



Positive Parenting Malaysia

The Official Guide Series On Maternal, Child & Family Care By The Malaysian Paediatric Association



Microbes
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How to Encourage
Early Language
Development

The First
1,000 Days
From Conception to
Complementary Feeding


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“Parental awareness and education is vital in raising healthy children.”



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“If a child cannot learn in the way we teach, we must teach in a way the child can learn.”



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President, PPBM



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“A happy healthy family leads to a happy healthy society.”



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“When your child is having a problem, stop, listen, then respond to the need, not the behaviour.”



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The First 1,000 Days: A Vital Phase

Being a parent begins even before your baby is born. Your little one's growth and development start from conception, and your habits and choices during pregnancy may actually influence their well-being after they are born. The first two years of your child's life is also a crucial period, which can determine their lifelong health. This important timeline, starting from conception until your child's second birthday, is often called the first 1,000 days.

Realising the significance of the first 1,000 days, we have invited key experts in respective areas to further explain about the vital phase of growth and development in this issue's Feature. In addition, our experts also touch on other key topics such as the presence of microbes in our respiratory tract, how to promote early language development, as well as the issue of runaway teens.

We hope you will enjoy reading these articles, while learning new things about parenting. Do check out our website (www.mypositiveparenting.org) to read other parenting topics from past issues. Don't forget to follow us on Facebook (@positiveparentingmalaysia), Instagram (@mypositiveparenting), YouTube (ParentFlix), and Spotify (ParentFlix) for more cool contents and latest updates!

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Unit 16-07, 16th Floor, Menara Arina Uniti, 97,
Jalan Raja Muda Abdul Aziz, 50300 Kuala Lumpur.

Tel: 03-2202 7099 Fax: 03-2602 0997

Email: secretariat@mpaeds.my Website: <https://mpaeds.my>

For enquiries, please contact:

Positive Parenting Secretariat

VERSAE COMM 1993 0100 9036 (263773-W)

12-A Jalan PJS 8/4, Mentari Plaza, Bandar Sunway,
46150 Petaling Jaya, Selangor, Malaysia

Tel: (03) 5632 3301

Email: parentcare@mypositiveparenting.org

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The First 1,000 Days

From Conception to Complementary Feeding

The first 1,000 days of a child's life is a crucial period between conception and their second birthday. Proper nutrition and healthcare during this window of opportunity are key for laying the foundation for their lifelong health, well-being, and cognitive development.

The first 1,000 days: a significant period

What the expert says...



Datuk Dr Zulkifli Ismail,
Consultant
Paediatrician &
Paediatric Cardiologist

“The first 1,000 days is the most critical period of a child's growth and development. This is a time of rapid physical growth, requiring adequate nutrition that is vital for healthy physical development and preventing growth issues. On top of that, the immune system is also developing during this time, and good nutrition and health practices can help build a strong immune system.”

Additionally, a child's brain develops at an astonishing rate during this period, forming billions of neural connections. These connections are the building blocks for future cognitive abilities, learning, and social-emotional development. The foundations laid in the first 1,000 days can have a lasting impact on a child's health, influencing his ability to grow, learn, and prosper into adulthood.

Why is this period so significant?

- Rapid physical growth
- Brain development
- Immune system development
- Long-term health

What parents should do?



Ensure proper nutrition

A balanced diet rich in essential nutrients is crucial for both the mother during pregnancy, and the child after birth. Breast milk provides all the necessary nutrients for a baby's first six months of life.

Provide a stimulating environment

Children need a safe and nurturing environment where they can explore, learn, and grow. Talking, reading, and playing with your child are essential for their cognitive and social development.



Regular health check-ups

Regular visits to the doctor can help ensure that your child is growing and developing properly. Vaccinations are also essential to protect your child from preventable diseases.



Love and care

A loving and supportive environment is crucial for a child's emotional and social development



Pregnancy: the critical 40 weeks

What the expert says...



Dato' Dr H Krishna Kumar
Consultant Obstetrician & Gynaecologist

“A healthy pregnancy is crucial for both the mother and the developing baby, setting the foundation for lifelong well-being. It involves proactive measures like prenatal care, proper nutrition, and healthy lifestyle choices, which help reduce risks and promote optimal health for both mother and child.”

“A healthy pregnancy contributes to the baby's optimal growth and development, reduced risk of birth defects, healthy birth weight, reduced risk of chronic diseases later in life, and better cognitive and emotional development.”

Mothers also benefit from a healthy pregnancy as it reduces the risk of pregnancy complications, allows for faster postpartum recovery, improves emotional well-being, and prepares mums to care for the newborn.

Tips for moms-to-be

Before pregnancy

- Consult your doctor
- Start taking folic acid supplements
- Achieve and maintain a healthy body weight
- Quit smoking and alcohol
- Limit caffeine
- Update your vaccinations
- Manage any chronic conditions

During pregnancy

- Prioritise prenatal care
- Have a balanced and varied diet
- Get recommended dietary supplements, e.g. folic acid, iron, calcium, omega-3 fatty acids
- Stay hydrated
- Stay active
- Get enough rest and sleep
- Manage stress
- Avoid harmful substances
- Focus on food safety
- Communicate with your doctor



Sample menu for pregnant mums (1500 kcal/day)

Breakfast	Lunch
<ul style="list-style-type: none"> • 2 slices of wholegrain bread • 2 tablespoons of tuna • Salad and tomatoes • 1 glass of milk 	<ul style="list-style-type: none"> • 2 scoops of brown rice • 1 scoop of stir-fried spinach with tofu • 1 scoop of spring beans and brinjal • 1 piece of fried fish with chilli • 1 whole medium apple • 1 glass of plain water
Dinner	Additional healthy snacks
<ul style="list-style-type: none"> • 2 scoops of brown rice • 1 scoop of stir-fried kangkong • 1 bowl of chicken soup with carrot • 1 slice of medium size papaya • 1 glass of plain water 	<p>First trimester</p> <ul style="list-style-type: none"> • 1 whole orange <p>Second trimester</p> <ul style="list-style-type: none"> • Morning: 3 pieces of cream crackers • Afternoon: 1 glass of low-fat milk <p>Third trimester</p> <ul style="list-style-type: none"> • Morning: 1 glass of unsweetened soya milk • Afternoon: 1 piece of chicken pau • Supper: 1 small tub of plain yoghurt

Source: Maternal Dietary Guidelines for Malaysia (2023)

Exclusive breastfeeding: the first six months

What the expert says...



