

Aid mechanism proposed for media veterans

IPOH: The government is urged to consider introducing a dedicated aid mechanism for veteran or former media practitioners in recognition of their contributions to the nation's journalism industry, while also helping to ease their post-retirement financial burdens.

Perak *Sinar Harian* bureau chief Saifullah Ahmad said among the assistance that should be considered is providing access to free treatment at government healthcare facilities, similar to the benefits enjoyed by civil servants.

He said the move would not only help reduce medical costs but also serve as a gesture of appreciation for media practitioners who have contributed to information dissemination and national development.

"Some retired media practitioners face various health issues due to age and work-related stress throughout their careers. Free medical treatment would provide relief."

Echoing the same view, *The Star* photographer Ronnie Chin Foon Kheng, 53, said some former media practitioners face life challenges as they age, particularly health issues and increasingly limited income.

"The government could consider allocating healthcare provisions for this group, including treatment aid, regular health screenings and medical support to ease their burden."

He added that subsistence assistance or special allowances should also be considered for former media practitioners who are no longer working and do not have a fixed income, to help them lead more comfortable lives and cope with the rising cost of living.

Meanwhile, Stesen Televisyen Malaysia Berhad (TV3) journalist Shaharil Kadir, 48, suggested introducing a special card for veteran media practitioners to facilitate more systematic delivery of aid and benefits.

He said the card could serve as an official medium enabling holders to enjoy various privileges and facilities, particularly at public institutions and government agencies.

"The special card initiative could also be expanded to include various incentives such as discounted airfares and public transport fares to help reduce the cost of living for this group," he said while sharing suggestions on efforts to safeguard the welfare of veteran media practitioners.

Previously, Communications Minister Datuk Fahmi Fadzil said state media clubs under Gabungan Kelab Media Malaysia had been asked to submit proposals to strengthen the welfare of former media practitioners, including establishing a more structured mechanism to assist industry veterans.

Fahmi said the proposals could be considered ahead of National Journalists' Day celebrations to enable a more systematic framework to be developed for the welfare of former media workers.

He also said certain former media practitioners feel marginalised after retirement, while others prefer a more private life, adding that a more structured approach could help those in need of support.

The National Journalists' Day 2026 celebration, scheduled to take place in Penang on June 20, is expected to gather about 1,000 local and foreign media practitioners, with the main event to be officiated by Prime Minister Datuk Seri Anwar Ibrahim.

It is celebrated annually on May 29 in conjunction with the publication of the first edition of *Utusan Melayu* on May 29, 1939, as a tribute to the contributions and services of media practitioners to national development.

— Bernama

Elderly encouraged to discard walking stick stigma

► Falls among main cause of injury and death among senior citizens, say experts

KUALA LUMPUR: Elderly Malaysians should not feel embarrassed about using walking sticks or other mobility aids as a preventive measure against falls, which remain a significant but often overlooked cause of injury, disability and death among senior citizens.

With over 11% of the population now aged 60 and above, falls have emerged as a significant cause of death and disability in the country, Bernama reported.

In a joint statement, consultant community paediatrician Datuk Dr Amar-Singh H.S.S. and Datin Dr Lim Swee Im said globally, the World Health Organisation and other medical organisations recognise that falls were an important cause of injury and death among adults aged above 60.

The statement also said the "Statistics On Causes Of Death, Malaysia 2025" by the Statistics Department revealed that the top four causes of medically certified death in senior citizens were pneumonia, heart disease, diabetes mellitus and stroke.

"But this does not paint the full picture. Our cause of death mechanism in Malaysia records the final cause of death and not the underlying causes of death.

"For example, if an old person has a fall, with a significant injury or hip fracture, and is then bed-bound and develops pneumonia as a result of the immobility, the cause of death will be recorded as pneumonia, not the fall," the statement said.

They cited data from the National Health and Morbidity Survey (NHMS), which showed that one in seven Malaysians aged 60 and above experienced at least one fall within the previous 12 months in both the 2018 and 2025 surveys.

