

The anti-tobacco campaign of the Nazis: a little known aspect of public health in Germany, 1933-45

Robert N Proctor

Historians and epidemiologists have only recently begun to explore the Nazi anti-tobacco movement. Germany had the world's strongest antismoking movement in the 1930s and early 1940s, encompassing bans on smoking in public spaces, bans on advertising, restrictions on tobacco rations for women, and the world's most refined tobacco epidemiology, linking tobacco use with the already evident epidemic of lung cancer. The anti-tobacco campaign must be understood against the backdrop of the Nazi quest for racial and bodily purity, which also motivated many other public health efforts of the era.

Medical historians in recent years have done a great deal to enlarge our understanding of medicine and public health in Nazi Germany. We know that about half of all doctors joined the Nazi party and that doctors played a major part in designing and administering the Nazi programmes of forcible sterilisation, "euthanasia," and the industrial scale murder of Jews and gypsies.^{1, 2} Much of our present day concern for the abuse of humans used in experiments stems from the extreme brutality many German doctors showed towards concentration camp prisoners exploited to advance the cause of German military medicine.³

Tobacco in the Reich

One topic that has only recently begun to attract attention is the Nazi anti-tobacco movement.^{4, 5} Germany had the world's strongest antismoking movement in the 1930s and early 1940s, supported by Nazi medical and military leaders worried that tobacco might prove a hazard to the race.^{1, 4} Many Nazi leaders were vocal opponents of smoking. Anti-tobacco activists pointed out that whereas Churchill, Stalin, and Roosevelt were all fond of tobacco, the three major fascist leaders of Europe—Hitler, Mussolini, and Franco—were all non-smokers.⁷ Hitler was the most adamant, characterising tobacco as "the wrath of the Red Man against the White Man for having been given hard liquor." At one point the Führer even suggested that Nazism might never have triumphed in Germany had he not given up smoking.⁸

German smoking rates rose dramatically in the first six years of Nazi rule, suggesting that the propaganda campaign launched during those early years was largely ineffective.^{4, 5} German smoking rates rose faster even than those of France, which had a much weaker anti-tobacco campaign. German per capita tobacco use between 1932 and 1939 rose from 570 to 900 cigarettes a year, whereas French tobacco consumption grew from 570 to only 630 cigarettes over the same period.⁹

Smith *et al* suggested that smoking may have functioned as a kind of cultural resistance,⁴ though it is also important to realise that German tobacco companies exercised a great deal of economic and political power, as they do today. German anti-tobacco activists frequently complained that their efforts were no match for the "American style" advertising campaigns waged by the tobacco industry.¹⁰ German cigarette manufacturers neutralised early criticism—for example, from the SA (Sturm-Abteilung; stormtroops), which manufactured its own "Sturmzigaretten"—by portraying themselves as early and eager supporters of the regime.¹¹ The tobacco industry also launched several new journals aimed at countering anti-tobacco

propaganda. In a pattern that would become familiar in the United States and elsewhere after the second world war, several of these journals tried to dismiss the anti-tobacco movement as "fanatic" and "unscientific." One such journal featured the German word for science twice in its title (*Der Tabak: Wissenschaftliche Zeitschrift der Internationalen Tabakwissenschaftlichen Gesellschaft*, founded in 1940).

We should also realise that tobacco provided an important source of revenue for the national treasury. In 1937-8 German national income from tobacco taxes and tariffs exceeded 1 billion Reichsmarks.¹² By 1941, as a result of new taxes and the annexation of Austria and Bohemia, Germans were paying nearly twice that. According to Germany's national accounting office, by 1941 tobacco taxes constituted about one twelfth of the government's entire income.¹³ Two hundred thousand Germans were said to owe their livelihood to tobacco—an argument that was reversed by those who pointed to Germany's need for additional men in its labour force, men who could presumably be supplied from the tobacco industry.¹⁴

Culmination of the campaign: 1939-41

German anti-tobacco policies accelerated towards the end of the 1930s, and by the early war years tobacco use had begun to decline. The Luftwaffe banned smoking in 1938 and the post office did likewise. Smoking was barred in many workplaces, government offices, hospitals, and rest homes. The NSDAP (Nationalsozialistische Deutsche Arbeiterpartei) announced a ban on smoking in its offices in 1939, at which time SS chief



"Tobacco capital" raining down to spoil the people's health (Volks-gesundheit), labour power (Arbeits-kraft), demographic political goals (Bevölkerungs-politische Ziele), and the wealth of the people (Volks-vermögen). (From *Reine Luft* 1941;23:117)

