Medical Education In Malaysia
– Are Standards Maintained

Since the founding of the first medical school in Malaysia at the University of Malaya in 1963, the Ministry of Higher Education (MOHE) has up to date approved the registration of medical programmes in 25 universities, 22 university colleges and 5 branch campuses of foreign universities. Because of this, we are seeing an influx of medical graduates; giving rise to concerns whether certain programmes are of sufficient standard.

There are currently 34 medical schools compared to 9 and 12 medical schools in 2002 and 2007 respectively. Sixteen new medical programmes commenced from 2009 to 2010. There were 3,714 doctors who were provisionally registered (Housemen) in 2011 compared to 1,534 in 2007.

In general, the curricula in all of the programmes are satisfactory as this is monitored by the Malaysian Qualification Agency (MQA) and the Malaysian Medical Council (MMC). However, there is concern when it comes to the quality of students and lecturers. Because of the increased number of medical seats available, students with unsuitable attitudes and aptitudes are gaining entrance in large numbers. The introduction of minimum A level and STPM scores by the MMC in May 2011, for entry into local medical programmes is a small step in the right direction. However, there is some doubt as to the standard of universities/university colleges offering matriculation courses and offering direct entry into their medical programmes based on these non-standardised examinations.

Until 2011, high academic qualifications were the sole criteria for admission to all public medical schools except University Science Malaysia (USM) which required an interview as well. Since 2011, the Malaysian Medical Council’s (MMC) guidelines require all applicants to local medical schools to pass an interview to assess the applicant’s aptitude.

Although the minimum academic qualifications for entry into medical schools are prescribed by the MMC and the Malaysian Qualification Agency (MQA), there are still reports of noncompliance by some private medical schools. There are also reports that some private medical schools take in more students than permitted.

With the mushrooming of medical schools, there is a great shortage of qualified lecturers, especially for the clinical disciplines. Many private medical schools are now dependent on overseas lecturers who may not have recognised postgraduate qualifications for specialist practice in Malaysia. Ideally, clinical lecturers should be in active practice, providing service in hospitals, so that the students can learn from their experience. The ideal ratio of lecturer to student is 1:6-8 for preclinical students and 1:4 for clinical years.

The Ministry of Health through the MMC constantly monitor and review foreign universities recognised under the second schedule of the Medical Act 1971, to ensure that quality and standards are maintained. For those graduates from universities not on that list, qualifying examinations are prescribed by MMC prior to the candidate being eligible for registration. This was reviewed by the Minister of Health in early 2012 where candidates can sit for it in 16 universities for unlimited times, compared to the previous maximum of 3 attempts in only 3 universities.

The examination, which used to be the final year examination of the University of Malaya, National University of Malaysia and University Science Malaysia, is now also conducted by 13 other universities. What is of major concern is the uniformity of these examinations as far as standards are concerned.

This once again raises the issue of a National Licensing Examination for all medical graduates whether local or foreign-trained. An examination such as this will focus on the competencies of the candidate which are deemed essential for medical practice in Malaysia. Such a system is practiced in many countries including the United States and some of our ASEAN neighbours. Unless there is a
standard benchmark, it will be difficult to assure the quality of medical graduates in this country.

The recent announcement that there is no limit to the number of attempts at the MQE raises fundamental questions about the quality of some of these doctors. Where in the world can someone be permitted unlimited attempts at any examination, let alone in Medicine?

Recently, a private college without an undergraduate medical programme announced that it intends to start postgraduate medical programmes. This brings into question whether there are sufficient qualified clinical staff to train these postgraduate students and whether the environment of a private hospital can provide sufficient clinical material and hands on experience to adequately train a specialist. Medical training, especially the training of a specialist is not about didactic lectures in lecture halls; the art of medicine is acquired by mentorship and apprenticeship.

Medical education should not be treated just like any other commodity; to be ventured into as a business for handsome profits. Education of a doctor should be of the highest standard and from this to be derived quality patient care of international standard.

Perhaps it is timely to have a National Medical Manpower Planning Policy so as to rationalize the number of medical schools that this country need.

More emphasis should be put on outcomes rather than process. The current accreditation system is very much process-driven. Also with the number of medical schools it is very difficult for MMC/MQA to monitor all these processes in so many medical schools. A well conducted, reliable and valid national assessment system will ensure that all graduates have the necessary competencies to work in a health care system of the 21st century.

