



# A Model for the 'New Physician'? Hippocrates in Interwar Germany

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PREPRINT

A Model for the New Physician: Hippocrates in Interwar Germany

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## A Model for the New Physician: Hippocrates in Interwar Germany

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How could they do it? is probably the most common question asked about German doctors in the 20th century. How could doctors play such a major part in the killing machinery of Auschwitz? How could they do it, in view of their Hippocratic Oath? Robert Jay Lifton has suggested that Nazi doctors perverted medical ethics by valuing the health of the Volk over that of the individual. This ‘ultimate absurdity’, he argues, turned healers into killers. He quotes the witness at the Nuremberg trials against Nazi doctors, the physician Werner Leibbrandt, who referred to the Nazi embrace of Hippocrates as ‘an ironical joke of world history.’<sup>1</sup> Leibbrandt assumed - as does Lifton - that there was something essential and self evident about Hippocrates.<sup>2</sup> The Nazis are said to have abused and violated the true Hippocrates. In this essay I shall argue that the story was more complicated, the boundaries between good and evil less clear. I will attempt to show that the reception of the Hippocrates myth in parts of the medical community before 1933 invited its appropriation by Nazi officials.

Hippocrates today is associated with humane medicine, with a strong emphasis on the individual patient (as opposed to depersonalised, large scale hospital medicine), with organicist, even vitalist connotations. But can we assume that Hippocratism did not carry different meanings when Nazi physicians underwent their training? As in Britain and France, a holist, Neo-Hippocratic movement emerged in Germany among physicians and alternative practitioners in the mid 1920s.<sup>3</sup> Worries about specialization and the role of the laboratory, about state and mass medicine and the commercialization of healing, along with the experience of economic and intellectual crisis, led many to deplore a ‘crisis in medicine.’<sup>4</sup>

Hippocratism was seen as a solution to this crisis. In Britain, interwar Neo-Hippocratism was mainly concerned with the individual. In Germany, however, in the wake of the lost war and in face of economic hardship, parts of the educated élite began to value the survival of the collective, the Volk, more highly than that of the single individual.<sup>5</sup> Along with fellow intellectuals, German Hippocratists were not only concerned with individual patients, but also with the Volk.

Carer for the individual or guardian of public health? The variety of meanings associated with Hippocrates in different national and historical contexts indicates that medical ethics are more malleable than we are often led to assume. Perceptions of role models and ethical codes are shaped by their contexts of reception as much as by their historical origins.<sup>6</sup> Current debates over ethical issues, for example, draw massively on the atrocities committed by Nazi doctors, reinterpreted in the light of the democratisation and civil rights movements of the 1960s.<sup>7</sup> The purpose of this study is to unwrap some of the meanings read into the figures of Hippocrates and increasingly also Paracelsus in the context of the social and economic situation of the medical profession in interwar Germany. I will argue in this paper that physicians used Hippocrates in the crisis ridden interwar years in order to lend an air of timelessness and ascribe a higher meaning to a professional ideology which was in fact highly interest driven. I prefer the term ‘ideology’ over ‘culture’ or ‘mentality’ here because it does not have the deterministic connotations of the latter two. Ideology according to Karl Mannheim is an ambiguous concept. It allows for conscious use of a set of ideas and values, which are nevertheless to a certain degree determined by an individual’s socialisation in a distinct group or culture.<sup>8</sup>

Part of the ideology embraced by most German academics in the early twentieth century was the claim to be unpolitical. One way of sustaining this claim was by exploring political issues, as the Hippocratists did, through analogies drawn from the ancient world,

referring to underlying higher values. Out of bourgeois élitism and frustration over their role in the welfare state, many of them developed sympathies for the political right. Increasingly they chose a ‘fundamentalist’ approach to problems arising from the modernisation of medicine and responded to a complicated, highly differentiated social reality by embracing a worldview based on symbols and myths. ‘Myth’ in this context does not imply the opposite of a ‘fact’ but rather a unifying legend born out of the desire to assign meaning to a fragmented reality.<sup>9</sup> The concept of fundamentalism is commonly used to analyse religious movements but it may serve here as a suitable analytical category.<sup>10</sup> ‘Fundamentalists fight with a particularly chosen repository of resources which one might think of as weapons,’ Martin E. Marty and R. Scott Appleby state in the introduction to the first volume of their monumental Fundamentalism Project, ‘... they reached back to real or presumed pasts, to actual or imagined ideal original conditions and concepts, and selected what they regarded as fundamental.’<sup>11</sup> The myth of and the various qualities assigned to Hippocrates served as such weapons, tools in what I shall call in this paper an ideological toolkit, a miscellaneous collection of beliefs and ideas associated with the ideal doctor.

### ‘Return to Hippocrates’

The myth of Hippocrates, paradoxically, became very popular just after all medical schools in Germany had abandoned the ritual of Oath taking.<sup>12</sup> Hippocratism was partly a response to what many portrayed as a crisis in medicine and indeed in society after the war.<sup>13</sup> As is well known, the cause of crisis was most prominently set out by Oswald Spengler in his popular account of the ‘Decline of the West.’<sup>14</sup> Following Spengler many intellectuals blamed Western ‘civilisation’ (as opposed to German ‘culture’) for the defeat of the Germans in the war. In the shape of fin de siècle decadence, ‘civilisation’ had weakened Germany’s defences, and as American style modernisation strengthened her enemies. Many intellectuals felt

humiliated by the Versailles treaty and threatened by the 1918 revolution which turned Germany into a republic. War and inflation led to a national crisis experience of a scale previously unknown. The economic crisis could be easily interpreted as a symptom of decline.<sup>15</sup> German society was receptive to myths, torn between fascination for the great modernisation plans, such as the welfare state, and blood and soil mystique.<sup>16</sup> In medicine, the conflict between ‘culture’ and ‘civilisation’ found its expression in the ideals of the rural family doctor and the urban medical expert.<sup>17</sup> Medical authors, as it were, constructed the ‘crisis in medicine’ in response to modernisation pressures in the health and welfare system.

The political commitments of the Hippocratists involved in the crisis debate were diverse. Take, for example, the editorial board of the journal Hippocrates. In 1927, a group of doctors and supporters of alternative healing practices founded Hippocrates, led by the psychiatrist and head of the internal women’s ward of the Stuttgart homeopathic Robert-Bosch-Hospital, Heinrich Meng, and financially backed by the industrialist Robert Bosch.<sup>18</sup> Gießen internist and medical historian, Georg Honigmann was appointed editor in chief and the organisers succeeded to win the support of an impressive list of co-editors, amongst them Henry E. Sigerist.<sup>19</sup> Sigerist was a left-leaning liberal and Heinrich Meng, the founder of the journal Hippocrates, emerged from the war as a pacifist and held sympathies for the socialists.<sup>20</sup> Another popular and influential member of the board, however, the Danzig surgeon Erwin Liek, was a right-winger.<sup>21</sup>

Not all writings on Hippocrates and Paracelsus were openly designed as contributions to the crisis debate. Publications dealing with and alluding to the two historical figures can be grouped into three overlapping genres. Essays on professional and general politics and reflections on the philosophy and theory of medicine constituted the largest group. Often rather cursory in style, they could be found in the general interest [Feuilleton] and professional politics [Standespolitik] sections of the journals.<sup>22</sup> Texts in this genre usually

dealt with the ‘crisis’, taking up tropes and issues associated with the debate. Central to many of these publications was the assumption that physicians were part of an eternal, natural élite, who could not realise their beneficial potential for humankind, due to the ‘materialism’ embodied in the expanding welfare state and the ‘mechanistic attitude’ associated with 19th century medical science.

Practical guidelines for physicians, especially for general practitioners, constituted the second genre.<sup>23</sup> They contained recommendations and case studies on how to implement ‘Hippocratic’ medicine in everyday practice, often in order to overcome the ‘crisis’ and bring medicine back onto ‘its historical main path’. Usually this implied calls to ‘treat the whole patient and not only single organs.’ Like those writing in the first genre, these authors saw their recommendations as remedies against fragmentation and the ‘one-sidedness of modern medicine’.<sup>24</sup>

Studies in classical philology and the history of medicine constituted the third genre. Covering a wide range from scholarly to popular writings, they dealt directly with the lives and works of Hippocrates and Paracelsus.<sup>25</sup> The scholarly studies profited considerably from the increased interest in Hippocrates and Paracelsus. History of medicine as a discipline, medical historians suggested, had the potential to contribute valuable solutions to the ‘crisis of medicine.’ Henry E. Sigerist declared in 1930 that medicine had entered a new stage after the war, signified by medical practitioners developing an increasing interest in the history of medicine as they lost faith in the promises of 19th century science:

As in the romantic age one felt the urge to do justice to the fundamentals of healing, to assemble isolated findings into a whole, the urge for a philosophy of medicine. ... The structure of society had changed fundamentally. The physician had not found his place yet in the new society. A new physician ideal was emerging.<sup>26</sup>

In spite of their diverse political affiliations, all Hippocratists believed they were standing for a common cause: the renewal of medicine. In the following two sections I shall use the examples of two outspoken academic Hippocratists to illustrate how Hippocratism legitimated an élitist medical ideology which later was appropriated by Nazi officials.

