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21 September 2021

s 9(2)(a)

By email: s 9(2)(a)

Ref: H202110964

Tēnā koe s 9(2)

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to the Ministry of Health (the Ministry) on 24 August 2021. I will respond to each part of your request in turn.

1) What serology testing is being done to establish what % of people in NZ already have immunity to SARS Cov 2? What are the current results?

The antibody/serology test is currently only used in limited cases, as directed by a public health doctor, to support investigation of possible new cases or to support patient management. Serology testing on a wide scale would not be useful to establish who has immunity because it is not yet known what the exact level of immunity is required for adequate protection. Moreover, given that New Zealand has had a relatively low rate of infection, it is highly unlikely that a large number of infections are undetected. A pre-vaccination roll-out study by researchers at the University of Auckland found that NZ had a very low seroprevalence (approximately 0.1%), suggesting a very small amount of undetected community transmission from all outbreaks occurring in 2020. You can find this study at:

www.medrxiv.org/content/10.1101/2021.04.12.21255282v1.

More information on COVID-19 antibody/serology testing in New Zealand can be found here: health-advice-public/assessment-and-testing-covid-19/how-covid-19-testing-works.

- Does the Government's vaccine agreement with Pfizer in any way inhibit use of offpatent drugs that have been used very successfully to treat SARS Cov 2? (including ivermectin and hydroxychloroquine)
- 3) 3) If the answer to (2) is no, why are these drugs not being made freely available (via the health system) for those who are unwell and have tested positive?

The terms of the Government's contract with Pfizer does not inhibit the use of another therapeutic in New Zealand in any way. However, please note that evidence does not support the use of ivermectin and hydroxychloroquine to treat COVID-19. More information is available here: www.health.govt.nz/system/files/documents/pages/csu 09 july 2021 covid-19 pharmaceutical treatments.pdf.

At present, the only approved medication for COVID-19 is dexamethasone tablets. For your reference, medical practitioners are permitted to prescribe any medicine for a particular patient in their care at their discretion; however, unapproved medicines have not been evaluated by Medsafe for safety and efficacy. If your healthcare professional chose to prescribe other agents to treat a patient with COVID-19 it would be their responsibility to ensure that they are aware of

any safety issues and that they communicate the risks and benefits to their patients. See www.medsafe.govt.nz/COVID-19/medicine-approval-process.asp.

For your reference, the Royal New Zealand College of General Practitioners has stated that the use of ivermectin for the treatment of COVID-19 is strongly not recommended, see: www.rnzcgp.org.nz/RNZCGP/News/College news/2021/College of GPs comes out against I vermectin for COVID-19 treatment.aspx.

4) Is the Ministry familiar with Dr Vladimir Zelenko's very successful treatment protocol for SARS Cov 2, which he has used to successfully treat more than 6,000 cases?
5) If the answer to (4) is yes, will the Ministry be facilitating such treatment in New Zealand?

The Act does not support requests in which a requester quotes information and then seeks some form of comment on it, couched as a request for official information. However, I note that for a medicine to be approved for the prevention or treatment of COVID-19, New Zealand legislation requires that a sponsor company submits an application with appropriate safety and efficacy data to Medsafe for evaluation and approval before it can be used.

Further information on what treatments are approved for COVID-19 is available here: www.medsafe.govt.nz/COVID-19/medicine-approval-process.asp.

6) How many cycles of amplification are currently being used for PCR testing in New Zealand?

The Institute of Environmental Science and Research (ESR) has advised that PCR assays are set to cycle for 45 amplification cycles. However, the cut-off for calling a result as positive is equal and below 40 amplification cycles and only when it has also been confirmed by a second target PCR which became positive equal or below 40 cycles.

6) Why are doctors and other health professionals not able to access the details about past and current diagnosed cases of SARS Cov 2, including those reported as dying from it?

Health information is confidential and sensitive. The Health Information Privacy Code 2020 provides rules for how health information is collected, used, held and disclosed by health agencies. This is available here: www.privacy.org.nz/privacy-act-2020/codes-of-practice/hipc2020/. You can read more about who is able to access patient information here: www.privacy.org.nz/assets/Files/84346355.pdf.

I trust this information fulfils your request. Under section 28(3) of the Act you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Ministry website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa. nā

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