Abstract of the Proceedings of the Men’s Health World Congress 2023

Organising Committee of MHWC 2023¹,*
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The Malaysian Society of Andrology and the Study of Ageing Males (MSASAM) and the Malaysian Clearinghouse for Men’s Health will be jointly hosting The Men’s Health World Congress 2023 (MHWC2023), scheduled from 11–13 December 2023 at Kuching, Sarawak. The theme for MHWC 2023 is “United for Men’s Health”, as we believe in a comprehensive and holistic approach to promoting men’s health, and that this can only be done successfully through inter-sectorial and inter-disciplinary collaborations. The authors were given the chance to present the outcomes of their individual scientific endeavors during the oral presentation sessions. More information is available at https://www.mhwc.my/.

The Proceedings of the Men’s Health World Congress 2023 Abstract Reviewers

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01. Male Systemic Lupus Erythematosus: Gender Differences in Clinical Characteristics

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Introduction: Systemic lupus erythematosus (SLE) is a multisystemic autoimmune disease with a higher prevalence in women. The aetiology for this gender difference is unknown, but several studies have shown that despite the higher prevalence of SLE in women, men with SLE have more renal involvement and more severe disease than women.

Aim: To examine the clinical characteristics of male SLE patients, and the gender difference between men and women with SLE.

Methods: SLE patients in rheumatology units in Sarawak General Hospital and Sibu Hospital were included in the study from July 2018 until November 2021, and the differences in demographics, age at onset, clinical manifestations, and SLE damage index were examined. All patients fulfilled the 2012 Systemic Lupus International Collaborating Clinics (SLICC) Classification Criteria for Systemic Lupus Erythematosus.

Results: There were 866 patients, with 779 (90%) women and 87 (10%) men. There were more smokers among men (18 (20.7%) men vs. 12 (1.5%) women, p < 0.01). Men had significantly more renal involvement (58 (66.7%) men vs. 420 (53.9%) women, p = 0.02). Men also had more severe disease at SLE diagnosis (58 (66.7%) men vs. 421 (54.0%) women, p = 0.03). Women had significantly more oral or nasal ulcers (330 (42.3%) women vs. 25 (28.7%) men, p = 0.01), non-scarring alopecia (451 (57.8%) women vs. 25 (28.7%) men, p < 0.01), arthritis (319 (40.9%) women vs. 26 (29.9%) men, p = 0.05), and leucopenia (403 (51.7%) women vs. 35 (40.2%) men, p = 0.04). There were no significant differences in mean age at SLE diagnosis (30.2 ± 13.2 years in women vs. 30.4 ± 13.1 years in men, p = 0.9). There were no difference in deaths, with 74 (9.5%) deaths among women and 13 (14.9%) among men, p = 0.1. The presence of disease damage (SLE damage index (SLICC SDI) score >1) did not differ significantly between men and women (men 35 (40.2%) vs. women 294 (37.7%), p = 0.65). However, there was a significant statistical difference seen between men and women in individual damage index items (end stage renal failure, myocardial infarction, gastrointestinal infarction and extensive skin scarring).

Conclusions: Male SLE patients tend to have more severe disease at SLE presentation, more renal involvement and more disease damage compared to female SLE patients.

02. Creating Environments That Support Good Mental Health and Wellbeing Within Male Dominated Workplaces in Australia

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Introduction: In Australia, blue-collar workers are predominantly male. They are more vulnerable to particular health-related issues and, in comparison to other groups, often lack health promoting behaviour. Men continue to die at every life stage, for reasons that are largely preventable, such as suicide, alcohol induced death, heart disease, dementia and accidental death (including workplace).

Aim: There remains a great opportunity to identify better support, understanding and positive change within the workplace (and all) settings, where large populations of men (and sometimes boys) exist. Some aims are to address: • A significant number of people who die from preventable causes are male. • Awareness of men’s issues that are often dismissed. • Challenge stereotypes and stigma relating to myths about men speaking, seeking and feeling.

Methods: 28, face to face customised, mental health sessions were delivered to approximately 500 male complex infrastructure workers. These were presented to a typical audience of blue-collar tradespeople at their Queensland, New South Wales, Victorian and New Zealand worksites. Data was collected from a brief online survey to measure attitudes to mental health. Using a combination of storytelling, analogy, lived experience, research, frameworks and self-help models, 1–2-hour presentations aimed to provide a specific, male friendly, learning outcomes.

Results: 145 men completed the survey with results of a 90% positive shift in comfortability, addressing the mental health of self and others after the sessions. Most all participants requested more sessions like this and better mental
health support.

**Conclusions:** Because men make up a significant portion of the Australian workforce, there exists an opportunity to meet them in this space, where support through mate ship and safety structures exist. An egalitarian approach supports the idea that creating better lives for men and boys has a direct impact on everyone.

03. Exploring Supportive Care Needs in Men with Prostate Cancer in New Zealand: A Cross-Sequential Explanatory Mixed-Methods Study

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**Introduction:** Prostate cancer is the most commonly diagnosed cancer in New Zealand men, with an estimated 4000 new cases diagnosed each year. Men with prostate cancer have a good prognosis in most cases and live a long time after diagnosis (98.6% 5-year cancer-specific survival rate). While overall survival rates are high, health status and quality of life (QoL) during survivorship can be poor for many men due to treatment side effects. Thus, survival gains from prostate cancer have created a shift in focus from survival towards the quality of life (QoL) and supportive care during extended survivorship.

