

Regular health screenings vital

An early diagnosis can lead to better survival rate

By ARFA YUNUS
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PETALING JAYA: Malaysians have been urged to do regular health screenings as an early preventive measure to avoid late-stage cancer detection.

Health Minister Datuk Seri Dr Dzulkefly Ahmad said records show that more than 50,000 new cancer cases are reported every year in Malaysia, with the majority only detected at Stage Three or Four.

"This means that patients are already at an advanced stage by the time a diagnosis is made," he said during the Bald and Beautiful Day 2025 event at Lakeside Mall, Elmina, yesterday.

He pointed out that breast, colorectal, lung and prostate cancers are among the most frequently diagnosed in Malaysia.

He expressed hope that the Finance Ministry will allocate sufficient funds for the health sector

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in Budget 2026, which is set to be tabled on Oct 10.

"Typically, we are among the top two ministries receiving the largest allocations. This year, we received RM45.27bil," he said.

Dzulkefly said numerous screening initiatives have been jointly conducted by the National Cancer Society of Malaysia and several non-governmental organisations.

"The Health Ministry is also carrying out screenings through the Peka B40 and National Health Screening Initiative programmes.

"Our goal is to reach more than one million screenings to enable early detection of chronic diseases," he said.

He added that efforts to raise awareness on the importance of



Smooth shave: Dzulkefly (back row, centre) together with other attendees shaving the heads of participants of the Bald and Beautiful Day 2025 fund raising event. — RAJA FAISAL HISHAN/The Star

regular health screenings through community-level programmes should be further expanded.

Previously, the Health Ministry reported that over 60% of cancer patients in Malaysia were diagnosed at late stages (Stage Three and Four), leading to limited

treatment options, emotional stress, financial burden on families, and straining the national healthcare system.

Dzulkefly said this year's Bald and Beautiful Day event exceeded its fundraising target, collecting about RM320,000 to assist cancer

patients.

"The programme not only managed to raise over RM320,000, but also saw the participation of 267 individuals.

"More importantly, it served as a platform to raise awareness and health literacy on cancer," he said.

Majoriti pesakit kanser dikesan sudah lewat

Dr Dzulkefly (duduk, kiri) bersama sebahagian 267 peserta Program Bald & Beautiful Day 2025 membotakkan kepala sebagai simbol sokongan kepada pesakit kanser di sebuah pusat beli-belah di Shah Alam pada Ahad.



KKM sasar lebih sejuta saringan kesihatan awal

Oleh IZWAN ROZLIN
SHAH ALAM

Lebih 50,000 kes baharu kanser dilaporkan setiap tahun di Malaysia dengan majoritinya dikesan pada tahap 3 dan 4, kata Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad.

Beliau berkata, keadaan itu menunjukkan kebanyakan pesakit hanya mengetahui penyakit dihidapi pada peringkat lewat, sekali gus mengehadkan pilihan rawatan dan memberi kesan besar terhadap emosi serta kewangan keluarga.

Menurutnya, pelbagai program saringan dijalankan bersama

Persatuan Kanser Kebangsaan Malaysia (NCSM) dan beberapa pertubuhan bukan kerajaan (NGO) lain bagi meningkatkan kesedaran masyarakat.

"Kementerian Kesihatan Malaysia (KKM) turut melaksanakan saringan melalui Program Peka B40 dan Saringan Kesihatan Kebangsaan (NHSI).

"Matlamat kami adalah mencapai lebih sejuta saringan bagi mengesan penyakit kronik lebih awal," katanya ketika ditemui pada Program Bald & Beautiful Day 2025 di sebuah pusat beli-belah di sini pada Ahad.

Tambahnya, usaha meningkatkan kesedaran kepentingan saringan kesihatan di peringkat komuniti perlu diperluas bagi membolehkan pengesanan awal dilakukan.

Sebelum ini, KKM melaporkan lebih 60 peratus pesakit kanser di

negara ini hanya dikesan pada peringkat lewat, sekali gus meningkatkan beban terhadap sistem kesihatan negara.

Program Bald & Beautiful Day 2025 merupakan inisiatif kebajikan anjuran Yayasan Khind Starfish bertujuan memberi sokongan moral dan kewangan kepada pesakit kanser.

Dalam majlis itu, Dr Dzulkefly memaklumkan kutipan dana berjaya melepasi sasaran dengan jumlah keseluruhan kira-kira RM320,000 untuk membantu pesakit yang memerlukan.

"Program ini bukan sahaja berjaya mengutip dana lebih RM20,000, malah menyaksikan kehadiran 267 peserta.

"Lebih penting, ia menjadi platform meningkatkan kesedaran serta literasi kesihatan berkaitan penyakit kanser," katanya.

The future of medicine is digital

Robotic surgery often the best option for complex cases, say doctors

By DIVYA THERESA RAVI
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PETALING JAYA: Patients undergoing robotic surgery face less blood loss and faster recovery times compared to conventional surgery methods, says senior consultant obstetrician-gynaecologist Dr Sharifah Halimah Jaafar.

Robotic surgeries are needed to handle complex cases, she said.

"It is particularly useful in treating complex conditions like endometriosis, multiple fibroids, morbid obesity and uterus cancer.

