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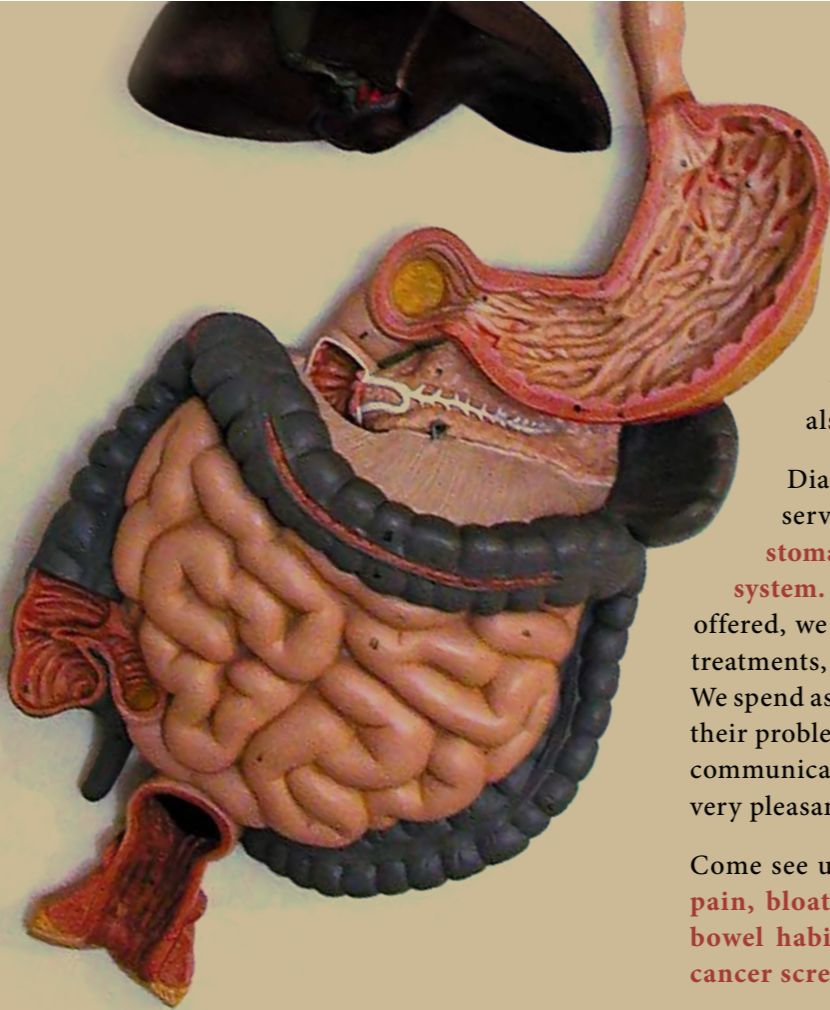


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From the Editor's Desk ...

As we come to the month of April, the occasion of the annual World Health Day – celebrated every year on April 7 – offers all of us the opportunity to contemplate what we truly understand by health and well-being.

Indeed, we went into this current issue with a clear objective. With the help and support of doctors and medical professionals across disciplines, we wanted to focus our coverage on how global health challenges are steadily evolving. And to start the ball rolling, our World Health Day campaign feature zooms in on the common diseases (such as cancer) that have greatly impacted the lives of Singaporeans, including conditions that will become more serious health concerns as the population ages (such as osteoporosis).

In support of the inaugural Singapore Sleep Awareness Week, this issue also seeks to explain how something as fundamental as sleep can have an effect on your health. Complementary medicine is gradually becoming all the rage in Singapore, and Healthy Times is certainly well aware of this trend and committed to providing our take on such issues, we continue to boost our coverage of unique traditional Chinese medicine (TCM) perspectives on everyday health ailments.

We hope that the resources you find on these pages to be informative enough to help you learn more about how to stay healthy.

Lilyanna

CLARIFICATION

In the article entitled A TCM Perspective on Colorectal Cancer published in the Jan/Mar 2010 issue of Healthy Times, it has been brought to our attention that there were several discrepancies between the English text and the accompanying Chinese characters, and we would like to apologise to Si En TCM Medical Clinic for the errors.

Lilyanna

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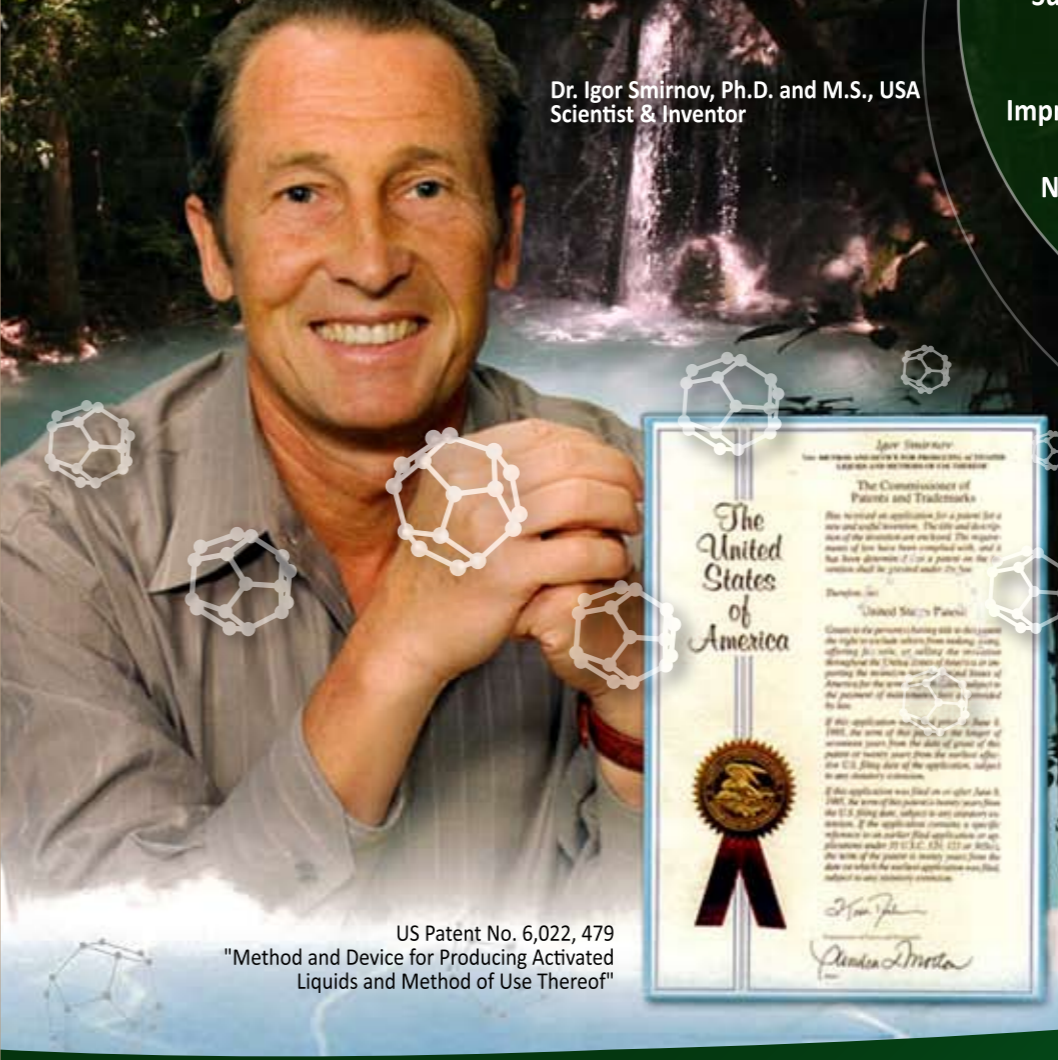
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Heart health awareness among Singaporean women still low



A majority of the local female population is not aware of the health issues surrounding heart diseases. This is according to key findings of the Singapore Heart Foundation's 2009 Go Red for Women (GRFW) Heart Health Awareness Survey, conducted to establish relevant health trends among women in Singapore.

In the Immigration and Checkpoints Authority report on Registration of Births and Deaths 2008, heart disease and stroke accounted for more than 2,500 female deaths (32.5 percent) in Singapore. About 10.1 percent of female deaths were due to stroke, higher than 6.1 percent of men who died from the disease.

The latest GRFW survey findings,

however, indicate that only nine percent of respondents named heart disease as a leading cause of death and at least a fifth (28 percent) still considered cancer to be the number one killer among Singaporean women. More than a third (34 percent) named breast cancer specifically, while more than a third (35 percent) felt that they were at low risk of heart disease for their age and a fifth (20 percent) did not know if they were at risk or not. It was also established that 32 percent of the respondents did not know women were more likely to die from heart disease after reaching menopause.

The survey was conducted via a random sample of telephone interviews with women between 21 and 64 years old in Singapore. A total of 1,030 respondents were interviewed.

Another concern was the indication that

knowledge of heart attack symptoms among women was rather low. For example, close to half (42 percent) of the women polled did not associate chest pains with heart attacks. Although, the good news is that when asked what behaviours could help prevent or reduce risk of heart disease and stroke, more than 80 percent identified exercise as a preventive measure, followed by reducing stress (64 percent) and lower cholesterol (62 percent).

"This suggests that people do know heart disease and stroke is largely preventable. The health promotion efforts by the Foundation, government and relevant organisations seem to be paying off," said Dr Goh Ping Ping, the GRFW spokesperson. "Of course there is a lot more that still needs to be done as the findings show that awareness and specific understanding of heart disease and its manifestations are still low."

Study links soft drinks consumption to increased pancreatic cancer risk

CONSUMING two or more soft drinks per week increases the risk of developing pancreatic cancer by nearly two-folds as compared to individuals who did not consume soft drinks. According to an article in Cancer Epidemiology, Biomarkers & Prevention, a journal of the American Association for Cancer Research.

The findings were drawn from a study conducted in Singapore, which suggests that the high levels of sugar in soft drinks may be increasing the level of insulin in the body, in turn contributing to pancreatic cancer cell growth. Although relatively rare, pancreatic cancer remains one of the most deadly, and only 5 percent of people who are diagnosed are alive five years later.

For the study, a team of researchers led by Dr Mark Pereira of the University of Minnesota followed 60,524 men and women in the Singapore Chinese Health Study in Singapore for 14 years. During that time, there were 140 pancreatic cancer cases. Those who consumed two or more soft drinks per week (averaging five per week) had an 87 percent increased risk compared with individuals who did not. No association was seen between fruit juice consumption and pancreatic cancer.

However, Dr Susan Mayne, associate director of the Yale Cancer Centre and professor of epidemiology at the Yale School of Public Health, has expressed caution. She said these study results are intriguing but have some key limitations that should be considered in any interpretation.

