

AKHBAR : BERITA HARIAN

MUKA SURAT : 8

RUANGAN : NASIONAL

BH M/s NASIONAL 25/3/2025 (SELASA)
Sidang Dewan Negara

Mentaliti 'YOLO' dorong cuba perkara baharu

Trend hubungan sejenis generasi muda berpotensi tingkat jangkitan HIV

Kuala Lumpur: Mentaliti *you only live once* atau YOLO dalam kalangan generasi muda mungkin mendorong mereka mencuba perkara baharu, termasuk hubungan sejenis, yang berpotensi menyumbang kepada peningkatan jangkitan HIV dalam kalangan lelaki berusia 20 hingga 39 tahun.

Timbalan Menteri Kesihatan, Datuk Lukanisman Awang Sauni, berkata trend peningkatan itu semakin membimbangkan.

"Mereka ini terdedah kepada trend global yang menggalakkan dan memberi gambaran gaya hidup ini adalah sesuatu yang normal. Ini adalah isu generasi.

"Keberanian mencuba sesuatu, termasuk antun seksual dilakukan individu yang ingin melakukan satu kegiatan di luar tabii sehingga mereka lupa kesannya," katanya pada sesi soal jawab di Dewan Negara, semalam.

Beliau menjawab soalan tambahan Senator Dr Lingeshwaran R Arunasalam mengenai faktor menjadikan hubungan seks antara lelaki dengan lelaki lebih berisiko tinggi dijangkiti HIV dan sama ada terdapat program

kesedaran secara agresif oleh Kementerian Kesihatan (KKM) untuk mengurangkan stigma, terutama terhadap golongan lelaki muda.

Lukanisman berkata, berdasarkan data surveilan daripada National AIDS Registry (NAR) pada 2024, sebanyak 90 peratus kes HIV adalah lelaki dan 75 peratus membabitkan golongan belia dalam kumpulan umur 20 hingga 39 tahun.

Jangkitan berkurangan

Katanya, bilangan jangkitan HIV baharu di Malaysia berkurangan daripada 6,978 kes dengan kadar notifikasi 28.5 bagi 100,000 penduduk pada 2002 kepada 3,185 kes dengan kadar notifikasi 9.4 bagi 100,000 penduduk tahun lalu.

Pada 2024, sebanyak 52 peratus kes HIV yang dilaporkan membabitkan kaum Melayu diikuti Cina (14 peratus).

"Bumiputera Sabah menunjukkan kadar spesifik etnik yang tinggi, iaitu 14.2 peratus bagi setiap 100,000 penduduk bumi Sabah, diikuti Bumiputera Sarawak 14.0 peratus bagi setiap 100,000 penduduk dan bangsa India iaitu 12.1 peratus bagi setiap 100,000 penduduk berbangsa India.

"Negeri yang mencatatkan jumlah kes HIV baharu tertinggi adalah Selangor sebanyak 1,085 kes atau 34.1 peratus, diikuti Wilayah Kuala Lumpur dan Putrajaya sebanyak 365 kes atau 11.4 peratus dan Sabah sebanyak 344 kes atau 10.8.

Sementara itu, bagi mengekang penularan gejala tidak



Lukanisman pada sesi soal jawab di Dewan Negara, semalam.

(Foto BERNAMA)

sihat itu KKM melaksanakan program pencegahan HIV, Pre-Exposure Prophylaxis (PrEP) yang mampu menghalang jangkitan secara seksual sebanyak 99 peratus.

"Namun, ada tentangan terhadap pendekatan PrEP daripada beberapa kelompok walaupun secara teknikalnya itu adalah penyelesaian yang terbaik buat semasa ini," katanya.

Beliau yang juga Pengerusi Jawatankuasa Penyelarasan Mekanisme, berkata jawatanku-

asa berkenaan menghimpunkan golongan terbabit dengan gejala tidak sihat itu, selain membatikan badan-badan keagamaan untuk menasihati serta menderang perkembangan semasa gaya hidup yang bertentangan dengan masyarakat masa ini.

