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“Life is Still Stronger Than Death”: The Life-Saving Women Doctors of Auschwitz

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"LIFE IS STILL STRONGER THAN DEATH":
THE LIFE-SAYING WOMEN PRISON
DOCTORS OF AUSCHWITZ

A Thesis Presented to the Graduate Faculty
of Fort Hays State University in
Partial Fulfillment of the Requirements of
the Degree of Master of History

By

Jacqueline Honings

B.A., Fort Hays State University

Date: 7/20/2020

Approved 
Major Professor Approved

Approved 
Dean of the Graduate School

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ABSTRACT

Before World War II, Jewish individuals held prominent employment roles within society. It was not until Adolf Hitler and the German National Socialist Party (Nazi) party came to power in 1933 in Germany that this idea changed. Men and women quickly lost their jobs and status, even the doctors and lawyers. Three Jewish doctors, Lucie Adelsberger, Gisella Perl, and Olga Lengyel found ways to continue their professions once they went to Auschwitz. They became prison doctors, allowing them to help all of those women and children who needed medical treatment because of experiments and diseases in the camp.

Adelsberger, an immunologist in Germany before the war, continued her medical work in Auschwitz. She had to quickly learn gynecology to better serve the women and children in her care. Perl and Lengyel, both from modern day Romania studied gynecology in medical school, which helped them while working under Dr. Josef Mengele.

This thesis provides a unique narrative of these three women, their experiences during World War II, their survival of the Holocaust, and how they helped reinterpret what it meant to be a good physician during and after WWII.

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Also, thanks to my parents, Mark and Pat, my sister, Danielle, my boyfriend Marcus, and of course Harriet, my corgi, for always being there for me. Another big thank you to the graduate teaching assistants that listened to my ideas, concerns, and helping me work through these issues with constant guidance and support. It would not have been possible without TJ Setter, Carly Kauffman, Bryan Hirsh, Trever Leverett, Randy Gonzales, Ana Goodlett, and Jacob Randolf. The jokes, music, and interesting discussions helped me get through the stresses of the day while working on this thesis. You will never know how much I appreciate your love and support!

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Introduction

Before and during the 1930s, Jewish individuals practiced professions such as shopkeepers, bankers, doctors, nurses, professors, soldiers, factory owners and workers, teachers, and they held political office. Of the many Jewish doctors before World War II, Lucie Adelsberger, Gisella Perl, and Olga Lengyel worked on both Jewish and gentile patients in Romania and Germany. These women endured discrimination during their schooling for being both women and Jewish, but that did not discourage them from their dreams of becoming doctors.

At the outbreak of the war, the women continued to practice medicine in their communities until the German National Socialist Party (Nazi) party rounded them up and put them in ghettos. There they helped anyone in need of medical assistance. After transportation to Auschwitz, Adelsberger, Perl, and Lengyel stated that they were doctors in their first roll call in the camp. This allowed them to continuously help the sick. They worked with those suffering from disease, victims of experiments, or the pregnancies in the camp. Though they assisted and witnessed horrible practices in Auschwitz under the direction of Dr. Josef Mengele, the women assisted those in need in the barracks after their long shifts in the infirmaries. Between 1946-1947, Adelsberger, Perl, and Lengyel came to the United States to rebuild their lives and continue their medical practices, although to their surprise, they endured obstacles before they could practice medicine. After the passing of legislation that allowed them to practice medicine again, Adelsberger, Perl, and Lengyel became respected, professional physicians after the war despite their gendered education and training, and dealing with the horrors of medical care in the Auschwitz concentration camp. They helped reinterpret what it meant to be a good physician during and after WWII.

With the Nazi party coming to power in 1933 and Adolf Hitler becoming Chancellor of Germany, the ideas of anti-Semitism grew, making the lives of the Jewish people difficult. Anti-Semitism would only grow as the Nazi party expanded their ideologies and power. Anti-Semitism dates back to the late Roman Empire. The Christian people feared that the Jewish faith would become the dominate world religion. Though the religions have similar beliefs, they differ in ways that the Christians did not agree with. Christians believe that Jesus is the son of God, whereas the Jewish religion believes that Jesus was a prophet. Another strong disagreement between the two is that the Christians believed that the Jewish people were responsible for the crucifixion of Jesus because of their history in blacksmithing and other metalwork.¹

The Nazi party took the ideas of anti-Semitism and created propaganda based on myths and stereotypes, as well as promoting unnecessary violence against Jews throughout Germany.² A main component of the Nazi party values was that they disliked that Jewish people held many influential occupations. On February 28, 1933, the Nazi party passed the Decree for the Protection of People and the Reich. This permitted the regime to arrest and incarcerate any political opponents without a specific charge. The degree also dissolved political organizations that went against the Nazi party and gave the central government the authority to overrule state and local laws and to overthrow individual governments within the country. On April 7, 1933,

¹ "Antisemitism," United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://encyclopedia.ushmm.org/content/en/gallery/antisemitism>. See also Gustav Ichheiser, "The Jews and Antisemitism," *Sociometry* 9, no. 1 (1946): 92-108, Accessed June 24, 2020. Doris L. Bergen, "Catholics, Protestants, and Christian Antisemitism in Nazi Germany," *Central European History* 27, no. 3 (1994): 329-48, Accessed June 24, 2020, www.jstor.org/stable/4546438. Poliakov Léon, *The History of Anti-Semitism: Suicidal Europe, 1870-1933* (Philadelphia: University of Pennsylvania Press, 2003).

² "Antisemitism," United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://encyclopedia.ushmm.org/content/en/gallery/antisemitism>. See also Gustav Ichheiser, "The Jews and Antisemitism," *Sociometry* 9, no. 1 (1946): 92-108, Accessed June 24, 2020. Doris L. Bergen, "Catholics, Protestants, and Christian Antisemitism in Nazi Germany," *Central European History* 27, no. 3 (1994): 329-48, Accessed June 24, 2020, www.jstor.org/stable/4546438. Poliakov Léon, *The History of Anti-Semitism: Suicidal Europe, 1870-1933* (Philadelphia: University of Pennsylvania Press, 2003).

Hitler passed the Civil Service acts, which removed Jews from their civil service jobs and barred them from working in public.³

The discriminatory laws continued with the Law Against Overcrowding in Schools and Universities, passed on April 25, 1933. This law limited the number of Jewish students in public schools. On July 14, 1933, the Law for the Repeal of Naturalization and Recognition of German Citizenship and the Law for the Prevention of Offspring with Hereditary Diseases passed. The naturalization law revoked the citizenship of the German Jews and those deemed “undesirables” by the Nazi party. The law about offspring mandated the forced sterilization of individuals with physical and mental disabilities. These laws took away many of the basic rights of German citizens, Jews and Germans alike. These laws and mandates only continued and became more harsh and discriminatory towards the Jewish people until the forced roundups to the ghettos.⁴

Years before coming to power, Hitler wrote his book *Mein Kampf* while in prison, and published it on July 18, 1925. In *Mein Kampf*, Hitler outlined his racial ideology and ways that he could better Germany as a whole. He saw the history of Germany as a struggle between different races for living space, or “*lebensraum*” in the country. In order to gain the proper space that he felt belonged to the German people, he envisioned a war of conquest in the east. The book also discusses the personal ideologies of Hitler and his belief that Jews were an exceptional evil in the world. Because of the professions of the Jews in Germany, Hitler believed they controlled the economy. After the Treaty of Versailles, which left Germany with large war

³ “Germany: Jewish Population in 1933,” United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://encyclopedia.ushmm.org/content/en/article/germany-jewish-population-in-1933>.

⁴ “Anti-Semitism Legislation 1933-1939,” United States Holocaust Memorial Museum (United States Holocaust Memorial Museum), accessed June 24, 2020, <https://encyclopedia.ushmm.org/content/en/article/antisemitic-legislation-1933-1939>.

reparations to pay, Hitler used the Jews as a scapegoat to redirect people's anger and frustration, rather than at the government.⁵

After Hitler became chancellor of Germany in 1933, he quickly changed the dynamic of the Reichstag by implementing new ways for policies and laws to pass and become enacted. When the Reichstag building was destroyed by fire on February 27, 1933, Hitler took this opportunity to blame the Communists, who he closely associated with the Jews. He persuaded the German people that this was a political act of terror and declared that Germany was in a state of emergency. Hitler easily convinced President Hindenburg that this was a necessary step to gain control of the country. With the state of emergency, German citizens no longer had personal freedoms, as all decisions came from the government.⁶

On March 5, 1933, the results of the elections from members of the Reichstag revealed who held the majority of seats. The Nazi party did not win the majority of the votes, though Hitler tried to ensure the Nazi ideologies were embodied in the government structure. Later that month, Hitler submitted the first part of the Enabling Acts that mandated that laws no longer went through German Parliament for approval. The first set of Enabling Acts passed because the Nazi party arrested Communists and Liberals that held seats in parliament, leaving no opposition to Hitler's plans. A few days later, on March 23, 1933, Hitler introduced the rest of the Enabling Acts. This gave him the power to make laws in Germany for the next four years without consent

⁵ Adolf Hitler, *Mein Kampf* (London: Pimlico, 1994), 20-25.

⁶ "The Reichstag Fire," United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://encyclopedia.ushmm.org/content/en/article/the-reichstag-fire>. See also World Committee for the Victims of German Fascism, and Georgi Dimitrov. *The Reichstag Fire Trial: The Second Brown Book of the Hitler Terror* (New York: H. Fertig, 1969). Paul Kuijpers, *The Reichstag Fire: Who Was Responsible?: the Reichstag Fire in (West-) German Historiography* (Saarbrücken, Germany: LAP, Lambert Academic Publishing, 2010).

of Parliament. Once the rest of the Enabling bills passed, they eliminated all other political parties.⁷

On June 30, 1933, Hitler arrested and shot eighty leaders of the storm troopers in Germany, also referred to as the Night of the Long Knives. Hitler claimed that they opposed his ideologies and legislation. Because of this, Hitler gained more support from the military and they became loyal to him. The military believed Hitler was doing what was best for Germany. With the military backing Hitler and his ideologies, he was able to quickly convince the rest of Germany that his plans were the best for the country's citizens.⁸

The Nazi party began labeling any enemy of the party as a Jew. Nazi ideologues stated that communists, capitalists, and liberals were all a part of the Jewish conspiracy. They depicted the Jews as criminals, deformed, monstrous, and dangerous. These ideologies continue to spread throughout Europe during the early 1930s, allowing for hate and discrimination to become acceptable in German society as well as in many other locations.⁹

In 1933, the Nazi party allowed German doctors to perform legal and forced sterilizations for those the party deemed unfit. Before World War I, many countries supported the idea of eugenics, but did not take it to the extremes displayed by the Nazis. Some eugenicists and scientists hypothesized that when people reproduced, not only could genetic diseases transfer to

⁷ "The Enabling Act," United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://encyclopedia.ushmm.org/content/en/article/the-enabling-act>. See also Alan E. Steinweis and Robert D. Rachlin, *The Law in Nazi Germany Ideology, Opportunism, and the Perversion of Justice* (New York: Berghahn Books, 2015). David G. Williamson, *The Third Reich* (Milton: Taylor and Francis, 2018).

⁸ "The German Military and the Holocaust." United States Holocaust Memorial Museum. United States Holocaust Memorial Museum. Accessed June 18, 2020. <https://encyclopedia.ushmm.org/content/en/article/the-german-military-and-the-holocaust>.

⁹ "Why the Jews: History of Antisemitism," United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://www.ushmm.org/antisemitism/what-is-antisemitism/why-the-jews-history-of-antisemitism>. See also Lucy S. Dawidowicz, *The War against the Jews 1933-1945* (London: Penguin Books, 1990). Alan E. Steinweis, *Studying the Jew: Scholarly Antisemitism in Nazi Germany* (Cambridge: Harvard University Press, 2008).

the child, but also the criminal tendencies and physical characteristics. The Nazi party combined the concept of eugenics and the ideology of social Darwinism, or “survival of the fittest”. The Nazis decided who represented the “perfect” Aryan race and implemented strict racial hygiene laws, such as the Nuremberg Laws, the Law for Protection of German Blood and German Honor, and the Law for the Prevention of Defective Progeny.¹⁰

The first groups to be designated as unfit according to the Nazi party were the mentally and physically disabled. Under the secret plan known as the T4 Program, or the *Tiergartenstrasse 4*, the Nazi party ordered the killing or sterilization of the disabled by lethal injection or poison gas. Those who underwent sterilize procedures during this program largely lived outside of society in institutions and hospitals. Because of the seclusion, the Nazi party could quietly sterilize them with little to no opposition from the German public. The party then continued with other races, such as those of African descent, criminals, and Jews. They then began medical examinations on everyone in the country to help create the master race. On July 14, 1933, Hitler passed the Racial Purity law, both of which dictate who could have children, as well the Law to Prevent Hereditary Diseased Offspring.¹¹

On August 2, 1934, President Hindenburg died, leaving a position for Hitler to assume power, becoming President, Chancellor, and Fuhrer of Germany, thus beginning his dictatorship. Hitler gained the support and trust of the members of the military after the Night of the Long

¹⁰ Gerald Reitlinger, *The Final Solution; the Attempt to Exterminate the Jews of Europe 1939-1945* (London: Vallentine, 1953), 30-48. See also Edwin Black, *War against the Weak: Eugenics and Americas Campaign to Create a Master Race* (Washington, DC: Dialog Press, 2012); Ian Shepherd, *Genocide and Medical Experiments of the Nazi Holocaust* (Salt Lake City, UT: 2005); Jerry Bergman, *Hitler and the Nazi Darwinian Worldview: How the Nazi Eugenic Crusade for a Superior Race Caused the Greatest Holocaust in World History* (Kitchener, Ont.: Joshua Press, 2014); Melvyn Conroy, *Nazi Eugenics - Precursors, Policy, Aftermath* (Ibidem-verlag, 2017); Robert Proctor, *Racial Hygiene: Medicine Under the Nazis* (Cambridge, MA: Harvard University Press, 2002).

¹¹ “Final Solutions: Murderous Racial Hygiene, 1939–1945,” United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://encyclopedia.ushmm.org/content/en/article/final-solutions-murderous-racial-hygiene-1939-1945>.

Knives. He surrounded himself with likeminded individuals that would assist him in his plan for the growth of Germany. One of the most important of the selected leaders was Heinrich Himmler.¹²

Heinrich Himmler was one of the most powerful Nazi leaders during the 1930s and 40s. He earned a reputation for himself through his political speeches, catching Hitler's attention. Himmler's ideologies consisted of "race consciences," the cult of German race, the need for German expansion and settlement, and the struggle against internal enemies of the German nation. With "race consciences" and the cult of the German race, Himmler wanted to save the purity of the German race. Many of these ideas aligned with Hitler's, which led to his appointment as Reichfuhrer of the Schutzstaffel, also known as the SS, in April 1934. Himmler introduced two new functions to the SS while in power; internal security and guardianship over national purity. The SS also held complete control over the concentration camps, where Himmler implemented and oversaw the Final Solution of the Jewish people.¹³

Himmler first visited Auschwitz in March 1941, when the camp held 10,900 prisoners, most of whom were Polish. After the tour of the camp, Himmler created an expansion plan which would include capacity for 30,000 prisoners, and the addition of Birkenau which would house approximately 100,000 prisoners of war. With the forced prison labor already at the camp, Auschwitz I quickly expanded to hold 18,000. By 1943 it held 30,000. The construction of Auschwitz II began in October 1941. With these rapid expansions, Himmler prepared the

¹² Benjamin Carter Hett, *The Death of Democracy: Hitler's Rise to Power* (London: Windmill Books, 2019), 5-15.

¹³ "Heinrich Himmler: Key Dates," United States Holocaust Memorial Museum, United States Holocaust Memorial Museum, Accessed June 18, 2020, <https://encyclopedia.ushmm.org/content/en/article/heinrich-himmler-key-dates>. See also Peter Longerich, *Heinrich Himmler* (Oxford: Oxford University Press, 2013); Richard Worth, *Heinrich Himmler: Murderous Architect of the Holocaust* (Berkeley Heights, NJ: Enslow Pub, 2005).

authorities at Auschwitz for the mass annihilation of the deported European Jews from Germany.¹⁴

In his public speeches, Himmler stated that the slogan above the entrance to Auschwitz, “Arbeit Macht Frei,” or work makes you free. He believed that there were specific character traits an individual should have, such as obedience, diligence, honesty, cleanliness, sobriety, orderliness, truthfulness, and readiness to make sacrifices to Germany.¹⁵

Adolf Eichmann also became an important member in the Nazi party because of his involvement with the deportation of the Jews. Eichmann organized the first mass deportation of 7,000 Jews from Baden and Saarpflaz to Auschwitz. Between 1943-1944, Eichmann deported 440,000 Hungarian Jews to different camps and killing centers in Poland. At the end of the war, it was estimated that Eichmann transferred 1.5 million Jews to extermination camps and sites in Poland.¹⁶

As the number of prisoners continued to increase in Auschwitz, the SS began using the Jewish prisoners for forced labor beginning in the winter of 1941-1942. This seemed paradoxical to the initial purpose running of the camp, as the Jewish prisoners now worked rather than going directly to the gas chambers. As the camp grew, the gas chambers could not keep up with the number of prisoners coming into the camp, so the SS used those healthy enough to do menial tasks, or as skilled labor such as doctors and nurses. The SS adopted labor measures they referred to as “destruction through work.”¹⁷ This meant that prisoners would work as a form of

¹⁴ Yisrael Gutman and Michael Berenbaum, *Anatomy of the Auschwitz Death Camp* (Bloomington: Indiana University Press, 2010), 16-17.

¹⁵ Nikolaus Wachsmann, *KL: A History of the Nazi Concentration Camps* (London: Little Brown, 2016), 100.

¹⁶ Wachsmann, 100.

¹⁷ Yisrael Gutman and Michael Berenbaum, 16-17.

punishment and would endure different terrors such as humiliation, brutal treatment, and physical abuse, as well as completing backbreaking work without even simple tools.¹⁸

Dr. Josef Mengele also had a large impact on the fate of the Jews in Auschwitz-Birkenau. He became a physician at the camp in November of 1943. His responsibilities in the camp included the hospitals and selections. Dr. Mengele became known in the camp as the “Angel of Death” because of his cruel demeanor. He performed experiments on twins, dwarfs, and pregnant women for his own personal research. If he was curious about anything he attempted it through experimentation. He used identical and fraternal twins to try and trace genetic origins of various diseases. Mengele would then turn to other sets of twins and perform pain experiments on one twin and study how the effected and unaffected twin reacted to the other. On pregnant women, he would abort unborn children both in early and late phases of the pregnancy, experiment on the mother and child, and send them to the crematorium after he gathered the desired information.¹⁹

Holocaust survivor Robert Jay Lifton wrote about the Nazi doctors and the experiments in Auschwitz in his book *The Nazi Doctors* stating, “When we think of the crimes of the Nazi doctors, what comes to mind are their cruel and sometimes fatal experiments... Yet when we turn to the Nazi doctor’s role in Auschwitz, it was not the experiments that were most significant. Rather, it was his participation in the killing process- indeed his supervision of Auschwitz mass murder from beginning to end.”²⁰ Lifton emphasizes the atrocities of the experiments and

¹⁸ Yisrael Gutman and Michael Berenbaum, 16-17.

¹⁹ Wachsmann, 436. See also Francis R. Nicosia, and Jonathan Huener, *Medicine and Medical Ethics in Nazi Germany: Origins, Practices, Legacies* (New York: Berghahn Books, 2002); Paul Weindling, *Victims and Survivors of Nazi Human Experiments: Science and Suffering in the Holocaust*, 2014, http://public.ebookcentral.proquest.com/choice/publicfullrecord.aspx?p=1868782_0; Eva Mozes Kor and Lisa Rojany-Buccieri, *Surviving the Angel of Death: The Story of a Mengele Twin in Auschwitz* (Terre Haute, IN: Tanglewood, 2012); Lucette Lagnado and Sheila Cohn Dekel, *Children of the Flames: Dr. Josef Mengele and the Untold Story of the Twins of Auschwitz* (New York: Penguin Books, 1992).

²⁰ Robert Jay Lifton, *The Nazi Doctors: Medical Killing and Psychology of Genocide* (New York, 1989), 4.

showed that the prison doctors working with the Nazi doctors had no choice but to assist if they wanted to survive themselves.

Unfortunately, Dr. Mengele did not complete these experiments alone, he used the forced assistance of the Jewish prison doctors. Though many of the prison doctors did not want to discuss their experiences working under Dr. Mengele, some shared vital information that reflects the work they completed in order to survive. If Mengele asked a prison doctor to complete a task and they refused, he sent the doctor to their death. These prisoners feared for their lives, as any resistance to orders led to their immediate deaths. The participation in these experiments was not a choice. After the war, the prison doctors continuously had to defend their actions and participation. The public saw the Nazis who supervised and also participated in experiments receive punishments as having committed crimes against humanity, whereas the prison doctors did not.

Historiography

Danuta Czech's *Auschwitz Chronicle: 1939-1945* provides vital information for cross-referencing specific details on given days mentioned by Adelsberger, Perl, and Lengyel. Czech examines the Auschwitz from its opening in September 1939 through liberation in 1945, as well as the reintroduction of the Jewish population into their homes. The women doctors often provide recollections of the date certain events happened in their own autobiographies. Czech's research supports the accuracy of the women doctors' work, and provides more detail on the communication network within the camp itself. Adelsberger commented on food rations not being delivered on a particular date. Czech's *Auschwitz Chronicle* does not include a major event that would have factored into this particular hardship, demonstrating that the guards simply wanted to make the prisoners suffer. Lengyel's resistance movement activities included counting

the number of prisoners coming into the camp and how many new arrivals immediately went to the gas chambers and crematorium. Comparing Lengyel's recollection with Czech's research, establishes the credibility and accuracy of the women doctor's person accounts.²¹

In Robert Proctor's *Racial Hygiene: Medicine under the Nazis*, Proctor looks into the different ideas of the eugenics movement in Nazi Germany. He explores the beginning of the movement from the perspective of the Americans and connects them to the ideas of the Nazis. Proctor also looks into the ideas of the different targeted groups in Germany including Jews, homosexuals, and any other groups or persons the Nazis felt were inferior. Proctor examines the facts without bias. He also looks into some of the leading Nazi doctors such as Josef Mengele and his work with the Darwinistic views. The idea of racial hygiene becomes important in understanding the mindset of the Nazi doctors in concentration camps such as Auschwitz. Their blatant disregard for the lives of those deemed inferior are explicitly seen in the experiments and general treatment of prisoners. Dr. Mengele experimented on the lives of pregnant women, children, and newborns. Dr. Mengele used the forced labor of the prison doctors to assist in his research and further "enhance" the study of eugenics in Germany.²²

Beverly Chalmers' *Birth, Sex and Abuse: Women's Voices Under Nazi Rule* provides different voices of Jewish and non-Jewish women living under the Nazi regime. This book is a combination of women's history, the Holocaust, medicine, social sciences, and first-hand accounts of what happened. It begins by examining the changing laws of the Nazi regime under Adolf Hitler and the start of deportations from the Jewish ghettos. Chalmers then examines some

²¹ Danute Czech, *Auschwitz Chronicles: 1939-1945* (New York: Henry Holt & Co; Reprint edition, 1997), 20-45.

