

Eugenics and euthanasia: the slippery slope crossing the Atlantic

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ABSTRACT

The extermination of millions of people by the Nazi regime has been documented extensively since the discovery of the death camps at the end of World War II. In recent decades, much emphasis has been placed on the fact that the extermination of human beings, under the euphemism “euthanasia,” was conducted not only in death camps but also in facilities belonging to universities and research institutes. Forsaking any moral principle, renowned neuroscientists exploited the victims for their research.

This article aims to raise awareness of the fact that the murder and experimental use of millions of people during the Nazi regime had a precedent in the first eugenics laws, which were used to justify the violation of the fundamental rights of population groups regarded as inferior. Extensive evidence supports the little-known notion that the “slippery slope,” by which eugenics led to euthanasia, spread to Germany from the United States of America.

KEYWORDS

Ethics, eugenics, euthanasia, neuroscience, research

All the children born, beyond what would be required to keep up the population to this level, must necessarily perish, unless room be made for them by the deaths of grown persons.
(T. R. Malthus, 1766-1834)

Introduction

Numerous recent articles address the role that physicians in general, and German neuroscientists in particular, played in the euthanasia programme developed by the Nazi regime.¹⁻²⁷ Considering that mental and neurological diseases were the main reason that people were killed under the Aktion T4 programme, the considerable involvement of neurologists, psychiatrists, and neuropathologists in that dreadful initiative seems logical, to an extent. The role of neurologists in particular has been addressed in a recent study²⁶ whose bibliography

includes a wide range of German-language articles that are not cited in the present study. Neurologists probably played a less significant role than did psychiatrists in Aktion T4, given the much smaller academic influence of neurology at the time. Psychiatry was taught in most universities, and nearly all chairs of psychiatry endorsed the Nazi ideology. Furthermore, many neurologists were Jewish, and hence were expelled from their positions, exiled, or even murdered.^{9,26}

Researchers interested in this topic frequently highlight the fact that the neuropsychiatrists and neurologists involved in the euthanasia programme were often professionals of considerable standing; far from being obscure academics, many were renowned professors and researchers. We should highlight the cases of

