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**PETALING JAYA:** Teenage pregnancies in Malaysia are exposing young girls to life-threatening medical complications, with experts saying stigma, silence and gaps in structured sexual health education are placing thousands at risk.

Medical and counselling professionals say urgent intervention, including early antenatal care, comprehensive sex education and improved access to reproductive health services, is critical to safeguarding adolescents.

Universiti Putra Malaysia Obstetrics and Gynaecology Department clinical lecturer and specialist Dr Nurul Ifida Basri highlighted the serious medical risks associated with teenage pregnancy.

She added that young mothers face a higher likelihood of anaemia, pre-eclampsia (high blood pressure), infections, miscarriage, preterm birth, low-birthweight babies, caesarean delivery and excessive bleeding during labour.

She also said they are also more susceptible to postpartum depression and psychosis.

"Early antenatal care is vital. Teenagers may feel shame due to their status, but coming forward early allows health professionals to diagnose and treat conditions before they become life-threatening."

She cautioned against "unbooked" pregnancies, in which teenagers seek medical attention only during active labour.

"This significantly increases the risk of haemorrhage and other severe complications, which could have been managed with early prenatal care."

Her advice comes amid official data underscoring the scale of the issue.

In a recent parliamentary written reply, Women, Family and Community Development Minister Datuk Seri Nancy Shukri said 21,114 pregnancies involving unmarried teenagers were recorded at government health facilities between 2019 and 2024.

She said efforts by her ministry to address the problem include strengthening reproductive health education, expanding counselling programmes and enhancing community support.

"Health clinics in Malaysia welcome unmarried teenagers, but stigma often stops them from seeking care. Early antenatal visits are far safer than waiting until labour," Nurul Ifida said.

She also emphasised the importance of prevention.

"Early sexual health education and access to contraception are crucial."

"Teenagers should understand how

# 'Teenage pregnancies pose serious medical risks'

➤ Early prenatal care vital to diagnose, treat potential complications: Academic

pregnancies occur and practise safe sex, avoiding unprotected intercourse and multiple partners."

She also highlighted the prevalence of sexually transmitted infections (STI) among adolescents, adding that many infections remain undiagnosed because symptoms are often absent.

"Over 1,000 teenagers as young as 13 were diagnosed with STI. If untreated, STI could cause pelvic inflammatory disease, infertility, cervical cancer and chronic infections such as HIV or hepatitis B and C. Untreated infections could also be transmitted from mother to child, posing serious risks to newborns."

"Preventing teenage pregnancies is not just a medical issue; it is a social, cultural and economic priority."

"Education, awareness and supportive

family and community structures could empower teenagers to make informed, safe choices."

Meanwhile, Universiti Sains Islam Malaysia associate professor and registered counsellor Prof Dr Roslee Ahmad said rising teenage pregnancies and sexual misconduct reflect deeper cultural and systemic challenges.

He cited Health Ministry data showing that between 2020 and 2024, 41,842 girls aged 19 and below were recorded as pregnant at Health Ministry facilities, with 16,951 of them unmarried.

"Teenagers today are more exposed than their parents ever were, largely due to widespread internet access. But awareness does not always translate into understanding, and much of the information they consume is unfiltered or misleading."

He attributed the trend to shifting cultural values and Western lifestyle influences



Nancy Shukri said 21,114 pregnancies involving unmarried teenagers were recorded at government health facilities between 2019 and 2024. – AI IMAGE GENERATED BY SYED AZAHAR SYED OSMAN/THE SUN

since the 1990s.

"Young individuals perceive Western culture as modern and superior, and often unconsciously discard traditional Malaysian principles."

Roslee said while sexual health is addressed in science, moral and religious studies, Malaysia lacks structured, comprehensive sex education.

"It is embedded in other subjects but not discussed openly or systematically. We need a framework rooted in Eastern and Islamic perspectives, rather than imported Western models that may not suit our context."

"Prevention must start in primary school, before harmful online content influences students," he said, calling for specialised training for school counsellors and stronger family engagement, as many parents struggle to supervise their children due to work

commitments.

"Social media such as TikTok, Instagram and YouTube could promote values that conflict with Malaysian norms. Policy oversight and digital safeguards are needed to protect young users."

He emphasised that cultural and religious grounding is essential.

