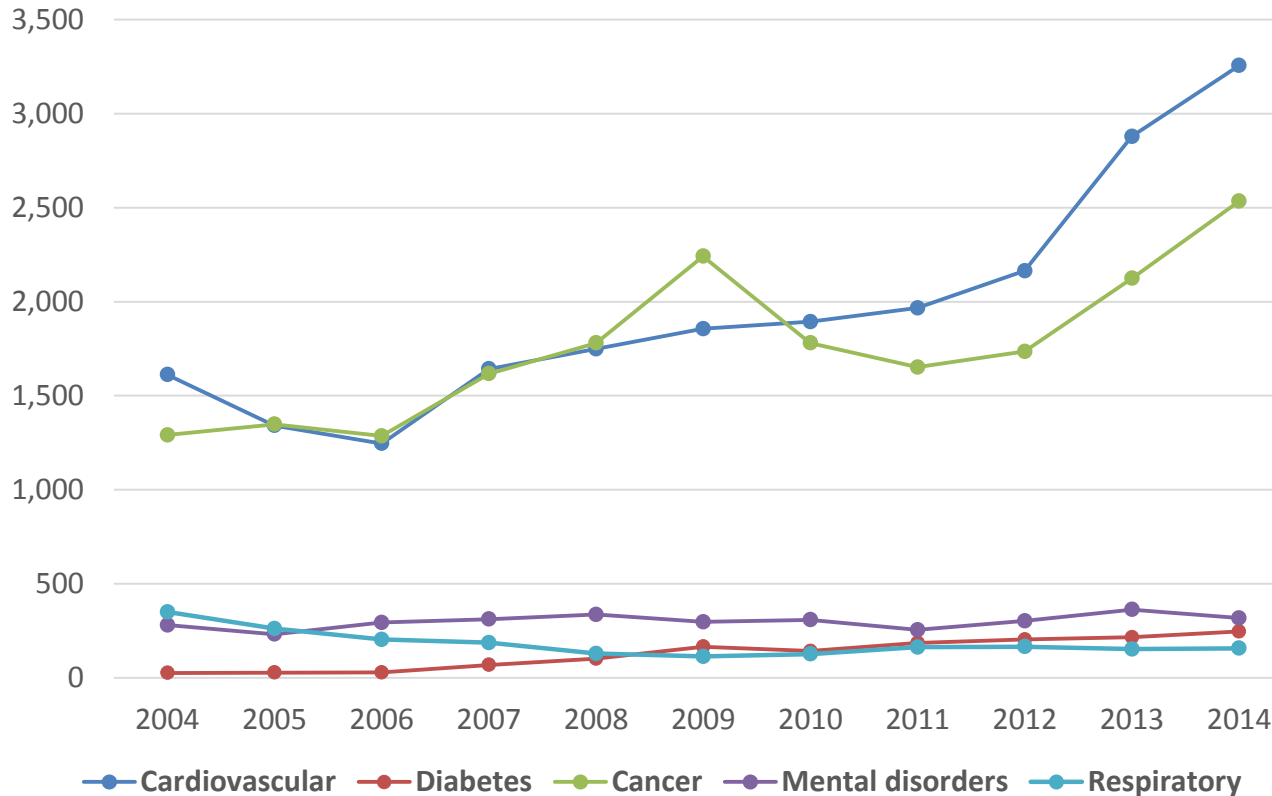


Employee Health Screening: Step up please!

Dr. Azlan Darus
Manager,
Prevention and Health Promotion Unit
Social Security Organization

