

Supplies stable, small number of products monitored

PUTRAJAYA: Medicine supplies in the country remain stable and sufficient, although a small number of products continue to be closely monitored, says Datuk Seri Dr Dzulkefly Ahmad (*pic*).

The Health Minister said the ministry tracks 702 medicine types covering 3,739 registered products through monthly reports submitted by registration holders.

"As of May 8 this year, 505 medicine types, or 72%, had stock levels exceeding 90 days and were classified as low risk.

"Another 79 types (11.3%) were categorised as moderate risk with supplies lasting between 60 and 90 days, while 118 items (16.8 %) had stocks below 60 days and were considered high risk," he said yesterday.

The moderate and high-risk categories include antibiotics, cancer drugs, vaccines, antidotes, psychiatric medicines and cardiovascular treatments, Bernama reported.

"Of the 118 high-risk items, only 14 were deemed critical due to reliance on a single registration holder or delays of more than a month for incoming supplies," he said.

These include Fluorouracil (cancer treatment), Methylene Blue (used in diagnostic procedures), Linezolid (an antibiotic) and Coal Tar Solution for psoriasis treatment.

However, Dr Dzulkefly said checks with the ministry's facilities and concession companies found that 13 of the 14 critical medicines still have stock levels exceeding 90 days. The remaining item, Carbinoxamine Maleate/Pseudoephedrine Hydrochloride, is not listed in the ministry's Drug Formulary.

Additional shipments of critical medicines are scheduled to arrive between June and September, while the ministry continues to work closely with industry players, suppliers and healthcare facilities to address potential supply disruptions early.



Nurse among five held over fake MCs

PEKAN: A nurse and four others, who are linked to an investigation into the sale and purchase of fake medical certificates (MCs), have been remanded.

The suspects, aged 33 to 55, were ordered to be detained for three to four days from yesterday by magistrate Melody Woon Sze Mun to facilitate police investigations under Sections 420 and 468 of the Penal Code for cheating and forgery.

Pekan OCPD Supt Mohd Zaidi Mat Zin said all the suspects were arrested in an operation in Kampung Marhum and Kampung Kuala Pahang here between 3pm and 10pm on Monday.

On Monday, Supt Mohd Zaidi said initial investigations found that the MCs were sold for RM50 to RM200 each, Bernama reported.

He had reportedly said that the activity was believed to have been carried out in an organised manner.

He added that this included the involvement of individuals who acted as middlemen to find customers and manage the sale of MCs.

Staff existing hospitals first before building new ones

By RAGANANTHINI VETHASALAM
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PETALING JAYA: Constructing hospitals alone will not solve the healthcare crisis. The government must also address the Health Ministry's manpower shortage, says the Malaysian Medical Association (MMA).

It was commenting to a plan for new hospitals in Petaling Jaya and Durian Tunggal.

However, in June alone, several existing hospitals, including in Lahad Datu, Pekan and Jesselton, have faced staffing shortages.

MMA president Datuk Dr Thirunavukarasu Rajoo said the issue involves the Health Ministry, as well as the Finance Ministry and Public Service Department.

"In the long term, the answer is an independent Health Service Commission with authority over manpower and funding, so that hiring, postings and career progression are no longer constrained by a structure never built for healthcare.

"Build hospitals in Petaling Jaya and Melaka if there is a need, but fill vacant positions and plan the workforce before the first brick is laid."

He said that Malaysia is already short of nearly 11,000 specialists, while nursing vacancies stand at about 18%. Of the 5,000 posts offered to medical graduates, only 529 were filled.

"We are not short of patients.

Dr Thirunavukarasu cited Hospital Pasir Gudang, which was completed but could not fully operate due to a lack of doctors

and nurses.

"That is not a construction failure. It is a workforce planning failure. Without fixing this, we will repeat the same mistake."

It was recently reported that more than half of the 2,271 approved positions at the hospital remain vacant.

Senator Dr RA Lingeshwaran said manpower shortages and hospital construction should not be viewed as competing priorities.

