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From “Action T4” to “decentralized euthanasia” in Lower Austria: The psychiatric hospitals of Gugging, Mauer-Öhling and Ybbs

Introduction

The history of psychiatry in Nazi Germany is inextricably linked to the murder of tens of thousands of patients. There were three main complexes under which this was carried out, which were all organized differently, operated according to different time scales, and had different goals. The best known is the so-called “Action T4”, which ran from 1939 to 1941 and under which around 70,000 people were killed in six central extermination centres. Schloss Hartheim, near Linz, and the other extermination centres of “T4” represent the first institutions in history set up to facilitate the mass destruction of people. They were a model and precursor for the death camps of Operation Reinhardt in occupied Poland, where murder would take place on an even bigger scale. After Hitler stopped “T4” at the end of August 1941, the killings moved from the extermination centres to the psychiatric hospitals themselves, which resulted in significant regional differences, depending on specific circumstances and individual initiatives. For this second phase, the term “decentralized euthanasia” has become customary in the literature. The third programme was that of “child euthanasia,” by which the killing of children considered “unworthy” was intended to become a permanent part of the public health care system, as the example of the Viennese child euthanasia centre “Am Spiegelgrund” (where nearly 800 children died) shows.

During the period between the cancellation of T4 in 1941 and the end of the war, some of the most gruesome medical crimes on Austrian territory took place in Gugging and Mauer-Öhling. The main perpetrator, Emil Gelný, murdered several hundred people with poison and a converted electroshock apparatus. In addition, many more patients died of hunger, infectious diseases or neglect, or were deported to institutions where they had little chance of survival—something which until now has barely been acknowledged due to a narrow focus on Gelný’s activities. As the following will show, this has led to a stark underestimation of the number of victims in the two

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largest psychiatric hospitals in Lower Austria. The research data for these events is highly inconsistent. On the one hand, the “Action T4” deportations and Gelny’s murders were documented relatively early on.¹ The documents from the People’s Court trials of 1946, against doctors and nursing staff from the two institutions, were the main source for later accounts, which however primarily focused on the Gugging institution.² When it comes to Mauer-Öhling, however, there is still no comprehensive account, particularly regarding an analysis of the institutions’s medical records, which have since been taken over by the Lower Austrian State Archives.³ The Ybbs institution was under the administrative control of the Vienna City Administration and served during the T4 transports as an intermediate institution for deportations from the psychiatric hospital Am Steinhof to Hartheim. Given its geographical position in Lower Austria, it too will be dealt with in this paper, albeit only at a cursory level.⁴

After the war, the authorities focused on identifying those guilty of individual, direct acts of homicide, which could be punished by means of the criminal justice system. By contrast, the consequences of neglect and food deprivation were not even contemplated, although in many mental institutions they had been part of the repertoire of covert killing methods used during the war. It was only a few years ago that the Lower Austrian Provincial Government and the Institute of Science and Technology Austria (which now occupies the site belonging to the former Gugging psychiatric hospital) financed a project by this author which included an in-depth examination of

¹ Wolfgang Neugebauer, “Euthanasie” und Zwangssterilisierung, in: Dokumentationsarchiv des österreichischen Widerstandes (ed.), *Widerstand und Verfolgung in Niederösterreich*, Volume 3, Vienna 1987, 632-682.

² Wolfgang Neugebauer, *Zur Rolle der Psychiatrie im Nationalsozialismus (am Beispiel Gugging)*, in: *Gemeindenähe Psychiatrie* 17 (1996), 151-165; as well as the articles in the anthology Reinelde Motz-Linhart (ed.), *Psychiatrie ohne Menschlichkeit, Gugging 1938-1945*, St. Pölten 2008 (especially those of Wolfgang Neugebauer, Gertrude Langer-Ostrawsky, Gerhard Fürstler and Claudia Spring) as well as Angela Danbauer’s Angela Danbauer, *Die Heil- und Pflegeanstalt Gugging während der NS-Zeit* (master’s thesis), Vienna 2011. Gertrude Langer-Ostrawsky discusses the use of patient case files as sources in *Medizingeschichtliche Quellen. Probleme und Methoden in der Bearbeitung der Akten der Niederösterreichischen Heil- und Pflegeanstalten Gugging und Mauer-Öhling 1938-1945*, in: Sonia Horn/Peter Malina (ed.), *Medizin im Nationalsozialismus. Wege der Aufarbeitung*, Wien 2002, 18-28. The focus of Gerhard Fürstler/Peter Malina’s “Ich tat nur meinen Dienst.” *Zur Geschichte der Krankenpflege in Österreich in der NS-Zeit*, Vienna 2004, is on the nursing staff from both institutions. The mentioned files from the court case are located (as copies) in the Documentation Centre of the Austrian Resistance (DÖW 18.860/1-100).

³ Since Michaela Gaunerstorfer’s (unpublished) master’s thesis, *Michaela Gaunerstorfer, Die psychiatrische Heil- und Pflegeanstalt Mauer-Öhling 1938-1945*, Vienna 1989, there has been no notable work on Mauer-Öhling, with the exception of the quoted publications from Fürstler and Malina. A research project on Mauer-Öhling during National Socialism is currently in preparation at the Institute for Jewish History in Austria. A brief overview of euthanasia in Lower Austria is also provided by Wolfgang Neugebauer, *Die NS-Euthanasiemorde in Niederösterreich 1940-1945*, in: Heinz Arnberger/Claudia Kuretsidis-Haider (ed.), *Gedenken und Mahnen in Niederösterreich. Erinnerungszeichen zu Widerstand, Verfolgung, Exil und Befreiung*, Wien 2011, 144-148.

⁴ Regarding the T4 transports from Steinhof and Ybbs, see Pia Schönberger/Susanne Üblackner, “...in eine nicht genannte Anstalt versetzt.” *Die “T4”-Opfer der Wiener Anstalten “Am Steinhof” und Ybbs an der Donau. Eine Projekt- und Forschungsstandbeschreibung*, in: Brigitte Kepplinger et al. (ed.), *Tötungsanstalt Hartheim*, Linz 2008, 325-357. All three institutions in the focus of this paper continued functioning as psychiatric hospitals after 1945. The Gugging hospital was closed at its historic location and partly relocated in 2007; the premises became the ISTA campus. Mauer-Öhling and Ybbs are still in use in line with their original functions (*Therapiezentrum Ybbs-Psychiatrisches Krankenhaus* and *Landeskrankenhaus Mauer, Psychiatrische Abteilung*).

the patients' movements at the institution, and thus gives a more accurate insight into the true extent of how many died at the hospital during the war years.⁵ In addition to a presentation of the key project results regarding the "decentralized euthanasia" in Gugging and a summary of the effects of the other "euthanasia programs" on the institution's patients, the following pages will also look at Ybbs and Mauer-Öhling, to give at least a provisional overall picture of the extermination of psychiatric patients in the "Lower Danube" Reichsgau (roughly today's province of Lower Austria). The focus on the provincial level is justified by the fact that especially in the second, decentralized phase of the "euthanasia" killings the Reichsgau's administrative authorities played a decisive role, which can also be demonstrated to be the case in Lower Austria.⁶

"Action T4"

An oft quoted order of Hitler's from October 1939 to his personal physician Karl Brandt and the leader of the "Fuhrer's Chancellery" Philipp Bouhler is rightly considered a crucial step in the preparation of the euthanasia murders.⁷ With the order, written on private stationery and intended above all to serve as an authorization for the proposed measures vis-à-vis the state administration and the judiciary, Hitler chose "the most radical and far-reaching option, namely to organise secret patient killings within the Nazi state's zones of lawlessness."⁸ It was only in the year that Poland was invaded that concrete preparations began as to the definition of responsibilities, the recruitment

⁵ "Nazi Medical Crimes in the former Gugging Psychiatric Hospital," research assignment for Herwig Czech from the I.S.T. Austria and the Lower Austrian Provincial Government, January 2008 until December 2009. The original German version of this paper has been published as Herwig Czech, Von der "Aktion T4" zur "dezentralen Euthanasie." Die niederösterreichischen Heil- und Pflegeanstalten Gugging, Mauer-Öhling und Ybbs, in: Jahrbuch des Dokumentationsarchivs des österreichischen Widerstandes (2016), 219-266. Preliminary results of the project have previously been published in id., NS-Medizinverbrechen an Patienten der Heil- und Pflegeanstalt Gugging, in: Stadt Klosterneuburg (ed.), Von der Anstalt zum Campus. Geschichte und Architektur des Krankenhauses in Maria Gugging, Klosterneuburg 2009, 51-61; id., Nationalsozialistische Medizinverbrechen in der Heil- und Pflegeanstalt Gugging, in: Linda Erker et al. (ed.), Update! Perspektiven der Zeitgeschichte. Zeitgeschichtstage 2010, Innsbruck/Vienna/Bolzano 2012, 573-581. The author wishes to thank Philipp Mettauer, Kamila Uzarczyk and Georg Maißer for their help with the data collection. Special thanks go to the I.S.T.A. and the Lower Austrian State Archive (NÖLA) for their cooperation, and to Rosie Waites for the translation of this text.

⁶ For the importance of the regional authorities in carrying out "decentralized euthanasia" see, among others, Brigitte Kepplinger, Regionalisierter Krankenmord. Voraussetzungen und Strukturen der nationalsozialistischen Patiententötungen außerhalb der zentral gesteuerten Programme, in: Bertrand Perz et al. (ed.), Schlussbericht der Kommission zur Untersuchung der Vorgänge um den Anstaltsfriedhof des Psychiatrischen Krankenhauses in Hall in Tirol in den Jahren 1942 bis 1945, Innsbruck, 2014, 49-82. Kepplinger describes the four states or provinces of Saxony, Bavaria, Hesse-Nassau and Pomerania as the main regions for the decentralized patient killings in pre-Anschluss Germany, and in Austria only the Upper Danube (Upper Austria) and Carinthia, but not the Lower Danube or Vienna.

⁷ For example, Ernst Klee, "Euthanasie" im Dritten Reich. Die "Vernichtung lebensunwerten Lebens," Frankfurt am Main 2010, 114-8.

⁸ Winfried Süß, Krankenmord. Forschungsstand und Forschungsfragen zur Geschichte der nationalsozialistischen "Euthanasie," in: Theresia Bauer/Winfried Süß (ed.), NS-Diktatur, DDR, Bundesrepublik. Drei Zeitgeschichten des vereinigten Deutschland. Werkstattberichte, Neuried 2000, 47-86, 48.

of staff and the construction of a secret, special bureaucracy to enforce the programme.⁹ For this purpose the Führer's Chancellery (Kanzlei des Führers or KdF) set up several front organisations, which later became known as "T4" because of their location in Berlin's Tiergartenstrasse 4.¹⁰ Without the active cooperation of public authorities the KdF (a Nazi party office without any formal powers) would never have been able to realize its far-reaching plans. This applies in particular to the Interior Ministry and its Department of Public Health. In September 1939 it began to collect information on potential victims for the euthanasia programme.¹¹ The registration forms compiled during this process were used a short while later by specially designated "experts" (Gutachter) as the basis for their decisions on who to kill.

In order to murder the selected victims, T4 established six extermination centres, of which up to four were in operation simultaneously. In annexed Austria the T4 organisation leased Schloss Hartheim in Alkoven, near Linz. In the winter of 1939/40 it was modified for its new purpose. After the necessary staff had been recruited, the first psychiatric hospital patients died in the gas chamber in May 1940.¹² There is ample literature on the mass killings at Hartheim, the findings of which need not be repeated here in detail.¹³ Diverging from the established practice in the "Old Reich" (pre-Anschluss Germany), in the "Ostmark" the registration forms were not completed by the staff of the psychiatric hospitals but by special commissions sent by T4. This method of selection turned out to be far more radical than that used in the "Old Reich." Within a short time large psychiatric institutions were totally or partially evacuated, their inhabitants were gassed in Hartheim and the corpses were burnt. In this way 62.4 per cent of all patients in public psychiatric hospitals (based on the number of existing beds) were killed in Ostmark, under T4. Using this method of calculation, 63.5 per cent were killed in Mauer-Öhling and 82.7 per cent in Ybbs.¹⁴ In the Vienna psychiatric

⁹ Ulf Schmidt, *Kriegsausbruch und "Euthanasie."* Neue Forschungsergebnisse zum "Knauer Kind" im Jahre 1939, in: Andreas Frewer/Clemens Eickhoff (ed.) "Euthanasie" und die aktuelle Sterbehilfe-Debatte. Die historischen Hintergründe medizinischer Ethik, Frankfurt am Main/New York 2000, 120-143; Udo Benzenhöfer, *Bemerkungen zur Planung bei der NS-"Euthanasie,"* in: Arbeitskreis zur Erforschung der nationalsozialistischen "Euthanasie" und Zwangssterilisation (ed.), *Der sächsische Sonderweg bei der NS-"Euthanasie,"* Ulm 2001, 21-53; Süß, *Krankenmord.*

¹⁰ For the organizational structure of T4, see Henry Friedlander, *Der Weg zum NS-Genozid. Von der Euthanasie zur Endlösung,* Berlin 1997, 121-35.

¹¹ Instructions from the Reich Interior Ministry for filling out the T4 "registration form," cited by Jochen-Christoph Kaiser et al., *Eugenik, Sterilisation, "Euthanasie."* Politische Biologie in Deutschland 1895-1945. Eine Dokumentation, Berlin 1992, 251.

¹² Henry Friedlander, *Damals in der Ostmark. Die Mordanstalten in und bei Linz,* in: Fritz Mayrhofer/Walter Schuster (ed.), *Nationalsozialismus in Linz. Volume 2,* Linz 2001, 1025-1040, 1025.

¹³ For example *ibid.*; Brigitte Kepplinger, *Die Tötungsanstalt Hartheim 1940-1945,* in: Institut für Gesellschafts- und Sozialpolitik an der Johannes Kepler-Universität Linz u. a. (ed.), *Der Wert des Lebens: Gedenken/Lernen/Begreifen,* Linz 2003, 85-115.

¹⁴ Brigitte Kepplinger, *NS-Euthanasie in Österreich: Die "Aktion T4" - Struktur und Ablauf,* in: Brigitte Kepplinger et al. (ed.), *Tötungsanstalt Hartheim,* Linz 2008, 35-62, 52-3.

hospital Am Steinhof, around 3,200 people—two thirds of patients—fell victim to Action T4.¹⁵ In Gugging, 50.5 per cent of patients were transported to Hartheim (based on the actual number of patients on 1st November 1940, shortly before the first transport).¹⁶

The claim that Action T4 was aimed solely at the destruction of the “mentally dead” was, from the beginning, a euphemistic lie. By 1941 at the latest, it was dropped from the internal discourse of the killing bureaucracy as shown by the following statement: “The elimination of all those who are unable, even within institutions, to carry out productive work, not only the mentally dead.”¹⁷ As a quantitative analysis of a large sample of the T4 medical records held in the German Federal Archives demonstrated, there was no significant correlation between the factors of inherited disease and social deviance on the one hand, and selection for the gas chamber on the other. The most important factor for selection was first and foremost a negative evaluation of work performance. Another significant factor when it came to being selected for the T4 killing programme was a stay of more than four years within an institution, and a negative appraisal of behaviour (seen as increasing the cost of care). Women were also in significantly greater danger of being selected for killing.¹⁸

Action T4 in the Lower Austrian Mental Hospitals

In the Gau Lower Danube (formerly Lower Austria), as was the case in other provinces, the Gauleiter was informed by an official from Berlin of the impending patient killings. The head of the Gau administration Sepp Mayer testified before the People’s Court after the war that in 1939 or 1940 he learnt through Gauleiter Hugo Jury that Leonardo Conti, the Reich health leader, had visited Jury and told him “that euthanasia will soon be carried out in the Gau.”¹⁹ From 1939 patients

¹⁵ Wilhelm Podhajsky, Speech by Director Primarius Dr. Wilhelm Podhajsky, held in celebration of the 50th anniversary of the founding of “Am Steinhof” psychiatric hospital on October 8th 1957, in: Wiener Zeitschrift für Nervenheilkunde und deren Grenzgebiete 14 (1959), 345-349.

