



MALAYSIAN SOCIETY OF GASTROENTEROLOGY & HEPATOLOGY

MSGH *Bulletin*

ISSUE NO. 2 (AUGUST 2026)



Advancing Digestive Health Together

Uniting expertise, innovation and
compassion to improve outcomes
in gastroenterology and hepatology.



MESSAGES



FEATURE ARTICLES



EDUCATION & TRAINING

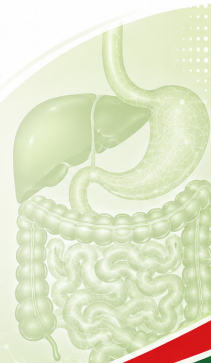
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eISSN 2948-4642



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Message From the President

SHAPING THE FUTURE THROUGH EDUCATION AND COLLABORATION



Professor Dr Ida Normiha Hilmi

Welcome to the second issue of the **MSGH Bulletin** for 2026.

As usual, we have a wide breadth of interesting and informative articles, compiled by our ever-excellent editor Dr Lau Su Yin. One of the highlights is the feature on **Malaysia's first A-PSDE–MSGH Train the Endoscopy Trainers Workshop**. We often focus on training endoscopists, but we rarely stop to ask how we train the trainers themselves.

Developing technically competent endoscopists is only one part of the equation; developing educators who can teach safely, provide effective feedback, and nurture the next generation is equally important. This workshop marks an important milestone in the maturation of endoscopy training in our country.

Education continues to be a strong pillar of MSGH. This issue showcases the breadth of our educational activities, including the **HEGAM** programme, which welcomed one of its largest cohorts of new gastroenterology fellows, the **GI Pathology Training Day**, the **IBD Preceptorship**, and the **GastroUiTM GI Motility Workshop**.

Many would agree that therapeutic endoscopy remains the 'star attraction' in the world of gastroenterology and hepatology, with innovations emerging at an unprecedented pace. The **Inspire.U Workshop** and the **Simulator-based ERCP workshop** highlights how technology and international collaboration are transforming the way we acquire procedural skills.

The **Tak Nak Kanser Kolon** campaign represents an ambitious national effort to shift colorectal cancer diagnosis from late-stage disease to early detection. With colorectal cancer remaining one of Malaysia's leading cancers, increasing awareness, improving screening uptake, and encouraging timely colonoscopy are priorities where every gastroenterologist has a role to play.

A Fellow's Journey which is now a regular feature will hopefully encourage more young Malaysian gastroenterologists to pursue similar opportunities and return home to strengthen our local services.

Finally, our calendar of educational meetings reminds us that learning never stops. Whether through local workshops or international congresses, MSGH remains committed to providing opportunities for our members to exchange ideas, develop new skills, and bring the best evidence back to their patients.

I would like to thank everyone who contributed to the activities featured in this issue. Your enthusiasm and willingness to share your expertise continue to strengthen our Society.

I hope you enjoy this edition of the Bulletin, and I look forward to seeing you at GUT!



"Together, we are shaping the future of gastroenterology—through education, innovation, and collaboration."

EDUCATION, COLLABORATION, AND IMPACT

Dr Lau Su Yin

Dear friends and colleagues,

Welcome to the second issue of our Bulletin. It has been an eventful few months, and I would like to thank all our contributors for taking the time to share their events and experiences.

This issue showcases the continued commitment of MSGH and the National Training Committee to advancing education and training for both fellows and trainers.

Among the highlights are the inaugural Train the Endoscopy Trainers workshop, held in April in collaboration with A-PSDE, the annual HEGAM programme that welcomed 21 new gastroenterology fellows this year, the biennial GI Pathology Training Day and the IBD Preceptorship.

We also feature several institution-led educational initiatives, including the GI Motility Workshop organised by UiTM and advanced endoscopy workshops conducted by Universiti Malaya.

With March being Colorectal Cancer Awareness Month, we are pleased to highlight Tak Nak Kanser Kolon (xcoloncancer.my), a collaborative public awareness campaign between MSGH, the National Cancer Society Malaysia, the Malaysian Society of Colorectal Surgeons, and the Colorectal Cancer Survivorship Society Malaysia.



In the same spirit, Hospital Kuala Lumpur organised a Colonoscopy Marathon aimed at increasing access to colorectal cancer screening, reducing waiting lists, and facilitating the detection and removal of premalignant polyps to help prevent colorectal cancer.

Finally, Dr Viknesh's reflections on his overseas fellowship experience is a personally inspiring read. His account is a refreshing reminder that a fellowship is about much more than acquiring a new technical expertise.

Enjoy! We look forward to seeing you all at GUT 2026! Feel free to reach out at secretariat@msgh.org.my, we always welcome updates and photos from all our members.

A FELLOW'S JOURNEY

Reflections on a Year in Advanced Luminal Endoscopy at University Hospital Southampton (UHS), United Kingdom

Dr C Vikneshwaran Chandra Kumar

When I boarded the flight to Southampton in August 2025, I thought I knew exactly what I wanted for the year ahead. I wanted to become a better therapeutic endoscopist. Like many endoscopists approaching the final year of general gastroenterology and hepatology training, I had a fairly clear plan. I wanted to learn advanced resection techniques, perform increasingly complex procedures and, eventually, progress towards Endoscopic Submucosal Dissection (ESD).

In my mind, the fellowship was about acquiring new procedural skills. One year later, I realised that my greatest lesson was not about learning advanced endoscopy; it was about relearning the basics.

Choosing the right fellowship

Before deciding to pursue an overseas fellowship, I believe there is one question every trainee should honestly ask: Does this programme teach what I need at this stage of my development?

It sounds obvious, but it is surprisingly easy to be distracted by prestigious centres or the impressive procedure numbers. We often compare fellowships based on what they offer, rather than whether they match our own learning needs. Every endoscopist starts from a different place. Our early training, mentors, case mix and opportunities shape us differently. Two fellows entering the same programme may therefore require slightly different training pathways.

