

Influenza melonjak 97 kluster dalam seminggu

KKM sahkan majoriti kluster berlaku di sekolah

Oleh **TUAN BUQHAIKHAH TUAN MUHAMAD ADNAN PUTRAJAYA**

Kementerian Kesihatan (KKM) melaporkan lonjakan mendadak sebanyak 97 kluster influenza direkodkan pada Minggu Epidemiologi (ME) 40/2025 berbanding hanya 14 kluster pada minggu sebelumnya.

Menurut KKM, peningkatan ketara itu kebanyakannya berlaku di institusi pendidikan menjadikan sekolah antara lokasi utama penularan influenza ketika ini.

Daripada jumlah tersebut, sebanyak 32 kluster dikesan di sekolah menengah, 26 di sekolah rendah, 15 di tadika dan sembilan di sekolah swasta.

Lima negeri yang mencatat jumlah kluster tertinggi ialah Selangor dengan 43 kluster, diikuti Kuala Lumpur dan Putrajaya (15), Pulau Pinang (10), Johor (9) serta Kedah (5).

Menerusi kenyataan, KKM menjelaskan, walaupun terdapat peningkatan jangkitan keadaan masih dalam jangkaan musim influenza dan terkawal dengan kadar kemasukan ke hospital bagi kes *Severe Acute Respiratory Infection* (SARI) me-



Peningkatan gejala influenza ketika ini kebanyakannya berlaku di sekolah.

nunjukkan sedikit penurunan.

"Survelan makmal juga mengesahkan tiada mutasi baharu dikesan, dengan penularan berpunca daripada virus Influenza A (H3), iaitu strain bermusim," katanya pada Khamis.

Ujar KKM, pemantauan di sembilan hospital sentinel mendapati kadar kemasukan kes SARI menurun daripada 9.59 peratus pada ME 39/2025 kepada 9.08 peratus pada ME 40/2025.

"Namun dari 58 klinik kesihatan sentinel seluruh negara menunjukkan kadar *Influenza-Like Illness* (ILI) meningkat kepada 7.38 peratus pada minggu terkini berbanding 5.95 peratus minggu sebelumnya," jelasnya.

Lima negeri dengan kadar konsultasi ILI tertinggi ialah Selangor (14.63 peratus), Melaka (12.49 peratus), Pulau Pinang (12.49 peratus), Kuala

Lumpur dan Putrajaya (11.62 peratus) serta Sabah (8.73 peratus).

KKM menegaskan peningkatan itu mencerminkan pola penularan influenza bermusim yang lazim berlaku setiap tahun dan keadaan setakat ini masih terkawal.

"Ujian makmal turut mengesahkan tiada mutasi baharu dikesan dengan penularan berpunca daripada virus Influenza A (H3) iaitu strain bermusim yang sudah sedia wujud," katanya.

Tambah KKM, ujian makmal tidak dijalankan secara rutin untuk semua kes ILI memandangkan kebanyakannya bergejala ringan dan boleh didiagnosis secara klinikal.

Rawatan hanya diberikan kepada pesakit berisiko tinggi seperti warga emas, kanak-kanak kecil, ibu hamil dan individu yang menghidap penyakit kronik.

FOTO: BERNAMA

Influenza: PPKI SK Taman Permas Jaya 2 ditutup

JOHOR BAHRU - Kelas Program Pendidikan Khas Integrasi (PPKI) Sekolah Kebangsaan (SK) Taman Permas Jaya 2 ditutup susulan penularan influenza.

Exco Kesihatan dan Alam Sekitar negeri, Ling Tian Soon berkata, sebanyak enam kluster influenza direkodkan di daerah ini melibatkan institusi pendidikan sekolah bagi tempoh Januari hingga kini.

"Daripada jumlah itu empat kluster dikesan sebagai Influenza A dan dua lagi Influenza B.

"Setakat ini, hanya kelas membabitkan PPKI SK Taman Permas Jaya 2 yang ditutup," ujarnya dalam kenyataan pada Khamis.

Sebelum itu tular, di media sosial notis penutupan kelas berkenaan di bawa Seksyen 18(1)(f) Akta

Pencegahan dan Pengawalan Penyakit Berjangkit 1988 oleh Kementerian Kesihatan Malaysia (KKM).

Penutupan bermula pada Rabu sehingga 17 Oktober itu dibuat bagi membolehkan kerja-kerja pembersihan dan kawalan jangkitan dilakukan.

