

# M'sian nurses staying put for now

## Saudi-based healthcare workers to remain, citing duty and trust in security

By RAGANANTHINI VETHASALAM  
raga@thestar.com.my

**PETALING JAYA:** For Malaysian nurses in Saudi Arabia, duty often comes first.

Many of them, when contacted, said they are staying put in the Middle East country for now.

"It is not easy to just leave like that, given that I am working here. The sense of duty is making me want to stay on," said a Malaysian nurse based in Riyadh, who only wanted to be known as Devi.

She admitted that it had crossed her mind to sign up with the Malaysian embassy in Riyadh for the evacuation exercise.

"But then I thought of holding it off for now," said Devi, 37, who

has been working at a specialists' centre in the kingdom for the past seven years.

She also acknowledged that there had been heightened alert after the strikes were intercepted.

Saudi Defence Ministry said yesterday that at least 15 drones had been intercepted and destroyed in the kingdom's airspace.

Reports have also emerged that drones had tried to attack the diplomatic quarter in Riyadh.

Prior to the conflict, there were an estimated 1,782 Malaysian nurses in Saudi Arabia.

Another nurse, who declined to be named, said the situation at her place remains much under

control. She is working at an armed forces hospital in Tabuk city near the Jordan-Saudi Arabia border.

"My place is not affected. Saudi is still safe," said the 34-year-old nurse who has been working there for the past five years.

As for 30-year-old Ain, who is based in Jeddah, she said she is taking a "wait-and-see" approach for now.

"I am confident that the Saudi government will do its best to protect us," she added.

Malaysian authorities are putting plans in place to evacuate Malaysians from Saudi Arabia.

The Consulate General of Malaysia in Jeddah announced that the registration for evacua-

tion of Malaysians in the Western province ended at 7am Saudi time yesterday.

The Malaysian embassy in Riyadh, meanwhile, has advised citizens working in Saudi Arabia to seek the green light from their employers before taking part in the evacuation.

"Malaysians working in Saudi Arabia and holding an 'Iqamah' (Resident ID) are advised to review the terms of their employment contract and obtain their employer's permission before deciding to participate in this evacuation," said a notice from the consulate.

The evacuation entails a one-way journey from Riyadh to Kuala Lumpur.

The embassy made clear that the welfare and safety of Malaysians were a priority.

"In this regard, the government has also decided to facilitate the return of Malaysians from Saudi Arabia on a voluntary basis," said.

The process will be carried out in stages. Priority is for Malaysians who are directly affected by security threats.

Those participating have been asked to ensure their passports are valid and their documentation, including exit/re-entry visas, are complete.

In the meantime, the consulate called for calm and to be attentive to any communications issued by them and the local authorities.

LATE at night in maternity wards across the country, paediatricians sometimes meet mothers who are still children themselves.

A frightened 16-year-old arrives in labour. She has never attended an antenatal clinic. She hid her pregnancy for months, afraid of how her family or community might react. By the time she reaches the hospital, both she and her baby may already be at risk.

This situation is more common than many realise. Recent data from the Health Ministry show that more than 41,000 pregnancies among girls aged 19 and below were recorded in government health facilities between 2020 and 2024.

Public discussion about teenage pregnancy often quickly becomes a debate about morality or culture. But from a paediatrician's perspective, the starting point is simpler. This is a health issue affecting two young lives: the adolescent and her baby.

Adolescents who become pregnant face higher risks of complications such as severe anaemia, infections, hypertensive disorders during pregnancy, and postpartum mental health problems. Their babies are more likely to be born prematurely or with low birth weight, conditions that can affect growth, development, and

## When children have children

long-term health.

Yet many of the dangers we see are not inevitable. They arise because pregnancy among teenagers often happens in silence. Fear of shame, punishment, or rejection can cause adolescents to delay seeking help. When care is delayed, complications that could have been prevented or treated early become far more dangerous.

