

AKHBAR : BERITA HARIAN

MUKA SURAT : 18

RUANGAN : NASIONAL

18

1 MAC 2020 BH ARAB

Nasional

Tiada kes baharu COVID-19

Tiga lagi masih dirawat, 22 sudah pulih

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Putrajaya: Kementerian Kesihatan Malaysia (KKM) mengesahkan tiada kes baharu COVID-19 dilaporkan semalam.

Ketua Pengarah Kesihatan, Datuk Dr Noor Hisham Abdullah, berkata sehingga semalam kekal 25 kes dengan tiga kes kelmarin yang masih dirawat di hospital.

Katanya, kes membabitkan warganegara Malaysia yang dirawat di Pusat Perubatan Univer-

siti Malaya (PPUM), wanita Jepun dirawat di Hospital Kuala Lumpur (HKL) dan lelaki Itali yang masih di Hospital Sungai Buloh.

"Jumlah kes pulih sepenuhnya dan discaj sehingga hari ini (semalam) adalah 22 orang," katanya pada sidang media Situasi Semasa Jangkitan Penyakit COVID-19, di Kementerian Kesihatan, di sini, semalam.

Yang turut hadir, Ketua Pengarah Agensi Pengurusan Bencana Negara (NADMA), Datuk Mohd Abd Rahman.

Dua kes baharu dilaporkan kelmarin membabitkan seorang wanita warga Jepun berusia 41 tahun yang bekerja di negara ini dan lelaki warga Itali berusia 54 tahun yang menetap di sini.

Daripada 25 kes direkodkan sejak takat ini, 15 membabitkan warga

China, tujuh Malaysia dan tiga masing-masing warga Amerika Syarikat, Jepun serta Itali.

Dr Noor Hisham berkata, sehingga semalam 1,619 individu sudah diambil sampel bagi pengesanan jangkitan COVID-19 terdiri daripada kes yang disyaki (PUI), kontak rapat kepada kes positif COVID-19, individu yang tiba melalui misi bantuan kemanusiaan dan kapal persiaran.

Katanya, 66 warga Malaysia dan keluarga bukan warganegara yang dibawa balik dari Wuhan, China pada 25 Februari lalu kini dalam keadaan sihat di pusat pemantauan di Akademi Kepimpinan Pendidikan Tinggi (AKEPT).

"Saringan kesihatan melalui ujian pengesanan COVID-19 ketika ketibaan mendapati semuanya negatif. Mereka terus berada

di AKEPT bagi tujuan pemantauan 14 hari sehingga 11 Mac ini," katanya.

Selain itu, Dr Noor Hisham berkata, pihaknya juga memantau rapi perkembangan COVID-19 di Iran dan Itali.

"Apa yang kami (Kementerian Kesihatan) lakukan ialah memberi nasihat mengenai kesihatan kepada negara terbabit daripada mengenakan sekatan," katanya ketika ditanya sama ada pihak kementerian akan menyekat pelawat dari Iran dan Itali.

Sementara itu di Kota Kinabalu, kerajaan Sabah memperluaskan larangan perjalanan ke Korea Selatan susulan penularan COVID-19.

Kenyataan Setiausaha Kerajaan Negeri Sabah, semalam menyatakan sekatan perjalanan mem-

babitkan semua tempat kemasukan melalui udara, laut dan darat berkuat kuasa serta-merta bermula hari ini.

Kenyataan itu memaklumkan, penerbangan dari Korea Selatan ke Sabah yang membawa penumpang warganegara Malaysia dibenarkan masuk.

Kebenaran itu juga digunakan untuk rakyat Korea Selatan dan pelancong, selain rakyat Korea Selatan yang tiba menggunakan penerbangan tidak langsung dari Korea Selatan serta penerbangan keluar dari Sabah ke Korea Selatan.

Larangan perjalanan itu membabitkan warga asing dan Malaysia yang bukan penduduk Sabah dengan rekod perjalanan ke Korea Selatan dalam 14 hari dilarang memasuki negara ini.

AKHBAR : NEW SUNDAY TIMES

MUKA SURAT : 8

RUANGAN : NEWS/ NATION

NewSundayTimes . MARCH 1, 2020

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SECOND MISSION

WUHAN RETURNEES FREE OF COVID-19

Health Ministry advises discharged patients to be wary of re-infection

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ALL 66 Malaysians and their non-citizen family members who were flown home from Wuhan, China on Tuesday have tested negative for Covid-19.

