

Malaysian Family Physician

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Official Journal of the Academy of Family Physicians of Malaysia
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About MFP

The *Malaysian Family Physician* (MFP) is the official journal of the Academy of Family Physicians of Malaysia (AFPM). It is jointly published by the Family Medicine Specialist Association (FMSA) of Malaysia. The MFP is published three times a year. It also started an Online First section in January 2021, where accepted articles are published online ahead of the issue.

Goal: The MFP is an international journal that disseminates quality knowledge and clinical evidence relevant to primary care. The journal acts as the voice of family physicians, researchers and other members of the primary care team on clinical practice issues.

Scope: The MFP publishes:

- i. Research – Original Articles and Reviews
- ii. Education – Case Reports/Clinical Practice Guidelines/Test Your Knowledge. We only encourage case reports that have the following features:
 1. Novel aspects
 2. Important learning points
 3. Relevant to family practice
- iii. Invited debate, commentary, discussion, letters, online, comment, and editorial on topics relevant to primary care.
- iv. A Moment in the Life of a Family Physician – We encourage submission of a short narrative to share perspectives, voice, views and opinions about a family physician's experience that has affected their practice or life.
Read our Information for Authors section to learn more about these article types.

Strength: MFP is the only primary care research journal in Malaysia and one of very few in the region. It is open access and fully online. The journal is indexed in Scopus and has a strong editorial team and an established pool of readers with increasing recognition both locally and internationally.

Circulation: The journal is freely available online.

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All correspondence should be addressed to:

Professor Dr. Ping Yein Lee

Editor-in-Chief

Malaysian Family Physician

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The Malaysian Family Physician welcomes articles on all aspects of family medicine in the form of original research papers, review articles, CPG review, case reports, test your knowledge and letters to the editor. The journal also publishes invited debate, commentary, discussion, letters, comment, A Moment in the Life of a Family Physician and editorials on topics relevant to primary care.

Articles are accepted for publication on condition that they are contributed solely to the Malaysian Family Physician. Neither the Editorial Board nor the Publisher accepts responsibility for the views and statements of authors expressed in their contributions. All papers will be subjected to peer review. The Editorial Board further reserves the right to edit and reject papers. Authors are advised to adhere closely to the instructions given below to avoid delays in publication.

All manuscripts must be submitted through the Open Journal System (OJS).

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 - The manuscript **contains all the sub-headings required** for the article type (refer below).
 - The manuscript uses a **single-spaced, 12-point font and uses italics rather than underlining** (except URL addresses).
 - **All figures, tables and illustrations are placed at the appropriate sections in the manuscript file** rather than at the end of the manuscript or submitted separately.
 - Use left-aligned paragraph formatting rather than full justification.
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 - Follow the referencing style provided in the References section below.
 - Provide URLs for references where available.
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3. The **Title Page** must be uploaded separately from the main manuscript file in Microsoft Word. Please refer to the required sub-headings in the Title Page section below.
4. A **Cover Letter** must be signed by the corresponding author on behalf of all authors. This letter must include this statement “this manuscript is my (our) own work, it is not under consideration by another journal, and this material has not been previously published.”
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- **Article Type:** Original Research / Review / CPG Review / Case Report / Test Your Knowledge / Letter To Editor
- **Title:** Please state the title in detail to include the study design, particularly for original research.
- **Author(s):** The full names, professional qualifications and institutions of all authors.
- **Shortened name of author(s):** should be written in the style of surname or preferred name followed by initials, e.g. Abdullah KS, Rajakumar MK, Tan WJ, for future indexing.
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MAIN MANUSCRIPT

For every article submitted, please follow the requirements according to the type of article.

Original Research (Including Clinical Audit Article)

The original research (including clinical audit) should be conducted in the primary care setting on a topic of relevance to family practice. Both qualitative and quantitative studies are welcome. The length should **not exceed 3000 words with a maximum of 5 tables or figures and 30 references**. Please include the following sub-headings in the manuscript:

1. **Title:** State the title based on PICO, including study design.
2. **Abstract:** Structured abstract (Introduction, Methods, Results and Conclusion) of no more than 250 words.
3. **Keywords:** 3-5 keywords, preferably MeSH terms.
4. **Introduction:** Clearly state the purpose of the article with strictly pertinent references. Do not review the subject extensively.
5. **Methods:** Describe the study in sufficient detail to allow others to replicate the results. Provide references to established methods, including statistical methods; provide references and brief descriptions of methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. When mentioning drugs, generic names are preferred (proprietary names can be provided in brackets). Do not use patients’ names or hospital numbers. Include numbers of observation and the statistical significance of the findings. When appropriate, state clearly that the research project has received the approval of the relevant ethical committee. For an RCT article, please include the trial registration number) and follow the CONSORT checklist. Other study designs must also follow a reporting checklist, which can be found at <https://www.equator-network.org/>.
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13. **Data sharing statement:** Please describe your data sharing plan. State if your raw data is uploaded in publicly available databases, shared via controlled access repositories or only available upon request.
14. **How does this paper make a difference in general practice?:** This section should be written in bullet points (up to five points) and must not exceed 100 words.
15. **References:** Refer to the References section below for more details.

Review

All types of review articles, including narrative review, scoping reviews and systematic reviews are accepted for publication in MFP. A comprehensive review of the literature with a synthesis of practical information for practising doctors is expected. For a systematic review, the PRISMA checklist (<https://www.equator-network.org/reporting-guidelines/prisma/>) must be followed. For a scoping review, the PRISMA-ScR checklist (<https://www.equator-network.org/reporting-guidelines/prisma-scr/>) should be followed. The length should **not exceed 4000 words with a maximum of 5 tables or figures and 40 references**. Please include the following sub-headings in the manuscript:

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14. **Funding:** Please state if the study was funded; if so, by which institution and the funding ID.
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Case Report

Case reports should preferably be less-commonly seen cases that have an educational value for practising doctors. Only case reports that are **novel, have important learning points and relevant to family practice** will be accepted for publication in this journal. The case report must be written in a **patient-centred manner instead of a disease-centred focus**. The length should **not exceed 1500 words and cite no more than 20 references**. Before submitting the case report, the authors must ensure that the patient's identity is protected both in the text and pictures. This patient consent form must be signed and uploaded during submission. Please include the following sub-headings in the manuscript:

1. **Title:** Use an interesting title to show the new learning points and include the term "case report" in the title.
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4. **Introduction:** Describe the condition and aim of the case report.
5. **Case Presentation:** Describe the case in detail.
6. **Discussion:** Discuss the case with existing literature.
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13. **What is the implication to patients?:** Describe any potential implication to patients based on the learning points from this case report.
14. **References:** Refer to the References section below for more details.

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The CPG should be relevant to primary care. Its length should **not exceed 4000 words and 40 references**. An abstract is required (no more than 300 words) together with the keywords. The CPG review should be written with case vignettes to illustrate its application in primary care practice.

1. **Title:** State the scope of the CPG, include the latest version or year for revised CPGs.
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5. **Development process of the CPG:** Describe the development process of the CPG, e.g.: who are the team members involved, what methodology was used, how was the evidence gathered, how was the decision made on the recommendations, was the outcomes validated, how was the CPG disseminated and implemented, etc. Follow the AGREE Reporting Checklist (<https://www.equator-network.org/wp-content/uploads/2016/03/AGREE-Reporting-Checklist.pdf>) wherever possible.
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9. **Case vignettes as examples of application:** Use case vignettes to illustrate the application of the CPG.
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Test Your Knowledge

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3. **Keywords:** 3-5 keywords, preferably MeSH terms.
4. **Case Summary:** Describe the case.
5. **Questions:** State the questions.
6. **Answers with discussion:** Provide the answers and discuss them with support from the literature.
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We encourage submission of a short narrative to share perspectives, voice, views and opinions about a family physician's experience that has affected their practice or life. It could be about being a doctor, educator, administrator/management, researcher, student or even patient. This type of article should be a **reflective piece of about 500 words in length**, and can be accompanied with photo(s). The journal also accepts articles which anchor on the photo(s) as the main content, this can be accompanied with captions (not more than 100 words) that describe the photo(s) with author's reflection on it.

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- **Standard journal article-Corporate Author:** International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. *N Engl J Med.* 1997 Jan 23; **336**(4):309–316. doi:10.1056/NEJM199701233360422
- **Books and other monographs-Personal Author(s):** Stewart M, Brown JB, Weston WW, et al. Patient-Centered Medicine: Transforming the Clinical Method. Thousand Oaks, California: Sage Publications; 1995.
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 2. Author, 2019
 3. Author, 2016
 4. Hashim S, Ayub ZN, Mohamed Z, et al. The prevalence and preventive measures of the respiratory illness among Malaysian pilgrims in 2013 Hajj season. J Travel Med. 2016;23(2):tav019. Published 2016 Feb 8. doi:10.1093/jtm/tav019
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Plenary Abstracts

- 1 **Core values in family practice: The undeniable connection between mind, body and soul**
Dr. Nik Mazlina Mohammad
- 2 **Navigating the future of family practice**
Dr. Mastura Ismail
- 3 **Global engagement in improving respiratory health**
Professor Dr. Khoo Ee Ming

Symposium Abstracts

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Dr. Faridah Mohd Zin
- 2 **Integrating lifestyle in family practice**
Dr. Wong Ping Foo
- 3 **Exploring life outside of work**
Dr. Mohazmi Bin Mohamed
- 4 **Ethical issues in primary care**
Dr. Aimi Nadia Mohd Yusof
- 5 **Handling medico-legal complaints**
Dr. Farah Nadzirah Zainuddin
- 6 **The mind as a healer: Relaxation in primary health care**
Ms Harnisha Haidhir
- 7 **Stigma in primary care**
Dr. Alyani Mohamad Mohsin
- 8 **Stigma among health care providers and effect on decision making**
Dr. Siti Hazrah Selamat Din
- 9 **Self-stigma: Internalized stigma and strategies to deal with it**
Ms. Masyitah Minhad
- 10 **Nutrition & adolescent: Preventing chronic diseases. Where have we gone wrong?**
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- 11 **Understanding adolescent- Current perspective**
Associate Professor Dr. Noor Azimah Muhammad
- 12 **Asthma emergencies at school: Practical tips for healthcare professionals to train teachers and parents**
Dr. Siti Nurkamilla Ramdzan
- 13 **Common dermatological disorders in children**
Dr. Leong Kin Fon
- 14 **Bantut**
Dr. Ranjini A/P Ambigapathy
- 15 **Play therapy**
Ms. Deborah Priya
- 16 **Infertility issues: How can we help?**
Dr. Naemah Sharifuddin
- 17 **Let's fight Sexual Transmitted Infections (STIs), we can do it!**
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PLENARY ABSTRACTS

Plenary Abstract 1

Core values in family practice: The undeniable connection between mind, body and soul

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The concept of holistic health is gaining significance in primary care, with a growing focus on treating patients as individuals with unique physical, emotional and spiritual needs. This approach acknowledges that health is not solely determined by medical conditions and risk factors but is instead influenced by a complex interplay of factors that includes the mind, body and soul. In primary care the mind, body and soul are viewed as interconnected and equally important components of an individual's overall health and wellbeing. By addressing all three components, primary care providers aim to treat the whole person rather than just isolated symptoms and conditions. Maintaining a holistic, patient centred care approach in family practice can help patients achieve better healthcare outcomes and overall quality of life.

Plenary Abstract 2

Navigating the future of family practice

Mastura I¹

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Primary care is not exempt from the strain facing so many sectors of the Malaysian economy, and health care in particular. Nevertheless, as the current situation continues to evolve, the impact of COVID-19 will be felt far beyond its population-based effects on morbidity and mortality, with sequelae including: i) severely strained management of chronic disease, ii) increase in and worsening of mental health and associated effects and iii) exacerbation in difference of an already current and uneven delivery of medical and health care services for vulnerable populations. Despite the challenges being suffered during this pandemic, the practice of primary care stands to play a significant role in the management of these issues, employing previously underutilized technology such as telehealth, and overcoming the financial and physical limitations imposed by the pandemic on a routinely clinic-based patient care. During the crisis focus was placed on scaling-up of primary care capacities through well-designed innovation equipped with digital technology which helped deliver a successful health system response. The innovations introduced need to be sustained to make health systems more resilient against future health care needs and emergencies.

Plenary Abstract 3

Global engagement in improving respiratory health

Khoo EM¹

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Globally four lung diseases, lower respiratory tract infections, chronic obstructive pulmonary disease (COPD), tuberculosis and lung cancer are among the top twenty causes of death. Chronic respiratory diseases (CRD), which include asthma, COPD, bronchiectasis, and post-tuberculosis lung disease impose a significant burden on global health and the number of Disability Adjusted Life Years (DALYs). Most of these burdens occur in the low- and middle-income countries (LMICs). In addition, tobacco smoking, the leading cause of CRD, and air pollution are amongst the top ten risk factors for global disease burden. Primary care is the backbone to a healthcare system and is most apt to deliver cost effective care. It is the keystone for universal health coverage.

However, the delivery of care for lung health in primary care face many challenges, spanning the maturity and strength of the primary care system in a country, investment (or lack of) in primary care infrastructure such as the health information systems, health services delivery and workforce investment in recruitment and reimbursement; awareness and knowledge about diagnosis and management of respiratory diseases, time constraints and heavy workloads especially in public health centres, access to and availability of vaccines, medicines and devices, respiratory prescribing rights of family doctors, priority (or lack of) given to lung diseases, management needs to tailor according to patients' health literacy, health belief and culture. In LMICs, pulmonary rehabilitation services are lacking, and palliative care for severe COPD is scarce. Research for lung health in primary care has been neglected.

A concerted effort is needed to address these gaps to promote a service that is funded, implemented, evaluated, and endorsed by governments and all stakeholders including advocacy organisations for the betterment of lung health. Organisations and research units/networks such as the International Primary Care Respiratory Group (IPCRG), Malaysian Primary Care Respiratory Group (MyPCRG), NIHR Global Health Research Unit on Respiratory Health (RESPIRE) are some of the global and national respiratory interested groups that promote lung health in primary care.

SYMPOSIUM ABSTRACTS

Symposium Abstract 1

Therapeutic lifestyle interventions for chronic disease

Faridah MZ¹

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Chronic diseases are the most significant factor in premature mortality among older adults in Malaysia. The most common diseases include hypertension, diabetes, heart disease, stroke and cancer. These conditions are generally long-term and result from a combination of genetic, physiological, environmental and behavioral factors. As a result of urbanization and globalization, the typical Malaysian way of life has changed dramatically in recent years. This change in lifestyle coincided with a rapid increase in the number of Malaysians suffering from chronic diseases. A therapeutic lifestyle change (TLC)

was first developed for the reduction of LDL cholesterol. Subsequently, the TLC approach was found to improve risk factors associated with metabolic syndrome and diabetes, including blood pressure, HDL, serum triglyceride and blood glucose. The TLC mainly utilizes specific dietary recommendations, increase physical activity and weight management. The session aims to enhance our understanding in the use of TLC in management of chronic diseases.

Symposium Abstract 2

Integrating lifestyle in family practice

Wong PF¹

¹*Cheras Baru Health Clinic, Kuala Lumpur, Malaysia*

Integrating lifestyle into family practice has the potential to improve patient outcomes and quality of life. By addressing lifestyle factors such as nutrition, physical activity, stress, sleep, and social connection, healthcare professionals can help patients prevent or manage chronic diseases. Family medicine specialists are well-positioned to incorporate lifestyle into their practice and empower patients to take an active role in their health and wellbeing. There are several strategies that family medicine specialist can use to integrate lifestyle into their practice which includes conducting lifestyle assessments, providing patient education and resources, collaborating with other healthcare professionals, assisting with behaviour change and many more.

Symposium Abstract 3

Exploring life outside of work

Mohazmi M¹

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We are often defined by our work and occupation. What we do at work may not be the best thing we can do in our life. Many of us do have other skills, talent and competency that should be explored and expended. Our job demands made us trapped in the stereotype work-life, whereby work becoming even more central. We fall prey to this viscous cycle and become a uni-dimensional person who is unhealthy and vulnerable.

Life outside of work may sounds very much for individual gain and benefit, but it could indirectly be used to improve our patient care and development of the health clinic organization. By paying attention to both work and life connections, creates a sense of purpose in life and helps us to become more successful and productive in our profession.

The diversity of work scope in family medicine and the office working hours, is of advantage to family physicians to explore life outside of their clinic walls. Successful and effective family physicians almost always cultivated and maintained connection outside their work: volunteer work, religious connection, community engagement, athletic pursuits, acquiring new skill, reconnecting with family and friends.

Symposium Abstract 4

Ethical issues in primary care

Aimi Nadia MY¹

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The presentation will cover a range of ethical issues focusing on the primary care practice. The presentation will start with the introduction to the commonly used principles in medical ethics and a brief introduction to the models of doctor-patient relationship. The presentation will then focus on consent and confidentiality, and the issues in dealing with adolescents and difficult patients.

Symposium Abstract 5

Handling medico-legal complaints

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The management of medicolegal cases in Malaysia presents unique challenges due to the interplay between healthcare regulations, legal frameworks, and cultural factors. This presentation aims to provide an overview in managing medicolegal cases involving facilities in Ministry of Health, ensuring the delivery of quality patient care while adhering to local laws and ethical standards. The presentation will begin by introducing our medico legal section and overview on statistics of medico legal cases involving MOH facilities in Malaysia. Key aspects to be covered in the presentation include: (1) management of medico legal complaints, (2) Management of Medico Legal Litigations, (3) Medico Legal Surveillance, (4) Case sharing.

The presentation will conclude by summarizing the key takeaways for effectively managing medicolegal cases, emphasizing the need for a proactive approach that prioritizes patient safety, risk reduction, and legal compliance. By integrating these strategies into their practices, healthcare professionals can navigate the challenges of medicolegal cases with confidence, ultimately enhancing patient care and minimizing legal risks.

Symposium Abstract 6

The mind as a healer: Relaxation in primary health care

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In primary healthcare, relaxation techniques and the concept of occupational balance serve as valuable tools for harnessing the mind's healing potential. Relaxation techniques, such as deep breathing, progressive muscle relaxation, and meditation, can help individuals manage stress, reduce anxiety, and promote overall well-being which may activate the body's natural relaxation response and facilitate mental and physical healing.

By embracing relaxation Occupational balance, which refers to finding equilibrium and fulfillment in daily activities engagement, plays a crucial role in enhance overall well-being. Primary healthcare providers can integrate relaxation techniques and promote occupational balance to address work-related stress, encourage leisure activities, promote self-care practices, and foster social engagement. This integrated approach recognizes the interconnectedness of physical and mental health and empowers individuals to actively participate in their own healing process.

Emphasizing relaxation and occupational balance, primary healthcare can promote a more holistic approach that recognizes the interconnectedness of mind, body, and daily life. This comprehensive perspective acknowledges the importance of mental well-being, stress management, and meaningful engagement in activities for promoting health and healing to lead balanced lives.

Symposium Abstract 7

Stigma in primary care

Alyani MM¹

¹*Pokok Sena Health Clinic, Kedah, Malaysia*

Stigma is a powerful social process that is characterized by labelling, stereotyping, and separation, leading to status loss and discrimination, all occurring in the context of power. Stigma is a well-documented barrier to health seeking behaviours, engagement in care and adherence to treatment across a range of health conditions globally. Stigma can be related to both for health (e.g., disease-specific) and non-health (e.g., poverty, gender identity, sexual orientation, migrant status) differences, whether real or perceived. Stigma in health facilities undermines diagnosis, treatment, and successful health outcomes. Common health related stigma in primary care is HIV, tuberculosis (TB), mental illness, obesity, substance abuse, diabetes, leprosy, and cancer.

Symposium Abstract 8

Stigma among health care providers and effect on decision making

Siti Hazrah SD¹

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Stigma, especially for people with mental illness, exists even among healthcare providers. The stereotypes and labelling lead to discrimination ranging from dismissals of physical complaints, refusal to treat psychiatric patients in non-psychiatry setting, and negativity on the patient's recovery. The prejudice deprived people from their rights to get quality assessment and treatment, leading to poor mental and physical health. Factors contributing to stigma include lack of awareness and exposure to mental illness, therefore training and anti-stigma program must be implemented to improve attitude and professionalism towards this discriminated group.

Symposium Abstract 9

Self-stigma: Internalized stigma and strategies to deal with it.

Masyitah M¹

¹*Department of Psychiatry and Mental Health, Hospital Kuala Lumpur, Malaysia*

Internalized stigma is the process by which individuals adopt negative attitudes and beliefs about themselves based on societal stereotypes and discrimination directed towards their group. It can lead to feelings of shame, low self-esteem, and social isolation. Dealing with internalized stigma requires a multifaceted approach, including addressing the underlying societal and cultural factors that contribute to stigma, educating oneself about the true nature of the stigmatized condition, and developing coping strategies to manage negative thoughts and emotions. Support from peers, family, and mental health professionals can also be helpful in overcoming internalized stigma. By recognizing and addressing internalized stigma, individuals can improve their mental health and well-being and lead more fulfilling lives.

Symposium Abstract 10

Nutrition & adolescent: Preventing chronic diseases. Where have we gone wrong?

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Adolescence is the critical life span period transitioning from childhood to adulthood. They experience significant anatomical, physiological and social changes that require optimum nutrition to support the growth spurt and pubertal transition. While various efforts have been made at the national level towards achieving the nutrition target, the progress is relatively slow, and the dual burden of malnutrition persists among adolescents. The issue creates many questions about where we have gone wrong, especially from practitioner perspectives. This is critical as growing evidence suggests that adolescents' lifestyle practices and dietary intakes are of poor quality and put them at the early onset of chronic diseases. This presentation reviews the nutritional status of Malaysian adolescents and its association with the risk of developing chronic disease. Nutrition related-lifestyle factors, including specific dietary patterns, family meals away from home, food insecurity, disordered eating, physical activity, sleep hygiene and digitalisation and virtual entertainment, are reviewed as these factors are among the most common that have made adolescents more susceptible chronic disease presentations at the clinical setting. Nutritional strategies are also discussed to prevent and control the onset of chronic disease for adolescents.

Symposium Abstract 11**Understanding adolescent- Current perspective****Noor Azimah M¹***¹Department of Family Medicine, Faculty of Medicine, Universiti Kebangsaan Malaysia, Kuala Lumpur, Malaysia*

World is changing every second and how the people including the adolescents react to the evolution determine their lifestyles and bio-psychosocial wellbeing. Similarly, this is also occurring in Malaysia, the current lifestyle of the adolescents is quite different from what happened decades ago. As been reported in national data, the prevalence of overweight and obesity is growing in adolescents [32.5%], and many of them are involved in risky behaviours that include smoking cigarette / e-cigarette [10%], using illicit drugs [3.4%], drinking alcohol [10%], practicing premarital sex [7.3%] and spending long hours online [85.7%]. These often lead to a number of medical problems like metabolic syndrome, addiction (illicit drugs, cigarettes, sex, internet), mental illness (with suicidality), sexually transmitted diseases (including HIV infection) and risky pregnancies and deliveries. This lecture aims to discuss on the reasons that lead to these lifestyle behaviours and how the primary care physicians can provide the best care to the adolescents based on their lifestyle and circumstances while respecting Malaysian socio-cultural religious values.

Symposium Abstract 12**Asthma emergencies at school: Practical tips for healthcare professionals to train teachers and parents****Siti Nurkamilla R¹***¹Department of Primary Care Medicine, Faculty of Medicine, Universiti Malaya, Malaysia*

Asthma is the commonest chronic illness among children and asthma attacks can occur anytime and anywhere including in schools. Children particularly those in primary schools are not capable to manage asthma on their own. The World Health Organization (WHO) guideline on school health services recommends all school health services in all countries to support the self-management of children with asthma and provide school staff with first aid asthma training. However, Malaysia has no national school-based asthma programme and there is a lack of discussions with parents and teachers on how to manage children with asthma if they have symptoms or attacks at school. This lecture will provide practical tips for healthcare professionals to train teachers and parents to care for children in schools. The speaker will also share their work on developing a national guideline on school asthma action plan.

Symposium Abstract 13**Common dermatological disorders in children****Leong KF¹***¹Hospital Kuala Lumpur, Kuala Lumpur, Malaysia*

Skin diseases are a major health problem in the pediatric age group and are associated with significant morbidity and mortality. Pediatric dermatoses requires a separate approach from adult dermatoses as there are important differences in clinical presentation, treatment and outcome. Dermatoses in children are often influenced by socio-economic status, climatic exposure, dietary habits and external environmental factors. Various infectious and inflammatory disorders may be seen in children of all ages. In a prospective study from Kuwait, atopic dermatitis was the most prevalent dermatosis (31.3%), followed by viral warts (13.1%), alopecia areata (6.7%), pityriasis alba (5.25%), psoriasis (4%), diaper dermatitis (4%), scabies (3%), impetigo (3%), dermatophyte infections (2.9%) and secondary bacterial infection (2.2%).

Psoriasis is a common chronic immune-mediated inflammatory skin disorder and begins in childhood in almost one-third of the cases. Although children present with the same clinical subtypes of psoriasis seen in adults, lesions may differ in distribution and morphology. Psoriasis in children is different from adults in many ways including morphologic types .i.e less scaly and distribution .i.e face and anogenital. According to one of the largest case series published from Australia, plaque psoriasis was the most common type (34.1%), followed by psoriatic diaper rash with dissemination (12.7%), scalp psoriasis (11.5%), anogenital (8.9%), guttate (6.4%). Pediatric psoriasis can have a profound long-term impact on the psychological health of affected children.

Atopic dermatitis (AD) is the most common chronic inflammatory skin disorder of childhood and is characterized by pruritus, dryness of skin, and scratching and inflammation. The disease presents with eczematous, itchy lesions that show distinct patterns in different age groups, and episodes of clinical. The disease usually starts in early childhood; about 85% of cases are observed during the first 5 years of life , and the disease alleviates substantially by the age of 7 – 10 year-old.

Symposium Abstract 14**Bantut****Ranjini A¹***¹Klinik Kesihatan Sungai Dua Timur Laut, Penang, Malaysia*

In 2019, NHMS reported that 21.8% of Malaysian children less than 4 years old are stunted which was not much different in 2017 (16.6%) and 2016 (20.7%). Stunted growth has serious health and psychological consequences which can affect future adult health and productivity. As such, growth monitoring is an important component of child health care that needs to be addressed at the primary care setting.

Family medicine specialists have the privilege of addressing the acute and preventative health care concerns of children and their families. Childhood growth monitoring is incorporated as part of our practice. This is a very good opportunity for primary care practitioners to identify children with growth disorders early and refer them appropriately in order for children to get optimized treatment at the tertiary care setting.

In order to identify abnormal growth, we need to understand

the normal growth pattern and the associated risk factors. Childhood growth begins in utero during which the growth rate is 60cm/ year, which depends on maternal and utero-placental health. During infancy the growth rate is 25cm/ year, and nutrition is the main contributing factor. Childhood growth rate is 5-7 cm/ year, mainly affected by growth hormone, thyroid hormone and nutrition. At the onset of puberty, the effects of sex steroids and growth hormone accelerate the growth rate to 8–12 cm/year in girls and 10–14 cm/year in boys. Sleep, nutrition and psychosocial health affects growth hormone release and are vital in all stages of growth.

Short stature is defined as height measurement that is less than -2 standard deviation score SDS (<3rd centile) for that reference population on a sex- and age-appropriate centile chart is considered short stature. Another definition is a child with a height less than 1.5 SDS (10 cm) compared to mid-parental height (MPH) or the genetic target is another definition. A comprehensive evaluation of short stature includes a thorough history, detailed physical examination, accurate anthropometric measurements and growth pattern evaluation. The purpose of a comprehensive evaluation is to determine the underlying cause of short stature, such as primary (syndromes, small for gestation age, bone dysplasia) and secondary (endocrine, metabolic and chronic disease) causes.

Age of diagnosis has a marked impact on final adult height of child and future health. For growth hormone deficiency, early treatment with growth hormone therapy improves final height outcomes. Adults who had delayed growth hormone treatment (after 12 years of age) had suboptimal adult height, lower educational status, difficulties acquiring employment and social difficulties. Late diagnosis also causes increased risk of undiagnosed cardiovascular, autoimmune and puberty related complications in addition to poor height outcomes. As such, it is important for us to identify growth disorders early and refer them early to paediatrician or paediatric endocrinologist.