As paediatricians, we worry not only about what happens in the delivery room but also about what follows. Teenage pregnancy frequently interrupts education, limits future opportunities, and places young families under significant economic and emotional strain. These pressures can affect both the young mother and the child she is trying to raise.

A society is often judged by how it treats its most vulnerable members. Adolescents facing an unplanned pregnancy are among the most vulnerable. They require guidance and care, not fear and isolation.

None of this suggests that responsibility lies with any single group. Adolescence is a complex stage of life, and young people today are growing up in a rapidly changing social and digital envi-

ronment. Many parents also feel uncertain about how to discuss sensitive topics such as relationships, consent, and reproductive health with their children.

Helping families have these conversations openly and confidently is therefore an important step.

Schools and communities also have a role in ensuring that young people receive accurate and responsible health education, rather than relying on unreliable information from social media or the Internet.

Healthcare services must also be approachable for adolescents. When young people are able to seek advice early, without fear of stigma or humiliation, doctors can help them make safer decisions and prevent serious health consequences.

Addressing teenage pregnancy does not mean abandoning cultural or moral values. On the contrary, many cultures and traditions emphasise responsibility, compassion, and care for the vulnerable. These values should guide how we respond when adolescents face difficult circumstances.

The question before us is not whether the issue exists. The sta-

tistics make the answer to that question clear. The real question is how we, as a society, choose to respond.

For paediatricians, the message is simple. When adolescents are supported with knowledge, guidance, and compassionate healthcare, both mother and child have a far better chance of thriving. But when stigma pushes young people into silence, preventable harm follows.

When a child becomes pregnant, two futures are at stake: the child's and the baby's. Protecting both should matter to all of us.

**DR ERWIN KHOO JIAYUAN**  
Head, Paediatrics  
Department  
IMU University  
Affiliate  
Center for Bioethics, Harvard  
Medical School, Harvard  
University

**DR INTAN JULIANA  
ABD HAMID**  
President, Malaysian  
Paediatric Association  
Universiti Sains Malaysia

**DR THIYAGAR NADARAJAW**  
Dean, Faculty of Medicine  
AIMST University

**D**URING the holy month of Ramadan, Malaysian Muslims observe a period of fasting, reflection and family togetherness. While the month encourages spiritual discipline and self-restraint, health experts remind the public that caring for physical well-being is just as important, particularly during long fasting hours.

Ramadan can also serve as a meaningful moment for Malaysians to pay closer attention to their health, especially conditions that often develop quietly without clear early symptoms.

The fasting month represents a time of renewal and reflection. However, the body must also be healthy enough to sustain prolonged fasting. Many individuals experience difficulties during Ramadan due to underlying medical conditions that have not yet been diagnosed. Simple health screenings conducted before or early in the fasting month can help people fast more safely and confidently.

**Fasting may reveal underlying health conditions**

Fasting introduces major changes to daily routines, including meal timing, sleeping patterns and energy intake. For healthy individuals, the body typically adapts well to these adjustments. However, those living with undiagnosed conditions such as diabetes, hypertension or early-stage kidney disease may place additional strain on their bodies during the fasting period.

The body processes energy differently during Ramadan. Long hours without food followed by a sudden intake of carbohydrates at *iftar* can sometimes expose underlying metabolic imbalances that might otherwise go unnoticed.

Symptoms such as severe fatigue, dizziness, excessive thirst or

# Healthier Ramadan starts with awareness about well-being

Simple checks, mindful habits can help Malaysians fast safely

difficulty concentrating are frequently dismissed as normal signs of hunger. In reality, these symptoms may indicate deeper health concerns that require medical attention and should not be ignored.

**Mindful eating beyond bazaar temptations**

Ramadan bazaars and festive meals remain a cherished part of the season. They offer a wide variety of traditional foods and drinks that bring families and communities together. While these culinary traditions create a joyful atmosphere, doctors encourage moderation and mindful food choices.

