## RECRUS Research Newsletter

Volume 2, Issue 18, September 2022, 402 - 433

High-Quality Research, True Academics, Real Experts

### IN THIS ISSUE

### **Breaking News**

- Together, We are Stronger! (pg. 402)
- Re-election of Deputy Dean(Research and Internationalisation) (pg. 403)
- Results from the RECRUS Research Newsletter Reader Survey (pg. 404 - 406)
- Submission procedures to RECRUS Newsletter (pg. 407)

### **Research Achievements and Impacts**

- Winners of Research Grants 2022 (pg 408–412)
- Keypoints from CRU Associate Members (CRAMs) Department Presentation: Anaesthesiology & Intensive Care, Rehabilitation, Family Medicine and Human Anatomy (pg. 413 - 418)

### **Clinical Epidemiology**

Appraisals in Meta-Journal Hour Series 10: Out-of-pocket Payments for Complementary Medicine Following Cancer and The Effect on Financial Outcomes (pg. 419 – 421)

### **Current Evidence**

Research Colloquium series 4: "Exploring the Critical Components in Doctor-Patient Communication, Qualitative study" by Ms. Nurul Ain binti Mohd Salim (pg. 422)

### Announcements



- >> Meta-Journal Hour Series 13, 25th November 2022
- >> Evolution and Applications of Teleconsultation, 13th October 2022
- >> The Essence of the Diagnostic & Prognostic Research, 21st October 2022
- >> Good Clinical Practice Series 2/2022, 4th 6th October 2022 [Calling for registration]
- >> The Lancet Summit: Big data and AI in pandemic preparedness, October 27-28, 2022 | Online and On-demand,
- Upcoming Conference and Congress
  - 6th International Clinical Trials Methodology Conference
  - 9th Asia Pacific Primary Care Research Conference, 1st -3rd December 2022
- >> CeRM Workshop, 27th -29th September 2022 [Calling for registration]



### **RECRUS Editorial Members**

Associate Professor Dr. Chew Boon How (Editor-in-Chief)

Dr. Yew Sheng Qian (Papers Editor) Pn. Salwana Ahmad (Papers Editor)

Pn. Nurfaizah Saibul (Papers Editor) Cik Nurul Iman Hafizah Adanan (Papers Editor) Dr. Nur Aazifah Ilham (News Editor)

Cik Faridzatul Syuhada Abdul Rashid (Production Editor)

Cik Intan Basirah Abd Gani (Technical Editor) Pn. Wan Zalikha Nabila Zul Shamshudin (Technical Editor)

#### FROM THE EDITOR'S DESK

We heard some readers from the Reader Survey and appreciate the responses. Non-responses are believed to be large and uncertain of their content which could be presumably less favourable to the newsletter. Nevertheless, the newsletter will chart a newer approach based on the responses and will continue to publish to support a more vibrant research culture of high-quality research in the hospital and country.

CRU welcomes new member Associate Professor Dr. Liyana Najwa Binti Inche Mat as the Clinical Trial Coordinator to enhance the hospital's participation in industry-sponsored drug trials. The hospital envision this endeavour would improve research skills of the clinicians, contribute to the international multicentres drug trials, improve hospital income and university reputation.

Join us to celebrate the achievement of the departments of Anaesthesiology and Intensive Care, and Human Anatomy, Rehabilitation Medicine and Family Medicine. Also, let's cherish and encourage them on in their effort to promote high-quality research in their respective specialties.

Congratulation to the winners of research grants this year! Check out the research that they are doing and consider to contact and collaborate with them to build on the research areas.

Do delve into the evidence presented in the Meta-Journal Hour (MJH) Series 11 and Research Colloquium series 4.

There are important announcements on researchrelated activities in the coming months, in and out of Malaysia. Write in to us if you have similar news that you wish to share through RECRUS Research Newsletter.

#### Unit Penyelidikan Klinikal

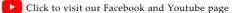
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Selangor Darul Ehsan MALAYSIA

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September 2022 Vol. 2 Issues 18 Page 402

### "TOGETHER, WE ARE STRONGER!"

Appointment of Associate Professor Dr. Liyana Najwa Binti Inche Mat as Clinical Trial Coordinator, CRU



CRU is pleased to announce the appointment of Assoc. Prof. Liyana as the Clinical Trial Coordinator (*Ketua Penyelaras Clinical Trial*) at CRU, HPUPM.

Her appointment is effective for a duration of two years from 1 September 2022 to 30 September 2024. Throughout her appointment, Assoc. Prof. Liyana will assist CRU to:

- Coordinate all industry sponsored research (ISR) that are and to be conducted at HPUPM.
- Develop strategic plans to increase the number of ISR that will be conducted at HPUPM, through the collaboration with Clinical Research Malaysia.
- Supervise the conduct of existing and new ISR to ensure these studies produce high impact outputs that are beneficial to both HPUPM and the University.
- Promote HPUPM as an international hub for ISR in all healthcare disciplines.

As a brief introduction, Assoc. Prof Liyana received her medical degree from the Royal College of Surgeons Ireland (RCSI) in 2007. Subsequently, she was trained as a general physician and obtained her membership from the Royal College of Physician, United Kingdom in 2011. Since then, Assoc. Prof. Liyana underwent neurology subspecialty training at the Ministry of Health, Malaysia. In 2019, she completed her subspecialisation in neurology and join HPUPM as a medical lecturer and clinical specialist. Throughout her medical career, Assoc. Prof. Liyana conducted numerous clinical research, especially in the field of stroke and neuromuscular disorders.

We welcome Assoc. Prof. Liyana to our team and we hope her important roles as the clinical trial coordinator will transform HPUPM to become a renowned hub for clinical trials, not just regionally, but internationally. Together we are stronger!



YBHG. PROF. DR. RUKMAN AWANG HAMAT

For the re-election as

DEPUTY DEAN (RESEARCH AND INTERNATIONALISATION)
FACULTY OF MEDICINE AND HEALTH SCIENCES, UPM

## RECRUS



By Dr. Yew Sheng Qian

### NEWSLETTER READER SURVEY

In conjunction with the one-year celebration of the RECRUS research newsletter, a reader survey was conducted from 1st August 2022 to 31st August 2022 among HPUPM staff. This reader survey was aimed to gather readers' opinion regarding the newsletter and to identify potential areas for improvement.

Of note, 3 out of 6 respondents were from the Department of Family Medicine, while 1 respondent was from the Department of Dietetics, Department of ENT, and Department of Biomedical Sciences, respectively. Among the 6 respondents, 2 were associate professors, 2 were clinicians, 1 dietician, and 1 staff nurse. In terms of occupation, 2 respondents were academic staff while 4 were non-academic staff.

The infographic below illustrates the responses provided for each survey question.

1

### LEVEL OF INTEREST IN THE NEWSLETTER

- Very interested: 2 (33.3%)
- Somewhat interested: 3 (50.0%)
- Not interested: 1 (16.7%)



2

### **READING FREQUENCY**

- Sometimes: 3 (50.0%)
- Rarely: 2 (33.3%)
- Never: 1 (16.7%)\*



3

### SATISFACTION WITH THE FREQUENCY OF PUBLICATION

- Very satisfied: 2 (40.0%)
- Satisfied: 3 (60.0%)



## RECRUS

### **NEWSLETTER READER SURVEY**

4

### SATISFACTION WITH THE LAYOUT OF THE NEWSLETTER

- Very satisfied: 1 (20.0%)
- Satisfied: 2 (40.0%)
- Not satisfied: 2 (40.0%)



5

### SATISFACTION WITH THE QUALITY OF THE ARTICLES

- Very satisfied: 2 (40.0%)
- Satisfied: 3 (60.0%)



6

### RELEVANCE OF CONTENT TO CLINICAL RESEARCH

- Relevant: 2 (40.0%)
- Somewhat relevant: 3 (60.0%)



7

### SATISFACTION WITH THE TIMELINESS OF THE INFORMATION

- Very satisfied: 1 (20.0%)
- Satisfied: 4 (80.0%)



8

### HELPFULNESS OF THE RESEARCH WORKSHOP ANNOUNCEMENTS

- Very helpful: 2 (40.0%)
- Somewhat helpful: 3 (60.0%)



9

### **WILLINGNESS TO SUBMIT AN ARTICLE**

- I would love to: 1 (20.0%)
- I will consider: 1 (20.0%)
- I need guidance: 1 (20.0%)
- I am not interested: 2 (40.0%)



## RECRUS

### **NEWSLETTER READER SURVEY**

### THINGS READERS LIKE THE MOST

10

"The summary of a topic"

- "Beautiful outline & presentation"
- "Content relevant to clinical research"
- "Article on clinical audit is very helpful"
- "Motivation to have more interest in research"

### THINGS READERS DISLIKE THE MOST

11

"Quite wordy"

