



## 2<sup>nd</sup> Australasian COVID-19 Conference

### TAKING STOCK OF OUR COVID TOOLKIT

Executive Summary

21 – 22 July 2022

Our second conference brought together 373 scientists, healthcare providers, public health experts, educators, clinicians and academics in a hybrid format. Following from our inaugural conference *making sense of COVID*, C19 2022 gave us the chance to look back and take stock of our ever-evolving COVID toolkit. Now, two-and-a-half years into the pandemic, we have a chance to come together to touch on the enormous amount of research, impacts on communities around the world, and ever-changing mitigation strategies so that we can continue moving forward together.

The rapid variability observed in SARS-COV-2 was unexpected and underestimated. Variants of concern will continue to shape the pandemic, with international speaker Penny Moore shedding light on the importance of genomic sequencing in identifying and guiding our response, stressing the critical importance that sharing and consolidating data amongst researchers has to continue this important work.

Over the last 2.5 years, a truly staggering quantity of research (over 40,000 papers) has been published, and Amy Chung provided a high level summary on key discoveries that have helped shape our understanding of the complexities of our immune system and SARS-CoV-2.

We have all been impacted by the pandemic in different ways, and we were grounded with a consumer perspective from Harry Iles-Mann, who shared his personal experience as a chronically ill person; enduring over 40 weeks of the pandemic from the confines of a hospital in lockdown. Reminding us that trust, communication, and partnering with the community is crucial when moving forward through the pandemic together.

Remarkably, the term “long COVID” was coined by a patient group long before it was characterised by the scientific community, as Ziyad Al-Aly provided an updated perspective on the condition. Post-viral sequelae are not a novel concept, but as a result of being largely ignored throughout history they remain poorly understood. The scale of the pandemic has transformed initial scepticism to recognition, and has sparked an urgent need for research and guidelines in diagnosis, management and prevention of long COVID, which was covered by Greg Dore. The far-reaching and very real consequences of long COVID was made real by consumer Kaillee Dyke’s heart-wrenching experience. Research into long COVID is continuously evolving, and we were pleased to gain insights into new research on

this condition from Kari Lancaster and Jane Sinclair. In the resulting panel discussion our presenters were in fierce agreement: more research into the impact and treatment of long COVID is vital.

The pandemic has truly shone a spotlight on the world’s ability to rapidly identify, develop, study, and manufacture vaccines, highlighting areas of concern for countries without manufacturing capabilities. We heard from Keith Chappell who recounted the astoundingly rapid molecular clamp process which developed a vaccine candidate in record time, and with honing has provided Australia a new tool to enable rapid response to future pandemics.

Terry Nolan explored the trials and tribulations of vaccine development research in an academic setting, which is fraught with unexpected challenges requiring industrious solutions. For a regulatory perspective, Kristine Macartney provided an insightful overview on the role of regulators in making vaccines available and their efforts to expedite their availability in the market.

With three speakers addressing some learning from the COVID-19 pandemic; Priyanka Hastak, Amy Kwon and Joshua Karras each presented research on immune response, modelling in prison settings, and motivations of vaccination uptake by the public.

Safe and effective therapy has the potential to shape the future of the pandemic and Bridget Barber provided fascinating insight into the inner workings of Australia’s National COVID-19 Evidence Taskforce and how recommendations are made taking into consideration new therapeutics.

We were the first to hear the top-line results of the ASCOT Anticoagulation Domain Trial by Steve Tong which provided important new insights to guide the use of anticoagulation in patients with COVID. James McMahon showcased Australia’s local capabilities to



**373 Attendees • 204 Face-to-Face**  
Researchers • Primary Healthcare • Community • Clinical • Education

rapidly mobilise clinical studies to assess new interventions in presenting the results of a Melbourne-based study assessing favipiravir.

On the second day of our conference, we focused on some of fantastic achievements and significant challenges we faced, as well as highlighting the impact on marginalised and vulnerable populations.

“There have been a multitude of diverse pandemics”, explained Muge Cevik, which became evident as we heard from Yujin Jeong and Susan Michie detailing the different approaches that various governments have taken around the world. Our speakers highlighted the importance of taking a systemic approach to improving our collective response, but also emphasising the need for concurrent social, environmental, and behavioural interventions. Professor Paul Kelly highlighted that our continued response to the pandemic must be underpinned by expert advice.

We were treated to some fascinating insights regarding the nuances of supporting vulnerable communities. Presenters gave us insight into the unique challenges faced by aboriginal communities, immigrants, people who inject drugs, and those in custodial settings. Lack of access, low medical literacy, lack of engagement and mutual understanding are just some of the challenges faced by these vulnerable communities. To effectively engage vulnerable populations is tailored and respectful communication and interventions.

Effective modelling is essential for pandemic preparedness and to guide decision making. There is a disconnect between decision makers and modellers, and the need for a common language between the two is crucial. The advantages of a varied approach to

modelling was covered, with open access to real-time data and a collaborative, transparent approach potentially reducing biases and increasing trust from the community. In the panel discussion, the speakers explained how they were pleasantly surprised by the level of community compliance during harsh mitigation measures, highlighting the need for continued mutual trust.

In our closing plenary facilitated by Edwina Wright, our panellists were inundated with questions as we sought their opinions on what the future might hold: *From Coronavirus to Monkeypox and Beyond*.

“You’re fine, nothing is wrong with you” was a common assessment given to people with long COVID early in the pandemic. This early attitude and lack of understanding has eroded trust in the community which needs to be re-established.

The sheer scale of the pandemic has also revealed the fragility of our health system, which has given us pause to reflect and initiate systemic change and be better prepared in the future. The now certain future Australian CDC has great potential to help in future preparedness, however careful planning of the new agency is essential to earn community trust.

COVID is here to stay. As for what the future will bring, it is certain that there will be new variants of concern, therapeutics, vaccines and mitigation measures. The continued global challenge of COVID exposes the disparity of healthcare in disadvantaged countries, and we need to ensure that no person is left behind.

This second conference encouraged us to reflect, motivated us to champion change, and continue to shape our response to COVID.

**We want to thank all the presenters for your insights and observations and to our generous supporters who made this day possible.**

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