



YOUR OPINION

Heat, haze and the hidden cost to children

FOR children in Malaysia, heatwaves and haze are no longer rare disruptions but part of everyday life.

The Health Ministry has reported multiple heat-related cases so far this year. In Kedah, 206 schools were forced to close after level 2 heatwave conditions were recorded. These may seem like isolated incidents, but taken together they point to a more urgent concern.

Analysis of global climate data by Unicef indicates that Malaysia now experiences around eight heatwaves a year, roughly four times more than in the 1960s, with each lasting about five days on average. Today, an estimated 1.16 million children in Malaysia are exposed to heatwaves.

We also know that periods of high heat often intersect with the haze season. In recent weeks, several parts of Malaysia have experienced unhealthy air quality, driven by regional forest fires and intensified by hotter, drier conditions.

What is often overlooked is how much this affects children. Heatwaves present real dangers. Prolonged exposure increases the risk of dehydration, heat exhaustion and heatstroke, as children's bodies heat up faster and cool down more slowly than adults.

These risks are compounded during haze periods. As children's lungs are still developing and they breathe more rapidly than adults, poor air quality has immediate and often more



Urgent concern: Filepic of children at a school in Petaling Jaya. Putting children at the centre of climate resilience is not a choice; it is a national responsibility. – ART CHEN/The Star

severe effects.

Evidence from the 2021 report by Unicef and academic partners ("Impacts of Climate Change on Children in Malaysia") shows that haze exposure is linked to increased respiratory illness and hospitalisation among children, with urban and low-income communities disproportionately affected.

While the impacts of heat and haze are frequently seen in clinics and emergency rooms, they are also manifested in missed school days and disrupted routines.

And the impact on learning is significant. Heat makes it harder to concentrate, drains energy and slows cognitive function. Over

time, these effects accumulate.

By graduation, students in the hottest regions can lose up to a year or more of total learning.

There is also a less visible psychological impact. Repeated exposure to extreme heat, polluted air and environmental uncertainty can increase stress, fatigue and anxiety in children.

Schools may respond by adjusting schedules, cancelling outdoor activities or even introducing temporary school closures.

These efforts matter, but they are no longer sufficient. What is needed now is a clear and urgent shift from response to readiness.

Heat and air pollution must be treated with the same urgency and policy priority as floods or

storms – not as stand-alone hazards but as interconnected, systemic risks to children's development and daily lives.

Children's climate adaptation needs should be integrated across key systems such as education, health, social protection and urban planning.

The National Adaptation Plan is an opportunity to drive this shift by strengthening preparedness, particularly in how heat and haze affect children's health, learning and well-being.

In practical terms, this means ensuring schools can cope with rising heat through basic measures such as ventilation, shaded spaces and access to safe drinking water. It also means linking early warning systems to timely, coordinated action for schools, clinics and families.

Most importantly, climate adaptation must be grounded in the lived realities of children and young people. Listening to their experiences is essential when designing solutions that effectively protect their health, dignity and development.

Children are the least responsible for climate threats. But without urgent, collective action, they will shoulder the heaviest burden. Putting them at the centre of climate resilience is not a choice; it is a national responsibility, and the time to act is now.

NASHA LEE
Climate & Environment
specialist
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Show compassion to patients who miss their appointments

I HAVE been seeking treatment at the district hospital in my town for years, scheduling appointments once every six months for consultation with a doctor and collection of medication.

I had an appointment at the hospital on March 30 at 2pm but could not make it as I had to attend to urgent matters at work in Ipoh.

I went to the hospital the next day and saw a tag with the word "Defaulted" attached to my appointment card. I was asked to go straight to a consultation room without undergoing the usual checks for weight, pulse or blood pressure. No question was asked about why I had missed my appointment the day before.

After waiting for almost one hour, I was given my medication slip and asked to fix my next appointment. I left the hospital feeling disappointed because I did not get a proper health screening or talk to a doctor.

Being a senior citizen, I wanted to know if I was okay after my last appointment six months ago, a period long enough for health conditions to deteriorate.

I would like to ask the Health Ministry if the use of the "Defaulted" tag has become

standard practice in public health facilities.

