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Drug Abuse and Politics. What Happens When Rational Actors Become Addicted to Mind Altering Drugs?

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DRUG ABUSE AND POLITICS.  
WHAT HAPPENS WHEN RATIONAL ACTORS BECOME ADDICTED TO MIND  
ALTERING DRUGS?

By

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A capstone project submitted for  
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## **Abstract**

Political scientists study state-sponsored conflicts through models pertaining to the how and why aspects of war, while historians are the true record keepers of wars past. Books are written about strategies that often take positions where certain hasty decisions can tilt battles to one side or the other, which may have caused the course of history to change the record entirely. But what if the factors being studied in conflicts were twisted in such a way that even historians may have been misled as to the actual conditions which were attributed to cause and effect? This paper will investigate drug use as a weapon of war by state actors, as well as the armies they command. We will examine drug abuse on such a broad scale that the actual drugs may have not only fueled parts of the conflict, but at some points may even be linked to possible causation in some of the most brutal human rights abuses on record. In this paper, the evidence will concentrate specifically on methamphetamine abuse, World War II, the Holocaust, and Adolf Hitler and his Third Reich.

**Keywords:** Intravenous, Blitzkrieg, Methamphetamine, Pervitin, Eukodal, Holocaust.

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## Introduction

In political science, we often refer to states as being governed by rational actors, with armies made up of ordinary people. In times of war, these ordinary people sometimes carry out horrific crimes against humanity, as well as human rights violations against noncombatants. Even though we can take a position that war is irrational, logic dictates that making plans to fight for territory and carrying out such plans are strategic moves by rational actors for rational reasons. But what if wars were actually conceived and carried out by non-rational actors, for purposes of stealing property, looting, killing people, or simply creating mayhem? And how would we determine the conditions which could re-categorize a once rational actor as being non-rational? This thesis will argue that any actor under the influence of mind-altering drugs such as opioids or methamphetamines can no longer be considered as being rational, especially if said actor has become addicted to such drugs. Also and specifically, I would argue that any army which has consumed large quantities of the drug methamphetamine can no longer be considered as an army of ordinary people.

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In Just War Theory (*jus bellum iustum*) we talk about military ethics as having some humanistic bearing as to why we fight (*jus ad bellum*) and how we fight (*jus in bello*). When states enter into conflict, the rules of engagement are defined by tactics designed by actors within states, for rational reasons. This research will not focus so much on the ‘why’ we fight, but moreso on the ‘how’...with the hidden element of chemical dependency and how it reacts in the mind of a soldier suffering from the

intended reactions to the drug, and the unintended side-effects of drug addiction and all it entails. This drug use is a weapon of war, but not pointed at the enemy as with other weapons, this is about a drug specifically designed as an offensive move to ensure endurance and longevity, which starts as a social movement and ends up as an addiction, with soldiers suffering from withdrawal symptoms similar to those of a modern-day street junkie who can't find a fix.

This paper will investigate the alleged drug use by Adolf Hitler during WWII, and the allegations that Hitler was a daily intravenous drug abuser who ordered hundreds of millions of methamphetamine tablets to be produced and distributed to his armies on the front lines. It will also argue that tens of millions of people lost their lives, including over 6 million victims of the Holocaust, in part due to the actions of these non-rational actors, addicted to the drug methamphetamine. Also, by theory, it will argue that it may have been the mind-altering influence of these narcotics which caused otherwise rational humans to harm and kill other humans, with such harsh and inhuman techniques that scream of human rights abuses of the worst kind known to man. In effect, this paper will outline an argument that this single drug is one of mankind's biggest threats, and that somehow history has either minimized or completely erased these facts whenever mentioned as irrelevant, where in fact it may well be the most relevant event in modern times.

## **Background**

In 1973, German author Joachim C. Fest published an almost 800-page biography titled *Hitler*, which he said would be the most complete version of events, to include all facets

of Adolf Hitler's life. He held that this would be the final word on the man, because there would be no new revelations about Hitler which hadn't already come to light (Fest, 1974). Since the book was released almost 30 years after the death of Hitler and the end of World War II, it would seem as though his statements were accurate. What new information could possibly be researched or released that would change *any* dynamic of this era? One would naturally conclude that all documents pertaining to this period would have surfaced and circulated by now but for an agreement called the *Nazi War Crimes Disclosure Act*, which purposely hid vital Nazi wartime documents for reasons of national security (Nazi War Crimes Disclosure Act, 1998).

In the closing weeks of the war, the United States government took possession of a vast amount of documents from the German Third Reich and kept them in three locations, including two in Germany and one at the National Archives in Washington DC. Most of the documents have been tagged and recorded over the years and in 2007, the Nazi War Crimes and Japanese Imperial Government Records Interagency Working Group (IWG), following the legal requirements of the *Nazi War Crimes Disclosure Act*, released its final report to the U.S. Congress. With the final report came the declassification of all documents pertaining to the historical value of the Nazi regime, most of which were made available to the public for the first time. In total there were 8.2 million pages of records released in addition to 114,200 pages of CIA documents, over 435,000 pages from FBI files, and 20,000 pages from Army Counterintelligence Corps files (Weinstein, 2007).

The race was on to see if Fest was indeed correct in his analogy. Along with the declassification of so much new material - researchers, historians, authors, political

scientists, sociologists, journalists, and university students were drawn to the National Archives. After all, it had been almost 40 years since Fest's biography of Hitler was published and, unlike many historical events, the public's fascination with Hitler and WWII has never faded.

Several researchers and authors spent years combing through the archived records and in the end, there was a revelation so odd and disturbing, it would open a colossal Pandora's Box into the history of the entire war. Hundreds of documents were found that linked heavy drug use to the German army, and to Adolf Hitler himself. Among them was a sort of diarylike journal by Hitler's personal physician Dr. Theodor Morell, who kept meticulous daily records of the drugs that he injected into the Fuhrer. At the time the injections first started, it was believed that Dr. Morell was actually treating Hitler for intestinal problems but as time went on, the drug use escalated into mood-altering pharmaceuticals delivered directly into Hitler's veins (Irving, 1983).

Though Hitler was a firm critic of drug abuse, it became clear to him that certain drugs could be beneficial in offering strength and efficiency during times when normal fatigue would slow a man down. This thought process would lead to the invention and mass production of a drug called *Pervitin* in the late 1930's, which was basic methamphetamine in pill form, developed and produced by the Berlin-based *Temmler Pharmaceutical Company* (Stephens, 2008; Malet, 2016). *Pervitin* became a social norm in Germany in the periods leading up to WWII, and remained available over the counter up until 1941, when studies showed that people were building up a tolerance and getting addicted to the drug (Stephens, 2007). *Pervitin* was already widely used at the onslaught of WWII, and soldiers on the front lines were reporting positive results from the effects



of the drug and their interactions with the perceived enemy. (Ohler, 2016). Starting with the invasion of Poland in 1939, which sparked the start of the Second World War, the German government was providing Pervitin to its soldiers on the frontline, as well as to those serving at the home-front in anti-aircraft crews, blackout patrols, and other civil defense squads. This attack led to the death of over 100,000 Polish soldiers, as German soldiers were able to fight without signs of fatigue until the end of each mission.

As the war progressed the Temmler Company was able to produce as many as 833,000 pills a day and hundreds of millions of Pervitin doses were delivered to the frontlines of Hitler's armies (Stephens, 2007; Pieper, 2002; Iversen, 2006; Ohler, 2016). At the rate Pervitin was being produced, over 300 million tablets were being shipped out of the Temmler factory in a single year, making the dissemination of meth into German society and the soldiers fighting the war, a major event in itself. In 1940, from April to July alone, 35 million doses of Pervitin were shipped to the Wehrmacht (Germany's United armed forces) and the Luftwaffe (Germany's Airforce) (Eckart, 2006). Also, between April and December in 1941, the Temmler factory had shipped another 29 million pills to the military in a separate order. Furthermore, after the Germans were defeated at Stalingrad in Southern Russia, the dissemination of Pervitin to the troops increased dramatically (Stephens, 2007). The loss at Stalingrad came after almost 6 months of continuous fighting and made it clear that losses occurred when troops lacked an adequate supply of their stimulants. Pervitin supplies were ramped up with the belief that such losses were due to extreme fatigue among troops.

It appears the Third Reich had used pharmaceutical drugs as weapons of war, including some of the worst offenders known to man. As time progressed, Pervitin was

referred to as a German-made combat drug, specifically designed for soldiers to use during battle (Nenye, 2016). Though it's true that societies in the late 1930's and early 40's were not as aware of the long-term effects of these types of drugs as we are today, the historical record should shadow the actions of those involved with the atrocities committed by German soldiers during this particular war and the Holocaust, while using and abusing these particular drugs.

To be precise, we know a lot more about the abuse patterns of someone addicted to methamphetamine in today's societies, and these risk factors were not common knowledge at the time of their use in WWII. Though some concerns were raised by the general public at the time Fest completed his most famous work, the correlation between heavy meth use and the Third Reich had not yet been fully established. In fact, the main culprit responsible for injecting Hitler with daily doses of dangerous drugs, Dr. Theodor Morell, is rarely mentioned in Fest's biography, and when so, he appears to be a mere sidekick to the leader of the Nazi Party (Fest, 1974).

There still lingers a notion that if Hitler and his armies were indeed using such harsh narcotics as methamphetamines, what would make these people any different than the common street junkies who pave our dark and seedy underbelly of societies in the world today? If the decision making processes of world leaders and their armies, both individually and collectively, are hindered by the abuse of mind-altering drugs, shouldn't we reexamine their actions in order to provide future societies with plausible explanations for events so horrific as the Holocaust, and consider that perhaps the actual causes may have been drug related? I would argue that not only was Fest's prediction incorrect, but that the information released through the *Nazi War Crimes Disclosure Act*, which only

came to light in the summer 2012, may have been one of the most relevant pieces of the puzzle. It's important to consider that this new information may address questions that historians and other scholars have been looking to answer for all of these years: what really caused German citizens to slip into the gutter of human rights events, causing ordinary men to so easily be involved with the mass slaughter of other human beings, including all of the events uncovered in the Holocaust?