¹⁶ As part of the aforementioned research project (see footnote 5), information on patient movements (of children and adults) between 1937 and 1946 was recorded in a database, using the following documents: NÖLA, Heil- und Pflgeanstalt Gugging, patient admissions, departures and death registers, circa 1895 until 1979. The data was supplemented with information on the fate of the Gugging patients who were sent to Spiegelgrund and Steinhof, as well as a request to the archive at the Mauer-Öhling institution. The records of the T4 victims were kindly made available by the Hartheim Memorial.

¹⁷ “Decision of the two euthanasia representatives [Bouhler und Brandt] regarding the assessment (considering the results of the meeting in Berchtesgaden on 10.3.1941),” quoted by Ernst Klee, Dokumente zur “Euthanasie,” Frankfurt am Main 1985, 100.

¹⁸ Gerrit Hohendorf et al., Krankenmord im Nationalsozialismus - Ergebnisse eines Projektes zu den psychiatrischen Patientenakten von den Opfern der “Aktion T4,” in: W. E. Platz/V. Schneider (ed.), Todesurteil per Meldebogen. Ärztlicher Krankenmord im NS-Staat. Beiträge zur “Aktion T4,” Berlin 2006, 39-69.

¹⁹ DÖW 18860/1-100, LG Wien, Vg 8a Vr 455/46, Case against Dr. Josef Mayer and others (subsequently quoted under the respective DÖW signature). Here: DÖW 18860/35, statement Dr. Josef Mayer, 26.1.1946; DÖW 18860/3, Trial,

were not allowed to leave Gugging (this was probably also the case in Mauer-Öhling), so the hospitals became veritable traps, even for patients who were eligible for release.²⁰ Also, according to a statement from the hospital doctor Koloman Nagy, medical officers received the order in 1941 or 1942 to “place all people with hereditary defects and those not able to work who have already been in institutional care” back into an institution again.²¹

The director of the Gugging psychiatric hospital, Josef Schicker, told the People’s Court after the war that he was notified in 1940 by the Gau Physician Leader, Richard Eisenmenger,— he was responsible for hospitals and nursing homes in the Lower Danube Gau administration,²²—that “measures to empty the wards” had to be taken. At this time killing was not explicitly mentioned, rather the euphemistic phrases which were common in the euthanasia apparatus were used. Erwin Jekelius (who at the time was also the director at Spiegelgrund) was named as the liaison; he acted as a coordinator for the euthanasia programme within the Vienna area. In the same year, 1940, Schicker said that nine medical students appeared at Gugging, who under Jekelius’s orders were responsible for sifting through patient’s medical records and completing registration forms. This statement is remarkable, as in other institutions within Ostmark this task was done by a high level commission under the personal guidance of the medical director of T4, Prof. Werner Heyde. The hospital doctor Koloman Nagy spoke before the same court of a commission of “18 to 24-year-old Baltic Germans.”²³

In Mauer-Öhling, a commission was also at work—probably already in May 1940—but its composition was markedly different.²⁴ According to a statement from the former director of the hospital Michael Scharpf (who stood as one of the accused before the People’s Court) it was directed by Professor Nitsche and consisted also of “Prof. Reimers, two faculty members of the medical departments of Graz and Innsbruck, an assistant of Prof. Reimers, as well as an Austrian doctor whose official residence was already in Berlin.”²⁵ The Austrian university lecturers are believed to have been the T4 experts Otto Reisch and Hans Bertha, while the additional doctor mentioned could have been Max de Crinis, who was closely involved in the planning of T4 in

statement Dr. Josef Mayer, 15.6.1948.

²⁰ DÖW 18860/4a, Trial, statement Dr. Koloman Nagy, 25.6.1948.

²¹ DÖW 18860/13, statement Dr. Koloman Nagy, 5.2.1946.

²² DÖW 18860/77, Geschäftsverteilungsplan Reichsstatthalter in Niederdonau.

²³ DÖW 18860/42, statement Dr. Josef Schicker, January 1946.

²⁴ Dokumentationsarchiv des österreichischen Widerstandes (ed.), *Widerstand und Verfolgung in Niederösterreich*. Volume 3, Wien 1987, 634.

²⁵ *Ibid*, 665. According to Dr. Franz Siebert, T4’s medical director Prof. Werner Heyde headed the commission: DÖW 18860/53, Interrogation of Dr. Franz Siebert, 29.4.1946. The head of the hospital’s office spoke of a second commission which reviewed case histories in 1941 or 1942, which would explain this discrepancy: DÖW 18860/44, statement Anton Kremser, 1.5.1946.

Berlin.²⁶ This commission also did not lose time by personally examining patients but limited itself to reviewing the medical case files.²⁷ In addition, nurses were asked which patients received visitors or packages, what work they were able to do, and whether they had been soldiers.²⁸

From the Gugging institution a total of 1736 people were registered by T4 (of those, 330 were from the children's institution), the majority of which were referred by the aforementioned commission.²⁹ Schicker said that some time after the commission's visit he received a list of 900 people designated for the extermination programme from the Reich Governor.³⁰ If this number were true, this would have meant that the plan was to murder 70 per cent of the institution's patients—on 31st May 1940 there were 1295 people in care, including in the children's institution.³¹ Schicker testified that he asked the Reich Governor to exempt three or four hundred patients from the transports, since the hospital's economic operations would have been paralysed otherwise.³² However, there is no other source that can prove this statement. In principle, T4 allowed hospital directors a certain amount of discretion in removing patients from deportation lists in order to reduce the potential for possible conflict and increase the likelihood of hospitals cooperating. From April or May 1940 the deportation lists contained more names than were needed to fill the transports. For the hospital directors this proved to be double-edged: on the one hand they could soothe their conscience, knowing they had saved some individuals from being murdered; but on the other they became entangled ever deeper in their complicity with T4. At any rate, the removal of individual patients from the transport lists cannot be qualified as an act of resistance.³³

On 12th November 1940 the first transport left Gugging. It included 70 people. Buses were used, which were accompanied by nurses and SA men. By the end of the year, 433 patients had been transported from Gugging in this way, and by May 1941 a further 242. Between March and May 1941 the deportations also included the children's institution. During this period 106 children and young people under the age of 15 were among the victims. The youngest was just four years old. These figures result in a total of 675 T4 victims from the Gugging psychiatric hospital.³⁴ The high

²⁶ Klee, *Euthanasie*, 83, 125.

²⁷ DÖW 18860/36, statement Dr. Michael Scharpf, 19.3.1946.

²⁸ DÖW 18860/70, statement Franz Priesner, 25.1.1946.

²⁹ BA Berlin (formerly BA Koblenz), All. Proz. 7/111, FC 1806 ("Heidelberger Dokumente," original in NARA Washington, microfilm copy in DÖW 22862), index of clinics with the number of completed registration forms.

³⁰ DÖW 18860/42, statement Dr. Josef Schicker, January 1946.

³¹ Data analysis "PatientInnenbewegungen Gugging 1937-1946" (see footnote 16).

³² DÖW 18860/42, statement Dr. Josef Schicker, January 1946.

³³ Philipp Rauh, *Medizinische Selektionskriterien versus ökonomisch-utilitaristische Verwaltungsinteressen. Ergebnisse der Meldebogenauswertung*, in: Maike Rotzoll et al. (ed.), *Die nationalsozialistische "Aktion T4" und ihre Opfer. Von den historischen Bedingungen bis zu den ethischen Konsequenzen für die Gegenwart*, Paderborn 2010, 297-309, 302.

³⁴ Data analysis "PatientInnenbewegungen Gugging 1937-1946" (see footnote 16).

proportion of children and adolescents is noticeable, compared to a sample of the T4 victims from Steinhof which contains just over 1 per cent of underage patients. At the other end of the age scale, an 85-year-old patient is the oldest documented T4 victim from Gugging. It's important to note that already in July 1940 the Reich Governor for the Lower Danube had begun to register residents with dementia from old people's homes. In January 1941 the Reich Governor issued instructions to the welfare offices of each district; that they were to transfer their dementia patients from nursing homes to psychiatric hospitals.³⁵ Also, Hartheim would sometimes send buses to pick up residents directly from nursing homes and other smaller institutions and transport them to the killing centre.³⁶ In Mauer-Öhling the course of events was, after a visit from the aforementioned commission, very similar to that in Gugging. Here too, long lists of patients who were to be deported were received, although according to Scharpf they came directly from Berlin. Scharpf claimed not to have had any suspicions about the first transport. He thought the commission's explanation, that space was being freed up for wounded soldiers and for the "mentally ill in need of special care," was plausible. He said it was only after he had heard from relatives that many of those who had been transferred had died shortly after, that he became suspicious.³⁷

As a religious man, he was against the killings, and he turned to Gauleiter Hugo Jury (himself a physician), in an act of "resistance through official channels": "In the weeks before and during the transports upsetting scenes occur among the hospitals's charges (partly due to a fear of death), because lucid patients are also affected and they have found out their final destination (through visitors and other lucid patients); and now that the general population is aware of what is happening it is no longer possible to prevent this." However, Scharpf turned out not to be fundamentally opposed to the killings. Rather, he went on to suggest that only those patients should be killed whose condition meant they could be more easily deceived: "Since this affects sick people, and even patients who are not affected by these events are in a state of constant agitation, I hereby ask that in the future a note should be added to the registration forms along the lines that 'only those patients whose state of mind is already so disturbed, or who have already lost the battle with their illness to the extent that they are no longer able to recognise where they are' should be added to the transport lists." Scharpf's request earned him a reprimand from his superiors, but otherwise had no

³⁵ NÖLA, RStH ND IIIb-3, Reich Governor in the Lower Danube to district administrators, 16.7.1940; RStH ND IIIb-3 Files 1941, V.Z. 100-146, Reich Governor to Welfare Offices, 23.1.1941: Transfer of mentally infirm to Gugging.

³⁶ Data analysis "PatientInnenbewegungen Gugging 1937-1946" (see footnote 16). In June 1940 Rudolf Lonauer, the head of Hartheim and Niedernhart, announced the collection of residents from retirement homes in St. Pölten, Herzogenburg and Kirchenberg, as well as from the Allentsteig hospice: NÖLA, RStH ND IIIb-3, Direktor Gau-Heil- und Pflegeanstalt Niedernhart an Reichsstatthalterei Niederdonau, 25.6.1941.

³⁷ DÖW 18860/36, statement Dr. Michael Scharpf, 19.3.1946.

consequences.³⁸ He made sure that he stayed as far removed as possible from the preparations for the transports, but resigned himself to them and remained as director of the institution. This example shows that direct involvement in the killings was not enforced (something which is also amply documented in other contexts) and that it was quite possible to refuse or protest within certain limits (i.e. on the grounds of religious or professional reservations).

According to police investigations after the liberation, the commission had reported all the hospital's patients (between 1200 and 1400 individuals) to T4. The first transport to Hartheim with 70 men and 70 women occurred on 13th June 1940.³⁹ In total at least 1210 people from Mauer-Öhling were transported to Hartheim and, with very few exceptions, killed there.⁴⁰ Scharpf mentioned in an interview in 1945 some impressive examples of the arbitrariness of the criteria used by the perpetrators to select the victims. He estimated that, in total, one third of those deported were still capable of working. Scharpf's personal servant was in the first transport. At Scharpf's insistence he was released from Hartheim and sent back, alone, to Mauer-Öhling, where he was able to tell the other patients about what happened in Hartheim.⁴¹

Maria Müllner, from Voitsau, intended to take her mother back home with her in summer 1941, after a long stay in Mauer-Öhling. Her mother was responsive and in a good condition mentally. However, when Maria called at the institution in June, the director told her that her mother was no longer there. After being tipped off by a nurse, she went to Niedernhart and then to Hartheim, where a doctor told her that her mother had "already been redeemed." A short while later she received a death notice from the Pirna institution (another T4 killing centre), which took care of correspondence with relatives of the Hartheim victims to camouflage the real location of the deaths.⁴²

Ybbs psychiatric hospital and Nazi "euthanasia"

The Ybbs psychiatric hospital—which was owned by the City of Vienna—also lost a great number of its patients through the T4 deportations. It was one of the institutions with the highest proportion

³⁸ DÖW 18860/37, Scharpf to Reich Governor and Gauleiter Jury, 3.4.1941; DÖW 18860/35, statement Dr. Josef Mayer, 26.1.1946.

³⁹ Report of the Amstetten district gendarmerie command to the Vienna public prosecutor at the Vienna People's Court, 30.1.1946, quoted by: Neugebauer, *Euthanasie*, 663-4.

⁴⁰ Magdalena Pehersdorfer/Florian Schwanninger, *Das Transportkalendarium der "Aktion T4" in Hartheim*, in: Brigitte Kepplinger et al. (ed.), *Tötungsanstalt Hartheim*, Linz 2008, 145-54, 152-3. The figure which was given by the Gendarmerie in 1946 and which is sometimes quoted is slightly higher—1279, see Neugebauer, *Euthanasie*, 663-4.

⁴¹ DÖW 18860/36, statement Dr. Michael Scharpf, 5.12.1945.

⁴² DÖW 18860/86, statement Maria Müllner, 26.5.1948.

of victims.⁴³ Even before the onset of the gas killing operation, a partial evacuation of the institution had been envisaged in which patients would be taken to the already overcrowded Am Steinhof psychiatric hospital. With the T4-transport, this plan became unnecessary because the patients could now be got rid of once and for all.⁴⁴ Heinrich Gross, who began his career at Ybbs psychiatric hospital, experienced in 1940 the arrival of the medical commission which surveyed Ybbs' medical records on behalf of T4 (as it also did in Steinhof) and filled in registration forms for potential euthanasia victims. Gross testified later in court that he knew—at least indirectly—what the commission's purpose was.⁴⁵ In contrast to earlier plans, space now had to be made at Ybbs for patients from Steinhof, as from September 1940 Ybbs became a stopover on the way to Hartheim. In this way, the true destination of the transports could be more easily hidden from the relatives, after numerous inquiries and complaints had been received.⁴⁶

These deceptive measures fulfilled their intended purpose. 25-year-old Leopoldine Pfeffer, who suffered from a mental disability, lived with her family until her mother had to temporarily bring her to Steinhof due to an impending operation. From there she was transferred, without the knowledge of her relatives, to Ybbs. In October 1940 her sister wrote the following letter to Ybbs: "I am again urgently requesting that the esteemed management of the institution send back our cherished family member so that she can be cared for at home, especially as she has spent so little time in the institution. (...) My parents and I can hardly endure such a prolonged separation from the patient. For this reason, I am writing to you, dear director, and begging you to send us back our dear patient and to please heed my request, which springs from the most noble feelings of love." Attached to the letter, which was kept with the director's files, was a handwritten note that reads: "Invalidated. Deported on 6 November 1940."⁴⁷

A total of 1104 patients were taken from Steinhof to Ybbs, by means of two smaller transports on 13th June (16 people) and 17th August (14 people) as well as three bigger ones between 2nd September and 28th November 1940.⁴⁸ Some were lucky enough to be returned to Ybbs in another

⁴³ Kepplinger, NS-Euthanasie, 52.

⁴⁴ Municipal and Provincial Archives of Vienna (WStLA), 1.3.2.209.A2, official note from 4.7.1940 after a meeting on 3.7.1940 (Freunthaller, Jekelius, Krenek, Mauczka, Werner, Bayer, and Krist were all present).

