

AKHBAR : THE SUN
MUKA SURAT : 3
RUANGAN : NATION

The Sun M/s 3 National 20/6/2025 (Jumaat)

Systemic overhaul needed to reform healthcare

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PETALING JAYA: With Malaysia's healthcare system under mounting strain, health experts and consumer advocates are calling on the government to deliver bold, systemic reforms – not just promises. They say only transformative change can address a system burdened by rising costs, limited access and uneven accountability.

"It can't be another symbolic gesture," said Galen Centre for Health and Social Policy CEO Azrul Mohd Khalib.

"Superficial adjustments won't be enough, we need real reform to ensure every Malaysian has fair and affordable access to healthcare."

Prime Minister Datuk Seri Anwar Ibrahim recently announced that the government would form a high-level task force – comprising representatives from the Health Ministry, Finance Ministry and Bank Negara – to implement bold reforms to fix long-standing inefficiencies in Malaysia's healthcare system.

Azrul stressed that entrenched

► Experts warn only transformative action can rescue strained and inefficient medical system, while calling for transparency, equity and firm oversight

problems, such as fragmented services, opaque pricing and under-regulated private sector players require sweeping and urgent measures.

"The committee should urgently tackle inefficiencies by enforcing price transparency in private hospitals, standardising medical fees and introducing value-based payment systems such as the Diagnosis-Related Group model."

He warned that disjointed data systems between the public and private sectors have led to duplicated services and unnecessary spending, and called for tighter digital integration and regulation of third-party administrators, insurers and private providers to eliminate hidden mark-ups.

Azrul also urged a complete overhaul of healthcare financing, pointing out that Malaysia's health expenditure remains below global benchmarks.

"The task force should push for a national health and social insurance model with pooled contributions from employers and employees."

"This would reduce out-of-pocket spending, protect households from catastrophic bills and ensure cost-sharing across the system."

Azrul recommended setting clear key performance indicators requiring regular public updates and mandating independent audits.

He also called for parliamentary oversight and the involvement of civil society to ensure transparency and policy continuity.

He stressed that reaching underserved groups must be a key priority.

"Private hospitals receiving tax incentives should be required to provide affordable care quotas. We must also expand telemedicine, mobile services and subsidies for rural patients."

Azrul added that small but visible steps could quickly build public trust in the reform effort, such as mandatory itemised billing and a national online platform for patients to report billing complaints.

Echoing his concerns, Federation of Malaysian Consumers Associations (Fomca) president Dr Saravanan Thambirajah said Malaysians are facing a dual crisis: spiralling private healthcare costs and overwhelmed public facilities.

"One of the most pressing issues is rising private healthcare costs, where patients are billed without clarity and exposed to unchecked price hikes."

Saravanan noted that medical inflation in Malaysia is among the highest in the region, yet there is no legal mechanism to regulate it or even public data to justify the increases.

"Procedures, room charges, consultation fees and medications must be disclosed and regulated. Itemised bills should be mandatory."

He also called for a national database of verified healthcare pricing and tighter control over insurance premiums.

"Healthcare must be governed by strong public policy. Patients, not profits, must be at the centre."

He proposed the creation of a permanent Consumer Health Advisory Council and digital feedback mechanisms to ensure that reforms are informed by the public's live experiences.

Fomca also backs the idea of a national health insurance scheme, provided it includes robust protections, such as subsidies for the B40 and M40 income groups and oversight by an independent, non-political body.

"The government must prioritise rural infrastructure, expand mobile clinics and offer incentives for healthcare workers. Healthcare is a public right."

"Without legislation and enforcement, aspirations won't translate into impact."

"It's time for the government to lead, not just manage," he added.



Health experts say problems such as fragmented services, opaque pricing and under-regulated private sector players require sweeping and urgent reforms. – ADIB RAWI YAHYA/THESUN

AKHBAR : THE STAR
MUKA SURAT : 6
RUANGAN : NATION

Focus on health before adding years

Many older Malaysians do not enjoy good health, say medical experts



When to stop: Raising the retirement age comes with challenges of its own. — FAIHAN GHANI/The Star

By ARFA YUNUS
and BENJAMIN LEE
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PETALING JAYA: As discussions intensify around the proposal to raise the retirement age to 65, experts say a better health plan should be in place first to ensure individual well-being.

They said any move to lengthen work span must go in tandem with improvements in healthcare.

Others said that if the proposal were to be implemented, the career progress of young workers should not be overlooked.

They pointed out that although Malaysians were living longer than before, many were not enjoying good health in their later years.

