

# THE CUTTING EDGE

JUL/AUG 2025

 **THE FINE LINE  
BETWEEN LIFE  
AND DEATH**

 **FROM  
PADDLE TO  
PORT**

 **FROM UTRECHT  
WITH GROWTH**

 **GOING GREEN  
AT THE  
COLLEGE OF  
SURGEONS!**

 **EAO TRAVERS  
– A RECORD  
OF AN EARLY  
OPERATION**



College of Surgeons  
Academy of Medicine of Malaysia

INTERNAL CIRCULATION ONLY

BERITA CSAMM

# THE CUTTING EDGE

# CONTENTS

JUL/AUG 2025



3	EDITOR'S NOTE	...pg 3
5	PRESIDENT'S MESSAGE	...pg 4
6	COLLEGE ACTIVITIES	
	• <i>Highlights of the College of Surgeons ASC 2025</i>	...pg 6
	• <i>Going Green at the College of Surgeons</i>	...pg 18
	• <i>Joint Advocacy Statement</i>	...pg 19
12	STUDENT VOICES	
	• <i>MSSS at the Congress</i>	...pg 12
	• <i>Young Voices in Surgery</i>	...pg 15
20	FEATURE ARTICLES	
	• <i>The Fine Line Between Life and Death</i>	...pg 20
	• <i>EAO Travers</i>	...pg 22
	• <i>From Utrecht with Growth</i>	...pg 23
	• <i>A Fulfilling and Enlightening Fellowship in Japan</i>	...pg 28
	• <i>From Paddle to Port</i>	...pg 32
31	TRAINING & PROFESSIONALISM	
	• <i>10 years of Non-Technical Skills for Surgeons (NOTSS) in Malaysia</i>	...pg 34
	• <i>Clinical Ethics Consultation Skills Workshop Malaysia 2025</i>	...pg 39
31	IN MEMORIAM	
	• <i>Dr Yoong Boon Koon</i>	...pg 42

# From The Editor



*As we hurtle through to the second half of the year, let us pause and take a breath, holding space to reconnect with our fellow surgeons, if only through the reading of this latest edition of The Cutting Edge.*

*Reminding us that surgeons are much more than ladies and lords of the operating theatre, we feature an unpredictable mountaineering trip and a pickleball playing past president. We journey with two seafaring surgeons describing their fellowship experiences learning robotic surgery in the East (Japan) and managing paediatric surgical oncology in the West (The Netherlands). We hear from our future in our aspiring surgeon medical students, and we look back to our past in an article on the titular origins of the bustling Jalan Travers, and in a reflection of 10 years of the Non-Technical Skills for Surgeons Course in Malaysia.*

*Finally, helping us keep our surgical practices rooted in ethical foundations and in care for our planet, we proudly report on two key collaborative partnerships - the 3<sup>rd</sup> Clinical Ethics Consultation Workshop, and the landmark signing of the Joint Advocacy Statement on **'Sustainable Surgery: A Collective Responsibility'** by the ASEAN Federation of Surgical Colleges.*

*May our surgical fraternity always enrich and impact our world for the better.*

*Enjoy!*

*Shireen Anne Nah*

*Immediate Past Honorary Secretary  
Senior Vice-President*





“...We are planting  
the seeds for the  
next generation...”

# President's Message

## Another Spring for the College of Surgeons



*It feels like spring again when a new committee takes over an organisation. This seasonal change could be for better or worse depending on the environment. We are optimistic because our predecessors have worked hard to nurture a mature and stable environment for the new committee to thrive.*

*What is needed for the College of Surgeons to prosper - new seeds, new ideas and keeping the momentum with renewed enthusiasm.*

*Like any stable and successful organisation, we need new seeds, variety and inclusivity for the garden to bloom. We urge specialty or subspecialty surgeries to hold a place in our 'garden'. Many of us started off as surgical trainees and we have much in common.*

*We might be handling different systems but we are inter-related and we are serving the common host, a body that works on the basic physiology, immunity to ward off infection, cancer, share similar pathology, needs nutrients to thrive and progresses on the same basic principles of research and sharing of scientific ideas. We are in the same profession and to safe-guard the highest of standards, we cannot stay alone or remain aloof.*

*When we view the College as a professional body that represents us in government, academics and society, the more we need a unified voice. We face challenges that need resolving from time to time - NSR registration, continuous professional development, fees schedule, ethical practice, insurance demands, professional governance, parallel pathway - all these require a unified voice to make a fair and favourable stance.*

*More so if you think we require professional skills and wisdom in patient management, the College is heavily involved in SOTM, CCrISP, NOTSS and ATLS. If you think we need better trainees, trainers, training and assessment scheme, the College is in the Conjoint Examination Board and supports the Train-the trainers (TtT) course.*

*Even more so if you think patients deserve competent surgeons for a safe practice. The College is represented in the NSR for educational assessment and credentialling. End of the day, better patient care is our purpose and that they should be better informed and educated for early diagnosis and treatment. The College supports patient care and out-reach groups.*

*We are planting the seeds for the next generation. Through engagement with medical officers and student surgical interest groups, we are cultivating the future of surgery. These young professionals represent our next 'spring' and with proper guidance, they will continue the cycle of growth and excellence.*

*When you are part of the College, you are part of a credible and unified voice.*

*Together, let's make the garden flourish.*

*Liew Ngoh Chin*



# Highlights of the College of Surgeons Annual Scientific Congress 2025 in Kuching

by Alexander Choon

*The College of Surgeons Annual Scientific Congress (CSAMM ASC) 2025 was successfully held from 13<sup>th</sup> to 15<sup>th</sup> June 2025 at the Borneo Convention Centre Kuching (BCKK), Sarawak, bringing together our surgical community in a dynamic exchange of knowledge, innovation, and fellowship.*

*The Congress started with the NOTSS workshop on 12<sup>th</sup> June 2025 at the Borneo Cultures Museum. The course was attended by 14 participants and helmed by Dr Yeap Chee Loong, with four other faculty members including Dr Simon Paterson Brown, Dr Kenneth Walker, Dr Andre Das and Professor Dr Lim Kean Ghee.*

*Among the academic highlights at the opening ceremony, was the prestigious 51<sup>st</sup> AM Ismail Oration, delivered by Professor Dato' Dr*

*April Camilla Roslani, with the citation read by Professor Dato' Dr Hanafiah Harunarashid. The M Balasegaram Award was presented to Professor Emeritus Dato' Dr Yip Cheng Har, in recognition of her distinguished contributions to surgery; the award citation was read by Professor Dr Shireen Anne Nah.*

*We congratulated Dr Clara Meerashini A/P Surendran, recipient of the Young Investigator Award, for her presentation titled **"Outcomes of Dunking Technique versus Three-layer Pancreaticojejunostomy: A Single Centre Experience."** The Best Poster Award was presented to Dr Adrian Wong Ling How, who shared a compelling case report on **"Trauma Associated Rapid Progression of a Giant Malignant Melanoma Arising from a Long-Standing Chest Wall Lesion"**.*



NOTSS Pre-Congress Workshop

## College Activities



Opening Ceremony Stage Party



M Balasegaram Trainer Award recipient  
Professor Emeritus Dato' Dr Yip Cheng Har



51<sup>st</sup> AM Ismail Orator  
Professor Dato' Dr April Camilla Roslani



Young Investigator Award Winner,  
Dr Clara Meerashini A/P Surendran



Best Poster Award Winner  
Dr Adrian Wong Ling How



## Gala Dinner, Hilton, Kuching

The Congress was also honoured by the presence of the Deputy Premier of Sarawak, The Honourable Datuk Amar Professor Dr Sim Kui Hian, who attended the Gala Dinner hosted at the Hilton Kuching, further highlighting the importance of our work to the broader Malaysian community.



