AKHBAR : BERITA HARIAN
MUKA SURAT : 18
RUANGAN : NASIONAL

Pendedahan sinaran UV tingkat risiko kanser kulit

Kuala Lumpur: Selain strok haba, kekejangan, pitam atau pengsan akibat cuaca panas melampau, pendedahan terhadap sinaran ultra ungu (UV) berlebihan turut meningkatkan risiko kanser kulit.

Pakar kesihatan awam, Dr Mohd Hafiz Jaafar, berkata sinaran UV berlebihan turut mengakibatkan kerosakan DNA sel kulit.

Sehubungan itu, beliau menasihati orang ramai mengurangkan aktiviti yang menyebabkan berlaku pendedahan terhadap cahaya matahari.

"Sekiranya perlu, gunakan pelindung matahari seperti payung, topi, kaca mata hitam bagi melindungi diri daripada terdedah cahaya matahari, terutama pada waktu tengah hari.

"Selain itu, kurangkan waktu diambil ketika menjalankan aktiviti luar dan lakukan aktiviti riadah pada waktu redup, sama ada awal pagi ataupun menjelang senja.

"Paling penting, gunakan juga losyen pelindung UV ketika menjalankan aktiviti ini," katanya kepada *BH*.

Sebelum ini Timbalan Menteri Kesihatan, Lukanisman Awang Suani memaklumkan bilangan kes kesihatan akibat cuaca panas melampau di negara ini dijangka bertambah kesan peningkatan suhu berterusan sehingga Ogos ini.

Beliau dilaporkan berkata, sebanyak 14 kes direkodkan berlaku di seluruh negara membabitkan Kelantan, Sarawak dan Sabah.

Lukanisman turut menasihati orang ramai sentiasa merujuk infografik dikeluarkan Kementerian Kesihatan (KKM) berkenaan strok haba dan pastikan berada dalam bangunan, tempat redup dan mementingkan pengambilan air.

Amal langkah pencegahan

Mengulas lanjut Dr Mohd Hafiz berkata, cuaca panas melampau turut menyebabkan kepenatan dan keletihan *(heat exhaustion and fatigue)*.

"Strok haba adalah sejenis strok yang berlaku akibat kepanasan dan pesakit juga boleh mengalami heat syncope yang mana mereka akan pengsan atau pitam secara tiba-tiba akibat peningkatan suhu badan dan kepanasan.

"Kekejangan juga boleh berlaku akibat dehidrasi yang berpunca daripada kepanasan yang mana berlaku ketidakseimbangan mineral dalam badan kita.

"Selain itu, kes membabitkan *heat exhaustion and fatigue* adalah kesan paling ringan yang boleh berlaku akibat pendedahan kepada cuaca panas," katanya.

Beliau berkata, orang ramai dinasihatkan mengamalkan langkah pencegahan bagi mengelakkan diri daripada diserang penyakit yang berkemungkinan berlaku disebabkan cuaca panas melampau.

Dalam pada itu, beliau berkata, pemilihan material pakaian yang sesuai, terutama kapas juga penting sebagai langkah pencegahan untuk mengelakkan daripada diserang penyakit akibat cuaca panas.

> Gunakan pelindung matahari seperti payung, topi, kaca mata hitam bagi melindungi diri daripada terdedah cahaya matahari, terutama pada waktu tengah hari

***Dr Mohd Hafiz Jaafar,** Pakar kesihatan awam*

"Elakkan pakai gelap kerana warna gelap akan menyerap lebih banyak haba dan jangan pilih pakaian yang ketat kerana ia boleh memerangkap haba.

"Minum air kosong dengan kerap dan banyak dan jadikan tabiat ini secara berkala, walaupun kita tidak berasa dahaga," katanya.

KERATAN AKHBAR
UNIT KOMUNIKASI KORPORAT
KEMENTERIAN KESIHATAN MALAYSIA

15 MEI 2023

AKHBAR : HARIAN METRO
MUKA SURAT : 3
RUANGAN : LOKAL

ANGGOTA Penguat Kuasa KKM mengambil tindakan terhadap perokok yang menghisap rokok di tempat awam sekitar Taman KLCC, semalam. - Gambar NSTP/HAZREEN MOHAMAD

Dah beritahu, berdegil juga!

