

The Treatment of
Hungarian Jewish
Health Professionals
in the Shadow
of the Holocaust

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By

Julia Bock

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FOREWORD

My mother's escape from the death march in November 1944 was like a miracle. She told me that a Jewish obstetrician, Dr. Árpád Vágó, helped me to come to this world, and the pediatrician who took care of me as a child was Dr. Tibor Vértes. Both died in forced labor service.

As a child in Újlipótvaros I met almost only with Jewish doctors. Dr. Irén Greiner vaccinated me against diphtheria; Dr. Imre Ungár was our family doctor; Imre Biró was the ophthalmologist of the family; and Aladár "Ali" Deutsch was our Ear, Nose & Throat (ENT) doctor.

For many years, I knew nothing about their ordeals. During the socialist era we could not discuss such matters, and only from hints could we even suspect the tragedy that was shared by the Jews. Literature about the period only became available to the public much later.

Prof. Julia Bock has commemorated the Hungarian Jewish health professionals and doctors. The compilation is important and interesting. It is neither large, nor the first one. Its brevity is an advantage as it is thus very readable, and although it is like a lexicon, the author brings the text to life with colorful, relevant stories full of dramatic events. The author provides a panoramic view of the representatives of the Hungarian Jewish health professionals before and during the Holocaust, touching the social, historical, legislative background as well as the condition of the Jewish hospitals. There is also a reflection on outstanding Jewish scientific achievements.

The text would not be complete without mentioning the great love of art of this group of health professionals.

People are emerging from the work whom I fondly remember. Among them is Jenő Ernst, who taught biophysics in Pécs, and whose life was saved by a professor colleague during the Holocaust. There are many anecdotes linked to his name.

Dr. György Rétsági was our family doctor, and Dr. Miklós Kun, the chief psychiatrist, helped me greatly during my summer visits to his institute while I was in medical school; the institute that no longer exists. I developed

such a close personal relationship with him that I almost chose his field, instead of microbiology, my later selection. His institute represented a very humanistic approach during the socialist era that inspired many people. In the 1980s I spent weeks at the Hematology Institute, in the Department of Zsuzsa Hollán. She played a major role in the centralization of the blood supply system in Hungary, a significant improvement in health care. All blood test results were examined, and under her care, the import of blood preparations was stopped. Thanks to her foresight, the HIV/AIDS epidemic reached Hungary relatively late. Also, through her connections, her institute became very well equipped. The last time I met her was in 1985 at a conference in Washington. She didn't immediately recognize me and asked whether I was the chauffeur of the Hungarian embassy in Washington!

I met Dr. Alexander Emed in Jerusalem at a conference in 1982. He had a Hungarian doctor-friend who lived in Kristiansand, Norway. I carried on a correspondence with Dr. Emed and when we ran into each other in a subway station in New York at the beginning of the 90s he asked for my help with his project, and I subsequently collected information about the Hungarian Jewish doctors who practiced in Norway.

One of them was Imre Hercz who was born in Nagyvárad (Oradea, Romania), and survived the concentration camps, and emigrated to Norway after the war. He always helped the Jewish community and maintained close connection with the Norwegian Jewish community.

Professor Bock's work is a thorough examination, done with great care and professional knowledge. It can be read as a story, as a lexicon, or as a scientific work that—like holding our hand—leads us to new territories. With the help of her text we will get an insight into the complex reality of the Hungarian Health professionals' and doctors' lives through difficult periods. These people serve as examples for present and future generations.

(Kristiansand-Budapest; Dec 15, 2015)

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INTRODUCTION

The purpose of this work is to fill a gap in the history of Hungarian Jewish professionals. When browsing the literature of Jewish contributions to the worlds of science and culture, one can readily locate documentation pertaining to Hungarian Jewish achievement in physics and mathematics, but medicine is not among the disciplines for which one finds substantial coverage. Individual biographies are available in lexicons; however, apart from psychoanalysts, medical professionals as a group are not documented. The representative work on the subject, *Jews and Medicine*, published by the Nahum Goldman Museum in 1997,* does not mention the contributions of Hungarian doctors and other health professionals. The title refers to the paradox of the treatment of health care professionals and the treatment provided by them even when their professional and personal freedom was taken.

