

Medical Crimes in Auschwitz:

Prisoner Doctors, Ethics, and the Navigation of an Impossible Reality

## Abstract

Prisoner doctors in the concentration camps of Auschwitz-Birkenau lived in a unique reality. Although they were prisoners of the camp, they were granted a certain level of privilege and responsibility by SS doctors and performed numerous medical procedures under their order. The ambiguity of this prisoner/doctor power dynamic is further amplified by the fact that the SS ordered them to perform medical procedures necessary for their experiments of mass sterilization on camp prisoners. It is in this obscurely defined space, between prisoner and medical practitioner, that prisoner doctors faced numerous ethical dilemmas. The legacy of the Auschwitz experimental crimes has implications for medical experts and informs post-war discussion on ethics. I will therefore investigate the prisoner doctors' challenging relationship with ethics and morality, and how both concepts were altered within Auschwitz. I will discuss this nexus of questions by analyzing an important court case set in the Royal Court of Justice in London, outlined by Hill and William's *Auschwitz in England*. This case created a rare opportunity to compare the altered meanings of ethics, morality, and choice within the concentration camps, with the legal framework of justice. In my analysis I will also introduce the concept of an 'impossible reality', as the case reveals an important struggle prisoner doctors faced when choosing between ethical integrity or personal survival, and the detrimental consequences of either choice. This paper examines the purpose of the Hippocratic oath within this context, as well as the possible limitations of our current definition of ethical integrity.

## Medical Crimes in Auschwitz:

### Prisoner Doctors, Ethics, and the Navigation of an Impossible Reality

The role of prisoner doctors within the concentration camps, which included redefined responsibilities and a persistent struggle for survival, is difficult to conceptualize through an outsider's perspective. As highlighted by Claude Romney, the discussion of physicians and ethics within Auschwitz commonly refers to the violation of ethical standards by SS doctors.<sup>1</sup> In this circumstance, a power dynamic between doctor and prisoner is clearly determined, and the judgement of their actions is justifiable, as it occurred during the Nuremberg medical trials.<sup>2</sup> However, when examining the role of prisoner doctors within Auschwitz, the parameters of judgement are more obscure, and the dynamics of power more complex. Prisoner doctors in the concentration camps of Auschwitz-Birkenau lived in a unique reality. Therefore, to gain a deeper understanding of their experiences within the camps, it is vital to first gain one's bearings on their role and the environment in which they interacted with. The topic also necessitates a conscious acknowledgement of the terminology utilized, since the focus is on the *medical crimes* committed in Auschwitz by the camp's perpetrators. This emphasizes the criminality of the medical procedures conducted in the camps. It is preferred over the term of popular discourse, *medical experiments*, since "The so-called 'experiments' carried out at Auschwitz had absolutely no value at any time for humanity in general."<sup>3</sup> The use of the word implies that a certain level of humane ethical conduct was practiced, and that its execution was justified. It would therefore be misleading to identify these cases as medical experiments, due to their level of depravity and cruelty.

Regarding the nature of the camp, Agamben describes it as "...the place in which the most absolute *conditio inhumana* ever to appear on Earth was realized."<sup>4</sup> Every prisoner was

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<sup>1</sup> Romney, Claude. "Ethical problems encountered by Auschwitz prisoner doctors." *Remembering for the Future*. Palgrave Macmillan, London, 2001. 319-334

<sup>2</sup> Ibid., p.319

<sup>3</sup> Shelley, Lore, ed. *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners' accounts*. Mellen Research University Press, 1991.

<sup>4</sup> Agamben, Giorgio. *Means without end: Notes on politics*. Vol. 20. U of Minnesota Press, 2000.

stripped of their political status, rights, and prerogatives when entering the camp, and the oppressor exerted absolute power without mediation.<sup>5</sup> However, the SS also found it useful to employ certain prisoners, including physicians.<sup>6</sup> A situation therefore materialized where prisoners were given a certain level of privilege yet must interact with a reality absent of rights. The consequent discourse on morality and ethical conduct within the concentration camps by prisoner doctors is, evidently, a more complex issue that demands careful consideration. After speaking to experts and researchers specializing in experimental crimes of Auschwitz, and the moral questions that are still being addressed today, the need for further investigation became increasingly apparent.