"The question is not whether we should build new hospitals or solve manpower shortages first. We must do both simultaneously.

Malaysia's healthcare needs continue to grow due to population expansion, an ageing population and increasing demand for specialised services," said the former director of Hospital Sungai Bakap.

He said new hospitals in Petaling Jaya, Melaka and other high-demand areas are necessary to improve access and reduce overcrowding. However, infrastructure investment must be matched with investment in people.

"Hospitals do not treat patients; healthcare professionals do. A new hospital without sufficient doctors, nurses and allied personnel is a building, not a functioning healthcare institution."

Dr Lingeshwaran said retaining healthcare workers should be an immediate priority through better remuneration and working conditions.

He also called for a comprehensive workforce strategy covering recruitment, training and career progression for doctors, nurses, pharmacists, therapists and allied health professionals.

"Expanding healthcare capacity without adequate manpower risks service disruption and places further strain on an already stretched workforce."

Former Health Ministry director Datuk Dr Zainal Ariffin said hospital construction should be done alongside efforts to resolve manpower shortages.

"Hospital construction typically takes three to seven years, while manpower production, especially for specialists and experienced nurses, takes five to more than 10 years," he said.

To strengthen the manpower pipeline, he proposed bonded scholarships, expanded telemedicine and greater use of nurse practitioners, medical assistants and community health workers for follow-ups, chronic disease management and minor procedures.

Medicine supplies stable despite close monitoring of some items, assures MoH

PUTRAJAYA: The Ministry of Health (MoH) has assured that medicine supplies in Malaysia remain stable and sufficient, although a small number of products continue to be closely monitored.

According to the minister Datuk Seri Dr Dzulkefly Ahmad, the MoH tracks 702 medicine types covering 3,739 registered products through monthly reports submitted by registration

holders.

"As of May 8, 2026, 505 medicine types, or 72 per cent, had stock levels exceeding 90 days and were classified as low risk.

"Another 79 types (11.3 per cent) were categorised as moderate risk with supplies lasting between 60 and 90 days, while 118 items (16.8 per cent) had stocks below 60 days and were considered high risk," he told Bernama in a

written reply yesterday.

The moderate and high-risk categories include antibiotics, cancer drugs, vaccines, antidotes, psychiatric medicines and cardiovascular treatments.

"Of the 118 high-risk items, only 14 were deemed critical due to reliance on a single registration holder or delays of more than a month for incoming supplies," he said.

"These include Fluorouracil

(cancer treatment), Methylene Blue (used in diagnostic procedures), Linezolid (an antibiotic) and Coal Tar Solution for psoriasis treatment."

However, Dr Dzulkefly said checks with MoH facilities and concession companies found that 13 of the 14 critical medicines still had stock levels exceeding 90 days.

"The remaining item,

Carbinoxamine Maleate/Pseudoephedrine Hydrochloride, is not listed in the MOH Drug Formulary.

"This means medicine supplies for patients at MoH facilities remain sufficient and are not currently affected."

Additional shipments of critical medicines are scheduled to arrive between June and September, while the ministry continues to work closely with

industry players, suppliers and healthcare facilities to address potential supply disruptions early.

On June 14, Prime Minister's economic advisor Nurhisham Hussein said that over 70 per cent of public healthcare medicine supplies currently had stock levels exceeding three months, while most critical medications had alternative treatment options available. — Bernama

Association backs government-funded medication delivery

KOTA KINABALU: Yayasan Pengguna Negara Malaysia (YPNM) Sabah has welcomed the federal government's decision to fully bear medication delivery costs under the Ubat Melalui Pos (UMP) programme.

The foundation described it as a consumer-friendly initiative that would greatly benefit vulnerable groups, particularly senior citizens, persons with disabilities, chronic disease patients, and those living in rural and remote areas.

"This is a people-centric initiative that not only improves access to healthcare but also helps consumers manage their cost of living amid economic uncertainties," said YPNM Sabah chairman David Chan in a statement.

