



**KENYATAAN AKHBAR
KETUA PENGARAH KESIHATAN MALAYSIA
KANAK-KANAK DARI SUNGAI BULOH YANG MENGALAMI
KOMPLIKASI SEMASA BERKHATAN BERAMAI-RAMAI DI SURAU**

Kementerian Kesihatan Malaysia (KKM) ingin mengesahkan satu lagi kes kanak-kanak yang mengalami komplikasi prosedur berkhatan baru-baru ini seperti yang dilaporkan beberapa akhbar bercetak dan media elektronik tempatan.

Kes ini melibatkan seorang kanak-kanak lelaki berumur 10 tahun yang telah menjalani prosedur berkhatan di surau berhampiran rumahnya dalam majlis berkhatan beramai-ramai pada 25 November 2016. Kanak-kanak tersebut dibawa ke Jabatan Kecemasan di Hospital Selayang 2 hari selepas itu, iaitu pada 27 November 2016 setelah ibubapa dinasihatkan membawa kanak-kanak tersebut untuk mendapatkan rawatan di Hospital Selayang. Iubapa mendapati berlakunya pendarahan di kemaluan dan air kencing kanak-kanak tersebut mengalir keluar daripada lubang di bahagian bawah batang kemaluan (fistula korona), akibat kecederaan kepada saluran kencing.

Setelah diperiksa di Jabatan Kecemasan Hospital Selayang, adalah didapati bahawa tiada pendarahan aktif di kemaluan seperti yang dilaporkan akhbar. Iubapa telah diberi penjelasan oleh Pakar Pembedahan Urologi Kanak-kanak bahawa rawatan pembedahan seelok-eloknya dilakukan setelah bengkak surut dan setelah saluran darah ke kepala kemaluan menjadi lebih lancar. Fistula korona tersebut akan

dirawat dengan pembedahan setelah tisu-tisu sekelilingnya sembuh. Kanak-kanak tersebut telah diperiksa secara rapi sekerap 3 kali sehari semasa di wad di Hospital Selayang. Namun begitu, ibubapa pesakit telah memutuskan untuk mendapat pendapat lain daripada pakar di hospital swasta dan telah menandatangani pelepasan keluar dari hospital atas tanggungan risiko sendiri (*discharged at own risk*). Pihak Hospital Selayang telah memberikan ibubapa catatan rujukan ringkas buat hospital swasta yang berkenaan bagi menjelaskan status pesakit, selain memaklumkan kepada ibubapa bahawa mereka boleh datang semula untuk mendapatkan rawatan susulan pada bila-bila masa.

KKM sedang menjalankan siasatan lanjut mengenai kes ini. Seperti dimaklumkan sebelum ini, prosedur berkhatan ini meskipun merupakan prosedur yang ringkas, namun komplikasi daripada prosedur ini mungkin parah dan membawa padah kepada pesakit. Semua pengamal kesihatan yang menjalankan prosedur berkhatan adalah bertanggungjawab memastikan mereka mempunyai tahap kompetensi dan pengalaman yang mencukupi untuk menjalankan prosedur ini. Mereka diingatkan bahawa sebarang komplikasi yang terjadi adalah di bawah tanggungjawab masing-masing pengamal kesihatan.

Sekian, terima kasih.

DATUK DR. NOOR HISHAM ABDULLAH
KETUA PENGARAH KESIHATAN MALAYSIA
8 Januari 2017



**PRESS STATEMENT
DIRECTOR GENERAL OF HEALTH**

**10 YEAR OLD BOY FROM SUNGAI BULOH THAT EXPERIENCED
COMPLICATIONS DURING MASS CIRCUMCISION AT LOCAL SURAU**

The Ministry of Health (MOH) would like to confirm another case of a boy who sustained complications following a circumcision procedure as reported recently in various printed and electronic media.

This case involved a 10 year old boy who was circumcised in a mass circumcision ceremony at a surau near his home on the 25th November 2016. The boy was brought to the Emergency Department at the Selayang Hospital two days later on 27 November 2016; after the parents were advised to bring the boy to seek treatment. The parents had noticed bleeding from the circumcision wound with urine being passed from a coronal fistula on the distal penile shaft (urine was flowing from a false opening at the lower part of his penis) due to an injury to the urethra.

Upon examination at the Emergency Department of Selayang Hospital, it was noted that there was no active bleeding in the penis as reported in the media. The parents were informed by the Consultant Paediatric Urologist that surgical treatment should preferably take place after the swelling subsides and the vascularity to the glans penis improves. The corona fistula will then be repaired through surgery once the surrounding tissues have healed. The boy was reviewed three times a day while in the ward at

Selayang Hospital. However, the parents subsequently decided to seek a second opinion from a private hospital specialist, and opted for an 'at own risk (AOR)' discharge from the hospital. The Selayang Hospital had provided the parents with a memo outlining the clinical condition of the boy to the hospital concerned. They had also informed the parents that the boy could return for follow-up consultations at Selayang Hospital at any time.

The MOH is currently conducting a further investigation of this case. As previously mentioned, although circumcision is considered as a minor procedure, the complications that may arise can be severe and devastating for the patient. The MOH would like to remind all health practitioners that they are responsible to ensure that they have the necessary competency and sufficient experience to perform any circumcision procedures, and they are liable for any complications that may occur.

Thank you.

DATUK DR. NOOR HISHAM ABDULLAH
DIRECTOR GENERAL OF HEALTH MALAYSIA
8th January 2017