

OGSM NEWSLETTER

FROM THE PRESIDENT'S DESK



Obstetrical & Gynaecological
Society of Malaysia



The 2014-15 term for this committee is in full swing and it gives me great pleasure to inform members of the society that your council has already had three meetings and drawn up plans for the coming year.

The 23rd OGSM Congress was a resounding success with a turnout of 650 delegates at a new venue namely the One World Hotel. The scientific programme was innovative as we had 3 Masterclass sessions in Ultrasound, CTG and Colposcopy a rather forgotten area of Gynaecology. I must say we had excellent Masters to conduct these sessions and those of you who did not attend the congress have missed out. We also saw the return of the great O&G debate and we had two icons namely Datuk Dr Subramaniam and Dr Ng Kwee Boon pitting horns against each other and it was a treat. All in all it was a great weekend of learning and fun.

The RCOG Life Saving Skills Emergency Obstetrics & Newborn Care Course was initiated in Malaysia in 2008 by Dr Gunasegaran and his team. After training almost 600 Doctors nationwide over 30 courses the curtain was drawn down on this course in 2013. However seeing the need for such a course in this region, Dr Gunasegaran and his team have successfully formulated our very own course namely INTENSIVE COURSE IN OBSTETRIC EMERGENCIES (iCOE). The inaugural course is on 19-21 September 2014 and this marks another milestone in the development of our society. The course is also going to be conducted in our neighbouring countries the first being Myanmar. I would like to encourage all our members to attend and support this course. Those members who would like to become trainers should attend the 'Train the Trainers session' as the success and continuity of this course will ultimately rest on the shoulders of these trainers who will be the teaching faculty.

Another exciting project which is being carried out this year is the Commemorative book on the development of the practice of Obstetrics & Gynaecology through the eyes of the society. Professor Dr Zainul has been appointed the editor

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SECRETARY'S REPORT



The 23rd Annual Obstetrical & Gynecological Society of Malaysia (OGSM) Congress was held at the One World Hotel from the 5th to 8th of June 2014. This congress was organised by our President, Dr Shankar Sammanthamurthy and his able team. It was successful both scientifically and socially as we have had very positive feedback from the O&G fraternity.

Before the Annual General Meeting this year, OGSM held an unprecedented Subspeciality Committee meeting. At the meeting, our fraternity working in the various subspecialities held discussions about the direction they wished to see the subspeciality take, activities that the group would like to organise and then chose their subspeciality chairman. Congratulations to our Subspeciality committee chairmans for 2014-2016,

Fertility and Sterility	Dr Balanathan Kathirgamanathan
Maternal Fetal Medicine	Dr Bavanandan Naidu Gopal
Gynaecological Endoscopy	Dr Sevellaraja Supermaniam
Gynaecological Oncology	Dr Suresh Kumarasamy
Urogynaecology	Dr Aruku Naidu

These subcommittee chairmen were given freedom to organize the subcommittee related activities of their choice. We look forward to these CME activities.

MEDICAL INDEMNITY INSURANCE AND TAXATION:

I was surprised to receive a call from one of the OGSM members enquiring about Medical Indemnity Insurance and Taxation. The issue of professional indemnity and taxation have been previously highlighted in OGSM Newsletters volume 2011/2012 Issue 1, Issue 2 by Dr Krishna Kumar and in the OGSM Newsletter volume 2012/2013 Issue 1 by Dr Suresh Kumarasamy about medical indemnity insurance and tax matters. If you have missed these newsletters, you can access them online at our OGSM webpage under the Member's Area or at http://www.ogsm.org.my/pub_newsletter.php

In 2012, OGSM formed a subcommittee on insurance related issues impacting on members of the society. Dr Chakr Sri Nagara (Chairman), with panel members Dr Fong Chee Kin, Dr Haris Hamza, Dato Alex Mathews, Dr Milton Lum & Dr Tang Boon Nee. The detailed subcommittee report has been published in 49th AGM report, 7th June 2012.

We also wish to highlight that premiums paid for professional indemnity insurance should not be used as a tax deductible expense. If you do this, any successful claim against the doctor will be deemed as earned income and you will be taxed for this "income". This is outlined in the the Inland Revenue Board Malaysia, Public Ruling No: 3/2009, date of issue 30th July 2009 on Professional Indemnity Insurance.

It is not only us doctors that face this issue, other professional groups like lawyers and engineers also face similar problems. OGSM had a discussion with the President of the Institute of Taxation Malaysia. He has advised us not to pursue this issue under the umbrella of OGSM but for all the specialities to unite under the MMA and handle the matter with the Ministry of Finance. MMA president and past president of OGSM, Dr Krishna Kumar has taken up the matter with the Ministry of Finance. Our Ministry of Health is implementing a new rule that professional indemnity insurance is compulsory for all practising professionals. Therefore, this issue is currently being discussed and we are waiting for answers from the respective ministries.

OGSM new council members are working tirelessly on O&G related issues affecting our fraternity. Hope our work succeeds for betterment of the mankind.

