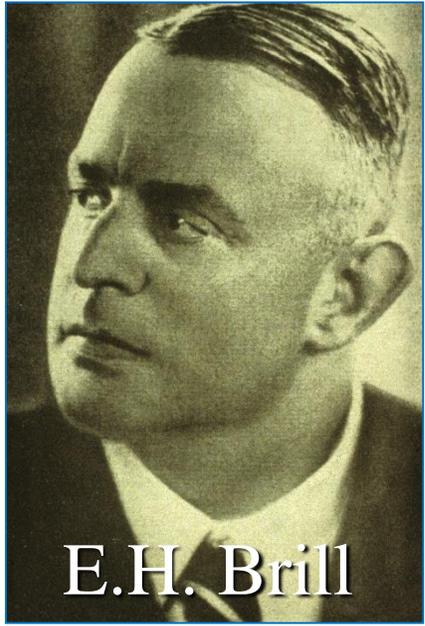
Medical Faculty of the University of Rostock, 1933

on October 12th, 1934,
took the oath of office to
remain "*loyal and
obedient*" to the "*Führer
of the German Reich and
People, Adolf Hitler.*"

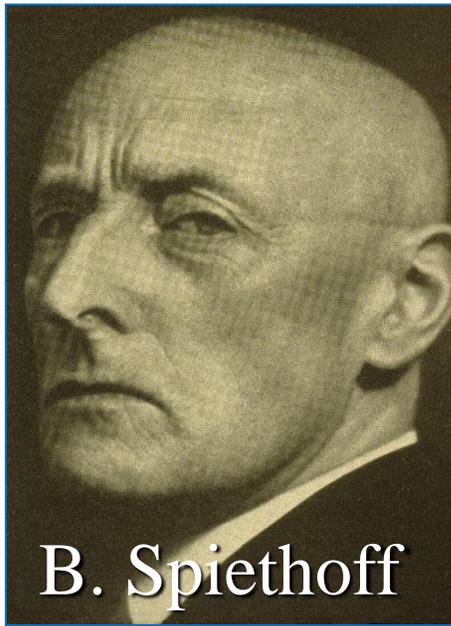
Parenthetically, this oath
had to be sworn by all civil
servants in Germany,
including many Jews.

Ich schwöre: Ich werde dem Führer des Deutschen Reiches und Volkes Adolf Hitler
treu und gehorjam sein, die Gesetze beachten und meine Amtspflichten gewissenhaft
erfüllen, so wahr mir Gott helfe.

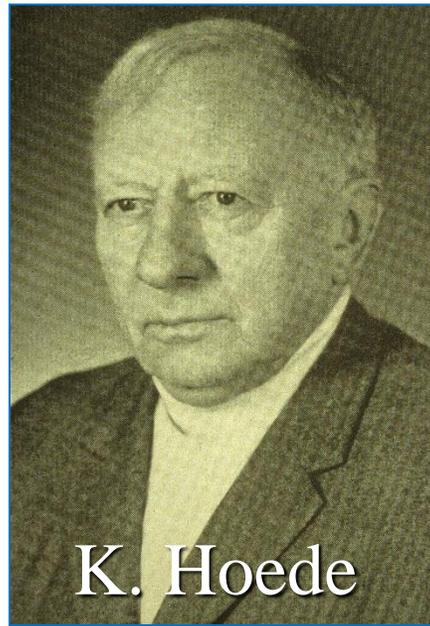
Prof. Dr. Ernst N. Böck.



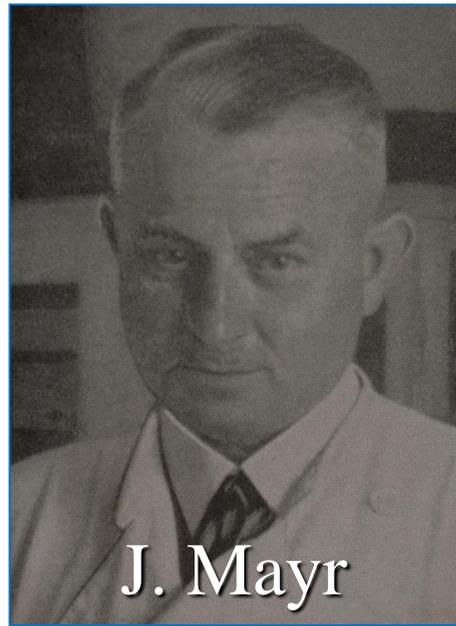
E.H. Brill



B. Spiethoff

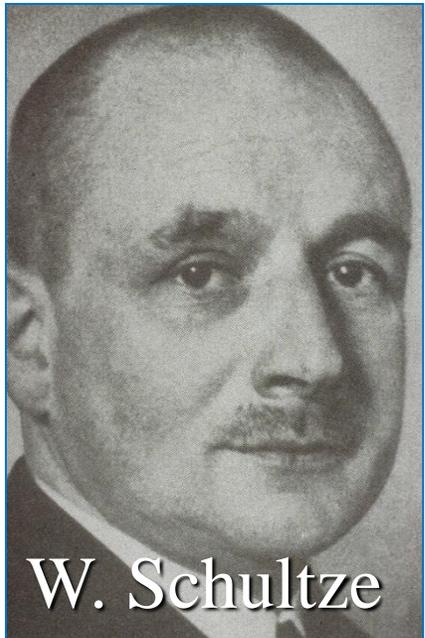


K. Hoede



J. Mayr

In short, many mediocres advanced to leading positions in German dermatology during the Nazi period, and they payed back their debts to the government by subordinating even their research to the principles of Naziism.



W. Schultze



W. Richter



J. Dörffel



M. Schubert

German science will give note with pleasure to the new, wonderful tasks that have evolved for it everywhere ... One should not deny the scientist ... to look for fulfillment in the synthesis of a National Socialist interpretation of scientific questions.

Ernst Heinrich Brill, 1935

Ernst Heinrich Brill stated in 1935 that *“German science will give note with pleasure to the new, wonderful tasks that have evolved for it everywhere ... One should not deny the scientist ... to look for fulfillment in the synthesis of a National Socialist interpretation of scientific questions.”*

It is the task of us doctors to utilize the newly acquired knowledge of genetics for the reconstruction of our people, in accordance with the guidelines of our leadership.

Heinrich Adolf Gottron, 1935

Heinrich Adolf Gottron stated: *“It is the task of us doctors to utilize the newly acquired knowledge of genetics for the reconstruction of our people, in accordance with the guidelines of our leadership.”*

Not all physicians who made such statements were fanatical Nazis; some were not interested in politics but only in their careers, and they knew full well how to enhance them.



