

A Reminder of Liability Information for COVID-19 Vaccination Sent to German Physicians

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by [Doctors for Covid Ethics](#)

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In June 2021, a Notice-of-Liability letter was sent to physicians in Germany. This reminder letter includes the recent findings and results that further strengthen the conclusion that the gene-based COVID vaccines are unnecessary, ineffective, and dangerous, as stated in the June letter.

“We would also like to ask you, beyond the legal level, that you, as physicians and also human beings, once again thoroughly examine whether you can reconcile your attitude and your medical practice with your conscience. Our first principle is that we must do no harm.”

Special thanks to Mascha Orel and her team for the excellent translation.

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Excerpt from letter:

This letter is to remind you that you may be held personally liable for vaccine injuries if you administer any of the gene-based COVID-19 vaccines to your patients. In our

previous letter this June, we outlined that these vaccines are all unnecessary, ineffective, and dangerous. The contents of that letter can be found at the following web address:

<https://doctors4covidethics.org/wp-content/uploads/2021/11/no11-german.pdf>

Along with the June letter, you received a detailed liability notice to make you aware of the legal risks. In the meantime, there have been public attempts to downplay this issue and dismiss our warning as “misinformation”. We would like to remind you that the initial situation with the Covid-19 vaccines is completely different than with the swine flu vaccines.

In the current situation, it is not to be expected that the state will take over the injury compensation payments to the people harmed by the Covid-19 vaccinations, as it did after the swine flu. The only certain thing is that the manufacturers enjoy “immunity” and cannot be held liable. You are hopefully aware that the contracts and the terms of the contracts contained therein have now become public. At the end of our letter today, we also address the fact that in the meantime, more and more is becoming known about how Pfizer simply falsified and deceived data in the approval process, which adds a completely new dimension to the current situation. Please take our reminder seriously and carefully consider our letter today, as well as the one from June of this year.

We would also like to ask you, beyond the legal level, that you, as physicians and also human beings, once again thoroughly examine whether you can reconcile your attitude and your medical practice with your conscience. Our first principle is that we must do no harm. Please check carefully if you really fully inform your patients before vaccination and if they can really give an understanding consent. Please check to see if patients are being pressured by third parties

or are able to make a true free choice. And in particular, please check as carefully and thoroughly as you can whether you can really ethically and scientifically justify vaccinating pregnant women, adolescents, and children. We would like to briefly present recent findings and results that reinforce and expand on these points in the following.

1. The vaccines are unnecessary

It should be common knowledge by now that COVID-19 carries only an extremely small risk of death or serious, irreversible damage to health for people without serious pre-existing or concomitant diseases. This is true even for people over 65 years of age, and especially for young people. [1] For example, only a full 11 COVID deaths in the 10- to 19-year-old age group have been reported to the Robert Koch Institute in the period ending July 13, 2021.

The main reason for the very low overall mortality is cross-immunity brought about by the previous infection with other beta-coronaviruses. The wide distribution of this immunity [2, 3] and its clinical efficacy [4-7] have been adequately confirmed.

2. The vaccines are ineffective

The reports on the so-called clinical trials that were supposed to prove the effectiveness of the Pfizer and Moderna vaccines [8, 9] are full of contradictions and, therefore, not credible [10, 11]. However, the failure of the vaccines has now been documented in practice.

The U.S. Center for Disease Control (CDC) published a study that included 469 COVID cases [12] – this number is more than double the sum of cases reported in Pfizer's and Moderna's clinical trials. Of these 469 cases, 74% involved previously vaccinated individuals, whereas only 69% had been vaccinated in the general population during the period. These apparent vaccine failures affected all three vaccines covered, those

from Pfizer, Moderna, and Johnson & Johnson. Since the vaccine produced by AstraZeneca is very similar to that produced by Johnson & Johnson, one must assume that AstraZeneca vaccine would not have performed any better.

The ineffectiveness of the vaccines can further be demonstrated by international comparison. Plotting the number of new COVID cases against the population vaccination rate for 68 countries yields only a weak but positive correlation [13] – even high vaccination rates in the 60-80% range fail to reduce the number of new infections.

If their benefit is zero, the benefit-risk analysis of the “COVID-19 vaccines” is negative even if their adverse side effects are overestimated, which is hardly possible since experience shows that only about 1-3 % of adverse effects are reported at all.

3. The vaccines are dangerous

As with any other treatment, an honest weighing of benefits and risks is essential for COVID vaccination. The work of Kostoff et al. [1] on this topic makes it clear that the harms far outweigh the benefits – and this is true in every age group, even in seniors.

Severe side effects of vaccination are common. Canadian general practitioner Dr. Charles Hoffe wrote an open letter to the British Columbia provincial health minister back in April, pointing out four such cases among a total of 900 patients; these had occurred after the first injection of Moderna vaccine [14]. One of these cases was fatal; the other three had severe, probably permanent, neurological damage. Hoffe has since reported other such cases in the same group of patients.

The U.S. (VAERS) and European Union Vaccine Adverse Event Reporting Sites have recorded tens of thousands of deaths and a much larger number of serious illnesses, mostly vascular

and inflammatory. Table 1 summarizes the status of reports in the VAERS database. As expected, the number of deaths recorded so far in 2021 that occurred after the administration of other vaccines is about three-quarters the value for the entire previous year. In comparison, the number of deaths following COVID vaccination is huge – it is over 50 times greater.

[Read and download full letter](#)

The letter of Notice of Liability sent to German physicians in June is available for view and download.

<https://doctors4covidethics.org/wp-content/uploads/2021/11/nol1-german.pdf>

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