Polio Survivors and Corona Vaccination

Peter Brauer MD

From the perspective of a Covid 19 infection, polio survivors are high-risk patients, and those with the post-polio syndrome are even high-risk patients for a severe course of the disease. This is due to the polio-related neurological damage in the entire nervous system and the resulting body disorders, which are met after an infection by a no less aggressive Covid-19 disease, which is pathologically and anatomically proven concerning the nervous system and several other organs.

This means that serious to fatal courses are the risk. For this reason, polio survivors should strive for the highest possible protection against a Covid-19 infection. A vaccination offers this opportunity.

"Vaccinations currently protect people, especially those with the highest risk for severe courses." (GROSS)

"... Side effects can have a transient, stronger effect on the state of health of polio patients than with a healthy, elderly person." (TRÖGER, MD)

It is doubtful that these stronger effects will be of a temporary nature in every case, because the side effects meet the same polio-related previous damage as with the infection and illness. It is well known that any health impact can accelerate the progression of the post-polio syndrome.

Of the vaccines currently in use, the mRNA vaccine provides the best protection, offering the fewest and most harmless side effects, as well as a 95% effectiveness of lowering the risk of an infection. (BERLINGHOF) In contrast, the risk minimization with the gene-based vector vaccine from AstraZeneca is only 65%. (BERLINGHOF) In addition, as to be assumed with the other vector vaccines, it has the more dangerous risk of side effects. It can also be assumed that the same risk profile as given for AstraZeneca would not be accepted for influenza vaccines, especially if there were safer alternatives. Currently, mRNA vaccines are the safer alternatives to gene-based vector vaccines.

A further complicating factor for the gene-based vector vaccines is that antibodies against the vector viruses are formed and the second vaccination as a booster vaccination in the sense of an immunization boost is severely restricted or rendered ineffective, which could explain the lower effectiveness of the vaccination. A follow-up vaccination with the same vaccine would therefore not make sense even after a longer period of time.

The risk of a negative effect on the DNA is currently still unexplained as in contrast to the mRNA vaccines the gene-based vector vaccines develop the first stage of their effect in the cell nucleus.

Below are some statements concerning the AstraZeneca vaccine:

AstraZeneca vaccine: High risk (WAGNER, MD. in the *„Deutsches Ärzteblatt“ (German Medical Journal)*

"Whosoever carries out a treatment has to make the best possible choice for each person wanting to be vaccinated and educate them not just about the typical side-effects. With regard to the AstraZeneca vaccine, the most important explanation is:
"We want to inject you with something that is 40 percent ineffective."
The information must also name alternatives:
"But we still have something, which works 95%, almost complete protection!"
Which would either one of us choose? But we are not allowed to choose, that is also a considerable intervention to the freedom of treatment. Anyone who does not inform the person who wishes to be vaccinated that he is taking a very high risk of vaccination failure is acting grossly negligent and blindly letting that person run into danger. In my opinion, the application of the AstraZeneca vaccine is deeply unethical even if one is informed of its weak protection." (WAGNER, MD. *“Deutsches Ärzteblatt“ (German Medical Journal))*

"Reliable data for the AstraZeneca vaccine is not available" (DINGERMANN in the *Frankfurter Rundschau* – German Newspaper)

"Under obvious political pressure, the EMA has now officially recommended the approval of the AstraZeneca vaccine. Phase III study data was published in the Lancet on January 9, 2021. The article lacks clarity and cogency at all ends. Without the urgency of the matter it would certainly not have been published. The study design is unclear and inconsistent ... "(MARPERT, M. MD. *„Deutsches Ärzteblatt“ (German Medical Journal))*

"➢ Doubts about the published data from the new Astrazeneca study" (US health authority NIAID) (Internet: live ticker 23. March 2021)

Not to be forgotten: According to a statement from DINGERMANN, AstraZeneca is quite rightly struggling with a considerable loss of trust:

- Clinical trials released have been considered sloppy and a shambles.
- The dosing intervals were in a mess.
- The immune response to the spike protein and to the vector viruses was not strict enough on separation from each other.
- The effectiveness analysis was pooled and averaged from various studies
- There was limited information on effectiveness for different age groups.

(DINGERMANN, T. Prof. MD. in *„Pharmazeutische Zeitung“* – German Pharmaceutical Newspaper)

If the media is held-up for overly critical negative reports, then on the other hand a profit-interest guided study and advertising management by the vaccine manufacturers must not be forgotten.

Peter Brauer MD

HM European Polio Union 05/2021

Translation:
German to English
Tom House (Thomas House-Arno)
3rd May 2021