

# 386 medical officers quit in 2024

CLOSE to 400 medical officers resigned from the Health Ministry last year, with 3.1% choosing to migrate overseas, the Dewan Rakyat was told.

Health Minister Datuk Seri Dr Dzulkefly Ahmad said 12 of the 386 officers who resigned had migrated.

“The ministry does not have the authority to stop medical officers from finding jobs in the private sector or abroad, nor can it prevent headhunting by the private sector or registered headhunters,” he said in a written reply yesterday.

Dr Dzulkefly said the migration of healthcare professionals abroad is not something new, and also happens in other developed countries.

However, he said the ministry is taking various initiatives to hinder migrations and retain talent.

This includes increasing the number of permanent positions for those under the contract system, with 13,552 such positions offered since 2023.



# Nurse uniform supplier fined RM665,000

**A NURSE** uniform supplier accused of using substandard fabric was fined RM665,334.95 for late deliveries, Health Minister Datuk Seri Dr Dzulkefly Ahmad said. In a written parliamentary reply, he said the company had replaced 3,281m of fabric, but no fabric replacement claims were submitted in 2023 and 2024. The RM98.3 million contract remains in effect until Dec 31. He was responding to a question by Lim Guan Eng (PH-Bagan) on whether the ministry had terminated the contract and if it had been compensated.



# Normalise mental health talks at universities

**PETALING JAYA:** As over 900,000 Malaysian adolescents faced mental health issues in 2023, experts stress the need to normalise discussions on mental health, as well as to reduce stigma and to improve access to support systems.

Malaysian Mental Health Association president Prof Datuk Dr Andrew Mohanraj highlighted the growing mental health concerns of university students, which worsened during the Covid-19 pandemic.

Factors such as academic pressure, financial strain, social isolation and uncertain job prospects continue to affect students, he said.

"Even now after the pandemic, the mental health of students at universities continues to be a concern as they worry about their employability and career prospects when the economy of the country is not perceptibly encouraging.

"Many jobs are being made redundant due to the rise of artificial intelligence, as well as the prevalence of remote working and part-time employment," he said.

Despite existing mental health support in some institutions, the stigma discourages students from seeking help, especially from in-house counsellors.

Many prefer external services, which are often costly.

Some married students also juggle family responsibilities alongside studies, adding to their mental burden.

To address this, Dr Mohanraj

proposed an inter-university counselling network to widen access.

He urges universities to embed mental health education, including stress management and emotional regulation, in their curricula to normalise the conversation.

He recommended replacing high-stakes exams with continuous assessments, improving financial aid options like hardship allowances and part-time jobs, and enhancing campus environments through recreational spaces and nutritious food.

"There must be a national-level action plan to coordinate efforts across universities. This must be spearheaded by the Higher Education Ministry.

"This strategy must include anti-bullying policies and enforcement across universities instead of leaving it to the sole discretion of the individual universities to truly reflect zero-tolerance towards bullying," he said.

This will also enhance public confidence in our tertiary education system.

Bullying, particularly cyberbullying and body shaming, is also one of the leading causes of increased stress, anxiety and depression among university students.

"This phenomenon is not just restricted to primary and secondary school students," he added.

Prof Dr Mariani Md Nor, a psychologist at SEGi University, called for a multi-pronged strategy.

This includes strong institutional support, mental health

awareness, balanced academic systems, active parental and community involvement, and national policies.

Universities and schools should establish counselling services, peer support groups and mental health hotlines.

Trained counsellors can provide early interventions before problems escalate.

"For that reason, it is crucially important to promote mental health awareness by sending information to the public that normalising discussions around mental wellbeing can reduce stigma," she said.

The lack of support, she said, discourages students from seeking help and leaves issues unaddressed until they become severe.

On the policy front, Dr Mariani suggested more government funding for mental health resources, subsidised counselling and school-based screening programmes for early detection of at-risk students.

She also addressed the impact of social media, noting that excessive screen time can disrupt sleep and reduce real-world social interactions.

Unrealistic portrayals of success and lifestyle online can also lead to low self-esteem, while cyberbullying and misinformation further harm mental wellbeing.