"Unlike conventional methods, robotic arms can be angled and rotated with greater precision, allowing surgeons to reach areas that are difficult to access during complex procedures," said Dr Sharifah, who has conducted more than 100 robotic surgeries.

She acknowledged that she had common misconceptions about robotic surgery at first.

"But when I began doing it, it offered so many advantages, as I only needed to use my two index fingers on the console (machine)," she said.

"The robotic arms are attached with a camera that gives us a clear view, which prevents you from injuring other organs; thus, there is less blood loss in the patient.

"And with a higher precision of the angles, it's easier to tackle the disease," she added.

This, she said, facilitates a quicker recovery for the patient.

"Although it's expensive, it

reduces your long-term stay in hospital and improves long-term recovery," she said, noting that insurance companies should provide coverage for robotic surgeries.

For example, she said an obese patient requiring open surgery could be admitted for almost a week because of a wound infection.

"But with the robotic surgery, the patient can go home the next

day with less post-operation risks," she said.

She emphasised that surgeons must undergo structured local training to ensure seamless robotic surgery.

The three-day Picaso Robotic & MIS Exchange 2025 (Promise) conference, which began on Sept 26 and wrapped up over the weekend, raised awareness about the practices and innovations in robotic surgery.

It was hosted by Hospital Picaso (also known as the PJ Integrated Centre for Advanced Surgery and Oncology).

Surgeons from across the globe gathered for live surgeries and forums at the event, which was designed to boost Malaysia's standing in advancing robotic and minimally invasive surgery.

Dr Sharifah, who led the programme on the third day of the conference, provided her

insights into the application of robotic surgery for morbidly obese patients.

"Some patients who are overweight have thick abdominal walls, which can restrict the surgeon's manoeuvrability during the procedure.

"However, with robotic surgery, it becomes easier to access those areas without the risk of arms colliding or causing fatigue," she explained.



Safer operations:

A panel discussion on robotic surgery conducted with (from left) Dr Debbie Teh, Dr Loh Chit Sin, Datuk Dr Aziz Yahya, Fazleeza Azli, Dr Jennifer Jose and Dr Sharifah during the Promise 2025 conference. — LOW LAY PHON/The Star

'More funding needed for real-time audits, whistle-blower protection'

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are forced to bear the full cost," he said.

On governance, the Center to Combat Corruption and Cronyism (C4) called for greater allocations to strengthen investigation, prosecution and prevention of mega financial scandals such as 1MDB

and the littoral combat ship project.

C4 chief executive officer Pushpan Murugiah said Budget 2026 must show clear commitments to empower the Malaysian Anti-Corruption Commission with adequate funding and independence from political interference.

He said the National Audit

Department should be allowed to conduct real-time audits on mega projects and urged funding for effective whistle-blower protection backed by legal safeguards, security measures and financial support.

"Without actual budgetary allocations, anti-corruption reforms will remain empty rhetoric."

Pushpan stressed the budget must close the gap in data transparency to allow scrutiny by citizens, media and civil society.

"Digitalisation means nothing if contract awards remain at the discretion of ministers or politicians.

"Funds must be allocated for independent oversight commit-

tees," he said.

"Public funds must be returned to the people, not captured as political capital or elite profit," Pushpan said, adding that political financing reform should also be prioritised."

Budget 2026 will be tabled by Prime Minister Datuk Seri Anwar Ibrahim on Oct 10.

'Public health system ready for any eventuality'

PETALING JAYA: Despite concerns over a potential rise in infectious disease cases worldwide – fuelled by moves in some countries to roll back on vaccination mandates – Malaysians have no reason to panic, as the nation's health system is well-prepared to respond.

Universiti Teknologi Mara Faculty of Medicine public health medicine specialist and lecturer Dr Zahir Izuan Azhar said even as cases of measles climb globally, Malaysia's public health infrastructure provides strong protection.

"The Health Ministry has a good surveillance system, a fast-response public health team, and well-established preparedness measures to tackle vaccine-preventable disease threats," he told *theSun* via WhatsApp.

His comments followed news that Florida could become the first state in the US to eliminate all vaccine mandates, including requirements for children to be immunised

against diseases such as polio before entering public schools.

Zahir said Malaysia could face some risk if exemptions of this kind become more common in high-travel countries like the US.

"For example, if we look at measles, the national immunisation coverage of 95% in 2024 is high, but only 62% of districts achieved coverage above 95%.

"In districts where herd immunity is strong, a single imported case may cause only a small chain of infections that can be controlled. But in under-vaccinated populations, one imported case can lead to many secondary cases quickly and large outbreaks can occur within two or three weeks," he explained.

Still, Zahir stressed that Malaysia is fully equipped to handle such challenges, highlighting the ministry's comprehensive measures and preparations against infectious diseases.

He added that the ministry is currently carrying out a free supplementary

immunisation programme for measles and rubella nationwide, targeting children aged six to 59 months (4.9 years), to raise herd immunity to 95%.

"A Malaysian population with stronger herd immunity will definitely be less susceptible to vaccine-preventable diseases brought in from abroad," he said.