*Gala Dinner Guest of Honour  
The Honourable Datuk Amar Professor Dr Sim Kui Hian*



*Non Technical Skills for Surgeons  
10-Year Anniversary*



*Asian surgeons in an array of traditional wear, with YB Datuk Amar Dr Sim Kui Hian, Deputy Premier of Sarawak Minister for Public Health, Housing, and Local Government Sarawak (fourth from right)*



*Warnatari Medic: a dance group  
formed by staff from Sarawak  
General Hospital*





MSMBC Lifetime Achievement Award Recipient  
Tan Sri Dato' Seri Dr Noor Hisham Abdullah

### Lifetime Achievement Award

A Lifetime Achievement Award was also presented to Tan Sri Dato' Seri Dr Noor Hisham Abdullah by the Malaysian Society for Metabolic and Bariatric Surgery.



Signing the Advocacy Statement for  
Sustainable Practices in Surgery

### Advocacy Statement for Sustainable Practices in Surgery

In a significant step toward global collaboration and environmental responsibility, the Advocacy Statement for Sustainable Practices in Surgery was jointly signed during the Congress by

- Dr Siow Sze Li,  
President, College of Surgeons of Malaysia,
- Professor Jose Rhoel De Leon,  
President, College of Surgeons of  
the Philippines, and
- Professor Thanyadej Nimmanwudipong,  
President, Royal College of Surgeons of  
Thailand.



Renewal of Memorandum of Understanding  
between CSAMM and BSI

### 10-Year Anniversary

The College also celebrated its 10-year anniversary of conducting the Non-Technical Skills for Surgeons (NOTSS) course.

### Memorandum of Understanding

The Memorandum of Understanding between the College of Surgeons of Malaysia and Breast Surgery International (BSI) was also renewed for a new term to run the Malaysian Breast and Endocrine Surgery Course (MBESC).

## Scientific Programme

*The scientific programme was the core strength of the Congress, comprising 28 symposia, 5 plenary lectures, and 1 pre-congress workshop. A total of 390 delegates, 80 speakers, and 12 organising committee members participated, representing 11 countries — testament to the College's growing regional and international engagement.*



## SMA Alhady Award

*The College extends its warmest congratulations to Dr Sivanesan Ramasamy for being named the SMA Alhady Award recipient.*

## Partners

*The Congress was also ably supported by our industry partners with 26 booths taken up and one hospitality suite.*



*Representatives from The College of Surgeons of Sri Lanka (left to right) Dr Duminda Ariyaratne (President), Dr Bawantha Gamage, Dr Wasantha Wijenayake and Dr Pramodh Chandrasinghe*



*SMA Alhady Award Recipient Dr Sivanesan Ramasamy.*



### Acknowledgements

The Council extends its heartfelt thanks to the organising committee, invited speakers, session chairs, and delegates who made the Congress a meaningful and memorable event. Your continued support and participation sustain the strength of our fraternity.

Special thanks and deepest appreciation are extended to Dr Luqman Mazlan, Chair of the Organising Committee, and Dr Hans Alexander Mahendran, Chair of the Scientific Committee, for their exceptional leadership and tireless efforts in delivering a seamless and meaningful Congress.

As we look ahead, we invite all members to mark their calendars for CSAMM ASC 2026, which will be held in Kuala Lumpur from 12th to 14th June 2026. We look forward to welcoming everyone once again for another excellent gathering of minds and spirit.



## LETTERS TO THE EDITOR

TELL US YOUR CONCERNS

*Share the advances in your field. Show us how you have done differently. Your ideas on how we can better educate, train or inspire our trainees and benefit the nation. Contribute to the next edition.*

CONTACT: [secretariat@csamm.asm.org.my](mailto:secretariat@csamm.asm.org.my)

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Membership email: [members@medicalacademies.org.my](mailto:members@medicalacademies.org.my)

# MSSS at the Congress

## Building Skills, Connections, and Confidence

by Praveena Vijaya Devan



Top View with Professor Rowan Parks



Explaining our appendectomy model to Professor Park Rowans



Dr Luqman dropped by our booth quickly and shared a few tips and tricks with us



Dr Syakir from UPM demonstrating a simplified intracorporeal suturing technique



Medical students honing their skills with the laparoscopic set - we are here to guide and improve



The **Malaysian Student's Surgical Society (MSSS)** was honoured to participate in this year's Annual Congress, marking another milestone in our journey as a national student-led organization dedicated to surgical education and professional development.

Founded in 2018, MSSS has grown into an active platform connecting medical students from across Malaysia who share an interest in surgery. Our society provides opportunities for students to sharpen basic surgical skills, learn from peer-to-peer teaching, and build valuable networks within the surgical community. We strive to prepare the next generation of surgeons not only through clinical knowledge but also through collaboration, leadership, and hands-on experience.

At the Congress, MSSS members had the opportunity to showcase a range of interactive stations, including **laparoscopic simulation skills, DIY appendectomy models, microsurgery training, and precision techniques using clown balloons.**



One with the legendary surgeons who visited our booth!



A fellow medical student practicing with the laparoscopic set under the supervision of Professor Anand

These stations drew attention from students, trainees, and consultants alike. Many surgeons were pleasantly surprised by the creative and resource-friendly ways students were developing their skills.

These demonstrations sparked meaningful conversations about innovation in surgical training and the importance of student-led initiatives. Beyond skills demonstrations, the Congress provided a valuable platform for networking. Our team engaged with consultants and specialists from various fields, many of whom shared their insights and encouragement.

Several surgeons even exchanged contact details, expressing interest in contributing to MSSS events in the future something we are excited to follow up on.



Starstruck moment



A moment with Dr Siow Sze Li — truly grateful to him and the entire CSAMM team for the opportunity!

Overall, participating in the Congress reaffirmed MSSS's core mission: to inspire, equip, and connect medical students who aspire to careers in surgery. We are grateful to CSAMM for providing this opportunity and look forward to expanding our role in supporting surgical education for students nationwide.

**Personal reflections by Praveena Vijaya Devan, President MSSS**

As a medical student attending the Congress, what stood out to me was not just the formal talks or skills workshops, but observing the surgeons themselves. Outside the operating theatre, they seemed to change completely. I watched senior surgeons get genuinely excited as they explored new technologies at the exhibition booths, almost like kids discovering a new toy. They asked questions, laughed, and enjoyed trying out innovations they had never seen before. During the fun activities, I was surprised to see how competitive some of them became, not just focused on winning but clearly enjoying the

chance to relax and bond with their colleagues. In between sessions, many consultants were busy catching up with old friends and training mates, reminding me that the surgical world is smaller and more connected than we often think.

One moment that made all of us smile was when a consultant joked that our MSSS team looked like we were from a James Bond movie, as we were all suited up in black. That light comment helped break the professional tension and made the atmosphere feel much friendlier. Beyond those casual moments, the Congress was also a huge academic learning experience. I left with pages of notes from forums and discussions covering real surgical challenges, ethics, innovations, leadership, and other topics we rarely learn about in medical school.

Overall, the Congress gave me a new understanding of what it means to be a surgeon, not just in skills but in mindset and community, and it reminded me that as students, we are already part of that journey.



*Our attempt at the RCSEd Creative Photo Challenge – proud to have won second place!*



# YOUNG VOICES IN SURGERY

## InciSioN Malaysia at CSAMM 2025

by *Kavin Rajendran*

The 2025 Annual Congress of the College of Surgeons of Malaysia wasn't just a gathering of seasoned professionals, it was also a space where young surgical minds found their voice, and we at InciSioN Malaysia were honoured to be part of it.

Our booth, vibrant with colour, curiosity, and conversations, became more than just a display. It became a meeting point where surgeons, students, and surgical enthusiasts came together to talk about global surgery, sustainable surgical systems, and the future of the field.

Our signature Global Surgery Pledge Wall turned out to be a surprise favourite. Many delegates stopped by to pen down their vision for surgery in the years ahead. It was heartening to see how strongly the themes of equity, innovation, and collaboration resonated with everyone.

Adding to the highlight of our presence,



InciSioN Malaysia is the national chapter of the International Student Surgical Network (InciSioN), a global movement that unites medical students, junior doctors, and surgical trainees in the pursuit of equitable, accessible, and safe surgical care for all.

Founded on the belief that surgery is a crucial component of universal health coverage, InciSioN Malaysia advocates for greater awareness and engagement in global surgery among future healthcare professionals.