Invalidity Pension

INVALIDITY PENSION BENEFIT REPORTED FOR NCD CASES
YEAR 2000 - 2014

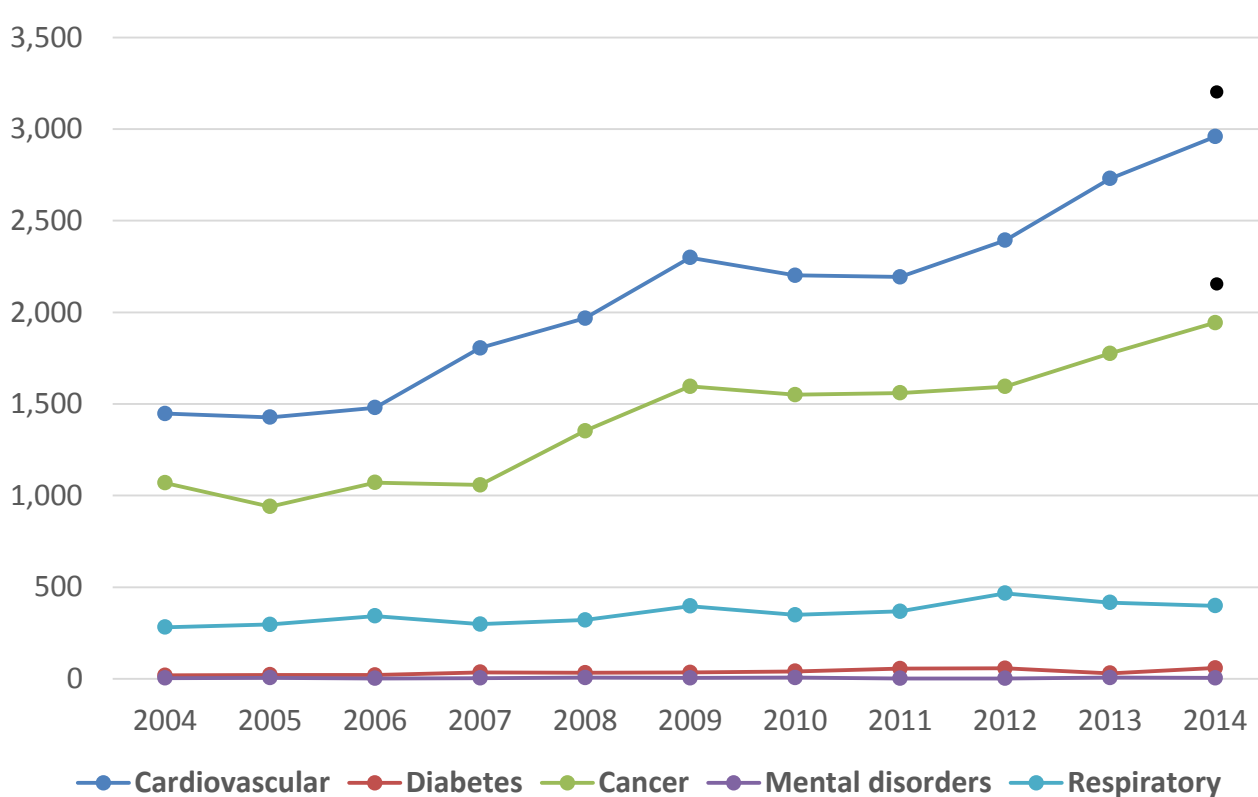


TOTAL

- **Between 35-49% of claims for Invalidity Pension benefit reported were due to non-communicable diseases.**

Survivors Pension

SURVIVORS PENSION BENEFIT REPORTED FOR NCD CASES: YEAR 2000 - 2014



TOTAL

- **Almost 45% -50% of claims for Survivors Pension benefit reported were due to non-communicable diseases.**

The cost of non-communicable diseases

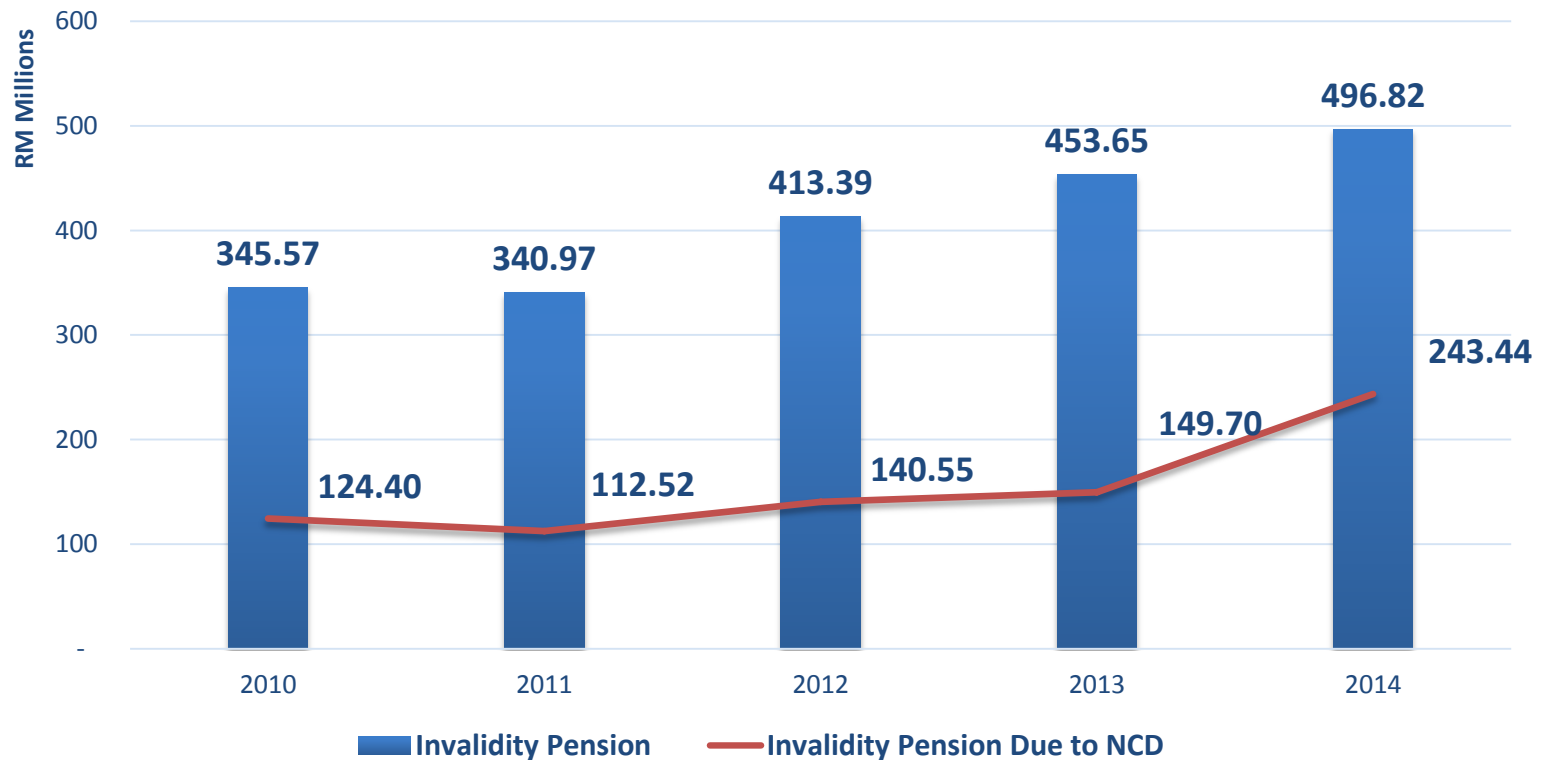
Table ES1 Estimates of lost GDP from NCD deaths, absenteeism and presenteeism, six APEC economies, to 2030