THE SLIPPERY SLOPE

Racial/social hygiene or supremacy

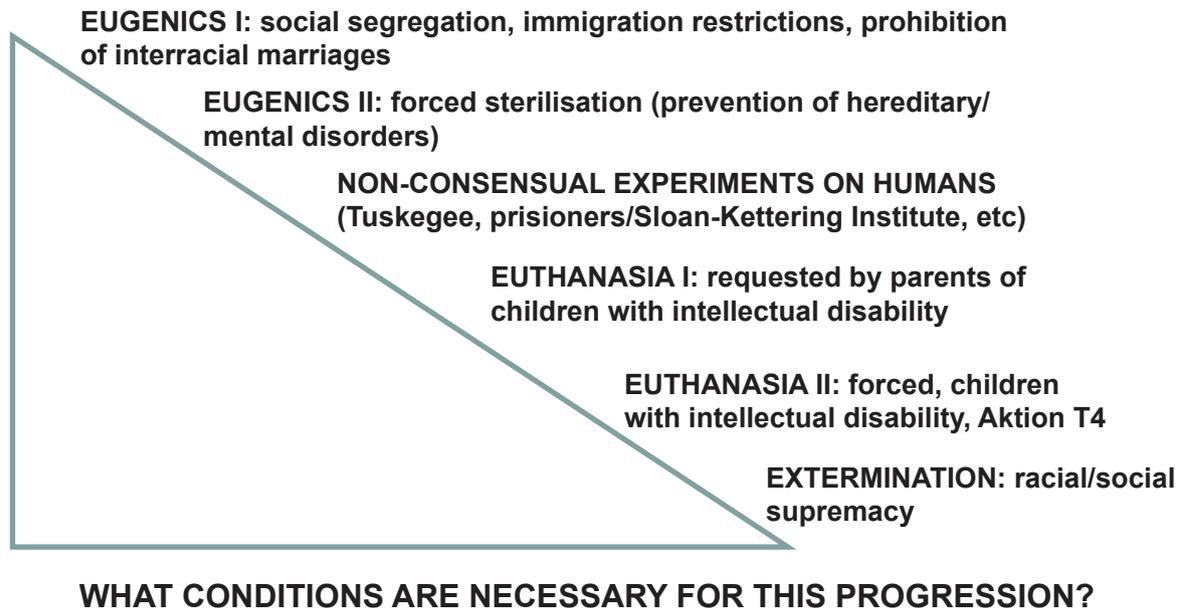


Figure 1. Diagram of the slippery slope argument

Hallervorden, Spatz, Seitelberger, Schaltenbrand, Sherer, Schneider and Gross,^{3,4,6,7,10,12-14,17,19,20-25} prominent scientists who took advantage of the situation to collect brains for their research.^{7,13} It was not for decades that society and the scientific community rejected these scientists or filed lawsuits against them; during the active years of their careers, they were never condemned for their past actions. On the contrary, most of them were widely recognised, holding academic positions and receiving awards and tributes; when they died, their obituaries had only positive words.¹⁹

This article aims to raise awareness of the fact that the murder and experimental use of millions of people during the Nazi regime had a precedent in the first eugenics laws, which justified the violation of fundamental rights of population groups considered inferior. Extensive evidence supports the little-known notion that the

“slippery slope,” by which eugenics led to euthanasia, spread to Germany from the United States of America.

Development

Many authors have asked how prominent scientists came to lose sight of the ethical principles guiding research and clinical practice during the Nazi era.^{3,6} It seems obvious that the shift from deep respect for human beings to the horrors of Nazi medicine cannot occur overnight, but rather after a long process of gradual loss of respect for the other, with individuals no longer recognised as inviolable entities with fundamental rights.

It has often been argued that this perversion, which led to the extermination of millions of people, was a gradual process originating in eugenics.^{4,22,27,28} Eugenics postulated that some individuals are inherently inferior and therefore do not deserve to reproduce due to the

harm they represent for an ideal society of superior individuals.^{29,30} The first mass persecution to be legally organised on account of the idea that “some lives are unworthy of living” were not gassings or barbiturate poisoning, but rather forced sterilisation (Figure 1).⁶

The horrors of the Nazi regime have eclipsed the fact that eugenic ideas and their practical application originated on the other side of the Atlantic²⁰:

But the concept of a white, blond-haired, blue-eyed master Nordic race didn't originate with Hitler. The idea was created in the United States, and cultivated in California, decades before Hitler came to power. California eugenicists played an important, although little known, role in the American eugenics movement's campaign for ethnic cleansing.³¹

Many American states established eugenics programmes during the early part of the 20th century, inspiring the programmes implemented in Nazi Germany. As occurred with eugenics, renowned jurists including Oliver Wendell Holmes, and prominent neurologists and neuropsychiatrists, did not hesitate to voice their support for euthanasia. Nobel laureate Alexis Carrel and the neurologists Robert Foster Kennedy and William Gordon Lennox all constitute good examples of the progression from eugenics to euthanasia.

The first eugenics initiatives in the United States

By the end of the 19th century, many Western countries began to study how they could improve the national health and efficiency, and how to modify individual lifestyles and health, with the explicit or implicit purpose of improving workers' productivity to create more wealth. This led to the implementation of a wide range of beneficial policies, including waste management, water purification, and prevention of drug use, but also to the introduction of eugenic measures to prevent the birth of individuals judged to be inferior due to their race or hereditary diseases. The term eugenics was coined in 1883 by Sir Francis Galton³¹; the ideology is characterised by a gross misinterpretation of Darwinism, and aimed to preserve a “master race.” These ideas led to the development of such initiatives as racial segregation, immigration restriction for “inferior” individuals, the prohibition of interracial marriages, and ultimately forced sterilisation.

Eugenic ideas spread with the help of such influential institutions and characters as the Carnegie Institution of Washington, the Rockefeller Foundation, and Mary

Williamson Harriman (the widow of railway magnate E.H. Harriman), who financed the Eugenics Record Office at Cold Spring Harbor (1911), which gathered information on the American population for the purpose of eugenics.³⁰⁻³² Karl Pearson organised the First International Eugenics Conference, held in 1912. The third edition of the congress was held in New York in 1932; it was presided over by the Nazi Ernst Rüdin and heavily funded by the American elite. The journal *Eugenics News* was pivotal in disseminating the most radical eugenic ideas. Eugenics also took root in Canada and some European countries, particularly in Scandinavia.

