FIRST, DO NO HARM

FOR JEWISH DOCTORS, THE HOLOCAUST GAVE MEDICAL ETHICS A GRIM NEW MEANING

BY SUSAN SELIGSON

Among the Jews who survived the Nazi horror of Auschwitz was Gisella Perl, a gynecologist born in Transylvania in 1905. In interviews and in an unsparing memoir, Perl described her efforts to care for her fellow inmates when pregnancy among Jews was punishable by death. The doctor knew that at the Third Reich’s largest and most notorious concentration camp, the systematic execution of pregnant women was often preceded by grisly torture. To save lives, Perl, who the Jerusalem Post dubbed “the
Deported to Auschwitz from the Netherlands when he was in medical school, Louis J. Micheels wrote a book about his experience titled Dr. 117641. After the war, he immigrated to Westport, Conn., where he practiced psychiatry. He died in 2008, at 91. Stealing bread was the worst crime anyone could commit, punished by often fatal beatings. Although in the hospital the debility of the victims precluded such retaliation, both staff and patients faithfully adhered to the edict that bread was a sacred possession.‘It’s Sophie’s Choice, again and again,’ says Michael Grodin, founder of BU’s Project on Medicine & the Holocaust. At Auschwitz, Perl refused to let the desperate nature of her surroundings defeat her. ‘It was up to me to save all the women at Camp C from this infernal fate,’ she wrote, referring to a block that housed up to 30,000 women at a time. Perl taped up the expanding abdomens of some young women to hide their pregnancies and performed necessarily crude abortions on as many as 3,000, in the hope that the women’s survival would make possible the birth of more children. She wrote of the arrival of Yolanda, a poor former patient who had once sought the doctor’s help to conceive. Now, here was Yolanda, transported from Hungary, her belly swollen nearly to term. Perl delivered the baby—a boy—in secret, on the foul floor of the camp toilet, with her bare hands and without a drop of water. Then she put Yolanda in the hospital with pneumonia, not one of the illnesses, like typhus, that was punishable by death under camp edict. At first she hid the baby, Angel of Auschwitz,” made choices that haunted her until her death in 1988, at 83. Perl’s is one of 40 first-person accounts written by Jewish medical workers in concentration camps and ghettos and collected so far in an anthology-in-progress by Michael Grodin, a School of Public Health professor of health law, bioethics, and human rights. Grodin, founder of BU’s Project on Medicine & the Holocaust and a School of Medicine professor of sociomedical sciences and psychiatry, has been helped by researchers Rachelle Rubin (CAS’12) and Evelyn Liberman (CAS’12, SPH’13). The stuff of darkest nightmares, the texts shed light on a compelling facet of Holocaust studies—the ethical dilemmas faced by Jewish healers who struggled to save their own lives as well as the lives of fellow Jews. The material is, in Grodin’s word, overwhelming. But to read it is to understand that “there’s always the ability to make choices,” says Liberman. “I worked on rescuers of Jews, on the righteous Gentiles, and I did some work on the perpetrators, the Nazi doctors,” says Grodin, who has been studying medicine in the Holocaust for three decades and has written or cowritten five books, including The Nazi Doctors and the Nuremberg Code: Human Rights in Human Experimentation, with George Annas, a William Fairfield Warren Distinguished Professor and chair of the SPH department of health law, bioethics, and human rights. “About seven years ago I said, ‘Where are the Jewish doctors?’”

With primary and secondary sources gathered from a wide range of testimonial sources as well as from archives of the United States Holocaust Memorial Museum, in Washington, D.C., and Yad Vashem, in Jerusalem, their story can now be told.

Grodin, a psychiatrist and a bioethicist, says the project goes beyond bearing witness, venturing deep into the moral belly of the beast, where self-preservation and altruism wrestle. ‘It’s Sophie’s Choice, again and again,’ Grodin says.
whose cries would have brought certain death for him and his mother and would have put an end to Perl’s clandestine efforts to save as many pregnant women as possible. “Then I could hide him no longer,” she wrote. “I took the warm little body in my hands, kissed the smooth face...then strangled him and buried his body under a mountain of corpses waiting to be cremated.”

