

## Dzul: We'll phase out contract system for MOs

**PETALING JAYA:** Phasing out the contract system for medical officers is among the measures being taken to address staffing crisis in the Health Ministry's facilities, says Datuk Seri Dr Dzulkefly Ahmad (pic).

"Admittedly, I have been addressing this perennial problem of human resources in the Health Ministry," the Health Minister said on X yesterday.

The manpower constraint has been driven by supply shortage

due to the decline in medical graduates entering the system, as well as the maldistribution of workforce across the nation.

To effectively tackle the issue, Dzulkefly said the ministry is moving beyond 'stop-gap' measures and heading towards comprehensive structural reforms.

This includes the phasing out of the contract system for Medical Officers; mandatory mobilisation to ensure fair workforce distribution; streamlining house officers'

training for faster integration; and enhancing healthcare workers' welfare.

"I welcome healthy debate on this subject matter. Constructive feedback is crucial to enhance our public healthcare system and delivery, and to meet the unmet expectations of the rakyat," he said.

Recently, two MPs, V. Ganabatrau (Klang) and Dr Halimah Ali (Kapar), raised alarm over the dire staff shortage at Hospital Tengku Ampuan Rahimah

(HTAR) in Klang.

The Johor state health department said in January that contract medical officers have been mobilised to several hospitals in the state.

A dire shortage was also reported at the state's main hospital, Hospital Sultanah Aminah in Johor Baru.

In an interview with *The Star* in October last year, Dzulkefly said a proposal to end the contract system will be tabled to the Cabinet.



## Foreigners nosing as doctors nabbed

**KUALA LUMPUR:** A group of foreign nationals posing as doctors and offering unlicensed medical services from the back of shops selling daily essentials was busted after the Immigration Department raided nine locations around Jalan Tun Tan Siew Sin in Pudu.

The raids were conducted by the Immigration Department's Special Tactical Team, in coordination with the Kuala Lumpur Health Department's Pharmacy Enforcement branch on Friday following two weeks of surveillance.

Immigration deputy director-general (Operations) Datuk Lokman Effendi Ramli said 18 foreigners aged 24 to 51 were held, including six posing as doctors serving the community.



**Smuggled medicines:** Officials from the Health Ministry inspecting unregistered medicines during a special operation by the Immigration Department around Jalan Tun Tan Siew Sin, Pudu. — Bernama

He said checks found the premises were operating under the guise of legitimate businesses.

"The premises raided were operating as sundry shops, textile stores, eateries, travel agency counters and barber shops at the front, while the back had been converted into makeshift consul-

tation rooms and storage spaces for illegal medicines," he told reporters after the operation.

Lokman Effendi said most clients were Bangladeshi nationals drawn by lower fees and easier communication, adding that inspections found the premises were supplying medicines

that required specialist prescriptions.

WATCH THE VIDEO  
TheStarTV.com



# Beware of hidden TB infection risk, says expert

**PETALING JAYA:** As Malaysians make preparations for the Chinese New Year celebrations and Ramadan, public health experts are warning about a hidden risk – early tuberculosis (TB) infections that often go unnoticed.

According to Universiti Kebangsaan Malaysia public health specialist Prof Dr Sharifa Ezat Wan Puteh, many infected individuals may appear healthy or show only mild symptoms, making the disease hard to detect.

"This is why it's so dangerous. Diagnosis can take weeks, months or even years, depending on a person's immune system and access to healthcare for diagnosis and treatment," she told *theSun*.

Sharifa said pulmonary TB (PTB) is usually spread through repeated exposure or in constant contact with an infected person via coughing or saliva, adding that

it is quite difficult to contract TB from just one encounter.

"Simply attending Chinese New Year gatherings is unlikely to be the main cause of catching PTB.

"However, individuals who are known to be TB-positive and still infectious should avoid mixing with others without proper precautions, such as wearing a mask," she said.

Sharifa added that certain groups are at higher risk of TB, including children, the elderly, people with weakened immune systems and those living with HIV.