Dr Roseline Yap
Nutritionist

“ The World Health Organization (WHO) and UNICEF recommend exclusive breastfeeding for the first six months of life. This means providing the infant with breast milk only, without any other liquids or solids, not even water. ”

“ The act of breastfeeding also fosters a strong emotional bond between mums and babies, promoting feelings of security and comfort. In addition, breastfeeding also reduces the mother’s risk of certain cancers, type 2 diabetes mellitus, and postpartum depression. ”

Breast milk is perfectly tailored to the infant’s changing needs. It provides the ideal balance of proteins, fats, carbohydrates, vitamins, and minerals for infant growth. It is also rich in antibodies, immune cells, and other protective factors that shield the infant from infections. Studies have also shown that breastfed infants may have enhanced cognitive development.

Breastfeeding benefits

- Provides optimal nutrition
- Boosts immunity
- Enhances cognitive development
- Creates emotional bonding
- Maternal health benefits

Tips for successful breastfeeding



Early initiation
Initiate breastfeeding within the first hour after birth.

Frequent and on-demand feeding
Breastfeed frequently, whenever the baby shows signs of hunger, e.g. sucking on fingers or restlessness.

Proper latch
Ensure a deep and comfortable latch to prevent nipple soreness and ensure effective milk transfer.



Positioning
Experiment with different breastfeeding positions to find what works best for you and your baby.

Skin-to-skin contact
Promote skin-to-skin contact with your baby to stimulate milk production and strengthen bonding.

Support system
Seek support from lactation consultants, breastfeeding support groups, or healthcare professionals.

Healthy maternal diet
Eat a varied and balanced diet for optimal milk production and maternal health.

Hydration
Drink plenty of fluids.

Complementary feeding: until the second birthday

“ After six months, breast milk remains a vital source of nutrition and breastfeeding should be continued up to two years of age. However, infants require additional nutrients to support their rapid growth and development. This is when complementary feeding is introduced. Complementary foods are solid or semi-solid foods given alongside breast milk ”

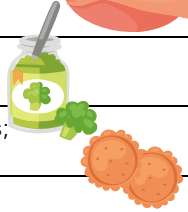
“ Parents should aim to provide a wide variety of nutrient-rich foods from different food groups – including vegetable, fruit, grains, legumes, and animal-based protein foods – when feeding their children. However, try to avoid added sugar, salt, and honey for children under two years. ”

“ Responsive feeding should be practised. This means you should pay attention to your child’s hunger and satiety cues, encourage them to self-feed, and create a positive and supportive feeding environment. Prioritise food hygiene when preparing and handling food for your little one to prevent foodborne illnesses. ”









A quick guide to complementary feeding



Age	Daily frequency	Texture
Birth-6 months	Exclusive breastfeeding	
6-8 months	2-3 meals + 5-6 times/day of breast milk	Pureed, mashed, or semi-solid foods
9-11 months	3-4 meals + 1-2 nutritious snacks	Chopped, minced, or diced soft foods; finger foods, e.g. soft biscuits, fruit
1-2 years	4-5 meals + 1-2 nutritious snacks	Family foods



Sample complementary feeding menu

Food group	Amount of complementary food per day according to age groups		
	6-8 months	9-11 months	1-2 years
Cereals, cereal-based products, and tubers 	1-1½ cup of porridge (e.g. rice, barley)	2-2½ cups of thick porridge (e.g. rice, barley, oat)	1½-2 cups of rice or cereal
Vegetable (e.g. spinach, carrot, pumpkin) 	¼ cup of cooked vegetables 	½ cup of cooked vegetables 	1 cup of cooked vegetables 
Fruit 	¼ slice of papaya or ½ small banana or 1 small apple	½-1 slice of papaya or 1-2 small bananas or 1-2 small apples	1 slice of papaya or 2 small bananas or 2 small apples
Meat, poultry, fish, and legumes 	2 tsps of any type of meat	2 tsps of any type of meat or ¼ medium size fish or egg	½ medium size ikan kembung or 1 egg
Milk 	Breastfeeding on demand	Breastfeeding on demand	Breastfeeding on demand or 3 glasses of milk
Fats and oil	1 tsp of added oil	1 tsp of added oil	1 tsp of added oil

Measurement guide:
 1 cup = 200 ml 1 glass = 250 ml 1 teaspoon (tsp) = 5 g

Source: Positive Parenting 360° Complementary Feeding section

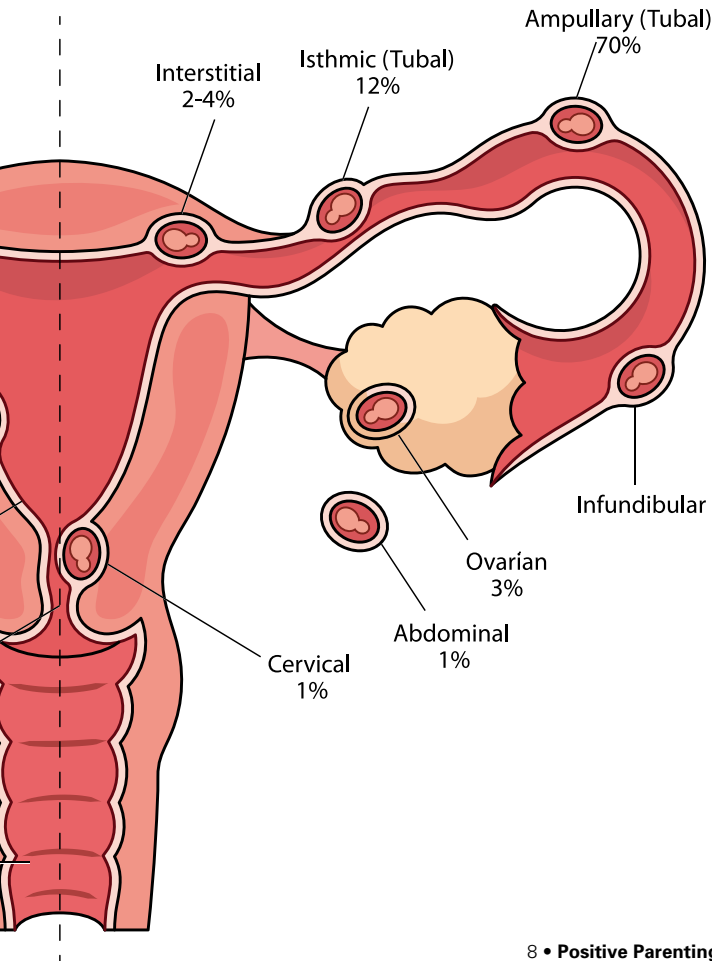
The Dangers of Ectopic Pregnancy

By **Dato' Dr H Krishna Kumar**, Consultant Obstetrician and Gynaecologist

Ectopic pregnancy was the leading cause of maternal death in Malaysia in 2023, accounting for 15.4% of all maternal fatalities. This condition occurs when a fertilised egg implants and begins to grow outside the uterus, most commonly in the fallopian tubes. Since the fallopian tubes are not equipped to support the growth of a foetus, the fertilised egg is unable to survive here.

