

AKHBAR : BERITA HARIAN
MUKA SURAT : 1
RUANGAN : MUKA HADAPAN

KKM, JPA bincang serap dokter kontrak ke jawatan tetap tidak berpencen

Kuala Lumpur: Kementerian Kesihatan (KKM) sedang mengadakan perbincangan dengan Jabatan Perkhidmatan Awam (JPA) untuk menyerapkan petugas perubatan berstatus kontrak ke dalam sistem perjawatan tetap tanpa diberikan pencen.

Menteri Kesihatan, Dr Zaliha Mustafa, berkata ia bagi menangani bebanan tugas yang melebihi kapasiti sumber sedia ada serta untuk mengurangkan beban skim berpencen ditanggung negara ketika ini yang mencecah RM29.1 bilion pada 2021.

"Kita sedar beban kerajaan berdepan dengan skim berpencen iaitu pada 2011 nilainya adalah sebanyak RM3.1 bilion dan kemudian meningkat kepada RM29.1 bilion pada 2021, ini adalah beban yang sangat tinggi dan mungkin terus meningkat.

AKHBAR : BERITA HARIAN

MUKA SURAT : 7

RUANGAN : NASIONAL

Buntal ada toksin berbahaya tak dibenar jual

Kuala Lumpur: Sebanyak 58 kes keracunan ikan buntal termasuk membabitkan 18 kematian, dilaporkan di negara ini, sejak 1985 hingga Mac tahun ini.

Ketua Pengarah Kesihatan, Tan Sri Dr Noor Hisham Abdullah, berkata larangan penjualan ikan buntal di negara ini, sudah ditetapkan dengan jelas mengikut Akta Lembaga Kemajuan Ikan Malaysia 1972.

Selain itu katanya, Seksyen 13 Akta Makanan 1983 turut menerangkan dengan jelas mengenai larangan penjualan makanan yang mengandungi atau di atasnya bahan beracun, berbahaya atau sebaliknya memudaratkan kesihatan.

"Oleh itu, ikan buntal yang mengandungi toksin berbahaya tidak dibenarkan dijual," katanya dalam kenyataan, semalam.

Dr Noor Hisham berkata, Bahagian Keselamatan dan Kualiti Makanan (FSQD), Kementerian Kesihatan (KKM) sudah menghasilkan bahan pendidikan sebagai langkah meningkatkan kesedaran orang ramai berhubung toksin berbahaya dalam ikan buntal.

"Malah, tinjauan yang dijalankan oleh FSQD KKM pada 2019 menunjukkan 86 peratus daripada responden yang terdiri daripada orang awam, penjual ikan, nelayan dan tukang masak mempunyai pengetahuan yang



Hidangan ikan buntal beracun yang menyebabkan seorang warga emas maut, manakala suaminya dirawat di ICU.

mencukupi mengenai bahaya pengambilan ikan buntal," katanya.

Sebelum ini, media melaporkan seorang wanita maut, manakala suaminya kini dirawat dalam unit rawatan rapi (ICU) Hospital Enche' Besar Hajjah Kalsom (HEBHK) selepas makan hidangan ikan buntal.

Ikan buntal iaitu sejenis ikan yang juga disebut 'ikan fugu' tergolong dalam satu daripada jenis racun semula jadi yang paling bahaya dan mematikan di dunia, dibeli dari pembekal di Batu Pahat yang mendapatkan bekalan dari nelayan di Endau.

Racun yang dikenali sebagai

Tetrodotoksin yang terdapat di dalam ikan buntal adalah racun yang boleh menyerang sistem saraf dan sangat berbahaya. Racun ini didakwa lebih mematikan dibandingkan racun sianida (cyanide).

Memakan sekitar 1-2 miligram racun tetrodotoksin sahaja boleh menyebabkan risiko kematian.

Johor tak sekat penjualan

Sementara itu, Pengerusi Jawatankuasa Pertanian, Industri Asas Tani dan Kemajuan Luar Bandar negeri, Datuk Zahari Sarip, berkata Jabatan Perikanan dan Lembaga Kemajuan Ikan Malaysia (LKIM) tidak menyekat

“Peniaga perlu berwaspada dengan makanan dijual, termasuk ikan. Menjadi satu kesalahan jika terbukti mereka menyediakan atau menjual apa-apa makanan yang ada di dalam atau padanya bahan beracun, merosakkan atau memudaratkan kesihatan”

Zahari Sarip,
Pengerusi Jawatankuasa Pertanian, Industri Asas Tani dan Kemajuan Luar Bandar Johor



kat penjualan ikan buntal di Johor.

Beliau berkata, selain menjadi menu makanan berasaskan ikan, buntal juga dijadikan ikan hiasan marin.

Katanya, peraturan berkaitan aktiviti pemasaran ikan juga tidak menyatakan secara spesifik bahawa ikan buntal dilarang untuk dijual.

Berkaitan larangan urus niaga ikan yang tidak selamat pula, beliau berkata, ia tidak membenarkan sebarang urus niaga, memproses, mengeksport atau mengimport ikan yang tidak selamat dimakan oleh manusia tanpa kebenaran.

"Namun, peniaga perlu berwaspada dengan makanan yang dijual, termasuk ikan.

"Menjadi satu kesalahan jika terbukti mereka menyediakan atau menjual apa-apa makanan yang ada di dalam atau padanya bahan beracun, merosakkan atau memudaratkan kesihatan.

"Apabila disabitkan dengan kesalahan, individu itu boleh dikenakan hukuman penjara tidak lebih lima tahun atau denda atau kedua-duanya mengikut Akta Makanan 1983 (Akta 281) dan Peraturan Peraturan: Bahagian III Kesalahan dan Keterangan - Seksyen 13 (1).

"Pengguna juga dinasihatkan agar lebih berhati-hati dalam menyediakan makanan berasaskan ikan atau ketika menikmati juadah berasaskan ikan di restoran atau kedai makan," katanya.

AKHBAR : BERITA HARIAN
MUKA SURAT : 9
RUANGAN : NASIONAL



Projek rintis kurangkan kesesakan di hospital

Dari muka 1

"Jadi kita memikirkan jalan keluarnya adalah dengan mengusulkan untuk mengambil pekerja kontrak secara tetap tetapi tanpa pencen, namun mereka ini boleh mendapat manfaat yang sama seperti pekerja tetap yang lain antaranya boleh membuat pinjaman perumahan," katanya pada sesi soal jawab di Dewan Negara, semalam.

Beliau berkata demikian bagi menjawab soalan tambahan Datuk Jefridin Atan yang ingin tahu sama ada KKM mempertimbangkan untuk menambah jawatan doktor kontrak bagi mengatasi masalah bebanan kerja petugas kesihatan.

Menurut pекeliling Perkhidmatan Sumber Manusia (PPSM)

Ketua Pengarah Perkhidmatan Awam, penjawat awam yang dilantik mulai 12 April 1991 berhak untuk memilih Skim Kumpulan Wang Simpanan Pekerja (KWSP) sebelum disahkan dalam jawatannya.

Peningkatan bilangan pesakit

Apabila seseorang anggota telah memilih Skim KWSP, faedah persaraan yang diperuntukkan dalam Akta Pencen 1980 dan Akta Pencen Pihak Berkuasa Berkanun dan Tempatan 1980 atau mana yang berkenaan, tidak terpakai ke atas penjawat awam terbabit. Pekeliling PPSM berkenaan berkuat kuasa mulai 1 Januari 2022.

Sementara itu, Dr Zaliha berkata ekoran peningkatan kes penyakit tidak berjangkit (NCD), KKM menghadapi

peningkatan bilangan pesakit dalam dan luar di fasiliti kesihatan, terutama di hospital melebihi kapasiti sumber sedia ada sekali gus menyebabkan kesesakan di hospital.

"Untuk mengurangkan kesesakan di hospital, kita telah melaksanakan projek rintis diketuai Pasukan Petugas Khas Reformasi Sektor Awam (STAR) yang juga ditubuhkan di bawah penyeliaan Ketua Setiausaha Negara.

