

AKHBAR : BERITA HARIAN
MUKA SURAT : 2
RUANGAN : NASIONAL



Dr Dzulkefly beramah mesra dengan pesakit ketika mengadakan lawatan ke Klinik Kesihatan Air Putih, Balik Pulau, semalam.
 (Foto Mikail Ong/BH)

Draf Pindaan Akta Perubatan 1971 dalam semakan AGC

RUU berkait pendaftaran doktor pakar laluan paralel akan dibentangkan bulan ini

Oleh Siti Aminah Mohd Yusof
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Balik Pulau: Kementerian Kesihatan (KKM) mengesahkan draf Rang Undang-Undang (RUU) Pindaan Akta Perubatan 1971 (Akta 50) yang antara lain bertujuan menyelesaikan kemelut pendaftaran doktor perubatan yang mendapatkan kelayakan kepada rancangan laluan paralel sudah siap dan sedang melalui proses semakan oleh Jabatan Peguam Negara (AGC).

Menterinya, Datuk Seri Dr Dzulkefly Ahmad, berkata selepas proses itu selesai, beberapa sesi libat urus diharap dapat diatur sebelum RUU berkenaan dibentangkan pada sesi Mesyuarat Kedua Penggal Ketiga Parlimen ke-15 akan datang.

“Saya sangat mengharapkan sejurus itu akan berlaku beberapa libat urus, antaranya bersama Majlis Perubatan Malaysia (MMC), Agensi Kelayakan Malaysia (MQA) Kementerian Pengajian Tinggi dan pihak ber-

kepentingan lain.

“Apabila sudah siap sernuanya, kita akan bentangkan kepada Kabinet sebelum RUU ini dibentangkan di Parlimen pada minggu pertama dan dibahas dalam minggu ketiga persidangan Jun ini,” katanya.

Sebelum ini Dzulkefly membentangkan memorandum Jamaah Menteri berkaitan pindaan akta berkenaan kepada Kabinet bersama Menteri Pendidikan Tinggi, Datuk Seri Dr Zamby Abdul Kadir; namun tidak memperincikannya.

Meskipun berdepan tantangan segelintir pihak, KKM kekal dengan pendirian untuk memindahkan 50 mengenai Program Parallel Pathway (PPP).

Tuntutan kontroversi

Dzulkefly berkata, proses pengiktirafan serta pendaftaran kepada rancangan laluan paralel membabitkan 14 program di luar negara, di samping 29 program Sarjana Perubatan yang dijalankan sembilan universiti tempatan.

“Semuanya kita garap sekali setelah kami di KKM berdepan pelbagai dakwa-dakwa tuntutan kontroversi itu akhirnya kita merujuk kepada AGC.

“Ini bagi mendapatkan pandangan perundangan mereka yang memberikan pandangan supaya kita membentangkan RRU Pindaan Akta Perubatan 1971 (Akta 50) dan kami sudah siapkan semuanya,” katanya.

Terdahulu Dzulkefly merasmikan Klinik Kesihatan (Jenis 3)

Air Putih yang disiapkan dengan kos RM30 juta yang mampu menampung sehingga 500 pesakit sehari.

Beliau turut melawat Klinik Kesihatan Bayan Lepas yang menerima kelulusan serta-merta daripada Perdana Menteri, Datuk Seri Anwar Ibrahim April lalu untuk dibangunkan semula sebagai Klinik Kesihatan (Jenis 2) Bayan Lepas dengan kos RM72 juta.

Kaji insentif pakar geriatrik

Sementara itu, beliau berkata, KKM berhasrat mempertimbangkan insentif bagi menarik lebih ramai doktor perubatan mengkhususkan diri sebagai pakar geriatrik, memandangkan Malaysia sedang menuju negara tua.

Ketika ini, katanya hanya tiga hingga lapan pelajar perubatan mengikuti pengajian dalam bidang itu di universiti awam negara ini dan Universiti Malaya (UM) satu-satunya yang menawarkan program pengajian geriatrik di negara ini.

“Mungkin kita akan berbinang dengan Kementerian Pengajian Tinggi (KPT) mengenai program sarjana perubatan pada masa depan untuk mempertingkatkan jumlah pakar geriatrik dan ini akan menjadi komitmen tambahan KKM,” katanya.

Malaysia ketika ini mempunyai 33 pakar geriatrik di hospital kerajaan, 13 di hospital universiti dan 14 di hospital swasta dan jumlah itu belum mencukupi untuk memenuhi keperluan negara pada masa depan.

AKHBAR : BERITA HARIAN
MUKA SURAT : 15
RUANGAN : NASIONAL

Wanita perlu buat saringan kanser pangkal rahim secara berkala

Jangkitan virus Human Papilloma boleh rosakkan sel pada kadar sangat perlahan tanpa disedari

Kuala Lumpur: Kementerian Kesihatan (KKM) menggalakkan wanita berusia 20 tahun dan ke atas menjalani pemeriksaan saringan kanser pangkal rahim secara berkala kerana ia dapat membantu mengesan penyakit itu di peringkat awal.

Saringan ini bertujuan mengetahui pasti wanita dijangkiti virus Human Papilloma (HPV) yang menyebabkan lebih 90 peratus kes kanser pangkal rahim.