"Orang ramai dinasihatkan untuk mengamalkan langkah kesihatan sendiri seperti menjaga kebersihan diri, tidak berkongsi peralatan peribadi, serta mengamalkan etika batuk dan bersin yang betul.

"Mereka yang bergejala disarankan untuk berehat di rumah dan mengelakkan berada di tempat awam.

"Sekiranya perlu keluar, individu bergejala digalakkan memakai pelitup muka bagi mengurangkan risiko penularan jangkitan," jelasnya.

INFO

APA ITU INFLUENZA?

Jangkitan saluran pernafasan atas yang disebabkan oleh virus influenza jenis A, B, atau C. Ia berjangkit melalui titisan udara apabila seseorang yang dijangkiti batuk, bersin atau bercakap.

GEJALA UTAMA

1. Demam tinggi (biasanya lebih 38°C), datang secara tiba-tiba.
2. Sakit kepala dan sakit badan yang ketara.
3. Sakit tekak dan batuk kering.
4. Hidung tersumbat atau berair.
5. Keletihan melampau, boleh berlarutan 1 hingga 2 minggu.
6. Menggigil dan berpeluh.
7. Kadangkala disertai loya, muntah atau cirit-birit (lebih kerap pada kanak-kanak).

GOLONGAN BERISIKO TINGGI

- Kanak-kanak di bawah 5 tahun (terutama bawah 2 tahun).
- Warga emas (lebih 65 tahun).
- Ibu hamil.

- Pesakit kronik (asma, kencing manis, jantung, paru-paru).
- Individu dengan imuniti lemah.

RAWATAN

Tiada ubat khusus untuk membunuh virus influenza tetapi rawatan boleh membantu mengurangkan simptom dan memendekkan tempoh penyakit.

1. RAWATAN SIMPTOMATIK (UMUM)

- Paracetamol untuk demam/sakit badan
- Minum air yang mencukupi
- Rehat secukupnya

2. UBAT ANTIVIRUS (JIKA PERLU)

- Oseltamivir (Tamiflu) atau Zanamivir (Relenza), diberi dalam 48 jam pertama jangkitan bagi pesakit berisiko tinggi.
- Dapat mempercepatkan pemulihan dan kurangkan komplikasi.

ANGGARAN CAJ RAWATAN INFLUENZA

- Klinik swasta: RM100 hingga RM300 yang merangkumi ujian pantas, konsultasi doktor dan ubat.
- Hospital swasta: RM300-RM700 meliputi ujian saringan, konsultasi doktor pakar dan ubat antiviral.
- Klinik Kesihatan: RM1 hingga RM20.

* Nota: Harga bergantung pada lokasi, tahap gejala serta sama ada ujian pantas atau PCR digunakan.

LANGKAH PENCEGAHAN:

- Ambil vaksin influenza setiap tahun.
- Pakai pelitup muka jika tidak sihat.
- Basuh tangan dengan sabun atau cecair pembasmi kuman.
- Elak tempat sesak ketika musim wabak.
- Amalkan gaya hidup sihat dan cukup tidur.

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Selangor

KEMPEN TINDAK BALAS KECEMASAN KESIHATAN AWAM 2025

KLIA pastikan penumpang selamat

Bayangkan berada di tengah ribuan penumpang di balai berlepas Lapangan Terbang Antarabangsa KL (KLIA), tiba-tiba seorang pengembara rebah kerana serangan jantung.

Dalam beberapa saat, pasukan paramedik berbasikal elektrik (e-scooter) meluru ke lokasi dengan dilengkapi kit trauma, tangki oksigen dan mesin defibrilator luaran automatik (AED) di tangan.

Degupan jantung berjaya dipulihkan dan nyawa penumpang terselamat.

Itu bukan sekadar simulasi, sebaliknya gambaran bagaimana KLIA memperkuatkan kesiapsiagaan melalui Kempen Tindak Balas Kecemasan Kesihatan Awam 2025, demi memastikan setiap individu yang menjejaskan kaki ke lapangan terbang boleh bernafas lega.

Pada tahun ini, KLIA menyantuni lebih 41 juta penumpang sehingga Ogos 2025. Angka ini merekodkan peningkatan lapan peratus berbanding tahun lalu. Oleh itu usaha ini menjadi semakin penting bagi memastikan kesihatan penumpang diberikan perhatian awal terutamanya di persekitaran berisiko tinggi seperti di lapangan terbang. Sejak awal tahun ini juga, KLIA telah menangani lebih 1,700 kes ke-



E-SCOOTER digunakan oleh paramedik bagi mempercepatkan ke lokasi kejadian semasa berlaku kecemasan.



