

President's Message



Dr Mohamed Namazie Ibrahim
President
mma.namazie@gmail.com

The Malaysian NCD Crisis

The ubiquity of the non-communicable diseases (NCDs) and the risk factors of NCDs in Malaysia, as well as its impact on the nation, has put our current healthcare system at a critical crossroad. We are faced with increasing pressure to provide the best quality of care to patients with NCDs while we are still working on ensuring appropriate and equitable access to sustainable quality health care for all Malaysians, regardless of their income and background.

Life Expectancy

Although the Malaysian health system has achieved remarkable outcomes in improving the health status of the population since independence, particularly in terms of maternal and child health, it has performed less well in improving life expectancy of the adult population. This reflects on the growing burden of NCDs which has not been adequately managed with the existing design and resources of the health system. (Source: Harvard School of Public Health, 2016).

NCD Status in Malaysia

The increasing burden of NCDs in Malaysia has called for a transformation in how health services are organised, financed and delivered. It is vital since the onset of NCD is often silent and most of the time, people are unaware of such diseases until it gets worse.

What is more worrying is the increasing cost of living and the substantial economic burden of managing these chronic and catastrophic illnesses, and the outcome can be poignant, especially to those who could not afford to pay the cost for treatment. In fact, Malaysians are facing double-digit healthcare inflation, far outpacing overall inflation. Among the reasons cited for the growing inflationary pressure on medical costs, the top three are:

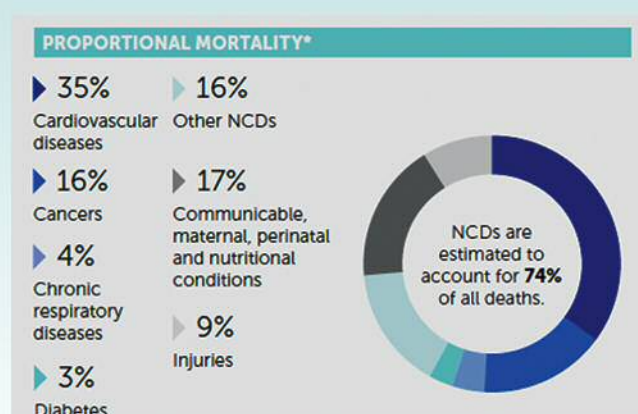
- increased utilisation of medical services as more people are falling sick
- the growing ageing population
- the costly advancement of medical technology.

(Source: <http://www.theedgemarkets.com/article/malaysias-medical-inflation-doubledigit-pace>)

Proportional Mortality

According to the 2015 National Health and Morbidity Survey (NHMS), the prevalence of NCD risk factors in Malaysia has shown an increasing trend from the previous years, making the NCDs as the biggest health threat facing this country nowadays. NCDs have contributed to

about 74% of total deaths in Malaysia, with the biggest contributor being cardiovascular diseases that include heart attacks and strokes. Other NCDs such as lung cancer, diabetes, hypertension, hypercholesterolaemia and chronic obstructive airways rank among the top 10 leading causes of death in Malaysia.



(Source: WHO – NCD Country Profile on Malaysia, 2018)

An estimated 35% of deaths occur in individuals aged less than 60 years old. What is more worrisome is that the children are just as vulnerable to the risk of NCDs right from foetal development, and their risks can be further increased during childhood with exposure to unhealthy diets, lack of exercise, smoking and excessive alcohol consumption, etc.

Increasing Prevalence of Undiagnosed NCD

According to the NHMS analysis, there has been a high proportion of Malaysians with undiagnosed NCD risk factors. This condition was contributed to late diagnosis, and can result in complications during treatment as it would be much more difficult and costly to manage, thus further resulting in a more burdening situation to treat NCDs in Malaysia.

The Challenges

NCD is very much associated with human behaviour.

Changes in lifestyle due to urbanisation and globalisation and modifiable behaviours such as harmful use of alcohol, tobacco use, physical inactivity, unhealthy diet, raised blood pressure among others, have been recognised as the most common NCDs risk factors in Malaysia.