The commentary highlighted several factors that increased fall risks among aged adults, including age-related muscle loss, cognitive impairments that severely affected balance, chronic illnesses and medication side effects.

"NHMS 2025 data indicated that 45% of Malaysians aged 60 and above have sarcopenia, 10% have dementia, 39% have diabetes and 73% have hypertension."

The statement also pointed to declining physical capability among the elderly, saying 10% experienced limitations in daily living activities, 4% had vision impairments and 30% were physically inactive.

Sharing his own experience, Amar said

once he reached 60 years of age, he started routinely using lightweight, height-adjustable hiking sticks, although he remained fit.

"A simple walking stick makes us much more stable and steadier on our feet, less wobbling around. Navigating uneven surfaces, building steps and roads could be quite hazardous, not to mention potholes and unexpected gaps.

"Having used them now for several years, I have come to enjoy the extra support that a walking stick gives. It is now second nature for me not to leave my home without a walking stick."

Lim expressed sadness that many senior persons, feeling embarrassed to use a walking stick for fear of looking "old", instead resort to using inadequate umbrellas or holding onto relatives for support.

She also called for greater attention to house safety and public infrastructure, adding that falls frequently occur in and around the house, and recommended practical modifications such as installing non-slip flooring, covering drains, lowering storage spaces and adding grab bars in bathrooms.

She urged organisations and public facilities to reconsider the widespread use of polished marble flooring, which they described as a major slip hazard, particularly for the elderly, individuals with disabilities and children.

Nearly 1.9 million benefit from mySalam health safety scheme

KUALA LUMPUR: The mySalam social health protection scheme, administered by the Finance Ministry, has benefited 1.88 million Malaysians, with total claims paid amounting to RM1.423bil as of Dec 31 last year, says Datuk Fahmi Fadzil (*pic*).

The Communications Minister said the programme, which was launched in 2019 with an allocation of RM2.37bil, currently provides coverage to eligible Sumbangan Tunai Rahmah recipients and their spouses up to the age of 65.

Fahmi, who is also the Madani government spokesperson, said eligible recipients are entitled to three key benefits: a hospitalisation allowance of RM50 per day for up to 14 days, or RM700 annually; a one-off payment of up to RM8,000 for 50 critical illnesses; and claims of up to RM30,000 for medical devices.



“For the hospitalisation benefit, 1.294 million recipients have received assistance amounting to RM394.87mil,” he told a weekly press conference yesterday, Bernama reported.

He said 89,085 recipients had benefited from the critical illness assistance, with total payouts reaching RM712.68mil, while RM65.257mil had been disbursed to 13,128 recipients under the medical device benefit.

The scheme’s performance was presented at yesterday’s Cabinet meeting.

Meanwhile, Fahmi also said the Prime Minister wants ties between Malaysian public higher education institutions and Japanese universities to be strengthened, particularly in exploring advanced research fields such as quantum technology.

“He raised the matter during the Cabinet meeting following his official visit to Japan, which concluded on Wednesday.

“This (quantum technology) is a very important field, including efforts to adopt quantum cryptography and quantum encryption,” he said, adding that such academic collaboration is crucial to driving the nation’s broader digitalisation agenda.

In this regard, Fahmi said the Prime Minister wants to elevate existing partnerships, such as the current collaboration between Keio University and Universiti Malaya.

AS Malaysian youths, we share a deep aspiration for our nation to be a regional leader in safeguarding public health and ending nicotine addiction.

There was a time when Malaysia stood at the forefront of bold tobacco control with the introduction of the Generational Endgame (GEG) policy, which aimed to prevent Malaysians born after Jan 1, 2007 from ever becoming addicted to nicotine.

However, we were left disappointed when the GEG provisions were excluded from the revised Control of Smoking Products for Public Health Act 2024 (Act 852).

As young people who viewed the policy as a historic step forward, we continue to seek a clearer explanation as to why it was dropped.

Now, we are confronted with the consequences of this decision as we see the normalisation of vape culture among our peers and the continued targeting of youths through fruity flavours, colourful packaging and digital advertising.

