

## **INVITED SPEAKERS**



### **Dr. Ranjini Sivaganabalan**

is a consultant emergency physician and clinical toxicologist, currently head of the Emergency and Trauma Department at Hospital Shah Alam. She is a committee member for Clinical Toxicology Services under Emergency Medicine Services for the Ministry of Health Malaysia. Dr. Ranjini is involved in obtaining antidotes and storing them for the Ministry of Health. She is working on improving reporting systems for poisoning in Malaysian hospitals to enhance toxicovigilance and toxicosurveillance. She leads the Clinical Toxicology special interest group for the College of Emergency Physicians Malaysia and trains doctors and paramedics in clinical toxicology. Her research interests include pesticides and drugs of abuse. Dr. Ranjini has been practicing in Malaysia since 2006 and has been involved in managing the first methanol poisoning outbreak in Malaysia. Since 2022, she has been assisting the National Poison Centre by taking on consultations for managing complex cases referred by clinicians.

### **Strengthening Poisoning Reporting System in Malaysia: Working Together for a Safer Nation**

Poisoning reporting systems in Malaysia are established under the Ministry of Health Malaysia and the Department of Occupational Safety and Health (DOSH), Ministry of Human Resources Malaysia. Clinicians working in the public and private healthcare system are required to report all poisonings to the Ministry of Health. Cases involving occupational poisoning must be reported to DOSH as well.

However, a study conducted by K Govindasamy and N Samsuddin in 2022, highlighted issues related to notification of occupational diseases and poisoning in the state of Pahang. The study found that notification of occupational poisoning was scanty with the highest occupational disease reported being noise related hearing disorders. For a period from 2016 to 2019 only 16 cases of occupational poisoning were reported.

Intentional pesticide poisonings in Malaysia, which often lead to significant morbidity and mortality fall into a grey area of reporting. Pesticide poisoning is seen as an occupational poisoning which must be reported to DOSH. However, when the pesticide poisoning is intentional, most clinicians are unclear regarding the need to report the poisoning to DOSH.

The process of reporting non occupational poisoning except for certain specific poisonings such as methanol and food related poisoning are unclear to most clinicians. The sale of supplements online have led to increased unintentional poisonings which are particularly difficult for clinicians to report as they are unclear of the substance and the correct agency to forward their report. Poisoning from drugs of abuse are also concerning especially when it involves accidental poisoning in the pediatric age group. Currently, unintentional poisonings related to drugs of abuse and the sale of online supplements are only reported to the police. Supplements should be registered under the National Pharmaceutical Regulatory Agency. Supplements sold online which are not registered or contain undeclared pharmaceuticals have to be reported to the agency.

The World Health Organisation looks at poison centres as a specialised service that advises on the diagnosis and management of poisoning. Poison centres play an important role in toxicovigilance and toxicosurveillance. The Malaysian National Poison Centre was established in 1994 under Universiti Sains Malaysia which is under purvey of the Ministry of Education. Clinicians are not required to report poisoning cases to the National Poison Centre. Only cases consulted to the poison centre are logged into the database. As a result, the poison centre database is not reflective of the true burden of disease for Malaysia.

There is a need for a simpler, unified point of poisoning reporting not just for clinicians but laypersons as well. A poisoning reporting system as opposed to systems with a central database for more accurate poisoning data in the country is required. The National Poison Centre can play an important role in coordinating reporting for the nation working closely with all relevant agencies for better toxicovigilance and toxicosurveillance.