There are several locations within and outside the female reproductive system where an ectopic pregnancy can happen, as illustrated in the figure below:

Ectopic pregnancy



If not detected and treated promptly, ectopic pregnancy can lead to death from organ rupture and internal bleeding. Early diagnosis and intervention, which may include medication or surgery, are crucial to prevent further complications and ensure the safety of the mother.

Risk factors

Pelvic inflammatory disease (PID)

Previous ectopic pregnancy

Previous surgery

Endometriosis

Symptoms and complications

The early symptoms of an ectopic pregnancy closely mimic those of a normal pregnancy, making it difficult to distinguish between the two. While some signs may seem typical, there are also abnormal symptoms that may indicate a complication. Recognising these differences is essential for an accurate diagnosis.

• Typical pregnancy symptoms (both normal and ectopic pregnancies):



Missed period



Frequent urination

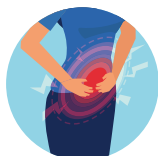


Breast tenderness



Morning sickness

• Warning symptoms in an ectopic pregnancy:



Lower abdominal or pelvic pain: This pain can be localised to one side of the lower abdomen or pelvis and is often sharp or cramp-like. It may become more intense or persistent as the ectopic pregnancy progresses.



Spotting or brown vaginal discharge: Light bleeding or spotting may occur that is different from a normal period. The blood may be brown or discoloured, indicating older blood.



Symptoms of blood loss: As the ectopic pregnancy progresses and causes internal bleeding, symptoms of blood loss such as dizziness, light-headedness, fainting, or feeling weak may be experienced by the mother.



Shoulder tip pain: This can happen as a result of internal bleeding from the rupture of a fallopian tube. The blood in the abdominal cavity can irritate the diaphragm, leading to referred pain in the shoulder, particularly when lying down or taking deep breaths.

• Complications:

Ruptured ectopic pregnancy: As the fertilised egg grows outside of the normal implantation site, it will cause the surrounding tissue to stretch and eventually tear. This rupture can lead to severe internal bleeding, as blood vessels in the affected area are damaged. The resulting blood loss can quickly become life-threatening, leading to **shock**, **organ failure**, and, without immediate medical intervention, **death** of the mother.

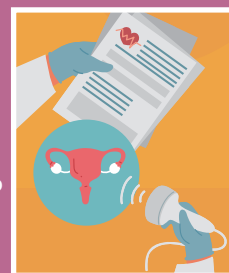


Treatment

The treatment for an ectopic pregnancy typically involves terminating the pregnancy using medication such as methotrexate or through a surgical procedure. Additionally, healthcare providers may assess for the presence of a heterotopic pregnancy, which occurs when a normal intrauterine pregnancy develops simultaneously with the ectopic pregnancy. This requires careful evaluation to ensure proper treatment without risking the life of the mother and the viable foetus.

Recommendation

Please see your doctor or an O&G specialist to confirm your pregnancy early and to ensure that it is inside the uterus and not an ectopic pregnancy. An early dating ultrasound also helps in the management of your pregnancy.



In conclusion, raising awareness about the signs and symptoms of ectopic pregnancy among mothers is crucial for early intervention, which can significantly reduce maternal mortality associated with this condition. Timely diagnosis and treatment are key to protecting pregnant women from its potentially life-threatening consequences. PP

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Obstetrical and Gynaecological Society of Malaysia



Family Mental Health Check: Dealing with Burnout

By **Dr Serena In**, Clinical Psychologist

Life today moves fast – between traffic jams, packed school schedules, tuition classes, and endless WhatsApp group messages, it's no wonder families feel stretched thin. In the rush, signs of mental fatigue can slip under the radar.

Just like we'd notice a runny nose or a fever, tuning in to emotional shifts – in our children, our partners, or ourselves – is just as vital. A regular family mental health check can help spot early signs of burnout and build resilience before things boil over.

Recognising burnout

Burnout isn't just about feeling tired; it's a state of emotional, physical and mental exhaustion caused by prolonged or excessive stress. While the underlying causes might be similar, how it manifests can differ significantly between adults and children.

For spouses (adults)

Adult burnout often creeps in quietly, making it harder to pinpoint. Look out for these indicators in yourself or your partner:

- Persistent exhaustion:**
Feeling drained even after a good night's sleep
- Irritability and/or cynicism:**
A shorter fuse, or a more negative outlook than usual
- Reduced effectiveness:**
Struggling to focus, make decisions, or complete tasks
- Withdrawal:** Less engagement in social activities or hobbies previously enjoyed, as well as reduction in communicating with others
- Physical symptoms:**
Frequent headaches, stomach problems, or increased susceptibility to illness
- Changes in appetite or sleep patterns:** Eating more or less, or experiencing insomnia



Managing mental health challenges as a family

Once you've recognised the signs, the next step is to address them with empathy and practical solutions. Here's how you can approach it together:

- ✔ **Open communication:** Create a safe space for everyone to share their feelings without judgment. For children, this might mean asking open-ended questions during a relaxed activity.
- ✔ **Prioritise rest and downtime:** Encourage adequate sleep for all family members. Schedule unstructured time for play, relaxation and hobbies – time away from screens and commitments.
- ✔ **Faith as a family anchor:** For many families, incorporating moments of meditation or spiritual reflection – be it through prayer, quiet meditation, or visits to places of worship like the mosque, church or temple – can foster calm and connection.
- ✔ **Set boundaries:** Learn to say no to extra commitments that overschedule your family. Prioritise family time and individual downtime.