If we examine the reported use of methamphetamines as a cornerstone of German society at the time of WWII and the events leading up to it, can we in any way infer possible causation? The only way to answer such a broad question is to gain a better understanding into the effects of these drugs on the human mind and spirit, and to try our best to analyze these events to gain an understanding of the actions of those involved at the time.

### **Adolf Hitler and State-Sponsored Drug Abuse**

I've always thought it was common knowledge that Adolf Hitler became a drug addict sometime during World War II, but when I ask around, I'm surprised that a lot of well-educated individuals are not aware of this fact or the depth of the addiction itself. In the summer of 2016, I had the unique opportunity to visit the Holocaust museum in Berlin, which is called the *Memorial to the Murdered Jews of Europe*. The museum was fully funded and the curators were a large group well educated PhD's and experts in the field of every aspect of the events that took place before and during WWII. I approached a section of the museum designed for scholars and when I told them about my research

project, I was surprised that none of them were aware of the allegations of drug use by Hitler and his Third Reich. Eventually 6 or 7 of the workers were huddled around me as I conversed with them for well over an hour. They all seemed very interested in the topic even though it seemed to be new information to them. The tone in the room made me believe this research to be even more important than I had initially believed.

Not only was Hitler accused of doing several drugs, including heroin and cocaine, but towards the end of WWII, he was also a daily intravenous methamphetamine abuser as well. In his new book *Der Totale Rausch, Drogen im Dritten Reich* (The Total Rush, Drugs in the Third Reich), author Norman Ohler has researched Hitler's drug use by spending years sifting through the records of Hitler's personal physician Dr. Theodor Morell, who was Hitler's constant companion from 1936-1945 (Wilson, 2012). In his book, Ohler has detailed Hitler's drug abuse, as well as a possible timeline in which we can compare his decision making processes during the war with the decaying mental stability of a common meth abuser in this day and age (Ohler, 2015). For the record, Ohler's research into Dr. Morell's records concludes that Hitler was injected with an astonishing list of drugs throughout their history together. Ohler's list, taken from pages 141-142 of the English translation of his book *Blitzed*, a 2017 release, is as follows:

“An alphabetic list giving the German names clearly demonstrates the madness of the treatment (the psychoactive, consciousness-changing drugs are italicized: Acidol-Pepsin, Antiphlogistine, Argentum nitricum, *Belladonna* *Obstinol*, Benevra forte, Betabion, Bismogenol, *Brom-Nervacit*, *Brovaloton-Bad*, *Cafaspin*, Calcium Sandoz, Calomel, Cantan, Chineurin, *Cocaine*, *Codein*, Coramin, Cortiron, Digilanid Sandoz, *Cardiazol*, *Cardiazol-Ephedrin*, *Dolantin*, Enterofagos, Enzynorm, *Esdesan*, Eubasin, Euflat, *Eukodal*, Eupaverin, Franzbranntwein, Gallestol, Glucose, Glyconomr, Gycovarin, Hammavit, Harmin, Homburg 680, Homoseran, Intelan, Jod-Jodkali-Glycerin, Kalzan, Karlsbader Sprudelsalz, Kissinger-Pills, Koters Antigas-Pills, Leber Hamma, Leo-Pills, Lugolsche Losung, Luizym, *Luminal*, Mitilax, Mutaflor, Nateina, Neo-Pycocyanase, Nitroglycerin, Obstinol, Omnadin, *Optalidon*, Orchikrin, Penicillin-Hamma, Perubalsam, *Pervitin*, *Profundol*, Progynol, Prostakrin, Prostophanta, Pyrenol, *Quadro-Nax*. Relaxol, Rizinus-oil, Sango-Stop, *Scophedal*, Septojod, Spasmopurin, Strophantin, Strophantose,

Suprarenin (Adrenalin), Sympatol, Targesin, Tempidorm-Suppositories, Testoviron, Thrombo-Vetren, Tibatin, Tonpphosphan, Tonsillopan, Trocken-Koli-Hamma, Tussamag, Ultraseptyl, Vitamultin, Yatren.”

Clearly there were a lot of drugs involved. Ohler is quick to mention that the U.S had translated most of the German pharmaceuticals into English but for one major drug that had no English translation at the time and was noted in its original German spelling as Eukodal. This drug alone may shed some light onto exactly how addicted Hitler actually was, being that the modern-day translation for Eukodal, a pill manufactured by Merck, has an active ingredient called Oxycodone. Oxycodone is a highly addictive drug today that’s synthesized from raw opium and in 1943 it appears that Hitler became addicted to Oxycodone as well (Ohler, 2017).

These sentiments by Ohler are corroborated by bestselling author Giles Milton, whose 2016 release also mentions Hitler’s drug use at the hands of Dr. Morell, as well as four other doctors who treated the Nazi leader, which lasted for more than nine years. According to his personal research conducted from the National Archival in Washington DC, Milton says there were times when Adolf Hitler was taking up to 80 different vitamins and drugs a day, mostly intravenously, and all of this at a time when he was personally masterminding Germany’s attempts to take over the world. He notes that Hitler didn’t care about the drug use, as long as the injections continued to work (Milton, 2016). These facts are contradicted by British historian Ian Kershaw who authored a biography titled *Hitler 1936- 1945; Nemesis* and notes that Hitler was taking over 90 varieties of drugs and vitamins each day, but believes they had no effect on his personal deterioration (Kershaw, 2000).

Though Ohler has laid out a credible view of his research, he has left a huge gap in the story by not addressing the effects of drugs such as methamphetamine on the human mind, while jumping to conclusions that equate these drugs as a direct cause of the atrocities that came to light during the Second World War. Though his conclusions may encompass accurate views, they're missing the academic standards which forbid the theories of causation without the research to back up the allegations. In this case, we would have to understand how such a drug interacts with the human psyche, and how normal thought processes can be hindered by an addiction to such a drug. As this paper progresses, we will attempt to provide the glue that holds together the fabric of Ohler's research with the psychological factors which shape the mind of the addict, and try to determine the possible thought processes of those involved at the time, with patterns we know to be true of meth addicts today.

It is my theory that if we can pinpoint the segment in time when Hitler's drug use became an addiction, we may find evidence which will allow us to view the history of WWII in a different light. Concentrating on these issues, we may be able to determine at which point his rational thinking was swayed by the drug abuse itself. In this effort I am determined to change the view of Hitler's legacy from being that of a rational leader of Nazi Germany into a new directive that highlights his actual position as a non-rational actor, mentally unstable from years of mind altering drug use. I would argue that it was this irrational man, mentally and visibly crazy from years of drug abuse, who led an army of meth addicts into a war that changed the world forever. With intentions to rattle the cages of history with this new information, there is an obvious shift in Hitler's strategies which highlight the fact that at some point in time, his drug addictions actually changed

the man himself into a non-rational actor, dictating moves that killed millions of people at the hands of otherwise ordinary people, following orders from a common junkie.

Though history has only mentioned the drug use as a sub-note to the atrocities of the war, the truth about the severity of a meth addiction and the effects on the decision-making process of the user has only come to light over the last 20 to 30 years. The amount of research dedicated to pinpointing the effects of a long term addiction to methamphetamines are only foreshadowed by the research that's being dedicated to figure out how our societies can deal with those who are already addicted to these types of drugs.

It should be noted that Hitler's personal addiction to drugs and the dissemination of Pervitin to his troops on the frontlines were two separate events, occurring simultaneously. Hitler was very much against illicit drug use and the events which led him to becoming addicted to these narcotics appear to be, for the most part, without his knowledge. What had started out as a belief that Dr. Morell was treating his ailments with a series of intravenous vitamin injections had blossomed into a serious drug addiction by chance. His addictions appear to be somewhat accidental, as the effects of the vitamin treatments diminished with time, and Dr. Morell was put under pressure to find new products that would help Hitler feel better. Dr. Morell seems to have experimented with just about everything available on the market, and the pharmaceuticals that worked the best were often the most addictive. The decisions to send Pervitin to his troops had nothing to do with his own personal regimen, though it was only a matter of time before the calculated moves of a leader would diminish to actions similar to the disordered mind of a junkie.

## **Historical Review - History of Methamphetamines**

Throughout history there has been drug abuse noted at some of the highest levels of government, but when drug use is encouraged or even mandated as a top-down strategy for winning wars, the drugs become a virtual weapon of the war itself. Though this can be viewed as a fair and legal strategy of war, without the understanding of today's analysis of how a drug addiction affects the individual mind, we will never know how to equate human rights abuses during wars, to typical human rights abuses which occur in the drug cultures of our modern societies. To say that there is no valid way to measure such abuse is to throw in the towel and give up on the fact that those in government positions who have the power to order such human rights abuses shouldn't be checked to see if their orders come from someone who is thinking rationally.

Methamphetamine use as a wartime strategy has been a continuous problem since its emergence on the battlefields of the Japanese Imperial Army pre-WWI. This single drug now plays a part in every brutal fighting regime in history, all of the way up to the current threat of ISIS throughout the Middle East (Perlmutter, 2015). ISIS troops are using methamphetamines that are being manufactured in captured pharmaceutical companies, as well as a drug called Captagon, a brand name for Fenethylline, a popular synthetic psychostimulant in the Middle East (Malet, 2016).

