

Ilya Mark Scheinker: Controversial Neuroscientist and Refugee From National Socialist Europe

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ABSTRACT: Russian-born, Vienna-trained neurologist and neuropathologist Ilya Mark Scheinker collaborated with Josef Gerstmann and Ernst Sträussler in 1936 to describe the familial prion disorder now known as Gerstmann-Sträussler-Scheinker disease. Because of Nazi persecution following the annexation of Austria by Nazi Germany, Scheinker fled from Vienna to Paris, then after the German invasion of France, to New York. With the help of neurologist Tracy Putnam, Scheinker ended up at the University of Cincinnati, although his position was never guaranteed. He more than doubled his prior publications in America, and authored three landmark neuropathology textbooks. Despite his publications, he was denied tenure and had difficulty professionally in the Midwest because of prejudice against his European mannerisms. He moved back to New York for personal reasons in 1952, dying prematurely just 2 years later. Scheinker was twice uprooted, but persevered and eventually found some success as a refugee.

RÉSUMÉ: Ilya Mark Scheinker, un spécialiste des neurosciences et un réfugié de l'Europe nationale-socialiste controversé. Ilya Mark Scheinker était né en Russie et il avait fait ses études de neurologie et de neuropathologie à Vienne. Il a collaboré avec Josef Gerstmann et Ernst Sträussler en 1936 pour décrire la maladie familiale à prions connue maintenant sous le nom de maladie de Gerstmann-Sträussler. En raison de la persécution Nazi qui a suivi l'annexion de l'Autriche par l'Allemagne nazie, Scheinker a fui Vienne pour s'établir à Paris puis à New-York après l'invasion de la France par l'Allemagne. Avec l'aide de la neurologue Tracy Putnam, Scheinker s'est fixé à l'Université de Cincinnati, bien que sa position y soit demeurée précaire. Il a plus que doublé ses publications antérieures alors qu'il était aux États-Unis et il a écrit trois manuels fondamentaux de neuropathologie. Malgré ses publications, on lui a refusé un poste universitaire et il a éprouvé des difficultés professionnelles dans le Midwest en raison de préjugés envers son maniérisme européen. Il est retourné à New-York pour des raisons personnelles en 1952 et il est mort prématurément 2 ans plus tard. Scheinker, bien que deux fois déraciné, a persévéré et il a éventuellement obtenu un certain succès comme réfugié.

Keywords: history, Nazi Europe, neuroethics, neuropathology, prion, Scheinker

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INTRODUCTION

When the original clinical-pathological description of what is now known as Gerstmann-Sträussler-Scheinker disease (GSS) was published in 1936,¹ author I. Mark Scheinker (1902-54) (Figure 1) only used his first initial "I" instead of his full name "Isaac," because his Jewish-sounding name would have likely prevented its publication in a German journal at the time.* The Nazi Editor's Law (*Reichsschriftleitergesetz*) of October 1933 not only stated that journal editors had to be "Aryan," but also largely prevented Jewish doctors from publishing their works in German books or journals.² This was one of many laws passed by the Nazi government to systematically marginalize the approximately 8000 to 9000 "non-Aryan" (baptized Jews, *Mischlinge* [part-Jews], and other minorities) and communist physicians in Germany and remove them from professional life.³ The lives of all three GSS authors, along with many other racially and politically persecuted Viennese neuroscientists, dramatically changed on March 13, 1938,

following the *Anschluss* (forced annexation) of Austria by Nazi Germany.** Additionally, neurology and psychiatry were not typically distinct until after World War II, separating when diagnostic and therapeutic advancements in neurology made it a more clearly distinct and viable specialty to practice separately

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**For convenience, Scheinker and other neurologists will sometimes be referred to throughout the paper as "neuroscientists," a term that actually did not originate until the early 1960s with the creation of the Neurosciences Research Program in which neurology, neurophysiology, neuroanatomy, neurochemistry, psychology, psychiatry, physics, immunology, and chemistry experts met to study normal and pathological neurologic functions in an interdisciplinary fashion [see Adelman GE. Encyclopedia of neuroscience. Basel; Birkhauser Verlag AG; 1987].

*Scheinker has been referred to as Isaac, Isaak, Isak, Ilya Mark, Ilya, Ilya M., or Mark I. in various letters and publications.



Figure 1: Ilya Mark Scheinker, unknown year, from the collection of the National Library of Medicine. Images from the History of Medicine Collection, order number B023246, portrait number 106114. Available from: https://ihm.nlm.nih.gov/luna/servlet/view/search?QuickSearchA=QuickSearchA&q=scheinker&sort=title%2Csubject_mesh_term%2Ccreator_person%2Ccreator_organization&search=Search. This work is in the public domain.

[see: Janzen R. Teaching neurology in Germany. *Int J Neurol.* 1977;11:280-8]. At this time, Austrian Jewish physicians were subjected to all the legal and illegal marginalization and harassment

their German colleagues had experienced since 1933.³ Scheinker fled twice from Nazi Europe before ending up as a neuropathologist and neurologist in Cincinnati, Ohio. Though relatively successful in exile, his career was undoubtedly affected by his tribulations in Nazi Europe and the strife he faced later as well. There has never been, to our knowledge, a comprehensive description of Scheinker's career or his victimization following the *Anschluss* in the neuroscience or medical literature. The 75th anniversary of the *Anschluss* was in 2013, thus an analysis of its aftermath on this neuroscientist refugee from Austria seems timely. We analyze Scheinker's career before and after the *Anschluss*, and attempt to frame his life in the context of Nazi physician persecution and forced migration (Table 1).

METHODS

We researched primary documents from the University of Cincinnati Winkler Medical Library Archive Files (Charles D. Aring papers), Notre Dame University Archive (Joseph P. Evans papers), the Ohio State Medical Board files, the US National Archives, and primary and secondary articles by or about Scheinker. We were also aided by the New York Academy of Medicine. We were informed by the University of Vienna, the Austrian State, and the Vienna Municipal Archives, along with the Salpêtrière archives (Service des archives de l'AP-HP, Paris) that they have no files on Scheinker.

