

COVID-19: Excess Mortality and Mass Vaccination in Europe ... and Some Unpleasant Facts

In all age groups below 75 years, more people have died in 2021 than in the previous year. The reason for this is not the virus.

An Essay (with 5 Tables and 3 Graphs) by Michael Pröbsting, International Secretary of the Revolutionary Communist International Tendency (RCIT), 18 December 2021, www.thecommunists.net

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Introduction

The RCIT has emphasized since the beginning of the pandemic in early 2020 that the policy of capitalist governments all over the world is not focused on public health but rather on serving the political and economic interests of the ruling class. Behind the disguise of combatting the pandemic, the governments' policy is mainly directed to expand the power of the state apparatus and to increase the profits of the monopolies.¹

We have called this policy the *COVID Counterrevolution* as it represents a historic offensive of the ruling class to enhance its control of the masses in a period of deep economic crisis and popular unrest. It is characterized by a *shift from (limited) bourgeois democracy towards chauvinist state bonapartism* – resulting in the creation of a *totalitarian new Leviathan* of which Thomas Hobbes could not have dreamed!²

When we say that public health is not the primary consideration in the COVID policy of the ruling class, we do not mean that the issue of health does not play a prominent role. It certainly does. But this policy represents a specific, *capitalist* approach to health. Health is viewed as an extraordinary business opportunity for the pharma and biotech corporations.³ It is viewed in combination with instruments of control and surveillance of people.⁴

¹ The RCIT has analyzed the COVID-19 counterrevolution extensively since its beginning. Starting from 2 February 2020 we have published about 100 pamphlets, essays, articles and statements plus a book which are all compiled at a special sub-page on our website: <https://www.thecommunists.net/worldwide/global/collection-of-articles-on-the-2019-corona-virus/>. In particular we refer readers to two RCIT Manifestos: COVID-19: A Cover for a Major Global Counterrevolutionary Offensive. We are at a turning point in the world situation as the ruling classes provoke a war-like atmosphere in order to legitimize the build-up of chauvinist state-bonapartist regimes, 21 March 2020, <https://www.thecommunists.net/worldwide/global/covid-19-a-cover-for-a-major-global-counterrevolutionary-offensive/>; “Green Pass” & Compulsory Vaccinations: A New Stage in the COVID Counterrevolution. Down with the chauvinist-bonapartist police & surveillance state – defend democratic rights! No to health policy in the service of the capitalist monopolies – expand the public health sector under workers and popular control! 29 July 2021, <https://www.thecommunists.net/worldwide/global/green-pass-compulsory-vaccinations-a-new-stage-in-the-covid-counterrevolution/>; In addition, we draw attention to our book by Michael Pröbsting: The COVID-19 Global Counterrevolution: What It Is and How to Fight It. A Marxist analysis and strategy for the revolutionary struggle, RCIT Books, April 2020, Chapter V, <https://www.thecommunists.net/theory/the-covid-19-global-counterrevolution/>. See also our very first article on this issue by Almedina Gunić: Coronavirus: "I am not a Virus"... but WE will be the Cure! The chauvinist campaign behind the “Wuhan Coronavirus” hysteria and the revolutionary answer, 2 February 2020, <https://www.thecommunists.net/worldwide/global/wuhan-virus/>. Almedina Gunić and Michael Pröbsting: On Some Ideological Features of the COVID Counterrevolution. Comments on an interesting interview with a German liberal historian, 14 November 2021, <https://www.thecommunists.net/worldwide/global/on-some-ideological-features-of-the-covid-counterrevolution/>; See also a number of Spanish-language articles of our Argentinean comrades: Juan Giglio: La izquierda de la "Big Pharma", dejó de defender las libertades, 1.10.2021, <https://convergenciadecombate.blogspot.com/2021/10/la-izquierda-de-la-big-pharma-dejo-de.html>; Juan Giglio: ¿Por qué la izquierda no cuestiona las políticas de la OMS? 8.9.2021, <https://convergenciadecombate.blogspot.com/2021/09/por-que-la-izquierda-no-cuestiona-las.html>

² For a more detailed elaboration of this issue see e.g. the above-mentioned book by Michael Pröbsting: The COVID-19 Global Counterrevolution: What It Is and How to Fight It. (Chapter II)

³ See on this e.g. Michael Pröbsting: Mass Vaccination Can Make You Rich... at least if you own a pharmaceutical corporation! 22 June 2021, <https://www.thecommunists.net/worldwide/global/mass-vaccination-can-make-you-rich/>; see by the same author: COVID-19: “A Market of up to 23 Billion US-Dollar”. The big corporations in the pharmaceutical industry expect gigantic profits by the vaccine business, 12 February 2021,

However, in this essay we will not deal with the political and economic aspects of the COVID Counterrevolution – something which we have elaborated in many other RCIT documents. At this place, we will rather focus on the effects of the official pandemic policy – based on the pillars of Lockdowns, Health Pass and mass / compulsory vaccination – for public health. We will look at the development of excess mortality in Europe in the last 6-12 months and what have been the effects of the mass vaccination campaigns orchestrated by the governments and Big Pharma. This is a very understudied issue. In fact, it is characteristic for the hypocrisy of the bourgeois governments and their submissive barkers among the media, the “experts”, etc. that they ignore this question. But let us go in media res.

Excess mortality in Germany and Europe in 2021

Before we present the figures relevant for our subject, we want to point out that all tables and graphs in this essay have been taken from official agencies responsible for publishing relevant statistical material. As these institutions are strictly controlled by the capitalist state, there is no reason to believe that they would publish manipulated figures in order to undermine the prestige of the governments’ pandemic policy.

Since some time, we see a substantial increase of excess mortality in Europe among all age groups below 75 years. This trend started in early 2021 respectively, for the youth, in summer. In some countries we even see an increase of the total number in deaths. This development is not related to the so-called “second wave” of the virus which ended in spring 2021. This becomes evident if we take the figure for mortality from calendar week 16 (which began in mid-April) to week 47 (the end of November; the latest available data) and compare these with the figures for the same period in 2020.

In Germany, for example, the total number of deaths increased by +4.4% in the period of calendar week 16 and 47. This increase is not because of more deaths among the old age groups (as it was the case in 2020). It is rather caused by an increasing number of deaths in younger age groups. Mortality increased in this period in the age group of 0-50 years by +4.7%. This figure is even higher if we take only the age group of 0-30 years (+5.85%). (See Table 1 as well as Graph 1 in the Appendix)

<https://www.thecommunists.net/worldwide/global/covid-19-a-market-of-up-to-23-billion-us-dollar/>; see also by the same author: COVID-19: An Opportunity Too Good to Be Missed by the Lords of Wealth and Money (Part 1). An “official” confirmation of the Marxist analysis that the ruling class utilizes the pandemic for expanding the bonapartist state, 18 January 2021, <https://www.thecommunists.net/worldwide/global/covid-19-an-opportunity-to-good-to-be-missed-by-the-lords-of-wealth-and-money-part-1/>; COVID-19: An Opportunity Too Good to Be Missed by the Lords of Wealth and Money (Part 2). A few examples of how the monopoly capitalists rob the workers under the cover of the anti-democratic Lockdown policy, 11 February 2021, <https://www.thecommunists.net/worldwide/global/covid-19-an-opportunity-too-good-to-be-missed-by-the-lords-of-wealth-and-money-part-2/>; COVID-19: That Was A Damn Good Year ... for the Billionaires in West and East who massively gained from the anti-democratic Lockdown policy, 5 January 2021, <https://www.thecommunists.net/worldwide/global/covid-19-that-was-a-damn-good-year-for-the-billionaires-in-west-and-east/>

