

Lifewise


National
Healthcare
Group
Adding years of healthy life

NOV/DEC 2012
ISSUE 42

BE SAFE, NOT SORRY

Learn how STIs
are spread
and the ways
to protect
yourself

Altered States

The many faces
of personality
disorders

ON A NEW FOOTING

How prosthetists
and orthotists
rebuild lives

Turning The Tables on Diabetes

Chan Guan Xiong
and Menaka
Krishnan aren't
letting this illness
get in the way of
a full life



FEASTING SMART • AQUA AEROBICS MADE EASY • HEALTHY HOUSE RULES

PUBLIC FORUM ON PROBLEM DRINKING 2012

24 NOV 2012

9.30AM - 12.30PM

HEALTH PROMOTION BOARD AUDITORIUM

TICKET PRICE: \$8 PER PERSON*

PROGRAMME

0900 - 0930 **REGISTRATION**

0930 - 0950 **GOING BEYOND HAPPY HOURS**

Alcohol & Your Health: The Bare
Facts about Heavy Drinking

1000 - 1020 **ON THE ROCKS**

Understanding Alcoholism and its
Impact on Drinkers and their Families

1030 - 1050 **SOBERING UP**

Treating Alcoholism and the Path
to Recovery

1100 - 1130 **"TEA"TOTALLER BREAK**

1145 - 1215 **CHEERS TO RECOVERY - MY STORY**

1215 - 1230 **Q & A SESSION**

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*Did
You Know
That*

BINGE DRINKING

can lead to alcohol addiction?

Uncontrollable drinking in spite of
negative consequences, physical
withdrawal symptoms and
long-term health problems are
the hallmarks of alcohol addiction.

Come to this forum to find out
how you can make good times
last long after happy hours.

ALL ADDICTIONS HELPLINE

6-RECOVER
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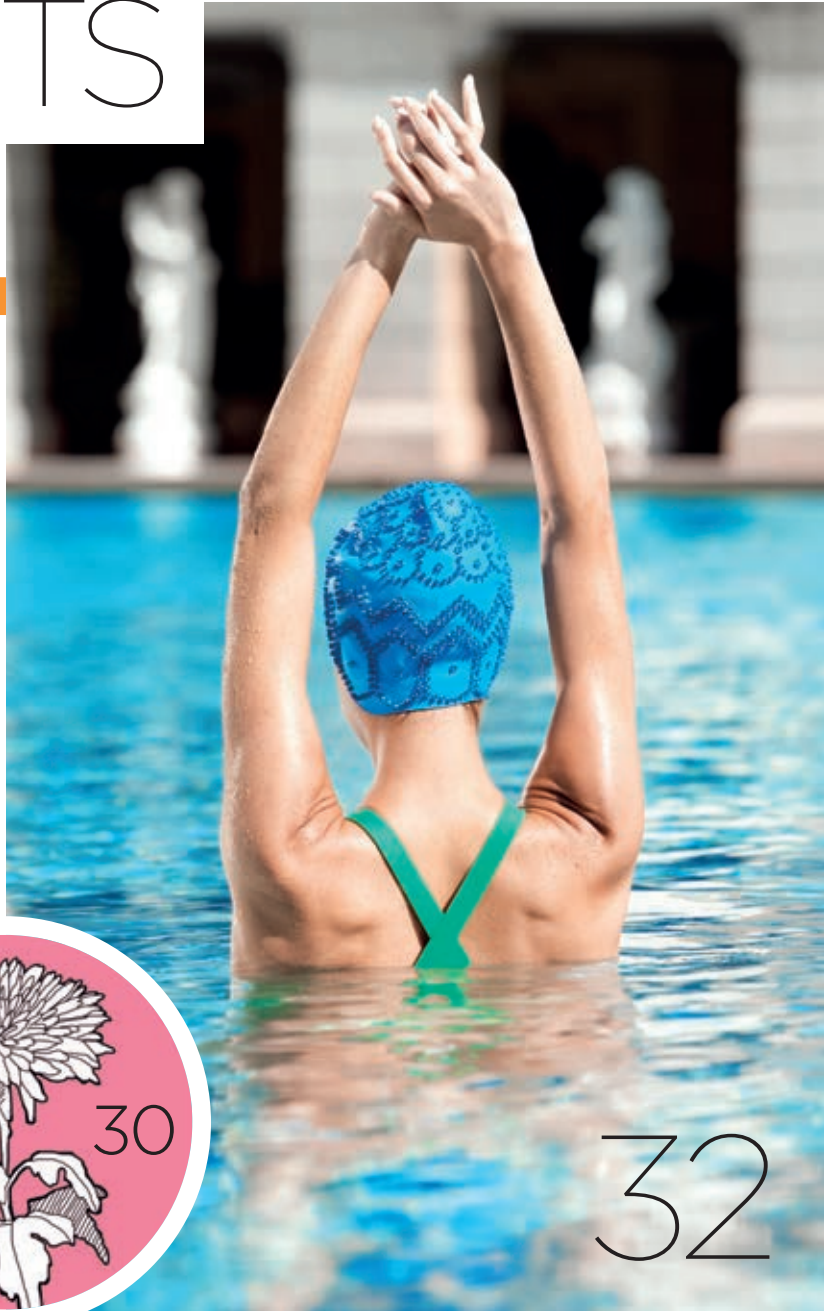
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ON THE COVER: CHAN GUAN XIONG AND MENAKA KRISHNAN

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The Will To Live Well



FESTIVITIES ASIDE, THE END of the year is when many of us pause to take stock of the months past. Has it been a good year? Have we achieved the goals we set out to do? And perhaps, most importantly, have we been keeping in good shape?

As experts will tell you, keeping healthy involves more than just eating well and exercising regularly — and this is especially true for those who are beset by a chronic illness like diabetes. In such cases, keeping well involves more active choices. It requires vigilance, determination and most crucially, a positive mindset to manage the condition, from watching what one eats to keeping to the daily routine of insulin injections or oral medication.

What must be realised is that while diabetes is a long-term condition, it doesn't have to be a death sentence. Nor does it mean sufferers are deprived of a chance to lead normal lives (pg 10). In this issue of *Lifewise*, we speak to three people with diabetes who lead full lives, thanks to a combination of treatment and their will to not be defeated by the disease (pg 14).

This resilience is echoed in the examples of patients of Tan Tock Seng Hospital's Department of Prosthetics and Orthotics, who have been aided in their quest to lead fulfilling lives by a team of experts and the latest in artificial limb technology. We go behind the scenes to find out what it takes to rehabilitate those who have lost a limb and speak to a prosthetist — himself an amputee — who has inspired patients through his positive attitude (pg 17).

A commitment to a healthy lifestyle can however be impeded when there are threats to one's cognitive functioning. And while emotional rollercoaster rides are part and parcel of life, those who suffer from a personality disorder may not be able to seek help by themselves. The onus then is on loved ones and caregivers to take the lead. Learn about personality disorders, how to identify them and where to seek assistance in our feature on page 23.

On a lighter note, find out how you can enjoy the rest of the year in a healthy and fulfilling way. It's certainly the time to indulge — but it doesn't have to be in an unhealthy manner. *Lifewise* shows you how to enjoy your favourite festive foods without busting the calorie/cholesterol counter (pg 38). See also how you can ease yourself back into a fitness regime with aqua aerobics (pg 32). And in the spirit of giving, get inspired by two individuals who, in helping the elderly, have picked up valuable lessons in ageing well (pg 28).

So as we cross into 2013, keep in mind the popular adage that "the greatest wealth is health" and remember that you will continue to reap the benefits yourself as you keep Adding Years of Healthy Life.

THE EDITORIAL TEAM



MENTAL HEALTH

PEDAL THAT ANXIETY AWAY

Feel anxious? Working those muscles may help chase away the butterflies in your stomach.

In a recent study, participants engaged in either a 30-minute period of rest or 30 minutes of cycling over two days. A survey designed to measure anxiety levels was given before and after each activity. They were then given a series of pleasant pictures of babies and puppies, unpleasant violent images, and neutral images including those of cups and furniture. Their anxiety levels were then measured a final time.

The researchers found that the 30 minutes of exercise or quiet rest were equally effective at reducing anxiety levels. However, the anxiety levels of those who had rested rose back to their initial levels while those who had exercised maintained their reduced levels.

“If you exercise, you’ll be better able to maintain that reduced anxiety when confronted with emotional events,” said researcher J. Carson Smith, Assistant Professor at the Department of Kinesiology of the University of Maryland School of Public Health in the United States. The findings were published in the journal *Medicine and Science in Sports and Exercise*.

“RESEARCH SUGGESTS THAT EXERCISE HELPS TO BUFFER THE EFFECTS OF EMOTIONAL EXPOSURE”

ONCOLOGY

Sobering News

Some bad news for those who love to drink wine as they dine: Just one glass of that drink a day can trigger an increased risk of breast and other cancers.

An international team of scientists who pooled data from previous studies involving more than 150,000 people observed detectable increases of cancer cases involving the mouth, throat, gullet and breast among those who drink a glass of alcohol daily. In just one year, light drinking caused 24,000 deaths from oesophageal cancer, 5,000 from oral and 5,000 from breast cancer worldwide, according to the study which was published in the *Annals of Oncology*.

The study was carried out because most research has shown that alcohol intake, especially heavy drinking, increases the risk of a number of cancers in the upper digestive tract. Even drinking low to moderate levels of alcohol — defined as three drinks a day or fewer — is associated with an increase in the risk of breast cancer.

However, the International Scientific Forum on Alcohol Research cautioned that the findings should not be taken as conclusive. Among other things, the researchers did not

adjust their estimates to take into account lifestyle habits, including smoking. The Forum also noted that the scientists did not comment on the healthy effects of light drinking — such as a reduction in the risk of much more common diseases, especially cardiovascular diseases, and a longer lifespan.



EXERCISE

THAT DANGEROUS BOUNCE ...

IT may be a fun alternative to the TV couch but that trampoline can be bad for your child's health.

In the United States, a staggering 98,000 trampoline-related injuries occurred in 2009 resulting in 3,100 hospitalisations. The most common trampoline injuries include sprains, strains and bruises while the more dangerous mishaps affect the head and spine. Certain moves such as somersaults and flips can cause spinal injuries that can lead to permanent health problems, according to the American Academy of Pediatrics (AAP).

Researchers say 75 per cent of all trampoline injuries happen when a group of people are jumping together. And the younger the child, the more serious the injury is likely to be since the bones of children are softer.

"It's the whole bouncy and fun aspect that makes parents think these devices are safe," said Dr Michele Labotz, a sports medicine physician for InterMed in Portland, Maine, and lead author of an updated policy statement on the trampoline. "And they think because the trampoline has this soft mat, kids can't feel the impact. But they do," he said. The statement was published in *Pediatrics*, an AAP publication.



MEDICINE

When Painkillers Hurt

“PEOPLE CAN END UP IN A “VICIOUS CYCLE” WHERE THEIR HEADACHES GET WORSE, SO THEY TAKE MORE PAINKILLERS WHICH IN TURN MAKE THE HEADACHES EVEN MORE SEVERE

Taking too much painkillers may give you a real headache, literally. One in 50 people who suffer from headaches could be doing so because of painkiller overuse, according to a watchdog body in the United Kingdom. "Medication overuse headaches" can come from taking aspirin, paracetamol and non-steroidal anti-inflammatory drugs (such as ibuprofen) on more than 15 days a month; or opioids, ergots, triptans (a group of anti-migraine medicines), or combination analgesic medications on at least 10 days per month, said the National Institute for Health and Clinical Excellence (NICE).

Professor Martin Underwood of Warwick Medical School, who led a NICE review panel, said people can end up in a "vicious cycle" where their headaches get worse, so they take more painkillers, which in turn make the headaches even more severe.

Many of those who found themselves trapped in this vicious cycle started out using painkillers to relieve an everyday, tension-type headache or migraine. NICE recommends other options for treating headaches, including acupuncture for patients susceptible to migraine and tension headaches, reported the *Medical News Today* portal.

PHOTOS: ISTOCKPHOTO, CORBIS IMAGES

calendar NOV/DEC



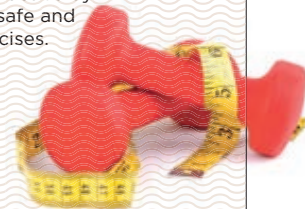
LIVING RIGHT WITH DIABETES PUBLIC FORUM 2012

Diabetes is a serious chronic medical condition and is a growing concern in Singapore. Awareness is the key to the prevention of this disease. Join diabetes professionals in understanding more about the different types of diabetes and how to manage them. Learn how to adopt healthy eating habits and be physically active by engaging in safe and suitable exercises.

DATE
10 Nov 2012
TIME
12pm - 4pm

VENUE
Tan Tock Seng Hospital, Theatre at Level 1

FEE
\$4.00 (with blood pressure, weight/height and glucose screening) or \$6.00 (inclusive of cholesterol screening)
Please call 6496 6914 to register.



SKIN CONCERNS ACROSS THE AGES (conducted in mandarin)

This Mandarin public forum will provide a better understanding of the common skin problems that people of all ages face. Topics to be covered by NHG doctors include eczema, allergy, hair loss and tips for blemish-free skin.

DATE
17 Nov 2012
TIME
2.30pm

VENUE
NTUC Centre Auditorium, Level 7, 1 Marina Boulevard

FEE
Free (includes goodie bag and light refreshments)
Please visit <http://www.nsc.gov.sg/showcme.asp?id=136> or call 6350 8437 to register.

ORTHOPAEDICS

ENOUGH TO MAKE YOUR JAW DROP

Check your dental records to know whether you are likely to succumb to a bone-thinning disease as age catches up with you.

Dentists at Manchester University in the United Kingdom are pioneering a technology called Osteodent that can detect those at risk of osteoporosis by looking at dental scans years before the condition develops, reports the *Daily Mail* newspaper.

Osteoporosis is a disease in which the density of bones is reduced, making them weak and more brittle. Currently, a diagnosis of one's susceptibility to the disease is only made after a bone fracture. However, a British study has shown that bone deterioration in the jaw — which is routinely X-rayed prior to dental treatment — can also reveal if bone deterioration is occurring in other parts of the body.

Using the results of the study, dentists have developed software that can immediately assess an individual's risk of osteoporosis, which in turn alerts the patient to whether they need to be referred to a specialist for further investigation.

"Dentists are well-positioned to provide such a service as they see patients regularly and routinely perform X-ray examinations," said Hugh Devlin, Professor of Restorative Dentistry at Manchester University and co-developer of the new technique.

“**DENTAL SCANS CAN REVEAL THE RISK OF OSTEOPOROSIS YEARS BEFORE THE CONDITION DEVELOPS**”

NEUROLOGY

Useless ginkgo?

Taking ginkgo biloba supplements does not improve memory, attention spans or problem-solving ability in healthy individuals.

Researchers from the University of Hertfordshire in the United Kingdom say they found "zero impact" on cognitive function, regardless of the age of the people, the dose taken, or the length of time taking the supplements, reported the *New York Daily News*.

Ginkgo biloba — a Chinese herb — has long been marketed as a dietary supplement to treat blood disorders and more specifically, to improve memory both for healthy individuals and also for those trying to ward off Alzheimer's disease. It has been used extensively in traditional Chinese herbal medicine for thousands of years.



MENTAL HEALTH

Are You Nomophobic?

You just can't bear to turn off your mobile phone even for a second. You worry about your mobile running out of power. And you can't even go to the loo without your handphone.

