



HOSPICE Bulletin



National
Cancer
Society
Malaysia
PENANG BRANCH

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Quarterly newsletter of the National Cancer Society of Malaysia, Penang Branch.

THE IMPACT OF COVID -19

By Dato' Seri Dr T. Devaraj

This can be viewed from two perspectives – the impact on the Hospice at Home Programme and the general effect in Malaysia and globally. With regards to the former, the Ministry of Health took the approach, unlike some developed countries that persons who contracted covid-19, especially those with symptoms would come under its care. Thus if any HHP patient developed this infection they were to be directed to a public health facility. Thus we were not expected to look after such patients and home visits could continue. Visits were limited to help reduce the risks of transmission of covid -19 either way. To date no transmissions occurred. Very occasionally visits were postponed when a family member had become a covid contact outside the home and thus posed a risk to our staff.

Patients and their families were equally concerned about risk of transmission by our nurses and also advised the nurses to postpone visits because of covid cases in their neighbourhood. Contacts were enhanced by phone or video calls involving the doctors as well. This has been observed in other hospice services in Malaysia and indeed in other countries.

One of the features arising from the pandemic is increased marginalisation of some ill people especially financially. An innovative program was initiated by a staff member of the National Cancer Society of Malaysia, Penang Branch in July to offer of food baskets, initially by dipping into her own pocket and then via donations. Our nurses would identify families in need who were then given a basket of dry food worth about RM 80 ringgit. A total of twenty baskets were distributed. Some members of the public also came forward offering donations in kind such as PPE and medications.

Fresh thinking is developing on the ways in which medical care can be given in Malaysia. The traditional way was to ask the patient to come back to a health facility be it a hospital or clinic and return to same for follow up care. The hospice approach was to take care to the home. In addition to visits contact was continued by phone calls. Information technology is now beginning to play a bigger role. What's app messages including pictures and video calls are being used. When a patient is too ill to go for hospital follow ups, a video is taken instead and shown to the doctor. Tele-medicine - consultations and webinars to cater to a particular group of patients is on the rise. Thus there is a greater chance for providing or sharing information between health providers and patient and family but also enhancing the empowerment of patient and family towards better care. During the pandemic with less personal visits this mode of care delivery will provide support.

Devices to monitor blood pressure or blood glucose at home has been ongoing for some time in Malaysia thus enabling a closer supervision. Actually there are other apps to monitor more than these two parameters which have been rolled out in some countries where people live far away from clinics or hospitals. One interesting development in covid care in the home has been the use of an oximeter

which tell whether the person is adequately oxygenated. As about eighty percent of those infected by the covid virus are either having no symptoms or mild ones and hence can be asked to self-isolate at home. They are told that if they develop more symptoms such as a high fever, cough or get breathless then to seek the advice of a doctor. As feeling breathless is often subjective the use of an oximeter will help the patient decide when to call a doctor. The use of apps can keep a patient and his provider in close touch on a daily basis which also provides support to the person in isolation at home.

Viewed globally some have likened this pandemic as a wake-up call for humanity and indeed a blessing! There is a growing realisation that pandemics are becoming a part of life. The dominant contributing factor appears to be the life styles of humans. To sustain the way we live has meant nature has been sacrificed for decades by man thus providing more chances for say viruses to cross over to humans as suspected with the current pandemic. In simple words – we are to blame. We will get over this pandemic especially as vaccines are rolled out though forecasts are that it may take up to end of 2022 for global vaccine coverage. Over shadowing even this pandemic is climate change which has been developing since the industrial age. This is a hard nut to crack but it can be done if all of us accept this – that it is a problem, that we are part of the problem and as individuals we are capable of making a difference. GRAB THE CHOICE!

Contents:



HAPPENINGS:

• CARERS' MEETINGS_Via Zoom

Weekly review meeting with nurses
Thursday
Time : 9.00am - 1.00pm

• CARERS' MEETINGS with Dr Jaishree

Once a month via zoom
Time : 1400 - 1600

About Hospice Bulletin

HOSPICE BULLETIN is the quarterly newsletter of the National Cancer Society of Malaysia, Penang Branch with input from Penang Hospice Society. Please submit at least six weeks before issue date which are the first day of January, April, July and October.