**Aim:** We aim to determine the most influential factors that affect these unmet needs at various stages of cancer survivorship, with a special focus on identifying ethnic disparities between Māori men and non-Māori men; explore the attitudes, opinions and experiences of supportive care across the different levels of unmet needs among men with prostate cancer; and establish participatory co-design groups to inform the future development of community-based, culturally safe programs to meet the supportive care needs of men with prostate cancer.

**Methods:** We propose a mixed-method study using explanatory sequential design—collection and analysis of quantitative data, followed by the evaluation and verification of qualitative data. Contiguous and sequential quantitative (survey) and qualitative (semi-structured interviews) studies will be conducted with men living with prostate cancer who are within five years of diagnosis or having recurrence after primary treatment. The results of Phases I & II (survey) will inform the design of Phase III (semi-structured interviews).

**Results:** We are in the data collection process of the first phase (quantitative). We hypothesise that patients with higher supportive care needs would have poor QoL outcomes. Patients’ experiences of supportive care utilization will mitigate such association. We will have the integrated findings by December 2023.

**Conclusions:** The findings of this study will give community supportive care providers and clinicians specialized knowledge to inform recommendations for tailored resources and any realignment of care services to minimize disparities and improve the well-being and QoL of the prostate cancer population, and their whānau (family) in the community.

04. The Impact of Male Involuntary Childlessness on Men’s Health Across the Life Course: Implications for Individuals, Healthcare Providers and Practitioners

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**Introduction:** There are more childless men than childless women yet there is a paucity of material on involuntarily childless men (ICM). This can be attributed to several factors, including historical and societal norms, gender roles and expectations, and research and publishing biases. The field of research and literature on infertility and childlessness has historically focused more on women’s reproductive health due to the perceived centrality of motherhood and the fallacy that men are not interested in reproductive intentions and outcomes. Consequently, there is limited empirical data and scholarly material available on this topic. What little there is has demonstrated how ICM can negatively affect health and wellbeing and have significant impacts on policies, public health and epidemiology in men’s health.

**Aim:** The aim is to address the gap in knowledge and affect change in policy and practice.

**Methods:** Based on research studies conducted in the United Kingdom: semi-structured interviews with older men and analysts using a latent thematic analysis and an online mixed-method survey of parents and non-parents on reproductive intentions.

**Results:** This piece explores men’s lived experience of childlessness, and the factors that influenced their non-
parenthood status and the impact it had on their health, finance and societal status across the life course. ICM are shown to be at risk of poorer mental and physical health behaviours, less likely to engage in health screenings and preventative care, have smaller social networks and informal care support—all increase with age.

**Conclusions:** Key considerations include the development of public and workplace policies that address fertility issues and provide support for men; Understanding the prevalence and causes of involuntary childlessness in men is crucial for public health and epidemiology research; the impact on men’s mental health, leading to stress, depression, anxiety and bereavement and the development of improved communication and engagement strategies by healthcare providers and practitioners.

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**05. Technology Assisted Intervention Strategy for Enhancing Resilient Single Fathers: A Need Analysis**

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**Introduction:** Children’s well-being is greatly influenced by the family’s quality of communication, intrafamilial bonds, expression of feelings, general family atmosphere, and alliances or conflicts. However, when the rate of stress, burnout, anxiety, depression among single fathers rises, those family qualities affect their children’s well-being and result in the deprivation of children-father’s relationship at home. Emotional regulation, physical and emotional closeness and continuity in the relationship are essential for a sense of security, stability and ability to withstand a crisis, especially in the new normal life of post-COVID.

**Aim:** This article focuses on enhancing psychological and mental well-being of single fathers. It aims to expose the resilient factors for single fatherhood using intra-familial relations to include family communication, family functioning and family organization for enhancing the psychological and mental well-being of the single fathers and their family members. Technology-based competency is also included in the survey to identify problems in the technology usage.

**Methods:** Using purposive sampling technique, 100 single fathers recruited in this need analysis phase for problems identification in the family of the single fatherhood. Single parent association Malaysia has agreed to have their members for the recruitment. The survey questionnaire has been developed by the process of validation methods to adapt and modify the questions from the standardized procedures for problems identification among the Malaysian single fathers.

**Results:** Survey indicated intra-familial relation problems among the single fathers in their communication, family functioning and family organization within the family spectrum. Need analysis indicated that within family process, family communication patterns and technology competency, single fatherhood faces psychological burden and other challenges during and after the pandemic.

**Conclusions:** Technology Assisted Intervention Strategy (TAIS) is pertinent to develop for enhancing resilience among single fathers.

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**06. Ethanol Enhances Mitophagy in Leydig Cells: Ultrastructural Evidence and Molecular Mechanisms**

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**Introduction:** Excessive alcohol consumption has been reported to enhance germ cell apoptosis and suppress androgen production, inducing male infertility. Exposure to various stressors such as ethanol (the most common endocrine disruptor) stimulates mitophagy (selective clearance of damaged mitochondria) in various organs such as the liver, which is widely accepted as an anti-apoptotic mechanism. However, studies investigating mitophagy in Leydig cells of ethanol-treated rats (ETRs) are still very few.