- "Too many links to click"
- "Not relevant in my field"
- "Published on monthly basis only"



### SUGGESTIONS FOR IMPROVEMENT

12

- "To have less words"
- "Make it in a magazine form"
- "Consider publishing more often"
- "Make more infographics and less wordy"

13

### FEASIBILITY OF A SUBSCRIPTION-BASED NEWSLETTER

"Don't think that it will be feasible as not many people will be willing to pay"

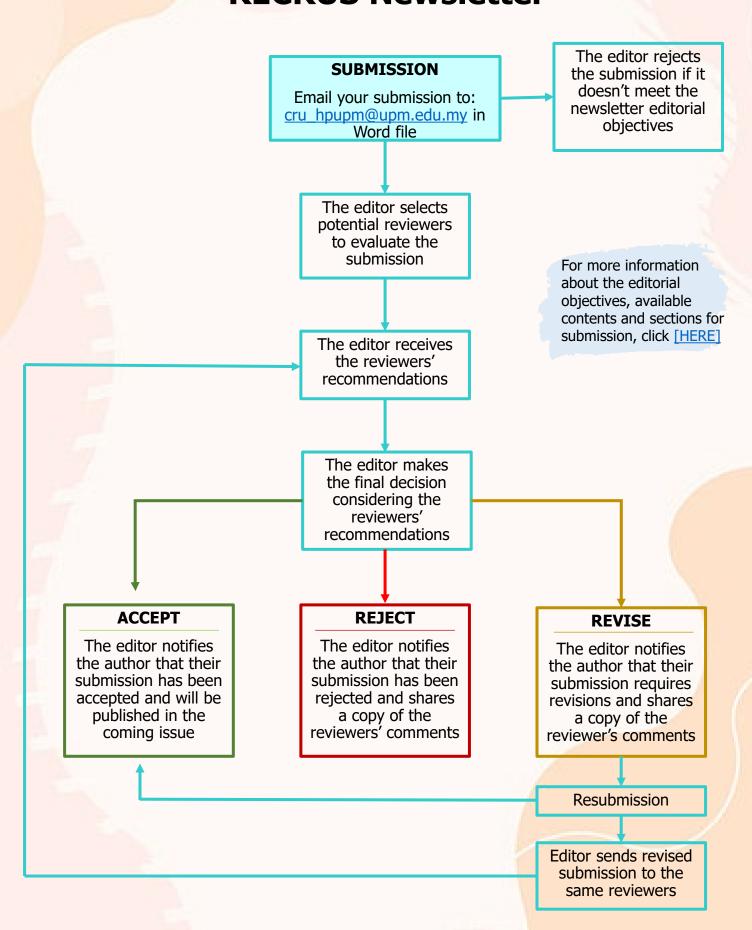


Winner of the RM200 voucher will be contacted personally

If you wish to submit an article to the RECRUS newsletter, kindly contact our team at 03-97699763 or email to cru\_hpupm@upm.edu.my



### Submission Procedures to RECRUS Newsletter







# Congratulations!

### WINNERS OF RESEARCH GRANTS

NO.	NAME	GRANT
1.	Assoc. Prof. Dr. Ho Kok Lian	1. MOSTI-Combating Covid-19 Fund 2022
	Department of Pathology	2. Prototype Research Grant Scheme (PRGS) 1/2022
2.	<b>Dr. Hakimah Mohammad Sallehuddin</b> Department of Medicine	Fundamental Research Grant Scheme (FRGS) 1/2022
3.	<b>Dr. Lim Chee Woei</b> Department of Medicine	Fundamental Research Grant Scheme (FRGS) 1/2022
4.	Assoc. Prof. Dr. Zulfitri 'Azuan Mat Daud Department of Dietetic	Fundamental Research Grant Scheme (FRGS) 1/2022
5.	Assoc. Prof. Dr. Karmegam Karuppiah  Department of Environmental and Occupational Health	Fundamental Research Grant Scheme (FRGS) 1/2022
6.	<b>Dr. Siti Yazmin Zahari Sham</b> Department of Pathology	Fundamental Research Grant Scheme (FRGS) 1/2022
7.	<b>Dr. Nurul Iftida Basri</b> Department of Obstetric and Gynaecology	Fundamental Research Grant Scheme (FRGS) 1/2022
8.	Assoc. Prof. Dr. Abdah Md Akim  Department of Biomedical Sciences	Fundamental Research Grant Scheme (FRGS) 1/2022
9.	Assoc. Prof. Dr. Ling King Hwa  Department of Biomedical Sciences	Fundamental Research Grant Scheme (FRGS) 1/2022
10.	<b>Dr. Siti Saleha Masrudin</b> Department of Human Anatomy	Fundamental Research Grant Scheme (FRGS) 1/2022

2022



### DR. HAKIMAH MOHAMMAD SALEHUDDIN

Principal Investigator RM150,200



Development and Feasibility of a Multi-domain Intervention Program for Post-stroke Bone Health (BOUNCE – Bone Health in Older Adults' Intervention Post Acute Stroke) in Hospital Pengajar Universiti Putra Malaysia (HPUPM)

01.09.2022 - 31.08.2025 (3 years)

https://www.researchgate.net/project/Bone-Health-Research

### Team members:

- 1. Prof. Dr. Sazlina Shariff-Ghazali (UPM)
- 2. AP Dr. Salmiah Said (UPM)
- 3. Dr. Terence Ong (UM)
- 4. Dr. Vina Phei Sean Tan (USM)
- 5. AP Dr. Geeta Appannah (UPM)
- 6. AP Dr. Subashini Suppiah (UPM)
- 7. Dr. Mazatulfazura SF Salim (UPM)

### Aim:

To develop and test the feasibility of a multidomain intervention program for post-stroke bone health among older adults in HPUPM.

### Why is it important?

- Stroke is a known cause of secondary osteoporosis, with associated impaired mobility, falls, and femoral neck fracture.
- The risk of hip fracture is quadrupled in stroke survivors compared to healthy individuals.
- To date, no specific intervention is recommended for maintaining bone health or reducing bone loss in post-stroke older adults in Malaysia.

### How will it be done?

This study is divided into 3 phases:

- •Phase 1- A systematic review to identify evidence on non-pharmacological interventions for post-stroke bone health.
- •Phase 2- Development and validation of a novel multi-domain intervention protocol for BOUNCE program through expert consensus development conference.
- •Phase 3- A mixed-method feasibility trial of BOUNCE program, which is further divided into two components;
- 3(a)- A two-arm parallel, single-blinded, randomized controlled trial
- 3(b)- An exploratory qualitative study using FGDs among BOUNCE participants, family and healthcare providers.

### **Expected output:**

A feasible multi-domain program that will be further tested for effectiveness in a larger RCT.

- Post-graduate student: 1
- Publication: At least 4

### DR. JONATHAN LIM CHEE WOEI

Principal Investigator RM 163,400



The Role of Peroxisome
Proliferator-activated Receptor-β/δ
antagonist in Melanogenesis

01.09.2022 - 31.08.2025 (3 years)

#### Team members:

- 1. Prof. Dr. Johnson Stanslas (UPM)
- 2. AP Dr. Lam Kok Wai (UPM)
- 3. Dr. How Kang Nien (UPM)
- 4. Dr. Benedict Wong Charng Choon (MSU)
- 5. Dr. Azhar Ali (NUS, Singapore)

#### Aim

To elucidate the role of PPAR- $\beta/\delta$  in melanogenesis with 10h or PPAR- $\beta/\delta$  shRNA transfection in both B16/F10 and human melanocyte cell lines challenged with a-MSH.

### Why is it important?

- The production of melanin, also known as melanogenesis, is important for skin pigmentation.
- Overproduction of melanin leads to hyperpigmentation disorders such as Café au lait macules, Addison's disease, Ephelides (freckles), etc.
- Regulation of melanogenesis is a way to control hyperpigmentation.
- Three types of peroxisome proliferatoractivated receptors (PPAR-a, PPAR-β/δ, and PPAR-γ) have been identified in human melanocytes.
- Our previous study showed treatment with a PPAR- $\beta/\delta$  antagonist in a-melanocyte-stimulating hormone (a-MSH) challenged mouse melanoma B16/F10 cells led to significant inhibition of melanogenesis in melanoma.
- However, the exact mechanism of action of PPAR- $\beta/\delta$  antagonist was not addressed.

### How will it be done?

- The mechanism of action will be determined with differential gene and transcript expression analysis via RNA-sequencing. The affected pathways will be determined by transcriptome analyses and confirmed using RT-PCR or western blot.
- The anti-melanogenic effect of PPAR- $\beta/\delta$  antagonist will also be studied in a UVB irradiation-induced hyperpigmentation animal model.