RESULTS

Scheinker was born in Klemboki, Russia (Moscow was also listed on his later application to the American Neurological Association; of note, his 1929 Medical Diploma from the University

Table 1: Ilya Mark Scheinker (1902-1954): displaced twice in Nazi Europe but finds some success in America

Years	Location and roles	Notes
1913-29	High school in Riga (1913-21); followed by medical training in Riga (1921-22); Jena, Germany (1922-24); and Vienna (1924-29)	Born in Klemboki, Russia; not much known about his childhood or youth
1929-33	Medicine intern in Vienna General Hospital (1929-30); further training at the MTS under Emil Redlich and Josef Gerstmann and under Otto Marburg at the Viennese Neurological Institute (1930-33)	Develops his primary interests in MS pathophysiology, brain tumor pathology, and epilepsy diagnosis and treatment, but also encephalitis and myasthenia gravis
1933-38	Assistant professor at the MTS under Gerstmann and heads the Neuropathology Laboratory (1932-37); assistant professor and Instructor in neuropathology under at the University of Vienna Neurology Clinic (1937-38)	Codescribes GSS disease in 1936; by 1938, Scheinker had already published 27 papers, including a 1935 paper with Ernst Strüssler on MS pathology
1938-41	After the March 13, 1938 <i>Anschluss</i> , Scheinker flees for France; research assistant at the Salpêtrière in Paris under Georges Guillain (1938-39). In 1940, after the German invasion of France, he fled to New York in 1941	At the Salpêtrière, Scheinker still published at least six papers in the Swiss journal <i>Monatsschrift für Psychiatrie und Neurologie</i> from 1939 to 1940
1941-47	After a half-year jobless in the United States, Scheinker became an instructor in pathology at the University of Cincinnati Medical School and neuropathology head at CGH (partly RF funded); 1946 obtained US citizenship and promoted to assistant professor; obtained his Ohio medical license in 1947	Tracy Putnam, vice chairman of the National Committee for Resettlement of Foreign Physicians in New York, helped Scheinker by introducing him to Charles Aring and Joseph Evans from Cincinnati; Scheinker obtained position and kept it despite recruitment of at least four other neuropathologists; Scheinker published 28 publications from 1941 to 1947
1948-52	Scheinker's university salary was only guaranteed until 1948, and he was unable to build an MS brain bank, frustrated by lack of recognition academically; opened a private practice and attracted patients from across Ohio with therapeutic hypertension for MS and "total push" methods of rehabilitation	Published three neuropathology textbooks from 1947 to 1951; his MS treatment was a precursor to modern highly controversial ideas on chronic cerebrospinal venous insufficiency in MS and venoplasty procedures to treat it; Scheinker suffered an MI in 1950, and after a divorce he moved back to New York
1952-54	Scheinker opened a practice at 972 Fifth Avenue; obtained teaching positions at New York Medical College, and at Flower and Fifth Avenue, Bellevue, and Montefiore Hospitals	Gave a talk on vasoparalysis in MS to the New York Academy of Sciences and the National MS Society in April 1953; Scheinker more than doubled his number of publications post- <i>Anschluss</i> , in addition to the textbooks he solely authored; his continued success was likely secondary to youth, motivation to establish himself in American neuroscience, and because of lack of job security in Cincinnati

CGH = Cincinnati General Hospital; MI = myocardial infarction; RF = Rockefeller Foundation.

of Vienna lists Klemboki as being in Poland), and little is known of his early years beyond spending 8 years of high school in Riga (present-day Latvia) from 1913 to 1921. He then completed 1 year of medical training in Riga (1921-22); 2 years of medical training at the University of Jena, Germany (1922-24); and 5 years at the University of Vienna Medical School, graduating June 23, 1929.⁴ After a year in Vienna's General Hospital as a medicine intern in 1929-30, he completed training at the Viennese *Nervenheilstalt Maria-Theresia-Schlössel* (MTS Neurological Institute) and worked under Otto Marburg (1874-1948; who described Marburg variant acute multiple sclerosis [MS]) at the Viennese Neurological Institute for 3 years. (The MTS Neurological Institute, actually named the Nathaniel Freiherr von Rothschildschen Stiftung für Nervenkranken–Nervenheilstalt Maria-Theresia-Schlössel [The Nathaniel Freiherr von Rothschild Foundation for the Mentally Ill–Mental Hospital Maria-Theresien-Schlössel], was founded in 1914. In 1939, with Vienna's Nazification, it was renamed Wiener Städtische, nicht öffentliche, Heilanstalt Döbling [Vienna Municipal Private Mental Hospital Döbling] to avoid connections to the Jewish Rothschild family [see: Schnaberth G. *Die Neurologie in Wien von 1870 bis 2010*. Wien; MEMO: 2010: 129-131.] Scheinker was an assistant at the MTS under co-GSS author Josef Gerstmann (1887-1969), heading the neuropathology laboratory from 1932 to 1937. From May 1937 to March 1938 he was an assistant and instructor in neuropathology under Otto Pötzl (1877-1962) at the University of Vienna Neuropsychiatric Clinic.⁵ Scheinker's interests included MS pathophysiology, brain tumor pathology, and epilepsy diagnosis and treatment, though he also published about encephalitis and myasthenia gravis. By 1938, Scheinker had published 27 papers, including a 1935 paper with fellow GSS author and pathology head at the University of Vienna's Neuropsychiatric Clinic Ernst Sträussler (1872-1959) on MS pathology.⁶ One month before the *Anschluss*, Scheinker presented a paper to the Viennese Association of Neurology and Psychiatry on the histopathology of brain tumor-associated edema and swelling, published later that year,⁷ and was listed as associated with the MTS despite working in Pötzl's University Clinic at that point.