Sunway Medical Centre clinical psychologist Evelyn Ngui Ailing said fostering community within higher education institutions is vital.

"Universities can offer interest-based clubs and activities like

yoga, Pilates, book clubs and spirituality circles to promote connectivity.

"Teachers and mental health advocates can be trained to conduct weekly check-ins with small student groups to identify warning signs early," she said.

She also recommended creating "safe spaces" on campus – small, private areas where students can seek emotional support.

This fosters a culture where mental health is treated as part of overall health, encouraging openness and reducing stigma.

"The awareness of mental health has improved in recent years due to the power and influence of social media. I hear issues on mental health being voiced out and shared regularly among young adults.

"Although some content may contain misinformation, consumers of social media should always verify and cross-check mental health information.

"On the other hand, social media (and virtual messaging) cannot be used as the sole compensation to improve social connectivity, as the presence of supportive individuals is key to improving mental wellbeing," she added.

The National Health and Morbidity Survey (NHMS) 2023 found that one million Malaysians aged 16 and above suffer from depression.

Additionally, mental health issues among children and adolescents have more than doubled, from 424,000 cases in 2019 to 922,000 in 2023.



# More than just bad grades

## Relentless pressure pushing students to their breaking point

By RAHIMY RAHIM and  
RAGANANTHINI VETHASALAM  
newsdesk@thestar.com.my

**PETALING JAYA:** What began as the pursuit of academic excellence turned into a nightmare for one housewife, who said her teenage daughter slipped into depression after years of relentless pressure to excel.

The mother, who only wanted to be known as Lim, recalled how her daughter, a straight-A student since primary school, was diagnosed with depression at just 14 years old.

"The pressure to score As drove her to the edge, and we didn't even realise it."

● "She had always been a high achiever, but suddenly, her grades plummeted and her school performance deteriorated."

"She even started neglecting her hygiene and sometimes could not get up to go to school," Lim said, when contacted yesterday.

These are among the many cases that reflect a silent epidemic of mental health struggles in the country, from schoolchildren to adults buckling under academic pressure, family turmoil and societal expectations.

Haunted by guilt, Lim admitted that she too was to blame.

"I placed too much emphasis on grades and even resorted to can-

ing when she didn't deliver. In hindsight, I regret it deeply, it pushed her to the brink," she said.

Now 16, Lim's daughter is undergoing therapy in the hopes of rebuilding her mental health.

But hers is not an isolated case. University student Mohd Salleh, whose name has been changed to protect his identity, said his battle with depression began at 16, when his parents' bitter divorce turned his world upside down.

"It was chaotic. I couldn't sleep at night, and I kept blaming myself for their fights. My results started dropping, and all I wanted was to lock myself in my room. Sometimes, I even thought of ending my life," he confessed.

Salleh said he eventually sought solace by reaching out to friends facing similar struggles and even strangers online, a step that slowly helped him heal.

However, the pressures do not stop after school.

Siti Amalina (not her real name), 33, from Penang, said her mental health began to spiral while pursuing a master's degree at a public university.

"The workload from classes really took a toll on me. On top of that, I was dealing with family problems and I just couldn't focus on my studies," she said.

Siti Amalina recalled being unable to function properly until



she sought professional help.

Doctors later confirmed she was suffering from clinical depression.

Even children as young as 11 are not spared.

Primary schooler Sad, speaking on the condition of anonymity,

admitted that the burden of studies already weighs heavily on him.

"It tires me and stresses me out," he said.

His main coping mechanism was talking with friends.



THE 13th Malaysia Plan (13MP) signals a significant turning point in Malaysia's development planning, particularly in addressing the realities of a rapidly ageing society. As the final national development plan before 2030, it aligns with the Sustainable Development Goals (SDGs) and the United Nations Decade of Healthy Ageing (2021-2030), providing a strong foundation for inclusive, sustainable and future-ready policy implementation.

The Malaysian Research Institute on Ageing (MyAgeing®) at Universiti Putra Malaysia commends the government's foresight in highlighting demographic change as a major national megatrend.

One of the landmark features of the 13MP is the introduction of the National Ageing Blueprint (NAB), which adopts a life-course approach to ageing.

