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Ethics and the anthropological medicine of the Heidelberg School: reciprocity and solidarity¹

As attested by different sources, the period between WWI and WWII was fertile in proposals regarding science, society, and humankind all over Europe. The field of medicine was characterized by the perception of a crisis in its theoretical and practical fundamentals and the emergence of numerous movements oriented towards their reformulation. Most of them were confined to the realm of specialized groups while others were linked to the political changes that characterized the period. It is the time of the Fascist movement in Italy, of the Weimar Republic and the birth of Nazism in Germany, of the Revolution in Russia and of the collapse of the Ottoman Empire.

In this time, ripe for substantive reorientations of the sciences and the arts, medicine underwent the influence of important discoveries affecting its social, psychological, and biological foundations that modified its relations with other social activities.

The so-called clinical general medicine and anthropological medicine of the Heidelberg School grew out from a series of approaches owed to clinicians and thinkers, starting with Ludolf von Krehl at the beginning of the XXth century and culminating in the work and ideas of Viktor von Weizsäcker (1886-1957). A prolific author, he wrote extensively on the philosophical analysis of medical thinking inspired by a Christian protestant outlook, and influenced a group of physicians who presented

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ideas and insights that merit consideration in the present time. While the impact of this line of thinking on institutions and practices was scarce, its re-analysis against the background of developments in bioethics, professional ethics, institutional practices, and changes in research regulations may provide an interesting contrast to current practices in these fields.

The main theoretical contribution of this medical movement resides in the consequent application of the biographical method (beyond the mere clinical history) and the (re)introduction of the subject into medical discourse. Although similar ideas were current in other quarters, the particular form of holism developed in Heidelberg differed from others in the analysis of psychosomatic interactions beyond the causal thinking hegemonic in the natural sciences. With the concept of *Gestaltkreis*, or the circular articulation of movement and perception, which as a metaphor could be expanded to the bipersonal interaction within the doctor-patient dyad, the causal chains soma-psyche and psyche-soma were reformulated in a synthesis considering time and with no implications of a naïve influence of the mind on the body or vice versa. In addition to the contributions to theoretical medicine, the Heidelberg School (and particularly Viktor von Weizsäcker) made suggestions for the field of social medicine that deserve re-appraisal and analysis²

A neglected aspect of the work of the members of the anthropological medicine movement concerns the ethical underpinnings of medicine and the sciences. It has been argued that the writings of von Weizsäcker do not contain an explicit analysis of ethics, or that no vision of an ethical nature arises from his contributions. However, on closer inspection, the reason for this apparent silence on explicit ethical considerations may be considered to reside in the particular conception of medicine that was put forward in his work. Already in the paper on euthanasia and human experiments, which is a statement in relation to the Nürnberg trial of Nazi doctors (1947)³, his main proposal was that dissociation between medicine (or science) and ethics was responsible for the unethical behavior of some members of the profession. A purely natural-scientific medicine lacked the capacity to judge what is wrong or right and had to resort to ideas and conceptions from beyond its limits. The human medicine proposed should be a "moral science" (*sittliche Wissenschaft*), meaning to imply a form of science that did not fall prey to the "division of reason" (*Spaltung der Vernunft*) that had created an ignorant morality and an immoral science. Getting back to the fundamental relation (doctor-patient) that gives rise to medicine as a social discourse, the existential analysis reveals the possibility of a system of

² Von Weizsäcker, V. *Gesammelte Schriften*, Suhrkamp Verlag, Frankfurt/Main 1987

³ Lolás, F. *La medicina antropológica y el juicio de Nürnberg. El aporte de Viktor von Weizsäcker*. CIEB, Santiago de Chile, 2010

thought that finds within its own boundaries the fundament for moral action. The implications of this view for education and research are evident. They have not been systematically pursued in the training of researchers, mostly due to the difficulties posed by its implementation.

In this context, the main ethical concept propounded by Weizsäcker and the Heidelberg School is that of **reciprocity** (*Gegenseitigkeit*). Irrespective of the asymmetries in knowledge that may exist between doctor and patient, or between researcher and subject, the common aim expressed in the constitution of a working alliance, a bipersonal entity, discloses a deep understanding and the sense of belonging that turns humane what might be seen as purely technical⁴. The related concept of **solidarity** (*Solidarität*) adds a dimension that is also relevant from an ethical perspective. One can argue that solidarity is a complex construct, and that at least two forms can be discerned: the horizontal solidarity concerns peers; the vertical solidarity links people with their leaders. This is the notion of *homo duplex* proposed by Emil Durkheim, which in some of its variants might be construed as supporting totalitarian thinking which gives pre-eminence to the collective over the individual.

The heritage of the Heidelberg School in the field of theoretical medicine still lacks adequate treatment. Its ethical foundations have not been adequately dealt with. It might constitute a useful line of research to explore further the implications of the concepts of reciprocity and solidarity in relation to principalist bioethics and also to the seminal work of Fritz Jahr⁵, hitherto unacknowledged creator of the discipline of bioethics but a thinker who shared with von Weizsäcker a similar *Zeitgeist* and a profound interest in human affairs.

⁴ Gahl, K., Achilles, P., Jacobi, R.M. (editors) *Gegenseitigkeit. Grundfragen medizinischer Ethik*. Königshausen & Neumann, Würzburg, 2008

⁵ Lolas, F. El "imperativo bioético" de Fritz Jahr y la neobioética estadounidense. *JANO* (Barcelona), No. 1710, pp.10- 16 octubre 2008.

Lolas, F. Bioethics and animal research. A personal perspective and a note on the contribution of Fritz Jahr. *Biological Research* (Santiago) 41: 119-123, 2008.