

# Euthanasia – the right to die?

## Part II: Weimar Germany, the United States and Britain 1914–1929

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**Abstract:** The article traces the development of eugenics in Germany, the USA and Britain, and the reasons for the steadily growing interest in the necessity for the introduction of euthanasia which was prohibited by law. The fears of Fritz Lenz in Germany about the degeneration of the lower classes were shared by his American colleagues. Compulsory sterilization was advocated as one solution and proved to be the precursor of involuntary euthanasia. The ideas and radical proposals of Karl Binding and Alfred Hoche for the destruction of 'life unworthy of life' are mentioned, together with the demands of Gerhard Hoffmann (alias Ernst Mann), Karl Klee, Robert Gaupp and others for State-sanctioned euthanasia. Also mentioned are the opponents to the founding ideas and proposals of Binding and Hoche, especially by theologians. In Germany, the USA and Britain, however, the advocates for sterilization remained in the majority, and the basic ideas about eugenics in those countries did not differ radically, although Lenz deplored the fact that Germany lagged far behind the USA in matters of sterilization. It is shown that the ideas and legislation in the USA actually preceded the radical eugenic programmes of the Nazis. This is amply demonstrated by the principal criterion in both countries for euthanasia being economic rather than medical. The dramatically declining conditions in psychiatric institutions are outlined. In conclusion, the disastrous effects of the Depression in 1929 which meant the end of planned reform in mental health programmes in Germany and the resulting increase in admissions to psychiatric institutions are presented.

**Key words:** eugenics, mentally ill, psychiatrist, psychiatric institution, sterilization, race hygiene

During World War I, over 140,000 people died in German psychiatric institutions due to a poor diet that was indigestible, and usually lacked meat, fats or cereals; overcrowding and patients who fouled themselves and left lying on sawdust resulted in the spread of infectious diseases, especially tuberculosis, which added to the number of deaths [1]. The institution psychiatrists could only watch and record the weight loss of their patients, the progress of the epidemics, and rising mortality rate, impotent because of the government imposed wartime rationing [2]. Cases of systematic abuse against the institutionalised psychiatric patients also increased, especially against shell-shocked soldiers, as a result of psychiatrists asserting their relevance and the absurd argument that young soldiers had fallen in battle while these and other patients 'malingered' in the institutions [3]. This led to the psychiatrists being labelled 'venal whores' who willingly incarcerated anyone whom the State regarded as a 'public nuisance' [4].

Already in 1917, Fritz Lenz, a German physician-geneticist and racial hygienist, declared in his thesis *Zur Erneuerung der Ethik* (For a Renewal of the Ethic) that 'race was the criterion of value ...the State is not there to see that the individual obtains his right, but to serve the race', a statement which had the characteristic tone of romantic excess of the German version of eugenics. Lenz advocated 'organic socialism' and feared

that, without a radical programme of eugenics, the Nordic race was 'doomed to extinction' [5]. However, until the defeat of Germany in 1918, the German eugenicists tended to focus primarily on positive eugenics [6] and shared the anxieties of their colleagues in the USA about the degeneration of the lower classes, and opposed social legislation enacted to assist the poor, arguing that this 'social safety net' prevented natural selection [7]. The attitude of German psychiatrists to the mentally ill and physically disabled 'degenerates' among the lower classes can only be described as 'extreme'.

The concern of the Germans about the 'Slavic threat' which they feared could result in the 'Slavization of Germany' was reflected in the concern of Americans about the 'yellow peril' [8]. Compulsory sterilization was one solution, but it was believed that such a measure would not have sufficient support; instead, positive measures such as concentrating on the birth rate of 'superior' populations were advocated [9].

In 1918, the Weimar government was presented with a list of demands from the League for the Reform of the Mental Health Laws which included a consolidated Mental Health Law, a tightening of the reasons for committing a person to a psychiatric institution, stringent penalties for wrongful commitment or maltreatment, the abolition of forensic refereeing, the closure of private institutions, and the introduction of an effective institutional inspectorate.

Between the immediate prewar and postwar period (1913-1919) the number of patients treated in German psychiatric institutions fell drastically, from 239,538 to 172,870, a reduction of 17,287 [10]. Entire institution buildings stood empty or were occupied by more nursing staff than patients, a situation compounded by the introduction of the statutory

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eight-hour working day which led to an increase in staff [11]. Conditions in the institutions were appalling, caused in part by financial cuts in favour of areas of medicine where a cure could be anticipated and the patients returned to the labour force.