Dua wanita warga asing hisap shisha di meja makan dikompaun dalam operasi bersepadu

Oleh Nurul Hidayah Bahaudin
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Kuala Lumpur

Dua pelanggan wanita warga asing yang menghisap shisha di meja makan di Jalan Alor di sini, 'menghilangkan diri' selepas menyedari kehadiran anggota penguat kuasa dalam Operasi Mega Bersepadu Peraturan-Peraturan Kawalan Hasil Tembakau (PPKHT), kelmarin.

Ketika dihampiri anggota penguatkuasa, dua wanita terbabit mendakwa mereka mendapat kebenaran pemilik kedai untuk menghisap shisha dipesan daripada individu yang menawarkannya.

Pemilik kedai makan di lokasi berkenaan memaklumkan dua pelanggan terbabit memesan shisha berkenaan daripada individu menjualnya dari tempat lain.

"Ada orang jual shisha dengan menawarkannya dari meja ke meja di kawasan ini. Bila ada pelanggan yang mahu shisha, mereka akan tinggalkannya di tepi meja sahaja.

"Saya sudah maklum mereka tidak boleh hisap shisha di sini namun ada pelanggan yang berdegil dan tetap melakukan perbuatan itu," katanya.

Wanita dianggarkan berusia 40-an terbabit antara individu dikenakan kompaun dalam operasi berkenaan yang bermula jam 6 petang, kelmarin.

Timbalan Ketua Pengarah Kesihatan (Kesihatan Awam) Datuk Dr Norhayati Rusli berkata, sebanyak 125 notis kesalahan dikeluarkan dalam operasi dijalankan di Pusat Konvensyen Kuala Lumpur (KLCC), Jalan Alor dan Kampung Baru di sini.

Katanya, jumlah itu membabitkan 34 notis di premis makan, dalam kenderaan awam atau hentian pengangkutan awam (18), pusat beli-belah (44), taman awam (21) dan laluan pejalan kaki berbumbung (2).

> *Satu kompaun kesalahan merokok membabitkan orang belum dewasa (ODB) turut dikeluarkan selain satu lagi notis kesalahan tiada tanda larangan"*
>
> **Dr Norhayati**

"Kami turut mengeluarkan empat notis kesalahan kepada pemilik premis kerana gagal memastikan tiada orang merokok di premis masing-masing iaitu membenarkan shisha.

"Satu kompaun kesalahan merokok membabitkan orang belum dewasa (ODB) turut dikeluarkan selain satu lagi notis kesalahan tiada tanda larangan.

"Bagi kompaun kesalahan terbabit dikenakan denda RM250 setiap satu, manakala bagi kesalahan membabitkan ODB pula adalah RM50 menjadikan jumlah keseluruhan kompaun sebanyak RM31,500," katanya pada sidang media di Jalan Alor di sini, kelmarin.

Norhayati berkata, sebanyak 12,773 operasi dijalankan pada 2022 dan 4,113 operasi dijalankan bagi tempoh Januari hingga Mac lalu.

"Sebanyak 30,648 notis kesalahan dengan nilai RM7.6 juta dikeluarkan pada tahun lalu, manakala bagi tempoh Januari hingga Mac lalu, sebanyak 13,331 notis kesalahan bernilai RM3.3 juta dikeluarkan bagi kesalahan merokok di tempat makan.

"Lima negeri dengan pengeluaran notis kesalahan merokok di tempat makan paling tinggi pada 2022 adalah Selangor (6,414 notis), Johor (3,095 notis), Pahang (2,935 notis), Perak (2,808 notis) dan Pulau Pinang (2,725 notis)," katanya.

Beliau berkata, larangan merokok bukan bertujuan untuk menghukum golongan perokok tetapi bagi mengelakkan komplikasi akibat tabiat itu kepada individu lain di sekeliling mereka.

"Pengguna rokok elektronik atau vape juga boleh membahayakan orang di sekeliling berdasarkan kajian dijalankan di peringkat antarabangsa.

"Justeru itu, perokok dan pengguna rokok elektronik diseru supaya berhenti merokok mengikut kaedah rawatan diiktiraf Kementerian Kesihatan Malaysia (KKM).

"Pendaftaran ke perkhidmatan berhenti merokok mQuit boleh dibuat melalui laman sesawang www.jomquit.com," katanya.