NEWS from the College of Pathologists

11th Annual Scientific Meeting, College of Pathologists, Academy of Medicine of Malaysia
Crowne Plaza Mutiara Hotel, Kuala Lumpur
8th - 10th June, 2012

The 11th Annual Scientific Meeting (ASM), College of Pathologists, Academy of Medicine of Malaysia was held on the 8th – 10th June 2012 at Crowne Plaza Mutiara Hotel in Kuala Lumpur. The number of participants was 301, possibly the largest number of participants thus far. This year’s meeting was organized by the Cluster of Pathology and Laboratory Medicine, Faculty of Medicine, Universiti Teknologi MARA (UiTM) with Associate Professor Dr Ariza Adnan as the Chairperson of the Organizing Committee. The ASM was graciously supported by platinum sponsors namely Abbott Laboratories and Roche Diagnostics. The preparations to receive and welcome delegates for this meeting and its accompanying pre-Congress workshops had begun as early as last year. This year also marked one of the highest submissions of scientific abstracts with 16 selected for oral presentations while 70 were chosen as poster presentations.

The 11th Annual Scientific Meeting began with a Welcome Address by the President of the College of Pathologists Academy of Medicine of Malaysia, Emeritus Professor Dr Cheong Soon Keng. The K Prathap Memorial lecture was delivered by the authority in Haematology, Prof Dr Beng-Hock Chong from St Georges’ Hospital, Sydney entitled ‘New Dawn in Laboratory Medicine’. The Scientific Committee had lined up a diverse array of renowned speakers to present up-to-date and relevant topics by experts in the fields of all Pathology disciplines. This year’s meeting had the participation from our counterpart, The Royal College of Pathologists of Australasia (RCPA). The RCPA conducted a Virtual Microscopy session which benefited participants who were fortunate enough to secure the limited seats. RCPA was also given a symposium slot that covered the Quality Assurance Programme and training opportunities with RCPA. There were parallel break-out sessions in the four disciplines of Pathology over the two and a half day event. A total of 20 booths were set up for exhibitors of which Abbott Laboratories, Roche Diagnostics, Siemens Malaysia, RCPA, Chemopharm, Eppendorf and All Eights were among those that participated. Games and lucky draws were organized by the exhibitors to liven up the event during tea breaks and poster viewing sessions.

The College of Pathologists Annual Dinner turned out to be rather unique this year, being held at the roof top of the Crowne Plaza Mutiara hotel and was entertained by talented medical students of UiTM, who sang their renditions of popular English and Malay ballads while the guests savoured on the hotel’s signature dishes.

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Dr Norizal Mohd Noor, UiTM’s very own Anatomic Pathologist surprised the guests by crooning to a few songs himself.

Two pre-congress workshops were organized prior to the ASM i.e., workshops in Microbiology and Haeematology. “Multilocus Sequence Typing Workshop” was a collaborative organisation with University of Southampton University, UK with Dr Stuart Clarke as the moderator. “Thalassaemia” workshop was moderated by Professor Dr Elizabeth George from Universiti Putra Malaysia. They were held on the 6th and 7th of June 2012 at the Institute of Medical Molecular Biotechnology (IMMB), Faculty of Medicine UiTM in Sungai Buloh Campus and Centre for Pathology Diagnostic and Research Laboratories (CPDRL), Faculty of Medicine UiTM in Selayang Campus. The Haematology and Microbiology Pre Congress Workshops hosted 20 participants each and proved to be an effective hands-on sessions.
NEWS from the College of Obstetricians & Gynaecologists

COLLEGE OF O & G TEACHING CONFERENCE 2011

The College of O & G Teaching Conference 2011 was successfully held at the Grand Dorsett Subang Hotel, Subang Jaya, Selangor from 9th – 11th December 2011. It was held in collaboration with the Ministry of Health Malaysia and the Malaysian Menopause Society.

 Altogether there were 220 delegates to the teaching conference. These included specialists in O & G, trainee medical officers, GPs and senior nurses.

CPD points awarded were 20 (NSR), 10 (MMA-CME Accreditation) and 20 (Nursing Division of Ministry of Health Malaysia).

The Opening Ceremony held on Friday, 9th December 2011 was officiated by the Director-General of Health Malaysia. During this occasion, the College of O & G Clinical Practice Guidelines on Hormone Therapy during Menopause in Malaysian Women was launched by the Director-General of Health.

The lecture topics selected by the organising committee were varied and consisted of topics in obstetrics and gynaecology which were current and practical, with many of them with a medico-legal connotation.

To present the lecture topics, we had six overseas speakers and 17 local speakers.

Active discussions followed each lecture. This trend was healthy. 11 table-top displays were held during the conference incorporating new products in the field of O & G. The table-top display was limited to 11 to avoid distractions to the delegates during the teaching conference.

Overall, the teaching conference was a tremendous success based on the comments from the delegates, speakers, and trade exhibitors.

