

ATTACHMENT 3

Alternative Treatments Complementary to Vaccine Strategy and Questions

Index – Attachment 3

Alternative Treatments Complementary to Vaccine Strategy & Questions.....	32
1. Alternative Treatments as Complements to ‘Vaccine’ Injections.....	34
2. Ivermectin Details Including Triple Therapy	34
3. Other Alternative Treatments.....	36
4. International Bodies.....	36
5. Government Mismanagement.....	36

- In all previous pandemics, like SARS and MERS, the primary weapon were the treatments, not vaccines.
- In every respiratory virus pandemic, health experts explored and endorsed trialling of alternate treatments. Particularly off-label use of safe market drugs. The use of antivirals and supplementary treatments were prioritised as primary care with vaccines used as a secondary defence. We have not been given a reason why this historically successful approach was not used with Covid.

NOTE: this advice includes the same doctors as the H1N1 pandemic now commenting on Covid.

- Why has that not been the case with COVID-19?
- Despite not having a vaccine for the first year of this COVID-19 outbreak, alternative treatments were not employed. The public was forced to wait for vaccines.
- The whole COVID-19 approach has been back to front and the obvious question is: why?
- In my speeches during the single day sessions of parliament on Monday 23 March and Wednesday 8 April 2020 I raised the fact that in-vitro trials of Ivermectin at Monash University were showing promising results. Did the government pursue that lead and if so, what was the outcome and if not, why not?

Any accomplished marketer understands that most populations are not homogenous and have varied, diverse needs. In business a company can choose to ignore these people on a commercial basis. In government though and on an issue affecting people's lives, morality is a consideration.

One size does not fit all and in the case of vaccine injections that one treatment could kill and has killed.

1. Alternative Treatments as Complements to 'Vaccine' Injections

A significant percentage of people won't be injected. They need and deserve an alternative choice.

Page 18 of the Australian Department of Health's "plan" entitled *Australian Health Sector Emergency Response Plan for Coronavirus (COVID-19)* says: "*Other health sector stakeholders will contribute to IHR (International Health Regulations) core capacities; provide input on needs related to national stockpile items; maintain stocks and use of, personal protective equipment as appropriate for infection control requirements; and report adverse events following immunisation or following the administration of antiviral drugs (should relevant antivirals become available) to the state health authority and/or the Therapeutic Goods Administration (TGA).*"

https://www.health.gov.au/sites/default/files/documents/2020/02/australian-health-sector-emergency-response-plan-for-novel-coronavirus-covid-19_2.pdf

My office has compiled a list of 18 alternative treatments, one of which I will now discuss here.

2. Ivermectin Details Including Triple Therapy

- Ivermectin is on the UN World Health Organisation's list of Essential Medicines and in 2013 Australia's Therapeutic Goods Administration (TGA) approved its use in Australia for a variety of conditions.

- Ivermectin has been delivered in 3.7 billion doses over almost sixty years. With minimal known adverse effects, it has been proven universally safe.
- I used it successfully on a doctor's prescription to treat a condition in 2014. It worked quickly and I had no adverse effects.
- It's reported to be rapid, safe and highly effective in treating COVID-19 in various nations and states and points the way to end COVID-19. Reportedly its use in some Indian states has led to the sudden collapse in deaths from COVID.
- At least 40 peer reviewed scientific medical papers herald its success treating COVID-19 and the number is rising rapidly. Ivermectin is reportedly proven in 61 international trials, including 32 randomised control trials, showing it to be an effective treatment and prophylactic.
- A highly reputable and internationally acclaimed physician has had success with using a compound medicine based on Ivermectin in Australia. In one quarantine facility he administered Ivermectin to 24 patients very ill with COVID-19. All were cured, rapidly. Two patients who were not treated with Ivermectin died.
- It is known to be a prophylactic against COVID-19.
- Where it has been used overseas it has ended the threat of COVID-19 because in addition to being a treatment and cure for people with COVID-19 it is a prophylactic.
- Its use would end the virus threat.
- From the Dept of Health's plan: *"This, the first Australian Health Sector Emergency Response Plan for Novel Coronavirus (the COVID- 19 Plan) is designed to guide the Australian health sector response. It should be considered a living document that will be periodically updated. As we learn more about the virus and its key at risk groups, and as potential treatments become available such as **antiviral drugs** and vaccine, we can target resources and public health interventions to most effectively protect the health of all Australians."*
- Medical specialists have said Ivermectin will allow opening of borders and end the virus threat.
- Acclaimed physician Dr Thomas Borody has sought an audience with TGA.
- Ivermectin has been distributed overseas in combination with zinc, vitamin D and antibiotics. For example, the UN WHO admits on its website that it is distributing COVID-19 treatment to kids in some Indian states. Interestingly the WHO does not disclose the contents of the kit yet Indian media reports that the kits contain Ivermectin, multi-vitamins, paracetamol and packets of Oral Rehydration Salts, and are being distributed to children with COVID-19 symptoms. Other reports indicate kits are being distributed to adults and contain Ivermectin, vitamins A & D, paracetamol tablets and an antibiotic. This followed reports that Indian lawyers were suing the UN WHO for obstructing the use of Ivermectin. Perhaps the WHO was then faced with a backlash for what would have amounted to killing sick people denied Ivermectin as a COVID-19 treatment. The UN WHO is known to be closely colluding with manufacturers of COVID-19 injections whose profits would be decimated if Ivermectin is adopted globally.