In June 1935¹ in Vienna, Scheinker, along with Gerstmann and Sträussler, presented the case of a 25-year-old female from a southern Austrian family who had begun experiencing profound cerebellar and psychotic symptoms 9 years earlier. Gerstmann had previously published her case,⁸ but when she later died, a clinical-neuropathological correlation was possible. Her neuropathological examination revealed significant cerebellar atrophy with molecular layer "senile" plaques, along with cerebral cortex atrophy and atypical ganglion cells. The disorder was thought to be autosomal dominant because the patient had come from three generations who had similar symptoms.¹ Another member of the same family presented in Vienna in 1912 and was misdiagnosed with a hereditary spinocerebellar ataxia,⁹ but the clinical-pathological correlation had not been demonstrated before 1935. Despite the fact that the GSS codescription was likely Scheinker's most significant lasting contribution to neurology, he did not list it on his condensed curriculum vitae as part of his 1947 application to become a member of the American Neurological Association (ANA).⁵ Perhaps he did not realize its impact or relevance. GSS was noted to be clinically and neuropathologically similar to kuru (the classic spongiform dementia seen in New Guinea cannibals) in 1962.⁹ Likely because the original GSS family members were lost to follow-up and misdiagnosed with other disorders, the

discovery of the similarity between GSS and Creutzfeldt-Jakob disease, and its classification as a transmissible spongiform encephalopathy, was delayed until 1981.⁹

Scheinker Flees Nazi Europe, Twice

A "search for Jews" by a German nationalist student group at the University of Vienna in 1923 marked the first physical anti-Semitic violence at the medical school. By 1933, there were demands for boycott of Jewish professors and for a quota for Jewish students.¹⁰ Many Austrian intellectuals disregarded daily Nazi violence,¹¹ and few neuroscientists emigrated before 1938. After the *Anschluss*, at the University of Vienna clinic and other hospitals, 77.5% of Vienna medical faculty members were dismissed (153 of 197). Of these 153, four were dismissed for political reasons, 118 for "racial" reasons (e.g. Jewish), and 14 merely because of "unclear origins."¹⁰ Ninety-two percent of neurology/psychiatry and neuropathology faculty were dismissed,¹² making them the hardest hit specialties. Vacant spots were soon taken over only by loyal Nazi and *Schutzstaffel* (SS, "elite" Nazi paramilitary wing) members,¹³ such as Nazi and SS member Walther Birkmayer (1910-1986, later codiscoverer of levodopa for Parkinsonism in 1961). Birkmayer was praised for having "provided the completely Jew-infiltrated Psychiatric Clinic with reliable illegal physicians shortly before and especially after the [*Anschluss*]," thereby contributing significantly to the "de-Jewification policy" at the clinic (Nazi party membership was illegal in Austria until after the *Anschluss* in 1938).¹⁴ By 1945, at least 11 Austrian and Czech neuroscientists were murdered or imprisoned in concentration camps.^{3,15}

Scheinker's whereabouts during the *Anschluss* are unknown, as is his escape route from Austria. He fled to Paris and worked as a research assistant at the Salpêtrière from 1938 to 1940 under Professor Georges Guillain¹⁶ (1876-1961, codescriber of Guillain-Barré syndrome). Despite the Nazi Editor's Law being in effect in annexed Austria, three more Scheinker papers were allowed to be published in 1938^{7,17,18}; this is likely due to Scheinker's use of his first initial again only, or journal editors ignoring Nazi laws and using leeway to continue to publish articles by Jews. During his time at the Salpêtrière, Scheinker was still able to publish at least six papers in the monthly Swiss journal *Monatsschrift für Psychiatrie und Neurologie* from 1939 to 1940.⁵ Documents are mostly silent on when and how Scheinker fled France following the German invasion in May 1940 or what tribulations he had to overcome. He lived in Marseille, France, before his voyage to the United States, and took the *SS Nyassa* from Lisbon, Portugal, arriving in New York City on April 25, 1941.¹⁹ He settled in the Bronx, living at 1814 Phelan Place.¹⁶ On his 1942 declaration of intent to become an American, he listed his present nationality as Russian.^{19,*}

Scheinker as a Refugee, Still Alive but Facing Many Professional and Personal Difficulties in Exile

After Scheinker arrived in New York in 1941, apparently physically unharmed by his flight from German-occupied France, it took him a half-year to find a position as a neuropathologist in the United States. However, he had wasted little time in seeking

*Scheinker was born in Russia, thus had Russian citizenship. Although he had lived in Austria for 14 years, it is unclear from the records whether he had Austrian (German after the *Anschluss*) citizenship.