I was fortunate to have the opportunity to undertake my fellowship in Advanced Luminal Endoscopy at University Hospital Southampton (UHS), United Kingdom. I owe much of this opportunity to Professor Dr Sanjiv Mahadeva from Universiti Malaya Medical Centre, who not only encouraged my interest in therapeutic endoscopy but also helped connect me with Dr Imdadur Rahman, my eventual supervisor at UHS.



The UHS Endoscopy team. Top right is with my Lead Supervisor, Dr Imdadur Rahman; Top left are the two other fellows at UHS, Dr Hein Htet and Dr Thake Kaung

As with many competitive fellowships, securing a position required a rigorous application and interview process. UK has many talented local trainees pursuing out-of-programme fellowships, so planning is important. I was also fortunate to have seniors who had themselves undertaken fellowships in UK. Dr Hari Suthan and Dr Praveena generously shared their experiences and provided invaluable advice on planning a career in advanced endoscopy.

Looking back, one of the most important lessons was that fellowship planning should start early. Speaking to

seniors, understanding what different programmes offer and identifying your own learning objectives one to two years in advance can make a significant difference.

A fellowship tailored to the trainee

What impressed me most about UHS was that I was not simply placed on a conveyor belt of procedures. My supervisors first assessed my existing competencies and then helped design a realistic Personal Development Plan around my learning needs. The UK JETS curriculum provides a remarkably structured approach to endoscopy training. From colonoscopy training to polypectomy and progressive EMR training from SMSA Level 2 through Level 4, the objectives are clearly defined.

My training included dedicated training lists three times each week, with one-to-one teaching from experienced trainers across both upper and lower gastrointestinal therapeutic endoscopy.

The emphasis was never simply on completing more procedures. It was on becoming a better endoscopist so that I can gradually progress to mastering the art of resecting complex polyps. There was no better way to learn about polyps than being actively involved in presenting the cases in the weekly Significant Polyps and Early Colorectal Cancer (SPECC) multidisciplinary team meeting.

Advanced endoscopy begins with the basics

What surprised me most during the fellowship was not the sophistication of the therapeutic procedures. It was the attention given to the fundamentals. My initial goal was relatively simple: to improve my scope handling and tip control so that therapeutic intervention would become a natural extension of diagnostic colonoscopy. At first, this seemed almost too basic.

I quickly discovered that competence and mastery are not the same thing. Subtle changes in hand position, torque steering, loop recognition, body posture and scope stability could completely change the feel of a procedure. Small refinements translated into smoother movements, better visualisation and greater efficiency. Procedures sometimes felt slower because I was thinking about every decision. But with time, that conscious awareness translated into greater precision and consistency.

This had paved the path for me to embark on more complex therapeutic procedures including SMSA Level 3 and 4 EMR, knife-assisted snare resection (KAR), full thickness endoscopic resection (FTR) as well as learning ESD.

“Mastery does not begin with the most advanced procedure. It begins with the humility to perfect the basics.”



My first Full Thickness Endoscopic Resection using the Ovesco FTRD device

Learning beyond the endoscopy room

I have always enjoyed travelling, and one of the great advantages of an overseas fellowship is the opportunity to combine professional development with exploring a new country and experiencing different healthcare systems and cultures.

During the year, I had the opportunity to attend and present a poster at ESGE Days 2026 in Milan, Italy. Experiencing one of Europe's major endoscopy meetings was both inspiring and humbling. I also attended King's Live Endoscopy in London and the Nottingham Upper GI & Barrett's Course. These meetings complemented the fellowship beautifully. And, of course, there was the added benefit of being able to explore new cities, try different food and occasionally pretend that a conference trip was also a holiday. Perhaps the best part was that it often was both.

For trainees who enjoy travelling, an overseas fellowship can offer a unique opportunity to combine professional development, international networking and personal experiences.

The road to ESD

Like many therapeutic endoscopists, I have long been fascinated by Endoscopic Submucosal Dissection (ESD). Watching an expert perform ESD can be mesmerising. During my fellowship, I had the privilege of observing numerous ESD procedures performed by my supervisors. Interestingly, rather than simply increasing my desire to perform ESD immediately, these experiences gave me something far more valuable: a realistic understanding of what ESD represents. It is the culmination of thousands of hours spent mastering the fundamentals of endoscopy.

Rather than feeling discouraged that I had not yet reached mastery in ESD, I left feeling reassured that I was travelling in the right direction. The aspiration remains. The timeline has simply become more realistic.

The fellowship changes more than your technique

As I reflect on the past year, I realise that the fellowship changed more than my technical ability. It changed my philosophy of learning. I have learnt that excellence is built through countless small improvements repeated consistently over time. Most importantly, I have learnt that expertise is not a destination. It is a habit.

As I return home to Malaysia, I hope not only to apply the technical skills acquired during this fellowship, but



Bottom right is with Dr Patricia Duarte, one of my Trainers from UHS in the Nottingham's Upper GI course. A short weekend trip to York & Stradford-upon-Avon after the three days conference.