"KKM juga membudayakan usaha pendigitalan untuk kurangkan beban kerja anggota KKM selain melaksanakan amalan penjadualan yang boleh membantu memastikan anggota mempunyai masa rehat mencukupi antara syif, termasuk dalam memberikan cuti kepada petugas kesihatan," katanya.

BERNAMA

AKHBAR : HARIAN METRO

MUKA SURAT : 6

RUANGAN : LOKAL

40% alami komplikasi tulang, sendi

Georgetown: Kurangnya perhatian terhadap kesihatan tulang dan sendi dalam kalangan rakyat Malaysia menyebabkan kira-kira 40 peratus daripada mereka mengalami komplikasi tulang dan sendi.

Pakar Bedah Ortopedik dan Traumatologi Hospital Pantai Pulau Pinang Dr Boon Huck Wee berkata orang ramai lebih mengambil berat tentang kolesterol dan diabetes berbanding penilaian tulang (osteoporosis) dan sendi (ar-

tritis)

"Semakin ramai wanita cenderung mengalami artritis apabila mencecah usia 50 tahun dan ke atas iaitu selepas mereka menopause. Kira-kira 80 peratus wanita dan 20 peratus lelaki pula mengalami kedua-dua masalah osteoporosis dan artritis.

"Simptom paling biasa ialah sakit tulang belakang, cakera dan pinggul, serta patah," katanya kepada pemberita pada sidang akhbar kempen #Movement-

Matters di sini, kelmarin.

Beliau berkata berdasarkan laporan *International Association for the Study of Pain* (IASP), hampir 2.5 juta rakyat Malaysia mengalami sakit belakang akibat gaya hidup kerja dari rumah yang tidak aktif susulan pandemik.

Dr Boon berkata berat badan dan usia antara faktor penyumbang kepada masalah tulang dan sendi.

Dalam usaha menghindari masalah itu, beliau berkata gaya hidup sihat se-

perti pemakanan sihat dan aktiviti fizikal seperti berenang, berbasikal, berjalan pagi perlu dikekalkan.

"Orang ramai perlu bersenam sekurang-kurangnya 20 minit sekali atau dua kali seminggu...lebih bagus jika mereka boleh melakukannya setiap hari.

"Sebenarnya, mereka boleh mula mengesan rasa sakit seawal usia 40 tahun...jadi pada usia 50 tahun ke atas adalah usia paling sesuai untuk menjalani pemeriksaan tulang dan sendi," katanya.



AKHBAR : HARIAN METRO
MUKA SURAT : 8
RUANGAN : LOKAL

BAHANA MAKAN IKAN BUNTAL

18 orang terkorban sejak 1985

Oleh Farah Marshita
Abdul Patah
am@hmetro.com.my

Kuala Lumpur

Keracunan akibat memakan ikan buntal meragut 18 nyawa membabitkan 58 kes yang dilaporkan sejak 1985 hingga Mac ini.

Ketua Pengarah Kesihatan, Tan Sri Dr Noor Hisham Abdullah berkata, larangan penjualan ikan buntal sudah ditetapkan dengan jelas di bawah Akta Lembaga Kemajuan Ikan Malaysia 1972.

Katanya, selain itu Seksyen 13 Akta Makanan 1983 turut menerangkan dengan jelas mengenai larangan

penjualan makanan yang mengandungi atau di atasnya bahan beracun, berbahaya atau sebaliknya memudaratkan kesihatan.

"Oleh itu, ikan buntal yang mengandungi toksin berbahaya tidak dibenarkan dijual," katanya dalam satu kenyataan, semalam.

Menurutnya, Bahagian Keselamatan dan Kualiti Makanan (FSQD), Kementerian Kesihatan Malaysia (KKM) sudah menghasilkan bahan pendidikan sebagai langkah meningkatkan kesedaran orang ramai berhubung toksin berbahaya dalam ikan buntal.

Sehubungan itu, katanya, KKM akan terus mendidik orang ramai tentang kese-

lamatan makanan termasuk bahaya memakan ikan buntal.

"Malah, tinjauan FSQD KKM pada 2019 menunjukkan 86 peratus daripada responden terdiri daripada orang awam, penjual ikan, nelayan dan tukang masak mempunyai pengetahuan yang mencukupi tentang bahaya pengambilan ikan buntal," katanya.

Sebelum ini, media melaporkan seorang wanita maut manakala suaminya dimasukkan ke Unit Rawapan Rapi

(ICU) Hospital Enche' Besar

Hajjah Kalsom (HEBHK)

selepas makan hidangan ikan buntal.

Ikan buntal iaitu sejenis ikan yang juga disebut 'ikan fugu' tergolong dalam satu daripada jenis racun semula jadi yang paling bahaya dan mematikan di dunia, dibeli menerusi laman Facebook dari seorang pembekal di Batu Pahat yang mendapatkan bekalan dari nelayan di Endau.

Racun yang dikenali sebagai Tetrodotoksin yang terdapat di dalam ikan buntal adalah racun yang

boleh menyerang sistem saraf dan sangat

mematikan. Racun

ini didakwa lebih mematikan dibandingkan racun sianida (cyanide).

Memakan sekitar 1-2 miligram racun tetrodotoksin sahaja sudah dapat membuat nyawa melayang.

Proses membersihkan ikan buntal perlu berhati-hati kerana racun jenis tetrodotoksin tersimpan di dalam hati, kelenjar kelenjar, kulit dan usus ikan buntal.

Organ ikan harus dibuang secara berhati-hati dengan teknik khusus agar dagingnya dicemari racun.

Selalunya ikan buntal selamat dimakan jika dihidangkan oleh cef yang pakar menyediakannya.

Racun tetrodotoksin tidak

akan hilang walau ikan buntal dimasak atau dibekukan.

Jika tidak diproses dengan betul maka racun dari organ tubuh ikan buntal boleh menyebar dan terserap ke dalam dagingnya.

Pada Jun 2021, empat maut di Desa Hoder di Sika, Nusa Tenggara Timur kerana memakan ikan buntal beracun manakala 13 lagi orang dikejarkan ke hospital selepas mengalami sakit perut yang serius.

Ketua Kampung Desa Hoder, Martina memaklumkan selepas makan ikan buntal yang dijadikan hidangan sebuah majlis keraian tempatan di kampung berkenaan, penduduk berasa pening kepala.

Racun ikan buntal tidak akan hilang selepas dimasak atau dibekukan

Kos tinggi laksana EMR seluruh negara

Kuala Lumpur: Kos perbelanjaan yang tinggi merupakan cabaran Kementerian Kesihatan Malaysia (KKM) dalam melaksanakan sistem Rekod Perubatan Elektronik (EMR) di setiap hospital di seluruh negara.

Menteri Kesihatan Dr Zaliha Mustafa berkata, pelaksanaan sistem itu memerlukan belanjawan yang tinggi dengan mungkin mencecah bilion ringgit kerana perlu menaik taraf infrastruktur hospital serta kesesuaian bangunan juga diambil kira.

"Peralatan yang sedia ada juga lama, jadi kita perlu menaik tarafnya sama ada membaik pulih atau menggantikan yang baharu. Perkara ini turut menyumbang keperluan bajet yang tinggi selain kos sistem itu sendiri.

"Bagi pelaksanaan yang tuntas mengenai perkara ini, kita memerlukan kerjasama daripada Kementerian Kewangan," katanya di Dewan Rakyat di sini, semalam.

Beliau menjawab soalan tambahan Tan Hong Pin (PH-Bakri) yang ingin tahu jangkaan sistem EMR boleh berintegrasi sepenuhnya serta kekangan dihadapi KKM dalam melaksanakannya kerana dilihat setiap hospital masih bekerja silo berhubung rekod perubatan pesakit.

Sementara itu, Dr Zaliha



DR Zaliha

berkata sehingga kini, sebanyak 103 Klinik Kesihatan dilengkapi dengan sistem Teleprimary Care-Oral Health Clinical Information System (TPC-OHCIS) dan 42 Klinik Kesihatan di Negeri Sembilan akan dilengkapi sistem sama melalui projek EMR Kebangsaan.