All items submitted for inclusion in the Hospice Bulletin must be signed but author's requests to remain anonymous will be respected. Contributions can be sent to: The Editorial Team, National Cancer Society of Malaysia, Penang Branch/ Penang Hospice Society, 250A Jalan Air Itam, 10460 Penang.

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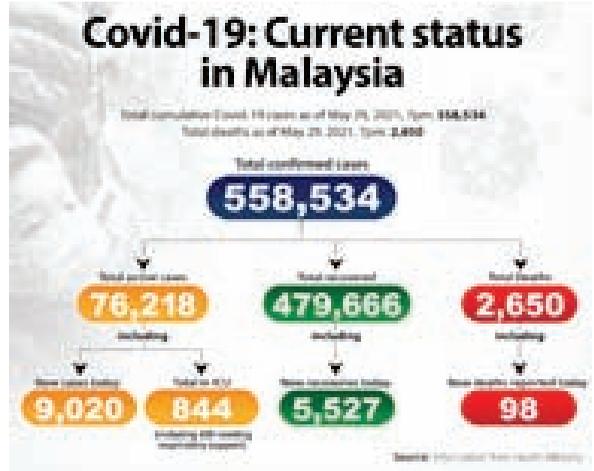
PUBLICATION ASSISTANT Ms Chitra Alagan

The views expressed in HOSPICE BULLETIN are not necessarily those of the National Cancer Society of Malaysia, Penang Branch, the Penang Hospice Society or of the Editorial team.

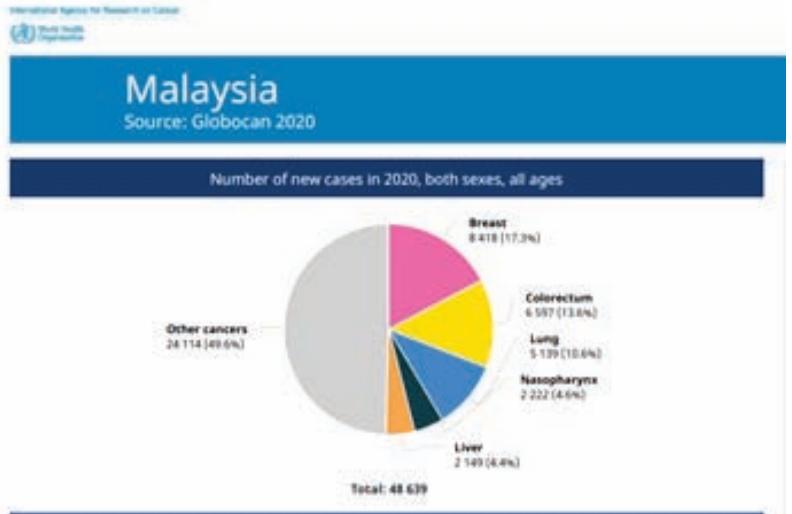
www.penanghospice.org.my
www.relayforlife.org.my
www.ncsmpenang.org

The Value of Data in Cancer Care

With the universal Covid 19 pandemic, there is daily reminder of the impact of the disease on the country's population. Currently each day the numbers of new diagnosed infection is publicized and so is the *cumulative number of deaths*. While the large number of infections rightly deserves attention at its containment, there is an apparent little attention to deaths which forms a small number, some 0.47%. The issue of patient death however is an important concern for close friends and family members.



Cancer on the other hand does not seem to attract as much attention as the number of affected patients is dwarfed in comparison with Covid 19 disease although the number of deaths each year is far more. In the WHO's Globocan 2020, Malaysia experienced 29,530 deaths compared to the Covid cumulative deaths at June 22, 2021 was 4,408.



It is important to remember the cancer induced difference in loss of human lives and not to underate the population healthcare implications of cancer.