Through all of this, Perl, who witnessed the infamous Josef Mengele showing pregnant women into the Auschwitz crematoria, believed that she was doing what medicine was meant to do. She was offering comfort, and, she hoped, saving more lives than she was forced to sacrifice. Stripped of the tools of her trade, from surgical implements and medicine to soap and water, Perl cared for women who “did not know that they would have to pay with their lives, and the lives of their unborn children, for that last, tender night spent in the arms of their husbands.”

Grodin’s team has gathered other stories, from the unspeakably grim to some affording a rare morsel of consolation. In her search for firsthand accounts, Rubin scoured lists of victims and survivors, with thousands identified as doctors or dentists. It will never be known whether, or how, most of them practiced some form of their profession, but it is known how little they had to work with. In 1939 Poland, for example, the Nazis closed down Jewish-run pharmacies; in the Warsaw Ghetto, Jews raised money so the Judenrat, the Nazi-appointed Jewish authorities, could buy the nine ghetto pharmacies run by Polish Gentiles. But supplies were increasingly meager, and the few hospitals permitted to function did so as bleak parodies of their former selves, without heat, electricity, surgical tools, anesthesia, or sterilization equipment.

MORAL AMBIGUITIES
Grodin, whose beard and yarmulke befit a descendant of three generations of rabbis, is a perpetual student of the ravages of genocide. He cares for 10 Tibetan monks who are torture survivors, as well as refugees from Rwanda, Cambodia, and the Balkans. But his discovery 20 years ago of an English translation of the Nuremberg Nazi Doctors’ Trial set him on a course of inquiry that led to books about doctors as perpetrators, followed by an examination of such rescuers as the righteous Gentiles in Hitler’s Europe.

He knew of a few primary sources, including doctors’ accounts that were found in urns in the ruins of the Warsaw Ghetto, destroyed by the Nazis after a quashed uprising in 1943. And with the help of Rubin and Liberman, who received grants from the University’s Undergraduate Research Opportunities Program, and funds from the United Nations, the U.S. Department of Health and Human Services Office of Refugee Resettlement, the Holocaust Memorial Museum, Yad Vashem, and other sources, he combed through archives and private collections to put together a manuscript, now in search of a publisher and tentatively titled Ethical Dilemmas of Jewish Physicians and Allied Health Professionals in the Ghettos and Camps During the Holocaust.

Perl’s story—how she went from bringing life into the world to taking life in the name of salvation—was riveting to Rubin, whose four grandparents, all native Poles, were Holocaust survivors. Both her paternal grandparents and her maternal grandfather were in Auschwitz, and her maternal grandmother, who lost all of her family but one sibling, was hidden from the Nazis by her Gentile nanny. Rubin hopes to combine a law degree with her undergraduate studies in international relations, political science, and Judaic studies and lend her voice to the cause of international justice.
“I’d been to the camps; I thought I could handle anything,” says Rubin, who grew up in Manhattan and visited Poland on a senior trip with her Jewish high school. On a fittingly gray day during that visit, she stood in the preserved rubble of the Auschwitz block that had housed her grandfather, who was liberated from Birkenau at age 17. Although he generally distrusted the camps’ Jewish doctors, some of whom believed they had to dance with the devil to help fellow Jews, he attributes his survival to a Jewish doctor. A man so hated that he was hanged by fellow Jews after the war, this doctor certified that the severely weakened young man was “fit to live” after taking pity on his brother, Rubin’s great-uncle, who managed to remain with his younger brother and protect him throughout their ordeal. The moral ambiguities of the story haunted Rubin as she unearthed similar accounts of doctors whose predicament left them a single and seemingly impossible goal: to do more good than harm. “They felt a responsibility because of their profession; that’s what I found interesting,” says Rubin. “For others it was just out of the goodness of their hearts, but the reason these people gave that care was because they were doctors. That set them apart.”

What, wonders Grodin, would he do in their situation? “The doctors who tried to do whatever they could were faced with horrible dilemmas,” he says. “Do you treat one and let the rest die, or divide up the medicine so the chances of everyone’s survival is diminished? Do you report a case from Birkenau at age 17.