"Terdapat 1,027 Klinik Kesihatan yang menggunakan sistem janji temu dalam talian melalui aplikasi MySejahtera, manakala 370 Klinik Kesihatan menawarkan perkhidmatan klinik maya kepada pelanggan mereka.

"Perancangan seterusnya adalah untuk memperluas semua sistem berkaitan secara lebih menyeluruh bagi mencapai objektif sistem maklumat kesihatan bersepadu," katanya menjawab soalan asal Tan mengenai status terkini dalam pelaksanaan sistem EMR di hospital dan klinik di seluruh negara.

AKHBAR : HARIAN METRO

MUKA SURAT : 16

RUANGAN : LOKAL

JKNP keluar 34 notis, kompaun RM3,500

Pekan: Jabatan Kesihatan Negeri Pahang (JKNP) mengeluarkan 34 notis dengan nilai kompaun RM3,500 kepada peniaga dan pengendali makanan di bazar Ramadan di negeri ini atas pelbagai kesalahan di bawah Seksyen 32B Akta Makanan 1983.

Pengarah Kesihatan Negeri Datuk Dr Nor Azmi Yunus berkata, notis itu dikeluarkan hasil pemeriksaan ke atas 892 gerai bazar Ramadan sejak Khamis lalu membatkan kesalahan antaranya tiada suntikan vaksin tifoid, tidak memakai topi, apron dan kasut, selain memakai perhiasan seperti jam tangan, gelang, cincin serta berku-ku panjang.

"Sepanjang pemeriksaan itu juga kami mengambil 30 sampel makanan bagi dianalisis, namun keputusan ke atas sampel itu masih belum diterima," katanya selepas merasmikan Pelancaran *Walkabout* Kempen Keselamatan Makanan Bazar Ramadan di sini, semalam.

Beliau berkata, terdapat 75 lokaliti bazar Ramadan dengan 3,799 premis makanan di seluruh Pahang dan pemeriksaan secara rawak akan dilaksanakan oleh lebih 100 penguat kuasa kesihatan negeri ini.

AKHBAR : KOSMO

MUKA SURAT : 14

RUANGAN : NEGARA



PENJUALAN ikan buntal adalah dilarang kerana mempunyai bahan beracun yang boleh memudaratkan kesihatan.

18 mati akibat makan ikan buntal sejak 1985

PETALING JAYA – Sebanyak 58 kes keracunan ikan buntal dilaporkan melibatkan 18 kematian sejak 1985 hingga Mac 2023 berdasarkan data Bahagian Kawalan Penyakit, Kementerian Kesihatan.

Ketua Pengarah Kesihatan, Tan Sri Dr Noor Hisham Abdullah berkata, Akta Lembaga Kemajuan Ikan Malaysia 1972 telah menerangkan dengan jelas tentang larangan penjualan ikan buntal.

"Di samping itu, Seksyen 13 Akta Makanan 1983 telah meherangkan dengan jelas larangan dalam penjualan makanan yang mengandungi bahan beracun, berbahaya atau memudaratkan kesihatan.

"Oleh itu, ikan buntal yang mengandungi toksin berbahaya tidak dibenarkan dijual," katanya dalam kenyataan semalam.

Noor Hisham menjelaskan, Bahagian Keselamatan dan

Kualiti Makanan (FSQD), KKM telah menghasilkan bahan pendidikan sebagai langkah meningkatkan kesedaran orang ramai berhubung toksin berbahaya dalam ikan buntal.

"KKM akan terus mendidik orang ramai tentang keselamatan makanan termasuk bahaya memakan ikan buntal.

"Tinjauan oleh FSQD, KKM pada tahun 2019 menunjukkan 86 peratus responden yang terdiri daripada orang awam, penjual ikan, nelayan dan tukang masak mempunyai pengetahuan yang mencukupi tentang bahaya pengambilan ikan buntal," katanya.

Sebelum ini Kosmo! melaporkan seorang wanita warga emas maut, manakala suaminya masih dirawat di unit rawatan rapi di Hospital Enche' Besar Hajjah Kalsom Kluang, Johor, selepas keracunan makanan akibat makan ikan buntal.

AKHBAR : KOSMO
 MUKA SURAT : 16
 RUANGAN : NEGARA

Dilarang digunakan dalam pembungkusan makanan

Ramai guna dawai kokot sebab nak cepat

Oleh NORHAFIZAN ZULKIFLI

KUANTAN – Walaupun penggunaan dawai kokot dalam pembungkusan makanan sudah dilarang kerana boleh memudaratkan kesihatan, namun ia tetap digunakan secara meluas di bazar Ramadan di negeri ini.

Berdasarkan tinjauan *Kosmo!* di beberapa bazar Ramadan di daerah ini mendapati, hampir kesemua peniaga menggunakan dawai kokot untuk membungkus makanan kerana ia dikatakan lebih mudah dan cepat.

Namun penggunaan kaedah berkenaan dilihat membimbangkan pengguna yang risau risiko tertelan dawai berkenaan khususnya dalam kalangan kanak-kanak.

Seorang pengguna, Azrul Riduan, 37, berkata, penggunaan dawai kokot yang berleluasa menyebabkan dia bimbang risiko tertelan dawai berkenaan terutama kanak-kanak.

"Saya memang risau tetapi saya tiada pilihan kerana hampir semua peniaga menggunakan kaedah itu. Jadi setiap kali membeli saya akan membuang dahulu semua dawai kokot pada bungkusan sebelum ia dibuka, risaukan anak-anak tertelan."

"Saya pelik kerana setahu sahaja ia dilarang digunakan, tetapi macam tiada penguatkuasaan yang melarangnya, mungkin apabila ada mangsa, barulah ia akan dikuatkuasakan," katanya.

Seorang lagi pengguna, Hafizal Mohamad, 45, berkata, dia mengakui pernah termakan kuih bersama dawai kokot, tetapi beri-



DAWAI kokot berbahaya jika termasuk dalam makanan.



CONTOH penggunaan dawai kokot dalam pembungkusan makanan.

nasib baik kerana tidak tertelan dawai berkenaan.

Justeru katanya, dia berharap pihak berkuasa dapat bertindak proaktif dengan melakukan pemeriksaan bagi melarang penggunaan kaedah berkenaan bagi mengelakkan sebarang tragedi.

"Janganlah apabila ada kejadian tertelan dawai kokot barulah hendak dilakukan penguatku-

saan dan pemantauan, jadi saya harap pihak berkuasa buatlah kerja dan kuat kuasa peraturan ditetapkan," ujarnya.

Sementara itu, Pengarah Kesihatan Negeri, Datuk Dr. Nor Azimi Yunus berkata, penggunaan dawai kokot pada pembungkusan makanan boleh dikategorikan sebagai salah satu pencemaran makanan.

Katanya, peniaga makanan yang menggunakan stapler atau dawai kokot untuk membungkus makanan boleh dikenakan tindakan kompaun di bawah Peraturan-Peraturan Kebersihan Makanan 2009 (PPKM).

"Kalau kita lihat 'stapler' itu sendiri agak bahaya dan jika termasuk dalam makanan boleh membahayakan kepada individu terutama anak-anak kecil."

"Ini merupakan satu inovasi baharu yang tidak sepatutnya berlaku," tegasnya.



NOR AZIMI (dua dari kiri) meninjau sebuah gerai di Bazar Ramadan Taman Tasik Sultan Abu Bakar di Pekan semalam.

Kuku panjang antara kesalahan dikesan

PEKAN – Jabatan Kesihatan Negeri Pahang telah mengeluarkan 34 notis kepada peniaga bazar Ramadan yang didapati gagal mematuhi peraturan ditetapkan sepanjang minggu pertama Ramadan di negeri ini.

Pengarah Kesihatan Negeri, Datuk Dr. Nor Azimi Yunus berkata, dalam pemeriksaan terhadap 892 gerai makanan di bazar Ramadan itu, sebanyak 34 Notis Memerintah Kehadiran Ke Mahkamah Seksyen 32B Aka Makanan 1983 telah dikeluarkan kepada pengendali makanan dengan nilai RM3,500.