This blueprint is a strategic policy direction aimed at guiding Malaysia through its transformation into an aged nation.

While the NAB has been presented at the National Economic Action Council (MTEN) and discussed during the plan's development workshops, MyAgeing® encourages the government to finalise and publicly release the document to facilitate broader stakeholder engagement and implementation.

Interestingly, the 13MP also replaces the long-used term "warga emas" with "warga berusia" when referring to older persons, reflecting a shift towards more inclusive and respectful terminology.

However, it is the comprehensive and systemic approach to ageing policy rather than just terminology that sets the plan apart.

# 13MP addresses realities of a rapidly ageing society



**Planning for an ageing population:** Customers watching Prime Minister Datuk Seri Anwar Ibrahim tabling the 13th Malaysia Plan on July 31. One of the landmark features of the 13MP is the introduction of the National Ageing Blueprint, which adopts a life-course approach to ageing — AZMAN GHANI/The Star

For the first time in Malaysian development planning history, long-term care (LTC) is being recognised as a national strategy (Strategy D2.1). The 13MP proposes a sustainable LTC ecosystem governed by a central authority to oversee childcare, disability care, eldercare and faith-based institutions. This reflects an integrated care framework that spans all age groups and support needs.

The World Health Organisation (WHO) defines LTC as encompassing "personal, social and medical services" to help individuals with or are at risk of reduced capacity to maintain dignity and independence.

MyAgeing® fully supports this broad view and emphasises the importance of collaborative regulation involving the government, private sector and civil society.

The plan highlights both insti-

tutional and community-based LTC models, focusing on quality assurance, professional training and equitable access.

The recognition of LTC as a driver of economic growth also opens up opportunities in gerontechnology, retirement migration, senior living services and job creation in what is now being termed the purple economy.

These developments are aligned with Malaysia's ongoing efforts to increase female labour force participation by redistributing care responsibilities.

Complementing this is Strategy D2.3, which outlines major social protection reforms. The introduction of a hybrid Employees Provident Fund (EPF) payout system, offering both lump sum and monthly pensions, is a bold move to enhance income security in later life.

While the plan does not yet detail contribution caps or risk-pooling mechanisms, it signals strong political will for meaningful pension reform.

Sustainability of the civil service pension scheme is also addressed (Strategy C3.4), encouraging a holistic view across major pension institutions including KWAP, PERKESO, EPF and LTAT (Armed Forces Fund Board).

In addition to occupational pension reforms, attention must

also be given to voluntary retirement savings and the expansion of social assistance into basic pension coverage for vulnerable seniors.

The 13MP advances beyond the traditional retirement age debate by focusing on employment reform, flexible work arrangements and reskilling via Technical and Vocational Education and Training (TVET) and lifelong learning initiatives.

MyAgeing® applauds the plan's aim to increase labour force participation among adults aged 60 and above, and recommends prioritising schemes for re-employment as a phased retirement strategy.

As Malaysia navigates its demographic transition, the 13MP offers a historic opportunity to reimagine the nation as one that embraces ageing with dignity, inclusivity and sustainability.

MyAgeing® stands ready to support the implementation of the 13MP through its multidisciplinary research, policy consultation and capacity-building initiatives.

**ASSOC PROF DR RAHIMAH  
IBRAHIM**  
Director

**Malaysian Research Institute  
on Ageing (MyAgeing®)  
Universiti Putra Malaysia**



# 2,000 turn up for hospital's health festival in Selangor



The Life Moves Festival by Sunway Medical Centre drew thousands of enthusiastic attendees.

OVER 2,000 individuals joined the inaugural Life Moves Festival hosted by Sunway Medical Centre (SMC) in Sunway City, Selangor, and rallied to take charge of their health.

According to the National Health and Morbidity Survey 2023, 15.6% of Malaysian adults lived with diabetes, while over 50% were overweight or obese, SMC said in a statement.

Cardiovascular disease and cancer remained major contributors to premature mortality, with many cases detected only at advanced stages, making early intervention more vital than ever, it said.

The event aimed to bring core health services into a communal

open-door setting, offering free screenings and assessments including blood glucose and cholesterol checks, body composition analysis and urine tests.