- √ The mechanism of action of PPAR-β/δ antagonist in melanogenesis will be unraveled.
- $\checkmark$  PPAR β/δ antagonist to be developed as a molecule for the treatment of hyperpigmentation or inhibition of melanogenesis.
  - 1 Ph.D. student
  - ~2 publications



### DR. SITI SALEHA MASRUDIN

Principal Investigator RM 138,500.00



### ASSOC. PROF. DR. KARMEGAM KARUPPIAH

Principal Investigator RM141,880



Benign prostatic hyperplasia and metabolic syndrome: Potential role of daidzein against oxidative stress

01.09.2022 - 31.08.2024 (2 years)

#### **Team members:**

- 1. AP Dr. Che Norma Mat Taib (UPM)
- 2. Dr. Nur Izah Ab Razak (UPM)
- 3. Dr. Nurul Huda Mohd Nor (UPM)
- 4. Dr. Siti Fadziyah Mohd Asri (UPM)
- 5. Prof. Dato' Dr. Khairul Asri Mohd Ghani (UPM)

#### Aim:

To evaluate the inhibitory effects of daidzein on benign prostatic hyperplasia (BPH) accompanied by metabolic syndrome.

#### Why is it important?

- BPH is one of the most frequently occurring urologic diseases in men age above 50 years
- BPH induces lower urinary tract symptoms, where obstruction of bladder outlet leads to unfavourable clinical symptoms including urinary retention, voiding, nocturia, urgency, and hesitancy. It becomes the atypical direct cause of adverse quality of life and mortality.
- Accumulating evidence showed that metabolic syndrome and/or its components are linked to BPH.
- Daidzein have shown to be beneficially alleviated BPH symptom and against the complications of diabetes.

### How will it be done?

- The study will be using BPH animal model.
- Duration of the study 12 weeks.
- The biochemical analysis, BPH marker, and structural study will be conducted
- structural study will be conducted.

  The study will be conducted mainly in the FPSK, UPM.

### **Expected output:**

- Postgraduate students (1)
- Publications (2)

Psychosocial Factors and
Ergonomics Assessment for the
Development of Educational
Ergonomic Module in the prevention
of Musculoskeletal Disorders (MSD)
among Malaysian Traffic Police

01.09.2022 - 31.08.2024 (2 years)

### Team members:

- Prof. Dr. Shamsul Bahri B. Md. Tamrin (UPM)
- 2. AP Dr. Irniza Rasdi (UPM)
- 3. Dr. Vivien How (UPM)

### Aim:

To assess the psychosocial and ergonomics factors for the development of Educational Ergonomic Module in the prevention of Musculoskeletal Disorders (MSD) among Malaysian Traffic Police.

### Why is it important?

• Malaysian traffic police officers work in one of the high-risk workplaces. They are exposed to high-demand workload, stress, prolonged standing, awkward posture, and repetitive movement in order to fulfill their work task. However, there is a lack of studies related to psychosocial factors and ergonomics hazards among Malaysian traffic police officers which can lead to developing risk of MSD.

### How will it be done?

The study will be conducted in 3 steps:

- 1. Information on sociodemographic factors, self-reported MSD and psychosocial factors among Malaysian traffic police officers will be assessed using a self-administered questionnaire
- 2. All potential ergonomics hazards will be assessed using REBA, focus group discussion, and face-to-face interviews
- 3. The compiled results will be used to develop an educational ergonomic module suitable with traffic police working environment and task.

- ✓ An educational ergonomics training module for Malaysian traffic police officers.
- ✓ Postgraduate students: 1
- ✓ Publications: 3



### DR. SITI YAZMIN ZAHARI SHAM

Principal Investigator RM127,253



In vitro verification of the molecular mechanisms of miR-101-3p and its target mRNA in diabetic kidney disease

01.09.2022 - 31.08.2024 (2 years)

### Team members:

- 1. AP Dr. Ling King Hwa (UPM)
- 2. Prof. Dr. Sharmili Vidyadaran (UPM)
- AP Dr. Intan Nureslyna Samsudin (UPM)
- 4. AP Dr. Subashini C. Thambiah (UPM)

#### Aim:

Verification and elucidation of the molecular mechanisms of miR-101-3p in diabetic kidney disease (DKD).

### Why is it important?

- DKD is the leading cause of chronic kidney disease worldwide.
- Despite improved clinical management, its progression still occurs, suggesting a need to further elucidate underlying pathogenesis.
- A trend of upregulation of miR-101-3p in serum of type 2 diabetic patients with macroalbuminuria from a selected Malaysian population has been shown and in-silico prediction of its target mRNA was made.
- This study aims to verify this prediction.

### How will it be done?

- Verification of an overexpression of miR-101-3p in hyperglycaemic milieu in vitro.
- Determination of its predicted target mRNA.
- Determination of its target mRNA and protein.
- Determination of the predicted apoptosis.

### **Expected output:**

- Further elucidation of the molecular mechanisms of miR-101-3p in DKD will improve understanding of the disease.
- Outcome from this study include:
- 1. Verification of an upregulation of miR-101-3p in renal cells in hyperglycaemic milieu.
- 2. Verification of the predicted target mRNA of miR-101-3p.

### DR. NURUL IFTIDA BASRI

Principal Investigator RM 155,800



**Association of Vitamin D deficiency** With Selected Vitamin D Receptor (VDR) Gene Polymorphisms In **Gestational Hypertension Among** Malaysian Women: A Prospective **Genetic Biomarker For Early Intervention Strategy** 

01.09.2022 - 31.08.2025 (3 years)

#### Team members:

- 1. Dr. Amilia Afzan Mohd Jamil
- 2. Assoc Prof. Dr. Norshariza Nordin
- 3. Assoc Prof. Dr. Loh Su Peng4. Aida Adha Mohd Jamil

### Aim:

This study aims to investigate the prevalence of vitamin D deficiency and its association of VDR SNPs to the development of GH among Malaysian pregnant mothers, with the main focus on Malays, representing the largest ethnic in Malaysia.

### Why is it important?

 This study expected to provide more evidence for early personalised intervention of vitamin supplementation due to anticipated individual genetic variability. This antenatal care programme will reduce the government expenditures, reduce maternal and fetal morbidity and mortality while strengthening Malaysia's healthcare system.

### How will it be done?

- This is a prospective study and it will be divided into two phases:
- Phase 1-cross sectional study (To determine the prevalence of vitamin D deficiency and the associated risk factors among Malaysian pregnant mothers through a cross-sectional study).
- Phase 2- case control study (To understand and associate distributions of VDR allele and genotype with vitamin D deficiency among Malay pregnant mothers).
- All Malaysian pregnant women attending Obstetrics and Gynaecology Department of Hospital Pengajar UPM(HPUPM) who fulfilled the criteria will be recruited.

- √ The will provide project excellent opportunities to link molecular understanding of the role of VDR genetic variation and could be a risk factor for the development of GH.
- ✓ The findings of the study could reveal the possible association of VDR gene variants with higher risk GH development among Malay pregnant women in Malaysia.
- ✓ Postgraduate student- 1 PhD student.
- ✓ Publication -3.



### ASSOC. PROF. DR. ZULFITRI AZUAN MAT DAUD

Principal Investigator

RM164,670



Delineating the Complex Interplay among Dietary Exposure, Genome and Epigenome for Cardiovascular Risk among Adult Type 2 Diabetes Patients using Stage-based Structural Equation Modelling, Artificial Neural Network, and Nutritional Genomics Approach [Diet-GenEpiC Study]

01.09.2022 - 31.08.2025 (3 years)

### Team members:

- 1. Prof. Dr. Tilakavati Karupaiah (Taylor's University)
- 2. Prof. Dr. Chia Yook Chin (Sunway University)
- B. Dr. Nurul Husna Shafie (UPM)
- 4. Mr. Alvin Lim Jun-Hao (PhD Student UPM)

#### Aim:

To determine the complex interplay among dietary exposure, genome and epigenome for cardiovascular risk among adult type 2 diabetes patients using stage-based structural equation modelling, artificial neural network, and nutritional genomics (SEANGE) approach.

### Why is it important?

- Although past research has shed some light on gene-diet interactions on CVD risk factors, our knowledge on the complex interplay among dietary exposure, genome and epigenome for CVD remains far from adequate to enable translation of nutritional science into useful policy and practices. Τo foster the following understanding, the noteworthy research gaps from the current state of the science must be addressed:
- Research gap 1: Previous Gene-diet Interaction Studies for CVD were Limited to CVD Risk Factors rather than Absolute Risk of CVD due to the Absence of Valid CVD Risk Calculator.
- Research gap 2: Lack of Local Study to Generate Genetic Risk Score for Malaysian T2D Patients.
- Research gap 3: Incomplete Molecular Mechanism to Explain the Modulation Effect of a Heart-Healthy Dietary Pattern.

