NST 23/10/2025 MS/2

Mask up as influenza cases are rising

The importance of being cautious

MALAYSIA may be in the post-pandemic phase of Covid-19, but another rapidly rising virus — Influenza A subtype H3N2 — is compelling us to go back to our good old preventive measures such as hand hygiene and masking up in public places. According to Monash University molecular virologist Associate Professor Dr Vinod Balasubramaniam, who spoke to the *New Straits Times* on Monday, the virus has been prominent across parts of Asia in recent weeks. Singapore, Cambodia and Vietnam are some of the Southeast Asian countries that have seen a surge in the virus. 'The Malaysian surge of recent vintage reflects regional trends as the presence of the virus globally is from low to moderate level, in the view of the virologist. According to a Bernama report that quoted the Health Ministry a fortnight ago, all states and federal territories have recorded rising cases, with the five highest being Selangor, Kuala Lumpur, Putrajaya, Johor and Kedah. Most of the cases were reported in schools: kindergarten, primary, secondary and private schools. All in all, 97 influenza clusters were reported for the Epidemiological Week 40/2025.

There is no reason to panic though, as the Health Ministry says the increase in transmission reflects a seasonal trend, which remains under control. Understandable assessment, given that influenza is a mild illness — common during dry and wet seasons — that usually resolves itself within a week, some doctors say. But it can be serious for high-risk groups such as children, pregnant women, the elderly and people with chronic illnesses. Preventive measures are key for such high-risk groups. One such measure is to get a flu jab. But why the surge? To Vinod, it is largely due to post-pandemic social mixing, including increased travel, tourism and the return to full in-person schooling. Here is a revision course as the doctor has ordered on how to curb the surge of the virus. But first, how it spreads. H3N2, like Covid-19, spreads through the air at close range and via contaminated hands and surfaces. Children, who generally have weaker immunity than adults, are efficient transmitters, meaning they allow for rapid surge of infection. Here are some red-flag symptoms for children and adults, as highlighted by Vinod. For children, they are fast or laboured breathing, bluish lips or face, chest pain, ribs pulling in with each breath, severe muscle pain, dehydration and persistent fever. For adults, they include difficulty in breathing or shortness of breath, chest or abdominal pain, confusion, seizures, lack of urination, severe weakness or unsteadiness or symptoms that initially improve but then worsen.

> ***But some Malaysians love to throw caution to the wind and make people pay the price for their neglect.***

Now for the how to. Stay home if unwell, wear a mask in crowded indoor settings during infection surges, ensure good ventilation and practise hand hygiene, is Vinod's advice. But some Malaysians love to throw caution to the wind and make people pay the price for their neglect. Harsh words, but true. We saw this during the Covid-19 pandemic in public places such as malls and restaurants, and we are seeing it again during the Influenza A surge. Experience is a good teacher, but when it comes to the recalcitrant, it, too, fails. To them we say this: don't be fooled by flu-like illnesses.

Saringan payudara elak risiko kanser, beri keyakinan wanita

Pengesanan awal faktor paling penting tingkatkan kadar hidup pesakit

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Kanser payudara kekal sebagai kanser utama yang dialami wanita di Malaysia dan berdasarkan Pertubuhan Kesihatan Sedunia (WHO), satu daripada 20 wanita berisiko menghidapinya.

Pakar Bedah Payudara dan Endokrin, Pusat Perubatan Sunway, Dr Nani Harlina Md Latar, berkata tahap kesedaran dan langkah proaktif untuk mengambil sebarang tindakan bagi mendapatkan rawatan kanser payudara masih belum berada pada tahap memuaskan.

Katanya, satu kajian kebangsaan turut mendedahkan, tujuh daripada sepuluh wanita percaya saringan hanya perlu dilakukan apabila gejala muncul.

Selain itu katanya, sebahagian lagi mengelak daripada pemeriksaan kerana takut atau tidak suka dengan suasana hospital.

"Satu pertiga kes kanser dapat dicegah melalui gaya hidup sihat, manakala satu pertiga lagi boleh dirawat dengan lebih berkesan jika dikesan awal.

"Saringan payudara bukan sesuatu yang menakutkan, tetapi ia memberi kuasa dan keyakinan kepada wanita.

"Wanita sepatutnya perlu berasa yakin menjalani pemeriksaan dengan mengetahui, setiap alat berharga yang dibangunkan adalah untuk kesihatan dan kesejahteraan mereka," katanya pada Majlis Pelancaran Kempen 'Stop That Dot Together' di sini, baru-baru ini.

Dr Nani berkata, lebih membimbangkan trend semasa menunjukkan, peningkatan kes dalam kalangan wanita muda berusia 45 tahun ke bawah iaitu satu kumpulan yang sebelum ini dianggap berisiko lebih rendah.