Eight of the 11 Asean member countries have banned electronic smoking devices (ESDs) and nicotine products, but Malaysia's Federal Government has yet to set a definite date on implementing a nationwide ban even though it is scheduled for this

Prioritise youth health over profits

year.

Many youths and public health advocates were alarmed by the removal of liquid nicotine from the Poisons List in 2023 before comprehensive legislation was fully enforced. This created a regulatory gap where vape products became far more accessible and were widely sold until Act 852 was eventually gazetted.

Recent court findings have further strengthened public concern over the long-term impact this period has had on young people. There are increasing reports of vape-related harm among teenagers, alongside cases involving the misuse of vape devices for dangerous substances such as synthetic drugs and, more recently, fentanyl-laced liquids.

These developments are deeply alarming to youths who feel that stronger preventive action could have reduced the scale of exposure we are now seeing.

We acknowledge the ongoing efforts by the Health Ministry and policymakers through the enforcement of Act 852 and other tobacco control measures.

However, while Act 852 has finally prohibited blatant online sales and vending machines, the

damage to our health landscape is already visible with national medical experts projecting that treating vaping-related lung illnesses like Evali (E-cigarette or Vaping Use-Associated Lung Injury) will cost the government an estimated RM223.5mil annually.

To achieve a breakthrough, policymakers must consciously reject the industry-funded narrative of "tobacco harm reduction".

The assertion that e-cigarettes and nicotine products serve as a benign cessation tool is systematically contradicted not only by significant and continually growing scientific evidence but also by reality on the ground, where vibrant, candy-flavoured disposables are clearly engineered to recruit new, non-smoking youths into lifelong nicotine dependency.

The greatest obstacle to a nicotine-free Malaysia remains the sophisticated level of industry interference within our legislative frameworks.

The quiet, calculated removal of the GEG provisions from Act 852 serves as a stark reminder of how commercial lobbying can actively disrupt public health goals.

This overt interference directly undermines Malaysia's binding international commitments under the WHO Framework Convention on Tobacco Control (FCTC).

Securing a healthy future for all Malaysians demands immediate, unyielding policy measures, including enacting a total ban on the importation, manufacture, distribution, sale, possession and use of all electronic smoking devices and non-medicinal nicotine products; intensifying crackdowns on the illicit digital supply chains and distribution networks; and implementing robust institutional firewalls to bar the tobacco and nicotine industry from interfering and influencing public health policy forums.

At its core should be the restoration and strengthening of the GEG framework.

**SYARAH ISMAHANI
NURUL ADILAH
MUHAMMED RIZAKI
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LATIF
Malaysian youth
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Southeast Asia Tobacco
Control Alliance (Seatca)**

Kudos to Port Klang Health Clinic

IN the heart of Port Klang, the Health Ministry has quietly set a high standard for public health-care through the Port Klang Health Clinic with its unwavering dedication, sensitivity and genuine concern for every patient who walks through its doors.

At a time when compassion is more important than ever, the team at Port Klang Health Clinic demonstrates what it means to serve a community with professionalism and heart.

To the doctors, clinicians, nurses, allied health professionals and support staff there, thank you. Your dedication improves lives every day. Continued investment in staff training, infrastructure and community programmes will ensure this standard of care reaches even more people.

**IRENE LOPEZ
Port Klang**

Shot in the arm for state healthcare

Penang secures federal support, RM1mil aid to upgrade public medical facilities

By **LOW CO SIN**
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PENANG has received a major boost to its public healthcare system, with a local charity contributing RM1mil in equipment and the Federal Government injecting millions for long-term facility upgrades.

One Hope Charity and Welfare recently allocated RM1mil to assist six government hospitals, five district health offices and five district dental health offices in Penang, alongside four government hospitals in Kedah.

Its chairman Datuk Chua Sui Hau said the organisation had channelled over RM100mil to hospitals and needy Malaysians between 2021 and 2025 through public and overseas donations.

Penang Chief Minister Chow Kon Yeow, who launched the One Hope Charity 2026 programme at Komtar in George Town, praised the contribution, stating that every piece of donated equipment helped save lives and speed up treatment.



