

AKHBAR : BH AHAD  
MUKA SURAT : 15  
RUANGAN : NASIONAL

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Nasional

# Johor perhalusi syor beri subsidi vaksin denggi

Perbincangan turut ambil kira penduduk di kawasan paling berisiko

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**Iskandar Puteri:** Kerajaan negeri akan memperhalusi cadangan dalam isu pemberian subsidi vaksin demam denggi denggi (TAK-003), terutama kepada penduduk yang tinggal di kawasan terdedah denggi.

Pengerusi Jawatankuasa Kesihatan dan Alam Sekitar negeri, Ling Tian Soon, berkata perkara itu akan dibincangkan pada Mesyuarat Jawatankuasa Perangi Denggi Negeri Johor, Khamis ini.

Beliau berkata, walaupun ketutamaan kerajaan adalah mempergiatkan usaha memerangi denggi, mereka faham suntikan vaksin yang terdapat di hospital dan klinik swasta bernilai lebih RM250.

"Vaksin ini (denggi) tidak wajib, tetapi mereka yang ingin mengambalnya sebagai langkah pencegahan, terutama yang tinggal di kawasan terdedah denggi atau berisiko tinggi adalah digalakkan.

"Setakat ini, tiada program subsidi awam vaksin denggi di Johor, namun perbincangan akan diadakan pada Khamis ini dan kamijangkakan untuk perhalusi, jika



Tian Soon (tiga dari kanan) pada Majlis Perasmian Hari Alam Sekitar Negara 2024 Peringkat Negeri Johor di Iskandar Puteri, semalam. (Foto FB Ling Tian Soon)

kita mampu memberi subsidi suntikan vaksin denggi ini," katanya ketika sambutan Hari Alam Sekitar Negara (HASN 2024) Peringkat Negeri Johor di sini, semalam.

Difahamkan, jumlah kes denggi di Johor tidak menentu apabila ada masa meningkat dan ada masa menurun.

## 400 kes seminggu

Tian Soon berkata, kes meningkat kepada lebih 400 kes seminggu pada suku pertama dan menurun kepada sekitar 150 kes seminggu beberapa bulan kebelakangan ini.

Beliau berkata, penguatkuasaan yang dipertingkatkan dan usaha komuniti, termasuk kempen pembersihan diyakini menyumbang

kepada penurunan jumlah kes itu.

Bagaimanapun, katanya, dengan musim tengkujuh yang akan datang, pihaknya terus dalam keadaan berjaga-jaga.

"Baru-baru ini, kita peruntukkan RM250,000 untuk inisiatif seperti pelepasan nyamuk Wolbachia dan penyembaran luar yang disasarkan, dalam langkah memerangi tempat pembiakan denggi," katanya.

Sementara itu, Tian Soon berkata, sambutan HASN Peringkat Negeri Johor menyaksikan beberapa siri inisiatif alam sekitar dengan lebih 500 peserta mengambil bahagian.

Program di seluruh negeri ini dilancarkan tiga bulan lalu, ter-

masuk pembersihan pantai dan sungai, inisiatif kitar semula dan kempen pendidikan yang bertujuan memupuk pengawasan alam sekitar.

Pelbagai aktiviti menarik diadakan pada Majlis Perasmian HASN 2024 seperti *eco-trail fun walk*, pelepasan anak benih ikan, pertandingan mewarna kanak-kanak, program pengumpulan e-waste dan barangan kitar semula, pameran alam sekitar dan program penanaman pokok.

Beliau berkata, kempen pendidikan juga dianjurkan di sekolah di Johor bertujuan membentuk generasi akan datang mengenai kepentingan kemampanan alam sekitar.

AKHBAR : MINGGUAN MALAYSIA  
MUKA SURAT : 38  
RUANGAN : DALAM NEGERI

## 1.35 juta peroleh manfaat skim mySalam

**KLANG:** Seramai 1.35 juta rakyat Malaysia memperoleh manfaat daripada skim perlindungan kesihatan, mySalam sejak diperkenalkan kerajaan pada 2019 dengan pembayaran tuntutan lebih RM1.05 bilion.

