

AKHBAR : BERITA HARIAN
MUKA SURAT : 2
RUANGAN : NASIONAL



Dr Dzulkefly (tiga dari kiri) bersama Presiden dan Ketua Eksekutif Johor Corporation, Datuk Syed Mohamed Syed Ibrahim (dua dari kanan) menyaksikan pemeteraian MoU antara Timbalan Ketua Setiausaha (Kewangan), Datuk Seri Norazman Ayob (dua dari kiri) dan Presiden dan Pengarah Urusan KPJ Healthcare Berhad, Chin Keat Chyuan pada Majlis Pra Pelancaran Persidangan Penjagaan Kesihatan Antarabangsa (MIH) Megatrends di Putrajaya. Turut kelihatan Ketua Pengarah Kesihatan, Dr Muhammad Radzi Abu Hassan (kiri) dan Pengerusi KPJ Healthcare Berhad, Tan Sri Dr Ismail Bakar (kanan)

(Foto Mohd Fadli Hamzah/BH)

KKM sedia dedah kesan sampingan vaksin COVID-19

Kementerian simpan rekod daftar babit semua jenis vaksin untuk rakyat

Oleh Mohd Iskandar Ibrahim
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Putrajaya: Kementerian Kesihatan memberi jaminan akan mendedahkan semua data berkaitan kesan sampingan selepas imunisasi (AEFI) yang berpunca daripada vaksin COVID-19.

Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad, berkata pihaknya memiliki rekod daftar membabitkan semua jenis vaksin COVID-19 yang diambil rakyat negara ini.

"Kita ada simpan (rekod) daftar mengenai AEFI... memang kita simpan satu daftar dan (ia) memang ada, bahkan semua yang dalam data termasuk yang me-

ninggal (dunia), kita ada simpan.

"Saya sebagai menteri pernah sebut pada mesyuarat Jemaah Menteri (bahawa) saya mahukan suatu masa nanti data ini didedahkan kepada umum kerana ini tanggungjawab saya dan tanggungjawab Kementerian," katanya pada sidang media selepas menyempurnakan Pra Pelancaran Persidangan Penjagaan Kesihatan Antarabangsa (MIH) Megatrends di sini, semalam.

Beliau berkata demikian ketika ditanya sama ada Malaysia merekodkan kes trombosis dengan sindrom 'thrombocytopenia' yang dikaitkan dengan vaksin COVID-19 AstraZeneca.

Suruhanjaya Nasional untuk Kajian dan Pencegahan Peristiwa Mudarat Berikutan Imunisasi bersama-sama Kementerian Kesihatan dan Agensi Makanan dan Ubat-Obatan (BPOM) Indonesia sebelum ini mengesahkan tiada laporan diterima mengenai kes trombosis yang dikaitkan dengan vaksin terbabit.

Malaysia nunda penjelasan

Sementara di Malaysia, KKM dilaporkan sudah meminta penjelasan daripada firma Farmase-

utikal AstraZeneca berhubung perkara terbabit.

Tanpa menetapkan jangka masa data itu didedahkan, Dzulkefly menegaskan pihaknya tidak akan menyembunyikan apa-apa berkaitan AEFI kerana ia adalah tanggungjawab kerajaan kepada rakyat.

"Kita akan dedahkan pada waktu yang mustahak atau selesai untuk kita terbitkan, kita tidak akan menyembunyikan apa-apa (kerana) kita bertanggungjawab kepada rakyat," katanya.

Ditanya sama ada beliau sudah menerima penjelasan daripada AstraZeneca, Dzulkefly berkata pihaknya masih lagi menunggu-

nya. Terdahulu, beliau menyaksikan pemeteraian memorandum persefahaman (MoU) antara KKM dan KPJ Healthcare Berhad bagi penganjuran MIH Megatrends.

MIH Megatrends bakal berlangsung pada 25 hingga 27 Oktober depan di Pusat Konvensyen Kuala Lumpur (KLCC) dan akan disempurnakan Yang di-Pertuan Agong, Sultan Ibrahim, manakala ucapan Menterinya, Datuk Seri Anwar Ibrahim.

AKHBAR : HARIAN METRO
MUKA SURAT : 21
RUANGAN : LOKAL

Kuala Lumpur

Masalah kesihatan mental dijangka terus membebankan rakyat negara ini dengan anggaran peningkatan kes sebanyak 10 peratus menjelang 2025.

