**AKHBAR** : SINAR AHAD

**MUKA SURAT: 26** 

**RUANGAN** : HIBURAN SINAR



# KKM tegur Noh Hujan gara-gara rokok

SELEPAS mencetuskan kontroversi dan dikecam hebat warga maya berikutan tindakannya memegang sebatang rokok ketika muncul di pentas Minggu Fesyen Kuala Lumpur 2022 lalu, Noh Hujan sekali lagi menerima tamparan apabila ditegur Ketua Pengarah Kesihatan, Tan Sri Dr Noor Hisham Abdullah.

Menerusi satu hantaran di Jaman sosial. Dr Noor

Abdullah.
Menerusi satu hantaran di laman sosial, Dr Noor
Hisham berkata, pihaknya memandang serius
perlakuan golongan artis yang memperlihatkan aksi
seperti merokok atau menghisap vape secara
terbuka.
"Kementerian Kesikata

terbuka.

"Kementerian Kesihatan Malaysia (kKM) amat memandang serius terhadap isu berkaitan artis yang menonjolkan tingkah laku seperti merokok dan menghisap vape di khalayak ramai.
"Perbuatan ini menunjukkan contoh yang tidak baik kepada masyarakat sekeliling terutama kepada kanak-kanak dan remaja," katanya.
Noh yang baru sahaja mengumumkan perpisahan dengan Mizz Nina sebelum ini hebat dikititik apabila dengan selamba menghisap rokok elektronik ketika diwawancara media dalam satu acara bulan lalu.

: SUNDAY STAR **AKHBAR** 

**MUKA SURAT: 5** 

**RUANGAN** : NATION

### Ample flu medicine in Johor govt hospitals and clinics

SIMPANG RENGGAM: There is ample medicine in government hospitals and clinics statewide despite the surge in influenza cases over the past few months.

State health and unity committee chairman Ling Tian Soon said that while some pharmacies reported a shortage of certain medicine, the situation in hospitals and clinics was under control.

"In the past few months, there was an increase in influenza cases and this had driven up the demand for certain medication.

"However, the situation was still under control in all government clinics and hospitals statewide. There was no lack of medical supplies at the moment," he said.

Ling said this when met after the handover of mobile clinics from the Mohamed Noah Foundation in collaboration with Universiti Teknologi Mara (UiTM) and the state government at Dewan Muafakat Simpang Renggam here yesterday.

He was asked to comment on the medicine supply situation at hospitals and clinics in Johor after several physmetes.

Rengam here yesterday.

He was asked to comment on the medicine supply situation at hospitals and clinics in Johor after several pharmacies reported problems in replenishing their supplies.

"We have received information that there are some pharmacies which face difficulties in getting medical supplies from their suppliers. The problem is less prevalent among larger pharmacies with many branches. They still have stocks but it may not be as much as before. However, the situation is improving as the number of influenza cases was now seeing a downward trend," he said.

Meanwhile, Mentri Besar Datuk Onn Hafü Ghazi, who launched the ceremony, said the state government was looking into providing more mobile clinics to help those living in the rural areas.

He said the two mobile health clinics donated by the foundation, which are expected to start operating next month, would benefit those living in Simpang Renggam and sembrong, especially in the rural areas, and the B40 group.

"This is a pilot project and we will study the effectiveness of the mobile units and may expand it to other areas if it is successful," he added.

Also present were state health discrete and the state power means if it is successful," he

added.

Also present were state health director Datuk Dr Aman Rabu, the foundation's trustee Datuk Mohamed Nizam Abdul Razak and UITM deputy vice-chancellor (student affairs) Prof Dr Mohd Sazili Shahibi. Shahibi.

**AKHBAR** : STARHEALTH

**MUKA SURAT: 5** 

**RUANGAN** : HEALTH



Increasing the amount of healthcare spending would allow for more resources to be allocated to public clinics, thus allowing more care to be done at the community level and decongesting public hospitals. — Photos: Filepic



Our healthcare system will only face increasing demands as our population ages.



### **Health matters** DR HELMY HAJA MYDIN

IT is a bit of a cliche by now to say that the Covid-19 pandemic and its aftershocks were unprecedented, that we are still bearing the adverse health and socioeconomic outcomes, even as we attempt to live in a world endemic with the SARS-CoV-2 virus.
It has also been said that the cri-

sis has highlighted the importance of having a robust healthcare sys-tem – one that will not only be able to withstand future infectious dis ease outbreaks, but is also fit-forpurpose as we deal with ever increasing non-communicable dis-eases (NCDs) and escalating healthcare-related costs.

#### The need for change

The Malaysian healthcare system has achieved substantial progress in achieving good outcomes on many health indicators and in providing affordable universal health coverage.

However, what has worked for

the past 65 years will unlikely be suitable for the next 65.

This is especially true as there is a focus on curative, rather than preventive measures, while more could be done in tackling and cor-recting more systemic factors root ed in environmental, socioeconomic and behavioural factors.

The numbers tell a story of some

- of the challenges we face:

  One in five adults have diabetes.