On the basis of a list from Yad Vashem's Pages of Testimony (the NAMES project prepared by Gavriel Bar Shaked), over 4,500 names were identified from the list of Hungarian victims and survivors, for the doctors' database. In order to write this book, biographical data were collected for nearly 2,000 physicians. The sources included different archives and professional registries such as those of the Holocaust Museum in Washington, the Leo Baeck Institute in New York, the Center for Jewish History in New York, the Museum of Jewish Heritage in New York, the library and archive at Yad Vashem, as well as the National Archives of Hungary in Budapest.

These biographical data served as a source of a collective biography for three generations of doctors and pharmacists comprising a hundred years of history. The information gathered included dates and towns of birth and death, the doctors' experiences during the Holocaust (including forced labor service and deportation); the places they studied; photographs and data on professional affiliations were also collected. The collection of biographical data went beyond published sources; the search was extended to several archives in Hungary, Israel and the United States, as well as Web sources,

* *Jews and Medicine: Religion, Culture, Science*, ed. Natalia BERGER, (Philadelphia, Jewish Publication Society, 1997).

which were used to search for survivors, living relatives, and friends who could provide additional accounts.

One of the chapters follows the evolution of Hungarian official policy from discrimination against, to extermination of, Jewish physicians, pharmacists, dentists, and psychiatrists between the end of World War I and the end of World War II. The most intriguing challenge was that of ascertaining the nature and level of treatment that members of the medical profession were able to provide in the different areas they were positioned—while living in ghettos, as forced laborers, or as inmates in concentration camps after losing their social and professional status. The heroic devotion of the physicians is evident in their actions during a time when even the most basic equipment and medicine were not available.

The characteristic challenges that confronted Hungarian Jewish doctors in their careers and lives were also examined, primarily the effects of the Holocaust on three generations of Hungarian Jewish health professionals (older, middle and younger). Each generation had different chances of survival. Interestingly, the fate of each individual was determined largely by his or her generational group. Legislation fell differently upon them according to their age regarding the availability of school, receiving certificates and job appointments, being called for forced labor service and even during the selection in the concentration camps. A series of restrictive laws were enacted from 1920 until the liberation.

Members of the older generation, born between 1864 and 1894, could study anywhere they could afford to, but all who lived in the countryside were deported. With the approach of the Russian liberating army there was not enough time to carry out the deportation of Jews in Budapest.

Those in the middle generation, born from 1895 to 1919, were limited in where they could study, were often called up for forced labor, and even after their return, were subject to deportation. In the case of the youngest generation, born between 1920 and 1944, entering the medical field altogether was possible only after the war. Their survival was constantly challenged, and for some of them the choice of the field of medicine was influenced by the Holocaust.

In addition, historical data on sociological and cultural aspects of this group of health professionals were compiled by examining the lives of their families as well as the cultural contributions of this multitalented group. Gender issues were also touched on with respect to the choice of field,

deportations, and calls to forced labor service. Moreover, the book explores the influence of music, literature, art, and other pursuits on the doctors' lives.

The book closes with descriptions of the scientific achievements of these three generations of Hungarian physicians. The book is an interdisciplinary account, which combines historical, social, and cultural elements, and is part of a larger project examining the impact of the Holocaust on different professional groups in Hungary.

No lists are complete, especially those relating to the history of Holocaust. Names of victims are steadily emerging, and one of the aims of this project is to draw the attention of people to the need to submit the names and stories of their acquaintances and relatives who are missing from the list.

The project was significantly enhanced by the participation of Dr. Péter András Csángó, the Chief Medical Officer of Diagen International, Sweden, who wrote the Foreword.

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I am especially grateful to Professor Géza Komoróczy for his advice on content and editorial matters during the formulation of the text, as well as to two medical historians who were also instrumental in my work: through his collection of doctors' biographies, Dr. Alexander Emed gave me the opportunity to be engaged with the lives of Jewish doctors. He found unique qualities in each individual about whom he wrote. He combined professional appraisal with human elements that made his articles on the doctors' lives remarkable.* Similarly, the lexicon of the late Dr. Péter Kiss, from Budapest, was essential for this project.† He died before his work was published, but with his widow's permission, I used his manuscript of the Lexicon of Hungarian Jewish Physicians that was later published by Ab Ovo publisher in Budapest, 2016. His collection of data went beyond published sources and included personal interviews. I am also thankful to Dr. Károly Kapronczay, whose Orvostörténeti Lexicon is available online. It lists fewer Jewish physicians than the other two sources, but its accessibility on the internet makes a great contribution. I extend my thanks for sharing information from their databases, to Tamás Kiss at the Holocaust Memorial Center (HDKE), as well as to Gavriel Bar Shaked at NAMES Project (Yad Vashem).