Berdasarkan Laporan Tinjauan Kesihatan dan Morbiditi 2015, isu kesihatan mental merekodkan trend peningkatan sejak 2005 iaitu dari 11.5 peratus pada tahun berkenaan kepada 29.2 peratus pada 2015 atau kata pakar, tiga daripada 10 rakyat Malaysia mengalami masalah kesihatan mental.

Malangnya, di sebalik unjuran membimbangkan itu, negara masih kekurangan ahli psikologi bertauliah dan doktor psikiatri bagi menampung keperluan.

Ketiadaan akta khusus bagi mengawal selia perkhidmatan perubatan terabit memburukkan lagi masalah kerana pada masa ini hampir siapa sahaja boleh menawarkan bantuan kaunseling dan rawatan psikologi kepada pesakit.

Pakar psikologi dan penasihat kanan Program Psikologi Klinikal dan Kesihatan Tingkah Laku, Fakulti Sains Kesihatan, Universiti Kebangsaan Malaysia (UKM) Prof Madya Dr Shazli Ezzat Ghazali berkata, bantuan perkhidmatan yang diberikan oleh mereka tanpa tauliah itu diistilahkan sebagai pseudopsikologi atau 'psikologi palsu' iaitu penggunaan istilah psikologi, namun tidak bukti saintifik.

Lebih buruk lagi, 'rawatan' yang diberikan boleh memudaratkan psikologi penghidap untuk jangka panjang.

Menurut beliau, pada masa ini, pseudopsikologi ditawarkan secara meluas di negara ini memandangkan wujud jurang besar di antara jumlah penyedia perkhidmatan bertauliah dan permintaan.

"Mereka (penghidap masalah mental) memerlukan literasi dan sokongan profesional untuk membantu (mereka), namun jumlah (pakar bertauliah) agak terhad. Sekarang hanya (ahli) psikiatri serta beberapa profesion menolong seperti kaunselor, ahli psikologi klinikal, pekerja sosial diaktifkan (ditauliahkan) melalui akta.

"Namun, bagi ahli serta pakar psikologi lain, mereka tidak dapat berpera-

WUJUD SEGERA AKTA PSIKOLOGI

Kekang rawatan 'psikologi palsu'



nan secara aktif kerana pemerkasaan kerjaya mereka (melalui penguatkuasaan undang-undang) tidak berlaku," jelas Shazli Ezzat yang juga Presiden Bakal Persatuan Psikologi Malaysia (PSIMA) kepada Bernama.

Ditanya mengenai perbezaan antara akta kaunselor dan psikologi, Shazli Ezzat berkata, akta kaunselor hanya tertakluk kepada profesion kaunselor yang fungsinya lebih bertumpu pada intervensi kepada masalah biasa masyarakat.

Akta psikologi pula adalah lebih luas kerana berperanan melindungi pakar dan pesakit daripada terpedaya dengan perkhidmatan pseudopsikologi.

Mengulas lanjut, Shazli Ezzat berkata, secara ringkas, akta terabit bertujuan mengawal selia perilaku pengamal dan melindungi ahli masyarakat yang menerima perkhidmatan itu.

Menurut beliau, gesaan supaya diwujudkan akta psikologi bermula pada 2009 menerusi PSIMA, namun disebabkan isu kesihatan mental dilihat tidak begitu penting pada ketika itu, syor berkenaan tidak diketengahkan oleh pengubal undang-undang.

"Pada 2018, perundangan psikologi hampir dibawa ke Parlimen untuk

sesi perbincangan, tetapi tidak berjaya. PSIMA memerlukan penangung yang kuat untuk merealisasikan pewujudan akta ini," kata beliau yang berharap Pejabat Perdana Menteri memainkan peranan itu.

Jelas beliau lagi, pewujudan undang-undang khusus berkait psikologi akan secara langsung menjaga kepentingan masyarakat secara menyeluruh menerusi pembendungan masalah tingkah laku serta memberi ruang meningkatkan aktiviti melatih kemahiran psikologi seperti bantuan kecemasan psikologi, kecemasan kesihatan mental, strategi daya tindak, pengurusan emosi dan tekanan.

Beliau juga percaya pelaksanaan akta psikologi akan dapat membantu pakar psikologi bertauliah memberikan perkhidmatan intervensi kepada pesakit, secara tidak langsung melindungi masyarakat daripada menerima perkhidmatan pseudopsikologi, sekali gus membantu mengawal isu masalah kesihatan mental di negara ini daripada terus membarah.