Chow (seated, centre) flanked by Chua (to his left) and Gooi after the press conference at Komtar.
— CHAN BOON KAI/The Star

He said Health Ministry had allocated RM191.8mil to Penang under the Health Empowerment Fund (2023-2030) to upgrade public healthcare facilities.

The funding covers the redevelopment of Hospital Sungai Bakap, upgrades to rural clinics and development of modern wellness hubs.

Penang health committee

chairman Daniel Gooi Zi Sen said that further redevelopment projects were planned for Hospital Kepala Batas and Hospital Bukit Mertajam, with the latter being considered for a more specialised role as a geriatric care centre to prepare for an ageing population.

Addressing concerns that non-governmental organisation

donations might reflect a shortfall in public healthcare funding, Gooi clarified that federal allocations had actually risen in recent years to match escalating healthcare costs.

He noted that ensuring accessible and affordable healthcare remained a key concern, given that many of Penang's hospital beds were in the private sector.

To bridge the gap, about RM10mil was spent last year to refer public hospital patients to private facilities under Health White Paper initiatives.

While Gooi acknowledged that doctor shortages and public-to-private brain drain constantly being addressed by Health Ministry, he stressed that Penang currently has sufficient hospital beds based on World Health Organisation guidelines.

"Addressing healthcare capacity is not simply a matter of building more hospitals or hiring more doctors," he said.

"We also need to address the rise in non-communicable diseases and reduce the burden on the system by encouraging healthier lifestyles," he added.

Present at the event were Penang Health Department director Datuk Dr Fazilah Shaik Allaudin, Kedah Health Department director Dr Nor Aishah Abu Bakar, One Hope Charity and Welfare adviser Datuk Seri R. Arunasalam and Senator Dr RA Lingeswaran.

MySejahtera to introduce complaint tool for smoking, vaping offences

KUCHING: The Ministry of Health (MoH) will soon launch a new feature called 'MyLapor' through the MySejahtera mobile application, enabling the public to report smoking and vaping violations in real time.

In a Facebook post, the ministry said the module is aimed at improving public health protection by providing a more accessible and convenient reporting platform for the community.

MoH said 'MyLapor' is designed to empower members of the public to play a more significant role in supporting the enforcement of anti-smoking regulations.

The new feature will allow users to submit complaints and vaping reports anytime and anywhere through the MySejahtera application.

Individuals can report violations involving smoking and vaping products through

MySejahtera, assisting authorities in strengthening enforcement and regulatory efforts," the ministry said.

The ministry called on the public to actively participate in monitoring and reporting violations as part of a collective effort to create a healthier community environment and reduce the adverse effects of smoking and vaping on public health.

It said further details regarding

the 'MyLapor' module, including its official launch date will be announced through official communication channels.

MySejahtera, originally developed as a key digital platform in Malaysia's fight against Covid-19, has since evolved into a broader digital health application boosting self-care solutions, digitised healthcare services and initiatives aimed at improving healthcare efficiency and accessibility nationwide.

