Kampus segar tanpa asap rokok

SAUDARA PENGARANG,

KETEGASAN

Penguatkuasaan kampus sebagai kawasan larangan merokok juga perlu diriung tindakan berbentuk advokasi dan pendidikan kepada warga kampus mengenai bahana merokok. Justeru ia memerlukan kerjasama semua pihak dalam membangun budaya ini yang digerakkan secara holistik dan mampam oleh pensyarah, Majlis Perwakilan Pelajar dan pentadbir universiti. Jika masing-masing memainkan peranan, tidak mustahil sasaran untuk menurunkan jumlah perokok di Malaysia dapat tercapai kepada 15 peratus menjelang 2025.

"Apabila mahasiswa tidak terdedah dengan rokok secara langsung di dalam kampus, fokus mereka kepada aktiviti pengkuliahan lebih baik, persekitaran udara kampus juga pastinya lebih bersih dan segar."

ZAINI OTHMAN
Pentadbir USIM
Ibu bapa diminta patuhi jadual imunisasi

**Putrajaya:** Kementerian Kesihatan meminta ibu bapa supaya mematuhi Jadual Imunisasi Kebangsaaan dan tidak mempercayai propaganda tidak benar mengenai kebuukan vaksin seperti digembar-gemburkan di media sosial.

Ketua Pengarah Kesihatan, Datuk Dr Noor Hisham Abdullah, berkata pihaknya mengait menerima banyak maklumat tidak sah berkaitan dengan vaksin di laman media sosial.

Malah, beliau berkata, terdapat golongan serta individu yang secara terang-terangan mempengaruhi orang awam untuk menolak vaksin dengan fahaman yang salah melalui penyebaran maklumat tidak sah.

"Kebanyakan maklumat tidak sah mengenai vaksin digembar-gemburkan mereka yang taasub dengan dakwaan vaksin dan Program Imunisasi Kebangsaan dilaksanakan kerajaan tidak memberi manfaat dan menimbulkan banyak kesan buruk.

**Dakwaan tak tepat**

"Pada hakikatnya dakwaan itu tidak tepat. Kementerian sentiasa memantau penyebaran fahaman yang salah terutama di media sosial oleh individu tertentu yang menentang vaksin demi menarik lebih ramai ibu bapa menyertai kumpulan mereka.

"Perbuatan tidak bertanggungjawab golongan ini menyebabkan usaha kementerian berdepan dengan rintangan dan kesannya adalah peningkatan kes penyakit berjangkit yang boleh dicegah oleh vaksin," katanya dalam kenyataan, semalam.

Katanya, hasil pemantauan mendapat wujud ibu bapa yang menolak pemberian vaksin kepada anak mereka selepas terpengaruhi dengan maklumat tidak tepat yang disebarkan.

Dr Noor Hisham berkata, bilangan kes penolakan vaksin direkodkan di klinik kerajaan terus meningkat, iaitu dari pada 637 kes pada 2013 kepada 1,603 kes pada 2016.

Bagaimanapun, beliau berkata, ada sedikit penurunan kes penolakan vaksin pada 2017, iaitu kepada 1,404 kes berikutan usaha advokasi kementerian secara meluas bersama pelbagai pihak, termasuk pertubuhan bukan kerajaan serta sukarelawan kumpulan media sosial perubatan.
AKHBAR : BERITA HARIAN  
MUKA SURAT : 59  
RUANGAN : WANITA

**DUA UBAT KEBANGSAAN**

**Bantu lindungi keluarga, sebar maklumat tepat**

**467 wanita dilantik hasil inisiatif Kementerian Kesehatan**

Oleh Halina Mohd Noor
halina_mndoc@bk.com.my

S

eralam 467 wanita yang turut berpartisipasi dalam Program Duta Kenali Ubat yang digalakan oleh Kementerian Kesehatan pada Sempena Hari Kesihatan Anak Kabinet pada 2012, apabila ia dianggap sebagai langkah cerdas dalam mencegah dan memberi sosialisasi maklumat kepada masyarakat.

Duta Kenali Ubat pada 2012 adalah program yang disampai kepada 467 wanita dari negeri Selangor, Pulau Pinang, Negeri Sembilan, Pahang, Melaka, Johor, Sabah dan Sarawak. Program tersebut dirancang untuk memberi kesedaran dan pengetahuan kepada masyarakat tentang pentingnya penggunaan ubat yang tepat dan benar.