²² Robert Proctor, *Racial Hygiene: Medicine Under the Nazis* (Cambridge, MA: Harvard University Press, 2002), 31-43. For more on eugenics see: Susan D. Bachrach and Dieter Kuntz, *Deadly Medicine: Creating the Master Race* (Washington, D.C.: United States Holocaust Memorial Museum, 2008); Stefan Kuhl, *Nazi Connection Eugenics, American Racism, and German National Socialism* (Cary: Oxford University Press, USA, 2014); Phillippa Levine, *Eugenics: A Very Short Introduction* (New York, NY: Oxford University Press, 2017).

of the quotes from Adelsberger's, Perl's, and Lengyel's autobiographies. Chalmers also details difficult subjects such as sexual humiliation, nakedness, and rape. The testimonies provide insight into what the women saw and experienced while in Auschwitz and other concentration camps. These additional testimonies about pregnancy and abuse in the camps provides information that add to the stories of the women prison doctors as they saw and cared for each of their patients.²³

The Essence of Survival: How Jewish Doctors Survived Auschwitz by Ross Halpin is one of the few books that examines the lives of Adelsberger and Perl. Halpin provides biographical information that the autobiographies lack. Halpin also looks into the idea of surviving within the camp by studying the individual characteristics of each doctor. The stories of other prison doctors, including men, also helps develop the story sexual exploitation, experimentation, and overall humiliation the prisoners in Auschwitz endured. Halpin then has an analysis section of his book where he looks into the different characteristics of the prison doctors outlined in the book, such as of Adelsberger and Perl. He discusses essential traits such as resilience, hardiness, empathy, and determination. Though he does not include the story of Lengyel, the outline that Halpin provides insight that can be applied to her story. He establishes that the prison doctors that worked in Auschwitz developed a caring and compassionate approach, despite the hardships and horrors that surrounded them.²⁴

²³ Beverly Chalmers, *Birth, Sex and Abuse: Women's Voices Under Nazi Rule* (Guildford: Grosvenor House Publ., 2015), 10-34. For more on women in the Holocaust see: Elizabeth R. Baer, *Experience and Expression: Women, the Nazis, and the Holocaust* (Detroit, IL: Wayne State University, 2003); Isabelle Choko, *Stolen Youth: Five Women's Survival in the Holocaust* (Jerusalem: Yad Vashem, 2005); Agnes Grunwald-Spier, *Womens Experiences in the Holocaust: In Their Own Words* (Stroud: Amberley Publishing, 2018); Dāliyyā Ôfer, *Women in the Holocaust* (Yale University, 2010); Carol Rittnerand John K. Roth, *Different Voices: Women and the Holocaust* (St. Paul, MN: Paragon House, 1996).

²⁴ Ross Halpin, *The Essence of Survival: Jewish Doctors in Auschwitz* (Darlinghurst, N.S.W.: Sydney Jewish Museum, 2014), 23-44.

In Sonja M. Hedgepeth and Rochelle G Saidel's, *Sexual Violence Against Jewish Women during the Holocaust*, they examine the lives of all women under the Nazi rule within the concentration camps. They use primary sources and accounts to discuss physical violence, rape, and other sexual exploitation of the women. These women did everything in their power to stay alive, even if the soldiers used them for their personal desire. Women would work together to support each other during the most difficult times after exploitation, sexual humiliation, and experimentation. Hedgepeth and Saidel provide insight into the situation that Adelsberger, Perl, and Lengyel would have dealt with on a daily basis. The women prison doctors used their limited resources to help others survive in the camp, even if they were not medical remedies.²⁵

Lucie Adelsberger wrote her autobiography, *Auschwitz: A Doctor's Story*, about her experience working as a doctor in Auschwitz. Adelsberger worked under the watchful eye of Dr. Mengele, primarily helping women and children, some suffering from diseases such as typhus and others coming to her after experiments. Adelsberger worked alongside a few other women doctors, who were also overseen by Dr. Mengele. The accounts Adelsberger presents allows the audience to understand her essential work for survival. She also attempts to show readers that she genuinely cared for her patients, by telling stories about the young women she grew close with while treating them.²⁶

Gisella Perl wrote her autobiography *I Was a Doctor in Auschwitz* to detail her life before, during, and after World War II. She also worked under Dr. Joseph Mengele. Describing her work for the people in the concentration camps, as well as the conditions that the prisoners, including herself, lived in. Perl helped women and children in her barrack after her long days in

²⁵ Sonja M. Hedgepeth and Rochelle G. Saidel, *Sexual Violence Against Jewish Women During the Holocaust* (Waltham, MA: Brandeis University Press, 2010), 23-44.

²⁶ Lucie Adelsberger, *Auschwitz: A Doctors Story* (Boston: Northeastern University Press Imprint, 1995), 15-65.

the camp infirmary. Though she assisted in some horrible experiments and treatments under Dr. Mengele, she always attempted to correct her actions away from the watchful eye of the SS. She later describes her life in New York City, and the difficulties of finding a job in the post-war United States by a female Jewish physician.²⁷

In Olga Lengyel's autobiography, *Five Chimneys*, she recalls her life in Auschwitz and Birkenau. She arrived at Auschwitz with her husband and two children, but would ultimately be the only surviving family member. Lengyel secured herself a job in the infirmary working under Dr. Mengele and the other women doctors in the camp. The atrocities she saw in the infirmary only gave her strength to survive and to save as many people as she good. Lengyel compiled a day-to-day log that the prison doctors that worked in Auschwitz developed a caring and compassionate approach, despite the hardship and horror that surrounded them. She records of her experiences, showing the horrible events that took place in the camps. The work that Lengyel performed in the camp allows for a cross examination of accounts and records of daily work and events, establishing the accuracy of Lengyel's personal stories.²⁸

This thesis examines the experiences of three women prison doctors and their efforts after the war to practice medicine and tell their stories in the United States. The closest published comparison to this work is John Heminway's *In Full Flight: One Woman's Quest for Atonement in Africa*, published in 2019. He studied the post-war service of Dr. Anne Spoerry in rural Kenya. Though locals knew her as "Mama Daktari" or "Mother Doctor", she had very similar experiences to Adelsberger, Perl, and Lengyel while a prison doctor in a Nazi concentration camp. Where this thesis offers a look at how three women fought for their reputations, continued

²⁷ Gisella Perl, *I Was a Doctor in Auschwitz* (North Stratford, NH: Ayer, 2010), 12-45.

²⁸ Olga Lengyel, *Five Chimneys: A Woman Survivor's True Story of Auschwitz* (Chicago: Academy Chicago Publishers, 1947), 9-54.

presence in the United States, and ability to practice medicine to help others, Heminway provides an example of a female prison doctor who turned away from the modern world to atone for her past actions. Sperry, Adelsberger, Perl, and Lengyel all wanted to rewrite their personal stories after the war. Not to hide what they had done, but to help the world understand that to limit suffering or save lives they often had to make difficult and horrific decisions that often ended lives. They all believed that despite their past actions, they could help more people than they hurt by continuing to offer their medical skills to those in the present.²⁹

Of the many Jewish prison doctors, Adelsberger, Perl, and Lengyel wrote autobiographies to prove to the world that they truly cared about the individuals they treated and did not willingly harm anyone. These stories shed light on some of the horrific medical experiments and medical practices inside of Auschwitz. Though the women were careful about what they wrote, not always discussing detailed information about their medical work, they did write about their surroundings and the sights, smells, and fears that the camp brought. Scholars have not detailed the accounts of these women together as having been working together at the same time in Auschwitz. It is difficult to put the women together unless one cross analyzes all three of the women.

In Auschwitz, the medical training that the women learned in medical school were put to the test by Mengele. He would tell the women to assist the prisoners suffering from various diseases without proper medicine or supplies. The women became creative in the different ways that they would assist the other prisoners in the camps. These women worked long and tiring hours in the

²⁹ John Heminway, *In Full Flight: One Woman's Quest for Atonement in Africa* (New York: Vintage Press, 2019), 5-14. An example of a male prison doctors attempt to make amends after the war is Jan Vilcek's *Love and Science: A Memoir*, published in 2016. For another example of a Jewish prison doctor, see Miklos Nyiszli, Tibere Kremer, et al. *Auschwitz: A Doctor's Eyewitness Account* (New York: Arcade Press, 2011).

camp hospitals, but they did not let that bring their morale down. They would return to the barracks after their shifts and help those in need in the barracks.

Their medical work went far beyond the camp hospitals. They instructed women when they should go to the hospitals for help, though it risked their lives, and they advised others not to. Those prisoners admitted to the hospitals had a higher chance of selection for the gas chambers than if they attempted to work in the camps. Adelsberger, Perl, and Lengyel used their best judgement so they could assist as many women in their survival as possible. According to historians Ota Kraus and Erich Kulka estimate that these three women saved the lives of thousands inside the camp. They also state that these three prison doctors deceived the SS men by giving them false diagnoses and examinations while keeping the true diagnosis of infectious and deadly diseases a secret.³⁰

Being a physician in Auschwitz was mentally and physically exhausting. The long hours and strenuous work of seeing as many patients as possible took a toll on the women. Many of the female physicians, such as Adelsberger, Perl, and Lengyel, took additional time out of their days and continued working in the barracks. The women physicians would risk their lives by taking what little bit of cream and medicine that was available and brought it to those in need. The women prison doctors performed abortions after hours, having to care for the new mother, while having to end the lives of the newborn. Emotionally this was difficult for many of the women, as they had children of their own, but knew it was in the best interest for survival. When there were no other medical solutions or care that the physicians could provide, the women did not give up

³⁰ Ota Kraus and Erich Kulka, *The Death Factory in Auschwitz* (Jerusalem, 1960), 8. See also Michael A. Grodin, *Jewish Medical Resistance in the Holocaust* (New York: Berghahn Books, 2017); Albert Haas, *The Doctor and the Damned* (New-York: Avon Books, 1985); Sima Vaisman, *A Jewish Doctor in Auschwitz: The Testimony of Sima Vaisman* (Hoboken, NJ: Melville House Publishing, 2005); Mark Dvorjetski, "The Jewish Medical Resistance and Nazi Criminal Medicine During the Disastrous Period," (A Lecture at the World Jewish Medical Congress in Jerusalem on August 19, 1952).

hope, rather they attempted to comfort the suffering women with words of kindness and encouragement. With the hope that the women prison physicians provided, they lifted the morale inside the barracks, showing that even those that did not have a medical license could try to help and support those suffering around them.

After the war, the women moved to the United States to build a new life for themselves. During their careers post-World War II, Adelsberger, Perl, and Lengyel went on to work in gynecology and immunology. They wanted to continue their medical practices by helping the most vulnerable people. The experiences of these three women while at Auschwitz helped them to become better doctors. They had learned how to overcome daily obstacles, how to compassionately treat patients, and how to care for themselves both mentally and physically. They also overcame the horrors of the camps, and both in spite of and because of their medical experiences at Auschwitz, became conscientious and dedicated doctors to their future patients.

Scholars such as Halpin discuss two of the three women, Adelsberger and Perl, in his book *The Essence of Survival How Jewish Doctors Survived Auschwitz*. In Halpin's other book, *Jewish Doctors and the Holocaust the Anatomy of Survival*, he briefly mentions Lengyel but does not quite put her in the same place and same time as the others. However, it is detailed in both the autobiographies of Perl and Lengyel that they worked directly together in certain situations, especially in the care of Irme Grese's abortion.

Those scholars that worked with the materials of Adelsberger, Perl, and Lengyel, seem to work with their individual autobiographies. They do not seem to connect any of the dots of them working together or alongside one another. Scholars also do not look into the lives after the war. It seems that the work of the historians stops when their autobiographies end. They do not look into the work post-war in the United States or for Lengyel, Cuba. The information post-war

brings a new meaning to the stories of the women. The publicity from the Nuremberg Trials on the Nazi doctors made it almost impossible for the women to get jobs in the United States, as many doctors and other professionals believed that the woman should have been tried for crimes against humanity.

Having the additional documents from letters between Perl and her lawyer, Francis Sharpio, bring light onto the issue that Perl truly cared for her patients. She wanted to continue helping people and would do anything in her power to make her dream come true. The letter from Eleanor Roosevelt showed that the First Lady believed in the work of Perl and knew that she and other survivors could make a difference in the medical community. With the help of Congressman Bloom and Sharpio working together, they made it possible for not just Perl to continue her work in the medical field, but allowed all physicians before the war to practice in the United States.

Chapters

Chapter One details the method of medical education in Europe and the United States between the mid-nineteenth century to the mid-twentieth century. The educational paths of Lucie Adelsberger, Gisella Perl, and Olga Lengyel in Europe show their hardships and the hurdles they overcame to become medical professionals. This chapter also examines the journey of their medical work up until their different journeys to Auschwitz.

Chapter Two discusses the selection and separation process upon arrival in Auschwitz. After selections, the women received their work assignments in the camp infirmary, where they administered care to mostly women and children, in particular pregnant women and the victims of experimentation by Dr. Josef Mengele.

Chapter Three explores the individual work of the women and the unique types of care they gave under the horrific circumstances. Their creative ways of assisting the women and children put their medical education to the test, as they did not have medicine or sterilized tools to help those in need.

The final chapter explains the trials and tribulations of the women post-war when they came to the United States between 1946-1947. They continuously fought to help politicians and the public understand that they were compassionate to each patient they treated while in Auschwitz, not murderers and criminals who assisted the Nazi's, as many in the United States believed.

Chapter 1: Pre-War Lives of Jewish Doctors

Medical Education between the Late 1800s to Early 1900s

During the 1800s, women endured significant discrimination at colleges and universities. Men controlled the medical field and most forms of medical training. In the scientific fields of medicine and research, men commonly stressed the physical and psychological tolls of the work, as being demanding and strenuous, leaving little to no time for their families at home. Women entering the medical field faced difficulties during admission as well as throughout their clinical experiences. Women dealt with constant discrimination and judgement for enrolling at a university for a male dominated field of study. Male doctors and scientists promoted the idea that women could not compete with the men for similar positions.¹

Women's education varied in Europe and the United States, but they both encountered similar adversities. In most instances, they completed classroom education and some clinical work before beginning their career. However, women struggled with discrimination in the classrooms, as some men felt women did not have the qualifications and skills compared to their male counterparts. When looking at the way women approached their university education, the women attending colleges in the United States became vocal about the discrimination and the struggles they faced, whereas the European women endured hardships with little public expression of their experience.²

¹ Nancy Tuana, *The Less Noble Sex: Scientific, Religious, and Philosophical Conceptions of Woman's Nature* (Cambridge: International Society for Science and Religion, 2007), 164. See also Carolyn Skinner, *Women Physicians and Professional Ethos in Nineteenth-Century America* (Carbondale: Southern Illinois University Press, 2014). Burton J. Bledstein, *The Culture of Professionalism: The Middle Class and the Development of Higher Education in America* (New York: Norton, 1978). Judith Walzer Leavitt, *Women and Health in America: Historical Readings* (Madison, WI: University of Wisconsin Press, 1999).

² Suzanne Kahn. "How Education Helped American Women Make History." *Time*, Time, March 6, 2020, <https://time.com/5797922/women-higher-education-history/>. See also Harriet Pass Freidenreich, "Jewish Women Physicians in Central Europe in the Early Twentieth Century," *Contemporary Jewry* 17, no. 1 (January 1996): pp. 79-105, <https://doi.org/10.1007/bf02965407>. Steven J Peitzman, *A New and Untried Course: Women's Medical College and Medical College of Pennsylvania* (New Brunswick, NJ: Rutgers University, 2000). Regina Markell.

In 1862, the Morrill Act provided American women greater access to higher education. This act gave states federal land to form public colleges. As a part of this bill, the founding colleges had to take into consideration the profit margin for the institutions, since single gender schools did not produce as much revenue, but would allow for less discrimination in the classrooms for women. Between 1861 and 1880, of the thirty-four public colleges created, seventy-one percent accepted women into their college courses. With the growth of higher education also came the growth of secondary education. More women began attending schools to gain access to more professional jobs, such as teaching and the medical field. The expansion of secondary schools allowed women to fill many of the teaching positions, resulting in more women attending the universities so they could properly teach children. By 1880, women made up one third of the American students enrolled in universities.³

Men typically ran private medical practices, completed surgeries, and conducted medical examinations, while women worked as midwives, wet nurses, and herbalists. When entering into the profession, women physicians opposed numerous claims from male physicians. Many male physicians believed that women did not have the physical or temperamental strength that the field required for success. Men did not want the women to challenge the social hierarchy of the world by moving into a male dominated field. Women fought their way into medical schools with the men, as they not only knew they could do the same work, but the women felt they used the idea of female delicacy to their advantage through the interaction with their patients. Women

Morantz-Sanchez, *Conduct Unbecoming a Woman: Medicine on Trial in Turn-of-the-Century Brooklyn* (New York: Oxford University Press, 2000), 4-10.

³ Suzanne Kahn. "How Education Helped American Women Make History," *Time*, Time, March 6, 2020, <https://time.com/5797922/women-higher-education-history/>.

wanted to prove to the world that they were not frail and they could perform the same grueling tasks as a man in the workplace.⁴

An early example of women entering medical training in the United States came with the opening of the Woman's Medical College of Pennsylvania in 1850. Before the opening of this institution, women read both American and European medical journals, written by men, to gain knowledge on diseases and groundbreaking surgeries. Women attending the Woman's Medical College of Pennsylvania spent three years studying surgical practices and attended weekly surgical clinics. This all-women's college gave its students a nurturing environment that would tailor to the needs of the first generation of women physicians.⁵

An important issue that the women faced was the limited accessibility to train with other female surgeons that could serve as mentors. As a result, the Woman's Medical College brought in female guest lecturers from Europe who discussed the newest medical practices in Europe, demonstrated surgical techniques, and addressed the adversity that the women had to overcome. The aspiring female surgeons worked as hard as they could in lectures, demonstrations, dissections, and clinical experiences to gain the attention of the professors of surgery for similar apprenticeships to their male counterparts. It was not until after their schooling these same women began publishing their own articles, demonstrating their success in the medical field.⁶

Some of the published work by practicing doctors discussed the patient cases that they saw during their gynecological practices. Adelsberger, Perl, and Lengyel would most likely have studied cases in order to gain knowledge that would not have been taught in the European

⁴ Carolyn Skinner, *Women Physicians and Professional Ethos in Nineteenth-Century America* (Carbondale, IL: Southern Illinois Univ. Press, 2014), 32-38.

⁵ Regina Markell Morantz-Sanchez, *Conduct Unbecoming a Woman: Medicine on Trial in Turn-of-the-Century Brooklyn* (New York: Oxford University Press, 2000), 64.

⁶ Regina Markell Morantz-Sanchez, 67.

classrooms in their fields of immunology and gynecology. These articles by physicians would have given insight to procedures and outcomes of the different cases.

While American women worked for equal access to medical training and fields, European women encountered some distinct differences in medical education. European women focused on classroom work rather than being required to attend clinical training. Preparing students for the medical field was not a responsibility of the professors until later in the twentieth century. Before the 1920s, students had few mandatory classes before clinical work. Unlike American medical students, European students worked at their own speed through the curriculum and laboratories.⁷

Eugene Clusters and Olle Ten Cate, modern medical journalists, examined the differences in European medical education from the medieval to the twentieth century, particularly in the Netherlands. Clusters and Cate state that Dutch women would have encountered much of the same medical schooling and training as that of women in Germany and Central Europe. Clusters and Cate also make note that many of the practices and procedures were similar in the United States and in Europe, but there were also important differences in the education. In the Netherlands, apprenticeships lacked details or proscribed objectives and examinations. The students logged their hours of observations in the clinics, typically with limited amounts of hands-on experience with patients.⁸

Adelsberger, Perl, and Lengyel would have gone through many of the same practices and procedures as women in the Netherlands. Historian, Bernard Steinberg, states that Jewish women took their schooling seriously, as education was an important part of their culture. Non- Jewish

⁷ Eugène J.F.M. Custers, and Olle Ten Cate, "The History of Medical Education in Europe and the United States, With Respect to Time and Proficiency," *Academic Medicine* 93, no. 3S (March 2018): 549–554, <https://doi.org/10.1097/acm.0000000000002079>.

⁸ Custers and Cate, 549–554.

women did not always see their opportunities at the universities as being special or as important. The Jewish women saw it as a duty to their families and their religion to succeed in their field of study.⁹

Before 1918, many of the Jewish medical students in Central Europe came from middle to upper-middle class families, as that social group tended to put a premium on education. However, the younger cohorts educated during the interwar years came from middle to lower middle class families. Many women did not consider nursing as a career post-World War I, though many of them did serve as nurses during the war. The younger group of women strived for the same positions and titles as the men. These women held a passion for surgery and medical research that they could not access from the nursing field.¹⁰ Post World War II, more women began working in the medical field. With many unable to practice during the war, they did not let this hinder their career path. After the war, Gisella Perl and Olga Lengyel wanted to help women have healthy and successful births, whereas Lucie Adelsberger wanted to make a difference in the field of immunology by helping those with allergies.

To gain acceptance by their professors and peers at the universities, women needed to surmount a variety of educational obstacles, as well as overcoming social barriers, just as women did in the United States. Jewish women in Europe entering medical school before 1933 encountered greater discrimination, not because of their educational paths, but because of their religious beliefs. Many of these religious based discriminations came from the ideas of anti-Semitism that Europeans heard from Hitler's speeches and his supporters. Female medical students also endured ridicule from professors during lectures and oral exams. Male students

⁹ Bernard Steinberg, "Jewish Education in Great Britain during World War II," *Jewish Social Studies* 29, no. 1 (1967): 27-63, Accessed March 26, 2020. www.jstor.org/stable/4466311.

¹⁰ Bernard Steinberg, "Jewish Education in Great Britain during World War II.": 32.

often heckled the women because they did not accept the women as colleagues, or in the professor's cases, as students.¹¹

These women encountered more anti-Semitic discrimination after receiving their degrees and going through the employment search. Many had difficulty finding internships, research assistantships, and residencies. If the women did earn an opportunity, they often only received unpaid positions. Though they held the same educational background as the men, female physicians did not hold prestigious positions in medicine and worked in less successful practices. During World War I, many women received positions in hospitals, clinics, and other medical practices, not because of their skills, but because men went to war and left positions vacant.¹²

Despite the difficulties based on gender and religion, female doctors had growing influence in Central Europe. At the University of Vienna, Jewish women accounted for approximately forty percent of female medical students after 1919. At many of the other universities, Jewish women represented a larger proportion of medical students in the population by gender than their male counterparts.¹³

Perl, Adelsberger, and Lengyel experienced many of these same conditions of education and treatment by others. These three women in particular used the hardships they faced during their education and training, as well as their experiences in the Nazi concentration camps, to their advantage later in their medical careers. They took the experience of working in different parts of the medical field and adapted their skills and procedures for each individual case. The caring nature of these three women assisted others in times patients seemed most vulnerable. Though

¹¹ Bernard Steinberg, "Jewish Education in Great Britain during World War II.": 8.

¹² Bernard Steinberg, "Jewish Education in Great Britain during World War II.": 11.

¹³ Bernard Steinberg, "Jewish Education in Great Britain during World War II.": 22.

each attended different colleges and grew up with different lifestyles and backgrounds, the women performed similar incredible work under the horrific circumstances of the Holocaust.

