

AKHBAR : BERITA HARIAN  
MUKA SURAT : 18  
RUANGAN : NASIONAL



## Dua lagi kes cacar monyet dikesan

**Kuala Lumpur:** Kementerian Kesihatan (KKM) mengesahkan dua kes positif cacar monyet membabitkan masing-masing seorang lelaki warga asing dan tempatan.

Ketua Pengarah Kesihatan, Datuk Dr Muhammad Radzi Abu Hassan, berkata kes indeks adalah warga asing terbabit yang bekerja di Malaysia sejak April 2022 dan memiliki sejarah perjalanan ke negara yang melaporkan kes cacar monyet pada 6 Julai lalu.

Katanya, lelaki itu disyaki dijangkiti ketika berada di luar negara serta menunjukkan gejala pada 19 Julai lalu dengan lepuh mula timbul empat hari kemudian.

Pesakit itu telah menjalani isolasi dan dibenarkan pulang selepas disahkan pulih sepenuhnya tanpa komplikasi pada 10 Ogos lalu.

Beliau berkata, pesakit kedua pula adalah kontak kepada kes indeks dan mengalami gejala ketika dalam kuarantin.

Dia diarahkan menjalani perintah itu sejak 27 Julai lalu sebelum disahkan positif dua hari kemudian.

"Dia masih dalam tempoh isolasi dan dalam keadaan sihat. Semua kontak bagi kes pertama sudah dikenal pasti dan status kesihatan mereka dipantau.

"Tiada yang mengalami gejala jangkitan kecuali kes kedua yang tidak mempunyai sebarang kontak rapat," katanya dalam satu kenyataan, semalam.

Dr Muhammad Radzi berkata, jangkitan cacar monyet berlaku melalui sentuhan rapat dengan individu bergejala dan tanda jangkitan virus terbabit.

### Inkubasi 5-21 hari

Katanya, tempoh inkubasi sebelum individu menunjukkan gejala jangkitan antara lima hingga 21 hari dari tarikh terdedah kepada jangkitan dan lazimnya akan sembuh tanpa sebarang rawatan khusus.

Selain itu, beliau berkata, individu disahkan positif cacar monyet boleh menjangkiti orang lain, sehari sebelum gejala muncul dan hingga semua lepuh kering sepenuhnya.

"Semua pengembara yang tiba dari negara melaporkan kes cacar monyet dinasihatkan memantau status kesihatan sendiri setiap hari, termasuk gejala jangkitan penyakit itu selama 21 hari dari tarikh ketibaan di Malaysia.

"Gejala cacar monyet adalah seperti demam, keletihan, sakit kepala serta ruam makulapapular yang

bermula di muka, kemudian merebak ke tapak tangan dan kaki, diikuti bahagian tubuh lain.

"Pesakit juga mungkin mengalami lenguh tubuh badan, sakit bahagian belakang badan atau sendi, kejang otot dan pembengkakan kelenjar limfa," katanya.

Mengulas lanjut, beliau berkata, semua pengamal perubatan dinasihatkan peka terhadap individu dengan gejala lepuh yang mendapatkan rawatan, terutama dalam kalangan kumpulan berisiko tinggi.

"Sejarah risiko kontak rapat dengan individu bergejala jangkitan cacar monyet perlu didapatkan. Bagi kes disyaki, swab lepuh dan oral serta sampel darah atau serum boleh dihantar ke makmal yang menyediakan perkhidmatan ujian pengesanan virus terbabit.

"Ketika ini, ada 10 makmal menyediakan perkhidmatan itu membabitkan lapan makmal kerajaan dan dua swasta.

"Kes disyaki cacar monyet hendaklah dimaklumkan kepada pejabat kesihatan berhampiran melalui Sistem e-Notifikasi supaya siasatan lanjut serta langkah kawalan dapat dijalankan pejabat kesihatan daerah," katanya.

AKHBAR : BERITA HARIAN  
MUKA SURAT : 19  
RUANGAN : NASIONAL

## Hospital Dungun kurangkan sesak HSNZ

**Kuala Terengganu:** Hospital Dungun mampu mengurangkan kesesakan di Hospital Sultanah Nur Zahirah (HSNZ) dan Hospital Kemaman, apabila ia dijangka mula beroperasi tahun depan.

Pengerusi Jawatankuasa Kerajaan Tempatan, Perumahan dan Kesihatan negeri, Wan Sukairi Wan Abdullah, berkata rakyat tidak perlu lagi mendapatkan rawatan pakar di luar negeri ini nanti kerana Hospital Dungun yang dibina dengan peruntukan RM125 juta akan turut dilengkapi peralatan moden serta canggih.