⁴⁵ LG Wien, Vg 1a Vr 1601/48, Trial of Heinrich Gross, 27.3.1950 (DÖW 22854); on the commission see also: Jung (Representative of the Reich Governor in the municipality of Vienna) to Wichard Kryspin-Exner (director of the Ybbs psychiatric hospital), transfer of asylum inmates from Ybbs psychiatric hospital to Am Steinhof, 10.6.1940, quoted from the copy in LG Wien, Vg 11 Vr 5.502/46, proceedings against Dr. Maximilian Thaller (copy in DÖW 20321).

⁴⁶ Susanne Mende, Die Wiener Heil- und Pflegeanstalt "Am Steinhof" im Nationalsozialismus, Frankfurt am Main/Berlin/Bern et.al 2000, 81-2; DÖW 22796, Richard Günther to Fred Dubitscher, 29.10.1940.

⁴⁷ Archive of the medical management of the Vienna therapy centre in Ybbs, Maria Pfeffer to Ybbs psychiatric hospital, 15.10.1940 (copy in DÖW, Sammlung Hartheim Nr. 633). The compilation contains about 150 inquiries from family members.

⁴⁸ According to data provided by the Hartheim memorial.

transport, but the vast majority—according to current estimates at least 990 people—were sent on to Hartheim and gassed there.⁴⁹ A list of names drawn up after the war indicates that a total of 2282 people were deported from Ybbs to Hartheim.⁵⁰ Research on behalf of the Hartheim Memorial came up with a similar number of 2277 deportations, which allowed for any double entries and deferments. It is striking that an extremely high proportion of women were deported. Only 774 men were taken to Hartheim, in contrast to 1503 women—representing a share of 66 per cent.⁵¹ Ybbs had a total capacity of 1650 beds and the number of registration forms filled out totalled 1634.⁵² If we exclude the Steinhof patients, as Ybbs was only a stopover for them on the way to their destruction, almost 1300 patients from the Ybbs institution were deported and then killed at Hartheim.

The minutes of a meeting held by the hospital administration at the City of Vienna in September 1940 show how casually the municipal administration planned the logistics of mass murder. A representative from T4 was apparently not necessary: “Starting with the requirement that Ybbs I.A. [*Irrenanstalt* or mental asylum] (...) should take about 600-700 patients [from Steinhof], it is necessary that the same number of older cases from Ybbs should be transferred to the ‘Old Reich’ [i.e. should be gassed at Hartheim]. (...) In 3-4 weeks, the Steinhof patients destined for Ybbs will have been transferred, so that it will be possible after a short wait to transport the remaining 1200 Steinhof patients [to Hartheim] in batches of 100 over a period of 4-5 weeks.”⁵³

In April 1941 the director of the Ybbs hospital, Josef Scherz, took the initiative vis-à-vis T4 and tried to have 52 patients removed. “In agreement with [Georg] Renno, Alkoven [Hartheim’s deputy medical director], I submit 52 registration forms with the urgent request that you examine them as soon as possible and send photocopies to Hartheim. These patients had been registered already by the commission under the direction of Prof. Heyde, but were not included in the [deportation] lists provided to us. Since in the near future the Ybbs IA [mental asylum] is to be vacated, apart from the most necessary worker patients, these 52 patients would have to be taken back to the Vienna mental hospital ‘Am Steinhof.’ This would on one hand be a heavy burden for ‘Am Steinhof,’ as its

⁴⁹ Schölnberger/Üblackner, Anstalt, 341.

⁵⁰ Upper Austrian Provincial Archives, LG Linz special courts, box 1014, Akt des Volksgerichts Linz Vg 8 Vr 2407/46, Gendarmerie Command Post Ybbs an der Donau to the Linz prosecutor, 10.5.1946 (copy in DÖW 20298). Cf. Wolfgang Neugebauer, Zwangssterilisierung und “Euthanasie” in Österreich 1940-1945, in: *Zeitgeschichte* 19 (1992), 17-28, 23.

⁵¹ Schölnberger/Üblackner, Anstalt, 341, 343.

⁵² German Federal Archives Berlin (BAB), R 96 I-6, list of hospitals and nursing homes with the number of completed questionnaires (copy in DÖW 22862).

⁵³ Ybbs an der Donau psychiatric hospital, management files, note about a meeting with Dr. [Karl] Klenkhart and Dr. [Alfred] Mauczka (director of Am Steinhof psychiatric hospital), signature illegible (possibly Dr. Scherz, provisional director of the Ybbs institution), 20.9.1940 (my thanks to Peter Schwarz for the copy).

capacity is limited, and on the other hand would mean a journey twice as long for Hartheim.”⁵⁴ T4 apparently agreed to this request to kill 52 people. In May 1941, 66 patients were picked up by two transports, in the space of a week.⁵⁵

With these two transports, the emptying of the institution through murder was complete, with only the work force left which was necessary to maintain the hospital’s agricultural operations. By the beginning of 1942 there were just 250 “working patients” left in Ybbs.⁵⁶ The Vienna municipality planned to build a home for “maladjusted“ children and adolescents in the empty buildings. Johann Gross, who was interned in Spiegelgrund as a child, noted in his memoirs how he was transferred with many other pupils to Ybbs on 1st September 1941—only to be returned to Spiegelgrund five months later.⁵⁷ The reason for this was that the Wehrmacht already planned to repurpose the institution as a military hospital for the duration of the war.⁵⁸ A comprehensive account of the hospital’s history during the Nazi period is still missing. In particular, what happened there post-1942 is still largely unknown. By the end of 1941 all non able-bodied patients had been deported, so in all likelihood Ybbs did not become a venue of “decentralized euthanasia” during the second half of the war, as opposed to Gugging and Mauer-Öhling.

The suspension of the euthanasia programme in August 1941

On 24th August 1941, the Hartheim euthanasia centre was informed by telephone of Hitler’s order to stop the gassing of psychiatric patients immediately. After receiving this message, those in charge were undecided about what should happen to the transports that were already in progress.⁵⁹ According to the so-called “Hartheim Statistics“ found after the war by the US Army, 18,269 people had fallen victim to T4 by this point in Hartheim alone. The document also contains detailed statements about the amount of food saved through the murder of around 70,000 people.⁶⁰ In the T4

⁵⁴ Archive of the medical management of the Vienna therapy centre in Ybbs, Scherz to the “Gemeinnützige Stiftung für Anstaltspflege” (a T4 front organisation), Berlin, 26.4.1941 (copy in DÖW, Sammlung Hartheim Nr. 634). Scherz was the successor to Wichard Kryspin-Exner (1893-1956), who was removed from his post for political reasons: WStLA, 1.3.2.202, personnel files Hermann Merta and Stefanie Üblacker, statement Dr. Olga Kryspin-Exner, 26.10.1945 (copy in Sammlung Hartheim Nr. 606).

⁵⁵ Gedenkbuch Hartheim [www.schloss-hartheim.at, 6.12.1999].

⁵⁶ WStLA, 1.3.2.212.A5/7, E-3/1942, Gundel to the Reich Propaganda Office Vienna, 2.1.1942.

⁵⁷ Johann Gross, Spiegelgrund. Leben in NS-Erziehungsanstalten, Wien 2000, 71-2. The institution was supposed to take in up to 500 “maladjusted school-age boys.” Of these, the first 80 were taken in on 20.8.1941. But already in January 1942, 150 children from there were taken to other institutions so that Ybbs could be made available for the Wehrmacht to set up a military hospital: Magistrat der Stadt Wien – Abteilung für Statistik (ed.), Die Gemeindeverwaltung des Reichsgaues Wien vom 1. April 1940 bis 31. März 1945. Verwaltungsbericht, Vienna n.d., 215.

⁵⁸ WStLA, 1.3.2.212.A5/7, E-190/42, Gundel to Kowarik, 23.4.1942.

⁵⁹ Walter Kohl, “Ich fühle mich nicht schuldig.” Georg Renno, Euthanasiearzt, Wien 2000, 219-21.

⁶⁰ National Archives and Records Administration (NARA) Washington, Microcopy No. T-1 021, Record Group No.

headquarters “freed-up” beds were registered in order to demonstrate the success of the murder campaign. In the Gau of the Lower Danube, 760 freed-up beds were listed, namely 640 for resettlers in Mauer-Öhling and 120 in Gugging, which were now used by the NSV (the National Socialist Welfare Organization).⁶¹ The T4 killing bureaucrats considered the suspension of the programme a temporary measure and were prepared to reinstate it at short notice.⁶² The registration and evaluation of patients continued unchanged.⁶³ The methods developed for the industrial extermination of patients were later used after the suspension of T4 on a much larger scale, against the Jewish population.⁶⁴ Action T4, therefore, was a direct precursor of the Shoah. The killing technology and organizational experience of T4, alongside approx. one hundred members of its staff, were all put to use in the destruction of the Jews in Poland.⁶⁵

“Child euthanasia”

Parallel to the industrial mass killings in Hartheim and at other T4 extermination centres, the Chancellery of the Führer initiated another murder campaign, which became known under the not entirely accurate designation of “child euthanasia.”⁶⁶ This created the possibility within the public health system to evaluate, select, and kill children and adolescents who had a poor prognosis with respect to their mental and physical development. Sources indicate that the establishment of a “special children’s unit” (the euphemism used for the hospitals where children were killed under the programme) was planned in the existing Gugging children’s institution. A decree from the Reich Governor of the Lower Danube on September 15th, 1942, ordered that all children from the Lower Danube region who met certain criteria established by the Interior Ministry for “child euthanasia”

242/338, Item No. 000-12-463, Exhibit 39, Roll No. 18, Frame No. 91. Microfilm copy in BA Berlin (formerly BA Koblenz), copy in DÖW 22862. See also Andrea Kugler, Die “Hartheimer Statistik,” in: Institut für Gesellschafts- und Sozialpolitik at Johannes Kepler-Universität Linz et al. (ed.), *Der Wert des Lebens: Gedenken/Lernen/Begreifen*, Linz 2003, 124-131.

⁶¹ BAB, R 96 I-7, “Register of freed-up beds and their use” (Copy in DÖW, Sammlung Hartheim Nr. 599).

⁶² Unrest among the local population had already led during an earlier phase of Action T4 to the closure of two extermination facilities, namely Brandenburg in September 1940 and Grafeneck in December 1940. These were replaced by Bernburg and Hadamar: Friedlander, *NS-Genozid*, 156-7.

⁶³ Reich Interior Minister to the Oberpräsident in Wiesbaden, 1.3.1944. Reprinted in Klee, *Dokumente*, 304-5.

⁶⁴ Reich Minister for the Occupied Eastern Territories to the Reichskommissar for Ostland, 25.10.1941: Solution for the Jewish Question. Quoted by *ibid.*, 271-2.

⁶⁵ See Friedlander’s standard work, *NS-Genozid*.

⁶⁶ The term “child and adolescent euthanasia” used by, among others, Udo Benzenhöfer, takes into account the age range of the victims, but does not do justice to the fact that many children and adolescents were murdered as part of T4; see Udo Benzenhöfer, *Genese und Struktur der “NS-Kinder- und Jugendlicheneuthanasie,”* in: *Monatsschrift für Kinderheilkunde* 151 (2003), 1012-19.

be sent to Gugging.⁶⁷ There is however no evidence that a so-called “special children’s unit” was ever established at Gugging. Rather, it seems that children and adolescents who fell into the target group for the child euthanasia programme were concentrated at Gugging and then taken to Spiegelgrund to be killed. From the sources we can reconstruct a number of such transports, both to Spiegelgrund and Steinhof. On 23rd October 1941, Erwin Jekelius demanded the transfer of 22 children from Gugging to his institution.⁶⁸ In May 1942 a further 26 “hopeless, lifetime-in-care children” were brought to Spiegelgrund—under the circumstances this description of their condition amounted to a death sentence. In Gugging only children who “within the confines of the mental institution were still educable and could be expected to work in the future” were allowed to stay, as they met the Nazis’ criteria for productivity.⁶⁹

In total, 175 children and adolescents aged between two and a half and 16 years were taken from the children’s institution in Gugging to one of Spiegelgrund’s institutions. 136 went directly to Spiegelgrund, while 39 were taken to the hospital Am Steinhof first. Of the 136 who were transferred directly, 96 died in Spiegelgrund, which amounts to a mortality rate of 72 per cent.⁷⁰ The prominent paediatrician Hans Asperger, later the doyen of curative paedagogy in Austria, was involved in some of these transfers. He was employed as an expert in special education by the City of Vienna and in this capacity participated in a commission of seven people, which in 1942 was responsible for evaluating how “educable” the children and adolescents at Gugging were, in order to determine their fate. 35 children were viewed by the commission as being “uneducable, and incapable of development or of work.” According to the commission’s instructions, they were to be sent to Spiegelgrund. Already in 1942, 29 of the assessed children and adolescents were transferred to Spiegelgrund, where they were all killed, and in 1943 and 1944 more such transports followed.⁷¹

⁶⁷ NÖLA, RStH ND IIIb-3, Reich Governor of the Lower Danube to the director of the Gugging psychiatric hospital, 15.9.1942.

⁶⁸ NÖLA, RStH ND IIIb-3, Vienna municipal welfare institution Am Spiegelgrund to the Provincial Care Institute for Mentally Deficient Children in Gugging, 23.10.1941. Alfred Wödl, whose mother Anny Wödl tried in vain to save her son before he was killed, was sent from the Gugging children’s institution to Spiegelgrund and murdered, see for example Gerhard Fürstler/Peter Malina, *Österreichische Pflegepersonen aus der Zeit des Nationalsozialismus. Teil I: Die Wiener Krankenschwester Anny Wödl. Historische Pflegeforschung*, in: *Österreichische Pflegezeitschrift* (2003), 24-7.

⁶⁹ NÖLA, RStH ND IIIb-3, Reich governor in Lower Danube, June 1942: Registration of children with severe congenital disorders and their care.

⁷⁰ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

⁷¹ The details of the activities of this commission and more generally Asperger’s role in National Socialism are the subject of a research project financed by the City of Vienna and completed by the author in 2010. Alongside the aforementioned consulting activity in Gugging, in at least one case Asperger transferred a child to Spiegelgrund, who died as a result. A more detailed exploration of this is, at the time of this paper being published, under review: Herwig Czech, ‘The child must be an unbearable burden to her mother.’ Hans Asperger, National Socialism and ‘Race Hygiene’ in WWII Vienna, in: *Molecular Autism* (submitted in 2016).

“Decentralised euthanasia”

Securing the food supply under German rule played a significant role in the Nazis’ war plans. The desired self-sufficiency was to be achieved primarily through the systematic exploitation of the occupied territories (especially in Eastern Europe), where hundreds of thousands of people were subjected to starvation. But even among the German people, certain groups were viewed as less deserving of sufficient food than the majority of the population. This was particularly true for patients in psychiatric institutions, who even before the war were subject to increasing dietary restrictions, with corresponding effects on their mortality.

There is still no comprehensive account of the situation in Austria’s psychiatric hospitals during WWII.⁷² Even Heinz Faulstich’s standard work from 1998 on “decentralized euthanasia” only gives the events in Austria marginal attention, devoting just two pages to the subject.⁷³ Many studies on individual hospitals or regions only mention the killings of this second phase in a mere footnote—or omit them altogether. In this context the Niedernhart hospital in Linz deserves to be mentioned—which today is named after the Nobel Prize winner and one time NSDAP candidate Julius Wagner-Jauregg. During the T4 transports Niedernhart acted as a buffer institution for Hartheim. After the so-called “euthanasia stop,” Niedernhart was also turned under its director Rudolf Lonauer into a centre for decentralized euthanasia, as Gerhart Marckhgott has shown. It is hard to determine the exact number of victims, but it was certainly in the hundreds. Many of them were sent to Niedernhart on transports from German territory, including from Hardt (Mönchengladbach). There are different testimonies about the methods used: “With very few exceptions Lonauer would come almost every day, at different times and sometimes at night, to give injections. Sometimes he administered poison to the patients in the form of a liquid drink. In this way he regularly took the lives of between 2 and 8 people.”⁷⁴

On 31st August 1942, 30 people were transported from the Hall in Tirol psychiatric hospital and killed by Rudolf Lonauer at Niedernhart.⁷⁵ This practice would be widely used and continued in the coming years, as it was more discreet than using the gas chambers. Attempts were also made to kill

⁷² The first summarizing work is Herwig Czech’s *Jenseits von Hartheim. Decentralized euthanasia in Austria during the Nazi era*, in: *Arbeitskreis zur Erforschung der nationalsozialistischen Euthanasie und Zwangssterilisation* (ed.), *NS-Euthanasie in der “Ostmark,”* Münster 2012, 37-60 as well as Kepplinger, *Krankenmord*.