Most accounts reflect the experiences of doctors, but there are entries about dentists, who were often given more food and better living conditions and forced to extract gold fillings from the Jewish dead. Benjamin Jacobs, who wrote The Dentist of Auschwitz: A Memoir, told of his revulsion at having to strip gold from the gaping mouths of corpses, and of trying to help his family and other inmates by sharing his extra rations.

So clouded was the moral compass that even in the midst of the Nazi slaughter, observant Jews went to their rabbis to resolve important questions, such as whether it was permissible to risk one’s life to save others, as well as more mundane pleas, like whether eating nonkosher food was acceptable. The rabbis themselves often disagreed. In one response included in Grodin’s manuscript, Lithuanian Rabbi Ephraim Oshry...
cited a Talmud passage in which a man comes before the Rabbah, saying, “The governor of my town has ordered me, go and kill so and so, saying if you do not kill, I will kill you.” Rabbah replied, “Let him rather kill you, but you may not kill the other man. Who can say that your blood is redder than his?”

Discussing the dilemmas, Grodin says, “I can imagine how it felt...” and catches himself: “No. I can’t imagine.”

The anthology’s Warsaw Ghetto accounts reflect something Grodin cites as a key to survival: humanity and hope. The ghetto, where nearly half a million Jews were incarcerated, was established in the fall of 1940. Roughly 800 doctors attempted to meet the confounding medical needs resulting from starvation, poor sanitation, and lack of medicine, electricity, coal for heat, and clean water.

Pediatrician Adina Blady Szwajger, who died in 1993, wrote about how the Germans forced quarantine under the pretext of a typhus outbreak, with patients and staff locked inside the hospital without adequate beds or food. “It brought the entire staff together to form a tightly knit unit which nothing would be able to tear apart,” she wrote.

As transports of Jews arrived from all over Europe, and growing numbers suffered from starvation, typhus, and tuberculosis, the doctors became persuaded that there was something they could do, if not for their patients, then for future generations. They conducted research on starvation, “the hunger disease,” obtaining blood samples and keeping meticulous records that were hidden before the ghetto was destroyed.

One of the texts describes how a Dr. Eisner and his colleagues at the Czyzte Hospital weighed the ethics of a medical study of the hunger disease, “some way to document the Nazi brutality and at the same time show the dedication of the Jewish physicians working in the Warsaw Ghetto...If these atrocities could be documented by solid scientific observation...maybe the rest of the world would believe they actually happened.”

Warsaw Ghetto medical student Isaac Malanovsky is quoted: “For just as Jewish culture must survive, just as writers, composers, and artists must be encouraged to create out of this experience, so Jewish medical science, perhaps the pinnacle Jewish achievement, must also create out of this experience.”

“One of the things that allows people to survive is contact,” says Grodin. “The fact that the doctors could maintain optimism, even if it was a charade, relates to that spark. It’s that sense of humanness that I think is an incredibly important element. It was a way of maintaining sanity and a sense of self.”

The ghetto study was rigorous and well documented, and it remains one of the most extensive clinical studies of starvation ever reported. Grodin says the doctors rushed to finish it as a mass deportation order went into effect, with the Nazis relocating 5,000 Jews a day.

Just after the study was completed, one of its chief authors committed suicide with his family.

One of the most stirring documents in the anthology is a letter by the physician Elkhanan Elkes to his children, who had been sent to safety in England. Elkes was head of the Judenrat of Kovno Ghetto, in Lithuania, which was divided into concentration camps and handed to the SS in the fall of 1943. “I am writing this at an hour when many desperate souls...are camping on my doorstep, imploring us for help. My strength is ebbing. There is a desert inside me. My soul is scorched. I am naked and empty. There are not words in my mouth.”

Elkes was eventually transported to a subcamp of Dachau, where he was placed in charge of what was called, with cruel irony, the camp hospital. He died in the fall of 1944 after a hunger strike, having refused to participate in the camp “selections.” True to his medical oath, even as the moral universe was turned upside down, Elkes, first and always, did no harm.