Malaysian Dietary Supplement Association president Datuk Dr M. Rajen said that raising the retirement age must go hand in hand with improving Malaysians' healthspans.

"Although people are living longer, many are not ageing well enough to remain in the workforce beyond 60.

"This will force companies to

retain unfit workers, which means it could strain both employers and the public healthcare system," he said.

He urged the government to promote health from an earlier age, starting in schools and workplaces, and to engage religious and community institutions in spreading a culture of wellness.

Dr Rajen also called for supplemental tax relief to make preventive care more affordable for the B40 group.

Healthy Ageing Society vice-president Dr Wong Teck Wee believes the current retirement age of 60 is a practical cut-off for most, though some in less demanding jobs may continue working longer if their health allows.

He urged retirement policies to be based on healthspan rather than age alone, with flexible models, such as phased retirement.

"There is a need for early lifestyle interventions, preventive healthcare, workplace wellness programmes and age-friendly urban planning to support healthy ageing across the population," he said.

Consultant obstetrician and

gynaecologist Datuk Dr NKS Tharmaseelan said Malaysia's ageing population can remain productive well into their 70s, thanks to the country's strong healthcare system.

He believed older Malaysians, especially in white-collar roles, bring valuable experience and maturity to the workforce.

However, he stressed that retirement extensions should be optional and based on individual health status, with mandatory health screenings to ensure fitness for continued work.

"Healthy ageing begins early — those who maintain balanced lifestyles from a young age are more likely to avoid chronic illnesses.

"Changes made only after retirement are unlikely to extend one's healthspan significantly," he said.

Health expert Prof Dr Sharifa Ezat Wan Puteh said raising the retirement age has been widely adopted in developed nations, with countries like Belgium, the United States and Britain gradually increasing the threshold to 65 or above.

She said if Malaysia were to

follow suit, it could help elderly workers with limited savings sustain their livelihoods.

"However, suitable roles, flexible hours and fair wages must be offered, as not all seniors are physically or cognitively fit.

"While older employees bring valuable experience, extended employment could increase medical costs and limit job openings and salary progression for younger workers entering the labour market," she said.

MEF president Datuk Dr Syed Hussein Syed Husman said extending the retirement age beyond 60 should be flexible, voluntary and sector-sensitive.

"MEF supports post-retirement contracts based on mutual agreement and performance, especially in less demanding sectors like education and finance.

"However, forcing extensions risks burdening employers with higher costs and limiting job opportunities for younger workers," he said.

Syed Hussein cautioned that extending the retirement age must not come at the expense of younger workers' career growth.

Malaysia is ageing — fast

Lifespan vs Healthspan (2024), age (years)

Healthy lifespan **67**

Average lifespan **76**

Years in poor health: **9**



Malaysians are living longer — but the years spent in ill health have widened from **8.6 years** (2000) to **9 years** (2024).

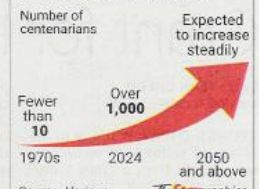
Ageing population forecast

% of Malaysians aged 65 and above



2023 Ageing Society
2043 Aged Society
2058 Super-aged Society

Rise of centenarians



Source: Various The Stargraphics

AKHBAR : HARIAN METRO
MUKA SURAT : 6
RUANGAN : LOKAL

Harian Metro m/s 6 Lokal 20/6/2025 (Jumaat)

16 kes penyakit kusta direkod di Kelantan sejak tahun 2023

Gua Musang: Kelantan mencatatkan sebanyak 16 kes penyakit kusta dalam tempoh lebih dua tahun sejak 2023.

Pengarah Jabatan Kesihatan Kelantan Datuk Dr Zaini Hussin berkata, daripada jumlah itu terdapat tiga kes direkodkan bagi tahun ini.

Menurutnya, masing-masing tujuh dan enam kes penyakit kusta dilaporkan untuk 2023 dan 2024.

"Pada 2023 terdapat tujuh kes di mana lima kes multibacillary (MB) dan dua kes jenis paucibacil-

lary (PB).

"Bagi tahun 2024 pula enam kes yang melibatkan kusta jenis MB dan pada tahun ini terdapat tiga kes kusta jenis MB direkodkan.

"Perlaksanaan rawatan pencegahan kusta boleh dilakukan melalui pemberian *Single Dose Rifampicin* (SDR) yang dapat mengurangkan risiko kepada kontak daripada menghidap penyakit kusta.

"Tempoh rawatan bagi pesakit kusta PB adalah selama enam bulan dan MB pula 12 bulan.