"Although this study found a risk, the finding was based on a relatively small number of cases and it remains unclear whether it is a causal association or not. Soft drink consumption in Singapore was associated with several other adverse health behaviours such as smoking and red meat intake, which we can't accurately control for," said Dr Mayne, who is also an editorial board member of Cancer Epidemiology, Biomarkers & Prevention.

Diet may protect against gene changes in smokers

LEAFY green vegetables, folate, and some multivitamins could serve as protective factors against lung cancer in

current and former smokers. This according to a study supported by the National Cancer Institute (NCI) in the US.

Researchers, led by Dr Steven Belinsky of Lovelace Respiratory Research Institute, Albuquerque, examined cells that were



coughed up by current and former smokers. Upon study of the cells and by comparing those cells with profiles of smokers' dietary intake of leafy green vegetables, folate, and some multivitamins; they found that those particular substances could influence the prevalence of cellular gene methylation. Gene methylation is a chemical modification used by the cell to control gene expression.

The addition of methyl groups, which are simple four-atom molecules, to DNA can affect whether the gene is expressed – that is whether the gene's signal to produce a protein is actually sent. Many genes involved in critical cell functions, including cell division, are methylated in lung tumours. As seen in previous studies, gene methylation is likely to be a major mechanism in lung cancer development and progression, as well as a potential marker for the early detection of lung cancer.

In the study, slightly more than 1,100 current and former smokers submitted sputum samples and completed questionnaires regarding their dietary intake. Most (75 percent) of the participants were women who had been enrolled in the study since 2001. Men were not enrolled until 2004.

Previous studies have suggested an association between a low folate intake and increased lung cancer risk in current and former smokers. Higher folate intake has been associated with lower methylation of genes in colorectal tumours as well.

Shaping up to face key health challenges

In a relatively affluent society such as Singapore, the health challenges we face have been steadily evolving, especially in terms of how the country can cope with the medical demands of an ageing population. While medical sciences has made great strides in developing new treatments, the Singapore government is sparing no efforts in its attempt to encourage Singaporeans to adopt a healthy lifestyle and regular exercise to stave off diseases. The importance of adequate sleep, new approaches to improve our general well-being and other issues are also top concerns for enriching the foundation of our health.

In this issue of *Healthy Times*, we have gathered the expert opinions of medical professionals to share their perspectives and updated info on major health concerns that are impacting Singaporeans, as well as to shed light on diseases such as osteoporosis that may become a more serious issue as we age and other areas of general well-being from where we can learn how to lead a more healthy lifestyle.

War against Cancer



By Prof Alex Chang, medical oncologist at the Johns Hopkins Singapore International Medical Centre

Cancer is a group of diseases characterised by uncontrollable, abnormal growth of transformed cells invading healthy tissues in our body. The current

advanced stages of cancer has evolved from the “atomic bomb” approach of wholesale destruction of both cancerous and healthy cells through chemotherapy to

“war on cancer” involves the use of advanced research to improve the understanding of cancer biology to create more effective treatments and the use of clinical trials to create new treatment standards.

In the past decade, cancer treatment for

the “smart bomb” approach. This approach involves using drugs to target cancerous cells with the hope that treatments can destroy only the cancerous cells, thus leaving the healthy cells intact.

As researchers dig deeper into the genetic roots of cancer, they are gaining an unprecedented understanding of how the disease develops. Decades of research in the biology of cancer have significantly improved understanding of cancer biology, the risk factors, treatment options and prognosis of some cancers. Although only 5-10 percent of cancers are inherited, the origin and biological behaviour of cancer cells can be traced to the molecular level. Cancer develops because something in the genes has gone awry. Every time a cell in your body divides, it copies the entire genetic blueprint that makes you. Sometimes, there may be mistakes made when the body’s machinery is copying this blueprint. This is normal. We have mechanisms that detect and repair these mistakes, but they get less efficient as a person ages. These mistakes may lead to the uncontrollable growth of cells and hence, cancer occurs. The longer you live, the more you are at risk of developing cancer and other forms of diseases.

For the individual, you can take the reins yourselves to win the war against cancer. Prevention, regular screening and seeking treatment early are the keys to cancer control. The risk of

getting cancer can be reduced by maintain a healthy lifestyle through balanced diet, exercise and a healthy state of mental well-being. For those with early stages of cancer, metastatic progression can be reduced through adjuvant therapy in some cancers. Early detection of cancer with screening and diagnostic imaging can detect early-stage cancers with improved survival rate if timely treatment can be prescribed. Surgery is often the first option, with radiation and chemotherapy for advanced treatments.

Prevention is still the best way of reducing the number of people getting cancers. Moreover, the cost of prevention is lower than the cost of treatment. The various types of screenings and advanced diagnostic instruments that are currently available have led early diagnosis, precise staging and monitoring treatment correctly.

Does this mean that an end to cancer is now within reach? Although we are not close to eliminating the disease completely, patients in this generation and the next will have a much better chance of recovery and surviving beyond five years than before. Cancers, such as cancers of the lung and pancreas, will continue to be a challenge, but there are exciting scientific advances such as new molecular targeting drugs that will hopefully be able to both prevent and treat cancer.

Breast Cancer:

Early detection is key



By Dr Ho Gay Hui, senior consultant, Department of Surgical Oncology at the National Cancer Centre Singapore (NCCS)

Breast cancer has been the most common cancer among women in Singapore for the past three-plus decades and will remain so; in the last 10 years, it has become the top cancer killer as well. Each year, about 1,360 women are diagnosed with breast cancer and 313 women die from it. The incidence (number of new cases per year) is increasing at 4 percent, and at a much higher rate compared to colorectal and lung cancer.

Possible contributing factors to the rising incidence include the trend of career-minded women starting family at a later age and having fewer babies, and a more affluent lifestyle of increased red meat and alcohol consumption. According to the National Health Surveillance Survey in 2007, more than 80 percent of women aged 40-69 were aware of the importance of mammography, as compared to 51.5 percent in the survey conducted in 2001. However, there hasn’t been a similar improvement in the uptake of mammography. The 2007 survey showed that only 41 percent of women aged 50-69 reported going for a mammogram in the past two years. More needs to

be done to encourage women aged 40 and above to attend regular screening mammography.

It is encouraging that breast cancer awareness has improved over the past 10 years, but awareness per se

does not lead to early detection. Women still need to have regular screening mammography so that breast cancer can be detected before it becomes symptomatic or palpable. And since the launch of the national breast screening programme, BreastScreen Singapore, in January 2002, the proportion of early stage breast cancer has increased markedly. National figures are not available but based on NCCS figures (which comprises approximately half of all breast cancers in Singapore), 80 percent of the breast cancers are now diagnosed in the early stages.

The recommended tool for breast cancer screening is still mammography. Women aged 40-49 should have annual mammogram and those aged 50 and above at least once every two years. MRI breasts is recommended for select groups of women who are at extremely high risk of developing breast cancer (for example, those who have inherited genetic mutations which markedly increase the risk), or in whom mammography is not useful (those who had breast enhancement with free oil/silicone injections into the breast tissue, for instance).

There are newer technologies being researched, such as thermography and ultrasound elastography. However, these modalities are not recommended as screening tools as they have not been shown in large clinical trials to reduce mortality rate from breast cancer.

Sentinel lymph node biopsy (SLNB) has benefited many women with early breast cancer. This is a minimally invasive surgical technique to determine if breast cancer has spread to the axillary lymph nodes. Previously, most or all lymph glands in the axilla on the same side as the cancer were removed, aka axillary clearance, even if there was no spread to the lymph glands. This surgery may result in numbness in the axilla and arm, chronic shoulder pain/stiffness and possibly the most significant morbidity of lymphoedema (arm swelling). SLNB which removes no more than 3-4 lymph nodes, provides an accurate assessment with significantly reduced risk of complications associated with axillary clearance. SLNB is now the standard of care for most women with early stage breast cancer (invasive cancer measuring not more than 5cm) and in whom no enlarged axillary lymph node is palpable on clinical examination.

In Singapore, a common misconception among women is that they are safe from breast cancer once they reach menopause. On the contrary, the risk increases with age. The peak incidence here

is in the 55-59 age group. The risk of developing breast cancer in our lifetime is approx 7-8 percent.

The most common symptom is a painlessbreastlump.Again,women should NOT wait for a symptom before they have their breast check. Screening mammography should be done when women do not have symptoms. Only then can breast cancer be detected in its earliest stage.

Knowing what's good for your Heart



By A/Prof Terrance Chua, chairman of the Board of Directors, Singapore Heart Foundation

Heart disease continues to be a major burden, especially in an ageing population such as Singapore's. There has been much progress and the age-specific risk of heart attack is actually on the decline (which means that your risk of suffering from a heart attack is actually lower as compared with someone of your own age ten years ago), but because there are now a larger proportion of elderly people in the population, and the risk of heart attack increases with age, the absolute number of people suffering from heart diseases is not decreasing in Singapore. Moreover, there are many people who survive heart attack but are

burdened with complications such as heart failure.

Coronary heart disease is by far the most common form of heart disease in Singapore. Urbanisation, changes in dietary patterns and reduced amount of exercise are the major factors that may have contributed to the prevalence of heart diseases. And as you get older, the risk goes up. Those who are more at risk include diabetics, smokers, those who do not exercise regularly, the overweight and those with high cholesterol levels.

Singapore was a participant in the INTERHEART study, a global case-control study which has shown that the major risk factors include high cholesterol, high blood pressure, diabetes, smoking, obesity, lack of exercise, and psycho-social stress.

These factors are very much lifestyle-related – in an industrialised world, we are less physically active and food has become more easily available, which leads to the troubling trend of people eating more and exercising less. Stress-related factors for heart diseases are also increasingly being recognised, but these are perhaps a bit harder to analyse. And there may be other risk factors that are still being explored, such as air pollution.

There is some data from overseas studies to suggest that particulate matter in the air may also be a risk for heart attacks.

What are the symptoms of a heart attack? In a heart attack, the patient often develops chest discomfort or tightness in the chest, which lasts for more than 15-20 minutes. It might be accompanied by shortness of breath and sweating. Although there are other causes of these symptoms, these are very suggestive of a heart attack. If you have these symptoms, you should seek medical help urgently.

The second type of symptom that suggests heart disease is a discomfort that comes when you exert yourself, and is relieved when you rest for 5-10 minutes. This is very suggestive of “angina pectoris”, which indicates a narrowing of the arteries to the heart. If you experience this, you should see a doctor without delay.