### How will it be done?

The study will be conducted in 3 stages:

- **Stage 1** is a 10-year retrospective study among 2834 T2D patients to develop a CVD risk calculator using partial least square structural equation modelling (PLS-SEM) and artificial neural network (ANN).
- Stage 2 is a cross-sectional study among 270 adults T2D patients to assess the modulation effect of dietary pattern on the genetic risk of CVD.
- Stage 3 involves an integrative analysis of mRNA and miRNA to explain the modulatory mechanism of dietary patterns using iPathwayGuide.

### **Expected output:**

Structural Equation Modeling-Artificial Neural Network based CVD calculator to stratify and mitigate CVD risk for T2D patients.

### ASSOC. PROF. DR. MICHAEL LING

Principal Investigator

RM165,036



Investigation of cell-specific REST expression and its repression on JAK-STAT signalling pathway to revert the neurogenic-to-gliogenic shift in Down syndrome cerebral organoids model

01.09.2022 - 31.08.2025 (3 years)

### **Team members:**

- 1. AP Dr. Cheah Pike See (UPM)
- 2. AP Dr. Norshariza Nordin (UPM)
- 3. Dr. Elysha Nur Ismail (UPM)
- 4. Dr. Shahidee Zainal Abidin (UMT)
- 5. Prof. Dr. John Mason (University of Edinburgh, UK)

### Aim:

The study aims to understand how REST dysregulation can affect JAK-STAT signalling pathway in specific cells in the brain organoids derived from Down syndrome patients. The interactions between the two are important for us to understand how neurogenic-to-gliogenic shift in Down syndrome (DS) happen and formulate a therapy to revert the phenomenon.

### Why is it important?

- The molecular interactions between REST and JAK-STAT will define why Down syndrome individuals have more astrocytes than neurones at birth.
- The shift of neuron-to-astrocyte genesis underlying the impaired connectivity in DS brain and therefore lead to intellectual disabilities.
- When characterised, we can repurpose various FDA-approved drug to target either REST or JAK-STAT to pharmacologically revert the shift with the hope to revert intellectual disabilities in DS individuals.

### How will it be done?

- Induced pluripotent stem cells from DS individuals will be grown into 3D cerebral organoids or commonly known as the mini brain.
- Different cell types in the organoids will be isolated for molecular characterization.
- Gain-of-function and loss-of-function models will be established to study the role of REST and its effects on JAK-STAT signalling pathway in the organoids.

- Proof of concept evidence regulating REST/JAK-STAT can revert the shift.
- Establishment of REST and JAK-STAT as future pharmacotherapeutics targets to revert intellectual disabilities in DS.

September 2022 Vol. 2 Issues 18

Page 413

RESEARCH ACTIVITIES REPORT CRU ASSOCIATE MEMBERS (CRAMS)

AND CLINICIAN SCIENTIST COTERIE (CSC) FOR SERIE 4/2022

### SHARING FROM CRAMS

### AND CSC'S MEMBER!

By Salwana Ahmad

CRAMs Online Meeting was held every 2 months among CRAMs Members, Clinician Scientist Coterie (CSC) Members and staff among Hospital Pengajar, UPM and Faculty of Medicines and Health Sciences, UPM. This session was intended for the CRAMs members to share their research activities in the department and how they are coping with all the coming challenges and strive to keep moving forward. During the session, the members will have to present their research activities report comprising of remarkable research activities and outputs, promoting positive perceptions and motivation for facing challenges, improving clinical research, and cultivating research & networking. In light of cultivating the spirit of research and knowledge sharing, here are the summaries of the presentation shared for all of us to get to learn how is everyone is doing in proceeding with the quality research in UPM.



### DEPARTMENT OF ANAESTHESIOLOGY AND INTENSIVE

### Background:

Department At HPUPM, we are responsible for providing intensive care services for critical patients in the 'Intensive Care Unit (ICU) according to standards and protocols, comprehensive 'perioperative' services for patients requiring anesthesia during surgery, and acute pain treatment. Advantages of HPUPM Anesthesiology and Intensive Care Department are: (i) Among the few hospitals in Malaysia that provide 'perioperative anesthesia' services and intensive care for patients undergoing robotic surgery, (ii)Support services in terms of resuscitation, anesthesia and intensive care for stroke patients in general and in particular those who require thrombectomy treatment. (iii) The Indirect Calorimetry facility uses the latest equipment with the Dietetics Department at the Intensive Care Unit, HPUPM, to ensure the nutritional needs of critical patients are at an optimal level. (iv) A training center for postgraduate courses in the field of anesthesia and intensive care.

CRAMS Member: Dr. Chong Kok Wah



### REMARKABLE RESEARCH ACTIVITIES AND OUTPUTS

Research Highlights and Achievements:

### **PRESENTACTIVITIES**

International grantMahidol Oxford Tropical
Medicinene Research
Unit (MORU) and
UPMProvide laboratory
services for microscopic
agglutination test (MAT)
- Undergoing
application process.

Setting up the Research Collaboration Agreement for Critical Care Registry among Asian hospitals.

Involvement in an economic evaluation of early enteral nutrition with semi-elemental formula for critically patients in MOH hospitals further.

### HPUPM is a center of international trial for:

- ARCTIC-1 (International collaboration for Anaesthesiological Routine Care for Thrombectomy in Cerebral Ischaemia)
- ENCORE trial (Effects of anesthesia in Colorectal cancer outcome trial)

PROMOTING POSITIVE PERCEPTIONS AND MOTIVATION FOR FACING CHALLENGES, IMPROVING CLINICAL RESEARCH, and CULTIVATING RESEARCH & NETWORKING.

#### \* Challenges:

- Since the department is having half the new members, they are still adapting to the research culture niche and the environment with a new set of KPIs to achieve. Time and experience to cope with the new environment are needed among the new members.
- Burdensome for new members to publish in Q1 and Q2 due to the higher cost.
- Increasing time clinical services at the OTs and critical care

In the future, the department is hoping to increase the quality of research with local and international collaboration in anesthesia and intensive care through grants and achievements among young lecturers.

### DEPARTMENT OF HUMAN ANATOMY

### Background:

The Department of Human Anatomy provides services in the preclinical teaching for the Medical Doctor Program (year 1 until year 3), plays a pivotal role in research and clinical science teaching for the Biomedical Science Program and Nursing Program, and involves in clinical master teaching. It has 3 Units; Anatomy, Pharmacology and Physiology, and 8 laboratories that caters teaching and research work involving animal study, cell culture, innovation and field study.



CRAMs Member: Dr. Nur Izah Ab Razak

### REMARKABLE RESEARCH ACTIVITIES AND OUTPUTS Research Highlights and Achievements:

Target for publications among all team members.

Active lecturers	23
Sasaran KPI Kualiti Kesetaraan CIJ	57
Pencapaian Kualiti Kesetaraan CIJ	85.5%
Peratus CIJ	150%

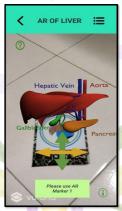
- The departments had good achievements in research achievements as such:
  - 25 Scientific Innovations .
  - 19 Research Grants amounted to more than a 1.5millions.
  - 23 Awards in teaching, learning, and clinical.
  - 29 Copyrights .

\*The list can be assessed here

The department has introduced and developed the stimulated digital environment that uses Augmented Reality (AR) and Virtual Reality (VR) to enhance teaching and learning through collaborative strategies with the Faculty of Computer Science and Information Technology UPM. The strategies include development of the initial products from survey market analysis, AR development, image tracking, product & user acceptance tests verification deployments in online platform .

There are 10 AR products have been produced under the collaboration namely; AR Product 1 (EDUMEDIC-AR HEART), AR Product 2 (NEUPRO), AR Product 3 (PANSULIN), AR Product 4 (RENAR), AR Product 5 (MEBS), AR Product 6 (MY3B), AR Product 7 (RBS), AR Product 8 (VERA), AR Product 9 (CARDIOAR), AR Product 10 (ADRENDS)







### Publication achievement .

	Quantity	Quality
Top 1%	-	-
Top 10%	3	9
Q1	8	20
Q2	16	32
Q3	2	3
Q4	2	2.5
Scopus	19	19
Non-CIJ	4	-
TOTAL	54	85.5

\*The list can be assessed here.