Dr. Lucie Adelsberger

Lucie Adelsberger was born on April 12, 1895 in Nuremberg, Germany. Adelsberger's father was a middle-class wine merchant, and her mother stayed at home with the children. Adelsberger received a similar education as other European women at the time. For the first years of her schooling, Adelsberger attended Stadtische Tochterschule, an all-female public school in Nuremberg, Germany. After graduating in 1910, she attended Privat-Real-Gymnasium Dr. Uhlemayr for the next four years. In 1914, she received her medical degree from the University of Erlangen-Nuremberg.¹⁴

Her first medical job was in 1919, working as a medical assistant at Cnoph'sche Kinderklinik, in Nuremberg, Germany, in the neo-natal care unit. This was a typical job for a woman in the medical field at the time. In 1921, Adelsberger joined the pediatric and internal medicine department at the municipal hospital in Berlin Friedrichshain. As she gained experience, she decided to follow her passion into immunology, where she then worked for the next twenty years. Around 1930, she transferred hospitals to the Robert Koch Institute because it provided better opportunities for her career.¹⁵

Because of her advanced work in the field, she traveled to the United States for a conference in 1933. During this trip, her reputation prompted officials at Harvard University to offer her a tenured position at their medical facility. She kindly rejected the offer because her

¹⁴ Ross Halpin, *Jewish Doctor and the Holocaust: The Anatomy of Survival* (Jerusalem: De Gruyter Oldenbourg, 2018), 111.

¹⁵ Halpin, *Jewish Doctors*, 111.

mother could not receive a visa to enter the United States. Shortly after Adelsberger returned to Berlin, her mother grew ill, leaving Adelsberger no choice but to limit her work hours and take care of her mother's needs. With the Nazi regime growing stronger in 1933, many hospitals and medical facilities began firing the Jewish workers. In March of that year, the Robert Koch Institute in Berlin let Adelsberger go.¹⁶

From this point on, Adelsberger worked in Berlin as a basic care provider for the Jewish community. After 1938, Jewish doctors could no longer use their official titles. Additional Nazi policies in the 1930s meant that she could only treat other Jewish patients if they came to her for assistance. One recorded example of Adelsberger's work from November 20, 1940, details how she wrote a prescription to one of the most well-known female Jewish athletes in Berlin, Helen Nathan. Nathan was a 100-meter dash champion and member of the Jewish Bar Kochba Sports Club in Berlin. She went to Adelsberger for barbiturate and topical shampoo. This specialized prescription shampoo demonstrated that there was an allergy to other shampoo, so Nathan chose to work with an immunologist to ensure her health, selecting Adelsberger because of her credibility in the field.¹⁷

In 1943, the Jewish roundup in Berlin would bring Adelsberger's work to a stop. She could no longer practice, as she and the others in the detention camp waited for the Nazi's next move. Adelsberger remained positive as the world she once knew drastically changed. She knew that she would have to stay strong for those around her and the other young women that looked up to her as she had already beat many odds to become a woman physician.

¹⁶ Halpin, *Jewish Doctors*, 111.; Lucie Adelsberger, "Medical Observations in Auschwitz Concentration Camp," *The Lancet* 247, no. 6392 (March 2, 1946): 317.

¹⁷ Paul Saenger, "Jewish Pediatricians in Nazi Germany: Victims of Persecution," *The Israel Medical Association Journal: IMAJ*, June 2006, 324-328. Nathan turned the prescription in after the war, and donated the document to the Museum of Jewish Heritage in New York.

Dr. Gisella Perl

Dr. Gisella Perl, born in 1907 in Maramaros, Sziget, Romania (modern day Hungary) showed intellectual promise and drive from a young age. Also known as “Giske,” she lived with her parents Phrida and Moris, and her six brothers and sisters. Perl’s childhood revolved around family, education, and religion, as she and her brothers and sister learned the Torah for four to five hours a day. At the age of sixteen, Perl became the only woman, and only Jew, graduating from her secondary school. She was also first in her class her final year.¹⁸

Her curiosity about women’s health inspired her to attend medical school. However, her father, Moris, refused to pay for the schooling, or even grant her permission. He feared that she would “lose her faith and break away from Judaism.” According to an interview with Perl, after long hours of praying about the situation, she approached her father a final time in late 1929 or early 1930, this time with a copy of the Torah in hand stating, “I swear on this book that wherever life will take me, under whatever circumstances, I shall always remain a good, true Jew.”¹⁹

Her promise changed her father’s mind. He allowed her to enroll in medical school, where she focused her studies on gynecology. Perl would have attended four years of schooling before being able to practice on her own. Her sister Helen followed Perl’s example, attending and graduating medical school in the mid-1930s. Perl kept her promise to her father, by constantly helping others, even in the difficult times ahead.²⁰

¹⁸ Ross Halpin, *Essence of Survival: Jewish Doctors in Auschwitz*, (Darlinghurst, N.S.W: Sydney Jewish Museum, 2014), 80. According to Perl’s grandson, Giora Yardeni, Perl was born in 1892. It is said that she used to fake her age to others, but her passport stated the 1892 birth year. Nadine Brozan and other historians put her birth year anywhere between 1900 and 1910, as she continued to give different birth years to others.

¹⁹ Nadine Brozan, “Out of Death, A Zest for Life,” *The New York Times*, November 15, 1982, accessed March 17, 2018, <http://www.nytimes.com/1982/11/15/style/out-of-death-a-zest-for-life.html>. The exact year that Perl approached her father is not known. However, what is known is that medical school took approximately three to four years for the women, which included their clinical and apprenticeships.

²⁰ Halpin, *Essence of Survival*, 80.

When Perl graduated, she began working as a gynecologist in her hometown of Maramaros, Sziget. As a way to honor her promise of being a good Jew while practicing medicine, Perl bought her father a *Tanakh*, or a canon of the Hebrew Bible, and personally inscribed it with her promise to him. Perl later explained that the *Tanakh* was so important to her father that he would have brought it with him to Auschwitz and would have kept it with him when he entered the gas chambers.²¹

Perl's medical degree and gynecological background would not only save her life, but thousands of others during the Holocaust. Before the war, Perl practiced in a traditional doctor's office alongside her husband, Dr. Ephraim Krauss. Perl typically saw female patients, most being pregnant or having other gynecological issues. Perl and her husband practiced medicine until 1944 when the Nazis invaded Romania, sending the Jewish population to the ghetto in their town and then on to concentration camps.²²

Once settled in the Sziget ghetto, Perl's medical knowledge and skills, as well as her pledge to help others, became increasingly important. On a cold December evening, Perl recalled her encounter with Elizabeth, a sixteen-year-old rape victim of a man serving in the Gestapo. A townswoman came to Perl in the middle of the night with Elizabeth bleeding from the rape, and in desperate need of medical attention. Perl reduced the bleeding to a minimum and told her that she was medically safe to return to the town; however, Elizabeth responded, "Don't make me go back... I would rather die than go back."²³

²¹ Halpin, *Essence of Survival*, 80-81. It would have been likely that the SS took the *Tanakh* before sending Perl's father to the crematorium, as the SS took all possessions from the prisoners and put them in *Canada*, the place where the Nazis stored Jewish items in Auschwitz, or took them for themselves.

²² Anne S Reamey, "Gisella Perl: Angel and Abortionist in the Auschwitz Death Camp," The Holocaust History Project, November 17, 2009, <https://phdn.org/archives/holocaust-history.org/auschwitz/gisella-perl/>.

²³ Gisella Perl, *I Was a Doctor in Auschwitz* (North Stratford, NH: Ayer, 2010), 22. Perl did not give the year on this, as she wanted to follow professional confidentiality not give out information about a patient in her care. She did not want readers to know about the experience of Elizabeth, so she also changed her name in the book to keep her protected.

Perl then took Elizabeth into her home and gave her a place to stay. Perl educated Elizabeth in cooking and household duties and made her the home maid. However, Elizabeth also studied with Perl's son, Imre, in subjects such as Latin and geography. Perl's focus on education for a teenager that was not her child stressed the Jewish importance of education. Every child's education helped the community in which they lived. With a strong educational background, it was hoped that Imre and Elizabeth had a platform to make a name for themselves after their higher education.²⁴

There is very little information about Imre mentioned in Perl's autobiography, other than he and Elizabeth were close in age, as he was born in 1922. The exact year of Elizabeth's birth is unknown, but was likely around 1928 if she was sixteen in 1944. This means that the two of them had similar experiences in school and growing up under the Nazi regime. Though Perl did not permit Elizabeth to call her mother, Elizabeth quickly felt like a daughter in the household. "She shared our pleasures and worries, our dreams and desires and our sorrows."²⁵ This demonstrated the care and compassion Perl had for others, even if they arrived as strangers. Little did Elizabeth know that not calling Perl "mother" would save her life, as the Nazis did not see her as a direct relation when taking the Jews to concentration camps. If the Nazis were to find out that she had a personal connection to Perl, Elizabeth's life could have been jeopardized.

When deported from the ghetto to the concentration camp, Perl initially felt a huge personal loss when she could no longer practice medicine or care for patients. However, she did get the opportunity in Auschwitz to become a prison doctor at the women's camp. While there,

²⁴ Perl, 22.

²⁵ Perl, 22. According to records, Perl also had a daughter named Ella (Gabiella), born in 1928. However, in Perl's autobiography, movie, and interviews, Perl never discusses Ella. It is as if she never existed. The only mentions of Imre in the above list is that he lived with Perl and her husband Ephraim Kraus, lived in the ghettos with them, and went on the journey to Auschwitz.

she used her knowledge from clinical experiments and apprenticeships to lessen the impact of nontraditional methods of medicine demanded by Nazi physicians, such as Joseph Mengele. She dealt with a lack of medical instruments, limited or no medications, and unsanitary conditions while treating patients.

Olga Lengyel

Olga Lengyel, born on October 19, 1908, lived in Cluj, the capital of Transylvania (modern day Romania). Lengyel kept much of her life prior to the war private. She did not even give her maiden name in any written accounts, as she wanted to protect her family. She also did not want to give out her educational background, because that would also allow others into her personal life. However, Lengyel did provide details at her work in the camps throughout her autobiography. Lengyel attended the University of Cluj, studying general medicine, and receiving her degree in 1937. That same year, Dr. Miklos Lengyel, her future husband, also a Jew, built the Sanatorium, where he and Olga, his first surgical assistant, would see approximately 120 patients per day.²⁶

Though dedicated to her medical practice, she also became motherly, caring for their two sons, and making them a central focus of her life. However, as the war grew closer to home, Olga knew she needed to protect her family at all cost. She did not know exactly what to expect, but early indications from Poland were unsettling.

At the beginning of World War II in 1939, people in Eastern Europe did not know what their futures held. Once the Nazis invaded Poland, Olga Lengyel and her family helped rescue other Jewish families and individuals by taking them into her home for short amounts of time.

²⁶ Olga Lengyel, *Five Chimneys: A Woman Survivor's True Story of Auschwitz* (Chicago, IL: Academy Chicago Publishers, 2000), 12.

These refugees came from areas such as Poland, Czechoslovakia, and Austria. Miklos and Olga Lengyel risked their lives to conceal and care for the individuals in their hospital. The Lengyel family met refugees, with signs of physical exhaustion, with various illnesses, and most had few belongings and no money.²⁷

With the help of the local chief Rabbi's wife, Sarah Carmilly (Weinberger), the Lengyel's and others collected clothing and appropriate funds for the refugee's safe departure. Once the Lengyel's felt the families could travel, their employee, Stephan Mursean, brought the refugees across the border to Romania for temporary relief from the Nazi regime. When the German troops grew closer to Cluj, Rabbi Dr. Moshe Carmilly urged the Lengyel family to leave the country. However, they refused, as Olga's father was too ill to travel. Rather than leaving the country on their own, the Nazis took the Lengyel family from their home. The Lengyel family lost their hospital to the Hungarian authorities in 1944.²⁸

The Lengyel family were separated after their deportation to Auschwitz. However, this did not stop Olga's belief that she would reunite with her family after the war because of her desire to save as many lives as she could. She hoped that someone would assist her family in their time of need while she could not be with them. Lengyel worked tirelessly to save as many of her patients as possible, especially the women and children. During her time in the camp, Lengyel accomplished any task to help the prisoners survive the atrocities at Auschwitz both physically and mentally.

²⁷ Lengyel, 12.

²⁸ Moshe Carmilly-Weinberger, *The Road to Life: The Rescue Operation of Jewish Refugees on the Hungarian-Romanian Border in Transylvania, 1936-1944*, (New York: Shengold Publishers, 1994), 120-121,178. This particular page consists of an affidavit from Olga Lengyel about Chief Rabbi Dr. Moshe Carmilly (Weinberger). This document shows that the rabbi urged the Lengyel family to leave Cluj- Kolozsvar on the rescue route to Turda, Romania. Olga Lengyel gave this affidavit on January 18, 1994 in New York.

Lengyel tried to stay hopeful that one day she could practice medicine again. She got her wish when she arrived in the concentration camps. However, the reality of practicing medicine in the camps had a dark side. Lengyel was now under the watchful eye of Dr. Mengele. Despite this, she did not let it crush her spirits or devotion to humane medicine. After her each day in the camps with Mengele, she would go back to the barracks and help with resistance medicine in the evenings for the prisoners in need, especially those that underwent horrid experiments.

Transport from the Ghettos to the Arrival at Auschwitz

Of the three, Lucie Adelsberger arrived at Auschwitz first. Adelsberger left her detention center in Berlin, Germany on May 17, 1943. She recalled her experience as eerie. The train station she departed from was a secondary station in Berlin, hidden between large warehouses and abandoned factories. The Gestapo did not want German citizens to see the Jewish people being put in cattle cars, so they purposely hid the departure of the Jews. According to Danuta Czech's *Auschwitz Chronicle*, on Adelsberger's transport, just under 1,000 Jewish men, women, and children arrived at Auschwitz on May 19, 1943. Of those people, only 80 men and 115 women were admitted into the camp. The other 750 went to the gas chambers.²⁹

During her transport, Adelsberger rode in the medical wagon, since she identified herself as a doctor earlier that day. New mothers and babies made up the majority of passengers in the medical train car. The Gestapo also carried stretchers of very ill individuals suffering from scarlet fever, festering wounds, and those with asthmatic coughs onto the trains. However, emotionally, the hardest to deal with were the infants and very young children. The babies screamed, as they could not change their diapers a clean diaper because of the lack of water for

²⁹ Danuta Czech, *Auschwitz Chronicle 1939-1945: from the Archives of the Auschwitz Memorial and the German Federal Archives* (New York: Henry Holt, 1997), 400.

cleaning. They also went hungry, as the milk that the mothers brought spoiled. The water they did have did not last long, meaning many went thirsty during the trip to Auschwitz.³⁰

Adelsberger had her medical tools with her in the train car and assisted those when she could. She tried to help the new mothers as much as possible, but the issue of sanitation and clean water became a concern. She also tried to help those suffering from the other diseases, but again quickly ran out of supplies. This did not discourage her. She continued to help those individuals however she could and tried to keep a positive attitude. However, she had an idea that worse waited for all of them at the camp.³¹

Gisella Perl left her Hungarian Jewish community in Maramaros Sziget on March 15, 1944. In this community, the Gestapo gave the medical personnel specific directions to bring all of their medical instruments and supplies with them. The Gestapo allowed the doctors and nurses to feel confident that they could practice medicine in their new location and emphasized the importance it would have in the new community. Along with these instruments, others packed their most valuable items including jewelry, as they felt that it would later have value.³²

Perl's train ride lasted for eight days. The only place they could see out of the cars was through cracks in the boards, which also gave them their limited access to fresh air. Perl gathered from what she saw and what the others witnessed that the SS took over the train after a few days. From that point, those aboard the train did not receive food or water. Perl remembered the moans of the older individuals, while others went insane. Perl also recalled a woman giving birth on the

³⁰ Adelsberger, 22.

³¹ Adelsberger, *A Doctor's Story*, 22.

³² Vivian Kahn and Rony Golan, "Genealogical Sources for Researching Jewish Families in Maramaros Sziget and Vicinity," Avotaynu Online, September 01, 2015, accessed May 09, 2018, <https://www.avotaynuonline.com/2010/10/genealogical-sources-for-researching-jewish-families-in-maramaros-sziget-and-vicinity-by-vivian-kahn-and-rony-golan/>.

floor. Because of the lack of supplies and hygiene, many did not survive the trip, and the dead bodies remained within the train cars until they arrived at Auschwitz.³³

During the train ride, Perl's son, Imre, grew ill. Before the war, Perl specialized in gynecology, so she was unfamiliar with some diseases. Because Perl did not know the exact illness of her son, she insisted that he see another doctor. None of the doctors on the train could determine his illness, and just tried to keep him comfortable. Perl gave the water and food that she had brought with her to her son. Once they arrived at the camp, Perl insisted that her son see a doctor immediately. Soldiers took him to the "infirmary," but Perl later found out he went straight to the crematorium.³⁴

Lengyel, the last of the three women prison doctors examined here, left the Cluj-Kolozsvár ghetto in May 1944. Despite this late travel to the camp, many from her town did not know what to expect. Some of the people in her town were well educated in either the medical field or other cultured professions, but if they knew of the horrors, they kept others in the dark about the atrocities they heard about. The intellectuals of the Cluj-Kolozsvár ghetto came together, but could not determine what was to come. They heard rumors of camps, but did not know the agenda of the Nazi party. After already enduring the harsh treatment of the Nazi party by the Brownshirts in the ghetto, she hypothesized that these similar horrors occurred in the rest of Europe. Though not widely known and having limited evidence of the acts until the end of the twentieth century, the Brownshirts in particular had a reputation of torturing Jewish doctors more than most others in the Jewish population. In 1999, renovations at the Robert Kosch Institute uncovered torture rooms, instruments, and records of the torture activities, victims, and doctors.³⁵

³³ Perl, 19-21.

³⁴ Perl, 19-21.

³⁵ Naomi Baumslag, *Murderous Medicine: Nazi Doctors, Human Experimentation, and Typhus* (Westport CT: Praeger Publishers, 2005), 89.

When the roundup occurred in Cluj, Lengyel climbed on to a cattle car with her sons, Thomas and Arvad, her husband, and her parents. Lengyel described the size of the car as being able to hold eight horses or ninety-six people, giving readers of her account an understanding of the animal-like conditions the Jewish people faced.³⁶

In the cattle car, Lengyel attempted to save the first of many lives during the Holocaust by helping those around her survive the horrid conditions. In one case, a fellow doctor's wife tried to inject poison to end her life, feeling she could no longer endure the conditions of the cattle car after seven days. When Lengyel noticed the woman's distress, she knew water was needed to flush out the poison in the woman's system. When the woman refused to drink, Lengyel had to insert a rubber tube, which Lengyel received from her father. Despite the conditions of the cattle care, Lengyel's husband directed the people to part with their water for the procedure. Lengyel temporarily saved the life of the woman, however at selection, the woman went to the gas chambers.³⁷

Once Adelsberger, Perl, and Lengyel arrived at the camps, they knew life would be different. As a way to cope with the hardships, the women did everything in their powers to help those in need of medical assistance, as well as providing emotional support. The women exposed themselves to infections and contagious diseases, putting their own lives at risk everyday while working in the medical blocks at Auschwitz.

The building of traditional Jewish hospitals began in the seventeenth and eighteenth centuries, which became a place for the impoverished Jews to receive the care they needed. Here they received special kosher meals, in accordance with the Jewish principals and their diets. They also had special practices for handling the diseased in according to their religious ceremonies. Baumslag sheds light on the brutal actions of the Brownshirts at the Moabit Hospital and took them for torture purposes to General- Pape- StraBe.

³⁶ Lengyel, 16-20.

³⁷ Lengyel, 16-20.

Chapter 2: Arrival in Auschwitz, Working Conditions, and Introduction to the Camp

Hospitals and Barracks

Before becoming a notorious Nazi concentration camp, Auschwitz served as a temporary settlement for German seasonal workers returning from work in Poland and other Eastern European countries. It did not open as a concentration camp until June 14, 1940. On this first day of operation, Nazi officials transported 728 men from Tarnow prison. Before the first prisoners arrived, other workers worked from April to June cleaning out the barracks and preparing for the reuse of the camp. However, the first Polish prisoners of Auschwitz began building barracks, laying concrete squares, and eventually constructed the first crematorium in the camp. Along with the prisoners, came 100 SS men, officers, and noncommissioned officers of different ranks to ensure the security of the premises and to oversee the overall function of the camp.¹

Once the transport of men from Tarnow arrived, those Polish prisoners that helped with the cleaning and preparing of Auschwitz went to Dachau, where many of them previously came from. Initially, this upset many of the prisoners, until they realized life in Auschwitz would be worse than in Dachau. The First Camp Commander, SS Captain Karl Fritzsche scared the prisoners by telling them the brutal truth of the plans for Auschwitz: an individual's status depended on their life expectancy in the camp. He blatantly told the prisoners that the only way out of the camp was through the chimney of the crematorium. By the end of 1940, Auschwitz held 7,900 prisoners.²

The Nazi regime slowly began bringing in political prisoners to Auschwitz in mid-1940. It was not until June 25, 1940 that the SS began creating plans for an infirmary area in the camp.

¹ Nikolaus Wachsmann, *KL: A History of the Nazi Concentration Camps*. (London: Little Brown, 2016), 202.; Czech, 13.

² Czech, 13; Wachsmann, 202-203.

The infirmaries served the sick and injured prisoners, as disease ran rampant through the camp, there were always those that needed medical assistance. Many of the prisoners contracted diseases while working and living in unsanitary conditions. The initial plan for all the prisoners was death by execution or exhaustion from working. As the prison grew, the original plan grew more difficult and would leave the camp with few workers. The Nazi regime established the infirmaries to keep prisoners in better conditions so they could continue their work in building other parts of the camp.³

In the infirmaries, the Nazis brought in many of their own doctors and physicians to care for the sick. As the population of Auschwitz grew, the need for doctors increased, leading to prisoners with medical degrees or experience to assist in the infirmaries rather than enduring manual labor. These doctors fought for their lives, as they could not make mistakes or give the wrong information to the commanding SS doctors, without fear of death.

There was no actual medical care units other than the “Red Cross” trucks for a long time in Auschwitz. Prisoners waited weeks or months for the construction of a hospital or infirmary, as different groups of prisoners in the camp built them. Prisoners also constructed the buildings, roll call squares, barracks, and fences. This allowed the SS guards to control the prisoners while completing the construction under horrific working conditions.⁴

The different groups within the camp had different types of work and living conditions in Auschwitz. There were areas for men, women, Gypsy’s, prisoners of war, and many more. Each of the camp areas had their own unique aspects about them because of the different populations and people thrown together in the camp. An example of this is the section of the camp

³ Czech, 13.

⁴ Wachsmann, 214-215.

nicknamed “Mexico.” It was the largest unfinished extension of the camp.⁵ One of the reasons that this portion of the camp received the nickname was because of the stereotypes of how dirty Mexicans were. When constructed, “Mexico” held the Hungarian Jews and by 1944, approximately 7,000 women lived in the “Mexico” camp. The living conditions were the most inhumane in the camp. There was no running water and barely enough food for the inmates to receive a small portion. “Huge vats served as toilets, and instead of clothes, many prisoners wore blankets draped around their shoulders.”⁶ To the guards, these looked like ponchos, which only helped make the nickname “Mexico” seem more appropriate.⁷

When Lucie Adelsberger, Gisella Perl, and Olga Lengyel arrived at Auschwitz, the sign they saw above them read FLK, which stands for *Frauenskonzentrationslager* or “Women's Concentration Camp” in German. At this moment, they no longer questioned where they were. They were not at the labor camp promised by the Gestapo. As the gates of the camp opened and closed, they realized that they would not see them open again for a long time. All the women could hope for was the day to see them reopen from the inside.⁸

Adelsberger, Perl, and Lengyel quickly learned new things about their upcoming life by carefully studying their surroundings. They saw people crammed into Red Cross trucks, traditionally symbolizing medical help, and initially they and the others believed the soldier's propaganda that the camps were a safe place. It was not until a few months later that they understood what happened to their families, and that those on the Red Cross trucks were going to the gas chambers and crematorium.⁹

⁵ Wachsmann, 460.

