

***Hitler's Female Physicians:
Women Doctors during the Third Reich
and Their Crimes against Humanity***

By Edzard Ernst.

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To the best of my knowledge, this is the first book in English to focus exclusively on the role of female Nazi doctors in the murder of their patients and others during World War Two. Given the passage of some 80 years since the fall of the Third Reich, the absence of such a work is regrettably notable and truly begs the question: why has this taken so long? Predominant focus on male Nazi doctors has in large part initially stemmed from those tried at the first of the 12 'subsequent military tribunals' held at Nuremberg in 1946/7—the so-called 'Doctors' Trial'. Indeed, Dr Herta Oberheuser (biography included within *Hitler's Female Physicians*), was the only female physician of the 23 defendants appearing at that trial.

Having said that, while reading through this work, a repeated realisation kept resounding with me as it became increasingly evident that collusion among the various male and female Nazi physicians had often been in play—'of course his wife, girlfriend, female colleague was involved'. I found myself asking why indeed no historian had looked a little deeper at the relationships of the male medical perpetrators before this time. Was it truly a fact that revulsion at the thought of female involvement in such heinous activity had stifled historical inquiry of female doctors all this time? On the one hand, many of the female physicians described in *Hitler's Female Physicians* typically embarked on a path of specialisation in female health—most commonly gynaecology—or paediatrics. Such paths, as the author notes, more readily aligned with the traditional patriarchal Nazi concept of women as nurturers, remaining at home to take care of the children (8). Yet, this work reveals that many of the female perpetrators were very much entwined with their murdering male counterparts—as colleagues, mentors, students, lovers, or spouses, not so much as homemakers or mothers of children—, so much so that the author has necessarily included, in most cases, coverage of the men in their lives as well. On the other hand, the author has teased out the women behind the men, peeling back the construct of women as nurturers and revealing that these women were very much complicit with the men in fulfilling Nazi race hygiene goals. As the author relates:

... women physicians were involved in the Nazi killing programs at all levels:

- Some acted as influential promoters of the Nazi ideology of race hygiene.



- Others participated in the murder of patients considered to be unworthy of life.
- Some were employed as doctors in concentration camps.
- Others co-operated in unspeakably inhumane medical experiments on non-consenting prisoners. (viii)

Hitler’s Female Physicians is divided into three parts. Part 1, entitled ‘Medicine’s Descent into Inhumanity’, comprises six introductory chapters—1 Medicine in the Third Reich, 2 Female Doctors of the Third Reich, 3 Race Hygiene, 4 Involuntary Sterilization, 5 Involuntary Euthanasia, 6 Genocide—that together provide the historical background common to the perpetrators profiled later in the work. All are succinct chapters, with only 3-5 pages each, yet they are well written, including solid, albeit brief, referencing of well-known primary authors in this field of study: Robert Proctor, Michael Grodin, Ernst Klee, Paul Weindling, and some of the author’s own prior work. Part 2 comprises the core component of *Hitler’s Female Physicians*—a collection of biographies of 38 female physicians involved in the medicalised murder of children, adults, or both under the Nazi regime. Part 3 comprises the conclusion, succinct once more at only three pages.

No photographs or illustrations of the doctors appear in the book, however many of these can be found in the referencing notes and links. Surprising to this reader, *Wikipedia* features heavily as a reference resource throughout the work—both the German and English versions of the website—albeit that prior to this work being published only 11 of the female physicians described in the book are listed on the German version of the *Wikipedia* site (“Liste von KZ-Ärzten”, n.d.). There is no real equivalent *Wikipedia* page in English providing a ‘list of concentration camp doctors and other participants in Nazi medical crimes’, with the closest to such a page only listing one female doctor (“List of Nazi doctors”, n.d.). The inclusion of *Wikipedia* has permitted the author to draw on a variety of online sources and successfully bring a considerable number of German terms, concepts, referencing, works, and links in translation to an English-speaking audience.

I reviewed the digital version of *Hitler’s Female Physicians* which, with embedded reference links, was quite useful for navigation within the referencing structure of the work although non-bi-directional links sometimes resulted in this reader having to annoyingly wade back through pages of text to return to the original starting place. Nevertheless, this structure led me to the conclusion that in some ways the work can best be described as a reference work of the lives of female doctors who were involved in the killing, inclusive of, where known, their supporters, their post-war careers, and their lives prewar, during the Nazi period, and post war. The format lends itself to expansion on the 38 doctors covered in the work, and given we know that by 1939, an estimated 1,300 female physicians were part of the League of German Girls [*Bund Deutscher Mädel*], with membership peaking at 1,500 in

1941 (Kater 2000, 109), I highly suspect the 38 included here constitute an iota of the whole involved in Nazi crimes.