Mr Kavin Rajendran (Vice President, InciSioN Malaysia) and Miss Francesca Ho had the honour of being invited as panelists for the "**Challenges & Opportunities of a Multi-Generational Workforce**" forum, organised by the Chapter of Women Surgeons.



### InciSioN MALAYSIA TEAM AT CSAMM 2025

The InciSioN Malaysia delegation standing strong and united at the 51<sup>st</sup> Annual Scientific Congress of the College of Surgeons, Academy of Medicine of Malaysia representing the voice of student surgeons in shaping the future of global surgery.

Our work spans advocacy, education, research, and capacity-building. Through interactive workshops, surgical simulations, outreach programmes, and collaborative events, we aim to inspire the next generation of healthcare leaders to think beyond borders and challenge inequities in surgical systems.

We are proud to represent the student voice in national and international conversations on global surgery, working alongside surgeons, institutions, and organisations to shape a more just and inclusive surgical future.

Contributing to such a thoughtful and empowering discussion was both a privilege and a reflection of how student voices are increasingly valued in shaping the future surgical landscape.

The best part? The spontaneous exchanges. From specialists sharing advice with curious students, to consultants taking photos in front of our pledge wall, there was a genuine energy of mentorship and encouragement that made the entire experience unforgettable. For many of our team members, this was their very first professional congress. Yet, instead of feeling out of place, they felt inspired, empowered, and welcomed. The opportunity to interact with surgical leaders, ask questions, and showcase

our initiatives was invaluable and something we will carry into our future careers. We are truly grateful to CSAMM for giving student voices a seat at the table.

This collaboration has reaffirmed our belief that global surgery is not just a distant ideal, it is a collective effort, and it starts with moments like these. We are excited for what's ahead, and we hope this is just the beginning of more meaningful collaborations between InciSioN and CSAMM.

*Thank you for having us and yes, we brought pictures!*



#### PANEL SESSION WITH KAVIN AND FRANCESCA

Student voices on the big stage. Mr Kavin Rajendran and Miss Francesca Ho represented InciSioN Malaysia at the forum on 'Challenges & Opportunities of a MultiGenerational Workforce'. A proud moment of advocacy and insight.



#### OVERHEAD SHOT OF BOOTH TEAM WITH POSTERS

From above, with pride. The InciSioN Malaysia team at CSAMM 2025 showcasing our two signature projects: the Surgical Pledge Wall and 'Ancient Wisdom, Modern Healing'. A snapshot of student leadership in action!"



#### INCISION BOOTH WITH ASTRONAUT AND DINO BALLOONS

A booth full of colour and curiosity. From dexterity labs to surgical trivia, the InciSioN Malaysia space was buzzing with interaction and inspiration.





### BRIDGING TRADITION & INNOVATION SURGICAL PLEDGE WALL

InciSioN Malaysia's hand-crafted Pledge Wall invited delegates to voice their hopes for the future of surgery from gender equity and robotics to patient safety and surgical innovation. A tree filled with handwritten promises stood as a visual symbol of commitment and progress. Created by Mr Kavin Rajendran.



### FAMILY WITH INSTAGRAM-STYLE FRAME AND BALLOONS

Smiles, stories, and surgery! Visitors of all ages stopped by the InciSioN Malaysia booth at CSAMM 2025 proving that curiosity and joy have no age limit. Our Instagram frame was a photo favourite!



### HERBAL REMEDY STATION INTERACTION

"Ancient Wisdom, Modern Healing"

Our interactive booth allowed attendees to explore traditional remedies with a modern twist sparking engaging conversations on integrative care.



### EDUCATIONAL & SURGICAL BOOTH

Every stitch tells a story. Our suturing practice station was a crowd-puller where future surgeons got to try their hands at fine motor skill training in a relaxed, supportive environment.



### SUTURING DEMO WITH FOAM BLOCKS

Precision meets practice. Delegates got hands-on at our suturing station a fun yet educational way to appreciate the skills behind every stitch in surgery.

# GOING GREEN

## AT THE COLLEGE OF SURGEONS

by Professor Dr Shireen Anne Nah

*Surgery is one of the largest contributors to healthcare's carbon footprint. As surgeons, an easy way to care for our planet and reduce our environmental impact is by running our conferences and meetings as 'green' as we can!*

*Many of you who regularly attend our annual congress may have noticed changes in how we*

*run our events, from removing single use plastic cutlery to using biodegradable paper name tags and minimising paper waste from printing large programmes.*

*Surgeons love learning and enhancing our skills - as we organise and participate in workshops, let's commit to making them sustainable!*





# Joint Advocacy Statement

## ASEAN FEDERATION OF SURGICAL COLLEGES

Signed on the occasion of the Annual Scientific Congress of the College of Surgeons, Academy of Medicine of Malaysia, 13<sup>th</sup> June 2025, Borneo Convention Centre, Kuching, Sarawak, Malaysia.

*We, the undersigned representatives of the ASEAN Federation of Surgical Colleges, gathered in Kuching, Sarawak, for the 51<sup>st</sup> Annual Scientific Congress of the College of Surgeons, Academy of Medicine of Malaysia, collectively affirm our commitment to advancing sustainability in surgical practice, education, and healthcare systems throughout the region.*

**RECOGNIZING** - the urgent need to address the environmental impact of surgical services;

**ACKNOWLEDGING** - the shared responsibility of the surgical community to reduce waste, conserve resources, and mitigate climate change;

**UNDERSTANDING** - that sustainable practices must be equitable, accessible, and adaptable to local contexts in our diverse region;

### WE HEREBY COMMIT TO:

#### 1. CHAMPION SUSTAINABLE SURGICAL PRACTICES

- Reduce surgical waste through reuse, biodegradable materials, and optimized resource use.
- Collaborate across departments to embed sustainability into perioperative care.

#### 2. MINIMISE SURGERY'S CARBON FOOTPRINT

- Promote energy and water efficiency, reduce single-use items, and adopt circular economy principles.
- Integrate sustainability in procurement, clinical decisions, and hospital operations.

#### 3. INTEGRATE SUSTAINABILITY INTO SURGICAL EDUCATION

- Embed environmental stewardship in training and professional development.
- Make sustainability a core value of surgical professionalism.

#### 4. BUILD A CULTURE OF SUSTAINABILITY

- Plan sustainable events, phase out single-use plastics where appropriate, and empower sustainability champions.
- Lead by example through responsible practices inside and outside the operating theatre.

#### 5. FOSTER REGIONAL COLLABORATION

- Share knowledge, best practices, and research to develop a unified ASEAN approach to sustainable surgery.

#### 6. ENGAGE KEY STAKEHOLDERS

- Collaborate with hospitals, policymakers, industry, academia, and patients to drive innovation and public awareness.
- Advocate for green surgical solutions and sustainable healthcare systems. We believe that advancing sustainability in surgery is essential to the long-term health of our patients, communities, and planet. Through this statement, we affirm our shared purpose and regional solidarity in leading this crucial transformation.



# THE FINE LINE BETWEEN LIFE AND DEATH:

## Complications with High Altitude Medicine (HAM)

*by Datuk Dr Nagarajan T Vellasamy  
a consultant general surgeon who retired from KKM in January 2024,  
but has since embarked on a myriad of interesting travelling adventures,  
up to the mountains, down to the oceans.*



When trekking high-altitude mountains, the risks extend far beyond injuries and hypothermic conditions. Two major health issues, in addition to injuries, are Acute Mountain Sickness (AMS) and Extreme Exhaustion (EE). While many trekkers are familiar with AMS, fewer realise the dangers posed by extreme exhaustion, which can also turn deadly at high altitudes.

AMS, a condition most trekkers are aware of, results from poor acclimatisation to low-oxygen environments. On the other hand, extreme exhaustion often goes unnoticed but can be just as dangerous. Both conditions share similar symptoms: severe fatigue, breathlessness, and physical weakness. However, AMS may present with more severe symptoms such as difficulty in breathing and pounding headaches, whereas extreme exhaustion results from pushing the body beyond its limits. Trekkers experiencing extreme exhaustion may feel so tired that they cannot move, yet they remain fully conscious.

The causes behind these conditions differ. AMS is caused by the body's inability to adapt to low oxygen levels, while extreme exhaustion stems from muscle fatigue and the depletion of fluids and electrolytes. Despite these variations, if the right steps like descent and rest are not performed right away, either situation has the potential to be lethal.