DR THANEEMALAI JEGANATHAN
SECRETARY

LIFE MEMBERSHIP CONVERSION

At the recent AGM a resolution was tabled that allowed all members who reach the age of 65 to qualify for life membership. The resolution attracted a lively discussion. Certainly there were flaws in the resolution but the essence of what was being proposed was clear. There are some senior members who have contributed significantly in the past but are now in default due to non-payment of their annual dues, a princely annual sum of RM50. While this may seem odd to many, I can think of many good reasons. More pressing personal circumstances, poor health or a lack of enthusiasm for the society are distinct possibilities. Whatever their reasons may be, it leaves the society with the distinctly unpleasant task of having to hound these individuals for this paltry sum to avoid a run-in with the registrar of societies. Suffice to say, the experiences of our sister organizations under similar circumstances have not been pleasant. If our attempts to recover these subscriptions are unsuccessful, it is likely that we may have no choice but to terminate the membership of these particular members, an option that we find distasteful and perhaps even disrespectful, considering their age and illustrious past contributions. As the society is in a financially enviable position, isn't automatic life membership the most sensible way forward? Therefore, if you have reached 65 or are above this age, we will be calling you soon to offer a conversion to life membership. However terms and conditions may apply (don't they always)!

AOCOG 2015 REGISTRATION DISCOUNT

Council has decided to allocate a substantial amount of society funds to provide a 50% discount on the AOCOG 2015 registration fees for all members in benefit. This will enable a higher level of participation among OGSM members. A unique point system has been devised to enhance transparency in how these funds are dispersed but it is envisioned that the funds allocated would be more than sufficient to serve its purpose. We shall be writing to all members in due course to further inform them on this exciting opportunity.



OGSM- A BONA FIDE LAND OWNING ORGANIZATION!

I am happy to inform you that the sales and purchase agreement for our newest property has officially been signed by our trustees. I for one believe that this is certainly the way forward. Having assessed many options, property investment appears the most sensible, safe and stable method of conserving the society's financial wealth.

As always, we value your thoughts and views and look forward to hearing from you at any time.

Best wishes to all.

DR EESON SINTHAMONEY
TREASURER

(cont. from pg 1)

and he has dived straight into the project. Council is targeting the launch of this book in June 2015 and I would like to invite members who have photos, documents or historical anecdotes to channel them to Prof Zainul as resource material for this book.

One of the main activities of the society has been to organise and conduct courses for our members at all levels including international events. Of late council has been engaging with the trainees as we believe they are our future. Dr Nazimah has been instrumental in drawing up structured training courses both for Part 1 and Part 2 of the membership exams and they have been very well received. The trainees have also been an integral part of our OGSM congress and have contributed immensely to the running of the event over the weekend.

The OGSM Calender is packed with events till the AOCOG conference in June 2015 at Kuching Sarawak and you can find all the details of the events in the revamped OGSM website. Another international event you will not want to miss will be the APAGE conference at the end of November in Kuala Lumpur.

I would like to thank the members for giving me this opportunity to serve the society and it is indeed a great honour. Please do not hesitate to send me your suggestions and feedback on any issues you feel that council should address.

DR SHANKAR SAMMANTHAMURTHY
PRESIDENT

COUNCIL INTRO



From Left: Huay-ye, Mei Lin, Boon Nee, Nazimah, Sharmina

HUAY-YEE

Diplomat, Architect or if had married the Indonesian tycoon in my past life, a tai-tai extraordinaire

MEI LIN

My ambition from Standard 1 was to emulate my dad and be a doctor. It was unwavering till I had to put in my application for university placement. I had a panic attack because I had not considered anything else. After one look at the open day booth for dentistry, Medicine it was (I freaked out at the gross photos). My current aspiration is to be a Tai-Tai with an occasional clinic to run.

BOON NEE

Politician for independent party to bring about betterment for mankind.

NAZIMAH

Mathematician. The precision and the fact that if you are on the right mathematical track, everything will fall into place perfectly

SHARMINA

A marine biologist, professional diver or a tycoon ala Coco Chanel. Nothing makes me happier than when I am diving in the ocean. It can be relaxing or an adrenaline rush. *Her theme song is "I wanna be a Billionaire" -Ed.* In her real life, Sharmina is a Clinical Specialist in Ampang Hospital. She is passionate about training and takes an active role in the training of house officers and registrars.



From Left: Shankar, Zainul, Prashant, Eeson and Thanee

SHANKAR

I always wanted to be a doctor. Boring I know but it was because of the TV series " Marcus Welby MD". I know it is before most of you but there was this assistant doctor acted by James Brolin who rode a big bike. Really cool so I wanted to be like him. Then I started housemanship, posted to A+E, 10 fractured femurs a day from bike accidents, the rest is history, never took a bike license for obvious reasons.

ZAINUL

I wanted to be a District Officer (DO) – the most powerful man in town. The main reason is because the DO is the highest income earner in my hometown. Every Merdeka day, everyone will march past and salute him in our town square. I thought " Wah, this guy is great and I want to be like him". When I was sent to VI, my horizons were widened and I wanted to be a pilot. Thank God I failed the motion test. Vomited like hell!!! So had to do HSC instead...

Prof Zainul, our President Elect, is currently the Deputy Dean of Post-Graduate and International Affairs, Faculty of Medicine, Universiti Kebangsaan Malaysia. He has a special interest in Infertility especially, male infertility.

PRASHANT

I still don't know why I became a doctor.

EESON

A lawyer or a Chetti Haram. *Hence a very successful treasurer for OGSM- Ed*

THANEE

Being born in a family of Chettiers, my ambition was to be a man of money. Fate played her hand as I was granted a place in Medicine after doing a year in Engineering. The rest is history.

MATERNAL FETAL MEDICINE SUB COMMITTEE



I feel humbled and privileged to have been appointed as the Chairperson of the Maternal Fetal Medicine Sub-committee in OGSM for 2 years.

First and foremost, I hope to foster closer ties and communication among the MFM community with the hope of building a permanent

link for facilitating discussions, disseminating knowledge and circulating the latest updates.

