

## CHRISTMAS GREETINGS

Wishing to you and family

# MERRY CHRISTMAS



**PRESIDENT  
MR JOHN C.P. CHIANG,  
BOARD OF MANAGEMENT,  
EXCO & SECRETARIAT**

29 NOVEMBER 2017

## LAUNCHING CEREMONY OF CHILDREN PLAYGROUND BY NATIONAL LANDSCAPE DEPARTMENT



BIM President, Mr John C.P. Chang attended the Launching Ceremony of Children Playground on 14 November 2017 under invitation of the National Landscape Department. The event was held at Dewan Serbaguna, Aras 1, Blok 2, Menara Seri Wilayah, Kementerian Wilayah Persekutuan, Presint 2, Putrajaya. It was also attended by Past President Dato' Ismail bin Ngah.

The event was officiated by Tuan Haji Esa bin Ahmad, Director General of National Landscape Department.

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**PANEL MEMBER AT MONASH HEALTHCARE CONFERENCE 2017 ON  
HEALTHCARE LEADERSHIP, INNOVATION AND IMPROVEMENT**



**BIM President Mr John C.P. Chang was invited as Panel member at  
Monash Healthcare Conference 2017 on Healthcare Leadership,  
Innovation and Improvement**

## ABOUT MEMBERS

### PHARMACISTS COME TO THE RESCUE OF FLOOD VICTIMS

The Star, 11 November 2017

GEORGE TOWN: It is said that disasters tend to bring people of all walks of life together, and it was no different in Penang after the state experienced one of its worst floods.

Aid has been pouring in from all sides. The Malaysian Pharmaceutical Society (MPS) Penang Branch sprang into action shortly after the floods swept the state.

MPS Penang Branch chairman Gina Koay gathered as many members as she could and ordered medical supplies to help those affected on Sunday, a day after the floods.



“It all started when we saw messages seeking help for medical supplies in certain areas.

“We immediately ordered basic necessities such as first-aid supplies and basic medicine for minor ailments, and decided to reach out to people in areas such as Sungai Pinang on the island and Tasek Gelugor on the mainland.

“We contacted the people in charge in those areas and informed them that we would bring the medicine and provide our services.

“We provided blood pressure checks and checked minor ailments, as well as provided counselling to the flood victims,” she said yesterday.

Koay said since Monday, the relief squad had provided 10 sessions at various places all over the state.

“Between five and eight pharmacists join in each time. They are from the private sector and government hospitals,” she added.

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## FREE TO ALL : ARCHITECT-MEET-THE-PUBLIC SESSION



**PAM** PERTUBUHAN AKITEK MALAYSIA  
MALAYSIAN INSTITUTE OF ARCHITECTS



### ARCHITECT-MEET-THE-PUBLIC SESSION

This **free public service** by Pertubuhan Akitek Malaysia (PAM) is to help members of the public who may need advice regarding housing and property matters.

This public service will be held on:

Date	<b>9<sup>th</sup> DECEMBER 2017 (Saturday)</b>
Time	<b>9:30am to 12:30pm</b>
Venue	<b>Level 3 @ PAM Centre, No 99L, Jalan Tandok, Bangsar 59100 Kuala Lumpur (next to NSTP Building)</b>
Contact	<b>+603 2202 2866 / Email: <a href="mailto:madelineham@pam.org.my">madelineham@pam.org.my</a></b>

Members of the public who need advice, on a one-to-one basis, are to contact PAM at Tel: 03-2202 2866 OR email to: [madelineham@pam.org.my](mailto:madelineham@pam.org.my) for an appointment to meet our Architects

This Architects-Meet-The-Public service is part of PAM's Community Programme and contribution towards the public Representatives from the Association of Consulting Engineers Malaysia (ACEM) will also be present to answer your queries

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## GENERAL KNOWLEDGE

### MANAGE YOUR PRESSURE

**The Star, 1 November 2017**

**PETALING JAYA:** Stroke, heart attack, heart failure, kidney failure, going blind. This is what you risk if you have uncontrolled high blood pressure, otherwise known as hypertension.

And don't think it's an uncommon condition.

The Health Ministry's National Health & Morbid Survey 2015 revealed that one in three Malaysians has hypertension.

And that's not all. Experts estimate that nearly one-third of those who have high blood pressure do not realise they have it as the disorder doesn't usually result in symptoms, until the pressure gets too high.

And when pressure gets too high, it may be too late.

Extremely high blood pressure can give rise to:

- Severe headache
- Difficulty breathing
- Irregular heartbeat
- Chest pain
- Pounding in your chest, neck, or ears
- Visual problems
- Blood in the urine
- Fatigue or confusion

If such symptoms occur, see your doctor immediately as it may be a warning of an impending heart attack or stroke.

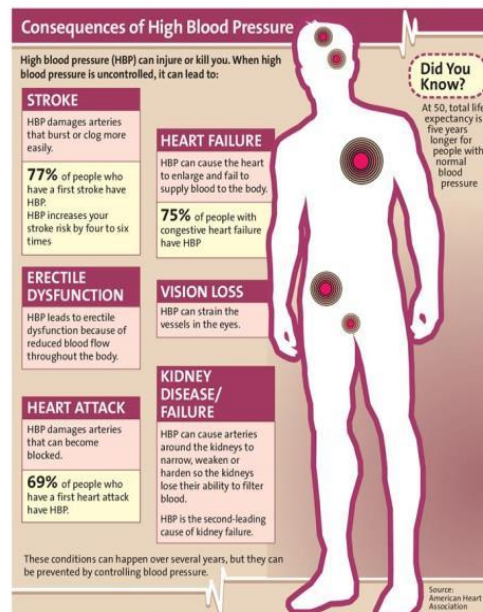
High blood pressure can be categorised into two types: primary (essential) hypertension and secondary hypertension.

Primary hypertension is by far the more common of the two, with more than 90% of those with high blood pressure having primary hypertension. There's no identifiable cause, and it tends to develop gradually over many years.

In secondary hypertension, there's an identifiable cause, which may include:

- Thyroid problems
- Kidney problems
- Certain defects in blood vessels you're born with
- Obstructive sleep apnoea
- Adrenal gland tumours
- Certain medications, such as birth control pills, cold remedies, decongestants, over-the-counter pain relievers and some prescription drugs
- Illegal drugs, such as cocaine and amphetamines
- Alcohol abuse or chronic alcohol use

In contrast to primary hypertension, secondary hypertension tends to appear suddenly and blood pressure numbers are usually higher.



## Who's at risk?

There are various risk factors for hypertension, and these include:

- Age – The older you are, the higher the risk.
- Family history – If a family member has hypertension, you're more likely to develop it.
- Overweight or obese – Weight appears to be a factor. The more you weigh, the higher the risk.
- Sedentary lifestyle – People who are not active appear to be more at risk.
- Tobacco use – Smokers have a higher risk of hypertension. Not only that, those who are exposed to secondhand smoke also have a higher risk.
- Too much salt – Too much salt in your diet is a risk factor for hypertension. This may be because salt leads to fluid retention in the body, which increases blood pressure.
- Too little potassium – Potassium helps balance sodium in the body, so too little results in accumulation of sodium, which in turn leads to high blood pressure.
- Too little vitamin D – Why this is a risk factor is uncertain. However, experts think that vitamin D has an effect on an enzyme in the kidneys that affects blood pressure.
- Too much alcohol – Drinking more increases the risk of high blood pressure.
- Stress – Too much stress increases risk.
- Certain chronic conditions – Kidney disease, diabetes, sleep apnea, these can all lead to hypertension.
- Pregnancy – In certain women, pregnancy may cause hypertension


## Know your Numbers

**1 in 3** Malaysians has high blood pressure ... and many don't even know they have it.

Knowing what your blood pressure (BP) numbers are and what they mean is the first step to keeping them in check and preventing a "blow-out"

**Systolic Pressure**  
The top number measures the pressure in the blood vessels when the heart beats.


**Diastolic Pressure**  
The bottom number measures the pressure when the heart rests between beats.



**What your numbers say about your blood pressure health.**

For healthy adults, the optimal blood pressure is 120/80. If your BP is too high, your doctor may recommend lifestyle change and/or medication

Blood Pressure	Systolic	Diastolic
Normal	<120	<80
High-Normal	120-139	81-89
High	>140	>90



### Five steps to control blood pressure

Unlike some diseases, we do not have any great control over, hypertension can be managed, and if it is managed well, we can minimise complications.

#### Step 1 – Find out your numbers

It's up to you to know your numbers. Get it checked by your doctor first, then monitor regularly on your own.

#### Step 2 – What's your plan

If you do have high numbers, devise a strategy with your doctor as to how you can lower blood pressure. And stick to the plan.

#### Step 3 – Make the necessary lifestyle changes

There are lifestyle factors that can help you lower your blood pressure. These include:

- Eat healthier – More grains, vegetables and fruits please. Cut down the fat.
- Lose weight – Even 10% will do wonders.
- Reduce salt
- Get active
- Reduce alcohol, if you drink.

#### Step 4 – Monitor regularly

Your own home blood pressure monitor can be had without putting too much of a dent in your bank balance. It's a wise investment.

#### Step 5 – Take your medications

If you have been prescribed drugs to control your blood pressure, TAKE THEM. Don't attempt to adjust dosage or times taken a day without consultation with your doctor!



## CHECK IF YOU REALLY NEED ANTIBIOTICS

The Star, 6 November 2017

**PETALING JAYA:** “There’s data everywhere in the world to show that the more you use antibiotics, the higher the bacterial resistance towards antibiotics,” said Sungai Buloh Hospital Infectious Disease head Datuk Dr Christopher Lee (**pic**).

Antibiotics are only useful for bacterial infections, not viral infections.

Dr Lee explained that viruses are the most common cause of infections, and that antibiotics have no direct impact on them.

“The most common illness that anyone gets as they grow up would be the common cold.

“You will develop sniffles, have a little bit of fever, you feel miserable for a few days, your voice sounds croaky, but after that you get better. All these common cold symptoms we can lump it under the broad category of upper respiratory tract infections (URTI),” he said.

He shared that 85% to 90% of URTI are due to viruses, hence there is no need to consume antibiotics because of it.

“I want to remind people that fever doesn’t necessarily mean infection, and infection doesn’t always arise from bacteria.

“Even for bacterial infections, only some of them require the use of antibiotics. Some are so mild that you can recover by yourself,” he said.

“For example, a pimple is an infection of your pore. But do you need antibiotics? No. With good hygiene, it will clear by itself.”

He explained that not every illness requires the use of antibiotics.

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**Dr Lee: 'we need to use antibiotics at the right time, with the right dosage, and for the right duration.'**

“Most sore throats tend to be due to viruses. With a normal viral infection, by day three or so, the fever has started coming down. If so, as a general rule of thumb, you do not need antibiotics,” he said.

“If you cough when you contract an URTI, it can take up to 10 days for the cough to subside. Taking antibiotics doesn't make it go away faster, because the throat takes time to recover from that viral infection,” he said.

Dr Lee added that patients should look at the severity of the symptoms rather than their duration as a guide to whether it is a bacterial infection.

He said if the cough is persisting but its symptoms are not getting any worse, it may not be a cause of concern.

“These suggestions are for patients who don't have any other illnesses. However, if you are on chemotherapy for instance, or if you're on steroids, this advice doesn't hold for you,” he said.

Over time, Dr Lee warned, the continued overuse and misuse of antibiotics may lead to antibiotic resistance.

“One common bacteria called streptococcus pneumoniae, which causes chest and throat infection, is treated by a common class of drugs called macrolide. Examples of this class would be erythromycin and azithromycin.

“In the past, up to 90% of this bacteria will be killed by macrolide. Now the sensitivity levels have dropped. The original resistance level of about 10% has now been increased to about 38% over the last 10 years,” he noted.



He said that it is disconcerting that older antibiotics are no longer as effective, especially as the development of newer antibiotics has slowed down.

“In the past, we were able to get away with bacteria developing resistance towards antibiotics because there's always some new antibiotic that will come along,” he said. “But for the last 10 to 15 years, the pipeline is getting dry. There are very few new classes of drugs.”

