



FMSA NEWSLETTER

Malaysian Family Medicine Specialists' Association

Issue 2 | 2024

ADDICTION UNPLUGGED:

INSIGHTS FROM THE FRONTLINES OF CARE



FOR FMSA MEMBERS ONLY



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OBJECTIVES

To promote and maintain the honour and integrity of the profession of Family Medicine Specialist in every one of its aspects and help to sustain professional standards and medical ethics.

To serve as the vehicle of the integrated voice of the whole profession and all or each of its own special problems and in relation to educating and directing public opinion on the problems pertaining to family health and the community at large.

To promote, facilitate and participate in the conduct of family medicine research and education, as may be appropriate.

To promote social, cultural, charitable and spiritual activities in building a caring society and a united Malaysian union.



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PRESIDENT'S MESSAGE

Dear esteemed members and readers,

I am delighted to share my thoughts in this edition of our newsletter, as it focuses on a topic that has long been overshadowed in mainstream discussions yet holds profound significance—Addiction. The decision by the editorial board to highlight this issue reflects a growing awareness of its importance, and I commend their initiative.

Addiction is not a moral failing; it is a disease—one that demands the same level of attention, care, and treatment as any other chronic illness. This paradigm shift in perspective is crucial for removing the stigma that has surrounded addiction for far too long. As governments increasingly move toward decriminalization, we, as family medicine specialists, must rise to the challenge.

Our role is pivotal. We must be prepared to welcome patients from this group into our clinics with empathy and without judgment. Furthermore, it is our responsibility to lead and equip our fellow doctors with the skills and knowledge required to provide comprehensive, evidence-based care.

Let us seize this opportunity to contribute to meaningful change, ensuring that patients struggling with addiction receive the dignity, respect, and support they deserve. I encourage everyone to read this edition's insightful articles, which shed light on this important issue and provide practical guidance for our practice.

Thank you to all the contributors for their dedication and expertise in making this publication possible. Together, we can be the catalysts for change.

Happy reading!

Warm regards,

Dr. Nor Hazlin Talib
FMSA President
2024-2026



“Addiction is not a moral failing; it is a disease—one that demands the same level of attention, care, and treatment as any other chronic illness.”

EDITOR'S MESSAGE

Breaking the chains of addiction

Our FMSA newsletter seeks to inform and inspire the family medicine community in Malaysia and abroad. Thus, this issue delves into a topic that resonates deeply within healthcare but is often overlooked by the society at large.

Often misunderstood as a moral weakness, addiction is increasingly acknowledged as a chronic, multi-factorial disease requiring empathetic and evidence-based management. This transformative breakthrough in thought is highlighted throughout this issue, particularly in our progress to decriminalise addiction. Our esteemed contributors have provided rich insights into both the clinical and societal aspects of this pervasive issue by implementing comprehensive addiction and harm reduction programs, partnerships with educational institutions and innovative preventive campaigns targeting our youth. The One Stop Centre for Addiction (OSCA), a proud primary care initiative spotlights the pivotal role of Family Medicine Specialists in combating stigma and delivering compassionate care.

The bonds of addiction goes beyond harmful substances. Behavioural addiction, a compulsive engagement in harmful behaviours despite its adverse consequences has been more prevalent in recent years. These behaviours can lead to significant impairment in various aspects of a person's life, including their mental health, relationships and daily functioning. Our addiction trainees and fellows explore the multi-faceted challenges and progress in understanding and managing behavioural addiction within our primary care framework using the latest evidences.

I encourage you to take a minute to reflect on the challenges shared and the successes achieved, as these are not merely narratives but also blueprints for change. It is also a call to action for all of us working in family medicine as we are on the frontlines in the community. Thank you for your dedication to this field and for being part of a movement that continually strives to do better for our patients.



“Strength does not come from physical capacity.

**It comes from an indomitable will.”
– Mahatma Gandhi**

**Dr. Lim Jean-Li
Editor**

FMS Klinik Kesihatan Sikamat, Seremban





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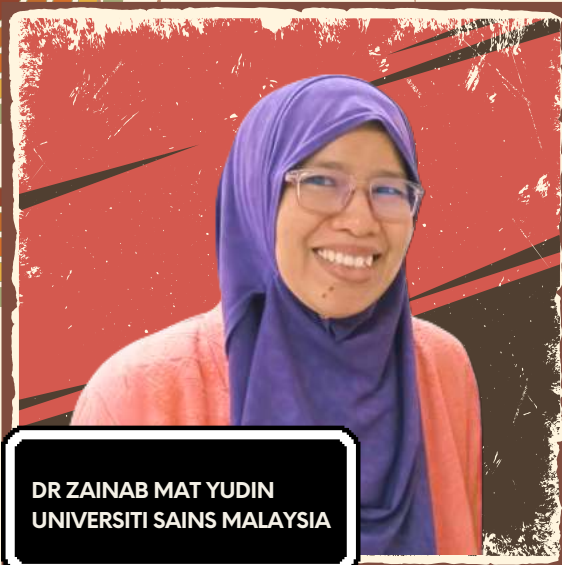
DR LEE YEOW SIONG
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EDITORIAL TEAM

These are the team of people who are responsible for content, design, and production of this newsletter. We also want to encourage you to share any ideas or thoughts you may have about our newsletter. Your feedback is incredibly valuable to us, and we are genuinely interested in hearing from you. After all, who knows? Your insightful idea could very well be featured in our upcoming newsletter, making it even better!



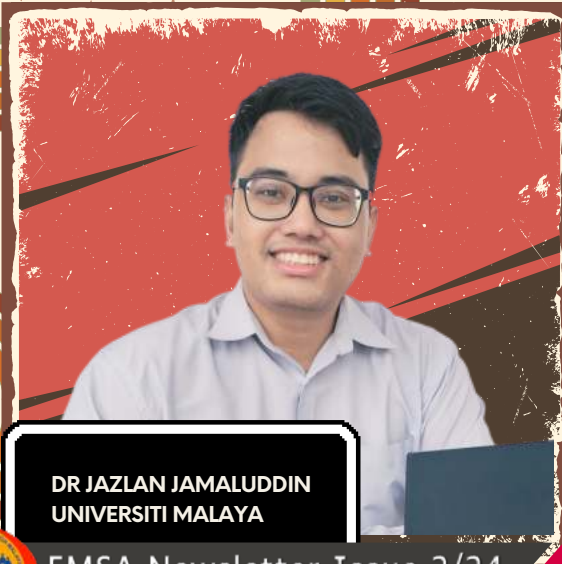
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DECRIMINALISATION

OF DRUG USE IN MALAYSIA – THE WAY FORWARD

By: Dr. Nor Hazlin Talib
Subspeciality in Addiction Medicine in Primary Care
Member of National Task Force on Decriminalisation of Drug
Use and Personal Possession



DECRIMINALISATION VS LEGALISATION: HOW IT DEFERS?

The term "criminal" refers to anything related to crime, which is an act that violates laws established by a society or governing authority and is punishable by law. The word can be used in different contexts, including legal, social, and moral perspectives.

Decriminalisation, on the other hand, refers to the process of removing or reducing the criminal status of an action or behaviour. Decriminalisation in the context of drug-related activities and personal possession refers to the removal of criminal penalties for such actions. This includes the use of drugs, the possession of drugs for personal consumption, and the possession of drug-related paraphernalia. These activities are still prohibited/illegal but are not criminalised. As of today, approximately 35 countries have eliminated criminal penalties for personal drug use. Examples include Portugal, United States of America, and Switzerland.

Legalisation is the process of making an activity entirely lawful, often accompanied by regulations that govern its production, sale, possession, cultivation, and use. Legalisation creates a legal framework that permits and regulates the activity. Countries like Canada (2018) and Thailand (2022) are among the countries that have legalised cannabis for both recreational and medicinal use.

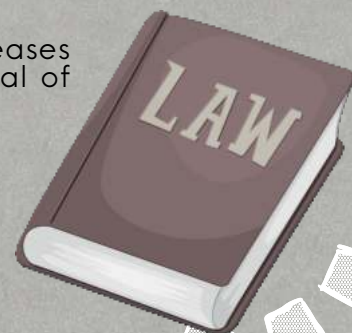
DRUG POLICY IN MALAYSIA

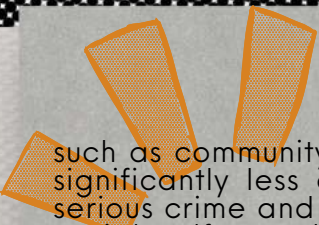
Malaysia has one of the strictest drug laws in the world, governed primarily by the Dangerous Drugs Act 1952. The country's drug policy is characterised by harsh penalties for drug offences, including mandatory death sentences for certain cases. Although death penalty sentences have been removed in 2023, the death penalty itself remains an option at the judge's discretion for certain crimes, including drug trafficking. Strict penalties are imposed for drug-related offences, including possession of drugs, drug trafficking, and drug consumption. Using drugs alone in Malaysia is a criminal offence that is punishable by up to 2 years imprisonment, mandatory rehabilitation up to 2 years, and fines or caning (in certain cases).

In recent years, Malaysia has begun to explore decriminalising drug use and drug processing for personal use. The shift focuses on treating addiction as a health issue rather than a criminal offence. This move received political support from the Minister of Health, and the National Task Force on Decriminalisation for Use and Personal Possession has been established and chaired by the Deputy Health Minister since 2024.

DECRIMINALISATION – REASONS BEHIND THE NEED FOR REFORM OF POLICY

Since 2000, Malaysia's drug policies have resulted in substantial increases (45%) in its incarceration rate from 116 to 171 per 100,000, with a total of 51,946 persons incarcerated in 39 prisons and pre-trial detention centres nationwide (1). Drug-related offences make up over 60% of prison populations in Malaysia, significantly contributing to overcrowding and operational costs. Daily prisoner-related expenses are estimated at RM35 per prisoner, which amounts to RM12,775 annually per inmate. With approximately 40,000 prisoners, this cost exceeds RM500 million annually. Alternatives to incarceration,





such as community-based programs, parole, and decriminalisation of minor offences, cost significantly less and help to reduce the prison population, freeing resources for more serious crime and improving overall public safety. It also allows the government to invest in social welfare, education and health initiatives.

Criminalisation fosters stigma, which discourages individuals from seeking the help they need for addiction, mental health conditions, or other personal challenges. Decriminalisation addresses this issue by creating an environment where people feel more comfortable accessing healthcare services and support systems. Moreover, marginalised communities are disproportionately affected by criminal penalties, leading to the exacerbation of social and economic inequalities. By reducing systemic discrimination caused by biased enforcement of laws, decriminalisation can help level the playing field for these groups. Harsh penalties for minor offences often have lasting repercussions, such as job loss or social alienation, which can derail an individual's life. Decriminalisation ensures a fairer approach by replacing punitive measures with proportional responses, prioritising justice and rehabilitation over punishment.

Criminalising drug use often worsens public health crises, such as the spread of HIV/AIDS through unsafe practices. Although some risk behaviours decrease during incarceration, both HIV and hepatitis C virus (HCV) transmission related to unsafe drug injection continues to occur among prisoners and detainees (2), often complicated by co-infection with TB (3). Unfortunately, only a few criminal justice settings offer comprehensive prevention or treatment services in spite of international guidelines that urge wide-ranging public health measures, including the provision of methadone treatment, sterile injection equipment, and routine screening for TB.

Evidence of success has been seen in countries like Portugal that have shown that decriminalisation, combined with robust public health policies, can lead to reduced drug-related deaths, lower rates of drug use, particularly among youth, improved health outcomes, and lower prison populations.

ARE WE READY?

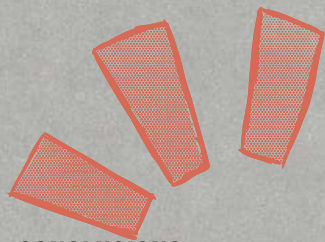
The Ministry of Health (MOH) already has a well-established framework for addiction treatment. Since 2005, the MOH has been actively involved in methadone maintenance therapy and harm reduction programs, showcasing its extensive experience in these areas. This positions the MOH to effectively expand harm reduction efforts under a decriminalisation framework.

The MOH also benefits from robust healthcare infrastructure, with a wide network of hospitals and primary care clinics. Major hospitals, through their psychiatric units and addiction psychiatry teams, provide specialised addiction treatment at secondary and tertiary care levels. At the primary care level, the establishment of One Stop Centre for Addiction (OSCA) in 72 klinik kesihatan has enhanced treatment capacity and accessibility for patients requiring addiction support.

Furthermore, the integration of MOH services with other government agencies and private rehabilitation centres strengthens its role as the leading agency in shifting the response to drug use from punitive measures to treatment-based solutions. This approach aligns seamlessly with the principles of decriminalisation and reflects the MOH's recognition of the need for progressive policy change.

As Malaysia moves forward with decriminalisation, MOH is setting a strategic plan to enhance its capacity. This includes capacity building through training programs and infrastructure development. Strengthening partnerships with other agencies will be a priority, ensuring clear roles and responsibilities for all stakeholders.

Funding allocation will focus on infrastructure improvements and research into effective interventions. Additionally, public awareness campaigns will play a critical role in educating the public and fostering greater acceptance of this approach. A comprehensive framework is currently being developed to incorporate international best practices while tailoring solutions to Malaysia's unique context.



CONCLUSIONS

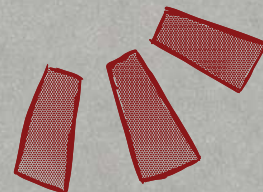
Malaysia's drug policy remains strict, with severe penalties for possession, consumption, and trafficking. However, recent reforms and discussions suggest a gradual move toward a more rehabilitative and public health-focused approach. Decriminalisation is not about endorsing harmful behaviours but about addressing them in a more compassionate, effective, and sustainable way. It balances individual rights with public safety, offering a modernised approach to governance and law enforcement. As healthcare professionals, we must be prepared to embrace the challenge and shift our perspective, treating addiction with the same approach and commitment as we do other non-communicable diseases. The question is: Are we ready?

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Participated as a team member in the National Task Force on Decriminalisation of Drug Use and Personal Possession, alongside Deputy Minister of Health, Dato Lukanisman, and the Director of the Drug Program Malaysia, Mr. Palani, during one of the task force's pivotal meetings.



Behavioural addiction: the new challenges



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Subspecialty trainees in Addiction Medicine in Primary Care



Behavioural addiction is an increasingly recognised phenomenon in the field of psychiatry, characterised by compulsive engagement in certain behaviours that lead to significant impairment or distress. Unlike traditional substance addictions, which revolve around the use of drugs or alcohol, behavioural addictions revolve around activities such as gambling, gaming, and even compulsive shopping or internet use. Patients with behavioural addiction are common in primary care practice. Initial assessment and treatment should be carried out by a primary care physician as the gatekeeper. Only complicated cases should be referred to the child psychiatrist.



Types of Behavior Addictions

Behavioural addiction is defined as repeated behaviour that causes significant harm or distress and persists over a substantial period. According to Kardeflet-Winther et al. (2017), individuals with behavioural addictions exhibit a failure to resist impulses, which can lead to harmful consequences. This concept has been formalised in psychiatric classifications, including the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) and the International Classification of Disease, Eleventh Revision (ICD-11); however, only gambling and gaming disorders are included in this classification.