Heinrich Adolf Gottron

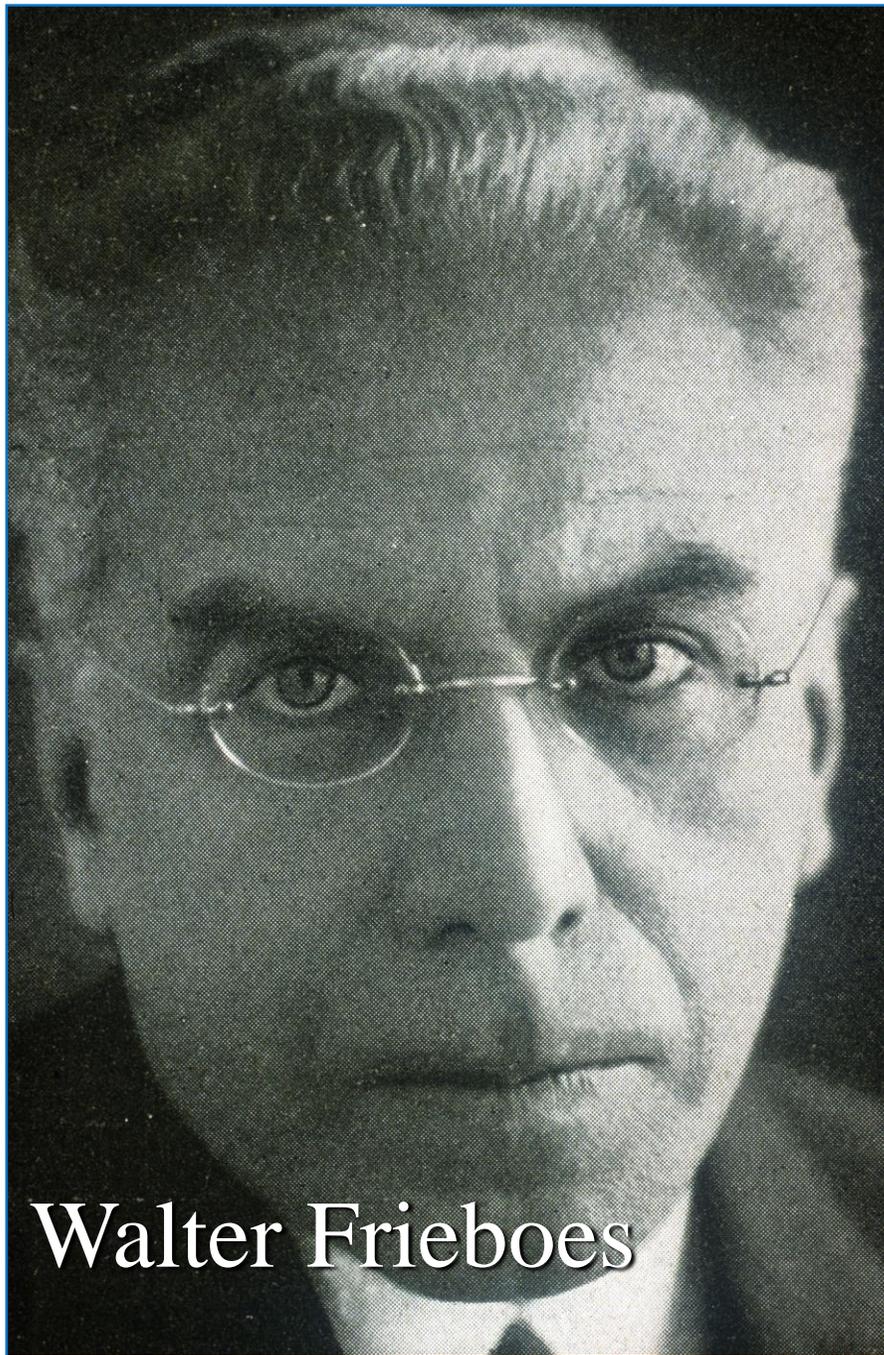
Heinrich Adolf Gottron who described Gottron's papules in dermatomyositis is a prominent example. He was not a fanatical Nazi, but he supported them, joined the Nazi party, and, thus, qualified for a chair of dermatology. In 1935, he was called to Breslau to succeed Max Jessner as director of dermatology, and eventually became dean of the medical faculty there.



In conclusion, support of the Nazis opened up excellent chances for a career. Frequently, the ends of those careers were not so happy. At the end of the war, some Nazis committed suicide, e.g., Ernst Heinrich Brill and Karl Zieler. Others were dismissed from their positions, like Julius Mayr in Munich, and Paul Mulzer in Hamburg. None of them were ever heard of in academic circles again.



In contrast, other Nazis, like Josef Vonkennel and Heinrich Adolf Gottron, were not prosecuted and could continue their careers in post-war Germany. Their main excuse was that they had only followed orders and that a different kind of behavior had been impossible under the given circumstances. Was that really the case? It is true that all Germans were subjected to supervision by the Nazis. There were party members everywhere who were willing to report deviations to the government.



Walter Frieboes

GRUNDRISS
DER
HISTOPATHOLOGIE
DER
HAUTKRANKHEITEN

VON

DR. WALTER FRIEBOES

PROFESSOR DER DERMATOLOGIE UND DIREKTOR DER DERMATOLOGISCHEN KLINIK
AN DER UNIVERSITÄT ROSTOCK

MIT 105, THEILS FARBIGEN ABBILDUNGEN IM TEXT



LEIPZIG
VERLAG VON F. C. W. VOGEL

1921

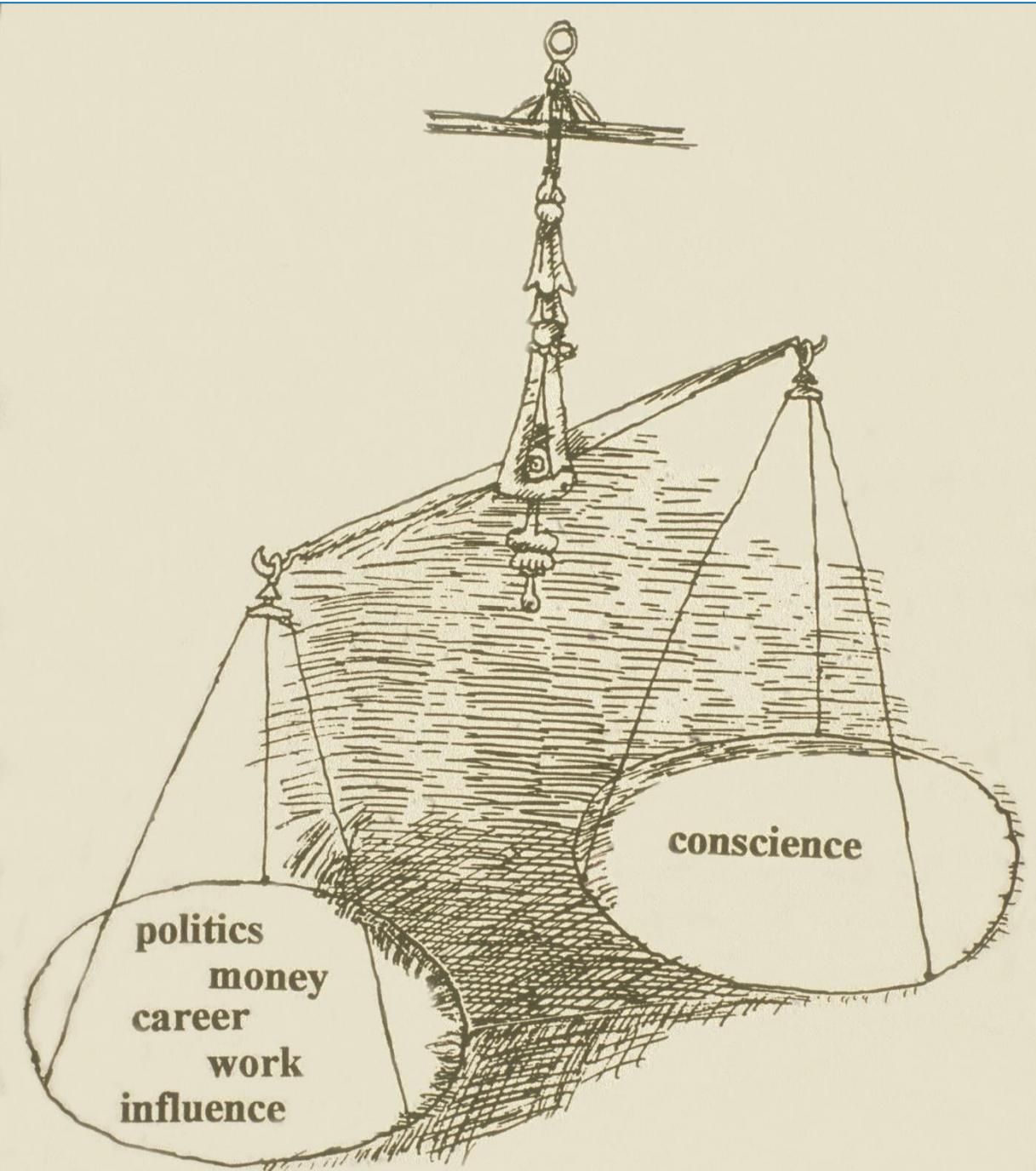
This happened to Walter Frieboes, the chairman of dermatology at the Charite hospital in Berlin, who was the author of one of the first textbooks of the histopathology of the skin. Frieboes had to vindicate himself for having said, in a private talk with two nurses,