Beliau berkata, projek pembinaan Hospital Dungun di atas tapak seluas 6.13 hektar telah siap 99 peratus dan dijangka beroperasi tahun depan.

"Hospital pakar itu juga akan menjadi pusat rujukan kepada klinik kesihatan dan klinik desa di sekitar kawasan daerah Dungun.

"Hospital Dungun yang akan mempunyai 110 katil dengan 10 kepakaran, iaitu kecemasan, perubatan, pediatrik, obstetrik dan ginekologi, anesthesiologi, ortopedik, psikiatri, pergigian dan patologi itu juga mampu mengurangkan kesesakan di HSNZ dan Hospital Kemaman," katanya ketika dihubungi, semalam.

Wan Sukairi berkata, hospital baharu itu bakal menjadi hospital pakar ketiga di Terengganu selepas HSNZ dan Hospital Kemaman.



AKHBAR : UTUSAN MALAYSIA  
MUKA SURAT : 7  
RUANGAN : DALAM NEGERI

## Dua lelaki disahkan positif cacar monyet

**PETALING JAYA:** Dua lelaki masing-masing seorang warga asing dan tempatan disahkan positif cacar monyet (MPOX) selepas seorang daripada mereka pulang dari luar negara.

Ketua Pengarah Kesihatan, Datuk Dr. Muhammad Radzi Abu Hassan ketika mengesahkan perkara itu berkata, kes indeks adalah warga asing yang bekerja di negara ini sejak April 2022 dan mempunyai sejarah perjalanan ke negara yang melaporkan kes MPOX pada 6 Julai lalu.

Katanya, lelaki tersebut disyaki dijangkiti penyakit berkenaan ketika berada di luar negara dan mula menunjukkan gejala pada 19 Julai lalu.

Beliau berkata, empat hari selepas menunjukkan gejala, lepuh mula muncul di anggota badannya sebelum menjalani isolasi dan dibebaskan apabila disahkan pulih sepenuhnya 10 Ogos.

"Pesakit kedua adalah kontak kepada kes indeks dan mengalami gejala semasa dalam kuarantin, selain diarahkan menjalani perintah itu sejak 27 Julai lalu sebelum disahkan positif MPOX, dua hari kemudian.

"Dia masih dalam tempoh isolasi dan dalam keadaan sihat. Semua kontak bagi kes pertama sudah dikenal pasti dan status kesihatan mereka dipantau.

"Tiada yang mengalami gejala jangkitan kecuali kes kedua yang tidak mempunyai sebarang kontak rapat," katanya dalam kenyataan semalam.

Dr. Muhammad Radzi berkata, jangkitan MPOX berlaku melalui sentuhan rapat dengan individu bergejala dan tanda jangkitan virus terbahit.

Beliau berkata, tempoh inkubasi sebelum individu menunjukkan gejala jangkitan mpox adalah antara lima hingga 21 hari dari tarikh terdah kepada jangkitan dan Lazimnya ia akan sembuh tanpa sebarang rawatan khusus.

AKHBAR : NEW STRAITS TIMES  
MUKA SURAT : 11  
RUANGAN : NEWS / NATION

BEING CLOSELY MONITORED

## TWO CASES OF MONKEYPOX CONFIRMED

First patient is foreigner who arrived from country with cases, second is local man

### KUALA LUMPUR

**T**HE Health Ministry has confirmed two cases of monkeypox in Malaysia. Health director-general Dr Radzi Abu Hassan said the first case was confirmed on July

26, involving a foreign man who had been residing and working in Malaysia since April last year.

He had travelled to a country that had documented monkeypox cases on July 6 and returned to Malaysia on July 10.

He began showing symptoms

on July 19 and blisters began appearing on July 23.

He was released from isolation on Aug 10 after a full recovery without complications.

The second case involves a Malaysian man who is a close contact of the first patient.

The second patient developed symptoms while under quarantine following exposure to a monkeypox positive case.

He was quarantined on July 27

and his infection was confirmed on July 29. He is still under isolation and is in stable condition.

"All close contacts of the first case have been identified and are being closely monitored," Dr Radzi said yesterday.

He said none of the other close contacts of the first patient were showing symptoms and the second patient did not have many close contacts.

The Health Ministry advises

travellers arriving from countries with monkeypox cases to monitor their health for symptoms for 21 days upon arrival in Malaysia.

Monkeypox symptoms include fever, fatigue, headache and a maculopapular rash that starts on the face and spreads to the hands and feet, followed by other parts of the body. Patients may also experience body aches, back pain, joint pain, muscle spasms and lymph node swelling.