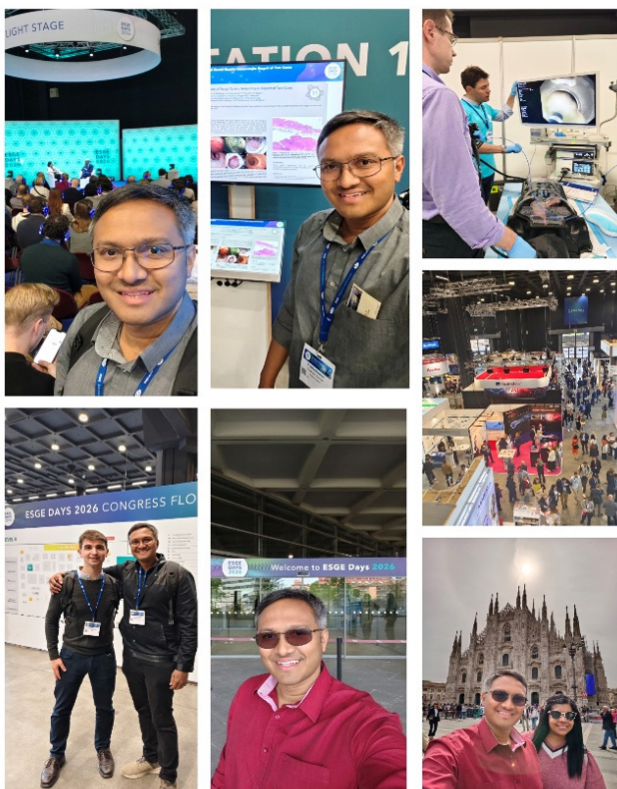
also to bring back the culture of structured teaching and reflective learning that has influenced me so profoundly. I also hope to remain engaged with the international endoscopy community through meetings, collaborations and continued mentorship. Excellence in endoscopy is not achieved in isolation. It is built through shared learning and collective experience.

If there is one lesson that this fellowship has left with me, it is this:

Mastery does not begin with the most advanced procedure. It begins with the humility to perfect the basics.

For anyone considering an overseas fellowship, my advice would be simple. Do not choose a programme simply because it offers the most advanced procedures or the most impressive numbers. Choose the environment that offers the right teachers, the right structure and the right opportunities to help you become the endoscopist you aspire to be. And, perhaps, if you are fortunate, you may also get the opportunity to travel, attend international conferences, meet inspiring colleagues from around the world and collect a few memorable photographs along the way.

After all, a fellowship should ideally change more than just the way you hold the scope. It should change the way you think.



ESGE Days 2026 Milan; Top right is the hands-on ESD training; Bottom left is with Dr Andrea Baldacchino who was the previous Fellow at UHS from Malta

TAK NAK KANSER KOLON

A National Call to Say No to Colon Cancer

MSGH is working with a national coalition to help find colorectal cancer from Stage 4 to Stage 1

Dr Alex Leow Hwong Ruey

Know It. **Screen It.** Beat It.

Colorectal cancer is highly treatable when caught early — yet 7 in 10 Malaysians are diagnosed too late. It affects all communities across Malaysia. Learn what you need to know to protect yourself and your loved ones.

Resources

Get Screened Now

#1

Cancer among men in
Malaysia

70%

Diagnosed late at
Stage 3 or 4

76%

Survival if caught at
Stage 1

Colorectal cancer is the second most commonly diagnosed cancer among Malaysian men and women according to Globocan 2024. Yet, it is also one of the most preventable and curable cancers if found early. The main problem is timing. About 70% of Malaysians are diagnosed at Stage 3 or 4, when treatment is harder, more expensive, and less likely to work. The difference in survival is clear: about 76% of people survive five years if diagnosed at Stage 1, but only about 17% do if it is found at Stage 4.

This is why Tak Nak Kanser Kolon, or "Say No to Colon Cancer", was launched as a national campaign to raise awareness and promote screening. The campaign brings together the National Cancer Society Malaysia (NCSM), the Malaysian Society of Colorectal Surgeons (MSCRS), the Colorectal Cancer Survivorship Society Malaysia (CORUM), and the Malaysian Society of Gastroenterology & Hepatology (MSGH). The message is clear and direct: take charge of your health, get screened early, and say no to colon cancer.

A clear message about screening

The campaign focuses on two main screening tools. For most Malaysians aged 50 to 75, it recommends an annual immunochemical faecal occult blood test (iFOBT).

This is a simple test you can do at home, now available at government clinics, hospital primary care departments, and private labs. If the test is positive, the next step is a colonoscopy.

For those who can access it, and for people aged 40 and above with a family history of colorectal cancer, colonoscopy is recommended as the best option. It not only finds cancer early but can also prevent it by removing polyps before they turn cancerous. Family members of colorectal cancer patients are especially encouraged to get screened, and making healthy lifestyle changes is also part of the message.



To reach people outside the clinic, the campaign has created a website at xcoloncancer.my. It explains risk factors, symptoms, cancer stages, and screening options in simple language.

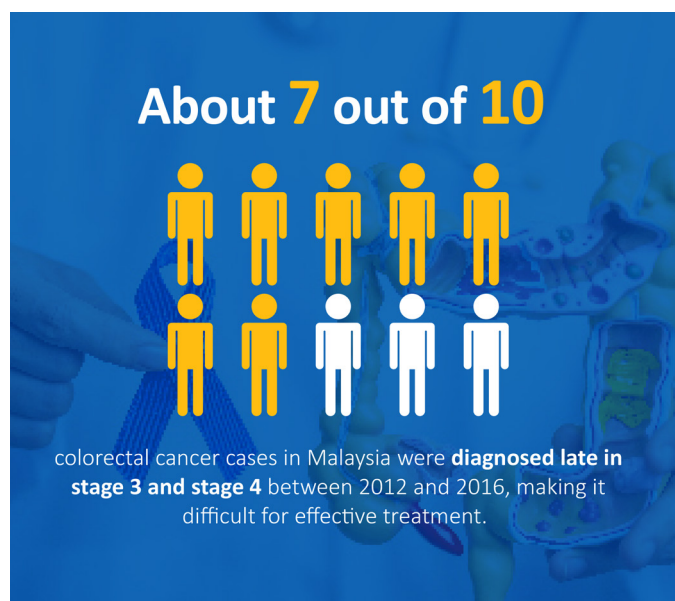
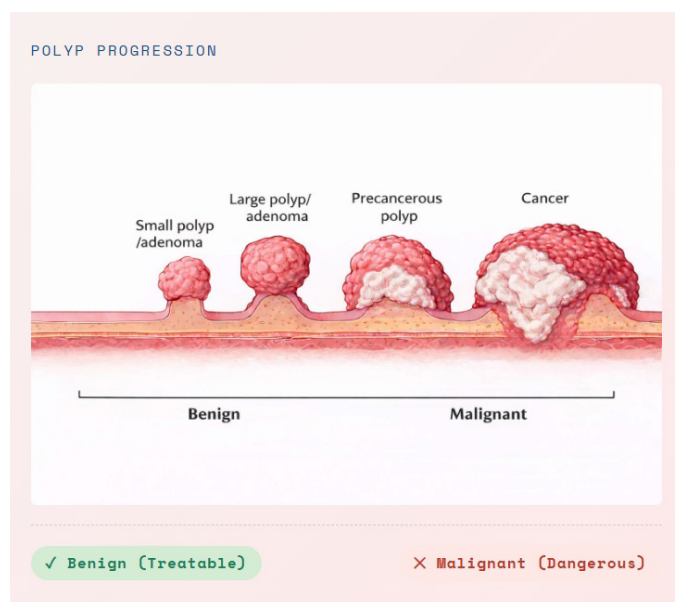
There is also a campaign anthem and a social media push using #TakNakKanserKolon and #SaringAwal. Building on the anthem, we will be launching a social media dance competition set to the campaign song, with its own signature choreography. Do watch out for it, learn the moves, and better still, join in the dancing together. The materials are consciously designed to speak to all of Malaysia's communities, because late diagnosis does not discriminate, and neither should screening.