With the rapid progression in the field of MFM, I foresee many challenge ahead; in particular, the area of medical litigation involving childbirth. There is a need for us stay connected amidst exchanging ideas and updating ourselves in this ever evolving field.

With this in mind, an e- group was initiated linking almost all MFM specialists in the country and all specialists with MFM interest. The credit for this goes to Dr Muniswaran, who has created this group and has initiated some thought provoking discussions.

I am hoping to rejuvenate the MFM interest group meeting. The planning is in progress and the tentative dates are on 11th and 12th of October. There will be invited members from other faculty relevant to MFM in this meeting, to provide valuable information and feedback on crucial issues pertinent to this discipline.

I sincerely hope this meeting meets the expectation of many and become a regular event in the MFM calendar.

Thank you.

DR BAVANANDAN NAIDU GOPAL

FERTILITY STERILITY SUBCOMMITTEE



I feel honored to be given the opportunity to head Fertility Sterility subspeciality for OGSM. In line with the objective of OGSM, this subcommittee aims to provide a platform to share basic knowledge and current advances in the field of reproductive medicine amongst our members. It will also allow us to network among ourselves in order to provide better care for our patients. The subspeciality will be organizing programs to accommodate both the needs of new members to the fraternity who are looking for basic knowledge as well as those interested in knowing current development in the field of reproductive medicine.

DR BALANATHAN KATHIRGAMANATHAN

GYNAE-ONCOLOGY SUBCOMMITTEE

ACTIVITIES OF THE GYNAECOLOGICAL ONCOLOGY SUB-COMMITTEE, OGSM (2014 – 2016)

The following activities have been planned:

GYNAECOLOGICAL ONCOLOGY UPDATE, PENANG, 25.1.15



The Obstetrical & Gynaecological Society of Malaysia in conjunction with the Malaysian Oncology Society (MOS) and the European Society of Medical Oncology (ESMO) will be organizing a one day Gynaecological Oncology Update on Sunday

25.1.15 at the Bayview Beach Hotel, Penang. This will be held on the last day of the MOS-ESMO Best of ESMO South East Asia Summit. The faculty will include local speakers as well as Professor Michael Quinn from Melbourne,

Australia.

Topics will include, Recent Advances in the Management of Gynaecological Cancers - the Role of Targeted Therapy, Concepts in the biology of ovarian cancer – the impact of genetics in clinical practice, Controversies in surgery and chemotherapy for ovarian cancer, Cervical cancer – current surgical management, Strategies and Options for the non-surgical treatment of Cervical Cancer. In addition, there will be case presentations and discussions involving Early endometrial cancer, Treating Advanced/ Recurrent endometrial cancer and Sarcoma of the uterus.

The registration fee is RM 300 (before 1.9.14). To register for this meeting go on to the conference website at www.esmomos2015penang.com.my and register for the one day registration on 25.1.15.

AUSTRALIAN SOCIETY OF GYNAECOLOGICAL ONCOLOGY 2015 ANNUAL CONFERENCE IN PENANG

The Australian Society of Gynaecological Oncology will be holding its 2015 annual meeting in Penang between Wednesday 8.7.15 and Saturday 11.7.15. This is only the second time in the history of the Australian Society that their annual meeting is being held outside Australia. This meeting is being supported by the Obstetrical & Gynaecological Society of Malaysia. The venue will be the Golden Sands/Rasa Sayang Hotel Penang. A team from Australia was recently in Penang to meet with me as well as assess venues.

The conference will be over three and a half days and the emphasis will be on prevention/newer technologies and innovations. The theme selected for the meeting is "Together we eradicate Gynaecological Cancer: An AustralAsian initiative". The meeting will start at noon on Wednesday 8.7.15 with Fellow teaching followed by a welcome reception. The meeting proper will start on Thursday 9.7.15 and will end with lunch on Saturday 11.7.15.

A number of experts in Gynaecological Oncology from Asia as well as Australia will be speaking at the meeting including Jim Nicklin, President of the Australian society. American speakers who have confirmed participation include Richard Barakat from Memorial Sloan Kettering Cancer Centre, New York and Warner K. Huh from the University of Alabama at Birmingham. Dr. Richard Barakat will be attending the meeting in his capacity as the President of the International Gynaecological Cancer Society.

Reduced registration will be offered to Malaysian delegates. There will be an opportunity for gynaecological oncologists and trainees from Malaysia to present papers. The OGSM Council of 2013/14 has agreed to help support trainees particularly those presenting papers to attend the meeting. The program is currently being developed and further details will be announced in time.

It is hoped that gynaecological oncologists as well as obstetricians & gynaecologists with an interest in gynaecological oncology from Malaysia will mark the dates in their calendars and attend this landmark conference in large numbers.

MASTERCLASS IN COLPOSCOPY

Due to the overwhelming response of delegates at the Masterclass in Colposcopy held at the 23rd Congress of OGSM in June 2014, a full day Masterclass is being planned. Details will be announced in time.

Bid for the 18th Biennial Congress of the International Gynaecological Cancer Society (IGCS), 2020.

The OGSM has forwarded an expression of interest to the International Gynaecological Cancer Society to host its 18th Biennial Conference in Malaysia in 2020. The bid committee is Chaired by Datuk Dr Abdul Aziz Yahya and the other members are Dr Suresh Kumarasamy and Prof Woo Yin Ling.

ASIAN SOCIETY OF GYNAECOLOGICAL ONCOLOGY

The close relationship between OGSM and the Asian Society of Gynaecological Oncology (ASGO) has resulted in ASGO holding symposia at the 22nd MICOG in 2013 and the 23rd Congress of OGSM in 2014. ASGO funded the travel of its speakers for these Malaysian meetings.