She emphasised that it is possible for TB patients to appear healthy and continue festive activities without knowing they are infectious.

"PTB is very insidious and can mimic many other illnesses. Many people may be positive without realising they are infectious, only

being diagnosed when prominent symptoms develop and they are confirmed as PTB cases.

"If you think you have symptoms, please get screened, especially if you come from TB outbreak areas, or have been in close contact with someone infected."

Sharifa said the biggest mistake people make with TB symptoms is not seeking proper diagnosis from healthcare providers, which can result in unknowingly infecting others, prolonging the illness and increasing the risk of complications.

"Many people no longer wear masks unless in high-risk situations. If you are at higher risk or have something infectious, such as flu, it's important to wear a mask in public or when interacting with vulnerable individuals," she said.

Universiti Teknologi Mara

nutritionist Dr Azizah Othman said certain vitamins and minerals can help support the immune system in protecting against TB, such as vitamin C, vitamin A, vitamin D and zinc.

She said vitamin D is particularly important for TB defence, as it acts like a biological "switch" that activates white blood cells to produce antimicrobial peptides that help kill TB-causing bacteria.

"For those traveling and spending more time indoors or in crowded transport, a vitamin D3 supplement (around 1,000–2,000 IU) or 15 minutes of morning sun can keep this defence active."

She also reminded the public that wearing a mask remains one of the most effective external protections, especially during festive activities. – **By QIRANA NABILLA MOHD RASHIDI**

HUMAN RESOURCE CONSTRAINTS

# Ministry vows to resolve hospital staff shortage

**PUTRAJAYA:** The Health Ministry has acknowledged human resource constraints in public healthcare facilities and pledges reforms to address them.

Health Minister Datuk Seri Dr Dzulkefly Ahmad said the ministry had taken note of public discourse regarding staffing shortages and reaffirmed its commitment to strengthen the national healthcare system.

He outlined two key structural challenges affecting the public health services: supply shortage and uneven distribution.

"To effectively tackle this issue, the ministry is moving beyond 'stop-gap' measures and towards comprehensive structural reforms," he said in his post on X yesterday.

Dzulkefly said among the reforms outlined were the phased abolition of the contract system for medical officers, mandatory mobilisation to ensure fairer workforce distribution, streamlining of house officer training for faster integration into service and measures to enhance the welfare of healthcare workers.



Datuk Seri Dr Dzulkefly Ahmad

"I welcome healthy debate on this subject.

"Constructive feedback is crucial to enhancing our public healthcare system and delivery, and to meeting the unmet expectations of the people," he said.

The ministry said in a statement on Friday that the human resource situation was a longstanding maldistribution of staff.

It added that the declining number of medical graduates entering the workforce had triggered a chain reaction affecting staffing levels at public healthcare facilities.

The staffing rate at 48 Graduate Training Hospitals stood at 53 per cent as of February 2026, with only 6,500 of the 12,198 slots filled, it said. The ministry said the situation was expected to be more critical next year.

Although all 579 applicants were appointed, it covered only about 10 per cent of national vacancies.

It added that the declining number of filled Graduate Medical Officer slots had impacted the system's ability to provide an adequate workforce. **Bernama**

	SUBUH (am)	SYURUK	ZUHUR	ASAR (pm)	MAGHRIB	ISYAK
Melaka	6:15	7:24	1:28	4:46	7:28	8:38
Penang	6:25	7:33	1:35	4:54	7:33	8:43
K. Lumpur	6:19	7:26	1:30	4:49	7:29	8:40
Johor Baru	6:08	7:18	1:22	4:40	7:22	8:33
Kuantan	6:12	7:22	1:25	4:43	7:24	8:34
Ipoh	6:22	7:29	1:33	4:52	7:31	8:42

BACK-ROOM MEDICS

# 9 ILLEGAL FOREIGN-RUN CLINICS RAIDED

They mostly catered to Bangladeshis preferring treatment by their countrymen

The clinics operated from small, hidden rooms at the back of shops selling a variety of goods, like toys, watches, souvenirs, clothes and food.