Pada masa sama, beliau menekankan peranan aplikasi media sosial memudahkan perhubungan antara individu berisiko tinggi tanpa mekanisme kawalan yang efektif untuk membendung perkara itu. BERNAMA

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 1
RUANGAN : MUKA DEPAN

UTUSAN MALAYSIA MUKA DEPAN 25/3/2025 (SELASA)

Satu pakar rawat 277 pesakit

Oleh ARIF AIMAN ASROL
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PETALING JAYA: Malaysia ber-
depan kekurangan fasiliti dan
pakar kanser atau onkologi yang
serius terutamanya di hospital kera-
jaan yang dikhuatiri tidak mam-
pu menampung pertambahan
pesakit.
Senario ini dibimbangi me-
nyebabkan pesakit tidak dapat
dirawat dengan segera sekali
gus meningkatkan kadar kema-
tian.

Krisis rawatan
kanser di
Malaysia

Kes dijangka
meningkat
pada 2040

Berdasarkan laporan Ke-
menterian Kesihatan, ketika ini
hanya ada 175 pakar onkologi di

seluruh negara.
Manakala jumlah pesakit di-
rekodkan adalah 48,639 orang
dengan nisbah seorang doktor
merawat 277 pesakit.
Institut Kanser Negara (IKN)
meramalkan jumlah pesakit
kanser akan meningkat dua kali
ganda menjelang 2040 berbanding
jumlah yang direkodkan
pada 2020 iaitu 48,639 kes.
Ini menandakan satu dari-
pada setiap 10 individu di Ma-
laysia akan menerima diagnosis
kanser sepanjang hayat mereka.
Daripada segi jumlah pusat

rawatan, Malaysia hanya mem-
punyai sembilan kemudahan
rawatan kanser di bawah Ke-
menterian Kesihatan antaranya
IKN Putrajaya, Hospital Kuala
Lumpur dan Hospital Pulau
Pinang serta Hospital Wanita
dan Kanak-Kanak Sabah.
Pakar Kesihatan Komuniti
Universiti Kebangsaan Malay-
sia (UKM), Prof Dr. Sharifa Ezat
Wan Puteh berkata, kapasiti pa-
kar onkologi dan pusat rawatan
tidak mampu menampung per-
mintaan yang kian meningkat.
Kátanya, lebih membim-

bangkan apabila pesakit perlu
menunggu giliran lebih lama
untuk mendapatkan temu janji
dan rawatan sekali gus berisiko
mengurangkan peluang untuk
sembuh.
“Fasiliti untuk merawat dan
menyaring pesakit kanser di
Malaysia masih dalam kea-
daan yang belum memuaskan.
Apatah lagi, pakar kanser tidak
cukup menampung bilangan
pesakit semakin meningkat.”

Bersambung di muka 3

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 3
RUANGAN : DALAM NEGERI

UTUSAN MALAYSIA M/S 3 D/NEGERI 25/3/2025 (SELASA)

Satu pakar rawat 277 pesakit

Dari muka 1

"Kita ada beberapa hospital kerajaan yang menawarkan rawatan, tetapi jumlahnya sangat tidak mencukupi," katanya ketika dihubungi *Utusan Malaysia*.

Sebelum ini, IKN meramalkan jumlah pesakit kanser akan meningkat dua kali ganda menjelang 2040 daripada jumlah kes yang direkodkan pada 2020 iaitu 48,639 kes.

Institut tersebut turut mendedahkan bahawa terdapat lima penyakit kanser yang sering menyerang rakyat Malaysia iaitu payudara, kolorektal atau kolon, paru-paru, nasofarinks atau kepala dan leher serta hati.

Dalam pada itu, Dr. Sharifah

Ezat berkata, keadaan itu menyebabkan ramai pesakit terpaksa melakukan perjalanan jauh untuk mendapatkan rawatan dan menunggu lama untuk temujanji serta lebih menyedihkan, ada yang tidak sempat mendapatkan rawatan kerana keadaan sudah terlalu kritikal.

"Ini berlaku kerana hospital kerajaan semakin kekurangan tenaga pakar, menjadikan tempoh menunggu untuk rawatan semakin lama dan risiko pesakit kehilangan nyawa semakin meningkat.