Oleh itu katanya, pengesanan awal adalah faktor paling penting untuk meningkatkan kadar hidup pesakit.

"Malangnya, ramai wanita muda masih datang lewat kerana menyangka perubahan pada payudara mereka tiada apa-apa.

"Ramai pesakit pula mengaku, mereka sedar ada ketulan selama empat atau lima bulan, tetapi beranggapan ia normal, namun apabila datang ke hospital keadaan sudah pada tahap lebih serius," katanya.

Beliau berkata, ramai yang hanya berjumpa doktor apabila sudah ada simptom.

Katanya, saringan awal sepatutnya dibuat sebelum terdapat sebarang simptom dan jika sudah ada ketulan, sakit atau lelehan ia didiagnosis sebagai kanser.

Katanya, kini, hampir 30 peratus pesakit kanser payudara adalah wanita berusia 45 tahun ke bawah.

"Golongan ini menghadapi cabaran lebih besar kerana mereka masih bekerja, membina kerjaya, berkeluarga dan membesarkan anak-anak," katanya.

Mammogram kaedah utama

Menurut Dr Nani, mammogram adalah kaedah saringan utama dan ia boleh mengesan mikrokalsifikasi iaitu tanda prakanser (DCIS) yang belum menjadi ketulan.

Beliau berkata, ultrasound pula sebaliknya, ia hanya dapat mengesan ketulan biasanya di Tahap 1 dan bukan untuk saringan awal.

"Ultrasound mudah dibuat, tetapi risiko salah tafsir tinggi jika dilakukan oleh sonografer tanpa latihan mendalam jadi mammogram kekal sebagai keutamaan.

"Malah, teknologi terbaru iaitu 3D tomosynthesis, menjadikan mammogram lebih tepat dan kurang menyakitkan berbanding mesin lama," katanya.

Dr Nani amat menggalakkan semua wanita menjalani pemeriksaan sendiri payudara setiap bulan.

Katanya, masa terbaik untuk menjalani pemeriksaan adalah pada hari ketujuh hingga 10 kitaran haid, manakala bagi wanita menopaus pula boleh memilih satu tarikh tetap setiap bulan.

"Semakin kerap dilakukan, semakin peka seseorang terhadap perubahan tubuh sendiri," katanya.

Beliau menegaskan, kanser payudara bukan sahaja membabitkan pesakit itu sahaja, tetapi juga keluarga. Justeru, lebih awal ia dapat dikesan, lebih mudah dirawat dan peluang untuk sembuh.

> "Wanita sepatutnya perlu berasa yakin menjalani pemeriksaan dengan mengetahui, setiap alat berharga yang dibangunkan adalah untuk kesihatan dan kesejahteraan mereka"

Dr Nani Harlina Md Latar, Pakar Bedah Payudara dan Endokrin, Pusat Perubatan Sunway

"Kalau tak sihat, jangan paksa diri"

Ustaz Daud Che Ngah kongsi pengalaman 50 tahun iringi jemaah haji

SHAH ALAM

LAPORAN MUKA DEPAN

Ustaz Daud menjelaskan sekatan yang dikenakan Arab Saudi selaras dengan maqasid syariah.

Kalau tak sihat, jangan paksa diri, pesan Datuk Md Daud Che Ngah yang sudah lebih 50 tahun mengiringi jemaah haji.

Bagi Pengerusi Eksekutif Andalusia Travel & Tours yang dikenali sebagai Ustaz Daud itu, syarat kesihatan ketat yang diperkenalkan kerajaan Arab Saudi bagi musim haji 1447H/2026M bukan sekadar peraturan baharu, tetapi peringatan besar tentang makna sebenar istito'ah iaitu kemampuan untuk beribadah dengan tubuh dan jiwa yang kuat.

Beliau berkata, seseorang itu wajib menunaikan haji hanya apabila memenuhi enam syarat utama, antaranya mempunyai kemampuan kewangan, kenderaan pergi dan balik yang selamat serta sihat tubuh badan.

Beliau memberitahu, dalam hadis banyak menyebut perkara tersebut dan tidak boleh dipandang ringan.

"Hadis pun banyak sebut kena sihat tubuh badan untuk tunaikan haji kecuali jika jatuh sakit selepas tiba di Tanah Suci, itu lain ceritanya. Kalau sakit dari awal tidak boleh pergi.

"Kalau pergi dalam keadaan tidak sihat, akhirnya tidak dapat berwukuf di Arafah, ibadah hajinya tidak sah. Ada jemaah sampai ke Arafah cuma 15 minit, sedangkan wukuf itu ibadah utama yang perlu dilakukan dengan sempurna," ujarnya kepada *Sinar Harian*.