Berdasarkan Malaysia sudah agak ketinggalan dalam bidang psikologi, Konsultans Bebas Psikologi Organisasi Dr Alizi Alias berkata, bidang itu sudah lama matang di negara

maju, yang masing-masing mempunyai badan ikhtisas atau badan profesional bagi mengawal selia pengamal dan keseluruhan aspek bidang psikologi termasuk kurikulum pengajian.

"Di United Kingdom, mereka ada *British Psychological Society* yang mengawal selia gelaran dan amalan ahli psikologi. Pengamal psikologi ini pula perlu berdaftar dengan kerajaan melalui *Health and Care Professions Council*.

"Di Amerika Syarikat ada *American Psychological Association* yang mengawal selia kurikulum dan undang-undang negeri lesen pengamal. Sama juga di Australia yang ada *Australian Psychological Society* dan *Psychology Board of Australia*, Indonesia ada *Himpunan Psikologi Indonesia* yang mewajibkan ahli memiliki pensijilan (Sertifikat Sebutan Psikologi) dan lesen (Surat Izin Praktik Psikologi)," katanya.

Menurut beliau, pewujudan akta psikologi di Malaysia akan menyasarkan pengamal psikologi diwajibkan mempunyai kelulusan berdasarkan kurikulum tertentu selain berdaftar dengan badan profesional.

"Lebih-lebih lagi negara ini sudah mempunyai Akta Kaunselor 1998, sementara bidang kerja sosial

pula bakal diperkuatkan dengan Akta Profesion Kerja Sosial," kata beliau.

Menurut Alizi, pada awalnya ada cadangan mewujudkan akta psikologi bersekali dengan akta kaunselor, namun keutamaan diberikan kepada undang-undang kaunselor disebabkan jumlah mereka lebih ramai selain bidang kaunseling wujud lebih awal iaitu dalam era 1940-an berbanding bidang psikologi pada 1970-an.

"Perjawatan pegawai psikologi di Jabatan Perkhidmatan Awam juga wujud secara rasminya pada 1992 dan melalui banyak perubahan. Oleh itu, bidang psikologi boleh belajar daripada pengalaman dalam dan luar negara untuk memastikan akta ini, sekiranya diwujudkan, adalah yang terbaik dari segi ideal dan realiti," katanya.

Menurut Alizi, pengubalan akta psikologi juga diyakini dapat memastikan keperluan kesihatan mental di negara ini mampu dipenuhi, memandangkan pada masa ini, bilangan pengamal psikologi profesional adalah terlalu sedikit.

Katanya, pada 2021, Malaysia mempunyai kira-kira 500 doktor pakar psikiatri dengan nisbah seorang pakar untuk kira-kira 100,000 orang iaitu jauh lebih rendah berbanding saranan Pertubuhan Kesihatan Sedunia yang mengesyorkan seorang pakar bagi setiap 10,000 orang.

"Pakar psikologi klinikal yang bekerja dalam perkhidmatan awam pula hanya berjumlah 48 orang manakala jumlah pakar psikologi klinikal berdaftar secara keseluruhan adalah 300 orang. Bayangkan 8,926 kaunselor yang berdaftar dengan Lembaga Kaunselor Malaysia pada akhir 2019 menguruskannya 32.7 juta rakyat dengan nisbah 1:4,030 orang.

"Sebenarnya tugas kaunselor lebih tertumpu pada populasi normal



DR Shazli Ezzat

"Mereka (penghidap masalah mental) memerlukan literasi dan sokongan profesional untuk membantu (mereka), namun jumlah (pakar bertauliah) agak terhad"



DR Alizi

"Oleh itu, bidang psikologi boleh belajar daripada pengalaman dalam dan luar negara untuk memastikan akta ini, sekiranya diwujudkan, adalah yang terbaik dari segi ideal dan realiti"

yang mempunyai masalah berkaitan kehidupan harian, kekeluargaan, sosial dan tempat kerja atau memberi terapi sokongan kepada pesakit mental. Tetapi, untuk mendiagnosis dan memberi rawatan profesional kepada pesakit mental, tugas ini terbeban pada pakar psikiatri dan pakar psikologi klinikal yang bilangannya sangat sedikit," jelas beliau.

Beliau berkata, pada masa sama, Kementerian Kesihatan Malaysia (KKM) merekodkan peningkatan kes kesihatan mental dengan 1.142 kes pada 2021 berbanding hanya 631 pada tahun sebelumnya iaitu peningkatan sebanyak 81 peratus.

