

Preventative Medicine in Malaysia



Dr. Ken Lin Tai '08 benefitted from the hands-on approach to medical education at Dalhousie, and as such has pushed for the same approach to be used by her medical students in Malaysia.

By Dr. Ken Lin Tai '08

I had always wanted to pursue a career in public health, and in medical school I thought there would be nothing cooler in the world than being a disease detective, hunting down exotic viruses in the remotest regions of the planet. Well, I was wrong, because teaching public health subjects to a group of 19- and 20-year olds can be just as exciting and challenging. It just wasn't what I had in mind upon graduating from Dalhousie Medical School.

The hallways of the school of public health at Johns Hopkins University (where I completed my preventive medicine residency) were constantly filled with individuals sharing their inspiring stories of working in health missions in the wilderness of South America and Africa. But there were also plenty of conversations revolving around the "medical brain drain" problem afflicting many developing nations. I decided to return to Malaysia after the completion of my residency because I realized that there was still much work to be done at home. Malaysia, like most developing

countries, is seeing an increase in the prevalence of non-communicable diseases. Malaysians are getting heavier and unhealthier. We are now the most obese country in South-East Asia, and we are currently ranked sixth in Asia. The rate of cardiovascular diseases, diabetes and cancer has risen in the past decade. Smoking rates among young Malaysians are alarming (the 2011 Global Adult Tobacco Survey showed that more than half of all Malaysian men between the ages of 25 to 44 are smokers). The burden of non-communicable diseases is becoming a strain on the nation's heavily subsidized public healthcare system. The menace of communicable diseases cannot be ignored either, as globalization has made emerging infectious diseases originating from countries near and far an ever-present threat.

As physicians play such an important role in health promotion, I believe that the delivery of adequate and relevant public health training for future doctors must remain a priority in Malaysian medical schools. I decided to venture

into the world of academia to be a part of this process, and I am now a faculty member at a local medical school located just outside the country's capital city, Kuala Lumpur. I primarily teach and conduct research in public health-related topics, such as epidemiology and disease prevention and control. Imparting public health knowledge to medical students can be a trying affair at times, for many of them come to medical school just wanting to diagnose rare illnesses. It is not unusual for me to hear questions like, "What does public health have to do with me becoming a doctor?" or "Why can't I just learn how to treat patients?" on my first day of class with these students. The job is made tougher by the fact that most medical students in Malaysia enter medical school after completing a one or two-year pre-university course post-high school, since undergraduate education is not a prerequisite for medical school admission. As the faculty uses problem-based learning and collaborative learning models alongside more traditional teaching methods, many of these students

face problems migrating from a teacher-centric environment to a student-centered learning environment normally found in institutions of higher learning.

But along with its challenges, this job has also presented me with opportunities that I wouldn't have had elsewhere.

As the faculty is fairly new (we will be admitting our fourth class of medical students later this year), I have been considerably involved in the faculty's medical curriculum development and implementation process. I had benefitted immensely from the hands-on approach to medical education at Dalhousie, and as such have pushed for the same approach to be used with my medical students.

Aside from the challenges mentioned earlier, other new developments will change the way Malaysian physicians practice in the future. The government is currently considering an overhaul of the national healthcare system in an effort to better control healthcare costs and to improve accessibility and health outcomes. The number of new medical schools has rapidly increased in the last few years, causing an acute shortage of teaching staff and calling into question the quality of medical education in the country. Some, including myself, continue to worry that there are not enough measures taken to improve the availability of postgraduate programs for young doctors in Malaysia.

These are interesting times indeed, and I am excited to be a part of it all!



Dr. Ken Lin Tai '08 with second year medical students in Malaysia.

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