Dr Ong Hean Choon, Chairman, Organising Committee

2012 Inter-Academy Golf Tournament Raffles Country Club • 8th June 2012
NEWS from the College of Surgeons

College of Surgeons, Academy of Medicine of Malaysia Annual Scientific Meeting and Annual General Meeting
26th to 29th MAY 2012 | KUANTAN, PAHANG

The College of Surgeons, Academy of Medicine (CSAMM) held its Annual Scientific Meeting and Annual General Meeting in Kuantan, Pahang, from 26th to 29th May 2012. Dr Chang Keng Wee, Master of the Academy of Medicine, was the guest of honour at the opening ceremony which also saw the A M Ismail Oration by Dato’ Dr Mahmud Mohd Nor, who gave a moving oration on a Journey of Hope, about the development of paediatric surgery services in Malaysia.

Despite fears that the CSAMM Annual Scientific Meeting would be overshadowed by the larger RACS Annual Scientific Meeting which was held in the Kuala Lumpur Convention Centre on 7th to 10th May 2012, the meeting was well attended with over 450 participants and support from the Industry was as strong as before. The only difference was that we did not invite the presidents of surgical colleges overseas as they had all been invited for the RACS meeting. The Alhady Medal, which is awarded to the best candidate in the Master of Surgery final examination, was won by Dr Siti Fareeda bt Ahmad Nor from Universiti Kebangsaan Malaysia. Dr Lily Sofida Rahim from University of Malaya won the Ethicon Prize for the best free paper. A team from the British Journal of Surgery ran a pre-congress workshop on Medical Writing in the Universiti Kebangsaan Malaysia and later in the IIU (International Islamic University) in Kuantan.

The Annual General Meeting saw the election of a new council, and I was again elected President of the College. As I enter my third year as President, I would like to reflect on the role of the CSAMM these past few years. As always, we believe in continuing medical education, and the Past President, Dr Lum Siew Kheong, had started the Advanced Trauma Life Support course, which belongs to the American College of Surgeons and is an important course for surgeons all over the world. As surgeons take on more extensive and complicated surgery, care of the critically ill surgical patient is important, and this year, the CSAMM started the inaugural Care of the Critically Ill Surgical Patient (CCrISP) course, which belongs to the Royal College of Surgeons of England.

Instructors have been trained in the past three years. The CSAMM also plans to continue with as well as expand the surgical skills courses that are currently run. Besides continuing medical education, the CSAMM continues to be actively involved in the training of surgeons, and several meetings have been held with regional as well as international presidents of surgical colleges regarding standards of training. Together with the Academy of Medicine of Malaysia, we have a common vision of promoting the highest standards of specialist care in Malaysia in a professional, ethical and socially just manner.
NEWS from the College of Anaesthesiologists

The College of Anaesthesiologists (CoA), Academy of Medicine (AMM) have seen two important anaesthetic meetings this year. The 15th World Congress of Anaesthesiologists (WCA) of the World Federation of Societies of Anaesthesiologists was held from 25th to 30th March 2012 in Buenos Aires, Argentina. This huge meeting with more than 9000 delegates and at least 17 concurrent sessions and workshops, is held once in four years. The Malaysian contingent had a booth, publicizing and promoting our upcoming AOSRA-PM 2013. Our Annual Scientific Meeting and Annual General Meeting was held at the Zenith Hotel in Kuantan, Pahang from 19th to 22nd April 2012. This yearly event was shared with the Malaysian Society of Anaesthesiologists that brought the Malaysian anaesthetic fraternity together. It was very well attended with more than 870 delegates. The 17th AGM of the CoA, AMM was held on 20th April and saw interesting discussions on specialists recognition in the National Specialist Register, special interest groups (SIGs) and their importance, anaesthetic consent, guidelines that are being done and those that should be reviewed, our involvement in the subspecialty exit exams and even our financial status.
The Academy of Medicine of Malaysia organised and hosted the launch of the T J Danaraj Book – Doctor and Teacher Extraordinaire on 5th May 2012, aptly at the T J Danaraj Auditorium, Medical Academies of Malaysia. The book is a tribute to the late Professor Tan Sri Danaraj, an exemplary teacher, who dedicated his life to Medical Education in Malaysia, Singapore as well as Saudi Arabia. Professor Tan Sri T J Danaraj was the Foundation Dean and Professor of Medicine to the Faculty of Medicine, University of Malaya. The date 5th of May is also another significant milestone as exactly seven years ago, on 5th May 2005, the Medical Library of the Faculty of Medicine, University of Malaya, was named the T J Danaraj Medical Library.

The occasion was graced by YA Bhg Tun Dr Mahathir b Mohamad and YA Bhg Tun Dr Siti Hasmah. YA Bhg Tun Dr Mahathir, who has kindly written a foreword in the book, was tutored by T J Danaraj in King Edward VII College of Medicine in Singapore, as a medical student. The function was attended by more than 250 guests who were mostly former students of Professor Danaraj. There was a lot of fellowship and camaraderie amongst the attendees.