My next appointment is in six months' time. By then, I would not have seen a doctor for one year. Surely, this gap is too wide for a senior citizen with health issues. Couldn't another appointment be scheduled as soon as possible and not six months later?

I don't think any patient would want to miss their appointment. Sometimes, due to unforeseen circumstances, it is impossible to honour the appointment.

At the very least, please give patients an opportunity to offer an explanation. The "Defaulted" tag should only be used if and when truly warranted, and not as a blanket ruling.

Despite the large crowds and long hours of waiting, I have been extremely pleased with the healthcare accorded to me as a pensioner in government hospitals over the years.

I humbly request the Health Ministry to stop using the "Defaulted" tags if it is standard practice, and to show compassion to patients who miss their appointments.

JAGINDER SINGH RAIPATTI
Batu Gajah, Perak

Bringing care closer to home

Bandar Tun Razak programme blends health screenings with community cheer

By BAVANI M

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THE Sungai Midah flood retention pond site in Bandar Tun Razak, Kuala Lumpur, was a hive of activities as it hosted a health screening and community picnic.

Organised by Sungai Midah Flood Retention Pond Nature Lovers Club, the "Komuniti Sihat Pombina Negara" (Kospin)

event drew over 100 residents from Bandar Tun Razak, Cheras and Sungai Besi.

Among the visitors was former trader Siti Zawiya Ahmad, 73, who arrived early for the health screenings.

After rolling up her sleeves for a blood pressure check, she proceeded to do a blood test, keen to get the basics done.

She then moved on to another station, stepping onto a weighing scale for a body mass index (BMI) check — a quick measure to evaluate if her weight was within a healthy range.

"At my age, this type of health screening is important.

"When there is an opportunity to get checked, I want to be among the first," said Siti Zawiya.

Kospin is a Health Ministry initiative held in collaboration with local communities.

It brings basic health screenings directly to neighbourhoods, with a focus on early detection of non-communicable diseases.

Shafendy Mat Hassan, a building supervisor, said, "I came to



A volunteer (right) conducting a blood sugar test on a visitor during the health screening and picnic event in Bandar Tun Razak. — Photos: ART CHEN/The Star

check my blood sugar and BMI."

The 47-year-old said that regular health screenings were important as they could detect what's going on inside the body even if someone was feeling fine.

Dr Masita Musa, from the Cheras Health Clinic, said the programme was supported by Kospin volunteers, many of whom were residents from the surrounding areas.

"The volunteers are trained to carry out basic health checks

and guide participants through the screening stations."

Equipped with basic tools such as blood pressure monitors, glucometers and weighing scales, volunteers carried out quick health checks on the spot.

"The equipment is simple, but it is enough to detect early warning signs and to alert residents to seek further treatment if needed," said Dr Masita.

"For many residents, familiar faces make a difference.

"It's easier when such events involve someone from the community.

"People feel more comfortable asking questions," she added.

Health Ministry staff and interns from Universiti Kebangsaan Malaysia also shared simple, practical talks on health and nutrition.

Kampung Malaysia Raya Residents Association chairman Mohd Zainuddin Amran, who is also chairman of Sungai Midah

Flood Retention Pond Nature Lovers Club, said the picnic gave the programme a festive twist to draw in a younger crowd.

There was plenty of food, music and easy chatter, creating a setting where residents could get screened without the usual clinical feel.

"We want to make it enjoyable so that more people, especially the younger generation, will step up and take charge of their health," said Mohd Zainuddin.



Mohd Zainuddin wants more people, especially the younger generation, to take charge of their health.



Siti Zawiya recognises importance of health screenings at her age.



Shafendy: Regular health checks important even if someone is feeling fine.

Rising kidney failure cases strain national healthcare system

PETALING JAYA: Malaysia is facing a fast-escalating kidney failure crisis, with the cost of treating end-stage kidney disease (ESKD) surging six-fold over the past decade to RM3.3 billion annually, placing mounting pressure on the country's healthcare system.

