
Medical tyranny and the COVID -19 response - challenging the scientific and medical establishment in Australia

Elizabeth Hart <elizmhart@gmail.com>
To: Elizabeth Hart <elizmhart@gmail.com>

Sat, Aug 20, 2022 at 10:24 PM

Please see below an email thread **challenging the scientific and medical establishment in Australia about the medical tyranny of Covid-19 'vaccine' mandates, lockdowns, masks mandates, and 'vaccination' of children etc**, initiated by Ted Steele, a molecular and cellular immunologist.

Discussion and debate on the Covid-19 response has been suppressed and even censored in Australia, with little or no critical analysis in the mainstream media, particularly about the Covid-19 jab rollout and jab mandates. Doctors are under threat of deregistration by the Australian Health Practitioner Regulation Authority (AHPRA) if they question the Covid-19 jab rollout, an astonishing situation which has not been reported by the mainstream media during the Covid jab rollout as far as I'm aware. See [this letter](#) from the Australian Medical Professionals Society (AMPS) which notes **"Australian Health Professionals numbering over 825,000 were essentially forbidden from publicly questioning the science underlying the emerging COVID-19 injectables, let alone questioning any government messaging urging Australians to be vaccinated because these products were deemed 'safe and effective'..."** The AMPS letter includes Phillip Altman's report: [The Time of COVID](#).

We must insist on public discussion about the Covid-19 response, and I've joined in the email thread below with my reply to [economist John Adams](#), raising the fundamental question: **Why was there a 'vaccine' response to SARS-CoV-2 / Covid-19, i.e. a global mass population 'vaccine' response against a disease it was known from the beginning wasn't a serious threat to most people?** My *BMJ* rapid response published in March 2020, is also shared in my response to John Adams, i.e. [Is it ethical to impede access to natural immunity? The case of SARS-CoV2](#).

Mike Toole, an [Associate Principal Research Fellow at the Burnet Institute](#) in Melbourne, Australia, reacted to my considered reply to John Adams with a one liner about natural immunity, 'the pre-vaccine' era, children and measles and polio. Mike Toole's reply was not directly relevant to the matter at hand, i.e. the grossly disproportionate and ill-targeted Covid-19 response, but does spark what needs to be a much larger discussion about taxpayer-funded vaccination policy and the ever-increasing vaccination schedule.

In my reply to Mike Toole, I **question how was 'valid voluntary consent' obtained from parents/carers before the novel mRNA Covid-19 jabs were injected into children, what information was provided to parents/carers to enable them to make an informed decision before this medical intervention?**

Children aren't at serious risk with Covid-19 - **why have they been deliberately jabbed with defective 'leaky vaccines', potentially compromising their own naturally effective immune response - is the goal to make them dependent upon the vaccine industry and facilitate a multi-billion dollar vaccine market?**

It's not disclosed in Mike Toole's reply to me that the Burnet Institute, with which he is associated, is engaged in Covid-19 vaccine research, and is partnering with Moderna in designing mRNA vaccines. As reported on BioPharma-Reporter in March 2022 **"Moderna has finalized a strategic partnership with the Australian government to build an mRNA manufacturing facility in Melbourne: which is expected to produce up to 100 million mRNA respiratory vaccine doses annually"**.

I previously raised the matter of non-disclosure of conflicts of interest in my email to **Brendan Crabb, the Director and CEO of the Burnet Institute**, see: [Conflict of interest not disclosed - Burnet Institute and Covid-19 research](#), 18 July 2022.

In the email thread below and previous emails, Ted Steele has thrown down the gauntlet to the scientific and medical establishment in Australia, trying to ignite public debate on the Covid-19 response, and broader vaccination policy matters, including supporting the work of Judy Wilyman, particularly her PhD thesis: [A critical analysis of the Australian government's rationale for its vaccination policy](#), PhD awarded in 2015.

Judy Wilyman was hounded ruthlessly by members of the scientific and medical establishment, and the conflicted Murdoch media, who sought to tarnish and suppress her critical analysis of Australian vaccination policy, see for example these summaries by her PhD supervisor Brian Martin: [News with a negative frame: a vaccination case study](#) and [Judy Wilyman, PhD: how to understand attacks on a research student](#), and an article published behind the paywall on *The Australian*: [Nossal adds voice to anti-vax PhD](#), 27 January 2016. (See copy attached.)