Ketua Skim Perlindungan mySalam, Syuhaib Ithnin berharap lebih ramai kumpulan ekonomi B40 membuat tuntutan melalui skim itu tanpa perlu membuat sebarang bayaran bagi mendapatkan skim perlindungan berkenaan.

"Rakyat yang mahu melihat sama ada layak mendapat perlindungan mySalam boleh berbuat demikian melayari laman sesawang rasmi mySalam.

"Sekiranya layak, individu berkenaan boleh membuat tuntutan di kaunter mySalam di 143 buah hospital kerajaan terpilih di seluruh negara," katanya pada Karnival Kita Peduli mySalam, semalam.

Beliau berkata, pihaknya menyasarkan seramai 1.5 juta rakyat mendapat perlindungan daripada mySalam menjelang tahun depan.

Menurut Syuhaib, antara faedah yang diterima individu melalui skim itu adalah men-



**SYUHAIB Ithnin (tengah) bersama Radhi Khalid ketika gimik perasmian Karnival Kita Peduli mySalam dekat Bukit Raja, di Klang, Selangor, semalam. - MINGGUAN/MOHAMAD NAUFAL MOHAMAD IDRIS**

dapat RM50 sehari sekiranya mereka ditahan di wad hospital kerajaan selama 14 hari dan dapat mendapat RM8,000 sekali seumur hidup sekiranya disahkan menghidap salah satu daripada 45 penyakit kritikal.

Sementara itu, Timbalan Pengerusi Persatuan Karyawan Malaysia (Karyawan), Radhi Khalid berkata, pihaknya ber-

besar hati bekerjasama dengan pihak mySalam bagi menguar-uarakan manfaat skim itu.

Menurutnya, sebagai pertubuhan yang menghimpunkan artis tanah air, diharapkan promosi yang dibuat Karyawan membuka mata lebih ramai rakyat untuk mendapatkan manfaatnya.

"Lebih 3,000 ahli Karyawan

sendiri yang terdiri daripada penyanyi, pelakon dan kru di belakang tabir yang sudah mendapat faedah daripada mySalam.

"Tidak semua ahli Karyawan di dalam kalangan mereka yang hidup mewah. Sehubungan itu, kita juga mahu mempromosikan mySalam kepada ahli," ujarnya.



AKHBAR : KOSMO AHAD  
MUKA SURAT : 16  
RUANGAN : NEGARA



**GUMPALAN** bulu jelas kelihatan di dalam shawarma yang dibeli seorang wanita.

## Shawarma perencah gumpalan bulu menjijikan

**PETALING JAYA** – Seorang wanita hilang selera makan apabila shawarma yang dibelinya mempunyai 'perencah tambahan' iaitu gumpalan dipercayai bulu.

Kejadian ini mendapat perhatian ramai apabila pembeli itu memuat naik gambar shawarma dibelinya di TikTok, namun tidak memaklumkan lokasi tepat di mana makanan berkenaan dibeli.

Berdasarkan perkongsian, menu popular makanan Arab tersebut dipercayai dibeli di sekitar Kuala Terengganu.



Hantaran itu mendapat pelbagai maklum balas daripada pengguna selain ada yang berseloroh gumpulan dipercayai bulu itu adalah saffron, sejenis rempah

dihasilkan daripada stigma bunga *crocus sativus*.

"Saffron premium ke itu awak," komen seorang pengguna TikTok.

"Jarang saffron warna hitam," seloroh pengguna yang lain.

"Teringat pernah pergi 'food fest', ada mat Arab jual kebab. Dia memang pakai sarung tangan, tapi lengan dia berpeluh-peluh. Dia bukak sarung tangan, tak cuci tangan dan pegang roti kebab tu. Terus kembang tekak," kata individu lain.