"Semua pesakit yang sudah sempurna rawatan perlu menjalani tempoh pengawasan di Pusat Rawatan selama lima tahun bagi PB dan 10 tahun untuk pesakit MB," katanya.

Beliau berkata demikian selepas merasmikan Sambutan Hari Kusta Sedunia 2025 Peringkat Negeri Kelantan di Kampung Pasir Linggi, Pos Lebir di sini, semalam.

Dr Zaini berkata, pemantauan berterusan dilakukan oleh pihaknya terutama di kawasan berisiko.

AKHBAR : UTUSAN MALAYSIA

MUKA SURAT : 21

RUANGAN : GAYA

Kosmo M/S 22 Wanita 20/6/2025 (Jumaat)

Kesihatan

Oleh DR. HANA MAIZULIANA
SOLEHAN

TEKANAN darah tinggi atau hipertensi sering digelar sebagai 'pembunuh senyap' kerana boleh merosakkan badan secara perlahan-lahan tanpa sebarang gejala ketara.

Walaupun masalah ini boleh berlaku kepada lelaki dan wanita, namun cara ia memberi kesan tidak semestinya sama. Wanita mungkin mengalami tanda-tanda dan risiko yang berbeza berbanding lelaki. Mari kita fahami bagaimana hipertensi memberi kesan secara khusus kepada wanita dan langkah-langkah penting untuk menjaga kesihatan diri.

Tekanan darah tinggi memberi kesan berbeza kepada wanita.

Wanita lebih berisiko untuk mengalami strok dan dementia walaupun pada paras tekanan darah lebih rendah berbanding lelaki, manakala lelaki lebih cenderung mengalami serangan jantung.

Simptom dialami oleh wanita juga kadangkala tidak seperti gejala 'klasik' yang biasa dikaitkan dengan tekanan darah tinggi.

Sebagai contoh, selain sakit kepala atau pening kepala, wanita mungkin mengalami keletihan melampau, pening atau rasa berpusing, loya, sesak nafas, ketidakselesaan dada, deringan dalam telinga dan bengkak di kaki.

Gejala-gejala ini kadangkala disalah anggap sebagai tekanan emosi atau perubahan hormon terutamanya semasa menopause.

Disebabkan itu, ramai wanita tidak menyedari mereka menghidap hipertensi sehinggalah komplikasi serius seperti strok atau masalah jantung berlaku.

Hipertensi dalam kalangan wanita kerap tidak dikenal pasti kerana gejalanya lebih ringan atau berbeza berbanding lelaki. Contohnya, keletihan, keresahan atau gangguan tidur.

Ramai masih percaya bahawa tekanan darah tinggi hanyalah penyakit kaum lelaki, lalu menyebabkan wanita lewat mendapat diagnosis dan rawatan.

Tanggapan salah seperti 'hanya orang tua yang dapat tekanan darah tinggi' atau 'kalau rasa sihat, pasti tiada masalah kesihatan' juga menyumbang kepada pengesanan lewat.

Dalam pada itu, perubahan hormon wanita mempengaruhi tekanan darah.

Hormon memainkan peranan besar dalam mengawal tekanan darah. Fasa-fasa kehidupan wanita seperti haid, kehamilan dan menopause boleh membawa risiko yang berbeza terhadap tekanan darah.

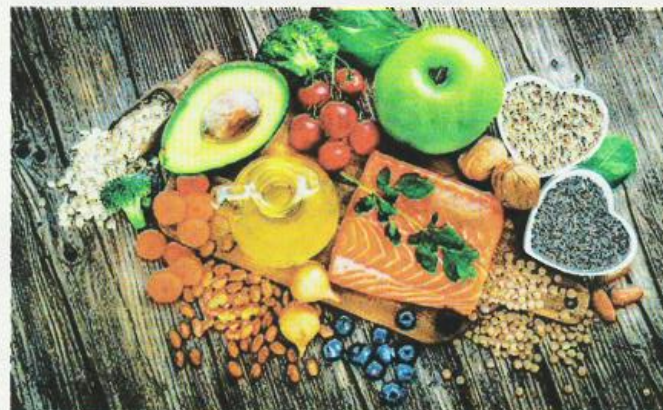
Semasa haid, sesetengah wanita mungkin mengalami kenaikan sementara tekanan darah terutamanya jika mereka mengalami simptom prahaid seperti kembung perut atau perubahan emosi.

Ketika kehamilan pula, tekanan darah boleh melonjak secara tiba-tiba selepas minggu ke-20, atau keadaan yang dikenali sebagai hipertensi gestasi.