- ✔ **Model self-care:** Children learn by example. Show them that it's okay to take breaks, ask for help and prioritise your own well-being.
- ✔ **Sustainable healthy habits:** Focus on nutrient-dense meals, regular physical activity and spending time outdoors. These are fundamental for mental well-being.
- ✔ **Family fun:** Make time for enjoyable activities as a family. Laughter and connection are powerful antidotes to stress.
- ✔ **Seek professional support:** If symptoms persist or worsen, don't hesitate to reach out to a GP, counsellor, or child psychologist. Early intervention is often the most effective.

For kids

Children might not express burnout in the same way adults do. Their signs can often be mistaken for typical childhood behaviours, so observation from various adults is key:

- Changes in mood or behaviour:** Increased tantrums, irritability, or tearfulness.
- School struggles:** Look out for sudden drops in academic performance, refusal to attend school or tuition, or signs of significant distress around exams.
- Physical complaints:** Frequent tummy aches or headaches with no apparent medical cause.
- Withdrawal from activities:** Losing interest in hobbies, friends, or playtime.
- Sleep disturbances:** Difficulty falling asleep, nightmares, or wanting to sleep excessively.
- Regression:** Reverting to behaviours from younger age like thumb-sucking or bedwetting.



Remember, addressing mental health challenges is a journey, not a destination. By being attuned to the early signs of burnout and adopting proactive strategies, you can build a more resilient, supportive and ultimately, happier family environment. Make mental health check-ins a regular part of your family life – whether through weekly conversations, quiet observations, or seeking expert guidance when needed. A thriving family starts with emotional well-being at its core. PP

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COME OUT STRONGER
PROTECT THEM
BETTER

The COVID-19 pandemic has taught us many lessons. One of the most significant lessons was about protecting our loved ones especially young children, older adults, and those with chronic illnesses. Influenza is out there and with or without COVID-19, it is still dangerous for them.

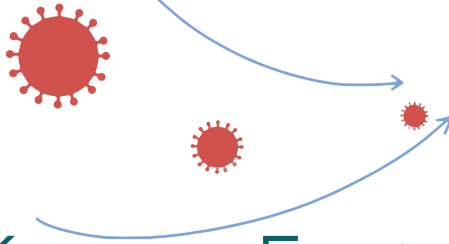
We've now learnt that we must come out stronger to protect them better. Keep our loved ones safe with the annual flu vaccination.

For more info, visit www.actoflove.ifl.my.



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Little Known Facts About Influenza

By **Dr Husna Musa**, Paediatrician and Lecturer

Here are some lesser-known facts about influenza that you should know:

The origin of the word “influenza”

The word “influenza” doesn’t come from a scientific lab. Its roots are in medieval Italian, specifically from the 15th century. Back then, outbreaks of what we now know as the flu were often blamed on astrological forces or the “influence” of the stars. The Italian phrase **“influenza di stelle”** literally means “influence of the stars.” Over time, this was shortened to “influenza” or simply “flu” to describe the widespread illness. This historical origin highlights how mysterious infectious diseases were before the discovery of germ theory.



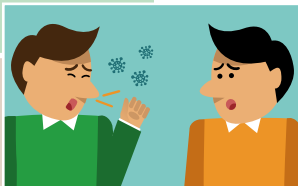
The virus is constantly changing, leading to many subtypes

The influenza virus is a master of disguise, constantly mutating and evolving. There are three types that infect humans: A, B, and C, with influenza A and B being the main types that cause seasonal epidemics. Within these types, there are many subtypes and strains, each with slightly different genetic makeups. For example, influenza A viruses are categorised into subtypes like H1N1 or H3N2 based on their surface proteins.

This constant genetic change means that immunity you get from a previous infection or vaccination might not protect you from a newly emerged strain. This is why the **annual flu vaccination is crucial**. Each year, flu vaccines are formulated according to the circulating influenza viruses. Without the yearly vaccination, your immune system wouldn’t be ready for the ever-changing viral landscape.

Flu is contagious before and after symptoms

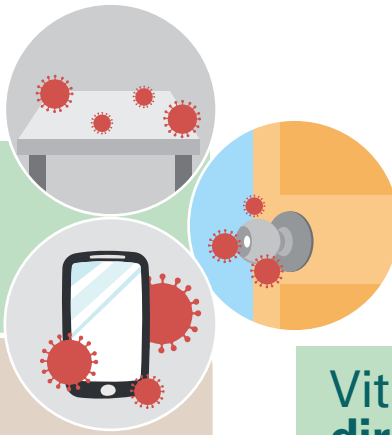
One reason the flu spreads so easily is that you can transmit the virus even before you feel sick.



Typically, people are contagious starting **one day before symptoms appear**. This means you can unknowingly spread the virus just by going about your daily routine. What’s more, contagiousness usually lasts for **five to seven days after symptoms begin**, and sometimes even longer, especially in young children or those with weaker immune systems. This extended period of contagiousness, combined with the pre-symptomatic phase, makes it incredibly challenging to contain influenza outbreaks.