Sebelum ini, Lembaga Tabung Haji dalam satu kenyataan memaklumkan, pihak Arab Saudi telah menetapkan beberapa syarat baharu kepada bakal jemaah haji sebelum layak memperoleh visa bagi musim haji akan datang.

Antara syarat utama yang ditetapkan ialah jemaah mesti bebas daripada penyakit berjangkit atau penyakit kronik yang tidak terkawal serta berupaya melaksanakan ibadah haji secara kendiri tanpa bergantung kepada orang lain.

Bakal jemaah tidak layak menunaikan haji sekiranya disahkan menghidap penyakit atau menghadapi masalah kesihatan.

Sementara itu, Md Daud berkata, berdasarkan pengalaman beliau pengalaman membawa jemaah haji selama lima dekad mendapati mereka yang sudah mempunyai penyakit kronik akan mudah jatuh sakit.

"Sudah 50 tahun saya bawa jemaah haji, berdasarkan pengalaman orang sakit biasanya mereka akan sihat selama lima hari, atau paling lama 10 hari dan kemudian mereka akan jatuh sakit.

> *"Hadis pun banyak sebut kena sihat tubuh badan untuk tunaikan haji kecuali jika jatuh sakit selepas tiba di Tanah Suci, itu lain ceritanya. Kalau sakit dari awal tidak boleh pergi."*

"Apabila jemaah jatuh sakit, ia bukan sahaja menyusahkan diri sendiri, tetapi turut melibatkan pegawai Tabung Haji yang terpaksa menghantar dan menunggu pesakit di hospital. Ini juga menjejaskan fokus ibadah," katanya.

Sehubungan itu, beliau menyifatkan sekatan terhadap jemaah yang tidak sihat untuk menunaikan haji adalah langkah relevan dan selaras dengan maqasid syariah, iaitu menjaga kemaslahatan dan keselamatan umat Islam.

"Kesihatan memainkan peranan besar dalam ibadah haji. Kalau guna kerusi roda pun, siapa yang akan tolak sejauh tiga kilometer semasa melontar? Akhirnya perlu upah orang lain pula," katanya.

SYARAT KESIHATAN BAKAL JEMAAH HAJI MUSIM 1447H/2026M

Penetapan syarat diumumkan Kementerian Haji dan Umrah Arab Saudi serta perlu dipatuhi jemaah bagi memperoleh visa haji

Bakal jemaah juga perlu lulus pemeriksaan kesihatan KKM sebelum layak menerima tawaran menunaikan haji

SYARAT KESIHATAN

- ✓ Bebas penyakit berjangkit, penyakit serius atau kronik tidak terkawal
- ✓ Mampu menjalankan ibadah haji dengan sendiri

DIANGGAP TIDAK LAYAK JIKA MENGALAMI:

- Kegagalan buah pinggang kronik
- Kegagalan jantung atau penyakit jantung serius
- Penyakit hati atau paru-paru kronik
- Masalah neurologi/mental menjejaskan fungsi kognitif/ motor
- Warga emas dengan demensia/ fizikal lemah
- Kehamilan berisiko tinggi
- Penyakit berjangkit aktif
- Penyakit kanser dalam rawatan

KHIDMAT KESIHATAN TH

Klinik pesakit luar & farmasi disediakan di semua bangunan penginapan jemaah di Makkah & Madinah

225 petugas kesihatan KKM bertugas sepanjang musim haji

Rawatan lanjut akan dirujuk ke **hospital kerajaan Arab Saudi dengan pemantauan pakar KKM**

KKM - Kementerian Kesihatan Malaysia

Sumber: Tabung Haji (TH)

Diterbitkan: 21 Okt 2025
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Sinar harian 23/10/2025 ms/3

Sinar Harian
TELUS & TULUS • MATA DAN TELINGA RAKYAT • PEMACU PERUBAHAN

Dibenar jalani pemeriksaan mental

Pelajar tikam rakan sekolah didakwa mengikut Seksyen 302 Kanun Keseksaan

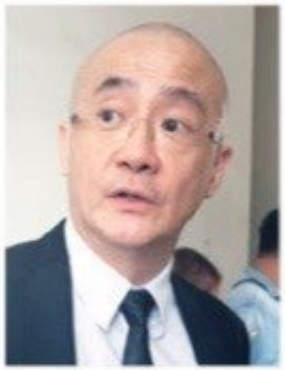
Oleh NOOR AZLIDA ALIMIN
PETALING JAYA

Mahkamah Majistret di sini pada Rabu membenarkan pelajar Tingkatan Satu (kelas peralihan) yang dituduh membunuh seorang pelajar perempuan berusia 16 tahun menjalani pemeriksaan mental di Hospital Bahagia Ulu Kinta di Tanjung Rambutan, Perak.

