

The Jewish medical institutions in Kraków during the Holocaust and their activities: the early years in occupied Kraków

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According to Hitler's initial plans, the General Government was supposed to be a "huge Polish labor camp,"¹ with a very low standard of living. It was to be the place where all the Jews and Poles would be sent from the German territories.² This resettlement policy had a very bad effect on the Jewish residents of Kraków: their numbers increased dramatically, from 56 to 68 thousand.³ The resettled Jews were poor and had no prospects for a decent life because all their belongings had been left behind and they had to depend on help from the local Jewish

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1 Browning, 98; Hilberg, 205–208.

2 Polubiec, 1970: Vol. 1, 119–120.

3 Agatstein-Dormontowa, 1957: 197.

community. There wasn't enough room or food for them in Kraków, and the sanitary conditions weren't good enough for such a drastic rise in the number of newcomers, so the risk of epidemics spreading grew substantially. This was not only because of the influx of Jewish refugees but also due to the fact that the living conditions of the city's Jewish inhabitants were getting worse, as the Germans had deprived them of their jobs and livelihoods, evicted them from their homes, and canceled the state benefits of many groups of Jews, including pensioners and people with disabilities.⁴ The general situation for all of the Jews living in Kraków was considered unbearable, so the Jewish authorities and medical personnel decided to organize aid for the community. They started by creating a number of institutions to protect the Jewish community against hunger and epidemic typhus, as well as to help Jewish people organize their lives and manage better under wartime conditions.

First, the medical service created a special unit known as the sanitary commission. The initiator and head of this institution was Dr Maurycy Haber, who was also a member of the *Judenrat*.⁵ At the beginning of the war, the sanitary commission worked in three areas of the city, Kazimierz, where the Jewish district was located, Stradom, and Podgórze, where most of the Jewish residents lived. The activities of this commission were overseen by a specific German sanitary doctor to whom Dr Haber reported monthly status updates. Thanks to Dr Haber's efforts, 156 doctors and 110 ancillary medical personnel started work on a voluntary basis and carried out efficient health and hygiene inspections among the Jewish residents. A project was launched to provide free medical care, medications, and advice on hygiene for the Jewish refugees in temporary accommodation.⁶ To improve the living conditions of the newcomers, the sanitary commission obtained the consent and support of the *Judenrat* to introduce a new regulation which required Kraków's indigenous Jewish residents to share their water supply with the refugees. This was necessary to maintain basic standards of hygiene and prevent outbreaks of infectious disease. There were penalties for those who failed to comply.⁷ Additionally,

4 AŻIH (Archive of the Jewish Historical Institute in Warsaw, Poland; hereinafter AŻIH), 301/448; Bieberstein, 1986: 29; AŻIH, 301/5093.

5 Löw and Zajączkowska-Drożdż, 2016: 192–193; Zajączkowska-Drożdż, 2015.

6 Bieberstein, 1986: 176.

7 AŻIH, 218/4.

both a disinfection station and public baths were established and made available not only to Jews in the city, and later from the Ghetto, but also Jews from nearby *Judenlager* (camps).

In mid-1940, Dr Jakub Kranz founded an infirmary for the elderly and sick who had residence permits for the city but had been evicted from the temporary shelters which were closed down, and had been left homeless. This institution had 60 beds and was located on ulica Miodowa. It was able to operate thanks to donations from the Jewish community and charges collected from its patients. The patients were generally very ill and most of them were over 70.⁸

The sanitary commission and infirmary moved into the Ghetto and continued operations until the Ghetto was liquidated in March 1943. The sanitary commission's most significant achievement was that no epidemic ever broke out in Kraków while it was in operation.⁹

The other medical institution which played a very important role during the war in Kraków was the main Jewish hospital on ulica Skawińska, which had been founded in the mid-19th century.¹⁰ Before the war, the hospital was constantly being expanded and new equipment acquired. Just before the war, 64 doctors, including 15 full-time staff and 46 interns, worked in it.¹¹ As soon as the Germans occupied Kraków, they took over this Jewish hospital. For the first two months of the war, the hospital was closed due to lack of funds and because a substantial number of Jewish doctors had left the city. However, the rising number of Jewish people made it necessary to reopen the hospital. Again, this was only possible thanks to the work of voluntary medical personnel; just eight out of the hospital's 42 physicians were paid a salary by the *Judenrat*.¹² The conditions were extremely difficult, financial resources were scarce, and the German authorities made doctors leave their medical duties to join in the manual labor such as snow clearance which all the other Jewish inhabitants had to do.