The Arrival of the Fourth Industrial Revolution (4IR)

The era of Industrial Revolution is transforming the way we do things in many ways. Technological elements have emphasized Business Intelligence – what and why of happenings in the organization – and Data Analysis – what will happen and its required action.



The 4IR principles are important to plan the future pathway for Cancer Care for the benefit of society and individual stricken patients.

This was well illustrated by the step taken in breast cancer in Penang where the Deputy Women, Family and Community Development Minister Hannah Yeoh in 2019 said that “Penang recorded the highest number because the women in the state have a higher level of self-awareness about breast cancer, which prompted them to undergo early breast cancer screening at

hospitals, clinics and related agencies” and congratulated Penang LPPKN for being selected by the state government as the implementing agency for this programme of RM2.658 million allocation which has been approved for the Mammo Penang programme for a period of three years.

“Penang’s women are very fortunate because other than the ,500 mammogram quota from the federal government, the state government has also agreed to sponsor 5,000 women for the free mammogram, this makes up for up to 6,500 eligible women to benefit from the breast cancer screening this year,” she added.

Penang Hospice Society (PHS) and Cancer Data

Cancer care role of PHS is providing terminal care for patients at the end medical treatment.

Currently it has the system which provides the details of patients cared for to allow guided decisions in Business Intelligence as well as a feedback to the voluntary charitable sponsors of the non-governmental organization. The system allows for full demographic information of patients in the program, the disease profile and the length of care.

The scanned electronic record system provides a secure and accessible detailed authentic information about patient care and can be a source of research and development with institution of Data Analysis.

The workforce analysis is record of contact with the patients, and on-the-spot training of those learning about end-of-life care and the key performance index measurements of individual staff work.

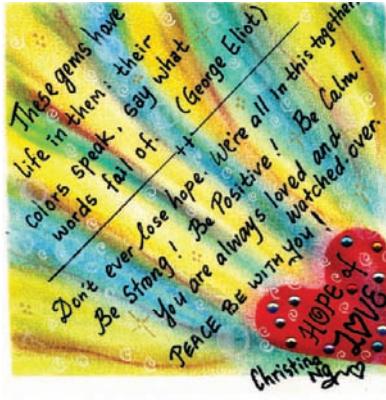
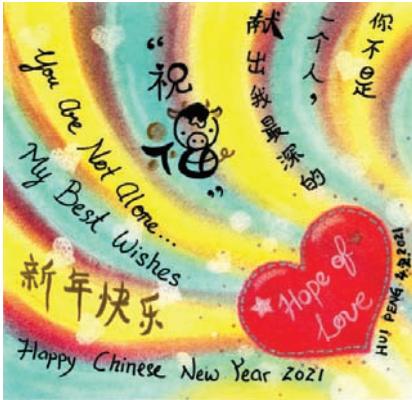
This could be extended to sister organizations to provide a holistic view of availability of hospice services in Penang. When the regional cancer data is available, integration with it will further open the way cancer in the state could possibly suggest its strategic containment.

Thank You

We would like to thank the family and friends of the late Mr Poh Tian Hooi for the donation of RM15,286.27 towards the Hospice-at-Home Programme of the Penang Hospice Society.

Greeting cards

A charity event "Nagomi Art" was held online to encourage participants to draw postcards for patients fighting cancer and to raise funds for the society. This event raised RM350.



Cards for patients

Crafting Hope is a newly established student-led group hoping to bring light and cheer to Hospice patients. In light of the ongoing pandemic, patients are not able to accept visitors and volunteers. However, the group volunteered to support by creating greeting cards.



**Stay safe, keep smiling, and stay happy!
You're a strong fighter! Don't give up!**

World No Tobacco Day 2021 - Commit to Quit Now!!

World No Tobacco Day (WNTD) is celebrated around the world every year on 31 May. This yearly celebration informs the public of the dangers of using tobacco. The theme for this year's World No Tobacco Day 2021 is 'commit to quit'-the goal of the campaign is to help 100 million people quit smoking through various initiatives.