One has to be careful of the Nazis.

If a Jew and members of the party share a room in a hospital and a conflict develops among them, one should not remove the Jew but rather the members of the party.

Walter Frieboes, Berlin

that one had *“to be careful of the Nazis,”* and that *“if a Jew and members of the party share a room in a hospital and a conflict develops among them, one should not remove the Jew but rather the members of the party.”* When confronted with those statements by party officials, Frieboes squirmed in embarrassment, trying to explain his sentences, and to take them half back without losing his face completely. After lengthy discussions, the issue was resolved, and Frieboes was allowed to stay at the Charite as director of dermatology. In order to maintain his position, Frieboes had to fight a losing battle with his conscience.



Why did his conscience lose? Because it was not well trained, it was a lightweight compared to the heavy ballast on the other side of the scale. First, there were political considerations: Many Germans thought that only Hitler could restore Germany to greatness, just as it is now the case in many countries (*"Make America great again ..."*). Many people, and especially physicians, were afraid that, if Hitler would fail, the communists would take over who were thought to be even worse. Then there were personal reasons, some of which were profane, such as the desire for money and career, others seemingly more noble, e.g., the opportunity for scientists to continue their work which they deemed to be valuable. The devotion to one's work has often been used as an excuse for opportunistic behavior. However, as idealistic as it may seem, it is a bad excuse because we do not do so much for our work as our work does for us. Our work gives us security and self-assurance. Devotion to one's work, therefore, really is devotion to one's own security.

Furthermore, cooperation with the Nazis was rewarded by a certain degree of influence that could be used in a positive fashion.

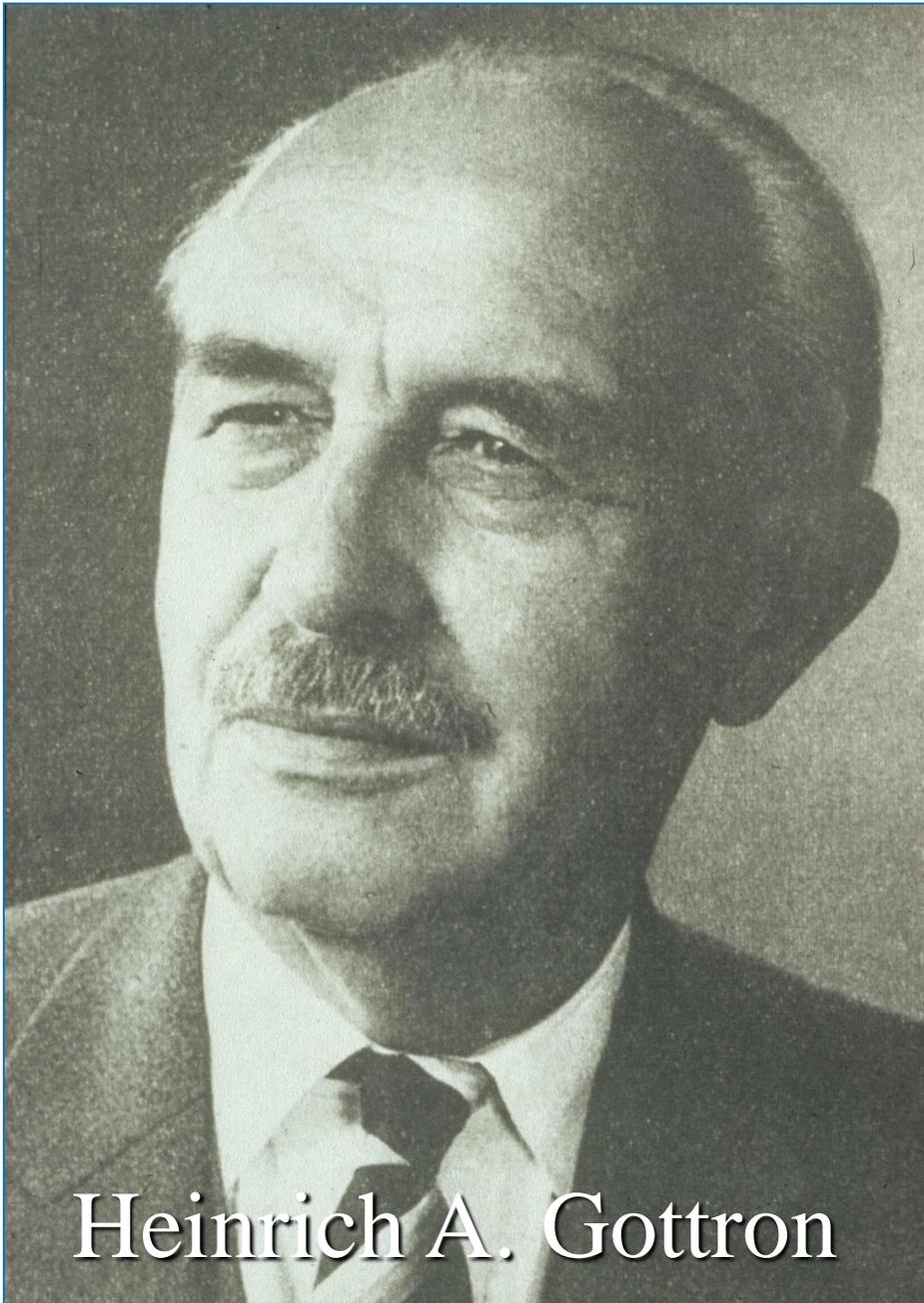


Walter Frieboes



Theodor Grüneberg

Because Frieboes maintained his position at the Charite, he was able to achieve the academic promotion of Theodor Grüneberg which had been stopped at the University of Halle because Grüneberg had one Jewish great-grandparent.