PESERTA mempelajari cara menyelamatkan mangsa ketika kempen Tindak Balas Kecemasan Kesihatan Awam 2025 di Lapangan Terbang Antarabangsa KL (KLIA). Sepang - Gambar NSTP/MOHID PADLI HAMZAH

cemasan termasuk 45 kes serangan jantung.

Berikutan 'Rapid Response, Resilient Communities', inisiatif ini bukan sahaja memperkenankan peralatan canggih seperti 62 unit AED di Terminal 1 dan Terminal 2 serta Paramedic-on-Wheels menggunakan e-scooter, malah melatih komuniti lapangan terbang daripada kakitangan operasi sehingga ke pihak keselamatan untuk bertindak pantas ketika saat genting.

Keberkesanan usaha ini turut disokong pakar dan menurut Dr Rasheed Ahamed, pakar penjagaan kesihatan hemodialisis dan perkhidmatan Medical Evacuation (Medevac), keupayaan lapangan terbang membina sistem tindak balas pantas adalah keperluan semasa.

"Lapangan terbang adalah kawasan berisiko tinggi kerana jumlah orang yang ramai dan kesiapsiagaan seperti ini amat penting terutama jumlah pe-

ngunjung ke KLIA yang mencecah puluhan juta setiap tahun.

"Oleh itu, usaha memperkasakan paramedik dengan peralatan moden dan latihan segera boleh jadi faktor penentu antara hidup dan mati mereka yang berada di sekitar kita," katanya.

KLIA turut menggerakkan latihan Heartsaver dan Basic Life Support (BLS) untuk kakitangan barisan hadapan, pekerja dan komuniti lapangan terbang.

Solihin Redzuan, 39, ka-

kilangan Ground Team Red (GTR) Sdn Bhd yang mengikuti latihan itu berkata, pengalaman terbit memberi keyakinan.

"Sebelum ini, jika berlaku kecemasan saya rasa cemas, tetapi dengan latihan BLS (Basic Life Support), saya lebih yakin nak membantu orang lain kerana tahu apa langkah pertama perlu dibuat," katanya.

Bagi penumpang pula, inisiatif ini memberi ketenangan tambahan ketika mereka melancong atau

pulang ke tanah air.

"Sebagai penumpang, kita rasa lebih yakin untuk 'travel' bila tahu bantuan boleh sampai cepat dan paling penting kalau apa-apa berlaku, kita dilindungi," kata Nur Khairunnisa Nazri, 29, pekerja swasta dari Selangor.

Bagi anggota keselamatan penerbangan di lapangan terbang, persediaan ini memberi makna besar kerana mereka barisan pertama yang berhadapan dengan situasi cemas.

Pengalaman pertama kali menyelamatkan penumpang lelaki berusia 70an di KLIA meninggalkan memori yang tidak dapat dilupakan oleh Muhammad Haikal Jua, seorang anggota keselamatan penerbangan (AVSEC).

"Tugas kami bukan sekadar menjaga keselamatan penerbangan, tapi juga jadi sebahagian daripada komuniti yang mampu menyelamatkan nyawa.

"Latihan dan kemudahan ini menjadikan kami lebih bersedia membantu sesiapa sahaja yang memerlukan bantuan kecemasan," katanya.

Dengan sokongan rakan strategik, kerajaan dan industri, KLIA bukan sahaja memperkukuh infrastruktur kesihatan, malah membina komuniti lapangan terbang yang cekal dan berdaya tahan.

Kempen ini menjadikan KLIA bukan sekadar pintu masuk antarabangsa, tetapi juga lapangan terbang yang selamat, bersedia dan memberi keyakinan penuh kepada setiap penumpang.

The paradox of vapes and cigarettes

As bans loom, Malaysia weighs health risks against economic gains

THE Malaysian vape industry and its big brother the cigarette industry exist in a paradox of profit and peril: both are major economic contributors and serious health hazards. The vape market is projected to reach RM2.7 billion this year with 2.28 million adult users, despite operating under regulatory restrictions and facing a nationwide ban by mid-next year. In the mean time, Malaysia loses an estimated RMS billion in annual tax revenue due to the smuggling of illegal cigarettes and the use of counterfeit tax stamps.