⁴ See on this e.g. Michael Pröbsting: The Police and Surveillance State in the Post-Lockdown Phase. A global review of the ruling class’s plans of expanding the bonapartist state machinery amidst the COVID-19 crisis, 21 May 2020, <https://www.thecommunists.net/worldwide/global/police-and-surveillance-state-in-post-lockdown-phase/>

Table 1. Total Number of Deaths in Germany between Calendar Week 16 and 47 in 2020 and 2021 ⁵

<i>Total 2020</i>	<i>Total 2021</i>	<i>Increase 2020 to 2021</i>
564,649	589,666	+4.4%
<i>0-50 Years 2020</i>	<i>0-50 Years 2021</i>	<i>Increase 2020 to 2021</i>
17,599	18,423	+4.7%
<i>0-30 Years 2020</i>	<i>0-30 Years 2021</i>	<i>Increase 2020 to 2021</i>
4,356	4,611	+5.85%

We see several similar trends in the whole of Europe. Again, we have taken the period since calendar week 16 so that the figures are not influenced by mortality caused by the “second wave” in spring. In contrast to Germany, excess mortality for the whole population in Europe declined compared with the same period in 2020 – the “year of Corona” (-8.4%). However, this decline is exclusively caused by the reduction of mortality among the age group above 75 years (which, as known, has been hardest affected by the pandemic). All other age groups have experienced a substantial *increase* in mortality. Excess mortality increased for those between 15 and 44 years by +82.1% and for those between 45-64 years by +67.9%. The only difference is that for the age group 0-14 years the increase in mortality started later – in calendar week 37. (See Table 2 as well as Graph 2 in the Appendix)

Table 2. Excess Mortality in Europe between Calendar Week 16 and 47 in 2020 and 2021 ⁶

<i>Total 2020</i>	<i>Total 2021</i>	<i>Increase 2020 to 2021</i>
7,120,295	6,522,888	-8.4%
<i>15-44 Years 2020</i>	<i>15-44 Years 2021</i>	<i>Increase 2020 to 2021</i>
58,049	105,705	+82.1%
<i>45-64 Years 2020</i>	<i>45-64 Years 2021</i>	<i>Increase 2020 to 2021</i>
541,752	909,575	+67.9%

Is excess mortality in 2021 caused by COVID?

At a first glance, this development is surprising. 2020 was the “Year of Corona”. No vaccination was in circulation. In contrast, such vaccination exists in 2021 and has been widely applied. In fact, Western Europe is the continent with the highest share of population vaccinated. Furthermore, it is the also richest continent in the world in which a better health service exists than in other regions. Nevertheless, it has also the highest number of Corona deaths! It is, to quote the Head of the World Health Organization’s Europe region, Hans Kluge, the “*epicenter*” of the global pandemic.

⁵ Statistisches Bundesamt (Destatis): Sonderauswertung Sterbefälle. Fallzahlen nach Tagen, Wochen, Monaten, Altersgruppen, Geschlecht und Bundesländern für Deutschland 2016 - 2021, published on 7.12.2021, pp. 30-32. The numbers in this tables are listed separately for each week. The calculation of the sum is ours.

⁶ EuroMomo: Graphs and maps, Exel file for the graphs on excess mortality, <https://www.euromomo.eu/graphs-and-maps/> (accessed on 14.12.2021) The numbers in this tables are listed separately for each week. The calculation of the sum is ours.

*“The European region is now the “epicenter” of the global pandemic and is on a trajectory to see another half a million deaths this winter, the head of the World Health Organization’s Europe region warned Thursday. Last week, Europe and Central Asia reported nearly 1.8 million new cases of COVID-19, accounting for 59 percent of all cases globally, Hans Kluge said during a press conference. And the region recorded 24,000 deaths, accounting for 48 percent of deaths globally, he said. Cumulatively, there are now more reported cases — 78 million — in the European region than in South East Asia, the Eastern Mediterranean, the Western Pacific and Africa combined.”*⁷

But we will discuss the issue of vaccination later. At this point we want to deal with the question if the increase of mortality among younger age groups has been caused by COVID. The answer is a definite No.

If one looks at Graph 1 showing the development of mortality in Germany (see Appendix), one can see the increasing gap between the line for 2021 and the one for 2020. At the bottom of the graph, one can also see the development of the number of people who died because of COVID. Again, one can compare the development for this year with the year before. There is hardly any difference. (If one goes to the website which shows the graph [the link is in the footnote to the graph] one can see the exact figures for COVID death for each week by moving the mouse cursor directly on the lines.).

This fact is also evident when one takes into account the extremely small share of people below the age of 50 or 60 years among the COVID deaths. In Germany, for example, the share of those between 0 and 49 years among the COVID deaths in 2021 is only 1,45%. If we include the next age group – i.e. those between 50 and 59 years – this share rises to the still very small number of 5,13%. In contrast, those 70 years and older constitute the large junk of all COVID deaths – 85,45%. (See Table 3)

Germany is no exception. If we take the figures for Sweden, we see exactly the same picture. The share of those between 0 and 49 years makes only 1,44% of all COVID deaths in 2020-21. If we add those between 50 and 59 years, this share still constitutes only 4,03%. In contrast, again, those in the age group of 70 years and older make the large majority of all COVID deaths – 85,88%. (See Table 4)

⁷ Helen Collis: WHO: Europe region ‘epicenter’ of coronavirus pandemic, 4 November 2021, <https://www.politico.eu/article/who-europe-region-epicenter-of-coronavirus-pandemic/>

Table 3. Number of Coronavirus (COVID-19) Deaths in Germany in 2021, by Age ⁸

<i>Age Group</i>	<i>Number of Deaths</i>	<i>Share</i>
0-9 Years	21	0.02%
10-19 Years	20	0.02%
20-29 Years	112	0.11%
30-39 Years	352	0.34%
40-49 Years	998	0.96%
50-59 Years	3,825	3.68%
60-69 Years	9,783	9.42%
70-79 Years	21,480	20.68%
80-89 Years	45,772	44.06%
90 Years and Older	21,516	20.71
Total	103,879	100%
<i>Share of 70 Years and Older</i>		85,45%
<i>Share of 0-49 Years</i>		1,45%
<i>Share of 0-59 Years</i>		5,13%

Table 4. Number of Coronavirus (COVID-19) Deaths in Sweden in 2020 and 2021, by Age ⁹

<i>Age Group</i>	<i>Number of Deaths</i>	<i>Share</i>
0-9 Years	9	0.06%
10-19 Years	5	0.03%
20-29 Years	26	0.17%
30-39 Years	48	0.32%
40-49 Years	126	0.83%
50-59 Years	394	2.59%
60-69 Years	1,083	7.12%
70-79 Years	3,417	22.45%
80-89 Years	6,179	40.59%
90 Years and Older	3,933	25.84
Total	15,221	100%
<i>Share of 70 Years and Older</i>		85,88%
<i>Share of 0-49 Years</i>		1,44%
<i>Share of 0-59 Years</i>		4,03%

Finally, we shall also quote the German *Statistical Federal Agency* (DESTATIS) which commented the increase in mortality in 2021 with the cautious words: “*The official number of COVID deaths can explain this development only partly.*” ¹⁰

⁸ Number of coronavirus (COVID-19) deaths in Germany in 2021, by gender and age, <https://www.statista.com/statistics/1105512/coronavirus-covid-19-deaths-by-gender-germany/> (accessed on 15.12.2021)

⁹ Folkhälsomyndigheten: Antal fall av covid-19 i Sverige, <https://experience.arcgis.com/experience/09f821667ce64bf7be6f9f87457ed9aa> (accessed on 15.12.2021)

In summary, we can safely conclude that at the increase of mortality among those below the age of 60 or 70 years has not been caused by COVID. There must be other factors which caused this worrying development.