Items seized from the clinics included antidepressants, antibiotics and medication for diabetes, high blood pressure, cholesterol and gastric issues.

Deputy Immigration director-general (operations) Datuk Lokman Effendi Ramli said most of the medicines were suspected to have been smuggled in by migrants from Bangladesh.

He said the clinics catered to Bangladeshis who preferred medicine from their home country and found it easier to communicate with the staff.

"Eighteen men, comprising 17 Bangladeshis and one Myanmar national, were detained. Those held included caretakers and individuals giving medical advice

for between RM50 and RM100 per patient.

"These shops have complex operations where the front sells daily products, but a back room is renovated into an illegal clinic," Lokman said after the raid.

He said the department found a large quantity of controlled medicines that should be prescribed by registered doctors.

One of the detained Bangladeshis, believed to be acting as a doctor, claimed the clinics could earn up to RM10,000 a month.

The man in his 50s admitted he had no medical background, and said he earned about RM2,000 a month.

Lokman said all the foreigners, aged between 24 and 51, were detained for investigation under Regulation 39b of the Immigration Regulations and Section 6(1)(c) of the Immigration Act for



A Health Ministry officer checking the medicines seized from an illegal foreigner-run clinic in Kuala Lumpur yesterday. NSTP PIC BY AHMAD UKASYAH

misuse of work permits and entering the country without valid documents.

He said the Health Ministry was also conducting investigations under the Sale of Drugs Act.

The raid followed surveillance by the Putrajaya Immigration Department and the Special Operations Division Tactical Support Team, with assistance from the Kuala Lumpur Health Department.

Several of the clinics were raided in previous operations.

On Jan 23 last year, the Immigration Department raided nine premises — six in Jalan Tun Tan Siew Sin, two in Lebuh Pudu, and one in Jalan Silang — where 10

Bangladeshi men posing as doctors were nabbed.

The raids also revealed a similar modus operandi, with the illegal clinics operating behind food and retail shops to evade detection, charging treatment fees and selling medicines to Bangladeshi customers.

Alarmingly, many of these outlets are believed to have resumed operations in less than a year, despite the earlier arrests and deportation of the bogus doctors.

The *New Straits Times* has reached out to Immigration Department director-general Datuk Zakaria Shaaban for comment on how the clinics could resume operations after last year's raids.

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**T**HE Immigration Department raided nine illegal foreigner-run clinics in Jalan Tun Tan Siew Sin here on Friday, some of which had reopened after being shuttered in previous operations.

It is learnt that several of these clinics had been raided in the past and their bogus doctors deported, only for the outlets to reopen and offer medical advice and controlled medicines.

# Reformasi menyeluruh atasi kekangan tenaga kerja kesihatan

## KKM kenal pasti dua cabaran struktur utama jejas khidmat

**Putrajaya:** Kementerian Kesihatan (KKM) mengakui kekangan sumber manusia yang berterusan di fasiliti penjagaan kesihatan awam dan berikrar melaksanakan pembaharuan struktur secara menyeluruh bagi menangani cabaran tenaga kerja di seluruh negara.

Menteri Kesihatan, Datuk Seri Dr Dzulkefly Ahmad, berkata KKM maklum mengenai masalah itu yang sering menjadi tumpuan orang ramai berhubung kekurangan petugas dan menegaskan semula komitmen untuk memperkukuh sistem penjagaan kesihatan negara.

Katanya, KKM sudah mengenal pasti dua cabaran struktur utama yang ketika ini menjejaskan perkhidmatan kesihatan awam, iaitu kekurangan bekalan

tenaga kerja dan pengagihan tidak seimbang.

"Bagi menangani isu itu secara berkesan, KKM bergerak melangkaui langkah penyelesaian sementara yakni ke arah reformasi struktur yang menyeluruh," katanya menerusi hantaran di X, semalam.



