

Statement of the Australian Covid Medical Network

www.CovidMedicalNetwork.com

'Health is a state of physical, mental and social well-being
and not merely the absence of a disease or infirmity'.

WHO Constitution, 1948.

The Victorian government's response to the SARS-CoV-2 virus is now doing more harm than good. These measures will cause more deaths and result in far more negative health effects than the virus itself. Left unchecked, the Victorian government risks creating the state's worst ever public health crisis.

Many Australian doctors and other health professionals consider the lockdown measures to be disproportionate, unscientific, excessively authoritarian and the cause of widespread suffering for many Victorians.

Thereby, we Australian Doctors and Health Professionals, in solidarity with thousands of international doctors, call for the cessation of all disproportionate measures that contravene the International Siracusa Principles.

These Siracusa Principles¹ are part of the International Covenant on Civil and Political Rights, to which Australia is a signatory², and are recommended by the World Health Organisation³. They require all public health management policies to meet standards of legality, evidence-based necessity and proportionality, and that they recognise our basic, universal and non-derogable human rights.

Children and adolescents are suffering and being needlessly harmed by the denial of normal social interactions such as play, schooling and relationships with family and friends, particularly as the virus poses an almost negligible risk. These effects on child and adolescent health will impact their future wellbeing for many years to come⁴.

¹ The Siracusa Principles on the Limitation and Derogation of Provisions in the International Covenant on Civil and Political Rights: <https://www.icj.org/wp-content/uploads/1984/07/Siracusa-principles-ICCPR-legal-submission-1985-eng.pdf>

² Australian Government: Attorney-General's Department: <https://www.ag.gov.au/rights-and-protections/human-rights-and-anti-discrimination/international-human-rights-system>

³ WHO Chapter 11.5 - Public Health Emergencies, p176-177
<https://www.who.int/healthsystems/topics/health-law/chapter11.pdf>

⁴ "Hidden pandemic trauma harming children" News GP -RACGP .31 August 2020

The ambition for 'viral elimination' and the intent of achieving "zero cases for a period of time"⁵, is both irrational and arguably unachievable, according to the best local and international evidence. The latest evidence suggests that 'lockdown measures' in general have limited effectiveness in reducing the viral health impacts in the long term.

The Victorian government's measures are 'anti-health' and deny the principles of good medical practice. They constitute a disproportionate approach which relies on a fear-based media narrative as well as inadequate and misleading information. This must cease as soon as possible.

These policies seriously compromise the health of individuals and the wider community by imposing curfews, local travel restrictions, reduced exercise and outdoor activities, imposed isolation and the quarantining of the healthy, enforced mask wearing in open spaces, the denial of children's play, the denial of socialisation and education with friends and peers and the disruption of family relationships. These policies are contrary to common-sense and the arbitrary application of laws enforcing these policies has created unnecessary disquiet in our community and a growing loss of confidence in those responsible for such decisions.

The fear and societal anxiety caused by these policies has delayed presentations of many serious medical conditions, including cancers and heart disease. The interruptions to both public and private health-care systems has adversely impacted access to health services. The imposition of isolation on the elderly and the vulnerable has caused a dramatic increase in mental health problems. The interruption and closure of businesses has created significant financial and relationship strain for many families and further impacted the mental stress and negative health impacts we are witnessing.

Evidence does not support these measures. The limited virulence of the SARS-CoV-2 virus for the vast majority of the population is now well established from the latest international data sets. When one also considers the serious limitations of PCR Covid swab tests for population screening and the resultant lack of clarity concerning the definitions of 'Covid Cases' and so called 'Covid Deaths', especially in the setting of Residential Aged Care, the policies of the Victorian government raise serious questions, requiring an urgent review and a broad independent inquiry.

It is incumbent on all of us to examine the bigger picture and assess the significant harms being inflicted on our society in the pursuit of a very narrow concept of 'health'. We must re-establish the importance of our basic rights and freedoms and reflect deeply on what kind of society we wish to live in.