YPNM Sabah said the programme should help reduce the financial burden faced by patients who require regular medication by eliminating delivery charges and reducing the need for frequent travel to government hospitals and health clinics.

"With fuel prices remaining uncertain due to global economic and geopolitical factors, the initiative comes at a crucial time to help consumers save on transportation expenses while ensuring uninterrupted access to essential medication," said the foundation.



David Chan

In addition to cost savings, YPNM Sabah noted that the programme will also save valuable time for patients and caregivers, reduce long waiting periods at healthcare facilities, and improve the overall efficiency of healthcare services.

The foundation added the UMP programme could also contribute towards reducing traffic congestion in urban centres by lowering the number of trips made to hospitals and clinics for medication collection, which aligns with the government's broader efforts to improve public service delivery and environmental sustainability.

YPNM Sabah also encouraged the public to make greater use of public transportation whenever possible as a practical measure to reduce household transportation costs, ease road congestion, and support national

efforts towards more sustainable mobility.

YPNM Sabah commended the Ministry of Health, the Ministry of Communications, and all agencies involved in implementing the programme.

The foundation added it hopes the initiative will be expanded and continuously improved to ensure more Malaysians, especially those in Sabah and other rural regions, can benefit from convenient and affordable healthcare services.

On Monday, Communications Minister Datuk Fahmi Fadzil said the federal government will fully bear the cost of delivering medication to about 80,000 patients a month under the UMP programme from next month.

He said the initiative, a collaboration between the MoH and the Malaysian Communications and Multimedia Commission (MCMC), involves an estimated cost of RM5.69 million per year, which will be fully borne by the Communications Ministry and MCMC.

He added that the move would ensure patients, who are eligible under the UMP programme, no longer need to bear the cost of medication delivery in every state.

Shifting family systems mean more seniors **die alone**

■ BY QIRANA NABILLA
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PETALING JAYA: More Malaysians could face the end of life alone in the years ahead as shifting family structures and an ageing population drive up the risk of social isolation among older adults, said Universiti Malaya Medical Centre senior consultant palliative care physician Dr Sheriza Izwa Zainuddin.

She said demographic trends already show a growing number of adults living alone or without immediate family networks, raising the likelihood that more patients would face illness and death without adequate family support.

"These are the patients who, when they become ill, may only have a lone caregiver or no caregiver at all.

"Based on the demographic data that we are seeing in Malaysia today, this is the reality we are likely to face in the future."

She added that it is becoming increasingly common in palliative care for patients to spend their final moments without loved ones present, making it not only a social issue, but also a healthcare concern.

"Dying alone could significantly affect a patient's dignity, comfort

► Programme designed for terminally ill patients with no relatives, to raise awareness on death, dying and caregiving: Physician

and emotional wellbeing during their final days."

Sheriza stressed that the trend is one of the key reasons the centre established the No One Dies Alone Companion (Nodac) programme, the first initiative of its kind in Malaysia, to ensure terminally ill patients are not left alone during their final moments.

She noted that Nodac is designed for terminally ill patients with no family members or only a sole caregiver, while also aiming to raise awareness on death, dying and caregiving, which remain heavily stigmatised and poorly understood in Malaysian society.

"The primary aim is to support every patient at the end of life and ensure no one faces death without compassion and companionship.

"There is still limited awareness and understanding on end-of-life issues," she highlighted.

She also said patients are referred to the programme through various departments and

subspecialties at the centre, where the palliative care team assesses whether they would benefit from the service.

She added that the programme works closely with medical social workers to address not only the physical symptoms, but also the emotional, social and practical needs of patients approaching the end of life.

"Some patients are truly alone and have no family members. In such situations, we work together with social workers and volunteers to ensure their needs are supported.

"This is part of a patient-centred, holistic approach to care."

Sheriza emphasised that while healthcare professionals have long provided support to patients without relatives, Nodac formalises and expands the effort by involving trained volunteers and the wider community.

She also said all volunteers are required to undergo specialised training before being assigned to

patients, including what to expect during the end-of-life stage, physical and emotional changes, as well as how to handle difficult conversations.

