



YOUR OPINION

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Winning war against sugar

MALAYSIA announced a new Nutri-Grade labelling system alongside an advertising ban on sweet beverages, outlining these measures as bold steps in the fight against rising obesity and diabetes in line with the country's 'war on sugar' campaign.

This new Nutri-Grade label would implement a multi-grading system, labelling drinks with letter grades "A-D" based on their sugar content, guiding consumers towards healthier purchasing habits.

In turn, beverages which are graded "D" (more than 10g of sugar per 100ml) will be banned from advertising, restricting their sugary influence on the market. This is a welcome start.

Malaysian adults consume 43g of sugar daily, nearly double the World Health Organization's (WHO) stricter recommendation of 25g.

Among adolescents, the figure is a staggering 57g. Overall, the country consumes the most sugar in Asean, averaging 57kg annually (including industrial use).

This excess has fuelled a public health crisis. WHO data suggests that approximately one in every five Malaysians is living with obesity and diabetes mellitus, placing us second in obesity and first in diabetes across Asean.

Managing a population burdened by preventable illness is already a struggle of its own,

straining public healthcare systems, raising costs to taxpayers, and increasing cost pressures for families.

The economic toll is larger still; non-communicable diseases are estimated to drain RM64bil from the economy in 2021, more than double the Health Ministry's entire annual budget for that same year.

This sugar problem has long been recognised. Malaysia has already attempted two key policy responses: the Healthier Choice Logo in 2017 and the Sugar-Sweetened Beverage (SSB) Tax in 2019.

The Healthier Choice Logo uses a label to signal consumers to make healthier purchasing decisions, while the latter aims to reduce consumption through cost, discouraging the purchase of high-sugar drinks while simultaneously incentivising reformulation towards a lower sugar product.

However, Malaysia's current approach has yet to turn the tide on the unyielding "war" against sugar.

The Healthier Choice Logo's 5g/100ml criteria and binary labelling system allowed carbonated drinks to be labelled as a 'healthier' choice.

Similarly, the SSB Tax failed to affect meaningful change. A volumetric tax pushes weak price signals, alongside readily tax-free

substitutes like stall beverages, preventing the policy's overall goal to shift the demand of an already relatively inelastic good.

Furthermore, manufacturers which were quick to reformulate ensure products fall below the tax threshold.

Not only does this remove the already minimal tax hike, but it also renders future tax rate revisions redundant, exposing the feature as a potential policy loophole.

Beyond that, Malaysia also continues to subsidise refined sugar, spending RM500-600mil per year to keep retail prices low, while zero-rating it under the newly revised Sales and Service Tax.

If Malaysia is serious about a "war" on sugar, then this is akin to supplying ammunition to the enemy.

This brings us to the newly announced Nutri-Grade system. Will it do what earlier measures could not? While it does address some issues with the Healthier Choice Logo's simplistic binary criterion, it raises questions about whether it goes far enough to change behaviour at scale.

As it focuses solely on sugar content, the measure fails to account for the wider nutritional value of a drink.

For instance, the absence of beneficial nutrients, the presence of artificial additives with questionable health effects, and the

nutritional void that defines these reformulated products.

Additionally, the advertising ban, while welcome, covers very little ground. Popular drinks currently advertised, with most already labelled with the HCL, all sit comfortably below the 10g sugar threshold and are exempt anyway.

While these new measures represent a promising start, more could be done.

Policymakers should consider an upfront strategy to phase out sugar subsidies over multiple years and transition to an absolute sugar-based tax that captures actual health harms.

Complementing this with behavioural policies such as a more nutritionally rigorous multi-dimensional grading system like Nutri-Score, advertising restrictions aligned with Asean's 2024 minimum standards, and standardising reduced-sugar levels in prepared drinks at stalls and restaurants would also assist in curbing sugar intake on a broader scale.

After all, addressing fundamental contradictions and gaps in Malaysia's sugar policy is how we can turn a 'war on sugar' from rhetoric into real health gains.