⁶ Wachsmann, 460-461.

⁷ Wachsmann, 460-461.

⁸ Adelsberger, *Auschwitz: A Doctors Story*, 27-28.

⁹ Perl, 27-28.

Perl specifically recalled seeing the multiple, large piles of baby supplies, including strollers, in large piles as they got out of the freight cars. Adelsberger, Perl, and Lengyel now knew something was not right about the information they were given before boarding the trains, they were not in a promised safe environment with their families. Perl had a strong intuition about the women and their children, as the Nazis separated members of families from one another. Perl knew the women and children were in danger, especially pregnant women or those with young children.¹⁰

As a doctor, Lengyel had prepared herself for the worst-case scenario and brought poison with her, as many in the medical field did. They prepared themselves for taking their own lives rather than giving the Nazis officers and doctors the opportunity to kill them. Lengyel believed the poison represented the ultimate liberty, as one then controlled their own life. Though the poison seemed a good solution to the doctors, it did not always work right away.¹¹

Selections and Separation of Families

Upon arrival at the camps, the guards immediately separated the women and men from each other and forced them into lines. Selections happened in order to separate those able to work and those that would not be of use for the Nazi regime in the camps. The SS searched for the sick and weak, people over fifty-five, children, and women accompanying their children. After the SS divided the people and began moving the groups, Adelsberger recalled that approximately one third remained with her. Adelsberger, Perl, and Lengyel saw many of the people they rode in the train with disappear without a trace.¹²

¹⁰ Perl, 27-28.

¹¹ Lengyel, 27.

¹² Lengyel, 27.

After the selections, the SS took the rest of the personal belongings, only allowing the prisoners to keep their toothbrushes and eyeglasses. Some of the women placed their papers in the coat pockets, but other important items went to “Canada”, getting its nickname because the prisoners saw it as a land of plenty, the place where confiscated items went and never came back. Adelsberger lost her first edition copy of *Robinson Crusoe*. She had a special connection to this book because she gave the main character credit for helping her survive the camp. She attributed some of her skills and mindset to make the best of a situation when she would lose hope because of her survival to the protagonist. Crusoe taught her how to be grateful for everything in life, despite the worst.¹³

Once the selection process concluded, the women went through extensive searches, then proceeded to the following chamber marked “showers.” Before they washed themselves, the soldiers shaved the women’s heads as a form of humiliation. One of them approached Lengyel telling her that she did not need her head shaved. Lengyel grew very confused by this as she did not want to receive better treatment than other prisoners did, and proceeded in the line with the rest of the women. The soldier restrained her, whipped her body, and slapped her face, humiliating her in front of the other women for her status. Lengyel recalls, “Each blow cut my heart as it did my flesh. We were lost souls. God, where art Thou?”¹⁴

After the showers, the women received their number tattoos on their right arm, which became their identification, received a uniform, and their barrack assignment. The women then stood naked, draping what little clothing they received on themselves, attempting to cover their

¹³ Adelsberger, *Auschwitz: A Doctors Story*, 28. It is not stated in any of the primary or secondary material as to why she carried *Robinson Crusoe* with her, the only assumption historians have is that it was for ideas on survival. Because Adelsberger never directly stated the reasons behind it, I will not try and make assumptions as to what parts of the book that she looked at, as it is only speculation.

¹⁴ Lengyel, 28.

imperfections so it appeared they were in good health.¹⁵ The women then marched to their barracks. One of the first things Lengyel noticed before entering her building was the sign on the outside wall, which stated, “Mangy animals are to be separated immediately.”¹⁶ This statement held some irony as the camp continued, as many survivors said they were held in captive as if they were mice or used other animal analogies.

When stepping into the barracks for the first time, the women saw the bunks, or as Lengyel’s block referred to them as “koias,” or animal cages. The bare boards provided the only bedding for the women. For the first month, the women did not even have a blanket for warmth. Once they received a blanket from the soldiers, ten women shared it. The “koias” held so many occupants, some could not even lay down, while others could not move in the night, as it became too distracting for those around them.¹⁷

At the camps, Nazis would supply postcards for the prisoners to write to their loved ones back home. When Perl wrote her letter, she wrote to her family that escaped Nazi persecution. She said how great the camp was and hoped that they would one day come to visit them. These postcards were Nazi attempts to bring the rest of the Jewish population to the camps. These letters were to make people willingly want to leave their towns without the Nazi soldiers coming to force them out. Eventually, the postcards became ineffective.¹⁸

Adelsberger began her medical work in the camp soon after selections and processing were complete. The guard leading the women to the barracks took them to Block 30. Here, the

¹⁵ Beverly Chalmers, *Birth, Sex and Abuse: Women's Voices Under Nazi Rule* (Guildford: Grosvenor House Publ., 2015) 102.

¹⁶ Lengyel, 34.

¹⁷ Lengyel, 34.

¹⁸ Halpin, *Essence of Survival*, 86-88. This postcard from Ella and Helen from Gisella in the ghettos was given to Halpin to use in the book as a courtesy of Perl’s grandson, Giora. The translations of the postcard are in the previous pages.

camp *Lageraltete*, or camp elder, apologized to the women for not having dressers or a shelf to store their clothing. The *Lageraltete* then offered to take the women's extra clothing and insisted on keeping them for a later time. The *Blockaltete* or block elder, gave the women their bread rations, assigned their beds, and then gave them their blankets, typically filthy and infested with lice.¹⁹

Most of the people in their barrack had typhus, and the beds that opened up for new prisoners were because of the death of typhus patients, just a couple hours prior to their arrival. Because there was no form of sanitation or disinfectant in the camps, they did not know the condition of the woman living in their area before them. Adelsberger saw a woman dying in her barrack shortly after she received her bunk assignment. The bunk of the suffering woman looked clean, one of the best looking in the barrack. However, this did not stop the illness and disease from spreading. A German nurse from the Reich saw the woman's condition and called for a doctor. Adelsberger stepped forward to examine the dying woman. The nurse gave Adelsberger some figs to give to the dying woman; however, they could not save her. The sick woman had a high fever and lice, eventually leading to her death.²⁰

Adelsberger, Perl, and Lengyel did not know what to expect after their initial hours at the camp. The life they once knew had disappeared. Fellow Holocaust survivor Robert J. Lifton described a woman's first night in the camp from an interview, where the woman believed she was in a horrible place that was a cross between a mental institution and hell. Many of the prisoners that had medical backgrounds attempted to help others in any way possible, even if they could not have the privilege of working in the hospitals.²¹

¹⁹ Adelsberger, *Auschwitz: A Doctors Story*, 33-35.

²⁰ Adelsberger, *Auschwitz: A Doctors Story*, 33-35.

²¹ Robert Jay Lifton, *The Nazi Doctors Medical Killing and the Psychology of Genocide: with a New Preface by the Author* (New York: Basic Books, 2017), 270.

Work Assignments

Once split up into different categories of people; those strong enough to work in one group, and the women, children, and the sick in a separate group, the SS guards barked more orders for the groups to follow. Adelsberger described the different types of labor within Auschwitz and ranked it accordingly. She believed that the kitchens and the warehouses were the most desired positions because of the available food. The jobs were the most important to keep the camp functioning, so they had decent meals to sustain them. Other coveted jobs included office positions, working in the "sauna" or bathhouse, and the showers. These jobs did not require as much physical labor as some of the others in the camp. The workers at the bathhouses and showers dealt with the new prisoners. The women working there forced the new arrivals to abandon their possessions and clothing, allowing women to access new clothing for themselves.²²

"Canada" became a focus in the camp as the workers sorted through discarded items and luggage left by the railroad tracks upon arrival. The prisoners working in "Canada" saw the prized possessions of individuals, as well as everyday items such as food and cigarettes. Adelsberger recalled seeing the tailor of the Gypsy camp and his loot of 6,000 marks worth of foreign currency, that he took for himself. The prisoners knew that the SS attempted to take anything of value, so when valuable items made it to their sorting tables, some prisoners took the items for themselves. This not only benefitted the individual working, but the looting benefitted many of the other inmates. They could trade goods and services for other needed items. "Canada" also became a place to find medicine and hygiene items that could not be found

²²Adelsberger, *Auschwitz: A Doctors Story*, 75.

anywhere else in the camp. The prison doctors did not have access to typical medicines or medical equipment, but many times, the items needed could be traded for in "Canada."²³

Those working in "Canada" could eat the food that they found immediately, but smuggling items out of the area became a hard task. They were searched multiple times on the way back to an individual's block for confiscated items. If caught, the individuals endured punishments.²⁴

These jobs all had their importance, but Adelsberger, Perl, and Lengyel received work based on their medical training. At selection, the military personnel yelled at the women for doctors. Adelsberger, Perl, and Lengyel stepped forward in their separate roll calls because they knew it was their duty to help treat different people, no matter the severity or the potential risk.

When Perl stepped forward, she immediately received her first order from the commanding officer. The task was to quiet the women who were crying and screaming. In response to the order, Perl gave the women words of encouragement, "Do not be afraid! This is only a disinfection center, nothing will happen to you here... I'll stay with you, always to take care of you, to protect you..." With these simple words, the women looked up to Perl and thereafter followed every command she made.²⁵ Officially, Perl worked in Block 19, with four other Jewish doctors and four nurses. The doctors and nurses formed a tight group and worked hard to save every patient by having the best sanitary conditions, as well as maintaining their own self-respect and dignity for patients.²⁶

²³ Adelsberger, *Auschwitz: A Doctors Story*, 75.

²⁴ Adelsberger, *Auschwitz: A Doctors Story*, 75-76.

²⁵ Perl, 29.

²⁶ Halpin, *Essence of Survival*, 81

Adelsberger came forward as a doctor during her roll call when asked because the SS told her it came with special privileges. Out of Adelsberger's transport group only three women physicians received immediate status as doctors. Because of her special duties as a physician, Adelsberger received special items such as underwear, better shoes, a well-kept uniform, and a doctor's smock, that others working in the camp would not have received. The SS gave her an additional uniform, so that she could alternate and wash them. The SS believed that the health of the prison physicians was important to the overall function of the camp. Finally, the prison doctors walked to the hospital and the SS doctor introduced them as new physicians in the camp and explained that they would help the SS doctors and other prisoners.²⁷

When the women began their new medical duties, they soon learned about the horrors of the Red Cross trucks which took people to the crematoriums and the locations of the gas chambers. A hospital worker told them of the differences in medical treatment of the prisoners, as it was comparable to previous treatment protocol before the war.

Adelsberger, learned about gynecological practices and treatments with on the job training from other prison doctors, as this was not her specialty. She also learned that hygiene was not an option, as it was difficult to find soap to wash clothing and their work smocks to keep diseases from spreading through contact. With these drastic medical changes and practices from what Adelsberger once knew, she believed that a hospital, a place she previously knew as one of life, became a cold and dark place, filled with death. The women in the hospitals also grew anxious, some shaking, hands clammy, and teeth chattered. They despised the working conditions of the hospital in Auschwitz. They did not know what their futures held or that of

²⁷ Adelsberger, *Auschwitz: A Doctors Story*, 29.

their patients. According to Holocaust survivor, Robert Jay Lifton, "Doctors regularly stood at the boarder of life and death."²⁸

The doctors feared making mistakes since their lives, or that of their patients, could be in danger, depending on the mood of the supervising SS doctor. Adelsberger and the other doctors around her soon learned "the existence of hospitals in concentration camps is a paradox, as the camps were for mass murder."²⁹

The women created a new approach to their medical work, still trying to save as many lives as they could. They had to make difficult decisions as to who lived and those they would not treat. The number of patients grew by the day, and there were not enough hours in the day to treat each one. The women also began learning about Dr. Josef Mengele, known in Auschwitz as the "Angel of Death," his horrific experimentation, and found out they would work beside him on many occasions.³⁰

Adelsberger and the other new prison doctors then met Dr. Mengele. According to Adelsberger's account, Dr. Mengele presented himself in such a gracious manner; the women felt he was a nice man. He briefly discussed the typhus epidemic in the camp, but mostly focused on the women's duties. Mengele promised medical instruments and technical literature that would assist in their care of the patients. After the promising discussion, Adelsberger and the other women prison doctors were sent to the Gypsy camp, where they would work in the infirmary. Escorted by a member of the SS, the women noticed the Gypsy camp had the same

²⁸ Robert Jay Lifton, "Medicalized Killing in Auschwitz," *Psychiatry* 45, no. 4 (November 1982): pp. 283-297, <https://doi.org/10.1080/00332747.1982.11024161>, 286.

²⁹ Claude Romney, "Ethical Problems Encountered by Auschwitz Prison Doctors, Speech, (YIVO, New York, 1996).

³⁰ Adelsberger, *Auschwitz: A Doctors Story*, 32.

kind of entrance as the others, high barbed wire fences, guard towers, and guards overseeing the large iron gates that quickly opened and closed.³¹

Adelsberger, Perl, and Lengyel worked in the Gypsy camp hospitals. Adelsberger recalled her initial reaction to the camps as unimaginable horror. Just as in many other parts of the camp, stagnant water filled holes in the streets. The main road in the camp was lined with barracks for the prisoners. The only signs of life that she recalled were the brief moment where the men, women, and children nervously laughing and chatting among themselves after roll call about their fates. The prisoners had rags for clothing, but that did not stop the people from trying to enjoy themselves in the camp. Once the prisoners saw the guard, they all fell silent and stopped their activities.³²

When Lengyel arrived in the camp in 1944, she approached Dr. Klein, an SS doctor, asking if she could be of any help. She wanted to relieve some of the pain of the women around her. According to historian Melissa Raphael, “female care was a sign of order of value that is known in the immanent realm but is other or transcendent in quality and origin.”³³ The prison doctors believed that being a good doctor and a good Jew went hand in hand. They took these ideas and constantly found new ways to help those in need, whether by giving a person some of the limited medication or by simply giving them encouraging words to help the patient survive.

In addition, as part of the Hippocratic Oath, a promise that all doctors make to give any possible treatment to the sick. They kept the patient from harm and injustices that an individual

³¹ Adelsberger, *Auschwitz: A Doctors Story*, 32-33.

³² Melissa Raphael, *The Female Face of God in Auschwitz: A Jewish Feminist Theology of the Holocaust*. (London: Routledge, 2006), 60.

³³ Raphael, 60.

might face while being treated by a doctor. The doctors also were to remember the best interest of the patients and take their medical condition into consideration while treating them.³⁴

At first, Dr. Klein rebuked Lengyel's offer, as prisoners could not speak to the SS doctors without authorization. However, the next day, Dr. Klein realized that he could use Lengyel and sought her out, stating that she would help different doctors in other barracks with care when they needed assistance and be in constant communication with them. By doing this work, Lengyel learned the inner workings of the camp, the prisoners, and the medical conditions and issues in the other parts of the camp. Lengyel would later use this information to her advantage when beginning her work with the resistance forces in Auschwitz.³⁵

Once Adelsberger walked into the makeshift infirmary, she made immediate note of the small barracks for the women who came for initial treatment. In the infirmary, the women waited their turn on a single wooden table for examination. She described how the room almost showed signs of life, as a large window brought in warmth as well as natural light into the room. After the horrible days of transportation, the dehumanization during the selection and inspection process, and initial labor in the camps, the condition of the building brought relief and peace to Adelsberger. The hospital system could be described as relatively well organized and structured, despite the horrible nature that existed in the rest of the camp.³⁶

In contrast to the infirmary, Adelsberger described the hospital barracks as an "unconverted horse stable." Windows did not exist; the only light that came in in the room came from the small, narrow, glass that ran along the rafters. The cracks and crevices in the building

³⁴ Vivan Spits, *Doctors from Hell: The Horrific Account of Nazi Experiments on Humans* (Boulder, CO: Sentient Publications, 2005), ix.

³⁵ Lengyel, 69.

³⁶ Ross Halpin, *The Essence of Survival: Jewish Doctors in Auschwitz* (Darlinghurst, N.S.W.: Sydney Jewish Museum, 2014), 123.

let in the elements of wind, rain, heat, and cold. When it rained, these barracks flooded with water and the dirt floors turned to mud, as there was no way to drain it once it seeped through. Along all the walls, three tiered bunks housed as many women as possible, usually cramming them in. The bunks had poor construction, shifting in every direction. The top tier sometimes had makeshift straw mattresses and torn blankets.³⁷

The rule of thumb for capacity in any of the hospital blocks was 800 to 1,000 people. The women prison doctors warned many of the other prisoners that they should not admit themselves to the infirmary if they only wanted better living conditions. Though these conditions in the barracks seem unbearable, prisoners deemed the infirmaries the safest places for work in the concentration camps.³⁸

The rest of the infirmary block consisted of two wooden tables and a stove. The stovepipes ran across the length of the block. This was where many of the doctors and clerks sat to keep themselves warm while they filled out medical reports. The patients that could crawl out of bed brought themselves to the stoves for warmth when they could. The stoves also served as a reception area for new patients trying to see the doctors to evaluate their medical conditions. The stove became the focus of any activities that happened inside the infirmary; meals, socialization, moving from one area to another, injections, and in times of no supervision by SS doctors, the Gypsy women did a belly dance to entertain one another. Many times, Adelsberger and the other prison physicians slept on the stoves, since it was more comfortable to lay on the warm stoves than in the wooden barracks.³⁹

³⁷ Adelsberger, *Auschwitz: A Doctors Story*, 36.

³⁸ Nikolaus Wachsmann, *KL: A History of the Nazi Concentration Camps* (London: Little Brown, 2016), 525.

³⁹ Adelsberger, *Auschwitz: A Doctors Story*, 36-37.

The nurses' assistants in Adelsberger's account seemed happy to work in the infirmary. The women saw this as a way to be helpful to others, but also a way to get better clothing. Adelsberger describes the women's excitement for being able to change clothes as they pleased, some in better dress than they had before the camp. Adelsberger described the women as having "childlike joy" while working and trading their garments with one another. They tried their best to make the most of the situation, even when carrying chamber pots.⁴⁰

Perl also cared for her patients in the makeshift hospitals and in the barracks, trying to save their lives so they could return to work. On multiple occasions, she even bartered for medical supplies and medications for her patients, as they were a difficult commodity to locate in the camp. Later, she cared for cases of typhoid, scarlet fever, malaria, contagious skin diseases, pneumonia, and helped women with their mental health issues.⁴¹

Diseases in the Camps

The first thing that the other women prison doctors briefed each other on were the different diseases they would be encountering, including plethora of noma (gangrenous mouth ulcers), typhus, and avitaminosis (a vitamin deficiency). The women assisted patients with typhus initially. Typhus was the most common disease because it could spread quicker than these others could.⁴²

Lice transmitted typhus through bites and by the microscopic particles of the lice excrement in the air. According to Baumslag and Shmookler the causes of the spreading of typhus in the camps included overcrowding, poverty, dislocation of population, lack of facilities

⁴⁰ Adelsberger, *Auschwitz: A Doctors Story*, 38.

⁴¹ Perl, 70.

⁴² Naomi Baumslag and Berry Shmookler, "Typhus: A Preventable Disease, Factors Contributing to Spread Disease," Presented at the Medical Resistance During the Holocaust Conference, YIVO, New York, 1996.

for basic hygiene, no vaccinations or medication, stress, fear, torture, increased exposure to infected lice, lacking soap, no hot water, no bathing, famine and hunger, shortage of clean clothing, and no disinfectants. The women prison physicians, as well as the SS physicians, attempted to tackle the difficult task of curing these patients. The women prison physicians wanted to help the women prisoners so they could survive in the camps, whereas the SS only cared if the women could continue their work.⁴³

Signs hung around the camp indicated the importance of keeping clean to avoid lice infestations. These signs stated, "one single louse means death!" This made the women in the camp, as well as the doctors, aware of the diseases severity and attempts to stop the spread between prisoners.⁴⁴

Treating typhus patients became difficult because the number of cases continued to rise, and because of the lack of medicine. Because of rapid, infectious diseases, the SS did not want to risk their own lives helping these patients. As a result, they let the prison physicians care for the individuals. While most SS physicians refused to work with infectious patients, some of the SS doctors such as Dr. Miklos Nyiszli, a physician working under Dr. Mengele, continued to treat them. Those Nazi doctors who refused did not want to risk their own lives for the Jewish people, seeing the disease as a way of allowing Social Darwinism to take full effect.⁴⁵

With patients suffering from typhus, the availability of food became an issue for the sick to survive the illness.

Like a lot of other infectious diseases, typhus has the diabolical side effect of increasing one's appetite during convalescence, a totally gratuitous sensation in light of the fact that our daily rations consisted exclusively of a pint of camp soup and half a pound of bread with less than an ounce of margarine or sausage; at other

⁴³ Naomi Baumslag, *Murderous Medicine: Nazi Doctors, Human Experimentation, and Typhus*, (Westport CT: Praeger Publishers, 2015), 114.

⁴⁴ Adelsberger, *Auschwitz: A Doctors Story*, 31, 50-51.

⁴⁵ Naomi Baumslag, *Murderous Medicine: Nazi Doctors, Human Experimentation, and Typhus*, 114.

times the daily regimen consisted of a quarter loaf of white bread and a pint of watery porridge.⁴⁶

Due to limited and scarce food, Adelsberger believed that a person would starve in six months in the camps. Adelsberger remembered on July 25, 1943 that meals did not come around for the sick patients. None of the patients saved any of the bread rations from the day before, and they had finished all their soup when it came the night before. This made some of the patients grow angry and act in anger towards one another.⁴⁷

Starvation made Adelsberger weep like a child, as she did not feel she could survive the night without a small portion of food. This was a normal occurrence of being hungry, but after long days is when it would affect Adelsberger in this way. "The official daily ration at Auschwitz was one litre of watery soup; 250 g. of bread; and 20-25 g. of margarine or sausage or imitation honey. Workers received twice weekly a supplementary ration of 500 g. of bread and 50-100 g. of sausage."⁴⁸

However, after seeing the large number of people who starved every day in the barracks, she promised not to cry of hunger again, as she knew some had it much worse than herself.⁴⁹ The lack of food for the day could have been an attempt to starve the prisoners and kill off more without directly having to take them to the gas chambers. However, the records in the *Auschwitz Chronicle* did not show any major events happening in Auschwitz on this day that could explain why the food rations to not come around.⁵⁰

Adelsberger, Perl, and Lengyel were three of the many prison doctors that gave medical care in secret. Because many of the SS physicians did not want to treat typhus and scarlet fever

⁴⁶ Naomi Baumslag, *Murderous Medicine: Nazi Doctors, Human Experimentation, and Typhus*, 44.

⁴⁷ Naomi Baumslag, *Murderous Medicine: Nazi Doctors, Human Experimentation, and Typhus*, 109.

⁴⁸ Adelsberger, "Medical Observations in Auschwitz Concentration Camp," 447.

⁴⁹ Adelsberger, *Auschwitz: A Doctors Story*, 44-45.

