Dr David Berger: A principled advocate for equality and science in healthcare

Gary Alvernia, Richard Phillips 9 August 2022

Since June this year, Dr David Berger, a respected remote area general practitioner and principled advocate for zero-COVID, has been the target of censorship measures by the Medical Board of Australia (MBA) and the Australian Health Practitioners Regulation Agency (AHPRA).

Berger is currently being "disciplined" by AHPRA and threatened with deregistration, following anonymous complaints to the agency. According to AHPRA, Berger has used "emotive and pejorative language" on social media, causing his readers to "doubt the integrity of the persons and organisations targeted, and to lose confidence in the public health pronouncements and programmes promoted by them."

In fact, the death of almost 12,500 people from COVID in Australia—10,000 this year, following the adoption of "let it rip" policies by federal and state governments—has done more to undermine "confidence in public health pronouncements" than anything Dr Berger has said on social media.

Thousands of deaths would have been avoided if the COVID-safe medical advice offered by Berger and other principled medical scientists had been implemented.

Alarmed by AHPRA's authoritarian actions, a group of senior doctors and medical scientists, some of the most prominent in their field, published an open letter—"Free Speech for Doctors"—on July 14.

The letter condemned Berger's persecution, demanded that AHPRA end its disciplinary action and called for an investigation into the agency's opaque but wide-ranging powers to silence and deregister health workers for daring to criticise government health policies. It was signed by over 1,000 people within 12 hours of publication. Berger also won mass support on social media, including from his almost 39,000 followers on Twitter, where his clear and honest communications about the dangers of COVID have strongly resonated.

The MBA and AHPRA responded to the open letter with a joint statement on July 25, insisting that "freedom of speech" was of less importance than "respectful engagement" and "building a positive culture" in medicine.

"Social media is not a forum to bully, harass and intimidate," it continued, and "oversimplifying this debate to freedom of speech fails the first challenge in improving the culture of medicine—the ability to disagree with respect."

The statement, which did not mention Berger, then cited three recent AHPRA-MDA disciplinary cases. These involved doctors variously selling fraudulent vitamin cures, advancing right-wing homophobic and anti-Muslim positions, engaging in grotesque mockery of sexual assault victims and violating patients' rights to privacy.

These references were designed to muddy the waters about Berger, implying a parallel between his campaign for a science-based public health response to COVID and the actions of three right-wing violators of basic medical practice.

As the World Socialist Web Site has stated from the outset, AHPRA's allegations against Berger are a patent fraud. Berger is being censored and threatened with deregistration precisely because he has effectively exposed the deadly consequences of Australian governments' response to COVID-19—a political scandal that medical regulatory authorities want swept under the rug.

Australian medical authorities' attempts to discredit Berger are refuted by his historical record as a consistent, principled, and respected advocate for scientific rigour and social equality in healthcare.

Born in the UK, the child of Jewish refugees who fled the Nazi genocide, Berger's family experiences left a profound impression on him, animating his hostility to social injustice, racism and the extremeright.

After graduating as a medical doctor from the prestigious University of London in 1991, he and his wife trained as general practitioners to serve in rural and remote areas. Before moving to rural northern Australia in 2012, they had worked in under-served communities in the UK, the Solomon Islands and the Himalayas.

Soon after COVID-19 was identified as a serious threat, Berger began raising the alarm about its devastating impact on medical workers, public health and society as a whole, while highlighting the complacent and unscientific responses of governments in Australia and internationally.

These concerns were expressed, not just in Berger's social media postings, but numerous articles in respected medical journals and newspapers, as well as jointly authored scientific analyses and submissions. While it is not possible to review all these here, a few samples highlight Berger's socially principled approach.

In a January 2021 *BMJ* (British Medical Journal) article, Berger addressed the failure of the UK and other countries to adequately protect healthcare staff, resulting in the deaths of thousands of workers

Entitled "Up the line to death: covid-19 has revealed a mortal betrayal of the world's healthcare workers," it denounced governments for hypocritically applauding health workers as "heroes" while denying them PPE, adequate staffing levels and rest, or addressing serious infrastructure shortcomings.

In a March 2021 article entitled "Beg, Borrow, Copy, Steal: All's fair in love, war and a pandemic," Berger derided the "extreme parochialism, petty nationalism, the inability to comprehend that

others' experiences may carry urgent information which could save health, lives and the economy." He appealed for broader collaboration between health authorities and scientists, nationally and internationally.