MCA deputy president Datuk Dr Mah Hang Soon said the sharp rise reflects a widening "silent epidemic" driven largely by non-communicable diseases, particularly diabetes mellitus and hypertension, adding that Malaysia must urgently shift its healthcare focus from treatment to prevention.

"The most effective and sustainable solution is prevention. Greater emphasis must be placed on early intervention, including nationwide screening for high-risk groups and tighter control of diabetes and blood pressure."

He also said the expanded use of SGLT2 inhibitors (prescription medications) marks a positive step, noting that the treatment not only improves diabetes control, but also slows the progression of kidney disease.

Mah said early detection efforts must be strengthened, with routine kidney function testing integrated into primary care, especially for high-risk patients.

"Detecting chronic kidney disease (CKD) earlier could delay or even prevent progression to ESKD, reducing long-term healthcare costs."

On Monday, Health Minister Datuk Seri Dr Dzulkefly Ahmad said CKD has become one of the most pressing health challenges facing Malaysians today.

He said more than five million people in the country are estimated to be living with CKD, but only about 5% are aware of their condition.

He added that the prevalence of CKD has risen significantly, from 9% in 2011 to 15.5% in 2025.

He supported the Health Ministry's "PD-first" approach, which prioritises peritoneal dialysis as a cost-effective option that could ease congestion in dialysis centres while offering patients greater independence.

Peritoneal dialysis is a treatment in which fluid is put into the stomach area to clean waste and extra water from the blood using the body's lining.

However, he stressed that stronger patient education, improved home support systems and better incentives are needed to increase uptake.

Mah said Malaysia must accelerate efforts to expand kidney transplant services, which is the most cost-effective long-term treatment option.

"This requires boosting organ donation rates, strengthening transplant infrastructure, offering tax relief for donors and enhancing public awareness."

He added that financial protection for patients must not be overlooked, calling for targeted subsidies, transport assistance and low-interest financing schemes to ease the burden on families, particularly amid rising living costs.

He highlighted the need for more sustainable healthcare practices, noting that dialysis, especially haemodialysis, consumes significant resources and generates substantial waste.

"A comprehensive, prevention-first strategy is essential to safeguard public health and the long-term sustainability of Malaysia's healthcare system."

— BY **THE SUN TEAM**



Hanifah (centre) in a light moment with (from right) Sagah and Willie. At left is Dr Veronica.

MoH studying long-term solutions for Teng Bukap clinic

Samuel Aubrey

KUCHING: A new site for the Teng Bukap Health Clinic in Serian is being considered following the closure of its original facility due to safety concerns, said Deputy Health Minister Datuk Hanifah Hajar Taib.

Hanifah said the Ministry of Health (MoH) is studying long-term solutions to address issues affecting the clinic and to ensure continued healthcare services for the local community.

In a Facebook post, she said she had conducted a working visit on Monday to assess the current condition of the clinic and the healthcare needs in the area.

She was also taken to inspect a proposed new site for the

The ministry will carefully evaluate and formulate the best course of action to address the site-related issues and operational challenges faced by the clinic.

Datuk Hanifah Hajar Taib

clinic's construction, as well as the temporary facility currently operating at Dewan Teng Bukap.

During the visit, she also received a detailed briefing on the clinic's current operations at the temporary location, including challenges faced in ensuring the continued delivery of healthcare services to local residents.

"The ministry will carefully evaluate and formulate the best course of action to address the site-related issues and operational challenges faced by

the clinic.

"This is to ensure that quality healthcare services and comfort can continue to be enjoyed by the local community," she said.

Among those who welcomed Hanifah for the visit were Minister for Education, Innovation and Talent Development Dato Sri Roland Sagah Wee Inn and Puncak Borneo MP Datuk Willie Mongin.

Also present was Sarawak Health Department director Dr Veronica Lughah.

RM1.8 MILLION IN DAMAGES SOUGHT

MCMC sues Sunway Lagoon over alleged food poisoning

KUALA LUMPUR: The Malaysian Communications and Multimedia Commission (MCMC) has sued Sunway Lagoon Sdn Bhd, claiming over RM1,819,800 in damages.

This followed an alleged food poisoning incident involving attendees during a family day held at the water theme park last year.

