

AKHBAR : THE STAR
MUKA SURAT : 3
RUANGAN : NATION

THE STAR M/S 3 NATION 10/1/2025
(JUMAAT)

Dzul: Don't be unduly worried about HMPV

KUALA LUMPUR: Malaysians should not be unduly worried about the human metapneumovirus (HMPV), says Health Minister Datuk Seri Dr Dzulkefly Ahmad.

"It should not be a cause for worry or anxiety. We have regarded this as not even a notifiable disease," he told *The Star* on the sidelines of the Malaysia Economic Forum 2025 here yesterday.

However, the Health Minister said his ministry is not being complacent with HMPV.

"We are aware of the situation and have put in place various measures," he said.

Dzulkefly said the ministry has recently issued an advisory on good health etiquette, urging the public not to let their guard down.

He echoed similar sentiments expressed by health authorities in other countries such as China and India that HMPV is a year-end seasonal occurrence.

He stressed that HMPV should not be likened to Covid-19, which was a totally different disease.

Asked if health authorities are monitoring the nation's entry points such as airports, he said no, adding that they are monitoring it as a normal flu.

"So far, so good. However, we're not taking it lightly," he said.

This comes in the wake of concerns raised by health authorities in several countries over the possibility of a new variant of HMPV emerging following reports of a recent spike in cases in China.

Health officials in India are monitoring the situation closely and have said there is no cause for panic while the authorities in China noted that it is usual to see a rise in HMPV cases during the winter months.

HMPV is caused by a virus and results in flu-like symptoms.

AKHBAR : THE STAR
MUKA SURAT : 6
RUANGAN : NATION

'Basic measures will keep HMPV at bay'

Experts: Virus is common and no cause for panic

GEORGE TOWN: Despite the spread of human metapneumovirus (HMPV) that brings runny noses to common influenza-like illnesses, Malaysians can still go on their Chinese New Year holidays with peace of mind, say health experts.

Most of the viruses that cause these respiratory disorders are present in Malaysia throughout the year but infection spikes in temperate countries during their winter months can increase local infection rates due to international travel, they said.

Universiti Sains Malaysia (USM) family medicine specialist Dr Mastura Mohd Sopian said HMPV, which is recording a significant number of cases in China, had affected Malaysia due to the heavy flow of travellers between the two countries.

She said genetically, HMPV shares similarities with Covid-19, as both are ribonucleic acid (RNA) based viruses.

"HMPV is not as severe as Covid-19, particularly in terms of transmission risk. It doesn't spread as quickly nor is it as dangerous as Covid-19.

"While its structure is somewhat similar, the replication process and other genetic factors differ, making it less impactful compared with Covid-19," she said.

Cases not spiking in private hospitals

PETALING JAYA: No alarming increase in human metapneumovirus (HMPV) cases have been recorded at private hospitals, says the Association of Private Hospitals Malaysia (APHM).

While there was an increasing trend in the fourth quarter of last year, APHM president Datuk Dr Kuljit Singh said there was no congestion at intensive care units or hospital beds.

There was also an increase in influenza cases between November and December, he said, noting that this was normal and observed yearly.

"It's quite common to observe an increasing number of influenza cases towards the year-end due to the holidays, rainy season and increasing social activities.

"We see this every year but it's nothing alarming for now," he said.

Dr Kuljit also stressed APHM's readiness to work with the government in the event of an outbreak.

"Most of the bigger hospitals have already gone through that during the Covid-19 phase and we can work it out.

"Private hospitals will always work together with public hospitals in times of need like a pandemic and it was evident during the Covid-19 pandemic," he added.

Federation of Private Medical Practitioners' Associations Malaysia president Dr Shanmuganathan Ganesan said there was



Dr Mastura said the basic precautions learned during the pandemic years are enough to keep HMPV at bay – these include frequent hand-washing, wearing masks, avoiding crowded places and limiting activities in enclosed spaces like malls.

USM virologist Dr Kumitaa Theva Das said HMPV is a common virus and most adults would have been infected by it at least once.

"They might not realise it because the symptoms are so much like the flu. There have been cases where the symptoms can progress to bronchitis or pneumonia in those who are very young or elderly with a weakened immune system, but these are rare.

