# **Doctors Against Mandates**

www.doctorsagainstmandates.com

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Dear Supporters,

## Message from Doctors Against Mandates, Qld

We extend our deepest heartfelt gratitude to all of you who supported us financially, motivationally and in spirit over the past year and half. Over 20 of us medical practitioners challenged the mandates for novel nano-lipid and gene-based spike protein inoculations, known as COVID-19 vaccines.

This was <u>not because of "anti-vaxxer" sentiments</u>, and we never ignored the threat of a novel virus. We were sceptical because a diligent, dispassionate analysis of the "warp speed" medical products led us to that view. Our initial caution is increasingly validated by subsequent data and a <u>growing</u> <u>academic medical literature</u>.

More importantly, we believed ethical principles of informed consent, good governance, nonmaleficence, and bodily autonomy were being abrogated by State biosecurity countermeasures that were assumed necessary despite not being properly investigated.

In these circumstances we united to seek judicial review of coercive and restrictive public health policies that limited medical professionals' ability to serve their patients.

## First judicial review – McIntyre & Ors v Gerrard

Thirteen of us submitted affidavits in the <u>first judicial review to the Supreme Court</u> against Chief Health Officer Dr Gerrard's Mandate made under the <u>Public Health Act 2005 (Qld)</u> – which mandated all workers in healthcare with only minor exceptions.

We raised over \$100,000 amongst our group and supporters within the community.

We also submitted and served six detailed expert reports (see for example the report from <u>Dr Madry</u> <u>here</u>). The Department of health coincidentally revoked Dr Gerrard's mandate 3 days following service of our materials and evidence in early September 2022.

## Second judicial review – Parry & Anor v Wakefield

Much to our dismay; Queensland Health kept mandating COVID-19 vaccines despite revocation of Dr Gerrard's public health direction, despite never publishing a reasonable justification or showing evidence of review and revision. Private hospitals were encouraged to institute their own mandates based on the Health Employment Directive 12/21 (HED12/21) and some did so.

Only two of us original applicants had standing as publicly employed specialists with Queensland Health to be listed as applicants in the second judicial review case against Queensland Health's Director General Wakefield's HED12/21 on the Public Sector. So we filed another <u>originating application</u> judicial review in early 2023.

Crown Law threatened costs against us and tried to strike-out our applications. After some legal skirmishes including further affidavit material and further amendment of our pleading, Crown Law

withdrew their application to dismiss our second judicial review by consent in August 2023. We provided a timetable for the delivery of material, including expert reports. Not much later, DG Dr Wakefield's mandate made under the <u>Hospital and Health Boards Act 2011 (Qld)</u> was revoked in late September 2023.

Given consultation with the primary contributors and our legal team, the threatened costs of continuing, the length of decisions in similar proceedings such as *Witthahn & Ors v Wakefield & Anor*, the revocation of HED 12/21, and the import of other proceedings that would benefit from our focus; our group has consented to discontinue our judicial review against Dr Wakefield.

## Small wins where we can take them

Much has been achieved. Revocation of Dr Gerrard's mandate meant health workers and support staff could return to work in the private sector. Revocation of HED 12/21 means that the Public Sector will have to consider the return of unvaccinated workers, who may reapply and private hospitals still enforcing private mandates should discontinue them.

## Journey ahead

But there is still much progress needed. Despite the revocation of HED 12/21; larger private employers, and many Public Sector Hospital and Health Services still seem to have COVID-19 vaccinations as a requirement of employment despite any cogent justification. Further, the Public Sector continues to discipline, suspend, and even terminate experienced workers for practicing their human rights, which is outrageous given findings of serious misconduct was never clearly disclosed during consultation.

We have additional concerns that the Department of Health and Queensland Health did not actually finalise a risk assessment for imposition of HED 12/21 on its workforce and, in one of thousands of expensive industrial relations appeals, is even arguing that it didn't need to do so!

Further, Queensland Health has shown their intention that the several thousand employees who, due to hesitancy or informed non-consent reasons, did not comply with the HED12/21 will have "serious disciplinary misconduct" listed on their records.

# <u>A/Prof Parry sent a letter about the unfairness and concern of these policies to Queensland Health</u> and Crown Law.

Our State of Queensland appears to have doubled down on the original policies and dismissive of the distrust and resistance its policies seeded in our communities and amongst our patients. There is a lot of work needed and while many have become despondent or apathetic, many are driven by moral indignation and won't relent until they see redress of these matters through lawful means.

This is displayed by ongoing proceedings, in Queensland alone there are at least 500 human rights complaints made at the Queensland Human Rights Commission against mandate policies, dozens out of thousands of proceedings and appeals at the Queensland Industrial Relations Commission, and other proceedings nationwide.

## Some notable proceedings and pressure for accountability

Covid Vaccine Injury Class Action against the TGA at the Federal Court

As doctors we must first do no harm, and patient care takes precedent, so as promised, our group has committed to donate the funds remaining for our Judicial Review action to this important vaccine injuries class action.