Majistret, Amira Sariaty Zainal memutuskan demikian selepas peguam, Kitson Foong selaku amicus curiae iaitu sahabat mahkamah memohon supaya remaja berusia 14 tahun itu, dinilai oleh pakar perubatan.

Ketika ditemui di luar mahkamah, Kitson yang membantu peguam tertuduh tersebut berkata, permohonan dibuat mengikut Seksyen 342 Kanun Tatacara Jenayah.

Seksyen itu ialah berkaitan prosedur bagi tertuduh yang disyaki tidak sempurna akal, yang membolehkan mahkamah menjalankan siasatan atau perbicaraan berdasarkan kepada ketidaksempurnaan akal tertuduh.


KITSON

Kitson berkata, permohonan dibuat kerana mahu memastikan dia menerima rawatan selain memastikan tertuduh tidak berisiko untuk mencederakan diri sendiri.

"Pemeriksaan psikiatri perlu bagi memastikan sama ada dia mampu membuat pengakuan dan memahami pertuduhan yang dihadapi.

"Paling penting ialah keadaan fikirannya ketika melakukan kesalahan itu," kata peguam selepas prosiding.

Beliau berkata, ketika didakwa membunuh, remaja berkenaan kelihatan tenang namun banyak mendiamkan diri.

Memandangkan kes ini melibatkan remaja bawah umur, maka beliau berkata, ibu bapa tertuduh menemaninya ketika berada di luar kandang tertuduh.

Mengikut pertuduhan, tertuduh tersebut didakwa membunuh seorang pelajar Tingkatan Tiga (kelas peralihan) di bilik tandas nombor dua sebuah sekolah menengah di Bandar Utama di sini antara jam 9.20 dan 9.35 pagi pada 14 Oktober lalu.

Dia didakwa mengikut Seksyen 302 Kanun Keseksaan, yang membawa hukuman gantung atau penjara seumur hidup atau tempoh tertentu, jika sabit kesalahan.

Tiada pengakuan direkodkan kerana kes bunuh berada di bawah bidang kuasa Mahkamah Tinggi.

Ibu mangsa dalam sidang akhbar Khamis lalu mendakwa anak perempuannya itu ditikam lebih 200 kali.

thesun 23/10/2025 ms/11

Eradicate poverty at home before we look abroad

POVERTY is still a pressing social issue in our country. Despite development in many areas, there are still pockets of citizens living on the streets and in dilapidated homes, often overlooked by society.

The government has taken commendable steps to eradicate hardcore poverty, and it is commendable that the prime minister has reaffirmed his commitment to this cause. However, more coordinated and sustained efforts are needed at every level to ensure meaningful change.

Local leaders, village heads and elected representatives must be fully aware of the conditions in their constituencies.

They should actively identify squatters and families living in poverty and work with social welfare officers and volunteers to provide targeted assistance. No family in need should fall through the cracks.

Poverty must become a top priority for every state government. In a nation where foreign workers arrive in large numbers seeking opportunity, it is disheartening to see our own citizens struggling in such dire conditions.

Some homes lack basic necessities, like clean water and electricity. Some live in makeshift shelters under bridges, parks or on sidewalks. Many of them depend on soup kitchens and NGOs to feed them.

Sick and impoverished citizens cannot afford medical care and are left to fend for themselves.

We are not yet a rich nation or fully developed country. We have a host of social, welfare and health concerns. What is particularly troubling is that while some organisations pour resources into foreign missions and causes, many of our own people go without food, shelter or clothing. That money could be better used to uplift the lives of our fellow citizens who need it most.

Let us focus our efforts on improving what we already have. We need more hospitals to ease overcrowding, better prison and rehabilitation facilities, and improved conditions in our public schools.

We must do more for senior citizens struggling with meagre pensions and for single mothers working tirelessly to feed their children and keep a roof over their heads. Before we extend our hand to help others abroad, let us first wipe out the malaise among our people. Eradicating hardcore poverty must be our utmost priority.

We are blessed with natural beauty and vibrant cities that attract countless tourists. But in those same cities – Kuala Lumpur, Penang, Ipoh and Malacca – visitors also encounter visible poverty. The contrast between luxury hotels and street beggars paints a troubling picture.

Zero poverty should be the ultimate goal in our quest for quality living. And as the saying goes, charity begins at home.

Samuel Yesuiah
Seremban

Despite development in many areas, there are still pockets of citizens living in dilapidated homes, often overlooked by society. – ***BERNAMAPIC***

Research finds AI assistants make errors reporting news

They misrepresent content in nearly half their responses

GENEVA: Leading AI assistants misrepresent news content in nearly half their responses, according to new research published yesterday by the European Broadcasting Union (EBU) and the BBC.