People say that they start smoking for many different reasons – like stress relief, pleasure, or in social situations. Despite knowing the danger of smoking, we are seeing increasing trends of smoking among the younger generation. When younger children and teenagers see their parents or family members smoking, their might tend to believe that it is a 'cool' habit. Parental smoking habits do affect and influence young smokers. Teens who have parents who smoke are more likely to become smokers.

So why do you need to quit smoking? As you know, smoking is the number one risk factor for lung cancer. Tobacco smoke consists of more than 7,000 chemicals many of which are poisons. At least 70 are known to be carcinogenic and can cause cancer in people. Besides lung cancer, smoking is also associated with bladder, blood, bone marrow, cervix, colon, esophagus, kidneys, larynx, liver, mouth, pancreas, rectum, stomach, and throat cancer.

The danger of smoking is NOT only for the smokers but to the people around them - their kids, partners, friends, co-workers, and others who breathe in that smoke known as secondhand smoke, are also at high risk of becoming cancer victims too.

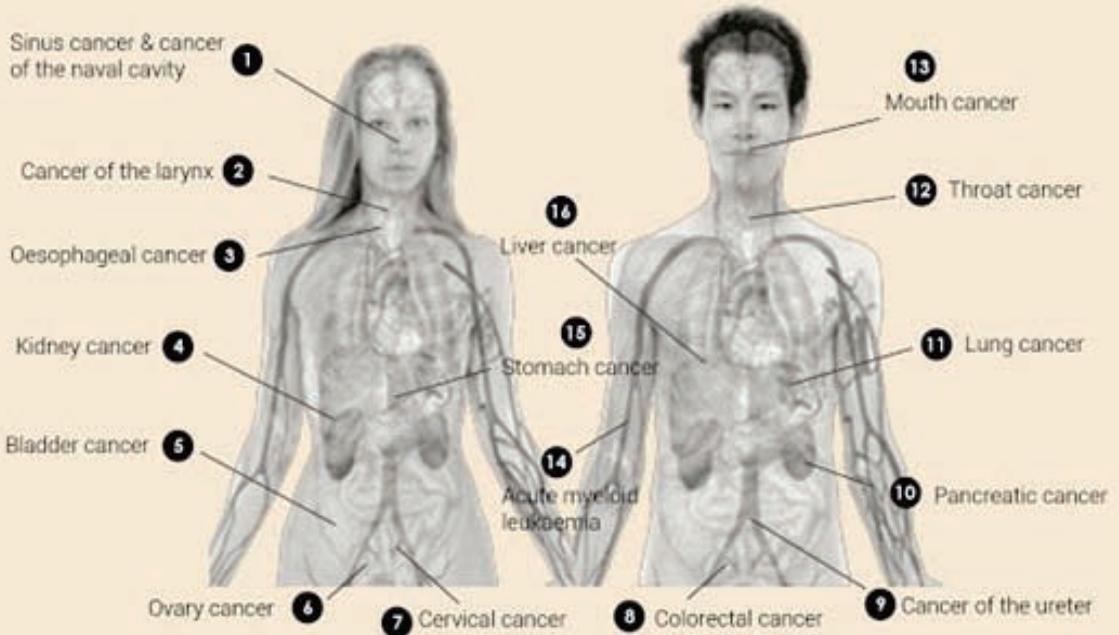
We all know that cost of cancer treatment is not cheap. Did you know that Malaysian cancer patients encounter financial disaster - where medical costs exceed 30% of their household income - a mere one year after the diagnosis? Other hidden costs of cancer treatment may include doctor appointments, medication, transport and travel, family and living expenses, homecare, and employment issues.

We believe tobacco-use is the single largest preventable cause of cancer and stopping smoking is one of the best things we can do to reduce our cancer risk. Commit to quit now can make a huge difference in improving your quality of life.