The American Society of Addiction Medicine (ASAM) categorises behavioural addiction into three main groups:

1. Gambling disorder: characterised by persistent and recurrent problematic gambling behaviour.
2. Microprocessor-Based Disorder, including internet gaming, smartphone addiction, and social media overuse. (2)
3. Problematic sexual behaviour, encompassing compulsive sexual behaviour, including excessive use of pornography.

(1)

Globally, the prevalence of behavioural addiction is significant, with studies estimating a lifetime prevalence of 0.5–3% for various disorders (3). Identifying risk factors for behavioural addiction is crucial for understanding its prevalence and impact. Certain demographics are more susceptible. For instance, gambling disorder is notably prevalent among adolescents and elderly males, with research showing men are two to three times more likely than women to develop problematic gambling behaviours (4). Additionally, individuals with mental health conditions, those undergoing treatment for substance use disorders, and people with a family history of addiction are at increased risk. Other factors include childhood trauma, adverse life events, and lower socioeconomic status (8).

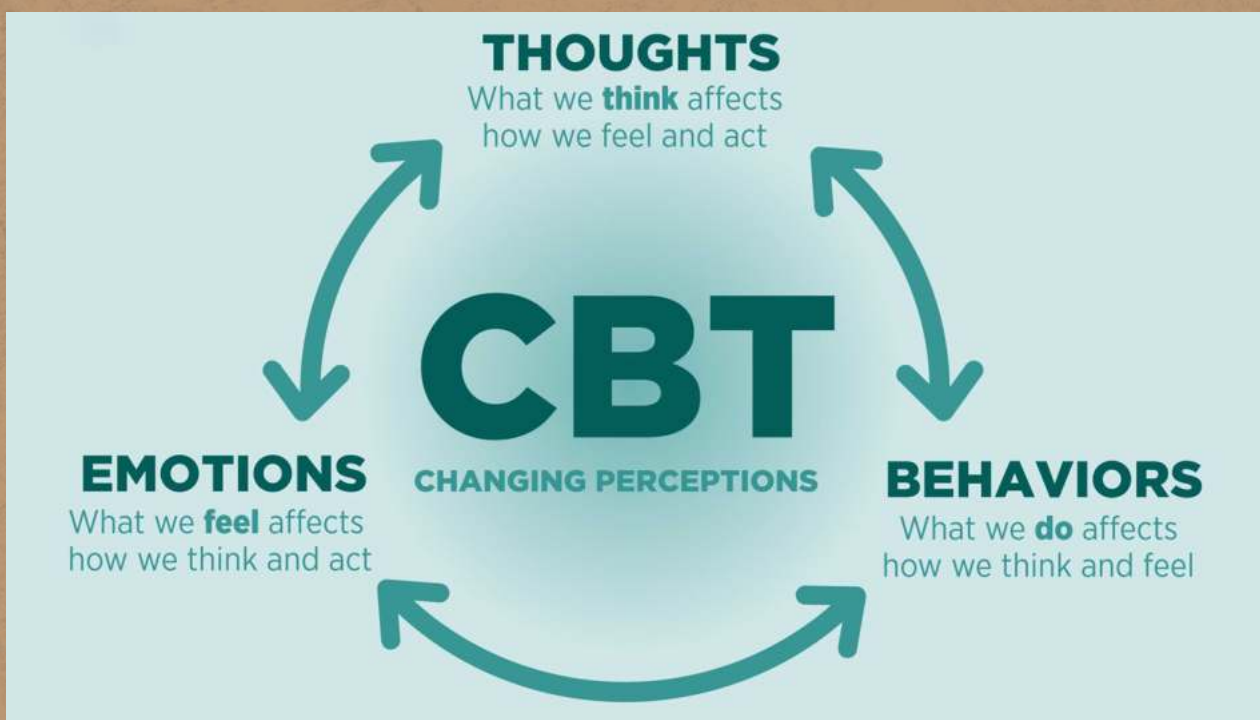
The neurobiological mechanism behind behavioural addictions shares similarities with substance use disorder. Research indicates alterations in brain circuits and structures, particularly in areas associated with impulse control, reward processing, and emotional regulation. For instance, changes in the insular cortex have been linked to the severity of disorders like Internet Gaming Disorder (5). The aetiology of behavioural addiction is best understood through a biopsychosocial model, which integrates biological, psychological, and social factors. Individual vulnerability, exposure to addictive behaviours, and environmental influences all interact to shape the risk of developing a behavioural addiction (8).

Globally, the prevalence of behavioural addiction is significant, with studies estimating a lifetime prevalence of 0.5–3% for various disorders.

Managing behavioural addiction presents a unique challenge, particularly in creating effective treatment protocols. Currently, there are limited pharmacotherapy options available, although some studies suggest that medication like Bupropion may be beneficial for certain disorders, such as gaming disorder (6).

Psychotherapy is a cornerstone of treatment, with cognitive behavioural therapy (CBT) proving effective for many individuals. CBT focuses on reshaping thought patterns and...

behaviours to help individuals manage their addictions. A structured counselling program can provide guidance on motivation to change, understanding the recovery process, handling high-risk situations, and developing coping strategies. Other therapeutic approaches, such as motivational interviewing, mindfulness, and support groups like Gamblers Anonymous, have also shown promise. However, the evidence base for these treatments is still developing, and more research is needed to establish their efficacy fully (7).



The principles of Cognitive Behavioural Therapy (CBT)

Behavioural addictions are not always recognised as legitimate disorders, leading to underdiagnosis and limited access to effective treatment. Behavioural addictions often co-occur with other mental health disorders, such as depression or anxiety, making diagnosis and treatment complex. Many individuals may feel ashamed or embarrassed to seek help due to the stigma, which can delay treatment. Additionally, the rapid evolution of technology complicates the landscape of behavioural addiction as new forms of gaming and online engagement continuously emerge. The lack of comprehensive international guidelines also presents a challenge. Treatment approaches must be tailored to accommodate cultural and social differences, particularly in diverse societies like Malaysia, where local customs and values may influence addiction behaviours and treatment receptivity. Behavioural addiction can be chronic and relapsing conditions, requiring long-term management and support to prevent relapse (7). Moreover, the variability in individual experiences with addiction complicates the development of standardised treatment protocols. Since behavioural addictions can manifest differently across populations, healthcare providers must adopt a personalised approach to treatment

In summary, behavioural addiction is a significant and growing challenge and demands urgent attention. Understanding its definition, neurobiological mechanism, and management strategies is essential for effective intervention. As the field continues to evolve, addressing stigma, enhancing research on emerging behavioural addiction, and developing culturally relevant treatment approaches will be vital in supporting individuals affected by these conditions in an increasingly digital world.



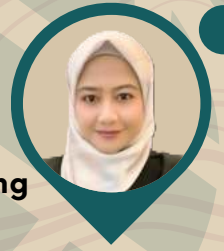
An example of an MDT case discussion activity held in KK Masjid Tanah, Melaka.

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INTERNET ADDICTION

By: Dr. Farhani Samat
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A Worldwide Dilemma and



Strategies for Mitigation

In the 21st century, the internet has evolved from a luxury to an essential utility. It has transformed communication, information distribution, education, and commerce. As reliance on the digital realm increases, a troubling issue also arises: internet addiction. This condition, characterised by excessive internet usage that disrupts daily living, has emerged as a global crisis, impacting millions of people worldwide (1).

The global increase in Internet addiction

The swift expansion of the internet has resulted in both advantageous and detrimental effects. The digital era has provided unparalleled access to knowledge, connectivity, and entertainment, but it has also led to an increase in internet addiction. The World Health Organisation (WHO) classified internet gaming disorder (IGD) as an acknowledged mental health disease, underscoring its growing global concern (2).

Countries worldwide are contending with this challenge, especially in areas with significant internet penetration and sophisticated technological infrastructure. Countries such as South Korea, China, and the United States exhibit disturbingly elevated rates of internet addiction. The situation in China has escalated to such an extent that the government has implemented stringent measures to limit excessive gaming, including imposing restrictions on the amount of hours kids can engage in online gaming (3). In Europe and North America, internet addiction is frequently associated with social media engagement, online gaming, and excessive screen exposure. The proliferation of smartphone usage and 5G internet connectivity has exacerbated this addiction issue (4).

What happens to those with internet addiction?

Individuals afflicted by internet addiction frequently encounter numerous psychological, medical, and societal repercussions. These encompass:

1. Psychological Impacts: Individuals hooked to the internet may experience increased worry, particularly when they are unable to connect online. They also may experience depressive symptoms as a result of online abuse, social comparison, or social isolation (5). Furthermore, extensive engagement in virtual environments, such as social media or online gaming, can lead to difficulties in differentiating between the digital realm and reality (6).
2. Compromised Cognitive Function: Continuous online interaction may adversely impact concentration, memory, and multitasking abilities, hindering concentration on offline work (7).

3. Physiological Effects:

- Sleep Disorders: Excessive screen time, particularly during nocturnal hours, disrupts sleep patterns and results in conditions such as insomnia and diminished sleep quality (1).
- Eye Strain and Headaches: Extended exposure to screens can induce digital eye strain, leading to headaches, dry eyes, and blurred vision (1).
- Physical Inactivity: Numerous internet addicts engage in prolonged periods of sedentary behaviour, fostering a lifestyle that may contribute to obesity, poor posture, and health issues such as cardiovascular disease (7).
- Social and Occupational Impacts:
 - Strained Relationships: Excessive internet usage can result in the neglect of familial and social connections, fostering loneliness and isolation (8).
 - Poor Academic and Work Performance: Addiction frequently leads to deteriorating academic outcomes in students or diminished productivity in adults due to the neglect of responsibilities (6).
 - Decline in Social Skills: Overindulgence in online activities, particularly with digital avatars, can diminish in-person communication abilities and emotional intelligence, making real-life social interactions increasingly challenging (5).

Strategies to Address Internet Addiction

Internet addiction is a multifaceted problem, although various ways exist to alleviate its effects. Numerous strategies, including the following, can assist individuals struggling with internet addiction:

1. Digital Detox and Time Management: A digital detox—periodically abstaining from screens and social media—can assist individuals in alleviating their reliance on the internet. This may entail designated screen-free periods, such as during meals, before bedtime, or on weekends (9). Time management applications that monitor internet behaviour can motivate users to minimise excessive screen time and cultivate healthy habits (5).
2. Promoting knowledge and education: Educational initiatives targeting children, parents, and educators can enhance knowledge of the risks associated with excessive internet usage and furnish strategies for regulating screen time. Educational institutions can integrate digital literacy and internet safety into their curricula to encourage students to use the internet responsibly (1).



A photograph captured at the 12th National Conference on Addiction Medicine 2024 (from left to right): Dr. Saravanan, Dr. Hafiz Harun, Dato' Dr. Norsiah Ali, Dr. Steven Chow (president of AMAM), Dr. Nor Hazlin Talib, Dr. Raihan, and Dr. Farhani.

3. Behavioural Therapy and Counselling: Cognitive Behavioural Therapy (CBT) has demonstrated efficacy in addressing internet addiction. Cognitive behavioural therapy assists individuals in recognising detrimental thoughts and behaviours associated with internet usage and substituting them with more beneficial practices. Counselling or therapy sessions, whether individual or group-based, can offer a supportive setting for individuals aiming to confront their addiction (1, 7).
4. Establishing Boundaries: Defining explicit boundaries about internet usage might mitigate addiction. This may entail restricting time allocated to particular websites, disabling notifications, or establishing designated hours for non-digital pursuits such as reading, exercising, or engaging with family and friends (9).
5. Promoting Offline Activities: Encouraging individuals to participate in offline hobbies, physical pursuits, or social gatherings can diminish their dependence on the internet for entertainment and social interaction (6).
6. Local communities and organisations might advocate for sports, cultural events, or volunteer initiatives to draw individuals toward tangible experiences.

How can we help them?

Medical professionals, especially in psychiatry, psychology, and primary care, are essential in the detection, diagnosis, and treatment of internet addiction. Many tools are available for screening or assessment but comprise different areas in describing internet addiction

1. Early Detection and Diagnosis:

Medical practitioners must be adept at identifying the indicators of internet addiction, especially as its symptoms may coincide with other mental health illnesses such as depression, anxiety, and attention deficit hyperactivity disorder (ADHD) (8). Doctors can perform comprehensive assessments to ascertain the severity of the addiction and identify any associated mental health disorders that require attention (7).

The suggested screening instruments are the Internet Addiction Test (5) and the Malaysian Version Internet Addiction Test (MVIAT) (10). Currently, there are no approved diagnostic criteria for Internet Addiction Disorder; many criteria have been adapted from the DSM-5 Substance Use Disorder for research purposes.

2. Treatment programs:

Upon diagnosis, physicians may provide suitable treatment programs, encompassing therapy, pharmacotherapy (for concurrent disorders such as depression or anxiety), and support groups (7). In severe cases, patients may need to undergo inpatient treatment, which involves removing them from the digital environment for detoxification and intensive rehabilitation (1).

3. Collaborating with Families and Communities:

Physicians can partner with families and communities to offer assistance to persons grappling with internet addiction. Family therapy, education, and support groups for relatives can facilitate the establishment of a supportive network for the patient (7).

4. Legislative Advocacy: Healthcare professionals, especially physicians, can advocate for legislative reforms that regulate internet usage, particularly in relation to children and adolescents (2).

In conclusion, internet addiction is an escalating global concern that necessitates immediate attention from all sectors of society, including individuals, families, educators, healthcare professionals, and governmental bodies. Although the internet provides significant advantages, it is crucial to acknowledge and mitigate its possible detriments. A comprehensive strategy—integrating self-regulation, professional intervention, and policy-level measures—is essential to alleviate the detrimental impacts of internet addiction.



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Kratom Addiction

- the Northern and East Coast Scourge


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The *Mitragyna speciosa* tree produces a herbal substance known as ketum from its leaves. The tree is considered native in Southeast Asia, mainly in Thailand, Malaysia, Indonesia, Myanmar, and Vietnam. In Malaysia, even though kratom can be easily grown in any part of the country, it is widely available in the northern and east coast regions. Experts are grappling with the implications of kratom usage in Malaysia. In these areas, kratom is usually chewed, brewed into tea, or made into paste. Certain parts of Northern Malaysia incorporate kratom into social and cultural practices, including communal gatherings and traditional healing rituals.

Kratom's legal status varies significantly across different countries. The Poison Act 1952 in Malaysia has banned kratom. This act lists mitragynine, an alkaloid in kratom leaves, as a psychotropic substance. The law includes who sells, possesses, manufactures, stores, transports, and consumes kratom. In Section 30 of the Poison Act (Amendment 2003), a kratom user is punishable with a maximum jail sentence of four years or fines not more than RM 10,000 or both (5). However, even with the legal implication, people are still abusing kratom. In Thailand, kratom has undergone significant legal changes. In 2021, the Thailand Narcotic Act (no. 8) B.E. 2564 removed kratom from the list of prohibited substances.

Kratom has been used traditionally as an herbal medicine to treat mild ailments like fever and tiredness (1). Mitragynine is the primary active alkaloid that has psychoactive properties in kratom leaves. It gives the significant medicinal benefits of the kratom, such as stimulating work, analgesics, and relaxing effects. People also use kratom for other purposes, like pain relief and energy-boosting effects, as well as to ease opioid withdrawal symptoms. Some people abuse kratom for recreational use (2). Recently, kratom has gained popularity and recognition in the West as a natural alternative for certain conditions, such as chronic pain and a remedy for opioid withdrawals, or as a natural stimulant (3). Various preparations, including capsules, powders, and energy drinks, are commonly available for purchase. The safety and effectiveness of kratom are still under debate.