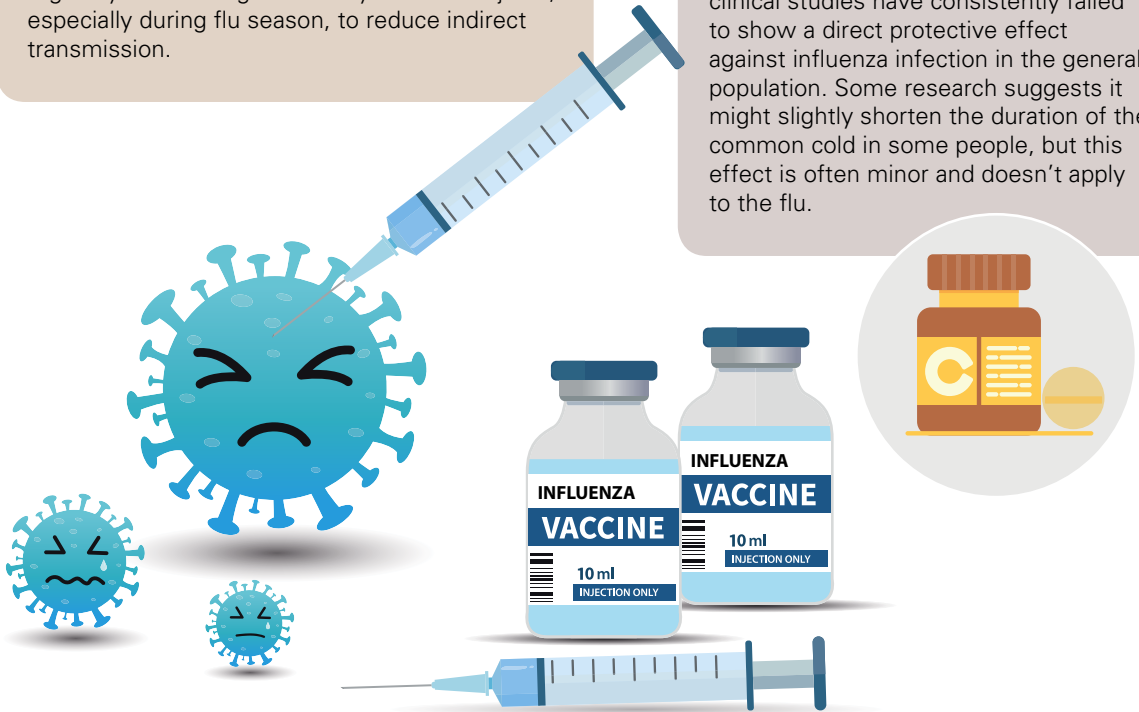
The virus can survive on hard surfaces

Influenza viruses are surprisingly resilient outside the human body, especially on hard surfaces. Studies show that the flu virus can survive for up to **24 to 48 hours on non-porous surfaces** like doorknobs, countertops, tables, and phones. However, on softer, porous surfaces such as tissues or clothes, the virus survives for a shorter period, typically around 8-12 hours. This ability to linger on surfaces emphasises the importance of frequent handwashing and regularly disinfecting commonly touched objects, especially during flu season, to reduce indirect transmission.



Vitamin C does not directly prevent flu

Despite popular belief and widespread use, **high doses of Vitamin C do not prevent you from getting the flu** or significantly reduce its duration or severity. While Vitamin C is vital for overall health and immune function, clinical studies have consistently failed to show a direct protective effect against influenza infection in the general population. Some research suggests it might slightly shorten the duration of the common cold in some people, but this effect is often minor and doesn't apply to the flu.



Get your annual flu vaccination

Given the continuous evolution of the influenza virus, its ability to spread before symptoms appear, and its surprising persistence on surfaces, **annual influenza vaccination is the single most effective way to protect yourself and your community from the flu.** Vaccination helps your immune system recognise and fight off the most common strains expected in each season. This significantly reduces your risk of infection, severe illness, hospitalisation, and even death. It also contributes to "herd immunity," protecting those who can't be vaccinated. Make annual flu vaccination a priority for your health! PP

An educational contribution by



Malaysian Paediatric Association



Microbes in the Airways

By **Datuk Dr Zulkifli Ismail**, Consultant Paediatrician & Paediatric Cardiologist

Did you know that there are microbes living in our airways, like in the gut and on the skin? The human respiratory tract (RT) is a complex and dynamic environment, harbouring a diverse community of microorganisms collectively known as the respiratory tract microbiota. Far from being sterile, this microbial ecosystem plays a crucial role in maintaining respiratory health.

Among its many inhabitants, *Streptococcus pneumoniae*, commonly referred to as pneumococcus, stands out as a frequent coloniser of the upper respiratory tract, particularly the nasopharynx. In fact, it is estimated that up to 40-50% of healthy children and 20-30% of healthy adults are asymptomatic carriers of pneumococcus. While often living harmlessly as part of the RT microbiota, pneumococcus is also a notorious opportunistic pathogen capable of causing a range of severe diseases.

Factors influencing the RT microbiota

The composition and stability of the RT microbiota are influenced by a myriad of factors, both intrinsic and environmental:



• **Age and genetics:** These inherent factors play a role in shaping an individual's unique microbial profile.



• **Environmental exposures:** Air pollution and, most notably, exposure to smoke (both active and passive), significantly alter the balance of the RT microbiota. Smoking, for instance, has been shown to reduce the diversity of microbial species and promote the colonisation of potential pathogens like *Haemophilus influenzae* and *Moraxella catarrhalis*, alongside pneumococcus, thereby increasing susceptibility to respiratory infections.



• **Lifestyle factors:** Diet and antibiotic use can also impact the microbial community.



• **Viral infections:** Infections such as influenza can temporarily disrupt the microbiota, creating a window of opportunity for bacterial superinfections.

The effects of dysbiosis

Dysbiosis, an imbalance in the composition or function of the RT microbiota, is increasingly recognised as a contributing factor to various respiratory diseases. While a healthy microbiota can protect against pathogen invasion, dysbiosis can compromise these defences. This disruption has been linked to some common respiratory illnesses including:



- **Pneumonia:** An altered microbiota can facilitate the overgrowth of pathogenic bacteria, leading to inflammation and impaired lung function.



- **Bronchitis:** Dysbiosis can contribute to inflammation of the bronchial tubes.



- **Chronic obstructive pulmonary disease (COPD):** Persistent dysbiosis may exacerbate symptoms and contribute to disease progression.



- **Asthma and cystic fibrosis:** Emerging research also suggests a connection between RT microbiota dysbiosis and these conditions.

Sustaining the balance

Maintaining the delicate balance of the RT microbiota is paramount for preventing respiratory infections and promoting overall respiratory health.



Lifestyle interventions: Avoiding exposure to smoke and air pollutants can significantly contribute to a healthier microbial environment.



Dietary approaches: A balanced diet rich in prebiotics and probiotics may also play a role in supporting a diverse and robust microbiota, although more research is needed in this specific area for respiratory health.

The respiratory tract microbiota is a vital component of our health, acting as a frontline defence against pathogens. Understanding the factors that influence its balance and recognising the role of dysbiosis in disease are crucial for developing effective preventive strategies. Through healthy lifestyle choices and the continued success of vaccination programs, particularly against common colonisers like pneumococcus, we can better protect the delicate microbial ecosystem of our respiratory tract and safeguard ourselves against serious infections. PP

The role of vaccination

Crucially, vaccination stands as one of the most effective strategies for preventing infections caused by specific respiratory pathogens. In the context of pneumococcus, pneumococcal vaccine significantly reduces the incidence of pneumococcal diseases such as pneumonia, meningitis, and otitis media. While vaccination primarily targets the pathogen, it indirectly contributes to maintaining the balance of the RT microbiota by preventing the overgrowth and pathogenic activity of a common coloniser that can severely disrupt the delicate ecosystem. By reducing the burden of pneumococcal disease, vaccination helps preserve the overall health and resilience of the respiratory tract microbial community.