Symposium Abstract 15

Play therapy

Deborah P¹

¹Negeri Sembilan Contingent Police Headquarters, Negeri Sembilan, Malaysia

Play therapy is to children what counseling is to adults. Play therapy utilizes play, children's natural medium of expression, to help them express their feelings more easily through toys instead of words.

This presentation will focus on play therapy within the medical context. Play therapy is helpful for children who have an illness or must have surgery that requires hospitalization. Hospitalizations are stressful for children and their families. Young children often feel frightened, confused, and out of control. Play therapy is used to help children understand and cope with illness, surgery, hospitalization, and medical procedures.

Medical play gives children a chance to process or “play” out their worries about doctor's procedures, and their illness.

Medical play is exactly what it sounds like: play with real medical equipment and often dolls, which allows children a non-threatening way to learn about and familiarize themselves with medical procedures, equipment, hospitals, doctors and nurses.

Doctors and medical professionals can use medical play as a tool that allows children to work through their fears and anxieties. Children can give voice to those fears and misconceptions about their hospital or illness experience that they may not be able to express verbally. We will learn and understand further how the play therapy skills and aspects can be integrated during medical consultations with children in clinics and hospitals.

Symposium Abstract 16

Infertility issues: How can we help?

Naemah S¹

¹Bandar Seri Putra Health Clinic, Selangor, Malaysia

The recent statistics released by DOSM for 2021 had shown a decrease in live births by 6.7% compared to the year 2020 and this is the highest decrease seen in a decade. Total fertility rate which is an indicator used to estimate the average number of children that a woman would have over her childbearing age had shown a significant decline over the last five decades with 4.9 children per woman in 1970 to 1.7 in 2021. The reduction in fertility and live birth in Malaysia will give impact on the nation socially, economically, and financially.

Infertility is a common presentation in primary care. Couples who have failed to conceive after one year of unprotected sex, can already be diagnosed with infertility. However, many couples present to health care professional after many years of trying, some up to more than 5 years. Infertility can be seen in either the male or female and in some both sex were found to have problems affecting their fertility.

As we know, women's fertility declines with age, with older women will have less chance of conception compared to younger women. Other factors that may affect fertility are coital frequency and/or timing, and problems of sexual intercourse such as erectile dysfunction and vaginismus. Female infertility can be caused by ovulation disorders, uterine abnormalities, tubal obstruction, and peritoneal factors. Male infertility can be caused by infections, injury, toxin exposures, anatomical variance, chromosomal abnormalities, systemic diseases, and sperm antibodies. Lifestyle factors such as smoking, alcohol use, and obesity also may affect fertility in both men and women.

As such, proper history taking, physical examination and relevant investigations must be done for both man and woman. In primary care, although fertility treatment is not usually offered for couples, general advice on healthy diet, regular exercise, regular sexual intercourse especially during fertile window and avoidance of risk factors can be advised. Some couples may benefit from these primary care interventions and may conceive while waiting for further evaluation and management in hospital. Follow-up care and support during

fertility treatment as well can be offered by primary care physicians as usually it usually takes time, money and effort from the couples to adhere to the fertility treatment given.

Symposium Abstract 17

Let's fight Sexual Transmitted Infections (STIs), we can do it!

Salmiah MS¹

¹Retired Ministry of Health, Malaysia

Sexual Transmitted Infection (STI) is still an important public health issue. It is estimated that more than 1 million cases of syphilis, gonorrhoea and chlamydia are acquired daily worldwide. Malaysia is also facing an increasing trend of STIs as evidenced by the increased number of new cases notified. It is reported that in 2010, only 847 new cases were notified compared to 2021 with 3461 new cases. Recognizing STIs are very consequential as some untreated STIs may result in complications such as pelvic inflammatory disease, infertility, cancers, congenital abnormalities and even fatality. However, most of the STIs are asymptomatic, thus serving as the main barrier for early treatment. Therefore, prevention is recognized as a crucial step in ending the STIs. Primary care providers play a great role in combating STIs by providing services that are not stigmatized, discriminate or judgmental towards patients with STIs including those at risk of getting STIs. In accordance with CDC STIs Guideline 2021, primary care providers can help in STIs prevention and control by performing an accurate risk assessment, educating on risk reduction and offering appropriate prevention services such as pre and post exposure prophylaxis for HIV and STIs. Furthermore, primary care providers can also help in STIs prevention and control by offering vaccination for vaccine preventable STIs as well as providing efficient services that are able to appropriately identify, diagnose, treat, counsel and monitor both asymptomatic and symptomatic STIs patients together with their partners. Hence, primary care providers are the key players in achieving the goal of ending STIs epidemics as one of the major public health concerns by 2030.

Symposium Abstract 18

Non-surgical medical aesthetic treatment algorithm for general practitioners in Malaysia

Ungku Mohd Shahrin MZ¹

¹Aesthetic Medical Practice, Ministry of Health, Malaysia

The aesthetic patient is different from medical patients in many ways. From patient history taking, assessment and treatment method depends on several factors. Initially, USBC (Ungku Shahrin Beauty Concept) explained how we could assess aesthetic patient structurally. Moving forward, USATA (Ungku Shahrin Aesthetic Treatment Algorithm) will enlighten medical aesthetic practitioners on how to treat aesthetic patients in a well-organized manner. With varieties of treatment modalities offered in this field, it is paramount for medical aesthetic

practitioners to choose the right treatment for suitable patients and use the right devices. Among factors need to be considered, such as skin type, psychological motivation, financial support, regulation issues, etc. This article will give an overview of the aesthetic patient treatment algorithm, especially for Malaysian medical aesthetic practitioners.

Symposium Abstract 19

Do I know you? Managing dementia in primary care

Mohd Fairuz A¹

¹Department of Family Medicine, Faculty of Medicine, Universiti Kebangsaan Malaysia, Kuala Lumpur, Malaysia

Dementia has now become a global epidemic; where it was estimated in 2015 that 47.47 million people are living with dementia, and it is estimated to reach 135.46 million in 2050. As dementia incidence increases with age, Malaysia will soon have to deal with the complexity of this condition as we are heading towards an aging population by 2050. Dementia was previously a subspecialised area and only diagnosed and managed by neurologists and geriatricians. However, due to the lack of availability of these services and the need for long-term dementia care and support in the community, there is a shift in the provision of dementia care to primary care physicians. However, for various reasons, many primary care physicians may not be well-versed in dealing with these cases in their daily clinical practice.

This presentation will highlight the role and approach of primary care physicians in managing dementia in the primary care clinic setting. The talk will focus on screening, making a diagnosis and managing patients presenting with cognitive impairment at different stages of the dementia spectrum within the primary care scope of practice. We will also discuss the barriers and limitations primary physicians face in managing dementia in the community.

Symposium Abstract 20

Management of common mental health disorders in older adults beyond medications

Suhaila MZ¹

¹Department of Psychiatry and Mental Health, Hospital Tuanku Jaafar, Negeri Sembilan, Malaysia

Mental health problems are common among older adults and may include isolation, affective and anxiety disorders, dementia, and psychosis. Treatment of psychiatric disorders in older adults includes both pharmacological and non-pharmacological interventions. However, with the physiological changes in the pharmacokinetics and pharmacodynamics of older adults, they are more vulnerable to side effects of the medications and drug-drug interactions. Hence, non-pharmacological interventions should be emphasized as the choice of treatment either in combination or alone to achieve the therapeutic goals.

Symposium Abstract 21

Restorative care for older adults to age gracefully

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¹Hospital Rehabilitasi Cheras, Kuala Lumpur, Malaysia

Elderly population is increasing yearly in Malaysia. In this session, rehabilitation care for the elderly is outlined with a multidisciplinary approach to improve the elderly population quality of life. The goals of care are mobilisation, balance and ambulation, activity of daily living (ADL) independency and return to supportive environment. This session is a sharing of experience from an event of International Day of older persons celebration in Hospital Kuala Nerang in 2022 and our clinical experience in our rehabilitation setting.

Symposium Abstract 22

Rehabilitation in heart failure: What's our role?

Saari MY¹

¹Rehabilitation Medicine Department, Hospital Serdang, Selangor, Malaysia

The World Health Organization (WHO) has defined cardiac rehabilitation as: 'the sum of activities required to influence favourably the underlying cause of the disease, as well as to provide the best possible physical, mental, and social conditions, so that the patients may, by their own efforts, preserve or resume when lost as normal a place as possible in the community'. Cardiac rehabilitation has much evolved over the last three decades from focusing only on exercise training to recognition that it needs to be a multicomponent complex intervention that includes 'patient assessment, education, risk factor modification including dietary recommendations, lifestyle modification, smoking cessation counselling, psychological support, and evaluation and management of barriers to adherence'. International guidelines today advocate that cardiac rehabilitation programmes also 'assist people with heart failure to develop the necessary skills to successfully self-manage' their long-term condition. Key aims of rehabilitation in heart failure include improvement in a patient's exercise capacity and health-related quality of life and complement the impact of drugs and devices in reducing the risk of hospitalizations and mortality.

Effective cardiac rehabilitation delivery requires close collaboration between patients, caregivers, and service providers. The traditional model of cardiac rehabilitation delivery has been centre-based programmes that typically involve patients attending outpatient rehabilitation service in a hospital-/community-based facility supervised by a multidisciplinary healthcare team. Stimulated by the challenges of the SARS-CoV-2 pandemic cardiac rehabilitation, commentators have called for a 'root and branch overhaul' of cardiac rehabilitation provision to better reflect current contemporary clinical practice and patient expectation to include alternative models of delivery: home-based, digitally supported, and hybrid (mix of home and centre) programmes.

Core components of cardiac rehabilitation in chronic heart failure include patient assessment, physical activity counselling, exercise training, diet and nutritional counselling, weight control management, lipid management, smoking cessation and psychosocial management.

Symposium Abstract 23

Decision making in elderly with ESKD: Dialysis vs non-dialysis

Lily M¹

¹Department of Nephrology, Hospital Tuanku Ja'afar, Negeri Sembilan, Malaysia

The incidence of end stage kidney disease (ESKD) in elderly age group is increasing globally. In Malaysia, the 29th Malaysia Dialysis Transplant Registry Report 2021 showed about 30% of newly diagnosed ESKD individual on dialysis are 3 65 years old. Outcomes such as survival and Health Related Quality of Life (HRQoL) might differ greatly among older patients with kidney failure due to substantial heterogeneity with respect to functional and cognitive impairment and frailty.

Decision regarding the treatment for ESKD in elderly are more complex, secondary to physiologic changes of aging, concurrent geriatric syndromes and varying goals of care. The principles of person-centered care and shared decision-making should be applied to the care of elderly people who are reaching end-stage kidney disease and a patient-centered, palliative care approach should be offered to patients with ESKD, with the goal of providing care which aligns with the patient's goals and values.

Primary care providers are required to be instrumental in guiding patients and their families in the thoughtful consideration of an individualized, patient-centered approach to ESKD treatment. Treatment considerations for ESKD should take into account the risks/benefits of renal replacement options; the impact of the physiologic changes of aging, medical comorbidities, and geriatric syndromes, including frailty; and options for kidney supportive care. When considering possible renal replacement therapy in elderly patients, providers should consider the pros/cons of each treatment. Hemodialysis (HD) in the older age group can be complicated by intradialytic hypotension, prolonged time to recovery, and vascular access-related problems. Peritoneal dialysis (PD) can be difficult for older patients with impaired physical or cognitive function and can become a considerable burden. Use of incremental dialysis, changes in HD frequency, and delivery and use of assistance for PD can ameliorate quality of life for older patients.

If renal replacement therapy is not pursued (non-dialysis), optimization of medical management or symptom management needs to be the goal of care. In renal palliative care, symptom management is aimed at ameliorating symptoms associated with chronic kidney disease. These include pruritus, sleep disorders, restless legs, dyspnea, anxiety, agitation, depression, nausea, muscle cramps, and pain.

Symposium Abstract 24**Psychosocial support in palliative care****Tan CE¹**¹*Department of Family Medicine, Faculty of Medicine, Universiti Kebangsaan Malaysia, Kuala Lumpur, Malaysia*

Providing psychosocial care is an essential part of managing patients with palliative care needs. Psychosocial care is defined as care which is related to the psychological, emotional and social well-being of the patient and their family carers. Comprehensive assessment of patients with palliative care needs should include assessment of their psychosocial needs. Family medicine specialists have a special relationship with their patients and their families, giving them an advantage in providing or coordinating psychosocial support. This presentation will provide an overview of ways to provide psychosocial support to patients receiving palliative care in the community, including wish fulfilment, memory making and bereavement support for family members. It will also introduce some evidence-based psychosocial interventions that could potentially be used in primary care or community settings such as dignity therapy, life review, music therapy and others. Alongside effective symptom management, psychosocial care is meaningful to patients and their families and contributes towards their quality of life.

Symposium Abstract 25**An approach to blurring of vision****Azlin M¹**¹*Faculty of Medicine and Health Sciences, Universiti Sains Islam Malaysia, Negeri Sembilan, Malaysia*

The blurring of vision is a common symptom, that can occur for many different reasons, including refractive errors, eye diseases, neurological conditions, and systemic illnesses. It is characterized by a loss of sharpness and clarity in vision, which can impact daily activities and quality of life. Treatment options depend on the underlying cause of the blurring and may include corrective lenses, medications, surgery, lifestyle changes, or vision therapy. Prompt evaluation by 2 minutes approach is important to identify the cause of the blurring and initiate the appropriate treatment to prevent further vision loss.

Symposium Abstract 26**Doctor, I feel dizzy...****Intan Kartika K¹**¹*Faculty of Medicine, Universiti Teknologi MARA (UiTM), Selangor, Malaysia*

Dizziness and vertigo are as common as headaches and backpain in bringing patients to visit the physicians. The lifetime prevalence is estimated to range from 20% to 50%. The overall incidence of dizziness, vertigo, and imbalance

is 5-10% and is higher in women and increases with age. The lecture will cover the general approach in history and examination of a dizzy patient to reach the diagnosis. The red flags for dangerous diagnoses causing dizziness will be highlighted. Additional investigations for patients with vestibular disorders will be introduced and discussed. The commonest peripheral and central vestibular diseases and their management will be highlighted concisely.

Symposium Abstract 27**Vestibular rehabilitation****Sheela T¹**¹*Hospital Rehabilitasi Cheras, Kuala Lumpur, Malaysia*

The topic will include of the role of rehabilitation in brief, team and goal-oriented approach. Vestibular disorders can be divided into peripheral and central causes. The symptomology around the diagnosis and the rehabilitation program for both causes will be discussed. Case studies will be shared to promote clinical understanding and when to refer.

Symposium Abstract 28**Subclinical thyroid disorders: Clinical significance and when to treat****Noor Lita A¹**¹*Endocrinology Unit, Hospital Tuanku Ja'afar, Negeri Sembilan, Malaysia*

The term subclinical thyroid disease is used to describe asymptomatic thyroid abnormalities found on abnormal laboratory tests. It is defined when the Thyroid Stimulating Hormone (TSH) is abnormal and the free thyroxine and triiodothyronine levels are within their reference ranges. The management of subclinical thyroid dysfunction is controversial. Most national organizations recommend against routine screening for asymptomatic patients, but screening is recommended for high-risk populations. There is good evidence that subclinical hypothyroidism is associated with progression to overt disease. However, there is insufficient evidence that treatment of subclinical hypothyroidism is beneficial. Treatment might be indicated for patients with subclinical hypothyroidism and serum TSH levels of 10mU/L or higher or for young and middle-aged individuals with subclinical hypothyroidism and symptoms consistent with mild hypothyroidism. At the other spectrum, subclinical hyperthyroidism is divided into low but detectable TSH and suppressed TSH. TSH of less than 0.1 μ U per mL is associated with progression to overt hyperthyroidism, atrial fibrillation, reduced bone mineral density, and cardiac dysfunction. Emerging evidence shows the benefits of treating subclinical hyperthyroidism in patients with TSH levels less than 0.1 mIU/L, particularly in older adults and patients at high risk of cardiovascular events and bone loss. There is little evidence that early treatment alters the clinical course.

Symposium Abstract 29

The advances and challenges in obesity treatment

Teoh SH¹

¹Universiti Sains Malaysia Medical Centre @ Bertam, Penang, Malaysia

Obesity is a complex multifactorial disease. The treatment of obesity includes lifestyle interventions, anti-obesity medications (AOMs) and bariatric metabolic surgery (BMS). Over the last couple of decades, numerous AOMs have been developed to bridge the gap between bariatric metabolic surgery and lifestyle interventions in obesity care. Despite being the country with the highest prevalence of obesity in South East Asia, Malaysia has only a handful of them and accessibility remains a challenge. Using a case-based presentation, Dr. Teoh will elaborate on the available AOMs in the country and share the challenges he faced in providing standard obesity care.

Symposium Abstract 30

Mindful eating

Jamilah Hanum AK¹

¹Department of Psychology, International Islamic University Malaysia, Pahang, Malaysia

Mindful eating practice was found to have positive influences on eating habit modification and connecting to the wise-spiritual self. The benefits improve not only the physical body but also the mind and soul. The current session on mindful eating will help participants to understand i) WHAT is mindful eating, ii) the relationship between physical hunger, emotional hunger, and mindful eating, iii) WHY mindful eating, and iv) HOW to mindful eating. The session covers both theory and practical aspects of mindful eating. The practical aspect involves guided experiential mindful eating exercise in the session. The participants are invited to come to the session with their beginner's mind.

Symposium Abstract 31

Psychosis: How can primary care manage it better?

Nazrila Hairin N¹

¹Seremban 2 Health Clinic, Negeri Sembilan, Malaysia

In the field of Family Medicine, there are talks about the importance of detecting diabetes early, the importance of detecting hypertension early, the importance of achieving perfect glycaemic control to avoid the micro and macro complications of diabetes. It has been compounded to us in the field of Primary Care that we must screen, detect early, treat and manage the NCD diseases to the best that we can, and achieve perfection in all the parameters and indicators that have been set by the clinical guidelines and the powers that be. However, when was the last time that you attended a talk about psychosis? Many of us would know what is psychosis.

But, why is psychosis important? What does psychosis do to a person's brain? How many of us are aware of the effects of prolonged Duration of Untreated Psychosis (DUP) to the brain structurally, and the effects on the function and outcome of the patient? Did you know that psychosis can emerge as early as the child and adolescent period, and not just at the early adulthood stage?

As with any disease, we all know that the earlier the disease is detected, and proper treatment and intervention is initiated early, it can reduce or prevent complications, reduce hospitalization and health care utilization, and improve the clinical outcomes. And as primary care physicians, the benefits of early detection and initiation of treatment for diabetes, hypertension, and dyslipidemia has been imprinted and engraved in our brains. But, has there ever been any emphasis placed upon early detection of psychosis? Even our current mental health screening and intervention programmes in the Klinik Kesihatan mainly centers on depression and anxiety only. Why should we try to detect psychosis early, and how do we go about early detection? And what can we do, as primary care physicians, to ensure that our patients receive the best appropriate and timely care to achieve the best functional and clinical outcome for our patients?

To learn and find out more about psychosis, early detection and early intervention of psychosis, you are most welcome to join and participate in this talk. Together we can find out more about how we as primary care physicians and work hand in hand with our psychiatry team colleagues to make an impactful and meaningful difference in our patient's lives, and for the community as a whole.

Symposium Abstract 32

Deliberate self-harm: How to manage DSH?

Rahima D¹

¹Psychiatry Department, Faculty of Medicine and Health Sciences, Universiti Putra Malaysia, Selangor, Malaysia

Deliberate self-harm (DSH) is a significant public health problem and requires effective intervention strategies to support affected individuals. In this presentation, evidence-based approaches to DSH will be explored in depth, with a focus on prevention, early intervention, and ongoing support. We will discuss the importance of a comprehensive, multidisciplinary approach to managing DSH that incorporates psychological, social, and medical perspectives. In addition, we will explore the role of targeted interventions such as cognitive behavioral therapy, dialectical behavioral therapy, and family-based interventions in reducing self-injurious behavior and promoting psychological well-being. The presentation will also highlight the need for collaboration among mental health professionals, educators, and community stakeholders to create a supportive environment for individuals who are at risk for self-injury or who self-harm. Our goal is to provide participants with the knowledge and tools to effectively address intentional self-injury in their respective settings by sharing these best practices.

Symposium Abstract 33**Struggling with mental illness - A message of hope****Anita AB¹***¹Mental Illness Awareness and Support Association (MIASA)*

This presentation begins with the inspiring journey of Puan Anita, the president of the Mental Illness Awareness And Support Association (MIASA), as she courageously battled anxiety and emerged as a beacon of hope for others. The presentation begins by providing an overview of MIASA and the comprehensive range of services it offers to individuals grappling with mental health challenges. It explores the various highs and lows encountered by MIASA throughout its existence, highlighting the organization's resilience and determination to create a supportive environment for those in need.

The second part of the presentation delves into the personal, family, and community struggles faced by individuals dealing with mental health problems. Through poignant stories and real-life examples, the audience gains insight into the multifaceted challenges confronting these individuals on a daily basis. The presentation aims to raise awareness and foster empathy for the difficulties encountered by those affected by mental health issues, emphasizing the importance of community support and understanding.

By shedding light on Puan Anita's journey, the services offered by MIASA, and the struggles faced by individuals dealing with mental health problems, this presentation seeks to inspire action, advocate for destigmatization, and promote the creation of a compassionate and inclusive society that prioritizes mental well-being.

Symposium Abstract 34**Bedroom secret: New ingredients to spice up your life****Zulkifli MZ¹***¹University Kebangsaan Malaysia Medical Centre, Kuala Lumpur, Malaysia*

Sex has always been a taboo subject in Asian society and still consider as a bedroom secret. However, over the past few years, awareness in the field of men's sexual health has improved, and interest in sexual health research has recently increased. There are new development in terms of new generation of PDE5 inhibitors that are able to cater for the current need. The purpose of this lecture is to introduced the current development in Men's sexual health.

Symposium Abstract 35**Managing men's health issues in Malaysia - Are we on the right track?****Shaiful Bahari I¹***¹Department of Family Medicine, Universiti Sains Malaysia, Kelantan, Malaysia*

YES, we are on the right track BUT we need to be more comprehensive and more robust in our approach to ensure the health status of men in Malaysia is not deteriorating further. The indicators that we are on the right track 1. The support from the government spearheaded by the Ministry of Health (MOH) is great. The development of Plan of Action for Men in Malaysia 2018-2023 led by MoH with involvement of various ministries and agencies is one of the initial plans with bigger agenda for Men in Malaysia. MOH has also provide Family Medicine Specialists training with scholarship for 3 years program of Sexual and Reproductive Health in Primary Care whereby Men's Health is also a major component. Apart from that, setting up Men's health services or Men's friendly clinic in the government Ministry's health clinic nationwide has been at various level of progress. 2. Various Non-governmental agencies and academic institutions have started various men's health program for example, SOCSO has started screening program for men, Academy of Family Physician Malaysia (AFPM) has introduce Men's Health module as compulsory component in their specialty training program. 3. Increase research and publications in Men's Health especially on Sexual and Reproductive Health is another indicator of awareness of the importance of Men's Health. One of major men's health issues i.e. Erectile Dysfunction (ED) has been included in NHMS 2019 which has sparked great concern and created tremendous awareness to the general population.

How do we move forward? 1. We need continuous and stronger support from the government/Non-governmental agencies. Healthy Male Australia can be the example or model of how the successful Men's health program has been implemented in Australia with the full support and funding from the government 2. Enhancing inter-sectoral collaboration with private-public partnership 3. More program for teaching and training for Men's health in undergraduate/postgraduate medical program and paramedical program. 4. Improve of health services and opportunistic screening at the primary care level for all boys and men. This include providing better drugs for the treatment of male-specific health issues and accessibilities and development of various men's health related guidelines and policies. 5. Increase funding for research in the area of Men's health. Having more and validated data with regards to men in Malaysia will help to strategize on implementation of services and plan of action. 6. Use of technologies including AI and social media to bridge the gap on man versus health, especially among the younger generations. 7. Increase male-friendly community program especially dealing with the 'marginalised' group. 8. Create champions at various levels to deal with men's health issues in Malaysia. We need your help to save the men in Malaysia!

Symposium Abstract 36**My wife is king****Siti Aishah H¹***¹Department of Counselor Education and Counseling Psychology, Faculty of Educational Studies, Universiti Putra Malaysia, Selangor, Malaysia*

“The best of you are those who are best to their women”. The best treatment to the wife not only depicts the best character of the husband but also depicts best family wellbeing as a whole. The mutuality in familial relationships between the subsystems of husband-wife, parent-children and between siblings is dynamic and interactive, affecting and affected by one another. The mother is the nucleus centering and governing familial relationships; while the father structures the foundation of the hierarchical relationship in a family through best treatment to the mother of his children. Concisely, he treats his wife as a king.

Symposium Abstract 37

Turkiye Earthquake February 2023: An experience from the perspective of primary care provider at Malaysia Field Hospital

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Malaysia Field Hospital was set up in Celikhan, Adiyaman Province, Turkiye in February 2023 three days after two consecutive major earthquakes hit Southeastern region of Turkiye. These earthquakes with the strongest magnitude of 7.8 originated from Gaziantep and significantly affected 10 other provinces including Adiyaman. Along with houses, other main buildings were also affected including local hospitals and clinic. In Malaysia Field Hospital, we provided inpatient and outpatient services such as Primary Care, General Surgery, Paediatrics, Obstetrics and Gynaecology, Orthopaedics, Ophthalmology and Dental. A total of 2,280 patients received treatment at MFH, with the majority seen at outpatient clinic. It was a challenging task as it occurred during winter and limited resources due to earthquake. This paper also highlights the challenges faced during the six weeks operation.

Symposium Abstract 38

Handling disaster from primary care perspective

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Disaster management requires a holistic approach that involves preparing, supporting, and rebuilding society when natural or human-made disasters occur. It involves a transdisciplinary approach that involves four phases: i) Mitigation; ii) Preparedness; iii) Response and iv) Recovery. Health emergency is an imminent threat that has the potential to produce a broad spectrum of health consequence. Health, as an outcome, and a goal of United Nation Disaster Risk Reduction (UNDRR) and integrating health mitigation is essential to materialise the Sendai Framework commitment for Disaster Risk Reduction. The last decade has witnessed a large number of humanitarian emergencies relief systems. Example of Emergency Response

Units includes supports from international governments and militaries, Non-Governmental Organisations (NGOs) like the International Federation of Red Cross, Red Crescent Societies, Médecins Sans Frontières (MSF), Mercy Malaysia and others who have served as a sound foundation for fieldwork in humanitarian emergencies. Primary Health Care (PHC) is an essential health service based on practical, guided by scientific evidence and socially acceptable methods and universally accessible to individuals and families in the community. PHC role as the first level of contact of individuals, the family and community and as a gatekeeper to the next level of healthcare within the particular national health system by providing the first element of a continuing process in a health care system. PHC functions based on synergistic foundations inclusive of empowerment of individual and communities while integrating available health services in management during disaster period.

Symposium Abstract 39

The impact of disaster in mental health

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Disasters are inevitable truth of our life, preventable but completely unavoidable and they are part of our living in this complex globalised, industrialized and civilized world.

According to Directive 20 (National Security Council, Malaysia), disaster is defined as a sudden, catastrophic event, sudden misfortune or calamity. It is complex in nature and results in loss of lives on a large scale, destructions of properties and the environment leading to severe destructions in the activities of the community affected. It can be classified into Natural and Man-made disasters.

Disasters are known to have substantial effect on both physical and mental health of the affected population. The aftermath may bring major life changes and uncertainty about future life, making everyday realities stressful. Victim of disaster have substantial difficulty in coping with life after disaster and suffer from high levels of stress.

For intervention in community level, Psychological First Aid (PFA) is an evidence- based modular approach to as children, adolescents, adults and families in the immediate aftermath of disaster and crisis. It can be given to anyone, including survivors and affected individuals experiencing acute stress reactions or who appear to be at risk for significant functional impairment or mental health problems. Beside that, they is a need a need provide mental health services and psychosocial support to the victims of disaster.