8 AŻIH, 176–177.

9 AŻIH, 175.

10 For an overview of the history of this hospital, see Sosnkowski, Zajączkowska-Drożdż, et. al., 2017.

11 Bieberstein, 1986: 179.

12 Bieberstein, 1986: 180.

When the Kraków Ghetto was opened, the hospital was moved into it and located on ulica Józefińska. The building in which it was accommodated was much smaller than its previous premises. It was constantly overcrowded and sometimes two patients had to share a bed.¹³

Before the war, the main Jewish hospital did not have an infectious diseases ward, so the Jewish doctors had to work with Polish hospitals. Under German occupation, it was no longer possible to continue this cooperation; moreover, the escalating numbers of Jewish refugees meant a greater risk of diseases spreading in the city. Thanks to financial support from the Jewish community, in April 1940 Dr Bieberstein was able to establish a small infectious diseases hospital located on ulica Rękawka. It only had 15 beds but there was also a children's ward. This hospital was in a precinct later incorporated in the Ghetto, and when the area of the Ghetto was reduced, the hospital was relocated to plac Zgody. Dr Bieberstein recalled that not only Jews from the city but also those from its environs were treated there, and sometimes patients from as far away as Kielce were sent to this hospital. The German authorities didn't look into this hospital very often, as they were afraid of catching an infectious disease, so it was possible to hide clandestine food supplies and even a small number of weapons for resistance units there.¹⁴

In late 1941, Dr Aleksandrowicz and Dr Bernard Bornstein founded another hospital, this time for the chronically ill. It was established after the creation of the Ghetto and had fifty beds. All three hospitals continued operations until the Kraków Ghetto was closed down.

WHAT HAPPENED IN THE HOSPITALS DURING THE DEPORTATIONS TO EXTERMINATION CAMPS

During the first deportation in June 1942, hospital patients were exempted from selection. The doctors knew of this order in advance, so they admitted numerous healthy individuals and saved many lives.

13 Bieberstein, 1986: 204. Testimony of Michał Fallek, AŻIH, 301/4113.

14 Bieberstein, 1986: 187.

Just before the deportation, there were only nine patients in the Jewish infectious diseases hospital; however, when Dr Bieberstein learned that patients would be exempted from the deportation order, he admitted 350 Jews to his hospital.¹⁵

Dr Aleksandrowicz, who ran the hospital for the chronically ill, also tried to help Jewish people as much as he could, and hid over 5 hundred in his hospital. Unfortunately, someone denounced him to the Ghetto police, and they ordered him to reduce the numbers down to just 30. Later, Dr Aleksandrowicz wrote that he was so overwhelmed with emotions, he didn't know what to do, as he was expected to select 470 people and send them to their deaths. The situation was too much for him. When the first patients started to leave the hospital, evidently in a bad condition, they began to mix in with the crowd of healthy individuals already selected for deportation and waiting in the street. It looked as if everybody out in the street had been evacuated from the hospital. That's what Dr Aleksandrowicz told the Gestapo and they believed him, so he avoided the dilemma of having to decide who would survive from a vast number of people, and the result was that 470 people were saved (for the time being) from deportation to a death camp.¹⁶

During the first deportation to Belzec extermination camp, the German authorities allowed Jewish doctors to organize a medical station on plac Zgody, where those due to be deported were assembled. Doctors and nurses, including Dr Bieberstein, provided assistance and medicines to those in the worst condition.¹⁷ The only pharmacy in the Ghetto was located on plac Zgody and was run by Tadeusz Pankiewicz, an ethnic Pole.¹⁸ It played a very important role in supplying medicines both to the medical staff and people gathered in plac Zgody.¹⁹ Later Pankiewicz recalled that most of the drugs he distributed were tranquilizers and painkillers, which were provided free of charge.²⁰

15 Bieberstein, 1986: 190.

16 Bieberstein, 1986: 183, Pankiewicz, 107–108, Aleksandrowicz, 2001: 63, 68.

17 Bieberstein, 1986: 59, 63; Kuwałek, 2010: 107.

18 Löw and Roth, 2014: 54–55.

19 Another organization which provided medicines to the Ghetto was Żydowska Samopomoc Społeczna (Jewish Social Self-Help; head: Michał Weichert); Kroll, 1985.