"Antara kesalahan yang dikesan di bawah Peraturan-Peraturan Kebersihan Makanan 2009 Aka Makanan 1983 ialah 24 kesalahan di bawah Peraturan 32 iaitu pengendali makanan tidak memakai topi, apron dan kasut semasa mengendalikan makanan."

Selain itu, lima kesalahan

di bawah Peraturan 33 iaitu pengendali makanan gagal memastikan kuku sentiasa pendek dan memakai perhiasa diri ketika mengendalikan makanan.

"Sebanyak 30 sampel makanan telah diambil pada minggu pertama Ramadan dan telah dihantar ke Makmal Keselamatan dan Kualiti Makanan Pahang bagi analisis mikrobiologi," katanya.

Beliau sebelum itu merasmikan Majlis Pelancaran 'Walkabout' Kempen Keselamatan Makanan di Bazar Ramadan Peringkat Negeri Pahang di Bazar Ramadan Taman Tasik Sultan Abu Bakar di sini semalam.

Menurut Nor Azimi, manamana individu yang melakukan kesalahan dan disabitkan kesalahan boleh dikenakan hukuman penjara tidak melebihi dua tahun atau denda sebanyak RM10,000 atau kedua-duanya di bawah seksyen yang sama.

AKHBAR : SINAR HARIAN

MUKA SURAT : 9

RUANGAN : NASIONAL

KKM bincang dengan JPA serap petugas kontrak ke jawatan tetap tanpa pencen

KUALA LUMPUR - Kementerian Kesihatan (KKM) sedang mengadakan perbincangan dengan Jabatan Perkhidmatan Awam (JPA) untuk menyerap petugas perubatan berstatus kontrak ke dalam sistem perjawatan tetap tanpa diberikan pencen.



DR ZALIHA

Menteri Kesihatan, Dr Zaliha Mustafa berkata, ini bagi menangani bebanan tugas yang melebihi kapasiti sumber sedia ada serta untuk mengurangkan beban skim berpencen ditanggung negara ketika ini yang mencecah RM29.1 bilion pada 2021.

"Kita sedar beban kerajaan berdepan dengan skim berpencen iaitu pada 2011 nilainya adalah sebanyak RM3.1 bilion dan kemudiannya meningkat kepada RM29.1 bilion pada 2021, ini merupakan beban yang sangat tinggi dan mungkin

akan terus meningkat.

"Jadi kita memikirkan jalan keluarnya adalah dengan mengusulkan untuk mengambil pekerja kontrak secara tetap tetapi tanpa pencen, namun mereka ini boleh mendapat manfaat yang sama seperti pekerja tetap yang lain antaranya boleh membuat pinjaman perumahan," katanya ketika menjawab soalan tambahan **Datuk Jefridin Atan** yang ingin tahu sama ada KKM mempertimbangkan untuk menambah jawatan doktor kontrak bagi mengatasi masalah bebanan kerja petugas kesihatan.

Sementara itu, Dr Zaliha berkata, kos perbelanjaan yang tinggi merupakan cabaran KKM dalam melaksanakan sistem Rekod Perubatan Elektronik (EMR) di setiap hospital di seluruh negara.

Katanya, pelaksanaan sistem itu memerlukan belanjawan yang tinggi dengan mungkin mencecah bilion ringgit kerana perlu menaik taraf infrastruktur hospital serta kesesuaian bangunan juga diambil kira.

"Peralatan yang sedia ada juga lama, jadi kita perlu menaik tarafnya sama ada membaik pulih atau menggantikan yang baharu. Perkara ini turut menyumbang keperluan bajet yang tinggi selain kos sistem itu sendiri.

"Bagi pelaksanaan yang tuntas mengenai perkara ini, kita memerlukan kerjasama daripada Kementerian Kewangan," katanya ketika menjawab soalan tambahan **Tan Hong Pin (PH-Bakri)** yang ingin tahu jangkaan sistem EMR boleh berintegrasi sepenuhnya serta kekangan dihadapi KKM dalam melaksanakannya kerana dilihat setiap hospital masih bekerja secara silo berhubung rekod perubatan pesakit.

AKHBAR : SINAR HARIAN

MUKA SURAT : 14

RUANGAN : NASIONAL

KKM tidak benar penjualan ikan buntal

Terdapat sebanyak 58 kes dilaporkan dan 18 kematian sejak tahun 1985

Oleh NILAM NUR ATIKAH OSHMAN SHAH ALAM

Kementerian Kesihatan Malaysia (KKM) tidak membenarkan penjualan ikan buntal untuk tujuan hidangan kerana mengandungi toksin berbahaya.

Ketua Pengarahnya, Tan Sri Dr Noor Hisham Abdullah, ini kerana sebanyak 58 kes keracunan ikan buntal telah dilaporkan membabitkan 18 kematian sejak 1985 hingga Mac tahun ini.

Ujarnya, Seksyen 13 A k t a Makanan 1983 turut menerangkan dengan jelas larangan dalam penjualan



DR NOOR HISHAM

mana-mana makanan yang mengandungi apa-apa bahan beracun, berbahaya termasuk memudaratkan kesihatan.

"Pindaan ini telah dihentikan memandangkan kawalan dalam penjualan ikan buntal kini ditetapkan di bawah Akta Lembaga Kemajuan Ikan

Malaysia 1972.

"Bahagian Keselamatan dan Kualiti Makanan (FSQD) KKM telah menghasilkan bahan pendidikan sebagai langkah meningkatkan kesedaran orang ramai berhubung toksin berbahaya dalam ikan buntal.

"KKM akan terus mendidik orang ramai tentang keselamatan makanan termasuk bahaya memakan ikan buntal," katanya dalam kenyataan di Facebook.

Tambah Noor Hisham, tinjauan yang dijalankan oleh FSQD, KKM pada tahun 2019 me-

IKAN BUNTAL TETRAODONTIDAE

TETRODOTOXIN

Tetradotoksin adalah sejenis toksin yang sangat kuat dan berbahaya. Ia adalah sejenis toksin yang tidak beracun apabila dimakan, tetapi ia akan bertindak sebagai racun apabila masuk ke dalam aliran darah. Ia adalah sejenis toksin yang sangat tahan terhadap panas dan memasak. Ia adalah sejenis toksin yang sangat berbahaya dan boleh menyebabkan kematian.

Habitat: Ikan buntal adalah sejenis ikan yang tinggal di perairan tropika dan subtropika. Ia adalah sejenis ikan yang boleh kembung apabila digigit.

Spesies: Terdapat banyak spesies ikan buntal, termasuk Pufferfish, Porcupinefish, dan others.

Gejala: Gejala keracunan ikan buntal termasuk mual, muntah, diare, dan kelemahan. Ia boleh menyebabkan kematian dalam beberapa jam.

Tindakan: Jika anda mengalami gejala keracunan ikan buntal, segera hubungi doktor atau pergi ke hospital. Jangan cuba merawat sendiri.

Terdapat lebih 1,200 spesies ikan buntal di dunia.

Peringatan: Jangan makan ikan buntal. Ia adalah sangat berbahaya.

nunjukkan 86 peratus responden terdiri daripada orang awam, penjual ikan, nelayan dan tukang masak mempunyai pengetahuan yang mencukupi tentang bahaya pengambilan ikan buntal.

Pada Selasa lalu, *Sinar Harian* melaporkan seorang wanita meninggal dunia manakala suaminya dirawat di Unit Rawatan Rapi (ICU) Hospital

Enche' Besar Hajjah Kalsom (HEBHK) di Kuala Lumpur, selepas memakan hidangan ikan buntal, Sabtu lalu.

Exco Kesihatan dan Perpaduan Johor, Ling Tian Soon berkata, wanita berkenaan mengalami gejala sesak nafas dan menggigil pada jam 3 petang sebelum dikejarkan ke HEBHK oleh anaknya.

Laporan *Sinar Harian* mengenai kes ikan buntal.