Professor Wong Hee Ong, who wrote and compiled the book, was present and she autographed many copies of the book. Professor Dato’ Anuar Zaini, a former student and former Dean of the Faculty of Medicine & Vice-Chancellor of the University of Malaya, gave a very stimulating presentation on Medical Education – Then and Now.
A Brief Commentary on Thamboo John Danaraj

A Man, A Leader, A Great Teacher, With A Mission And A Vision, Who Dedicated His Whole Life, His Calling To Excellence In Medicine. Nothing Less

Dr Cheong Yoke Leong

Since 1905 the only medical school to serve Singapore and Malaya was established in Singapore.

In the post World War II era it was clear that Malaya and Singapore required more doctors for the expansion of the medical and health services.

After independence the Malaysian Medical Association (MMA), formed by the Alumni of the King Edward VII College of Medicine, decided that the only hope of overcoming the acute shortage of doctors in the country was to establish its own medical school to train more doctors. A memorandum was sent to the Prime Minister Tunku Abdul Rahman to expedite the setting up of a medical school in Malaya. The Prime Minister was sympathetic to the proposal and gave his active support.

Then began the search for someone to Head the School, preferably someone from the local with experience in governance and academic affairs. The obvious choice was T J Danaraj who was then Dean of the Faculty of Medicine in Singapore. However Danaraj was not interested as he was well entrenched in Singapore and had already increased the student intake and embarked on developing postgraduate education. With much persuasion from his colleagues he finally accepted the appointment as Foundation Dean of the new Faculty of Medicine to be established in Kuala Lumpur. He took it on as a challenge to create and apply new concepts in medical education. When he arrived in Kuala Lumpur he faced a shrub covered hill. "I found that funds had been provided for the faculty building, but to my surprise none had been appropriated for a hospital". He overcame many obstacles and 3½ years later an imposing Faculty building with its own Teaching Hospital stood on the once barren hill.

He was very impatient and with great faith, seen by others as an act of folly, he admitted the first batch of 40 students into the premedical year to be taught basic sciences in the Faculty of Science while the planning, building and staffing for the new Faculty was going on simultaneously. He worked hard and supervised every detail to see that the building was completed according to schedule. The completion of the hospital was delayed due to an unforeseen strike of overseas seaman and local electricians. Essential supplies and equipment could not be delivered in time.

The concept of the University Hospital was that it had a dual function – that of patient care and education. Very early in the training of medical students the humanistic aspect of medicine was emphasised; that the patient is a human being and should be treated as a person and not as a "case". How does one teach "caring medicine"? We can talk about it, we can write about it, but most of all we have to live it - that is all that humanistic medicine is about says T J Danaraj. Dr Tan Puay Eng recalls how there was a child in a wheelchair being presented for discussion. "The child was uncomfortable and apprehensive. Our professor walked over to him and held his hand. The child clung to his hand and felt assured." Dr Anne Liew once referred to a patient as a case and was rebuked, "Patient, girl, patient, not a case!"

He had a passion for excellence in medical education. His aim was to produce doctors of the highest calibre to serve the country. When he went to Jeddah to assist in the setting up of the medical school he was described by the Vice Dean, Prof Ossama Shobokshi as a "fighter" but he was not interested in trivial matters. His aim was clear, namely to raise the academic standard of the Faculty to the highest level.

In planning the curriculum he recognised the depth of knowledge in basic sciences and clinical clerkship as the basis of medical practice. He maintained that good service to patients was the central core of any educational programme. Hence teaching began with the patient, continues with the patient, ends with the patient, using books and lectures as tools. He stressed a great deal on making a diagnosis based on history taking (listening to the patient) and conducting a proper physical examination. "I salute Prof Danaraj who diagnosed Typhoid Fever without the need of any test" says Dr Low Boon Song. "The importance of the power of observation is a lesson he taught us well" wrote Dr Wong Yim Onn in describing 'The Teacher'.

The other emphasis was that medicine is a life long course, extending over a life time. Hence the curriculum is one of education - self education - and less of instructing. Dr Yeoh Oon Thiam recounts three very important principles which Danaraj taught him; one of which was "Medicine is a continuum. Stop learning and that is the end of one's career".

Born on 1st February, 1914 in Ipoh, Perak, Thamboo John Danaraj (TJD) was 2nd in a family of six but after the death of his mother, his father remarried and 4 more were added to the family. His boyhood days were as an ordinary child; attending the Anglo Chinese Boys' School in Ipoh, joining in boy scout activities, playing in the river behind his house and cycling through the back lanes in Ipoh town. Not only did he inherit his disciplinary traits from his father who was a strict disciplinarian but also a great sense of social concern for the less fortunate and the down and out.

His philosophy in life is summed up as follows.

