

Kes kematian Zara Qairina

Empat pakar terbabit bedah siasat

Proses bermula kira-kira jam 11 pagi sejurus tiba di Hospital Queen Elizabeth

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Kota Kinabalu: Empat pakar patologi forensik termasuk dari Semenanjung terbabit dalam bedah siasat di Hospital Queen Elizabeth (HQE) di sini semalam, bagi mencari bukti dan maklumat tambahan daripada jasad pelajar Zara Qairina Mahathir, yang dikeluarkan dari puseranya di Sipitang, petang kelmarin.

Proses bedah siasat itu diketuai oleh Ketua Jabatan Forensik di Hospital Sultan Idris Shah, Serdang, Selangor, Dr Khairul Anuar Zainun bersama Ketua Jabatan Forensik HQE, Dr Jessie Hiu @ Jessie Dorey Hiu Chen Chen.

Sepanjang proses bedah siasat yang dijalankan kedua-dua pakar

patologi forensik itu yang bermula jam 11 pagi hingga 8 malam, mereka dibantu dua lagi doktor.

Sehingga jam 8 malam tadi dapatan bedah siasat itu belum dimaklumkan kepada keluarga Zara Qairina.

Jasad Zara Qairina menjalani prosedur imbasan tomografi berkomputer (CT scan) sejurus tiba di HQE kira-kira jam 10.30 malam kelmarin, selepas dibawa dengan kenderaan polis sebaik dikeluarkan dari Tanah Perkuburan Islam Tanjung Ubi, Mesapoh, Sipitang, kira-kira 7.30 malam.

Mengulas prosedur bedah siasat yang berjalan semalam, peguam Hamid Ismail, yang mewakili ibu Zara Qairina, Noraidah Lamat, mengakui prosedur yang dijalankan bagi membantu siasatan polis itu dibuat secara telus.

"Ya, memang telus," katanya ketika menjawab pertanyaan media berhubung proses siasatan yang dijalankan itu.

Beliau berkata, selain dua pakar forensik dan dua doktor yang menjalankan bedah siasat itu, seorang jurugambar polis bersama dua anggota turut memerhati proses yang dijalankan ke atas

jasad Zara Qairina.

"Rakan guaman saya, Shahlan Jufri, turut memerhati proses bedah siasat atas permintaan keluarga Zara.

"Kita yakin proses bedah siasat akan disiapkan hari ini (semalam) juga walaupun mengambil masa yang panjang dan berlarutan hingga malam," katanya.

Maklum hasil penemuan

Hamid berkata, beliau dimaklumkan yang selepas selesai proses bedah siasat itu, Dr Jessie akan memaklumkan kepada keluarga arwah Zara Qairina mengenai hasil penemuan mereka daripada bedah siasat itu.

Jika didapati ada unsur jenayah dikesan dalam bedah siasat itu, katanya laporan yang lebih rapi akan dibuat dalam kes terbabit.

"Itu akan dimaklumkan oleh Dr Jessie. Mungkin ia hanya 'preliminary findings' tetapi jika ada unsur jenayah, laporan bedah siasat yang lebih rapi akan dibuat," katanya.

Hamid berkata, imbasan CT Scan yang dijalankan malam kelmarin adalah yang kedua dibuat terhadap Zara Qairina selepas kali pertama dilakukan sebelum



Dr Khairul Anuar tiba di Jabatan Forensik Hospital Queen Elizabeth, Kota Kinabalu, semalam.
(Foto Mohd Adam Arinin/BH)

pengebumian jenazahnya kira-kira tiga minggu lalu.

Katanya, kedua-dua imbasan itu akan dihantar untuk semakan pakar di Semenanjung untuk dibuat perbandingan.

"Hasil bedah siasat akan diserahkan kepada kami secara rasmi, dan selepas selesai, jenazah akan dibawa balik ke Sipitang untuk pengebumian semula," katanya.

Scoliosis beyond spine

► How curvature can affect patients' breathing, digestion, self-esteem

WHEN people think of scoliosis, they tend to picture a curved spine and posture issues but in reality, the condition often extends far beyond the back, quietly affecting breathing, digestion and mental well-being.