Heinrich A. Gottron



Franz Walter

Likewise, Heinrich Adolf Gottron occasionally used his influence on behalf of victims of the Nazis. One such occasion was the release of Franz Walter, the chairman of dermatology at the University of Krakau, from the concentration camp in Oranienburg which was permitted at Gottron's request.

But are those episodes sufficient to excuse opportunistic behavior? I do not think so. The fact remains that both, Frieboes and especially Gottron, supported Nazism.

KONSTITUTIONS- UND ERBBILOGIE

IN DER PRAXIS DER MEDIZIN

Herausgegeben von

WALTHER JAENSCH



1 9 3 4

JOHANN AMBROSIUS BARTH-VERLAG-LEIPZIG

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One example is a textbook on “Constitutional and Genetic Biology” which taught students the principles of selection and counterselection and warned them of the danger of a mixture of human races. The opening “general” part of that book was written by leading medical officials of the Nazi party, some of whom, like Wilhelm Klein, were personally responsible for torturing and killing hundreds of Jews.

KONSTITUTIONS- UND ERBBILOGIE

IN DER PRAXIS DER MEDIZIN

Herausgegeben von

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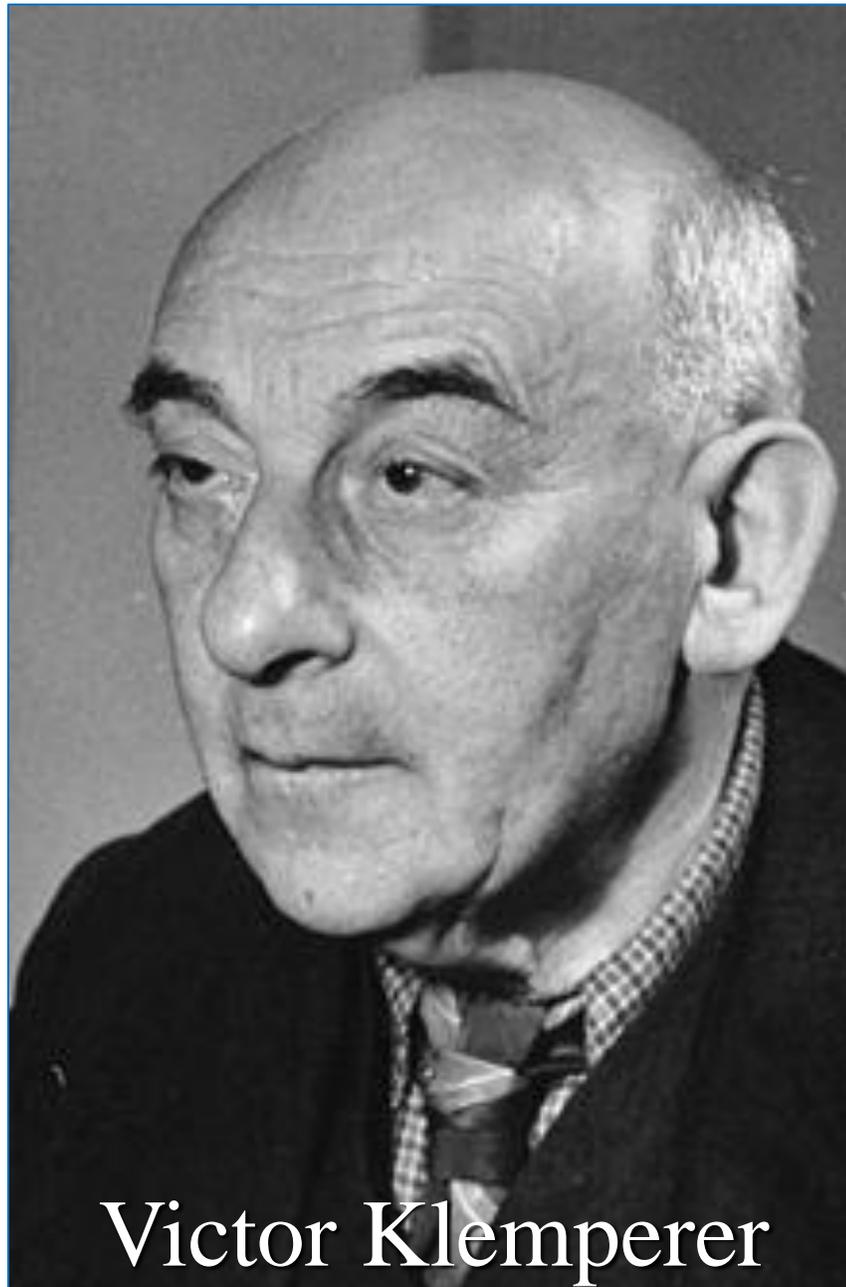
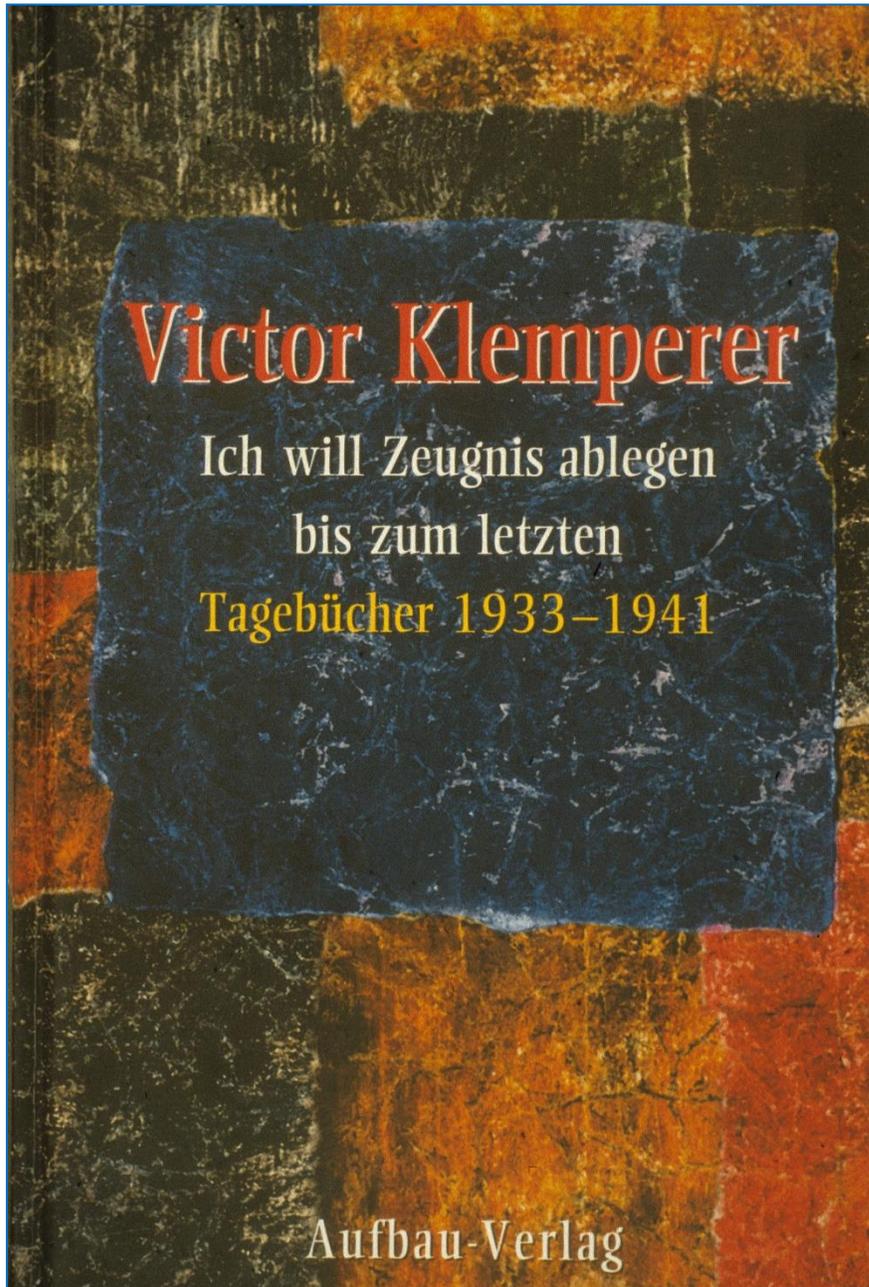
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JOHANN AMBROSIUS BARTH-VERLAG-LEIPZIG