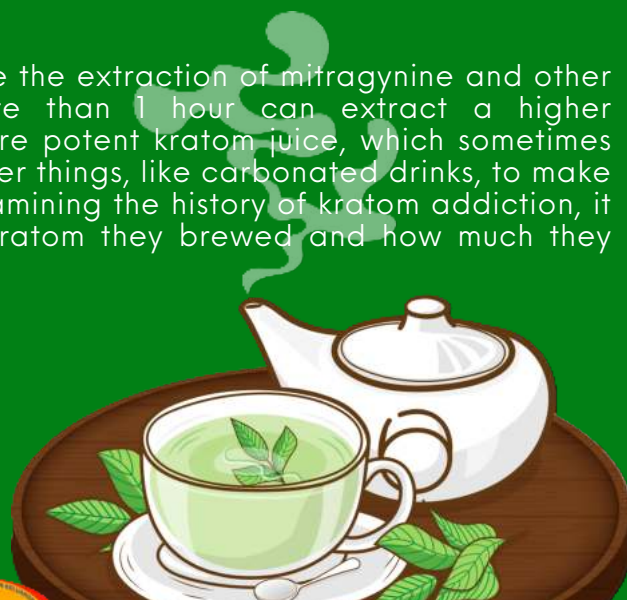
Kratom has different effects depending on the dosage and individual response. At low doses (1–5 grams), it acts as a stimulant, and users report being more awake and focused. At higher doses (5–15 grams), kratom can produce effects similar to opioids, such as pain relief, relaxation, and sedation (5). As a rough estimation of dried kratom to the number of dried leaves, on average, a single fresh kratom leaf weighs about 1.5 to 2 grams. When dried, the weight reduces significantly due to loss of moisture and might weigh around 0.3 to 0.5 grams. Thus, 1 gram of dried kratom leaves would be approximately 2 to 3 fresh leaves, and 5 grams of dried kratom leaves would be approximately 10 to 15 fresh leaves (5). Traditionally, people boil about 2–3 leaves in a pot to give a stimulant effect. However, the number of kratom leaves used is higher when people abuse them for recreational purposes.

The prolonged use of kratom can lead to addiction. Youth, particularly in the northern part of Malaysia, suffer the most, as kratom grows naturally in this region. One study done by Samihah and his team in 2018 (6) found that kratom users in Malaysia usually associate it with other drug abuse, like opiate replacement or as a social drink. There are many factors affecting mitragynine release from the kratom leaves.

The chemical composition of kratom leaves, including the levels of active alkaloids like mitragynine, can vary based on the region where the plant is grown. Several factors, such as different chemotypes, climates, environmental pressures, and soil types, could contribute to the variation. A study conducted in 2021 found that the mitragynine content of kratom in Malaysia ranges from 6.53% to 7.19%, while in Thailand, it is 66%. Other factors that may contribute to the different mitragynine contents are climate, soil composition, cultivation practices, and genetic variation. Tropical climates with high humidity and rainfall can lead to higher alkaloid content in kratom leaves. Apart from geographical reasons, heat, age of the leaves, and processing methods also influence the mitragynine effects. The young, until fully expanded leaves (day 7 up to day 45), have the most peaked mitragynine content before declining in older leaves (5).

In Malaysia, people typically prepare kratom as a drink (also known as juice or tea) by boiling the leaves. The process of preparing the kratom juice is simple. People buy kratom leaves from cultivators or get them fresh from the trees. They will place the leaves into a pot filled with boiling water. The quantity of the leaves would depend on how strong they wanted the juice to be. After that, the heat is reduced, and the kratom is left to brew at a low temperature for a maximum of 4 hours. It needs to be stirred every half hour to prevent it from burning. The juice will have a strong odour if it is brewed properly. After it has cooled, the juice will be packed into small plastic bags or bottles if it is meant to be sold (10). Different states in Malaysia have different sizes of plastic bags or bottles that people use for packaging. The price will depend on the amount of kratom juice. You can chill the packet with ice or store it in the refrigerator, ensuring it lasts for about 3 days. Because of the short expiry period of the juice, some of the people who drink kratom juice will usually be reluctant to travel far from their homes.

The duration of brewing kratom can influence the extraction of mitragynine and other alkaloids. A longer brewing time of more than 1 hour can extract a higher concentration of mitragynine, leading to more potent kratom juice, which sometimes results in a bitter taste. Some people add other things, like carbonated drinks, to make them sweeter and more palatable. When examining the history of kratom addiction, it is crucial to enquire about the amount of kratom they brewed and how much they used.



When using kratom at high doses and for extended periods, there is always a risk of addiction. Users should always be aware of the various signs and symptoms of addiction. Addiction to kratom can impact an individual's physical, psychological, and social aspects of life. Some of the common signs to watch for are those physical symptoms, like an increase in tolerance, where the user needs larger doses of kratom to achieve the same effects. Another sign of addiction is when someone who is taking kratom starts to develop withdrawal symptoms when they are trying to stop or reduce the amount of kratom taken. The withdrawal symptoms can be general, like anxiety, nausea, insomnia, and irritability. The kratom withdrawal can mimic opioid withdrawal symptoms, such as muscle pain, diarrhea, or gastrointestinal symptoms. Psychological symptoms that can occur with addiction are when the user starts to have cravings, mood swings, and cognitive impairment. Addiction is prominent when it starts to affect social life with family, friends, and the workplace. When someone becomes addicted to kratom, the management would be similar to managing other psychoactive substance addictions. For those kratom users who are not addicted yet, they should be reminded of the addiction potential of kratom and advised to get proper management from trained professionals.



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One Stop Centre for Addiction (OSCA)

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Justification

The One Stop Centre for Addiction (OSCA) is a comprehensive facility providing treatment and support for individuals experiencing addiction in Malaysia. Addiction issues, encompassing drugs, alcohol, other prohibited substances, and behavioural dependencies, pose significant challenges to individuals, families, and society. Beyond health and safety problems, addiction disrupts social and economic stability. The OSCA was established with the goal of addressing these issues using a holistic approach integrating medical, psychological, and social support to help individuals recover.

Addiction is considered a chronic disease requiring ongoing treatment, social support, and lifestyle changes.

Addiction is considered a chronic disease requiring ongoing treatment, social support, and lifestyle changes. The growing concern over addiction, especially among the youth—the cornerstone of the nation's future development—underpins OSCA's establishment. The aim is to offer tailored treatments that enable individuals to recover and reintegrate into society as contributing members.

Medical practitioners in Malaysia have long treated patients with substance dependency. Since 2005, the Ministry of Health Malaysia has indirectly been involved in treating heroin addiction through methadone therapy to curb the spread of the Human Immunodeficiency Virus (HIV). This intervention has proven effective in aiding recovery. However, the rising trend of synthetic drug use, such as methamphetamine, and other substance dependencies present significant challenges to patient stability.

To address this, methadone treatment services have expanded to also cover dependencies on nicotine, alcohol, all prohibited substances, and behavioural addictions, including gambling, internet gaming, and pornography.

Establishment

The establishment of OSCA began in 2014, with its proposal presented at the National Anti-Drug Committee meeting chaired by the then Minister of Home Affairs and Deputy Prime Minister on October 25, 2016, which approved the initiative.

Several workshops and stakeholder engagement sessions were conducted to prepare for OSCA's implementation. The first OSCA was launched as a pilot project on March 1, 2018, at the Masjid Tanah Health Clinic in Melaka, followed by others at Batu Sembilan Health Clinic in Cheras in April 2018, Butterworth Health Clinic, and Besut Health Clinic in May 2018.



The first OSCA in Malaysia- Masjid Tanah Health Clinic

National-level training was first conducted from May 13–15, 2018, at the Sultan Azlan Shah Allied Health Sciences College in Ulu Kinta, Perak. By the same year, OSCA was established at Menggatal Health Clinic, Sabah, in July 2018, and Tudan Health Clinic, Miri, Sarawak, in August 2018. By November 2024, there were 74 OSCAs in Malaysia.



First National Level Training on OSCA conducted in Ipoh



Training on OSCA in Menggatal Health Clinic, Sabah

Objectives

The primary aim of OSCA is to integrate medical treatment with psychological and social support to ensure complete recovery for individuals experiencing addiction. Key objectives include:

- **Providing Holistic Treatment:** OSCA offers integrated treatments including medical care, counselling, and social support tailored to individuals, ensuring effective recovery.
- **Reducing Social Stigma:** OSCA runs community programs to lessen stigma for those recovering, aiding their reintegration into society with a patient-friendly approach.
- **Ensuring Continuous Support Post-Recovery:** OSCA provides ongoing support through skill training, counselling, and job coaching to help individuals maintain progress and prevent relapse.
- **Reducing Financial Burden:** By offering consolidated services, OSCA aims to lower treatment costs.
- **Providing Integrated Treatment Packages:** OSCA simplifies access to comprehensive care, improving treatment adherence.

Programs and Approaches

OSCA offers a range of comprehensive treatment programs addressing addiction holistically:

1. **Medical Treatment:**
 - Providing medications to reduce withdrawal symptoms and cravings.
 - Managing other detected illnesses.
2. **Psychological Counselling:**
 - Individual and group counselling to identify and address the psychological roots of addiction.
 - Cognitive Behavioural Therapy (CBT) to modify negative thoughts.
3. **Social and Economic Rehabilitation:**
 - Skill training and job coaching to facilitate long-term recovery and societal reintegration.
4. **Spiritual:**
 - Spiritual guidance and moral support in collaboration with religious departments to aid emotional and mental resilience.
5. **Prevention Programs:**
 - Community seminars, campaigns, and educational efforts to prevent addiction, especially among youth.

Challenges and the Future

While OSCA has positively impacted addiction recovery, several challenges persist:

- Funding constraints: Adequate financial support is essential for sustaining and expanding OSCAs.
- Workforce shortages: More counsellors, doctors, and psychologists are needed to meet increasing demands for comprehensive services.
- Reducing stigma: Awareness among healthcare providers and the public is crucial for expanding treatment accessibility.



Case Discussion among OSCA team

Moving forward, ongoing training, research collaborations with universities, and alignment with Malaysia's goals to decriminalise drug use will enhance OSCA's role as a model of humane and effective addiction care.

OSCA is a critical initiative in Malaysia's strategy to combat addiction in primary care settings. Its holistic, community-based approach empowers individuals to recover and reintegrate with dignity. Sustained investment, innovative research, and community engagement will ensure OSCA's continued success in building a healthier society.



OSCA as training centre for sub-specialization program in Addiction Medicine in Primary Care, Mental Health in Primary care, & Addiction Psychiatry with primary care providers from other clinics

OSCA Activities in Sabah

By: Dr. Siti Nor Aishah bt Abdul Rahim,
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Launched in 2018, the One Stop Centre for Addiction (OSCA) in Sabah has been a transformative force in the fight against addiction. Klinik Kesihatan Menggatal was selected as one of the six health clinics nationwide to pioneer this crucial initiative. This program was aimed at tackling substance abuse and dependency, with a primary focus on offering essential screening, intervention, and treatment services to individuals at the primary care level. As for now, our efforts extend far beyond treatment. We've hosted numerous health camps, outreach programs, and awareness campaigns aimed at educating communities and vulnerable groups about the dangers of smoking, alcohol, and illicit substances. We're not just identifying at-risk individuals but actively intervening with counselling and support, ensuring that potential problems are addressed before they spiral out of control. Our mission is to create healthier, more informed communities, and we are committed to making a lasting difference in the lives of those who need it most.

TOWARDS A HEALTHY, DRUG-FREE YOUTH

In addition to our regular clinic services, our dedicated team, headed by the Family Medicine Specialist (FMS), is passionate about making a difference through dynamic outreach programs and health camps. These initiatives are designed to engage and empower communities by raising awareness about the serious dangers of smoking, alcohol, and illicit drug use. We're not just providing information; we're sparking conversations, changing attitudes, and helping people take proactive steps toward healthier, addiction-free lives. Starting from mid-2023, our clinic extended its efforts to reach out to students at local higher learning institutions in the Menggatal area. This project aims to tackle the issue of substance addiction among the youth focusing on prevention, early screening, and swift intervention. Understanding that addictive behaviours in youth are often fuelled by the "feel-good" rush of neurochemicals like dopamine, we emphasised the importance of intervening at a young age to break the cycle of addiction and offer rehabilitative support.



OSCA team from Klinik Kesihatan Menggatal has been successful conducting a program with Students from City University Malaysia (Sabah Campus) on 14/08/2024. It involved health talks, screening and a Kahoot quiz.



A Joint program in between OSCA team, Sabah AIDS support services Association (KASIH) Sabah as well as HIV/STI/Hep C (HISTep) team from JKN Sabah during Health Promotion Program on 16/10/2024. It was conducted at Politeknik Kota Kinabalu. Our OSCA team had the opportunity to deliver a talk titled "Dadah Musuh Senyap, realiti membinasakan" and conducted ASSIST and AUDIT-10 screening.

Partnering with institutions like Universiti Teknologi Mara (UiTM) Sabah, Politeknik Kota Kinabalu, and City University Malaysia (Sabah branch), our team has been successful in reaching students with substance use screenings, educational talks, and interactive booths. These events highlighted the risks associated with substance use, featuring visual materials and discussions on different types of addictive drugs and alcoholic beverages. We were very fortunate as we received relentless support from one of the non-government organisations (NGO), which was the Sabah AIDS Support Services Association, KASIH Sabah, as well as the HIV/STI/Hep C (HISTep) team from JKN Sabah. The positive response from participants has been so overwhelming, with all events achieving remarkable turnout and engagement. At least 100-200 students participated during each of the events, and some of them were given appointment dates in the clinic for further intervention. In total, 18 of them required brief intervention (BI) during our program with students at Politeknik Kota Kinabalu. The majority were involved in nicotine addiction. Meanwhile, screening results at City University Malaysia revealed about 12 students had ever consumed alcohol for the past 3 months. Fortunately, all of them were reported as safe drinking. We took the opportunity to educate and bring awareness to this group on the dangers of all substances towards their body, mental health, and social wellbeing.

Looking ahead, Klinik Kesihatan Menggatal is committed to expanding its outreach efforts, reaching more educational institutions, and ultimately achieving its goal of keeping youth away from the destructive grip of drugs and addiction. With a dedicated team and a clear mission, this effort may create a lasting impact on the health and well-being of the community. Indirectly, all these programs pave the way to success, especially for the OSCA program in our local setting.

ALCOHOL SCREENING AND AWARENESS PROGRAM AMONG SABAH RURAL COMMUNITIES

Alcohol is regarded as part of the culture of certain indigenous groups in Sabah. Commonly used alcohols are beer and local distilled beverages such as air tapai, montoku, and bahar (or baa). To tackle the growing issue of alcohol addiction, a variety of strategies were explored, with one key approach being the empowerment of communities to prevent harmful alcohol consumption. One such initiative was through the alcohol screening and harm reduction program, which has been rolled out at the community level across the state of Sabah. This program was run at selected localities, specifically targeting regions with elevated alcohol consumption rates or those facing a heightened risk of methanol poisoning.