What could be the causes of such a significant increase of excess mortality?

So, if COVID is not the main reason for the increase of mortality among younger age groups, what else could have caused this development? Unfortunately, we can only identify several likely causes since no serious studies exist about this issue. Such a lack of attention is not very surprising.¹¹ Despite the fact that COVID represents only a small proportion of all death, the total focus of official politics, media, as well as of scientific research is on the SARS-CoV-2 virus. The reason for this is obvious: COVID can be exploited for gigantic business projects, for creating fear among the population as well as for justification of the expansion of the police and surveillance state apparatus. Other and more widespread diseases like cancer, diabetes, Tuberculosis in India, Cholera in Nigeria,¹² etc. are not useful for such political and economic interests (at least until now).

Nevertheless, we think that we can name a few factors which might help to understand the increasing mortality among younger age groups. Before doing so, allow us to mention a curious reason which has been named by the above-mentioned German DESTATIS. In a press release this agency refers to the heat wave in the summer as a possible factor.¹³ While it is true that it was hot in summer in Europe, one can not fail to note that heat is dangerous for elder people but – under normal circumstances – not for people below the age of 50 years!

So, what could explain the increasing mortality among age groups below 75 years? First, there has been a dramatic decline of visits to doctors and hospitals by people with other, non-COVID illnesses. According to DESTATIS there were 2.5 million (or -13.1%) less hospital treatments in Germany in 2020. Likewise, there have been 690,000 (or -9,7 %) less surgeries in hospitals.¹⁴

Such a development has not been limited to Germany. The new *“State of Health in the EU: Companion Report 2021”* remarks: *“In all European countries, measures to boost care capacity for COVID-19 patients*

¹⁰ DESTATIS: Sterbefälle und Lebenserwartung Sonderauswertung zu Sterbefallzahlen der Jahre 2020/2021, 7. Dezember 2021, <https://www.destatis.de/DE/Themen/Gesellschaft-Umwelt/Bevoelkerung/Sterbefaelle-Lebenserwartung/sterbefallzahlen.html>

¹¹ There exists a few articles which also discuss this issue: Gerd Roettig: Politisierte Statistik, https://www.heise.de/tp/features/Politisierte-Statistik-6292579.html?wt_mc=nl.red.telepolis.telepolis-nl.2021-12-11.link.link; Susan Bonath: Wachsende Übersterblichkeit nun auch bei Jüngeren: An Corona kann das nicht liegen, 12 December 2021, <https://de.rt.com/meinung/128273-wachsende-uebersterblichkeit-nun-auch-bei-juengeren/>

¹² See on this e.g. RSV: Cholera not Omicron should be the major concern for Public Health in Nigeria! 6th December, 2021, <https://www.thecommunists.net/worldwide/africa-and-middle-east/cholera-not-omicron-should-be-the-major-concern-for-public-health-in-nigeria/>

¹³ DESTATIS: Sterbefälle und Lebenserwartung Sonderauswertung zu Sterbefallzahlen der Jahre 2020/2021

¹⁴ DESTATIS: Corona-Pandemie führt zu Übersterblichkeit in Deutschland, Pressemitteilung Nr. 563 vom 9. Dezember 2021, https://www.destatis.de/DE/Presse/Pressemitteilungen/2021/12/PD21_563_12.html

were accompanied by a slowdown or temporary suspension of non-urgent, non-COVID-19 hospital care. Outpatient activity followed a similar trend.”¹⁵

It is difficult to overestimate the dramatic consequences of such a collapse in public health! One indication for this shameful development is the fact that many cases of cancer will have not been diagnosed in time. “Across Europe, estimates have been developed indicating up to one million potentially undiagnosed cancer cases due to the disruption of health systems from COVID-19.”¹⁶ As it is well known, cancer can be treated with a good chance of success if it is detected in an early stage. If it is only detected later, prospects are much worse.

Hence, we see how the capitalist pandemic policy created a catastrophe with devastating long-term consequences. The governments failed to expand the public health sector so that both – COVID as well as non-COVID cases – could have been treated in time. Until today they have refused to build additional hospital capacities, to improve the working conditions for an overloaded personal, to increase the wages, to recruit additional doctors and nurses and to invest in the training of new ones. Nothing of this was done!

Instead, the capitalist governments even reduced capacities in public health. In Germany, for example, there are 4,000 fewer intensive care beds available today than a year ago!¹⁷ So, in the midst of the pandemic, the public health sector has been even reduced! Similar developments have taken place in many other European countries.

To all this, one must add the enormous public fear which the governments and media intentionally provoked. As we reported in an article last year, the Austrian Chancellor said in March 2020, in an internal meeting with advisers, that the population “does not take the danger of the virus seriously enough”. The Chancellor then stated, according to the minutes: “Kurz makes clear that the people should be afraid of being infected respectively should be afraid that their parents or grandparents could die.” A few days later Kurz said in a public speech: “We will have soon a situation in Austria where everyone will know somebody who has died because of the Corona Virus.”¹⁸ The same methods of scaremongering have been deployed in nearly all other countries. It is therefore hardly surprising that many people have been afraid of going to a doctor or to a hospital!

Devastating mental consequences – particularly for youth

There are also additional factors which certainly will have played a role in the increase of mortality and will continue to do so in the future. One of these is the horrible consequence of the capitalist

¹⁵ State of Health in the EU: Companion Report 2021, Commission Staff Working Document, SWD(2021) 389 final, Brussels, 10 December 2021, p. 12

¹⁶ State of Health in the EU: Companion Report 2021, Commission Staff Working Document, SWD(2021) 389 final, Brussels, 10 December 2021, p. 13

¹⁷ Deutsche Welle: Germany's ICU medics expect COVID surge before Christmas, 01.12.2021. <https://www.dw.com/en/germanys-icu-medics-expect-covid-surge-before-christmas/a-59985778>

¹⁸ See on this, with the references for the quotes: Michael Pröbsting: COVID-19 Crisis: Internal Document Reveals Austrian Government Plan to Spread Fear, 28 April 2020, https://www.thecomunists.net/worldwide/europe/covid-19-crisis-internal-document-reveals-austrian-government-plan-to-spread-fear/#_edn1

pandemic policy for mental health. This issue is particularly relevant for youth. Despite the fact that this age group has hardly anything to fear from the virus, the governments have imposed a policy which massively violates their rights and their conditions for development.

