

WŁADYSŁAW OLENDZKI

[Warsaw,] 2 June 1945

Władysław Olendzki

Warsaw, Mińska Street 9, flat 129

It is common knowledge that Auschwitz is a killing field whose crematoria became the grave of millions. There are many things still to be explained. One of the things yet to be described is life in the camp hospital, the so-called *Krankenbau* (the building for the sick), a term never used outside the camp. In order to describe every single hospital ward, a full-length book would have to be written, which would be one of many volumes chronicling the life at Auschwitz. Presently, I will give a brief outline of the surgical ward together with the operating theater.

It is worth noting that the operating theater was well equipped, with sets of surgical instruments ("organized" from the Canada), a table, and operating lights made by prisoners, yet serving their purpose.

Just as with the entire hospital, the operating theater was also the testing ground for various "esteemed *Lagerarts* [camp doctors]", who were gaining experience there, with no regard to human life. Let's take Dr. Thilo (*Hauptsturmführer*), a gynecologist. At the camp's operating theater, he learned surgery. He selected people suffering from hernias, hydrocele, and so forth, who had managed for long years without a surgery, only to eventually end up on the operating table at somebody's whim, so that doctors Thilo, König, Mengele, or others would get practical experience and an opportunity to flaunt their brilliant exploits and their new methods – methods they could never have tested on a free man. But a prisoner was not a human being to them.

These people were selected by Dr. Thilo himself, who operated on them with only assistance from prisoners. After they had had their stitches removed, which meant they were already regaining their previous strength, Dr. Thilo, without any scruples, took down their numbers, thus removing them from among the living while they were still alive and earmarking them for the gas chamber, as people of no further use to him. Those selected by Dr. Thilo or by

some other doctor were lucky if the vans which were supposed to take them on their last journey, to the fiery crematorium furnaces, arrived on the next day, and this rarely happened. These vans typically arrived a few days, or sometimes even a few weeks, after the selection. Imagine the torment of these people – who knew perfectly well they had been sentenced to death – during this wait, when minutes seemed like ages, when death was anxiously awaited, when it could not come soon enough so it would cut short the torture of the waiting, and when their only other wish was to be able to eat their fill so as not to go to the gas chamber starving.

The *Lagerartz* did not operate on everybody himself. Very often, at night or while he was absent, there were emergencies (such as appendicitis, incarcerated hernia, work accidents, etc.), and these poor people really needed help. This help was provided to them by their fellow sufferers, prisoner doctors. Such operations were performed without the “assistance” of Dr. Thilo or another doctor and they saved the lives of hundreds of prisoners. However, not everybody could recover in peace because the *Lagerartz* and his selections were the highest law.

Here are a few examples. Once, late in the evening, a patient with a gunshot wound in the abdomen was brought to us on a stretcher from camp “A” (the quarantine camp). He was an Italian who had arrived a couple of days earlier and was not too familiar yet with the circumstances at the camp. He left the block during the *blocksperr*e (block curfew), for which he earned a bullet in the stomach fired by some zealous SS man. A surgery was performed and it turned out that the bullet had pierced his small intestine at eleven points. Undigested food was flowing out of these holes. Peritonitis, which is a very dangerous condition, was inevitable. Indeed, on the next day he had a fever of 39 degrees. The incident was reported to the *Lagerartz* (all such incidents had to be reported to him), who showed great interest in the matter, as in the case of all issues new to him. Now we were waiting to see if the patient would make it or not. For eight days, he fought for his life. After eight days, the fever dropped; the patient’s body proved stronger. The *Lagerartz* was so interested in the patient’s course of illness that he would bring him tinned food himself, and ordered that he be put on a special diet. But everything they did was duplicitous, and this case was no different. The day of a selection came. This patient, who was slowly regaining fitness, was selected to be gassed. The period of his recovery was of no interest to Dr. Thilo: it would have lasted too long and he would have been unproductive. Such people were not needed by these murderers.

A similar case. One afternoon, a patient is brought from the DAW *kommando* (aircraft junkyard), both his legs were smashed above his feet. The legs were amputated. The *Lagerartz* was also extremely interested in this case. He ordered that the patient receive the best medical care. He himself often asked him how he felt and brought him tinned food, wishing him to get well soon – and he would see to it that he got “well” by sending him to gas soon. A man with no legs was, in their opinion, a burden to the camp: he was unfit to work and he would have received regular portions of bread and soup. That would have been too expensive for the “Great Reich”.

I could give more similar examples, but even those discussed above are enough to characterize these human beasts, the *Herrenvolk* people, who, had they won, would have burned the whole of Europe, leaving only themselves.

DAW Deutsche Ausrüstungswerke WO 115408

I have testified truthfully.