### The Natural Elite

August Bier (1861-1949) was the doyen, the grand old man of German interwar Hippocratism. Professor of surgery and head of the famous Ziegelstrasse clinic of Berlin University since 1907, he did not restrict his activities to surgery but attempted to make this clinic the centre of a medical microcosm of various specialists, including such unorthodox and controversial practices as homeopathy and the methods of ‘natural healing.’<sup>27</sup> Moreover he was a co-founder of the ‘German College of Physical Education’ (Deutsche Hochschule für Leibesübungen). Bier’s small medical empire was a material expression of his attempts to develop a unifying theory for all of medicine. Bier held his lectures and demonstrations in front of large audiences who loved his sarcastic remarks and admired his surgical skills. Occasionally he swapped the modern instruments for carpenter’s tools.<sup>28</sup> A fine surgeon in a famous clinic, Bier was consulted by celebrities from Germany and from abroad.

Bier became a patron of unorthodox practitioners. He argued for a scientific engagement with homeopathy, following the theories of the pharmacology professor Hugo Schulz. Schulz was his colleague at the University of Greifswald at an earlier stage of Bier’s career. Bier published articles on homeopathy and in 1926 he sent one of his assistants to Stuttgart to work at the homeopathic hospital funded by the industrialist Robert Bosch.<sup>29</sup> To the outrage of many academic colleagues, he supported an initiative of the Prussian national assembly in 1919 to set up teaching positions for homeopaths and natural healers in the country’s universities.<sup>30</sup> He was also instrumental in the establishment of the Berlin Institute

for the History of Medicine.<sup>31</sup> Bier based his theories of medicine on his readings of Heraclitus and Hippocrates, as well as the speculative theories of the 18th century Scottish physician John Brown. He published his ideas in long article series in the Münchener Medizinische Wochenschrift.<sup>32</sup>

Bier's clinic was temporarily closed down in 1931 due to acute cash shortage as well as administrative mistakes of the Prussian government and the university. The right wing press used the opportunity to blame the Weimar system and Bier retired to his countryside manor house. There he wrote books on 'Life' and 'The Soul' and looked after his private forest which he saw as a great Heraclitian experiment. Bier's political allegiances were with the right. A staunch patriot, he is credited with the design of the new German army helmet in 1915, allegedly modelled on ancient Greek helmets. He was a member of the right-wing bourgeois German National People's Party. In 1932 he signed an appeal of right-wing organisations to vote for Adolf Hitler in the presidential elections.<sup>33</sup>

The Hamburg immunology professor, Hans Much (1880-1932) liked to present himself as a polymath and true renaissance man, a scientist and artist, philosopher and poet.<sup>34</sup> Apart from being a 'man of will,' he prided himself in possessing various other characteristics of the 'Nordic race.'<sup>35</sup> Starting his career as an assistant to the bacteriologist Emil von Behring, he was made head of the small Serological Institute at the Eppendorf hospital in Hamburg in 1907. Besides medical and biological issues, Much published books and articles on philosophy, North German Gothic buildings and art, Buddhist thought, ancient Egypt and the Middle East, as well as novels and a drama.<sup>36</sup> Much's 1926 book, Hippocrates the Great, is by no means a historical study of Hippocrates.<sup>37</sup> This did not prevent contemporary reviewers in the medical press from seeing the book as a valuable contribution to the ongoing debates over the future of medicine.<sup>38</sup>

‘To talk about Hippocrates,’ Much introduced his book, ‘means to talk about the essence of medicine.’<sup>39</sup> He went about this by presenting his views on the world in form of an impressionistic survey, grouped around a few quotes from Hippocratic writings but mainly drawing on his various fields of interest. Much’s book leans towards a Spenglerian approach to history. In Hippocrates, he claimed, several ancient high cultures culminated. The Hippocratic writings, he argued, were not in the first place manifestations of Greek culture, but of the older empires of ancient Egypt and of India.<sup>40</sup> Egypt had been a truly high culture, Much claimed, and the Egyptians had been ‘truly beautiful people’ of high race who incidentally also, like the modern ideologues of the Nordic race ‘recognised the long skull as the noblest form of skull.’ The Greeks, in contrast, had ‘faces without soul.’<sup>41</sup> Ancient Greece, in Much’s view, was already more of a ‘civilisation’ than a high ‘culture,’ and on the verge of decline.

Bier was not impressed with Much’s attitude towards the Greeks. ‘I thought,’ he wrote, ‘that the ... fashion of denying the Greeks any original culture and turning them into students of the oriental people had been overcome.’ Much’s book, he argued, could be viewed ‘at best as a historical novel,’ and even then it was not a particularly good one. In Bier’s view, Much had chosen the easy but flawed option of addressing the Corpus Hippocraticum ‘with “genius and intuition” where only diligence, thoroughness and knowledge could meet the goal.’<sup>42</sup> Bier’s reflections on the Hippocratic texts were part of a long term project: ‘I have used the services of two young philologists, the Messrs. W. Sauter and K. Levy, who were recommended to me as being exceptionally competent.’<sup>43</sup> He felt obliged to object to Much’s ways of ‘making [up] history’.

To Bier, Hippocrates represented what was great in Greek culture, to Much the heritage of the Orient. Amidst all differences, however, there were striking similarities between Much’s and Bier’s approaches to Hippocrates. Both found it appropriate to present

their personal views as resulting from the dialogue with an ancient culture, as a modern version of the dominant worldview of that culture. Both wanted to see these allegedly timeless values applied to modern medicine. And both attacked the same enemies. The Greeks to Bier

had the wonderful gift, which scientists have almost lost today, to combine clear thinking, level-headed observation, sharp analysis - which we admire as great today and in which most of us see the [sole] goal of science - with that generalising and artistic ability, and thus [they created] the harmony of the whole, which today is lacking everywhere in the sciences, not only in medicine. This [lack of harmony] is the great disease of our times.<sup>44</sup>

It comes as little surprise that Bier used the Greeks to point at the ‘disease of our times’: ‘naturalism’, ‘causalism’ and ‘mechanism.’<sup>45</sup> The rationalist 19th century had brought great progress to medicine, had freed the art of healing from the speculations of ‘Naturphilosophie’, but it was time now for a humanist turn, to bring back spirit into medicine.

On the surface, Bier and Much were talking about a theoretical problem, internal to medicine: the conflict between healing and medical science. Both stressed that it was an illusion to believe, as allegedly their opponents did, medicine could ever be merely applied science. This illusion was behind the ‘disease of our time’ and the ‘crisis of medicine’. Both talked about ‘rules’ of nature as opposed to natural ‘laws.’<sup>46</sup> Believing in laws would imply that the body was merely a machine. In opposing this mechanistic simplification, Much’s as well as Bier’s line of argument followed a fairly popular Kantian line: we would never be able to understand life in all its fine details, we would only ever understand little bits. This was, however, a problem of ‘pure reason.’ Doctors had to apply ‘practical reason.’ Medicine to Bier was a very practical form of knowledge. Even without understanding every detail, doctors could act according to the rules of life.<sup>47</sup> They had to use ‘intuition’. This meant that

doctors had to be artists where science did not provide answers. The importance of the right balance of empirical science and artistic intuition and skill to Bier and Much was the central message of Hippocrates.

What might look to us like esoteric, theoretical elaborations was connected with rather profane, social claims. To both Bier and Much the medical profession, or the ‘estate of physicians’ [Ärztestand] as it was commonly called, constituted a social élite. ‘Medical art,’ Much quotes Hippocrates on the frontispiece of his book, ‘is of all arts the noblest.’ The physician Elfriede Paul remembers from Bier’s lectures that ‘Bier told us bluntly about his opinion that under the Greek doctors of the Classic age even stomach and head wounds healed after surgery without complications because those doctors were recruited from the aristocracy and the highest estates, and because unlike today not any “plebeian” could become a physician.’<sup>48</sup> Medicine could not simply be studied; one had to be ‘born’ a physician whose art could only be accomplished by apprenticeship and years of bedside experience. Physicians stylised themselves as a middle class aristocracy, justifying their claims with their exclusive knowledge about life and death, which seemed to be in high demand in a society increasingly obsessed with biological explanations for social processes.<sup>49</sup> Much and Bier presented the ideal physician as a philosopher and priest rather than an expert of health management.<sup>50</sup> If the health system was controlled by the right priest-physicians, Much claimed, even increasing specialisation would not be a problem. Specialisation only led to ‘cultural bankruptcy’ if the specialists were not acting as servants of a greater whole, controlled by those who were ‘spiritually more highly gifted.’<sup>51</sup> Much and Bier opposed the secularisation process which medicine seemed to undergo in modern society.<sup>52</sup> Against it they promoted idealist visions of nature, worshipping the power of the soul and the will.