Dr Dzulkefly Ahmad

### Mansuh sistem kontrak

Dzulkefly berkata, antara pembaharuan digariskan termasuk pemansuhan secara berperingkat sistem kontrak bagi pegawai perubatan (MO), mobilisasi wajib bagi memastikan pengagihan tenaga kerja lebih adil, penyelarasan latihan pegawai perubatan siswazah (HO) bagi mempercepat penyertaan dalam perkhidmatan serta mempertingkatkan kebajikan petugas kesihatan.

"Saya mengahualukan perubahan matang mengenai perkara ini. Maklum balas yang membina amat penting bagi menambah baik sistem serta penyampaian penjagaan kesihatan awam kita, dan bagi memenuhi jangkaan

rakyat yang belum dipenuhi," katanya.

KKM dalam kenyataan kelmarin menjelaskan situasi sumber manusia adalah manifestasi kepada cabaran struktur, diwarisi serta ketidakseimbangan agihan (*maldistribution*) tenaga kerja pada peringkat nasional sudah berlarutan sekian lama.

Trend penurunan jumlah graduan perubatan memasuki pasaran kerja dipantau rapi dan penyusutan ini telah mencetuskan 'reaksi berantai' kepada kadar pengisian perjawatan di fasiliti kesihatan awam.

Menurut KKM, trend nasional bagi kadar pengisian di 48 Hospital Latihan Siswazah seluruh negara kini berada pada tahap 53 peratus hingga Februari 2026, iaitu hanya 6,500 slot terisi daripada 12,198 kapasiti.

Cabaran itu menjadi lebih kritikal bagi Lantikan Bilangan 1 Tahun 2026, walaupun kesemua 579 graduan yang permohonan telah dilantik, jumlah itu hanya mengisi kira-kira 10 pe-



KKM maklum mengenai masalah kekurangan petugas perubatan.

(Foto hiasan)

ratus daripada kekosongan slot nasional.

Penurunan pengisian slot Pegawai Perubatan Siswazah memberikan impak langsung kepada keupayaan sistem untuk membekalkan tenaga kerja yang mencukupi.

Bagaimanapun, KKM mene-

gaskan kembali prinsip asas latihan Pegawai Perubatan Siswazah selaras dengan Surat Pekeliling Ketua Pengarah Kesihatan bertarikh 25 Julai 2025, penempatan bertujuan melengkapkan kompetensi klinikal melalui latihan berstruktur.

BERNAMA

# lokal



ANTARA individu yang ditahan menjalankan perkhidmatan kesihatan haram di Jalan Tun Tan Siew Sin, Kuala Lumpur.



## 9 KLINIK HARAM MASIH BEROPERASI

Premis masih beri rawatan meskipun doktor warga asing tanpa tauliah sudah dihantar pulang ke negara asal

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Sembilan 'Klinik Bangla' yang beroperasi secara haram di sekitar Jalan Tun Tan Siew Sin di sini sekali lagi diserbu menerusi Operasi Khas Jabatan Imigresen Malaysia (JIM), kelmarin.

Difahamkan beberapa premis berkenaan pernah diserbu dan doktor palsu yang ditahan sudah diusir pulang ke negara asal namun klinik haram itu kembali menawarkan nasihat perubatan termasuk menjual ubatan terkawal.

Serbulan bermula jam 4 petang itu dijalankan Pasukan Taktikal Khas (PAS-TAK) Bahagian Perisikan dan Operasi Khas JIM dengan kerjasama Cawangan Penguatkuasaan Farmasi Jabatan Kesihatan Kuala Lumpur hasil risikan selama dua minggu.

Timbalan Ketua Pengarah (Operasi) Imigresen Datuk Lokman Effendi Ramli berkata, 18 warga asing berusia 24 hingga 51 tahun ditahan termasuk



KEBANYAKAN pesakit terdiri daripada warga Bangladesh yang mendapatkan rawatan pada harga murah. - Gambar NSTP/AHMAD UKASYAH

enam individu yang berlagak sebagai 'doktor' dan menawarkan rawatan kepada komuniti warga asing.