For valuable contact information and knowledge of the field of medicine I am thankful to Dr. Illés Dési (Budapest), Dr. Ervin Varga (Chicago), Dr. George Hermann (New York), Dr. Michael Gyepes (California), Dr. László Szekeres (Szeged), Dr. János Karsai (Israel), Dr. Zsuzsanna Kahán (Szeged) and Prof. Miklós Müller (New York).

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* Alexander Emed, *Zsidó származású magyar orvosok* (Budapest: Fapadoskönyv, 2011).

† Péter Kiss, *Magyar zsidó orvosok: életrajzok gyűjteménye* (Budapest: Ab Ovo, 2016).

(New York), Gábor Gati (Haifa), Olga Kovács (New York), Moshe Golan (Israel), and Ben Ghiora (Israel).

The text gained considerably from the editorial work of Greg Edmondson, Maya Berger and from personal friends and colleagues, who also contributed editorial advice, such as Bonnie Gurewitsch, Patricia Keogh, Anna Szalai, Carina Ramirez Cahan, and Livia Lowy who helped me with data management.

I express my appreciation to the International Institute for Holocaust Research, Yad Vashem, for granting me the Post-Doctoral International Fellowship, especially the head of the program, Professor Dan Michman, the Coordinator of Research Fellowship Eliot Nidam Orvieto, and the Archivist Kinga Frojimovics. The fellowship enabled me to extend my archival research to their extensive archives. Special thanks go to the Tauber Institute of Holocaust Research for choosing me as a participant in their fellowship program and Professor Randolph L. Braham and The J. and O. Winter Fund at the Graduate Center of City University. Their generous financial help made it possible to stay and work in Jerusalem.

Also, my acknowledgements are due to the Museum of Hungarian Jewry at Safed, Israel, its Director, Ron Lusztig, and the entire staff for their valuable help in locating physicians' names and providing information.

Last, but not least, while driving during a major snowstorm in Jerusalem, Daphne and Iddo rescued me and gave me shelter in their home, and their friend Lela, who generously offered me her apartment to stay in and continue my work under optimal circumstances. I am in their debt.

Without my husband Dr. George Bock's unconditional devotion, offering his expertise in technical details, as well as his knowledge of the field of medicine (being a doctor himself) this book would have not been written.

I am deeply moved by the responsiveness of people whom I came across during my work.

CHAPTER 1

SOCIOPOLITICAL CONDITIONS IN HUNGARY DURING THE FIRST DECADES OF THE 20TH CENTURY

World War I led to drastic political, economic, and social changes in Hungary. As a result of the Trianon Treaty, Hungary lost approximately two-thirds of its population and territories to different successor states: Czechoslovakia, Romania, and Yugoslavia. The multinational dualist country separated from Austria and became, for the first time in its history, a homogeneous nation. These events culminated in a pair of revolutions. The first, on October 25, 1918, was led by the aristocrat Mihály Károlyi, who formed a national council composed of his followers, bourgeois radicals, and social democrats; and the second was led by the communist leader Béla Kun. The latter group was overrun by a right-wing regime, and while the country's territory was shrinking, a massive flood of refugees arrived from the successor states, creating turmoil in terms of education, the job market, and all sectors of the economy.

One of the symptoms of the crisis was the overinflated number of students who wanted to attend universities—more than any country in Europe, except for Austria—in addition to an increasing number of professionals returning from former Hungarian territories looking for work. Although that situation seemingly gave the new government an incentive to create a quota system ensuring that Hungarians' interests would prevail, this system was instead used for anti-Semitic discrimination. In 1921, Gyula Gömbös, who became Hungary's prime minister in 1932, said “the Jews should only succeed according to their proportion.”¹

In these tight economic conditions, Jews found themselves increasingly restricted. First, their educational opportunities were curtailed with the

¹ Gyula Gömbös, *Válogatott beszédek és írások*, ed. József Vonyó (Budapest: Osiris, 2004), 87.

enactment of the law of *numerus clausus* in 1920, which aimed to reduce the enrollment of Jewish students to 6% of the student population.² Second, their job opportunities in the free professions were limited because the market was controlled by different professional chambers that allowed only chamber members to have licenses and rejected Jewish doctors.³ Finally, during the later deportations following the German occupation, they became the targets of the Nazis.⁴

After its defeat in World War I, a major desire for revenge overtook the country. Nationalistic attitudes were mixed with a strong anti-Jewish sentiment that started with the *numerus clausus* law and continued with the enactment of three anti-Jewish laws and several decrees that ranged from isolation to the physical annihilation of Jews.