Wanita yang dilantik sebagai Duta Kenali Ubat akan diberi pelatihan dan bimbingan dalam bidang penggunaan ubat yang benar dan tepat. Mereka akan ditugaskan untuk menyampaikan pesan tentang penggunaan ubat yang benar dan tepat kepada masyarakat melalui berbagai peluang yang ada, seperti media sosial, acara-acara komuniti, dan lain-lain.

Kementerian Kesehatan (Kes) melalui tiga program ini, yaitu Duta Kenali Ubat, Duta Kenali Ubat Kabinet, dan Duta Kenali Ubat Kabinet pada 2014, mampu mencapai pelbagai hasil yang signifikan. Duta Kenali Ubat Kabinet pada 2014, yang berjaya mencapai lebih daripada 100,000 orang peserta, adalah contoh yang baik.

Program ini dilaksanakan dengan bantuan dari sektor swasta dan masyarakat syarikat untuk mendapatkan pendanaan yang cukup. Program ini adalah satu langkah yang penting dalam upaya Kementerian Kesehatan untuk meningkatkan kesedaran dan pengetahuan masyarakat tentang penggunaan ubat yang tepat.

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MENYELAMI HIDUP ANDA

TEKAD BERHENTI MEROKOK

> Lihat muka 20 & 21
BERHENTI MEROKOK
Bak Bebas dari Penjara

Usaha berhenti merokok melibatkan kombinasi pelbagai cara seperti kaunseling, pengambilan ubat penggantian nikotin dan sebagainya yang boleh didapati menerusi program Klinik Berhenti Merokok di hospital atau klinik kerajaan.

SAP rokok berkepupup kecil berat, kabus dan beraraf bebas dari inje barbehsakan di kedai makan yang dikunjungi Faisal Mohd. Arshad, 45, bermula kelangsungannya pada petang itu disiarkan bagai menggunakan.

Basinya membimbing bapa kepada empat cahaya mata itu berasa pening dari lama. Tidak tahan dengan kadar asap Faisal itu, dia lantas biang dan bungin laju menegur kumpulan perokok terbesit supaya berhenti menghisap rokok berdekatan petangan lein.

"Ita bukanlah kata pertama berlaku. Pernah saya sampai bercengkeram urat dengan mereka namun sempai disabarkan interi. Saya bukan setak terpadu individu tidak dihentam, kawan-kawan yang merokok di hadapan saya pun kena juga.

"Secabnya saya betul-betul tidak tahan dengan bau asap rokok, ujar Faizal ketika ditemui K2 di Kuala Lumpur baru-baru ini.

Faisal sendiri hakikatnya merupakan bebas perokok. Usahawan itu mula merokok sejak bersekolah awal 20-an namun sudah meninggalkan tabiat itu selama lebih tujuh tahun.

Kiasannya bermula semula tahun 2011 apabila arah bapa yang juga sering perokok menghujah struk major. Faisal yang sering bergilir-gilur dengan adik-beradiknya membawa bapa mereka mengalami rujukan tuar dinasihat doktor supaya berhenti merokok.

"Terikat"

Ekoran itu, dengan rasa terpaksa, Faisal telah mendaftar untuk mengikuti program Klinik Berhenti Merokok di Klinik Primer Pasien Perubatan Universiti Kebangsaan Malaysia (KPP) Kuala Lumpur.

Dia boleh dikatakan perokok yang tegar dan berhenti merokok antara satu hingga dua katok sehari.


"Sekolah sama mengikut program berhenti merokok selama enam bulan, peserta yang berjaya diraikan dalam majlis grad weighting diberi bahan supaya berhenti merokok secara selar dalam keadaan yang disiapkan ke atas perkara.


"Alhamdulillah, sudah masuk tujuh bulan saya tidak merokok. Nurul untuk merokok itu masih ada terstamatnya jika duduk bersendirian dan tidak melakukan apa-apa.


Kementerian Kesihatan Malaysia (KKM) baru-baru ini telah mengeluarkan arahan larangan merokok di semua restoran dan premis makanan di negara ini berkuat kuasa 1 Januari lalu.
Untuk berbentuk merokok, orang ramai boleh menafsakan perkhidmatan Klinik Berhenti Merokok (KBM) yang terdapat di kebanyakan hospital atau klinik kerajaan.
Antara yang menyediakan perkhidmatan KBM ialah Pusat Perubatan Universiti Kebangsaan Malaysia (PPUKM) yang menawarkanannya di KPCC dan Hospital Canselor Tuan Guru Mohd Fauzi (GPFKM), Bandar Tun Razak.

