

Kes serangan anak Rafizi

'Bersabar, beri ruang pihak berkuasa siasat'

Putrajaya: Semua pihak diminta bersabar dan memberi ruang kepada pihak berkuasa menjalankan siasatan, termasuk berhubung laporan perubahan anak bekas Menteri Ekonomi, Datuk Seri Rafizi Ramli.

Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad, berkata kes membabitkan serangan ke atas anak Ahli Parlimen Pandan itu masih pada peringkat siasatan.

"Ia adalah satu yang akan memerlukan masa untuk siasatan dan rawatan, kita perlu mengizinkan siasatan itu berada di atas landasannya.

"Kita kena bersabar sedikit untuk mendapatkan satu dapatan dan hasil yang saya yakin adalah dapat mengadili perkara ini dengan baik," katanya.

Beliau berkata demikian kepada pemberita ketika ditemui selepas menyaksikan Majlis Menandatangani Memorandum Persefahaman (MoU) bagi Inisiatif 'Cancer Care Closer to Community' antara Kementerian Kesihatan (KKM) dan Roche Malaysia, di sini semalam.



Dr Dzulkefly bersama Pengarah Urusan Roche Malaysia, Deepti Saraf (tiga dari kanan) dan Timbalan Ketua Pengarah Kesihatan (Kesihatan Awam), Dr Ismuni Bohari (dua dari kiri) selepas menyaksikan Majlis Menandatangani Memorandum Persefahaman bagi Inisiatif 'Cancer Care Closer to Community' antara KKM dan Roche Malaysia di Putrajaya, semalam.

(Foto BERNAMA)

Pada 13 Ogos lalu, Rafizi mengesahkan anaknya diheret dan disuntik dengan jarum suntikan oleh individu tidak dikenali di pusat beli-belah di Putrajaya.

Beliau dilaporkan berkata, dua lelaki menaiki motosikal itu mengekori kereta isterinya sebelum serangan berlaku dan percaya serangan itu dirancang lebih awal.

Siasatan kes serangan terhadap anak lelaki Rafizi kini diambil Jabatan Siasatan Jenayah (JSJ) Bukit Aman.

Perkara berkenaan dimaklum-

kan Ketua Polis Selangor, Datuk Shazeli Kahar, yang dilaporkan siasatan Bukit Aman itu selaras keperluan siasatan lebih menyeluruh dan berpusat.

Keep an eye out for red flags, parents urged

PETALING JAYA: An eye screening at school revealed that Abdullah was short-sighted at the grand "old" age of seven.

It was a shock for his parents, Dr Wan Muhammad Fitri Wan Baharuddin, 38, and Nurhazirah Mohd Nasir, 38.

"He came back from school with a letter about his condition.

"So ever since then he has been wearing spectacles, and now he is in Year Four."

The early detection helped him read and see better, said the couple from Shah Alam.

"With his condition, we keep his screen time to one hour daily, make sure he's at a distance watching television, and give him eye support supplements. All of this has helped him," they said.

They advise parents not to allow children to spend time in front of screens at an early age.

Nowadays, even toddlers can be seen with gadgets, but parents must weigh the pros and cons, and not get pressured into letting their children start using screens too early, they said.

Lecturer Nik Mohd Naquiddin Nik Ahmad, 38, has two children with myopia, with his son diagnosed at 10 and his youngest daughter at five.

The father of four from the Klang Valley said he and his wife found out about their son's condition when they noticed he was struggling to read and decided to have his sight tested.

"Perhaps it is genetics that my children have myopia, as my whole family wears spectacles.

"But screen time for the kids is restricted – if you don't address the issue quickly, it can affect their daily lives, not just with reading and writing but also socially due to their bad vision.

"If you don't address the issue quickly, it can affect their daily lives."

Nik Mohd Naquiddin Nik Ahmad

"So when my kids were struggling, we didn't hesitate to see the experts and help them get fitted with spectacles.

"You can also detect bad eyesight on your own by asking children to identify letters in charts or on billboards if you suspect they might have an eye condition," he said.