KERATAN AKHBAR
UNIT KOMUNIKASI KORPORAT
KEMENTERIAN KESIHATAN MALAYSIA

15 MEI 2023

AKHBAR : KOSMO
MUKA SURAT : 1
RUANGAN : MUKA HADAPAN

CUTI SAKIT PALSU SEBABKAN RUGI JUTAAN RINGGIT

Majikan kerugian tiga kali ganda kos operasi angkara pekerja beli MC semurah RM30

Oleh AZMI NORDIN

PETALING JAYA – Majikan terpaksa menanggung rugi sekurang-kurangnya tiga kali ganda kos operasi yang mencapai nilai jutaan ringgit, hanya kerana pekerja sering mengambil sijil cuti sakit (MC) palsu sehingga cuti sakit yang diperuntuk dalam tempoh setahun habis digunakan.

Kerugian besar tu dipengaruhi kos untuk mendapatkan pekerja ganti termasuk melakukan kerja lebih masa bagi memastikan syarikat dapat berjalan seperti biasa serta pembayaran gaji asas mereka.

Majikan juga terpaksa membayar semula bil perubatan palsu yang dituntut pekerja terbabit bernilai ratusan ringgit, biarpun MC palsu yang dibeli mereka semurah RM30 sahaja.

Presiden Persekutuan Majikan-majikan Malaysia (MEF), Datuk Dr. Syed Hussain Syed Husman berkata, cuti sakit sebanyak 22 hari dan 60 hari pula jika dimasukkan ke hospital sebenarnya sudah cukup membebankan majikan.

» BERSAMBUNG DI MUKA 2

KERATAN AKHBAR
UNIT KOMUNIKASI KORPORAT
KEMENTERIAN KESIHATAN MALAYSIA

15 MEI 2023

AKHBAR : KOSMO
MUKA SURAT : 2
RUANGAN : NEGARA

Cuti sakit palsu sebabkan rugi jutaan ringgit

DARI MUKA 1

Menurut beliau, kos yang ditampung untuk cuti itu yang disediakan majikan mampu mencapai jutaan ringgit sekiranya pekerja mengambil kesemua cuti sakit dalam setahun.

"Malah, jika pekerja sering mengambil MC palsu, pastinya majikan terpaksa menanggung kerugian yang tinggi disebabkan sikap tidak berintegriti ini.

"Dengan mengambil MC palsu, majikan terpaksa membayar kos perubatan pekerja yang kebanyakannya melebihi RM100, diikuti gaji mereka dan juga kos untuk mendapatkan pekerja lain bagi melakukan kerja lebih masa.

"Kos-kos berkenaan mampu meningkat sekurang-kurangnya tiga kali ganda untuk seorang pekerja sahaja," katanya ketika dihubungi *Kosmo!* semalam.

Ujarnya, syarikat-syarikat yang tidak menyediakan klinik panel didapati sering menjadi 'mangsa' penipuan dalam kalangan pekerja mereka.

Jelasnya, MC palsu mudah didapati jika majikan tidak melantik klinik panel kerana pekerja boleh mendapatkan rawatan di manamana klinik yang mereka inginkan.

"Kemungkinan mereka mendapatkan MC palsu ini daripada klinik-klinik yang bukan dilantik sebagai klinik panel syarikat.

"Ditambah pula kemajuan teknologi yang semakin canggih pada masa kini membolehkan sijil cuti palsu itu sukar dikesan keaslian," ujarnya.

Menurutnya, kesukaran mendapatkan MC daripada doktor klinik panel atau kerajaan menjadi punca pekerja sanggup membeli sijil cuti sakit palsu.

"Bukan itu sahaja, kehabisan cuti tahunan serta kelemahan majikan yang tidak memantau dengan ketat MC yang diserahkan oleh seseorang pekerja turut menjadi punca," ujarnya.

GAMBAR fail menunjukkan buku, sijil cuti sakit dan cap palsu yang dirampas dalam serbuan polis di Paroi, Seremban pada 25 Mei 2016.

Menurut beliau, majikan tidak perlu takut jika kehilangan pekerja seperti itu, sebaliknya serius memerangi mereka yang menggunakan MC palsu.

SYED HUSSAIN

"Penggunaan MC palsu adalah satu kesalahan jenayah dan hendaklah dilaporkan kepada pihak polis supaya mereka terlibat boleh didakwa," katanya.