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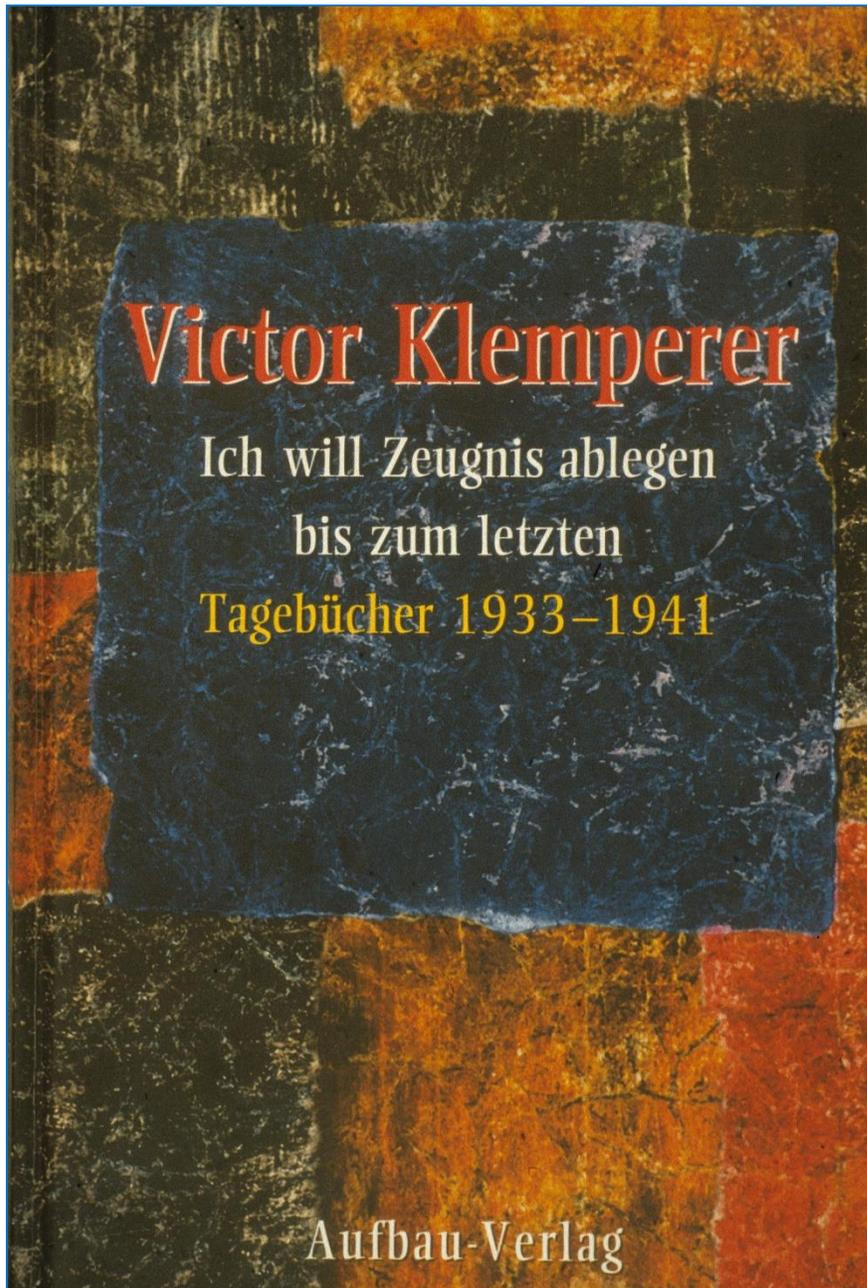
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In the second, "special" part, Frieboes and Gottron contributed chapters which were relatively devoid of racist notions; nevertheless, without those chapters of more solid medical content the entire book would not have been possible. By closing ranks with the Nazis, both authors contributed to racism and Nazism and, therefore, share responsibility for everything that happened.



Victor Klemperer

In his diaries, the Jewish philologist Victor Klemperer, who survived as a Jew in Nazi Germany, bemoaned the flamboyant opportunism of former colleagues and concluded:



Victor Klemperer

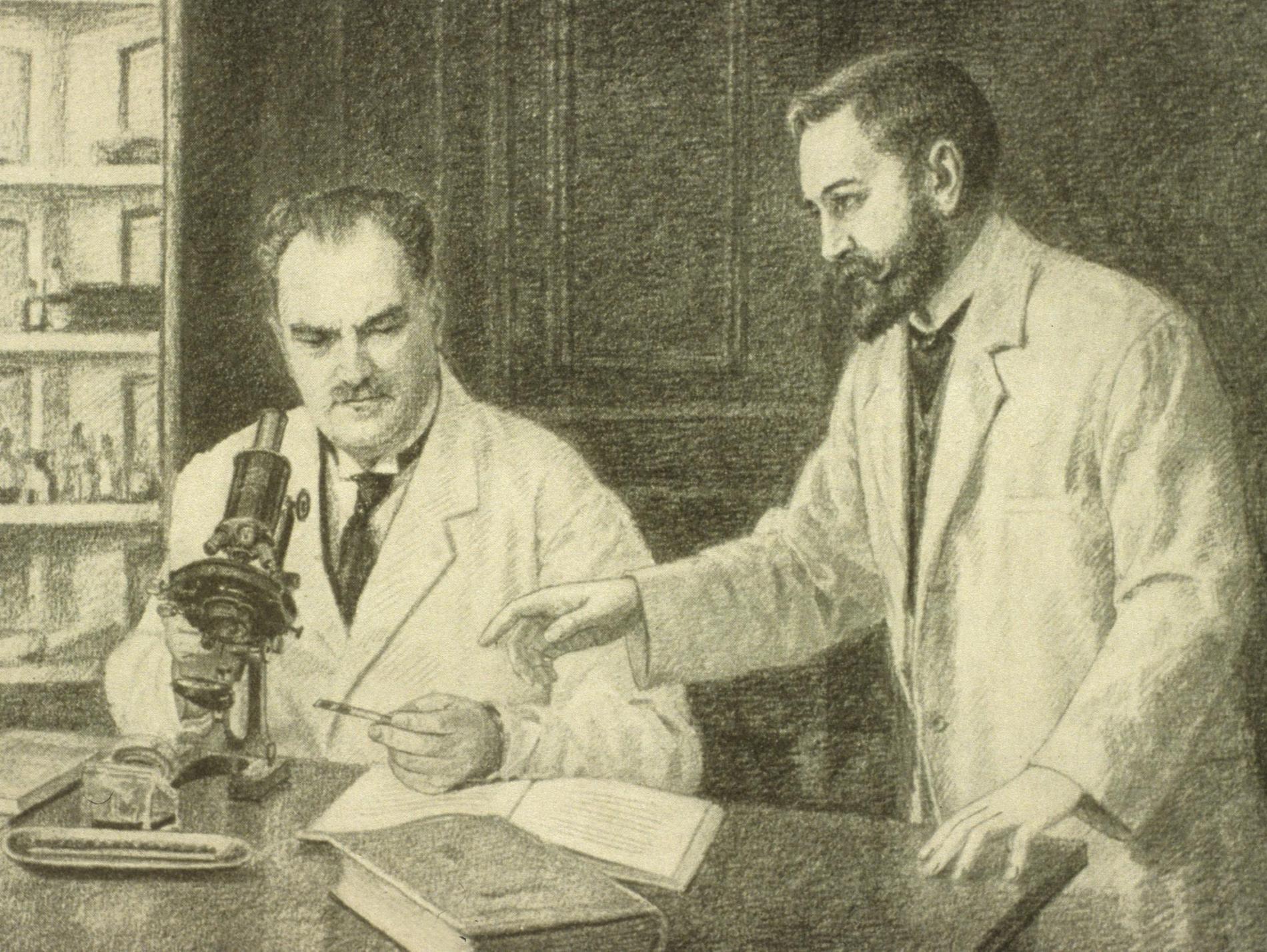
Ich will Zeugnis ablegen
bis zum letzten
Tagebücher 1933–1941

Aufbau-Verlag

If it once came the other way round, and the fate of vanquished persons was in my hands, I would spare all people and even some of the leaders who possibly were honest and did not know what they were doing. But I would hang all intellectuals, and the professors one meter higher than everybody else.

Victor Klemperer

“If it once came the other way round, and the fate of vanquished persons was in my hands, I would spare all people and even some of the leaders who possibly were honest and did not know what they were doing. But I would hang all intellectuals, and the professors one meter higher than everybody else.” To be sure, this was just a thought in a diary and originally not meant to be published, but it expresses the disgust aroused by learned men and former democrats who suddenly, against their better knowledge, became the mouthpieces of Nazism.



And they were not forced to do so. One could exist in Germany without embracing the Nazis. Some dermatologists even criticized them openly, accepting the fact that their behavior was likely to result in sanctions by the government. One example is Erich Hoffmann, the chairman of dermatology in Bonn, who is best known for his discovery of the spirochaete of syphilis together with Fritz Schaudinn in 1905.



Erich Hoffmann

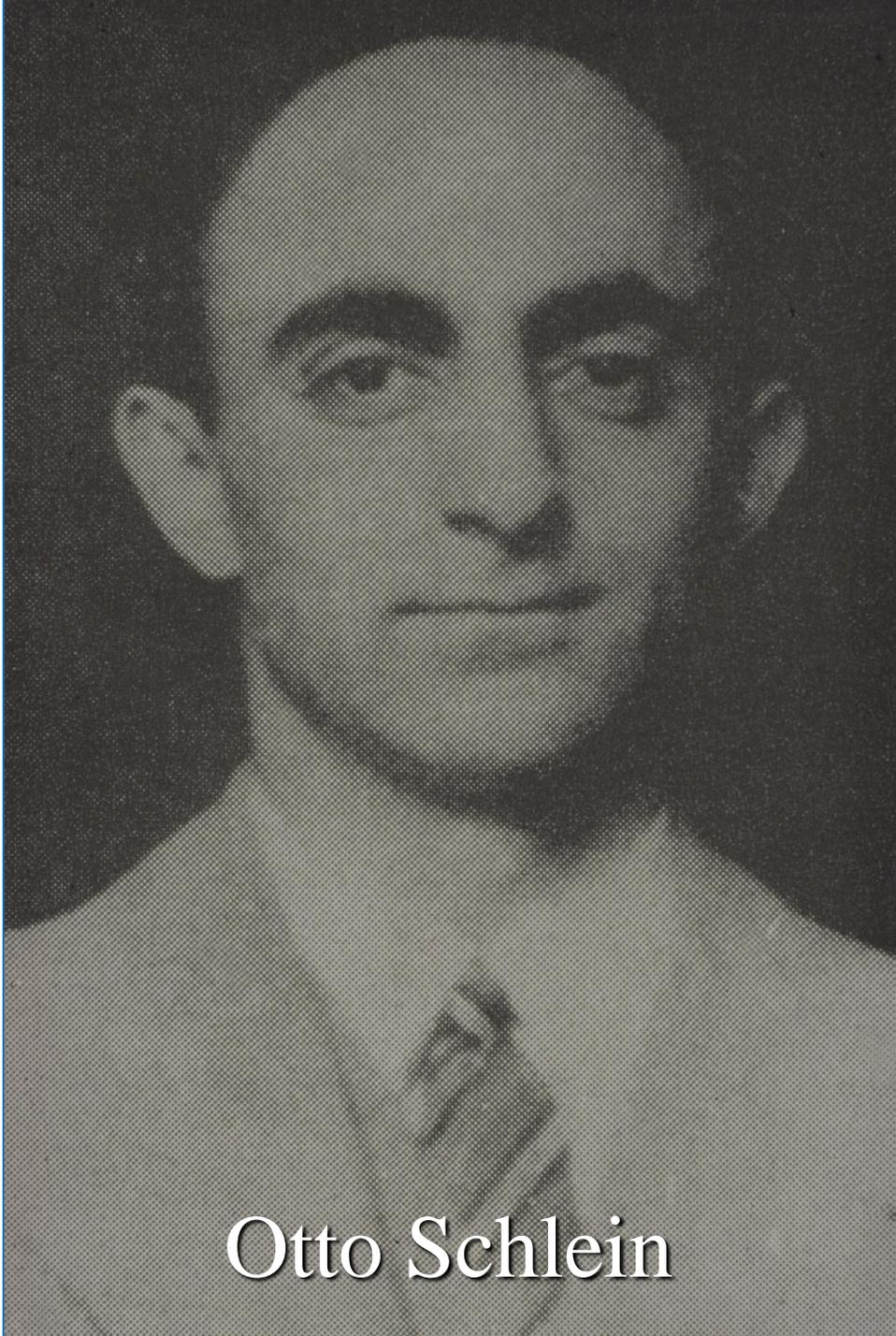
Hoffmann was the only dermatologist in Germany who protested against the reorganization of the German Dermatological Society. Because of his criticism and disparaging notions in his lectures, such as referring to the Nazis as “brown shit,” he was dismissed from his position as director of the skin clinic in Bonn.