## MIND-BOGGLING GLUTEN

The Star, 8 November 2017

### Comparison of gluten-related disorders

	Non-coeliac gluten sensitivity	Coeliac disease	Irritable bowel syndrome	Wheat allergy
<b>Colonic manifestations</b> 	Diarrhoea Abdominal pain Bloating Constipation Nausea Vomiting	Diarrhoea Abdominal pain Bloating Constipation Nausea Vomiting	Diarrhoea Abdominal pain Bloating Constipation Mucous Discharge Dyspepsia Early satiety	Diarrhoea Abdominal pain Bloating Constipation Nausea Vomiting
<b>Extra-colonic manifestations</b> 	Headache Migraine Foggy mind Fatigue Eczema-like rash Myositis Numbness Psychological changes	Anemia Osteoporosis Neurological disturbances Pubertal delay Dermatitis herpetiformis Foggy mind Lymphoma	Major depression Anxiety Somatoform disorder Fibromyalgia Temporomandibular disorder Dyspareunia	Hives Angioedema Asthma Cough Post Nasal Drip Eczema
<b>Symptom Onset</b>	Hours to days	Hours to months	Unclear relation to gluten ingestion	Minutes to hours

Source: World Journal of Gastroenterology Oct 28, 2017; 23(40): 7201-7210  
Non-coeliac gluten sensitivity: All wheat attack is not coeliac

But the only known condition resulting in such symptoms after consuming gluten-laden food is coeliac disease (CD), a serious autoimmune disorder.

When patients with CD consume food containing gluten, they suffer damage in the lining of their small bowel, eventually leading to malnourishment and osteoporosis, but the condition is extremely rare in Malaysia, according to doctors.

**Many Malaysians suffer from gut-related problems such as abdominal bloatedness, cramps and/or diarrhoea, and the causes are unknown. Some have blamed their condition on non-coeliac gluten sensitivity, but is this true?**

KUALA LUMPUR: Many people who suffer from unknown causes of abdominal pains and chronic diarrhoea have blamed the symptoms on gluten, the protein found in wheat, rye and barley. They claim avoiding food with gluten helped reduce or totally alleviate their symptoms.

But there seems to be a cohort of non-CD patients who do not have the antibodies and inflammation that result in the villi damage of the small intestine and yet complain of abdominal pains and diarrhoea.

Since scientists and doctors have not been able to find the cause, some people have even asked if non-coeliac gluten sensitivity is real and deemed these symptoms psychosomatic.

In recent years, researchers have begun to acknowledge non-coeliac gluten sensitivity, although there are still many unanswered questions and difficulties in pinpointing the bio-markers for diagnosis.

The first clinical cases published on individuals with gluten sensitivity with no coeliac disease were in the mid-1970s.

Young to middle-aged women had unresolved abdominal pain, discomfort, bloating, altered bowel habits and fatigue despite extensive gastrointestinal investigations that were all negative and coeliac disease was not found.

With various treatment options failing, an empirical trial of a gluten-free diets led to remarkable improvement in clinical symptoms, with subsequent relapse when gluten was reintroduced, the *Nature Reviews*, Volume 12, Sept 2015 (page 517) reported.

While the study was met with some scepticism, further clinical studies led experts in gluten-related disorders to come to a consensus in 2011 and identify a new clinical entity called “non-coeliac gluten sensitivity” (NCGS) for patients without allergy or an autoimmune condition who manifest symptoms similar to those seen in CD when they consume food with gluten.

NCGS is defined as gluten sensitivity because symptoms are relieved by gluten withdrawal, and re-appear upon introduction of gluten.

However, subsequent studies showed no specific or dose-dependent effects of gluten.

Instead, they implicated fermentable oligosaccharides, disaccharides, monosaccharides and polyols (Fodmaps) for the symptoms.

Fodmaps are a collection of short chain carbohydrates and sugar alcohols found in foods naturally or as food additives.

They include fructose (when in excess of glucose), fructans, galacto-oligosaccharides (GOS), lactose and polyols (eg sorbitol and mannitol).

The current question researchers are asking is whether NCGS should be a subset of Irritable Bowel Syndrome (IBS) or an entity in itself.

IBS is a common disorder that affects the large intestine. The signs and symptoms include cramping, abdominal pain, bloating, gas, and diarrhoea or constipation, or both.

The cause of these symptoms is unknown.

The “non-coeliac gluten sensitivity: piecing the puzzle together” report of the *United European Gastroenterol Journal* (2015 Apr; 3[2] 160–165) revealed that “without convincing, reproducible results from clinical trials showing effects on inflammatory or immune markers, NCGS should be regarded as a sub-group of IBS and distinct from coeliac disease”.

Lowering dietary intake of Fodmaps continues to be the first-line therapy for patients experiencing gastrointestinal (GI) symptoms, it said.

“The use of dietary gluten restriction in the management of gut symptoms should be done under dietetic supervision after exclusion of coeliac disease.

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“The existence of NCGS remains unsubstantiated and more definitive research is needed to fulfil our understanding,” it stated.

It also said that much research is still needed to define and find out the actual prevalence of NCGS, and whether a broader NCGS group outside of IBS specifically exists.

The latest gluten disorder report, “Non-celiac gluten sensitivity: All wheat attack is not celiac” in *The World Journal of Gastroenterology* (Oct 28, 2017; 23[40]: 7201-7210) published online called for a review of current distinctive diagnostic criteria that distinguish features of NCGS and other gluten related disorders, and comes up with identification of biomarkers selective or specific for NCGS.

First, CD and wheat allergies need to be excluded as possible diagnoses, and beyond this, NCGS often carries an extensive and relatively broad set of symptoms which affects diverse organ systems, it said.

While symptoms of NCGS could be very disabling, the onset of the symptoms after gluten consumption can also vary widely, appearing hours to even days.

The timing of NCGS symptoms resolution may also vary widely.

Studies have suggested female to male prevalence ratio of between 3:1 to 5.4:1, indicating a female predominance in NCGS.

The report also suggested an overlap between IBS and NCGS since most of the gastrointestinal symptoms in NCGS resemble IBS, including abdominal pain/discomfort, bloating, diarrhoea and constipation.

There is also debate as to whether a gluten-free diet can help resolve symptoms in IBS after excluding CD, as clinical trials have shown that a gluten-free diet can reduce symptoms in patients with diarrhoea-predominant IBS, it said.

This is despite recent research suggesting that a low Fodmaps diet, regardless of gluten content, improves symptoms in IBS.

Given the close symptomatic resemblance between NCGS and IBS, prevalence estimates may be unclear as patients with NCGS could be mislabeled as IBS, said the report.

With the inconclusive nature of the studies carried out on NCGS, the symptoms that these patients complain about still require more investigations, and answers.

## PEOPLE SAY AVOIDING GLUTEN DOES HELP

**The Star, 8 November 2017**

A RETIREEE in her 50s who would like to be known only as Lee said she avoided gluten food after she was diagnosed with Crohn's disease in mid 1990s as she suffered stomach cramps and non-stop vomiting.

"The pain could last for hours or more than a day until I started purging," she said.

She had gone for two surgeries to remove sections of her big colon which were ulcerous.

She said that medication did not work for her and she stopped taking it.

"I learnt through experience that I should avoid wheat products if I didn't want to be sick.

"So, *mee, ramen, udon* and bread are out for me," she said.

Lee said flare ups could occur anytime and they were mostly food related.

Besides gluten food, she also avoids milk as she is also lactose intolerant, and cannot take acidic and high fibre food.

Surprisingly, meat is fine with me," she said.

She said she had a bad flare up again in early 2015.

"I couldn't get out of bed due to severe cramps, couldn't eat, and kept throwing up," said

Lee, who quit her job so she could manage her diet better.

An American trainer based in Malaysia who wanted to be known only as Evelyn, 66, said she started having body rashes, itchiness, abdominal bloatedness and diarrhoea 20 years ago and doctors could not diagnose her condition despite various tests done on her until one day her gastroenterologist suggested that she avoid gluten.



Defeat the wheat: Angeline having a meal without gluten – a plate of roasted pumpkin salad during lunch at a hotel in Kuala Lumpur□

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“I stopped running to the bathroom after 40 minutes of eating. I also don’t have anymore headaches, rashes and fatigue,” she said.

After getting advice from nutritionists, she started preparing most of her food and identifying restaurants she could go to.

Angeline Arumugam, 32, a special officer in a company dealing in power generation in Kuala Lumpur, said her symptoms started more than a year ago.

“Whenever I eat food with gluten, I get indigestion and feel lethargic. I get brain fog later and suffer from mood swings.

“I also get skin rashes on my legs a day or two later,” she said. She said she did a food diary and started noticing that the symptoms occurred when she ate food with gluten in large portions.

“I can eat a bit of capati but not cakes or pasta,” she said.

She said blood tests, endoscopy and biopsy were taken and the results were normal except for mild gastric.

Even with rice cooked in the same water as wheat noodles, or wheat added in gravy, he would get an immediate allergic reaction.

Putri Siti Nordiyana Mohd Zain, 31, said she started going on a gluten-free diet after her son Muhammad Iman Daim Mohd Norshawal’s eczema condition did not improve.

Her son, Daim, now 21 months old, started having eczema when he was four months old, and she went off gluten when he was six months old as she was breastfeeding him.

“Any cookies or cakes I make from scratch,” she said.

She said that eczema has a lot to do with gut health and gluten affects the gut health.

“He flares up when I eat out. I also avoid processed food and anything bottled,” she said. – **By Loh Foon Fong**

## HUNT FOR MING DYNASTY ADMIRAL ZHENG HE'S LOST TREASURE SHIP HEATS UP IN INDIAN OCEAN

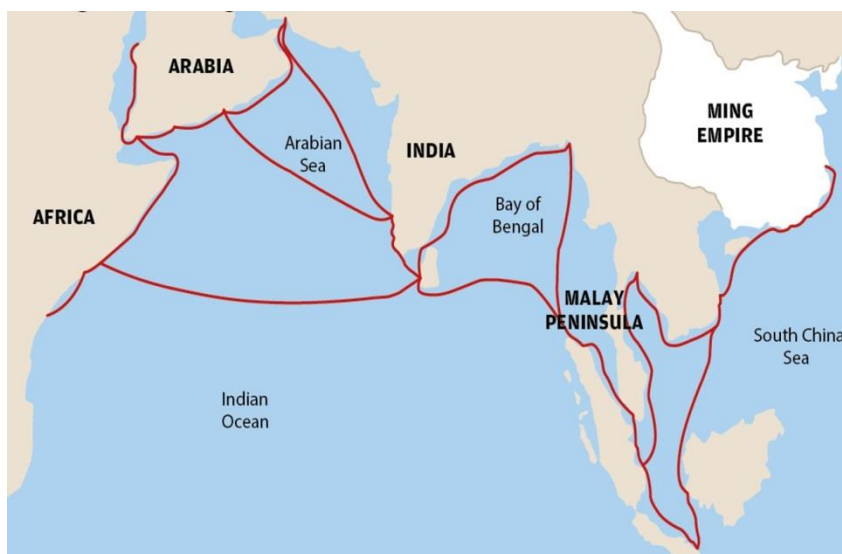
The Star, 9 November 2017

Study off coast of Sri Lanka, where massive vessel that was part of Chinese adventurer's fleet sank 600 years ago, has delivered 'positive results'

During an epic naval battle between Chinese and local forces off the coast of Sri Lanka more than 600 years ago, a massive treasure ship laden with gold, precious gems and religious artefacts was scuppered and sank to the bottom of the Indian Ocean.

According to the history books, the vessel (or vessels – no one knows for sure exactly how many ships might have sunk) was part of the fleet of Chinese admiral Zheng He, one of the greatest maritime adventurers of all time. But while stories of his exploits abound in Chinese texts, no hard evidence has ever been found to prove the existence of his ships.

That, however, could be about to change, as researchers are set to embark on an archaeological expedition that they believe could not only settle a centuries-old debate, but also yield a hoard of lost Ming dynasty (1368-1644) treasure.



Zheng was born into a Muslim family in 1371. Castrated in his youth, he served as a eunuch in the imperial court before becoming a mariner and explorer. Between 1405 and 1433, he led seven expeditions, spreading Chinese influence across half the globe, from Southeast Asia to east Africa.

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Sometime between 1410 and 1411, Zheng launched an attack on the island of Ceylon, the former name of Sri Lanka.

At the time, China had the world's most powerful naval force. Zheng's fleet comprised more than 300 vessels, of which about a fifth were "treasure ships". Such vessels traditionally set sail laden with gold, silver, porcelain and silk as gifts to foreign leaders from the emperor, and returned to China with precious stones, ivory and other exotic valuables given in return.