Not ever to compromise on the basic principle of honesty, not to submit to pressure whatever form that took professionally, politically; not to borrow or go into debt. Cheating in whatever form was frowned upon. He strongly believed in education, especially self education. Not to hurt others but to be kind and understanding of peoples' faults; not to discriminate on account of race, religion, wealth, status or any other criterion between one human being and another. In concluding his Tun Ismail Oration he emphasised that "the one thing that is important to me... is the transition of a postwar dream to a political reality, that is, the creation of a multiracial society".

Experiences as a doctor took him to the East and West coast, as well as to the North and South of the Malay Peninsular. During the Japanese occupation of Malaya he was Health Officer in the Kinta District dealing with the prevention of outbreaks of diseases such as typhoid and malaria. He ensured...
a clean environment, safe water supply and proper sewage disposal.

After the war he joined the teaching staff of the King Edward VII College of Medicine in Singapore and began his life long academic career of developing medical education to the highest level. His life became very much involved in the lives of hundreds of medical students, in their hopes and aspirations.

His reputation amongst students of being someone who is ‘fierce’, will not stand any nonsense preceded him before they even encountered him. They would run in opposite directions when they see or hear him coming from a distance. Tun Mahathir in his Foreword to the book entitled “TJ Danaraj: Doctor and Teacher Extraordinaire” noted that “I was in my clinical years, his name was already well-known throughout the College. He was known for his strictness……”. He was also described as a very hard taskmaster, strict but impartial by Dr Samsudin Hussain. However invariably the initial ‘fear’ on first encounter turned into respect, love and friendship. His “impatience is matched by the desire to obtain the best for his patients and students as well as from his students and staff” wrote Gioria Chan in the book.

In 1975 he was awarded Emeritus Professor by the University of Malaya and he retired as Dean and Professor of Medicine. He continued to teach the students and was an honorary Consultant to the University Hospital.

At the invitation of Dr Abdullah Basalamah, Dean of the Faculty of Medicine, King Abdulaziz University in Jeddah, Saudi Arabia he was appointed Advisor to the Dean and Professor of Medicine. In September 1977 he left for Jeddah where he spent three years assisting in setting up the curriculum, advising in the Master Plan of the new Health Sciences Centre and teaching and training the students in their clinical years. In the same way as those whom he taught in Singapore and Malaysia, the students found in him someone who had their interest at heart and wanted to get the best out of them. They tried hard and achieved the high standards he set for them. They respected and adored him. After graduating the first batch of students he decided to return to Malaysia and to continue teaching the students on an honorary basis.

In his Tun Ismail Oration he emphasized the importance of not transposing “local medical practice into big business, and involve our doctors in board room activities in pursuit of shareholder profits”.

“I remembered he said that anyone who thinks that doing medicine will bring him plenty of money is truly mistaken and that those wanting to make plenty of money please go and do another course right now”, and Dr Neoh Hock Sun says that “he was really right about that”.

In addressing the Medical Alumni Association in July 1985 on being conferred honorary life membership he spoke of his concern about the poor doctor patient relationship: “that advanced technology has dehumanized us, that the fragmentation of medicine does not provide for the personal physician, that the monetization of medical care has changed medical practice to a purely business activity”. He felt that one of the reasons for this is an “inadequate understanding and knowledge of medical ethics and professional attitudes in medical schools”.

In closing his address he said:

“Individually I ask of you: first that at all times you practise the best caring medicine as well as scientific medicine. Secondly you must ensure that all segments of our population receive good medical care”.

Tunku Abdul Rahman said this of TJD: “Hundreds of his colleagues and students and many thousands of patients will testify, he was the inspiration and driving force behind what was a new and vital project, important to the health education of the new nation of Malaysia”.

In recognition of his contribution to the country he received from His Royal highness the King of Malaysia the Panglima Setia Mahkota, the title of Tan Sri in the last years of his life he was afflicted with Parkinson’s disease and gradually succumbed and died on March 19, 1996.

M E D I C A L  E D U C A T I O N  –  T H E N  A N D  N OW

Prof Dato’ Anuar Zaini, at the launch of the TJ Danaraj Book on 5th May 2012

I thank the Master and the Academy of Medicine of Malaysia for giving me this honour to a say a few words at this auspicious gathering to launch the book and remember a medical patriot - doctor and teacher extraordinaire - Tan Sri Professor TJ Danaraj (TJD).

Describing his clinical experience during the Japanese invasion of Peninsular Malaysia at our UM Alumni Association Dinner in 1985, TJD said - “we saw a lot of patients in our practice, but how wisely we diagnosed and treated them I do not know, for there was no supervision of any kind, none at all; we graduated as full fledged doctors and took total responsibility. There were only 3 specific drugs at that time - quinine, arsenic and emetine - all other treatment were empirical!!! But still I found practice interesting”.

With the immediate post war discovery of wonder drugs like penicillin, medical practice was more thrilling! He said “Responses to treatment with these drugs became miracles under my own eyes. To me, brought up in a traditional bedside approach, each new drug/ investigation had to be read about, learnt well and weighed carefully before being applied to my patients – it was impossible to practice without reading and keeping up to date and that was not easy”.