Despite their dangers, both vape and cigarettes remain deeply entrenched economically, socially and politically. Authorities are now intent on putting an end to these health threats. Most vapes contain nicotine, toxins and illicit substances that reinforce addiction and pose serious health risks, similar to smoking, which is linked to respiratory illnesses, cardiovascular diseases and brain development impairment, particularly among the young. Smoking is notoriously associated

 **Bans on smoking in public places and commercial premises, health campaigns, graphic warnings, and even religious edicts have had minimal effect. Will a national ban work?**

with lung cancer, chronic obstructive pulmonary disease and cardiovascular disease, and hardcore users face an increased risk of premature death.

To discourage smoking, taxes have been jacked up to the point of exorbitance and, thus, the reason for a thriving black market. Efforts to curb usage have focused on taxation and regulations, but met with limited success. In response to criticism that vaping remains undertaxed compared to cigarettes, the Health Ministry has proposed increasing vape duties from

40 sen per millilitre to RM4 to curb consumption.

Ban or no ban, vaping and smoking persist. About 1.05 million Malaysians both vape and smoke, and overall usage shows no sign of decline. Realistically, decades of anti-smoking laws and newer vaping regulations have done little to break the addiction. Bans on smoking in public places and commercial premises, health campaigns, graphic warnings, and even religious edicts have had minimal effect. Will a national ban work? We will find out by 2040, when the government expects to achieve its "Smoke-Free Malaysia" vision. We expect vapers and smokers to continue getting their daily fix, so expect a boom in the black market. Short of a miracle cure or an antidote in the water supply, vaping and smoking — and their lethal consequences — will continue to haunt not only Malaysia, but the entire world.

Schools serving healthier meals

Canteens support ban on junk food

By FAZLEENA AZIZ
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PETALING JAYA: School canteen operators have been complying for several years with the prohibition on 12 categories of food and drinks in schools as part of efforts to promote healthier eating habits among students, says Khairuddin Hamzah.

The Malaysian School Canteen Operators Association president said this compliance has been achieved through continuous monitoring by the Education Ministry and Health Ministry.

However, he acknowledged that there are still a small number of operators who continue to sell prohibited items due to market pressure.

"This regulation poses challenges to canteen operators from several angles, as revenue has declined because students are less interested in healthy food compared to fast food.

"Although most canteens no longer sell unhealthy food and drinks, students can still buy them outside the fence and eat them at the school canteen.

"There are also many students who bring sausages, nuggets and instant noodles from home because the canteen only provides 'Health Ministry recommended food' instead of 'student favourite foods', which is in high demand," Khairuddin told *The Star*.

In terms of cost, he said preparing healthy food is indeed more expensive and requires greater effort compared to fast food, as it involves more labour.

However, he said, the associa-

tion fully supports the ban, though several improvements are needed.

This includes banning such food from entering the school through the gates, as there are cases of cooperatives, teacher clubs and students taking advantage of selling these types of food, he said.

Additionally, he said a healthy menu should be made available for all students, similar to the school milk programme.

"We also believe that Pakatan Harapan's 15th General Election manifesto for a Free Breakfast Programme in all Education Ministry schools is the right approach to educate students about healthy eating.

"This programme has already undergone a successful pilot project; as such, we hope the government can implement this long-forgotten manifesto."

SJK(C) Pandamaran A, Klang, School Governing Board (LPS) chairman Datuk Seri Teh Meng Huat agreed that the restrictions on unhealthy food are beneficial for students, as there were too many processed foods being sold in the school canteen.

"This is the right thing to do because kids are getting too accustomed to such food, which can lead to obesity. School is a place of education, so it is vital that we teach healthy eating habits.

"We may not be able to control what they eat outside the school premises, but as long as they are in school, we want them to adopt healthy habits.

"Processed food costs more than fresh ingredients, but because kids request these items

(processed food), the operators tend to comply.

"So we constantly give instructions to stop the sale of such unhealthy items by working with the parent-teacher association," he said.

SKJ(C) Ting Hwa, Melaka, LPS chairman Datuk Shaun Lee said over the past two and a half years, after implementing healthy menus in their school canteen, they have seen more vibrancy among their students.

He said the school took proactive steps to serve healthy food while eliminating processed food, despite it being a favourite among students, and switched to using thermal and stainless steel containers.

"Previously, canteen operators sold unhealthy food and drinks because it was profitable, but we wanted the kids to start eating fruits and vegetables. We also wanted to go beyond just slogans.

"As such, food preparation is monitored by both ministries, with vetting by a licensed nutritionist.

"Operators are required to send pictures of the food they are preparing for approval before cooking.