The urgency of this community program was triggered by alarming findings from the 2022 National Health and Morbidity Survey. In Sabah, 22.2% of adolescents have consumed alcohol at some point, with males being the most affected. Even more concerning, 61.6% of alcoholics began drinking before the age of 14. This early onset highlights the critical need for intervention and education, especially at the community level. By raising awareness about the dangers of excessive drinking, these programs aim to curb future addiction and harm.

Raising awareness early is crucial to create a lasting impact. Teenagers alone cannot fully understand the risks; families, carers, and entire communities must collaborate to establish a culture of responsible drinking. The responsibility to educate and protect the younger generation from the dangers of alcohol should be a collective one, starting in schools and continuing through all levels of society. Only through such collaborations can we hope to reduce alcohol-related harm and build a healthier, more informed community for the future.



Health talk during the alcohol screening and intervention program in Kg Kironggu Inanam on 18/8/2024.



Exhibition on safe alcohol consumption based on standard drink guidelines in Kg Tombongon, Menggatal on 1/10/2023.

Holistic Healing: Strengthening Bonds, Transforming Lives

A Transformative Community Programme in Tanjung Karang

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Family Medicine trainees from the Malaysia-Ireland Training Programme for Family Medicine (MInTFM) and Klinik Kesihatan Tanjung Karang successfully organized a meaningful community outreach program, **“Program Harapan Baharu, Sihat Bersama.”** This initiative, held at AADK Kuala Selangor, was made possible through the collaboration of Pejabat Kesihatan Daerah (PKD) Kuala Selangor and Agensi Anti-Dadah Kebangsaan (AADK) Kuala Selangor.



The program aimed to empower and support individuals undergoing rehabilitation treatment through a holistic approach, integrating medical care, emotional support, and community engagement. Additionally, it sought to strengthen the bond between staff and participants, fostering a supportive and understanding environment for their recovery journey.

This impactful initiative brought together approximately 100 participants, including methadone patients from Klinik Kesihatan Tanjung Karang, Klinik Kesihatan Jeram, and Klinik Kesihatan Bestari Jaya, as well as clients undergoing rehabilitation treatment from AADK Kuala Selangor and Rumah Penawar Alam Jaya. The collective effort aimed to uplift, inspire, and empower individuals as they work towards a healthier life.



A DAY OF LEARNING, HEALING, AND SUPPORT

The event kicked off with a lively “Senaman Gerak Ceria” warm-up session, bringing participants together for a fun and refreshing start to the day. Simultaneously, methadone dispensing and comprehensive health screenings were carried out, ensuring seamless access to essential medical services.

Among the health screenings provided were NHI screening, tuberculosis (TB) screening, HIV screening, and hepatitis C screening. Additionally, a mobile X-ray bus was available on-site, offering chest X-ray services for selected participants as part of TB screening programme.

The event proceeded with an opening speech by Dr. Farhani, Head of Klinik Kesihatan Tg Karang, setting a welcoming and inspiring tone for the day. This was followed by a speech from En. Mohd Ghazali, Deputy Director AADK Negeri Selangor who emphasized the importance of community support in the recovery journey. The ceremony then culminated with the official opening speech and officiation by Dr. Faridah Binti Amin, Public Health Specialist PKD Kuala Selangor who highlighted the significance of holistic care and the collaborative efforts behind this meaningful initiative. Adding a touch of inspiration, the event featured a remarkable saxophone performance by a former AADK client who had successfully overcome addiction. The soulful performance captivated the audience, serving as a powerful testament to resilience, transformation, and hope.



ENGAGING ACTIVITIES TO FOSTER GROWTH

The program featured a series of structured activities designed to instill motivation, confidence, and a sense of belonging among participants.

The first activity, "Tautan Semangat" (Strength in Unity), led by Pn Rosmaryani, Deputy Officer AADK Kuala Selangor, was a team-building exercise aimed at reinforcing trust and collaboration among participants and staffs. Through engaging group challenges, attendees were encouraged to work together, demonstrating the power of peer support in overcoming adversity.

Following this, the "Santai Seni" (Art Therapy) session, conducted by Cik Noor Syahirah, Psychologist Kuala Selangor, allowed participants to express their thoughts and emotions through creative mediums such as painting and drawing. This therapeutic session provided a healthy outlet for self-expression and helped cultivate positive coping mechanisms essential for long-term recovery.

Another key session, "Cerita Kita, Harapan Baharu" (Our Story, A New Hope), featured Bro Suzaidy Bin Sulaiman, a motivational speaker who shared inspiring real-life stories of recovery. His talk encouraged participants to embrace change, set personal goals, and believe in their ability to overcome addiction and reclaim their lives.



RECOGNITION, CELEBRATION, AND CLOSING MOMENTS

To acknowledge the dedication and progress of participants, certificates and tokens of appreciation were awarded to exemplary individuals who demonstrated resilience and commitment to their recovery journey. Adding an element of fun and excitement, a lucky draw session brought smiles and cheers, reinforcing the message that every small milestone in the recovery journey deserves recognition and celebration. The day ended on a warm note with a group photography session, capturing moments of camaraderie, encouragement, and newfound hope.




REFLECTIONS AND MOVING FORWARD

As the event came to a close, it was evident that Program “Harapan Baharu, Sihat Bersama” had achieved its goal of instilling hope, fostering resilience, and promoting holistic well-being. Participants left not only with medical support but also with a renewed sense of purpose, self-confidence, and a stronger support network. This initiative strengthened the connection between healthcare providers and the community, reinforcing the belief that successful rehabilitation requires collective effort and support. Through programs like these, the Family Medicine Specialists continue to play a pivotal role in promoting holistic, community-centered healthcare, extending beyond clinical treatment to address the emotional, social, and psychological aspects of recovery. A heartfelt appreciation goes out to all organizers, facilitators, and participants who contributed to making this program a resounding success. Together, we move forward in creating a healthier, more supportive society one step at a time.



Empowering Future Family Medicine Specialists

THE JOURNEY OF A QUIT-SMOKING CLINIC AS A TRAINING CENTRE



In the realm of family medicine, addressing lifestyle-related health risks like smoking is paramount. As a certified center accredited by the Kelantan State Health Department, MOH, for MQuit Services, the Quit Smoking Clinic at Hospital Pakar Universiti Sains Malaysia (HPUSM) has taken significant steps to integrate quit-smoking initiatives into its core curriculum. We spoke with Dr. Nur Suhaila Binti Idris, a Family Medicine Specialist/Lecturer at USM and the Coordinator of the Quit Smoking Clinic (QSC) at HPUSM, to explore the program's achievements, challenges, and future aspirations. The QSC at HPUSM offers hands-on training not only to undergraduate students during their Family Medicine postings but also to postgraduate students pursuing the MMed in Family Medicine. Additionally, MMed Psychiatry students participate as part of their Addiction posting, while Family Medicine subspecialty trainees in Addiction receive specialised training in managing nicotine addiction and implementing smoking prevention programs.

Dr Zainab: Could you describe the core goals and vision of your quit-smoking program as a part of the centre for training future family medicine specialists?

Dr Nur Suhaila: Our ultimate goal is not only to equip future family medicine specialists with the skills and confidence to guide patients through the journey of quitting smoking including vaping but also the preventive activities in order to aid future smoke-free generations. This not only improves individual health outcomes but also contributes to reducing the prevalence of smoking-related diseases in our communities.

Dr Zainab: What inspired the integration of quit-smoking initiatives into the training for family medicine specialists?

Dr Nur Suhaila: The high prevalence of smoking including vaping in our region, coupled with its devastating health consequences, motivated us. Family medicine specialists often serve as the first point of contact in healthcare. Integrating quit-smoking interventions and preventive activities into their training ensures a widespread impact.

Dr Zainab: How do you tailor your approach to quitting smoking for patients with different backgrounds and health conditions?

Dr Nur Suhaila: We emphasise personalised care. Trainees learn to assess patients holistically considering factors like socioeconomic status, cultural beliefs, and coexisting health conditions. This approach allows for tailored interventions, whether behavioral counseling, pharmacotherapy, or a combination of both.

Dr Zainab: What challenges do trainees face when counseling patients to quit smoking, and how does the program prepare them to overcome these challenges?

Dr Nur Suhaila: One major challenge is patient resistance. Many patients are ambivalent about quitting. Through simulated counselling sessions and real-world practice under supervision, trainees develop motivational interviewing skills and learn to handle objections effectively.

Dr Zainab: Could you share any success stories from the program where patients successfully quit smoking, and how those experiences have impacted the trainees?

Dr Nur Suhaila: We had a case involving a young unmarried man who was a chronic smoker and had suffered a cerebrovascular accident (CVA). Another case involved a young medical staff member who, despite being a chronic smoker with significant nicotine addiction, had switched to vaping. Both individuals, after multiple failed attempts to quit, eventually succeeded in quitting smoking and vaping with support from our QSC. Witnessing their health improvements was a transformative experience for our trainees, highlighting the importance of persistence and empathy in patient care.

At QSC HPUSM, we celebrate the success of individuals who quit smoking by organising a special event—a 'Certificate Giving Ceremony,' typically held during World No Tobacco Day celebrations. This not only honors their achievements but also inspires and motivates other smokers to begin their own journey toward quitting.

Dr Zainab: Can you share what are the other programs/activities at QSC that aid in the effectiveness of your quit-smoking initiatives?

Dr Nur Suhaila: To enhance the effectiveness of our quit-smoking initiatives, we conduct several programs and activities. We organise a Motivational Interview for Quit Smoking Course as part of the postgraduate Family Medicine Consolidation Course. In collaboration with the Malaysian Academy of Pharmacy and Malaysian Pharmaceutical Society, we also host the Certified Smoking Cessation Service Provider (CSCSP) Workshop. Additionally, individuals who have successfully quit smoking volunteer to share their experiences through motivational videos, inspiring and encouraging others to begin their journey toward quitting.

Our efforts also extend to preventive activities, particularly targeting smoking and vaping prevention among adolescents. For instance, we run a smoking/vaping prevention module with undergraduate medical students under the Adolescent-to-Adolescent Training, Nurturing, Enhancing, and Promoting Adolescent Healthy Habits (ATAP-NEPAH) Programme. Through a partnership with the Kelantan state Education Office, trained medical students mentor school students to become peer educators. This program is sustained across generations of students as the trained peer educators continue the cycle with subsequent batches.



QSC HPUSM also actively involves in community engagement activities promoting free smoking and vaping environment.

Additionally, we actively participate in community outreach, such as promoting QSC through educational booths at community events. Collaboration remains key to our success. For example, the QSC HPUSM team collaborates with the Kelantan State Government's Inisiatif Kelantan Bebas Asap Rokok (IKBAR), providing trainers at QSC HPUSM with hands-on experience in such initiatives. Lastly, QSC HPUSM also contributes to research on smoking and nicotine addiction and partners with various departments and agencies to advance knowledge and effectiveness in smoking cessation strategies.

Dr Zainab: How do you incorporate evidence-based practices and the latest research into the training for family medicine specialists?

Dr Nur Suhaila: We regularly update our trainer based on the latest guidelines and research. Trainees are encouraged to critically appraise studies and apply evidence-based methods, ensuring they are well-prepared for current and future challenges in smoking cessation especially with the new current trend of e-cigarette smoking.

Dr Zainab: What feedback have you received from trainees regarding the impact of this program on their professional growth and clinical skills?

Dr Nur Suhaila: The feedback has been overwhelmingly positive. Trainees report feeling more confident in addressing smoking cessation with their patients. They value the hands-on experience and real-life applicability of the skills they gain. The training sessions also foster knowledge exchange. For example, MMed Psychiatry students often share their specialised counselling techniques for addiction, enriching the learning experience for everyone involved. This collaborative approach not only enhances their clinical skills but also broadens their perspectives on managing smoking and nicotine addiction.

Dr Zainab: How do you measure the success and long-term impact of your quit-smoking interventions on both patients and the specialists-in-training?

Dr Nur Suhaila: We measure success by tracking patient quit rates and monitoring their progress over time. For specialists-in-training, we evaluate their counselling skills and knowledge through structured assessments and feedback from patients. Both qualitative and quantitative metrics are used to continually refine and enhance the program's effectiveness.

Dr Nur Suhaila with Master in Psychiatry and Master in Family Medicine trainees.



Dr Zainab: Looking ahead, what are your aspirations for enhancing the quit-smoking program as a key component of family medicine training?

Dr Nur Suhaila: We aspire to expand our reach by integrating more digital tools, such as telehealth counselling and mobile apps and a special mobile QSC for outreach community programme. Additionally, we hope to conduct research to evaluate the effectiveness of these methods and share our findings to contribute to the advancement of smoking cessation strategies in family medicine.

CONCLUSION

The quit-smoking training program stands as a beacon of hope in the fight against tobacco use/nicotine addiction. By combining evidence-based practices, personalised patient care, and community outreach, QSC equips future specialists with the skills and confidence to address smoking and vaping addiction effectively. By shaping the next generation of family medicine specialists, it addresses a critical public health challenge while instilling a lifelong commitment to preventive care. Through interdisciplinary collaboration, preventive initiatives like adolescent peer education, QSC not only enhances patient outcomes but also fosters professional growth in its trainees. With a commitment to research and continuous improvement, QSC is driving the vision of a healthier, smoke-free future.



The dedicated members of QSC HPUSM



FMS subspecialty addiction attachment in QSC HPUSM during the COVID-19 pandemic.

26th FAMILY MEDICINE SCIENTIFIC CONFERENCE 2024 JOHOR DARUL TAKZIM 24

By: Dr. Nor Adlina binti Jamonek@Jamhuri and Dr. Padma a/p Palaniappan

The 26th FMSC 2024 was held successfully from 4th till 7th September 2024 at PERSADA Johor International Convention Centre.

This annual event was organized by FMSA and FMS Johor Darul Takzim (FMS JDT), in collaboration with Jabatan Kesihatan Negeri Johor, Johor Tourism, Newcastle University Medicine Malaysia (NUMed Malaysia) and Monash University Malaysia.

The theme for 26th FMSC 2024, **'Embracing the Challenges of Change, Road to Champion'** was chosen to highlight the day to day challenges faced by our Family Medicine Specialists. We are pleased to share with you some of the events highlights during the pre-conference and conference.



Exciting performances and activities during the opening ceremony



Plenary 1 as an introduction to the FMSC theme was well delivered by Dr Rohayah Abdullah, Deputy Head of Profession Of Family Medicine Specialist



Keynote Address by the DG Dr Muhammad Radzi bin Abu Hassan, "Health White Paper: Malaysia's Path to Primary Health Care System Reform."



More than 1000 delegates from all over Malaysia attended this prestigious event.



The ladies wore blue and red sutera batik, representing Johor's official colors and reflecting regional unity and pride.



