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Social media platforms remove 'Reta Pens' posts

By RAGANANTHINI VETHASALAM
raga@thestar.com.my

PETALING JAYA: A social media platform has removed several posts promoting unapproved injections of experimental drugs known as "Reta Pens".

Searches for the term on the platform now yielded no results.

An alert on the platform read: "This phrase may be associated with behaviour or content that violates our guidelines."

It said promoting a safe and positive user experience remained its top priority.

"For more information, we invite you to review our community guidelines," the alert read.

However, checks showed that one could still access earlier promotional videos through links to sellers' profiles.

On Monday, *The Star* reported that "Reta Pens" were rapidly gaining traction on social media and being sold on the black market, with influencers and vendors touting it as a next-generation weight-loss injection capable of delivering dramatic results.

Reta Pens, which refers to "Retatrutide", is a "triple hormone receptor agonist" that mimics three gut hormones to reduce hunger, slow digestion and increase fat burning.

Although the drug remains under regulatory review worldwide, it is already being marketed online as the next "miracle" slimming jab.

Checks showed sellers offering retatrutide in pre-filled injection pens and vials which was widely available through social media and other online platforms with prices ranging from RM250 for a 10mg dose to as high as RM788.

Retatrutide is being developed by an American pharmaceutical company as an experimental obesity treatment which has been reported to help patients lose up to 28.3% of their body weight.

The company announced on May 21 that the drug had successfully completed Phase 3 clinical trials.

It has yet to receive approval from health regulators, including the United States Food and Drug Administration (FDA) and Malaysia's Health Ministry, for public use.

The Health Ministry has confirmed that retatrutide is not registered with Malaysia's Drug Control Authority (DCA) and was not permitted for sale in the country.

Its Pharmaceutical Services Programme said the prohibition extends beyond sales to include the importation, marketing and supply of the substance in Malaysia.

To date, one warning letter has been issued and 51 listings linked to retatrutide have been removed from social media and e-commerce platforms.

As retatrutide has not been registered by the DCA, the Health Ministry is unable to verify the safety, quality or efficacy of products claiming to contain the substance, including those sold online.

AMR linked to climate change

WHO: Antimicrobial resistance a leading public health threat

By KHOO JIAN TENG and RAGANANTHINI VETHASALAM
[illegible]@thestar.com.my

YOUR RIGHT to know

PETALING JAYA: Climate change may have just accelerated one of the world's fastest-growing threats to global health – antimicrobial resistance (AMR).

Experts say it is time for Malaysia to take the findings of a recent global study seriously, given its tropical climate.

A first-of-its-kind study published in *The Lancet Planetary Health* in April found that climate change was associated with a 10% global increase in antibiotic resistance genes in salmonella between 1940 and 2023, based on an analysis of 480,000 samples from 139 countries.

The findings have raised concerns as nations grapple with rising temperatures, more frequent floods and droughts, and growing AMR, which the World Health Organisation has identified as one of the world's leading public health threats.

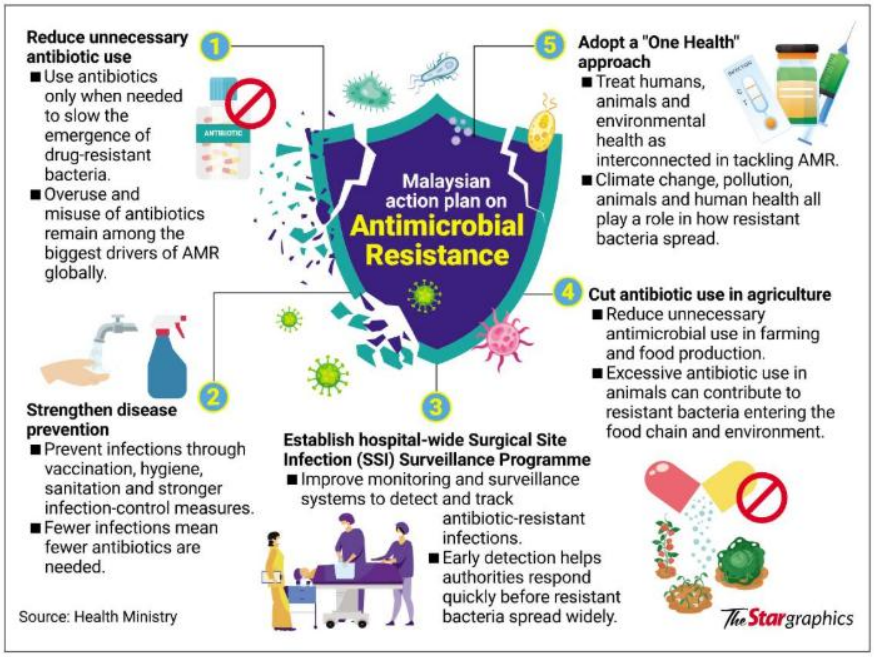
Universiti Putra Malaysia's Faculty of Medicine and Health Sciences medical lecturer Dr Tengku Zetty Maztura Tengku Jamaluddin, who is also Hospital Sultan Abdul Aziz Shah Infection Control Unit head, said climate change does not directly cause AMR, but can contribute to its emergence and spread alongside factors such as antibiotic use, infection control practices and sanitation conditions.