The international research studied 3,000 responses to questions about the news from leading artificial intelligence assistants – software applications that use AI to understand natural language commands to complete tasks for a user.

It assessed AI assistants in 14 languages for accuracy, sourcing and ability to distinguish opinion versus fact, including ChatGPT, Copilot, Gemini and Perplexity.

Overall, 45% of the AI responses studied contained at least one significant issue, with 81% having some form of problem, research showed.

Reuters has made contact with the companies to seek their comment on the findings.

Gemini, Google's AI assistant, has stated previously on its website that it welcomes feedback so that it can continue to improve the platform and make it more helpful to users.

OpenAI and Microsoft have previously said hallucinations – when an AI model generates incorrect or misleading information, often due to factors such as insufficient data – are an issue that they are seeking to resolve.

Perplexity says on its website that one of its "Deep Research" modes has 93.9% accuracy in terms of factuality.

A third of AI assistants' responses showed serious sourcing errors such as missing, misleading or incorrect attribution, according to the study.

Some 72% of responses by Gemini, Google's AI assistant, had significant sourcing issues, compared to below 25% for all other assistants, it said.

Issues of accuracy were found in 20% of responses from all AI assistants studied, including outdated information, it said.

Examples cited by the study included Gemini incorrectly stating changes to a law on disposable vapes and ChatGPT reporting Pope Francis as the current Pope several months after his death.

Twenty-two public-service media organisations from 18 countries including France, Germany, Spain, Ukraine, Britain and the United States took part in the study.

With AI assistants increasingly replacing traditional search engines for news, public trust could be undermined, the EBU said.

"When people don't know what to trust, they end up trusting nothing at all, and that can deter democratic participation," EBU media director Jean Philip De Tender said in a statement.

Some 7% of all online news consumers and 15% of those aged under 25 use AI assistants to get their news, according to the Reuters Institute's Digital News Report 2025.

The new report urged AI companies to be held accountable and to improve how their AI assistants respond to news-related queries. – Reuters

Hiking tragedy renews hypothermia concerns

Altitude, rain and wind could pose danger even in tropical climate, says expert

BY **HARITH KAMAL**
newsdesk@thesundaily.com

PETALING JAYA: The recent death of a hiker at Gunung Liang in Perak has renewed awareness about the dangers of hypothermia, a condition often linked to cold countries but one that could occur even in Malaysia's highlands or during wet weather.

Universiti Kebangsaan Malaysia public health medicine specialist Prof Dr Sharifa Ezat Wan Puteh said hypothermia happens when the body's core temperature drops below 35°C, causing it to lose heat faster than it is able to produce.

"Hypothermia is defined as a body core temperature below 35°C, in which the body could no longer generate enough heat due to factors such as prolonged exposure or unconsciousness," she said, adding that normal body temperature is about 37°C.

She said mild hypothermia could be hard to detect as its symptoms may appear subtle.

"In mild hypothermia, there is shivering, impaired judgment and mental confusion. A person may appear pale, have a rapid heartbeat, cold skin and visible shivering, early signs that are often overlooked."

She also said moderate or severe hypothermia could quickly turn deadly.

"In moderate hypothermia, shivering stops, speech becomes slurred and confusion worsens. In severe cases, hallucinations may set in, blood pressure drops and the heart rate slows."

Sharifa said while hypothermia is not a major public health concern in Malaysia, hikers and the elderly remain vulnerable, especially at high altitudes.

"Temperature drops about 6°C for every 1,000m rise. If movement stops due to injury, the risk increases as the body can no longer produce its own heat."

Universiti Malaya Institute of Ocean and Earth Sciences senior research fellow Prof Dr Datuk Azizan Abu Samah said altitude, rain and wind could create dangerous conditions even in tropical climates.

"Increases in altitude, wind chill and humidity can make the temperature feel lower than it actually is."

He added that wet clothing, poor insulation and direct contact with the ground could accelerate heat loss.

"If your clothes are wet, your body loses heat faster. Cotton absorbs water, unlike wool which retains warmth. Sleeping without insulation or a fire also worsens heat loss."

Drawing from his survival training in Antarctica, he stressed the need for proper gear.

"In cold conditions, wear layered clothing made of wool or other insulating materials with a windproof outer layer. Areas that lose heat easily, such as the head and neck, should always be covered."

Experienced hiker Ahmad Firdaus Reezal, 34, said many underestimate the risk of hypothermia, believing it only happens in snowy countries.

"It could happen here too. In highlands such as Mount Irau, Murud or during long treks in Cameron Highlands, if you are wet, tired and exposed to wind, your body temperature could drop fast. It does not have to hit 0°C for hypothermia to set in.