"If you are Muslim, strengthen Islamic practices; if (you are) Buddhist or Hindu, return to your teachings. Religion and moral education should shape character and identity."

He also said teenage sexual health is a systemic issue requiring coordinated action from the Education, Health and Higher Education ministries, families and media regulators.

"If we do not act now, the situation could worsen in 10 or 20 years, and the social cost would multiply."

# 'Comprehensive sex education needed for youth to make informed choices'

**PETALING JAYA:** Teenage pregnancies in Malaysia are not just a health issue, but are also a cycle of poverty in the making.

Experts say the country's outdated sexual health education, particularly in rural communities, is leaving youth unprepared to make safe, informed choices.

Women Of Will (WOW) CEO Zulikhwan Ayub said the national curriculum focuses heavily on biological topics such as menstruation and reproduction but largely ignores the socio-behavioural aspects of sexual health.

He added that teenagers may understand the science but often lack practical skills to navigate consent, peer pressure and healthy decision-making.

"In rural areas, the gap is even more pronounced. There is a heavy reliance on informal, often myth-based information. Limited digital literacy also restricts access to credible online resources that could help youth bypass local taboos."

He also said many educators feel under-prepared or culturally hesitant to teach comprehensive sexual health, often relying on fear-based messages focused on shame rather than empowerment.

Zulikhwan said without proper guidance, teenagers often turn to unfiltered online information, distorting their understanding of

reproduction and consent.

WOW research has also identified a strong link between inadequate reproductive health education and long-term economic hardship, especially among B40 households.

He added that early pregnancies frequently disrupt education and career paths, trapping families in cycles of poverty.

He highlighted that financial barriers remain a major obstacle to prevention.

"The cost of a condom or a contraceptive pill is only a fraction of the social and economic cost of an unplanned pregnancy."

"Many teenagers rely on parents for money, discouraging them from buying contraception."

He said subsidies improve health outcomes without encouraging sexual activity.

"Providing contraception does not promote sexual behaviour, it prevents life-altering consequences," he said, adding that access must be paired with culturally sensitive awareness campaigns and a stronger school curriculum.

Zulikhwan advocates framing sexual health through locally resonant values.

"Instead of Western terms, safe practices should be taught through concepts such as self-respect, protection and family planning for future prosperity."

He added that reproductive health is a fundamental right shared across Malaysian

cultures and religions.

He also recommended shifting from top-down lectures to peer and community-led workshops, with information delivered by trusted community figures to reduce taboos.

"Families are the core of the community. Parents must be equipped to have these vital conversations."

On cultural and religious sensitivity, Zulikhwan insisted that medical accuracy must remain non-negotiable.

"Science and data do not have a religion. Evidence must be the baseline. Culture and religion provide the context for application, not a reason to redact critical information."

He expressed belief that religious leaders should be engaged as allies, as many scholars recognise that preserving life includes preventing sexually transmitted infections (STI) and reducing maternal mortality.

"Shielding youth from information does not protect them, it leaves them vulnerable. Transparency is essential for safety."

He said parents play a crucial role but are often ill-equipped to guide such discussions.

"There need to be programmes that help parents overcome their own discomfort. They are the first responders."

He urged a shift in mindset from policing behaviour to guiding youth through

conversations about respecting boundaries and healthy relationships.

He also said empowering daughters with reproductive knowledge should be viewed not only as a health matter but also as a form of financial protection that could help break intergenerational poverty.

Zulikhwan said several policy changes could reduce teenage pregnancies and STI.

He recommended establishing safe, confidential spaces for minors to access professional advice, as current parental consent rules often limit access to accurate guidance.

He added that comprehensive sexual education should also be embedded into teacher training to ensure educators feel confident delivering the material.

He also proposed expanding adolescent-friendly health services, physically or digitally separated from general clinics, to safeguard privacy and reduce stigma.

He said integrated one-stop youth clinics could provide both medical care and professional guidance.

Finally, he suggested reframing reproductive health as a national economic priority.

"A national blueprint that positions reproductive health as essential to economic stability would help secure long-term political and social support." – By Kirtinee Ramesh

# 'Ramadan represents exercise in self-discipline'

➤ Overeating at *iftar* can cause unstable blood sugar, weight gain, indigestion, heartburn: Health specialist

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**PETALING JAYA:** For Muslims, Ramadan is more than just abstaining from food and drink; it is also a rigorous exercise in self-discipline, particularly when it comes to eating, said a health expert.