But oh look! Today *The Australian*, the Murdoch media, has seen the light on Covid, and published an article saying the Morrison government's "**biggest mistake was to hand over control of the Covid agenda, in the false belief of following the science, to chief health officers who tend to be bureaucrats more than leading scientists engaged in cutting edge medical research. In the blink of an eye, they morphed from obscure officials to all-powerful chief executives.**" (See: [Biggest mistake wasn't extra portfolios - it was this](#): Scott Morrison finds himself in the eye of a storm. But handing control of the Covid agenda to bureaucrats who copied Jacinda Ardern's 'truth' doctrine was far worse - see copy attached.)

No doubt there'll be a deluge of rats scuttling across the deck now, saying they knew it all along... **Murdoch media...we need the spotlight on YOU!** And your cosy relationship with Scott Morrison going back to 2015, and the enactment of the coercive No Jab, No Pay law in January 2016, a concept initiated by the Murdoch media's No Jab, No Play coercive vaccination campaign in 2013-2015, coming into its own during Covid - e.g. No Jab, No Job. The Murdoch media/News Corp Australia has controlled the Covid narrative - without disclosing conflicts of interest, i.e. News Corp Australia's corporate partnership with the Murdoch Children's Research Institute, which is involved in vaccine research, including Covid-19 vaccine research with the Doherty Institute, the same Doherty Institute whose modelling put Australia into lockdown in March 2020, influenced by the infamous modelling of Neil Ferguson and co, Imperial College London, which argued for 'suppression' of the virus... "**until a vaccine becomes available**". (Also see my colleague Emma McArthur's email: [Is Australia being held to ransom thanks to 'scientific fiction' by the Doherty Institute?](#) 2 September 2021.)

Time to track this back now...including that Australian Prime Minister Scott Morrison called the pandemic in January 2020, before the World Health Organisation. (See for example: [Virus emergency blueprint: Australia pulls trigger on pandemic plan](#), *SMH*, 26 February 2020, and [Australia ready for a coronavirus pandemic and sustained outbreak](#), *SMH*, 27 February 2020 - see copies attached.)

And then Morrison locked Australians in behind closed borders, a captured market for 'the vaccine'. But, as my colleague Emma McArthur asks: [Why did the Australian Prime Minister abandon the pandemic plan?](#) 16 July 2021.

Interesting to think about all this now, and the subsequent disastrous ramifications for the rest of the world...with the grossly disproportionate and ill-targeted Covid-19 response.

Way past time to get all this out in the open and debate underway...

In this regard, ***please see below the email thread challenging the scientific and medical establishment, and the conflicted mainstream media in Australia.***

Elizabeth Hart

Independent researcher investigating the over-use of vaccine products and conflicts of interest in vaccination policy [vaccinationispolitical.net](#)