Their similar rage and preparation for World War II made Hungary and Germany natural allies. Hungary officially joined the Axis powers in 1940 after receiving favorable territorial treatment during the dissolution of Czechoslovakia and following the Vienna convention, which re-annexed North Transylvania from Romania.

One of the most prominent physical atrocities committed against Jews was the *Kamenets-Podolsk Massacre*, which took place in late August and early September 1941. Approximately 14,000 people were sent to the newly occupied territories, and an additional 4,000 Jews who could not prove their Hungarian citizenship were massacred by Germans. Those who escaped the massacre were not allowed to return to Hungary.

In January 1942, another incident took place in **Újvidék**, where 1,050 Jews and 2,500 Serbs were murdered by Hungarian soldiers on the pretext that they were partisans.

However, it was not until Germany occupied Hungary on March 19, 1944 that major deportations took place. Up to that point, Hungary had invoked its own anti-Semitic measures, creating the framework of the “final

² Mária M. Kovács, “*A numerus clausus és az orvosi antiszemitizmus a húszas években*,” *Budapesti Negyed* 3 no. 2 (1995): 140.

³ Mária M. Kovács, *Liberalizmus, Radikalizmus, Antiszemitizmus: A Magyar Orvosi, Ügyvédi és Mérnöki kar politikája 1867 és 1945 között* (Budapest: Helikon Kiadó, 2001), 178.

⁴ *Ibid.*

solution” first with restrictive legislation and later with organized massacres.

Deportations started with the roundups of April 7, 1944, initially isolating the Jewish population in the countryside, followed by concentrating them in ghettos, and then the departure of the first train to Birkenau on May 14. Deportations were officially discontinued by Miklós Horthy on July 8, and the last mass transport arrived at Auschwitz on July 9. Additional transportation took place on August 18 with the deportation of 152 Jews to Auschwitz.

In October 1944, Miklós Horthy unsuccessfully attempted to end the war. Subsequently, he was removed from office by force, and Ferenc Szálasi, the leader of the Hungarian Fascist party and the Arrow Cross military group, took over the government for the final three months of Hungary’s participation in World War II. Horthy was later arrested. After appearing as a witness at the Nuremberg war-crimes trials in 1948, Horthy settled and lived out his remaining years in exile in Portugal. During Ferenc Szálasi’s brief rule, there were numerous atrocities, and Jews were murdered without restriction.⁵ Between October 1944 and the Soviet army’s liberation of Budapest on January 17, 1945, people were taken to the embankment of the Danube to be killed, and death marches to the western border were organized. These death marches included men 16 to 60 years of age and, later, women; 76,000 people were handed over to the Germans after the deportations were officially discontinued.⁶

⁵ Raphael Patai, *The Jews of Hungary: History, Culture, Psychology* (Detroit, MI: Wayne State University Press, 1996), 590.

⁶ Géza Komoróczy, *A zsidók története Magyarországon*, v. 2 (Pozsony: Kalligram, 2012), 809.

CHAPTER 2

LAWS CONCERNING THE STATUS OF JEWS IN HUNGARY

Law IX of 1849: Parliament voted for the equal rights of Jewish citizens,⁷ but it never came into force and had only symbolic value.

Laws enacted during the dual monarchy with Austria

Law XVII of 1867: This law, for the first time, enforced the equality of Jews as citizens, showing the strong commitment to the 1848 revolution.⁸

Law XXXI of 1894: Marriage law

Law XLII of 1895: This law established the equality of Judaism with other accepted religions in Hungary.⁹

Laws and regulations concerning the status of professionals between World Wars:

Law XXV of 1920: The Numerus Clausus. Restrictions in enrollments to universities were applied across Europe during this period, but racial restrictions were enforced only in Hungary. The numerus clausus law enforced a quota system and created a special category for Jews according to which only 6% of the Jewish population could enroll. Although the István Bethlen government eliminated the racially discriminatory phrasing in its modification of the **Law XIV of 1928**, it established a precedent in the treatment of so-called “foreign elements” of Hungarian professionals.

⁷ Géza Komoróczy, *Nekem itt zsidónak kell lenni. Források és Dokumentumok* (Pozsony: Kalligram, 2013), 683-684.