The great breakthrough in the ideology of selection and elimination through euthanasia occurred in 1920 with the publication of *Die Freigabe der Vernichtung lebensunwerten Lebens: Ihr Mass und Ihre Form* (Permission for the Destruction of Life Unworthy of Life: Its Extent and Form), a crucial work co-authored by two distinguished, right-wing, nationalistic German professors in Freiburg, the lawyer Karl Binding, a retired professor from the University of Leipzig, and Alfred Hoche, Professor of Psychiatry and Neuropathology at the University of Freiburg. Binding, the senior partner, was one of Germany's leading specialists on constitutional and criminal law, while Hoche was a much more mediocre figure. Their belief in the rejection of individual rights while championing the rights of the national community, already advocated by Fritz Lenz in 1917, were amply apparent in their writing [12].

Binding's legal arguments concerned the question: 'Is there a human life which has so far forfeited the character of something entitled to enjoy the protection of the law, that its prolongation represents a potential loss of value, both for its bearer and for society as a whole?'

Hoche's contribution dealt with the medical arguments, although they both agreed on the salient points in favour of a practical, radical and unemotional approach to State-sanctioned euthanasia.

Their carefully, albeit complicated, ideas and proposals made a plea for the killing of the mentally ill whom they regarded as 'life unworthy of life' and 'ballast existences' – large segments of the mentally ill and imbeciles – as well as and retarded and physically malformed children. They stressed the therapeutic aim of the concept of destroying such 'life unworthy of life' as a 'purely healing treatment', and the physician who administered euthanasia as performing a 'healing work'. In connection with this, they urged that the physician administering euthanasia must be guaranteed protection from any legal action being brought against him; euthanasia in Germany, the USA and Britain was a criminal act that could be legally interpreted as murder.

Binding's definition of 'life unworthy of life', however, was imprecise, although he did specify that those whom he considered 'inferior' should be destroyed, even if they could live pain-free lives for many years. This was dovetailed with the utilitarian concept of the great emotional and financial burden the 'inferiors' placed on the relatives, society and the State. Therefore, he asserted that whether a life was worth living was determined not only by its worth to the individual, but also by its worth to society.

Hoche, in a key passage, maintained that the State should be considered in 'organic' terms, so that any individual part of the 'national body' that had become either useless or harmful should be destroyed as a 'sacrifice to the nation as a whole', thereby saving large sums of public money being spent on the mentally deficient who were otherwise healthy and required a lifetime of institutionalization.

Hoche was a biological visionary when he stated that 'A new age will come which, from the standpoint of a higher mortality, will no longer heed the demands of an inflated concept of humanity and an over-estimation of the value of life as such' [13]. The 'new age' dawned with advent of Nazism in 1933.

The credo of Binding and Hoche was the doctrine of the absence of empathy and contributed to the development of violent somatic treatment procedures, regardless of their efficiency, such as insulin and metrazol shock therapy, electroshock therapy, and lobotomy [14]. These and many other concepts in the detailed and complicated work were to become the crux of the Nazi idea for State-sanctioned involuntary euthanasia.

The Binding-Hoche polemic was very influential and widely discussed in German medical circles, although their thesis was not a view held by the majority in psychiatric circles [15]. Officially, it was never accepted during the Weimar Republic [16] and some theologians took the view that Binding and Hoche were symptoms of a general moral collapse into pure egotism – 'It was up to God and not mankind to stop the clock of lives which God alone had started' [17].

In the USA and Britain, however, where the discussion of euthanasia centred on mercy killing for the terminally ill and not the killing of 'unworthy life', the work of Binding and Hoche made little impression [18].

The work of Binding and Hoche was followed by other publications in Germany favouring euthanasia for those deemed 'unworthy of life'. Although eugenic euthanasia was not originally advocated by the German race hygienists, they did accept euthanasia as 'the logical outgrowth of the cost-benefit analysis at the heart of race hygiene' [19].

Also in 1920, independently of Binding and Hoche, another publication appeared, *Die Moral der Kraft* (The Moral of Might), by a 'selection fanatic' who wrote under the pseudonym 'Ernst Mann' (real name Gerhard Hoffmann), and directed his hatred against all those 'that the world detested'. He advocated that everyone should report annually for a health inspection to determine their state of health, and those found to be unfit should be handed over to the Health Police (*Gesundheitspolizei*). It was Mann's opinion that:

Through the sick and the weak, mankind will only develop disadvantages ... mad houses (*Irrenhäuser*), cripples, and hospitals for the incurable (*Siechenhäuser*) are a mockery to all human compassion and intelligence [20].