**Aim:** This study was conducted to investigate the autophagic response of Leydig cells in ETRs using light and electron
microscopic techniques.  
**Methods:** Adult Wistar rats received intraperitoneal injections of ethanol (5 g/kg) (as a model of binge ethanol exposure) and sacrificed at various time periods within 24 h (a control group received saline instead of ethanol). The tissues were processed for light and electron microscopy and Western blot.  
**Results:** Immunohistochemistry (IHC) and Western blot revealed the suppression of androgen receptor and upregulation of inducible nitric oxide synthase (iNOS) expression in Leydig cells of ethanol-treated rats (ETRs) compared to normal levels in the control group. The Terminal deoxynucleotidyl transferase dUTP Nick End Labeling (TUNEL) method showed a marked increase of germ cell apoptosis in ETR testes, however, Leydig cells were resistant to apoptosis (only a few cells were TUNEL positive). Conventional electron microscopy demonstrated a marked increase in the number of mitophagic vacuoles (mitophagosomes and mitolysosomes) in Leydig cells of ETRs in contrast to extremely low levels in a control group. This was confirmed by immuno-electron microscopy of microtubule-associated protein 1A/1B-light chain 3 (LC3) (specific marker of autophagy), via observation of trapped mitochondria within LC3-labeled mitophagosomes and IHC of LC3 puncta. Importantly, Parkin (a specific marker of mitophagy) was found to be upregulated in Leydig cells of ETRs as evidenced by IHC. Double labeling immunofluorescence showed the enhanced colocalization of Parkin with Pan cathepsin (lysosomal marker), indicating the formation of mitolysosomes and enhanced autophagic flux.  
**Conclusions:** Enhanced Parkin-related mitophagy in ETR Leydig cells may be a prosurvival mechanism with therapeutic implications to male fertility. To our knowledge, this is the first report demonstrating the ultrastructural characteristics and molecular mechanisms of Parkin-related mitophagy in Leydig cells of ETRs.

07. The Impact of Knowledge Translation Tools on ED Discussion and Medication Prescription Among Diabetes Men in Primary Care  
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**Introduction:** The prevalence of erectile dysfunction (ED) is especially high among diabetes men. However, ED is frequently underdiagnosed and undermanaged due to communication barriers between patients and physicians.  
**Aim:** This study aimed to examine the impact of the patient’s prompt sheet and the Knowledge Translation Tools in the Management of Erectile Dysfunction (LASTED) flipchart on the initiation of ED discussion and Phosphodiesterase-5 (PDE-5) inhibitors prescription.  
**Methods:** This interventional study was conducted in an urban public health clinic in Kedah, Malaysia involving 120 men with Type 2 Diabetes Mellitus (T2DM). In the intervention group, patients were given a prompt sheet to indicate their intention to discuss or receive ED treatment and physicians in this group were provided with LASTED to assist with ED consultation. The control group had the usual care without being provided with any prompt sheet and LASTED. All respondents were assessed for ED with International Index of Erectile Function (IIEF-5) and the ED discussion and medication prescription via data collection sheet.  
**Results:** The prevalence of ED in this study was 76.7%. The intervention increased the initiation of ED discussion up to 66.7% compared to 8.3% in the control group. The most common topics of discussion in the intervention group were the treatment of ED (80%). Only 17.5% discussed regarding cardiovascular risk of ED despite the vital link between ED and cardiovascular diseases. 57.5% in the intervention group were prescribed PDE-5 inhibitors, and respondents with moderate ED were more likely to be prescribed oral medication ($p = 0.004$). LASTED flipchart was significantly associated with PDE-5 inhibitors prescription ($p = 0.011$) and respondents’ satisfaction with ED discussion ($p < 0.001$).  
**Conclusions:** A combination of LASTED flipchart and prompt sheet may enhance ED discussion and medication prescription in clinical consultation. Primary care doctors might consider using these tools to improve overall ED management in public clinics.

08. Knowledge and Attitude Towards Emergency Contraception Among Men and its Associated Factors in Klinik Kesihatan Simee, Kinta, Perak  
Nur Alyza Yusuf1, Maliza Mawardi1,*
**Introduction:** Emergency contraception (EC) is a method to prevent pregnancy after unprotected sex. Men influence women’s contraceptive choices to reduce unintended pregnancies. Existing research focuses on women’s awareness and barriers to EC use, but few studies explore men’s perspectives. This study aims to gather data on men’s knowledge and attitudes toward emergency contraception (EC).

**Methods:** In this cross-sectional study, 534 male respondents participated using a convenient sampling method. The questionnaire comprised three sections: Part 1 collected socio-demographic information, Part 2 assessed knowledge of emergency contraception, and Part 3 measured attitudes toward emergency contraception. Descriptive statistics included percentages, medians, and interquartile ranges. Binary and multinomial multivariate logistic regression analyses were conducted to identify predictors of knowledge and attitudes regarding emergency contraception.

**Results:** Response rate of 96%, the majority of respondents were Malay (n = 373, 69.9%), Muslim (n = 383, 71.7%), with a tertiary education background (n = 287, 53.7%). Respondents were married (n = 312, 58.4%), sexually active (n = 320, 59.9%), and expressed a desire for children (n = 341, 63.9%). Multinomial analysis, older men have 1.022 times the odds of having moderate knowledge (Adjusted Odds Ratio (AOR) 1.022, 95% Confidence Interval (CI) 1.000–1.043, \( p = 0.047 \)) and 0.979 times the odds of having a negative attitude toward emergency contraception (AOR = 0.979, 95% CI = 0.965–0.993, \( p = 0.003 \)) compared to younger men. There is a significant positive relationship between men’s knowledge and their attitude toward emergency contraception (\( r = 0.15, p < 0.001 \)).

**Conclusions:** It is found that older age men have moderate knowledge compared to young age men and have negative attitude towards emergency contraception. This study finds a significant positive relationship between knowledge and the attitude of men towards emergency contraception.