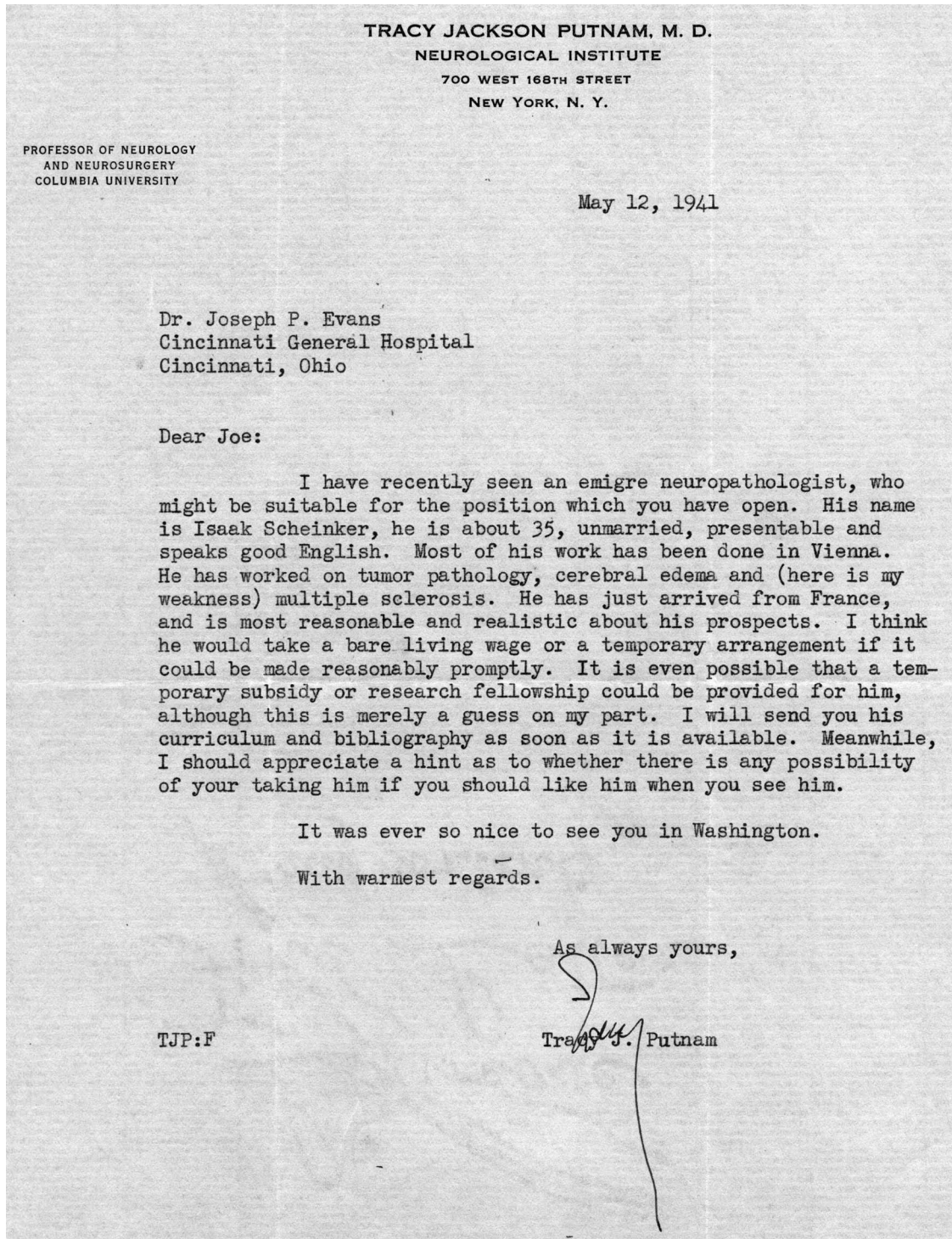


Figure 2: Tracy Putnam letter of May 12, 1941, recommending Scheinker to Dr. Joseph Evans, neurosurgery chief at Cincinnati General Hospital. Published with permission from the University of Notre Dame Archives.

help from Tracy Jackson Putnam (1894-1975), the famous American neurologist and codiscoverer of phenytoin treatment for epilepsy in 1938.²⁰ Putnam took a strong interest in the plight of immigrant physicians to the United States from Nazi Europe, being vice chairman of the National Committee for Resettlement of Foreign Physicians in New York.²¹ Putnam wrote a letter

(Figure 2) to Cincinnati General Hospital Neurosurgery Chair Joseph P. Evans (1904-85) on May 12, 1941, stating:

I have recently seen an émigré neuropathologist who might be suitable for the position which you have open. His name is

Isaak Scheinker, he is about 35, unmarried, presentable and speaks good English...He has just arrived from France, and is most reasonable and realistic about his prospects.^{16p.1}

Throughout May, Scheinker corresponded with Cincinnati Neurology Chair Charles D. Aring (1904-98), and he finally met with Aring and Evans to discuss the open neuropathology post at Cincinnati at the June 1941 ANA meeting in Atlantic City, New Jersey. On August 8, 1941, Scheinker was appointed for 1 year as neuropathologist at Cincinnati General Hospital to start October 1, 1941, and as “instructor of pathology” at the University of Cincinnati College of Medicine. He finally reattained the teaching rank he had held in Vienna when he was exiled 3 years prior. Scheinker took the spot vacated by Murton Shaver (unknown-1959) who rotated at Cincinnati as a neuropathologist in 1940-41 even though he was based at the Montreal Neurological Institute.¹⁶ Scheinker, without other options, eagerly accepted this 1-year appointment given Evans’ rationale that the position would “...give you more time to look about the country and might conceivably lead to a more permanent opening here.”^{16p.6}

Scheinker’s neuropathology appointment seems to have been quite calculated, and his position was never guaranteed.¹⁶ Because of a shortage of neuropathologists, there had been multiple attempts to fill the opening at Cincinnati before Scheinker was hired. Evans had a personal friendship with another refugee neuropathologist and neuropsychiatrist from Europe, Karl Stern (1906-75, author of *Pillar of Fire*), who was on staff at the Montreal Neurological Institute where Evans trained in neuropathology (and Evans was friends with Chairman Wilder Penfield [1891-1976]).²² Stern was offered the post of neuropathologist in Cincinnati in 1940 but was unable to accept the position there because his Canadian citizenship was in limbo, and he still needed to bring his parents over from England to Canada, which he believed he would not be able to do if he moved to the United States. Moreover, the clock would start again and he would have to wait another 5 years for citizenship.²² Additionally, in 1940, Aring and Evans tried to bring German neuropathologist Hans J. Scherer (1906-45), then at the Bunge Institut for Cancer Research in Antwerp, Belgium, to Cincinnati, but their attempts to acquire a visa for him failed.²³ Aring and Evans also were interested in retaining Shaver, but Shaver was not permitted by Penfield to stay in Cincinnati, despite special requests from Evans, nor was he able to come back in 1942 as Evans and Aring had planned.²⁴ Additionally, Aring wanted a former Cincinnati neurology resident Ephraim Roseman (1913-89), who had worked in the neuropathology laboratory in 1939-40, but who was then finishing his studies in Boston, to be offered the spot in 1942, writing, “Then, if neither Stern or Murton can be obtained we can worry along with Scheinker until Eph will be available.”^{24p.10} But “Eph” did not take the position then, possibly because of military service or because he wanted to remain in Boston.²⁴