⁷³ Heinz Faulstich, *Hungersterben in der Psychiatrie 1914-1949. Mit einer Topographie der NS-Psychiatrie*, Freiburg 1998, 567-9.

⁷⁴ Quoted by Gerhart Marckhgott, “Euthanasie” in *Oberdonau*, in: *Zeitgeschichte* (1994), 165-182, 177.

⁷⁵ Oliver Seifert, “...daß alle durch uns geholten Patienten als gestorben zu behandeln sind...” Die “Euthanasie”-Transporte aus der Heil- und Pflegeanstalt für Geistes- und Nervenranke in Hall in Tirol, in: *Andrea Sommerauer/Franz Wassermann* (ed.), *Prozesse der Erinnerung. Temporäres Denkmal im Gedenken an 360 Opfer der NS-Euthanasie*, Innsbruck/Wien/Bozen 2007, 29-81, 69-73.

patients by poisoning them directly at the hospital in Hall, but these were unsuccessful, according to the findings of an investigation commissioned in 2011. Although the discrimination with regards to food rations and care against patients who were unfit for work was in many cases fatal, the commission did not qualify these deaths as murder—despite the fact that they were based on conscious, ideologically motivated decisions.⁷⁶ However, the annual mortality rates at Hall were well below those at Gugging or Steinhof.⁷⁷

At Klagenfurt's "Siechenhaus" (the provincial hospital's geriatric ward), terminally ill patients were killed on average once a week with doses of lethal drugs as early as 1939/40 (!), according to later statements from members of the staff. After the gassings in Hartheim stopped, by which time around 700 Carinthian psychiatric patients had been murdered there, the killings intensified in Klagenfurt. Under the direction of the psychiatrist Franz Niedermoser nurses killed around three or four patients a week in the "Siechenhaus" and the psychiatric ward, between 1941 and 1945.⁷⁸

In Vienna's psychiatric hospital Steinhof, some 3,500 people fell victim to the lethal conditions present during the war years.⁷⁹ The Vienna methods were more discreet than in other locations. Rather than being poisoned the patients died because of deliberately induced fatal conditions in the institution: systematic malnutrition and the concentration of patients in "isolation units" where infectious diseases were rampant. The statistics illustrate the extent of the deaths at Steinhof between 1942 and 1945: in 1944 the mortality rate was already 22.14 per cent. By 1945 it would almost double, to a staggering 42.76 per cent.⁸⁰ Among the most vulnerable were those patients brought via group transports to Vienna in 1943, as part of the so-called "Action Brandt."⁸¹

⁷⁶ Bertrand Perz, Anstelle eines Resümees – 16 Fragen und Antworten, in: Bertrand Perz et al. (ed.), Schlussbericht der Kommission zur Untersuchung der Vorgänge um den Anstaltsfriedhof des Psychiatrischen Krankenhauses in Hall in Tirol in den Jahren 1942 bis 1945, Innsbruck 2014, 365-81, 375-7. For more details on the Hall psychiatric hospital, see also the other chapters in the quoted volume.

⁷⁷ Dirk Dunkel, Grundlegende statistische Auswertungen zur Heil- und Pflegeanstalt Hall während der NS-Zeit, in: *ibid.*, 145-186, 146.

⁷⁸ See in detail: Helge Stromberger, Die Ärzte, die Schwestern, die SS und der Tod. Die Region Kärnten und das produzierte Sterben in der NS-Periode, Klagenfurt/Celovec 1988.

⁷⁹ Peter Schwarz, Mord durch Hunger. "Wilde Euthanasie" und "Aktion Brandt" in Steinhof in der NS-Zeit, in: Eberhard Gabriel/Wolfgang Neugebauer (ed.), Von der Zwangssterilisierung zur Ermordung. Zur Geschichte der NS-Euthanasie in Wien Teil II, Wien/Köln/Weimar 2002, 113-141, 141.

⁸⁰ *Ibid.*, 127.

⁸¹ *Ibid.*, 132. Regarding the fate of the Hamburg women and girls, see among others, Michael Wunder, Die Euthanasie-Morde im "Steinhof" am Beispiel der Hamburger Mädchen und Frauen, in: Eberhard Gabriel/Wolfgang Neugebauer (ed.), NS-Euthanasie in Wien, Wien/Köln/Weimar 2000, 93-105.

“Decentralised euthanasia” in Gugging

Emil Gelny, who worked at Gugging and Mauer-Öhling, is one of the vilest figures in the history of Austrian medicine. Of his own volition he murdered hundreds of patients—with his own hands or with the help of doctors and nurses. As previously mentioned, for a long time research has focused solely on Gelny’s crimes, and has therefore underestimated the true extent of the deaths. Indeed, malnutrition and neglect in these two institutions led to such a sharp increase in deaths that Gelny’s actions need to be regarded as but the tip of the iceberg.⁸²

An evaluation of the hospitals’s log books and death registers shows that the mortality rate in Gugging had, by December 1941 already reached a first peak at 43.8 per cent (estimated at a yearly rate)—long before Gelny came into play.⁸³ In August 1941 a patient’s family member made the following complaint: “I again visited the child and my child straightaway asked for food. Coupons are not so scarce that they should be going hungry. [...] The child’s mother was also visiting as she had not yet fallen sick, and the first question was, ‘please, mother, I’m hungry.’”⁸⁴ In April 1942, the Vienna Medical Chamber complained to the Main Health Office about requests for additional food for patients at Gugging: “since we cannot take responsibility for granting additional food to all these hopeless cases.”⁸⁵ Weight records contained in many patient files—sometimes covering several years—often point to extreme loss of body weight during the patients’ stay at the hospital. A systematic study of this data would certainly be useful in providing further insights into patients’ living conditions.⁸⁶

The following will first outline the murders committed by Gelny and his associates; however, one has to bear in mind that from 1941 at the latest, conditions in the hospital had already become life threatening for many patients. A comprehensive analysis of patient movements in Gugging—

⁸² It should be mentioned that already during the First World War, shortcomings in the food supply had led to a wave of deaths among patients in the severely overcrowded institution—an event that has not been the object of research, as indeed is the case for other institutions as well, see Christine Zippel, *Die Geschichte der Heil- und Pflegeanstalt Gugging von 1885 bis 1938*, in: Stadt Klosterneuburg (ed.), *Von der Anstalt zum Campus. Geschichte und Architektur des Krankenhauses in Maria Gugging, Klosterneuburg 2009*, 9-38, 25. For Mauer-Öhling no relevant information is available. In the context of the Allied Blockade of Germany, approximately 70,000 patients in hospitals and nursing homes starved to death during the First World War in Prussia alone (Hans-Walter Schmuhl, “Euthanasie” und Krankenmord, in: Robert Jütte et al. (ed.), *Medizin und Nationalsozialismus. Bilanz und Perspektiven der Forschung*, Göttingen 2011, 214-255, 216). In Austria, the number of deaths also reached an unprecedented level. The main difference from the conditions during the Nazi era, however, lies in the fact that this was not the result of a deliberate policy, but rather of food shortages that affected the entire population.

⁸³ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

⁸⁴ NÖLA, RStH ND IIIb-3, Karl Weinmann to the Chancellery of the NSDAP in Berlin, 12.8.1941.

⁸⁵ WStLA, 1.3.2.212.A7.8, Vienna Medical Chamber to the Main Health Office, 10.4.1942. See also Schwarz, *Mord*, 127-30.

⁸⁶ NÖLA, patient case files of the Heil- und Pflegeanstalt Gugging. The case histories for Mauer-Öhling are currently being processed by NÖLA, and could not be viewed for the present publication.

including the development of the mortality rate and transferals for elimination in other institutions—should then allow us to contextualize these acts and make it possible to develop an idea of the total number of victims.

According to a statement from the resident physician Karl Oman, Rudolf Lonauer, the medical director of Hartheim euthanasia centre stayed at Gugging with two companions between 28th March and 8th April 1943: “It was said that he had come to carry out examinations. There was talk of a ‘typhus epidemic’ in the isolation ward and I was forbidden at that time to enter the isolation ward for 2 or 3 weeks. The mortality rate in the isolation ward rose sharply, and also many patients from other wards were transferred to the isolation ward. From 28.3. until 8.4.44 [1943 is correct] a total of 112 patients—36 men, 74 women and several boys—died. Dr. Lonauer was at the hospital during this whole time and also spent the nights there.”⁸⁷

A few months after this first wave of killings, the murders escalated to a different level. The driving force behind this was Emil Gelný, a physician from Klosterneuburg. Born on 28th March 1890 in Vienna, he joined the NSDAP and the SA in 1932. After the NSDAP was banned in 1933 he worked illegally for the Nazi Party’s intelligence service and participated in preparations for the coup attempt in July 1934. In August 1934 he was arrested and interned for several months in Wöllersdorf.⁸⁸ In the camp he got to know Sepp Mayer, who would later become the head of the Gau administration of the Lower Danube. It would prove to be an important connection for his later role. After his release he immediately continued his illegal activities, and was considered a central figure in the Klosterneuburg branch of the Nazi Party.⁸⁹

Although he was only a general practitioner, on 4th August 1943—after taking a course lasting only a few weeks at the Vienna University Psychiatric Clinic (see below)—the Vienna Medical Chamber awarded him the title of specialist in nervous and mental disorders, presumably on the initiative of the Vienna Gau Physician Leader Otto Planner-Plann.⁹⁰ According to later testimony from multiple nurses he did not have an adequate knowledge of psychiatry, although he claimed that during the First World War he had been head of the psychiatric ward at a military hospital in Graz.⁹¹ On

⁸⁷ DÖW 18860/4, record of proceedings, statement Dr. Karl Oman, 24.6.1948.

⁸⁸ Austrian State Archives (ÖStA), AdR, Gauakt Dr. Emil Gelný.

⁸⁹ DÖW 18860/1, District Gendarmerie Command Amstetten to the Vienna Prosecutor, 30.1.1946. Mayer denied having been in Wöllersdorf or that he knew Gelný before the Nazi era. According to him, Gelný and Jury got to know each other in Wöllersdorf: DÖW 18860/3, record of proceedings, statement Dr. Josef Mayer, 14.6.48; DÖW 18860/35, statement Dr. Josef Mayer, 1.4.1946. However, in 1938 Gelný mentioned Mayer as a witness for his illegal Nazi activities, which in this context seems the most reliable source: ÖStA, AdR, Gauakt Dr. Emil Gelný, personnel questionnaire Nr. 1308468, 13.6.1938.

⁹⁰ LG für Strafsachen Wien als Volksgericht, Vg 11h Vr 455/46, judgement against Dr. Josef Mayer and others, 21.7.1948, 337 (subsequently cited as: DÖW 18860/6).

⁹¹ DÖW 18860/56, statement Dr. Otto Hamming, 6.2.1946; regarding his psychiatric expertise see for example DÖW 18860/19, statement Josef Schrott, 24.7.1945.

1st October 1943 Gelny appeared together with the “province chairman for the genetic inventory of psychiatric patients” Otto Hamminger, and explained to the Gugging hospital director Josef Schicker that he had come on behalf of the Reich Governor “to relieve the institution in terms of incurable patients.”⁹² He would be the institution’s “therapeutic director,” whilst Schicker would retain his administrative responsibility.⁹³ In November Schicker learned that Gelny had begun poisoning patients using drugs.⁹⁴ He mostly administered the lethal injections himself, and sometimes he instructed nurses to give overdoses of medications.⁹⁵

One focus of Gelny’s activities was Ward 3; he would also transfer patients there who he planned to kill.⁹⁶ Head nurse Auguste Kabelka admitted to the police after the war that under orders from Gelny, in five or six cases she had administered fatal doses of Veronal. Gelny had personally killed numerous other patients with injections of Morphium-Hyoscin. Killings also took place in Wards 1, 8, 9 and 10, the so-called “corridor.”⁹⁷ From November 1943 the hospital’s increased drug consumption was striking; Gelny demanded that large amounts of Veronal, Luminal, Morphine-Hyoscin and Evipan be handed to him without, as hospital regulations stipulated, these drugs being registered in the log book.⁹⁸ In the beginning Schicker signed these cases as medical examiner, and Gelny was noted as the attending physician. However, autopsies were only carried out until 1940 or 1941, and were then discontinued.⁹⁹

It is impossible to determine the exact number of Gelny’s victims, or those of the doctors and nurses who worked under him and who it has been proven sometimes took the initiative themselves. The death records show that Gelny was connected with a total of 365 deaths between 23 October 1943 and 25 November 1944.¹⁰⁰ We cannot exclude the possibility that some of these people died

⁹² DÖW 18860/42, statement Dr. Josef Schicker, January 1946; DÖW 18860/6, 366; as “provincial chairman for the genetic inventory at psychiatric hospitals in the Lower Danube” Hamminger was responsible for registering patients with supposedly hereditary diseases or those of “inferior genetic value,” see DÖW 18860/20, statement Valerie Reuterer, 25.11.1946. Former patients should also be registered—in Gugging this dated back to 1883, and in Mauer-Öhling to 1902; NÖLA, RStH ND IIIb-3, Landeshauptmannschaft Niederdonau, Ärzteausschreibung für Gugging und Mauer-Öhling, 23.2.1940. According to the secretary who was in charge of registering these people, the process resulted in the forcible sterilization of 346 patients between 1941 and the end of 1943: DÖW 18860/52, statement Leopoldine Dorfer, 2.5.1946. Regarding the forced sterilization of patients in Gugging, see Claudia Spring, *Doppelte Täterschaft. Josef Schicker und die NS-Zwangssterilisationen*, in: Reinelde Motz-Linhart (ed.), *Psychiatrie ohne Menschlichkeit. Gugging 1938-1945*, St. Pölten 2008, 101-36.

⁹³ DÖW 18860/59, statement Dr. Karl Oman, 20.11.1951.

⁹⁴ DÖW 18860/42, statement Dr. Josef Schicker, January 1946.

⁹⁵ DÖW 18860/63, statement Stefanie Danzinger, 2.1.1946. Danzinger was one of the few who pled guilty at the first interrogation, but she later retracted her statement.

⁹⁶ DÖW 18860/13, statement Josef Schrott, 24.7.1945 and Franz Gmachl, 5.2.1946.

⁹⁷ DÖW 18860/60, statement Auguste Kabelka, 19.1.1946; statement Marie Gutmann, 18.1.1946.

⁹⁸ DÖW 18860/57, statement Josef Kriz, 21.1.1946.

⁹⁹ DÖW 18860/57, statement Josef Kriz, 21.1.1946. In Mauer-Öhling autopsies were only carried out in exceptional cases from 1943 onwards: DÖW 18869/43, statement Dr. Josef Utz, 2.2.1946.