This peculiar combination of élitism, declinism and idealist ideology was not an uncommon attitude in the educated middle classes since the fin de siècle.<sup>53</sup> Members of the

old bourgeoisie embraced it to distinguish themselves from the commercial and industrial élites and the ‘new middle class’ of white collar workers who made their living in the expanding administrative bodies of companies and the modern state machinery. In the case of the medical profession, however, this élitist attitude also pointed towards a more specific problem: what was going to be the role and authority of the doctors in the expanding welfare state?<sup>54</sup> Doctors increasingly found their autonomy restricted by the expanding sickness insurance funds.<sup>55</sup> The elected administrative bodies of the funds were largely dominated by representatives of the trade unions.<sup>56</sup> Insurance fund doctors became employees of the funds. There is good evidence that economically they profited from this situation. The funds gave them access to large groups of the population which otherwise would have hardly consulted a doctor.<sup>57</sup>

The problem, however became one of power and of sustaining the traditional middle class status. It violated the doctors’ Standesehre, the ‘honour of their estate’, to be controlled by workers. In the Weimar Republic a further rise of the income thresholds for compulsory and voluntary sickness insurance worried many doctors. Large parts of the ‘new middle class’ joined the insurance membership. Furthermore, the funds claimed a say in health policy making. What they could not claim, however, was that exclusive priestly knowledge, the membership in the Hippocratic club. The promotion of Hippocratic values against what the editor of the Deutsche Medizinische Wochenschrift called the ‘materialistic - mechanising and spiritually stultifying - worldview of Social Democracy’ can be understood partly as a reaction to the expansion of insurance funds, which many doctors feared to be the first step towards the ‘socialisation’ of the medical profession.<sup>58</sup> Hippocrates in this context served right-wing and liberal doctors as a symbol of old style individualistic practice and of opposition against socialist plans of health reform.

Self declared spokesmen for the medical profession, like the Danzig surgeon Erwin Liek, presented the expansion of the insurance funds as part of an inherent socialist threat not only to middle class values but to the health of the nation.<sup>59</sup> This attitude, along with its close ties to Spenglerian declinism, resonates with what is known as 'Konservative Revolution', a movement of middle class intellectuals in the interwar years, harbouring blood-and-soil traditionalist, holistic and anti-urban tendencies.<sup>60</sup> Along with these 'Conservative Revolutionaries,' Hippocratists like Much and Bier called for a revolution against civilisation and the positivist outlook of late 19th century science, namely its effects on medicine. They embraced instead a worldview based on selectively chosen ancient and allegedly timeless ideas of wholeness and harmony. The programmes of the Hippocratists had distinctly fundamentalist character. They attempted to counter the differentiation evident in the increasingly complex and heterogeneous character of modern medicine and a growing fear of personal instability by embracing myths and symbols which promised a return to the stability they imagined had existed earlier.

### New Ethics

'Hippocratic medicine,' Much claimed, 'was ethics in the first place.'<sup>61</sup> While Hippocratic doctrines supported the élitist claims of the medical profession it also served to support a particular form of ethics. 'Preservation of a human life is obviously something marvellous,' Much declared. But Hippocrates had also recognised our dependence on the higher power of 'fate':

We must lift this problem completely out of the realm of ethics ... because the exaggerated, empty phrases of inferior centuries obstruct us here. Take an ideal State like the Platonic one, which was modelled on Sparta and which alone has any legitimacy, and we can address this question more easily. Of what use can it be to

preserve the life of a cripple? Whoever sees an art in this rids himself of the right to talk about art at all. In the end there is never art at work in these institutions where the useless are nursed, just a wrong understanding of sympathy.<sup>62</sup>

The line Much takes with respect to ‘useless cripples’ is that of the retired law professor, Karl Binding, and the professor of psychiatry, Alfred Hoche, who in 1920 published a book on ‘The Permission to Destroy Life Unworthy of Life.’<sup>63</sup> In their controversial book they argued for an ethical and legal basis for the medical ‘mercy’ killing of what they called the ‘mentally dead’, psychiatric patients with no or little prospect of improvement. These ‘empty shells of human beings’ were a burden on society, Binding and Hoche argued, and putting them to death could not be equated with other types of killing. It was allowable and useful. The book expressed the feelings of large parts of the population after the war: why should the incurably sick and deranged be fed and nurtured while the bravest of the nation’s young men had sacrificed their lives in the trenches for the Volk, and while mentally sane children were dying of starvation. Medical ethics would not be violated by this form of ‘euthanasia’. The Volk was an organism, too, and had rights above that of the individual. Paul Weindling has suggested that for Binding and Hoche ‘the war destroyed the value attached to individual life, shifting the emphasis to collective national survival.’<sup>64</sup>

Much apparently saw little problem in reconciling his favourable attitude towards the Binding and Hoche argument with his calls for the artist-doctor:

No, it is not man as such, as person, so pathetic and easily replaceable as part of a mass ... who makes medicine the noblest of all arts. It is the higher idea, here as in all other arts the whole, the general, the great and fundamental which makes art an art. Not man but life is what makes medicine a first class art, the artistic handling of life as such in its highest form.<sup>65</sup>

Like Much, Bier was also concerned with the threat of ‘inferiority’ to the German Volk. In 1925 he complained that ‘today the cult of the inferior is in power. For the healthy and stout they have no more sympathy. The inferior, however is nurtured.’<sup>66</sup> Bier believed that physical education, modelled on ancient Greek gymnastics, was a suitable means to fight the decline of the race. He was a co-founder of the ‘German College of Physical Education’ (Deutsche Hochschule für Leibesübungen) in 1920, and its director until 1932. Compulsory exercise, he believed, should compensate for the missing army service. ‘Nude exercise,’ the direct translation of the Greek for ‘gymnastics’, would be the best means of tuberculosis prevention.<sup>67</sup> The so-called ‘life reform’ (Lebensreform) movement had promoted fresh air, nudism and exposure to the sun as remedies against the evils of civilisation since the late 19th century.<sup>68</sup> Bier took up these ideas and incorporated them into his medical microcosm.

Much believed that the physician always had to be an artist in the first place, a born genius whose creativity and use of intuition should not be restricted by bureaucracy. He followed this creed also with respect to experimental medical science. The experimenter was always to be governed by concern for the greater whole. Otherwise he would descend into shallow specialism. Central to medical research was the insight into the impossibility of exactitude when dealing with biological phenomena. How could one expect animal models to behave exactly like human beings? In a paper on the common cold which he presented to the North-Western German Society of Laryngologists in 1926, Much tackled the problem of infection: was it mainly caused by bacteria or mainly by environmental influences, such as exposure to cold air or water?<sup>69</sup> In his view, both factors had an effect on the human ‘constitution’, which in turn led to the disease. The constitution was, in accordance with the principles he laid out in his Hippocrates book, the balance of substances in the body. The infection therefore was the disturbance of this peculiar balance, affected by bacteria and exposure to cold. Experiments with guinea pigs could not tell researchers anything reliable

about the human constitution.<sup>70</sup> The best way to solve the problem, he suggested, was to get in touch with ‘a reasonable asylum or prison director. ... One should expose a number of feeble-minded persons or prisoners, who live under the same [standardised] conditions, with their consent to various “endemic causes”.’<sup>71</sup> The whole experiment, he claimed, was ‘the opposite of inhumanity. It contributes to the battle [against the disease], and in this way the infinitely or temporarily useless help the fellow human beings and risk a cold at worst.’ Such experiments on asylum inmates or prisoners, however artistic, would soon be illegal. In 1930 the Imperial Health Council (Reichsgesundheitsrat) issued new guidelines for experiments on humans.<sup>72</sup> In a letter to prison service officials in July 1931, the Prussian minister of justice stressed that according to these guidelines experiments on prisoners were not permissible, not even with the inmates’ consent.<sup>73</sup>

### The German Hippocrates

If to men like Bier and Much Hippocratism was reconcilable with eugenic ideas and musings over experiments on prisoners, what happened to Hippocrates after Hitler’s rise to power in 1933? Not surprisingly, ‘Third Reich’ medical officials took up the popular ‘Back to Hippocrates’ calls of the Weimar years.<sup>74</sup> According to the Nazi reading, central to Hippocratism was its opposition to the Weimar ‘system’, to mechanism and materialism which the Nazis related to Marxist and Jewish influences. Hippocrates turned into a patron of their ‘national revolution’. The first volume of a series of books on ‘The Doctor’s Eternal Mission’ (Ewiges Arzttum) contained a collection of Hippocratic texts. The series was edited by Ernst Robert von Grawitz, chief physician of the SS.<sup>75</sup> The leader of the SS and of the German police forces in the ‘Third Reich,’ Heinrich Himmler, wrote the introduction to the volume. He praised ‘the great Greek doctor Hippocrates’ and his ‘unity of character and

accomplishment' which 'proclaims a morality, the strengths of which are still undiminished today and shall continue to determine medical action and thought in the future.'<sup>76</sup>