It is with this apprehension that I investigate the changed relationship with ethics and morality that occurred to survivors, and how the meaning of these concepts changed within Auschwitz. This foundation of introspection and reflection is then applied to explore the prisoner doctor experience. Specifically, the prisoner doctors who, under SS orders, were involved with experimental crimes of mass sterilization, and the amplified ambiguity that existed in this particular space. In this paper, I will attempt to deconstruct several interplaying aspects of the prisoner doctor experience within Blocks 10 and 21, the medical experiments and surgical blocks of Auschwitz. This will be executed through the analyzation of a profound legal case that occurred at the Royal Courts of Justice in London in 1964, brought to the stand by a former prisoner doctor.<sup>7</sup> Dr. Wladyslaw Dering's case created a rare opportunity for those not directly involved with the Holocaust to bear witness to the altered roles of morality, ethics, and choice in the concentration camps. It is here, within this courtroom in London, that the depravity and chaos that took place in Auschwitz juxtaposes with institutionalized morality. The questions put forth by the defending and prosecuting lawyers artistically reveal the limitations of an ethical standard based solely on human dignity. The concept of an impossible reality is also introduced as the case reveals an important struggle faced by prisoner doctors between ethical integrity, morality, and personal survival, where every decision jeopardizes either their patients or themselves. The

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<sup>5</sup> Agamben, *Means without end: Notes on politics*, p. 40,1.

<sup>6</sup> Romney, Claude. "Ethical problems encountered by Auschwitz prisoner doctors." *Remembering for the Future*, p. 319

<sup>7</sup> Hill, Mavis Millicent, and Leon Norman Williams. *Auschwitz in England: a record of a libel action*. Stein and Day, 1965.

case heightened in complexity as each surviving victim of sterilization and each former prisoner doctor took to the stand, relaying their impossible choices and subsequent consequences, to a scrutinizing jury.

Dr. Dering was a Polish GP who had a practice in Finsbury Park, North London.<sup>8</sup> He brought a libel action to the courtroom of England against American writer Leon Uris in April and May of 1964. Leon Uris was the author of *Exodus*, a historical novel that recounts the establishment of the State of Israel.<sup>9</sup> Mr. Uris printed the following sentence in a footnote of *Exodus*:

“‘Here in Block X, Dr. Wirthe’ (*sic*) ‘used women as guinea-pigs and Dr. Schumann sterilized by castration and X-ray and Caluberg’ (*sic*) ‘removed ovaries and Dr. Dehring (*sic*) performed seventeen thousand “experiments” in surgery without anesthetics.’”<sup>10</sup>

Dr. Dering stated that he identifies with “Dr. Dehring”, and that the number of experimental surgeries performed had been grossly exaggerated.<sup>11</sup> The reference had additionally afflicted his character and reputation, bringing him into scandal and compromising his practice as a doctor.<sup>12</sup> It is this single footnote in the novel that triggered in London a profound exploration of ethics and morality within the context of the Holocaust, while additionally revealing the extent of the Nazi mass sterilization plan and its legacy in the victims who survived.

The Nazi plan of mass sterilization was a specialized project in Auschwitz from 1942 to 1944.<sup>13</sup> Through permission from Heinrich Himmler, Dr. Clauberg ran the medical experimentation units in Auschwitz.<sup>14</sup> This authorisation was granted on the basis that a method would be found, through experimentation, “for causing sterilization without the person

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<sup>8</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners’ accounts*, p. 48.

<sup>9</sup> Uris, Leon. *Exodus*. Bantam, 1958.

<sup>10</sup> Hill and Williams, *Auschwitz in England*, p. 18.

<sup>11</sup> *Ibid.*

<sup>12</sup> *Ibid.*

<sup>13</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners’ accounts*, p. 36.