According to Chinese historical records, the massive ships measured up to 127 metres in length and had nine giant masts. Some critics, however, have questioned such claims, arguing that even with 21st century design techniques, building a vessel of such dimensions entirely out of wood would be almost impossible.

Since 2015, a team of scientists and archaeologists funded by the Chinese government and using advanced military-grade sensing equipment, has conducted multiple surveys of the sea floor along the Sri Lankan coastline in the hope of locating the sunken treasure ship. The hope now is that the traces of evidence they have found can finally lead them to their goal.

In an article posted on the website of the Institute of Acoustics under the Chinese Academy of Sciences in October, the researchers said their latest investigations had produced "positive results", which could mean they have located possible shipwreck sites or even discovered relevant artefacts.

Encouraged by those findings, Chinese government scientists and archaeologists from Sri Lanka would launch a new round of investigations later this month, a member of the team told the *South China Morning Post*.

"The investigation is still at a primitive stage," said Professor Prishanta Gunawardhana from the department of archaeology at the University of Kelaniya and the lead researcher on the Sri Lankan side.

"A new study will take place in two weeks," he said on Wednesday.

"We will use some advanced equipment brought over by our Chinese partners", including a synthesised aperture sonar system capable of producing extremely high resolution images of underwater targets, he said.

The mission will be led by Professor Hu Changqing, director of the Shanghai Acoustics Laboratory at the Chinese Academy of Sciences. Hu has been involved in military projects and developed many new technologies for the Chinese navy, including a passive sonar system that allows submarines to avoid dangerous suboceanic currents. He could not be reached for comment.

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To prevent it being compromised by treasure hunters, the precise details of the research project have been kept a closely guarded secret, according to the scientists involved.

Zhu Min, a researcher at the Institute of Acoustics in Beijing who has close knowledge of the project but is not directly involved, said China would provide a host of cutting-edge equipment for use in the mission, including Jiaolong, or Sea Dragon, a submersible capable of operating at depths of more than 7km.

“If the water allows for the operation of an optical observation device, we can send the Jiaolong [which can carry up to three people] down for a close-up look at the wreckage and retrieve samples for laboratory analysis,” he said.

If visibility was poor or currents made it too risky for a manned mission, the researchers could send down specialist deep sea robots to survey the site, Zhu said.

If the temperature and salinity are right, it's possible the ship's wooden structures could have survived for six centuries,” he said.

“The biggest challenge is to separate those from fake targets such as rocks or other man-made debris ... [that have] outlines extremely similar to the remnants of a ship.”

Since 2010, the Chinese government has funded numerous research expeditions along the possible routes taken by Zheng's fleet – across the Middle East and east Africa – in a bid to provide concrete evidence of China's maritime glory. The project in Sri Lanka is the only one still ongoing.

Niu Jianqiang, a professor of Ming dynasty history at Henan University in central China, said an archaeological breakthrough would help to settle some major questions.

Earlier finds, such as the discovery in Nanjing of the remnants of a dry dock matching the dimensions of one of Zheng's ships, and a giant vessel's rudder found in Zhejiang, were not in themselves indubitable evidence of the existence of the legendary fleet, he said.

Though accounts vary, the sea battle in which Zheng's ship (or ships) were lost did not start well for the adventurer. Despite the size and power of his fleet, he was met with huge resistance from a force of about 50,000 people summoned by Ceylon's King Alakeshvara.

According to one account, Zheng tactically deserted the naval battle and managed to land with 2,000 elite soldiers. They then cut through dense forest and launched a surprise attack on the king's palace and took him hostage.

A century later, Chinese writer Yang Rong reflected on Zheng's victory in a poem:

“Straight-away, their dens and hideouts we ravaged, and made captive that entire country, bringing back to our august capital, their women, children, families and retainers, leaving no one.”

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As Yang wrote, Zheng returned to Beijing with the “disobedient” King Alakeshvara and his family and presented them to Ming emperor Yong Le. The emperor showed mercy and allowed them to return to Ceylon, but a new king had already been installed in his former kingdom.

While the Chinese researchers are optimistic about the upcoming search, their efforts to date have not been entirely trouble-free.

Earlier studies off the coast of Sri Lanka, which is close to several major shipping lanes, had been closely monitored by Indian officials, a researcher said on condition of anonymity.

“India treats the Indian Ocean as its home water. Any activity undertaken by China here is going to put nerves on edge, but we have got used to it,” the researcher said.

India’s foreign ministry did not respond to the *Post’s* request for comment.

## DEBUNKING MYTHS: NO SUSHI DURING PREGNANCY

The Star, 13 November 2017

**PETALING JAYA:** Jane Hong, who is expecting her first child, listened to the advice of her friends and relatives not to consume sushi when she first got pregnant.

“My older friends and relatives were the ones who told me about the dangers of eating sushi,” said Hong, who is seven months pregnant.

The 35-year-old human resource executive explained that before she got pregnant, she used to consume sashimi with sake once a week but stopped taking it after she got pregnant as she was not able to consume alcohol to supposedly “kill the bacteria” from the fish.

However, she said her Western and Chinese doctors made no mention about foods that she could not eat.

“I asked the doctors about it but they told me that I could eat anything. It is only the elderly that kept telling me that such foods contain bacteria,” she said.

Despite doctors telling her that it was safe, she still decided to stay away from it until she gives birth.

“For the sake of the baby’s health, I would rather hold out for nine months, whether there is any truth to it or otherwise,” she said.

Toh Cai Juan, who is eight months pregnant, also said doctors made no mention about sushi but she does not consume it as the elderly folks in the family had advised her against it.



Toh: ‘Since the elderly people strongly advised me against taking cold foods, I decided to stay away

My doctor told me I could eat anything.

“But since they (elderly people) strongly advised me against taking ‘cold’ foods, I decided to stay away,” the 33-year-old said.

According to the UK National Health Service (UK NHS), sushi and other dishes made from raw fish are safe for consumption for pregnant women, depending on what type of fish it is.

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University Malaya Medical Center senior consultant obstetrician and gynaecologist Prof Dr Jamiyah Hassan concurred with the advisory.

“It is not that you can’t consume sushi, you can, but freshness, type of fish, and the preparation methods are of the essence,” she said.

Dr Jamiyah said the utensils and surfaces when preparing sushi must have no cross-contamination.

“If you prepare raw meat, you cannot use the same utensils to cut raw fish, because the raw fish can get contaminated from it,” she said.

Dr Jamiyah urged pregnant women who want to consume sushi to eat it at a place where hygiene practices are impeccable.

“Choose properly where you eat your sushi, don’t eat your sushi at a roadside store because contamination is high; this is the same with raw meat,” she said.

Dr Jamiyah also said the selection of fish was also important as certain fish contain high levels of mercury.

“There are some guidelines, but essentially salmon has very low mercury levels,” she added.

With regard to shellfish, Dr Jamiyah said it was not recommended, but it again came down to how the food was prepared.

“Fresh lobsters and shellfish sashimi have to be taken with caution; it boils down to the preparation method and the person preparing it,” she said.

Meanwhile, Pantai Hospital Kuala Lumpur consultant obstetrician and gynaecologist Dr Premitha Damodaran said sushi, which is made from salmon, if it is not frozen in advance, may be contaminated with anisakis, a parasitic nematode.

“These are the ones, whether pregnant or not, that will give you problems.

Dr Premitha also advised pregnant women to completely avoid shark meat as it contained toxins.

She also said the sushi and bacteria myth probably started many generations ago and was passed down from one person to another, hence, the information got diluted as time passed.

“It is our perception that if you cook something, you destroy the bacteria and toxins in it, but if it is raw, then the bacteria remains,” she said.

Dr Premitha said that if pregnant women are not careful with consuming raw foods, listeriosis from food poisoning can lead to miscarriages or the baby dying in the womb.

The US Food and Drug Administration (US FDA) reported that during pregnancy, a pregnant woman’s immune system is weakened, which makes it harder for the body to fight off harmful food-borne microorganisms that cause food-borne illnesses.

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Dr Premitha explained that a pregnant woman's stomach is much more sensitive compared to a normal person's as the intestines and acidity levels are functioning at a different level. "When you get a stomachache, you may vomit or get diarrhoea, and we don't want to instigate premature labour," she said.

"We want things to stay quiet in the stomach because incidents like this would irritate the uterus and may lead to premature labour, and we don't want that to happen."

However, she said normal food poisoning is considered quite common for pregnant women, and major food poisoning caused by listeriosis where the mother loses the baby is "very rare".

She also said pregnant women are free to eat anything and everything provided it is done in moderation.

"You don't have to eat for two; you eat for one person.

"If you have one baby, and are of a healthy normal weight of 50 to 60kg in the beginning of your pregnancy, then in your second trimester, you just eat 200 to 250 calories more, and in the third trimester, you eat an additional 350 calories extra. That's all," she said.

Therefore, the myth that eating sushi should be avoided by pregnant women has been debunked, as Dr Premitha has advised that the rule of thumb for eating sushi is to go to a decent restaurant.

## CAN I CONTRACT STI FROM A TOILET SEAT?

The Star, 17 November 2017



Don't worry: Thanks to modern toilet flushing systems, germs and microbes now spread further away from the toilet bowl, possibly beyond the bathroom.

**This is a question that has been asked over and over, but is there really a risk of getting a sexually transmitted infection from the loo?**

**PETALING JAYA:** Do a quick Internet search on “sexually transmitted infections (STI)” and “toilet seats” and you will find pages of results.

People can't seem to stop asking the question.

Even when we think we know the answer, we are still double guessing ourselves.

The fact that you are reading this shows our need to have the claim of contracting STI from sitting on a toilet confirmed or debunked once and for all.

The quick answer is, you cannot contract STI from the toilet seat.

However, there is a lot more to it.

How did this myth start anyway? It is fascinating to note that many experts today suspect that it was probably doctors who started it.

Prof Basil Donovan, head of sexual health programme at the Kirby Institute at the University of New South Wales in Australia, believes that there is evidence showing doctors who hoped to de-stigmatise STIs in the 19th century, said that people could get it from a loo seat.

These doctors wanted to contain the spread of STIs and hoped that people would be more willing to seek treatment if there wasn't a fear of judgment.



Not so easy: Dr Nor Ashikin says microbiological bad guys don't like living outside warm human tissues.

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### **Is the risk real?**

STIs such as syphilis, human papillomavirus (HPV), HIV and even pubic lice have had people hovering over toilet seats afraid that any contact with the plastic surface would expose them to the diseases.

The good news is you just need to give the seat a bit of a wipe, then relax and sit down.

“There’s basically no chance of you contracting STI from a toilet seat,” says Datuk Dr Nor Ashikin Mokhtar, a consultant obstetrician and gynaecologist.

“Any chance that does exist is so negligible that it’s not worth devoting much brainpower to it,” adds Dr Nor Ashikin, who writes the column *Women’s World* for *Star2*.

The fear, while understandable, may primarily come from not knowing how microbes work.

“Most of these microbiological bad guys don’t like living outside nice and warm human tissues. They spread much better from skin-to-skin contact and through bodily fluids than from hard toilet seats,” she explains.

Even viruses like herpes, chlamydia and gonorrhoea can’t live long outside the human body.

### **How easy is it to get an STI from a toilet seat?**

Not easy at all. In fact, you would have to “work” very hard to get an STI from a hard plastic surface.

“You would basically have to rub an open wound, or the mucous membrane of your genitals, all over the fluids left there on the seat seconds after they have been there,” says Dr Nor Ashikin.

That certainly paints a mental picture.

### **Don’t underestimate your body**

Our skin is an excellent barrier to disease.

“In addition to our skin, our urethral and genital tract mucosa are also good at preventing bacteria and viruses from entering our bodies,” explains Dr Nor.

Even if you have a wound on your buttocks, the risk of getting a disease is still very low.

### **What you should worry about**

Bad news for germophobes, bacteria and viruses are everywhere and the toilet seat isn’t the only place that is covered with them.

Thanks to modern toilet flushing systems, germs and microbes now spread further away from the bowl, possibly beyond the bathroom.



A study published online by the journal *National Center For Biotechnology Information* found that the more you flush the toilet, the more microbes get disseminated into the air.

But should you be overly worried?

“Studies consistently back up the no-big-deal nature of sitting bare butt on a toilet seat,” says Dr Nor Ashikin.

Just focusing on the toilet seat, she says that streptococcus is a common bacteria found there.

Also referred to as strep throat, it can cause fevers, sore throats and impetigo – a skin infection that usually affects children.