Presiden Kongres Kesatuan Sekerja Malaysia, Mohd. Effendy Abdul Ghani berkata, pihaknya tidak menafikan masih wujud pekerja membeli MC palsu.

Katanya, majikan perlu melihat lebih mendalam berhubung masalah itu kerana terdapat dua sebab pekerja berbuat demikian.

"Kadangkala mereka terdesak mahukan cuti atas masalah peribadi atau malas bekerja. Kemungkinan juga ada yang tertekan di tempat kerja," ujarnya.

Mereka yang menggunakan MC palsu boleh didakwa mengikut Seksyen 471 Kanun Keseksaan dan dihukum penjara maksimum dua tahun atau denda atau kedua-dua sekali jika sabit kesalahan.

Sebulan sekali beli MC palsu sebab penat bekerja

PETALING JAYA – Seorang pekerja swasta mengakui dia sanggup membeli sijil cuti sakit (MC) palsu pada harga RM30 kerana tidak lagi tahan bekerja mengikut syif.

Lelaki yang hanya mahu dikenali sebagai Fakrul, 24, berkata, dia berjinak-jinak membeli sijil cuti sakit bermula daripada pengaruh rakan dan menggunakan cuti tersebut sebulan sekali.

"Pada mulanya tak tahu pun wujud MC palsu, kawan yang cadangkan sebab lihat saya kepenatan kerana sering kerja lebih masa terutama ketika tidak cukup pekerja.

"Pembelian itu dibuat melalui orang tengah, kemudiannya kepada pembekal bagi memperoleh 'tiket' bercuti yang murah," dedahnya kepada *Kosmo!*.

Fakrul yang bekerja dalam sektor perkhidmatan berkata, dia hanya perlu membayar RM30 kepada pihak pembekal dan memberikan maklumat untuk ditulis pada MC tersebut dengan memilih klinik atau hospital yang dapat menyakinkan syarikat.

"Kita pilih hospital yang mana dekat sahaja, baru nampak macam asli. Selepas itu kita akan dapat MC palsu dalam bentuk gambar dan softcopy melalui WhatApps untuk ditunjukkan kepada majikan.

"Perkara ini tak semua orang boleh tahu, sebab kalau tersebar susah kita, bukan tidak mahu bekerja, tetapi badan juga perlu rehat dan elakkan diri daripada tekanan mental," ujarnya.

Bagaimanapun, dia kini tidak lagi membeli MC palsu.

Seorang lagi pekerja swasta di bahagian teknikal, berkongsi pengalaman hampir dibuang kerja selepas 'kantoi' menggunakan MC palsu bersama rakan sekerjanya.

Dia yang enggan dikenali berkata, tindakannya itu dihidu majikannya apabila pemeriksaan MC miliknya didapati tandatangan doktor pada sijil itu berlainan meskipun mempunyai nama klinik dan doktor yang sama dengan rakannya.

"Kami tak perasan pula kesalahan tandatangan itu sebab ambil daripada pembekal yang sama, selepas itu kami dipanggil dan pihak majikan menunjukkan e-mel daripada Kementerian Kesihatan Malaysia berkenaan sijil tersebut.

"E-mel daripada KKM mengesahkan MC kami adalah palsu, dan bukan itu sahaja, majikan kami turut membuat pemeriksaan semula MC terdahulu dan mendapati beberapa lagi individu 'kantoi' perkara yang sama," katanya.

Jelas pemuda itu, dia akhirnya mengaku tindakannya kepada majikan dan bersyukur tidak dikenakan tindakan disiplin dan berjanji tidak mengulangi tindakannya itu.

"Rasa tidak berbaloi sebenarnya menggunakan MC palsu, masa cuti rasa tidak tenang sebab tahu itu perkara salah, saya sayang kerjaya ini, tetapi pada hari tersebut sangat terdesak untuk cuti kerana terlalu penat bekerja," ujarnya.

AKHBAR : KOSMO
MUKA SURAT : 11
RUANGAN : NEGARA

PENGANJUR rumah terbuka dicadang supaya mempelbagaikan hidangan makanan dan minuman termasuk menu sihat kepada tetamu terutama penghidap diabetes. – GAMBAR HIASAN

Saji juadah sihat di rumah terbuka

SAUDARA PENGARANG,

SETIAP kali Syawal, menjadi tradisi di Malaysia untuk mengadakan rumah terbuka. Berbagai jenis juadah dihidangkan untuk tetamu, namun terdapat golongan yang sering dilupakan penganjur iaitu penghidap diabetes.