Symposium Abstract 40

Legalization of cannabis for medical use: The Thailand experience

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The policy on drugs had changed rapidly in Thailand in recent years. Drug laws in Thailand started since the year 1922 when the Drug Act has been drafted and used with four adaptations through the year 1978. In 2019, the Thai Drug Act 1979 (issue 7) allowed cannabis and kratom for medical use for the first time in modern Thai history since the Cannabis Act, Kratom Act, Drug Act were issued in 1934, 1943 and 1979 respectively. In 2021, Thailand was the first country in Asia legalized parts of cannabis such as fan leaves for recreational use after the 2019 allowance for medical purposes. Surveys conducted by the Centre for Addiction Studies show an increased trend of cannabis use in Thailand after the allowance was imposed. Past-year prevalence of cannabis use had increased from 2.2% in 2019 to 2.5%, 4.2%, and 25% in the years 2020, 2021, and 2022, respectively, whereas those of methamphetamine, alcohol and tobacco use had decreased during COVID-19 pandemic in 2020-2021. The younger population aged 18-19 had an increased trend of cannabis smoking. Thailand Health Data Center (HDC) showed increased trend of substance-related disorders, except for alcohol and tobacco, among patients in the outpatient clinics and inpatient settings. A number of Thai people still had misunderstandings about cannabis use. For example 35.6% or approximately one-third of the sample in 2021 truly believed that cannabis was a cure for cancer and 23.2% or one-fourth was unsure or did not believe that cannabis was addictive in the survey in 2021.

Symposium Abstract 41

Psychosocial interventions in primary care for patients with addiction problem

Norsiah A¹

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Addiction is a disease with main features comprised of losing control about use of certain addictive substance or engagement to certain behavior. Examples of substances that may lead to addiction are nicotine, alcohol, opiates, cannabis and amphetamine type stimulants. Whereas behaviors that may lead to addiction are gambling, gaming, pornography, sex activities and shopping. Addiction may end up as a chronic relapsing condition. It is a brain disease that may result in various complications such as medical, psychological, social, economic, legal and spiritual. Due to its complex nature, patients with addiction issues require lifelong rehabilitation. In the past, rehabilitation was mainly focused on illicit substances and usually done in institutions such as in public or private rehabilitation centers or in prisons. Health care providers do treat patients with nicotine addiction but not so much was done on alcohol addiction. For illicit substances, patients usually ended up relapsed in addiction issues again after released from institutions. Since 2005, Ministry of Health Malaysia started giving medical treatment for opiate dependency (specifically heroin) using syrup methadone. It is an example of rehabilitation in community. Apart from giving medical treatment, psychosocial intervention focusing on motivational interviewing and addressing patients' needs, play important

role in recovery. This lecture provides examples of psychosocial interventions specifically for certain substance & behavior that can be conducted in primary care in order to help patients with addiction issues to lead to more stable life. The main principal is identifying & handling trigger, relapse prevention strategies and bringing patients back to functioning life. All these interventions can be accomplished by capacity building, proper planning, intra & inter-agencies collaboration, stigma reduction & harm reduction measures.

Symposium Abstract 42

12 Steps programme for recovery of addiction

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Group therapy is an integral part of psychosocial interventions for individuals struggling with substance use disorder (SUD). It offers a supportive environment where individuals can connect with peers who understand their experiences and challenges. These groups provide positive peer support, creating a sense of belonging and camaraderie among participants. Group therapy offers emotional support and encourages accountability, as members hold each other responsible for their actions and provide gentle pressure to abstain from drug use.

One popular form of group therapy is mutual self-help groups such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA). These groups follow the well-known 12-step program and traditions that have been successful in helping countless individuals overcome addiction. These groups operate on a non-professional, non-profit basis, relying on members' experiences and support to maintain sobriety. The strength of mutual self-help groups lies in the sense of camaraderie and understanding that comes from interacting with individuals who have faced similar challenges. The group setting fosters a supportive environment where members can share their struggles, successes, and coping strategies, providing a safe space for healing and growth. Peer support is vital in combating feelings of isolation and enhancing motivation to stay sober.

Establishing self-help groups locally allows for increased accessibility to support services, especially in areas where professional resources may be limited. It promotes a community-driven approach, where individuals with lived experiences can share their knowledge, coping strategies, and hope for recovery. This grassroots initiative not only **benefits the participants but also fosters a sense of unity and resilience within the community.**

Symposium Abstract 43

Custodial medicine: An eye opener

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Healthcare is a fundamental human right that should be

extended to all individuals, including those in custodial or correctional settings, such as prisons, lockups, immigration detention centers and juvenile detention facilities. Custodial medicine provides a wide range of medical services, including clinical forensic examination, routine health check-ups, preventive care, infection control, treatment of acute and chronic conditions, mental health services, and emergency medical care.

The provision of healthcare in custodial settings is mandated by various legal and ethical obligations such as Prison Act 1995 (Act 537) and Human Rights Commission of Malaysia Act 1999 (Act 597). In Malaysia, custodial medicine is provided by the Ministry of Health either at the hospital or within the detention facilities. The Custodial Health Unit stationed at several centralized police lockups is an example of such services.

Delivering healthcare services to detainees presents significant challenges due to their vulnerable status, diverse range of existing medical and mental health conditions, limited privacy within the confines of the facility, and insufficient resources. However, despite these challenges, it is crucial that we confront them because we have a duty of care towards detainees. Providing them with appropriate healthcare during their time in detention not only improves their health outcomes but also enhances their chances of successfully reintegrating into the community. Moreover, ensuring proper healthcare

also helps prevent potential medical litigation in cases of custodial deaths. Establishing a robust custodial medicine setup and ensuring the presence of well-trained staff, preferably specialized in custodial medicine, should be our goal as healthcare provider.

Symposium Abstract 44

Transitioning hepatitis C treatment to primary care

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Hepatitis C remains a major disease burden as many are not aware of carrying the disease until it is too late. Originally, the access to the treatment was limited to the tertiary medical centres and the cost of the medication was prohibitive. The adverse effect of the pioneer therapies such as interferon limited the therapeutic benefits. Most patients suffered from liver cirrhosis and its complication due to poor access to treatment. However, with the approval of the first-generation direct acting antiviral in 2011 followed by the generics, the treatment duration reduced greatly from up to 48 weeks to as short as 12 weeks with cure rate of up to 95% with certain regime. Apart from that, the cost has been cut significantly allowing more patients to be treated. However, the last challenge remaining to be solved is to identify population at risk, diagnosing and treating the infected patients. While tertiary centres are overwhelmed with patients seeking treatment, Primary Care Service remain underutilized. This lecture will explore the option and process being done to allow Primary Care to play a more active role in the treatment of Hepatitis C.

Symposium Abstract 45

Me, myself & I

Umi Izzati S¹

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“A healthy relationship starts with you”. A healthy relationship adds to one's overall well-being, fueled by communication, respect, and boundaries. We may fuss, fight, forgive and forget when it comes to our interactions with others, but how is our relationship with ourselves? Can we forgive our mistakes? Can we embrace our weaknesses? Can we be gentle when silently criticizing ourselves? Our relationship with ourselves involves self-awareness, self-concept, self-acceptance, and self-care. These set the tone and template for our interactions with others. Impairment in self-concept and self-esteem negatively affects our ability to manage life adversity and challenges. It also affects our role, productivity, social interaction and resilience. This session aims to bring self-awareness and strategies in making impactful changes in self-concept and self-efficacy.

ORAL ABSTRACTS

Oral Abstract 1

Eating Disorder Among Adult Malaysians Attending Primary Health Care Clinics And Its Associated Factors. A Cross-Sectional Study. (EDAM)

Manoharan A¹, Beatrice NLJ², Kanawathy S³, Tan HY⁴, Chong JI⁵, Jusnimar KY⁶, Peter J⁷, Norafini S⁸

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Introduction: A population-based survey showed 50% of adult Malaysians have symptoms of an eating disorder. Primary healthcare providers have an excellent opportunity to screen, diagnose and provide early interventions for an eating disorder. We determined the prevalence, severity and factors influencing eating disorders among Malaysian adults attending urban and rural primary health clinics.

Methods: We used the Eating Disorder Examination Questionnaire (EDE-Q) among 829 adults attending primary health clinics in urban and rural Malaysia. Association between sociodemographic characteristics, depression and anxiety scores, body mass index (BMI) and health-seeking behaviour with eating disorder were analysed using logistic regression.

Results: Estimated prevalence of the eating disorder among adults attending primary healthcare clinics is 21.7%. Urban adults with normal BMI are 5.3 times 95% CI (1.32-21.32)

likely to have an eating disorder. Adults with moderate depressive scores have the highest likelihood of having an eating disorder; rural 11.5 times 95% CI (1.76-75.35), urban 10.4 times 95% CI (0.36-301.17) and overall, 7.3 times 95% CI (1.83-29.15). Adults with comorbidity were 2 times OR 1.92, 95% CI (1.14-3.23) to have eating disorder, while rural adults who sought help for shape were 10 times OR 9.92, 95% CI (3.07-31.94) more likely to have eating disorder.

Conclusion: Screening for an eating disorder should be done among adults with comorbidity, mental health illness and seeking help for their body shape. There is an urgent need to train primary healthcare providers to diagnose and manage eating disorders.

Oral Abstract 2

Menopausal symptoms and health-seeking behavior among women in Malaysia: A cross-sectional study using a menopause Quick -6 Malay; MQ-6(M) Questionnaire

A Manoharan¹, Megat Muhammad Haris MZ², HC Beh³, WM Koh⁴, Zamzurina A³, Norafini S⁶, Peter J⁷, Radhiyah H⁸, Nadia Hamimah K⁹, S. Goldstein¹⁰, CT Sreeramareddy¹¹

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Introduction: Menopause Quick 6 (MQ6) (<https://mq6.ca>), is a proposed quick assessment tool for making treatment decisions in primary care. We assessed the validity of the Malay language version MQ-6(M), menopausal symptoms, and health-seeking behaviors among women attending primary care clinics.

Method: We added the seventh item on joint pain to MQ-6 and translated it into Malay. MQ-6(M) has binary responses of 'yes/no' and was self-administered to 400 women aged 40-60 years old at six health clinics. Content validity Index (CVI), Cronbach's alpha (CA), and Factor analysis (FA) were done. The descriptive statistics of menopausal symptoms, healthcare-seeking, and treatment received were calculated. Factors associated with healthcare-seeking were determined using binary logistic regression.

Results: MQ-6(M) had a CVI of >0.9, CA of 0.711, and factor loadings of > 0.7 indicating a well-defined structure. The mean age was 51.2 years (SD 6.3), 53% had attained menopause, 21% were in the perimenopausal and 25.3%

were in the pre-menopausal stage. At least one medical and gynaecological condition was reported in 83.8% and 12.3% of the women respectively. Joint pain (42.8%), menstrual changes (39.5%), and hot flashes (29.5) were common symptoms. 88 women had seen a healthcare provider (of them 54 at the Health Clinic, 36 general practitioners, 12 gynaecologists, 12 traditional, 3 pharmacists) for menopausal symptoms. 58 women (14.5%) had received treatment (13.8% hormonal, and 86.2% symptomatic treatment.) Perimenopausal women with comorbidity and menopausal symptoms are likely to consult an health care providers.

Conclusion: MQ-6 (M) has acceptable validity. Menopausal symptoms identified were similar like other instruments.

Oral Abstract 3

Managing CKD in primary care: Outcome from nephrology liaison clinic

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Introduction: A collaboration between Nephrologist Hospital Kuala Lumpur and Family Medicine Specialist in Klinik Kesihatan Sentul (KKS) had established a Nephrology clinic in primary care starting 2019. The objective of the study is to determine patient outcome after follow up for 1 year in Nephrology clinic in primary clinic.

Methods: Retrospective data review on patient who registered with Nephrology Clinic from 2019 to 2021. Data analyzed using frequency, percentage, T-test, and logistic regression.

Results: From 2019 to 2021, 81 patients registered at KKS's Nephrology Liaison Clinic. Of these, 45 (55.6%) continued follow-up at the primary care level for over a year, while 28 (34.6%) were referred to tertiary care within a year mainly for preparation of Renal Replacement Therapy. The default rate was 1.2% (1/81). Among patients attending for over a year, 71.1% (32/45) showed retardation in the eGFR decline rate, and 66.7% (30/45) maintained or improved their urine ACR. Significant reductions were observed in systolic (-3.6mmHg; 95% CI: -7.0 to -0.1; P=0.043) and diastolic blood pressure (-3.0mmHg, 95% CI: -5.9 to -0.1; P=0.046), along with an improvement in HbA1c from the baseline (-7.7%, 95% CI: -13.8 to -1.9, P=0.011).

Conclusion: Selected cases of CKD can be effectively managed in a primary care setting. Through collaboration between nephrologists and primary care providers, suitable patients can remain within primary care while ensuring a seamless patient transition from primary care to tertiary care when necessary. This integrated approach could potentially delay the progression of CKD.

Oral Abstract 4

Understanding the impact of HIV stigma and HIV knowledge on late presentation of HIV among people living with HIV (PLHIV) in public primary care clinic setting in Selangor

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Introduction: Early diagnosis and treatment of HIV have proven beneficial for people living with HIV (PLHIV), reducing the burden on healthcare systems, and contributing to ending the HIV/AIDS epidemic. However, in Malaysia, over 50% of newly diagnosed HIV patients present late, leading to increased morbidity and premature mortality. This study aims to determine the prevalence of late HIV presentation and its association with HIV-related stigma and HIV knowledge among PLHIV attending public primary care clinics in Selangor.

Methods: A cross-sectional study was conducted at selected Klinik Kesihatan in Gombak and Petaling District, Selangor, involving PLHIV aged 18 years and older, diagnosed since 2019. Late presenters were defined as individuals presenting with a CD4 count below 350 cells/ μ L or with an AIDS-defining event, according to the European Late Presenter Consensus working group. HIV-related stigma was measured using Berger's HIV Stigma Scale, and HIV knowledge was assessed using the Brief HIV-KQ-18. Univariate and multivariate logistic regression analyses were performed to identify factors associated with late presentation.

Results: A total of 396 participants were included, with 59.6% classified as late presenters. High levels of HIV-related stigma [AOR=1.049, 95% CI: 1.034, 1.062; (p<0.001)] and low levels of HIV knowledge [AOR=0.713, 95% CI: 0.651, 0.780; (p<0.001)] were identified as risk factors for late presentation.

Conclusion: This study highlights the association between high levels of HIV-related stigma, low levels of HIV knowledge, and late HIV presentation. Effective intervention programs targeting early HIV diagnosis, improved HIV care, and treatment are necessary to address this issue.

Oral Abstract 5

Fibrates prescription among patients with diabetic retinopathy in Perak: A five-year study

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Introduction: Diabetic retinopathy (DR) is a major cause of blindness and visual disability in adults. The prevalence of DR is increasing and is closely linked to the duration of diabetes mellitus. Fibrate, specifically fenofibrate, has been shown to be efficacious in reducing the progression of DR. This study aims to determine the five-year trend of fibrate prescription and factors associated with non-prescription of fibrate among patients with DR in Perak.

Methods: Data on all patients with DR in 76 government health clinics in Perak who were audited between 2018 and 2022 were extracted from the National Diabetic Registry (NDR), excluding those who were lost to follow-up. Multiple logistic regression was used to identify factors associated with the non-prescription of fibrates.

Results: 4028 patients' data were analysed. Commonly prescribed medications were statins (86.0%), metformin (79.7%), and angiotensin-converting enzyme inhibitors (57.5%). Only 63 (1.6%) patients were prescribed fibrates. There was no statistical difference in the proportion of fibrate prescriptions before and after approval of its use for DR in 2019 (P=0.206). Factors associated with non-prescription of fibrates were patients from the clinics in southern (AOR=4.45, 95%CI: 1.54-12.91) and northern cluster (AOR=3.07, 95%CI: 1.15-8.16), triglycerides >1.7 (AOR=0.21, 95%CI: 0.08-0.54), prescription of insulin (AOR=0.36, 95%CI: 0.14-0.94) and statin (AOR=9.68, 95%CI: 3.71-25.27).

Conclusion: The prescription of fibrate among patients with DR was remarkably low, highlighting a missed opportunity for early treatment and improved outcomes in primary care. Clinicians should consider the factors associated with non-prescription of fibrate identified when prescribing to these patients.

Oral Abstract 6

Kampar Limb Irrigation Tool (K-LIT): A new wonder in wound care

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Introduction: Kampar Limb Irrigation Tool (K-LIT) is an innovation of effective medical tools in wound irrigation and uniquely designed based on field demands to save a healthcare resource including manpower, time and financial burden. The prominent impacts of K-LIT are reflected in client's satisfaction, cost-effectiveness, and time-saving application of irrigation during this study.

Methods: Sampling was done via convenience method while descriptive comparison analysis of the result calculated to interpret these impacts. Satisfaction survey was conducted from January 2022 to April 2022 in health clinics under Pejabat Kesihatan Daerah Kampar whereas the cost and time calculation obtained concurrently within the same period.

Results: The results showed that 100% of staff and patients were satisfied with all aspects of concern. While cost wise, results showed that K-LIT had saved the budget up to RM 3360.00 for 5 years period and reduced mean 8 minutes of time consumed per patient for wound treatment process compared to conventional procedure.

Conclusion: In conclusion, this innovation has improved the efficiency and quality of wound treatment while simultaneously applicable, high impact and cost saving in long term.

Oral Abstract 7**Cross sectional study: Prevalence of stress, anxiety and depression and their associated factors among Primary Care Doctors (PCD) Involved in COVID-19 management in Perak, Malaysia**

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Introduction: Healthcare workers face extra workloads and psychological pressure due to the Coronavirus disease 2019 (COVID-19). To date, Malaysia has limited data published regarding mental health issues among primary care doctors (PCDs). This study aims to assess the prevalence of depression, anxiety, and stress among PCDs involved in COVID-19 management in Perak Malaysia and identify the associated factors.

Methods: This cross-sectional study was conducted online among PCDs from March 2022 to October 2022 using the validated Malay language version of Depression, Anxiety and Stress Scale-21 (DASS-21) questionnaire.

Results: Out of 1400 invitations, 218 responded (response rate 15.57%). However only 208 completed records. Prevalence of depression was 26%, followed by anxiety, 20.7%, and stress 19.7%. Participants were predominantly of 30-39 years old age group (75%), female (71.6%), Malay (51.4%), married (76%), and without post-graduate qualifications (77.9%). Younger age PCDs (20-29 years old) were 6x more likely to be stressed [6.02 AOR; 95% CI (1.09; 33.11), p=0.04] as compared to those aged >40. Urban districts PCDs have 65% lesser risk of developing anxiety [0.35 AOR; 95% CI (0.16; 0.77), p=0.01]. PCDs that involved in COVID-19 management less than 10 days per month showed 63% less risk of developing anxiety [AOR, 0.37; 95% CI (0.16; 0.85), p=0.02].

Conclusion: The prevalence of depression, anxiety and stress in this study was high. There is a need to recognise the adverse consequences of mental health problems among PCDs, especially the young, with limited experience and those practicing in rural area.

Oral Abstract 8**Knowledge, attitude and practice of asthma action plan prescription among primary care doctors in Kuala Lumpur**

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Introduction: Written asthma action plan (WAAP) is one

of the self-management methods for asthma patients. It is used during acute exacerbation and has been shown to reduce hospitalization. However, primary care doctors (PCDs) seldom prescribe WAAP. We aimed to determine the knowledge, attitude and practice of WAAP prescription among PCDs.

Methods: This was a cross-sectional study conducted among PCDs in public health clinics in Kuala Lumpur. Universal sampling was used. Participants completed a self-administered questionnaire. Analysis was performed using SPSS version 26.

Results: 256 PCDs participated. Median age was 33 (IQR 26-59) years old. Only 29.1% of PCDs prescribed WAAP for their patients. For knowledge, 71.7% of participants scored above the median score of 5. PCDs who did not use any guidelines had 7 times the odds of having a lower knowledge score compared to those who did. For attitude, PCDs who had attended Continuous Medical Educations (CME) (AOR 5.885 CI 1.285- 26.94, p <0.008) and used two guidelines in asthma management had higher confidence (AOR 2.884 CI 1.361-6.11, p<0.04). A significant association was found between the number of patients seen per week, being a house officer, overseas graduate, attended WAAP CMEs before with prescribing WAAP. The commonest reason for not prescribing WAAP (63%) as it is not readily available in the clinic.

Conclusion: About a third of PCDs prescribed WAAP, two-thirds had good knowledge and confidence level. CME attendance was significantly associated with high confidence levels and practice rates. More CME should be provided on WAAP for better asthma control in the future.

Oral Abstract 9**Feasibility of QR-based quality improvement projects in an urban primary care setting**

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Introduction: The use of QR codes to disseminate information is popular after the COVID-19 pandemic. We aimed to investigate the feasibility of implementing QR-based Quality Improvement Projects in our clinic to improve patients' medical knowledge, experience, and access to care.

Methods: We recruited every 25th patient registered in our clinic from 9th Jan 2023 to 17th Feb 2023. Participants answered a self-administered printed questionnaire (available in three languages) at the patients' waiting area. Data were analyzed using SPSS version 26.

Results: We recruited 312 patients. Median age was 57.0 years (IQR: 18.0-91.0). Females constituted 63.1%; ethnic distribution included Malay (44.2%), Chinese (32.4%) and Indian (21.8%). Smartphone usage reached 90.4% (n=282), with 83.7% (n=261) reporting average or good proficiency. 58.0% accessed medical info via smartphones, and 67.0% were

familiar with QR codes. Multiple logistic regression analyses revealed that QR familiarity was linked to age (<65 years) [AOR 4.593 (95% CI 2.351-8.976, $P<0.001$)], smartphone proficiency [AOR 4.703 (95% CI 1.624-13.623, $P=0.004$)], tertiary education [AOR 2.385 (95% CI 1.170-4.863)], and prior medical info retrieval via smartphones [AOR 5.472 (95% CI 2.790-10.732, $P<0.001$)].

Conclusion: Nearly all patients used a smartphone and over half were familiar with QR code scanning in our setting. Hence, QR code-based quality improvement services can be implemented in our setting.

Oral Abstract 10

Prevalence of offering menopause hormone therapy and its associated factors among primary care doctors

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Introduction: Primary care clinics are often the first health facilities for patients seeking medical advice on their menopause symptoms. Guidelines have recommended menopause hormone therapy (MHT) is the most effective treatment for menopause symptoms. However, the usage of MHT among menopause women was low (8.1%). One of the main reasons given by patient was that MHT was not recommended by their doctors. The objectives of this study are to determine the prevalence of offering MHT in treating symptomatic menopause women among primary care doctors (PCDs) and its associated factors.

Methods: This was a cross sectional study involving primary care doctors from Kuala Lumpur, Selangor and Putrajaya using online surveys. Multiple logistic regression analysis was carried out to examine the factors associated with offering MHT.

Results: The response rate was 42.9% (559/1301). 77.8% of PCDs were female and 89.1% were medical officers. Advising on lifestyle modification (98.4%) was the most common practice by PCDs in treating menopausal women. 66.9% of PCDs reported offering MHT to their patient; however, the MHT prescription rate among PCDs was low (0.9%). Only 12.9% PCDs had MHT in their practice. 83% PCDs had not received training on menopause management. Female PCDs (OR=2.5, $P<0.001$), MHT as preference treatment for menopause symptom (OR=3.6, $P<0.001$), likelihood to recommend MHT to family and friends (OR=3.0, $P<0.001$), and training received on menopause management (OR=2.7, $P=0.008$) were the positive predictor of offering MHT. The negative predictors in offering MHT were no experience in prescribing MHT (OR=0.4, $P=0.024$) and lack of information regarding MHT for the patient (OR=0.4, $P<0.001$).

Conclusion: MHT unavailability in primary care, inadequate training rate in menopause management among PCDs, and lack of information regarding MHT to patients were the factors that need to be targeted for improvement of menopausal care in primary care.

Oral Abstract 11

Exploring the effect of socio-cultural elements on people with asthma and limited health literacy in Malaysia: Insights from photovoice.

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Introduction: Limited health literacy is linked to poor adherence and outcomes, especially in vulnerable groups like people with asthma and limited health literacy. Socio-cultural pressures may have an impact on their overall health, including psychological health, which it can be challenging to express verbally. Using arts-based qualitative methodology, we aimed to explore the effect of socio-cultural elements on people with asthma and limited health literacy in Malaysia.

Methods: We purposively recruited adults ≥ 18 years, with asthma and limited health literacy (using health literacy scale, HLS-Q47 (Malay version) from five primary healthcare clinics in Malaysia. The interviews used a semi-structured topic guide in participants' preferred language. Participants were additionally invited to participate in 'Photovoice': (1) One-week photo-taking (2) Photo-interview. Interviews were audio-recorded, transcribed verbatim, and analysed thematically.

Results: Twenty-six participants provided in-depth interviews. Eight also completed photovoice activities which provided further insights to the initial interviews. Participants faced multiple challenges to conform to expected social roles (i.e., caregiving role) which may affect their health-seeking behaviour and asthma control. Gender narratives dominated socio-cultural expectations ('strong man' and 'obedient wife'). Sociocultural beliefs and religion shaped experiences of and attitudes towards health, as well as death. These factors influenced how self-management was viewed and practised. Unmet social expectations and constant fear of death led to isolation which significantly affected mental health.

Conclusion: Context-specific psychosocial factors influence asthma self-management practices and control. Photovoice allowed further understanding of these psychosocial aspects; giving voice to people with limited health literacy in a multicultural society.

Oral Abstract 12

Prevailing over autism through multidisciplinary early intervention in Kuala Kangsar health clinic: A novel approach in primary care - A case report

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Introduction: Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder, with core deficits identified in social communication/interaction, alongside repetitive and restricted behavior patterns. Early and effective intervention is advocated strongly to improve outcomes in children with ASD. The Kuala Kangsar Health Clinic Early Childhood Integrated Care (ECIC) is a newly established multidisciplinary effort to provide structured early interventions for children with ASD.

Case presentation: A 3 year 7-month-old male child presented to a primary care specialist clinic in Kuala Kangsar with speech and language delay. The child was previously diagnosed with ASD at 1 year 9 months, but failed to attend regular follow-ups, due to financial and logistic challenges. The child was enrolled in Kuala Kangsar Health Clinic ECIC, and the intervention included occupational therapy, dietitian review, counsellor review, and family medicine specialist (FMS) follow up. A significant improvement in the child's growth and development following 3 months of intervention was noted through the Denver Scale, Autism Treatment Evaluation Checklist (ATEC), and the Short Sensory Profile.

Discussion: ASD is a complex condition that requires early and structured intervention. Kuala Kangsar Health Clinic ECIC is a 'one-stop centre' for children, where most services for children with developmental needs are accessible under one roof. The FMS coordinates the care by determining specific evidence-based interventions tailored to children's needs. This centre promotes family-centred care and parent empowerment.

Conclusion: Kuala Kangsar ECIC is uniquely placed to provide multidisciplinary early intervention programs for children with ASD in line with the caring Malaysia Madani agenda.

Oral Abstract 13

An itch he could not ditch – A case of recurrent COVID-19 vaccine-induced urticarial vasculitis

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Introduction: Urticarial vasculitis is an autoimmune disorder that can be idiopathic or caused by drugs, infections, and concomitant autoimmune diseases. Recently, COVID-19 infection and COVID-19 vaccinations have been implicated as potential triggers. This case study reports a case of COVID-19 vaccine-induced urticarial vasculitis and its response to treatment.

Case presentation: A 66-year-old gentleman developed recurrent worsening pruritic plaques over his limbs and trunk after receiving his second and third COVID-19 vaccination. A trial of oral prednisolone, topical corticosteroids and antihistamines provided temporary resolution. He had no history of fever, a recent change in medications, travel, or ill contacts. His medical history includes coronary artery disease and bronchial asthma. He has no known allergies. A punch skin biopsy was performed, which showed features suggestive of urticarial vasculitis. A diagnosis of COVID-19 vaccine-induced urticarial vasculitis was made. He was started on colchicine, oral antihistamines, and emollients. He achieved complete resolution of symptoms six months later.

Discussion: Cutaneous vasculitis is an adverse event associated with COVID-19 vaccination, especially with mRNA vaccines, including urticarial vasculitis. Increasing severity of recurrence may suggest increased immunogenicity as a possible disease pathogenesis. Systemic corticosteroids are the cornerstone of treatment, while options for refractory or recurrent cases include anti-neutrophilic agents (e.g., colchicine), immunomodulators and plasmapheresis.

Conclusion: Urticarial vasculitis is an important differential to consider when reviewing a patient presenting with recurrent worsening pruritic plaques following COVID-19 vaccination, in which case skin biopsy should be considered.

Oral Abstract 14

Prevalence and predicted factors associated with Postpartum Abnormal Glucose Tolerance (P- AGT) among postpartum GDM mothers in Klang, Selangor.