¹⁰⁰ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

of natural causes, but the vast majority were victims of “euthanasia.” A detailed analysis of all the patients’ case histories would yield more exact information, but this continues to be a desideratum in the research.¹⁰¹ Conversely, it must be assumed that the number of victims of direct homicide was even higher because Gelny did not necessarily confirm the cause of death himself, and many of the murders can therefore not be identified as his in this way. The nurse Johanna Steinbach, for instance, described how “towards the end of his time at Gugging“ Gelny killed two patients in Ward 1 with a modified shock apparatus (for more on this, see below). The two victims appear, named, in the death register on 8 March 1945, a 36-year-old man and a 24-year-old woman. The causes of death are listed as “prolonged seizure“ and “lobar pneumonia,” and both entries are signed not by Gelny, but by Dr. Breiteneder.¹⁰² Furthermore, the medical file of a 16-year-old patient who died on 11th February 1944 suggests that Gelny killed patients in the children’s institution as well—a fact that was not mentioned during the trial.¹⁰³

A total of 71 people died in October 1943 alone, and of these Gelny is only listed in the death register as the attending physician or medical examiner in 17 cases. The other 54 cases are mostly signed by Breiteneder, and in some cases by Nagy or Oman.¹⁰⁴ According to Nagy’s testimony, Breiteneder accompanied Gelny on his rounds at the beginning of his tenure.¹⁰⁵ The annualized mortality rate, calculated week by week, skyrocketed from 14.7 per cent to over 50 per cent in the first week of October and by the third week it was over 100 per cent—this is still before the first deaths occurred that were later attributed to Gelny by the court.¹⁰⁶ On February 6th 1944 Gelny himself wrote to the head of the Gau administration (Mayer) and told him he had already eliminated 400 patients—but at this point his name only appears in the Gugging death register next to 274 of a total of 384 recorded deaths (between October 1st 1943 and February 4th 1944). Even if Gelny in his letter exaggerated the number of his victims, this clearly shows that not all the murdered patients were marked with Gelny’s name in the death register. As a consequence, the number of “unnatural deaths“ was underestimated during the post-liberation People’s Court trial and also later in the

¹⁰¹ An exemplary analysis of case histories regarding the question of “decentralized euthanasia” has been done for Eglfing-Haar psychiatric hospital, see Sibylle von Tiedemann, *Dezentrale “Euthanasie” in der Heil- und Pflegeanstalt Eglfing-Haar. Eine Untersuchung der Münchner Todesfälle 1939-1945*, in: Gerrit Hohendorf et al. (ed.), *Die “Euthanasie”-Opfer zwischen Stigmatisierung und Anerkennung. Forschungs- und Ausstellungsprojekte zu den Verbrechen an psychisch Kranken und die Frage der Namensnennung der Münchner “Euthanasie”-Opfer*, Münster 2014, 34-51.

¹⁰² DÖW 18860/15, statement Johanna Steinbach, 6.2.1946; DÖW 18860/4a, record of proceedings, statement Johanna Steinbach, 6.7.1948; Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

¹⁰³ NÖLA, Heil- und Pflegeanstalt Gugging, patient case file Josef Ludwig Kern.

¹⁰⁴ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

¹⁰⁵ DÖW 18860/4a, record of proceedings, statement Dr. Koloman Nagy, 25.6.1948.

¹⁰⁶ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16). Regarding the total number of victims, see below.

historiography based on the court records.¹⁰⁷ The strong focus of the investigation on Gelny as the main perpetrator is also apparent in a statement made by the police officer in charge; that “the entire staff at Gugging was interrogated as witnesses against Gelny but individual nurses were not questioned as to their own participation in Gelny’s methods.”¹⁰⁸

Gelny found accomplices within the institution, even if he sometimes had to coerce them into obedience with threats. Although the institution’s director, Josef Schicker, was not an active supporter of “euthanasia,” he did nothing to put obstacles in Gelny’s way. After the war, Schicker portrayed himself as a victim, and said that he had “suffered great emotional distress under the conditions created by Gelny” and that he had only remained in the job so he could keep his flat at the hospital.¹⁰⁹ One of Gugging’s resident physicians, Koloman Nagy, claimed after the war that he had discharged numerous patients from the women’s ward (which he was in charge of), in order to protect them from Gelny.¹¹⁰ However, the proportion of discharges relative to transfers or deaths for women was the same as for men in 1943, and in 1944 it was even slightly lower, so his claim cannot be confirmed.¹¹¹

The behaviour described so far is in stark contrast to that of the nurse Emilie Mayer, who risked her own existence so as not to be involved in the killings. Mayer had been a nurse at Gugging since 1927. In November 1943 she was temporarily in charge of Ward 10, and was instructed by Gelny to administer an overdose of Veronal to two patients. When she discovered the next day that both women had died, she turned to a priest for support and on his advice handed in her notice, even though she had three children to support. When she appeared before the People’s Court as one of those accused, she could credibly demonstrate that she had not realized that the two women would die, and that she had gone out of her way to avoid participating in any further killings. Nevertheless, she had to spend almost two years in custody before she was acquitted and was detained longer than many of the main perpetrators of the Nazi crimes.¹¹²

Gelny’s actions required not only the complicity of the hospital staff, but also the support of the Gau leadership and the competent state authorities at the provincial level. The former head of the

¹⁰⁷ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16); DÖW 18860/7, Gelny to the head of the Gau administration (Dr. Josef Mayer), 6.2.1944. This important document is analyzed in detail below.

¹⁰⁸ DÖW 18860/6, 386.

¹⁰⁹ DÖW 18860/42, statement Dr. Josef Schicker, January 1946.

¹¹⁰ Langer-Ostrawsky, *Vernichtung*, 76-7, 82.

¹¹¹ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

¹¹² DÖW 18860/16, statement Emilie Mayer, 4.2.1946. For more detail on Mayer, see Gerhard Fürstler, “Haben sie sich gar keine Gedanken gemacht, dass das, was Dr. Gelny tut, Mord ist”? Zum Gedenken an die Opfer nationalsozialistischer Verbrechen in niederösterreichischen psychiatrischen Krankenanstalten, in: Reinelde Motz-Linhart (ed.), *Psychiatrie ohne Menschlichkeit. Gugging 1938-1945*, St. Pölten 2008, 25-55, 46-55. Another nurse, Maria Kohl, also handed in her notice: DÖW 18860/13, statement Maria Kohl, 5.2.1946.

Gau administration Josef Mayer said in 1946 that he had, on the recommendation of the Vienna Gau Physician Leader Otto Planner-Plann, presented Gelny to Gauleiter Hugo Jury in 1943, who was looking to fill the director positions at Mauer-Öhling and Gugging “with younger, more modern medical specialists.”¹¹³ Also, Gelny kept the authorities informed of his activities. In February 1944, he boasted in a (already mentioned) letter to the head of the Gau administration of the Lower Danube that his work in Gugging had led to “the elimination of more than 400 incurables in the last four months, seriously sick patients who in the current situation would have been a heavy burden on the state.” He developed a plan for Gugging in which patients who were capable of work would be accommodated in barracks, so that they could keep the agricultural operations running. A single pavilion would be maintained to “take all the sick [from the Lower Danube], and treat and sort them.” The “continued elimination of those patients who are absolutely incurable and intolerable in our present situation” was an integral part of Gelny’s concept.

This document also reveals Gelny’s efforts to ingratiate himself with the KdF, or rather the Berlin euthanasia machinery created by it, and to use the relationships he made here as a lever to strengthen his position regarding the Reich Governor in the Lower Danube. In February 1944 he received two representatives of T4 at Gugging, and assured them that he was an “activist“ acting “on his own and without official orders.”¹¹⁴ Immediately after this, he turned directly to Paul Nitsche, the medical director of T4 since December 1941, and asked for a personal discussion with him on the “question of euthanasia.”¹¹⁵ Shortly afterwards Dietrich Allers, the manager of T4’s central office, sent the results of his inquiries about Gelny to Nitsche: “Dr. Gelny is a friend of Gauleiter Jury, an old national socialist and in every respect faultless and trustworthy. Unfortunately, he is only employed part time at the hospital concerned and for the remainder of his time works in his private practice in a little village not far from the hospital—but nonetheless he is very committed to the affairs at the hospital. He is particularly interested in the E[uthanasia]-problem and I think you could make good use of him.”¹¹⁶ Nitsche then invited Gelny to a meeting in House Schoberstein at Attersee, which was used by T4 as a place for recreation, and later as an

¹¹³ DÖW 18860/35, statement Dr. Josef Mayer, 1.4.1946. During the trial Mayer testified that Gelny und Jury had met each other during their imprisonment in Wöllersdorf: DÖW 18860/3, record of proceedings, 15.6.1948. He also stated that even before the war, Gelny was spoken of as a potential future director of a psychiatric hospital: DÖW 18860/6, 337.

¹¹⁴ DÖW 18860/7, Gelny to the head of the Gau administration (Dr. Josef Mayer), 6.2.1944. One of the two visitors was Ludwig Trieb, head of “planning” for T4, see Klee, *Euthanasie*, 598. In Gugging rumours circulated after Gelny was absent between 31st October and 5th November 1943 that he had been at Hitler’s headquarters: DÖW 18860/4a, record of proceedings, statement Dr. Koloman Nagy, 25.6.1948.

¹¹⁵ BAB, R 96 I-18, Gelny to Nitsche, 7.2.1944.

¹¹⁶ BAB, R 96 I-18, Allers to Prof. [Nitsche], 22.2.1944.

emergency accommodation to escape the bombing raids on Berlin. With this meeting, Gelny had achieved his goal, and obtained access to the inner circle of the T4 organisation.¹¹⁷

If the statements made at the People's Court trial are to be believed, thanks to his connections Gelny was even in a position to ignore a direct order from the gauleiter. The head of the Gau administration Josef Mayer claimed that in 1943 or 1944 he received an instruction from Hugo Jury to stop the killing of patients, "as the population is under enough psychological strain already." He tried to pass this order on to Gelny, who asked Karl Brandt (Hitler's personal physician and one of the recipients of his "euthanasia authorisation") to intervene with Jury, and it was then decided to continue with the euthanasia, albeit with "greater restraint."¹¹⁸

Mortality rates and excess mortality in Gugging

Even before the murders initiated by Lonauer and later by Gelny, there is a clearly detectable increase in mortality rates since 1939. Since the effects of targeted malnutrition and neglect can only be detected in this indirect way, this provides a possibility to estimate the total number of victims. In this context, it is also important to point out that it is not always possible to make a clear distinction—as the People's Court sought to establish after 1945—between direct killings and those deaths that were due to neglect or lack of food. Statements made during the trials clearly show that Gelny strove to create a life-threatening environment for "incurable" patients at the hospital by, for example, generally trying to prevent patients in need of care from being fed.¹¹⁹

The highest annual mortality rate at Gugging, of 34.8 per cent, was reached in 1943. Of a total of 1755 patients who were at the hospital during this period, 610 died by the end of the year. The chances of survival were unequally distributed between the sexes. 252 men died, compared to 358 women—this corresponds to gender-specific mortality rates of 31.3 per cent and 37.6 per cent, respectively. A calculation of the so-called excess mortality rate (based on an expected mortality rate of 4.7 per cent, corresponding to the pre-war level of 1937) yields an estimated 1330 additional deaths in the hospital between 1938 and May 1945—a figure that far exceeds the killings attributed

¹¹⁷ BAB, R 96 I-18, Nitsche to Gelny, 29.2.1944; Gertrude Langer-Ostrawsky, Quellen, 23.

¹¹⁸ DÖW 18860/35, statement Dr. Josef Mayer, 1.4.1946. According to a statement during the trial, Jury's directive was issued in autumn 1944 and was based on a command of Hitler's: DÖW 18860/3, record of proceedings, statement Dr. Josef Meyer, 15.6.1948. In this context it should be noted that Viktor Brack decreed the demolition of the gassing facility at Hartheim on 12th December 1944: http://www.mauthausenmemorial.at/db/admin/de/index_maininc586.html?cbereich=1&cthema=43&carticle=245&fromlist=1 [7.1.2016].

¹¹⁹ DÖW 18860/17, statement Franz Amreiter, 6.2.1946; DÖW 18860/4, record of proceedings, statement Franz Amreiter, 6.7.1948.

to Lonauer and Gelný in the existing literature.¹²⁰ From the liberation until the end of 1946, despite the significantly reduced number of patients in the hospital, a further 90 additional deaths occurred. This is comparable with other psychiatric hospitals, where the impact of the Nazi era was also felt long after the end of the war.¹²¹

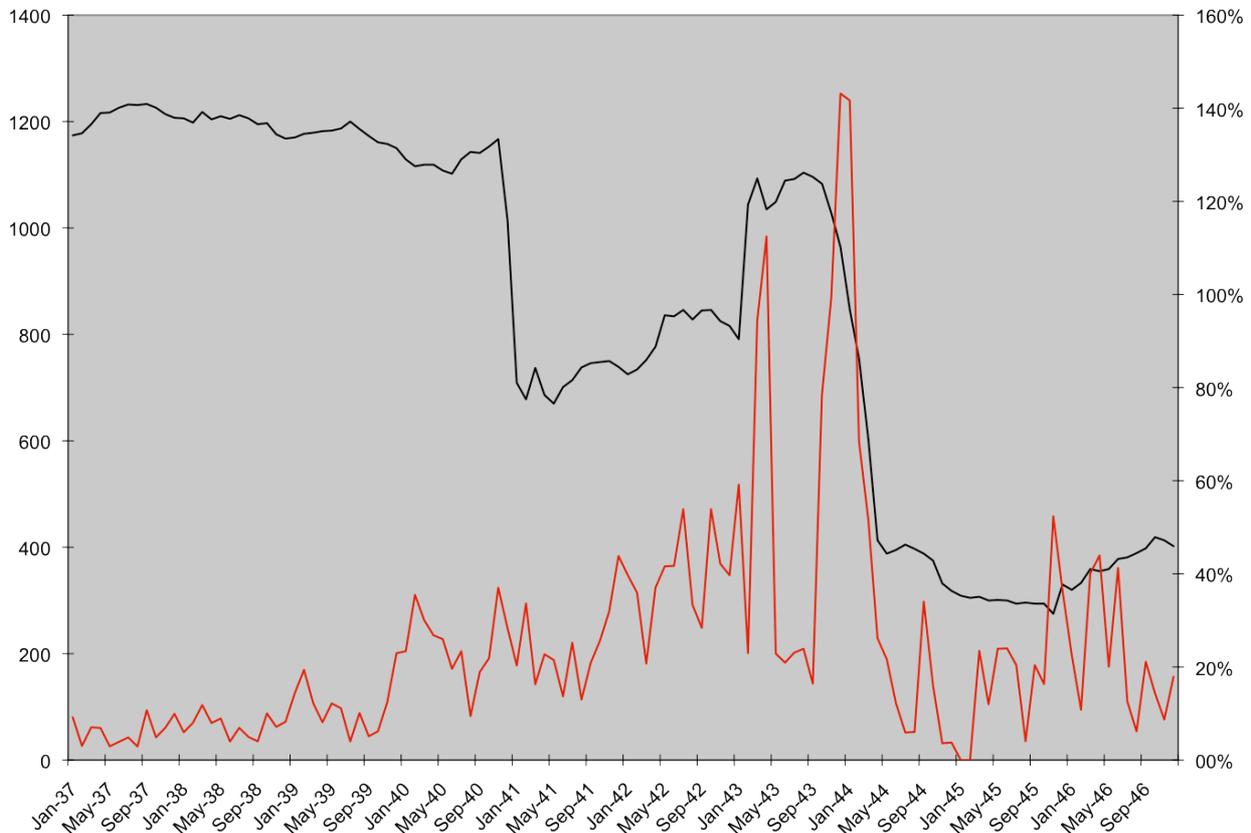


Figure 1: Number of patients and mortality rates in Gugging by month, 1937 to 1946

The diagram above is based on all patient data at the hospital (not including the children’s institution) between January 1 1937, and December 31 1946. The timeframe has been chosen to allow comparisons with the period immediately prior to Nazi rule and immediately after the war. The black line represents the total number of patients for each month (the sum of patients present in the hospital at the beginning of each month plus new admittances). What is striking is an abrupt decrease during the winter 1940/41. During this time, as set out above, a total of 569 people were transported to Hartheim as part of Action T4 and murdered there. Thereafter, the number of registered patients slowly rises until the end of 1942, to just under 800. In February 1943 a sharp

¹²⁰ The average age of the deceased in 1943 was 47.24 years, compared to 50.93 in 1937. A possible increase in the age of the patient population, therefore, cannot be considered an explanation for the high mortality rate.