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Heinrich Himmler announced a smoking ban for all uniformed police and SS officers while on duty.¹⁵ The *Journal of the American Medical Association* that year reported Hermann Goering's decree barring soldiers from smoking on the streets, on marches, and on brief off duty periods.¹⁶

Sixty of Germany's largest cities banned smoking on street cars in 1941.¹⁷ Smoking was banned in air raid shelters—though some shelters reserved separate rooms for smokers.¹⁸ During the war years tobacco rationing coupons were denied to pregnant women (and to all women below the age of 25) while restaurants and cafes were barred from selling cigarettes to female customers.¹⁹ From July 1943 it was illegal for anyone under the age of 18 to smoke in public.²⁰ Smoking was banned on all German city trains and buses in 1944, the initiative coming from Hitler himself, who was worried about exposure of young female conductors to tobacco smoke.²¹ Nazi policies were heralded as marking "the beginning of the end" of tobacco use in Germany.¹⁴

German tobacco epidemiology by this time was the most advanced in the world. Franz H Müller in 1939 and Eberhard Schairer and Erich Schöniger in 1943 were the first to use case-control epidemiological methods to document the lung cancer hazard from cigarettes.^{22, 23} Müller concluded that the "extraordinary rise in tobacco use" was "the single most important cause of the rising incidence of lung cancer."²² Heart disease was another focus and was not infrequently said to be the most serious illness brought on by smoking.²⁴ Late in the war nicotine was suspected as a cause of the coronary heart failure suffered by a surprising number of soldiers on the eastern front. A 1944 report by an army field pathologist found that all 32 young soldiers whom he had examined after death from heart attack on the front had been "enthusiastic smokers." The author cited the Freiburg pathologist Franz Büchner's view that cigarettes should be considered "a coronary poison of the first order."²⁵

On 20 June 1940 Hitler ordered tobacco rations to be distributed to the military "in a manner that would dissuade" soldiers from smoking.²⁴ Cigarette rations were

Reine Luft
1. Jahrg. Berlin, März/April 1941 Seite 2

AUS DEM INHALT:

Dr. Dr. Ritter 60 Jahre 33
Alte Mästlein
Gedanke an eine planmäßige "Entsorgung der
„Kankers“ der Lungenleber, G. Ullrich 34
Chemische Kankersfäden und Wirkungs-
fähigkeit
Zigarettenverbot! Dr. G. Ritter, Med. 43
Deutlichkeit und Schärfe des Magen-
trankens im Zigarettenrauchen
Dr. G. Ritter, Württemberg 46
Zigarettenrauch und Blutzucker
Ritter Dr. med. habil. G. Ritter, Straß-
furt a. M. 51
Vollwertige Milch und bewährte
empfehlenswerte Stangen 54
Vorlage am Menschen und am Scher-
stein = Kalkulation = Kalkulation
Jugendfragen
Die Diktatorin und der Kankersfaden
Zum 60. Geburtstag
Pfeife, Kalm und Kalkulation
Die starke Leistung in der Kunst
Von Prof. G. Ritter 76
Hauptstadt der Zigarettenleber
Mittelschwere und vollwertige
Milch 80

Gefährlich leben
Ohne bestimmte Gifte, ohne, ohne und
„Reine Luft“ stellt bei heftigen Wunden, bei
in Abhängigkeit mit dem Kalm bei Drogen
erfüllt Kalkulation und den Kalkulationen (Stroh
zum Rauchen) gegen eine Welt voller Kalkulation.

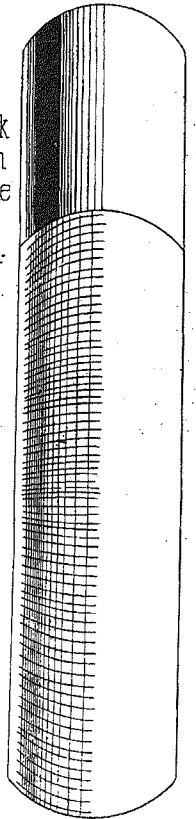
Bereitsein ist alles



Cover page from *Reine Luft* (March-April, 1941), the main journal of the German anti-tobacco movement

Deutschlands Zigarettenverbrauch

Die 7,8 Milliarden des Rechnungsjahres 1940/41 würden, zu 10 Stück verpackt, einen gewaltigen Block von 100 qm Grundfläche und 436m Höhe ausmachen. Unser Bild zeigt diesen Zigaretten-turm neben den Kölner Dom gestellt.