**09. The Prevalence of Intention to Make Preconception Lifestyle Changes Among Married Men in Klinik Kesihatan Kuala Lumpur and its Associated Factors**

Siti Solehah Ahmad Mazlan, Irmi Zarina Ismail, Navin Kumar Devaraj

**Introduction:** Men can improve pregnancy outcomes by addressing pre-pregnancy environmental and lifestyle factors, however their role in preconception health is often overlooked. Therefore, this study aimed to determine the prevalence of men’s intention to make preconception lifestyle changes and associated factors (sociodemographic and psychosocial factors) influencing the intention.

**Aim:** Create awareness on prepregnancy preparation among men.

**Methods:** This cross-sectional, single-centre study involved 284 married men with plans for pregnancy attending the clinic between February and April 2023 and used a systematic sampling method. Respondents’ intentions, self-efficacy, attitude, social influences and knowledge related to making lifestyle changes for preconception health was assessed through a self-administered questionnaire. Median score was used as a cut-off point to categorise the intention into low and high intention as the outcome variable (median score = 5).

**Results:** The response rate was 80.7%. About 56.7% (n = 161) of married men had a high intention to make preconception lifestyle changes. A majority of respondents (n = 246) were Malay (86.6%), had achieved at least diploma level of education (74.6%) and had a monthly household income of less than RM 4850 (77.1%). The positive predictors of the intention to make preconception lifestyle changes among the respondents were those who had attended preconception counselling (adjusted Odds Ratio (aOR): 13.33, 95% of Confidence Interval (CI): 2.82–63.02, \( p \)-value: 0.001), having higher self-efficacy (aOR: 1.76, 95% of CI: 1.39–2.24, \( p \)-value < 0.001), peer support (aOR: 1.39, 95% CI: 1.03–1.87, \( p \)-value: 0.03) and recognition the importance of other’s opinions (aOR: 1.23, 95% of CI: 1.12–1.35, \( p \)-value < 0.001).

**Conclusions:** Most respondents intended to make preconception lifestyle changes, which strongly correlated to attending counselling, having high self-efficacy to make lifestyle changes, peer influence and recognition of other’s opinions.

**10. Predictors of Malaysian Men’s Willingness to Seek Help from Professional Mental Health Services**

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**Introduction:** Men influence women’s contraceptive choices to reduce unintended pregnancies. Existing research focuses on women’s awareness and barriers to EC use, but few studies explore men’s perspectives. This study aims to gather data on men’s knowledge and attitudes toward emergency contraception (EC).

**Methods:** In this cross-sectional study, 534 male respondents participated using a convenient sampling method. The questionnaire comprised three sections: Part 1 collected socio-demographic information, Part 2 assessed knowledge of emergency contraception, and Part 3 measured attitudes toward emergency contraception. Descriptive statistics included percentages, medians, and interquartile ranges. Binary and multinomial multivariate logistic regression analyses were conducted to identify predictors of knowledge and attitudes regarding emergency contraception.

**Results:** Response rate of 96%, the majority of respondents were Malay (n = 373, 69.9%), Muslim (n = 383, 71.7%), with a tertiary education background (n = 287, 53.7%). Respondents were married (n = 312, 58.4%), sexually active (n = 320, 59.9%), and expressed a desire for children (n = 341, 63.9%). Multinomial analysis, older men have 1.022 times the odds of having moderate knowledge (Adjusted Odds Ratio (AOR) 1.022, 95% Confidence Interval (CI) 1.000–1.043, \( p = 0.047 \)) and 0.979 times the odds of having a negative attitude toward emergency contraception (AOR = 0.979, 95% CI = 0.965–0.993, \( p = 0.003 \)) compared to younger men. There is a significant positive relationship between men’s knowledge and their attitude toward emergency contraception (\( r = 0.15, p < 0.001 \)).

**Conclusions:** It is found that older age men have moderate knowledge compared to young age men and have negative attitude towards emergency contraception. This study finds a significant positive relationship between knowledge and the attitude of men towards emergency contraception.
Aim: Due to the traditional patriarchal culture in the Malaysian context, men tend to be pressured to conform to acceptable norms established in the society such as suppressing emotions and maintaining an appearance of being "strong".

Methods: A cross-sectional survey was conducted (n = 234) among Malaysian men (age range 18 to 78, mean = 30.29, Standard Deviation = 14.97) to examine the predictors of willingness to seek professional mental health services.

Results: Consistent with literature, societal stigma is a negative predictor of seeking help from professional mental health services. Linear regression analysis revealed that concern of saving face is a negative predictor too. Accounting for both societal stigma and concern of saving face, standard multiple regression analyses revealed that acceptance of mental illness as normal, and willingness to seek medical help, are both positive predictors. This model of 4 predictors accounts for 36% of the variance explained on Malaysian men’s willingness to seek help from professional mental health services. Further probing through analysis of variance revealed that Malaysian men in the postgraduate category (n = 29) are significantly higher than those in the bachelor’s degree, diploma, O-levels or below, to seek help from mental health professionals, medical doctors for physical illness, and acceptance of mental illness as norm in life. This indicates that one’s level of education might impact on one’s attitude regarding help-seeking and acceptance of mental illness in the patriarchal society of Malaysia.

Discussion/ Implications: This aligns with sociocultural learning theory by Vygotsky, in which Malaysian men learnt about society stigma on mental illness, but acceptance of mental illness as part of the norm is significantly lesser for those in the postgraduate level due to intellectual engagement with scholarship of various domains. Application of social identity approach among Malaysian men in the domain of mental health is applied and discussed.