AKHBAR : SINAR HARIAN

MUKA SURAT : 30

RUANGAN : NASIONAL

Kesedaran kesihatan masih rendah

Penyakit tulang, sendi kurang mendapat perhatian masyarakat umum

Oleh SYAJARATULHUDA MOHAMAD ROSLI
GEORGETOWN

Kesedaran mengenai penyakit melibatkan tulang dan sendi dalam kalangan masyarakat masih rendah menyebabkan pesakit tidak menyedari lebih awal mengenai penyakit mereka itu.

Osteoarthritis adalah nama saintifik bagi penyakit yang menyebabkan kerosakan sendi manakala Osteomyelitis adalah penyakit berkaitan penyakit pada tulang.

Pakar Bedah Ortopedik dan Perubatan Sukan, Hospital Gleneagles, Pulau Pinang, Kol (R) Dr R Vejjayan



Vejjayan menerangkan mengenai kepentingan pemeriksaan berkala kepada peserta kempen.

berkata, sakit tulang dan sendi selalunya akan berlaku kepada mereka yang berusia lebih 50 tahun.

Menurutnya, bagi golongan wanita, tulang secara semula jadi akan menjadi lembut selepas mereka mengalami menopause

kerana pengeluaran kadar hormon akan berkurangan ketika itu.

Kata beliau, antara langkah awal yang boleh diambil bagi mengelakkan kecederaan pada tulang dan sendi adalah mengurangkan berat badan, ber-



Orang ramai sertai Kempen #MovementMatters pada Rabu.

senam, sentiasa aktif dan penjagaan otot yang betul.

Sementara itu, Pakar Bedah Ortopedik dan Traumatologi Hospital Pantai Pulau Pinang, Dr Boon Huck Wee berkata, masyarakat kini dilihat tidak mengambil berat tentang kesihatan tulang

dan sendi kerana tiada pendedahan mengenainya.

Oleh demikian, IHH Healthcare Malaysia dengan rangkaian 16 hospitalnya yang terdiri daripada Hospital Gleneagles, Hospital Pantai dan Pusat Perubatan Prince Court melancarkan Kempen #MovementMatters di seluruh negara untuk mempromosikan kesihatan tulang dan sendi yang lebih baik dalam kalangan rakyat Malaysia.

Kata beliau, kempen tersebut juga bertujuan untuk memerangi keadaan ortopedik dalam kalangan rakyat Malaysia dengan mewujudkan kesedaran tentang kepentingan kesihatan dan pemeriksaan tulang serta sendi.

Kempen #MovementMatters dilancarkan di tiga lokasi iaitu bermula di Kuala Lumpur bermula 15 hingga 19 Mac, di Johor dari 22 hingga 26 Mac dan Pulau Pinang iaitu dari 29 Mac hingga 1 April 2023.

AKHBAR : UTUSAN MALAYSIA
 MUKA SURAT : 4
 RUANGAN : DALAM NEGERI



DOKTOR kontrak dijadual mengadakan sekali lagi mogok pada Isnin hingga Rabu ini bagi menuntut kerajaan menyelesaikan isu perjawatan mereka.

Sistem kesihatan lumpuh Isnin ini?

Oleh **ARIF AIMAN ASROL**
 aiman.asrol@mediamula.com.my

PETALING JAYA: Penganjur kempen mogok doktor kontrak menasihatkan orang awam supaya tidak mengunjungi hospital awam dan klinik-klinik kesihatan pada Isnin hingga Rabu ini kerana mereka berkemungkinan terpaksa menunggu lama untuk mendapatkan rawatan.

Mereka mendakwa, ini kerana lebih 8,000 doktor kontrak akan mengadakan protes dengan mengambil cuti perubatan atau kecederaan secara beramai-ramai.

"Ini sebagai protes untuk menentang sistem yang tidak adil dan gaji di paras rendah. Jadi, jangkaan masa untuk orang

awam menunggu mendapatkan rawatan dijangka mengambil masa lebih lama daripada biasa," katanya menerusi satu hantaran di Instagram akaun @mogokdoktormalaysia.

Tindakan tersebut dilihat akan melumpuhkan sistem kesihatan negara yang digunakan oleh kira-kira 80 peratus daripada sekitar 33.4 juta rakyat negara ini terutama golongan B40 yang jumlahnya mencecah 8.7 juta orang.

Ketidakpuasan hati dalam kalangan pekerja perubatan terutama doktor kontrak dilihat semakin keruh apabila tular sebuah surat yang memaparkan Jabatan Perkhidmatan Awam (JPA) enggan mempertimbangkan kadar bayaran bagi sistem

oncall sebanyak 50 peratus.

Sebelum ini JPA meminta Kementerian Kesihatan untuk meneliti semula keperluan dan kepentingan untuk meneruskan sistem tugas atas panggilan.

Terdahulu, *Utusan Malaysia* melaporkan kenyataan Ketua Pengarah Kesihatan, Tan Sri Dr. Noor Hisham Abdullah yang menyifatkan kempen mogok doktor kontrak itu bukan jalan penyelesaian terbaik dan mungkin menyebabkan perkhidmatan kesihatan negara terjejas.

Beliau berkata, perkara tersebut perlu ditimbang dengan teliti kerana perkhidmatan kesihatan merupakan suatu perkhidmatan yang kritikal kerana ia melibatkan nyawa manusia dan kesejahteraan rakyat.

Tiga tahun selesai isu terlalu lama

PETALING JAYA: Tempoh tiga tahun adalah masa yang sangat lama untuk doktor kontrak menunggu penyelesaian status kerja mereka.

Wakil Hartal Doktor Kontrak (HDK) yang tidak mahu dikenali berkata, penyelesaian segera harus diambil memandangkan isu itu sudah berlaku lama dan tiada penyelesaian konkrit.

"Ramai doktor kontrak sudah meninggalkan perkhidmatan mereka menyebabkan sistem kesihatan negara amat terbeban dengan staf yang kurang dan pesakit yang semakin bertambah setiap hari.

"Kalau tidak diselesaikan segera dan terpaksa menunggu hingga tiga tahun bagi mendapatkan penyelesaian, sistem kesihatan negara mampu runtuh dan rakyat juga yang akan terkesan.

"Perkara ini sepatutnya boleh diselesaikan sekiranya kerajaan sedia ada benar-benar meletakkan kepentingan rakyat sebagai keutamaan mereka.

"Kerajaan Madani yang bertunjangkan kebajikan rakyat sudah pasti akan cuba menyelesaikan isu ini secepat dan sebaik mungkin untuk kepentingan bersama," katanya ketika dihubungi *Utusan Malaysia*.

Kelmarin Perdana Menteri, Datuk Seri Anwar Ibrahim memberi jaminan isu doktor kontrak akan dapat diselesaikan dalam masa tiga tahun lagi.

Menurutnya, kerajaan mahu menyelesaikan isu pelantikan tetap 4,000 doktor kontrak seperti yang dituntut yang bermakna kerajaan memerlukan RM10 bilion setahun.

"Perkara itu tidak mungkin. Sebab itu, saya bagi jaminan, tahun ini 1,500 lantikan, tahun depan atau berikutnya, katakan dalam tempoh tiga tahun, kita boleh selesaikan masalah ini," kata Perdana Menteri.

AKHBAR : NEWS STRAITS TIMES

MUKA SURAT : 1

RUANGAN : MUKA HADAPAN



AKHBAR : NEWS STRAITS TIMES

MUKA SURAT : 4

RUANGAN : NEWS / NATION

VAPE INDUSTRY

HEALTH, FINANCE MINISTRIES AT ODDS

Tax revenue, health at heart of disagreement over proposal to remove liquid nicotine from Poisons List

ALIZA SHAH
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THE Finance Ministry and Health Ministry are at odds over the proposal to remove liquid nicotine from the Poisons List.

The Finance Ministry is pushing for this to expedite the legalisation of nicotine-laced vape products, which would allow the government to tax such products and boost income amid flagging government revenue.

On the other hand, the Health Ministry is firmly behind its stand that the Control of Tobacco Products and Smoking Bill 2022, also known as the Generational Endgame (GEG) Bill, should be passed first before the vape industry is legalised to safeguard the young from nicotine addiction.