"Like any virus, HMPV can spread when in close contact with droplets left by an infected person, through coughing and sneezing.

"We could also become exposed if we touch our mouth, nose or eyes after touching an

infected surface.

"Since HMPV infections occur in younger children, families travelling with kids can be more mindful and seek medical help if a respiratory infection is prolonged or gets more severe," she added.

State health committee chairman Daniel Gooi Zi Sen said so far the situation in Penang is under control and tightly monitored by health authorities there.

He advised the public to take the same safety measures they did during the Covid-19 pandemic as a precaution and to prevent further spread.

He said those who experience prolonged or worsening symptoms should seek medical attention immediately at the nearest health-care facility.

Gooi added that the public can use the same techniques they used during the pandemic, like always covering the mouth and nose when coughing or sneezing, either by using a tissue or wearing a face mask.

He said wearing a face mask is highly recommended, particularly for people at high risk of infection or those showing symptoms.

This is especially important in enclosed or crowded spaces where the risk of transmission is higher.

"It's quite common to observe an increasing number of influenza cases towards the year-end due to the holidays, rainy season and increasing social activities."

Datuk Dr Kuljit Singh

an increase in flu and upper respiratory tract infection cases being treated by its members.

"The year-end increase is usually due to increased travel, both domestic and international," he said.

However, he said there were no statistics for HMPV cases, noting that it is not currently feasible at primary care levels due to costs, among other factors.

He said HMPV would remain as a flu causing respiratory virus unless complications such as pneumonia showed a sudden increase alongside with mortality rates.

Universiti Malaya's Prof Dr Moy Foong Ming said the public should not be too worried about the surge in respiratory and HMPV infections reported in China recently.

"The Health Ministry should, however, monitor if there is a surge in respiratory infections in Malaysia," said the professor of

epidemiology and public health. She said there is also no need to conduct HMPV screenings at international borders to mitigate its spread.

"The effects of these respiratory infections are not serious to most people, except vulnerable groups. It will be better for them to take preventive measures rather than screen everyone.

"However, international travellers with flu-like symptoms should be strongly encouraged to wear masks," she said.

Moy said maintaining a healthy lifestyle would also ensure good immunity against infections.

She advised the elderly, children and those with low immunity to wear masks in crowded places, maintain social distance, wash hands frequently and avoid crowded places when possible.

Meanwhile, the tourism sector has stated their preparedness for any circumstances should an outbreak occur.

Get to know HMPV

What is HMPV?

HMPV or human metapneumovirus is in the Pneumoviridae family along with respiratory syncytial virus.



When was it first discovered?

The first reported discovery of HMPV in respiratory patients was from The Netherlands in 2001.



How does it spread?

HMPV is most likely spread from an infected person to others through:

- ✓ Secretions from coughing and sneezing
- ✓ Close personal contact, such as touching or shaking hands
- ✓ Touching objects or surfaces that have the viruses on them then touching the mouth, nose or eyes

Who is at risk of infection?

Young children, older adults and people with weakened immune systems.



What are the symptoms?

- ✓ Cough
- ✓ Fever
- ✓ Nasal congestion
- ✓ Shortness of breath



The infection may progress to bronchitis or pneumonia and are similar to other viruses that cause upper and lower respiratory infections.

What are the precautions against HMPV?

- ✓ Frequently wash hands with soap or use hand sanitizers
- ✓ Practice etiquette like covering one's nose or mouth when sneezing or coughing
- ✓ Symptomatic individuals or those with a risk of being infected should wear a face mask in tight or crowded spaces



Have there been any cases in Malaysia?

As of Jan 4, data from the public and hospital laboratories: 327 samples on HMPV tested positive in 2024 compared to 225 positive samples in 2023.

However, it does not require mandatory reporting under the Prevention and Control of Infectious Diseases Act.

Source: Health Ministry, US Centre for Diseases Control & Prevention (CDC)

TheStargraphics

Malaysian Association of Tour and Travel Agents (MAITTA) president Nigel Wong said the sector has been maintaining a high standard of safety and cleanliness since the Covid-19 pandemic.

"At the moment, based on the lessons we learned from Covid-19, the tourism sector still maintains its highest level of preparedness as the last pandemic is still fresh in mind.