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 18
RUANGAN : FORUM

idapat/gambar melalui forumutusan@mediamulla.com.my atau 019-990 0761 Forum



KLINIK pakar pergigian swasta memulakan inisiatif bagi mewujudkan persekitaran yang kondusif sesuai dengan keperluan khas untuk autisme dewasa. - GAMBAR HIASAN

Memperkasa penjagaan gigi individu autistik dewasa

SAUDARA PENGARANG,

KESEDARAN tentang cabaran unik yang dihadapi oleh individu dengan autisme dalam penjagaan pergigian semakin meningkat, terutamanya dengan peningkatan usia mereka.

Sebahagian daripada penjagaan pergigian individu autisme ialah mendapatkan pemeriksaan pergigian secara berskala daripada doktor gigi. Ini boleh menjadi pengalaman yang menakutkan bagi sesiapa sahaja, tetapi bagi individu autisme dan penjaga mereka, lawatan ke doktor gigi boleh menjadi pengalaman yang sangat mencabar.

Walaupun orang dewasa autisme berkemungkinan sudah terdedah kepada rawatan pergigian beberapa kali dalam hidup mereka, ini tidak menjadikan mereka merasa kurang tertekan. Langkah-langkah perlu diambil secara berterusan untuk mengurangkan kebimbangan mereka dan membantu individu autisme mengatasi ketakutan yang dialami dan juga memastikan mereka dalam keadaan selesa sepanjang sesi pemeriksaan dan rawatan dijalankan.

Ada beberapa sebab mengapa individu autisme sering merasa tertekan ketika lawatan ke klinik pergigian, antaranya ialah kerana mereka tidak memahami kepentingan pemeriksaan pergigian untuk memastikan gigi dan gusi mereka dalam keadaan yang sihat. Berbaring di kerusi dengan lampu terang dan peralatan di dalam mulut bukanlah suatu pengalaman yang menyeronokkan bagi mereka.

Hipersensitiviti adalah perkara biasa di kalangan individu autisme. Bukan saja keadaan klinik pergigian dipenuhi dengan bunyi bising, bau dan lampu yang terang,

sensasi instrumen sejuk di dalam mulut boleh menyebabkan ketidakselesaan, bunyi gerudi boleh menyebabkan mereka tertekan atau rasa dan tekstur bahan pergigian mungkin mendatangkan rasa tidak senang kepada individu autisme. Ini boleh menyebabkan doktor sukar untuk berada dekat secara fizikal.

Kini, klinik-klinik pergigian terutamanya klinik pakar pergigian penjagaan khas memulakan inisiatif bagi mewujudkan persekitaran yang kondusif sesuai dengan keperluan penjagaan pergigian khas untuk autisme dewasa. Bilik menunggu yang mesra sensorial dilengkapi dengan instrumen atau alatan yang menenangkan seperti selimut tebal dan pengedap bunyi bagi membantu individu ini bersantai dengan tenang sebelum janji temu mereka.

Selain itu, doktor pakar pergigian penjagaan khas sering mengikuti pelbagai seminar untuk lebih memahami keperluan unik individu dengan autisme dan membangunkan teknik komunikasi yang berkesan.

Selanjutnya, memupuk budaya menerima dan memahami dalam komuniti pergigian dapat memastikan mereka yang terkesan oleh autisme merasa diterima dan dihormati semasa rawatan mereka. Doktor pergigian juga perlu sedar bahawa menerima kepelbagaian sahaja tidak mencukupi tetapi perlu mewujudkan persekitaran yang cukup selesa untuk menerima rawatan berkualiti tinggi tanpa mengira siapa mereka.

DR. ZUBAIDAH ZANUL ABIDIN, PROFESOR Madya DR. NOSIZANA MOHD SALLEH DAN DR. SITI FAUZZA AHMAD

Fakulti Pergigian, Universiti Malaya

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 31
RUANGAN : DALAM NEGERI

Dalam Negeri



WONG Kah Woh bersama pelajar yang menyertai Kejohanan Badminton Remaja Allianz di Taiping, Perak.
- UTUSAN/WAT KAMAL ABAS

Sekolah tutup jika suhu 37°C tiga hari

Oleh WAT KAMAL ABAS
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TAIPING: Sekolah yang mencatat bacaan suhu kekal 37 darjah Celsius tiga hari berturut-turut akan ditutup susulan cuaca panas yang melanda beberapa negeri.

Timbalan Menteri Pendidikan, Wong Kah Woh berkata, tindakan itu diambil sesuai dengan garis panduan ditetapkan.