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Introduction: Gestational Diabetes Mellitus (GDM) mothers carries at least seven-fold higher risk in developing Diabetes Mellitus (DM). The aim was to determine the prevalence, predictors of Postpartum-Abnormal Glucose Tolerance (P-AGT) and level of GDM knowledge among postpartum GDM mothers in Klang.

Methods: This was a cross sectional study conducted among postpartum GDM mothers who attended the Health Clinic in Klang for the Oral Glucose Tolerance Test (OGTT) during early postpartum period (6-12 weeks postpartum). Sociodemographic, clinical characteristics, postpartum OGTT results and knowledge on GDM (using a validated questionnaire GDMKQ) were obtained.

Results: A total of 439 postpartum GDM mothers were included in the final analysis. Majority were aged less than 35 years old (71.8%), Malays (82.7%) and had adequate knowledge on GDM (92.9%). The prevalence of P-AGT was 28.9%. Among these, 86.6% were Pre-DM, (90.0% has impaired glucose tolerance (IGT), 7.3% has impaired fasting glucose (IFG), and 2.7% have both IFG and IGT) while 13.4% were DM. Multivariate analyses showed first degree family history of DM [AOR: 1.550, 95% CI: 1.005, 2.389; (p = 0.047)], diagnosed with GDM at less than 24 weeks of gestation [aOR: 1.847, 95% CI: 1.168, 2.920; (p=0.009)] and had abnormal 2HPP result during diagnosis of GDM [OR: 2.952, 95% CI: 1.740, 5.008; (p<0.001)] were significantly associated with P-AGT.

Conclusion: This study showed a higher prevalence of P-AGT similar to other local studies. Targeted monitoring and management are important among mothers with first degree family history of DM, GDM diagnosed at less than 24 weeks of gestation and had deranged 2HPP upon diagnosis of GDM in the prevention of P-AGT

Oral Abstract 15

Detection rate of Familial Hypercholesterolaemia (FH) and diagnostic accuracy of Familial Hypercholesterolaemia Case Ascertainment Tool (FAMCAT), Simon Broome (SB) criteria and Dutch Lipid Clinic Criteria (DLCC) against genetic diagnosis as the gold standard in the Malaysian primary care setting

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Introduction: To compare the detection rate of FH and diagnostic accuracy between FAMCAT, SB and DLCC against genetic diagnosis as the gold standard in the Malaysian primary care setting.

Methods: This diagnostic accuracy study was conducted at 11 public primary care clinics in Klang Valley from 2020-2023. Patients aged ≥ 18 years with LDL-c of ≥ 4.0 mmol/L recorded in the electronic medical record were invited to participate and were assessed at the clinic. Those who fulfilled the inclusion/exclusion criteria were recruited. Written informed consent was obtained and data on socio-demographic characteristics, family history, physical examinations and the diagnostic variables for FAMCAT, SB and DLCC were collected. Blood samples were taken from those who fulfilled the genetic testing criteria. Targeted next generation sequencing (NGS) were performed. Statistical analysis was conducted to measure the detection rate and diagnostic accuracy.

Results: A total of 3085 patients from 11 clinics were invited to participate. Of these, 429 were eligible and recruited. Of these, 310 fulfilled the genetic testing criteria and blood samples were taken for genetic analysis. Of these, 86 patients were genetically confirmed to have FH. The detection rate by FAMCAT, SB and DLCC were 35.4% (28.1–43.4%), 30% (24.8–35.8%) and 33.3% (27.2–40.1%), respectively. The sensitivity of FAMCAT, SB and DLCC were 60.5% (49.3–70.8%), 90.7% (82.5–95.9%) and 77.9% (67.7–86.1%), respectively. The specificity

of FAMCAT, SB and DLCC were 57.6% (50.8–64.1%), 18.8% (13.9–24.5%) and 40.2% (33.7–46.9%), respectively.

Conclusion: FAMCAT has the highest detection rate and specificity, while SB has the highest sensitivity compared to the other criteria. All three criteria performed well in diagnosing FH clinically and in identifying patients for genetic testing.

Oral Abstract 16

Malaysia's Primary Care Physicians (PCP) perceived barriers in type 2 diabetes mellitus management before and during COVID-19 pandemic: A nationwide cross-sectional survey

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Introduction: Diabetes mellitus is a global health issue affecting 346 million people worldwide. The prevalence of diabetes in Malaysia has raised from 11.6% in 2006 to 18.3% in 2019. Through understanding the influences on clinical behaviour, we can steer improvement and selection of interventions to enhance diabetes care.

Methods: A cross-sectional study was conducted among family medicine specialists (FMS) and medical officers (MO) in all public health clinics in Malaysia using an online self-administered questionnaire. The questionnaire was developed after reviewing a variety of existing qualitative and quantitative studies on diabetes care and had a face and content validity tested by clinical experts.

Results: A total of 504 respondents were recruited. Mean score (SD) for healthcare providers barrier were 63.6(28.5) and 57.4(28.4) during and before COVID-19 respectively, while healthcare system related barrier was 63.1(27.1) and 57.4(27.1) respectively during and before COVID-19. Patient related barriers mean score (SD) during and before COVID-19 were 67.0(26.7), and 64.0(26.9) respectively. The determinant for highest tertile healthcare providers barrier during COVID-19 was see 21 to 30 patients per day (OR:0.41). The determinants for highest tertile healthcare system barriers during COVID-19 are FMS graduated via parallel pathway (OR: 5.08), clinic in city (OR: 0.59), and MO graduated locally (OR:3.18). The determinants of highest tertile patient barriers during COVID-19 were spent less than 15 minutes per patient (OR:0.14), and 15 to 30 minutes per patient (OR:0.17).

Conclusion: It can be seen during this pandemic, the barriers towards T2DM management have been amplified for all three barriers sections. The determinants in this study may be useful to serve as reference for further study.

Oral Abstract 17

The effect of USM-Insulin Adherence Module (U-IAM)-based counselling on insulin adherence, HbA1c and FBS in comparison to standard counselling module

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Introduction: Many patients with type 2 diabetes mellitus do not achieve the desired glycemic control despite insulin treatment, likely due to an improper understanding of insulin function, its intensification process, and patients' negative perception. We developed USM- insulin adherence module (U-IAM) to educate patients.

Methods: This RCT assess the effect of U-IAM-based counselling on adherence score, HbA1c and FBS compared to standard counselling. Patients were allocated to groups based on computer randomisation. Four diabetes educators counselled patients during endocrine clinic sessions. Patients received counselling on visits one and two. Blood investigations and adherence scores were obtained on all visits.

Results: One hundred and eighty patients were recruited. No significant difference in the sociodemographic and disease profile among groups at baseline. Both groups had increments in adherence scores and reductions in HbA1c; hence, between-group changes were insignificant. Mean changes of adherence score in the control group between baseline and three months (V1-V2) and baseline to six months (V1-V3) were 7.70 (CI: 11.34, 4.05) and 10.91 (CI: 15.14, 6.67), respectively, while for the intervention group was 8.74 (CI: 12.04, 5.44), and 9.93 (CI: 13.46, 6.40), respectively. Mean HbA1c reduction in control group between V1-V2 and V1-V3, was 0.61% (CI: 0.15, 1.06) and 0.59% (CI: 0.15, 1.03), respectively, while for the intervention group was 1.14% (CI: 0.72, 1.58) and 1.08% (CI: 0.66, 1.5) respectively. FBS changes were significant in intervention group compared to control group (p-value 0.046).

Conclusion: U-IAM-based counselling significantly reduces FBS than standard approach. No significant difference in insulin adherence and HbA1c.

Oral Abstract 18

Impact of COVID-19 pandemic towards type 2 diabetes patients' healthcare and lifestyles.

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Introduction: The twofold health issues of diabetes and Novel Coronavirus Disease 2019 (COVID-19) has posed an impact on the individuals with diabetes. However, little is known about the experiences of diabetes individuals handling their diabetes routine during the COVID-19 pandemic. The aim of this study is to explore the experience of diabetes patients in managing their diabetes routine during the COVID-19 pandemic.

Methods: A qualitative, thematic analysis using interpretive phenomenology was conducted among the diabetes patients in the primary care clinic of University Malaya Medical Centre (UMMC) using semi-structured in-depth interviews. Twenty type 2 diabetes mellitus (T2DM) patients were interviewed.

Results: Three themes emerged from this study (1) Changes in diabetes routine caused by COVID-19 pandemic, (2) Challenges in diabetes routine caused by COVID-19 pandemic, and (3) Adaptive mechanism of diabetes patients during COVID-19 pandemic. From this, there are few variables that can be addressed and improved: (1) Development of diabetes patients' guidance and support systems for their diabetes routine and psychological needs, and (2) Enhancement of diabetes services and accessibility to the diabetes patients.

Conclusion: The results of this study provide new insights on how diabetes patients respond to the COVID-19 pandemic. It may help to establish future guidelines on diabetes routine strategies in changed circumstances such as pandemics or other future unpredictable disasters.

Oral Abstract 19

Factors associated with leisure time physical activity among clinically diagnosed individuals with Familial Hypercholesterolaemia (FH)

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Introduction: Familial hypercholesterolaemia (FH) poses a major risk for premature cardiovascular disease (CVD). Lifestyle modification including regular physical activity plays an important role in modulating the course of this condition. However, studies looking at physical activity and its associated factors among Malaysian adults with FH are scarce.

Methods: This was a cross-sectional study conducted at 11 public primary care clinics in Klang Valley from 2020 to 2023. Clinically diagnosed FH patients were invited to participate. Sociodemographic and clinical characteristics data were collected from those who fulfilled the inclusion and exclusion criteria. Questionnaire assessing physical activity levels from

the Malaysian Adult Nutrition Survey (MANS) covering job-related, transport-related, recreational, sports and leisure time physical activity and time spent sitting was used in this study. Data was analysed using simple logistic regressions followed by multiple logistic regressions.

Results: A total of 291 patients were recruited. The mean (SD) age was 48.2 (± 9.83) years. Of these, 99 patients (34%) engaged in leisure-time physical activity. Patients who were from the M40 and T20 household income groups (AOR=2.03, 95% CI: 1.122–3.673) and ex-smokers (AOR=2.399, 95% CI: 1.128–5.100) were more likely to engage in leisure-time physical activity.

Conclusion: Only one third of clinically diagnosed FH patients were physically active during their leisure time. Physical activity education and awareness should be emphasized by primary care providers as part of the comprehensive management of FH patients, to reduce their risk of premature CVD.

POSTER ABSTRACTS –

a) CLINICAL RESEARCH

Poster Abstract 1

Determining the importance of rapid, colorimetric sensors in detection of hypoxia tolerance at high altitude

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Introduction: Prolonged exposure episodes to high altitudes may cause acute hypoxia and lead to potential hazardous health consequences. People suffering high altitude disorders caused homeostatic responses that leads to formation of hypoxia-inducible factor (HIF) proteins which triggers physiological changes and plays a role in hypoxia response. Chronic intermittent hypoxia in human beings affects type 2 diabetes, insulin resistance, dyslipidemia, and obesity. The physiological interaction between HIF and HIF-1 α protein (HIF-1A gene) provides the opportunity to study the effects pertaining to low oxygen tensions caused by prolonged exposure in high altitudes leading to hypoxia using rapid colorimetric sensors.

Methods: The development of strip-based detection enables the use of an enzyme-linked assay in a device which provides more sensitivity and rapid time analysis with low sample requirements. For this purpose, parameters including reagent concentration, reagent volumes, and device dimensions were optimized to produce a calibration curve generated using

rabbit IgG. Subsequently, a housing for the detection kit with a reagent storage was crafted for an autonomously operating device.

Results: There was a measurable qualitative change in colorimetric signal consequent to the presence of the HIF-1 α biomarker protein. In the absence of the protein, no colorimetric signal was produced. The detection strip, were able to detect low volumes of the hypoxia biomarker, demonstrating a potential use of this device to be applied as the diagnostic approaches in human hypoxia detection.

Conclusion: The findings of this study will enable a point-of-care testing and individual self-administration, to identify a rapid and accurate health surveillance among people with high altitude exposure.

Poster Abstract 2

The prevalence and burden of diabetes-related symptoms among patients with Type 2 Diabetes Mellitus (T2DM)

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Introduction: T2DM is a major NCD in Malaysia and the prevalence has increased to 18.3% in year 2019. T2DM patients may have symptoms during their early diagnosis or develop symptoms as their disease progresses. There were not many studies done on the prevalence of diabetes-related symptoms and its burden among people with diabetes.

Methods: This was a cross-sectional study conducted at an urban primary care clinic in Malaysia over a one-month period. Patients with T2DM were chosen using a systematic random sampling. Consented patients answered a self-administered questionnaire, derived from the Diabetic Symptoms Checklist (which was translated to Malay language). This questionnaire included their socio-demography, their diabetes-related symptoms burdens for the past one month and post consultation feedback about their symptoms.

Results: Response rate was 97.7%. Among the 8 subscale symptoms, symptoms of hyperglycaemia were most prevalent with 'Frequent need to empty your bladder' being the commonest hyperglycaemia symptom at 48.1%. Generally, symptom burden scores between mild to moderate. The majority of patients did not report their symptoms to the doctor (56.7%). Those who reported their symptom(s) agreed that the doctor addressed their symptom(s).

Conclusion: Hyperglycaemic symptoms were most prevalent among T2DM patients. A total of 48.1% of patients with T2DM had symptoms of polyuria. Generally, symptom burden among T2DM patients was low. The majority of T2DM patients did not report their symptoms to the doctor. Those who reported their symptoms had a higher symptom burden.

Poster Abstract 3**Prevalence and factors associated with smoking cessation among clients attending quit smoking services at government health clinics in Bintulu Division from 2016 to 2021**Rawa AB¹, Mohd Shahibul SA¹, **Sreeram Naidu RN¹**, Danny T¹, Muhammad Heesham MN¹¹*Klinik Kesihatan Bintulu, Sarawak, Malaysia.*

Introduction: Quit smoking is one of the attempts to reduce risk of cardiovascular events. Aim of this study is to determine the prevalence of smoking cessation and identify the associated factors to successful smoking cessation among smokers receiving cessation services.

Methods: This is a retrospective cross-sectional study which involves analyzing medical records of clients registered with quit smoking services from government health clinics in Bintulu Division from year 2016-2021. Successful smoking cessation is defined as the ability to remain quit for duration of 6-months or more. Client sociodemographic data, their comorbidity, smoking history, nicotine dependency level and compliance to quit smoking services were included as variables. Simple logistic regression and multiple logistic regression were used to analyze the associations of these factors to successful smoking cessation.

Results: The prevalence of successful smoking cessation is 51.5%. Simple logistic regression analysis revealed that older age, secondary education level, comorbidity such as Hypertension and dyslipidaemia, history of previous quit attempt and patient adherence to quit smoking clinic visits are the factors that contribute to success in smoking cessation. Multiple logistic regression found that clients who comply to quit smoking service visits are 3 times higher chance of successful smoking cessation.

Conclusion: Prevalence of successful smoking cessation among clients attending Quit smoking services is 51.5% with compliance to follow up. Therefore, attempts should be made to ensure that clients adhere to quit smoking clinic appointments in order to have a higher chance of smoking cessation.

Poster Abstract 4**What personal factors prevent women aged 50-65 from performing regular pap smears?**Anthony Arputajulie^{1,4}, **Mohd Hashim Syahnaz^{1,3}**, Hamzah Zuhra^{1,3}, Nawi Azmawati^{2,3}¹*Department of Family Medicine, Faculty of Medicine, Universiti Kebangsaan Malaysia, Kuala Lumpur, Malaysia;* ²*Department of Public Health Medicine, Faculty of Medicine, Universiti Kebangsaan Malaysia, Kuala Lumpur, Malaysia;* ³*Hospital Canselor Tuanku Muhriz, Kuala Lumpur, Malaysia;* ⁴*Batu Arang Health Clinic, Selangor, Malaysia.*

Introduction: Cervical cancer is the third leading cancer among women in Malaysia and is notably high among those aged 50–65. Regular pap smear screening is advocated to detect cervical cancer at an early stage. Despite its availability, most do

not adhere to the recommended pap smear screening schedule. The current study aimed to understand personal factors that prevent women aged 50-65 from performing regular pap smears.

Methods: This qualitative study involved 12 women aged 50-65 who did not perform regular pap smears. Participants were recruited through purposive sampling. In-depth interviews were conducted at Klinik Primer Hospital Canselor Tuanku Muhriz from June until August 2022. Data were analysed using thematic analysis.

Results: Five themes appeared from the analysis. The first theme: 'perceived not being at risk of cervical cancer' pictured that some women believe that they do not require a repeat smear as they are asymptomatic and still young. Furthermore, a negative family history, practising good dietary habits and having a faithful husband gave them false reassurance. The participants misunderstood the purpose and recommended schedule, as highlighted in the second theme: 'misconceptions about pap smear'. The third theme: 'having negative experiences' portrays the feeling of embarrassment and discomfort with the procedure. Finally, the fourth theme indicates that women 'prioritise other life commitments' than performing a regular pap smear. 'Fatalistic belief' in the final theme suggests that some perceived screening as unnecessary as illnesses are already destined.

Conclusion: Effective strategies should be undertaken to correct women's perception of pap smear screening and cervical cancer.

Poster Abstract 5**Descriptive analysis of intravenous iron dextran in antepartum patients, efficacy and safety in a Malaysian primary care clinic**Farah H¹, **Kong LEC¹**¹*Klinik Kesihatan Chemor, Perak, Malaysia.*

Introduction: Chemor Health Clinic implemented intravenous iron dextran administration as an outpatient procedure in 2018 for the treatment of iron deficiency anaemia in pregnancy. This study aims to explore the demographic attributes of antenatal patients that received intravenous iron dextran, its efficacy and safety in our local setting in Perak state.

Methods: This is a retrospective descriptive study of antenatal patients who received treatment for iron deficiency anaemia with intravenous iron dextran at Chemor Health Clinic from 1 March 2021 to 28 February 2022. Data was extracted from clinic antenatal records. 195 patients received intravenous iron dextran, of which 187 clinic records were available for data extraction. Data was analysed using SPSS.

Results: The mean dosage of iron dextran administered was 725.13 ± 21.19mg. The mean gestational age at administration was 30.50 ± 3.68 weeks with a mean pretreatment haemoglobin of 9.92 ± 0.74g/dL. The increment of haemoglobin from pretreatment level was 0.63 ± 0.55g/dL at 2 to 3 weeks, 1.20 ± 0.71g/dL at 3 to 5 weeks, and 1.58 ± 0.83g/dL at 5 to 7 weeks. 73.8% of patients achieved the target predelivery haemoglobin

of $\geq 11\text{g/dL}$ with a mean gestational age at delivery of 38.30 ± 1.48 weeks and a mean predelivery haemoglobin of $11.69 \pm 0.91\text{g/dL}$. The presence of anaemia at 1 month postpartum was 2.1%. Mild adverse reactions were reported in 3 patients (1.6%) with no serious adverse reactions reported.

Conclusion: Intravenous iron dextran can safely be used in pregnancy to reduce the presence of anaemia at predelivery.

Poster Abstract 6

Target achievement of LDL-C level and statin intensity among diabetic patients in primary care setting in Labuan Malaysia

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Introduction: Accelerated atherosclerosis causes development of cardiovascular disease and premature death among diabetic patients. This study aims to evaluate target achievement of low-density lipoprotein cholesterol (LDL-C) level and intensity of statin among diabetic patients in Klinik Kesihatan Wilayah Persekutuan Labuan.

Methods: This is a cross-sectional study of diabetic patients aged ≥ 18 years with triglyceride $\leq 4.5\text{mmol/L}$ actively registered ≥ 1 year in National Diabetic Registry. Patients treated with statin ≥ 3 months with LDL-C level available within the previous 12 months were enrolled. The LDL-C target of each patient is based on their cardiovascular risk categories according to Malaysian 2020 guideline on type 2 diabetes mellitus.

Results: Among 1197 diabetic patients (mean age 60 ± 11 years, 61.6% women, 48.3% obese), 88.6% are Very High Risk (VHR), 10.3% are High Risk (HR) and 1.1% are Moderate Risk (MR). 93% of them did not achieve LDL-C targets. 92.7% patients were on statin (9.3% high intensity, 26.4% moderate intensity, 64.3% low intensity). Among patients on statin, One Way ANOVA revealed a statistically significant difference in the mean of LDL-C level between various intensity of statin, $F(2,1125)=[31.446]$, $p < 0.001$. Tukey post hoc test revealed higher LDL-C value in patients on high intensity statin ($3.1 \pm 1.0\text{ mmol/L}$, $p < 0.001$) when compared to patients on moderate intensity ($2.7 \pm 1.0\text{ mmol/L}$, $p < 0.001$) and low intensity ($2.4 \pm 0.76\text{ mmol/L}$, $p < 0.001$) statin.

Conclusion: Most of the diabetic patients did not achieve lipid target and majority were on low intensity statin. Primary care doctors are recommended to not only intensify lipid lowering therapy but also ensure adherence to treatment in order to achieve treatment objective.

Poster Abstract 7

Acceptance of COVID-19 vaccine booster doses among patients with comorbidities in Malaysia

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Introduction: COVID-19 infection remains an important health issue globally. Vaccine boosters are introduced to ensure continual immunity against COVID-19. This study aimed to determine the acceptance of COVID-19 booster doses, especially the second booster, among patients with comorbidities in a primary care clinic in Malaysia.

Methods: A cross-sectional study was conducted on patients with comorbidities in a primary care clinic in Universiti Malaya Medical Centre from 20/7/2022 to 5/8/2022. A self-reported questionnaire was used to determine the actual uptake, willingness to receive COVID-19 vaccine booster doses, and patients' perception of them.

Results: 391 patients participated. Approximately 70% ($n=272$) of our participants had never been infected with COVID-19. 99.7% ($n=390$) had completed the primary two doses of COVID-19 vaccination. 78.3% ($n=306$) had taken the first booster dose for COVID-19 vaccine but only 11.2% ($n=44$) had taken the second booster dose. Out of the 347 patients who had not received the second booster dose, only 34% ($n=118$) were willing to take the second booster dose while another 35.7% ($n=124$) remained undecided. Positive perceptions on efficacy (adjusted odds ratio, AOR = 9.028, $p = 0.001$) and safety (AOR = 36.910, $p = 0.002$) of second booster dose were associated with willingness to receive the second booster dose.

Conclusion: Actual uptake and willingness to receive the second booster dose were still low. Targeted approach to address efficacy and safety of booster doses are recommended to improve their acceptance.

Poster Abstract 8

Exploring the views of school health teams on health education regarding non-communicable diseases for secondary school students in Klang Valley: A qualitative study

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Introduction: Schools are valuable settings to implement healthy lifestyle interventions to reduce risk factors of non-communicable diseases (NCD) among adolescents. This study aims to explore the views of school health teams on NCD health education for secondary school students in Klang Valley.

Methods: School health teams were purposively selected from the health clinics that visit secondary schools in both urban and rural areas in Klang Valley, Malaysia. Four individual in-depth interviews and four focus group discussions were conducted. Audio-recordings were transcribed verbatim and analysed thematically.

Results: A total of 19 participants with an age range of 26-45 years from diverse ethnicity, educational background and duration of working experience in school health teams were recruited. Four main themes emerged from the findings: (i)

Communication issues that hinder effective implementation (ii) Shortage of educational facilities (iii) Involvement of stakeholders (iv) Factors that facilitate NCD health education in school.

Conclusion: Effective implementation of school based NCD health programmes requires effective communication and participation at multiple levels such as schools' teachers, students, school health teams and parents. Moreover, to ensure the sustainability of the programmes, it must be integrated well into the curriculum and school policies with consistent support from school administrators and policy makers. These findings are relevant to policy makers and other stakeholders involved in delivering NCD school health interventions.

Poster Abstract 9

Uncovering the hidden cancer burden: A verbal autopsy study in Malaysia's Maran district

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Introduction: Estimating the cancer burden in areas where deaths occur outside of healthcare facilities is essential for targeting public health interventions. Based on verbal autopsies of deceased individuals who died outside of health facilities, this study sought to determine the prevalence of cancer and its risk factors in Maran District, Malaysia.

Methods: This cross-sectional study included 126 deceased cancer patients from the Verbal Autopsy List from January 2021 through December 2022. The Ministry of Health Malaysia's questionnaire for the Malaysian VA 01/2017 Version was used to collect the data. Using SPSS Version 27, descriptive and inferential statistics were calculated, and Chi-square tests were performed to determine the associations between cancer and risk factors.

Results: Among the 126 deceased participants in the study, colorectal cancer was the most prevalent (21.4%), followed by lung (14.3%), prostate (10.3%), liver (9.5%), and breast cancer (8.7%). Age and gender were significant risk factors associated with cancer. The majority of cancer types identified in this study were screened in public health facilities.

Conclusion: This study reveals the hidden burden of colorectal, lung, prostate, liver, and breast cancers among people who died outside of health facilities in Malaysia Maran District. Increased access to screening programmes and tailored interventions for identified risk factors could contribute to a reduction in the burden of these cancers. The findings of this study could guide targeted public health interventions to reduce the cancer burden in the Maran District.

Poster Abstract 10

Perception and practices of self-management among adult patients with gout in primary care

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Introduction: Gout is a chronic disease which is commonly associated with other comorbidities. Patients' perceived quality of life gives them empowerment in managing their health. Self-management is imparted as part of management among patients with chronic disease in healthcare. The aim of this study was to explore the perception and practices of self-management among patients with gout in managing their symptoms among the different ethnic groups in Malaysia. It is also aimed at exploring patients' views, experiences, impact and influences in regards to gout.

Methods: A qualitative study was conducted among 20 participants with gout, comprising of Malay, Chinese and Indians, using semi structured in-depth interview at primary care clinic at University Malaya Medical Centre in either English or Malay language. All participants have been diagnosed with gout for more than six months duration and were either consuming urate lowering drugs or not any urate lowering treatment.

Results: There were a total of 20 participants that were successfully recruited for the study. The participants consisted of 18 males and two females, where there were nine Malays, six Chinese and four Indians. The age ranged from 29 to 81 years and has been suffering with gout ranging from one to 30 years. There were three themes that emerged, which are patients' experiences about gout, the types of self-management practices and how cultural belief and practices influenced their self-management.

Conclusion: This study showed that diet control by trial and error and limiting the quantity of food were one of the main and accepted self-management practices of gout. Traditional medicine practices were in the form of natural methods such as different types of vegetable juices, pineapple and papaya. Each ethnicity has their own unique beliefs and food culture.

Poster Abstract 11

Family medicine performance among medical graduates and its correlation with continuous assessment during senior family medicine posting

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Introduction: Family medicine course has been recognized as a part of the medical degree (MD) curriculum. Despite being a minor posting, the importance of primary care management is undeniable. The objectives of this study was to determine the performance of final year UPM students in their Professional 2 examination in family medicine and to determine the correlation between their performance and the continuous assessments they received during their Senior Family Medicine posting.

Methods: Ninety-three medical students who completed the Professional 2 Examination in February 2023 were included in this study. Family medicine performance was evaluated as one of the 20 stations for OSCE, and the results were obtained from the academic office after being approved by the senate. Pearson correlation test was used to assess the correlation between the result and the continuous assessments (student presentation, precepting, audit presentation, practice assessment and end-of-posting examination) during their senior family medicine posting in Year 4.

Results: Of the 93 students, only 50 passed family medicine OSCE station, resulting in a pass rate of 53.8%. The mean score was 4.83 ± 1.16 . Five of whom failed the station also failed the overall professional exam and need to go for remedial examination. However, none of the continuous assessments during year 4 posting showed significant correlation with family medicine OSCE results.

Conclusion: The high failure rate observed in the family medicine OSCE station suggests that the family medicine curriculum may need to be re-evaluated. It is necessary to structure a more holistic module to ensure that students receive adequate training in family medicine.

Poster Abstract 12

Prevalence of burnout and its associated factors among healthcare workers in health clinics in Manjung

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Introduction: Burnout is a syndrome occurring from overwhelming workplace stress. The study was done in a district. The purpose of this study was to identify the prevalence of burnout among primary healthcare workers in this district and to identify the factors associated with burnout.

Methods: A cross-sectional study was conducted among healthcare workers from 22 August 2022 to 30 September 2022 by using self-administered validated Malay version of Copenhagen Burnout Inventory (CBI) questionnaire, Malay version Multidimensional Scale of Perceived Social Support (MSPSS-M). It consisted of 31 questions and was rated based on a five-point Likert-type scale. The questions were then summed up to determine the burnout levels. Data was analysed using SPSS version 20.

