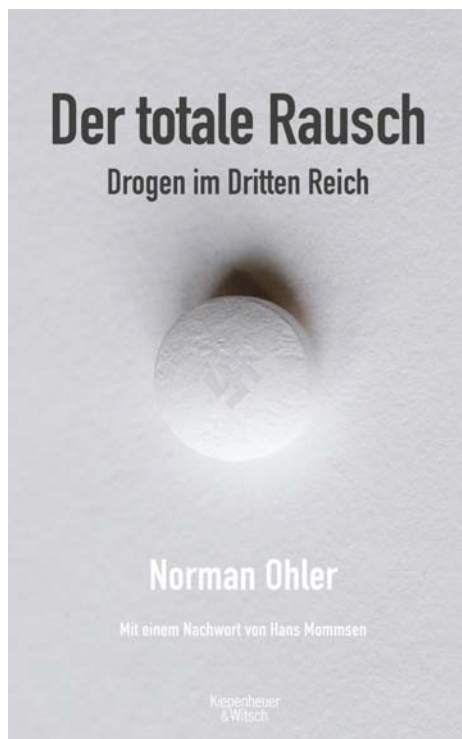


Sample Translation (pp.17-22; 40-48;81-93)

High Hitler. Drugs in the Third Reich **by Norman Ohler**

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PART I

THE PEOPLE'S DRUG METHAMPHETAMINE (1933-1938)

Nazism was toxic, in the truest sense of the word. It has given the world a chemical legacy still with us today, a poison that won't soon disappear. Although the Nazis pretended to be the cleanest of all, with a strict, ideologically reinforced anti-drug policy that was underscored by propagandistic pomp and draconian punishment, a particularly potent, highly addictive, and quite insidious substance became a popular product under Hitler. In the 1930s, this substance – officially permitted – made it big as a pill under the brand name of *Pervitin*, throughout the German Reich and later in the occupied countries of Europe. It became the accepted “people's drug,” available in every pharmacy. It did not require a prescription until 1939 and was only subjected to the provisions of the Reich Opium Act in 1941.

Nowadays its active ingredient, methamphetamine, is in most places illegal, or at least strictly regulated.³ Yet in our day and age, it is one of the most popular toxic substances; and with nearly 100 million consumers, the trend only seems to be rising. It is usually produced out of sight, in largely unhygienic labs, in many cases by chemical laypersons. The media refer to it as “crystal meth.” Indeed, the crystalline form of this “horror drug” – often inhaled in high doses through the nose – enjoys undreamt-of popularity, particularly in Germany where the number of first-time users continues to grow. As a stimulant with a dangerously strong kick, it is used both as a party drug and to improve performance on the job, by blue-collar and white-collar workers, by politicians and academics alike. It dispels hunger and sleep while promising euphoria. Yet, the way it is dispensed these days,^{*} it is a drug that is hazardous to one's health and potentially fatal, which can quickly become habit-forming. However, hardly anyone knows about its rapid ascent in the Third Reich.

BREAKING BAD: THE DRUG LAB OF THE CAPITAL CITY

Searching for clues in the 21st century: On a summer's day under a cloudless sky, extending from industrial sites to clone-like rows of new houses, I'm taking the suburban train to the southeast edge of Berlin. Looking for what's left of the Temmler Works, the former producer of *Pervitin*, I have to exit at the Adlershof Station, at a site calling itself “Germany's most modern technology campus.” I keep away from this office park, muddling my way through an urban no-man's-land, passing dilapidated factory buildings, traversing a wasteland of crumbling bricks and rusty steel.

^{*}In its pure form, the psychoactive molecule methamphetamine is less harmful to humans than the batches of crystal meth produced in illegal labs, often by amateurs, where toxins such as petrol, battery acid or antifreeze are added to it.

The Temmler Works set up shop on this site in 1933. A year later Albert Mendel, the Jewish co-owner of the Chemical Factory Tempelhof, was dispossessed and his co-owner Temmler took over his share, expanding the business rapidly. These were good times for a chemical company in Germany, at least if it was purely Aryan; pharmaceutical development in particular was booming. Researchers were unflagging in their search for new and pioneering compounds intended to provide modern man with relief from pain and distraction from worry. In such laboratories, many an experiment laid the groundwork for the pharmacology that shapes our lives in the present.

In the meantime, the former Temmler Pharmaceutical Factory is little more than a ruin located in the Berlin suburb of Johannisthal. Nothing is left to recall its prosperous past when millions of Pervitin tablets were manufactured here every week. The company lot is vacant, a dead piece of real estate. I cross a deserted parking lot, wind my way through a dense grove and climb over a wall still studded with broken glass to ward off intruders. Between ferns and saplings, one catches sight of the old wooden “witch’s cottage” of founder Theodor Temmler that used to be the nucleus of the company. Behind dense adler bushes stands a brick building, also utterly abandoned. One window is so broken that I can enter the factory through it. On the inside is a long and dark corridor. Mildew and musty odors emanate from the walls and ceiling. A door stands ajar at the end of the hall. Its bright green paint is flaking off for the most part. Behind it, on the right, the daylight shines in from two industrial windows that are shattered. Outside everything is overgrown. Inside the place is empty. An old bird’s nest lies in a corner. Partially chipped white tiles extend up to the high ceiling with its circular drainage holes.

