

Malaysia shares healthcare expertise with Namibia

KUALA LUMPUR: Malaysia has shared its experience with Namibia in developing a sustainable healthcare system, particularly in achieving universal health coverage (UHC) for its people.

Health Minister Datuk Seri Dr Dzulkefly Ahmad (*pic*) said the exchange took place during a courtesy call by Namibia's Minister of International Relations and Trade, Selma Ashipala-Musavyi, yesterday.

"Our public healthcare achievements are often recognised and used as a benchmark by lower-middle-income (LMI) countries, and



we are ready to share this experience with our friends from Namibia," he said in a Facebook post.

He said the visit served as an important platform to strengthen health diplomacy between the two countries, while also opening opportunities to expand strategic cooperation, particularly in public health and related trade.

"This includes a commitment to strengthening the pharmaceutical industry, where Malaysia has expressed its readiness to assist Namibia in addressing medicine supply shortages through enhanced trade and healthcare services."

Dzulkefly told Bernama that both sides also explored opportunities for capacity-building collaborations to strengthen Namibia's healthcare system further.

He added that Malaysia also aims to promote itself as a medical tourism destination, given its internationally recognised high-quality healthcare services.

"I believe this exchange of views reflects the commitment of both countries to aligning national initiatives with global strategic partners."

Associations: Medical glove prices steady for now, but may rise

By RAGANANTHINI VETHASALAM
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PETALING JAYA: Although retail prices of medical grade gloves remain stable for now, stakeholders are not ruling out a price increase in the coming months.

However, supply remains sufficient and consumers have no cause for concern at the moment, said Malaysian Community Pharmacy Guild president Sarah Abdullah.

She said retail prices for medical grade gloves remain stable as pharmacies continue to utilise existing inventory.

"While we anticipate some price adjustments as the market transitions from 2Q into 3Q, driven largely by supplier-level cost pressures, these have not yet materialised at the consumer level."

She said clinics and hospitals may feel the price adjustments due to the high consumption of medical grade gloves.

President of Federation of Private Medical Practitioners' Associations Malaysia Dr Shanmuganathan TV Ganeson said there is no widespread disruption in the supply of medical-grade gloves in Malaysia, and most clinics and healthcare facilities are not facing shortages.

"However, there are emerging upstream concerns.

"The ongoing geopolitical tensions have affected the production and supply of key petrochemical inputs such as butadiene and nitrile, which are essential components in the manufacturing of nitrile gloves. This may lead to increased production costs globally.

He said if the situation persists, healthcare facilities may begin to see gradual price adjustments and tighter supply conditions in the coming months – possibly from mid-May.

Malaysian Pharmacists Society president Amrahi Buang said gloves prices are affected by the shortages and higher costs of nitrile butadiene rubber latex (NBR), due to shipping disruptions as a result of the Middle East conflict.

He said the price increase has already taken place.

"There is an increase due to demand but it is not consistent. It depends on where you get the supply from," he said.

In March, the Malaysian Rubber Glove Manufacturers Association (Margma) called for temporary relief measures from the government to manage the severe shortage of NBR triggered by the blockade of the Strait of Hormuz.

Margma said because NBR is manufactured from petroleum derivatives and it is the primary raw material for nitrile gloves, the crisis has directly impacted both its availability and cost.

Calls for equal permanent posts for pharmacists

PETALING JAYA: Equal opportunities should be given to pharmacists to hold permanent positions in the public healthcare system, similar to medical officers, says Datuk Dr Mah Hang Soon (*pic*).

The MCA deputy president said the government must end what he described as "double standards" in hiring under the contract employment policy, stressing that pharmacists, dentists, nurses and other healthcare professionals should be treated fairly as well.

"Malaysia is already facing a serious brain drain in public healthcare.

"If pharmacists are now pushed out through an unfair contract system, the crisis will only deepen," he said in a statement yesterday.

