

BERITA CSM



Newsletter of the College of Surgeons, Academy of Medicine of Malaysia

Editor: Associate Professor Dr Lim Kean Ghee

Message from the President

HANAFIAH HARUNARASHID



It is my great privilege to be able to address all of you fellows and members of this prestigious college as the 16th president of College of Surgeons

Malaysia. First, on behalf of our College, Council, fellows, members and staff, I wish to express very sincere thanks to our immediate past president, Dr Peter Wong who served us with distinction.

I must express how honoured I am, a simple lecturer, to have been chosen to lead a community of distinguished and accomplished professionals. I am conscious that I represent a community who serve their patients with dedication, skill and compassion, often from before sunrise, arriving home late for dinner with their families, and continue working at night, through weekends, holidays or special occasions. Surgeons are a special breed indeed!

I would also like to express my gratitude to all that have guided and supported me along my surgical career, especially to my mentors, peers, associates and staff in all fields. A special mention must be made to Professor Dato Dr P Kandasami, the current Master of the Academy of Medicine for without him, I would probably have not taken a career as a surgeon today.

Today our College is 44 years old. It was founded in November 1972 with a humble beginning of a membership of just twenty- three fellows and the legendary Tan Sri Dato' Dr Abdul Majid Ismail as its first President. This significant milestone has played a pivotal role in

shaping the history of surgery in Malaysia. Since then, our membership has increased and today we have 750 fellows and members.

In 1992, another milestone was achieved. A resolution was passed by our fellows and members where the College opted to merge with the Academy of Medicine of Malaysia. The merger was formalised on 16th December 1995. This year is a momentous year. The Academy of Medicine celebrates its Golden Jubilee and inaugurates its new patron. I must thank all our past presidents for all their contributions. The primary objective of the College is to maintain and promote the highest standards of surgical practice in the country. It is on this platform this new council will be serving you. It is crucial that our College goes back to basics and invest in training. The future of our profession lies on our shoulders.

Where are we today? I am very pleased that over the last few years, our College has developed a strong foundation in Surgical Training. To mention a few milestones; through our collaborations with our overseas sister colleges and the Ministry of Health, we have been successfully running the National ATLS programme and the CCriSP courses. This close collaboration has brought significant improvement in the treatment of acute trauma and life support in accidents and emergency services. It has helped many take leadership roles and become agents of change in their respective hospitals. Credit must be given to the medical and paramedical personnel from both the College and KKM for their dedication and hard work.

As added value, holders of the ATLS and CCriSP (Care of Critically Ill Surgical Patient) course certificates are

In this issue ...



Message from the President

Introducing our New President

ELSA 2018

Professor M Balasegaram's Memorial Award for Surgical Training

page 1 – 3

page 4

page 5

page 6 – 7

RACS Travelling Fellowship Malaysia

Women in Surgery Intra-congress Workshop Report

A Journey of Creating Awareness in Bullying, Discrimination & Sexual Harrassment in Pahang

Annual Scientific Meeting and Annual General Meeting 2016 Report

page 7 – 9

page 10 – 11

page 12

page 13 – 14

given significant advantage in the selection of trainees into the Masters of Surgery programme.

Networking has also facilitated international collaboration for surgical standards and benchmarkings. The College helped promote Kuala Lumpur as a regional centre for MRCS Part B (OSCE) Examinations, and the UK Joint Surgical Colleges Fellowship Examination (JSCFE). Apart from that, we are one of the few regional centres given the license to conduct the official Royal College of Surgeons of Edinburgh preparatory course for the examinations. The JSCFE examinations will be held again in Kuala Lumpur in November this year following a very successful event last year, this time with a record number of 70 candidates in one sitting. The candidates are from all over the world, putting Malaysia on the surgical map of the globe.

It is not enough for our College to be only involved in just running courses and exams. It is crucial that CSAMM is seen to be actively involved in promoting training. In 2014, the Honourable Minister of Health witnessed the signing of an MOU with the Royal College of Surgeons of Edinburgh in subspecialty fellowship training in Cardio-Thoracic Surgery. This marks a new beginning, creating a path for specialist training outside the current model.

Our college will continue its longstanding contribution in surgical training via the running of the Basic Science Examination which is currently recognised by the Conjoint Board of Orthopaedic Surgery, and through our active participation in the Conjoint Board of Surgery for General Surgery. As a partner in the Conjoint Board of Surgery, our College actively participates in the selection, placements and training of surgeons, and more importantly, providing examiners for the Master of Surgery exit Examinations. This collaborative effort helps to increase the number and raise the standard of surgeons in Malaysia.

Despite all this gallant effort, we recognise that there is always the need to increase the number of specialists in this country. Currently, there are over 10,000 house officers in accredited government hospitals. In addition there are almost 16,000 medical officers serving nationwide. At present, we have just over 9,000 specialists in Malaysia for the population of 30 million people. Just over half of the specialists are serving within the public sector, and the total number entering into all the local Masters programmes has been consistent about of 800 per year. The intake for general surgery is 50, shared among the four universities.

Specialist and sub-specialist training in all disciplines will continue to be a major concern for us. We need the more specialist and sub-specialists to deliver high quality of care for the nation. A parallel pathway has been mooted to help solve this issue but we need to tread with extreme care in the field of surgery, as it is a skills and competence base specialty and any short cut can compromise the quality of training with direct consequences on patients care and safety. The programme must be well structured and there must be an entity that specifically focuses on planning, implementation, monitoring, selection process and accreditation of the programmes for clinical specialists.

