

Aust Govt. signals fascist healthcare cuts to save system

In the face of an economic breakdown of unparalleled dimensions, and a flu pandemic consequently hitting hard, the Australian Government have indicated their solidarity with the type of health-care reforms being implemented by Obama, which policy could be summed up this way: don't get sick, diabetic, asthmatic, obese, or old, or develop another such "underlying medical condition", or you're screwed.

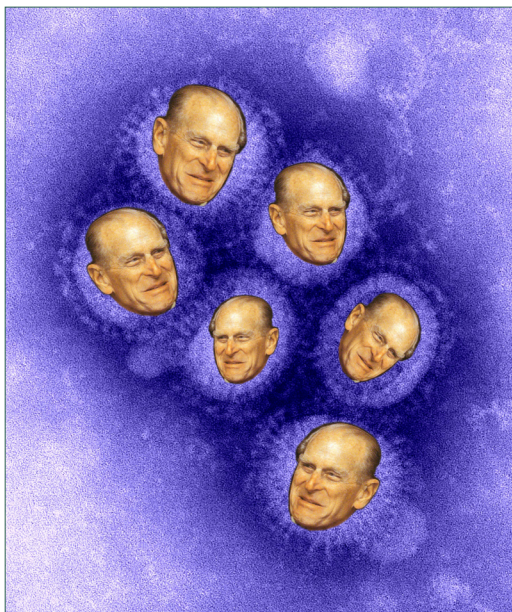
After all, governments could not be expected to spend good money, to try to save such "damaged goods", which will only remain a drain on the already overstretched system, right? And as for that pesky little flu, well, 2,500 to 3,000 people die every year from the regular flu, so we're within the bounds of acceptability so far, right? And the victims are all about to drop off the perch anyway, they are either old, or have cancer, or some other "underlying condition".

Now, with this all being the case, surely it is not really necessary to rescue or overhaul our hospital system at all?

This appears to be the thinking of the Rudd Government, which, according to Health Minister Nicola Roxon, is looking at proposals to redirect health spending away from hospitals. In an interview with *The Age* on June 29th, Roxon said it was time for Australians to have a "difficult conversation" about the most effective health system, and foreshadowed major changes.

Even a recent admission that over 38% of hospitalisations are the result of medical or surgical complications suffered in hospitals in the first place, has been construed as a reason to stop overloading hospitals with sick people, "people who would have been much better cared for in the community," according to Professor John Dwyer, founder of the Australian Health Care Reform Alliance.

The NSW Health director-general, Debora Piccone, has also called for radical changes, indicating that within five years our free Medicare system could disappear altogether, replaced by a US-style user-pays system. According to *The Australian* (10th June 2009), she said, "An ageing population and explosion in health costs were pushing the system to near a point of no return."



What a deadly virus looks like.

Flu pandemic

One certain way to bring down such costs is to have some of the weakest wiped out by the flu. Scaling back our response to the outbreak, because it is only a "mild" illness, is a sure fire way to ensure the mutation of the disease, which likelihood increases with the more passages it makes through the human body. All states have now moved to the "protect" or "sustain" phase, which means the government is no longer acting to monitor and prevent the spread of the virus through use of flu-strain testing, airport and port measures, and quarantining, as well as only allowing use of anti-virals, etc, for the most vulnerable patients.

And now that a vaccine for swine flu has been developed, a myriad of reasons are being given as to why it should not be released for many months, from the need for it to be registered with international authorities, to the more legitimate need for more testing, to the actual "no need for it if the virus continues to be mild" excuse. Dr Rachel Davide from Commonwealth Serum Laboratories (CSL) admitted that "If this was a real emergency, if this virus was killing half the people it infected like the original bird flu then of course we'd dispense with the trial process..."

As it is, one million Americans have been confirmed by the Center for Disease Control (CDC) as having the virus, and there is still no sign of a decline in the rate of transmission. This is not an

ordinary seasonal flu, or it would have long since receded given that it is Summer in the Northern Hemisphere.

At a June 26 Paris meeting, director of France's National Institute for Health Surveillance, Prof. Claude Desenclos, noted the similarities of this pandemic to the 1918 flu, given that deaths are tending to appear in the 20- to 30-year age group rather than primarily in the elderly, who are the usual victims of a seasonal flu. The virus causes bronchial irritation, creating the conditions for severe bacterial pneumonia and death through suffocation. In 1918, no antibiotics existed to fight such a bacterial infection, but today, the flu's deadliness is unexplained. Desenclos also noted that the WHO is not sharing the important information that is needed about severe cases.

In addition, a June 23 editorial in the *China Daily*, warns that, "The real trouble is not that we cannot deal with its current symptoms, but that several countries are losing track of its chains of transmission," the government daily warns, noting that in a pandemic things could become much more difficult to control.

If the virus undergoes a change to a more deadly form, a possibility which becomes more likely as time goes on and the longer we neglect to improve our living standards, hospital systems, bio-defence and sanitation, casualties could run into the millions.

Eliminate infectious diseases!

In the United States, after nearly a century of declining mortality from infectious diseases, in which the Infectious Disease (ID) death rate fell from 797 per 100,000 persons in 1900 (one third of which came from tuberculosis, pneumonia and diarrheal diseases), down to 40 per 100,000 by the early 1980s, then came a reversal. The ID death rate started rising yearly, and by the turn of the 21st Century, it was up to nearly 60, a 50% increase over 1980. It has risen since.

Diseases which had been all but stamped out, such as tuberculosis and whooping cough (the incidence of which has doubled in Australia this year compared to the same period last year) are now seeing a resurgence.

The ID rate is set to explode, unless we force a drastic policy shift upon governments now.