"We also don't allow kids to bring processed food into the school, working closely with parents to ensure this. Following these measures, we've seen changes among students – they are more alert in class and feel less tired," he said.

Lee did point out that there was an increase in the cost of preparing the food, but they managed to introduce more affordable pricing to address the issue.

List of food and drinks that cannot be sold in schools

1. Food Regulation 1985
i. Expired food
ii. Food with toys



2. Processed food

i. French fries, burgers, sausages, nuggets, lok cheng and others
ii. Fish or chicken or meat balls as a snack (not used in the cooking)



3. Junk food
i. Snacks, potato chips, prawn crackers, and others



4. Sweets and chocolates



5. Pickled food



6. Creamy or sugar-coated food



7. Instant products
Mee, mee hoon, kueh teow, ramen, porridge, instant soup and seasonings



8. Confectionery iced products or ice cream



9. Drinks with toppings or cordial, flavoured syrup, creamer, 3 in 1 mix, whipping cream



10. Energy or isotonic or herbal or carbonated or fruity drinks (<35% fruit content)



11. Tea and coffee (only for teachers)



12. Food and drinks containing alcohol



Source: Education Ministry

The Star graphics

On Sept 23, the Education Ministry announced on its Facebook page the collaboration with the Health Ministry's Nutrition Division, outlining 12 types of food and beverages that are prohibited

from being sold in schools.

This ban is one of the ministry's efforts to ensure that students develop healthy eating habits and support good growth and development.

Experts: Balanced diet boosts kids' immunity, brain function

PETALING JAYA: The move to ban 12 types of food and beverages in schools aligns with the Malaysian Dietary Guidelines for Children and Adolescents 2023, promoting balanced nutrition that supports physical development, immunity, cognitive function and academic performance.

Senior lecturer and dietitian Dr Nor Baizura Md Yusop from Universiti Putra Malaysia's Faculty of Medicine and Health Sciences said the guidelines emphasise the need for age-appropriate intake of energy, protein, fibre, healthy fats, and essential vitamins and minerals such as calcium, vitamin D, iron and zinc.

"These critical nutrients are often lacking in the banned items, which tend to be high in sugar, salt and unhealthy fats," Nor Baizura said.

"However, while such bans can help limit access to unhealthy options, long-term behaviour change requires more than policy alone.

"Challenges such as inconsis-

ent enforcement, limited availability of nutritious foods, low nutrition literacy among canteen operators, and external influences from home and advertising continue to undermine progress.

"Experts suggest that a comprehensive, whole-school approach, which integrates education, parental involvement, supportive food environments and consistent messaging, is essential to instil and sustain healthy eating habits among Malaysian children," she said.

On what's missing in the diets of the children, Nor Baizura said that based on the guidelines supported by findings from the Seanuts (South East Asian Nutrition Survey) and several local studies, Malaysian children meet their energy and protein needs but there are significant gaps in fruits and vegetables intake and key micro nutrients such as calcium, vitamin D, iron and zinc.

These nutrients are vital for healthy growth, bone development, immune function, and cog-

nitive performance, she added.

They also raise concerns about the excessive consumption of sugar, salt and unhealthy fats, which contribute to rising childhood obesity rates, Nor Baizura said.

Ng Kar Foo, a registered dietitian practising in a local private medical centre, said good nutrition during childhood lays the foundation for lifelong health, growth and learning.

A well-balanced school meal not only supports healthy physical growth – such as optimal height and weight – but also plays a crucial role in brain development, memory and concentration, he said.

"A good school meal programme is not just about feeding children – it's an investment in their health, education and the nation's future.

"Schools play a vital role in making healthy food choices available and cultivating lifelong healthy eating habits.

"With the right policies and partnerships, we can make

healthy eating a norm in every Malaysian school.

"Children who eat balanced meals with enough energy, protein, vitamins and minerals tend to perform better academically and are more attentive in class," he said.

"In contrast, skipping meals or relying on high-sugar and high-fat snacks can lead to poor focus, fatigue and behavioural issues.

"In Malaysia, we are seeing rising concerns of childhood obesity and early signs of lifestyle-related diseases such as pre-diabetes and hypertension."

Ng said some children, especially those from lower-income families, may also face food insecurity or inadequate nutrient intake – such as iron, calcium and vitamin D deficiency – which can affect growth, immunity, and school performance.

These gaps highlight the importance of structured, balanced school meals that meet nutritional standards and ensure no child is left behind nutritionally, he said.

When asked about school canteen food in Japan and South Korea, Ng said they are good examples of how strong school meal programmes can nurture healthy, disciplined and well-nourished students.