Paracelsus, the other great, mythical doctor, was increasingly presented as the symbol of physicians' responsibility towards the German Volk.<sup>77</sup> To right-wing ideologues, Paracelsus had the advantage of being born on 'German' soil. Apart from the aspect of nationality, however, authors often used the same phrases in describing the qualities of both Paracelsus and Hippocrates. Paracelsus, as it were, was the German Hippocrates. Hans Hartmann, for example, in his book on 'Paracelsus: A German Vision' wrote in 1941: 'The Hippocratic Oath and this vow [of Paracelsus to love the sick person more than himself] are in their deepest essence one and the same. Paracelsus says it just more simply and is carried by German feeling.'<sup>78</sup> Like Hippocrates, in Hartmann's view, Paracelsus had recognised that there were aspects to the world which humans would never understand: 'The more he searches, the more he knows how much he does not know.' Like Hippocrates, Paracelsus was a philosopher as much as a physician, and that was what the modern German doctor should be: a 'philosopher of German kind' who can 'above all distinguish the core of things from the superficial and the appendages.'<sup>79</sup> Hartmann emphasised Paracelsus' attempts to overcome the division between physicians and surgeons in order to lead medicine back to its united Hippocratic roots. In this he was an example for the modern German doctor: 'There are questions which have arisen from the passage of centuries, and which exactly equal the questions of Paracelsus. These are all those questions dealing with the conflict between orthodox medicine and folk medicine.'<sup>80</sup> Like Hippocrates, Paracelsus was presented as a symbol of unity in medicine and of the 'Third Reich' project of setting up a 'New German Art of Healing.'<sup>81</sup>

The Paul Diepgen, who in 1928 in connection with the launch of the journal Hippokrates had argued that his fellow historians of medicine should keep a professional

distance from questions of daily politics, apparently changed his mind after 1933.<sup>82</sup> In 1934 he announced the dawn of a ‘new ethics’ for the ‘Third Reich’ and offered the services of medical historians to the new government.<sup>83</sup>

The patient in the new State will more than ever before be seen by the doctor as part of the whole of the Volk. Health counselling of the individual will always be shaped by his considering [the patient in the first place as] member of the völkisch community, the carrier of genetic material which serves the whole ... A new ethics is announcing itself. There is no better help to finding one’s way into what is new than to study the history of the medical profession.<sup>84</sup>

Diepgen’s student Karl Rothschuh saw potential for ‘tough conflicts’ between ‘the role of the doctor as trustee of the community’ and ‘his traditional role as trustee of individual well-being,’ as it was ‘embodied for thousands of years in the Oath of Hippocrates.’<sup>85</sup> But: ‘With good reason, our time values the health of the community higher than that of the individual. The physician will under certain circumstances be forced to harm an individual’s body and soul if this individual represents a threat to the social body (Volkskörper).’<sup>86</sup> Diepgen attempted to bridge the seeming contradictions between the responsibilities of the physician towards the individual and the Volk by proposing a division of labour. In a speech to Cottbus practitioners in 1936 under the title ‘Hippocrates or Paracelsus?’, he suggested that embracing both role models would solve the problem:

I think that the physician does best today who says: Hippocrates as well as Paracelsus shall be my example; because rationalism as well as intuition, scepticism as well as optimism, critique strictly adjusted to the individual case as well as breadth of thought, nationalism as well as understanding for the interests of the other peoples of the earth, youth as well as old age constitute together the true physician.<sup>87</sup>

## Conclusion - The Legacy of Hippocratism

I have attempted in this chapter to analyse the use of Hippocrates as a rhetorical weapon and part of an ideological toolkit of German physicians in the 1920s and 1930s. Some of the defendants in the 1947 Nuremberg medical trials drew in their statements on the same ideological toolkit. They used the same phrases as Much and Bier in the 1920s. I have argued that the Hippocratic professional identity promoted in medical schools and by parts of the medical press did not rule out experiments on prisoners or asylum inmates. They were considered inferior human beings, and the experiments allegedly served the good of the greater whole.

The physician Fritz Fischer, who had performed experiments on inmates of the Ravensbrück concentration camp remembered having thought about the ethical implications of human experiments in medical school and occasionally reflected on the topic ‘by way of rounding up my complete picture. But I had utterly forgotten it later and never dreamed that it ever could constitute an actual problem for me.’<sup>88</sup>

I knew that some people and doctors considered themselves, as free individuals, to regard such tests [upon human subjects] as necessary even in normal times ... and I knew that when one believes that medicine should be subdivided in some way and is not very keen on the clinical side, which in the last analysis derives from the ancient priest-doctor, and does no more than observe the invalid and his symptoms at the bedside ... such doctors who, entirely on their own initiative, in normal times, choose to experiment on human beings, are those who turn to the domain of natural science, feel themselves morally justified in doing so and are regarded by humanity as so justified, because ... in the view of a natural science applied to human biology the ultimate and decisive proof of a theory can only be obtained by observation of a human subject.<sup>89</sup>

Fischer's statement combined in a confused way Much's notion of an ideal state with priest-doctors in leading functions and the Kantian argument of the limits of human understanding: the situation in which the concentration camp doctor found himself was 'beyond the grasp of one mind, on the level, that is, of the State.'<sup>90</sup> Gerhard Rose, professor of tropical medicine of the Berlin Robert Koch Institute who had commissioned typhus experiments on prisoners at Buchenwald, went further in his compliance with the demands of the State:

Speaking as a doctor, I may stress the fact that in a certain clearly defined category of experiments ..., medical men in general and I myself would consider it immoral to employ voluntary subjects. For the psychological strain then borne by the physician in charge would be unacceptable. He has no right to acquiesce in an offer of suicide. Such experiments are in my view only admissible when the sovereign power of the State nominates subjects who have forfeited their lives by committing crimes against the community.<sup>91</sup>

Fischer and Rose used rhetorical figures from the same ideological toolkit as Much and Bier, but applied them to rather different conditions. Much and Bier employed them against a political 'system' they despised. The existing state powers of the Republic, as it were, stood between the doctors and an idealised state, where they would function as the omnipotent priests of biology. Hitler's regime allowed some doctors to move into such positions. The professional ethical codes constructed around representations of Hippocrates and Paracelsus did not prepare physicians for resistance. They did, however, prepare them for the völkisch ideals of the Nazi hierarchy and the élitist structures of the SS.<sup>92</sup>

Physicians and their ideologies were part of the bigger picture of Hitler's rise to power. The ideology many of them embraced under the banner of Hippocratism hardly prevented physicians from getting involved in racist and discriminatory policies. It presented

the doctor as a leader and member of a detached élite with the ‘natural’ right to make arbitrary decisions ‘at a glance’ and without being accountable to anyone. The Hippocratism championed by men like Bier, Much, and Liek would not induce resistance but rather compliance with the Nazis ‘biological politics’ and SS élitism. Declaring doctors to be priests of biology proved to be too successful for the profession’s own good.

The problem of physicians’ compliance with NS authorities is far too complex to be dealt with in this chapter.<sup>93</sup> It would seem, however, that resistance against the role these authorities assigned to the medical profession in many cases did not originate primarily in medical ethics, but in personal ties with other belief and value systems, for example Christian faith.<sup>94</sup> It seems, for example, that the criticism of ‘the termination of so-called life not worth living’ in a much hailed speech of the Freiburg pathologist Franz Büchner in 1941 at Freiburg University, on ‘The Oath of Hippocrates. The Fundamental Laws of Medical Ethics’, grew in the first place out of his Christian beliefs.<sup>95</sup> Büchner was known as ‘the holy Franz’ after the war. However even his Christian faith seems not to have prevented him, as head of the Freiburg Institute of Aeronautical Pathology, from taking part in the planning and evaluation of Wehrmacht experiments on prisoners in the Dachau concentration camp.<sup>96</sup>

Other stories could be told about German doctors and medical ethics than the one I have told here. I have hinted above at the diverse political backgrounds of the Hippokrates editors. There was also a distinctly non-Hippocratist tradition of concern with the ethics of medical research in Prussia. Albert Moll, an eminent psychiatrist and sexologist in Berlin, published a book on medical ethics in 1902, in which he rejected experiments on human subjects.<sup>97</sup> He wrote this book in the wake of the highly controversial ‘Neisser case’: in 1898 the Breslau dermatologist Albert Neisser published his experiments on eight young women who in 1892 he had injected with an experimental syphilis serum. Four of them contracted the disease.<sup>98</sup> Moll was appalled by the reactions of his medical colleagues to the case, accusing

them of hushing up. He was a positivist and his line of argument was pragmatic: the foundation of medical ethics should be practice, not moral theories. He criticised that most writings on medical ethics focused on questions of the ‘medical estate’ and of etiquette. Doctors should not, he thought, set up special professional ethical codes, they should rather reconcile their special professional duties with general ethical concerns.