----- Forwarded message -----

From: **Elizabeth Hart** <elizmhart@gmail.com>

Date: Fri, Aug 19, 2022 at 4:29 PM

Subject: Response to Mike Toole re COVID-19 and jabbing of children

To: Mike Toole <mike.toole@burnet>

Cc: John Adams <jadams1796@>, Catherine Bennett <catherine.bennett@deakin>, Ted Steele <ejsteele48@>, Christopher Goodnow <c.goodnow@garvan>, <norman.swan@abc>, <swan.norman@abc>, Stephen Austin <Austin.Stephen@abc>, Stuart Tangye <s.tangye@garvan>, <hodgkin@wehi>, <david.tarlinton@monash>, Antony Basten <a.basten@garvan>, Gustav Nossal <gnessal@>, Ian Frazer <i.frazer@uq>, <tony.cunningham@sydney>, <j.dwyer@unsw>, John Shine <j.shine@garvan>, Peter Doherty <pcd@unimelb>, Peter Colman <pcolman@wehi>, Terry Nolan <t.nolan@unimelb>, <robert.booy@sydney>, Dominic Dwyer <dominic.dwyer@sydney>, Robinson, Natasha <robinsonn@theaustralian>, <lehmannj@theaustralian>, Waterson, Steve <watersons@theaustralian>, <mitchellc@theaustralian>, Andrew Bolt <andrew.bolt@news>, Nick Cater <Nick.Cater@menziesrc>, Creighton, Adam <creightona@theaustralian>, Chris Kenny <chris.kenny@skynews>, Sheridan, Greg <sheridang@newsLtd>, <gunnm@theaustralian>, Weir, Sam <sam.weir@news>, <rita.panahi@news>, <paul.griffin@uq>, Sharon Lewin <sharon.lewin@unimelb>, <sharri.markson@news>, <margaret.danchin@mcri>, <kylie.shaddock@sydney>, Nikolai Petrovsky <nikolai.petrovsky@flinders>, Tony Blakely <antony.blakely@unimelb>, Brendan Crabb <brendan.crabb@burnet>, Raina MacIntyre <r.macintyre@unsw>, Adrian Esterman @unisa <adrian.esterman@unisa>, Steve Crothers <sjc7541@>, John Wetherall <j.wetherall@westnet>, Judy Wilyman <Judywilyman@>, John Schuster <drjaschuster@>, Heath Goddard <Heath.Goddard@>, Mary Butler <butlerct@>, Chandra Wickramasinghe <ncwick@>, Reg Gorczyński <reggorczyński@>, Gensuke Tokoro <tokoro@>, Robert Temple <robert.temple@>, Daryl Wallis <dhwallis@>, Mark Gillman <mag@>, Herbert Rebhan <docrebhan@>, Pat Carnegie <patcarnegie@>, John Mathews <mathews@unimelb>, Collignon, Peter (Health) <peter.collignon@act>, Sanjaya Senanayake <sanj971@>, Sandy <sandy@>, Brig Klyce <briggklyce@>, The Cosmic Tusk <george@>, Mark Neugebauer <erich.neug@>

For the attention of:

People influential on taxpayer-funded public health/vaccination policy in Australia, via the scientific and medical establishment, and the mainstream media

Mike Toole, I'm appalled at the atrocious state of the scientific and medical establishment in Australia, and the mainstream media, in facilitating the coercive mass population COVID-19 jab rollout, **and supporting the destruction of bodily autonomy and bodily integrity, with the trashing of 'valid voluntary consent' before a medical intervention, i.e. the COVID-19 'leaky vaccines'.**

In regards to the jabbing of children, according to today's [Australian Government jab statistics](#), **2,226,664 children aged 5-15 have been jabbed with one dose of COVID-19 'leaky vaccine', with 1,909,694 children being jabbed with two doses.**

How was 'valid voluntary consent' obtained from parents/carers before this novel mRNA medical intervention, what information was provided to parents/carers to enable them to make an informed decision?

Children aren't at serious risk with COVID-19 - why have they been deliberately jabbed with defective 'leaky vaccines', potentially compromising their own naturally effective immune response - is the goal to make them dependent upon the vaccine industry and facilitate a multi-billion dollar vaccine market?

Australian Technical Advisory Group on Immunisation (ATAGI) [advice dated 21 February 2022](#) notes: **"Most children with SARS-CoV-2 infection are asymptomatic or experience a mild illness. Those who are symptomatic typically have a short illness with a median duration of 5 days..."**

ATAGI also notes that **"...children aged 5-11 years...were the least likely of all age groups to require hospitalisation or ICU admission for COVID-19..."** ATAGI also notes: **"Deaths in children due to COVID-19 are rare. Data from the United Kingdom suggest that 2 per every 1 million children infected with the virus died of COVID-19."**

ATAGI advice indicates most children have an effective natural immune response to SARS-CoV-2 and are at low risk of disease, i.e. COVID-19.

I challenged Nigel Crawford, chair of ATAGI, as to why ATAGI recommends the use of the paediatric Pfizer COVID-19 injection in all children aged 5 to 11 years in Australia, see my email: [Why does ATAGI recommend COVID-19 mRNA injections for all children aged 5 to 11 years?](#) 22 April 2022.

In my email to Nigel Crawford I note that young children are relying on their parents/carers to provide 'voluntary consent' to the COVID-19 mRNA injections on their behalf. Parents must be properly informed of the risks of 'the virus'/disease relevant to age and health status, and I asked Nigel Crawford this question:

Are health care practitioners being reminded of their ethical responsibility to obtain 'valid voluntary consent' before administration of the COVID-19 mRNA injections, as stipulated in the section on 'Valid consent' in *The Australian Immunisation Handbook*? For example, valid consent "must be given voluntarily in the absence of undue pressure, coercion or manipulation" and "It can only be given after the potential risks of the relevant vaccine, the risks of not having it, and any alternative options have been explained to the person".

As far as I'm aware, I've received no response from Nigel Crawford.