Another bacteria that is commonly on a seat is staphylococcus, which can cause skin infections such as boils, impetigo and cellulitis.

“Other kinds of common bacteria include E. coli and shigella that can cause food poisoning,” explains Dr Nor Ashikin.

How do you avoid getting sick from these bacteria? Easy, by practising good personal hygiene.

“You can carry antiseptic wipes, if you feel so moved,” Dr Nor Ashikin adds.

### Just wash your hands

Washing your hands properly can prevent a whole lot of diseases. The operative word here being “properly”.

“Handwashing is one of the most important ways to prevent the spread of infection,” says Dr Nor Ashikin.

“According to the Centers For Disease Control, it can prevent about 30% of diarrhoea-related sicknesses and about 20% of respiratory infections like the flu,” she says.

While it is rudimentary exercise, hand-washing is not something we get right all the time.

A study done a few years ago by the Michigan State University found that only 5% of people wash their hands the right way after going to the toilet.



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Wash your hands thoroughly with soap, suggests the World Health Organisation (WHO) and make sure you get to every part of your hands.

Sing (or hum) *Happy Birthday* twice and you would have spent the right amount of time cleaning your hands, states the WHO. Then dry your hands well.

Some people may feel that using warm water would get rid of more germs, but this may be more psychological than actual.

Rutgers University-New Brunswick found that water temperature made no difference in terms of removing germs.

### **Just seek help**

If you think you have an STI, get help quickly.

Instead of blaming the toilet seat, you should get yourself tested.

Your doctor can do a physical exam, a Pap smear or conduct blood or urine tests to determine the STI you have.

“Don’t try to treat an STI yourself,” cautions Dr Nor Ashikin.

STIs can be contagious and even a serious health threat so you need to see a doctor immediately.

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## DON'T CHEAT GIBBONS OF THEIR RIGHT TO LIVE IN THE WILD

The Star, 21 November 2017



Gibbons have the longest arms among all primates.

We humans could learn a thing or two from our fellow primates, the gibbons, when it comes to loyalty and commitment – gibbons are the only primates that are monogamous. Oh, and they sing too – the most elaborate and complex songs among all land mammals.

There are five species of gibbons, also known as small apes, found in Malaysia. The white-handed gibbon, dark-handed

or agile gibbon, and the siamang are found in Peninsular Malaysia while Muller's gibbon and Abbott's grey gibbon live in Sabah and Sarawak.

Malaysia is also home to the biggest (siamang) and smallest (black-handed) gibbon species.

And, yes, all five species are endangered and are on the International Union for Conservation of Nature (IUCN) Red List of Threatened Species.

Nov 1 was International Gibbon Day, and to mark the occasion, the Gibbon Protection Society Malaysia (GPSM) held an awareness event at Sunway University, Selangor, to highlight the primate's plight.

"All the species in Malaysia are currently endangered under IUCN but we don't know whether they are critically endangered because there is a lack of data," says Mariani Ramli, founder of GPSM, which was established in 2016.

"For example, black-handed gibbons were estimated to number 4,000 but that was back in the 1980s."



A dusky leaf monkey at the GPSM primate rehabilitation centre, which helps rescued primates adapt back to the wild by equipping them with survival skills.

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Gibbon expert Dr Susan Lappan, currently based in Malaysia as a Fulbright visiting scholar, says the last systematic survey of primates across Malaysia that included gibbons was done in 1981.

“So even if we look at the IUCN species status review for the gibbons in Malaysia, all of the info is from Sumatra or Thailand. Some of the earlier primate research was done in Malaysia by mainly foreign researchers but then they left the country, and we don’t know why the mantel didn’t get passed to Malaysian researchers,” says Lappan, a primate behavioural ecology and conservation researcher who has been studying gibbons for 17 years in Indonesia (specifically, Sumatra and Java) and Malaysia.

Together with primate expert Dr Nadine Ruppert from Universiti Sains Malaysia’s School of Biological Sciences, GPSM and the Malaysian Primate Society are conducting long term studies within Peninsular Malaysia on the distribution of gibbons and their population size.

“We will look into how many of them are still living in certain forest fragments and whether their habitats and habitat connectivity is still suitable for long term survival,” says Ruppert, who was also at the International Gibbon Day event.

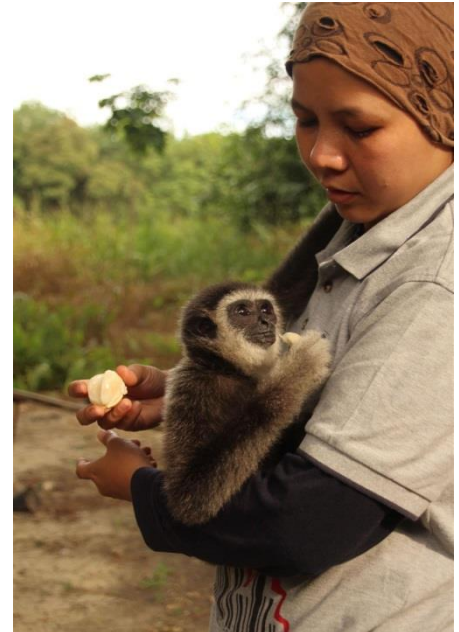
### **Threatened by the pet trade**

The major threats to the gibbon population come from habitat loss or fragmentation, fires, illegal logging, poaching, and the pet trade.

In Malaysia, the biggest concern arises from the illegal trade in wild gibbons as pets. Most people probably don’t even know that it is illegal to keep gibbons as pets and are drawn to rearing the primates because their mannerisms closely resemble those of humans.

However, in order to obtain one baby gibbon for sale, Mariani says it is estimated that 11 other gibbons are killed.

“They are the only primates that are monogamous and have strong family bonds.



Mariani with a rescued white-handed gibbon.

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“If one of them is threatened, the whole family will come to its rescue. Hunters and poachers usually take the babies because they are easier to tame. So when the parents and siblings try to protect it, they kill them,” says Mariani.

She adds that out of 20 infants that get caught, about half will die during transportation, and of those 10, probably only one will survive as a pet.

“When given the wrong milk, baby gibbons will get diarrhoea and suffer from bloating.

They will also develop rashes from wearing unsuitable diapers, leading to bleeding and death,” she says.

“Gibbons also need a home range of 2km to 3km.

“Can you imagine if you put a gibbon inside a house? They will feel so confined and restless and play around energetically, and the owners will then blame the gibbons and punish them,” she points out.

GPSM is also concerned that some local celebrities show off their pet gibbons on social media, encouraging their followers to own one as well.

“The online trade of gibbons is booming in South-East Asia now, especially in Indonesia, Malaysia and Thailand,” says Mariani.

This year, GPSM has come across about 50 online postings advertising the sale of young gibbons, with the price of a baby ranging from RM800 to RM5,000. Currently, people are not penalised for advertising such sales online; the penalty only applies to physically owning a gibbon.

Under Malaysia’s Wildlife Conservation Act 2010, anyone who hunts or keeps baby gibbons without a special permit can be fined up to RM200,000 and/or jailed up to 10 years.



## Creating awareness is key

“Personally, I feel that no law will completely prevent a crime but we hope instead to raise more awareness among the public,” says Mariani.

“GPSM’s approach is through education and awareness. We realise that students and teenagers are very active on social media.

“Once they realise that this is wrong, hopefully they will educate the owners or report any incident to Perhilitan (Wildlife and National Parks Department).”

She says that many countries in South-East Asia have gibbon conservation programmes but not Malaysia.

“We have applied for a rehabilitation permit for a primate school (tentatively known as the Malaysian Primate Conservation Centre) to train confiscated gibbons to live in the wild again.



“We train them in survival skills and have mini-gyms for them to build their muscles and be able to survive in the wild,” she says.

The school is situated on a piece of land measuring just under 1ha (2 acres) in Raub, Pahang, which was donated by Puan Sri Shariffa Sabrina Syed Akil to GPSM. Shariffa Sabrina is president of Pertubuhan Pelindung Khazanah Alam Malaysia, or Peka. Six gibbons and two langurs are already undergoing rehabilitation there while GPSM waits for the permit to come through.

GPSM’s pilot rehabilitation project first started six years ago with a small piece of land in Lenggeng, Negri Sembilan.

“Malaysia has 25 species, the second highest primate diversity in South-East Asia, after Indonesia.

“Our main concern as researchers is to involve the community and use our findings to help protect the primate species,” says Ruppert, who is Universiti Sains Malaysia’s senior lecturer in primate research and conservation.

It goes back to protecting the ecosystem and environment that forms the wildlife's habitat.

"We create awareness about how to protect the forest, which is the main habitat of primates. We reach out to school children and students about what everybody can actually do.

"Start with small steps, like not wasting water, reducing your trash, and basically think about what you can do to protect the environment as a whole," she says.

## 5 THINGS YOU MIGHT NOT KNOW ABOUT GIBBONS

Gibbons, which are from the *Hylobatidae* family, are shy and elusive creatures also known as small apes.

There are 12 known species of gibbons, which are endemic to Southern Asia.

Gibbons do not have tails and sport cream, black or brown fur coats.

In the wild, they are known to live up to 25 years, foraging mainly for fruits – their favourite being fig – as well as leaves, flowers and insects.

Here are five gibbon traits:

1 They are monogamous, something which only happens in 3% of mammals, and is very rare among primates.

2 They are arboreal, meaning they spend most of their time up in the tree tops and rarely come down to the ground.

3 Gibbons move about by way of "brachiation", or swinging among the trees using their long arms – they, in fact, have the longest arms among all the primates.

4 Among all the apes, gibbons are the ones that walk the most upright and are often studied for bipedal evolution in humans.

5 Gibbons produce the most elaborate and complex songs among all land mammals. They sing in the mornings, with each session lasting between 10 and 30 minutes.

For more on the Gibbon Protection Society Malaysia, go to [gpsmngo.org](http://gpsmngo.org). The Malaysian Primate Society, which is affiliated with Universiti Sains Malaysia and the International Primatological Society, acts as a coordinator and facilitator of primate-related studies and conservation efforts in Malaysia; visit its Facebook page at [www.facebook.com/pg/malaysianprimatologicalsociety](http://www.facebook.com/pg/malaysianprimatologicalsociety).

## HOW TO KEEP BLOOD SUGAR LEVELS NORMAL AND STABLE

The Star, 22 November 2017

PETALING JAYA: Diabetic patients will be relieved to know that they need not totally remove their favourite foods from their to-eat list.

There are a few ways to achieve normal and stable blood sugar levels. Dietitian Poh Kai Ling explains how.

### What is a normal blood sugar level? Why is it important?

The normal blood sugar level, according to the Clinical Practice

Guidelines Management of Type 2 Diabetes Mellitus, is 4.4mmol/L to 7.0mmol/L for fasting and 4.4mmol/L to 8.5mmol/L two hours after food.

For pregnant women, it is 3.5 mmol/L to 5.1 mmol/L for fasting and 4.0 mmol/L to 6.7 mmol/L two hours after eating.

Everyone should try to achieve normal blood sugar levels. For those without diabetes, it is a preventive measure, while for those with diabetes, they need to do this to prevent complications.



Keeping it healthy: A quarter portion of carbohydrates, a quarter portion of protein and half portion of vegetables on a plate is recommended for healthy eating.

### Is maintaining normal blood sugar levels achievable? Are medications the only way those with diabetes can control their sugar levels?

This will depend on the type of diabetes. Type 1 diabetics need insulin.

For those with type 2, if they control their diet but still cannot achieve normal blood sugar levels, the doctor will start them on medications.

For pregnant women with gestational diabetes, they can try and control glucose levels through diet, but if this is not effective, then they will need medications.



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**What are the foods people should eat to keep blood sugar levels stable? Is there a difference in diet between those with diabetes and those without?**

If people take big portions of carbohydrates, it will cause blood sugar levels to spike. This is not good.

We recommend people to divide a normal food plate (23cm in diameter) into a quarter of rice (carbohydrates), a quarter of meat (protein) and a half plate of vegetables. A quarter portion will be equivalent to each person's palm size.

This is a stable diet and is suitable for everyone.

For those who need to control their weight, we have to tailor it to cut down on sugars and carbohydrates.

**Some say that ensuring adequate amounts of protein helps with stabilising blood sugar levels. If this is true, how much protein should one - consume?**

As explained, we should follow the quarter plate carbohydrates, quarter plate protein and half plate vegetables as a general guide for main meals.