During the year of the publication of the work of Binding and Hoche, a shift was perceived in the moral climate. It almost seem as if the Germans had witnessed a change in the concept of humanity, that they had been forced by the terrible exigencies of war to ascribe a different value to the life of an individual than was the case before the war, and that in the years of starvation during the war, the staff in the psychiatric institutions had to get used to watching their patients die of malnutrition and disease in vast numbers. They did so, almost approvingly, in the knowledge that perhaps the healthy could be kept alive through these sacrifices. A delegate at the conference of the German Psychiatric Conference, however, warned:

... in emphasizing the right of the healthy to stay alive, which is an inevitable result of periods of necessity, there is also the danger of going too far: a danger that the self-sacrificing subordination of the strong to the needs of the helpless and ill, which lies at the heart of any true concern for the sick, will give ground to the demand for all the healthy to live [21].

Towards the end of the year 1920, Prof. Karl Klee of the Supreme Court in Berlin maintained in a lecture to the Forensic-Medical Association that one could no longer sceptically oppose the killing of those who are ‘destructive for the community’ and ‘worthless’. He made a distinction between those who were ‘passively destructive’, i.e. the mentally ill, and the actively destructive’ – criminals. The destruction of these people would therefore be a socio-hygienic measure [22].

Throughout the 1920s, the main theme for the race hygienists in Germany, the USA and Britain, however, was sterilization, although there were many who regarded it as only as a ‘shelving of the future destruction of life unworthy of life’. It was only a minimal demand compared to euthanasia [23]. Lenz and others in Germany regarded the introduction of compulsory sterilization as a sacred mission. It was a mission that later led them to embrace Nazism and its racial ideology [24]. Throughout that decade, the pretences of the race hygienists for spurious ‘natural selection’ and the destruction of the ‘inferior’ spread throughout the German universities in association with the internal crises, and had support from all political parties. Eugenic thinking influenced policy towards public health on the left as well as the right [25].

In the early 1920s, Heinrich Boeters, the medical officer in Zwickau, Saxony, known as the ‘Saxon apostle of sterilization’, an obsessive and probably mentally unbalanced man, forced the issue on the agenda by publicising sterilization operations which he had investigated and had been carried out by the surgeon Heinrich Braun. Boeters drew up a series of proposals, known as the *Lex Zwickau*, which sanctioned the compulsory sterilization of idiots, the feeble-minded, the blind, deaf mutes, and ‘illegitimate mothers of low eugenic value’ [26]. Although this resulted in the authorities in various German States giving consideration to the question of sterilization, Boeter’s proposals were not taken up because of uncertainties in the scientific basis of his proposals, and because of the opposition from legal experts and health officials, among others.

By 1920 in the USA, the rising interest in eugenics led to the enactment of laws in 25 States providing for the compulsory sterilization of the criminally insane and others considered ‘genetically inferior’ [27]. As alternatives, ‘colonization’ or ‘permanent custodial care’ were suggested – terms used to disguise incarceration in closed institutions. But these would not solve permanently the problem of the ‘unfit’; this could only be achieved by sterilization, the favourite solution proposed by the eugenicists who regarded individuals with mental disabilities as a burden on society and a threat to civilization [28].

While eugenics in the USA and Britain sometimes approached this German romantic excess, the political and legal systems in those two countries permitted open criticism and redress through the law. In Britain, there was continual legal resistance to compulsory sterilization, and in the USA legal questions could be raised concerning individual rights and limited knowledge about heredity; this eventually led to the rescinding or repealing of sterilization laws in some of the States where they had been promulgated [29].

Although the German eugenic movement, led during the time of the Weimar Republic by Alfred Ploetz and Wilhelm Schallmayer, the founders of the movement, did not differ radically from the eugenics movement in the USA, it was more centralized. Unlike the USA, where federalism and political heterogeneity encouraged diversity, even within a

single movement, in Germany one society alone, the *Deutsche Gesellschaft für Rassenhygiene* (German Society for Race Hygiene) came to represent all eugenicists.

Two years after the publication of Binding and Hoche’s polemic, Gerhard Hoffmann (alias ‘Ernst Mann’) attempted to give equal consideration to voluntary euthanasia and the ‘destruction of life unworthy of life’. He sent the following demands to the Reichstag:

- extermination of the mentally ill;
- mercy killing for the terminally ill;
- the killing of crippled and incurably ill children;
- mercy killing for the exhausted [30].