	2010	2015	2020	2025	2030
	(\$billion)				
Australia	51.9	59.3	67.0	75.4	84.7
China	209.5	270.6	336.1	410.2	485.7
Malaysia	11.5	16.3	22.5	30.4	40.3
Peru	7.3	9.6	12.5	15.9	20.0
Philippines	10.6	14.4	19.0	24.7	31.6
USA	779.9	872.2	963.0	1051.5	1142.6
	(share of GDP – %)				
Australia	4.5	4.7	4.8	4.8	4.9
China	3.5	3.8	4.0	4.2	4.3
Malaysia	4.6	4.7	4.9	5.0	6.1
Peru	4.9	5.1	5.2	5.3	5.4
Philippines	5.3	5.5	5.6	5.7	5.8
USA	5.2	5.4	5.5	5.5	5.5

Source: VISES estimates.

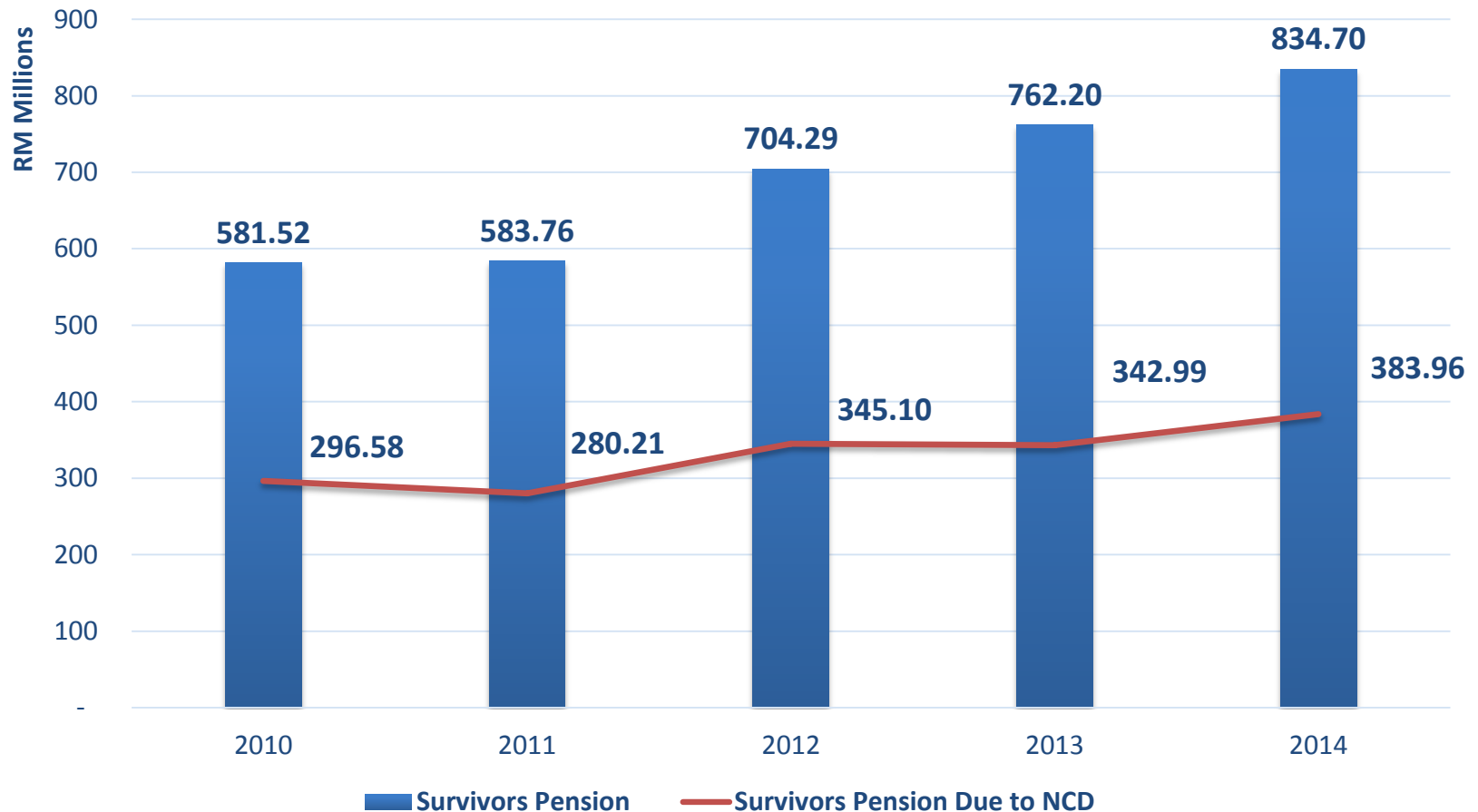
Cost of Invalidity Pension Benefit (SOCSCO)

Total Payment for Invalidity Benefit and Estimated Total Payment due to NCD, 2008 - 2014



Cost of Survivors Pension Benefit (SOCSO)

Total Payment for Survivors Benefit Pension and Estimated Total Payment due to NCD, 2008 - 2014



Health screening

- Intended to reduce morbidity and prolong life
 - Possible benefits
 - Preventive treatment reducing morbidity and mortality
 - Detection of precursors of disease e.g cervical dysplasia
 - Detection of sign and symptoms of manifest disease otherwise not considered important
 - Some may improve lifestyle following screening and counselling