<sup>14</sup> SS Professor Clauberg had Block 10, in the men’s camp, completely rebuilt for his sterilization experiments in early 1943. Half of the four hundred women situated in this block were described as belonging to him.

concerned noticing it.”<sup>15</sup> The experimental trials were done on captive Jewish and Roma prisoners, known in the camps as Clauberg’s “guinea-pigs”.<sup>16</sup> From the perspective of the Nazi ideology, the results of his experiments seemed promising. As Dr. Clauberg mentioned on a progress report to Himmler, “as far as the question is concerned which you put to me a year ago, i.e. what time is required to carry out sterilization of 1,000 women...if the experiments which I have been carrying on continue to come off as well hitherto – and there is no reason to suppose that they will not – the time is not very far off when I will be able to tell you, ‘by a properly trained doctor, in a properly fitted place...most probably several hundred, if not thousand in one day.’”<sup>17</sup> Dr. Clauberg employed the use of chemical irritants to achieve his objective. Dr. Schumann also ran sterilization experiments in 1942, focusing on radiation of ovaries and testicles and subsequent castration.<sup>18</sup>

The long-term vision of the Nazi regime was also presented in court. Specifically, that after the mass extermination of the Jewish people, they would then proceed to sterilize those who are half or a quarter Jewish, to discontinue the lineage of Jewish genes.<sup>19</sup> As stated in court, “Hitler felt that to kill them all would cause difficulties with all their Aryan relations,” so the objective then became sterilization as the “final solution of the Jewish problem”.<sup>20</sup> Prisoner doctors were recruited to Block 10 or 21 by the SS doctors to perform the surgeries related to these medical experiments. The recruitment and involvement of prisoner doctors in this situation is of particular importance, because it creates a complicated picture in the context of a legal trial; where a final judgement must be presented. The goal of the jury is to judge, based on a standardized set of laws, the ethical and moral integrity of prisoner doctors working in Blocks 10 and 21. However, the camp existed in “a temporal suspension of the state of law”, within a judicial and political structure that completely deprived individuals of rights, and where any act committed towards them was not considered a crime.<sup>21</sup> The jury is therefore asked to form a

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<sup>15</sup> Hill and Williams, *Auschwitz in England*, p. 90.

<sup>16</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners’ accounts*, p. 37.

<sup>17</sup> Hill and Williams, *Auschwitz in England*, p. 91.

<sup>18</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners’ accounts*, p. 34.

<sup>19</sup> Hill and Williams, *Auschwitz in England*, p. 91.

<sup>20</sup> *Ibid.*

<sup>21</sup> Agamben, *Means without end: Notes on politics*, p. 40,1.

judicial judgement on a situation that existed outside normal law. Additionally, several interplaying factors had to be considered. First, working in the medical units of Auschwitz included a certain level of privilege, which must be examined. Second, the overall procedure was completely unnecessary, as there was no medically-sound reason to radiate healthy reproductive organs, and the radiation resulted in irrevocable damage. The subsequent surgery to remove the radiated organs, although medically necessary, since leaving the organ would have resulted in more internal damage, was also done against the patient's will in the experimental units. This presented an ethical dilemma, as doctors have sworn "to do no harm" under the Hippocratic Oath. Finally, the jury must also recognize the overall depravity experienced in the camp, and that although privileged, prisoner doctors were still prisoners.

Primo Levi, in *The Drowned and the Saved*, conceptualizes the morally ambiguous space that existed within Auschwitz as the "gray zone", and defines it as "that zone of ambiguity that emanates from regimes founded on terror and obsequiousness."<sup>22</sup> It was a space solely occupied by prisoners in the camps, where the line between good and evil was blurred, and where oppression was collectively felt from above, but also from one another, "The enemy was outside but also inside. There was no clearly defined 'us'."<sup>23</sup> It was indecipherable, obscure, and dissolute. It is within this space of uncertainty, where the borders between victim and perpetrator were blurred, that privilege was born. In Auschwitz, there existed a willingness to collaborate with the perpetrator among the oppressed, in order to gain privilege within the camp.<sup>24</sup> Levi explains that "the harsher the oppression, the more widespread among the oppressed is the willingness to collaborate with power."<sup>25</sup> However, this element of willingness in the gray zone is nuanced and complex, and deeply influenced by coercion. Therefore, one must suspend all moral judgements when discussing such a phenomenon.<sup>26</sup> Nevertheless, the case of prisoner doctors provides profound insight into certain motives for collaboration with the oppressor. Additionally, the unique position of privilege that prisoner doctors experienced further deepens the gray zone and heightens the complexity of their reality.