Hidangan seperti ketupat, kuih-muih, kek, minuman bergula mempunyai kalori dan kandungan gula tinggi. Ramai penghidap diabetes takut untuk menjamu selera kerana gula boleh dibarat seperti dadah bagi pesakit diabetes.

Saya harap penganjur dapat menyajikan juadah, kuih-muih dan minuman kurang manis, rendah Indeks Glisemik (GI) dan tinggi serat untuk tetamu yang ingin mengurangkan pengambilan gula.

Letakkan ia pada sudut khas dan berlabel. Tidak semestinya pesakit diabetes yang ingin jaga pemakanan, tetamu lain juga harus berhati-hati dengan makanan dan minuman yang diambil.

Dalam hal ini, saya harap Kementerian Kesihatan (KKM) dan Diabetes Malaysia dapat memberi peringatan kepada rakyat tentang pengambilan makanan dan minuman pada bulan Syawal dalam media arus perdana dan media sosial.

Berikan juga cadangan dan panduan kepada tuan rumah tentang penyajian makanan dan minuman sesuai buat penghidap diabetes.

Kalau boleh, sediakan perkhidmatan ujian glukosa dalam darah di majlis rumah terbuka terutama bagi peringkat negeri dan kebangsaan dengan bayaran yang rendah.

Mungkin ada tetamu yang ingin menguji kandungan gula dalam darah sebelum dan selepas menjamu selera. Jadi mereka akan lebih berhati-hati.

Diabetes bukan penyakit seperti demam atau selsema yang mana simptomnya mudah dikesan. Tanpa sedar, orang yang rasa dirinya sihat dan cergas, mungkin menghidap diabetes.

Jika *Generational End Game* laksana larangan merokok, perkara yang sama juga boleh dilakukan bagi diabetes.

Ia boleh dimulakan dengan pengurangan kandungan gula dalam makanan dan minuman di kantin sekolah. Teh hijau dan roti mil penuh adalah alternatif kepada teh tarik dan kuih-muih untuk jamuan bagi sesuatu acara, majlis dan mesyuarat jabatan kerajaan.

Agak sukar bagi tuan rumah untuk memenuhi permintaan, sekurang-kurangnya cuba penuhi keperluan berkaitan dengan pegangan agama dan masalah kesihatan.

MARISSA QT
Kuala Lumpur

AKHBAR : THE STAR
MUKA SURAT : 15
RUANGAN : VIEWS

Heat is a mental issue too

ACCORDING to the Malaysian Meteorological Department, multiple states in the country are currently facing Level 1 (yellow) alert heatwaves, and this condition is predicted to persist until June. (A yellow alert refers to daily temperatures continually hovering between 35°C and 37°C for at least three consecutive days.)

While most people know that extreme heat can pose a threat to our physical well-being, not as many are aware that it can also affect our mental health.

The link between heat and mental health is well-established. Among others, a study published in the open access "Environment International" journal found that hot weather is likely to cause a significant increase in mental health disorders such as mood disorders, organic mental disorders and schizophrenia, and neurotic and anxiety disorders.

One of the main reasons that heatwaves take such a toll on mental health is the physical stress they put on our bodies. When temperatures rise, our bodies have to work harder to regulate our internal temperature, leading to dehydration, fatigue and irritability. This can create a vicious cycle, in which the physical stress exacerbates existing mental health conditions, which in turn make it even harder to cope with the heat.

Another reason that heatwaves can impact mental health is their effect on sleep. When temperatures are high, it can be difficult to get a good night's rest, which can lead to a host of mental health problems, including anxiety, depression and impaired cognitive function. This is especially true for vulnerable populations such as the elderly, who may have difficulty regulating their body temperature and are more susceptible to heat-related illnesses.

In addition to the physical stress of the heat, there is also the psychological stress of feeling trapped indoors or being unable to escape the heat. This can lead to feelings of anxiety and helplessness, which can exacerbate existing mental health conditions or create new ones.

There is also the social aspect of heatwaves. During periods of extreme heat, people may be less likely to socialise, exercise or engage in other activities that promote good mental health. This can lead to feelings of isolation and loneliness, which can contribute to a range of mental health issues.