Innovation research Team



Background:

Rehabilitation Medicine is a branch of medicine that emphasizes the importance of client-centred services. It provides holistic services through assessment, diagnosis, prevention, rehabilitation treatment including clinical intervention, integration into the patient's environment (i.e. home, school, workplace, community) and ongoing follow-up evaluation. At HPUPM, the Department of Rehabilitation Medicine consists of four units namely: Clinical Rehabilitation Medicine Unit, Occupational Rehabilitation Unit, Limb Rehabilitation Unit (Physiotherapy), Speech Rehabilitation Unit



CRAMs Member: Dr. Muhammad Hibatullah Romli

### REMARKABLE RESEARCH ACTIVITIES AND OUTPUTS

Research Highlights and Achievements:

### Publications by all team members.

Name	Journal Publication (total)	CIJ	2022	As CA/FA/MA
Dr. Mazatulfazura Sf Salim	8	7	-	2
Dr. Izwan Zuhrin Abdul Malek	1	1	-	-
Dr. Thanalactchumy Chandra Bose	-	-	-	-
Dr. Muhammad Hibatullah Romli	33	3 1	7	25
Dr. Siti Noraini Asmuri	5	2	1	5
Fatin Nadzirah Nazari	-	-	-	-

### Local and international grants secured by the departments.

Research Project (Public and International Grants)	Year Granted	Source of research fund/Achievement
Exploring the role of home hazards on falls and risk of falls among community -dwelling older stroke survivors in Klang Valley area	2020	MOHE Grant (RM 91, 100.00) (UPM.RMC.800- 3/ 1/ FRGS/ 05- 01-20-2276FR)
The reliabilities of using technology to replace conventional home visit for falls -risk home hazards evaluation using the HOME FAST	2018	Putra Grant GP-IPM (RM 59, 900.00) UPM (Vot. No.: 9652400)
Development and Validation of exercise training module for older adults in Malaysia	-	Putra GP-IPM (RM 50, 000) (Vot No.: 9692800)
Pilot Project for establishing Tele -neurology Center in Malaysia Using Japanese Information Communication Solutions - Cyberdyne Research Sub - Project	-	International Grant by Allm Inc., Japan. (RM80,000.00)

Excellent Team members:







PROMOTING POSITIVE PERCEPTIONS AND MOTIVATION FOR FACING CHALLENGES, IMPROVING CLINICAL RESEARCH, and **CULTIVATING** RESEARCH & NETWORKING.

#### **MONITORING**

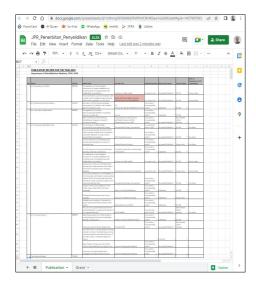
- Monitoring of research and publication activities of the department members.
- Follow-up at the end of each month.
- New activity: depository of research either funded or non-funded.

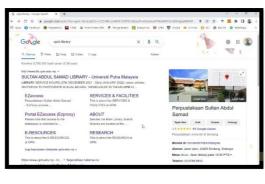
#### **ACADEMIC**

- Virtual training on how to search for JCR and Scopus journals.
- Proposal writing workshop for FRGS application.
- Virtual workshop on how to write for academic purpose.
- Personal consultation on proposal writing, research methods and statistics.
- Collaborate with external academics/researchers.
- Forwarding information.

#### CLINICAL

- Conducting research intervention study (case study) on the use of robotics for rehabilitation (CyberDyne)
- Collaborating with clinical therapists (e.g., occupational therapists, physiotherapists, speech therapists) for writing a case report.
- Discussion among the clinical department on possibility of data mining for research analysis.





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### Background:

Family Medicine is a specialty that offers clinical services for all outpatients for all age groups. The clinic offers holistic services based on scientific evidence. The clinical services offered include all aspects of medicine including disease prevention services, acute to chronic disease services, healthy lifestyle counseling, as well as rehabilitative services in the community. We also work hand in hand with the dietetic and rehabilitation unit for a weight monitoring program. Our services will take into account individual risks and the application of the patient's overall values (personalized and comprehensive health care).



CRAMs Member: Dr. Hani Syahida Salim

### Past Research Achievements:

Ministry of Health/National	Researcher	Source of research fund/Achievement	
Improving Patient Safety-Medical Errors In Primary Care.	Assoc. Prof. Dr Cheong Ai Theng	A project by IHSR KKM (The intervention developed had been taken up by KKM and echo training to the health clinics)	
A randomized controlled tr 1al on the effects of a Prof. Dr. Ching structural education module among women with polycystic ovarian syndrome on nutrition and physical activity changes			
Effectiveness of system-based intervention in reducing incidence of type 2 diabetes and to improve the postnatal metabolic profiles in women with gestational diabetes mellitus: a randomized controlled study	Prof. Dr. Ching		

### Current Research Projects:

Local and International Grants	Researcher	Source of research fund/Achievement
Improving Global Respiratory Health (RESPIRE 2)	Assoc. Prof. Cheong	NIHR lot Global Health Fund. UK)
Determining the prevelance and quality of life people with alopecia areata and associated factors in tertiary hospitalin cpital city of Malaysia.	Dr. Na vin	Pfizer Inc.
Malaysian Gestational Diabetes and Prevention Of Diabetes Study (MYGODDESS).	Assoc. Prof. Dr. Chew Boon How	MyPAIR-NCD Newton
Four Country Chronic Respiratory Disease (4CCORD) Understanding The Views and Experience of People Living with Chronic Respiratory Disease (CRD) using an adapted Photovoice Study.	Dr. Hani Salim	NIHR for Global Health Fund, UK
Effectiveness of an Interactive WebApplication to Motivate And Raise Awareness on Early Detection of Breast and Cervical Cancers (The MAwar study)	Prof. Dr. Sazlina	FRGS
The Mediating or Moderating Roles of Mental Health Status on Sexual Risky Behaviour of Youths in Malaysia	Dr. Fadzilah Mohamad	FRGS

## PROMOTING POSITIVE PERCEPTIONS AND MOTIVATION FOR FACING CHALLENGES, IMPROVING CLINICAL RESEARCH, and CULTIVATING RESEARCH & NETWORKING.

In doing the research, the department faced challenges in many ways like all researchers in the field. The top 2 mentioned challenges were:

- 1. A significant number of administrative work and reports (regular financial report and audits, complex UK ethical requirement for feasibility study and RCT, data management plan (OMP) and report, progress reports, documentation to International Aid Transparency Initiative (IATI), Good Financial Grant Practice (GFGP), for institution, risk reports).
- 2. Issues with account imbalances due to the differences of exchange rate (RMC was supportive to researchers in helping with the issues)

### Strategies to improve research cultures:

- 1. Mentorship between senior and early career researchers.
- 2. Monthly presentation of research activities at Department meeting to support members and boost morale.
- 3. Department's writing day (away from UPM/ HPUPM), members include our previous postgraduate students to encourage output from their dissertations and case write-ups.

#### Motivators:

Availability of international grants provide opportunity opportunities for international networking, sponsorship for attending regular scientific meetings, funding for publication and learnings. Eg. working culture.



We would like to thank Dr. Chong Kok Wah, Dr. Nur Izah, Dr. Hibatullah and Dr. Hani Syahida for the sharing. We hope that the sharing can transform tacit knowledge into explicit, written, and easily communicated knowledge for the right people to receive the right information at the right time. See you the next time!

Check out more information about our CRU Associate Members (CRAMs) for the Year 2022/ 2023 Member on HPUPM website at <u>CRAMs Members</u>.



Be featured in our next series of RECRUS Newsletter by contacting us at CRU!



### **APPRAISALS IN META-JOURNAL HOUR 10**

By: Nurul Iman Hafizah and BH Chew



### The paper:

Out-of-pocket payments for complementary medicine following cancer and the effect on financial outcomes in middle-income countries in southeast Asia: a prospective cohort study

Doi: https://doi.org/10.1016/S2214-109X(21)00595-7

### Why was this study conducted?

- Complementary medicine is increasingly being used following cancer diagnosis for many reasons, including amelioration of cancer-therapy-induced side-effects, improvement of general wellbeing, and as the next step after unsuccessful treatment with conventional therapies.
- Complementary medicine might also be an expensive alternative to conventional cancer therapies, leading to serious economic hardship, particularly in resource-limited settings where the practice of using complementary medicine is deeply embedded in some local cultures.
- This study aimed to investigate out-of-pocket spending patterns on complementary medicine and its association with adverse financial outcomes following cancer in middle-income countries in southeast Asia.

### How was it done?

Study design and participants

Data were derived from the ASEAN Costs in Oncology (ACTION) study[1], a prospective longitudinal study that enrolled patients who were newly diagnosed with cancer in 47 centres located in eight countries in southeast Asia:

Six lower-middle-income countries (LMIC)













Two upper-middle-income countries (UMIC)



### Eligibility criteria:

- first time cancer
- aged 18 years and older
- · aware of their cancer diagnosis
- · willing to participate in follow-up interviews
- · not currently participate in any clinical trials

Study procedures

Baseline

Baseline

Months

Age, gender, marital status highest attained education clinical data, private health household

Age, gender, marital status highest attained education clinical data, private health insurance status (employer/individual), baseline annual household income, employment status, experiences of economic hardship in the previous year, health-related QoL and psychological distress

Annual household income and experience of economic hardship

The control of the co

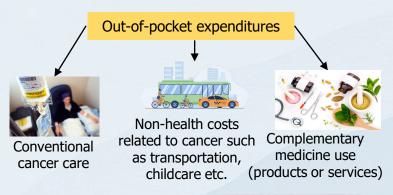
September 2022 Vol. 2 Issues 18 Page 419

Watch the video recording on:



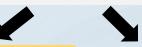
Click [HERE] and don't forget to subscribe to our channel!