This is the former laboratory of Dr. Fritz Hauschild, head of pharmacology at Temmler from 1937 to 1941, who was trying to develop a new kind of medication, a “performance-enhancing pill.” This is the former drug lab of the Third Reich. Here the chemists prepared their flawless compounds using porcelain crucibles, tube condensers, and glass coolers. Here the covers rattled on bulbous boiling flasks that released yellow-red hot steam with a hissing noise while emulsions were cracking and white-gloved fingers adjusted settings on the percolator. Here methamphetamine was being manufactured, and in such a quality that few could emulate today. That would include – even on his good days – Walter White, the fictional dope chemist of *Breaking Bad*, the TV series that has succeeded in making crystal meth *the* symbol of our era.

The phrase *breaking bad* suggests *suddenly changing one’s behavior and doing something bad*. Which is not at all a bad way to describe the years between 1933 and 1945.

[...]

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THE HIGH SOCIETY DOCTOR OF THE KURFÜRSTENDAMM

One night in 1933 the word *Jew* was smeared across the sign of a medical practice on Bayreuther Strasse in Berlin-Charlottenburg. The name of the doctor, a specialist in dermatology and venereal diseases was no longer legible the next morning. One could only read that his office hours were “11-1 and 5-7, except for Saturday afternoons and Sundays.” Dr. Theodor Morell, bald and overweight, responded to this attack in a manner that was both pathetic and typical: he immediately joined the Nazi Party, hoping to prevent any future acts of this type.⁴ For Morell wasn't Jewish; the Stormtroopers had wrongly targeted him due to his tan complexion.

After Morell had registered as a party member, his practice was soon thriving more than before. He expanded and moved his office into a high-end Wilhelminian-style building at the corner of Kurfürstendamm and Fasanenstrasse. Whoever went along, got along – and profited, too. It was a lesson that Morell would never forget. Still the bulky Hessian physician wasn't interested in politics at all. What made him most happy was one thing: when a patient felt better after a treatment, dutifully paid his bill, and then returned for more at the earliest possible date. To guarantee such success, Morell had developed strategies over the years that gave him advantages over the other Ku'damm doctors whom he competed with to entice his well-to-do clientele. In fact, his chic private practice soon became one of the most lucrative in the western districts of Berlin. His office was equipped with a state-of-the-art high-frequency X-ray machine, with a diathermy machine, a four-chambered galvanic bath, and radiation instruments – all of them initially capitalized using his wife Hanni's fortune. Morell had started out as a ship's doctor in the tropics but was now treating a steady stream of the celebrities of the capital city in his practice. There was Max Schmeling, Hans Albers' girlfriend, actress Marianne Hoppe, any number of aristocrats and ambassadors, successful athletes, business VIPs, academic luminaries, politicians, and half of the film industry. They all made the pilgrimage to Morell's because he specialized in the newest methods of treatment or – as some wags claimed – in the treatment of non-existent diseases.

In point of fact, this trendy physician – as shrewd as he was self-centered – was quite a pioneer in one area: vitamins. Back then no one knew very much about these unseen helpers which are vitally necessary for certain metabolic processes but which the body cannot produce. When injected directly into the bloodstream, they seemed to work wonders where there had been deficiencies. That was Morell's strategy for keeping his patients coming back. And if at some point vitamins were not enough, he might quickly add a circulatory stimulant to the syringe. For men, that might mean some testosterone with an anabolic effect potency and muscle growth; for the ladies, belladonna extract would provide extra energy and dilate the pupils for a more hypnotic look. If a melancholic actress with stage fright went to see Morell before her premiere at the Admiralspalast, he would not hesitate to reach for the syringe with his hairy hands, and he

was said to be better at giving injections than anyone else. There were even rumors that it was *impossible* to feel him prick the skin – even though the hypodermics were rather large at the time.

The word of Morell's success spread beyond the city limits of Berlin, and in the spring of 1936 the telephone rang in his treatment room although he had trained his receptionists never to disturb him during an appointment. But this was no ordinary call. It came from the "Brown House," Nazi Party headquarters in Munich. A certain Mr. Schaub was on the line, who introduced himself as Hitler's adjutant. He informed Morell that Heinrich Hoffmann, the "press photographer of the Nazi Party," was suffering from a confidential ailment. The Party wished for Morell to treat Hoffmann, since the prominent specialist for venereal diseases was also well-known for his discretion. For that reason, no doctors in Munich would be consulted on this case. Then Schaub added fatefully that the Führer himself was involved, having sent a plane to pick up the doctor at the Gatow airfield (in Berlin-Spandau).

Although Morell truly disliked surprises, there was no way he could refuse such an invitation. Once he arrived in Munich, he stayed at government expense in the posh Regina Palast Hotel, and went on to cure Hoffmann's kidney infection, the result of gonorrhoea. Together with his wife, Morell was flown to Venice by his grateful – and influential – patient to be at his side for the entirety of his convalescence.

Once they were all back in Munich, a dinner party was held at Hoffmann's villa in the upscale neighborhood of Bogenhausen. Hitler's favorite meal was served: spaghetti with nutmeg, with tomato sauce on the side, and a green salad. For Hitler was a frequent guest at Hoffmann's home and closely associated with him since the 1920s, when Hoffmann's photographic talents began to play a significant role in the rise of Nazism and its Führer cult. Hoffmann held the copyright to important photographs of the dictator. In addition, he published a number of illustrated books such as *Hitler, As No One Knows Him* or *A Nation Honors its Leader*, and millions of copies of them were sold. Finally, there was another, more personal connection between the two men: Hitler's mistress Eva Braun had previously worked as Hoffmann's assistant, and Hoffmann and his wife had introduced her to the Nazi leader in 1929.