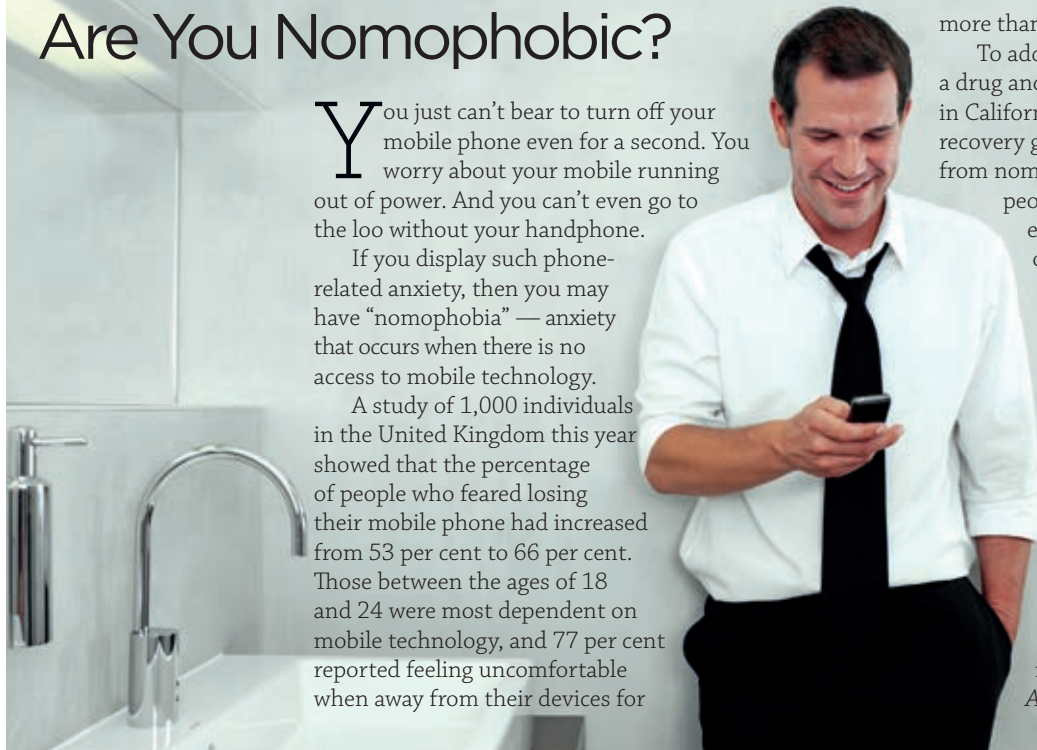
If you display such phone-related anxiety, then you may have "nomophobia" — anxiety that occurs when there is no access to mobile technology.

A study of 1,000 individuals in the United Kingdom this year showed that the percentage of people who feared losing their mobile phone had increased from 53 per cent to 66 per cent. Those between the ages of 18 and 24 were most dependent on mobile technology, and 77 per cent reported feeling uncomfortable when away from their devices for

more than a few minutes.

To address this latest addiction, a drug and alcohol recovery centre in California has founded the first recovery group for people suffering from nomophobia. The group helps people recognise the symptoms, explore the psychological roots of their vulnerability and master techniques to regain control of their lives.

"We want them to understand that people won't forget you just because you are not reachable for a few days. You can get information later and still live a happy life," said the group's founder Dr Elizabeth Waterman of Morningside Recovery Center, in an interview with the *Los Angeles Times*.



PHOTOS: ISTOCKPHOTO, CORBIS IMAGES

NUTRITION

FAST FOOD FEASTING — THE FINE DINING WAY

IF you want to “have your cake (or burger) and eat it too”, try having your meal at a fast-food restaurant which offers soft lighting and mellow jazz.

Researchers from Cornell University and the Georgia Institute of Technology in the United States found that softening the lighting and music in fast-food restaurants didn't change what people ordered, but it caused them to eat 18 per cent less — 775 calories instead of 949. According to their findings, which were published in the journal *Psychological Reports*, they also rated the food as more enjoyable. Their study involved about 60 diners, who



were made to sit randomly within one of two sections at a fast-food restaurant. The first was left as is, with bright lights, colours and loud music, while the second area underwent a makeover that included soundproofing, dimmed lights, plants, candles, white tablecloths and jazz music. In addition to lingering a little longer, diners in the second area also left more food on their trays and gave higher ratings to their meal.

calendar NOV/DEC



PROBLEM GAMBLING FORUM 2013

Do you wish to help someone in your family with his or her problem gambling? Learn how to reclaim your life and rebuild relationships in this forum by the National Addictions Management Service (NAMS).

DATE

26 Jan 2013

TIME

9.30am - 12.30pm

VENUE

Health Promotion Board, Level 7 Auditorium, 3 Second Hospital Avenue, Singapore 168937 (Nearest MRT: Outram)

FEE

\$8

Please visit www.nams.sg to register.

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NUTRITION

THUMBS UP FOR LOW-CALORIE YOGHURT

Low-calorie yoghurt is not just for weight-watchers; it may also lower your risk of high-blood pressure.

Long-term yoghurt eaters have been found to have a lower systolic blood pressure, as well as a diminished risk of developing high-blood pressure, according to a 15-year study presented at the American Heart Association's High Blood Pressure Research 2012 Scientific Sessions. Systolic blood pressure is the measure of how powerful the blood is against the arterial walls when your heart is beating. It is the top number in a blood pressure reading.

The study followed more than 2,000 volunteers who consumed yoghurt regularly. Results showed that 31 per cent of volunteers were less likely to develop high-blood pressure when at least two per cent of their daily caloric intake consisted of yoghurt. That amounted to at least one 175ml cup of low-fat yoghurt every three days. Their systolic blood pressure also rose less than those who did not eat yoghurt. The results are in line with the conventional wisdom that low-fat dairy products reduce blood pressure.

“**LONG-TERM YOGHURT EATERS HAVE BEEN FOUND TO HAVE A LOWER SYSTOLIC BLOOD PRESSURE**”

WELLNESS

Never on a Monday

THE infamous “Monday blues” is actually a myth.

While we certainly feel happiest on Saturdays and Sundays, most of us don't feel much bluer on Monday than we do on Tuesday, Wednesday or Thursday.

A poll involving some 340,000 subjects showed that while most people ranked their Monday mood as being a bit blue, their mood actually wasn't much worse on Monday than it was on the rest of the weekdays (excepting Friday).

Even with Wednesday being touted as the “hump day” (after which the weekend is popularly regarded as imminent), there weren't any spikes in good feelings midweek. And while people generally agreed that Friday seemed like a great day (to party), they still couldn't wait for the arrival of Saturday and Sunday.

“Friday is probably a day when you get a combination of work and positive stuff and it is not surprising that it came in somewhere between the levels of the weekend and Monday through Thursday,” said Professor Arthur Stone, vice-chair in the Department of Psychiatry and Behavioral Science at Stony Brook University in New York. He is also the author of a study about days of the week and the associated mood patterns in the *Journal of Positive Psychology*.

Prof Stone also found that married people like weekends a bit more than their divorced counterparts, and that younger people feel a bigger boost in mood over the weekend than older people.



MEDICAL NEWS

Suffer the second-hand smokers

A person who is regularly exposed to second-hand smoke may have trouble remembering things. A British study found that non-smokers who were exposed to second-hand smoke fared 20 per cent worse in memory tests than another non-smoking group did. Smokers performed the worst in memory tests. They forgot 30 per cent more than those who were not exposed to secondhand smoke, reported the journal *Addiction*. A person who has problems with “prospective memory” may end up forgetting things such as a meeting with friends or having to take his/her medication.

While the study doesn't prove that smoke damages memory, it is still a cause for concern, the researchers say. “According to recent reports by the World Health Organization, exposure to second-hand smoke can have serious consequences on the health of people who have never smoked themselves, but who are exposed to other people's tobacco smoke,” said Dr Tom Heffernan, a researcher at the Collaboration for Drug and Alcohol Research Group at Northumbria University. “Our findings suggest that deficits associated with second-hand smoke exposure extend to everyday cognitive function.”



“**THE DEFICITS ASSOCIATED WITH SECOND-HAND SMOKE EXPOSURE EXTEND TO EVERYDAY COGNITIVE FUNCTION**”

MENTAL HEALTH

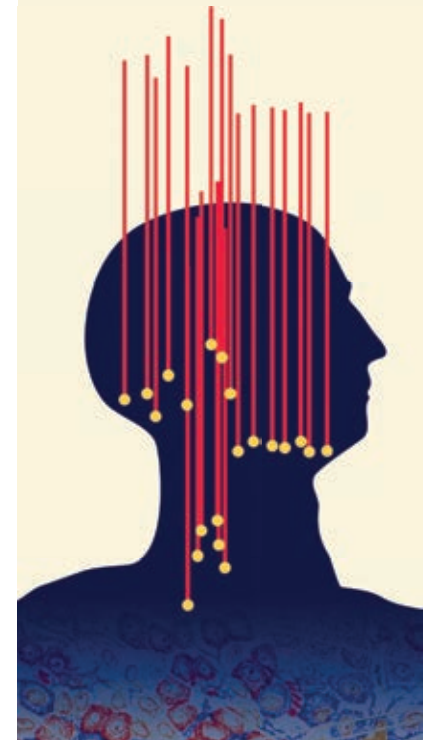
‘Pin and Prick’ help

Patients of Parkinson's disease may benefit from acupuncture treatment.

Parkinson's is a disorder of the brain that leads to shaking and difficulty in coordination. Researchers from the University of Seoul have found that acupuncture seems to reactivate parts of the brain that have become deactivated. Their study was reported in the *CNS Neuroscience and Therapeutics Journal* in September.

In the study involving 12 healthy subjects and 12 Parkinson's patients, scientists found that acupuncture encourages better neural responses in these brain regions: the basal ganglia, putamen, thalamus, caudate and substantia nigra — all associated with Parkinson's.

In a separate study published in the *Journal of the American Medical Association*, scientists have found that acupuncture may help in the treatment of chronic pain.



DERMATOLOGY

VIRUS TO ACNE RESCUE

A harmless skin virus may emerge as an effective weapon against acne.

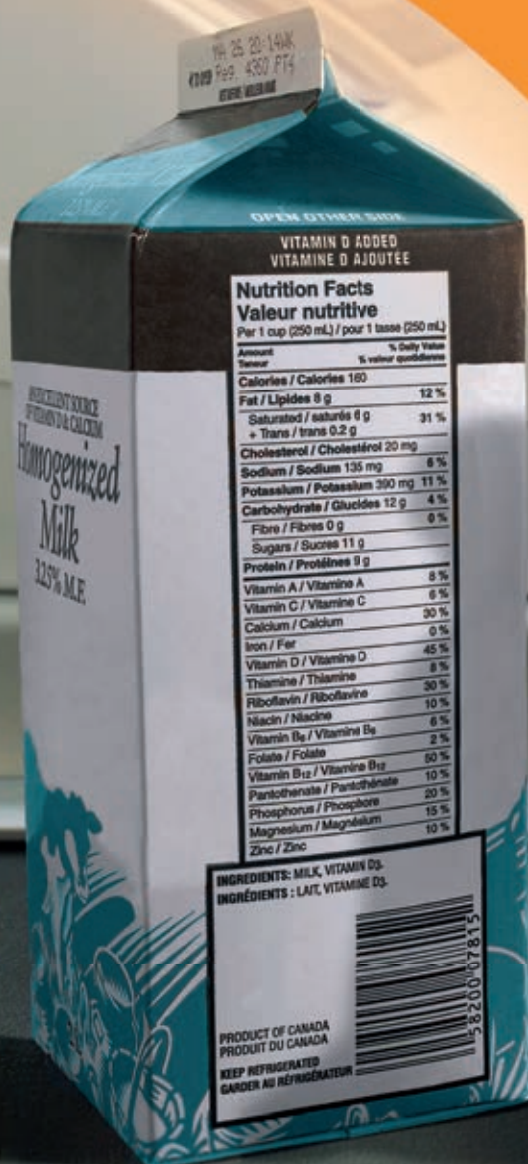
The virus, called a phage, is naturally built to target and kill bacteria that causes acne. Experts at the University of California, Los Angeles (UCLA) and the University of Pittsburgh in the United States found 11 different versions of the virus that had this power.

Acne is caused when hair follicles become blocked with an oily substance called sebum, which the body produces to stop the hair and skin from drying out. Bacteria that live on the skin can then contaminate and infect the plugged follicles. Phages appear to help counteract this. And unlike antibiotics, which kill many types of bacteria including “good” ones that live in our gut, phages are programmed to target only specific bacteria.

Co-researcher Dr Jenny Kim, director of the UCLA Clinic for Acne, Rosacea and Aesthetics, said: “Antibiotics such as tetracycline are so widely used that many acne strains have developed resistance. Drugs like Accutane, while effective, can produce risky side effects, limiting their use.” Phages on the other hand could potentially offer a tailored therapy with fewer side effects, the experts told *mBio*, the open access journal of the American Society for Microbiology.

(TAKE CONTROL)

Keeping DIABETES in check





BETTER TREATMENT PLANS AND MORE PATIENT EDUCATION MEAN DIABETICS CAN LEAD NORMAL LIVES. BUT THE NEED FOR THEM TO MANAGE THEIR CONDITION IS STILL PARAMOUNT, SAY DOCTORS.

BY NIRMALA SIVANATHAN

IN CONSULTATION WITH **DR LIEW HUI LING**
REGISTRAR // DEPARTMENT OF ENDOCRINOLOGY
AND **DR ABDUL SHAKOOR S K**

CONSULTANT // DEPARTMENT OF ENDOCRINOLOGY // TAN TOCK SENG HOSPITAL
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SENIOR NURSE CLINICIAN // JURONG POLYCLINIC
AND **MS WINNIE POH SIEW HUAY**

NURSE CLINICIAN (CARE MANAGEMENT) // HOUGANG POLYCLINIC



IN MANY COUNTRIES

WORLDWIDE, the threat of diabetes is growing, and

Singapore is no exception. According to the *Yearbook of Statistics Singapore 2012*, the disease currently affects nearly 11.3 per cent of the population. And this number could rise to 15 per cent — or one million adult diabetics — by 2050. The reason for this? An ageing population and one that is getting increasingly overweight.

Doctors both in Singapore and around the world have also seen an increasing number of young adults and children developing Type 2 diabetes, a form of the disease that is typically diagnosed in older adults. Type 2 diabetes is caused by insulin resistance.

“What this means is that cells in the diabetic patient’s body are unable to utilise the insulin produced by the body efficiently,” explains Dr Abdul Shakoor S K, Consultant with the Department of Endocrinology at Tan Tock Seng Hospital (TTSH). Insulin — a hormone produced by the pancreas — helps to bring down blood sugar levels after a meal by converting excess glucose into glycogen which can then be stored by the body. Insulin also helps the body to use up this excess sugar. Both these processes may be impaired in people with Type 2 diabetes.

People with a family history of diabetes are at a high risk of developing Type 2 diabetes themselves. Other risk factors include obesity, age and a sedentary lifestyle. Your ethnic background can also play a part. According to Dr Shakoor, the prevalence of Type 2 diabetes is higher among the Malay and Indian populations, as compared to the Chinese population. A recent survey showed that 15.8 per cent of Indians, 11.3 per cent of Malays and 8 per cent of Chinese in Singapore have diabetes. “However, the prevalence of diabetes among all ethnic groups including the Chinese population is increasing due to changes in lifestyle and increasing obesity,” says Dr Shakoor.

A family history of diabetes and genetics are also risk factors for Type 1 diabetes, which is diagnosed mostly in children and younger adults, but the contribution of genetic factors resulting in Type 1 diabetes is much less compared to Type 2 diabetes. Type 1 diabetes is caused when the pancreas has completely stopped producing insulin. It is managed through the use of daily insulin injections. Although Types 1 and 2 diabetes both develop due to the lack of insulin, the causes for the two kinds are different. Type 1 diabetes occurs when the pancreas stops producing insulin, while Type 2 diabetes occurs when the pancreas does not produce sufficient amounts of insulin.

Another type of diabetes — referred to as gestational diabetes — can also occur in pregnant women who don’t have a history of the disease. Caused by pregnancy hormones that can block insulin from bringing down blood sugar levels, gestational diabetes is referred to as a “pre-diabetic state”. Women who develop this

THE PREVALENCE OF DIABETES AMONG ALL ETHNIC GROUPS IS INCREASING DUE TO CHANGES IN LIFESTYLE AND INCREASING OBESITY

DR ABDUL SHAKOOR S K, CONSULTANT WITH TTSH'S DEPARTMENT OF ENDOCRINOLOGY

(TAKE CONTROL)

kind of diabetes are more likely to develop Type 2 diabetes at a later stage in life.

It's Complicated

Diabetes itself is not fatal. However, the complications caused by untreated diabetes — when sugar levels are allowed to build up in the blood over a period of time — often are, says Dr Liew Hui Ling, Registrar of the Department of Endocrinology at TTSH. These complications include chronic kidney disease which is when the kidneys stop working and gradually lose the ability to remove waste and excess water from the body. According to the National Health Survey 2010, diabetes is one of the top causes of kidney failure and accounts for about 60 per cent of new kidney failure cases requiring dialysis in Singapore.

Damage can also be done to the heart, blood vessels, eyes and nerves, leading to heart attacks, strokes, and limb amputations. "What is worrying is that most of the complications do not produce any signs in the early stages in the diabetic patient," says Dr Liew.

The good news is that most of these can be prevented with a comprehensive treatment plan. "All it takes is regular medication, blood sugar monitoring, an active lifestyle, healthier food choices, weight management, regular foot care, regular eye screenings and regular visits to the doctor," says Dr Liew.

HOW TO MONITOR BLOOD SUGAR LEVELS

Illness and stress, in addition to the food that you eat, can affect blood sugar levels. This, in turn, can affect a diabetes management plan. That is why doctors

stress the importance of monitoring blood sugar levels at home to diabetics.