The Health Ministry launched the nationwide measles-rubella vaccination campaign on Aug 4 and it will run until Oct 12 for children born between Aug 1, 2020 and Jan 31, 2025.

The move comes in response to a surge in infections and reported deaths among unvaccinated children, with measles cases nearly doubling in 2024 and vaccination rates remaining low in some areas.

The ministry said the campaign is designed to boost herd immunity and support Malaysia's target of eliminating measles by 2030. The dose is available at all government health clinics. – By **IKHWAN ZULKAFLEE**

Concern over US state move to drop vaccine mandates

➤ Decision triggers calls for stricter health screening and proof of immunisation involving foreign visitors to safeguard against disease resurgence

BY IKHWAN ZULKAFLEE
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PETALING JAYA: With reports that Florida is moving to eliminate all vaccine mandates – including those requiring schoolchildren to be immunised against diseases such as polio – Malaysian parents are urging the government to consider tighter health checks at the country's borders.

Several parents told *theSun* that they believe requiring proof of vaccination for foreign visitors would be a reasonable precaution, particularly at a time when some countries are relaxing vaccination rules despite warnings of global disease resurgence.

Ainul Aziem Rahim, 38, a mother of two, stressed that Malaysia should not wait until an outbreak to act.

"Border health checks should be preventive, not reactive. Malaysia has already shown strong leadership during Covid-19 and similar vigilance now would protect children who haven't completed their vaccination schedules and those with weaker immune systems."

She suggested that systems such as the MySejahtera app, widely used during the pandemic, could be adapted for health declarations by incoming travellers.

"It's not about being extreme – it's about being practical. Visitors should declare their vaccination status. If they are unvaccinated against certain diseases of concern, then restrictions may be justified."

Another parent who only wanted to be known as Zubaidah, a homemaker and mother of five, echoed the sentiment but admitted to mixed feelings.

"Checks at the border are important, yes, but I also worry whether our hospitals could cope if a serious outbreak did occur."

"Doctors and nurses are already



Experts stress that border checks for foreigners should be seen as part of the country's wider defence to protect the health of citizens. – ADIB RAWI YAHYA/THE SUN

stretched thin."

She pointed to post-pandemic pressures such as rising flu cases and the burden of chronic illnesses, adding: "Strengthening our healthcare system should go hand in hand with border precautions."

Civil servant Adam (not his real name), 38, shared a similar perspective. While acknowledging Malaysia's relatively robust immunisation coverage, he cautioned against complacency.

"If vaccination rates continue to drop elsewhere, diseases could travel. Sometimes the imported strains may differ from what we are used to and that could complicate treatment."

He supported requiring proof of vaccination from incoming travellers, describing it as "a practical measure that reduces risks, protects vulnerable groups and avoids bigger healthcare costs later."

Public health experts have generally reassured that Malaysia is well-prepared,

with the Health Ministry maintaining strong surveillance systems and conducting supplementary immunisation campaigns, such as the ongoing nationwide measles-rubella programme for children.

They also said internationally, proof of vaccination for border entry is not new. Countries such as Uganda, Singapore and Tanzania still require certificates for yellow fever, while Saudi Arabia mandates meningococcal vaccination for pilgrims.

The World Health Organisation also lists other diseases – including polio, cholera and Japanese encephalitis – for which vaccination is recommended before travel.

Against this backdrop, parents emphasise that border health checks should be seen as part of Malaysia's wider defence, rather than a cause for alarm. As Ainul put it:

"It's like wearing a seatbelt – you hope you never need it, but it's better to have the protection than not."

Stronger hearts, longer lives

IN 2022, coronary artery disease (CAD) was the leading cause of medically certified deaths in Malaysia, according to the Department of Statistics.

By and large, CAD is a disease caused by several factors, says Cardiac Vascular Sentral Kuala Lumpur (CVSKL) consultant cardiologist Muthusamy, speaking in conjunction with World Heart Day.

One major factor is strong genetic predisposition, meaning the condition runs in the family.

But there are other contributing factors, diabetes, for example, that have increased the incidence of heart disease among younger people, particularly in this part of the world, he says.

Other associated conditions, like hypertension and high cholesterol levels, also play a role.

There is also an important social aspect to CAD — the way we conduct our lives.

For example, obesity, poor eating habits, lack of physical activity, smoking and a sedentary lifestyle all increase the risk.

All these factors contribute to the progression of coronary diseases.

Dr Tamil Selvan says in the most severe form, the plaques within the

tiny blood vessels can rupture and form blood clots, suddenly blocking blood flow to the heart and causing a major heart attack.

In other cases, the blockages can be insidious, blocking more than 70 per cent of arteries before people begin to feel discomfort or symptoms, often during physical exertion.

"The problem is that a lot of people can have severe disease and yet be relatively asymptomatic, and one day, suffer a major heart attack."