Hitler had heard many good things from Hoffmann about Morell, thanking the doctor for healing his old comrade before they sat down for dinner. He expressed regret that he hadn't met Morell earlier. If he had, then his chauffeur Julius Schreck, who had died a few months earlier of meningitis, might still be alive. Morell responded nervously to the compliment, finding himself hardly able to say anything during the meal. For in higher social circles, he knew he was regarded as not quite socially acceptable. It didn't help that he had a bulky face, wore thick round glasses, and constantly perspired. The only thing people appreciated about the pug-nosed physician were his injections. He thus pricked up his ears when in the course of the evening Hitler commented that he had had severe stomach and intestinal pains over the last few years. Morell interjected that he knew of an uncommon therapy that might be promising. Hitler scrutinized the doctor and proceeded to invite him, along with his wife, for a medical consultation at the Berghof, his residence in Obersalzberg near Berchtesgaden.

There a few days later the dictator confided privately to Morell that he was frankly in such poor health that he could hardly function anymore. He attributed his condition to the flawed

treatments of his previous doctors. They didn't have any ideas except to have him eat as little as possible. Yet if he was served a rich meal, as was so often the case, he started to suffer from incredible bloating accompanied by eczema on both his legs. After that, he would have to walk around with bandages on and couldn't wear boots anymore.

Morell immediately thought he had identified the cause of Hitler's complaints. The diagnosis: abnormal bacterial flora had caused the digestive problems. The doctor recommended the medication Mutaflor developed by one of his friends, the physician and bacteriologist Professor Alfred Nissle in Freiburg. This medicine consisted of bacterial strains originally obtained in 1917 from the intestinal flora of an NCO who had survived the war in the Balkans with no intestinal discomfort – unlike many of his comrades there. The bacteria came in capsule form, once ingested, they would settle in the intestine, multiplying quickly and replacing any other strains that might be responsible for the problems.⁵ This plan, already demonstrated to be efficacious, made a great deal of sense to Hitler, for whom even internal bodily processes seemed to mimic the struggle for *lebensraum*. Exuberant, the Führer promised Morell a new house if the Mutaflor actually succeeded in curing him. Then he officially appointed the rotund clinician as his new personal physician.

When Morell told Hanni about his new appointment, his wife was not particularly enthused. They really didn't need that, she observed; the practice on the Kurfürstendamm was flourishing, after all. Perhaps Hanni already guessed that she wouldn't be seeing much of her husband after that. For Hitler and his personal physician were on their way to forming a most uncommon bond.

DRUG COCKTAIL FOR PATIENT A

"He alone is ineffable, the mystery and the myth of our people."⁶ Joseph Goebbels

The dictator continuously shunned being touched by others and generally refused to allow his doctors to treat him thoroughly enough to diagnose what was causing his pain. He seemed incapable of trusting any specialist who knew more about him than he himself did. From the outset, the good family doctor Morell, with his harmless, plain appearance, gave Hitler a feeling of security. Nor did Morell have any intention of slicing open Hitler to find out whether there were unknown reasons for his health troubles. Being pierced by needles seemed to be the only treatment the Führer wanted; it was a fine substitute for responsible medical conduct. And if the head of state had to function and was demanding instantaneous, immediate release from his pain, then Morell would not hesitate to comply. Rather, he was going to do for Hitler the same he had done for actresses in the Berlin theaters, and administer a twenty-percent dextrose solution from Merck or a vitamin injection. His job was to eliminate the symptoms without further ado. That suited his new client, "Patient A," as much as it did the denizens of bohemian Berlin.

Hitler was amazed at how quickly his condition would improve – and usually while the needle was still in his vein. Morell's arguments convinced him: His multiple responsibilities as the Führer required so much energy that it was not possible for him to wait for a substance

administered by tablet to travel through his digestive tract (which was already overburdened anyway) before it finally entered his bloodstream. Hitler understood what was necessary: "Morell wants to give me another large injection of iodine today, besides boosters for the heart and liver as well as a calcium and vitamin injection. In the tropics he learned that the drugs have to be injected into the veins."⁷

The extreme demands on him made Hitler constantly worry that he wouldn't be able to carry out his responsibilities or be able to get everything done. He believed that he couldn't afford to get sick because no one else would be able to take on some of his duties. Accordingly, Morell's unconventional therapies increased rapidly in importance starting in 1937. Soon it was no longer unusual for the Führer to receive several injections per day. He grew inured to the repeated pricks of the needle and the ensuing mysterious flow of an (allegedly powerful) substance into his arteries. Each time he felt better, for a moment at least. The fine stainless steel needle that penetrated his skin and resulted in "instantaneous restoration" matched his disposition: The circumstances repeatedly demanded mental alertness, physical vitality, and hands-on determination. Any neurotic or other inhibitions had to be switched off permanently, and he had to be refreshed at all times.

Pretty soon the patient wasn't letting his new personal physician stray from his side, and Hanni Morell's fears came true: Her husband didn't have any time anymore for his Berlin practice. A replacement had to be hired for the clinic on the Kurfürstendamm. Morell would later claim, vacillating between pride and fatalism, that he was the only person after 1936 who saw Hitler daily or at least every other day.