Forced sterilisation: the famous case of Carrie Buck and the decision of Justice Oliver W. Holmes

Forced sterilisation, the most extreme expression of eugenics, was legalised in Indiana in 1907 and in Connecticut in 1909. By 1914, 12 American states had passed laws allowing involuntary sterilisation, although it was rarely put into practice due to administrative issues. California was the exception to this rule: by 1929, over 6000 surgeries had been performed. Harry Laughlin's *Eugenic sterilization in the United States* became an important reference on the subject; the author also drafted a “model” compulsory sterilisation bill that served as the basis for other states' legislation. Laughlin, along with H.F. Osborn and M. Grant, founded the American Eugenics Society in 1922.

He was also involved in the case of Carrie Buck, which became symbolic of the abuses of forced sterilisation.³³ Carrie Buck was the eldest child of a poor woman who was abandoned by her husband. Her mother had two other children by unknown fathers, after which she was sent to the Virginia State Colony for Epileptics and Feeble-minded. Carrie was placed with foster parents and attended school until sixth grade, when she was removed to help with household chores. She became pregnant after being raped by a nephew of her foster parents, who kept the child and committed Carrie to the Virginia State Colony for Epileptics and Feeble-minded. The state of Virginia ordered that Carrie be sterilised and the case reached the Supreme Court. Justice Oliver Wendell Holmes, one of the most prominent judges in the history of the United States, upheld the decision of the state of Virginia;

A pedigree chart that Harry Laughlin offered as evidence of Carrie Buck's hereditary "feeble-mindedness," with the goal of involuntary sterilization.

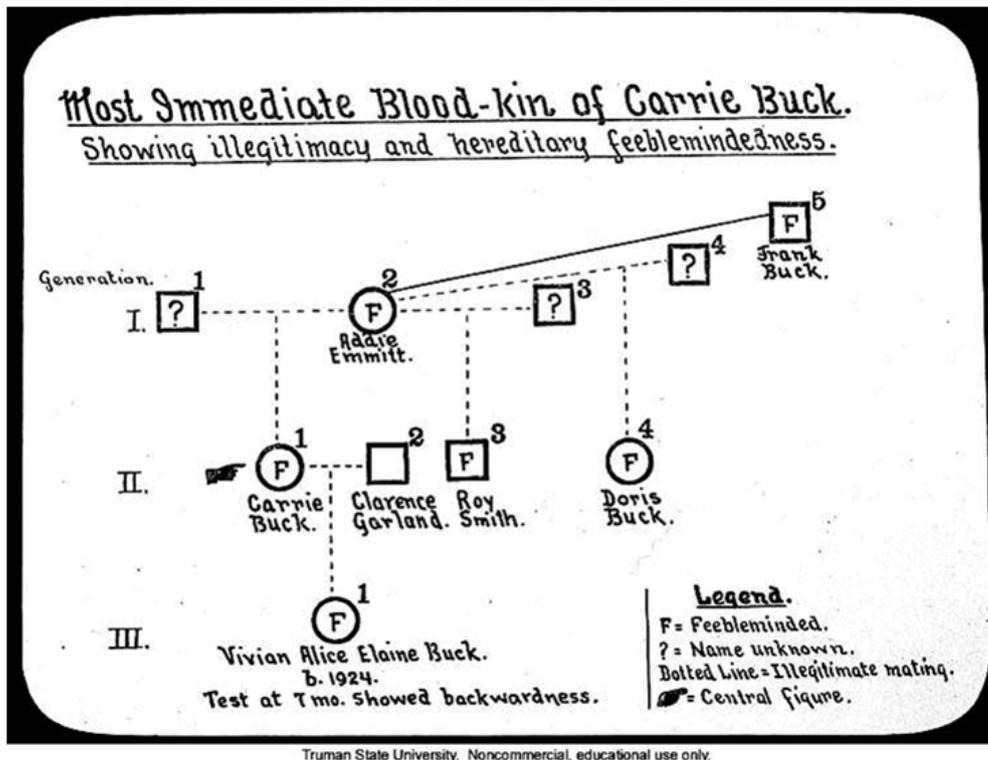


Figure 2. Pedigree chart used by Laughlin to prove Carrie Buck's alleged hereditary "feeble-mindedness"

his crude (and later controversial) words would be unspeakable today:

It is better for all the world, if instead of waiting to execute degenerate offspring for crime, or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind. The principle that sustains compulsory vaccination is broad enough to cover cutting the Fallopian tubes. Three generations of imbeciles are enough.

Carrie underwent salpingectomy at the age of 21; her sister is also reported to have been subjected to forced sterilisation during an appendectomy. Laughlin, one of

the "expert witnesses" working on the case, presented a pedigree chart of Buck's family (Figure 2) to prove the hereditary nature of her alleged feeble-mindedness: her own daughter had been diagnosed with "backwardness" at the age of seven months (and died of enterocolitis when she was eight years old).

Time proved that Holmes' decision was based not only on an inhuman eugenic conception but also on a serious diagnostic error: Carrie Buck was not intellectually disabled, and evidence of her daughter's intellectual dysfunction was not conclusive. The available evidence

suggests that Buck's school performance was average. She married twice; both men were older widowers with many children, whom she cared for well. According to Professor Paul Lombardo, who extensively researched the case, Carrie Buck had normal intelligence. A historical marker for the case was erected in 2002, and the governor of Virginia expressed his profound regret for the damage caused by eugenics.³⁴ The case was made into a film.

American eugenics inspires the German Nazis

As mentioned previously, the Third International Eugenics Conference held in New York in 1932 was presided over by Professor Ernst Rüdin. In a presentation entitled "Selective sterilization for race culture," Theodore Russell Roble proposed the sterilisation of 14 million US citizens who had scored low on intelligence tests since World War I. This served as an inspiration for Ernst Rüdin, Eugen Fischer, and Fritz Lenz, who in 1933 drafted the German law for the prevention of offspring with hereditary diseases. The law, largely based on Laughlin's model, had the advantage that it covered the entire country; the American eugenicists had sought to achieve this, without success. Rüdin was the director of the Kaiser Wilhelm Institut in Berlin, which received several million dollars from the Rockefeller Foundation for biological and genetic research. Mass sterilisations were performed, with over 5000 operations per month. This sparked admiration and envy among American eugenicists, who felt outpaced by the Germans: "the Germans are beating us at our own game," stated Joseph DeJarnette.³⁵

The Nazis initially calculated that sterilisation must be performed on 200 000 individuals with "hereditary feeble-mindedness," 80 000 with schizophrenia, 60 000 with epilepsy, 20 000 with manic depression, 4000 with congenital blindness, 16 000 with hereditary deafness, 20 000 with severe deformities, and 10 000 with hereditary alcoholism. These figures are probably underestimated, however. In addition to individuals with the diagnoses mentioned above, the Nazis also sterilised people with any other congenital disease, including hereditary forms of chorea (eg, Huntington disease), and later prisoners, alcoholics, prostitutes, and children living in orphanages. It is estimated that at least 400 000 people were subjected to involuntary sterilisation in Nazi Germany.

This widespread use of forced sterilisation had a rebound

effect in the United States. Beginning in 1935, articles were published that criticised the abuse of sterilisation, which was soon associated with Nazism and scientific misconduct. The American anthropologist Franz Boas was the most influential figure of the anti-eugenics movement. The Carnegie Institution of Washington revised its stance on eugenics and stopped funding the Eugenics Record Office, which soon had to close.

However, forced sterilisation continued to be practised in the United States (with compulsory sterilisation laws remaining in force until 1985 in 19 states) and, after World War II, many countries created eugenics institutions and promoted ethically questionable birth control measures.²⁸

From eugenics to euthanasia: the opinions of Alexis Carrel, Robert Foster Kennedy, and William Gordon Lennox

The idea of euthanising certain population groups was not exclusive to unscrupulous intellectuals, biologists, or politicians; some brilliant physicians who made substantial contributions to science also succumbed to the temptation of implementing euthanasia as an easy solution to disability, particularly mental disability.