Lasse T Krogsbøll , Karsten Juhl Jørgensen , Christian Grønhøj Larsen , Peter C Gøtzsche ; BMJ 2012;345:e7191 doi: 10.1136/bmj.e7191

General Health Screening

- In the UK, publicly funded NHS check programme in 2009.
 - Full implementation in England in 2013

Free NHS Health Check 
Helping you prevent heart disease, stroke, 

General Health Screening

- In Japan; nationwide health screening programme targeting metabolic syndrome since April 2008.
 - Screening and risk based counselling
 - Raise public awareness on metabolic diseased and promote better lifestyles
- In S. Korea; national screening program introduced in 1995.
 - Enhanced to “National Screening Program for Transitional Ages” in 2007
 - Target two age groups; 40 and 66 years old

*Kohro, Furui, Mitsutake et al. ;
Int Heart J March 2008*

*Hyun Su Kim, Dong Wook Shin, Won Chul Lee et al. ;
J Korean Med Sci 2012; 27: S70-75*

General Health Screening

- In Singapore;
 - Integrated Screening Programme
 - nation-wide programme for Singaporeans aged 40 years and older
 - screened for diabetes, high blood pressure, high blood cholesterol, obesity and cervical cancer at registered GP clinics.
 - Subsidized screening cost; user pays for consultation
- In Malaysia;
 - Free health screening for government employees age 40 years old at government health clinics
 - Since 1969 (managerial and professionals)
 - 2003 to include all employees
 - Not mandatory, but “strongly encouraged”
 - For private employees;
 - Depends on medical benefit provided by companies
 - SOCSO Health Screening Program

The SOCSO Health Screening Programme

- Offered to all insured persons by SOCSO at the age 40 years old.
- As a way to provide benefit token to all active employees
- To increase insured persons awareness of non-communicable diseases
- Promote healthy lifestyle and health empowerment via early detection and medical counseling.



HSP
Program Saringan Kesihatan
SOCSO Health Screening Programme
Program Saringan Kesihatan PERKESO

ADAKAH ANDA PENCARUM PERKESO BERUMUR **40 TAHUN** KE ATAS ?



Pemeriksaan Meliputi:

- Pemeriksaan Fizikal
- Konsultasi
- Pemeriksaan Darah
- Analisa Laporan
- Khidmat Nasihat Yang Berkaitan

Ujian pemeriksaan:

- Full Blood Count
- Fasting Glucose
- Fasting Lipid Profile
- Urine FEME
- Pap Smear (Wanita Sahaja)
- Mamogram (Wanita Sahaja)

- Health Screening as a mean; not the end
 - ENABLING employees in the country to take charge of their health
 - By knowing their own health status

USAGE AND TRENDS

The SOCSO Health Screening Programme

- Roll out Jan 2013
- 2 100 000 active employees are eligible until the year 2015
- All eligible employees are invited through vouchers sent via their employers

The SOCSO Health Screening Programme (27 Jul 2015)