As a mid-level high-altitude trekking enthusiast, I have encountered both AMS and extreme exhaustion firsthand, and I've assisted fellow hikers facing these challenges.

Let me share two experiences that highlight the seriousness of these conditions. On a trek to Everest Base Camp (EBC), I was forced to discontinue my ascent at 4,410 meters when a fellow hiker developed AMS, which progressed to High Altitude Pulmonary Edema (HAPE).

*...AMS is caused by the body's inability to adapt to low oxygen levels, while extreme exhaustion stems from muscle fatigue and the depletion of fluids and electrolytes...*

HAPE, a severe and potentially fatal form of AMS, caused fluid to accumulate in her lungs. Recognising the urgency, we decided to descend immediately. A helicopter was called to evacuate her to a lower altitude, which undoubtedly saved her life. No medication was needed just the swift decision to descend, sparing no time.

Another incident occurred during a hike up Mt. Fuji, where a fellow trekker suffered from extreme exhaustion between the 7th and 8th stations, at an altitude of 2,800 to 3,100 meters. He could barely move due to muscle fatigue, but his mind remained clear. Recognizing that further ascent could have been fatal, I walked him to Station 8, where we rested, rehydrated, and waited for his condition to improve. He descended later, after regaining strength.

One common issue I have noticed among trekkers, particularly those accustomed to rainforest hiking, is the rush to ascend quickly. In rainforests, people often race to the peak to avoid the heat and humidity. However, in high-altitude environments, this approach can be deadly. A steady and careful ascent is crucial to prevent extreme tiredness and altitude sickness (AMS) by allowing the body to adjust to the thinning air.

The mountains will always exist, but our lives are incredibly precious. Understanding the risks of AMS and extreme exhaustion and training accordingly can make the difference between a life-threatening emergency and a safe, exhilarating experience at high altitude.

# EAO Travers – a record of an early operation

by Professor Dr Lim Kean Ghee

Those who are familiar with old KL will know about Jalan Travers. It is beside Sentral Station and there is a Lorong Travers and Jalan Bukit Travers branching from it. It is named after Ernest Aston Ortho Travers who came in 1887 first as Resident Surgeon in Sungai Ujong. But it was Kuala Lumpur he made his mark when he was made Resident Surgeon in Selangor in 1889. In 1909 he went into private practice.

The famous story about him happened some time after that when he was notified about a patient 'outstation' who needed an operation and was very ill. Accompanied by an assistant to give the anaesthetic, he drove over to see the patient. He decided the woman indeed needed the operation. We do not know what kind of operation it might have been, whether incision and drainage, an amputation or even something else. He found the woman too ill to be moved so he decided to do the operation on the spot! However, there was insufficient light in the attap hut. Looking around he asked for part of the roof to be removed. JHM Robson who recorded this account in his 'Records and Recollections, 1889-1934' said the owner remonstrated saying "But it may rain".

**"Never mind"** said Travers, **"we can risk that"**. So part of the roof was pulled off and the operation was performed successfully. Luckily there was no rain.

Travers was born in 1864 and had obtained his MRCS and LRCS. One did not have to have an FRCS to independently operate in those days.

Robson said of him **'He was the life and soul of the European community here – to say nothing on his influence on the Asiatics'**.

Travers was **'uncommonly shrewd'**, temperate in his habits, charming in his manner, never idle, a good surgeon and an excellent administrator. **'It is**



EAO Travers

(National Archives of Malaysia: Accession No. 2001/0022889g1)

**hardly likely that any European will ever occupy quite the same position in the general life of Kuala Lumpur as Travers did'.**

Travers was a member of most of the local clubs and institutions. He was a keen sportsman and went game hunting. It was said he once shot a tiger in the middle of Kuala Lumpur. He was a close friend of Loke Yew and shared his enthusiasm of the newly introduced novelty of motoring. With the boom in business in Kuala Lumpur he was able to make a sizable fortune and returned to retire in England. However, hoping to double his fortune on the London Stock Exchange he instead lost the lot.

Travers then returned to Malaya for a second stint in 1921. In his second **'life'** he championed treatment of leprosy and laid the seeds for the founding the Sungai Buloh leprosarium. He investigated and introduced leprosy treatment using **'ta ma feng'** or **'ta feng zi'** (*Hydnocarpus anthelmintica*) from traditional Chinese medicine.

Travers presented his ideas for treatment of lepers in the Fifth Biennial Congress of Tropical Medicine in Singapore in 1923 and published it in *Proceedings of the Royal Society of Medicine* in 1926. He retired in 1925 when he reached the age of 61 years and did not see the opening of the Sungai Buloh settlement in 1930.

Travers returned to England and died there in 1934, but a marble tablet was erected in his memory in St Mary's Cathedral in Kuala Lumpur in 1937.



# From Utrecht with Growth: A Paediatric Surgeon's Story of Learning, Loss and Life Abroad

by Dr John Emmanuel

In 2024, I had the opportunity to undergo an international fellowship in Paediatric Surgical Oncology under the Hadiah Latihan Persekutuan (HLP) programme by the Ministry of Health Malaysia. The nine-month training took place in Utrecht, Netherlands, across two prestigious centres – the Princess Máxima Centre for Paediatric Oncology (6 months) and the Wilhelmina Children's Hospital (UMCU) (3 months).

Both centres offered eye-opening experiences in clinical exposure, advanced treatment methods, and paediatric Minimally Invasive Surgery (MIS). Princess Máxima Centre, the largest paediatric cancer centre in Europe, stood out with its unique model of holistic care that doesn't just treat cancer but also prioritises quality of life. Wilhelmina Children's Hospital

recognised as a training centre for MIS by the European Paediatric Surgeons' Association, further enhanced my understanding and skills in this evolving field.

## A Holistic, Patient-Centred Approach at Princess Máxima Centre

A standout feature of this fellowship was witnessing how deeply holistic care was embedded at the Princess Máxima Centre. From its very inception, the board of directors enlisted not only healthcare professionals and researchers but also psychologists, play therapists, social workers, parents, former patients, architects, and engineers. Together, they co-designed a hospital that is both highly functional and genuinely child-friendly which also incorporated all aspects of daily life.



The daily "mandatory" morning coffee session with the team that will feature any topic from work, travel, politics, sports etc

The bi-weekly Tumour Board for Solid Tumours truly enhanced the educational experience where each patient was carefully evaluated and discussed to ensure adherence to current management strategies and protocols.



*Assisting a laparoscopic nephrectomy for unilateral Wilms Tumour under the watchful supervision of Mr Max Pachl from Birmingham Children's Hospital.*

*The result was an environment where wards resemble small apartments, complete with balconies so children and their parents could enjoy fresh air when the weather allowed. State-of-the-art AV-equipped meeting rooms support seamless discussions, while indoor play spaces, cycling/skating hallways, foosball tables, and parent-child lounges (Ronald McDonald Living Rooms) make the hospital feel less clinical and more like a second home.*

*There are also play shelters for siblings, neurosensory rooms, a well-stocked children's library, music studios, and construction corners where children can build and create freely. Weekly activities - like live music, puppet shows, art lessons, and theatre - bring joy into the lives of children receiving care.*

*There are interconnected clinical, research, and rest areas to encourage collaboration, all equipped with coffee machines and snacks to foster continuous idea exchange. In addition, in-house researchers, doctors, and other healthcare professionals hold regular joint sessions aimed at improving both clinical and non-clinical aspects of care and overall patient management.*

*The centre also maintains an in-house joint management body comprising various healthcare workers, non-clinical staff, and parents, who meet regularly to discuss policies, service delivery, and patient-centred improvements. This ensures that feedback from all stakeholders is incorporated into ongoing development and operations.*



### Clinical Learning, Nursing Leadership, and a Culture of Support

*From a clinical standpoint, this fellowship was packed with positives. I was exposed to cutting-edge surgical techniques, innovative approaches to cancer care, and ongoing research that is setting the pace for future developments. One of the most striking aspects was how collaboration and team dynamics were embedded into daily practice. Each team member had clearly defined roles, with opportunities distributed fairly, whether it was for career advancement, skill development, or leadership growth.*