Unfortunately, not everyone presents with such typical symptoms. For older people and sometimes women, the symptoms tend to be less typical, particularly if the patient suffers from diabetes.

The treatment for heart diseases has truly undergone much progress over the past two decades. Developments include the widespread use of procedures such as bypass surgery and the ballooning or stenting of arteries. These treatments have helped people with severe heart disease whose symptoms cannot be controlled by medication alone. For

those with damaged hearts with an increased risk of sudden collapse, we can now provide implantable defibrillators and other new devices to help re-programme the way the heart contracts. These medical breakthroughs are particularly helpful for patients with severe heart disease.

For people with less severe conditions, other forms of treatment that have been of proven value but are perhaps less well emphasized are the new drugs that lower cholesterol or reduce the risk of blood clotting. Very consistent data from multiple studies over the past twenty or thirty years show that cholesterol-lowering with medication lowers the risk of dying from heart attacks. This has been a very positive development in terms of reducing risk but it is certainly less glamorous or exciting than stenting or surgery. There also seems to be unfounded fears circulating among the public in Singapore that there are significant risks associated with cholesterol lowering medicine. On the contrary, the data has showed that these medicines are safe and

effective at lowering the risk of heart attack.

What we consume in our diet is very important to helping us reduce the risk of heart attack. Most Singaporeans do not eat enough fruits and vegetables, and we tend to consume too much processed meat, excessive salt and fried food with high cholesterol. A healthier diet with more fruits and vegetables is definitely recommended.

There is no magic cure in terms of supplements that can stem off heart diseases. All of us should try to adopt a healthy lifestyle starting from young; we should stay physically active and exercise daily for at least half an hour, as exercise is generally good for the heart. Smoking should be avoided, and try to maintain an ideal weight. Regular screening for high cholesterol, diabetes, and high blood pressure is also strongly encouraged, especially for anyone above the age of 40 or those with risk factors that are closely associated with major risk of heart disease.

The theme for this year's World Health Day campaign, to be held on April 7-11, will focus on urban health matters and the effects of urbanisation on global health. Under the “1000 cities, 1000 lives” initiative, the campaign aims to open up public spaces to health and showcase stories of urban health champions who have had a significant impact on health in their cities.

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WHD CAMPAIGN

Protecting against Brittle **BONES**

Osteoporosis is a bone disease that is expected to become increasingly prevalent in ageing populations. Dr Manju Chandran, Exco member of Osteoporosis Society Singapore, updates *Healthy Times* on how the disease is impacting Singaporeans.

Singapore has one of the fastest aging populations in Asia. It is not known exactly how many suffer from osteoporosis in Singapore as most people do not know until they sustain a fracture usually in the hip, spine or wrist.

But estimates from local bone density data suggest that 30 percent of women above the age of 65 have osteoporosis and by the age of 80, 50 percent or more may have osteoporosis. The increase in the incidence of hip fractures in women here may also be a sign that the condition is on the rise as hip fracture incidence in those over the age of 50 has increased five times from the 1960s to the 1990s.

With one in three hip fracture victims suffering considerable loss of function and one in five dying within a year of sustaining the fracture because of complications from the fracture or the resultant surgery, this situation is a big concern.



Common risk factors

Risk factors for osteoporosis in Singapore are quite similar as in the rest of the world. A prior history of fragility fracture as an adult, history of osteoporotic fracture in an immediate relative especially ones' mother, low body weight, a history of cigarette smoking, heavy drinking, chronic use of steroid medication, and lack of regular exercise are some of the common risk factors.

It is slowly dawning on people that osteoporosis is not just an old woman's disease. Younger women as well as men may also be affected.

Awareness and knowledge about osteoporosis is slowly increasing in Singapore though it is far from adequate. The efforts made by local societies, such as the Osteoporosis Society Singapore in holding public forums and coverage by the media, have resulted in increasing awareness. Unless adequate measures are taken to continue educating the public about osteoporosis and its grave consequences, it is going to impact the general well-being of Singaporeans in a big way especially considering that our population is aging rapidly.

At the same time, increasing research is being done in the field of osteoporosis. Recent breakthroughs include the development of fracture risk assessment tools like the FRAX that help identify the 10-year risk of developing an osteoporotic fracture and the development of newer classes of medications that can better target the basic problem that leads to osteoporosis i.e. increased bone loss or inadequate bone formation.

Prevention

The best way to combat osteoporosis is through the right kind of exercise and diet. To prevent osteoporosis, one needs to do weight bearing exercise—activities that load ones bones with body weight and stimulates formation of bone cells. These include jogging, hiking, stair climbing, racquet sports or resistance exercises like push ups and weight lifting. They should be done for at least 30 minutes, at least 3-4 times a week. Diet wise, it is important of get enough Calcium. Adequate sunshine exposure is also important. Sunlight is the best source of Vitamin D since it is difficult to get enough Vitamin D from food sources.

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Better ASTHMA

Asthma is a common disease affecting people of all ages worldwide. World Asthma Day, which falls on May 4, is an annual event to generate asthma awareness and care around the world. “You Can Control Your Asthma” is the theme of this year’s campaign, and Healthy Times got in touch with the Asthma and Allergy Association and several health professionals for what you need to know to control asthma better.

Asthma can be defined as a chronic disease of the lungs, in which the sufferer experiences episodes of shortness of breath between periods of normal breathing. While not contagious, it is a common disease, and untreated asthma may lead to permanent damage to the lungs.

In Singapore, it is estimated that about five percent of adults and 20 percent of children have asthma. The disease is believed to be on an uptrend. According to the International Study of Asthma and Allergies in Childhood (ISAAC), the prevalence of childhood wheeze, a surrogate marker for asthma, in Singapore was 10.2 percent (ages 6-7) and 11.9 percent (ages 12-15) in 2001. Indeed, based on ISAAC studies done in several countries on the prevalence of asthma symptoms, developed countries seem to have a higher prevalence of asthma cases than less developed countries.

Asthma can be broadly divided into two main categories: those caused by allergy to environmental allergens (atopic) and those without apparent allergies (non-atopic). The exact cause of asthma is unknown but epidemiological

studies have indicated that genetic factors, coupled with environmental factors, play an important role.

Various environmental aeroallergens are known to play a role in triggering or worsening allergic rhinitis, asthma, and atopic eczema, although these are often not the sole cause of these chronic inflammatory conditions.

Asthma and Allergy Association (AAA) is a community-based organisation formed to facilitate patient education in Singapore and to increase awareness of various allergic diseases including asthma. Dr Cheng Yew Kuang, AAA president, further updates us with his medical perspective on the treatment of asthma. (website: www.aaa.org)

The treatment of asthma is a collaborative effort between the doctor and the patient and his or her family. The responsibilities of the doctor is to make a correct diagnosis, prescribe treatment appropriate to the severity of the disease and to equip the patient with knowledge to prevent and treat asthma.

The patient’s responsibilities are to adhere to the treatment, report any side effects from the medications he or she may experience, and to provide the doctor with a guide to the level of disease control.

Because asthma is incurable, the aims of management are to maximise the patient’s health status, provide means for initiating rapid treatment



CONTROL

for attacks, and to prevent long-term complications of the disease. Over the years, it has been established that the delivery of medications directly to the lungs by means of inhalers (or similar devices) is the best way of treating asthma because of its efficacy and safety.

“Reliever” medications include salbutamol and terbutaline, and these are useful for relaxing the tiny muscles in the airways, thereby increasing their diameter. They work very quickly (in a matter of minutes) and are useful during an asthma attack. They are used during an attack or in anticipation of an attack (for example, prior to a run for exercise-induced asthmatics).

“Preventer” medications are usually corticosteroids. There are many forms including beclomethasone, triamcinolone and fluticasone, and they act by reducing the inflammation in the lungs. They act slowly (in hours) and have prolonged effects. They should be used even when the patient feels perfectly well because these drugs keep them in good health. By reducing inflammation, they make the lungs less sensitive to triggers that can lead to airway narrowing and reduce long-term complications of asthma, particularly stiffening of the lungs. Doctors generally provide written instructions about how these drugs should be used during normal lung function and during attacks.

Leukotriene antagonist : Leukotrienes are fatty molecules of the immune system that contribute to inflammation in asthma and bronchitis. Leukotriene antagonists are used to treat asthma and bronchitis. Examples of these drugs include montelukast and zafirlukast.

Theophylline: For many years before the arrival of inhaled corticosteroids and long-acting bronchodilators, a commonly used medication was theophylline. Those individuals who are still on this medication require careful monitoring.

Anticholinergic agents: Although not usually used as a first-line bronchodilator to treat chronic asthma, anticholinergic agents have been used with beta-agonists for the emergency treatment of acute asthma exacerbations. They are available in inhaled form and can be used alone or combined with the beta-agonist bronchodilators.

An important breakthrough in asthma treatment is the Anti-IgE antibody. The IgE antibody is responsible for causing symptoms of allergic disease. Omalizumab is a class of drugs, known as “anti-IgE”, for patients with moderate to severe persistent allergic asthma. Anti-IgE may reduce allergic reactions by binding free IgE because IgE cannot produce an allergic reaction. In many cases, omalizumab has been shown to reduce the need for inhaled corticosteroids, while protecting against allergic disease symptoms.

COMMON TRIGGERS OF ASTHMA ATTACKS

According to Dr Cheng, some of the common allergens that trigger allergic rhinitis and asthma in Singapore include:

- a. House dust mite: the allergen is found within the droppings of these microscopic creatures. Dust mites are found throughout the house, but they especially thrive in high humidity and in areas where human dander (dead skin flakes) is found. In Singapore, they are prevalent year-round, where they are more prevalent during the winter months in temperate countries. House dust mite is the most prevalent allergen in Singapore.
- b. Cockroaches: the allergen is found within the droppings.
- c. Animal dander (cat and dog): people are not allergic to the animals’ hair, but rather, to a protein found in the saliva and dander. These proteins are carried in the air on very small, invisible particles.
- d. Indoor moulds: the allergen is in the spores released by these moulds.
- e. Grass and tree pollen: these are very different from the grass and tree pollen found in temperate countries. In Singapore, the common ones include oil palm pollen and resam fern spores

The Asthma and Allergy Association is partnering Singapore National Asthma Program for **World Asthma Day**. The tentative details of the programmes include a public forum on May 8 at the HPB auditorium. the forum highlights the management of asthma in the community, how child asthma can be controlled, a young patient’s experience in coping with his asthma and a video on “self management”. Other activities include asthma screening, education, smokerlyzer-smoking-cession counseling and games. Find out more at www.aaa.org

Asthma is a common inflammatory condition affecting children, and its prevalence seems to be on an uptrend. Dr Mahesh Babu, consultant physician at the Division of Paediatric Pulmonary, Sleep and Critical Care, University Children's Medical Institute of the National University Hospital, shares his perspectives on the management of asthma in children.