Leopold Ritter von Zumbusch

Another leading dermatologist who openly showed his aversion against the new rulers was Leopold Ritter von Zumbusch, chairman of dermatology in Munich, who is best known for his description of generalized pustular psoriasis in 1907. When the “Third Reich” was established in 1933, von Zumbusch well foresaw its ultimate fate. He refused to cooperate with the Nazis, and was forced to resign in 1935. In 1940, von Zumbusch died, probably by suicide.

Both, von Zumbusch and Hoffmann, made no secret of their aversion against the Nazis, however, they did not work actively against them. Such kind of resistance was extremely dangerous, and was carried out mostly by former members of the socialist and communist parties.



Otto Schlein

Among them was the dermatologist Otto Schlein, an associate of Lennhoff at the skin clinic of Magdeburg. Until 1936, he was arrested four times under the accusation of high treason, but everytime had to be released because of lack of evidences. In 1936, he emigrated to the Netherlands where he was captured by the Gestapo in 1942. From there, he was taken

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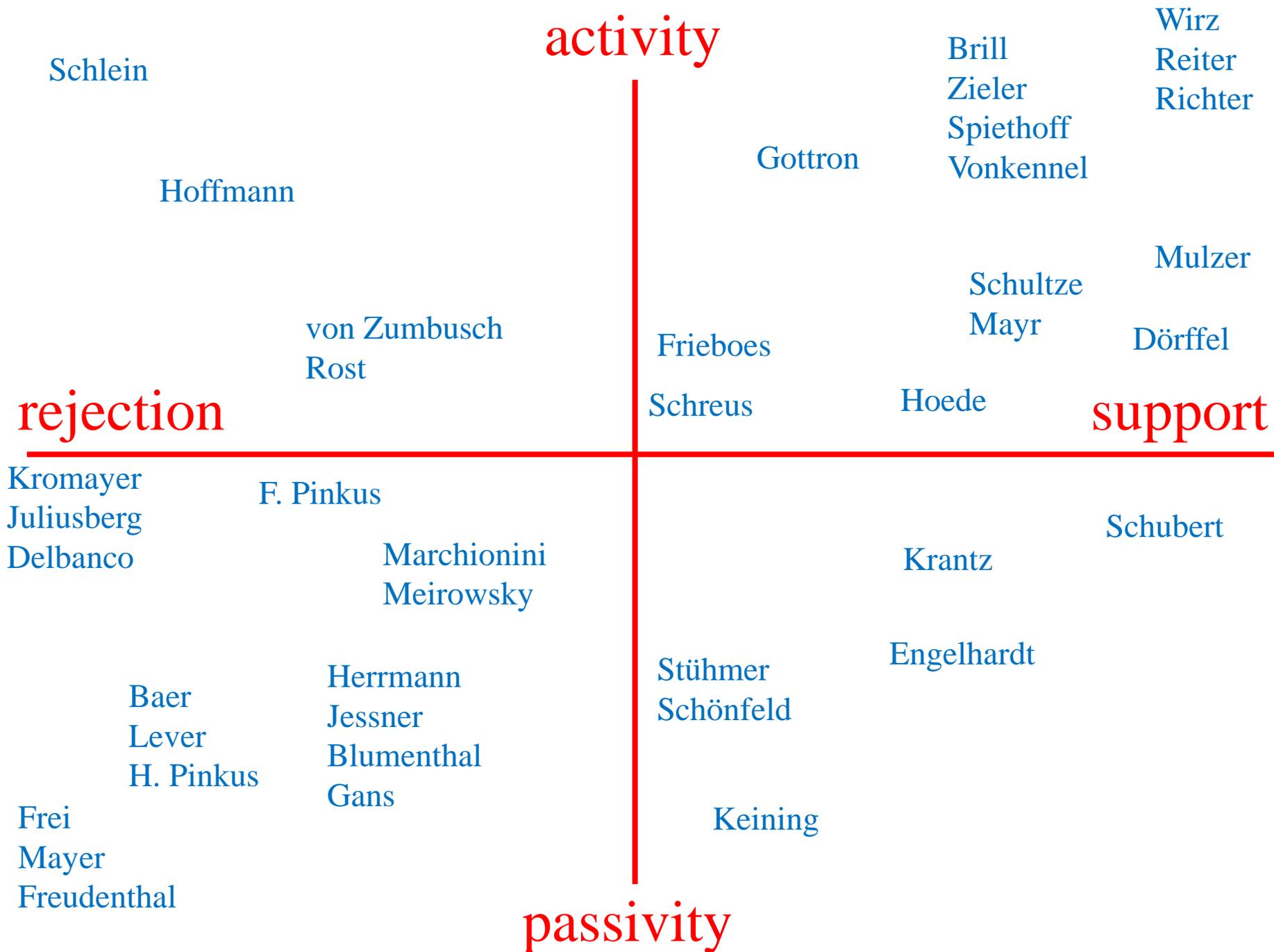
to the concentration camp at Auschwitz, where he was gassed, together with his wife and daughter, on October 3, 1944.

In sum, there was only a limited number of options of behavior in the National Socialist state.