"There is a growing body of evidence suggesting that climate change may act as a contributing factor in the emergence and spread of antimicrobial resistance," she said.

She said the study is particularly relevant to Malaysia given its tropical climate, periodic flooding and close interaction between human, animal, food production and environmental systems.

"These factors underscore the importance of adopting a comprehensive One Health approach, recognising that AMR is influenced by interconnected drivers across multiple sectors rather than healthcare alone," she said.

Dr Tengku Zetty said the findings are significant because antimicrobial-resistant and multidrug-resistant salmonella strains have been detected in Malaysia across human, food, poultry and environmental sources.



Studies have identified resistance to commonly used antibiotics including ampicillin, tetracyclines, sulphonamides and quinolones, while genomic analyses have shown resistance genes circulating across the human-animal-food interface.

Dr Tengku Zetty said the Lancet study does not necessarily require a new policy direction, but reinforces existing efforts under the WHO Global Action Plan and Malaysia's Action Plan on Antimicrobial Resistance (MyAP-AMR) 2022-2026.

"As climate-related pressures become more pronounced, continued investment in surveillance, environmental monitoring, resilient sanitation systems, antimicrobial stewardship and cross-sectoral collaboration will be important to ensure Malaysia's AMR response remains adaptive and evidence-based," she said.

Consultant infectious disease physician Prof Dr Sasheela Sri La Sri Ponnampalavanar of UM Specialist Centre said salmonella is among the most common causes of food poisoning worldwide and can be transmitted through undercooked poultry, contaminated eggs, unpasteurised milk and contaminated meat.

"Critically, it infects not just humans but also poultry, cattle, pigs, reptiles, wild birds and pets.

"It is found in farm animals, wildlife, soil and water, travelling through the food chain from farm to fork.

"Because it lives across so many species and environments, it is much harder to control and much more exposed to the effects of climate change."

Prof Sasheela said warmer temperatures accelerate the rate at which bacteria shared resistance genes, while floods and droughts can spread resistant bacteria into water supplies and food chains.

"Climate disruption acts as an invisible amplifier of a problem we are already struggling to control," she said.

Universiti Malaya senior lecturer Dr Muhamad Afiq Aziz said climate disruption and extreme weather allowed resistant bacteria to spread rapidly.

"Warmer temperatures accelerate bacterial growth and the transfer of resistance genes between microorganisms."

He said storms and floods contaminate water sources and disrupt sanitation, while droughts favour the survival of tougher, resistant strains.

These environmental shifts, he said, turn rivers, soil and wildlife into pathways for resistance to move between nature, animals and humans.

El Nino can cause rise in disease outbreaks

PETALING JAYA: Beyond triggering dry spells, El Nino can also influence the spread and activity of viruses.

Emeritus Prof Datuk Dr Lam Sai Kit, who led the team that discovered the Nipah virus in the late 1990s, said there was strong evidence of the virus outbreak in [illegible] being influenced by El [illegible].

"A strong El Nino contributed to drought and widespread forest fires that disrupted bat habitats and food sources.

"Fruit bats, the natural reservoir of Nipah virus, were more likely to forage near agricultural areas, increasing opportunities for virus transmission to pigs and subsequently to humans.

"El Nino was not the main or sole cause, but it likely played a contributing role," said the medical virology and public health expert from Universiti Malaya and senior fellow at the Academy of Sciences Malaysia.

He said temperature changes can affect viruses indirectly by altering the ecology of their hosts and vectors.

"Warmer temperatures, droughts, floods and other climate-related changes can influence the distribution, behaviour and abundance of animals, mosquitoes and other organisms that carry viruses.

> **"These environmental shifts can increase opportunities for viruses to spill over into human populations."**
>
> Datuk Dr Lam Sai Kit

"These environmental shifts can increase opportunities for viruses to spill over into human populations or change patterns of disease transmission," he said.

Prof Lam said while a super El Nino can increase the risk of certain infectious disease outbreaks, the effects vary by region and type of disease.

"Potential concerns include mosquito-borne diseases such as dengue and malaria, waterborne diseases following floods, and zoonotic diseases if wildlife habitats are disrupted.

"El Nino does not automatically cause outbreaks, but it can create environmental conditions that make outbreaks more likely, highlighting the importance of enhanced disease surveillance and public health preparedness."

Sustainability and climate change specialist Dr Renard Siew said El Nino conditions, which bring shifts in rainfall and temperature across regions, have long been associated with changes in infectious disease risk.

