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Selfkant, September 9th, 2022

## **In the military complaints process**

**of the ...**

**AZ. ...**

If the objection to a hearing were to be upheld, it would also be urgently required that to hear Dr. Ole Wichmann from the RKI again on the effectiveness of the Covid-19 injections, in particular on the effectiveness of the BioNTech-Pfizer "vaccine" substance Comirnaty.

Everything indicates that Dr. Ole Wichmann simply told the untruth during his hearing in court when he - like an employee of the PR department of BioNTech-Pfizer - sang the song of praise to the supposedly oh so high effectiveness of the Covid 19 injections.

The decision of July 7, 2022, which is challenged here, is largely based on this inaccurate assertion or false assumption.

The "essential train of thought" of the 1st Military Service Senate on this is summed up in the press release as follows:

"The existing vaccines could only reduce the risk of infection and transmission, but they reduced the risk of severe cases by 90%. In its decision on facility-related compulsory vaccination, the Federal Constitutional Court confirmed the existence of an aggravating pandemic situation in winter 2021 and explained in more detail that, according to the predominantly professional assessment at the time, it was assumed that the Covid-19 vaccination would significantly reduce the risk of infection and transmission (BVerfG , Decision of April 27, 2022 - 1 BvR 2649/21 - Rn. 157 ff., 173 f.).

After the expert hearing it carried out, the 1st military service senate also agreed with the assessment that vaccination against the now predominant omicron variant still has a relevant protective effect in terms of reducing infection and transmission (BVerfG loc. cit. Rn. 184 f. ).

In addition, it reduces the risk of a severe course over a longer period of time, especially after a booster vaccination, so that the positive effect of the vaccination clearly outweighs the risk associated with it. According to the current recommendations of the Robert Koch Institute, this also applies to the group of 18 to 59-year-olds, who make up the majority of military personnel..." (end of quote, underlining added by signers)

Source:

<https://www.bverwg.de/pm/2022/44>

The "Assessment Report" on the risk-benefit assessment of the BioNTech-Pfizer vaccine Comirnaty was published on the corona-blog.net website on August 15, 2022, see:

<https://corona-blog.net/2022/08/15/ema-dokumente-zu-biontech-aus-2020-disclose-no-reliable-conclusion-about-the-efficacy-of-the-vaccine/>

At the end of this post there is a button to download the full (partially redacted) report.

In this assessment report, section 3.3 on page 157 states, among other things (about

"He noticed section 3.3 on page 157, which we want to briefly quote here in translation:

### **3.3. Uncertainties and limitations regarding positive impacts**

Based on the limited data available, no reliable conclusion can be drawn on vaccine efficacy against severe COVID-19 7 days after the second dose. Estimated efficacy against major COVID-19 events occurring at least 7 days after the second dose was 66.4%, with a large and negative lower limit (95% CI: -124.8%; 96.3%) .

At the cut-off date of the analysis, only a limited number of events occurred (1 and 4 cases in the vaccine and placebo groups, respectively). Posterior probability of actual vaccine efficacy  $\geq 30\%$  (74.29%) did not meet the predefined success criterion. Consequently, efficacy against severe disease in subgroups, particularly in certain populations at high risk of severe COVID-19 disease (the elderly and those with comorbidities), cannot be estimated." (End quote)

**Source:**

<https://corona-blog.net/2022/08/15/ema-dokumente-zu-biontech-aus-2020-disclose-no-reliable-conclusion-about-the-efficacy-of-the-vaccine/>

Proof: expert testimony of Dr. Hans-Joachim Kremer, as before

#### **I emphasize the sentence again:**

**“Consequently, the effectiveness against the serious disease** in subgroups, particularly in certain populations at high risk of severe COVID-19 disease (the elderly and those with comorbidities) cannot be appreciated.”

The representative of the RKI Dr. Ole Wichmann must have been aware of this “assessment report” at his hearing on the second day of the hearing.

The following reader comment can also be found under the aforementioned link, to which there is basically nothing to add:

"Since the lower limit of the 95% confidence interval is strongly negative at -124.8%, one could also claim that vaccination increases the risk of severe courses. In any case, the data cannot be used to disprove this hypothesis. However, at the beginning of the approval process, the authorities claimed that the vaccine protected against serious illnesses, and they still do. This is also stated in the information sheets on consent to the vaccination. I wonder on what scientific basis can this be said? In any case, this does not emerge from the assessment report and I am sure that no national authority has carried out its own risk-benefit assessment based on a placebo-controlled, randomized study. That's why it was referred to the EMA,

This shows me once again that the state and the pharmaceutical companies are working together, have deceived people and ignored laws to protect the population. What about the declarations of consent, are they still legally effective? And who is liable for serious vaccination damage if consent was given on the basis of false promises?

Politicians in Germany are currently preparing the next wave of vaccinations, because anyone whose fourth vaccination was more than three months ago must then be tested again or wear a mask. The main argument here is protection against severe courses, since it is obvious to everyone that even those who have been vaccinated four times are not protected against infection. Our Health Minister Lauterbach is the best proof of this. But in my opinion there is no scientific basis for this claimed protection against severe courses, ie no controlled and randomized studies that prove this! This argument, too, turns out to be what it really is, pure propaganda!"

Source and proof: as above

We had already argued in the related defense complaints that the data from Pfizer's approval study did not prove the effectiveness of Comirnaty.

In addition, we had already stated that Comirnaty can no longer receive unconditional approval because the "control groups" have dissolved.