A recently published study by the *United Nations Children's Fund* reports: "As well as the *Life in Lockdown* report, a number of other studies have surveyed research from around the world. One of the most widely reported is a meta-study in *JAMA Pediatrics*, released in August 2021, that pulled together results from 29 studies worldwide, covering around 80,000 children and adolescents under 18.¹⁹ According to the study, rates of clinically significant generalized depression and anxiety doubled over the course of the pandemic, with one in four youth experiencing depression and one in five anxiety."¹⁹

Another study reports: "The prevalence of anxiety and depression in early 2020 was double or more the level observed in previous years in a number of countries, including Belgium, France, the United Kingdom and the United States (...) In Japan, 31% of 20-29 year-olds were experiencing symptoms of depression, compared to 18% of older adults, based on survey responses from July 2020."²⁰

And an EU study reports: "COVID--19 particularly affected the mental health of young people. In Belgium, around 30% of those aged 18-29 had symptoms of depression in April 2020 — a rate about three times higher than in 2018. The situation further deteriorated from the second wave of the pandemic: nearly 40% reported symptoms of depression in March 2021."²¹

According to a survey from the *American Psychological Association*, more than seven in 10 among young adults (aged 18 to 23 years) said that they experienced common symptoms of depression.²²

While it is impossible to make calculation about the consequences of such a deterioration of mental health for mortality rates, it is obvious that the Lockdown policy must have strong effects, likely in the short-term and definitely in the long-term!

There is no reason for optimism concerning this troublesome development. One must expect that mental health of people will deteriorate even more once the governments have established the "Health Pass" system. This means a tightly woven comprehensive system of control and restriction of all aspects of life. Most likely it will be combined with regular mandatory vaccination as well as repeated Lockdowns.

Such a development is completely cynical. As we emphasized repeatedly, the SARS-CoV-2 virus is indeed dangerous for people of high age as well as those with pre-existing diseases. However, for other age groups it represents only a limited danger. Various scientific studies have demonstrated that the infection fatality rate of COVID is about 0,15%.²³ According to a recently published global study –

¹⁹ United Nations Children's Fund: *The State of the World's Children 2021: On My Mind – Promoting, protecting and caring for children's mental health*, UNICEF, New York, October 2021, p. 102

²⁰ OECD: *Health at a Glance 2021: OECD Indicators*, OECD Publishing, Paris 2021, <https://doi.org/10.1787/ae3016b9-en>, p. 55 and 57

²¹ *State of Health in the EU: Companion Report 2021*, Commission Staff Working Document, SWD(2021) 389 final, Brussels, 10 December 2021, p. 15

²² More than 7 in 10 Gen-Zers report symptoms of depression during pandemic, survey finds, 21 October 2020, <https://www.cnbc.com/2020/10/21/survey-more-than-7-in-10-gen-zers-report-depression-during-pandemic.html>

²³ See e.g. John P. A. Ioannidis: Reconciling estimates of global spread and infection fatality rates of COVID-19: An overview of systematic evaluations, in: *European Journal of Clinical Investigation*, May 2021, Vol. 51(5), doi: 10.1111/eci.13554

covering 14 countries – the median infection fatality rate for those below the age of 50 years is extremely low. (See Table 5)

Table 5: Median Infection Fatality Rate by Age Groups, 0-69 Years ²⁴

<i>Age Group</i>	<i>Median Infection Fatality Rate</i>
0-19 years	0,0027%
20-29 years	0,014%
30-39 years	0,031%
40-49 years	0,082%
50-59 years	0,27%
60-69 years	0,59%

Let us finally also draw attention to a statistic published recently by the EU and the OECD. According to this study, life expectancy at birth in the EU decreased from 81.3 to 80.6 years in 2020, i.e. by 0.86%. However, the same graph also shows that in 2015 life expectancy at birth had also declined: from 80.8 to 80.5 years, i.e. by 0,38%. The reason for this development was that Europe experienced a severe influenza season in winter 2014/15. Hence, while we see a worse deterioration of life expectancy in 2020 than in 2015, it can hardly be called such an apocalyptic and unprecedented turn which could have justified putting the whole society under a never-ending state of emergency! (See Graph 3 in the Appendix)

In summary, we can confidently conclude that the effects of the capitalist pandemic policy – characterized by a state-orchestrated campaign of public fear, repeated Lockdowns, introduction of a “Health Pass” system and mass vaccination – have devastating consequences for the popular masses and, in particular, for younger people. This policy has most likely played a decisive role in the increasing mortality rates among the mass of the population in Europe in 2021.

Excuse: A note on state-monopoly capitalist health policy

As the focus of this essay is the development of mortality and its relation to the official pandemic policy, we will not dwell on the political background of this development. Let us only briefly note at this point the current mass vaccination campaign by governments is a key feature of a historic transformation which is taking place in the present period – from the (limited) bourgeois-democratic form to a chauvinist-bonapartist, more totalitarian form of capitalism.

In our book on the COVID Counterrevolution, published in April 2020, we referred to Lenin’s analysis of state-monopoly capitalism and explained: *“While the course of the 20th century demonstrated that the concrete relationship of state and monopolies can and actually does change depending on global and national*

²⁴ Cathrine Axfors, John P.A. Ioannidis: Infection fatality rate of COVID-19 in community-dwelling populations with emphasis on the elderly: An overview, 13 July 2021, <https://www.medrxiv.org/content/10.1101/2021.07.08.21260210v1.full>

*developments, the close collaboration and interweaving of capitalist state and monopolies has remained a key characteristic of this system. This is even more the case in periods like the current one when capitalism is in a state of deep crisis and decay.”*²⁵

The last one and a half years have fully confirmed this assessment. On the economic level we see capitalist governments – from China to the U.S. – implementing unprecedented Keynesian spending programs financed by new public debts. In the field of health policy, we also see an unprecedented development as the same governments turn to a state-regulated policy of “Health Pass” and to mass or compulsory vaccination.

Hence, we can speak about a *state-monopoly capitalist health policy* which closely combines the business interests of monopolies (pharma, IT, etc.) with the political interests of the ruling class of expanding the chauvinist-bonapartism state apparatus. It is certainly no exaggeration to characterize the current huge effort of COVID Counterrevolution as one of the largest state-monopoly capitalist project in modern history – at least since the period of fascism and World War II.

We have repeatedly pointed out that it is astonishing how the opportunistic left completely ignores this development. For them, health policy is something which hovers above the class society and its contradictions. If the ruling class – all around the world – imposes austerity policy resulting in increasing social inequality, these leftists find no difficulty in identifying and denouncing such developments. The same is the case when it comes to the economic policy of privatization or the militaristic policy of armament. Despite the fact that all ruling classes on the globe are following such a policy, the left (rightly) opposes it.

But when it comes to health policy, the opportunistic left stops thinking in class terms. It denies that the COVID policy with its Lockdowns, Health Pass and mass vaccination is driven by the political and economic interests of the monopoly bourgeoisie. No, according to these naïve simpletons, the health policy in times of a pandemic is motivated by ... the need to protect the society! It must be the case because “everybody” says so and all governments in the world are following this policy – this is the rational for the opportunist left (consciously or unconsciously)!