*A unique strength of the environment was how junior consultants were empowered to lead. For instance, when one junior doctor expressed interest in performing laparoscopic nephrectomies for Wilms tumour, the senior consultant who lacked expertise in this coordinated with a UK-based expert to come over and mentor these procedures, ensuring they were carried out safely and correctly.*

*Junior consultants were the primary surgeons in most cases, with senior support provided when needed - either by request or if a case required escalation. Hierarchy did not hinder contribution - all team members, regardless of rank, were encouraged to voice opinions, share insights, and be involved in clinical and non-clinical decision-making. It was an inclusive, respectful, and collaborative workplace. Work schedules weren't tightly regulated with the focus being on efficiency and productivity.*

*Importantly, nurses played a leading role in the multidisciplinary teams. They were central to hands-on patient care, participated actively in daily clinical rounds, and were instrumental*



*With Rana, a paediatric surgeon from Turkey and now a good friend, who underwent a similar fellowship at Princess Maxima Centre for four months.*

*in highlighting both acute and non-acute issues. They often initiated early management, especially in acute settings, and provided continuity of care through outpatient support. Their contributions were critical to ensuring timely interventions and comprehensive care delivery.*

### The Personal Cost of Being Far from Home

*While the professional experience was deeply enriching, one of the hardest parts of doing a fellowship abroad revealed itself in an incredibly painful way. My mother fell ill and passed away in Malaysia while I was in The Netherlands.*

*Although I managed to see her briefly during her illness, I was not there during her final moments. Due to travel constraints, I only arrived back home around 24 hours after her passing. That loss - being far away during such a pivotal time - was one of the most emotionally difficult aspects of this journey. It's something you can't*

really prepare for, and it serves as a reminder of the personal sacrifices that come with pursuing training overseas.

Beyond such moments of profound loss, being far from home also meant not being physically present for other important matters - medical emergencies involving loved ones, day-to-day family responsibilities, or just being available to provide emotional and practical support. There is also the risk of missing key milestones, celebrations, or even crises that shape the lives of those closest to you. This disconnection can be an ongoing source of emotional weight, even when professional fulfilment is high.

## Language, Housing, and Financial Challenges Abroad

One of the challenges I faced early on was the language barrier. I had taken a short Dutch course before going, but it wasn't sufficient for everyday clinical conversations. While many Dutch people speak English, it was used sparingly in medical settings unless I initiated the conversation. I was fortunate to have helpful colleagues who translated clinical discussions regularly, which made day-to-day work more manageable.

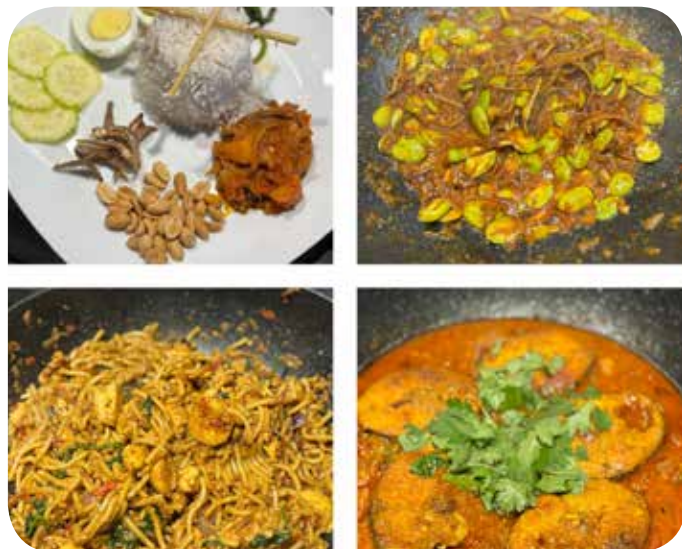
Life outside the hospital had its own set of highs and hurdles. The biggest challenge was finding housing - a well-known issue in the Netherlands right now, with high demand and short-term leases being the norm. In nine months, I had to move five times. At one point, I stayed with a colleague in Nijmegen, commuting 1.5 hours each way. The longest I had a stable rental was five months - pure luck, thanks to a hospital staffer on an extended Asia tour. Rental costs ranged from €1,500 to €2,700, a tough pill to swallow even with the HLP allowance.

Then came banking - a story in itself. Almost all transactions in Utrecht are cashless, and certain places don't accept Visa or Mastercard. A local bank card is a must, and opening a local bank account turned out to be an unexpectedly bureaucratic and time-consuming process.

The financial burden was further compounded by the cost of travelling back to Malaysia, particularly for emergencies. Each round trip cost between RM5,000 to RM8,000, making it a difficult but sometimes necessary decision. Combined with high living costs, this made budgeting a constant concern. I have depleted my savings in the pursuit of this nine month fellowship.

## Food, Community and Making Connections

As a Malaysian, adjusting to Dutch food was another big shift. While there are diverse restaurants, eating out is expensive - around €25 to €45 per meal. The cost and craving for home flavours led me to level up my cooking skills. From nasi lemak to mamak mee goreng and Indian curries, I now cook more confidently than ever before.



My journey in the kitchen which started in the last 9 months has been nothing short of rewarding as well.



Making new social connections was another hurdle. Dutch social circles can be harder to break into, and while colleagues and people from church were friendly, relationships mostly stayed within those structured spaces. Luckily, I overlapped with a fellow paediatric surgeon from Turkey. Facing similar challenges, we learned from and supported each other throughout.

To widen my social circle, I joined the Malaysian Association of The Netherlands (MANL) and took part in several events like their annual dinner and Chinese New Year celebrations. I was honoured to meet HE Dato Roseli Bin Abdul, the Malaysian Ambassador to The Netherlands - an approachable and down-to-earth man. Through MANL, I also connected with other Malaysians and had a few comforting meals with them in various Dutch cities.

### Travelling and Finding Balance

Europe's connected transport system gave me the chance to explore nearby cities and countries. With family spread across the UK and other parts of Europe, I could enjoy mini getaways without worrying about accommodation or food

expenses - only the travel costs. It was a great way to balance clinical training with personal time and cultural exploration.

Travelling during this fellowship wasn't just a break from work - it was a vital part of personal growth. Each trip exposed me to new cultures, people, and environments, expanding my world view and deepening my appreciation for the diversity that we should embrace and appreciate back home.

### Final Thoughts: Growth Through Experience

Despite the challenges - language barriers, cost of living, housing issues, emotional distance from family - this fellowship was a transformative experience.

It broadened my clinical expertise, gave me insight into different healthcare systems, and offered personal growth in ways I hadn't expected.

Would I do it again? Absolutely - but with better preparation. No regrets.



Joining the Chinese New Year Celebration by the Malaysian Association of The Netherlands (MANL) at Restoran Kampong Kita, Rotterdam.



☺☺...To see far and  
beyond, we must stand  
high and above...☺☺



# A Fulfilling and Enlightening Fellowship in Japan:

## My Journey into Minimally Invasive (MIS) Robotic HPB Surgery with Professor Go Wakabayashi (2024-2025)

by Dr Jonathan Seak Chen Ken  
General Surgeon and Hepatobiliary Pancreatic Fellow

As a young surgeon, certain moments shape your career, challenging and inspiring you. For me, one of these moments came during my fellowship at Ageo Central General Hospital in Japan, where I trained under Professor Go Wakabayashi. As the first Malaysian to formally pursue a Hepato-Pancreato-Biliary (HPB) surgery fellowship in Japan, it was a remarkable opportunity in a country renowned globally for its medical excellence.

Japan's leadership in minimally invasive surgery (MIS) provided the perfect environment to refine my skills in robotic-assisted HPB surgery. Professor Wakabayashi, a world-renowned expert in this field, introduced me

“...small things  
matter...”

to a precision-driven approach that resonated deeply with me. His philosophy, "Small things matter", emphasised meticulous preparation and attention to detail - principles I adopted both in my technical work and overall mindset. Under Professor Wakabayashi's guidance, I participated in complex surgeries, from robotic-assisted liver resections to pancreaticoduodenectomies.