Pakar Perubatan Keluarga KPCC, Prof. Madya Dr. Halinda Tukid mengatakan, mereka yang datang ke KBM lazimnya dirujuk oleh doktor yang memborokkan rawatan susulan bagi masa lalu kesihatan yang lain. Namun, ada yang mendapat masuk KBM secara sukarela.

Halinda ia menawarkan rawatan secara individu dan berkumpulan dengan tempoh permulaan mengambil masa empat bulan. Rawatan berkumpulan hanya dibuka dua kali setahun.

Menurutnya, sesi berkumpulan amat penting kerana perokok menerima sistem sokongan dan setiap peserta memberi semangat antara satu sama lain. Pada belan pertama, penyampaian dibuat tiga hingga empat kali kerana ia tempoh panjang untuk perokok yang sedang berusaha untuk berhenti merokok.

Katanya, selain kaunseling untuk membantu tabiat merokok, ubit juga digunakan bagi merawat ketagihan kepada nikotin yang terkampung dalam rokok.

Terdapat beberapa jenis ubit dan secara enaknya, ia terbukti kepada dua jenis iaitu ubit pengganti nikotin dalam bentuk gula-gula getah atau tabiat (gum) dan ubit terutama dalam bentuk pil.

Setiap peserta akan diniat untuk mengenali jenis ubit yang berasa sama dengan merek setelah mengambil kira masa lalu kesihatan yang ada dan cara hidup sekarang. Bagi tampaik, ia dibuat pada masa mana-mana bahagian badan yang kurang mengeluarkan peluh.

"Apa saja sesooring menyelaka rokok, ia boleh menghasilkan lebih 5,000 bahan berbahaya dan sekerkurang-kurangnya 70 daripada poin molekul cerabah bahan yang menyebabkan kanker. Tetapi perokok hanya ketagih terhadap satu bahan saja di dalam rokok iaitu nikotin. "Kadar nikotin di dalam ubit yang diberi ini mengandungi jumlah nikotin yang terkandung dalam rokok yang diambil setiap hari. Ia penting untuk membantu perokok mengatasi simptom atau gejala kecanduan nikotin di dalam tubuh mereka yang tidak lagi lagi merokok.

"Kadar nikotin ini akan dikurangkan secara perlahan-lahan sepanjang 12 minggu rawatan bagi memastikan tubuh badan menjadi sehat dengan keadaan tampa nikotin. Pada akhir rawatan, peserta tidak merasakan lagi nikotin sama ada daripada rokok atau ubit nikotin, jelasnya.

Antara simptom atau gejala kecanduan nikotin di dalam tubuh ialah sesooring ubit dan ubit tersebut tidak selesa, mengeluli, tidak dapat tidur, menjadi lemah dan tidak dapat mempertahankan tidur sehingga maga berikut ikut rasa tidak selesa.

Menurutnya, di PPUKM, sejak 2017 kempen berhenti merokok dipromosikan dengan giat kepada pasien pesakit kanker kerana kesan merokok lebih berbahaya kepada merokok.

Menurutnya, antara usaha yang diambil ialah dengan memberi penerangan kebaikan berhenti merokok kepada disabiliti merokok dalam memastikan mereka lebih bersehat.

(Ibar)

Menurutnya, kebiasaan merokok tersebut dibuat untuk mengurangkan kebaikan berhenti merokok.

(Parah)

Menurutnya, perokok yang sebaiknya tidur baik dan perokok yang sebaiknya tidur tidak.”
Kesempurnaan Kesiapan Masyarakat

Dalam menjalankan program vaksinasi, masyarakat perlu memahami dan mematuhi protokol kesehatan yang ditetapkan. Wajib untuk mengikuti pemeriksaan keagenan, tes antigen, dan vaksinasi. Masyarakat perlu diberi pengetahuan dan pelatihan tentang vaksinasi dan keagenan. Masyarakat perlu mematuhi protokol kesehatan yang ditetapkan oleh pemerintah.

Pengetahuan tentang vaksinasi perlu diberikan secara lisan dan tertulis. Masyarakat perlu diberi pengetahuan tentang efek samping vaksinasi, seperti demam, gatal-gatal, dan perasaan lelah. Masyarakat perlu mematuhi instruksi yang diberikan oleh tenaga kesehatan. Masyarakat perlu mematuhi peraturan yang ditetapkan oleh pemerintah.

Masyarakat perlu diberi pengetahuan tentang vaksin yang digunakan, seperti vaksin COVID-19, vaksin influenza, dan vaksin hepatitis B. Masyarakat perlu mematuhi instruksi yang diberikan oleh tenaga kesehatan. Masyarakat perlu mematuhi peraturan yang ditetapkan oleh pemerintah.