As the guardian of the profession, our College will play an active role in promoting standards and high quality training which is currently delivered by the universities and the Ministry of Health. We will continue to consolidate the strong collaborative efforts between all stakeholders and hope to play the anchoring role for years to come. We would hope to see the national curriculum project come to fruition and perhaps get the underutilised resources in private practice more involved in surgical training. I hope to see the College establish a strong and active committee in education and training, and provide support for trainees and trainers alike. Formal training in teaching and examining as well as mentoring is essential in this day and age. Perhaps the setting up of a special fund for these purposes is needed urgently.

Our College also supports and promotes the subspecialty training as we are in dire need of some very sub-specialists. With the present number of 1500 surgeons, which includes post gazettement surgeons in training, we represent 35% of the total medical specialists workforce. Most of the specialist training is done in the KKM hospitals and our College can play a role in standard setting and formal external accreditation, perhaps similar to the overseas Royal Colleges of Surgeons. It would be desirable for these programmes to have a formal exit process which is internationally benchmarked and for the candidates to be awarded sought-after fellowships of overseas Colleges as well as a certificate of completion of training by a national board. There is so much work to do with so little time!

For years now the responsibility for the training of the surgeon has been traded between the universities and the Ministry of Health. Every change that occurred was an attempt to ensure that the training is of high standard

continue on page 3



and quality. The College has always been an invited party through the conjoint sub-committee but never taken the leading role. We should ask ourselves, what more can the College do in the scheme of things? Do it have the instruments and expertise to do so? I don't think we have all the answers but as a representative of the whole profession, the College should be in the best position to assume the role of maintaining standards. We cannot afford to have the framework for training and the quality of teaching that keeps changing with the preferences and convictions of changing of leadership. Inconsistencies can eventually destroy our fabric and not just its value or standards per-se. The College and Academy must therefore incorporate a more permanent structural framework to support training. We have to identify who among us are teachers with passion and capability to train our young padawans. To ensure consistency, we must accord them continuity beyond their tenure in the College council and leadership. A secretariat and an office for this purpose is highly desirable.

For the majority of our members, our annual scientific meeting is the only activity that brings us together. Indeed, it is our biggest and most important yearly event. It has become bigger and bigger over time and the quality of the scientific contents is of international standards. This year, for the very first time, the total number of participations exceeded the 1000 mark. The official involvement of the medical students and nurses, the ASEAN Federation of Surgical Colleges meeting and the Women in Surgery forum enhanced the meeting. We have also continued the highly popular debate, added a video competition, controversial and contemporary topics and the Royal College of Physicians and Surgeons of Glasgow symposium. None of these would have happened without the mammoth efforts put in by Professor April and her team; congratulations and thank you. Next year we will meet again in Kuching. In order to promote surgery across the country, I think it is best if the venue of the scientific meeting can alternate between the capital, Kuala Lumpur, and the provinces in the future.

I am also pleased to remind you that the College has made a successfully bid to host the Endoscopic and Laparoscopic Surgeons of Asia (ELSA) Congress to be held in 2018 in Malaysia. With support from the Director General of Health we are also considering a

bid for the World Congress of Surgery 2021 to be held in Kuala Lumpur.

Fellows and members, our heritage is our greatest strength. Over the last few decades our profession has benefitted from the foundation laid by our predecessors. It was therefore most appropriate this year, that we honoured Dato Dr JP Mehta with the prestigious AM Ismail Oration. In the last few years, we also witnessed the loss of two giants, in the persons of the late Tan Sri Dato Dr Abdul Majid Ismail, our first president and the legendary Prof Dato Dr M Balasegaram. In honour of Prof Dato Dr M Balasegaram, the College has agreed to award the Balasegaram medal annually to a deserving surgical trainer. Our surgical forefathers set the model and the standards of our professionalism and we need to remember our heritage as we continue our role as the stewards of our profession.

Now let us look ahead. It is inevitable that change is on the horizon, whether it be in health care delivery, surgical training or any other aspects of our society. Medical education and training are under intense scrutiny. The Halstead model that has served us so well the last century is changing. The demographic, working hours and expectation of our trainees are also changing, or have already changed and we have to adapt rapidly to these realities. Our College needs to be the leader in simulation technologies, through collaborative efforts with local and regional skills centres, and in encouraging our young surgeons to be scholars with opportunities in knowledge and skills enhancement. Perhaps the College can also assist in establishing large national databases, especially in cancer and trauma registry, to enhance the quality of care and safety. In the meantime, it will continue to contribute and play its role in the national Specialist Register (NSR), Continuing Professional Development (CPD) and the revalidation process, the revision of the fees schedule and the production of national Clinical Practice Guidelines (CPG).

Lastly, I would like to thank our evergreen and super loyal Miss Molly Kong, my council members, my parents, family and teachers, our surgical societies and sister colleges worldwide, MyCEB and our industry partners and everybody else who had been a great help and partner to the College. Thank you for all your trust and cooperation.



Introducing our New President

HANAFIAH HARUNARASHID

Many at our recent Annual Scientific Meeting 2016, may have been surprise to hear that Tan Sri Rafidah Aziz first knew A/P Hanafiah Harunarashid, our new college president when he was just a new born baby. Here is the inside story. Hanafiah was born at the Assunta Hospital, Petaling Jaya while his father, Harunarashid Hj Salleh, and Tan Sri Rafidah's husband were co-workers in Bank Negara. Our president is the eldest of a family of three boys. (His brother Helmi is a banker in Europe and other brother Husyairi is an emergency physician in HUKM). He moved through four primary schools, in Petaling Jaya, Kota Kinabalu, Penang and Kuantan, following where his father was posted to work. He then completed his secondary education in Malay College, Kuala Kangsar.

