

## Public urged to donate blood, save lives

**SIBU:** A paediatrician has urged more people to come forward as blood donors, stressing that every donation plays a crucial role in saving lives amid declining blood supplies.

Paediatrician and head of the Clinical Research Centre at Sibul Hospital Dr Toh Teck Hock said the hospital's blood bank had recently

implemented conservation measures following a drop in donations over the past one to two months, particularly during the festive 'Kong Xi Raya' period.

He said while some individuals may feel uneasy at the sight or mention of blood, donating blood is a simple and cost-free act that many are able to do.

"As doctors, we sometimes take for granted the availability of blood when we request it for patients, but in reality, supply depends entirely on voluntary donors," he said in a Facebook post after participating in a blood donation drive here recently.

Toh, who donated blood together with his wife, described the experience as meaningful and

humbling, adding that good health should not be taken for granted.

He said passing the screening process was itself a blessing, noting that some young individuals were unable to donate due to health issues such as high blood pressure.

Toh also highlighted the universal nature of blood donation, saying it transcends social, racial and

cultural differences.

"Blood does not recognise boundaries of class, race or belief. Once donated, it becomes a universal gift that can help anyone in need. Every drop counts."

He urged the public to donate regularly, emphasising that even a single contribution can make a significant difference. - Bernama

10 THURSDAY | APR 2, 2026  
theSun SPEAK UP

FOLLOW theSun ON TELEGRAM  
@thesuntelegram



# Too hot to ignore

**E**VERY year, Malaysia announces, almost ritually, that it has recorded its "hottest year yet". The phrase has become so routine that it risks losing meaning like an annual headline we scroll past without pause.

But this normalisation of heat is precisely the danger. When extremes become expected, urgency dissolves.

This year alone, the Health Ministry has reported 15 heat-related cases, including heatstroke incidents and one death.

The rising heat in Malaysia is often framed narrowly as a public health concern: heatstroke cases, dehydration and strain on hospitals. These are real and immediate.

Yet, to understand the full gravity of what is unfolding, we must widen the lens. Heat is not just a meteorological condition; it is a systemic stressor reshaping productivity, inequality, governance

and even geopolitical stability.

Consider labour. Malaysia's economy still depends heavily on outdoor and semi-outdoor work like construction, logistics, agriculture and the informal sectors.

As temperatures rise, productivity does not decline linearly but collapses beyond certain thresholds. Workers slow down, take longer breaks or fall ill. Employers quietly absorb inefficiencies while workers, especially migrants and lower-income Malaysians, bear the physical cost. Heat becomes an invisible tax on the most vulnerable.

Education is another under-discussed casualty. The King himself has warned that prolonged heat could affect students, urging authorities to ensure their well-being.

But beyond immediate health risks lies a more insidious impact – cognitive decline. Classrooms without adequate cooling can become environments where attention, memory and learning capacity can be compromised. Over time, this will erode national competitiveness in ways that will not show up in next quarter's GDP but will define the next generation.

And then there is the global context. The current instability surrounding Iran and the broader West Asian region is not just a geopolitical issue, it is also a climate issue. Energy markets are tightening, oil prices are volatile and inflationary pressures are rising across Asia. Analysts warn that prolonged conflict could significantly reduce regional

growth while driving inflation higher.

This creates a dangerous feedback loop. As climate impacts intensify, governments need more resources to adapt. Yet, geopolitical instability drains those very resources, diverting attention and funding towards immediate economic survival.

Malaysia is caught in this intersection. A heat-stressed nation operating within an energy-unstable world. What is most troubling, however, is the illusion of adaptation.

Air conditioning is often seen as the solution. But it is, in reality, a temporary coping mechanism that exacerbates the underlying problem. Increased cooling demand drives higher electricity consumption, much of which still depends on fossil fuels. The result is a self-reinforcing cycle: more heat, more cooling and more emissions.

Worse still, access to cooling is unequal. The wealthy retreat into climate-controlled spaces while the poor endure the heat. Climate change, in this sense, is an inequality multiplier.

So what must change?

First, Malaysia must treat heat as a critical infrastructure risk. This means investing in urban design by expanding tree canopies, implementing reflective building materials and redesigning cities to reduce heat islands. These are structural defences.

Second, labour policies need updating. Mandatory heat safety standards, such as enforced rest cycles, shaded work areas and hydration requirements, should be codified and strictly monitored. Technology can assist here, from wearable heat sensors to predictive weather alerts

tailored for industries.

Third, education infrastructure must adapt. Retrofitting schools with passive cooling designs like ventilation, shading and heat-resistant materials can significantly improve learning conditions without dramatically increasing energy use.

Fourth, diversify energy aggressively. Malaysia has strong potential in solar energy. Scaling this is not just an environmental imperative but also an economic one, reducing vulnerability to global energy shocks exacerbated by geopolitical tensions.