Julius Moses, a physician, supporter of the naturopathy movement and socialist member of parliament, also campaigned against experiments on human subjects. Like other socialist doctors he did not use Hippocratic arguments. He did, however, draw extensively on Moll’s book.<sup>99</sup> In 1930, when in the city of Lübeck more than 80 children died after vaccinations with a controversial tuberculosis vaccine, Moses suggested that they had been victims of an experiment.<sup>100</sup> Why were Moll’s and Moses’ warnings not more successful with the large majority of doctors? We can be sure that Moses’ allegiances with the Socialists and with the alternative healing movement made him suspicious to many of his colleagues. Moses himself blamed the profession’s preoccupation with the ‘honour of the estate’ (Standesehre). ‘The dangers of experimenting, for the people’s health and for medical science, are unfortunately not recognised by many doctors,’ he wrote,

‘This has to do, on the one hand with the strange attitude of physicians towards criticism, and on the other with the hypocritical arrogance ... and the wrong sense of solidarity, the fear about their prestige, which makes medics deaf and blind for the wrongs in their own realm.’<sup>101</sup>

After the war, Alexander Mitscherlich and Fred Mielke published the officially commissioned documentation of the Nuremberg Doctors’ Trials.<sup>102</sup> Mielke died soon and Mitscherlich was subsequently ostracised by the profession. Medical officials did not show much interest in shedding light on the activities of some of their colleagues in the ‘Third Reich.’<sup>103</sup> Only the changed climate of the 1960s brought Mitscherlich recognition. Michael

Kater has argued recently that a continuity of old Standesehre concepts is evident in the practices of professional organisations still today, despite all the changes the Auschwitz experience might have introduced to perceptions of medical ethics.<sup>104</sup> In face of a public which since the 1960s have demanded their ‘patient rights,’ it seems that maintaining élitist claims and realising economic interests remained more attractive to representatives of the profession than accepting concrete criticism, promoting transparency and ultimately accountability. The myth of Hippocrates has served this purpose well by disguising politics and lending an air of timelessness to claims of the profession. Unaffected by his use in setting up ‘Third Reich’ medicine and sanitised by post-war amnesia in Germany and elsewhere, Hippocrates still serves this function, ready to be appropriated and re-interpreted in correspondence with the medical ideals of an era.

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<sup>1</sup> Robert Jay Lifton, The Nazi Doctors: A Study in the Psychology of Evil, London: Macmillan, 1986, p. 32. The body of literature on medicine and the Third Reich is substantial. See, for example, Michael H. Kater, Doctors under Hitler, Chapel Hill and London: University of North Carolina Press, 1989; Paul Weindling, Health, Race, and German Politics between National Unification and Nazism, 1870-1945, Cambridge: Cambridge University Press, 1989; Robert N. Proctor, Racial Hygiene: Medicine under the Nazis, Cambridge, Mass. & London: Harvard University Press, 1988; Fridolf Kudlien, Ärzte im Nationalsozialismus, Cologne: Kiepenheuer & Witsch, 1985; Walter Wuttke-Groneberg, ed., Medizin im Nationalsozialismus: Ein Arbeitsbuch, Tübingen: Schwäbische Verlagsgesellschaft, 1980; Ernst Klee, Auschwitz, die NS-Medizin und ihre Opfer, Frankfurt a. M.: S. Fischer, 1997.

<sup>2</sup> The same does, for example, Karl-Heinz Leven, "Hippokrates im 20. Jahrhundert: Ärztliches Selbstbild, Idealbild und Zerrbild," in Karl-Heinz Leven and Cay-Rüdiger Prüll, eds., Selbstbilder des Arztes im 20. Jahrhundert: Medizinhistorische und medizinethische Aspekte, Freiburg i. Br.: H.F. Schulz, 1994, 39-96, pp. 75-80.

<sup>3</sup> See Christopher Lawrence, and George Weisz, eds., Greater than the Parts. Holism in Biomedicine 1920-1950, New York & Oxford: Oxford University Press, 1998.

<sup>4</sup> Cf. Eva-Maria Klasen, Die Diskussion über eine "Krise" der Medizin in Deutschland zwischen 1925 und 1935, med. diss., Mainz, J.-Gutenberg-Univ., 1984; Carsten Timmermann, "Constitutional Medicine, Neo-Romanticism and the Politics of Anti-Mechanism in Interwar Germany," *Bulletin for the History of Medicine*, in press.

<sup>5</sup> Cf. Detlev J. K. Peukert, "The Genesis of the 'Final Solution' from the Spirit of Science," in David F. Crew, ed., Nazism and German Society 1933-1945, London: Routledge, 1994, 274-99.

<sup>6</sup> Cf. Thomas Rütten, "Receptions of the Hippocratic Oath in the Renaissance: The Prohibition of Abortion as a Case Study in Reception," Journal of the History of Medicine and Allied Sciences, 51, 1996, 456-483, p. 471.;

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Karl Deichgräber, "Die ärztliche Standesehtik des hippokratischen Eides," Quellen und Studien zur Geschichte der Naturwissenschaften und der Medizin, 3, 1932, 29-49. See also Ivan Waddington, "The Development of Medical Ethics - A Sociological Analysis," Medical History, 19, 1975, 36-51; Robert Baker, Dorothy Porter, and Roy Porter, eds. The Codification of Medical Morality: Historical and Philosophical Studies of the Formalization of Western Medical Morality in the Eighteenth and Nineteenth Centuries, 2 vols., Dordrecht: Kluwer, 1993 & 1994.

<sup>7</sup> See, for example, George J. Annas, and Michael A. Grodin, eds. The Nazi Doctors and the Nuremberg Code: Human Rights in Human Experimentation, New York & Oxford: Oxford University Press, 1992; Rolf Winau, "Medizin und Menschenversuch. Zur Geschichte des 'informed consent,'" and Paul Weindling, "Ärzte als Richter: Internationale Reaktionen auf die Medizinverbrechen des Nationalsozialismus während des Nürnberger Ärzteprozesses in den Jahren 1946-1947," both in Claudia Wiesemann and Andreas Frewer, eds., Medizin und Ethik im Zeichen von Auschwitz. 50 Jahre Nürnberger Ärzteprozess, Erlangen & Jena: Palm & Enke, 1996, 13-29, 31-44; Ruth R. Faden, Tom L. Beauchamp, and Nancy M. P. King, A History and Theory of Informed Consent, New York & Oxford: Oxford University Press, 1986.

<sup>8</sup> Cf. Karl Mannheim, Ideology and Utopia: An Introduction to the Sociology of Knowledge, London: Routledge & Kegan Paul, 1936, esp. pp. 49-53.

<sup>9</sup> Cf. Christoph Jamme, Einführung in die Philosophie des Mythos, vol. 2: Neuzeit und Gegenwart, Darmstadt: Wissenschaftliche Buchgesellschaft, 1991.

<sup>10</sup> There is a substantial body of literature on fundamentalism, most of the works with a few exceptions on religious fundamentalisms. See, for example, Martin E. Marty, and R. Scott Appleby, eds. Fundamentalisms Observed, The American Academy of Arts and Sciences, The Fundamentalism Project vol. 1, Chicago & London: University of Chicago Press, 1991. Stefan Breuer has applied the fundamentalism concept to the secular cult around the German poet Stefan George: Stefan Breuer, Ästhetischer Fundamentalismus: Stefan George und der deutsche Antimodernismus, Darmstadt: Primus Verlag, 1996.

<sup>11</sup> Marty and Appleby, eds., Fundamentalisms Observed (n. 10), p. ix.

<sup>12</sup> Cf. Wilfried Nolte, Der Hippokratische Eid und die Abschlüsse der frühen und jetzigen deutschsprachigen Hochschulen - mit ergänzender Betrachtung ausländischer Eide, med. diss., Bochum: Ruhr-Univ., 1981.

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<sup>13</sup> Cf. Klasen, Die Diskussion über eine "Krise" der Medizin (n. 4). See also Adolf Meyer, "Die gegenwärtige Krise der Wissenschaften und die Aufgabe der Philosophie bei ihrer Beseitigung," Hippokrates, Zeitschrift für Einheitsbestrebungen der Gegenwartsmedizin, 3, 1931, 393-416; Kurt Riezler, "Die Krise der "Wirklichkeit'," Die Naturwissenschaften, 16, 1928, 705-12.