As for the amount of protein one should consume, it is 0.8g to 1.0g of protein per kg of weight.

But to achieve a stable blood sugar level, it is not just about protein. One should also get enough good fats and fibre.

If you consume too much carbohydrates or eat more than what you need, then your blood sugar level will shoot up.

It is not just about protein, but a balanced meal. If you take too much protein, you will lack other nutrients such as those found in vegetables and fruits.

When we control our diet, we need to look at it holistically. If you just eat bread, you may not feel full, but if a sandwich has chicken or eggs, you will feel full and will likely not binge-eat.

The combination of food will also slow down sugar absorption, thus your sugar level will not spike quickly.

Eating too much of certain proteins may also lead to high cholesterol, such as meat that comes with too much fat. You may put on more weight too.

Some people think that protein and fat are not sugar and can be consumed liberally. But excessive calorie intake will cause weight gain and this can lead to insulin resistance, and eventually, difficulty in controlling blood sugar levels.

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## DEBUNKING MYTHS: CELLPHONE USE CAUSES BRAIN CANCER

The Star, 24 November 2017



PETALING JAYA: Penang-based senior consultant radiotherapist and oncologist Datuk Dr Adel Zaatar answers questions on whether the use of cellphones cause brain cancer.

### **Q: Are there any health risks related to cell phone use?**

Dr Zaatar: At this time, there is no concrete, solid evidence to suggest that the use of cell phones poses a health risk.

### **Q: Does cellphone use cause brain cancer?**

Dr Zaatar: Cellphones do not cause brain tumours. The incidence of brain cancers has not changed or increased for the last few decades, although the use of cellphones has increased tremendously in the last 20 years.

Hence, cellphones do not cause brain cancer.

### **Q: Have you come across any patients who have brain cancer as a result of frequent use of cellphones?**

Dr Zaatar: I have patients with brain cancer and although they use their cellphones like anyone else, there is no concrete, solid evidence to suggest the use of cellphones has caused the brain tumour in my patients.

### **Q: Do you have any advice on charging phones at night while sleeping?**

Dr Zaatar: When charging your cellphone at night, do not charge it on the bedside table. Charge it somewhere away from the bed.

The reason for this is when the phone is charging, the signals emitted from the phone can cause a person to have superficial sleep, not a deep sleep.

### **Q: To add to the question above, is it all right to put a mobile phone on the table next to the bed when it's turned on?**

Dr Zaatar: It is better to place the mobile phone away from the bed as the mobile phone can emit radio frequency waves which can disturb your sleep pattern.

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**Q: A hair stylist once mentioned that he had come across many people who came to his outlet with grey hair on the right side of their heads. Is there any link to cellphone use?**

Dr Zaatar: There is no evidence that cell phones can cause hair colour changes. If one is worried about using cellphones for long periods, use a hands-free kit.

**Q: How many brain cancer cases do you see a month on the average? Is there an increase of brain cancer incidence in Malaysia?**

Dr Zaatar: I see one to two cases per month on average.  
There is no significant increase in the incidence of brain cancer in Malaysia.

The Malaysian National Cancer Registry Report 2007 to 2011 reported that the total number of new cancer cases diagnosed in Malaysia during the period 2007 to 2011 was 103,507.

Of these, 46,794 (45.2%) were males and 56,713 (54.8%) were females.

There were 2,236 cases of brain cancer (including the nervous system) from 2007 to 2011.

But the prevalence has not increased in the last decade.

The incidence of brain cancer worldwide is 10.8 per 100,000 persons per year.

There is no difference in incidence between males and females. (*The world incidence and prevalence of primary brain tumours, a systemic review analysis. Neuro Oncol 2015 Jun; 17[6]: 776-783*)

**Q: What are the causes of brain cancers?**

Dr Zaatar: There are no definite causes of brain cancer. It is similar to other causes of cancers such as genetics, obesity, stress and unhealthy lifestyles.

**Q: What about neck and shoulder pain caused by the use of cellphones? Will it lead to arthritis in the long term?**

Dr Zaatar: Yes. There has been recent news over the past two years of “text neck”, which is chronic strain on the neck as people hunch over mobile phones.

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However, this is a positional problem.

The pain in the neck and shoulder is not caused by the mobile phone.

It is too early to comment if this will cause arthritis in later life.

Although the number of people using cellphones has increased significantly in the last decade, there has not been an increase in the incidence of brain cancer.

As such, there is no evidence to suggest the use of cellphones can cause brain cancer or increases the incidence of brain cancer.

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## EMPOWERING MALAYSIANS WITH COMPREHENSIVE SEX EDUCATION

Malaysia.my, 16 November 2017



***In Malaysia, public school students currently receive limited sex education, but these proactive citizens have taken it into their own hands to equip students and the Malaysian public with knowledge about sexual health, contraception, positive body image, healthy relationships, and more.***

In his fifth month of being a Teach for Malaysia fellow in a rural school in Sarawak, Victor Lam found his assistant classroom monitor missing. The young girl, who was bright and doing well in school, stopped coming to classes.

Lam later found out that the young girl had gotten pregnant.

“She didn’t even know she was pregnant,” says Lam, “until she started throwing up from the morning sickness, and she noticed a bump. She initially thought she was getting fatter.”



“Once she got pregnant, she dropped out of school, she never finished SPM. Last I heard of her she got a divorce. The husband took the kid away, and she’s just been doing odd jobs,” explains Lam.

This incident isn’t far from the ordinary. An average of 18,000 teenage pregnancies are reported annually – this equals to 1,500 teenage girls getting pregnant each month, or 50 per day.

## The state of sex education in Malaysia

Currently, Malaysian schools receive sex education in the form of the Reproductive and Social Health Education (PEERS) programme. PEERS was implemented in secondary schools in 1989 and extended to primary schools in 1994.

But PEERS does not provide comprehensive sex education. The content is incorporated into subjects such as Biology, Science, Moral Education, and Islamic Studies. According to the UKM study, it only covers a combination of two to three topics related to the physical development of children and adolescents, development of the reproductive and fertility system, and sex within the Islamic context.

“Sex education is not just necessarily focused on birth control and safe sex. It should deal with family values, psychosocial aspects, emotional issues, relationship issues, body image, positive self-esteem. These are the things we need to talk about,” says Professor Ismail Baba, executive committee member of the Malaysian AIDS Council (MAC).

The PEERS content also falls heavily upon school teachers to deliver. But without receiving training, teachers aren’t able to deliver the content effectively.

Unsatisfied with the narrow coverage of sexual education in public schools, some proactive individuals and groups have stepped in to fill the gap.

### Victor Lam

Realising that the current curriculum in schools does not meet his students’ needs, Lam initiated his own comprehensive sex education programme.

His initiative asks students to begin examining sexuality by looking at their own body image and feelings. The modules then progress to body parts, reproduction, consent, and finally, safe

sex. Lam hopes to add a module about returning to school after getting pregnant.



“So this is what I mean about comprehensive,” says Lam. “It means you cover the whole, every aspect that’s related to sexual health education. You give them information for them to make informed decisions.”

Right now, the former Teach for Malaysia fellow is working with medical professionals to set up similar sex education programmes with some of the local hospitals and clinics in Selangor.

## June Low

Originally trained as a lawyer, June Low began delivering comprehensive sex education to teenagers in 2010. Since then, her work has encompassed workshops, talks, short courses, and advocacy. Having a variety of evolving forms to deliver sex education is crucial to maintain accessibility and relevance to youth.

For example, when she saw the need for an alternative way to reach young people, she began her own sex education web series called *Popek Popek* in 2015. Low also has an art project in the works for the KL Biennale.

“If we’re static about our education, we won’t make progress. Sex education is not like math. It has to be a breathing, living subject. I try to think of new ideas, and new things, and new collaborations that can be found,” says Low.

Low is currently taking on a master’s degree to research the most effective methodology for people to deliver comprehensive sex education.

“There’s a lot more that needs to go on for nationwide sex education. They’re just saying we need to improve, we need to implement it, but no one is talking about the method. And that’s something that I would like to work on in my master’s research: how do we come up with a methodology that people can adopt to teach comprehensive sex education effectively? Specifically, lessons that are difficult, such as pleasure.”

Instead of being frustrated at the current national curriculum, Low believes this is an opportunity to create a new national sex education initiative.

“We need to look at it as an opportunity so that when we create something that’s going to be rolled out nationwide, we can at least create something that has addressed the mistakes other countries have made,” she says.

## Malaysian AIDS Council (MAC)

Malaysian AIDS Council was established in 1992, and has been delivering sex education and sexual health awareness since its inception. With 48 partner organisations across the country, MAC runs educational programmes with schools, the general public, and certain target groups including men who have sex with men (MSM), transgender communities, and sex workers. Its sister organisation, Malaysian AIDS Foundation (MAF) was set up in 2003 to raise and administer funding.

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To MAC's Professor Ismail and MAF executive director Jasmin Jalil, sex education can save lives. Their commitment to educating the public stems from a personal drive.

"I trained as a social worker. It is my responsibility to share knowledge," Ismail says. "I had very good friends when I first started who died of AIDS. So that's why I committed myself to this kind of work."

Notably, 35 percent of reported HIV/AIDS infections in Malaysia are among young people between 13 to 29 years of age. "I think if we can tackle this problem, definitely we would save a lot of money in terms of the [spending on] unwanted pregnancies, and HIV/AIDS cases," says Ismail.

### Making a greater social change

For the past two years, MAC has been in discussion with government ministries to develop and implement a syllabus on HIV/AIDS for secondary school students by 2019.

"I think we still have a long way to go in trying to convince the general public when it comes to sex education," says Ismail. "Sex education is quite taboo, especially to the rural areas."



*Professor Ismail Baba of MAC believes sex education can save lives.*

But there has been progress. Ismail recalls that 15 years ago, NGOs were not allowed to talk about condoms in schools. But with increasing awareness in the digital age, people are becoming more open.

"Suddenly one *ustazah* said 'hey, why can't we talk about condoms?' And at that time, I did not bring condoms along. But quickly I asked somebody to go buy condoms at 7-Eleven and we started to open them and talked about it. So that was a great kind of success story," he says, laughing.

The biggest difficulty for sex education providers continues to be societal resistance around discussing sex, which is affirmed in the absence of comprehensive sex education



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from the national curriculum. Still, despite this challenge, these local educators are He recalls holding a workshop with religious teachers in Sabah, not expecting to talk about condoms.

“Suddenly one *ustazah* said ‘hey, why can’t we talk about condoms?’ And at that time, I did not bring condoms along. But quickly I asked somebody to go buy condoms at 7-Eleven and we started to open them and talked about it. So that was a great kind of success story,” he says, laughing.



*Malaysian AIDS Foundation executive director Jasmin Jalil joined the organisation eight years ago, when one of his best friends was diagnosed with HIV.*

The biggest difficulty for sex education providers continues to be societal resistance around discussing sex, which is affirmed in the absence of comprehensive sex education from the national curriculum. Still, despite this challenge, these local educators are confident that their work will lead towards larger social change.

“I do expect to see resistance. But I am a firm believer that logic will prevail,” says Low. “And all we need to do is to persevere.”

# Understanding Wound Care



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**D**iabetes and its complications are an epidemic in Malaysia. The prevalence of diabetes in Malaysia is about 17.5% according to Malaysia MOH figures in 2016. Diabetic foot disease is said to affect 15-25% of diabetics in the course of their lives<sup>1,2,3</sup> and is the leading cause of non-traumatic amputations of the lower limb<sup>4,5</sup> worldwide.

## Advanced Wound Care

Traditionally, all wounds were managed the same way. There was no difference in managing an acute wound and a chronic wound. Advanced wound care had only started in the past few years in Malaysia. It actually evolved from the basic principle of traditional wound care i.e. creating a conducive environment in the wound bed for granulation and final epithelialisation. Advanced wound care addresses the many issues in chronic wounds that were not addressed in traditional wound management and moved the wound in a chronic inflammatory state towards skin closure.

The phenomenon was also fuelled by the new products that came into the market and had changed the way we manage a wound. With better understanding of chronic wounds worldwide in recent years especially on DFU, wound physicians are more focus on each obstacles to wound recovery in a specific manner.

## New Factors in Advanced Wound Management

Traditional wound management is focusing on cleaning the wound using cotton balls, normal saline, Chlorhexadine, Iodine or Eusol solution during each visit and when finished, closing it with gauze at the end. Dressings were mostly done by nurses. Slough, biofilm, necrotic and nonviable tissues are not dealt with because their roles in a chronic wound were not fully understood.