Fifth, public awareness must evolve. Heat should not be treated as a seasonal inconvenience but as a chronic risk. Simple behavioural shifts like hydration habits, adjusted work hours and community cooling spaces can make a substantial difference.

But perhaps most importantly, the narrative must change. If every year is the hottest on record, then we are not experiencing anomalies, we are witnessing a trajectory.

If that trajectory continues, the question is no longer how hot it will get but how much of our social, economic and political systems will bend or break under the pressure.

The real crisis is not that Malaysia is getting hotter; it is that we are beginning to accept it.

*"Heat should not be treated as a seasonal inconvenience but as a chronic risk. Simple behavioural shifts like hydration habits, adjusted work hours and community cooling spaces can collectively make a substantial difference."*



CLIMATE VOICE  
BY MOGESH SABABATHY

**Dr Mogesh Sababathy** is a youth climate advocate, member of the National Consultative Panel to the Natural Resources and Environmental Sustainability Ministry and PhD candidate at Universiti Putra Malaysia.

Comments: letters@thesundaily.com



Classrooms without adequate cooling can become environments where attention, memory and learning capacity can be compromised. - AFP/PIIC

# Passport to global medicine



NUMed offers its MBBS graduates distinctive pathways to global medical careers.

MEDICINE today is increasingly borderless. Doctors are no longer defined solely by where they trained, but by how widely their qualifications are recognised. Those who can move confidently between healthcare systems are better equipped to respond to global demand.

With an international-standard curriculum, Newcastle University Medicine Malaysia (NUMed) equips its Bachelor of Medicine, Bachelor of Surgery (MBBS) graduates with distinctive pathways to practise medicine in Malaysia, the United Kingdom (UK) and beyond.

One key advantage lies in the flexibility of housemanship training. Graduates may complete their housemanship in accredited Malaysian hospitals and obtain certification from the Malaysian Medical Council (MMC).

For those with global ambitions, a dual-recognition route provides a powerful springboard. Graduates can complete training in Malaysia-based hospitals that are approved by the General Medical Council (GMC), enabling them to obtain both MMC

and GMC certification. Recognised institutions include Hospital Sultan Ismail, Hospital Sultanah Aminah and Hospital Enche Besar Hajjah Khalsom in Johor; Universiti Malaya Medical Centre in Kuala Lumpur; Penang General Hospital; Queen Elizabeth Hospital in Sabah and Sarawak General Hospital and Hospital Sibul in Sarawak.

Alternatively, graduates may choose to complete their housemanship or Foundation Year training in the UK. This immersive experience further enhances their global mobility and professional standing.

With multiple recognised pathways, NUMed graduates are uniquely positioned to cross borders with confidence. Discover how you can be part of this borderless healthcare ecosystem at its Open Day on April 4.

■ Find out more at <http://www.newcastle.edu.my>, email [admissions@newcastle.edu.my](mailto:admissions@newcastle.edu.my), call 07-555 3800, or WhatsApp 011-1231 5411/012-784 9456.

## FITs CONTEST

# Ipoh hospital's cardiology team bags world title in US

**KUALA LUMPUR:** The success of the cardiology team from Ipoh's Hospital Raja Permaisuri Bainun (HRPB) at the American College of Cardiology (ACC) Conference 2026 in New Orleans has brought pride to Malaysia.

The team comprising Dr Chen Tai Meng, Dr Ang Jian-Gang and Dr Yee Shen Yew outperformed other participants to emerge as world champions in the Fellows-in-Training (FITs) Jeopardy competition.

Health Minister Datuk Seri Dr Dzulkefly Ahmad said the prestigious accomplishment proved that Malaysian medical specialists were on par with the best at the international level.

"Congratulations also to Dr Nor Hanim Mohd Amin (head of

HRPB'S Cardiology Department) and the entire HRPB cardiology team for their strong leadership and support.

"This success marks an extraordinary 'hat-trick' of excellence after winning the national title organised by the National Heart Association of Malaysia in 2024 and the regional ACC Asia title in Singapore in 2025," he said in a post on X yesterday.

The FITs Jeopardy, held on March 28-30, is a prestigious interactive learning platform that combines elements of quizzes, competition and education, specifically for cardiology trainees to enhance their knowledge and build global professional networks.

**Bernama**

# Tempoh tunggu kerja graduan perubatan kini hanya dua bulan

Langkah antara lima inisiatif KKM kekang Singapura tarik tenaga pakar Malaysia

Oleh Suzalina Halid  
suzalina@bh.com.my

**Kuala Lumpur:** Kementerian Kesihatan (KKM) menambah baik tempoh menunggu pengambilan kerja graduan perubatan kepada dua bulan berbanding purata 10 bulan yang dilaksanakan sebelum ini.

KKM memaklumkan perkara itu adalah inisiatif utama dalam lima usaha yang dilaksanakan Kementerian bagi mengekang pengambilan agresif tenaga kerja perubatan oleh Singapura yang kini mengubah strategi dalam menarik tenaga pakar perubatan dari Malaysia.