Malaysian Dietitians' Association council member Rozanna M. Rosly said Islam promotes moderation in all aspects of life, including diet, a principle clearly outlined in the *Quran*.

"Ramadan is a time to moderate food intake," she said, advising Muslims to break their fast with dates or water, following the *Sunnah* of Prophet Muhammad.

"Dates are easy to digest and provide carbohydrates, fibre, iron, potassium and magnesium. Within half an hour, the body regains energy. Breaking fast lightly also helps prevent overeating."

Overindulgence at *iftar* (evening meal) remains a common problem, particularly with the tempting variety of options at Ramadan bazaars, she said.

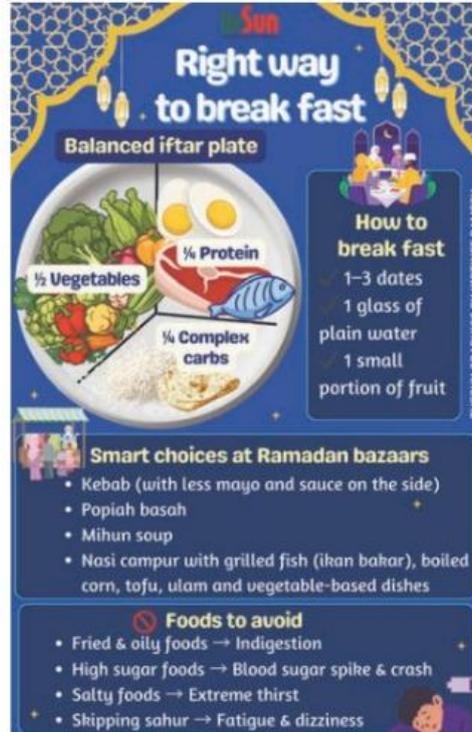
"After more than half a day without food, many feel compelled to eat excessively.

"But overeating can cause unstable blood sugar, weight gain, indigestion, gastritis and heartburn. Ramadan is about self-control and discipline, not feasting."

She recommended prioritising complex carbohydrates and fibre-rich foods at *sahur* (pre-dawn meal).

Brown rice, oats, barley, wholemeal bread, *chapati*, lentils and baked beans digest slowly, providing sustained energy throughout the day, she added.

"In the earlier hours of fasting, carbohydrates are the main fuel source. As liver



glycogen stores decline, the body shifts towards using fats for energy."

Rozanna advised between two and three servings of lean protein daily, alongside two servings of vegetables and three of fruit, plus fibre-rich foods to support digestion, blood sugar and cholesterol.

Bananas, rich in carbohydrates, potassium and magnesium, are ideal for *sahur* and *iftar*.

Malaysia's hot, humid climate also makes dehydration a concern during Ramadan, causing headaches, dizziness and fatigue.

She recommended eight glasses of water daily using the 2-4-2 method, meaning two at *iftar*, four between *iftar* and bedtime, and two at *sahur*.

"Replenishing fluids at night is essential to prevent dehydration, muscle cramps and disorientation," she said, cautioning against caffeinated, sugary, carbonated, salty, processed

or heavily spiced foods, which could worsen thirst and indigestion.

Common Ramadan ailments include constipation, indigestion and headaches, often triggered by skipping *sahur*, consuming fried or sugary foods, dehydration, sudden caffeine withdrawal or disrupted sleep patterns.

"Fasting headaches usually ease as the body adapts, but skipping *sahur* or relying on refined carbs could trigger blood sugar spikes and drops, causing headaches even in healthy individuals."

Rozanna suggested:

- eating *sahur* as late as possible before *imsak* (when fasting begins);
- including carbohydrates, protein and fibre in the pre-dawn meal;
- gradually reducing caffeine intake before Ramadan;
- maintaining consistent sleep routines; and
- resting when needed during the day.

Although *sahur* is not obligatory, it is highly encouraged in Islam.

"The pre-dawn meal provides energy for daily responsibilities and acts of worship. A balanced *sahur* supports metabolism, mental alertness, lean muscle mass and reduces fatigue," she said, adding that delaying *sahur* closer to dawn is ideal to avoid unnecessarily long fasting hours.