An educational contribution by



Malaysian Paediatric Association



Chickenpox, caused by the varicella-zoster virus (VZV), is a highly contagious disease often associated with childhood. While many people have personal experience with it, several persistent misconceptions can lead to faulty decisions. Let's unmask the truth behind some common chickenpox myths.

Chickenpox: Myths vs Facts

by **Dato' Dr Musa Mohd Nordin**, Consultant Paediatrician & Neonatologist and **Dr Husna Musa**, Paediatrician & Lecturer

Myth:
"Chickenpox is always a mild disease."

Fact: One of the most dangerous myths is that chickenpox is always a mild inconvenience. While many cases in healthy children are uncomplicated, VZV can cause serious, even life-

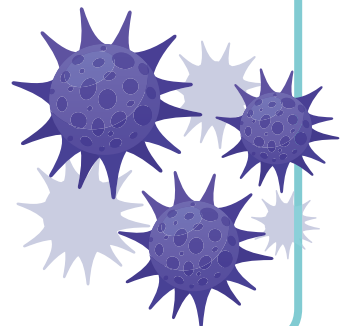
threatening, complications. These include bacterial superinfections, pneumonia, and encephalitis. Immunocompromised individuals, infants, and pregnant women face a significantly higher risk of severe disease and complications. Even in seemingly mild cases, intense itching can lead to scarring and secondary infections. Believing it's "just chickenpox" can lead to a lack of proper medical attention when complications arise.



Myth: "You're immune for life once you've had chickenpox."

Fact: Contracting chickenpox usually grants lifelong immunity against chickenpox itself, but the virus doesn't disappear.

VZV lies dormant in nerve cells and can reactivate years later, causing shingles (herpes zoster). Shingles presents as a painful rash, often on one side of the body, and can lead to debilitating nerve pain (postherpetic neuralgia) that lasts for months or years. So, while you won't get chickenpox again, the threat of VZV-related illness persists.



Myth: “Chickenpox parties are a safe way to build immunity.”

exposing a child to a potentially severe illness when a safe and effective vaccine is available is unnecessary and risky. Complications can arise unexpectedly, and disease severity is unpredictable. Relying on deliberate infection puts children at undue risk of serious illness, hospitalisation, or even death.

Fact: The idea of “chickenpox parties” – intentionally exposing unvaccinated children to an infected individual – is a medically irresponsible practice. This myth suggests natural infection is superior to vaccination. As discussed, chickenpox is not always benign;



Myth: “Only children get chickenpox.”

severe illness with a higher risk of complications like pneumonia, which can be life-threatening. The rash in adults can also be more extensive. This myth often gives adults a false sense of security, making them less likely to take precautions or seek vaccination if unsure of their immunity.

Fact: While most common in children, chickenpox can affect people of all ages. In fact, adults who contract chickenpox often experience a more

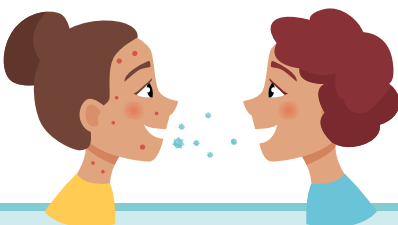


Myth: “You can’t get chickenpox from someone with shingles.”

if an unvaccinated individual or someone who has never had chickenpox comes into direct contact with fluid from a shingles rash, they can contract chickenpox. The risk is lower than from active chickenpox, as shingles is generally less contagious, but transmission is possible, especially if the rash is uncovered.

Fact: This myth is false. While someone with shingles has a reactivation of VZV, not chickenpox, the fluid-filled blisters of a shingles rash

Chickenpox is more than just a childhood rash; it’s a serious illness with potentially significant consequences. Understanding and dispelling these myths is crucial for promoting public health and encouraging vaccination. Vaccination is the most effective and safest way to prevent chickenpox and its complications. The chickenpox (varicella) vaccine is recommended for most children, adolescents, and adults who haven’t had chickenpox or been vaccinated. Consult your healthcare provider to determine the appropriate vaccination schedule for you and your family. Protecting yourself and your community from VZV is a simple yet powerful step towards better health. PP



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UNDERSTANDING CHICKENPOX

CHICKENPOX ALSO KNOWN AS VARICELLA/CACAR AIR IS CAUSED BY THE VARICELLA-ZOSTER VIRUS

Chickenpox is transmitted from person to person by directly touching the blisters, saliva or mucus of an infected person

The virus can also be transmitted through the air by coughing and sneezing

Direct contact with the blisters of a person with shingles can cause chickenpox in a person who has never had chickenpox and has not been vaccinated

Chickenpox can spread indirectly by touching freshly contaminated items such as clothing from an infected person



HOW LONG WILL CHICKENPOX LAST?

Chickenpox symptoms usually last for 1 to 2 weeks

There are **3 stages** of chickenpox infection in the body:



Red or Pinkish Bumps

Fluid-filled Blisters / Vesicles

Crusts & Scabbed Lesions

CHICKENPOX IS A VACCINE-PREVENTABLE DISEASE. ASK YOUR HEALTHCARE PROVIDER ABOUT THE NEW CHICKENPOX VACCINE TODAY.

References: 1. <https://healthclinics.superdrug.com/chickenpox-symptoms/> 2. <https://www.welldricks.co.uk/news/chicken-pox-symptoms-and-stages>

Tracking Growth and Good Nutrition Key to Supporting Child Health

by **Dr Roseline Yap**, Nutritionist



Children grow up so fast – in the blink of an eye, they're already as tall as you are! Growth is a visible testament to their health and development.

Why is it important to track your child's growth?

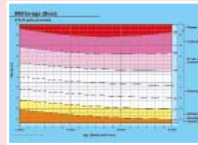
Monitoring your child's growth helps you:

- **Ensure they are getting enough nutrients:** Growth can be a good indicator of whether your child's diet is meeting their nutritional needs.
- **Check their development:** Growth is closely linked to how well children are developing physically and mentally.
- **Detect health problems early:** If a child is growing too slowly or too quickly, it may point to an underlying health concern.



How do you track your child's growth?

You don't need fancy equipment – just regular tracking and simple tools will do.



- Measure their height and weight at home or during clinic visits.
- Plot the measurements on a growth chart to see how your child compares with other children of the same age and gender.
- Use the WHO Growth Standards charts, which track: Weight-for-age, Height-for-age, BMI-for-age.
- Try to track growth at least every three months to spot any patterns or changes.