Malaysia's National Cardiovascular Disease Registry is compiled using data from government hospitals and some private hospitals, including

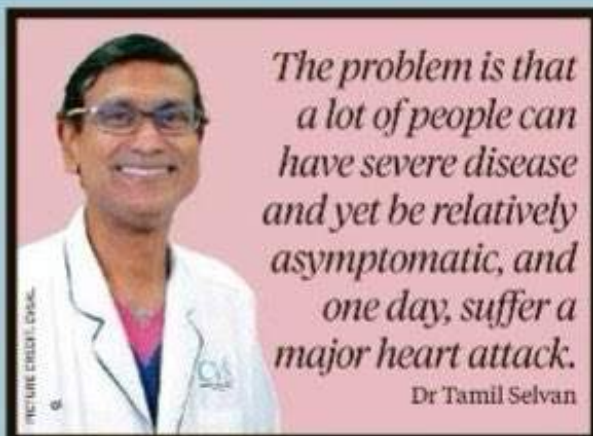
CVSKL.

YOUNG AND AT RISK

CVSKL consultant cardiologist Datuk Dr Rosli Mohd Ali says based on the latest report, one out of four patients is below 50 years of age. This is concerning because these are young patients.

Given this pattern, it's advisable that men more than 45 years of age, and females at 50 or even 45 and above, undergo health screenings to check their cholesterol, diabetes and blood pressure.

Those who are at higher risk need



The problem is that a lot of people can have severe disease and yet be relatively asymptomatic, and one day, suffer a major heart attack.

Dr Tamil Selvan

to undergo further tests.

"It's important to note that in about 20 per cent of patients, the first presentation would be a heart attack, and about one of five patients never reach hospital in time."

In the past, 10 per cent of patients died in the hospital, but now, because of improved care and angioplasty, the mortality rate has fallen to about six per cent.

The aim of treatment is threefold, says Dr Rosli.

The first goal is to relieve symp-

toms. Medications can help, but procedures such as bypass surgery and angioplasty are also effective.

The second goal is to reduce the risk of serious events, such as a heart attack or stroke.

This is mainly achieved by addressing risk factors through medicines, a healthy diet, exercise and maintaining an ideal body weight.

The third goal is to improve survival and lower the risk of death.

This is particularly important for high-risk patients, such as those with severe blockages in three major blood vessels or impaired heart function, where medication alone is not enough. In such cases, angioplasty is often considered.

"It is important to understand that no treatment is a permanent cure," says Dr Rosli.

Even bypass surgeries can fail within months to a few years, especially when patients return to unhealthy habits, such as smoking or poor diet.

Each treatment, whether medication, angioplasty or surgery has its own advantages and limitations.

Dr Tamil Selvan adds that when we look at life expectancy in Malaysia, which is around mid-70s, a person who reaches 70 or 80 has surpassed the national average lifespan.

So for this group, extending life and

maintaining quality of life become crucial goals.

"On the other hand, when we treat 35- or 40-year-old patients, the perspective is different. These individuals potentially have another 40 years ahead of them."

Here, treatment must go beyond medication, it also involves psychological and social support. The approach must be comprehensive.

A major breakthrough in cardiology was the introduction of stents, he says.

In the early days of angioplasty, surgeons used only balloons to open arteries. This was risky — about five per cent of patients required emergency bypass surgery if the artery tore or collapsed.

With stents, however, arteries could be held open, dramatically reducing complications.

Still, early stents had problems with re-narrowing due to scar-like healing. The next leap forward was drug-coated stents, which slowed the healing process and reduced recurrence.

Dr Tamil Selvan says: "More recently, we've moved towards drug-coated balloons and newer types of stents, such as bioadaptors, which provide flexibility and reduce long-term complications like restenosis."

Even so, challenges remain. For younger patients, recurrence is often inevitable since there is no permanent cure.

Even after successful stenting, about 2 per cent of patients per year develop restenosis, which means up to 25 per cent of patients with a stent may need further intervention within 10 years.

In addition, new blockages can form in other arteries.

This is why our focus must not only be on hospital-based treatment and technology, but also on prevention at the nation level, he says.

Lifestyle factors such as smoking cessation, exercise, a healthy diet and weight management are critical. Without significant investment in prevention, medical advances alone cannot solve the problem.

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Diabetes, for example, contributes to the increase in heart disease among younger people. PICTURE CREDIT: FREEMK



One out of four patients is below 50 years of age and this is concerning because these are very young patients.

Datuk Dr Rosli Mohd Ali

Pegawai perubatan, rakan antara saksi

Lebih ramai dipanggil beri keterangan inkues hari ini

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Kuala Lumpur: Lebih ramai saksi, termasuk pegawai perubatan dan rakan sekolah Allahyarham Zara Qairina Mahathir dijadualkan dipanggil memberi keterangan pada prosiding inkues kematian pelajar Tingkatan Satu itu di Mahkamah Koroner Kota Kinabalu, hari ini.

Pada prosiding minggu lalu, beberapa saksi kanak-kanak menedahkan Zara Qairina pernah dihina dengan kata-kata kesat termasuk dipanggil 'anjing gila' serta menjadi sasaran ejekan rakan asrama sekolahnya.

Terdahulu, Hakim Amir Shah



Amir Hassan yang bertindak sebagai Koroner memutuskan media hanya dibenarkan mengikuti semula prosiding selepas semua saksi kanak-kanak selesai memberi keterangan, bagi melindungi identiti dan kebajikan mereka.