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Angkara Gerakan Anti Vaksin

Abdullah berkata, jika sinasni penolakan vaksin tersebut berterusan, kemungkinan penyakit - penyakit yang boleh dicabar oleh vaksin akan terus meningkat dan usaha kajian dalam mengalihkan Program Imunisasi Ke- bangsaan dan usaha advokasi bagi mencegah penyakit yang boleh dicabar oleh vaksin sejak ini menjadi sia-sia.

"Permaiannya KKM mendapat wujud ibu bapa yang memulakan perubahan vaksin kepada anak mereka serbati terpunggah dengan maksimakan tidak serasa yang dielexisir.

"Bilangan kes pendaikan vaksin yang direndahkan di klinik kajian terus meningkat dari 213 kes pada tahun 2013 kepada 1,467 kes (75.9%) pada tahun 2018.

Pada tahun 2018, KKM mengadakan enam kajian demokrat campak di lima se- mpena kes diadakan kajian, lima kajian diliterasi (empat kes tiada imunisasi, lima kes tiada imunisasi)." Analisis kes diadakan di Kuala Lumpur, Selangor.

"Kesan peringkat kajian kerja sambilan 22 kes hiburan, 19 kes tiada imunisasi.

KES DEMAM CAMPAK

KES KEMATIAN KANAK-KANAK

Dalam tahun lalu, Doa Hisham berkata, terdapat sedikit penurunan kes penolakan vaksin tahun 2017 iaitu kepada 1,404 kes berkurang daripada usaha advokasi yang dilakukan oleh KKM secara melekat bersama pelbagai pihak awam dan swasta ter-

masuk perubahan bukan keajaiban serta sukarelawan kompulsif media sosial per-

ubatan. "Menurut Noor Hisham, phialnya semasa meman-

tau penyertaan fahaman yang salah terutama dalam sosial oleh individu - in-

dividu sentiasa yang meren-


tung tangis demik ini sentiasa

lebih ramai terbukti menyen-

ti kumpulan mereka.

"KKM menyeru ibu bapa untuk memahami Jasaan Imunisasi Kebangsaan dan tidak memperdayai propa-

ganda tidak benar mengenai

kebocoran vaksin yang di-

gembar-gemburkan dalam per-

ubatan.

"KKM ingin menegaskan kepada semua pengambil per-

ubatan untuk memakau KKM dalam usaha men-

ingkatkan peranan im-

unes," utar beliau.

Masa-mana phial yang

mempunyai kemungkinan merupakan vaksin dan imuni-

sias disanksikan agar mem-

diskusikan fakta yang tepat
daripada laman sesawang

http://www.myhealth.gov.my

www.imunisenlive.my.
Health D-G advises parents not to believe in false news about vaccination on social media, write AUDREY VIJANDREN and HASHINI KAVISHTHI KANNAN

THE Health Ministry is appealing to parents to follow the National Immunisation Schedule for their children, and not to believe in false news and propaganda spread about vaccination on social media, which has led to a rise in communicable diseases.

Health director-general Datuk Dr Noor Hisham Abdullah said if the situation persisted, there was a possibility that diseases that could be prevented by vaccinations would continue to increase and the government’s efforts to strengthen the national immunisation schedule and advocacy efforts would be rendered useless.

Diseases which can be prevented by vaccinations have increased in the country, such as measles, which rose from 196 cases in 2013 to 1,934 cases last year. This is an increase of 891.8 per cent in a period of five years, he added.

Dr Noor Hisham said the ministry had recorded six deaths caused by measles last year whereby all those cases had no immunisation against the disease, five cases of diphtheria in which four of them didn’t have immunisation and 22 cases of pertussis, in which 10 were not immunised.

Immunisation can prevent three diseases and reduce complications that could lead to death.

“The national immunisation schedule can prevent 12 diseases caused by bacteria and viruses. ‘These immunisations are given for free to local infants and children in government clinics since the 1950s.”

“With the immunisation programme and health service achievements, Malaysia has successfully reduced 85 per cent of deaths among children from 1970 to 2017, from 55.0 per cent of deaths in every 1,000 births to only 4.4 deaths.”

‘Immunisation has also helped to completely eradicate smallpox in the world,” he added.

Dr Noor Hisham said the ministry had received untrue information on vaccination via social media.

He added that there were certain groups of people and individuals who openly influenced the public to reject vaccinations based on their wrong understanding about it.

Imunise4Life programme technical committee chairman Datuk Dr Zulkifli Ismail said the vaccination programme had been a victim of its own success.