I learned to approach each surgery with a calm, methodical mindset, striving for perfection while maintaining the human element of surgery, working with a team of highly skilled professionals who were passionate about their craft was inspiring.

Beyond mastering technical skills, I gained experience integrating advance technologies such as 3D reconstruction imaging, Indocyanine Green (ICG) navigation, and robotic systems into my practice. These tools enhanced surgical precision and efficiency, while comprehensive pre-operative planning and meticulous intraoperative execution reinforced the importance of attention to the smallest details.



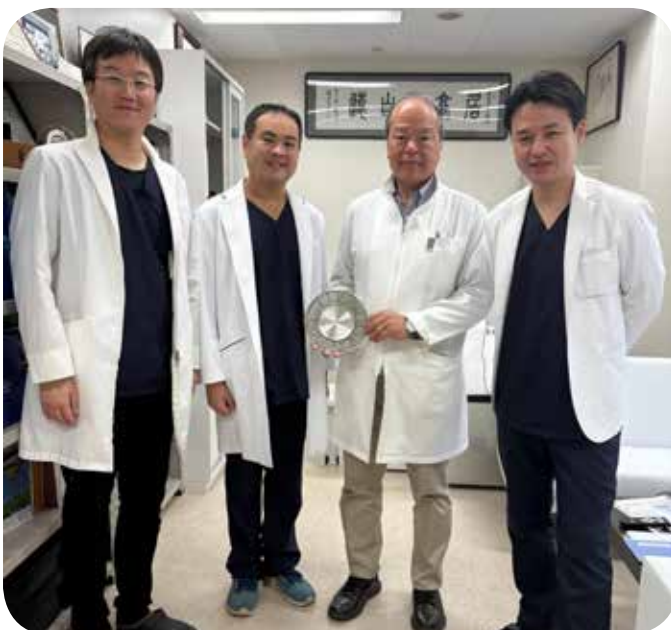
With Professor Wakabayashi

However, my journey wasn't without challenges. Language and cultural differences, along with the pressure to meet high expectations, tested my resilience. Yet, under Professor Wakabayashi's mentorship, I learned the value of patience, hard work, and embracing mistakes as integral to the learning process. Mastery in surgery - and in life - requires unwavering dedication and a willingness to learn from every experience, both good and bad.

A particularly profound lesson was Japan's deeply personalised approach to patient care, especially for the elderly. I witnessed patients over 90 years old undergoing complex surgeries and recover remarkably well. Every patient, regardless of age, received tailored care with a focus on both their medical and emotional well-being. This holistic approach emphasises respect for the patient's dignity.



Team photo



Presenting a token of appreciation to Professor  
(our famed Royal Selangor tablet)



Presented with Certificate of completion



There is a strong, supportive team, including dietician, physiotherapist, anaesthetist, and counsellor, who are involved throughout the entire perioperative period. In-depth discussions and counselling are conducted by the professor to understand the patient's wishes and explore their requests. The decision to proceed with surgery, including the choice of approach, is often tailored within viable limits to meet the patient's preferences. The collaborative environment at Ageo Central General Hospital was crucial to my development. The respect and mutual care within the team created a supportive atmosphere, making me feel at home. I truly felt part of a global network, united by a shared commitment to making a meaningful difference.



Travelling in Kawaguchigo



Nomikai and Karaoke

Beyond my surgical training, I had the chance to explore Japan's beauty, culture, and its relentless pursuit of excellence. These experiences deepened my understanding of the values driving Japan's medical advancements, and I found myself drawing parallels between the meticulous craftsmanship of Japanese artisans and the precision required in the operating room.

As for favoured pastimes, I can say it is all about drinking and karaoke after work! The team enjoys these activities almost every fortnight. These moments allow for more personal bonding, and we try to celebrate special occasions, such as welcoming parties, first surgeries, New Year, summer celebrations, and farewells.

However, Japanese culture is quite strict about keeping work and personal entertainment separate. It is during these times that we can truly relax and unwind.

This fellowship has been a cornerstone of my surgical journey. The lessons learned from Professor Wakabayashi, the skills developed, and the values embraced will guide me as I return to Malaysia. I am committed to applying these insights to my practice, always striving to provide the best care for my patients and contribute to the evolving field of HPB surgery.

As Professor Wakabayashi often says, "To see far and beyond, we must stand high and above". Through this fellowship, I have had the privilege of learning Robotic MIS HPB surgery from his visionary perspective, shaping my career for years to come.

# FROM PADDLE TO PORT

## How Pickleball Reflects the Precision of Laparoscopic Surgery

*by Dr Siow Sze Li, Immediate Past President CSAMM*





Pickleball and laparoscopic surgery may seem unrelated at first glance, but both demand a unique blend of precision, coordination, and composure under pressure. Whether it is the fast-paced rhythm of a rally or the steady pace of a minimally invasive procedure, both disciplines reflect the art of controlled movement and strategic thinking.

In laparoscopic surgery, the surgeon operates through small incisions using long instruments while watching a monitor - relying on refined hand-eye coordination, precise instrument control, and a steady posture.

Similarly, pickleball requires swift, intentional footwork and agile hand skills. Players must move efficiently to position themselves for each shot while adjusting grip and paddle angle with finesse - just as surgeons align their instruments delicately through narrow ports. In both, the synergy between foot placement and hand precision is key to smooth, controlled performance.

Both also rely on real-time decision-making. A sharp drop shot or unexpected bleeding demands immediate, calm response. The ability to anticipate, adapt, and act - without hesitation - is crucial whether you are in the operating theatre or mid-rally.

Preparation is another shared cornerstone. Surgeons rehearse procedures mentally, study imaging, and set up meticulously. Pickleball players drill footwork, refine strokes, and visualise play strategies. Neither arena leaves room for guesswork - success lies in deliberate, thoughtful practice.

“...the ability to anticipate, adapt, and act - without hesitation - is crucial whether you’re in the operating theatre or mid-rally...”

Communication and teamwork matter, too. A doubles partner on the court or a skilled scrub nurse in the OR - both must be in sync with the lead’s rhythm and intent. Mutual trust and clear communication translate to better outcomes in both settings.

Finally, both require stamina - physical and mental. Long hours in surgery and back-to-back games on the court test endurance, posture, and focus. Fatigue challenges form and decision-making. Conditioning, mindfulness, and recovery are vital for peak performance.

In the end, pickleball is more than a sport - it is a mirror to the principles of minimally invasive surgery. Both reward precision, patience, and the pursuit of mastery - one point, one stitch at a time.





*1<sup>st</sup> NOTSS session with the local surgical trainees, 31 May 2015*



*Inaugural NOTSS Masterclass in Malaysia, in University of Malaya, 1 June 2015*



# 10 years of Non-Technical Skills for Surgeons (NOTSS) in Malaysia

*by Dr Yeap Chee Loong, National NOTSS Lead & Co-Chairman RCSEd NOTSS International Subgroup*

*In the evolving landscape of surgical practice, much has been written about the importance of developing good technical skills, including hand–eye coordination, manual dexterity, and other focused psychomotor skills in a “craft” specialty like surgery. However, it was then realised that technical skills alone are no longer sufficient to ensure successful patient outcomes. Being a good surgeon is more than just having a good “pair of hands”, it is about being situationally aware, an agile decision-maker, and a good team player, who listens and communicates well with patients and colleagues and empowers them.*

*The “non-technical skills” has since been recognised as the missing component. Non-Technical Skills for Surgeons (NOTSS) can be defined as the cognitive and social skills which underpin optimal surgical performance (Yule et al. 2006). They include Situation Awareness, Decision-Making, Communication and Teamwork, and Leadership.*

*In 2003, a group of surgeons and clinical psychologists in Scotland started a project funded by the Royal College of Surgeons of Edinburgh (RCSEd) and University of Aberdeen to look at this component. They managed to design a simple, yet a very powerful NOTSS framework. It resulted from robust mixed methods studies. It’s a “product” by the surgeons for the surgeons. This NOTSS framework has since emerged as a vital component of surgical education and practice, emphasising the importance of cognitive, social, and management skills in addition to procedural ability. The RCSEd commemorated the 20<sup>th</sup> NOTSS anniversary in 2023.*