When homemaker Faridah Abdul's daughter was diagnosed with myopia in 1997, there wasn't enough information available.

The 55-year-old from Ampang found out after she noticed her daughter was having difficulty with reading in preschool.

"We took her to a specialist, and she was unable to see the letters on the eye chart.

"The doctor said that her eyeball was not round but more oval in shape, so she had to start wearing spectacles at the age of four.

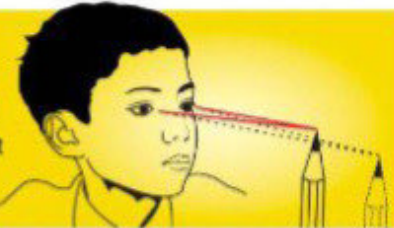
"My daughter also had a habit of watching television from close up, so her eyes were affected by that too.

"I think nowadays there's more advancement in this field, with new technologies, so parents can detect it easily.

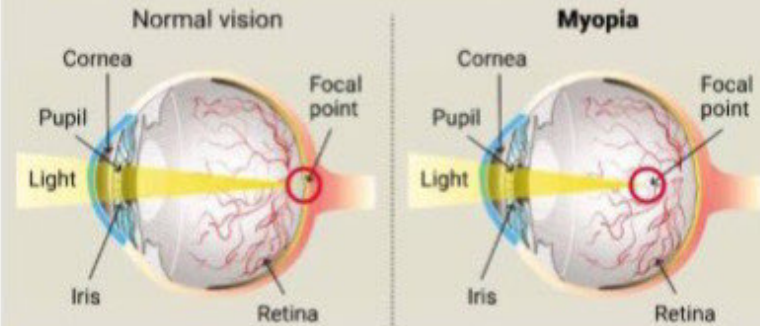
"But with the use of gadgets, I think it is aggravating the situation among children," she said.

What is myopia

Myopia is a serious eye problem, also known as short-sightedness, where a person cannot see distant objects clearly. It is common among primary school students.



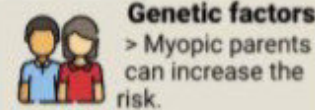
This occurs because the light rays entering the eyes are focused in front of the retina instead of on the retina itself.



Signs and symptoms

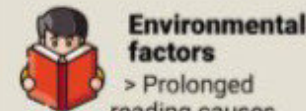
- Squinting or partially closing the eyelids when seeing at a distance
- Holding books or gadgets too close to the face
- Frequent headaches and eye rubbing
- Poor performance in school

What causes myopia



Genetic factors
> Myopic parents can increase the risk.

> East Asian families and females have a higher risk.



Environmental factors
> Prolonged reading causes visual stress.

> Extended use of digital devices increases the risk.

How to prevent myopia



Spend at least **2 hours** outdoors daily.



Keep screen time under **2 hours**.



Hold books an arm's length away.



Rest your eyes for **20 seconds** every 20 minutes when using digital devices.

Source: Malaysia Advocacy for Myopia Prevention (MAMP), International Myopia Institute and World Health Organisation (WHO)

The Star graphics

Too many kids with eye problems

Lack of outdoor play, too much screentime damaging sight of children

PETALING JAYA: Experts warn that without intervention, childhood myopia may soon become the norm rather than the exception in Malaysian classrooms.

The condition is spiralling up nationwide, they said, but it can still be curbed if parents encourage outdoor play, limit screentime to 30 minutes a day and ensure children undergo annual eye check-ups starting at age five.

According to them, up to one in three Malaysian schoolchildren under 15 now suffer from myopia, or short-sightedness, with prevalence rising rapidly from 7% in Year One to 30% by the time they enter secondary school, driven largely by excessive screen use and limited time outdoors.

Prof Dr Mae-Lynn Catherine Bastion, a vitreoretinal diseases and surgery lecturer at Universiti Kebangsaan Malaysia, said recent screenings revealed an alarming snapshot of post-pandemic childhood vision in urban areas.

Under the Malaysian Advocacy for Myopia Prevention Board, her team screened 459 children aged six to 12 from four Klang Valley schools between 2022 and 2024.