Before each major speech, the Reich Chancellor would now indulge in an "energy jab" in order to be at his best. The possibility of catching a cold and thus impeding a public appearance could be ruled out in advance through an intravenous vitamin injection. To keep his arm up and give the Nazi salute for as long as possible, Hitler not only trained with an expander but also let his body snack on fructose and vitamins. After just twenty seconds, glucose that was intravenously administered ensured that his brain would get an energy boost. Even on the coldest of days, the vitamin concoction he received helped him parade in his thin SA uniform in front of troops or the people without betraying any signs of weakness. When Hitler once went hoarse before giving a speech in Innsbruck in 1938, Morell was able to restore his voice quickly with a single injection.

Hitler's digestive problems also improved for the time being. Thus his promise to Morell of a new house had to be kept. The doctor's new address was on Berlin's classy Schwanenwerder Island, almost next door to Propaganda Minister Goebbels. The impressive villa, though, was not completely a gift: the Morells had to pay 338,000 Reichsmark (RM) for the property at Inselstrasse 24-26, which was surrounded by a hand-forged iron fence.[†] Nonetheless, they received from Hitler an interest-free loan of more than 200,000 RM, which later on was offset as a treatment fee. The new mansion was not entirely a boon for the doctor, who had now entered high society himself: Morell had to hire domestics and a gardener. His fixed costs grew by leaps and bounds even though he wasn't earning more money than before. But there was no going

[†] The property had been "aryanized," having been owned until that time by the Jewish banker Georg Solmmen. After the war it was eventually purchased by Axel Springer.

back now. He was enjoying this new lifestyle too much, along with his undisguised proximity to power.

Hitler too had grown quite accustomed to the doctor, and the disparaging remarks about the corpulent confidante, whom many in that highly competitive setting found off-putting, were simply brushed aside by the Chancellor. Morell didn't need to smell like a rose; his job was to keep Hitler healthy. By virtue of his new position, the former physician to high society was appointed to a professorship in 1938, without having to complete a habilitation, in order to give him an air of respectability.

[...]

[pp. 81-93]

BURNOUT

As the consequence of the invasion of Poland, Britain and France declared war on Germany on September 3, 1939. It was indeed a pill that the Allies could no longer swallow. But at the beginning, there were no shots fired on the Western Front. In what came to be known as the "Phoney War," neither side did anything for several months. No one wanted to do battle. And no one had forgotten the shock of the Great War, when the front lines hardly moved in the space of four years – even though millions of soldiers had to die in the process. This time banners read: "We won't shoot if you don't shoot."⁸ There wasn't a question of zeal for battle or nationalistic pride, in contrast to the circumstances of 1914. "The Germans started the [Second World] war," writes Golo Mann, "but they didn't feel like fighting it, neither the civilians, nor the soldiers, and least of all the generals."⁹

Only one person saw the matter differently. Hitler had wanted to attack France as soon as possible, preferably in the fall of 1939. There was a problem with that, however: The Western Allies had a clear advantage over the Germans both in military technology and in troop strength. Contrary to the way Nazi propaganda depicted it, the German armed forces were by no means superior. On the contrary: their equipment desperately needed to be replaced following the invasion of Poland. Most of the divisions were poorly armed; barely half of them were operational.¹⁰ The French army, on the other hand, was considered the strongest in the world, and England with its global empire had at its disposal seemingly endless resources to support the war.

The numbers alone spoke volumes: On the German side, there were just under three million soldiers; the Allies had at least one million more. 135 divisions of the Wehrmacht were opposed by 151 Western divisions. 7,378 artillery guns were pointed at circa 14,000 of the enemy. Even in the case of tanks, the matter was unequivocal: 2,439 German ones versus 4,204 for the West. Moreover, the Allied tanks were equipped with armor that was at least twice as thick. For while the tanks of the Wehrmacht were only 30 millimeters thick, those of the French were 60 millimeters, and those of the British 80 millimeters. The Luftwaffe could deploy 3578 fighter planes; the Allies had 4469 ready for action.¹¹

The military rule of thumb is that the attacking force needs to be three times larger to execute a successful invasion. It should then come as no surprise that the Wehrmacht High Command was unable to develop a promising plan. But instead of acknowledging such realities, Hitler was convinced that the Aryan warrior soul would somehow succeed. Misleadingly inspired by the doped-up performance in the invasion of Poland, he repeatedly cited the "miracle of the German soldier's bravery."¹²

In truth, the dictator was also baffled. England and France's declarations of war had caught him off guard. Until that moment, he had hoped the West would react to the invasion of Poland just as toothlessly as it had to the defeat of Czechoslovakia. But that wasn't the case. Without being prepared for it, Germany was suddenly having to wage war by itself against all of Western Europe. Having maneuvered the Reich into such a bleak situation, Hitler was standing with his back to the wall. Halder, chief of his general staff, warned that "[t]ime will mainly work

against us unless we take full advantage of it; the other side is economically stronger."¹³ So, what was to be done? Nothing occurred to Hitler but to rush forward recklessly. The mathematically sober planners of the Wehrmacht High Command were outraged by the Führer's insistence. The man whom Hindenburg had dubbed "that Bohemian corporal" was not exactly highly regarded by the Prussian officers of the general staff. Instead, he was decried as a military dilettante, with erratic ideas and volatile intuitions. As in the First World War, a poorly prepared attack could only lead to renewed defeat. Thus even preparations were being made for a coup against the dictator. Von Brauchitsch and Halder planned to arrest Hitler if he gave the order to attack. These plans were abandoned, though, after Georg Elser's attempt to assassinate Hitler at the Munich Bürgerbräukeller on 8 November 1939.