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Timely action critical for stroke

EVERY second counts when it comes to a stroke. Globally, stroke is the second leading cause of death. In Malaysia, six cases are reported every hour and 52,000 cases annually according to the Malaysia Stroke Council and Malaysia Society of Neurosciences.

The first 72 hours after a stroke are critical for recovery. It can determine whether a person recovers fully or faces long-term disability, says Sunway Medical Centre, Sunway City consultant emergency medicine Dr Aaron Lai Kuo Hoo.

When a stroke strikes, the brain is deprived of oxygen, and damage starts immediately. Quick interventions, like clot-busting drugs or thrombectomy, can save lives and pre-

serve brain function, but these must happen fast, says Dr Lai.

Studies show that patients receiving thrombolytic therapy within the first 4.5 hours from the onset of stroke symptoms have a much higher chance of functional recovery.

This "golden hour" dramatically improves the likelihood of a full recovery.

A multidisciplinary team ensures immediate and effective treatment once a stroke patient arrives at the hospital.

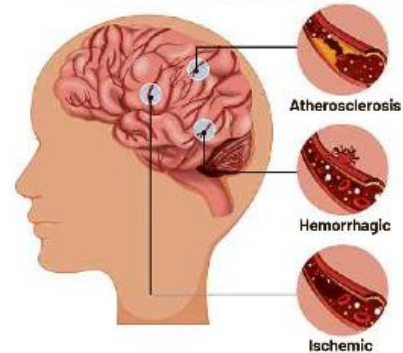
During this time the focus is on preventing complications like secondary strokes or brain swelling, explains Sunway Medical Centre, Sunway City consultant neurologist Dr Mohamad Imran Idris.

"After treatments such as thrombolysis or thrombectomy, the patient



Early rehabilitation is vital. PICTURE CREDIT: FREEPIK

COMMON TYPES OF STROKE



Strokes are increasingly affecting younger people in Malaysia. PICTURE CREDIT: BRPFX — FREEPIK

is closely monitored, with brain scans repeated within the first 24 hours to check for bleeding or other complications."

During this time, key health factors such as blood pressure, blood sugar, and hydration are stabilised, as they play a pivotal role in reducing brain damage.

Early rehabilitation is also vital. The sooner therapy can begin, usually within 48 to 72 hours, the better the patient's chances of regaining mobility and independence, says Dr Mohamad Imran.

"Whether regaining the ability to walk, swallow, or speak, starting therapy as soon as the patient is stable maximises their chances of regaining

independence."

Strokes are increasingly affecting younger people in Malaysia, largely due to lifestyle factors like poor diet, obesity, smoking, and lack of physical activity.

"We're seeing more metabolic syndromes in younger people, and these are major contributors to strokes," says Dr Lai.

Younger patients often fail to recognise early symptoms or delay seeking treatment, leading to worse outcomes.

Awareness of early symptoms and the importance of post-stroke care is more critical than ever.

Dr Mohamad Imran adds that it's not just about saving lives; it's about preserving quality of life.

Teduhan buat keluarga pesakit kanak-kanak

Oleh MOHD IZZATUL IZUAN TAHR
KUALA LUMPUR

Di sebalik tembok Hospital Canselor Tuanku Muhriz Universiti Kebangsaan Malaysia (HCTM UKM), berdiri sebuah rumah yang menyimpan ribuan kisah air mata, doa dan harapan.

Di sinilah setiap tangisan berganti ketabahan dan setiap senyuman kecil membawa makna besar buat keluarga yang berjuang menemani anak-anak melawan penyakit.

Rumah Ronald McDonald (RMH) menjadi tempat berteduh buat ibu bapa yang datang dari jauh, ruang untuk bernafas di tengah detik cemas menanti rawatan anak di hospital.

Dalam kesunyian malam, rumah itu menjadi tempat mereka mengenggam semula kekuatan yang hampir hilang.

