



29th February 2024

Standing Committee on Legal and Constitutional Affairs
Department of the Senate
Australian Government

Via email: LegCon.Sen@aph.gov.au

Dear Committee members,

Re: Questions on notice from Senator Rennick - Legal and Constitutional Affairs References Committee: COVID-19 Royal Commission inquiry.

The Royal Australian College of General Practitioners (RACGP) is pleased to respond, on behalf of our representative Professor Mark Morgan, to the written questions on notice from Senator Gerard Rennick in relation to the above inquiry.

Please find following our responses below.

- 1. Why did the National COVID-19 Clinical Evidence Taskforce withdraw azithromycin from the protocol for people who caught Covid? Given many people come down with a secondary bacterial infection after catching a virus, why did the taskforce advise against using this antibiotic to clear up the bacterial infection?**

Queries relating to decisions or recommendations made by the National Clinical Evidence Taskforce (COVID-19) should be directed to the Taskforce for formal response.

Background on the Taskforce:

The RACGP was only one of 35 multidisciplinary member organisations on the Taskforce, which aimed to support Australia's healthcare professionals caring for people with COVID-19 by providing continually updated, evidence-based guidelines. The Taskforce had multiple clinical expert committees that undertook continuous evidence surveillance to identify and rapidly synthesise emerging research to provide national, evidence-based guidelines. These 'living' guidelines were updated as new research emerged to provide reliable, up-to-date advice to clinicians providing frontline care for people with COVID-19.

- 2. Which authority approved the withdrawal of azithromycin?**

Azithromycin remained, and continues to remain, available to treat relevant bacterial infections. It has not been withdrawn.

As to the Taskforce's recommendation "*Do not use azithromycin for the treatment of COVID-19*", once again, queries relating to decisions or recommendations made by the National Clinical Evidence Taskforce (COVID-19) should be directed to the Taskforce for formal response. However, it should be noted when publishing recommendations the Taskforce provides research evidence, evidence of decision, rationale, decision aids, references, and the opportunity to provide feedback. These are all available within the published guidelines [here](#).



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3. *How can Professor Mark Morgan of the Royal Australian College of General Practitioners have never heard of immune imprinting?*

GPs reference the Australian Immunisation Handbook for information about immunisation. During the rapidly evolving COVID-19 Pandemic, GPs accessed information flowing from the Australian Technical Advisory Group on Immunisation. Completeness of resources should be addressed to the relevant organisation.

As Australia's largest professional general practice organisation, representing over 40,000 members working in or toward a specialty career in general practice, we look forward to participating in any future Royal Commission into COVID-19 and highlighting the significant contributions GPs and other medical and allied health professionals made during unprecedented times. We appreciate the efforts of other committee members in highlighting these efforts during the recent appearance of Professor Morgan, and his colleagues, to the committee.

Yours sincerely,

Dr Nicole Higgins, FRACGP
RACGP President