In the autumn of 1939, a crucial meeting took place in Koblenz between two high-ranking officers. Together they developed a bold plan. Erich von Manstein, a 52-year-old general from Berlin with a quick temper and permanently red cheeks, conferred with Heinz Guderian, an East Prussian general of armored forces and a year younger. The Wehrmacht's only chance, they reasoned, would be to attack "like lightning," pushing through the Belgian Ardennes (which were deemed impenetrable) with an armada of tanks, in order to reach the French border town of Sedan in just a few days and then march on to the Atlantic coast. For the Allies were assuming that the Germans would attack further to the north and thus chose to gather their forces there. The resulting "sickle cut" by the German forces would take the bulk of the defenders by surprise thereby encircling them. A war of attrition in trenches – doomed to fail as it did in World War I – would be avoided. The surprise move would cut off the more powerful Allies from their hinterland, forcing them to surrender. It was a genuinely innovative trick.

Within the German general staff, this risky proposal was met with incredulity. Tanks were still viewed as unwieldy behemoths that might be able to assist other forces but were incapable of leading a mobile attack in independently operating units, especially in barely traversable mountainous terrain. The deployment plan as outlined was simply written off as an insane gamble. So as to neutralize von Manstein, he was redeployed to the Baltic port of Szczecin, far away from the impending battle. In addition, the general staff kept devising new excuses for countering Hitler's continuing insistence on striking preemptively. The pretext of bad weather, for instance, was used dozens of times to avoid attacking first. For, at the time, people said that the Wehrmacht was only armed for a fair-weather conflict – and depended on cloudless skies for its Luftwaffe.

Initially, then, the Western Front fell into a deep sleep. When Ranke visited the Baroque town of Zweibrücken in October 1939, near the border with Lorraine, tank traps could be seen rising into the sky. Even so, the soldiers spent most of their time playing card games, smoking their allocation of cigarettes (seven per day), playing soccer, and helping out with the potato harvest, in this manner virtually lulling the French, who were just a couple of miles away, into complacency.

Still, that didn't mean that the Germans weren't ready at all times to switch into another mode. In fact, they were always prepared for action, with pills for staying awake right in their pockets. It didn't take long for Ranke to figure out that "a rather large portion of the officers had Pervitin on them. . . . Everyone you ask, both in the motorized troops and other forces,

acknowledges the positive effects of this medication."¹⁴ Even though it was as peaceful as a graveyard there, everyone knew that war could be declared at any moment. And when it was, the men had to be ready in an instant, at the top of their form and fully alert. That's why they had already been drilled on how to administer it.

Ranke was alarmed that soldiers were using the drug prophylactically: "The question isn't whether or not to use Pervitin but how to get its usage back under control. [It] is being used en masse, without any medical supervision." Ranke insisted on some kind of instructions, such as a package insert for regulating use of the medication, and on "making the experience in the East (in the campaign against Poland) beneficial for the West."¹⁵ Yet nothing like that happened, despite his advice.

Just how self-evident it was to take Pervitin, and just how widespread it had become, was also illustrated by Ranke himself, who was now ingesting it regularly and candidly reporting on it in his doctor's log and in letters. On any average working day, he would unburden himself with two "Temmler tablets." They helped him deal with his stress while also improving his mood. Although this self-proclaimed expert was aware of the dangers of addiction, he didn't draw any personal conclusions from his own use of Pervitin. For him it remained a type of medicine that he treated himself with in the dosage he deemed appropriate. Whenever there were side effects, he didn't acknowledge them as such, preferring to deceive himself instead: "Despite taking Pervitin, I have more headaches and more indigestion by 11 o'clock." He was more frank when he wrote one of his colleagues: "It makes it . . . much easier to concentrate, making you feel more at ease when you have to tackle a difficult task. So, it not only wakes you up but noticeably enhances your mood. Even very high dosages have not been observed to cause permanent damage. (...) Pervitin makes it possible to work for 36 to 40 hours without any discernible fatigue."¹⁶

Staying awake for two days and two nights straight was becoming the norm for Ranke. In these first months of the war, the military physiologist was continuously working at top gear. He moved nonstop between the front, where he was giving talks about Pervitin, and the capital, where he was busily enlarging his institute. The demands on him were getting to be too much, and he was taking the drug more regularly than before so that his performance would not suffer. Hence, it wasn't long until Ranke had the classic symptoms of burnout – even if the term didn't yet exist. In his diary he maintained a valiant tone: "On a personal note: I have vanquished my depression. As of noon on 11 August, I'm fit to work again."¹⁷ Yet he often went to bed quite late, enduring a "rather sleepless night" and complaining the next day that he had "almost collapsed." His gradual descent into addiction was all too typical, then. With the help of chemistry, he kept trying to raise the bar even higher even though he was already at the limit. On 19 November 1939 he reported: "General incapacity to work due to the pressures of the upcoming talk and inspection."¹⁸ Nor was Ranke the only one worn out between the struggles of war and the consumption of Pervitin. His correspondence at the time reveals that a mounting number of officers were taking the pill in order to cope with their duties.