"Sometimes, patients may feel more comfortable speaking to volunteers than healthcare professionals, so it is important that volunteers know how to provide support and when to seek further assistance," she said.

Sheriza highlighted that while Nodac was specifically designed for terminally ill patients who have no family members or only a sole caregiver, many who approach the service still have family support.

She noted that in such cases, the palliative care team instead focuses on guiding and educating families to be present and support patients during their final stages of life.

"The programme has strict criteria as it is meant for patients with no family members or caregiver as ethical considerations are important to ensure confidentiality and avoid disputes from relatives later."

Looking ahead, she said clear policies would help guide healthcare providers, establish training standards and ensure equitable access to end-of-life care services as the country continues to age.

Fight against HIV in peril due to aid cuts, warns UN

MASSIVE cuts to international aid have put the world's response to HIV "in peril", the United Nations top AIDS official warned on Friday, as a new report revealed the scale of disruption to HIV prevention efforts.

Last year, the new administration of United States President Donald Trump — with help from then-adviser Elon Musk — dismantled the world's largest aid agency, the United States Agency for International Development (USAID), and slashed global funding.

Countries including the United Kingdom, France and Germany followed his lead in slashing aid funding, leaving humanitarian organisations reeling and severely impacting efforts against diseases such as HIV that particularly affect the world's poorest and most vulnerable people.

"This is the most serious disruption in the HIV response since the world came together to fight this disease," UNAIDS executive director Winnie Byanyima told AFP.

The significant progress the world was making against HIV had already

been stalling, but "it is now in peril because of sudden cuts," she said.

It will take time for the full impact of these funding cuts to become clear — but there are already signs that hard-fought gains are being reversed, Byanyima added.

TESTING RATES PLUNGE

Data in the new UNAIDS report showed that the number of people taking the vital HIV-prevention drug fell by 38 per cent across 62 countries between 2024 and 2025.

In the countries most affected by HIV — most of which are in sub-Saharan Africa — HIV testing rates under a major programme decreased by 22 per cent, the report said.

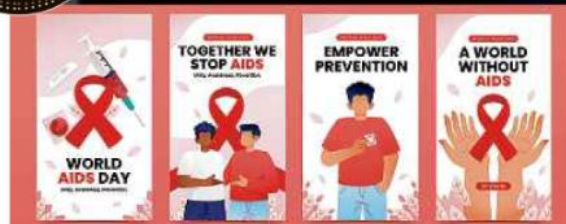
"By the nature of this disease, new infections will show up in the following years, not immediately," Byanyima said.

Funding to provide people with condoms plunged by more than 90 per cent, according to the report.

Programmes that ensure people can access HIV prevention services saw their funding slashed by 80 per



There were around 570,000 AIDS-related deaths and 1.2 million infections worldwide last year. PICTURES CREDIT: JCOMP - FREEPIK.



cent, with community-led groups particularly hard-hit.

Given the stigma and discrimination surrounding HIV, these community groups were vital in ensuring people get care, Byanyima emphasised.

"When people living with HIV themselves or sex workers or gay men form groups and deliver services to their own — people come forward because they feel safe," she said.

The HIV response had also been affected by new criminal laws in some countries targeting people with HIV, the LGBT community and other people with high levels of the disease, Byanyima

added.

The report said there were around 570,000 AIDS-related deaths and 1.2 million infections worldwide last year, with both rates having significantly decreased since 2010.

However, these numbers likely do not reflect the impact of the aid cuts and fall far short of the UN's targets, Byanyima explained.

CALL FOR 'GLOBAL SOLIDARITY'

After international aid was slashed last year, more than 50 countries committed to increase their domestic HIV funding, according to the report.

Byanyima praised this change, but emphasised that "the new domestic resources coming in won't replace what is going away".

She called for the world to show "global solidarity" to bring an end to a "virus that knows no borders". This includes sharing new tools such as the new long-acting injectable drug which both treats and prevents HIV.