"We found that 57.3% had

refractive errors. Of these, 33.6% were myopic, 41% had astigmatism, 7.4% were hyperopic and 2% had high myopia.

"The highest prevalence of myopia was at age nine, at 44.7%," she said when contacted yesterday.

She warned that elongation of the eyeball caused by myopia is irreversible and could increase the risk of complications such as early cataracts and retinal conditions in adulthood.

"Lazy eye, or amblyopia, is most responsive to treatment before age nine," she added, stressing the need for early detection.

Dr Bastion advised limiting near work, like screen use, encouraging outdoor play and following medical advice when using corrective methods such as contact lenses.

"If both parents are short-sighted, the child's risk is higher. Eye checks should begin in preschool, or at least by age seven," she said.

She also urged the Health Ministry to collaborate closely with the Education Ministry, and called for Malaysia to follow countries like Hong Kong,



Singapore and Taiwan where schools have made outdoor time mandatory.

"Don't wait for the numbers to spike before acting," she added.

Optometrist Mohd Abdul Latif Abdul Rahman said prolonged gadget use, reduced daylight exposure and rapid urbanisation have all contributed to the surge in myopia among the young.

He said many children go undiagnosed until their vision deteriorates significantly, often affecting their academic performance.

"Parents often overlook signs like squinting, headaches or their child moving closer to the television or board. By the time they notice, the condition has already progressed," he said.

On whether girls are more susceptible to myopia, as highlighted in a 2023 study by the Inter-

national Myopia Institute, Abdul Latif said hormonal and behavioural differences play a role.

"Oestrogen can cause eyeball elongation, and girls generally spend less time outdoors than boys," he said.

He also encouraged routine vision screening from age five, even if symptoms are not obvious, as many children assume blurry vision is normal.

He added that natural sunlight has been shown to reduce the risk of developing myopia by up to 50%.

"Sunlight helps slow the elongation of the eyeball, which is the key factor in myopia progression.

"Also, children should not have more than 30 minutes of uninterrupted screentime. Breaks are crucial," he said.

Clinical paediatric optometrist Rebecca Lee Sin Yen said early patterns of vision problems are already visible among younger children.

"Based on our screenings, about one-third of preschoolers aged five to six are unable to see clearly in class.

"By the end of primary school, nearly half of Malaysian children

develop myopia," she said.

She attributed the trend to urban lifestyles, lack of outdoor play and excessive screen exposure.

Without timely action, she said, many children risk developing high myopia, which significantly increases the chance of retinal disease later in life.

Lee urged parents, educators and communities to treat children's vision as a shared responsibility.

"Regular eye checks, at least two hours of outdoor play and healthy screen habits like the 20-20-20 rule are essential," she said, referring to the practice of looking at something 20 feet away for 20 seconds every 20 minutes of screen use.

She said schools can help by rotating seats, ensuring adequate lighting and integrating outdoor activities into the daily routine.

"For children at higher risk, early intervention – including special lenses, orthokeratology or medicated eye drops – can help slow progression.

"Early detection is key so that kids can see clearly now and protect their sight for life," she added.

What other Asian countries are doing

PETALING JAYA: From stricter homework rules to nationwide vision screening, other countries are rolling out strategies to curb the rise of myopia, or shortsightedness, among children.

According to Singapore's Health Ministry, the Health Promotion Board's National Myopia Prevention Programme conducts regular screenings in preschools and schools.

The initiative also runs public campaigns and workshops to help parents instil good eyecare habits in their children while encouraging outdoor play.

Children who need glasses are referred to specialists, with subsidies and free lenses provided to those from lower-income families.

In China, myopia prevention has been elevated to a national strategy, involving multiple ministries and strict accountability measures.

Schools are required to reduce homework, impose stricter limits on screen time, and ensure students spend at least two hours outdoors daily.

The government has also expanded optometry training, tightened regulations on products making false claims, limited for-profit cram schools, and launched campaigns urging families to adopt healthier eyecare practices.

In Japan, eye health awareness is reinforced through "Eye

'More than half of the world's teens could be short-sighted by 2050'

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Protection Day" every Oct 10, led by the government and the Japanese Ophthalmologists Association.