Addiction was also rampant outside the military. In the Third Reich, the fever for Pervitin was escalating in 1939. Housewives in menopause were "popping the stuff like candy."¹⁹ Young mothers with postpartum depression took it prior to breastfeeding. Widows looking to remarry

swallowed high dosages to reduce their inhibitions before going on a first date. Meanwhile, the range of indications had gotten out of hand. It could now be taken for labor pains, seasickness, vertigo, hay fever, schizophrenia, anxiety, depression, listlessness, and brain disorders. No matter where or why Germans were feeling bad, it became more and more routine to reach for that little blue-white-and-red Pervitin tube.²⁰

Because coffee had barely been available since the start of the war, methamphetamine was frequently taken at breakfast as a surrogate, a way of spicing up the coffee substitute. "Instead of pumping Pervitin into bomber pilots and bunker pioneers, it could be used more purposefully for stimulating brains at high schools." That was poet Gottfried Benn's take on these exceptional times, an epoch that was chemically distinctive: "To many, this will likely sound outlandish, but it's merely the natural extension of a human idea. It's the age-old human longing to overcome tensions that have become unbearable—either through rhythm, drugs, or modern autogenic training."²¹

In late autumn of 1939, the Reich Health Office reacted to what had become a patently obvious trend. State Secretary Leo Conti, the "Reich Health Leader" (a kind of minister of health), attempted to prevent (if perhaps too late) "an entire nation from coming under the influence of narcotics."²² He pointed out that the "disturbing secondary effects completely negate any positive benefits associated with taking the drug." In order to tighten the laws, he contacted the Ministry of Justice to express his "concern that developing too great of a tolerance to Pervitin could end up crippling entire segments of the population. (...) Those who wish to eliminate fatigue by using Pervitin can be sure that it will gradually degrade their physical and mental reserve capacities before it results in a breakdown."

In an appeal that was formulated in typical Nazi fashion, Conti personally called on all citizens to *volunteer* in the struggle against these drugs: "Because the times are so serious, every German man and woman should avoid indulging in dubious pleasures. Setting a personal example by rejecting drugs is nowadays more necessary than ever before. (...) Please help out by working to protect and strengthen German family life wherever it is threatened by drug consumption. In doing so, you are increasing our nation's internal capacity for resistance."²³

In November 1939, Conti made Pervitin a medication that could only be dispensed by prescription.²⁴ A few weeks later, he gave a speech in the Berlin City Hall before members of the German National Socialist Medical Association, warning against the "new, great danger that we will probably not be spared from due to all the accompanying symptoms of addiction."²⁵ His words, however, were not taken very seriously; consumption continued to rise. Many pharmacists were lax about enforcing the new rules, even providing their customers clinical packs without a prescription. It still wasn't difficult on a given day to get multiple vials of injectable Pervitin, or to purchase hundreds of pills at one time from dispensaries.²⁶

The situation was quite similar among soldiers. The prescription requirement, limited to the civilian sector, didn't apply to them. But Conti refused to admit defeat. A full-scale war against drugs was taking place against the backdrop of the real war. The Reich Health Leader thus called on the Wehrmacht to take a position concerning "use and abuse and possible damages" since he had observed "that our young soldiers look extremely unhealthy, often downright dismal or wasted." But Conti's Reich Health Office was a civilian agency, and the

military promptly complained about its interference: "Even if it has to make use of drugs, the Wehrmacht cannot function without being able to . . . produce a temporary increase in soldiers' performance or to neutralize their fatigue." Such was the cool yet clear reply of army medical inspector Waldmann.²⁷

On February 17, 1940 – the same day that Conti submitted his letter of protest to the Army Medical Direction – there was a momentous meeting in the Reich Chancellery between Hitler, General von Manstein, and Erwin Rommel, the newly appointed commander of an armored division. Von Manstein, who always stood with his hands deep in his pockets, was being permitted to spell out the details of his risky attack plan – the plan that no one in the High Command had wanted to hear. But Hitler, who normally interrupted his generals incessantly, listened as though spellbound. Von Manstein explained how he wanted to push through barely passable mountains and catch the French and English off guard.²⁸ Hitler couldn't stand the general presenting his military expertise in such a blatantly arrogant manner, noting that von Manstein "might be very clever and have a great deal operational talent, but I don't trust him."²⁹ But on this occasion the Führer was immediately convinced by the surprise strategy that had been proposed. The success of the operation would be determined by time, by speed; the armaments on their own would not be decisive. All of a sudden, the material inferiority of the German forces no longer posed an obstacle to attacking first. Hitler didn't hesitate at all but grasped at this ace in the hole: "The Führer declared his agreement with my statements. Shortly afterwards, a new order to deploy was issued," von Manstein concluded with pride in his memo of their conversation.³⁰

The question nonetheless remained of whether the Ardennes could be penetrated so rapidly. Troops might all too easily get stuck in the impassable terrain and be stopped by enemy forces, even if the latter were only weakly represented there. If that were to happen, the Allies would then have sufficient time to rush in with reinforcements from the north and south, thereby taking the Germans in a pincer movement. Von Manstein's proposed "sickle cut" was only likely to succeed if it was possible to stay on the move all day and all night, and above all to go without sleep. Hitler brushed aside any doubts. By force of will, a German soldier could obviously remain combat-ready for days and nights on end if the circumstances demanded it. It hadn't been any different for him in the First World War when he was serving as a runner in the trenches of Flanders.