AKHBAR : THE STAR  
MUKA SURAT : 5  
RUANGAN : NATION

# Health groups: Table GEG Bill

'Protect the young from being exposed to unregulated nicotine-based products'

By **TEH ATHIRA YUSOF**  
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**PETALING JAYA:** With about a month to go before the Dewan Rakyat sits, health groups are urging for the anti-smoking Bill, dubbed the Generational End Game (GEG), to be urgently tabled again so that the younger generation will not be exposed to unregulated nicotine-based products.

Malaysian Pharmacists Society president Amrahi Buang said the onus is now on the government to fulfil its promise to end tobacco usage for the younger generation through the GEG or the Control of Smoking Products for Public Health Bill 2023.

Although the GEG is currently referred back to the Parliamentary Special Select Committee for Health for further fine-tuning, Amrahi said it should not deter the Health Ministry from retabulating the Bill this October.

"This has been a longstanding issue. There should not be any more delays since it comes from the government.

"We have given our input so let the lawmakers debate this issue in the coming Parliament sitting.

"After that, we can see the outcome (whether the Bill will be passed)," he said when contacted.

Amrahi, who is a strong supporter of the GEG Bill, said he would like to see better regulations on nicotine-based products as it could pose a health risk to the younger generation.

"Right now, the young generation is exposed since nicotine was removed from the Poisons List," he said.

"With the GEG Bill, we hope to see measures put in place to combat the rise of nicotine abuse among the people."

Malaysia Society for Harm Reduction chairman Prof Dr Sharifa Ezat Wan Puteh is optimistic that the GEG Bill will be

tabled again in the August House soon.

Dr Sharifa, however, urged the government to consider the use of vape with regulated nicotine-based liquid as an alternative for heavy smokers who are looking to quit smoking.

"It is time to see the GEG Bill passed (in Parliament) soon.

"We need stronger measures to address unregulated nicotine-based products.

"The GEG comprised many good things to address the end of tobacco use, so the government needs to consider alternatives other than the usual methods to quit smoking such as nicotine gums and patches.

"We are not advocating people to rely on nicotine-based cigarettes or vape but we need non-combustible alternatives for those who are unable to quit smoking," she said.

Dr Sharifa said Malaysia should follow other countries in imple-

menting regulation on nicotine-based products such as the United Kingdom, New Zealand and Australia in efforts to ensure the success of the GEG Bill.

On June 12, Health Minister Dr Zaliha Mustafa said the GEG Bill, after its first reading at the Dewan Rakyat, would be referred back to the select committee for further fine-tuning.

She said the move was in accordance with Rule 54 (1) of the Standing Orders of the Dewan Rakyat for the committee to make recommendations, as well as further examine the Bill and related provisions to provide checks and balances.

When the Bill was introduced last year under then health minister Khairy Jamaluddin, it was also referred back to the select committee for further review after receiving resistance from a number of lawmakers.

The Bill is looking to regulate the sale, purchase and consump-

tion of cigarettes and other smoking products among those born in 2007 and later.

Under the Bill, the enforcement in relation to the registration, advertising, packaging, sale and use of conventional tobacco products such as cigarettes, cigars, loose tobacco and rolled cigarettes will be enforced for the GEG generation once it is passed.

Any enforcement on laws regarding the sale, purchase and use of products with smoking devices such as vape, liquid nicotine and others by the GEG generation will come into force at a later date.

During the national-level celebration of World No-Tobacco Day, Dr Zaliha called on all parties to support the retabulating of the Bill.

She said the issue needs to be taken seriously due to the smoking habit among the people, especially with a rise in the usage of electronic cigarettes and vaping.



AKHBAR : THE STAR  
MUKA SURAT : 10  
RUANGAN : NATION

## 'Vaccinate pregnant women against whooping cough'

By RAGANANTHINI  
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**PETALING JAYA:** Providing Tetanus, Diphtheria and Acellular Pertussis (TDAP) vaccines to pregnant women nationwide will allow the country to have better control over the spread of Pertussis, otherwise known as the whooping cough, says Datuk Dr Zulkifli Ismail.

The Immunise4Life programme technical committee chairman said providing the vaccines, especially to undocumented children and individuals in Sabah, will be beneficial, noting how a third of the current reported cases was from there.

"Providing TDAP vaccines to pregnant women at 27 to 36 weeks of pregnancy offers immunity to the baby at birth, and before they receive their first diphtheria, tetanus and acellular pertussis (DTap) vaccination.

"This will reduce the risk of infection to those below five months old," said the consultant paediatrician.

The DTap vaccine that is given to children aged two, three to five months with a booster at 18 months will prevent pertussis for a limited period of between six and 16 years, Dr Zulkifli explained.