11. Prevalence and Predictors of Intimate Partner Violence Victimisation Among Men in Sarawak

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Introduction: Intimate partner violence (IPV) is a significant concern that affects individuals of all genders. However, men’s victimisation often remains unnoticed or unreported due to societal stereotypes that depict men as strong and invulnerable. By shedding light on this overlooked dimension of IPV, we can strive for a more comprehensive and supportive environment for all victims, transcending gender barriers. This study aims to estimate the prevalence of IPV victimisation and its predictors among men in Sarawak.

Methods: This cross-sectional study was conducted in six divisions in Sarawak from August to December 2022. We recruited 800 male respondents through multistage cluster sampling. The respondents were interviewed face-to-face using a validated questionnaire. To determine the significant predictors of victimisation, hierarchical logistic regression was used. We reported the adjusted odds ratio (AOR) and confidence interval (CI) for all significant predictors.

Results: The estimated prevalence of IPV victimisation was 20.5%. Physical victimisation was the highest with 16.1%, followed by psychological victimisation of 16.0%. Sexual victimisation was the lowest at 2.0%. The significant predictors identified include age (AOR = 3.560, 95% CI: 1.019, 12.427, p < 0.05), education (AOR = 0.382, 95% CI: 0.193, 0.756, p < 0.01), employment status (AOR = 4.540, 95% CI: 1.729, 11.919, p < 0.01), household income (AOR = 0.370, 95% CI: 0.159, 0.858, p < 0.05), not consuming alcohol (AOR = 2.320, 95% CI: 1.023, 5.259, p < 0.05), vape use (AOR = 0.096, 95% CI: 0.010, 0.917, p < 0.05), and childhood adversities (AOR = 1.034, 95% CI: 1.021, 1.049, p < 0.001).

Conclusion: The predictors of IPV victimisation among men in Sarawak primarily focused on the individual level. Recognising and addressing these predictors is essential to developing interventions and support mechanisms that acknowledge the experiences and vulnerabilities of victims, irrespective of gender. Future research should extend its scope to explore the intersection between IPV perpetration and victimisation within the male population.

12. Implementation of Pre-Exposure Prophylaxis (PrEP) for HIV Prevention in Public Primary Healthcare Clinics: Profiling PrEP Users from Two Pilot Sites in Johor, Malaysia

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**13. Sexually Transmitted Disease (STD) Friendly Clinic in Primary Care, Perak, Malaysia—Focusing on Men’s Population, What Does It Cost and Bring?**

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**Introduction:** Sexually transmitted Diseases (STD) is a major public health concern in both resource-rich and limited clinical settings. The main aim of a STD friendly clinic is to screen, identify, educate and treat infected persons and their sex partners. There were only 2 human immunodeficiency virus (HIV) and 5 syphilis cases detected in Ayer Tawar Health Clinic (KKAT) from the year 2018 to 2021, predominantly from male clients.

**Methodology:** Special write up, community service.

**Result:** After utilizing existing resources and manpower, STD Friendly Ayer Tawar Health Clinic was established on 25 March 2022. This service is promoted in the dating apps. A whatsapp hotline +6011-59120520 is used for appointments to reduce waiting time. By October 2023, 135 male clients utilized this service. Ethnicity distribution was predominantly 55.6% Malays, 24.4% Chinese and 19.3% Indians, 0.7% others. 31.3% of the clients were from the age group of 30–34 years old. The highest risk factor identified was Men-Sex-men (MSM) behavior 63.7%. A total of 18 HIV cases were detected. 12 of them are still actively under KKAT follow up and adhered to the anti-retroviral therapy prescribed. Furthermore, 19 syphilis cases have been detected and 11 clients under KKAT follow up. Lastly, there were 2 Hepatitis B, 1 probable Hepatitis C and 5 clients treated clinically for gonorrhea or chlamydia.

**Conclusion:** A community friendly STD clinic has a positive impact in identifying and treating STDs. The health promoting programs should reach out to key populations.


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**134**
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**Introduction:** One of the most frequent sexual dysfunctions in males is ED. There are numerous factors involved. Although it is not life-threatening, it can have a negative impact on men's quality of life.

**Aim:** To determine the prevalence of ED and its relationship to age and race. To describe the TSB pattern and assess the relationship between TSB and ED severity in men attending a primary care clinic.

**Methodology:** Between August and December 2022, we conducted a cross-sectional study of ≥18-year-old men at four primary care clinics in Kuala Selangor, Selangor. Four hundred ninety-seven systematic random sampling respondents completed the validated Malay abridged five-item Malay version of the International Index of Erectile Function (IIEF-5) questionnaire; age and race were recorded. Respondents diagnosed with ED were further given a survey regarding their TSB. Pearson chi-square test was used to determine the relationship between age, race and ED and between ED severity and treatment-seeking.

**Results:** The prevalence of ED was 71% (95% confidence interval (CI); 67%–74%) and increased with age ($p < 0.001$). Race is significantly associated with ED ($p = 0.009$). Out of 305 ED respondents who completed the TSB questionnaire, only 15.7% ever sought treatment for ED ($p = 0.009$). Of the 305 ED respondents who completed the TSB questionnaire, only 15.7% ever sought treatment for ED, with mean interval time between noticing ED and seeking treatment being 7.7 (standard deviation (SD): 6.19) months. 50% self-medicated, 33.3% went to a traditional healer or masseur, and 16.7% to a doctor. 75.7% thought ED was typical with age, 48.5% were uncomfortable with female doctors, and 46.2% were embarrassed to seek treatment. The relationship between ED severity and treatment-seeking was significant ($p = 0.002$). Men with moderate to severe ED were 2.64 times more likely to seek treatment.