<https://www.who.int/india/news/feature-stories/detail/uttar-pradesh-going-the-last-mile-to-stop-covid-19> and <https://www.hindustantimes.com/cities/lucknow-news/yogi-adityanath-launches-covid-19-medical-kits-for-covid-19-symptomatic-children-101623747649057.html>

- In Australia social media, legacy media and government agencies are censoring and preventing mention of Ivermectin using broad, emotive and unsupported claims.

3. Other Alternative Treatments

- Florida's Governor Ron DeSantis on 20 Sep 2021 tweeted: *"Since Florida opened monoclonal antibody treatment sites in August: 100,000 Floridians have received treatments; COVID hospital admissions have fallen by over 60%; COVID hospital census has declined for 28 consecutive days; ER visits for COVID have declined by over 70%."*
- There are many alternatives. Proven medicines and combinations of proven medicines with vitamins, minerals, ... yet where is the proof that our governments proactively got out there and looked for treatments to protect us?

4. International Bodies

- What role did internationally coordinated pandemic 'test runs' have on collectivising the global approach to COVID? Did this centralised plan of response from the UN and WEF, vaccine manufacturers and investors, sway world leaders to adopting vaccines as the only response at the expense of successful alternate treatments?
- Was the political treatment and censoring of alternative treatments including antivirals such as Ivermectin a causality of the international campaign against centre-right politics or is it simply a clear and obvious financial threat to vaccine manufacturers eyeing financial windfalls?
- What role, influence and control did foreign, non-democratic institutions have over the COVID management of our nation? Did bureaucrats who represent the views of multinational lobby groups influence management decisions and marginalise best clinician practice?

5. Government Mismanagement

- In a lengthy letter the Australian government's TGA implicitly threatened me for discussing Ivermectin in public. That is interference with my role and duty as a Senator elected to listen to, serve and communicate with constituents.
- The TGA recently banned prescription of Ivermectin and chemists have not honoured prescriptions already made.
- Various agencies and organisations have reportedly threatened doctors with being disbarred from medical practice if they prescribe or even discuss Ivermectin. Doctors are in fear.
- Government agencies appear to be interfering with the 3,000 year old universally accepted doctor-patient relationship and disrespecting the sanctity of that relationship.
- In committing these acts is the TGA following government orders?
- Experts are now saying or implying that in 2021 if a person is admitted to hospital with COVID-19 and dies without having been treated with some combination of Ivermectin, zinc, vitamin D or similar drugs, they didn't die from COVID, that may be considered malpractice.
- In committing these acts is the TGA following government big pharmaceutical companies?

- Reportedly, the Health Minister Greg Hunt’s outburst in September about tickets to NRL finals led the TGA to reverse its order to not give football fans free tickets for getting vaccinated. As a result of his outburst the TGA overruled its own administration rules. Yet the Health Minister had no reported outburst over the TGA banning Ivermectin. Nor has he had any reported outburst in an attempt to have Ivermectin approved for treating COVID-19 and saving lives as is occurring overseas.
- **Who decided under what policy and under what set of values government prevents Ivermectin’s use and prevent its approval? Why is the Health Minister not enabling the TGA to fast-track alternative treatments as complements to a suite of vaccines? Lives are at stake and all parliamentarians with any shred of decency and humanity will support such legislation.**
- In my view and in the view of many everyday Australians, doctors and prominent physicians, the denying of treatment using a medicine with a proven record of safe human treatment, the government and the TGA have blood on their hands.
- What has driven the legacy media to run a coordinated misinformation campaign describing Ivermectin as a ‘horse paste’?
- Social media censorship of alternate treatments is robbing citizens of informed choice while suppressing news of the many known and serious adverse effects of vaccine injections. Alphabet owns 12 per cent of Vaccitech the maker of the AstraZeneca injection and Alphabet owns YouTube that bans videos merely for mentioning the word Ivermectin.

Meanwhile the federal government is coercing injection of citizens with an experimental injection for a virus that can be treated with known safe standard drugs giving 85% decrease in hospitalisations and deaths. In doing so the federal government is arguably breaching the Commonwealth constitution.

This is the first time in Australia’s history that governments have knowingly withheld a proven, safe, effective, affordable, and readily available treatment from the sick and the dying.

Governments are withholding a proven prophylactic that will likely rapidly put an end to government’s hideous mismanagement of COVID-19 and return life to normal for all Australians.

With their combined withholding of proven treatments and the forcing of ‘vaccine’ injections on all people, the states and federal governments have failed to understand the needs of Australians.

Governments are failing to serve the people.