Results: There were 224 respondents with 61.6% were nurses, 21.4% were doctors, and 17.0% were assistant medical officers. The prevalence of personal burnout among healthcare workers in health clinics in Manjung district was 31.3%, work burnout was 16.5% while client related burnout was 5.4%.

Conclusion: Healthcare workers at health clinics have a high rate of burnout. The factors leading to burnout were the highest educational level, financial difficulties and low perceived social support from friends and significant others.

Poster Abstract 13

Depression and anxiety among post-COVID adult patients in Klang district and its associated factors

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Introduction: Mental health among post-COVID-19 patients is often disregarded by patients and healthcare providers. This study aimed to determine the prevalence of depression and anxiety and its associated factors among post-COVID-19 adult patients in Klang District.

Methods: A cross sectional study was carried out in 5 health clinics in Klang District, Selangor. Convenient sampling was done among patients attending their clinic appointment. The inclusion criteria were Malaysians, aged 18 and above, and had recovered 6 weeks after COVID-19 infection. Participants completed a set of questionnaires, including a validated Malay version of Patient Health Questionnaire-9 (PHQ-9) and General anxiety Disorder-7 (GAD-7). Participants with depression are defined as having a score of ≥ 10 in PHQ-9 while for anxiety is having a score of ≥ 10 in GAD-7.

Results: 342 participants were enrolled from 1st June until 31st Dec 2022. In our study, the prevalence of depression was 10.5% and anxiety was 5.6%. Based on multiple logistic regression, the associated factors for depression were older age, female gender, and post-COVID symptoms: insomnia. The associated factors for anxiety were older age and post-COVID symptoms of insomnia, muscle weakness and abdominal pain.

Conclusion: This study shows that depression and anxiety is prevalent among post-COVID patients. We suggest that all patients with post-COVID symptoms should be screened for mental health status to allow early detection and intervention.

Poster Abstract 14

Factors associated with self-efficacy towards Hepatitis C screening and treatment among primary care doctors in Selangor

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Introduction: Primary care doctors (PCD) play an increasingly important role in the screening and treatment of hepatitis C. PCD with good self-efficacy in HCV screening and treatment will lead to better care for hepatitis C patients. The study aims to determine the factors associated with self-efficacy towards HCV screening and treatment and its associated factors among PCD in Selangor.

Methods: This was a cross-sectional study using simple random sampling. The study questionnaire was distributed online using a Google form. Sociodemographic, practice characteristics, knowledge, attitude, and self-efficacy of PCD were collected using a validated questionnaire.

Results: A total of 242 PCD participated, with a median age of 35 years (IQR 5). The majority are female (83.9%), Malay (71.9%) with 6 years median duration of working experience (IQR 6). The mean score for self-efficacy was 12.67 (SD±3.38). The factors associated with higher level of self-efficacy for HCV screening and treatment are having prior experience in treating hepatitis C ($\beta = 2.72$, 95% CI 1.69, 3.76), postgraduate qualification ($\beta = 2.25$, 95% CI 0.74, 3.77), prior hepatitis C training ($\beta = 1.56$, 95% CI 0.75, 2.37), hepatitis C knowledge ($\beta = 0.33$, 95% CI 0.08, 0.57) and attitude ($\beta = 0.08$, 95% CI 0.01, 0.14).

Conclusion: Strategies addressing these five factors can improve the self-efficacy of PCD in hepatitis C screening and treatment to provide better outcomes. PCD will benefit from continuous medical education and training on HCV screening and treatment, to pursue postgraduate qualification and to acquire more experience by treating HCV cases.

Poster Abstract 15

Psychological impact and pregnancy outcome of unmarried young women at shelter home

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Introduction: Young women who become pregnant outside of wedlock typically experience a variety of difficulties. Addressing the predictors of psychological impact and pregnancy outcome among the shelter home's registered residents is crucial for the future development and improvement of clinical management in the pregnancy shelter home. This study aims to determine the factor associated with psychological impact and pregnancy outcome of the unmarried young women in the shelter home.

Methods: A cross sectional, retrospective record review has been conducted at the pregnancy shelter home in Kelantan, from June 2016 to March 2023. The sociodemographic characteristics, clinical factors, social factors, and pregnancy outcome among the residents were assessed. Data were analysed descriptively and inferentially to identify the interested factors.

Results: The mean (SD) age was 20.97 (3.66) years with a

range between 16 and 35 years. Using the multiple linear regression, the most important factors toward psychological impact of these young women were year enrolment, $\beta = 2.88$ (95% CI: 1.75, 4.01), $n = 56$, $t = 5.11$, $p < 0.01$, and their state of origin, $\beta = 6.57$ (95% CI: 0.61, 12.54), $t = 2.21$, $n = 56$, $p < 0.05$, whereas the pregnancy outcome were the timing of booking, $\beta = 0.89$ (95% CI: 0.38, 1.35), $t = 3.57$, $n = 59$, $p < 0.01$.

Conclusion: It is anticipated that the shelter will enhance the quality of existing services. The findings of this study can also be used by other shelters to improve the services they provide to their residents in order to help them recuperate from psychological and physical effects of unmarried pregnancy.

Poster Abstract 16

Cultivating resilience in chronic disease among adults Asian population: A scoping review

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Introduction: Most chronic disease deaths were contributed mainly by cardiovascular disease followed by cancers, chronic respiratory diseases, and diabetes. Chronic disease poses a threat to one's well-being, physical health, future aspirations, and financial stability. Resilience mediates patients face adverse events and cope with diseases. Therefore, the aim of this review is to map the factors that contribute to cultivating resilience in chronic disease among the adult Asian population.

Methods: The review was conducted by searching PubMed, Scopus, Science Direct, Web of Science, and Medline for articles featuring the terms "resilience, psychological", and "chronic disease", "diabetes mellitus, type 2", "hypertension", "cardiovascular diseases", "coronary artery disease", "pulmonary disease, chronic obstructive", "asthma", "stroke", "epilepsy", "kidney diseases", "neoplasms", "lupus erythematosus, systemic", "arthritis, rheumatoid", or "inflammatory bowel diseases" published in English from 2002 to 2023 from Asian countries. We included studies on adults aged 18 and above with chronic diseases and utilized the psychological resilience scale. Interventional or review studies on resilience post-major surgery and congenital diseases, injury, disability, or infectious diseases were excluded from the review.

Results: 81 articles were included in this review. Three main factors emerged: psychological, socio-cultural, and environmental. The psychological factors were self-efficacy, optimism, enthusiasm, endurance, adaptability, and gratitude. Traditional culture, spouse relationship, social isolation, food culture, and spirituality were among the socio-cultural factors while social supports, social welfare, and technological advancement were the environmental factors.

Conclusion: Nurturing resilience among patients with chronic diseases is prudent to improve their quality of life.

Poster Abstract 17

Challenges of mothers with infants admitted to Neonatal Intensive Care Unit (NICU) during COVID-19 pandemic in Northeast Malaysia.

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Introduction: The birth of premature infants and NICU hospitalization are overwhelming experiences for parents, especially mothers who describe it as traumatic. Unfamiliar NICU environments and difficult caregiving activities can affect mothers' well-being and for some, these conditions lead to maternal stress and depression. This study aims to explore the lived experience of mothers with infants admitted to NICU during the COVID-19 pandemic.

Methods: This is a qualitative research design using a phenomenological approach. In-depth interviews were conducted with mothers who had infants admitted to NICU. The interviews were recorded, transcribed verbatim and analysed thematically using NVivo 12 software.

Results: Three main themes were obtained including emotional instability, challenges in nurturing infants in NICU, and communication barriers with the healthcare providers. Mothers reported they had so many emotions during the process, difficulty in breastfeeding, movement restriction and lack of communication with the staff nurses.

Conclusion: This study helps to understand the mothers' experience, challenges, and needs in nurturing infants in NICU during the COVID-19 pandemic. There is a need to empower the role of midwives and nurses to support mothers, alleviate mothers' suffering and uphold mothers' well-being during the unprecedented global crisis.

Poster Abstract 18

Association between health literacy and medication adherence among patients with diabetes in a primary care clinic.

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Introduction: Medication adherence (MA) is generally poor among Malaysians with diabetes. International studies discovered an association between health literacy (HL) and MA, and ultimately glycaemic control. This study aimed to determine the association between HL and MA among patients with diabetes in primary care.

Methods: This cross-sectional study was conducted from February to June 2022 among 306 patients with diabetes who attended a university primary care clinic in Selangor, Malaysia.

Medication adherence and health literacy were assessed using the validated 12-item Malaysian Medication Adherence Assessment Tool (MyMAAT) and the Short-Form Health Literacy Instrument (HLS-SF-12). Multiple logistic regression was used to determine the association between HL and MA, adjusting for sociodemographic and clinical confounders [age, gender, marital status, education level, occupation, smoking status and body mass index (BMI)].

Results: The mean (SD) age was 62.1 (8.1) years old. 203 participants (66.3%) had adequate HL, and 194 (63.4%) adhered to their medications. Participants with adequate HL (AOR = 2.71, 95% CI: 1.56 – 4.69), worked in managerial and professional roles (AOR = 3.14, 95% CI: 1.11 – 8.89), and were married (AOR = 2.78, 95% CI: 1.16 – 6.65) were more likely to adhere to medications. Participants who were overweight (BMI 23 – 27.4 kg/m²) had less odds of adhering to medications (AOR = 0.29, 95% CI: 0.10 – 0.86).

Conclusion: Diabetes patients with adequate HL were more likely to adhere to medications. Health education to improve HL, and ultimately their adherence to medications, should be prioritized to improve health outcomes among patients with diabetes in primary care.

Poster Abstract 19

Factors associated with perinatal outcome among mothers with gestational diabetes mellitus attending public health clinics in Kuala Selangor

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Introduction: There is an increasing prevalence of pregnant mothers with gestational diabetes mellitus (GDM) in Malaysia. Comparatively, local data in Kuala Selangor has shown a higher trend for the past 5 years. Studies have shown that GDM is associated with adverse perinatal outcomes. However, to date, local evidence is scarce. This study aimed to determine the prevalence of adverse perinatal outcomes and its associated factors.

Methods: This is a retrospective cross-sectional study using computer generated sampling method among antenatal patients diagnosed with gestational diabetes mellitus who attended public health clinics in Kuala Selangor from January 2022 to December 2022. Inclusion criteria was patient diagnosed with GDM, 18 years old and above. Patients with pre-existing DM in pregnancy and miscarriage were excluded.

Results: In total, 334 samples were analysed. The overall prevalence of adverse perinatal outcome is 36.8% (95% CI: 0.31, 0.43); 2.4% had fetal malformations, 15.4% had

large gestational age, 13% had IUGR/SGA and 78% had caesarean section. Among postpartum mothers with GDM, the prevalence of prediabetes and type 2 diabetes mellitus are 14.4% (95% CI: 0.11, 0.18) and 3.6% (95% CI: 0.02, 0.06), respectively. There were two factors found to be associated with adverse perinatal outcomes among pregnant mothers with GDM. The factors were advancing maternal age (OR = 1.11, 95% CI: 1.03, 1.20) and term delivery (OR: 0.09, 95% CI: 0.21, 0.37).

Conclusion: Advancing maternal age has increased risk of having adverse perinatal outcomes among pregnant mothers with GDM and should be managed more vigilantly.

Poster Abstract 20

Breast milk expression initiation and exclusive use of mother's breast milk after delivery of premature infants in Kelantan

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Introduction: Lactation initiation and maintenance need to be initiated by expression among preterm infants due to their immaturity and medical condition. This study aims to determine the proportion of mothers practicing breast milk expression initiation within six hours of premature delivery and mothers practicing exclusive use of mother's breast milk after delivery of premature infants in Kelantan.

Methods: A total of 234 women who delivered premature infants at two tertiary hospitals in Kelantan participated in this cross-sectional study. The mothers' breastfeeding experience within day two to day seven of infants' admission to Neonatal Intensive Care Unit (NICU) were obtained via a self-administered questionnaire.

Results: Most (87.6%) of the mothers-initiated breast milk expression after six hours following birth. Common reasons given for not initiating breast milk expression within six hours of birth include caesarean delivery (36.6%), maternal health problem after birth (24.9%), feeling inadequate breast milk supply (22%) and not ready for premature birth (18.5%). Almost half (44.8%) of 29 respondents who initiated breast milk expression within six hours after birth used an electrical breast pump to express their breast milk with the frequency ≤ four times per day (72.4%). Nearly half (42.3%) of mothers fed their children in the NICU exclusively with breast milk after delivery.

Conclusion: The number of mothers who initiated breast milk expression within 6 hours and exclusively fed their child with breast milk after premature delivery is still low. Strategies and interventions to increase breast milk expression for preterm infants in NICU are needed, including mothers' support and education.

Poster Abstract 21

The utilization of web-based Home Assessment Tool (HAT) among COVID-19 patients in Selangor, Malaysia

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Introduction: based application solutions. The Home Assessment Tool (HAT) is a web-based system using MySejahtera application that has been developed by the government. It serves as a communication platform for COVID-19 patients to self-monitor their clinical symptoms and enables authorized healthcare personnel to access and manage the collected data for clinical monitoring purposes. Our research aims to examine the usage of this internet-based HAT within the Selangor COVID-19 community.

Methods: This is observational design, utilizing secondary data obtained from the patients' self-reported HAT within the MySejahtera application. The study included all individuals diagnosed with COVID-19 through molecular assays such as RT-PCR or RTK-Ag, 18 years of age and above, residing in the state of Selangor, and diagnosed with COVID-19 patients within the period spanning from February 1st to February 21st, 2021. Individuals who have documented their symptoms at least once in the HAT during the prescribed 10-day isolation period are classified HAT users.

Results: A sample size of 4438 respondents was obtained; with 1749 (39.4%) were HAT users. The logistic regression analysis revealed three statistically significant predictors associated with the utilization of HAT: medical background (odds ratio [OR]: 9.4; 95% confidence interval [CI]: 7.49-12.01), advancing age (OR: 1.35; 95% CI: 1.20-1.52), and nationality (OR: 3.4; 95% CI: 2.50-4.72).

Conclusions: The utilization of HAT is observed to be low, with three factors being identified: advanced age (over 65 years), absence of medical conditions, and foreign nationality. It is imperative to develop inventive strategies tailored to address the unique needs of this particular demographic.

Poster Abstract 22

The impact of COVID-19 pandemic on the perinatal mental health and its associated factors: A cross sectional study in Kota Setar

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Introduction: COVID-19 pandemic has increased the prevalence of mental health among the general population. To determine prevalence of depression, anxiety and its associations among perinatal women during pandemic COVID-19.

Methods: A cross sectional study of 329 perinatal women attending selected Maternal Child Health Clinics in Kota Setar District. Respondents are selected via simple randomised sampling and were given self-administered questionnaires consisting of sociodemographic, PHQ-9, GAD-7 and COVID-19 Health Seeking Behaviors Questionnaires.

Results: The prevalence of depression was 18.2% and anxiety was 8.5%. There was no significant association between depression and anxiety with sociodemographic characteristics. Majority of respondents obtained health information through online sources (90.9%) followed by printed and media sources (81.5%). The most preferred print and media resources is television for obtaining COVID-19 related information (83.6%) followed by YouTube Broadcasts (54.7%), healthcare posters (48.3%) and radio (44.7%). The most popular online source for obtaining information were social media (86%), health websites (72.6%) and news websites (49.8%). The respondents who are not forward health information received to friends/close ones without checking the information 72.3%. Meanwhile 77.8% wanted the daily updated COVID-19 status and its hotspots were the most information on a regular basis. Half of respondents (45.3%) had difficulty to determine valid information in seeking health information.

Conclusion: Perinatal women are more vulnerable during pandemic. This warrants mental health screening tools to be strengthened in primary care. Elements of technology and media to be included for more knowledge exposure and increasing pick up rate among perinatal women.

Poster Abstract 23

The proportion of pulmonary tuberculosis smear positive with normal chest X-ray and its associated factors in tuberculosis outbreak in Northeast Malaysia

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Introduction: Chest X-Ray (CXR) has been used widely to screen and diagnose Pulmonary Tuberculosis (PTB). However, a normal CXR in PTB smear positive is not uncommon. This study aims to determine the proportion of PTB smear positive with normal CXR and its associated factors in the Kodiang locality PTB outbreak.

Methods: A cross-sectional study of medical record reviews of 56 newly diagnosed PTB smear positive cases registered in Kodiang Health Clinic from the 1st of April 2022 till the 31st of October 2022. Cases of PTB smear-negative, extrapulmonary TB, and TB cases registered before the 1st of April 2022 but still under treatment and follow-up were excluded from the study. Data were analyzed using IBM SPSS ver. 27.0. Descriptive analysis and simple logistic regression analysis were performed.

Results: The proportion of PTB smear positive cases with normal CXR is 42.9%. Factors associated with PTB smear positive with normal CXR are age < 18 years old (crude OR of 5.34 (95% CI: 1.26-16.92, p=0.02)), student (crude OR of 5.94 (95% CI: 1.52-23.18, p=0.01)), single (crude OR of 4.26 (95% CI: 1.38-13.18, p=0.01)), asymptomatic (crude OR of 12.00 (95% CI: 1.12-128.84, p=0.04)), and incomplete SARS-CoV-2 vaccination (crude OR of 20.29 (95% CI: 2.44-168.92, p=0.01)).

Conclusion: The proportion of PTB smear positive with normal CXR is high in an outbreak. Therefore, active case detection and screening, especially among close contact with risk factors of having normal CXR, need to consider another supportive test to rule out active PTB.

Poster Abstract 24

Characteristics of COVID-19 patients among healthcare workers at Klinik Kesihatan Nilai

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Introduction: COVID-19 has emerged as a major global health problem in late 2019. At present, Malaysia has recorded around 5 million cases since January 2020. The spread of the COVID-19 infection in our country has never reserved our healthcare workers. This study describes the characteristics, comorbidities, treatment received as well as source of infection among our healthcare workers with COVID-19 at Klinik Kesihatan (KK) Nilai.

Methods: Clinical data of all confirmed COVID-19 cases among healthcare workers at KK Nilai were retrieved from the clinic's Occupational Safety and Health Committee records. The data on demography, clinical characteristics, comorbidities and treatment received were captured, and the sources of infection were identified. Data were descriptively analyzed using SPSS version 22.0.

Results: A total of 98 samples were analyzed. About 19.4% were males and 80.6% were females. Majority (78.6%) aged between 20 and 39, and 94.9% were of mild infection from category 2A. Vast majority (99%) of them had already been vaccinated during the infection. A third (31.6%) of them were

obese, and 12.2% had hypertension. Majority (96.9%) of the subjects required treatment at home rather than hospital treatment. The findings showed that most (84.7%) infections occurred not from the workplace but from other sources.

Conclusion: This is the first study that has demonstrated the characteristics, clinical features, comorbidities as well as treatment needed among healthcare workers in Malaysia. The findings of this study will help in future improvement and delivery of health services in our country.

Poster Abstract 25

Clinical characteristics of patients attending outpatient department at Malaysia field hospital during deployment for earthquake disaster in Turkiye

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Introduction: A 7.8-magnitude earthquake struck Gaziantep province of Turkiye in February 2023 affected 10 provinces, counting a death toll of more than 50,000 lives. Within 3 days, the Malaysian government deployed a medical team consisting of medical, logistic, and administrative staff to set up and operate a field hospital located at Celikhan, Adiyaman; providing services in 7 specialties including Primary Care. The objective of this study is to describe the clinical characteristics of patients attending outpatient department (OPD) operated by primary care team.

Methods: This is a descriptive study using universal sampling of all patients attending OPD of Malaysia Field Hospital during 6 weeks duration of operation.

Results: A total of 2,280 patients attended the hospital and 76% were treated at OPD. Majority were adult and male. According to the services, 36% were medical cases, followed by orthopaedics (25%), dental (13%), surgery (7%), dermatology (5%), otorhinolaryngology (4%), ophthalmology (4%), obstetrics and gynaecology (4%) and psychiatry (<0.7%). The commonest diseases encountered were upper respiratory infection (20%), soft tissue injury (6.5%) and osteoarthritis (5.6%). Among the adults attending the OPD, 18% documented an elevated blood pressure.

Conclusion: Outpatient department and primary care is crucial in field hospital and plays an important role in treatment as well as deciding disposal of patients. In order to provide a better outpatient service, it is important for the staff to be knowledgeable, able to adapt to changes and overcoming challenges in a disaster area.

Poster Abstract 26

Virtual clinic in primary care: Patient recommendation and its associated factors

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Introduction: Virtual clinic (VC) is a component of telehealth that utilizes technology and multimedia to improve healthcare delivery. Klinik Kesihatan Putrajaya Presint 18 (KKPjP18) was the first health clinic in Malaysia to implement VC. The COVID-19 pandemic has boosted the use of VC as it provides a safer platform for continuation of care. Following its success, further plans to integrate and expand VC into other areas of healthcare are in motion. Therefore, this study aims to assess patient recommendation of VC and its associated factors in KKPjP18.

Methods: A cross-sectional study involving 461 VC patients in KKPjP18 was done. Online questionnaires were collected and data analysis was done using SPSS version 28. Descriptive analysis was used to describe characteristics of respondents while Chi square was used to explore the association between patient recommendation trend of VC and its associated factors.

Results: From this survey, 98.7% of the respondents would suggest VC to friends and family. The contributing factor with statistically significant association was the respondents felt that VC consultation was adequate as compared to clinic consultation ($p < 0.001$) and VC would not disturb working hours ($p = 0.025$).

Conclusion: Overall, this study showed a positive patient recommendation trend of VC. Most agreed that the quality of VC consultation is comparable to clinic consultation and would not disturb working hours. This finding provides a peek on the future direction of patients' acceptance of VC in primary care. Further studies in other settings need to be explored.

Poster Abstract 27

Work-related quality of life and its associated factors among house officers in two hospitals in Selangor

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Introduction: Mental health-related problems are on the rise among medical doctors, with many house officers (HOs) have quitted training prematurely owing to work and life-related factors. However, the quality of work-life (QOWL) among Malaysian HOs remains unknown. Hence, we aimed to

determine the mean score of QOWL and its predictors among HOs working at two tertiary hospitals.

Methods: This is a cross-sectional study conducted at two tertiary hospitals in Selangor, between May and August 2019. A stratified random sampling was employed. The Malay version of the work-related quality of life scale (M-WRQLS-2) and the patient health questionnaire (M-PHQ-9) were used for data collection. Statistical analysis was performed using the SPSS version 23.0

Results: A total of 260 (72.9%) respondents completed the questionnaires. The overall score of QOWL was 3.05 ± 0.48 (95% CI: 2.99, 3.11). Depressed HOs had a significantly lower mean score across all subscales ($p < 0.005$) except for the stress at work (SAW) subscale. Two predictors were inversely associated with QOWL. These were the M-PHQ-9 score [$\beta = -0.049$, 95% CI: -0.06, -0.04] and being female [$\beta = -0.129$, 95% CI: -0.24, -0.02].

Conclusion: HOs who worked at the two hospitals in Selangor perceived their overall QOWL as average. However, being female and having depression were found to be associated with lower QOWL. Therefore, early interventions targeting female HOs and those with depressive symptoms are warranted. Further research and strategies aiming to improve the overall quality of work-life and its dimensions for HOs during housemanship training are vital.

Poster Abstract 28

Site evaluation of knowledge and practice of management of bronchial asthma (new norm post COVID-19 era) among medical officers and assistant medical officers in government health clinics in Melaka

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Introduction: The COVID-19 pandemic has led to recommendations on infection control measures. Hence, following the new norm post COVID-19 era, we aimed to educate medical officers (MO) and assistant medical officers (AMO) in all government health clinics in Melaka on latest update in management of bronchial asthma based on GINA 2022.

Methods: Discussion among family medicine specialists and various specialists in Melaka regarding locally appropriate flow charts on acute asthma management were done, followed by implementation of 7-day virtual CME on latest update in management of bronchial asthma. Implementation of on-site visit and audit to assess knowledge and practice among MOs and AMOs were carried out in March 2023 in 17 selected clinics.

Results: More than 80% of MOs were able to answer on

how to diagnose bronchial asthma with 94% of them were confident to manage chronic bronchial asthma. More than 90% of MOs were able to decide on usage of MDI with spacer and oxygen-driven nebuliser. More than 80% of AMOs could classify severity of asthma into mild, moderate, severe and life-threatening. All AMOs were able to demonstrate proper steps in using oxygen-driven nebuliser. More than 82% of AMOs were confident in managing acute asthma in primary care. The list of medications and equipment at emergency room in acute asthma management in these 17 clinics were generally adequate.

Conclusion: The knowledge and practice among MOs and AMOs in government health clinics in Melaka regarding management of chronic and acute asthma at two months post intervention were satisfactory.

Poster Abstract 29

Cross-sectional review of the characteristics of anaemic pregnant women at 35 to 37 weeks of pregnancy and its associated factors in Kerian, Perak

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Introduction: Anaemia in pregnancy is a common problem globally as well as in Malaysia. It can lead to poor fetomaternal outcomes and its sequelae can extend into postpartum and postnatal period. The aim of this study was to determine the prevalence and the associated factors of anaemia at third trimester among the pregnant mothers visiting primary health clinics in the district of Kerian.

Methods: A retrospective cross sectional study was conducted in all Health Clinics in Kerian between 1st January to 31st December 2022. Data was collected using a Performa from the antenatal cards and was analyzed using SPSS version 23. Chi square test and logistic regression were used to determine the predictors.

Results: The prevalence of anaemia in pregnancy in the third trimester was 6.3%. About one third (37.6%) of the anemic patients have underlying thalassemia or hemoglobinopathy, one third have dilutional anemia (31.2%) and one third have iron deficiency anaemia (31.2%). Multiple logistic regression showed being primigravida (AOR = 9.64, 95% CI: 1.78, 52.06), moderate anaemic at booking (AOR = 14.28, 95% CI: 2.97, 68.79) and having iron deficiency anaemia (AOR = 2.29, 95% CI: 0.49, 10.63) were predictors of developing moderate anaemia at term.

Conclusion: Prevalence of anaemia at term was low. Primigravida, moderate anaemia at booking and IDA are associated with moderate anaemia at term. Hence these factors need to be addressed to prevent moderate anaemia near term and its complications.

Poster Abstract 30**Health seeking behaviour for menopausal symptoms: A qualitative study in primary care centre in Klang Valley, Malaysia**Ooi NZM¹, Hussein N², Malik TFA²¹Klinik Kesihatan Sandakan, Sabah, Malaysia; ²Department of Primary Care Medicine, Faculty of Medicine, University Malaya, Malaysia

Introduction: More than half of Malaysian women facing menopause felt that menopausal symptoms affected their quality of life but only less than a third sought treatment. The aim of this study was to explore the views and experiences of menopause, and the factors that influenced health seeking behaviour for menopausal symptoms in Malaysian women.

Methods: This was a qualitative study carried out in a primary health clinic located in Klang Valley, Malaysia, with a total of 22 participants. Semi-structured interviews were carried out on women who are experiencing or who had experienced menopausal symptoms based on the topic guide developed from the Health Belief Model. Audio recordings were transcribed verbatim and analysed thematically.

Results: Themes emerged from this study were; views of menopause, health literacy, severity of menopausal symptoms, menopausal symptom is not seen as a priority, personal belief and experience, and the important role of healthcare providers. Women with better health literacy were more involved in decision making for menopausal symptoms. Conservative views and practices were still upheld when coping with menopausal symptoms. Complementary and Alternative Medicine was popular due its familiarity and reservation towards modern medicine. The Internet can be utilised for distribution of information on menopause. Severity of menopausal symptoms were subjective and the inability to cope prompted treatment seeking.

Conclusion: There is still a need to improve health literacy of menopause through delivery of information using education programmes in healthcare centres and knowledge of treatment options for menopausal symptoms for women in Malaysia.

Poster Abstract 31**Study on teenage pregnancy and its associated risk factors and the outcomes in Kota Bharu, Kelantan: A case control study in 2022**M Faiz CY¹, Zalani Z¹, Zailina S¹, W Noraini WM¹, Marzilah M¹, S Sarah M¹, Narulkhana A¹, Zurina H¹, Pahimah Y¹¹Kota Bharu District Health Office, Kelantan, Malaysia

Introduction: Teenage pregnancy is a major public health concern worldwide. This study was done to describe the sociodemographic characteristics of teenage pregnancy and to identify its associated risk factor and the outcomes in Kota Bharu, Kelantan.

