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# Doctors turned down jobs over location, career concerns

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**PETALING JAYA:** Some of the key reasons why contract medical officers turned down permanent appointments in public healthcare facilities include a reluctance to serve outside the peninsula and concerns over career progression in specialist fields.

According to Health Minister Datuk Seri Dr Dzulkefly Ahmad (*pic*), these were the reasons cited by a total of 414 contract medical officers who rejected permanent appointments and resigned between 2023 and June this year.

This figure represents 3.5% of the 11,901 officers offered permanent posts during the same period.

Dzulkefly said the main reason given was that they were not ready to relocate and serve in Sabah, Sarawak or Labuan.

"These officers prefer working in urban healthcare facilities. They are of the view that serving in rural and remote areas offers limited opportunities for career advancement in specialist fields."



"There are also personal factors. Some wish to care for family members, be closer to their partners or are facing health, logistical or financial issues," he said in a written parliamentary reply dated July 31.

Dzulkefly was responding to a question from Mohammed Taufiq Johari (PH-Sungai Petani), who asked about the number of healthcare officers leaving the Health Ministry due to the lack of permanent placement.

He said the government is committed to retaining medical officers through several initiatives, including an 8% salary increase implemented on Dec 1 last year and a further 7% increase set to begin on Jan 1 next year.

The Health Minister also reaffirmed the ministry's commitment to hiring 4,352 medical officers this year, in line with Prime Minister Datuk Seri Anwar Ibrahim's announcement on July 23.

Dzulkefly added that the ministry is also committed to lateral appointments at Grade UD10,

which comes with higher pay compared to Grade UD9, and is offering a full-salary working holiday scheme for permanent medical officers, along with a specialist training programme under the Health Ministry scholarship for contract officers.

He also said that from July 1, the ministry began introducing pre-gazette incentive payments for officers undergoing supervised work experience.

In addition, the ministry is exploring partnerships with state governments to offer incentives aimed at retaining healthcare workers in the public sector.

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D/Nenen 4 Ogos 2025  
**Gagal** (Isnin)

## pamer harga ubat: Kompaun premis kesihatan swasta mulai 1 Okt.

**PUTRAJAYA:** Kementerian Kesihatan (KKM) akan mengenakan tindakan kompaun terhadap fasiliti kesihatan swasta yang gagal mematuhi peraturan pemaparan harga ubat mulai 1 Oktober ini.

Menurut kenyataan KKM, fasa penguatkuasaan pendidikan akan diteruskan sehingga 30 September depan menerusi lawatan pemeriksaan dan sesi advokasi.

Katanya, surat peringatan boleh dikeluarkan kepada premis yang masih gagal mematuhi keperluan tersebut.

"Namun, mulai 1 Oktober 2025, kompaun boleh dikenakan terhadap kesalahan yang berulang.

"Penguatkuasaan penuh pula akan bermula pada 1 Januari 2026," katanya hari ini.

Inisiatif pemaparan harga ubat di kemudahan jagaan kesihatan swasta dan farmasi komuniti mula dilaksanakan sejak 1 Mei lalu mengikut Perintah Kawalan Harga dan Antipencatutan (Penandaan Harga Bagi Ubat) 2025 [P.U.(A) 141/2025] di bawah Akta Kawalan Harga dan Antipencatutan 2011 [Akta 723].

Langkah ini merupakan kerjasama strategik antara KKM dan Kementerian Perdagangan Dalam Negeri dan Kos Sara Hidup (KPDN), dalam usaha meningkatkan ketelusan harga dan melindungi pengguna daripada pencatutan.

KKM berkata, sepanjang tempoh tiga bulan pertama pelaksanaan, sebanyak 842 fasiliti terdiri daripada klinik perubatan, klinik pergigian, hospital swasta dan farmasi komuniti telah diperiksa.

"Hasilnya, sebanyak 57 peratus mematuhi keperluan pemaparan harga ubat dengan tahap kepatuhan yang memuaskan," katanya.



# Medicine price display rule to stay

## 'Educational' gradual implementation till Sept 30, says Health Ministry

By **FAZLEENA AZIZ**  
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**PETALING JAYA:** The enforcement of the medicine price display requirement under the Price Control and Anti-Profiteering Act 2011 will continue in stages through a process of education, inspections, and advocacy until Sept 30.

The Health Ministry said in a statement that warning letters may be issued for non-compliance, followed by the issuance of compounds from Oct 1.

Full enforcement is scheduled to begin on Jan 1 next year.

The medicine price display initiative, which applies to private healthcare facilities and community pharmacies, was first implemented on May 1.

"This initiative is a strategic collaboration between the Health Ministry and the Domestic Trade and Cost of Living Ministry.

"An educational enforcement approach was adopted for the first three months, ending July 31.