In Mann’s view, illness was a ‘disgrace to be managed by health control’, and that ‘misery can only be removed from the world by the painless extermination of the miserable’. ‘Euthanasia’ was therefore simultaneously an act of ‘mercy’, a means of eugenic prophylaxis, and a chance to unburden the economy. The process of administering euthanasia was to be handled by physicians who would be ‘the saviours of mankind’ [31]. At the time it was written, this was regarded as an aberrant and extreme view, but a little over 20 years later it became the official policy of the new Nazi government

In 1921, the Munich publisher Julius Friedrich Lehmann issued a two-volume work that became the classic text for eugenicists: *Grundriss der menschlichen Erblehre-und Rassenhygiene* (Outline of Human Genetics and Race Hygiene) by Erwin Bauer, Eugen Fischer and Fritz Lenz. It was a work that deeply influenced the development and application of eugenics and was especially influential later as a source for the notorious Nuremberg Laws – the Nazi Racial Laws of 1935 [32].

Parallel to these discussions and proposals, conditions in the psychiatric institutions deteriorated; the serious lack of sustaining food for the patients, and cut-backs in the expenditure on drugs and medical instruments resulted in a threatening mood of frustration and anger throughout the institutions. Essential building and renovation work was postponed indefinitely; equipment had to be constantly repaired instead of replaced – all in the interests of economy [33].

During 1923, euthanasia was widely discussed by psychiatrists in Germany, but at a Medical Convention in Karlsruhe the majority rejected the sanctioning of both voluntary euthanasia and the ‘destruction of life unworthy of life’ [34]. However, in the summer of that year at the Conference of the Society for Forensic Psychiatry held in Dresden, a motion was presented: ‘Should doctors kill?’ The original Binding-Hoche argument about the expenditure on ‘idiots’ was raised and that such sums could be better used to prevent tuberculosis in childhood. It was stated that ‘pity was misplaced where there was no subjective sense of suffering’ [35].

In opposition to this motion, the ‘slippery slope’ argument was raised, while stressing the danger of public morality should the killing of the mentally ill be permitted. Other speakers at the conference, the majority of whom rejected the motion, drew attention to the terms of the Hippocratic Oath, and to the moral corruption and brutalisation of the nursing staff in the psychiatric institutions should such a radical measure be sanctioned [36].

In the USA in 1923 there was also plenty of racial eugenic interest as well as the impulse to sterilize large numbers of criminals and mental patients because of the fear of ‘racial

generation' and the threat to the health of the 'civilized races' which were believed to be 'plunging downward'. The extent of this negative biomedical vision was indicated in a book published that year:

The first warning which biology gives to statesmanship is that the advanced races of mankind are going backward; ... that civilization as you have so far administered it, is self-destructive; that civilization always destroys the man who builds it; that your vast efforts to improve man's lot, instead of improving man, are hastening the hour of his destruction [37].

A study of the sterilization movement in the USA tackled the problem of 'alarmist eugenics' and 'over-zealous eugenicists' who regarded the socially inadequate, i.e. the feeble-minded, epileptics, mentally diseased, the blind, the deformed, as well as criminals, as:

... inimical to the human race ... because these people perpetuate their deficiencies and thus threaten the quality of the ensuing generations. It should be our aim to exterminate these undesirables, ... since a nation must defend itself against national degeneration as much as against the external foreign enemy [38].

With the acceptance that there was a connection between low intelligence and degenerate behaviour, it is not surprising that a scientist employed at the Eugenic Research Office at Cold Harbor Spring in New York commented 'How can there be such a thing as social equality with such a wide range of mental capacity' [39].

In Germany at this time, Fritz Lenz berated his fellow-countrymen for being backward in matters of sterilization compared with the USA. He complained that the provisions of the Weimar Constitution prohibited 'the infliction of bodily alterations on human beings', which prevented the general practice of sterilization by vasectomy for males. He also bemoaned the fact that Germany had nothing to match the eugenics research establishments in the USA and Britain, in particular, the Eugenic Research Office at Cold Spring Harbor, headed by Charles D. Davenport. He pointed out that Germany also had no equivalent to the laws of the USA prohibiting marriage between people suffering from epilepsy or mental retardation, and between people of different races.

On the other hand, Lenz criticized the USA for focusing its eugenic research too generally on preserving the 'white race' instead of specifically on the 'Nordic race'. This criticism did not prevent him believing that 'the next round in the 1,000-year fight for the life of the Nordic race will be fought in America' [40].

In 1923, Lenz was appointed to the first German Chair in Race Hygiene at the University of Munich. He was later appointed by the Nazis to the Chair of Eugenics at the University of Berlin, and head of the Department for Race Hygiene and Hereditary Research at the Kaiser Wilhelm Institute for Anthropology. After the war, Lenz was Prof. for Human Genetics at the University of Göttingen (1946-1955) [41].