On overeating, Rozanna said excessive consumption between *iftar* and *sahur*, particularly of sweet or fatty foods, could lead to weight gain, high blood sugar and elevated blood pressure.

However, she added that Ramadan can be an opportunity to improve eating habits.

"If you are at a Ramadan bazaar, choose healthier options, such as grilled fish (*ikan bakar*), vegetable soups, *popiah basah*, *mihun* soup or *nasi campur* with balanced sides.

Ultimately, she stressed that Ramadan is not about compensating for daytime hunger with nighttime indulgence.

"Healthy fasting aligns with Islamic teachings, namely moderation, balance and gratitude. By being mindful of portion sizes, choosing nutrient-dense foods and staying hydrated, we could fast in a way that benefits body and soul."

# Cancer on rise among M'sians under 50

➤ Younger adults need to recognise early warning signs, move beyond belief that disease only affects elderly

**P**ERSISTENT fatigue is often written off as work stress. Unexplained weight loss is blamed on a hectic schedule. Unusual symptoms are ignored with the reassurance that youth offers protection. For many young Malaysians, this mindset has become routine.

Long working hours, demanding careers and the pressure to constantly perform mean health concerns are frequently deprioritised. Yet an emerging trend shows cancer is increasingly affecting individuals under 50. In 2024, the National Cancer Society Malaysia observed a worrying rise in cancer diagnoses among adults below this age group. While the majority of cases occur between 45 and 49, younger adults are not exempt.

Understanding that cancer does not discriminate by age is critical. Greater awareness and earlier action allow symptoms to be recognised at a stage when treatment is more effective and outcomes are significantly improved.

hustle culture and disrupted sleep cycles further compound the risks.

Among younger adults, gastrointestinal cancers, particularly colorectal cancer, are drawing increasing concern. Colorectal cancer has become one of the most frequently diagnosed early-onset cancers globally, prompting many countries to reassess screening guidelines and lower the recommended screening age.

There is also a growing incidence of gynaecological, urological, thyroid and head and neck cancers in younger populations.

Beyond environmental and lifestyle influences, genetics play a significant role. Some individuals carry inherited mutations such as BRCA1 and BRCA2, which are associated with breast and ovarian cancers, or Lynch syndrome, which increases the risk of colorectal and other cancers at a younger age.

Family history remains a key factor in assessing cancer risk among young adults. A strong pattern of cancer in the family, particularly when diagnoses occur at younger ages,

## Shifting lifestyles and rising risks

Malaysia's rapid modernisation has transformed society, but it has also introduced lifestyle patterns that may contribute to rising cancer rates among younger populations. Traditional diets centred on whole foods have gradually been replaced with ultra-processed options, red meat and sugar-sweetened beverages. Combined with sedentary habits, these changes create a foundation for metabolic dysfunction.

Malaysia also records one of the highest obesity rates in Asia. Excess body weight is associated with at least 13 types of cancer. Urban air pollution, workplace chemical exposure, chronic stress linked to

involve multiple relatives or affect related organs, may indicate an inherited predisposition.

Identifying hereditary risk enables tailored strategies including genetic counselling, earlier screening and in some cases preventive intervention.

## When symptoms should not be ignored

The issue is rarely a single symptom, but rather persistence and pattern. Any symptom lasting more than two to three weeks, worsening progressively or interfering with daily life warrants medical review.

Gastrointestinal symptoms in younger patients are often overlooked. Ongoing diarrhoea, constipation, changes in stool



From lifestyle shifts to genetic risk, early awareness, timely screening and informed vigilance empower young adults to take charge of their health.

consistency or rectal bleeding may be attributed to haemorrhoids, delaying further investigation for colorectal cancer.

Unexplained weight loss, prolonged fatigue or loss of appetite are frequently linked to stress or burnout. However, when these symptoms persist without clear cause, further evaluation is necessary.

For women, new breast lumps, skin dimpling, nipple inversion or unusual discharge are sometimes dismissed due to the misconception that breast cancer primarily affects older women.

Abnormal vaginal bleeding, including bleeding between periods or after intercourse, may also be normalised, delaying assessment for

gynaecological cancers.

