

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 601  
(A-24)

Introduced by: Medical Student Section

Subject: Annual Holocaust Remembrance Event

Referred to: Reference Committee F

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1 Whereas, physicians played leading roles in the Holocaust and were a driving force behind  
2 some of the worst atrocities perpetrated on Jewish and other marginalized communities,  
3 demonstrating the negative impact physicians can have during political turmoil<sup>1,2,3</sup>; and  
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5 Whereas, heinous medical experimentation took place during the Holocaust despite Germany's  
6 pre-existing Guidelines for Human Experimentation, which at the time was one of the only codes  
7 for ethical human experimentation in the world and which called for unambiguous informed  
8 consent, demonstrating the potential for codes of ethics to be ignored or subverted if they are  
9 not protected and supported<sup>4</sup>; and  
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11 Whereas, even with a code of ethics, Nazi physicians believed they were operating under  
12 scientifically and ethically sound beliefs due to their prioritization of the national effort and  
13 government agenda<sup>2,3</sup>; and  
14

15 Whereas, medical involvement in the Holocaust has profoundly influenced contemporary  
16 medical ethics, and current thinking on medical ethical issues can be understood better by  
17 learning about and reflecting on the legacy of medical involvement in the Holocaust<sup>2,3</sup>; and  
18

19 Whereas, in addition to the well-known Nazi medical experiments, German physicians created  
20 and led Nazi programs such as forced sterilizations, child "euthanasia," and the T4 program to  
21 murder institutionalized adults, which are critical aspects of medical history (and some of which  
22 were directly influenced by American medical and racial policies), but these are much less  
23 widely studied by students in medical school<sup>3,4</sup>; and  
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25 Whereas, learning about and reflecting on the implications of physician involvement in the  
26 Holocaust can not only help students understand contemporary medical ethics, but can also  
27 help protect against future human rights abuses by physicians<sup>2,3,5</sup>; and  
28

29 Whereas, per the Liaison Committee for Medical Education (LCME) annual survey, only 16% of  
30 US and Canadian medical schools devote any required curricular time to learning about the  
31 roles of physicians in the Holocaust and contemporary implications<sup>5,6</sup>; and  
32

33 Whereas, abundant curricular resources on Holocaust education are available, relieving the  
34 burden of medical schools having to create novel educational materials to support medical  
35 student learning and reflection on this history and its contemporary relevance<sup>5,7</sup>; and  
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37 Whereas, the AMA Code of Medical Ethics only mentions physicians' role in the Holocaust once  
38 as an example of information obtained from unethical experiments (E-7.2.2); and

1 Whereas, the legacy of medical involvement in the Holocaust is increasingly recognized as  
2 critical to understanding contemporary concerns around health equity and justice and the roles  
3 of health professionals in either perpetuating or alleviating injustice<sup>5,8</sup>; and  
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5 Whereas, experts in medical ethics education and professional identity formation are  
6 increasingly calling for inclusion of these issues as part of the medical curriculum, including in  
7 the *Lancet*, the *AMA Journal of Ethics*, and in a presentation held by the AAMC<sup>3,5,9</sup>; and  
8

9 Whereas, a single event on an annual basis, held on an internationally-recognized day of  
10 remembrance, could present a valuable opportunity for student and faculty learning and  
11 reflection about the legacy of health professional involvement in the Holocaust<sup>10</sup>, therefore be it  
12

13 RESOLVED, that our American Medical Association host an annual event in support of  
14 International Holocaust Remembrance Day (January 27) to provide education to medical  
15 trainees about the role of physicians in the Holocaust. (Directive to Take Action)

Fiscal Note: Moderate - between \$5,000 - \$10,000

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#### REFERENCES

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#### RELEVANT AMA Policy

##### **H-295.961 Medicolegal, Political, Ethical and Economic Medical School Course**

1. The AMA urge every medical school and residency program to teach the legal, political, ethical and economic issues which will affect physicians.
2. The AMA will work with state and county medical societies to identify and provide speakers, information sources, etc., to assist with the courses.
3. An assessment of professional and ethical behavior, such as exemplified in the AMA Principles of Medical Ethics, should be included in internal evaluations during medical school and residency training, and also in evaluations utilized for licensure and certification.
4. The Speaker of the HOD shall determine the most appropriate way for assembled physicians at the opening sessions of the AMA House of Delegates Annual and Interim Meetings to renew their commitment to the standards of conduct which define the essentials of honorable behavior for the physician, by reaffirming or reciting the seven Principles of Medical Ethics which constitute current AMA policy.
5. There should be attention to subject matter related to ethics and to the doctor-patient relationship at all levels of medical education: undergraduate, graduate, and continuing. Role modeling should be a key

element in helping medical students and resident physicians to develop and maintain professionalism and high ethical standards.

6. There should be exploration of the feasibility of improving an assessment of ethical qualities in the admissions process to medical school.

7. Our AMA pledges support to the concept that professional attitudes, values, and behaviors should form an integral part of medical education across the continuum of undergraduate, graduate, and continuing medical education. [Res. 189, A-90; Modified by CME Rep. 1, I-95; Appended: Res. 318, I-98; Reaffirmed: CME Rep. 2, A-08; Reaffirmed in lieu of Res. 902, I-13; Reaffirmation I-15]

#### **E-7.2.2 Release of Data from Unethical Experiments**

Research that violates the fundamental principle of respect for persons and basic standards of human dignity, such as Nazi experiments during World War II or from the US Public Health Service Tuskegee Syphilis Study, is unethical and of questionable scientific value. Data obtained from such cruel and inhumane experiments should virtually never be published. If data from unethical experiments can be replaced by data from ethically sound research and achieve the same ends, then such must be done. In the rare instances when ethically tainted data have been validated by rigorous scientific analysis, are the only data of such nature available, and human lives would certainly be lost without the knowledge obtained from the data, it may be permissible to use or publish findings from unethical experiments. Physicians who engage with data from unethical experiments as authors, peer reviewers, or editors of medical publications should:

- (a) Disclose that the data derive from studies that do not meet contemporary standards for the ethical conduct of research.
- (b) Clearly describe and acknowledge the unethical nature of the experiment(s) from which the data are derived.
- (c) Provide ethically compelling reasons for which the data are being released or cited, such as the need to save human lives when no other relevant data are available.
- (d) Pay respect to those who were the victims of the unethical experimentation. [Issued: 2016]