Over 6,000 people were receiving the drug across five African countries by the end of March 2026, the report said.

However, this is "a drop in the ocean" compared with what is needed, Byanyima said, calling for 20 million people to receive long-acting injectables.

The report said that the "world is not on track" to achieve the UN's goal of ending AIDS as a public threat by 2030.

Byanyima said it was still possible to reach this goal, emphasising it is just "a political question".

The report was released ahead of a UN General Assembly meeting on HIV and AIDS starting on June 22, where member states are expected to adopt a political declaration to guide the world's response over the next five years.

Jual sijil cuti sakit RM200 sekeping

Jururawat klinik
kerajaan antara
5 direman bantu
siasatan

Oleh NORAWAZNI YUSOF

PEKAN - Lima individu termasuk seorang jururawat wanita dari klinik kerajaan antara direman bagi membantu siasatan berhubung kes jual beli sijil cuti sakit disyaki tidak sah.

Majistret Melody Woon Sze Mun membenarkan empat suspek ditahan empat hari sehingga 19 Jun manakala seorang lagi suspek direman tiga hari.

Kes berkenaan terbongkar apabila Pejabat Kesihatan Daerah Pekan menerima maklumat mengenai kegiatan penjualan sijil sakit didakwa berlaku dalam kalangan pekerja kilang di daerah



Dua suspek wanita direman berkaitan kes penjualan dan pembelian sijil cuti sakit palsu di Mahkamah Majistret Pekan.

ini pada 12 Mei lalu.

Bertindak atas maklumat dan risikan, polis menahan lima suspek berusia antara 30 hingga 55 tahun dalam operasi pada 15 Jun.

Mereka terdiri daripada tiga individu disyaki sebagai orang tengah, penjawat awam dipercayai membekalkan sijil tidak sah serta

seorang lagi individu dipercayai mendapatkan dan menggunakan dokumen berkenaan.

Hasil semakan mendapati, sijil berkenaan menggunakan nama dan cop seorang pegawai perubatan yang telah bertukar tempat bertugas sejak 2023.

Siasatan lanjut juga mendapati nombor siri sijil digunakan adalah buku rasmi diedarkan kepada sebuah klinik kerajaan.

Sijil tidak sah itu dijual pada harga antara RM50 hingga RM200 sekeping melalui beberapa individu bertindak sebagai orang tengah bagi mendapatkan pelanggan.

Kes disiasat mengikut Seksyen 468 Kanun Keseksaan kerana pemalsuan bagi tujuan menipu dan Seksyen 420 Kanun Keseksaan kerana menipu.

Tiga suspek lelaki direman bagi membantu siasatan kes penjualan dan pembelian sijil cuti sakit palsu di Pekan.



JKNS bongkar sindiket jual ubat tidak berdaftar

Petaling Jaya: Jabatan Kesihatan Negeri Selangor (JKNS) membongkar aktiviti sindiket penjualan ubat tidak berdaftar mengandungi sibutramine secara dalam talian, membabitkan sebuah syarikat pengendali perkhidmatan hab logistik dan merampas produk bernilai lebih RM5.6 juta.

Seruan dilakukan Ca-wangan Penguatkuasaan Farmasi (CPF) JKNS dengan kerjasama Bahagian Penguatkuasaan Farmasi Kementerian Kesihatan (KKM) bersama CPF Pahang, Pulau Pinang dan Kedah di Seksyen 19 pada 3 Jun lalu.

Pengarah JKNS, Dr Um-mi Kalthom Shamsudin, berkata operasi itu susulan aduan awam mengenai aktiviti penjualan produk tidak berdaftar dengan Pihak Berkuasa Kawalan Dadah (PBKD) KKM.

Katanya, pemeriksaan terhadap syarikat berkenaan dipercayai dijadikan lokasi penyimpanan dan pengedaran produk tidak berdaftar mengandungi sibutramine kepada pengguna di Malaysia.