ASGO has also been very generous by supporting the travel of young doctors from Malaysia to attend workshops and congresses organized by the society. In 2012 and 2013 four doctors from UMMC and UKM have received travel grants to attend meetings in Japan. This year Dr Norlidar Mohamed from Hospital Tengku Ampuan Afzan, Kuantan has been awarded a grant to attend the 3rd International Workshop in Gynaecological Oncology at the Asan Medical Centre, Seoul, Korea.

The 4th Biennial Meeting of ASGO will be held in Gangnam, Seoul, Korea from 12th to 14th November 2015. It has been a tradition for ASGO to offer young doctors (below 40 years) from Malaysia travel grants to attend the meeting. Recipients of Travel Grants are usually required to submit abstracts for presentation. Details of the grants for the 4th Biennial meeting in 2015 will be announced at the appropriate time.

ASGO consists of individual members from Asian countries with a major professional interest, either as a clinician or as a scientist, in the prevention, treatment and study of gynecologic cancer. The aim of ASGO is to contribute to the development of gynecologic cancer science through research and exchange of information in medical science and friendship among members. The membership fee for ASGO for Malaysian doctors is US\$ 50 per year. Malaysian gynaecologists with an interest in Gynaecological Oncology are encouraged to join ASGO on line through the ASGO website at <http://www.asiansgo.org>

DR SURESH KUMARASAMY

OGSM FELLOWSHIP NIGHT



DR MATTHIAS MEYER-WITTKOFT
*Clinical Director Ultrasound and Prenatal Medicine,
Women's Hospital, Inselspital,
University of Bern, Switzerland*

OGSM was privileged to host a Fellowship night featuring Dr Matthias from Switzerland. He delivered a most interesting lecture on antenatal Infections emphasizing new approaches to the diagnoses and treatment modalities of these infections; especially CMV infections. His lecture left most of us inspired and more importantly, summarized clinical research in this area into clinical relevance. The trainees were grateful that he made a difficult topic easier to comprehend. It was a successful night both scientifically and socially. We would like to thank Dr CC Chung for inviting Dr Matthias to speak to us on OGSM's behalf. - Ed.



MFM MASTERCLASS

OGSM MASTERCLASS IN MFM

The MFM Masterclass was a full-day event and well attended by 39 trainees from around the country. Three lectures were delivered and the topics were chosen based on the request of the trainees. We discussed 'Problems with Monochorionic Twins' (AP Nazimah), 'Prenatal Genetic Screening and Diagnosis' (Dr Anna Liza) and 'Cardiac Disease Pregnancy' (Dr Muniswaran). There were two exam practice sessions conducted by Dr Sharmina where trainees attempted the SAQ and EMQ questions. They were given guidance and tips on how to answer these questions. A special session was also held where the trainees

had the opportunity to meet Dr Michael Samy who is the President of the College of O&G, Academy of Medicine Malaysia. Among the issues discussed during this session was the MRCOG pathway to the postgraduate qualification in O&G and the problems faced by the trainees who chose to take up the MRCOG pathway. The college has affirmed their commitment and will be working together with OGSM and the Malaysian Representative of the RCOG to look into the training matters to ensure that an effective training program is put in place for our postgraduate trainees.

ASSOC PROF DR NAZIMAH IDRIS

OGSM 2014 CONGRESS



23RD CONGRESS 2014 – ONE WORLD HOTEL

The 23rd Congress of Obstetrics and Gynaecology which was recently held at the One World Hotel in Petaling Jaya was a resounding success. A total of 640 delegates registered. While this was less than the number of delegates registered for the previous congress in 2013 (MICOG), the delegate numbers were well within the average numbers seen annually. Certainly, in the run up to the actual congress there were many moments of trepidation. The change in venue at a late hour due to special circumstances and other unanticipated concerns that cropped up including the late allocation of funds for our civil service colleagues to attend all added to the stress! However, in the final analysis, the organizing committee was rather satisfied with the end outcome as the venue was very well received by all and the hotel staff certainly lived up to expectations.



Dato' Dr Ronald McCoy Officially Opening OGSM 2014 flanked by Dr Tang BN and Dr Shankar

This congress saw us experimenting with some new ideas and the rekindling of some older ones too. We reintroduced the Thursday night start, something that we used to have in the past. Attendance for this event was reasonable but could have been better. Datuk Ambiga was a star attraction but unfortunately the nutrition topic that followed was rather under subscribed. The plenaries and symposiums were well received. We experimented with an outing to Kidzania for the kids. This was a successful venture although there were some hiccups. The kids certainly enjoyed themselves and we should consider continuing this effort in future congresses too.

The gala dinner was well attended although ticket sales were initially slow. The hall looked glorified befitting such a grand event. The music and dancing was impressive although a few senior members felt that their ear drums were being tormented!

I was told that the younger members danced the night away while the older ones (like yours truly!) – retired to the hospitality suite (by mistake) when I intentionally got lost on the way to the car-park!

Professor Sir Arulkumaran's masterclass was a runaway success (as always) and we were inundated with calls from nurses asking if they could just attend the master-class without actually bothering to register for the whole congress. Such was the enthusiasm for Sir Arul's teaching session!

The industry exhibition was also well received with delegates spending time at the booths assessing what new and exciting things were on show. All the available booth space was taken up. The freebies helped lubricate movement while OGSM's offer of three I-pad air's via the 'booth-visiting' lucky draw took affairs to a higher level.

All in all, our experimentation with a new venue and a slightly different perspective paid off. We hope the delegates enjoyed both the intellectual discourse as well as the fellowship and we look forward to meeting all again in Kuching in June 2015.