"Kelewatan rawatan boleh menyebabkan kanser merebak dan bertambah teruk. Ada pesakit yang pada asalnya mempunyai peluang sembuh, tetapi kerana sistem yang lambat dan tidak efisien, mereka akhirnya

tidak lagi mempunyai harapan untuk pulih," katanya.

Menurut Dr. Sharifah, kerajaan perlu segera memperbanyakkan pusat rawatan kanser serta melatih lebih ramai pakar bagi menangani krisis ini.

"Kita tidak boleh lagi berlen-gah. Kita perlu menambah fasiliti rawatan, meningkatkan jumlah pakar, dan memastikan semua rakyat mendapat akses kepada rawatan yang berkualiti tanpa perlu menunggu terlalu lama.

"Selain itu, kesedaran mengenai kepentingan saringan awal juga perlu diperluaskan agar lebih ramai pesakit dapat dikesan lebih awal sebelum pesakit mereka menjadi terlalu parah," katanya.

Mengikut data dikeluarkan Kementerian Kesihatan, golo-

ngan lelaki sering diserang pesakit kanser paru-paru iaitu 17 peratus manakala perempuan pula sering menghidap kanser payudara dengan 32.9 peratus daripada keseluruhan kes.

Mengambil dua kanser tersebut sebagai contoh, sekiranya kanser paru-paru dikesan awal iaitu pada tahap 1 maka peratusan untuk pesakit hidup adalah 37.1 peratus tetapi sekiranya lewat dikesan iaitu pada tahap 4, pesakit hanya mempunyai peluang serendah 6.3 peratus.

Bagi kanser payudara pula, pesakit mempunyai peluang yang sangat tinggi sekiranya dikesan pada tahap 1 iaitu 87.5 peratus tetapi jika dikesan pada tahap 4, peratusan untuk ke-langsungan mereka menurun kepada 23.3 peratus.

AKHBAR : UTUSAN MALAYSIA
MUKA SURAT : 6
RUANGAN : DALAM NEGERI

UTUSAN MALAYSIA M/S 6 01 NEGERI 25/3/2025 (SELASA)

Sistem e-penempatan KKM tidak telus

PETALING JAYA: Tiada tindakan serius diambil oleh Kementerian Kesihatan (KKM) sehingga kini untuk menilai semula sistem penempatan elektronik atau e-penempatan meskipun aduan mengenai isu tersebut telah lama disuarakan.

Jurucakap Hartal Doktor Kontrak berkata, perkara itu menimbulkan kekecewaan dalam kalangan doktor muda kerana sistem penempatan yang digunakan ketika ini didakwa tidak telus serta berpotensi menimbulkan pelbagai masalah teknikal.

Katanya, sistem yang pada asalnya bertujuan memudahkan proses penempatan kini menjadi punca kekeliruan dan tekanan emosi dalam kalangan pegawai perubatan.

“Malah, situasi tersebut men-

jadi lebih membebankan apabila penempatan dilakukan tanpa mengambil kira keadaan keluarga, tahap kesihatan serta keperluan logistik para doktor.

“Sejujurnya, tiada maklum balas yang jelas. Dalam sidang media baru-baru ini pun, langsung tiada rasa kesal atau tanggungjawab daripada pihak atasan.

“Kelemahan sistem ini bukan sahaja menjejaskan proses penempatan doktor, malah turut memberi kesan kepada kehidupan peribadi dan kesejahteraan mental mereka yang terlibat,” katanya kepada *Utusan Malaysia*.

Baru-baru ini, akhbar ini melaporkan bahawa kumpulan Hartal Doktor Kontrak mendesak KKM agar segera membaiki sistem e-placement bagi mengelakkan kekeliruan berulang yang

membebankan pegawai kesihatan.

Menurutnya, masalah teknikal yang berlaku menyebabkan ramai pegawai terpaksa mengambil cuti dan menanggung kerugian akibat tempahan awal pengiraan serta pengangkutan.