During the tabling of the 2023 Budget in February, Prime Minister Datuk Seri Anwar Ibrahim had voiced the government's support for the GEG Bill.

But Anwar, who is also finance minister, had noted that some RM2 billion in vape products had been sold despite being illegal.

He said the government would impose an excise duty on liquid or gel products containing nicotine, with half the proceeds going to the Health Ministry to improve the quality of health services.

The *New Straits Times* learnt that a move to expedite the taxation of these items was in the works, with the Customs Act



A no-smoking sign at an eatery in Kota Kinabalu. The Health Ministry wants the Control of Tobacco Products and Smoking Bill 2022, also known as the Generational Endgame bill, to be passed first before the vape industry is legalised.
FILE PIC

amended to allow the entry of nicotine-laced vape products into the country.

However, it is understood that for the product to be sold openly, the government must first remove liquid nicotine from the Poisons List 1952.

Speculation is mounting among industry insiders that this might come sooner than expected.

On March 21, the Finance Ministry published a list of taxes announced in the 2023 Budget that would be delayed.

Taxes on liquid or gel products containing nicotine, such as vape liquids, were not on the list, giving industry observers the impression that the government would proceed with its implementation on Saturday.

It is understood that the Health Ministry's Poisons Board must approve the removal of nicotine from the Poisons Act.

A source familiar with the issue

told the NST that the board, which met on Wednesday, had shot down the finance minister's proposal to remove the item from the act.

It is understood the meeting was chaired by the Health Ministry's Pharmaceutical Services senior director, Norhaliza A. Halim, who is Poisons Board co-chairman.

"As a result of the rejection, the minister will now have to present the findings to the cabinet," the source said.

Health director-general Tan Sri Dr Noor Hisham Abdullah did not respond to queries on the subject.

The NST learnt that the Finance Ministry had sent at least two letters to push for the Health Ministry's support to legalise the nicotine vape industry.

The NST also sighted a letter dated Feb 22 sent by an industry player to Deputy Finance Minister Steven Sim requesting the government to immediately regulate the industry without waiting for the

GEG Bill to be passed.

The industry player suggested that the government consider regulating the industry through the Food Act 1983.

The letter also contained a revised draft of the Food Act and the Poisons Act.

The source described the draft as "one-sided" and that it only looked at the industry's needs and neglected public health.

The source said the placement of tobacco under the Food Act was meant to be temporary and a new act was needed to regulate cigarettes and vapes.

"How can we consider tobacco or nicotine foodstuff? We need to understand that the placement of tobacco under the Food Act then was meant to be temporary.

"Since then, the Health Ministry has been trying hard to enact a new law that regulates them. The GEG was supposed to be it.

"But it has yet to be approved

until now," the source said.

Recently, the Malaysian Medical Association and Malaysian Pharmacists Society (MPS) voiced their opposition to the removal of nicotine from the controlled substances list under the law ahead of the implementation of a new tax for vape products.

MPS president Amrabi Buang had called on the government to reject the proposal to protect public health and safety.

On Wednesday, Health Minister Dr Zaliha Mustafa said the ministry was committed to speeding up the tabling of the GEG Bill.

She said the bill could not make it to the current Dewan Rakyat sitting, so she would try to table it in the next session in May.

"(We are aware) the government is working on a vape tax, but we are working to speed up the tabling of the Tobacco Control Bill," she said. **Additional reporting by Nur Zarina Othman**

NGOs: Regulate vape industry before delisting nicotine as poison

KUALA LUMPUR: Public health interest groups have likened the decision to rush the removal of nicotine from the Poisons Act before the vape industry is legalised to "putting the cart before the horse".

National Cancer Society Malaysia managing director Dr Muralitharan Munisamy said the move would allow the vape industry to

make its mark without control.

"This would allow vape products to be sold openly to anyone, including children, just so that tax revenue can be collected."

Malaysian Organisation of Vape Entity president Samsul Kamal Ariffin said the move should be postponed until there were guidelines to regulate the vape industry.

He said the government should first draft regulations for manufacturers, sellers and consumers.

"The government has decided to regulate the vape industry. One way is to remove nicotine from the (poisons) list so that sellers could be taxed.

"For manufacturers, they have to spell things out, such as where they can produce and if they need

a 'clean room'.

"For sellers, they have to decide who can sell, where (such as distance from schools) and if kids under 18 can enter the shop."

Southeast Asia Tobacco Control Alliance senior policy advisor Dr Mary Assunta said nicotine must remain a poison under the Poisons Act as it was an addictive and harmful substance.

She said lobbying to remove it from the poisons list was irresponsible as children were most vulnerable to the substance and there were already many cases of nicotine poisoning involving children.

"Removing nicotine as a poison is not based on scientific evidence. Vaping harms the lungs and heart, and vapers have ended up in intensive care in hospital."

AKHBAR : NEWS STRAITS TIMES

MUKA SURAT : 7

RUANGAN : NEWS / NATION

CONTRACT EXPIRES TODAY

STUDY TO MAKE MYSEJAHTERA PUBLIC HEALTH SUPER APP ONGOING

Government will decide how the app will be managed in the future

THE Health Ministry is in the process of determining how the app will be managed in the future as MySejahtera's application management contract expires today.

Minister Dr Zaliha Mustafa in a parliamentary written reply said

the ministry was still studying the move to make MySejahtera the country's digital public health super app.

"On the procurement of the app, the ministry, acting on behalf of the government, and the company have agreed that the intellectual property, developed modules as well as data, brand and MySejahtera logo belong to the government.

"The government has full ownership of MySejahtera platform through perpetual licence with no cost even if the contract is not extended or the government de-

cides to appoint a different party to manage the app," she said in reply to a question from Wong Chen (Pakatan Harapan-Subang).

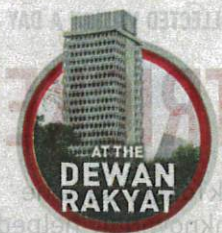
Dr Zaliha said the government would also include additional modules in the app via the licence for any purpose related to the digitalisation of public health services without restriction.

She said the ministry had submitted an application to the Finance Ministry on Dec 27, 2021, on the management of the app through direct negotiation for the period between April 1, 2021,

and March 31, this year.

"Following the approval letter from the Finance Ministry dated Feb 22, 2022, the ministry has sought the view and endorsement of the Attorney-General's Chambers to conclude the procurement, including finalising the price negotiation findings through the price negotiation committee.

"In fact, the Finance Ministry has also agreed with the cost verified by the Health Ministry on the procurement of the management of MySejahtera through direct negotiation."



MYSEJAHTERA

PURPOSE



As a self-assessment app, which helps MoH obtain early information on a person's health amidst the spread of Covid-19. This helps a person to take prompt action

FEATURES



A user can get more information on Covid-19 hotspots within 1km radius



Provides information on nearest Covid-19 screening facilities and online advice

TIMELINE

May 2020

Authorities estimate that 752,711 people are required to download MySejahtera for travel purposes

Aug 3, 2020

Government officially mandates the use of MySejahtera for all businesses nationwide.

Nov 18, 2020

MySejahtera records 23.95 million registered users, and 1.06 million businesses.

Figures show there are 1.7 billion cumulative check-ins at registered premises using the QR code scans with an average of 15 million check-ins daily.

Feb 2021

Covid-19 patients quarantined at home begin to update health status on MySejahtera. Registration for the National Immunisation Programme begins.

Oct 2021

MySejahtera integrates vaccination records for travellers aka Traveller's Pass

Dec 2021

MySejahtera introduces MySJ Trace function.

July 2022

Health, childhood immunisation records now on MySejahtera app.

Dec 2022

People can now make appointments at Health Ministry clinics and hospitals using the MySejahtera application.

INFOGRAPHIC: NST

'National healthcare digitalisation to cost billions'

THE digitalisation of the country's healthcare system will cost the government billions of ringgit, the Dewan Rakyat heard yesterday.

Health Minister Dr Zaliha Mustafa said a huge allocation would be needed to achieve this as it would involve upgrading infrastructure and using data cloud.