The aforementioned article on corona-blog.net reminds us of this again (quote):

"Incidentally, while leafing through the assessment report, we noticed another "amusing" detail. Near the end, on p. 165, you will find a table with obligations that BioNTech-Pfizer still has to fulfill (with due date):

In order to confirm the efficacy and safety of Comirnaty, the MAH should submit the final Clinical Study Report for the randomized, placebo-controlled, observer-blind study C4591001.	December 2023
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Because this is so relevant, here it is again in translation:

In order to confirm the efficacy and safety of Comirnaty, the MAH should submit the final clinical study report for the randomized, placebo-controlled, observer-blind study C4591001.

Ironically, the "control groups" (i.e. the placebo groups, including those from study C4591001) have already been vaccinated as part of the "Vaccine Transition Program" ([we have reported about it](#)). In March 2021, the following graphic was also found on the BioNTech website:

## Trial Enrollment

The clinical trial has enrolled **46,331** participants at **153 clinical trial** sites around the world.

### Trial Geography



Our trial sites are located in **Argentina, Brazil, Germany, Turkey, South Africa** and the **United States**.

### Participant Diversity

Approximately **42%** of overall and **30%** of U.S. participants have diverse backgrounds.

Participants	Overall Study	U.S. Only
Asian	5%	6%
Black	10%	10%
Hispanic/Latinx	26%	13%
Native American	1.0%	1.3%

**49.1%** of participants are male and **50.9%** are female

### Participant Age



Ages 12-15	2,259
Ages 16-17	754
Ages 18-55	25,427
Ages 56+	17,879

## Vaccine Transition Option

As of Wednesday, February 24 at 5:30 pm ET, **16,904** of participants who received placebo have received their first dose and **11,807** have received their second dose.

Source: [BioNTech-Pfizer website](#)

We wonder when this information will arrive at the EMA. Also in [latest update of the EMA website](#) (as of 07.01.2022) you can find the following table:

Study Status	Country	Summary of Objectives	Safety concerns addressed	Milestone	Due dates
<b>Category 2</b>					
C4591001 <i>Ongoing</i>	Global	The objective of the study is to evaluate the safety, tolerability, immunogenicity and efficacy of COVID-19 mRNA vaccine  An imbalance between the vaccine and control groups in the frequency of COVID-19 disease, in particular for severe COVID-19 disease, may indicate the occurrence of vaccine associated enhanced disease. Surveillance is planned for 2 years following Dose 2.	Anaphylaxis Vaccine-associated enhanced disease (VAED) including vaccine-associated enhanced respiratory disease (VAERD) Use in frail patients with co-morbidities (C4591001 subset) Long term safety data.	CSR submission upon regulatory request: CSR submission 6 months post Dose 2: Final CSR submission with supplemental follow-up:	Any time 31-May-2021 31-Dec-2023

We translate another part into German:

An imbalance between the vaccine and control groups in the incidence of COVID-19 disease, particularly in severe COVID-19 disease, may indicate the occurrence of vaccine-associated exacerbated disease. Monitoring is planned for 2 years after the 2nd dose.

**This imbalance can simply no longer be determined because the control group no longer exists in fact.”(Quote end)**

Source and proof: as above

We had argued that BioNTech can no longer meet the requirements for unconditional approval due to the dissolution of the control group and that the requirements for conditional approval were therefore no longer applicable at this point in time.

But on July 7th, 2022, the judges who were rejected here raved about the legality of the EMA approval – without any examination and examination competence and submission to the ECJ.

We had also argued that the - correctly interpreted - data from the Pfizer approval study in the USA can in fact only be inferred that Comirnaty has no significant effectiveness.

**But on the contrary !!!!**

A new study (peer reviewed) by Prof. Dr. Peter Doshi et al., see:

<https://www.sciencedirect.com/science/article/pii/S0264410X22010283>

has even shown that **the Pfizer study found a 36% greater risk of serious adverse events in the vaccine group compared to placebo baseline.**

*An analysis of this on tkp.at from September 2nd, 2022 states:*

*"Now is one [new study](#) by Peter Doshi et al entitled Serious adverse events of special interest following mRNA COVID-19 vaccination in randomized trials in adults.*

*Adverse reactions are reviewed according to the 2020 Priority List of Potential Adverse Events Relevant to COVID-19 Vaccines, prepared by the Brighton Collaboration and supported by the World Health Organization, prior to the introduction of the COVID-19 vaccine. This assessed serious adverse events of particular interest observed in mRNA COVID-19 vaccine studies.*

*Thus, this is a secondary analysis of serious adverse events reported in the placebo-controlled, randomized phase III clinical trials of Pfizer's and Moderna's mRNA-COVID-19 vaccines in adults, with the analysis focusing on the adverse events of special interest of the Brighton Collaboration.*

*Pfizer's and Moderna's mRNA COVID-19 vaccines caused an additional risk of serious adverse events of 10.1 and 15.1 per 10,000 vaccinees, respectively, compared to placebo baseline. Overall, the mRNA preparations therefore showed an additional risk of 12.5 per 10,000 vaccinated people.*

*The Pfizer study showed a 36% higher risk of serious adverse events in the vaccine group, the Moderna study a 6% higher risk." (End quote)*

Source:

<https://tkp.at/2022/09/02/studie-hebliche-severe-side-effects-in-den-mrna-c19-impfstudien/>

**According to this study by Doshi et al. So out: injections like Comirnaty do not reduce the risk of severe courses, but increase them considerably.**

Proof: expert testimony of Dr. Hans-Joachim Kremer, as before

This must be clarified in the event of the reopening of the main thing.

Schmitz  
Lawyer