Hanafiah enrolled to study medicine at the University of St. Andrews in 1987 and transferred to Edinburgh University in 1990 and completed his undergraduate training in 1993. After his junior house officer year and some time as an anatomy demonstrator Hanafiah returned to Malaysia in 1996. He married Dr Nor Haniza, from Taiping, in 1995. She is a graduate from Surabaya, Indonesia and works in the Ministry of Health. They have five children.

On his return to Malaysia Hanafiah was posted to Ipoh Hospital. He was walking down the corridor to report to work as a medical officer in neurosurgery when he received a phone call to report to Dato Kandasami in general surgery instead. He was not yet then decided on any particular specialty to train in, but

being mentored by Dato Kandasami settled it for him. Surgery it was to be.

After his fellowship, while a clinical specialist with Dato Kandasami, the latter left to join the Perak College of Medicine in 2000. Hanafiah decided to follow his mentor, but the tie up of that university with Sheffield University, where he was to pursue sub-specialist training in vascular surgery did not materialise. Hanafiah then joined the Ministry of Health to work in vascular surgery in Kuala Lumpur hospital, but after a short spell he obtained a job with his old boss Professor Ruckley in Edinburgh in 2001.

Prof Ruckley was to retire soon, but Hanafiah trained in vascular surgery with his successor Prof John Murie. In 2007, having completed training as about to be offered a consultant's job he spoke to his old boss here in Malaysia, and he was advised to come back and serve the country. So Hanafiah packed up his bags and came back to work in Universiti Kebangsaan Malaysia.

Our new president was first elected to the Council of the College of Surgeons, Academy of Medicine Malaysia in 2011. The next year he was elected Honorary Secretary in the council of which Prof Yip Cheng Har was president. He was senior vice-president under Dr Peter Wong from 2013-2016 and after our recent Annual General Meeting was elected President by the in-coming council on the 13th of May 2016. Besides surgery Hanafiah has an interest in cooking and he supports Manchester United.





ELSA 2018

Professor Dr Chin Kin Fah

ELSA 2018 International Congress President

ELSA Governor (Malaysia)

Council Member, College of Surgeons, Academy of Medicine

The College of Surgeons, Academy of Malaysia, will host the ELSA 2018 in Malaysia. Working in collaboration with the Executive Committee of ELSA (Endoscopic and Laparoscopic Surgeons of Asia) The interaction of our Malaysian Surgeons with reknown regional and international laparoscopic surgeons will broaden our horizons and encourage future collaborations between centres of excellence. ELSA 2018 will welcome Professor Jasmi and Professor Tan(??) our two outstanding laparoscopic surgeons as the anchors for the Scientific Program. Kuala Lumpur is at the centrally located in Asia and is well placed for young surgeons throughout Asia to congregate in, for a meaningful and successful Congress with an immediate expansion of an already enormous membership base.

The Malaysian government firmly backs the College of Surgeons, Academy of Medicine of Malaysia in the hosting of the ELSA Congress with support from Ministry of Health and Ministry of Tourism and Culture through the Malaysia Convention & Exhibition Bureau (MyCEB). In particular, we have been successful in our application for an education grant of RM 500,000 from our government. Strategically located at the centre of the vast Asia Pacific region, Malaysia is geographically situated at an ideal location and is conveniently accessible from the Middle-East and Europe.

The proposed venue, the Kuala Lumpur Convention Centre (KLCC), which has an 8,000 capacity, enjoys a strong track record of hosting major international meetings. Set within the heart of the city, the centre is integral to the self-contained precinct, with a myriad of shopping, dining and entertainment options in its immediate vicinity. There are over 2,100

hotel rooms on-site, and an additional 5,500 rooms within 10 minutes' walk; in total 10,000 rooms within 15 minutes' walk through the over 10KM covered pedestrian walkway.

The Council of College of Surgeons initially proposed for this bidding in 2013, when Professor Chin Kin Fah was appointed to head this bidding, with the College of Surgeons as the co-host. With our best intentions in mind, Professor Jasmi gracefully passed Governorship to Professor Chin Kin Fah, such that he could represent College of Surgeons for the bidding as the Governor representing Malaysia in the Board of ELSA during ELSA 2013 in Taipei. We narrowly missed out to the Philippines to host ELSA 2017. Having another year of preparation and setting up networks, we returned to ELSA 2014 at Bali for the Bid for 2018. In particular, the founder of ELSA, Professor Michael Li, gave a keynote lecture at our Annual Scientific Congress 2014, and personally expressed the strength of our College in organizing successful scientific Congress and pre-congress workshops, such as cadaveric (Silent Mentor) workshops. On this occasion, our friends from the Philippines became one of our loudest ambassadors who promoted our bidding events with our pamphlets. Needless to say, Dr Peter Wong (President of College of Surgeons), Professor Tan Hock Lim (Governor for Paediatric surgery), DrVimalK Vasudeavan(Governor for Malaysia) and Dr Bong Jan Jin have worked hard behind the scenes to gain support from other governors.

We look forward to having more Malaysian Surgeons join ELSA memberships, in order to expand our involvement with the Regional ELSA activities, such as the OutReach program to less developed countries.



PROFESSOR M BALASEGARAM'S MEMORIAL AWARD FOR SURGICAL TRAINING

INTRODUCTION

Professor M Balasegaram was the chief of surgery at General Hospital Seremban and later General Hospital Kuala Lumpur in the 1960-1970s and had been instrumental in education and training of the later generation surgeons throughout Malaysia. He was surgeon par-excellence, winning many accolades all over the world; especially for his work on liver resection. He was the first Asian to be honoured by the Royal College of Surgeons in England's Hunterian Professorship award (1969) and the first Asian to win the coveted Jacksonian prize (1971).