"For example, the hotel industry has been taking the similar steps to ensure the safety of travellers," he said, adding that they are also keeping tabs on any announcements from the authorities.

Wong advised Malaysian travellers overseas to also take extra

precautions by practising the necessary hygiene measures.

Malaysian Tourism Federation president Datuk Tan Kok Liang agreed, saying that the industry would be able to navigate through a similar crisis based on the Covid-19 pandemic experience.

He added that "it is business as usual" for the sector ahead of the Visit Malaysia 2026.

"But we must continue to remain vigilant and adopt recommended hygiene standards as and when advised by the medical authorities," he said.

FOR MORE:
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AKHBAR : THE STAR
MUKA SURAT : 12
RUANGAN : NATION

THE STAR MISL NATION 10/1/2025 (JUMAAT)
Health experts: Don't be too concerned over surge of HMPV

By GERARD GIMINO and
JUNAID IBRAHIM
newsdesk@thestar.com.my

PETALING JAYA: There is no need to be too concerned over the recent rise in respiratory infections and human metapneumovirus (HMPV) cases seen overseas, say health experts.

They also say the surge is normal in temperate countries during the winter season.

Consultant clinical microbiologist Prof Dr Zamberi Sekawi said the situation in China reflects a seasonal rise in respiratory infections caused by common respiratory pathogens.

"In my opinion, it does not pose any specific concerns for Malaysia," said Zamberi who is attached with Universiti Putra Malaysia.

On the difference between HMPV and Covid-19 infections,

Zamberi said the former is seasonal with a more limited public health impact.

He said HMPV can affect all age groups and usually causes mild to moderate respiratory illness.

"But sometimes, the infection can be severe in young children, older adults and immunocompromised individuals," he said.

Universiti Kebangsaan Malaysia's Prof Dr Sharifa Ezat Wan Puteh said HMPV is not easi-

ly diagnosed, adding that there are no home or mobile test kits like seen with Covid-19.

The professor of Public Health Medicine at UKM's Faculty of Medicine stressed the need for acute respiratory infection surveillance.

"We need to strengthen surveillance during large congregations like when Malaysia chairs Asean this year and holds Visit Malaysia Year 2026," she said.

Last week, the Health Ministry said they are closely monitoring the expected rise in year-end respiratory infections.

The ministry said this includes monitoring bacterial and virus infections which could result in Covid-19, influenza and other respiratory infections.

The Health Ministry's statement comes in the wake of concerns over the possibility of a new HMPV variant emerging.

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AKHBAR : HARIAN METRO
MUKA SURAT : 11
RUANGAN : LOKAL

HARIAN METRO M/S 11 LOKAL 10/1/2025 (JUMAAT)
DUA DOKTOR PAKAR DIDAPATI BERSALAH ATAS KECUAIAN

Kena bayar RM6 juta

Oleh Rahmat
Khairulrijal
am@hmetro.com.my

Kuala Lumpur

Dua doktor pakar yang berpengalaman lebih 60 tahun dalam obstetrik dan ginekologi (O&G) serta mengendalikan lebih 8,500 kelahiran, didapati bersalah atas kecuaiannya perubatan selepas meninggalkan pesakit dengan pendarahan kritikal di bawah jagaan jururawat tidak berdaftar untuk keluar minimum.

Mahkamah Tinggi Klang memutuskan Dr M Shanmugam dan Dr A Ravi bersama jururawat terdiri daripada Izaniey Nataliah Jukimin, Nur Aida Mat Isa serta Nesy Yasah, perlu membayar ganti rugi hampir RM6 juta kepada keluarga mendiang M Punitha dalam kes kecuaiannya perubatan menyebabkan kematian mangsa ketika menerima rawatan.

Punitha, 36, meninggal dunia beberapa jam selepas bersalin di Pusat Materniti dan Bersalin Shan milik Dr Shanmugam akibat pendarahan selepas bersalin (PPH) pada 9 Januari 2019.

Keluarga diwakili peguam K Renuka dari Teatun V Samy Renu & Co.

