

Translation from: "Recht op Waardig Sterven", (RWS - Belgium). Bulletin vol. 16 nr. 71. March 1999.

Those who oppose euthanasia often insinuate that the crimes committed by the Nazis were a result of laws which allowed euthanasia. When the Dutch parliament made euthanasia legally possible, Osservatore Romano, the Vatican publication, accused the Netherlands of moving into the direction of Nazism. In order to put a halt to such slanderous language, Dr Yvon Kenis, honorary president of ADMD, published the following article in Revue Generale.

### NAZISM AND EUTHANASIA

*Euthanasia, because one has to call it by its horribly sounding name ....*

*Leon Schwartzberg, Changer la mort, 1977*

*Euthanasia is a word which regrettably has been written in letters of blood. All dictionaries spell it wrongly. It should be written nazi - Euthanazi*

*Jerome Lejeune in: Chabanis, La mort, un terme on un commencement 1982*

*Nobody likes the word euthanasie, not only because it rhymes with nazi*

*Le Monde, 21 September 1982*

*The first law, which allowed euthanasia to be practised based on the objective criteria of the degeneration of health, was a nazi law*

*Roger Lallemand, Le Journal des Proces, 3 February 1995*

Dr. Yvon Kenis  
Revue Generale, January 1996  
(Ed. De Boeck/Duculot)

For a long time after the Second World War the word euthanasia had a bad press resulting from exposure of the crimes committed by the Nazis, of which some were labelled "euthanasia." The word was a curse: pointing at the ghost of Nazi crimes seemed enough to cut off any discussion. The horror of those crimes made the word itself disgusting. The above quotations prove that this disgust was shared by people with very diverse moral convictions, also as far as euthanasia was concerned, such as Leon Schwartzberg and Jerome Lejeune. It was a real taboo. This has changed, however. An overview of abstracts from the Belgian and Swiss press (as well as the newspaper Le Monde) collected by ADMD shows a significant reduction of the number of abstracts concerning euthanasia and Nazism. It reduces from 5% for the period 1982-1987 to 1.2% for 1990-1994. This rough enquiry creates the impression that the information and opinion press, during the past six years, has practically stopped entirely associating euthanasia and Nazism with each other. Let us make it clear that this applies to newspapers and weeklies only. It is not possible to do the same research for monthly publications, periodicals and books, but when reading bio-ethic publications or articles about death we have often found references to national-socialistic Germany in connection with euthanasia legislation. One points at the argument of danger of misuse, of the "slippery slope", that it would lead to quasie automatically from a terminal patient's euthanasia request to compassionate killing of unconscious patients and malformed babies, to end with the elimination of demented persons and "useless mouths". That's why it is good to see whether German history from 1933 to 1945 warrants arguments in favour of this position.

To begin with we can declare that a law allowing voluntary euthanasia, at the request of a patient, never existed. Besides, there has never been a law which allows doctors to hasten the death of certain categories of sick people. At the end of 1938 or in the beginning of 1939 Hitler gave, via his personal doctor Karl Brandt, permission for euthanasia on a seriously deformed child. This decision about a particular case is often seen as the starting point of a "euthanasia program" introduced during the course of 1939. In May

1939 Karl Brandt established a “committee for the scientific registration of serious hereditary and congenital deceases” which depended entirely on the Fuhrer’s chancellery. This innocent misnomer, which creates the idea of a register with scientific purposes, camouflages a structure introduced to ensure the elimination of newborns and children with more or less serious birth defects. The operation had to remain a great secret and take place without the parents’ knowledge, either at birth or in institutions. Midwives and doctors had to report to the authorities the births of children affected by “mongolism, idiocy, micro- or hydrocephalus”. Based on information collected a committee of doctors decided which children were to be sent to one of the hospitals where they were executed. The parents received a standard letter, as used by all institutions, in which they were told that their child had died suddenly as a result of infection, brain oedema or another unexpected cause. The number of victims is estimated to have been 5000 children.