High-sugar beverages and deep-fried foods can lead to sudden spikes in blood sugar levels, placing additional pressure on organs such as the pancreas and kidneys. Rather than avoiding festive foods entirely, individuals are encouraged to focus on balance and sensible eating habits. Paying attention to food quality instead of quantity can make a meaningful difference.

Enjoying seasonal delicacies is still possible when moderation is



Simple health screenings such as blood pressure and HbA1c checks help Malaysians identify underlying conditions.

practised. Small adjustments such as drinking more water, controlling portion sizes and avoiding the habit of skipping *sahur* can help support overall health during the fasting period.

*Sahur*, the pre-dawn meal, should ideally include complex carbohydrates and fibre-rich foods. These provide a slower release of energy and help sustain stamina throughout the day, allowing individuals to fast more comfortably.

**Staying active during Ramadan**

Another common misconception during Ramadan is that physical activity should be avoided in order to conserve energy. In reality, light to moderate movement plays an important role in maintaining metabolic health.

The physical movements performed during *terawih* prayers already provide gentle exercise that supports digestion and joint mobility. Adding a short walk after *iftar* can further help the body regulate blood sugar levels and maintain overall fitness.

Such activities complement the spiritual aspects of Ramadan while encouraging a healthier lifestyle throughout the month.

**Preparing for Raya includes preparing your health**

As Hari Raya approaches, Malaysians often focus on preparing their homes, clothes and festive meals for the celebration. Health experts suggest that personal health preparation should also be part of these festive plans.

Waiting for symptoms to appear before seeking medical advice can be risky because by the time illness becomes noticeable the condition may already be advanced. Conducting a simple health screening at a local clinic or community pharmacy can provide valuable insight into a person's overall health status.

Basic tests such as HbA1c, blood pressure and kidney function checks offer a quick way to identify potential concerns early. These screenings are particularly important for individuals who may already be living with diabetes or other chronic conditions.

Individuals with existing medical conditions should also consult their doctors to determine whether fasting can be done safely. While fasting is an important religious obligation, certain groups may be advised not to fast if it could negatively affect their health. This may include individuals with renal impairment, those who

require multiple insulin injections or pregnant women.

Health screenings during Ramadan also support broader public health efforts to address non-communicable diseases in Malaysia. A significant portion of the population remains unaware that they are living with chronic conditions such as diabetes or hypertension, which can progress silently over time.

**Healthier Ramadan today and beyond**

At its core, Ramadan encourages discipline, reflection and the preservation of life. By balancing spiritual devotion with proactive health awareness, Malaysians can experience the fasting month in a way that supports body and faith.

Early screening and mindful eating habits help ensure that individuals are not simply completing the fast but also protecting their long-term well-being. These small but meaningful steps can allow families to celebrate Aidilfitri in good health and continue enjoying many more Ramadans together in the years to come.

*This article is contributed by consultant endocrinologist Datuk Dr Malik Mumtaz.*



Light to moderate movement plays an important role in maintaining metabolic health. - PICS FROM 123RF

## Protein study sheds light on faster Alzheimer's progression in women

**NEW** findings could help explain why Alzheimer's dementia often progresses faster in women and may lead to fresh avenues of research and future treatments, researchers said.

Alzheimer's disease is marked by abnormal amounts of tau protein in the brain that disrupt communication between brain cells and contribute to cognitive decline.

Some patients also have abnormal

clumping of a protein associated with Parkinson's disease called alpha-synuclein.

Among patients with Alzheimer's disease and elevated brain levels of both proteins, brain changes occurred up to 20 times faster in women than in men, suggesting that alpha-synuclein may drive faster dementia progression in women, Mayo Clinic researchers reported in *Jama*

Network Open.

"When we see disease-related changes unfolding at dramatically different rates, we cannot keep approaching Alzheimer's as though it behaves exactly the same way in everyone," study senior author Dr Kejal Kantarci said in a statement.