Best wishes to all.

DR EESON SINTHAMONEY

On behalf of the Organizing Committee



The Green Brigade

A MORNING WITH PROF ARUL



A MORNING WITH SIR PROF DR. SABARATNAM ARULKUMARAN

Sir Arul was kind enough to spare a morning with 39 O&G trainees when he was invited to speak at the 1st Global Manipal Alumni Health, Science & Technology Convention. Over 3 hours, he not only delivered lectures on intrapartum care and CTG interpretations, he also taught them how to critically appraise and answer EMQs. Sir Arul also provided unique insight into how the RCOG expects their candidates to answer these often difficult questions. OGSM would like to extend their thanks to the organizing committee of the 1st Global Manipal Alumni Health, Science & Technology Convention for helping us to arrange this wonderful session for our trainees. - Ed.



It's indeed a pleasure meeting with you. Thank you for taking time out to take a teaching session with us.

UROGYNAE WORKSHOP KUANTAN

UROGYNAECOLOGY WORKSHOP 2014 'GOLDEN YEARS THERAPEUTIC ORNAMENTS'

The Urogynaecology Workshop 2014 was organised by the Urogynaecology Unit of the International Islamic University of Malaysia (IIUM) and the Department of Obstetrics and Gynaecology, Hospital Tengku Ampuan Afzan, Kuantan. It is also a joint collaboration with the Malaysian Urogynaecology Association (MUGA) and the Obstetrical and Gynaecological Society of Malaysia (OGSM).

We were very fortunate to have many experts in this field come to talk to us. We wish to thank our esteemed speakers.

Consultant urogynaecologists: Dato' Dr Rozihan binti Ismail, Dr Ganesh and Associate Professor Dr Zalina Nusee.

Urogynaecology Fellow: Dr Faridah Mohd Yusof

Physiotherapist: Puan Norliza and her team from Hospital Tengku Ampuan Afzan.

A total of 96 participants attended the workshop. The majority of the participants were Obstetricians & Gynaecologists and masters' trainees, medical officers, physiotherapists and staff nurses from public as well as private hospitals.

We would like to convey our gratitude to the Obstetrical and Gynaecological Society of Malaysia for their continuous support in this medical education activity geared towards improvement of patient care.



ASSOC PROF DR ZALINA NUSEE

UNINTENDED PREGNANCIES

UNINTENDED PREGNANCIES, CONTRACEPTIVE USAGE AND MATERNAL HEALTH

A GLOBAL PROBLEM

Globally, 41% of pregnancies are unintended. The unintended pregnancies rate for Asia was 38%. The reasons cited for unintended pregnancies were substantial unmet need for family planning services in many areas of the world, poverty, education, non use, incorrect use or contraceptive method failure. Socio economic, regulatory and religious conditions also play an important part in the incidence of unintended Pregnancies.

It has also been found that the three main reasons for non use of contraception were opposition to contraception, perceived side effects of contraception and infrequent sex or no sex. However it's also been noted that more than 50% of women who cite infrequent sex or no sex as reason for not using contraception actually have had sex within the last 3 months.

Unintended pregnancy can only have 3 sequelae; abortion, miscarriage or a live birth. All there can be associated with maternal morbidity and mortality. It is estimated 48% of unintended pregnancies ended up in abortion, 38% as unplanned birth and 13% as miscarriages. The global abortion rate was 35 per 1000 women in the reproductive age group in 1995 and has stalled at 28 per 1000 since 2003.

THE MALAYSIAN CONTEXT

Extrapolating these figures into the Malaysian context with a current population of 30 million in March 2014 and an estimated 8 million women in the reproductive age group, the estimated number of abortions in Malaysia per annum will be 224,000.

This is equivalent to 600 abortions per day and 25 abortions every hour.

Malaysia's maternal mortality rate was 41 per 100,000 live births in 1995 and has been reduced to 28 per 100,000 (2008). This reduction of 31%, falls short of the Millennium Development Goal set by World Health Organisation of 75% reduction by 2015.

The Malaysian Confidential Enquiry into Maternal Deaths reported that only 20% of mothers who have died in pregnancy have ever used contraception. The reports have not reported an improvement in this figure for the past 15-20 years even though it has been repeatedly stressed by Ministry of Health Malaysia that better family planning uptake can reduce Maternal Mortality significantly.

With approximately 40% of pregnancies being unintended and preventable by contraception, it follows that many Malaysian women need not die from pregnancies that they never intend to have in the first place.

The Malaysian Contraceptive Prevalence rate since 1988 have never shown any improvement, hovering between 50 to 55 %. This is equivalent to the contraceptive prevalence rate for the Phillipines; a country where more than 85% of the population are Catholics and have very strong objections to the use of most Contraceptive methods.

In comparison, our neighbouring countries of Thailand, Vietnam, Singapore and Indonesia have higher contraceptive prevalence rate at 72%, 78%, 62% and 61% respectively.

The unmet contraceptive needs of married Malaysian women have widen over the years, signifying that more women are not using contraception despite their intentions of not getting pregnant. It was reported that the unmet contraceptive needs was 16% in 1988, has risen to 24% in 2004. This would mean that the unmet contraceptive needs for unmarried women would have been even more.

The data from teenage pregnancy was indeed alarming as well, recording 300% increase from 2010 to 2012 at approximately 6000 in 2010 to 18000 in 2012,

Baby dumping statistics was significant with the Royal Malaysian Police recording 407 cases from 2005 to 2010 with Selangor at the top of the list. This official figure is likely only the tip of the iceberg. Many more cases would have gone unrecorded or undetected.