⁵⁰ Czech, 447.

themselves, many of the prison doctors took it upon themselves to treat these patients after hours in the barracks. Due to this after-hours work, the SS physicians could not see the resistance medical work that went on in the evenings. Adelsberger gave extra food rations when she could to her patients, giving them the strength to fight off the disease. Adelsberger and other prison doctors smuggled medicine from the hospitals in attempt to relieve some of the pain that the disease inflicted on an individual.⁵¹

Perl recalled that just as one woman was cured of the disease, another contracted it, making it a vicious cycle in the barracks. Because of improper sanitation in the hospitals, the sick women kept warm in lice infested blankets, only making their sickness and diseases worse.⁵²

First Hand Experiences Make for Successful Doctors

In June 1943, shortly after arriving at Auschwitz, Adelsberger herself became sick with typhus. Just like any other prisoner, she went to the quarantine block for a few weeks, and then went back to her normal duties. In Auschwitz, SS doctors forbade prison doctors helping anyone with typhus. The only help was through friends and family who gave one another extra rations of soup and bread if they could afford to do so. The Jewish prison doctors struggled with the morality of the situation. The SS forbade assistance, threatening severe punishment for those who did. However, their Hippocratic Oath required them to take action.⁵³ The only remedy that the prison doctors could give were cold compresses or hiding those suffering, thus potentially ruining roll call and suffering for other inmates.⁵⁴

⁵¹ Naomi Baumslag, *Murderous Medicine: Nazi Doctors, Human Experimentation, and Typhus*, 112.

⁵² Naomi Baumslag, *Murderous Medicine: Nazi Doctors, Human Experimentation, and Typhus*, 112.

⁵³ Beverley Chalmers, *Birth, Sex, and Abuse: Women's Voices Under Nazi Rule* (Guildford: Grosvenor House Publisher, 2015).

⁵⁴ Czech, 181.

While in quarantine, Adelsberger got a firsthand look at the top tier of the bunks and the conditions that went with it. She remembers the tier as hot, the sun constantly beat down on her, with barely any fresh air coming through the cracks in the roof. There was a small hole above her where could see the sky and the few treetops around the camp, and in the far distance she could see a meadow. To pass time, the women shared stories of their lives before the Nazi occupation. The stories made the suffering slightly bearable according to Adelsberger.⁵⁵

Every so often, Adelsberger's fever rose enough that it actually helped her to sleep, making the hours and days go faster, and the horrors disappear. Because of her fevers, she occasionally hallucinated, aware of her surroundings in the Gypsy camp, but also "sojourning in the Engadin behind Sils- Maria in the Halojan Heights with the sun playing over Segantini's grave." In Adelsberger's footnote to this quote, she describes her hallucination being similar to the painting "Life, Nature, and Death" by Giovanni Segantini, an Italian landscape painter living in Switzerland in 1894.⁵⁶

On July 13, 1943, while still sick with typhus, Adelsberger wrote a postcard to family outside of the camps, explaining where she was. Because of her fatigue from typhus, she had a difficult time writing. In this postcard she lied, stating that she was in good health and praised the attractions of Neurin, which was where the postcards' official return address label read. She never learned what the purposes of the postcards were, other than thinking it would falsely show the conditions of the camp in a sworn testimony for the benefit of the Germans.⁵⁷

A colleague of Adelsberger, who also had typhus, developed an inflammation of the brain, which caused complications that the physicians did not know how to treat. The woman

⁵⁵ Adelsberger, *Auschwitz: A Doctors Story*, 44.

⁵⁶ Adelsberger, *Auschwitz: A Doctors Story*, 53.

⁵⁷ Adelsberger, *Auschwitz, A Doctor's Story*, 108-109. The postcards went out of the camp to make it seem as if the camp was a place of work rather than an extermination camp.

moved as if she had no energy left in her. The swelling took over her mind and motor functions. She walked around the barracks naked, threw blankets and pillows around in the bunks, and "twisted her emancipated body in snake-like coils all over the bunk, her arms circling in their sockets." Her movements became primitive and animalistic. She had no control over her emotions, thus causing outbursts of anger, crying, and overall pain of the body. Throughout this, the other women attempted to pray for protection over her body and those around her. The woman eventually collapsed and died from the inflammation.⁵⁸

Another case Adelsberger described was a companion who contracted abdominal typhus as well as a fever, diarrhea, and phlebitis (inflammation of veins in the leg). Her condition caused her legs to swell, so she could not walk at a quick pace, and missed getting to the latrine in time on multiple occasions. The other Gypsy women made fun of the woman for her condition, further adding to the humiliation from the SS. The woman endured multiple beatings for her behavior, which she could not control. Before the woman died, she laid in her own feces near the latrine, only wanting potatoes and vitamins, but no one could bring either of these to her. She later died in her own waste, inmates continuing to humiliate her even after her death. This woman was not the only recorded case of horrific treatment before and after death. Many other prisoners with typhus also had other underlying health conditions, making their last stages of life difficult. Some of the patients also had heart attacks, which put a quicker end to the suffering of the individuals.⁵⁹

Adelsberger knew that she could not help the patients with typhus, though she knew the conditions and had lived through it herself. She tried to listen to the patient's complaints and help in the best ways possible. The typhus epidemic only grew, as the prison and SS physicians could

⁵⁸ Adelsberger, *Auschwitz: A Doctors Story*, 51.

⁵⁹ *Ibid*, 51.

not control the spread of the disease. It permeated every part of their lives in the camps, from the barracks to the hospital. There was no avoiding contact with the disease.

Scarlet fever presented itself as one of the most contagious diseases in the camp. The prison doctors quarantined these patients into an isolated area of the hospital. However, the doctors did not keep these women very long, because most of the time they simply could not help them. They also quickly released these women, because they did not want to contract the disease themselves. When one patient saw another sick and wrapped in blankets, “other inmates avoided them as though they were lepers.” Eventually the “Red Cross” trucks, those that took the prisoners to the gas chambers and crematoriums, would collect those too ill to walk. Soldiers and workers packed them in to the trucks, often piling them on top of one another.⁶⁰

With all the disease and death around her, Adelsberger recalled standing behind the block, looking at the chimneys of the crematorium, "The sun had broken through again and was hanging like a red cannonball in the evening sky. Suddenly I was overwhelmed by the thought that, despite it all, life is still stronger than death. Some day a new life would arise, phoenix like, from the ashes from the dead of Auschwitz."⁶¹

Pregnancies in Auschwitz

Pregnancy in Auschwitz condemned woman to death. Some pregnant women went undetected upon arrival because the woman could hide her stomach and some could hide their pregnancies if they got pregnant in the camps, but this was rare. There was usually not enough clothing to help disguise the stomachs of the women. Many of the pregnant women went through experimental treatments in a special medical block, where they did not receive extra rations to

⁶⁰ Lengyel, 74.

⁶¹ Lengyel, 54.

help feed themselves and the unborn child. When the woman gave birth, either through induction of pregnancy or natural birth, the child rarely made it through the first week of life. Adelsberger noted, “The Jewish child was forfeited to death, and with him, his mother. Within a week both were sent to the gas chamber.”⁶²

Those women who became pregnant while in the camps were often rape victims or because they would use their bodies in sexual exchanges for goods. Perl personally came across this when needing a piece of string for her shoe. The man she received the string from did not want the bread she offered; rather, he wanted her body. Perl felt that her body was more important than a piece of string.⁶³

Sometimes members of the SS raped the women in the camps because the officers felt that they had possession and power over the women’s bodies. Bryan Holland, a World War II historian, stated that special barracks for rape and molestation. Any women caught with an SS officer endured violence, justified by the offending officers themselves, who claimed the women seduced the men. Eventually, those who participated in prostitution or rape were forced with the consequences. However, some of the women never forgot the treatment, leading them to commit suicide.⁶⁴

Male and female prison physicians in the concentration camps did not want to kill their patients. However, under the circumstances, sometimes the lives of the mothers became more important than the life of a baby. The baby could not perform useful labor as the Nazi’s wanted, whereas the women could. Therefore, the women’s lives needed saving.

⁶² Lengyel, 100-101.

⁶³ Perl, 58.

⁶⁴ Sonja M. Hedgepeth and Rochelle G. Saidel, *Sexual Violence Against Jewish Women During the Holocaust* (Waltham, MA: Brandeis University Press, 2010), 289

In the women's camp, there were five female doctors responsible for the lives of mothers and their infants. Most of the mothers and infants would undergo experimentation or simply be sent to the gas chambers. Only in certain cases where the infant was stillborn or would not live through the night, was the mother allowed to return to working in the camp.⁶⁵

In one instance, Dr. Mengele ordered Perl to end the life of a two-month-old fetus. The main rationale of Dr. Mengele's decision was to keep the fetus intact so he could study it. Though outraged about the decision, Perl obeyed his orders, to save her own life and that of the mother. Perl preformed the abortion, without proper instruments or anesthesia for the woman.⁶⁶

The women prison doctors who performed the deliveries or abortions felt they were monsters because it went against the moral laws of humanity. After several weeks, the women grew exhausted from seeing the mothers and newborns go through this awful treatment. They began passing the newborns off as stillborn, suffocating the babies or giving them a lethal injection, just to save the mothers. If the SS guards had found out what the women were doing, they too would have gone to the gas chambers.⁶⁷

Dr. Mengele's erratic behavior concerning pregnant women further exhausted the women helping in the hospital, as he went back and forth on whether he let pregnant women live or die. He never missed the opportunity to question women on their pregnancy and sexuality. Perl recalled the irregular decisions of Dr. Mengele as he chose to keep some pregnant women alive, whereas some went to the gas chambers immediately after he found out about the pregnancies. Occasionally, while welcoming in the women, he quickly changed his mind and all the women that came for proper prenatal care went straight to the gas chambers. Perl recalled a situation

⁶⁵ Lengyel, 113.

⁶⁶ Lengyel, 113.

⁶⁷ Lengyel, 113.

where she witnessed Dr. Mengele “rush[ing] like a devil into the obstetric block, stabbing mothers in the abdomen, shooting about with his revolver, singing, laughing in demonic mirth. Then he set fire to the whole block.” It seemed that Dr. Mengele only kept certain women alive, when he had particular interest in the fetus’, especially those women pregnant with twins.⁶⁸

There were multiple cases with Jewish woman who endured beatings and other forms of brutality from Dr. Mengele until the infant in the womb was no longer alive or until the baby exited the womb.⁶⁹ Adelsberger, Perl, and Lengyel would have seen many of these horrific acts while working with Dr. Mengele, which only made their resistance medical work more important to them. Dr. Mengele would occasionally stand on a pregnant woman’s stomach until the baby was expelled from the body. Dr. Mengele also completed twisted experiments on pregnant women, sometimes harming just the mother or just the child. Most of the cases ended poorly for both mother and child.⁷⁰

Lindra Rosenfeld Vago, a female prison doctor who worked alongside Adelsberger, Perl, and Lengyel, recalled a Bulgarian woman coming for treatment after giving birth. Dr. Mengele had wrapped the woman’s breasts so she could not get rid of the milk for her newborn, causing them to swell and create excruciating pain. The Bulgarian woman watched the lethal injection of her child and stated to Vago “I did not want to see my daughter. I did not love her for a moment. I will find my husband, and we will have more children.” This was the mindset of many of the pregnant women in Auschwitz, as they knew the reality of their situation.⁷¹

⁶⁸ Gene De Paris, “Doctor Who ‘Helped’ Auschwitz Killer Seeks to Testify at His Trial,” *New York Times*, 1947.

⁶⁹ Wachsmann, 354.

⁷⁰ Chalmers, 102.

⁷¹ Sara Nomberg-Przytyk, *Auschwitz: True Tales from a Grotesque Land* (Chapel Hill: The University of North Carolina Press, 1987), 69. Sara Nomberg-Przytyk also worked as a prison doctor in Auschwitz. Her book looks into the cruel and unusual aspects of Auschwitz. Though the book did not mean to show the cruelty of Dr. Mengele, it highlights many of the experiments and the inner workings that the other women did not focus as much time on. Nomberg-Przytyk tells of the experiences and stories of the survival of people around her.

Dr. Mengele believed “it would not be humanitarian to send a child to the ovens without permitting the mother to be there to witness the child’s death.” This went for the mothers with children at selections as well as those who gave birth while in the concentration camp. Adelsberger, Perl, and Lengyel saw cases such as this and knew if they could give women abortions or deliver babies in secrecy, that the women would not endure many of these horrific experiments and experiences.⁷²

After witnessing and helping with the process of giving birth in Auschwitz under the watchful eye of Dr. Mengele, Perl changed her whole approach on life inside the camps. She did not want to see any more pregnant women suffer at the hands of Dr. Mengele. She knew that the safety and health of the women under her care was of utmost importance. While at Auschwitz, a woman could only live if they worked hard and were not pregnant. Her philosophy behind giving individuals abortions was that if the mother survived the camp she could one day reproduce. A woman could only live if she refrained from pregnancy in the camp. Therefore, the only way to save the Jewish population was aborting fetuses so the mother could live. The women could then give birth after the war concluded, saving the Jewish population.

She quickly realized the radical hopelessness of camp medicine and hospitals. From then on, Perl spent her evenings helping the women that did not come forward to state that they were pregnant in front of SS officers. By providing abortions in the barracks, she hoped to prolong the lives of the women, so that one day they could have another child.

When they heard of a woman going into labor, rather than admitting them to the infirmary, the female prison doctors would take matters into their own hands. If a woman went into labor during the day, they would stretch the woman on a blanket on the lowest level of the

⁷² Sara Nomberg-Przytyk, *Auschwitz: True Tales from a Grotesque Land* (Chapel Hill: The University of North Carolina Press, 1987), 69.

bunks in the barracks. Women who gave birth in the evenings would go to the infirmary. This way the work could go unobserved by other prisoners and escape detection from the SS, while also being more private for the mother.⁷³

In an interview after the war with *The New York Times*, when the reporter asked Perl how she performed the abortions, she stated, “in the night, on a dirty floor, using only my dirty hands.” She had no medical instruments or anesthesia; all she could give were words of encouragement and comfort during the procedure. In instances of an extended delivery, Perl broke the amniotic sac, inducing labor. She then manually dilated the cervix.⁷⁴

The aborted babies that Perl delivered were underdeveloped and died almost as soon as they attempted to breathe. Those babies who did survive delivery, Perl took outside of the barracks, suffocated them, and hid them in the pile of decomposing bodies, never to be seen or found. If a woman had their baby in the camp hospital, Dr. Mengele was present. Mengele decided that the infants would instantly die in a variety of ways through pinching or closing their nostrils, a lethal injection in their mouth when crying, or drowning in any liquid available. Dr. Mengele preferred these inhumane deaths to the idea of starving the child to death after birth because the methods used showed faster results.⁷⁵

Adelsberger, Perl, and Lengyel despised how Dr. Mengele cared for the women after the births of children. In the evenings, the women prison doctors would check on the patients of these experiments and give them anything that could possibly help with the pain and suffering.⁷⁶

⁷³ Lengyel, 133-114.

⁷⁴ Brozan, “Out of Death, A Zest for Life.”

⁷⁵ Anne S. Reamey, “Gisella Perl: Angel and Abortionist in the Auschwitz Death Camp,” The Holocaust Project. November 17, 2009, Accessed March 17, 2018, <http://phdn.org/archive/holocaust-history.org/auschwitz/gisella-perl>.

⁷⁶ Reamey.

Perl described an account of a Greek Jewish woman who reported that her friend endured experiments in the camp hospitals and came back to the barracks in horrible condition. “We saw a woman came all bent in two and like she was in terrible pain and she was our friend, the pregnant woman... she told us they took her in this barrack where doctors there and nurses, they cut her stomach and they took the baby and they placed the baby in a jar. Everything was done without anesthesia.”⁷⁷

The woman died that evening in her bunk due to infection. Perl told this story to show the cruel and unusual punishments that the women endured if Dr. Mengele found them pregnant. Perl wanted all the pregnant women to keep their conditions a secret for as long as they could, so she could abort the babies, saving the mother’s lives. The *Blockova*, or prisoner in charge of the individual block, also could not know the state of the pregnancies, as they would report it to the SS.⁷⁸

Prisoners were not the only patients that Perl and Lengyel saw in the camp hospitals. The highest-ranking SS women in Auschwitz, Irma Grese came into the hospital while Perl preformed a surgery on a woman’s wounded breast.⁷⁹ As Grese watched the infected breast ooze out pus and blood, she quietly watched the careful work of Perl. Grese clearly enjoyed the sight of sick and suffering women. However, later that day, Grese went to the maternity ward, telling Perl that she believed herself to be pregnant and was in need of an abortion, stating, “I have watched you operate and I have perfect confidence in you as a doctor. I want you to examine me. I think I may be pregnant.”⁸⁰

⁷⁷ Chalmers, 103.

⁷⁸ Perl, 62.

⁷⁹ In different sources, the spelling of Irma Grese’s name changes between Greze, Griese, and Grese. Due to the different translations from the individual’s native language, there are some differences in spelling, but can be easily distinguished as the same individual, Irma Grese, the “*The Beautiful Beast*” of Auschwitz.

⁸⁰ Perl, 63.

It was against the rules in Auschwitz for a prisoner to touch a guard. In fact, it was punishable by death. However, disobeying an order had the same punishment. Grese ensured Perl that there would be no punishment for this examination and she would be rewarded with clothing. The entire time that Perl worked on Grese, she feared for her life. Once the operation concluded, Perl still believed her life would end. At the end of the procedure, Grese stood and stated, "You are a good doctor. What a pity that you have to die. Germany needs good doctors."⁸¹

Although Perl did not receive the jacket promised for the procedure, she was able to stay alive, even though she broke a major code of conduct. A similar case happened a few weeks later as another SS woman pulled Perl aside, thinking she was pregnant. As Perl examined the woman, she reported that there was no pregnancy and showed the blood on her hands as proof. This SS woman gave Perl a pail of potatoes for her work.⁸² These instances showed that Perl willingly broke the laws of Auschwitz to save women's lives, no matter who they were, or their rank in the camps.

⁸¹ Perl, 64. In the cross examination of the three different women that this thesis focuses on, this same story appears in the account of Olga Lengyel, which I did not include in her chapter. In Lengyel's story on this, she refers to Gisella Perl as "P," as well as one of her best friends. When Irma Grese asked the initial question to Perl about performing the abortion, Lengyel describes Perl as hesitant when Grese asked her to commit a crime and illegal operation. Because of Grese's status in the camp, Perl feared for her own life. If Grese's health were to decline, the consequences could lead to death. Other than the jacket promised to Perl, she also had food rations and coffee with milk offered to her for these services. Lengyel also explains the fear that Grese had before the procedure, as this was an unusual behavior of Grese because she showed signs of fearlessness. However, if she performed the operation, she could also cause herself grave danger. Lengyel recalls a gun being drawn on P in the infirmary and makes her go back to her private quarters.

A question arises from this cross-examination that is not in either story, how did Irma Grese realize that Perl was the doctor that could perform this operation. Did she know of her underground work, and did not punish her for it, as Perl's services became useful, or if she went to Perl simply because of her gynecology background. This is not answered in either testimony or any of the secondary sources used for this thesis.

However, in the story that Perl tells, Perl was the only other person present. This is a very common issue with different stories, as the survivors constantly keep the privacy of others around them. They did not want others questioning on the topic if a person was not willing to discuss it, as well as giving up their personal testimonies and lives that some are not willing to tell. This same story is found in Olga Lengyel's autobiography *Five Chimneys*, on pages 160- 162.

⁸² Perl, 118.

Chapter 3: Individualized Work of Adelsberger, Perl, and Lengyel

Lucie Adelsberger's Journey as a Prison Doctor

Adelsberger's story differs from that of Lengyel and Perl. Adelsberger does not openly admit to the work that she participated in. Instead, she discusses the medical work that happened around her and the types of patients she saw. She wanted to keep her work quiet, because she did not want to deal with the repercussions she felt would come if she told every detail of the work she did. However, in the broader story, the audience needs to understand the inner workings of the camp, which Adelsberger's accounts do provide, and the detailed statistical work she completed.

Adelsberger stated that the first Hungarian Jew arrived in Auschwitz on May 17, 1944. The destination of the Hungarian Jews had changed from Birkenau to Auschwitz. From May until liberation, the Nazis regularly brought multiple freight trains containing approximately 1,200- 2,000 people a day. Transport conditions became an increasingly prevalent way for the elimination of Jewish people before arrival at the camp. In the summer months, many died in transport because of the lack of air and the heat. Whereas in the winter, they might freeze to death. Adelsberger stated that on one particular day she heard that forty people died in one car. Adelsberger and others watched people fall out of the train cars, abandoning their belongings, and then watched them suffer in the hot sun or pouring rain while awaiting the selection process.¹

Once the mass extermination of the Hungarian Jews began, Adelsberger recalled some of the sights and smells she experienced. She recalled seeing the reflections of the fires on the walls

¹Adelsberger, *Auschwitz, A Doctor's Story*, 82-83.

of their block from the holes in the walls. After she woke for work, she quietly walked outside and saw the flames of the crematorium and the open fire adjacent to it. She watched the SS toss dead and almost dead bodies of adults and children into the flames. She heard the screaming of those who did not die from the gassing, as they burned alive. There were also days where she could not hear, smell, or see the bodies burning, but those days were rare. Adelsberger recalled that on June 3, 1944 that it was the sixteenth straight days of the inferno. This led her to question her life's work and if she was even going to survive the horrid atrocities of Auschwitz.²

In July 1944, Adelsberger remembered her "nurses' bath" because of the unusual nature of it. She recalled the undressing process and waiting for the doors of the showers to open, which allowed twenty-two women to shower at once. The presiding SS doctor looked at them in a sexual manner, gazed at their bodies and smirked at the women. This doctor interrogated the naked women, looked at their breasts and hips. The women could not do anything to defy the officer because they did not want to put themselves in harm's way. This was a common part of life in Auschwitz and other concentration camps.³

Many of the German soldier's actions grew more and more depraved. "A leader once carried out a "beauty contest" of Jewish women, taking them to the cemetery, forcing them to strip naked, and then killing them."⁴ Some Germans quickly developed a taste for rape as a prelude to murder. Witnesses of the events stated that before being shot by the Einsatzgruppen, some girls and women endured rape, even though the 1935 Law for Protection of German Blood and German Honor, which Hitler and the Nazi party enforced, forbade it.⁵

² Adelsberger, *Auschwitz, A Doctor's Story*, 84-85.

³ Adelsberger, *Auschwitz, A Doctor's Story*, 84-85.

⁴ Timothy Snyder, *Bloodlands: Europe between Hitler and Stalin* (New York: Basic Books, 2010), 230.

⁵ Myrna Goldenberg, "Lesson Learned from Gentle Heroism: Women's Holocaust Narratives," *The Annals of the American Academy of Political and Social Science*, 548 (1996), 83.

Another incident in July 1944 that Adelsberger remembered focused on the number of Gypsy women in the camp declining. In March of 1943, the camp held 20,000. In July of 1944, only 6,000 remained. Dr. Mengele singled out women who could work and assigned them to the task of dealing with those coming directly from transport. Adelsberger and other prison doctors gathered that they were a part of the forced labor and any kind of job reassignment was meant to be a death sentence.⁶

At the end of July, some Gypsies and relatives of soldiers evacuated the camps. Some of the Polish nursing staff transferred to other areas of the camp or out of the camp. Adelsberger knew something about the situation was strange, but she assumed it could not be too serious, since Dr. Mengele continued to focus on his medical experiments. Adelsberger was given an order by Dr. Mengele to begin curing conjunctivitis in the children. On July 28, 1944, the rations of soup for the children and the orphans doubled to two large pots.⁷

On July 31, 1944, Dr. Mengele watched as two of the young boys he adored left the camp. Mengele had a special bond with these boys because they told Mengele everything that happened in the camps, without knowing that they could possibly get others in trouble. Their naïve state gave Mengele the opportunity to have eyes and ears in the camps. After the transport of these children, Mengele swept the children's block for those who could work and potentially take the boys' positions. Dr. Mengele then looked to the Polish physicians in the camp and sent them to neighboring men's camps, and the female nurses went to women's concentration camps. Adelsberger was the only Jewish doctor left behind. She proceeded to the quarantine block,

⁶ Goldenberg, 83.