Malaysians must learn that heatwaves are not just a physical health concern, they can also have a negative impact on our mental health. As temperatures continue to rise due to climate change, it is important to be aware of the potential mental health impacts of extreme heat and take steps to mitigate them.

This can include:

> Staying hydrated by drinking plenty of fluids.

> Getting plenty of rest.

> Seeking support from friends and family.

> Taking advantage of air-conditioned spaces when possible.

By prioritising our mental health during heatwaves, we can help ensure that we are able to overcome both the physical and psychological challenges of extreme heat.

CHARLES GANAPRAKASAM
Genesis Psychology Research Team
Kulim, Kedah

Doctors should prescribe exercise more

HEALTHCARE costs in Malaysia are rising at an annual rate of 15% due to increased utilisation of services and an ageing population. However, the government cannot continuously subsidise healthcare, so it's time to reassess the current situation.

One potential solution is to promote physical activity, which is very beneficial for overall health. Unfortunately, despite the critical role physicians can play in promoting exercise, not many are doing so. There is no data on the extent to which doctors prescribe exercise as a remedy, but anecdotal evidence suggests that the figure could be as low as 10% of doctors.

I believe there are four reasons for this. Firstly, many in the medical profession have a traditional "drugs mindset" and believe that only drugs can treat a patient's ailments. Secondly, the current medical curriculum does not place enough emphasis on the benefits of exercise, and medical schools do not routinely teach it.

Thirdly, doctors and medical lecturers often have low levels of physical activity due to their overworked schedules, making it difficult for them to appreciate the benefits of regular exercise themselves. Finally, there is no promotion of exercise in the same way that drug companies promote their drugs.

To encourage more Malaysians to exercise, the government, particularly the Health Ministry (MOH), needs to formulate a policy that focuses on changing mindsets in these four areas. Collaboration between the MOH, local authorities and other stakeholders such as residents associations is also needed to work on preventive healthcare measures, such as investing in more recreational and exercise facilities in strategic locations.

A case in point is Bukit Kiara federal park in Taman Tun Dr Ismail, Kuala Lumpur, which is conveniently located with all the amenities a park should have. Thanks to proper maintenance and upkeep by the National Landscape Department, it has become a lovely park in which people can exercise and socialise with neighbours.

Additionally, the MOH should promote and encourage an active lifestyle among Malaysians by encouraging regular exercise and urging the rakyat to make minor changes to their everyday life to increase mobility, such as taking the stairs instead of the lift – which can make a big difference.

Exercising regularly contributes to overall health and is a much better alternative to a lifetime of medication. It's time for a change of mindset in managing healthcare in Malaysia. Promoting exercise and making it more accessible to all Malaysians can be a significant step towards improving overall health and reducing healthcare costs in the long run.

In this context, it is important for physicians and other healthcare professionals to promote and discuss exercise with their patients as a part of their medical treatment and care.

POLA SINGH
Taman Tun Dr Ismail
Kuala Lumpur

AKHBAR : THE SUN
MUKA SURAT : 4
RUANGAN : NEWS WITHOUT BORDERS

14 affected by heat-related illnesses

Thirteen individuals recovered while boy in Kelantan died, says deputy health minister

KOTA BHARU: The Health Ministry (MoH) has recorded a total of 14 cases of heat-related illness as of yesterday, said Deputy Health Minister Lukanisman Awang Suani.

He said of that number, four were cases of heatstroke, four were due to heat exhaustion while six were related to heat cramps, adding that the ministry expects the number of such cases to increase until August.

"The situation is still under control and can be accommodated by health facilities nationwide.

"There were six cases reported in Kelantan, five in Sarawak and three in Sabah and most of them (seven cases) involved adults," he said after officiating at the 4th Intermediate Electrocardiogram Conference 2023, organised by Raja Perempuan Zainab II Hospital and Universiti Sains Malaysia Hospital in Kubang Kerian.

He added that from the 14 cases, 13 have recovered while an affected 11-year-old boy died in Kelantan.

Lukanisman said at the MoH level, the top leadership has made efforts and listened to briefings from relevant ministries and is prepared to face the prolonged hot weather and heatstroke cases, Bernama reported.

"MoH will cooperate with the Communications and Digital Ministry to disseminate information via television and social media, and representatives are asked to play a role in spreading the word about the hot weather.