<sup>14</sup> Oswald Spengler. Der Untergang des Abendlandes: Umriss einer Morphologie der Weltgeschichte. Vol. I.: Gestalt und Wirklichkeit (1918), 33th-47th edition, Munich: C.H. Beck, 1923. Vol. II: Welthistorische Perspektiven, 1st-15th edition, Munich: C.H. Beck, 1922.

<sup>15</sup> Gerald D. Feldman, The Great Disorder: Politics, Economics, and Society in the German Inflation, 1914-1924, Oxford: Oxford University Press, 1993. Fritz Stern, The Politics of Cultural Despair: A Study in the Rise of Germanic Ideology, Berkeley: University of California Press, 1961; Michael H. Kater, "Hitler's Early Doctors: Nazi Physicians in Predepression Germany," Journal of Modern History, 59, 1987, 25-52.

<sup>16</sup> Detlev J. K. Peukert, The Weimar Republic. The Crisis of Classical Modernity, London: Allen Lane, The Penguin Press, 1991.

<sup>17</sup> Michael Hubenstorf, "'Deutsche Landärzte an die Front!' Ärztliche Standespolitik zwischen Liberalismus und Nationalsozialismus," in Christian Pross, Götz Aly, and Ärztekammer Berlin, eds., Der Wert des Menschen: Medizin in Deutschland 1918-1945, Berlin: Edition Hentrich, 1989, 200-23.

<sup>18</sup> Heinrich Meng, "Aus meinem Leben," Hippokrates, 33, 1962, 305-10; Detlef Bothe, Neue Deutsche Heilkunde 1933-1945. Dargestellt anhand der Zeitschrift "Hippokrates" und der Entwicklung der volksheilkundlichen Laienbewegung, Husum: Matthiesen, 1991.

<sup>19</sup> The other editors were Bernhard Aschner, Louis R. Grote, Miroslav Mikulicic, Eugen Bircher, Walter Gerlach, Diedrich Kulenkampff, Erwin Liek, Max Hirsch, Adolf Buschke, Erich Langer, Arnold Friedländer, Karl Landauer, Heinrich Meng, Walter Riese, Paul Schilder, Erich Stern, Rudolf Tischner, Otto Leeser, Hans Graaz, Ferdinand Hueppe, Georg Lutz, Hans Much, Friedrich Wolter. Cf. Bothe, Neue Deutsche Heilkunde (n. 18), pp. 51-4.

<sup>20</sup> Cf. Elizabeth Fee and Theodore M. Brown, eds., Making Medical History: The Life and Times of Henry E. Sigerist, Baltimore & London: Johns Hopkins University Press, 1997; Meng, "Aus meinem Leben," and Bothe, Neue Deutsche Heilkunde (n. 18).

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<sup>21</sup> Hans-Peter Schmiedebach, "Zur Standesideologie in der Weimarer Republik am Beispiel Erwin Liek," in Pross, Aly, and Ärztekammer Berlin, eds., Der Wert des Menschen (n. 17), 26-35.

<sup>22</sup> See, for example, several articles in "Moderne Medizin," special issue of Süddeutsche Monatshefte, 25, 1928, 546-614; Peter Schmidt, "Krise der Medizin?," Der Querschnitt, 9, 1929, 318-20; Wilhelm His, "Die Krise in der Medizin," Die Woche, 1930, 789-90; Hans Much, Hippokrates der Grosse, Stuttgart: Hippokrates Verlag, 1926; August Bier, "Gedanken eines Arztes über die Medizin," Münchener Medizinische Wochenschrift, 73, 1926, 723-6, 782-6, 1161-4; 74, 1927, 1141-7, 1186-8; 75, 1928, 265-8; idem, "Beiträge zur Heilkunde aus der chirurgischen Universitätsklinik Berlin" Münchener Medizinische Wochenschrift, 77, 1930, 569-74, 2112-4, 78, 1931, 113-6, 154-7, 408-11, 482-85, 540-43, 919-21, 961-3; idem, "Hippokratische Studien," Quellen und Studien zur Geschichte der Naturwissenschaften und der Medizin, 3, 1932, 1-28; Curt Elze, Louis R. Grote, Theodor Brugsch, Erwin Liek, and Willy Meyer-Gross, Grundlagen und Ziele der Medizin der Gegenwart, Leipzig: Thieme, 1928; Eberhard Zeller, Paracelsus. Der Beginner des deutschen Arzttums, Burg Giebigenstein: Werkstätten der Stadt Halle, 1936; Hans Hartmann, Paracelsus. Eine deutsche Vision, Berlin & Wien: Verlag Neues Volk, 1941. Critical remarks on this use of Hippokrates and Paracelsus in Henry E. Sigerist, "Das Bild des Menschen in der modernen Medizin," Neue Blätter für den Sozialismus, 1, 1930, 97-106, p. 99. See also Udo Benzenhöfer, "Zum Paracelsusbild im Nationalsozialismus," in Christoph Meinel and Peter Voswinkel, eds., Medizin, Naturwissenschaft, Technik und Nationalsozialismus, Stuttgart: Verlag für Geschichte der Naturwissenschaften und der Technik, 1994, 265-73.

<sup>23</sup> Bernhard Aschner, "Was können wir aus dem Studium der Werke des Paracelsus und der Geschichte der Medizin überhaupt für die heutige ärztliche Praxis lernen?," Wiener Medizinische Wochenschrift, 76, 1926, 1471-73; idem, Die Krise der Medizin. Konstitutionstherapie als Ausweg, Stuttgart, Leipzig, Zürich: Hippokrates Verlag, 1928; idem, "Paracelsische Krebsbehandlung," Biologische Heilkunde, 13, 1932, 308; idem, "Praktischer Hippokratismus. I. Die historische Methode als unentbehrliches Forschungsprinzip," Wiener Medizinische Wochenschrift, 86, 1936, 314, 345-49, 402-6; idem, "Neo-Hippocratism in Everyday Practice," Bulletin of the History of Medicine, 10, 1941, 260-71; idem, The Art of the Healer, New York: Dial, 1942. August Bier, Über die Berechtigung des teleologischen Denkens in der praktischen Medizin, Berlin: August Hirschwald, 1910; idem, "Die Behandlung lokaler Infektionen mit dem Glüheisen," Münchener Medizinische Wochenschrift, 77, 1930, 1359-62.

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<sup>24</sup> The popular Vienna gynaecologist Bernhard Aschner claimed to have coined the term ‘crisis of medicine.’ See Sibylle Brunk-Loch, Bernhard Aschner (1883-1960): Sein Weg von der Endokrinologie zur Konstitutionstherapie, med. diss., Mainz, J.-Gutenberg-Univ., 1995. Along with the Berlin homeopath Bastanier, Aschner was one of the vice presidents of the 1937 Premier Congrès International de Médecine Neo-Hippocratique in Paris. See Premier Congrès International de Médecine Neo-Hippocratique, Les Actes, 1937, pp. 35-55.

<sup>25</sup> For example, Richard Koch, “Medizin und Philosophie,” Münchener Medizinische Wochenschrift, 76, 1929, 10-12; idem, “Warum kamen die hippokratischen Aphorismen zu klassischer Bedeutung?,” Münchener Medizinische Wochenschrift, 80, 1933, 189-91; Paul Diepgen, Hippokrates oder Paracelsus?, Stuttgart: Hippokrates Verlag, 1937; Franz Spunda, Paracelsus, Wien & Leipzig: König, 1925; Henry Ernest Sigerist, Grosse Ärzte. Eine Geschichte der Heilkunde in Lebensbildern, 3rd edition, Munich: J.F. Lehmann, 1954; Bodo Sartorius von Waltershausen, Paracelsus am Eingang der deutschen Bildungsgeschichte, Leipzig: Meiner, 1936; Will-Erich Peuckert, Theophrastus Paracelsus, Stuttgart & Berlin: Kohlhammer, 1944.

<sup>26</sup> Henry Ernest Sigerist, “Forschungsinstitute für Geschichte der Medizin und der Naturwissenschaften,” in Ludolph Brauer, Albrecht Mendelssohn Bartoldy and Adolf Meyer, eds., Forschungsinstitute. Ihre Geschichte. Organisation und Ziele, Volume 1, Hamburg: Paul Hartung, 1930, 391-405, pp. 396-7.