He added that pharmacists play a critical role in healthcare delivery, including ensuring the safe

dispensing of medicines, advising patients on dosage and side effects, and monitoring drug interactions.

"Without sufficient pharmacists, patient safety and service efficiency will suffer."

Dr Mah called on the government to implement several measures, including providing a transparent pathway to permanent positions for pharmacists, absorbing experienced contract pharmacists into permanent roles, and increasing the number of funded posts in line with actual demand.

Other proposals include introducing clearer promotion structures, offering incentives for rural postings, and developing a long-term national healthcare workforce plan.



He also urged the government to streamline recruitment and workforce planning by giving the Health Ministry greater control over the process.

"Healthcare reform cannot be selective. If the government continues to pursue inconsistent policies, Malaysia risks crippling its public health system through preventable loss of talent. A nation that fails to value its pharmacists will ultimately fail its patients," said Dr Mah.

Malaysian Pharmacists Society president Amrahi Buang recently raised concerns about an alleged double standard in the Health Ministry's contract policy, leaving pharmacists feeling disadvantaged, with some saying the contract system itself has become a

basis for unequal treatment.

Some 40 pharmacists are set to exit the health service in July if they do not receive permanent posts.

On April 7, the Health Ministry said it was unable to extend the contracts of dozens of pharmacists because they had reached the five-year maximum duration.

The ministry clarified that any offer of permanent appointment is conditional.

The appointment and placement letters will be issued only after candidates meet all criteria.

Former senator Dr RA Lingeshwaran, who completed his first three-year term in the Senate on March 6, reportedly said these officers were among 352 contract pharmacists who were offered permanent posts and told to wait for their appointment letters, with no dates given.



Integrating rare diseases into healthcare agenda

AS Malaysia joins the global community in observing World Primary Immunodeficiency Week (April 22 to 29), attention turns to a group of conditions that are often described as rare << more accurately understood as rarely recognised.

These disorders, now classified as Inborn Errors of Immunity (IEI), encompass more than 500 genetically-defined conditions that impair the body's ability to defend itself against infections.

At the clinical level, they are defects in the body's genetic blueprint. At the human level, they are often a quiet and prolonged struggle marked by repeated illness, delayed diagnosis and uncertainty.

In Malaysia, this struggle is compounded by a significant diagnostic gap. A systematic review conducted in 2020 reported a prevalence of only 0.37 cases per 100,000 people. When compared to international registry data, this figure is strikingly low. Current estimates suggest that between 70% and 90% of Malaysians living with these conditions remain undiagnosed.

Children born with severe forms of immune deficiency may appear entirely healthy in their

earliest days. One such condition, Severe Combined Immunodeficiency (SCID), is characterised by the absence of functional T and B lymphocytes, leaving infants highly vulnerable to infections.

Delayed diagnosis is frequently linked to gaps in awareness both among the public and within the healthcare system itself.

A recent study conducted at USM, published in the *Malaysian Journal of Medicine and Health Sciences*, examined the knowledge, attitudes and practices of medical practitioners regarding expanded newborn screening.

The findings pointed to a notable gap in awareness, particularly in relation to the implementation and benefits of such screening programmes.

Encouragingly, Malaysia has taken an important step forward with the launch of the National Policy for Rare Diseases in February 2026. The policy signals a commitment to strengthening clinical governance, improving early detection and integrating rare diseases into the broader healthcare agenda.

One of the most critical areas for improvement is newborn screening. At present, there is limited published evidence on

systematic screening for primary immunodeficiencies in Malaysia.

Yet, for conditions such as SCID, early identification through newborn screening can be life-saving.

Advances in diagnostic technology have also made early detection more feasible. Techniques such as whole exome sequencing and targeted genetic panels enable clinicians to identify specific mutations responsible for immune dysfunction.

In parallel, laboratory tests such as TBNK flow cytometry can rapidly assess key immune cell populations, guiding clinical decision-making.