Fortunately, this is made easy by using a device called a glucometer which measures the glucose level in the blood, and which provides essential information on whether medication and lifestyle

are keeping the blood sugar in a healthy range.

The optimal blood sugar level for a non-pregnant diabetic person ranges from 6.1 to 8mmol/L (110 – 144mg/dL) before meals. Optimal blood sugar levels two hours after a meal range from 7.1 to 10mmol/L (128 – 180mg/dL).

Dealing with the Diagnosis

At polyclinics, Care Managers help patients to manage their diabetes depending on each patient's needs. According to Ms Ng Soh Mui, a Senior Nurse Clinician at Jurong Polyclinic, this begins when a person is newly diagnosed with the disease.

"The Care Manager will start by assessing their emotional state and readiness to talk about their health," Ms Ng explains.

Care Managers also teach patients to better manage their condition and make informed decisions about their treatment plan. Patients are given information about the disease, the prevention and management of complications, exercise, diet and medication. They are also trained to use devices such as blood glucose meters and insulin pens. Care Managers also monitor the patients' health outcomes and coordinate their care by

ensuring that they undergo yearly screenings for diabetes-related complications.

"But ultimately, patients themselves play a significant role in the lifelong management of their diabetes by taking charge of their lifestyle and monitoring their blood sugar regularly," says Dr Liew. "There is no cure for diabetes. But it can be managed effectively."

Managing the disease can be done through lifestyle changes by eating right, being active and practising weight control.

““
**PATIENTS THEMSELVES
PLAY A SIGNIFICANT
ROLE IN THE LIFELONG
MANAGEMENT OF
THEIR DIABETES BY
TAKING CHARGE OF
THEIR LIFESTYLE**

DR LIEW HUI LING, REGISTRAR OF THE DEPARTMENT
OF ENDOCRINOLOGY



In Type 1 diabetes and the later stages of Type 2 diabetes, insulin injections might be needed. Bariatric surgery, such as gastric band or gastric bypass procedures, might also be recommended to help severely obese patients control their weight.

In dealing with the diagnosis mentally and emotionally, Dr Robert Isaacs, a Senior Resident Physician at the General Psychiatry Department at the Institute of Mental Health, says that the way to live well with diabetes is to understand what it is, what it means and what needs to be done to monitor the condition.

"Having diabetes is a significant issue, but it certainly does not need to be a death sentence as some people think," Dr Isaacs says. "People who take control of their situation and who make positive, effective changes will feel empowered."

The Diabetic Diet

One of the most common myths surrounding diabetes is that eating too much sugar causes diabetes. "This is simply not true," says Dr Shakoor. "If you are healthy and diabetes-free, you will not have a high blood sugar level, even if you have been taking in more sugar. However,



unattended, low blood sugar levels can lead to fainting, seizures and even coma.

According to Dr Shakoor, people with diabetes should include starchy carbohydrates in each meal, but limit the portion size. They are also advised to switch to low glycemic index (GI) carbohydrates such as brown rice, wholegrain bread and porridge. Low GI carbohydrates have less of an impact on blood sugar levels. According to the Health Promotion Board, low GI foods take a slower time to raise blood glucose levels and thus are healthier for diabetic patients to consume.

The intake of foods high in saturated fat and salt — such as butter, red meat, full fat milk and salty processed foods — should be reduced. Better choices include skimmed milk, low-fat yoghurt and oily fish such as salmon or mackerel.

Diabetics are also encouraged to limit their alcohol intake to a maximum of two units a day for women and three units a day for men. One unit of alcohol is 10ml. And if you think so-called diabetic foods can help, think again. “These so-called diabetic foods and sweets are expensive, offer no benefits, and have a similar fat content to ordinary food,” says Dr Shakoor. **uw**

diabetics should not consume an excessive amount of sugar as this will worsen diabetes-related complications.”

Diabetics should avoid skipping meals so as to keep their blood sugar levels stable. Not eating regularly alters the balance between food intake and insulin production and utilisation, causing blood sugar levels to eventually drop. A plummeting blood sugar level can cause anxiety, confusion, dizziness, drowsiness, speech difficulties, sweating and tremors. And if left

Diet Guidelines

POINTERS ON A DIABETIC DIET FROM
DR ABDUL SHAKOOR S K, A CONSULTANT
WITH THE DEPARTMENT OF ENDOCRINOLOGY
AT TAN TOCK SENG HOSPITAL

GOOD

- Wholegrain pasta and bread
- Porridge
- Low-fat milk and yoghurt
- Salmon
- Mackerel
- Grilled and/or steamed dishes
- Fruits and vegetables

BAD

- Butter and other saturated fats
- Meat with the skin on
- Full-fat milk
- Fried food
- Carbonated drinks
- Red meat
- Creamy pasta sauces



FOOT SORES: WHAT'S THE WORRY?

Poorly-controlled diabetes can lead to a higher risk of infections, inadequate wound healing and nerve damage due to poor blood circulation. In poor blood circulation, less oxygen is supplied to the skin; this means skin breakages and lesions heal poorly.

If left untreated, limb amputation or death caused by systemic sepsis (blood poisoning) can occur.

TIPS ON FOOT CARE FROM HOUGANG POLYCLINIC'S NURSE CLINICIAN (CARE MANAGEMENT) MS WINNIE POH SIEW HUAY

▶ **Cultivate good hygiene.** Wash your feet daily and dry them well. Pay attention to the areas between the toes. Use this time to check your feet for cuts, redness, blisters or any watery discharge.

▶ **Use the right shoes.** Never go barefoot, even when you are at home. Wear a pair of cotton socks or stockings with your shoes. Socks and stockings should not be too tight. Avoid open-toed slippers.

▶ **Move your feet around.** Perform simple foot exercises daily by rotating and flexing your feet up and down.

▶ **Take care.** Do not soak your feet in very cold or hot water. Avoid acupuncture, massage machines and foot reflexology as these may break your skin. Go for a diabetic foot screening at least once a year.

Changes for the BETTER

LIFEWISE FINDS OUT HOW LIFESTYLE TWEAKS HAVE ENABLED THREE DIABETIC PATIENTS TO MANAGE THEIR CONDITIONS AND LEAD HEALTHIER LIVES.

BY NIRMALA SIVANATHAN AND AUDRINA GAN

Chan Guan Xiong 19, STUDENT

→ **WHEN HE WAS 11 YEARS OLD,** Guan Xiong's parents noticed that their younger child was not being his usual self. He complained of being frequently thirsty and needed to visit the washroom more often than usual. He was also less active than he had been previously.

Worried, his parents took him to Kandang Kerbau Women's and Children's Hospital. A battery of tests later, his doctors broke the unhappy news.

Guan Xiong had Type 1 diabetes. His pancreas — the organ responsible for producing insulin — had stopped functioning and his blood sugar levels were at 17.3mmol/L, more than double the normal level of 6 to 7mmol/L for a healthy person. Insulin is the hormone responsible for regulating carbohydrate absorption.

Guan Xiong was immediately warded and the doctors tried to stabilise his blood sugar levels. Over the next month, the hospital conducted classes for his parents so they would be able to look after him. They were taught to measure Guan Xiong's blood sugar levels at home, monitor his carbohydrate intake and administer the

insulin injections which he would need to take after every meal.

Today, Guan Xiong's diabetes is under control, with his blood sugar level in the optimal range. He still has to self-administer insulin shots three times daily, to regulate his blood sugar levels. He's also careful to watch what he eats as skipping or delaying meals — or even changing the amount of food he eats — can cause problems with his blood sugar control.

"I've gotten used to facing my diabetes every day," says the third-year Accountancy student at a local polytechnic. "But it wasn't always this way."

He recalls a time when he was in Secondary Two that he grew resentful towards his illness. "I remember

asking myself: Why can't I be normal? Why do I need injections every day?" he says.

"I was so sick of it." So he started skipping injections. Luckily, his doctors noticed the spike in his blood sugar levels and sent him for counselling. "I learnt to adapt and deal with my diabetes. I've learnt to live with it."

These days, Guan Xiong lives a relatively normal life. Other than the need

“**I LEARNT TO ADAPT AND DEAL WITH MY DIABETES. I'VE LEARNT TO LIVE WITH IT**”





Menaka d/o Krishnan

55, ASSISTANT NURSE



WHEN MENAKA D/O KRISHNAN

WAS DIAGNOSED with Type 2 diabetes six years ago during a routine health screening, it underscored the need for her to start living healthier. She had already been diagnosed with hypertension and high cholesterol — and this was the final straw.

The hectic nature of her job meant that she didn't get much time to exercise. "When I came home from work, I didn't feel like doing anything," says Menaka who is an Assistant Nurse at Tan Tock Seng Hospital.

Her diagnosis changed that. Now, she tries to incorporate more exercise into her life. She goes for weekly walks around her neighbourhood. She also changed her diet by cutting down on carbohydrates and sugary foods. Today, Menaka has her diabetes under control with a blood sugar level of between 6 and 7mmol/L, down from 14mmol/L when she was first diagnosed. Her cholesterol and blood

pressure levels are also under control.

Menaka herself isn't quite sure what brought on her diabetes. A family history of diabetes is one of the primary risk factors when it comes to the condition but neither of her parents suffered from it. However, she has struggled with her weight most of her life — obesity can be a

contributing factor to the development of diabetes. "My favourite food is chocolate," Menaka admits. "But I eat it in moderation these days." Instead, she has started eating healthier by switching to brown rice and increasing the amount of vegetables in her diet.

One vegetable she has started taking more of is bittergourd. "I heard that it can help with diabetes," says Menaka, who is divorced. In fact, a 2008 study published in the *Journal of Chemistry and Biology* found that compounds in bittergourd extract can reduce blood sugar levels in humans.

Having taken these measures, Menaka has gotten back on track with regard to her health. "I don't believe diabetes is a death sentence," says Menaka. "With the right actions, you can lead a normal life."



I DON'T BELIEVE DIABETES IS A DEATH SENTENCE. WITH THE RIGHT ACTIONS, YOU CAN LEAD A NORMAL LIFE

for daily insulin shots, he is able to indulge in regular teenage pursuits such as playing computer games, listening to music and bowling. He even enjoys the occasional game of badminton with his family — though he takes care not to tire himself out. Too much strenuous activity will cause his blood sugar levels to drop, resulting in light-headedness. And as long as these simple rules are observed, the condition doesn't interfere with his daily life.

"I don't feel restricted by my diabetes at all," says Guan Xiong. "My advice to young diabetics is that if you take care, you can live your life like any other person."



PHOTOS: HONG CHEE YAN CLOTHES: ON GUAN XIONG: SPORTS JACKET, WHITE PRINTED T-SHIRT AND PANTS FROM PUMA. ON MENAKA: POLO T-SHIRT FROM UNIQLO, JACKET FROM PUMA.

Tan Hong Chee 66, SECURITY GUARD

→ **WHEN TAN HONG CHEE WENT TO THE POLYCLINIC** for his regular health screening five years ago, he was diagnosed with pre-diabetes. His blood sugar level was 9.5mmol/L, which exceeded normal levels of between 6 and 7 mmol/L.

Pre-diabetes is a condition in which blood glucose levels are higher than normal but lower than those with full-blown diabetes. This condition is sometimes called impaired fasting glucose (IFG). People with pre-diabetes are at increased risk of developing Type 2 diabetes. But by making a few lifestyle changes — such as eating well and exercising regularly — and taking oral medication, the condition can be managed effectively.

“I did not experience giddiness, fatigue or other symptoms associated with diabetes. I just took the news calmly,”

recalls Hong Chee. Fortunately, he did not need to be put on medication and took the doctor’s advice to reduce his sugar and carbohydrate intake.

Apart from encouraging him to consume less rice, his wife also switched to cooking brown rice when she prepares meals for the family on weekends. When they dine out on weekdays, Hong Chee opts for healthier dishes such as fish soup. Currently, he is also cutting down on his meat intake after his cholesterol level shot up recently. He is also on long-term medication for high blood pressure and has managed to keep his blood pressure levels under control.

Still, Hong Chee — who has a sweet tooth — cannot resist indulging in chocolate

or ice-cream once in a while. “When you come to my age, you want to enjoy life a little. It would be miserable if you cut out everything. I believe that we should eat everything in moderation,” says the 66 year-old. Admitting that he doesn’t drink plain water “unless I need to take my medicine”, he has at least made the compromise of cutting down his intake of carbonated beverages and now solely consumes fruit juice.

Another major lifestyle change was his decision to quit smoking in July this year. A heavy smoker since picking up the habit at 18, Hong Chee admits he sometimes smoked up to two packets of cigarettes a day. He had tried to kick the habit many times in the past without success. “Before, I never convinced myself to quit smoking. Many smokers come up with excuses to continue smoking,” he says.

It was his consideration for his daughter that led him to stub out the habit for good. “I would always smoke in the living room and she found the smoke unbearable,” he says. Since he stopped smoking, Hong Chee says he feels more refreshed and his breath and clothes doesn’t smell of nicotine anymore. Slowly but surely, he is also making other efforts to maintain a healthy lifestyle. For example, during his morning commute he will alight from the bus at Thomson Road and take a seven-minute walk to Toa Payoh where he works as a security guard in a school.

So far, his hard work has paid off. This year, he has managed to bring his blood sugar level down to normal (about 6mmol/L). “I’m happy that I have made some progress in coping with my condition,” he says. “I will continue to go for regular health screenings.” **LW**

“**I’M HAPPY THAT I HAVE MADE SOME PROGRESS IN COPING WITH MY CONDITION, AND WILL CONTINUE TO GO FOR REGULAR HEALTH SCREENINGS**”



A new CHARGE

THE PROSTHETICS AND ORTHOTICS DEPARTMENT
AT TTSH REBUILDS THE LIVES OF ITS PATIENTS —
BOTH MENTALLY AND PHYSICALLY.

BY **NIRMALA SIVANATHAN**
IN CONSULTATION WITH **MR TREVOR BINEDELL**
UNIT HEAD OF THE PROSTHETICS AND
ORTHOTICS DEPARTMENT // TAN TOCK SENG HOSPITAL



(BODY RECONSTRUCTION)



WHEN DESMOND TONG WAS 22 YEARS-OLD, he got into a road accident that necessitated seven surgeries. His right leg had to be amputated from the knee down. "Adjusting to the idea that I had lost my leg was incredibly painful at first," recalls Desmond, now 35. "I felt helpless and depressed."

But thankfully for Desmond, he was not alone on the road to recovery. "I was blessed to have supportive parents, siblings, relatives and friends," he says. "I was also lucky to have a very good prosthetist at Tan Tock Seng Hospital (TTSH) who helped me to literally get back on my feet."

A former real estate agent, Desmond is now back at TTSH, not as a patient but as a Prosthetist/Orthotist with the Prosthetics and Orthotics (P&O) Department, and helping others get a new lease of life — just as he had been helped 13 years ago.

For the past 11 months, he has made it his life's work to help fellow amputees regain their confidence and return to doing the activities they used to enjoy.

Thanks to advanced aids, amputees are now able to cycle, swim and even play basketball. The world's most famous example of this is probably Oscar Pistorius, a double amputee from South Africa who competed in the men's 400 metres race at the recent 2012 Summer Olympics.

His remarkable feat is possible because manufacturers now offer lighter, more durable prosthetic parts fabricated from materials that are better able to mimic human walking.

The P&O Department at TTSH, which is the largest of its kind in Singapore, has its own workshop where these high-tech components are used to build custom-

made artificial limbs for its patients.

Support Network

Besides artificial limbs, the P&O Department — established in 1981 — fabricates and fits orthoses, mobility aids,

wheelchairs and custom-made shoes. Orthoses refer to supportive devices or braces that help to control biomechanical alignment, prevent injury, provide support following injury and assist rehabilitation after injury.

The department comprises a team of Prosthetists/Orthotists who construct



AMPUTEES ARE NOW ABLE TO CYCLE, SWIM AND EVEN PLAY BASKETBALL



"I M POSSIBLE"

Desmond Tong (left) is testament to the Prosthetics and Orthotics (P&O) Department's excellent work in rebuilding lives.

Of his presence as an amputee at the P&O Department, he says, "I believe that patients see me as a living example of what is possible as an amputee. Through me, they are able to see for themselves that it is possible for people with artificial limbs to run, play sports and do anything just like everybody else."

Desmond currently uses a hydraulic ankle energy return response foot fitting with a carbon fibre socket and a silicon liner. The leg, which is made of light and durable materials such as titanium and carbon fibre, allows him to indulge in sports such as swimming, basketball and badminton.

He is also able to drive with the leg, even though he needed to get approval from the Land and Transport Authority to have the accelerator pedal changed to the left side of the car.

Desmond says his own injury helps him relate to the patients he sees. "As their prosthetist, I am able to better understand the pain and frustrations that they are going through.