Thus, after several months in limbo, Scheinker was finally offered the position at Cincinnati and was able to keep it even after the provisional 1-year contract was up. The semi-obsequious letters from him to Aring and Evans clearly express his joy at this remarkable stroke of luck.¹⁶ Evans’ correspondence with Stern, however, indicates that he always preferred Stern, and he repeatedly made gestures to him to come to Cincinnati, given that Scheinker’s appointment was year-to-year and never permanent.²² His position was funded at least initially by Evans and Aring’s Rockefeller Foundation grant,



Figure 3: Charles D. Aring (back row, left), Joseph P. Evans (back row, middle), I. Mark Scheinker (back row, right). Cincinnati General Hospital neurological-neurosurgical picnic at the Evans farm in Newtown, Ohio, June 2, 1945. Published with permission from the Henry R. Winkler Center for the History of the Health Professions, University of Cincinnati Medical School.

and in addition to being a neuropathologist, Scheinker attended on the neurology ward for 2 months out of the year.^{16,25}

Despite others’ skepticism, Scheinker proved himself by the war’s end and may have been the most successful in exile of all three GSS coauthors. He became a member of the American Association of Neuropathology, Association for Research in Nervous and Mental Disease, and the Cincinnati Society of Psychiatry and Neurology. In 1946, he obtained his US citizenship, stating beforehand in a letter to Aring:

In two weeks I am going to be an American. What a happy and long anticipated day! My ambition is to be one of the best Americans and to repay to this country for all that I found here. I shall never forget it as long as I am alive!^{5p.36}

Also making 1946 a happy year, Scheinker was married⁵ to a newspaper reporter named Mary Matthews, who along with Jacob Plaut, an industrial consultant, provided affidavits on his naturalization certificate (Matthews and Plaut had known Scheinker since November 1941).¹⁹ Also in 1946, Scheinker found out that his two sisters in Moscow had survived the war, after not having heard anything from his family in Europe in 5 years.⁵ Scheinker had many successful years in Cincinnati (Figure 3). His 1947 ANA member application lists 62 published papers.⁵ Because his 1941 curriculum vitae lists 34 publications, this would mean he published 28 papers in 6 years in the United States, with 10 alone in 1943.¹⁶ He also authored three landmark neuropathology books, published from 1947 to 1951. The first book contains a foreword by Putnam, and Scheinker dedicated the book to “My beloved country, the United States of America.”²⁶ He dedicated the second book to his wife, who had assisted him greatly.²⁷ On the title page of the third book, he lists two new affiliations, one as consulting neurologist at the Fort

Thomas, Kentucky, Veterans Administration Hospital, and the other as consulting neuropathologist for the Public Health Service in Lexington, Kentucky.²⁸ In November 1946, Evans recommended Scheinker for promotion to assistant professor of neuropathology. The next year, Scheinker obtained his Ohio medical license with support from Evans and Aring.¹⁶ On learning of his licensing, Aring, who was 2 years younger than Scheinker, wrote:

I was glad to learn Mark made it through his State Board examinations all right...It must have represented a rather rigorous effort for him, I know I shouldn't like to do likewise in Vienna or Breslau at my age.^{24p.2}

Scheinker wrote to Aring:

The acquired license gave me a wonderful feeling of security and independence. And yet I can't help thinking that my real place is not in the office 'doing good business' but in the medical school in a teaching position.^{5p.54}

Scheinker considered his "real contribution" to be his combination of clinical neurology and neuropathology, which he believed carved him out a "distinct" place as a teacher.^{5p.54}

But Scheinker faced setbacks that eventually drove him from the Cincinnati Medical School. Before securing his promotion and salary guarantee until 1948, he expressed "depression" about his career "uncertainty" and began to look for jobs elsewhere, claiming his "personal life [was] more satisfactory than [his] professional."^{5p.28} In a letter to Aring, he sarcastically wrote of his "real friends" in the "unwholesome" Cincinnati denigrating his clinical neurology skills and stating he was only skilled in the laboratory and should not be promoted to an assistant professor of neurology, to which he replied, "My 20-year long experience in clinical neurology is apparently of no value at all!"^{5p.32} He also wrote that he "was discouraged and disgusted by all the personal intrigues" and needed "a more stimulating and encouraging atmosphere" to work on his third book.^{5p.34} Scheinker's assistant professorship lacked tenure and was only guaranteed until the end of the academic year, 1948. He planned to open a neuropsychiatry private practice in 1947-48, despite that not being the role in which he envisioned himself.¹⁶

Evans tried to help Scheinker obtain referrals and wrote a recommendation letter to the Ohio Workmen's Compensation Board that he was fully qualified to evaluate referrals, and would be entering part-time practice in 1947. But Evans rejected Scheinker's request in 1947 to establish an MS brain and spinal cord registry in the neuropathology laboratory, mainly because Scheinker was leaving in 1948. Evans thought they needed the laboratory space for other projects and personnel. Scheinker protested, claiming he was assured of the funding.¹⁶ Even before this rejection, Scheinker stated to Aring that at the first meeting of the Medical Advisory Board of the Foundation for Advancement of Research on Multiple Sclerosis in New York, he had garnered wide support for this proposal to centralize MS pathological tissue from all over the country to facilitate research projects. He stated that funds were available and he was encouraged to write a memorandum detailing his proposal, and that he just needed the laboratory space and a technician and secretary, but that "Unfortunately I do not have much to say in Cincinnati. I am still

treated here as a laboratory technician....!"^{5p.55} Beside not feeling as if he had equal respect and status as other neurologists in the department, not obtaining tenure, and not being able to establish his MS registry, Scheinker's ANA application was not approved, despite being supported by Aring and Putnam along with three others. Aring told Scheinker that the chances had been slim because no memberships were given during the war, and membership was capped at 200, with new members being elected only when another passed away.⁵