116

Mammogram
centers

431 227

Employees
underwent the health
screening

145 626

Women used the
mammogram
voucher

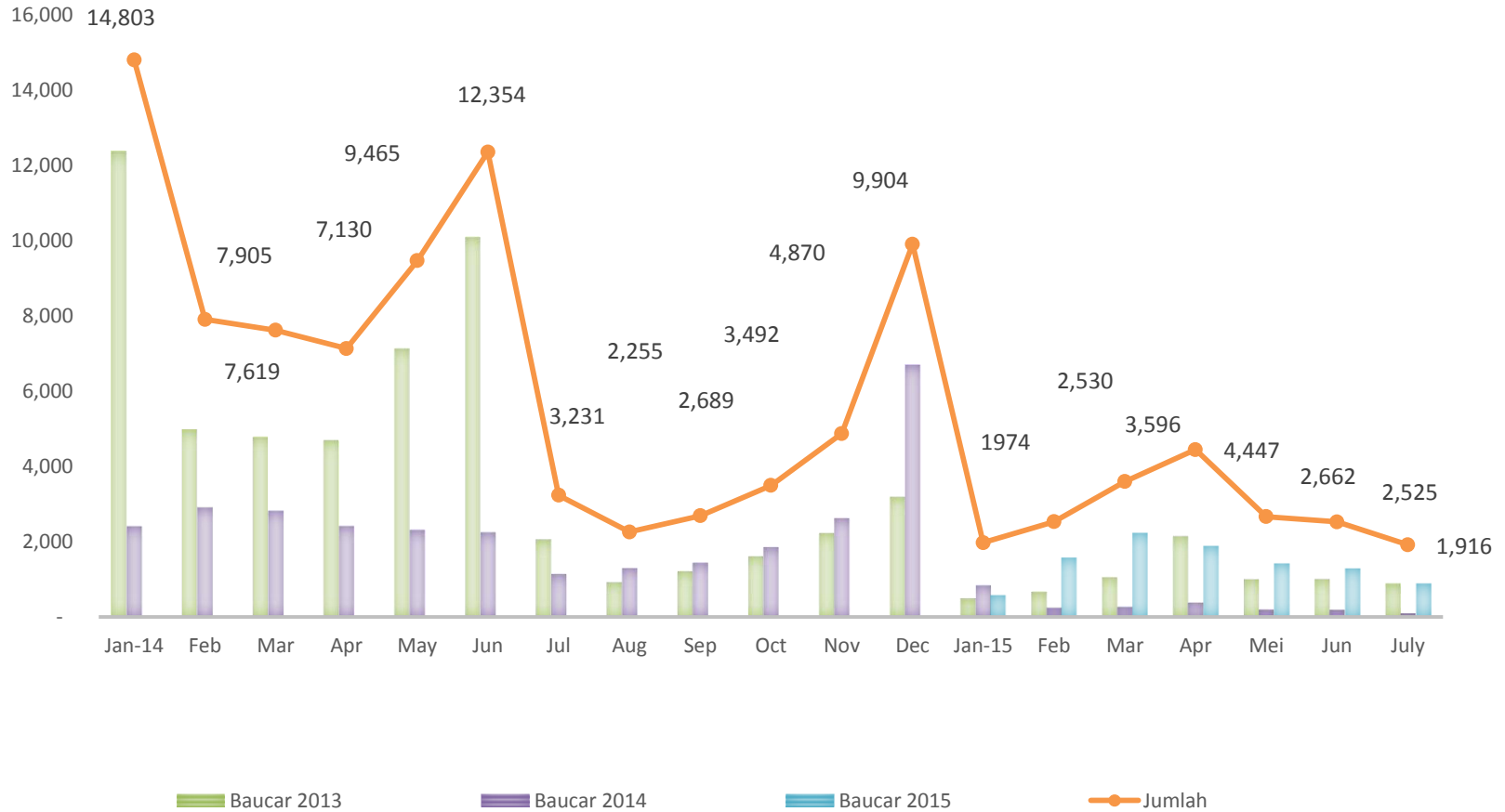
248

Laboratories

3357

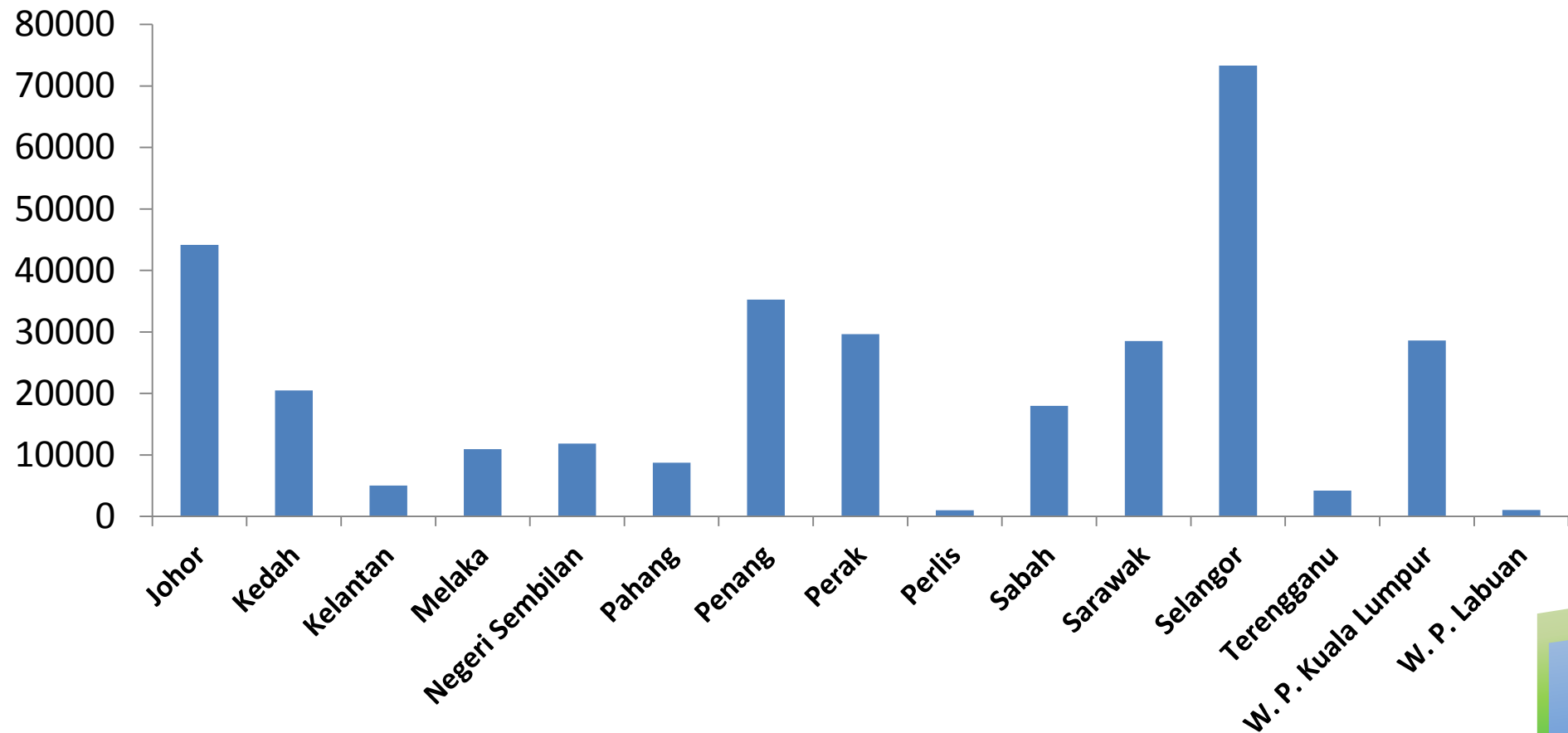
Registered clinics

SOCOSO HSP - usage



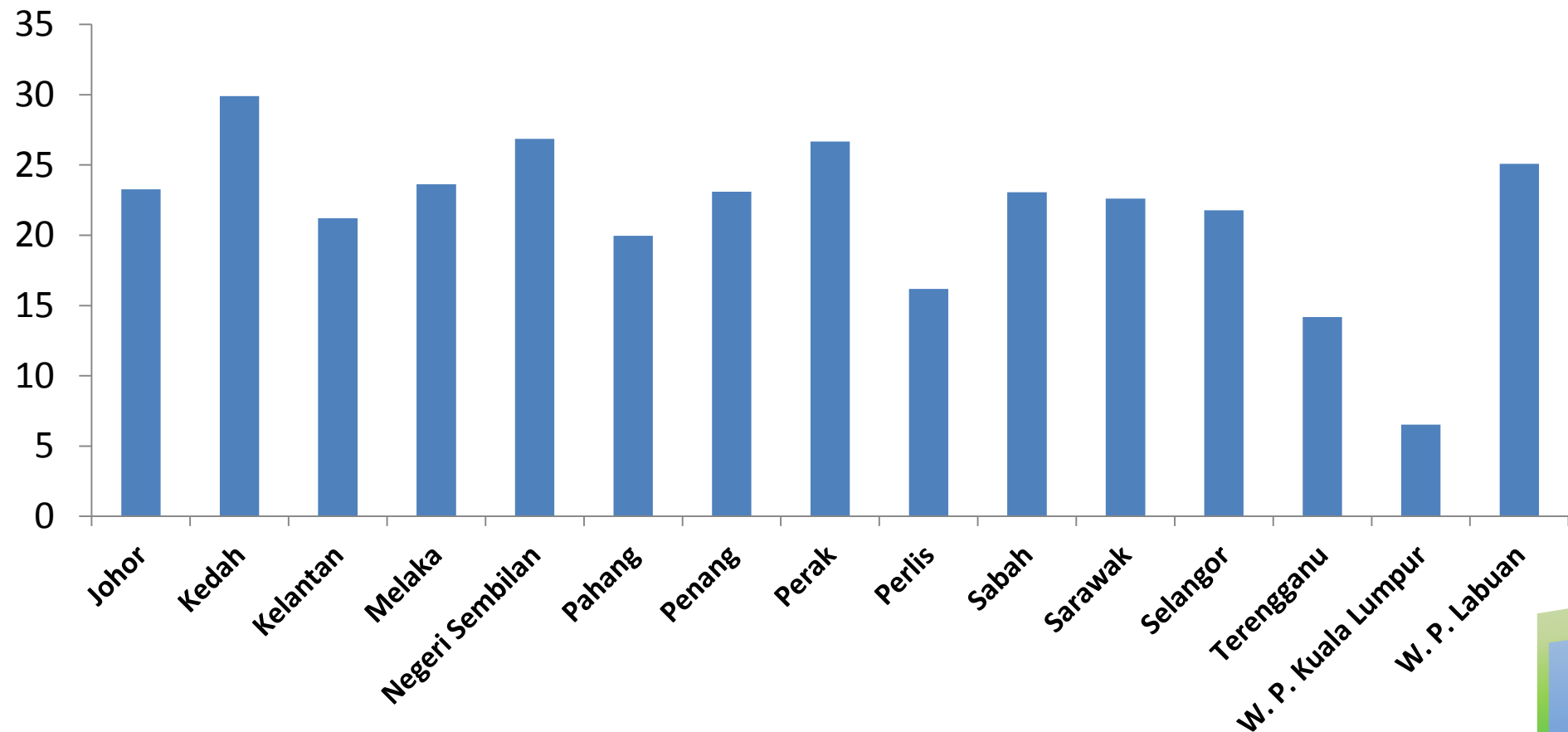