"It is never easy being disabled even as a prosthetist," adds Desmond who is married. "Simple tasks like squatting down to take a measurement can be difficult for me due to the constraints of my artificial limb. But as I like to tell my patients, nothing is impossible. In fact, if you take the word 'impossible' and break it up, you get 'I M Possible'."

braces and artificial limbs, as well as podiatrists. The department also works with rehabilitative doctors, medical social workers and physiotherapists to get patients back on their feet again.

“We see a wide range of patients of all ages,” says Mr Trevor Binedell, the Unit Head of the P&O Department. “Amputees account for about half the cases while the other half is made up of orthopaedic cases.” Orthopaedic cases include drop foot caused by stroke, fracture management, cerebral palsy management, flat feet and scoliosis, which is an abnormal curving of the spine.

To join the team of specialised staff, Desmond had to first pursue a four-year honours degree in Prosthetics and Orthotics in the United Kingdom. “I felt a calling to join the department,” he explains. “After my surgery, I felt that I needed to help others go through what I went through — and am still currently going through — as an amputee.”

Getting Fitted

For amputees such as Desmond, the P&O Department provides custom-made artificial limbs that help them regain mobility and improve their quality of life. These can include artificial limbs for below- and above-knee amputations, hip disarticulations and upper limb amputations as well as “running legs” and “water legs” for swimming.

For a patient, the process begins with a consultation and assessment. “When a patient is referred to us, he or she will be seen by a team of professionals who will assess the patient and his or her needs,” explains Mr Binedell. “The patient will then be casted, or where appropriate, a mould will be taken. Approximately two weeks later, the patient will have a first fitting.”

After fittings are completed, a patient then begins gait training, which is the act of relearning how to walk with an artificial limb. This process involves the P&O Department as well as TTSH’s Department of Physiotherapy. The latter is involved for continued and advanced training. During advanced training, patients use equipment such as wobble boards, treadmills and trampolines to prepare them for activities such as running and cycling — but the process doesn’t end there.

“Our patients don’t ever leave us,” says Mr Binedell. “Their artificial limbs will require servicing for the rest of their lives. Therefore, we usually get to see patients grow up, get married, have kids and even as retirees. We become a part of their lives.” **lv**

The Road To Inclusivity

Singaporeans today are more accepting of people with disabilities in the community. This is according to a 2011 study conducted by the Society for the Physically Disabled (SPD) in Singapore to determine public perception towards people with disabilities. The study found that:

- 13.4 per cent of people feel that the disabled are dependent on others — a significant decrease from 47 per cent in 2009, when a similar survey was conducted.
- 93.1 per cent of those surveyed agreed that more can be done to help people with disabilities on public transportation in Singapore.
- More Singaporeans see people with disabilities as contributing members of society with only 8.8 per cent of respondents saying that people with disabilities are unable to perform as well as the non-disabled at work.
- 80.3 per cent of 61 respondents, who are in a position to hire, are open to employing people with physical disabilities.

However, there is room for more public education campaigns to change the perception that persons with disabilities are somehow less fortunate



or in need of sympathy, says Ms Marissa Lee-Medjeral, Executive Director of the Disabled People’s Association (Singapore). “Although having a disability can make it more difficult for a person to fully participate in society, this does not mean that they should be pitied,” she says. “Instead more should be done to remove barriers they might face in trying to

visually- and hearing-impaired.

Employment opportunities for people with disabilities have also improved over the last few years, due in part to the efforts of organisations such as Bizlink, the SPD, Movement for the Intellectually Disabled of Singapore, as well as the Autism Resource Centre. These welfare organisations receive

HAVING A DISABILITY CAN MAKE IT DIFFICULT FOR A PERSON TO FULLY PARTICIPATE IN SOCIETY, BUT THIS DOES NOT MEAN THAT THEY SHOULD BE PITIED

be active members of the community.”

Ms Lee-Medjeral says that although Singapore has made accommodation for people who use wheelchairs or mobility aids, there is still more that can be done to improve accessibility for those with other physical disabilities, such as those who are

partial funding from the Government to conduct vocational assessments and job placements.

“We have actually seen a trend of employers wanting to employ more persons with disabilities. It is supply that cannot meet the demand, rather than the other way round,” adds Ms Lee-Medjeral.

(STIs)

Stop The SPREAD

FROM HOW THEY ARE TRANSMITTED TO HOW
THEY CAN BE TREATED AND WHERE YOU CAN
GET TESTED, HERE'S WHAT YOU NEED TO KNOW
ABOUT SEXUALLY-TRANSMITTED INFECTIONS.

BY **NIRMALA SIVANATHAN**

IN CONSULTATION WITH

DR PRIYA SEN

HEAD OF DEPARTMENT OF STI CONTROL AND
SENIOR CONSULTANT DERMATOLOGIST // NATIONAL SKIN CENTRE

AND **DR GAVIN ONG**

ASSOCIATE CONSULTANT DERMATOLOGIST // NATIONAL SKIN CENTRE



CHLAMYDIA, GONORRHOEA, GENITAL HERPES, HIV/AIDS

— the mere mention of these diseases invariably brings on a shudder. Ironically, it is this aversion that hinders efforts to stop the spread of such sexually-transmitted infections (STIs).

What are STIs? As the name suggests, they refer to a host of conditions that can be spread by sexual contact. These can take the form of bacterial, viral, fungal or parasitic infections.

Bacterial infections such as chlamydia and gonorrhoea, and viral infections such as genital herpes are the most common in Singapore, according to Dr Priya Sen, Head of Department of STI Control and Senior Consultant Dermatologist with the National Skin Centre (NSC).

Other types of STIs such as vaginal thrush — a fungal infection — and parasites like pubic lice or scabies are also common. These are usually passed from one infected person to another through unprotected oral, vaginal or anal sex. “STIs are spread through intimate contact with infected urethral or vaginal secretions,” says Dr Sen who adds that anal sex carries a higher risk of spreading STIs than other types of intercourse. “This is because the lining of the anus is thin and can easily be damaged, making it more vulnerable to infection.”

STIs like the human immunodeficiency virus (HIV) can also be spread through blood transfusions or the sharing of infected needles. They can also be transmitted from an infected mother to her baby during childbirth. Contrary to popular belief, STIs cannot be transmitted through casual activities like shaking hands and hugging, using public toilet seats or the sharing of meals. In Singapore, all blood products are thoroughly screened for HIV and STIs prior to administration.

Prevention is Key

According to Dr Sen, three groups of people have a higher chance of contracting STIs — those who frequent sex workers, men who have sex with other men and those who engage in casual sex without using condoms. “If you belong to one of these groups, have had unprotected sex, or have multiple sexual partners, you should go for a regular sexual health screening,” advises Dr Sen.

Using a condom will also lower your chances of contracting STIs. Dr Sen says the correct and consistent use of latex condoms can significantly reduce the risk of most STI transmissions. Vaccinations

are also available for certain STIs such as the Human Papilloma Virus (HPV) which causes genital warts and the Hepatitis B virus. These vaccinations can help prevent infections.



STIs CANNOT BE TRANSMITTED THROUGH CASUAL SOCIAL ACTIVITIES LIKE SHAKING HANDS AND HUGGING, USING PUBLIC TOILET SEATS OR THE SHARING OF MEALS

Most STIs can be treated successfully through the use of antibiotics, antiviral, or anti-fungal medication. Parasitic infections such as pubic lice can be treated using insecticide creams and shampoos. Additional medication such as hydrocortisone cream and painkillers might also be prescribed to treat symptoms and relieve discomfort. However, not all STIs can be treated and cured. That is why prevention is key when it comes to incurable STIs such as HIV.

The HIV Situation

In 2008, the reported rate of HIV infections in Singapore reached an all-time high with 125.2 new cases reported per million people. This number has dipped slightly to 121.7 reported cases per million people in 2011 — but that doesn't mean that HIV is any less of a concern than it used to be. It is also not confined exclusively to men who indulge in homosexual sex either.



(STIs)

According to Dr Gavin Ong, Associate Consultant Dermatologist with the NSC, heterosexual sex (between a man and woman) accounts for most of the new HIV cases in Singapore. There has however been a rise in the number of new infections acquired through homosexual and bisexual sex. "Also of concern is that a significant proportion of new cases diagnosed are late-stage infections. This shows that many are still not coming forward for voluntary testing early," he says.

Early testing can lead to timely care and treatment. Without testing, people who have HIV and don't know it face a greater risk for serious health problems and early death. They might also spread the virus to others unknowingly. A 2011 study also found that early detection — and thus early treatment — can reduce the risk of HIV being spread from pregnant HIV-positive women to their children.

In Singapore, it is an offence under the Infectious Diseases Act for people who know they are infected with HIV not to inform their sex partners of their status before sexual intercourse. The Act also requires those who have reason to believe that they might be exposed to HIV to take precautions to protect their sexual partners by using condoms. This is applicable even if they are ignorant of their HIV status. Getting tested for HIV will ensure that you are not breaking the law by unwittingly infecting your partners.

The best time to screen for HIV infection is during the first and third month from the last sexual contact as it can take up to three months for the virus to manifest. If an individual goes for a screening too early, he or she may have a false negative screen result. For



EARLY DETECTION, AND THUS EARLY TREATMENT, CAN REDUCE THE RISK OF HIV BEING SPREAD FROM PREGNANT HIV-POSITIVE WOMEN TO THEIR CHILDREN

high-risk individuals, a HIV screening is recommended once every six months.

To date, HIV remains incurable but it can be treated. Many new drugs have been made available for people with HIV infections. These drugs are normally taken in combination and are effective in suppressing the infection. However, Dr Ong says currently there is no effective vaccine against HIV despite clinical trials conducted worldwide. If left untreated, HIV can progress to AIDS (acquired immunodeficiency syndrome) that is the last and most severe stage of the infection. People with AIDS suffer from a weakened immune system and are more likely to develop certain cancers and diseases such as pneumonia. **LW**

THE TRUTH ABOUT STIs

Many people are in the dark about such infections. Dr Priya Sen, Head of Department of STI Control and Senior Consultant Dermatologist with the NSC, sheds light on three common misconceptions people have about STIs.

▶▶ "I had a workplace health check recently, so I'm completely clean."

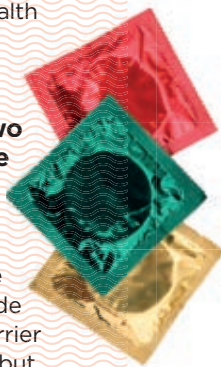
Not all medical screenings include a comprehensive STI test. Some screenings include syphilis and HIV testing while others don't. You should ask your doctor which tests are included, and which are not. Your best option is to visit a sexual health clinic. The doctors there will be able to screen you for your risks and advise you on which tests you should get.

▶▶ "I can tell if someone has a sexually-transmitted infection."

Many people who have an infection often do not show any signs or symptoms. They can look healthy and live normally. A sexual health check-up will give a definitive answer.

▶▶ "I should use two condoms to double the protection against STIs."

Do not ever use two condoms at the same time. Condoms provide a good protective barrier when used correctly, but using two condoms at the same time will not only increase friction, but also increase the risk of condom breakage. Broken condoms can lead to infections.



GET TESTED!

If you fall into a high-risk group or suspect you have an STI, you should get tested. Any delay in getting tested means a delay in treatment, and this can lead to serious health complications. Many STIs can be easily tested with a swab, urine

or blood test. These tests are available at:

THE DSC CLINIC
Block 31 Kelantan Lane
Singapore 200031
Tel: 6293 9648

Services offered:

- Affordable, confidential and comprehensive STI screening

- Specialist STI consultation
- Vaccinations
- Counselling

The DSC Clinic also operates separate clinics for men and women. The DSC assures that your medical information will not be divulged to a third party without your consent.

Personality **DISORDERS** uncovered

THERE ARE PERSONALITIES OF ALL KINDS IN THIS WORLD, BUT ARE THERE SOME THAT ARE CONSIDERED MEDICALLY ABNORMAL?

BY **EVELYN MAK**

IN CONSULTATION WITH **DR JAYDIP SARKAR**
CONSULTANT // DEPARTMENT OF GENERAL AND FORENSIC
PSYCHIATRY // INSTITUTE OF MENTAL HEALTH



(WELLNESS)



EVERYONE HAS A UNIQUE PERSONALITY —

characteristics and traits that, in essence, are what define us as individuals. Our personalities determine how we act, think, feel and relate to the world around us. And while there are external factors — such as behavioural, cultural and societal norms — that regulate most people's personalities, there are occasions when an individual's behaviour, emotions and thoughts stand out from what is considered acceptable in the wider social context. If extreme enough, these “out of the ordinary” personalities can be classified as personality disorders. A diagnosis of personality disorder is made with utmost care and after extensive assessment, and not as a throw-away label that one attaches to behaviours.

According to Dr Jaydip Sarkar, Consultant, Department of General and Forensic Psychiatry at the Institute of Mental Health, many patients with personality disorders face difficulties in dealing with daily life. “Such patients can find it difficult to get along with others, whether they are friends, family or colleagues. They also find it hard to keep out of trouble and have difficulty controlling their feelings and behaviour,” says Dr Sarkar. As a result of these difficulties, they tend to be “unhappy or distressed, and find that they often upset or harm others”.

The Root of the Problem

While there is no clear answer what causes these disorders, doctors have found that just as with other mental disorders, a mix of nature (genes) and nurture (upbringing) can play a part. “The causes lie largely in how children were dealt with in their early lives, and the amount of stress they may have had to face while still too young to be able to deal with it,” Dr Sarkar says.



Personality Disorder Types — 3 Broad Clusters



ECCENTRIC THINKING AND BEHAVIOUR

» Paranoid personality disorder:

Patients tend to have a deep mistrust of others. They feel that others are being nasty to them, often feel rejected and tend to hold grudges.

» Schizoid personality disorder:

A lack of interest in relationships and muted emotional expressions are core features.

» Schizotypal personality disorder:

“Odd ideas, a lack of warm emotions and inappropriate emotional responses are the basic symptoms,” states Dr Sarkar. These symptoms can also be related to schizophrenia, a more serious mental illness.



DRAMATIC, EMOTIONAL AND ERRATIC BEHAVIOUR

» Antisocial personality disorder:

Patients are easily frustrated, often becoming aggressive or committing crimes, and don't seem to care about the feelings of others. They also tend not to feel guilty or learn from negative experiences.

» Borderline personality disorder:

This manifests as a lack of self-control, both in actions and emotions. Patients form relationships very quickly — but also lose them quickly as well. When stressed, they can become paranoid and hear voices. They tend to harm themselves by cutting, overdosing or engaging in risky sexual behaviours.

» Histrionic personality disorder:

Patients tend to over-dramatise events and exhibit strong emotions that change in an instant. They worry about their appearance incessantly and constantly crave new excitement.

» Narcissistic personality disorder:

“An extreme sense of self-importance and a craving for success, power and intellectual brilliance set these patients apart,” says Dr Sarkar. “They crave attention but don't show warm feelings in return. They also exploit others by asking for favours and not reciprocating.”



ANXIOUS AND FEARFUL PERSONALITIES

» Obsessive-compulsive

personality disorder:

“Patients are perfectionists and can be very rigid, overly cautious and preoccupied with detail. They worry about doing the wrong thing, and find it hard to adapt to new situations,” says Dr Sarkar. Patients also have high moral standards, while being very judgmental.

» Avoidant personality disorder:

Frequently anxious and tense, such personalities are very sensitive to criticism and tend to suffer from feelings of inferiority. To avoid being criticised, they just avoid doing things.

» Dependent personality disorder:

These patients tend to be very passive and have no initiative, relying on others to make decisions or just do what others want them to.

For example, if parents were very strict about a child's performance in school and behaviour, this could cause the child to become obsessive and a perfectionist. "If those who took care of them were unpredictable and the child experienced intense emotional reactions from them, or if they were sexually abused, borderline personality disorder could develop," he adds.

In addition, research has found that there are specific genes that can make people more impulsive or aggressive — this makes them difficult to bring up as children. The combination of their genetic dispositions and difficult childhood can then lead to the development of a personality disorder.

While symptoms of the disorders tend to become evident in adolescence, doctors try to refrain from making a diagnosis until a patient is 18 years old. "It is believed that personalities are not fully formed before then," explains Dr Sarkar. "While doctors may note that symptoms are present in very young patients, it is recommended that a formal diagnosis is not made until after they have passed their teenage years."

Road to Recovery

Personality disorders are actually more common than most of us realise. According to Dr Sarkar, it has been found that about one in 20 people globally suffer from a sort of personality disorder. No research evidence on personality disorders is available in Singapore but based on the clinical experience of psychiatrists, the more common of these are the obsessive-compulsive, borderline, narcissistic and anti-social personality disorders.