Sementara itu, beliau berkata, pelaksanaan sistem e-penempatan sering menjadi rungutan kerana ada doktor yang dipindahkan ke hospital yang terlalu jauh tanpa mengambil kira keperluan dan situasi peribadi mereka.

“Antara masalah utama ialah sistem sering *crash*, menyebabkan proses pemilihan hospital terganggu.

“Malah, ada juga doktor yang sudah membuat pilihan, tetapi apabila menyemak semula, nama hospital itu hilang dari sistem

dan mereka terpaksa memilih semula hospital lain,” katanya.

Beliau berkata, pemilihan berdasarkan konsep ‘siapa cepat dia dapat’ secara tidak langsung memberi kelebihan kepada mereka yang mempunyai capaian internet laju berbanding individu yang berada di kawasan dengan liputan internet lemah.

“Sebagai contoh, seorang doktor yang sudah berkahwin, mempunyai dua anak dan menjaga ibu bapa uzur sepatutnya diberi keutamaan untuk ditempatkan berhampiran keluarga. Namun, situasi ini langsung tidak diambil kira.

“Ini menimbulkan persoalan tentang ketelusan sistem penempatan yang seolah-olah tidak mengambil kira faktor kemanusiaan,” katanya lagi.

AKHBAR : THE STAR
MUKA SURAT : 7
RUANGAN : NATION

THE STAR M/S 7 NATION 25/8/2025 (SELASA)

90,000 pupils facing stunted growth

Figure derived from a study of those aged 10 to 12, Education Ministry says

By RAGANANTHINI VETHASALAM
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PETALING JAYA: More than 90,000 pupils aged between 10 and 12 suffered from stunted growth last year, says the Education Ministry.

The ministry said this was based on the National Physical Fitness Standard and Body Mass Index analysis that the Health Ministry had conducted on 1,346,095 pupils within that age group in 2024.

Of the figure, 91,536 were in the stunted category.

"The Education Ministry receives students from age five and above at its schools and some already had stunting problems even before they started school.

"Stunting stems from the lack of nutrition in the first 1,000 days starting from pregnancy up to the time when the child is two years old," the ministry said in a recent Dewan Negara written reply.

It said the Education and Health

Ministries have always been working closely to find a solution for the problem among students.

"Among the actions taken by the Education Ministry are nutrition education activities such as creating awareness and educating students on full nutrition through the healthy eating campaign.

"Aside from that, the Supplementary Food Programme also helps in the preparation of additional food for primary school pupils to improve their condition and physical health as well as dietary habits," it said.

It added that through the programme, students would get to enjoy a balanced and nutritious diet.

Both the Education and Health Ministries have come up with 20 selected menus whereby each item provides between 428 and 545 calories, which will meet the daily nutritional needs of primary school pupils.

"From 2021, this programme was improved with the distribu-

tion of milk daily to ensure that recipients receive enough nutrients from dairy sources," the Education Ministry said.

It hoped that all parties, including parents, would help students suffering from stunted growth.

The ministry was responding to a question by Senator Dr Wan Martina Wan Yusoff who had asked for statistics of such cases according to states and whether there was a specific nutritional programme to address the issue.

In February, Health Minister Datuk Seri Dr Dzulkefly Ahmad said the ministry was aiming to reduce the prevalence of stunted growth among children under five to 14.2% by 2030.

This was after the National Health and Morbidity Survey showed that 21.2% of children in the country experienced stunted growth in 2022.

"This marks a significant increase from 16.6% in 2011, and we continue to see a rise in this growth disorder, which leads to stunting," he said.

What is stunted growth among kids?

■ It is when a child's height and growth do not match the typical height or growth for kids in their age group.

■ Caused usually by poor nutrition, repeated infection or inadequate psychosocial stimulation.



■ Can lead to cognitive and weak educational performance.

■ Increased risk of excessive weight gain later in childhood and nutrition-related chronic diseases.

■ Affects 1 in 5 children in Malaysia.



How to measure for stunted growth?

■ The kid's height or weight-for-age is more than two standard deviations below the World Health Organisation's Child Growth Standards median.