**Conclusion:** ED is a highly prevalent disease; however, only a small percentage sought treatment from professional health practitioners causing ED to remain undertreated. Health promotion and routine screening may increase the TSB.

**Introduction:** Recent epidemiological studies showed that the incidence of sexually transmitted infections (STI) among men who have sex with men (MSM) is rising. However, MSM utilisation of STI-related healthcare services was low, and it is unclear what factors contributed to this.

**Aim:** To seek a deeper understanding of the STI healthcare-seeking behaviour among MSM in Malaysian Borneo and to identify the possible factors associated with the utilisation of STI services based on their lived experiences.

**Methodology:** A concurrent mixed-methods study was utilised, including a cross-sectional online survey and qualitative in-depth interviews. STI healthcare-seeking behaviour was measured by the frequency of visits to STI-related health services. Inferential analysis was conducted using the Mann-Whitney U and Chi-square tests. A thematic analytic approach was employed for qualitative data. Both findings were then triangulated to provide a detailed explanation of healthcare-seeking behaviour and its associated factors.

**Results:** A total of 163 respondents were involved in the quantitative strand; 100 of them (61.3%) visited STI services at least once within the past six months. Significant associations were found between perceived behavioural control, STI knowledge and the utilisation of STI services. In-depth interviews were conducted with 15 MSM. For the mixed-methods study, the following themes were extracted: STI risk perception, STI knowledge, attitude, subjective norm, perceived behavioural control towards visiting STI services, and STI-related stigma and shame.

**Conclusion:** The utilisation of STI-related services was generally low among the participants. Only STI-related knowledge and perceived behavioural control were significantly associated with the utilisation of STI services. Based on the lived experience of the participants, seven themes were identified as the determinants of STI service utilisation: namely, sexual risk behaviour, risk perception, clinical condition, attitude towards visiting STI services, social support, stigma and shame, and accessibility and convenience. The qualitative findings were consistent with most of the quantitative findings.

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**Introduction:** As defined by the World Health Organisation, “adolescence” is the time between 10 and 19 years, where trends in their sexual and reproductive behaviour are at higher risk.

**Aim:** Thus, this study aimed to identify the relationships of sexual and reproductive health (SRH) communication, risky behaviour, intimate behaviour and sexual activity, as well as compare these SRH components based on selected socio-demographic characteristics.

**Methodology:** A total of 257 adolescent boys from the Southern region of Sarawak have participated and answered a self-administered questionnaire. Data were then analysed by using a t-test and bivariate correlation.

**Result:** The mean age of respondents was 15.23 ± 1.3 year, ranged from 13 to 17 years old. About 10.5% of these boys have previous sex experiences. Intimate behaviour and communication scores were statistically significant in age group (p < 0.05), but not in risky behaviour and sexual activity (p > 0.05). Risky behaviour found to be statistically higher in the Malay group (5.58 ± 0.9) than in the non-Malay (4.80 ± 1.0); t (255) = 6.39, p ≤ 0.001. The communication, intimate behaviour and sexual activity of different races were of no different. Risky and intimate behaviour were differed in school locality (p > 0.05) and education level. The sexual activity (5.85 ± 0.5) was positively correlated with intimate behaviors (8.18 ± 1.8), r = 0.47, p < 0.001 with strong effect size.

**Conclusion:** Sexual and reproductive health aspects differ in socio-demographic characteristics and should be taken into consideration when identifying the crucial elements for fostering more suitable sexual education among adolescent boys.

17. How Men with Disabilities Create and Reinforce Their Masculinity

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**Introduction:** Dominant discourses of masculinity and disability can challenge masculine status and result in loss of identity. Acquired disability can change men’s abilities, transform their occupational roles, and challenge a man’s self-perception of masculinity. There are significant gaps in the literature; particularly regarding the impact health status has on masculine perceptions within a New Zealand context and the idea of masculinity as an occupation. The objective of this study is to gain understanding of how men with acquired disabilities create and reinforce their masculinity.

**Methods:** Purposeful sampling was used to recruit men who have an acquired disability that has an on-going impact on their lives. Semi-structured interviews were conducted to explore participant’s involvement with masculine role models and experiences in relation to masculinity. A critical discourse analysis approach was undertaken with transcripts analysed in relation to questions derived from the theoretical base.

**Results:** The results of this study identified how the discourses impacted on men living with an acquired disability. Discourse surrounding social structures and access to varying capitals and how these might contribute to or negate change were explored in the ways in which the participants’ identities as men were negotiated and renegotiated within specific social frameworks. These discourses have additionally contributed the knowledge paradigms of each theoretical base.

**Conclusions:** The results of this study reinforce the need for all clinicians, including occupational therapists, to frame terminology and rehabilitation input in terms appropriate to the masculine ideals of individual men. Through the awareness of how men living with disabilities have created and reinforced their masculine identity within all occupational areas of their lives, occupational therapists can work more effectively with men to create more valuable rehabilitation outcomes.

18. A Young Man with Sudden Headache and Vision Loss

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**Introduction:** The cerebrovascular adverse effects of methamphetamine include ischemic strokes, intracerebral haemorrhages and subarachnoid haemorrhages. There are few reports of methamphetamine-induced cerebral venous sinus thrombosis.