Seniors, don't be malu to carry a walking stick

Datuk Dr Amar-Singh HSS & Datin Dr Lim Swee Im

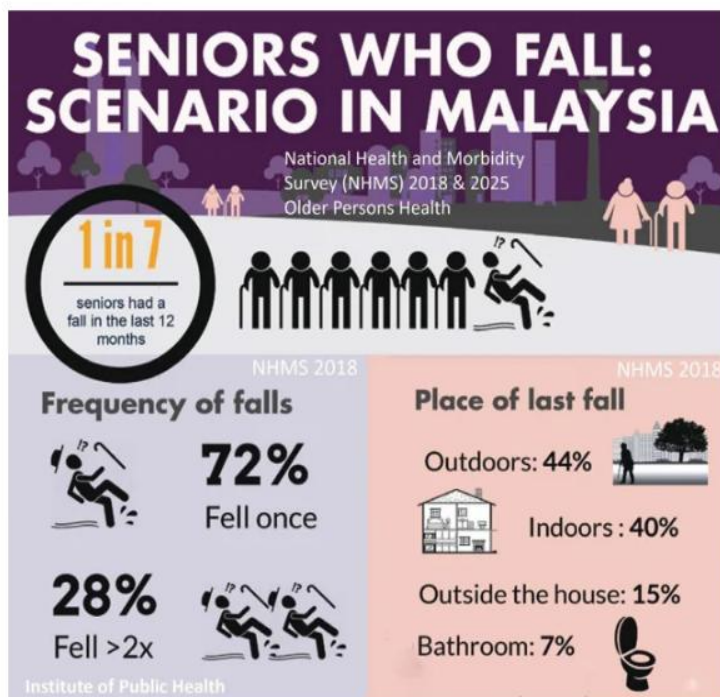
LIKE many nations in the world, we are rapidly transitioning to an ageing nation. We have a fast-declining birth rate and more than 11 per cent of the population is aged 60 years and over. Internationally, the World Health Organisation and other medical organisations recognise that falls are an important cause of unintentional injury and death among adults aged 60 and over.

The Department of Statistics Malaysia (DoSM) 'Statistics on Causes of Death Malaysia 2025' will show you that the top four causes of medically certified death, in those 60 years and over, were pneumonia, heart disease, diabetes mellitus, and stroke. But this does not paint the full picture.

Our cause of death mechanism in Malaysia records the final cause of the death and not the underlying causes of death. For example, if an older person has a fall, with a significant injury or hip fracture, and then is bed-bound and develops pneumonia as a result of the immobility, the cause of death will be recorded as pneumonia, not the fall.

Also note that 38 per cent of all deaths 60 years and over were not medical certified and 19 per cent are classified as 'sakit tua' (died of old age). Hence, falls as an important cause of death or precipitator of death is hidden in our health data.

The World Health Organisation recognises that falls result in traumatic brain injury, hip fractures, immobility, and complications. Extended periods of bed rest or reduced activity can trigger secondary



complications, including pneumonia, pressure ulcers, and blood clots. Data shows that about 20 to 30 per cent of older adults who suffer a hip fracture pass away within one year following the incident and 60 per cent do not fully regain their pre-fracture level of independence.

The data from the National Health and Morbidity Survey

(NHMS) on 'Older Persons Health' for both 2018 and 2025 showed that one in seven Malaysians, aged 60 years and over, fell at least once in the past 12 months.

Falls in older adults are typically driven by a combination of underlying health issues and environmental factors which include:

- Age-related loss of muscle mass

(sarcopenia) and cognitive impairments severely affect balance, gait, and reaction times. NHMS 2025 data for those 60 years and over show that 45 per cent of Malaysians have sarcopenia and 10 per cent have dementia.

- The use of some medications, due to chronic illness, can lead to postural hypotension, dizziness, or drowsiness,

increasing fall risk. NHMS 2025 data for the age group shows that 39 per cent have diabetes and 73 per cent have hypertension.

All of us are becoming disabled to some degree, or less capable, as we grow older, which makes falls more likely. NHMS 2025 for older persons shows that 10 per cent have limitations in activities of daily living, 4 per cent have vision limitations, and 30 per cent are physically inactive.

Hence, it is imperative as we grow older that we invest in fall prevention.

Our own experience reflects this. Once we both reached 60 years of age, we started routinely using a walking stick, even though we are still quite fit and active. We use lightweight hiking sticks that are height adjustable. Having used them now for a number of years, we have come to enjoy the extra support that a simple walking stick gives us. It is now second nature for us to not leave our home without a walking stick.

Some people look at us oddly, two fit individuals using a walking stick. But we have seen enough older people fall down, break a bone or two, become bedridden, and eventually die or languish and suffer. We do not relish the thought of joining this community.

A simple walking stick makes us much more stable and steadier on our feet, less wobbling around. Navigating uneven surfaces and steps of buildings and roads can be quite hazardous, not to mention potholes and unexpected gaps.