Beliau berkata pemeriksaan mendapati premis terbabit berselindung di sebalik perniagaan sah.

"Premis yang diserbu mendapati menjalankan perniagaan seperti menjual barangan keperluan harian, kedai kain, kedai

makan, kaunter syarikat pelancongan dan kedai gunting rambut di bahagian hadapan, manakala bahagian belakang diubah suai menjadi bilik pemeriksaan serta stor penyimpanan ubat-ubatan tidak berdaftar," katanya.

Lokman Effendi berkata kebanyakan pelanggan terdiri daripada warga Bangladesh yang mendapatkan rawatan di premis berke-

naan kerana caj yang lebih murah dan mudah untuk berkomunikasi.

Hasil pemeriksaan turut mendapati premis terbabit membekalkan pelbagai jenis ubat yang sepatutnya memerlukan preskripsi doktor pakar.

"Antara ubat yang dirampas ialah ubat bagi penyakit kencing manis, darah tinggi dan kolesterol selain antibiotik dan ubat



PREMIS dipercayai menjual ubat-ubatan yang disyaki diselupkan dan digunakan untuk merawat pesakit.



PEGAWAI farmasi memeriksa ubat-ubatan pada operasi di premis kesihatan haram di Jalan Tun Tan Siew Sin.

tahan sakit. Semua ubat ini tidak mempunyai kelulusan Kementerian Kesihatan," katanya.

Siasatan awal mendapati ubat-ubatan itu dipercayai dibawa masuk ke negara ini dalam kuantiti yang banyak oleh pelancong dari Bangladesh sebelum dihantar ke premis terbabit untuk dijual pada harga antara

RM50 dan RM100.

"Semua 18 lelaki (17 warga Bangladesh dan seorang warga Myanmar) ditahan atas kesalahan di bawah Akta Jualan Dadah 1952 dan Akta Imigresen 1959/63 kerana tidak mempunyai dokumen perjalanan yang sah, salah guna pas, dan tinggal lebih masa," katanya.

## KKM garis empat reformasi tangani isu tenaga kerja

**SHAH ALAM** - Kementerian Kesihatan Malaysia (KKM) menggariskan empat reformasi utama bagi menangani cabaran struktur dan ketidakseimbangan agihan tenaga kerja kesihatan negara.

Antara langkah itu ialah transisi penamatan sistem doktor kontrak secara berfasa, pelaksanaan mandat mobilisasi dan agihan semula petugas, pengukuhan program latihan siswazah serta pemerksaan kebajikan petugas kesihatan.

"Penamatan sistem doktor kontrak secara berfasa bagi Pegawai Perubatan demi memberikan jaminan kerjaya lebih mampan dengan mengambil kira unjuran keupayaan dan beban fiskal negara.

"Memandangkan pola pilihan calon sering menyebabkan ketidakseimbangan agihan, dasar akan menetapkan semasa dalam tempoh khidmat wajib, pegawai akan ditempatkan secara strategik untuk mengisi keperluan kritikal di negeri atau fasiliti kesihatan berbeban tinggi," kata kementerian itu dalam kenyataan pada Sabtu.

KKM menegaskan komitmen dalam memastikan kualiti latihan siswazah bagi Pegawai Perubatan Siswazah (PPS) sentiasa terpelihara dengan mengutamakan pencapaian objektif pembelajaran hingga supaya dapat menghasilkan pegawai perubatan kompeten dan selamat, bukan sekadar memenuhi keperluan kuota.

Menurutnya, struktur latihan juga akan terus ditambah baik bagi memastikan setiap PPS mendapat pendedahan klinikal yang mencukupi tanpa kompromi.

"KKM sedang mempergiatkan usaha bersama agensi pusat menambah baik struktur insentif kewangan serta kemudahan bagi petugas terlibat dengan mobilisasi dan penempatan di kawasan berbeban tinggi atau pedalaman.