Although such conditions can cause much disruption to a sufferer's everyday life, these are not impossible to live with, in milder form. "Sufferers with milder forms can lead relatively normal lives with some difficulty during periods of stress. With moderate levels of the disorder, it could start to become difficult to maintain relationships, or hold down jobs, and sufferers may become unpredictable in how they feel and behave," Dr Sarkar says. "However, with proper help, many people can start to lead more normal and fulfilling lives, and most can better cope with the difficulties caused by their condition."

In addition, such disorders are most obvious and disabling during early adulthood, tending to stabilise in middle age years.

Even without treatment, the severity of disorders tends to reduce by itself as the patient grows older. Research suggests that people develop better coping mechanisms as they age.

At present, treatment plans usually include psychological (talking therapies) and physical (medication) aspects. "The cornerstone of treatment is psychotherapy. There are different ways of talking with a

sufferer. Short-term therapies may last several weeks while longer-term therapies can even last years," Dr Sarkar explains.

Medication can also be used. "Antipsychotic drugs in a low dosage can reduce feelings of suspiciousness and help those who are 'hearing voices'.

Antidepressants and mood stabilisers are also used to reduce impulsiveness, anxiety and aggression," says Dr Sarkar. "But medications are never used alone in a treatment regime. Instead, they are used hand-in-hand with a form of psychological therapy."

Caregivers who form a support system for patients are also very important in the treatment. "Many people with personality

disorders can lead full lives with support," Dr Sarkar adds. "The help given can be emotional, by talking to sufferers; or practical, where assistance is offered in tasks like sorting bills out." Caregivers who need support can approach Family Service Centres which are equipped to provide assistance.

Caregivers should try to be non-critical when talking to patients. "Be non-judgemental and avoid imposing your own values on the patient. Don't force him or her to conform," Dr Sarkar says. "A quiet chat about what is going on can help to look into deeper issues that your loved one is struggling with." **lw**

“**WITH PROPER HELP HOWEVER, MANY PEOPLE CAN START TO LEAD MORE NORMAL AND FULFILLING LIVES**”

BEING WATCHFUL

While the experiences faced by each patient is different, there are some common triggers that can cause a sufferer to behave unusually or erratically. Caregivers should look out for the following:

- Alcohol or drug use
- Problems getting on with partners or family members
- Financial difficulties
- Anxiety, depression or other mental health problems
- Important events or anniversaries
- Stressful situations

Help Yourself

If you're facing a rough emotional patch, there are things you can do to help yourself get through the turmoil. Here are some activities that could prove useful.

- Try to unwind if you are feeling stressed. Have a hot shower or go for a walk. You could also do yoga, go for a massage, or even make use of aromatherapy to unwind.
- Avoid drinking too much alcohol and refrain from using illegal drugs.

- Exercise regularly.
- Give yourself a treat when things are difficult, or as a reward for coping through a stressful time.
- Take up an interest or hobby to give you the opportunity to meet like-minded individuals and take your mind off daily stressors.
- Talk to someone about how you are feeling, whether it is a friend, loved one, a therapist or counsellor. Your GP could also be of help.

- If you feel you are losing a grip on things, try calling a local helpline like the Samaritans of Singapore (1800-221 4444), the IMH Helpline (6389 2222) or the Singapore Association for Mental Health (1800-283 7019).
- Admit that you need help, and find people you can trust and confide in to help you. Seek professional help, and avoid high-risk behaviour such as self-harm, unsafe sex, drugs or violence.

A Love for the People

LIFEWISE SPEAKS TO ASSOCIATE PROFESSOR THAM KUM YING, 48, SENIOR CONSULTANT AT TAN TOCK SENG HOSPITAL AND ASSISTANT DEAN AT THE LEE KONG CHIAN SCHOOL OF MEDICINE ABOUT HER LOVE FOR IMPROVING THE LIVES OF OTHERS. **INTERVIEW EVELYN MAK**

➔ **"MY LOVE FOR MEDICINE** began in my secondary school days as a member of the Red Cross Society, when I learnt how to do cardiopulmonary resuscitation (CPR) and rudimentary first-aid. I had classmates who would faint at the sight of blood but that never affected me. It was of no surprise to my parents and four siblings that I decided on a career in medicine.

I specialise in emergency medicine, and working in the Emergency Department of Tan Tock Seng Hospital is definitely challenging. But while some people find stress overwhelming, I actually find it a positive source of energy.

I like how the cases that I get to see are so varied. Nothing is predictable and nothing is routine.

My career has also given me the opportunity to help others as a volunteer doctor overseas. My first volunteer project was in Malang, Indonesia in 1997. In that project, we helped to develop the city's emergency department and pre-hospital service and tie those in with their current hospital system. In the same year, I began working with Medical Services International, a Christian non-governmental organisation, to develop training in resuscitation and emergency medicine. For the last 13 years, I've travelled with a team of Singaporean medical professionals to the Huili county hospital in Sichuan, China twice a year to help improve their medical capabilities.

My work in China has reinforced the importance of my clinical skills. In Singapore, ordering blood tests, X-rays or scans is as simple as clicking a button. But the technology in Huili is less sophisticated so interviewing patients and learning to listen and ask the right questions is much more important. Working there reminds me of the importance of basic skills and not relying on technology.

The biggest lesson I've learnt is how to be content. There are many doctors who work harder than me, who are better than me but who earn less than I do and receive fewer benefits. My time in China makes me grateful for what I have, and also for what the Singapore healthcare system has achieved." **LW**

A/PROF THAM KUM YING
FINDS A SOURCE OF POSITIVE
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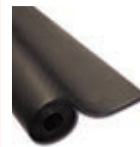
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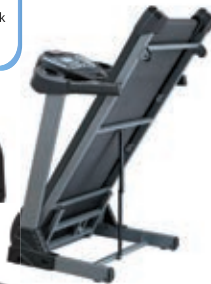


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How to AGE well

JUDY WEE AND LEE POH LENG SHARE THE IMPORTANT LESSONS ON AGEING THEY HAVE PICKED UP AS VOLUNTEERS. BY NIRMALA SIVANATHAN

Keeping Active

JUDY WEE, 60
LIONS BEFRIENDERS
VOLUNTEER



IN 2002, JUDY WEE — THEN A HOUSING AGENT — was nearing retirement age when she decided

to sign up as a volunteer with Lions Befrienders. “I would be having more time on my hands, and I thought why not spend it meaningfully?” the sprightly sexagenarian says.

“Since then, I have found that volunteering with the elderly is very fulfilling. As a Lions Befriender, I visit seniors in their homes, interact with them and make sure they are eating well and taking their medicine regularly.”

The Lions Befrienders Service Association (Singapore) is a voluntary welfare organisation which aims to help improve the social, psycho-emotional and physical well-being of lonely seniors in the community.

Judy started volunteering with the organisation 10 years ago. Once a week, she visits seniors with limited or no family support, and who are at risk of isolation. The mother of a son aged 35 and a daughter aged 32, and grandmother of three even goes beyond the call of duty to visit the seniors when they are hospitalised. Judy also helps the staff of Lions Befrienders deliver items to the homes of the elderly.



INSTEAD OF BEING NEGATIVE ABOUT AGEING, I TELL MYSELF THAT THIS IS AN OPPORTUNITY FOR ME TO DO MORE

JUDY WEE SIGNED UP AS A VOLUNTEER WITH LIONS BEFRIENDERS WHEN SHE REALISED THAT SHE WOULD HAVE MORE FREE TIME IN HER RETIREMENT YEARS

“As I go on my rounds, I meet people both older and younger than myself,” Judy says. “Some are so alert despite their advanced age. Some suffer from memory loss and other problems despite being relatively younger. When you meet people like these, you know which category you would want to fall into when you get advanced in years.”

To this end, Judy has become more conscientious about monitoring her own health. Three years ago, she was diagnosed with a degenerative spinal condition so she has been exercising regularly to strengthen her back.

Luckily for Judy, keeping fit is not a chore. Together with her retired 61-year-old husband, she attends jazz dance and Zumba classes once a week, and plays golf twice a week.

An important lesson she has picked up from her time volunteering is to approach ageing with an open mind. “You can’t just stay at home. You need to get out there, keep active and learn new things,” she says.

“Instead of being negative about ageing, I tell myself that this is an opportunity for me to do more, and to keep up with my children by teaching myself to become IT-literate.”



PHOTO OF JUDY: STEVE ZHU. PHOTO OF POH LENG: WILSON PANG

Rewarding Pursuits

LEE POH LENG, 57
INSTITUTE OF MENTAL
HEALTH VOLUNTEER



FOUR TIMES EVERY WEEK, LEE

POH LENG leaves his home in Jurong West at 6.30am and travels to the Institute of Mental Health (IMH) in Buangkok Drive, a journey that takes him one and a half hours by public transport. He has made the trip religiously for the past 13 years since becoming a volunteer with IMH.

The retiree first started volunteering after he had attended an Open House at the institute. Poh Leng was then a Human Resource manager with an IT company. The Open House invited members of the public to visit IMH and understand its work.

"Signing up as a volunteer was a chance to do something different. I wanted to challenge the stigma surrounding mental illness," Poh Leng says. "I also felt the need to give something back to society since I have been so blessed in my own life."

He helps out at the long-stay wards which include some adult, children and geriatric wards. Patients at these wards suffer from mental illnesses such as depression, schizophrenia and psychosis.

"We sing along with them, play games and give them a chance to interact with others," says Poh Leng, who has two sons aged 35 and 29. "The patients are here for extended periods of time so you get the chance to get to build a rapport with them."

POH LENG DEVOTES FOUR DAYS A WEEK AT IMH, INTERACTING WITH MENTAL PATIENTS SUFFERING FROM ILLNESSES SUCH AS DEPRESSION AND SCHIZOPHRENIA

In 2010, Poh Leng joined the IMH as a part-time volunteer coordinator. These days, he works two days a week on an official basis and comes in for an additional two days as a volunteer. As a volunteer coordinator, he has initiated programmes such as the Volunteers-Recruit-Volunteers scheme and planned outings and activities for patients.

In his free time, Poh Leng also volunteers with grassroots activities in the South West Community



I DON'T WANT TO BECOME A BURDEN TO MY CHILDREN IN MY OLD AGE, SO I TRY TO SPEND WITHIN MY MEANS, EXERCISE MORE, AND CONTROL MY DIET

Development Council and helps out at the National Library Board with community outreach programmes.

Working with patients at IMH has definitely changed his outlook on ageing. "I don't want to become a burden to my children in my old age," he says. "So I try to spend within my means, exercise more and control my diet."

Having seen the effects of dementia on some of the geriatric patients he works with, Poh Leng also understands the importance of staying mentally active after retirement. "If you are retired, find something to do," he says. "Don't just sit around at home. Get out. Do volunteer work. Read. Move about." **LV**

INTERESTED IN VOLUNTEER WORK?

Here are some programmes to consider.

● GUIDING HANDS VOLUNTEER PROGRAMME

This programme under the National Healthcare Group Polyclinics offers a range of volunteering opportunities for you to offer assistance and guidance to patients of

the polyclinics. For details, visit www.nhgp.com.sg/volunteer.

● IMH VOLUNTEER PROGRAMME

Volunteers at the Institute of Mental Health play a vital role in normalising the lives of mental health patients by helping them to feel that they are not forsaken by society. Some of the work IMH volunteers do include planning and organising recreational activities, helping in

rehabilitative activities such as grooming and basic social skills and providing a listening ear to patients. More details at www.imh.com.sg.

● TTSH VOLUNTEER AND PATIENT SUPPORT GROUPS

Tan Tock Seng Hospital offers volunteers of all stripes diverse opportunities to provide support in more ways than one. TTSH has 16 Volunteer and Patient

Support Groups. Volunteer Support Programmes include the Community Health Engagement Programme that aims to encourage seniors to embark on a healthy and active lifestyle; the Stroke Support Group that provides psycho-social support and counselling to stroke survivors; and the Night Sitters Programme to keep watch over fall-risk patients. More information at www.ttsh.com.sg/about-us.

Living WELL

FEELING UNDER THE WEATHER? TRY TRANSFORMING YOUR LIVING SPACE TO IMPROVE YOUR WELL-BEING.

BY ELISABETH LEE



STRESSED OUT AND FEELING ON

EDGE? The reason might not be your boss, job or the usual things that cause you to feel on edge. It could be your living space. Some research has shown that the environment plays a large part in influencing a person's mental and physical health.

Go with the Flow

The design of your living space can affect your mood. John Eberhard, co-founder of the Academy of Neuroscience for Architecture, believes that an appropriately-scaled room — where the dimensions and layout of furnishings complement the overall size of the room to avoid congestion — leads to feelings of calm and reduced stress, thus promoting a sense of security and increased competence and productivity.

Maximise your living space by getting rid of unnecessary stuff, and then streamlining the layout to improve traffic flow and air movement. And it's not about *feng shui*, but simple common sense — experts suggest high ceilings, clean lines (instead of jagged and irregular walls) and open spaces to ensure better ventilation.

Another tip is to introduce an element of water into your living environment. Consider adding a pond or fountain if you have a garden or outdoor space, or a small indoor water feature if you don't — the gentle burble of a fountain can generate just enough white noise to be soothing.





Clear the Air

The air quality of your home can also affect how you feel. The United States Centre for Disease Control says bacteria and mould can build up in clogged air-conditioner filters, and excessive exposure can result in allergies, asthma and other adverse effects.

Other lesser-known pollutants are volatile organic compounds (VOCs) emitted by household cleaning supplies, paints, building materials and varnishes. The indoor concentration of VOCs can be up to 10 times higher than outdoors, according to the United States Environmental Protection Agency, and can have many short- and long-term adverse health effects.

So pick up an air purifier, clean your air conditioner filters regularly and choose household products that have low levels of VOCs. Look for paints that are labelled 'non-toxic' and free of extra solvents or additives — 5g per litre or less of VOCs is preferable.

Colours that Calm

In 2000, the Scottish city of Glasgow discovered that blue street lights resulted in reduced crime rates. American police stations often have pink holding rooms — all in the hope that a pink environment would soothe offenders. While evidence is mostly anecdotal, scientists believe that a room's colour can have a huge impact on a person's mood. Bright primary colours — red, yellow and blue — can overwhelm and distract, so go for soothing shades such as pastels or neutrals in your living space.

Interior designer Carolyn Feder, who specialises in creating rooms for special needs children, suggests tranquil hues of blue, green and violet. "I tend to use these colours because they are calming, as opposed to the louder primary colours," she says. "The brain registers these soothing effects on a subconscious level and this really helps to improve behaviour."



Go Green

We all know going green is good for health, but this means much more than just choosing eco-friendly cleaning products with low levels of harmful VOCs. A two-year study done in the late 1980s by the National Aeronautics and Space Administration (NASA), a United States agency that conducts aeronautics and aerospace research, showed that common household plants can remove major indoor pollutants such as benzene and formaldehyde commonly found in everything from carpeting to adhesives.

So try adding a pot or two of peace lily, chrysanthemum or mother-in-law's tongue — not only will they help filter the air, these plants will also add to the oxygen levels and beautify your living space too. The NASA study recommends at least one potted plant per 10 sq m of space, for tangible results.



Cut the Clutter

A house chock-a-block with unnecessary things can have a negative impact on its occupants. Robin Zasio, therapist on the popular cable television show *Hoarders*, believes that too much physical clutter creates emotional clutter. "Every time you walk into your home, that clutter brings you down. There's a sense of not feeling comfortable and emotionally free in your own house," she told the *Today* show.

Decluttering is a process that's best begun gradually. Get started by setting aside an hour every day or once a week to target a specific area or room. Sort out what stays and what goes — store or box items that you seldom use and get rid of things you don't need. Charities such as the Salvation Army and Pass It On (www.passiton.org.sg) can help ensure that your unwanted items go to someone who needs them more. **lw**

(**WORKOUT**)

SPLASH and get fit

AQUA AEROBICS LETS YOU STAY COOL WHILE WORKING TOWARDS A TRIM AND FIT BODY. BY EVELYN MAK



LOOKING FOR A WAY to get a fit and toned physique without having to sweat it out? Or maybe you want to start a regular exercise programme but joint problems are keeping you away from the gym? Then aqua aerobics may be the perfect workout solution.

Keeping Afloat

Aqua aerobics is basically an exercise conducted in a pool with your body partially submerged in water. While in the water, actions like kicks, squats, jumps and other dance movements are performed to get your blood pumping.

According to Dr Jason Chia, Head of Sports Medicine and Surgery Clinic at Tan Tock Seng Hospital, one of the benefits of aqua aerobics is the lesser amount of stress placed on joints compared to conventional aerobics exercises. “Aqua aerobics trains the cardiovascular system while the buoyancy of the water decreases impact on the joints. Rather than working against gravity, you are working against the resistance of water,” he says.