Importantly, treatment is not beyond reach. Intravenous immunoglobulin therapy, which replaces missing antibodies, is already available and subsidised in public healthcare settings for patients with antibody deficiencies. For more severe cases, haematopoietic stem cell transplantation offers a potential cure with success rates exceeding 90% when performed early.

These developments highlight an important reality. For many patients with immune disorders, the barrier is not the absence of treatment but the delay in diagnosis.

Expanding newborn screening programmes would allow conditions such as SCID to be detected at birth. Strengthening training for healthcare providers can help bridge existing knowledge gaps and improve clinical suspicion.

Increasing access to specialised care, including clinical immunology services in regional hospitals, would ensure that patients receive timely and appropriate management.

At the same time, public awareness remains essential. Families are often the first to notice when something is not right. Supporting them with the knowledge to recognise early warning signs can facilitate earlier medical consultation and referral.

Malaysia now stands at a point where policy, technology and clinical expertise are beginning to align. The task ahead is to ensure that these advances translate into earlier recognition and better outcomes for patients.

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Scam wad RM700 terbongkar

HSAJB menyerahkan kepada polis untuk siasatan lanjut.

Pihak pengurusan Hospital Sultanah Aminah Johor Bahru (HSAJB) memandang serius isu tular berkaitan individu yang didakwa sebagai staf hospital meminta bayaran deposit wad secara tunai tanpa resit rasmi.

Bagaimanapun, siasatan awal mendapati individu berkenaan bukan kakitangan hospital. Justeru, tindakan segera telah diambil dan individu tersebut telah diserahkan kepada pihak polis untuk siasatan lanjut.

Orang awam dinasihatkan agar sentiasa berwaspada dan hanya membuat sebarang bayaran di Kaunter Hasil rasmi serta memastikan resit sah diterima bagi setiap transaksi.



JOHOR BAHRU - Hospital Sultanah Aminah Johor Bahru (HSAJB) memandang serius dakwaan tular mengenai seorang individu yang menyamar sebagai staf hospital dan meminta bayaran deposit wad secara tunai tanpa mengeluarkan resit rasmi.

Pengurusan hospital dalam kenyataan memaklumkan, siasatan awal mendapati individu yang merupakan wanita berkenaan bukan kakitangan hospital.

Susulan itu, tindakan segera diambil dan menyerahkan individu terbabit kepada pihak polis untuk siasatan lanjut.

Sementara itu, Ketua Polis Daerah Johor Bahru, Asisten Komisioner Raub

Selamat mengesahkan satu laporan dibuat berhubung kejadian berkenaan.

Jelasnya, seorang wanita tempatan berusia 27 tahun dipercayai bekerja sebagai sukarelawan di hospital berkenaan telah ditahan.

"Seorang lelaki warga asing berusia 38 tahun yang bekerja sebagai buruh kasar membuat laporan mengenai kejadian itu dan dipercayai suspek meminta deposit sebanyak RM700.

"Suspek ditahan dan direman selama empat hari bermula Rabu bagi membantu siasatan mengikut Seksyen 420 Kanun Keseksaan," katanya ketika dihubungi.

Vape dicampur dadah undang kematian mengejut

Kuala Lumpur: Risiko kematian mengejut akibat dos berlebihan boleh berlaku pada bila-bila masa di bilik kuliah atau asrama sekiranya dadah yang dikesan dijual dalam pasaran rokok elektronik (vape) terus diedarkan secara terbuka.

Pensyarah Kanan Fakulti Undang-Undang Universiti Teknologi MARA, Dr Nurul Jannah Mustafa Khan, berkata situasi itu membimbangkan kerana kekuatan dadah berkenaan sukar diukur secara mata kasar.

Beliau berkata, keadaan itu bukan sahaja berisiko meragut nyawa, malah boleh merosakkan masa depan akademik serta kesihatan mental mahasiswa yang terperangkap dalam ketagihan.

“Oleh itu, untuk menyelamatkan pelajar sebagai langkah intervensi, institusi pengajian tinggi (IPT) tidak boleh lagi sekadar memberi amaran.