What can we do?

For MSGH members, this campaign is more than just putting up a poster. Gastroenterologists play a key role in turning awareness into action. This means talking to patients and their close relatives, making sure iFOBT-positive patients get colonoscopies quickly, keeping endoscopy services running well, and supporting public messages with clinical expertise.

Members are encouraged to bring up screening during daily practice, share campaign materials, and help with screening activities in their workplaces and communities. As more cases are now seen in people under 50, it is important to watch for warning signs in younger patients, just as we promote organised screening for older ones.

Every time we find colon cancer at Stage 1, it is a win against a disease that often only shows up at Stage 4. Tak Nak Kanser Kolon gives us a shared way to talk about this effort. Now, it is up to us to keep it moving forward.



An initiative by and In Collaboration With



Malaysian Society of
Colorectal Surgeons (MSCRS)



Malaysian Society of
Gastroenterology & Hepatology



National Cancer Society
Malaysia (NCSM)



Colorectal Cancer
Survivorship Society Malaysia
(CORUM)

Accelerating Colorectal Cancer Detection

Hospital Kuala Lumpur's Colonoscopy Marathon 2026

Dr Michelle Goh Mei Xin

The Gastroenterology Unit of Hospital Kuala Lumpur (HKL) successfully organised the HKL's Colonoscopy Marathon 2026, a five-day intensive initiative held from 8th to 12th June 2026 to address the growing demand for colonoscopy services and shorten the waiting time for patients at high risk of colorectal neoplasia. More than a high-volume endoscopy programme, the marathon represented a coordinated institutional effort to improve access to timely diagnosis, facilitate early intervention and strengthen colorectal cancer prevention.

Colorectal cancer remains one of Malaysia's leading malignancies, and delayed access to colonoscopy continues to contribute to later-stage diagnosis. At HKL, increasing referral numbers had resulted in waiting times approaching one year for some patients. Recognising that every delayed investigation represents a missed opportunity to detect premalignant lesions or early cancer, the Gastroenterology Unit embarked on an ambitious programme to accelerate diagnostic services without compromising quality or patient safety.

The initiative exemplified the remarkable camaraderie within Malaysia's gastroenterology fraternity. The team comprised six visiting gastroenterologists alongside HKL's three consultant gastroenterologists, three gastroenterology fellows, colorectal surgeons, medical officers and the multidisciplinary endoscopy team.*

The programme was graced by the presence of Hospital Director Y Bhg Dato' Dr Harikrishna a/l K. Ragavan Nair, together with Dr Leong Chee Loon, Head of the Department of Medicine; reflecting HKL's commitment to improving colorectal cancer services.

Dedication Beyond the Procedure Room

Before the marathon even began, endoscopy staff, medical officers and fellows meticulously reviewed lengthy waiting lists, screened referrals according to predefined criteria, contacted patients individually, reinforced bowel



The first stop for every patient - our medical officer, staff nurses and clerical staff ensuring smooth registration, efficient coordination and uninterrupted workflow throughout the marathon

preparation instructions, coordinated appointments and rapidly filled cancellations to ensure that every available procedure slot was utilised.

Throughout the marathon, the Endoscopy Unit operated continuously with multiple procedure rooms running from morning until evening. Consultants, trainees and surgeons worked side by side while maintaining the standards expected of high-quality colonoscopy, including meticulous mucosal inspection, appropriate lesion characterisation and safe therapeutic intervention.

Equally instrumental were the endoscopy nurses, medical assistants, healthcare assistants and counter clerks, whose dedication often went unseen. From preparing patients and assisting during procedures to endoscope reprocessing, infection control, equipment preparation, patient transport, registration and documentation, every team member contributed to the smooth functioning of the programme. Their efficiency enabled rapid turnover between cases without compromising patient safety.



Mission control in action! Every checklist completed, every patient accounted for, and always a smile to keep the marathon going

The gastroenterology fellows and medical officers extended their responsibilities beyond performing procedures. They reviewed patients before colonoscopy, obtained informed consent, counselled patients and families after procedures, coordinated histopathological investigations and arranged prompt follow-up. Patients with advanced neoplastic lesions were expedited for multidisciplinary discussion and definitive management.

Meaningful Clinical Outcomes

Over the five-day programme, a total of 320 colonoscopies were successfully performed. More importantly, the marathon identified a broad spectrum of colorectal pathology, including lesions highly suspicious for advanced dysplasia or colorectal carcinoma.