Managing Asthma in Children

Healthy Times: Can you give us an update on the prevalence of asthma cases among children in Singapore? What are the social and environmental trends that have accounted for the increasing number of asthma cases in children?

Dr Mahesh: Asthma is the most common chronic respiratory condition in children. In Singapore, as many as one out of five children suffer from asthma. The prevalence also appears to be increasing around the world. The reasons for this trend are not fully understood but are believed to be due to multiple factors related to the environment. Urbanisation, changing lifestyles, and widespread use of medications (including antibiotics) have been suggested to be contributory factors. We now also know that genetic propensity is also one of

the risk factors, with asthma being more common in families with significant parental allergies.

Asthma in childhood is closely related to airway allergies. It often occurs in association with other allergic conditions such as allergic rhinitis (allergic or sensitive noses), atopic eczema (allergic skin rashes) and allergic conjunctivitis (itchy sensitive eyes). Allergens and irritants can trigger asthma as well as the associated allergies in children. Common allergens are house dust mite allergens. Other allergens include cat and dog allergens, cockroach allergens.

Food allergies are not common in asthma (and certainly much less common than believed). The triggers of asthma include the above allergens as well cigarette smoke, pollutants and some chemical irritants as well as viral infections. Exercise can be a trigger in some children with asthma (exercise-induced asthma) but can usually be easily treated. Similarly, strong emotions (crying, laughing) as well as stress can also trigger asthma. Overall, good

asthma control will reduce or even prevent some of the triggers from exacerbating the condition.

HT: How does the management of asthma differ between adults and children suffering from the disease?

Dr Mahesh: We now recognise that not all children with asthma are the same. There appears to be multiple subgroups – which are still being unraveled. The good news is that not all children less than five years who wheeze are asthmatic. There are many children who wheeze mainly with viral infections and do not have a significant family history. This group of children tend to get better with age, with a majority outgrowing their symptoms by the age of three. So, the duration of treatment in many children is much shorter than adults. The dose of medications is also much less in children. Even though children, like adults, start on inhalers as first line of medication, children require spacers with their inhalers to get the best effect.

HT: What are the common methods available for young sufferers to help them in dealing with the disease?

Dr Mahesh: There are extremely safe medications and treatment methods available to treat children with asthma. Inhaled medications continue to be the first line of choice. Inhalers give medications in micrograms (rather than milligrams as in oral medications), and it is also a very targeted device, with the medications reaching mainly

the respiratory tract where it is required, hence minimising side effects. The use of spacers/holding chambers with inhalers further helps in better delivery of medications to the respiratory tract.

There are two main types of medications available. One type is called relievers (universally colour coded as blue inhalers) which are to be used only when the child has the symptoms. But this medicine, though it gives temporary relief to the children, does not take care of the underlying disease process. Hence, we use the second type of medication called controllers (universally colour coded as orange or brown inhalers). These have to be used for a much longer duration of, at least a few months to years, irrespective of whether the child has symptoms or not. Most of these controllers are mild steroids, but have proven to be very safe with almost no side effects when used in appropriate doses.

There are also some oral medications that can be used as controllers – but these do not appear to be as effective as the inhalers.

Parental education and allergy avoidance also play a major part in managing children with asthma. If the inciting allergens can be recognised, then avoiding exposure is the best solution. The goal for management for children is to let them enjoy their childhood just like their peers, with minimum medications, while making sure that their symptoms are well controlled. They should be encouraged to take part in all physical activities like their peers.

MAJOR SYMPTOMS OF AN ASTHMATIC EPISODE IN CHILDREN:

- Wheezing
- Shortness of breath
- Tightness in the chest
- Coughing, especially cough that occurs frequently in the middle of the night and after exercise or activity such as playing and laughing



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Traditional Cure for Colds



Since the ancient times dating back to 5,000 years ago up till today, Traditional Chinese Medicine (TCM) has been successfully treating respiratory system ailments such as upper respiratory tract infection or common cold/flu, known in TCM as “Gan Mao” (感冒). *Healthy Times* finds out more from Si En TCM Medical Clinic.

The common cold is one of the most prevalent illnesses worldwide, with nearly everyone suffering from it at some point in their lives. And the credit for determining the successful remedy for this illness must go to the ancient TCM doctors and physicians who developed a deep understanding regarding the treatment by studying its progression in their patients and striving for full recovery.

Gan Mao(感冒) refers to the acute inflammation and infection of the patient’s nasal cavity as well as infection of his or her larynx. It is easily one of the most infectious diseases to have ever beset mankind and is caused 90 percent of the time by the flu virus. Although bacterial infection is sometimes known to be part of the secondary causes as well.

The possibility of infection by the common cold is not confined, restricted or limited to any particular time periods/epochs or geographical locations. It is spread through droplets and nasal fluid containing the virus from an infected person to others near-by. There is also a chance of others getting infected as the droplets of infected nasal fluid find residence on common appliances in living and work spaces.

Often, the onset of common cold results in the weakening of the immune system and the patient

feeling fatigue. The situation is further aggravated in cool and rainy environments. The existing intruding virus or/and bacteria in the patient’s body will grow and reproduce itself rapidly, leading to the progression and development of the illness. The medical prognosis for the common cold with such symptoms is generally good with recovery expected in five to seven days as the patient’s immune system fights back.

TCM treatment of common cold

According to the TCM tradition, there are four kinds of Gan Mao: wind-cold (风寒感冒) and wet type (风热感冒), summer-heat type, deficiency type (暑湿感冒) and weakness type (虚型感冒). Each may be classified and recognised by the nature of the blood and phlegm that comes along with it. While the highly combative western medicine focuses on ridding the body of the intruding virus and easing various symptoms of the common flu, TCM has a more holistic, all-inclusive treatment paradigm. It focuses on the general overall condition and well-being of the body by expelling wind and cold and reducing the dampness in the body. TCM also focus on eliminating phlegm, improving digestion and controlling fever. These measures help the immune response of the body to combat the intruding flu viruses and aid in a fast and full recovery.

Numerous research studies in recent years have confirmed that TCM prescriptions have significant effects of varying degrees on the different strains of the Gan Mao viruses. These prescriptions are known to have anti-virulent and anti-bacteria potency and capabilities. Like Herba Shizonepetae (荆芥), which has been used by TCM physicians to treat feverish hurt and nasal congestion since centuries, contains a volatile fibrous oil component that acts as an anti-complement to the influenza virus. Another one, Forsythiaside (连翘) has a strong and beneficial reaction against influenza activity; and Ionicerae (金银花), with its strong anti-Coxsackieviral effects, contains the extra cellular viral inhibitor- echo30. Commonly used TCM common flu prescriptions for reducing heat contains Daqingye (大青叶), Banlangen (板蓝根) that has been long recognised for their anti-viral effects.

Therefore the use of these TCM herbs containing the above mentioned chemicals in the treatment of Gan Mao is well aligned with, both the Eastern and Western medical treatment principles. So in conclusion, the frequent misuse and abuse of antibiotics should be curtailed by promoting the use of TCM prescriptions as a more beneficial clinical alternative in the treatment of common flu.

Listed below are some of the basic do-it-yourself (DIY) TCM prescriptions to treat the wind-cold and wind-heat type of Gan Mao. But an accurate medical diagnosis will have to take into account the age, physical fitness, and the medical condition of the patient. Hence patients who are severely ill should seek medical attention immediately.

It is recommended that patients down with Gan Mao, should take rest, drink plenty of water, and consume more green tea. Choices of food during the illness or during convalescence should always be simple, plain in taste as well as easily digestible. Drinking fresh brine, warm water, having an alcohol scrub over the body and an ice pack should help to release excess

heat. Patient should avoid rich oily, spicy food and avoid intense physical exertion.

DIY TCM Dietary Tips

1) Wind Cold type Gan Mao (风寒感冒) : use Ginger-50g, Brown Sugar-30g, Welsh-30g, Preparatum-15g with three bowls of water, a bowl-a-half to drink. Soak feet in with ginger added and let body become sweaty. The patient will feel better.

2) ShenXian Porridge (神仙粥): Ginger-6g, Plain White Rice-100g (wash thoroughly), boil for a couple of hours and then add evenly chopped Welsh-30g, continue to cook while adding rice vinegar-10ml, boil some more until it is hot. Body should be fully covered with clothing while taking rest to induce sweating. The patient should be kept away from cold environment. This recipe can also be used to deter the onset of Gan Mao(风寒型感冒).

3) Lu Geng Tea Chrysanthemum (菊花芦根茶): Chrysanthemum (菊花)-6g, Lu Geng (芦根)-21g. Use boiling water and brew for 15 mins and drink, can be taken few times a day as beverage, suitable for heaty GaoMao(风热型感冒).

4) Thin Mint-Chrysanthemum Porridge: Mint (薄荷), Chrysanthemum, Lonicerae extraction-9g, Lophatherum-6g, anti-implantation, allow porridge to slag for five minutes after filtering out juice. To be taken twice a day during the treatment. Used to relieve the wind-heat type of “Gan Mao” (风热型感冒), Common Cold/Flu.



Physician Teo Hwee Chin graduated from the Singapore College of Chinese Medicines and has more than 12 years of experience practising TCM clinical medicine. She is an undergraduate of TCM Masters degree from Nanjing University. For more information, please visit www.sientcm.com.



why see a Gastroenterologist?

Gastroenterology is the branch of medicine that deals with the study of normal and abnormal functioning (diseases) of the oesophagus, stomach, small intestines, colon and rectum. And a Gastroenterologist is the one who studies the movement of food material through the tubular organs like stomach, intestines and colon (motility); as well as the digestion of food and absorption of nutrients into the body and the handling of waste material that is ultimately expelled out of the body.

A Gastroenterologist is therefore a specialist physician who studies and treats diseases of the entire digestive system. Additionally, Gastroenterologists are also Hepatologists – specialist of the liver because Gastroenterology also deals with the associated organs of digestion such as the liver, gall bladder, bile ducts and pancreas. One of the Gastroenterologist’s most important responsibilities is the detection of cancer in its early stage. Various cancer diseases of oesophagus, stomach, colon, rectum and liver can all be successfully treated, if detected early.

This is done by ‘Endoscopy’, which is one of the most reliable methods of detection of gastrointestinal diseases. The endoscope is a thin, flexible tube fitted with a camera and light guides that is gently inserted

through the gastrointestinal tract to provide a clear picture of the insides of the oesophagus, stomach, duodenum and colon. While the upper digestive tract, including the oesophagus, stomach and duodenum is examined by Gastroscopy, the large intestine or colon is examined by Colonoscopy.