Of course, Marxists know that such a policy of capitulation does not happen for the first time. Already before, reformist and centrist forces did join the ideological circus of the ruling class in times of crisis. In 1914, they all supported their imperialist fatherland by referring to the “danger for their people”. The same in 1939-45 when they rallied behind the Western imperialist powers in their war against Nazi-Germany. From one day to the other, “democracy” and “fatherland” had become class-neutral categories. Today, it is the same with the combat against the pandemic!

²⁵ See the above-mentioned book by Michael Pröbsting: *The COVID-19 Global Counterrevolution: What It Is and How to Fight It*, p. 43

What are the effects of the state-monopoly capitalist vaccination campaign?

Let us now discuss the effects of the state-directed vaccination campaign. Here too, we can see that capitalist governments and their institutions as well as the monopolies are orchestrating a wave of studies which shall prove the effectiveness of the currently available vaccines.

Of course, we are not in a position to judge on all these studies. However, one must take into account the extremely politicized character of the COVID policy from the very first minute – in contrast to past pandemics like the so-called “Asian Flu” in 1957-58 or the so-called “Hong Kong Flu” in 1968-69 which have also cost millions of lives. Hence, the starting point for socialists, in fact for any thinking person, has to be skepticism and mistrust against all these commissioned “scientific” studies. This does not mean that they are necessarily wrong or a fraud. A number of these might be even correct or at least partly correct. But approaching them with naïve believe as the ruling class wants us to do, is utter idiocy and can only result in criminal disorientation of the working class and the oppressed. No, one should be cautious about the value of such studies confirming the narrative of governments’ policy. Various often cited studies have already proven to be fake and had to be retracted.

John Ioannidis, a renown medical scientist and Stanford University professor and one of the few top-ranking scientists who has managed to withstand the pressure of the ruling class, has pointed to this problematic development. In a recently published article, he explains the massive lowering of scientific standards in the course of the COVID pandemic – “to fuel political warfare that has nothing in common with scientific methodology.” He provides examples showing that “each and everyone” has published something on this issue.

He notes, not without irony: “The pandemic led seemingly overnight to a scary new form of scientific universalism. Everyone did COVID-19 science or commented on it. By August 2021, 330,000 scientific papers were published on COVID-19, involving roughly a million different authors. An analysis showed that scientists from every single one of the 174 disciplines that comprise what we know as science has published on COVID-19. By the end of 2020, only automobile engineering didn’t have scientists publishing on COVID-19. By early 2021, the automobile engineers had their say, too.”²⁶

Such suspicion is even more justified if we remember what these scientists did already “proof” in the past two years. First, they did “proof” that Lockdowns are useful and necessary – despite the fact that such an instrument had never been applied before against pandemics. Not only this: such a public health policy had also never been advocated by any scientist before the beginning of the COVID Counterrevolution in spring 2020! As a matter of fact, as Prof. Ioannidis and others demonstrated, Lockdowns have hardly any effect.²⁷ Even the countries with the most draconic Lockdown policy (like China and Australia) could not eradicate the virus and have been forced to repeat again and again putting millions of people under curfew.

²⁶ John P.A. Ioannidis: How the Pandemic Is Changing the Norms of Science. Imperatives like skepticism and disinterestedness are being junked to fuel political warfare that has nothing in common with scientific methodology, September 09, 2021, <https://www.tabletmag.com/sections/science/articles/pandemic-science>

²⁷ John Ioannidis et al: Assessing Mandatory Stay-At-Home and Business Closure Effects on the Spread of COVID-19, in: European Journal of Clinical Investigation, April 2021, Vol. 51(4), doi:10.1111/EJC.13484

Then, the “scientists” in the payroll of the capitalist state and corporations denounced Sweden – one of the few countries which refused to impose Lockdowns. Just remember the myriads of scientists who published “studies” showing how devastating Sweden’s pandemic policy supposedly is! As a matter of fact, Sweden has come much better through the pandemic than most other countries in Europe.²⁸ Today, these critical “experts” have become silent on this issue and one or the other of them is forced to admit that this Nordic country did “not so bad”.

Then, the governments and their media and scientists claimed that the vaccines are highly effective, that they would stop the transmission of the virus and that they would make you safe, i.e. that vaccinated people would not die or get hospitalized. It was this claim which the governments in Europe have used to justify the Apartheid-like discrimination of people who have not been vaccinated. Of course, as we did explain, the real reason for the discrimination of healthy but unvaccinated people has nothing to do with science but was purely political motivated. The goal has been to force people to get a jab so that they supposedly “get back their freedom”.

Again, the capitalist governments got a number of “experts” subscribing to their policy and lending it “scientific” credentials. But, once more, they have been proven wrong. A study published in *The Lancet* has shown that secondary attack rates among household contacts exposed to fully vaccinated index cases was similar to household contacts exposed to unvaccinated index cases (25% for vaccinated vs 23% for unvaccinated).²⁹

Another study, published by a large team of scientists of the U.S. CDC, basically arrived at the conclusion that there is no significant difference in the transmission of the virus between people vaccinated and unvaccinated. “[C]linicians and public health practitioners should consider vaccinated persons who become infected with SARS-CoV-2 to be no less infectious than unvaccinated persons.”³⁰

Meanwhile, some governments – like those in Portugal and Italy – are indirectly forced to admit this fact as they introduce mandatory testing for foreigners visiting their country, even if they are fully vaccinated.³¹

Governments and their scientists also said that vaccinations would allow people to face no longer any lockdowns or other restrictions. Well, you know what happened with this claim!

There are numerous studies which claim that vaccinations are effective. However, there exist also an increasing number of studies and reports which show that the share of vaccinated people is high among those infected.

²⁸ See on this e.g. Michael Pröbsting: COVID-19: Sweden's Total Mortality in 2020. Once again, the figures demonstrate that this is a serious but not unprecedented pandemic, 23 January 2021, <https://www.thecommunists.net/worldwide/global/covid-19-sweden-s-total-mortality-in-2020-compared-with-past-years/>; by the same author: COVID-19: A Comparison of Historical Data. An analysis of the COVID-19 death figures and those of past pandemics and climate disasters based on data from the World Bank, 19 January 2021, <https://www.thecommunists.net/worldwide/global/covid-19-a-comparison-of-historical-data/>

²⁹ Anika Singanayagam, Seran Hakki, Jake Dunning and others: Community transmission and viral load kinetics of the SARS-CoV-2 delta (B.1.617.2) variant in vaccinated and unvaccinated individuals in the UK: a prospective, longitudinal, cohort study, *The Lancet*, 28 October 2021, [https://doi.org/10.1016/S1473-3099\(21\)00648-4](https://doi.org/10.1016/S1473-3099(21)00648-4)

³⁰ Phillip P. Salvatore and others: Transmission potential of vaccinated and unvaccinated persons infected with the SARS-CoV-2 Delta variant in a federal prison, July–August 2021, medRxiv 2021.11.12.21265796; doi: <https://doi.org/10.1101/2021.11.12.21265796>

³¹ Ralf Streck: Die 2G-Linie aus Brüssel zerbröselt, 16. Dezember 2021, https://www.heise.de/tp/features/Die-2G-Linie-aus-Bruessel-zerbroeselt-6296913.html?wt_mc=nl.red.telepolis.telepolis-nl.2021-12-16.link.link

This has pushed many supporters of the vaccination campaign to emphasize that while this might be the case, the jabs are effective insofar as the share of vaccinated people is lower among those hospitalized or dead. However, here again, there are more and more reports which contradict this claim.