"Whether it is sunshine or rain, always prepare for the worst. An emergency blanket, dry clothes and a waterproof jacket should be standard in your pack. Some thermal blankets cost just RM10 and they could save your life."

The tragedy at Gunung Liang underscores this warning. Last week, a hiker was found dead at the mountain's peak. The victim was discovered unresponsive by fellow hikers after enduring hours of rain and wind.

Prolonged exposure and inadequate clothing are believed to have caused his death, with rescuers confirming signs of severe hypothermia.

In Ipoh, Bernama reported that the Gunung Liang climbing site in South Perak has been closed to the public with immediate effect until further notice following the incident.

Sharifa said while hypothermia is not a major public health concern in Malaysia, hikers and the elderly remain vulnerable, especially at high altitudes. – *PIC COURTESY OF 5S HIKERS*

thesun 23/10/2025 ms/5

Sistem DERIA MANUSIA

Kenali 5 Deria Ini

MANUSIA ialah makhluk ciptaan Tuhan yang sangat kompleks dan unik. Salah satu sistem yang memainkan peranan penting dalam kehidupan seharian manusia ialah sistem deria. Sistem ini membolehkan kita menerima dan mentafsir rangsangan daripada persekitaran.

Tanpa sistem deria yang berfungsi dengan baik, manusia akan menghadapi kesukaran dalam menjalani kehidupan harian. Oleh itu, penting untuk kita memahami struktur dan fungsi sistem deria manusia.

Secara asasnya, terdapat lima deria utama dalam sistem deria manusia, iaitu penglihatan, pendengaran, sentuhan, rasa, dan bau. Setiap deria ini mempunyai organ khas yang membolehkannya berfungsi secara berkesan. Deria-deria ini bekerjasama dengan sistem saraf untuk menghantar maklumat ke otak dan membolehkan kita mentafsir rangsangan yang diterima.

Pertama ialah deria penglihatan, yang membolehkan kita melihat. Organ yang bertanggungjawab untuk deria ini ialah mata. Struktur mata terdiri daripada beberapa bahagian penting seperti kornea, kanta, retina dan saraf optik. Cahaya yang masuk ke dalam mata difokuskan ke retina yang mengandungi sel-sel sensitif terhadap cahaya. Seterusnya, isyarat ini dihantar ke otak melalui saraf optik dan ditafsirkan sebagai imej. Deria penglihatan amat penting dalam kehidupan seharian seperti membaca, menulis, dan mengenal pasti objek.

Selain itu, deria pendengaran membolehkan manusia mendengar bunyi dan berkomunikasi. Organ utama bagi deria ini ialah telinga, yang terdiri daripada tiga bahagian utama iaitu telinga luar, telinga tengah, dan telinga dalam. Gelombang bunyi ditangkap oleh telinga luar dan dihantar ke telinga dalam melalui gegendang telinga dan tulang-tulang kecil. Di telinga dalam, getaran bunyi akan ditukar menjadi impuls saraf dan dihantar ke otak. Deria pendengaran penting dalam pertuturan, pembelajaran, dan juga memberi amaran tentang bahaya di sekeliling kita.

Deria sentuhan adalah deria yang membolehkan kita merasai tekanan, suhu, dan kesakitan. Organ yang bertanggungjawab bagi deria ini ialah kulit, iaitu organ paling besar pada tubuh manusia. Kulit mengandungi banyak reseptor saraf yang sensitif terhadap pelbagai jenis rangsangan. Deria ini membolehkan kita merasa panas, sejuk, kasar, halus, dan juga sakit apabila terluka. Fungsi deria sentuhan penting untuk melindungi tubuh dan memberi maklumat tentang persekitaran fizikal.

Deria rasa pula merupakan deria yang membolehkan kita mengecam rasa makanan dan minuman. Organ utama bagi deria ini ialah lidah. Lidah mengandungi banyak putik rasa yang boleh mengesan lima jenis rasa asas iaitu manis, masam, masin, pahit, dan umami. Deria rasa juga membantu kita menikmati pelbagai jenis makanan dan mengesan makanan yang mungkin rosak atau beracun.

Deria bau juga adalah deria yang membantu kita mengenal pasti pelbagai jenis bau. Organ utama bagi deria ini ialah hidung. Di bahagian dalam hidung terdapat reseptor bau yang akan menghantar maklumat ke otak apabila mengesan bahan kimia dalam udara. Deria bau juga berfungsi bersama deria rasa untuk memberikan pengalaman makan yang lebih menyeluruh. Selain itu, ia juga penting dalam mengesan bahaya seperti bau gas atau asap.