⁸ *Ibid*, 729-730.

⁹ *Ibid*, 838-840.

Law XXX of 1936: The Coding of the 1929 Geneva Convention to improve the situation of wounded military patients and prisoners of war.

Persecuted Jews could not be treated as prisoners of war and were thus not protected by the Geneva Convention. This notion was shared by the Hungarian Red Cross as well, and military medical service was limited.

Other laws enforcing Jewish population restrictions:

Law I of 1936: Medical Regulation: during the debate in 1935, it became apparent that practicing doctors needed to be part of the medical chamber.

Law XV of 1938: This first Jewish law made anti-Semitic policies official, discriminating against people according to their religion and limiting Jewish participation in the free professions to 20%. The law led to 90,000 Jews losing their jobs, with 220,000 family members affected.

Law II of 1939: Defense Law: Paragraph 230 created the legal basis for a forced labor system.¹⁰

Law IV of 1939: The second Jewish law defined Judaism as racially exclusive (including only those who belonged to the Jewish faith and those with at least with one parent and two grandparents who belonged to that faith) but exempted converts to Judaism. It further limited Jewish participation to 6% in the political and economic spheres, and the numbers of Jews in companies were regulated.¹¹

Law XIX of 1940: Creation and organization of Chambers for the Arts.¹²

¹⁰ Randolph L. Braham, "Fontosabb zsidó tárgyú törvények és rendeletek Magyarországon. (1849-2000)," in *Tanulmányok a Holokausztról.*, ed. Randolph L. Braham, *V. I. Függelék*, (Budapest: Balassi Kiadó, 2001), 203-213.

¹¹ *Ibid.*

¹² *Ibid.*

Law XV of 1941: The third Jewish law prohibited marriages between Jews and non-Jews. The law also defined Jewish identity as including at least three Jewish ancestors.

Law VIII of 1942: This law eliminated the equality of the Jewish faith with other accepted religions that had been granted by Law XLII of 1895. In addition, it forbade conversion to Judaism and removed government support for Jewish congregations.

Law of XIV of 1942: Modification of II of the 1939 Home Defense law (forced labor service).

Law XV of 1942: The fourth Jewish law removed the right of Jews to buy property.¹³

Decrees in 1944 after the German occupation completed the restriction of Jewish professionals working in public-service positions and with jobs in public commissions.

Among the 107 regulations enacted between March 29 and December 6, 1944, some were explicitly harmful to the **economic and personal interests** of the Jewish population and the Jewish medical establishment in particular:

Law 550/44: Inventory and evaluation of Jewish pharmacies.

Law 3840/44 M.E.: Confiscation of Jewish property for compensation of war expenses.

Law 1.240/44: Compulsory wearing of a yellow star for every Jewish citizen older than 6 years.

Law 1.370/44 M.E.: Issuing of certificates to Jewish pharmacists was no longer allowed.

Laws 1.530 M.E., 1.730/44, and 2040/44: Oversight of exemptions from Jewish laws (also 3.780/44).

Law 1.540 M.E.: Prohibition of employment of Jewish citizens in intellectual fields.

¹³ László Szmodits and Szabolcs Dobson, *A Magyar Zsidóság és a Gyógyszerészet 1945-ig* (Budapest: Magyar Gyógyszerésztörténelmi Társaság, 2014), 22.

Law 1.580/44 M.E.: Termination of issuance of new certificates for profitable activities, including medical and pharmaceutical businesses.

Law 188/358/44: Regulation of the Intellectual Unemployment Agency's governmental officer for those applying for certificates (also 189.821/44 regarding dismissal of Jewish employees).

Law 1.600/44 M.E.: Reporting and closing of Jewish property (also 3.050/44, 3.840/44 M.E., 2.650/44 M.E.).

Law 1.990/44 M.E.: Restriction on issuing pharmaceutical certificates and opening hours.

Law 2.250/44 M.E.: Regulation of Jewish medical practices and membership in the medical chamber.

A number of other personal rights were targeted, including Jewish telephone services (1.140/44 M.E.), radio equipment (1.300/44 M.E.; 1.490/44), and their compulsory delivery (217.300/44 K.K.M). Employment of non-Jewish staff in Jewish businesses (1.200/44) and households (396/44) was also restricted. In addition, a series of regulations regarding where Jews could live were instituted with the intention of creating a ghetto (147.501-514/44. IX).¹⁴ Law 108.500/44 K.M ensured the food supply for Jews was regulated.