Water also supports much of your weight and acts as a cushion, resulting in less strain even while you are strengthening muscles and improving cardiovascular fitness. In fact, aqua aerobics can be more effective than conventional workouts at the gym. Water is denser than air, so more effort is needed to move through water. With this resistance added to your workout, the effectiveness and effects of the session are amplified. Apparently you burn 11.5 calories per minute when you

“jog” through water, compared to eight calories pounding the ground, according to a report published in the British newspaper *The Independent*.

Benefits for All

The unique benefits of aqua exercise have made it a sport that is beneficial to senior citizens or anyone with joint problems. This is because being in the pool negates the risk of falls, says Dr Chia. It is also a popular exercise option for expectant mothers — the water helps to prevent a rise in internal body temperature which can be common in pregnancies. Aqua aerobics is especially suitable for pregnant women in the advanced stages of a pregnancy when they have limited mobility.

You don't even need to be a skilled swimmer as lessons are held in shallow or chest-high water and usually don't involve putting the head under water. Besides, your feet will always be touching the bottom of the pool.

Aqua aerobics can also be practised by people who are recovering from injuries such as sprained ankles as it allows a safe environment to exercise in without much pain. “It also acts as adjunct cardiovascular

training while you are laid off your usual workout routine and helps preserve your fitness even as you recover your strength,” says Dr Chia.

However, he advises anyone with active infections and exposed skin lesions to avoid aqua aerobics until they are fully recovered. This is to prevent other pool users from getting infected. And as is the usual precaution, you should always check with your doctor before starting a new exercise routine. **LW**



THE RIGHT MOVES

Ms Eunice Ler, a certified Federation of International Sports, Aerobics and Fitness (FISAF) aqua aerobics instructor holds aqua aerobics classes at the YMCA and private condominiums.

Her 60-minute classes usually begin with a short warm-up with simple exercises to get the body limbered up. This is followed by a routine which can incorporate movements from step aerobics, kickboxing, *tai qi*, and Zumba. The pool wall and swimming noodles — foam tubes that can be bent and used in different ways to keep you afloat — are also used to add variety to the exercises. Lessons usually end with five to 10 minutes of cooling down and stretching exercises.

“When done correctly, your body will be fatigued by the end of an aqua aerobic workout as the water’s resistance will make your muscles work harder than you realise,” Eunice says.

If you don’t want to join a formal aqua aerobics lesson, or if you can’t find lessons offered in your neighbourhood, it is possible to incorporate aqua exercises in your normal pool routine.

Walking or jogging in the pool, doing squats and lunges, or just doing punches in the water are all simple exercises that you can do after your usual swim.

On the right, Eunice shares some simple moves you can do at your own time at the pool.



Straight Leg Stretch HELPS TO STRENGTHEN THE HIPS, GLUTES AND INNER THIGHS

- Hold on to the edge of the pool wall with your hands outstretched.
- Stretch one leg out until your leg touches the pool wall, lifting it as high as you can.
- Jump to switch legs and repeat.

Push-ups TONES THE UPPER ARMS AND SHOULDERS

- Place your hands on the edge of the pool wall.
- Pull the weight of your body onto your arms until your arms are straight.
- Bend your legs back at the knees and cross your ankles.
- Hold the position for three seconds and repeat.



Underwater Lunge TONES AND STRENGTHENS QUADRICEPS (THIGHS)

- With your hands outstretched and shoulders submerged, hold on to the pool wall.
- Bend your front leg at a 90-degree angle and straighten your back leg.
- Switch legs and repeat.

Underwater Crunches TONES THE ABDOMINALS

- Curl a swimming noodle around your shoulders to support your back as you lie back in the water.
- Bend your legs and bring your knees to your shoulders while holding tightly to the noodle. Your ankles should be crossed.
- Inhale as you straighten your legs and repeat.



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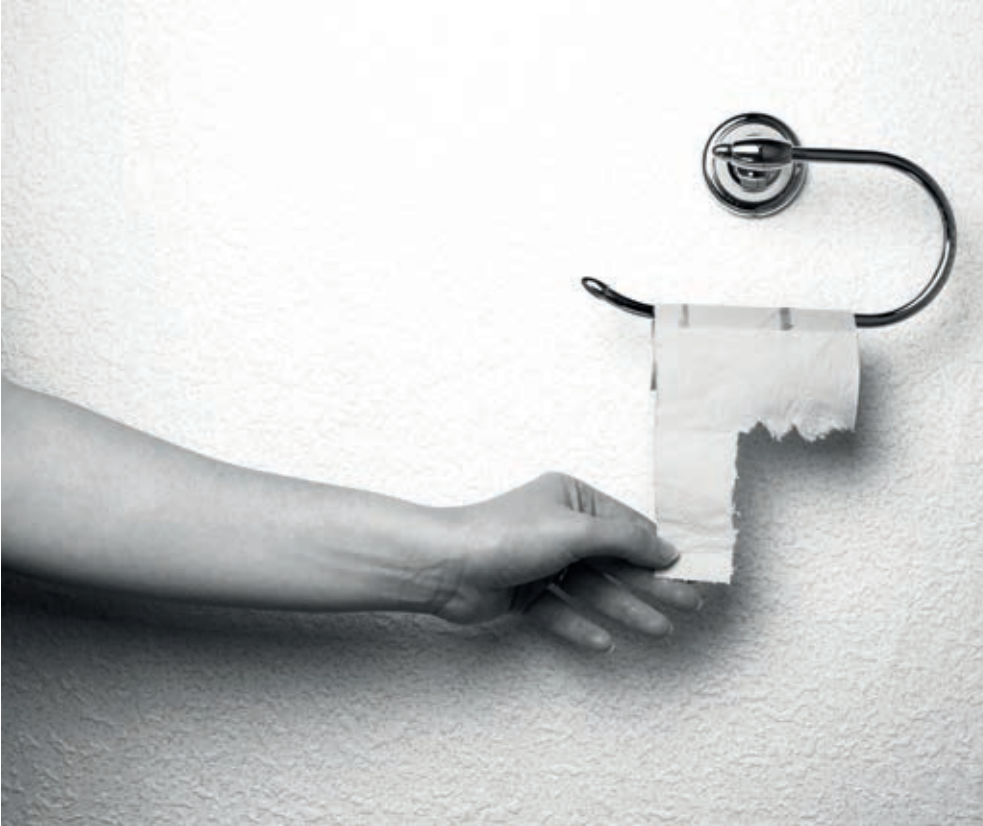
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Q2) The Heart Truth

My 68 year-old husband was diagnosed with heart failure after he had shortness of breath. His doctor has not recommended surgery, but what should he be more careful of now that he has been diagnosed, and what symptoms should we be on the lookout for?

There are many causes of heart failure and thus the treatment for individual cases may be different. The first priority is for your husband to see a heart specialist (ie. cardiologist) who will be able to recommend the appropriate tests to determine the cause and the right treatment. In general, one should take the prescribed medication and attend follow-up appointments regularly. Signs to watch out for include shortness of breath, leg or body swelling, chest pain, giddiness and palpitations. Watching one's diet is important as eating salty food or drinking too much fluids can result in the swelling of the legs and even water in the lungs. This will worsen the shortness of breath which sufferers tend to experience. Your husband's heart specialist would be able to provide individualised advice which is appropriate for him.

DR DANIEL YEO
CONSULTANT // HEART FAILURE
SERVICE // DEPARTMENT OF
CARDIOLOGY // TAN TOCK SENG
HOSPITAL

Q1) Nature's Calling Too Often

I am a 45 year-old woman. On most nights, I wake up to urinate at least twice. This has been happening for about a month now. Should I be concerned? Is this a symptom of something more serious like an urinary tract infection?

Frequent urination at night is called nocturia, and it is a common symptom experienced by men and women especially from middle age onwards. In both sexes, it is important to first see your GP to rule out a urinary tract infection and diabetes. This can be achieved by a simple urine test and where necessary, a fasting blood sugar level check. In addition, nocturia in men may be associated with enlargement of the prostate gland. For women, nocturia may be related to having an overactive bladder. When these are suspected, your GP can initiate treatment for you. If the symptoms do not improve or if the GP suspects further investigations are needed, a urologist will be able to help.

DR CHONG YEW LAM
CONSULTANT AND HEAD, DEPARTMENT OF UROLOGY
// ASSISTANT CHAIRMAN (CLINICAL DEVELOPMENT) //
MEDICAL BOARD // TAN TOCK SENG HOSPITAL

Q3) Getting Back on Track

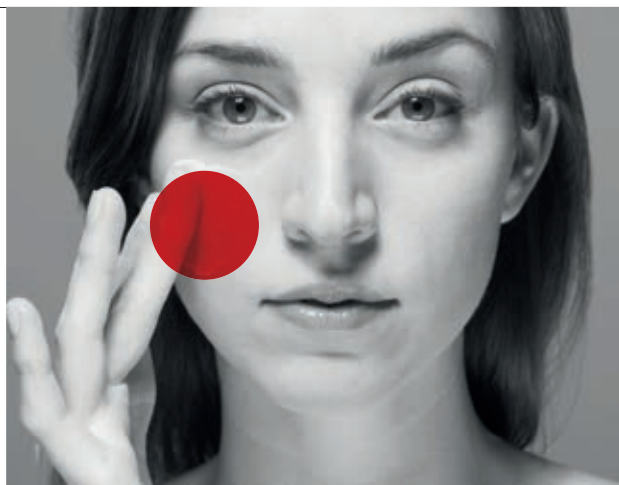
I was told by my doctor that I am borderline obese. I'm now 34 and have not exercised since I was in the army. What exercises or sports should I start with? And what kind of programme should I embark on so that I won't be discouraged and give up after a short while?

The most important forms of exercise for weight management are aerobic and resistance training. There are many forms of aerobic activities and it's best to identify those that you enjoy doing, for example outdoor jogging or brisk walking in parks if you like nature. For a start, it is recommended that you do 30 minutes of aerobic activity per day for five days a week. If you have any pre-existing pain or injury which may be aggravated by certain forms of exercise, consult a doctor or physiotherapist.

For resistance training, try to work on major muscle groups two to three days per week. You may want to start with calisthenics (body-weighted exercise) such as wall push-ups, half crunches, half squats and lunges (three sets of 10 repetitions); alternatively, gym exercises such as chest press, leg press, leg extensions and leg curls (three sets of 10 repetitions). Again, to motivate yourself, choose an exercise that you are interested in. It is also important to exercise safely with the correct techniques to avoid injuries. Finally, watch what you eat. If you need dietary advice, you can consult a dietitian.

MR KWOK BOON CHONG

SENIOR PHYSIOTHERAPIST // NATIONAL HEALTHCARE GROUP POLYCLINICS



Q4) In the Red

I am a woman in my 20s who is concerned about my rosacea. I'm keen to seek medical help but am concerned about the risk factors. What treatments are there for rosacea?

Rosacea is characterised by redness of the cheeks, chin and forehead with prominent fine blood vessels and occasional pimples. However, there are other conditions which can appear similar and you should first see a dermatologist to confirm the diagnosis. The specific factors which aggravate your condition have to be first identified. These include heat, sunlight, spicy food and alcohol. For skin care, you should only use gentle, non-abrasive facial cleansers and avoid applications which have the potential to irritate your skin. Treatment options include topical creams such as metronidazole gel, clindamycin gel or erythromycin gel. Lasers such as pulsed dye laser can also be used to reduce the appearance of redness. In severe cases, oral antibiotics may also be required. In cases which are difficult to treat, oral isotretinoin may be used. Side effects include skin dryness and cracked lips, elevated cholesterol levels and abnormal liver function. Female patients must avoid getting pregnant while on isotretinoin as it can affect the development of the foetus.

DR HENG YEE KIAT

ASSOCIATE CONSULTANT DERMATOLOGIST // NATIONAL SKIN CENTRE

Q5) Detox Warning

Are detox diets medically proven to be beneficial to health? How should I go about a detox diet?



Detox diets are not scientifically proven to be beneficial to health. There is little evidence that detox diets actually eradicate toxins from our body — our kidneys and liver are capable of filtering and eliminating toxins efficiently. Furthermore, there are no specific fruits or vegetables that are especially powerful in removing toxins. It is more likely a person may see benefits from a so-called detox diet when his/her diet was originally unhealthy, and the avoidance of unhealthy food choices makes him/her feel better.

A word of caution: some detox diets may lead to inadequate nutrition intake. It is wiser to eat a balanced diet based on fruits and vegetables, whole grains and lean sources of protein; avoid foods that are high in fat, especially saturated fat, refined sugars and foods high in sodium such as processed foods; abstain from alcohol and drugs; and drink six to eight glasses of water a day.

MR WON TIN CHIANG
SENIOR DIETITIAN-CLINICAL SERVICES // NATIONAL HEALTHCARE GROUP POLYCLINICS



Viewing pornography is, by itself, not an addiction. A sexual activity becomes an addiction when there are three or more of the following signs, as assessed by a doctor or trained counsellor:

- The activity gets more intensive over a six-month period, either in terms of the time spent on it or the frequency.
- The behaviour causes problems to the person's functioning in social, work and relationship areas
- Even after the individual experiences major consequences (e.g. breakdown of marriage) due to the activity, he/she continues to engage in it.
- The individual progressively gets more pain and distress rather than pleasure from the activity.
- The individual has made many attempts to stop or control the behaviour but was unsuccessful.
- The individual uses the behaviour to regulate moods, escape from unresolved psychological and emotional issues, or to fill a void in their life.
- The individual avoids or neglects important activities in order to engage in the behaviour.

If a professional has assessed that your husband does not have an addiction, you may wish to see a family therapist to work out your relationship issues.

MR VIKNESAN SB
SENIOR COUNSELLOR // NATIONAL ADDICTIONS MANAGEMENT SERVICE (NAMS) // INSTITUTE OF MENTAL HEALTH

Q6) Cellulite Woes

I am a 27 year-old woman and I recently noticed visible cellulite on my legs and upper arms. My BMI is 23 and I exercise regularly. What causes cellulite? How can its appearance be reduced?

Cellulite is characterised by dimpling of the skin, either spontaneously or after provoking manoeuvres like pinching the skin. It is a physiological phenomenon, meaning that it is normal to have cellulite. It has a multi-causal origin, with genetic and hormonal factors, and the connective tissue architecture and changes in vascular tissue all playing a role. Treatments include lymphatic drainage, topical phosphatidylcholine-based anticellulite gel, radiofrequency and laser and light-based procedures.

DR TAN WEE PING
CONSULTANT DERMATOLOGIST // NATIONAL SKIN CENTRE

Q7) Porn Problem

I recently found links to pornographic sites on my husband's computer. What are the consequences of an online porn addiction? Should he seek help?

ASK THE EXPERTS

HERPES ALERT

I am a 30 year-old man with genital herpes. How should I manage the recurrence of the condition? And what should I do if I would like to have sex with my partner?



Genital herpes is a sexually-transmitted infection that may recur from time to time, especially in the first two years. Triggers include stress and concurrent illness which may lower one's immunity.

If genital herpes recurs, seek treatment as soon as possible as the medication works best when taken early. Some individuals may experience repeated flare-ups which may be debilitating. In this situation, they may be put on long-term medication to suppress the infection.

It is strongly advised to avoid sexual activity during a flare-up as one is then highly infectious and may pass the infection to others. Even at other times, it is advisable to engage in safe sex such as being monogamous and using condoms as the herpes virus may be present in genital fluids.

DR GAVIN ONG
ASSOCIATE CONSULTANT DERMATOLOGIST // NATIONAL SKIN CENTRE

(EAT SMART)

Packing a PUNCH, not paunch

BEING MINDFUL OF WHAT YOU EAT THIS FESTIVE SEASON MEANS YOU WON'T NEED TO GO ON A DIET IN THE NEW YEAR! BY AUDRINA GAN



IT IS EASY TO OVEREAT, especially during the festive season. With Christmas and Deepavali just round the corner, it pays to practice portion control to keep those unwanted kilos at bay.

How to go about doing so? For starters, avoid house visiting on an empty stomach as this is a surefire way to overeat when faced with a spread of goodies or a host urging you to “go on, have another slice of cake”.

Before heading out, fill yourself up with low-calorie snacks such as fruits, vegetables or plain crackers. “Vegetables are generally lower in calories while high in fibre, and can help to fill you up and reduce the urge to reach out for second servings or calorie-laden dishes,” says dietitian, Ms Ong Hui Wen, from Tan Tock Seng Hospital.

It is especially important too, that you be conscious of portion sizes of calorie-dense foods such as beef *rendang* and ice-cream. A smart way is to share a portion with someone else; in this way you are limiting what you eat, but will still be able to enjoy a large variety of food.