Ketika prosiding, mahkamah diberitahu, Punitha yang melahirkan anak keduanya, mula mengalami pendarahan yang banyak selepas plasentanya dikeluarkan secara manual.

Walaupun memberi jaminan pesakit itu stabil, Dr Ravi meninggalkan klinik dan meletakkan mendiang di bawah jagaan tiga jururawat tidak berdaftar yang ditugaskan memantau keadaan pesakit, walaupun tidak mempunyai kelayakan dan pendaftaran dari Kementerian Kesihatan (KKM).

Dr Shanmugam juga dilihat keluar dari bilik bersalin dan meninggalkan mendiang dalam jagaan dan pengawasan tiga jururawat sama.

Apabila ibu Punitha memasuki bilik bersalin, dia mendapati anak perempuannya mengalami pendarahan banyak manakala jururawat cuba menghentikan pendarahan itu menggunakan kapas.

Kedua-dua doktor terabit tidak hadir pada saat kritikal ini.

Dalam usaha menyelamatkan nyawa pesakit, mangsa kemudian dipindahkan ke Hospital Tengku Ampuan Rahimah (HTAR) di Klang.

Doktor HTAR menyifatkan keadaan Punitha sudah kritikal semasa tiba di hospital itu berikutan kehilangan darah ketara dan mengalami pembekuan intravaskular (DIVC).

Walaupun pembedahan kecemasan dan pemindahan darah dilakukan,

namun Punitha meninggal dunia.

Hakim Norliza Othman dalam ke-

putusannya berkata, Klinik Shan kekurangan bekalan perubatan asas, termasuk ubat untuk mengawal pendarahan rahim dan peralatan untuk menguruskan komplikasi selepas bersalin.

Norliza juga menekankan kegagalan doktor bertindak segera dan menangguk pemindahan pesakit ke hospital yang dilengkapi peralatan untuk mengendalikan kecemasan sedemikian.

"Walaupun mereka memiliki pengalaman luas dalam bidang perbidanan, kedua-dua doktor gagal menjangka komplikasi yang biasa dikaitkan dengan bersalin, seperti eklampsia, masalah berkaitan plasenta yang membawa kepada PPH.

"Kedua-dua mereka keluar dari bilik bersalin tanpa memastikan mendiang bebas daripada komplikasi.

"Jururawat yang tidak terbukti mempunyai kelayakan yang sepatutnya, di-

biarkan menguruskan pesakit. Kecuaian kolektif defendan secara langsung menyumbang kepada kecederaan parah terhadap mangsa, yang membawa kepada kematiannya," katanya dalam alasan penghakimannya, yang dimuat naik di laman web Jabatan Kehakiman hari ini.

Hakim juga mengkritik doktor kerana 'tidak

menghiraukan' keadaan si mati.

"Dalam kes ini, seorang ibu muda meninggal dunia selepas bertungkus-lumus melahirkan anaknya.

"Selepas bersalin, dia terpaksa menahan kesakitan yang tidak terbayang sebelum dihantar ke HTAR untuk rawatan lanjut.

"Ketika dihantar ke HTAR, ibu muda itu sudah berada dalam keadaan kritikal akibat kehilangan darah banyak, sehingga pihak hospital 'mengisytiharkan kematian' ibu malang ini.

"Insiden tragis ini boleh dielakkan sekiranya kedua-dua doktor mengambil tindakan pantas dengan menghantarnya ke HTAR dan memantau keadaannya dengan teliti serta tidak meninggalkannya dalam jagaan jururawat, sementara Dr Ravi keluar minimum.

"Tahap pengabaian ini tidak boleh dimaafkan dan secara langsung menyumbang kepada kematian ibu yang sihat," katanya.

Susulan itu, mahkamah menganugerahkan keluarga mangsa RM5,993,936 sebagai ganti rugi merangkumi RM500,000 untuk kesakitan dan penderitaan si mati, RM1 juta untuk setiap seorang bagi dua anak si mati, RM300,000 setiap seorang untuk ibu bapanya, RM1.5 juta sebagai ganti rugi terhadap Dr Ravi, RM700,000 sebagai ganti rugi teruk terhadap Dr Shanmugam dan kliniknya serta RM100,000 sebagai ganti rugi punitif.

