

Bernama

Kuala Lumpur

Stok vaksin influenza yang dipasarkan di negara ini dijangka mencukupi sehingga Februari 2026, kata **Timbalan Menteri Kesihatan Datuk Lukanisman Awang Sauni**.

Lukanisman berkata, ia berdasarkan maklum balas diterima daripada Pemegang Pendaftaran Produk (PRH) sehingga 24 Oktober lalu.

"Bahagian Regulatori Farmasi Negara (NPRA) juga melaksanakan mekanisme Pelaporan Gangguan dan Pemberhentian Bekalan Ubat secara sukarela mulai 1 Ogos 2025.

"Semakan melalui sistem Pelaporan sehingga 18 November 2025 mendapati tiada pelaporan rasmi diterima berkaitan gangguan bekalan vaksin influenza sehingga ke tarikh ini," katanya pada sesi soal jawab lisan di Dewan Negara semalam.

Beliau menjawab soalan **Senator Dr A. Lingeshwaran** yang ingin tahu status terkini stok vaksin influenza memandangkan terdapat peningkatan kes dan permintaan vaksin sehingga banyak negeri kehabisan stok.

Lukanisman berkata, setakat 10 November lalu, fasiliti kesihatan Kementerian Kesihatan (KKM) mempunyai 4,044 dos dan 2,881 dos vaksin masing-masing bagi memenuhi aktiviti suntikan kepada petugas kesihatan dan warga emas.

Beliau berkata, terdapat tujuh vaksin influenza

'Cukup sampai tahun depan'

Stok vaksin influenza dalam pasaran dijangka mampu bertahan sehingga Februari 2026



LUKANISMAN pada sesi soal jawab lisan di Dewan Rakyat.

yang mengandungi virus kurang aktif strain influenza A (H3N2) didaftarkan di Malaysia seperti produk *Vaxigrip Influenza Vaccine*, *Vaxigrip Tetra*, *Influvac Tetra*, *Influvac Suspension for Injection* serta tiga produk *SKYCellflu* dalam bentuk trivalen dan kuadrivalen.

"Daripada awal 2025 se-

hingga kini, 2,609,235 dos diimport ke Malaysia. Terdapat lima penghantaran berjumlah 429,130 dos yang tiba pada 25 dan 30 November lalu serta 9 Disember 2025," katanya.

Menjawab soalan tambahan Lingeshwaran mengenai kawalan harga vaksin influenza di pasaran swasta, Lukanisman berkata

KKM melaksanakan pemantauan dengan kerjasama Kementerian Perdagangan Dalam Negeri dan Kos Sara Hidup (KPDN) bagi memastikan tiada penjualan vaksin itu pada harga keterlaluan.

Mengulas sama ada kerajaan mempertimbangkan program subsidi vaksin influenza bagi mengelakkan kesesakan di fasiliti kesihatan, pihaknya mempertimbangkan kaedah terbaik dan melihat peruntukan diterima pada Belanjawan 2026 untuk mengurangkan beban masyarakat yang memerlukan suntikan itu.

Sementara itu, Lukanisman berkata, KKM mempertimbangkan memperluas Program Penyumbeluran Perkhidmatan Hospital (HSOP) yang setakat ini dilaksanakan untuk perkhidmatan imbasan *positron emission tomography* (PET) iaitu ujian imbasan perubatan yang digunakan untuk melihat fungsi organ dalam badan dan pengimejan resonans magnetik (MRI).

"Kami fikir kaedah sama untuk memberi perkhidmatan bagi *allied science* sebagai contoh *speech therapy* yang memerlukan tempoh menunggu sangat panjang," katanya.

Missing elders? Activate Silver Alert!

IMAGINE Atok wandering off for a stroll then vanishing - faster than a glass of *teh tarik* at a *mamak* table. Yet, unlike missing children, there is no NUR Alert for our seniors. And the numbers are shouting that we urgently need one.