Among men, testicular lumps or swelling may be ignored due to embarrassment or limited awareness, despite testicular cancer being one of the most common cancers in young men. Painless lumps in the neck, armpit or groin should also prompt attention, as persistent lymph node enlargement can signal lymphoma or other malignancies.

Malaysia's healthcare system offers access through public and private sectors, making early consultation achievable. Younger individuals should feel empowered to seek further evaluation when symptoms persist and request second opinions if concerns remain unresolved. Youth should never be a reason for symptoms to be dismissed.

## Screening, prevention and informed vigilance

Rising early-onset cancer rates are prompting renewed discussion about when screening should begin. For the general population under 30 to 40 years of age, routine screening is typically not required.

However, screening becomes highly relevant for those with strong family history, known hereditary syndromes or significant risk factors. In these cases, screening should be guided by risk rather than age alone.

For higher-risk individuals, tailored approaches may include earlier colonoscopy for colorectal cancer, breast ultrasound or MRI for women with significant family history of breast or ovarian cancer and liver surveillance for individuals with chronic hepatitis B or C infection.

Cervical cancer screening should begin at 21 for sexually active women, while HPV vaccination is most effective when administered between ages nine and 14. Men are encouraged to practise regular testicular self-examination given the prevalence of testicular cancer in

younger age groups.

Open discussions about family cancer history, including types of cancer and age at diagnosis, help healthcare providers assess individual risk and determine whether genetic counselling is appropriate.

Navigating health information can feel overwhelming. The goal is informed vigilance rather than fear. Focusing on controllable factors such as maintaining a healthy lifestyle, attending appropriate screenings and seeking medical advice for persistent symptoms allows young adults to remain proactive without becoming anxious.

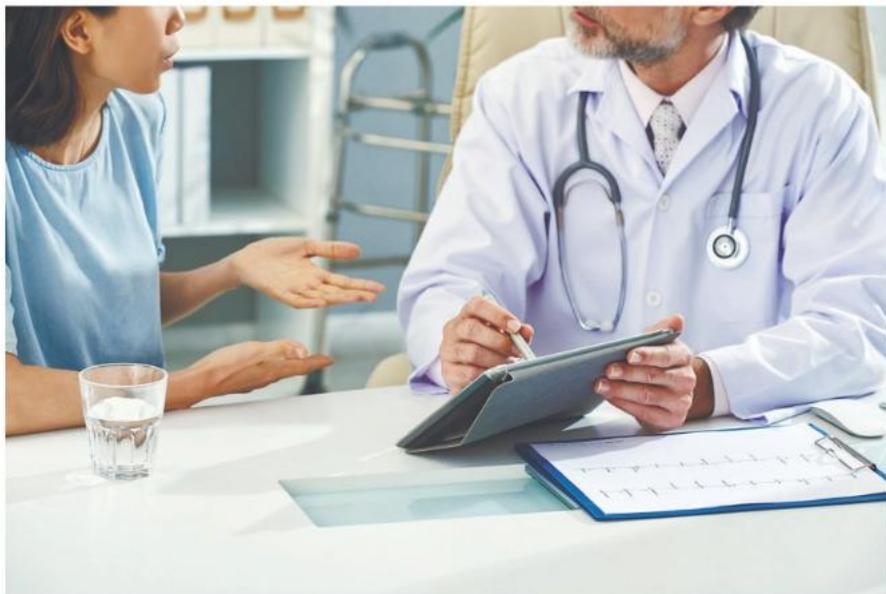
Although certain cancers are increasing in incidence among younger populations, the absolute risk remains relatively low.

## Your health, your responsibility

Cancer does not request identification before it develops. While risk increases with age, younger Malaysians are not immune. Rethinking assumptions about vulnerability is essential. Early detection significantly improves treatment outcomes, particularly for younger patients.

When identified at an early stage, treatment can be more targeted and effective, resulting in better long-term outcomes and fewer complications. For individuals balancing careers, young families and future aspirations, early evaluation provides clarity and reduces uncertainty.

Awareness, timely action and balanced living form the foundation of prevention. Cancer should not remain a taboo subject among young Malaysians. Early recognition is the first step towards better outcomes.



Cancer is rising among Malaysians under 50, challenging the belief that youth guarantees immunity.