Mangsa alami pendarahan yang banyak selepas plasentanya dikeluarkan secara manual

AKHBAR : THE SUN DAILY

MUKA SURAT : 4

RUANGAN : NATIONAL

THE SUN DAILY MIS 4 NATIONAL 10/1/2025 (JUMAAT)

Beware **dark side** of skin whitening 'drip' treatment

► Undergoing unapproved IV procedure could cause vein inflammation and anaphylactic shock, warns dermatologist

■ BY DEEPALAKSHMI MANICKAM
newsdesk@thesundaily.com

PETALING JAYA: Experts are sounding the alarm over the growing popularity of advertisements touting "intravenous (IV) skin-whitening drips" at beauty spas across Malaysia, citing the lack of regulatory approval and the significant health risks involved.

Beauty parlours are offering such treatments on social media platforms such as TikTok and Instagram. Even a branch of a popular medical clinic chain is advertising the treatment on TikTok.

However, aesthetic dermatology expert and founder of a supplements company Dr Lim Ing Kien said while certain IV procedures are allowed under strict medical supervision in clinics or hospitals, the Health Ministry has not approved IV skin-lightening treatments.

"The ministry is adamant about stopping IV skin-lightening drips and will send enforcement teams to crack down on doctors or practitioners offering such treatments.

"Also, based on current peer-reviewed studies, there is no scientific evidence that IV drips can reliably or safely lighten the skin tone."

Lim said most claims come from anecdotal stories or unverifiable sources, adding that he strongly recommended caution against such "miraculous promises".

He said the short-term risks of IV whitening drips include allergic reactions, vein inflammation, infections, or even anaphylactic shock, while the long-term risks, though under-researched, raise serious concerns.

These include liver and kidney stress, immune suppression with repeated use of high-dose glutathione, and the potential risk of cancer.

"IV administration delivers substances directly into the bloodstream. The liver and kidneys must work overtime to filter out excess or foreign substances, and high or frequent doses can lead to organ stress or damage over time."

Lim said unregulated treatments come with additional risks, including incorrect dosing, the use of unapproved substances, and complications that may go untreated if performed by unqualified individuals.

He attributed the proliferation of such skin-lightening treatments to weak

enforcement, financial gain, and misinformation since there is a high demand for quick-fix beauty solutions.

Central Dermatology Specialist Clinic consultant dermatologist Dr Teeba Raja echoed Lim's warning that IV drips for skin lightening, such as those containing glutathione or high-dose vitamin C, are not approved by the Health Ministry or the US Food and Drug Administration.

She too warned that there is limited scientific evidence supporting the effectiveness of such treatments for skin lightening, adding that the treatments are prompted by "society's ideas of what defines beauty".

"The popularity of skin-lightening treatments often reinforces narrow and unrealistic beauty ideals that equate fair skin with attractiveness. This can contribute to feelings of inadequacy, particularly among younger people who may feel pressured to conform to such standards and sign up for these unapproved treatments."

Teeba said using sunscreen daily, staying hydrated, eating a balanced diet, exercising and following a proper skincare routine can make a huge difference.

"For specific concerns, treatments such as chemical peels, skin boosters, or lasers administered by professionals can be safer and more effective options."

She also emphasised the importance of public education to combat the risks of unproven cosmetic procedures.

"Dermatologists can provide accurate, evidence-based information, guide patients towards using approved products, and encourage treatments performed by professionals holding a letter of credentialling and privileging, which is a certification that allows medical doctors to practise aesthetic medicine."

She added that collaboration with the Health Ministry to enforce regulations and stop illegal medical practices is also critical.

Lim and Teeba urged the public to consult licensed medical professionals for any cosmetic treatments.

"Skin health is about overall well-being and not just the colour of one's skin tone. Embracing a balanced lifestyle and avoiding shortcuts will save one from taking life-threatening risks," said Lim.



Lim attributed the proliferation of skin-lightening treatments to weak enforcement, financial gain and high demand for quick-fix beauty solutions. – SYED AZAHAR SYED OSMAN/THE SUN

AKHBAR : THE STAR
MUKA SURAT : 15
RUANGAN : NATION

THE STAR, FRIDAY 10 JANUARY 2025

Nation 15



Robotic surgery is transforming the world of surgery, making procedures more precise, safe, and comfortable for patients and surgeons alike.