The later generation surgeons remembered his humility, dedication and passion for surgical training. With his passing on 5th May 2014, at the age of 85, the CSAMM council unanimously agreed to name a surgical education and training prize in his memory, to honour teachers and trainers in surgery in Malaysia.

This award, in the form of a medallion and a certificate, will be presented each year at the Annual Scientific Meeting of the College by the College President or his/her representative/guest of honour.

OBJECTIVE

The objective of this award is to honour any person/persons who has/have contributed to the training and education of doctors in the field of surgery in Malaysia.

ELIGIBILITY

1. Any person/persons, past or present, who has/have contributed to surgical education and training in Malaysia

2. Open to persons of all nationality, including from overseas
3. The person(s) could be from any surgical speciality or subspeciality, public hospital or private hospital or from academic and research institutions, but must have contributed significantly in training and education of surgeons
4. Only one, or a maximum of two may be awarded per year

SELECTION CRITERIA

1. The college shall circulate call letters to all surgical colleges and advertise in the college newsletter for nomination of the award. The proposal must be received at least three months before the ASM. The nomination form shall comprise:
 - a. Name of nominee, proposer and a seconder
 - b. A brief CV of the nominee
 - c. Reasons for the award
 - d. State 3 outstanding contributions
2. Selection committee: This will comprise 5 members- 3 from the exco and two others nominated by the CSAMM president. The non-exco officials shall be senior members of the college
3. Attributes used in selection:

The selection is based on the nominee's contributions- past and/or present in training, leadership in the field, resourcefulness, contribution to development of the field. The selection committee has the right to decide upon the weightage of the criteria. Their decision shall be final.

In the event of a close competition, the selection committee may

propose one nominee's name be carried over for the following year's selection. All other nominations would be void and fresh nominations would have to be received from the college every year.

AWARD

The awardee/ representative would be called upon during the award ceremony and a short citation, as prepared by the selection committee shall be read out.

A standard medallion that carries the title 'Professor M Balasegaram Training Award' and the year of award on one face and the name of the awardee on the other would be presented. The costs of the medallion should not exceed RM 1,000 (RM One thousand) for the first ten awards but the value may be reviewed by the CSAMM Exco every ten years.

A certificate of excellence in training would also be issued.

SUMMARY

Professor Balasegaram's memorial award is an award to honour outstanding contribution in teaching and training in surgery. The college recognizes that there would be many specialty competing for the award in future and that new minimally invasive therapy, simulation laboratory and robotics may make judgment of awardees difficult and new criteria may have to be set. This guideline shall be reviewed every five years by the CSAMM council and amendments made whenever necessary.

continue on page 7




PROFESSOR M BALASEGARAM MEMORIAL AWARD FOR SURGICAL TRAINING- 2017

- Nominee:
- Nominee's contact details:
- Brief CV of the nominee
- Reasons for the award
- State 3 outstanding contributions in teaching and training

Name of proposer/ seconder	Date	Contact details: Address, email and telephone	Signature

Please return form to:

Secretariat,

College of Surgeons, Academy of Medicine Malaysia 

RACS Travelling Fellowship Malaysia

7th – 21st May 2016 *by Graeme Campbell*

Every year the Royal Australasian College of Surgeons sponsors one of its own fellows to come on a two week visit to Malaysia as a travelling fellow. The candidate is at our choice to train or to share his or her expertise in any area we believe we can benefit from.

This year the travelling fellow was Graeme Campbell....(Ms Kong please fill in his title) who visited Malaysia over the time we conducted the Masters of Surgery final exams as well as our Annual Scientific meeting.

HIS REFLECTION ON THE EXAMS

I flew to KL on May 7th arriving at 8.40 p.m. to torrential rain and transferred to the Shangri-La hotel in central KL. The next day a junior trainee drove me to Universiti Kebangsaan Malaysia Medical Centre (UKMMC) to observe the Master of Surgery Examinations. The examination was quite a large affair with about 70 candidates. It runs over 3 days, long cases on the first day, short cases on the second, and 4 vivas on the third. I observed the second day.

The cases were fascinating. Observing frontal bossing and malar hypertrophy, the senior examiner diagnosed thalassemia from the end of the bed, did not need to examine the abdomen to know that there would be an enlarged, palpable spleen. It was fascinating to observe a candidate communicate with the patient in one language and the examiners in another. However this is second nature, as this is the way medicine is practiced in Malaysia.

The examiners dinner was held in a newly constructed hotel with stunning views from the 39th floor.

The next day I observed the viva exams, in particular Principles of Surgery 2. Half the time was allocated to critiquing a scientific paper, which the candidate was given 20 minutes to read. The candidates were expected to summarize the paper, analyze the type of study, the journal in which it was published and critique the abstract in a thoughtful way. The remainder of the station was devoted to questions in pathophysiology. I was then taken on a hospital tour, after which I rejoined the examiners who had completed their tasks. The scores were collated electronically rapidly and the final result determined. The prior agreement that marks would not be altered was strictly adhered to. This seemed quite fair to me. The overall pass rate was 40%. There was much discussion about this.



continue on page 8



ON THE ASM

Friday 12th May, to Sunday was occupied by the Annual Scientific of the College of Surgeon of Malaysia which was well attended with over 1000 delegates. I represented RACS on the stage party. I spoke in a plenary on the problems of Discrimination, Bullying and Sexual Harassment (DBSH), and the RACS action plan.