"Sekolah yang mengalami suhu melebihi 37 darjah Celsius selama tiga hari berturut-turut

akan ditutup untuk kepentingan kesihatan warga sekolah.

"Kementerian sentiasa memantau keadaan cuaca dari masa ke semasa di samping mendapatkan nasihat daripada Kementerian Kesihatan Malaysia (KKM) dan Jabatan Meteorologi Malaysia (MetMalaysia) tentang keadaan cuaca," katanya pada Pelancaran Kejohanan Badminton Remaja Allianz di sini.

Menurut Kah Woh, pengurusan sekolah diberi kuasa penuh dalam membuat keputusan untuk

menghentikan aktiviti kokurikulum di luar bilik darjah sekiranya suhu mencecah 35 darjah Celsius.

"Kementerian sentiasa cakna dan peka tentang perkara ini dan kita mempunyai garis panduan bagi menghadapi fenomena El Nino yang diramal berlaku sehingga Julai ini," katanya.

Sementara itu, katanya, Kejohanan Badminton Remaja Allianz diadakan di pusat-pusat latihan sukan seluruh negara untuk pelajar menimba pengalaman menerusi pertandingan kompetitif.

AKHBAR : NEW STRAITS TIMES
MUKA SURAT : 7
RUANGAN : NEWS / NATION

REGISTRATION RECORDS AVAILABLE

MINISTRY VOWS TRANSPARENCY

Health Ministry will provide details of adverse effects of all Covid-19 vaccines, says Dr Dzulkefly

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THE Health Ministry has given its assurance that it will disclose all details relating to the adverse events following immunisation (AEFI) stemming from the Covid-19 vaccines it provided to the public during the pandemic.

Health Minister Datuk Seri Dr Dzulkefly Ahmad said the ministry had the registration records of all Covid-19 vaccines administered to Malaysians.

"We have registration records on AEFI. There is a register which contains all data, including fatalities.

"I had also previously raised this in the cabinet meeting on how this data must eventually be disclosed to the public. This is my responsibility and the ministry's," he said.

Dr Dzulkefly was speaking after officiating in the pre-launch of the Malaysia International Healthcare Megatrends event here yesterday.

He was responding to a question on whether the government had recorded cases of Thrombosis with Thrombocytopenia Syn-



Health Minister Datuk Seri Dr Dzulkefly Ahmad officiating the pre-launch of the Malaysia International Healthcare Megatrends event in Kuala Lumpur yesterday. BERNAMA PIC

drome (TTS), which some reports had linked to the AstraZeneca Covid-19 vaccine.

Indonesia's National Commission for the Study and Prevention of Adverse Events Following Immunisation, along with its Health Ministry and the Food and Drug Authority, had on Sunday said there were no reported cases of TTS associated with the administration of the AstraZeneca vaccine in the republic.

In Malaysia, the Health Ministry had asked AstraZeneca for an explanation on the matter.

Dr Dzulkefly, while not specifying any possible timeline for the data to be made public, said the ministry would not hide anything related to the AEFI of vaccines as it involved its responsibility to the people's wellbeing.

"We have the data and we will



The Covid-19 vaccines provided to Malaysians (from left) the AstraZeneca vaccine, Comirnaty by Pfizer-BioNtech and CoronaVac by Sinovac Life Sciences Co Ltd. FILE PIC

disclose the side effects as well. We are being responsible over this.

"We will be disclosing this at a suitable time. We will not hide anything, we are responsible for the people."

On whether the ministry has received feedback from AstraZeneca, Dr Dzulkefly said they were still waiting for an official and detailed response.

Dr Dzulkefly had earlier witnessed the signing of a memorandum of understanding between the Health Ministry and KRI Healthcare Bhd on the organisation of MIH Megatrends.

MIH Megatrends will take place from Oct 25 to 27 at the Kuala Lumpur Convention Centre. Prime Minister Datuk Seri Anwar Ibrahim is expected to officiate in the event.

AKHBAR : THE STAR
MUKA SURAT : 4
RUANGAN : NATION

Number of housemen plummets by half since 2019

PETALING JAYA: Following a drop in medical graduates, the number of housemen at the Health Ministry has dwindled by 50% since 2019.

The decline has also caused a maldistribution of housemen in various government hospitals that offer housemanship.

According to data from the ministry's Human Resources Division sighted by *The Star*, there were 6,134 housemen in 2019, followed by 4,934 in 2020, 4,173 (2021),

3,245 (2022) and 3,271 (2023).