Health director-general Datuk Dr Noor Hisham Abdullah said the 66, comprising 46 Malaysian citizens and 20 of their non-citizen family members, were in good health.

"They are at the monitoring centre at the Higher Education Leadership Academy (Akept).

"They passed their health screening. They will, however, remain in Akept for health monitoring purposes for 14 days, starting from Feb 26 until March 11," he said at the Health Ministry here yesterday.

They were part of the second humanitarian aid mission carried out by the Malaysian government to bring home Malaysians and their families stranded in the Covid-19 stricken area.

Dr Noor Hisham said up to yesterday, no new Covid-19 cases were reported in the country, where the total remained at 25.

He said 22 patients had recovered and were discharged.

Only three people, the country's 23rd, 24th and 25th cases, were in hospital receiving treatment, he added.

Patients who had recovered



The 66 Malaysians and their family members who were flown home from Wuhan boarding the bus to the Higher Education Leadership Academy in Negri Sembilan on Feb 26. BERNAMA PIC (Inset) Datuk Dr Noor Hisham Abdullah.



from the Covid-19 infection were advised to take precautionary measures and maintain good personal hygiene as reports of re-infection surfaces.

He said if discharged Covid-19 patients failed to do so, they could be at risk of contracting the virus for the second time.

"Even for all 22 of our (recovered) patients, before discharge, we had counselling sessions with them (informing and educating

them on personal care and hygiene) to reinforce that they can be re-infected again.

"So they, too, need to take precautions. Re-infection is one possibility. But we need it to be based on scientific data."

Reuters on Friday reported that there had been a growing number of discharged patients in China and elsewhere, who were tested positive for Covid-19 after recovering, sometimes weeks after being allowed to

leave the hospital.

This could make the epidemic harder to eradicate, it said.

On whether Malaysia plans to extend the temporary travel ban to include other nations with high number of Covid-19 cases, Dr Noor Hisham said there was no need for it.

He, however, said Malaysia was keeping a close watch on Italy (888 cases), Iran (388) and Japan (228).

"At the moment, we are watch-

ing closely the development in Iran, Italy and Japan, as well as issuing health (and travel) advisories rather than imposing a ban on travellers coming in from those countries.

"The travel ban is mainly applicable to three provinces in China and two new areas; Daegu City and Cheongdo district in South Korea.

"It is more important to observe and monitor the situation in these nations."

Sabah expands travel ban to South Koreans

KOTA KINABALU: The state government has banned South Korea nationals from entering the state in view of the Covid-19 spike in the North Asian nation.

A statement issued by the Sabah state secretary yesterday stated the travel restriction covers all points of entry by air, sea

and land from March 1 onwards.

It said incoming flights from South Korea to Sabah carrying Malaysian passengers would still be allowed to enter the state. This also applies to South Korean nationals and non-South Korean nationals arriving by non-direct flights from South Korea, as well

as all outgoing flights from Sabah to South Korea.

However, foreigners and Malaysian citizens, who are non-residents of Sabah and with recent travel history to South Korea within the last 14 days, will not be allowed to enter the state.

"Any Sabahan, Sabah permanent resident and Sabah residents under work pass, student pass, long-term social visit pass or any exemption order returning from South Korea are subjected to a compulsory 14-day home quarantine.

"All transit passengers originating from or through South Ko-

rea will not be allowed entry to Sabah," read the statement.

It also advised South Koreans who are still in Sabah to depart or return to their country before expiry of their visas.

"Should the visa expire, only one visa extension to a maximum of seven days may be granted."

AKHBAR : SUNDAY STAR

MUKA SURAT : 10

RUANGAN : NATION

10 Nation

SUNDAY STAR, SUNDAY 1 MARCH 2020

Preparing for a pandemic

M'sia bracing for the worst amid Covid-19 outbreak, says Health DG

By YUEN MEIKENG
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PETALING JAYA: Malaysia is preparing for the possibility of a Covid-19 pandemic, Health Ministry director-general Datuk Dr Noor Hisham Abdullah (pic) says.

"We are preparing for the worst and hoping for the best," he told *Sunday Star*.

He was responding to the World Health Organization (WHO) cautioning countries to brace for a potential Covid-19 pandemic.