AKHBAR : SINAR AHAD  
MUKA SURAT : 32  
RUANGAN : NASIONAL

## Tatap gajet secara mengiring dedah risiko 'juling air'

**KUALA LUMPUR** - Mungkin ramai yang menganggap baring mengiring ketika menggunakan peranti pintar termasuk telefon bimbit terutama sebelum tidur posisi paling selesa, namun tabiat itu memudaratkan.

Ia boleh mendatangkan risiko kepada kesihatan mata termasuk 'juling air' terutama jika melihatnya secara dekat.

Pakar Optometri Klinik Hospital Mata Nasional Tun Hussein Onn, Muhammad Adam Zakaria berkata, posisi mengiring ketika melihat gajet menjadikan penglihatan tidak seimbang yang kemudiannya memberi tekanan kepada sebelah mata sahaja.

"Secara tidak langsung, mata boleh kering, penglihatan kabur dan sakit kepala kerana otot mata terkejut.

"Penggunaan gajet secara dekat dalam tempoh masa yang panjang juga boleh menyebabkan kelegangan otot mata, bukan hanya berbaring atau mengiring sahaja," katanya ketika ditemui baru-baru ini.

Muhammad Adam berkata, selain menggunakan gajet dengan jarak sekurang-kurangnya 40 sentimeter dari pada mata, pencahayaan yang mencukupi juga penting sebagai langkah pencegahan daripada masalah mata.



Dr Mohd Johari (kanan) melakukan rawatan mata kepada pesakit di Pusat Pakar Mata Bangi, Selangor baru-baru ini.

Sementara itu, Pakar Klinikal dan Bedah Mata, Datuk Dr Mohd Johari Mohamad berkata, kemungkinan individu di bawah 18 tahun untuk terkena masalah 'juling air' lebih tinggi berbanding dewasa kerana kemampuan mata masih berubah dan bola mata masih berkembang.

"Pada umur awal 20-an, kuasa refraktif masih boleh berubah dan bola mata masih beransur-ansur membesar, dengan kata lain kuasa refraktif mata masih tidak begitu stabil," katanya.

Menurut Pengarah Pusat Pakar Mata Bangi itu lagi, meski-

pun risiko orang dewasa untuk terkena masalah 'juling air' disebabkan penggunaan peranti pintar agak kurang, namun mereka boleh terdedah kepada gejala glaukoma iaitu penyakit saraf optik mata, umumnya berpunca daripada tekanan tinggi pada bola mata.

Dr Mohd Johari menyarankan, pengguna tidak menatap telefon lebih daripada sejam dalam satu tempoh masa, selain mengamalkan pengambilan buah-buahan yang kaya dengan vitamin A dan E serta jus buah untuk kesihatan mata. - Bernama

**AKHBAR : SUNDAY STAR**  
**MUKA SURAT : 17**  
**RUANGAN : FOCUS**

Focus 17

## Navigating the **frontiers** of clinical research

It all started with a single file cabinet at the Sarawak General Hospital (SGH) for Dr Chew Lay Ping.

Back in 2004, clinical research was still in its infancy in Malaysia.

At that time, there were no dedicated centres or areas in the hospital reserved for clinical research, so everything Dr Chew had related to research was limited to that single file cabinet in her small office.

Now, 20 years later, Dr Chew is the deputy director at SGH's dedicated clinical research centre, with a small laboratory, cold storage spaces for samples, patient monitoring wards, and administrative offices, among other facilities.

The journey of clinical research at SGH would not have been possible without support from the government, which realised the potential of this industry as early as 2012 when they set up Clinical Research Malaysia (CRM) to help facilitate the growth of clinical research in the country.

In April this year, Prime Minister Datuk Seri Anwar Ibrahim put an even bigger emphasis on this when he expressed intentions to prioritise efforts to make Malaysia a regional hub for clinical research to grasp the opportunities that this billion-dollar industry can bring.

But despite the strides Malaysia has made in facilitating clinical research in the country since the days of Dr Chew's single file cabinet, there are still many challenges faced by researchers which will need to be addressed if Malaysia truly wants to become a regional hub.

### Never enough people

While Dr Chew now has more space for clinical research, human resources remain an ongoing problem.

