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**Transcript:** AMA Vice President, Dr Chris Zappala, Sky News Live, *News Day with Ashleigh Gillon*, Thursday, 23 April 2020

Subject COVID-19 infections in health workers; elective surgery; school reopenings

**ASHLEIGH GILLON:** For more on how our health workers are handling this crisis, joining us live is the Vice-President of the Australian Medical Association, Chris Zappala. Chris, appreciate your time. Do we actually have a clear picture of just how many health workers around the country have actually contracted COVID-19? And what do those figures tell us about how well protected or otherwise our health workers are?

**CHRIS ZAPPALA:** Well, fortunately, the number of healthcare workers appears to be relatively low, and, in many of those cases, they've got it as a standard member of the community and they've not got it at work, at least that's the advice that we're hearing from the Department and health officials. And it does ring true, actually, with our experience. I think, in general, my colleagues have been very adept at stepping up and using PPE and practising appropriate precautions in these times, and caring properly for coronavirus patients. But of course, they do have to be extra, extra careful, and make sure that we're screening patients properly and using that equipment properly as well.

**ASHLEIGH GILLON:** When you talk about screening patients, we know of course that some elective surgery will start again around the country from next week. The AMA in WA, I know, wants elective surgery patients to be tested for COVID-19 before their procedures are performed. Is that a good idea, do you think? Does that have the support of the Federal AMA body?

**CHRIS ZAPPALA:** The problem with doing that - I mean, in principle, of course it would be nice to be able to apply that sieve to some patients, but the problem with that of course is the availability of testing, and making sure that we have enough kits and reagents and so on available to test patients with acute respiratory illness, so that we can identify cases and then do contact tracing and manage the virus epidemic itself.

There are obviously other ways to exclude patients in terms of risk of coronavirus. So you could look at, for example, a whole bunch of screening questions - how long have you been in isolation, what sort of symptoms do you have, contacts, et cetera - and thereby divine a certain amount of risk from that series of questions without having to do a swab and get a negative result. There may be special circumstances where we have to do that, but I don't think at this stage we can apply wholesale swabbing of everyone who might want something done in the hospital system. That's not going to be feasible, so we need to apply some clinical guidelines that help sort patients so that we can stratify risk appropriately.

**ASHLEIGH GILLON:** Are people still avoiding their GPs? Is that still something that you're concerned about?

**CHRIS ZAPPALA:** I am concerned about that. Do you know people still are doing that? And there's no question that there are people out there with chronic disease, and symptoms that have perhaps got a little bit worse through this period, who have not yet felt able to seek care for whatever reason from their general practitioner or their local hospital.

And I think a really important message to everyone is that it's entirely safe to go to your general practitioner or your other specialist, or if need be, into hospital to get care. But please do that. There's no reason to set aside your health concerns or to have your chronic problem attended to, and all of the practices or the institutions that you go to are still being meticulous with their physical distancing and handwashing and so on, as they hopefully always are. But there's no threat to patients, and they should feel comfortable to come back to their routine care now.

**ASHLEIGH GILLON:** What is the AMA's view on the return to schools? I interviewed an infectious diseases expert yesterday, a physician who suggested that returning kids to school at this point was a dangerous experiment. We've some school principals in States where schools have been told to return, especially private schools, Catholic schools, Anglican schools deciding not to do that, to stick with online learning and just have kids back if their parents can't facilitate that online learning at home. What's the AMA's view? Is it too early to see a full return of kids to school?

CHRIS ZAPPALA: The Australian Medical Association has supported the view taken by the National Cabinet, and the consensus of medical advice across the States and Territories. And that is that it's a question of degrees; that where people have concerns and there is scope at present to home school children, then that's quite reasonable to do that, and thankfully our schools are able to provide that. But where that capacity doesn't exist and/or the parents have essential jobs, then there still must be capacity to send the kids to school.

So, it's a question of degrees. We do want to reduce movement, reduce circulation in the community, and we can do that in stages and waves and that's very appropriate. And of course, it gets reassessed in light of the ongoing coronavirus numbers. So, I think where we're at at the moment is reasonable, and we can keep assessing that on a week by week basis.

**ASHLEIGH GILLON:** But do you agree with the Chief Medical Officer and the Prime Minister and the other State and education authorities talking about this, that school is a low risk environment for our children?

**CHRIS ZAPPALA:** Yes, we do agree with that. I mean, fortunately, our kids don't seem to have a significant illness and they don't have high rates of transmission.

I hasten to add that we're still learning about the virus, but that it is an impression that we're gaining at this stage. And of course, closing schools holus bolus has other implications and there are some of those that go well beyond just the health sphere, which others can comment on.

But we think that the advice, the very measured and considered advice from the health officials and from the Chief Medical Officer is reasonable and appropriate at this point in time. And thankfully, as the numbers continue to dwindle, and the curve flattens, as we keep hearing, that hopefully will be scope to look at lifting of those restrictions in the future.

**ASHLEIGH GILLON:** Chris Zappala, the Vice-President of the Australian Medical Association. Appreciate you joining us. Thank you so much.

CHRIS ZAPPALA: Pleasure.

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