He said with the drop in the number of diseases, and some were eliminated in the past, more people began to lose sight of the good that came from the vaccination programme.

“With hardly any new cases of diseases such as poliomyelitis, many parents began to question the need to vaccinate against them.

“Some parents claim that breastfeeding was enough to protect their babies, not realising that the antibodies in breast milk will only protect against the diseases that the mother had been exposed to in the past and that the protection is short-lived.”

Dr Zulkifli, who is Asia Pacific Paediatric Association secretary-general, said many new-age parents rather rely on alternative therapies to boost the children’s immune system.

“There seems to be a general distrust in ‘modern medicine’ and the much-publicised big pharma companies.”

“But doctors see the diseases (in patients) and we would rather not have to treat those that we know can be prevented by vaccination.”

He said traditional and homeopathic medicine were touted as being equivalent to vaccination when that was not the intended purpose.

“There are many people who extend these complementary medicines to preventing diseases, and this is a dangerous stance to take.”

Dr Zulkifli cited the recent outbreak of diphtheria, which is a fatal disease.

“We have had a few outbreaks of diphtheria leading to deaths because the parents had refused vaccination. If we continue to be ignorant on the dangers of not getting vaccination, the number of such preventable diseases will continue to rise and we will end up treating infections that should have been extinct.”

“Just recently, a measles outbreak occurred in the United States due to vaccine-hesitant parents, who have been influenced by the anti-vaccine movement.”

He said it was a global threat as there was a recurrence of vaccine-preventable diseases that should have been eliminated in the 21st century.

Is there a group of children with pre-disposed conditions who should avoid vaccination?

Tan Sri Mohd Ismail Merican, former Health Ministry director-general, said there were some cases that required precautionary measures.

“Children who are moderately or severely ill should wait until they recover before being vaccinated. Those who had a life-threatening allergic reaction or suffered serious diseases after a dose of vaccine should not get another dose.”

“In addition, any child who suffered a brain or nervous system disease within seven days after a dose of DTaP (a vaccine that helps children younger than age 7 develop immunity to diphtheria, tetanus, and whooping cough) should not get another dose,” he said.

He urged the Education Ministry to adopt a strict “no-admission” policy to Year One pupils who had no vaccination record.
AEWARENESS

Parents may be sent for counselling

KUALA LUMPUR: Parents who refuse to vaccinate their children will be referred to medical specialists for counselling, said Deputy Health Minister Dr Lee Boon Chye.

He said this was necessary as the vaccination rate for children was at 85 per cent and more awareness was needed to address the issue.

"If the parents refuse (to vaccinate their children), the hospital nursing officers will be required to ask them to see a specialist for medical advice," he told the New Straits Times.

He said the authorities were able to identify parents who refused vaccination for their children as they would be at private or government hospitals for follow-up treatments after giving birth.

"Vaccinations are given at birth and during follow-up visits. "If parents refuse, the nurse will know who they are and will refer them to a specialist for medical advice," he told the New Straits Times.

Lee said the exact percentage of children who were not vaccinated could be lower as the figures included those who were unable to receive vaccinations due to geographical factors. "Less than five per cent of the children actually miss vaccination. These include children who are unable to return for follow-up vaccinations, such as the Orang Asli community, who live in remote areas," Lee said told the minister.

Lee said the ministry had been providing assistance to those in remote villages to get vaccinations for their children through the Klinik Desa initiative, as well as mobile clinics on four-wheel-drive vehicles, by boats and helicopters.

HALAL-HARAM ISSUE

Bound by religion

In Malaysia and Indonesia, the permissibility of using vaccines from a religious standpoint is a major issue among modern parents, said paediatrician and Immuniser Life programme technical committee chairman Datuk Dr Zulkiffi Ismail.

"The halal and haram aspects of vaccines are scrutinised so much that there is a great deal of misinformation on this issue. It then gets blown out of proportion and before anybody realises it, vaccination uptake has declined," he said, adding that the halal-haram issue was an ongoing one.

Although there are vaccines that use the enzyme trypsin, which is taken from pigs, most do not.

"All vaccines given by the Health Ministry are permissible to use. "Only the rotavirus vaccine uses porcine trypsin to splice the virus in the initial preparation of the vaccine. "With 'subsequent cleansing', the final product of the vaccine that is given has no pig DNA, as shown by independent lab assessment. "There is no reason for any fear about the halal status of vaccines," International Fazaa council, he said, had provided doctrines that say vaccines were permissible. "It is the parboiling of pork that is not allowed, and it does not translate to vaccination. "However, there are conspiracy theories and some of these can be outlandish and absurd. "An example is that vaccination is a worldwide Jewish conspiracy to eliminate the Muslim population. "When we look at the Israeli immunisation programmes, they give more vaccine antigens to their children and the vaccines come from the same source."