All participants were given cost diaries at baseline to record illness-related payments that were directly incurred and not reimbursed by insurance over the 12-month period after study recruitment.



**Complementary medicine:** A group of diverse medical and health-care systems, practices, and products that were not considered to be part of conventional medicine.





Out-of-pocket spending on complementary medicine

Adverse financial outcomes

#### Derived from

Overall out-ofpocket costs

Health costs alone (out-of-pocket costs of conventional and complementary care)

Annual household income in the 12 months following cancer diagnosis

### **Financial catastrophe**

\*out-of-pocket cancerrelated costs ≥30% of patient's annual household income.

#### **Medical impoverishment**

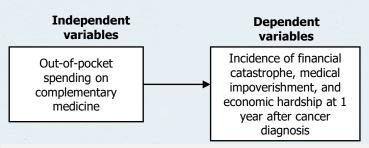
\*out-of-pocket cancerrelated costs subtracted from baseline annual household = below annual poverty income line

### **Economic hardship**

\*self-reported inability to make necessary household payments

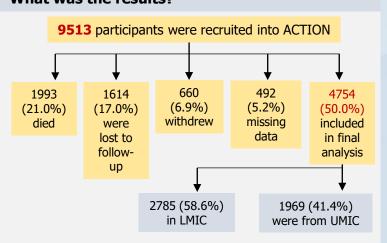
### Statistical analysis

- Categorical variables were presented as percentages and compared using chi-square test.
- Continuous variables were described as median (IQR) and compared using non-parametric tests because most variables were not normally distributed; Mann-Whitney U test was used for two subgroups, and Kruskal-Wallis for more than two subgroups
- Baseline characteristics of households who reported making out-of-pocket payments for complementary expenditures were compared with those who did not via chi-square tests.
- Variables with a p value of less than 0.25 in the univariable analyses were included in the multivariable logistic regression analysis to assess the association between patient characteristics and spending on complementary medicine.



- Multivariable logistic regression analyses were adjusted for variables that were associated with both spending on complementary medicine and the adverse financial outcomes.
- Subgroup analyses:
  - ✓ Economically disadvantaged households (low-income status, previous economic hardship, unemployed, or no private health insurance)
  - ✓ Country income group
  - ✓ Country
  - ✓ Cancer site
- ORs were considered statistically significant when the 95% CIs did not include 1, and p < 0.05 were considered statistically significant.

### What was the results?



- The most common cancers were breast cancer (31.4%), aged 40–60 years at time of cancer diagnoses.
- Approximately 40% of the study participants had private health insurance.
- Other baseline characteristics of study participants is shown in Supplemental Table 3.

### Findings from multivariable analysis (Table 1)

Factors that were significantly associated with out-ofpocket spending on complementary medicine were:

- being from Indonesia, Laos, Malaysia, Myanmar, or Thailand (reference: Vietnam);
- being managed in public hospitals;
- and having private health insurance

Median out-of-pocket expenditure on complementary medicine (Table 2)

- Lower-middle-income countries has lower amount spent on complementary medicine, but higher outof-pocket spending compared to upper-middleincome countries.
- There were significant differences in spending patterns by cancer sites and between countries.
   Participants with haematological malignancies, for instance, reported the highest share of expenditures on complementary medicine compared with those with other cancers.
- Compared with their higher-income counterparts, participants from low-income households (15% vs 29%) and those who reported economic hardship in the year preceding cancer diagnosis (21% vs 25%) were significantly more likely to spend higher shares of their health expenditures on complementary medicine.

### Out-of-pocket spending and financial outcomes (Table 3 - 5)

- In upper-middle-income countries, out-of-pocket spending on complementary medicine were associated with significantly higher risks of financial catastrophe (adjusted OR [aOR] 1.52 [95% CI 1.23–1.88] and medical impoverishment (1.75 [1.36–2.24] but not economic hardship.
- Out-of-pocket spending on complementary medicine was consistently associated with increased risks of financial catastrophe and medical impoverishment among economically vulnerable households—eg: in the low-income groups and those reporting previous economic hardship.

### How much can we take out from this research/paper?

This multicentre cohort study in SEA region is applaudable and amicable for showing that research collaboration is possible in this region of different sociocultural background to find answers to important questions. It was not an easy fit to coordinate in this vast area and in almost 50 centres where data collection was conducted. Besides having adequate funding, properly skilled and knowledgeable researchers and research-related professionals were key to the success of such study.

The research question was concern about financial impacts of out-of-pocket spending on non-conventional therapy or complementary medicine, and other cancer-treatment related cost for the person and in the family as a consequence to the cancer diagnosis. Hence, the cost diary and the amount of spending recorded was of utter importance because it was the outcome measure from which categories of financial impact were derived. Unfortunately, this measuring process was not described and verified in detail that could stand to scrutiny. People in this region are commonly believed not keen record keepers or have the habit of writing a diary. Moreover, disclosing the amount of money one has or spent is sensitive to the core of many people, not just to those in SEA. These were challenges and possible threats to the one-year use of the cost diary and data on the amount of money in the study that require greater attention during the study and reporting. This might explain the half exclusion/dropping-out of the study samples. Same goes to description on the multiple imputation and the selection of variables for the multivariable model.

The results showed that about a quarter of the participants reported out-of-pocket spending on complementary medicine, and on average less than 15% of the overall out-of-pocket cost were spent on complementary medicine. As the amount of money was standardised in comparison, the within-country proportions of the study samples' healthcare cost etc and their between-country comparisons were meaningful but not so with the absolute amount of comparison because the market value of respective currency in exchange for goods were different. This means that the different amount of out-of-pocket money spent on complementary medicine in the different participating countries did not necessary mean different volume of complementary medicine consumption, or in other types of expenditures.

The three adverse financial outcomes (1) financial catastrophe, (2) medical impoverishment, and (3) economic hardship does seem to be ordinal in nature taken on them alone. If this was truly so in the participating countries, we would expect more participants who experienced adverse financial impact in financial catastrophe, then medical impoverishment, and least in economic hardship. This logical phenomenon was observed in the both the upper-middle-income countries Malaysia and Thailand, but no in Philipines, Myanmar and Vietnam. Keep guard of prejudice and if the data quality was of no serious concern (none-reporting by those with lower adverse financial impact or selective or over-reporting in the highest category), these results may prompt further exploration of the health spending behaviours in these different countries in the first year after a diagnosis of cancer.

Based on the proportions of adverse financial outcome categories and out-of-pocket money spent on complementary therapies, it appears that people in Vietnam and Indonesian would benefit the most if there were government policy that include insurance coverage or public subsidies on evidence-based complementary medicine for people with cancers. However, this priority of implementations and benefits is arbitrary across the countries as indicated in this study, and similar measures that are efficient and effective in every participating country will benefit their people.

### References

[1] Kimman, M., Jan, S., Kingston, D., et al. (2012). Socioeconomic impact of cancer in member countries of the Association of Southeast Asian Nations (ASEAN): the ACTION study protocol. *Asian Pacific journal of cancer prevention:* APJCP, 13(2), 421–425. https://doi.org/10.7314/apjcp.2012.13.2.421



## RESEARCH





September 2022 Vol. 2 Issues 18 Page 422

Coquium Series 4



### EXPLORING THE CRITICAL COMPONENTS IN DOCTOR-PATIENT COMMUNICATION, QUALITATIVE STUDY

MS. NURUL AIN BINTI MOHD SALIM
PhD in Medical Sciences Specializing in Medical Education by Research

### **S**BSTRACT

**Background:** Effective communication with patients and their relatives is one of the most crucial skills a doctor can possess. Unfortunately, majority of students lack this important skill in the medical field. As a result, they require the proper training in order to enhance their communication skills.

**Aim:** This study's purpose is to explore the critical components of communication in the doctor-patient relationship.

Method: To obtain the data, focus group discussions (FGDs) and in-depth interviews (IDIs) were performed. In total, 32 participants from the Faculty of Medicine and Health Sciences (FMHS), UPM, and Teaching Hospital Universiti Putra Malaysia participated in the FGDs. In total, 11 participants from government or private hospitals and clinics participated in IDIs. Fifteen doctors and 17 medical students enrolled in the FGDs, whereas 5 patients and 6 relatives took in the IDIs. A protocol guide that focused on doctor-patient communication perceptions and experiences was developed. Utilizing the Atlas.ti programme, thematic analysis was employed to generate the data in order to construct the themes, a few layers of categories, and codes.

