DANGERS IN HEALTHCARE: THE MALAYSIAN EXPERIENCE

Malaysian Medical Association
Definition of Danger

• Danger is the general word for liability to all kinds of injury or evil consequences, either near at hand and certain, or remote and doubtful.
Definition of Healthcare

• Healthcare is involved, directly or indirectly, with the provision of health services to individuals.

• These services can occur in a variety of work settings, including hospitals, clinics, dental offices, out-patient surgery centres, birthing centres, emergency medical care, home healthcare and nursing home
The dangers and hazards faced by workforce in health care

Safety and health issues
- Bloodborne pathogens and biological hazards
- Potential chemical and drug exposures
- Waste anaesthetic gas exposures
- Respiratory hazards
- Ergonomic hazards from lifting and repetitive tasks
- Laser hazards
- Workplace violence
- Hazards associated with laboratories
- Radioactive materials and X-ray hazards
Cyber Threat to Health care

• Many Malaysians get their health information from media and internet.
• Instant doctors
• Very often articles flawed overplaying benefits and underplaying the harms of various treatments, exaggerating the prevalence of diseases, and leaving out discussion of alternative options
• Learn about home remedies
• Breach of confidentially - patient records
The Internet of Things (IoT)

- A network of devices that connect to the Internet and exchange data amongst themselves - has far reaching consequences

- From recent study - 70% of IoT devices contain serious vulnerabilities.

- Weak or non-existent access controls allowing accounts to be hacked, placing healthcare records at risk.

- Non-existent encryption. Encryption scrambles data but some healthcare providers fail to install encryption on their systems.

- Inadequate software protection - vulnerability to viruses.

- No guidance for new technologies. Although healthcare organizations have strict regulations regarding how electronic health records can be created, stored, accessed, and shared. Still improper cybersecurity
Dangers of Cosmetic surgery

• No direct laws to prevent an unqualified person to perform cosmetic surgery or non-surgical procedures or to make them face criminal charges even if the patient dies or is disfigured as a result of a botched job.

• A billion dollar industry growing annually

• Not under the purview of the private healthcare and services Act
Malaysia

- Sustainability to our healthcare
- High pride in our national HC system
- High quality and equitable PHC delivery at rock-bottom prices
- Increased life expectancy to 74 years
- Govt subsidies covered 55% of total healthcare spending in 2011 (WHO)
- Funds most entirely into public hospitals and clinics
• In 2014, RM22 billion in HC spending: >10% of Govt spending
• In private: 79% of treatment received in hospitals and clinics paid directly by consumer
  • Only 18% towards insurance coverage
• Discrepancy leaves consumer vulnerable to increased costs esp since burden of chronic disease increasing
Problems in Malaysian Healthcare

- Public health services - queues are long
- In recent years patients had to pay for own surgical implants and essential medicines due to hospital budgetary constraints

- Our universally available PHS is funded from Central taxation
- Private health care - primarily funded directly from out-of-pocket payments of individuals or employers

- Govt also responsible for provision and financing of public health services, such as disease control, environmental health etc.
Health care challengers

- Faster growth of healthcare spending compared to wealth per capita
- The high number of Malaysians ageing with ill health
- Increasing proportion of public hospital spending, compared to primary healthcare, esp in light of the growing number of chronic NCD patients in the country
Dismal forecast

A lot of avoidable premature deaths - the adult population not attaining the life expectancy that we expect that Malaysian could achieve if we tackle the NCD burden
Vulnerable People

• Average Malaysian can depend on reasonable health at minimal cost

• Migrant workers, TG communities, mental health patient

• According to MTUC, 40% of Malaysian workers migrant workers
  • Impact in Malaysian health and HC system significant

• Some unable or unwilling to seek out adequate health care when necessary
  • Fear of being caught and deported
Infectious Disease Time Bomb

• Many migrant workers from countries with high rates of ID: HC time bomb

• Legal migrants make up 8% of Malaysian population, but comprise 14% of TB patients ((Data from Inst Resp Medicine)

• Increased number of multi-drug resistant TB

• Introduction of full fess for foreigners -
  • Act as deterrent to illegal and legal (discouraged by employers to utilize their Foreign workers Health Insurance Protection Scheme)
What we need to do

• Need to transform health care system in preparation for
  • Very real hurdle of ageing population
  • High prevalence of NCD
  • Increasing and expensive medical technology
  • Unexpected environmental and communicable threats to health
So the dangers to health care in Malaysia?

- Many issues
- In addition to the violence, safety, other chemical, drug hazards.
- An ageing population
- Obsession to beauty
- Increased health care costs
- Vulnerable population
- Internet
- Unhealthy Malaysian

Source: WHO Non-Communicable Diseases Country Profiles, 2013

A growing and ageing population.

We will become an aged nation in 15 years, when our elderly population aged 60 years and above will contribute to 15% of our total population.
In Conclusion

• In Malaysia, preventive healthcare is the basic principles of future health care delivery which may enhance a healthy population

• Hence reduction in cost for curative care