"Adult vaccination with the TDAP vaccine is needed to continue that immunity. The current hexavalent pertussis-containing vaccines are effective in preventing infection in children.

"The TDAP vaccines are effective in adults and need a single dose only," he said.

Dr Zulkifli, who is also a paediatric cardiologist, also stressed how pertussis is highly infectious, starting from the catarrhal phase of runny nose and phlegm before the cough itself manifests.

"This means that the infected person can infect another person up to two weeks before the cough starts," he said.

On Tuesday, Health director-general Datuk Dr Muhammad Radzi Abu Hassan said 329 cases of pertussis were reported nationwide with 23 deaths as at Aug 19. And 219 cases involved Malaysians while 110 cases were foreigners.

Infants aged below 12 months made up 189 of the cases, children aged between one and 10 years made up 94 cases, with the remainder coming from those aged 11 years and above.

Sabah had the highest number of cases (181) followed by Selangor (51), Kuala Lumpur and Putrajaya (15), Pahang and Perak (13 cases each), Melaka and Negri Sembilan (12 cases each), Johor (nine), Sarawak (eight), Kelantan (seven), Kedah and Terengganu (three cases each), Penang and Labuan (one case each) while Perlis had no cases.

AKHBAR : THE STAR

MUKA SURAT : 212

RUANGAN : NATION

## Malaysia confirms two cases of monkeypox

**PETALING JAYA:** Malaysia has recorded two cases of monkeypox, says Health director-general Datuk Dr Muhammad Radzi Abu Hassan.

He said the first case that was confirmed on July 26 involved a foreign man who has been living and working in Malaysia since April 2022.

He said the person travelled to a country with reported cases of monkeypox on July 6, and returned to Malaysia on July 10.

"He started showing symptoms on July 19, and blisters began to appear on July 23.

"He was isolated and released on Aug 10, after a full recovery without complications," Dr Muhammad Radzi said in a statement yesterday.

The second case, a local man, experienced symptoms while in quarantine as he had close contact with the index case.

Dr Muhammad Radzi said the man was ordered to undergo quarantine on July 27, and confirmed positive for monkeypox on July 29.

"The second patient is in good health while still being isolated.

"All contacts of the first patient have been identified and their health status monitored.

"No one showed any symptoms of monkeypox infection except for the second patient," he said.

The incubation period before an individual starts showing symptoms of monkeypox is between five and 21 days from the date of exposure.

Individuals with monkeypox are infectious one day before symptoms appear, until all blisters completely dry up.

Usually, monkeypox cases heal over time without needing any treatment.



AKHBAR : THE STAR  
MUKA SURAT : 15  
RUANGAN : VIEWS

## Preparing palliative carers for the future

PALLIATIVE care in Malaysia has improved significantly with the establishment of facilities and services across 68 government hospitals and 26 non-governmental organisations in the past few years.

As a result, both the government and NGO sectors are able to offer better palliative services to the community.

Nurses are at the heart of palliative care delivery. As primary caregivers, they provide medical attention while also catering to the emotional and psychological needs of patients and their family members. This role necessitates building trust and fostering relationships with the persons concerned.

Drawing from our experience as nurses and educators, we urge the Health Ministry to intensify its collaboration with the research community, other government bodies and civil society to enhance various aspects of palliative care.

Augmenting palliative care content within the nursing curricula is a crucial starting point. This should involve structured teaching and clinical placements specif-



Photo: 123rf.com

ically focused on palliative care. Conducting regular workshops, seminars and courses highlighting the most recent advancements and best practices in the field is essential.

Equally important is raising community awareness about patients facing life-threatening illnesses, educating them on alternative pain and suffering relief methods and addressing the challenges associated with the dying process.

Emotionally, caregivers in this sector face significant challenges.

It is therefore important to provide counselling services, mentorship programmes and support groups to help these nurses cope with the demands of their jobs.

An effective care-giving approach requires keen listening skills, astute perception and quick responsiveness to both spoken words and non-verbal cues of palliative patients while always keeping in mind their final wishes.

Malaysia's rich cultural diversity demands that caregivers recognise and understand the various cultural and societal

backgrounds of their patients. Specialised training that heightens cultural sensitivity will help to ensure that each care interaction embodies compassion and understanding.

Malaysia is on track to becoming an ageing nation, and one challenging aspect of this demographic is ill health due to dementia and other conditions driven primarily by increased rates of non-communicable diseases.

Access to palliative care is key to helping the elderly live out the rest of their lives with dignity.

It's therefore imperative that nurses receive comprehensive preparation to undertake this significant role in the not-so-distant future.

Through sustained investment in their professional and emotional development, we can ensure that everyone receives the dignified and compassionate care they deserve in their final moments.

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