Geng 'Circle 19'

Jumaat lalu, Mahkamah Koroner diberitahu oleh saksi kanak-kanak, seorang pelajar memarahi dan menjerit kasar terhadap Zara Qairina pada malam kejadian arwah dipanggil untuk disoal mengenai kehilangan dompet.

Prosiding turut diberitahu seorang lagi saksi mengenai geng 'Circle 19' di asrama Sekolah Me-

nengah Kebangsaan Agama (SM-KA) Tun Datu Mustapha, yang mempunyai 19 anggota kumpulan, semuanya satu tingkatan dan berkawan rapat sejak awal, iaitu saksi itu mengakui dia sebahagian ahlinya.

Dalam keterangan pertama, saksi keempat kanak-kanak memberitahu inkues, ketika dua orang pelajar berjumpa dengan Zara Qairina pada malam itu, beberapa lagi orang pelajar tiba-tiba masuk ke dorm (bilik asrama lain).

Saksi itu berkata, Zara Qairina masih dalam keadaan duduk bersila ketika beberapa orang lagi pelajar masuk ke dorm berkenaan dan beberapa pelajar yang baru masuk berdiri, manakala Zara Qairina duduk menghadap seorang pelajar yang berdiri.

Pada masa itu, saksi terbabit berkata, beliau mendengar kata-kata seorang pelajar yang berjumpa dengan Zara Qairina yang terus marah, termasuk menjerit kasar seperti "budu (bodoh) sial, aku injak la kepala ko ni".

Pemeriksaan KESIHATAN TAHUNAN

PEMERIKSAAN kesihatan tahunan sering kali dianggap tidak penting oleh sesetengah individu, terutamanya golongan muda yang merasakan diri mereka sihat dan tidak mempunyai sebarang gejala penyakit.

Namun begitu, dalam dunia moden yang penuh dengan tekanan dan gaya hidup tidak sihat, pemeriksaan kesihatan secara berkala adalah sangat penting, terutamanya bagi individu yang

berumur 40 tahun ke atas dan disarankan melakukannya setahun sekali, manakala bagi individu yang berumur bawah 40 tahun digalakkan melakukan saringan kesihatan setiap dua tahun sekali. Walaupun sebenarnya itu kesihatan sihat, masih terdapat kemungkinan wujudnya penyakit yang tidak menunjukkan sebarang simptom awal. Oleh itu, pemeriksaan secara berkala amat digalakkan.

Pemeriksaan kesihatan tahunan membolehkan pengesanan awal penyakit kronik seperti darah tinggi, kencing manis, penyakit jantung dan buah. Kebanyakan penyakit ini tidak menunjukkan tanda yang ketara pada peringkat awal dan hanya dikenalpasti apabila keadaan telah menjadi serius. Dengan membuat pemeriksaan kesihatan secara berkala, individu dapat

mengetahui tahap kesihatan mereka dengan lebih jelas. Sebagai contoh, seseorang yang mempunyai tekanan darah tinggi tetapi tidak menyedarinya boleh mengalami serangan jantung atau strok jika tidak dirawat dari awal. Oleh itu, pencegahan melalui pengesanan awal adalah lebih baik dan lebih murah berbanda rawatan di peringkat kritikal.

Selain itu, pemeriksaan kesihatan tahunan juga membantu dalam memantau gaya hidup seseorang. Pemeriksaan seperti ujian darah, pemeriksaan kolesterol, tahap gula dalam darah dan indeks jisim badan (BMI) boleh memberikan gambaran jelas tentang tabiat pemakanan, aktiviti fizikal, dan tahap kesihatan umum. Melalui keputusan ujian ini, doktor boleh memberikan nasihat tentang perubahan gaya hidup yang perlu dilakukan seperti mengawal diet, berhenti merokok, atau meningkatkan aktiviti fizikal. Hal ini secara tidak langsung dapat mengurangkan risiko penyakit kronik pada masa hadapan.

Dengan melakukan pemeriksaan secara berkala, seseorang dapat menjimatkan kos perubatan dalam jangka panjang. Kos untuk rawatan penyakit yang telah berada pada

tahap serius adalah jauh lebih tinggi berbanding dengan kos pemeriksaan asas setiap tahun. Malah, banyak syarikat insurans dan majikan menyediakan faedah pemeriksaan kesihatan percuma untuk pekerja mereka kerana mereka menyedari kepentingan cara ini menjaga kesihatan pekerja. Ia juga memberi kesan positif terhadap produktiviti dan kesejahteraan mental seseorang.

Walaupun bagaimanapun, masih terdapat individu yang menganggap pemeriksaan kesihatan tahunan

sebagai satu pembaziran masa dan wang, terutamanya bagi golongan muda yang merasakan diri mereka sihat dan tidak mengalami sebarang masalah. Sikap ini perlu diubah kerana tidak semua penyakit menunjukkan tanda awal. Malah, terdapat kes di mana individu yang kelihatan sihat secara luaran tetapi sebenarnya menghadapi penyakit serius seperti barah usus, penyakit jantung atau masalah buah pinggang yang hanya dapat dikesan melalui ujian tertentu.