**Methods:** We present a case report of a young man with sudden headache and visual loss.

**Results:** A 24-year-old man presented with sudden severe headache, persistent vomiting and sudden vision loss. He had a one-week history of intermittent moderate headaches. There was no fever, rash, oral ulcers, joint pains, loss of appetite, loss of weight or trauma. He had been smoking cigarettes since 14 years old and was currently smoking 1 pack per day. He used inhaled “syabu” (crystal methamphetamine) twice a week and drinking 2 bottles of beers twice a week since 16 years old. Examination showed normal blood pressure, pulse rate, cardiovascular, respiratory and abdominal systems. Neurological examination showed reduced vision to finger counting of bilateral eyes and bilateral 6th nerve palsy. There were no other cranial nerve or peripheral nerve abnormalities. Fundoscopy showed bilateral papilloedema. Muscle tone, power, reflexes and sensory examinations were normal. Babinski was downgoing bilaterally. Blood investigations showed haemoglobin 15.2 g/dL, total white cell 15.3 × 10³/µL, with low platelets 15,000/µL. Renal and liver profiles were normal. Peripheral blood film showed thrombocytopenia. Hepatitis B and Human Immunodeficiency Virus (HIV) tests were negative. Hepatitis C test was positive. A computed tomography cerebral venogram and subsequent magnetic resonance imaging brain showed extensive dural venous sinus thrombosis with venous infarction. Antinuclear antibody and antiphospholipid antibodies were negative. He was finally diagnosed with methamphetamine-induced dural venous sinus thrombosis with venous infarction, and drug-induced thrombocytopenia. He was ventilated for 48 hours for cerebral protection. His headache and visual loss resolved, but the bilateral 6th nerve palsy was persistent. The thrombocytopenia resolved. He was treated with anti-epileptic therapy, heparin and subsequently warfarin for 3 months.

**Conclusions:** This case highlights an uncommon presentation of methamphetamine use.

19. Long Term Efficacy of Phosphodiesterase 5 Inhibitor for Lower Urinary Tract Symptoms, Sexual and Endothelial Function in Patients with Benign Prostate Hyperplasia

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**Introduction:** Phosphodiesterase (PDE) 5 inhibitors induce relaxation of endothelial cells. We reported the efficacy of tadalafil for lower urinary tract symptoms (LUTS), sexual and endothelial function in patients with benign prostate hyperplasia (BPH) by 12 months (Aging Male 21, 2018). To investigate long term efficacy of tadalafil, we monitored this treatment up to 60 months.

**Methods:** 88 BPH patients were enrolled in this prospective study. LUTS parameters including international prostate symptom score (IPSS) and urine flow rate examinations were performed. Their erectile function was evaluated by the sexual health inventory for men (SHIM) and endothelial function was assessed by the brachial-ankle pulse wave velocity (baPWV). These data were obtained at every 12 months after a daily 5 mg tadalafil administration and compared with baseline data.

**Results:** The mean age of 88 patients was 66.7 ± 11.1 years old. IPSS, voiding volume, maximum flow rate and residual urine volume on urine flow rate were 17.6 ± 7.5, 193.9 ± 123.7 mL, 13.8 ± 9.8 mL/sec and 50.1 ± 47.2 mL, and SHIM and baPWV were 7.4 ± 5.7 and 1742.5 ± 393.0 cm/sec before treatments. 14 dropped out (ineffective: 8, no visit: 4, side effects: 2) and 21 discontinued (improved: 7, house-moving: 4, developing another disease: 10). 5 patients are continuing in 12–23 months, 7 in 24–35 months, 15 in 36–47 months, 22 in 48–59 months and 4 in 60 months or more. IPSS were significantly improved from 24 to 48 months. Although there were no change of voiding volume and maximum flow rate, residual urine volume was significantly decreased after the therapy. SHIM was significantly improved, and anti-arteriosclerosis effects evaluated by baPWV were observed.

**Conclusions:** Although a few parameters returned to baseline levels after 60 months, male LUTS, sexual and endothelial function in BPH patients have been improved with long term tadalafil administration.

20. Efficacy and Safety of Transurethral Erbium Laser in the Treatment of Male Urinary Incontinence

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**Introduction:** Stress urinary incontinence is a common complication after radical prostatectomy. The therapeutic effect of erbium laser on female stress urinary incontinence has been confirmed. The purpose of this study is to explore the efficacy and safety of erbium laser in the treatment of male urinary incontinence after radical prostatectomy.

**Methods:** Patients with stress urinary incontinence and longer than 1 year after radical prostatectomy (n = 34) were randomly divided into two groups. Group A: received transurethral erbium laser treatment (once a month, 4 times in total), group B: received pelvic floor muscle training. At 1 and 3 months after the end of the treatment, the number of daily pads and International Consultation on Incontinence Questionnaire-Short Form (ICIQ-SF), urine routine, urine flow rate and Validation of Life Score (VAL) score were evaluated.

**Results:** The number of daily pads (1st month: 0.6 ± 0.2 vs. 1.2 ± 0.7; 3rd month: 0.9 ± 0.2 vs. 1.3 ± 0.6) and ICIQ-SF score (1st month: 10.5 ± 3.8 vs. 13.9 ± 4.7; 3rd month: 7.1 ± 4.9 vs. 11.2 ± 3.7) in group A were significantly lower than those in group B. There were no significant differences in urinary tract infection rate, hematuria rate, urinary flow rate, and VAL score between the two groups.

**Conclusions:** Erbium laser is safe and effective in the treatment of male stress urinary incontinence after radical prostatectomy.