Enter the Silver Alert: nationwide, smart, respectful - with a touch of Malaysian flair - because our elders deserve far more than a shrug and a "*biaya-lah*".

Malaysia's ageing reality is catching up fast: As of 2025, about 8% of Malaysians are aged 65 and above. This age group now makes up 11.6% - roughly 3.9 million people. Projections? By 2040, Malaysians aged 60 and above are expected to exceed 17% of the population.

And this does not just mean more "senior discounts" at *kendai makan*. We are staring at a surge in age-related issues - cognitive decline, dementia and all the "forget where I parked my Honda" moments.

Today, an estimated 200,000 to 216,000 older adults in Malaysia live with dementia. By 2050, that number could balloon to 668,000 if we keep ignoring it.

Translation: we are not just getting "older"; we are becoming a nation where senior citizens are no longer a fringe demographic but an increasingly mainstream one. This is why a Silver Alert isn't some fancy idea; it is plain common sense. More seniors mean a higher risk of "wandering off and *lupa jalan balik*".

As life expectancy rises, more of our parents, grandparents and neighbours will fall into the "golden but vulnerable" zone. With dementia and other cognitive issues creeping up, the simple act of "going for a walk safely" is no longer guaranteed.

Current support system? Kinda sus (lingo for suspicion). As of 2024, Malaysia has just over 60 trained geriatricians - that is roughly one specialist for every 10,000 older adults. Many dementia cases go undiagnosed or dismissed as "*Mak*

lima-lah, tua, lupa sikit". The signs often blur between normal ageing and real medical concerns.

Families end up juggling caregiving like a part-time job with full-time stress. And while we loudly shout "Respect your elders!" at the dinner table, the moment they wander off, we suddenly realise we don't have a system to help them.

Birth rates are dropping and life expectancy is rising - a classic recipe for a future with more old folks than younglings. If we don't build a robust elder-friendly safety net now, we'll regret it later - with missing old folks, overburdened hospitals, exhausted caregivers and public panic. So yes, Silver Alert isn't about charity; it is common sense.

Learning from others

This isn't rocket science. Other countries have already set up systems to locate missing seniors.

United States: Around 18 US states have Silver Alert programmes. Florida's system fires alerts via highway signs, media and public notifications when seniors or adults with dementia go missing. North Carolina does the same, with law enforcement verifying cases before issuing alerts.

Canada: In British Columbia, civil-society initiatives like BC Silver Alert pilot alert systems for seniors with dementia. Other provinces are lobbying for legal frameworks to support missing-vulnerable-adult alerts.

Lessons to steal - shamelessly: Coordinated alerts that combine law enforcement, media, public engagement and technology actually work. Funding and training are key. And yes, these countries manage to keep seniors safe without causing unnecessary panic or stigma.

Malaysia wouldn't be reinventing the wheel, just giving it a local spin.

How to make it smart, practical and sassy



In British Columbia, civil-society initiatives like BC Silver Alert pilot alert systems for seniors with dementia.
- REUTERS/SPIC

➤ **National alert infrastructure:** A system like NUR Alert, managed by the government, ready to send alerts the moment a senior goes missing.

➤ **Integration:** Hospitals, police, transport hubs, community centres - if someone wanders into a clinic, LRT or *pasar malam*, the alert fires automatically.

➤ **Wearable ID or QR-coded bracelets:** Stylish enough so elders don't feel like criminals; functional enough that social-minded youths or Starbucks-obsessed teenagers can help.

➤ **Community engagement + public awareness + respect framing:** No more "old bods gone wild" headlines. Think "lost heritage, lost stories" instead.

Mobilise neighbourhood watches, shopkeepers, bus drivers - basically everyone - to help guide Atok and Makcik back safely before they wander into the next *pasar malam* or random street.

➤ **Funding and policy:** Treat ageing as a national agenda, not an optional side-project. Train more geriatricians, fund elder-care services, support caregivers and integrate Silver Alert into national welfare planning.