Though not exactly what he wanted for his career, Scheinker's private practice at 1106 Cross Lane in Cincinnati was successful to some extent. His MS treatments drew many patients from across Ohio. His theories centered on a clinical-pathological correlation that he praised.⁵ He believed therapeutic blood pressure elevation could counteract vasoparalysis of the small veins and capillaries that causes poor flow and thrombogenesis, to prevent MS progression. This theory was recently resurrected with controversial ideas on chronic cerebrospinal venous insufficiency in MS and venoplasty procedures to treat it.²⁹ In his last publication in 1954, Scheinker detailed how 66.7% of his 237 patients had a partial or complete recovery from MS, and this was correlated closely with increased arterial blood pressure and flow. He noted that because of spontaneous remissions in MS, the "tendency to improvement or alleviation – must be appraised, not without a just proportion of skepticism."^{30p.590}

A recommendation letter from Aring on behalf of Scheinker to New York neurologist Israel S. Wechsler (1886-1962) in 1952 summarizes that, although Scheinker diligently built a "large following" and filled a need in the Cincinnati community especially for patients with chronic disorders such as MS "while others have largely shunned or neglected this type of patient," he made enemies who did not appreciate his success.* Scheinker's success with these "chronic" patients seems related to his "total push" methods in rehabilitation that he found to be rewarding.^{5p.13} Aring further commented the following:

Like any of those physicians who have come to us from abroad, he is a controversial figure. There is something about medical training that I will call 'German' for want of a term to cover it, that sets these people apart from us.^{5p.13}

Aring mentioned that he understood someone like Scheinker better and got along well with him (especially since Aring had trained partly in Europe), even though Scheinker manifested the "detached from certain feelings" persona that many could not tolerate. Aring wrote how someone like Scheinker could be useful with "guidance," and though his approach was unorthodox and anxiety-inducing because it was new, he could offer "a different slant to neurological problems." He concluded "that since [Scheinker] left our Laboratory of Neuropathology it has not been the same place, candidly all the life has gone out of it."^{5p.14}

After Scheinker suffered a myocardial infarction in 1950, and divorced his wife around whom much of his social circle revolved,

*Wechsler, like Putnam, was an Executive Committee member of the Emergency Committee in Aid of Displaced Foreign Physicians. His name appears on letterhead from that agency (as early as 1934). See for instance neurologist Friedrich H. Lewy's file 396-7 p.254, from the Society for Protection of Science and Learning files at Oxford University's Bodleian Library Special Collections (Oxford, England).

I. S. WECHSLER, M. D.
70 EAST 83RD STREET
NEW YORK 28, N. Y.

Jan. 10, 1952

Dr. Charles D. Aring
Dept. of Neurology
Cincinnati General Hospital
Cincinnati 29, Ohio

Dear Doctor Aring:

Thank you for your letter with its profound insight into the nature of some of our foreign friends. You have expressed my own feelings much better than I could have done. It seems that we are different animals in this country. We do not take ourselves quite so seriously. You did not plant misgivings but you gave expression to them and have awakened some in me.

When Scheinker came to consult me I told him that I thought there might be a place for another neurologist in this city. Whether or not I can be of any help to him in making contact with a hospital I do not know. I doubt whether there are any openings in medical schools. His enthusiasm about treatment of chronic neurological conditions, especially multiple sclerosis, will probably meet with the same reaction as in Cincinnati. However, I see no reason why he may not try his luck in New York and advised him to get in touch with chiefs of neurology in a few hospitals in this city.

With kindest personal regards, I remain

Yours sincerely,



ISW:R

Figure 4: Response letter from January 10, 1952, from I.S. Wechsler to Charles D. Aring regarding Aring's recommendation letter for Scheinker. Published with permission from the Henry R. Winkler Center for the History of the Health Professions, University of Cincinnati Medical School.

he decided to move to New York. In his response to Aring's letter mentioned previously, Wechsler stated that Aring "gave expression" and "awakened" feelings he already experienced about "our foreign friends" such as Scheinker (Figure 4). Namely, Wechsler thought the difference between refugee European neuroscientists and Americans was that "We do not take ourselves quite so seriously."^{5p.12} This response from Wechsler suggests that there were ubiquitous and palpable personality and practice discrepancies that refugee neuroscientists had to overcome to be accepted in the American neurology community. Wechsler's comment reflects a lack of empathy for the emigrant Scheinker, who perhaps took things more "seriously" because of innate competition with which


he was familiar in the European academic environment as well as his experiences in escaping Nazi Europe.⁵ Wechsler expressed doubts about Scheinker's reception in New York:

His enthusiasm about treatment of chronic neurological conditions, especially multiple sclerosis, will probably meet with the same reaction as in Cincinnati.^{5p.12}

In another recommendation letter to New York University neurologist Sam Wortis (1904-69) for a clinical neurological teaching assignment for Scheinker, Aring clarified that "as a

**Multiple Schlerosis
Treatment Given**

Treatment that raises the blood pressure and stimulates the circulation was advised Friday by Dr. I. Mark Scheinker, former Cincinnatian, in a report to the New York Academy of Sciences and the National Multiple Sclerosis Society, meeting in New York for a conference on multiple sclerosis.



Dr. Scheinker, former member of the U. C. College of Medicine faculty, moved to New York several years ago.

Multiple sclerosis, to which he had devoted a lifetime of study, so far is an incurable ailment of the central nervous system. Approximately 250,000 Americans between 20 and 45 are afflicted.

In the report Dr. Scheinker expressed belief that paralysis of the walls of small blood vessels and their engorgement with stagnant, clotting blood plays a part.

Dr. Scheinker's treatment is designed to raise the blood pressure and stimulate circulation so as to counteract the blood vessel trouble. He found that of 250 multiple sclerosis patients, 134 had markedly low blood pressure.