*In May 2015, one of the pioneers of NOTSS frame work, Mr Simon Paterson-Brown was invited to conduct the first and second NOTSS session in Malaysia. Since then, the local faculty members started to conduct the masterclasses with high standard regularly under the guidance of Mr Paterson-Brown. The feedback from the attendees has always been positive, and good words started to spread around like wild fire locally.*

*In August 2019, the College of Surgeons of Malaysia (CSAMM) formalised an agreement to continue running NOTSS courses in Malaysia. This will enable us to fulfil curriculum requirements in a value-based way. Later on, the non-technical skills were also incorporated into our national curriculum of surgical training.*

*The RCSEd started to restructure the NOTSS Committee in 2020, and Malaysia was recognised as an international hub for NOTSS outside UK. The local faculty members started running NOTSS masterclasses around the region, namely Indonesia, Singapore, Philippines, India and Nepal, with the long term objectives of assisting those countries in establishing the NOTSS programmes.*

*Year 2025 marks the 10<sup>th</sup> anniversary of NOTSS in Malaysia. To date, CSAMM has conducted nearly 30 NOTSS masterclasses locally, with nearly 800 participants. As we reflect on this anniversary, let us look forward to the next chapter, filled with continued growth and success, as we celebrate this milestone and the future we will build together.*



*Signing of MOA between RCSEd and CSAMM on NOITSS collaboration, Aug 2019*



*Renewal of MOA between RCSEd and CSAMM in 2022*



## Training & Professionalism



*Virtually NOTSS Masterclass during the Covid-19 pandemic*



*NOTSS masterclass in Faculty of Medicine, University of Malaya*





“...being a good surgeon is more than just having a good “pair of hands”...”

(above)  
First NOTSS masterclass  
in Indonesia, conducted in  
Bandung, Sept 2023



(above)  
First NOTSS masterclass  
in Philippine, conducted in  
Manila, Dec 2022



(above)  
NOTSS masterclass  
conducted in Kolkata, India,  
Aug 2024

NOTSS masterclass  
conducted in  
Bangalore, India,  
Aug 2024





# Clinical Ethics Consultation Skills Workshop Malaysia 2025

## A Resounding Success!

*by Dr Tan Hui Siu*

**Note from the Editor:** In our last edition of *The Cutting Edge*, Dr Tan Hui Siu wrote on the concepts of clinical ethics that must underpin all our decisions as surgeons committed to the highest standards of care. Six months on, we are proud to report on a fruitful collaboration supported by the College of Surgeons AMM.

Following successful workshops at Universiti Malaya Medical Centre (2023) and Selangor (2024), the 3<sup>rd</sup> Clinical Ethics Consultation Skills Workshop Malaysia 2025 was held with outstanding participation.

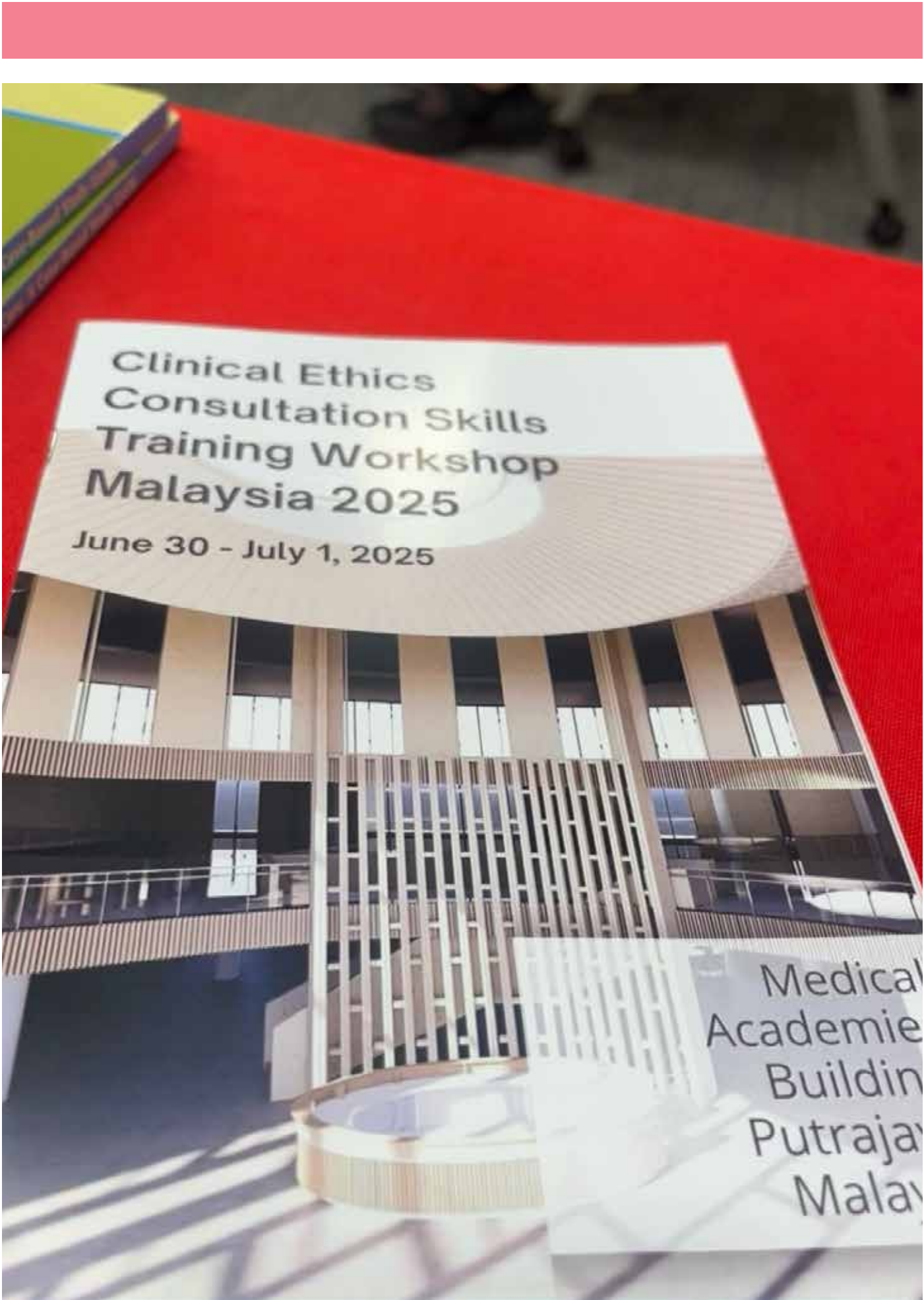
Organised by the Academy of Medicine of Malaysia (AMM) in collaboration with the Harvard Medical School Center for Bioethics and the Hospital Ethics Support Services (HESS) at Hospital Ampang, the workshop brought together an inspiring assembly of local and international experts, with 75 senior clinicians, administrators, and CEC members from across Malaysia participating in two days of dynamic engagement and learning.

It was a distinct honour to host Dr Rebecca Brendel (MD, JD), Director of the Harvard Medical School Center for Bioethics - widely admired for her bold yet empathetic leadership - as part of the Harvard Bioethics Asian Tour. Also presenting were Dr Roger Chung (CUHK Centre for Bioethics), Dr Reina Ozeki-Hayashi (Tohoku University), Dr Ardita Pramudani (Diponegoro University), Dr Hajung Lee (University of Puget Sound), and Dr Chan Mei Yoke (KK Hospital Singapore & NUS Centre for Biomedical Ethics).

Their lectures covered an array of thought-provoking topics including relational autonomy and empowerment, attachment in the patient-physician relationship, ethics education grounded in virtues and Pancasila, and the roles of health professionals in advocacy and justice.

A particularly energising element of the workshop was the rich interdisciplinary representation - spanning emergency medicine, surgery, paediatrics, anaesthesiology, palliative care, psychiatry, obstetrics & gynaecology, ENT, medical social work, and more - across public, university, and private sectors.