Alexis Carrel (1873-1944) constitutes one of the best examples.³⁶ Born and raised in Lyon, France, he distinguished himself early in his career as a surgeon, particularly in vascular suturing, a technique that was associated with poor outcomes until that time. He emigrated to the United States; with the support of the Rockefeller Foundation, he continued his research on organ transplantation, in which vascular suturing plays an essential role. Carrel was awarded the Nobel Prize in Physiology in 1912. Collaborating with Dakin, he developed the antiseptic solution named after them; the Carrel-Dakin method dramatically improved the outcomes of surgical site infections and was particularly useful during World War I. He was awarded the French Legion of Honour and elected a member of the Pontifical Academy of Sciences. A former agnostic, he converted to Christianity after witnessing the unexplained recovery of a patient in Lourdes, France.

Despite this background, Carrel's book *L'homme, cet inconnu*³⁷ exudes machismo, elitism, and racism. According to Carrel, society had made the mistake of "substituting the school for the family training" due to the "betrayal of women," who "abandon their children

to 'kindergartens' in order to attend to their careers, [...] their fancies, or simply to play bridge, go to the cinema, and waste their time in busy idleness."^a Democratic equality was also a mistake. Carrel believed that too many "inferior individuals" had been conserved, and that their reproduction was detrimental to society, suggesting that the solution was to "develop the strong." He concludes that no more prisons or hospitals should be created if society was to defend itself from dangerous individuals, the insane, and criminals. To this end, Carrel advocated eugenics policies and education. Meanwhile, he proposed taking more immediate actions, such as "conditioning with [...] the whip, or some more scientific procedure" for petty criminals, with the most dangerous individuals to be "humanely and economically disposed of in small euthanasic institutions supplied with proper gasses." It seems that being a brilliant scientist, winning the Nobel Prize, or feeling spiritually close to the Vatican or Our Lady of Lourdes does not confer immunity against some of the most outrageous ideas.

Two neurologists in the United States showed similar attitudes toward euthanasia.

Robert Foster Kennedy (1884-1952) was born in Ireland and trained in Queen Square, London. He emigrated to the United States, where he became head of the neurology department at Bellevue Hospital, professor of neurology at Cornell University, and president of the American Neurological Association.³⁸ He was granted the degree of Doctor Honoris Causa by the University of Heidelberg. During the 1941 annual meeting of the American Psychiatric Association, R.F. Kennedy supported euthanasia to relieve "the burden of living" for "the completely hopeless defective: nature's mistake"; and to relieve their parents and society from the economic burden of their care.³⁹ His ideas were refuted by Leo Kanner, sparking debate among American psychiatrists.⁴⁰ According to Strous,¹⁵ during his years teaching at Cornell University, Kennedy maintained that "all children with proven mental retardation [...] over the age of five should be put to death."

William Gordon Lennox (1884-1960)⁴¹⁻⁴³ worked as a missionary doctor in China, where he became interested

in epilepsy. Upon returning to Harvard Medical School, he worked with Stanley Cobb and Frederic Gibbs to promote epilepsy research and treatment as very few have done. He received the Albert Lasker Award for Clinical Medical Research, was honorary president of the International League Against Epilepsy, co-edited the journal *Epilepsia*, and co-authored, with his daughter, the classic *Epilepsy and related disorders*. An epileptic syndrome is named after him. In 1938, Lennox recommended euthanasia for individuals with congenital oligophrenia and incurable patients who wished to die. In 1950, he advocated the "mercy killing of children with undeveloped or misformed brains" as a means of freeing up space in "our hopelessly clogged institutions."

Euthanasia in Nazi Germany: the Aktion T4 programme

The proposals made by Carrel, Kennedy, and Lennox may secretly have been applied in isolated cases in the United States, but the political situation prevented generalised euthanasia. On the other side of the Atlantic, however, these ideas found the perfect breeding ground for mass euthanasia.