Possible growth-related problems

Growth problems often link back to poor nutrition. Here are some to look out for:



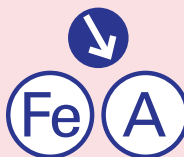
Undernutrition

– Can lead to stunting (being too short for age) or wasting (being too thin).



Overnutrition –

May cause children to become overweight or obese, increasing the risk of other health problems.



Micronutrient deficiencies

– Lack of iron, zinc, calcium, vitamin D, A or other essential nutrients can affect growth and development.

How to support healthy growth through nutrition

Good nutrition is one of the most powerful tools you have as a parent to support your child's growth and development. It lays the foundation for strong bones, a healthy immune system, and even better concentration at school.

The good news? You don't need to be a MasterChef or spend hours in the kitchen to get it right. Small, consistent efforts at home can make a big difference. Here are some simple, practical ways to nourish your child's body and mind as they grow:



• **Breastfeed exclusively**

for the first six months if possible – Breast milk provides all the nutrients babies need, along with important antibodies to protect against illness.



• **Offer a variety of foods**

– As your child begins solids, aim for a colourful plate including fruit, vegetable, grains, protein (like chicken, fish, tofu, or eggs), and dairy products.



• **Watch portion sizes**

– Every child is different. Trust their hunger cues and avoid forcing them to finish everything on the plate.

• **Make mealtimes fun**

– Children are more likely to enjoy healthy food when they're part of the process. Let them help wash vegetables, stir sauces, or pick out their plate colour!

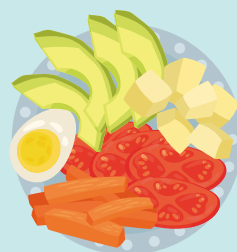


• **Never skip breakfast**

– A good breakfast jumpstarts the day with the energy they need to learn, play and grow.

• **Encourage healthy snacks**

– Growing children get hungry often. Stock up on smart snack options like sliced fruit, yoghurt, boiled eggs, or wholegrain biscuits.



Remember, every child grows at their own pace – and growth isn't always perfectly steady. What's most important is that your child is happy, active and developing well. By tracking their growth regularly and offering a balanced diet, you're already doing a great job!

If you're ever unsure or have concerns about your child's growth, don't hesitate to speak to your doctor or a qualified registered nutritionist. PP

An educational collaboration with



Nutrition Society of Malaysia

Language is more than just words – it’s how your child connects, expresses and makes sense of the world. From coos to conversations, the early years are critical for building communication skills. As parents, you’re your child’s first and most important teacher. Here’s how to support their speech and language journey right from the start.

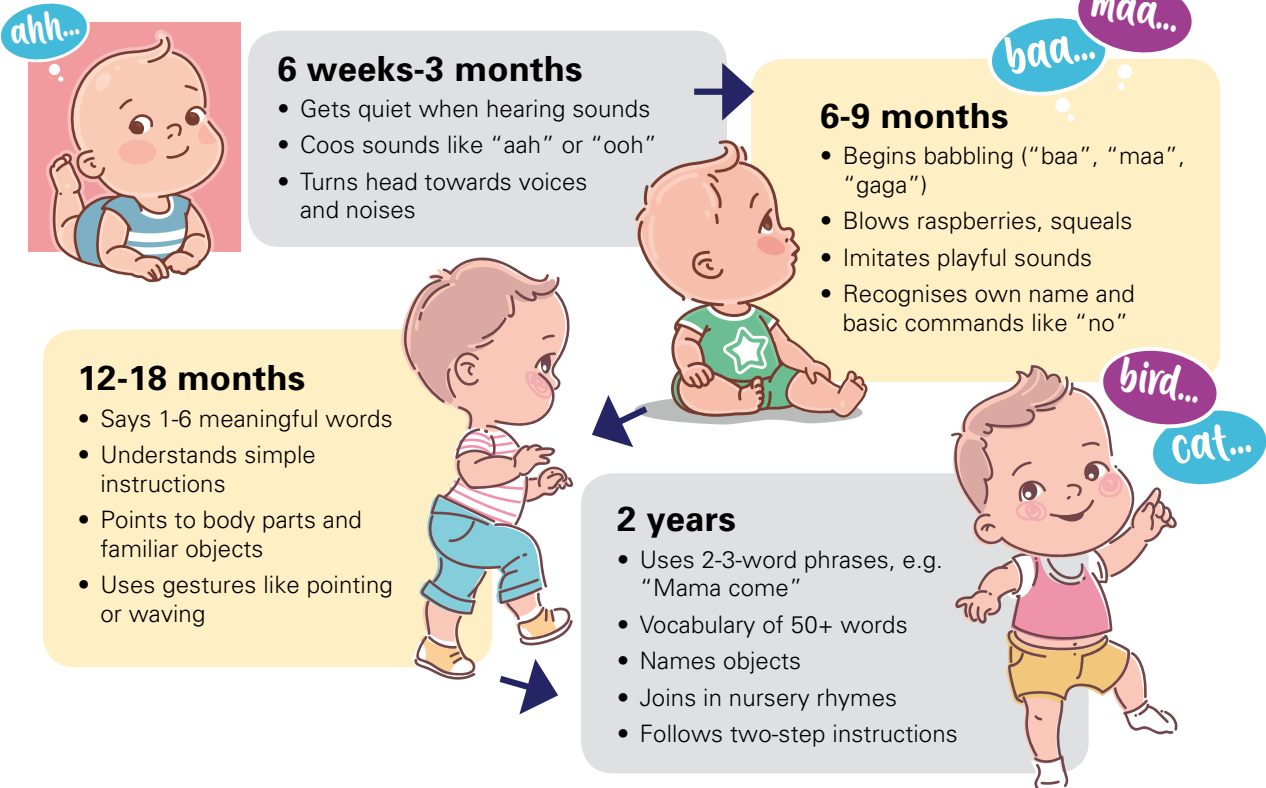


How to Encourage Early Language Development

By **Assoc Prof Dr Norazlin Kamal Nor**, Consultant Developmental Paediatrician

Key milestones to look out for

Understanding what to expect helps you support your child better. Here’s a snapshot of typical speech and language milestones:



How parents can help

Language learning is a social process, and your child is absorbing far more than you realise during everyday interactions. Here are some ways to promote language development:

- **Talk to your child** often and narrate what you're doing, such as "Let's wash your hands now" or "This is a big red apple."