Stimulants have been used to keep soldiers alert as far back as some of the first conflicts known to man, but drug use as a tool of war only dates back to the invention of amphetamines in a Japanese laboratory in the late 1880's (Iversen, 2006). With the understanding that stimulants could equate to success on the battlefield, Japanese



scientists were quick to synthesize amphetamine into the first known version of crystal meth (Kuhn, Swartzwelder, Wilson, Wilson, and Foster, 2014), to help keep soldiers alert for days at a time, along with the financial advantages of a side effect that suppresses hunger (Taylor and Covey, 2008).

The United States government has never hidden the fact that their fighter pilots have been given amphetamines to help them stay alert, but the U.S. government has always treated meth as a dangerous narcotic. The difference between amphetamines and methamphetamines is like night and day. Amphetamines will keep a soldier alert for hours but will eventually wear off, and the soldier will come down from his high, making him virtually useless until he gets the rest he needs to fully recuperate. Methamphetamine is often referred to as amphetamine-on-steroids and is said to be 2 to 10 times more powerful than amphetamines, depending on the accuracies of multiple sources.

It was the Third Reich Patent Management that allowed the patent of Pervitin in Germany in 1943, but Pervitin had already been on the market for several years by that time, and was sold over-the-counter in most of Germany's pharmacies (Eckart, 2006). German society had already embraced the drug as a cure-all for many social anxieties, and this pill form of crystal meth was recognized as a strong psychotropic stimulant. During the onslaught of WWII, Pervitin was sent directly to Germany's front lines and to special brigades of the SS and Wehrmacht (Iversen, 2006). Though the Germans are given credit for crystalizing meth and developing a process to produce the drug into pill form, it was the Japanese government that first discovered the drug and its benefits to their troops, and I would argue that they shared the recipe with the German elite when

they aligned with the Germans prior to WWII. This correlation and the application of disseminating the drug to the frontlines are just too obvious to be coincidental. Both fighting regimes mirrored each other's techniques on the battlefield, with common goals of world domination as allies on the same team.

During WWII, signs of heavy meth use can be seen clearly in the design of each Japanese conquest, where strategies included capturing islands and killing most of the men, while keeping the women as sex slaves for their troops on leave. Deviants by nature, I would argue that the overpowering of women for the sake of sexual exploitation is just another side effect of meth abuse, as will be explained further in this paper. This twisted sexual deviant style where these sex slaves became known as "comfort women" is a clear indication of meth use, which has never been mentioned as a possible cause of the practice. I would argue that any further research into this matter should take into consideration the broad use of meth by the Japanese Imperial Armies, and would most likely conclude meth use as a partial causation to the practices, which is similar with the disordered and perverted mind of any meth addict. Though many have concluded that the Japanese were just a culture of sexual deviants, meth use was never entered into the equation, mostly because those who document such actions have either no knowledge that the drug was being used, or they have no personal experience with the causes and effects of such drug use themselves, and therefore have nothing to gage this against. I submit that further research into meth use by the Japanese Imperial Armies would lend explanations to many of their immoral practices.

For instance, many scholars are fully aware of the Japanese practice of using their planes as weapons against ships during WWII and the kamikaze pilots who gave their

lives as an altruistic type of devotion for the greater good of their country. But few are aware that these kamikaze pilots were involved in heavy meth abuse and that right before they were to give their lives, they performed at rituals where methamphetamines were mixed with sake into a cocktail that would put them in the mindset needed to give their lives without care - yet another side effect of the drug. An interesting note is that the Japanese pilots were given Pervitin, produced in Germany, even though the Japanese were the original inventors and producers of the drug (Iversen, 2006). I would argue that this fact may weigh in on my original theory that Japan supplied Germany with the recipe for meth when they aligned before the war. This correlation is difficult to ignore and with further research, I would suspect the evidence would support the passing of the torch, as indicated.

As far as the Germans are concerned, this is an entirely different conversation. Hitler and his Third Reich mastered the use of methamphetamines by mass-producing Pervitin and distributing the drug throughout its ranks. Meth was the main weapon in the German Blitzkrieg, which portrayed the German soldiers as being ruthless, brutal fighters who would push their frontlines forward non-stop, sometimes for well over a week, often catching their enemies asleep in their trenches from exhaustion.

### **Sociology – Alcohol and Drug Addiction**

As biological beings, we are natural consumers. Whatever we consume becomes our fuel for life, and what gets us through the day. In these events, we build a link-of-trust between our mind and our body, and our decision-making process of what we choose to

eat, is based both on our personal preference, as well as on the physical needs of our body. This link of trust is also a genetic genome built into our DNA which causes us to address our personal needs individualistically.

As an example, if we have a headache, we have options and each of us may handle such a problem differently, depending on our beliefs and past results for this affliction. While some may lie down and take a nap, others may prefer to exercise or eat certain foods which are known to relieve stress. Some people have a belief system that such consumption may lead to a natural remedy for the pain caused by the headache. But most people would probably pass on these alternative cures and head straight for the medicine cabinet for a pain medication such as common aspirin, to address the pain more directly. The latter scenario is problematic if not fully understood, and addresses the main concerns of addiction.

When we take a pain medication for such a common occurrence as a headache, we build on this link of trust between our body and our mind, especially if the medication is indeed affective in relieving the headache. If the drug is successful, the next time we have a headache, our mind remembers the easiest solution from the past was taking the medicine, which was successful at relieving the pain. This quick-fix is complex in that it simplifies our reaction to such pain with a short-cut to the cure - take your medicine and the pain will go away. From this point on, when one suffers from a headache, or for that matter any pain, our mind recalls our personal history of solutions for such pain, and instructs our thought process to seek relief via pain relievers.

This scenario is synonymous with any form of drug addiction. In building such a link of trust between the quick-fixes recorded in our brains and the positive results associated with the actions of taking medications, we become reliant on the recommendations of our thought processes and patterns. But the mind never takes into consideration the vast implications of a chemical dependency because at the point of addiction, the links between our minds and our bodies has always been a problem remedied by a simple solution. Up to this point, addiction was never a foreseeable outcome because we have had no addiction issues to resolve as of yet. Our link of trust between the mind and the body hasn't had to deal with the history of addiction and the problems associated with a chemical dependency. In this case, we are blindsided by the addiction because it was never really a piece of the puzzle.

Drug addiction occurs when a person has built up a tolerance to the drug they are using, and they find themselves taking larger quantities of the chemicals they use to "relieve the pain" in order to get the same results they normally achieved with recommended doses. Eventually, they take such large quantities of these chemicals that their bodies can no longer operate in a normal state without such chemicals. This link of trust between the physical body and the psychological mind has now caused a chemical dependency, where the subject requires the chemical to function in a pseudo-normal state. This process is the basis for all addictions. If a person who is chemically dependent tries to separate themselves from the chemical they are dependent on, they will suffer withdrawal symptoms, which is the body readjusting to having one of its vital chemicals removed. This newfound pain comes with the same simple solution: take your medicine and the pain will go away. This simple solution is why most people stay addicted for so

long - because of the pains associated with a chemical dependency and withdrawal, and the psychological factors involved with actually kicking such an addiction.

Alcohol and drugs are merely chemicals which alter our realities depending on our personal needs and history. When such practice becomes common within a society, it supplies justification for the alcoholism or drug abuse because it becomes a social norm. That said, the German society proceeding WWII was one of the most addicted societies in human history. Germans prior to WWII drank more alcohol than anywhere else in the world and extreme alcoholism was rampant, therefore making such a society ripe for drug addiction as well. Drugs like methamphetamines mix well with alcohol abuse because it's a stimulant which allows alcoholics to stay more alert, which in turn permits them to stay awake longer and consume more alcohol, the inadvertent goal of most alcoholics.

Methamphetamine was a natural fit for German society post WWI.

### **German Society Pre-WWII**

The 1930's and 40's were a depressing era for German societies. The country was in economic stagnation, with high unemployment combined with low wages. Their defeat in the First World War had stripped the country of most of its wealth, and territories were divided and redistributed to other states as the spoils of war, and the future appeared bleak and pitiful. Enter Adolf Hitler and the Nazi party. Hitler gained the hearts of the country through compassion for those who were suffering and he constructed a structured plan which would affect immediate change if he were to gain power. Hitler brought hope to a nation by offering solutions to regain the spirit of German society, with moves that

would show empathy towards its people by implementing social programs to revamp the economy, as well as rebuilding its military and exercising its right to progress forward. Hitler was also instrumental in the design and development of major infrastructure projects which included the German Autobahn, as well as the Volkswagen Beetle (the people's car), which not only spurred the German economy, it put thousands of people to work.

At the same time, German culture was shifting. Big pharmaceutical companies were given the green light to produce new concoctions to help to relieve society's woes, and capitalistic ventures in the pharmaceutical industries were turning record profits. The psychological factors which linked German citizens to heavy alcohol consumption were also being shifted to the pharmaceutical industry, and drug use soon transformed much of the German population. Alcoholics soon became heavy drug users as well, and eventually, without their initial knowledge, drug addicts.

For the pharmaceutical industry in Germany during this era, it was the wild, wild west. The race was on to invent new chemical concoctions and to patent them and get them out in the world as soon as possible to maximize profits. Stimulants and opioids were largely unregulated at the time, and tweaking chemical recipes in order to invent new therapies were on the rise. To this affect, the Germans were innovators to the industry and much of what we prescribe our patients to this day and age came directly out of this era of growth. The problem stems from the fact that they didn't really understand the long-term effects of these drugs at the time, or simply didn't care. At the time, the Germans really didn't have the options to hinder any economic boom in any industry. Capitalism was in play and any *quid pro quo* arrangement was viewed as good for the

economy. People wanted to feel better and with chemicals being invented to dull the pain of a failing economy, people welcomed these new treatments with open arms.