20 Pankiewicz, 2003: 82, 88.

Patients were to be included in the selection for the second deportation to Belzec: the German authorities had decided Jews who were not in good health were of no use to them, so they had to die.

This time, there was no medical station on plac Zgody, nonetheless, the doctors tried to find a way to save as many lives as possible. Since physicians were not on the list for selection, Dr Bieberstein had some of the patients put on doctors' white coats, which saved many lives, and the same procedure was carried out at the main Jewish hospital.²¹ Additionally, doctors and nurses hid some sick children outside of the hospital for the duration of the deportation.²²

Another example of doctors' courageous behavior during the second deportation was that they encouraged all the walking patients to leave the hospitals and save their lives. In 1947, Michał Fallek testified that in September 1942 he was a patient at the main Jewish hospital with a leg injury and had problems with walking. During his stay in the hospital, news of an imminent deportation spread in the Ghetto, and on the day before the deportation, the German police came into the Ghetto, surrounded the hospital and ordered the patients to be ready by the next morning. Fallek said that during the night a doctor saw every patient and tried to get them to dress and pretend they were healthy and, if possible, leave the hospital. He also stated he wasn't able to leave his bed that night; however, next morning he had the chance to leave the hospital and the good luck survive; all the other patients who stayed in the hospital were either deported or killed on the spot.²³

Most of the bedridden patients in the hospital for the elderly and the infirmary were brutally murdered. The majority of the patients from the main Jewish hospital were transported to Belzec for extermination. Witnesses' memoirs give detailed descriptions of the extraordinary brutality the Germans used to kill hospital patients; these atrocities were accompanied by torture, humiliation, violence, verbal abuse, and terror. Tadeusz Pankiewicz wrote in his book that during this deportation, German soldiers pulled patients including those in a very poor condition, out of their beds in the infirmary, beat them up violently, and threw them down

21 Bieberstein, 1986: 73.

22 Bieberstein, 1986: 73.

23 Testimony of Michał Fallek, AŻIH, 301/4113.

the stairs. In the courtyard, all the victims were lined up against the wall and shot. Samuel Erlich said that he saw two German soldiers killing the patients who had been brought out of the infirmary.²⁴ Aleksander Bieberstain wrote in his book that this was one of the most heinous atrocities the Germans committed in the Kraków Ghetto.²⁵ After this deportation, the infirmary ceased to exist.

Contrary to the regulations which exempted medical personnel from selection, many doctors were also sent to Belzec.

During the liquidation of the Kraków Ghetto in March 1943, the Germans organized a third deportation, when all the Jews who were selected as unfit for work were to be sent to Auschwitz-Birkenau. All the medical staff were ordered to leave the hospitals and were sent to Plaszow. Tragically, all the patients left in the medical institutions in the Kraków Ghetto were either deported or killed on the spot.

This deportation was also a very stressful time for the doctors in the hospitals in the Ghetto because they realized that they had an unenviable choice. They could either let their patients and the sick members of their family die peacefully by administering poison to them, or keep them alive and let the Germans murder them savagely. Dr Bieberstein wrote that he knew of three doctors who poisoned their parents because they knew they had no chance to survive. In addition, Dr Aleksandrowicz wrote in his memoirs that once he was sure that the bedridden patients in his hospital would be killed, he gave them cyanide to spare them that ordeal. In his memoirs he wrote that he was well aware that as a physician he had to endeavor to maximize the lifespan of his patients, but on the other hand he also knew that he had to minimize their suffering. He claimed that this was one of the most difficult decisions in his life. His second most difficult decision was when he decided to escape from the Ghetto with his wife and child, however, his parents refused to join them, so he had to leave them to die in the Ghetto.²⁶