"In Japan, school lunches are part of the national education policy – every child receives a balanced meal prepared with fresh ingredients, and they also learn about food, nutrition and sustainability as part of the curriculum.

"Teachers and students eat together, promoting a culture of respect for food and community," he said.

"Malaysia can learn from this model – not to copy it entirely, but to adapt it to our local culture and food diversity.

"We have an abundance of local produce, and by engaging health professionals such as dietitians and nutritionists, alongside local farmers and food suppliers, we can design school meals that are nutritious, affordable, and culturally relevant," he added.

Diabetic retinopathy now a major cause of vision loss in country

By ANNABELLE LAWRENCE
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IPOH: Diabetic retinopathy, an eye complication caused by diabetes, has emerged as a major cause of blindness in Malaysia.

Health Ministry medical development division director Datuk Dr Mohd Azman Yacob, who revealed this, said early detection and referral of diabetic retinopathy cases are crucial.

"There is a need for stronger collaboration between ophthalmology and public health disciplines," he said at the World Sight Day 2025 celebration here yesterday.

Dr Mohd Azman said data from the National Eye Survey IV (NES IV) 2025 revealed that moderate visual impairment increased from 6.3% in 2014 to 6.8% in 2025, mainly due to uncorrected refractive errors (poor vision caused by the need for glasses).

He also emphasised the importance of glaucoma screening, a leading cause of irreversible blindness, saying the ministry planned to expand glaucoma services to all states.

On a brighter note, Dr Mohd Azman said blindness rates among Malaysians aged 50 and above in the northern states dropped, from 1.5% in 2014 to

0.7% in 2025.

He said the ministry welcomed the World Health Organization's recommendations on the MySPECS 2030 project to provide vision screening for schoolchildren and communities as well as improve access to affordable spectacles.

The ministry project, which aims to meet the needs of those with uncorrected visual impairments by 2030, is implemented in partnership with providers who participate in the initiative.

Perak Health Department director Dr Feisul Idzwan Mustapha said the rise in diabetic retinopathy presented a new challenge together with Malaysia's growing

non-communicable disease burden.

He said the priority moving forward is prevention, with diabetes being effectively managed.

Globally, Dr Feisul Idzwan said, 2.2 billion people suffer from vision problems, adding that about half the cases could have been prevented or treated.

The two main causes are untreated refractive errors and cataracts, which, if treated early, could change a person's life.

Dr Feisul Idzwan said NES II (2014) reported that the blindness rate among adults in the country aged 50 and above was 1.2%, with untreated cataract (58.6%) as the

main cause, followed by diabetic retinopathy (10.4%).

With Perak being an ageing state and Ipoh and Taiping often called retirement towns, this resulted in a growing demand for ophthalmology services.

"At Hospital Raja Permaisuri Bainun (HRPB) in Ipoh, over 3,598 cataract surgeries and 73,000 outpatient visits are recorded annually, which is among the highest in Malaysia."

To manage the high caseload, he said non-complex cataract cases have been decanted to Hospital Sungai Siput, allowing HRPB to focus on complex cases and reduce waiting times.

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MMA sounds alarm over boom in unregulated telehealth

PETALING JAYA: The Malaysian Medical Association (MMA) is concerned over a lack of regulatory enforcement in the telemedicine industry as it becomes over-commercialised by corporations and third-party administrators (TPA).

The association said this comes after a series of seemingly unregulated commercial-driven changes were made by corporations and TPAs in recent weeks.

This included a doctor reportedly providing instructions on the use of local anaesthesia through non-clinical channels, and a new collaboration between an insurance company and a pharmacy group offering 24/7 telehealth services.

"The announcement raises serious questions about who will be ensuring clinical accountability, continuity of care and adherence to professional standards.

"Some are even providing clinical directives or prescriptions through platforms that do not guarantee adequate assessment or follow-up.

"The concern is not with technology itself, but with the lack of regulatory enforcement and the growing commercialisation of clinical decisions," it said in a statement yesterday.

MMA said this highlighted a core weakness of the Malaysian Medical Council's (MMC) ethical guidelines on telemedicine – enforcement remains complaint-driven, so unless a patient reports a problem, no action will be taken by the MMC.

It said this will create an environment where doctors may unknowingly or willingly compromise their duty of care under corporate pressure. To remedy this, it reminded all medical professionals to apply the same ethical and professional standards regardless of whether a consultation is face-to-face or online.