VISITING KUALA LIPIS, KUANTAN AND KOTA BHARU

After a free morning, on Monday the 16th I was picked up by Dr Jiffre Din, who is chief of general surgery for the State of Pahang, the largest state in peninsular Malaysia. I was pleased to be able to leave KL for some greener landscapes. We headed northwest, and detoured to the Genting Highlands, then continued our journey towards Kuala Lipis which until 1955 was the state capital of Pahang. The next morning we drove to the local hospital. A brand new building has just been constructed, with a second phase already commenced.



I gave a talk as requested on DBSH, and also on decision-making. After seeing some sights we drove on to Temerloh to the Sultan Haji Ahmed Shah hospital. I delivered the same talks as at Kuala Lipis. In the late afternoon, we continued along a high standard freeway to Kuantan, the regional capital of Pahang

I was up early on Wednesday to get to the Hospital Tengku Ampuan Afzan Kuantan. I gave a talk at a hospital grand round to well over 100 people, again on DBSH. Many in the audience acknowledged that this was a major issue which had been largely swept under the carpet. I followed this with my talk & case presentation on decision-making. This smaller group was entirely surgical and some good discussion flowed.

I was then driven to a newly built university hospital. That afternoon I went back to HTAAK to teach trainees. The session was also attended by several surgeons. I used some MOSES cases. Culturally Malaysians tend to find it hard to speak up in a group, mainly for fear of losing face. It was pleasing that this group was able to contribute actively after sufficient time to realize it was a safe environment. Their knowledge was, in fact, good, but they had some troubles

applying their knowledge to the cases. I had planned to spend an hour. In fact the session continued for nearly 2 hours.



Thursday the 19th was allocated to a road transfer from Kuantan to Kota Bharu.

Dr Jiffre was keen that I saw some of the sights of the city of Kota Terengganu half way along. I visited the crystal mosque, quite a beautiful structure. My driver was excited that we were exactly on time for prayers, and invited me into the mosque while he joined the prayers. The worshippers were perfectly accepting of a non believer, provided I stayed in the correct portion of the mosque. I was allowed to take pictures inside. Along the way my driver pulled over as he had spotted something. Two men were using trained short tail macaque monkeys to climb coconut trees and retrieve the coconuts. The monkeys grasp the coconuts and twist them forcefully until they break off and fall to the ground. I gather this method is also widely used in Indonesia. After all our sightseeing we arrived in Kota Bharu just after 8 o'clock.

On Friday, I was driven to the Universiti Sains Malaysia Kubang Keroam Kalantan. My host was Dr. Zaidi Zakaria. As it was Friday, much of the hospital was closed, but about 30 trainees, JDocs & medical students came especially for my presentations on decision-making, and how to pass exams. We then did some ward based teaching. The trainees were a bit disorganized in their examination style, even though their overall knowledge is quite good. This is, I feel, the major reason for the low exam pass rate. Their teachers are well aware of this and have been pushing the same message,

continue on page 9



and were happy for it to be reinforced by an external party.

On my last day, I visited Hospital Raja Perempuan Zainab II. It was now the middle of the long weekend, but more than 40 surgeons, trainees & residents turned up to hear me talk on DBSH, and then on generalism and acute care surgery. I was shown around the hospital which was largely empty due to the long weekend, but one child was recovering well from a Kasai procedure for biliary atresia in the paediatric surgical ward.

REFLECTION

This was all a wonderful learning experience for me. The Malaysian people, of all races, are extremely welcoming and friendly. The country feels very safe, and the food is excellent. It was interesting to note how many problems we share. Entry into specialist training is extremely competitive, and this results in a highly stressed junior doctor workforce. Overall the country is short of surgeons, but I think has even greater shortages of anaesthetists, oncologists and other specialists.

One good feature of the Malaysian system is the ability of young surgeons to gradually transition their careers,

spending a few years in one location, yet still able to train in a sub-specialty if they wished, or else get further experience without full training in a sub-specialty.

Affordability of health care was a constant theme. In particular access to timely imaging and multi modal health care is inequitably distributed. There is much to do in the area of trauma prevention, especially road trauma.

I believe the local training schemes are now mature & robust, and there is little to be gained by returning to a system where trainees look to fellowships with external countries. Mutual recognition agreements with ASEAN countries offer the potential of a truly well trained local workforce, able to provide health care across the region. Overseas countries can best assist by offering Fellowship positions to complement local training.

I am extremely grateful to RACS Global Health, for my nomination, and to the College of Surgeons Academy Medicine Malaysia for their wonderful welcome & hospitality. In particular I would like to thank Prof. April Roslani, Dr Jiffre Din, & Dr Zaidun Zakaris for their personal attention.



Dr Graeme Campbell had a discussion with an Orthopedic Surgeon while being accompanied by the resident general surgeon Dr Shahril during a walk around in Hospital Kuala Lipis



Dr Graeme was beaming with joy at Lancang Elephant Sanctuary



Dr Graeme Campbell with surgeons in Hoshas



Photographing a monkey at Telok Cempedak Kuantan



Delivering a lecture in an auditorium HTAA Kuantan



Surgical team in HTAA



WOMEN IN SURGERY INTRA-CONGRESS WORKSHOP REPORT

**a version of this report has appeared in the Association of Women Surgeons E-connections June 2016 edition*

Prepared by:

Dr Cheng-Har Yip, Consultant Breast Surgeon, Sime Darby Health Care, Malaysia

Professor Dr April Roslani, Consultant Colorectal Surgeon, University of Malaya Medical Centre, Kuala Lumpur

Women form less than 10% of the general surgical workforce and less than 20% of general surgical trainees in Malaysia. However, women make up more than 60% of students enrolled in medical schools in Malaysia. It is important to address the reasons why few women choose a career in surgery, in order to ensure adequate surgical services for Malaysia. A report commissioned by the Royal Australasian College of Surgeons (RACS) in October 2015 showed that 49% of surgical trainees had experienced discrimination, bullying and sexual harassment in the workplace, and there seemed to be a “toxic” culture in the surgical fraternity. Could this be the reason why women are avoiding a career in surgery? Additionally, in all fields of medicine, but particularly in surgery, work-life balance is challenging; long hours at work can cause problems when there are young children at home.