We are sharing some tips to help you quit smoking:

- Seek motivation – think of reasons to quit smoking. For example, to prevent a family from being exposed to second-hand smoke, reduce the risk for diseases, and /or save money
- Avoid triggers – know our triggers and what causes you to light up a cigarette. For example, drinking alcohol, hanging out with smokers, and stressful situations.
- Keep yourself distracted – keep your hands and mouth occupied when you feel a craving. For example, chew sugar-free gum or mints.
- Try medication – nicotine replacement therapy (NRT) such as nicotine patches, gums, or lozenges work by releasing small doses of nicotine into your body without the other harmful chemicals related to smoking cigarettes. This helps with withdrawal symptoms and cravings. NRT has been shown to increase the success rate. Non-nicotine medication help reduce urges to smoke and withdrawal symptoms without nicotine.
- Get professional help – walk into any mQuit clinic at any Klinik Kesihatan/private clinic to obtain smoking cessation services. You can also visit jomquit.moh.gov.my

SMOKING IS ASSOCIATED WITH **16 TYPES OF CANCERS¹**



Smoking tobacco can also increase the risk of developing heart diseases as well as stroke^{2,3}.

Source: ¹ Cancer Council NSW (Sydney), New South Wales; Cancer Council QLD (Brisbane) 2010-August 18 (Cancer 2011 April 10). Available from: [http://www.cancerouncil.com.au/eng/press-releases-16-cancers-that-can-be-caused-by-smoking/](http://www.cancerouncil.com.au/eng/press-releases/press-releases-16-cancers-that-can-be-caused-by-smoking/); ² CDC Health Effects of Cigarette Smoking (Atlanta, GA) (last reviewed on 2010 December 10) (Cancer 2011 April 20). Available from: http://www.cdc.gov/tobacco/quitnowguide/health_effects/health_effects.html#smoking-causes-hnf-cancer; ³ U.S. Department of Health and Human Services, The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General, Atlanta, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014 (accessed 2017 Apr 20).



1-800-88-1000



help@cancer.org.my

Contact us at

Infographics from the National Cancer Society of Malaysia, Kuala Lumpur

Break Through The Limit

By Jason Teh

I met a special Chinese girl with one leg left on 5th March 2013, her name is Novina. She came from Medan, Indonesia to Penang with parents for bone cancer treatment in Mount Mariam Hospital, Penang. A social volunteer, sister Dolly, told me that Novina was sad as she was unable to stand the side effect pain of chemo. She kept crying, and crying...

Sister Dolly asked me for advise on how I could help Novina in order for her to reduce her suffering since I had gone through a difficult time of chemo therapy. Thus, I requested Sister Dolly help me to pass over a handmade photo frame with encouraging words and a message to Novina which said "Novina, I also passed through the hard time of chemo, you are luckier than I as I have two legs but I lost my freedom, however you still can walk with 1 leg left." I believe she understands the meaning behind my words and she stops crying. Later, I managed to ask Novina to write about her experience in fighting cancer and she gave a message as below:

"I know Jason from the first time when I was still suffering the after effects of chemo and pain. One of the volunteer sisters told me the story about Jason, I had become disabled after one leg was removed, but Jason lost both of his legs' function. I refused to do chemo due to the side effects but Jason had completed his chemo and he still needed to face the challenge of cancer cells in his body. This person has given me inspiration and always encourages me to move forward. I am so grateful to him as he has given me the motivation so that I can continue on write my life. Although we are both physically disabled but our resolve to live is more powerful than others."

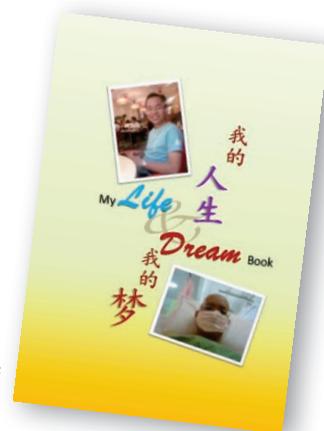
May be you may ask who is Jason? My name is Jason Teh, I became a Blood cancer patient at 36 years of age when I was diagnosed with Aggressive B Cell Lymphoma Cancer Stage 4; I needed to stay at Hospital for chemotherapy in 2011. At the same time, I also lost my ability to use my legs and my urinary function due to a botched-up surgical procedure on my spine cord. Then, I stoped my chemo treatment in the end of 2012 because the result of chemo was not as good as expected. I was discharged from hospital and asked to rest at home.