⁷ Adelsberger, *Auschwitz: A Doctors Story*, 87.

where she previously worked, attempting to continue on as usual after the events of the Gypsy transfer.⁸

While in the quarantine block, she awaited the next move of the SS. Once the SS entered the block, they began ripping people from their beds for transport out of Auschwitz. The SS men and some of the prisoners that worked for them counted the number of people they took from the block. The women did not know what to do so they stood by helplessly and watched. Once they had the number of people they needed, the SS bolted the rail car doors and took their victims to an unknown place. The next morning, August 1, 1944, the Gypsy camp was empty. This was one of many such nights that Adelsberger and the rest endured over the succeeding weeks.⁹

Adelsberger ended up at the women's concentration camp the next day. She did not go with the rest of the doctors because her papers did not have required signature of Dr. Mengele on them. The male Jewish doctors stayed in the camp and worked in the same area, while Russian and Hungarian Jews took over the blocks.¹⁰

As part of her new assignment, Adelsberger supervised the sick children in the women's concentration camp, though there were not many left. Two were twin boys that Dr. Mengele had experimented on and that she had come to know and care for. Other patients at this time included four Dutch girls. Adelsberger prided herself on the care of one of the Dutch girls, Ilse, because the girl made a recovery and missed selections in August, the height of the gassing in the women's camp. In September, the Dutch girl grew frail again, and Adelsberger did not know if she could hide the girl's condition from Dr. Mengele. Adelsberger was able to get the girl transferred to the mills; however, the girl grew weaker while working and struggled to make the

⁸ Adelsberger, *Auschwitz: A Doctors Story*, 88.

⁹ Adelsberger, *Auschwitz: A Doctors Story*, 89.

¹⁰ Adelsberger, *Auschwitz: A Doctors Story*, 90-91.

walk to and from the factory. Adelsberger yet again cared for the girl before the next round of selections, allowing her to save this girl's life. However, after a few weeks of the factory work, the girl died of exhaustion. Another Dutch girl Adelsberger cared for, Truus, died of tuberculosis that she contracted in the camp despite all of Adelsberger's help.¹¹

Adelsberger described two of the other girls, Fiek and Ruth, as barely human. They were "carcasses of skin and bones, hardly sixty pounds each- appropriate fuel for the fires, according to SS regulations." Though this description seems harsh and unsettling, it became the reality of the prisoners in the camps. Doctors became detached from the suffering, death, and dehumanization to such an extent that their actions and responses became robotic.¹²

Fiek suffered from pneumonia and Ruth needed a walking cast because her leg muscles could no longer hold the weight of her body. Though these girls seemed like obvious candidates for selection, they kept up their optimism for themselves and for the others around them. Survival was the main objective for these girls. Unfortunately, they both became a part of the blood experiments, where the SS doctors examined blood composition under starvation conditions. Though this seemed inhumane, because they were a part of an experiment, the two girls could no longer be a part of selections. Fiek and Ruth survived under these conditions not only because of their optimism, but they also received milk from Adelsberger and other prison doctors. Once the girls felt strong enough, they helped Adelsberger with new patients.¹³

Adelsberger began caring for an additional five patients that became an essential part to her medical journey in the camp. Two of the German Jewish girls came to her with swollen stomachs. The young girls refused to look at their situation optimistically, as they did not know

¹¹ Adelsberger, *Auschwitz: A Doctors Story*, 95-96.

¹² Halpin, *The Essence of Survival*, 194.

¹³ Adelsberger, *Auschwitz: A Doctors Story*, 96.

that Adelsberger would nurture them to health if she could. The two girls died shortly after arriving at the hospital. Ruth eventually died as well, but not without finding the strength to write to her parents and prayers for the dead.¹⁴

A young Polish girl, suffered from leprosy, a severe vitamin deficiency. Adelsberger fed the girl by hand, because she lost the strength to feed herself. This young girl eventually ate her entire bowl of food each day. Though the girl had no medical knowledge, she helped in ways that Adelsberger had modeled for her, by providing cheer and words of encouragement when all hope seemed lost for other prisoners. Unfortunately, this girl passed away after liberation due to starvation.¹⁵

Two of Adelsberger's camp patients eventually grew quite close to her. These girls looked to Adelsberger as a camp mother. They brought her clothing and food whenever possible. Every evening, the girls sat with Adelsberger before bed, talking and laughing as if they knew all of them would walk out of Auschwitz alive. Though this thinking seemed irrational in the moment, the positive thoughts helped the women's morale while in the camp. The two girls began sleeping in the same bed, almost mimicking twins. On occasion Adelsberger recalled she accidentally and openly stated that the girls treated her like a mother.¹⁶

In the days leading up to one of the girl's fifteenth birthday, the girls saved up bread and other food rations so that they could invite Adelsberger to celebrate with them. Adelsberger stated that the bread she received from the girls became the most precious gift she received in her life. These two girls brought out the nurturing side of Adelsberger that many of the women doctors possessed. Adelsberger made sure that the girls were in good health both physically and

¹⁴ Adelsberger, *Auschwitz: A Doctors Story*, 96-97.

¹⁵ Adelsberger, *Auschwitz: A Doctors Story*, 96-97.

¹⁶ Adelsberger, *Auschwitz: A Doctors Story*, 98.

mentally. As a doctor and a friend to these girls, Adelsberger did her best to protect them from the evils of the camp whenever she could.¹⁷

By mid-fall of 1944, the prisoners sensed the changing dynamic of the camp. They began seeing airplanes flying overhead headed west towards Germany. Because the SS worried about bombing attempts by Allied planes, they instituted a strict lights out at night rule. Many of the prisoners actually enjoyed this change. Not only did the prisoners begin to feel a sense of freedom as the troops closed in, but they also had not slept without lights on all night for a very long time. Other rumors spread around the camp that the Germans intended to bomb the camp themselves to eliminate evidence of the inner workings.¹⁸

Adelsberger wrote on January 17, 1945 that the SS invited the women prisoners and doctors to a cabaret performance, something they only heard rumors about from the men's camp. The women gladly accepted the invitation. The prison women willingly loaded themselves into train cars, not thinking the worst might happen. However, the female nurses and doctors that stayed behind woke to a messenger asking for medical records of all the patients. This was a normal part of the process of transporting patients to another camp. A member of the SS immediately crumbled the gathered information, threw all of it into a pile, and then burned it. The hard work of the documentation of each patient that the doctors and nurses recorded no longer existed for those specific patients. These SS officials might have been assisting the women by hiding some of the underlying conditions of certain patients, or it could have been because the patients would immediately go to a crematorium.¹⁹

¹⁷ Adelsberger, *Auschwitz: A Doctors Story*, 99.

¹⁸ Adelsberger, *Auschwitz: A Doctors Story*, 105.

¹⁹ Adelsberger, *Auschwitz: A Doctors Story*, 116.

The following day, Adelsberger created backpacks and shoulder bags from rags and clothing found in the camp. The prisoners collected the few items they possessed, and packed them in their bags. Throughout all the chaos occurring in the infirmary, the female nurses and doctors used their time efficiently and calmed those panicking before worrying about themselves. Adelsberger found a very ill man, which she knew could not march, and debated whether to stay with him or continue with the rest of the prisoners. The official order for the man was transport.²⁰

All prisoners that could walk joined the expected march of three kilometers, or so the SS told them. Adelsberger had to make the hardest decision of her career in Auschwitz, as she had to leave behind those that she felt could not make the journey. She abandoned patients she treated for months and had kept alive against odds. Adelsberger and the other doctors examined the patients repeatedly to make the final decision of the fate of each individual. Those that wanted to go and could walk even a short distance prepared for the march. A fellow ill doctor wanted to make the journey and the women prison doctors offered to carry her, but the SS forbade the idea and sent the woman back to the barracks. The ill doctor knew she had a minimal chance of survival without her colleagues taking care of her. At 5:00 p.m., the women began their march out of the camp.²¹

The women marched out of the gates of Auschwitz- Birkenau, giving them an overwhelming sense of confidence that they had finally seen the end of their ordeal. They left the camp alive and beat the incredible odds. The prisoners marched away from the gas chambers rather than towards it. Auschwitz became a shadow in the darkness of night and slowly disappeared as they walked away from the camp.

²⁰ Adelsberger, *Auschwitz: A Doctors Story*, 117.

²¹ Adelsberger, *Auschwitz: A Doctors Story*, 121.

Adelsberger remembered that it took about two hours for the 10,000 people to leave the gates of Auschwitz and march down the narrow pathway. Some people did not have the strength to continue on the long journey. After a few hours, some began sitting down to rest in the snow while others began marching back towards Auschwitz, as they believed it was closer than any other destination.²²

By morning, all the prisoners grew tired and hungry after marching all night. The morale of the prisoners vanished, as they began to see dead bodies along the side of the road. At this point in the journey, the SS shot those that grew too tired and could not make it to the destination. Adelsberger and the other prisoners marched through the blood-covered snow, hoping that they would be executed or die of exhaustion.²³

The prisoners could even not stop to eat their bread ration or to eat snow to quench their thirst. After marching for twenty-six hours, the prisoners were finally allowed to rest in cramped barns. The march continued first thing the next morning. The prisoners continued marching for six days and nights. The women took note of where they were, beginning to recognize some of the places they passed, such as Frankfurt. They continued through the suburbs of Berlin, moving towards Ravensbrück, the final destination in the journey.²⁴

Adelsberger did not believe more than fifteen to twenty percent of the women on her march made it the almost 600 kilometers to Ravensbrück. She strongly believed that the physical conditions the women left Auschwitz in was to blame for the small percentage. Adelsberger then began to describe the horrible conditions of the new camp, which actually made Auschwitz seem luxurious. In Ravensbrück, Adelsberger was not a practicing doctor. Instead, she was a regular

²² Adelsberger, *Auschwitz: A Doctors Story*, 121.

²³ Adelsberger, *Auschwitz: A Doctors Story*, 123.

²⁴ Adelsberger, *Auschwitz: A Doctors Story*, 123-125.

prisoner experiencing the same horrid conditions as those around her. Adelsberger only stayed a few months in Ravensbrück before liberation on May 2, 1945.

Perl's Work in the Camps

After becoming familiar with camp life in Auschwitz, Perl realized saving lives would be difficult because of the conditions around her. However, she did everything in her power to treat those around her. Sometimes simple words of encouragement helped. "I treated patients with my voice, telling them beautiful stories, telling them that one day we would have birthdays again, that one day we would sing again."²⁵ She continued to celebrate holidays with the women, such as Rosh ha-Shanah, even though she did not know the exact date, basing it simply off weather conditions. The women celebrated with bread, margarine, and the sausage they had for meals. Perl stated, "I said tonight will be the New Year, tomorrow a better year will come."²⁶

Although the women did not see an end to the mistreatment, they believed Perl and put all their trust and faith in her. Perl helped many different women while in Auschwitz by saving their lives as well as learning more about the conditions of the camps through the diseases the women brought in the infirmary.

A young woman named Jeanette literally fell into the care of Perl one cold, dark evening. The woman found a piece of glass from a crushed pair of eye glasses on the floor of the barracks, and cut her veins on both of her arms, in hopes of committing suicide. The women in the barrack that witnessed this worried about her physical health, knowing that if she lived and showed weakness she would be killed. The women supported each other and gave each other hope during the nights, so seeing this woman fail was not an option for the rest of them. They did not want to

²⁵ Brozan, "Out of Death a Zest for Life."

²⁶ Reamey.

lose their friend. They immediately snuck the young woman into Perl's barrack for aide. Due to the amount of blood loss from the deep cuts, the young woman collapsed into Perl's arms.²⁷

Perl immediately did everything she could to save this woman's life. She grabbed a nearby jacket, placing it under the head of the woman, making her comfortable. Perl then bandaged her arms to stop the bleeding. Although Perl saved this woman's life, she secretly thought that the woman would have been better off if she died because she had demonstrated through her suicide attempt that she could no longer endure the pain and suffering at Auschwitz.²⁸

The women endured harsh conditions. They did not have any proper sanitation and lost all dignity because the SS watched their every move, including using the toilet and changing clothes. Perl knew that the women needed to stick together for survival and support. She felt that every life was important to the community, no matter the wishes of the patient, so she saved everyone she could. In Perl's post-war life, she used the survival tactics she learned in the camp to help her and those around her to move to new countries without fear when creating their new lives. The Jewish communities continued to stick together and assist each other for many years after liberation.²⁹

Charlotte Junger, a young girl from Perl's hometown of Maramosa, Sziget, came into Perl's care while at Auschwitz. Perl knew her father, as he was also a doctor in the community prior to the roundup in the ghettos during the 1930s. Dr. Junger was aware of what was happening at the camps to the Jewish people. He knew the deportation of his family was inevitable and Dr. Junger took poison from his practice and placed in it a small container he

²⁷ Perl, 50.

²⁸ Perl, 50.

²⁹ Perl, 53.

carried around with him. As the roundup in Maramosa, Sziget occurred, Dr. Junger injected a syringe of poison into his wife, his daughter Charlotte, and himself, so they would not endure the upcoming treatment of the Nazis. It instantly killed himself and his wife, but Charlotte survived, not receiving the proper amount of poison to die instantly, or even in a few hours.³⁰

The Gestapo took Perl and the other Jews from Maramosa, Sziget and put them on the freight trains for deportation to Auschwitz. Upon arrival, other women from Maramosa hid Charlotte's worsening condition in an attempt to save her life. The women brought Charlotte to Perl; however, she did not have the proper medicine or instruments to alleviate the pain caused by the poison. The only way Perl could help Charlotte was through emotional support. Perl held Charlotte through the night, showing her compassion and giving her encouragement to fight off the poison as long as she could. Essentially Perl provided the love that a mother would. However, Charlotte's conditions only worsened, her limbs began swelling, and she ran a dangerously high temperature, causing delusional behavior.³¹

Because of her illness and disorientation caused by the poison, Charlotte danced in the barracks, thinking her father watched over her. She constantly approached the other women believing that they were her father, and the women went along with the delusions for Charlotte's sake. However, Dr. Mengele heard of the unbalanced girl, watched her, and even impersonated her father. Dr. Mengele came every day, watching the poison run through her veins, affecting every portion of her body. He encountered an experiment without having to start it himself. Charlotte danced until she collapsed with exhaustion, deathly pale, and began foaming at the

³⁰ Perl, 53.

³¹ Perl, 54.

mouth, as if she were rabid. To Dr. Mengele, her death was not quick enough, so one day he sent her to the crematorium, where Charlotte “paid the penalty for the sin of being weak...”³²

Perl’s approach with Charlotte demonstrated she was more than just a doctor; she was a caring and loving person. She cared for Charlotte as if she were her own child. The true compassion Perl had for those in her care proved that her work went beyond the makeshift clinic, encompassing the whole person. Perl treated her patients with this type of care long after the war. She felt that patients needed love and encouragement to get through difficult surgeries, or while women gave birth to children.³³

Perl’s life in Auschwitz did not have many of the luxuries some of the other Jewish doctors discuss in their testimonies. She had the same clothing and living conditions of the forced labor workers in the camp. She also did not have the medical supplies that any doctor would need to perform many of the difficult procedures on the prisoners. Perl did not live a sheltered life in the camp. She saw brutality the Nazi doctors showed to the new mothers, babies, and those undergoing experiments. Perl did not involve herself in outright resistance movements, but quietly helped others when she could outside of her time in the hospitals.

Perl recalled one particular evening of savage behavior towards an inmate by Dr. Mengele. Perl watched as he beat a new mother holding her child, and killed the child in a monstrous way. She described watching as the two beautiful eyes disappeared under a layer of blood. The ears of the child were no longer on the body, unsure if he tore them off or they fell off from the beating. The child’s nose went flat, clearly broken, and caused a large amount of blood loss. Perl closed her eyes momentarily, as she could no longer witness the brutality. When she

³² Perl, 55.

³³ Perl, 55.

reopened her eyes, the beating had stopped, and she saw a disfigured body, almost unrecognizable. Dr. Mengele then took the woman, and made her march to her death.³⁴

A few months after this, Perl received orders from Dr. Mengele to accompany two SS guards on a trip outside the camp. Perl did not endure an infamous Death March, but the conditions of the trip were not glorious either. As the walk began, she recalled watching Auschwitz disappear into a fog. She knew at this point that one of the crematoriums no longer functioned, but the sky was grey and merciless. Perl and the guards walked day and night until reaching Kattovice, a large city outside Auschwitz. She then took a train, arriving in Berlin, which then took her to *Arbeitslager*, a labor camp for rubber production. Shortly after her arrival in the new camp, Perl received word that she was in charge of the hospital. Though not ideal, this hospital was better than in Auschwitz. Perl still feared for her own life as she treated the camp patients.³⁵

Perl continued working in the camp, even after she heard of the liberation of Auschwitz. Along with the typical camp diseases, Perl now helped victims of nearby bombings, as the Allies did not spare the concentration or labor camps. Perl treated those with leg amputations, deep head wounds, and crushed ribs, just to name a few of the injuries she witnessed. She recalled sewing people back together and bandaging them, hoping to save each individual victim. Though she knew the end of the war grew near, the Nazis then sent Perl to Bergen-Belsen in north-central Germany, to continue working as a doctor.³⁶

By 1945, Bergen-Belsen became a dumping ground for prisoners evacuated from other camps. It contained Death March victims, as well as those who were constantly being moved

³⁴ Perl, 111.

³⁵ Perl, 142.

³⁶ Perl, 159.

from one camp to another, similar to Perl's journey. "The highways were crowded with endless starving human skeletons driven with whips and guns. Those who were too weak to keep up with the column were brained with gun butts."³⁷ Dead bodies lay everywhere on the roads to the camp, especially in the highway ditches. When walking through the camp, Perl passed trucks with hands coming out of the barred windows. People constantly asked for water, food, and fresh air to breathe. Some even asked for death, as they felt that would be a better option.³⁸

Perl believed that the conditions of Bergen-Belsen could never receive accurate description because of the extreme sadism and bestiality by the Germans. Perl claimed that the only representation of the life of the camp were through the eyes of the individuals who experienced it, as no words would do the camp justice.

One must have seen those mountains of rotting corpses mixed with filth, with human excrement, where once in a while one noticed a slight movement caused by rats or by the death conclusion of a victim who had been thrown there alive. One must have smelled the unimaginable stench which lay over the camp like a thick cloud sitting out the air. One must have heard those unearthly screams of agony which continued through the day and the night, coming from hundreds of throats, unceasingly unbearably.³⁹

There were no health policies or safety for prisoners in Bergen-Belsen. The Nazis also did not have a procedure for disposing of the dead. The healthier prisoners dragged the bodies towards the fences, trying to save one another from the smell. Prisoners in the camp contracted typhus or lice, endured starvation, and dehydration. Some people turned to cannibalism just to try to stay alive for a little longer, commonly eating hearts, livers, and brains. The day after Perl's arrival at Bergen-Belsen, she found the dead bodies of her brother and her sister-in-law.

³⁷ Perl, 167.

³⁸ Perl, 167.

³⁹ Perl, 167.

This devastated Perl, but also gave her a stronger will to live. She knew she needed to stay alive in hopes of reuniting with her other family members.⁴⁰

On April 15, 1945, the day of liberation at Bergen-Belsen, Perl helped a woman bring a child into the world. The baby needed to leave the typhus infected, lice ridden, feverish body of the mother to have a fighting chance at survival. Perl immediately found one of the liberators and asked for water and disinfectant, as the woman began to bleed out after giving birth to the child. Perl helped birth the first free child of Bergen-Belsen, as well as saved the new mother's life through an operation that would not have been possible just a few hours prior.⁴¹

Though liberation occurred in April, the prisoners were forced to stay in a displaced persons portion of the camp as the British attempted to feed and cure as many people as they could. The British soldiers tried to put their initial reactions aside and focus on the people. Perl recalled a haze and steam rising from rivers of blood, pus, and human excrement across the camp. This was only the first of the issues the British would deal with in the aftermath of the concentration camps.⁴²

During this time of liberation and reconstruction, Perl worked in the gynecological-surgical hospital taking care of young mothers, girls, children, and babies fighting for their lives. A priest named Abbe Brand helped Perl get the supplies she needed after she explained the situation of having no food for the newborn babies and their mothers. Brand constantly had new patients for Perl to examine, on top of her already full load of patients, but she gladly helped the man that helped her.⁴³

⁴⁰ Perl, 168.

⁴¹ Perl, 168.

⁴² Perl, 168.

⁴³ Perl, 168.

Olga Lengyel's Medical Experience

Once Lengyel began working at the infirmary in Auschwitz in 1944, she approached Dr. Fritz Klein, an SS doctor, asking if she would be of any help. She wanted to relieve some of the pain of the women around her.

Dr. Klein spent large amounts of time listening to the different reports on patients during his rounds, and decided that having an assistant would alleviate some of the stress of his job. Because Dr. Klein saw the success of the hard work Lengyel put in, he ordered all persons with any medical experience to present themselves and begin working in the infirmary, pharmacy, and later in the hospital. The designated building for medical rooms had serious issues, such as gaping holes in the walls and leaking roofs. However, the prison doctors managed to make it work, seeing 400 to 500 patients a day.⁴⁴

Lengyel later received a relocation from Dr. Mengele to work in Block 15, where the women worked in the infirmary tirelessly from 5:00 a.m. to 5:00 p.m. without breaks. They were even exempted from roll call because they had too much work to complete to please the SS doctors.⁴⁵

Lengyel recalled one such instance of helping a woman from the camp in those nonstop conditions. She treated boils and anthrax with the same instruments used for less serious medical issues. She and the other doctors knew of the possible spread of infection, but there was not much that they could do. Luckily, Lengyel and her fellow coworkers never dealt with a serious infection of their own while working in these dangerous conditions.⁴⁶

⁴⁴ Lengyel, 69.

⁴⁵ Philippe Aziz, *Doctors of Death Vol. 2: Joseph Mengele, the Evil Doctor* (Geneva, Switzerland: Ferni Publishers, 1976), 96.

⁴⁶ Lengyel, 70.

One of the conditions that Lengyel specifically mentioned that took the most time to cure were the gangrenous wounds. These infections gave off a putrid odor and often maggots would live inside the wound. To cure this, they used a large syringe to inject potassium permanganate into the wound to disinfect it. Patients endured anywhere from ten to twelve injections to cure the gangrene, each injection consisting of a large amount of water and potassium permanganate. Because of the time that this procedure took, many women stood in line suffering, waiting for their moment with the doctor.⁴⁷

In other parts of the camps, the women prison doctors also took care of men, however the particular unit that Lengyel worked in only dealt with women's health. Other diseases such as dysentery, pneumonia, and other open wounds became common for the prison doctors to see daily. These were common injuries from the heavy labor in agriculture and construction.⁴⁸ Rudolf Vrba, a prisoner in Auschwitz, recalled "Even among the degradations of Auschwitz most of the prison doctors managed to retain their humanity and their professional integrity."⁴⁹

Prisoners did not want anyone to fall into the hands of the Nazis, because they believed in strength in numbers. If the Jewish prison doctors continued their care of inmates, it might hurt the attempt to completely exterminate the Jewish people. It was a standing order that if the prison doctors showed full cooperation with the SS doctors, that they would select the more seriously ill patients during selection rather than those healthy enough to continue their work. If the women did not cooperate with the SS, randomized selections occurred rather than from those that would not survive the next few days due to illness.⁵⁰

⁴⁷ Lengyel, 71.