"Currently, the situation is under control, and MoH facilities and hospitals are prepared to receive all cases involving heatstroke and those suffering from heat cramps."

Lukanisman said the ministry, with the cooperation of the Meteorological Department, has also identified locations that are experiencing high temperatures for quick action, including preparing health facilities.

"Parents are asked not to be overly anxious about sending their children to school, but they need to take precautions, especially to ensure their children carry sufficient drinking water as well as to make sure their children do not indulge in excessive sports.

"Padi planters, farmers and gardeners also need to be cautious during the hot weather, rest and drink enough water to avoid untoward incidents," he added.

KERATAN AKHBAR
UNIT KOMUNIKASI KORPORAT
KEMENTERIAN KESIHATAN MALAYSIA

15 MEI 2023

AKHBAR : THE SUN
MUKA SURAT : 8
RUANGAN : SPEAK UP

Treat vape the same way as cigarettes

THERE is a perception that vaping is a safer alternative to smoking tobacco but the reality is that we do not have as much data as we have about cigarettes.

What we do know is that vaping is not completely safe and carries with it various health risks.

Until we have sufficient, transparent and independent long-term data that compares vaping, tobacco smoking and people who do neither, then it is best to treat vaping and e-cigarettes as no less harmful than cigarette smoking.

We only have relatively short-term data that indicates lesser health risks from vaping compared with cigarettes, but even these can be questionable and are confined to relatively limited measurements such as nicotine addiction.

As widely known, there are many more health risks associated with tobacco, including negatively affecting the heart, lungs, blood vessels, fertility and many other organs.

Furthermore, there are not enough apples-to-apples data to compare cancer risk, which is usually seen as a long-term impact.

Thus, the principle is to be on the safe side until we know more about its long-term implications.

Even then, the short-term outlook is quite worrying.

Although some studies may indicate vaping as not a gateway to smoking, there are also studies pointing to an increase in smoking among youths through the use of e-cigarettes.

Similarly, although many experts warn that this opens up the route to smoking, some studies indicate an inverse relationship between vaping and smoking.

For example, a research paper by Dr David T Levy and associates presented a reduction in smoking initiation during the period of rise in vaping, resulting in an insignificant net impact at the population level.

As reported by public health portal *CodeBlue*, the president of IKRAM Health Malaysia Dr Mohd Afiq Mohd Nor also pointed to the reliability issues of some of these reports, where he mentioned 76 studies as being inconsistent and contradictory.

Mohd Afiq also reportedly referenced the 2015 Systematic Review of Health Effects of Electronic Cigarettes by the World Health Organisation, which revealed that e-cigarette manufacturers were funding and supporting most of the studies with conflicts of interest.

With an insufficient number of long-term, reliable, independent and robust data, it is unwise to treat vaping and e-cigarettes as a less harmful option for what could be a mere short-term gain in taxes.

This is assuming that taxes can be collected efficiently and short-term health implications have not been underestimated.

Getting these two factors wrong could spell a health disaster and severe financial burden for Malaysia.

This is why various quarters are calling out on the controversial (unilateral) decision to exempt nicotine from the Poisons Lists under the Poisons Act 1952, which went against a unanimous objection from the Poisons Board.

Even for cancer, which is usually seen as a long-term risk, it is known that vaping liquid includes thousands of chemicals some of which are known carcinogenic compounds such as formaldehyde, benzene and metals.

Given Malaysia's financial situation, the controversial move could be interpreted as driven by the government's need to collect more taxes instead of discouraging vaping.

Time will tell whether the impact on consumption from increased sales prices is significant.

In any case, both of these reasonings may end up being severely flawed.

Firstly, as reported by *CodeBlue*, the sin tax rate on cigarettes or vape needs to be at least 75% or higher to effectively discourage non-smokers from initiating and assisting existing smokers to quit, as mentioned by International Medical University professor of economics, health policy and management Prof Dr Syed Mohamed Aljunid.

Secondly, Syed Mohamed also pointed out that the sin tax may not be enough to cover the costs of related illnesses.

The government may be seen as "gambling" for a short-term gain in tax-based revenues, probably (and mistakenly) hedging against a future of lower health implications compared with smoking.

How long before they reap what they sow is anyone's guess but there is mounting evidence indicating that it may not be that far ahead in the future.