I went home from the hospital for about a year, I started to practise Dharma teaching and understood the meaning of our real life that we need to go through being born, getting old, sick and lastly facing death. I learned that I must make use of my limited time on earth helping others or else my balance of my life will be wasted by just standing at the same place. I learned to "Speak kind words, think good thoughts, do good deeds, and walk the right path". That's why I helped Novina and others to overcome their obstacles when volunteer Sister asked for my help.

Moving forward, I completed my "Life and Dream" booklet on 1st June 2013, it is used by volunteer groups to share my story with other cancer patients when they face problems.

Meantime, I managed to sponsor a kid from Myanmar through "World Vision" on 8th June 2013. My sponsorship has lasted for 5 years until 2018.

I continue my Dharma practice every day as it can make me calm and create my wisdom to understand the meaning of real life. It is encouraging me to continue "walk" the right path so that I would not suffer in my next life if I do good deeds in this life.



I also started thinking how to improve my quality of life. My dream was to buy a house for my parents to live in. But I lost my job and income after I became a bed-ridden cancer patient. However, I didn't give up and I started to save my insurance compensation. Our family was successful in getting an abandoned house on 2017 and we have renovated it with OKU environmental friendly facility for my convenience of staying. Lastly my mom and I moved in to new home which was fitted with lift facility in 2020. When I had set my target to make my dream come true, I faced a lot of obstacles to save money with no income at all, and finally I broke through my limit and my dream came true.

The year of 2021 is a challenging year due to pandemic of Covid-19 in our country. I still continue my mission by sharing my past experience with public through writing in my personal blog in Facebook. (Facebook: Jason's Life & Dream Book - [https://www.facebook.com/ 贾森的人生及梦想记事簿-Jasons-Life-Dream-Book-112051134034420/](https://www.facebook.com/贾森的人生及梦想记事簿-Jasons-Life-Dream-Book-112051134034420/)). In my personal blog, I have shared my experience about hospital nurses, doctors, chemotherapy treatment, hospital food and proper diet, my life after chemo, my Dharma practise experience and so on.

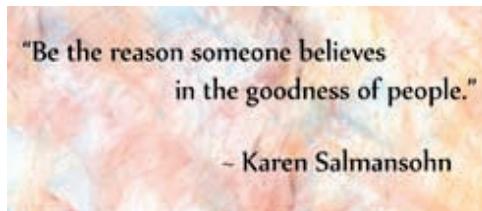
Our life is too short, especially for a cancer patient like me. I need to grab whatever opportunity that I come across and make use of it to help others. I have heard that a lot of cancer patients waste their life and had given up when they were diagnosed with cancer. If we can make use of our life in more meaningful way, it will make better rather than waiting for the time to be end, right?

Lastly, in the face of adversity, we must be grateful, for such opportunities do not come by easily in our life. Those who cherish blessings will create blessings. Those who create blessings are truly spiritually wealthy. As a cancer patient, one still can set many targets or dreams, as long as one does not give up, your dream can come true one day, believe in yourself. Remember we must live every day as our GREAT day!

Sharing

By Zakiah Binti Abul Khassim

You might have heard the saying that "nothing comes free in life". Well, you'll be surprised that there are priceless things that come free and with added value of tender loving care. That's what we, the family of Shariffah Bee would like to describe "Penang Hospice Society"(PHS). I have known PHS from my relatives who were terminally ill way back in 2010. Then I was just visiting and hearing good stories. It was until the moment my mom was brought home with a bad prognosis that we had to personally deal with PHS. My mom was in coma when we brought her back on the 20/10/2018 and that is when PHS became significant to my late mom and our family.