While not a direct cause of outbreaks, such climate anomalies can influence ecosystems in ways that increase human exposure to disease, he said.

"Extreme climate events such as El Nino can act as risk multipliers. They can disrupt ecosystems, alter wildlife behaviour, affect migration patterns and increase human-wildlife interactions."

Siew added that droughts and heat stress may push animals closer to human settlements, while flooding can contaminate water supplies and create breeding grounds for disease vectors.

Looking ahead, he noted that health systems should integrate climate forecasting into disease surveillance, particularly as stronger El Nino conditions are anticipated.

"Climate resilience needs to become a core component of public health planning.

"Preparedness should go beyond responding to outbreaks and focus on anticipating risks," he said.

According to a MetMalaysia forecast, El Nino is expected to develop in June or July with a peak expected at the end of the year.

Temperatures during El Nino are expected to reach 37°C to 40°C in some areas.

The World Meteorological Organisation has also predicted of an 80% probability of the El Nino occurring in June to August.

Healthcare services can only be provided at registered premises

PUTRAJAYA: Healthcare services must only be provided at premises registered or licensed under the Private Healthcare Facilities and Services Act, according to the Health Ministry.

It said that providing healthcare services at unregistered or unlicensed premises constitutes an offence under the Act and may result in a fine of up to RM500,000, imprisonment of up to six years, or both.

"There has been an increase in complaints and enquiries regarding alleged treatment activities or healthcare services being carried out at unregistered or unlicensed premises, including those related to aesthetic medical services," the ministry said in a statement yesterday.

It said enforcement of the Act will be strengthened through monitoring and investigations, including intelligence-based operations, as well as targeted enforcement actions in coordination with state health departments and relevant agencies.

Based on the ministry's data from 2021 to date, over 1,020 complaints have been received on healthcare services conducted at unregistered or unlicensed premises, with the number increasing each year, Bernama reported.

The increase in complaints also reflects growing public concern over the issue, particularly on the qualifications of individuals providing such services.

The public and healthcare professionals are encouraged to channel information or complaints through official channels (ckaps@moh.gov.my) to enable appropriate, evidence-based follow-up action.

It also hopes that the public will remain attentive to advisories and statements previously issued by the ministry on the provision of healthcare services at unregistered or unlicensed premises.

320 RAIDS SINCE 2021

UNLICENSED MEDICAL FACILITIES FACE ACTION

Ministry to step up operations as complaints continue to rise

KUALA LUMPUR

THE Health Ministry will step up enforcement against unlicensed healthcare premises, including those offering aesthetic medical services, after receiving a growing number of complaints.

The ministry said it had received more than 1,020 complaints about unlicensed medical facilities since 2021, with the number increasing yearly.

It said 320 premises were raided during the period.

"From the total, 126 investigation papers were opened while 194 cases were issued warnings and reprimands.

"Seventy cases are being or have been prosecuted," the ministry said in a statement.

It said enforcement under the Private Healthcare Facilities and Services Act would be strengthened through enhanced monitoring, investigations and targeted operations.

The ministry added that efforts would include complaint-based surveillance and closer coordination with state Health Departments and enforcement agencies.

Healthcare providers are reminded that they must be licensed to offer services. Failure to do so will result in a fine of up to RM500,000, imprisonment of up to six years, or both.

The ministry urged the public and healthcare professionals to channel information or complaints through its official channel at ckaps@moh.gov.my.

Endoscopic ultrasound, from diagnosis to treatment

EARLY assessment and detection of medical conditions can make a significant difference in outcomes.

It is better to be checked early rather than late, especially since many health conditions progress silently and complications will set in as the disease progresses, often leaving patients with limited treatment options.

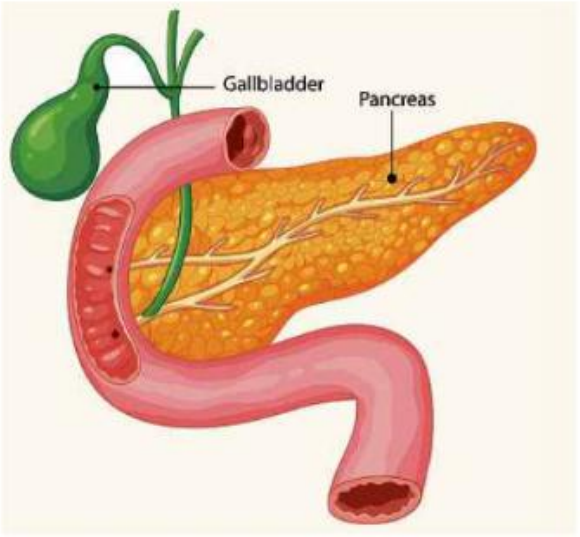
Endoscopic ultrasound(EUS) is a minimally invasive procedure that combines endoscopy and ultrasound to look at organs inside and around the digestive tract.