Pervitin arrived on the scene as a quick fix to alter moods with positive effects that offered immediate energy, neurological superiority, and a side effect of suppressing hunger. Pervitin was a synthesized version of amphetamine that crystalized the drug into a far more potent drug called crystal meth, which was manufactured in pill form and distributed to the masses through local pharmacies without a prescription.

### **Holocaust Explanations**

The mysteries surrounding the German Holocaust during World War II tear at the heart of who we are as a modern civilization and remain to this day an unfinished puzzle, where the pieces just don't seem to fit together. Though ethnic conflict can be dated back as far as any recorded history, the degree and magnitude of the Holocaust, and the massive numbers of those who died in the genocide, have yet to be fully explained. Over the years, thousands of scholars have pored through the evidence left behind and written enough books to fill a library, but still there are so many questions that are left unanswered. In Ian Kershaw's book titled *Hitler, the Germans, and the Final Solution*, Kershaw believes that the entire event was the mastermind of Adolf Hitler, and that had he not been brought to power, the Holocaust would never have happened. In his argument centered on his statement 'no Hitler – no Holocaust' Kershaw lays down strong points that this one lone state actor was responsible for the deaths of all of those killed in the Holocaust (Kershaw, 2009). His arguments are solid, sound, and logical and I would argue that a correlation exists between his statements which could equate drug use by



influential actors to the deaths of millions of our fellow human beings. If Kershaw's take on Hitler is to be believed, then we must refocus some of our historical concerns on the mind-altering drugs that may have influenced the man himself. It's important that we consider the power and instability of an elected official, addicted to drugs, and the permanent damage one man has caused by his hindered thought processes and judgement. It is one thing to think of this strictly as theory, but quite another when we are aware that this has already happened.

Accordingly, most people believe that the Holocaust took place during WWII, but it's also important to understand that these were separate events occurring simultaneously. The goals of the war and the extermination of the Jewish population were synchronous by design but separate as for human events. I would argue that we combine them not only because they occurred at the same point in history, but also to help us with our own understanding of how it was possible for so many men to be involved in such an inhumane event. If we view the Holocaust as a factor of the war itself, we can minimize our need to understand what was actually taking place. It's imperative that we interpret those killed in the Holocaust as victims of Hitler's *Final Solution* (the extermination of all Jews), and not as casualties of the war itself. Only after acknowledging this understanding can we filter through prior explanations of the Holocaust and ask ourselves if these determinations effectively answer our basic questions involving human nature, to determine how such tragedies could have unfolded in the course of natural human events.

The questions we ask ourselves while reviewing these historical events are personal to ourselves and humanistic by nature. Why would so many humans choose to be involved in the atrocities that led to the deaths of so many other humans? If we were

put in their shoes today, with the same elements in place, would we also kill these same people in these same horrific fashions? Do we have what it takes to watch other humans suffer from starvation and exposure until they literally drop dead? Do we possess within each of us the ability to legitimize being personally involved in the deaths of over 6 ½ million men, women, and children? Are we capable of overcoming the responsibility for the actions that caused their deaths? Can we picture ourselves as equal participants in such killings, or do we feel that we wouldn't have allowed ourselves to go along with Hitler's *Final Solution*? Is it really possible to take a position that we would not - that we would be the outliers who stood up and announced that we are more human than the other ordinary people involved in these atrocities? The answers to these questions are vital to our understanding of how people just like us answered somewhat affirmatively to each question.

It's important to remember that political violence isn't always political in nature. Political philosopher Max Weber once stated that "the decisive means for politics is violence" in a theory that war is an inevitable political function (Anter, Andreas, and Tribe, 2014). So we are clear, WWII started as a fight to win back territory that was captured and redistributed at the end of the First World War. Germany's borders were divided as the spoils of war and the initial goal was to retaliate, conquer, and redistribute territories that rightfully belonged to Germany and its citizens. The decision to exterminate the Jewish populations of each conquered state came directly from Adolf Hitler himself. The Holocaust was about ethnic cleansing and the extermination of the entire Jewish population. Hitler's *Final Solution* was a premeditated genocide authored in

his book *Mein Kampf* (My Struggle) in which he characterized Jews as being a racial and ethnic group, moreso than a religious sect.

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In this section, we will examine and evaluate scholarly works which have concluded possible causes of the Holocaust. These conclusions are actual and accredited, and being taught throughout schools and universities around the globe as probable and most-likely the actual causes of the atrocities that took place during the Holocaust. As we note the known and accepted causes, we should be critical to indicate possible flaws within this research, such as our personal experiences with human nature, while also understanding that in the midst of war, everything we know to be...is not. I will argue that though these conclusions may seem plausible, the fact that they seem highly unlikely has always been the counter assumption, and perhaps there was more to the story than we were aware of at the time. I would argue, as I have, that the missing link of understanding was the exclusion of the factual abuse of drugs such as methamphetamines and opioids during this time period, and that when we insert this new information into the story, all of the explanations *a priori* become more plausible.

Though there are hundreds of overlapping views into causes of the Holocaust, for the purposes of this research we will examine some of the most popular and excepted views by notoriety, depth, and substance, and compare the theories of relevant authors who have done previous research in the field. While examining Holocaust views, we must first examine the research of the Holocaust Museums in Berlin, Germany and Los Angeles, California, and also look into the research of noted authors Roger Peterson,

James Fearon, Daniel Goldhagen, and Christopher Browning. Comparing and contrasting accepted opinions of notable authors gives us the unique opportunity to readdress the same conclusions with the addition of this new information which includes methamphetamine abuse that was not included with any previous research into these events.

It's essential that we include this new information of drug abuse by the German army into any earlier assertions as to the causes of the Holocaust, while trying to reorganize and re-prioritize the weight of each argument after we understand the effects of such drug abuse on the human character, and reassess our past beliefs with this new information. Only then can we apply more plausible explanations or assumptions as to the causes of such abuses with the disordered mind of the common meth addict we are familiar with today. I also argue that when we include historical records of alcoholism and methamphetamine abuse within German society at the time, there are more than enough reasons to interject such alcoholism and drug abuse as probable causes which contributed to the Holocaust as well. I would also argue that these facts carry more weight than they are prescribed, and that having such a large portion of the population hopped up on methamphetamines could likely attribute to the reasons of why and how ordinary men could be so willingly involved in such events.

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The Holocaust Museums in Germany and the United States provide vast amounts of information in three locations, as well as in-depth examinations of an incredible

amount of data on their websites. They concede there is no single cause to the Holocaust and that actual causes would have to include a combination of theories to be accurate (Seemann, 2017). They tend to define causes into two broad categories: cultural explanations (such as antisemitism and cultural ideologies) and social-psychological explanations, which include fear, opportunism for personal gain, and pressures to conform (United States Holocaust Memorial Museum, 2017). Cultural explanations spread the blame throughout German society as well as a proven culture of antisemitism throughout Europe pre-WWII and continuing within Nazi ideologies which portrayed Jews as the enemy of the people. Many scholars believe that the course of the war shaped the ideologies of people at all levels of German and European societies, which had to deal with the knowledge that Germany may win or lose the war and shape their lives for decades to come. The belief was that the Jewish genocide was a cultural movement with a mob mentality that supported Nazism in Germany and other occupied countries as well.

The social-psychological explanations included fear, gain, deference of authority, and pressures to conform. Fear is used as one of the main explanations for the Holocaust but using fear in the broadest sense encompasses so much of the mood in this period. The theory involves the belief that people killed other people for fear that if they didn't, they may be harmed or killed or even sanctioned to the extent that it would make their lives more difficult. This is theory, for the most part, because very little is provable. Survivors of the Holocaust were worried that people would focus too much on the fear factor and miss the hard points of other contributing factors. Fear is real and actual, but not enough in itself to explain the entire movement. There are also several instances where soldiers who chose not to participate were not punished at all, as was the case when the wives of

Jewish prisoners marched in protest on the streets of Berlin (Goldhagen, 1996; Browning, 1992).

A more plausible explanation would have to combine fear with personal gain, in that murdered Jews were always relieved of their assets after the fact. With a small portion of the Jews holding a large portion of the wealth in Europe at the time, I would argue that the initial plans to redistribute territories lost during WWI became convoluted when murdering Jews provided personal enrichment. With the ability to replace the guilt of murder with the personal satisfaction and greed that comes from profiting in any way from the murders, it appears financial motivations became more evident as the tasks evolved and became more routinized. The looting that followed each event of mass murder had the German soldiers falling over each other to get at the spoils (Kilgore, 1945). Gain is indeed a motivator for just about any cause, let alone one that carries the orders of a commanding officer. The looting of Jewish property became so widespread that the German government was auctioning off detained prisoner's property before they were even deported to their perspective camps. Auctions were so swift and at such wholesale prices, everyone involved saw significant gains from the enterprise. In fact, the German model soon developed a strategy to involve locals to help with the mass-killings of Jews in return for possession of their property afterwards. In Lithuania those who helped with the killings got first shot at the property and were allowed to auction off whatever was left to split between the locals (Kosmala, Beate, and Verbeeck, 2011). This degree of gain is a genuine precursor to the motivation needed to be involved in the movement.

The deference to authority explanation is the standard for following orders. As soldiers are trained to follow the orders of their commanders without question, it is easy to understand to an extent that this could be the motivation of many, but when mixed with the other explanations of fear and gain, it almost seems reasonable. When soldiers disobey orders, they are punished and this understanding alone, with the perceived level of such punishment by the Nazi SS can explain why so many soldiers did their jobs. The psychological pressures to conform are embedded into our way of life. To touch on this topic lightly without detailing specifics of the human psyche and how the brain works would not do justice to the cause and there will be more in-depth about this later in this essay.