Sistem deria manusia memainkan peranan yang sangat penting dalam membolehkan manusia berfungsi dengan baik dalam kehidupan harian. Setiap deria mempunyai struktur dan fungsi tersendiri yang saling melengkapi. Oleh itu, kita perlu menjaga kesihatan sistem deria dengan baik seperti tidak mendengar muzik terlalu kuat, menjaga kebersihan mata dan telinga, serta mengelakkan pendedahan kepada bahan kimia berbahaya. Kesedaran terhadap kepentingan sistem deria akan membantu kita menghargai nikmat yang tidak ternilai ini.

Ministry proposes 11 security steps

By ROWENA CHUA
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PETALING JAYA: The installation of CCTVs, deployment of new teachers and appointment of full-time hostel assistant wardens are among 11 additional measures the Education Ministry will soon implement to enhance safety and address disciplinary issues among students in all educational institutions under its purview.

In a media statement yesterday, the ministry said an additional allocation of RM5mil has been approved for the installation of CCTV cameras in selected schools nationwide.

"This is in addition to the RM3mil previously allocated for CCTV installation in schools," it said.

In addition, a total of 10,096 new teachers, including over 500 guidance and counselling teachers, will be assigned to schools nationwide beginning next month.

"This will help meet current needs and strengthen students' psychosocial support," the ministry said.

It added that a total of 600 full-time hostel assistant wardens will be appointed through the Malaysia Short-Term Employment Programme to improve the monitoring of hostel students' safety and reduce the workload of existing wardens.

"School-level collaboration committees will also be strengthened through cooperation with the Royal Malaysia Police (PDRM), including the role of school liaison officers.

"PDRM will conduct safety monitoring across all educational institutions under the ministry," it said.

Other measures include enhancing the function of the "Smart Support Team" at state education department and district education office levels to provide psychosocial assistance during crises.

"Teachers will continue to receive training and exposure to improve their preparedness in handling emergencies in schools.

"The roles of principals, headmasters and school discipline committees in addressing student disciplinary issues will also be strengthened.

"Currently, existing rules and guidelines empower schools to impose disciplinary actions such as caning, suspension and expulsion.

"Principals and headmasters may delegate authority to teachers to discipline students when needed. The ministry is currently reviewing and revising the student discipline regulations," it said.

The ministry also said that the Student Personality Development System will be reviewed and improved.

"Educational institutions are urged to give special attention to actions that need to be taken to address emerging discipline cases.

"Teachers' and students' voices must be heard. Schools should conduct dialogue sessions and discussions with teachers and students to identify their needs and concerns.

"The 'student voice box' initiative is aligned with child advocacy recommendations by Unicef," it said.

The ministry also said that the Child Protection Policy will be finalised soon to ensure the safety and protection of students in schools.

"The Education Ministry, in collaboration with the Health Ministry, will strengthen mental health screening programmes from Year One to Form Six, including continuous intervention and psychosocial support for students," it said.

The ministry reiterated its commitment to improving safety in educational institutions and addressing student disciplinary issues.

"All parties are urged to work together to realise the goal of creating a safe ecosystem in all educational institutions," it said.

Meanwhile, students and education activists handed a memorandum on school safety to the Education Minister outside Parliament.

Minister Fadhlina Sidek, who was accompanied by her deputy, Wong Kah Woh, received the memorandum outside Parliament's gates.

Several other ministry officials and security officers were also present, *Sinar Harian* reported.

The participants gathered outside Parliament around 11.20am yesterday after marching from nearby Taman Tugu.

The group waited around 40 minutes for Fadhlina, who briefly discussed the issues in the memorandum with a group representative.

Call for action: A student representative handing a memorandum to Fadhlina outside Parliament's gates.