"During this period, 842 facilities, including medical and dental clinics, private hospitals, and community pharmacies, were inspected, with 57% found to be satisfactorily complying with the price display requirement," the ministry said yesterday.

Both ministries also acknowledged that a judicial review had been filed in the High Court by seven organisations representing medical and dental practitioners, as well as one private medical practitioner, to challenge the

validity of the directive.

However, the ministry clarified that no court order has been issued to suspend the implementation or enforcement of the ruling.

Former Medical Practitioners Coalition Association of Malaysia president Dr Raj Kumar Maharajah said most clinics are not in favour of the rule but have complied regardless.

He argued that the directive is misplaced, as private clinics do not operate like pharmacies and do not display or sell medicines over the counter.

"Unlike pharmacies that sell medicines, our permits allow us to dispense medication only after consultation, examination and investigations.

"Customers rarely come just to buy medicine and the drugs are

not displayed on shelves.

"When we introduce laws, they must make sense.

"This rule seems more like a feel-good measure to reassure the public. But in reality, it serves no purpose," he said.

On the question of compliance, Dr Raj said clinics are ready for full enforcement and have nothing to hide.

Federation of Private Medical Practitioners' Associations Malaysia secretary Dr Shanmuganathan Ganeson said the association understands the enforcement is still in its educational phase until the end of September and that compounds are unlikely during this period.

He said members have been advised to cooperate during inspections and continue engag-

ing in good faith.

"We've filed a judicial review, so we'll refrain from making detailed comments while the matter is before the court.

"If any clinic experiences overzealous or premature enforcement, we encourage them to inform the federation's secretariat so we can monitor and respond accordingly," he said.

The directive, effective from May 1, requires all private healthcare facilities and community pharmacies to display prices of all medicines intended for human use.

This includes prescription and non-prescription drugs, over the counter products, traditional medicines, health supplements, and extemporaneously prepared products.



# Warning to **stay away from** 'Magic Mushroom' vape liquid

► Potential life threatening effects spook even hardened drug addicts

BY IKHWAN ZULKAFLEE  
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**PETALING JAYA:** A vape liquid dubbed "Magic Mushroom" is causing such dangerous side effects that even hardened drug addicts are steering clear, warning others that one dose could trigger panic, blackouts and total loss of control.

Marketed as a "natural hallucinogen", the liquid is in fact laced with potent synthetic drugs.

Users say the effects are potentially catastrophic.

Speaking to *theSun* in a northern state, several drug users issued the same warning: "This is not something to play with."

Even veteran addicts accustomed to methamphetamine and opioid-based drugs are sounding the alarm.

Wadi, 42, who has lived with a history of substance abuse, described the effects of a single dose.

"First-time users usually feel a tightness in their chest, followed by paranoia. I have tried it, the panic was unbearable. I felt like I was dying."

According to Wadi, the high from the substance is not just powerful, it is destabilising. Users often lose control of their behaviour, experiencing temporary blackouts

and erratic outbursts.

"Even for people like us who are used to drugs, we do not want to take this 'Magic Mushroom'. The high is intense, it makes your head buzz and sometimes, you cannot remember what you did."

Wadi said teenagers and school students are vulnerable due to the discreet nature of the drug. Mixed into flavoured vape liquids, it can be inhaled in public spaces, including shopping malls, without raising suspicion.

A check by *theSun* revealed that several online vendors are selling the liquid, pricing it as low as RM1

per drop, making it accessible to youths and first-time users.

Dabok, 48, a palm fruit harvester and recovering heroin addict, also admitted he could not handle the effects.

"Once you inhale it, your body shuts down. You are not in control. You do not know who you are, where you are or what you are doing. The high might only last 30 minutes, but those 30 minutes could destroy everything."

"Do not even think about driving after using it."

Despite its name, there is no link between the vape liquid and

psychedelic mushrooms. According to the National Poison Centre at Universiti Sains Malaysia, which issued a public alert last August, the drug is a synthetic chemical cocktail, not a natural product.

The centre warned that users could suffer from confusion, psychosis and erratic behaviour, with the potential for lasting psychological damage.

In January, National Anti-Drug Agency director-general Datuk Ruslin Jusoh confirmed that "Magic Mushroom" is a form of synthetic cannabis, processed for consumption through vaping.



Dabok recounting his experience, saying it made him delirious and unaware of his actions and whereabouts.



# Peniaga vape akur tutup kedai, dakwa rugi RM5 juta

Oleh NURSYASYA NADHIRAH  
ZABIDI dan ASYRAF MUHAMMAD

**KUALA TERENGGANU** – Kira-kira 160 pengusaha premis rokok elektronik atau vape di negeri ini mendakwa menanggung kerugian keseluruhan kira-kira RM5 juta susulan pengharaman jualan berkuat kuasa Jumaat lalu.

