

ELECTIVE REPORT- MALAYSIA

Malaysia situated in south-east Asia consists of two different parts Peninsular Malaysia and East Malaysia. The South China Sea separates these two different parts. According to World Bank the population of Malaysia is encroaching 27.5 million. Infant mortality rate in 2009 was 6 deaths per 1000 births and life expectancy at birth in the same year was 75 years.

My elective was carried out in Sungai Buloh, Selangor which is part of Peninsular Malaysia.

The healthcare system has been praised for being very efficient. The government spends 5% of the government development budget on health care. Currently free services are only provided to Malaysian citizens; however the government is hoping to expand its services so that immigrants and tourist will also have access to good quality care. Alongside the universal health care system the private healthcare system is also growing. Although the healthcare system has generally been praised there are some setbacks which the government is tackling. The main issue is that those living in rural areas do not have access to adequate healthcare; tele-primary care has been brought in to counter these problems. This involves delivery of health related services over telecommunication technologies therefore specialist advice can be obtained over the phone.

The prevalent medical conditions in Malaysia are malaria, tuberculosis and measles as well as cardiovascular events. In 2009, according to World Health organisation there was just under 30 000 people with Malaria. Since the 1960s the malaria control programme has been successful in eliminating malaria from most areas in Peninsula Malaysia however has not been able to eliminate malaria from the smaller ethnic minority groups in Sarawak and Sabah. The programme has been successful; the average number of cases of reported malaria fell from 12000 in 2000-2002 to 7000 in 2009. Funding for this scheme came entirely from the government.

Tuberculosis is also fairly prevalent in this country in 2009 there was 110 per 100000 population. The incidence of TB is decreasing with the new government initiative to vaccinate all children who are one year old.

In contrast to the United Kingdom the prevalent medical conditions are asthma, diabetes, cardiovascular conditions such as hypertension and stroke. The difference for this could be primarily due to location. Malaysia is a tropical country therefore infectious diseases are more prevalent. However the diseases prevalent in the UK are increasing in prevalence in Malaysia and this will be discussed.

The disease with the highest mortality in Malaysia is ischaemic heart disease. From the early 1990s there became an increasing trend of lifestyle killer diseases such as heart disease,

cancer and stroke. The rapid pace of development has led to the changing pattern of diseases as countries underwent economic development. In Malaysia it is the leading cause of death, a third of all patients. Estimation was that there are 40 000 new stroke cases annually in Malaysia. The reason for why this has become the factor leading to the highest mortality rate is of lifestyle changes, lack of exercise and smoking. These are risk factors for the increase of development of cardiovascular diseases such as hypertension and diabetes. According to WHO statistics 60% of Malaysians lead a sedentary lifestyle, 14% of men are obese, 20% of women and over 50% of men are smokers. If we look at these figures it is of no surprise that coronary heart disease is one of the more prevalent diseases in Malaysia.

Medical services are very organised. Various screening services are in place. One example is the 'Well woman' screening for post menopausal treatment. Therapeutic and diagnostic services are also available such as having magnetic resonance imaging as a gold standard for imaging the brain and spinal cord. Malaysia has a high standard of oral hygiene and dental care. Alongside the normal dental facilities, there are also dental implants services available as well as orthodontics.

A medical situation I would like to write about was one I encountered whilst I was in Singapore. Whilst walking along the path that runs along the beach an elderly gentleman collapsed ahead of me. I rushed over to see if he was ok, unfortunately the wife spoke limited English and was very distressed. Fortunately he was breathing and woke up after a minute. When I reflect on this situation it made me realise that a medical problem could arise anywhere not just on a ward in hospital and as medical professionals we need to be able to perform basic life support and help to the best of our abilities. Although this situation turned out to be minor in terms of medical emergencies it highlighted the importance of basic communication skills as I quickly realised that the wife couldn't speak English so I tried to use hand gestures.

On the whole I have thoroughly enjoyed my trip in Malaysia. The people, cuisine, culture and country were all spectacular. I learnt a lot on my medical placement, in terms of how medicine is different in another country. As not everyone could speak English it was difficult in situations to communicate, however I welcomed the challenge. I found it interesting to learn about infectious diseases and would like to look into doing medicine for some time abroad.