During this procedure, a thin, flexible tube with an ultrasound probe at its tip is passed through the mouth into the stomach and small intestine while the patient is sedated.

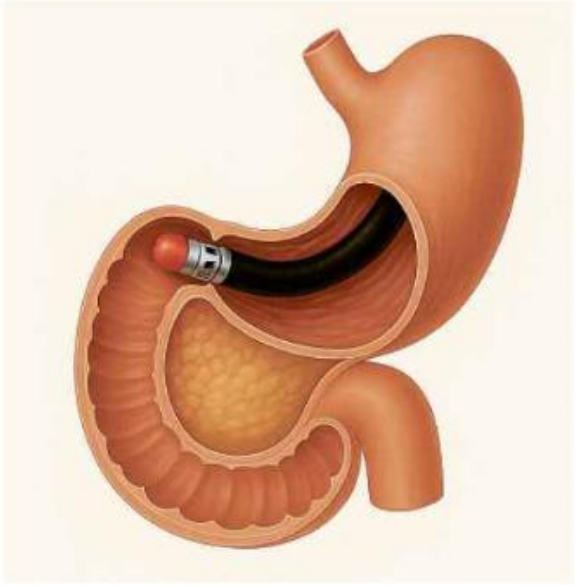
Because the ultrasound probe sits very close to organs such as the pancreas, bile ducts, liver and gall bladder, EUS is able to provide very detailed images and can even detect small or early abnormalities.

EUS is typically recommended when there is a suspicion of conditions such as tumours, cancers or blockages that need further evaluation. It is also particularly useful when other imaging tests are inconclusive, says Sri Kota Specialist Medical Centre gastroenterology and hepatology specialist Dr James Emmanuel Gilbert Fernandez.

"In addition to being very precise, it also allows doctors to obtain tissue samples, making it an important tool for both diagnosis and guiding treatment decisions."



Pancreas adjacent to the stomach and the gallbladder, highlighting the pancreatic duct and surrounding billary structures. PICTURE CREDIT: BRGFX — FREEPIK



Endoscopic ultrasound (EUS) procedure. PICTURE CREDIT: AI-GENERATED IMAGE

PRECISE AND COMPREHENSIVE

EUS is used to assess a wide range of conditions, particularly those involving the pancreas, bile ducts and surrounding structures, adds Dr James.

One common use is detecting small bile duct stones, which can sometimes be missed on standard scans like ultrasound or CT.

"It is also very valuable in evaluating cancers, especially cancers of the digestive organs where early and accurate diagnosis is crucial," he says.

A key advantage of EUS is that it allows doctors to take tissue samples using a fine needle during the same procedure. This helps confirm a diagnosis without the need for more invasive surgery, which can come as a huge relief for many patients.

Beyond the abdomen, EUS can also assess structures in the chest, such as the mediastinum, and evaluate subepithelial lesions, which may be seen during routine endoscopy but require EUS for better assessment of their layer of origin, size and internal characteristics.

EUS has been available in Malaysia for more than 15 years and is becoming increasingly relevant because it allows doctors to detect diseases at an earlier stage, particularly in deep abdominal structures, where traditional screening tools are limited.

One of its key strengths is its ability to identify very small or subtle abnormalities that may not be visible on standard imaging such as CT or MRI, says Dr James.

In addition, advanced imaging applications in EUS, such as elastography and contrast-enhanced imaging, have further improved the ability to differentiate between benign and potentially cancerous lesions.

"Given these benefits, EUS is an increasingly important tool in modern digestive healthcare."

MORE THAN A DIAGNOSTIC TOOL

Dr James says a crucial point to keep in mind is that EUS is not just an important tool for diagnosis, it also helps guide treatment decisions.

By providing high-resolution imaging and detailed assessment of surrounding structures, EUS helps determine the stage and extent of disease, which is critical in deciding the next step in management.

For example, in suspected cancers, EUS can assess whether a tumour has spread to nearby structures or lymph nodes. This information helps doctors decide whether a patient should proceed directly to surgery or benefit from preoperative treatments such as chemotherapy to improve outcomes.

In addition, EUS has evolved into a platform for minimally invasive interventions, he says.

Procedures such as EUS-guided biliary drainage can relieve obstruction when conventional methods are not feasible and newer therapies like radiofrequency ablation are being explored in selected patients.

"It helps ensure that patients receive appropriate and personalised treatment, while in some cases offering less invasive alternatives to surgery," says Dr James.

EUS is currently available in both government and private hospitals in Malaysia, although the range of services varies between centres, particularly when it comes to more advanced therapeutic procedures.

Dr James says one of the main challenges is the need for specialised training and expertise.

EUS is a technically demanding procedure and developing skilled endoscopists requires dedicated training and mentorship.

However, many Malaysian doctors have pursued advanced endoscopy fellowships overseas and are now contributing to the growth of EUS services locally, he adds.