Schools and homes also conduct educational programmes to instil better eyecare habits from a

young age.

While many countries are stepping up prevention efforts, a global study warns that more than half of the world's teenagers could be short-sighted by 2050.

The research, published in the *British Journal of Ophthalmology*, found that the prevalence of myo-

pia has already tripled since 1990, with nearly one in three children and adolescents worldwide now affected.

If current trends continue, some 740 million young people may struggle to see clearly at a distance within the next 25 years.

East Asia remains the epicentre of the problem, with Japan reporting nearly 86% of children being short-sighted, followed by South Korea at 74%, and Russia at 46%.

The Covid-19 pandemic further accelerated the problem, as children spent long hours indoors and on digital devices at the height of

the pandemic when movement was restricted.

Experts warn that without urgent intervention, modern lifestyles dominated by screens, early schooling and limited outdoor time will continue to fuel a surge in short-sightedness among the next generation.

Thomson Medical unveils Johor Bay

PETALING JAYA: Thomson Medical Group (TMG) has unveiled its landmark Johor Bay mega development, an RM18bil gross development value (GDV) project set to transform the Johor-Singapore Special Economic Zone (JS-SEZ).

The 26-acre freehold master plan will be anchored by the Thomson Hospital Iskandariah, alongside specialist suites, aged care, and assisted living facilities.

Complementing this healthcare nucleus will be luxury residences, a five-star hotel, commercial spaces, and lifestyle precincts – positioning Johor Bay as the “Marina Bay of Johor.”

Strategically located just 1.2km from the future rapid transit system station at Bukit Chagar, Johor Bay is designed as an integrated ecosystem for cross-border healthcare, urban living, and long-term investment.

Phase One, valued at RM3.1bil, includes the hospital and a 47-storey luxury residential tower with 180 exclusive units.

This phase is expected to generate more than 1,200 jobs, contributing to the JS-SEZ's wider goal of creating 20,000 skilled jobs over five years.

TMG executive vice-chairman Kiat Lim said: “The time is right: economic tailwinds, infrastructure momentum, and demographic shifts are converging. Johor Bay will shape the skyline and future of the JS-SEZ for years to come.”

Keeping abreast of cancer traits

Joint initiative offers underprivileged women screenings and support

A FREE mammogram programme aims to provide screenings to 4,000 underprivileged women aged 40 to 65 nationwide through 17 panel hospitals.

Participants of the programme offered by Etiqa Life Insurance Bhd in collaboration with National Cancer Society of Malaysia (NCSM) will also receive a digital self-breast examination kit that can help keep future examinations on track.

Etiqa chief executive officer Leong Su Yern said with the launch of Phase 7 of the programme, Etiqa reaffirms its commitment to ensuring that underprivileged women have access to early breast cancer detection.

"Together with NCSM, we envision a future where breast cancer is detected early, treated effectively and one day will no longer be a threat to loved ones and friends," said Leong.

The digital self-breast examination kit will allow women to enrol in the National Cancer Screening Registry (NCSR), providing them with prompts to continue their self-breast examinations and annual notifications to undergo a mammogram.

Materials in the kit will also be in multiple languages to eliminate language-related barriers, Etiqa said in a press release.

The programme at Dataran Maybank in Kuala Lumpur was launched by

Communications Minister Datuk Fahmi Fadzil. Also present was NCSM president Datuk Dr Saunthari Somasundaram.

At the event, more than 200 women took part in interactive workshops on breast health awareness and hands-on self-examination techniques.

Dr Saunthari said early detection was the cornerstone of effective breast cancer treatment.

"By offering free mammograms and empowering women with self-examination kits in multiple languages, we are helping remove critical barriers to care."

Etiqa's free mammogram programme has screened 34,595 women since 2017.

The company has committed RM11.7mil to fund free screenings for underprivileged women nationwide.

In Phase 5, the mission to extend healthcare access to underserved communities was realised through the introduction of the Etiqa National Mobile Screening Clinic, an initiative fully funded by Etiqa and operated by NCSM.