Mike Toole, you and others on this email list, i.e. Catherine Bennett, Margie Danchin, Peter Collignon, Christopher Goodnow, Terry Nolan, Robert Booy, Peter Doherty, Gus Nossal, Sharon Lewin, Raina MacIntyre, Ian Frazer, Tony Blakely, Phil Hodgkin, David Tarlinton, Tony Basten, John Shine (via Australian Academy of Science), Peter Colman, Dominic Dwyer, Paul Griffin, Sharon Lewin, Nikolai Petrovsky, Brendan Crabb, Adrian Esterman, and John Mathews, plus media representatives, i.e. Norman Swan, Stephen Austin, Michelle Gunn, Chris Kenny, Natasha Robinson, Steve Waterson, Chris Mitchell, Andrew Bolt, Nick Cater, Adam Creighton, Sam Weir, Rita Panahi, and Sharri Markson, **were included on my email to Nigel Crawford, along with other people influential on taxpayer-funded public health/vaccination policy in Australia** - have a close look at the email list on [my email to Nigel Crawford](#).

I also forwarded an email on this matter to Karen Price, president of the Royal Australian College of General Practitioners, see my email: [Why does ATAGI recommend COVID-19 mRNA injections for all children aged 5 to 11 years? Email to Karen Price, president of the RACGP](#). 9 May 2022.

My email to Karen Price was copied to John Wilson, then president of the Royal Australasian College of Physicians (RACP); Omar Khorshid, president of the Australian Medical Association (AMA); Martin Fletcher, CEO, Australian Health Practitioner Regulation Agency (AHPRA); Anne Tonkin, chair of the Medical Board of Australia; and Gill Callister, chair of the AHPRA Agency Management Committee. My email to Karen Price was also forwarded to politicians, media representatives and others - again, have a close look at [the email list](#).

My email to RACGP president Karen Price included my email to ATAGI chair Nigel Crawford, **and questioned why parents/carers are being pressed to have children injected with novel mRNA pharmaceutical products, and raised the vitally important ethical principle of 'valid voluntary consent'**.

As far as I'm aware I've received no response from Karen Price.

It's clear to me the scientific and medical establishment in Australia treats the general public with contempt, it's obvious from the patronising and arrogant attitudes exhibited on this and other email threads.

Similarly, the mainstream/corporate media is massively failing to provide objective and independent critical analysis to the Australian public, e.g. [the deeply conflicted Murdoch media/News Corp Australia](#), and the worse than useless taxpayer-funded ABC and SBS, which have provided little or no critical analysis of the COVID-19 response and vaccination policy.

Again, I'm appalled at the atrocious state of the scientific and medical establishment in Australia, in facilitating the coercive mass population COVID-19 jab rollout, and supporting the destruction of bodily autonomy and bodily integrity, with the trashing of 'valid voluntary consent' before a medical intervention, i.e. the COVID-19 'leaky vaccines'.

Sincerely

Elizabeth Hart

Independent researcher investigating the over-use of vaccine products and conflicts of interest in vaccination policy
vaccinationispolitical.net