"Ini merangkumi kajian semula kadar elaun agar kekal kompetitif serta komitmen berterusan untuk menaik taraf fasiliti kuarters serta persekitaran kerja" ujarnya.

Dalam pada itu KKM memaklumkan, reformasi tersebut dilaksana susulan cabaran sumber manusia yang berpunca daripada isu struktur lama, termasuk ketidakseimbangan agihan tenaga kerja di peringkat nasional.

Sehingga Februari 2026, kadar pengisian di 48 Hospital Latihan Siswazah (HLS) hanya berada pada tahap 53 peratus iaitu 6,500 slot diisi daripada 12,198 kapasiti.

# Modul kesihatan haji diperkasa

TH tekankan kecerdasan fizikal dan mental sebelum ke Tanah Suci



MOHAMAD ZIKRAM



MD AZINOR

**KAJANG** - Modul baharu diperkenalkan Tabung Haji (TH) dalam kursus persediaan haji bagi membantu meningkatkan kesedaran jemaah terhadap istito'ah atau kemampuan kesihatan menerusi penekanan kepada aktiviti fizikal dan persediaan mental.

Penolong Pegawai Perubatan Kementerian Kesihatan Malaysia (KKM), Mohamad Zikram Mohd Raus berkata, modul tersebut memberi fokus kepada keupayaan jemaah dari segi mental dan fizikal supaya mereka mampu melaksanakan ibadah tanpa memudaratkan diri.

Menurut beliau, unsur senaman dan latihan fizikal diterapkan dalam modul bagi memastikan jemaah mempunyai stamina serta keupayaan mencukupi sepanjang berada di Tanah Suci.

"Persediaan rapi penting memandangkan jemaah bakal berdepan pelbagai cabaran termasuk cuaca ekstrem, penyakit berjangkit dan ibadah yang memerlukan pergerakan fizikal secara kerap.

"Disebabkan itu, kita perlu memastikan jemaah bersedia menghadapi semua cabaran dengan mental dan fizikal yang mantap, sekali gus berada pada tahap terbaik," katanya ketika ditemui selepas Kursus Intensif Haji di Dewan Masjid Penjara Kajang pada Sabtu.

Mohamad Zikram berkata, modul kesihatan mental turut diperkenalkan bagi membantu jemaah membuat persediaan bermula dari rumah, penerbangan hingga tiba di Tanah Suci.

Jelasnya, modul kesihatan mental diperkenal-



Bakal jemaah haji diajar teknik senaman.

kan kerana setiap tahun terdapat jemaah yang berdepan tekanan perasaan, kemurungan dan kesukaran mengawal emosi ketika berada di Tanah Suci.

Beliau berkata, modul tersebut turut memberi sokongan kepada jemaah yang kurang pengalaman ke luar negara agar mereka lebih bersedia menghadapi cabaran.

"Insya-ALLAH, modul terbabit dapat membantu mereka bersedia sebelum, semasa dan selepas mengerjakan ibadah haji," katanya.

Jelasnya, tumpuan ketika ini adalah memastikan tahap kesihatan mental dan fizikal jemaah berada pada tahap terbaik agar mereka dapat menunaikan ibadah dengan lancar dan selamat sepanjang berada di Tanah Suci.

Pekerja swasta, Md Azinor Sulaiman, 55, berpandangan pengenalan modul baharu berkaitan kesihatan bagi bakal jemaah haji adalah langkah tepat untuk memastikan persediaan fizikal dan mental dapat dilakukan lebih awal sebelum berangkat ke Tanah Suci.

Menurutnya, modul tersebut memberi pendedahan penting mengenai keperluan menjaga kesihatan secara menyeluruh.

Bakal jemaah, Rohana Yahaya, 55, berkata, beliau mengurangkan pengambilan gula, mengamalkan pemakanan sihat dan membiasakan diri berjalan kaki sebagai latihan fizikal.

Katanya, menjaga kesihatan, menabung secara konsisten, doa dan tawakal kunci penting memudahkan urusan menunaikan haji.