In 1925, Ewald Meltzer, director of the Katherinenhof State Mental Institution in Grosshensersdorf, Saxony, attempted to refute the utilitarianism of the Binding and Hoche polemic and

the totalitarian potentialities of Ernst Mann. He categorically disputed the claim that the mentally deficient had lost the last vestiges of all human personality; he stressed instead their capacity and will to enjoy life. Meltzer also refuted the criticism that the work he and others undertook in caring for the mentally afflicted was pointless and a waste of time and money [42]. For Meltzer, altruism was humanity's distinguishing feature and therefore the problem's discussed by Binding and Hoche 'could not be discussed in a few lines' [43].

Meltzer naively assumed that any future legislation on euthanasia for afflicted children would automatically hinge on parental consent, and in an attempt to prove his point against Binding and Hoche he sent out 200 questionnaires to the parents of the 'idiot children' in his care. He enquired hypothetically about their attitude to a painless death 'to shorten the life' of their offspring, and reassured them that their children were in good health. He failed: of the 200 respondents, only 19 were unequivocally opposed to euthanasia. The majority indicated a desire to be relieved of their burden of handicapped children; many wished this to be achieved without their knowledge, while others preferred to be deliberately deceived by being informed that their children had died of a specific illness not connected with the mental affliction. The powerful emotional bonds with the children were obviously not incompatible with a 'positive' attitude towards killing them. The parents who did not agree with a 'painless death' for their children did so primarily either because of the strong emotional bonds that existed, or from ethical or religious conviction [44].

Meltzer blamed the unexpected – and for him personally – disappointing response to his survey on the social crisis of the time, although other psychiatrists, eugenicists and politicians had long since recognized the connection between the economic crisis and the cost-cutting saving in the living conditions of the mentally ill [45]. Eugenicists in particular saw the causes of the social problems of the time, e.g. alcoholism and prostitution, as inherited feeble-mindedness, and the manifestations of poverty such as intermittent unemployment and chronic illness, as hereditary degeneracy. It was therefore concluded that 'Not all criminals are feeble-minded, but all feeble-minded persons are at least potential criminals. That every feeble-minded woman is a potential prostitute would hardly be disputed by anyone' [46].

Opinions about the works of Binding, Hoche, and Meltzer were not as straightforward as might be expected, especially among theologians. In reply to Meltzer, Prof. Karl Weidel of Magdeburg wrote that:

... the nursing of feeble-minded children is equally as pointless as the work of the Egyptian monks who, as a mark of self-negation and the futility of all terrestrial endeavour, stuck dry sticks in the earth and watered them daily [47].

At Heidelberg University, the Professor of Theology, Ludwig Lemme, thought that although Christ did not allow the killing of individuals, the State authorities did have the right – as in the case of the death sentence – to extinguish 'inferior life' who were only a burden [48]. And Doctor of Theology Martin Ulbricht in Magdeburg, who had under his supervision several thousand 'abnormals of all kinds' remarked that he felt like a circus ring master and presented his 'show of abnormals'

in a 1925 brochure in which his argument was clear: ‘When one strengthens morality and piety, then another piece of abnormal wretchedness disappears [49].

The case for sterilization was comprehensively stated by Prof. Robert Gaupp of the University of Tübingen. At the 1925 Conference of the German Psychiatric Association held in Kassel, he extolled the modern, pioneering spirit which had inspired Boeters, the ‘sterilization apostle of Saxony’, and had already been achieved in the USA and Switzerland where sterilization legislation already existed [50]. Utilizing evidence collected haphazardly from the USA and Britain, Gaupp claimed that there were differential – and therefore delirious – fertility rates between the upper and lower classes whereby ‘the less valuable are reproducing more rapidly than the more valuable’ [51]. He claimed that this was particularly the case with patients with less severe mental disorders who were not institutionalised, and it was time to ‘remove the burden of the (institutionalised) parasites’ whose vast cost to the nation he convincingly demonstrated.

Gaupp concluded his lecture with a quote from Herbert Spencer, the English philosopher and sociologist: ‘A people consisting of hereditarily valuable individuals is the first condition for the well-being of the nation’ [52].