Source: Health Ministry

The Star graphics

AKHBAR : THE STAR
MUKA SURAT : 14
RUANGAN : VIEWS

A pseudonym may be included.

THE STAR M/S 14 VIEWS 25/3/2025 (SELASA)

Work together to fight TB

THE theme for World Tuberculosis Day 2025, which is marked on March 24 annually, is "United to End Tuberculosis", emphasising the importance of global collaboration to eradicate TB as a public health problem.

Although TB is preventable and treatable, the disease kills millions annually.

TB, an infectious disease caused by the bacterium *Mycobacterium tuberculosis*, spreads through the air when an infected individual coughs, sneezes, or speaks.

The disease has several characteristics that need to be closely monitored to ensure accurate diagnosis and treatment.

First, TB symptoms are often non-specific and can be mistaken for common illnesses such as the flu or a regular cough.

The main symptoms include a persistent cough lasting more than two weeks, prolonged fever, night sweats, unexplained weight loss, and extreme fatigue.

A cough accompanied by blood or bloody sputum is a more serious sign and requires immediate attention.

Additionally, TB can also affect organs other than the lungs, such as the bones, joints, kidneys, and brain, which can cause different symptoms depending on the affected organ.

Treating TB requires a high level of commitment from the patient and continuous support from medical professionals.



Photo: AFP

Psychological support and close health monitoring are also necessary to help patients through the long and challenging treatment period.

TB is often treated with a course of many antibiotics in a single medication combination taken for six to nine months.

Commonly-used antibiotics include isoniazid, rifampicin, pyrazinamide, and ethambutol.

It is essential for patients to take their medication consistently and according to the prescribed schedule to avoid drug resistance and ensure the effective-

tiveness of the treatment.

The Directly Observed Treatment, Short-Course (DOTS) approach – where medical professionals or trained volunteers watch and make sure patients take their medicine as directed – is often used to ensure patients take their medication as directed.

In cases of multidrug-resistant TB (MDR-TB), treatment may be longer and involve stronger medications with more severe side effects.

The complications of untreated or inadequately managed TB consist of lung damage, respira-

tory failure, pleurisy, spinal TB, meningitis, kidney or liver dysfunction, infertility, TB pericarditis, multorgan failure, and death.

Even though TB is a curable disease, challenges remain, particularly delays in diagnosis, non-adherence to treatment regimes, and MDR-TB.

In Malaysia, TB cases have increased from 25,391 in 2022 to 26,781 in 2023. Reported new cases worldwide were 10.6 million in 2022, with 1.3 million deaths. These figures highlight the urgent need to increase awareness about TB to ensure prompt treatment can be initiated for those infected.

The goals of World Tuberculosis Day 2025 highlight several key aspects:

First, to raise awareness through treatment promotion, early diagnosis encouragement, and stigma reduction. Programmes for community education can help people identify symptoms and get help right away.

Second, to achieve universal healthcare by guaranteeing fair TB prevention and treatment, especially for marginalised populations. Reducing gaps in TB care and improving treatment results are possible when social determinants of health are addressed.

Investing in innovations is third. Ending TB requires the development of improved diagnostic instruments, vaccinations, and shortened treatment plans.

Technological innovations that promise to improve healthcare access and accuracy include using artificial intelligence in TB diagnosis.

Fourth, to pool resources and knowledge, cooperation with partnerships among governments, NGOs, and international institutions such as the World Health Organisation is crucial.

The WHO's End TB Strategy acts as a guide for accomplishing global TB eradication objectives.

We must work together to fight TB by educating our communities about how to prevent it, by taking part in local screening and awareness programmes, and by supporting organisations that are in the forefront of TB prevention and treatment initiatives.

In Malaysia, TB prevention promotes social justice, economic stability, and better health.

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AKHBAR : THE SUN
MUKA SURAT : 12
RUANGAN : HEALTH

THE SUN M/S 12 HEALTH 25/3/2025 (SELASA)

Being overweight damages kidneys

► Younger Malaysians at risk of disease due to lifestyle choices

FOOD is central to life in Malaysia, from *nasi lemak* to late-night *teh tarik*. However, a health crisis looms over this vibrant culinary culture.