- **Reading daily** is also important – even babies enjoy the rhythm of a story. Point to pictures, name objects, and make fun sound effects to bring the book to life.



- **Singing songs and nursery rhymes** helps, too; the repetition and melody support memory and word recognition.



- When your baby babbles or gestures, **respond** as if you're having a real conversation. Take turns making sounds, smiling, and reacting.

- **Name what they see and feel** – "You're holding the ball" or "That's a soft teddy bear" – to help them connect words with experiences.

- **Use gestures** alongside words to reinforce meaning, like waving when you say "bye-bye" or pointing as you label things.



- Most importantly, **follow your child's lead**. If they're fascinated by cats on the street or a toy car, talk about that. Their interest drives learning, and your voice is their guide.



Look out for the red flags

Speech delay is not always a cause for alarm but early identification helps. Speak to your child's doctor if:

- There have been no clear spoken words by 18 months
- No two-word phrases by two years
- Difficulty understanding instructions
- Limited interest in interacting with others by three years



You don't need fancy toys or flashcards. Your time, attention, and voice are the most powerful tools. Speak often, listen patiently, and make everyday moments opportunities for language learning.

If you're ever unsure about your child's speech development, don't hesitate to reach out to a paediatrician or speech therapist. Early support can make all the difference. PP

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Street-Smart Kids: Simple Tips for Everyday Safety

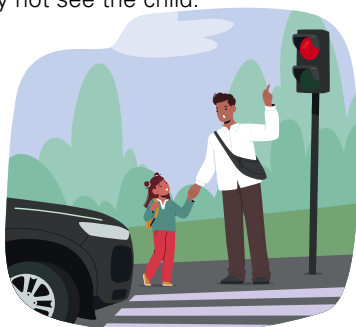
By **Datuk Dr Zulkifli Ismail**, Consultant Paediatrician & Paediatric Cardiologist

Instilling good safety habits in children is essential because streets can be unpredictable, with potential dangers such as traffic, strangers, and various hazards. Teaching children to be aware of their surroundings and to think quickly can reduce the risk of accidents and help ensure their safety in challenging situations. Here are some tips to teach your kids.



Good street safety habits

- **Hold hands in busy areas:** Reinforce holding hands with an adult when near roads.
- **Use pedestrian crossings and overpasses:** Teach children to always look both ways and wait for the green light or use the overpass instead of jaywalking.
- **Stay on the curb or pedestrian pavement:** Encourage walking away from the edge of the road.
- **Avoid distractions:** No texting, headphones, or toys when crossing streets.
- **Walk with a buddy:** Whenever possible, walk with a friend or group of people to feel safer.
- **Never cross the road in front of a stationary vehicle:** For example, after alighting from a bus as the bus driver may not see the child.



Recognising dangers

- **Strangers:** Teach your child to avoid speaking to strangers or accepting gifts.
- **Blind spots:** Explain how cars and buses may not see them when reversing or turning.
- **Unsafe shortcuts:** Guide them to stick to well-lit, busy streets and avoid isolated paths.



Responding to emergencies



- **Memorise contact information:** Ensure your child knows your name and your spouse's name, phone numbers, and address.
- **What to do if lost:** Advise them to stay in one place and ask a shopkeeper or security guard for help.
- **Road accidents:** Teach them to move to a safe spot and call for help.

Parent's role

- **Lead by example:** Follow road safety rules so your child can emulate you.
- **Practice makes perfect:** Role-play street scenarios to reinforce learning.
- **Equip them for independence:** Gradually let your child practise crossing smaller roads while you supervise. PP

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Malaysian Paediatric Association



As parents, we strive to create a loving and safe environment for our children. However, sometimes, despite our best efforts, teenagers may feel compelled to leave home. Hearing about runaway teens in the news can be concerning, prompting many questions: Why does this happen? What risks do these young people face? And most importantly, what can parents do if their child runs away?

When Home Feels Far Away: Understanding and Supporting Runaway Teens

By **Dr Thiyagar Nadarajaw**, Consultant Paediatrician & Adolescent Medicine Specialist

Understanding the 'why' behind running away

Teens rarely run away on impulse. Most cases involve a complex mix of emotional stress, personal struggles, and challenging environments. Understanding these factors can help families intervene with empathy and support.

Common reasons include:



Family conflict:

Ongoing arguments, divorce, or feeling unheard at home can push teens to escape tension or emotional neglect.



Abuse or neglect:

Physical, emotional, or sexual abuse – and even general neglect – can make a home feel unsafe.



Mental health issues:

Depression, anxiety, or low self-esteem, often intensified by school pressure or lack of support, can overwhelm teens.



Romantic relationships:

Relationships that are not approved of by parents may prompt teens to leave in search of acceptance.



High-risk behaviours:

Involvement in substances or risky online relationships can create conflict at home.



Peer influence:

Friends who encourage rebellion or independence can sway teens to leave.



Gender identity rejection:

Teens who are struggling with their gender or sexual identity, or facing rejection for who they are may run away from homes where they experience discrimination or feel unsafe.



Avoiding punishment:

Some teens run to escape confrontation or fear of being reprimanded.

Warning signs and risks



Teens thinking about running away often show **signs of emotional distress**. These may include increased isolation, mood swings, withdrawal from family activities, or expressing feelings of being misunderstood or hopeless.

If not addressed, these issues can escalate. Teens who leave home face **real dangers** – ranging from exploitation, trafficking, and substance abuse, to physical violence and mental health crises. Without shelter or resources, many are forced into survival behaviours that put them at even greater risk.

What parents can do

If your teen runs away, stay calm and act quickly:

- **Contact the police immediately.** Report them missing and provide a recent photo and relevant details.
- **Reach out** to friends, family, and school contacts who may have seen or heard from them.
- While waiting for news, **avoid blame.** Focus on maintaining calm, open lines of communication.

When your teen returns, prioritise listening without judgment. Understand their reasons for leaving and validate their emotions. Rebuilding trust takes time and professional support can be key. Consider seeking help from organisations like the Malaysian Mental Health Association (MMHA), which offers counselling and guidance.

Ultimately, open communication, empathy and consistent emotional support are so important to preventing teens from feeling the need to run away. Make space for honest conversations, show genuine interest in their lives, and remind them they are always loved – no matter what. PP

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ICU: Intensive Care Unit

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