"A building must be suitable for digitalisation. When some of the equipment are old and need upgrading or replacement, this will contribute to the huge budget.

"In moving forward, we need cooperation from the Finance Ministry on such matters," she said in reply to a supplementary question from Tan Hong Pin (Pakatan Harapan-Bakri).

Tan had earlier questioned on the progress in the digitalisation of the healthcare system as he pointed out that there was no integration of data between different hospitals.

"I went to the Kluang Hospital and filled up a form and when I was transferred to the Johor Baru hospital later, I had to repeat the same process and the doctor there asked for the history of my illness.

"Why is the system not fully integrated and what are the limitations to achieve this?

"Each hospital still works in silo to this day," he said.

Earlier, Dr Zaliha said the ministry's Health Information System (HIS@KKM), a main component of work processes at hospitals and clinics, is being implemented in phases through



Health Minister Dr Zaliha Mustafa replying to a supplementary question from Tan Hong Pin (Pakatan Harapan-Bakri) in Parliament yesterday. BERNAMA PIC

approved projects under the Rolling Plan of Malaysia.

She said under the fourth rolling plan of the 11th Malaysia Plan, seven hospitals in Negri Sembilan were involved in the Electronic Medical Record (EMR) system; another seven hospitals nationwide were included in HIS@KKM under the second rolling plan of the 12th Malaysia Plan.

"The digitalisation at primary healthcare started in 2005 with the Teleprimary Care (TPC) system and subsequently the Teleprimary Care-Oral Health Clinical Information System (TPC-OHCIS) in 2017 at health and dental clinics.

"The system allows patients'

treatment and registration, as well as medicine dispensary and medical records to be done electronically."

The minister said data from the system could be used in reports for the purpose of planning health programmes and providing data to mobile app for the purpose of life-long medical records.

This would allow patients' medical records to be shared among health clinics via TPC-OHCIS, she said.

To date, a total of 103 health clinics have been equipped with the TPC-OHCIS and 42 clinics in Negri Sembilan would have a similar system through the national EMR project, she said.

She said only 27.5 per cent of hospitals had utilised the TPC system while 9.5 per cent of clinics and 4.4 per cent of dental clinics have adopted the TPC-OHCIS.

Meanwhile, Dr Zaliha said 1,027 health clinics were using the online appointment system via MySejahtera, and 370 health clinics were offering virtual clinic services.

"The next plan is to expand all related systems as a whole to achieve the integrated healthcare information system.

"It is our aim to see patients have their medical records (in the system) and be able to retrieve their data when they go to any clinic."

AKHBAR : THE STAR
MUKA SURAT : 6
RUANGAN : NATION

Some can skip booster shots, but not safety steps

By RAGANANTHINI VETHASALAM
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PETALING JAYA: Health experts say that the people who choose to skip the second booster shot against Covid-19 should continue to observe precautionary measures to keep respiratory ailments at bay.

This came in the light of WHO's revised recommendation for Covid-19 vaccination for non-high risk groups, where experts said those who are not required to have an additional booster jab ought to exercise precautionary measures.

According to the UN agency, Covid-19 vaccination recommendations tailored for a new phase of the pandemic suggested that healthy children and adolescents may not necessarily need a shot, but older, high-risk groups should get a booster between six and 12 months after their last vaccine dose.

Commenting on the development, public health advocate Datuk Dr Zainal Ariffin Omar said this is a rational and practical approach, adding that it is justified for the second booster to be made optional for younger children and adults.

"The booster should be an option offered to high-risk groups i.e. the elderly with chronic diseases and younger age groups with higher risk, for example the immunocompromised," he said.

As for those who can skip their booster shot, he said they should be mindful of their environment and avoid coming into contact with symptomatic people.

"Generally, previous vaccination seems enough for protection," he said.



Immunity boost: High risk groups, such as the elderly, should be given priority for further Covid-19 vaccines.

"Although Covid-19 is still around, with the current trend of infection, the transmission is no longer a big threat," he said.

Meanwhile, Dr Raj Kumar Maharajah, president of Medical Practitioners Coalition Association of Malaysia, said other ways to nurse the immune system can include increasing the intake of vitamin C, eating fruits and vegetables, exercising regularly and having a healthy state of mind.

"All these are ways to boost your immunity without taking booster

shots, but of course, the more specific way to prevent Covid-19 is booster shots," he said.

On Tuesday, the WHO said its current aim was to focus efforts on vaccinating those facing the greatest threat of severe disease and death from Covid-19, in the light of high population immunity worldwide due to widespread infection and vaccination.

It said healthy children and adolescents were a low priority for Covid-19 vaccination, adding that countries must consider factors like

disease burden before they can recommend further vaccination of this group.

As for high priority groups, an additional booster is recommended either six or 12 months after the last dose.

The time frame will depend on factors such as age and state of one's immunity related to their health and condition.

WHO's recommendations, however, are time-limited and applies only to the current epidemiological scenario.

Dengue case numbers to peak this year following cycle uptrend

By FAZLEENA AZIZ
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PETALING JAYA: The rising number of dengue cases is part of a cyclical trend and is expected to peak this year, says Tan Sri Dr Noor Hisham Abdullah.

The Health director-general said this was based on national data, which shows that dengue trends follow a cyclical pattern with an epidemic being reported every four to five years.

"The recent dengue epidemics were observed in 2014 and 2019, with an average of 2,300 cases per week and 2,500 cases per week reported respectively."

"The rising number of dengue cases is partly contributed by the change in dominant circulating dengue serotype, or the 'serotype shift', which is a well-known reason for dengue surges."

"It has been observed that dengue cases will increase usually four to six months after a serotype shift due to the lack of immunity in the community towards the new dominant circulating serotype," he said in a statement yesterday.

From the Health Ministry's surveillance monitoring, there has been a shift of the circulating dengue virus serotype from DEN 3 to DEN 4 since June 2021, Dr Noor Hisham added.

Since then, the DEN4 serotype has been the dominant circulating virus serotype in the environment, he said.

In 2022, Malaysia reported 66,102 dengue cases with 56 deaths, compared to 26,365 cases with 20 deaths in 2021.

This was an increase of 150.7% in dengue cases and a 180% increase in deaths from the previous year.

Dr Noor Hisham said that other countries in the region are also seeing a rise in dengue this year.

In terms of contributing factors, he pointed out that human behaviour, such as littering, is among the main reasons for poor environmental cleanliness.

"The abundance of man-made containers (being littered) have provided suitable breeding places for Aedes mosquitoes," he said, adding that climatic change is also an important factor, especially with alternating rainy and hot seasons.

Doctors' strike will lead to long waits, group warns

PETALING JAYA: After the threat of a nationwide strike, the Mogok Doktor Malaysia (Malaysian Doctors on Strike) group has now cautioned people not to go to health clinics and public hospitals on April 3-5, as the waiting times are expected to be longer while the strike is underway.

Previously, the movement of doctors attached to the Health Ministry had urged contract medical officers to take emergency or medical leave on the dates proposed as a sign of protest.

"Kindly do not visit any general hospitals or government clinics from April 3 to 5," it said in an Instagram post yesterday.

"There are more than 8,000 contract doctors who are going on a strike by taking medical/emergency

leave as a protest against the unfair system and low wages. So, your time of waiting will be longer than usual. Thank you," it added.

Organisers told *The Star* on Tuesday that they asked doctors to take emergency or medical leave as they do not encourage demonstrations or flashmobs.

They also warned of potential mass resignations on April 1.

A representative of the group, who declined to be named, said it had decided to proceed with the strike peacefully by instead taking emergency leave or medical leave "because demonstration or walk-outs will cause harm".

"We have confirmed that an estimated 8,000 out of some 20,000 contract medical officers (MOs) will

participate in this strike or mass resignation event," the representative said when contacted.

"(Some) 3,000 contract MOs will resign on April 1, while the rest will not be present to work from April 3-5," the representative said.

The group's demands include the absorption of all contract MOs into permanent positions without any conditions or interviews; basic salary increments; higher on-call rates; a resolution to the shortage of specialists, MOs and house officers; and an automatic reduction in the compulsory service term for medical officers to three years.