When she arrived home, we were greeted warmly by your nurse who readily offered her comforting hug and moral support. PHS was ready with whatever we needed including the special bed, suction machine etc. "Lost" was what we felt as we had no experience in dealing with a comatose patient. That is when, Ms Molly was ever ready to assist, teach and guide us on handling our mom. She had always been there for us and readily answered our messages way beyond working hours. She had without fail come regularly to monitor our mom's critical condition and each time offering her advice. We saw how much she actually sincerely cared for our beloved mother and at the same time gave us confidence in handling a bedridden patient. We have indeed learnt so much from Ms Molly.

We were deeply moved also by the care and attention of your doctors and specialist namely Dr Regina Yeap and Dr Nagappan in those challenging times. In the 2 1/2 years, my mom went through a series of complications during which Ms Molly was always ready to help us in any way she could. She had been very professional. Her personal touch and care went a long way more than what her job required. She had diligently and professionally treated my mother's pressure wound and general wellbeing throughout the 2 1/2 years. From periodically changing the ryles tube, inserting catheter, and looking into my mom's skin issues which repeatedly occurred. There isn't any word of thanks sufficient enough for Ms Molly and PHS for their assistance until the demise of our beloved mother.

On the day of her demise, Ms Molly immediately came and saw us through in the reporting processes and again offered us emotional support. She had been more than a nurse to us.

Indeed such warmth and professional services are rare and priceless and will forever never be forgotten. In this material world, no amount of money can be equivalent to such services given by PHS. Our appreciation to Ms Molly and Penang Hospice Society is beyond any description.

Last but not least...

A word of thanks seems too lame.... Nevertheless we still wish to give Penang Hospice Society and Ms Molly our greatest and utmost appreciation and sincerely wish, the Centre all the best in the best. We wish to reiterate that there isn't a single word nor a thousand word that could describe our appreciation for Ms Molly for her services to our beloved mother.

God bless. Thank you again.

Written by:- Zakiah Binti Abul Khassim

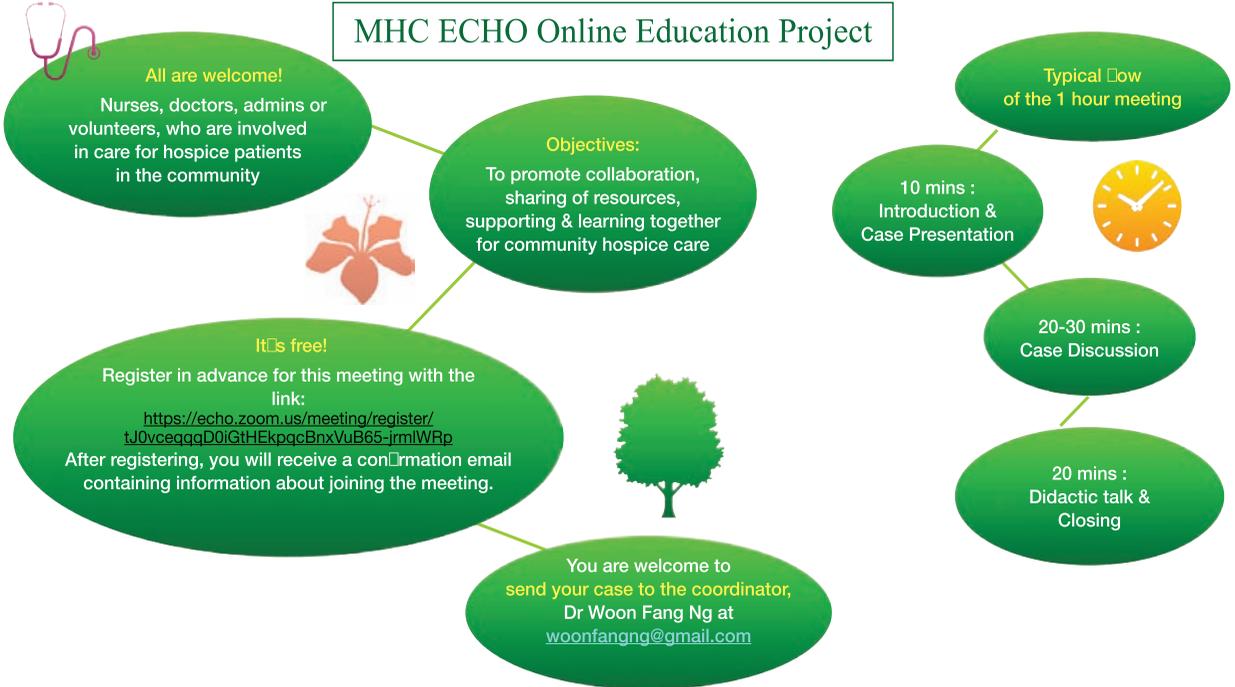
For and on behalf of the family of The Late Shariffah Bee bt Yusoff.