Trend of use by state

numbers

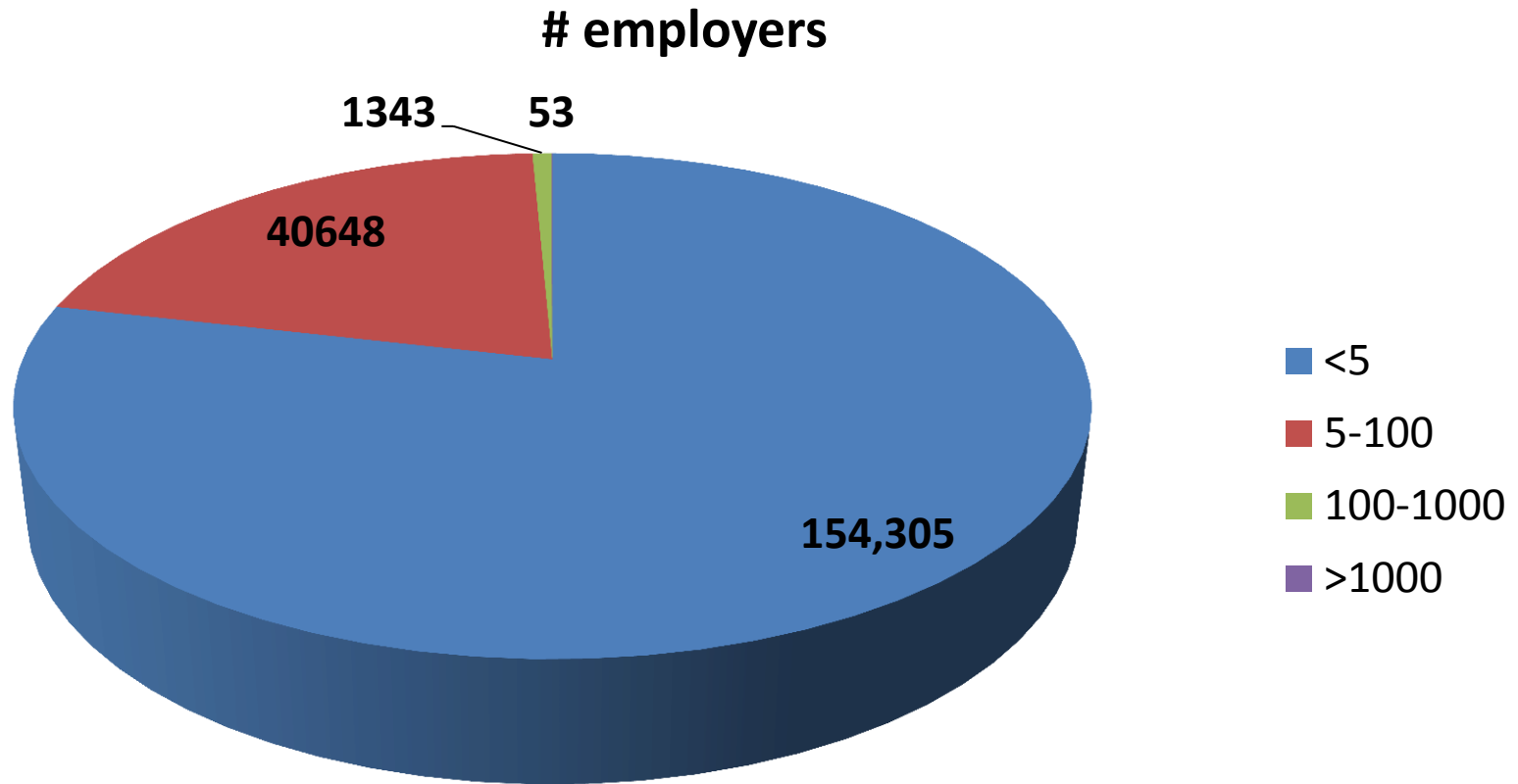


Trend of use by state

percentage



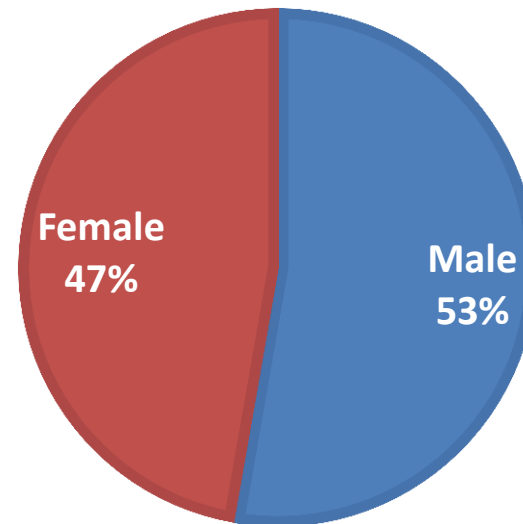
Number of unused vouchers and employers



Health seeking behavior

Ethnic distribution

◇ Malay	: 35.0%
◇ Chinese	: 46.5%
◇ Indian	: 12.0%
