

Doctors in Germany will soon have to decide on life and death

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Doctors in Germany will soon have to decide which COVID-19 patients will receive intensive care and which will be at the mercy of death, as is already the case in Italy, France, the United States and other countries.

On Wednesday, seven professional medical societies adopted a paper with treatment recommendations, which states, “According to the current state of knowledge on the COVID-19 pandemic, it is likely that in Germany, too, in a short time, and despite the capacity increases that have already been made, there will no longer be sufficient intensive care medical resources available for all patients who need them.”

If this happens, the paper states, “it is inevitable that decisions will have to be made about which patients requiring intensive care should be treated acutely/intensively and which should not (or no longer) be treated acutely/intensively.” Over a total of eleven pages, the criteria are then developed for doctors who have to make this decision.

Above all, the elderly, sick and infirm with lower chances of recovery would be rejected for intensive care. The “prioritisation of patients” is based “on the criterion of the clinical prospect of success,” which means that those “for whom there is no or very little chance of success” should be refused treatment. This is the case, for example, with serious illnesses—including neurological and cancer—a severe immune deficiency, multimorbidity and increased frailty.

The paper states that priority should be given to patients who “thus have a higher probability of survival or a better overall prognosis.” Not only a “clinically relevant change in the condition of the patients” is decisive for the decision, but also the “changed relationship between need and available resources.” In other words, the fewer ventilators, intensive care beds and specialist staff are available, the lower the threshold above which patients are no longer treated.

The paper, which has also been signed by medical ethicists, does not say a word about how the current catastrophic situation came about. Nor does it contain any recommendations on how to prevent doctors from being put in the terrible position of having to decide on life and death. Instead, it uses an expression from war and disaster medicine to describe such a development as inevitable.

It says that “analogous to triage in disaster medicine, decisions must be made on the distribution of the limited resources available.” The term triage (from the French *trier*: to sort, select, pick out) goes back to Napoleon’s personal physician Dominique-Jean Larrey, who developed a catalogue of criteria under which soldiers are saved on the battlefield and which are not. It was established for situations in which a sudden and unpredictable catastrophe overwhelms the available medical resources.

However, the coronavirus crisis is not such an unforeseeable disaster. Experts have been warning of such a pandemic for years. A study by the public health body the Robert Koch Institute in 2012, for example, urged the German government and the Bundestag (federal parliament) that in the event of a virus pandemic, the necessary medical care for the population “exceeds existing capacities many times over.” But the government did nothing to prevent it. Instead, it continued the closure and privatisation of hospitals unchecked.

Even after the outbreak of the current pandemic, the German government continues to pursue a policy of criminal irresponsibility. While it has put together a 750-billion-euro package in no time at all, primarily to safeguard profits, large corporations and banks, nursing staff continue to work mostly unprotected. No vigorous initiatives are being taken to expand the necessary capacities for intensive care patients either.

In the meantime, thousands of doctors and nurses throughout Germany are infected with the coronavirus

due to a lack of protective clothing, according to a survey by the *Süddeutsche Zeitung*, and broadcasters NDR and WDR. But the federal and state governments do not even consider it necessary to collect figures on the numbers of infected medical staff, who are essential for the survival of thousands, let alone for their protection.

When asked, the Robert Koch Institute told the research team that 2,300 members of medical staff in hospitals are currently infected. Doctors' surgeries, laboratories, retirement and nursing homes and outpatient care services are not included in this figure. Based on written inquiries to 400 health authorities, medical associations, state governments and other institutions, the research team concluded "that thousands are already affected throughout Germany." However, it was not able to obtain complete figures. The Bavarian Ministry of Health even forbade the state's health authorities from answering the journalists' questions.

Meanwhile, the total number of confirmed infections in Germany continues to rise unabated. In the last two weeks, between 4,000 and 7,000 people in the country have become newly infected every day. With more than 100,000 infected people, Germany is now fourth ahead of China and France—and just behind the US, Spain and Italy. The number of fatalities has also risen to over 1,500.

The federal government's attitude towards doctors and nurses is in line with its attitude towards the working class as a whole. Thousands of workers are being forced to work in non-critical companies without adequate protection. And even in indispensable sectors—such as the food trade, public transport, etc.—workers are often denied the most basic protection. For millions of poor, those precariously employed, single parents, workers, artists and small businesses, the crisis means the loss of their livelihoods without receiving the necessary aid.

This book compiles the most critical programmatic statements, polemics, scientific analyses, interviews, and news articles published by the World Socialist Web Site on the COVID-19 pandemic. It is a social and political chronology of this world historic event based on a Marxist and Trotskyist perspective.

In the meantime, numerous highly qualified ethics experts who have appeared on talk shows and in newspaper columns are informing the population that the most vulnerable to the coronavirus will be denied intensive treatment.

On Markus Lanz's evening chat show, criminal lawyer Reinhard Merkel, who is a member of the German Ethics Council and advises Federal Health Minister Jens Spahn

(Christian Democratic Union, CDU), defended the triage of intensive care patients. He talked about "tragic conflicts for which there is no morally blameless solution" and described different scenarios for refusing or discontinuing the treatment of elderly patients. The most likely scenario was: "The doctors say to themselves, before I make the decision, I won't put an 80-year-old on the ventilator because a 30-year-old is coming along soon."

The obvious and only ethically justifiable solution—providing enough ventilators and intensive care beds and training personnel to treat everyone—is not even considered by such ethics "experts." Yet this would easily be possible.

The German mechanical engineering, electrical engineering and automotive industries together comprise more than 12,000 companies, employ almost 3 million workers and achieve an annual turnover of 725 billion euros, more than half of which is exported. They manufacture complex, technically advanced products and could also build ventilators and intensive care beds—enough to supply the whole of Europe.

However, this would require an intervention into capitalist private property and the use of substantial sums of money. If the government were preparing for war, this would not be a problem. Production would be switched over in a very short time. Instead of engine blocks, shell casings would be cast, instead of trucks, tanks would be assembled and instead of machine controls, missile systems would be built.

But what applies to the instruments of death does not apply to those that can save lives. The old, sick and infirm are simply not worth the effort of the ruling class. Within a very short time, they have provided 600 billion euros to secure the profits of the banks and large corporations. For the weakest victims of the COVID-19 epidemic, the ruling class has only cynical "ethical" justifications for why they have to die.



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