Pegawai Perubatan, Pusat Penyelidikan Keberhasilan Kesihatan, Institut Penyelidikan Sistem Kesihatan, Institut Kesihatan Negara, Dr Nur Balqis Zahirah Ali, berkata virus HPV ini merosakkan sel pangkal rahim pada kadar sangat perlahan dan tidak disedari wanita yang dijangkiti.

Beliau berkata, sekiranya tidak dikesan dan dirawat, kerosakan sel itu menjadi lebih parah sehingga akhirnya menyebabkan sel berkenaan bertukar menjadi kanser.

"Pengesanan pada peringkat jangkitan virus ini penting untuk mencegah penularan kanser berkenaan. Kajian oleh Institut Penyelidikan Sistem Kesihatan (IHSR) pada 2023 melaporkan, anggaran lima daripada 100 wanita di Malaysia akan dijangkiti virus HPV sepanjang hayat yang menyebabkan mereka berisiko tinggi mendapat kanser pangkal rahim."

"Kajian itu juga mendedahkan, wanita di Malaysia yang menetap di kawasan bandar, berbangsa India atau Cina atau berusia lingkungan 20 hingga 49 tahun berisiko lebih tinggi mendapat jangkitan virus HPV, berbanding wanita lain."

"Justeru, golongan ini perlu dibерikan lebih perhatian dan digalakkan menjalani saringan berkenaan," katanya.

Dr Nur Balqis berkata, bagaimanapun menurut laporan Tinjauan Kaji Selidik Morbiditi Kebangsaan pada 2019, kurang daripada 40 peratus wanita Malaysia menjalani pemeriksaan saringan ini sepanjang tempoh tiga tahun sebelum tinjauan itu. Ini bermakna hanya sebilangan kecil wanita Malaysia menjalani saringan ini secara berkala.



Pengesanan pada peringkat awal jangkitan virus HPV penting bagi mencegah penularan kanser pangkal rahim.
(Foto hiasan)

Katanya, antara punca kadar saringan rendah adalah disebabkan ilmu dan kesedaran yang terhad, selain rasa bimbang serta malu menjalani saringan itu.

Tingkatkan kesedaran

Sehubungan itu, katanya usaha mempromosi dan meningkatkan kesedaran dalam kalangan wanita menjalani saringan ini perlu dipertingkatkan.

"Pada masa ini, program saringan ini ditawarkan kepada wanita berusia 20 tahun ke atas yang mendapatkan rawatan di klinik kesihatan secara percuma. Saringan juga boleh dijalankan secara berbayar di klinik swasta, di mana kaunter saringan dibuka dan boleh dilawati swasta."

"Selain itu, saringan juga dijalankan di tempat awam, seperti ketika berlangsung Karnival atau sebarang program kemasyarakatan, di mana kaunter saringan dibuka dan boleh dilawati pengunjung," katanya.

Dr Nur Balqis berkata, kaedah saringan terbaru mengenal pasti jangkitan virus HPV ini sangat mudah dan boleh dilakukan sendiri wanita.

Katanya, kaedah terbaru ini sedang diperkenalkan secara peringkat bagi menggantikan kaedah saringan lama menggunakan teknik *Pap Smear* yang perlu dikendalikan petugas kesihatan.

Katanya, wanita terbabit hanya perlu menggunakan berus lembut untuk mengambil sedikit sampel sel berdekatan pangkal rahim dan memasukkan berus itu ke dalam tiub, kemudian diserahkan kepada pengamal kesihatan yang mengelola saringan itu.

"Teknik ini hanya mengambil masa beberapa saat dan tidak menyakitkan. Keputusan ujian



saringan itu mengambil masa beberapa minggu dan akan dimaklumkan kepada wanita terbabit.

"KKM berharap lebih ramai wanita tampil menjalani saringan ini secara sukarela. Untuk mencapai sasaran itu lebih banyak idea kreatif dan inovatif perlu dibuat bagi mempromosi dan meningkatkan kesedaran wanita mengenai pentingnya saringan itu," katanya.

Antaranya, program keseda-

ran ini boleh dibawa dan dipromosikan kepada lebih ramai pelajar perempuan di kolej atau universiti, berikutkan mereka belum terdedah dan berisiko mendapat jangkitan itu.

"Kesedaran pada peringkat awal ini diharapkan akan memperingkat mereka mengenai bahaya jangkitan virus itu dan menjadikan amalan saringan ini dilakukan secara berkala serta berterusan apabila mereka me-

Kajian oleh Institut Penyelidikan Sistem Kesihatan (IHSR) pada 2023 melaporkan, anggaran lima daripada 100 wanita di Malaysia akan dijangkiti virus HPV sepanjang hayat yang menyebabkan mereka berisiko tinggi mendapat kanser pangkal rahim

Dr Nur Balqis Zahirah Ali,
Pegawai Perubatan,
Pusat Penyelidikan Keberhasilan Kesihatan, Institut Penyelidikan Sistem Kesihatan, Institut Kesihatan Negara



nginjak dewasa," katanya.