Kesimpulannya, pemeriksaan kesihatan tahunan bukan sahaja perlu, malah wajar dijadikan satu amalan hidup bagi semua golongan masyarakat. Ia merupakan satu langkah pencegahan yang bijak bagi memastikan kesihatan diri sentiasa berada dalam keadaan baik dan terkawal. Menjaga kesihatan sebelum jatuh sakit adalah tindakan yang bertanggungjawab. Oleh itu, marilah kita menjadikan pemeriksaan kesihatan tahunan sebagai kebiasaan dan kepada gaya hidup sihat demi masa depan yang lebih sejahtera.



'On-call pay for doctors must be fair'

■ BY KIRTINEE RAMESH

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PETALING JAYA: The Malaysian Medical Association (MMA) has urged lawmakers to urgently debate long-delayed reforms to doctors' on-call allowances, warning that stagnant rates threaten patient safety and the healthcare workforce.

MMA president Datuk Dr Thirunavukarasu Rajoo said the issue should not be reduced to a "doctors versus MPs" narrative following Dewan Rakyat Speaker Tan Sri Johari Abdul's comments on proposals to reallocate a portion of MPs' allowances for doctors' overnight duty pay, known as Elaun Tugas Atas Panggilan (ETAP).

"We recognise there are many hardworking MPs who consistently stand up for healthcare and the welfare of the rakyat and we value their continued support," he said in a statement.

The MMA stressed that on-call pay is not a perk but recognition for gruelling shifts that can stretch beyond 24 hours without proper rest, handling life-and-death decisions. Current rates work out to just RM9.16 per hour and have not changed in over a decade despite heavier workloads.

"When doctors are fatigued and demoralised, the impact is direct – patients' safety and quality of care suffer.

"Taking care of those who care for the nation's health must be a priority and it is Parliament's duty to give healthcare issues the serious attention they deserve," Thirunavukarasu said.

The association called for fair pay, manageable workloads and clear career pathways to stem attrition and safeguard the system's sustainability.

"We urge MPs to debate this issue with urgency, not only for doctors' welfare but for patients' safety and the long-term resilience of healthcare," he said, adding that the MMA is ready for constructive dialogue with the Speaker and MPs.

Johari had also rejected a proposal to cut MPs' allowances by half, saying backbenchers earn about RM25,000 a month – "not enough actually" – while ministers get RM40,000, much of which goes to constituency work and community aid.

FINANCE

By DALJIT DHESI
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PETALING JAYA: The insurance and takaful sector has adequate capital buffers in place to withstand market volatility amid external uncertainties and rising medical cost inflation.

As such, RAM Rating Services Bhd has maintained its "stable" credit outlook for the sector, reflecting expectations of steady expansion supported by robust capital buffers.

RAM Ratings senior vice-president of financial institution ratings Sophia Lee, in conjunction with the release of RAM's latest commentary *Insurance and Takaful Insight: Reforms in Motion*, told *StarBiz*: "These buffers are expected to be sufficient to buffer against market volatility amid external uncertainties, and earnings headwinds from persistent medical cost inflation, particularly for life insurers, and price competition in detariffed non-life products."

She said high medical cost inflation remains the life insurance industry's most pressing near-term challenge, driving national healthcare reforms to ensure long-term sustainability.

To this end, Bank Negara Malaysia (BNM) is requiring insurers and takaful operators (ITOs) to spread insurance premium increases over a minimum three-year period as an interim measure to manage the impact of rising medical costs.

Working alongside the Health Ministry, the central bank has introduced several key initiatives.

These include a base medical and health insurance and takaful (MHIT) product and the diagnostic-related group payment model, which replaces fee-for-service system with fixed, bundled payments.

Stable outlook for insurance sector

Robust capital buffers to cushion market volatility

The objective is to contain costs, enhance pricing transparency and reduce billing discrepancies between self-paying and insured patients.

These reforms, alongside expanded microinsurance offerings, should help curb medical inflation, improve coverage affordability and narrow the protection gap, particularly for lower-income households, she said.

Lee added that while BNM's interim measures to stagger or delay MHIT repricing may weigh on life ITOs' profitability, the impact should be manageable for most.

In 2024, strong investment returns, driven by stock market revaluation gains in the first eight months – before tapering slightly towards year-end – helped offset underwriting losses in the life insurance sector.

However, some normalisation in equity valuations in the first half of 2025 (1H25) led to a lower return on assets of 2.5% (2024: 8.1%).

Given ITOs' sizeable investment portfolios, financial market volatility remains a key determinant of overall sector returns, RAM Ratings noted.

Looking ahead, Lee said the rating agency has projected new business (NB) growth in the life and family takaful segment to moderate to around 3% to 5% in 2025, weighed down by weaker household purchasing power as consumers continue to grapple with rising living costs.

While life and family takaful NB rose by 8% in 2024, it registered a negative growth of 3% in the 1H25.

"These pressures are likely to persist, exacerbated by higher electricity tariffs and the expanded scope of the sales and service tax (SST) since July 2025," she noted.

RAM Ratings expects non-life premium growth to taper to 5% in 2025, down from 7% in 2024.

It said motor insurance remains the key driver despite weaker vehicle sales this year. In the first eight months of 2025, vehicle sales declined by 3.8% year-on-year to 516,862 units.