A dash of Malaysian realism

Some politicians will shrug: "Elderly? We have bigger problems - inflation, rising chicken price." *Aiyah*. But if Atok gets lost 100km away, who gets called first? NUR Alert works for kids but now we need VIP-level chaos control for seniors.

Sure, some elders may resist ID bracelets. The reply: "Atok, this isn't a name tag. This tag keeps you safe. It ensures you don't end up *makan Maggi* with strangers in Penang."

And don't even think elders won't wander far. Atok already has a history of "adventure walking" and Makcik's curious spirit may land her in someone else's *rumah terbuka*. Without Silver Alert, it's everyone panicking while the elders enjoy free *lauh* and *kopi*.

Cultural twist: Malaysians love a bit of chaos but we love family more.

Picture the *kampung*: everyone knows everyone and news travels faster than a WhatsApp forward. A Silver Alert harnesses this communal energy. Imagine a unified alert system, QR bracelets and neighbours ready to track lost elders like national treasure hunts. It's fun, safe and culturally resonant - no foreign tech buzzwords required.

Training and manpower: let's make it sustainable.

One geriatrician for every 10,000 seniors? Not enough. We need more trained **medical** staff, social workers and community volunteers ready to respond whenever someone wanders off. Schools and universities can pitch in too - younger Malaysians get a sense of responsibility and elders gain safety. Win-win.

Final word: Do it now or sit back and watch Atok and Makcik turn your neighbourhood into a missing-persons episode.

We praise seniors as "the backbone of civilisation" and "living *kampung* history books". When they wander and vanish, shrugging it off as normal ageing is lazy and irresponsible. Silver Alert is not charity; it's common sense.

When an elder goes missing, it is not just a lost person; it's lost memory, lost stories and lost heritage. Malaysia cannot afford to lose people we love without raising the alarm.

Azura Abas is the associate editor of the Sun. Comments: letters@thesundaily.com



Psychological safety in schools

'SEKOLAH Selamat 2.0' brought together leading experts in education, psychology and public health to urgently address the rising tide of emotional distress among Malaysian students at an academic forum held recently at Tunku Abdul Rahman University of Management and Technology (TAR UMT) Kuala Lumpur campus.

The consensus among panellists was clear, mental health is no longer a peripheral issue but a critical survival skill requiring a multi-sectoral and systemic overhaul of the current education ecosystem.

The forum was attended by the current chairman of TAR UMT's board of governors and alumni Council, Tan Sri Chan Kong Choy, President of TAR UMT, Prof Dato' Indera Dr Lee Sze Wei, school counsellors and educators.

The forum began with a compelling keynote address delivered by Dr Lee who stressed that mental health and emotional resilience in schools are 'very timely and very hot topics' that concern not just schools, but society as a whole.

Dr Lee also issued a strong call to action, urging all stakeholders,

including management, teaching staff, parents, families and the government to collaborate, emphasising that prevention is always better than solving the problem after it escalates.

Associate Professor Datuk Dr Monna Ong Siew Siew, who is the lead researcher of the 'Sekolah Selamat 2.0' collaboration, presented the initiative which seeks to strengthen educational safety through new elements such as psychological safety, mental well-being, digital literacy and systematic, evidence-based intervention.

Dr Monna cited alarming statistics, including a 17.7% rise in recorded physical bullying cases from 2023 to 2024 and a 60% increase in students reporting symptoms of depression, anxiety and post-pandemic stress.

The proposed framework expands the definition of school safety from a physical focus to psychological, social, and emotional dimensions. The proposed phased implementation plan includes a pilot test in 200 schools nationwide and the training of 10,000 teachers starting in 2026.

She also proposed establishing a

National Mental Health and School Crisis Intervention Council.

The forum then proceeded with a dynamic panel discussion featuring experts from diverse fields, each providing practical and systemic perspectives.