On Friday, WHO raised its assessment of the global coronavirus risk from "high" to "very high," the most serious assessment in its new four-stage alert system.

It was reported that a steady stream of new cases from Asia to Europe, the Middle-East, the Americas and Africa have fuelled the fear that the coronavirus epidemic may be turning into a global pandemic, with some health officials warning it may be inevitable.

"We will continue to strengthen surveillance at international entry points," said Dr Noor Hisham.

"We are also actively tracing the Covid-19 virus in the community and among patients with severe acute respiratory infection in our intensive care units."

WHO chief Tedros Adhanom Ghebreyesus insisted the virus could still be contained but cautioned that countries should do everything they can to "prepare for a potential pandemic".

In Malaysia, tests for Covid-19 so far for patients in hospitals and clinics with severe acute respiratory infection and influenza-like-illness have been negative.

This shows that there has yet to be any case from local transmissions of the virus.

However, countries have been warned to keep their guard up.

"This is a reality check for every government on the planet," Dr Michael J. Ryan, deputy director of WHO's health emergency programme, was reported as saying.

"Wake up. Get ready. This virus may be on its way."



In South Korea, Italy and Iran – the countries with the biggest outbreaks outside China – the governments reported more than 3,500 infections, about twice as many as two days earlier.

Several Middle Eastern countries also reported their first confirmed cases, based on reports.

On Friday, Brazil, Georgia, Greece, North Macedonia, Norway, Pakistan, and Romania reported their first Covid-19 cases.

A case in Nigeria, meanwhile, raised fears that more infections might lurk undetected in the African continent.

More than 83,000 people in at least 56 countries have been infected, and more than 2,800 have died.

Selangor Health Department director Datuk Dr Sha'ari Ngadiman said a pandemic would require a change of protocol from the current phase of disease containment.

The protocol during a pandemic would be aimed at protecting vulnerable groups like the elderly and

those with medical conditions to mitigate the situation.

"At present, contact tracers can still connect how cases are connected from the circle surrounding an infected patient," he said.

"But if we start to find cases outside such circles – unlinked or sporadic cases, it could mean that the virus is not contained anymore."

Infectious disease specialist Datuk Dr Christopher Lee stressed Malaysia could not afford to be complacent.

"The outbreak is very active in many areas globally."

"Movement into our country from these new epicentres is still a very likely possibility," he said.

On the possibility of a pandemic, Dr Lee said the ministry had expanded its monitoring of travellers from high disease burden countries.

"Measures like early case detection and testing, prompt isolation and case management and thorough contact tracing with the appropriate quarantine procedures will boost our defence."

"Nevertheless, society still has a major role to play and that is to raise the level of personal hygiene

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as individuals and as a country.

"This is to slow down the spread of Covid-19 within our communities if or when it was to get into our country," he said.



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See pages 14 & 15

AKHBAR : SUNDAY STAR

MUKA SURAT : 14

RUANGAN : FOCUS

How potential Covid-19 cases are handled in Malaysia

A flight heads to Malaysia from an affected country like China.



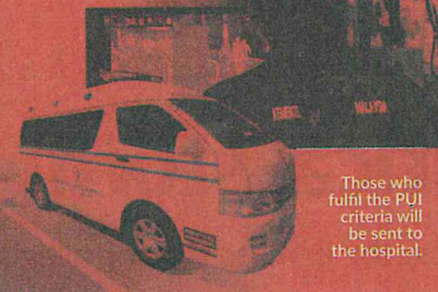
Passengers with Covid-19 symptoms like fever and cough are given masks by the flight crew to avoid possible spread to others.

Flight lands at designated wings for travellers arriving from affected countries.



Passengers with symptoms are tagged as red. Those sitting around the passenger (two seats to the passenger's left, right, front and back) are tagged as green.

Tagged passengers are examined to confirm if they can be classified as Patients Under Investigation (PUI). Other passengers are screened through thermal scanners.

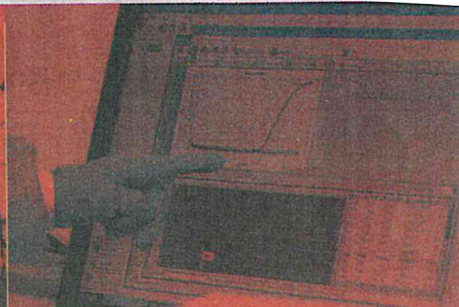


Those who fulfil the PUI criteria will be sent to the hospital.