In the USA in 1927, a statute of the State of Virginia which authorized the directors of State psychiatric institutions to order the compulsory sterilization of patients diagnosed as suffering from ‘an hereditary form of insanity or imbecility’, was contested before the Supreme Court in Washington. The case concerned an order for the compulsory sterilization of a woman diagnosed as ‘feeble-minded’, whose mother was also so classified, and whose child had been labelled ‘retarded’. Her defence attorney warned the court that if the State was empowered to impose sterilization, a procedure that violated his client’s ‘constitutional right of bodily integrity’, the results would be ominous: ‘A reign of doctors will be inaugurated and in the name of science new classes will be added, even races may be brought within the scope of such regulation, and the worst form of tyranny practiced [53].

The court majority, however, rejected the argument and ruled in favour of upholding the statute and the sterilization order. The arguments against the plaintiff predated those used later to justify the eugenic killings in Nazi Germany [54].

In Germany between 1924-1929, the number of psychiatric patients rose dramatically from 185,397 to over 300,000 – an increase of 115,000 in five years; but there was no corresponding increase in bed capacity because while 40 previously closed State institutions were reopened, 18 private institutions were closed. At the same time, the average length of stay of a patient in an institution was reduced from 215 days in 1924 to 103 in 1929 in order to increase the speed in which people were released back into the community. The sheer pressure of such numbers resulted in a steady build-up of long-term patients, especially schizophrenics [55].

The year 1927 in particular was a year of privation in the psychiatric institutions, caused by rapidly rising welfare costs, and it was realized that the situation could not continue. An end of year report from one institution stated, ‘In our people, the number of feeble-minded has actually increased considerably since the war and we have the disturbing impression that the increase has not yet come to a standstill’ [56].

From the end of the decade, there was an ever-growing demand – from authorities and from the public – for sterilization legislation to be enacted [57].

In his closing speech at the end of the three-day Nazi Party Rally in Nuremberg in September 1929, Adolf Hitler presented hypothetical statistics to the crowd of 150,000 followers. He stated that if 1,000,000 children were born every year in Germany, and at the same time 700,000-800,000 of the weakest were ‘got rid of’ (*beseitigt*) then the final result would be an increase in the strength of the nation [58].

A few weeks later, the Depression that began in the USA with the Wall Street crash resulted in Germany in the rapidly increasing welfare state of the ailing Weimar Republic far outstripping national resources. The burden of exaggerated welfare for institutionalised mental patients was borne by the hard-pressed tax-payers of a nation whose resources had been severely depleted since 1919 by the Treaty of Versailles [59]. The conservative elements criticised the ways in which indiscriminate distribution of welfare had sapped the sense of responsibility, and resulted in a renewed emphasis on collective national interests and prophylactic solutions as the cheaper solution [60].

After the collapse of the Weimar government, a succession of governments enforced drastic cuts in expenditure and ‘eugenically targetted’ selective benefits. Once again, such negative eugenic measures as sterilization were brought to the fore. Expected reforms were severely restricted before being not simply superceded by eugenics, but by a gradual fusion of a reformist dynamic which had inherent features that were both economic and selectionist, with the hitherto relatively marginal movement in favour of radical eugenic measure [61].

In the end, the economic catastrophe of the Depression resulted in the psychiatric institutions having to admit even more patients than before who needed full-time care and attention because their relatives were also in dire financial straits and no longer able to look after them. Conversely, medical and nursing posts were either frozen or a percentage of the staff made redundant [62].

This was the end of the reformers’ dream of a rapid turnover of patient admissions and discharge, and the reversion of the psychiatric institutions as ‘custodial institutions for the incurable’ [63].

During the period 1919-1929, euthanasia was certainly carried out secretly in Germany, the USA and Britain in the most extreme cases whereby doctors, nurses and medical attendants colluded to administer a mercy death to the most severely mentally afflicted and hideously deformed newborns. But officially such practices were restrained by legislation as well as adverse public opinion [64].

It was not until the summer of 1939 in Germany that official authorization was given to administer a mercy death to a five-month old infant, Gerhardt Kretschmer, born near Leipzig, an imbecile who lacked parts of limbs. A member of the family had appealed to Hitler to permit euthanasia and permission was granted by Hitler personally, via his escorting physician, Dr Karl Brandt. The infant was administered a mercy death by an overdose of narcotics in the children’s ward of the Leipzig University Clinic on 25 July 1939 [65]. This was the beginning of the Nazi ‘euthanasia’ operation that was cost the lives of about 200,000 people deemed by the Nazis to be ‘unworthy of life’.

