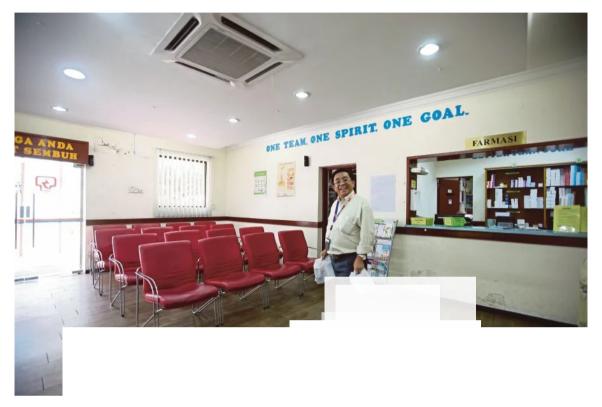
'Health clinics can take over the job'



By <u>Tharanya Arumugam</u> - August 23, 2021 @ 9:11am



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KUALA LUMPUR: The shuttering and relocation of a number of Covid-19 vaccination centres (PPV) in the Klang Valley, including the Health Ministry's *klinik kesihatan* (health clinics), will not pose too much problem as these clinics are generally equipped with the required facilities.

Epidemiologist Professor Datuk Dr Awang Bulgiba Awang Mahmud said some services at the health clinics, however, would need to be rescheduled or diverted elsewhere until the Covid-19 National Immunisation Programme (NIP) was completed.

He said the vaccination rate would not be greatly affected as some 500 health clinics could administer more than 250,000 jabs a day, thus closing the gap left by the closure of mega PPV.

"A quick look at the Special Committee on Covid-19 Vaccine Supply Access Guarantee's website reveals that a number of *klinik kesihatan* are being used for the vaccination programme.

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"If the PPV are shut down in favour of moving the rest of the vaccinations there, this should not pose too much of a problem as all *klinik kesihatan* are used to vaccinating children as part of the usual immunisation programme," he told the *New Straits Times*.





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The Science, Technology and Innovation Ministry's Independent Covid-19 Vaccination Advisory Committee has said the rationale behind the move could be the high cost of rental and maintenance of PPV.

The government had said 81.3 per cent of the adult population in the Klang Valley were fully vaccinated.

Health director-general Tan Sri Dr Noor Hisham Abdullah had on Wednesday told a news portal that the government would proceed with the Covid-19 Immunisation Task Force's proposal to shut down or relocate PPV in the Klang Valley, which will be carried out up to the end of next month. The shuttering and relocation will affect the majority of the 71 PPV in 10 districts in the Klang Valley, including 29 PPV in Selangor.

Dr Noor Hisham has said the government would do the necessary and perhaps engage more general practitioners (GPs) to assist in vaccinations.

Dr Awang Bulgiba, however, said GPs could face some issues with the administration of Messenger RNA (mRNA) vaccines, like the Pfizer-BioNTech vaccine, which makes the bulk of Covid-19 vaccines in Malaysia.

He said for non-mRNA vaccines, the cold chain was less of an issue as most of the doses could be stored at refrigerator temperatures and administering them was usually quite straightforward as they come constituted in vials ready for use.

For mRNA vaccines, he said, it might be a hassle for GPs to store and administer them, but this issue was not insurmountable.

"An mRNA vaccine is likely to be stored away from the GP clinic.

"It is possible to store the vaccine in a special container for a few days, but doses will need to be carefully rationed out to the GP clinic to ensure the vaccines are not wasted and are used as soon as the vials are delivered to the GP clinic.

"Deliveries will need to be recalibrated as the number of sites dispensing vaccines will need to increase to compensate for

the drop in the number of mega PPV.

"Another issue with mRNA vaccines will be the extra step in constituting the vaccine dose as it has to be thawed out and mixed with a solvent.

"More GPs could have joined the NIP, but I think there has been some reluctance," he said, adding that there were probably two main reasons for the reluctance.

He said firstly, the low fees for administering vaccines might have been a deterrent for GPs.

Secondly, he said, single-doctor GPs, as opposed to large practices, in Malaysia generally depended a lot on GPs themselves performing the professional functions of consent, injection and monitoring post-injection.

He said this could be another barrier to GPs offering Covid-19 vaccination



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as it would place a lot of burden on a single person.

He said another option was now being used by the Health Ministry – the more than 1,100 *klinik kesihatan* nationwide.

"If 500 public health clinics work round the clock, three shifts per day with two vaccinators, plus six personnel to deal with registration and observation, at five minutes per jab and seven working hours per shift, we can get a rate of 84 jabs per vaccinator-shift.

"If there are six vaccinator-shifts every 24 hours, every health clinic can theoretically vaccinate 504 people in 24 hours, so a total of 500 health clinics can theoretically dispense 252,000 jabs per day, filling in the vacuum left by closing mega PPV. "Even if we limit it to just two shifts per day (four vaccinator-shifts), 500 health clinics can dispense 168,000 jabs per day.

"As some states and territories, like Sarawak and Labuan, wind down their vaccination drives due to their already high vaccination coverage, we may see other states ramping up this way."



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