There was no treatment plan and no pro-active effort to salvage the limbs or toes. Amputation was often offered

as the first choice. Patient's nutritional status, sugar controls and other systemic diseases that negatively impact the wound healing process were not optimised.

After the wound dressings, patients come back on a PRN basis. Patients' education on off-loading, peri-wound hygiene were non-existent or poorly enforced. Hence this explains why a DFU remains at best the same if not worse. Advanced wound care management incorporates all of the above by a wound care physician with the following concepts:

**a. Moist wound healing concept:** Healing a wound is synonymous to growing a plant in a pot; the soil has to be kept moist but not wet, to keep the plant healthy. In the past, wounds were left to dry or deliberately made dry to crust, hoping that it will eventually heal. Multiple products like foams, hydrocolloid, or wound gels are available to maintain or retain moisture in the wound and continue to allow the wound tissue to granulate to support the action of moist wound healing.

**b. Biofilms:** A transparent extracellular polysaccharide matrix formed by bacteria to protect themselves that covers the entire wound bed that delays or even stagnates wound healing. At present, they make up to 80% of all chronic wounds. Most physicians are unaware of its existence. It is mandatory to have the biofilm removed in a wound for ultimate wound closure. This requires good cleaning techniques using some superoxidised cleansing solution.

**c. Enzymatic debridement:** Sloughs are stubborn and can be hard to remove. They must be removed so as not to obstruct new tissue to grow. Apart from the most effective way of sharp debridement, enzymatic debridement gel can be applied too after the sharp debridement. The gel will stay on the wound for 2-3 days before the next dressing and non-stop exerting its function in debriding the wound during that 2-3 days even though the patients are resting at home.

**d. Prevention of slough:** Advance wound care is pro-active rather than reactive. Wound care physicians aim to prevent slough whenever possible. New products available in the market allow physicians to achieve this.

**e. Silver of honey use for infection:** These products give wound care physicians the best chance of treating local infection before the local infection worsens to the point that requires hospital admission for IV antibiotics and this can indirectly prevent many unnecessary amputations.

**f. Management of exudate:** A wet wound will never heal. New products in the wound care market allows wound care physicians to control exudates that causes

maceration because exudate contains plenty of inflammatory mediators that damage the wound bed and stop the progressions of wound healing altogether. The wound can remain the same size in depth and width after many months or even years of treatment when exudates are not controlled.

**g. Wound contamination prevention:** Devices by wound care manufacturers (e.g. silicone shower seals) at reasonable cost are available for patients to prevent wounds from getting wet, hence reducing the chances of infection during shower time. Taking showers is a big challenge for patients with a wound on their feet and patients frequently wet their dressings, thus acquiring wound infections from this route that quickly progresses into septicaemia, hospital admissions and possible death.

The wound care physician will constantly look into other issues on patients like off-loading, nutritional status, sugar control and other causes like autoimmune diseases. Sometimes a tissue biopsy may be needed to rule out the possibility of cancers as they can look the same like a foot ulcer.

### Treatment Regime

Most wounds when seen during the first consultation are sloughy, dirty with necrotic or non-viable tissues surrounded by maceration, or coated with biofilm with possible heavy colonisation of bacteria. In poor wound conditions, surgical debridement must be done for a few visits. Only when the necrotic and non-viable tissues have all been removed will the wound have a chance to recover. When the wound is stable in the healing state, surgical debridement is not required. The wound at the healing stage needs only to be cleaned with suitable dressings put on to promote granulation.

When wound infection arises, it will first be treated locally before proceeding to hospital admission for systemic treatment when required. Meticulous attention is paid to infection prevention to avoid hospital admission because Reiber et. al. found that most of the costs occurred in the inpatient setting<sup>6</sup>. Treating local infection makes economic sense and can prevent the progression into systemic infection.

### Wound Treatment Cost vs Amputation Cost

In Malaysia, most wounds are not properly managed. Subsequently, unnecessary medical expenses were incurred during repeated hospital or clinic visits for their wounds. When the reasons of not healing can be identified and corrected, most "chronic non-healing wounds" could be easily put on a right track to heal.

From sub-optimal care, most patients will be going down the final pathways of either a ray amputation of the toes, a below knee amputation or an above knee amputation. This chain of events will lead to expensive surgical amputations fees and insurance claims i.e. a ray amputation of one toe plus a few nights of hospital stays and IV antibiotics will cost an estimate of RM25,000 Ringgit in any private medical centre in the Klang Valley. A prosthesis for the lower limb may cost around RM15,000 Ringgit and the cost of physiotherapy to follow. Therefore,

the entire BKA process including the hospitalisation and a false limb purchase can cost up to RM50,000 in total. Patients who had amputation with an extensive medical coverage policy may also make disability claims.

When advance wound care is applied, the prognosis of wound closure is excellent when treatment is sought early. The final pathway of amputation can be averted altogether provided the patients are not seeking wound care treatment in the semi gangrenous or fully gangrenous state. According to a study<sup>7</sup> published in the Malaysian Orthopaedic Journal, a total of 182 patients who were admitted for infected DFU, 131 patients (71.98%) needed surgical intervention. From that surgical intervention group, 54 (41.22%) patients underwent an amputation. Amongst the amputees, 16 patients (29.63%) had a major amputation, whereas 38 (70.37%) had a minor amputation (Ray amputation). In the same study, it was found that wound dressing plays a significant role in the treatment of DFU infection and cost only approximately 18% of the total expenditure of USD\$11,000 per patient in Malaysia.

It must be remembered that when a wound is healed, an amputation is avoided and a limb is saved. Consequently, healing a wound, however small, translates into direct monetary savings for the MOH and insurance companies as the cost of wound care is a fraction of the cost of any amputation surgeries and subsequent care at any time.

In the worst case scenario where amputation is inevitable, with proper wound care, the wound closure time on the stump will be shorter than the average length of stay in the hospital post amputation when compared to without proper wound care.

### Conclusion

Advanced wound care allows the patients with chronic non-healing wounds to receive dedicated professional wound care services, allowing these chronic wound to heal faster and subsequently translate into more cost saving for the public hospitals, insurance industries and the employers. Advanced wound care prevents the DFU from being escalated to costly hospital admission, expensive ICU treatment, medications and even amputations on a repetitive basis.

In order to treat DFU successfully, multiple approaches should be used concurrently, namely adequate surgical debridement as well as good dressings and continuing treatment as an out-patient in the wound care clinics. When these are well executed, the costs of managing DFU can be substantially reduced.

### References

1. Singh N, Armstrong DG, Lipsky BA. Preventing foot ulcers in patients with diabetes. *JAMA*. 2005;293(2):217-228.
2. Palumbo PJ, Melton III LJ. Peripheral vascular disease and diabetes. *Diabetes in America*. 1995;2:401-408.
3. Price P. The diabetic foot: quality of life. *Clin Infect Dis*. 2004;39:129-131.
4. Unwin N. Epidemiology of lower extremity amputation in centres in Europe, North America and East Asia. *Brit J Surg*. 2000;87(3):328-337.
5. Pecoraro RE, Reiber GE, Burgess EM. Pathways to diabetic limb amputation: basis for prevention. *Diabetes care*. 1990;13(5):513-521.
6. Reiber G, Lipsky B, Gibbons G. The burden of diabetic foot ulcers. *Am J Surg*. 1998;176(2):5-10.
7. AWC Lam, MR Zaim, HH Helmy, IMA Ramdhan. Economic Impact of Managing Acute Diabetic Foot Infection in a Tertiary Hospital in Malaysia. *Malays Orthop J*. 2014 Mar.

LIVING GENTLY WITH CHICKENS

The Star, 29 November 2017

Spaces

STARZ, Wednesday 29 November 2017

Ready, set, grow!

By Eats, Shoots & Roots

GROWING up in Australia and Malaysia, Baida Hercus always knew she wanted land of her own to grow and nurture her family in nature.

Hercus, 40, is a mother of three and the managing director of design firm VR3D as well as a passionate environmentalist and president of the Free Tree Society of Kuala Lumpur (freetreesociety.org).

She works with husband Rick Fritz, 41, at VR3D, where he manages the company's building information modelling and design services. The couple seems to share a green sensibility, as Fritz also designs green buildings, and they have an off-grid 2ha family farm in Janda Baik, Pahang, that they manage together.

A decade ago, the farm was just an overgrown patch of land being reclaimed by the jungle. Today, it is an orchard with over 1,000 trees, a vegetable garden, 100 chickens, two goats, and an upcycled cabin, where the family spends weekends.

Tell us a bit about your farm. When we bought the land we couldn't connect it to electricity or develop it quickly, but we stuck to our guns and made sure that it was kept off-grid and as sustainable as possible. Our cabin is upcycled from an old kampung house as well material from renovations of offices.

What motivated you to do this?

We wanted to take control of our food source. We don't trust what we buy. If you don't know it, you'd have to grow it yourself. Secondly, to live gently and have that bond with nature.

And when we had animals we wanted to make sure that they're free-range, healthy and looked after.

What kind of edible plants do you have in your farm?

Ladies' fingers, tomatoes, eggplants, asparagus and herbs like parsley and sawtooth coriander.

We also have local fruit like buah rambai, mountain fig, custard apple, Vietnamese apple, kundang papaya, pineapple, starfruit, rambutan, durian, pomegranate, pulasan, banana — five varieties of those — cherries, longan, nutmeg, lychee, mulberries, avocados, jambu, passionfruit.

And coffee, tea and spices like cinnamon, cengkih, allspice, pepper.

What made you want to have livestock — chickens in particular?

Chickens are quite easy to manage and largely look after themselves. You let them out in the morning, and they put themselves to bed at night. Eggs are also a superfood, and you can get it yourself.

Also, being able to slaughter a chicken, put it into your cooking pot knowing that it hasn't got any antibiotics in it — the chicken actually tastes clean.

How did you set up the space for the chickens?

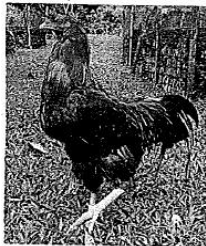
I made a seven star chicken coop! I made sure that it was hygienic with concrete floors that I could wash and keep clean from diseases. Also, I made sure snakes wouldn't be able to break in, insects wouldn't be able to come



Hercus and Fritz on their farm. They built the cabin behind them with material from an old kampung house as well as scrap from office renovations from their work. — Photos: Eats, Shoots & Roots

Living gently with chickens

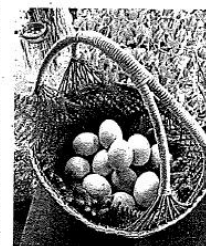
Antibiotics in chicken feed is becoming a huge concern nowadays — even the World Health Organisation has weighed in on the issue and is trying to get producers to cut back. This family isn't waiting, they're already raising their own drug-free chickens.



Seven-year-old Phoenix is the first and oldest rooster in the flock.



Leghorn chickens are good layers.



Eggs from drug-free and humanely treated hens = peace of mind.



Crepe myrtle, good for birds in the area (and also humans).

in. It also has an earth wall built into the side of the hill to keep it cool.

Starting with 12 chickens, we now have 100 in seven coops. After the first coop, we wanted some "meat" chickens, so we built temporary structures made of split bamboo harvested from our farm.

What have you learnt so far? Not to have white chickens in a farm setting because they kind of glow!

Eagles can see them, so the white ones got picked off quite quickly.

Also, we learnt not to free-range our chickens for two months every year, between mid-October to mid-November, and March, during migratory season, when you can get 20 raptors at a time in the sky instead of the usual one or two.

And we bought an incubator to incubate some eggs to replenish the chickens.

What types of chickens would you recommend?

Kampung chickens are layers, and the meat is suitable for rendang and soups.

The laying breeds, black skinned, are a hardy local breed that lay large, speckled eggs. And leghorns lay plentifully.

What's the difference between your chickens and chickens in the supermarket?

Not a lot. Except that mine are all healthy, free-range, and have personalities!

We give names to the layers, or we give a collective name for different coops. The black-skinned chickens are the "Witches of Eastwick".

We'd name the roosters, so if it's a coop, we'd go by the roosters' name, and he's probably got around five to 12 "wives" in the coop.

Most commercially-raised chickens are fed chicken meal that has antibiotics or is very high in protein.

I grow my own meal worms, and they get their protein from that, which is much healthier.

What happens to them in the long run?