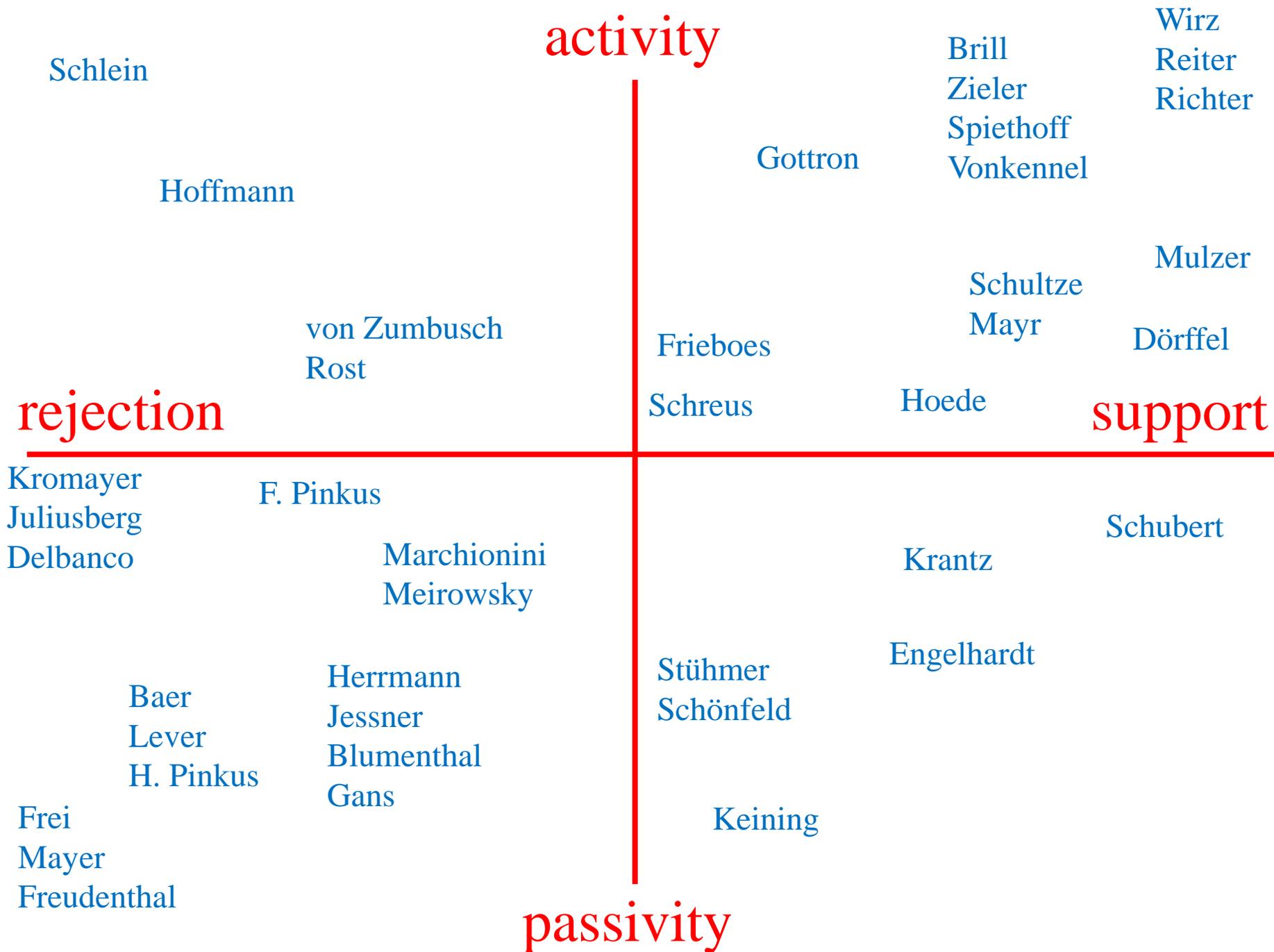


- take advantage
- neglect
- speak up
- work against
- leave

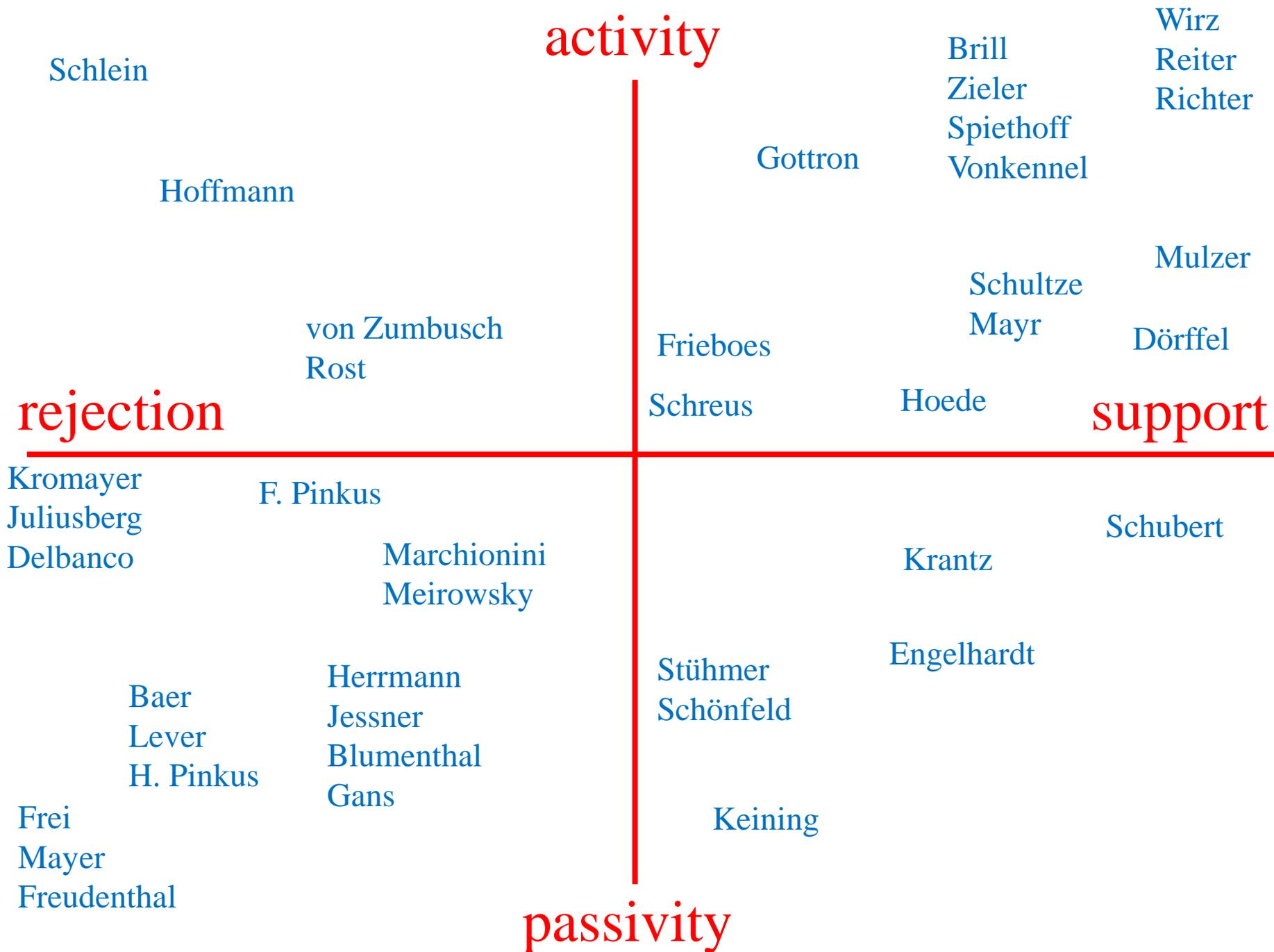
One could take advantage of the situation. One could neglect what was going on. One could speak up, but this led at least to dismissal from influential positions. One could try to work actively against the Nazis with the constant risk of being arrested or killed. Or one could leave the country.



These options can be demonstrated in a scheme, based on the activity of persons and the support that they lend to the Nazis. Some dermatologists, like Richter, Brill, and Zieler, were very active in the National Socialist movement. On the opposite side were dermatologists who were persecuted by the Nazis, and who surely rejected their policy. Some of them committed suicide, like Ernst Delbanco, others emigrated, like Jessner, Gans, or Herrmann, both kinds of behaviour not being distinguished by a great degree of activity on behalf of those who had to stay and live in Germany.



Others who rejected the Nazis were more active, and they were killed, like Otto Schlein. Still others were positioned in between, like von Zumbusch, Rost, and Hoffmann. Of course, based on the limited amount of data, the classification of individuals according to these four poles is highly unjust. But this scheme is not meant to be just, it is meant to make us think: where would we stand, where would I stand, if exposed to a similar degree of pressure and control.



On the upper right hand side, together with Richter, Reiter, Brill, and Zieler. I hope none of us. On the lower left pole, emigrating early like Frei, Mayer, and Freudenthal? Maybe. Or committing suicide like Kromayer, Juliusberg, and Delbanco? Probably not. On the upper left pole, actively engaged in resistance? I am not so sure. Hopefully, somewhere around here ... I think that these are the kinds of questions that we have to ask ourselves, we have to learn from the past in order to evaluate our present ideas, and to be prepared for the future.