SMC medical professionals were on hand to provide wellness guidance, with many participants receiving consultation on their health.

"In many cases, early detection and effective management can improve patients' outcomes and control the progression of non-communicable diseases," said Sunway Medical Centre, Sunway City chief executive officer Dr Seow Vei Ken.

"We encourage the community to take their health seriously.

"Sometimes, the first step is

simply knowing where you stand.

"Early action and accountability strengthen our healthcare system and benefit the nation in the long run," Dr Seow added.

One of the standout experiences was the "*Jantungku*" walk-through exhibit, a multi-sensory journey through the cardiovascular system.

The exhibit served as a powerful reminder of how everyday lifestyle choices directly impact long-term well-being.

Parents and children enjoyed the health-themed game stations and hands-on activities at the family-friendly event, while shoppers explored the vibrant health marketplace.



# Danger of glycerine in slushies

IT doesn't take much to make children happy: A cup of crushed ice, sugar and food colouring is often enough, especially on hot days.

However, some slush ice drinks contain an additive that is not without risks, particularly for children: glycerine, which sometimes appears in ingredients lists as E422.

"It's added to some slush ice drinks to make them smoother," says nutritional health specialist Katharina Holthausen. It has a slightly sweet taste and is also used in medicine to reduce a condition in the skull called elevated intracranial pressure.

However, large amounts of glycerine can cause headaches, nausea and dizziness, she says. Such unwanted effects are particularly likely in children, as they have a lower body weight.

Health experts believe the likelihood of health impairments



Glycerine is added to some slush ice to give it a smoother texture.  
— Photos: CHRISTOPH SOEDER/dpa

from drinking a slushy depends on the concentration of glycerine in the drink and the amount consumed. There is no legally defined maximum limit for glycerine in beverages, however.

Germany's Institute for Risk Assessment (BfR) authority has measured levels of glycerine in slushy drinks and calculated, based on products available in Europe, that a child aged five



In large quantities, glycerine can lead to headaches, nausea and drowsiness in children.

years and weighing 20 kilograms would need just under 200 millilitres of slushy to reach a glycerine dose with a "therapeutic effect".

When it comes to slushies, parents are advised to allow children to try some "only occasionally and in small amounts," says

Holthausen. She also advises parents to ask when buying the drink whether it contains glycerine.

Parents who want to be completely safe can offer their children a homemade version. All that is needed is crushed ice and fruit juice or pureed fruit. — dpa



**G**LENEAGLES Hospital Johor (GHJ) urologist consultant Dr Zainal Adwin Zainal Abiddin said many Malaysian men continued to view symptoms such as weak urine flow or sexual dysfunction as too sensitive to discuss and often brush them aside until the problem worsens.

"These symptoms are frequently downplayed because they are seen as private or emasculating. But delaying treatment can lead to more invasive procedures, higher complication rates and poorer recovery outcomes."

Dr Zainal also one of Malaysia's few fellowship-trained robotic urology surgeons who underwent advanced training in Glasgow, Scotland.

He said many men are raised to see pain as weakness. Many view urological symptoms as embarrassing, so there's a tendency to downplay or ignore them, hoping the symptoms will go away.

He warned that early signs like frequent urination, blood in the urine, testicular lumps or erectile difficulties could point to more serious conditions, such as prostate enlargement, kidney disease, or even undiagnosed or early-stage cancers.

Dr Zainal said men in their 40s and 50s commonly face issues like benign prostatic hyperplasia (BPH), erectile dysfunction and prostate or kidney cancers.

Early detection, he stressed, allows for less invasive intervention and better long-term quality of life.

"Once symptoms progress, treatment may no longer be straightforward. Some men end up with irreversible damage or need more aggressive treatment than if they had come earlier."

"Men in this age group often downplay or ignore symptoms like frequent or painful urination, weak urine flow blood in urine, besides

# Men, don't wait for pain to be the wake-up call

Robotic urology at Gleneagles Hospital Johor offers second chances — if you act early

testicular lumps and erectile dysfunction.

"These symptoms are seen as embarrassing, so they often suffer in silence."