“IPT perlu menguatkuasakan larangan vape secara lebih agresif dan mempertimbangkan saringan cecair secara rawak menggunakan teknologi pengesanan awal.

“Selain itu, universiti juga perlu bekerjasama rapat dengan Agensi Anti Dadah Kebangsaan bagi memantau rantaian bekalan cecair ini di sekitar kampus,” katanya.

Kelmarin, media melaporkan dadah jenis Furanil fentanyl yang digelar ‘zombi’, dipercayai 50 hingga 100 kali lebih kuat daripada morfin, dikesan dijual secara terbuka dalam pa-

“IPT perlu menguatkuasakan larangan vape secara lebih agresif dan mempertimbangkan saringan cecair secara rawak menggunakan teknologi pengesanan awal”



Nurul Jannah Mustafa Khan,
Pensyarah Kanan
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saran vape kepada pelanggan tetap.

Kegiatan itu terbongkar selepas Jabatan Siasatan Jenayah Narkotik (JSJN) Bukit Aman melancarkan Op Vape 1.0 di seluruh negara bermula 13 April hingga Jumaat lalu, dengan nilai rampasan mencecah RM4.6 juta.

Mengulas lanjut, Nurul Jannah berkata, IPT juga perlu menyediakan laluan pemulihan kepada pelajar yang sudah terjebak agar mereka berani tampil men-



dapatkan rawatan tanpa rasa takut dihukum.

Katanya, isu percampuran dadah sintetik dalam cecair vape kini menjadi ancaman serius kepada komuniti IPT, termasuk UiTM.

“Sebagai bahan yang jauh lebih kuat daripada morfin, kehadirannya dalam pasaran vape bukan lagi sekadar isu salah guna bahan, tetapi satu ancaman langsung terhadap keselamatan nyawa pelajar.

“Pelajar IPT antara golongan paling terdedah kerana penggunaan vape sudah menjadi norma sosial, manakala taktik penjual

yang menyasarkan pelanggan tetap boleh menyebabkan ketagihan serius tanpa disedari,” katanya.

Sementara itu, Pengerusi Kumpulan Bertindak Ibu Bapa bagi Pendidikan (PAGE), Datin Noor Azimah Abdul Rahim, berkata pendedahan dadah melalui vaping satu ancaman yang ibu bapa perlu sedar dan lebih prihatin.

Ini kerana katanya, anak-anak sekarang lebih mudah terpengaruh dengan budaya vaping.

“Dadah furanyl fentanyl ini amat berbahaya dan lebih mudah mengakibatkan maut jika terlebih dos,” katanya.

Justeru katanya, ibu bapa perlulah mengawasi anak mereka dan berbincang berkenaan bahaya dadah ini dan lebih bahayanya vape yang cecairnya boleh dicampuri dengan furanyl fentanyl itu.

“Pastikan anak-anak meluangkan masa dengan aktiviti yang sihat dan bergaul dengan rakan-rakan baik dan tidak terabit dalam budaya lepak yang ketara serta aktiviti negatif.

“Jika ada sebarang keperluan, ibu bapa juga boleh mendapatkan sokongan atau bantuan daripada pelbagai pihak termasuk AADK,” katanya.

MINTA DEPOSIT MASUK WAD TANPA RESIT

HSA nafi individu petugas hospital

Johor Bahru: Pengurusan Hospital Sultanah Aminah (HSA) menafikan dan memandang serius isu tular berkaitan individu didakwa petugas hospital yang meminta bayaran deposit wad secara tunai tanpa resit rasmi.

HSA menerusi hantaran di Threads memaklumkan siasatan awal mendapati individu itu bukan petugas hospital dan kes diserahkan kepada pihak polis untuk siasatan lanjut.

Sehubungan dengan itu, orang awam dinasihatkan sentiasa berwaspada dan hanya membuat sebarang bayaran di Kaunter Hasil rasmi serta memastikan resit sah dite-

rima bagi setiap transaksi.