While there is still room for expansion, especially as the field continues to evolve rapidly, increasing access to training, equipment and multidisciplinary support will be key to making EUS more widely available across the country.

meera@nst.com.my

Endoscopic ultrasound is an important tool for both diagnosis and guiding treatment decisions.

Dr James Emmanuel Gilbert Fernandez

Heal

By Meera Murugesan

The Borneo Post M/S 1

Sarawak seeks collaboration with China in medical education to tackle shortage of 2,000 doctors

Michael Ubam

SIBU: Sarawak is looking to strengthen collaboration with China in healthcare, medical education and talent development as it seeks to address a shortage of about 2,000 doctors and build a highly skilled workforce for the future.

Speaking at a dinner hosted by the United Chinese Association (UCA) Sibu Division on Tuesday in honour of China's Ambassador to Malaysia Ouyang Yujing, Deputy Premier Datuk Amar Dr Sim Kui Hian said Sarawak's future prosperity would depend not only on economic growth, but also on its ability to develop talents, uphold strong values and secure greater autonomy in key sectors such as healthcare and education.

According to him, the state government is working closely with Chinese authorities and institutions in several strategic initiatives, including plans to establish a medical school linked to Shanghai's prestigious Fudan University.

"Next week I will be in Beijing to pursue the final approval needed for the project.

"The Shanghai government and the Malaysian government have already agreed. What remains is approval from the Chinese government," he told reporters when met after the dinner.

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Dr Sim also said he had sought the assistance from Ouyang in facilitating discussions with the relevant authorities in China.

The proposed medical school would form part of Sarawak's broader strategy to overcome its shortage of medical professionals and strengthen the state's healthcare system, added the deputy premier.

"We need more medical schools and stronger international partnerships to produce the healthcare workforce that Sarawak requires."

He also highlighted Sarawak's growing reputation in clinical research, noting that Sarawak General Hospital (SGH) had emerged as one of Malaysia's leading centres for clinical research.

In this regard, he said the state was keen on exploring collaboration with China's rapidly advancing pharmaceutical and biotechnology sectors, particularly in cancer research and drug development.

Dr Sim later credited Chinese community organisations in Sarawak, particularly those in Sibu, for their longstanding efforts in advocating recognition of medical degrees from Chinese universities.

Their efforts eventually contributed to Malaysia recognising medical qualifications from Shanghai Jiao Tong University and Fudan University, enabling graduates to return and serve in Sarawak, he added.

To date, around 70 doctors trained at the two universities are serving throughout Sarawak.

Beyond healthcare, Dr Sim stressed that talent development remained central to Sarawak's long-term development agenda.

Drawing lessons from China's transformation, he said the state's success would depend on investing in human capital and nurturing future leaders.

"China's success is not only because of its economy.

"It is because of its talent and the values instilled in its people.

"Sarawak must continue to develop talent, while strengthening the values that unite our society."

Sinar Harian M/S 12, 28

Rawatan kesihatan kerajaan tiada tandingan

KADANG-KADANG Merak Jalanan rasa rakyat Malaysia sendiri tidak sedar betapa bertuahnya kita memiliki sistem kesihatan awam yang antara terbaik di rantau ini.

Mana tidaknya, dengan bayaran yang cukup rendah, rakyat masih boleh mendapatkan rawatan daripada doktor, pakar, jururawat dan petugas kesihatan yang terlatih. Malah, ada rawatan yang jika dibuat di sektor swasta boleh mencecah ratusan atau ribuan ringgit, tetapi di hospital atau klinik kerajaan kosnya jauh lebih rendah.

Ambil contoh rawatan pergigian. Ramai yang pernah merasai sendiri bagaimana tampalan gigi, cabutan gigi atau pemeriksaan berkala di klinik kerajaan hanya dikenakan bayaran yang tak masuk akal. Namun peralatan digunakan, prosedur rawatan dan kepakaran pegawai pergigian tetap mengikut standard profesional yang tinggi.

Sudah tentu adakalanya pesakit perlu menunggu lebih lama berbanding di klinik swasta. Namun apabila memikirkan jumlah pesakit yang perlu dirawat setiap hari, Merak Jalanan kagum melihat kesabaran dan komitmen petugas kesihatan yang terus menjalankan tugas tanpa banyak kerenah.

Malah, ramai yang pernah dimasukkan ke wad hospital kerajaan mengakui layanan yang diterima tidaklah seteruk seperti yang sering digambarkan.

Sebab itu Merak Jalanan berpendapat, sesekali kita perlu memberi penghargaan kepada petugas kesihatan yang menjadi tulang belakang sistem ini. Ketika ramai hanya melihat kelemahan, jangan pula kita lupa melihat jasa dan pengorbanan mereka.

Hakikatnya, kita membayar pada kadar yang rendah, tetapi menerima perkhidmatan yang nilainya jauh lebih tinggi. Bukan semua negara mempunyai kelebihan seperti ini. Jadi, selagi nikmat itu masih ada, hargailah sebaiknya.