Bagi keluarga pesakit, RMH bukan sekadar tempat tinggal sementara, tetapi dianggap sebagai 'rumah kedua' yang memberikan kelegaan dan semangat baharu.

Di sinilah mereka belajar erti reda dan tabah melihat anak kecil menempuh rawatan yang panjang dan menyakitkan.

Lebih dua dekad, rumah di bawah naungan Persatuan Kebajikan Ronald McDonald (RMHC) Malaysia itu menjadi saksi kepada kasih dan perjuangan yang tidak pernah padam.

Ia bukan sahaja menyediakan perlindungan dan keselesaan, malah memberi harapan kepada keluarga yang melalui hari-hari paling sukar dalam hidup mereka.

Menurut Pengurus Besar RMHC Malaysia, Mohd Nasri Nordin, inisiatif itu diwujudkan bagi memastikan anak-anak di bawah 18 tahun yang memerlukan rawatan dapat terus menerima sokongan sewajarnya dengan kehadiran keluarga di sisi.

"RMHC Malaysia mendapat sokongan dari McDonald's Malaysia untuk melaksanakan pelbagai program kebajikan di seluruh negara.



Nur Hazwani dan anaknya, Muhammad Aisy antara keluarga yang menerima manfaat penginapan di RMH HCTM-UKM.

“RMHC Malaysia ditaja oleh McDonald's Malaysia bagi melaksanakan pelbagai program kebajikan di seluruh negara.”

- Mohd Nasri

"Rumah ini dilengkapi bilik keluarga, ruang makan, dapur dan bilik permainan, semuanya demi memastikan keluarga pesakit dapat hidup seperti di rumah sendiri, walaupun berada di hospital," katanya ketika ditemui di RMH HCTM UKM, Cheras.

Mohd Nasri berkata, empat rumah seumpamanya kini beroperasi di seluruh negara, iaitu di HCTM UKM, Hospital Universiti Sains Malaysia (HUSM) Kelantan, Hospital Tunku Azizah (HTA) Kuala Lumpur, dan Hospital Wanita dan Kanak-kanak Sabah (HWKKS).

Katanya, RMH di HCTM UKM merupakan rumah pertama di Malaysia dan Asia Tenggara, yang kemudiannya menjadi model kebajikan global diiktiraf di peringkat antarabangsa.

"Segala kos pembinaan dan operasi rumah ini ditanggung sepenuhnya me-

lalui sumbangan orang ramai dan syarikat korporat," jelasnya.

Selain kemudahan penginapan, RMHC turut melaksanakan tiga program utama lain, termasuk bantuan kepada pusat jagaan anak autisme dan orang kelainan upaya (OKU), tajaan pembedahan bayi klef, sumbing bibir serta lelangit dan program pendidikan untuk keluarga berpendapatan rendah.

"Kami telah menyediakan 35 bilik sensori dan terapi autisme di seluruh negara, dengan kerjasama Jabatan Kebajikan Masyarakat (JKM) untuk memperluaskan kemudahan itu.

"Bagi bayi klef (sumbing) pula, RMHC menaja sepenuhnya rawatan termasuk pembedahan, rawatan ortodontik dan perbelanjaan perjalanan sehingga pesakit berusia 21 tahun," tambahnya.

Semangat baharu

Salah seorang penghuni RMH, Teruna Timpol, 51, berkata, rumah itu menjadi penyambung semangat dalam perjuangannya menemani anak bongsu, Nor Aliya Natasha, 15, yang menghidap leukemia.

Sebelum mengenali RMH, Teruna pernah tidur di atas kerusi wad selama beberapa malam dan berulang-alik sejauh ratusan kilometer setiap minggu dengan kos mencecah RM250.

"Sekarang saya boleh berjinat dan fokus sepenuhnya kepada anak. Rumah ini sangat selesa, tenang dan menjadi tempat berpaut," katanya dengan nada sebak.