The first case of euthanasia in Nazi Germany was that of Gerhard Kretschmar ("Child K"), a child born with severe intellectual disability; his parents sent Hitler a letter requesting that their son be euthanised. The Führer sent his personal physician Karl Brandt to confirm the child's malformations and intellectual disability, and to authorise local doctors to euthanise Gerhard, although Hitler himself did not explicitly order euthanasia. Soon afterwards, Hitler sent a Machiavellian letter ordering that euthanasia be generalised⁴⁴:

Reich Leader Bouhler and Dr Brandt are entrusted with the responsibility of extending the authority of physicians, to be designated by name, so that patients who, after a most critical diagnosis, on the basis of human judgement, are considered incurable, can be granted mercy death.

After this, he stayed away from the matter.

The main figure in the Nuremberg Laws for eugenics and euthanasia was Gerhard Wagner, the leader of Reich doctors and the Führer's commissioner for national health, who died in 1939. Brandt, Bouhler, and SS official Viktor Brack were responsible for implementing the euthanasia programme, which initially focused on children. The programme was developed in an office at Tiergartenstraße 4, hence its name. Bouhler committed suicide in 1945, whereas Brandt and Brack

^a Translator's note: quote taken from Muel-Dreyfus F. *Vichy and the eternal feminine: a contribution to a political sociology of gender*. Durham (NC): Duke University Press; 2001.

were sentenced to death at the Nuremberg trials. Child psychiatrist Hans Heinze, an important consultant for Aktion T4, was captured by the Russians and sentenced to seven years of forced labour. After his release, Heinze resumed his career and was appointed director of an important child neuropsychiatry centre.³

In line with the slippery slope argument, Aktion T4 led to the gassing of thousands of children with a wide range of disorders, including severe intellectual disability, hydrocephalus, microcephaly, and severe or hereditary epilepsy. Seventy thousand children are estimated to have been murdered in this way. In 1941, protest from the victims' parents, society, and the Catholic Church, led by Bishop von Galen, forced Hitler to take measures to disguise, but not stop, the programme. Six centres were established at remote locations (eg, in Brandenburg and Vienna⁴⁵),²⁷ eligibility criteria were widened to include individuals with psychiatric disorders and of all ages, and gassing was replaced by barbiturates and starvation. The programme remained active until 1945, killing around 200 000 individuals.⁴⁵ The last phase of this slippery slope was the mass murder not only of children and adults with incurable disorders but also of individuals whose ethnicity, political ideas, or sexual orientation endangered the development of a master race. This "Final Solution" led to the murder of millions of people.^{1,22,27}

Conclusions

In the context of eugenics and euthanasia, the slippery slope argument has two different interpretations. On the one hand, it suggests that mass murders for ideological, political, or racial reasons resulted from eugenics laws, which violated some people's fundamental rights: the most vulnerable individuals were initially sterilised, subsequently used for research purposes, and ultimately killed in gas chambers.^{17,22} The present study addresses this formulation of the slippery slope argument. There is little doubt that this occurred in the first half of the 20th century: originating in the United States, eugenics crossed the Atlantic to inspire the horrors of Nazi Germany.

On the other hand, the slippery slope has also been used as a metaphor for the cooperation first in eugenics and then in euthanasia among physicians in general, and neuroscientists in particular, in Nazi Germany. Some authors have proposed an alternative to the slippery slope

hypothesis, arguing that German physicians subverted their ethical principles due to pressure from a group of immoral leaders. According to both views, German physicians were almost victims, driven to insanity by the political situation. In contrast, a third version suggests (and extensively documents⁴⁶) that, within a period of months in 1933, most German physicians enthusiastically embraced Nazi views on eugenics and euthanasia, cooperating in the repression of the Jewish population and benefiting from this community's persecution and loss of academic and professional power.

Above all, the events reviewed in this article should make us aware that physicians must always adhere to the strictest ethical principles and defend them against political pressures. The ethical principles governing medical research in force in 1931 Germany were no less strict than those of the Declaration of Helsinki; however, this did not prevent their shameless violation under the shelter of Nazi totalitarianism.

Conflicts of interest

The author has no conflicts of interest to declare.

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