Pengerusi Pertubuhan Peniaga Vape Melayu Terengganu, Muhd. Kamaruzaman Mahmud berkata, kesemua mereka akur untuk menutup perniagaan yang telah diusahakan sejak kira-kira 13 tahun lalu.

"Kami sepakat menutup perniagaan ini dalam keadaan kecewa dan keliru. Tambah kesal, seolah-olah pandai-pandailah kami sendiri mahu bangkit mencari perniagaan lain.

"Tidak pernah ada panggilan dan pertemuan apatah lagi bantuan daripada kerajaan negeri Terengganu," dakwanya ketika dihubungi Kosmo! di sini semalam.

Muhd. Kamaruzaman mendakwa, pengusaha-pengusaha vape Terengganu kini terpaksa berjuang sesama sendiri mencari peluang perniagaan baharu bagi kelangsungan hidup.

Beliau berkata, Pertubuhan Peniaga Vape Melayu Terengganu juga sedang membantu ahli-ahli menjual stok produk berkaitan vape yang masih tersisa ke negeri-negeri lain yang masih belum melaksanakan pengharaman.

"Ikhtiar ini sekurang-kurangnya dapat kurangkan kerugian yang terpaksa kami tanggung.

"Tempoh tiga bulan diberi tidak mencukupi untuk menghabiskan stok sedia ada apatah lagi mencari tapak untuk beralih ke bidang lain tanpa bantuan mana-mana pihak," dakwanya.

Muhd. Kamaruzaman mendakwa, Pertubuhan Peniaga Vape Melayu Terengganu tetap dengan pendirian menganggap keputusan larangan jualan

diambil kerajaan negeri terlalu drastik.

Beliau berkata, sepatutnya langkah kawal selia diambil terlebih dahulu seperti ditetapkan mengikut Akta Kawalan Produk Merokok untuk Kesihatan Awam 2023.

"Pelaksanaan pengharaman industri vape di Terengganu bertentangan dengan dasar Kerajaan Pusat.

"Akta Kawalan Produk Merokok untuk Kesihatan Awam 2023 sudah lengkap sebagai mekanisme kawalan bagi memastikan produk vape dikawal daripada segi umur pengguna, spesifikasi nikotin, pelesenan dan amaran kesihatan. Kenapa tidak ikut akta itu sahaja?" dakwanya.

Sementara itu, di Perlis, tinjauan Kosmo! di beberapa kedai vape antaranya di sekitar Jalan Bukit Lagi, Jalan Bintong dan Jalan Raja Syed Alwi, di sini, mendapati semua pengusaha terlibat mematuhi larangan jualan tersebut.

Tinjauan mendapati kebanyakan kedai-kedai terlibat tidak lagi beroperasi dan menutup premis perniagaan mereka susulan penguatkuasaan arahan itu.

Seorang pengusaha yang ingi dikenali sebagai Azim, 32, berkata, pihaknya akur dengan pelaksanaan larangan itu dan merancang untuk menjalankan perniagaan lain.

"Saya belum buat sebarang keputusan lagi dan masih fikirkan perniagaan lain yang sesuai diusahakan," katanya semalam.

Azim berkata, pihaknya sebelum ini juga terpaksa menawarkan jualan harga borong kepada pelanggannya bagi menghabiskan bekalan sedia ada untuk mengelakkan kerugian besar.

"Lebih bekalan yang ada mungkin akan dijual kepada kenalan-kenalan terdekat sahaja dan bukan lagi di kedai untuk elak kerugian," katanya.



**SALAH** sebuah kedai vape di Jalan Sultan Ismail, Kuala Terengganu yang ditutup susulan larangan jualan.

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Pelaksanaan pengharaman industri vape di Terengganu bertentangan dengan dasar Kerajaan Pusat."