Silver Economy. peluang baharu dalam era negara menua

Oleh LIZA MOKHTAR

MENURUT Pertubuhan Kesihatan Sedunia (WHO), lebih daripada 16 peratus penduduk dunia dijangka berusia 60 tahun ke atas menjelang tahun 2030 dan di beberapa rantau di Asia, peratusan itu telah pun melepasi tahap dinyatakan.

Statistik ini mencerminkan perubahan besar dalam struktur demografi global apabila kumpulan pengguna di seluruh dunia semakin didominasi golongan yang lebih berusia.

Dari sudut ekonomi, peningkatan populasi warga emas tidak semestinya perlu dilihat sebagai beban. Sebaliknya, ia berpotensi menjadi pemangkin kepada perkembangan *silver economy*.

Silver economy merujuk kepada keseluruhan aktiviti ekonomi yang terhasil daripada permintaan pasaran, perbelanjaan penggunaan dan kuasa beli golongan warga emas.

Aktiviti ini mendorong pengeluaran serta penyediaan pelbagai produk dan perkhidmatan yang menyokong kesejahteraan, kesihatan dan kehidupan mereka dalam konteks penuaan penduduk.


DR NUR ZAHIDAH

Pensyarah Kanan Jabatan Ekonomi dan Pengajian Kewangan Universiti Teknologi MARA (UiTM) Puncak Alam, Dr Nur Zahidah Bahrudin berkata, konsep *silver economy* amat penting bagi negara yang sedang mengalami penuaan penduduk seperti Malaysia.

"Peningkatan kelompok ini boleh menggalakkan peningkatan kuasa beli dalam kalangan warga emas serta berpotensi menyumbang kepada ekonomi sebagai pekerja, pengguna dan pelabur dalam jangka masa panjang.

"*Silver ekonomy* juga merupakan segmen pasaran yang merentasi pelbagai sektor ekonomi," katanya.

Tambah Nur Zahidah, daripada perspektif pasaran buruh, golongan warga emas tidak semestinya dianggap tidak produktif.

"Dengan dasar yang menyokong '*active ageing*' seperti pekerjaan fleksibel, latihan semula dan penyesuaian tempat kerja, mereka boleh terus menyumbang kepada ekonomi," katanya.

Sehubungan itu, beberapa sektor dijangka mendapat manfaat daripada peningkatan populasi warga emas, terutama yang menawarkan produk dan perkhidmatan mengikut keperluan golongan tersebut.

Tinjauan Kebangsaan Kesihatan dan Morbiditi (NHMS) yang dikeluarkan pada 26 April 2026 menunjukkan prevalens penyakit kronik yang tinggi dalam kalangan warga emas, sekali gus meningkatkan permintaan terhadap perkhidmatan penjagaan kesihatan dan penjagaan jangka panjang seperti hospital, klinik geriatrik, pusat rehabilitasi, penjagaan di rumah, penghantaran makanan sihat, pengangkutan khas serta aktiviti kesejahteraan.

"Industri farmaseutikal dan peralatan perubatan juga akan mendapat manfaat," katanya.

Selain sektor kesihatan, teknologi kesihatan dan digital turut mempunyai prospek cerah. Penuaan penduduk mendorong inovasi dalam teknologi seperti pemantauan kesihatan jarak jauh, aplikasi pengurusan penyakit kronik, *wearable devices* serta penggunaan kecerdasan buatan (AI) dalam diagnosis.

Perkembangan ini membuka ruang kepada syarikat pemula niaga dan syarikat teknologi tempatan untuk membangunkan penyelesaian khusus bagi keperluan warga emas.

Sektor kewangan, takaful dan insurans juga dijangka berkembang susulan peningkatan permintaan terhadap produk persaraan, perlindungan kesihatan dan pengurusan kewangan, dengan takaful dilihat berpotensi kerana produk patuh Syariah yang sesuai, selain khidmat nasihat kewangan selepas persaraan yang semakin penting bagi mengelakkan penipuan.

Dalam masa sama, warga emas yang masih sihat boleh dikategorikan sebagai *necessity-driven entrepreneurs* dan *experience-based entrepreneurs* iaitu mereka yang masih bekerja atau berniaga bagi menampung keperluan hidup jika pendapatan selepas persaraan tidak mencukupi.

Golongan aktif

Perkara ini dapat dilihat melalui penyertaan warga emas dalam sektor tidak formal dan keusahawanan kecil.

Malah, ramai yang masih aktif dalam sektor pertanian. Menurut laporan Jabatan Perangkaan Malaysia, lebih 50 peratus petani di negara ini terdiri daripada warga emas berusia 60 tahun ke atas berikutan kurangnya minat generasi muda terhadap sektor tersebut.