In Malaysia, idiopathic scoliosis – the most common form – affects roughly 2-3% of Malaysians, translating to 600,000 to 900,000 individuals nationwide. Other forms of scoliosis include congenital scoliosis (present from birth), degenerative scoliosis (common in the elderly) and neuromuscular scoliosis (linked to conditions like cerebral palsy and spina bifida).

While many associate scoliosis with adolescence, its effects often extend far beyond the teenage years. The condition, especially in moderate to severe cases, can have a profound effect on the quality of life that is frequently overlooked in mainstream health conversations.

Understanding scoliosis and its systemic effects

Scoliosis is defined as an abnormal lateral curvature of the spine, often accompanied by vertebral rotation. Most cases are diagnosed during adolescence, and severity varies – from mild asymmetry to curvatures

exceeding 45 degrees that require surgical correction.

The spinal column, however, is not an isolated structure – it connects and interacts with vital organs, muscles and systems throughout the body. Especially in moderate to severe curvature cases, patients could potentially experience respiratory restrictions, gastrointestinal disruptions and mental health challenges.

Patients with mild scoliosis (typically between 20 and 40 degrees) often remain asymptomatic aside from visible postural differences.

Secondary health effects tend to occur when curvature becomes severe, generally between 70 to 100 degrees. At this stage, the impact can vary depending on several factors which include the age and overall health of the patient. The location of the curve and the type of scoliosis also influence whether respiratory or digestive complications arise.

How breathing and digestion are affected

As scoliosis progresses, it can begin to influence key physiological functions – starting with two of the most commonly affected areas: breathing and digestion. When the spine curves abnormally, it can rotate or twist the ribcage. This reduces lung volume and causes restrictive lung disease,

making it harder for patients to breathe deeply.

For thoracic curves, an angle of 70 degrees or more may start limiting lung expansion while a curve of more than 100 degrees can lead to severe pulmonary restriction and thus, difficulty in breathing or decreased effort tolerance. Similarly, severe deformity (such as lumbar curves above 90 degrees) can compress the abdominal cavity which may lead to bloating, acid reflux or constipation – symptoms that can be commonly misattributed to gastrointestinal issues.

Overlooked psychological impact

Beyond physical discomfort and limitations, the emotional and psychological toll of scoliosis is just as real and often goes unnoticed. For many patients, the condition's effects extend beyond posture or movement.

Those living with scoliosis face challenges that can extend to persistent pain, fatigue and diminished mobility. Daily struggles such as these are often internalised, especially when scoliosis is not outwardly visible. Over time, the emotional strain of “coping in silence” can be as challenging as the condition itself – particularly when misunderstood by peers, teachers or family members.

Patients with mild scoliosis are



An X-ray showing the curved spine of a patient with scoliosis.

generally healthy and often unaware of the condition. They usually do not present with anxiety or depression linked directly to scoliosis. That said, self-esteem issues do arise, especially in cases where bracing is required.

Bracing – while medically beneficial – can have a social and emotional impact, particularly for younger patients such as school-going children. With daily wear time reaching up to 23 hours over several years, it can be a physically and emotionally demanding experience.

It is important to prepare both the patient and their parents beforehand.

The decision to move forward with bracing should always consider both physical outcomes and psychosocial well-being. There is no one-size-fits-all answer; it has to be a shared, well-informed decision.

Scoliosis may start in the spine, but its impact reaches far beyond. Recognising these hidden effects is key to changing how we approach care and public awareness.

This article is contributed by Sunway Medical Centre Damansara consultant orthopaedic and spine surgeon Dr Tan Jin Aun.

By DEBORAH LYNN BLUMBERG

IN the spring of Molly Buccola's senior year at Santa Clara University in California, the United States, she ran the Los Angeles marathon.

The next month, she and her boyfriend enjoyed a fun Sunday tooling around on bikes they borrowed from Buccola's sister, Kelley Solberg, who lived nearby.

The next morning, Buccola didn't feel up to her usual 6am run, and she slept through class. When her roommate got home that afternoon, Buccola was still in bed.