Dr Nazrul Azizi, current president of Young Minds Malaysia highlighted the emotional pressures faced by the current 'hyperconnected' generation of students. He argued that schools may be underestimating the need for emotional literacy and responsible gadget use.

Imatul Nor Hazizan, serving as the psychology officer at the Titiwangsa Health Office, identified the biggest gap in the current school-to-health referral pathway as the lack of a structured system for the early detection of emotional distress, especially since students often exhibit 'quiet symptoms' such as withdrawal, sleep deprivation, or somatic complaints (physical pain) rather than obvious behavioural issues.

Dr Chuah Hooi Mei, the Programme Leader of FSSH, TAR UMT focused on the challenges faced by parents as primary caregivers and



(from left) Assoc Prof Dr Lim Chia Yien, the forum's moderator, with all the panellists, Prof Dr Ananda Kumar, Dr Nazrul, Imatul, Dr Chuah, Tan and Wong.

noted that a major barrier is the lack of a one-stop online platform for them to find reliable help and information.

Principal of SMJK Chong Hwa KL, Tan Siew Choo shared that the biggest operational barriers are the vast amount of administrative tasks and KPIs (Key Performance Indicators) that overburden teachers, leaving them with insufficient time and knowledge to address students' mental health.

Wong Su Zane, vice-president of Life Line Association Malaysia, endorsed the multi-level crisis intervention model of Sekolah

Selamat 2.0 as realistic.

She urged all adults to 'stop everything, drop everything, and listen' when a student is willing to speak, and to change their opening question from "What's wrong with you?" to the more empathetic "What happened to you?".

The forum concluded on a constructive note, with shared aspirations that the 'Sekolah Selamat' 2.0 proposal will continue to gain traction and contribute to building a school environment where psychological safety and student well-being are prioritised.

Call for national alert system as more seniors go missing

■ BY HARITH KAMAL
newsdesk@thesundaily.com

PETALING JAYA: As Malaysia's population ages, experts are calling for a nationwide alert system to locate missing seniors, warning that vulnerable adults – particularly those with dementia or cognitive impairments – face rising risks of injury, neglect or death without immediate action.

Universiti Kebangsaan Malaysia public health medicine specialist Prof Dr Sharifa Ezat Wan Puteh said numerous seniors go missing each year due to cognitive decline, dementia, Alzheimer's, abandonment or elder abuse.

"Missing seniors are exposed to immediate dangers such as hypothermia, heatstroke, drowning, hunger, falls and injuries.

"Some are found dead, while others suffer worsening of existing medical conditions. If they drive, there's the risk of accidents that could harm themselves and others."

Sharifa stressed that the dangers extend beyond immediate injury.

➤ Dementia, neglect and weak support structures leave elderly Malaysians exposed to injury and death: Public health expert

"Prolonged exposure and trauma can have long-term health consequences. The lack of a formal mechanism to locate missing seniors compounds the problem."

To tackle such risks, she advocates establishing a silver alert system, modelled on programmes in the United States.

A silver alert is a public warning system designed to help locate missing older adults, especially those who are vulnerable due to dementia, Alzheimer's or other cognitive impairments.

The main idea is to quickly inform the public, authorities and relevant agencies when a senior goes missing, increasing the chances of finding them safely.

"The system would leverage technology, such as tracking tags,

wearable devices or mobile apps to quickly locate missing seniors and prevent serious health outcomes.

"Alerts should cover areas where seniors may face trauma from injuries or abuse."

However, Sharifa warned of structural challenges in implementing such a system.

"Malaysia currently has too few geriatric specialists. While palliative care, physiotherapy and other elderly services are available through public and private clinics, a fully coordinated alert system involving police, healthcare, telecommunications providers and the public is not yet ready."

She recommends preventive measures at family and community level.

"Families can equip seniors

with tracking devices, accompany them outdoors, hire assistance, run errands on their behalf and ensure they carry phones with home address information."

Sharifa said safeguarding seniors requires a coordinated approach through technology, healthcare support and community vigilance.