In South-East Asia, most societies are predominantly patriarchal. The customary thought of people is that “girls are born to be fed throughout their lives” and “boys are born to earn and support the whole family”. Traditional gender roles dominate the region. Women take on the role of child bearing, while men are the breadwinners. The cultural norms prevailing in South-East Asia perpetuate the subordinate position of women socially and economically. However, in

some urban regions of South-Asian countries, women’s social roles have changed to some extent. They have now comparatively more opportunities for education, employment and enjoyment of civil rights within society. However, the de-stereotyping of the gender roles which have been traditionally assigned by our society is still far away, and even those women who are free to choose challenging careers are nevertheless still expected to shoulder the bulk of household and childcare responsibilities.

To examine the obstacles and issues facing women who opt for a career in surgery, a half-day symposium titled “Women in Surgery – Reversing the Numbers” was organised by the College of Surgeons, Academy of Medicine of Malaysia (CSAMM) on 15 May 2016, convened by Professor April Roslani, the Vice President of the CSAMM. The symposium was attended by over 30 women, mainly junior doctors, joined by five

supportive men. A distinguished panel of speakers, comprising women surgeons holding senior positions in Malaysia, and three women surgeons from the United Kingdom (Dr Judith Evans), Spain (Dr Monica Millan) and Singapore (Dr Melissa Teo), shared their experience coming up through the ranks and discussed strategies and tips for success with the participants.

The discussion was lively, with several amusing anecdotes from the panelists on the trials and tribulations of a woman surgeon. These were some of the stories we heard:

“The on-call surgery night duty room was a common room with about four beds for surgeons on call, and I had to share the room with the male surgeons. One night, my husband called the on-call room looking for me; my male colleague answered the phone, and told my husband “Hold on, she is sleeping next to me”. Can you imagine what



continue on page 11



my husband must have thought?’

‘I had started work at a new hospital, and when I went to the change room in the operating theatre, there were only two change rooms – one said “Surgeons” and the other one said “Nurses”. I went into the “Surgeons” change room and left an old bra there. The next day, the labels on the doors read “Men” and “Women.”’

‘When I got a coveted academic job over five other male surgeons, the story went around that I had slept with the boss to get the job.’

‘When I went for an interview for a position as a trainee plastic surgeon, I was told by the head of the department that he does not want the women in his department to wear pants; they must wear skirts.’

Such stories show that establishments are not ready to accept that surgeons can be women, nor is there belief that women can succeed on merit alone. There were few stories of sexual harassment by male surgeons, mainly because sexual harassment is rather undefined unless it is actual physical abuse. Sexual innuendoes masquerading as “teasing” is probably fairly common, but complaints are rarely raised for fear of consequences or acceptance that it is the cultural norm. Bullying certainly occurs, but victims are both male and female; furthermore, one must also distinguish vigorous training, or a single inappropriate interaction from actual systematized bullying.

A key difference between male and female surgeons is child-bearing, with the requisite need for time off. In Malaysia, women are now entitled to three months’ maternity leave. However, this would mandate a longer training period for female surgical trainees. There is considerable pressure on female

trainees who are on scholarships not to extend their training. Thus, some female trainees opt for just two weeks’ leave after delivery, in order to get back to the programme without extension. Women surgeons who are married with young children need a good family support system to get over this period when their children are young. Most of the women surgeons remember the missed family dinners, the missed school concerts and prize-giving ceremonies, because of work.

The importance of the extended family unit, still prevalent in Asian society, in supporting the working mother, cannot be underestimated. Unfortunately, this support is not always available to those who would aspire to a surgical career, and many are forced to abandon training mid-way, resulting in loss of valuable human resource. There is short-sightedness on the part of administrators, who fail to recognize that time taken off for child-bearing and related issues is only a fraction of entire career, and thus should not be seen as a negative aspect of training women.

What then can the surgical fraternity do to “reverse the numbers”? Clearly the issues are structural and cultural, rather than lack of competency or opportunity, and the paucity of role models further compounds the perception that surgery is an unsuitable career for women. It was proposed that a “Women’s Chapter” in CSAMM could address the latter issue, by establishing a mentoring network, offering advice to female medical students interested in a career in surgery, and supporting surgical trainees and young surgeons. Shared jobs for women surgeons are not currently available in Malaysia,

but could be one of the ways to keep women surgeons with young families in the service. The RACS has recently launched a programme called “Let’s Operate with Respect” to deal with discrimination, bullying and sexual harassment (DBSH) in the workplace. CSAMM has also begun running Non-technical Skills for Surgeons courses, which raise awareness on how DBSH, amongst other things, can worsen patient outcomes.

While it is true that young would-be female surgeons who are persistent and hardworking can achieve success despite the obstacles, the inherent lopsidedness of the occupational gender divide will perpetuate the leaky career drainpipe if nothing is done to address those issues, especially with the feminisation of the potential workforce. Improving surgical working conditions for women thus becomes essential for the sustainability of the surgical workforce in general, and can only have a positive knock-on effect for the men as well. CSAMM is committed to supporting talented young people, regardless of gender, to reach their surgical goals, and will work closely with other key stakeholders to find long-term solutions.