My criticisms of *Hitler's Female Physicians* are few. I appreciate the author's aim at brevity in Part 1, however, I think greater mention of the influence on Hitler and the German health fraternity of the world-wide eugenics movement, the forced sterilisation policies already implemented in the United States from the early 1910s, in addition to the mention of Europe (13), would be worthwhile including in future editions. The Nazis themselves advertised that Germany was 'not alone' as a nation in introducing race-based sterilisation laws—by March 1936 the USA, Norway, Denmark, Sweden, and Finland had already enacted sterilisation legislation, and Hungary, England, Switzerland, Poland, Japan, Lithuania, and Latvia were considering it ("We are not alone", 2021). Related to this, the Brit Francis Galton's support of Charles Davenport setting up the Cold Spring Harbor Eugenic Office in Long Island, the influence of the American lawyer Madison Grant's work *Passing of the Great Race* on Hitler (Black 2012), and the Clark University-educated psychologist Henry Goddard's work on the Kallikak family's 'tainted heredity' that was assumed by the Nazi propaganda machine to influence the German populace—the Kallikak family 'story' features prominently in the 1930s Nazi propaganda film *The Inheritance* [*Das Erbe*] (Hartmann 1935) aimed at promoting public acceptance of eugenics laws in Germany—need to be highlighted. Indeed, Richard Berry, another Brit, suggested gassing of 'mental defectives' in a 'chamber' well before the Nazis actually implemented such procedures (Berry 1930, 155-156). Large scale involuntary sterilisation and ideas of permanent eradication of the 'useless' were circulating almost two decades before the Nazis implemented their programs.

My second point would be that it has been well established in the literature that the strategy for the Final Solution wasn't decided on 20 January 1942 at the Wannsee Conference as the author of *Hitler's Female Physicians* suggests (28). By the time of that conference, over a million Jews had already been murdered by mobile killing squads [*Einsatzgruppen*] in the occupied Soviet Union, and the Chełmno extermination camp was already operational. The conference is now firmly regarded as a meeting of consolidation where processes already commenced and leadership already in place—the SS—for a final solution were streamlined, communicated, and confirmed ("Inside the Wannsee Conference", n.d.). It also established a bureaucratic framework and legal basis for the genocide, including discussions on the status of people of mixed Jewish and German descent [*Mischlinge*].

Just as it can be argued that the women profiled in *Hitler's Female Physicians* were not stereotypical nurturers, nor were they stereotypical demons (Spitz 2005). What comes through in reading the profiles is that many of the female physicians were unscrupulous and uncompromising in achieving results aligned with the Nazi racial world view. Many were directly involved in the killing of individual patients, most commonly with lethal

injections of medications, petrol, or other substances, while many others, those in charge of certain institutions, presided over the murder of hundreds or thousands. They provided the orders and facilitated the murders conducted by nursing staff or more junior doctors within their own facilities or elsewhere. Just as is the case with so many German healthcare perpetrators during World War Two, the numbers of female doctors involved who got away with killing is notable, disgraceful, enraging, and despairing. Just as in the case of Nazi nurses, many of the female doctors were exonerated, served fractions of sentences, or avoided death penalties with the passage of time and the political realignment of German legal sentencing practices post war. The Hamburg Regional Court, for example, decided not to prosecute Dr Lotte Albers, who killed 14 of her patients, because she had allegedly “lacked awareness of wrongdoing” (35). So many female doctors continued practising in a medical capacity post war and lived to an old age. Albers continued to practise for 30 years as a paediatrician in private practice in Hamburg. She continued to be friends with some of the former nurses who had also worked at the *Kinderkrankenhaus Rothenburgsort*, where she had committed murder during the war, most notably with nurse Gudrun Kasch. Kasch had assisted Albers at the facility by holding the children while Albers administered the fatal injections. Kasch later worked as a medical receptionist for Albers. Lotte Albers died in 1992 at her home in Hamburg (36).

The author should be commended on his collection of profiles. It constitutes a labour of considerable time, and the historian in me thinks there is a not insignificant collection of unreferenced material, including *Bundesarchiv*, *Staatsarchiv* and *Stadtarchiv*, court, and other records underpinning *Hitler’s Female Physicians*. I would love to see that repository of documents! In its current form however, the work is easily accessible and should constitute essential reading for historians and students interested in this area of study and in the ethics component of curricula for medical, nursing, allied health, and public health students, especially those that are intent on specialising in mental health, neurology, gynaecology, psychiatry, and disability care. I have already commenced using *Hitler’s Female Physicians* in my teaching.

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