Dr. Scheinker

Figure 5: Regarding “former Cincinnatian” (sic) Scheinker’s report on MS treatment to the New York Academy of Sciences and the National Multiple Sclerosis Society. *Cincinnati Post*, April 18, 1953. Published with permission from the Henry R. Winkler Center for the History of the Health Professions, University of Cincinnati Medical School.

citizen of the world” he always liked Scheinker and was not threatened by him, though “some couldn’t take his Continental flavor which does include a certain amount of façade distasteful to most Midwesterners.”^{5p.15} He emphasized that Scheinker’s divorce “from his socially prominent wife” was the primary reason he was moving to New York in 1952, and not for professional reasons, stating “his move took us all by surprise.”^{5p.15} Whether Wortis would have believed Aring’s statement is questionable, especially given Aring’s statements about Scheinker’s lack of acceptance in Cincinnati. Aring’s statement about Scheinker’s European “façade” suggests another personality difference that clashed with stereotypical notions of Midwestern openness and honesty. Aring’s statement about personal and not professional reasons for Scheinker’s departure had actually been requested by Scheinker himself, given that Wortis wanted to find out about his personality:

...I explained to [Wortis] that the reason of my move to N.Y. was a personal one (divorce). I hope, Dear Charlie, that

you will tell him...that I am not too difficult to deal with and the only thing I desire now is to be able to teach...^{5p.18}

In New York, Scheinker received his medical license without examination and wrote to Aring that he loved it there, having opened a practice at 972 Fifth Avenue, but that he wanted a clinical neurology teaching assignment.⁵ He apparently was able to obtain teaching positions at New York Medical College³⁰ and at the Flower and Fifth Avenue, Bellevue (New York University affiliate, possibly helped by Wortis), and Montefiore Hospitals. He belonged to the New York County and State Medical Societies, was an American Board of Psychiatry and Neurology diplomate, and a member of the American Academy of Neurology.³¹ His talk on vasoparalysis in MS to the New York Academy of Sciences and the National Multiple Sclerosis Society received coverage in April 1953 from the *Cincinnati Post*: “Treatment that raises the blood pressure and stimulates the circulation was recommended Friday by Dr. I. Mark Scheinker, former Cincinnatian[sic]...”^{5p.1} (Figure 5).

Scheinker died prematurely, presumably from cardiac disease, at age 52.³¹

DISCUSSION AND CONCLUSIONS

Though the postmigration story of Scheinker is similar to other physician refugees from Nazi Europe, there are several unique differences. By the end of 1940, 5056 physicians had immigrated to the United States, of whom 60% to 75% were Jewish²¹ and about 65% were between 40 to 55 years old (Scheinker was 38 when he immigrated to the United States). Scheinker contributed to the 35% of registered immigrants (with the Resettlement Committee) who were graduates of Austrian medical schools (second only to German).²¹ Overall, 50% of physician refugees fled to America (vs 22% to Palestine and 12% to Britain), and psychiatrist-neurologists made up the largest specialist portion of these (15%) and the largest proportion of physician-immigrants to America (22.3%).³² In one study of racially and politically dismissed Austro-German adult neuroscientists with a neuropathology tie (including Gerstmann and K. Stern), 41/46 (89%) were able to find positions abroad.³³

Scheinker’s “double emigration” was tragically common, also experienced by the Berlin neuropsychiatrist Lothar Kalinowsky (1899-1992), who emigrated thrice (Italy in 1933, then England in 1940, before America in 1940)³⁴; Berlin neurophysiologist Fritz Buchtal (1907-2003), who fled to Denmark then to Sweden with the Jewish deportations in 1943³⁵; and Hamburg neuropsychiatrist Victor Kafka (1881-1955), who fled to Norway and then also to Sweden with Jewish deportations in 1942.³³ Had he not escaped from occupied France, Scheinker’s fate may have been similar to (same-age) Berlin neuropsychiatrist Hans Pollnow (1902-1943), who fled to France to escape Nazi persecution in 1933 and after the German invasion in 1940 joined the French army. Pollnow was demobilized after the French surrender and fled to southern France, but was arrested by the Nazi secret police in 1943 and deported to the Mauthausen concentration camp in Austria where he was murdered the same year.³⁶

In Ohio, Scheinker found a suitable position despite competition from another Jewish neuroscientist refugee (Stern). The licensing regulations in 1939 only required first papers for naturalization along with an internship,³⁷ in addition to the state board examination.

Unlike the physician in charge of New York licensing, Dr. Harold Levi Rypins (1892-1939), who stated that “there were no international boundaries in science generally, and certainly none in medicine,” the Ohio head, Dr. Herbert Morris Platter (1869-1966), was not in favor of refugee physicians. In 1940, Platter attempted to acquire legislation requiring citizenship as a prerequisite for licensure. This was narrowly defeated in the state legislature because of strong lobbying from the Cincinnati Jewish Hospital.³⁸ But Platter seems to have succeeded in having citizenship instated as a licensure requirement from 1942 to 1971.* Thus Scheinker, who came to Ohio in late 1941, narrowly missed the window to obtain a license without citizenship. The citizenship requirement for licensure was not omnipresent in the Midwest. In Illinois in 1941, Governor Dwight Green (1897-1958) vetoed citizenship statutes for medical licensure on the grounds that it was unconstitutional to deprive legal refugees of their livelihood, especially at a time of war between the forces of totalitarianism (from which these emigrants had fled) and democracy.²¹

Scheinker published in France and quickly continued his academic productivity once established in Cincinnati. He more than doubled his number of publications post-*Anschluss*, from 27 to 69, and authored three comprehensive neuropathological textbooks (Scheinker listed 62 publications through 1946 on his 1947 ANA application, and “Ovid OLDMEDLINE 1946-1965” lists six publications from 1947 to 1949, but left out the previously mentioned 1954 paper). But by 1947, Scheinker was disillusioned about the prospect of an academic career in Cincinnati. While attending the 1947 meeting for the National Foundation for the Advancement of Multiple Sclerosis in New York, Scheinker met with noted Philadelphia neurologist Bernard J. Alpers (1900-81), who supported Scheinker’s ANA application, and Alpers asked if he knew any graduating fellows who could take over his neuropathology laboratory at Temple University Medical School, to which Scheinker laughingly and sarcastically replied that instead of recommending his fellow to head Alpers’ laboratory, he himself would have taken the position before his promotion.⁵ Alpers replied, “I cannot take it seriously, because I know that you should and soon will have a much more prominent position than being in charge of a laboratory.”^{5p.56} Scheinker wrote that “His sincere surprise made me feel very good. At least if not in Cincinnati, I am appreciated elsewhere!”^{5p.56} He also wrote, “It made me feel bitter that I had to go through years of struggle and intrigues to get my final promotion to Asst. Prof. of Neuropath. Well, c’est la vie!!!”^{5p.56} According to Aring, Scheinker’s lack of tenure in Cincinnati may not have been simply because of coincidental changes in the neurology/neurosurgery and pathology departments, but to his “Continental flavor” and condescending “detachment” that “Midwesterners” could not tolerate. Not only “Midwesterners” but New Yorkers such as Wechsler echoed Aring’s feelings and generalized about a palpable difference between “German”-trained neurologists such as Scheinker in that they took themselves too “seriously.” Besides personality issues, in private practice Aring mentioned that the local neurologists did not appreciate competition from the foreign neurologist Scheinker who offered more treatment to patients with chronic disorders than what they offered, with both rehabilitation and controversial ideas about intentionally induced hypertension in MS.⁵