RAM Ratings also expects growth in the fire insurance segment to benefit from sustained property transactions, rising awareness of property protection, and higher average premiums.

Meanwhile, demand for medical and personal accident coverage will likely stay healthy.

Lee said adverse motor and weather-related claims, alongside investment returns to a smaller extent, will continue to drive earnings volatility in the non-life sector.

She emphasised that pricing and underwriting discipline, particularly following motor detariffication, remain crucial to defending earnings.

In 1H25, the non-life sector's claims and combined ratios held steady at around 58% and 94%, versus 59% and 95% respectively

in 2024, with margins likely to stay compressed due to price competition.

"Risk-based pricing reforms in the motor segment since 2016 have advanced with digital roadside assistance in recent years, giving non-life ITOs more pricing flexibility for comprehensive products.

"The next phase is full motor claims digitalisation, including online police reporting (pilot in 2025) and digital loss assessments.

"Third-party motor products will remain tariffed to ensure affordability, while third-party fire and theft products are likely the first to be liberalised," Lee said.

She said further upside may come from digital entrants, with licence applications open until December 2026.

These new players are expected to drive innovation and cost-efficient distribution to address underinsurance, without posing a threat to incumbents, she noted.

Nonetheless, Lee said greater protection awareness and financial literacy remain essential to deepen insurance penetration.

"The regulator's risk-based capital reforms should strengthen the sector's credit fundamentals and resilience. Preliminary feedback suggests a manageable capital impact, although more aggressive players may require additional buffers.

"With implementation (expected) no earlier than 2027, some ITOs may pre-emptively manage to raise capital," she said.

Private healthcare sector growth trajectory intact

Ageing population, medical tourism to lend support

HEALTHCARE

PETALING JAYA: Malaysia's private healthcare sector is set for a sustained growth trajectory, driven by structural demand from an ageing population, the rising prevalence of non-communicable diseases, and the country's ambitions to become a medical tourism hub.

CIMB Research said it believes these tailwinds will support the expansion of hospital capacity and earnings for leading private healthcare operators such as IHH Healthcare Bhd and KPJ Healthcare Bhd.

According to the research house, private-hospital bed capacity in Malaysia is projected to grow at a compounded annual growth rate (CAGR) of around 4% to 5% between 2023 and 2028, underpinned by ongoing and planned projects nationwide, which will help address the current shortfall in healthcare infrastructure.

Malaysia has two hospital beds per 1,000 population, below the average of 2.5 in developed markets.

"Within our coverage, KPJ and IHH are respectively aiming to expand bed capacity by 53% and 43% (bringing total bed capacity to 6,000 and 4,978) by 2029 and 2028, positioning them well to capture incremental demand," the research house highlighted in a recent report to clients.

"Private-hospital bed capacity in Malaysia is projected to grow at a compounded annual growth rate of around 4% to 5% between 2023 and 2028."

CIMB Research

The expansion pipeline includes major projects such as the Gleneagles Kuala Lumpur expansion, Pantai Hospital Penang, Columbia Asia Batu Kawan, and new facilities under Sunway Medical Centre.

By 2028, private hospital bed capacity is expected to reach between 23,000 and 24,000, up from 18,779 in 2023.

On the other hand, Malaysia is also banking on healthcare tourism to fuel private healthcare demand, with the government having set ambitious targets under Visit Malaysia 2026 and the Malaysia Year of Medical Tourism campaigns.

The country welcomed 1.6 million healthcare travellers last year, a 14% year-on-year increase, with Indonesians accounting for up to 80% of healthcare tourism revenue.

"Revenue from healthcare tourism contributed 6% and 12% of KPJ's and IHH's Malaysia reve-

nue in 2025, respectively, supported by partnerships with foreign referral centres and flagship medical centres," CIMB Research said.

With the government targeting over 4.7 million Indonesian arrivals next year, healthcare operators are well placed to capture this lucrative segment, the research house said, adding that Malaysia's competitive pricing, quality facilities, and multilingual workforce have helped position the country as a preferred destination for medical tourists.

Despite the upbeat outlook, it said the sector faces near-term headwinds, with manpower shortages remaining a concern, particularly in the public sector, though private hospitals are less affected.

"We note this issue is less acute for private operators such as IHH and KPJ, which are better equipped to attract and retain talent through competitive pay,

digitalisation initiatives, and modern facilities," CIMB Research said.

On the regulatory front, it reported that the introduction of the diagnosis-related group (DRG) payment system for private hospitals has been delayed to 2027.

More notably, it said the initial phase will cover outpatient cases, which contribute less to revenue and margins, limiting the near-term financial impact.

However, the research house mentioned that uncertainties remain over the rollout of the National Health Insurance Scheme, which could overlap with private medical insurance coverage.

The research house said KPJ, with its predominantly domestic exposure, is deemed more vulnerable to these risks compared to IHH, which benefits from its diversified regional footprint.

CIMB Research reiterated its "overweight" call on the healthcare sector, with IHH named as the top pick.

"We like IHH for its diversified regional asset base, which helps to insulate it from regulatory risks in Malaysia; proven execution track record; premium positioning; and exposure to affluent clientele, supporting earnings resiliency," the research house said.

