MEN’S HEALTH IN MALAYSIA

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MINISTRY OF HEALTH, MALAYSIA
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MALAYSIA

In 2017:
• Malaysian population: 32 million
• Men: 16.5 million (51.6%)

<table>
<thead>
<tr>
<th></th>
<th>MEN</th>
<th>WOMEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1960</td>
<td>58.7 years</td>
<td>60.3 years</td>
</tr>
<tr>
<td>2017</td>
<td>72.7 years</td>
<td>77.3 years</td>
</tr>
</tbody>
</table>
NCDs: an *Epidemic in Slow Motion*

<table>
<thead>
<tr>
<th>Population with the Disease (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hypercholesterolemia</td>
</tr>
<tr>
<td>Diabetes Mellitus</td>
</tr>
<tr>
<td>Hypertension</td>
</tr>
</tbody>
</table>

**Trends**

2006: 22.9% (18.4% undiagnosed, 4.5% diagnosed)

2011: 35.0% (26.6% undiagnosed, 8.4% diagnosed)

2015: 38.5% (29.3% undiagnosed, 9.2% diagnosed)

NHMS 2015 and Department of Statistics Malaysia

MEN’S HEALTH STATUS IN MALAYSIA
MAIN CAUSES OF DEATH AMONG MALES IN MALAYSIA

1. Ischemic heart disease
2. Pneumonia
3. Transport Accident
4. Cardiovascular disease
5. Lung Cancer
ANY DIFFERENCE BETWEEN MEN & WOMEN’S HEALTH?
<table>
<thead>
<tr>
<th></th>
<th>MEN</th>
<th>WOMEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>DISABILITY ADJUSTED LIFE</td>
<td><strong>1.6 million years</strong></td>
<td><strong>1.2 million years</strong></td>
</tr>
<tr>
<td>YEARS (DALY) (2000)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PREMATURE DEATH</td>
<td><strong>64%</strong></td>
<td><strong>57%</strong></td>
</tr>
<tr>
<td>YEARS OF LIFE LOST (YLL) due</td>
<td><strong>1.04 million years</strong></td>
<td><strong>0.69 million years</strong></td>
</tr>
<tr>
<td>to PREMATURE DEATH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Smoking (prevalence 2015)</td>
<td><strong>22.8%</strong></td>
<td><strong>2.8%</strong></td>
</tr>
<tr>
<td>• IHD attributed with smoking</td>
<td><strong>22%</strong></td>
<td><strong>2%</strong></td>
</tr>
<tr>
<td>• Haemorrhagic stroke</td>
<td><strong>7%</strong></td>
<td><strong>0.6%</strong></td>
</tr>
<tr>
<td>attributed with smoking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Ischaemic stroke attributed</td>
<td><strong>18%</strong></td>
<td><strong>2%</strong></td>
</tr>
<tr>
<td>with smoking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Condition</td>
<td>Prevalence 2015</td>
<td>Prevalence 2006</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>HYPERTENSION</td>
<td><strong>30.8%</strong></td>
<td>18.6%</td>
</tr>
<tr>
<td>DIABETES</td>
<td>16.7%</td>
<td>18.3%</td>
</tr>
<tr>
<td>HYPERCHOLESTEROL</td>
<td>43.5%</td>
<td>52.2%</td>
</tr>
</tbody>
</table>

*Note: The percentages indicate the proportion of individuals who are aware of their status.*
NEGLECTED MEN’S HEALTH?

**SEXUAL HEALTH**
- ≥50 years: 2 in 10 men suffer ED
- ≥70 years: 7 in 10 men suffer ED
- ED among: **DM = 89%; HPT = 80%; HCL = 79%**

**MENTAL HEALTH**
- **27.6%** Malaysian men have mental health problems: anxiety disorders, depression, suicide, alcohol and drug abuse and violence
- > MEN SUCCESSFULLY COMMIT SUICIDE

**CANCER INCIDENCE**
- Colorectal CA 16.4%
- Lung CA 154.8%
- NPC 8.1%
- Prostate CA 6.7%
**ALL ASSOCIATED WITH SMOKING!**

**HIV INFECTION**
- Infection due to homosexual transmission: **28%** (2014) vs. 0.4% (1990)
ANY ETHNIC DIFFERENCES IN HEALTH?
PREVALENCE OF HEALTH RISK FACTORS BY ETHNIC GROUP, ADULT (>18 YEARS), 2015

UNHEALTHY DIET
- Malay: 95.8%
- Chinese: 95.7%
- Indian: 89.3%
- Other Bumi: 91.8%
- Others: 94.9%

PHYSICAL INACTIVITY
- Malay: 23.5%
- Chinese: 33.2%
- Indian: 31.0%
- Other Bumi: 33.3%
- Others: 39.3%

OVERWEIGHT
- Malay: 34.2%
- Chinese: 31.9%
- Indian: 35.8%
- Other Bumi: 35.4%
- Others: 33.1%

OBESE
- Malay: 18.2%
- Chinese: 35.4%
- Indian: 30.7%
- Other Bumi: 21.9%
- Others: 43.5%

CURRENT SMOKING
- Malay: 35.0%
- Chinese: 24.7%
- Indian: 25.8%
- Other Bumi: 16.5%
- Others: 14.2%

CURRENT ALCOHOL DRINKER
- Malay: 59.0%
- Chinese: 30.0%
- Indian: 19.9%
- Other Bumi: 18.0%
- Others: 10.2%
PREVALENCE OF MORBIDITY BY ETHNIC GROUP, ADULT (>18 YEARS), 2015

Diagnosed HCL

- Malay: 50.1%
- Chinese: 45.4%
- Indian: 47.5%
- Other Bumi: 37.8%
- Others: 35.2%

Undiagnosed HCL

- Malay: 50.1%
- Chinese: 47.5%
- Indian: 47.5%
- Other Bumi: 37.8%
- Others: 35.2%

Diagnosed HTN

- Malay: 31.1%
- Chinese: 33.4%
- Indian: 32.4%
- Other Bumi: 20.0%
- Others: 14.9%

Undiagnosed HTN

- Malay: 74.0%
- Chinese: 32.4%
- Indian: 15.4%
- Other Bumi: 10.7%
- Others: 14.6%

Diagnosed DM

- Malay: 8.6%
- Chinese: 17.6%
- Indian: 15.6%
- Other Bumi: 8.1%
- Others: 8.6%

Undiagnosed DM

- Malay: 11.9%
- Chinese: 15.4%
- Indian: 7.7%
- Other Bumi: 7.7%
- Others: 9.8%
WHY DIFFERENCES IN HEALTH AMONG MALE GENDER?
HEALTH SEEKING BEHAVIOUR IN MEN

- RISK TAKING
- SENSE OF INVULNERABILITY
- ASSERTIVE
- WITHSTAND PAIN
- CULTURE NORM FOR GENDER
- INDEPENDENCE

SCREENING UPTAKE AT HEALTH CLINICS IN 2015

3.3% MEN
4.1% WOMEN
Challenges

- Tackling sensitive male diseases
- Gender friendly reception
- Tackle the male psyche
MOVING FORWARD

ENCOURAGE AND FACILITATE MORE MEN TO GO KNOW THEIR HEALTH STATUS

• Awareness of different gender-based needs
• Holistic approach for men’s health:
  • Psychological health
  • Social health
  • Physical health
• Develop structured policy for men’s health
• Strengthen inter-agency collaboration
Thank you