Beliau berkata, selain itu usaha seperti menghantar brosur dan kit saringan ke rumah wanita juga boleh dijalankan untuk meningkatkan kadar saringan seperti yang dijalankan di negara maju. Bagaimanapun, usaha ini akan membabitkan kos tinggi dan perlu dipertimbangkan kewajarnannya.

"Namun, usaha ini mungkin boleh dijalankan di beberapa tempat tertentu, contohnya di kawasan pedalaman Sabah dan Sarawak kerana jarak dari rumah ke klinik kesihatan adalah jauh sehingga menyukarkan pihak kesihatan menawarkan saringan ini di klinik."

"Usaha meningkatkan kesedaran dan peningkatan usaha saringan ini juga memerlukan kerjasama daripada semua pihak. Kesedaran ini bukan sahaja perlu ada dalam kalangan wanita, malah semua lapisan masyarakat, termasuk ibu bapa, suami, adik-beradik dan jiran tetangga dengan menyampaikan maklumat yang betul," katanya.

Dr Nur Balqis turut menyatakan, mendidik masyarakat untuk membuat rasa malu dan mendapatkan maklumat dari sumber sahih demi meningkatkan kesedaran kesihatan serta kesejahteraan semua.

Katanya, usaha bersama menyebarkan kesedaran dan menggalakkan lebih ramai wanita menjalani saringan ini berupaya eliminasi kanser pangkal rahim di Malaysia.

AKHBAR : KOSMO
MUKA SURAT : 4
RUANGAN : NEGARA

Malaysia, 194 negara ahli WHO diberi 'cooling period' 10 bulan

BALIK PULAU – Malaysia berserta 194 negara anggota Pertubuhan Kesihatan Sedunia (WHO) yang menandatangani Peraturan-Peraturan Kesihatan Antarabangsa (IHR), awal Jun lalu dibерikan tempoh 'cooling period' selama 10 bulan untuk meneliti draf IHR di negara masing-masing.

Menter Kesihatan, Datuk Seri Dr. Dzulkefly Ahmad berkata, draf IHR yang telah ditandata-

ngan itu bukan sesuatu yang dimuktamadkan memandangkan negara anggota masih dibерikan masa untuk menyatakan pandangan masing-masing berhubung IHR.

"Pada 1 Jun iaitu pada hari akhir Perhimpunan Kesihatan Sedunia ke-77 (di Geneva), boleh saya rumuskan bahawa semua negara anggota telah menandatangani IHR, namun ia tidak merupakan sesuatu yang sifatnya

muktamad atau tuntas.

"Maka semua negara anggota diberikan satu 'cooling period' selama 10 bulan untuk kembali menyatakan apa-apa pandangan yang kemudiannya diteliti di negara masing-masing," katanya selepas merasmikan Klinik Kesihatan (Jenis 3) Air Putih, di sini semalam.

Sebelum ini, pelbagai pihak antaranya Persatuan Pengguna Islam Malaysia (PPIM) menuntut

kerajaan membantah Pandemik Triti Pertubuhan Kesihatan Sedunia Perjanjian Konvensyen (WHO CA+) dan pindaan Regulasi Kesihatan Antarabangsa (IHR 2005) kerana dikhawatir akan mengancam kedaulatan negara.

Bagaimanapun, Perdana Menteri, Datuk Seri Anwar Ibrahim menjelaskan Malaysia berpegang kepada prinsip kesaksamaan dan solidariti untuk dilaksanakan dalam semakan Peraturan-Pe-

raturan Kesihatan Antarabangsa (IHR) serta perjanjian pandemik.

Dr. Dzulkefly berkata, beberapa siri perjumpaan dengan negara anggota yang menjadi ahli WHO akan diadakan selepas ini.

"Dalam kata lain, apa yang ditandatangani baru-baru ini bukan bersifat *final*, dan ia akan kembali dibincangkan dalam beberapa siri perjumpaan di peringkat seluruh negara anggota," katanya.

AKHBAR : KOSMO
MUKA SURAT : 12
RUANGAN : NEGARA

Doktor didakwa amang seksual pesakit remaja

PARIT – Seorang remaja perempuan berusia 15 tahun mendakwa seorang doktor melakukan amang seksual terhadapnya ketika mangsa mendapatkan rawatan di wad kecemasan sebuah hospital di daerah ini, di sini pada Selasa lalu.

Ketua Polis Daerah Perak Tengah, Superintendant Hafezul Helmi Hamzah berkata, pelajar itu telah membuat laporan berhubung kejadian di Balai Polis Bota, Ibu Pejabat Polis Daerah (IPD) Perak Tengah pada hari kejadian pukul 9:14 malam.

Menurutnya, remaja terbabit memaklumkan dia telah diganggu secara seksual oleh seorang lelaki dipercaya doktor semasa mendapatkan rawatan di hospital itu.

"Kira-kira pukul 2 petang pada Rabu lalu, sepasukan pegawai polis dari IPD Perak Tengah telah membuat tangkapan ke atas seorang lelaki bergelar doktor untuk siasatan lanjut," katanya dalam satu kenyataan semalam.