In Roger Petersen's book *Understanding Ethnic Violence*, Petersen equates the Holocaust to four basic human emotions which may delineate possible explanations: fear, hate, resentment, and rage. Locked into the same psychological boundaries as most who have tried to understand the Holocaust, Petersen has laid out a credible argument that any plausible explanation for the Holocaust must include one or more of these features in order to be a believable model (Petersen, 2002). He believes these four emotions must be involved, or the act of ordinary men killing other humans is just too hard to fathom. But even Petersen leaves open an argument for the unknown. He believes that fear, hatred, and resentment are rational feelings most of us can relate to, but his explanation of rage is altogether different and in need of interpretation. Of the four emotions, Petersen stumbles on rage because he admits that he doesn't fully understand the concept, though he believes it has to be a viable explanation because the other three emotions are not enough within themselves to fully explain ethnic violence so widespread that it could encompass

the entire Jewish populations in all of Europe. Petersen refers to rage as being an act of lashing out at those you hate, fear, or resent. Petersen believes these emotions are mechanisms that trigger the actions within a person which, in turn, produces the motivations which contribute to ethnic conflicts (Petersen, 2002). He believes that the emotional nature of people is the cause of such violent acts towards ethnic groups, and that human nature is based on these emotions. He believes that fear prepares an individual to take action to reduce dangers, and hatred entices people to attack their enemies, and that resentment causes actions to reduce imbalances in group status. Petersen also admits that rage is just too hard to predict and he concludes that resentment is the best explanation for anti-Jewish violence during the Holocaust.

Though these concepts become convoluted when attempting to understand in depth, I would argue that when we add methamphetamine abuse into the equation, the pieces start to fit together. Meth use is synonymous with emotions such as fear, hate, and resentment and very well may be the missing link that Petersen was looking for when he was trying to understand rage and lashing out. Meth addicts in today's societies are known for committing aggravated felonies which involve drug-fueled rage in the form Petersen referred to as lashing out. Rage is a natural consequence of meth use, as well as one of the side effects of meth addiction. I would argue that if Hitler's henchmen in the Third Reich were high on methamphetamine as suggested in this research, it would corroborate Petersen's theory about rage and lashing out, and make his theories about possible causes of the Holocaust much more plausible and easier to understand. If lashing out towards Holocaust victims is in any portion due to the heavy meth use by the German soldiers, then the extended belief should include meth as being partially responsible for



the actions of these soldiers who were drugged out of their natural instincts and quite possibly, to some extent, lessening their personal guilt as being ordinary men, when indeed a man abusing meth is not ordinary at all.

James Fearon, a Political Science professor at Stanford University, writes about *Rationalist Explanations for War* with the assumption that actors involved in the decision making processes which lead to war are rational actors (Halperin, Sandra, and Heath, 2017). Fearon argues that rationalist theory of war must include decisions based on private information (information known only to one side), the ability to manipulate it, and the incentives or inabilities of states to bargain to prevent wars (Evangelista, 2005). Though his explanations for war start with the assumptions that actors are rational, he doesn't address any scenario where we would assume the actors are non-rational. In this sense, it is understood that if we cannot assume the actors are rational, the analogies which lead to his philosophies on war have no gages for accuracy. If indeed heavy drug use has inflicted the minds of state actors during times of war, a good portion of Fearon's political theories on the justifications for war must be thrown out of the window, especially if such actors are actually addicted to these drugs as well. If indeed the actors in these human rights abuses were not rational, as presented in this thesis, Fearon's research is absent of crucial elements which may be key to actual causation. Fearon does mention the 'rational miscalculation' which would address any beliefs that actors may not be rational, but he seems to slide such events in without contemplation of how this may alter his previous analogies (Fearon, 1995). This thesis is intended to shed light on the missing elements in Dr. Fearon's writings, which would start with the assumption that

some actors are not rational at all and that mind-altering drugs, by nature, contributed to the actual cause of their irrational behavior.

In his book *Hitler's Willing Executioners*, Daniel Goldhagen, a former Harvard Political Science professor, suggests that Germans executed the Jews because they were natural anti-Semites who hated Jews altogether. Goldhagen believes the Germans were eliminationists who felt a natural duty as a people to rid the world of the Jews, as a favor to future societies. His conclusions are so problematic, they cry out for correction through social dialogue. To accept this analogy we would have to believe that Germans were natural born killers who hated all Jews and were culturally or genetically prone to killing Jews. If we are to believe such an outrageous claim, we would first have to try to understand where such an argument was born in the first place. The subject obviously touches home with Goldhagen, who is Jewish and has close family ties with Holocaust survivors. Though Goldhagen has asked his readers to put his religious and ethnic ties to the Jewish community aside from his work, his emotional ties to these events are the only factual revolution that makes his opinions seem as if they come from a place of the heart, instead of the 600-plus pages of trying to convince the world that the Holocaust happened because all Germans wanted to kill Jews anyway (Goldhagen, 1996). It would be an easy explanation if it were at all based on logic. What Goldhagen is talking about is hate - hate for Jews by all Germans, to the degree in which they would all join in a revolutionary plan of extermination to ease their pain. I would argue that Goldhagen was confused with the apparent hate for the Jewish populations and fell deep into the need for an explanation of the why. Again, without the knowledge of the extreme chemical dependencies of the major players, trying to figure out the why leaves no permissible argument. Without the

full picture, extreme and outrageous opinions such as Goldhagen's can appear to have substance...even when they do not.

In Christopher Browning's book *Ordinary Men, Reserve Police Battalion 101 and the Final Solution on Poland*, Browning also digs deep into the cultural aspects of ethnic violence. Browning makes an argument that German soldiers were put into the extreme positions between the altruistic duty of fighting for one's country and the mob mentality involved with carrying out orders, however burdensome they may be (Browning, 1992). Browning's research goes far beyond the usual political science modus operandi and specifically looks for answers in the personal interviews of actual soldiers who carried out these horrific crimes. Browning's conclusions are reached after researching the interviews of some 210 soldiers who were interrogated from 1962-1967 about what had actually happened, and which vicious acts each man had personally been involved with. Soldiers were, for the most part, excused of their crimes if it was determined they were truthful. After much research into culpability, Browning determined that there were no common links between the men in the battalion that would explain their abilities to take part in the brutal murders of men, women, and children during the Holocaust, and that most of them were basically ordinary men, caught up in extraordinary circumstances.

Because of the scope of Browning's analysis, his conclusions are to be regarded as highly credible in that they interject theory into the feelings and beliefs of actual soldiers who were present and complicit at the time these actions took place. Their responses should be taken as actual testimony to the motivations which led to such crimes against humanity, and any conclusions reached through research into these interrogations should be justly considered as based on accurate testimony. That said, Browning

approaches the theory that these men were 'just following orders' with a response that nobody involved in these murders could have had any doubt about what they were involved in (Browning, 1992). Furthermore, those involved in the massacre in Jozefow Poland were specifically told that their job was to exterminate Jews and when given the opportunity to opt-out of the assignments, only 10-12 soldiers out of around 500 took that option. When asked why they took part, many of the soldiers questioned said they did so unthinkingly and through the pressures of conformity. The consensus was that 'not killing Jews didn't change anything' and that 'killing children is easy' if you believed they wouldn't survive without their parents anyway. Unlike Goldhagen's analogy that Germans just hated Jews and wanted them dead, the ordinary men of battalion 101 testified that most of them were not anti-semitic. Still, Browning's conclusions included possible causations of the Holocaust as being partially blamed on racism, wartime brutalization (the mob mentality), deference of authority (orders from superiors), segmentation, routinization, and straight-up authoritarian personalities.

Though these analogies seem accurate, the question of drug use was never mentioned in Browning's book at all. There is no mention of the drug Pervitin, which was heavily disseminated throughout German society, as well as supplied directly to the soldiers. There is a lot of information about alcohol abuse throughout the book but it rarely touches on alcohol as having any part in causing these atrocities and Browning seems to think that the German soldiers were only abusing alcohol for the purposes of masking shame after-the-fact. I would argue that a wider search of this same information should include Pervitin as a precursor to the abuses of alcohol and that any conclusion as

to the causes of the Holocaust should include, even as a side note, the rampant use of Pervitin by those who committed these crimes as they happened.

In trying to understand the accepted causes of the Holocaust, the standard explanations outlined here fall short in convincing some scholars to accept these analogies because they tend to lack substance and logic. We tend to dismiss each individual assertion in favor of grasping the totality of all arguments combined for an actual cause worthy of our consideration. This notable 'lack of information' is a standard argument researchers use as a back-up when their findings seem to hit some of their targeted assumptions, while there also seems to be missing elements that may add some legitimacy or weight to their conclusions. I would argue that these standard explanations enhanced with the newfound knowledge that German actors were heavily dosed with methamphetamines and other drugs makes each explanation more plausible and therefore weighted with merit. The fact that historians minimized drug use by Hitler and his Third Reich has only led researchers to dig deeper into fallacies as possible causes, when in fact, the totality of historical events at the time, which included those killed in the Holocaust, are inherently drug related.

To further explain this position, we have to examine the influence of methamphetamines on the actions of the user. Only then can we begin to get a glimpse into what makes methamphetamine abuse so problematic and how it can turn a once-rational actor into a non-rational actor. It's crucial that we investigate the disordered mind of someone addicted to methamphetamines in order to fully grasp how the thought processes of members of the Third Reich were so hindered by the drug methamphetamine that killing Jews, as ordered, could become such an easy task, when meth abuse was

rotting and eroding the minds of Hitler's willing executioners and how this single drug may be the easiest way to explain the atrocities of the Holocaust. If we can understand the power this drug has over the human spirit and psyche, and apply this knowledge to those who personally carried out the actions which led to the deaths of millions of people during the events of the Holocaust, we can reexamine those who have studied these events and established causes which seem illogical at best, and insert the new found allegations of drug abuse to add to the list of possible causes, and hopefully all will agree that the Holocaust was indeed drug related, as proposed by this thesis.

