

from cancer. Dormann's study also showed that the most common cause of cancer death was cancer of the stomach, which accounted for about a third of all male cancer deaths.¹⁹

One of the things revealed by such studies was that cancer was more common than had previously been recognized. Official mortality statistics for the mid-1930s indicated that only 13 percent of all German deaths were from malignancies; Dormann's and other investigations showed, however, that a substantial portion of the nation's cancers were going undiagnosed. Walther Fischer, a Rostock pathologist, claimed that a quarter of all cancers were not recognized during the lifetime of the patient—and that only about half were being diagnosed early enough to permit successful treatment. Hellmut Haubold, an influential Berlin cancer statistician and SS officer, proclaimed that cancer was actually Germany's leading cause of death, surpassing even the major forms of heart disease.²⁰ Rudolf Ramm in 1942 estimated an annual cancer death toll of 150,000 to 160,000 Germans,* not to mention the half a million people sick with the disease at any given time.²¹

Worries about the growing cancer mortality and the imperfections of diagnosis led a number of local cancer associations—in collaboration with the Nazi party's Office of Public Health—to implement mass screening programs. East Prussia's was one of the most ambitious. A 1937 meeting of an East Prussian Anticancer Working Group concluded that all German women over the age of thirty were to be regularly screened for breast and genital cancer. Breast and genital/uterine cancer were targeted since, as the Königsberg gynecologist Felix von Mikulicz-Radecki pointed out, these were among the most easily detected and treated. The screening program was voluntary, but exams were free of charge to encourage

* One of the interesting things about such figures is their deployment as part of a larger apocalyptic drama: alarming statistics of one sort or another were often put forward to stir up worries about a particular danger, the hope being to generate a sharp political response. One finds this in a number of areas of Nazi medicine: in eugenicists' discussions of the threat of genetic inferiors, for example, and in discussions of dire and imminent food shortages. Émigré critics like Martin Gumpert sometimes took such claims at face value—to vilify the regime—failing to understand their larger rhetorical function.

maximal compliance. Doctors' fees were covered by the local branch of the Nazi party's Office of Public Health, which also helped organize the exams. Poor as well as rich were said thereby to benefit equally from the screening process; radio and billboard propaganda encouraged women to visit the centers and newspaper articles extolled the sensibility of screening.

Propaganda was directed especially at women's groups.²² Women from Nazi party organizations were supposed to be the first examined, the hope being that other women would follow in their footsteps. In the city of Königsberg, all public and private hospitals established screening centers, where surgeons looked for breast cancer and gynecologists looked for cancer of the uterine cervix. In 1937, each of the city's screening centers was examining thirty-five to sixty women on any given evening. Mikulicz-Radecki himself examined two thousand women that year, among whom he found three previously hidden cancers (a rectal cancer, an advanced cervical cancer, and an early-stage cervical tumor—plus a number of other disorders having nothing to do with cancer). The breast exam lasted an average of two minutes, the gynecologic exam an average of eight minutes. Organizers emphasized that the screening was supposed to be as pleasant as possible, performed in separate cubicles to give women the impression they were receiving individual attention. Care was taken to ensure that anticancer propaganda would not arouse undue cancer fears (*Krebsangst*); this was a commonly discussed difficulty—how to generate concern without generating panic.²³

Early in the Nazi era, discussions were begun on how to construct a comprehensive Cancer Law (*Krebsgesetz*) involving mandatory registration of all cases of cancer, stronger safeguards against exposures to X-rays and radioactive materials, and limitations on publications by cancer quacks.²⁴ Despite great expectations, however, Germany as a whole never did get a Cancer Law. Only Danzig (now Gdansk, in Poland) passed such a law, on April 14, 1939. The Danzig law required that every case of the disease, and every suspicion of incidence, be reported within six days to state health authorities. It also gave women over the age of thirty and men over forty-five the right to an annual cancer screening