

Thank you for the invitation to make a submission to the COVID-19 Response Inquiry with regards to Australia's federal response to the COVID-19 pandemic.

I am making this submission both as an Australian citizen and as an individual whose life has been tragically and brutally impacted by the government's response to COVID-19.

I am also making this submission on behalf of my elderly parents — my father, a permanent resident of this country and my mother, an Australian citizen like myself. As their eldest daughter, I am speaking on their behalf as they are no longer here with us to speak for themselves.

**My then 85-year-old father lost his life on 27 December 2021 and just days later, my then 80-year-old mother lost her life on 31 December 2021.** In just that one week, in what was supposed to be the most festive of weeks, where families come together during the holiday season to celebrate, mine were in hospital, and before the year came to an end, sadly both their lives too came to an end. In just that one week, I lost two people dearest to me, my family, my elderly parents, my household and my mother, my closest friend, the one person in the world I could always count on to have my back, who would always fight for me. In just that one week, it felt like I had lost everything.

**Both their death certificates indicated 'coronavirus disease 2019' as cause of death.** The narrative of the time was 'COVID-19 is like that'. In other words, COVID-19 is 'terrifying, it is highly fatal, it ravages the body and it takes lives despite the very best medical efforts to save those lives'. That was the narrative. **But narratives and truth are not one and the same.**

There is another possibility which is that the treatment protocols adopted by our health system and our hospitals Australia-wide were highly unsuccessful and ineffective in the treatment of COVID-19, potentially leading to the high death rates of those hospitalised and those in ICU. It is likely it was simply not working and yet we persisted with it, despite losing lives that we potentially did not have to lose.

We simply cannot take the position that 'we did everything medically possible to save those lives' if we actually did not, if there were options that were intentionally or inadvertently left off the table, unexplored, because treatment protocols dictated which medical options were made available to patients.

If the aim of our health system and our hospitals were to actually save lives, then why would we not explore and exhaust all possible medical options?

Why would we persist with a treatment protocol that largely consisted of remdesivir and non-invasive ventilation (CPAP and BiPAP) even if this protocol did not seem successful in treating patients? It can even be argued that this particular treatment protocol itself was looking much like it was responsible for worsening the condition of patients and worsening the severity of their illness, potentially leading to their deaths.

How long do we have to persist with a treatment protocol and how many more lives do we have to lose before we cease and desist and move on to better, more effective treatment protocols?

And worst of all, when other legitimate and valid medical options presented themselves, those options were demonised, vilified and shot down so quickly by a vehemently hostile groupthink in government, mainstream media and social media, never to be given a chance. Those who spoke up and challenged the groupthink's narratives were vilified and bullied and mocked. In itself, that behaviour, those actions are completely atrocious and unacceptable in a free and democratic nation we once were. It is even worse when you consider the difference those medical options might have made in saving lives, when you think of the number of lives that we did not have to lose and those who might otherwise still be here with us today.

When did narratives and protocols and bureaucracy matter more than saving the lives of patients?

At the same time my elderly parents were ill, a then 76-year-old Australian woman was having so much difficulty breathing, she was unable to speak to her husband. Instead she used her hands to gesture to communicate with him. As severely ill as she was, she refused to present herself to hospital. In her mind, she rationalised quite clearly, that if she went in to hospital for treatment, she would surely die but if she did not go, she still stood a fighting chance. Because ivermectin at that time was banned for the treatment of COVID-19, this couple was left no choice but to look for an alternative. They turned to horse paste, yes horse paste! And slowly but surely, her condition started to improve. And as it turns out, the decision she made to avoid hospitalisation saved her life.

**What does it say about our health system and our hospitals when an elderly woman successfully treats herself with horse paste and recovers from COVID-19, despite being so ill she could not breathe, and yet our doctors and hospitals weren't able to do the same for their patients?**

And why were potentially life-saving human-appropriate medications banned thus forcing an elderly woman to resort to the indignity of horse paste for treatment?

