Dear Prime Minister and Cabinet

I write to you as a former healthcare worker who hasn't been able to work for the past year because of Long COVID. Since the start of the pandemic, I worked in a State Reference Virology lab running COVID PCR tests among the hundreds of different molecular microbiology tests that we run. I had a one-off pericarditis episode a few years before the pandemic, and had it recur a month after each of my 2nd and 3rd Pfizer vaccination boosters, each time having to go to the Emergency Department for sharp chest pains. After getting COVID in November 2022, I had to be rushed to the Emergency Department by ambulance as I experienced the worst chest pains and genuinely thought my heart was going to stop. I have since gone to multiple cardiologists who have told me that the scans have not detected any abnormality in the heart, although I continued experiencing chest pains for the rest of the year. I have spent thousands of dollars out of pocket on diagnosis, and not gotten any help from any doctors, nor am able to claim any disability because I wasn't hospitalised overnight. I've since had to pull out of work and study and have been unemployed for the past year. I have been advised by my doctors to not take the vaccine as my past medical history puts me at risk. I am also afraid that my next COVID infection will be devastating and set me back another year or worse. Now seeking a job, I am looking for a job which allows me to work from home, as I do not want to risk catching COVID from a workplace, though it has been very difficult finding those roles.

Here are some of my observations on what the Government could be doing better:

- 1) Invest in and utilise high-tech solutions in pandemic prevention e.g. big data integration with deep learning (AI) to sift through millions of data sources to track, locate, and predict infectious diseases spread. An example is that used by BlueDot, a Canadian startup that claimed to have detected the first cases of COVID globally early in the pandemic.
- 2) Use deep learning to keep track of the evolving <u>infectious diseases literature</u>, keep clinical guidelines updated constantly with the latest evidence-based research. Current guidelines are outdated and can be harmful to a lot of Long COVID patients (e.g. recommendation of <u>graded exercise therapy</u> now known to cause harm to patients experiencing post-exertional malaise)
- 3) Accelerate the technology improvements in healthcare as it is decades behind other industries. Incentivise the best tech experts to work in healthcare with higher wages, less bureaucracy, more diverse and exciting roles, ability to work and lead in highly proficient teams
- 4) As there is no approved treatment for Long COVID, and it affects people regardless of predispositions, vaccination status, age, etc. focus efforts on prevention as the main strategy
- 5) Maintain strong public health messaging especially with regards to <u>non-pharmaceutical</u> <u>interventions</u> like masking, ventilation/air filtration, social distancing, encourage work from home, and other behavioural strategies
- 6) Fund ongoing prevention campaigns (especially other than vaccination) to reduce the spread of COVID. The government's response seems to be reactive as there is no mention of COVID in public health campaigns until there is a surge (until then it is too late)
- Provide support for Long COVID patients, at least a mechanism to claim for diagnosis of PASC/Long COVID symptoms, alternative treatments
- 8) Mandate use of PPE like N95 masks in healthcare especially critical areas at all times to prevent transmission of SARS-CoV-2 and other pathogens. Failure to prevent transmission is medical negligence.
- 9) Continue funding of surveillance laboratories to carry out wastewater testing, PCR testing and sequencing and consistently report statistics throughout the country.



(Source: https://github.com/dbRaevn/covid19/blob/main/pandemic/Datasources.md)

- 10) Review supply chains of pathology laboratories as we are highly reliant on equipment, consumables etc. from suppliers overseas
- 11) Provide free RAT tests as before to alleviate burden on households and maintain community testing
- 12) Consider providing PPE like N95/P2 masks for each household to help prevent transmission of COVID
- 13) Continue funding research into neglected areas of Long COVID research

References

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