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## REFERENCES

1. Siemen HL: *Menschen bleiben auf der Strecke: Psychiatrie zwischen Reform und Nationalsozialismus*. J. van Haddis Verlag, Gütersloh 1987, 29-30.
2. Bratz E: 'Kann die Versorgung der Geisteskranken billiger gestaltet werden und wie?' **In: Allgemeine Zeitschrift für Psychiatrie**, **98**, (1932), 7.
3. Gross A: 'Zeitgemäße Betrachtungen zum wirtschaftlichen Vertrieb der Irrenanstalten'. **In: Ibid.**, **79**, (1922), 62.
4. Riedesser P, Verdeber A: *Aufrüstung der Seelen. Militärpsychiatrie und Militärpsychologie in Deutschland und Amerika*. Dreisam Verlag, Freiburg 1985, 11ff.
5. Schmuhl HW: *Rassenhygiene und Nationalsozialismus, Euthanasie: Von der Verhütung zur Vernichtung 'lebensunwertes Lebens' 1890-1945*. Fischer Taschenbuch Verlag, Frankfurt/Main 1987, 34.
6. Burleigh M: *Death and Deliverance: 'Euthanasia' in Germany 1900-1945*. Cambridge University Press, Cambridge 1994, 26.
7. Krausnick H: 'Judenverfolgung'. **In: Broszat M, Jacobsen HA, Krausnick H (Eds.): Anatomie der SS-Staat** (2 vols.). Deutsche Taschenbuch Verlag, Munich 1967, **2**, 249f.
8. Weiss SF: 'The Race Hygiene Movement in Germany'. **In: Osiris** (2<sup>nd</sup> series), **3**, (1987), 212.
9. *Ibid.*, 201.
10. Bergmann A, Czarnowski G, Ehmman A: 'Menschen als Objekte humangenetischer Forschung: Zur Geschichte des Kaiser-Wilhelm-Institut für Anthropologie, menschliche Erblehre und Eugenik in Berlin-Dahlem 1927-1945'. **In: Pross C, Aly G (Eds.): Der Wert des Menschen: Medizin in Deutschland 1918-1945. Edition Hentrich, Berlin 1989, 122.**
11. Weiss, *op cit.*, 212.
12. *Ibid.* 210-211.
13. Bergmann et al., *op cit.*, 123.
14. Siemen, *op cit.*, 133.
15. Gross A: 'Zeitgemäße Betrachtungen zum wirtschaftlichen Betrieb der Irrenanstalten'. **In: Allgemeine Zeitschrift für Psychiatrie**, **79** (1922), 62.
16. Weidling P: *Health, Race, and German Politics between National Unification and Nazism 1870-1945*. Cambridge University Press, Cambridge 1989, 393-398.
17. Binding K, Hoche A: *Die Freigabe der Vernichtung lebensunwertes Leben: Ihr Mass und Ihre Form*. Felix Meiner Verlag, Leipzig 1920, 61-62.
18. Lifton RJ: *The Nazi Doctors: A study of the psychology of evil*. Macmillan, London 1986, 113 (footnote).
19. Dörner K: 'Nationalsozialismus und Lebensvernichtung'. **In: Vierteljahreshefte für Zeitgeschichte**, **15** (1967), 129.
20. Hafner KH, Winau R: 'Die Freigabe der Vernichtung lebensunwertes Lebens: Eine Untersuchung zu der Schrift von Karl Binding und Alfred Holche'. **In: Medizinhistorisches Journal**, **9** (1974), 233.
21. Nowak K: 'Euthanasie' und Sterilisierung im 'Dritten Reich' (2<sup>nd</sup> ed.). Hermann Böhlau Nachfolger, Weimar 1980, 58-59.
22. Hafner KH, Winau R, *op cit.*, 252.
23. Weiss, *op cit.*, 234.
24. Fischer J: 'Von der Utopie bis zur Vernichtung "Lebensunwertes Leben"'. **In: Evangelische Dokumente zur Ermordung der unheilbar Kranken unter nationalsozialistischer Herrschaft in den Jahren 1933-1945. Stuttgart 1964, 39.**
25. Bonhoeffer K: Opening address to the German Psychiatric Association, *Allgemeine Zeitschrift für Psychiatrie*, **76** (1920-21), 600.
26. Nowak, *op cit.*, 53.
27. Klee E: 'Euthanasie' im NS-Staat: Die 'Vernichtung lebensunwertes Leben'. Fischer Taschenbuch Verlag, Frankfurt/Main 1985, 39.
28. Lifton, *op cit.*, 24.
29. Friedlander H: *The Origins of Nazi Genocide: From Euthanasia to the Final Solution*. University of North Carolina Press, Chapel Hill and London 1995, 10.