Parenting groups on Facebook share their thoughts

"Simple, if you listen to anti-vaxxers, they will tell you horror stories of vaccination. If you listen to pro-vaxxers, they will tell you horror stories if you never vaccinate. "So the bottom line is ask yourself, if you want it or not?"

"If you want to live longer, get vaccinated. It's like asking the pros and cons of buckling up the seat belt in the car. If you are lucky, you don't get into an accident, no problem then. But it takes just one accident to jeopardise your life."

"I vaccinated my two children. The con is that I have to pay for the shots, and sometimes, put up with the long queue at my paediatrician's clinic. But I'm cool with that."

"For every pro, there would be a con, and vice versa. "Pros: You get to post on FB and act very 'natural' with nice, nice, hashtags. "Cons: Your kids die of easily preventable and previously eradicated diseases."

"I'm not anti-vaccine. If it is safe, I will definitely be the first in line. "Since there is no study done on the safety of vaccines with a double blind placebo test, I choose the safer method. "My kids have never taken medicine for illness. My eldest is 15 this year and she never had a day of sore throat ever. She is free from any medicine. "My youngest is 8. He was admitted recently for the first time due to gum bleeding, with low platelet and low white blood count."

"Think of it as rationally as possible. All medications have side effects. Some people don't have it, some people do. Some have allergic reaction to aspirin, many do not. "Like how you purchase food and read the labels, or baby shampoo to ensure it doesn't contain parabens, just read the medicine pamphlet that comes with it. Then weigh your pros and cons."

"Even though the fatwa council said vaccines are halal and only a few contain swine DNA, for Muslims, if it is dururah (life and death situation), we can use it. "But if there's a halal alternative, go for the halal alternative."

"Bottom line is, there is no scientific evidence to support anti-vaccination fears. Most information was based on heresy, with emotions thrown around and scare tactics used. "Vaccines are backed by science. If the number of non-vaccinated people gets large enough, then the entire community will be at risk."
Vaccine-preventable diseases spike

Most cases were because victims, who were misinformed, declined to be immunised.

KUALA LUMPUR: Misinformation about vaccines has led to a huge increase in vaccine-preventable diseases, with almost a 1,000% increase in the number of measles cases compared to five years ago.

The number of measles cases jumped from 195 cases in 2013 to 1,934 cases last year, said the Health Ministry in a statement.

From the figures, cases of measles without immunisation increased to 1,467 cases (75.9%) last year from 125 cases (68.7%) in 2013, added the statement.

Last year, the ministry recorded six measles deaths where all were not immunised, and five cases of diphtheria deaths where four did not receive immunisation.

There were 22 deaths from whooping cough (pertussis) where 19 cases had no vaccination.

Health director-general Datuk Dr Noor Hisham Abdullah said it was discovered through social media that certain individuals who objected to vaccines had influenced other parents to join them.

"This irresponsible action posed a challenge to the ministry’s efforts, and as a result, infectious diseases that could be prevented with vaccines had increased," he said in the statement.

The World Health Organization has identified vaccine rejection as one of the global health threats for 2019, he added.

Dr Noor Hisham said there were groups and individuals who openly influenced the general public to reject vaccines by spreading unfounded claims.

"The misinformation on vaccination was spread by those obsessed with the claim that vaccination and the National Immunisation Programme carried out by the government were of no benefit and resulted in negative effects. The claim is not accurate," he said.

The number of rejections to vaccines in government clinics increased to 1,603 cases in 2018 from 637 cases in 2013.

However, the numbers dropped a little in 2017 – to 1,004 cases – following the ministry’s widespread advocacy efforts done in collaboration with the private sector and medical social media volunteers, said Dr Noor Hisham.

"If people continue to reject vaccines, there is a likelihood that infectious diseases that could be prevented by vaccines will continue to increase, and all efforts will be futile," he said.

Dr Noor Hisham said immunisation has been given free to Malaysian babies and children in government clinics since the 1950s.

Currently, the National Immunisation Programme is able to prevent 12 types of infectious diseases caused by certain bacteria and virus, he said.

With the immunisation programme and improvement in health services, Malaysia successfully reduced the number of infant deaths by 8.9% from 1970 to 2017. From 51.9 deaths for every 1,000 live births in 1970, the death rate had reduced to 7.6 deaths for every 1,000 live births, he said.

Immunisation has also eradicated smallpox worldwide while polio had been eradicated in Malaysia, he added.