You can also use a smaller plate. Larger plates make the same serving size of food appear smaller, increasing the likelihood of piling on more food, and eating more. One particular study concluded that people provided with a larger bowl and serving spoon consumed 57 per cent more compared to those with a smaller bowl and spoon. If possible, choose a blue plate as well as it has been shown that the colour blue is an appetite suppressant. This is because we seldom get naturally blue food, and as a result, our appetites are not whetted by anything in this colour.

If you are the host, feasting smart also means offering your guests healthier alternatives. Instead of deep-frying, you can steam, grill, boil, roast, broil, bake or air-fry food. Saturated oils



TRIM OFF EXCESS FAT FROM CHICKEN, BEEF OR PORK BEFORE ROASTING AND SERVE THE GRAVY SEPARATELY

such as ghee, lard and palm oil can clog arteries so opt for canola, corn, sunflower or olive oil. If you have to use butter, choose unsalted butter, says

Ms Ong, and reduce the amount required by half. Substitute the rest with apple sauce or canola oil.

Instead of using large amounts of salt or doses of soy sauce, why not dress up your food with fresh or dried herbs and spices? Basil, black pepper, *chilli padi*, coriander, chinese five-spice powder, curry spices, fresh mint, garlic, ginger, rosemary and thyme are great alternatives.

Curry is a mainstay during the festive season, and Ms Ong has a healthy tip for cooking it. "You can use low-fat evaporated milk, skim milk, low-fat plain yoghurt or soy milk with no sugar added," she suggests.

Turkey is generally known to be lower in sodium and cholesterol than chicken, but serve a piece of turkey meat with a generous dollop of gravy and you get a meal that is high in fat. The same goes for ham. When cured with salt and glazed with honey, a 170g serving contains 2,000mg of sodium, which is already equivalent to the recommended daily intake of sodium.

Trim off excess fat from chicken, beef or pork before roasting and serve the gravy separately. Remember too, to skim off the layer of oil.

Reduce Deep-frying

During Chinese New Year, steam your *nian gao* (glutinous rice cake) instead of deep-frying it in oil. Or you could pan-fry it sandwiched in between sweet potato and yam pieces coated with batter for a tasty alternative. Substitute some of the usual tidbits with raw almonds, sunflower seeds or other nuts. But avoid honey-roasted, sugar-coated or salted varieties.

Dishes like butter prawns and roast duck may be delicious but not all that good for the heart. For main meals, consider feasting steamboat-style instead, as the food is then boiled and not fried. Add more vegetables and fresh fish slices to your steamboat for a healthy and filling meal. Provide fresh fruit for dessert instead of the usual sugar-laden options. If you do serve sweetened desserts, use natural sweeteners like dried longans, dates or persimmon. Serving a dessert warm can also help to enhance the sweetness without the need for extra sugar.

With these smart tips on hand, you can have a merry feast without putting on a paunch! **LW**

KEEPING COUNT

Here's a chart of how some of your favourite festive foods stack up

FOOD	SERVING SIZE	ENERGY (KCAL)	FAT (G)
Roast turkey with skin	2 slices (90g)	170	6.7
Mixed vegetables, boiled, with added butter	½ mug (70g)	138	11.7
Beef <i>Rendang</i>	267g	596	12.9
<i>Ketupat</i> (rice dumpling)	95g	88	0
<i>Muruku</i>	22g (per piece)	110	30.1
<i>Gulab Jamun</i>	225g	774	12.7
<i>Nasi Briyani</i> with chicken	488g	922	7.5
Pineapple Tarts	2 pcs (50g)	164	17.8
<i>Ba kwa</i> (pork)	1 pc (57g)	229	13.7
<i>Yu Sheng</i> (raw fish salad)	1 serving (100g)	145	10.9
Drunken Prawn	6 large prawns (186g)	195	1.9

(Spotlight)

CORPORATE NEWS + CALENDAR OF EVENTS + FORUMS



Clockwise from left: Prof Jill Thistlethwaite; Prof Chee Yam Cheng hands out the Singapore Primary Care Research Award (Gold) to Dr David Tan Hsien Yung from the National Healthcare Group Polyclinics.

TEAMWORK — THE KEY TO BETTER HEALTHCARE OUTCOMES

PROVIDING MORE COHESIVE TEAM-BASED CARE AND THE CHALLENGES OF AN AGEING SOCIETY WERE THE FOCAL POINTS AT THIS YEAR'S SINGAPORE HEALTH AND BIOMEDICAL CONGRESS.

With Singapore's ageing society, the dynamics of patient care will only get more complex. What that means for healthcare professionals is the need to communicate more effectively with one another to cope with changing needs.

This was one of the key takeaways from this year's Singapore Health and Biomedical Congress (SHBC), which was held on 28 and 29 September at the Max Atria @ Singapore Expo. Now into its 11th year, the Congress — whose Guest-of-Honour was Singapore's Minister for Health Gan Kim Yong — drew more than 2,200 medical professionals from local and regional healthcare institutions from around the world.

Themed "Reshaping Healthcare: Deepening the Foundation for Quality and Safety, Igniting the Engine for Education and Innovation", this year's conference zoomed in on ways to improve healthcare education and communication.

In his opening speech, Professor Chee Yam Cheng, CEO of the National Healthcare Group (NHG), said the Congress would allow healthcare professionals to examine and share ways to enhance clinical quality and safety, together with more cost-effective patient care.

Keynote speaker Professor Jill Thistlethwaite noted that communication between healthcare professionals is still lacking. Prof Thistlethwaite is one of the world's leading authorities on team-based care. She highlighted the need to train healthcare professionals to communicate more effectively with one another.

"It's about harnessing the skill mix, recognising that none of us have all the skills we need to deal with complex patient needs," said Prof Thistlethwaite,



NHG Chairman, Mdm Kay Kuok, gives out the Young Investigator Award (Silver) to Ms Anusha Govinder Raj from the National Healthcare Group.

who is the Director of the Centre for Medical Education Research and Scholarship at the University of Queensland in Australia.

Research done by Mr Issac Lim, from the Health Outcomes and Medical Education Research department of NHG, helped quantify the lack of communication. He found that while doctors and nurses interacted well with their peers, interaction between doctors and nurses was much lower. This in turn may mean poorer quality of patients' healthcare experiences and health outcomes. Mr Lim's research won him the top Medical Teacher Poster Prize at the 2012 AMEE Conference in Lyon in August (see page 43).

Other plenary speakers at the Congress included Mr Göran Henriks, Chief Executive of Learning and Innovation at Qulturum in Jönköping County Council, Sweden. Jönköping is noted globally for its successful execution of a Regional Health System, something that Singapore is striving towards.

Two satellite conferences were also held in conjunction with the main Congress — the Primary Care Forum and the NHG Quality Convention 2012. The SHBC also formed the backdrop for the announcement of 47 winners for the annual Scientific Competition, which drew 270 submissions. Dr Edwin Seet, a consultant from the Department of Anaesthesia at Khoo Teck Puat Hospital clinched top honours — the Gold Clinical Investigator Award — for his research on the clinical use of various laryngoscopes. The National University Hospital and the Institute of Mental Health were the top-scoring institutions, with five and three golds respectively.

GERIATRIC CARE GETS A BOOST

To meet the healthcare needs of a rapidly-ageing population, Tan Tock Seng Hospital's Division of Integrative and Community Care has set up the Institute of Geriatrics and Active Ageing.

To establish new directions for geriatric care in Singapore, the National Healthcare Group (NHG) has announced the launch of the Institute of Geriatrics and Active Ageing (IGA) at SHBC.

Set up by Tan Tock Seng Hospital (TTSH)'s Division of Integrative and Community Care (DICC), the institute — which is located within the hospital's premises — aims to enable the delivery of holistic care to improve the health, independence, safety and quality of life of older persons through innovation and public education.

Associate Professor Chin Jing Jih, TTSH's Divisional Chairman of DICC, explained that the rapidly-ageing population and a disproportionately high rate of admissions and lengths of stay have led to a need to improve the continuum of care through research and innovation. NHG CEO Professor Chee Yam Cheng said the setting up of the IGA is timely. "This Institute will enable us to provide an even more holistic suite of services to Singapore's senior citizens and develop

our education and research capabilities in geriatric care at the same time," he explained.

The establishment of IGA is to meet the current and future demands of geriatric medicine in Singapore through the pillars of Research and Innovation, Training and Education, as well as Quality and Safety. "Our focus is very much in keeping ourselves rooted in research and new innovative ideas, developing a pool of geriatric professionals who can ignite and propel new care models and programmes into the community," added A/Prof Chin.

innovation. Focus areas of clinical, epidemiological and health services will be targeted at new care models for Singapore's rapidly-ageing population over the next 20 to 30 years.

At the same time, IGA will work with Singapore's medical schools to improve the prominence of geriatric education. Other than being an entity to attract, train and retain doctors to specialise in geriatrics, the Institute will also be a focal resource point for local and regional healthcare professionals. It will also serve as a platform for medical professionals and

THE EXISTING CARE MODELS HAVE WORKED WELL THUS FAR, BUT TO MEET FUTURE NEEDS, GERIATRICS HAS TO CONSTANTLY EVOLVE, INNOVATE AND IMPROVE

A/PROF CHIN JING JIH, TTSH'S DIVISIONAL CHAIRMAN OF DICC

"The existing care models have worked well thus far, but to meet future needs, geriatrics has to constantly evolve, innovate and improve. There is a need to bridge ourselves to the elderly out there so that we can educate, prepare and equip both them and their caregivers with ways to embrace active ageing — healthily, independently and positively," he adds.

A structured platform for healthcare professionals will be established at IGA to conduct research and work on technological

elder care providers in the community to share knowledge and exchange ideas on ageing research and education.

Part of the IGA's mission is to extend its services, research and educational programmes beyond the current frail elderly to younger seniors who are still active and independent. This will involve setting up educational programmes aimed at preparing the elderly for ageing, maintaining their health and quality of life, and postponing the onset of illnesses and disabilities.



Signing of the Collaborative Agreement between IMH and Galya Rajanagarindra Institute in Bangkok (right); villagers like these from the flood-prone Pachi District of Thailand's Ayutthaya Province will benefit from IMH's training programme (below)



MENTAL HEALTH: GOING BEYOND BORDERS

THE INSTITUTE OF MENTAL HEALTH WILL TRAIN 840 MENTAL HEALTH PROFESSIONALS IN THAILAND, CHINA AND INDONESIA TO SUPPORT THE MENTAL WELL-BEING OF THOSE LIVING IN DISASTER-PRONE AREAS.

The damage inflicted by natural calamities often goes beyond the physical. To survivors, the trauma can also have a psychological dimension which can affect them for years. In view of this, a training programme to help disaster-affected communities in Asia has been set up by the Institute of Mental Health (IMH) with the aid of the Temasek Foundation. The two organisations are collaborating with tertiary healthcare organisations in Thailand, China and Indonesia to develop a capacity-building programme in mental well-being and resilience to support disaster-preparedness and recovery of communities affected by disasters. The \$2.38 million programme will improve the delivery of integrated mental health services in the respective communities by enhancing the skills of mental health professionals residing in these areas. Temasek Foundation funded more than two-thirds of the programme by providing a \$1.96 million grant to IMH.

The programme includes training mental health professionals to plan, develop and implement integrated mental health services in disaster-affected communities and equipping them with skills in post-disaster recovery.

IMH will equip 120 officers from the government and healthcare sectors from the three countries with skills to develop policies and plans for disaster preparedness.

An additional 120 mental health professionals comprising of psychiatrists, nurses and social workers will be trained as master trainers. They will then pass their skills to another 600 community-based professionals through post-training workshops. Towards these ends, IMH has signed a Collaboration Agreement with Galya Rajanagarindra Institute in Thailand and West China Hospital in Sichuan Province in China. A third agreement will be signed with an

Indonesian healthcare partner by the end of this year.

According to Associate Professor Chua Hong Choon, Chief Executive Officer of IMH, this training programme provides a win-win situation for all the parties involved. "In learning about community mental health support in these three countries, the experience will enhance our ability to provide psychological support in response to crises nationally and internationally," he said.

IN LEARNING ABOUT COMMUNITY MENTAL HEALTH SUPPORT IN THESE THREE COUNTRIES, THE EXPERIENCE WILL ENHANCE OUR ABILITY TO PROVIDE PSYCHOLOGICAL SUPPORT IN RESPONSE TO CRISES NATIONALLY AND INTERNATIONALLY

A/PROF CHUA HONG CHOON, CHIEF EXECUTIVE OFFICER OF IMH

BETTER COMMUNICATION = BETTER PATIENT CARE

A SINGAPORE STUDY ON INTER-PROFESSIONAL COMMUNICATION IN A MEDICAL SETTING WINS THE TOP PRIZE AT AN INTERNATIONAL MEDICAL EDUCATION RESEARCH CONFERENCE.

The need to enhance patient care and safety proved to be the driving force behind Mr Issac Lim's winning entry at the Association for Medical Education in Europe (AMEE) Conference 2012. Mr Lim, a sociologist who manages the National Healthcare Group's Health Outcomes and Medical Education Research (HOMER) unit, competed against 780 entries from around the world to clinch the top Medical Teacher Poster Prize at the premier global medical education research conference held in Lyon, France in August this year. This is the first time a Singaporean has been awarded the top prize for medical education research awarded by an international organisation.

Titled *Making Birds of Different Feathers Flock Together: Common Skies for Inter-Professionalism*, Mr Lim's study is based on inter-professional collaboration between doctors and nurses. While similar research has been conducted in the United States and United Kingdom, this study was the first to quantify doctor and nurse interactions, complete with visuals to convey the differing patterns of communication in a variety of clinical settings.

For his study, Mr Lim clocked over 100 hours observing doctor-nurse interactions in three different settings at Tan Tock Seng Hospital — in the Intensive Care Unit, the General Internal Medicine and the General Surgery Departments. His observations showed that communication patterns of participants are largely computer-mediated and intra-professional — that is, between doctors or between nurses. This is due to factors such as the larger organisational environment, organisational culture and structure. Mr Lim says that his findings are the first step in improving inter-professional communication in a hospital, which will ultimately benefit patients' experience.



A MULTI-PRONGED APPROACH SHOULD BE TAKEN, WHEREIN WE FIRST REDESIGN SOME OF THE WORKFLOWS AND SOCIAL ORGANISATION IN CLINICAL SETTINGS

MR ISSAC LIM, SOCIOLOGIST WITH NHG'S HEALTH OUTCOMES AND MEDICAL EDUCATION RESEARCH (HOMER) UNIT

On how inter-professional communication can be enhanced, he says, "A multi-pronged approach should be taken, wherein we first redesign some of the workflows and social organisation in clinical settings. Secondly, we need to create shared learning experiences for healthcare workers through sustained

inter-professional learning."

Inter-professional collaboration is one of the key areas recognised by global medical institutions as a means to enhance patient care. It is a model used by hospitals around the world to deliver enhanced healthcare to patients with long-term chronic conditions.



Clockwise from left: Showcase by Tan Chee Keong on 'Freedom and Peace of Heart'; Aileen Kang's showcase of 'Ordinary Things in Life'; 'Choosing Triumph and Purity' by Melody C



HEALING THROUGH PHOTOGRAPHY

MENTAL HEALTH PATIENTS EXPRESS THEIR THOUGHTS AND FEELINGS VISUALLY IN A PHOTOGRAPHY EXHIBITION.

They say that a picture paints a thousand words and this wisdom couldn't ring more true than at the *Picture My World* Exhibition organised by the Institute of Mental Health (IMH). This photography showcase is the result of a two-month long effort that showcases how 14 individuals — recovering or who have recovered from mental illness — use photography to communicate their feelings.

The project and exhibition is based on an organisation called Photovoice in the United Kingdom which uses photography as a tool for empowerment for disadvantaged and marginalised communities. The organisation believes that a visual diary can serve as a way to help a person document and reflect on events happening in their lives.

For people living with mental illness, social inclusion plays a central role in their recovery. However, a lack of understanding about mental illness often adds to the marginalisation of such a group.

Contributors to the exhibition attended a series of workshops at visual arts centre Objectifs, during which they learnt about picture composition and exposure from professional lensmen. The participants were then guided on

using these skills to create a photo project.

The result of this programme can be viewed by the public in an exhibition, which will be held at various locations between October 2012 and April 2013, including School of the Arts, Jurong Regional Library and Tan Tock Seng Hospital. In addition, members of the public can sign up for free talks on mental health. Two sessions are conducted by a senior occupational therapist from IMH, and these will cover topics such as emotional mindfulness and self-acceptance. The third session is led by a photographer, an arts manager and a senior occupational therapist from IMH who will talk about photography as a tool for visual story-telling for individuals recovering from mental illness.