If found to be positive for Covid-19, contact tracing starts. The patient is interviewed thoroughly on who they have been in close contact with for at least 15 minutes. This can include family members, friends and even the flight attendant.

Contact tracers locate those who have come into contact with the patient.

For contacts with symptoms, they are referred to the hospital to be tested and isolated for 14 days.



For contacts without symptoms, samples are taken from them to be tested. They must remain at home for surveillance.

After 72 hours from the first sample taken, another sample is taken from the contacts to double confirm that their tests are negative.

Patients who have tested positive for Covid-19 are treated until they recover.



Sources: Health Ministry, Selangor State Health Department

Face-to-face with Covid-19

Malaysia is preparing to face the possibility of Covid-19 being declared a pandemic. In the meantime, frontliners dealing with the outbreak are soldiering on through long work days to contain the disease here.

Stories by YUEN MEIKENG
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LIKE soldiers, they save and protect lives—all through their armour of medical gowns and equipment.

The legion of doctors, nurses, surveillance teams, researchers, contact tracers, clinic workers and hospital staff are our heroes in keeping the Covid-19 outbreak under control here so far.

New cases have been reported. But as of now, there has yet to be any local transmission of the virus.

It's due to the dedication of the frontliners - from screening passengers at airports to the thorough work of contact tracing - the process of identifying those who have been in contact with infected patients.

"Some haven't had a day off since January," says Selangor Health Department director Datuk Dr Sha'ari Ngadiman.

"They are exhausted but highly motivated. Even though they are working overtime, there are generally no complaints," he tells *Sunday Star* during an interview.

While other states have similar protocols, Selangor handles the bulk of international arrivals from KLIA, KLIA2, Sultan Abdul Aziz Shah Airport in Subang and Port Klang.

To deal with the outbreak, staff have been mobilised from other health facilities to boost the surveillance teams at such entry points.

Screening is done for all travellers especially from affected countries like China, South Korea, Italy, Iran and Japan.

Surveillance teams at the airports work around the clock, with work being split into three shifts.

Detailing the process of how patients are detected, Dr Sha'ari explains that the crucial step of contact tracing, which requires health inspectors and doctors to thoroughly interview the infected person about their movements to track down other possible cases.

"Questions can include which taxi did they take, which restaurant did they go to and so on," he says.

From combing through the details in the patient's account, contact tracers have to diligently identify and locate those who have come into close contact with the patient.

This means, anyone who has engaged with the infected person for at least 15 minutes will have to be identified and tested.

It's a meticulous task, requiring contact tracers to draw circles around the patient.

In one case, a patient who was found to be positive, had attended three Chinese New Year dinners. For each dinner, contact tracers zoomed into who was dining with her at the same table to be tested.

The biggest number of contacts identified to be tested so

far is 125 people in one case.

"So far, our team has managed to locate 100% everyone in such circles. But it hasn't been easy and you can't do it in one day. Generally, people have been cooperative.

"Contact tracing will only be done to patients who have been tested positive for Covid-19," Dr Sha'ari adds.

He shares that some have voluntarily come forward to be tested even though they have had no contact with an infected person.

"If they don't fit the criteria, we don't test them as it is unnecessary," Dr Sha'ari says, although he understands people are fearful.

A challenge for contact tracers arises when patients do not remember details, or if they reveal new information later.

"When this happens, contact tracers start a new search. Some patients interviewed by contact tracers remember a lot of details, while others require more effort," he shares.

Medical staff dealing with patients have also been careful and adhering to protocol, including changing new gowns every time they deal with a different patient.

Ambulance vans are also decontaminated after ferrying patients under investigation to the hospital.

Dr Sha'ari also reveals that there are times hospital staff also have to go the extra mile when treating patients.

"In one case, a baby was

admitted and the family members requested for a specific baby milk powder brand. Other brands had caused the baby to have diarrhoea.

"A medical staff had to go to a shopping mall to find something which was similar to the formula," he says.

Hospital staff also helped foreign patients as much as they could, such as by providing them with SIM cards, powerbanks and mobile phone chargers.

"Since they are travellers who have been referred to our hospitals, there were many things they didn't have with them like toothbrushes.

"We did our best to meet their needs, including requests for Western food," he says.

And while frontliners stare Covid-19 in the eyes everyday, it is only human that some of them do worry about being infected themselves, Dr Sha'ari admits.

