

Timberland Medical Centre provides essential heart care in Sarawak

In the Malaysian state of Sarawak in Borneo, most cardiology facilities are located in the main population centre of Kuching. As a result, tertiary providers in the capital, like Timberland Medical Centre, face different challenges in providing urgent cardiac care compared to hospitals in Peninsular Malaysia.

"I'm sad to say that there is only one heart centre in Kuching," said Dr Voon Chi Yen, resident consultant cardiologist at Timberland Medical Centre. "In parts of Sarawak, like Miri and Sibu, there's quite a large population with patients who present with coronary heart disease, but unfortunately when they arrive at the hospital and aren't able to be stabilised, they can't make it to a tertiary heart centre."

To cope with this situation, healthcare providers have been trying their best to educate residents of outlying areas to identify the early symptoms of coronary artery disease so they can make their way to a suitable hospital. In Sarawak, coronary artery disease rates are comparable to other parts of Malaysia, and, as on the peninsula, the trend is higher among young patients.

"Not like 10 years ago when patients were typically 50 or 60 years old, we are now seeing patients in their twenties and thirties coming in with heart attacks and acute coronary artery disease. This is because of lifestyle factors such as diet and smoking," said Dr Voon.

"Many young patients do have a strong family history,

which means they carry some genetic predispositions that bring on young onset of coronary artery disease," he explained. "We have to educate them on their lifestyles and treat other concurrent risk factors, such as hypertension, diabetes, and high cholesterol. Of course, some bad habits like smoking and unsanitary lifestyles play a part, so we advise them to cut down all those risk factors."

He advises patients who are breathless over a period of time and those who have difficulty lying flat while sleeping to see him immediately. On arrival, Dr Voon would conduct a bedside echocardiogram to check whether the patient has suffered heart failure or some other severe heart condition. Once heart failure has been established, he tries to determine its cause.

Of course, there are conditions without any obvious cause, such as patients who have a positive family history of sudden death, which might be due to an underlying genetic condition. For them, the optimisation of heart failure medication is extremely important.

"Everything needs to be responded to in seconds in cardiology," Dr Voon said. "We have to deal with any eventuality fast. That suits my personality. I attend conferences involved in clinical research, and, other than work, I spend a lot of time doing exercise to keep myself fit and alert."

➔ TIMBERLANDMEDICAL.COM