21. A Refugee with Penile Carcinoma: What Can We Do? Malaysia Field Hospital Experience. Malaysia Field Hospital, Cox’s Bazar, Bangladesh

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**Introduction:** Along with non-communicable disease, cancer care is a major challenge for humanitarian healthcare providers. Under reporting of cancer is a major issue in refugees in the absence of programmes covering cancer care for refugees.

**Objective:** To report a case of refugee with penile carcinoma and its management in a humanitarian field hospital setting.

**Methods:** A 67-year-old male presented with a six-month history of increasing growth over glans of penis turned chronic ulcer, complicated with complete urethral obstruction and urethrocutaneous fistula. Severe persistent pain and presence of foul-smelling discharge led him to a medical facility for treatment. Initial treatment with antibiotics for 3 weeks was initiated, before referral to our field hospital. He has no risk factors; circumcised during his teen. Clinically, a large ulcerating fungating lesion, obliterating the glans of penis up to distal shaft of penis was evident with presence of ventral urethro-cutaneous fistula with multiple palpable mobile superficial inguinal lymph nodes bilaterally. Other systemic examination was unremarkable. A diagnosis of penile carcinoma with lymph node metastases was made. Patient underwent palliative partial penile amputation and sampling of superficial inguinal lymph node.

**Results:** Foley’s catheter was removed after two weeks with the new urethral opening functioning as expectant. Surgical specimen sent for histopathological examination at a private hospital financed by our hospital, revealed grade 1 well differentiated squamous cell carcinoma with free margin and sample of lymph nodes were negative for metastases. Patient reviewed at 1 month, 3 months and 6 months revealed good functional outcome with no evidence of local recurrence. No further oncological treatment was instituted.

**Conclusions:** Cancer care is neglected due to delayed presentation and expensive financial burden to host country. Malaysia field hospital experience in managing cancer for refugees includes the principle of doing the best with limited finances and resources that we have.

22. The Perception of Premarital Sex Among Malaysian Young People

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**Introduction:** Malaysia remains socially conservative in matters involving sexuality. As such, there has been minimal exploration of the topic of premarital sex although it has innumerable social, economic and health
repercussions. The concern about premarital relations is real as it leads to the issue of baby abandonment, increased incidence of sexually transmitted infections (STIs), etc. There are gaps in the provision of reproductive health services, including unmet needs for contraception, emergency contraception and abortion. 1. To explore the factors influencing the perception of premarital sex amongst young people, specifically those between 18 to 24 years of age. 2. To study the health-related issues concerning premarital sex such as contraception, sexual education, spread of STIs as well unwanted pregnancies, induced abortion and baby abandonment. 3. To investigate the trends of cohabitation amongst young people.

**Methods:** Survey Design A cross-sectional quantitative research with a small qualitative component was used. Sampling The samples chosen were reached via convenient sampling, collected from an online survey questionnaire and using printed forms. Out of 707 responses, 609 responses were retrieved online whereas only 100 responses were collected in person.

**Results:** The findings show that as a result of significant delays in age at marriage and falling age at menarche, the period during which premarital sex can take place is getting longer. Complications of pregnancy, delivery and puerperium are the main threats and causes of morbidity and mortality among adolescent girls. Family planning can reduce the morbidity and mortality associated with adolescent pregnancies. Most Malaysians aged 18–24 have not engaged in premarital sex.

**Conclusions:** In conclusion, many factors play a role in the perceptions of premarital sex amongst young people. Religion seems to be the most powerful inhibiting factor that allows for the delay of sexual initiation. Generally, there seems to be significant differences in the way men and women view premarital sex.

23. Rezūm® Water Vapour Therapy for Benign Prostate Enlargement (BPE): Experience in Military Hospital

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**Introduction:** Rezūm® Water Vapour Therapy is a novel procedure to reduce the prostate size by releasing sterile water vapour throughout the targeted area, which leads to improvement in lower urinary tract symptoms (LUTS). This procedure is performed in the operating theatre under regional anesthesia. Urinary catheter is inserted post-operatively and will then be removed for trial of void in the clinic, 5 days after the procedure. There has been no report on the use of Rezum® in the management of military patients with BPE.

**Objective:** This study was performed to review the motivation and outcomes of all patients who had undergone Rezūm® in Tuanku Mizan Armed Forces Hospital (TMAFH) since 2022.

**Methodology:** This retrospective case-series study comprised 14 patients who received the treatment from February 2022 until January 2023. Pre-operatively, prostate ultrasonography was utilised to determine prostate size and cystoscopic examination done to assess the suitability for Rezūm®. Baseline digital rectal examination and Prostate Specific Antigen were carried out to exclude any suspicion of cancer. Patients’ LUTS were monitored using International Prostate Symptoms Score (IPSS). Uroflowmetry was also performed to monitor urine flow post procedure.

**Result:** The mean age of the subjects was 70 years (56–80). The reasons for them choosing Rezūm® were, failure of medical therapy (71%), experiencing side-effects from medical therapy (28%), and preservation of sexual function (35%). At 3 months post-operatively, reduction of mean IPSS was from 26 to 7 (54.2%). Mean Quality-of-life (QoL IPSS) scores increased by 67% and mean uroflowmetry maximal flow-rate improvement was 40%. There were minor complications reported including, hematuria (7%) and poor stream (7%). Medical retreatment rate was 7% and no report of procedure-related sexual dysfunction.

**Conclusion:** Rezūm® Water Vapour Therapy had been shown to be a safe and feasible alternative to conventional Transurethral Resection of Prostate (TURP) for the management of benign prostatic enlargement.