In response, the supporters of the vaccination campaign argue that the reason for such a development is because a new variant of the virus ("*Delta*") has emerged against which the vaccine does not work. From this, they conclude that a "third booster" shall be necessary and currently the governments work hard to force people to get vaccinated once more.

However, as everyone knows, meanwhile another variant of the virus has emerged ("*Omicron*") and experts warn already that the existing booster might not work against it.³² The solution? Get another booster!

Well, it is obvious what this is boiling down to. Every few months another variant of the virus emerges and, hence, people should be forced to get another jab. It does not need much imagination to understand that such a vaccination policy is extraordinary profitable for the pharma corporations! Likewise, it is clear that the governments are highly interested to implement such a policy. First, they are closely connected with the pharma corporations and have long-term and highly profitable contracts with them. And, secondly, they can politically utilize the need for regularly boosts as a pretext for implementing and expanding a comprehensive health control system ("*Health Pass*").³³ These political reasons alone have been sufficient for the RCIT to oppose the policy of Health Pass and mass vaccination since the very beginning.

Why should young and middle-aged people be forced to get a jab?!

However, we repeat that the focus of this essay is not the political and economic background of the mass vaccination campaign but its consequences for public health. As we did already say, we are not in a position to make a concrete and scientific assessment about the effectiveness of the currently available vaccines. However, this does not mean that one can not draw any conclusions.

First, is it well-known that vaccines – like medicine in general – does not equally affect all groups of the population. Feminists have pointed out this fact for long as pharma corporations have usually designed drugs with a focus on men and their biological specifics. Likewise, there are different effects of drugs on different age groups, races and social classes (where people often have different health conditions due to different living conditions). Hence, for example, it is possible that the new COVID vaccines have a positive effect for old people but not for young and middle-aged people.

³² See e.g. RCIT: "*Omicron*": A Pretext for Exacerbated Attacks of the COVID Counterrevolution. Down with chauvinist travel bans against Southern African countries! No to Lockdowns and compulsory vaccination! 1 December 2021, <https://www.thecommunists.net/worldwide/global/omicron-is-pretext-for-another-attack-of-covid-counterrevolution/>

³³ On our analysis of the "*Health Pass*" and the strategy against it see the above-mentioned RCIT Manifesto: "*Green Pass*" & Compulsory Vaccinations: A New Stage in the COVID Counterrevolution

This is particularly relevant for the issue of the side effects of these vaccines. It could be the case that the positive effects outweigh the negative side-effects in the case of old people but not in the case of young and middle-aged people.

To put it in stronger terms: It seems absurd to us – simply from a public health point of view – to push or even force the mass of the population (i.e. the young and middle-aged people who still have many years and decades to live) to get vaccinated if they are not under any particular danger by the virus!

All this is even more true if we take into account that the vaccines – even if they have a certain positive impact for old people – are not particularly effective. If every new mutation of the virus makes the vaccine ineffective, it can't be very good. And if the consequence of this is that people must get vaccinated every few months, we can definitely speak about a disastrous development from a public health point of view!

Let's be clear: never in modern history did vaccinations campaigns exist where the vaccines got ineffective after such a short time and where people had to get a shot repeatedly every few months! It is self-evident that this can not have healthy effects for the human body! "At best" it is like taking a drug against pain many times. The first time it works but then the body gets used and the drug gets less and less effective. And in the end, such a procedure has long-term bad effects for the person.

Add to all these considerations the well-known fact that the current vaccines have been developed in profit-driven haste and are not tested for long-term side-effects. Why should people take all these risks and against their will?!

A comparison with past examples of mandatory vaccination is misplaced

For these reasons we strongly reject the argument of supporters of the capitalist pandemic policy who justify mandatory vaccination by referring to similar examples in the past (e.g. against smallpox or Tuberculosis). First, these are well-known and particularly dangerous diseases who often threaten the lives of children and youth. Secondly, the vaccines against such diseases had been tested and it was proven that the advantages outweigh any potential detriments.

And, thirdly, the mandatory vaccination campaign against SARS-CoV-2 is very clearly driven by political and economic interests, not by health considerations. Never before has a health policy been so directly linked to the business interests of a few pharma corporations, never before was that part of a political project of replacing (limited) bourgeois democracy with a semi-totalitarian regime.

This is particularly evident given the draconic response of the capitalist governments against criticism coming from scientists, doctors and health workers. Prof. Ioanidis and many other scientists who signed the famous Great Barrington declaration have been slandered by the supporters of the capitalist pandemic policy.³⁴ As we are writing these lines, Austria's public news network reports that 200 doctors who have published an open letter criticizing mRNA vaccinations – a courageous action

³⁴ See on this e.g. Michael Pröbsting: COVID-19: The Great Barrington Declaration is indeed Great! Numerous medical scientists protest against the reactionary lockdown policy, 11 October 2020, <https://www.thecommunists.net/worldwide/global/covid-19-the-great-barrington-declaration-is-indeed-great/>

given the massive pressure they are facing – have been threatened by the state health authorities with a ban from their profession!³⁵ Similar developments are taking place in many other countries.

Furthermore, it is well-known that – despite huge pressure from authorities – large sectors of health workers are opposed to mandatory vaccination. In Ontario and Quebec, two provinces in Canada, thousands of health workers protested against mandatory vaccination and finally forced the authorities to back down.³⁶ Likewise, many health workers protested in France and about 3,000 of them have been suspended.³⁷ Similar protests have taken place in Greece and many other countries.³⁸ In Austria, about 30% of the 130,000 health workers are still not vaccinated, according to official estimations – despite massive pressure from the authorities.³⁹ Most importantly, just a few weeks ago the health workers in Martinique and Guadeloupe – together with the popular masses – launched a general strike and an uprising against, among others, mandatory vaccination for health workers.⁴⁰

The very fact that many health workers – i.e. people with a lot of experience in medical issues – are opposing mandatory vaccination, and all this despite massive pressure from the capitalist state, reflects the fact that such a draconic measure has no scientific basis.

In summary, we see that the current vaccination campaign is a gigantic project orchestrated by the capitalist state – hand in hand with Big Pharma, media and the whole bourgeois establishment. At the same time, this attack has provoked mass protests all over the world. There can be no doubt that this issue is a fundamentally political issue, a key question of the global class struggle today. It can not be compared by any standards with examples of mandatory vaccination in the past.

Excuse: The COVID Counterrevolution's slogan "*trust the science*" is the modern version of America's maxim "*In God we trust*"

The barkers of the COVID Counterrevolution like to proclaim against their critics that one should "*trust the science*". We certainly trust science, but we don't trust those scientists who are on the payroll of the capitalist state and Big Pharma! In fact, the official banner of the COVID Counterrevolution – "*trust the science*" – is nothing but the modern equivalent of America's maxim "*In God we trust*".