Sadly, many older persons are 'malu' (embarrassed) to be seen using a walking stick. They somehow think it makes them

look 'old'. Instead, some use an umbrella – an item that cannot bear your weight adequately, is clumsy and often is too short to be used properly. Others we see holding on to their relatives, at times desperately, for support. Some hobble or shuffle around, often unsteadily, making us fearful for them.

If you look at the data from NHMS 2018, you will recognise that falls also occur in and around the house. We recognise this and have renovated our bathroom floor to a non-slip surface, covered all the drains, and lowered high cupboards. As we are reaching 70 years, we are planning to install grab bars and rails in the bathroom.

In Malaysia, we have an inordinate fascination with marble floors. Even the Ministry of Health and private hospitals and clinics (not to mention every government department) have extensive marble floors. Marble floors pose a high risk of slips and falls, especially for older persons, the disabled and young children, because of their naturally smooth, polished surface. They become extremely hazardous when wet or waxed. It is time to move away from such inappropriate design choices, especially in health facilities which most older persons and the disabled use frequently.

If you are 60 years and older and are reading this, you may say "I am still fit and do not need to use a walking stick" but your first fall may be your last. Falls are a tragic and inglorious way to end or diminish our lives. The rate of older Malaysians ageing well is poor (15 per cent NHMS 2025). Let us all encourage each other to live our lives with better quality.

Jururawat lelaki tak setuju kemasukan jururawat Indonesia ke Malaysia

SHAH ALAM - Persatuan Jururawat Lelaki Malaysia (MMN) tidak bersetuju dengan usul Indonesia bersedia membawa masuk dan membekalkan jururawat dari negara itu ke Malaysia bagi menangani masalah kekurangan tenaga kerja kesihatan.

MMN menegaskan, pendirian tersebut

bukan bersifat prejudis terhadap profesionalisme tenaga kerja kesihatan Indonesia, tetapi ia berpaksikan keutamaan menjaga kualiti penjagaan pesakit, keselamatan klinikal serta kestabilan sistem kesihatan Malaysia dalam jangka panjang.

Menurut persatuan itu, isu utama yang

perlu diberi perhatian serius antara lain perbezaan standard latihan kejururawatan, kelayakan akademik, prosedur dan protokol klinikal, kebolehan berkomunikasi dalam Bahasa Melayu serta dialek tempatan.

"Perkara ini boleh mempengaruhi penyampaian rawatan selamat dan berkesan kepada pesakit Malaysia. Selain itu, negara masih mempunyai ramai lulusan kejururawatan yang belum mendapat penempatan tetap di hospital kerajaan dan swasta.

"Justeru, keutamaan mesti diberikan kepada pengambilan dan penempatan graduan tempatan terlebih dahulu sebelum memikirkan tenaga kerja asing.

"Setelah meneliti pelbagai sudut secara menyeluruh, MMN dengan tegas menyatakan tidak setuju sekiranya usul ini dilaksanakan tanpa kajian yang lebih mendalam dan teliti," katanya dalam kenyataan pada Jumaat.

Pada Rabu, Indonesia dilaporkan bersedia membekalkan seramai 15,000 jururawat dari negara itu ke Malaysia bagi memenuhi krisis kekurangan tenaga kerja terbabit dalam sektor kesihatan negara ini.

Duta Besar Indonesia ke Malaysia, Raden Datuk Mohammad Iman Hascarya Kusumo memaklumkan, negara itu kini menghasilkan kira-kira 65,000 jururawat setiap tahun sekali gus mempunyai bekalan tenaga kerja yang mencukupi untuk dihantar ke Malaysia.

Terdahulu Menteri Luar, Datuk Seri Mohamad Hasan berkata, Malaysia sedang

mempertimbangkan cadangan Indonesia untuk memperluas penempatan pekerja migran Indonesia (PMI) ke sektor kesihatan, khususnya tenaga kejururawatan.

Media sebelum ini melaporkan Kementerian Kesihatan Malaysia (KKM) berdepan jurang kritikal apabila kekurangan hampir 15,000 jururawat bertauliah.