Di peringkat antarabangsa, Jepun sering dianggap sebagai peneraju global dalam pembangunan *silver economy* kerana merupakan antara negara terawal berdepan cabaran penuaan penduduk.

Laporan Organisation for Economic Co-operation and Development (OECD) menyatakan Jepun telah melaksanakan pelbagai dasar bagi meningkatkan penyertaan tenaga kerja warga emas, memanfaatkan teknologi dan inovasi serta membangunkan industri penjagaan jangka panjang bagi menyokong masyarakat yang semakin menua.

Kejayaan negara tersebut dapat dilihat melalui kadar penyertaan tinggi tenaga kerja warga emas, penggunaan robotik dalam penjagaan serta pembangunan industri penjagaan kesihatan dan penjagaan jangka panjang bernilai berbilion dolar.

Singapura pula menjadi contoh di ASEAN dengan pelbagai inisiatif seperti pembelajaran sepanjang hayat, peningkatan umur persaraan, pusat penuaan aktif dan insentif pekerjaan untuk warga emas, selain pembangunan komuniti serta infrastruktur mesra warga emas bagi mengurangkan pengasingan sosial.

Sementara itu, China melancarkan pelan pembangunan *silver economy* pada 2024 bagi memenuhi keperluan populasi yang semakin menua.

Nilai *silver economy* negara itu dianggarkan sekitar tujuh trilion yuan dan berpotensi berkembang kepada 30 trilion yuan menjelang 2035.

Fokus utama pembangunan tersebut merangkumi penjagaan kesihatan pintar, perkhidmatan penjagaan warga emas, pelancongan warga emas serta pembangunan produk dan teknologi khusus untuk golongan senior.

Walaupun *silver economy* membuka peluang besar, beberapa cabaran perlu ditangani bagi memaksimumkan potensinya.

Antaranya isu kesihatan dan produktiviti akibat penyakit tidak berjangkit seperti diabetes dan hipertensi yang boleh menghadkan daya saing warga emas.

Cabaran lain ialah jurang digital, termasuk literasi teknologi rendah, akses terhad dan kebimbangan terhadap penggunaan teknologi yang menghalang penglibatan dalam ekonomi digital.

Selain itu, ketidaksamaan sosioekonomi turut menjadi isu, dipengaruhi perbezaan lokasi, pendapatan, simpanan serta akses kepada perkhidmatan kesihatan.

Menurut Nur Zahidah, usaha menggalakkan pelaburan dan inovasi dalam *silver economy* memerlukan pendekatan dasar yang menyeluruh, berasaskan insentif dan berpaksikan bukti.

Antara langkah yang boleh dipertimbangkan adalah pemberian insentif fiskal dan galakan pelaburan kepada syarikat yang melabur dalam penjagaan kesihatan warga emas, perumahan, kebajikan serta teknologi kesihatan.

"Boleh juga diberikan galakan pelaburan melalui dana pelaburan khusus (*Silver Economy Fund*) yang menyokong usaha niaga modal dalam AgeTech, fintech persaraan dan perkhidmatan penjagaan.

"Geran padanan juga boleh diberikan kepada startup dan Perusahaan Kecil dan Sederhana (PKS) dalam *silver economy* melalui agensi berkaitan," katanya.

Selain itu, insentif keusahawanan warga emas seperti pembiayaan mikro fleksibel, program inkubator khas serta latihan digital dan e-dagang boleh diperluaskan.

Malaysia yang sedang menuju negara menua perlu bersedia, namun jika dirancang baik, peningkatan warga emas mampu membuka peluang ekonomi baharu serta merangsang inovasi, pelaburan dan pertumbuhan sektor strategik.

Berita Harian M/S 13

Silibus PharmD ditawar Universiti Alexandria setara kursus terdahulu

MQA cadang KKM beri pengecualian khas kepada 4 pelajar daftar dengan badan farmasi Malaysia

Oleh Ercy Gracella Ajos
ercy.gracella@bh.com.my

Kuala Lumpur: Semakan oleh Agensi Kelayakan Malaysia (MQA) mendapati, program Doktor Farmasi (PharmD) yang ditawarkan Universiti Alexandria, Mesir, mempunyai kandungan akademik yang setara dengan program terdahulu iaitu Bachelor of Pharmaceutical Science dan Bachelor of Pharmacy (Farmasi Klinikal) yang sebelum ini telah mendapat pengiktirafan Malaysia.

Ketua Pegawai Eksekutif MQA, Prof Datuk Dr Mohammad Shatar Sabran, berkata penilaian pihaknya mendapati silibus, kandungan pengajian serta *body of knowledge* program PharmD yang menjadi pertikaian itu adalah tidak berubah berbanding program farmasi klinikal terdahulu, sebaliknya hanya melalui proses penjenamaan semula kepada PharmD pada 2019.