"Every diagnosis, prescription or medical decision carries legal and moral accountability. Convenience and cost savings can never justify cutting corners in patient care," it added.

MMA also expressed concern over recent actions by corporate entities and TPAs that interfere with medical judgment and patient care.

It urged the government to close regulatory loopholes around teleconsultation and corporate healthcare arrangements by strengthening oversight mechanisms to protect patients, ensure transparency, and hold both doctors and corporate organisations involved accountable for breaches in ethics or safety.

Meanwhile, the Association of Private Hospitals Malaysia has backed the Health Ministry's reminder to safeguard clinical independence in private healthcare.

Its president Datuk Dr Kuljit Singh said that while cost containment in healthcare is complex and involves many variables, patient safety must take precedence.

'Surging numbers of children vaping'

E-CIGARETTES are fuelling an "alarming" new wave of nicotine addiction, with millions of children now hooked on vaping, the World Health Organisation warns.

In countries that have the data, children are on average nine times more likely than adults to vape, says the UN health agency.

The industry, it says, is promoting vapes as supposedly less harmful products than cigarettes — but in fact is aggressively targeting young people and getting children addicted.

More than 100 million people are vaping, according to WHO's first global estimate of e-cigarette use.

They include at least 86 million adults, mostly in high-income countries — and at least 15 million children aged 13 to 15.

"E-cigarettes are fuelling a new wave of nicotine addiction," Etienne Krug, WHO's director of health determinants, promotion and prevention, says in a statement.

"They are marketed as harm reduction but, in reality, are hooking kids on nicotine earlier and risk undermining decades of progress."

GLOBAL FIGURES DOWN

Globally, people are smoking less, with the number of tobacco users dropping from 1.38 billion in 2000 to 1.2 billion in 2024, while the world's



More than 100 million people are vaping and this includes at least 86 million adults and at least 15 million children aged 13 to 15. PICTURE CREDIT: DROBOTDEAN — FREEPIK

population has swelled.

However, one in five adults worldwide are still addicted to tobacco.

"Millions of people are stopping, or not taking up, tobacco use thanks to tobacco control efforts," WHO chief Tedros Adhanom Ghebreyesus says

in the statement.

In response, the tobacco industry "is fighting back with new nicotine products, aggressively targeting young people", Tedros adds.

Twelve countries are seeing tobacco use rising, the WHO said in

its global report on trends in tobacco use prevalence.

"These reversals... represent millions more people at risk of disease, disability and premature death," says WHO assistant director-general

Jeremy Farrar.

Worldwide, smoking reduction is happening more quickly among women than men.

'SUBTLE' ONLINE ADS

Farrar says tobacco use is killing more than seven million people every year, while second-hand smoke kills over one million.

Smoking damages "every single part of the body", he says and adds that doing it indoors around children is "irresponsible and unacceptable".

Around 40 million children aged 13 to 15 currently use tobacco, or one in 10, he says.

In some countries, children were "well under 10" when they started using tobacco, says Alison Commar, the global report's lead author.

She warns that children are being "very heavily exposed" to tobacco advertising online.

"It's really subtle. It's very difficult to regulate," says Commar, with social media influencers using products while discussing something else.

She adds that e-cigarettes are "very much a gateway for young people to move later into tobacco, or to maintain a nicotine addiction as they grow older".



WHO urges ramping up fight against drug-resistant superbugs

THERE are not enough new tests and treatments in the pipeline to tackle the growing spread of drug-resistant bacteria, the World Health Organisation warns.

WHO says the increasing prevalence of antimicrobial resistance (AMR) — particularly the growing resistance of harmful bacteria to antibiotics — is one of the top global public health threats, and is thought to cause more than a million deaths annually.

The UN health agency says the misuse and overuse of antimicrobials, including antibiotics, antivirals and antifungals, in humans, animals and plants are the main drivers of drug resistance, with AMR having a disproportionate burden in low- and middle-income countries.

In twin reports on new tests and treatments for bacterial infections, the WHO warns that far too little is in development.

"Antimicrobial resistance is escalating, but the pipeline of new treatments and diagnostics is insufficient to tackle the spread of drug-resistant bacterial infections," says WHO assistant direc-

tor-general Yukiko Nakatani.

"Without more investment in research and development, together with dedicated efforts to ensure that new and existing products reach the people who most need them, drug-resistant infections will continue to spread."

AMR is defined by WHO as occurring when microorganisms such as bacteria, viruses and parasites no longer respond to antimicrobial drugs.