Similarly, the provisional registration of medical graduates with the Malaysian Medical Council (MMC) also dropped by half.

In 2017, there were 6,147 medical graduates with a provisional registration, followed by 5,867 in 2018, 4,999 (2019), 5,218 (2020), 3,867 (2021) and 3,131 (2022).

These include graduates of local private and public universities, as well as graduates from medical schools abroad.

Provisional registration allows newly-qualified doctors to undertake the general clinical training needed for full registration under the Medical Act 1971.

The number of medical graduates from local universities had also declined between 2017 and 2021.

In 2017, local universities produced 3,902 medical graduates, followed by 4,209 in 2018, 3,427 (2019), 3,202 (2020) and 2,667 (2021).

Health Minister Datuk Seri Dr Dzulkefly Ahmad had acknowledged in a post on X on April 26 that there is a shortage of housemen.

"There was a time where there were 6,000-7,000 medical graduates a year.

"Now, we have a little over 3,000, which has led to fewer housemen at hospitals.

"In fact, those who are working are feeling the burden due to the workload and manpower shortage," Dzulkefly said.

He added that he had ordered the ministry's top leadership at both the federal and state levels to look into the manpower situation at hospitals.

If required, the placement and duties of housemen will be re-evaluated, he said.

He said the ministry's top management would closely monitor the situation and were cognisant of the workload of healthcare workers.

It's back to a shortage of doctors

Youth diverting from careers in science, pursuing other fields, says expert

By RAGANANTINI VETHASALAM
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PETALING JAYA: A few years ago, there was a glut in medical graduates. But today, the public healthcare system is grappling with a shortage of doctors, especially housemen.

Healthcare stakeholders have warned that if the manpower problem is not resolved, the public healthcare system will eventually suffer and the people would bear the brunt.

Hartal Doktor Kontrak spokesperson Dr Muhammad Yassin said the rights group had predicted the shortage in 2021.

"Actually, this is a global trend where the newer generations are more inclined to non-science streams and prefer to pursue careers based on that. Hence, we have fewer undergraduates at medical school and fewer new medical graduates. In Malaysia, this is further exacerbated by the contract system issues which had been plaguing the country since 2016," he said when contacted.

"Hartal has predicted this issue since 2021 but those in power wouldn't want to listen and didn't want to take any affirmative actions. Medical graduates prefer to work overseas instead of joining the Health Ministry (MOH)."

He said manpower shortage had translated to more burden and increased mental stress for healthcare workers.

Shortage of manpower, he said,

would also lead to reduced quality of services provided and higher risk of medical errors.

He said there had been several reports on longer waiting time at medical facilities and this would only get worse if the matter was not addressed.

Dr Muhammad Yassin said the issue could be resolved with better pay and allowances – issues related to the contract scheme for all healthcare workers, not just doctors – and more perks and benefits, especially for professional development.

Malaysian Medical Association (MMA) president Dr Azizan Abdul Aziz said medical schools were mushrooming in the late 1990s and early 2000s, leading to more medical graduates.

"The rising numbers were alarming and necessitated a moratorium imposed for medical schools in 2011 to control the number of medical students.

"It is important to note that medical school takes five years to produce graduates.

"This means students joining the programme in 2010 would have graduated in 2015. This corresponded with the peak of medical graduate numbers (2017-2020).

"Around the same time, we also had the contract system introduced in 2016, which put medical graduates off from registering in the system (overseas graduates chose to remain overseas, UM and UKM graduates registered in Singapore, Newcastle graduates



Extra duties: The manpower shortage has translated to an increased burden for healthcare workers.

registered in UK, Monash graduates registered in Australia).

"So, the situation now is a combination of fewer people studying medicine from 2018-2019, plus people not returning to Malaysia," she said.

She added that the healthcare system would be stretched further, with issues of overcrowded facilities, burnout among healthcare workers, brain drain and, as a result, poor quality healthcare.

Dr Azizan said effective short- and long-term healthcare human resource planning, which is tailored to meet the specific needs of the population, is essential for optimal healthcare delivery.

"We urge for transparency from the MOH on sharing its data on the numbers of healthcare workers by category towards more effective

planning of the healthcare workforce," she said.

The MMA had proposed on many occasions that the government introduce a dashboard where data on the numbers of healthcare workers by category are listed.

"This information should be shared with the public on a dashboard. Currently, no one, except the government, knows what the numbers are," she added.

Independent healthcare advocate and former contract doctor Dr Sean Thum said there must be a complete overhaul in the current system of how human resources, staff development and talent is managed in the public healthcare system.