In contrast, KPJ is rated a "hold", as its domestic focus leaves it more exposed to payor pressures and regulatory changes.

NSCMH private placement exercise to raise RM45mil a success

By **SARBAN SINGH**

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SEREMBAN: NSCMH Holdings Sdn Bhd's private placement exercise to raise RM45mil to part finance the redevelopment of CMH Specialist Hospital has received overwhelming response, forcing its president Datuk Seri Lee Tian Hock to reduce his own personal subscription.

A jubilant Lee said the oversubscription was beyond expectation and sent out a strong signal that behind CMH Specialist Hospital lies the powerful support of the community and its resources.

He said at the closing, the subscriptions had reached 20.23 million shares valued at RM50.57mil, although only 18 million shares worth RM45mil were available.

"There was an oversubscription of RM5.57mil shares or 12.4%.

"Within just seven days, total applications had already exceeded the original target and by the closing date on Sept 6, the hospital had received 39 subscription applications with total funds raised reaching RM50.57mil," he said at the Negri Sembilan Chinese Maternity Association's (NSCMA) 91st AGM.

NSCMA owns CMH Specialist Hospital, which was previously known as Negri Sembilan Chinese Maternity Hospital and set up by Chinese philanthropists in 1932.

Lee said he had personally subscribed 10

million shares worth RM25mil on the launch day, as his intention was to inject confidence and momentum into the fund-raising effort.

With the oversubscription, he has since decided to reduce this to 7.772 million units valued at RM19.43mil to allow more members and partners to participate in the hospital's future development.

The funds raised from the exercise are to partially finance the RM120mil construction cost of CMH Specialist Hospital's new medical block under phase two of its redevelopment project.

The remaining RM80mil will be funded through bank borrowings guaranteed personally by Lee, with corporate guarantees from the NSCMA and NSCMH Holdings.

Lee said the construction of the 10-storey block is expected to begin after Chinese New Year next year. Tenders, he said, will soon be called to demolish the existing block. "The construction of our six-storey carpark with 310 parking bays and costing some RM10mil should be completed in the next two months.

"And when the new 10-storey block is completed in three years, we will have 100 more new beds which will bring the grand total to 166 beds," he said while the number of specialist clinics will also increase from 16 to 45.

Elaborating on the group's performance for 2025, Lee said it recorded a net revenue

of RM90.9mil, representing a 2.4% increase from the previous year.

The annual bed occupancy rate rose from 78.7% in FY24 to 79.2% in FY25, effectively reaching the maximum utilisation of the hospital's current 66 beds.

"During the same period, we faced multiple challenges such as higher depreciation and rising manpower costs which pushed profit before tax down to RM7.6mil.

"Yet, there were positive aspects as we maintained a healthy cash flow and invested RM5.5mil in infrastructure and equipment upgrades, most notably in upgrading our hospital information system, strengthening IT, and enhancing cybersecurity resilience," he said.

Lee said for FY26, the management has set targets of RM92mil in revenue and RM10mil in profit after tax mainly by continuing to optimising operations, managing resources prudently, and actively driving forward the hospital's expansion plan.

To fulfil its commitment of allocating 25% of profits to staff welfare, the hospital granted eligible employees an average salary increment of 8.1% and distributed RM3.6mil in bonuses FY25, which was equivalent to about two months' wages.

"I am also pleased to announce that this month, the hospital will also provide a special one-off bonus of RM2mil to reward our employees for their dedicated service," he said. In anticipation of the hospital's future

growth, it will launch a nursing diploma sponsorship programme tailored for SPM school leavers.

The goal is to recruit at least 50 nurses annually over the next five years with a total investment of RM13mil.

Lee said the hospital also spent RM1.2mil on its Community Care Programme alone for the past year where it subsidised patients' medical expenses, provided dialysis support as well as other outreach initiatives.

Members also unanimously passed three resolutions during the meeting which among others will allow Lee to continue to offer himself for the presidency although his term ends next year.

The NSCMA constitution previously stated that a president can only serve for three terms with each term covering three years.

"The board and management committee decided to amend that because I will be providing the personal guarantee to the loan and that the banks may also require me to continue as president.

"They have decided to make the amendment so that it will not jeopardise our financings from the banks," he said.

At the event, Lee also presented cheques to four schools to allow them to carry out their activities - Sek Tinggi Chung Hua (RM300,000), SM Chung Hua, Port Dickson (RM200,000), SMJK Chan Wa (RM150,000) and SMJK Chan Wa II (RM150,000).

'Invest more in healthcare, graft reforms'

PETALING JAYA: Civil society groups are urging the government to make Budget 2026 more transparent and people-centred, with stronger focus on healthcare and anti-corruption reforms.

National Cancer Society of Malaysia managing director Dr Murallitharan Munisamy called for fairer treatment of cancer patients who move from private to public hospitals.

"When patients are referred to public hospitals after being unable to afford private treatment, they are still charged for first-class wards. This is illogical and we kindly request the government abolish this absurd practice," he said.

Dr Murallitharan also urged the government to stop charging children below seven years old for cancer treatment in public hospitals.

"It makes no sense that school-children aged seven and above, registered with the Education Ministry, receive fully subsidised treatment while younger children

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