In October 1939 Hitler signed a note, back-dated 1 September 1939 (the beginning of the war with Poland), which gave doctors Karl Brandt and Philip Bouhler, head of the Fuhrer’s chancellery, permission to “extend the authority of certain doctors to enable them, according to the then existing knowledge of human life and as severely, as possible judgment, to practise euthanasia on patients judged to be incurable”. This note or memorandum was produced on Hitler’s personal letter paper and did not bear any official character. In fact the elimination of institutionalised psychiatric patients had already begun several months earlier and the note was intended as a “cover” for Brandt and Bouhler who were in charge of the large-scale extermination of these patients. Several organisations were established, always named so as to hide the real reason for their existence. General management was given to a “Society of hospital and care institutions” (Reicharbeitsgemeinschaft Heil- und Pflege anstalten, RAG), financing to the “Foundation for public benefit of hospital care” (Gemeinnutzige Stiftung fur Anstaltspflege), transport of patients to institutions where they were to be killed to the “General company for patient transport” (Allgemeine Kranken Transportgesellschaft). The RAG was based in Berlin, in Tiergarten nr. 4 from where the program’s codename originated: Aktion T-4. The whole organisation was, just as the child murders, directly dependent on the Fuhrer’s chancellery with administrative support from the Ministry of Home Affairs. The Minister of Justice did not have any official connection with program T-4. There even were some prosecution attempts against doctors which, however, were quickly suspended following intervention by the chancellery.

The technical aspect was left to “trustworthy” doctors, who were often members of the SS. Respectable university professors and reputable psychiatrists gave the program their “scientific” blessing. In practice a small group of psychiatrists and civil servants drew up a questionnaire which was sent to all psychiatric hospitals and institutions/homes for the chronically ill. The institutions’ doctors had to complete a questionnaire for each patient and besides name, age, gender and “race” also state the duration of admission, the diagnosis and the kind of activity the patient was capable of carrying out. (This last question required a particularly detailed answer). At the bottom of the questionnaire was an empty space. The document had to be sent urgently to the central organisation where it was reproduced several times and studied separately by three psychiatric “experts” who had to put a red “+” which meant death, a blue “-” for the patient who was allowed to stay alive or a “?” for doubtful cases. The copies marked as such were checked by a “super expert” who made the final decision, either positive or negative. About doubtful cases (which had been judged differently by three psychiatrists or which had been marked “?”) were decided on, without right of appeal, by the *Obergutachter* (Chief expert - GV) who, in any case, was not obliged to take into account the opinions of his colleagues.

I found it useful to explain this selection process in some detail to show to what extent it is exactly the opposite of the criteria which are required by some existing legislations (in the Netherlands, State of Oregon and the Australian N.T.) and by bills supported or initiated by the movement of right to die with dignity: it concerns solely voluntary euthanasia, this is a mild death - in accordance with etymology - practised after a period of consideration, by the consulting doctor, out of compassion for an urgent and repeated request by the patient.

In Nazi Germany the decision was made administratively by one person who had never seen the patient

and without knowledge of the patient himself and his family. Besides hereditary or racial burdening an important criterion was the patient's ability to work. There was a war on, useless mouths had to be eliminated but all productive capacities utilised, even if they were only average, to replace those who were conscripted into the army. The same principle was to be used in the extermination camps.

The patients who were destined to die were transported in groups to particular institutions. There were six of those: a disused prison, a vacated castle and adapted hospitals which were quickly equipped with gas chambers. Gassing was considered to be more "humane" than a bullet, more efficient than injections or trucks fitted out to kill by means of their exhaust gases. Mentally handicapped children were left to die of starvation.

The number of adult victims of the T-4 program from mid 1939 to August 1941 is estimated to be 10,000. The program was halted after protests from certain religious authorities of which most noise came from a pastoral letter by the bishop of Munster, Clemens August, count von Galen. Notwithstanding precautions the secret was let out. The number of German families affected and the unavoidable mistakes made in a program of such size caused doubt at first and then brought to light the cruel reality. Accordingly Hitler felt obliged to put a halt to the action, also because the number of victims was approaching the figure the organisers of the T-4 program had calculated. After the - this time official - forced sterilisation program and before the decision to exterminate the Jews, the goal set had been achieved: German blood had been purified.

The argument that the German example shows the danger of voluntary euthanasia legislation, and that such legislation threatens to lead to extermination of other categories of patients, is accordingly completely baseless. The word euthanasia does not belong here. As F. Mann says, it rather is "language adulteration by the nazi regime, which used a large scale action, the war, to give it a name and at the same time camouflage the killing of physically and mentally handicapped persons". Secrecy and the use of euphemisms distinguish the program to eliminate abnormal children and the T-4 action from beginning to end. We have seen the names given to the institutions established for that purpose. In the reports one spoke of "selection", "particular treatments", "cleansing operations" or "special installations", just as later they would use the expression "final solution". Bouhler's assistant, doctor Brack, who was the key figure of T-4, used the pseudonym: Jennerwein. Gas chambers were camouflaged as shower rooms (after the operation they were transported to concentration camps). Many authors, specialising in the history of the period, systematically put the word "euthanasia" for this reason between inverted commas in order to emphasise the fallacious use of it.