Kadar kekosongan kira-kira 18 peratus itu didorong oleh penghijrahan tenaga kerja ke luar negara, peningkatan bebanan tugas dan penuaan populasi.

Mengulas lanjut, kata MMN, kemasukan jururawat asing secara besar-besaran tanpa perancangan rapi boleh menjejaskan peluang pekerjaan warganegara dan membebankan sistem latihan adaptasi tempatan.

Persatuan dengan tegas meminta KKM, Jabatan Imigresen Malaysia (JIM), Suruhanjaya Perkhidmatan Awam (SPA) dan agensi berkaitan untuk meneliti implikasi undang-undang, etika profesional, sosio-ekonomi serta keselamatan pesakit dengan lebih baik sebelum membuat sebarang keputusan.

"Kajian impak menyeluruh, perbandingan kompetensi secara terbuka, mekanisme pemantauan serta penilaian berkala yang ketat perlu dilakukan.

"Sekiranya kemasukan ini benar-benar diperlukan, ia hendaklah bersifat sementara, terhad jumlahnya dan dikenakan syarat lesen sementara yang ketat," ujarnya lagi.

Kemasukan jururawat asing secara besar-besaran tanpa perancangan rapi boleh menjejaskan peluang pekerjaan warganegara dan membebankan sistem latihan adaptasi tempatan.



ANDES BUKAN ANCAMAN BAHARU

TIDAK SEMUA VIRUS BOLEH CETUS PANDEMIK



Bersama
Dr Muhammad
Amir Yunus



Berbeza dengan SARS-CoV-2 yang boleh menjangkiti manusia secara sangat efisien melalui titisan pernafasan dan aerosol di ruang awam, virus Andes mempunyai corak penularan jauh lebih terhad

Laporan berkaitan wabak virus Andes atau Andes virus (ANDV) di atas kapal persiaran MV Hondius baru-baru ini secara semula jadi mengundang kebimbangan dalam kalangan masyarakat.

Dengan beberapa kematian dilaporkan serta penularan berita mengenai penumpang yang pulang ke negara masing-masing selepas meninggalkan kapal itu, ramai mula bertanya soalan yang sama yang pernah kita dengar enam tahun lalu, adakah ini permulaan kepada satu lagi pandemik global?

Reaksi seperti ini sebenarnya boleh difahami. Pandemik Covid-19 meninggalkan kesan psikologi yang besar kepada masyarakat seluruh dunia, termasuk di Malaysia. Selepas melalui tempoh panjang perintah kawalan pergerakan, berita harian tentang angka kematian serta perubahan besar dalam kehidupan seharian, ramai menjadi lebih sensitif terhadap sebarang laporan mengenai virus baharu. Setiap kali muncul berita tentang wabak di luar negara, akan ada kebimbangan bahawa sejarah mungkin berulang.

Namun, dalam bidang virologi, tidak semua virus mempunyai keupayaan yang sama untuk mencetuskan pandemik. Nama virus mungkin kedengaran menakutkan, tetapi cara sesuatu virus merebak, persekitaran yang diperlukan untuk ia terus hidup, dan keupayaannya menjangkiti manusia secara efisien memainkan peranan yang jauh lebih penting dalam menentukan tahap ancaman sebenar.

Virus Andes tergolong dalam keluarga hantavirus iaitu kumpulan virus yang lazimnya dikaitkan dengan rodensia atau tikus sebagai perumah semula jadi. Berbeza dengan SARS-CoV-2 yang boleh menjangkiti manusia secara sangat efisien melalui titisan pernafasan dan aerosol di ruang awam, virus Andes



KAPAL persiaran MV Hondius menyaksikan kematian tiga penumpangnya akibat wabak hantavirus.

mempunyai corak penularan yang jauh lebih terhad. Ia bergantung kuat kepada spesies tikus tertentu di Amerika Selatan untuk terus wujud dalam ekosistem semula jadinya.

Di sinilah perbezaan penting yang sering terlepas pandang apabila masyarakat membandingkan setiap wabak baharu dengan Covid-19.