*This article is contributed by Sunway Medical Centre Damansara consultant clinical oncologist Dr Nur Adila Mokhtar.*

# The rhythm of life

**T**HE steady beat of your heart is a sign of good health. But what happens when this pattern is disrupted?

It affects quality of life, leads to hospitalisation and even increases the risk of stroke and heart failure.

Atrial fibrillation is a condition in which the heart beats in an irregular rhythm.

Globally, around one per cent of those in any given population would be susceptible to the condition, says Northern Heart Hospital Penang cardiologist Dr Tuan Jiun Haur.



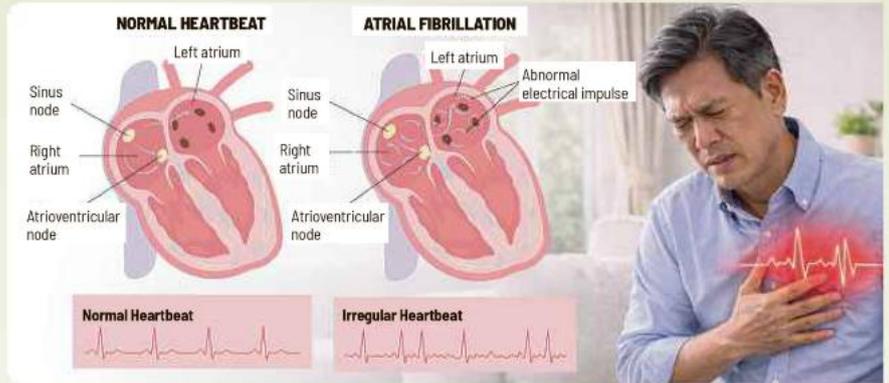
There is a spectrum in terms of presentation, with some patients experiencing symptoms, others only having mild symptoms and some none at all.

Dizziness, shortness of breath, lightheadedness, fatigue and chest pain are among the symptoms.

"Generally speaking, it's a condition that affects the elderly so age is a risk factor, but younger people are not immune to it because there are certain risk factors that will increase their risk of developing this irregular rhythm."

## RISKS AND TREATMENT

When the heart beats irregularly, blood



Atrial fibrillation is a condition in which the heart beats in an irregular rhythm. PICTURE CREDIT: CHATGPT

flow within the heart is not normal. It becomes sluggish and this increases the chances of a clot forming, explains Dr Tuan.

When this clot breaks off and travels to the blood vessels in the brain, it can block off blood supply to the brain, causing a stroke.

In some cases, atrial fibrillation may be picked up during a routine health screening, but in many instances, it goes undetected because patients may have no symptoms.

Atrial fibrillation is a type of arrhythmia, explains Dr Tuan. There are many different types, but it is the most common.

"It is different in the sense that it's more difficult to treat. It can be a long-standing or chronic condition that requires regular follow-up."

Treatment is not as simple as addressing the irregular heartbeat either because there are other risk factors

that have to be considered.

Treatment options include medication, pacemaker implantation or even ablation procedures.

However, treatment can be challenging as outcomes may not be as anticipated.

Furthermore, the patient's existing risk factors have to be managed while addressing the condition and these include pre-existing cardiac conditions, thyroid disease, obesity or kidney disease.

Medication is usually given to regulate the patient's heartbeat, as well as blood thinners to reduce the risk of a stroke.

But when medication is not effective or patients are unable to tolerate their medication for whatever reason, other treatment options need to

be considered.

With ablation, a catheter is inserted through a small incision in the groin and guided to the heart to eliminate the abnormal cardiac tissue which is causing the irregular heartbeat.

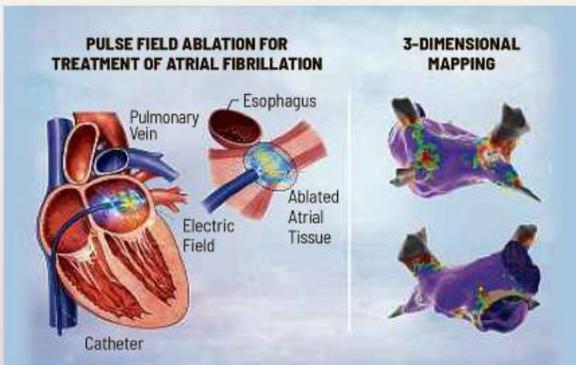
"These days we have advanced 3D mapping equipment and also new technologies, such as the pulsed field ablation technology that makes the way we plan and treat atrial fibrillation more effective."