She also highlighted social and financial pressures affecting the elderly.

"Financial strain and neglect contribute to abuse and abandonment.

"While the National Policy for Older Persons exists, there are currently no laws penalising families who exploit or neglect seniors, although a supporting bill is in development."

Informal caregivers face challenges as well, she added.

"Services exist, but gaps remain. There is no standardised compensation for those caring for the elderly at home."

See
also
page 11

Accurate, timely cancer diagnosis improves outcomes

Advances in medical science have transformed what was once a devastating illness into one where survival and recovery are increasingly possible. PHOTO: GETTY IMAGES

A CANCER diagnosis can be overwhelming, but today there is more reason for hope. Advances in medical science have transformed what was once a devastating illness into one where survival and recovery are increasingly possible. At the heart of this progress is technology that not only delivers new treatments but also helps doctors make the right diagnosis from the very beginning. The first step in treating cancer is often the most critical. When a patient is suspected of having blood cancer, for example, doctors must determine the exact type and severity of the disease. The difference between one subtype and another can greatly change the course of treatment. A correct diagnosis at the start ensures the patient receives the most effective therapy, while a wrong or delayed diagnosis could cost valuable time.

Getting it right the first time is crucial," says Subang Jaya Medical Centre (SJMC) consultant haematologist Dr Tan Sen Mul.

The tools available today enable doctors to see deeper into the disease

than ever before, so they can choose treatments that are best suited for each individual, she explains.

MORE EFFECTIVE

While traditional methods like blood tests and microscopic examination remain important, modern technology offers far greater precision.

In earlier decades, doctors relied mainly on these basic checks, but today, they are complemented by sophisticated molecular tools.

For instance, techniques can now identify whether cancer cells are of B-cell or T-cell origin. More critically, cytogenetic testing and next-generation sequencing (NGS) allow doctors to detect specific gene mutations and chromosomal abnormalities, which not only confirm the malignancy type but also provide critical prognostic information.

Imaging modalities, such as PET-CT and MRI scans as well as specific tumour markers, further refine the process by enabling precise identification of disease subtypes such as

diffuse large B-cell lymphoma, mantle cell lymphoma, or FLT3-mutated acute myeloid leukaemia.

Dr Tan says this level of diagnostic precision means that patients receive more accurate risk stratification and individualised management plans.

SJMC consultant paediatrician and paediatric haematologist-oncologist Dr Chan Lee Lee adds that these advances are transforming outcomes for children as well.

Thanks to current technology, childhood cancers can now be diagnosed with greater accuracy and intervened on done much earlier.

Cancer remains a formidable challenge, but with the innovations available today, it is no longer the hopeless fight it once was, she explains.

Today, childhood cancer is highly treatable, and with the right care, many children go on to live full, healthy lives.

She adds that in the late 1960s, children diagnosed with acute lymphoblastic leukaemia, for example, had survival rates of below 20 per cent within five years of diagnosis. By the

1990s, survival rates had risen to above 80 per cent and today, cure rates for the disease have reached more than 90 per cent.

With treatment options available at high cure rates, early and accurate intervention is crucial and can make all the difference.

But parents are encouraged to seek timely medical care and ensure their children receive the full support they need.

Dr Chan says every child's case is unique, which is why treatment plans are carefully tailored to individual needs. Depending on the diagnosis, this may include a combination of chemotherapy, surgery, radiation therapy or transplantation, she explains.

THE FUTURE

Cancer care is moving from a "one-size-fits-all" approach to a highly personalised, precision-based model designed specifically for each patient's unique disease.

Though chemotherapy continues to be used, there has been a remarkable shift towards targeted and immunotherapy.

CANCER IN MALAYSIA

The global cancer risk for both males and females is one in eight.