PICTURE MY WORLD EXHIBITION SCHEDULE

▶▶ 13 Oct - 21 Nov 2012
10am - 9pm daily
Jurong Regional Library
21 Jurong East Central 1,
Singapore 609732

▶▶ 23 Nov - 13 Jan 2013
8am - 6pm daily
Institute of Mental Health, Main Lobby

Buangkok Green Medical Park
10 Buangkok View,
Singapore 539747

▶▶ 16 - 30 Jan 2013
12pm - 8pm daily
Tan Tock Seng Hospital, Atrium
11 Jalan Tan Tock Seng,
Singapore 3084332

▶▶ 2 - 15 Apr 2013
10am - 9pm daily

Tampines Regional Library
31, Tampines Ave 7
Singapore 529620

Talks and workshops will be held on 4 and 18 November 2012 at Jurong Regional Library. For schedules and registration details, visit www.imh.com.sg/event. For more information on *Picture My World*, visit www.picturemyworld.sg.

AWARD-WINNING SOLUTION

NATIONAL HEALTHCARE GROUP PHARMACY WINS AN AWARD FOR ITS INNOVATIVE SERVICE THAT PACKS VARIOUS MEDICATIONS INTO CONVENIENT SACHETS.

National Healthcare Group (NHG) Pharmacy and healthcare IT consultant, Integrated Health Information Systems (IHIS), clinched an award — for *ConviDose* — at the recent Singapore Infocomm Technology Federation (SITF) Awards in August. NHG Pharmacy's *ConviDose: Safer, Easier Meds* is a Multi-dose Medication Management System that packs the various medicines a patient needs to take at prescribed times into handy single sachets. NHG Pharmacy won the SITF Infocomm

THE MULTI-DOSE MEDICATION MANAGEMENT SYSTEM PACKS VARIOUS MEDICINES A PATIENT NEEDS TO TAKE AT PRESCRIBED TIMES INTO SINGLE SACHETS

Productivity Bronze Award for the service which now benefits some 3,100 patients in 16 nursing homes and four long-stay wards at the Institute of Mental Health. A pilot is underway to extend this convenient service to patients at the nine NHG Polyclinics.



NHG CEO Prof Chee Yam Cheng, third from the left, with the award winners

TEACHING HAS ITS PAYOFFS

TEACHING MEDICAL PROFESSIONALS WERE RECOGNISED FOR THEIR EDUCATIONAL CONTRIBUTIONS AT THE INAUGURAL NATIONAL HEALTHCARE GROUP TEACHING EXCELLENCE AWARDS.

The learning journey is all part and parcel of the medical profession. And for most clinicians, teaching plays a crucial part in their practice as well.

To honour medical educators, the National Healthcare Group (NHG) held the inaugural Teaching Excellence Awards on 1 September at Tan Tock Seng Hospital (TTSH). A total of 25 winners — 20 of whom are doctors — across four categories were honoured for their contributions. The other winners included nurses, pharmacists and a laboratory specialist.

The Teaching Excellence Awards included categories for Junior Clinicians, Non-Physicians and Education Partners from non-NHG institutions. Three doctors were also given the NHG Education Leaders Award for their contributions to teaching over the years. They are Associate Professor Vijayan Appasamy, Programme Director for NHG General Surgery residency programme and Senior Consultant at TTSH's General Surgery Department; A/Prof Koh Nien Yue, Senior Consultant at TTSH's General Medicine Department; and A/Prof Swapna Verma, Senior Consultant at the Institute of Mental Health's Early Psychosis Intervention Programme.

NHG clinicians are actively involved in the Residency programmes of tertiary institutions for their postgraduate medical education. In two years, the number of NHG clinician teachers has quadrupled — from 39 educators in 2010 to 157 in 2012.

MOVING @ A HEALTHY VELOCITY

A NEW PARTNERSHIP MARRIES HEALTH EDUCATION AND A SPORTY LIFESTYLE.

Leading a sporty lifestyle is unquestionably a good thing — but at the same time there are safeguards that enthusiasts should be aware of in order to pursue their passion in a safe and beneficial manner. To this end, Tan Tock Seng Hospital (TTSH) and sports lifestyle mall Velocity have joined hands to promote education on health and safety for sports enthusiasts in Singapore.

Both organisations will leverage on their synergetic relationship and close proximity to each other in the Novena area to launch a series of free monthly lunchtime talks themed “Moving @ A Healthy Velocity”. These talks will be conducted by TTSH doctors, nutritionists and other health-related specialists, and are being rolled out over a period of 12 months from 17 September 2012. These will subsequently be held on the first Monday of every month from 12.45 pm to 1.15pm at the Velocity Atrium.

Under the collaboration, TTSH’s team of multi-disciplinary healthcare professionals will provide information on subjects such as Sports Safety, Proper Nutrition, Marathon Running and more. TTSH will also contribute articles on these topics on Velocity’s social media platforms. The partnership was sealed in a Memorandum of Understanding (MOU) which was signed on 4 September 2012 and witnessed by Guest of Honour Minister of State, Ministry of Health and Ministry of Manpower, Dr Amy Khor.

Both TTSH and Velocity share a common goal of encouraging more Singaporeans to take up sports to improve their health, but to do so in a safe manner. To drive home that point, Velocity and TTSH staff competed in a friendly five-a-side Human Foosball match on the day of the MOU signing.

Guest of Honour Dr Amy Khor (left) looks on as Mr Liam Wee Sin, President (Property), UOL Group Ltd, Velocity and Chairman Medical Board (CMB) A/Prof Thomas Lew, TTSH formalise the partnership during the Memorandum of Understanding signing ceremony on 4 September



THE JOY OF MUSIC

TAN TOCK SENG HOSPITAL STAFF MEMBERS LEND THEIR VOICES TO A CHRISTMAS CD FOR A GOOD CAUSE.

Music brings people together. And the production of Tan Tock Seng (TTSH’s) *Art of Healing Christmas Collection CD* is helping to foster closer relationships among the hospital’s staff.

This project is part of the hospital’s Art of Healing Programme, a TTSH initiative that uses the arts to create a warm, welcoming and uplifting environment for patients, families, staff and visitors. The CD will also serve as a form of therapy to soothe patients mentally and emotionally, and help them on their path to recovery especially during the festive season.

Past projects under the Art of Healing Programme include a sing-a-long session where staff took the stage with the NUS choir to entertain patients and their visitors at the TTSH atrium, and a piano performance by doctors from the Department of General Surgery.

Through music, TTSH hopes to connect with the public in the true spirit of Christmas by bringing together the voices of its staff members in this CD. The collaborative effort also brought staff of all levels together to cultivate a culture of unity and care.

All proceeds from the sales of the CDs will be donated to the TTSH Community Development Fund for needy patients.

The *Art of Healing Christmas Collection CDs* will be released in the first week of November and is priced at \$15 (for staff) and \$18 (for the public). Grab a copy at the TTSH Heritage Gift Shop.



NHGP Chief Operating Officer Ms Grace Chiang shows off some of the clinic's new facilities

YISHUN POLYCLINIC'S NEW HOME

SURROUNDED BY LUSH GREENERY AND LOCATED NEAR A MAJOR HOSPITAL, THE NEW POLYCLINIC HAS BEEN DESIGNED TO BETTER MEET THE NEEDS OF PATIENTS.

When Yishun Polyclinic relocates to its new premises at 30A Yishun Central 1 on 26 November, patients can expect a healthcare facility whose design is nothing short of cutting-edge. Not only is the polyclinic nestled next to Yishun Reservoir, it also boasts higher ceilings with skylights and more windows to allow natural light to filter through.

"We hope that exposure to the green surroundings will be calming and provide a healing element for our patients," says Ms Grace Chiang, Chief Operating Officer of National Healthcare Group Polyclinics (NHGP).

The single-storey 4,440sqm building is a 10-minute walk from Yishun MRT station and bus interchange. Previously, it took a patient about 15 minutes to get to the polyclinic from these two locations.

Apart from an accessible location, NHGP has also incorporated more elderly-friendly features into the polyclinic's design. These include handrails along all the walkways and chairs with armrests. To minimise the risk of fall hazards, hydraulic couches which can be raised or lowered will also be set up in all the consultation and treatment rooms. Previously, patients needed to walk up a step before they could get onto the couches.

Also, registration and payment counters have been designed at a lower height to accommodate patients in wheelchairs. About 11 per cent of the polyclinic's patients are between 65 and 79 years old.

Instead of being placed across three floors — as was the case in the previous polyclinic — services are now concentrated on one level and clustered by colour zones. According to Ms Chiang, the clustering of services using colour zones and alphabets will help patients — who are classified by chronic, acute and minor conditions — to identify service areas more

easily. Clustering also promotes smoother patient flow. For instance, a patient with hypertension can self-register, proceed to the chronic condition cluster, do a health screening, consult a doctor, obtain medication and make payment within a single zone.

During their visits to the polyclinic, patients with influenza symptoms or other upper respiratory tract infections (URTI) are triaged and sent to see the doctor, and can collect their medication and make payment all in the same area. The segregation of the URTI cluster helps to minimise the risk of infections should an outbreak occur. This area is also set apart from the chronic patient cluster, where older patients with weaker immune systems tend to congregate.

Height and weight stations have also been designed to provide greater privacy as patients might not want their details to be visible to others. Furthermore, visitors will have more legroom the next time they sip a cup of coffee, thanks to a more spacious café.

To cater to higher patient volume, the new clinic will have 25 nursing rooms compared to 13 previously, as well as three more consultation rooms. Over the years, patient numbers have been on the rise with annual percentage growth of patient attendance at 19.4 per cent from 2007 to 2011. It received 232,773 patients from January to August this year.

Yishun resident Eric Tay, 49, welcomes the polyclinic's move. "I'm happy to learn that the new clinic will be a single-storey building and colour-coded into different zones as it makes finding my way around easier," he says. Mr Tay and his family have been visiting Yishun Polyclinic for more than 20 years.

Yishun Polyclinic will be closed from 22 to 24 November to facilitate the move, during which patients will be directed to Woodlands Polyclinic for treatment. During the closure, a free shuttle service will be provided to ferry patients to and from the Yishun and Woodlands Polyclinics.

DIRECTORY

WE'VE MADE IT EASY FOR YOU TO CONTACT OR LOCATE US.

NATIONAL HEALTHCARE GROUP CORPORATE OFFICE

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Singapore 149547
Tel: 6496-6000 / Fax: 6496-6870

www.nhg.com.sg

The National Healthcare Group (NHG) was created in 2000 as part of a national restructuring of Singapore's public healthcare delivery system into two operative clusters.

As a leader in public healthcare in Singapore, NHG is recognised at home and abroad for the quality of its outstanding medical expertise and state-of-the-art facilities. Care is provided through an integrated network of primary healthcare polyclinics, acute care hospitals, national specialty centres, innovative and business divisions. Together, they bring a legacy of 340 years of medical expertise to our patient-centric care philosophy.

TAN TOCK SENG HOSPITAL

11 Jalan Tan Tock Seng
Tel: 6256-6011 / Fax: 6252-7282
www.ttsh.com.sg

The second largest acute care general hospital in Singapore with specialty centres in Endoscopy, Foot Care & Limb Design, Rehabilitation Medicine and Communicable Diseases. It covers 27 clinical specialties, including cardiology, geriatric medicine, infectious diseases, rheumatology, allergy, immunology, diagnostic radiology, emergency, gastroenterology, medicine, otorhinolaryngology, orthopaedic surgery and general surgery.

INSTITUTE OF MENTAL HEALTH

Buangkok Green Medical Park
10 Buangkok View
Singapore 539747
Tel: 6389-2000 / Fax: 6385-1050
www.imh.com.sg

General and specialised services are provided to meet the special needs of children and adolescents, adults and the elderly. There are sub-specialty clinics such as the Psychogeriatric Clinic, Neuro-Behavioural Clinic, Early Psychosis Intervention Programme and National Addictions Management Service (NAMS). Within corporate settings, IMH offers a comprehensive Workplace Emotional Health Programme. It also provides a 24-hour Psychiatric Emergency Service.

NATIONAL SKIN CENTRE

1 Mandalay Road
Tel: 6253-4455 / Fax: 6253-3225
www.nsc.gov.sg

The centre has a team of trained dermatologists to treat patients with various skin problems. To serve patients better, there are sub-specialty clinics for the different skin disorders and laser surgeries.

NHG POLYCLINICS

Contact centre: 6355-3000
www.nhgp.com.sg

Apart from managing medical conditions, NHG Polyclinics also provide health education, childhood immunisation, treatment for diabetes, health screening, family planning service, antenatal and postnatal care, as well as laboratory and X-ray tests.

ANG MO KIO POLYCLINIC

Blk 723 Ang Mo Kio Ave 8
#01-4136 Fax: 6458-5664

BUKIT BATOK POLYCLINIC

50 Bukit Batok West Ave 3
Fax: 6566-2208

CHOA CHU KANG POLYCLINIC

2 Teck Whye Crescent
Fax: 6765-0851

CLEMENTI POLYCLINIC

Blk 451 Clementi Ave 3 #02-307
Fax: 6775-7594

HOUANG POLYCLINIC

89 Hougang Ave 4
Fax: 6386-3783

JURONG POLYCLINIC

190 Jurong East Ave 1
Fax: 6562-0244

TOA PAYOH POLYCLINIC

2003 Toa Payoh Lor 8
Fax: 6259-4731

WOODLANDS POLYCLINIC

10 Woodlands St 31
Fax: 6367-4964

YISHUN POLYCLINIC

100 Yishun Central (until 23/11/12)
30A Yishun Central 1 (from 26/11/12)

Fax: 6852-1637

NHG COLLEGE

Tel: 6478-2446 / Fax: 6259-6423
www.nhg.com.sg/college

The unit develops healthcare professionals to their maximum potential so that they will provide quality, cost-effective and safe evidence-based care to patients.

NHG DIAGNOSTICS

Call centre: 6275-6443
(6-ASK-NHGD) / Fax: 6496-6625
www.diagnostics.nhg.com.sg

NHG Diagnostics is a business division of NHG. Founded in 2000, NHG Diagnostics is currently the leading provider of one-stop laboratory and radiography services in primary healthcare, with an extensive network of teleradiology and professional service for imaging centres in Singapore, Indonesia and Vietnam.

Aligned with NHG cluster's vision of "Adding years of healthy life", NHG Diagnostics provides services that are accessible, cost-effective, seamless, timely and accurate. NHG Diagnostics is committed to achieving excellence in quality. The quality framework is driven by a set of quality principles and exists within an environment of continuous improvement and business excellence. NHG Diagnostics is certified under ISO 9001

and ISO 15189 which is under the Singapore Accreditation Council-Singapore Laboratory Accreditation Scheme (SAC-SINGLAS). In 2012, NHG Diagnostics joined efforts with the nine NHG Polyclinics to attain the JCI or Joint Commission International (Primary Care Standard) accreditation.

NHG PHARMACY

Tel: 6478-2478

www.pharmacy.nhg.com.sg

NHG Pharmacy runs retail pharmacies in NHG Polyclinics, which include over-the-counter medicines, health supplements, and surgical and medical equipment at affordable prices.

PRIMARY CARE ACADEMY

Tel: 6496-6681 / Fax: 6496-6669
www.pca.sg

The Primary Care Academy (PCA), a member of NHG, was set up to meet the professional training needs of primary healthcare professionals in Singapore and the region. PCA aims to be a platform for sharing of expertise and capacity building among community healthcare leaders and practitioners in ASEAN and the surrounding region.

JOHNS HOPKINS SINGAPORE INTERNATIONAL MEDICAL CENTRE

11 Jalan Tan Tock Seng
Tel: 6880-2222 / Fax: 6880-2233
www.imc.jhmi.edu

Johns Hopkins Singapore International Medical Centre (JHSIMC) is a licensed 30-bed medical oncology facility located in Singapore, a joint venture between the NHG and Johns Hopkins Medicine International (JHMI). It is the only fully-branded Johns Hopkins facility outside of the United States, providing inpatient and outpatient medical oncology care, medical intensive care, laboratory services, hospital and retail pharmacy, general internal medicine and health screenings.

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Our vision of “Adding Years of Healthy Life” encompasses the fundamental challenge of promoting health, preventing illness and preserving quality of life.

We are a leader in public healthcare in Singapore, recognised at home and abroad for the quality of our medical expertise and facilities. Our mission is to provide patient-centred care through our integrated network of acute care hospitals, national specialty centres, nine primary healthcare polyclinics, innovative virtual specialty centres and specialist units. Collectively, we have a rich legacy of over 340 years of healthcare expertise.

As the Regional Health System (RHS) for the Central region in Singapore, we are a prime mover in the patient-centric healthcare ecosystem – with valued partners from the primary, acute and step-down care sectors, all working closely to deliver integrated healthcare services for our patients.

With our 10,000 staff, we aim to provide care that is patient-centric, accessible, seamless, comprehensive, appropriate and cost-effective.

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