³⁵ ORF: ÖGK droht mit Berufsverbot, 16.12. 2021, <https://orf.at/stories/3240427/>

³⁶ See e.g. Jessica Patton: Ontario will not mandate COVID-19 vaccines for hospital workers, Global News, 3 November 2021, <https://globalnews.ca/news/8347039/ontario-covid-mandatory-vaccine-hospital-workers/>

³⁷ French hospital worker on hunger strike over vaccine mandate, 16 September 2021, <https://www.aljazeera.com/news/2021/9/16/french-hospital-worker-on-hunger-strike-over-vaccine-mandate>

³⁸ Elena Becatoros: Greek health care workers protest against mandatory vaccines, 26.8.2021, <https://apnews.com/article/europe-business-health-coronavirus-pandemic-62c084d0fa59fa730bf8f54632d2097e>

³⁹ ORF: Drei von zehn Pflegepersonen sind ungeimpft, 16.12.2021, <https://orf.at/stories/3240425/>

⁴⁰ See on this e.g. Michael Pröbsting: Martinique & Guadeloupe: A First Victory against the COVID Counterrevolution! Popular uprisings forces the French government to delay the implementation of compulsory vaccination and to offer talks about autonomy, 28 November 2021, https://www.thecommunists.net/worldwide/latin-america/martinique-guadeloupe-popular-uprising-against-the-covid-counterrevolution/#anker_1; by the same author: Martinique & Guadeloupe: General Strike and Popular Uprising against the COVID Counterrevolution! This is the road which the mass protests in Europe should take! 26 November 2021, <https://www.thecommunists.net/worldwide/latin-america/martinique-guadeloupe-popular-uprising-against-the-covid-counterrevolution/>

Marxists reject both the old as well as the new ideological leitmotif of the ruling class! The way how science is applied, which interests it serves, on which issues scientists are researching, etc. – all this does not exist independently of the classes which dominate in the society. More concretely, all this is closely linked with the question if scientists research at the behest of a corporation, if the university where they are employed is financially dependent on donations from corporations, if the state authorities put pressure on scientists on public institutions and, let's not forget this, if a given scientist is interested in making career and “adapts” his or her results for such a purpose.

It is unworthy for a Marxists to forget all these basic truths. Particularly in times like today, we need to remind ourselves that the large majority of scientists – like intellectuals in general – work for the interests of the ruling elite in their country. This has always been the case – in countries ruled by fascist forces, in a bourgeois democratic system as well as under Stalinism.

The task of socialists is not, and never can be, to “trust the scientists” in the payroll of the capitalist state and corporations. It is rather to free science and the scientific community from the shackles of state-monopoly capitalism. Science must be free from power and profit!

It is only in a socialist society without classes where science can prosper and where scientists will work free from the interests of a small powerful minority. It is only under such conditions that science will truly serve the people!

Concluding Theses

1. In the present essay we have shown that mortality figures in Europe for people below the age of 60, 70 years have increased in 2021 compared with 2020 – the “Year of Corona”. This has not been caused mainly by the COVID as this virus is only of negligible danger for age groups up to 50, 60 years.
2. Furthermore, we have demonstrated that the official pandemic policy – characterized by a state-orchestrated campaign of public fear, repeated Lockdowns, introduction of a “Health Pass” system and mass vaccination – has devastating consequences for the popular masses, in particular for younger people. Hence, the RCIT calls this policy the *COVID Counterrevolution*.
3. This policy has resulted in the fact that many illnesses have remained undetected or untreated. For example, according to official estimations there are up to one million potentially undiagnosed cancer cases in Europe. In addition, mental diseases – in particular among young people – have dramatically increased. This development is scandalous since young people are not under serious danger by the virus but are facing now long-term damages resulting from the consequences of the capitalist COVID policy.
4. The current official COVID policy can be characterized as a *state-monopoly capitalist health policy* which closely combines the business interests of monopolies (pharma, IT, etc.) with the political interests of the ruling class of expanding the chauvinist-bonapartism state apparatus. We think that it constitutes the largest state-monopoly capitalist project in modern history – at least since the period of fascism and World War II.

5. The opportunist left has shown incapable to understand the character of this reactionary policy since the very beginning. As a result, they capitulate to this policy and act as its “critical” supporters – similar to the reformists during World War I and II who defended the imperialist “fatherland”.

6. The current mass vaccination campaign is mainly driven by political and economic interests, not by considerations of public health. Governments and corporations have orchestrated a series of studies which shall show the effectiveness of vaccinations. It is difficult to make an exact judgement on this issue as there exist also various other studies which show a high share of vaccinated people among those hospitalized or dead.

7- The RCIT opposes the campaign for mass vaccination – and even more so for compulsory vaccination – first of all for political reasons. This campaign is a crucial part of an anti-democratic offensive of the ruling class (“Health Pass” system).

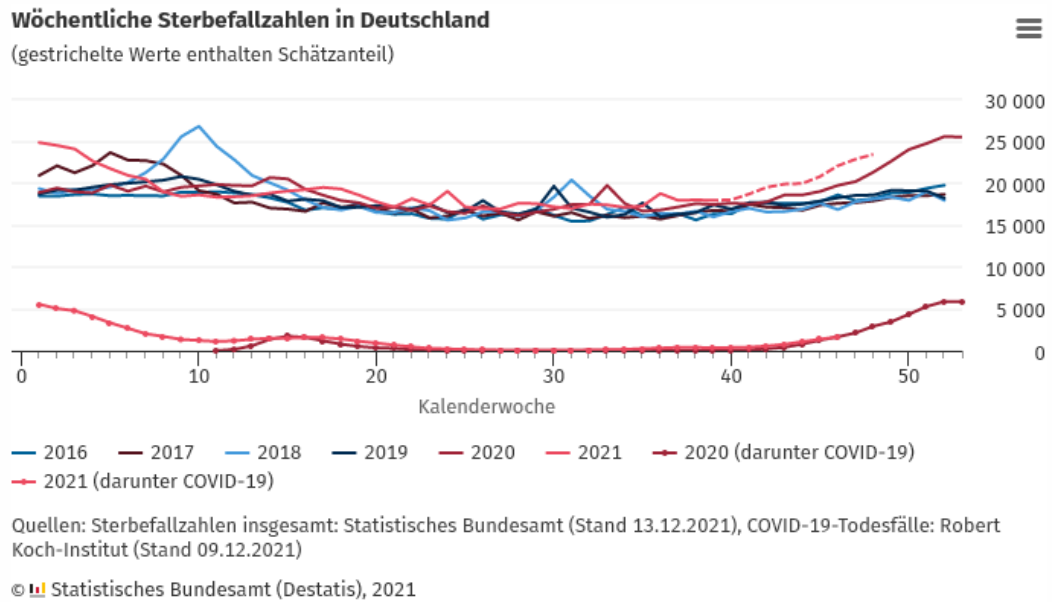
8. There are various indications which show that the policy of vaccination is not particularly effective. People vaccinated can transmit the virus to a similar degree like unvaccinated people. There is also a sizable number of vaccinated people dying from the virus. Even more so, the vaccination loses its protection after a few months. Every new mutation of the virus makes the existing vaccination ineffective. As a result, the number of infections as well as hospitalization and deaths are rising again. The answer of the ruling class – mandatory vaccination for all with boosters every few months – is an extremely dangerous policy, both from a democratic as well as a public health point of view.