Pre-conference workshop 1: Motivational interview made easy: Helping people to change



Pre-conference workshop 2: Connecting the For men's sexual health



Pre-conference workshop 3: Skin symphony: A dermatology discovery

SUBSPECIALTY CONFERMENT 2018-2020

For the first time during the FMSC opening ceremony, FMSA officially awarded Family Medicine Specialists who have completed subspecialty training under the Federal Training Award (HLP) program. This time, the award was presented to specialists who completed their subspecialties between 2018 to 2020:



1. Dr Wong Ping Foo: Non-Communicable Disease in Primary Care (2018)
2. Dr Nor Haslinda binti Ishak: Geriatrics in Primary Care (2019)
3. Dr Teoh See Wie: Palliative Medicine in Primary Care (2019)
4. Dr Naemah binti Sharifuddin: Sexual and Reproductive Health in Primary Care (2019)
5. Dr Chang Li Cheng: Non-Communicable Disease in Primary Care (2019)
6. Dr Ranjini a/p Ambigapathy: Child Health in Primary Care (2020)
7. Dr Zahrni binti Muda: Child Health in Primary Care (2020)
8. Dr Nik Suhaila binti Zakaria: Adolescent Health in Primary Care (2020)
9. Dr Nagammai Thiagarajan: Geriatrics in Primary Care (2020)
10. Dr Noor Harzana binti Harrun: Geriatrics in Primary Care (2020)
11. Dr Nurainul Hana binti Shamsuddin: Adolescent Health in Primary Care (2020)
12. Dr Nor Hazlin binti Talib: Addiction Medicine in Primary Care (2020)

Congratulations!!



Many symposiums were organized, allowing delegates to engage attentively



The Minister of Health conducted a visit to the booths, which were accessible to all delegates.



The gala dinner was held under the theme of modern elegance, where awards for best-dressed individuals were presented.



Delegates from various states within the FMSC had commemorative photographs taken to serve as keepsakes.



Networking challenging during FMSC 2024 from day 1 to day 3



The Closing Ceremony. See you again in 2025!



The 26th FMSC 2024 committee from FMS JDT

HIGHLIGHTED STATE ACTIVITIES



JOHOR



KEDAH



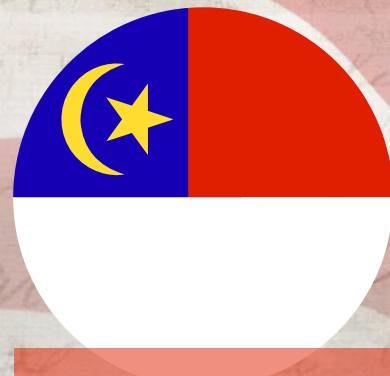
SARAWAK



PERLIS



TERENGGANU



MELAKA

FMS Technical Meetings

For the year 2024, FMS JDT had three technical meetings to date. The first meeting was held on 16th May 2024 at Klinik Kesihatan Sultan Ismail, the second meeting was held on 13-14th July 2024, and the third on 5th December 2024 via virtual means. The meetings were chaired by Dr. Rohayah binti Abdullah.



Welcoming Speech by Dr Rohayah binti Abdullah



Best practice sharing: Alternative Birthing Centre, KK Endau, Mersing



Best practice sharing: Klinik Warga Emas, KD Puteri Menangis, Pontian



Handing over FMSA Newsletter to Johor FMS Team



Various activities held during the technical meeting.

Introduction session from FMS of each district during the second technical meeting



FMS from Muar district



FMS from Kluang district



FMS from Batu Pahat district



FMS from Kota Tinggi district



FMS from Johor Bahru district



FMS from Kulai district



FMS from Mersing district



FMS from Tangkak district



FMS from Segamat district

Farewell Event for Dr. Jaidon Bin Romli

A farewell high-tea event was held on the 18th of April 2024 at GBW Hotel, Johor Bahru, to honor the retirement of Dr. Jaidon bin Romli, a Consultant Family Medicine Specialist (Jusa C) at Tampoi Health Clinic, Johor Bahru. Dr. Jaidon served the Ministry of Health from 1992 to 2024, leaving behind a remarkable legacy. Among his notable contributions, he participated in earthquake humanitarian aid under MERCY Malaysia in 2004 in Bam, Iran, and was the first Family Medicine Specialist appointed to the Johor Royal Medical Team (JRMT). Additionally, he served as an advisor for Kelab Warga Emas at Tampoi Health Clinic and was the Yang Dipertua (YDP) of Kelab Kebajikan dan Sukan, PKD Johor Bahru. We wish Dr. Jaidon a retirement filled with joyous moments and new adventures!



Dr Jaidon with Dr Hj Mohtar bin Pungut, Johor State Director of Health



Dr Jaidon with FMS from the state of Johor Darul Takzim



The Beginning of 2024: A Year of Reflection and Progress

The start of 2024 brought with it a wave of sadness as we bade farewell to a truly valuable and beloved gem. Dr. Abdul Jalil bin Ahmad, after decades of devoted service, retired and left us. His departure left a void, but his legacy remains alive and continues to influence our work. Dr. Abdul Jalil's contributions to the Kedah Family Medicine Specialist's fraternity were immeasurable, and his impact on



Our community is something we will always cherish. Though he has now stepped down, we still feel the warmth of his presence in every aspect of our work.

We express our heartfelt gratitude and wish Dr. Abdul Jalil a fulfilling retirement. Thank you for everything, Dr. Jalil! Your legacy will continue to guide us!

A New Chapter in Healthcare: Guiding the Future

As we navigated the year, FMS Kedah continued to shine brightly, taking significant steps forward. One of the key milestones in 2024 was the development of updated guidelines for medical officers. The state of Kedah made a landmark move towards improving healthcare for pregnant women with medical disorders, addressing a crucial aspect of maternal health. In 2023, a new set of guidelines was developed for the primary care management of medical disorders during pregnancy, ensuring that healthcare providers have the right tools to care for this vulnerable group.



Dr. Rohana, the Senior Assistant Director of the Family Health Unit at the Kedah State Health Department, led this important initiative. The guidelines were created through the collaborative efforts of 31 Family Medicine Specialists, with the leadership team comprising Dr. Artini binti Abidin, Dr. Mahani binti Kamaruddin, Dr. Nor Asyura binti Ngah, Dr. Alyani binti Mohamad Mohsin, Dr. Sarah Nur Alya binti Mohd Sofian, Dr. Sharifah Shafinaz bt Syed Hamzah, and Dr. Wan Wahida binti Wan Mohd Zohdi. Alongside them, internal reviewers Dr. Zamri bin Mansor, Dr. Abdul Jamil bin Ahmad, Dr. Sri Wahyu binti Taher, and Dr. Arfah binti Ahmad ensured that the guidelines were not only evidence-based but also practical, adaptable, and suitable for various primary care settings across Kedah.



This endeavour took months of careful planning and numerous meetings, reflecting the dedication and commitment of all involved. These guidelines were successfully published at the end of 2024, followed by a training manual delivered by FMS. The new guidelines are a significant leap forward in providing high-quality, accessible healthcare to pregnant women with medical conditions, marking another milestone in Kedah's commitment to improving maternal health.



Community Impact: Family Medicine Specialists Unite Across Kedah for Key Health Awareness Events

Beyond the development of clinical guidelines, Kedah FMS continued to serve its community through various outreach programs aimed at improving public health. Throughout 2024, the team organised numerous community health activities, from awareness campaigns to community programs and vaccination & cancer drives. These initiatives helped strengthen our relationship with the people of Kedah, ensuring that everyone had access to the healthcare they needed, regardless of their background.

FMS Kedah has proven that healthcare is not just about hospitals and clinics; it's about being present and proactive in the community. Our commitment to community health is something we hold dear, and the results of these efforts are evident in the positive impact we've seen on the local population.

1. World Diabetes Day: "Raising awareness and taking action for a healthier future, together."

World Diabetes Day in Kedah saw Family Medicine Specialists (FMS) from all districts come together to raise awareness about diabetes prevention and care. The collective efforts of FMS aimed to highlight the importance of regular health check-ups, early detection, and lifestyle changes to prevent and manage diabetes.



Dr. Mahani (FMS KK Jalan Putra), event director, with Dr. Mohd Redhuan (FMS KK Simpang Kuala), as a speaker, during the WDD event at PKD Kota Setar.



This statewide movement empowered residents to take control of their health, making diabetes prevention and care a shared responsibility across the community.

2. Hari Warga Emas:

"Celebrating and honoring our seniors – their wisdom and strength inspire us all"

On Hari Warga Emas, Family Medicine Specialists in Kedah played a vital role in celebrating the elderly community. FMS from all districts organised special wellness programs to address the specific needs of seniors. Events included sambutan talks on managing chronic conditions, promoting mobility, and enhancing mental health. Through these efforts, the FMS highlighted the invaluable contributions of seniors while ensuring they had access to the best care and support for healthy ageing.



Dr. Hasniza binti Hasim FMS KK Sg Petani) and her dedicated team at the World Diabetes Day event by organized PKD Kuala Muda.



Celebration of Senior Citizens' Day at PKD Yan, honoring the wisdom and contributions of our elderly community members.



Sambutan Hari Warga Emas PKD Kota Setar, led by Dr. Nawal, FMS KK Langgar as event director, with the support of fellow FMS and their dedicated team.



Celebration of Senior Citizens' Day by PKD Langkawi, with Dr. Azeanty, FMS KK Kuah.



Senior citizens and staff at PKD Padang Terap engage in enriching activities, supported by Dr. Abu Bakar from Lubuk Merbau



Dr. Nurhidayah, Dr. Abdul Jamil, Dr. Nazeerah and Dr. Shakirah, FMS from Kulim District, come together to support the event.



A Year of Pride: Celebrating the Achievement of Kedah's Family Medicine Specialists



From left: Dr. Mahani binti Kamaruddin (Subspecialty in Non-Communicable Diseases), Dr. Alyani binti Mohamad Mohsin (Subspecialty in Mental Health in Primary Care), Dr. Artini binti Abidin (Subspecialty in Sexual & Reproductive Health in Primary Care), with Dr. Sri Wahyu binti Taher, their source of inspiration.

The year 2024 has brought a sense of immense pride and joy to all of us at FMS Kedah as we celebrate a remarkable milestone in the journey of our glory fraternity. Three of our esteemed Family Medicine Specialists have successfully completed their subspecialty training, marking a significant achievement not only for them but for all of us. These individuals, through their hard work, perseverance, and dedication, have reached new heights in their careers. Their completion of their subspecialties is not just a personal triumph but a victory for Kedah FMS as a whole. It enhances the quality of care we can provide to the people of Kedah, as these specialists bring their newly acquired knowledge and skills to our community.

We are also incredibly proud that on 16/11/2024, Kedah FMS, with subspecialty/AOI training, organised the inaugural symposium with the theme 'Closing the Women's Health Gap', in vibrant hot pink! A total of 150 primary care members from all over the country, including FMS, private general practitioners, medical officers, and family medicine trainees, participated in the event. The symposium featured a range of insightful talks, covering topics such as premature ovarian insufficiency in adolescents, female sexual disorders, and even the prevention of hip fractures in the elderly. It was an exciting and engaging convention, filled with valuable discussions and knowledge sharing.



Dr. Sri Wahyu (Chairman) with the entire committee members (top) and participants (bottom).



Full of anticipation and excitement as we are selected to host the 27th Family Medicine Scientific Conference 2025!

1st ANNOUNCEMENT

27th FAMILY MEDICINE SCIENTIFIC CONFERENCE
2025 *Back To Basics, In Sync With Innovations*



Setia SPICE Convention Centre, Penang

Pre-Conference: 27th August 2025
Conference: 28 - 30th August 2025

Please block your dates!



Hosted by **KEDAH FMS**

The year 2024-2025 is also a year of excitement and anticipation for us, as Kedah FMS has been selected to host the 27th Family Medicine Scientific Conference. The conference will be held at the Setia SPICE Convention Centre, Penang, with the theme "Back to Basics, In Sync with Innovations." We are thrilled to welcome all Family Medicine Specialists from across Malaysia to this prestigious event, which will take place on August 27, 2024 (pre-conference) and from August 28-30, 2024 (main conference). We look forward to an inspiring and successful gathering!

Last but not least, we sincerely hope that all Family Medicine Specialists in Kedah will continue to achieve great success and bring pride to our fraternity.





In 2024, Sarawak has witnessed a steady rise in the number of Family Medicine Specialists (FMS), with a total of 46 FMS, 6 gazette and 6 pre-gazette specialists stationed in various areas of Sarawak, strengthening the capacity for primary healthcare delivery. The increase in FMS is a direct result of the joint efforts from various health divisions at the state, national, and even international levels. This collaborative approach has led to the implementation of numerous activities and health promotion projects aimed at advancing clinical practices, improving healthcare quality, and fostering continuous learning and innovation.

Many clinic programs have been successfully implemented across Sarawak, significantly contributing to the improvement of healthcare and raising awareness within local communities. These programs have made a positive impact by addressing a wide range of health needs, from preventive care to specialized treatment, and fostering a proactive approach to health. With the expansion of programs such as OSCA, wound care, PPD/Palliative care, GEKO, chronic pain management, mental health support, and adolescent health, communities are becoming more aware of the importance of regular health check-ups and early intervention. These programs cater to diverse age groups and health conditions, offering tailored solutions that improve access to essential healthcare services and ensure individuals receive the care they need.



Highlight of the event, led by Dr Maziah Binti Ishak

Among the highlight events of 2024 was the Leadership Workshop led by Dr. Maziah Binti Ishak, the State FMS of Sarawak. With her experience in leadership training, Dr. Maziah guided participants through interactive exercises and discussions aimed at challenging traditional leadership approaches. The workshop's goal is to empower FMS to become confident, adaptive leaders who can inspire their teams and contribute to their clinics' success.

Officials from the Ministry of Health recently visited several clinics in Sarawak to assess and improve healthcare services. These visits aimed to ensure facilities, especially in rural areas, met health standards and addressed community needs. This initiative fosters better communication between the government and healthcare providers for targeted support.



SARAWAK



The introduction of the ultraportable X-ray Fujifilm FDR XAIR machine at Klinik Kesihatan Bintulu represents an innovative leap forward in healthcare technology and service delivery. This cutting-edge, portable X-ray machine is designed to provide high-quality imaging while being compact and easy to transport. It enables clinicians to quickly and efficiently obtain diagnostic images in a wide range of settings, from clinics to remote locations, without the need for bulky and stationary equipment. By integrating this ultraportable X-ray machine into Klinik Kesihatan Bintulu, the clinic is able to enhance patient care by offering quick diagnostics in various locations, enhancing patient care and reducing hospital visits.



Many Family Medicine Specialists (FMS) in Sarawak have received awards for their dedication to healthcare. These recognitions celebrate their contributions to community health and the growing importance of family medicine. In addition to their clinical work, FMS are also pursuing subspecialty training, further enhancing their expertise in areas such as Geriatrics, Palliative Care, Mental Health, Chronic Disease Management, and more. In 2024, Dr. Muhamad Irfan Yasin Bin Ali Uddin achieved a milestone by obtaining a subspecialty in Health Informatics, positioning him to support the digital transformation of healthcare services.





The opening of Klinik Kesihatan Bandar Miri in 2024 was a key development for the community, bringing essential healthcare services closer to residents. Located in Miri, Sarawak, Malaysia, this new clinic will provide a range of healthcare services, including general check-ups and specialized treatments. It aims to be a vital resource for urban and rural populations, offering affordable, quality care to those who have faced barriers to healthcare access.