"Our strength is our staff. We make sure they are properly trained to handle personal protective equipment.

"Staff have to take daily temperature readings and any symptoms have to be reported," he says.

There is also hospital counselling services for the frontliners should they need to voice out any concerns and if they need psychological support.

Nobody can say for sure when the Covid-19 outbreak will blow over, but Dr Sha'ari

has faith that the current system and manpower in place here is prepared if matters get worse.

"Our frontliners are doing what they can for the people. They are ever ready to work and are doing their best," he says.

Highlighting the importance of contact tracing, medical virologist Emeritus Prof Datuk Dr Lam Sai Kit Dr Lam says the process is hoped to interrupt or break the chain of transmission.

But there is still a lot to learn about the virus, especially how it is transmitted.

"Frontliners must know how to identify Covid-19 cases and distinguish them from other respiratory illnesses.

"Since it is not always possible to distinguish clinically one from the other, they must handle all suspicious cases as though they are Covid-19.

"Frontliners like doctors, nurses, attendants, cleaners and other care-givers who come into contact with patients must be trained to handle patients and the areas they may have contaminated, and given protective cloths, goggles, and other gears depending on the levels of contact," urges the Academy of Sciences Malaysia senior fellow.

Laboratory personnel who handle infectious samples such as throat and nasal swabs, sputum, blood samples, must practice universal precaution to ensure their safety.

AKHBAR : SUNDAY STAR

MUKA SURAT : 15

RUANGAN : FOCUS

Preparing for the possibility of a Covid-19 pandemic

IT'S all hands on deck as Malaysia prepares to face the possibility of a pandemic.

This is in response to the World Health Organisation (WHO)'s caution for countries to brace for a potential Covid-19 pandemic.

As Health Ministry director-general Datuk Dr Noor Hisham Abdullah tells *Sunday Star*, "We are preparing for the worst and hoping for the best."

Selangor Health Department director Datuk Dr Sha'ari Ngadiman says a pandemic would require a change of protocol from the current phase of disease containment. The protocol during a pandemic would be aimed at protecting vulnerable groups like the elderly and those with medical conditions to mitigate the situation.

Medical virologist Emeritus Prof Datuk Dr Lam Sai Kit says the last pandemic declared was in 2009 due to the H1N1 influenza.

"According to the WHO Guidelines for declaring a pandemic, there must be a sudden

increase in the number of cases that is spread over several countries or continents," he says.

WHO has warned member countries not to be too optimistic as we do not know enough about this new virus and disease, and whether there could be a second wave.

As for the general public, Dr Lam, a Universiti Malaya research consultant, urges them to follow the guidelines issued by the ministry.

"As with SARS, MERS, H1N1 or other influenzas, personal hygiene is very important.

"This includes frequent hand-washing with soap and water, use of sanitisers, wearing of masks, reducing unnecessary travels to designated countries.

"If you show any symptoms of respiratory illnesses and may have exposure to a patient or been to a country where the disease is rampant, then see a doctor and get yourself tested," he adds.

Infectious disease specialist Datuk Dr Christopher Lee says

Malaysia can't afford to be complacent.

"The outbreak is very active in many areas globally.

"Movement into our country from these new epicenters is still a very likely possibility," he explains.

On the possibility of a pandemic, Dr Lee says the ministry has expanded its monitoring of travellers from high disease burden countries.

Measures like early case detection and testing, prompt isolation and case management and thorough contact tracing with the appropriate quarantine procedures will boost our defence.

"Nevertheless, society still has a major role to play and that is to raise the level of personal hygiene as individuals and as a country.

"This is to slow down the spread of Covid-19 within our communities if or when it were to get into our country," he says.

Hand hygiene and surface disinfection should be part of our daily culture and not just during disease outbreaks, he urges.



Unsung heroes: Malaysian health workers gearing up at KLIA as the second batch of Malaysian nationals, evacuated from the Chinese city of Wuhan arrived recently. - AFP/Health Ministry/Muzzafar Kasim.

"We need to keep ourselves updated with the most current guidance from the ministry. "This is still a very 'new' virus and there're still quite a bit of gaps

in our knowledge about it. "If we do become unwell, seek appropriate medical attention and minimize contact with others," he advises.

