LETTERS TO THE EDITOR

Cigarette smoking and health promotion in Nazi Germany

Six – I have followed the exchanges between Brenner and Davey Smith et al with interest,12 given that I am presently writing a book-length history of Nazi cancer research and policy, with a special focus on Nazi tobacco policy. Davey Smith et al are correct to say that the Nazis implemented strong anti-smoking policies; it is not quite true, however, to state that these policies were implemented “with little success.”2 While per capita smoking increased in the first six years of Nazi rule, smoking actually declined rather dramatically during the war and immediate postwar period (table 1).

<table>
<thead>
<tr>
<th>Year</th>
<th>Germany</th>
<th>USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1930</td>
<td>490</td>
<td>1485</td>
</tr>
<tr>
<td>1935</td>
<td>510</td>
<td>1564</td>
</tr>
<tr>
<td>1940</td>
<td>1022</td>
<td>1976</td>
</tr>
<tr>
<td>1945</td>
<td>743</td>
<td>3039</td>
</tr>
<tr>
<td>1950</td>
<td>460</td>
<td>3552</td>
</tr>
<tr>
<td>1955</td>
<td>866</td>
<td>3597</td>
</tr>
<tr>
<td>1960</td>
<td>1280</td>
<td>4171</td>
</tr>
<tr>
<td>1963</td>
<td>1523</td>
<td>4345</td>
</tr>
</tbody>
</table>


Cigarette consumption

From 1940–50, German per capita cigarette consumption fell by more than half, from 1022 per person to 460 per person. The decline is notable, given that in the US over this period of the early war, cigarette consumption nearly doubled, from 1976 per person to 3552 per person.

It is important to recognise, of course, the possible sources of bias in such figures. In both the German and the American case, the numbers indicated are domestic sales figures recorded for taxation purposes (both therefore exclude production for export). In the German case, there are several reasons official records may have underestimated actual tobacco use in the immediate postwar period. For one thing, official statistics could not take into account the flourishing black market trade in foreign tobacco. American cigarettes (“Amis”) were highly prized in the postwar period, with single cigarettes selling for as much as 5 or even 7 marks (compared with several pfennigs for German brands). Tobacco smuggling was rampant: in 1949, an estimated 400 million American cigarettes found their way into Germany every month. As late as 1954 two billion Swiss cigarettes – a quarter of that country’s production – were estimated to have been smuggled into Germany and Italy.4

Smuggling was fostered by the fact that German cigarette manufacturing had sunk to only about 10% of prewar levels, mainly due to the inability to secure raw tobacco from outside Germany. Shortages remained so severe that American authorities decided to expect the tobacco policies of the 1930s and 1940s to have borne fruit. In 1952, the annual rate of deaths from lung cancer among German women was a mere 4 per 100,000; that same year, the mortality rate for German men was 22 per 100,000. By 1990 the mortality rate in Germany had climbed to only 6 per 100,000, while the rate for men had increased to 49 per 100,000 (see table 2). In Germany today, more men die from lung cancer than from any other kind of cancer. Among women, by contrast, lung cancer is still in third place, behind breast and colon cancer. The difference in lung cancer mortality between the sexes is so great that, if this particular difference were somehow to vanish, most of the difference in overall cancer mortality between men and women would also disappear.

How can we explain the relatively slow rise in female lung cancer mortality in Germany, in comparison with that of the United States? I would suggest that Nazi efforts to discourage women from smoking, together with the shortages imposed by the war and postwar poverty, combined to slow the rate of rise of female smoking and (therefore) the rate of rise of female lung cancer mortality.

Indeed, it is possible to calculate how many women’s lives may have been saved by what ever caused the dramatic reduction in smoking over the period 1940–50. We are obviously moving here in the realm of speculation, but it is perhaps worth noting that many more women would have died of lung cancer had German rates continued to grow as rapidly as they did in the United States. As we can see in table 2, American women’s lung cancer mortality rates increased by more than a factor of six between 1952 and 1990. German women’s rates, by contrast, only doubled. Had the German rate increased as rapidly as the American rate, roughly 20,000 more women would have died than actually did die. One can plausibly argue that whatever prevented German women from taking up smoking as rapidly as American women eventually prevented the lung cancer deaths of some 20,000 German women.

Fertility

One further correction to the comment article by Davey Smith et al. Martin Carnoy, a regular contributor to this forum, and the author of the book Heil Hunger, is quoted to the effect that German birth rates did not increase, despite Nazi pronatalist propaganda. In fact, Germany’s birth rate jumped dramatically in the first few years of Nazi rule (from 14.7 per 1000 in 1933 to 18 per 1000 in 1934), probably due to the optimism with which the new regime was greeted. The birth rate continued to climb until about 1940, by which time German women were having more babies than England and France combined. Fascism is perhaps more complicated and seductive than many of us like to think.

Table 1  Cigarette consumption, per capita per year

Table 2  Lung cancer mortality (age adjusted) per 100,000 inhabitants in West Germany and the USA

West Germany

<table>
<thead>
<tr>
<th>Year</th>
<th>1952</th>
<th>1990</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>22</td>
<td>49</td>
</tr>
<tr>
<td>Women</td>
<td>4</td>
<td>8</td>
</tr>
</tbody>
</table>

All figures are age adjusted. Sources: Deutsches Krebsforschungszentrum (Nicholas Becker) and the American Cancer Society.
Robert Proctor's contribution to the debate on Nazi anti-smoking activities is to be welcomed, since he has made important contributions to the understanding of this issue. He suggests that the anti-smoking measures implemented in Nazi Germany, discussed in our article, had more impact than we, and others, have implied. This point is made by comparing the cigarette consumption and lung cancer rates of Germany and the United States. Proctor appears to attribute the fall in cigarette consumption in Germany after 1940 to the Nazi anti-smoking measures, with the consequent shortfall in lung cancer rates thus being attributed to these measures.