Laying chickens don't get eaten, even after they've finished laying.

They have a shelf-life for laying, but I don't eat them after, and they become pets.

They've served their purpose and they deserve to retire rather than be eaten.

Any tips for chicken rearing?

Keep up the protein in their food if you want consistency and stronger chickens. After eating the eggs, wash the eggshells, bake and crush them, and mix them into their corn to make sure that they still have enough calcium for producing more eggs. Hang their food from the ceiling rather than leave it on the ground so the rats can't access the food. And train the chickens from young to eat food scraps!

Any advice for people who would want to have chickens?

For a family of four, you'd need about five hens to get a decent supply of eggs. Build a nice coop, make sure that they get sunshine and space for two to three hours a day. And don't get a rooster if you are in an urban area!

How self-sufficient are you from the farm?

We supply all of our own eggs and we can probably supply one-third of our vegetables, one-fourth of our chicken meat and half of our fruit supplies.

What advice do you have for someone who wants to be self-sustainable?

You can grow so much in a small city garden — just try to grow as much as you can and focus on what you want to eat. If you wanted to be more self-sustainable, though, you'd need to buy an acre of land, secure it, and visit it regularly if you don't have farmlands. So it's a commitment.

What are your plans for the future?

We've started growing our own corn, and soybeans (for chicken feed). The other thing we want to do is grow more moringa, and chop and mix it up with the food.

Eats, Shoots & Roots is a social enterprise that champions urban edible gardening. For more information, go to eatsshootsandroots.com or facebook.com/eatsshootsandroots or e-mail hello@eatsshootsandroots.com.

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READY, SET, GROW! “Living Gently With Chickens” - 9th Issue, November 2017

Growing up in Australia and Malaysia, Baida Hercus always knew she wanted land of her own to grow and nurture her family in nature. Baida and her husband Ricki have an off-grid 2-acres family farm in Janda Baik, Pahang, that they manage together.

A decade ago, the farm was just an overgrown patch of land being reclaimed by the forest trees. Today, it is an orchard with over 1,000 trees, a vegetable garden, 100 chickens, two goats, and an upcycled cabin, where the family spends weekends and grows part of their supply of eggs, vegetables, and meat.

“We wanted to take control of our food source. We don’t trust what we buy. If you don’t know it, you’d have to grow it yourself. Secondly, to live gently and have that bond with nature. And when we had animals we wanted to make sure that they’re free-range, healthy and looked after.”

“Chickens are quite easy to manage and largely look after themselves. You let them out in the morning, and they put themselves to bed at night. Eggs are also a superfood, and you can get it yourself. Also, being able to slaughter a chicken, put it into your cooking pot knowing that it hasn’t got any antibiotics in it – the chicken actually tastes clean,” said Baida.



Read more about Baida and her chickens in Star2, The Star\*  
[#eatsshootsandroots](#) [#garden](#)

## CURRENT UPDATES

### BE PRUDENT IN USE OF ANTIBIOTICS, SAYS HEALTH DG

The Malay Mail, 16 November 2017

SERI KEMBANGAN, Nov 16 — The Malaysian Ministry of Health has classified antibiotic resistance a primary health care threat of the 21st century.

Director-General of Health Datuk Dr Noor Hisham Abdullah said overuse and misuse of antibiotics is to be blamed.

“Although antibiotic resistance is a process that occurs naturally, there has been a significant acceleration over the years due to overuse,” he said.



Speaking at the National Antibiotic Awareness Campaign 2017 in Serdang Hospital, Dr Noor urged both healthcare professionals and the public to be prudent in use of antibiotics.

He also advised the public not to pressure doctors to prescribe them antibiotics for viral infections and fevers.

“Antibiotics will not work against most infections like cough and colds as they are most likely caused by viruses,” Dr Noor said.

Dr Noor said the growing number of infections such as pneumonia and tuberculosis (TB) are becoming harder to treat due to antibiotic resistance.

Dr Noor also highlighted the crucial role healthcare professionals play in championing the antimicrobial stewardship initiatives at their healthcare practice.

“Antibiotics will be seized whenever they are handled in contravention of the Poisons Act 1952 and the use of it is closely monitored,” he said, adding that online antibiotic sale is an offence.

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Quoting the National Antibiotic Resistance Surveillance Report, Dr Noor said the Klebsiella pneumonia, a form of bacterial pneumonia has become 2.6 per cent more resistant to antibiotics as compared to 1.7 per cent in 2013.

Dr Noor said if nothing is done, by 2050 infections by antimicrobial resistant superbugs could kill an extra 10 million people each year worldwide, overtaking cancer.

“Not only that, it’ll cost the world an estimated US\$100 trillion (RM 418 trillion.),” he said.

This means the public and government hospitals would have to carry more economic burden as more expensive antibiotics have to be developed.

“Longer hospital stays are also needed to cure resistant bacterial infections which increase healthcare cost and indirectly cause a loss of productivity,” he said.

“Mortality risk and the risk of spreading infections would also increase.”

World Health Organisation (WHO) representative to Malaysia, Brunei and Singapore, Dr Ying Ru Lo said over the next 10 years cumulative death in the West Pacific region will be largely driven by antibiotic resistance.

She said that globally, 480,000 people develop multi-drug resistant TB each year, and drug resistance is starting to complicate the fight against HIV and malaria, as well.

“Without effective antibiotics, the success of major surgery and cancer chemotherapy would be compromised,” she said.

Calling antibiotic resistance a multi sector crisis, Dr Ying said farmers and the food industry should stop using antibiotics routinely to promote growth and prevent disease in healthy animals.

In combating this problem, Dr Ying said WHO has also developed a surveillance system to monitor the emergence of antibiotic resistance in both animals and humans.

## HIGH COST WOES AHEAD FOR M'SIANS - FUEL PRICE, FOOD

The Star, 20 November 2017



### High cost woes

Fuel price and weather-induced food price hikes to push inflation up

PETALING JAYA: Malaysians will have to brace themselves for a higher cost of living in the coming months as the year-end seasonal monsoon brings about higher prices for fish and vegetables.

They will also have to cope with higher fuel prices, which has impacted the prices of goods given the higher transportation costs.

An early survey showed the median expectation for headline inflation, which includes volatile fuel and food prices, hovering at the 4.1% level in October.

However, official inflation numbers which will be released on Wednesday could even surpass the country's inflation rate of 4.3% last September.

Inflation in September rose mainly due to higher transportation costs, which increased significantly by nearly 15.8% year-on-year (y-o-y), the highest among other components of the consumer price index (CPI).

Meanwhile, food and non-alcoholic beverage prices increased by 4.6% y-o-y, second only to transportation costs.

Apart from the elevated fuel prices, the weak ringgit and the strengthening of domestic demand may have likely raised inflationary pressure in October.

The ringgit initially strengthened marginally by 0.4% in the first two weeks of October, but later slipped 0.34% to RM4.23 per US dollar by the end of the month.

Speaking to *StarBiz*, AllianceDBS Research chief economist Manokaran Mottain

estimates that October's headline inflation rate could range between 4% and 4.5%.

He also cautioned that inflationary pressure this month could be higher, given the continuous increase in RON95 and diesel prices, totalling 18 sen and 12 sen respectively over the first three weeks alone.

"The main cause for the expected higher inflation rate in October is the rising fuel prices. The trend is similar to what we have seen in the previous months.



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“Higher transportation costs will contribute to higher food prices and this adds to the inflationary pressure. This month, it is likely for the headline inflation to be recorded at a higher level, as petrol and diesel prices have been on the rise,” he said.

Sharing a similar stance, Socio Economic Research Centre executive director Lee Heng Guie pointed out that the net increase in October’s weekly petrol prices exceeded September’s rise in fuel prices.

“The RON95 petrol price saw a net increase of four sen in October compared with only one sen a month earlier. Considering a low base effect due to relatively lower petrol prices in September last year, transportation costs in October could go up and push the inflation rate higher.

“I expect headline inflation in October to touch 4.4% y-o-y, but November’s inflationary pressure could moderate to around 4%, given the y-o-y high base effect. As for the full-year estimate, headline inflation is anticipated to hover around 3.9% y-o-y,” he said. Inflation was at 2.1% last year.

On the possible monetary initiatives by Bank Negara moving forward, Lee said the central bank was likely to engage in gradual monetary tightening in the first quarter of 2018.

This may involve a hike in the benchmark overnight policy rate by 25 basis points when the Monetary Policy Committee (MPC) meets in its next session.

Last week, in its last meeting for the year, the MPC gave its strongest signal yet that a rise in lending costs is likely as the domestic economy continues to strengthen.

UOB Kay Hian Malaysia Research economist Julia Goh also indicated a possible rate hike of 25 basis points next year.

However, she did not rule out the possibility of Bank Negara considering two rate hikes, provided growth prospects remained strong and demand-side inflation pressures picked up.

“While prices of goods have been rising, the government’s initiatives such as cash handouts, tax cuts and other forms of aid have helped to cushion the pressure on Malaysians’ purchasing power to an extent.

“Given the strong economic performance as seen in recent times, demand-driven inflationary pressure can be expected moving forward,” she said, adding that October’s CPI could rise by 4.3% y-o-y.

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## **FREEZE ON KL HIGH-END PROPERTY PROJECTS HAS LITTLE EFFECT ON STOCKS**

**The Star, 21 November 20 17**

**PETALING JAYA:** An indefinite freeze on approvals for the development of high-end residential and commercial property above RM1mil in Kuala Lumpur is expected to have a negligible impact on most property stocks on Bursa Malaysia.

This is in part due to the fact that most of the listed property developers in the country do not have significant exposure in the capital city, and in part due to the fact that most of their residential projects are priced below the RM1mil threshold, with limited involvement in commercial properties, some analysts.

On the equity market, property stocks also showed little indication of being affected by news over the weekend that Dewan Bandaraya Kuala Lumpur (DBKL) has frozen approvals for the development of shopping malls, offices and luxury condominiums priced above RM1mil effective Nov 1 to mitigate the ongoing supply glut in the city.

CIMB Research noted that this was not the first time that a property freeze had been imposed to mitigate the supply glut in the local market. Previously, the Selangor government had a six-month freeze on approvals for new property projects involving serviced apartments, small-office-home-offices and small-office-versatile-offices submitted after Jan 1, 2016.

The brokerage viewed the recent measure by DBKL positively.



Move against glut: DBKL has frozen approvals for the development of shopping malls, offices and luxury condominiums priced above RM1mil effective Nov 1 to mitigate the supply glut.

“We are positive on this move as it would help address the oversupply situation in the overall property market,” CIMB Research said in its report.

If the jurisdiction was only Kuala Lumpur, then the brokerage would expect the measure to mostly impact the high-end property developers, such as Selangor Properties Bhd.

However, it is of the view that the measure would have a minimal impact on its top picks, such as LBS Bina Group Bhd and Mah Sing Group Bhd, as most of their products are less than RM600,000 per unit and both have limited exposure in the office and retail space.

“However, if the moratorium is applicable nationwide, then developers across the board could be affected,” CIMB Research explained.

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Similarly, UOB Kay Hian Research also viewed the new measure by DBKL as having a neutral impact on most property stocks, as many developers had in recent years avoided developments in the country's capital.

"We are neutral on the announcement as most developers under our coverage do not have major exposure in developments in Kuala Lumpur. Over the past couple of years, developers have not aggressively entered the KL City market, but have put their resources to focus on developments within the Klang Valley instead, which include the state of Selangor, where land prices and developments are still relatively affordable," UOB Kay Hian Research wrote in its report.

Both CIMB Research and UOB Kay Hian Research have a neutral outlook on Malaysia's property market.

In justifying its "neutral" stance, CIMB Research pointed to the bleak outlook and concerns about the oversupply situation as well as more stringent regulations.

"We still prefer the developers that are focused on township projects and products priced below RM1mil as we think these are the healthiest sub-segments in the overall property market. In our coverage, these developers include LBS Bina and Mah Sing," the brokerage said.

UOB Kay Hian Research said it has maintained its "market weight" call on the property sector due to the lacklustre outlook.

"As expected, property stocks are currently trading below their long-term price-earnings mean amid the slowdown in the sector. We believe 2018 would continue to be a challenging year, given affordability constraints and stringent lending. Nevertheless, developers with land banks at selected hotspots should continue to deliver decent sales, therefore enhancing their earnings visibility," it said.

Meanwhile, AllianceDBS Research viewed the tightening measure by DBKL as having little effect to resolve the grave issue of a supply glut in the near term.