We believe there is a better way forward for Victorians and all Australians. A path founded on the principles of good medical practice, including:

- Openness and Honesty
- Humility and Consultation
- Collaboration and Respect for Autonomy
- To always encourage with Care, Hope and Reassurance;
- Never to provoke Fear, Panic or Terror.

⁵ Part 2—Amendment of the Public Health and Wellbeing Act 2008. Definitions: Section 2:

"...COVID-19 may pose a material risk of substantial injury or prejudice to health of human beings even when the rate of community transmission of COVID-19 in Victoria is low or there have been no cases of COVID-19 in Victoria for a period of time."

In light of these concerns we respectfully call for the following seven actions:

- An open, honest and transparent discussion with the general public, with easily accessible information made available about the evidence and underlying assumptions used to inform decisions about the management of the SARS-CoV-2 outbreak. This should include, in particular, the evidence to justify the grave impacts on children and adolescents as well as clear estimates of the broader health and socio-economic costs and impacts
- More collaboration and engagement with a broader range of medical specialists, other healthcare professionals and a diverse group of interdisciplinary leaders who can inform and assist in responding to the growing public health and socio-economic crisis we are witnessing, especially among the young, the disadvantaged and the vulnerable in our community.
- An urgent review of the role of State of Emergency and State of Disaster powers in the management of public health issues and crises, with consideration given to how other more democratic approaches could be utilised in the future.
- An urgent review of the general management of pandemics in Australia, including an examination of the need for better communication, coordination and collaboration between State and Federal Governments. There is also an urgent need to establish clear and well-defined 'stand-down' parameters, in case of 'false alarms' or when it becomes foreseeable or evidential that the harms of the controlling policies are greater than the direct health impacts, or fatal potential, of the disease under consideration.
- Consideration of the Commonwealth Government taking on greater responsibility and a more central role in organising and implementing a coherent and effective nationwide response in the management of future pandemics and national public health crises.
- Consideration of an international initiative to create reliable and effective 'early warning systems' which would deliver accurate assessments of the dangers and realities of emerging pandemics, and would assist in more considered and proportionate responses to bio-security threats in the future.
- Finally, we implore the governments of Australia, state and federal, to be ever mindful of the balance between loss of freedoms and basic rights and the promotion of public health, never losing sight of the potential for collateral harms to exceed the effects of the disease being managed.

Lead Signatories:

Prof Jack Martin, Emeritus Professor of
Medicine

Prof Russell D'Souza, Psychiatrist,
Bioethicist

Prof Ben Mol, Professor of Obstetrics and
Gynaecology

Prof Haydn Walters, Respiratory
Physician

Prof Kuruvilla George, Geriatric
Psychiatrist

Prof Marc Cohen, Integrative Medicine

Dr Jane O'Brien, Breast Cancer Surgeon

Dr Liam Tjia, Paediatrician

Dr David Marsh, General Practitioner

Dr Stacey Harris, GP, Child-Adolescent
Health

Dr Patrick Hayes, General Surgeon

Dr John Obeid, Geriatrician

Dr Bob Millar, Transplant Surgeon

Dr Talia Boltin, General Practitioner

Dr Geoff Wells, Urologist

Dr John Mathai, Psychiatrist

Dr Jonathon Cohen, Endocrinologist

Dr Antonio Grossi, Anaesthetist

Dr Catherine Crowley, General
Practitioner

Dr Evangelos Klonis, Emergency
Physician

Dr Lauren Bourke, Anaesthetist

Dr Will Edwards, Orthopaedic Surgeon

Dr Nicole Ong, Gynaecologist

Dr Chris Corcos, Integrative Psychiatrist

Dr Nick Gelber, Radiologist

Dr Eamonn Mathieson, Anaesthetist

Dr Trish Newell, Anaesthetist

Dr Mark Hobart, General Practitioner

Dr Babak Amin, Anaesthetist

Dr Chris Lu, General Surgeon

Dr Claire Sheeran, General Practitioner

Dr Andrew Taylor, Gastroenterologist

Dr Martin Kim, Anaesthetist

Dr Hong Nguyen, General Practitioner

Mr Michael Knight, Orthopaedic Surgeon

Dr Tony Franklyn, General Practitioner