9. Criticism from the supporters of the official pandemic policy who say one should “*trust the science*” must be strongly rejected. In fact, this motto is nothing but the modern equivalent of America’s maxim “*In God we trust*”. While socialists consider progress of science as essential for humanity’s future, they must remain critical towards the research of scientists who are in the payroll of the capitalist state and the corporations.

10. The task of Marxists is rather to free science and the scientific community from the shackles of state-monopoly capitalism. Science must be free from power and profit! Only in a socialist society without classes, science can prosper, and scientists can work free from the interests of a small powerful minority.

Appendix

Graph 1. Weekly Deaths in Germany 2016-2021 (incl. COVID Deaths) ⁴¹



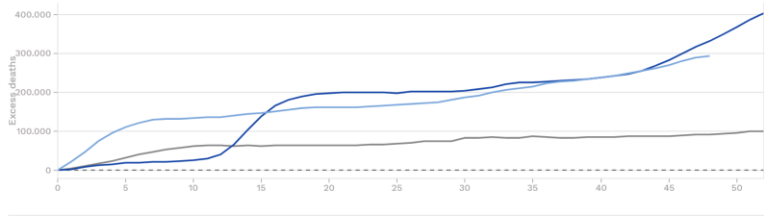
Graph 2. Excess Mortality in Europe by Age Groups in 2019, 2020 and 2021 ⁴²

⁴¹ Statistisches Bundesamt (Destatis): <https://www.destatis.de/DE/Themen/Querschnitt/Corona/Grafik/Interaktiv/woechentliche-sterbefallzahlen-jahre.html?nn=209016> (accessed in 16.12.2021)

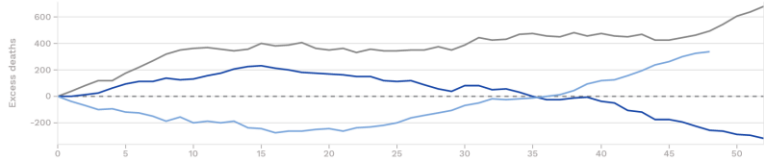
⁴² EuroMomo: Graphs and maps, <https://www.euromomo.eu/graphs-and-maps/> (accessed on 14.12.2021)

..... Baseline — 2019 — 2020 — 2021

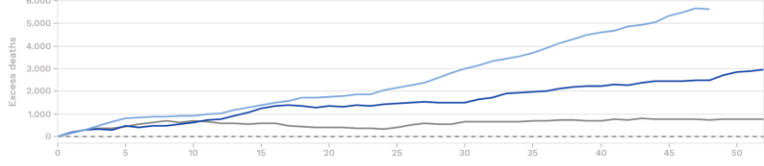
All ages



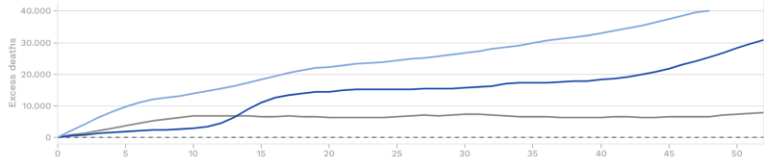
0-14 years



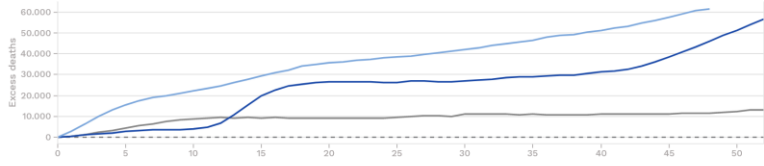
15-44 years



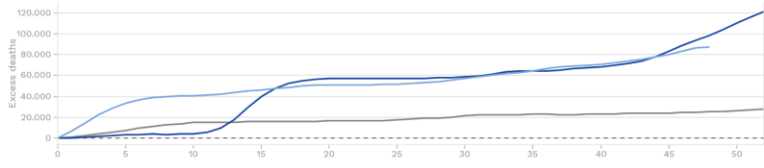
45-64 years



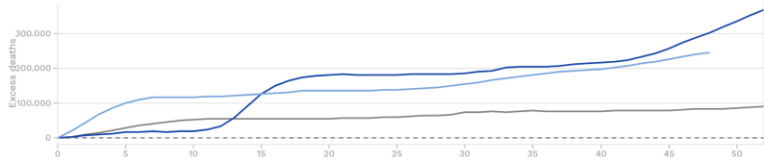
65-74 years



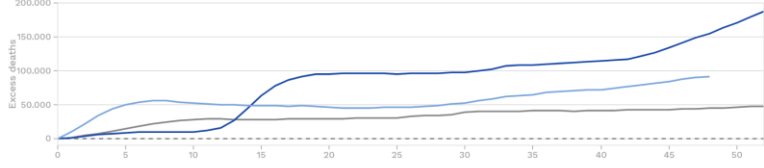
75-84 years



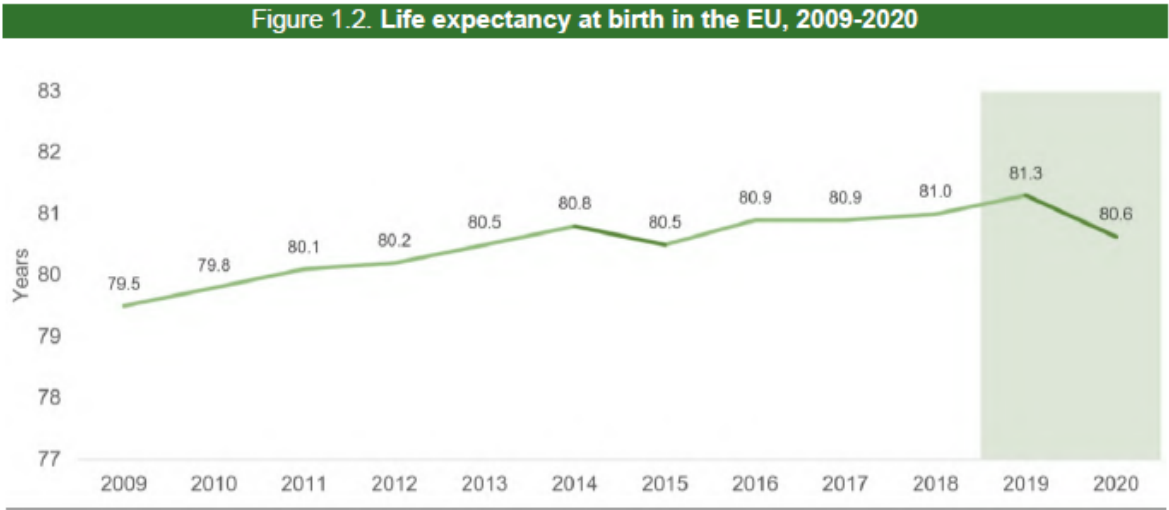
85+ years



85+ years



Graph 3: Life Expectancy at Birth in the EU, 2009-2020 ⁴³



Note: Provisional data for 2020; data for Ireland from 2019
Source: Eurostat Database

⁴³ State of Health in the EU: Companion Report 2021, Commission Staff Working Document, SWD(2021) 389 final, Brussels, 10 December 2021, p. 7