It is also wrong to speak of euthanasia legislation as several other authors do. A note from Hitler addressed to close assistants is not a law. The secrecy in which the project was veiled right from the beginning and which they tried to maintain proves this. It is the opposite from openness of parliamentary debates in a democracy. A Bill or proposal is studied in committee, discussed and if necessary amended during public session. During the debates the press informs the public. Supporters and opponents of the proposals may say their piece in publications with diverse backgrounds and can organise public meetings to discuss them. When parliament passes the bill it is printed in a government gazette. At a later date it may be repealed or amended. Hitler's decisions of course did not follow this path. Ethicist Daniel Callahan, director of the Hastings Centre, admits that "the nazi experience (with regard to the danger of misuse of legislation) is only partly pertinent. It was not a step originating from legal voluntary euthanasia and then leading to enforced killing. The first phase was always missing and the nazis went straight to murder".

History formally belies the existence of a "slippery slope" which would have lead from the legalisation of voluntary euthanasia to the elimination of handicapped children and the mentally ill, in order to result in genocide. The real succession was as follows: anti-Jewish laws and forced sterilisation of patients with so called hereditary deceases, which began during the first months of the nazi regime, (secret) execution of deformed children and the mentally ill from April/May 1939 until August 1941, and finally genocide. These crimes had common origins: racist ideology, anti-semitism and gross

“eugenics”. These tendencies, which were present right from the beginning of Nazism, were strengthened by economic constraint while the final phase was made possible as a result of the state of the war. The argument of danger of abuse itself, of the “slippery slope”, is doubtful. In fact it is not an argument. One limits oneself to thinking that when one tolerates A, which might seem acceptable, one might automatically tolerate - or even impose - B, which is morally unacceptable. Reference to the nazi example in context of support for legalisation of voluntary euthanasia is a bogus argument. We have seen that this example does not apply in any sense. One could, to the contrary, give many examples where the “slippery slope” effect did not occur. Legislation allowing voluntary pregnancy termination did not lead to compulsory abortion. In the U.S. legislation for compulsory sterilisation was not followed, in contrast of what occurred in nazi Germany, by legislation which made the killing of patients or deviates compulsory: they were repealed or are no longer enforced. The difference is that the U.S. has a democratic regime while Hitler’s Germany was a dictatorship. Some people may think that it would be dangerous to take legislative measures which are acceptable in our democratic system but might become frightful in the hands of a dictator. Let us remind them first of all that a dictator is not in need of (democratic or not) laws in order to take the measures he wants. The history which we have summarised above proves this. As Fritz Mann writes, “may the fear for possible abuse never prevent that measures are taken which are basically considered justifiable. We should not question ourselves about the results our present measures could have in a hypothetical totalitarian state which might replace democracy. We must do everything possible to prevent that such a possibility never becomes reality”.

The first lesson learnt from the history of Nazism is the mortal danger which the absence of democracy presents. But it is not the only lesson. The (German) dictatorship could develop from forced sterilisation to genocide with, in between, the extermination of certain categories of patients because it was based on racist ideology which accepted the mythical concept of superiority of the “Northern race” as scientific truth. According to this ideology the race was threatened with degeneration by unhealthy elements, such as persons with hereditary or so called hereditary afflictions (alcoholism, homosexuality, delinquency etc.) and it felt that its way of life was threatened by the “Jewish gangrene”. Radical measures were thought to be necessary to save it. That is what the Fuhrer, the people’s incarnation, did.

#### Summary and conclusion

The word euthanasia has often been associated with nazism and used to stifle debate on the subject in order to prevent it. It is wrong to assert that the example of nazi Germany proves that legalisation of voluntary euthanasia may result in the killing of people who don't want anything but to stay alive:

1) Voluntary euthanasia was never practised in Germany. 2) The murders labelled euthanasia by the nazis were the result of Hitler’s secret note which allowed (and even ordered) the killing of babies born with abnormalities, handicapped children and mentally ill adults who were unable to work, without their permission. 3) The succession of *forced sterilisation - elimination of the mentally ill - genocide* fits into the racist and fascist ideology, which gives priority to the mythical concept before the rights of the individual and respect for the human being.

*N.B. Lack of space does not allow us to print the notes this article refers to. We'll gladly post them to those who are interested. Also published in the ADMD quarterly bulletin nr. 67, March 1998.*