An April 2021 article, "Australia must act to prevent airborne transmission of SARS-CoV-2," jointly written with Zoë Hyde and Andrew Miller, reviewed the increasing body of evidence collected since December 2019 about airborne transmission of the disease. It warned that existing PPE, including cheap surgical masks, were inadequate for containing its spread, a fact that at the time was rejected by Australian state and federal bodies.

The article concluded by demanding that healthcare workers be given "the highest level of protection, commensurate with their high risk of exposure, and to comply with workplace health and safety laws, which require every reasonably practicable method to prevent worker harm to be adopted."

In October 2021, Berger submitted advice on protecting rural and remote communities to OzSAGE, a group of well-known epidemiologists and medical scientists. He opposed early border reopenings, called for mass vaccinations along with improved indoor ventilation, the provision of adequate PPE supplies, and increased staffing and infrastructure support for these socially deprived areas. Most of these recommendations were ignored by governments, with rural and regional communities facing the most severe effects of COVID and supply disruptions.

Last September, Berger penned an impassioned op-ed in the *Sydney Morning Herald* entitled, "Underlying health conditions? That's all of us." It followed the publication of a full-page advertisement by the Business Council of Australia demanding an end to COVID-19 lockdowns and other restrictions on business profits.

Berger explained how the phrase "underlying conditions" was being used to justify rising COVID deaths and to condition the population for continuous mass casualties. The aim of this terminology, he wrote, was to indoctrinate the public "into believing that these [COVID] deaths are happening not to healthy young people... 'valuable' members of society—but rather to—the old, the weak, the infirm."

After observing that fully 50 percent of the population has at least one chronic disease that would count as "underlying conditions" Berger highlighted the capitalist profit motives behind eugenicist calculations about the "value" of people.

"Several decades of libertarian political philosophy have resulted in the partial destruction of the idea of collective fates and collective action. All that matters is the individual, who is mendaciously instructed they must keep moving and abandon the weak for the sake of 'the economy,' a construct whose purpose increasingly appears to be to deliver excessive profit to fewer and fewer oligarchs," he wrote.

This brief selection of Berger's writings over the past two years powerfully refutes AHPRA's allegations and its disciplinary actions.

The purpose of these anti-democratic measures is two-fold.

Firstly, to divert attention from Berger's tireless advocacy for a rigorous scientific and socially conscious approach to the pandemic and his exposure of government indifference to mass death and infections. Secondly, to make clear to health workers that no dissent with government policy will be tolerated.

In late December 2020, Berger warned of future government attempts to silence health workers.

In an article entitled "Don't let them gag doctors. We are your canaries," he declared that public health authorities needed to be "challenged robustly in public" by their peers—"people who have the

specialist knowledge to do so effectively." Doctors and other healthcare workers were both "uniquely dangerous to those wishing to conceal uncomfortable truths" but also "uniquely vulnerable to suppression," he wrote.

"Attempts by authority figures to stifle the voice of healthcare worker advocates by means of sweeping gagging clauses, threats of employment termination, legal action for defamation and reporting to regulatory authorities strike at the heart of transparency in government," he added.

Berger's censorship warnings have been confirmed in spades, with himself on the receiving end. Likewise his concerns about the deadly consequences of government failure to protect the population from COVID.

Until mid-2021, Australia had fewer than 1,000 COVID deaths. Government refusals to impose essential zero-COVID public health measures, particularly since last December, have resulted in the country now registering over 12,500 deaths, with 9.5 million people infected at least once.

Having had one of the lowest COVID death rates on the planet, Australia is now among the highest in the world, a social crime that Australian governments and medical authorities are responsible for and will not discuss.

The current COVID wave in Australia is the worst to date, but if the pandemic is left to run rampant, new mutants will bring additional disease and deaths and overburden a healthcare system already collapsing. Australian workers, like their counterparts internationally, confront perpetual waves of death and suffering.

The answer to this is an international struggle of workers to institute scientific measures to eliminate COVID, an entirely feasible and necessary goal. Recognising the reality of COVID and the measures required, however, is only possible when workers have unbroken access to the knowledge of health experts and scientists like Dr Berger.

It is for this reason that all sections of the working class, including doctors, health workers and medical scientists, as well as students and youth, must demand an end to AHPRA's persecution of David Berger and freedom of speech for all health practitioners.



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