----- Forwarded message -----

From: **Mike Toole** <mike.toole@burnet>

Date: Wed, Aug 17, 2022 at 1:37 PM

Subject: Re: Dr Peter Johnston - wisdom, erudition, common sense on Covid

To: Elizabeth Hart <elizmhart@gmail.com>

Cc: John Adams <jadams1796@>, Catherine Bennett <catherine.bennett@deakin>, Ted Steele <ejsteele48@>, Christopher Goodnow <c.goodnow@garvan>, <norman.swan@abc>, <swan.norman@abc>, Stephen Austin <Austin.Stephen@abc>, Stuart Tangye <s.tangye@garvan>, <hodgkin@wehi>, <david.tarlinton@monash>, Antony Basten <a.basten@garvan>, Gustav Nossal <gnossal@bigpond>, Ian Frazer <i.frazer@uq>, <tony.cunningham@sydney>, <j.dwyer@unsw>, John Shine <j.shine@garvan>, Peter Doherty <pcd@unimelb>, Peter Colman <pcolman@wehi>, Terry Nolan <t.nolan@unimelb>, <robert.booy@sydney>, Dominic Dwyer <dominic.dwyer@sydney>, Robinson, Natasha <robinsonn@theaustralian>, <lehmannj@theaustralian>, Waterson, Steve <watersons@theaustralian>, <mitchellc@theaustralian>, Andrew Bolt <andrew.bolt@news>, Nick Cater <Nick.Cater@menziesrc>, Creighton, Adam <creightona@theaustralian>, Chris Kenny <chris.kenny@skynews>, Sheridan, Greg <sheridang@newsitd>, <gunnm@theaustralian>, Weir, Sam <sam.weir@news>, <rita.panahi@news>, <paul.griffin@uq>, Sharon Lewin <sharon.lewin@unimelb>, <sharri.markson@news>, <margaret.danchin@mcri>, <kylie.shaddock@sydney>, Nikolai Petrovsky <nikolai.petrovsky@flinders>, Tony Blakely <antony.blakely@unimelb>, Brendan Crabb <brendan.crabb@burnet>, Raina MacIntyre <r.macintyre@unsw>, Adrian.Esterman@unisa <adrian.esterman@unisa>, Steve Crothers <sjc7541@>, John Wetherall <j.wetherall@westnet>, Judy Wilyman <Judywilyman@>, John Schuster <drjaschuster@>, Heath Goddard <Heath.Goddard@>, Mary Butler <butlerct@>, Chandra Wickramasinghe <ncwick@>, Reg Gorczyński <reggorczyński@>, Gensuke Tokoro <tokoro@>, Robert Temple <robert.temple@>, Daryl Wallis <dhwallis@>, Mark Gillman <mag@>, Herbert Rebhan <docrebhan@>, Pat Carnegie <patcarnegie@>, John Mathews <mathews@unimelb>, Collignon, Peter (Health) <peter.collignon@act>, Sanjaya Senanayake <sanj971@>, Sandy <sandy@>, Brig Klyce <brigklyce@>, The Cosmic Tusk <george@>, Mark Neugebauer <erich.neug@>

So, Elizabeth, with your natural immunity theory you'd like to take us back to the pre-vaccine era when 2.5 million children died annually from measles and 350,000 died each year from polio?

On Wed, 17 Aug 2022, 13:14 Elizabeth Hart, <elizmhart@gmail.com> wrote:

John, thanks for the link to your essay: [Australia Has Been Economically Destroyed Within 4 weeks \(adamseconomics.com\)](http://adamseconomics.com)

The fundamental question is...

Why was there a 'vaccine' response to SARS-CoV-2 / Covid-19, i.e. a global mass population 'vaccine' response against a disease it was known from the beginning wasn't a serious threat to most people?

- How did this 'vaccine' response happen?
- How was it evaluated?
- Who made the decision to go ahead with the global mass population injection campaign with Covid-19 'leaky vaccines' that don't prevent infection nor transmission, against a disease it was known from the beginning wasn't a serious threat to most people?

I questioned the emphasis on fast-tracked vaccine products in my rapid response published on *The BMJ* in March 2020, including challenging Neil Ferguson's statement: "**The only exit strategy [in the] long term for this is really vaccination or other forms of innovative technology that allows us to control transmission**".

It seems 'controlling transmission' via vaccination has failed...

Please see below my *BMJ* rapid response published in March 2020:

Is it ethical to impede access to natural immunity? The case of SARS-CoV2

Dear Editor

If children, young adults and others can mount their own effective immune response to SARS-CoV2, is it ethical to impede their ability to access natural immunity by interfering with the natural progression of the virus?

According to the WHO, "Illness due to COVID-19 infection is generally mild, especially for children and young adults."^[1]

Is the focus on future fast-tracked vaccine products blocking full consideration of the opportunity for natural herd immunity? Who is Neil Ferguson to say "The only exit strategy [in the] long term for this is really vaccination or other forms of innovative technology that allows us to control transmission".^[2]

In regards to young people's and others' right to natural immunity, it's also vital to consider the startling admission by Heidi Larson, Director of The Vaccine Confidence Project, during the recent WHO Global Vaccine Safety Summit, i.e. "...We've shifted the human population...to dependency on vaccine-induced immunity...We're in a very fragile state now. We have developed a world that is dependent on vaccinations".^[3]

This is a very alarming statement by Professor Larson, particularly with the prospect of other epidemics emerging in the future. We have to learn to deal with epidemics and illnesses as they emerge, it's not feasible to vaccinate the global population against every threat.