Tobacco needed a few decades before scientific evidence triumphed over the tobacco industry lobby.

In the early 1900s, tobacco was deemed trendy and harmless.

Then people started to become more aware of the increasing cases of lung disease and cancer in the 1940s and experiments in the 1950s proved the link between chemicals in tobacco and cancer.

By the 1960s society's perception of cigarettes had changed for the better, with US Congress leading the way in mandating warning labels on cigarette packaging in 1969.

That is over six decades of studies looking into over 7,000 chemicals involved in cigarette smoke.

Vaping has not had the chance to go through these phases and it should not take as long.

Unlike the 1900s, we are in an era of higher awareness of health, scientific progress, health standards and more advanced investigative techniques.

But, at the same time, the magnitude of the industry lobby can be said to be just as great or more compared with the 1900s, with influence reaching policymakers and even the scientific community.

After all, it is known that major tobacco companies are going into the vaping and e-cigarette market, and supporting studies related to vaping.

That said, even though vaping only entered the mass market over a decade ago, we can already form a confident picture that vape is not as safe as initially thought or, at least, how the vaping industry would like you to believe.

Though an older (2015) study by Public Health England noted e-cigarettes as about 95% less harmful than tobacco, a more recent study in 2021 by researchers from the Johns Hopkins University (JHU) found nearly 2,000 unknown chemicals in e-cigarette and vaping liquid, including known and potentially harmful compounds.

Though this is a lower amount than cigarettes, one of the JHU researchers and author of the said study correctly pointed out that "cigarette aerosols contain other completely uncharacterised chemicals that might have health risks that we don't yet know about" in a statement.

Even though the long-term impacts are less known, it is a fact that vaping liquid contains nicotine and various other toxins commonly found in cigarettes.

The mounting evidence linking acute respiratory diseases with vaping - many other health issues such as infertility and related health conditions involving the cardiovascular system, the various unknown chemicals and their physiological impacts, insufficient long-term data and questionable independence of studies - put into question the notion of a "safer" option of vaping compared with cigarettes, even in the near term.

EMIR Research will elaborate more on these in a separate article.

Suffice it to say here that shifting from smoking to vaping is likely trading a bad habit with serious health consequences with another.

Recommendations

If the intention is to discourage vaping, the reasonable step is to maximise taxation and regulate vapes and e-cigarettes just like tobacco i.e, maximising the sin tax rate, earmarking a bigger allocation to the Health Ministry, setting the highest age limit and putting in force the generational endgame policy to stop vaping and smoking altogether.

Considerable risk of secondhand exposure also calls for vaping only in designated places, at a safe distance and location from the public.

Vaping liquid, ingredient mix and concentrations, atomizer technology, wattage and voltage would have varying health and safety profiles. Regulations must cover both vape liquid and the devices.

More studies should be done to provide finer details in vape regulation such as limitation to wattage and atomiser technology to minimise health harm, and voltage for safety reasons.

Depending on further studies, higher-powered devices of 50 watts and above should be banned and only consider devices below 25 watts as these contribute to the aerosol particle size that can impact biochemical and physical interactions in the body.

Another parameter that could be added as part of device and substance regulation is aerodynamic resistance, with restrictions on technologies and liquid combinations that result in higher resistance and longer residence time in the lungs as these can exacerbate deposition risk in the lungs.

The allowable base liquid for vaping and e-cigarettes liquid should also be studied.

Current findings appear to indicate vitamin E acetate as a riskier option linked to an e-cigarette or vaping product use-associated lung injury.

Other base liquids such as vitamin E oil, coconut oil and medium-chain triglycerides need further investigation.

There should also be a list of restricted ingredients and maximum ingredient concentrations in vape and a regulation to ensure additives and their concentrations are listed on the packaging.

For example, this may include addictive stimulants such as nicotine and caffeine, known carcinogens and other restricted compounds.

Of course, this would require testing and monitoring capabilities for the regulation to be effective.

EMIR Research supports the call to put the collection taxes and the exemption of nicotine from the Poisons List on hold until the Tobacco Regulations and Control Bill is passed.

The Bill must be debated and should include the generational endgame provision alongside the consideration of EMIR Research's recommendations above, which requires more studies to be done by the authorities to adequately evaluate vaping risks and come up with proper standards, regulations and means of enforcement.

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