A great advantage of Endoscopy is that special instruments can be passed through the endoscope to take biopsies, remove growths such as polyps (polypectomy), remove tumours without surgery, stop bleeding lesions by injection or cautery (haemostasis), stretch narrowed areas through dilatation, place stents through blocked tubes and remove gallstones from the bile ducts through a special endoscopic procedure called ‘Endoscopic Retrograde Cholangio-Pancreatography’.

Endoscopic laser or argon-plasma beam therapy can also be applied through the endoscope to burn away cancers or arrest bleeding. Also, the small bowel, which was previously inaccessible, can now be examined by Capsule Endoscopy or a new technology called Balloon Endoscopes.

Another technique known as ‘Endoscopic Ultrasound’ is used to examine in detail the walls of the digestive tract, or associated organs such as pancreas or bile ducts using an ultrasound device affixed to the head of an endoscope.

Now, the question is: what makes Gastroenterologists unique as a specialty group, when other doctors such as general practitioners, internal medicine specialists and surgeons also deal with diseases of the digestive tract? For one, the highly focused training of a Gastroenterologist helps in providing high quality comprehensive care for a wide range of gastrointestinal ailments at a high level of competence, especially in endoscopy. In fact, Gastroenterologists concentrate their practical skills entirely on endoscopy and indulge in no other surgical procedures. Also, the bulk of research involving gastrointestinal diseases, endoscopy, and the interpretation of endoscopic findings is done by Gastroenterologists worldwide. Because of the prevalence of ‘functional diseases’ like non-ulcer dyspepsia and irritable bowel syndrome, or ‘invisible’ diseases like malabsorption syndromes, Gastroenterologists are specially trained to evaluate patients who have no endoscopic signs to explain significant symptoms. These categories of diseases are often the most difficult to evaluate and successfully treat.

So who needs a Gastroenterologist?

There are a number of digestive tract related symptoms for which if bothersome or persistent, a patient should seek a Gastroenterologist’s opinion. Some symptoms – either alone or in combination – that may require further investigation include:

- Abdominal pain

- Heartburn, reflux of acid or stomach contents into the throat
- Bloating or distended sensations in the abdomen
- Difficult or painful swallowing
- Constipation or diarrhoea or any significant change in bowel habit
- Vomiting of fresh or altered blood
- Passing of fresh or altered blood from the rectum
- Loss of appetite or weight, general lethargy or lack of wellness
- Jaundice (yellowing of the skin and whites of eyes)
- Dark-coloured urine
- Pale-coloured stools

In addition, it may be appropriate for some asymptomatic patients to seek screening to exclude any chance of cancer. These include persons with a family history of cancer (especially colorectal cancer), polyps or some known risk factors, or ones with some significant abnormality in their blood tests done as part of a general health screen. For colorectal cancer, anybody around the age of 50 or above, who has never been screened for the disease, should consider colonoscopy. This is essential since the prevalence of colorectal cancer in our population is high, with probability of contracting the disease rising sharply above the age of 50.



Dr Tan Chi Chiu
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Minimally Invasive Fracture Fixation

– SCIENCE, ART OR WIZARDRY?

With the growing interest in the surgical benefits of minimally invasive fracture fixation, Dr Toh Choon Lai shares some of the most recent developments in this field.

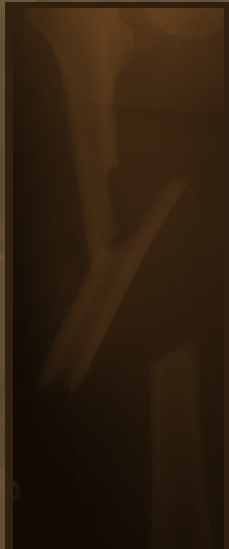


Fig 1: Severe fracture of the shaft of the femur (thigh bone)

The use of minimally invasive fracture fixation seems to have escaped the notice of most people who are not involved in the medical field. In fact, doctors and even orthopaedic surgeons not directly involved in this technique may not know much about it as well. The benefits of this technique are obvious, and it has generated tremendous interest amongst surgeons sub-specialising in musculoskeletal trauma.

It makes one wonder why there is so much hype about keyhole surgery for other surgical conditions, when actually long bone fractures (i.e. fractures of the humerus, femur and tibia) are probably most effectively treated using minimally invasive methods.

Since the eighties, intramedullary nail fixation (using a rod in the marrow canal of long bones through small incisions) have been the standard of cure for these fractures in developed countries (refer to figure 1 and 2).

However, these devices are most effective for fractures in the middle of a long bone (mid

-shaft fractures). And attempts to extend this technique for fractures beyond the mid shaft have been mired with difficulties.

More recent developments in the surgical technique, implants and instrumentation have also extended the use of keyhole techniques for more difficult and varied fractures. These use plates instead of intramedullary rods and are called Minimally Invasive Plate Osteosynthesis (MIPO). (Figures 3, 4 and 5)

I was lucky to be involved in the development and teaching of these techniques from the onset and would like to share some of these developments with those who might find interesting.

The science (mechanobiology)

Our understanding of how a fracture mends and what is required for a limb and the patient to regain full functionality has improved over the past two decades – and the benefits of keyhole surgery for mending long bone fractures have been scientifically proven.

In summary, a broken bone needs to be held in position without too much movement. Some minimal micro motion across the fracture fragments is all right but beyond this, the fracture does not heal.

The amount of micro motion allowed varies with the fracture pattern and it is beyond the scope of the article to discuss this in detail. Suffice to say that fractures heal with a tolerable amount of micro motion, which may in fact be good to stimulate healing.

The second principle of long bone fixation is that in most cases we only need to maintain axial alignment, rotation and length for normal functioning. There is no need to put every piece of bone back to its original position like a jigsaw puzzle.

In fact, it may be harmful to try and attempt to fit everything back as we would have to expose the fracture so extensively that we would, in the process, strip the bone of its blood supply, which is essential for the bone to mend.

Fracture fixation has thus evolved from being very rigid to the present day concept of sufficient fixation, achievable with minimal exposure of the fracture fragments in order to preserve blood supply (Figure 6 and 7). And keyhole surgery more than fulfils these criteria resulting in faster bone healing.



Fig 2: Fixation with an intramedullary nail. This is a good “minimally invasive” technique, which has been used since the 1980s



Fig 3: Incision of a “helical” plate for fixation of a severely comminuted fracture of the humerus through a small proximal incision



Fig 4: Final incisions after completion of fixation



Fig 5: X-rays of fixation. This patient had a previous fixation of the distal humerus (arm bone). The new fixation achieved axial alignment, length and normal rotation. However, no attempt was made to realign the multiple fragments in the middle of the bone.

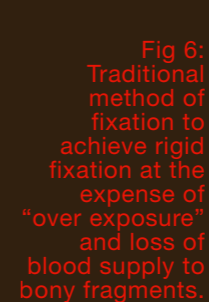


Fig 6: Traditional method of fixation to achieve rigid fixation at the expense of “over exposure” and loss of blood supply to bony fragments.



Fig 7: Minimally invasive plate fixation achieved with small incisions, preservation of soft tissue and no exposure of the fracture site



Fig 8:
Fixation of the distal femur with a Less Invasive Stabilization System (LISS) distal femur plate. Notice the black carbon fibre drill guide, which allows placement of screws through small puncture wounds



Fig 9:
Surgical dissection of the shoulder showing the proximity of the axillary nerve to the plate and screw placement location

The art

As discussed earlier, not every fracture fragment has to be reduced and fixed like a jigsaw puzzle. In determining the fragment that does not require reduction and can be left alone without jeopardising fracture healing, the process can be explained scientifically. Although it may seem more like witchcraft and wizardry to the uninitiated.

Unfortunately, every fracture pattern is different, and there are no textbooks which can fully encompass all types of fractures and explain the process of determining which fragments need fixation. The learning curve is steep, and it takes time and experience before one becomes confident of leaving fragments without fixing them as the natural tendency is to fix all the fragments together.

Perhaps it is for this reason that some surgeons choose to describe minimally invasive fixation as an art rather than science.

Additional benefits

It must be stressed that the cosmetically pleasing – small incisions of keyhole surgery is not the main reason for the development of these techniques. However, it may be an important consideration to the patients.

By using small incisions, we also minimise further trauma to an already injured limb. Besides preserving the blood supply to fracture fragments, small incisions also reduces damage to the soft tissue (i.e. skin, fat and muscles) by covering the bone resulting in less postoperative pain, less risk of infection and shorter healing time.

Implants and instrumentation

Newer implants are specifically designed for the fracture they are supposed to fix. While it may involve a larger inventory for the hospitals since each part of a bone has a different implant, these implants definitely make surgery a lot more precise (Figure 8).

The latest implants and instrumentation have certainly made minimally invasive fracture fixation a viable option in many situations.

Development is still in progress and newer implants and instruments are being produced every year. Nevertheless, it is still possible to adapt conventional implants for minimally invasive fracture fixation if one understands the basic mechanobiology of these techniques.

Hazards and difficulties

The limited exposure provided by the small incision also makes the surgical technique more demanding. Espiecially, the vital blood vessels and nerves may lie very close to where we are trying to put the implant and are at risk of being damaged during surgery (Figure 9).

The reliance on intra operative imaging also exposes the surgeon to x-rays radiation. This risk may be reduced with the use of computer navigation.

Finally, as in any surgical procedure, there are many potential problems and one should not attempt such procedures unless properly trained.



Dr Toh Choon Lai is a senior partner in Orthopaedic Associates, an orthopaedic surgery private practice group in Mount Elizabeth Hospital. He has also authored and co-authored numerous publications in local and international journals. Despite his busy schedule, Dr Toh still maintains an active interest in teaching orthopaedic surgery and lectures regularly in the region. Having been in private practice since 2000, Dr Toh is also the second vice president of the Singapore Medical Association.

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THE OCULOPLASTIC SURGEON IS IN (PART 2)

Inturned Eyelids - Entropion

Entropion is a condition where the eyelid margin turns inwards to cause the lashes, and the margin, to rub against the eyes. It can occur both in the lower eyelids, or less commonly affect the upper eyelids.

The condition is caused mainly by involutinal/ ageing changes affecting the eyelid tissues, or as a result of scarring/cicatricial changes affecting the back portion of the eyelids. Congenital entropion is a less common subtype caused by an excess of skin or the muscle around the eyelids, the orbicularis oculi.

Patients present with tearing, ocular irritation and redness or even with frequent discharge from the eyes. If not addressed, the constant rubbing can lead to a breakdown in the surface of the cornea, resulting in abrasions, or worse, corneal ulcers.