"But by delaying treatment, they miss the window for less invasive options and that can lead to irreversible complications like incontinence, sexual dysfunction or even cancer progression," he said.

Gleneagles Hospital Johor pulls out all the stops by investing heavily in cutting-edge medical equipment and technologies.

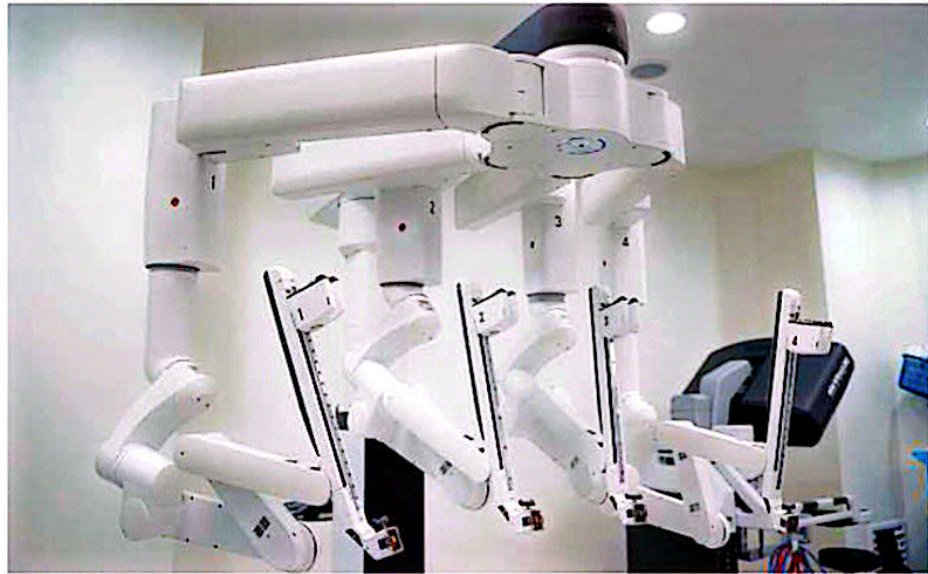
The hospital aims to deliver faster recovery and treatments with minimal pain for its patients.

The robotic urology surgery merges machine precision with human mastery. Using robotic arms controlled from a console, surgeons are able to operate in tight pelvic areas with unmatched dexterity, 3D vision, and minimal trauma to surrounding tissues.

GHJ's growing team of consultants are pioneering the use of robotic-assisted surgery — a state-of-the-art technique that's revolutionising treatment for conditions such as prostate cancer, kidney tumours, bladder complications and ureteric disorders.

Among the tools changing the game is robotic-assisted surgery.

Using robotic arms controlled via a console, surgeons are able to perform complex procedures through small incisions with unparalleled



Apart from being less invasive, robotic-assisted surgeries significantly shorten recovery time. PICTURES CREDIT: GHJ

precision.

"Robotic surgery offers 3D high-definition vision and fine control. It's especially useful in the pelvic area where space is tight, like in prostate surgery. We're talking smaller cuts, less blood loss and faster recovery," Dr Zainal said.

Unlike the name suggests, the robot does not operate on its own.

It's an extension of the surgeon's hands, offering better dexterity and control. Patients regain urinary and

sexual function faster with fewer complications.

"The word 'robot' makes some people nervous."

"But let's be clear, the robot doesn't move unless I move. It's not autonomous — it's an advanced surgical tool that lets me do far more, with far less harm," Dr Zainal explained.

Robotic procedures involve smaller incisions, less blood loss, lower infection risk, shorter hospital stays, faster recovery and better preservation of urinary control and sexual function.

Apart from being less invasive, robotic-assisted surgeries significantly shorten recovery time, allowing patients to heal faster and return to their routines sooner.

"Many of my patients return to work within a few weeks. More importantly, they return to their lives — restored confidence, relationships and independence," said Dr Zainal.

He urged families, particularly spouses and children, to speak up when they notice changes in their husbands, fathers, uncles and brothers.

"Often times men will ignore the symptoms, but will act for the people they care about."

Dr Zainal's message to men is clear: "own your health".