Dr Maurice Steve Utap, FMS KK Bandar Miri

Dr. Noraliza Bt Md Zain, a respected Family Medicine Specialist from Klinik Kesihatan Jalan Lanang in Sibu, retired after a remarkable career dedicated to community health. With extensive experience in family medicine, she has significantly improved the health of many in Sibu and its surrounding areas. Her compassionate care has earned her great respect, and we wish her the best in her well-deserved retirement.

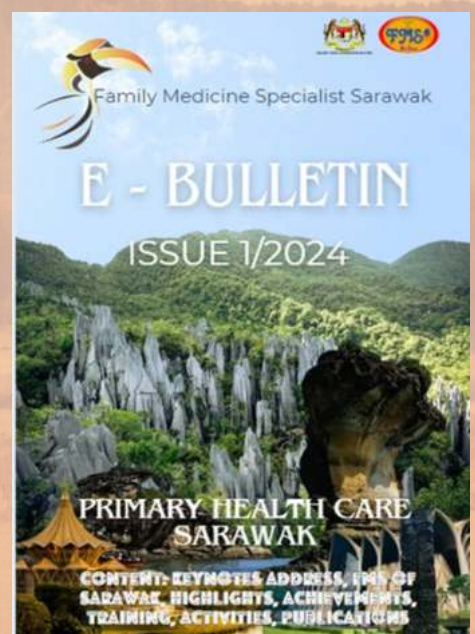


Dr Noraliza Bt Md Zain, FMS KK Jalan Lanang

The Sarawak E-Bulletin Committee is proud to present its Third Edition in 2024, highlighting the contributions of Family Medicine Specialists across the state. This edition showcases their efforts in clinical work, community outreach, and health education.

It emphasizes the dedication of FMS in improving patient care and addressing healthcare challenges in Sarawak. From local collaborations to specialized training and patient success stories, the Third Edition offers inspiring content.

Enjoy reading and celebrating the significant contributions of FMS professionals to Sarawak's healthcare future.



SCAN





Perlis World Diabetes Day 2024: A Celebration of Diabetes and Well-Being

World Diabetes Day, celebrated annually on November 14, raises global awareness about diabetes, its management, and prevention. In Malaysia, where diabetes is a significant public health challenge, this event carries critical importance. On November 2, 2024, the state-level WDD celebration in Kangar, Perlis, hosted at Denai Larian Pengkalan Asam, highlighted the theme “Diabetes and Well-Being.” Organized in collaboration with the Malaysian Diabetes Association (Perlis Branch), the event emphasized holistic diabetes care.

In Malaysia, nearly one in five adults lives with diabetes, according to the 2019 National Health and Morbidity Survey. Perlis, with its aging population and lifestyle changes, faces similar challenges. Limited awareness, poor dietary habits, and sedentary lifestyles exacerbate the issue, underscoring the need for community-based interventions.

The celebration featured engaging activities promoting health and well-being:

1. No Sugar Run 2.0: A 3.5KM walk and 5KM run symbolized the community’s commitment to healthier lifestyles. Participants of all ages joined, fostering unity and emphasizing the role of regular exercise in preventing and managing diabetes.
2. Treasure Hunt: Blending fun with education, the treasure hunt educated participants on nutrition, physical activity, and blood sugar monitoring, reinforcing teamwork and community involvement.
3. Diabetes Talk: Healthcare professionals provided insights on early signs, routine screening, and managing diabetes through lifestyle changes. They also addressed mental health challenges faced by those living with diabetes.
4. Exhibitions and Screenings: Booths showcased advancements in diabetes care, while health screenings offered attendees a chance to assess their health proactively.



PERLIS



Dr. Aina Najmi binti Azizan, Deputy Chief of Perlis Family Medicine Specialists, officiated the event. She emphasized early screening, healthier lifestyles, and the collective responsibility of combating diabetes.



The Perlis World Diabetes Day 2024 celebration was a resounding success, not only for its engaging activities and community spirit but also for its meaningful impact on diabetes awareness. By promoting the theme of "Diabetes and Well-Being," the event highlighted the importance of a holistic approach to managing and preventing diabetes.

As Malaysia continues to tackle the diabetes epidemic, events like this serve as powerful reminders that collective action and community support can drive meaningful change. Let us take inspiration from Perlis' efforts and work together to create a healthier, diabetes-free future.



OSCA Outreach Program at Pondok Remaja Inabah II: Empowering Recovery and Awareness

On June 13, 2024, the One-Stop Centre for Addiction (OSCA) conducted a successful outreach program at Pondok Remaja Inabah II in Kuala Nerus. This program, aimed at enhancing community understanding of addiction, introduced OSCA services from Klinik Kesihatan Bukit Tunggal. Key activities included an aerobics session, a talk by Dr. Nadhirah binti Ramli on addiction management, and a forum featuring psychiatrists Dr. Zafrie Izzat bin Zakaria and Dr. Khoo Hui Ling. The forum, moderated by Ms. Noor Ajeerah binti Mohammad Sable, addressed mental health and addiction recovery. A health exhibition focused on mental well-being and smoking cessation was also held. Dr. Ranimah binti Yahya, FMS KK Bukit Tunggal officiated the closing ceremony, emphasizing collaboration between healthcare providers, NGOs, and the community in tackling addiction.



World No Tobacco Day Celebration: Promoting a Smoke-Free Generation



On June 12, 2024, IPG Kampus Dato' Razali Ismail hosted the World No Tobacco Day celebration to raise awareness of smoking and vaping dangers. Highlights included a forum moderated by Dr. Nadhirah binti Ramli, featuring Dr. Ranimah binti Yahya, FMS KK Bukit Tunggal, Ms. Farah Nabilah Mokhtar, Counsellor and Mr. Noor Ikmal Hisyam, physiotherapist. The discussions covered physical, psychological, and societal impacts of tobacco use.

TERENGGANU



Additional activities included a talk on tuberculosis, a success story from Mr. Din, free health screenings, and exhibitions on dental health, mental well-being, and smoking dangers. The strong turnout of students and staff showcased the program's success in fostering awareness among future educators.



Parenting Seminars by PKD Dungun

Throughout 2024, PKD Dungun organized parenting seminars led by Dr. Zahni binti Muda to enhance understanding of developmental delays in children. Topics covered included communication strategies, emotional management, and toilet training, supported by psychologists, dietitians, and occupational therapists.

The August seminar focused on special needs children, featuring talks by a social welfare officer and a psychiatrist addressing problematic behaviors. The November session emphasized early intervention for hyperactive children and strategies to improve focus, delivered by Dr. Zahni and an occupational therapist.



SEMINAR KEIBUBAAN 2.0

Hari: Sabtu
Tarikh: 03 Ogos 2024
Masa: 0830 pg - 0130pm
Tempat: Dewan Ibnu Sina KK Kuala Dungun

Ikuti kami di:

Pejabat Kesihatan Kuala Dungun

Penceramah Oleh:

1. Dr. Zahni binti Muda
Pakar Perunding Perubatan Keluarga Subspeciality Child Health in Primary Care Klinik Kesihatan Kuala Dungun
2. Dr. Muhammad Iszuddin bin Mohd Bawa
Pakar Pakariti Hospital Dungun
3. Puan Zarinewati bt Zulhaffi
Dietiti Perubatan Khass SK Paksa II
4. Puan Nurul Saifurrah Binti Mohd Kid
Pegawai Kebajikan Masyarakat Pejabat Kesihatan Masyarakat Daerah Dungun

QR CODE E-SIJIL

QR CODE WAELUMAHAS

PERINGKAT PKD DUNGUN

SEMINAR KEIBUBAAN

Anak Lewat Perkembangan

- Pengajaran Emosi dan Mental Persegi Bagi Anak Lewat Perkembangan
- Membantu Anak Berkomunikasi!
- Membantu anak yang susah makan
- Membantu anak ke tandas

9.30 AM - 1.30 PM

25

MAY 2024

Dewan Ibnu Sina, KK Kuala Dungun

Dr. Zahni binti Muda
Pakar Perunding Perubatan Keluarga Subspeciality Child Health in Primary Care Klinik Kesihatan Kuala Dungun

Puan Siti Hajjar binti Iqbal
Dietiti Perubatan Khass SK Paksa II

En. Wan Muhammad Mokhammad bin Wan Yusoff
Pegawai Kebajikan Masyarakat Pejabat Kesihatan Masyarakat Daerah Dungun

PERINGKAT PKD DUNGUN

TERENGGANU

Appearances and Presentations



In March 2024, Terengganu Family Medicine Specialists launched the “Virtual CME 2024,” a non-profit initiative for healthcare professionals to stay updated on clinical management in primary care. Each session, led by two specialists, provided insights into emerging trends and practical knowledge. Participants received attendance certificates, with overwhelming positive feedback ensuring its continuation next year.

On November 19, 2024, Dr. Juhaida binti Jaafar appeared on Terengganu FM’s “Segment i-Sihat” to discuss diabetes among youth. Her session highlighted prevention, early detection, and lifestyle modifications. The program’s actionable advice and practical insights were well-received, encouraging healthier lifestyle choices.



Dr. Juhaida binti Jaafar represented Malaysia at the RCOG World Congress 2024 in Oman, presenting interim findings from the “MARIE-Malaysia (WP2a)” menopause study and highlighting Terengganu’s role in global health research.



On November 14, 2024, Klinik Kesihatan Kuala Berang and AADK Hulu Terengganu hosted the Health and Relapse Prevention Program at Wakaf Tapai Sports Complex, featuring talks, team-building, and educational sessions to support OSCA clients and promote recovery.

HIT ON TARGET: A Day of Bonding and Skill-Building

On Saturday, 24th August 2024, the Family Medicine Specialists of Melaka organized a retreat day in Jasin, featuring archery as the centerpiece of an enriching and family-friendly event. This retreat blended professional development with relaxation, fostering camaraderie and strengthening bonds among participants. The archery session, designed to teach focus, patience, and precision, was a fitting activity for family medicine specialists who often navigate high-pressure situations. Participants practiced valuable skills that mirrored qualities essential in both archery and medicine, such as concentration and perseverance.

The event was family-inclusive, emphasizing work-life balance and recognizing the vital role of family support. Spouses and children joined the activities, adding warmth and fun to the day. A friendly archery competition was held, dividing participants into adult and children categories, ensuring fairness and enjoyment for all. Winners were awarded hampers filled with treats and practical items, making the prize-giving ceremony a joyous occasion.

Beyond the competition, the retreat offered an opportunity for reflection, teamwork, and professional exchange in a relaxed setting. Participants shared experiences, exchanged ideas, and built stronger connections while enjoying a sumptuous lunch featuring local dishes.

The event was more than a day of fun—it reinforced the importance of patience, focus, and family support in achieving personal and professional success. Participants left with renewed energy, valuable lessons, and stronger relationships, marking the retreat as a meaningful and memorable experience.



World Suicide Prevention Day Celebration Program & Youth Mental Health Program at IPT District Level Jasin 2024

The World Suicide Prevention Day Celebration & Mental Health Program for Youths in Higher Education Institutions (IPT) at the District Level of Jasin was held on September 11, 2024, at the Dewan Platinum, Politeknik Merlimau (PMM). Four health clinics, namely KK Merlimau, KK Jasin, KK Umbai, and KK Selandar, along with the Jasin District NCD Unit, mobilized their health personnel, including Family Medicine Specialists and Medical Officers, to act as speakers, facilitators, and conduct health screenings. This program involved 269 first-year students in the field of Electrical Engineering. First-year students were the focus of participant selection at the request of the Department of Electrical Engineering at Politeknik Merlimau, which wanted their students to be exposed to the importance of mental health as soon as they enter higher education.

The main objective of the program was to raise awareness about mental health, particularly among university students, and to focus on suicide prevention. Various activities were conducted on that day, including health talks, health debate competitions, exhibitions and health screenings, HPV vaccination counters, and mental health quizzes. The results of the survey conducted among participants immediately after the program concluded found that the program successfully achieved its main objective of empowering higher education students to understand and address mental health issues. Interactive activities such as debates and lectures have a significant impact in raising awareness and fostering students' concern for mental health. Hopefully, such programs can continue in the future with improvements to attract more participants.





A community project for the community

On 18th August 2024, from 10am to 1pm, the family medicine specialists (FMS) of Alor Gajah district organized a remarkable community project aimed at promoting health and well-being. This event was entirely free of charge, ensuring that everyone in the community could benefit from the services offered

The project featured a variety of health-related activities, including counselling on maintaining a healthy diet and exercise routines. Participants also had the opportunity to undergo mental health screenings and receive free consultations from specialists. To make the event even more engaging, there were quizzes with free gifts for participants.

This initiative not only provided valuable health information and services but also fostered a sense of community and support among the residents of Alor Gajah. Additionally, many tourists from other states joined in, making the event even more vibrant. A special thanks to the management of Freeport A'Famosa Outlet for providing the venue for the Alor Gajah FMS event.



Academia Updates

Notes



الجامعة الإسلامية العالمية ماليزيا
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
يُونَيْتِيسِيْتِي اِسْلَامِي اِنْتَار اَبْغَسِيَا مَلِيْسِيَا

Garden of Knowledge and Virtue



USM

UNIVERSITI SAINS MALAYSIA



ACADEMY OF
FAMILY PHYSICIANS
OF MALAYSIA

NURTURING HEALTH

for future generations



By: Assoc. Prof. Dr. Nurjasmine Aida Jamani
and Dr. Abdul Hadi Said
IIUM Family Health Clinic, Kuantan Pahang



الجامعة الإسلامية العالمية ماليزيا
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
يُونَيْتِي سَلَامًا اِنْتَارَا اِنْعَسَا مِلْدَسِيَا

Garden of Knowledge and Virtue



School-going children are an asset to our country. Instilling good health-seeking behaviour and promoting health enhances their well-being and builds a foundation for a healthier community for future generations. Young children spend a significant amount of time in school, which provides an essential environment for shaping their physical, mental, and social well-being. Hence, IIUM Family Health Clinic took the initiative to create an outreach program at a primary school in Kuantan, Pahang.

"Promoting Wellness: Primary School Health Awareness Program" was successfully conducted on May 10, 2024, at SK Indera Mahkota Utama. This program applies a Health Education Module by the Department of Family Medicine, IIUM. The module includes physical activity initiatives, basic first aid training, sexual reproduction health, digital health and screen time. It empowers children with the knowledge, skills, and habits necessary to make informed decisions about their health. This program started with an aerobic exercise session involving all 1000 students and teachers, led by our Head of Department, medical officer, and medical assistant. This was to promote physical activity among school children and staff to combat obesity and promote a healthy lifestyle. Later, 100 Year 5 and 6 students received a demonstration of basic first aid. This activity was vital to improving their knowledge of essential first aid and providing immediate care before professional help arrives.

In addition, the students also had a health talk on Screen Addiction and Ways to Prevent Screen Addiction. Nowadays, children are exposed to technological advances, and most have access to various devices, including televisions, mobile phones, and other gadgets. Electronic devices have become part of their daily lives, and excessive use of these devices can lead to multiple problems if proper guidance and action is not taken.

Sexual reproductive health talks were also independently given to male and female students. Physical growth and sexual characteristics were included in the teaching session. Apart from that, issues with puberty, sexuality and safe touch were also discussed with the students.

Health screening booths were also available for the school teachers and staff to perform basic medical check-ups. The screening included blood pressure, body weight, glucose measurement, and consultation sessions with medical officers and a Family Medicine Specialist.

