

that he and his fellow travelers were "carrying in our hands the torch that brings light to humanity."⁵³ *Aufklärung* in the Nazi period becomes another word for propaganda—a one-way flow of information, a vectored and extreme form of clarification (hence the odd-to-our-eyes amalgam *Aufklärungspropaganda*, commonly used in the Nazi era).⁵⁴ If I may generalize: enlightenment under conditions of fascism becomes a form of propaganda.⁵⁵ Recall also that the notorious burning of books at Alexanderplatz on the night of May 10, 1933, was characterized as a "campaign of enlightenment" (*Aufklärungsfeldzug*) to eliminate from German culture elements regarded as Jewish, pacifist, or Bolshevist.⁵⁶

We should keep in mind that, when it came to cancer, many of those deploying the most colorful metaphors were not quacks but rather scholars familiar with state-of-the-art cancer research. This was the case, for example, with Karl H. Zinck, who in 1940 characterized cancerous growths as "revolutionary, anarchistic, and Bolshevistic, directing a civil war (*Bruderkampf*) against the body." Zinck was not a raving fool but a *habilitierter* professor of medicine (*Dozent*) at the University of Kiel, whose lecture was published in the most highly respected public health journal of the Nazi era.⁵⁷ Zinck was well versed in contemporary theories of cancer causation, judging from his recognition that most of the reported increase in cancer was due to the aging of the population, that lung cancer was the only clear-cut case where even age-adjusted rates were on the rise (a trend "according to some researchers" due to the growth of the tobacco habit), that paraffin could cause scrotal cancer, that asbestos could cause (and had caused) lung cancers, and that aniline dyes could cause bladder cancer. Zinck knew that carcinogens targeted particular organs (the liver in the case of scarlet red; the kidney in the case of anthraquinone) because of how those carcinogens were metabolized; he felt that the significance of viruses and trauma had been exaggerated and that more attention needed to be paid to the role of hormones. He was aware that several rare cancers were heritable as simple Mendelian dominants (the best known being xeroderma pigmentosum, polyposis intestinalis, and certain neuroblastomas), but he also knew that heredity did not play a major part in the development of most cancers.⁵⁸ His

characterization of tumors as "Bolshevistic" must therefore be understood not as the product of crankish ignorance but as part of a larger medical currency circulating at this time.

ROMANCING NATURE AND THE QUESTION OF CANCER'S INCREASE

It is important to realize, of course, that even after the *Gleichschaltung* of German medicine⁵⁹ there was still a great deal of dispute over just what was wrong with German cancer policy and what should be done to fix it. Opinions remained divided over many basic questions of causation, treatment, and policy—and even over whether cancer was in fact on the rise. We have to understand these tensions in the context of ongoing feuds between orthodox and "alternative" organic traditions in German medicine—tensions that can be seen in the response to Liek's 1932 book on cancer.

Erwin Liek was widely read both inside and outside the medical community, but he was also sharply criticized by physicians who resented his emphasis on environmental carcinogenesis (especially industrial chemicals, but also food additives and polluted air and water) and personal habits (especially diet and exercise). Many of Germany's more conservative physicians scoffed at his advocacy of a more natural way of life and disputed his assertion that cancer was on the rise. Fischer-Wasels in the *Deutsches Ärzteblatt*, for example, asserted that Liek's 1932 book contained "neither a single new idea nor a single new fact." The Frankfurt pathologist labeled the book "a great failure" having "nothing to do with science."⁶⁰

One of the issues dividing organicists such as Liek from their more conventional colleagues was this question of whether cancer was actually on the increase. Statistical evidence for an increase was strong and frequently cited in the organic medical press, but so, then, were the objections against the methods used to gather and interpret those statistics.⁶¹ One common complaint was that the growth in reported cancer deaths might simply be due to the fact that many more cancers were being diagnosed—a result not