TACKLING THE PROBLEM

We know from Global data up to 2010 that the stalling of the incidence of abortion coincides with the plateau of the contraceptive prevalence rate. Data from large studies in the United States have shown that contraception definitely prevents unintended pregnancies.

One important study looking at women at risk of unintended pregnancies had shown that 65% of women who use contraception consistently were responsible for only 5% of unintended pregnancies, whereby 16% of women who do not use contraception at all were responsible for 52% of unintended pregnancies. Better acceptance, uptake, choice of contraceptive methods is critical in reducing unintended pregnancies, abortion and maternal deaths. Serving the contraceptive needs of women will also reduce miscarriage rates as well as infant deaths.

Long acting reversible contraception, in particular, hormonal implants and intrauterine devices are particularly effective in decreasing the incidence of unintended pregnancies. These methods have been advocated by both the World Health Organisation and the National Institute of Clinical Excellence in the United Kingdom. The American College of Obstetricians and Gynaecologists have stated in 2012 that long acting reversible contraception is the best method in preventing rapid repeat pregnancies, unintended pregnancies and abortions. They should be offered as a first line contraceptive options to all women.

Unfortunately, the availability, accessibility and usage of such methods are low around the world and similarly in Malaysia, such methods are used by less than 5% of women who use contraception.

STATUS OF CONTRACEPTIVE PROVISION AND SERVICES IN MALAYSIA

Contraceptive services are provided by Ministry of Health, Family Planning and Development Board as well as The Federation of Reproductive Health Association Malaysia. In addition, contraception are available in private hospitals, pharmacies as well as private clinics. Most of the contraceptive methods are available in all four major service providers although provision ranges from free to subsidised to full payments.

In practice, there were difficulties noted in many areas of contraceptive provision that posed a challenge to the Malaysian women when accessing contraception.

OGSM PART 1 MRCOG/ MOG PREP COURSE 2014

10-11 October 2014
Primula Beach Hotel, Kuala Trengganu

Course structure:

This preparation course is designed for doctors who are planning to pursue postgraduate education in Obstetrics and Gynecology. The course content is designed to cover topics that will be assessed both in the Part 1 MRCOG as well as the Entrance/Part 1 MOG examinations. The speakers are experienced academicians and clinicians who are familiar with the exam structure and the clinical application of the basic sciences. Exam practice sessions consisting of single best answer questions (SBA) are incorporated into the course structure and feedback on performance will be given to participants.

Please log on to the OGSM website at <http://www.ogsm.org.my/> for more details

1. Long acting reversible contraception in particular hormonal Implants are only available in Ministry of Health Hospitals for selected high risks patients. These methods are currently unavailable for women in government primary care clinics such as Klinik Kesihatan.
2. Not all available contraception methods are available in all the service providers most of the time due to disruption in supply, availability of trained health care providers in fitting these devices and cost. Choice and continuous availability of methods are integral components in making sure women can continue to use their contraception method of choice to avoid pregnancy.
3. Contraceptive knowledge and training for healthcare providers are not standardized. This leads to inconsistency in providing and dispensing contraceptive advice. As a result, the woman may not be offered the most appropriate or even the correct advice and management. Ultimately this leads to a reduction in the efficacy of the contraceptive methods and increasing rate of unintended pregnancies.
4. The "Fear Factor" is very prevalent amongst Malaysian women in terms of myths and misconceptions about the side effects of contraceptive methods.
5. Socioeconomic and religious constraints are also important factors that posed difficulties for women in accessing contraception. Commonly, rural women may not have the economic ability to access highly effective methods such as long acting reversible methods due to costs constraints as well as non availability of trained personnel in a nearby clinic. Religious groups may impose upon their own views and beliefs about contraceptive practice which may not be in the best interest of the women concerned.
6. The Malaysian Law is not clear on its stand regarding the provision of contraception to adolescents. This has resulted in limited access to this vulnerable group and leads to a high incidence of teen pregnancies.

THE CHALLENGE FOR MALAYSIAN WOMEN'S REPRODUCTIVE HEALTH

Among the women:

We need to correct the myth and misconception and the opposition towards contraception.

We need to raise the socioeconomic status of women as it have been shown that much higher incidence of unintended pregnancies occur in the lower and middle income group.

UNINTENDED PREGNANCIES

We need to raise the education level of all girls and women as education is the key to understanding and better family planning.

Among the Healthcare Professionals:

We need to continually train all healthcare professionals and equip them with the most accurate and up to date information on contraceptive methods and management.

We need to increase and ensure that all choices of contraceptive methods are available, in particular the long acting reversible contraceptives and to ensure that the supply of these methods are continuous and uninterrupted.

Among the Governments and Non Governmental Agencies:

We need to have the political will to recognise that contraception is the key to nation building and a healthier and productive population.

We need also greater coordination between all agencies and stakeholders in maximising our resources towards this very important agenda.

THE STORY:

On Malaysia Day, 31st August 2012, a newborn baby girl was still alive when she was flung out of the window from one of the upper floor of the Desa Mentari flats in Kuala Lumpur. A post mortem revealed the baby died of severe head injuries. Her mother was a 20 year old unmarried woman who gave birth alone that Sunday in the 3rd floor flat. She was subsequently arrested and remanded by the police. A resident of the same flat said when he heard a noise, he came out to take a look and saw the baby still have the umbilical cord attached. There were blood all over the body. She looked like a cute girl.