The researchers studied 415 volunteers with Alzheimer's disease who agreed to have their brain

changes tracked over time with cerebrospinal fluid testing to detect abnormal alpha-synuclein and imaging to measure changes in tau accumulation.

About 17% of participants showed evidence of abnormal alpha-synuclein.

"Recognising these sex-specific differences could help us design more targeted clinical trials and ultimately

more personalised treatment strategies," Kantarci said.

Study leader Dr Elijah Mak said in a statement: "This opens an entirely new direction for understanding why women bear a disproportionate burden of dementia.

"If we can unravel the mechanisms behind this vulnerability, we may uncover targets we haven't considered before." - Reuters

# Tubuh jawatankuasa siasat kematian doktor pelatih

Orang ramai diminta tak buat spekulasi boleh jejakkan keluarga mangsa

Oleh Nor Fazlina Abdul Rahim  
nfazlina@nstp.com.my

**Kota Bharu:** Jabatan Kesihatan Negeri Kelantan (JKNK) menuhkan jawatankuasa siasatan bagi meneliti secara menyeluruh kes kematian doktor pelatih wanita asrama Hospital Sultan Is-

mail Petra (HSIP) Kuala Krai, kelmarin.

Pengarahnya, Datuk Dr Mohd Azman Yacob, berkata jawatankuasa berkenaan akan menyiasat dan meneliti kes berkenaan secara mendalam bagi mengenal pasti punca kejadian, termasuk dari aspek tekanan tempat kerja dan faktor penyumbang lain.

## Ziarah keluarga mangsa

"Kita berdukacita dengan kejadian yang berlaku dan saya ada menziarah keluarga mangsa pagi tadi (semalam).

"Mangsa adalah doktor pelatih wanita dari Universiti Monsoura, Mesir dan sedang menjalani praktikal di HSIP.

"Kita akan menjalankan sia-

satan secara holistik dan berharap orang ramai tidak membuat sebarang spekulasi yang boleh menjejaskan keluarga mangsa," katanya ketika dihubungi, semalam.

Kelmarin, seorang doktor pelatih wanita berusia 29 tahun ditemukan meninggal dunia di sebuah bilik asrama HSIP Kuala Krai.

Ketua Polis Daerah Kuala Krai, Superintendan Mazlan Mamat, dilaporkan berkata, maklumat kejadian diterima daripada pihak hospital pada jam 9.55 pagi.

Katanya, siasatan awal mendapati kejadian berlaku di sebuah bilik asrama HSIP Kuala Krai dan mangsa ditemui dalam keadaan sudah tidak bernyawa.

Mangsa adalah doktor pelatih wanita dari Universiti Monsoura, Mesir dan sedang menjalani praktikal di HSIP

Azman Yacob,  
Pegawai  
Jabatan  
Kesihatan  
Negeri Kelantan



## SENARAI KES BUNUH DIRI AKIBAT TEKANAN

• Seorang doktor ditemui mati di rumahnya di Lahad Datu, Sabah, pada Ogos 2024 didakwa disebabkan tindakan bunuh diri berikutan tidak tahan dibuli oleh ketua jabatannya

• Tekanan perasaan disyaki menjadi punca seorang remaja cuba membunuh diri dengan terjun dari jejambat di Kilometer 46 Lebuhraya Kuala Lumpur-Karak Berjaya Hills Bukit Tinggi, Bentong, Pahang, pada Mac 2021

• Seorang jurutera disyaki membunuh diri dengan terjun dari sebuah kondominium di Bandar Kinrara, Serdang, Selangor pada Ogos 2020 akibat tekanan dialami selepas diberhentikan kerja

• Seorang pelajar lelaki 16 tahun di Bukit Mertajam, Pulau Pinang bunuh diri akibat tekanan di sekolah pada Februari 2020

• Akibat tekanan hidup dan tiada pekerjaan, lelaki berusia 32 tahun sanggup menkam dirinya sendiri di Taman Delima, Sungai Petani, Kedah pada Mac 2019