

Media release: OzSAGE advises against removing all preventive measures against COVID-19

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In December 2021 we saw a surge in Omicron which resulted in preventable illness, death and severe societal impacts. There have been [more deaths from Omicron](#) in January and February 2022 than the whole of 2020 and 2021 combined. The [Australian Bureau of Statistics](#) confirms that deaths were due to COVID-19, and not incidental to COVID-19.

Reducing preventive measures including masks, testing and tracing in December 2021 resulted in many businesses experiencing mass cancellations and losses, as well as large numbers of workers being unable to work due to illness. At the peak, supply chains were disrupted, affecting [availability of groceries](#). This could have been mitigated by continued use of masks and investment in testing and tracing. OzSAGE has said repeatedly that a vaccine-only strategy is not enough – we need a ventilation and [vaccines-plus](#) strategy as the best way forward.

The health systems in NSW and Victoria have been operating in crisis mode, with large numbers of staff infected and furloughed and even [deaths among health workers](#). Nurses and paramedics went on strike [last week in NSW](#) over the appalling conditions they are expected to work in.

Vaccination rates not optimal, and vaccine not the whole answer

Australia has not yet achieved high 3rd dose vaccination, the standard now required to be described as ‘[fully vaccinated](#)’, nor are children 5-11 years completely vaccinated. Some groups like residential aged care and disability and Aboriginal and Torres Strait Islander people have lower vaccination rates than the rest of the population. [Waning of protection](#) against hospitalisation also occurs after a 3rd dose, so vaccines do not provide durable protection. We would expect to see the effect of this waning by April. For the 50% of the population who have not had a 3rd dose, [protection against symptomatic Omicron is minimal](#). The belief that mass infection will create herd immunity has been proven wrong repeatedly, with four waves of SARS-CoV-2 throughout the pandemic, and reinfection being common. [Reinfection has surged](#) during the Omicron wave.

Not a binary of dead or alive

The [WHO warns](#) that the pandemic is not over and that stopping all COVID-19 prevention measures is premature. SARS-COV-2 is here to stay, and remains a serious infection, even in vaccinated people. [It is not like influenza](#), and has not mutated into the common cold.

The outcomes of COVID are much more than death or survival. Research shows [37% of people get long COVID symptoms](#). Further, it may cause serious long-term complications, with [twice the risk of heart attacks](#), stroke, heart failure and blood clots a year after infection. A study from the US National Institutes of Health showed [virus persists in the brain, heart, lungs and other organs after initial illness](#). This may result in brain with changes that resemble [Alzheimer’s disease](#). It also causes [long term lung damage](#) and other serious long-term complications in survivors. Failing to control spread of SARS-COV-2 will result in a chronic burden of serious illness that we have not yet begun to appreciate. The use of masks may prevent a long-term burden of chronic illness from COVID-19. A large study showed that [viral load \(which is high if exposure dose is high\) predicts long COVID](#). [Wearing a mask reduces the viral load](#) we are exposed to.

Prevent new variants

Another reason to prevent COVID-19 is that high levels of infection increase the likelihood that new variants will emerge. This is not the time to weaken our [testing](#), tracing and surveillance system. The WHO has called on countries to [strengthen both](#) testing and tracing, but NSW and Victoria have done the opposite while removing measures to prevent the spread of SARS-COV-2.

Retain workers compensation

The NSW Parliament lower house has voted to [remove access to workers compensation](#) for people who become infected at work, unless the worker can prove it was contracted at work, and this now rests with the upper house. This will mean teachers and health workers have to go to work with no recourse if they get seriously ill or disabled from COVID-19 caught at work, while simultaneously facing high levels of infection because of removal of preventive measures to reduce SARS-COV-2 transmission. Making access to workers compensation more difficult is unjust and removes any onus on employers to provide safe working conditions and safe indoor air.

Leave no-one behind

Over half the population has a chronic disease of some kind, and one in five people in NSW has a disability. NSW has the largest Aboriginal population in Australia. For these communities and groups, removal of COVID-19 prevention measures and high levels of transmission is more likely to be fatal or cause severe complications. It must be remembered that Aboriginal people are under vaccinated compared to others. We urge that no person or community be left behind, and all are seen as equally important.

We all wish the pandemic were over, but starting and stopping COVID-19 prevention will result in a repeated cycle of epidemics. We believe we can achieve an equilibrium and prevent acute and chronic burden of illness if we retain evidence-based public health measures to prevent COVID-19.

We recommend:

1. Retain indoor mask mandates and recommend [high quality respirators](#).
Initiate widespread education on wearing better quality masks and respirators properly and improving fit
2. Provide free RATs as some other countries are doing.
Invest in expanded PCR Testing capacity, followed by Trace, Isolate, and Quarantine (TTIQ) and expand surveillance for emerging variants
3. Retain QR codes so that mass tracing can occur when case numbers are high.
Maintain accurate reporting of cases, hospitalisations, ICU admissions and death, following OzSAGE [advice on reporting deaths](#).
4. Maintain existing access to workers compensation for people infected at work.
Educate Australians why the pandemic is not over, why public health measures, especially masks, remain important and what they can do to continue to help to protect themselves, their loved ones, our society and economy. Convey that public health measures will continue to be required at higher or lower levels depending on how transmissible & virulent future variants are.
5. Mandate and regulate safe indoor air in workplaces and public indoor spaces, especially in [schools and childcare centres](#) – see our [detailed guidance](#) on this.
6. Develop and release planning for the management of further VOC
7. Urgently increase 3rd dose vaccination rates and plan now for the logistics required to vaccinate 6 months to 5 year old children.