

Germany: Appalling lack of protective equipment in COVID-19 outbreak

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The German government and the European Central Bank are pumping hundreds of billions of euros into the accounts of corporations and banks to protect them from the economic consequences of the COVID-19 pandemic. But when it comes to protecting the health of the population, government action is marked by criminal irresponsibility.

In Germany, for example, it is still virtually impossible to be tested for the life-threatening virus unless you can prove that you have been in a crisis area or have had contact with someone who is already infected. Even people with symptoms of the disease are refused tests.

The irresponsibility of the government is also shown by the lack of enough protective masks and other urgently needed equipment. Although doctors' representatives and suppliers of protective clothing had warned of this weeks ago, the federal government reacted with ignorance and inaction. Now, the masks are becoming scarce in clinics, doctors' offices and medical services—with fatal consequences for the fight against COVID-19.

As Walter Plassmann, head of the Association of Statutory Health Insurance Physicians, explained last Tuesday, the federal government had promised to help with the procurement of protective equipment. In fact, nothing had happened. “We did not get a single mask,” news magazine *Der Spiegel* quotes Plassmann, who warned, “If we run out of protective equipment, we are finished.”

Achim Theiler, the managing director of a company that produces and sells hygienic clothing, mouthguards and respirators for hospitals and doctors, told *Der Spiegel* that the federal Ministry of Health had been ignoring the warnings of manufacturers and suppliers for weeks.

“We have issued warnings, and nobody has heard us,” said Theiler. “This is gross negligence and unnecessarily aggravates the crisis.” On February 5, he had contacted federal Health Minister Jens Spahn (Christian Democratic Union, CDU) by email and vigorously urged him to reserve the corresponding quantities, as Germany was threatened with a dramatic shortage. “I appeal to you not to underestimate the problem of this virus,” Theiler wrote.

On February 10, Theiler contacted the health ministry again and referred to an official announcement by the World Health Organisation (WHO) that there was a threat of a shortage of protective equipment worldwide, especially respiratory masks. At the time, *Der Spiegel* had also reported on supply problems in Germany. Theiler requested that this information be passed on immediately to the appropriate authorities. “Nobody reacted,” he was forced to conclude.

Several doctors, such as the head of a Munich clinic, Axel Fischer, also complained that the federal and state governments had not acted despite the anticipated problems. It is known that around 97 percent of the world market production of face masks is located in China, whose government imposed an export ban on products of this type in January.

Although the number of infected and sick people is still rising rapidly, supply bottlenecks are already occurring, as clinics in particular generally hold only a small number of stocks for cost reasons.

Without adequate protective equipment, doctors and nursing staff are exposed to a high risk of infection. In the event of an infection, the doctor or employee in question is then absent, which further exacerbates an already strained situation. Moreover, there is a risk of the virus being transmitted to patients, i.e., sick and vulnerable people. This means that patient care is not

possible without protective clothing. “Then we will have to close the hospital,” Elmar Wagenbach, head of Eschweiler hospital, told *Der Spiegel*.

The limited supplies are already largely used up. Should requested deliveries not arrive, they would run out in Hamburg at the weekend, KV boss Plassmann explained.

The hospital association in North Rhine-Westphalia sounded the alarm that in the state with the most COVID-19 cases, most hospitals only had protective material for about 14 days. In clinics, staff are often instructed to use only one mask per day, or the mask—which is designed as a disposable product—is used several times.

The situation in doctors’ surgeries is similarly dramatic. Here, too, there is an acute shortage. Even weeks ago, masks, protective clothing and disinfectants were no longer available. In some cases, family doctors bought breathing masks from the DIY store at their own expense, which are normally used by painters. According to a survey by the doctors’ news service, more than 80 percent of doctors in private practice are already complaining about a lack of protective equipment and are considering closing their practice.

If material can be ordered and delivered, then it is only at horrendous prices. While face masks normally cost between 50 and 80 cents per piece, up to 20 euros are now being charged. After large quantities of disinfectants and protective material have been stolen from clinics for fear of the virus, they now have to be kept under lock and key or guarded by security personnel.

The lack of urgently needed material is not limited to face masks and disinfectants. There are also increasing shortages of respirators, oxygen and medication.

Important drugs needed for intensive care are also becoming scarce and their price is rising. The anaesthetic propofol is no longer available in sufficient quantities and the price per ampoule has increased twenty-fold in the last few days. The WHO warned over a week ago of a shortage of medical equipment to combat the coronavirus pandemic.

The statement by Health Minister Spahn that Germany is well prepared for an outbreak of COVID-19 turns out to be a brazen lie. Serious deficiencies are already evident in every area of the health system. COVID-19 tests, which in any case are

not being carried out nationwide, cannot be carried out systematically due to the strain on doctors and health authorities. In the last 20 years, about one third of physician posts in the public health authorities have been cut, while pay is significantly lower than can be earned in a private clinic.

The staffing situation in German clinics and nursing homes was already catastrophic before the outbreak of the pandemic; 17,000 vacancies currently exist in nursing care. Poor pay and even worse working conditions are the main reasons for this. In addition, there has been a massive reduction in hospital beds in recent years. If the situation in Germany follows that in Italy, there would be nowhere near enough intensive care beds in the country.

This catastrophic position makes clear where privatisation, profit gouging, austerity measures and a market-focussed orientation have led in the health care system. In order to combat the pandemic, substantial funds must be made available immediately to provide the material and staffing required in all clinics and medical facilities. The profit orientation in the health care system must be ended immediately and be replaced by a planned orientation toward the needs of society.



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