Law 2250/44 ME, regarding the practices of physicians and their membership in a medical chamber, declared that since “manifestation of trust and ethics cannot be expected towards and from Jewish doctors”, **Jewish physicians**, even those in private practice, **may only treat Jewish patients**. This decree also discontinued employment of Jews in the public service and prohibited them from auxiliary military service and travel to their workplace. The many policies instituted led to a large discrepancy in the percentage of Jewish physicians working in public practice; specifically, 75% of Jewish physicians were **in private** practice, while Christian physicians were primarily employed in the public sector (66%).¹⁵ The objective of excluding Jewish physicians from the public sector initially

¹⁴ Randolph L. Braham, ed., *Tanulmányok a Holokausztról*, v. 1. (Budapest: Balassi Kiadó, 2001-2018), 203–213.

¹⁵ Kovács. *Liberalizmus*, 178.

backfired since they earned more in private practice than did their public-sector colleagues.

CHAPTER 3

OVERVIEW OF THE HISTORY OF JEWISH HEALTH PROFESSIONALS

The most significant achievement of this group of health professionals is that they **were able to establish themselves as providing medical services at a level of excellence in a crisis situation.** The lives of three generations of doctors were touched by the Holocaust in different ways, and thus part of the focus of our work was on examining these three generations and the obstacles they faced.

Among the many restrictions that impeded Jewish professionals from excelling for a long time was that entering medical school was not possible for Jews in Hungary. Eminent doctors had finished their studies elsewhere, and only at the end of the eighteenth century were they finally allowed to sit their exams at the University of Nagyszombat. The first Hungarian Jew permitted to enter the university in Buda was Jozsef Manes Oesterreicher, who finished his studies in 1782.¹⁶

It was an interesting phenomenon, because Jewish physicians were employed in the highest circles, by II. Ulászló and Princes Gábor Bethlen and Mihály Apaffy.

Oesterreicher had a very great impact on the Hungarian medical system, establishing the discipline of balneology as well as the institute at Balatonfüred. He was in practice, made scientific studies, and invented a device that determined when food had been adulterated. He also developed a method of creating salt, and Emperor Francis II was so impressed that despite his anti-Jewish sentiments, Oesterreicher received the title of Chief Doctor of the Chamber and permission to continue his experiments in the Technical Institute. During the emancipation process, anti-Jewish obstacles were slowly removed.

¹⁶ Péter Róbert, *Kórház a Szabolcs utcában.* (Budapest: 2007, XIII kerületi helytörténeti füzetek), 5–7.

Among the big names, we should mention Ignác Hirschler¹⁷ (Stomfa, 1823. March. 3. – Bp., 1891. Nov. 11.), an ophthalmologist, who finished his studies in Vienna in 1840 and, after working in Vienna and Paris, returned to Pest in 1849. In 1851, his application for a university position was turned down because of his origins, but he became the secretary, and later the vice president, of the Medical Association, and from 1859 the chief ophthalmologist at the Rókus Hospital and the Children's Hospital for the Poor. He was also the editor of the prestigious *Medical Weekly* (*Orvosi Hetilap*) and the pioneer of Hungarian Jewish emancipation.

A later chapter on female doctors deals particularly with the relatively late participation of women in the medical profession; the first Hungarian woman to receive a medical degree in Budapest¹⁸ was a Jewish physician, Sarolta Steinberger, in 1900, and in 1906 Erzsébet Légrády, who was also Jewish, became the first woman to receive a pharmaceutical degree.¹⁹

The older generation experienced the peaceful years of the dual Austro-Hungarian Empire and, characteristic of the pre-World War I period, participated in its achievements. According to Alex Emed, the noted medical historian and pediatrician, whole fields—such as otolaryngology—under the first chair, Ádám Politzer, became “Hungarian Chairs” at the Second Medical School in Vienna, where 36 other Hungarian Jewish physicians were employed.²⁰

The older generation of doctors had broader school and career opportunities than the later ones. They were thus better able to take advantage of the opportunities available in postgraduate training and medical specializations. The dissolution of the monarchy, however, brought to an end their free access to educational opportunities and to the job market. The dramatic changes in the political, economic, and ethnic status of Hungary, including the introduction of the quota system, had a particularly negative impact on Jewish professional groups. Under the dual monarchy, in order to keep the Hungarian population large enough to claim the shared leadership with their

¹⁷ Károly Kapronczay, “*Magyar Orvoséletrajzi Lexikon*”

<http://www.tankonyvtar.hu/hu/tartalom/tkt/magyar-orvoseletrajzi/ch03s12.html>, Accessed 11-4-15.