**Results:** Seven themes were identified: professionalism, content of communication, verbal, non-verbal and paraverbal communication skills, environment and visual communication. Commonalities and differences were identified from the findings. Medical students and doctors emphasized on the eye contact, management and treatment plans, and patient's privacy and confidentiality. Meanwhile, patients and relatives highlighted on empathy skill, advice and counselling, prognosis and use additional sources while deliver the information. All the groups also concurred that soft tones, layman terms, and preferred language are effective ways to boost patient compliance.

Conclusion: The findings concluded that the most effective way to train doctors and students to establish good communication for better healthcare services would be to comprehend the important components of communication. Because our participants were not aware of their rights in this regard, we also need to consider the patients' awareness of their privacy and confidentiality. In addition, we should pay attention to patient concerns and focus on our cultural standards when attempting to address our patients and their relatives.

### **ANNOUNCEMENTS**

- 1. Meta-Journal Hour Series 13, 25th November 2022
- 2. Evolution and Applications of Teleconsultation. 13<sup>th</sup> October 2022
- 3. The Essence of the Diagnostic & Prognostic Research. 21st October 2022.
- 4. Good Clinical Practice. 4<sup>th</sup> 6<sup>th</sup> October 2022
- 5. The Lancet Summit: Big data and AI in pandemic preparedness. October 27-28, 2022 | Online and On-demand
- 6. The 6<sup>th</sup> International Clinical Trials Methodology Conference 2022. https://ictmc.org/
- 7. The 9<sup>th</sup> Asia Pacific Primary Care Research Conference, 1<sup>st</sup> 3<sup>rd</sup> December 2022
- 8. CeRM Workshop 27<sup>th</sup> -29<sup>th</sup> September 2022







**CLINICAL RESEARCH UNIT PRESENTS** 

## META-JOURNAL HOUR

What is the impact of funded research project to inform future priority setting initiatives for universal access and quality healthcare in Malaysia?

**ARTICLE TITLE** 

Research funding impact and priority setting – advancing universal access and quality healthcare research in Malaysia

Click to access full article:

https://bmchealthservres.biomedcentral.com/articles/10.1186/s12913-019-4072-7

### 25<sup>th</sup>NOVEMBER 2022 (FRIDAY) | 10.30 - 11.45AM | WEBEX

Click [HERE] to register or scan the QR code below



Brought to you via:



Speaker



Ms. Salwana Ahmad Research Officer, CRU

Open to all UPM/ HPUPM staff, students and public CPD points and e-certificate will be awarded upon successful participation



For any inquiries, please contact: 03-97699759 or email: cru hpupm@upm.edu.my







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# EVOLUTION AND APPLICATIONS OF TELECONSULTATION



13th October 2022 3:00 pm - 4:30 pm

Meeting via Cisco Webex (Link to be provided later)



Register now: shorturl.at/CFSU8

Speaker

**Dr. Eugene Koh Boon Yau**Psychiatrist, Department of Psychiatry, HPUPM





## The Essence of the gnostic & Prognosti

Date: 21st October 2022 (Friday)

Venue: Mini Theatre, HPUPM

Time: 1430 - 1645

Scan to pre-register:



Or click [HERE]

All HPUPM and FPSK UPM Staff are invited to join

### Tentative Timetable

Time	Agenda	Speaker	
1200-	Meeting with HPUPM and FPSK administrative on possible short-term staff training or		
1245	exchange programs		
1300-	Lunch break		
1430	Lunch break		
1430-	Arrival and Degistration		
1450	Arrival and Registration		
1450-	Opening Cheech	LIDUDA Director	
1500	Opening Speech	HPUPM Director	
1500- 1530	Prognostic research: a lecture about risk prediction in people with elevated CV risk/ Use of real-world data: extractable information from the hospital records: the UCC-CVRM example	Professor Dr Michiel Bots	
	(20 mins talk with 10 mins Q&A)		
1530-	Environment and cardiovascular health	Associate Professor Dr	
1600	(20 mins talk with 10 mins Q&A)	Ilonca Vaartjes	
1600-	Cardiovascular diseases after systemic cancer treatment	Assistant Professor Dr	
1630	(20 mins talk with 10 mins Q&A)	Yvonne Koop	
1630- 1645	Tea Break & Presentation of tokens of appreciation to the s	peakers	

For further information, please email: <a href="mailto:cru\_hpupm@upm.edu.my">cru\_hpupm@upm.edu.my</a> or contact: 03-9769 9763/ 9759/ 9761







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### GOOD CLINICAL PRACTICE WORKSHOP (2ND SERIES)

4th - 5th OCTOBER 2022

**ONLINE CLASS - AVAILABLE IN:** 



### 6th OCTOBER 2022

**EXAMINATION - PHYSICAL** 

**EXAMINATION HALL 3 & 4** FACULTY OF MEDICINE AND HEALTH SCIENCES **UNIVERSITI PUTRA MALAYSIA** 

**Seating Quota** 60 seats only



Registration Fees

**UPM STUDENT - RM 250.00** 

**UPM STAFF - RM 350.00** 

**PUBLIC - RM 500.00** 

For more information, please contact:

MR. TAUFIK 03-97692504 MRS NORSHIDA 03-97692501 DR. RAIHANA 03-86092959

or email to

seminar\_medic@upm.edu.my

### REGISTRATION DATELINE 16TH SEPTEMBER 2022

(ZOOM link will be sent through registered email)









# COMING SOON

THE LANCET Summit October 27-28, 2022 | Virtual

Big data and AI in pandemic preparedness



Elsevier Conferences >

Global Events List >

Help & FAQs >

**FAQS** CONTACT US SIGN UP FOR UPDATES HOME CONFERENCE **PROGRAMME EXHIBITION & SPONSORSHIP** 

### The Lancet Summit: Big data and Al in pandemic preparedness

October 27-28, 2022 | Online and On-demand

The Lancet Summit: Big data and artificial intelligence in pandemic preparedness is supported jointly by The Lancet Digital Health, eBioMedicine, and The Lancet Regional Health - Western Pacific.

Managing COVID-19 and infectious disease is a global priority over the next few decades. Clinical and research communities are committed to reviewing the global response to the COVID-19 pandemic and a key part has been the unprecedented use and rapid scale of technology.

This conference will allow diverse stakeholders to discuss opportunities for new pandemic warning systems based on modelling approaches using AI; advances in real-world surveillance and tracking of disease spread; Al for drug screening and rapid diagnostics; and advances in remote treatment and telehealth.

The pandemic has forced healthcare providers and governments around the world to accelerate the development of Al tools and scale up their use in medicine, sometimes even before they are proven to work. This conference supports research that aims to better leverage Al to create equitable and accurate tools for pandemic response. This broad-reaching clinical conference interfaces cuttingedge Al technology with medical topics of human health interest.

The conference will appeal to researchers and clinicians specialising in infectious disease, as well as related specialties like mental health and cardiology. This meeting will be truly multidisciplinary attracting healthcare providers, policymakers as well as technical experts such as computational developers and engineers.

#### Conference topics:

- · Al in pandemic preparedness
- · Al in diagnostics
- · Wearables in diagnostics
- · Real-word surveillance
- · Al regulation and evaluation

### Register Now

### View Programme

#LancetSummitAl

Speakers

Regina Barzilay, USA Vittoria Colizza, France

Jessilyn Dunn, USA

Amos Folarin, UK Pradipta Ghosh, USA

Alasdair Henderson, UK

Adam Kucharski, UK

Sinéad Langan, UK

Kathy Leung, Hong Kong, Hong Kong Special Administrative Region, China

Raina MacIntyre, Australia

Maimuna Majumder, USA

Rachel McKendry, UK

Cecile Viboud, USA

Shuo Wang, China

Amy Wesolowski, USA

Tien Yin Wong, China

Jianhong Wu, Canada

Jizhe Xia, China

Zhou Ying, China

### Supporting Publications

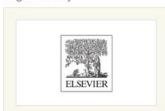






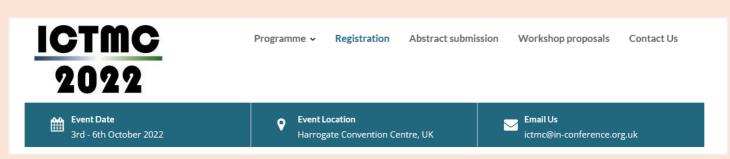


#### Organised by



**REGISTER NOW** 

1. The 6th International Clinical Trials Methodology Conference 2022. https://ictmc.org/



2. The 9th Asia Pacific Primary Care Research Conference: A Virtual Conference



• For more information on the conference, click [HERE]



venue: Online via





### Register to secure your place!







27-29 September MMA CPD 20 POINTS

### Workshops:

Clinical-epidemiology Research Methodology Series 3 2022

### Workshop

Includes practical sessions on study proposal writing and critical appraisals

Registration & Payment (e mail the receipt to Dr Navin Kumar at <a href="mailto:knavin@upm.edu.my">knavin@upm.edu.my</a> after payment)