*Liz Hawk, continuing medical education and renewal assistant, Ohio State Medical Board; email messages to the author, January 23-February 6, 2014.

The problem of competition for refugee physicians to establish a successful practice was apparently not unique to Scheinker and Cincinnati, but was well recognized.²¹ David L. Edsall (1869-1945) and Putnam wrote the following in 1941:

It is also clear that prejudice is a less hindering factor than competition. Resistance to the establishment of a new practice is not felt alone by aliens (Jewish or non-Jewish), especially in towns where the established doctors have formed a protective clique; disapproval and sometimes open hostility may be the fate of the newcomer, whatever his origin.^{21p.1883}

Similarly to Scheinker as another young Jewish neuroscientist refugee to the United States from Nazi Europe, Leo Alexander (1905-85), via a different trajectory than Scheinker, faced numerous hurdles including local job competition, personal and professional integration challenges, and pressure to conform to different institutional and cultural traditions and expectations, but found eventual “success.” Alexander, who had been an assistant in the University of Frankfurt Neuropsychiatric Clinic, had been on a Rockefeller fellowship at Peiping Union Medical College in Beijing in 1933 when he was advised not to return to Germany because of the dismissal of non-Aryans in academic positions.³⁹ Never desirous of a permanent position in China, Alexander finally found an unsalaried post at Worcester State Hospital in Massachusetts (only room and board supplied). He immigrated to the United States in 1934.³⁹ By that point, Alexander was under no delusions; writing that Americans hoped to acquire “from the great mass of broken intelligentsia in the middle of Europe, the best for America and for the benefit of their institutions, preferably cheap.”³⁹ Scheinker, applying for positions 7 years later when even more desperate and displaced European refugee neuroscientists were also looking for American posts, experienced this competition even more intensely. Additionally, in his Worcester offer letter, the position was contingent upon Alexander “being of pleasant and cooperative personality” because the department head did not wish to “introduce a disrupting factor.”³⁹ Alexander was under the same pressure to conform to American personality expectations as was Scheinker nearly a decade later. “Team work” and making oneself “as useful as possible” to colleagues were stressed to Alexander as being paramount in America³⁹; perhaps Scheinker was not advised as such and this led to his struggles. Not only did Alexander have to overcome language and accent issues, apathy to the European political situation, and outright prejudice, but also general complaints from hospitals about the cooperation of émigré physicians. The emigrant’s cantankerousness, likely the normal academic behavior in Europe, was seen as disruptive in America. Alexander wrote that one “who disagrees [is] considered disagreeable.”³⁹ Alexander further lamented about American anti-Semitism in comments he would overhear, and about what he termed “American formalism” that led to “Trivial things, no one in old Europe would bother about... [being] an adequate reason overhere [sic] for dismissing a university professor.”³⁹ He also cynically wrote that “Here in America it is of vital necessity to be in a good mood – smile.”³⁹ The cultural and religious prejudices and differences faced by Alexander were also faced by Scheinker in the 1940s, and his difficulty in adapting likely contributed to his professional dissatisfaction and lack of expected career progression.

Given the “coldness of the North Americans” and their apparent lack of cultural understanding, Alexander was depressed and lonely; in his homesickness, he contemplated returning to Europe. This was not atypical for the émigré scientist in America in the 1930s, before the inevitable conclusion of Nazi policies was fully evident.³⁹ Whether Scheinker considered returning to Europe after the war was unclear and not mentioned in any of his letters. Generally, a return to Vienna after the war for neuroscientist refugees was rare; only 3/17 (17.6%) habilitated neuroscientists who were dismissed or had teaching licenses withdrawn returned to their posts.⁴⁰

Scheinker maintained several academic affiliations and published articles even after moving to New York and starting a new private practice there. He had more success in terms of numbers of papers and books published in exile than his former Viennese teacher and mentor Gerstmann. This was likely because of Scheinker’s youth, lack of job security, and motivation to advance on the academic ladder. Gerstmann, already mid-career at the time of exile from Austria in 1938, never reacquired a hospital directorship and mainly worked in private practice in New York despite some teaching positions in the 1940s. Gerstmann also had to deal with property, life insurance, and flight tax reclamation battles in Vienna⁴¹ with which Scheinker did not seemingly have to contend. Overall, despite the anger, sense of loss, justifiable frustration, and struggles with institutional, intellectual, and cultural adaptation, “emigration” provided unique opportunities. Many neuroscientists found academic appointments abroad, mostly in America, some of whom may not have found appointments even in pre-Nazi Germany or Austria. The American academic establishment was generally less restrictive than its European counterpart. But neuroscientist refugees were forced to be innovative, make profound adjustments in linking old with new value systems, and shift intellectual and scientific perspectives to succeed.⁴¹

In Scheinker’s case, despite his frustrations, our analysis is that via perseverance and taking advantage of opportunities, he prevailed and demonstrated resilience to reestablish his personal life and career. Perhaps without lost time in transit, starting at the bottom of the academic echelon with each emigration, and less psychological trauma from being uprooted twice, he would have flourished even more subjectively and objectively.

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