"Hasil pemeriksaan berjaya merampas sebanyak tiga jenis produk tidak berdaftar mengandungi sibutramine, selain 21 jenis produk suplemen kesihatan berjenama luar negara yang tidak berdaftar.

"Nilai rampasan diang-

garkan melebihi RM5.6 juta," katanya dalam kenyataan, di sini semalam.

Dr Um-mi Kalthom berkata, sibutramine ialah sejenis ubat digunakan membantu mengurangkan berat badan dan hanya boleh dibekalkan doktor atau diperoleh dari farmasi dengan preskripsi doktor.

Penggunaan sibutramine tanpa pengawasan doktor boleh menyebabkan kesan sampingan yang serius seperti peningkatan tekanan darah dan kadar denyutan jantung, selain memberi risiko komplikasi kardiovaskular, termasuk strok dan serangan jantung.

Dalam pada itu, Dr Um-mi Kalthom berkata, CPF JKNS menjalankan pemeriksaan terhadap 13 syarikat pengendali perkhidmatan hab logistik di Selangor sepanjang tahun lalu.

Katanya, pemeriksaan itu merampas produk ti-

dak berdaftar, termasuk suplemen jenama luar negara dengan nilai rampasan melebihi RM30 juta.

"Siasatan menunjukkan ada pembabitian penjual dari negara luar menggunakan syarikat pengendali perkhidmatan hab logistik sebagai lokasi penyimpanan dan pengedaran produk tidak berdaftar.

"Produk itu dijual kepada pengguna di Malaysia guna pelbagai platform e-dagang," katanya.

Beliau menegaskan, penjualan produk tidak berdaftar melanggar Peraturan 7(1)(a) Peraturan-Peraturan Kawalan Dadah dan Kosmetik 1984.

Katanya, tindakan itu sebahagian usaha berte-rusan CPF JKNS dalam membanteras penjualan dan pengedaran produk kesihatan keluaran luar negara yang tidak berdaftar di pasaran bagi memastikan keselamatan orang awam sentiasa terjamin.

“Hasil pemeriksaan berjaya merampas tiga jenis produk tidak berdaftar ada sibutramine, selain 21 jenis produk suplemen kesihatan berjenama luar negara yang tidak berdaftar”



Dr Um-mi Kalthom Shamsudin,
Pengarah JKNS

JKNPP arah 177 premis makanan di Pulau Pinang tutup operasi

George Town: Sebanyak 177 premis makanan di Pulau Pinang diarahkan tutup sementara selepas didapati melanggar pelbagai aspek kebersihan, hasil pemeriksaan ke atas 4,069 premis oleh Jabatan Kesihatan Negeri Pulau Pinang (JKNPP) di seluruh negeri dari Januari hingga April lalu.

Pengerusi Jawatankuasa Belia, Sukan dan Kesihatan

Pulau Pinang Daniel Gooi Zi Sen berkata, tindakan penguatkuasaan itu melibatkan pelbagai kategori premis termasuk restoran, kedai makan dan kantin di sekolah, hospital serta kilang yang didapati gagal mematuhi piawaian kebersihan dan keselamatan makanan ditetapkan, berdasarkan operasi serta aduan orang awam.

"Pemeriksaan terhadap

4,069 premis makanan, majoriti didapati mematuhi standard kebersihan ditetapkan, namun 177 premis diarahkan tutup sementara bagi membolehkan kerja-kerja pembersihan dan penambahbaikan dilaksanakan, dengan tujuh premis didapati gagal mendapatkan suntikan tiroid.

"Daripada jumlah premis yang ditutup semen-

tara itu, 122 premis atau 68.9 peratus membabitkan masalah kawalan makhluk perosak, 49 premis (27.7 peratus) mempunyai tahap kebersihan tidak memuaskan, manakala enam premis (3.4 peratus) dikaitkan dengan kejadian keracunan makanan," katanya pada sidang media di Komtar, di sini, semalam.