It is also calling for a reduction in on-call and work hours for MOs and house officers, while on-call hours should not exceed six times a month

and working hours needed to be capped at 60 hours a week.

Health director-general Tan Sri Dr Noor Hisham Abdullah had said a strike is not the best way to handle issues related to the medical or any other profession.

Separately, Health Minister Dr Zaliha Mustafa reportedly told the Dewan Negara that the ministry was engaging with the Public Service Department (PSD) to absorb contract medical personnel as permanent staff without pensions.

Bernama reported her as saying that this was to manage the workload which had exceeded the capacity of available resources and to reduce the burden on the pension scheme, which had amounted to RM29.1bil in 2021.

AKHBAR : THE SUN

MUKA SURAT : 2

RUANGAN : NEWS WITHOUT BORDERS

High cost to implement Electronic Medical Record system

KUALA LUMPUR: The high cost of implementing the Electronic Medical Record (EMR) system in hospitals nationwide is a challenge for the Health Ministry, the Dewan Rakyat was told yesterday.

Health Minister Dr Zaliha Mustafa said its implementation requires a high budget, which might reach a billion ringgit as it would entail the upgrading of the

infrastructure of hospitals and ensuring the suitability of buildings.

"The existing equipment is also old, so we need to upgrade them, either by repairing or replacing them with new ones. This also contributes to the high budget requirement, in addition to the cost of the system itself.

"For the complete implementation of this system,

we need cooperation from the Finance Ministry."

She was replying to a supplementary question from Tan Hong Pin (PH-Bakri), who wanted to know when the EMR system could be fully integrated and the constraints faced by the ministry in implementing it.

Zaliha said a total of 103 health clinics have been equipped with the Teleprimary Care - Oral

Health Clinical Information System and another 42 health clinics in Negri Sembilan would be equipped with the system through the National EMR project.

"There are 1,027 health clinics that use the online appointment system through the MySejahtera application, while 370 health clinics offer virtual clinic services to their customers." - Bernama

AKHBAR : THE SUN

MUKA SURAT : 4

RUANGAN : NEWS WITHOUT BORDERS

Ministry in talks to absorb contract docs

KUALA LUMPUR: The Health Ministry is holding discussions with the Public Service Department to absorb contract medical personnel as permanent staff without pension.

Health Minister Dr Zaliha Mustafa said this is to deal with the workload that exceeds the capacity of available resources and to reduce the burden on the pension scheme borne by the country, which amounted to RM29.1 billion in 2021.

"We are aware of the burden facing the government with the pension scheme, which in 2011 was worth RM3.1 billion and increased to RM29.1 billion in 2021. So, the way out is to absorb contract workers on a permanent basis, but without pension, yet they enjoy the same benefits as other permanent workers, like being eligible for a housing loan," she said at a question-and-answer session in the Dewan Negara yesterday.

She was replying to a supplementary question from Datuk Jefridin Atan, who wanted to know whether the Health Ministry was considering employing more contract doctors to reduce the workload of healthcare workers.

Zaliha said due to an increase in the number of non-communicable disease cases, the ministry is facing an increase in the number of patients at health facilities, which is causing overcrowding in hospitals.

"To reduce overcrowding in hospitals, we have implemented a pilot project led by the Special Task Force on Public Sector Reform supervised by the chief secretary to the government.

"The ministry is also intensifying its digitalisation efforts to reduce the workload of its members, in addition to implementing scheduling practices that can help ensure members have sufficient rest time between shifts, including giving leave to health workers." - Bernama

PM: Health sector woes can be resolved in 3 years

➤ Dewan Negara told that government will need more than a year to deal with issues plaguing profession

■ BY RAJVINDER SINGH
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PETALING JAYA: Rumours of a strike and resignations by contract doctors next month have been making rounds on social media and this has attracted the attention of Prime Minister Datuk Seri Anwar Ibrahim, the Health Ministry and Malaysian Medical Association (MMA).

Anwar assured contract doctors that 1,500 of them will be made permanent this year and the government will need three years to resolve the problems they faced.

He told the Dewan Negara on Wednesday the problem of permanent placement had been around for a long time and the current government could not resolve it within a year.

"If we were to give all 4,000 (contract doctors) a permanent placement as demanded, we will need more than RM10 billion a year. So, this is impossible.

"(I assure you), there will be 1,500 permanent placements this year, next year and the year after, let's say in three years

time, we can resolve this (issue)," he said when presenting the supply bill for its second reading.

Meanwhile, MMA president Dr Muruga Raj Rajathurai urged the government to look into issues facing contract doctors.

He said the government should view the planned strike as a wake-up call and it should not come as a surprise to the government as the frustration felt by these doctors has gone way past their limit.

"MMA does not condone a strike as a means to get the government to address the issues. However, we understand (why doctors have decided to take) this route.

"Past governments have not been able to address the issue of contract doctors and they feel they are getting nowhere.

"It is hard for them to go about their duties with this feeling of uncertainty.

"MMA has fought hard for (the) issue to be resolved and the progress has been unsatisfactory."

He said the issue of permanent positions has dragged on for years, where there are not enough permanent positions and contract doctors are overworked and underpaid.

"And yet these doctors are expected to carry out their duties as a 'service for the nation'. It is totally unfair and many feel they are being taken advantage of.

"The 1,500 positions announced in Budget 2023 is not much different from the 1,500 permanent positions promised every year during the previous health minister's term."

Muruga Raj urged contract doctors not to proceed with the strike as it could affect patient care at public healthcare facilities and cause colleagues to take on additional responsibilities at the country's already overcrowded public healthcare facilities.

Muruga Raj said the issue of contract doctors is inherited and is a result of failed policies of the past.

The Health Ministry and the government must take full responsibility for any outcome

in the event of a strike.

A group has threatened mass resignations and a nationwide strike next month that could involve some 8,000 contract doctors.

An account known as "Mogok Doktor Malaysia" (Malaysian Doctors on Strike) has since emerged on social media.

The organisers have asked those on strike to take emergency or medical leave from April 3 to April 5 as a sign of protest, adding that it does not encourage demonstrations and flashmobs. They also threatened mass resignations on April 1.

A spokesman for the group said an estimated 8,000 contract medical officers (MO) out of some 20,000 will participate in this mass resignation and strike.

He added that 3,000 contract MO will resign on April 1, while the rest will not be present for work from April 3 to April 5.

The group's demands include the absorption of all contract MO into permanent positions without any conditions or interviews, a basic salary and on-call rate hike and a resolution for the shortage of specialists, MO and house officers.

Health Ministry Director-General Tan Sri Dr Noor Hisham Abdullah said on Wednesday that a strike was not the best solution and implored aggrieved parties to reconsider the strike as healthcare is a critical service.

He said healthcare service must continue to be regarded as a critical sector due to the complexity, challenges and risks healthcare workers face in carrying out their duties and responsibilities.

"Covid-19 has taught us that without a resilient healthcare system, the country might not have been able to control the pandemic and people would not have been able to carry on with their lives.

"Healthcare workers, who are the main assets of healthcare services, need to continue to be given due attention, including appropriate remuneration for their services."

AKHBAR : THE SUN

MUKA SURAT : 5

RUANGAN : NEWS WITHOUT BORDERS

Sale of puffer fish containing toxins banned

PUTRAJAYA: Puffer fish which contain dangerous toxins are not allowed to be sold in Malaysia, said Health Director-General Tan Sri Dr Noor Hisham Abdullah.

He added that the sale of puffer fish is controlled under the Malaysian Fisheries Development Authority Act 1972 and that Section 13 of the Food Act 1983 prohibits the sale of any food that has any substance which is poisonous, harmful or otherwise injurious to health.

He said this following a report that an elderly woman in Kluang, Johor died of poisoning last Saturday while her husband was still being treated in the intensive care unit after consuming puffer fish.

Noor Hisham said data from the Disease Control Division of the Health Ministry showed that 58 puffer fish poisoning incidents involving 18 deaths were reported since 1985.

Bernama