The mobile clinic provides cancer screening services, including breast, cervical and prostate screenings directly to communities across both rural and urban Malaysia.

To date, over 50,000 Malaysians have benefitted from these mobile screenings.

Fahmi (second from right) visiting a booth during the programme launch in Kuala Lumpur.



SAWAN merupakan satu keadaan kesihatan yang melibatkan gangguan pada sistem saraf otak, sehingga menyebabkan pesakit mengalami kekejangan otot secara tiba-tiba dan tidak terkawal.

Keadaan ini berlaku apabila berlaku gangguan atau lonjakan isyarat elektrik dalam otak, yang membawa kepada tindak balas fizikal seperti kejang otot, tidak sedarkan diri, mulut berbuih atau mata terbeliak. Sawan boleh berlaku kepada sesiapa sahaja, namun lebih kerap menyerang bayi, kanak-kanak, atau individu yang menghidap penyakit tertentu seperti epilepsi.

Terdapat dua jenis sawan, iaitu sawan fokal dan sawan keseluruhan. Sawan fokal adalah sejenis renjatan elektrik yang berlaku pada sebahagian kecil di dalam otak. Manakala sawan keseluruhan merupakan renjatan elektrik yang berlaku kepada keseluruhan struktur otak.

Sawan boleh disebabkan oleh pelbagai faktor, punca ini haruslah dikenal pasti sebagai langkah berjaga-jaga apabila individu diserang sawan. Punca utama berlakunya sawan adalah demam panas, terutama bagi bayi dan kanak-kanak. Ini disebabkan oleh, suhu yang tinggi membawa kepada renjatan elektrik ke dalam otak. Selain itu, epilepsi, iaitu keadaan kronik yang dicirikan oleh sawan berulang akibat pelbagai faktor, termasuk faktor genetik. Punca-punca lain bagi sawan ialah kecederaan kepala, jangkitan otak, kurang tidur, tekanan, perubahan hormon dan banyak lagi.

Gejala sawan berbeza-beza bergantung kepada jenis dan tahap keparahannya. Antara tanda-tanda seseorang mengalami sawan ialah kekejangan seluruh badan, hilang kesedaran, mata terbeliak, lidah tergigit, kaki dan tangan mungkin bergerak tanpa kawalan, buih keluar dari mulut, serta tidak memberi respons ketika dipanggil. Keadaan ini biasanya berlaku dalam tempoh beberapa saat hingga beberapa minit, namun boleh membahayakan nyawa sekiranya tidak diberikan rawatan segera.

Rawatan sawan bergantung kepada punca serangan. Bagi serangan sawan yang berpunca daripada demam panas, ubat demam harus diberi dengan segera bagi mengelakkan suhu badan terlalu tinggi. Seperti demam, rawatan terhadap faktor lain juga perlu diberikan bagi mengelakkan serangan sawan berlaku.

Langkah-langkah pertolongan cemas ketika seseorang mengalami sawan amat penting diketahui oleh semua orang. Apabila seseorang diserang sawan, mereka perlu diletakkan di tempat yang rata dan selamat, dan kepala perlu dialas dengan sesuatu yang lembut seperti bantal atau kain. Mangsa perlu dibaringkan dalam posisi mengiring dan pakaian di sekitar leher harus dilonggarkan. Mangsa tidak boleh dipegang dengan kuat atau dimasukkan sesuatu ke dalam mulut, kerana tindakan ini boleh mencederakan mereka. Selepas sawan reda, mangsa perlu dipantau dan dibawa ke hospital untuk pemeriksaan lanjut, terutamanya jika ini kali pertama mereka diserang sawan.

Kesimpulannya, sawan merupakan satu keadaan perubahan yang serius dan boleh berlaku secara tiba-tiba. Masyarakat perlu diberi pengetahuan yang mencukupi tentang punca, gejala dan langkah pertolongan cemas agar dapat membantu mangsa sawan dengan berkesan. Dengan kesedaran dan pengetahuan yang betul, nyawa pesakit dapat diselamatkan dan komplikasi dapat dikurangkan.

SAWAN

Apa yang Perlu Anda Tahu