Methods: This is a retrospective matched case-control study done in all government's health clinic in Kota Bharu involving

202 samples. This study makes use of the maternal child health registry and patient's antenatal card records of teenage pregnancy (n=101) and non-teenage pregnancy (n=101). Systematic random sampling was used to obtain the samples. The records were examined and the sample who fulfilled the inclusion and exclusion criteria were selected and recorded.

Results: Majority of the samples were Malay (97%). The mean age of teenage pregnancy group was 17.7 years old, while the non-teenage group was 29.1. The associated risk factor for teenage pregnancy were low level of education (p=0.002). While the outcomes of teenage pregnancy were being late booker (p<0.001), unsure of last menstrual period's date (p=0.015), poor compliance to medication (p=0.026), higher risk for newborn's low birth weight (p=0.005) and poor contraceptive usage (p=0.022).

Conclusion: Measures to improve knowledge and building up policies pertaining to teenage pregnancy is necessary. Early booking, adequate antenatal care and delivery by trained personnel should improve the obstetric and perinatal outcomes in this age group.

Poster Abstract 32**Influenza vaccine uptake and its associated factors among healthcare workers in Seberang Perai Utara, Penang**Poh Siang O¹, Azianey Y¹, Azlina S², Ying Woei C³, Fatimah AB⁴, Izani Uzair Z⁵, Chia Yee K⁶, Nur Sharharni MT⁷, Rohaizan R⁷, Tze Ling W², Yusnita Y⁸¹Klinik Kesihatan Kepala Batas, Penang; ²Klinik Kesihatan Butterworth, Penang; ³Klinik Kesihatan Mak Mandin, Penang; ⁴Klinik Kesihatan Sungai Dua (SPU), Penang; ⁵Pejabat Kesihatan Daerah Seberang Perai Utara, Penang; ⁶Inspectorate Unit Seberang Perai Utara, Penang; ⁷Klinik Kesihatan Tasek Gelugor, Penang; ⁸Klinik Kesihatan Penaga, Penang

Introduction: Public health measures were lifted as we moved into the endemic phase of Covid-19 infection. Influenza cases were noted to be increased. This study aims to determine the influenza vaccine uptake and its associated factors among the healthcare workers (HCW) in the district of Seberang Perai Utara, Penang.

Methods: This is a cross-sectional study recruiting all the HCW from the government primary healthcare clinics, inspectorate unit and dental clinics in the district. They were randomly selected to fill in the questionnaire containing demographic data, influenza vaccination status in 2022, followed by knowledge and behavioural determinants about influenza infection and influenza vaccination. The data was analysed using descriptive statistics and multiple logistic regression.

Results: Two hundred ninety-five HCW were recruited into the study. The prevalence of influenza vaccination uptake among the HCW was 62.7%. Working in dental clinic (aOR: 0.19, CI: 0.08-0.48, p<0.001) or inspectorate unit (aOR: 7.93, CI: 2.14-29.42, p=0.002) comparing to outpatient department, working as paramedics (aOR: 0.35, CI: 0.13-0.93, p=0.035) or other job categories (aOR: 0.09, CI: 0.03-

0.31, $p < 0.001$) comparing to doctors, perceived severity (aOR: 1.52, CI: 1.1-2.11, $p = 0.01$), perceived barriers (aOR: 1.2, CI: 1.04-1.37, $p = 0.009$) and self-efficacy (aOR: 1.24, CI: 1.04-1.5, $p = 0.02$) were significant associated factors with the vaccine uptake.

Conclusion: About two third of the HCW took the influenza vaccine in 2022. Intervention should be done accordingly to increase the uptake so that the risk of influenza infection to themselves and patients can be reduced.

Poster Abstract 33

Assessing the adherence of longer-term stroke management offered as specific service in primary care clinic in comparison to clinical guideline and stroke specific parameters using retrospective clinical audit.

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Introduction: Primary-care long-term stroke care service offers comprehensive management at community level. A clinical audit was carried out to assess the services of this clinic as compared to the established standardised criteria for longer-term stroke care.

Methods: A retrospective audit was performed to evaluate the adherence to services parameters based on the eleven criteria outlined in the Canadian Post-Stroke Checklist. Following clinical parameters were audited using the Malaysian CPG on Cardiovascular Disease 2017 and Malaysian CPG on Ischemic Stroke 2020: systolic blood pressure (SBP), diastolic blood pressure (DBP), low-density lipoprotein cholesterol (LDL-C), HbA1c, weight, smoking status, exercise, and prescription of medications. A total of 113 registered patients from the 2022 census were audited using paired Student's t-test and McNemar's test.

Results: Our audit shows that the management of 79.6% ($n = 90$) of patients adhered to at least 7/11 criteria. The two most adhered services are physical symptom assessment and secondary prevention measures. Two most non-adherence services are inquiring about patient fatigue and access to community resources. Patients experienced a reduction in SBP, DBP, LDL-C, and HbA1c levels. A statistically significant reduction was observed in DBP (4.15 mmHg, $p < 0.05$) and LDL-C (0.30 mmol/L, $p < 0.05$). A notable reduction in the percentage of smokers ($p < 0.05$) was also observed.

Conclusion: Post-stroke patients at a specific-service clinic within the primary care setting benefited from clinicians' high adherence to clinical guidelines, observed from improved clinical parameters. These may serve as an impetus for clinicians to include long-term stroke service as a specialized service within primary care specialities.

Poster Abstract 34

Investigating unintended consequences of COVID-19 pandemic to primary care patients in a teaching hospital

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Introduction: Postponement of healthcare services during the COVID-19 pandemic, was implemented to minimize cross infection. Little is known of the impact of such a measure. We aimed to investigate a cohort of patients with chronic diseases affected by a six-month appointment deferment practice in a primary care clinic in Universiti Malaya Medical Centre, by comparing their disease control pre- and post-deferment and reporting their outcome. These patients were vetted by doctors before being considered safe for deferment.

Methods: This was a retrospective cohort study. Clinical data of the cohort were extracted from the electronic medical record and analysed using SPSS software.

Results: 577 patients were included with mean age of 67 years old (standard deviation, SD 11.8). The cohort was mostly female ($n = 340$, 58.8%), Chinese ($n = 250$, 43.3%) and had concurrent three comorbidities: diabetes mellitus, hypertension and dyslipidemia ($n = 154$, 26.7%). There were no significant changes in patients' HbA1c, renal function, systolic blood pressure, diastolic blood pressure, total cholesterol, LDL and triglycerides pre- and post- deferment. 85.4% of the patients ($n = 493$) came for their rescheduled follow up. 14% ($n = 81$) had unscheduled earlier visits to primary care clinic or emergency department, out of which 3.1% ($n = 18$) required hospitalization. Three patients (0.5%) passed away before they could come for follow up.

Conclusion: The appointment deferment practice did not worsen the chronic disease control of the patients. Implementation of such measure can be considered for future pandemics with careful selection of patients for deferment and safety netting.

Poster Abstract 35

Hemodynamic alterations among adults in Kuala Terengganu following COVID-19 immunization

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Introduction: As both blood pressure (BP) and mean arterial pressure (MAP) are crucial for the perfusion of vital organs, vaccination recipients may suffer serious injury from significant hemodynamic alterations. We therefore conducted a study to evaluate hemodynamic changes before and post-COVID-19 vaccination.

Methods: This observational study evaluated 379 adult vaccine recipients in September 2021 at a public vaccination center in Kuala Terengganu. The BP was measured before and 15 minutes after vaccination using an automated device. A structured proforma was used to record the participants' demographic data, medical background, and the measured BP, MAP and pulse pressure (PP). A descriptive analysis was performed for categorical variables. Paired t-test was performed to determine the difference of mean among the hemodynamic parameters. The data were analyzed using SPSS version 25.0.

Results: Majority were between 18 to 39 years old (n=307; 81%), and male (n=224; 59.1%). 43 of participants had at least 1 comorbidity and 7.4% (n=28) of them had history of COVID-19 infection. There was a reduction trend of systolic BP, diastolic BP and MAP between pre- and post-vaccination, with mean changes of -1.85 mmHg (95% CI -3.18(-0.51), -1.49mmHg (95% CI: -2.43(-0.56), and -1.61 mmHg (95% CI: -2.45(-0.77) respectively. All hemodynamic parameters showed a significant reduction at a cut-off point of 0.05, apart from PP.

Conclusion: Despite the statistical significance of the reduction trend in hemodynamic changes between the pre- and post-vaccination period, the mean changes were too small and insignificant to be used in a clinical context, confirming the short-term safety of the COVID-19 vaccination hemodynamically.

Poster Abstract 36

Asthma action plan: An overview of asthma self-management among primary care patients in Port Dickson District

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Introduction: Asthma Action Plan (AAP) used varies according to practices which affecting patients' decision for self-management during Acute Exacerbation of Bronchial Asthma (AEBA). This study aimed to determine the percentage of patients receiving AAP, their ability to identify the severity of symptoms and the action taken following categories in AAP.

Methods: This study was conducted in six primary care clinics in Port Dickson from January to March 2023. Patients on asthma follow-up with previous history of AEBA for the last 6 months were included. The classification in AAP divided into 3 categories: green (doing well), yellow (getting worse) and red (alert). Data on social demographic, details on AEBA and the use of AAP were collected.

Results: Fifty respondents participated and 30 (60%) of them received AAP. Forty-eight (96%) patients were on preventer but 15 (30%) were not adherent. Thirty-five (75%) had more than 1 episode of AEBA for the past 6 months. Fourteen (28%) patients had history of short acting β agonist overuse. Thirty (60%) patients self-managed asthma exacerbation at home not requiring medical assistance. Majority who received AAP were able to recognize the severity of symptoms in green (97%) and red (89%) categories. However, 13 (43%) of them were unable to recognize symptoms in the yellow category. Most of them were able to take action following categories in AAP.

Conclusion: About two-third of patients were self-managed at home and receiving AAP. The use of AAP should be emphasized focusing on recognizing symptoms during AEBA.

Poster Abstract 37

Evaluation of predelivery haemoglobin following the administration of parenteral iron at different period of gestation for the treatment of iron deficiency anaemia in pregnancy

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Introduction: Parenteral iron (TDI) administration is the recommended treatment for iron deficiency anaemia (IDA) in pregnancy. Studies demonstrated haemoglobin (Hb) increments vary (from 1.42 to 2.15g/dL) following TDI administration between 2 to 12 weeks pre delivery and varies according to POA, from 20 weeks and beyond 32 weeks. Therefore the aim of this study is to determine the predelivery Hb following the administration of TDI at different period of gestation (POA).

Methods: Data were extracted retrospectively from health clinics antenatal records, who received TDI from January to December 2022 in Port Dickson and Seremban, Negeri Sembilan. Data on sociodemographic, severity of anaemia, pre-infusion and pre-delivery Hb taken between 36- 37 weeks POA were analysed.

Results: Out of 144 pregnant women, 88 (61.1%) were Malays, 52(36.1%) Indian and 4 (2.8%) Chinese. The mean age of patients was 30.9(\pm 5.549), which 96 (94.1%) were multipara and 6 (5.9%) were grandmultipara. 123 (89.1%) patients had mild anaemia, 15 (10.9%) with moderate anaemia and no severe anaemia. The mean for pre-infusion Hb was 9.79 gm% (\pm 0.771), while post-TDI was 11.15 gm%

(±0.874). 89 (61.8%) patients received TDI before 32 weeks, while 55 (38.2%) patients received after 32 weeks. 63 (70.8%) patients who received TDI before 32 weeks achieved Hb 11gm% compared to 29 (52.7%) who received after 32 weeks (P value is 0.033).

Conclusion: About three quarter of patients receives TDI before 32 weeks achieved targeted pre delivery Hb. Hence, it is recommended that timing of TDI administration be considered to be given earlier than 32 weeks.

Poster Abstract 38

Prevalence of diabetic peripheral neuropathy among type 2 diabetes and its associated factors in a primary care clinic: A cross-sectional study.

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Introduction: Diabetes peripheral neuropathy (DPN) is the commonest diabetic complication. This study aimed to determine the prevalence of diabetic peripheral neuropathy among type 2 diabetes mellitus patients and its associated factors in a primary care clinic.

Methods: A cross sectional study was done in a government funded primary care clinic in Melaka involving type 2 diabetes mellitus patients aged 18 years and above using a systematic random sampling. Multiple logistic regression analysis was performed to identify its associated factors.

Results: 493 respondents were involved in the study with a median age of 62 (IQR 14) and 43.4% (n=214) male. The prevalence of DPN in this study was 58.4% (n=288). Age (OR:1.05; 95% CI: 1.04 – 1.07), insulin treatment (OR: 3.28; 95% CI: 1.99 – 5.40), and presence of albuminuria (OR:1.74; 95% CI: 1.17 – 2.60) were found to be significantly associated with DPN.

Conclusion: The prevalence of DPN is high in primary care settings in Malaysia. To enhance detection of DPN, multimodal foot examination should be performed especially among patients aged >60 years old, those on insulin treatment and those with presence of albuminuria.

Poster Abstract 39

Health belief, acceptance and its associated factors toward breast cancer screening among female staff in a teaching tertiary hospital, Malaysia

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Introduction: Breast cancer is the most common cancer and the leading cause of cancer mortality among women. As such, screening, early detection and early diagnosis of breast cancer are important for survival rate. Participation in breast

cancer screening depends on the health beliefs and acceptance of screening activities. This study aimed to determine the proportion of good health beliefs and acceptance toward breast cancer screening and its associated factors among the female staff in Universiti Sains Malaysia (USM).

Methods: A total of 406 USM female staff participated in this cross-sectional study. Systematic random sampling was applied. Data were collected using a self-administered Malay version of the Health Belief Model Questionnaire and acceptance questionnaire. Data was entered and analyzed using SPSS version 26. Descriptive statistics and logistic regression analysis were used for data analysis.

Results: The proportion of good health beliefs and acceptance was 93.3% and 75.6% respectively. Medical-related occupation [OR (95% CI): 2.2 (0.99, 5.02)], received motivational support from spouse and friends [OR (95% CI): 7.3 (1.69-31.69)], and good knowledge [OR (95% CI): 2.6 (1.13,6.04)] were significantly associated with good health beliefs. The association between good health beliefs toward breast cancer screening and their acceptance to take mammography in the future was found to be statistically significant [OR (95% CI): 4.2 (1.44,12.52)].

Conclusion: Good health beliefs and acceptance of breast cancer screening among female staff were high. Good health belief, which was determined by the knowledge of breast cancer and breast cancer screening modalities, type of occupation, and motivational support would lead to good acceptance of breast cancer screening.

Poster Abstract 40

The effectiveness of chronic kidney disease education towards knowledge, attitude and practice amongst uncontrolled type 2 diabetic patients in Hospital Universiti Sains Malaysia

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Introduction: The prevalence of chronic kidney disease (CKD) is increasing among diabetes patients in Malaysia. Thus, CKD education is important in order to prevent or slow the progression of CKD. This study was done to assess the level of knowledge, attitude, reported practice (KAP) among uncontrolled diabetics before and after the CKD educational class.

Methods: This was a randomized controlled trial in an outpatient clinic. 68 participants were in the intervention and control group respectively. KAP on CKD was assessed using self-administered validated questionnaires at first visit and again at two-, and twelve-weeks post intervention. The difference in mean score at 2 weeks and 12 weeks post intervention was calculated to determine the effectiveness of CKD education.

Results: Mean and standard deviation of KAP for intervention group before the CKD educational were 27.3(±4.63), 23.89

(± 3.52), and 9.73 (± 2.18) at baseline and had increased to 28.04 (± 2.75), 24.14 (± 3.10) and 10.34 (± 1.70) after 2 weeks and 28.54 (± 3.67), 25.07 (± 3.24) and 10.30 (± 1.89) after 12 weeks of the intervention. The mean difference of each KAP score was 1.18 (95% CI 0.07, 2.28, $p < 0.05$), 0.10 (95% CI: -0.817, 1.025, $p = 0.82$) and 0.76 (95% CI: 0.227, 1.289, $p < 0.001$) respectively. The group time interaction of repeated measures analysis of variance with Bonferroni correction showed the increased mean difference in knowledge and practice score showed significant changes.

Conclusion: Chronic kidney disease education is effective in improving the knowledge and practice of CKD prevention among patients with uncontrolled diabetes.

Poster Abstract 41

A survey of hypnotics prescribing practices among primary care doctors: A cross sectional study

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Introduction: Insomnia has become an increasingly common problem in primary care settings. A study done 1988 noted that hypnotics were the commonest used, and benzodiazepines were the most common choice. Antidepressants were rarely used, despite having the added benefit of co-treating depression and anxiety. The aim of this study- to determine the current primary care doctor's choice of hypnotics in treating acute and chronic insomnia, to determine associated sociodemographic factors influencing their choices and to look at the difference in the hypnotic prescribing practices among government and private primary care doctors.

Methods: A cross sectional study was done using a self-administered questionnaire amongst primary care doctors registered with MMC who were attending GCFM/ATFM workshop. Convenient sampling method was used and study was conducted between January to April 2019. Data collected was analysed using SPSS software version 24.

Results: The study showed the most common used medication for treatment of acute insomnia was benzodiazepines, sedative antihistamine, and tricyclic antidepressant (TCA) whereas for chronic insomnia it was selective serotonin receptor inhibitors (SSRI), benzodiazepines and TCA. The three most common reasons (81-84%) for choosing their choice of hypnotics among the government doctors are the effectiveness, the availability and post-consultation with senior doctors (family medicine specialists). The private doctors choose their preferred hypnotic which has little or no side effects, effective and with rare or little drug-drug interactions (>80%).

Conclusion: The most common hypnotic used in patients with short and long-term insomnia among primary care doctors is benzodiazepine.

Poster Abstract 42

Pattern and types of oral traditional and complementary medicine use among patients with metabolic syndrome attending a university primary care clinic

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Introduction: Oral traditional and complementary medicine (T&CM) use in patients with metabolic syndrome (MetS) is increasing. This trend may be due to the belief that these products are safe and all-natural. This study aimed to explore the pattern and types of oral T&CM use among patients with MetS in primary care.

Methods: A cross-sectional study was conducted at a university primary care clinic from February to April 2021. An equal number of adults with MetS who were oral T&CM users and non-users; matched to their age, gender, ethnicity, and conventional medications were recruited. Sociodemographic characteristics, clinical characteristics, and details on oral T&CM use were recorded in a proforma.

Results: A total of 126 matched participants were included in the study (63 users and 63 non-users). The mean age of the participants was 57.7 (± 5.6) years old. 63.5% were females and the majority were Malays (88.9%). Oral T&CM users have significantly higher mean low-density lipoprotein cholesterol (LDL-C) levels compared to non-users (2.9 \pm 1.1 vs 2.3 \pm 0.8, $p = 0.04$). In terms of the type of oral T&CM use, 32 (50.8%) used natural raw products such as leaves and roots, 24 (38.1%) used commercially processed products, and 7 (11.1%) used both. 39 (61.9%) participants consume oral T&CM for therapeutic reasons as well as complementary to their conventional treatment.

Conclusion: There was a diverse use of oral T&CM, which may need proper monitoring by the practitioners. The significant higher level of LDL-C among oral T&CM users raised a concern but this warrants further investigation.

Poster Abstract 43

The mediating effect of mental health status between self-system and sexual risk behaviour

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Introduction: Mental health is one of the major health issues facing the current generation, and it is a potential risk factor for youth engaging in sexual risky behaviour. This study aims to investigate whether mental health (depression, anxiety and stress) plays a mediating roles between the self-system (adverse childhood experiences, religiosity, knowledge on sexuality and attitude towards premarital sex) and sexual risky behaviour (SRB) to better understand the underlying mechanism that contribute to this behaviour among the local youth.

Methods: This was a cross-sectional study that involved 1171 youths from university/university college across Malaysia. Respondents were recruited using a stratified random sampling approach to answer and were asked to complete a self-administered questionnaire. The mediating effect of mental health status (depression, anxiety, and stress) on the self-system and sexual risk behaviour (SRB) was analyzed using Structural Equation Model (SEM) analysis in SPSS Amos.

Results: The results indicate that mental health status acts as a mediator variable that significantly mediates the relationship between childhood abuse and sexual risk behaviour as well as between religiosity and sexual risk behaviour.

Conclusion: Our study found that mental health status plays a significant role as a mediator between self-system (childhood abuse and religiosity) and sexual risk behaviour among local youth. Future researchers should consider developing more targeted and culturally appropriate interventions aimed at reducing sexual risk behaviour among our Malaysian youth, specifically those with a history of childhood abuse and those with lower levels of religiosity by considering mental health status as a key variable.

Poster Abstract 44

Challenges and experiences of PAXLOVID administration in primary care for Segamat district

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Introduction: In Malaysia, more than 5 million COVID-19 cases were reported with 37,000 deaths. Since antiviral PAXLOVID (PF-07321332/Nirmatrelvir 150mg Film-Coated Tablets & Ritonavir 100mg Film-Coated Tablets) was available, primary health clinics in Segamat were the 4th highest in Johor, actively giving PAXLOVID to eligible patients. This study was done to determine socio-demographic, adverse events and defaulter rate of patients. It is also to determine cost effectiveness of PAXLOVID administration.

Methods: This is a retrospective descriptive study done from 1st May 2022 until 31st December 2022. Universal sampling was done, including all COVID-19 patients receiving PAXLOVID from health clinics in Segamat district. Data analysis was done using Microsoft Excel 2016.

Results: There were a total of 401 COVID-19 patients with

at least 1 eligibility score taking PAXLOVID treatment during the study period. Category 2A were (98.8%,n= 396) while Category 2B were (1.25%,n=5) patients. Female patients were (60.6%, n=243) and (39.4%, n=158) patients were male. There were (72 %,n=289) patients from age more than 40 years old. There were (6.9%, n=33) patients non-compliance to PAXLOVID while (4.6%,n=22) patients were not contactable during follow up. Common side effects of PAXLOVID were dysgeusia (52.7%) and diarrhoea (8.7%) upon day 3 and better at day 5 of treatment .

Conclusion: Primary health care played an important role in managing COVID-19 Category 2 and prescription of PAXLOVID. This study showed dysgeusia was the common side effect of PAXLOVID. Medication counseling were important to assure patient adherence to PAXLOVID including the side effects.

Poster Abstract 45

Prevalence and epidemiological characteristics on sexually transmitted infections; A one year cross sectional study from a private primary care centre.

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Introduction: Sexually Transmitted Infection (STI) screening is an important diagnostic tool for those with high risk sexual behaviours regardless of being asymptomatic or symptomatic. Prevalence data on STI in Malaysia is sparse, which curb early intervention for specific targeted groups in the population. This study aimed to ascertain epidemiology of STI in a private primary care centre.

Methods: A cross sectional study was conducted for a period of one year (May 2020 – May 2021) from all patients visited to clinic for STI screening regardless of being symptomatic or asymptomatic.

Results: There were 139 patients visited the clinic for STI screening [female 89/139 (64%); male 50/139 (35.9%)]. A total of 105 (75%) patients were asymptomatic and 34 (25%) were symptomatic. Majority patients [94 (67%)] were young adult aged 20-29 years old. From the total screenings carried out, 82 (58%) patients were positive for STI (single or multiple infections). Out of these positive STI cases, the majority [52/82 (63%)] were young adults, aged from 20-29 years old. Single infection were reported in 43 patients predominantly caused by *C. trachomatis* (n=18), while multiple infections (more than two STIs) were reported in 39 patients predominantly caused by HSV and *C. trachomatis* concomitantly (n=15).

Conclusion: This study represents an urban epidemiological review on STI prevalence in private primary care centres which may contribute to a better STI surveillance and intervention towards specific targeted populations including vast awareness and destigmatization strategy.

Poster Abstract 46

Prevalence and antibiotic susceptibility of bacteria from wounds treated in primary care center in Kluang

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Introduction: Wound treatment has been one of core business in primary care where bacterial involvement affects healing outcome caused by emergence of multiple resistant drug bacterial strains. Routine antibiotic prescription in wound may cause resistance to antibiotics. Thus, a review of pathogen frequency and susceptibility pattern is necessary to provide better service while overcoming limitations in primary care service.

Methods: In this study, wound swabs from 48 patients were collected during first review in Klinik Kesihatan Mengkibol. Specimens were cultured using standard microbiological techniques and specimens with single pathogen tested for antibiotic sensitivity.

Results: There are 64 pathogenic bacteria isolates were cultivated from 48 samples taken from wounds. Acinetobacter spp (16, n=64, 25%) and Pseudomonas spp (10, n=64, 16%) were the most prevalent bacteria found in wounds followed by Staphylococcus spp (9, n=64, 14%), Escherichia coli (9, n=64, 13%) and Proteus spp (9, n=64, 13%). There are 11 samples from 18 samples tested for susceptibility to commonly used antibiotic. Regretfully, isolates tested showing reduced susceptibility to commonly used antibiotics with Unasyn (9, n=11, 82%), Augmentin (7, n=11, 64%) and Cefuroxime (2, n=11, 18%).

Conclusion: Study showed bacteria diversity in wounds and an increasing trend of resistance to commonly used antibiotics. However, collection of wound swabs is not routinely done in all patients at primary care setting. As such, it is important to emphasize practicing standard precaution to reduce risk of transmission knowing our limited option of antibiotics.

POSTER ABSTRACTS –

b) CASE REPORT

Poster Abstract 1

A rare side effect of gabapentin-induced fecal incontinence in a patient with painful diabetic neuropathy.

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Introduction: Gabapentin is commonly prescribed as the first-line agent for managing neuropathic pain. While there have been a few case reports of gabapentin-induced incontinence in the medical literature, no such case has been documented in Malaysia.

Case report: A 32-year-old male with diabetes mellitus presented with peripheral paraesthesia. He denied back pain, weakness, or incontinence. On examination, he showed loss of sensation to tuning fork and monofilament during a feet

examination. Gabapentin 300mg once a day was started and gradually increased to 300mg twice a day, which improved his symptoms. However, four weeks later, he developed fecal incontinence 2 to 4 times a week. Gabapentin was discontinued and his symptom resolved two weeks after. The patient remained continent during the 5-month follow-up.

Discussion: Several reports in the literature have documented cases of gabapentin-induced faecal incontinence. One study by Gil-Nagel et al. described a 43-year-old man with epilepsy who developed bladder and fecal incontinence after taking gabapentin. Another study by Iyer et al. reported a 65-year-old woman with neuropathic pain who developed incontinence after starting gabapentin treatment. The adverse effect is believed to be caused by the modulation of gamma-aminobutyric acid and glutamate neurotransmitters, which interferes with the inhibition of micturition and defecation centers in the cortex.

Conclusion: Gabapentin has the potential to cause fecal incontinence, but this effect is reversible, supporting the ascribability hypothesis. Patients being treated with Gabapentin for neuropathic pain should be advised about this potential adverse effect so that the drug can be withdrawn promptly if needed.

Poster Abstract 2

DiGeorge syndrome presenting with imperforated anus and recurrent infections in neonatal period: A case report

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Introduction: DiGeorge syndrome or 22q11.2 deletion syndrome (22q11.2 DS) is the most common chromosomal microdeletion disorder. Signs and symptoms are associated with abnormal development of 3rd and 4th pharyngeal pouches. Early diagnosis in primary care through prenatal ultrasound and combined management with multidisciplinary team improve the quality of life of a patient with this rare syndrome.

Case presentation: We describe a 3 month old child who presented with imperforated anus and recurrent infections since early neonatal period. Prenatally, ultrasound revealed a few congenital anomalies but not proceeded with amniocentesis. His Neonatal Intensive Care Unit (NICU) stay was stormy with recurrent episodes of infections, cardiac events and dermatological issue. He succumbed to death due to septicemic shock secondary to Pseudomonas Aeruginosa bacteremia. Fluorescent in situ hybridization (FISH) was performed which confirmed the diagnosis 22q11.2 deletion.

Discussion: DiGeorge syndrome has a wide phenotypic spectrum and an estimated incidence is 1 in 4000 live births. Only 10% inherited as autosomal dominant traits. Pregnancies at risk can be evaluated as two distinct groups: the first group is pregnancy with a family history of 22q11.2 deletion and the other group is pregnancy with abnormal fetal ultrasound findings. The improvements in routine ultrasound techniques

are expected to significantly increase the number of cases with prenatally detected cardiac defects.

Conclusion: Early diagnosis and combined management through a multidisciplinary and coordinated care plan improves the quality of life of a patient with this rare syndrome.