Menjelang menopause, penurunan hormon estrogen menyebabkan salur darah menjadi kurang elastik dan lebih tegang, sekali gus menyumbang kepada

Ramai wanita ambil mudah masalah hipertensi

LAKUKAN pemeriksaan tekanan darah secara berkala untuk pengesanan awal. - GAMBAR HIASAN



PENGAMBILAN makanan seimbang dapat membantu mengurangkan masalah hipertensi. - GAMBAR HIASAN

peningkatan tekanan darah.

Oleh itu, bukan hanya faktor umur yang mempengaruhi tekanan darah wanita, tetapi perubahan hormon sepanjang hayat juga memainkan peranan sangat penting.

Hipertensi gestasi adalah tekanan darah tinggi yang bermula selepas minggu ke-20 kehamilan tanpa tanda-tanda kerosakan organ. Ia berbeza daripada hipertensi kronik yang sedia ada sebelum kehamilan.

Jika tidak dikawal, ia boleh berkembang menjadi praeklampsia, satu keadaan serius yang boleh memudaratkan ibu dan bayi.

Tanda-tanda praeklampsia termasuk sakit kepala teruk, perubahan penglihatan, bengkak pada tangan dan muka, kehadiran protein dalam air kencing serta risiko kelahiran pramatang atau berat bayi rendah.

Wanita dengan hipertensi gestasi juga berisiko tinggi untuk mendapat tekanan darah tinggi selepas bersalin. Oleh itu, pemeriksaan pranatal secara berkala sangat penting untuk memeriksa tekanan darah

yang normal.

Selain pengurangan paras hormon estrogen dalam badan ketika menopause, wanita juga mungkin mengalami pertambahan berat badan, menjadi kurang aktif dan menghadapi tekanan hidup atau stres lebih tinggi.

Kesemua faktor ini meningkatkan risiko hipertensi. Oleh itu, beberapa langkah kawalan boleh diambil bagi menjaga tekanan darah.

Antaranya adalah melakukan aktiviti fizikal secara berkala seperti berjalan laju, berenang atau mengamalkan yoga.

Pemakanan yang sihat juga penting dengan menumpukan kepada pengurangan pengambilan garam dan makanan diproses.

Di samping itu, tidur yang mencukupi dan pemantauan tekanan darah secara berkala turut membantu mengawal tekanan darah. Sementara itu, pil perancang terutamanya yang mengandungi estrogen boleh menaikkan tekanan darah, terutamanya dalam kalangan wanita

berumur lebih 35 tahun atau merokok.

Terapi penggantian hormon (HRT) juga perlu diawasi. Wanita yang mengambil hormon ini perlu memeriksa tekanan darah secara berkala dan berbincang dengan doktor tentang pilihan paling selamat, terutama jika mereka mempunyai risiko lain.

Wanita juga mungkin lebih terkesan oleh beberapa faktor gaya hidup yang boleh meningkatkan risiko hipertensi.

Tekanan emosi dan tanggungjawab sebagai penjaga juga sering memberi kesan besar kepada wanita.

Dari segi pemakanan, makanan segera, makanan diproses dan bergula turut meningkatkan risiko. Pengambilan garam juga boleh memberi kesan besar kerana wanita lebih sensitif terhadap bahan itu. Selain itu, komitmen kerja dan keluarga menyebabkan wanita jarang bersenam.

Langkah mudah seperti mengurangkan snek bergaram, berjalan 30 minit setiap hari dan menangani stres boleh membantu mengurangkan risiko. Selain itu, memantau tekanan darah di rumah merupakan cara terbaik untuk mengawal kesihatan.

Semua bacaan yang diambil hendaklah dicatat untuk dijadikan rujukan oleh doktor semasa pemeriksaan seterusnya.

Dalam pada itu, jika ibu, bapa atau adik-beradik anda mempunyai hipertensi, risiko untuk anda menghidap penyakit ini juga lebih tinggi.

Dari segi pemakanan, anda disarankan untuk memperbanyak pengambilan sayur-sayuran dan mengurangkan penggunaan garam dalam masakan.

Kesimpulannya, tekanan darah tinggi dalam kalangan wanita sering tidak diberi perhatian serius, walhal kesannya sama atau lebih berbahaya berbanding lelaki disebabkan perubahan hormon sepanjang hidup wanita.

Tidak pernah ada istilah terlalu awal atau terlalu lambat untuk mengambil tindakan.

DR. HANA MAIZULIANA SOLEHAN ialah Pakar Perunding Perubatan Dalaman & Pakar Neurologi di Columbia Asia Hospital - Seremban