

heritability, but his enthusiasm for more traditional eugenics—to combat the breeding of the feeble-minded, for example—led him to coauthor the official technical manual for the Nazi-era Sterilization Law, published in 1936. His efforts in such areas later earned him the scorn of postwar student activists who occupied his Heidelberg office in 1968 and charged him with Nazi collaboration⁷—not entirely fairly, I would argue. Bauer never joined the Nazi party: he apparently could not have joined, given that his wife, the daughter of an admiral, was one-fourth Jewish, a particularity that also barred him from military service (and may have saved his postwar career).

In 1928, Bauer published the first book-length treatise postulating somatic mutation as the initial event in cancerous growth.⁸ (Somatic mutation means changes in the body's nonreproductive cells—as opposed to changes in the “germ line” reproductive cells, like sperm and eggs.) The American geneticist Hermann J. Muller had recently shown that X-rays could cause mutations in the sperm cells of fruit flies, and Bauer used this to argue that since X-rays could cause cancer, then cancer, too, must be regarded as a product of mutation. Bauer's formulation was simple, and sweeping: “Any form of radiant energy capable of producing mutations

“dem Irrwahn gewisser Rassefanatiker, die da glauben, eine aktivistische eliminatorische Rassenhygiene erfordere spartanische Methoden; missbildete Kinder z. B. gehörten in die Schluchten des Taygetus oder lebensunwertes Leben, z. B. unheilbarer Geisteskranker, sei zu vernichten” (p. 207). Bauer cautioned that an overly aggressive eugenics might inadvertently prevent the birth of a future Wilhelm III of England (born premature), an Alexander von Humboldt (feeble at birth), or a Beethoven (pp. 207–8). Curiously, given his future career, there is no mention of cancer in this book. Bauer did become an avid supporter of the 1933 Sterilization Law, however. After the war, he was rehabilitated by the widely respected philosopher Karl Jaspers, who defended him to the Americans, which allowed him to become the University of Heidelberg's first postwar president. See Bernd Laufs, “Vom Umgang der Medizin mit ihrer Geschichte,” in Hohendorf and Magull-Seltenreich, *Von der Heilkunde zur Massentötung*, pp. 237–41; Cornelia Girmid and Abraham Lauve, “Die vertanen Jahre,” *Frankfurter Rundschau*, October 18, 1986. For a rather superficial evaluation of Bauer's life and work, see *In Memoriam Karl Heinrich Bauer*, ed. Fritz Linder (Berlin: Springer, 1992); compare also Karl Jaspers and K. H. Bauer, *Briefwechsel 1945–1968* (Berlin: Springer, 1983).

is also capable of causing cancer.” His somatic mutation hypothesis was widely accepted by the late 1930s—especially among eugenicists; Otmar von Verschuer in his racial hygiene textbook, for example, stated bluntly that malignant tumors could be regarded as “somatic mutations.”⁹ The mutation theory was attractive to eugenicists worrying about the corruption of the human genetic stock; some of these concerns sound plausible and or even prescient to us today (worries about X-rays and tobacco, for example); others strike us as misconceived, if not horrific (genetic harms from racial intermixing, for example).

In the common understanding of the 1920s and 1930s, genetic variation implied racial variation. It is hardly surprising, therefore, that German scientists sometimes postulated racial predispositions to account for the fact that people in different parts of the world suffered from cancer in differing degrees. Germans, Jews, and Scandinavians, for example, were said to contract cancer more readily than Latins, Slavs, and Celts.¹⁰ Differences in cancer rates among white and black Americans were already well known (the most common view being that blacks were more “resistant”),¹¹ but cancer rates were also said to vary between Jews and other European peoples. Cancer studies in the Ukraine in the early 1930s, for example, seemed to indicate that elderly Jews were more than twice as likely to die of cancer as elderly Ukrainians or Russians; Jews were found to suffer exceptionally high rates of stomach cancer and low rates of uterine, genital, and breast cancer.¹²

Results such as these were sometimes used as proof of Jewish bodily inferiority. We should recall this as a time of efforts to pathologize the Jewish body: Jews were said to have bad eyes, flat feet, and bad backs, along with high rates of mental infirmity, sexual deficiency, and homosexuality.¹³ Jewish diseases were alternately said to be diseases of poverty or of wealth; Jewish stomach cancer, for example, was sometimes said to be a sign, as historian Sander Gilman has noted, of the Jews' “intense striving after wealth.”¹⁴ Nazi physicians selectively drew from those parts of this literature that could be used to establish Jewish physical and mental deficiency. This was one reason Germans and Jews were instructed not to intermarry: Reich Physicians' Führer Gerhard