She roused Buccola, who started speaking incomprehensibly. Her left side was weak, and she needed help getting to the bathroom. The roommate called Buccola's then-boyfriend to let him know what was going on, and he called Solberg.

In the emergency room, Buccola lost consciousness.

By her side, Solberg teared up as she phoned their parents, Cande and Gene Buccola, who live in Oregon. Gene was recovering from prostate surgery he'd had five days earlier, a part of his cancer treatment.

"I'm driving to the airport," Cande told Gene.

He nodded in agreement. At the hospital, doctors weren't sure what happened to Buccola, who was 21 and otherwise healthy. Their initial wave of tests didn't provide any answers.

A neurologist came to the hospital the next day to review Buccola's chart. He recognised the signs of a type of stroke

Making an impact



Buccola lost consciousness in the emergency room when she was brought in. — TNS

known as venous sinus thrombosis, a blood clot that led to bleeding in both sides of her brain.

Buccola got medication to break it up. She also had what was a new procedure at the time (it was 2005) called a thrombectomy, when a doctor uses a device to remove a clot from an artery.

"If she makes it through the night, we'll reevaluate," her doctor told her family.

Upon hearing the grim news, Cande's knees buckled. Buccola continued to lose consciousness after the procedure.

Later, with Buccola in a coma, two priests sat by her bedside and delivered her last rites.

Meanwhile, Buccola's other

two siblings, Ryan and Tim Buccola, and their families flew to California to be by her side. They held her hand and prayed with rosary beads.

Buccola woke up and gradually became more lucid. Cande knew Buccola was getting better when she read aloud the one-liner jokes on the hospital popsicle sticks and waited for laughs.

Buccola, however, was paralysed on her left side.

Nine days after her stroke, Buccola moved in with Solberg and her husband and their new baby. Cande stayed in town to be Buccola's caretaker, helping her learn how to walk again.

Cande used the same range-of-motion therapy techniques with Buccola that she'd used

with Gene's brother, who had ALS. Also known as Lou Gehrig's disease, it slowly weakens the muscles because the nerves that control them stop working properly.

With determination and perseverance, Buccola progressed quickly from a walker to a four-point cane.

She returned to school to finish her final semester. At graduation, she walked across the stage using just a cane.

In the audience, her family wore T-shirts that read "Life is Good".

For the next year, Buccola volunteered at a community dining hall in San Francisco, kept busy with follow-up medical appointments, and started graduate school to get a degree in educational leadership.

She continued to improve physically. Then she took a job as director of campus ministry at a Catholic monastery and school.

She led retreats for community members and helped leaders draft talks on life lessons.

But when it came to her stroke, Buccola "just went on with life".

"I didn't understand how it fit with the rest of my life," she said. "I didn't know any other stroke survivors. So, I just tried to move on."

Gradually, with time and distance, Buccola began to reflect on her stroke and remarkable recovery.

She came to believe that "it really is important to stop and reflect".

In 2022, Buccola, who now lives in Bend, Oregon, began

volunteering as a stroke support group facilitator and came to see storytelling as an important tool.

Now, she's the founder and host of Beyond Stillness: Stories After Stroke, a nonprofit that runs a stroke storytelling programme that culminates in a podcast.

She meets one-on-one with survivors as they reflect on the wisdom gained through recovery and then shares their story on the podcast.

"I'm in awe of each and every guest, and the way a community has sprouted within our organisation," Buccola said.

"The power of reflection, reframing and storytelling is profound."

Over the past year and a half, the nonprofit has recorded over 145 podcast episodes. Listeners hail from 50 states and 47 countries.

The nonprofit also organises virtual support groups, retreats and workshops for survivors.

One podcast guest said the story-crafting process made her realise "I'm strong. I have a voice. ... I'm a big advocate with a purpose".

Another said that Buccola "sees me in the way I've always hoped to be seen".

Survivors who've worked with the nonprofit have gone on to restart therapy, start their own support groups and speak about stroke.

"Molly empowers a lot of people to look at their story in a different way," Cande said.

"It's beautiful work." — American Heart Association News/Tribune News Service