  One in five children under the
- age of five suffer from stunting.

  > Three in 10 adults have hypertension (high blood pressure).

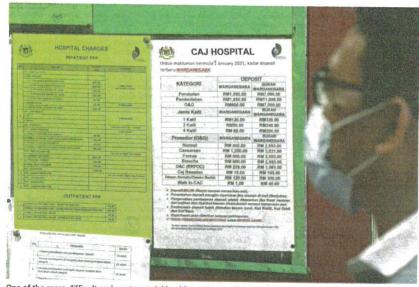
  > Four in 10 adults have high cholasterial adults have hig
- lesterol levels.

  > One in two adults are overweight

Alongside an increasingly bearish economic outlook that is likely to increase mental ill health, we have to contend with an ageing

## We need to start now

The upcoming Health White Paper is the necessary first step in future-proofing our healthcare system.



One of the more difficult and controversial healthcare issues that requires putting politics aside is the need to increase the fees at public hospitals and clinics. — AZHAR MAHFOF/The Star

population - by 2040, those aged 65

population – by 2040, those aged 65 and above will rise to 14.5% of Malaysia's population – who may not have adequate savings to live a comfortable life post-retirement. Fifty-two percent of the total 12.8 million EPF members aged under 55 have savings of less than RM10,000, with 3.2 million have a temporation of the saving of the second savings of t very critical savings level of less than RM1,000.

There is a need to address these issues systemically, rather than by intermittent troubleshooting.

In the words of the American rock band Rage Against the Machine: "It has to start some-

where, it has to start sometime. "What better place than here, what better time than now?

### From sickness to health

Identifying the issues is the first

step.
The next steps involve identifying and implementing changes that need to occur at both organisation-

al and enforcement levels.
This is one of the core purposes of the Health Ministry's upcoming Health White Paper (HWP), which seeks to address the imbalance in resource allocation, organisation

and policy focus between public, primary and secondary care.

In his recent keynote speech at the Health Policy Summit 2022, Health Minister Khairy Jamaluddin highlighted the need to develop pri-mary care services in order to address the burgeoning NCD bur-den, with a commitment to allocate more resources for primary care services, such as family health teams, that engage communities as equal partners in promoting and maintaining health. This should start with a doubling

of Malaysia's total public health spending from the current 2.58% of GDP (in 2020) to 5% of GDP as recommended by the World Health Organization (WHO). While we may not be able to

achieve this in Budget 2023 given the prevailing economic and fiscal climate, the Finance Ministry should be committed to a gradual increase over time to alleviate the chronic underfunding of our

healthcare services.

This will allow for proper planning; from development of skilled human resources to devolving care from hospitals to the community in an effort to decongest our public facilities and improve waiting

times for medical consultations, investigations, treatment and rehabilitative care.

### Healthcare above politics

With the 15th General Election being the hottest speculative topic in town, there is understandable concern that efforts such as the HWP are an exercise in futility and that they will not bear fruit.

There is also particular concern among the medical fraternity that priorities may differ depending on who happens to be the incumbent Health Minister.

There is also the question of political will to discuss and work on difficult and controversial issues, such as debating the need to increase charges for access to medical care.

To quote the former European Commission President Jean-Claude Juncker: "We all know what to do, but we don't know how to get re-elected once we have done it."

However, there is cross-partisan support for institutional change. For example, the HWP calls for

the establishment of a Health Reform Commission that is answerable to Parliament and not behold-

en to political masters. This has been seconded by This has been seconded by Bandar Kuching Member of Parliament Dr Kelvin Yii, who is also DAP's Youth chief and chair-man of the Parliamentary Select Committee on Health, Science and Innovation.

He had previously opined that such a commission can act as a vehicle to frame a reformation in essential healthcare areas, including financing systems, manpower resources, healthcare infrastruc-ture, as well as data collection and analysis.

Such a commission could work across political boundaries and act as a platform to ensure that reforms are done in a transparent fashion, while adhering to princi-ples of good governance. The Commission will last across

administrations, and can create long-lasting institutional check-and-balance while independently monitoring, advising and reporting on the progress of reform proposals.

### Stakeholder engagement

In pushing for reform, there is a need to engage with all the key players within the health ecosys-

tem.

Some may be obvious, e.g. ancillary services, the private sector, insurance companies and the pharmaceutical industry.

Some may be less so, e.g. digital tech companies; ministries and agencies involved in our socioeconomic nets, education and environ-ment; as well as institutions such as Bank Negara.

Ultimately, any and all reforms are aimed at improving the lives of the ultimate stakeholder, i.e. the

rakyat.

It is important that our voices are heard too.

Efforts will be put in place to organise town halls, and individu-als can send feedback and ideas to kertasputih@moh.gov.my.

It is hoped that constructive feed-back will help make the reform proposals more robust and enable us to prepare our healthcare sys-tem for the inevitable shocks in the

Dr Helmy Haja Mydin is a consultant respiratory physician and a member of the Health Ministry's Health White Paper Advisory Council. For further information, email star-health@thestar.com.my. The infor-mation provided is for educational and communication purposes only.

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