AKHBAR : KOSMO
MUKA SURAT : 15
RUANGAN : NEGARA

Klinik Kesihatan Air Putih bernilai RM30 juta dibuka



DZULKEFLY menandatangani buku lawatan ketika melawat Klinik Kesihatan Air Putih di Balik Pulau semalam.

BALIK PULAU — Klinik Kesihatan (Jenis 3) Air Putih, di sini yang siap pada 31 Oktober 2023 dengan kos RM30 juta telah beroperasi sepuenuhnya Februari lalu.

Menteri Kesihatan, Datuk Seri Dr. Dzulkefly Ahmad berkata, klinik itu telah mula beroperasi pada 26 Februari bagi menggantikan Klinik Kesihatan Ibu dan Anak Air Putih yang tidak lagi dapat menampung keperluan perkhidmatan kesihatan pada masa ini.

"Klinik kesihatan yang baharu ini mampu menampung kapasiti sehingga 500 pesakit sehari.

"Oleh itu, kualiti perkhidmatan penjagaan kesihatan primer

untuk penduduk Balik Pulau akan dapat ditingkatkan," katanya di sini, semalam.

Menurut beliau, klinik itu turut dilengkapi dengan 16 unit kuarters untuk kakitangan yang bertugas.

"Klinik Kesihatan Air Putih yang baharu menawarkan perkhidmatan kesihatan yang lebih menyeluruh meliputi Rawatan Pesakit Luar, Perkhidmatan Kesihatan Ibu Dan Anak, Klinik Pergigian, Rawatan Kecemasan, Perkhidmatan Farmasi, Makmal Perkhidmatan Diagnostik dan perkhidmatan sokongan lain," katanya.

Tambahnya, selaras dengan

pengoperasian klinik ini, perkhidmatan Jabatan Pesakit Luar di Hospital Balik Pulau telah ditutup dan dipindahkan ke Klinik Kesihatan Air Putih.

"Susulan perpindahan tersebut, perkhidmatan di Hospital Balik Pulau ditambah baik melalui pengoperasian Klinik Pakar melibatkan 15 bidang kepakaran, yang ditawarkan di ruang asal Jabatan Pesakit Luar.

"Kesesakan yang berlaku di Hospital Balik Pulau juga dapat dikurangkan secara signifikan serta membolehkan pesakit mendapatkan perkhidmatan kepakaran dengan lebih cepat dan efisien," katanya.

AKHBAR : SINAR HARIAN
MUKA SURAT : 5
RUANGAN : NASIONAL

TELUS & TULUS • MATA DAN TEUNGGU RAKYAT • PEMACU PERUBAHAN

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5

SABTU 8 JUN 2024 • SINAR HARIAN

KKM sasar hasil lapan pakar geriatrik setahun

Bagi menghadapi negara menua menjelang 2047

Oleh SYAJARATULHUDA MOHAMAD ROSLI
BALIK PULAU

Kementerian Kesihatan Malaysia (KKM) menyasarkan sekurang-kurangnya lapan pakar geriatrik dapat dihasilkan dalam tempoh setahun bagi menghadapi negara menua menjelang 2047.

Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad berkata, ketika ini, terdapat 33 pakar geriatrik di bawah KKM, 13 bertugas di hospital bawah Kementerian Pendidikan Tinggi manakala 14 lagi di hospital swasta.

Sehubungan itu, katanya,

bagi menuju ke sebuah negara menua, Malaysia perlu penambahan sekurang-kurangnya lapan pakar untuk setahun bagi menampung bilangan pesakit warga emas yang semakin meningkat.

"Kita sedang berliah kepada satu transisi dipanggil *democratic transition to aging society* iaitu berliah ke satu masyarakat menua. Pada 2030 nanti, kita akan memiliki 15 peratus daripada warga emas laitut berusia lebih 65.

"Jadi kita perlu membuat persiapan bukan sahaja daripada sudut kesihatan malah daripada sudut pendekatan yang diambil kerajaan bagi menangani isu berkaitan masyarakat menua.

"Di peringkat jabatan fasiliti kesihatan awam, kita mempunyai punya 33 pakar sakit tua," katanya pada sidang akbar di sini pada Jumaat.

Menurut Dr Dzulkefly, jumlah itu menunjukkan tidak ramai pelajar yang berminat dalam bi-



Dr Dzulkefly menandatangani buku pelawat selepas merasmikan Klinik Kesihatan Air Putih di Balik Pulau pada Jumaat.

dang kepakaran sakit tua.

"Sangat sukar untuk menarik minat pelajar ke dalam bidang kepakaran sakit tua. Kita akan bincang dengan program-program sarjana perubatan untuk meningkatkan jumlah pakar sakit tua.

"Ini komitmen KKM, paling

tidak pun kita ada lapan perjawatan setahun untuk ambil jawatan tersebut. Kalau ada lima pun, kita dah senang hati.

"Ketika ini, hanya sebuah universiti yang menjalankan program kepakaran sakit tua iaitu Universiti Malaya," ujar bellau.

Draf pindaan
Akta 50
dihantar ke AGC

BALIK PULAU - Draf cadangan pindaan Akta Perubatan 1971 (Akta 50) sudah siap dan telah dikemukakan kepada Jabatan Peguam Negara untuk tujuan semakan.