Diminutive and small polyps were removed during the index procedure, eliminating premalignant lesions without requiring a second hospital visit. Larger and technically complex lesions requiring advanced techniques such as Endoscopic Mucosal Resection (EMR) or Endoscopic Submucosal Dissection (ESD) were appropriately scheduled for dedicated therapeutic sessions to ensure optimal safety and outcomes.

Looking Ahead

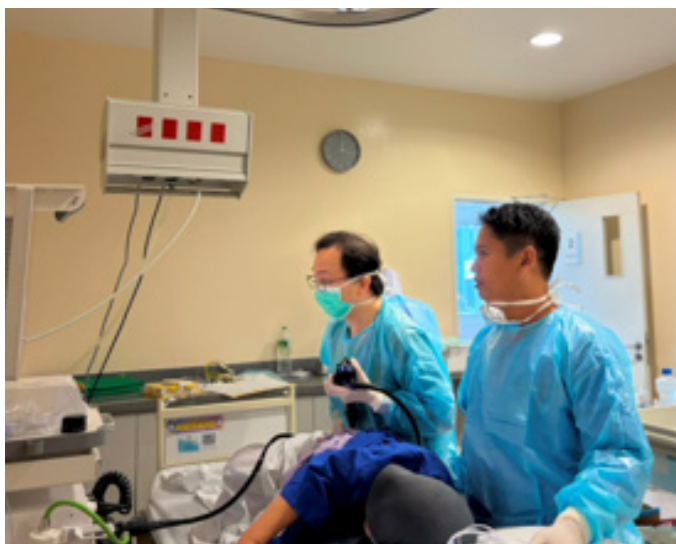
As the marathon concluded, its greatest achievement extended beyond the number of procedures performed. It demonstrated what can be accomplished when healthcare professionals from multiple institutions unite behind a common purpose: reducing diagnostic delays, improving equitable access to life-saving investigations and strengthening colorectal cancer prevention in Malaysia.

The Gastroenterology Unit extends its heartfelt appreciation to every individual who contributed to this initiative - from the visiting consultant gastroenterologists, surgeons, gastroenterology consultants, fellows and medical officers to the dedicated endoscopy nurses, medical assistants, healthcare assistants, counter clerks and administrative personnel. Their professionalism, resilience and teamwork transformed an ambitious vision into a meaningful service for hundreds of patients.

Behind every completed colonoscopy was an opportunity to detect disease earlier, prevent cancer and improve the lives of patients and their families.



All hands-on deck - every procedure bringing one more patient closer to an earlier diagnosis.



Dr Ng Keat Keng in action - laser-focused on meticulous mucosal inspection, ensuring every fold is examined and no polyp is left behind.



The best kind of souvenir from a colonoscopy marathon - a polyp worth remembering!



Keeping the marathon moving - our dedicated staff ensuring every endoscope is expertly reprocessed and ready for the next patient.



Five days later, with the waiting list lighter and spirits higher - a well-earned moment overlooking the iconic KLCC skyline

****Visiting gastroenterologists were Dr Wan Zaharatul Ashikin binti Wan Abdullah (Hospital Putrajaya), Dr Ng Keat Keng (Hospital Tuanku Ja'afar, Seremban), Dr Ng Inn Shan (Hospital Raja Permaisuri Bainun, Ipoh), Dr Kok Wei Hao (Hospital Canselor Tuanku Muhriz UKM), Dr Ravindran A/L A Ponnisamy (Hospital Serdang) and Dr Nik Razima binti Wan Ibrahim (Hospital Ampang)***



Malaysian Society of
Gastroenterology & Hepatology



Annual Scientific Meeting of MSGH

in conjunction with

Endoscopy Workshop 2026



PUSAT PERUBATAN
Medical Centre

28th to 30th August 2026

Kuala Lumpur Convention Centre
Kuala Lumpur, Malaysia

**Navigating the Changing
Landscape of
Digestive Diseases**

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GASTRO UiTM G.I. MOTILITY WORKSHOP 2026

Dr Nabilah Izham



Group Photo for GastroUiTM G.I. Motility Workshop 2026

From 22nd to 24th April 2026, the Gastroenterology and Hepatology Unit (GastroUiTM) proudly organised the fifth iteration of the GastroUiTM G.I. Motility Workshop in Hospital Al-Sultan Abdullah UiTM.

This edition distinguished itself from previous workshops by incorporating a dedicated pre-workshop programme, with a focus on returning to fundamentals — including catheter insertion techniques and equipment handling.

Supported by Medic Pro Healthcare, the workshop attracted a total of 50 participants. Attendees included nurses, medical officers, specialists and consultants both locally and internationally and encompassed the public and private sectors.

The three-day programme commenced with a pre-workshop session, which incorporated a series of lectures and live demonstration led by Dr Thevaraajan Jayaraman and Dr Nabilah Izham on the fundamental concepts in oesophageal high-resolution manometry (HRM) and 24-hour pH impedance studies.

A key highlight of this year's programme was the expanded hands-on component, where participants systematically interpreted HRM and pH impedance tracings from real-life clinical cases. These interactive sessions were led by an outstanding, internationally

recognised experts in neurogastroenterology, comprising Professor Lee Yeong Yeh (Universiti Sains Malaysia), Associate Professor Chuah Kee Huat (Universiti Malaya), and Associate Professor Andrew Ong (Duke-NUS Medical School and Singapore General Hospital). Their generosity in sharing their wealth of clinical experiences and academic knowledge made a profound impact on the participants.

The programme was complemented by a lecture on the medical and surgical management of upper gastrointestinal disorders based on physiological testing led by Dr Shukri Jahit, Consultant Upper GI surgeon at Thomson Hospital.

The second day featured live demonstrations of oesophageal mucosal integrity testing, performed by Dr Thevaraajan Jayaraman and moderated by Professor Lee Yeong Yeh and Associate Professor Andrew Ong. Participants had the rare opportunity to witness this emerging diagnostic technique first-hand - one that is widely regarded as the future of neurogastromotility.