A resilient healthcare system in Malaysia

By SWEE KHENG KHOR

THERE'S no such thing as a good moment for a country to endure political chaos and instability but Malaysia's timing seemed particularly bad.

Malaysia was already dealing with a slowing economy, the ongoing corruption trial of former prime minister Datuk Seri Najib Razak and stalling civil service reforms. Now this past week's high-level resignations and shifting coalitions created an extra layer of political turmoil. Interim Prime Minister Tun Dr Mahathir Mohamad had no cabinet, meaning Malaysia had to handle the coronavirus outbreak - and the resulting disease, Covid-19 - without a health minister.

So how did Malaysia manage? There are three key areas for any country to build resilient health systems and these are especially vital in Malaysia.

A strong civil service

Politicians may come and go but civil servants remain. The country had 22 cases, mostly involving Chinese nationals, and 20 of those have recovered.

Much of the health system capacity, institutional memory and leadership remains within the technocracy of the Health Ministry. This apparatus is led by the director general of health, currently a surgeon, and is battle-hardened from previous outbreaks of Sars, H1N1, Nipah and Mers-COV.

The 270,000 employees of the MOH are also familiar with more common infectious diseases, dealing with dengue and tuberculosis daily. They are also supported by world-class laboratory and research functions.

For example, Malaysia's Institute of Medical Research developed the primers and probes for real-time polymerase chain reaction (PCR) testing to identify infection the same day Chinese scientists released the DNA sequence of Covid-19 into an



Malaysia Boleh: The stability and skill within the Health Ministry as well as a tightly knit professional core that remains relatively independent of politics means Malaysia's health system is resilient enough to face any challenges. - AFP/Ministry of Health Malaysia

open-access repository. This was earlier than World Health Organisation (WHO) laboratory protocols.

For better or worse, Malaysia has had a high turnover of health ministers: 20 since 1955. Yet the health service's consistent progress is testament to the skill, sacrifice, independence and stability of the MOH and its civil servants.

A tightly knit health fraternity

The most important thread uniting Malaysia's diverse health fraternity is the shared set of professional and medical ethics underpinning clinical care offered by doctors, nurses, pharmacists, dentists and paramedics.

The country's professional societies include Islamic medical and scientific organisations, such as the Islamic Medical Association of Malaysia (IMAM) and IKRAM Health. Their clear philosophies and credo allow them to provide an essential and well-regarded service to Malaysia, while also uniting through faith.

All professional societies are equally committed to science and service, and their membership includes both public and private practitioners.

This is yet another layer of unity. Despite an ongoing brain drain to the private sector, a period of compulsory public service means everyone currently in the private sector still has friends, former colleagues, seniors

and juniors in the public service. These social links are crucial in promoting and maintaining cohesion and a shared purpose. Although there will be the inevitable minority of black sheep, the Malaysian health fraternity is tightly knit. It's helpful that health is less adversarial than the legal fraternity. Especially during times of national crisis, the health fraternity unites to save lives: as it did during Sars, H1N1 and Nipah, and as it will again now.

Independence from politics

The social determinants of health - such as housing, employment, gender equity and early childhood education - are

arguably more important than the services delivered by doctors in hospitals.

This reinforces the role of "Health in All Policies", a World Health Organisation framework that encourages governments to think beyond the MOH. Nevertheless, the specifics of health care - such as delivering medicines or performing surgeries and other procedures - are generally left to the MOH rather than other government entities that contribute to public health more generally.

Most politicians keep their distance from health care because of the scary jargon, scientific complexities and its life-and-death decisions. And members of society too often take their health for granted until they need health care. As a result, in Malaysia health care is essentially ring-fenced from politics. Health care professionals are trusted, especially public sector practitioners rightly regarded as self-sacrificing, committed and highly competent.

The technocracy of the MOH is appreciated by the public for delivering health care with autonomy and relative insulation from petty politics. Some politics is inevitable, of course, but this ring-fencing allows the MOH to be more operationally independent than other government agencies. They will retain their self-sufficiency and effectiveness in fighting Covid-19 and delivering the routine services.

Although the timing of Malaysia's political upheaval is not ideal, the skill, stability and resilience of the health system's professionals enabled it to confront the current challenge posed by the coronavirus, even without a permanent health minister. - South China Morning Post

Swee Kheng Khor was a frontline doctor in a Malaysian public hospital during the 2009 H1N1 swine flu outbreak. He is currently based at the University of Oxford.