"Langkah ini bagi mengelakkan diri daripada menjadi mangsa penipuan oleh pihak yang cuba mengambil kesempatan," menurut hantaran itu.

Terdahulu, tular hantaran seorang wanita di Threads yang mempersoalkan sekiranya hospital berkenaan mengenakan bayaran deposit bagi pendaftaran wad.

Dia mendakwa ibunya perlu membayar sejumlah RM30 kepada individu terbabit, iaitu seorang wanita, ketika ingin membuat pendaftaran masuk wad ayahnya tanpa diberi resit bayaran.

KKM disaran nilai semula syarat ketat produk perubatan regeneratif tempatan

Kuala Lumpur: Kementerian Kesihatan Malaysia (KKM) disaran memperkalkan laluan penilaian khas bagi produk perubatan regeneratif tempatan sebagai alternatif menyembuhkan penyakit berkaitan kerosakan sel.

Pengasas Jabatan Kejuruteraan Tisu dan Perubatan Regeneratif (DTERM), Universiti Kebangsaan Malaysia (UKM), Prof Emeritus Datuk Dr Ruszymah Idrus berkata, kekangan birokrasi dan peraturan ketat semasa membantutkan inovasi tempatan.

Beliau yang juga Presiden Persatuan Kejuruteraan Tisu Malaysia (TESMA) berkata, situasi itu berisiko menyebabkan negara kehilangan potensi pelaburan industri bernilai sehingga RM240 bilion menjelang 2031.

"Perubatan regeneratif adalah cabang perubatan moden yang bertujuan

"Perubatan regeneratif adalah cabang perubatan moden yang bertujuan membaiki, menggantikan atau menjana semula sel, tisu dan organ manusia yang rosak"

Dr Ruszymah

membaiki, menggantikan atau menjana semula sel, tisu dan organ manusia yang rosak.

"Berbeza dengan rawatan konvensional, pendekatan ini menggunakan teknologi seperti sel stem dan kejuruteraan tisu untuk merawat punca penyakit secara biologi.

"Antara contoh aplikasinya termasuk menghasilkan kulit tiruan untuk pe-

sakit luka bakar teruk seperti produk MyDerm, membaiki rawan lutut yang haus tanpa pembedahan penggantian sendi, serta menjana semula tisu jantung selepas serangan jantung," katanya.

Beliau berkata demikian pada Bicara Emeritus Perubatan Regeneratif: Antara Sains dan Harapan Manusia Sejagat di Hospital Canselor Tuanku Muhriz UKM, di sini, semalam.

Ruszymah berkata, Malaysia memiliki kepakaran tinggi dan sudah melabur jutaan ringgit dalam penyelidikan sel stem dan kejuruteraan tisu.

Katanya, antara produk inovasi tempatan yang sudah terbukti di peringkat makmal termasuklah produk penggantian kulit buatan, MyDerm serta produk regenerasi lutut, tulang dan saraf.

"Malangnya, sehingga kini tiada satu pun produk

regeneratif keluaran penyelidikan tempatan yang berjaya mendapat kelulusan pasaran di Malaysia.

"Produk kita hebat di atas kertas dan di makmal, tetapi 'mati' sebelum sampai ke katil pesakit kerana proses regulatori yang terlalu panjang dan kompleks.

"Situasi ini mengakibatkan pembaziran dana penyelidikan awam serta menjejaskan moral saintis muda," katanya.

Beliau berkata, lebih membimbangkan, negara berisiko ketinggalan dalam sektor pelancongan kesihatan yang semakin kompetitif.

Justeru, beliau merayu supaya Agensi Regulatori Farmaseutikal Kebangsaan (NPR) dan KKM mewujudkan satu mekanisme khas atau 'Fast Track' bagi menilai produk regeneratif tempatan yang sudah melepasi fasa penyelidikan berimpak tinggi.