A further demonstration featured the wireless pH capsule reflux monitoring system (alphaONE), including an in-depth walkthrough of alphaONE tracing interpretation, delivered by Professor Lee Yeong Yeh. Other highlights included a motility tracing interpretation competition, where participants worked in four teams to

analyse clinical cases and present their findings to the expert panel. The exercise stimulated lively discussions, with constructive feedback provided by the experts before prizes were awarded to the winning team. Participants also enjoyed a workshop dinner at the Setia Convention Centre, during which Dr Shukri Jahit delivered an inspiring speech on the concept of “Ikigai” and the importance of living life to the fullest.

Overall, the workshop successfully achieved its objectives of deepening clinical knowledge and facilitating meaningful interactions with world-renowned experts in the field of neurogastroenterology. The overwhelmingly positive feedback affirms that the programme is on the right trajectory.

Going forward, we remain committed to further developing our motility services and to establishing UiTM as a regional centre of excellence for training in the specialised field of gastrointestinal motility.



Dr Rafiz Abdul Rani, Head of Gastroenterology and Hepatology Service Centre, Hospital Al-Sultan Abdullah UiTM with Dr Thevaraajan Jayaraman, course director



pH impedance lecture by Dr Nabilah Izham



Lecture by Dr Shukri Jahit



Live demonstration MiVU and alphaONE



Group analysis competition

UMMC's Innovation in Endoscopy Education

Inspire.U and Simulator-based ERCP Workshop

Associate Professor Chuah Kee Huat and Dr Shahreedhan Shahrani

The Universiti Malaya Medical Centre (UMMC) Endoscopy Team has further solidified its role as a hub for advanced endoscopy training by spearheading two major educational workshops: Inspire U and Simulator-based ERCP Workshop.

Inspire.U Endoscopy Workshop, Connexion Conference and Event Centre, Nexus Bangsar South with Live Transmission from UMMC

Held on 1st & 2nd November 2025, in collaboration with Micro-Tech (Nanjing) Co., Ltd, Medic Pro Healthcare and the Malaysian Society of Gastroenterology and Hepatology, this live endoscopy workshop served as an important platform to bridge theory and practice, offering participants valuable exposure to advanced endoscopic techniques and innovation.

The workshop attracted both young and experienced endoscopists, and featured an impressive international faculty including Professor Fan Chao Qiang and Dr Peng Xue from Xinqiao Hospital, Professor James Lau from the Chinese University of Hong Kong and Professor Katsumi Yamamoto from the Japan Community Healthcare Organisation Osaka Hospital.

They shared their extensive expertise in third-space endoscopy, advanced ERCP, and complex therapeutic endoscopic interventions. Local faculty included Dr Ho Shiaw Hooi, Dr Lee Tiong See, Dr Alex Leow, Professor Chan Wah Kheong, Dr Khoo Stanley, Dr Preveenna Nagaratnam, and Dr Wong Wei Jin who delivered talks covering a broad spectrum of endoscopy. These sessions highlighted the growing expertise and capabilities of Malaysian endoscopists.



Photos from Inspire.U

The highlight of this event was undoubtedly the live endoscopy demonstration sessions, showcasing advanced therapeutic procedures performed by expert operators:

- ERCP with cholangioscopy and laser lithotripsy by Dr Lee Tiong See and Dr Khoo Stanley
- Endoscopic ultrasound (EUS) with fine needle biopsy by Dr Khoo Stanley, illustrating the role of EUS-guided tissue acquisition in diagnosing complex lesions
- Endoscopic Submucosal Dissection by Dr Chiam Keng Hoong, highlighting precision en bloc resection techniques for early GI neoplasia
- Peroral Endoscopic Myotomy (POEM) by Professor Sanjiv Mahadeva, demonstrating advanced third-space endoscopy

The workshop also benefited from the strong support of many respected local senior gastroenterologists, surgeons and endoscopists, including Dato' Dr Andrew Chua, Associate Professor Dr Christopher Chia, Dr Glenn George Koleth, Dr James Emmanuel, Datuk Dr Jayaram Menon, Dr Kamarajan Ramayan, Dr Lau Peng Chong, Dr Muhammad Firdaus, Dr Rafiz Abdul Rani, Datuk Dr Raman Muthukaruppan, Dr Sattian Kollanavelu and Dr Thevaraajan Jayaraman, who served as moderators.

The workshop also featured a hands-on training session using the EyeMax cholangioscope, which was enthusiastically attended by participants.

Achieving ERCP Mastery with Simulation-Based Learning, UMMC

The inaugural simulator-based ERCP workshop, a first in Malaysia, was successfully held at the Endoscopy Unit, Universiti Malaya Medical Centre in ERCP on 4th March 2026. This landmark workshop was jointly organised with Dr Rafiz Abdul Rani and Dr Thevaraajan Jayaraman from UiTM, with the support from Fujifilm, Cook Medical, Boston Scientific and the Malaysian Society of Gastroenterology and Hepatology.

The workshop attracted a mix of participants from both gastroenterology and surgical background. The programmed was also greatly enriched by two distinguished international faculty members including Professor Tomohiko Ohya and Associate Professor Masashi Fujii.

The workshop commenced with a series of lectures by Dr Lee Tiong See (Senior Consultant Gastroenterologist at Hospital Selayang), Dr Victoria Kok (Head of



Photos from ERCP workshop

Gastroenterology at Hospital Umum Sarawak) and Dr Shahreedhan Shahrani (UMMC), designed to provide participants with a strong foundation on ERCP before the hands-on sessions.

A major highlight of the workshop was the extensive hands-on training, where participants rotated through multiple simulation stations under the guidance of Professors Ohya and Fujii, together with Dr Lee, Dr Theva, Dr Rafiz, Dr Victoria, Dr Shahreedhan and Dr Sooi Choong Yeong from Cengild Hospital. Participants had the unique opportunity to train using the Mikoto ERCP simulators, which were introduced in Malaysia for the first time.