Doctors involved in clinical research in public hospitals are still "service doctors", meaning they still have normal duties in the hospitals.

"So those who are doing research are actually putting in more effort than what is required of them."

"Our pay packages doesn't increase by doing research. Many doctors don't get involved in research because there is no recognition or pay rise associated with research."

"So I call this [clinical research] as more of my hobby actually," Dr Chew adds with a laugh.

But while the remains good-natured about it, she reveals she often comes in early or stays back late after her official service duties are over so she can work on her clinical research.

On top of that, it is not an easy task to train doctors to become qualified clinical investigators.

"In Malaysia, we still lack experienced doctors, as experienced clinical investigators take time to produce."

"Once these experienced doctors are well-trained, it is time for them to retire or maybe they



**Long journey:** From a single file cabinet per researcher, clinical research space at Sarawak General Hospital has since expanded into a small laboratory, cold storage spaces, patient monitoring wards and administrative offices, among others.



**Real scientist:** Dr Chew laments that people are more likely to buy "supplements" bought online than in tightly regulated clinical research.



**Greener pastures:** Dr Mathakumaran says they have many good people in clinical research but lose them to the private sector.

check the body's response to taking the supplement, yet many patients are sceptical about joining true clinical trials," she says.

Other investigators stress that the trials have extensive safeguards in place.

Dr Woon Pei Jye, a clinical investigator at SGH, says clinical trials also undergo stringent oversight by ethics committees and national regulatory bodies.

"It's important to communicate that, while all trials carry some risk, they are conducted with rigorous safety protocols including close monitoring and predefined stopping criteria in case of adverse effects," he says.

The investigators point out that patients can also choose to drop out of a trial at any point in time for any reason.

They also say that hearing testimonials from fellow patients is one of the most effective ways to reassure patients about joining a trial.

While the investigators can do their part in recruiting patients for clinical trials by referring suitable patients who fit the trial's profile and explaining the safety procedures and the potential benefits to the patients, ultimately, raising awareness in the general populace is beyond them.

This is where CRM and the government need to step in. CRM regularly holds awareness campaigns on clinical research and trials in Malaysia, including its ongoing "I Am Aware" campaign.

"We do this around four to six times a year where we go to all areas in Malaysia and educate people and doctors about clinical research, and this programme actually helps in terms of creating that awareness," Dr Akhmal says.

CRM also has a website that lists all ongoing clinical trials that are recruiting patients in Malaysia.

"So anyone interested can register themselves and we will reach out to them."

"They'll say, why do you want me to be a lab rat? But taking stuff off the Internet is even more dangerous as nobody

quit for private practice. So we lose experienced people in research," Dr Chew tells *Sunday Star*.

This problem appears to be widespread as it is also shared by Dr Mathakumaran Thiruganum, an oncologist and clinical investigator based at Hospital Kuala Lumpur.

He says it's not just experienced doctors they need, but study coordinators and nurses as well.

"However, due to various factors, we have to face a high turnover rate and such constant teaching and human resource development activity is exhausting, and of course, sometimes highly disappointing."

"We have good staff but we lose them to greener pastures," he says.

CRM, the one-stop facilitator for clinical research in Malaysia, is well aware of the lack of human resources, which is why it says training people is one of its main focus.

To that end, it has established a Centre of Excellence to train new graduates in clinical research, among their many other efforts.

"We also work with partners all over the world as far as North America, such as the Princess Margaret Cancer Centre [in Canada], which is one

of the top five cancer research centres in the world."

"CRM put in investment to send people for training in these centres," says CRM chief executive officer Dr Akhmal Yusof.

Dr Akhmal also prefers to look at the silver lining when it comes to people leaving for the private sector — since these are people who received their training in clinical research under CRM, it means CRM can grow their network to entice more companies to sponsor clinical trials in Malaysia, he says.

### Busting the 'lab rat' myth

While clinical investigators are needed to run the trials, equally as important are the participants who volunteer to join the trials.

On this end, the most oft-repeated issue the investigators run into is the persistent "pauk-na-pauk" or "lab rat" myth.