This story is typical of many other stories that are published all too frequently by the Malaysian press. It underlies the tragedies that continue to befall Malaysian women and girls. It is a tragedy that no Malaysian girl or woman deserve to endure. No baby born in this country deserve to die the day they are born. It is a tragedy that is totally preventable. We as a society need to prevent this by believing that

their lives are worth saving, that girls and women are entitled to reproductive healthcare, that girls and women are entitled to choose when they want to get pregnant rather than leaving it to chance.

We have the tools and the knowledge to prevent such tragedies if only we empower women and girls and allow them to access such preventive methods unhindered.

Malaysia signed the Convention of Elimination to Discrimination against Women in July, joining 188 Nations in worldwide in affirming the rights of women and girls to reproductive health and freedom to choose in their reproductive needs. It is a promise by all nations who sign the declaration that they will do all they can to uphold the rights of women and girls in their reproductive choice and to choose when to get pregnant and when not to.

"The fact that we are meeting at this Fourth World Conference affirms our commitment and preparedness to change... The Platform for Action is a means for us to operationalise the commitment to lead to a fundamental change... The Malaysian Government is committed to equal rights and responsibilities, equal opportunities and equal participation of men and women" - *Dato' Seri Dr. Siti Hasmah Haji Mohd Ali, Head of Malaysian Delegation to the Fourth World Conference on Women in Beijing, 1995*

So, why are we not doing more?

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CONDOLENCES

Dear Colleagues,

Our sincere sympathies and condolences to all the friends and relatives who were affected by the first and the second MH flight disasters. There are no words that can express our sorrows. These incidents are grave tragedies not only for Malaysians but for the citizens of the world. My expression of sympathy to OGSM members and their families.

On behalf of the FIGO family,

ARUL

Sir Sabaratnam Arulkumaran
FIGO President

WHAT WE CAN DO?

AS INDIVIDUAL DRS, WE CAN;

1. Update and equip ourselves with the latest in contraceptive methods and guidelines, so all our patients will have the optimal chance of preventing unintended pregnancy. (In particular, guidelines from the American College of Obstetricians and Gynaecologists, National Institute of Clinical Excellence, Faculty of Sexual and Reproductive Health, World Health Organisation Medical Eligibility Criteria for contraceptive use and the European Society of Contraception guidelines, statements and Committee opinions).
2. We need to expand the availability of contraceptive choices and methods in our clinics and hospitals as CHOICE is a very important component of contraceptive access.
3. We need to take time to counsel our patients regarding the choices available to them as well as dispelling contraception myths
4. We need to protect rights of our girls and women and where applicable advocate for their needs in terms of prevention of unintended pregnancies
5. We need to put our own religious beliefs aside and do what is best for the patient as what we believe may not necessarily be the same beliefs our patients subscribe to and what is best for ourselves may not be what is best for our patients.
6. We need to share our knowledge and experience with all other healthcare professionals so that we learn from each other for the benefit of our patients.

AS AN ORGANISATION,

1. We need Obstetrical and Gynaecological Society of Malaysia, Malaysian Medical Association and all national healthcare organisations to take up this issue and make it the core issue of our organisations.
2. We need to push for a national agenda to protect the reproductive rights of our girls and women.
3. We need to avail ourselves of our time and even our own financial resources to be representative of our organisations in this very important issue.
4. We need to convince leaders of our own organisations that this issue is of paramount importance to our patients, nation and even our own wellbeing as unplanned pregnancies may have massive reverberations for all aspects of society.
5. We should convince all other relevant stakeholder organisations as well as the relevant authorities that the reproductive rights of all women and girls is a basic human right for which we all need to strive to uphold and protect.
6. Above all, we need to integrate all our resources whether at the level of Non Governmental Agencies, public or private sectors, to tackle this issue effectively and efficiently.
7. Let's all join hands to protect and treasure all Women and Girls for " They not only make up half of the World, but they are the Other Half"

AS A GROUP,

1. We need to advocate for age appropriate sexual education in schools as well as push for contraceptive teachings in all strata of our healthcare system.
2. We need to come together as a group and speak up for reproductive rights and access, be it is traditional media, social media and at public forums
3. We need to increase public awareness about the importance of contraception and planned pregnancies.
4. We need to reach out to vulnerable groups who may not have traditional access to contraceptive advice (eg via social media to teenage groups as it has been shown that the internet does play a significant role in shaping sexual behavior).
5. We need to let the policy makers know that Sexual And Reproductive Health does matter and it cuts to the core of human rights.
6. We need to constantly keep this issue alive so that we can one day see women and girls have the right to choose when they want to be pregnant and when not to.

DR JOHN TEO

AOCOG 2015

THE 24TH ASIAN & OCEANIC CONGRESS OF OBSTETRICS & GYNAECOLOGY AND THE 24TH OGSM CONGRESS



The 24th Asian & Oceanic Congress of Obstetrics & Gynaecology (AOCOG 2015) will be held in Kuching from June 3rd – 6th, 2015 in conjunction with the OGSM Congress which coincidentally is also our 24th international congress.

Many younger members of OGSM may not be aware of AOCOG or even AOFOG. A brief introduction is included here for their benefit.

AOFOG

The Asia-Oceania Federation of Obstetrics & Gynaecology (AOFOG) was formed in 1957 by 12 nations. Although affiliated to FIGO, the primary aim of AOFOG is to concentrate resources on elevating women's health in Asia-Oceania. Over the years, AOFOG has now grown to encompass 27 National O&G Societies ranging from Egypt in the West to Japan in the East and Mongolia in the North to New Zealand / Australia in the South. AOFOG is currently focused on improving maternity care in developing countries while advocating safe and appropriate development of new technology including endoscopic surgery.