Cadangan itu dibuat bertujuan menyelesaikan kemelut pendaftaran doktor perubatan yang mendapatkan kelayakan kepkiran melalui Parallel Pathway serta mempermudah proses pengiktirafan dan pendaftaran sebagai pakar perubatan.

Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad berkata, ia dikemukakan menerusi Memorandum Jemaah Menteri itu dibuat oleh beliau sendiri bersama Menteri Pendidikan Tinggi, Datuk Seri Dr Zamby Abdul Kadir.

"Sesi libat urus akan diadakan dengan pihak berkepentingan termasuk Majlis Perubatan Malaysia," katanya.

AKHBAR : SINAR HARIAN
MUKA SURAT : 15
RUANGAN : NASIONAL

Doktor ditahan disyaki cabul remaja di hospital



HAFEZUL HELMI

PARIT - Polis menahan seorang doktor perubatan yang disyaki mencabul seorang remaja perempuan berusia 15 tahun di sebuah hospital di sini, pada Selasa.

Ketua Polis Daerah Perak Tengah, Superintenden Hafezul Helmi Hamzah berkata, tangkap-an terhadap doktor lelaki berusia 29 tahun itu dibuat selepas menerima laporan daripada mangsa pada jam 9.14 malam.

"Mangsa mengatakan telah diganggu secara seksual oleh suspek ketika mendapatkan rawatan di Wad Kecemasan, Hospital Changkat Melintang.

"Susulan laporan itu, sepasuk-an pegawai dari Ibu Pejabat Polis Daerah Perak Tengah telah membuat tangkapan terhadap suspek, Rabu lalu," katanya dalam satu kenyataan di sini, pada Jumaat.

Menurut beliau, suspek telah direman selama tiga hari sehingga

Sabtu untuk siasatan lanjut.

"Mangsa dalam keadaan sta-bil dan kes disiasat mengikut Seksyen 14(a) Akta Kesalahan-Kesalahan Seksual Terhadap Kanak-Kanak 2017.

"Orang ramai yang mem-punya maklumat berkaitan ke-jadian itu boleh menghubungi Pegawai Penyelamat, Inspektor Mohamad Zulkarnain Jusoh di talian 013-9740294 bagi mem-bantu siasatan," katanya.

AKHBAR : NEW STRAITS TIMES
MUKA SURAT : 4
RUANGAN : NEWS / NATION

HOSPITAL CONFIRMS STATUS**Lawyer alleges doctor delayed disability report for heatstroke boy**

KUALA LUMPUR: A hospital yesterday confirmed that the Year 5 pupil who suffered a heatstroke had become a person with disabilities (PWD).

The lawyer for the pupil's family, Dinesh Muthal, said they would proceed to the Social Welfare Department to finalise the application for PWD status.

He claimed that the doctor had delayed the approval of the PWD registration.

"The doctor intentionally postponed the approval for the PWD registration by two months," he told the *New Straits Times*.

He said the PWD registration was important to allow the pupil to access special needs programmes.

"He requires it to enrol in the Special Education Integration Programme."

"Having a PWD card will facilitate his transition from a mainstream school to a special needs school."

It was reported that a teacher allegedly forced the Year 5 pupil to stand in the sun for nearly three hours, causing the boy to suffer a heatstroke.

The boy's mother, A.D. Mogahana Selvi, 35, said the Ampang Hospital had given the family a reference letter for her son to be assessed as a PWD.

It is understood that the heatstroke had left the pupil with a nerve condition.

The Education Ministry has vowed that the welfare of the pupil would be taken care of.

Minister Fadhlina Sidek said her ministry would pay close attention to his development.

"He is already a pupil under our



Dinesh Muthal

care, meaning the ministry will pay close attention to him to ensure that his welfare is taken care of," she told reporters.

Fadhlina reiterated that the ministry would not compromise on disciplinary issues, as well as those related to abuse of power or student welfare and others.

Earlier, she said action would be taken against the parties involved in the case, and the ministry would not compromise on any misconduct that could affect the wellbeing and safety of the school community.

"This matter is under our close watch. The case is currently under investigation by the authorities," she said.

Meanwhile, another lawyer for the pupil has requested a new police investigating officer in the case through a memorandum, which was submitted to Bukit Aman yesterday.

Lawyer Dayalan Sreebalan, along with the boy's father, submitted the memorandum alleg-

ing that the officer had failed to conduct a thorough investigation.

"We have sent a memorandum to ensure the investigation runs smoothly, transparently and accurately," he said.

According to the memorandum, a police report was filed on April 30, but no action had so far been taken by the investigating officer against the suspect.

Later, Muthal also claimed that the victim's classmate was questioned by certain parties about his decision to be a witness in the case.

He said this should not have happened as witnesses must be protected, and not threatened.

"There are elements of witness tampering, and we need to understand one thing: the teacher who committed the crime is still teaching, and the witness is still in the same school."

"This is not normal and he has threatened the witness," Muthal had said.

AKHBAR : NEW STRAITS TIMES

MUKA SURAT : 7

RUANGAN : NEWS / NATION

EMERGENCY WARD

Doctor held over molest of 15-year-old patient

IPOH: A doctor was arrested on Wednesday to assist in an investigation into a molest case involving a 15-year-old female patient.