Poster Abstract 3

Post COVID-19 infection subacute thyroiditis - Something not to be missed

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Introduction: COVID-19 once reached its peak back in 2020-2021 where numbers of cases kept on rising everyday which was a challenging situation for all physicians globally. This is a case of post COVID-19 subacute thyroiditis (SAT) which is a rare occurrence amongst the Asian population.

Case presentation: A 37 year old Malay lady initially presented with complaints of central chest discomfort for the past 3 weeks which was associated with occasional palpitations. She had a recent history of COVID-19 pneumonia stage 4a. She was initially diagnosed with long covid syndrome. She presented again 6 months later with complaints of reduced effort tolerance and palpitation which persisted since the first presentation. She also had bilateral leg swelling for the past 1 week and also tender anterior neck swelling. Thyroid function test revealed hyperthyroidism features with USG neck keeping in features with thyroiditis. She was diagnosed with post COVID-19 SAT where oral prednisolone was given and tapered gradually with resolution of TFT and symptoms were seen within 1 month time.

Discussion: The viruses most commonly associated with SAT are mumps, measles, influenza, enterovirus, cytomegalovirus, HIV, coxsackievirus, adenovirus, and EBV. This case is reported as it is a rare occurrence among the Asian population, especially those who are post COVID-19 patients.

Conclusion: Although COVID-19 cases are commonly seen nowadays, this case would remind us that we need to be more vigilant in treating post COVID-19 patients that could present with many symptoms which could be overlapped with each other.

Poster Abstract 4

Primary care diagnosis of gastroschisis: Case report

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Introduction: Gastroschisis is a congenital abdominal wall defect occurring in approximately 5 in 10,000 live births. Prolonged amniotic fluid exposure can impair mesenteric blood flow and irritate the foetal intestinal wall. This case study shared an early gastroschisis detection by primary care providers.

Case presentation: A 23-year-old Malay gravida 2 Para 1 made a booking at 12 weeks' gestation. During a 28-week antenatal ultrasound, the foetal abdominal circumference was at 26 weeks, and there was presence of gastroschisis (herniated and thicker bowel (18.5 mm) loops floating freely in the amniotic fluid. The patient was referred to the Obstetrics & Gynecology (O&G) team and seen at 30 weeks. The patient was counselled on the risks of intrauterine mortality, chromosomal abnormality, early neonatal death, and preterm in this pregnancy. The patient experienced preterm premature rupture of the membranes (PPROM) at 35/40+6/7 weeks' gestation. The baby was admitted to the intensive care unit (NICU), and the pediatric surgical team made successful delayed primary closure and viscera reduction surgery.

Discussion: Even though gastroschisis can be identified as early as 12 weeks of gestation, the prenatal imaging characteristics of gastroschisis can be challenging. In this case, the pathology was not detected before 28 weeks of gestation, despite three ultrasounds performed from 12 – 26 weeks. The pathology was eventually detected at 28 weeks' gestation, and she was referred promptly, bringing a good prognosis for the neonates.

Conclusion: Early gastroschisis diagnosis at the primary care level is vital as this problem requires prompt referral to tertiary centres to improve the neonate's prognosis.

Poster Abstract 5

A case series of ultrasound assessment of neck lymph nodes in primary care

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Introduction: Ultrasound is a useful imaging tool to assess neck lymph nodes in primary care. It can be used to evaluate number, size, site, shape, margins, internal echotexture and vascularity of lymph nodes. Ultrasound can add valuable clinical information and serve as a complement to physical examination to distinguish between normal and abnormal lymph nodes.

Case presentation: We report three cases of enlarged neck lymph nodes who presented to our primary care facility with neck swelling. The first case was a 26 years old man who had Tuberculous Lymphadenitis with underlying Human Immunodeficiency Virus (HIV) infection. The second case was an eight year old girl with reactive lymph nodes secondary to viral infection which was conservatively managed. The third case was a 69 years old lady who had Papillary Thyroid carcinoma which has metastasized to nearby neck lymph nodes. For these cases, Ultrasound was able to provide important sonographic features that significantly improved patient's management at primary care level.

Discussion: Ultrasound can be used to confirm the presence of abnormal lymph nodes. It can provide important information on the sonographic characteristics of the lymph nodes that can facilitate management. American Society of Radiology (ACR) Appropriateness Criteria supports the use of ultrasound for solitary or multiple neck masses in patients with or without

fever. Sonographic features of lymph nodes that may suggest malignancy or metastasis are round shape or S/L ratio >0.5, loss of echogenic hilum, hypoechoic parenchyma and tendency to aggregate into mass. On colour Doppler, features as subcapsular vessels, displacement of hilar vasculature and absence of segmental nodal vessels have been suggested to be related to tumour infiltration.

Conclusion: Initial imaging modality with ultrasound could assist primary care physicians to detect abnormal neck lymph nodes that may require further investigations and referral.

Poster Abstract 6

The missed early diagnosis of 'siamese twins'- Ethical dilemma and role of family physicians

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Introduction: Conjoined twins (CT) are a rare embryological developmental accident of uncertain aetiology. Despite the prevalence being uncommon, this phenomenon carries a high rate of stillbirth and early neonatal death. Early detection is crucial to avoid unnecessary surgical delivery and psychological anguish to the expecting parents.

Case presentation: A 25-year-old primigravida with no known medical illness was diagnosed to have conjoined twins in the second trimester. She had her early trimester scan done previously in a health clinic which showed a singleton fetus. An ethical dilemma arises in terms of the termination of pregnancy or continuation of pregnancy due to cultural beliefs. Subsequently, the parents agree to terminate the pregnancy. A stillborn female thoracophagus conjoined twins were delivered through spontaneous vaginal delivery weighing 750g at 21 weeks period of gestation. Lactation was suppressed and psychological support was given throughout the postnatal care.

Discussion: CT is a rare phenomenon that carries high mortality and morbidity. This condition can be recognized early with first-trimester ultrasound focusing on the presence of a separating membrane of twin pregnancies (Morin&Lim,2011). The decision on termination of pregnancy is often made if the twins share vital organs (Dorairajan G, 2012). Besides, late detection as in this case had stirred psychological distress in the parents. Psychological and lactation support is important after infant death (Carroll K et al 2020).

Conclusion: The primary care physician's role in timely prenatal diagnosis, counseling, organization of interdisciplinary shared care, and aftercare is imperative in cases of conjoined twins and the affected parents.

Poster Abstract 7

'The sneaky cough: How a usual presentation led to the possible diagnosis of a hydatid cyst of the liver'

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Introduction: Hydatid disease, caused by the *Echinococcus granulosus* tapeworm, usually affects the liver in humans.

Case presentation: This case report focuses on a 73-year-old man who visited a healthcare clinic with a persistent cough. Despite being treated for pneumonia several times, his symptoms did not improve. An incidental finding from an X-ray revealed an elevated right hemidiaphragm and a well-defined, round opacity in the liver. Further imaging tests showed a calcified liver lesion, possibly a complex hepatic cyst or hydatid cyst. However, hydatid serology was negative. The patient was managed conservatively with a "watch and wait" strategy due to the absence of symptoms and negative serology.

Discussion: Hydatid cysts are rare in Malaysia, and most cases are asymptomatic. The most common symptom is right hypochondriac pain, but this patient presented with a chronic cough instead. The radiographic findings strongly suggested a hepatic hydatid cyst. Although a negative serology result is observed in 20% of patients, it is usually helpful in confirming the diagnosis. Treatment options for hydatid cysts include surgery, percutaneous treatment, pharmacotherapy, and monitoring. In non-complicated cases, a "wait and see" approach may be considered. In this case, since the patient had no symptoms and a negative serologic test, no medication was administered for hydatid disease.

Conclusion: This case highlights the significance of primary care physicians keeping the possibility of rare differentials in mind when patients presented with common symptoms. This case also illustrates the challenges in arriving at a definitive diagnosis.

Poster Abstract 8

Breaking the mirror: A case report of maternal mirror syndrome in primary care.

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Introduction: Mirror syndrome, also known as Ballantyne syndrome, is a rare medical condition characterized by simultaneous swelling in the mother, fetus, and placenta. Fewer than 120 cases have been reported in the medical literature.

Case presentation: A 31-year-old woman presented with excessive weight gain at 19 weeks of gestation. She had a 5-kilogram weight gain in one month but was otherwise normotensive and had no edema. Her blood pressure monitoring and modified glucose tolerance test thereafter were within the normal range. At 27 weeks and 5 days, during a routine follow-up, she had a weight gain of 6.2 kilograms in two weeks, her blood pressure was 187/126 mmHg with urine protein 2+, and pedal edema was present. The fetal heart was not detectable and had features of hydrops fetalis during transabdominal scan. Initially diagnosed as severe preeclampsia with intrauterine death, the patient was given Tablet Adalat 10 mg stat and referred to a tertiary center. The patient's condition improved rapidly after delivery.

Discussion: Mirror syndrome is often misdiagnosed as preeclampsia but has distinct features. Severe hydrops fetalis is a key symptom, with maternal symptoms including edema, hypertension, and proteinuria. Causes include rhesus isoimmunization, twin-twin transfusion syndrome, viral infection, and fetal malformations or tumors. The intrauterine death rate is high. Early identification and management can prevent complications. When the cause of fetal hydrops cannot be determined or treated, prompt delivery is necessary.

Conclusion: Mirror syndrome is rare and can be challenging to recognize without fetal hydrops and placentomegaly on ultrasound. Early identification and management can prevent complications.

Poster Abstract 9

Tuberculosis of the hand: A nearly missed case from primary health clinic

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Introduction: Hand tuberculosis is a rare type of extrapulmonary tuberculosis. Literature has reported that 10-15% of extrapulmonary tuberculosis involves the musculoskeletal system, and only 2% involves the hand.

Case presentation: A 62-year-old male with background hypertension and dyslipidaemia, diagnosed with hand tuberculosis following poor wound healing. He presented with 2 weeks history of gradual onset right-hand swelling associated with discomfort and restricted joint movement. He denies any fever, history of trauma and insect bite. No constitutional symptoms were reported. Examinations of the right-hand revealed evidence of infection, thus treated for hand cellulitis. However, the patient developed pain in the hand following 3 days of antibiotics and presented himself to the hospital. Later, diagnosis of right-hand abscess was made and underwent incision and drainage. Despite regular wound dressing in a health clinic, the wound shows poor healing progress. Hence referred to the hospital for further management and underwent wound debridement. Diagnosis of hand TB was made based on the presence of necrotising granulomatous inflammation with the presence of acid-fast bacilli from the histopathology and bacteriological confirmed of Mycobacterium Tuberculosis complex. He completed six months of anti-tuberculosis and recovered well.

Discussion: Diagnosis of hand tuberculosis remains a challenge for primary care doctors. The early presentation may mimic other common clinical conditions presented to primary health care.

Conclusion: Due to its rarity and lack of clinician awareness, diagnosis may be missed, causing a delay in the initiation of treatment and resulting in the progression of the disease and increasing morbidities associated with tuberculosis.

Poster Abstract 10

Case report of non-traumatic broken Implanon NXT® in-situ

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Introduction: The progestogen-only contraceptive implant, Implanon NXT® is widely available in government health clinics in Malaysia. The incident of in-situ broken contraceptive implant has not been published locally. This report describes two separate cases of broken contraceptive implants requiring unscheduled earlier implant removal, in Kedah.

Case presentation: Case 1: A 34 years old, Para 4 with underlying hypertension on medication presented with incidental finding of her broken Implanon NXT®. No history of trauma to the arm. No changes to her menstrual pattern. The implant was removed in 2 pieces.

Case 2: A 43-year-old lady, Para 3 with underlying recurrent Actinomycoses infection on IUCD had Implanon NXT® inserted. She presented 2 months post insertion with non-traumatic broken Implanon NXT® in-situ. Removal was done as effectiveness of broken Implanon NXT® remains questionable.

Discussion: Broken contraceptive implants were either incidentally noticed or had associated local trauma. Most patients with damaged contraceptive implants had premature removal of the implants before the 3 years mark. The incidence of broken contraceptive implants is not clear. The contraceptive efficacy of a broken contraceptive implant is not well studied.

Conclusion: It should be acknowledged that although rarely reported, there is potential of in-situ non traumatic breakage of the contraceptive implant. We recommend for personalised case management to arrange for the removal of the broken contraceptive implant as its effectiveness is not guaranteed. Nevertheless, a shared decision making with patient should be prioritised to avoid future dilemma.

Poster Abstract 11

The usage of Point-of-Care-Ultrasound (PoCUS) in primary care setting

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Introduction: An acute abdomen case was presented to a class 4 health clinic (without laboratory and radiology unit). With Point-of-Care-Ultrasound (PoCUS), we were able to refer case to emergency department with a correct diagnosis.

Case presentation: 27 years old Malay lady presented with a week history of right loin pain. The pain was sharp and aggravated by movement. It was associated with 2 days of fever and diarrhoea. She remained amenorrhoeic since her delivery via caesarean section 3 months ago. On examination,

temperature was 38C, BP 108/77mmhg, HR 126/min. Per-abdomen, there was mass over right lower quadrant and tender on palpation. Urine pregnancy test was negative.

With PoCUS, we were able to visualise a 6x4cm, well circumscribe, circular mass at right iliac fossa. It was a solid mass without any fluid level but multiple folds noted. There was no free fluid collection and the examination of liver, kidney, pelvic organs were normal.

She was referred to Hospital with the suspicious of appendicular mass. The diagnosis was further confirmed with proper ultrasound and intra-operative findings.

Discussion: PoCUS are scan techniques for organs system such as lungs, heart, abdomen, thyroid, blood vessels and more. It is widely used in hospital management but lacking in primary care setting. Beside antenatal scan, it can be used to answer diagnostic questions in emergency cases and chronic diseases.

Conclusion: Primary care in Malaysia should explore the use of PoCUS. It can aid primary care doctors in making diagnosis and planning management.

Poster Abstract 12

Valproate-induced thrombocytopenia in a young patient: A case report

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Introduction: Valproate acid (VPA) is an effective epilepsy and mood-stabilizer medicine commonly used in primary care. The prevalence of VPA-induced thrombocytopenia had been reported as 12–18% in larger studies.

Case presentation: A 24 year-old man with epilepsy and spastic quadriplegic cerebral palsy who was fits free for years on VPA 400mg bd and clonazepam 0.5mg ON, transferred care from hospital to primary health clinic in 2020. He was fully dependent for activities of daily living. He was underweight (40kg). He has no signs of bleeding, lymphadenopathy or visceromegaly. Systemic examinations were unremarkable. Blood investigations showed persisted isolated thrombocytopenia (91-102 X 10³ / μ L). Peripheral blood smear showed no leucoerythroblastic cell, occasional large platelet with no clumping. Therapeutic drug monitoring (TDM) revealed serum VPA concentration was 110.8 microgram/mL, above the therapeutic range. The case was discussed with paediatric neurologist and the dosage of VPA was reduced 20mg/day every 2 weeks from January 2022 His VPA was slowly tapered down to 120mg twice a day and his platelet count normalised (154 X 10³ / μ L) in June 2022. He remained fits free.

Discussion: Thrombocytopenia is a common haematological side effects related to VPA but not widely reported.¹ It is suggested that TDM of VPA should be performed when there is a suspicion of toxicity. Studies showed that thrombocytopenia is reversible with dose reduction or discontinuation of VPA as seen in this case.

Conclusion: Patients on long term VPA should have regular FBC. Primary care physician should be aware of the possibility and reversibility of VPA-induced-thrombocytopenia.

Poster Abstract 13

The psychiatric disguise of a pituitary macroadenoma in primary care: A case report

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Introduction: Presentation of pituitary macroadenomas (PMA) with neuropsychiatric symptoms in primary care is rare. Arrival to its diagnosis requires careful consideration and a high suspicion index. This case aims to highlight the role of a family medicine specialist (FMS) in diagnosing a patient presenting with atypical psychiatric symptoms not responding to medication, which led to the diagnosis of PMA.

Case presentation: A 43-year-old gentleman presented to the health clinic with disorganized behavior after being retrenched from work. An initial diagnosis of major depressive disorder with psychosis was made but did not render responsiveness to treatment (fluvoxamine and risperidone). Schizophrenia was then considered, and a CT Brain was ordered as part of the investigations, which revealed a hyperdense mass within the sellar with suprasellar extension. Differentials included PMA or craniopharyngioma which was confirmed by MRI brain. Subsequent blood tests revealed hyperglycaemia with low T4 but normal TSH (central hypothyroidism), with no signs of Cushing's syndrome. He was referred to the endocrine team for the likelihood of hypopituitarism. Hormone replacement therapy was initiated (hydrocortisone, levothyroxine, desmopressin) and referral to neurosurgeon for the management of PMA was made. He was co-managed with a psychiatrist for his psychiatric symptoms.

Discussion: Neuropsychiatric symptoms are an uncommon presentation in a patient with pituitary tumor. Arrival to diagnosis can be complex and requires a multidisciplinary team approach.

Conclusion: Refractory psychiatric symptoms toward treatment should raise high suspicion about endocrine pathology as an organic cause. Prompt action with good coordination in primary care can save the patient and improve the quality of life.

Poster Abstract 14

Hypothyroidism presenting as myxedema psychosis in adolescent: A case report

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Introduction: Hypothyroidism is one of the common diseases treated in primary care, and psychosis associated with it is known as myxedema psychosis. We report a case of an unusual presentation of hypothyroidism in adolescents that can lead to misdiagnosis of psychiatric disorders.

Case presentation: A 15-year-old presented with 3 months

history of low mood, reduced sleep, along with hallucinations. She was initially treated for acute psychosis to rule out underlying psychiatric disorder. Later, she manifested classical symptoms of hypothyroidism and further investigation confirmed severe hypothyroidism. She was then commenced on L-thyroxine. However, following that, the hallucinations worsened leading to another referral to further investigate.

Discussion: Myxedema psychosis is not uncommon but most frequently missed cause of psychosis. 5-15% of adults with hypothyroidism have some form of psychosis. Studies among adolescents are however sparse. The psychotic presentations are commonly distinctive that often mislead the differential towards primary psychiatric disorders rather than hypothyroidism. This in turn, causes delay in appropriate treatment and increases morbidity.

Conclusion: Myxedema psychosis should always be recognized as one of the differential diagnoses in new onset psychosis. The value of screening for hypothyroidism in adolescents presenting with psychiatric disorders in primary care settings is also highlighted.

Poster Abstract 15

Case report: Non-motor symptoms - An early sign of Parkinson's disease

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Introduction: Parkinson's disease is a neurodegenerative condition associated with motor symptoms and a diverse range of non-motor complications. While typical clinical diagnosis focuses on motor symptoms, many non-motor symptoms such as constipation may precede motor symptoms in the early stage.

Case presentation: A 67-year-old female with a background of hypertension and dyslipidaemia, presented with severe constipation and significant weight loss over a span of 1 year. A thorough investigation which included blood investigation, scope and scan came back as normal. Subsequent follow up revealed that she had resting tremor over left hand which started concurrently with constipation and becoming more prominent. She denied rigidity or bradykinesia. Clinical examination showed pill rolling tremor over left hand, hypomimia, glabellar tap positive and loss of arm swing over left side. Otherwise normal muscle tone, no rigidity or spasticity. Diagnosed as unilateral idiopathic Parkinson's disease after discussion with a physician, she was started on oral madopar. Post treatment, constipation resolved and the patient gained weight.

Discussion: Constipation has been recognised in several studies that it may precede the occurrence of motor symptoms due to earlier involvement of the enteric nervous system and the dorsal motor nucleus of the vagus in the α -synuclein pathology. It is a common non-motor symptom of Parkinson's disease and a risk factor of developing Parkinson's disease.

Conclusion: Aside from typical motor symptoms of Parkinson's disease, careful evaluation of non-motor symptoms need to be highlighted as this may point out an early sign of Parkinson's disease.

Poster Abstract 16

The itch of nature's call when the night falls – A case report of an uncommon nocturnal enuresis in adolescent.

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Introduction: Nocturnal enuresis is defined as involuntary urination in bed in a child aged five years or older who does not have congenital or acquired nervous system or urinary tract abnormalities. According to the International Children's Continence Society in America, this disorder affects approximately 7 million children and adolescents worldwide and usually resolve by the age of 15.

Case presentation: A 16-year-old female student, from a tumultuous household having bedwetting problems since childhood. Her urinary symptoms worsened during the COVID-19 lockdown, hence she felt depressed. She scored moderate to severe on the PHQ-9 screening. An investigation to rule out secondary causes of enuresis revealed normal fasting blood sugar, thyroid function test, renal profile, renal ultrasound and urine examination. She was diagnosed with non-organic enuresis with comorbid depression and co-managed with the urology team. She received urotherapy and psychological treatment. Family therapy was also given to the carer, and it took about 3 months of therapy to improve her symptoms and resolve her bedwetting issue and mood symptoms.

Discussion: Nocturnal enuresis in adolescents is uncommon when active therapy modalities are started before the age of six. Studies have shown that the longer the enuresis persists, the lower the probability of it spontaneously resolving. However, treatment with urotherapy has a lower relapse rate, but it requires a highly motivated patient and family with three-month time commitment.

Conclusion: Effective treatments for nocturnal enuresis with comorbid psychological issue include family therapy, along with urotherapy.

Poster Abstract 17

Adult diphtheria mimicking exudative tonsillitis: curbing the infection in community setting

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Introduction: Diphtheria is rarely seen in Malaysia until 2016 where there were outbreaks in few localities as a result of unvaccinated and incomplete vaccinated children. There is evidence of waning of immunity level in adolescent and adulthood that may explain on the adult Diphtheria infection.

Case presentation: A 19 years old man, who completed his childhood vaccination was diagnosed of Diphtheria. He came to local health clinic for fever, cough, sore throat and malaise for few days. Clinically he was in sepsis. Examination of the throat revealed multiple white patches at oropharyngeal area

with bilateral enlarged exudative tonsils. He was referred to tertiary centre for exudative tonsillitis in sepsis. However, the diagnosis of Diphtheria was made based on positive culture and sensitivity and Elek test. He completed the anti-toxin and antibiotic course and discharged well without any complication.

Discussion: Clinical symptoms of diphtheria often mimic the presentation of exudative tonsillitis. High index of suspicion of diphtheria is crucial in patient presented with oral pseudomembranous lesions even in those who completed childhood vaccination, so that management can be commenced earlier, and the close contacts can be investigated and managed accordingly. Due to waning of immunity against Diphtheria especially in adolescent and adult, it is recommended to have a booster of Tdap at age of 11 years, and then every 10 years in adult.

Conclusion: Substitution of ATT to Tdap booster vaccine for indicated adult population in Malaysia needs further cost effectiveness study.

Poster Abstract 18

Stroke multidisciplinary team (STRIDE) approached in managing post stroke patient with unmet needs at primary care level

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Introduction: The Stroke Multidisciplinary Meeting (STRIDE) session was established to improve the collaboration between professionals together with stroke survivors and caregivers in meeting the post-stroke care needs, including community participation and long-term care needs. This bimonthly virtual meeting also provides a platform to connect the rehabilitation services with primary care physicians to discuss patients' progression and goals. However, the concepts were not well established among Family Medicine Specialists in Malaysia even though primary care provides the majority of post stroke care.

Case presentation: In this report, we presented 4 post-stroke patients that received care negotiation through STRIDE in Mac 2023. We reported the clinical presentation, diagnosis, care and rehabilitation goals and the involvement of the STRIDE's team members in supporting patients meeting their goals.

Discussion: Coordinated multidisciplinary care in stroke rehabilitation has resulted in long term reductions of death, dependency and the need for institutional care when compared with conventional care. These outcomes are associated with having stroke-skilled professionals who collaborate through regular multidisciplinary team meetings and shared goals. STRIDE may serve as exemplary to improve post-stroke care either for both hospital settings and community care services.

Conclusion: In conclusion, a pragmatic, multidisciplinary team meeting should be integrated in the care pathway for post-stroke patients, namely for those residing at home and receiving primary care rehabilitations.

Poster Abstract 19

A survivor of congenital chylothorax with hydrops fetalis

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Introduction: Congenital chylothorax is a rare neonatal condition characterized by the accumulation of lymph in the pleural cavity. Despite its occurrence is rare, it is the most common cause of pleural effusion encountered in the perinatal period. Its association with hydrops fetalis is a poor prognostic factor.

Case presentation: We describe a case of bilateral massive pleural effusion at 31-week ultrasonography during antenatal clinic. Referral to tertiary hospital confirmed hydrops fetalis upon ascites detection. The patient had premature preterm rupture of membrane (PPROM) and a 2.17kg baby was born at 32weeks + 4days via spontaneous vaginal delivery (SVD). Immediate ventilation after birth was performed followed by thoracocentesis draining 175ml of hemoserous fluid, biochemically-analysed as chylothorax. Subsequent investigation revealed no lung hypoplasia sequalae and chromosomal study was sent before discharge after 31 days of admission.

Discussion: Although the survival rate of congenital chylothorax with hydrops fetalis is low, antenatal ultrasound surveillance at primary care has prompted a strong foundation of multidisciplinary approach in this case. The discussion of the abnormal findings was initiated from primary care has helped to overcome the unfavourable result of preterm labour in this case. Besides, good communication skill also has prepared the mind of the antenatal mother to act fast accordingly resulting in a better outcome.

Conclusion: Optimum ultrasound facilities and skilled personnel as part of antenatal care at primary care clinic is fundamental to ensure early detection of congenital abnormalities henceforth good clinical outcome of antenatal cases.

Poster Abstract 20

Inborn error of metabolism among orang Asli community.

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Introduction: This case report described a patient with 3-hydroxy-3-methylglutaryl-coenzyme A lyase deficiency (HMGCLD), a rare autosomal recessive inherited disorder with confirmed case approximately 200 world-wide.

Case presentation: The patient, 6 months old Orang Asli boy from consanguineous marriage presented to the clinic with recurrent episodes of vomiting and diarrhoea for a day. He was lethargic in compensated shock and exhibited respiratory distress. Blood test showed hypoglycaemia, high lactate, severe metabolic acidosis, transaminitis, hyperammonaemia and

deranged coagulation profile. Treatments given were antibiotic, inotrope support and blood product transfusion for septicaemic shock with multiorgan involvements. Later she developed a seizure and further deteriorated before succumbed to death. Inborn error of metabolism result was highly suggestive of 3-hydroxy-3-methylglutaryl-coenzyme A lyase deficiency.

Discussion: Consanguineous marriage is a common practise among Orang Asli population. Most HMGCLD manifested within the first year of life and 95% of patients presented with acute metabolic decompensation. Clinical symptoms include vomiting, lethargy, tachypnoea, seizures and moderate hepatomegaly. Hypoglycaemia, metabolic acidosis, elevated activities of serum transaminases and hyperammonaemia were common findings during acute crisis. Treatment for HMGCLD during ill period is supportive including correction of dehydration, metabolic acidosis and hypoglycaemia. Other family members diagnosed with this condition requires special diet with low in both fat and protein.

Conclusion: This study highlights a high index of suspicion for inborn error of metabolism among Orang Asli infants presented in shock following simple illness. Early diagnosis and management of inborn error of metabolism will prevent mortality in acute crisis.

Poster Abstract 21

Whitish patch over the tongue of a young man: A case report

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Introduction: Tongue lesions are common encounters for primary care doctors. A case of whitish patch over both lateral borders of a chronic smoker's tongue who gave a misleading sexual history. Referral to Otolaryngology team to rule out malignancy revealed the cause to be secondary syphilis.

Case presentation: A 26-year-old man presented with whitish tongue lesions which persisted for six week despite given a course of oral Nystatin. Physical examinations were unremarkable apart from whitish patch on both lateral borders at the ventral surface of the tongue measuring three and five centimeters. Otolaryngology team proceeded with tongue biopsy with provisional diagnosis of tongue leukoplakia besides sending serum for baseline investigations and sexually transmitted infection (STI) screening. Tongue biopsy was negative for malignancy. Serological investigations were normal except positive RPR with a titer of 1:128 and TPPA was reactive. He was treated with benzathine penicillin 2.4 million units intramuscularly by Dermatology team and lesions resolved. During follow-up in health clinic, he revealed his sexual history. We offered STI screening test for his male partner whom we treated as late latent syphilis.

Discussion: In this case, it is crucial to rule out oral potentially malignant disorders e.g. leukoplakia. Oral syphilis is difficult to diagnose based on clinical manifestation alone as it manifested

in various forms. Ulcerative lesions and mucous patch are the commonest clinical presentations.

Conclusion: When primary care doctors more aware of oral syphilis, we can take targeted history in hectic clinic setting. This can help in early diagnosis of STI and reducing public health burden.

