




Speech By
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MEMBER FOR MOGGILL

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ADJOURNMENT

Coronavirus, Public Health Initiative

 **Dr ROWAN** (Moggill—LNP) (1.53 pm): With the rapidly evolving pandemic that is COVID-19, novel coronavirus, Queenslanders can be proud of the global leadership exhibited by our medical and health professionals. In particular, as a specialist physician and former president of the Australian Medical Association, I wish to acknowledge and update the Queensland parliament on a global public health initiative, the Extracorporeal Membrane Oxygenation for 2019 Novel Coronavirus Acute Respiratory Disease, ECMOCARD, which started right here in Brisbane and which has the capacity to guide the international intensive care unit community in how to best treat those with severe symptomatology.

Whilst most people with COVID-19 will experience only a mild illness, it is the ease of transmission which has the potential to overwhelm our healthcare system and that of other countries, particularly those people with chronic complex diseases. Importantly, Queensland and Australia still have time, but it is up to us, the community, to follow expert advice—to self-isolate, to stay at home if directed to do so, and to limit social contact. Of course, it goes without saying that if you are unwell you should seek urgent medical and health advice. There is so much that an individual can do to reduce the spread of this disease, and if we do our part individually and collectively then together we can limit the infection curve to reduce the burden on our intensive care capacity and overall health system, including our hospitals.

In times of global crisis, global collaboration is essential. This leads me to Brisbane's Critical Care Research Group, a group which counts the president of the Asia-Pacific artificial lung society as one of its members. In January of this year members of this group began communicating with colleagues across the entire Asia-Pacific region when they noticed the spike of cases across Wuhan. They worked tirelessly to create what was initially a study database and translated it into languages accessible across all of Asia. As the epidemic grew, they realised they were no longer dealing with a study but actually a public health emergency. They joined together with the University of Queensland's artificial intelligence limb and with Faethm, financial leaders of artificial intelligence in Sydney. They also joined with their colleagues and friends in intensive care units across Europe, India, North and South America and the Emirates. They came together for one common purpose: to gather as much data as possible, creating a machine-learning tool that could give real-time advice to predict best treatment and create decision support mechanisms for clinicians across the globe.

The ECMOCARD study that was born and originated in Queensland is now the largest database of all critically-ill patients requiring mechanical ventilation or life-sustaining artificial lung treatment with ECMO. The inventor of ECMO, Professor Bob Bartlett, has written to congratulate the program of research. As he says, one of the most important weapons in this time of crisis is data to predict and plan on a global scale. He went on to urge clinicians globally to work in the spirit of collaboration with organisations such as the ECMOCARD study.

I am sure all in this House join with me in acknowledging the dedicated health professionals who turn up to our various healthcare institutions and work not only during this time of crisis but also each and every day. I acknowledge Professor John Fraser for his foresight and leadership in initiating this global study. I encourage the state and federal governments to support the philanthropic financial support that has already been provided to ensure we get the best outcome in relation to this public health crisis.