"Health is a man's greatest wealth but unlike money, it can't be earned back once it's gone," he said.

"I've seen how early action, combined with advanced treatments, like robotic surgery, can give men a sec-



Early detection allows for less invasive intervention and better long-term quality of life, says Gleneagles Hospital Johor urologist consultant Dr Zainal Adwin Zainal Abiddin.

ond chance. But that chance starts with a decision — to own your health, today."

"So, gentlemen, please don't wait for pain to be the wake-up call. Get checked. Get treated. And get back to living fully."

For more information or to book a consultation with Dr Zainal Adwin Zainal Abiddin, visit Gleneagles Hospital Johor's Urology Department at <https://gleneagles.com.my/johor/ms/doctors/zainal-adwin-bin-zainal-abiddin>

✉ [jashadiqe@nst.com.my](mailto:jashadiqe@nst.com.my)

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Gleneagles Hospital Johor aims to deliver faster recovery and treatments with minimal pain for its patients.





# Doktor palsu kena siasat

*Individu dakwa terbabit bedah siasat Zara Qairina disahkan bukan pakar perubatan*

Oleh Zaf Seraj  
am@mediapri-  
ma.com.my

**Kuala Lumpur**

**S**uruhanjaya Komunikasi dan Multimedia Malaysia (MCMC) mengenal pasti individu menyamar sebagai doktor yang mendakwa terbabit proses bedah siasat Allahyarham Zara Qairina Mahathir.

Dalam kenyataan, MCMC memaklumkan polis mengambil keterangan suspek di Ibu Pejabat Polis Daerah (IPD) Dang Wangi, di sini, dan turut merampas peranti komunikasi miliknya untuk dianalisis.

"Suspek dikesan di Kota Damansara, lewat malam tadi (kelmarin) hasil maklumat diperoleh daripada dua individu lain yang turut serta dalam siaran langsung TikTok bersama suspek.

"Suspek dibawa ke IPD Dang Wangi untuk dirakam percakapan," kata kenyataan itu, semalam.

Kenyataan itu berkata, kes disiasat mengikut Seksyen 233 Akta Komu-

nikasi dan Multimedia kerana penggunaan tidak wajar kemudahan rangkaian yang memperuntukkan hukuman maksimum denda RM500,000 atau penjara dua tahun atau kedua-duanya sekali.

Menurutnya, polis turut menyiasat kes itu mengikut Seksyen 4(1) Akta Hasutan 1948 dan Seksyen 505(B) Kanun Keseksaan.

MCMC memberi amaran bahawa penyebaran maklumat palsu membatikan isu sensitif seperti kematian, tragedi atau mangsa kemalangan adalah kesalahan serius yang boleh menyinggung perasaan keluarga mangsa, mengelirukan orang ramai dan mengganggu siasatan pihak berkuasa.

Pada 16 Ogos lalu, Menteri Komunikasi, Datuk Fahmi Fadzil memaklumkan satu akaun TikTok yang membuat siaran langsung mendakwa individu itu hadir semasa proses bedah siasat pada 10 Ogos lalu.

Bagaimanapun, semakan Kementerian Kesihatan (KKM) mengesahkan

suspek bukan pakar perubatan mahupun kakitangan kementerian itu.

Fahmi dipetik berkata, perkara itu disahkan Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad berdasarkan laporan rasmi diterima daripada Timbalan Ketua Pengarah Kesihatan (Perubatan), Datuk Dr Nor Azimi Yunus, yang memperoleh maklumat sah daripada pakar forensik yang mengendalikan kes terbabit.

Pada 16 Julai lalu, Zara ditemukan tidak sedarkan diri dipercayai akibat terjatuh dari tingkat tiga bangunan asrama.

Dia kemudian disahkan meninggal dunia di Hospital Queen Elizabeth (HQE) pada keesokan harinya.

Kelmarin, Mahkamah Koroner di Kota Kinabalu menetapkan 3 September ini sebagai tarikh bermulanya inkuies bagi menyiasat punca kematian Zara.

Tarikh perbicaraan inkuies ditetapkan pada 3 dan 4 September; 8 hingga 12 September; 17 hingga 19 September dan 22 hingga 30 September depan.