Poster Abstract 22

Klinefelter syndrome in a military personnel – A case report on the psychological effect

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Introduction: Klinefelter syndrome (KS) involves abnormality of the chromosomal gene and is usually detected during adolescence. It is the most common sex-chromosome abnormality and occurs in one out of every 500 men. Nevertheless, KS in military population is rare. This case report illustrates a case of KS that was diagnosed only after military enrolment and the psychological effect towards the patient.

Case presentation: A 27-year-old serviceman, with gynaecomastia since the age of 15, was admitted to hospital for rhabdomyolysis and during the admission he was also investigated for the cause of progressively enlarging gynaecomastia. He was then confirmed KS by chromosomal analysis. He also had malaise, low libido, sparse body and facial hair but testes size were normal. He was started on testosterone treatment and symptoms have improved. However, subsequently he elicited depressive symptoms and treated with oral Vortioxetine.

Discussion: There was a delay in the diagnosis of KS in this patient during adolescence. KS is usually underdiagnosed due to wide range of clinical features depending on the phenotype. KS could also present with psychological issues and thus need to be addressed accordingly. As KS could affect physical and mental aspects, deployability and medical readiness of a serviceman is also affected.

Conclusion: Diagnosing KS is challenging and should be considered in patients presenting with gynaecomastia. The delay in diagnosis and treatment could lead to a worse outcome towards the patient and also to the service. Primary care plays a major role in ensuring that patients receive timely and appropriate treatment.

Poster Abstract 23

ADHD and addiction: Don't judge the book by its cover

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Introduction: Attention Deficit Hyperactivity Disorder (ADHD) is the most common childhood neuro-developmental disorders with core features consisting of inattention, over-activity, and impulsivity. ADHD has multi-factorial etiology and coexist with educational and psycho social difficulties which can affecting their quality of life.

Case presentation: Two case studies of late diagnosis of ADHD. The 15 years old boy was referred to addiction clinic for multiple drugs abuse for the past 2 years. He was detected to have ADHD and anxiety at the age of 11 years, treatment was started however then defaulted. Since then he was involved with multiple drugs addiction, to control his impulsivity and anxiety. While another, 16 years old girl who was beyond control with multiple sexual partners, diagnosed with ADHD after thorough history. Both adolescents were finally started with treatment and admitted to rehabilitation center.

Discussion: The worldwide prevalence of childhood ADHD is 5.29%. In Malaysia, estimated prevalence ranging from 1.6%-4.6% with boys are 3-4 times more common as compared to girls. ADHD and addiction can be closely related by which they are prone to use drugs or alcohol to cope with their symptoms. Approximately 25% of adults at the treatment center for alcohol and substance abuse have been diagnosed with ADHD.

Conclusion: ADHD may lead to significant impairment of academic and work performance and may hinder social development. Treatment of ADHD and addiction can be challenging. Therefore, early detection is important for timely rehabilitation and can be treated simultaneously to ensure a better future for the adolescent living with ADHD

Poster Abstract 24

A misleading diagnosis of helminthiasis - A case report on cutaneous larva migrans on hand.

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Introduction: Cutaneous larva migrans (CLM) is caused by accidental infestation and migration of animal nematode larvae into human subcutaneous tissue, most frequently in tropical countries. We report a case of a CLM in a patient who was initially misdiagnosed.

Case presentation: A 72 years old Chinese gentleman, working in a pineapple farm presented with rashes and itchiness of his left ring finger for the past 1 week. There was no history of fever, no insect bite or exposure to chemicals. He did not rear any pets. He initially sought medical treatment from a general practitioner, and was prescribed topical corticosteroids. Due to persisting symptoms, he presented to us for a second opinion. Examination revealed, an erythematous, serpiginous, raised lesion over his left ring finger, with minimal excoriations. There was no lymphadenopathy. A 3 days course of oral albendazole 400 mg once daily, was given along with antihistamine. During the follow up visit a week later, the clinical examination revealed amelioration of both the lesion and pruritis.

Discussion: Cutaneous larva migrans is a parasitic dermatosis. Diagnosis is made based on typical clinical presentation. Creeping eruptions is a diagnostic clinical sign. It is often misdiagnosed in primary health care, leading to exacerbation of symptoms, as a result of topical corticosteroids treatment.

Conclusion: Although this condition is self-limiting, risk of secondary bacterial infection and the psychological distress of having a migrating parasite inside one's skin mandate treatment. Primary healthcare practitioners need to be mindful about this condition as it is easily treatable.

Poster Abstract 25

A rare case of primary syphilis; Syphilitic balanitis of follmann

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Introduction: Syphilis is an evolving sexually-transmitted infection which appears in different distinguishable clinical stages: Primary, Secondary, Latent and Tertiary Syphilis. Syphilitic Balanitis of Follmann (SBF) is a rare manifestation of primary syphilis, in which balanitis becomes the main presenting clinical features, with or without chancre. Therefore, we are reporting this rare case which was initially misdiagnosed for common balanitis.

Case presentation: A 50-year-old heterosexual man presented with painful desquamative and erosive balanitis for 3 weeks. He had an unprotected sex 6 weeks previously and unsuccessfully treated for bacterial balanitis with oral Amoxicillin for a week. On examination, the glans penis was diffusely erythematous with erosions without chancre. Bilateral inguinal lymph nodes palpable. Sexual transmitted infections screening were carried out and serological testing for Syphilis was positive with VDRL result 1:64. He was treated with intramuscular Benzathine Penicillin 2.4 million units. VDRL titre after 2 months and 5 months was 1:8 and non-reactive respectively.

Discussion: SBF was firstly reported by Eugene Follmann (1931), who described the primary syphilis solely presented as erosive balanitis. Other similar cases were reported as indurated balanitis with inguinal lymphadenopathy without chancre. The incidence of SBF was only 0.3-0.5% of syphilis cases and less than 100 cases were reported worldwide.

Conclusion: The presentation of SBF is not typical of primary syphilis, therefore misdiagnosis is common. SBF could be more frequently encountered in practice. Primary care practitioners should have a high index of suspicion for any cases of balanitis with high risk sexual exposure to be empirically treated as primary syphilis till proven otherwise.

Poster Abstract 26

Managing late dumping syndrome in a post-bariatric pregnant lady: A case study in primary care clinic

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Introduction: Pregnancies following bariatric surgery pose clinical challenges. Dumping syndrome is not infrequently seen in pregnancy. A high clinical suspicion of hypoglycaemic events is required as the symptoms mimic early pregnancy complaints.

Case presentation: A 37 years old lady gravida 2 para 0+1 booked at 9 weeks of gestation. She had a history of bariatric surgery, following morbid obesity and subfertility. She defaulted appointment and conceived spontaneously 18 months post-surgery. She was diagnosed to have gestational diabetes mellitus on diet control with MGTT result of 4.2 and 10.8mmol/L. Blood sugar profile ranging between 3.7 and 4.8mmol/L. She reported easy hungry and tremor postprandial 3 hours in second trimester. Capillary glucose readings during events were within 2.5-2.8 mmol/L. Diagnosis of late dumping syndrome was made and referred to tertiary centre for combined care. She was on low carbohydrate loads with high protein and vegetables. With diet modification, hypoglycaemic events resolved. Investigation revealed iron deficiency anaemia and low calcium level. She was on calcium carbonate and multivitamin. She delivered a baby boy at 24 weeks of gestation due to chorioamnionitis.

Discussion: Pregnancy should be postponed for 12-24 months until weight is stabilised. Nutritional deficiencies and dumping syndrome are common complications of bariatric surgery. It required multidisciplinary team approach. Diet modification remains a mainstay of management. MGTT should be substituted with capillary blood sugar measurement in 24-28 weeks.

Conclusion: Primary care physicians should be aware of symptoms of dumping syndrome, provide pre-pregnancy care and nutritional assessment in women post- bariatric surgery.

Poster Abstract 27

Severe jellyfish envenomation: A fatal incident in Pangkor Island – A case report

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Introduction: Jellyfish sting is a common marine medical emergency. This case report shall discuss a severe case of a jellyfish envenomation causing fatality to a tourist in Pangkor Island, Perak, Malaysia.

Case presentation: A 5 year old French boy who was swimming at the beach with his father was stung by jellyfish which was later identified as box jellyfish. Upon presentation

to Sickbay Unit (KK Pulau Pangkor), the child was in cardiorespiratory arrest. Chest compression was initiated by his father immediately when he suddenly collapsed and was not breathing after he retrieving him from the water. There were multiple red purplish linear circumferential lesions on bilateral forearms, bilateral thighs, abdomen and bilateral calves. The child was pronounced dead after 45 minutes of resuscitation at Sickbay. The body was sent to mortuary for post mortem.

Discussion: Most jellyfish stings presented as erythematous lesion with variable pain levels at the sting sites. Box jellyfish with multi-tentacles was identified by the linear circumferential pattern of sting marks. Large amount of nematocyt was released due to the severe stings caused by a significant cardiorespiratory dysfunction to the child.

Conclusion: Deadly species of box jellyfish are found at coastal areas in Pangkor Island. Public health measures such as education on safety precaution during swimming at the beach and initial first aid in jellyfish stings should be emphasized to the locals and tourists.

Poster Abstract 28

Scrofuloderma: An arduous diagnosis

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Introduction: Cutaneous tuberculosis is a rare occurrence. It comprises 1-1.5% of all extra-pulmonary tuberculosis cases. Scrofuloderma, also known as tuberculosis colliquativa cutis, is a form of cutaneous tuberculosis that was frequently observed prior to the availability of effective treatment for tuberculosis.

Case Presentation: We report a case of scrofuloderma in an elderly male who presented with chronic non-healing ulcerative nodule over the left axilla and upper limb. His condition did not improve with empirical antibiotics and anti-fungal agents. The diagnosis was made based on skin punch biopsy suggestive of scrofuloderma.

Discussion: The general approach to treatment of cutaneous tuberculosis is similar to the approach to systemic tuberculosis, which can be treated with a short course of four-agent chemotherapeutic regimen given for 2 months followed by a two-drug regimen for the next 4 months. In our case, patient presented with sole cutaneous lesions without any constitutional symptoms. The diagnosis was delayed and he had failed the empirical treatment targeting at possible deep skin bacterial/fungal infection. Standard guidelines suggested 6-9 months of anti-tubercular therapy in all forms of cutaneous tuberculosis. Our patient received 9 months of anti-tubercular therapy as he had developed extensive skin lesions and subsequently recovered well.

Conclusion: This study highlights the importance of appropriate investigation and follow up in managing non-healing skin lesions when initial diagnosis is not immediately clear.

POSTER ABSTRACTS –

c) COMMUNITY PROJECT / QUALITY IMPROVEMENT PROJECT

Poster Abstract 1

Setting up a neonatal jaundice clinic during the COVID-19 pandemic; Experience by Klinik Kesihatan Cheras.

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Introduction: The coronavirus disease 2019 (COVID-19) pandemic has led to substantial changes in health risks, access to health care, and daily interactions. During initial setting up of neonatal jaundice clinic of KK Cheras in August 2020, we received 209 newborn infants daily from around Kuala Lumpur, with majority coming from outside of operational areas. Transcutaneous bilirubinometers (TCB) are portable devices that are increasingly being used in various healthcare settings, including primary care clinics, to assess neonatal jaundice. The requirement to reduce their waiting areas to reduce risk of COVID-19 infection has led us to do initial triaging using TCB performed by paramedics.

Methods: Here, we described our experience at the Klinik Kesihatan Cheras in setting up the Neonatal Jaundice clinic during that period especially in regards TCB. To alleviate crowding, we implemented a triage and staggered system at the main door entry. Transcutaneous Bilirubinometer (TCB) was used to complement venesection to decide jaundice levels.

Results: Usage of TCB to screen TSB level has remarkably reduced our waiting time from 90 minutes of review by medical officers to 30 minutes only and lessened the crowding at the waiting area.

Conclusion: Usage of TCB also has reduced waiting time and crowding at the laboratory area and is more cost effective because we only performed serum capillary bilirubin.

Poster Abstract 2

Weight management program focusing on body composition and physical activity among healthcare staff at a primary care clinic.

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Introduction: Overweight and obesity are increasingly prevalent, with a ratio of 1 in 2 among adult Malaysians. 65 percent of staff in a primary care clinic were found to be either obese or overweight. A program to empower the clinic members to achieve a reduction in weight and body fat percentage (BF%), improve fitness, and build teamwork was initiated in August 2022.

Methods: All 17 healthcare staff participated in the program. Group physical activities in the form of regular monthly aerobic exercise and monthly outdoor programs were organized by the

participants themselves. Individual activities were encouraged. Body weight and composition analysis were performed monthly, in which the main results (BMI and BF%) were shared among participants.

Results: Group activities (aerobic, plogging, running, badminton, and bowling) and body monitoring were carried out as planned. In terms of BMI, 35.2% achieved a reduction, 52.9% remained and 11.7% increased while for BF%, 58.9% of participants achieved a reduction, 23.5% static and 35.2% increased. In four months, the highest percentage reduction for BMI is 10kg/m², while BF% is 15.

Conclusion: A self-sustaining group exercise program and monitoring using body composition analysis showed positive outcomes. Participants are motivated by seeing small yet objective changes. Further studies are needed to analyze the association between BMI and BF%.

Poster Abstract 3

Clinical audit on management of type 2 diabetes mellitus patients in primary care Clinic UiTM Sg Buloh Campus

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Introduction: Primary care is the focal point for diabetes management. Audit enhances organisation's quality of care by identifying gaps. This audit aimed to evaluate diabetes care quality and adherence to the latest Malaysian clinical practice guidelines for managing type 2 diabetes patients at UiTM SG Buloh.

Methods: A retrospective review evaluated 316 randomly selected adult patients with diabetes from a total of 1766 registered patients. Conducted from February 2022 to February 2023, the audit assessed diabetes care quality using structure, process, and outcome criteria. Standards were established based on previous audits and clinical practice guideline. Medical records were retrieved and transferred to Google Form and analysed in Excel.

Results: Majority of the patients were aged 60 and above, with almost half of them having chronic diabetic complications. Among the 37 criteria assessed, 18 items were not achieved, including important elements such as diabetic registry, defaulter tracing, inadequate documentation, complications screening, and lifestyle advice. Half of the patients did not meet the HbA1c target, and blood pressure goal of 140/80 mmHg. The 2020 audit demonstrated better HbA1c target compared to the 2023 assessment.

Conclusion: This audit emphasized guideline compliance and strategies to enhance diabetes care in primary care, improving quality. Strategies included implementing a diabetic registry and defaulter tracing, improving documentation, complications screening, lifestyle advice, and medication optimization. Regular audits enhanced diabetes care quality, while educating healthcare providers and engaging patients in self-management led to improved outcomes and reduced costs.

Poster Abstract 4

On-site breast cancer screening: A community project

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Introduction: Worldwide, breast cancer remains to be the most common cancer that occurs among women and it is also the second leading cause of cancer death in women. To date, various studies have been conducted on breast cancer prognostic factors and its survival rate. According to National Cancer Registry, among the factors affecting its survival rate is the stage of cancer at presentation which is proven to decline as it progresses. This community project is done to show the importance of early detection of breast cancer which subsequently leads to early intervention and thus, improving their prognosis and survival rate.

Methods: This project was conducted in Kuala Sungai Baru, Malacca and aimed to reach out to the local community for breast cancer screening. For this project, we have offered an early screening programme which includes clinical breast examination, ultrasound of the breast as well as on-site mammogram for clients who fulfilled the selection criteria. This project aims for early detection and early intervention of breast cancer in asymptomatic clients.

Results: A total of 219 clients underwent the screening provided. Among those, three were found with BI-RADS 4 and were subsequently referred for further investigations and management. Following that, two were diagnosed with Stage 1 breast cancer and have received proper and early intervention.

Conclusion: Early detection is vital in providing timely intervention which subsequently leads to a better prognosis and survival rate.

Poster Abstract 5

Road to recovery: OSCA's series of community-based intervention programs for recovering addicts

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Introduction: Drug rehabilitation treatment in Malaysia has shown effectiveness in promoting abstinence among addicts. Nevertheless, individuals in recovery continue to face challenges due to social integration. The reintegration process, aimed at enabling them to become fully functional members of society, remains an unresolved matter due to persisting social stigmas, discrimination, low self-esteem, and difficulties with interpersonal and intrapersonal social skills.

Methods: OSCA KK Batu9 implemented a comprehensive community-based intervention program aimed at enhancing the inter/intrapersonal skills, self-esteem, positive social interactions and discipline, and reducing stigma. Careful consideration was given to selecting clients based on their educational background, mental health status, and existing skills as evaluated by the team.

Each activity was designed with specific objectives in mind, customized to suit the needs of each individual client. Initially supervised, clients were gradually given more independence and responsibility as they gained experience.

Results: By the end of the program, clients achieved the expected skills and objectives. The project was completed as planned, and the clients were able to run the program with minimal supervision. The community responded positively to the project, which not only fostered improved social interactions but also helped to establish connections between individuals in recovery and the broader community.

Conclusion: Community-based psychosocial intervention serves as a valuable complement and integral component of pharmacological intervention. By combining both, a comprehensive and holistic treatment framework can be established, providing individuals with the necessary support and resources to address their issues and promote long-term recovery.

Poster Abstract 6

Initiating of metformin for postpartum prediabetes at primary health care clinics (KK): Perlis experience

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Introduction: Up to half of all women diagnosed with gestational diabetes develop type 2 diabetes (T2DM) within 5 years after delivery. Other than lifestyle intervention, metformin should be considered for those in very high-risk groups. The results of the postpartum oral glucose tolerance test (OGTT) in Perlis from the year 2018 to 2020 revealed 12-14% of women had prediabetes and neither of them prescribed metformin nor adequate follow-up given.

Methods: The initiative started in January 2021 till that date. Women with a recent history of GDM attending Kks in Perlis will be screened at 12 weeks postpartum, using OGTT and HbA1c. The newly diagnosed prediabetes will be prescribed with Metformin 500 mg daily and arranged for visit every 6 months for glycaemic status monitoring. The refuser will be re-counselled in the next 2-4 weeks by the Family Medicine Specialist. Those with normal results are scheduled for an annual screening with OGTT.

Results: In two years, a total of 207 women had postpartum prediabetes. More than half, 62.8% (n=130) has been initiated with metformin. There was an increasing trend in prescriptions, from 58.8% to 66.4% for the years 2021 and 2022 respectively. Another 37.2% (n=77) are still not on treatment due to several reasons, namely, refusal 20.2% (n=42), not suitable for metformin 6.7% (n=14), defaulted appointment 5.3% (n=11) and follow-up at other places 3.4% (n=7). Two women reported minor side effects with medication, 15 cases required defaulter tracing, and none developed T2DM after two years of treatment.

Conclusion: The prescription of metformin in addition to lifestyle modification to assist postpartum women with prediabetes requires a series of measures and evaluations to ensure the continuity of care.

Poster Abstract 7**Project formation of one stop centre for addiction (OSCA)
Klinik Kesihatan Durian Tunggal, Melaka**

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Introduction: Masjid Tanah Health Clinic in Melaka pioneered the One Stop Centre for Addiction (OSCA), replacing existing methadone treatment services. Following its success, the state would like to expand OSCA to Klinik Kesihatan Durian Tunggal (KKDT), which has a significant burden of addiction. This study aimed to address the current limitation of the addiction program in KKDT and propose the establishment of OSCA.

Methods: A randomized cross-sectional study was done by employing a client satisfaction questionnaire using modified Malaysian methadone treatment outcome study (MYTOS) distributed among 100 respondents consisting of 52 addiction program clients and 48 healthcare workers (HCWs) in KKDT.

Results: Out of the 100 respondents, 60% had one or more addictions. The majority of the respondent (79%) agrees there is an inadequate chair in the waiting area, and 65% agrees that there is no designated toilet for the urine drug test. 88.5% of clients say there is no privacy during the consultation. Clients were also unsatisfied with the long waiting times to see a medical officer (73%). Appointments to allied health services are not synchronized and centralized (92%). The majority of respondents (83%) agree with the establishment of OSCA and believe OSCA will help to ease and provide more efficient delivery of addiction service in the future (87%).

Conclusion: Based on our study, we have identified the following limitations of the current addiction program, namely inadequate facilities, long waiting time, short consultation duration, and lack of integrated allied health service. Hence, we propose the formation of OSCA at KKDT.

Poster Abstract 8**Healthcare workers' participation in a healthy-lifestyle program**

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Introduction: Healthcare professionals play a role in health promotion and lifestyle information towards patients and the general population, and it has been shown that one's lifestyle habits can influence attitudes and counselling practices towards patients. This study aimed to explore the participation of healthcare workers (HCWs) in a worksite health promotion (WHP) programme.

Methods: A structured programme run in Endau Health Centre involved HCWs who had overweight and obese. About 20 HCWs enrolled in the programme. All HCWs were weighed at the beginning of the programme. They were given

a program to participate in for 3 months. The programmes started in February 2023 and ended in April 2023. At the end of the program, the staff were weighed again.

Results: From the program, 20% of the HCWs were able to reduce their weight in 3 months program. About 80% started doing some physical activity in terms of 10,000 steps and others. About 70% of HCWs are adopting "Quarter Quarter Half" concepts regarding meal intake.

Discussion: Our results indicate that HCWs are motivated to adopt healthy lifestyle changes when participating in structured, motivated programmes. As HCWs are vital in promoting healthy lifestyles to other groups, it is of utmost importance to find strategies to engage this professional group in activities promoting their health. A mini wellness hub will be built at Endau Health clinic to motivate HCWs to adopt healthy lifestyles.

Poster Abstract 9**Knowledge regarding management of bronchial asthma among primary care providers in Melaka**

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Introduction: Asthma is a common chronic respiratory disease that affects all age groups and is becoming increasingly prevalent in many developing countries, including Malaysia. Therefore, as primary care providers, we should update our knowledge on asthma management to provide the best services to our patients. The aim of this study is to assess the knowledge of bronchial asthma management among primary care providers in Melaka.

Methods: A seven-day virtual continuous medical education (CME) was conducted from January 12 to 20, 2023, involving all medical officers (MOs) and assistant medical officers (AMOs) working in Melaka government health clinics. All of them were informed to attend one of the seven-day sessions according to their preference and suitability. Participants were asked to answer 10 similar questions related to the latest GINA Guideline 2022 and a modified flowchart on the management of acute asthma in primary care clinics in Melaka. Pre-test was conducted just before the CME session while post-test was conducted immediately after the CME ended. A count was made of how many of the participants answered the questions correctly. Comparison of correct answers before and after CME was evaluated using paired t-test.

Results: A total of 414 MOs and 161 AMOs from Melaka government health clinics participated in this 7-day virtual CME. There was a significant increase in correct responses after CME as indicated by the p-value < 0.001.

Conclusion: There was a significant improvement in the knowledge of medical officers and assistant medical officers from government health clinics in Melaka after participating in the virtual CME on bronchial asthma management.

Poster Abstract 10

Diabetes Intro Clinic (DIC): Improving early glycaemic control among type 2 diabetes mellitus patients in Klinik Kesihatan Bayan Lepas

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Introduction: The prevalence of diabetes in Malaysia is showing a rising trend over the years. Uncontrolled diabetes can lead to serious long term microvascular and macrovascular complications. Legacy effect in type 2 diabetes mellitus (T2DM) may start as early as first year of diagnosis. Hence, intensive treatment of newly diagnosed diabetes patients is necessary to reduce the morbidity and mortality. Our aim of this project is to improve the glycaemic control of newly diagnosed T2DM patients in our center.

Methods: Diabetes Intro Clinic (DIC) was established to target patients with newly diagnosed T2DM. A personalized and comprehensive programme was designed and continued for 6 months of duration. Counselling, health education, assessment was done according to DIC programme.

Results: A retrospective review of all T2DM patients under DIC from January 2021 to December 2022 was conducted and result compared with newly diagnosed T2DM patients on usual follow up. The number of patients achieving HbA1c $\leq 6.5\%$ were higher in DIC (46.6%) compared to usual DM clinics (30%). Mean HbA1c reduction in DIC patients was also higher compared with usual follow-up patients, 1.81 (20.2%) and 1.23 (14.1%) respectively. There were significant improvements in other parameters such as blood pressure, weight and cholesterol level.

Conclusion: Our findings showed that DIC was effective in improving glycaemic control, patients' satisfaction and knowledge regarding disease. We postulate that this will help to reduce complications and save treatment cost in the long term.

Poster Abstract 11

Smoking awareness community programme in collaboration with health clinic advisory panel in Kinta district

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Introduction: Quit smoking services are provided by health clinics in the country. It is a challenging discipline from recruiting new clients and assisting them to successfully quit. Innovative programmes including community programmes is a great way in supplementing the quit smoking service in health clinics.

Methods: We reported on a community programme planned and carried out by Menglembu Health Clinic in collaboration with the Health Clinic Advisory Panel.

Results: A community programme was held on 26th August 2022 by Menglembu Health Clinic, in collaboration with the clinic Advisory Panel. It was attended by 20 participants, which includes 5 active smokers, and 15 non-smokers. Multidisciplinary professionals were involved in the programme, including occupational therapist, pharmacist and clinical psychologist who provided individual counselling to the participants, on smoking cessation importance, tips and treatment options. A talk on smoking cessation was delivered by a Medical Officer. Three ex-smokers shared their experiences of their smoking cessation journey which the session was facilitated by a Family Medicine Specialist.

Conclusion: Positive feedback and responses from the participants had promised an impact of raised awareness among the participants.

Poster Abstract 12

Alcohol consumption awareness, screening, and intervention in Kilang Gomali, Batu Anam, Segamat

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Introduction: The prevalence of alcohol drinkers among Malaysians aged 15 years and above was 11.5% with predominantly male. Segamat District Health Office and mental health team collaborated with Kilang Gomali, Batu Anam organized a screening programme for alcohol drinking behaviour among the factory workers on 8th November 2022. The objectives were to increase awareness, assess alcohol consumption, intervene and referral to specialists for those indicated.

Methods: The Alcohol Use Disorders Identification Test (AUDIT-10) questionnaire, a screening tool developed by the World Health Organization (WHO), was used to assess excessive alcohol consumption, drinking behaviour, and alcohol-related issues. Alcohol drinking public talk was given by a medical officer. Interventions done were brief advice and education on safe alcohol drink and specialist consultation.

Results: There were a total of 75 workers aged 18-60 years old screened for alcohol consumption behaviour. There were (24%, n=18) workers with 0 marks in AUDIT-10 questionnaire, equal to non-alcohol drinkers. There were (65%, n=49) workers had lower score less than 1-7 in AUDIT-10 suggesting low-risk consumption, while (9.33%, n=7) workers had 8-14 marks, suggesting harmful alcohol consumption and (1.33%, n=1) worker had 19 marks indicates the likelihood of alcohol dependence and referred to family medicine specialist.

Conclusion: Harmful alcohol consumption and alcohol dependence rate were low in this community; however, it is detectable and needed intervention. Increased awareness and knowledge in the community is the key to prevent from alcohol related complications especially in younger age groups.

Poster Abstract 13**Management of gout: An audit in a primary care university clinic**

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Introduction: Gout is the most prevalent inflammatory arthritis in adults. However, studies on gout in Malaysia particularly on clinical management is scarce. This audit aimed to assess the quality of care in the management of gout patients at a university-based primary care clinic in Selangor, Malaysia.

Methods: A retrospective clinical audit on all gout cases in the clinic from 1st June to 31st December 2021 was conducted. Data collection was accomplished through the clinic's Electronic Medical Record system. Patients were identified based on clinical diagnosis of gout, keyword search, serum uric acid levels (SUA) and pharmacy prescriptions of related medications. Patients were included if they fulfilled the screening criteria. Data were collected in audit proforma, then exported and analysed using Microsoft Excel. The findings were measured against the standard of care recommended by European Alliance of Associations for Rheumatology (EULAR) 2016 and American College of Rheumatology (ACR) 2020.

Results: A total of 190 patients were included; 87.9% were males. The clinic fulfilled all structure criteria. All patients had serum uric acid, renal profile and cardiovascular risks assessment at least once within 12 months. Urate lowering therapy (ULT) was prescribed accordingly in 86.1% of indicated patients. Only 22.8% of patients were treated to target (TTT) SUA. Only 1.9% of patients who have been optimised on first line ULT but not achieved targeted SUA were prescribed with second line treatment.

Conclusion: Generally, there are good resources of guidelines, investigations and specialist availability, however the implementation of TTT recommendation needs to be emphasized.

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