

**Health and Environment Committee**

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**From:** Robert Kruk [REDACTED]  
**Sent:** Wednesday, 13 January 2021 11:47 AM  
**To:** Health and Environment Committee  
**Subject:** Covid19 Public Health and Other Legislation (Extension of Expiring Provisions) Amendment Bill 2020

**Categories:** Submission

Dear Committee,

I am writing to request that this extension not be approved.

Governments have been overreacting with use of “lockdowns” as the only method of containment and to “flatten the curve”.

The QLD government issued the most ridiculous set of rules for a 3-day lockdown which contradicts many other states and countries and has forced what I believe to be potentially dangerous and harmful mandates. i.e. wearing a mask alone in vehicle (yet it's perfectly fine to smoke alone in a vehicle).

The current overreaction to this virus whereby the current stats shows that greater than 75% of deaths (in AUS) are from within aged-care and the majority of these deaths are elderly. Meaning the vast majority of the population have nothing to fear. Not to mention that the virus has been shown to have a very high (some sources state 99.9%+) survival rate. Although its difficult to quantify as many people appear to have no symptoms.

Please show me where anything else in history with such a low percentage of death, yet has cause such a response from government.

Lockdowns are not the answer. This response may end up causing more issues, (suicide, domestic violence, stress, loss of jobs, impact to economy etc).

Governments appear to be using a hammer (lockdown) and acting as if everything (“case”) is a nail.

**Alternative Treatments**

There is also promise of many other therapeutic drugs such as ivermectin and HCQ – please see Craig Kelly MP Facebook for sources and references.

It's disappointing that there was quick “evidence” and “peer review” to refute the use of HCQ and subsequently the enforced banning of the drug, yet there is substantial studies and many peer reviews from many doctors showing success (see <https://hcgmeta.com>)

Also note the use of the following study From NPS.org.au --

<https://www.nps.org.au/hcq-and-covid-19>

"hydroxychloroquine is potentially harmful and no more effective than standard care in treating patients with COVID-19. We therefore recommend that hydroxychloroquine should not be used."

However when you dig deeper:-

"The vast majority of evidence is from the "RECOVERY trial"

[\***NOTE**\* this single "Recovery trial" study was given 99.2% weight in NPS] which randomised 4716 hospitalised patients with COVID-19—this trial has reported preliminary results as a preprint but has yet to report complete data on adverse or serious adverse events [42]."

RECOVERY trial --> [42] Horby P, Mafham M, Linsell L et al : Effect of hydroxychloroquine in hospitalized patients with COVID-19: preliminary results from a multi-centre, randomized, controlled trial. medRxiv 2020; 2020.07.15.20151852- Journal Website = <https://www.medrxiv.org/content/10.1101/2020.07.15.20151852v1>

This study was flawed with

1. extremely high dosage of HCQ
2. No use of Zinc (nor Azithromycin)
3. Late intervention (early use of HCQ and zinc is key)

Regards,  
Robert Kruk