Seeing no respite in the near term, the brokerage said it expected the existing supply glut to go through a long gestation period until 2019.

"Taking the cue from listed developers' relatively flattish sales targets in 2017, we expect the trend to persist in 2018 as the impending general election, which is widely expected to take place in the first half of 2018, will lead to potential buyers adopting a wait-and-see attitude for their property purchase decisions," AllianceDBS Research said.

"Also, developers' new launches will face stiff competition from newly-completed projects and public housing," it added.

AllianceDBS Research noted that the Malaysian property market has been on a downtrend over the past three years, driven by the persistently weak sentiment, low affordability and accelerating incoming supply. It added that the challenges were not just confined to Kuala Lumpur.

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“The huge incoming supply, which is increasingly being converted into unsold inventories, will continue to pressure the property market. For residential properties (including serviced apartments), we believe Johor and Penang will be more vulnerable, given the incoming supply that is higher-than-national-average relative to the respective state’s existing stock.

“Meanwhile, the commercial markets in the Klang Valley and Johor will be particularly more exposed to the high incoming supply,” it said.

Bank Negara in its quarterly bulletin last Friday said supply-demand imbalances in Malaysia’s property market had increased since 2015 – with unsold residential properties already at its highest in 10 years.

In the first quarter of 2017, total unsold residential properties stood at 130,690 units, the highest in a decade. This was close to double the historical average of 72,239 units per year between 2004 and 2016.

The central bank revealed that 83% of the total unsold units were priced above RM250,000. Of the total unsold units, 61% were high-rise properties, out of which 89% were priced above RM250,000.

Johor had the largest share of unsold residential units (27% of total unsold properties in Malaysia), followed by Selangor (21%), Kuala Lumpur (14%) and Penang (8%).

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## **STRONGER ECONOMY BUT PURCHASING POWER ERODING**

**The Star, 21 November 2017**

HERE we go again – another set of impressive growth figures. Bank Negara has announced Malaysia's latest economic growth at a commendable 6.2% in the third quarter of 2017.

The pace of economic growth for the three months up to September was faster than the 5.8% registered in the second quarter of the year.

This growth rate was the fastest since June 2014.

On a quarter-on-quarter seasonally adjusted basis, the Malaysian economy posted a growth of 1.8% against 1.3% in the preceding quarter, according to the Statistics Department.

Malaysia's robust economic growth has been attributed to private-sector spending and a continued strong performance in exports.

To quote Bank Negara governor Tan Sri Muhammad Ibrahim last Friday: "Expansion was seen across all economic sectors."

But try explaining this impressive economic growth rate to the average salaried worker struggling to pay his monthly household bills.

Stretching the ringgit is especially great for those living in urban areas, and Malaysia is increasingly becoming urbanised.



The story is the same everywhere – the rising cost of living has not been accompanied by an increase in wages.

The story is the same everywhere – the rising cost of living has not been accompanied by an increase in wages.

Compounding matters is the depreciation of the ringgit, reducing the purchasing power of the ordinary folk. They can't buy the same amount of food as they used to previously.

Employers are being forced to cut operating costs to match declining profits.

The Malaysian Employers Federation (MEF) has cautioned that more people would be out of a job this year due to the current economic challenges.

Apart from the challenging landscape, technology has disrupted several brick-and-mortar businesses, forcing them to change their way of doing business.

According to MEF executive director Datuk Shamsuddin Bardan, economic challenges will compel bosses to review their workers' requirements.

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While official statistics show that the economy is charting a strong growth path, the trickle-down effect is not being felt.

Why is the sentiment on the ground different from what the politicians and officials are telling us? Why is there a disconnect in the economy?

Are the figures released by the government officials more accurate and authoritative compared with the loud grumblings on the ground that are anecdotal in nature devoid of proper findings?

We hear reports of supermarkets and hypermarkets closing down, but could that be because their business model no longer works as more Malaysians turn to online shopping, with e-commerce companies announcing huge jumps in traffic?

It is the same with the malls – retail outlets are reporting lower sales and this is compounded by the fact that there is an oversupply of malls.

International restaurant chains such as Hong Kong's dim sum outlet Tim Ho Wan and South Korean bakery Tous Les Jours and South Korean barbecue restaurant Bulgogi Brothers have ceased operations.

But then again, it could be that their offerings and prices had failed to compete effectively against the local choices.

According to the central bank, demand is anchored in private-sector spending.

“On the supply side, the services and manufacturing sectors remain the key drivers of growth,” Muhammad said.

Looking ahead, the governor said that the economy this year is poised to register strong growth and likely to hit the upper end of the official target of 5.2%-5.7%.

The trickle-down effect is not being felt simply because there is uneven growth in the various sectors of the economy.

The property sector, which provides the biggest multiplier effect, continues to be in the doldrums.

The weak ringgit has had a big impact on the price of food, especially processed food and beverages that make up 74.3% of Malaysian household spending.

It was reported that Malaysia had imported a whopping RM38bil worth of food between January and October last year.

In recent weeks, the ringgit has strengthened to about RM4.16 against the US dollar. But it is still far from RM3.80 to the dollar and the outlook of the currency remains uncertain.

We can't even hold our heads up against the Thai baht and Indonesian rupiah – two currencies that have appreciated against the ringgit.

The headline economic numbers are showing good growth, but Malaysians' purchasing power has dropped and our living standards have eroded. That is the bottom line. We are living in denial if we do not admit this.

This column first appeared in StarBiz Premium.

## BECOMING THE 'SWISS' OF COCOA AND PEPPER

The Star, 22 November 2017



“What words come to mind when names such as Lindt, Rolex and Davos are mentioned? I am certain they will include quality and premium. Switzerland, a country that is about one-eighth the land size and one quarter the population of Malaysia, is well-known for making top quality products in small quantities.

In fact, the Swissness Worldwide 2016 study conducted by the Institute of

Marketing at the University of St Gallen revealed that people around the world are willing to pay up to 100% more for a Swiss product, from chocolates and cheese to watches and cosmetics or even a skiing holiday.

So, what is the connection between ‘Swissness’ and cocoa and pepper, our smaller siblings in Malaysian commodities? Actually, there are quite a few.

### **Dwarfed by giants**

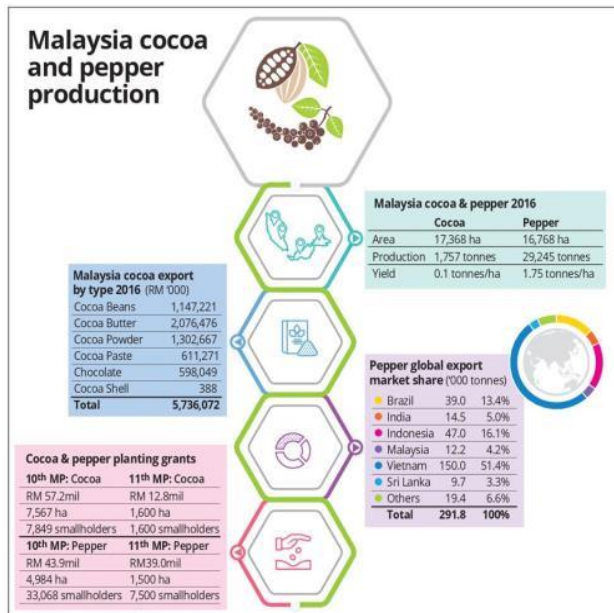
Malaysia is only the fifth largest grower of pepper, also known as the ‘King of Spice’, after Vietnam, Indonesia, India and Brazil, with 7.4% global production share in 2016. Vietnam is the single largest producer with about 35% share.

The commodity has made steady progress in Malaysia. Total planted area has increased from 14,147ha in 2010 to 16,768ha in 2016. Correspondingly, production increased from 24,277 tonnes to 29,245 tonnes, supported by an increase in yield from 4.4 tonnes per hectare to 5.6 tonnes per hectare.

If pepper is disadvantaged in terms of production, cocoa is even more so. Theobroma, cocoa’s botanical name, is Greek for ‘food of the gods’ but in Malaysia, it does not deserve the attention it rightly deserves.

From its peak total planted area of 414,236ha in 1989, cocoa cultivated land has shrunk to 17,368ha in 2016. Production has reduced from 247,000 tonnes in 1990 to only 1,757 tonnes in 2016. Cote d’Ivoire and Ghana combined accounts for 58% of total global production.

However, it is important to keep in mind that these changes have taken place due to economics and practicality. Many cocoa growers switched to oil palm because it is seen as a more “stable” crop. However, by trade volume, the cocoa industry is a RM10bil industry.



## Silver linings

Paradoxically, while export quantum of pepper has decreased from 14,077 tonnes in 2010 to 12,199 tonnes in 2016, due in part to growing domestic consumption, export value has increased from RM199.3mil to RM490.17mil correspondingly. This was driven by demand outpacing supply since 2006 resulting in a bull run on pepper prices that peaked in 2015.

As for cocoa, export grew by almost nine folds from RM0.638bil in 1992 to RM5.736bil in 2016. While our domestic production has gone down, we still

retain many advantages and for example, grinding of the cocoa beans at source, especially in Africa, has not developed due to political and business risks. Europe and East Asia still account for substantial grinding activities to feed manufacturing needs.

The good news is there has been a Malaysian resurgence as a competitive location to process higher quality African and South American beans.

Cocoa players in Malaysia remain relevant as the processing knowledge has been built over the years and we are respected globally as quality producers of cocoa ingredients. It is no coincidence that leading global chocolate and cocoa product players such as Barry Callebaut, Mondelez and Hershey's have sizable manufacturing operations in Malaysia.

## Protect the smallholders

Both pepper and cocoa are practically smallholder crops, dominant in Sabah and Sarawak. About 98.5% of our pepper are produced in Sarawak while two-thirds of cocoa are produced in Sabah and Sarawak. Fundamentally, we need to have a critical mass of cultivated land area to compete for a larger market share and retain our downstream competitiveness.



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Under the 10th Malaysia Plan, RM43.9mil was allocated to plant and rehabilitate a total of 4,984ha of pepper, benefiting 33,068 farmers, primarily in Sarawak while a further budget of RM39mil to cover 1,500ha and benefit 7,500 planters was planned under the 11th Malaysia Plan.

Meanwhile, smallholders in Sabah are the main recipients of cocoa new planting grants amounting to RM57.2mil for 7,567ha and benefiting 7,849 planters under the 10th Malaysia Plan. For the current 11th Malaysia Plan, RM12.8mil has been budgeted to plant 1,600ha for 1,600 planters.

### Go premium

The increase in upstream supply must be coupled with focus on high-quality and premium products. Taking a leaf out of Switzerland, more is being done to promote our well-known Saraspice pepper brand and research into further diversification of pepper products.

With continued growth in the emerging markets compared to the flat trajectory in mature markets, the opportunity remains for us to attract the premium confectionery players from Europe to be based here and we are aggressively courting them. I have also exhorted local players to be more ambitious and not preclude the possibility of taking stakes in one or more premium brands, as part of the go premium strategy.

Another growing, albeit nascent trend, is the bean-to-bar segment. Just like craft beer or speciality coffee, these artisanal products can be handcrafted from unique tasting and high-quality cocoa beans from Latin American, Africa and even our own backyard.

Rather than taking on our larger competitors directly on volume, we must take the more premium road, which can be more rewarding. It is time to put some 'Swissness' into our cocoa and pepper products.

*Datuk Seri Mah Siew Keong is Minister of Plantation Industries and Commodities. Commodities Today and Beyond is his op-ed to share his views, hope and vision for commodities with everyday Malaysians.*

#### BIM MEMBER INSTITUTIONS

- Malaysian Pharmaceutical Society (MPS)
- Royal Institution of Surveyors Malaysia (RISM)
- The Institution of Engineers Malaysia (IEM)
- Pertubuhan Akitik Malaysia (PAM)
- Malaysian Medical Association (MMA)
- Malaysian Dental Association (MDA)
- Malaysian Institute of Planners (MIP)
- Veterinary Association Malaysia (VAM)
- Malaysian Institute of Interior Designers (MIID)
- Malaysian Society of Soil Science (MSSS)
- Malaysian Association of Social Workers (MASW)
- The Plastics & Rubber Institute of Malaysia (PRIM)
- Agricultural Institute of Malaysia (AIM)
- The Chartered Institute of Building Malaysia (CIOBM)
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- Malaysian Institute of Human Resource Management