In a recent article raising concern about making decisions about this pandemic without reliable data, John Ioannidis notes that "School closures may also diminish the chances of developing herd immunity in an age group that is spared serious disease".^[4] The UK's chief scientific adviser, Sir Patrick Vallance, raised the prospect of developing natural herd immunity^[5], but this idea was subsequently howled down by Matt Hancock, the UK secretary of state for health and social care^[6], and others such as Willem van Schaik, a professor of microbiology and infection, as reported by the Science Media Centre.^[7]

Again, is it ethical to deny children, young people and others their opportunity for natural immunity, and to plan to make them dependent on vaccine-induced immunity, to in effect make them dependent on the vaccine industry?

This is even more serious to consider in light of emerging vaccine product failures, e.g. pertussis and mumps.

The international community must be assured that independent and objective thinkers are carefully considering the way ahead on this matter.

References:

1. WHO Q&A on coronaviruses (COVID-19) - Should I worry about COVID-19. 9 March 2020.
2. Elisabeth Mahase. Covid-19: UK starts social distancing after new model points to 260 000 potential deaths. *BMJ*2020;368:m1089
3. Heidi Larson. Vaccine safety in the next decade. Why we need new modes of trust building? WHO Global Vaccine Safety Summit, 2-3 December 2019.
4. John P.A. Ioannidis. A fiasco in the making? As the coronavirus pandemic takes hold, we are making decisions without reliable data. *STAT*, 17 March 2020.
5. Coronavirus: 60% of UK population need to become infected so country can build 'herd immunity', government's

chief scientist says. Independent, 13 March 2020.

6. The UK backs away from "herd immunity" coronavirus proposal amid blowback. Vox, 15 March 2020.

7. Expert comments about herd immunity. Science Media Centre, 13 March 2020.

Competing interests: No competing interests

25 March 2020

Elizabeth M Hart

Independent citizen investigating the over-use of vaccine products and conflicts of interest in vaccination policy

Adelaide, Australia

On Wed, Aug 17, 2022 at 11:01 AM John Adams <jadams1796@> wrote:

Dear Professor Bennett,

I don't think you fully comprehend the damage that you and your colleagues have done to the cause of science in Australia.

Your credibility among the general population is now in tatters.

Even if you and your colleagues have acted in good faith, the claims made over the past 2.5 years which were not even remotely true have caused tremendous public harm including unnecessary death, serious injury and financial devastation.

Take one example, in NSW, Dr Chant kept on telling the NSW public in August & September 2021 that the vaccine would stop transmission of COVID-19 and thus everyone needs to get vaccinated. This was never supported by the data and only in the past 2 weeks did Professor Sutton in Victoria concede that virus transmission is currently rampant irrespective of vaccination rates. Even in Israel in January 2022, they had an explosion of cases even though they had rolled out the booster within Israel (i.e., 3 jabs).

As to the lethality of the virus itself - in April 2020, I published the following 6,000 word essay on my website about why the risk of COVID-19 was not as serious as what the public was being told and that the economic response was disproportionate.

Admittedly, I am not a scientist, but an economist with a strong maths/statistical background. Statistically, in March 2020, the risks of COVID-19 were overblown by select parts of the scientific community. Modelling from Imperial College was so flawed that even researchers at Oxford University told the British media to stop listening to Neil Ferguson.

[Australia Has Been Economically Destroyed Within 4 weeks \(adamseconomics.com\)](https://adamseconomics.com)

If we are all to act in the public interest moving forward, I think it would be constructive for the scientific and medical communities to review the published research (including forecasts) and public statements made over the past 2.5 years and compare them to what actually happened. I think this exercise would show that Australia suffered because of bad science, flawed modelling and gross errors of judgement.

Cheers,

John Adams

On Tue, Aug 16, 2022 at 4:26 PM Catherine Bennett <catherine.bennett@deakin> wrote:

The first good news you have shared Ted! Peter doesn't know how to assess or interpret virulence data, CFRs etc... and thinks 1% IFR is acceptable!! Extraordinary. Best he's out of practice.