The National Health and Morbidity Survey (NHMS) 2023 reported 54.4% of Malaysians are overweight or obese, with over two million affected by noncommunicable diseases (NCDs) such as diabetes and hypertension. Studies have showed obesity increases the risk of developing low eGFR and albuminuria, which are features of chronic kidney disease.

In Malaysia, 56% of new dialysis cases arise from diabetes, followed by hypertension at 30%, according to the Malaysian Dialysis and Transplant Registry 2023, highlighting a concerning health concern of kidney disease.

Obesity does not just lead to diabetes or high blood pressure — it independently damages the kidneys, even in people without those conditions. The kidneys are the body's natural filters, removing waste and excess fluids, regulating blood pressure and balancing electrolytes to keep everything running smoothly. However, these finely tuned organs can be overwhelmed by excess weight.

Damage may be permanent

Obesity poses risks beyond diabetes and hypertension — it silently damages kidneys, often with devastating consequences. Obesity can strain the kidneys through

chronic inflammation, oxidative stress, increased blood pressure and insulin resistance. These effects can lead to protein leakage in the urine, an early sign of kidney damage.

Obesity can increase the risk of chronic kidney disease (CKD) and accelerate its progression. When the kidneys are under constant stress, they fail faster.

For those already struggling with obesity, kidney disease can remain undetected for years. By the time symptoms appear, such as swelling or fatigue, it is usually too late to reverse the damage.

Young Malaysians at risk of early kidney damage

Younger Malaysians are increasingly affected by obesity-related kidney damage. The NHMS 2023 study also showed 84% of adults aged 18-24 do not know that they have diabetes.

If you are obese since childhood or in your teens, the negative impact of obesity to your kidneys can start from then and may already be facing with CKD when you are in your 30s-40s. This early onset of kidney disease disrupts the most productive years of life and places significant strain on the families, the healthcare system and the nation. However, two in five adults aged 18-24 have not undergone health screening in the past 12 months.

Advanced CKD (stages four and five) often leads to complications such as limited physical activities, affecting one's mental health and reduced quality of life. Living with damaged kidneys is a daily challenge. It is not just about surviving — it is about losing the ability to enjoy life fully.

Unhealthy habits fuelling obesity

The concerning rise in obesity rates in Malaysia can be traced back to major



As more young Malaysians face obesity-related kidney disease, early prevention through lifestyle changes and regular screenings is crucial.

changes in dietary habits and lifestyle choices.

Once rich in fibre and wholesome ingredients, traditional diets have increasingly been replaced by a greater dependence on processed foods and sugary drinks.

This change also coincides with a decline in physical activity, as many children and adults have adopted more sedentary lifestyles.

Kids used to play outside — football, cycling, running around. Now, screens dominate their lives and adults are less active, spending hours in front of computer or TV.

Malaysia's round-the-clock food culture is also a contributing factor to the issue. Food is available 24/7. If you are tempted to eat at midnight, you can find a meal and young adults are working long hours where convenience trumps nutrition when it comes to food.

Fighting obesity and kidney damage

Early action against obesity can help prevent kidney disease — the earlier, the better. Healthy eating habits and lifestyle must start early.

Families must focus on balanced diets and encouraging kids to stay active from a young age. For those already dealing with obesity, small, consistent changes can protect kidney health.

Swapping processed foods for fibre-rich options, reducing sugar and staying active are essential. Cutting back on sugar is not an overnight fix. Your taste buds need time to adjust, but you will crave less sweetness over time.

While obesity's link to diabetes and hypertension is well-known, its impact on other aspects of kidney health is not. Obesity has been associated with increased risk of

kidney stones and increased risk of developing various types of cancer including kidney cancer. Regular health screenings are important, as kidney function and urine protein tests can detect problems early, especially for those who are overweight or diabetic. By addressing obesity and prioritising kidney health, Malaysians can build stronger, healthier futures.

Obesity is not just about weight — it is about what it does to your organs, especially your kidneys. Your kidneys work 24/7, and it is time we gave them the care and attention they deserve.

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