¹⁸ Ágnes Kenyeres ed., *Magyar Életrajzi Lexikon*, (Budapest: Akadémiai Kiadó, 1967), v. 2, 656.

¹⁹ Alexander Emed, Tiborné Engländer and Frigyes Eszéki, eds., *Kik voltak ők? Nemzetközi zsidó életrajzi lexikon*, (Budapest: Békés Print Krt. 2004), 432–3.

²⁰ Alexander Emed, “Hungarian Physicians in Vienna,” *Orvosi Hetilap* 144, no. 14 (2003): 669–70; 144. no. 36 (2003) :1791–2.

Austrian counterpart, Jewish votes in the multinational territories were important, so counted as Hungarian. But once the new Hungary had become homogeneous, it no longer needed the votes of the Jewish population. Medical school choices for the older Jewish generation were mainly determined by their financial means, but later their race also became a deciding factor.

New fields like psychoanalysis became more frequent choices, as opposed to such previously preferred areas as internal medicine. Following Freud's footsteps in Vienna, Sándor Ferenczi in Hungary transformed a narrow informative movement into an innovative network based on several institutions and associations at the regional, national, and international levels. The *psychoanalytical movement* made connections with the medical field and literary and artistic circles; connections with the medical field provided good career and mobility opportunities, as well as a means of assimilation for Jewish practitioners. The medical field, which has less emphasis on language, and engineering were the best choices in a very diverse era, as the psychiatrist Ferenc Erős pointed out when characterizing the post-WWI period. Acquiring faculty status for the new discipline was not achieved without overcoming the strong opposition from the medical and official establishments.²¹

The Galilei Circle was established in 1908, and it rapidly grew to a 256-member institution. The group, founded by Ernő Seidler, consisted of students who considered themselves radical social democrats. The circle was closed by the government on January 12, 1918, followed by a vast number of arrests of anti-war protesters.²² Two-thirds of the membership were Jewish, among them the following doctors and pharmacists (five from the older, and seven from the middle, generation): Lilly Hajdú, Sándor Flamm, Edit Gyömrői, Julia György, Mátyás György, Endre Hedri-Schossberger, Zsigmond Kende-Klein, Béla Neufeld, Mihály Polányi, József Reichard, Lilian Rotter, and Gyula Surányi.

²¹ Ferenc Erős, "A psychoanalysis a budapesti egyetem orvoskarán 1918–19," in *Zsidóság- tradícionális és modernitás: Tisztelegő kötet Karády Viktor 75. születésnapja alkalmából*, eds., Zsuzsanna Hanna Biró and Péter Tibor Nagy (Budapest: Wesley János Lelkészképző Főiskola, 2012), 130.

²² Mario Fenyő, "Literature and Political Change: Budapest, 1908–1918" *Transactions*, 77, no. 6 (1987): 94–99.

From 1920 on, the middle generation faced many limitations, and with the introduction of the numerus clausus law, large numbers of this generation were forced to leave the country and study abroad. When they entered the job market, they typically encountered further barriers that often forced them into private practice since they were barred from public positions. Professional associations played a crucial role in excluding Jewish professionals from the job market. The early discrimination embodied in Nazi laws slowly changed to a complete economic and physical collapse of the Jewish population; many doctors were called up to do forced labor and, after their return, were deported to concentration camps.

By the time that the younger generation was ready to enter university studies, the Numerus Nullus law barred them from doing so, and for the most part they did not reach the appropriate age, being too young to enter college. Therefore, as a group, their options for study arrived only after WWII.

CHAPTER 4

STATISTICAL ACCOUNTS OF THE MEDICAL PROFESSION

It is difficult to draw a clear picture of the division of medical fields in war time: physicians made several career changes; and they form a group of multiple achievers in different disciplines, and in very diverse fields. The effect that the war and persecution had on these professionals is clear: constant changes in their careers were a necessity and forced them to make priorities, which not only ensured survival but also resulted in excellence.

An examination of biographical accounts of health professionals during this period shows that 10% were female doctors.