⁴⁸ Wachsmann, 299.

⁴⁹ Rudolf Vrba, *I Cannot Forgive* (Vancouver: Regents Press, 1997), 141.

⁵⁰ Halpin, *Essence of Survival*, 121.

One particular case of scarlet fever that Lengyel remembered was while she cared for a young Greek woman. She would not answer questions as to why she came to the hospital, which left the doctors clueless as to why she reported to the surgery area. When they looked at her medical card, no apparent need for surgery presented itself. After hours of observation, Lengyel realized the error made by the SS doctors. The young woman was supposed to go to the mentally ill unit. As Lengyel observed the young woman, she sat up, and imitated the work that she did in the camp's spinning mill. After a few hours of pretending to spin, the woman lost consciousness as if the work she completed wore her out. She only woke to shield her body as if she endured a beating. The following morning, Lengyel and the other women went to check on the girl. They found her dead, surrounded by straw from her mattress as well as her clothing ripped to shreds. Lengyel noted, "The desperate animal fear had finally destroyed the equilibrium of her mind."⁵¹ This was one of the worst cases Lengyel recalled in her autobiography. It scarred her and made her fear the hardships those doing hard labor faced.

In June of 1944, Irma Grese, reported for duty for the selection process, where she selected 315 women, putting all of the women in a small, confined washroom. Once full, Grese commanded other SS soldiers to nail the door shut. The guards feared going into the washrooms because of the contagious diseases. These areas also contained no water for the women to try to wash themselves to prevent new illnesses.⁵²

The women selected were not ill and did not have physical disabilities; they were just a part of the randomized selection. Before the women went to the gas chambers, Dr. Klein needed to inspect the women Irma Grese put in the washroom. Because Lengyel worked with Dr. Klein looking at medical records, she wanted to help the women if she could. Lengyel saw that the

⁵¹ Lengyel, 77.

⁵² Raphael, 64.

women did not have the proper sanitary materials, but they also did not show any signs of illness, thinking that the selection must have been a mistake on Grese's part. Nervously, Lengyel told Dr. Klein of the suffering women, stating that there must be a mistake because the women were not ill, and it was not worth sending them to the hospital. When Dr. Klein opened the door to the washroom, he saw many of the 315 women dead and others sitting on the dead corpses, too weak to stand. Because of the horrid conditions Grese left the women in, many were now useless for any work because they were too weak. However, by asking Dr. Klein about the situation, Lengyel managed to save 31 lives that day.⁵³

Lengyel was one of the five female doctors responsible for the lives of mothers and their infants. Most of the mothers and infants would undergo experimentation, or were simply sent to the gas chambers. The women who performed the births or the abortions felt that prison doctors were monsters because it went against their medical and personal moral codes.

Other female doctors in Auschwitz followed the same path as Lengyel when it came to saving the lives of mothers and their children. A part of the Jewish law on abortions and terminating pregnancies, the mother could have an abortion if the life of the mother was in danger. The female prison doctors saw this as a valid danger for these women. Some people in the medical field still believe that this was against the Hippocratic Oath that doctors take before receiving their license. However, in the minds of the Jewish women living in the camps, the prison doctors did not break any moral or ethical law by performing these procedures.⁵⁴

Adelsberger and Lengyel saved the experimental poison from the care clinics to kill the newborns, saving the lives of the mothers. Adelsberger stated, "It's amazing what newborns can bear. They simply slept off otherwise lethal doses of poison, sometimes without any apparent

⁵³ Lengyel, 104-105.

⁵⁴ Chalmers, 101.

damage. We never had enough for them.”⁵⁵ Doctors that once saved lives became killers and murderers according to the general public post war. The public did not always look at the larger scheme of saving the Jewish population.⁵⁶

Most male and female prison physicians in the concentration camps did not want to kill their patients. Abortion in the Reich was paradoxical to the ideology of the Nazi party because they believed that abortion of any kind was a crime against the entire German population. Therefore, the killing of pregnant mothers in the gas chambers was a violation of their own practices. Gerda Klein, a Holocaust survivor, stated that she would never bare children that the Nazis could take away from her. She “would endure anything willingly so long as that hope was not extinguished.”⁵⁷

Women would do anything to survive. Many remained hopeful that after the war, they could regain their strength and bare children. However, another horrible practice at the camps they could end this hope was forced sterilizations, often under the direction of Dr. Mengele at Auschwitz.

Lengyel discussed the sterilization of approximately 1,000 boys between the ages of thirteen and sixteen in August of 1944. A few weeks after the sterilization, the boys returned for follow-up questions regarding their procedures. Dr. Mengele wanted to know if it had effected their memory and desires. The German physicians forced the young men to masturbate so they could take a sample to see if the procedure worked. When the massagers of the prostate gland grew tired, the SS physicians used a metal instrument to do the same work, which caused the victim a great deal of pain. The samples then went to a bacteriologist, where they would

⁵⁵ Adelsberger, *Auschwitz: A Doctor's Story*, 100-101.

⁵⁶ Chalmers, 101.

⁵⁷ Gerda Klein, *All but My Life* (New York: Hill & Wang, 1957) 155-156.

determine the difference between the living and dead spermatozoa. After the completion of these experiments when instead the SS physicians told the young men they were getting a reward.⁵⁸

Lengyel saw many patients other than the sterilized men and women. Lengyel tells the story of one of her patients she refers to as “L.”, coming in one day with a wounded foot. L worked on his feet all day in filthy and unhealthy conditions, and his feet seemed to get worse as life in the camps continued. However, L also brought the women news from outside of camp, about the political situations in the world as well as the war. The little bit of news that L gave these women provided a moral boost. As Lengyel stated, “while we nursed his injuries, he soothed our troubled spirits.”⁵⁹

Many in the camp, including Lengyel suffered from serious nervous depression. They constantly worried about their families and their loved ones because they never knew of their whereabouts, and Lengyel did not have contact with her husband for several months after arriving in the camp. Lengyel regularly contemplated suicide as she could no longer bear the idea of not having her family together after the war, and her life seemed useless. Her colleagues felt that her life disappeared before their eyes. Even L saw the changes in Lengyel’s personality.⁶⁰

L pulled Lengyel aside and began to scold her about how she should not waste her life or make it seem as though it no longer mattered. He wanted her to continue to live in the best way possible. He thought that the best way he could accomplish this was to invite her to become a part of the resistance movement in Auschwitz. L relayed the news to Lengyel, and she in turn spread the news to those around her. Because L came to the infirmary often, he noticed that the women looked desperate for any solutions. Bringing Lengyel into the resistance movement

⁵⁸ Lengyel, 191.

⁵⁹ Lengyel, 79.

⁶⁰ Lengyel, 72.

would give the women what they needed more than anything, a reason to live. L explained that the work was dangerous, but in the end, it would be worth all of the risks taken. Lengyel could only give SS doctors and officers real news. If she gave out unrealizable news, she risked her life and the work of the resistance movement.⁶¹

Lengyel now gave prisoners in Auschwitz both the medical care they deserved, and the support of friendship, and lifted their spirits with news about the resistance. She used her motherly instincts to sooth her patients and to calm them from the atrocities around them. Day after day, life in the infirmaries became routine for Lengyel, leaving her questioning her role in the camp. She wanted to find a new way to help those around her. Once L brought Lengyel into the resistance movement, she knew that her work would stretch beyond the walls of the infirmaries. The information recorded from the movement would later help the way the world saw the events and the reality that the prisoners faced in Auschwitz.⁶²

Lifesaving prison doctors such as Lengyel helped prisoners gained a new sense of hope and a reason to continue with life. One day their hope would lead to freedom, the ultimate lifesaving medicine. She had a voice for those that could not see liberation or the outcome of the Holocaust. She fought for their lives every day in the camp.

With her detailed notes, Lengyel recorded the number of people that came in and out of the gates of Auschwitz as a part of her resistance work, while also continuing her work in the infirmaries. Another portion of her resistance work included writing down and documenting the events in Auschwitz. Resistance leaders believed that if the actions against prisoners were written down, then they would have proof of the situation. Different people in the resistance movement in Auschwitz tried to get information out from the camps whenever the opportunity

⁶¹ Lengyel, 72.

⁶² Lengyel, 72.

presented itself. For example, Filip Muller, a *Sonderkommando*, attempted to show the world the horrid reality of the crematoriums. Muller received a new tin for the gold teeth he pulled out of the mouths of the dead in the gas chambers before cremation. The tin he received stated “Zyclon B poison gas Cyanogen compound. Danger! Poison! Tesch and Stabenov International GMBH. For pest control. To be opened by trained personnel only.” When a coworker told him he planned on escaping, Muller scrapped off the canister’s labels to give to him so that someone on the outside of the camp could see the chemicals being used on the prisoners. These actions and writings by the resistance became important when the war concluded, as the world would learn of the atrocities committed by the Nazi regime.⁶³

Another of the statistics that Lengyel recorded was the large number of priests and nuns that arrived in Auschwitz in 1944. These individuals went through the same humiliation as the other prisoners. They were stripped, inspected and had their belongings taken, including Bibles. Everything went into a pile to be discarded or destroyed. The priests did not receive tattoos because they would not make it through the evening. For the most part, the nuns, though humiliated, did not go directly to the gas chambers. The Nazis took their habits and gave them to the women in the brothels to dance with.⁶⁴

Lengyel became close with one of the younger nuns who underwent X-ray experiments after resisting the Nazi commands upon arrival. These experiments caused excruciatingly painful burns on the skin of test subjects. As the procedure continued, the radiation grew in intensity, with occasional interruptions to see if the subject could cooperate.⁶⁵

⁶³ Filip Müller, *Eyewitness Auschwitz: Three Years in the Gas Chambers* (Chicago: Ivan R. Dee, 1999), 122.

⁶⁴ Lengyel, 190.

⁶⁵ Lengyel, 190.

Though the nun was in great pain, she knew that others had it worse than she did, so she prayed quietly for others as well as her own healing. Lengyel knew that there were inadequate medications to reduce her pain. Lengyel and the other doctors heard that the nun would return to another “camp.” Though the women grew sad because they knew the “camp” referred to the crematorium, they also knew that the women would no longer suffer. Before the SS arrived to take her way, the nun asked the women to pray for her comfort. Lengyel recalled many of the women, no matter their religious beliefs, prayed with the nun, though some had already lost their faith after being in the camp for so long. Though Lengyel could not save the young woman, she gained the knowledge that the strength of an individual’s character would help prisoners survive the horrors of Auschwitz and persevere after the war.⁶⁶

The work at the infirmaries was not the only lifesaving work attempted at the camps. Lengyel also recorded that the *Sonderkommando* saved the lives of fifteen and sixteen-year-old boys from Camp D. The SS guards completed what they believed was a mass liquidation of the teens from the camp, since the young boys were no longer considered useful to them. The *Sonderkommando* allowed a few of these boys to slip through the line so they would not be a part of the liquidation. The *Sonderkommando* knew that they risked their own lives to save the boys, but that did not stop them from the opportunity to defy their guards and commands. Lengyel found out this information from the boys, who were helping her clean the hospital latrine pit. With the information that Lengyel gathered from the boys, she was able to tell the women around her of the devastating news of the camp liquidation, as well as the work that the resistance group successfully completed.⁶⁷

⁶⁶ Lengyel, 122-123.

⁶⁷ Lengyel, 124-125.

In the summer of 1944, Lengyel discovered that there was an upcoming liquidation of Hungarian Jews. She noticed that the five crematory ovens, the “white house” or the holding areas for the crematoriums, and the death pit were full of new workers. She realized that there was a lack of workers for the job, as they could not keep up with the amount of luggage received in “Canada.” Muller, a *Sonderkommando* in the resistance movement, also recalled this same event, legitimizing Lengyel’s recording of the extermination of hundreds of thousands of Hungarian Jews. The resistance knew that they could not stand by as 400,000 Hungarian Jews perished at the hands of the Nazis. They did not originally see how the mass execution of these people would work in such a short amount of time until they realized that in one day 10,000 people perished in the three gas chambers of crematorium four and were then placed in the additional five pits they dug just days before.⁶⁸

Lengyel was also helping transport the explosives, since the hospital was a contact point for the resistance.⁶⁹ Roza Roberta, a resistance leader in Auschwitz, helped to bring explosives such as gunpowder to the gas chambers for the *Sonderkommando* members to use.⁷⁰ The members of the resistance brought it to her, and she brought it to other members during her rounds with Dr. Klein. The *Sonderkommando* men helped to soak rags in wood alcohol oil and other fuels to start a fire. The resistance members successfully planted the explosives, and crematorium four was set on fire. After the fire was put out, the SS officers realized what had happened and began shooting at the *Sonderkommandos*. Though these men had accepted that

⁶⁸ Müller, 143.

⁶⁹ Müller, 148.

⁷⁰ Doris L. Bergen, *War and Genocide: A Concise History of the Holocaust* (Lanham, MD: Rowman & Littlefield, 2016), 288.

survival after their task was doubtful, they knew that because of their work, their deaths would be honorable.⁷¹

This was not the only revolt in Auschwitz. Russians prisoners used the SS guards own hand grenades against them. At the end of the two days of the resistance movement, approximately 450 men lost their lives in the attempt to save thousands.⁷²

In the fall of 1944, the SS guards began moving massive numbers of people out of the camps. The gas chambers had been burned by the resistance or demolished by the Nazis to hide their actions. The SS decided to bring people on death marches to a different location, hoping to make it seem as though Auschwitz was smaller than it appeared. Lengyel and the other women on the march went to a small village just outside of the concentration camp. While on this Death March, Lengyel mentally recorded some of the people she saw lying dead in a ditch. She only counted on one side of the road, as she did not want a punishment if she did not obey the guards.⁷³

One night during the march, Lengyel and other women decided to escape and head towards a different village. They spotted a church steeple in the distance and headed for that, believing they would be safe there. Upon arrival, a man who recognized them as escaped prisoners provided shelter in a nearby house. They went to a few different homes before they directly encountered a German soldier. Lengyel fooled the soldier, saying she was a visiting relative who took care of the woman of the home.⁷⁴

However, their freedom was short-lived. As the Russians approached, the Germans grew paranoid and took many of the women in town and bound them to a cart. Here Lengyel sat for

⁷¹ Müller, 155-160.

⁷² Müller, 155-160.

⁷³ Lengyel, 128.

⁷⁴ Lengyel, 128.

three days, gnawing at her ropes, until she finally broke free. Just as she freed herself, a guard noticed her. Before he could shoot, she broke a bottle over his skull, killing him. She ran across the frozen river to a nearby house to safety. The only disheartening aspect of this home was hearing the constant gunshots between the Germans and the Russians. Lengyel survived in the home for a few days, awaiting liberation by allied troops.⁷⁵

⁷⁵ Lengyel, 128.

Chapter 4: Post World War II Life

The years after the war brought about many different changes for Lucie Adelsberger, Gisella Perl, and Olga Lengyel. These women went on to live incredible lives, facing adversity head on. After the war, many Holocaust survivors wanted to move out of Europe to the United States to begin new lives, away from their past, as many no longer had living relatives.

Adelsberger, Perl, and Lengyel all began their journeys in New York, coming through Ellis Island, and then moving into their new homes. Each of them had their own unique path to living in the United States, but they all found their ultimate goal, saving lives every day, just as they did before and during the war. However, many of the prison doctors did not find work because the medical community believed these doctors performed crimes against humanity while working under Dr. Mengele and the other SS physicians.¹ This all changed with Gisella Perl's determination, and her efforts that led to multiple court cases.

Gisella Perl Creates the Pathway for Jewish Prison Doctors

On March 25, 1946, Gisella Perl arrived in New York on the S.S. George Washington. She came to the United States on a visitor's visa, which allowed her to stay for three months until she could find a job, apply for another visa, or become a citizen. This was also the first time that she was a documented widow, as her husband had died days before liberation. Perl received her visitor's visa while she lectured with the United Hungarian Jews of American. They

¹ Francis Shaprio, *Summary of N.R.S. Report of Gisella Perl: Social History*, August 05, 1947-August 13, 1947, report, National Council of Jewish Women, Department of Service for Foreign Born, *Records, 1920-1968*, print, accessed March 17, 2018. This document looks at Dr. Gisella Perl beginning her fight against the government for the right to work in the medical field after the Holocaust. She fought this battle not only for herself, but also for the other doctors fighting the same discrimination. The case looks at Dr. Gisella Perl's status into coming to the United States and gives a description of what paperwork looked like for every immigrant. In this documentation, there is also a letter from First Lady Elenore Roosevelt, showing her support for the doctors such as Gisella Perl and the others that worked to give their own lives and others in the concentration camps.

organized speakers about life in Hungary, as well as sometimes discussing their lives in concentration camps. Perl did not mention her medical work. She feared that people would not understand the conditions in which she had been forced to work. She did not want others to view her as a monster, so instead she discussed the lives she saved and people that she helped while in the camp.²

In 1947, Perl encountered issues with the National Reporters System (N.R.S.) regarding her immigration status. The N.R.S. could not help her change her status in the United States from a visitor to a citizen because she was not eligible for pre-examination for five more years due to not having relatives in the United States. The pre-examination would have allowed Perl to gain access to citizenship by passing a series of tests, as well as proving that she could support herself. Having relatives in the United States helped the status of an individual because while out of work, someone else could show responsibility for them rather than the United States government. After the war, there were large numbers of immigrants from European countries, causing the U.S. citizenship process to slow down.³

Another issue included the two-year delay in the Romanian quota, which allowed for the exemption of the pre-examination. Many displaced people from Romania tried to come into the United States after the war, but could not gain access. The Johnson-Reed Act, also known as the National Origins Act passed in the United States Congress on May 24, 1924. This act established immigration laws that favored England and northern Europe, and lowered quotas from eastern Europe. The law mandated that all potential immigrants were to present paperwork and receive US immigration visas when they boarded the ships to come to the United States. In 1929, the

² Francis Sharpio, Summary of N.R.S. Report of Gisella Perl: Immigration Status, August 05, 1947-August 13, 1947, report, National Council of Jewish Women, Department of Service for Foreign Born, *Records, 1920-1968*, print, accessed March 17, 2018.

³ Francis Sharpio, Summary of N.R.S. Report of Gisella Perl: Immigration Status

immigration quotas cut the number of immigrants even further, limiting many of the countries with heavy Jewish populations. The United States would only allow in 6,524 immigrants from Poland, which had a prewar Jewish population of over 3.5 million, and Romania's quota dropped to 377, with their prewar Jewish population of almost one million.⁴

Finally, the largest issue at hand was “moral turpitude,” which involved an investigation into Perl’s work in the concentration camp. Newspapers publically released information regarding some of Perl’s medical work in Auschwitz, causing the United States government to question her presence and intentions in the country. Perl’s intentions were of particular interest to the Board of Special Inquiry, the group that examined an individual’s documentation before entering the country when there were extreme circumstances, such as a large number of war refugees.⁵

Perl had a temporary loophole in her visa because she had begun touring with the United Jews of America in 1946, giving lectures about life in the concentration camps. Although she wanted to stay with the Hungarian organization she originally belonged to, she toured with the United Jews of American to stay in the country while her citizenship process underwent scrutiny. It was not until June 14, 1946 that the government took any serious action.⁶

Congressman Sol Bloom, a Democrat from New York, decided that her citizenship status should change through action by Congress, rather than through the regular process, because of her importance in the tour and the potential medical contributions she could provide in the United States. The secretary of the United Hungarian Jews of America wrote a letter that

⁴ United States Memorial Holocaust Museum, “United States Immigration and Refugee Law, 1921-1980,” Holocaust Encyclopedia, Accessed June 8, 2020, <https://encyclopedia.ushmm.org/content/en/article/united-states-immigration-and-refugee-law-1921-1980>.

⁵ United States Memorial Holocaust Museum, “United States Immigration and Refugee Law, 1921-1980.”

⁶ Francis Sharpio, Summary of N.R.S. Report of Gisella Perl: Immigration Status, August 05, 1947-August 13, 1947, report, National Council of Jewish Women, Department of Service for Foreign Born, *Records, 1920-1968*, print, accessed March 17, 2018.

supported Perl's case. However, the leadership of the United Hungarian Jews of America rescinded their support and hindered Perl from staying in the United States because Miss Petluck, Perl's sponsor, was targeted as not meeting the necessary requirements to host an immigrant.⁷

The Central Office of Immigration & Naturalization Service dealing with the Exclusion and Expulsion of individuals felt that her status could not change because: 1) she was from Romania, a place where many new immigrants came from, therefore allowing more than their set quota; 2) Perl did not fall into the category of "guiding principle," allowing those who endured extreme hardship into the country, meaning that she should return back to Romania; 3) the United Jews of America did not view her speaking on tour as an immediate issue or need, therefore she did not have employment; and 4) the question of her moral turpitude while working at Auschwitz continued to be called into question.⁸

Things did not seem to be going as Perl planned. However, she remained hopeful. She had endured worse situations throughout her life and she believed that this new predicament would work out for the best. This seemed to be just a bump in the road.

While waiting for the legislation Congressman Bloom presented to Congress to pass, Perl sought assistance for housing. Although the Central Office of Immigration & Naturalization Service's initially denied her the right of staying in the United States, their attention focused again on Perl after the two-page spread of a newspaper article came out in 1947. The immigration authorities reopened her case, having acquired more information about Perl's life as a prisoner in Auschwitz. They now saw the hardships she endured, that she no longer had living

⁷ Francis Sharpio, Summary of N.R.S. Report of Gisella Perl: Immigration Status.

⁸ Francis Sharpio, Summary of N.R.S. Report of Gisella Perl: Immigration Status.

relatives that she attempted suicide after her husband's death while in the camp, and she had suffered from typhus during and after her time at Auschwitz.⁹

After Perl's attempted suicide, Abbe Brand, a Catholic Priest, wanted someone to look after Perl as her "soul is still very ill after all the horror of [the] prison camp." Perl admitted that because the United Hungarian Jews of America could not pay her that by late 1947 she had lived in twenty-five different places since coming to the United States in 1946. The N.R.S could not help her with housing or the change in her status, so Perl knew she had to take matters into her own hands.¹⁰

Cecelia Tatski, a member of the Family Service Department from the United Service for New Americans, advised Perl to focus on her medical practices and researching the latest medical breakthroughs. Others at the Family Service Department believed that Perl should use the money from the private bill designed by Bloom, for Perl to become a doctor in the United States by once again going to medical school. They felt this would give Perl the best chance to win her case, as it would show her true intentions of helping the sick.¹¹

According to Tatarski, Perl should not focus on her medical practices, but rather on the lectures through the United Hungarian Jews of America, which initially made the visa possible. However, since Perl wanted to focus more on her medical practice in her free time, the idea of a student visa became a serious consideration. This would allow Perl's attendance at a college to

⁹Francis Sharpio, *Summary of N.R.S. Report of Gisella Perl: Social History, August 05, 1947-August 13, 1947*, report, National Council of Jewish Women, Department of Service for Foreign Born, *Records, 1920-1968*, print, accessed March 17, 2018.

The newspaper article came from the *New York Times*, though in the report it does not state the name of the article or the exact date of publication.

¹⁰ Reamsey.