Dalam masa yang sama, KKM menegaskan pihaknya komited memastikan pengambilan graduan perubatan dilaksanakan dalam tempoh yang wajar jika graduan perubatan tidak melengahkan permohonan kerja seperti yang ditetapkan.

Selain itu, katanya bagi inisiatif kedua, KKM juga merangka kaedah tawaran melalui 'surat tawaran bersyarat' (STB) kepada pelajar perubatan tahun akhir di institusi pengajian tinggi (IPT) bagi mengekang pengambilan agresif tenaga kerja itu oleh Singapura.

"Kaedah tawaran itu dikendalikan Bahagian Sumber Manusia (BSM) Kementerian itu selaku urus setia penempatan Pegawai Perubatan Gred UD9 (Kontrak).

"Ia sebagai satu bentuk pelawaan kepada pelajar memohon penempatan sebagai Pegawai Perubatan Gred UD9 (Kontrak) sebaik sahaja pihak Senat di universiti memperakukan pelajar layak dianugerahkan ijazah berkaitan.

"Tawaran STB ini juga diharapkan dapat mempercepatkan urusan penempatan dan mengelakkan keciciran graduan perubatan yang tidak mendaftar selepas tamat pengajian," katanya.

Sebelum ini, *BH* melaporkan sektor penjagaan kesihatan awam negara kini disifatkan sedang berdepan krisis tenaga kerja yang kritikal susulan penolakan besar-besaran penempatan



Sektor penjagaan kesihatan awam negara kini disifatkan sedang berdepan krisis tenaga kerja yang kritikal.  
(Foto hiasan)

oleh doktor pelatih.

Nota penyelidikan MBSB Research mendedahkan, daripada 5,000 slot penempatan *housemanship* yang ditawarkan KKM pada Januari 2026 bagi mengatasi lambakan graduan, hanya 529 individu atau kira-kira 10.5 peratus melaporkan diri.

## Ketirisan bakat makin serius

Situasi itu mencerminkan ketirisan bakat yang semakin serius, terutama apabila negara jiran, Singapura, mengubah strategi dalam menarik tenaga pakar perubatan dari Malaysia.

Inisiatif ketiga diambil KKM adalah menawarkan tempoh khidmat wajib selama dua tahun bagi pengamal perubatan berpendaftaran penuh seperti yang digariskan dalam Akta Perubatan 1971 sejurus selepas pegawai melengkapkan latihan siswazah.

"Tempoh ikatan antara pegawai dan agensi pembiayaan pengajian perubatan adalah sepenuhnya tertakluk kepada kandungan perjanjian kontrak antara agensi terbabit dengan pegawai," katanya.

Selain itu, dalam memastikan pengambilan graduan perubatan dapat dioptimumkan, KKM dan agensi berkaitan mengambil beberapa langkah, iaitu menyediakan proses lebih komprehensif bagi permohonan sijil amalan dari Majlis Perubatan Malaysia.

Katanya, ia turut membabitkan pelaksanaan tapisan skim Pegawai Perubatan Gred UD9 (Kontrak) melalui agensi Pihak Berkuasa Melantik sebanyak dua kali setiap bulan bagi memastikan kesinambungan pengambilan graduan perubatan ini dapat dilaksanakan secara konsisten.

"KKM mengenal pasti sebahagian kecil graduan perubatan

yang menagguhkan latihan siswazah atas faktor belum diperaku di pihak berkuasa lesen amalan perubatan, sedang melengkapkan persediaan pengajian kepakaran, masih terikat dengan kerja sampingan dan memerlukan tempoh rawatan masalah kesihatan.

"Sehubungan itu, angka pengambilan bagi sesuatu siri adalah bergantung kepada jumlah permohonan kerja diterima dan tidak mencerminkan kadar penolakan terhadap keseluruhan kapasiti latihan yang tersedia," katanya.

Menurut KKM, pengeluaran graduan perubatan institusi pengajian tinggi dari dalam dan luar negara adalah tertakluk kepada kalender akademik masing-masing sepanjang tahun dan bukan dikeluarkan hanya pada hujung tahun seperti kefahaman sesetengah pihak.

Justeru, pengambilan sebanyak enam kali setahun dilaksanakan bagi membolehkan graduan perubatan tahun akhir yang telah disahkan oleh Senat universiti ditawarkan penempatan di KKM untuk menjalani latihan siswazah tanpa perlu menunggu mereka bergraduasi.

KKM turut menjelaskan pengambilan direkodkan sebanyak 529 adalah merujuk kepada jumlah pengambilan bagi siri pertama, berbanding keseluruhan enam siri setahun dan bukan jumlah pengambilan tahunan.

Menurutnya, jumlah 5,000 yang dinyatakan pula adalah merujuk kepada kapasiti slot latihan siswazah yang disediakan di 48 hospital latihan siswazah seluruh negara dan bukan bilangan jawatan yang perlu diisi pada satu-satu masa.