Beliau berkata, berdasarkan penemuan itu, MQA bercadang mengadakan perbincangan dengan Kementerian Kesihatan (KKM) bagi membolehkan pengecualian khas diberikan kepada empat graduan terbabit supaya mereka dapat berdaftar dengan badan farmasi Malaysia dan seterusnya menjalankan amalan profesion itu di negara ini.

"Berdasarkan kapasiti, saya melihat konten, kandungan dan *body of knowledge* dalam PharmD ini, tidak berbeza dengan apa yang dikeluarkan program farmasi klinikal yang dahulu, cuma ditambah PharmD. Kami harap KKM dapat bersetuju penjelasan yang diberikan pihak kami.

"Jadi, kita bercadang untuk berbincang dengan KKM supaya dapat memberikan pengecualian khas kepada empat graduan ini supaya mereka boleh mendaftar dengan badan farmasi Malaysia untuk mereka beramal sebagai ahli farmasi," katanya kepada *BH* semalam.

Adakan pertemuan khas

Mohammad Shatar berkata, bagi merealisasikan perkara itu, satu pertemuan segera antara Ketua Pengarah Kementerian Pendidikan Tinggi (KPT) dan Ketua Pengarah KKM akan diadakan dalam masa terdekat bagi mencari penyelesaian terhadap isu yang sedang dihadapi empat pelajar Malaysia dalam bidang farmasi di Universiti Alexandria.

Beliau berkata, pihaknya sedang mengatur pertemuan berkenaan yang turut akan disertainya bagi membincangkan jalan penyelesaian terbaik untuk pelajar terbabit.


MQA kaji penyelesaian graduan farmasi Universiti Alexandria

Keratan akhbar BH 30 Mei lalu.

Katanya, ijazah daripada program PharmD yang sebelum ini dikenali sebagai Ijazah Sarjana Muda Farmasi (Farmasi Klinikal) diiktiraf oleh MQA, namun masih memerlukan pengesahan Lembaga Farmasi Malaysia (LFM) sebelum graduan dibenarkan berkhidmat dalam bidang farmasi di Malaysia.

Mengulas lanjut, Mohammad Shatar berkata, isu berkenaan timbul susulan perubahan nama program oleh Universiti Alexandria daripada Ijazah Sarjana Muda Farmasi (Farmasi Klinikal) kepada nama baharu yang memasukkan istilah 'D' yang merujuk kepada istilah 'Doktor Farmasi', namun jelasnya, perkara itu tidak diamalkan di Malaysia.

Beliau berkata, keadaan itu sekali gus menimbulkan kekangan dalam proses penerimaan oleh pihak berkaitan.

Sebelum ini, *BH* melaporkan pelajar bidang farmasi dari Malaysia di Universiti Alexandria bingung apabila program PharmD yang sedang diikuti tidak diiktiraf Lembaga Farmasi Malaysia untuk membolehkan mereka menduduki peperiksaan 'Poison Law' yang menjadi syarat untuk berkhidmat sebagai ahli farmasi di Malaysia.

Jurusan pengajian itu ditawarkan kepada mereka melalui surat rasmi KPT adalah Farmasi, bagaimanapun silibus pembelajaran dinaik taraf pada 2019 dengan program diikuti PharmD.

> "Berdasarkan kapasiti, saya melihat konten, kandungan dan *body of knowledge* dalam PharmD ini, tidak berbeza dengan apa yang dikeluarkan oleh program farmasi klinikal yang dahulu, cuma ditambah PharmD"
>
> ***Mohammad Shatar Sabran,*** *Ketua Pegawai Eksekutif MQA*

Pelajar yang terjejas memberitahu *BH*, mereka melanjutkan pengajian selepas mendapat tawaran daripada JPT, selain tersenarai dalam laman rasmi KPT.

Gesa selesai isu segera

Sementara itu, ibu kepada seorang penuntut Universiti Alexandria, Mesir, Noor Haslina Abdullah, menggesa pihak berkuasa menyegerakan penyelesaian terhadap isu pengiktirafan program pengajian yang menjejaskan empat pelajar farmasi universiti berkenaan bagi memastikan masa depan mereka tidak terus terkesan.

Katanya, pihak berkaitan difahamkan sedang meneliti kemungkinan menggunakan peruntukan di bawah Seksyen 6(1) Akta Pendaftaran Ahli Farmasi 1951 bagi membolehkan satu bentuk kelonggaran atau penyelesaian bersyarat diberikan kepada pelajar terbabit.

Katanya, langkah itu penting memandangkan kesemua pelajar berkenaan sudah berada di penghujung pengajian dan bakal menamatkan peperiksaan akhir mereka pada 20 Jun ini.

"Mereka kini sedang menghadapi peperiksaan akhir dan berada dalam keadaan tertekan kerana masa depan mereka masih belum jelas.

"Kami sebagai ibu bapa amat berharap ada campur tangan segera daripada pihak kementerian supaya pelajar ini tidak terus menjadi mangsa keadaan," katanya.