By creating a supportive environment that encourages positive behaviours, we aim to inspire school-going children to lead healthier lives and become advocates for wellness within their families and communities. This program emphasizes a holistic approach to health promotion through collaboration with educators, parents, and health professionals.



Sexual Reproductive Health Talk



IIUM Family Health Clinic members with the School Administrator and children



Aerobic session with school children



Basic first Aid training



Health talk on Screen time and Preventing Screen Addiction

Visit to

ACEH

: Networking and Tsunami Reflection

By: Dr. Imran Ahmad and Dr. Zainab Mat Yudin

It has been 20 years since the tsunami wreaked havoc on Aceh in 2004. It was a shock to the whole world in the real sense. We have been planning to visit Aceh for few years. In fact, it was supposed to happen in the year 2020, following successful visits to Cambodia and Thailand previously. Again, another big disaster inflicted a huge damage to the world, a more global phenomenon, COVID19. A tsunami of a different nature.

This visit was not without hiccups. The plane seemed to be too small for our group of 60 over participants, to be exact 64. They had to split our group into two for the outbound trip from Kuala Lumpur to Aceh. The first group of 30 left Kuala Lumpur in the morning of 29th August and the second group took the 3.30 flight. The first group was further divided into two. Ten of us, the lecturers from the Department of Family Medicine, USM started our visit with an academic activity.

We visited the Faculty of Medicine, Universitas Syiah Kuala. The main reason for the visit was the official exchange of the Memorandum of Understanding (MOU) documents between the two universities, that have been prepared earlier. The Program Director, Dr Salziyan Badrin was busy arranging for the visit a few

months before the event day. We had our first online meeting back in March this year, attended by most of the lecturers from the primary care departments of the two universities. During our visit we further discussed the possible collaborative activities that were going to benefit both universities.

The rest of the group boarded the bus heading to the Tsunami Museum. On the way the bus stopped at the mass grave to pay respect to the tsunami victims who were buried in a single grave, all 40,000 of them. They later visited the Tsunami Museum. The two groups from the morning flight later met at Masjid Oman for prayers. After a tiring morning, we were finally brought to the hotel to check in.

After a short rest, at 3.00 pm, we were on the bus again. The mission was to taste and experience drinking 'Kupi Terbalik', upside down coffee. The afternoon flight group was already having their feast when we arrived at the coffee shop. The coffee is basically served in a glass turned upside down on a saucer. You have to master sipping the coffee from between the glass and the saucer. It basically



Family Medicine Specialist from Universiti Sains Malaysia and Faculty of Medicine, Universitas Syiah Kuala.

adds style to the already tasty coffee. We then went to the biggest mosque in Banda Aceh, Masjid Raya Baiturrahman for night prayers.

The following morning, we started our day early to catch our ferry to Sabang on Weh Island, to the northwest of Sumatra. The ferry took about one hour to reach Sabang. Six vans were waiting for us at the jetty. Our first stop was Benteng Jepang (Japanese Fort). Then we continued our sojourn, stopping at Karang Mati, Freddie Resort, Murah Raya for lunch then checked in at Mata IE Resort. It was a hectic day because we were back on the vans to Pantai Iboi. There we took small boats to Pulau Rubiah. Most of us decided to snorkel there, the rest decided to do 'dry snorkelling', watching fish and corals from the safety of the boat through the specially designed glass floor in the middle of the boat. Following the exhaustive dry snorkelling, we decided to stockpile our calories with 'goreng pisang', 'mee segera' and 'air kelapa' at the restaurants on Pulau Rubiah.

We could not spend too much time there because there was another item on the list to be ticked. The boats took us back to Pantai Iboi and back on the vans. We later arrived at literally the very end of Indonesia, aptly called Kilometer 0, Indonesia. It is the westernmost point of Indonesia, on Weh Island, right in the Indian Ocean. It was almost dark when we arrived there, just enough time to snap a few photos with the monuments as the background. Soon it was dark, but it did not stop us from buying souvenirs. We concluded our day by getting back to the resort for a well-deserved dinner and rest.

The morning was bliss, a brief moment to appreciate the beauty of the Sabang sunrise. The beach was so calm and serene. Even the waves were subdued to mere ripples on the surface of the often volatile Indian Ocean. We rushed to the jetty again before saying goodbye to splendid Sabang. We took a bigger thus slower ferry back to Banda Aceh. The two buses were there to whisk us off to see the beastly ship of over 2000 tonnes permanently parked on land. It was hauled 5km inland by the tsunami almost 20 years ago, currently serving as one of the many reminders of that monstrous tsunami.

From there we were brought to see another floating miracle during the devastating event. This time there was a bit of a challenge because the buses parked quite a distance from the object of interest. Many of us navigated the one kilometer or so country road riding hired motorbikes readily available for rent. The less adventurous ones hired the bikes together with the owners to serve as their private chauffeurs. There we saw a huge dome of a mosque, estimated to be 80-tonne heavy, firmly planted on the ground with no mosque in sight. The dome suffered the same fate as the ship. It was floated to its current location, what used to be a paddy field, 2.5 km from the actual mosque.

In the afternoon we opted for more relaxing activities: having lunch and shopping at nearby Pasar Aceh. The visit continued with a stop at Rumah Nyak Dhien, the female warrior who fought against the Dutch. From there we finally reached one of the most popular mosques in the universe immediately after the



Memorandum of Understanding (MOU) documents exchange between Universiti Sains Malaysia and Faculty of Medicine, Universitas Syiah Kuala.



tsunami, when people were coming from all over the world to help with the recovery as the photos of the destructions started to be shared. The photo, a lone mosque left standing amidst vast areas of flattened earth devoid of buildings and trees. The mosque is Masjid Rahmatullah at Lampuuk, one of the worst affected areas because of its close proximity to the shore.

From Masjid Rahmatullah we went to have dinner at a beachside restaurant nearby. The view was breathtaking and the dinner was marvellous with fried fish as the main dish. On the way back to the hotel we stopped at the popular durian stall in town, Durians Atok Malaya.

In the morning the afternoon flight group together with those attending the session with Universitas Syiah Kuala were brought to visit Museum Tsunami Aceh. At 11.30 am all were on the bus, on our way to the airport but not before tasting the must-try, Mee Aceh. The local noodle was undeniably very delicious. The whole trip was well above expectation.



Visit to the Aceh Tsunami Museum which preserves the history of the 2004 Tsunami.



A visit to a primary service facility in Aceh known as a Puskesmas (Pusat Kesehatan Masyarakat / Community Health Center).



ACADEMY OF FAMILY PHYSICIANS OF MALAYSIA 2024 EVENTS RECAP

The Academy of Family Physicians of Malaysia (AFPM) is proud to reflect on a successful 2024, a year filled with enriching events, new collaborations, and achievements in the local and international family medicine scene. AFPM strengthened its commitment in advancing primary healthcare and supporting family physicians nationwide through a lineup of conferences, workshops, certification exams, and educational modules delivered both physically and online.

Examinations and Certifications

AFPM began the year with the Eligibility Exam for Advanced Training in Family Medicine (ATFM) candidates on January 7, followed by the MAFP/icFRACGP Part 1 Exam on March 2-3. These exams serve as crucial steps for aspiring family physicians toward attaining the International Conjoint Fellowship of the Royal Australian College of General Practitioners (RACGP).



Candidates in the UniKL Campus sitting for online examination.



Coordinators for MAFP/icFRACGP Part 2 exam with Dr Emma Fazilah Zulkifli, Clinical Competency Examination Lead

The MAFP/icFRACGP Part 2 Exam on September 28-29 at Hospital Sultan Abdul Aziz Shah concluded the rigorous training process, reflecting AFPM's dedication to maintaining high professional standards.



Examiners for MAFP/icFRACGP Part 2 exam

Annual Scientific Conference (ASC) 2024 and Golden Jubilee

The AFPM Annual Scientific Conference, held on April 26-27 in Putrajaya, revolved around the theme "Primary Care - For Each and Everyone." The event highlighted the critical role of primary care providers in Malaysia's healthcare system and fostered collaboration among government and private sector professionals. With 600 attendees, the conference featured panels, sessions, and demonstrations to inspire impactful practices in primary care.



Officiation by YBhg Datuk Dr Muhammad Radzi bin Abu Hassan, the Director General (DG) of Health



For the first time, a number of 600 Family Physicians, trainees and primary care doctors came together for this annual event



AFPM celebrated its 50th Golden Jubilee during the conference on World Family Doctor Day with the theme "Healthy Planet, Healthy People." The gala honored family doctors and highlighted the link between planetary and human health. It featured a speech by AFPM's royal patron, DYMM Yang di-Pertuan Besar Negeri Sembilan, a video montage, and performances by Monocort and other family doctors, followed by a webinar on global environmental health issues.



Chapter of Young Family Doctors (CoYFD) organized a Gala Dinner for World Family Doctor Day and the Academy's 50th anniversary. The celebration began with an exciting opening by the Presidents, Dr. Norsiah Ali and Dr. Norhazlin Talib.



World Family Doctor Day webinar on Healthy Planet and Healthy People, organized by AFPM's Chapter of Young Family Doctors in collaboration with FMSA.

Professional Development and Collaborations

The 51st Annual General Meeting on April 28 provided a platform to review accomplishments and strategize future goals. On May 5, the Convocation Ceremony celebrated new graduates joining the family medicine ranks. In July, the Chapter of Trainers (CoT) and Quality Improvement Program (QIP) Workshop included mentor-mentee training and case simulations to enhance training efficacy.



Professor Datuk Dr Sheikh Amin, Dean of Graduate Studies at the mentor training and QIP Workshop



Dr Anis Ezdiana Abd Aziz, Censor-in-Chief at briefing mentors on training curriculum



From August 21-24, AFPM participated in the WONCA Asia Pacific Region Conference in Singapore, connecting family physicians across the region to share best practices and foster cross-border collaborations. Malaysian delegates, including young doctors, actively engaged in networking events and presentations.

Participants excited and ready for WONCA APR Conference 2024



Dr Wong Ling Ying, chair of CoYFD; sharing AFPM Young Doctors' achievements



Young Doctors Networking event to kick off WONCA Asia Pacific Region with representation of Dr Wong Ping Foo, Dr Wong Ling Ying and Dr Haslina Mukhtar of The Rajakumar Asia-Pacific Council



Part of the Malaysian delegates with Dr Karen Flegg (President of WONCA)



A significant milestone in 2024 for AFPM was the Opening Ceremony of the new Academy Building on 12th October 2024. This state-of-the-art facility represents a commitment to enhancing family medicine education, training, and community engagement in Malaysia. The building includes advanced classrooms, simulation labs and auditorium where AFPM will host future training sessions and workshops to support members in their ongoing professional development.



Historic moment: The officiation ceremony of the new AFPM Administrative Office and Training Center, Medical Academies Malaysia graced by DYMM Yang di-Pertuan Besar Negeri Sembilan, Tuanku Mukhriz Ibni Almarhum Tuanku Munawir, the esteemed Royal Patron of AFPM and DYMM Tunku Ampuan Besar Negeri Sembilan, Tuanku Aishah Rohani Binti Almarhum Tengku Besar Mahmud



Demonstration of clinical skills workshop – Implanon insertion & spirometry by Family Medicine Specialists.



Council members of AFPM with the Royal Patron

Since 1981, AFPM has maintained a strong relationship and collaboration with the Royal Australian College of General Practitioners (RACGP). From 21st - 23rd November 2024, the AFPM President and Exam Committee attended the GP24 Conference at the Perth Convention and Exhibition Centre. The event was highly productive, featuring discussions on exam-related matters alongside the conference activities.



Dr Isriyanti Rafae, AFPM President with Dr Michael Wright, RACGP President and key leaders during the RACGP Fellowship Ceremony



Some of the AFPM mentors who participated in the event



AFPM Exam Committee with the RACGP Exam Board

The AFPM participated in the Workshop and Seminar on Clinical Practice Guidelines (CPG) for Type 2 Diabetes Mellitus (T2DM) Management, held on 17th and 18th August 2024 at Summit Hotel USJ. Organized by PERDIM, the event featured AFPM mentors facilitating small group discussions on diabetes case management. This collaboration with our GP colleagues was highly valuable, and we look forward to continuing such partnerships.

Throughout the years since its inception, AFPM has conducted regular CPD sessions, training modules and practice workshops. Other than that, AFPM is actively involved as stakeholders and panels for policies on Primary Care for the country. Reflecting on 2024, AFPM is immensely grateful for the enthusiasm, dedication, and participation of its members. Each event helped strengthen the field of family medicine in Malaysia. AFPM extends its deepest thanks to everyone who contributed to making 2024 a year of achievement and collaboration.

FMSA Activities

Penang Roadshow

FMSA Penang successfully conducted its roadshow on 29 June 2024. We extend our sincere gratitude to the participants and our industry partners for their significant support. Various pertinent topics were addressed, including Acromegaly, Medical Ethics, Asthma, and COPD, among others.



Free 2024

FMSA PRIMARY CARE Spotlight:
ESSENTIAL PRACTICAL INSIGHTS

- UNLOCKING THE SECRETS: ADDICTION MANAGEMENT MADE SIMPLE IN PRIMARY CARE**
DR NOR HAZLIN TALIB
FMS & Addiction in Primary Care Subspecialisation
- FAMILY MEDICINE SUB-SPECIALISATION TRAINING SHARING SESSION: EXPLORING THE BENEFITS & EXCITING INSIGHTS**
- CHARTING NEW HORIZON IN ASTHMA: THE MERIT OF CONTROL**
DR LEM LI KHEN
Consultant Respiratory Physician, Island Hospital
- MEDICAL ACT & ETHICAL ISSUES IN RELATION TO THE PROFESSIONAL DEVELOPMENT OF REGISTERED MEDICAL PRACTITIONERS IN MALAYSIA**
DR KHAIRUL HAFIDZ ALKHAIR KHAIRUL AMIN
Malaysian Medical Council (MMC)
- OPTIMISING THEOPHYLLINE THERAPY FOR COPD MANAGEMENT**
DR RAZUL MD NAZRI MD KASSIM
Consultant Respiratory Physician, Kedah Medical Centre
- ACROMEGALY AWARENESS: EARLY DETECTION & PRIMARY CARE PERSPECTIVES**
DR LEE XE HUI
Endocrinologist, Hospital Penang

OLIVE TREE HOTEL PULAU PINANG
29th JUNE 2024

inova pharmaceuticals **Abbott** **AstraZeneca** **NOVARTIS** **gsk**



Team Building in Selangor

A team-building event was organized by FMS Selangor at Nazbell Cottage in Sabak Bernam on 29th June 2024, which received partial sponsorship from the FMSA community project grant. FMSA wishes to extend its congratulations to the entire program committee for the outstanding achievement of this event.



Sarawak Roadshow

FMSA conducted a roadshow in Kuching, Sarawak on 10th August 2024. The event covered significant topics such as acromegaly, asthma, diabetes, the Medical Act, and addiction medicine. FMSA extends its gratitude to our industry partners for their ongoing support.