30. Weidling, *op cit.*, 389-392.
31. *Ibid.* 22.
32. Friedlander, *op cit.*, 7.
33. *Ibid.*
34. Mann E: *Die Erlösung der Menschheit vom Eland*. Weimar 1922, 50ff.
35. *Ibid.*, 39.
36. Müller-Hill B: 'Selection: Die Wissenschaft von der biologischen Auslese des Menschen durch Menschen'. **In: Medizin und Gesundheitspolitik in der NS-Zeit**. Vierteljahreshefte für Zeitgeschichte, Munich 1991, 142.
37. Gross, *op cit.*, 60-74.
38. Burleigh, *op cit.*, 24.
39. *Allgemeine Zeitschrift für Psychiatrie*, **79** (1923), 438.
40. *Ibid.* 441.
41. Wiggam AE: *New Dialogue of Science*. Garden City Publishing, New York 1922, 25-26.
42. Landmann JP: *Human Sterilization: The History of the Sexual Sterilization Movement*. New York 1923, 4-5.
43. Gould SJ: *The Mismeasure of Man*. W. W. Norton, New York 1981, 161.
44. Lenz F: 'Menschliche Auslese und Rassenhygiene.' **In: Bauer E, Fischer E, Lenz E: Grundriss der menschlichen Erblichkeitslehre und Rassenhygiene**. Julius Friedrich Lehmann Verlag, Munich 1923, 147. The 3<sup>rd</sup> (expanded) edition of this work is of particular interest to readers in the USA: *Human Heredity*, New York 1931. On Davenport and the Eugenics Research Office at Cold Spring Harbor, see: Kevles DJ: *In the Name of Eugenics: Genetics and the Uses of Human Heredity*, New York 1985, 44-56.
45. Friedlander, *op cit.*, 12.
46. Meltzer E: *Das Problem der Abkürzung 'lebensunwerten Lebens'*. Verlag der Meltzerstiftung, Halle 1925, 55, 63.
47. *Ibid.* 110.
48. Burleigh, *op cit.*, 23.
49. Winter B (Ed.): *Verlegt nach Hadamar: Die Geschichte einer NS-'Euthanasie'-Anstalt*. Historische Schriftenreihe des Landeswohlfahrtsverbandes Hessen (vil. 2), Kassel 1994, 35.
50. Gould, *op cit.*, 181.
51. Klee, *op cit.*, 26.
52. *Ibid.*
53. Ullbricht M: *Dürfen wir minderwertiges Leben vernichtet? Ein Wort an die Anhänger und Verteidiger der Euthanasie* (2<sup>nd</sup> ed.). Wichern Verlag, Berlin-Dahlem 1925, 13.
54. Gaupp R: 'Die Unfruchtbarmachung geistig- und sittlich Minderwertiger'. **In: Allgemeine Zeitschrift für Psychiatrie**, **83** (1926), 376.
55. *Ibid.* 379.
56. *Ibid.* 390.
57. Buck vs. Bell, Case 274 US 200 (1927), 202.
58. *Ibid.*, 207.
59. Siemen, *op cit.*, 63.
60. Archive of the Hephata State Psychiatric Institution in Treysa, Hesse, dated 5 December 1927.
61. Schilter T: *Unmenschliches Ermessen: Die nationalsozialistische 'Euthanasie'-Totungsanstalt Pirna-Sonnenstein 1940-41*. Gustav Kiepenheuer Verlag, Leipzig 1998, 21.
62. *Völkischer Beobachter*, 7 August 1929.
63. Burleigh, *op cit.*, 33, 38.
64. Sachse C, Tennstedt F: *Geschichte der Armenfürsorge in Deutschland* (3 vols.). Kohlhammer Verlag, Stuttgart 1988, **3**, 43-49.
65. Burleigh, *op cit.*, 34.
66. Thom A: 'Die Entwicklung der Psychiatrie und die Schicksal Psychisch Kranker sowie geistig Behinderter unter der Bedeutung der faschistischen Diktatur'. **In: Tom A, Caregorodocov GI (Eds.): Medizin unterem Hackenkreuz**. VEB Verlag Volk und Gesundheit, Berlin (East) 1989, 130.
67. Burleigh, *op cit.*, 34.
68. Lifton, *op cit.*, 46f.
69. I. Zoech, 'The sickly child who launched Hitler on a path of killing'. **In: Daily Telegraph**, London, 18 October 2003. See also: Kohl W: 'Ich fühle mich nicht schuldig': *Georg Renno – Euthanasiearzt*. Paul Zsolnay Verlag, Vienna 2000, 59. Renno erroneously gives the name of the infant as 'Kressler'.