<sup>27</sup> August Bier, “Beiträge zur Heilkunde aus der chirurgischen Universitätsklinik Berlin. I. Abhandlung: Vorbemerkungen,” Münchener Medizinische Wochenschrift, 77, 1930, 569-74. Cf. Hans-Uwe Lammel, “Chirurgie und Nationalsozialismus am Beispiel der Berliner Chirurgischen Universitätsklinik in der Ziegelstraße,” in Wolfram Fischer et al., eds., Exodus von Wissenschaften aus Berlin. Fragestellungen - Ergebnisse - Desiderate. Entwicklungen vor und nach 1933, Berlin & New York: de Gruyter, 1994; Rolf Winau, “August Bier,” in Wilhelm Treue and Rolf Winau, eds., Berlinische Lebensbilder: Mediziner, Berlin: Colloquium Verlag, 1987, 287-301; Karl Theodor Vogeler, August Bier. Leben und Werk, Munich: J.F. Lehmann, 1942.

<sup>28</sup> Lammel, “Chirurgie und Nationalsozialismus” (n. 27).

<sup>29</sup> Geheimes Staatsarchiv Preußischer Kulturbesitz (GStA), Rep 76 Va, Sekt. 1, Tit. VII, Nr. 24, Das Studium der homöopathischen Heilmethoden auf den hiesigen Universitäten, Typescript, Arnold Zimmer, Berlin-

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<sup>30</sup> Cf. GStA Rep 76 Va, Sekt. 1, Tit. VII, Nr. 24, Das Studium der homöopathischen Heilmethoden auf den hiesigen Universitäten, passim; Universitätsarchiv der Humboldt-Universität Berlin, Medizinische Fakultät, Nr. 41, Bl. 195-6. See also: Petra Werner, "Zu den Auseinandersetzungen um die Institutionalisierung von Naturheilkunde und Homöopathie an der Friedrich-Wilhelms-Universität zu Berlin zwischen 1919 und 1933," Medizin, Gesellschaft und Geschichte, 12, 1994, 205-19.

<sup>31</sup> Universitätsarchiv der Humboldt-Universität Berlin (UA-HUB), Medizinische Fakultät, Nr. 41, Bl. 63, 206. See also Gabriele Bruchelt, Gründung und Aufbau des Berliner Institutes für Geschichte der Medizin und der Naturwissenschaften, med. diss., Berlin: Humboldt Univ., 1978, pp. 11-2.

<sup>32</sup> Bier, "Gedanken eines Arztes" and "Beiträge zur Heilkunde" (n. 22). For John Brown and the reception of his theories see Guenter B. Risse, The History of John Brown's Medical System in Germany During the Years 1790-1806, PhD diss., Chicago: University of Chicago, 1971; Thomas H. Broman. The Transformation of German Academic Medicine, 1750-1820, Cambridge: Cambridge University Press, 1996, pp. 128-58.

<sup>33</sup> Lammel, 'Chirurgie und Nationalsozialismus' (n. 27), p. 576.

<sup>34</sup> Hans Much, "Hans Much," in L. R. Grote, ed., Die Medizin der Gegenwart in Selbstdarstellungen, Volume 4, Leipzig: Felix Meiner, 1924, 188-226. On Much, see also Renate Schulze-Rath, Hans Much (1880-1932), Bakteriologe und Schriftsteller, med. diss., Mainz, J. Gutenberg-Univ., 1993; Rainer Wirtz, Leben und Werk des Hamburger Arztes, Forschers und Schriftstellers Hans Much (1880-1932) unter besonderer Berücksichtigung seiner medizintheoretischen Schriften, Herzogenrath: Verlag Murken-Altrogge, 1991, Gabriele Winkler, Hans Much (1880-1932) als schöpferischer Schriftsteller, dargestellt am Beispiel seines "Meister Ekkehart", med. diss., Munich, Ludwig-Maximilians-Univ., 1989.

<sup>35</sup> Much, "Hans Much" (n. 34), p. 191.

<sup>36</sup> A. A. Friedländer, "Hans Much," Münchener Medizinische Wochenschrift, 80, 1933, 23-4. Hans Much, Das ewige Ägypten, Dachau: Einhorn-Verlag, 1927. Idem, Die Welt des Buddha, Dachau: Einhorn-Verlag, 1924.

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Marchand, Down from Olympus: Archaeology and Philhellenism in Germany, 1750-1970, Princeton, NJ: Princeton University Press, 1996.

<sup>37</sup> Much, Hippokrates der Grosse (n. 22).

<sup>38</sup> Reviews by: [Henry E.] Sigerist, Deutsche Medizinische Wochenschrift, 53, 1927, 1151; [Wilhelm] His, Klinische Wochenschrift, 6, 1927, 513-4; Max Nassauer, Münchener Medizinische Wochenschrift, 74, 1927, 248.

<sup>39</sup> Much, Hippokrates der Grosse (n. 22), p. 8.

<sup>40</sup> *Ibid.*, pp. 206-8.

<sup>41</sup> *Ibid.*, p. 37.

<sup>42</sup> August Bier, "Beiträge zur Heilkunde aus der chirurgischen Universitätsklinik Berlin. VIII. Abhandlung: Wesen und Grundlagen der Heilkunde. 2. Teil: Hippokratismus. 1. Abschnitt: Einleitung," Münchener Medizinische Wochenschrift, 77, 1930, 2193-5, p. 2194.

<sup>43</sup> *Ibid.*, p. 2194.

<sup>44</sup> Quoted in Vogeler, August Bier (n. 27), p. 270.

<sup>45</sup> Much, Hippokrates der Grosse (n. 22), p. 69.

<sup>46</sup> August Bier, "Beiträge zur Heilkunde aus der chirurgischen Universitätsklinik Berlin. I. Abhandlung: Vorbemerkungen," Münchener Medizinische Wochenschrift, 77, 1930, 569-74.

<sup>47</sup> August Bier, "Beiträge zur Heilkunde aus der chirurgischen Universitätsklinik Berlin. VIII. Abhandlung: Wesen und Grundlagen der Heilkunde. 1. Teil: Naturalismus," Münchener Medizinische Wochenschrift, 77, 1930, 2112-4. Much, Hippokrates der Grosse (n. 22), pp. 11-14, 65-7, 111-2.

<sup>48</sup> Elfriede Paul, "Wegbegleiter auf unebener Strasse," in Günther Albrecht and Wolfgang Hartwig, eds., Ärzte: Erinnerungen, Erlebnisse, Bekenntnisse, Berlin: Der Morgen, 1972, p. 132, quoted after Lammel, "Chirurgie und Nationalsozialismus" (n. 27), p. 570.

<sup>49</sup> Cf. Weindling, Health, Race, and German Politics (n. 1).

<sup>50</sup> Much, Hippokrates der Grosse (n. 22), p. 25.

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<sup>51</sup> Ibid., p. 29.

<sup>52</sup> See also Paul Diepgen, "Die Profanierung des ärztlichen Berufes," Ärztliche Mitteilungen, 27, 1926, 690-1.

<sup>53</sup> Fritz K. Ringer, The Decline of the German Mandarins: The German Academic Community, 1880-1933, Cambridge, Massachusetts: Harvard University Press, 1969.

<sup>54</sup> Cf. Paul Weindling, "Bourgeois Values, Doctors and the State: The Professionalization of Medicine in Germany 1848-1933," in David Blackbourne and Richard J. Evans, eds., The German Bourgeoisie. Essays on the Social History of the German Middle Class from the Late Eighteenth to the Early Twentieth Century, London & New York: Routledge, 1991, 198-223.

<sup>55</sup> Alfons Labisch, "From Traditional Individualism to Collective Professionalism: State, Patient, Compulsory Health Insurance, and the Panel Doctor Question in Germany, 1883-1931," in Manfred Berg and Geoffrey Cocks, eds., Medicine and Modernity: Public Health and Medical Care in Nineteenth- and Twentieth-Century Germany, Cambridge University Press, 1997, 35-54. Claudia Huerkamp. Der Aufstieg der Ärzte im 19. Jahrhundert. Vom gelehrten Stand zum professionellen Experten: Das Beispiel Preußens, Göttingen: Vandenhoeck & Ruprecht, 1985.

<sup>56</sup> Florian Tennstedt, Soziale Selbstverwaltung. Geschichte der Selbstverwaltung in der Krankenversicherung, Bonn: Verlag der Ortskrankenkassen, 1977.

<sup>57</sup> Reinhard Spree, Soziale Ungleichheit vor Krankheit und Tod, Göttingen: Vandenhoeck & Ruprecht, 1981. Claudia Huerkamp. Der Aufstieg der Ärzte im 19. Jahrhundert, (n. 55).

<sup>58</sup> Julius Schwalbe, "Bemerkungen zu dem vorstehenden Aufsatz", Deutsche Medizinische Wochenschrift, 45, 1919, p. 78.

<sup>59</sup> Erwin Liek, The Doctor's Mission: Reflections, Reminiscences, and Revelations of a Medical Man, London: J. Murray, 1930. Cf. Timmermann, "Constitutional Medicine," (n. 4).

