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( PERDANA MENTERI )

UPACARA: PERASMIAN PERSIDANGAN "PERSPECTIVES IN PERINATAL MEDICINE"

TEMPAT: FAKULTI PERUBATAN, UNIVERSITI KEBANGSAAN MALAYSIA

TARIKH: 13 NOV 1981

MASA:

Terlebih dahulu saya mengucapkan ribuan terima kasih kepada penganjur Persidangan ini yang telah memberi penghormatan kepada saya untuk merasmikan Majlis ini pada pagi ini. Saya mengambil kesempatan ini untuk mengalu-alukan kunjungan dan penyertaan peserta-peserta luar negeri. Kepada peserta-peserta tempatan pula saya mengucapkan setinggi-tinggi tahniah di atas daya usaha mereka untuk meneliti satu aspek bidang perubatan yang penting bagi negara kita.

Ladies and Gentlemen.

Before I go into the subject proper of this meeting, may I be permitted to say a few words on Man and his plans. "What man proposes, God disposes". We have often heard this saying quoted usually to imply that man can plan for all he is worth but God can frustrate all his plans. Obviously this saying derives from the pre-Islamic concept of God as baleful and oppressive and constantly demanding sacrifices.

2. But we know that Allah is Merciful and Compassionate. He does not frustrate us because He is spiteful. Therefore we can plan and regulate, with faith in Allah and His bounty, and what He determines should be our achievement may be even greater than we have a right to expect. Indeed if we look back our good fortune is totally undeserved. But we do not look back, nor are we given to gratefulness to our Creator.

3. I say this as a preamble because there are likely to be people who will regard planning for health care as a trespass on the power of Allah to dispose things as He wills. Nothing is further from the truth. All we are doing is to tie the proverbial camel. If Allah wills that the camel be stolen after that, we do not question His wisdom. But surely to do nothing to prevent the loss of the camel is tantamount to expecting Allah to work for us. I cannot think of anything exhibiting a lack of taqwa than to regard Allah as literally your servant, to look after your property.

4. Health is a property, a nikmat, conferred us by Allah. As we learn more and more about health and the sciences related to it, we must realize that it is not Allah Who conferred upon the newborn the deformities and the weaknesses. It is all largely our fault. Allah meant the

newborn to start life well and healthy, as clean physically as it is spiritually. But, we through our laziness and failure to learn to understand the physiological and pathological laws of Allah, we have caused the newborn to be handicapped at birth. It is not the will of Allah to cast a blight on the child. It is we who have caused it. And we are doubly to be blamed if, knowing we can prevent the handicap, we do not do so.

5. It is in this light that I see all our efforts to ensure freedom from ill-health. Just as Allah has given us light so we may see our way, so has He given us the faculty to think in order that we may understand His laws and use them to prevent our blundering around in the world He created.

6. It is in this light that we should see the provision of basic health care as a priority in this country. It is in fact an important aspect of our total effort to improve and uplift the quality of life of our people. One of the ways for achieving this objective has been the provision and improvement of infrastructure services for as wide a segment of the population as possible. This has contributed to a considerable decline in our mortality trends and a steady increase in life expectancy over the years since our Independence in 1957. With regard to infant deaths, we have also seen an encouraging decline of more than 60% since 1955.

7. This Conference is, I believe intended to look at a narrower aspect of health hazard, namely the perinatal mortality rate. The perinatal period is now considered to be a very important phase of human development because what happens during this period may affect the quality of life period. Health care providers and planners in their respective roles ought to be concerned with this discrepancy. I understand this concern has been translated into a proposal for a Perinatal Project in Malaysia funded initially by the United Nations For Populations Activities (UNFPA). This project aims to study the rather slow improvement in our perinatal performance and to suggest corrective measures which could be undertaken to rectify this. Since various agencies are involved in the design and provision of broad health care services for the population, it is perhaps appropriate that the Ministry of Health, the National Family Planning Board and the National University of Malaysia are collaborating in this Project. The functions of these agencies should be clearly defined. It appears that the National Family Planning Board is providing the initial fund and core personnel to allow experts from the National University of Malaysia to develop a system of perinatal care which is of acceptable standard using the facilities of the Ministry of Health already in existence in and around the Maternity Hospital, Kuala Lumpur. The interaction and cooperation of these agencies should help us assess our performance critically, and ultimately give rise to measures for improving our perinatal performance in the

near future. If this commendable collaborative effort should succeed in its goals, perhaps this framework could lead to the establishment of the first Perinatal Centre in the country, to be followed in later years by the establishment of similar centres.

8. Mishaps which occur during the perinatal period are implicated not only in neonatal and infant deaths, but, the survivors of these mishaps could end up with various types of mental and physical handicaps. Prediction of mishaps before they occur and proper intervention could conceivably enable the practising specialists in this field of medicine to reduce disabilities arising during this crucial period of human development. However, before the specialists can step in, the ordinary health care personnel should be able to detect pregnant mothers who are high risk cases, and to refer them. Thus not only the specialist but the generalist physician and other allied personnel, particularly nurses and midwives, have their respective roles to play in order to optimise pregnancy outcome.

9. The role of informed public health personnel in educating the public is also of relevance here. Counselling on spacing of pregnancies, proper nutrition during pregnancy and recognition of early danger signs by the lay public could also lead to better perinatal performance at the national level.

10. Technological advancement has been rapid over the last couple of decades enabling the present day specialist to doctor the mother as well as the baby while still in the womb. Expertise available at the National University of Malaysia should continue to develop this area of study and help transfer relevant knowledge for the benefit of all in this country. Despite preventive measures, however, some babies may still be born with problems requiring urgent attention. Therefore, an organized approach in the management of these babies in special units need to be developed.

11. Investments in sophisticated technology alone may not be a sound economic proposition. Only special centers can hope to handle these because specially trained manpower, both medical and para-medical, is required. It is here that the Faculties of Medicine in the universities can play a role, both in terms of training and organisational planning.

12. In order to plan strategies, problem areas need to be defined. One of the tools of modern scientist is statistics. I was made to understand that during the preparatory stages of this Project relevant statistics have been compiled. Here, again the various agencies involved in the Project could interact to translate these into tangible terms for practical application. Data collection and management should be standardized to facilitate comparative studies of performance in other areas of the country as well as for comparing our performance with those available at

other international centres. The National University of Malaysia, as the research and training element of this working group should consider the enhanced role it could play.

13. This Conference has brought together various people involved in this branch of Medicine. The deliberation of this Conference with the participation of the invited speakers should serve to improve your understanding of the relevant aspects of Perinatal Medicine in this country.

Tuan-tuan dan Puan-puan sekalian.

14. Saya harap Persidangan ini akan berjaya melahirkan buah fikiran yang dapat meningkatkan lagi kemampuan bidang perubatan perinatal di negara kita. Dengan kata-kata ini saya dengan segala sukacitanya merasmikan Persidangan ini dan melancarkan Projek Perinatal Malaysia.