In many instances, as the condition is prevalent among the elderly who also have problems of cataract, entropion needs to be treated before such patients undergo cataract extraction procedures because a clean ocular surface is a necessary pre-requisite to reduce the risk of eye infection following cataract extraction.

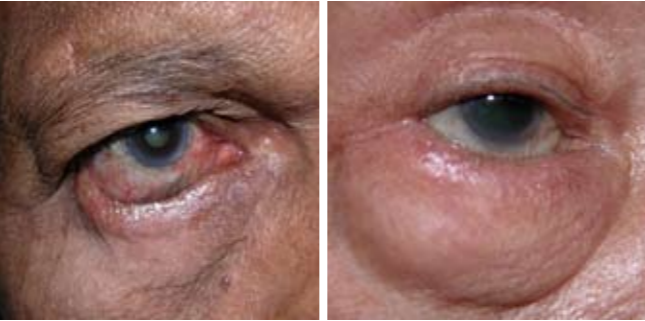
Treatment consists of measures to address the root causes of the problem, for example, tightening of the lower lid tendons or repair of the muscle that has been weakened due to age (the inferior retractor).

The procedure is done under regional anaesthesia

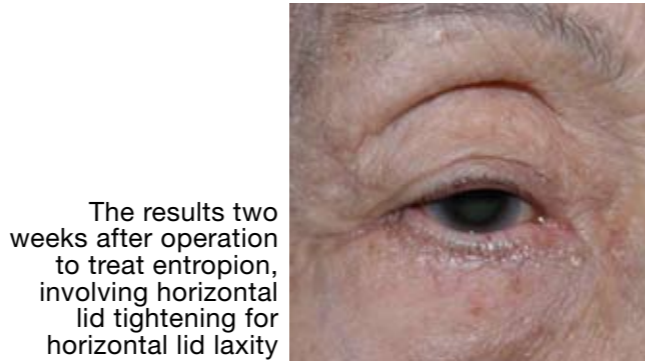
In the second article of this two-part series, Dr Chuah Chin Tek discusses malpositions-entropion and ectropion, and tumours of the eyelids

(similar to local anaesthesia except that the anaesthesia involves a wider region), almost always as a day surgery procedure.

Downtime is about a week, whereupon the sutures are removed and the patients can go back to bathing the region around the eyes.



Photos showing entropion cases



The results two weeks after operation to treat entropion, involving horizontal lid tightening for horizontal lid laxity

Photo copyright: Dr Chuah Chin Tek

Epiblepharon

This is a common condition especially among Oriental children. The end result is the same as with entropion, i.e. lashes rubbing against the cornea, but the condition is actually the result of the muscle and the skin covering the eyelid (tarsal plate) overriding the eyelid margin, thereby pushing the eyelashes inwards, and not because the eyelid margin is turned inwards.

Fortunately, as the face matures and generally, elongates, this condition resolves spontaneously. Surgery is only indicated if the condition is so severe that the lashes rub against the cornea, thereby potentially developing a corneal ulcer.

Out-turned Eyelids-Ectropion

Ectropion is rarer compared to entropion. It is also caused frequently by loosening of the tendon of the lower eyelids, akin to a tennis net that is loose.

Patients present with irritation and discomfort, due to the exposure of the tarsal conjunctiva, and often look dramatically different (as the accompanying patient photos illustrate).

Treatment is directed again at the root causes of the condition with a similar downtime as entropion surgery.

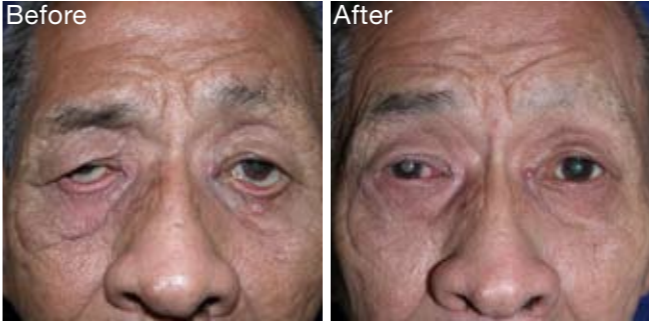


Photo copyright: Dr Chuah Chin Tek

This 61-year-old man was working in the restaurant business when he lost his job because the customers complained that he looked “unhygienic”. Two months after operation, his appearance has improved to an extent that he has regained his confidence – he wrote to the doctor thanking him and said the operation has given him hope to resume working at a restaurant.

Lumps and Bumps of the Eyelids

While most lesions of the eyelids are benign, it is nevertheless important not to miss the occasional malignancy. It is also important to understand the pathophysiology of the infective conditions so as to minimize future recurrence.

Stye/chalazion

At some point in our lives, we most certainly have had one of these lesions as they are one of the commonest problems affecting the eyelids, albeit a painful experience. When the infection is acute, it is a stye; but with time, the infected lesion undergoes granulomatous transformation to become a chalazion.

The condition can affect the > 20 oil glands lining the lid margin, or the oil gland situated with our eyelid hair follicles. When detected early and proper treatment instituted, one might be able to avoid having have a doctor incise and drain the lesions when the gland openings becomes irreversibly clogged. Patients can also do hot compresses with a warm towel which in many instances, will encourage the pus to spontaneously expel itself.



Photo copyright: Dr Chuah Chin Tek

Stye

Tumours of the Eyelids

Malignant tumours involving the eyelids may sometimes mimic benign lesions. Thus it is important to note that there are some signs that would alert one to the likelihood of a malignancy. They include a rapid increase in size, bleeding or ulceration.

Basal cell carcinoma is the most common eyelid malignancy, with very good outcomes following resection (see pictures showing the examples of basal cell carcinoma in Chinese patients).

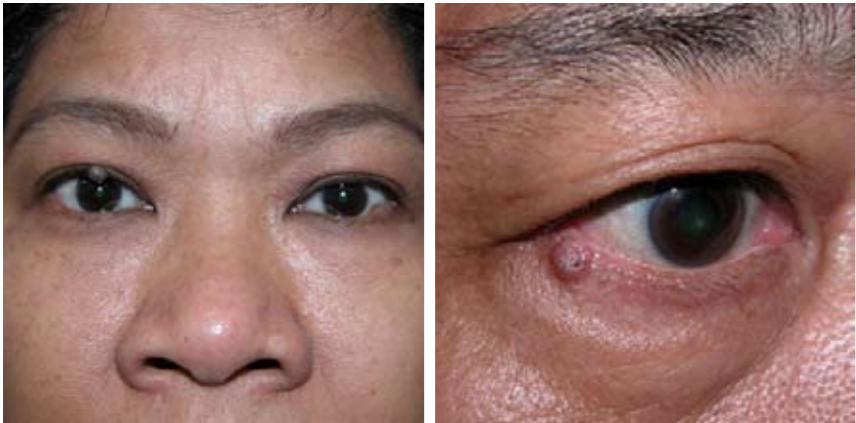


Photo copyright: Dr Chuah Chin Tek

The left photo shows a naevus (benign tumour) on the right eyelid, while the right photo shows a case of basal cell carcinoma (malignant tumour); basal cell carcinoma may mimic cysts and other benign lesions

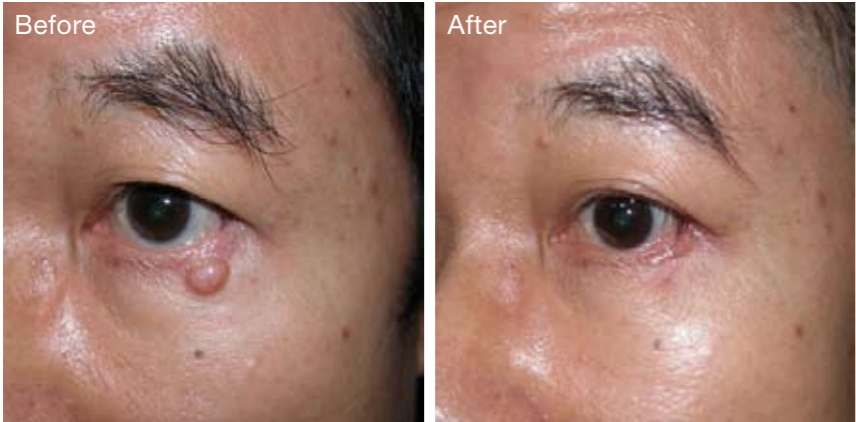


Photo copyright: Dr Chuah Chin Tek

These photos demonstrate the effects of treating basal cell carcinoma, two months after treatment, featuring full thickness wedge resection and reconstruction