### **The Disordered Mind of the Meth Addict**

Now that we've established the fact that methamphetamine abuse was widespread in both German society and in the ranks of the German Troops during WWII, it's time to step back and grasp the totality of problem. The problem was not that folks in Germany were doing drugs in this period; it's the fact that they were doing methamphetamines that was the real problem. Meth use and the effect it has on an individual is distinctively different, and way more extreme, than any drug use we think of when we hear stories of drug culture and standard drug addiction. There is nothing standard about meth use or the long term effects of meth addiction.

It has always been difficult for members of society who have never abused narcotics to understand the inner workings of the mind of someone who not only chooses to use these types of drugs, but also abuses them to the point of addiction. In this sense, the thought processes between drug addicts and non-users are polar opposites, and both

parties *cannot* relate to each other. People are built in different ways and we tend to pair ourselves with like-minded individuals and groups who also have similar interests.

People who are not familiar with the effects of illicit drugs tend to group those who do use them into a single category, but the truth of the matter is that although some drugs have similar effects on similar people, all drugs are inherently different, and it should be noted here that methamphetamine is in a category by itself. Meth use is absolutely different than all other drugs on this planet, in both the short-term effects and long-term effects. Studies have shown that two-thirds of meth users who abuse the drug over a three-year period suffer from some degree of psychosis (Doweiko, 1990). Meth abuse has such a detrimental effect on the human mind and spirit that it changes the thought processes which make us who we are, and therefore changes the user dramatically into a different person entirely; so much so that the previous self is virtually unrecognizable both mentally and often physically as well (Smith, 2015).

To be subtle, methamphetamine is not the root of all things evil, but I would argue that all things which include a meth addiction have found the evils within the man. Methamphetamine does exactly what it was designed and manufactured for. It was invented as a designer drug used to shut down the human mind's own mechanisms which relay to the central nervous system that it is time to shut the body down in order to recuperate for the next waking period (Cardena, 2011). The drug was intentionally designed for use by the Japanese Imperial Army in order to keep soldiers alert for long periods of time, without the mind-to-body influence which requires the body to rest, while also locking open the doors and windows of the mind, keeping soldiers alert. The horrendous side effects of the drug are mainly caused by *sleep deprivation*, which occurs

when the doors and windows of the mind remain open for extended periods of time, taking away normal thought processes and replace them with wild and crazy thoughts which could never be construed as being normal (Hotrum, 2014).

Methamphetamine is a very powerful stimulant. It has an initial effect of raising the heart rate and causing a feeling of euphoria, which can make a person feel better, stronger, and more alert almost from the instant it enters the bloodstream. Even small amounts of the drug can change a person's dynamic instantly, making them more active, more effective, more physical, mentally sharp, and without the requirements for the consumption of foods or liquids (Keeling, 2008). The feelings of euphoria come from the body's release of dopamine into the central nervous system, at extremely elevated rates, making the user feel happy and motivated (Covey, 2007). Though cocaine also has the dopamine connection, the dopamine system is only affected for one to two hours when it enters the bloodstream, but with meth use the dopamine system is affected for eight to twelve hours, and there is much more dopamine released into the brain, dwarfing the mind's reaction to cocaine, by comparison (Rawson, 2006). Science shows us that the dopamine released into the brain is three times higher with methamphetamines than with cocaine, causing serious health issues which can lead to dopamine deficiencies after extended use, which appear as some of the same issues one would have with a Parkinson's problem, where extended releases of dopamine effects a person's ability to move their body and limbs in a normal fashion (Freed, 2012). Too much dopamine is also one of the main features of Schizophrenia as well, which is characterized by recurring hallucinations (O'Brien, 1978). Elevated dopamine levels over a long period of time causes a person to be paranoid, have impaired judgement, to be highly aggressive, and to



act out with reward seeking and compulsive behavior, without consideration for the ramifications for one's own actions (Gahlinger, 2004; Weisheit and White, 2009).

The initial effects of methamphetamine make the users believe they are exactly where they want to be, and on top of the world. The problems resulting from meth use stem from the mind's own analysis of the drug. Meth is 'brain candy' and gives the mind exactly what it wants the most: to run nonstop without interruption. The mind likes to have all of its doors and windows open at the same time, in order to do its job more efficiently. This is where drug use eventually leads to a chemical dependency problem, because the mind also knows every trigger in the body in which it operates. It remembers how the user first consumed the drug and it remembers the processes which led to the inclusion of meth every time thereafter. If the mind wants more of its 'candy' it knows exactly how to convince the person who has consumed it in the past, to acquire more of the drug. This is one of the main problems with meth addiction; the mental control the mind plays in convincing the addict, whether they like it or not, to get more of the drug and use it again.

In George Graham's book titled *The Disordered Mind: An Introduction to the Philosophy of the Mind and Mental Illness*, Graham talks about how he believes that drug addiction is a mental illness caused by a human compulsion for irresistible impulses. He seems to fight his own arguments with contradictions in which he states that irresistible impulses cannot be the only factor or addicts would never be able to quit using (Graham, 2014). His entire analysis is problematic in that his research never leaves the realm of mental illness, to investigate further causes which may actually lead to addiction, and his basic assertions only scratch the surface of elementary thought on the subject of

addiction. I would argue that studying meth addiction as a mental illness only investigates the addict after-the-fact of addiction and adds nothing about actual causes, possible cures, physical versus mental addictions, or the fact that addiction occurs because of a chemical dependency. I would add that any references to human compulsion and irresistible impulses may help to understand someone who is actually suffering from a mental illness, but has little to do with the totality of the problems involving meth addiction and possible treatment. Where meth addiction may be viewed as a mental illness after the point of addiction, compulsion has little or no involvement in the thought processes that convinces a person to start using meth in the first place. In this event, it would appear the initial drug use is voluntary, as a compulsion has yet to be established.

In any event, the human body eventually builds up a tolerance for such things as alcohol and drugs. After a high tolerance is reached, the body requires larger doses of the drug to gain the same effects and ultimately this leads to a chemical dependency (Parker and McCaffree, 2014). When a person becomes chemically dependent, there is no choice to use, and the drug is required to allow the subject to operate in a normal state. Meth addiction eventually changes the person, not only because of the chemical dependency but also because of the sleep deprivation and the problems with not allowing the body and mind to recuperate. The physical and mental apparatuses which help a human function in a normal state become more deleterious as time goes on, breaking down the body's core and the mind's primary functions, which lead to twisted thoughts involving conspiracy theories and an emotional roller coaster ride of fear, hate, rage, and different degrees of contempt, which in turn adds to the user's discontent with all phases of life which don't directly link to doing or obtaining more drugs. With long-term use, the

symptoms increase to include psychotic and anti-social side effects including sexual aggression, increased libido, violence, dementia, bodily shaking, hyperthermia, sadomasochism, immoral and Satanic thoughts, chronic insomnia, paranoid delusions, and even hallucinations (Reding, 2010; Keeling, 2008). Though most of these symptoms appear to be related to the use of methamphetamine, I would argue that the main culprit which changes the psyche of the user is not caused by the drug itself, but by the *sleep deprivation* which causes the user to suffer by not allowing the subject to recover from the chain of events caused by using the drug. Sleep deprivation is a serious side effect of meth use, and is absolutely correlated to how we perceive the addict, and how the addicts perceive themselves.

### **Sleep Deprivation and the Human Mind**

The main problem with meth addiction is sleep deprivation. It is the single most problematic event in a drug addict's life, and methamphetamine literally guarantees the user will become chronically sleep deprived. Meth is all about being awake and keeping all of the doors and windows of the mind busy and flowing (Spalding, 2007). Even when the addict's body shuts down in an instant, the mind can still keep up with its calculations, until it solves every problem the disordered mind of the meth addict thinks it has. At this point, most of the normal thought processes of the addict have entered a delusional stage, where the facts and figures, and the puzzles the mind is attempting to solve, are delusional as well. The addict has entered a new realm where fantasy and reality are intertwined and he can't tell the real difference between the two, which can

often lead to depression as well (Colten and Altevogt, 2006). To the addict, these twisted thoughts and images are all too real and situations which present themselves need to be either addressed or ignored, by decision.

Much of this has to do with how much meth the addict has, and how soon he will need more drugs. Above all concerns brought to the table by the mind, the meth addict will subvert all to obtain more meth. The mind needs its candy at this late point of addiction, and the addict would do anything required to sidestep any task in order to obtain and use more meth. I would argue that this list should also include killing Jews as well, especially if the addict has orders to do so, and specifically if those giving the orders are enablers who actually supply the meth as motivation to kill, or as a reward for doing their jobs well. Such was the case in Germany during WWII, when the orders to kill Jews were supplemented by the use of Pervitin, supplied and distributed by the German authorities in order to control the soldiers of the Third Reich by feeding their addictions with a reward system that supplied the meth pills before, during, and after their involvement in the horrific events that included the Holocaust (Pine, 2016)

Hence, once the addict starts to suffer from acute sleep deprivation, all of the rules to the game have changed entirely. Sleep deprivation can be caused by a mental disorder, but when a person uses methamphetamine, sleep is being deprived intentionally, by design. Though this is known to the user at the time, it's the long-term effects of sleep deprivation which gives the addict the miserable life in which he leads. Though hallucinations have always been attributed to meth addicts, methamphetamine is not a psychedelic or hallucinogenic drug at all. Meth use on its own does not make the user see things that are not there. It's the side effect of sleep deprivation which causes the mind of

the addict to start seeing hallucinations (Covey, 2009). It is also the side effect of sleep deprivation which causes the user to become psychotic, displaying symptoms which appear to mimic those often attributed to meth addiction such as depression, anxiety, withdrawal from family and friends, delusions, hallucinations, aggressive behavior, suicidal tendencies, suspiciousness towards other people, and sometimes objects as well (Boeri, 2013). Because of the sleep deprivation, long term meth use alters brain chemistry in the user and causes distortions in thought patterns, as well as an unrealistic perception of one's surroundings (Hopkins and Wilson, 2009). It is these factors which separate the meth user from users of most other drugs. Besides other amphetamines designed to keep the user awake, most other drugs include symptoms which would otherwise relax the user, eventually causing them to fall asleep. In these cases, there can be no correlations to the causes and effects of meth use and the horrors caused or created by sleep deprivation. Meth is a different animal altogether, and sleep deprivation is the primary reason behind the insanity which can turn an ordinary person into a despicable human being, capable of all things, including murdering Jews and other noncombatants.

