

30 April 2025

Hon Mary-Anne Thomas MP

Minister for Health, Victoria

Via email: mary-anne.thomas@parliament.vic.gov.au

Cc:

- Associate Professor Andrew Wilson – andrew.wilson@safercare.vic.gov.au
- Professor Ed Oakley – ed.oakley@safercare.vic.gov.au

Re: Urgent Follow-up – Request for Evidence and Risk/Benefit Analysis Regarding the Mandatory Influenza Vaccination Policy for Healthcare Workers

Dear Minister Thomas,

We write again on behalf of the Australian Medical Professionals Society (AMPS), following our letter dated **5 February 2025**, in which we formally requested the scientific and ethical justification for Victoria's mandatory influenza vaccination policy for healthcare workers. To date, we have not received a response.

Given the implications of this policy on healthcare worker autonomy, occupational health, and public trust, this continued silence is deeply concerning.

Since our initial correspondence, new and significant data has come to light that heightens our concerns:

- A recent preprint study from the [Cleveland Clinic](#), involving over **53,000 healthcare workers**, found that influenza vaccination during the 2024–2025 season was **associated with a higher risk of infection**, not lower. The study reported a **negative vaccine effectiveness of –26.9%** (HR 1.27, 95% CI 1.07–1.51), suggesting that the current influenza vaccine may not only be ineffective but potentially counterproductive this season.
- **Cochrane reviews** show [limited to no evidence](#) that [healthcare worker](#) vaccination significantly reduces patient illness or hospitalisation rates.

In light of these developments and the growing body of peer-reviewed and observational research that challenges the efficacy and necessity of mandatory flu vaccines for healthcare workers, we respectfully repeat the requests made in our original letter:

1. The **evidence base and published studies** that support the efficacy of the flu vaccine in reducing transmission and improving patient outcomes in healthcare settings.

2. A **risk-benefit analysis** justifying the imposition of this policy, with consideration of adverse events, immune system interactions, and possible alternatives.
3. A **record of consultation processes** with frontline healthcare workers and independent medical experts.
4. An explanation of the **decision not to consider non-vaccine interventions** that support immune health and infection control.

Moreover, we ask whether the Department is currently reviewing or is willing to review the broader literature suggesting that seasonal influenza vaccines may not meet the threshold for mandatory use, particularly among healthy working-age populations.

We respectfully urge you to treat this issue with the seriousness it warrants. If the Department has no evidence or risk assessment to support the policy, that too must be honestly acknowledged.

We remain open to productive dialogue and invite a written reply, within 14 days, from either yourself or a **suitably qualified representative** from the Department who can address the concerns raised in both our initial and current letters.

Thank you for your attention.

Yours sincerely,

Dr Duncan Syme

President
Australian Medical Professionals Society