In another case, Clive Palmer, then 67, in a higher weight category and unvaccinated, refused ICU treatment for COVID-19, choosing instead to be treated by a team of local doctors and US specialists. Placed on a cocktail of anti-viral drugs including ivermectin and hydroxychloroquine, he too recovered from COVID-19. (Source: Gleeson, P. (2022, March 24). "Clive Palmer refused ICU treatment while battling COVID-19 in favour of taking ivermectin and hydroxychloroquine". *Sky News Australia*. <https://www.skynews.com.au/australia-news/coronavirus/clive-palmer-refused-icu-treatment-while-battling-covid19-in-favour-of-taking-ivermectin-and-hydroxychloroquine/news-story/c6fc9735e2e93c2a2ebbc987198e2f9c>)

**Again if Clive Palmer could recover, with the odds stacked against him given his age and weight, why couldn't the COVID-19 patients in our hospitals? Clearly treatments exist that work in the fight against COVID-19 and clearly there are doctors capable of administering those treatments. Why were those treatments not made available to patients in our hospitals and why were our doctors not administering those treatments?**

**And why are treatments that are clearly saving lives still considered 'misinformation' and 'quack treatments'? And by the same token, why are treatments that are ineffective, potentially killing patients, somehow considered more acceptable, valid and legitimate?**

In yet another case, this time from the US, a then 71-year-old man who developed severe COVID-19, who had already been on a ventilator in hospital for 22 days and who was deemed to have 'more than a 50% chance of dying', made a full recovery after being treated with ivermectin. (Source: Warren, S. (2021, November 30). "'Praise the Lord': On Brink of Death, Elderly Man Fully Recovers After Judge Orders Hospital to Allow Ivermectin". *CBN News*. <https://cmsedit.cbn.com/cbnnews/2021/november/praise-the-lord-on-brink-of-death-elderly-man-fully-recovers-after-judge-orders-hospital-to-allow-ivermectin>)

One might argue these are merely three cases and they are purely anecdotal. Be that as it may, **note that in each of these cases, they were all in the older age group and they were all already in diminished health condition and yet each person recovered with the correct treatment.**

Furthermore it has been reported that **a group of Australian doctors had successfully treated patients in Sydney and Melbourne over a period of 3 months in 2021 with a protocol that included ivermectin, doxycycline and zinc with astounding results — 'out of 600 patients treated, only five were admitted to hospital, and there were zero deaths'.** (Source: Smit, M. (2021, November 5). "Who is TGA Head John Skeritt and Why Did He Ban Ivermectin?" *The Daily Declaration*. <https://dailydeclaration.org.au/2021/11/05/john-skeritt/>)

So with the phenomenal results of 0 deaths from 600 patients treated, we, particularly those of us who lost loved ones, deserve answers to this burning question - **why did the Therapeutic Goods Administration (TGA) ban the use of ivermectin for COVID-19 in Australia back in September 2021?**

Why were my parents not given the treatment that could have saved their lives?

Why were so many other COVID-19 patients not given the medications that could have saved their lives?

Why does our health system and our hospitals persist with treatment protocols that are not saving lives?

Why even now in 2023 do we still blindly, stupidly and stubbornly dismiss ivermectin as a 'mistaken belief it would treat COVID-19' despite the evidence that it is effective against COVID-19 and why is the TGA still warning it should not be used as COVID-19 treatment and citing studies showing it was not an effective treatment? (Source: Taylor, J. (2023, May 5). "Ivermectin ban ended by Australian regulator amid warning it should not be used as Covid treatment". The Guardian. <https://www.theguardian.com/australia-news/2023/may/05/ivermectin-ban-ended-by-australian-regulator-amid-warning-it-should-not-be-used-as-covid-treatment>)

This is particularly concerning given the high number of COVID-19 deaths in 2022 despite the high rate of vaccination and although the number of deaths in 2023 may have come down from the 2022 numbers, it is still unacceptably too high.

On the basis of all of the above, whilst I sincerely thank you for this independent inquiry and the opportunity to make a submission, I put it to you that it is completely inadequate and insufficient.

**An inquiry such as this falls too far short of a much needed Royal Commission to fully, thoroughly, properly and adequately investigate the many short-comings and failures in the COVID-19 response on the part of both the Commonwealth Government AND all of the state and territory governments.** To fail to do this properly makes a mockery of the many lives lost unnecessarily and the many ways in which communities and families were torn apart.

The numbers of Australian lives lost unnecessarily and the harm caused to so many individuals and families warrant a far more substantial investigation that only a Royal Commission could deliver. There are far too many unanswered questions. And there are to date 23,887 deaths (source: <https://covid19.who.int/region/wpro/country/au>) and **those are 23,887 reasons why we need a Royal Commission.**