At the moment, Malaysia has been very proactive in its commitment to prevent and control NCDs. The government has invested in public and preventive health

to reduce the NCD risk factors, including strengthening our commitment towards the implementation of the Tobacco Control Act, as one of the initiatives to curb the smoking habit among Malaysians. Globally, tobacco use is a leading preventable cause of premature death and disease. At present, it causes more than 5 million deaths each year and is expected to cause over 8 million deaths annually by 2030. Our association is working hand to hand with the Malaysian government towards the elimination of all tobacco-related diseases.

National Strategic Plan for Non-Communicable Diseases (NSPNCD)

Malaysian government has developed the 'National Strategic Plan for Non-Communicable Disease (NSPNCD)' based on the current global theme and mandate by WHO. This NSPNCD (latest edition 2016-2025) sets out the government's role in addressing the significant and increasingly challenging threats posed by NCDs in Malaysia. The NSPNCD 2016-2025 has five main objectives, based on the Global Action Plan for the Prevention and Control of NCDs 2013-2020:

- i. To strengthen national capacity, leadership, governance, multi-sectoral action and partnership to accelerate country response for the prevention and control NCDs
- ii. To reduce modifiable risk factors for NCDs and underlying social determinants through creation of health-promoting environments
- iii. To strengthen and orient health systems to address the prevention and control of NCDs and the underlying social determinants through people-centred primary health care and universal health coverage
- iv. To promote and support national capacity for high-quality research and development for the prevention and control of NCDs
- v. To monitor the trends and determinants of NCDs and evaluate progress in their prevention and control

(Source: National Strategic Plan for Non-Communicable Disease 2016-2025 by Department of Public Health, Ministry of Health Malaysia)

UHC

Universal Health Coverage (UHC) is the key to the management of NCDs in Malaysia. As a nation, Malaysia needs to ensure an appropriate and equitable access to sustainable quality health care for all Malaysians. And with the emerging concerns in access to care followed by greater complexity and costly medical interventions, the transformation of UHC becomes essentially non-negotiable. Therefore, the health care coverage must be universal (as how it should be) and must be based on needs, rather than eligibility criteria. After all, regardless of which path Malaysia chooses to embark on, it must ensure that the poor are well protected without having to face undue financial catastrophic risks.

However, there is a grave need for a shift in people's attitudes and preferences as well. Instead of putting the business of combatting NCDs on the shoulders of the

government or policy holder alone, everyone should work together in moving Malaysia towards a healthier nation by adopting a healthier lifestyle.

The Need for Enhancement of Primary Care

Primary healthcare is the cornerstone of a sustainable health system for UHC - It is a fundamental right of every human being to the enjoyment of the highest attainable standard of health without distinction of any kind. However, Malaysia at the moment is facing inadequate resources for comprehensive primary care. There is an inequitable distribution of finances taking place, with the expenditure skewed more towards secondary and tertiary care. The failure to diagnose NCDs, substandard management of NCDs and non-continuity between the primary, secondary and tertiary care often lead to high rates of unwanted admissions to hospital for chronic and catastrophic illnesses. As one of the biggest medical associations in Malaysia, the Malaysian Medical Association has been constantly expressing our desire and willingness to work together with the Malaysian government in enhancing the primary care delivery in a more concerted and uniform manner by engaging the private General Practitioners (GPs) in the process to handle the situations of inadequate screening and treatment of NCDs and also disjointed healthcare.

It is timely for the Malaysian Government to give due importance to GPs to provide preventive care, health education and early detection of NCDs. This is to complement the Government's role and ease the burden at public healthcare facilities that may lead to the undetected NCD cases. The private sector should be officially recognised as part of the Malaysian primary care system. Considering the quality of services and efficiency which can be offered by the private sector, private medical practitioners can play a vital role in reducing the large numbers of undiagnosed and out-of-control NCDs in Malaysia. This is also in support of the government's move towards having the Public-Private Partnerships (PPPs) to achieve a more comprehensive and effective healthcare delivery for all Malaysians. There is an avenue for both sectors to be united to provide a more sustainable primary care of the highest standard, besides looking at ways to reduce wastage at the primary care level.

(Based on the paper presented at the Scientific Session: NCD in the Asean Region. MASEAN mid-term meeting in Cebu, Phillipines, 15 March, 2019)

SPACE FOR PRACTICE

**Ground floor shophot space
for specialist practice at
SS2/24 Seapark PJ facing mainroad.
Contact Dr Chang 012-295 5159**