

4. WOMEN'S HEALTH

By: Committee on Women's Health Issues, 2000/2001

The Women's Health Committee supports the WHO's 1978 Alma-Ata Declaration which states,

'Health is a state of complete physical, mental and social well being and not merely the absence of disease and infirmity.'

The MMA supports the goal of the Government to improve the health and well-being of all women. This includes women in adolescence, reproductive age, ageing/elderly women and working women.

The health services should encompass areas such as,

- ❖ Ageing
- ❖ Mental health
- ❖ Reproductive health
- ❖ Occupational health and safety
- ❖ Reproductive health
- ❖ Exercise, nutrition and obesity
- ❖ STD, HIV/AIDS
- ❖ Lifestyle diseases
- ❖ Smoking, etc

Women from the migrant population also have specific health implications on both themselves and the local population and this too, should be addressed.

Assisted Reproduction

Assisted Reproduction should be looked at in detail by the MMA Ethical Committee as this practice is widely practiced by General Practitioners than in the Government Hospitals.

The emphasis in this area should be placed on,

- the practice guidelines, in particular, treatment regimes,
- the cultural and religious aspects.

Pap Smears

A baseline data on women's health e.g. pap smears, etc, is being maintained at the Ministry of Health, Malaysia. However, currently there is no data available for the private sector.

MMA should request from the Association of Private Hospitals, Malaysia (APHM) data on relevant areas pertinent to women's health, as required by law, and stipulated in the Private Hospitals and Services Act, and there should also be a baseline data on mortality and morbidity rates of women, etc for the private sector.

The Ministry of Health should give its classification for Pap Smears to the APMH for its information and guideline, and this should be disseminated to all General Practitioners.

With regards pap smear results, General Practitioners should inform their patients of the results of their pap smears, regardless of the results, as a routine, instead of either only informing them if something is amiss, or otherwise, giving them their report when they come for their next smear, as generally practiced currently.

Health Screening

Health screening should be recommended for women above the age of 45, and should include,

- a. Pap Smear
- b. Mamogram (at least once)
- c. Haemoglobin Test
- d. Cholesterol Test

Other tests that may be considered, include,

- a. Glucose Tolerance Test (GTT)
- b. Renal Function Test
- e. Bone Density Test.

In high risk groups, additional treatment should be offered such as,

- o Hormone Replacement Therapy (HRT). Although HRT is beneficial cost wise, it should be considered on a case to case basis, and the option given to the patient
- o Baseline Mamogram
- o E.C.G, if there is an increase in cholesterol level of patient, and the patient suffers from hypertension.

Health Education

A Committee on Health Education, should be set up by the MMA so as to disseminate information to General Practitioners and the public. Information should be easily accessible, thereby increasing their awareness.

It was felt that Education on Women's Health should reach the 'grassroot.' Stress in particular, should be placed on education of women in rural areas encompassing, women in the plantations, orang asli settlements, factory workers and school leavers.

Women's Hospital

The establishment of a separate Women's Hospital would be a positive step towards improving the health of the ageing/older women, and thereby also increasing their quality of life. The hospital can also have a center to disseminate information on women's health issues.

Counseling Centers

MMA should also moot for a counseling center in major hospitals where women can go and seek advice and information on women's health issues, similar to that already being operated by the Diabetic and Menopause Societies.