MCMC filed the suit at the Shah Alam High Court on Jan 2.

According to its statement of claim, the commission engaged Sunway Lagoon to organise the event on Oct 4, which was attended by over 5,800 guests.

"During the family day, an employee of the plaintiff verbally reported to representatives of the defendant that one of the lunch dishes served during the family day smelt bad and tasted sour.

"However, no action was taken by the defendant.

"Within 24 to 48 hours following the family day, the plaintiff received reports from attendees who suffered from symptoms

such as acute diarrhoea, stomach pain, vomiting and fever.

On Oct 6, MCMC lodged a report at the Cyberjaya police station and raised the matter with the Petaling district health office, which issued a closure notice to the park's food and beverage department from Oct 7 to 21.

The Selangor Health Department said investigations found that the incident was caused by long storage of cooked food before serving and food contamination at the park's kitchen.

In its defence, Sunway Lagoon said the alleged incident did not happen at its premises or during the event, but rather after its conclusion. It also said three selected food samples were tested and reports indicated that they were within the specified safe limits.

MCMC was represented by law firm Sreenevasan while Sunway Lagoon was represented by law firm Azim, Tunku Farik & Wong.

The case management was fixed on April 29.

Industri farmaseutikal berdepan kenaikan kos



Konflik geopolitik antara Amerika Syarikat (AS) dan Iran yang semakin memuncak bukan sahaja menggugat pasaran tenaga global, malah turut memberi kesan tidak langsung kepada industri farmaseutikal, termasuk di Malaysia.

MBSB Research berkata, walaupun Selat Hormuz bukan laluan utama bagi penghantaran ubat siap, kesan rantaian daripada konflik berkenaan mula dirasai melalui peningkatan kos bahan mentah, tenaga dan komponen pembungkusan.

Menurutnya, situasi itu meletakkan Malaysia dalam kedudukan unik, relatif stabil dari segi logistik namun terdedah kepada tekanan di peringkat hulu rantaian bekalan.

Katanya, berdasarkan laporan Malaysian Association for Pharmaceutical Suppliers (MAPS), sekitar 30 peratus pembekal farmaseutikal negara adalah dari India selain Korea Selatan dan Jerman.

Kebanyakan penghantaran

itu tidak melalui Selat Hormuz, namun kebergantungan India terhadap laluan berkenaan bagi mendapatkan input berasaskan petroleum dan sumber tenaga menjadikan kos pengeluarannya sensitif terhadap sebarang gangguan.

"India adalah sumber utama ubat generik Malaysia, yang selama ini membantu negara menjimatkan kira-kira RM1 bilion kos perubatan. Namun, sekiranya kos pengeluaran di negara itu meningkat akibat lonjakan harga tenaga, penjimatan berkenaan berisiko terhakis susulan kenaikan harga ubat sehingga 50 peratus.

"Pada masa sama, konflik itu turut menjejaskan komponen sokongan industri farmaseutikal, khususnya bahan pembungkusan seperti aluminium dan plastik. Sekitar sembilan peratus pengeluaran aluminium global datang dari rantau Asia Barat menjadikan bekalan bahan itu terdedah kepada gangguan," katanya dalam nota penyelidikan.

MBSB Research berkata, kekurangan aluminium boleh menjejaskan pengeluaran pek lepuh (blister pack) yang digunakan secara meluas bagi ubat generik, manakala botol ubat yang diperbuat daripada polipropilena pula bergantung kepada bahan mentah seperti propana dan nafta, produk sampingan industri minyak dan gas.

Selain itu, katanya proses pensterilan pembungkusan yang menggunakan gas petrokimia turut terkesan oleh turun naik pengeluaran minyak mentah.

Gangguan dalam sektor tenaga dijangka meningkatkan kos pengeluaran pembungkusan, sekali gus memberi tekanan tambahan kepada pengeluar ubat.

"Sehubungan itu, pemain industri dan pihak berkuasa disaran memperkukuh daya tahan rantaian bekalan serta meneroka sumber alternatif bagi mengurangkan kebergantungan terhadap pasaran luar yang terdedah kepada risiko geopolitik," katanya.