Virus Andes sememangnya mempunyai rekod penularan manusia kepada manusia, tetapi bukti yang ada menunjukkan ia berlaku secara jarang dan biasanya melibatkan hubungan rapat dalam tempoh yang lama, selalunya dalam kalangan ahli keluarga atau individu yang tinggal serumah. Ia tidak mempunyai keupayaan penyebaran pantas seperti yang kita lihat semasa awal pandemik Covid-19 dahulu, apabila seseorang boleh dijangkiti hanya melalui pertembungan singkat di ruang tertutup atau pengangkutan awam.

Dalam kata lain, virus Andes tidak mempunyai 'enjin biologi' yang sama untuk merebak secara meluas dalam komuniti. Satu lagi faktor yang memberi sedikit kelegaan kepada pakar kesihatan awam ialah sifat genetik hantavirus yang lebih stabil. Semasa pandemik Covid-19, antara cabaran terbesar ialah mutasi pantas virus korona yang menghasilkan pelbagai varian baharu dalam tempoh singkat. Virus Andes pula menunjukkan kadar perubahan genetik yang jauh lebih perlahan, menjadikannya lebih mudah dipantau dan diramalkan dari sudut epidemiologi.

Ini juga membantu memastikan ujian diagnostik sedia ada kekal relevan untuk tempoh yang lebih panjang.

Walaupun begitu, ini tidak bermaksud virus tersebut boleh dipandang ringan. Individu yang dijangkiti boleh mengalami Sindrom Pulmonari Hantavirus iaitu keadaan serius yang melibatkan gangguan sistem pernafasan dan pengumpulan cecair dalam paru-paru. Pada peringkat awal, pesakit mungkin mengalami demam, sakit otot, sakit kepala dan keletihan sebelum keadaan menjadi lebih serius dalam tempoh beberapa hari.

Namun, daripada sudut kesihatan awam, terdapat perbezaan besar antara virus yang menyebabkan penyakit serius kepada individu dan virus yang berpotensi melumpuhkan sistem kesihatan negara melalui penularan besar-besaran. Covid-19 menjadi ancaman global bukan hanya kerana ia boleh menyebabkan kematian, tetapi kerana ia merebak terlalu pantas dalam masa yang singkat. Itu menyebabkan hospital menjadi sesak dan sistem kesihatan di banyak negara berada dalam tekanan luar biasa.

Setakat ini, tiada bukti kukuh bahawa virus Andes mempunyai keupayaan sedemikian.

Malah, faktor ekologi juga memainkan peranan penting. Spesies tikus yang menjadi perumah utama virus Andes tidak wujud di Malaysia. Ini secara automatik mengurangkan risiko penularan semula jadi di negara kita. Dalam konteks

virologi, memahami hubungan antara virus dan perumah semula jadinya sering kali lebih penting daripada sekadar melihat angka kes semasa.

Atas sebab itu, keputusan Pertubuhan Kesihatan Sedunia (WHO) dan Pusat Kawalan Penyakit Amerika Syarikat (CDC) yang masih mengekalkan penilaian risiko global pada tahap rendah adalah sesuatu yang selari dengan bukti saintifik semasa.

Apa yang lebih penting sekarang ialah memastikan masyarakat mendapat maklumat yang tepat dan seimbang. Kewujudan virus baharu bukan sesuatu yang luar biasa dalam dunia moden, terutamanya apabila sistem pengawasan penyakit global kini jauh lebih cekap berbanding dahulu. Tidak semua laporan wabak perlu dilihat sebagai petanda kepada pandemik seterusnya.

Pengalaman Covid-19 memang mengajar kita supaya lebih berhati-hati, dan itu bukan perkara yang salah. Tetapi dalam masa yang sama, kita juga perlu belajar membezakan antara kewaspadaan dan panik. Dalam dunia virologi, setiap virus mempunyai 'personaliti' biologinya yang tersendiri. Memahami perbezaan itu adalah sebahagian daripada cara kita bergerak ke hadapan dengan lebih matang selepas melalui pengalaman besar yang pernah mengubah dunia beberapa tahun lalu.

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