The Mikoto simulators were utilised for scope insertion and selective cannulation training, while dedicated Boston Scientific and Cook Medical training models were used for biliary stenting and sphincteroplasty

practice. Complementing the simulation sessions were live ERCP demonstrations performed by Professor Chan Wah Kheong and Associate Professor Chuah Kee Huat, allowing participants to observe the practical application of techniques taught throughout the day.

Nurturing the Next Generation of Advanced Endoscopists

Both events were highly successful and impactful. Inspire.U lived up to its name by inspiring a new generation of endoscopists to pursue excellence, innovation and mastery in therapeutic endoscopy. While the ERCP workshop marked an important step in advancing endoscopy education through simulation-based training, further elevating the standards and safety of advanced endoscopy training in the region.



Associate Professor Chuah Kee Huat with ERCP team



Dr Ohya with Mikoto ERCP simulator



Prof Sanjiv Mahadeva, advisor, on opening remarks



Dr Theva, Dr Lee, Dr Victoria, Dr Shahreedhan, Dr Hasan Alaali



UM ERCP Workshop with faculty and participants

EDUCATION & TRAINING

BUILDING BETTER ENDOSCOPY TRAINERS

A-PSDE-MSGH TRAIN THE ENDOSCOPY TRAINERS WORKSHOP 2026

By The Endoscopy Training Workgroup



The Malaysian Society of Gastroenterology & Hepatology in collaboration with the Asian Pacific Society for Digestive Endoscopy (A-PSDE), recently marked a significant milestone in GI endoscopy education by successfully conducting Malaysia's first National Train-the-Endoscopy Trainers Workshop.

Organised by the Endoscopy Training Workgroup* and hosted by University Putra Malaysia, the two-day workshop brought together gastroenterology trainers from training centres across the country with a shared vision of strengthening endoscopy education in Malaysia.

Recognising that proficient endoscopists do not automatically become excellent trainers, the workshop focused on equipping experienced gastroenterologists with practical educational skills to optimise endoscopy training.

Every accredited gastroenterology training centre was invited to nominate a trainer representative, reflecting the collective commitment towards establishing a more structured, standardised, and effective training environment for future gastroenterologists.

The workshop was privileged to host an outstanding international faculty including Dr Tomohiko Ohya (Japan), Dr Patricia Anne I. Cabral-Prodigalidad (Dr Sandy, Philippines), and Dr Andrew Ong (Singapore), alongside our esteemed local faculty, Dr Ho Shiao Hooi and Dr Wong Zhiqin. The meeting commenced with an inspiring opening address by A-PSDE President, Professor Seigo Kitano, to officiate the workshop.

The first day focused on the educational foundations of effective endoscopy training. Through a series of lectures, participants explored the three essential phases of every training encounter: the Preparation stage, the Training stage and the Wrap-up stage. Beyond technical instructions, emphasis was placed on creating meaningful learning experiences through clear goal setting, structured feedback and reflective practice. The afternoon transitioned into highly interactive small-group discussions that tackled real-world educational challenges.

Participants explored strategies to manage cognitive overload, methods of task deconstruction to simplify complex procedures for trainees, and practical approaches to trainee assessment. A particularly engaging session led by Dr Muhammad Firdaus and Professor Ida Hilmi encouraged open discussions on the current barriers and challenges in endoscopy training, allowing trainers from different institutions to share experiences and identify common solutions.

Day 2 translated theoretical knowledge into practice through immersive simulation-based training. Trainers rotated through hands-on stations where they applied coaching techniques and feedback strategies. One of the highlights was the non-technical skills simulation, where participants managed an acute GI bleeding scenario while practising communication, teamwork, leadership, situational awareness, and decision-making - competencies that are increasingly recognised as being just as important as procedural skills in ensuring safe and effective endoscopy.



Faculty for Train the Endoscopy Trainers

The workshop concluded with an important national discussion on the future of endoscopy training in Malaysia. Trainers worked collaboratively on mapping core endoscopic competencies, exploring the implementation of a structured endoscopy training curriculum, and discussing nationwide rollout of Direct Observation of Procedural Skills (DOPS) assessments for gastroenterology fellows. These discussions represent important steps towards creating a more competency-based and standardised training pathway across the country.

As the first national initiative of its kind in Malaysia, the workshop represents an important milestone in advancing endoscopy education and fostering a culture of excellence in procedural training. The success of this program would not have been possible without

the strong support of the Ministry of Health Malaysia, MSGH, participating universities and all gastroenterology training centres, whose willingness to invest in trainer development reflects a collective commitment to improving the quality of endoscopy training, and ultimately, patient care throughout Malaysia.

The Endoscopy Training Workgroup extends its sincere appreciation to A-PSDE and Olympus for their educational partnership and support in making this workshop possible.

By leveraging evidence from ongoing trials and integrating sustainable practices, our healthcare system can remain resilient against both climate-driven challenges and evolving healthcare demands.



Station on Task Deconstruction and Teaching Using Precise Instructions (polypectomy) with Dr Ho and Dr Nazri



Utilising DOPS assessment methods with Dr Andrew



Station on Performance Enhancing Feedback using Colonoscopy simulator with Dr Ohya



Group photo with trainers and faculty

EDUCATIONAL HIGHLIGHTS APRIL – JULY 2027

Conjoint Training Board and Training Committee

We welcomed 21 new gastroenterology and hepatology fellows at the recent Hepatology-Gastroenterology Masterclass (HEGAM) 1.3, one of the highest intakes we have had so far. This is encouraging as ongoing efforts are made to recruit new fellows to increase the number of gastroenterologists and hepatologists to meet the rising demands of our services.

HEGAM 1.3 is the final exam-focused series, with this particular session focusing on pancreatobiliary conditions. The first and second sessions done in 2024 and 2025 were on basic GI and Hepatology conditions. HEGAM 1.3 was again held at Hospital Putrajaya on the 6th and 7th July hosted by Dr Wan Zaharatul and her team.