Unser Führer Adolf Hitler

trinkt keinen Alkohol und raucht auch nicht. Ohne andere im geringsten in dieser Richtung zu bezaubern, hält er sich eifern an das selbstauferlegte Lebensgesetz. Seine Arbeitsleistung ist ungeheuer. (Reichsjugendführer Baldur v. Schickel im Buch: „Hitler, wie ihn keiner kennt.“)

"Our Führer Adolf Hitler drinks no alcohol and does not smoke. . . . His performance at work is incredible." (From *Auf der Wacht* 1937:18)

German cigarette consumption. In 1940-1 Germans smoked 75 billion cigarettes, or enough to form a cylindrical block 436 metres high with a base of 100 square metres. (From *Reine Luft* 1942:24:70)

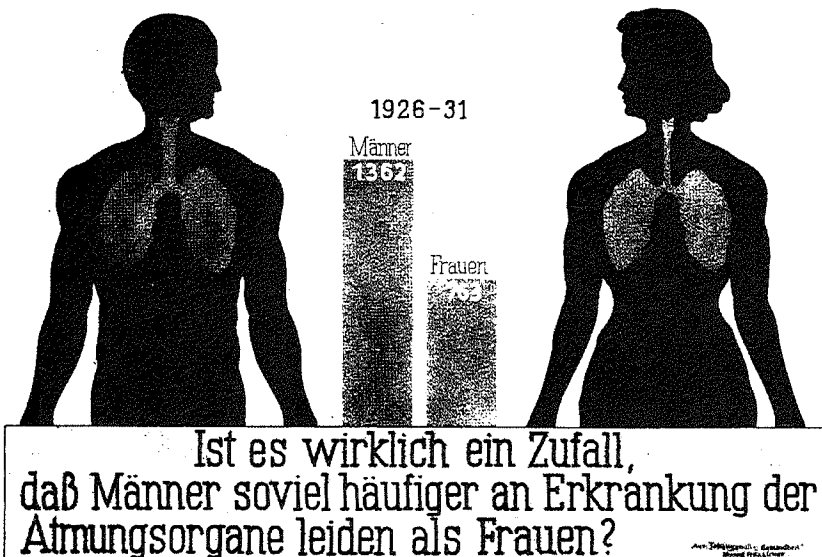


The chain smoker: "You don't smoke it—it smokes you!" (From *Reine Luft* 1941;23:90)

limited to six per man per day, with alternative rations available for non-smokers (for example, chocolate or extra food). Extra cigarettes were sometimes available for purchase, but these were generally limited to 50 per man per month and were often unavailable—as during times of rapid advance or retreat. Tobacco rations were denied to women accompanying the Wehrmacht. An ordinance on 3 November 1941 raised tobacco taxes to a higher level than they had ever been (80–95% of the retail price). Tobacco taxes would not rise that high again for more than a quarter of a century after Hitler's defeat.²⁶

Impact of the war and postwar poverty

The net effect of these and other measures (for instance, medical lectures to discourage soldiers from smoking) was to lower tobacco consumption by the military during the war years. A 1944 survey of 1000 servicemen found that, whereas the proportion of soldiers smoking had increased (only 12.7% were non-smokers), the total consumption of tobacco had decreased—by just over 14%. More men were smoking (101 of those surveyed had taken up the habit during



"Is it really just by chance that men are so much more likely than women to suffer from lung diseases?" (From *Reine Luft* 1941;23:215)

the war, whereas only seven had given it up) but the average soldier was smoking about a quarter (23.4%) less tobacco than in the immediate prewar period. The number of very heavy smokers (30 or more cigarettes daily) was down dramatically—from 4.4% to only 0.3%—and similar declines were recorded for moderately heavy smokers.²⁴

Postwar poverty further cut consumption. According to official statistics German tobacco use did not reach prewar levels again until the mid-1950s. The collapse was dramatic: German per capita consumption dropped by more than half from 1940 to 1950, whereas American consumption nearly doubled during that period.^{6,9} French consumption also rose, though during the four years of German occupation cigarette consumption declined by even more than in Germany⁹—suggesting that military conquest had a larger effect than Nazi propaganda.

After the war Germany lost its position as home to the world's most aggressive anti-tobacco science. Hitler was dead but also many of his anti-tobacco underlings either had lost their jobs or were otherwise silenced. Karl Astel, head of Jena's Institute for Tobacco Hazards Research (and rector of the University of Jena and an officer in the SS), committed suicide in his office on the night of 3–4 April 1945. Reich Health Führer Leonardo Conti, another anti-tobacco activist, committed suicide on 6 October 1945 in an allied prison while awaiting prosecution for his role in the euthanasia programme. Hans Reiter, the Reich Health Office president who once characterised nicotine as "the greatest enemy of the people's health" and "the number one drag on the German economy"²⁷ was interned in an American prison camp for two years, after which he worked as a physician in a clinic in Kassel, never again returning to public service. Gauleiter Fritz Sauckel, the guiding light behind Thuringia's antismoking campaign and the man who drafted the grant application for Astel's anti-tobacco institute, was executed on 1 October 1946 for crimes against humanity. It is hardly surprising that much of the wind was taken out of the sails of Germany's anti-tobacco movement.