<sup>60</sup> Cf. Stefan Breuer, Anatomie der Konservativen Revolution, Darmstadt: Wissenschaftliche Buchgesellschaft, 1993; Rolf Peter Sieferle, Die Konservative Revolution, Frankfurt: Fischer, 1995.

<sup>61</sup> Much, Hippokrates der Grosse (n. 22), p. 55.

<sup>62</sup> Ibid., p. 130-1.

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<sup>63</sup> Karl Binding and Alfred Hoche, Die Freigabe der Vernichtung lebensunwerten Lebens: Ihr Mass und ihre Form, Leipzig, F. Meiner, 1920. Cf. Karl Heinz Hafner, and Rolf Winau, “Die Freigabe der Vernichtung lebensunwerten Lebens.’ Eine Untersuchung zu der Schrift von Karl Binding und Alfred Hoche,” Medizinhistorisches Journal, 9, 1974, 227-54; Lifton, The Nazi Doctors (n. 1), pp. 46-8, Peukert, "The Genesis of the ‘Final Solution’" (n. 5); Weindling, Health, Race and German Politics (n. 1), pp. 394-7.

<sup>64</sup> Ibid., p. 394.

<sup>65</sup> Much, Hippokrates der Grosse (n. 22), p. 131.

<sup>66</sup> Vogeler, August Bier (n. 27), p. 105.

<sup>67</sup> August Bier, ‘Gymnastik als Vorbeugungs- und Heilmittel,’ Münchener Medizinische Wochenschrift, 69, 1922, 993-8.

<sup>68</sup> See, for example, Claudia Huerkamp, “Medizinische Lebensreform im späten 19. Jahrhundert. Die Naturheilbewegung in Deutschland als Protest gegen die wissenschaftliche Universitätsmedizin,” Vierteljahresschrift für Sozial- und Wirtschaftsgeschichte, 73, 1986, 158-82. Wolfgang R. Krabbe, Gesellschaftsveränderung durch Lebensreform. Strukturmerkmale einer sozialreformerischen Bewegung im Deutschland der Industrialisierungsperiode, Göttingen: Vandenhoeck & Ruprecht, 1974.

<sup>69</sup> Hans Much, “Erkältung,” Münchener Medizinische Wochenschrift, 73, 1926, 684-6.

<sup>70</sup> Cf. Timmermann, “Constitutional Medicine,” (n. 4).

<sup>71</sup> Much, “Erkältung” (n. 69), p. 685.

<sup>72</sup> Cf. “Kleine Mitteilungen,” Deutsche Medizinische Wochenschrift, 56, 1930, 591, “Tagesgeschichtliche Notizen,” Münchener Medizinische Wochenschrift, 77, 1930, 615.

<sup>73</sup> Bundesarchiv Lichterfelde, R 1501: Reichsministerium des Inneren, Nr. 26226: “Mißbräuchliche medizinische Eingriffe,” Bl. 296.

<sup>74</sup> Cf. Lifton, The Nazi Doctors (n. 1), p. 32.

<sup>75</sup> B. J. Gottlieb. Hippokrates. Gedanken über ärztliche Ethik aus dem Corpus Hippocraticum, 2nd edition, Ewiges Arztum 1, Prague, 1942. Cf. Leven, “Hippokrates im 20. Jahrhundert”(n. 2), pp. 75-80.

<sup>76</sup> Quoted after Lifton, The Nazi Doctors (n. 1), p. 32.

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<sup>77</sup> Cf. Benzenhöfer, “Zum Paracelsusbild im Nationalsozialismus” (n. 22).

<sup>78</sup> Hartmann, Paracelsus. Eine deutsche Vision (n. 22), p. 162.

<sup>79</sup> *Ibid.*, p. 170.

<sup>80</sup> *Ibid.*, p. 159-6.

<sup>81</sup> Bothe, Neue Deutsche Heilkunde 1933-1945 (n. 18); Alfred Haug, “Die ‘Synthese’ von Schulmedizin und Naturheilkunde im Nationalsozialismus. Ein kritischer Rückblick,” in Manfred Brinkmann and Michael Franz, eds., Nachtschatten im weißen Land. Betrachtungen zu alten und neuen Heilsystemen, Berlin: Verlagsgesellschaft Gesundheit, 1982, 115-25.

<sup>82</sup> Paul Diepgen, “Einheitsbestrebungen der Gegenwartsmedizin und Medizingeschichte,” Klinische Wochenschrift, 7, 1928, 855-6; Friedrich Kümmel, “Im Dienst ‘nationalpolitischer Erziehung’? Die Medizingeschichte im Dritten Reich,” in Meinel and Voswinckel, eds., Medizin, Naturwissenschaft, Technik und Nationalsozialismus (n. 22), 295-319.

<sup>83</sup> Paul Diepgen, “Aufgaben und Bedeutung der Medizingeschichte,” Geistige Arbeit, 1, 1934, 14, 1-2.

<sup>84</sup> *Ibid.*, p. 1.

<sup>85</sup> Karl Eduard Rothsuh, “Theoretische Medizin. Begründung ihrer Notwendigkeit in der Gegenwart und eine Umreißung des Gebietes,” Klinische Wochenschrift, 14, 1935, 1401-5, p. 1403.

<sup>86</sup> *Ibid.*, p. 1404.

<sup>87</sup> Diepgen, Hippokrates oder Paracelsus? (n. 25), p. 30.

<sup>88</sup> Alexander Mitscherlich and Fred Mielke, The Death Doctors, London: Elek, 1962, p. 186.

<sup>89</sup> *Ibid.*, p. 186.

<sup>90</sup> *Ibid.*, p. 189.

<sup>91</sup> *Ibid.*, p. 141.

<sup>92</sup> See Kater, Doctors under Hitler (n. 1), pp. 70-3, Lifton, Nazi Doctors (n. 1), pp. 447-51.

<sup>93</sup> For some detailed studies, see books in note 1.

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<sup>94</sup> Another group who resisted were the few socialist and communist doctors. Cf. Kater, Doctors under Hitler (n. 1), pp. 74-84.

<sup>95</sup> Franz Büchner, Der Eid des Hippokrates. Die Grundgesetze der ärztlichen Ethik, Freiburg i. Br.: Herder, 1945. Cf. Leven, "Hippokrates im 20. Jahrhundert", (n. 2), pp. 65-74.

<sup>96</sup> Klee, Auschwitz, die NS-Medizin und ihre Opfer (n. 1), pp. 193-243, esp. 241-2.

<sup>97</sup> Albert Moll, Ärztliche Ethik, Stuttgart: Enke, 1902; Julius Henri Schultz, Albert Molls ärztliche Ethik, Zürich: Juris, 1986.

<sup>98</sup> Cf. Barbara Elkeles, "Medizinische Menschenversuche gegen Ende des 19. Jahrhunderts und der Fall Neisser," Medizinhistorisches Journal, 20, 1985, 135-48; Winau, "Medizin und Menschenversuch" (n. 7), pp. 21-4.

<sup>99</sup> Cf. Julius Moses, Der Kampf um die Kurierfreiheit, Radebeul/Dresden: Madaus, 1930, pp. 72-5, 79-80; Daniel S. Nadav, Julius Moses (1868-1942) und die Politik der Sozialhygiene in Deutschland, Gerlingen: Bleicher, 1985; Susanne Hahn, "Revolution der Heilkunst - Ausweg aus der Krise? Julius Moses (1868-1942) zur Rolle der Medizin in der Gesundheitspolitik der Weimarer Republik," in Pross, Aly, and Ärztekammer Berlin, eds., Der Wert des Menschen (n. 17), 71-85; Kurt Nemitz, "Julius Moses - Nachlass und Bibliographie," Internationale wissenschaftliche Korrespondenz zur Geschichte der deutschen Arbeiterbewegung, 10, 1974, 219-41.

<sup>100</sup> Moses, Der Totentanz von Lübeck, Radebeul/Dresden: Madaus, 1930; see also Alberto Ascoli, "Die Calmettesche Schutzimpfung und die Säuglingserkrankungen in Lübeck," Deutsche Medizinische Wochenschrift, 56, 1930, 1160-2.

<sup>101</sup> Moses, Der Kampf um die Kurierfreiheit (n. 99), pp. 80-1.

<sup>102</sup> Mitscherlich and Mielke, The Death Doctors (n. 88).

<sup>103</sup> Christian Pross, "Nazi Doctors, German Medicine, and Historical Truth," in Annas and Grodin, eds., The Nazi Doctors and the Nuremberg Code (n. 7), 32-52, pp. 40-1.

<sup>104</sup> Michael H. Kater, "The Sewering Scandal of 1993 and the German Medical Establishment," in Berg and Cocks, eds., Medicine and Modernity (n. 55), 213-34; idem, Doctors under Hitler (n. 1), pp. 1-11.