

PIONEERS OF PCHC

“You learn with patients, through patients.”

Datuk Dr. Mazeni Alwi

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Senior Consultant Paediatric Cardiologist

Datuk Dr Mazeni has been with IJN since it first corporatised in September 1992 as part of the first group of doctors from the former Cardiology and Cardiac Surgery Department in Hospital Kuala Lumpur (HKL). He is currently its Senior Consultant Paediatric Cardiologist, specialising in Paediatric Cardiology and Interventional Paediatric Cardiology with Paediatric and Congenital Heart Centre (PCHC). In the field of interventional cardiology, he received the first CSI Asia Pacific Lifetime Achievement Award in Guangzhou, China in 2019. In 2020, he received the PICS Achievement, the highest honour an interventional cardiologist could aspire to (because of Covid the award ceremony was held in September 2022 in Chicago).

THE EARLY DAYS TO NOW

Before the establishment of IJN in 1992, cardiac surgery was almost entirely done at HKL. This was limited to simpler lesions and in very small numbers. The decision to set up a national cardiac centre coincided propitiously with rapid development in paediatric cardiology. The early 1990s ushered in new surgical techniques for repair of complex lesions but also non-surgical techniques beginning with the simpler lesions – known as interventional cardiology – techniques that have rapidly grown in complexity and breadth.

As for the biggest changes, with 2 major expansions since its inception, the original Block B will be dwarfed when the second phase is completed soon. But the bigger changes are within. The complexity of managing congenital heart disease today has meant



going in the direction of more subspecialisations among the physicians, a bigger support staff and the need for sophisticated equipment. That obviously has impact on cost, given the increasing complexity and technology dependent nature of heart disease treatment has become today. IJN being a separate entity from KKM, our corporate side has the big task of maintaining financial independence while serving the function of a national referral centre i.e. apart from providing treatment (with a lot of government support) this also includes education, training and research. That is why today we have the IJN College and the International Patients Centre.

LEAVING A LEGACY

In 1999, the pioneer clinical leaders of IJN, Tan Sri Yahya Awang and Tan Sri Robaayah Zambahari decided that paediatric cardiology should separate from cardiology (adult) and become a 4th department after Cardiology, Cardiothoracic Surgery and Anaesthesia. Today it is known as PCHC. This re-branding is in keeping with the direction towards seamless collaboration between paediatric cardiologist, intensivist and paediatric cardiac surgeon in the management of CHD. This is also to adapt to the new reality of a large number of children who have survived treatment into adulthood and have now new problems and issues that we need to address.

It was a big challenge for me as there were only 2 paediatric consultants then, with little administrative experience. But the department had very able and hardworking registrars who were all subsequently absorbed as consultants and have made equally important contribution to the growth of the department and IJN. We took the best practices from highly respected institutions abroad and tailored them to our

local context and resources available. While recognizing the importance of developing a good surgical program, we ventured early into the field of non-surgical interventional cardiology, an exciting new field that is especially relevant for us to complement the surgical output, given the limitations of space and resources vis a vis surgery. Through our publications in journals and book chapters on interventional cardiology, IJN has become among the leading centres in the region.

Apart from training Malaysian paediatric cardiologists to serve the nation, we have also been training a large number foreign fellows from the region and beyond. It gives us immense satisfaction to see our ex-fellows treating children with heart disease in their own countries. It is important to nurture this international networking to maintain IJN's visibility and standing as among the leading heart institutions in the region.

LOOKING TOWARDS THE FUTURE

IJN has grown tremendously and accomplished much in 3 decades. However, as an entity that is outside the KKM there are certain challenges that we face. We can foresee that cases referred from KKM hospitals will gradually diminish as the ministry continues to develop its service in regional centres. But for the present, the country's case burden is still very big, and as long as we provide quality care with outcomes matching international benchmark and we continue to nurture good relationship with ministry colleagues, IJN will remain relevant and continue to grow.

We need to keep abreast with innovation, maintain networking with colleagues around the world and make the effort to publish and present our work on the international platform as much as possible. We need to continue attracting foreign fellows that IJN is a good place to train with our case load and breadth of disease spectrum that we see every day.

Apart from the theoretical knowledge through reading books, CME programmes and attending conferences, just as important is learning through treating patients and communicating with empathy and professionalism with their families. You learn through patients, with patients. In a high volume centre such as IJN, one's growth is accelerated not only in the theoretical and technical aspect, but also in the wholesomeness of one's character, something that is a prerequisite in the caring professions.



Datuk Dr. Mazeni in his early years with his fellow colleagues.