Bagi Nur Hazwani Harun, 39, RMH di HCTM UKM menjadi tempat berlindung sewaktu menjaga anak sulungnya, Muhammad Aisy Al Amin Zulfadhli, 13, yang menghidap penyakit kronik sejak bayi.

Sebelum ini, Hazwani dan suaminya yang bekerja sebagai pengawal keselamatan pernah tidur dalam kereta setiap malam semata-mata untuk berada dekat dengan anak di wad.

"Semasa Aisy di unit rawatan rapi, saya langsung tidak pulang ke rumah dan tidur dalam kereta kerana waktu melawat terhad.

"Apabila dapat menginap di RMH, saya sangat bersyukur. Jika berlaku kecemasan, kami boleh segera ke wad tanpa perlu risau," katanya.

Baginya, RMH bukan sekadar tempat berteduh, tetapi ruang untuk berkongsi air mata dan kekuatan bersama ibu bapa lain yang melalui nasib sama.

"Terima kasih kepada McDonald's Malaysia dan semua penyumbang. Anda bukan sahaja membantu membina rumah ini, tetapi juga memulihkan hati kami," ujarnya penuh emosi.

Dengan lebih 1,000 keluarga yang telah mendapat manfaat daripada kemudahan ini sejak diwujudkan, RMH terus menjadi simbol kasih sayang dan solidariti kepada mereka yang sedang berjuang demi kehidupan anak-anak tersayang.



Bilik permainan disediakan di RMH HCTM-UKM.



Teruna dikemani anaknya, Nor Aliya ketika berkongsi pengalaman tinggal di RMH HCTM-UKM.



Advocates say professional teeth cleaning can help keep your teeth healthy and prevent problems later, but research findings are more ambiguous. — dpa

Do I need professional teeth cleaning?

By MAGDALENA HENKEL

PROFESSIONAL dental cleaning is a common add-on service in dental practices, but some patients may wonder if it's worth the extra cost.

A professional teeth cleaning is a step above your usual toothbrush-and-flossing routine, involving a more intensive procedure performed by specially trained staff.

It includes removing deposits such as tartar and plaque from tooth and root surfaces, smoothing tooth surfaces, and cleaning the spaces between teeth.

Finally, the teeth are fluoridated in gel or varnish for protection against tooth decay.

The aim is to remove harmful and cosmetically bothersome deposits that increase the risk of tooth decay and gum disease such as periodontitis.

Evidence on the effectiveness of professional dental cleaning is mixed.

A review by the Cochrane research network in 2018 found that the benefits for people with good oral hygiene were not sufficiently proven.

Studies have also yet to clearly prove that this treatment protects against tooth decay, gingivitis or periodontitis more than a dentist removing plaque and tartar – a process known as scaling – during a routine trip to the dentist, the review concluded.

However, it may make a difference if a condition such as periodontitis is already present, according to a consumer advice centre.

This can also make a difference in health insurance coverage.

Despite scientific findings being lukewarm on dental clean-

ings, some dentist organisations are more enthusiastic in their support.

"Most people may need their teeth cleaned every six or 12 months," says the Australian Dental Association.

The German Dental Association says professional dental cleaning has a positive effect on oral hygiene.

The association points to Swedish long-term studies dating back to the 1970s which, it said, showed that "with a prophylaxis programme with dental cleaning as a core service, tooth decay and periodontitis can be almost completely avoided for most people".

Side effects during or after a professional dental cleaning are very rare, the association says.

Immunosuppressed people and those with cardiovascular (heart) disease, metabolic disorders or allergies should inform practice staff in advance.

Patients with very sensitive teeth or inflamed gums may experience pain.

Whether or not you decide to have a professional tooth cleaning, you should be brushing your teeth thoroughly twice a day at home, for about two minutes, using a fluoride toothpaste.

Dental floss or interdental brushes can also help clean between your teeth. — dpa



Graphic: Vecteezy