

carcinogenesis, and little was known about how to design effective therapeutics. Cancer to many seemed to be a political disease, requiring political solutions. Prevention of exposure to carcinogens seemed to require certain infringements of political and commercial liberties. Appreciating this, we can begin to see how cancer continued to be fought while many areas of "basic" science suffered.

REGISTRIES AND MEDICAL SURVEILLANCE

The Nazification of German science and medicine was accompanied by an increased focus on statistics. This is partly due to the elevation of the notion of "population" in the sciences of the time, but it also reflects the Nazi effort to monitor and manage hitherto uncontrolled spheres of human life. There was never a government as obsessed with counting, sorting, and sifting as was the Nazi regime. It is an era of mass screenings: of women for cervical and breast cancer, children for dental cavities, students for TB, factory workers for silicosis and lung cancer, pregnant women for health impairments, and so on. Genetic and racial maps are constructed, as are elaborate catalogs of the spatial distribution of genetic diseases. Germany becomes the most X-rayed nation in the world (see chapter 4), a nation obsessed with tracking, diagnosing, registering, grading, and selecting.

In the field of cancer, this push for statistical control was reflected in efforts to establish cancer registries. The scale of the efforts is impressive. Between October 1, 1933, and September 30, 1938, for example, private and hospital physicians in Göttingen, Halle, Kiel, and Nuremberg, as well as in the larger regions (*Landkreise*) surrounding Neustadt, Burgdorf in Hanover, Hohenzollern, and Donaukreis (Württemberg) collaborated in an unprecedented project to register every case of cancer appearing in those areas. Standardized forms were provided to all physicians in these areas for this purpose.¹⁵ Population-based registries were subsequently established for Mecklenburg (1937) and for Sachsen-

Anhalt, the Saarland, and Vienna (all in 1939). The University of Munich's Pathological Institute coordinated a statistical analysis of all cases of esophageal cancer at forty-four pathological institutes throughout the nation. Registration efforts were facilitated by the fact that, beginning in 1933, Germany's National Bureau of Statistics (*Statistisches Amt*) distinguished twelve different kinds of cancer death, in place of the previous six. This allowed a far more nuanced classification of deaths from tumors.¹⁶

One interesting aspect of these registries is that they sought to record not just cancer mortality but incidence.¹⁷ Incidence registries are important because they tell you how often cancers are arising in a population, and not just how many people are dying from the disease. Incidence rates theoretically tell you whether cancer rates are on the rise or on the decline—regardless of how well you are doing in the realm of therapeutics. Incidence rates can also elucidate new kinds of causes and therefore new possibilities for prevention. Cancer officials had long hoped for data of this kind: the requirement to report not just mortality but also morbidity was hailed as the first such requirement "in Germany, if not in the world."¹⁸

The dead, of course, were not to be excluded from surveillance, and by the middle of the 1930s Germany had become perhaps the most autopsied nation in the world. Somewhere between 6 and 10 percent of all dead bodies were being subjected to autopsy, an extraordinary rate. As a result, statisticians had unprecedented opportunities to analyze cancer rates. In 1934, the Reich Anticancer Committee asked Professor Ernst Dormanns of Munich's Pathology Institute to compile all available autopsy data concerning cancer deaths among adult men for the period 1925–1933; the study, published in 1936, was apparently the largest of its kind anywhere in the world. Dormanns analyzed autopsy records for 125,000 males over the age of twenty performed at forty-two German pathology institutes between 1925 and 1933 and found that 18 percent of the men—or one in six—had died from cancer of one sort or another. Given that 300,000 German men were dying in any given year, this meant that about a sixth of these—or 50,000—were dying