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<sup>22</sup> Levi, Primo. *The Drowned and the Saved*. Vintage International, New York, 1989.

<sup>23</sup> Levi, *The Drowned and the Saved*, p. 27.

<sup>24</sup> *Ibid.*, p. 31.

<sup>25</sup> *Ibid.*, p. 32.

<sup>26</sup> *Ibid.*

As Levi describes, there existed a space within the system of Auschwitz where individuals were ordered, by the SS, to exert on others the treatment of perpetrators.<sup>27</sup> It is within this gray zone of prisoner doctor privilege, in the tension it creates, that exists an impossible reality. One is put in the role of perpetration by the camp authorities, while still occupying the inescapable position of victim. The impossibility resides in the fact that the SS granted them “a crumb of authority”<sup>28</sup> to make decisions, yet every choice holds indescribable consequence. The impossibility of this reality is further emphasized when considering a prisoner doctor’s personal necessity for survival against their ethical commitment to the Hippocratic oath. For prisoner doctors, the value of their skill and their ability to execute the same crimes as their perpetrators, elevated their status in the camp. However, they were still prisoners, and their lack of power and control over their environment is consistently apparent. Auschwitz was a space where morality was the antithesis of privilege, where ethics were nonexistent, and where autonomy was squandered by the iron fist of coercion. The impossible reality of prisoner doctors, and its infinitely complicated internal structure, must then be defended in a court of law. To form a final verdict, the jury needed to judge the level of autonomy exerted due to the status of doctor, against the powerlessness due to the status of prisoner.

Three prisoner doctors’ stories were brought to the attention of the court in the hopes of clarifying the predicament of prisoner doctor privilege. All three prisoner doctors were involved in Block 10 and 21, and confronted, albeit in varying contexts, with the same peculiar and unique situation. They each recounted a moment where an SS doctor, either Wirths or Schumann,<sup>29</sup> who were affiliated with the experimental blocks, ordered for their services in conducting surgical sterilization. The first doctor brought to the stand was Dr. Dering. He was a prisoner doctor in Block 21 from June 1941 to August 1943. Additionally, he was the only surgeon in the block and mainly attended to injured prisoners.<sup>30</sup> In 1943, however, SS Dr. Schumann set forth a proposal

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<sup>27</sup> Levi, *The Drowned and the Saved*, p. 38.

<sup>28</sup> *Ibid.*, p. 36.

<sup>29</sup> SS Dr. Wirths set up Block 10 as a surgical unit for cervix cancer experiments on women in 1943. Fifty to eighty women prisoners were situated in this block for his experimental use. SS Dr. Schumann worked in Block 21, the men’s hospital, to carry out sterilization experiments with X-ray and castration. It is claimed that he needed Dr. Dering to remove their organs for further exploration.

<sup>30</sup> Hill and Williams, *Auschwitz in England*, p. 62.



to Dr. Dering. As it was stated by the defence, “Dr. Schumann then told him, ‘very politely’ that he was carrying out experiments on the sexual glands of men and women by X-ray and wanted him to remove the X-rayed testicles and ovaries.” Dr. Dering refused, “...I don’t think we as doctors could do those things.” Consequently, he was punished by not being allowed to leave the camp for two weeks.<sup>31</sup> After this occurrence, Dr. Dering described a situation where he and his fellow doctor prisoner “colleagues” discussed Dr. Schumann’s proposal, “The common opinion was that there was no sense in refusing.” For if he refused, he would not be able to save these prisoners, as the surgery would be done by “some unskilled person”.<sup>32</sup> Subsequently, Dr. Dering was assigned to be the main gynecologist to perform ovariectomies and orchietomies on Jewish prisoners who had their sexual organs radiated by Dr. Schumann. As Dr. Dering recounts, the X-rayed prisoners he could not operate on, either due to severe radiation burns or other complications, were immediately sent to the gas chambers.<sup>33</sup> He stated in court that he could not refuse his posting, for if he did, he would have been shot.