TOP FIVE CANCERS — MEN

- Colorectal
- Lung, trachea and bronchus
- Prostate
- Liver
- Lymphoma

TOP FIVE CANCERS — WOMEN

- Breast
- Colorectal
- Lung, trachea and bronchus
- Corpus Uteri
- Ovary

Source: The Malaysian National Cancer Registry Report 2017-2021.

"The rise of targeted therapy, immunotherapy, CAR T-cell therapy, and stem cell transplantation offers targeted alternatives with less toxicity," says Dr Tan.

These innovations bring real hope to patients and families, but their success depends on a coordinated system from the very start, she stresses. Innovations such as AI-assisted diagnosis, digital pathology, and broader access to genomic testing are also expected to further transform cancer care in Malaysia.

Cancer remains one of Malaysia's greatest health challenges, but the landscape is shifting. Breakthroughs in medicine and early, accurate detection are transforming cancer care, ensuring the right treatment at the right time, and paving the way for more patients to not only survive but thrive.

With an earlier and timely diagnosis, patients can now be given the best chance of life.

meera@nst.com.my

Getting it right the first time is crucial.

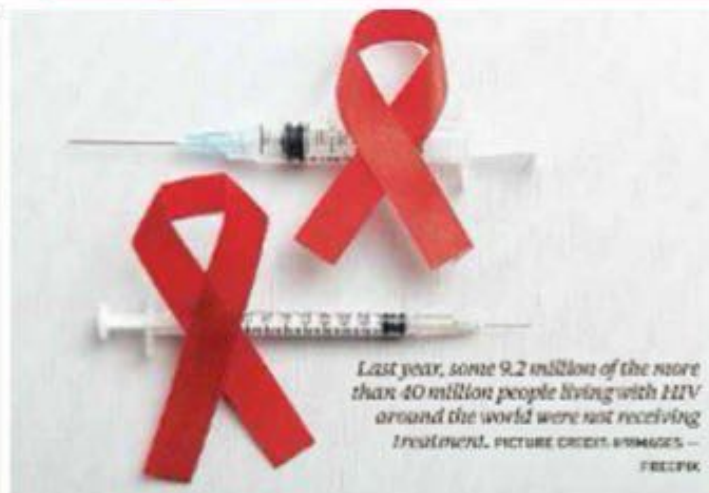
Dr Tan Sen Mul



With treatment options available at high cure rates, early and accurate intervention is crucial and can make all the difference.

Dr Chan Lee Lee





HIV funding cuts 'most significant setback in decades'

DRAMATIC international funding cuts have thrown the global HIV response into turmoil, the United Nations says as it warns that new infections could surge.

The UNAIDS agency cautioned that since the United States and others abruptly slashed funding this year, the ecosystem sustaining HIV treatment and prevention in dozens of countries has been "shaken to its core".

"Clinics closed without warning, thousands of health workers faced job losses or lost salaries and life-saving testing, treatment and prevention services experienced widespread and continuing disruption," UNAIDS executive director Winnie Byanyima told reporters in Geneva.

Presenting a new report, she described it as the most significant setback in decades.

Byanyima pointed to the abrupt pause by the United States — previously the biggest funder of the global HIV response.

But she highlighted that other major donors had also significantly cut their foreign aid spending.

"The cuts are dramatic across the board," she lamented, warning of "devastating consequences".

In its report, UNAIDS said around 1.3 million people contracted the disease in 2024.

That was 40 per cent lower than in 2010, but remained more than three

times higher than needed to reach the UN's goal of ending AIDS as a public health threat by 2030.

Around 630,000 people died from AIDS-related illnesses last year, down 54 per cent since 2010 and 15 per cent since 2020, the report said.

But Byanyima warned that the deep funding crisis had "exposed the fragility of the progress we fought so hard to achieve".

Even before the crisis, the global AIDS response was severely underfunded, with access to US\$18.7 billion in 2024 — 17 per cent below what was needed, Byanyima said.

Already last year, some 9.2 million of the more than 40 million people living with HIV around the world were not receiving treatment, the report showed.