Other events included the GI Pathology Training Day which is held every two years alternating with GI Radiology Training Day. This was hosted by Dr Wong Mung Seong and her team at Hospital Sultan Abdul Aziz Shah, University Putra Malaysia.



Mock Viva for exam-goers with examiners at HEGAM 1.3



Group photo at HEGAM 1.3 held 6th-7th July



Datin Nik Raihan bt Nik Mustapha on basic upper GI histology at GI Pathology Training Day



Invited histopathologists including Datin Dr Nik Raihan, Dr Pavitratha, Dr Sugunah, Dr Maalini, Dr Pan Ann Feng, Dr Mohd Isnisyam



Group photo at GI Pathology Training Day held 8th of May

National Inflammatory Bowel Disease Preceptorship 2026

Dr Shahreedhan Shahrani



IBD clinic with Professor Ida

The annual National Inflammatory Bowel Disease (IBD) Preceptorship was held from 29th June to 3rd July 2026. First established in 2021, the program is organised in collaboration with the Malaysian Society of Gastroenterology and Hepatology supported by Johnson & Johnson.

The first three days were hosted at the University Malaya Medical Centre (UMMC), followed by two days at Hospital Canselor Tuanku Muhriz (HCTM), UKM. Designed as a collaborative and multidisciplinary program, the preceptorship brought together expertise in gastroenterology, surgery, nutrition, endoscopy, radiology and histopathology. This year, the program welcomed seven participants including, for the first time, a specialist in paediatric surgery.

The program included didactic lectures by Professor Ida Normiha Hilmi, Dr Alex Leow, Dr Kong Tak Loon, Dr Rezal Aziz, Mdm Siti Hawa and Sister Rozita, attendance of the weekly Monday IBD clinics and a hands-on IBD endoscopy workshop supervised by Professor Ida and myself.

At HCTM, the program continued with lectures on biomedical imaging in IBD by Dr Ho Shuang Yee and myself, followed by sessions on IBD in special populations and case presentations by fellows. Intestinal ultrasound (IUS) training by Dr Nik Razima and myself were conducted, focusing on the fundamentals of IUS and its practical application in the management of IBD.

The final day concluded with lectures on histopathology, IBD emergencies, small bowel endoscopy, therapeutic drug monitoring and fistulising Crohn's disease, delivered by Datin Dr Nik Raihan, Dr Sugunah Sallapian, Dr Pan Ann Feng, Professor Raja Affendi and Dr Deborah Chew.

The program received positive feedback from participants, who described it as comprehensive, practical and highly relevant to their clinical practice. Similarly, the paediatric surgeon expressed his hope that more specialists from allied disciplines would have the opportunity to participate in future editions as he's gained significant understanding of IBD from this program.

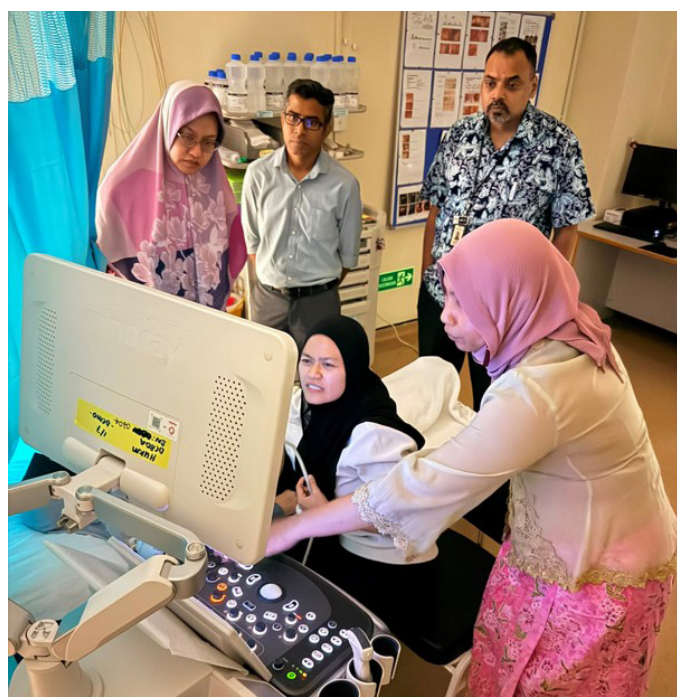
Finally, we'd like to thank Johnson & Johnson and Mindray for their generous support; as well as all participants for their enthusiasm, active engagement and commitment to advancing the care of patients with IBD.



IBD clinic with Dr Alex Leow



IBD Preceptorship Group photo in UMMC



IUS training with Dr Shahreedhan Shahrani



IUS training with Dr Nik Razima



Group photo with histopathologists at HCTM



Group photo at HCTM with Professor Raja Affendi and Dr Deborah Chew



Group photo with HCTM team

CALENDAR OF EVENTS

AUGUST – NOVEMBER 2026



AUGUST



**28TH TO
30TH
AUGUST**

GUT 2026

Kuala Lumpur Convention Centre,
Malaysia



**28TH TO
31ST
AUGUST**

Australian Gastroenterology Week 2026

Perth, Australia



SEPTEMBER



**30TH SEPTEMBER
TO
3RD OCTOBER**

World Congress of Gastroenterology 2026

New Delhi, India



OCTOBER



Liver Cancer Awareness Month



**9TH & 10TH
OCTOBER**

Asia Pacific Neurogastromotility Foundation Course

Kuala Lumpur, Malaysia



**17TH TO
20TH
OCTOBER**

United European Gastroenterology (UEG) Week

Barcelona, Spain



NOVEMBER



**5TH TO
9TH
NOVEMBER**

AASLD Liver Meeting

Denver, Colorado, USA



**24TH TO
28TH
NOVEMBER**

Asian Pacific Digestive Week (APDW)

Manila, Philippines



Dates and details are subject to change.