Selain itu, beliau berkata, sebanyak 1,771 notis mengi-

kut Seksyen 32B, Akta Makanan 1983 dikeluarkan atas pelbagai kesalahan berkaitan kebersihan premis dan pengendalian makanan dengan 204 operasi dijalankan di seluruh negeri.

Gooi memaklumkan JKNPP turut menerima 241 aduan berkaitan premis makanan tahun ini, dengan 185 aduan melibatkan kebersihan restoran dan kedai makan, 12 pasar

raya, sembilan warung atau gerai dan lapan medan selera.

Selain itu, beliau berkata, lima aduan membabitkan kantin sekolah, dapur taska, prasekolah dan dapur asrama, dua kilang pemprosesan makanan serta masing-masing satu aduan perkhidmatan katering dan p-panggilan, manakala 18 aduan lagi adalah lain-lain kategori.

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Petaling Jaya

Jabatan Kesihatan Negeri Selangor (JKNS) membongkar aktiviti sindiket penjualan ubat tidak berdaftar mengandungi sibutramine secara dalam talian membabitkan sebuah syarikat pengendali perkhidmatan hab logistik dan merampas produk bernilai lebih RM5.6 juta di Seksyen 19 pada 3 Jun lalu.

Serbuhan itu dilakukan JKNS melalui Cawangan Penguatkuasaan Farmasi (CPF) dengan kerjasama Bahagian Penguatkuasaan Farmasi Kementerian Kesihatan Malaysia (KKM) bersama CPF Pahang, Pulau Pinang dan Kedah.

Pengarah JKNS, Dr Ummy Kalthom Shamsudin berkata, operasi itu susulan aduan awam berkenaan ak-

Ubat tak daftar RM5.6j

Serbuhan bongkar penjualan produk mengandungi sibutramine dalam talian

tiviti penjualan produk tidak berdaftar dengan Pihak Berkuasa Kawalan Dadah (PBKD) KKM.

Menurutnya, pemeriksaan terhadap syarikat berkenaan dipercayai dijadikan lokasi penyimpanan dan pengedaran produk tidak berdaftar mengandungi sibutramine kepada pengguna di Malaysia.

"Hasil pemeriksaan berjaya merampas sebanyak tiga jenis produk tidak berdaftar mengandungi sibutramine selain 21 jenis produk suplemen kesihatan berjenama luar negara yang tidak berdaftar.

"Nilai rampasan dianggarkan melebihi RM5.6 juta," katanya dalam kenya-

taan, di sini, semalam.

Katanya, sibutramine ialah sejenis ubat yang digunakan untuk membantu mengurangkan berat badan dan hanya boleh dibekalkan doktor atau diperolehi dari farmasi dengan preskripsi doktor.

Penggunaan sibutramine tanpa pengawasan doktor boleh menyebabkan kesan sampingan yang serius seperti peningkatan tekanan darah dan kadar denyutan jantung selain memberi risiko komplikasi kardiovaskular termasuk strok dan serangan jantung.

Dalam pada itu, Dr Ummy Kalthom berkata, CPF JKNS menjalankan pemeriksaan terhadap 13 buah syarikat



"Hasil pemeriksaan berjaya merampas sebanyak tiga jenis produk tidak berdaftar mengandungi sibutramine"

Dr Ummy Kalthom

pengendali perkhidmatan hab logistik di Selangor sepanjang tahun lalu.

Katanya, pemeriksaan itu merampas produk tidak berdaftar termasuk suplemen jenama luar negara dengan nilai rampasan melebihi RM30 juta.

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"Produk itu dijual kepada pengguna di Malaysia menggunakan pelbagai platform e-dagang," katanya.

Beliau menegaskan, penjualan produk tidak berdaftar melanggar Peraturan 7(1)(a) Peraturan Peraturan Kawalan Dadah dan Kosmetik 1984.

Menurutnya, tindakan itu adalah sebahagian usaha berterusan CPF JKNS dalam membanteras penjualan dan pengedaran produk kesihatan keluaran luar negara yang tidak berdaftar di pasaran bagi memastikan keselamatan orang awam sentiasa terjamin.