OGSM is proud to have been among the founding members and has contributed significantly to its development. Dato' Dr Ariffin Marzuki and Datuk Professor Sivanesaratnam have served as Presidents in 1973-77 and 2000-02 respectively. The current OGSM representatives in AOFOG are Dr Ravi Chandran (Vice-President) and Dr Mohd Farouk Abdullah (Councillor).

AOCOG

The Asian & Oceanic Congress of Obstetrics & Gynaecology (AOCOG) is the pre-eminent meeting of the AOFOG. Held once every 2 years, it gives an opportunity for members of our fraternity in this region to showcase their research and achievements.

Apart from the Thai College, OGSM is the only other National Society that has been accorded the privilege of hosting the AOCOG on 3 occasions – 1974, 1998 and 2015.

AOCOG 2015

In keeping with the theme "Old World Charm Meeting New Technology", the scientific programme has been carefully arranged by Prof Raman and his team to cover a range of topics that will satiate all appetites. For the first time in AOCOG history, FIGO and RCOG will be having their own symposia during the congress. Other organisations also having concurrent symposia/sessions include the Saudi O&G Society (SOGS), the South Asian Federation of O&G Societies (SAFOG), the Asian Society of Gynae Oncology (ASGO) and the European Progestogen Club (EPC).

YOUNG GYNAECOLOGIST AWARD (YGA) AND COMMUNITY FELLOWSHIP PROGRAMME (CFP)

The S S Ratnam-YGA was mooted by AOFOG to encourage participation by young promising Gynaecologists in the region. YGAs must be below the age of 40 and must present a paper during the YGA session in the AOCOG. Benefits include complimentary Registration for the current Congress as well as the AOCOG 2017 in Hong Kong, return economy airfare and a stipend to cover accommodation for AOCOG 2015.

Past OGSM YGAs include Datuk Dr Abdul Aziz Yahya, Dr Soon Ruey, Dr Japaraj Robert Peter and Dr Shilpa Nambiar.

For AOCOG 2015, OGSM is incorporating another initiative – the CFP. One YGA from each member National Society will be selected to participate in the CFP which will be based in Kuching and culminate in a long-house stay during the Gawai Festival.

Please log on to www.aocog2015.com for more congress details and www.ogsm.org for details of YGA/CFP and Registration rebates.

SEE YOU IN KUCHING !

**AOCOG 2015
ORGANISING COMMITTEE**

10 REASONS WHY YOU SHOULD PARTICIPATE IN AOCOG 2015

1. Exposure to a varied scientific programme delivered by regional and international experts including FIGO and RCOG.
2. 50 % rebate on Registration fee for eligible OGSM members
3. Great opportunity to present a paper at an international level congress and get your paper published in the Journal of O&G Research (indexed in Medline and Pubmed)
4. Excellent chance of walking away with attractive prizes (cash + electronic gadgets) for Oral, Poster and Video presentations
5. YGA and CFP available for eligible OGSM members
6. Attend workshops ranging from Basics to State-of-the-Art
7. Network with colleagues and friends in a relaxed eco- environment
8. Support the OGSM spirit of giving back to the local community. A portion of the proceeds from the Banquet will be donated to women's welfare organisations. Congress bags will be purchased from PERKATA (Persatuan Bagi Kebajikan Kanak-Kanak Terencat Akal Sarawak) resulting in proceeds to that organization; and extra food from the congress will be channelled to local soup kitchens.
9. Profits from this Congress will be channelled to fund future OGSM educational activities especially for trainees and registrars
10. Last but not least, a great opportunity to have a school holiday break with the family and enjoy all that Sarawak has to offer!

AOCOG 2015 ORGANISING COMMITTEE

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Dr Ravi Chandran

Organising Chairman

Dr Mohamad Farouk Abdullah

Secretary

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Scientific

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Dr Goh Huay-Yee

Dr Premitha Damodaran

Professor Woo Yin Ling

Dr Kiren Sidhu

Dr Yap Moy Juan

SURVEY ON KNOWLEDGE AND ATTITUDES TOWARDS GENETIC TESTING

"MALAYSIAN SURVEY ON KNOWLEDGE AND ATTITUDES TOWARDS GENETIC TESTING"

At the 2014 OGSM congress in One World hotel, 120 participants completed a survey conducted to study the attitudes on genetic testing amongst doctors and nurses in Malaysia. The aim was to assess the challenges of integrating BRCA1 and BRCA2 testing into routine clinical practice in Malaysia.

We are pleased to announce the winner of the lucky draw amongst those who completed the survey is "Madam Lukimah binti Bukarak", Nursing in-charge from Ward PAC, Hospital Wanita dan Kanak Kanak, Likas, Sabah. The prize NOVO8 Advanced Mini iPad will be sent to her. The investigators truly appreciate all the respondents who participated in survey.

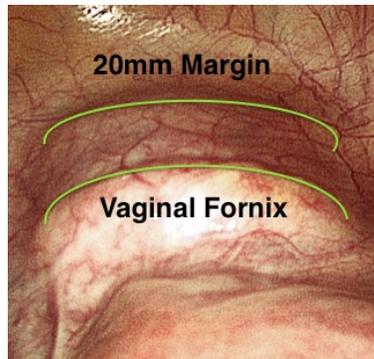
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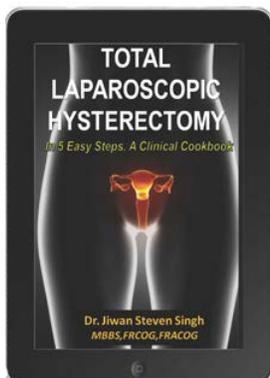
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