24 Testimony of Samuel Erlich, AŻIH, 301/1660.

25 Bieberstein, 1986: 73–74, 196–197.

26 Aleksandrowicz, 2001: 84–85.

MEDICAL INSTITUTIONS IN PLASZOW

Three of the barracks in Plaszow were set aside as a hospital area. The conditions in them were deplorable, the work to construct these barracks had not been completed, there was no electricity or running water, and they were unfit for human habitation. Straight on arrival, the medical personnel started to gradually adapt the barracks for their patients' needs. Three wards were created: a general ward, a surgical ward, and a ward for infectious diseases. There was also a first aid room in one of the barracks in the hospital area, with a general health center, a dental surgery, and a pharmacy.²⁷

The chances the doctors in Plaszow had to save lives were far fewer in comparison to what they could do in the Ghetto because of the activities of Dr Leon Gross, a Jewish doctor appointed head of the hospital by the camp's commandant Amon Göth. Dr Gross collaborated with the Nazi officials and carried out all the German orders without demur, and punished any doctors who dared to disagree and protest against his orders. He was not concerned for the welfare of the patients.²⁸ The testimonies of Plaszow survivors show that Dr Gross drew up lists of people due to be killed, while at the same time taking bribes to cross patients off the list. He had no empathy for the sick and even poisoned some of his patients.²⁹ His activities made the work of the other doctors much more difficult, as they could not do anything without his consent. Even though the doctors were under extreme pressure, some of them tried to counteract Dr Gross as much as possible, sometimes even jeopardizing their own lives trying to help patients. One of these brave physicians was Dr Ferdynad Lewkowicz, who worked in the surgical ward. Dr Lewkowicz's patients and coworkers said in their testimonies that he always gave his patients proper medical care and often negotiated with Dr Gross to keep patients in the hospital until they were ready to return to work, also he had the courage to treat prisoners with gunshot wounds, which was against the orders issued by the Germans.³⁰

27 Aleksandrowicz, 2001: 124–125.

28 Aleksandrowicz, 2001: 126–127.

29 AŻIH, 301/1600, 301/1589, 301/4578, 301/1576, AŻIH, 301/1574, AŻIH 310/1573, AŻIH 301/4575, AŻIH 301/4525, AŻIH 301/4522. After the war, Dr Gross was sentenced to death by the Polish court for collaborating with the Germans. The sentence was carried out in 1946. See Bazyler and Tuerkheimer, 2014: 199.

30 Testimony of Edmund Klein, AŻIH, 301/2394.

CONCLUSION

The Jewish medical personnel in Kraków under German occupation were deeply committed to maintaining a basic level of hygiene and organizing medical assistance for the city's Jewish community and new arrivals. Their chief aim was to prevent outbreaks of epidemics, and they achieved this because they worked on a voluntary basis to organize hospitals and other medical facilities despite constantly deteriorating conditions. During the three deportations, Jewish hospitals played a very important role in helping to save lives or at least reduce suffering. A large percentage of the Jewish medical personnel took an active part in this operation; very often they had to make difficult decisions regarding the plight of the Jewish people in the Ghetto. This extraordinary work was extremely important and consequently helped to keep Ghetto inmates alive for as long as possible.

There were also exceptions, for example Dr Gross, whose behavior made assisting the Jewish inmates of Plaszow much more difficult. Nevertheless, the majority of the doctors made a huge difference to the chances for survival for the whole Jewish community, whenever they were able to make independent decisions and take responsibility for their actions and the institutions they ran. As Miriam Offer emphasizes in her book,

Studies on Jewish medicine in the Holocaust illuminate the phenomenon of the establishment by the persecuted Jewish victims of an independent medical system endowed with modern professional characteristics. . . . No such self-organization appears to have taken place in other cases. . . . In many cases of persecution and genocide, we generally witnessed a collapse of the medical system of the persecuted and the replacement of its services, if at all, mainly by international organizations. . . . The Jews themselves, that is, the persecuted society, and not the Germans or any outside party, established the system. . . . This phenomenon seems to be unparalleled in any other case of genocide.³¹

31 Offer, 2020: 637–639.

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