Perak Tengah district police chief Superintendent Hafezul Helmi Hamzah said the man was arrested after the patient lodged a report around 9.14pm on June 4.

"The victim claimed that she was sexually harassed by a man, believed to be a doctor, while seeking treatment at the emergency ward of the Changkat Melintang Hospital," he said in a statement.

Hafezul Helmi said following the report, a team arrested the man.

The victim is in stable condition and the case is being investigated under section 14 (a) of the Sexual Offences Against Children Act 2017, he added.

He also urged anyone with information on the incident to contact investigating officer Inspector Mohamad Zulkarnain Jusoh at the Perak Tengah district police headquarters at 013-974 0294. **Bernama**

The victim claimed that she was sexually harassed by a man, believed to be a doctor, while seeking treatment at the emergency ward....

SUPERINTENDENT HAFEZUL HELMI HAMZAH
Perak Tengah district police chief

AKHBAR : NEW STRAITS TIMES
MUKA SURAT : 13
RUANGAN : LETTERS

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Send your letters to
Letters Editor,
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A letter must have a writer's name, home address and phone number.
It should ideally **not be more than 500 words**.
The editor reserves the right to edit a letter for clarity and length.

LETTERS

INFLUENZA VACCINE

FLU SHOTS VITAL FOR SENIOR CITIZENS

THE Malaysian Influenza Working Group welcomes the Health Ministry's plan to provide free annual influenza vaccinations for older persons under the National Immunisation Programme, beginning 2025.

This is important as older persons experience a decline of immunity as they age and, unlike healthy adults, they often do not show regular symptoms when infected by influenza.

Instead, they could experience other symptoms, like a decline in health and increased risk of fall injuries.

Influenza is much more serious than a cold. In fact, it can be deadly.

And while everyone, including young and healthy people, are at risk of influenza, it often takes a much heavier toll on older adults.

All it takes is one infection to increase the risk of heart attack by 10

times and stroke (caused by a blood clot) by eight times.

Older persons are also more likely to experience complications, such as pneumonia, inflammation of the heart and sepsis.

These often require hospitalisation and may even lead to death.

In fact, up to 70 per cent of influenza-related hospitalisations and 85 per cent of influenza-related deaths occur among those 65 and above.

Furthermore, the risk of influenza-related deaths increases with the presence of more than one non-communicable disease (NCD), which is the case with many older adults.

This risk of influenza-related death increases by 20 times in those with heart and pulmonary disease, five times in those with heart disease, and three times in those with diabetes. Furthermore, influenza infection

could worsen or complicate NCD symptoms, such as exacerbating diabetic symptoms, causing fluctuations in glucose levels.

These risks are well acknowledged, so much so that Thailand, Laos, the Philippines and Singapore have begun offering free influenza vaccines to older persons.

While we look forward to this in our country, I urge Malaysians to take action sooner rather than later to protect themselves and their loved ones against influenza, as the influenza virus circulates year-round in tropical climates like ours.

The threat, therefore, is always present.

Southeast Asia is ranked third highest in influenza-related deaths but only two to three per cent of Malaysians are vaccinated against influenza.

The influenza vaccine has been around since 1945, with extensive research supporting its safety records.

Protecting ourselves and our loved ones with an annual shot would help to reduce severe illness and its complications, the cost of treatment and management, as well as the corresponding burden on healthcare practitioners and resources.

Most importantly, influenza vaccinations can help save lives.

Although the influenza vaccine is well established in many parts of the world, a recent Ipsos survey in Malaysia involving around 600 respondents aged 60 and older highlighted that more awareness is needed to dispel common fears and misconceptions.

For example, 52 per cent still feel that influenza is only a concern in cold climates, and though 70 per cent were aware that it can be prevented through

vaccination, 64 per cent were concerned about serious side effects, with 28 per cent believing the misconception that the influenza vaccine was not suitable for people their age.

In addition, 69 per cent believed they were already protected through the Covid-19 vaccine.

With these thoughts being prevalent, it is hardly surprising that vaccination ranked a lowly eighth in self-care practices.

Malaysia is moving towards becoming an aged nation by 2043, with 15.3 per cent of our population aged 60 and above.

So the burden of influenza on older persons is a public health concern.

PROFESSOR DR ZAMBERI SEKAWI
Chairman,
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AKHBAR : THE STAR
MUKA SURAT : 1
RUANGAN : MUKA HADAPAN

Serdang Heart Centre beats again

Operations are in full swing again at the Serdang Heart Centre. Weeks after The Star reported that all four operating theatres at the new facility were not functioning, three have been repaired, with successful procedures carried out since Wednesday. > See report on page 2

AKHBAR : THE STAR
MUKA SURAT : 2
RUANGAN : NATION

2 Nation

THE STAR, SATURDAY 8 JUNE 2024

Three OTs in heart centre back in action

Shorter waiting list as surgeries resume

PETALING JAYA: Three of the four non-functioning operating theatres (OT) that had been out of service at Pusat Jantung Hospital Serdang (Serdang Heart Centre) are up and running again.