¹²¹ Particularly striking is the case of the Vienna institution Am Steinhof, where the peak of mortality (297 deaths) was not reached until October 1945: see Schwarz, Mord, 127-30.

increase can be observed; the numbers increased from 791 to 1044 and thus reached a level almost equal to that prior to the T4 deportations. The reason for this is that 298 people were transferred from the Mauer-Öhling institution in Lower Austria, which was increasingly used by the Wehrmacht.¹²² A plateau phase follows this sharp increase, which ends at the beginning of October 1943. After this point, within a few months, a drastic reduction in the number of patients is seen. This crucial moment in the hospital's history will be further discussed below. First I want to discuss the red line in the diagram, which represents the mortality rate. This is calculated as the percentage of deaths each month, compared to the total number of patients in this period, extrapolated to one year. Despite strong fluctuations, a clear upward trend is seen from January 1937 to February 1943. Already in January 1943, the mortality reached an annual rate close to 60 per cent. In the spring of 1943, the curve then shows a marked upward swing to reach an annual mortality rate of more than 100 per cent. The reason for this is the killings carried out by Rudolf Lonauer in late March/early April 1943. The average age of the victims of these mass murders was 40.19 years. It is striking that, in total, significantly more women than men were killed (75 out of 112 victims were women). In the period between October 1943 and November 1944, the murders carried out by Emil Gelny are clearly reflected in the diagram. The death register connects him to 365 people, where he is noted as the "attending physician."¹²³ The average age of this group of victims is 49 years. Again, female victims outweighed men, with a ratio of 218 to 147. Gelny's murders paved the way for what was almost an evacuation of the institution in March 1944—which is clearly reflected in the development of the number of patients. In the relatively short time from November 1943 until March 1944 many people were murdered directly, and many more were transported to other institutions where they would meet their destruction. It is noteworthy that even after most of the patients had been removed from Gugging, the mortality rate remained relatively high, and certainly well above the pre-war level—this despite the fact that the only people left in the institution at this point were in physically good shape and capable of being productive in the hospital's agricultural operations.

¹²² Of this group at least 70 percent died before the end of the war: Data analysis "PatientInnenbewegungen Gugging 1937-1946" (see footnote 16). Regarding the increasing pressure of the demands of the Wehrmacht on the institution, see i.a. DÖW 18860/4a, record of proceedings, statement Anton Kremser, 25.6.1948.

¹²³ NÖLA, Gugging psychiatric hospital death register (adults), 1942-1952. Regarding the uncertainties surrounding this number, see above.

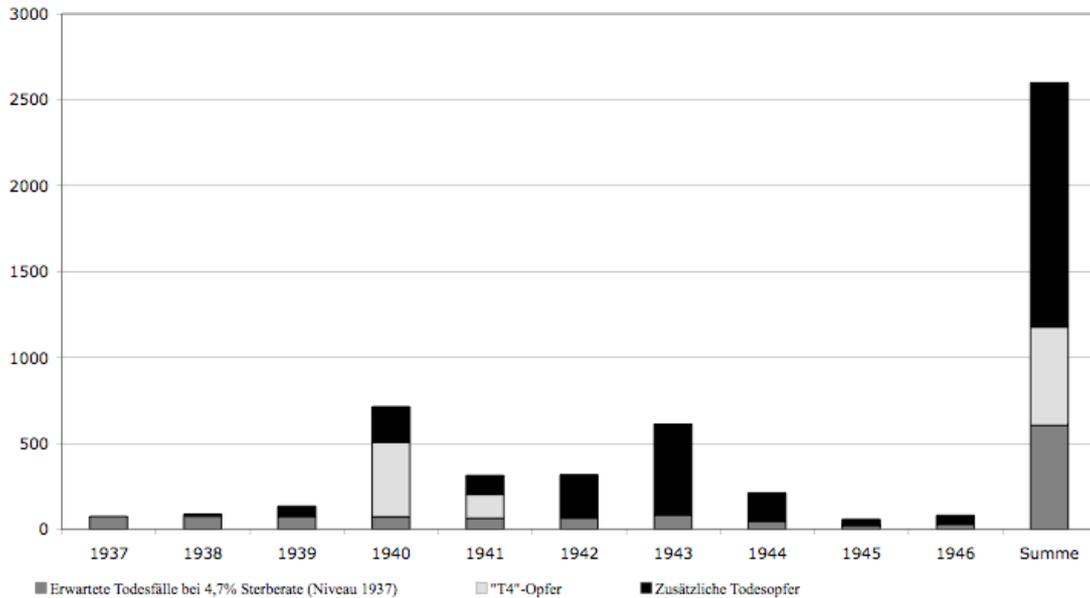


Figure 2: Excess mortality in Gugging psychiatric hospital (adults)

Figure 2 shows a calculation of so-called excess mortality. As a base line, the 1937 mortality rate of 4.7 per cent is used. The dark grey sections of the bar represent the expected number of deaths in the year in question, based on the mortality rate from 1937. The light grey bars in 1940 and 1941 represent the victims of Action T4, a total of 569 (excluding the children's institution). The black sections of the bars indicate the number of deaths that went beyond the expected mortality in that year, i.e. the excess mortality. This shows that the number of excess deaths between 1938 and 1946 came to a total of 1420. This includes the victims of Lonauer and Gelny's direct executions. The calculation does not, however, include those people who were transferred from Gugging to other institutions and were killed at those institutions. It is often hard to prove that an individual patient who died during this time was the victim of deliberate policies of extermination. However, the statistical analysis clearly demonstrates the devastating effects the prevailing conditions in the hospital had on the patients. In addition, occasionally there are clear indications that the deaths were not random but targeted. One example in this context is the fate of a group of 67 male patients who arrived at Gugging psychiatric hospital in two transports, on May 30 and June 3 1943, from the Alexianer hospital Neuß am Rhein. The average age of the group was 47.6. After an average stay of

a little over six months, 62 people from this group had died, and four more died in the Vienna psychiatric hospital Am Steinhof. Only one man from this group, who was 34 years old when he was admitted, lived to see the end of the war—he escaped from the hospital in October 1945. Overall, this results in a fatality rate of 98.5 per cent for this transport, which strongly suggests planned extermination—either by direct execution (at least 36 fell victim to Emil Gelny)—or death due to systematic neglect and malnutrition.

Regarding transfers to other hospitals, there were two transports involving a total of 100 women that should above all be mentioned. They were sent to the extermination centre at Meseritz-Obrawalde in Pomerania, at the end of February 1944. The background to this was that (as previously mentioned) Gugging hospital was cleared of most patients between March 11th and 13th 1944, apart from 395 “working patients,” in order to make room for an auxiliary hospital for the population of Vienna. In the course of this partial evacuation a further 361 patients, including 211 children, were transferred to institutions in the Reichsgau of Vienna.¹²⁴ The majority of these individuals were sent to Am Steinhof, where many died before the end of the war, in most cases due to the policy of “decentralized euthanasia“ implemented at this institution as well.¹²⁵ At least 46 children and adolescents were sent to Spiegelgrund, 31 of these to the “special children’s unit” which served as a euthanasia centre.¹²⁶ The planned elimination of all patients from Gugging who were considered “unworthy“ or “useless“ had thus become a reality.

The number of Jewish patients at Gugging psychiatric hospital was much lower than for example at Steinhof.¹²⁷ Between March 1938 and the end of the war there were a total of 22 people of the Jewish faith in the psychiatric hospital and six children and adolescents in the children’s institution. Of the adult patients, one was transferred to a nursing home in 1938, two were released in 1939, one was sent to the Central Office for Jewish Emigration (Eichmann’s office in Vienna) in 1942 and presumably deported, six were transported to Hartheim, one via Mauer-Öhling to Niedernhart, and by February 1941 ten had died at Gugging psychiatric hospital. A patient who had converted to

¹²⁴ WStLA, 1.3.2.209.A1 (KAV), Mag. Abt. E8, Kranken- und Wohlfahrtsanstalten 1945, 27201-30000, Akt II/3-H-29103/45, Gundel to the Vienna City Treasurer, 5.8.1944. As regards Meseritz-Obrawalde see i.a. Thomas Beddies, *Krankenmord in den östlichen preußischen Provinzen. Die pommersche Landesheilanstalt Obrawalde im brandenburgischen Kreis Meseritz 1939-1945*, in: G. Nissen/F. Badura (ed.), *Schriftenreihe der Deutschen Gesellschaft für Nervenheilkunde*, Würzburg 2000, 49-57; Susan Benedict, *Meseritz-Obrawalde: a ‘wild euthanasia’ hospital of Nazi Germany*, in: *History of Psychiatry* 19 (2008), 68-76; Ernst Klee, “Euthanasie” im NS-Staat. Die “Vernichtung lebensunwerten Lebens,” Frankfurt am Main 1983, especially 401-10.

¹²⁵ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

¹²⁶ WStLA, 1.3.2.209.A1 (KAV), Mag. Abt. E8, Kranken- und Wohlfahrtsanstalten 1945, 27201-30000, Akt II/3-H-29103/45, Kowarik to the Vienna mayor, 7.3.1944 and official note from Dr. Ludwig Fieglhuber (a senior figure in Vienna’s hospital administration), 11.7.1944.

¹²⁷ Cf. Wolfgang Neugebauer, *Jüdische Opfer der NS-Euthanasie in Österreich*, in: *Arbeitskreis zur Erforschung der Nationalsozialistischen “Euthanasie” und Zwangssterilisation* (ed.), *Beiträge zur NS-“Euthanasie“-Forschung* 2002, Ulm 2003, 129-146.

Judaism in 1934 (born in 1927) died in 1973 at Steinhof, and was the only proven survivor of this group. Of the six Jewish adolescents in the children's institution (all male), one died in 1940 in Gugging, another in 1942 in the children's euthanasia centre Am Spiegelgrund and another was sent to the Central Office for Jewish Emigration. The remaining three were sent to Am Steinhof and two of these were transferred to Hartheim as part of Action T4 and murdered there. The fate of one is unknown.¹²⁸

The cold figures of the statistics should not allow us to forget the many individual stories that lie behind the numbers. Unfortunately sources that can shed light on the living conditions of patients, such as the testimony of Adolf Mayerhofer before the People's Court, are rare. Mayerhofer, who as a communist had been temporarily imprisoned shortly after Austria's annexation to Nazi Germany, made several suicide attempts as he was afraid of being arrested again, and was interned in Mauer-Öhling and Gugging until the end of the war. He reported on the severe mistreatment of patients in Mauer-Öhling, e.g. by wrapping them in wet sheets and giving them injections to make them vomit. In Gugging he was punished by being attached to the shock apparatus and given electric shocks by Dr. Breiteneder.¹²⁹ Another former patient remembered how a nurse gave a patient water to drink that had been used to clean the floor.¹³⁰

Murder and modernization: Gelny's electrical method of killing

Emil Gelny did not only murder with drug overdoses—as was the case in many psychiatric institutions in the German Reich—but he also expanded the range of medical killing methods by developing a completely independent method that was not used anywhere else. To this end, he added additional electrodes to an electroconvulsive device used for therapy, with which he administered lethal electric shocks. The first use of this shock apparatus for killing purposes was reportedly in April 1944, in Ward 6 of Gugging psychiatric hospital. Gelny was said to have killed six male patients, in the company of an unidentified professor.¹³¹ A while later on the same premises (the ward had been closed on April 15th 1944 and therefore was not occupied) Gelny killed three women using this same method. Karl Kammerer, the former head nurse of Ward 6, testified at the trial that four “unknown men” were present at two of the murders, and that the

¹²⁸ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16).

¹²⁹ DÖW 18860/94, statement Adolf Mayerhofer, 30.6.1948.

¹³⁰ DÖW 18860/85, statement Josef Schnäps, 10.5.1946.

¹³¹ DÖW 18860/18, statement Johann Thalauer, 4.2.1946.

killings were apparently carried out for demonstration purposes.¹³² During an interrogation by state police a few months earlier, Kammerer had mentioned important additional information: “In summer 1944 Dr. Gelny came with some men (presumably the director of Am Steinhof psychiatric hospital, and the constructor of the electric shock apparatus, Dr. Holzer, who was an assistant at the Pötzl clinic [the Psychiatric-Neurological University Clinic in Vienna]) and carried out experiments on two women. They died as a result of these experiments.”¹³³ Two women can be identified as the likely victims of these murders. They both died on June 2nd 1944, and Emil Gelny is registered as the attending physician for both patients.¹³⁴

The director of the Steinhof hospital was at this time Hans Bertha, one of the T4 “experts” charged with selecting the victims, who was responsible for a massive increase in the mortality rates at the institution.¹³⁵ The also mentioned university psychiatrist Wolfgang Holzer was—apparently, on his own initiative,—in contact with the secret T4 organization. In the documents of the “Reich Commissioner for hospitals and nursing homes“ (Herbert Linden, the liaison between the Reich Ministry of the Interior and T4), there are several copies of a manuscript written by Holzer entitled “Proposal to establish a research institute for the active treatment of nervous and mental disorders.” In it he refers explicitly to the “current problem of euthanasia.” On the one hand, Holzer pointed out that a “rash legal implementation” could put an end to the search for new therapy methods and the “centuries-long efforts to improve the lot of the insane.” But he also argued that only an intensive search for therapeutic options would give the state the moral legitimacy “to approach the euthanasia problem in the context of psychosis.”¹³⁶

Gelny’s connections to the T4 complex are further demonstrated by a meeting of doctors and functionaries involved with “euthanasia” that took place from July 3rd to 6th 1944 in Vienna which

¹³² DÖW 18860/16, statement Karl Kammerer, 4.2.1946.

¹³³ DÖW 18860/16, statement Karl Kammerer, 24.7.1945.

¹³⁴ Data analysis “PatientInnenbewegungen Gugging 1937-1946” (see footnote 16). In the Amstetten District Gendarmerie Command’s report for the Vienna prosecutor it is mentioned that Gelny also used the shock apparatus in Summer 1944 in the Steinhof institution, where he allegedly murdered two women in the presence of Otto Hamminger and Erwin Jekelius: DÖW 18860/1, Amstetten District Gendarmerie Command to the Vienna prosecutor, 30.1.1946. The source of this information, however, is not mentioned in the document. Although Jekelius at the time was in the military, he was present in Vienna to attend a meeting in June 1944: WStLA, 1.3.2.202, personnel file Dr. Erwin Jekelius, notes from a meeting with Prof. Max Gundel, 8.6.1944. It could be that there was a mix-up with the killings at Gugging on 2nd June 1944. In any case Hamminger denied the episode: DÖW 18860/56, statement Dr. Otto Hamminger, 14.3.1946.

¹³⁵ Regarding “decentralized euthanasia” at Steinhof, see Schwarz, Mord; for Hans Bertha see Carlos Watzka, Die “Fälle” Wolfgang Holzer und Hans Bertha sowie andere “Personalien.” Kontinuitäten und Diskontinuitäten in der Grazer Psychiatrie 1945-1970, in: Virus - Beiträge zur Sozialgeschichte der Medizin 14 (2016), 103-38.