Second, Dr. Alina Brewda, a Jewish-prisoner gynecologist assigned to Block 10 by SS Dr. Wirths to examine patients.<sup>34</sup> When asked by SS Doctor Schumann, in October of 1943, how long it would take her to remove an ovary, she replied, “About one and a quarter to one and a half hours.” He then accused her of lying and stated that the current gynecologist (Dr. Dering) does the operation in eight to ten minutes.<sup>35</sup> In Dr. Brewda’s testimony, she offhandedly mentions that she intentionally exaggerated the time. It is this act that deserves focus, as it exemplifies a moment of silent defiance. Dr. Dering’s refusal was on the basis of ethical integrity, that doctors should not do such things, which was punished. Dr. Brewda made the decision to lie, which was recognized, yet somehow left unpunished by Dr. Schumann. This moment then set the course for Dr. Brewda’s role in Block 21, and the responsibilities burdened on her thereafter. One month later, in November of 1943, Dr. Schumann ordered her to Block 21,

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<sup>31</sup> Some prisoners with privilege were sometimes granted permission to leave the camps for excursions. Dr. Clauberg told Dr. Dering that he would try to take him to his private hospital, located outside of Auschwitz. Hill and Williams, *Auschwitz in England*, p. 65.

<sup>32</sup> *Ibid.*, p. 66.

<sup>33</sup> *Ibid.*, p. 74.

<sup>34</sup> *Ibid.*, p. 190.

<sup>35</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners’ accounts*, p. 34.

where she was instructed to “calm the girls”.<sup>36</sup> The role of surgeon has been filled by Dr. Dering, who could indeed complete the surgery in eight to ten minutes, and Dr. Brewda’s sole role was to provide comfort to the girls whose ovaries he was removing. A job not forgotten by the women of these blocks who managed to survive and presented their case in London. In total, nine women and five men testified as victims of the surgery against Dr. Dering’s claims. As they stated, the experimental procedure consisted of one painful spinal injection that completely anesthetized them from the waist down, two male personnel strapping their bodies to a table, and Dr. Dering performing the surgery.<sup>37</sup> The victim would receive blows by the doctor if they screamed, cried or struggled, for they were conscious throughout the procedure. However, every woman remembered Dr. Brewda: “Dr. Brewda was there...she patted my cheeks and told me ‘Don’t be afraid. It will pass quickly’”,<sup>38</sup> “She said to me, ‘My child, courage’”,<sup>39</sup> “...I felt the warm hand of the woman doctor Brewda”.<sup>40</sup> She was present for every victim’s ovariectomy, watching every slice of Dr. Dering’s knife, but she was remembered fondly, almost like a mother.<sup>41</sup>

Lastly, Dr. Adelaide Hautval, a French psychiatrist imprisoned in Auschwitz in January of 1943.<sup>42</sup> She was asked by Dr. Wirths if she wanted to conduct psychiatric analysis in the medical blocks. She knew the implications of this question, that it insinuated taking part in experimental sterilization, yet she agreed. As she explained to the jury, she reasoned that since she “might leave the camp”, a more detailed look into these sterilization experiments could be beneficial knowledge.<sup>43</sup> In one instance, Dr. Wirths asked for Dr. Hautval’s opinion on sterilization, “I answered that I was absolutely opposed to it.”<sup>44</sup> Hautval then recounts another episode that took place after refusing her role in the sterilization surgery of a Jewess. Once Dr. Wirths was informed that Dr. Hautval refused, he asked “Cannot you see that these people are different than you?” To which she responded, “There are several other people different from me,

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<sup>36</sup> Ibid.

<sup>37</sup> Hill and Williams, *Auschwitz in England*, p. 193.

<sup>38</sup> Ibid., p. 145.

<sup>39</sup> Ibid., p. 147.