### **Non-rational Actors – The Last Days of Adolf Hitler**

Although it is clear that the soldiers of the Third Reich were heavy abusers of Pervitin (meth pills), there is no real correlation here to the drug use of Adolf Hitler, since these were separate events occurring for different reasons entirely. Nonetheless, history has always reported accurately the irrational moves of Hitler and his Third Reich towards the end of the war. Hitler's direct orders to keep his armies fighting against insurmountable

odds were viewed by the rest of the world as a suicide mission which would likely cause the deaths of most of his soldiers (Banerjee, Tekin, 2014). Many theories support that Hitler's intentions were to keep the world distracted while the extermination camps in and outside of Germany carried out his Final Solution. The general belief was that Hitler hated Jews so much so, that he would risk the lives of those fighting his cause just to see through his efforts to wipe out every last one of them (Fleming, 1986). It is with this understanding that I lead into my final arguments in an attempt to try to prove that the irrational decisions coming from the leader of the Nazi regime, were actually twisted ideas coming from the once rational actor, Adolf Hitler, now fully addicted to a long list of drugs, including methamphetamines, and struggling to comprehend the incredible devastation propagated on the world under his command, and in his honor.

Though Dr. Morell had been treating Hitler intravenously since 1936, his serious lapses in judgment transpired after the heavier narcotics were blended into the mix a few years later. Once the Fuhrer acquired a taste for Oxycodone and methamphetamines, the downward spiral portrayed by most addicts became apparent in the decision making processes of the Nazi leader. Much like the scheduling conflicts of the common meth addict, Hitler quit showing up to meetings, stayed up all night alone, and seldom went to bed before 6am (Ohler, 2016). Since he had been the target of assassination attempts, he was now living in a secluded dwelling where he hid from the world while making decisions on its fate. His first major blunder was in the winter of 1941 when he ordered his troops to advance in Russia despite the impossible winter conditions which cut off supply lines and allowed the Russian troops to surround the German armies. In the eye of defeat, Hitler's generals on the front lines requested permission to pull back and regroup,

but Hitler wouldn't have it, and ordered troops to hold the line at all costs. This fatal mistake was the first major loss for the Nazi regime, and Hitler was said to have been oblivious to the mistake, making battle plans from printed maps with imaginary battalions that didn't exist, but for in his mind. Reports from his inner circle had him screaming erratically at anyone in the room, that his generals and his battalions were inadequate and therefore traitors to the regime (Trevor-Roper, 2014). His tirades were drug induced at this point, though the research shows that Dr. Morell was not open with Hitler as to the specific drugs he was shooting into Hitler's bloodstream, and there is a valid argument that Hitler's drug addiction may have been entirely without his knowledge (Speer, 2009)...but he was addicted to methamphetamine and the worst kinds of opioids, nonetheless.

Hitler had expressed hatred for the Jewish people in his book *Mein Kampf*, which was in part because he believed they were the profiteers of the import and sale of cocaine throughout Europe (Streatfeild, 2003). But ironically, it was only after Hitler had become addicted to the drug himself that he devised his plans for the Final Solution. This event took place in January of 1942, at the Wannsee Conference in Berlin (just a few months after the German defeat on the battlefields in Russia) and the preconditions for his Final Solution were drawn up (Roseman and Zellien, 2012). Although the Germans had already been killing Jews since the start of the war, it was only after he became addicted to narcotics, which included cocaine, that he turned his fixation from winning territory to the genocide of the world's Jewish population (Ohler, 2016). This reprioritization of guidelines and resources made no logical sense, and I would argue that it only adds to the long list of irrational behavior which shows the man was not of sound mind at this time,

and he was making decisions similar to those addicted to heavy narcotics such as meth and Oxycodone, who act out of fear, hate, rage, resentment, jealousy, and even spite. These emotional decisions show that logical, strategic moves for the ultimate success of the Reich were cast aside for irrational considerations prominent among drug cultures, where lives are often changed in retaliation for petty crimes committed without malice, but inflated to something more by the disordered mind of the addict. In the case of non-Jews, Hitler had ordered the local courts to reclassify lesser crimes during times of war as enemies of the state, punishable by death. Where a person who stole a purse from a woman on the streets would usually serve time in prison, Hitler ordered that the courts punish ordinary people committing such crimes with death sentences. In fact, more than 16,500 people were put to death inside of Germany from 1933-1945 under Hitler's orders, for minor crimes unrelated to the war or the Jewish populations (Gellately, 2009).

By 1944, Hitler's health had deteriorated to the point where he was walking with a slouch and his left hand and arm shook so much of the time that the media was reporting that he was in the early stages of Parkinson's, which is also a side effect of long-term intravenous drug use (Ghaemi, 2012). By the second half of 1944, Hitler's decision-making processes were destroying his armies, which were now losing on all fronts. They were pushed out of Paris and Greece, and his soldiers were retreating in all of Southern Europe. Hitler seemed oblivious to any news of failure and acted as if such information was false or inconclusive. His personal health issues seemed to be more important to him than the war he had started and was still in command of. To counter the physical effects of the amphetamines, Hitler's dose of oxycodone was doubled from the year before, which made him feel even more euphoric, inspiring him to ignore the



failures of his armies with feelings that everything would work itself out (Ohler, 2016). The physical changes and Hitler's overall appearance were starting to be as obvious as the mental challenges the Fuhrer was trying to overcome on a daily basis. Those close to him were reporting that his skin was looking extremely pale and that Hitler was becoming lethargic in every way, until he received his daily injections from Dr. Morell, lending further proof to theories that he was addicted to the drugs in the cocktail injected directly into his bloodstream (Haskins, 2009). This is also the case with most meth addicts, and a standard chemical dependency issue, where the user cannot function at all without their daily fix.

With the mounting stress of multiple failures throughout his command, and the crumbling of his entire empire, Hitler had started a very confusing form of denial, in which his staff members feared he was ignoring such notices of defeat among his ranks, as if they weren't really happening. He instructed his staff to record all incoming data but if any reports were negative, he refused to read them. In March of 1945, Hitler was suffering from delusional thoughts and other forms of psychosis and in staff reports, Hitler was said to be looking as if he was a very old, broken man (Evans, 2002). Again, these are standard signs of a long-term meth addiction, where the body and the mind can no longer process the daily ritual of drug use and dependency. This once-rational actor was now strung-out on the worst drugs made by man, and he was still in charge of the Nazi party and the Third Reich, and the decisions he was now making would change the world forever. I would argue, as I have, that Hitler was at the point where he could no longer be referred to as a rational actor. And this non-rational actor which he had become was no longer able to lead, yet still in charge of the entire Third Reich. His hands-on

punishment techniques, where he handed out death sentences to anyone who disagreed with him and labeled them as traitors to the Reich, had insured that those who might otherwise step in and take over his role as leader were coerced into standing down, for fear of losing their own lives.

Though historians have told the same stories in hundreds of publications over the years, the last days of Hitler did not involve a fully accurate chronological list of events which caused the German empire to fall by the end of WWII. By all accounts the twisted strategies proposed by Hitler in his final stint of rule gives us an inside view into the desperate moves of a leader addicted to drugs, hiding from the destructive creation he built, in an elaborate bunker deep underground in Berlin, as the Third Reich fell apart before the eyes of the world (Fest, 2005). Despite the goals here, I would argue there can be no credible theory in which Hitler was thinking rationally at this point. In fact, he was so doped-up towards the end of the war that even his personal physician Dr. Morell was finding it hard to locate a workable vein anywhere on Hitler's body, in which to inject more drugs, in any attempt to keep the man mobile and alert (Junge, Gertraud, Müller, and Bell, 2005). To this end, Hitler was no different than any other matured junkie. The common choice of the addict is to quit using or die while using, and Hitler's body was succumbing to years of drug addiction, and any continued use could be correlated as a death wish. But Hitler's promise to his countrymen, from his own words in *Mein Kampf*, was that the Nazi party would provide a glorious victory or be responsible for the defeat, with a fight to the death (Trevor-Roper, 2014). At this time, and in the face of imminent defeat, Hitler really had nothing to live for anyway. He had spread his armies so thin that there was no united front and his enemies, whose countries he had invaded, destroyed,

and looted, were mounting offenses, along with the United States, straight into his command center in Berlin.

On the night of December 19<sup>th</sup> 1944, Hitler ordered Dr. Morell to serve him liver and Pervitin (meth) after dinner. Liver was in reference to the hormone-rich animal liver that was a part of Hitler's intravenous concoctions (Ohler, 2016). Though it's not clear exactly when Hitler switched from cocaine to methamphetamine, this is compelling evidence written into Dr. Morell's personal diary which should be considered as proof that Hitler was now openly aware of at least some of the drugs he was taking daily. I would argue that it was the methamphetamine model which should be considered as the catalyst for Hitler's own, personal race-to-the-bottom, which would explain the inconsistencies with human nature and logic in his final moves as the Nazi leader. There is no rational thinking in the mind of a meth addict and the Nazi grand-finale was a despicable display of rational, defined by a leader addicted to mind-altering drugs.