Work is now going on at the fourth non-functional OT, which is expected to be ready soon.

On Wednesday, two adults and two children underwent successful procedures at these OTs, said Health Minister Datuk Seri Dr Dzulkefly Ahmad.

"This was followed by three adults and two children the next day," he said in a Facebook post yesterday.

All issues related to the tem-

perature and humidity have been resolved," he added.

The Star had reported on May 14 that maintenance issues at the cardiac facility in Hospital Serdang had caused its four OTs to be unusable, resulting in over 1,000 patients remaining on the waiting list for procedures.

The 18-month-old cardiac facility's four OTs had to be shut down because of maintenance problems, particularly air-conditioning issues, leaving the hospital with only one functioning OT, in its old building.

Dzulkefly had given an assurance last month that the three new operating theatres would be

functional in June.

The heart centre is one of the country's primary cardiology centres, receiving referrals from all over the nation.

Welcoming the news, Hartal Doktor Kontrak spokesman Dr Muhammad Yassin said the facility would be very beneficial to the people.

However, he said the ministry should be proactive in solving such issues before it goes viral or is published in the news.

Malaysian Association for Thoracic and Cardiovascular Surgery (MATCVS) honorary secretary Prof Dr John Chan Kok Meng said that with the operating

Heart of the centre is not beating

Four operating theatres not operational from day one at Serdang Heart Centre



Flashback: The report that was published in The Star on May 14, 2024.

theatres now functioning, the waiting list for surgery at the heart centre could become shorter.

"I am told that the new operating theatres are state-of-the-art and very spacious, and the cardiothoracic surgeons have found them to be excellent facilities to perform heart surgery," he said.

The RM546mil new facility began operations in December 2022 and was aimed at speeding up treatment and shortening the waiting period for angiogram treatments.

It was expected to shorten the waiting period from 18 months to just nine months for stable elective cases while emergency cases could be treated immediately.

The facility is equipped with a hybrid operating theatre – the first of its kind under the Health Ministry – and could serve up to 250 cardiac patients per year.

The operating theatres are also equipped with sophisticated equipment which enable complex cases to be carried out, he said.

Draft amendment to Medical Act submitted to AGC

By N. TRISHA
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BALIK PULAU: The draft amendment to the Medical Act 1971 to address the gap between the parallel pathway and local Master's medical programmes has been submitted to the Attorney General's Chambers (AGC) for a review, says Datuk Seri Dr Dzulkefly Ahmad.

The Health Minister said engagement sessions would also be held with stakeholders, including the Malaysian Medical Council (MMC), Malaysian Qualifications Agency (MQA), and Higher Education Ministry.

The amendment has been submitted to the AGC for a review.

"And before that, we will have engagement sessions with stakeholders.

"Once that is all completed, we will present the amendment to the Cabinet with the hope the Bill



for amendment can be tabled in the coming Parliament meeting this month.

"We want to table it in the first week of the meeting, so that it can

be debated in the third week," he told a press conference after launching the RM30mil Air Putih health clinic here yesterday.

The clinic provides outpatient

Nice to meet you: Dzulkefly being greeted by nurses at the Bayan Lepas Health Clinic in Bayan Lepas, Penang. — LIM BENG TATT/The Star

treatment, maternal and child health services, dental care, emergency services, pharmacy, and lab diagnostics.

The Star reported in March that

the shortage of cardiothoracic surgeons had left some 1,500 heart and lung disease patients in government hospitals in dire straits.

Malaysian graduates sent by the government to study cardiothoracic surgery at the Royal College of Surgeons of Edinburgh (RCSEd) are unable to practise in Malaysia as their qualifications are not accepted by the MMC.

Earlier, Dzulkefly announced several ongoing and upcoming projects to enhance healthcare facilities in Penang, including the RM30mil Bandar Tasek Mutara health clinic in Seberang Perai and the RM54mil health clinic in Mak Mandin, Butterworth, which will be built next year.

WATCH THE VIDEO
TheStarTV.com



Changes to Bill set to address parallel pathway issues

By RAGANANTHINI VETHASALAM and JUNAID IBRAHIM
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PETALING JAYA: Amendments to the Medical Act 1971 believed to involve Section 14 are set to address issues related to the parallel pathway programme.

Section 14 deals with the registration of specialists to the National Specialists Registry (NSR) and the role of the Malaysian Medical Council (MMC) in the process.

Former deputy health minister Datuk Dr Lee Boon Chye emphasised the importance of maintaining both specialist training path-

ways, as certain specialities cannot be replaced by a structured programme or a local Master's programme due to the evolving nature of the medical profession.

"Hence, parallel programmes and apprenticeship programmes must be maintained in perpetuity."

"There are issues with regard to the role of the MMC. The Medical Act amendment in 2012 empowers MMC to keep the registry of the NSR but the Act did not lay out the mechanism to determine the qualification for specialists," he said.

The Medical Regulations 2017, which enforced the Act and gazetted into law using the power given to the minister, attempted

to specify this mechanism by listing specialities and academic qualifications.

The gazettlement led to the current fiasco in cardiothoracic surgery, where specialists from the Fellowship of the Royal College of Surgeons of Edinburgh (FRCS Ed) in Cardiothoracic Surgery were somehow not on the list.