◇ Bumiputera Sabah	: 2.5%
◇ Bumiputera Sarawak	: 3.0%
◇ Others	: 1.0%



Have Had Previous Health Screening

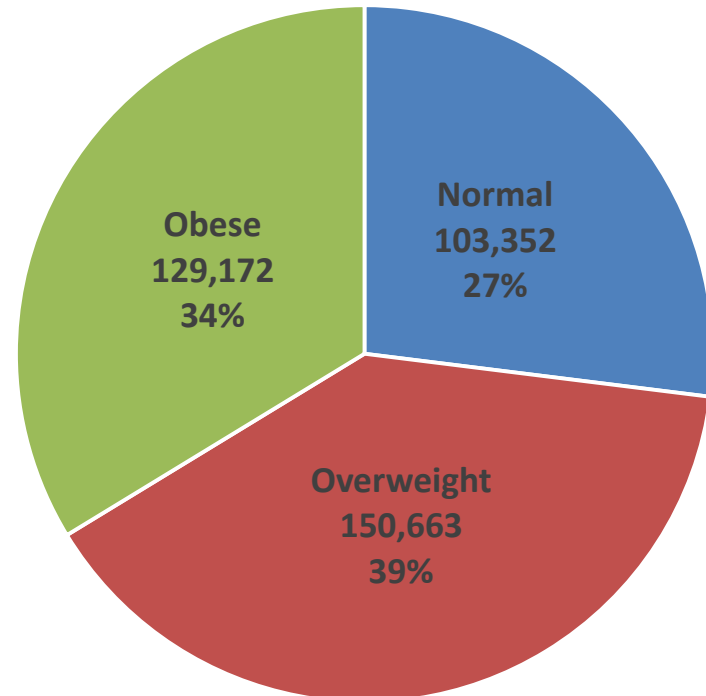
- **33.3%** of employees had a comprehensive health screening
- i.e **66.7%** had not had a comprehensive health screening prior to the HSP!