What do we have nowadays? How many of us still believe in the finest art of beside medicine and read around our respective patients and take great care to uphold the ideals of “to cure sometimes, to relieve often, to comfort always”.

I have been and seen the post TJD era till now and I have great concerns of its gradual but sure deterioration. TJD predicted and talk incessantly about what was happening to the kind of care which he described it as Humanistic Medicine and you can imagine where that came from!

To many of us Humanistic Medicine means all sorts of things. TJD said “But to the patient - it means only one thing - does my doctor care for me? - Patients
It may be hard to swallow, but the origin of this deterioration must be partly shared by the teaching institutions. As you know there are already 40 medical programs in this country with 28 million population and just slightly more than half of that are in Australia with the same population. I understand there are more in the pipeline.

With the increased in numbers of new medical schools, clinical placement for these students and the assurance of getting adequate clinical experience have become a serious problem. There are only 3 accredited University Hospitals in the country and the rest are somewhat reluctant partners, essentially public hospitals forced to accommodate the flood of students. Can you accept the fact that one hospital is being shared by 4 - 5 medical schools? Honestly, the learning environment will look and taste like stale rojak!!! Worst still when those involved do not interact, communicate or develop a sense of partnership but resorted to independent dealings with the hospital authorities, giving a poor example of what the medical profession should be.

Yang Amat Berbahagia Tun, I once heard quite some time ago, when the people complained about rapid escalation of cost of private health care, you were allegedly quoted to have said “Flood the Market”. With due respect Tun, honestly I do not think you wanted it to come to this level of madness!

In one of my deliberations at a meeting organised by MMA some years back, I asked then - whose decision is it to start a medical school? Is it the politician, the businessman, the community at large or the medical profession? What do we see - every political party want to have their own, every state in Malaysia have their own reasons to justify their creation, businessmen and corporate entities also jumped into the band wagon seemingly to harvest the profit (first), to get glamour and stature of having their own medical school in their own backyard - not only within the country but partnered international institutions to get our children across to those locations some of which we know are quite dodgy!!! We are going to see very soon about 5000 medical graduates waiting to enter the pre-registration training every year.

What worries me - they come from all shades of teaching and training. This diversity and the inevitable ‘variability in standards’ of cognitive skills, clinical competency and attributes were surely brought about by the differences in the level of exposure, range of experience and credibility of academic evaluations. We are beginning to see and hear horror stories about Housemen dropping tools at 4.30pm sharp without proper handing over to their colleagues.

Their perception that their working hours are flexy and working just 12 hours a day is now the norm. At the same time we are seeing parents complaining of how severe their children have been tortured and harassed within this flexy mode. The flexy mode is a logistic compromise and was brought in because of the glut of graduates and MOH has not got adequate training locations for them. As it is, there are already more than 10 HO in a typical general medical ward in some hospital that may be more. MOH is trying to rapidly sort this issue. However, the fact that we are compromising quality of training by simply providing an ad-hoc solution, will have serious impact on the type of doctors we are going to have manning the front-line medical and health care services in future.

If the government is serious about quality and standards of training across the board - PostGrad training included and that the public hospitals be used for teaching, then it is imperative that proper credentialing be put in place and that adequate infrastructural and budgetary support be given to enhance the credibility and stature. If not we are going to see products similar to those returning from the so called dodgy institutions. It does not matter which medical school they came from within the country, it matters when all of these graduates will finally congregate in MOH by virtue of the existing overarching statues and regulations.

As you all know majority of the senior and experienced clinicians are in the private sector. It is now time for them to consider opening up their doors. I must tell you of what happened many years ago when I started at Monash here and having the same dreams as TJD to have one day our own teaching hospital where we as teachers grow and develop with our students. Inevitably the patient will benefit from the rigors of academic sanctions and innovations.

I approached a group of senior consultants and described to them the possibility
and pleasure of being the pioneers in conducting actual clinical teaching in the private environment. This was what they said "Prof, we came out of the university to be away from the students and now you want to bring them here in our private hospital?" - my heart dropped. I was blatantly naive.

Can you imagine what TJD would say hearing this from among his own graduates. Teaching and learning should be a life-long endeavour.

However, recently I was most pleased to meet and interact with a much more enlightened and caring ex-student of mine who said - "Prof we welcome you and your students, it is our obligation, our duty to serve as a teacher - every doctor should uphold and sworn to the principles of 'educate and assist thy fellow colleagues'.

One told me .... "Prof, I may not be the best of the students you had but over the years I found solace in helping people get the best treatment and best care (affordable care) and the presence of your students around us will further enrich our environment - that alone is enough incentive for us to have you in our small hospital - we want to be the pioneer in this endeavour.