Free 2024

FMSA PRIMARY CARE Spotlight: ESSENTIAL PRACTICAL INSIGHTS

- UNLOCKING THE SECRETS: ADDICTION MANAGEMENT MADE SIMPLE IN PRIMARY CARE** - DR NOR HAZLIN TALIB, FMS & Addiction in Primary Care Subspecialisation
- FAMILY MEDICINE SUB-SPECIALISATION TRAINING SHARING SESSION: EXPLORING THE BENEFITS & EXCITING INSIGHTS**
- CHARTING NEW HORIZON IN ASTHMA: THE MERIT OF CONTROL** - DR YONG MEI CHING, Respiratory Physician Sarawak General Hospital
- MEDICAL ACT & ETHICAL ISSUES IN RELATION TO THE PROFESSIONAL DEVELOPMENT OF REGISTERED MEDICAL PRACTITIONERS IN MALAYSIA** - DATO' DR KALWINDER SINGH KHAIRA, Malaysian Medical Council
- DIABETES CASE ILLUSTRATION INTO PRACTICE** - DR LENNY MARTINI HAMDEN, Family Medicine Specialist Klinik Kesihatan Batu Kawa
- ACROMEGALY AWARENESS: EARLY DETECTION & PRIMARY CARE PERSPECTIVES** - DR FLORENCE TAN HUI SIENG, Consultant Endocrinologist Sarawak General Hospital

HILTON KUCHING SARAWAK
10th AUGUST 2024

NOVARTIS | Roche | gsk



EXCO Final Meeting

Malaysian Family Medicine Specialists' Association final EXCO (term 2022-2024) meeting before the Annual General Meeting (AGM). Several resolutions and proposals pertaining to FMSA were discussed.

This year will be an election year, new EXCO members will be elected during the AGM. We would like to thank all current EXCO members (2022-2024) under the leadership of President Dr. Hazlin Talib for their hardwork and commitments.



MySihatPal Launch during FMSC

FMSA was proud that our annual scientific meeting was attended by Health Minister Datuk Dr Dzulkefly Ahmad and Director General of Health Datuk Dr Muhammad Radzi Abu Hassan.

This year's conference drew over 1010 participants nationwide, with nearly 300 in the pre-conference workshops. The council member elections and important resolutions were successfully completed at the AGM. Thank you to our industry partners and the FMSC Johor 2024 committee for their hard work to make this conference a success!

MySihatPal was launched during the FMSC 2024 in Johor Bahru. This public health information platform, which FMSA supports, covers topics such as Type 2 Diabetes, Prediabetes, and Chronic Kidney Disease. Search for MySihatPal online! Finally, a big thank you to AstraZeneca for their collaboration in making this non-profit project a reality!



Old Has Gone, New Has Come

FMSA organized a farewell dinner on 12/10/24 for our Executive Committee members (2022-2024) who are leaving. FMSA would like to thank Dr Maryem Ali , Dr Nadia Kamaludin , Dr Suriani Sulaiman , Dr Ahmad Fithri Azam , Dr Nurafiza for your great contribution and hard work in past years at FMSA. We will definitely miss your presence. We hope to work with you on other platforms in the near future and always welcome you back to FMSA EXCO.



FMSA first Executive Council (EXCO) meeting with new EXCO members 2024-2026 at our new Bangi office. At the same time, a passover session was held between the new and the previous EXCOs. Congratulations to the new and incumbent EXCOs members who were elected by our members during the recent AGM held during our annual scientific conference. Last but not least FMSA would like to thank some of our EXCOs 2022-2024 for their contribution who have decided to step down.



Networking & Leadership Workshop

FMSA is glad to co-organize the Networking & Leadership workshop together with The Rajakumar Movement, Wonca Young Doctors' Movement and Academy of Family Physicians of Malaysia. Our President Dr Hazlin Talib and vice President Dr Wong Pin Foo were invited speakers for this workshop. Hopefully this programme has inspired young doctors in family medicine to be future leaders.



World COPD Day

World COPD day celebration hosted by FMSA and supported by Astra Zeneca was held on 20th November 2024 at Ginger by the Brick House Group, Bamboo Hills. The event was officiated by Yang Berhormat Deputy Minister of Health, Dato' Lukanisman bin Awang Saini. The celebration was to create awareness regarding Chronic obstructive pulmonary disease (COPD) and to promote early screening and intervention. The handover ceremony of the COPD whitepaper written by various healthcare experts including Family Medicine Specialist, pulmonologist and cardiologist was done with the aim in presenting solutions to enhance COPD care in Malaysia.



LARC: Learn, Apply, Rethink Contraception

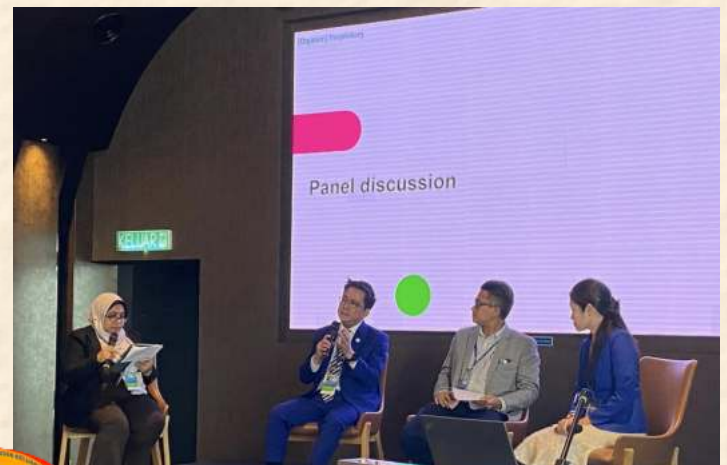
Another CME / workshop collaboration between Malaysian Family Medicine Specialists' Association and our industry partner Organon was held successfully. This CME event was somewhat special whereby speakers and facilitators are mainly family medicine specialists with special interest in Sexual and Reproductive Health while participants were family medicine specialists and trainees from all over Malaysia! The focus area is on the contraceptive implant, a Long Acting Reversible Contraception (LARC). This interesting event included lectures and a practical hands on session.

Advancing Family Medicine: Mastery on the Contraceptive Implant

Block your calendar!

Saturday • 23 November 2024
08:30 – 13:00
Element Hotel Kuala Lumpur

Chair	Speaker / Facilitator		
 Dr Nor Hazlin binti Talib Consultant Family Medicine Specialist Klinik Kebaharuan Batu 3 Cheras President of FMSA	 Dr Lee Yeow Siong Consultant Family Physician Subspecialty: Women Sexual & Reproductive Health (Primary Care) Hospital Sultan Kibria Shah Serdang	 Dr Beatrice Jee Ngee Ling Family Physician Subspecialty: Women Sexual & Reproductive Health (Primary Care) Klinik Kebaharuan-Kampung Bandar	 Dr Mohamad Hafiz bin Harun Public Health Medicine Specialist Tampar District Health Office Kuantan
Facilitators			
 Dr Hanifatiyah binti Ali Senior Lecturer & Family Medicine Specialist Universiti Putra Malaysia	 Dr Lai Yew Mai Family Medicine Specialist Klinik Kebaharuan Serdang	 Dr Nurainul Hana binti Shamsuddin Senior Lecturer and Family Medicine Specialist Universiti Putra Malaysia	 Dr Sathia A/P Kanawathy Family Medicine Specialist Klinik Kebaharuan Jengking



AI Online Workshop

The Chapter of Young Family Doctors (CoYFD) - The Rajakumar Movement Malaysia has successfully organized the "Practical Application of Artificial Intelligence (AI) in Primary Care 2024" online workshop today. This is a collaboration event with the Academy of Family Physicians of Malaysia.

The event began with inspiring welcome speeches from both the Presidents (Dr. Nor Hazlin binti Talib, President of FMSA, Dr. Isriyanti binti Mohd Rafae, President of AFPM). Followed by wonderful and enlightening talks and demonstration by the distinguished speakers (Dr. Muhamad Irfan Yasin bin Ali Uddin, Associate Prof. Dr. Elvind Yip, Dr. Wan Zuraini)

Dr. Wong Ling Ying, Chair of CoYFD also took the opportunity to promote and encourage young family physicians and trainees to join the chapter. The event concluded with a closing remark from Dr. Wong Ping Foo, who is the Vice President of FMSA, Honorary Secretary of AFPM, and the Advisor to The Rajakumar Movement Malaysia. Heartfelt thanks to all the speakers, moderator (Dr. Marina Antony Nicholson), committee members, and participants who made this event a great success.

PRACTICAL APPLICATION OF ARTIFICIAL INTELLIGENCE [AI] IN PRIMARY CARE 2024
INTERACTIVE SESSIONS & LIVE DEMO (ONLINE WORKSHOP)

INTRODUCTION OF ARTIFICIAL INTELLIGENCE (AI) AND ITS APPLICATION IN PRIMARY HEALTHCARE
- DR MUHAMAD IRFAN YASIN BIN ALI UDDIN

CAN I SCORE IN THE EXAM WITH AI?
- ASSOC PROF DR ELVIND YIP

AI ETHICS IN HEALTHCARE PRACTICAL AI APPLICATIONS IN PRIMARY CARE (LIVE DEMO)
- DR WAN ZURAINI BINTI MAHRAWI

REGISTER NOW!

AFPM/FMSA/COYFD MEMBERS: FREE, NON MEMBERS: RM30 | 14TH DEC 2024 / 8AM-1PM

CPD POINTS WILL BE AWARDED

FOR MORE INFORMATION, KINDLY EMAIL TRM.MSIA@GMAIL.COM

AFPM FMSA

The Impact of AI on Medical Education and Skills Development

Need for New Skills in AI
General Practitioners (GPs) at all stages must acquire new skills to effectively engage with AI. This includes:

- Understanding AI capabilities and limitations
- Identifying appropriate AI applications
- Ensuring patient safety and privacy
- Developing critical thinking and problem-solving skills

Importance of Human Skills in Medicine
Despite technological advances, GPs must enhance their skills in communication, decision-making, and patient relationships. This includes:

- Empathy and compassion
- Active listening
- Collaboration and teamwork
- Continuous learning and adaptation

Critical Non-Technical Skills
Future GPs will continue to require strong non-technical skills, such as:

- Communication
- Teamwork
- Decision-making
- Problem-solving
- Resilience
- Self-management

Focus on Practical AI Applications
Medical education should prioritize relevant AI applications in clinical settings, including:

- Diagnostic tools
- Decision support systems
- Personalized medicine
- Telemedicine
- Healthcare delivery optimization

<https://www.raoip.org.au/advocacy/position-statements/view-all-position-statements/clinical-and-practice-management/artificial-intelligence-in-primary-care>

Introduction

The first time was in 1980, when I was introduced to a graphical user interface—the forerunner of every modern operating system, including Windows. I sat with the person who had shown me the demo, a brilliant programmer named Charles Simonyi, and we immediately started brainstorming about all the things we could do with such a user-friendly approach to computing. Charles eventually joined Microsoft, Windows became the backbone of Microsoft, and the thinking we did after that demo helped set the company's agenda for the next 11 years.

The second big surprise came just last year. I'd been meeting with the team from OpenAI since 2016 and was impressed by their steady progress. In mid-2022, I was so excited about their work that I gave them a challenge: train an artificial intelligence to pass an Advanced Placement biology exam. Make it capable of answering questions that it hasn't been specifically trained for. (I picked AP Bio because the test is more than a simple regurgitation of scientific facts—it asks you to think critically about biology.) If you can do that, I said, then you'll have made a true breakthrough.

Felicitations!



We are so proud of you

CONGRATULATIONS!

*Dr Lenny Martini
Binti Hamden*

for being awarded ith

Darjah Gemilang Bintang Kenyalang Sarawak
Pegawai Bintang Kenyalang (P.B.K)

by

Tuan Yang Terutama
Yang di-Pertua Negeri Sarawak

on August 15, 2024

Sincerely from



Malaysian Family Medicine Specialists' Association



We are so proud of you

CONGRATULATIONS!

Dr Jusoh bin Awang Senik

for being awarded

Ahli Yang Ketiga (Paduka) Bagi
Darjah Kebesaran Setia Mahkota Kelantan
Yang Amat Terbilang (P.S.K)

by

KDYMM Al-Sultan Kelantan
Sultan Muhammad V

on September 29, 2024

Sincerely from



Malaysian Family Medicine Specialists' Association





Felicitations!

Heartiest Congratulations

Datin Dr Nazrila Hairizan Nasir
on the conferrment of
Honorary Membership
by the
Irish College of General Practitioners (ICGP)
at the Membership Award Ceremony in Dublin, Ireland
on 27 September 2024.

Best wishes.



Malaysian Family Medicine Specialists' Association



Congratulations!

**PROFESSOR
DR. ANIS SAFURA RAMLI**
for being awarded a
FELLOW
of the
**ROYAL COLLEGE OF GENERAL
PRACTITIONERS (RCGP),
UNITED KINGDOM (UK)**
starting from year
2024

Sincerely from



Malaysian
Family Medicine Specialists' Association





RETIREMENTS

Dr Norashidah binti Abdullah
Klinik Kesihatan Pengkalan Chepa

Dr. Fauziah binti Abdul Karrim
Klinik Kesihatan Jelapang



**Dr S. Kumaresan A/L
K. Subramaniam**
Klinik Kesihatan Tampin

Dr Norraliza binti Md. Zain
Klinik Kesihatan Jalan Lanang

1st ANNOUNCEMENT

27th

FAMILY MEDICINE SCIENTIFIC CONFERENCE

2025

Back To Basics,
In Sync With Innovations



**Setia SPICE Convention Centre,
Penang**

Pre-Conference: 27th August 2025

Conference: 28 - 30th August 2025

Please block your dates!



Hosted by **KEDAH FMS**



FMSA MEMI PRIVI

TRAVEL GRANT

Total claimable sum of RM 3000 to present at overseas conference relevant to Family Medicine and Primary Care

PRIMER PROJECT GRANT

The allocation is RM3000 per year for every state for primary care improvement related activities and programme.

RESEARCH GRANT

The maximum total allocation is RM10,000 per year and the deadline for the application is 31st May.

SPECIAL GRANT

A total of RM1000 is allocated to present at the Family Medicine Scientific Conference (FMSC).

COMMUNITY PROJECT GRANT

The allocation is RM5000 per project that is claimable every 3 years.

STUDY TOUR GRANT

Study tour involving a group of Family Medicine Specialists to learn about primary healthcare system in other country.

GRANTS & FINANCIAL ASSISTANCE



fms-malaysia.org



[FMSA.Malaysia](https://www.facebook.com/FMSA.Malaysia)



[youtube.com](https://www.youtube.com)

MEMBERSHIP PRIVILEGES

LEARN MORE

Visit fms-malaysia.org

CME & WORKSHOP

Invitation to attend CMEs and workshops organised by FMSA.

WELFARE BENEFIT*

Providing welfare support/ aid to assist members in need.

CAREER PATHWAY

Advice and assistance will be available for members who wish to advance their career in a specific area of interest.

NETWORKING PLATFORM

Provides an extensive platform for networking and connecting Family Medicine Specialists across public-private sectors.

CO-AUTHOR & REVIEWER

Invitation to become co-authors or external reviewers for Clinical Practice Guidelines, books or articles published in the Malaysian Family Physician (MFP) journal.

PUBLICATION DISCOUNT

Discount on publication fee at MFP journal.

GLOBAL NETWORK

Exclusive WONCA benefits for FMSA members.

SPIRIT OF TOGETHERNESS

Represents the united voice of the Family Medicine fraternity in the country.

*Terms and conditions applied with pending approval by the committee.

OTHER BENEFITS



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