BMI status

- Body Mass Index

- ◊ Underweight : 3.2%
- ◊ Normal : 23.8%
- ◊ Pre-Obese : 39.3%
- ◊ Obese Class 1 : 28.9%
- ◊ Obese Class 2 : 3.6%
- ◊ Obese Class 3 : 1.2%

- (CPG Mgt Obesity 2004)



Diabetes

- **Diabetes Mellitus**

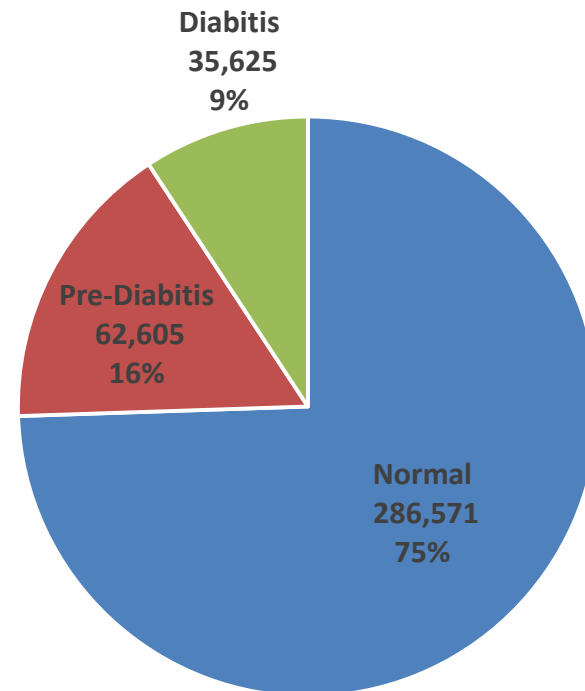
(based on venous plasma glucose)

- ◊ Normal : 74.5%
- ◊ IFG/IGT : 16.3%

(further tests required)

- ◊ Diabetes : 9.3%

- *(CPG Mgt Type 2 Diabetes Mellitus 2009)*

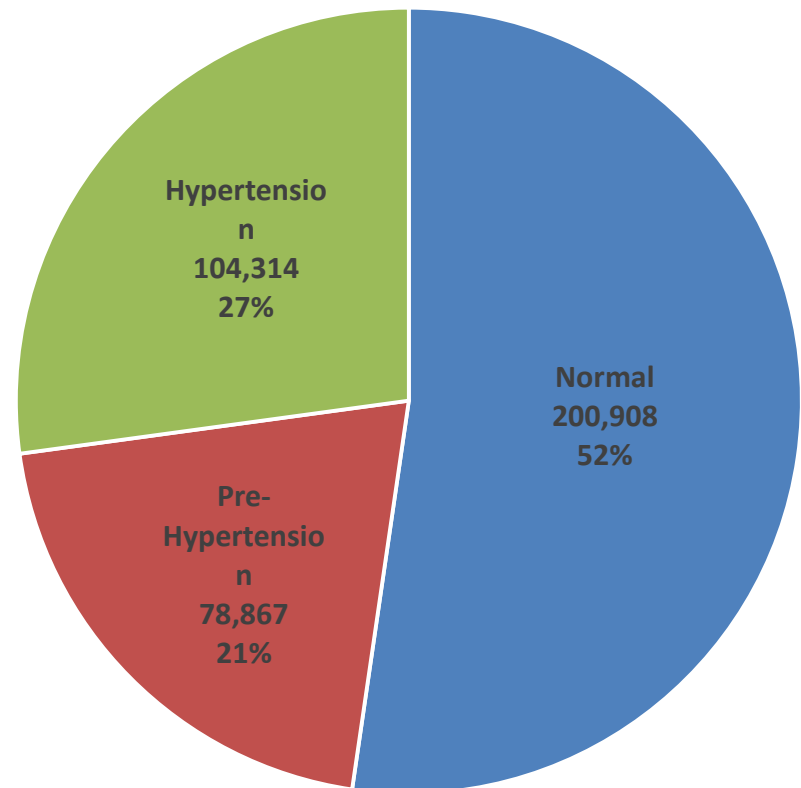


Hypertension

- Hypertension

- ♦ Optimal : 19.6%
- ♦ Normal : 32.7%
- ♦ High Normal : 20.5%
- ♦ Hypertension Stage 1 : 20.2%
- ♦ Hypertension Stage 2 : 5.6%
- ♦ Hypertension Stage 3 : 1.4%

- *(CPG Mgt Hypertension 2013)*



Cancer screening

- ***Female Cancer Screening***
- **Pap Smear (n= 116,004)**
 - ◇ 71.6% found with normal findings.
 - ◇ 28.0% endometrial cells (others).
 - ◇ 0.4% with abnormal results.
 - - Six (6) were found with carcinoma in situ.
 - - 139 with high grade squamous or glandular lesion.

Cancer screening

- **Mammogram (n= 98,815)**
 - ◇ 65% found with normal findings (category 1).
 - ◇ 6% need for additional imaging (category 0).
 - ◇ 28% found with benign findings (category 2 & 3).
 - ◇ 1% with suspicious and highly suspicious results.
- - 164 with findings highly suggestive of malignancy.

• *(CPG Mgt Breast Ca 2010)*

ISSUES

- Don't know that such benefit exists
- Voucher not received by employers
- Voucher not distributed by employers
 - Distance / extra task
 - Employer have better program
- Employees received voucher
 - Interested and use
 - Interested but not suitable time / procrastinate
 - Leave issues
 - Time off work issues
 - Have done it at other times
 - Not interested

Would these work?

- Employer
 - Provide time assistance.
 - Integrate into current medical benefit system or medical surveillance system.
- Clinics
 - Close work with employer
 - Mass workplace screening
- Employees
 - Step up and take charge of your own health!

Thank you

azlan.darus@perkeso.gov.my