The case is led by our colleague Dr Melissa McCann who initially got mRNA vaccinated and gave the COVID-19 vaccines to her patients until she saw three young men with myocarditis reactions in rapid succession and researched the issue. We urge you to direct any support you can to that case.

# Fidge v Pfizer & Anor

You may also be aware there is <u>another case</u>, litigated by <u>Dr Julian Fidge</u> against the primary importers and holders of the distribution contracts with Australia, Pfizer and Moderna, for not registering their products as gene technology pursuant to the <u>Gene Technology Act 2000</u> and <u>Gene Technology Regulations 2001</u>.

Most recently, Moderna and Pfizer applied to the Court to dismiss the proceedings by arguing that Dr Fidge doesn't have standing, apparently their argument is that they aren't "dealing with" the products in question within Australia. However, the strength of this case is compounded given the findings of not insignificant DNA contamination of their product through "Process 2" mass manufacture of modified mRNA by plasmid DNA (undoubtedly a genetically modified organism pursuant to gene technology regulations) in large vats of E. Coli. Further compounded by the fact that this manufacturing process was different from a cleaner process used in the Pfizer clinical trial.

These findings raise the risk of genetic modification of human DNA. The Canadian health regulator has <u>acknowledged the contamination</u>.

# Australian Medical Professionals' Society (AMPS)

AMPS is a community of discerning health professionals, <u>they have recently published a book</u> available for free download that investigates the rise in excess mortality without shying away from the obvious widespread countermeasure we know as the national immunization campaign.

# Human rights complaints

Human Rights commissions are under enormous strain, given the volume of complaints against COVID-19 countermeasures, particularly "no jab, no job" policies. AMPS' service provider is advocating for 1,500 complainants in the QHRC, VEOHRC, and AHRC with test cases in Queensland and Victoria, for unjustified breaching of human rights and non-necessary discrimination on various bases. VEOHRC has limited resources for so many complaints, and have committed to consider an investigation pursuant to s 127 of the *Equal Opportunity Act 2010* (Vic) in November 2023, following receipt of hundreds of emotive stories from complainants and their strong correspondence advocating for an investigation.

## Independent scientific enquiry

The tide has turned. Those preliminary independent corroborations of lipid encased DNA contamination add to a large <u>body of literature</u>, including two recent reviews that show the overlap of <u>spike protein related pathology</u> from the virus and the gene-based vaccines and the need for official recognition of <u>Post-COVID-19 Vaccine Syndrome (PCVS</u>).

The leading hypothesis is that wide biodistribution through the body and prolonged production by pseudouridine modified mRNA of spike proteins through human organs have adverse consequences that weren't fully investigated.

#### Workers Against Mandates

Thousands of citizens feel something needs to be done and are setting up groups. For instance the <u>Worker Against Mandates</u> group are civilians who have spent the last 2 years reading High Court decisions and are seeking expressions of interest for a High Court based on the limit of the State and Commonwealth to civilly conscript via medical services. Their intention is to have EOIs reach a critical mass where the risk and liability is spread amongst thousands of litigants so that a group of united citizens can sustain High Court proceedings.

## Political push-back

Commercial contracts might be preventing safer vaccine technologies. We note that <u>safer non-gene-based traditional COVID-19 vaccines</u> are available in many non-Western nations.

The spell of the COVID-19 marketing campaigns had faded. The uptake rate of boosters was dismal in the absence of mandates, despite ATAGI's guidance. Internationally we see regions quietly dismantling their COVID-19 vaccination campaigns.

Meanwhile the WHO seeks to consolidate control of pandemic policies with proposed amendments, despite being majority funded by NGO's and private benefactors invested heavily in certain bio-security measures. So many are pushing back, including global movements to <u>Exit the WHO</u>, unless it gets its act together.

There is push-back though, and ground-swell of grass-roots movements, where the <u>Public</u> <u>Governance, Performance and Accountability Amendment (Vaccine Indemnity) Bill 2023 got up in</u> <u>the senate.</u>

## Citizen investigations and education

<u>Pfizer documents</u> that the US Food & Drugs Administration (FDA) wished to keep secret for 75 years indicate the FDA and Pfizer were <u>aware in early 2021</u> of many serious adverse events and shares similarities with circumstances of previous withdrawals from the market, such as the analgesic anti-inflammatory pill <u>Vioxx</u>, produced by Merck and estimated to have caused tens of thousands of cardiovascular deaths; and oxycontin by <u>Purdue Pharma</u> that initiated the American opioid epidemic and has been depicted in the TV series "Dopesick".

In both cases, <u>conflicts of interest</u> involving the FDA became apparent and it took several years for courts to rule in favour of injured class action litigants, but eventually Merck paid out over \$4Billion and Purdue was fined into bankruptcy.

#### In short

We hope to keep you updated about other proceedings as they become known to us.

It is important that we continue to scrutinize our State and Commonwealth authorities, educate ourselves of our humanist laws and human rights, lest we lose what many take for granted – a free and democratic society based on human dignity and freedom, and uncensored evidence-based scientific and moral debate.

Once again, sincere thank you for all your support.

## Doctors Against Mandates