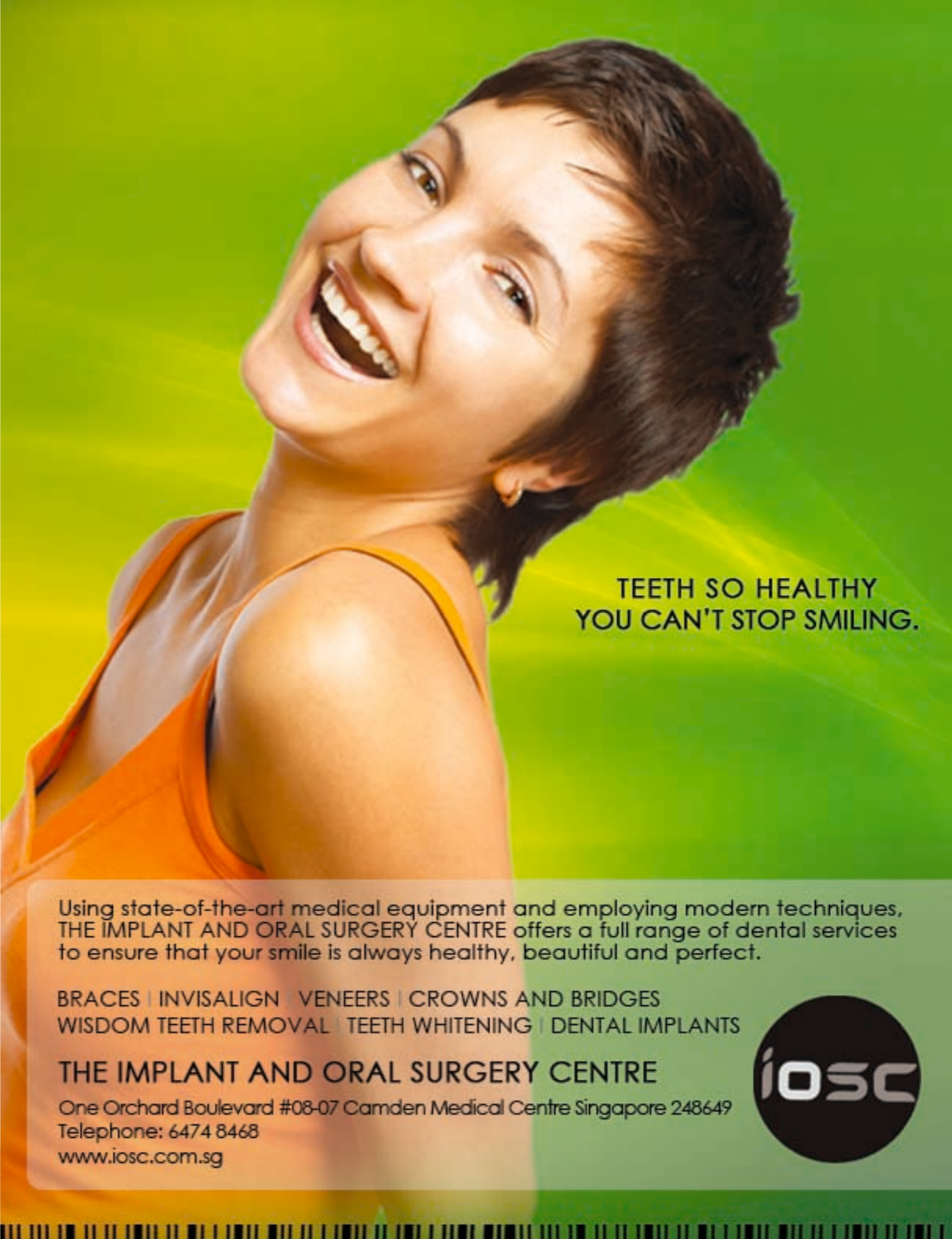
Conclusion

This two-part article attempts to introduce patients to the more common oculoplastic conditions in our local context. If in doubt, patients should not hesitate to at least see an Ophthalmologist and have the lesions evaluated and learn more about their conditions. These conditions, when dealt with in the appropriate manner, often yield highly satisfactory results.



Dr Chuah Chin Tek, medical director of The Eye & Aesthetics Clinic and Consultant at Mount Elizabeth Medical Centre, has been in practice for 17 years. He graduated MBBS (Singapore), and was admitted to the specialist register after his ophthalmology training. He sub-specialised in ophthalmic plastic and reconstructive surgery, having trained under the top oculoplastic surgeons in Singapore for two years and secured the prestigious Higher Manpower Development Plan Award to hone his skills in advanced oculoplastics surgery and management of complications of blepharoplasty in Salt Lake City, USA. Dr Chuah also holds a diploma in aesthetic medicine from the American Academy of Aesthetic Medicine and is currently practising in Suntec City and Mount Elizabeth Medical Centre.

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DO YOU HAVE Dry EYE?

Dry eye results when your eyes' ability to produce tears to protect itself is diminished. Ms Quah Hui Min and Dr Au Eong Kah Guan shed light on this very common condition.

When you do not produce sufficient tears to lubricate your eye surface, your eye becomes dry and irritated. Dry eye is a chronic medical condition that often requires therapy on a long-term basis. If left untreated, it may damage your eye surface, weaken your vision and increase your risk for eye infections.

Are you at risk for dry eye?

Millions of people worldwide suffer from dry eye. Ageing, certain eye diseases and surgeries, systemic conditions, drugs and environmental factors can aggravate dry eye.

A major predisposition to dry eye is ageing. As you age, your tear production diminishes. Women are affected more than men, especially after menopause, because of hormonal influences.

Malfunction or malpositioning of the eyelids, such as when the upper and lower eyelids do not meet even when the eyes are closed, increases the evaporation of tears. Eye surgeries such as Lasik can also contribute to dry eye. As the cornea is less sensitive after the operation, the eye produces less tears to lubricate the eye.

Rheumatoid arthritis, systemic lupus erythematosus, Sjogren's syndrome and diabetes are some of the systemic diseases that increase one's risk for dry eye. Sjogren's syndrome, a relatively common autoimmune condition, affects the mucous and moisture secreting glands, causing dry eye, dry mouth and dry skin.

People with diabetes have decreased sensitivity of the cornea and therefore do not produce enough tears to provide an adequate tear film.

Drugs that cause dry eye include diuretics for high blood pressure, beta-blockers for heart disease or high blood pressure, antihistamines or decongestants for allergy, pain relievers, antidepressants, medications for Parkinson disease, sleeping pills and contraceptives.

Environmental factors such as low humidity conditions (for example, air conditioning) or windy, dusty and smoky conditions can also aggravate dry eye. When you concentrate during activities such as reading, looking at a computer screen, watching television and sewing, your spontaneous blinking is reduced.

This failure to blink regularly and replenish the eyes with a fresh film of tear can also contribute to dry eye. If you experience transient blurring of vision which improves with blinking, it usually indicates a problem on the eye surface such as dry eye.

Do you have dry eye symptoms?

Many dry eye symptoms are non-specific in nature. Common symptoms include:

- Stinging or burning sensation in the eye
- Foreign body sensation or a feeling that something is in the eye
- Eye redness especially upon waking
- Eye fatigue after short periods of near work (for example, reading, sewing)
- Excessive eye irritation from smoke, wind and air-conditioned environments

- Transient blurring of vision
- Excessive tearing

Paradoxically, excessive flow of tears can occur when you have dry eye. When the eye is dry and irritated, a reflex action prompts the tear glands to secrete more tears. As a result, an overwhelming amount of tears are produced within a short time in response to the eye irritation.

Are there tests for dry eye?

Two simple, non-invasive tests are commonly performed to assess the quantity and quality of tears produced.

The Schirmer test assesses the secretion of tears. A small strip of filter paper is hung from the lower eyelid after the eye has been numbed by eye drops. After five minutes, the wetted area of the strip is measured in millimetres to determine the amount of tears produced.

The tear break-up time (TBUT) test assesses the quality of tears. A yellow

dye is first instilled onto the eye to make the tear film visible. The TBUT is the time taken for the tear film to break up after blinking. A short tear break-up time suggests an unstable tear film, a sign of dry eye.

There is no gold standard in the evaluation of dry eye and diagnosis or exclusion cannot be made on the basis of the tests alone. The diagnosis is based mostly on the symptoms in conjunction with the tests results.



Schirmer test is performed using two small strips of filter paper placed on the lower eyelids to measure the amount of tears secreted.



The tear break -up time is assessed under the slit-lamp with a blue light.

How can dry eye be treated?

Dry eye can be relieved with a wide range of eye lubricants which are available in different formulations. Gel and ointment are more suitable for bedtime use as they provide longer relief while "watery" eye drops are more suitable for use during the daytime.

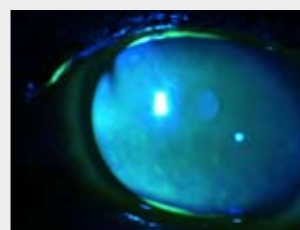
Multi-dose eye drops contain preservatives and come in a bottle that can last up to a month while preservative-free eye drops have unit-dose packaging. You should not keep preservative-free eye drops for more than 12 hours after first opening. Preservative-free eye drops are gentler to your eyes and are associated with less

allergic reactions associated with preservatives.

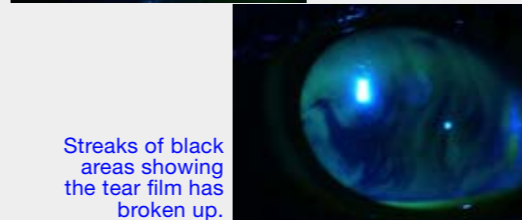
The tears normally drain into the nose via tear ducts. The use of punctal plugs to block this outflow can be effective in treating dry eye that is unresponsive to eye lubricants by keeping the tears in the eye for a longer time.

Restasis is the latest breakthrough that can help improve tear production in dry eye patients. It increases tear production by reducing inflammation in the eye. This restores the glands that produce tears.

Eyecare professionals manage dry eye patients based on the severity of their symptoms. The strategy should be customised for each individual patient, using one or more modalities acceptable and convenient to the patient. Ask your eyecare professional for the treatment that best suits your needs.



A homogenous tear film stained with fluorescein dye appears green under blue light.



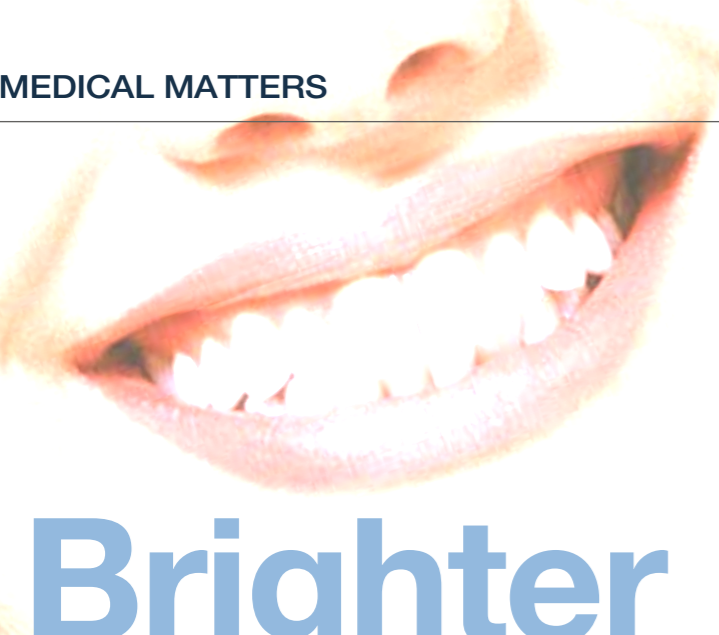
Streaks of black areas showing the tear film has broken up.



Staining of dye indicating corneal damage resulting from inadequate tear film protection.

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Dr Au Eong Kah Guan, MBBS(S'pore), MMed(Ophth)(S'pore), FRCS(Edin), FRCS(Glasg), DRCOphth(Lond), FAMS(Ophth), is Medical Director and Senior Consultant at the Singapore International Eye Cataract Retina Centre in Mount Elizabeth Medical Centre. He completed two clinical fellowships in diseases and surgery of the vitreous and retina at the University of Manchester and Manchester Royal Eye Hospital in UK, and the Wilmer Eye Institute, Johns Hopkins Hospital and Johns Hopkins University School of Medicine in Baltimore, USA.



Curious about what the latest teeth whitening technologies can do for you? Dr Juliet Tay shares more on a recent innovation that is safe and highly effective.

Brighter Teeth in 60 minutes!