"Some anomalies were left unaddressed in the Medical Regulations 2017," said Dr Lee.

"For instance, although the FRCS Ed was excluded, some other qualifications were listed."

"MMC is not meant to be an autonomous institution. It is created by law as a government

agency," he said, adding that the minister has power that can be exercised to address the issue.

Senator Dr RA Lingeshwaran, a former director of the Sungai Bakap Hospital, said the amendments would be timely given the shortage of specialists.

He advocated for recognising the parallel pathway and implementing equivalence programmes to encourage Malaysian specialists practising abroad to return.

"The strategy will be to augment the local Master's programme, recognise the parallel pathway and find a well-balanced solution to have an equivalency for specialists of Malaysian origin

who are practising abroad to return home to serve the rakyat."

Meanwhile, Group of Professors of Health and Medicine head Prof Dr Noor Hassim Ismail argued against amending the Act, asserting that local specialist programmes have superior safety and quality records compared to the parallel pathway programme.

"The Medical Act should not be amended as there is no issue with the existing local specialist programme. The authorisation to recognise the medical specialist programme should be under the jurisdiction of the medical specialists without interference of the minister," he said.

AKHBAR : THE STAR
MUKA SURAT : 18
RUANGAN : VIEWS

Creating more cardiothoracic surgeons

MALAYSIAN Medics International (MMI) is deeply concerned by the issues surrounding the parallel pathway for the qualification of cardiothoracic surgeons in Malaysia and the derecognition of the Royal College of Surgeons Edinburgh. The parallel pathway programme was created in 2016 to address the huge deficiency of cardiothoracic surgeons nationally.

According to a news report, as of March, more than 1,500 patients were awaiting heart and lung surgery ("Heart and lung patients in dire straits", *The Star*, March 23; online at bitly/star-heartlung). And cardiovascular diseases are on the rise every year. Thus, we humbly call upon the Health Ministry (MOH), the Higher Education Ministry (MOHE), the Malaysian Medical Council (MMC), and the Malaysian Qualifications Agency (MQA) to consider the following.

> A national critical shortage of cardiothoracic surgeons will cause potential fatalities in patients awaiting surgery:

There are currently only 14 independent cardiothoracic surgeons serving MOH hospitals. This poses a great risk to the more than 1,500 patients currently awaiting lifesaving heart and lung surgery.

This inaccessibility of cardiothoracic services could result in fatalities in waiting patients or cause further complications and exacerbations of existing medical conditions, raising serious con-

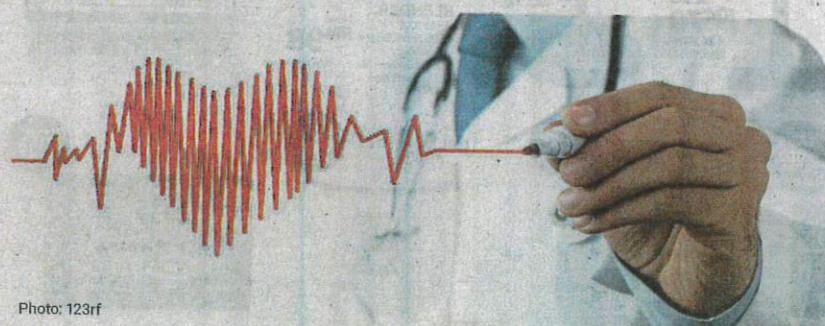


Photo: 123rf

cerns about healthcare delivery and patient wellbeing and safety.

Hence, urgent attention is needed to address the critical shortages and long wait times for cardiothoracic services. A targeted approach would include tabling and amending the Medical Act at the next Parliamentary meeting. This is especially crucial in the light of two pioneer parallel pathway graduates being offered jobs in Britain and the recent graduation of the next five candidates of the parallel pathway programme.

These potential surgeons would almost double the work force should they be granted National Specialist Register recognition. This will go a long way in alleviating the long wait for cardiothoracic patients and minimise potential risks, complications, and fatalities.

> Need for collaboration and

communication among the MOH, MOHE, MMC, and MQA:

Efficient collaboration and communication should be prioritised by the relevant ministries and agencies to pave the way for the recognition of the parallel pathway. Providing clear cut guidelines the programme must follow will ensure the pathway produces properly qualified cardiothoracic surgeons.

These ministries and agencies should also collaborate to produce Malaysia's own cardiothoracic masters programme in a local university which is open to all candidates regardless of race, such as Universiti Malaya.

This, in conjunction with the parallel pathway, will further address the dire shortage of cardiothoracic services.

This will also eventually produce more surgeons who can

then train even more surgeons.

This multifaceted approach will address multiple pre-existing problems such as the shortage of cardiothoracic surgeons, the lack of a local training programme in the area, and the lack of trainers and training spots.

MMI urges the MOH and MOHE to urgently consider these suggestions that could impact the present and near future of Malaysia's healthcare sector.

MALAYSIAN MEDICS
INTERNATIONAL (MMI)
Term: 2023/2024

MMI is an international medical student-led organisation advocating inclusivity and diversity, reform in medical education, and the welfare of junior doctors and medical students.