Pemeriksaan mendapati terdapat ubat yang dijual sepatutnya memerlukan preskripsi doktor pakar dan tidak sewenang-wenangnya dijual selain dimiliki dalam kuantiti banyak.

## 'Doktor' Bangladesh kantoj jual ubat haram

### Serbuan bongkar klinik haram, 301 jenis ubat dirampas

Oleh MUHAMMAD AMINNURALIFF MOHD ZOKI

**KUALA LUMPUR** - Menawarkan pemeriksaan kesihatan, nasihat serta menjual ubat haram antara kegiatan yang dikesan dijalankan di sebuah premis tersorok sekitar Jalan Tun Tan Siew Sin di sini pada Jumaat.

Khidmat 'doktor' tanpa doku-

men itu bagaimanapun terbongkar dalam serbuan bermula jam 4 petang Jumaat yang dijalankan Pasukan Taktikal Khas Bahagian Perisikan dan Operasi Khas Jabatan Imigresen Malaysia Putrajaya dengan kerjasama Cawangan Penguatkuasaan Farmasi Jabatan Kesihatan Kuala Lumpur.

Operasi khas hasil risikan kira-kira dua minggu itu mendapati pelanggan rata-rata terdiri daripada warga Bangladesh.

Tinjauan *Sinar Harian* mendapati premis itu berselindung di bahagian belakang kedai kain, kedai

runcit, kaunter syarikat pelancongan serta kedai makan.

Pelanggan yang datang diminta membuat pemeriksaan tekanan darah oleh 'doktor' warga Bangladesh sebelum disaran membeli ubat tertentu yang dibawa masuk ke dalam negara secara haram.

Bukan itu sahaja, 'doktor' terbabit juga menawarkan ubat pada harga sekitar RM50 hingga RM100.

Antara ubat yang dijual ialah ubat stres dan tahan sakit, antibiotik, ubat kencing manis, paracetamol, ubat darah tinggi, kolesterol serta gastrik.

Timbalan Ketua Pengarah (Operasi) Imigresen, Datuk Lokman Effendi Ramli berkata, seramai 18 lelaki terdiri daripada 17 warga Bangladesh dan seorang warga Myanmar ditahan dalam serbuan di sembilan premis.

"Kita dapati kedai ini beroperasi secara kompleks iaitu di bahagian hadapan menjual produk kegunaan harian.

"Namun, di dalamnya terdapat ruang dan bilik lain yang diubah suai dijadikan klinik haram," katanya kepada pemberita di sini pada Jumaat.

Tambahnya, pemeriksaan men-

datapi terdapat ubat yang dijual sepatutnya memerlukan preskripsi doktor pakar dan tidak boleh dijual sewenang-wenangnya selain dimiliki dalam kuantiti yang banyak oleh seseorang individu.

Dedah Lokman, berdasarkan temu bual dengan pekerja Bangladesh terbabit, kebanyakan ubat dibawa masuk oleh pelancong dari negara mereka sebelum dihantar ke premis berkenaan.

Sementara itu, Kementerian Kesihatan Malaysia (KKM) merekodkan rampasan 301 jenis ubat bernilai RM56,600 hasil serbuan sindiket 'klinik' haram berkenaan.

**K e t u a** **C a w a n g a n** Penguatkuasaan Farmasi Wilayah Persekutuan Kuala Lumpur dan Putrajaya, Shafilliza Samsuri berkata, kesalahan yang dikesan ialah memiliki dan menjual ubat-ubatan tidak berdaftar dengan KKM serta memiliki untuk jualan ubat-ubatan yang mengandungi racun.

Ujarnya, sembilan kertas siasatan dibuka di bawah Akta Jualan Dadah 1952 serta Akta Racun 1952.

"Siasatan awal mendapati sindiket telah lama beroperasi, malah berpada-pada juga pernah dijalankan beberapa kali sebelum ini," katanya ketika dihubungi pada Sabtu.