The workshop was co-chaired by Professor Zilfalil bin Alwi and Dr Tan Hui Siu, with unwavering support from the Ethical Professional Practice Committee of AMM, including Professor Shaik Farid, Professor Azarinah, Professor Lee Yong Yeh, Professor Shireen Anne Nah, and others. Behind the scenes, tireless dedication by the Academy team Molly Kong, Margaret Choo and Melvin, ensured that every logistical detail fell into place. A special mention goes to the HESS team - Wanjun Ng, Kah Hee, Shahrul Liza, Tini, and Nurul Azwa - who kept the packed programme running like clockwork.



*Clinical Ethics Workshop held at the Medical Academies Building, Putrajaya*



## Training & Professionalism

Local presenters Associate Professor Mark Tan, Associate Professor Erwin J Khoo, Associate Professor Azanna Ahmad Kamar, and Dr Chong Lee Ai added their signature '**ethics flair**' to the sessions, while senior clinicians Dr Richard Lim and Dr Noor Airini brought deep clinical wisdom to discussions on everyday ethical dilemmas.

As the field of clinical ethics continues to grow locally, the spirit of collaboration and the thirst for learning displayed at this workshop were

truly encouraging. Plans are already underway to offer the workshop regularly for Clinical Ethics Committee (CEC) members throughout Malaysia. For future participation or enquiries, please contact HESS at [ethicsampang@gmail.com](mailto:ethicsampang@gmail.com) or AMM at [secretariat@acadmed.org](mailto:secretariat@acadmed.org).

The organisers extend heartfelt thanks to all faculty, participants, and supporters who made this workshop not only possible but truly memorable.



Faculty and participants at the Clinical Ethics Workshop



Faculty dinner by the lake

# IN MEMORIAM

## DR YOONG BOON KOON

*— A Pioneer in Liver  
Transplantation in Malaysia*

*By Dr Lee Yeong Sing,  
Associate Professor Koh Peng Soon &  
Professor Shireen Anne Nah*

Dr Yoong Boon Koon was born on 7<sup>th</sup> July 1971 in Selayang, Selangor. He began his education at Sekolah Jenis Kebangsaan (Cina) Selayang Baru, completing his primary schooling in 1983. He later continued his studies in Singapore, completing his pre-university education at Catholic Junior College before pursuing a medical degree at the University of New South Wales, Australia. He graduated in 1996 and completed his housemanship at Concord Repatriation General Hospital, Australia, in 1998.

Upon returning to Malaysia, Dr Yoong served as a medical officer at Hospital Kajang, followed by Hospital Selayang, where he remained until 2002.

Driven by a deep passion for surgery, he then pursued postgraduate surgical training at Universiti Malaya (UM) as a private candidate. However, as he did not have the requisite SPM qualification in Bahasa Malaysia, he could not be formally appointed as an academic staff and, extraordinarily, served without a salary for several years until he eventually passed the exam.



In 2006, Dr Yoong completed his Master of Surgery and went on to subspecialise in Hepato-Pancreato-Biliary (HPB) and liver transplantation at Queen Mary Hospital, Hong Kong, under the mentorship of the renowned Professor Dr Lo Chung-Mau and Professor Dr Fan Sheung-Tat—both giants in the field, with Professor Lo now serving as the Secretary for Health of Hong Kong.

Upon his return to Malaysia in 2009, Dr Yoong established the HPB Surgery Unit at Universiti Malaya Medical Centre (UMMC). At the time, liver transplantation in Malaysia was limited, and many patients remained reliant on overseas centres for life-saving surgery. Inspired by the success of the living donor liver transplant (LDLT) programme in Hong Kong, Dr Yoong envisioned a similar programme in Malaysia. Pulling together a multidisciplinary team of adult and paediatric services, and with strong support from hospital management, UMMC launched its Liver Transplantation Programme in September 2016. In 2017, the Liver Transplant Team performed its first adult right lobe LDLT under Dr Yoong's leadership.



## *In Memoriam*



*Liver transplant team in Shanghai 2019 visiting Renji Hospital for clinical observation*



*With the UMMC HPB team - spending time not just in the OT but also outside!*



*Dinner with the UMMC transplant team*

UMMC thus became the third centre in Malaysia to perform liver transplantation, after Subang Jaya Medical Centre (1984) and Hospital Selayang (2004). The adult LDLT programme officially began in 2017, followed by the paediatric programme in 2019. As of today, UMMC has completed 32 liver transplants. Dr Yoong deeply valued the collaboration with Queen Mary Hospital, University of Hong Kong, which was instrumental in establishing the adult liver transplant programme, and with Renji Hospital, Shanghai Jiao Tong University, which greatly supported the paediatric initiative.

In 2023, Dr Yoong transitioned to Sunway Medical Centre (SMC). Yet, his dedication to public service never faded. He continued to return to UMMC to support liver transplantation efforts, embodying the very spirit of selflessness and service that defined his career.

Throughout his years at UM, Dr Yoong was more than a surgeon - he was a passionate educator and a fatherly mentor. He trained and shaped a generation of HPB and liver transplant surgeons, including Associate Professor Dr Koh Peng Soon, Dr Koong Jun Kit, Dr Kamarajan Ramayah, and Dr Lee Yeong Sing.

Like a father in guidance and a brother in camaraderie, he championed teamwork and collective growth - nurturing not only surgical excellence, but also the core values of humility, respect, and service. Dr Lee recalls:

**"In the operating theatre, Professor Yoong was a "traditional Chinese Kung-fu master" - firm, meticulous, and deeply committed to excellence. I still remember how particular he was about the way we passed instruments, retracted tissues, or carried out dissections.**

*Even the slightest deviation from his way would draw his immediate attention. He didn't raise his voice without reason - it was his way of teaching, of showing us that the details mattered. And if he corrected you, it meant he believed in you. He never wasted his energy on someone he didn't think was capable. To me, and many others, he was like a great master - demanding, yes, but only because he cared."*

*Outside the OT, Dr Yoong revealed another side of himself - approachable, warm, and full of heart. He was someone colleagues could turn to not just for surgical guidance, but for life advice. Whether it was a work-related dilemma, team dynamics, or even personal or family struggles, he always offered wise, steady counsel.*

*His words carried the weight of experience and the sincerity of someone who truly cared. One memorable act was when Dr Lee faced a family emergency. Without hesitation, Dr Yoong - then a senior consultant and division head - volunteered to cover Dr Lee's specialist on-call duties. It was a quiet but powerful act of support that spoke volumes about his character - strict when it mattered, generous where it counted. Dr Lee adds, 'He also believed in the importance of togetherness outside the hospital. After a long day, he'd often say, "Let's go eat", and we'd end up discovering hidden food gems all around the city. No matter how big the group, he always paid - without question. "I'm the boss", he'd say with a smile. To us, he was more than that. He was our shifu, our mentor, and our protector.'*

*Beyond the hospital walls, Dr Yoong was a devoted family man. The second child of five siblings, he shared a close-knit bond with his family, grounded in love and respect. He was*

*openly and sweetly affectionate to his wife, and often spoke of his three children with both pride and humour. His children would finish their homework while waiting in his office after school, before they all left for home. He saw those long drives through city traffic as yet another means of building cherished memories with them.*

*A tea connoisseur who enjoyed good food, he was a man who appreciated the finer things in life, but never lost sight of what brought him true meaning - spending quality time with his loved ones and friends.*

*Yoong - as many in his surgical fraternity called him - never had the academic ambitions that would have led him to the professorship he well deserved. He could not, for dear life, sort out administrative work in good time. But he was that rare gem of a man - someone consistent in both his expressed and lived values. A person one could trust. That his life was cut short so abruptly, while on an upward and outward rainbow arc, will move and unsettle us for years to come.*

*Dr Yoong's legacy lives on - not just in the lives saved through surgery, but in the hearts of the many patients, colleagues, students, and friends whose lives he touched. His vision, compassion, and passion for excellence will continue to shape the future of liver transplantation in Malaysia and beyond.*

***Dr Yoong passed suddenly from an acute cardiac event on 17<sup>th</sup> July 2025. He is survived by his wife Ee Laine, three children aged 16, 13 and 12 years, and a large extended family.***

***Dr Yoong was a member of the College of Surgeons since 2020, and served with distinction as Chair of the Chapter of Hepatopancreatobiliary Surgery.***