In truth, the German soldiers were not at all going to have to exert their purportedly strong wills. What else did they have Pervitin for? In the Army High Command, feverish preparations were being made to implement the new order to deploy. These included planning for medical services and someone remembers that the pills were being tested at the Military Medical Academy. More than three weeks before the attack, on 13 April 1940, army medical inspector Waldmann made a presentation for Colonel General von Brauchitsch, the army commander-in-chief. His title was: "The Question of Pervitin: Decreeing Its Cautious but Necessary Use in Special Circumstances."³¹ Ranke, who was based at the Medical Military Academy on Invalidenstrasse, was then summoned several times for talks at the Bendler Block on the Landwehr Canal. He was asked to speedily prepare a presentation for the general staff and to draft an information leaflet on Pervitin--a package insert specially designed for the Wehrmacht.³²

On April 15, Ranke received a letter from von Kleist, the corps doctor of the armored group that was supposed to lead the advance through the Ardennes. The doctor's troops had been diligently practicing how to use the drug properly:

Pervitin seems well-suited for counteracting symptoms of fatigue and for reducing the need for sleep after pronounced physical and mental effort, especially in the case of soldiers and mental workers . . . whom special demands are made of with respect to mental vigor, concentration, observation, and judgement. These observations . . . were made partly in the campaign against Poland and partly by teams in practice marches and drives, as well as in self-experimentation by numerous medical and army officers.³³

The countdown had doubtless begun, and Ranke requested that the Temmler factory immediately increase its production of Pervitin. Two days later, on 17 April 1940, the Wehrmacht circulated a document that was without precedent in the history of war.

The Wakefulness Pill Decree was distributed to a thousand army doctors, several hundred corps doctors, senior medical officers and relevant departments of the Waffen-SS. The opening paragraph was dry but highly charged: "The experience of the Polish Campaign has shown that military success is influenced in certain situations quite decisively when the fatigue of a highly stressed force has been overcome. In special circumstances, overcoming sleep may be more important than concern for any damage associated with sleeplessness if operational success can be jeopardized by sleep. To counteract sleep (...) wakefulness pills are now available; Pervitin was introduced as part of the medical equipment, according to plan."³⁴

This text was composed by Ranke and signed by von Brauchitsch, the army commander-in-chief. One tablet per day was specified as the standard dosage; at night, one could take "prophylactically 2 tablets in rapid succession, and if necessary an additional 1-2 tablets after 3-4 hours." In exceptional cases, sleep could "be prevented for more than 24 hours" – and wasn't an invasion, after all, such an exceptional case? The decree further referred to "a belligerent mood" as a possible symptom of drug poisoning. But was that symptom to be understood as a warning or instead as an incentive? The decree likewise counselled: "In the proper dosage, one's self-confidence is significantly elevated, and one's fear of undertaking even difficult work is lowered. As a result, inhibitions are eliminated without reducing sensory functions as is the case with alcohol."³⁵

The German Wehrmacht thus became the first army in the world that staked so much on a chemical drug. And Ranke, the Pervitin-addicted army physiologist, took responsibility for it, signing off on its regulated use. A whole new type of war was being created.

[...]

FOOTNOTES

[...]

³ Pharmaceuticals that require a prescription and are based on methamphetamine can still be found, for example in the U.S. (such as the ADHD medication Desoxyn). In general, however, methamphetamine is regulated worldwide according to narcotics regulations. It usually cannot be prescribed but is only "marketable" because it serves as a starting material in the manufacture of medications. In Europe there are no pharmaceuticals based on methamphetamine, only analogues such as methylphenidate and dextroamphetamine.

[...]

⁴ [in the original: footnote 43] Forty-five percent of doctors, thereby a disproportionate ratio, were members of the Nazi Party (or "NSDAP"). See Lifton, Robert Jay, *Ärzte im Dritten Reich*, Stuttgart 1998, p. 37.

⁵ [in the original: footnote 44] This drug is still in the market, advertising its "unique natural ingredient, Escherichia coli strain Nissle 1917" and is used in the treatment of chronic inflammatory bowel syndrom. Mutaflor requires a prescription and is reimbursed by health insurers.

⁶ [in the original: footnote 45] Goebbels, Joseph, in *Das Reich – Deutsche Wochenzeitung*, 31 December 1944, editorial, p. 1 f.

⁷ [in the original: footnote 46] Giesing, Erwin, "Bericht über meine Behandlung bei Hitler," Wiesbaden 12 June 1945, in "Hitler as seen by his doctors ", Headquarters United States Forces European Theater Military Intelligence Service Center: OI - Consolidated Interrogation Report (CIR), National Archives at College Park, MD.

[...]

⁸ [in the original: footnote 92] Ballhausen, Hanno (ed.), *Chronik des Zweiten Weltkrieges*, Munich 2004, p. 27.

⁹ [in the original: footnote 93] Mann, Golo, *loc.cit.*, p. 915 f.

¹⁰ [in the original: footnote 94] Kroener, Bernhard R., " Die personellen Ressourcen des Dritten Reiches im Spannungsfeld zwischen Wehrmacht, Bürokratie und Kriegswirtschaft 1939–1942", in: Müller, Rolf-Dieter and Hans Umbreit, *Das Deutsche Reich und der Zweite Weltkrieg*. Vol. 5.1 of *Organisation und Mobilisierung des Deutschen Machtbereichs, Kriegsverwaltung, Wirtschaft und personelle Ressourcen 1939–1941*, 1988, p. 826.