The Star 23/10/2025 MS/6

Empathy can be a form of treatment

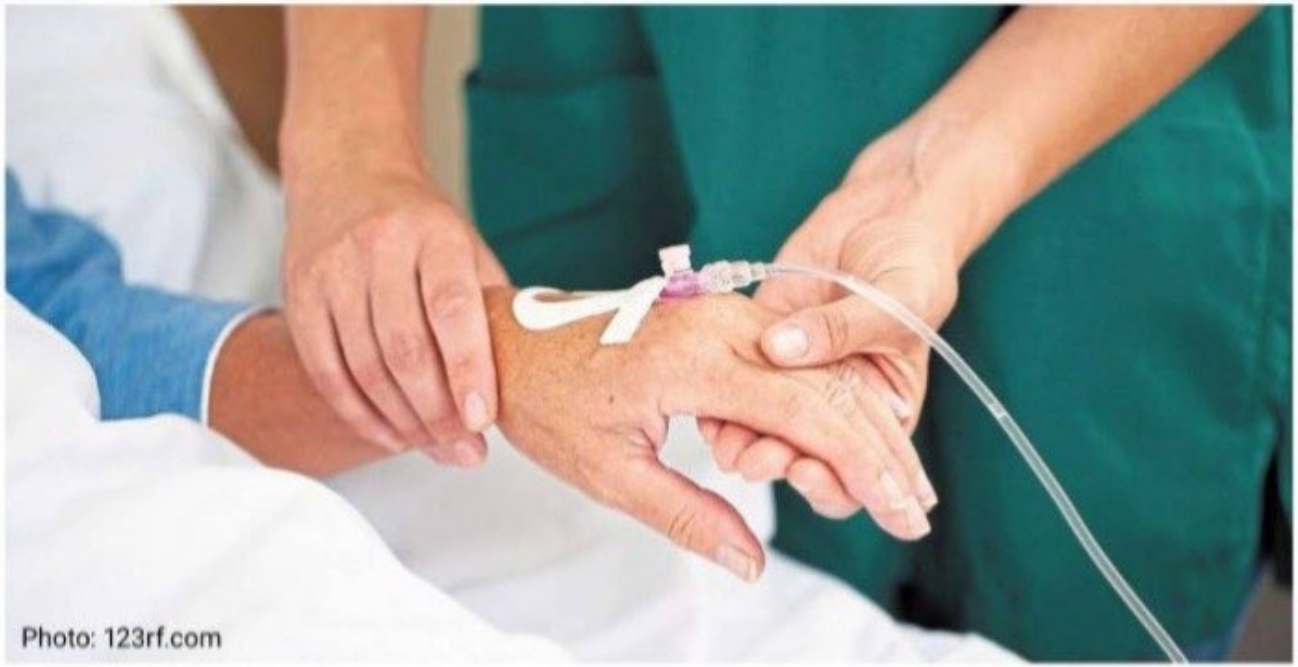

Photo: 123rf.com

IN cancer care, medical breakthroughs, from targeted therapies to AI-assisted diagnosis, always hog the limelight. But amid all this progress, there's one element that's irreplaceable: empathy drawn from cultural insight.

As healthcare becomes increasingly globalised and multicultural, cultural sensitivity is a must at the clinical level.

Cancer is not experienced in a vacuum; it is comprehended through culture. For the majority of patients, beliefs pertaining to their illness, decision-making roles of family members and even the stigma of diagnosis impact their response to treatment.

In multicultural Malaysia, such nuances are multiplied. Even with the best of intentions, a healthcare provider may unintentionally overlook significant cultural or religious preferences, thereby generating confusion or mistrust.

Language barriers also have measurable consequences. Studies show that cancer patients who don't speak English have less access to treatment options and also experience greater emotional distress.

If patients cannot understand what is being said, informed consent becomes incomplete. This is not just a communication failure but an ethical one as well.

While the concept of cultural competence has been discussed for decades, the future is cultural humility. This means recognising that no provider can ever be competent in another's person's culture. Instead, nurses and healthcare professionals will need to approach every interaction with a sense of curiosity, respect and reflection.

It's not about learning all the cultural codes; it's about listening intently enough to make each patient feel seen and heard. For example, breaking bad news is easier if there is awareness of a family's group decision-making style.

Or, when discussing palliative care, sensitivity to spiritual or cultural beliefs can turn an awkward conversation into a peaceful and dignified one.

Computer translation programmes and AI chatbots may be able to bridge language gaps, but technology is not a replacement for empathy.

AI can tell a cancer patient about the side effects of chemotherapy, but only a compassionate nurse can recognise the fear behind a patient's silence. Tech can extend life, but empathy makes life meaningful.

The challenge is thus to use technology judiciously – as a tool to facilitate, not replace, human communication.

In hospitals, the use of digital aids can be complemented with policies that ensure cultural safety, such as having interpreters available, and training staff in diversity and communication.

Cultural assessment must be included in every care plan, and cultural competence must be measured as rigorously as infection control.

At its essence, culturally responsive oncology care is all about asking one question: "If I see this patient tomorrow, what would I do differently to make him or her feel seen, heard and respected?"

When we combine science with compassion, we heal human beings.

HO SWEET LEE
and WONG LEE SIA
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Teacher loses RM446,000 to scammers

KUALA TERENGGANU: A teacher has lost RM446,200 after falling prey to a phone scam.

Kuala Terengganu OCPD Asst Comm Azli Mohd Noor said that on June 28, the 52-year-old victim received a phone call from a suspect claiming to be a representative of an insurance company.

He said the suspect told the victim he was involved in a fake medical claim worth RM12,000 before connecting him to an accomplice posing as a police officer for further action.

"The victim made 23 transactions amounting to RM446,200 to 16 different accounts between July 26 and Oct 19," ACP Azli said.

"He only realised he had been cheated after discovering that the documents presented to him were fake and that attempts to contact the suspect failed," he said in a statement, Bernama reported.

TS 23/10/2025 MS/9