Panelists: Seated (Left to Right) C H Yip, Dr Freda Meah, Dr Tunku Sara Ahmad

*Standing (Left to Right) Azlina Firah Abdul Aziz, PC Chye, Farah-Hani Imran, Monica Millan, April Roslani, Melissa Teo
(Absent – Judith Evans)*



A JOURNEY OF CREATING AWARENESS IN BULLYING, DISCRIMINATION & SEXUAL HARRASSMENT IN PAHANG

Written by **Dato Dr Jiffre bin Din**, Consultant Surgeon HTAA

Pahang was assigned to host Dr Graeme Campbell, the RACS Travelling Fellow. It was an easy task to arrange as the surgeons in Hospital Kuala Lipis, Temerloh and Kuantan were eager to be part of his road trip.

It was a good opportunity for me to show him first hand experience how we deliver our surgical services to the outlying district hospitals in Pahang. I also hoped to learn how services were delivered to districts in Australia.

The assignment was also an opportunity to show him a few local attractions along the way. Along the route from, Kuala Lumpur to Kuala Lipis, we stopped halfway at the Chin Swee Pagoda Temple high up in Genting Highlands. Absorbing the cool and peaceful atmosphere, it was a dramatic change from the hectic city of Kuala Lumpur. In Bentong, I quickly drove into the Bentong Hospital compound for him to get the first glimpse of a district hospital in Pahang. We also stopped and walked around the Raub District Hospital, noting its facilities provided.

We reached Kuala Lipis after 8.00 pm. The surgical team in Kuala Lipis had organized a dinner in a local restaurant in honour of his visit. It was a touching gesture from a small team consisting of a surgeon, two medical officer and few paramedics from the endoscopic unit. Earlier Dr Graeme had declared his dislike for durian but that night one of local specialties served was steam tilapia marinated with tempoyak. He declared at least twice how much he enjoyed the dinner.

After he had a serving of the famous pulut jamil he was given a walking

tour of the old and new block Hospital Kuala Lipis by the deputy director personally (psychiatrist). He delivered his lectures to an audience of 40 people mainly nurses. This hospital first built during the British colonial era covers a local population of 90,000 thousands and is the referral centre for West Pahang (over 300, 000 thousand population). He asked 'Where are your surgical patients? Why is there only one surgeon?' In comparison with Bendigo in Australia, a similar size population (less 100 000), there are eight surgeons. Here.


No doubt the best hospitality is always found in the smallest and the most rural place. We left for Temerloh via country road that transverse Pahang interior passing Malay and Chinese kampongs. He had his chance of getting excited seeing and photographed many monkeys on Bukit Bius while visiting Najib's birth place which now is a heritage museum in Kuala Lipis. We missed our lunch as we tried to squeeze in a visit to The Elephant Sanctuary in Lancang. It was worth the effort as we had more than enough calories to burn.

In Hospital Sultan Haji Ahmad Shah (HoSHAS) he delivered lectures to the surgeons and medical officers. He spoke about creating awareness of bullying. After a tour, he said that the HoSHAS was the best hospital in term of infrastructure and facilities in Pahang. In many areas the facilities are comparable to many hospitals in Australia. He was baffled why many surgeons were leaving when there were good facilities and a good pool of patients.

Later in the evening we arrived in

Kuantan. In Hospital Tengku Ampuan Afzan (HTAA) the next day at 8.00 am he delivered his lecture again which had many exciting moments for the audience. After the lecture he was greeted by the Hospital Director. Later in the SOPD seminar room, he delivered a lecture in decision making and continue several hours of MOSES class with our medical officers and post graduate students. After visiting our surgical wards, he understood why the patients in district Hospital Kuala Lipis and HoSHAS have better deal.

In between the excitement of seeing monkeys, elephants and durians, Dr Graeme Campbell managed to create greater awareness in Pahang on the topic of bullying, abuse and sexual harassment. He has shared the importance of this Australian experience. This is a subtle topic that we frequently brush aside or hide under the carpet. However, it can affect the future of our practice in our workplace. We are constantly seeing the behaviour of our seniors and some of the behaviour are no longer acceptable and changes are expected as we progress. We should learn from the Australian experience that many surgeons have lost their jobs and thus we should adapt ourselves.

Accompanying him has been a learning experience for me too. His thoughts as a foreigner provided good insight for me. Where are your surgical patients? Why is there one surgeon to cover 300 000 population? Why can't you create workload for more surgeons? Are we really missing some patient from West Pahang to Kuala Lumpur or traditional treatment? May be Pahang is not alone, could it be surgical diseases are related with urbanization? Is an epidemiology study warranted. Why surgeons are leaving good facilities like HoSHAS? How national policy towards subspecialisation has contributed affected services delivery in district hospital. 



Annual Scientific Meeting and Annual General Meeting 2016 Report

Prepared by **Professor Dr April Camilla Roslani**, Organising Chairperson, CSAMM 2016

As part of the year-long celebrations of the Golden Jubilee of the Academy of Medicine, the remit for the CSAMM 2016 Organising Committee was 'simple' – make it special. It started with a theme – 'Between Scylla and Charybdis', highlighting the difficulties surgeons face in all aspects of their practice. There was also recognition that surgery is teamwork, and that relevance for the next generation was essential for the future if the College is to thrive. Nevertheless, it was also critical that senior surgeons from all surgical specialties remain engaged in the College's activities.