Cigarette consumption in postwar Germany

This analysis depends upon the acceptability of data on cigarette consumption coming from the devastated terrain of post 1945 Germany. As Proctor acknowledges, there was certainly an extensive contribution of smuggling and home production to post war German consumption, which is not reflected in these figures. Equally importantly, the comparison between Germany and the United States is surely not the most appropriate one. If reductions in smoking are taken to be long term consequences of Nazi anti-smoking policies then they should not be seen in other countries which suffered similar post war disruption, but without the anti-smoking activities. In Japan, where we can find no evidence of intensive anti-smoking propaganda before and during the war, cigarette consumption per adult collapsed from around 1150 per adult per year at the time of Japan's entry into the war to 310 per year in 1947 and only returned to the prewar level in 1950. In Germany prewar levels had been reattained by 1953. Indeed the ratios for cigarette consumption per adult per year in Japan compared with Germany remained remarkably consistent: 1927 – 1.23; 1937 – 1.21; around 1947 – 1.13; 1957 – 1.23; and 1967 – 1.19. Thus it appears that postwar disruption of men had produced simple short-term effects, together with extensive black market trading and home production, which reduced the official cigarette consumption data. This fall cannot be attributed to the anti-smoking campaigns and policies.

Comparing cigarette smoking in Germany to that in the United States is clearly com-
however. Wholegrain bread was produced by nearly a quarter of German bakeries by 1943, compared to only 1% in 1939, following appeals from the health Führer Le- onardo Conti that wholegrain bread should be eaten "for the benefit of individual health and national strength." 1

The legacy of healthy eating campaigns are even less easy to discern than those of the anti-smoking campaigns. Germany has an overall mortality picture which is unfavourable given its high gross national product and Nazi campaigns against alcohol, against smoking, against animal fat, and in favour of fruit and vegetables, wholemeal bread etc. - which were promoted particularly at the same youth who are now the generation contributing substantially to national mortality rates - had no discernible long term impact. Indeed the present legacy may have been unfavourable, with the Presselwelle ("wave of guzzling") which followed the deprivations of war having adverse consequences with respect to obesity and obesity related diseases.16

**Fertility**

Proctor also comments on our reference to Martin Gumpert, who intimated that the Nazi campaigns to increase fertility were failing. Gumpert managed to escape from Germany because of war and did much to advertise the level of misery in Hitler's state. His book Hail Hunger was an attempt to demonstrate that a popular contemporary view - that the Nazis had improved health in Germany - was incorrect. He was widely quoted outside of Germany and appears to have been an effective intervention. When discussing the fertility campaign Gumpert was referring to the later stage of the "battle for births", rather than its early days. As Proctor points out there was an increase in the birth rate and marriage rate immediately following the imposition of the Nazi rule. The birth rate increased from 15.1/1000 in 1932 to 18.9/1000 in 1936.13 But, this should be seen against the decline which preceded it. From a rate of 35.6/1000 in 1900 the fertility rate declined to 31.6/1000 in 1910, 26.8/1000 in 1914, 20.3/1000 in 1920, and 17.5/1000 in 1930 and by the early 1930s it had reached an all-time low.14 Seen in this light the "success" of the pronatalist campaigns was modest.11,10

Interest-free marriage loans were offered from 1933, but many couples had passed the tests of political and eugenic reliability. Family allowances, with one-off payments at the birth of each child, were followed by the introduction of recurrent grants, intended for each child, and propaganda intended to encourage working women to return to the home to raise children.11,12 Increasing legal sanctions against abortion were imposed, culminating in the death penalty being introduced for habitual assistance at abortions.15 In the light of these activities, the last of which would increase the birth rate by far rather than winning the propaganda war, the cessations of birth control in any sustained phase in fertility can be seen as the basis for Gumpert's consideration that German mothers "had gone on strike." Gumpert commented cynically on many of the pernicious effects of Nazi social policy. He considered that attempts to claim that poor health was due to bad lifestyle was serving as a smoke screen, to cover up for the genuine dangers of Germany which were the incitements of Nazi policies. Thus he considered the then campaigns to reduce fat consumption during a period of hunger were particularly invidious, stating, "there emerge today health administrations hyenas who proclaim to the public that butter is poison."

**Lack of support**

The anti-smoking campaigns in Nazi Ger-


15 Wilkinson RG. Unfair shares. Ilford, Essex: Bar-


19 Wilkinson RG. Unfair shares. Ilford, Essex: Bar-


23 Wilkinson RG. Unfair shares. Ilford, Essex: Bar-


26 Wilkinson RG. Unfair shares. Ilford, Essex: Bar-


32 Kudlien F. The German response to the birthrate problem during the Third Reich. Conti-


35 Davey Smith G, Egger M. Smoking and health promotion in Nazi Germany. J Epidemiol Com-


37 Kudlien F. The German response to the birthrate problem during the Third Reich. Conti-


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