"There is a need to separate the public healthcare system from the

civil service framework to increase agility, competitiveness and attractiveness as an employer.

"Salaries and benefits need to be revamped to be competitive with the private sector and other regional employers, with flexibility to adapt to market trends.

"Continuing with the current Public Service Department and civil service framework has led to a further decline in the attractiveness of the public healthcare system as an employer," he said.

Employers worldwide are competing for talent and the Malaysian public healthcare system must become more sophisticated in attracting, managing, retaining and developing talent.

"A healthcare system is only as good as its people, so it must prioritise the well-being of its healthcare professionals.

"Decentralisation of power and increased flexibility and autonomy are necessary in keeping up with the rapidly changing world," Dr Thum added.

Public health expert and retired Health Ministry official Datuk Dr Zainal Ariffin Omar said there have yet to be definitive solutions for the workforce in the MOH.

"Unless the government implements the right strategy, our health system and rakyat will suffer. The government should be more serious, fast and firm (in finding solutions).

"The Health Service Commission should be established as soon as possible. No more talk or studies."

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CCC highlights nutritional value on palm oil

THE Consumer Choice Center (CCC), a non-profit consumer advocacy group, has shed some light on the health benefits of palm oil and its valuable role in enhancing the nutritional quality of food products.

Despite misconceptions surrounding its impact on health, the CCC says palm oil offers numerous benefits and serves as a versatile and essential ingredient in Malaysia's food industry.

The CCC points out that palm oil is rich in tocotrienols, a form of vitamin E with powerful antioxidant properties which help to protect cells from damage caused by free radicals. A study by Nutrition Society Malaysia has shown that palm oil contains Vitamin E known as tocotrienols – as well as carotenoids, which are important components for healthy nutrition which supports heart health, reduces inflammation, and enhances cognitive function, among other benefits.

"We want to dispel the misconceptions surrounding palm oil and highlight its positive contributions to health and nutrition. Contrary to popular belief, palm oil is not harmful when consumed as part of a balanced diet. In fact, its nutritional profile makes it a valuable addition to food products," said CCC representative Tarmizi Anwar.

Furthermore, palm oil is cholesterol-free and contains a balanced ratio of saturated, monosaturated and polyunsaturated fats, making it suitable option for individuals seeking healthy alternatives to hydrogenated oils and trans-fat, the CCC said.

"Palm oil is widely used in food products due to its stability and versatility, making it an ideal ingredient for cooking, baking, and food processing. Its ability to withstand high temperatures without breaking down or producing harmful by-products makes it a preferred choice for food manufacturers," Tarmizi added.

Despite persistent misinformation, scientific evidence supports the safety and nutritional benefits of palm oil consumption. By debunking misconceptions and promoting factual information, the CCC aims to empower consumers to make informed choices about their dietary habits and food preferences."

Tertiary hospital in Bukit Jalil

■ BY MARK MATHEN VICTOR

KL Wellness City puts healthcare at forefront with launch of 624-bed KL International Hospital

KEEPING the enhancement of living standards through the integration of wellness and healthcare in mind, KL Wellness City (KLWC) launched its flagship tertiary hospital through KL International Hospital Sdn Bhd (KLIH) last week.

Targeted to complete its development in the second quarter of 2026, KLIH's substructure works have already been completed, with the construction of the main building currently underway.

The tertiary hospital will have 624 beds, with the potential expansion to 1,000 beds. It will also have state-of-the-art facilities to fit the grand vision of KL Wellness City as the premier location for healthcare tourism.

"Last year, Malaysia recorded more than one million health tourist arrivals, representing a 15% increase compared to 850,000 people recorded in 2022," said KL Wellness City managing director

Datuk Dr Colin Lee.

Lee expects the infrastructures in KL Wellness City, including KLIH, and its healthcare professionals who support the medical ecosystem to be a big draw in medical tourism.

Present at the event was Health Minister Datuk Seri Dr Dzulkefly Ahmad, who has faith in the vision and goals behind not just KLIH but KL Wellness City in its entirety.

"I'm seeing a strong commitment in investing and leveraging on ICT within the hospital, in its quest to be equipped with the first and best medical innovation including robotics in Malaysia.

"KL Wellness City's vision in creating Southeast Asia's first township integrated with

healthcare and wellness is commendable, especially as it aligns with the needs of our ageing population," he said.

The event also saw the memorandum of agreement (MoA) signing between KL Wellness City and six institutions of higher learning, with KL Wellness City committing RM25 million to the institutions to support the education of nursing students.