And Byanyima said in 13 countries, the number of people starting on treatment had actually declined compared to last year.

She stressed though that a lot of effort had gone into ensuring that those living with HIV could continue accessing their treatment, and that such services now were somewhat stabilised.

But she voiced deep concern about a collapse in HIV prevention services, which were already under strain.

If left unaddressed, this risked resulting in 3.3 million additional new infections by 2030, she warned.



Strategic value of employee happiness

IN recent years, organisational well-being has emerged as a critical determinant of workforce performance across Malaysian industries.

While employee happiness was once regarded as an abstract or secondary management concern, current evidence from occupational health practice indicates that it carries measurable implications for productivity, safety and organisational resilience.

From a clinical and workplace health perspective, employee happiness is closely linked to physiological and behavioural outcomes.

Employees who feel supported and valued generally exhibit lower stress levels, leading to reduced risk of hypertension, chronic fatigue and diminished immunity. These health improvements translate to fewer medical consultations and reduced utilisation of sick leave.

Employee happiness also influences the quality of workplace performance. Organisations continue to grapple not only with absenteeism but also with presenteeism, a subtler challenge in which employees are present at work but cognitively disengaged.

This phenomenon affects productivity more significantly than many employers realise. When employees experience positive morale, their levels of concentration, motivation and task engagement rise correspondingly.

Workplace safety is also significantly impacted by employee well-being. Emotional strain, dissatisfaction and burnout increase the likelihood of errors, lapses in judgment and non-compliance with safety protocols.

Conversely, employees who feel content and psychologically secure tend to be more vigilant, adhere to established safety procedures and report hazards promptly.

Employee happiness is also a proven factor in talent retention.

A workplace that prioritises fairness, communication, recognition and respect fosters loyalty and reduces the likelihood of staff attrition. Stability within the workforce creates a more cohesive team dynamic and enhances organisational performance.

Furthermore, psychologically safe and satisfied employees are more inclined to engage in innovative thinking and continuous improvement. They participate more actively in discussions, offer suggestions and contribute proactively to organisational development initiatives.

As occupational health continues to shape modern workplace standards, it is evident that investing in employee happiness is not an optional gesture.

DR ARULKUMARAN VIAPURI
Occupational health doctor
Shah Alam

Vape product crackdown in Kedah

RM16mil worth of devices, liquids seized in industrial warehouse raid

ALOR SETAR: The Customs Department seized more than RM16mil worth of electronic cigarettes or vape, devices and liquids in a raid on a storage warehouse in Padang Besar.

State director Wan Marini Wan Hamzah said that in the 3pm raid on Oct 13, the enforcement team discovered 719,250 units of vape devices and liquids.

"Upon further inspection, they found 211,050 vape devices

and 508,200 vape liquids of various brands.

"The entire seizure, believed not to have been cleared by Customs, is worth nearly RM13mil while the estimated total import duties and taxes amounted to over RM3mil.

"The suspect, a man in his 40s, failed to produce valid import permits from the Health Ministry," she told a press conference at the state Customs headquarters yesterday, Bernama reported.

Wan Marini said vape liquid is a controlled import item under Part 1, Second Schedule of the Customs (Prohibition of Imports) Order 2023 and requires approval from the ministry before it can be brought into the country.

"These vape devices and liquids were produced in China and arrived at the Kuala Lumpur International Airport before being brought to Perlis by land.

"We are still investigating whether these items are for the local market or intended for export to other countries.

"We are also looking into the people involved, including the warehouse owner," she said.

The case is being investigated under Section 135(1)(g) of the Customs Act 1967.

Wan Marini added that they would continue to enhance monitoring and control at all the

country's gateways to curb the smuggling of prohibited and high-duty goods.

"The public should assist us in our fight against smuggling, especially cigarettes, liquor, firecrackers, drugs and other items, and to avoid being involved in such activities.

Information can be channelled via the 1800-88-8855 toll-free hotline or at any nearby Customs office.