¹³⁶ BAB, R 96 I-18, W. Holzer, proposal to establish a research institute for the active treatment of nervous and mental disorders, with a handwritten date of September 1944. According to a questionnaire completed in 1947, Holzer was never a member of the NSDAP, which meant he was repeatedly refused a postdoctoral lecturing qualification and advancement at the Psychiatric-Neurological University Clinic: ÖStA, AdR, BMU, personnel file Wolfgang Holzer, questionnaire from 1.12.1947, signed by Holzer. Holzer appeared as an expert witness at the Gugging and Mauer-Öhling murder trial.

was organized by the KdF.¹³⁷ It reportedly involved 30 to 40 people, most of whom were directors of psychiatric hospitals and nursing homes throughout Germany. The question of “euthanasia” was top of the agenda. As part of a visit to Gugging, Gelny used the forum to demonstrate the efficiency of his invention by killing a patient with his converted shock apparatus before the assembled audience. Otto Hamming spoke of this event after the war, before the People’s Court: “This patient died in the presence of all the guests, a shudder ran through my body. I was surprised by how long the demonstration took—Gelny had his watch in his hand the whole time. Before the demonstration Gelny did not talk about why he was doing it, but after the patient had died he spoke about what he saw as the advantages of his method of using the shock apparatus.”¹³⁸

The testimony of defendant Josef Kriz suggests that this incident was not the only killing that was demonstrated before a larger audience: “There were a number of occasions when external commissions were [held] there, [with] between 13 and 18 people.”¹³⁹ We have evidence of at least one more such demonstration. It probably took place in summer, or at the latest in autumn 1944, in the presence of Prof. Paul Nitsche, T4’s medical director, and Karl Brandt, Hitler’s personal physician and general commissioner of sanitation and health.¹⁴⁰ This is supported by a letter from Nitsche dated August 1944, in which he asks if he can be present at a planned demonstration of Gelny’s killing method: “It would be very useful for me, if I could be present at the inspection of Dr. Gelny’s electric method.”¹⁴¹ Koloman Nagy testified that he heard from Dr. Breiteneder that Brandt really did attend a demonstration of the killing method at Gugging, and Nitsche’s participation is corroborated by Josef Kriz’s testimony.¹⁴²

The relationship between the relatively new method of electroconvulsive therapy and the Nazis’s “euthanasia” complex go beyond Gelny’s misappropriation of the equipment developed for the purpose. Many psychiatrists involved in the euthanasia killings sought to promote active therapy methods and to overcome the helplessness of their discipline in the face of severe chronic mental illness—which was often made worse by years spent in a psychiatric institution.¹⁴³ Therapies

¹³⁷ Klee, *Euthanasie*, 471.

¹³⁸ DÖW 18860/56, statement Dr. Otto Hamming, 14.3.1946; DÖW 18860/4, record of proceedings, statement Dr. Josef Mayer, Dr. Richard Eisenmenger, 23.6.1948. Eisenmenger was also present: DÖW 18860/6, 370.

¹³⁹ DÖW 18860/3, record of proceedings, statement Josef Kriz, 18.6.1948.

¹⁴⁰ DÖW 18860/57, statement Josef Kriz, 21.1.1946.

¹⁴¹ BAB, R 96 I-18, Nitsche to Brandt, 24.8.1944.

¹⁴² DÖW 18860/13, statement Dr. Koloman Nagy, 26.7.1945 (Breiteneder died in early December 1945: DÖW 18860/58, statement Franz Rsimnac, 2.1.1946); DÖW 18860/3, record of proceedings, statement Josef Kriz, 18.6.1948.

¹⁴³ Cf. Hans-Walter Schmuhl, *Reformpsychiatrie und Massenmord*, in: Michael Prinz/Rainer Zitelmann (ed.), *Nationalsozialismus und Modernisierung*, Darmstadt 1994, 239-266; id., *Die Genesis der “Euthanasie.” Interpretationsansätze*, in: Maike Rotzoll et al. (ed.), *Die nationalsozialistische “Aktion T4” und ihre Opfer. Von den historischen Bedingungen bis zu den ethischen Konsequenzen für die Gegenwart*, Paderborn 2010, 66-73, especially 69-71.

developed in the 1930s induced artificial states of seizure—through the administration of insulin, cardiazol or electrical shocks—and promised to achieve some success with conditions long-considered incurable, and to allow doctors to release at least some of their patients as cured. The aforementioned Herbert Linden, responsible at the Interior Ministry for coordination with T4, promoted to the best of his abilities the distribution of electro-shock devices, which were not always readily available under wartime conditions.¹⁴⁴

Insulin shock treatment was developed at the Vienna University Psychiatric Clinic in the 1930s, and cardiazol and electroshock treatments were also researched here.¹⁴⁵ Wolfgang Holzer, assistant at the clinic, developed two models of electric shock treatment devices. The units were produced and sold by the Viennese firm F. Reiner & Co., which thereby entered into direct competition with the market leader Siemens.¹⁴⁶ One of the models was a portable device, which had been conceived by Holzer with the aim of treating as many patients as possible, with little complication.¹⁴⁷ Gelny became acquainted with the new technology, which he later adapted for his own purposes, during a training course he did at the clinic to prepare him for his new role as director in Gugging. He modified the device for his own purposes, by adding additional electrodes for the wrists and ankles made by the hospital's locksmith.¹⁴⁸ At Gugging, Gelny seems to have used the killing device primarily for demonstration purposes. The opportunity to use it on a large number of patients came in April 1945 in Mauer-Öhling, as described in detail in the next section.

Decentralised euthanasia in Mauer-Öhling

Events at the Mauer-Öhling institution between the suspension of the killings at Hartheim and the other T4 extermination centres in 1941, and autumn 1944 have not been widely studied, and in particular data on mortality trends during this period is missing. After 1945 the authorities ignored the possibility of death by deliberate starvation and neglect, and concentrated on identifiable

¹⁴⁴ BAB, R 96 I-12, Linden, Reich Commissioner for hospitals and nursing homes to provincial governments etc., 24.8.1942.

¹⁴⁵ For the history of insulin shock treatment, see Helmut Gröger, Die Insulin-Schocktherapie – ihre Problematik und grundsätzliche Bedeutung, in: Schriftenreihe der Deutschen Gesellschaft für Geschichte der Nervenheilkunde 11 (2005), 209-24; regarding Cardiazol see i.a. Walter Birkmayer, Motorische Erscheinungen im Cardiazol-Krampf, in: Archiv für Psychiatrie und Nervenkrankheiten (1939), 291-313.

¹⁴⁶ BAB, R 96 I-12, Prospekte “Elkra I” und “Elkra II.”

¹⁴⁷ Wolfgang Holzer, Über die Methodik der Elektroschocktherapie, in: Allgemeine Zeitschrift für Psychiatrie 118 (1941), 357-79, 374-8.

¹⁴⁸ DÖW 18860/4, record of proceedings, statement Dr. Otto Hamminger, 23.6.1948; DÖW 18860/1, Amstetten District Gendarmerie Command to Vienna public prosecutor, 30.1.1946; DÖW 18860/17, statement Anton Aichberger, 24.7.1945.

individual acts of killing which could be attributed by nurses and physicians to Emil Gelny—who was by this point a fugitive from justice.

According to testimony from the institution's director Michael Scharpf, Gelny was brought to Mauer-Öhling in November 1944 by Gau Physician Leader Richard Eisenmenger in order to “make a clean sweep,” as he had done in Gugging. According to Scharpf, Gelny began killing selected patients the very next day.¹⁴⁹ During this phase, the murders were carried out by administering poisoned food and drink or by lethal injections. Gelny mainly used Luminal, but also morphine and Hyoscin. In this way he killed up to ten people on some days.¹⁵⁰ Nursing staff mostly assisted him, by administering the drug overdose he had specified. As in Gugging, the nursing staff had different reactions to Gelny's instructions. Among the institution's doctors, Gelny was able to enlist Josef Utz as an accomplice. Witnesses testified that he poisoned patients with Luminal and also instructed nursing staff to administer overdoses.¹⁵¹ Among others, the head nurse of the women's Wards 2 and 4 said that Gelny and Utz killed 30 women in these two wards in November 1944, with Evipan injections.¹⁵² According to testimony from a former nurse at Mauer-Öhling, who was accused before the People's Court after the war, Gelny also experimented with other killing methods. For example, he attempted to kill patients by injecting compressed air into their veins, but did not succeed.¹⁵³

On April 8th or 9th 1945, Gelny returned from Gugging to Mauer-Öhling after a longer absence. By this point Gugging had already been occupied by the Red Army, and Gelny crossed the enemy lines by bike.¹⁵⁴ The purpose of his visit was by this time generally known in the institution. The head nurse of Pavilion 1 had informed staff in March 1945 that Gelny would come to the institution to eliminate patients, and threatened anyone who spoke about it with the death penalty.¹⁵⁵ According to Scharpf, Gelny still intended to murder a further 700 or 800 people, but due to the end of the war he was only able to realize part of his plan. Among his victims at this stage was a soldier who was about to be released, and whose wife had already contacted the hospital to say she would pick him up, as well as a considerable number of foreign forced labourers.¹⁵⁶ A total of 149 people were

¹⁴⁹ DÖW 18860/36, statement Dr. Michael Scharpf, 20.3.1946.

¹⁵⁰ DÖW 18860/1, Amstetten District Gendarmerie Command to Vienna public prosecutor, 30.1.1946.

¹⁵¹ DÖW 18860/52, statement Leopoldine Dorfer, 2.5.1946; DÖW 18860/45, statement Marie Dorn, 30.4.1946; DÖW 18860/6, 405. Josef Utz had joined the NSDAP as early as in 1931 and the SA in 1932. He was appointed to his position in the hospital in November 1938, although he was not a psychiatrist: DÖW 18860/43, signed by Dr. Josef Utz, 11.8.1945; DÖW 18860/2, Vienna public prosecutor, indictment 15 St 6271/45, 25.9.1947.

¹⁵² DÖW 18860/46, statement Anna Bürgel, 8.12.1945.

¹⁵³ DÖW 18860/70, statement Franz Priesner, 25.1.1946.

¹⁵⁴ DÖW 18860/53, statement Dr. Franz Siebert, 29.4.1946.

¹⁵⁵ DÖW 18860/71, statement Josef Maischberger, 12.2.1946.

¹⁵⁶ DÖW 18860/36, statement Dr. Michael Scharpf, 5.12.1945; DÖW 18860/1, District Gendarmerie Command Amstetten

murdered by Gelný in April 1945—77 men in Pavilion 1 and 72 women in Pavilion 2.

As a murder weapon he used the modified electric shock device that he had developed at Gugging. Electric shocks had been used at Mauer-Öhling for medical treatment before Gelný's arrival.¹⁵⁷ On the men's side of the hospital, shock treatment could only be administered in Pavilion 1, as the treatment required sockets with higher amperage—which had been installed there in 1944.¹⁵⁸ On the women's side, Pavilion 2 was equipped accordingly, also initially for medical treatment.¹⁵⁹ In the company of a nurse, Gelný went through individual sections compiling lists of his next victims. In Pavilion 1 and 2 a room had been provided for the killings, each with ten beds. Nursing staff were instructed to individually escort patients here. They were put on a bed and fitted with head electrodes, ostensibly to carry out electro-convulsive treatment. After the patient had fallen unconscious from the first power surge, Gelný (the nurses denied having done this themselves) fitted the additional electrodes and triggered the lethal surges. The actual dying process took up to ten minutes. Once the victim was dead, he or she was covered with a sheet and hidden behind a screen, so that the next one did not suspect what was happening. Only at night were the corpses collected and buried secretly in the cemetery—naked and without a coffin. The physical work of collecting and burying the bodies was done partly by patients, and partly by labourers employed by the institution. On one occasion 20 bodies were removed in a single night in this way.¹⁶⁰

One of the victims of this period was a soldier, whose two brothers had already been killed in the war. The mother discovered in the hospital's office that she had lost her final son.¹⁶¹ Another victim was Johann Poltrum, who was admitted to Mauer-Öhling in July 1943, suffering from a persecution complex. When his wife visited him some time later, she felt that he had made a good recovery and asked the director to release him—without success. In July 1945 she received notification that her husband had died in April of that year. The cause of death was not given, and it was only after reading newspaper reports of the trial that she became suspicious that he had been the victim of a crime.¹⁶² Hedwig Zdarsky (born 1899) had been in Mauer-Öhling on several occasions for the treatment of manic-depressive phases, but had always recovered. In April 1945 she had been

to the Vienna public prosecutor, 30.1.1946; DÖW 18860/100, lists of the patients who were murdered in Mauer-Öhling in April 1945. For more on forced labourers as victims of euthanasia killings, see the next section.

¹⁵⁷ DÖW 18860/53, statement Dr. Franz Siebert, 18.12.1945.

¹⁵⁸ DÖW 18860/74, statement Josef Dirnberger, 8.12.1945.

¹⁵⁹ DÖW 18860/46, statement Anna Bürgel, 8.12.1945.

¹⁶⁰ DÖW 18860/1, Amstetten District Gendarmerie Command to the Vienna public prosecutor, 30.1.1946; DÖW 18860/21, statement Heinrich Hoffmann, 25.3.1946; DÖW 18860/46, statement Franz Haselberger, 29.4.1946.

¹⁶¹ DÖW 18860/53, statement Dr. Franz Siebert, 29.4.1946.

¹⁶² DÖW 18860/98, Gendarmerie Command Post Rabenstein an der Piel, report on Marie Poltrum, 24.4.1946; DÖW 18860/100, List "Men who were liquidated by means of electricity in April 1945," undated.

already scheduled for release but after a relapse fell victim to Gelny's campaign of murder.¹⁶³ Erna Lukaschek was 22 years old when she was admitted to Mauer-Öhling in December 1944. Shortly after the birth of her first child, she discovered that her husband had been shot because of his alleged links to the Yugoslav partisans—and she had an acute nervous breakdown. Her sister had the following to say about a visit to the hospital: “I hardly recognized my sister at Mauer-Öhling. She was reduced to a skeleton, she had many black-blue bruises (probably from injections) and she was very afraid of all the hospital staff and feared that she would be poisoned. She also said: ‘They’re going to kill us all.’” A short while later Erna Lukaschek was dead, supposedly because of birth psychosis and heart failure.¹⁶⁴

Without a doubt, Gelny acted of his own accord and repeatedly went against colleagues and superiors in what he was doing. To Otto Hamminger, Gelny once described himself as “an avid supporter of euthanasia.” Bloodlust and sadism undoubtedly played an important role in his motivations.¹⁶⁵ At the same time, his zeal for killing was embedded in the regional health policy and conflicts about the distribution of hospital capacities, staff, and food that were all a result of the war. At his first appearance at Mauer-Öhling in November 1944, Gelny's official order was to mediate between the hospital's management and the Wehrmacht, which was claiming an increasingly large part of the institution.¹⁶⁶ It may well have been on his own initiative that he again sought to resolve the conflicts over resources by murdering patients as he earlier had done in Gugging, but this was at least tacitly accepted by his superiors. Eisenmenger's justification for the planned killings (according to testimony from Scharpf) once again demonstrates the economic-utilitarian framework within which the perpetrators operated, and it also demonstrates how the war was used to legitimize the relativisation of human life. Eisenmenger declared: “this is a time when hundreds of thousands of strong young men are dying, and as many hundreds of thousands of people are laid to waste by hunger and malnutrition—therefore we should not be concerned with keeping incurable patients alive in institutions by artificial means.”¹⁶⁷ Significantly, one pavilion (4) was cleared of its patients as late as 1945 to make way for the Wehrmacht. On several occasions Gelny said that the beds “vacated” in this way were needed for the wounded.¹⁶⁸

Because criminal prosecution after the war was focused on the activities of Gelny and his direct

¹⁶³ DÖW 18860/98, Maria Zdarsky to the public prosecutor at the Vienna People's Court, 25.3.1946. Hedwig Zdarsky was killed on 19.4.1945 by the electric shock apparatus: DÖW 18860/100.

¹⁶⁴ DÖW 18860/84, Dorothea Zeleny, report to the Vienna public prosecutor, 25.1.1946.

¹⁶⁵ DÖW 18860/4, record of proceedings, statement Dr. Otto Hamminger, 23.6.1948.

¹⁶⁶ DÖW 18860/3, record of proceedings, statement Dr. Richard Eisenmenger, 15.6.1948.

¹⁶⁷ DÖW 18860/36, statement Dr. Michael Scharpf, 20.3.1946.