Therefore, to address this wide audience, an expanded programme was forged. An unprecedented number of pre-, intra- and post-conference workshops were held, catering to various levels of expertise and fields. Workshop attendance was as follows:

No.	Date	Venue	Workshop	Convenor	Attendance
1.	Feb-Mar 2016	ASSC	Medical Students' Basic Surgical Skills workshop & competition	Hanafiah Harunarashid	96
2.	10.5.2016	UKMMC	Hernia hands-on workshop	Nik Ritza Kosai, Mustafa Mohamed Taher	13
3.	11.5.2016	UMMC	SOTM	Sandip Kumar	166
4.	11.5.2016	UMMC	Cancer Surgery Masterclass	Nur Aishah Taib	81
5.	12.5.2016	UMMC	Advanced laparoscopic suturing	Lau Peng Choong	18
6.	12.5.2016	ASSC	3rd Asian Trauma Congress	Razman Jarmin	20
7.	12.5.2016	UM	SOS incorporating NOTSS	April Roslani	24
8.	12.5.2016	UMMC	Breast Oncoplastic hands-on workshop	See Mee Hoong	58
9.	15.5.2016	Shangri-La	Women in Surgery	April Roslani	32
10.	17.5.2016	UMMC	LHP & FiLAC hands-on workshop	Chong Hoong Yin, Nora Abdul Aziz	19

The main congress, held in the Shangri-La Kuala Lumpur from 13th-15th May 2016, was attended by 770 participants. The total attendance, including workshops, was 1290.

The grand Opening Ceremony was officiated by the Director-General (DG) of Health, Dato' Dr Noor Hisham Abdullah, surrounded by an august stage party comprising Presidents of Overseas Colleges and Surgical Societies. The formal declaration of the commencement

was uniquely signaled by the DG navigating a CGI ship through dangerous waters to safe harbour. This was followed by the 43rd AM Ismail Oration, delivered by one of the doyens of Malaysian Surgery, Dato' J C Mehta, who took us on a nostalgic 'Unforgettable Surgical Journey'.

The distinguished international faculty was truly global, with representation from Asia, Australasia, Europe and North America. The Royal Australasian College of Surgeons (RACS) Travelling Fellow, Graeme Campbell, the immediate Past-Vice President of RACS, shared the Australian experience in dealing with Discrimination, Bullying and Sexual Harassment in surgery. The Royal College of Physicians and Surgeons of Glasgow delegation, headed by their President, Professor David Galloway, delivered a plenary and a symposium, addressing surgery with limited resources. The Presidents of the

ASEAN Surgical Colleges discussed the implications of the MRA on surgical practice, ending with a consensus statement on agreed collaboration to maintain regional surgical standards.

The local faculty was no less spectacular; key national opinion leaders, including the National Head of Surgical Services, Dato' Jamil Abdullah, lent their expertise to the scientific programme, covering the gamut of surgical topics from trauma to surgical education. Non-general surgical specialties, most notably ENT, Neurosurgery, Urology, Plastics, Orthopaedics and Cardiothoracic Surgery,

were represented in the symposia, reflecting the unifying role of the College.

In honour of the Academy's Golden Jubilee, the Golden Plenary Jubilee was delivered by none other than Malaysia's Iron Lady, Tan Sri Rafidah Aziz. The erstwhile Minister of Trade and Industry gave her views on the future direction of regional healthcare and Malaysia's potential leadership role in this area.

continue on page 14



For the first time, there were concurrent programmes for nurses and medical students. The medical students programme, in particular, was very well attended, with a keenly contested poster competition, career guidance talks and a fiery debate on the need for more women in surgery.

There was more participation than ever by surgical trainees, reflective of a programme that was relevant to them, assisted by the greater use of electronic media. The Ethicon Prize and poster competitions were keenly contested, and the finalists were of a very high standard. For the first time, a video competition was contested, reflecting the increasing role of audio-visual aids in surgical education.

In keeping with the 'Greek' flavor of the meeting, this year's Gala dinner incorporated a dress theme of 'Hippocrates and all things Greek'. Our surgeons and surgeons-to-be rose to the occasion, coming dressed as Greek Gods & Goddesses. A Greek-themed photo booth provided opportunities for memorable photos to commemorate the occasion. Mrs. KG Lim was crowned best-dressed woman for her innovative use of a bedsheet, while Gerald Tan was the best-dressed male in his centurion outfit.

A number of prize winners was announced: the Ethicon Prize was awarded to Teoh Li Ying, from University of Malaya; the Best Poster winners were Nor Safariny binti Ahmad of Hospital Sultanah Nur Zahirah, Kuala Terengganu (*Is Prophylactic Continuous Infusion Of Calcium Solution Better Than Bolus Calcium In Preventing Hypocalcemia After Total Thyroidectomy?*) (Open category) and Tan Shi Hun (*Factors Influencing The Outcome Of Laparoscopic Cholecystectomy In Our Setup At Hospital Tuanku Ja'afar Seremban Malaysia*) (Medical Students category), and the Best Video was awarded to The Medical Students' Surgical Skills Competition was won by Nur Atikah Binti Mohd Nor of UiTM and the SMA Alhady Prize was conferred on Amminur Hafiz B Maliki.

Finally, there was a changing of the guard, with the handing over of the Presidency from Dr Peter Wong Toh Lee to Associate Professor Dr Hanafiah Harunarashid, and the introduction of the new Council.

All in all, CSAMM 2016 was well-received by both local and international participants, and has gone a long way towards uniting our surgical fraternity. This augurs well for the continued growth and development of surgical standards in the country, as well as a potential surgical leadership role for Malaysia internationally.



COLLEGE OF SURGEONS, AMM
ANNUAL SCIENTIFIC CONGRESS
2017
DATE 19th to 21st May 2017
VENUE Pullman Hotel, Kuching, Sarawak

