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Exclusive National Coronavirus pandemic

Former deputy chief doc warns: Australia must reopen borders, prepare for the return of COVID-19

By Kate Aubusson and Rachel Clun

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Australia's former deputy chief medical officer has challenged doctors to smash the "false idol" of COVID-19 eradication and prepare the public for the next critical phase of the pandemic: open international borders and the return of the virus in the community.

In a speech at the Royal Australasian College of Surgeons' annual scientific meeting, Dr Nick Coatsworth admonished a "hardcore rump of activist doctors" spreading misinformation and undermining vaccine confidence. He condemned a "rotten, but vocal, few" doctors who used social media to abuse their colleagues, administrators and politicians.



Former deputy chief medical officer Nick Coatsworth says Australia needs to prepare for reopening international borders and the reintroduction of COVID-19 in the community. ALEX ELLINGHAUSEN

His warning came as almost half of the 150 Australians booked on the first repatriation flight from India on Friday were barred from boarding after 42 tested positive for COVID-19, forcing them and their close contacts to remain in the COVID-ravaged nation.

"We once again have a responsibility as a profession to calmly reassure the community that vaccines must be taken up when they are offered, that waiting is not a valid option either individually or for the public health, and that ultimately when we allow COVID-19 back on our shores and it circulates in our community, that we are prepared and comfortable for that to happen," said the infectious disease physician – one of the Commonwealth government's most prominent public health spokespeople throughout 2020.

"I know that will make some, maybe most, in this room and online today uncomfortable."

On Friday, health security experts warned large numbers of Australians wanting to board repatriation flights will test positive for COVID-19 and the federal government had a duty to implement strategies to bring them home regardless.

One passenger with a ticket booked on the first flight from India to Australia since the travel ban, who spoke anonymously for fear of losing his spot, said not all passengers had been told their final test results.

"We heard that news [that 40 passengers had tested positive] and now we're very scared," the passenger said from his hotel room in Delhi.

"It's nerve-racking because I'm pretty sure I don't have it, but I'm still stressing about it."

Pandemic planning and global health security expert Associate Professor Adam Kamradt-Scott said both the federal and state governments had a moral responsibility to let all stranded citizens return.

"We should be bringing them home, full stop," he said. "The risk is that they will succumb to the illness and die."

The government halted all direct and repatriation flights from India at the end of April in response to a third wave of coronavirus that overwhelmed the country's health systems.

Dr Coatsworth, in his speech on Thursday morning, said Australians had to come to terms with the fact that Australia cannot ride out the COVID-19 pandemic "in an eliminationist bunker".

"It is clear we will not have our borders closed indefinitely. We will not have quarantine stations in perpetuity whilst we aim for the false idol of eradication," said Dr Coatsworth, speaking in a personal capacity.

"At a point in the future when a significant majority of our community is vaccinated, there will be pressure to open our borders. We must not resist that. In fact, when the time is right, we should be leading the calls for it."

Dr Coatsworth told this masthead on Friday that Australia must decide what the tipping point will be to emerge from isolation.

"It's going to be difficult as a nation because we are so comfortable at the moment because we did so well in restricting the numbers [of COVID-19 cases]," he said.

"What vaccination coverage would the government accept, and would the medical profession suggest, is adequate for opening borders? We don't know that and I think we need to be honest about that."

The federal government has indicated international borders could be opened in the first half of 2022 when its projections suggest the majority of the population will be fully vaccinated.

"The [medical] profession can help the community have a stronger, higher appetite for risk by reassuring them of the effectiveness of the vaccine, the importance of getting vaccinated and the [benefits] of having a vaccinated immune population," Dr Coatsworth said.

"There are a hardcore rump of activist doctors who have been anti-AstraZeneca since the start of this year, misquoting and misrepresenting the phase 3 trial data ... and in my view substantially undermining the national program", Dr Coatsworth said.

"We were sort of primed already as a community to think that Pfizer was the better vaccine by some prominent voices in the media, and the reality was that was a misrepresentation of the data."

"The thing that really troubled me was that the ability for the public to cope with the messaging around [the rare blood clot syndrome linked to the AstraZeneca vaccine] has been rendered significantly more challenging in light of the misinformation campaign waged in January and February by these individuals."

Many of these individuals, whom Dr Coatsworth chose not to name, had also co-opted the lingo of climate change politics to wage a "phoney war" over aerosol transmission of COVID-19 by calling senior medical leaders airborne transmission

"deniers", Dr Coatsworth said.

He condemned a "rotten, but vocal, few" doctors who used Twitter to abuse their colleagues, administrators and politicians.

"That is not advocacy, it is not policy debate, it is narcissism thinly cloaked as activism," he said.

Dr Coatsworth told this masthead he did not expect doctors to fall in line regardless of their hesitations.

"The fact that there are clinicians out there who want to have a voice is absolutely fine, but there is a big difference between someone who has a medical degree in a particular sub-specialty to our top vaccination experts. But from the public's perspective it's difficult to differentiate those voices," he said.

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