Middle generation 45%
Oldest generation 35%
Youngest generation 10%
No birth date available 10%

Jewish Enrollment in Medical Schools			
1900	1910	1920	1935
44%	50%	10.4%	8.3%

The diagram shows the *changes of Jewish enrollments* in medical schools: increased in 1910 but reduced by 1935.²³

²³ Mária M. Kovács, "A numerus clausus és az orvosi antiszemitizmus a húszas években," *Budapesti Negyed* 3, no. 2 (1995): 137-158.

Effect of Jewish Laws on Jewish Professionals		
	1920	1939
Lawyers	51%	39.5%
Engineers	33.1%	13%
Physicians	46%	31%

Polarization:

Jewish Physicians—75% in private practice.

Christian Physicians—66% in the public sector.²⁴

²⁴ Kovács, *Liberalizmus*, 154.

CHAPTER 5

THE HUNGARIAN HEALTH SYSTEM AND THE MEDICAL ESTABLISHMENT

There were two main aspects of the health care system during and after the Dualistic period. One was the liberal idea of organizing medical care according to the requirement of the market. The other was a government-controlled protectionist system. A mixture of the two was built up in Austria-Hungary, where the medical establishment created their own associations for protecting their interests; whether the influence came from the left or right was not always clear, but they both criticized the new capitalist way of life, finding the economy too weak to create a well-organized system by itself.

After WWI, with the new establishment, the bourgeoisie and the Communist revolutionaries in 1919, adopted a new medical care system, protecting the poor and children, but it did not last long, and in the same year a new medical association emerged, the “Magyar Orvosok Nemzeti Egyesülete” (MONE) that united “Christian-nationalist doctors” and drastically limited the number of Jewish students. A fraternal association emerged, the Turul, and the Csaba organization had a Christian-nationalist orientation for medical students. In the 1920s, during the Horthy era, a double standard developed with low-salaried public medical officers allowed to benefit from private practice.

The countryside was very poorly managed, the death rate and the level of contagious diseases were high, and the country was not able to pay for any advanced care. The Gyula Gömbös Health Policy Society represented both unemployed doctors and those in private practice (mostly of Jewish origin). New legislation was constructed based on MONE’s intentions.

The #I law of 1936, “About Medical Care”, which was in effect between 1936 and 1945, represented the (Közalkalmazottak) “public service” incentives of the National Medical Association. In 1938, the first Jewish law specified the importance of national status of the citizens; in 1939, it regulated the payments the doctors should receive and urged stricter

measures against Jewish doctors, including expelling them from the chamber. A list was created of Jewish doctors to be called to forced labor (the list was sent to **Defense**) and suggesting their deportation (the list was also sent to the **Ministry of the Interior**). As a result of this list, more than half of the Jewish doctors were exterminated.²⁵

But even in the big cities and including the Jewish Hospital in Budapest, doctors often worked at clinics without pay to maintain a continuous working relationship in the field. It is hard to imagine how doctors managed to live in these conditions. In his memoirs, **László Tauber** wrote that at the Jewish Hospital only food was provided to the doctors, who worked without payment.²⁶ During an interview with Dr. **Andrew Mester**, the son of the surgeon **Endre Mester**, he described the case of the famous doctor **Lajos Ádám**, who refused to take his salary in order to pay for the treatment of poor patients, and of some the medical staff, who also worked without salary.²⁷

The quota system

The idea was originally introduced in 1901, by Jenő Pollák, as a way of treating the problem of overcrowded intellectual fields; it was brought up again during a debate in Parliament in 1910. It was a common phenomenon in Central Europe, especially in Austria and Hungary, that in the so-called free professions, doctors, engineers, and lawyers had problems finding work, owing to the Trianon Peace Treaties that caused an influx of professional people from the successor states. It was necessary to find some solution, but the 1920 Hungarian numerus clausus law was the first time in Europe that racial measurements were used to eliminate the problem.

University system

The dissolution of the Austro-Hungarian Empire in 1918 had a big impact on the education system. After 1918, out of the three universities in Hungary only **Pázmány Péter University** in Budapest remained intact; **Ferenc Joseph University** moved from Kolozsvár to Szeged and began operating in 1920, **Queen Elisabeth University** moved from Pozsony (Bratislava in

²⁵ Magyar Orvosi Kamara. MOK története, www.mok.hu/info.aspx?=19.

²⁶ László N. Tauber, *The broken bridge. Thou shalt not give up. The life of a Holocaust survivor* (Jerusalem: The Tauber Foundation, 2000), 269.

²⁷ E-mail correspondence with Dr. Andrew Mester on February 17, 2013