The flipside of Fascism

Smith *et al* were correct to emphasise the strength of the Nazi antismoking effort and the sophistication of Nazi era tobacco science.⁴ The antismoking science and policies of the era have not attracted much attention, possibly because the impulse behind the movement was closely attached to the larger Nazi movement. That does not mean, however, that antismoking movements are inherently fascist²⁸; it means simply that scientific

Key messages

- The Nazi government in the 1930s launched the world's most aggressive anti-tobacco programme
- Nazi policies included bans on smoking in public places, increased tobacco taxes, advertising bans, and research into links between tobacco and lung cancer
- Per capita cigarette consumption increased during the first six years of Nazi rule but declined during the war and postwar period
- The Nazi anti-tobacco effort must be understood as part of the effort to safeguard the German population against "racial poisons"
- The German tobacco industry tried to defuse the anti-tobacco movement by characterising it as "unscientific"

memories are often clouded by the celebrations of victors and that the political history of science is occasionally less pleasant than we would wish.

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Not a slippery slope or sudden subversion: German medicine and National Socialism in 1933

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The history of medicine this century is darkened by the downfall of the German medical profession, exposed during the doctors' trial at Nuremberg in 1946. Relying largely on documents published during 1933 in German medical journals, this paper examines two widely accepted notions of those events, metaphorically termed "slippery slope" and "sudden subversion." The first connotes a gradual slide over infinitesimal steps until, suddenly, all footing is lost; the second conveys forced take over of the profession's leadership and values. Both concepts imply that the medical profession itself became the victim of circumstances. The slippery slope concept is a prominent figure of argument in the current debate on bioethics. The evidence presented here, however, strongly suggests that the German medical community set its own course in 1933. In some respects this course even outpaced the new government, which had to rein in the profession's eager pursuit of enforced eugenic sterilisations. In 1933 the convergence of political, scientific, and economic forces dramatically changed the relationship between the medical community and the government. That same convergence is occurring again and must be approached with great caution if medicine is to remain focused on the preservation of physical and medical integrity.

Die apokalyptische Ansicht der Welt ist eigentlich die, daß sich die Dinge nicht wiederholen.¹

LUDWIG WITTGENSTEIN

"The apocalyptic view of the world quintessentially is one in which events do not reoccur." The notion that something will not happen again prepares the ground for cataclysmic re-enactments. In 1946, the year Wittgenstein scrawled this idea into his notebook, leading civilian and military representatives of German medicine were indicted at Nuremberg for crimes against humanity. Among them were assistant and tenured professors; clinic directors and the personal physician of the chancellor; the head of the German Red

Cross; the highest ranking physician of the army and of the air force; and biomedical researchers employed by the pharmaceutical industry, the military, and universities. Some of Germany's top physicians killed themselves before interrogation or indictment. Among them was the highest representative of Germany's medical profession, Dr L Conti; the rector of the Christian Albrecht University of Kiel, Professor E Holzlöhner; and the director of the I Medical Clinic of the University of Vienna, Professor H Eppinger, still renowned and honoured as one of the pioneers of hepatology.

Ludwig Wittgenstein (1889-1951)

Ludwig Wittgenstein, "one of the world's famous philosophers,"¹⁰⁵ wrote the motto at the head of this paper in his native language—the language of those on trial in Nuremberg and also the language he continued to use in all his major analytical treatises, even after many years at Cambridge University. In the late 1930s the actions and proclamations by German politicians had led him to conclude: "I must say that the idea of becoming (or being) a German citizen is APPALLING to me" (emphasis as in the original).¹⁰⁶ On Chamberlain's Munich accord with Hitler he opined, "In case you want an Emetic, there it is."¹⁰⁵ By 1941, during the German aerial attacks on London, he found it intolerable just to teach philosophy in the safety of Trinity College instead of contributing to the British war effort. So at 52 years of age he resigned his academic position to labour at Guy's Hospital, London, often itself a target for firebombs. "He wants the job to be in a blitzed area."¹⁰⁵ As a porter, he delivered medicines from the dispensary to the wards full with casualties of the blitz or helped make dermatological creams. "When I finish work, I'm so tired I can hardly move."¹⁰⁵ Wittgenstein insisted that "his change of job from Professor of Philosophy at Cambridge to dispensary porter at Guy's Hospital should not be talked about."¹⁰⁵

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