<sup>40</sup> Ibid., p. 167.

<sup>41</sup> Ibid., p. 171.

<sup>42</sup> Ibid., p. 217.

<sup>43</sup> Ibid., p. 218.

<sup>44</sup> Ibid.

starting with you!”<sup>45</sup> As it were, Dr. Hautval demonstrated blatant insubordination, and is present in London’s Royal Courts of Justice to speak of it.

These separate narratives provide the jury with three outcomes to a similar proposition, but it is complex due to the many variables influencing the consequence of each action. All three prisoner doctors refused the initial proposal of working in Block 10 or 21, yet only one was punished by the SS. In this space, at a midpoint between prisoner and medical practitioner, each doctor is faced with the same ethical dilemma. They can either choose to perpetuate the same treatment as the SS onto fellow prisoners or refuse. As doctors, they were given the choice, yet as prisoners, the choice was impossible since death loomed over every outcome. The impossible reality that existed in Auschwitz through this perpetration, and the final judgement that a court case necessitates, brings this ethical dilemma into question.

A preliminary avenue of understanding the fragility of ethical standards lies in the KZ Syndrome, a condition recognized among survivor-doctors and Polish psychiatrists that has inflicted survivors of the Holocaust. These victims are described as being psycho-somatically altered, exhibiting a sense of “otherness”. As a scholar and concentration camp survivor, Antoni Kepinski writes, “that otherness, comes to light as soon as they start talking about the camp. They are unable to break free from its environment.”<sup>46</sup> These survivors have been thrust into experiencing humanity in its most exposed form. As a result, they carry with them an awareness of the tenuous nature of “human norms, forms and appearances.”<sup>47</sup> There existed a depravity of human dignity in the camp, and the societal norms and systems that rely on it. Therefore, the profound complexity of reality in Auschwitz is not comprehensible, or explainable, through any predetermined frameworks of ethics. This is due to its basis on principles of “human dignity”,<sup>48</sup> which were violently stripped from every individual by Nazis and other prisoners upon entrance to the camp.<sup>49</sup> The limitation of these ethical boundaries is apparent when the cross-examiner

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<sup>45</sup> Hill and Williams, *Auschwitz in England*, p. 219.

<sup>46</sup> Ryn, Zdzisław Jan. *The KZ-syndrome and its evolution through the generations*. Medical Review Auschwitz, Krakow, 2019, p. 85-86.

<sup>47</sup> *Ibid.*, p. 86.

<sup>48</sup> Agamben, Giorgio. “Remnants of Auschwitz: The witness and the archive.” (2002).

<sup>49</sup> McClellan, William. “Primo Levi, Giorgio Agamben, and the New Ethics of Reading.” *The Legacy of Primo Levi*. Palgrave Macmillan, New York, 2005. 147-152.

asks Dr. Dering about a prisoner, who he castrated from Block 21, “Was this done with or without his consent?” and “Was there any medical reason for it?” To which Dr. Dering answers, “He was not asked for his consent.”<sup>50</sup>

The limited definition of ethics also exposes the instinctual tendency to oversimplify history and suffocate the voices of those whose experiences fall within a grayer zone. As Primo Levi explains, “The network of human relationships inside the Lager was not simple: it could not be reduced to the two blocs of victims and perpetrators.”<sup>51</sup> This gray zone challenges any system that solely bases its principles on human integrity, as respect, dignity, and the very idea of an ethical limit lost their meaning in the camps.<sup>52</sup> As it is explained by Giorgio Agamben, a new ethics based on the knowledge the survivors brought back from Auschwitz should be incorporated into our idea of ethics, since excluding it discredits the experiences of those who could not abide to them.<sup>53</sup> The inhumane must be included in the definition of ethical boundaries, as it has proven itself to be a part of the human. As Levi contemplates in *The Drowned and the Saved*, “Have we survivors succeeded in understanding and making other people understand our experience?” Integrating the nuanced understanding of ethics that survivors brought from the camps would be a step in that direction. It also shows that applying a code of ethics based on “human integrity” as a tactic to condemn the actions of victims in the camps is therefore unsound.