THE STAR M15 NATION 10/1/2025 (JUMAAT)

ROBOTIC-ASSISTED SURGERY: A MODERN SOLUTION FOR FASTER, LESS PAINFUL RECOVERY

ROBOTIC surgery is transforming the world of surgery, making procedures more precise, safe, and comfortable for patients and surgeons alike.

Robotics has added a new dimension to surgical care, especially in areas like hernia surgery. Let us take a closer look at what robotic surgery is, how it started, and what makes it different from traditional methods.

A brief history of robotic surgery

Robotic surgery first emerged in the late 1980s as an experiment to see if robotics could assist doctors in complicated procedures.

It began with some initial trials in heart surgeries, where precision was key and on the warfront where surgeons could not gain safe access to injured soldiers. Over time, technology improved, and by the early 2000s, robotic surgery became a popular choice for urology and gynaecology.

General surgery took a bit longer to adopt robotics, but as technology became more advanced and accessible, it made its way into various types of surgery including those involving the stomach, intestines and hernias.

Currently, robotic surgeries performed worldwide are in the areas of general surgery.

How robotic surgery works

In robotic surgery, the surgeon

sits at a console (similar to a high-tech computer station) and controls small robotic arms that perform the actual surgery.

These arms can make very precise movements – far more than a human hand can.

The surgeon can see high-definition, 3D images of the surgery area, giving a much better view than they would get with their own eyes.

With this, surgeons can work more accurately and comfortably, especially for procedures that require careful work near sensitive areas.

It is very important that the surgery is performed by the surgeon, hence the term robot-assisted.

What makes robotic surgery special?

Robotic surgery has some key features that set it apart:

> **Precision:** The robotic arms can make exact movements that are almost impossible with regular tools. This is especially useful in delicate procedures.

> **Better visualisation:** The surgeon can see the surgery area in 3D with high definition, making it easier to identify and work around important structures.

> **Flexibility:** The robotic tools can move more freely than traditional instruments, almost like a wrist. This allows for better control in tight spaces.

> **Comfort:** The surgeon operates from a seated position with ergonomic controls, reducing fatigue, which is a real benefit

during long or difficult surgeries.

Why robotic surgery is a game-changer

Robotic surgery has brought numerous benefits that make it a valuable choice for patients and doctors alike.

Some of the main advantages include:

> **Less pain:** Robotic surgery generally leads to smaller incisions, which often means less pain, less use of painkillers and a quicker recovery for patients.

> **Lower risk of infection:** With smaller and more distant incisions, there's a reduced chance of infection.

> **Faster recovery:** Patients can usually return to their regular activities sooner than with traditional surgery.

> **Cosmetically pleasing scars:** The smaller incisions mean that scars are less visible, which can be a big plus for patients.

Robotic surgery in hernia repair

In my field of interest, hernia repair and robotic surgery have become especially useful.

Whether it is a groin hernia or a larger abdominal hernia, robotic surgery allows us to work more accurately in these areas, especially for large and complex hernias.

For example:
> **Groin hernias:** Robotic tools make it easier to place the mesh (a common material used to



In robotic surgery, the surgeon sits at a console (similar to a high-tech computer station) and controls small robotic arms that perform the actual surgery.

reinforce weak areas) securely and precisely.

> **Ventral and incisional hernias:** For these hernias, robotic surgery allows us to do complex repairs that would be challenging with traditional methods.

> **Hiatal hernias:** In cases where the stomach pushes up into the chest, robotic surgery provides the surgeon with a better view of the diaphragm, making it easier to repair the hernia and reduce the risk of it coming back.

Robotic surgery brings a new level of precision and control that is reshaping how we

approach hernia surgery and other procedures.

In summary, robotic surgery represents an exciting development in healthcare, offering patients safer, more effective, and faster recovery options for many types of surgery.

As technology continues to advance, we are eager to see how robotic surgery will further improve patient care in the years to come.

By Dr Vimal K. Vasudevan
Consultant General Surgeon
Gleneagles Hospital Penang

KKLIU: 3677 / EXP: 31.12.2026