Patients have a lot more options these days, but once interventions have been done, they have to make lifestyle changes.

These include maintaining a healthy diet, optimal weight management, regular exercise and cutting out alcohol.



Dr Tuan Jiun Haur. PICTURE CREDIT: NORTHERN HEART HOSPITAL PENANG



These days, new technologies enable doctors to better plan and treat atrial fibrillation. PICTURE CREDIT: CHATGPT

# Transforming Malaysia's nuclear medicine ecosystem

MALAYSIA'S nuclear medicine landscape is rapidly moving into the future with MyNuCLEaR, the Malaysian nuclear medicine care locator, education and resources website.

Spearheaded by the Malaysian Society of Nuclear Medicine and Molecular Imaging (MSNMMI), in collaboration with the Health Ministry, the website is an integrated platform that serves several essential functions.

Nuclear medicine, a specialised medical field, uses radioactive material in small, controlled doses to help detect and/or treat certain diseases, such as prostate cancer.

It is a strictly-regulated field that has been practised for more than 100 years, with ongoing research that paves the way for continuous improvements in how diseases are managed and how well patients can survive — and even thrive — on their patient journey.

MSNMMI president Dr Mahayuddin Abdul Manap says MyNuCLEaR is Malaysia's first fully integrated nuclear medicine resource platform, linking patients, specialists, healthcare providers and researchers across the country. Developed through a multi-agency

collaborative effort involving diverse expertise and industry support from Novartis Malaysia, the initiative aims to bridge knowledge gaps among patients and healthcare professionals.

"As a centralised repository of information, MyNuCLEaR facilitates streamlined access to nuclear medicine services, supporting timely, informed and coordinated patient care across the country," Mahayuddin says.

Nuclear medicine physician Associate Professor Dr Tan Teik Hin says there are many innovations in nuclear medicine today that enable earlier detection and more precise treatment, which can make a world of difference for patients.

"Take prostate cancer, for exam-

ple. The incidence is on the rise and is often detected at advanced stages.

"Recent advancements in nuclear medicine, known as theranostics, help doctors detect even small tumours and sites where the cancer has spread."

Treatment can also be focused directly on these tumours and metastatic lesions, which minimises the impact on healthy cells.

"Simply put, advanced nuclear medicine techniques like theranostics enable faster detection, more targeted treatment, fewer side effects and, ultimately, better survival outcomes and quality of life for patients."

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Supported by the Malaysian Communications and Multimedia Commission



Nuclear medicine uses radioactive material in small, controlled doses to help detect and/or treat certain diseases, such as prostate cancer. PICTURE CREDIT: NOVARTIS MALAYSIA

## Sibu health office intensifies hygiene checks at Ramadan bazaars

**SIBU:** The Sibu Divisional Health Office stepped up its enforcement during hygiene inspections at Ramadan bazaars here.

It said that out of 196 stalls inspected at Ramadan bazaars around Sibu, 43 compounds for improvement had been issued thus far.

"The compounds were issued for various offences, including not wearing proper personal protective equipment, (not getting) typhoid vaccination, and not attending food handler courses," it said.

It urged stall operators to ensure strict compliance with food hygiene standards to protect the public.

Meanwhile, Dataran Tun Tuanku Bujang Phase 2 Ramadan Bazaar coordinator Khalid Zaini, when contacted by The Borneo Post yesterday, expressed his satisfaction with the level of

cooperation shown by traders in maintaining food hygiene and cleanliness.

"Furthermore, personnel from the health office carry out constant monitoring and inspection at the bazaar.

"Complaints are tracked daily—there is a QR code available for customers and visitors to the bazaar to submit their complaints. For example, they can specify the stall number and type of food when lodging a complaint or raising a concern," he said.

Asked whether any complaints had been received so far, he revealed that "minor ones" had been lodged and stall operators were told to immediately rectify the faults.

For the record, the Dataran Tun Tuanku Bujang Phase 2 Ramadan Bazaar houses a total of 114 traders.