¹¹ [in the original: footnote 95] See Frieser, *loc. cit.*, p. 11, 43 and 57.

¹² [in the original: footnote 96] Speer, Albert, *Erinnerungen*, Frankfurt a. M. 1969, p. 431.

¹³ [in the original: footnote 97] Bundesarchiv-Freiburg RH 2/768, reference files of Halder, Hans-Adolf, sheet 6 (verso).

¹⁴ [in the original: footnote 98] Bundesarchiv-Freiburg H 20/285/7, Military-Physiological Institute, 16 October 1939, re: "Pervitin.". See also: Letter of 16 October 1939 to Winkler as well as RH 12-23 / 1644, and the war diary of Ranke, entry of 4 January 1940.

¹⁵ [in the original: footnote 99] Bundesarchiv-Freiburg RH12-23 / 1644, war diary of Ranke, entry of 8 December 1939.

¹⁶ [in the original: footnote 100] Bundesarchiv-Freiburg RH12-23 / 1644, letter of Ranke to Zechlin of 24 January 1940. See also Bundesarchiv-Freiburg RH 12-23 / 1882, which is Ranke's speech "Leistungssteigerung durch ärztliche Maßnahmen" at the anniversary celebration of the Military Medical Academy, 19 February 1939, p. 5: "I have to confirm for myself and all the helpers here that we have always enthusiastically engaged in our work while on Pervitin. In the process, we had the feeling that even the difficult work was more easily managed and that it was especially much easier to decide to handle difficult tasks."

¹⁷ [in the original: footnote 101] Bundesarchiv-Freiburg RH12-23 / 1644, war diary of Ranke, entry of 8 November 1939, p. 6.

¹⁸ [in the original: footnote 102] *Ibid.*, entry of 19 November 1939, p.16.

¹⁹ [in the original: footnote 103] Kramer, Eva, "Die Pervitingefahr," in *Münchener Medizinische Wochenschrift*, vol. 88, issue 15, 1941, pp. 419 ff.

²⁰ [in the original: footnote 104] Liebendörfer, "Pervitin in der Hand des praktischen Nervenarztes," in *Münchener Medizinische Wochenschrift*, vol. 87, issue 43, 1940, p. 1182.

²¹ [in the original: footnote 105] Benn, *loc. cit.*, p. 317.

²² [in the original: footnote 106] Bundesarchiv Berlin R22 / 1475, sheet 395, Conti to the Ministry of Justice on 21 October 1939. The source is the same for following two quotations.

²³ [in the original: footnote 107] Bundesarchiv Berlin R36 / 1360, "An die ehrenamtlichen Mitglieder der früheren R. f. R." 19 October 1939.

²⁴ [in the original: footnote 108] *Reichsgesetzblatt* 1 (1939), p. 2176; *Reichsgesetzblatt* (1940), p. 9: "Phenylaminopropan and its salts (e.g., Bensedrine, Aktedron, Elastonon) and Phenylmethylaminopropan and its salts (e.g., Pervitin) are now required to be dispensed by prescription only by the Police Regulation of the Reich Ministry of the Interior for the issuing of liver preparations and other medicinal products."

²⁵ [in the original: footnote 109] Conti, Leonardo, "Vortrag des Reichsgesundheitsführers Dr. Conti vor dem NSD-Ärztebund, Gau Berlin, am 19. März 1940, im Berliner Rathaus," in *Deutsches Ärzteblatt*, vol. 70, issue 13, 1940, pp. 145-153; here p. 150.

²⁶ [in the original: footnote 110] Speer, Ernst, "Das Pervitinproblem," in *Deutsches Ärzteblatt*, issue 1, 1941: pp.4-6 and 15-19, here p. 19. See also Holzer, *loc. cit.*, p 238 f.

²⁷ [in the original: footnote 111] Bundesarchiv-Freiburg RH 12-23 / 1575, letter from Conti to Handloser of 17 February 1940 and Handloser's reply to Conti of 26 February 1940.

²⁸ [in the original: footnote 112] "By refocusing on the south flank, the strong enemy forces anticipated in northern Belgium will be cut off and destroyed." RH 19 I / 41, files of Army Group 1: Draft of a note by von Manstein for the war diary, 17 February 1940, appendix 51 (sheet 174 f.); see also Bundesarchiv-Freiburg RH 19 I / 26, note on the Führer's talk, sheet 121 f.

²⁹ [in the original: footnote 113] Quoted in Frieser, *loc. cit.*, p. 81.

³⁰ [in the original: footnote 114] Bundesarchiv-Freiburg, unpublished papers of Erich von Manstein, note no. 32.

³¹ [in the original: footnote 115] Waldmann, Anton, unpublished diary entry of 13 April 1940, Wehrgeschichtliche Lehrsammlung des Sanitätsdienstes der Bundeswehr.

³² [in the original: footnote 116] Bundesarchiv-Freiburg RH 12-23 / 1882, "Leistungssteigerung durch ärztliche Maßnahmen" and Ranke's talk on wakefulness pills, composed in Feb. 1940 (but not presented).

³³ [in the original: footnote 117] *Ibid.*, Letter from the corps doctor in the von Kleist forces, Dr. Schmidt, to Ranke, of 15 April 1940.

³⁴ [in the original: footnote 118] *Ibid.*, Army Medical Inspector, 17 April 1940, "re: wakefulness pills," including appendix 1 and appendix 2.

³⁵ [in the original: footnote 119] *Ibid.*