Lecturer: How I wish there was polio vaccine then

KUALA LUMPUR: Lecturer Khoo Boo Hin (pic) wished a polio vaccine had existed when he was a baby.

Having contracted the virus when he was just 18 months old, Khoo lost his ability to walk properly after a fever.

"Those days, there was no polio vaccine yet. If there was, I would wish my parents had had me vaccinated," said the father of one.

Polio, or poliomyelitis, is a crippling and potentially deadly infectious disease caused by the poliovirus. The virus spreads from person to person and can invade an infected person's brain and spinal cord, causing paralysis.

"When my parents realised I could not walk after the fever, they brought me to hospital.

"My mother could not bear seeing me crying and scratching and took me home.

"She got some Chinese remedies to help me but nothing helped," he said.

Khoo has walked with a limp all his life and was forced to use a walking stick a few years ago.

These days, he needs a wheelchair if he goes shopping because he does not have the strength to walk for long.

"Doctors say it is rare to see polio cases these days and patients are mainly those aged 60 and above," he said.
Stubborn parents concerned about safety of vaccines

KUALA LUMPUR: Vaccine-preventable diseases will remain a threat in Malaysia as long as some parents resist vaccination for their children, say doctors.

The flip side is that these parents are concerned about the safety of vaccines.

Malaysian Paediatric Association’s Immunise for Life (www.i4l.my) programme chairman Datuk Dr Zulkifi Ismail pointed out that some countries were already measles-free.

But he said resistance to vaccination had slowed down Malaysia from achieving measles elimination.

“And we don’t know when we can eliminate it,” he said.

According to the Health Ministry, the measles elimination target was initially 2012 but the ministry had pushed it to 2018, and now the date had been pushed again to 2023.

The World Health Organisation Western Pacific Region’s target is 2025. To achieve measles elimination, a country has to show it has zero locally transmitted measles case for 36 consecutive months.

Dr Zulkifi said if the number of vaccine-preventable diseases continued to increase, more children would suffer or die unnecessarily from a vaccine-preventable disease.

“We doctors, especially paediatricians, see the effects of vaccine refusal in the patients and the complications from the disease.

“It is disheartening and disappointing because we ended up treating them,” he said.

Malaysian Medical Association president Dr Mohamed Namazie Ibrahim said the return of vaccine-preventable diseases could pose a public health problem when more children were not vaccinated.

“The ministry has to be proactive in engaging the anti-vaccine groups and find out the reason they are against it.

“It should also see if further studies can be done on this to have a better understanding why a small number of people reacted badly to some vaccines,” he said.

A mother said if the Health Ministry was sincere in encouraging the majority to vaccinate, it should have a more transparent system to support parents.

“Two years ago, the ministry wanted to create a database with vaccine reactions but there was still no action or at least none accessible to the public,” she said.

She said that currently, there were also no updates after parents filed a Vaccine Adverse Event Reporting System report.

She said that in 2010, a 15-year-old schoolboy, Muhammad Muhaimin Yauza, was paralysed within two weeks after a tetanus jab.

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'No proper safety tests done before vaccination'

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He was finally awarded RM10,000 in 2016, six years after the incident. "Isn’t that a case of too little, too late?” she asked.

A father, when asked why he considered it not safe when millions had no issue with vaccination except for a small number of cases, said the right question to ask was: Are there long-term safety studies to follow up on those being vaccinated?

"Are there proper reporting systems set up with awareness on what vaccine side effects are, so when parents encounter those side effects in their children, they know how to make a report? Do doctors and nurses report AEFI cases when children end up in intensive care unit shortly after being vaccinated?" asked the man with twin daughters.

(AEFI is adverse events following immunisation.)

"There are, after all, millions of smokers who still do not have cancer yet," he said.

He also asked about the ingredients stated in the Centers for Disease Control and Prevention (Atlanta): "If you look up each vaccine package insert, it will state there that the vaccine ‘has not been evaluated for carcinogenic potential’. It just means there is no proper safety testing done for the vaccine to see if it can cause cancer."
Accept the smoking ban and move on

I SALUTE the Health Ministry’s courageous and correct decision to ban smoking in many public areas for health reasons. The vast majority is supporting and observing the ban with no complaints, but public debate has unfortunately been hijacked by an unreasonable and vocal minority.

Having considered their half-baked counter-arguments, the ministry should not only disregard them but also actively focus its political energy on other more important issues.