Catherine Bennett

BSc(Hons) MAppEpid PhD GAICD

Chair in Epidemiology,

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[COVID-19 blog](#)

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From: Ted Steele <ejsteele48@>

Sent: Tuesday, 16 August 2022 3:27 PM

To: Christopher Goodnow <c.goodnow@garvan>; norman.swan@abc; swan.norman@abc; Stephen Austin <Austin.Stephen@abc>; Stuart Tangye <s.tangye@garvan>; hodgkin@wehi; david.tarlinton@monash; Antony Basten <a.basten@garvan>; Gustav Nossal <gnossal@>; Ian Frazer <i.frazer@uq>; tony.cunningham@sydney; j.dwyer@unsw; John Shine <j.shine@garvan>; Peter Doherty <pcd@unimelb>; Peter Colman <pcolman@wehi>; Terry Nolan <t.nolan@unimelb>; robert.booy@sydney; Dominic Dwyer <dominic.dwyer@sydney>; Robinson, Natasha <robinsonn@theaustralian>; lehmannj@theaustralian; Waterson, Steve <watersons@theaustralian>; mitchellc@theaustralian; Andrew Bolt <andrew.bolt@news>; Nick Cater <Nick.Cater@menziesrc>; Creighton, Adam <creightona@theaustralian>; Chris Kenny <chris.kenny@skynews>; Sheridan, Greg <sheridang@newsld>; gunnm@theaustralian; Weir, Sam <sam.weir@news>; rita.panahi@news; paul.griffin@uq; Sharon Lewin <sharon.lewin@unimelb>; sharri.markson@news; margaret.danchin@mcri; kylie.shaddock@sydney; Nikolai Petrovsky <nikolai.petrovsky@flinders>

Cc: Tony Blakely <antony.blakely@unimelb>; Catherine Bennett <catherine.bennett@deakin>; Mike Toole <mike.toole@burnet>; brendan.crabb@burnet; Raina MacIntyre <r.macintyre@unsw>; Adrian.Esterman@unisa; Steve Crothers <sjc7541@>; John Wetherall <j.wetherall@westnet>; Judy Wilyman <Judywilyman@>; Elizabeth Hart <elizmhart@gmail.com>; John Schuster <drjaschuster@>; John Adams <jadams1796@>; Heath Goddard <Heath.Goddard@>; Mary Butler <butlerct@>; Chandra Wickramasinghe <ncwick@>; Reg Gorczynski <reggorczynski@>; Gensuke Tokoro <tokoro@>; Robert Temple <robert.temple@>; Daryl Wallis <dhwallis@>; Mark Gillman <mag@>; Herbert Rebhan <dcrebhan@>; Pat Carnegie <patcarnegie@>; John Mathews <mathewsj@unimelb>; Collignon, Peter (Health) <peter.collignon@act>; Sanjaya Senanayake <sanj971@>; 'Sandy' <sandy@>; Brig Klyce <brigklyce@>; The Cosmic Tusk <george@>; Mark Neugebauer <erich.neug@>

Subject: Dr Peter Johnston - wisdom, erudition, common sense on Covid

Dear Biomedical Colleagues in Immunology, Epidemiology and writers/presenters at *The Australian* and *News Corp* and *ABC*:

Dr Peter Johnston a Victorian GP with 50 years experience as a doctor caring for his patients finally had enough and resigned from his part-time work in his later years rather than submit to the medical tyranny of vaccine mandates, lockdowns, mask mandates, vaccination of children, etc.– just before AHPRA† were going to delist him.

Listen to him on *TNT Radio's* Mike Ryan Show (with Jeremy Beck) on August 9 2022 (until 26 mins)

https://www.podbean.com/media/share/pb-r3hc9-1295147?utm_campaign=embed_player_stop&utm_medium=dlink&utm_source=embed_player

and a day or so earlier with Mack Chat in *The Half Time Speech* on 7 August 2022 on Rumble

<https://rumble.com/v1f2c8x-mack-chat-with-dr-peter-johnston.html>

There are other brave and defiant doctors also now speaking out clearly and organising eloquently.†† The nonsense that vaccines actually protect against Covid, can moderate symptoms and are safe is exploding into nonsense like wild fire amongst intelligent aware men and women. Hopefully some form of justice and retribution will follow.

Sincerely

Ted Steele

† Australian Health Professional Regulatory Agency

†† Dr Christopher Neil, <https://popularrationalism.substack.com/p/has-the-australian-medical-community> Dr Lucas McLindon, Dr Andrew McIntyre, Dr Marl Hobart, Dr Bruce Paix , Dr William Bay, Dr Robert Brennan and others.

.....

Edward J Steele PhD

Member: AIMS,ASI,ASCI

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<https://independent.academia.edu/EdwardJSteele>

4 attachments



Nossal adds voice to anti-vax PhD.pdf

185K



Uncertain science blighted pandemic management.pdf

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