¹¹ Francis Sharpio, *Summary of N.R.S. Report of Gisella Perl: Social History, August 05, 1947-August 13, 1947*, report, National Council of Jewish Women, Department of Service for Foreign Born, *Records, 1920-1968*, print, accessed March 17, 2018.

study medicine, and work towards getting her degree in the United States. Many did not feel her degree from Germany was credible because of the horrific actions during the Holocaust.¹²

Although not fond of the idea, she took the advice of Tatarski, and used her experiences at Auschwitz to fill her messages to audiences with emotion when she lectured. She also came to the realization that she could not practice medicine in the United States, or work in a hospital because of her controversial medical actions while at Auschwitz. She arranged an appointment with the American Physician's Committee, seeking their personal interpretation of the situation. From here, she put everything on the line. She did not want to think about her backup option, going back to Europe, and living in Germany, until possibly obtaining another permit for Palestine, or as Tatarski suggested, Canada. She wanted to stay in the United States and fight for her right to practice medicine.¹³

While the issues about her legal status in the United States continued, Perl decided to get her message out to the rest of the world, not just those that attended the lectures. When the Nuremberg Trials began, Perl openly stated that she would testify against Dr. Mengele in the hopes of speeding up her immigration paperwork. In *The New York Times* article written about her in 1947 by Gene De Poris, Perl was quoted as “want[ing] to do everything in [her] power to bring that murderer [Mengele] to justice.”¹⁴

Perl estimated that Dr. Mengele and his men medically and physically worked on eight million individuals through experimentation, though some did not always die. This estimate did not account for abortions and other horrendous experiments. Perl stated, “As a prisoner there

¹² “United Service for New Americans, Inc. Interoffice Memorandum,” C. Tatarsky and M. R. Lerner to Miss Mayer and Miss Sharpio, April 16, 1947, New York City, New York, letter, National Council of Jewish Women, Department of Service for Foreign Born, *Records, 1920-1968*, print, accessed March 17, 2018.

¹³ United Service for New Americans, Inc. Interoffice Memorandum.

¹⁴ De Poris. In this document, they use the German spelling of Dr. Mengele as Mengerle rather than the English as seen in the rest of the paper. The month and date of the article was not on the archive document, as it got cut off in the scan.

myself, I was forced to act as a doctor under his command. I can testify from personal observation that he was responsible for all the atrocities perpetrated and that he invented most of the perverse forms in which they were committed.”¹⁵

She recalled her first impressions of Dr. Mengele and his sadistic laugh, knowing that horrid things would happen. Seeing the work she did to keep women alive, as well as surviving herself, grabbed the attention and hearts of the American people. Because of Perl’s willingness to testify against Dr. Mengele, medical professionals in the United States started to realize that she did not do these actions willingly. She was trying to save her own life as well as other prisoners.¹⁶

Despite the growing number of supporters, some saw Perl’s work as controversial, and that she had the blood of thousands of infants and women on her hands. Although it seems impossible to judge doctors’ actions during the Holocaust regarding pregnant women and newborns, American medical professionals did not always view their contentious actions as a necessity. Other doctors believed the actions taken by the prison doctors to be immoral, and a blatant disregard for the Hippocratic Oath ‘to do no harm’. Ben-Sefer, a medical board member and retired doctor, stated that the women doctors, such as Perl, did not only do harm by aborting the fetus, but also they applied personal interpretations of medical ethics on the pregnant women without getting the consent of the women. He further claimed that the pregnant women did not consent to the abortions, since some of the survivors never forgave the doctors for performing such a horrendous act. Ben-Sefer continued by saying that the consideration of the age of the

¹⁵ United States, U.S. Department of Justice, Criminal Division, “In the Matter of Josef Mengele: A Report to the Attorney General of the United States,” by Neal M. Sher and Eli M. Rosenbaum (Washington D.C.: U.S. Dept. of Justice, Criminal Division, 1992), 83.

¹⁶ United States, U.S. Department of Justice, Criminal Division, “In the Matter of Josef Mengele: A Report to the Attorney General of the United States,” 83.

fetuses were also never part of the decision process. Those of a young gestational age made for an easier abortion compared to late-term. The late-term babies involved labor and delivery, and later suffocation or ending the life in another way, therefore being unethical. However, Ben-Sefer was an American and had no first-hand knowledge of camp life or the conditions the doctors had worked under.¹⁷

Under common Jewish law, during a pregnancy an abortion is legal only if the mother has severe medical complications and may pass away during childbirth. In these cases it was ethical for the doctors making the decision to end the life of the fetus. Perl reasoned that this gave her the right to provide the abortions to the women on religious and medical grounds, whereas in other faiths, abortions are not an option no matter the condition of the mother or child.¹⁸

At Auschwitz, the lives of the pregnant mothers would end if the pregnancy was not terminated. Therefore, by Jewish law, saving the mother in a compromised situation was justifiable. Although the law protected the Jewish women for doing what they did, the women never fully believed it was always the right thing to do. Perl felt remorse for all the lives she took during the Holocaust because in her mind she had still killed many innocent lives of the unborn or newborn babies. However, she still felt it was best for the women, and the continued existence of the Jewish population.

To back up her claims and defend herself against people stating her actions were crimes against humanity, some of the people Perl assisted in Auschwitz began testifying on her behalf. The personal statements demonstrated a fuller appreciation for Perl's medical work. One

¹⁷ Brynn Holland, "Dr. Gisella Perl: A Hero in Hell," History.com, March 03, 2017, accessed March 17, 2018, <https://www.history.com/news/dr-gisella-perl-a-hero-in-hell>.

¹⁸ MJL Staff, "Abortion and Judaism," My Jewish Learning, Accessed April 10, 2018, <https://www.myjewishlearning.com/article/abortion-in-jewish-thought/>.

individual stated that Perl assisted Dr. Mengele during the day, but at night was a trusted doctor that did what was best for the patients. She came into the barracks, administering ointment on the sores of individuals from experiments or outbreaks of rashes. Sometimes as soon as the rash seemed to clear, it came back, making the prisoners wonder if the food caused the rashes and no amount of ointment would truly cure the rash.¹⁹

Both patients and doctors at the camp did not always think that Perl helped the women, but rather hurt them more because of her assistance with the experimentation on the women. Some of the women, while giving testimonies against Perl, kept their names private, since they knew Perl and vice versa, or did not want their names publically known, just their experiences. A lady by the name of “Ms. A” stated that the experiment she endured included shots in her uterus. These shots caused fainting from severe pain. Later “Ms. A.” found out the shots caused her ovaries to shrink and her uterus became comparable to a four year old’s.²⁰

“Ms. G.” went through experiments where Dr. Mengele submerged her in hot water. When trying to breathe, Dr. Mengele pushed her head back into the water, testing her lung capacity. These experiments lasted for approximately ten minutes. Immediately after the hot water, she went and repeated the process in cold water. According to the testimonies, Perl both observed and sometimes assisted in the experiments. Therefore, many people, including victims and the committee, saw these as criminal acts or crimes against humanity.²¹

Many Roman Catholics also disagreed with the works of Perl. They saw her as a criminal because of her work with abortions. In the Catholic religion, the biggest sin is ending a life for

¹⁹ “Personal Statements from Victims of Nazi Medical Experiments,” *Claims Conference*, accessed March 17, 2018, <http://www.claimscon.org/about/history/closed-programs/medical-experiments/person-statements-from-victims>.

²⁰ “Personal Statements from Victims of Nazi Medical Experiments.”

²¹ “Personal Statements from Victims of Nazi Medical Experiments.”

any reason. Doctors typically do not allow their religion to influence their decisions on the care of their patients, unless the patient specifically mentions a particular faith. However, Dr. David Deutschman, an American doctor at New York's Bronx Hospital during World War II, believed "there is no rational or moral justification for... wholesale slaughter of infants... whether it was done by the brutal Nazis, or by a sentimental and well-meaning female medical personality." This shows that many other medical professionals agreed with the committees as they saw Perl did not have to kill the fetuses.²²

Jeff Heinrich, author of *Born in the Holocaust: A Hungarian Woman's Miraculous Birth in the Death Camp of Auschwitz*, brings a different perspective to Perl's work. He shed light on the moral landscape of the situation. He reminded people that some women that gave birth had their babies ripped from their arms and killed, some "mercifully" strangled by a Jewish inmate or SS personnel. He believed that the abortions performed by Perl were "a life-saving measure for the mother, who was an easy target for liquidation if her pregnancy became too obvious."²³

Firsthand accounts of patients, and more recent scholarly reviews of her medical activities in the camps, helps legitimize the work of Perl's actions and her questionable practices while at Auschwitz. Historian Hans Meyerhoff praised Perl for her work shortly after the war ended, stating, "[She] risked death and eternal damnation... and came to be hailed on behalf of 'simple humanity' at the price of thousands of lives which might have been, but never were and never will be. [She] was right in being what she was by committing this enormous wrong." Over

²² "Religion: Not So Simple." *TIME*, September 20, 1948, accessed March 17, 2018, <http://content.time/magazine/article/0,9171,799180,00.html>.

²³ Jeff Heinrich, "Born in the Holocaust: A Hungarian Woman's Miraculous Birth in the Death Camp of Auschwitz," *I Survived*, May 3, 2005, accessed April 16, 2018, http://isurvived.org/2Postings/Polgar_Angela-Vera.html.

time, and with the help of survivors and more accepting viewpoints, Perl's medical efforts gained new appreciation.²⁴

On October 10, 1947, Francis Sharpio, a case worker for Perl, received a letter pertaining to Perl and Bloom's bill. It stated that in April the bill passed, allowing Perl's permanent citizenship in the United States. However, President Truman signed the bill in Washington D.C on March 12, 1947, giving it time to take effect. According to Congressman Bloom, Perl saved the lives of three thousand women. Mail was slow and it was not as easy to get the good news to Perl in a timely matter. However, when she did receive the news that she could permanently live in the United States, she no longer worried about her back up options in Europe. Now she could focus her time and energy into her medical practices.²⁵

Upon receiving her New York medical license, Perl began work at Mount Sinai Hospital in New York. Her work consisted of delivering babies and taking care of the mothers after childbirth. Every time Dr. Perl went into a delivery room, she prayed, "God, you owe me a life, a living baby." She felt that God needed to give her a life for every one she took in Auschwitz, allowing the population of the Jewish community to grow.²⁶

After thirty years practicing medicine in America, Perl spent the remainder of her life in Israel, from 1979 until her death in 1988. She had promised her father and husband before the ghetto round up, "Swear we will never go back, we will meet someday in Jerusalem." Here people knew her as "Gisi Doctor," a name which they knew her by in the concentration camps. She called herself the "Ambassador of the Six Million," because she became the voice for the Jewish people in the medical field. She helped other physicians understand the hardships and

²⁴ Hans Meyerhoff, "A Parable of Simple Humanity," *Partisan Review*, September 1948, 41.

²⁵ "USNA- Migration Department: Perl, Gisella, Your Case #B-9063," Francis Sharpio, October 10, 1947.

²⁶ Brozan.

conditions Jewish people endured. Perl continued her medical and advocacy work by raising money for the Shaare Zedek Medical Center in Jerusalem, where she also volunteered her time in the gynecological clinic.²⁷

Gisella Perl dedicated her life to saving Jewish women, and essentially the Jewish race. Though some of her medical actions were forced by Dr. Mengele, she did them to save her own life and the lives of the women in her care. While she believed the experiments and practices were ethically immoral, she did them in the best interest of the women and children she helped.

Gisella Perl aborted approximately 1,000 babies while in Auschwitz, but through her work in hospitals after World War II, she brought as many lives into the world as she took. For the most part, the women she helped in Auschwitz were grateful for the sacrifices Perl made for them. Perl proved to her late father that she would always keep her Jewish faith strong no matter the circumstances. Dr. Gisella Perl proved to the medical board and the world that her actions changed the fate of the Jewish population throughout the world. Gisella Perl died on December 16, 1988 in Herzliya, Israel.²⁸

Lucie Adelsberger's Medical Work During Post-War Years

The passage of Bloom's legislation that helped Dr. Gisella Perl gain American citizenship opened up opportunities for other doctors, such as Lucie Adelsberger and Olga Lengyel to practice medicine in the United States after 1947. After immigrating to the United States, Adelsberger decided to work as an immunologist in the cancer research department at Montefiore Hospital and Medical Center in New York. She shifted to immunology because she felt that through research, she could help save the lives of thousands dying from cancer, thus

²⁷ Brozan.

²⁸ Brozan.

making a larger contribution to the medical field. During her many years at the hospital, she received grants from the Cancer Institute for Health, which funded much of her research. Her advanced research gained attention when a *New York Times* article stated that Adelsberger believed, “the presence of certain changes in red blood cells indicated incipient cancer, a premise that has recently become generally accepted and it’s being applied in research and clinically for the early detection of cancer.”²⁹

A grant from the Damon Ruyon Memorial Fund allowed Adelsberger to complete research and publish her work on the “Differences in Immunologic Reactions of Red Blood Cells of a Tumor- susceptible (C3H) and a Tumor- resistance (C57) Mouse Strains” in the *American Journal of Cancer*. In this particular study, Adelsberger conducted 104 different tests on mice using antitumor rabbit sera as well as mice sera to see if the mice contracted the same cancerous cells in the mammary gland. With close observation and the same controls and variables, she concluded, “Hemagglutination test with red blood cells of normal mice and antitumor rabbit sera reveal a difference between C3H and C57 erythrocytes as to rate and degree of agglutination. A more or less transitory mid-zonal weak agglutination of C3H red blood cells was observed with serum dilutions in the range of 1:4 to 1:32.” This research of cancerous cells became the focus of her career in the United States. The work became her way of saving lives, though she did not directly see patients at this time.³⁰

Adelsberger later continued her study with H.M. Zimmerman in 1954 and published the article “The Effect of Transplanting Tumors on the Hemolytic Behavior of Red Blood Cells from

²⁹ “Dr. Lucie Adelsberger Is Dead; Linked Virus to Some Cancers,” *The New York Times*, November 4, 1971, 50.

³⁰ Lucie Adelsberger, “Differences in Immunologic Reactions of Red Blood Cells of a Tumor- Susceptible (C3H) and a Tumor- Resistance (C57) Mouse Strains,” *The American Journal of Cancer* 11, no. 9 (September 1951): 653–57, <https://cancerres.aacrjournals.org/content/canres/11/9/658.full.pdf>.

C3H and C57BL Mice” in the *American Journal of Cancer*. This study arose from a previous study in 1951. Adelsberger became curious if the findings of the characteristics of the red blood cells from the C3H mice could also have similar strains found in other tumors. Her previous study gained a large amount of attention from the cancer research groups, and she received grant money from National Cancer Institute of the National Institutes of Health, Public Health Service for new studies. In this new research, she further investigated the rate of growth in the tumors and began looking into brain tumors of the mice.³¹

Following her research on mice, Adelsberger began studying human subjects. Using human subjects initially worried Adelsberger because of her experiences in Auschwitz, but she knew the testing was necessary in order to help cancer research progress. She ultimately saw this research as the most beneficial to society over any other research conducted. Though she could not initially test on human patients, she waited patiently to see if her work with mice would be allowed in humans. When she finally obtained approval, she studied the way that the tumors grew and the patient’s red blood cell count changed. With the help of H. M. Zimmerman, they published the article “The Effect of Tumor Suspensions on Human Red Blood Cells” in *Transactions of the New York Academy of Sciences*. In this article, Adelsberger referenced many of her other research and published articles, bringing the studies together as one cohesive project. The results from this study showed that the “red blood cells from cancer patients showed an initial resistance to hemolysis and were hemolyzed to a lesser degree than red blood cells from healthy volunteers.”³² This was the first time that Adelsberger saw patients since her time at

³¹ Lucie Adelsberger, “The Effect of Transplanting Tumors on the Hemolytic Behavior of Red Blood Cells from C3H and C57BL Mice,” *The American Journal of Cancer*, 14, no. 10 (November 1, 1954): 725- 729, <https://cancerres.aacrjournals.org/content/14/10/725.full-text.pdf>.

³² Lucie Adelsberger, “Division of Microbiology: The Effect of Tumor Suspensions on Human Red Blood Cells,” *Transactions of the New York Academy of Sciences* 23, no. 2 (1960): 148–54.

Auschwitz, making the experience emotionally difficult but also rewarding, as her research gained attention and support from others.

One of her final funded experiments by the National Cancer Institute discussed the skin sensitivity after receiving an injection of antihuman tumor sera. In this experiment, she worked on rabbits in order to understand when the skin becomes sensitive. Adelsberger and Zimmerman found that skin sensitivity occurred a few hours after the initial injection, without having an immediate effect. The skin sensitivity levels depended on which type of cancer the rabbit had as well as the severity.³³

As time went on, the funding for Adelsberger's research became scarce. She began to sense that she could only continue her research if she found her own funding. Adelsberger opened up her private office for allergy treatments and other immunological disorders, and used the profits from this work for her cancer research. She, like many other victims of the war, became frugal with money and supplies, and made the most use of supplies and monetary funds as she could.³⁴

Conducting cancer research gave Adelsberger a new purpose in her life. Though she was not always hands on with patients, she did the behind the scenes research and development to help those in need. She did not see patients regularly as she did at Auschwitz, but knew the impact of her work because of the progress she made.

Adelsberger's self-funding and frugality were all part of her longer mission to give back to society when she could. After the war, she published her first autobiography in German, detailing her life in Auschwitz and Ravensbrück. She donated the profits from this book to

³³ Lucie Adelsberger and H.M. Zimmerman, "Fourth International Congress of Allergology," *Fourth International Congress of Allergology* (October 1961), <https://www.karger.com/Article/PDF/229346>.

³⁴ "Dr. Lucie Adelsberger Is Dead; Linked Virus to Some Cancers," *The New York Times*, November 4, 1971, 50.

children in Israel who lost their parents in the Holocaust. Lucie Adelsberger died on November 3, 1971 in the Bronx in New York.³⁵

Olga Lengyel's Journey from the United States to Cuba

Olga Lengyel did not have the same initial luck as Perl and Adelsberger. She lived in New York for a brief period of time in 1946, before meeting and remarrying a Mexican businessman. Lengyel did not wait for Bloom's legislation to pass, which allowed the Jewish prison doctors the opportunity to get their medical license in the United States. Instead, she moved to Cuba, where she knew she could practice and follow her husband's work.³⁶

In Cuba, Lengyel made a living for herself, eventually owning two different apartments in Havana, one for her own residence and one as a rental. This was just one example of her perseverance and making a new life for herself by earning enough money after the war to allow her to afford such luxurious items. Lengyel moved back to the United States in 1959 because she did not like the anti-Semitic attitude of the Cuban government under the dictatorship of Fidel Castro. Cuba's Urban Reform Act of 1960 prohibited Lengyel from renting out the apartments in Havana. The Cuban government took possession of all Lengyel's property. The Foreign Claim Settlement Commissions of the United States eventually settled the case with a payment of \$1,049,903. However, Lengyel felt that her possessions were worth more and the United States government did not adequately cover the cost of her belongings.³⁷

³⁵ "Dr. Lucie Adelsberger Is Dead; Linked Virus to Some Cancers," *The New York Times*, November 4, 1971, 50.

³⁶ In the Matter of The Claim of Olga Lengyel Claim No. CU-8669-Decision No. CU-6827 (Foreign Claims Settlement Commission of the United States April 28, 1972).

³⁷ In the Matter of The Claim of Olga Lengyel Claim No. CU-8669-Decision No. CU-6827.; See also Stephen Silverstein, *The Merchant of Havana: the Jew in the Cuban Abolitionist Archive* (Nashville, TN: Vanderbilt Press, 2016).

After the settlement, Lengyel did accept and use the money to establish the Memorial Library, chartered by the University of the State of New York. Here, she worked with historical professionals as well as students, discussing what took place inside the Nazi camps, while also sharing some of her own personal story with them. Lengyel's main goal for the library was to keep the memories of the Holocaust alive for future generations. She felt her work in the resistance movement recording people and events needed worldwide recognition so those who did not experience the camps could understand the real experiences and true numbers of individuals involved. To this day, the library continues to teach students and educators about the atrocities of the Holocaust and other genocides. Olga Lengyel died on April 15, 2001 in New York City at the age of 93.³⁸

³⁸ "Toli: Olga Lengyel," Toli Olga Lengyel, The Olga Lengyel Institute for Holocaust Studies and Human Rights, Accessed March 29, 2020, <https://www.toli.us/about/olga-lengyel/>.

Conclusion

Though women made strides in the medical field, both before, during, and after World War II, there were still those that did not agree with hiring women doctors. A 1949 poll of 100 hospital chiefs of staff included, among many others negative comments about women physicians: "Women doctors are emotionally unstable... They talk too much... they're always on the defensive... they get pregnant.... If she is married and childless she is frustrated... or if she raises a family she is neglecting her practice."¹ Adelsberger, Perl, and Lengyel not only faced these discriminations while working and living in the United States, but also bore the weight of their work in Auschwitz.

Physicians in the United States could not comprehend some of the work of the women physicians in concentration camps. To the medical professionals, it seemed that Adelsberger, Perl, and Lengyel committed crimes against humanity. However, these professionals did not understand that the experiences and work these three women completed under Dr. Mengele, because he conducted heinous medical practices against women and children in Auschwitz. American medical boards did not take into consideration the resistance medical work of the doctors to help save those in the camps.

As a way to prove to the world the importance of their medical work done in the camps, Adelsberger, Perl, Lengyel, as well as many others, wrote about their experiences in autobiographies.² These first-hand accounts allowed the world to begin to understand the inner

¹ Mary R. Walsh, *"Doctors Wanted, No Women Need Apply": Sexual Barriers in the Medical Profession, 1835-1975* (New Haven: Yale University Press, 1977), 245.

² Ewa K. Bacon, *Saving Lives in Auschwitz: The Prisoners' Hospital in Buna-Monowitz* (West Lafayette, Indiana: Purdue University Press, 2018).; Nyiszli Miklós, *Auschwitz: A Doctor's Eyewitness Account* (New York: Arcade Publ., 1993).; Sima Vaisman, *A Jewish Doctor in Auschwitz: The Testimony of Sima Vaisman* (New York: Melville House, 2014).; Sara Nomberg-Przytyk, *Auschwitz: True Tales from a Grotesque Land* (Chapel Hill, NC: University of North Carolina Press, 1985).

workings of the concentration camps and the different jobs of the prisoners, whether skilled labor or general labor. The difference with the doctors was that they conveyed the horrific stories of how people were treated in the hospitals. Orders, rules, and regulations from the SS doctors played a significant role in the survival or death of the individuals in the camp.

The resistance work of the prison doctors led to thousands of lives saved, or at least prolonged, in the concentration camps. The prisoners in the camps grew to trust the prison doctors because of their responses to the atrocities around them. Adelsberger, Perl, and Lengyel helped women and children by sneaking creams from the medical facilities, or even bartered for medicine that the infirmaries did not have. The women gave every moment of their time in the camps towards helping others in need.

In their individual specialty fields, Adelsberger, Perl, and Lengyel proved their skills to the world and the rest of the medical community after the war. They did not allow the negative comments to affect their medical work. Adelsberger began cancer research that the world continues to build upon to this day. Perl told her story of Auschwitz to groups around America and assisted in the birth of thousands of babies in post-war New York. Finally, Lengyel worked in Cuba as a physician and later came back to the United States to tell her story and make significant contributions to Holocaust studies programs in New York.

Women coming from Europe after the war endured harsh discrimination and many could not find employment right away. Adelsberger, Perl, and Lengyel fought until they could practice medicine again. These women knew their experience and training would be vital in the United States for the health of Americans, but had many obstacles. After years of fighting government officials and the medical board, Adelsberger, Perl, Lengyel, and many other war refugees were able to practice medicine and make significant impacts in American medicine. The stories and

work of these women inspired many others to follow in their footsteps of overcoming adversity in not only the medical field, but any profession.

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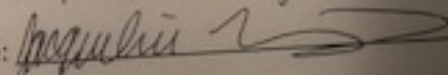
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