As Primo Levi explains, any outsider who attempts to describe or frame the situation in Auschwitz also reveals themselves as a perpetrator of oversimplification.<sup>54</sup> This is blatantly apparent when the defence attempts to use certain ethical standards to cast judgement. The Hippocratic oath is brought to the attention of Dr. Dering in the cross-examination of his role in the experimental sterilizations: “As a doctor you have taken the Hippocratic oath...is there any justification, in your view, except that you would have been shot if you’d disobeyed the order?”<sup>55</sup> The defence asks if Dr. Dering requested to see the court order before surgery, if

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<sup>50</sup> Hill and Williams, *Auschwitz in England*, p. 81.

<sup>51</sup> Levi, *The Drowned and the Saved*, p. 37.

<sup>52</sup> McClellan, “Primo Levi, Giorgio Agamben, and the New Ethics of Reading,” p. 148.

<sup>53</sup> Agamben, “Remnants of Auschwitz: The witness and the archive,” p. 64.

<sup>54</sup> Levi, *The Drowned and the Saved*, p. 37.

<sup>55</sup> Hill and Williams, *Auschwitz in England*, p. 79.

consent was obtained, and if he believed the surgery would be beneficial. His response reverberated in the courtroom, “Since I entered Auschwitz, all law, normal, human and God’s law were finished. They were German’s law.”<sup>56</sup> It is noteworthy in Dr. Dering’s response that the Hippocratic oath, a testament to abide by a certain code of ethics, is used interchangeably with law. I believe this indicates that the collapse of institution also meant a collapse in ethical conduct. It would prove itself unjust to question his actions from a modern ethical standpoint, as the only law that existed was of German command. The Judges of Nuremberg relinquished the responsibility from those who were under order<sup>57</sup>. Are we to do the same with the Hippocratic oath? If we were to dismiss ethics, what approach should be used to explore the justification of actions taken by prisoner doctors, the subjective experience of morality? How do we then define a “good” doctor in Auschwitz?

Levi describes the state of morality in the camps as reduced to nothing, due to the prisoners’ constant battle for personal survival,<sup>58</sup> “But things are different in the Lager: here the struggle to survive is without respite, because everyone is desperately and ferociously alone.”<sup>59</sup> To survive the camps without relinquishing even a morsel of one’s morality required a particularly superior compass, “made of the stuff of martyrs and saints.”<sup>60</sup> Dr. Hautval described herself as lucky, for she was able to refuse; that it was, however, “...certainly not due to herself, but simply because she had an instinct which told her that there were more important things in life than saving one’s skin.”<sup>61</sup> This instinct, which I identify as her sense of morality, is described as separate from “herself”. Levi also describes morality as almost being distinct from one’s being. That to oppose orders, one requires a “truly solid moral armature”.<sup>62</sup> It is a framework that is delicate and conditional, submissive to manipulation unless one possesses a particularly strong one. Does this perspective then excuse those who were unlucky, or lacked this solid moral armature?

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<sup>56</sup> Ibid.

<sup>57</sup> The Nuremberg medical trials, which occurred between December 1946 and July 1947. Twenty Nazi physicians were prosecuted, and seven were sentenced to death.

<sup>58</sup> Levi, *The Drowned and the Saved*, p. 38.

<sup>59</sup> Levi, Primo. *If this is a Man*. Orion Press, New York, 1959.

<sup>60</sup> Ibid., p. 128.

<sup>61</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners’ accounts*, p. 50.

<sup>62</sup> Levi, *The Drowned and the Saved*, p. 40.