1st April 2021





MHC ECHO Online Education Project



MHC ECHO Upcoming Schedule

Every alternate Friday

Date & Time	Topic	Speaker of the Didactic Talk	Facilitator	Case Presentation
4.6.2021 9am-10am	Supporting grief & bereavement in adult	Ms Nur Liyana Shamsudin (Clinical Psychologist)	Dr Siow Yen Ching	PPCS
18.6.2021 9am-10am	Supporting grief & bereavement in children	Dr Koon Sim Lan	Dr Ng Woon Fang	FHL Hospice Care
2.7.2021 9am-10am	Spiritual care in community hospice	Dr Diana Katiman	Catherine Ooi	Kasih Hospice
16.7.2021 9am-10am	Assessment of nausea & vomiting and pharmacological management	Dr Fazlina Ahmad	Dr David Capelle	Sandakan Hospice
30.7.2021 9am-10am	Giving injectable medications at home	IKN CPC (Community Palliative Care) Team	Dr Fazlina Ahmad	AsPaC
13.8.2021 9am-10am	Antidepressants – When and how?	Dr Siti Noor Munirah	Dr Lam Chee Loong	Invitation to NCSM Sarawak
10.9.2021 9am-10am	Psychological First Aid (PFA)	Dr Rachel Ting Sing Kiat	Dr Ng Woon Fang	Invitation to Hospis Melaka

If undelivered, please return to **HOSPICE BULLETIN, Rumah Hospis Pulau Pinang, 250A, Jalan Air Itam, 10460 Penang, Malaysia**
WISH LIST

APPEAL

ADOPT PATIENTS TO HELP US PROVIDE PALLIATIVE CARE

Palliative care aims to reduce health related suffering for people with advanced illnesses.

Penang Hospice Society (PHS), registered in 2001 is a charitable tax-exempt, Non-Government organisation. Our focus is providing Palliative Care for patients with advanced, life threatening illnesses. This includes patients who no longer respond to curative treatment. This care does



its best to improve the quality of life of the patients and their families through the prevention and relief of suffering by means of early identification, assessment and appropriate treatment of pain and other problems – physical, psycho-social and spiritual.

THE HOSPICE AT HOME PROGRAMME

This programme provides Palliative Care by experienced doctors and nurses in the homes of patients with advanced diseases. This innovative service, not provided by the Government Health Service, is provided free of charge. Since starting this service in 1992, we have serviced about 10,000 patients and their families.

OUR APPEAL

The average annual cost for looking after a Hospice patient is only RM1,500. We appeal to you and/or your ORGANISATION to ADOPT one or more patients.

We will provide you permissible information of the patient/s you adopt, and provide you with regular updates.

Change of address Remove from mailing list (please tick where appropriate)

Name: _____ Tel: _____

Address (new): _____ Fax: _____
Postcode _____

Please send / fax this to:

Rumah Hospis Pulau Pinang, 250A Jalan Air Itam, 10460 Penang, Malaysia.

Tel: 604-228 4140 Fax: 604-226 4676 Email: penanghospicesociety@gmail.com