Those who are against the ban are in the minority and generally claim that smokers’ rights are infringed upon, restaurants are losing business, and the ban is unenforceable. Many of them miss the point of the smoking ban and bring up anecdotal evidence of falling restaurant earnings and social media amusement to remove the “sneer-jerk” ban. They are wrong.

The aim of the ban is to protect citizens from passive smoking and only secondarily to reduce the rate of smoking. The ban is complementary to, and does not replace, everything else that the ministry is doing to reduce smoking.

While smokers have the right to smoke, it is clearly logical that they do NOT have a right to harm others through passive smoking. A moral case can be made for criminal prosecution if a father’s smoking worsens his child’s asthma.

When funny pictures poking fun at the ban go viral, it’s only a sign that Malaysians have a sense of humour and enjoy free speech. Hence, getting three thousand likes on Instagram is not a reason to rescind a good government policy.

On the business side, it’s hard to imagine that a smoker will stop frequenting restaurants solely because they can’t smoke freely. What about other reasons like a gloomy economy or rising cost of living? Even if they stop eating at restaurants, this is a good price to pay for cleaner air. It’s also a good bet that the small minority who oppose the ban will return once they realise everyone has simply adjusted to this new normal.

Restaurateurs might even see increased business when non-smokers come in droves to their restaurants (although they would never admit the smoking ban if their sales increase).

The real challenge is the difficulty to enforce the ban, especially in friendly neighbourhood restaurants where everyone knows your name or in rural areas. The policy is excellent, but a clearer and more predictable enforcement structure is needed. Basic questions need to be answered better, such as who will enforce (police, health inspectors, restaurant workers?) and who is liable (smoker, restaurateur?).

The penalties matter, but the predictability of enforcement matters more. In other words, a RM50 fine issued for 90% of all infractions will be more effective than two years’ jail for zero percent of anyone.

The aims of the smoking ban can be better communicated and the Health Ministry should consider using messages of public and familial duty, or use emotions of shame or disgust to encourage self-regulation.

I have noticed that smokers are respecting this ban in many restaurants even without visible enforcement. In a few months, this will be the new normal and smokers will self-regulate or will be socially shamed into doing so, leaving Malaysia free to move on to other issues.

And there are many other issues in healthcare, all of which require all our political and social energy and all our expertise. Reforming healthcare financing, fixing the demonisation in the Health Ministry, and improving procurement practices for drugs and devices are just three examples.

The shallow and petty push-back against a well-intentioned ban is morally pleasing and makes us feel righteous but devalues the useful debate about what’s truly important. As Malaysia has a finite amount of political energy, we must pick and choose our battles. Everyone must fulfil their duty starting with our politicians who must allocate their energy and attention to large issues and not be hijacked by the small ones.

As for the holdouts, please recognise that the problem is not as bad as you imagine it to be, and in any case the government’s role is to balance the public benefit with your right to profit.

For smokers who believe their space is now limited, this is true but it is the right thing to do. The diminution of the smoker’s public space in Malaysia mirrors a global trend and is reflective of logic and wisdom for the benefit of public health.

So, to all the detractors, please accept the ban and let’s move on to discuss other more important issues in Malaysian healthcare.

DR KHOOR SWEE KEONG
Paris, France
People rejecting vaccines due to misleading info

PETALING JAYA: Misinformation has been one of the main reasons behind the rejection of vaccinations, according to the Health Ministry.

The spread of fake news and misleading information on social media has led to people rejecting vaccines, Health Ministry Director-General Datuk Dr Noor Hisham Abdullah said in a statement yesterday.

"The ministry is monitoring misconceptions, especially on social media," he said.

"Such irresponsible acts have led to resistance in the fight against diseases that can be prevented by vaccination."

"The World Health Organisation has identified vaccine rejection as one of the global health threats for 2019."

Noor Hisham said the number of vaccine rejection cases recorded at government clinics continued to increase from 637 cases in 2013 to 1,603 in 2016.

"There was a slight decrease in 2017 with 1,404 rejected vaccine cases after extensive advocacy efforts by the ministry involving public and private parties, including non-governmental organisations."

He added that diseases that are preventable by vaccines had increased in the country where 195 cases of chickenpox were recorded in 2013 but grew to a total of 1,535 cases in 2018, an increase of 891.8% over five years.

"The number of cases of measles due to no immunisations increased from 125 cases in 2013 to 1,467 cases in 2018," he said.

The ministry recorded six deaths due to measles, five from diphtheria and 22 caused by pertussis.

"With the immunisation programme and increased access to health services, Malaysia has managed to lower the child death rate by 85% for the period 1970 to 2017, from 55.9 deaths per 1,000 live births to only 8.4 deaths per 1,000 live births."