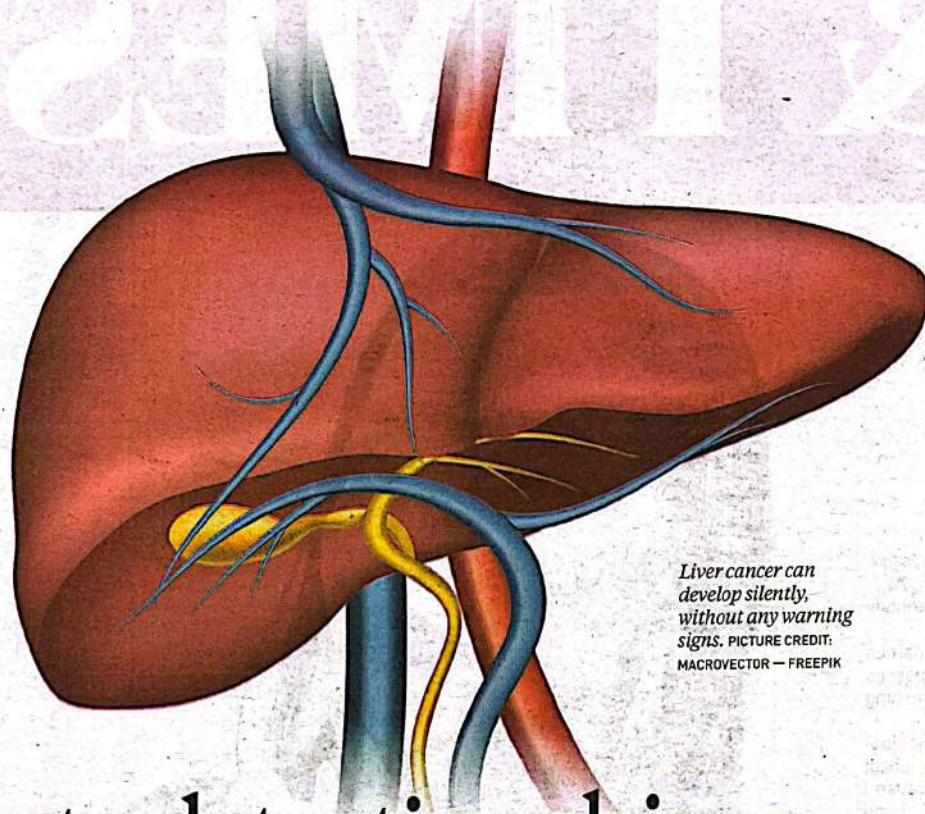
Bermula 1 Ogos lalu, kerajaan Terengganu dan Perlis mengharamkan sepenuhnya penjualan dan penggunaan vape selepas Kelantan, Johor dan Kedah dalam usaha membanteras budaya rokok elektronik dalam kalangan rakyat.

Langkah ini dilihat sebagai tindakan tegas demi kesihatan awam, khususnya dalam melindungi golongan muda daripada tabiat merokok moden yang kini semakin menular.



**PENIAGA** terpaksa menjual lebih stok kepada kenalan atau pelanggan di negeri lain bagi mengelak kerugian.





Liver cancer can develop silently, without any warning signs. PICTURE CREDIT: MACROVECTOR — FREEPIK

## Late detection drives high liver cancer deaths

**L**IVER cancer, particularly hepatocellular carcinoma (HCC), remains one of the leading causes of premature death in Malaysia.

It is the eighth most common cancer in the country, yet it has the second-lowest five-year survival rate among major cancers at just 12.8 per cent, according to the Health Ministry.

Many cases go undetected until the disease reaches its late stages. One of the biggest barriers to improving liver cancer outcomes is the lack of effective public screening programmes, says Sunway Medical Centre Velocity consultant general, hepatobiliary pancreatic and liver surgeon Dr Johann Faizal Khan.

Alarming, 74 per cent of liver cancer cases in Malaysia are diagnosed as Stage 4, where treatment options are limited and outcomes significantly poorer.

The absence of early symptoms should not be mistaken for good health, says Dr Johann.

Many individuals who do not drink alcohol or engage in what are typically considered high-risk behaviours assume they are not at risk. In reality, liver cancer can develop silently, without warning signs.



One of the biggest barriers to improving liver cancer outcomes is the lack of effective public screening programmes, says Sunway Medical Centre Velocity consultant general, hepatobiliary pancreatic and liver surgeon Dr Johann Faizal Khan. PICTURE CREDIT: SMCV

There are a range of effective treatment options available today. These

include minimally invasive procedures, such as ablation therapies that offer a viable alternative to open surgery by reducing surgical trauma, blood loss and recovery time.

This method may also serve as a bridging treatment for patients awaiting liver transplantation or as an option in cases of recurrence, where repeated surgery may risk damaging healthy liver tissue.

However, not all tumours are suitable for minimally invasive approaches.

"Larger tumours, or those requiring complex reconstructions, may still necessitate traditional open surgery, especially when complete resection

is the goal," says Dr Johann.

For patients with more extensive liver damage, a liver transplant may be

required, involving the replacement of the entire diseased liver with a healthy donor organ.

Even after successful treatment, patients with underlying conditions, such as chronic viral hepatitis, liver fibrosis or cirrhosis, remain at lifelong risk. While treatment can halt progression, continued surveillance is critical to detect recurrence.

Equally important is the patient's role in maintaining liver health. Follow-up care goes beyond medical appointments, with patients strongly advised to adopt healthier lifestyle habits, including consuming a balanced diet and avoiding alcohol, smoking and unregulated traditional medicine, all of which play a critical role in supporting long-term liver health and recovery.

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