On February 3<sup>rd</sup> 1945, The Red Army bombed Berlin and thousands of civilians died. But that wasn't the biggest problem for Hitler, as supply lines were cut off and the pharmacy where his doctor had been getting his drugs was buried in rubble. The bunker was running low on most medications and it seemed that the abilities to restock were not an option. It becomes hard now to distinguish whether the final days of Hitler were so erratic because of the drugs he was taking or because there were no more drugs and Hitler was going through withdrawal, suffering the horrible pains similar to the street junkie who can't find a fix, but nonetheless Hitler's thought processes were definitely hindered. By March 1945, there were no narcotics left to give the Fuhrer and the daily vitamin doses were running out as well. Hitler was dying on the inside as his country was

bleeding all around him. Much like the drug addict he was, his final orders were from the twisted mind of a meth addict, and the selfish antics of a child who would rather destroy his toys than hand them over to someone else in defeat.

On March 19<sup>th</sup> 1945, as the borders to the capital city were shrinking and defeat appeared inevitable, Hitler ordered what was to be called the Nero Decree; the complete destruction of Germany. With the twisted thinking of this now non-rational actor, Hitler had decided that he would not let the invaders loot his country as he had done to theirs. He ordered his soldiers to destroy everything of value in Germany, leaving nothing behind for the citizens. He had decided that the citizens could fend for themselves, even though by destroying over 100 bridges which led in and out of Berlin would force his people to starve, he believed the nonmilitary citizens were a part of the Reich anyway and should suffer the same fate as his soldiers. Hitler believed that invading forces would loot and burn all of the property anyway, and that after they left, there would be nothing but scorched earth, so he ordered the destruction of Germany with the understanding that Germans would have to build from the ground up anyway. Hitler ordered the destruction of all military transportation and communication facilities, all industrial buildings, supply depots, and anything else of value within the Reich's territories (Minerbi, 2005).

On April 16<sup>th</sup> 1945, the direct assault on Berlin began and Dr. Morell was succumbing to his personal drug addictions as well, and he was shaking so much that he wasn't able to provide any relief to Hitler, though all he had left was caffeine anyway, and Hitler, in a rage and suffering from extreme withdrawal symptoms, fired Dr. Morell and ordered him to leave the bunker. Hitler had told Dr. Morell that he wanted to leave all men of history behind him and that he wanted to be remembered as the greatest, even

if all of the ordinary people of Germany died in the process. Hitler's generals had begged him to negotiate a deal with the invading forces to surrender, but Hitler wanted no part in saving what little of his country was left. He said that the mere thought of politics at this point repels him (Ohler 2016). When the other German officers fled Berlin, Hitler stayed behind and as invading forces closed in on him and his girlfriend Eva Braun, they were hastily married and later, they both committed suicide rather than be caught. In Hitler's final political move, he signed a testament in which he blamed the Jews for the entire events of the war saying they were 'the eternal poisoners of the world' (Rosenbaum, 2014). This statement as well, Hitler's final remarks before taking his own life, personifies the moves of a non-rational actor, addicted to mind altering drugs.

## **Conclusion**

Despite all of the facts laid out in this paper about tragic historical events which incorporated drug abuse, methamphetamine use is still on the rise in today's drug cultures. Created by state actors in Japan pre-WWI and distributed throughout Japanese society and to the troops of the Japanese Imperial Army, methamphetamine was ill-conceived and has spread like a disease. When it entered into German society, it was a cure-all for the woes of a wounded nation, but we now know that the drug itself, along with the actors who consumed it, were the vehicles which steered so many millions of people into their graves. From the laboratory in Japan where it was created, to the battlefields in the Middle East where ISIS troops are abusing meth to this very day, tragedy has unfolded because of the disordered minds this drug scrambles in an instant,

resulting in non-rational actors doing despicable crimes to other humans, for the sake of illusion.

Though understanding state actors as being 'rational' is the fundamental opener for most political science research, the 'non-rational actor' explanation is mysteriously void from most conversations. Only through psychological studies on the natures of man do we find the simple explanations, where a non-rational human is one who's behavior doesn't represent his own attitude, or that the irrational actor is one who thinks mindlessly (Bordens and Horowitz, 2014). Despite these determinations and how they so easily encompass the rationalities of Adolf Hitler towards the end of the war, along with the ordinary men who 'mindlessly' killed millions of Jews based on irrational reasoning, state actors are all too often labeled as being 'rational' with no indication as to what would be involved in any explanation which would require the retagging of an individual as being non-rational. I would argue, as I have, that any actor abusing the drug methamphetamine, as supported by this thesis, is non-rational by design. For these reasons, you will not find academic research which would dare to label an actor abusing methamphetamines as being rational...yet there is no available platform for determining such a label, though I would argue that drug addiction seems like the most plausible explanation to be considered.

The approach of this thesis was to lay out a case where the new information acquired from the release of millions of documents from the *Nazi War Crimes Disclosure Act* gives credence to the rumors which have been floating around since WWII, that the Holocaust may have been drug related. This research clearly makes the case that methamphetamine use in the pill form of Pervitin was massively disseminated throughout

German society and to the soldiers of the Third Reich during the Second World War. We know as fact that during this period millions of people were murdered or otherwise killed, including the more than 6 ½ million Jews who died in the Holocaust. We have thoroughly discussed the ramifications of meth use and the effects the drug has on the human mind and spirit, and I have addressed the changes that long-term meth addiction has on the thought processes of the human mind. However, knowing that there is a correlation between heavy meth use by the soldiers who carried out the events of the Holocaust and the deaths of millions of people is never going to be enough to infer causation, but adding this series of events to the historical record is an important step of clarification needed to assist both German society and members of the Jewish communities around the world, in search of reconciliation for purposes of understanding, and hopes of forgiveness, and eventually, some form of closure (Leebaw, 2011).

Some believe that it would be quite a leap to assert that meth use had anything to do with the execution of millions of Jews during the Holocaust. In Danial Goldhagen's book *Hitler's Willing Executioners*, Goldhagen sticks to his theories that Hitler's plan to exterminate the Jews came directly from his book *Mein Kampf*, which proves that the murders were premeditated and could have nothing to do with the meth addictions of his troops, which occurred after the masterplan was already conceived. When the killing of the Jews started, Goldhagen believes they were just carrying out the plans that Hitler had already laid out, and therefore just doing what they had already planned to do. This thesis wholly disputes Goldhagen's claims by citing proof that the Final Solution was penned at a much later date, after Hitler's drug addiction had already kicked in and changed his

thought processes, which would make the extermination of Jews an order declared by a non-rational actor, fully addicted to mind altering narcotics.

Other scholars have also questioned the reference to meth use by the German forces as being a possible cause of the Holocaust. In Sterling Braswell's book titled *American Meth: A History of the Methamphetamine Epidemic in America*, Braswell argues that Goldhagen's statements about the Holocaust being an organized and calculated act of terror, was a huge overstatement. But Braswell is also quick to point out that declaring the horrors which surrounded the killings as "mere meth-inspired rampages" as being problematic as well (Braswell, 2005).

I would argue that Braswell has yet to expand his research into the drug cultures of the world...because he appears to have no real understanding of what 'meth-inspired rampage' entails. The case has been clearly laid out here that the drug culture in Germany post-WWI enveloped the entire nation and was baked-into-the-cake of the many battles fought by the German's during WWII as well. This thesis has provided evidence that Germany's leaders were responsible for the dissemination of meth pills to its troops on the front lines, and to those ordinary people in charge of killing the Jews in the Holocaust. I've suggested correlations between meth use and the mental properties it would require of a man to kill Jews and, I would argue, this proves that the devastation caused by the German war machine and the deaths of over 6 ½ million Jews in the Holocaust were indeed drug related.

However, the sheer magnitude of the damage created by humans because of their meth-inspired thought processes can never be gaged, as finding proper evidence on



causation for such events will always be meta-theoretical, far from any real numbers game. The principles of theory have always involved philosophical elements and in this case, I would argue that developing a stance involving projected threats to mankind would be in the realm of this discussion, for future generations to ponder. Aside from environmental doomsday predictions attributed to scientific evidence of man-made global warming, others would cite nuclear proliferation as being the biggest threat to mankind, but the fact of the matter is that both of these arguments rely on predictions of future actions and reactions, where those lives taken have yet to prove their own concepts (Belavadi, Karaba, and Gangadharappa, 2017). For instance, though we can prove most of the actual deaths of those killed when the United States dropped two atom bombs on Japan at the end of WWII, estimated casualties in lives lost (200,000 to 300,000) pale in comparison to the known and provable 6 ½ million humans who lost their lives in the Holocaust, let alone those killed by actors addicted to meth throughout the entire war (Walker, 2016). My intent is not to minimize the possibility that these other events may turn catastrophic at some time in the future, but to maximize the world view on this crisis which is in our midst at this time, and still ongoing.

I would implore historians involved as the record keepers of wars past to reconsider their positions and to enter these important facts into the record books as not only being actual events which occurred during the time of the Holocaust, but that they be worded in such a way where they would lean towards the inclination which provides for the definition of causation, in an attempt to conclude, as I have argued, that the Holocaust was absolutely (or at least in part) the result of methamphetamine abuse. And I would conclude that enough time has gone by now for our current societies to take a hard

look backwards into the historical value of methamphetamine use and abuse...so that we don't let this drug abuse continue without consciously reflecting the atrocities we've dedicated ourselves to ignoring...and the fact that this single drug, which has purposely or inadvertently, in effect, killed countless millions of human beings with no consideration that it was even a part of the cause...and that this synthetic drug methamphetamine, invented by man, may very well be the single biggest threat to mankind.

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