Dr Chew laments that many patients feel uneasy about buying "supplements" from online stores based on someone else's testimonials than taking part in "real science in research."

"They'll say, why do you want me to be a lab rat? But taking stuff off the Internet is even more dangerous as nobody

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AKHBAR : SUNDAY STAR  
MUKA SURAT : 18  
RUANGAN : FOCUS

18 Focus

SUNDAY STAR, SUNDAY 3 NOVEMBER 2024

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THE clinical research industry is a booming one, with a global value standing at over US\$48.6bn (RM36.8bn) last year, and it is projected to grow 4.5% annually. In Malaysia alone, it has brought in RM1.38bn in cumulative gross regional income since 2012, as of May this year.

And now the country wants to develop and expand the industry even more.

Currently, most of the clinical trials in Malaysia are phase II and phase III studies, so Malaysia has set its sights on further enhancing the country's capabilities in early phase or first-in-human (FIH) trials.

FIH trials are a type of clinical trial in which a new drug, procedure, or treatment is tested in humans for the first time, after undergoing animal studies and tests in laboratory.

Clinical Research Malaysia (CRM) has been working on its Phase 1 Realisation Project (PIRP) 2.0 initiative to achieve this goal and it has already shown some results.

In January, Sarawak General Hospital (SGH) was selected by Swiss healthcare giant Roche Pharmaceuticals to be one of its global FIH clinical trial sites, making Malaysia the seventh country included by Roche in the study and the first within the Asia-Pacific region.

Dr Yoon Pei Iye, the leading investigator for the trial in Malaysia, says the oncology team at SGH has been involved in many late-phase trials for over a decade.

"However, our team recog-

## Early phase exploration kicks off in Malaysia



**Ready to go:** The Sarawak General Hospital has been working hard to build the hospital's capacity of its Phase I-equipped Clinical Research Centre. — Others

aised the need to overcome the limitation of focusing solely on late-phase trials and decided to embark on early-phase trials to complete the cycle of comprehensive oncology drug development," he says.

As this aligned with CRM's PIRP initiative, he says they received unwavering support from all stakeholders to embark on the journey to establish an FIH team at their Phase I-equipped Clinical Research Centre at SGH.

One of the key things they needed to build the hospital's capacity was to develop human capabilities in FIH trials.

"I am fortunate to have had the opportunity to learn from one of the best FIH teams globally at the Princess Margaret Cancer Centre in Toronto, Canada, through their esteemed



(From left) CRM chief executive officer Dr Akmal Yusoff, Health Minister Datuk Seri Dr Dzulkipli Ahmad, Health director-general Datuk Dr Muhammad Razi Abu Hassan and Roche (Malaysia) country medical director Dr Woody Tay at the announcement of the Sarawak General Hospital as Malaysia's site for a first-in-human clinical trial in January.

Phase I early drug development clinical research fellowship.

"Upon my return, and with all

other initiatives coming together, we initiated our first oncology FIH trial in the country," he says.

The FIH study Dr Yoon is in charge of is evaluating a potential compound targeting a specific mutation to treat advanced cancer in patients who have no further standard care options. Patients from various parts of Malaysia have been enrolled in this trial.

"Overall, the journey of conducting this first FIH trial has been relatively smooth, thanks to the readiness and dedication of the entire team," Dr Yoon says.

With the higher perceived risks of FIH trials, recruiting patients for the trial may be even more difficult than in late-phase trials.

"The process of recruiting patients for FIH trials is similar in that of other trial phases but can often be more challenging due to the higher perceived risks.

"Participants may hesitate to enrol out of concern for potential side effects.

"Overcoming these challenges requires close and thorough communication about the trial's purpose, safety measures, and potential benefits," he says.

Dr Yoon assures that FIH trials undergo a much more stringent approval process than late-phase trials.

"FIH trials carry more potential risk since the treatment has only been tested in preclinical studies.

"Later-phase trials have more established safety profiles, which is why FIH trials typically undergo higher regulatory scrutiny due to the inherent risks."