As the 18-day trial drew to a close, it was made fact that Dr. Dering had executed about one hundred and thirty reproduction-related experimental operations under order of the SS. It was also made fact that when Jewish prisoners were involved, “he had been careless to the point of brutality.”<sup>63</sup> As it were, Dr. Dering defended his integrity in much the same manner as our war criminal predecessors, through the “state of coercion following an order”.<sup>64</sup> He is not to blame for the actions he took under the regime, where autonomous decisions were nonexistent, where subservience was recognized and rewarded. Within an indecipherable inferno, Dr. Dering was offered a chance of survival, through a proposal, or rather an order, to perform a gruesome job.<sup>65</sup> As Dr. Dering explains, “Dr. Schumann sent the girls to me in the theater, and I could not refuse. To refuse would be sabotage. That meant only one thing in the camp.”<sup>66</sup>

The case of Dr. Dering exemplifies the great interplay between ethical limitations, moral integrity, and survival. It also illustrates the impossibility of prisoner doctor privilege through the lens of legal judgement. Dr. Dering believed that refusing Dr. Schumann’s proposal “would be stupidity” since not executing these experimentations meant certain death to him and probable death to the victim.<sup>67</sup> However, to proceed meant almost-certain death to his victim, and if by some miracle they survive, death to their legacy. As Dr. Adelaide Hautval, a heroine in her own right, wrote: “All of us, including myself, were sometimes in situations in which we had to make abnormal decisions. The impossibility to live ‘without dirty hands’ belonged to that phenomenon.”<sup>68</sup>

It is important to note that the English jury of the 1964 libel action had to grapple with this case years before Primo Levi and Giorgio Agamben conceptualized the moral and ethical realities of the camps. As Claude Romney states, “Those ‘abnormal decisions’ were caused by abnormal circumstances” and the conditions of the camps brought forth ethical dilemmas never

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<sup>63</sup> Hill and Williams, *Auschwitz in England*, p. 69.

<sup>64</sup> Levi, *The Drowned and the Saved*, p. 32.

<sup>65</sup> *Ibid.*, p. 47

<sup>66</sup> Hill and Williams, *Auschwitz in England*, p. 69.

<sup>67</sup> *Ibid.*, p. 66.

<sup>68</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners’ accounts*, p. 50.

encountered before.<sup>69</sup> Levi masterfully articulates the concept that began to materialize in the courtroom of the Royal Courts of Justice regarding the reality of prisoner doctors, "...if a position of privilege, a degree of comfort, and a reasonable probability of survival are offered to a few individuals in a state of slavery, in exchange for the betrayal of a natural solidarity with their comrades, someone will certainly accept."<sup>70</sup> However, it must be noted that the prisoner doctors of Auschwitz did their most to provide care and medical attention to counteract the SS's inhumane treatment.<sup>71</sup> Dr. Dering did indeed perform about 17,000 surgeries, but a majority were done to save the lives of fellow prisoners.<sup>72</sup> As the prosecutor brings his argument to a close, he asks Dr. Dering, "Looking back from 1964 into the horrible past, do you feel that you did all you could for your suffering fellow creatures at Auschwitz?" To which he responds, "Yes, I did my best."<sup>73</sup>

Although one may question and probe Dr. Dering's actions, as it occurred in court and this paper, it is important to remember that he was not the one being prosecuted, Leon Uris was. As it were, the final verdict found Leon Uris guilty, for the number of experimental surgeries was indeed exaggerated. However, it is evident by the thirteen women and five men brought to the witness stand that day, that a number did exist. As Dr. Hautval explains, "...the Dering case did in fact demonstrate very clearly what can happen to a man, an ordinary man, an ordinary doctor. Perhaps even a good doctor, because I believe Dr. Dering was basically a good doctor. This process of degradation is progressive. You agree with a certain principle and you carry on in the same way without ever letting yourself see where it's leading you. I'm sure that all the terrible things done in the world began with small acts of cowardice."<sup>74</sup>

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<sup>69</sup> Romney, "Ethical problems encountered by Auschwitz prisoner doctors." *Remembering for the Future*, p. 320.

<sup>70</sup> Levi, *The Drowned and the Saved*, p. 36.

<sup>71</sup> Romney, "Ethical problems encountered by Auschwitz prisoner doctors." *Remembering for the Future*, p. 320.

<sup>72</sup> Hill and Williams, *Auschwitz in England*, p. 55.

<sup>73</sup> *Ibid.*, p. 75.

<sup>74</sup> Shelley, *Criminal experiments on human beings in Auschwitz and war research laboratories: twenty women prisoners' accounts*, p. 49.

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