DUAL CRISIS

WHO began tracking the development of antibacterial agents in 2017.

Since then, 17 new antibacterial agents against priority bacterial pathogens have obtained market authorisation.

In its last update in 2023, there were 97 antibacterials in the clinical pipeline — those being tested on humans.

That number has now dropped to 90, WHO warns.

"The pipeline faces a dual crisis: scarcity and lack of innovation. Among the 90 antibacterials in development, only 15 qualify as innovative," it says.

As for the preclinical pipeline — yet to be tested on humans — around 232 projects are in development.

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SCAN ME



Misuse and overuse of antimicrobials, including antibiotics, antivirals and antifungals, in humans, animals and plants are the main drivers of drug resistance. PICTURE CREDIT: JANNOON028 — FREEPIK

When diet could cause hair loss

What you eat, or don't eat, could have an influence over how thick your crowning glory is.

By CINDY KRISCHER GOODMAN

IT MAY not be age that is making your hair thin or fall out, but rather what you are eating and drinking.

New research shows certain foods contribute to hair loss, and others help with hair growth.

Sugar-sweetened beverages and alcoholic drinks are associated with a higher risk of hair loss, according to research published in the journal *Nutrition And Health*, which analyzed 17 studies on diet and hair.

"When we consume high amounts of sugar, we get an insulin spike that promotes inflammation and can disturb the natural hair growth cycles," explains registered dietitian and University of Florida associate professor of food science and human nutrition Laura Acosta.

"With alcohol, it's not that it necessarily directly causes hair shedding itself, but it does contribute to nutrient deficiency, nutrient malabsorption, liver stress, poor sleep and systemic inflammation — all of which can wreak havoc on hair growth."

Not consuming enough protein can also lead to hair loss.

Assoc. Prof. Acosta says a person needs to take in half a gramme of protein per pound of body weight each day.

"We tend to be more protein-deficient than we think," says obstetrician and gynaecologist Dr. Jila Benenior.

The Miami-based menopause specialist adds that hair shedding, hormones and diet are all interrelated.

Foods that can help with healthy hair and hair growth include soy-based nourishment like edamame or tofu, and cruciferous veggies like broccoli or cauliflower, which can reduce the risk of hair loss.

Nutritionists believe this is likely due to the antioxidant and anti-inflammatory properties of their phytochemicals, such as isothiocyanates and carotenoids.

Additionally, periwinkle leaf has been studied and found to be linked to improvements in both hair density and thickness.

Periwinkle leaf contains antioxidants like quercetin that improve blood flow to the scalp.

You can drink it in tea or take as oral supplement.

While most studies in this new review primarily included women, one

study involving 74 men with male pattern baldness found greater hair growth in a group that consumed 600mg of pumpkin seed oil for 24 weeks, compared to a placebo group.

Researchers believe the reason for the hair growth may be hormonal as pumpkin seed oil may decrease dihydrotestosterone (DHT), a hormone known to affect hair follicles and cause hair thinning.

When it comes to supplements, vitamin D has been the most studied.

At least five studies analysed in this review found that higher vitamin D levels may be protective against hair loss.

Assoc. Prof. Acosta said 2,000 international units (IU) would be a good dose to aim for, noting there is risk for toxicity if someone takes too much.

Another supplement to consider is iron.

One study showed that iron supplementation (in the form of 100mg tablets) improved hair growth in women.

Dr. Benenior says that if someone is iron-deficient and wants to take supplements, she suggests taking them with vitamin C, which can help increase iron absorption.

She points out that certain foods are good sources of iron, including spinach, lentils and almonds.

Assoc. Prof. Acosta recommends having your iron levels tested along with your zinc and biotin (vitamin B7) levels because deficiencies can cause hair loss or thinning.

Adults need 30mcg of biotin daily.

It can be found in foods like meats, eggs, fish, seeds, nuts and vegetables like sweet potatoes.

"If you're not biotin deficient though, taking biotin supplements is unlikely to help your hair," she notes.

Recently, research has been focused on collagen for hair growth.

"There is some exciting research going on around collagen supplements that a few years ago I probably would have dismissed, but now it really has my attention," she says.

For the newly-published review, the studies included involved 613,520 individuals, mostly females, ranging in age from seven to 77 years old.

"These were observational studies, meaning that we saw associations, but we can't necessarily prove causation from these types of studies," Assoc. Prof. Acosta points out.

— South Florida Sun-Sentinel/Tribune News Service

Hair loss can be influenced by a number of factors, including certain types of foods and nutrients. — TNS