¹⁶⁸ DÖW 18860/4, record of proceedings, statements of Rosa Schrabauer and Katharina Westl, 22.6.1948.

accomplices, the possibility that a deterioration in care and deliberate neglect could have claimed as many lives as the direct killing actions was not considered during the investigation nor during the trial. Up until now, there has been no detailed study of the mortality trends in Mauer-Öhling during the war, and so it has not been possible to estimate the total number of victims during the decentralized phase of “euthanasia.” Court documents offer only some isolated clues to the living conditions at the institution, such as the report by a former patient who in November 1942 had to lay on a thin straw mattress on the bare ground and suffered serious health problems as a result.¹⁶⁹ Nevertheless, one of the court documents contains a handwritten list of patient movements in Mauer-Öhling from 1937 to 1944. Although this source needs to be treated with caution, it does provide a preliminary estimate, until a more comprehensive analysis of the hospital’s records will be available.¹⁷⁰ According to the document, there was a significant rise in the number of deaths at Mauer-Öhling as early as 1940 (long before Gelny’s first visit to the institution) and by 1943 the mortality rate had peaked at nearly 35 per cent, dropping to around 21.5 per cent by 1944. The figure for 1943, however, requires far more detailed inspection, as in this year we know that 298 patients were transferred to Gugging, but they do not appear in the table. It is conceivable that those who were in the group that was transferred, who then died at Gugging, are included in the recorded deaths. For the first months of 1945, the table includes data on Gelny’s murders (149), but not on any other fatalities at the hospital. Based on the numbers given in the document (and keeping in mind the mentioned limitations), a preliminary estimate of the number of excess deaths in the Mauer-Öhling psychiatric hospital of approximately 1500 people is possible. If this figure is confirmed based on analysis of the hospital records, then the total number of victims would have been significantly underestimated until now.

Year	Number at beginning of year, plus admissions	Deaths	Yearly mortality rate	Expected deaths (based on 1937 mortality rate)	Additional deaths (excess mortality)
1937	1569	72	4.59	72	0
1938	1626	88	5.41	75	13

¹⁶⁹ DÖW 18860/98, Pius Gratzl to the public prosecutor for the Vienna People’s Court, 8.6.1946.

¹⁷⁰ DÖW 18860/76, Table on patient numbers, admissions, discharges, deportations and deaths in Mauer-Öhling, undated. The figures in the table are largely coherent, but there are certain discrepancies from one year to the next, in terms of the exact numbers of patients. One possible explanation is, that in some years patients who were transferred to other institutions were not counted, or not completely counted. However, from 1939 the error does not amount to more than 2 percent per year.

1939	1574	135	8.58	72	63
1940	1562	280	17.93	72	208
1941	1348	173	12.83	62	111
1942	1388	316	22.77	64	252
1943	1756	612	34.85	81	531
1944	1006	216	21.47	46	170
1945	600 (without admissions)	n/s	n/s	n/s	>149 (April alone)
Total					>1497

Patient movements, deaths and excess mortality in Mauer-Öhling

Foreign forced labourers as victims of “euthanasia” at Mauer-Öhling

Among the victims at Mauer-Öhling there were also many foreign forced labourers and prisoners of war. Between July 1940 and April 1945 at least 204 people were admitted, who presumably belonged to one of these two categories. By May 1945, a total of 45 forced labourers (32) and prisoners of war (13) had died at the hospital, and three more people died after the liberation.¹⁷¹ It should be noted that in September 1944 the Mauer-Öhling psychiatric hospital was officially designated a “Collection point for mentally ill eastern workers and Poles” from the formerly Austrian provinces. With this came the task of ensuring that forced labourers who were no longer productive for mental reasons should be made fit for work again within a short period of time, or be destroyed. No later than four weeks after a labourer was admitted to the institution, a medical report had to be sent to the head of the “central clearing house for psychiatric hospitals“ in Linz or rather Hartheim—one of the front organizations of T4. If there was no indication that they could be restored to full working capacity, T4 would arrange a transport to “special institutions,” a euphemism for the T4 extermination facilities.¹⁷²

If, or to what extent, such transports occurred from Mauer-Öhling to Hartheim is still unclear. The same is true for the fate of 21 people who were transported from Mauer-Öhling on November 14th

¹⁷¹ Markus Rachbauer, *Die Ermordung von psychisch und physisch kranken ausländischen ZivilarbeiterInnen im Rahmen der NS-“Euthanasie” – unter schwerpunktmäßiger Betrachtung des Gauess Oberdonau* (master’s thesis), Salzburg 2009, 91; 103. See also the list of Gelny’s victims in DÖW 18860/100. According to a list drawn up at the end of 1946 in the archive of the Red Cross’s International Tracing Service, at least 77 foreigners died at Mauer-Öhling during the war, this figure includes ethnic Germans from Slovakia: *ibid.*, 103.

¹⁷² Vienna University Archives, Dekanatsakten Medizin 1944/45, Runderlass RMdI., 6.9.1944. See also Keplinger, *Tötungsanstalt* (2008), 110-1.

1944.¹⁷³ According to the testimony of the former director Scharpf, the transport was bound for the Niedernhart hospital in Linz and the instruction was issued by the Linz Labour Office—which was in charge of the allocation of forced labour.¹⁷⁴ As the people concerned were never registered at Niedernhart—according to the records—it is likely that they were actually transferred to Hartheim.¹⁷⁵ There, preparations were being made from October 1944 for closing the extermination centre, but according to the statement of an employee transports with prisoners and forced labourers continued to arrive until November 1944, to be killed and burned at the castle.¹⁷⁶ Even in the last phase of the war, forced labourers arrived at Mauer-Öhling, some of them after a stay in the Niedernhart institution. Among others, 31 forced labourers from the transit camp Linz-Bindermichl were brought to Mauer-Öhling between November 28th and January 30th 1945, and on 19th January 1945 seven forced labourers arrived from Hall in Tirol—and many of these fell victim to Gelny.¹⁷⁷

Events after Liberation

After the war, staff from the two institutions and several of Gelny's superiors were tried for their crimes. Gelny himself was not among them. He fled first to Kufstein, where he worked as a doctor for the French military government. However, the French became suspicious of him, but Gelny managed to elude being arrested at gunpoint and escaped.¹⁷⁸ He made it to Syria, and later Iraq, where he again worked as a doctor. He is believed to have died in Baghdad, on March 28th 1961.¹⁷⁹ On September 25th 1947, the Vienna prosecutor brought charges against 23 people, including Josef Mayer (former head of the Gau administration), Richard Eisenmenger (former Gau Physician Leader), the former director of Mauer-Öhling Michael Scharpf, the physician Josef Utz (also of Mauer-Öhling), the former administrative secretary at Gugging Josef Kriz, as well as ten female

¹⁷³ Rachbauer, *Ermordung*, 101-3. It was eighteen forced labourers and three prisoners of war, *ibid*, 169.

¹⁷⁴ DÖW 18860/36, statement Dr. Michael Scharpf, 5.12.1945. Scharpf spoke of a few hundred "Ostarbeiter," who were allegedly sent to Niedernhart in 1944; there is however no evidence of this in the documents from Mauer-Öhling or Niedernhart (see *ibid*, 102).

¹⁷⁵ *ibid*, 100.

¹⁷⁶ Kepplinger, *Tötungsanstalt* (2008), 111. According to the head of the hospitals's administrative office—who dealt with the transports,—the "eastern workers" were not sent to Niedernhart, but to the Bindermichl labor camp in Linz; it is unclear whether he mixed up the destinations: DÖW 18860/44, statement Anton Kremser, 1.5.1946.

¹⁷⁷ Rachbauer, *Ermordung*, 97-8, 149. Forced labourers were also repeatedly admitted to Gugging; overall there were probably around 78. Of these, 47 were released, two were handed over to the Gestapo and five were transported to another institution. In 1943 three were sent to Hartheim and murdered there. 21 died in the hospital: Data analysis "PatientInnenbewegungen Gugging 1937-1946" (see footnote 16).

¹⁷⁸ DÖW 18860/12, Amstetten District Gendarmerie Command to the Vienna Criminal Court, 23.3.1946.

¹⁷⁹ DÖW 18860/10, Gendarmerie-Erhebungsexpositur at Vienna Criminal Court, to Vienna Criminal Court, 2.9.1961; Vienna Criminal Court to the Justice Ministry, 2.8.1961. On 2nd August 1961 (sic!) the Vienna Criminal Court requested that the Justice Ministry should seek Gelny's extradition to Austria.

and eight male nurses from both hospitals.¹⁸⁰ The opinion of the prosecutor was that: “A large part of the staff at the two hospitals in Lower Austria, Gugging and Mauer-Öhling (...) were prepared, as a result of their National Socialist attitudes, to unconditionally follow the orders of unscrupulous doctors and out of subservience to the Nazi state did not shy away even from murder.”¹⁸¹

Gelny’s absence from the criminal proceedings meant that the other accused could downplay their own involvement and push the blame onto him. An admission of guilt was the absolute exception. Marie Gutmann represented the attitude of the majority of the accused in her appeal to the president for clemency: “I myself am a victim of the time and circumstances known as the Nazi dictatorship.”¹⁸² Gau Physician Leader Richard Eisenmenger, the official in the Reich governor’s office in charge of hospitals and nursing homes, claimed to have only learned about the murders from the newspapers.¹⁸³ Not only was the main culprit missing from the trial, the majority of the surviving patients were also not heard. Only two of them were questioned during the main trial (on July 6th, 1948), probably because the court did not regard them as reliable witnesses because of the ongoing stigma of mental illness. This is one of the most serious limitations of the trial records as a source for historical research.

How was it possible that Gelny could put his murder plans into action without any hindrance? The statement from a male nurse at Mauer-Öhling is significant: “Had the doctors not let us down, or at least had given us a sign that we did not need to obey Gelny’s instructions, then Gelny would not have been able to carry out his criminal actions.”¹⁸⁴ This reflects a widespread tendency among the nurses, to invoke their obligation to obey their superiors—either head nurses or doctors. Given the hierarchical relationships in the psychiatric hospitals at that time, this cannot be dismissed as a mere attempt to escape responsibility. The nurses repeatedly emphasized in their statements that due to the passive attitudes of the men who were still formally the directors (Schicker in Gugging and Scharpf in Mauer-Öhling) and the other resident physicians, they were helplessly exposed to Gelny’s demands.¹⁸⁵ The physician Koloman Nagy dismissed a head nurse who turned to him because of Gelny’s activities with the words that this was none of his [Nagy’s] business.¹⁸⁶

In a series of concurring statements nurses described how they nevertheless defied Gelny’s

¹⁸⁰ DÖW 18860/2, Vienna public prosecutor, indictment 15 St 6271/45, 25.9.1947. Not among the accused were, among others, Hugo Jury (suicide before the end of the war), Emil Gelny (fugitive) and the former director of Gugging Dr. Josef Schicker (called as a witness).

¹⁸¹ DÖW 18860/2, Vienna public prosecutor, indictment 15 St 6271/45, 25.9.1947.

¹⁸² DÖW 18860/60, Marie Gutmann to the Austrian president, 24.11.1948.

¹⁸³ DÖW 18860/23, statement Dr. Richard Eisenmenger, 11.3.1946.

¹⁸⁴ DÖW 18860/68, statement Alois Weingartner, 6.7.1946.

¹⁸⁵ E.g. DÖW 18860/60, statement Marie Gutmann, 18.1.1946.

¹⁸⁶ DÖW 18860/6, 403.

intentions—such as by hiding patients from him or administering lower doses of medication than had been prescribed.¹⁸⁷ The judge also emphasized in his ruling that many of the nursing staff had made great efforts of resistance; and that this had indeed been the case for most of the defendants in individual cases.¹⁸⁸ The Gugging head nurse Johann Öllerer even turned to the local NSDAP leader Klimstein, who was a porter at the hospital, and asked him to do something about the rapidly growing number of deaths that had begun to attract the attention of the population. Together they spoke to the Vienna deputy Gauleiter Karl Scharizer, albeit with no results. When Gelny found out about this later, he dismissed Öllerer, but there were no further consequences.¹⁸⁹

Mayer and Eisenmenger received the highest sentences (12 to 10 years imprisonment). They were found guilty of high treason under the War Crimes Act, as well as being remote accomplices to the crime of “hired assassination.”¹⁹⁰ The court said it could not be proven that they had “ordered” Gelny to murder, which would have incurred a much heavier penalty.¹⁹¹ Furthermore, the court handed down sentences of between two and four years to ten members of the hospitals’ staff. Eight of the accused nurses were acquitted, and one case was classified as manslaughter and handed over to an ordinary court.¹⁹² The acquittals were due to a “lack of convincing evidence of guilt,” whereas the court did not consider the serious suspicions against the accused as refuted.¹⁹³ Josef Scharpf (born 1876) died during the trial.¹⁹⁴ Josef Utz had dementia and was transferred from prison to the Vienna Psychiatric Clinic on July 1st 1947, and then to Steinhof. Speaking to a psychiatric expert he made statements that were quite close to a confession: “Since the head nurse said there were no nurses available, he himself had given some of the patients whom Gelny had said he no longer wanted to see, a powder. He had hoped he was giving them an innocuous powder, but the patients died. In any case, they had tuberculosis.”¹⁹⁵ A judgement against him never materialized. Although some of those convicted were sentenced to long prison terms, the sentences that they actually served were—in view of the fact that they were involved in hundreds of murders—ultimately relatively short. The defendant who originally had the highest punishment, Josef Mayer, was freed

¹⁸⁷ E.g. DÖW 18869/3, record of proceedings, statement Leopold Wiehart, 17.6.1948.

¹⁸⁸ DÖW 18860/6, 327-8.

¹⁸⁹ DÖW 18860/13, statement Johann Öllerer, 5.2.1946; DÖW 18860/9. Nagy also claimed to have tried to intervene with Klimstein: statement Dr. Koloman Nagy, 26.7.1945.

¹⁹⁰ DÖW 18860/5, Vienna Criminal Court as People’s Court, Vg 11h Vr 455/46, verdict against Dr. Josef Mayer and others, 2.8.1948.

¹⁹¹ DÖW 18860/6, 358.

¹⁹² DÖW 18860/5, Vienna Criminal Court as People’s Court, Vg 11h Vr 455/46, verdict against Dr. Josef Mayer and others, 2.8.1948.

¹⁹³ DÖW 18860/6, 387-9; 398; 401. One male nurse from Mauer-Öhling (Salaberger), who according to witnesses and defendants was heavily implicated, died by the end of the war.

¹⁹⁴ DÖW 18860/6, 351; 405.

¹⁹⁵ DÖW 18860/54, findings regarding Dr. med. Josef Utz’s state of mind, 6.11.1947.

in July 1951, after less than six years in prison.¹⁹⁶ A little later, the reintegration of former Nazis officially moved to the foreground and even euthanasia perpetrators like Hans Bertha in Graz or Heinrich Gross in Vienna were able to continue their careers unhindered.¹⁹⁷

¹⁹⁶ DÖW 18860/35, Josef Mayer to President Körner, 12.11.1953.

¹⁹⁷ See Herwig Czech, "Man muss den Kopf abtreiben, damit nicht die Glieder wieder nachwachsen." Anmerkungen zur Entnazifizierung der Medizin in Österreich, in: Lucile Dreidemy et al. (ed.), *Bananen, Cola, Zeitgeschichte. Oliver Rathkolb und das lange 20. Jahrhundert*, Band 1, Wien/Köln/Weimar 2015, 357-371; Wolfgang Neugebauer/Peter Schwarz, *Der Wille zum aufrechten Gang. Offenlegung der Rolle des BSA bei der gesellschaftlichen Reintegration ehemaliger Nationalsozialisten. Bund sozialdemokratischer AkademikerInnen, Intellektueller und KünstlerInnen (BSA)* (ed.), Wien 2005, 214-305.