Fees: RM 50 for UPM participants

RM 100 for non-UPM participants before 20th September 2022 at https://paygate.upm.edu.my/action.do?do=&bah

asa=bi

[oCERM Series 3 2022]

### Day 1. Introduction:

Characteristics of a quality research; Classification of epidemiologic research; Qualitative vs. quantitative research; An Introduction to the Oualitative Research

### Theoretical design:

Research idea, Research question; Literature review; Conceptual framework; Three decisions on study designs. An Introduction to the Reference and Citation Managers

### Data collection design:

Three designs; Sampling methods; Valid, Precise and Reliable; Possible biases

An Introduction to the Qualitative Research

### Day 2 and Day 3 Statistical design and Statistical analysis: descriptive, inferential, multivariable & Comprehensive reporting:

The essential concepts; Aims of Statistical analyses; Four statistical steps; Three statistical measures; Population and sample- estimation theory; Research and Biostatistics; Concepts of sample size estimation; Choice of statistical tests. An Introduction to qualitative analysis.



Dear Friends and Colleagues,

The Department of Family Medicine Universiti Putra Malaysia (UPM) are delighted to invite you to <u>SIGNUP</u> today for this workshop on "Clinical Epidemiology Research Methodology (CeRM)". See the time-table and topics on next page. This workshop will explain the essential features in every step of the whole research process, leading to a well-designed clinical research, enhancing confidence and skills in the planning and conduct of a high-quality clinical research till reporting. Additionally, this workshop will explain and address the causes of research waste, and to improve knowledge on critical appraisal of journal articles by clinicians and health-related professionals.

A wholesome understanding of clinical researches is possible and it is required to produce a quality clinical research. High-quality clinical researches are those that are relevant in the researched topics, credible in their methods and measurement, and reporting important and useful statistics and outcome estimates. This knowledge is invariably related to the skills of critical appraisal of clinical evidence in journal articles.

Continuous conduct of low-quality clinical research will lead to an accumulation of misleading evidence that could harm clinical care of patients. Therefore, poorly conducted clinical and biomedical research have the detrimental effects on the society like the scandals in the politics and economic arena. Moreover, "It was very easy to make errors" despite very good intentions of the researchers."

A certificate is available.

Registration & Payment (e mail the receipt to Dr Navin Kumar at knavin@upm.edu.my after payment)

Fees: RM 50 for UPM participants

RM 100 for non-UPM participants

before 20th September 2022 at https://paygate.upm.edu.my/action.do?do=&bahasa=bi

[oCERM Series 3 2022]

### WHO IS THIS WORKSHOP FOR?

- Postgraduate students in medicine and health sciences seeking to scale up their knowledge in research methodology or plan to conduct a clinical research for the first time, or seeking to begin well in statistical analysis, and to write effectively.
- Clinicians seeking to understand the whole process of a clinical research, the characteristics of a highquality research or appraising clinical practice guidelines (CPG), systematic reviews (SR) and journal articles.
- Academic staffs seeking to strengthen their capacity and roles in producing high-quality clinical research, good practice of data handling, compelling and comprehensive reporting.

### ANNOUCEMENT: Online Clinical-epidemiology Research Methodology (oCeRM) Workshop Series 3 2022

• Others including health sciences researchers and peer-reviewers are welcome to participate.

#### WHAT YOU WILL LEARN?

- Knowledge and skills in clinical research methodologies and develop a compelling research proposal in line with the principles of clinical epidemiology.
- Discover the best practices and approaches in planning and conducting high-quality clinical research from getting a research idea till reporting.
- Learn critical appraisals of clinical practice guidelines, systematic reviews and journal articles.
- The fundamental concepts of statistics and statistical analyses.
- Build your confidence in scientific reporting and academic writing.

### For questions, please contact or PM: Dr. Navin Kumar A/L Devaraj 013-3105381, Workshop Coordinator, Department of Family Medicine, UPM-email to: knavin@upm.edu.my

Day	Date/Time	Theoretical & Data Collection Designs	Tentative Speaker
	27 September 0830-0900	Interactive talk 1: Introduction - Characteristics of a quality research; Classification of epidemiologic research; Qualitative vs. quantitative research	Speaker: AP Dr. Chew BH
	0900-1000	Interactive talk 2: Theoretical design - Research idea, Research question; Literature review; Conceptual framework, Three decisions on study designs	Speaker: AP Dr. Chew BH
1	1000-1045	<b>Hands-on 1:</b> Research question & theoretical designs with examples from journal articles	Speaker: AP Dr. Cheong AT
Day 1	1045-1100	Break	
Ď	1100-1200	Interactive talk 9: Statistical design III: Sample size estimation	Speaker: Prof. Dr. Sazlina SG
	1200-1250	Interactive talk 3 + Q & A  An Introduction to the Reference and Citation Managers: ZOTERO, Mandalay, Endnote Basic and others	Speaker: AP Dr. Maliza Mawardi
	1250-1300	Interactive talk 4: - Summing up	Speaker: All speakers
	1300-1400	Lunch	
	1400-1500	Interactive talk 5: Data collection design I Three designs; Sampling methods, Valid, Precise and Reliable; Possible biases	Speaker: AP Dr. Chew BH
ly 1	1500-1530	Hands-on 2: Data collection designs with examples from journal articles	Speaker: AP Dr. Chew BH
Day	1530-1645	Interactive talk 6 + Q & A: An Introduction to the Qualitative Research	Speaker: Dr. Irmi Zarina
	1645-1700	Q & A Wrapping up Theoretical and data Collection Designs	Speaker/Facilitators All
		Statistical Design	

### ANNOUCEMENT: Online Clinical-epidemiology Research Methodology (oCeRM) Workshop Series 3 2022

	THING CENTERY: Offine Chinese epidennology Research Welhodology (OCERW) Workshop Series 3 2022					
	28 September 0830-0930	Interactive talk 7: Statistical design I  - The essential concepts; Aims of Statistical analyses; Four statistical steps; Three statistical measures	Speaker: AP Dr. Chew BH			
	0930-1030	Interactive talk 8: Statistical design II Population and sample— estimation theory; Research and Biostatistics; Choice of statistical tests	Speaker: AP Dr. Chew BH			
ıy 2	1030-1145	Break				
Day	1145-1230	Interactive talk 10: Statistical design- Summing up	Speaker: AP Dr. Chew BH			
	1230-1300 1300-1400	Q & A Lunch				
	1400-1600	Interactive talk 11 + Q & A  An Introduction to qualitative analysis	Speaker: Dr. Hani Syahida			
	1600-1700	Q & A Wrapping up	Speaker/Facilitators All			
		Statistical analysis & Comprehensive reporting (Year 3 or Year 4 who are ready)				
	29 September 0830-0915	Interactive talk 12: Introduction 1  - The basic concepts of estimation theory, variability and significance testing, hypothesis testing, the logical steps in statistical analysis	Speaker: AP Dr. Chew BH			
	0915-1030	Hands-on 3: An introduction to SPSS, navigating the software, some of the common functions/tests and interpretation Hands-on 4: Graphical creation in SPSS	Speaker: Dr. Aneesa AR AP Dr. Chew BH			
	1030-1045	Break				
	1045-1130	Interactive talk 13: Descriptive statistics	Speaker: Dr. Navin Kumar			
	1130-1200	Interactive talk 14: Inferential statistics	Speaker: AP Dr. Chew BH			
Day 3	1200-1245	<b>Hands-on 5:</b> Descriptive statistics and inferential statistics with SPSS [or work through with participants in the 4 <sup>th</sup> MMed Fam Med]	Speaker: Dr. Navin Kumar			
	1245-1430	Lunch				
	1430-1515	Interactive talk 15: Multivariable regression analysis  - Steps for constructing a multivariable model and checking statistical assumptions  - Linear regression, Logistic regression	Speaker: Prof Dr Ching Siew Mooi			
	1515-1615	Hands-on 6: Multivariable regression analysis with SPSS [or work through with participants in the 4 <sup>th</sup> MMed Fam Med]	Speaker: Prof Dr Ching Siew Mooi			
	1615-1645	Interactive talk 16: Comprehensive reporting	Speaker: Prof Dr Ching Siew Mooi			
	1645-1700	Concluding remarks and Q & A	Speaker: All			