As a private medical school we had to engage as many of our colleagues outside there as possible to make available a small window of their time to teach our students, and it has been in most instances an enriching exercise but as I related to you earlier I had problems with hospital authorities and their stakeholders which in some instances include resident clinicians.

Let me tell you of another harrowing incidence when we were trying to get an MOU with one of the biggest HMO group in the country to use their facilities for teaching.

The group captain said "we are a business entity - providing medical care under our auspices is a business activity and this MOU is a business deal - we demand compensation for every minute of the time used by our doctors - our surgeons cost around 3 million ringgit each, every minute they are occupied with your students means a lost revenue to us".

Till today, I have not recovered from that shock. It was a real dilemma and I had a lot of difficulty to reconcile my ideals and what I am witnessed in reality. I pinched myself and asked - "Are you hearing what I am hearing - Anuar?"

I apologized to my Aussie colleagues and did not know where to hide my face in embarrassment.

As Dean and Director of the UMMC many years ago, I had lots of opportunity to read important documents left by TJD on the formation of UM Medical centre and the importance to make sure the vision and mission of the UMMC be kept intact i.e. to support all the academic and learning activities of the faculty. There should not be separation and division of these ideals and everyday. I mean everyone whether they are in the hospital or in the faculty should understand these principles and execute all the duties be it patient care or propagation of academic activities, to do so in unison and having the same frequency of thoughts. Of late, I am hearing of the contrary and would like to plead to those concerned to come back to 'pangkal jalan'. I cannot do anything anymore as I am now a stranger but what I can do is to pray that Almighty put back to 'pangkal jalan'. I cannot do anything anymore as I am now a stranger but what I can do is to pray that Almighty put back

Lastly, with the recent first reading of the amended Medical Act by the current Parliament, we are hopeful that MMC will have better grasp of the medical profession in Malaysia. It has been too long overdue. However, unlike GMC and Australian Medical Council, MMC will still be part of MOH. We could not sever the umbilical cord and in many of the activities of MMC will still be at the pleasure of Minister of Health. Quality and standards of Medical Education and Training, credentialing of clinical expertise and the behaviour of medical community should be closely monitored and sanctioned by MMC. We in the council should address these issues in a more systematic manner and our maternal linkage to MOH should not be a hindrance in this endeavour.

In his parting remarks the the Alumni Association TJD said:

"The responsibility of the future of Medicine rests in a large measure on your shoulders - the graduates of the first Medical School in Malaysia, the fruition of many years of my own frustrations, hopes and longing."
The 46th Malaysia-Singapore Congress of Medicine with the participation of the Academy of Medicine, Singapore, the Hong Kong Academy of Medicine and the Royal College of Physicians, London will be held at the Shangri La Hotel, Kuala Lumpur, from 12th to 14th July 2012.

The theme of the 46th MSCM is “Cardiometabolic Diseases: Are We Up for the Challenge?”. The scientific programme will address the current challenges of cardiometabolic health, both globally and in the region. The scientific content will include the epidemiological, clinical and laboratory aspects of cardiometabolic diseases, alongside the key public health issues of preventative strategies. The two-day Congress will be preceded by a Cardiac Imaging hands-on workshop under the auspices of the College of Radiology, Academy of Medicine of Malaysia. Highlights of the meeting include the 19th Tun Dr Ismail Oration by Tan Sri Dato’ Dr Lin See-Yan and the Young Investigator Award. A trade exhibition will be held at the congress venue. The Advisor is Professor Dato’ Dr Khalid Yusoff and the Organising Chairperson is Professor Dr Roslina Abdul Manap from the College of Physicians, Academy of Medicine of Malaysia. Duli Yang Teramat Mulia Raja Muda Perak, Raja Dr Nazrin Shah will be the guest of honour at the Opening Ceremony.

Cardiovascular and metabolic diseases including obesity, diabetes mellitus, dyslipidaemia, and hypertension are the leading and preventable causes of death worldwide. The current scenario prognosticates a dramatic increase in disease burden over the next two decades, leading to a worldwide pandemic. Asia-Pacific countries are now seeing a rapid increase in cardiometabolic disease and its attendant complications.

**PLENARY 1 – Bridging the Realities and the Possibilities: Medicine in the Tropics**

**Professor Dato’ Dr Khalid Yusoff (Malaysia)**

Professor Dato’ Dr Khalid Yusoff, is a Professor of Medicine and Senior Consultant Cardiologist and the Foundation Dean of the Faculty of Medicine, Universiti Teknologi MARA (UiTM). Prior to taking up his current appointment, he was the Dean of the Faculty of Medicine at Universiti Kebangsaan Malaysia. As the Foundation Dean, Faculty of Medicine, UiTM since 2004, he was instrumental in creating an innovative curriculum through a close rapport with the University of Melbourne. He has been involved in establishing three new medical and health campuses to support rapid expansion of both undergraduate and postgraduate programmes under his leadership. Research is being given specific focus with the setting up of the Institute for Medical Molecular Biotechnology (IMMB) and The Centre for Translational Research & Epidemiology (The CenTRE). He was recently appointed by the Rt. Hon. Prime Minister of Malaysia to the newly-formed National Science and Research Council (NSRC), and co-chairs the NSRC’s Evaluation of Research Performance and Impact of Public Research Assets. He is appointed by the Hon. Minister for Science, Technology and Innovation to the National BioEthics Council.