The agreement also aims to provide 3,000 job opportunities due to the shortage of skilled nursing professionals in Malaysia, which is currently facing a projected 57.9% nurse shortage by 2030.

"The sponsorship will cover the students' education fees, living

allowance and accommodation, assuring graduates five years of employment at KLIH upon graduation. The overall RM25 million sponsorship will be dispersed over a minimum period of five years and beyond," Lee divulged.

Located in Bukit Jalil, Kuala Lumpur, with easy access to international airports, KLIH will feature 22 operating theatres, including provisions for robotic surgery and two hybrid operating theatres.

By offering a wide range of medical services, from intricate surgeries to tertiary and secondary care, the hospital aims to attract leading specialists to enhance care and use artificial intelligence to minimise wait times for patients.

Along with the MoA, KLIH will be pledging RM2 million in funds to support the medical needs of the B40 community in Malaysia, in line with the Health Ministry's goal to serve the underprivileged community.



(Starting fourth from left) Seputeh MP Teresa Kok, Lee, Dzulkefly and Member of the Selangor State Executive Council (Women and Family Empowerment, Social Welfare & Care Economy) Anfaal Saari at the launch of KLIH, flanked by the KL Wellness City management team.

Safeguarding dietary supplements in Malaysia

THERE has been a steady demand for dietary supplements propelled by this new collective awareness towards our overall well being. However, recent price hikes have raised the average living costs in Malaysia. For some, they may have to cut back on added expenses, which includes dietary supplements.

This situation opens doors for devious, illegal activities to take place within the market, especially through e-commerce websites where counterfeit supplements are sold at absurdly low prices. For instance, a single joint support supplement may cost RM120-RM180 at pharmacies, but some unscrupulous sellers offer the same product for only RM38. Additionally, certain platforms and sellers may take advantage of unassuming consumers by offering attractive discounts and vouchers – further expanding this perpetual market of deceit in terms of people's health and well being.

Buyer beware: Dangers of the unverified

The allure of a good bargain can be compelling, especially when one only needs to pay a fraction of the original price. However, the consequences of purchasing from unverified vendors or websites can be severe. A multitude of these sellers often operate without the necessary quality control measures.

Without proper scrutiny, these unscrupulous vendors can easily pass off fake supplements as genuine, putting consumers at risk of ingesting unknown and possibly harmful substances. These products also may not follow proper standards of procedures, leading to higher chances of improper handling and contamination.

In addition to the health risks, these unverified sources also undermine the integrity of Malaysia's legitimate nutritional supplements market, which is valued at US\$644.88 million (RM3.06 billion) in 2023.

Certified brands are finding it increasingly harder to earn customers' trust who have been victims to disingenuous sellers.

Regulatory recognition: Protecting consumers

In spite of these malicious activities, Malaysia upholds strict laws and regulations to govern the manufacturing and labelling of dietary supplements. This includes mandatory registration of documented evidence and stringent timelines for health supplements. While some counterfeit products may slip through the cracks, The Ministry of Health – via the National Pharmaceutical Regulatory Agency (NPRA) – has laid out various safeguarding measures to help consumers identify the legitimacy of a product.

The Ministry of Health has also mandated that all certified health supplements must be marked with the holographic sticker called the FarmaTag, which is extremely hard

for counterfeit producers to replicate. The sticker also includes an MOH-issued QR Code, a gradient design, and holographic serial and pin numbers.

Additionally, the Health Ministry has released a mobile application called FarmaChecker to help consumers confirm a product's certification status online by scanning its QR code or typing in its serial number. At the same time, the NPRA continues to ensure the safety and efficacy of dietary supplements, mandating safety data for supplements with new or innovative ingredients. Similarly, the Malaysian Dietary Supplement Association (Madsa) has also worked hand-in-hand with the government to promote and increase awareness of health supplements and its benefits to all Malaysians.

With the collective effort by both the government and consumers

alike, we can work towards a future where all our nutritional supplements are safeguarded from the unethical practices of counterfeit producers. By being mindful of the sources of our purchases, especially when the products involve our health and well being, we can nurture a safe and healthy supplements market in Malaysia. After all, bargaining our health for cheaper costs will never be worth the price.

Madsa advises Malaysian consumers to always make sure that online supplements have been registered by the NPRA. Check if the product has an MAL number, which verifies that it has been approved by the NPRA. If the product that is delivered does not have such identification, return and request for a refund and report to the MOH.

This article is contributed by Madsa.