Professor Dato’ Dr Khalid Yusoff is the Founding President of the Malaysian Society of Hypertension, and the current President of the College of Physicians, Academy of Medicine of Malaysia. He established the Medical Deans’ Council in 2001 and served as its Foundation Chairman. He is the Overseas Advisor to the Royal College of Physicians of Edinburgh. In Medicine, he is an External Examiner to a number of universities at home and abroad, as well as an examiner in the Membership Examinations of the Royal Colleges of Physicians of the United Kingdom. He is a Visiting Professor to the Anglia Ruskin University, United Kingdom.

Professor Dato’ Dr Khalid Yusoff has received a number of recognitions and awards. He received the Gold Award from the Royal College of Physicians of London in 1995. Both UKM and UiTM accorded him their highest award, namely Anugerah Citra UKM in 2002 and Distinguished Scholar Award UiTM 2011. In 2000, HRH the Sultan of Kelantan bestowed on him the Darjah Kebesaran Dato’ Paduka Setia Mahkota Kelantan (DPSK) with a title of Dato’.
Associate Professor Dr Loke Kah Yin (Singapore)

Dr Loke Kah Yin is a senior consultant paediatrician and paediatric endocrinologist at the University Children’s Medical Institute, National University Hospital in Singapore. He is also an Associate Professor and leads the Paediatric Endocrine Division at the Department of Paediatrics, National University of Singapore. Dr Loke trained as a clinical fellow at the Institute of Endocrinology, the Children’s Hospital in Camperdown, Sydney and subsequently, a research fellow at Pediatric Endocrine Division at UCLA Medical Centre. He returned to the National University Hospital, and established the clinical, research and teaching arms of the Paediatric Endocrinology Service, including the organisation of annual activities for children and adolescents with diabetes, the NUH Turner syndrome support group from 1998, and the NUH Osteogenesis Imperfecta Support Group in 2001. He has over 40 publications in peer-reviewed journals. His major research interest is in the genetics and epidemiology of inherited adrenal disorders and obesity.

Professor Dr Chin Kin Fah (Malaysia)

Dr Chin Kin Fah qualified in medicine in the University of Aberdeen. He then pursued surgical training in Glasgow and Yorkshire, being awarded Fellowship CCST in general surgery of the Royal College of Surgeons and Physicians of Glasgow in 1998. He was a fellow in the Academic Surgical Unit, University of Hull before taking up a consultant surgeon post in North Yorkshire. In 2008 he was appointed an Associate Professor and Consultant Upper GI Surgeon to the University of Malaya, Kuala Lumpur, Malaysia, with special interests in laparoscopic GI surgery, minimally invasive day surgery, clinical nutrition and metabolic surgery. Within a year, he was formally appointed to a permanent position as a full Professor in General Surgery in Universiti Malaya. He runs a comprehensive advanced laparoscopic cancer surgery service in UM, currently the only centre in Malaysia that offers routine thorascopic and laparoscopic esophagectomy and gastrectomy for oesophago-gastric cancer. He is currently the Director of the Minimally Invasive Laparo-Endoscopic Surgery (MILES) Skills Centre in UM and Lead Clinician for Surgical Nutrition Support Team. He has been elected to the position of Vice-President of the Parenteral and Enteral Nutrition Society of Malaysia (PENSMA), Treasurer and Committee Member to ‘Empowered - The Cancer Advocacy Society of Malaysia’, Board Member of the Asia Endosurgery Task Force, Committee Member of the Asia Pacific Bariatric Surgery Society, Editor of AETF Journal and medical columnist of the Chinese-language newspaper, ‘Red Tomato’.

Associate Professor Dr Alice Kong Pik-Shan (Hong Kong)

Dr Kong graduated from The Chinese University of Hong Kong (CUHK) and completed a residency in internal medicine and fellowships training at the Department of Medicine in Queen Elizabeth Hospital, Hong Kong. She had her overseas training as postdoctoral fellow at the Division of Endocrinology, Department of Medicine at University of California, San Diego, United States. Dr Kong is currently Associate Professor in the Department of Medicine and Therapeutics, CUHK.

Dr Kong’s research has focused on type 2 diabetes and obesity in adults and adolescents. She has published over 110 articles in peer-reviewed journals.