Most of us start out with sparkling white teeth, thanks to their porcelain-like enamel surface. Composed of microscopic crystalline rods, tooth enamel is designed to protect the teeth from the effects of chewing, gnashing, trauma and acid attacks caused by sugar.

But over the years enamel can get worn down, becoming more transparent and permitting the yellow colour of dentine — the tooth’s core material — to show through. During routine chewing, dentin remains intact while millions of micro-cracks occur in the enamel. It is these cracks, as well as the spaces between the crystalline enamel rods, that gradually fill up with stains and debris. As a result, the teeth eventually develop a dull, lackluster appearance. Teeth Whitening removes these stains and debris on teeth enamel, improving the brightness and colour of the teeth.

The two most effective teeth whitening methods recommended by dentists is the in-office whitening procedure, such as BriteSmile, or the customised take home whitening kit.

Teeth whitening with BriteSmile treatment can erase years of yellowing as well as harsh staining from coffee, cigarettes, and red wine in the time it takes to get a haircut, a manicure or lunch. In fact, clinical studies prove that this In-office treatment resulted in an average improvement of 6-9 shades, in about one hour.

BriteSmile Technology *The BriteSmile Whitening System*



BriteSmile has revolutionised tooth whitening with state-of-the-art technology that is safe and effective.

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The BriteSmile light is used in combination with a patented whitening gel, which has been optimised for patient safety and maximum results. A specially designed lamp that shines a gentle, blue light on your teeth, works in tandem with a proprietary whitening gel to accelerate the whitening process. This light has been clinically proven safe for tooth enamel as well as skin, gums, and other soft tissues. It emits virtually



no heat and no harmful UV (ultraviolet) light. The lamp is uniquely shaped to illuminate and whiten all “smile line” teeth (top and bottom) at the same time, ensuring natural and uniform results.



While other whitening gels contain as much as 35-50 percent hydrogen peroxide, BriteSmile’s proprietary gel contains only 15 percent peroxide and is buffered at a near-neutral pH value that is compatible with tooth enamel.

The gel also contains other ingredients such as glycerin and highly purified water to prevent tooth dehydration and to further ensure safety. The gel is specifically engineered to respond to the blue wavelengths of the light system. When the light illuminates the gel, it activates and safely accelerates the whitening process, achieving amazing results in just one hour.

Clinical testing has proven that the teeth whitening procedure is safe. Safety studies conducted at the University of Medicine and Dentistry of New Jersey found conclusively that BriteSmile whitening resulted in no structural change in teeth; no adverse impacts on fillings and no softening of tooth enamel. These study results were confirmed by senior researchers at New York University.

The pH balanced proprietary gel is not harmful to the gums and because it is not ingested, the gel does not carry many other risks or side-effects of other options in the marketplace.

Here are some “Before and After” pictures to show how dramatic the teeth whitening results can be.



Dr Juliet Tay

- BDS
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Dr Tay is the Director of The Implant and Oral Surgery Centre with over 10 years of clinical experience. She is a fully qualified specialist registered with the Singapore Dental Council and is on the Academy of Medicine, Singapore Roll of Specialists. She holds a position at the National University of Singapore as an Adjunct Lecturer and is also Visiting Consultant to Raffles Hospital.

Dr Tay lectures extensively on the topic of dental implantology and has published in international journals. She has also co-authored a book “A Patient’s Guide to Dental Implants”. Her expertise includes full mouth reconstruction with dental implants and smile makeovers.

Dr Tay has been granted operating privileges at major private hospitals in Singapore including Gleneagles Hospital, Mount Elizabeth Hospital and Raffles Hospital. Dr Tay currently practices at Camden Medical Centre.

For more information, please visit www.iosc.com.sg

Cataract in the Modern Era



Cataracts form in the human eye with aging. Fortunately, in almost all instances, it is treatable and in the modern era, cataract extraction with insertion of an intra-ocular lens remains the most successful and medically necessary procedure. In the first of a 2 part write up, Dr Chuah Chin Tek sheds light on what cataracts are, what patients perceive, and what treatment entails. In the second part to be published in the next issue of this magazine, he will write on the many options available as regards to intra-ocular lenses. Also a real patient will share her perspective of the entire treatment experience from presentation of her symptoms, through the treatment procedure, to post operative care and outcome.

In keeping with significant advances in medicine, eye care has also evolved largely due to major improvements in both the surgical techniques as well as instrumentation. While cataract remains the major cause of visual loss worldwide, patients may be comforted to know that cataract surgery, one of the most common, and arguably the most successful surgical procedure in medicine, has benefitted greatly from key changes in surgical technique, instrumentation and intra-ocular lens technology.

A cataract is a clouding of the lens - the structure in the eye responsible for focusing light rays entering the eye so that we can see. As we age, the lens loses its transparent state, and what follows is the formation of a cataract. There are also other types of cataracts, such as those resulting from trauma and those associated with use of certain drugs. But, by far, the commonest category are senile cataracts associated with aging. Cataract morbidity is responsible for 47.8% of the world’s total blindness.

Presenting Symptoms

Patients complain of blurring of vision, visual distortion and a general deterioration in the acuity (sharpness) of images seen. They may also complain of glare, need more light to read, have poorer night vision or see faded colours. The disease usually progresses slowly. It is not uncommon to see patients presenting only when they cover one eye (the better eye) to discover that their vision is very poor. Occasionally, patients may have been told that they have worsening myopia by their optometrists or opticians. The thickening or progressively denser cataract has a higher refractive index and bends light more, leading to a ‘pseudo myopic state’. For this the definitive treatment is cataract extraction with intra-ocular lens implantation.

Treatment

The problem of cataract visual loss, though common, is reversible. The cloudy lens is removed using the latest techniques via a small incision that does away with the need for stitching, and an artificial lens is inserted in place of the cataract. This method of cataract removal, phacoemulsification, utilizes ultrasound energy to help the surgeon break the cataract into smaller pieces, emulsify the cataract, following which it is aspirated. This key development by Charles Kelman as early as 1967, was followed by further refinements that ultimately resulted in smaller and smaller wounds. Wound sizes today are no wider than 2.75mm and 1 mm wounds are not far away. Advances in our understanding of fluidics also resulted in safer and more efficient phacoemulsification machines. Close collaboration through research and constant feedback to the industry by eye surgeons result in technological advances that enhance the safety profile and outcome of this procedure, with the

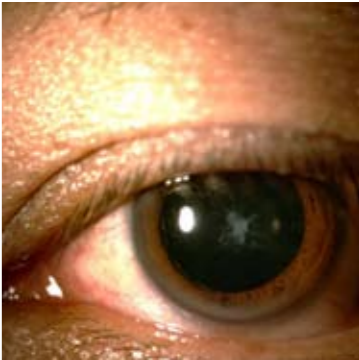
ultimate beneficiary being the patient with cataract. Recovery is swift with this method of surgery and success rates are high at almost 100%.

Prior to surgery, the surgeon takes a detailed history looking out for medical issues that need to be addressed such as a history of diabetes, hypertension or ischemic heart disease. The patient undergoes a series of tests to ascertain the power of the intraocular lens that will be inserted. This includes the measurement of the optical length of the eye as well as the focusing power of the cornea. The entire process is known as biometry, and even this part of the entire process has seen tremendous research, advances and ultimately, greater accuracy in the placement of the intraocular lens.

Posterior subcapsular cataract (note the posterior, “backward” location of the opacity), commonly associated with steroid use such as by sufferers of asthma and allergic skin conditions



Nuclear sclerotic cataract is the most common type of cataract



Anterior subcapsular cataract, associated with the use of some forms of medication

- Pictures courtesy of Alcon

To minimize the most feared complication of the procedure, infection or endophthalmitis, the patients are instructed to observe good eyelid hygiene and is prescribed antibiotic eye drops to be instilled three days prior to surgery.

The procedure is performed either under topical or regional anaesthesia. Patients are instructed to arrive 2 hours prior to the procedure so that the necessary preparation can be carried out, and they can leave for home on the same day once it is deemed safe (some patients are sedated and so are monitored for some time post operatively).

Patients are reviewed the day after surgery, with many performing a second check within the first 5-6 days. Patients can resume their normal lifestyle routines soon after.

Conclusion

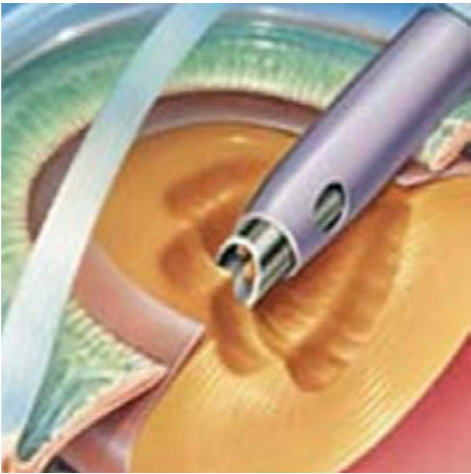
In the next article on cataract treatment, we will discuss the many options available as far as the choices of intraocular lenses are concerned. It is hoped that these 2 articles will describe the entire process from the patient's perspective, including the real choices spelt out to the patient by their attending surgeon, and will help in a better understanding of a procedure that has often been described as the most successful elective surgical procedure.

*The author has no proprietary interest in the products or technologies described in the article.

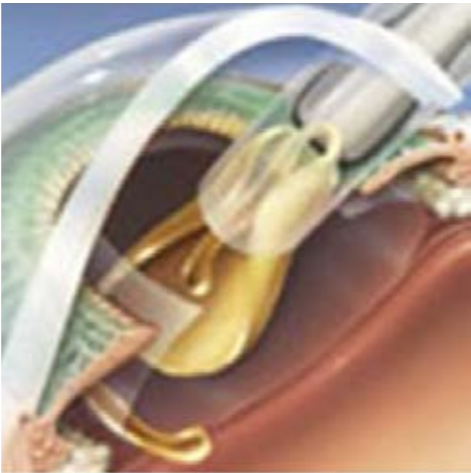


Dr Chuah Chin Tek, medical director of The Eye & Aesthetics Clinic and Consultant at Mount Elizabeth Medical Centre, has been in practice for 17 years. He graduated MBBS (Singapore), and was admitted to the specialist register after his ophthalmology training. He sub-specialised in ophthalmic plastic and reconstructive surgery, having trained under the top oculoplastic surgeons in Singapore for two years and secured the prestigious Higher Manpower Development Plan Award to hone his skills in advanced oculoplastics surgery and management of complications of blepharoplasty in Salt Lake City, USA. Dr Chuah also holds a diploma in aesthetic medicine from the American Academy of Aesthetic Medicine and is currently practising in Suntec City and Mount Elizabeth Medical Centre.

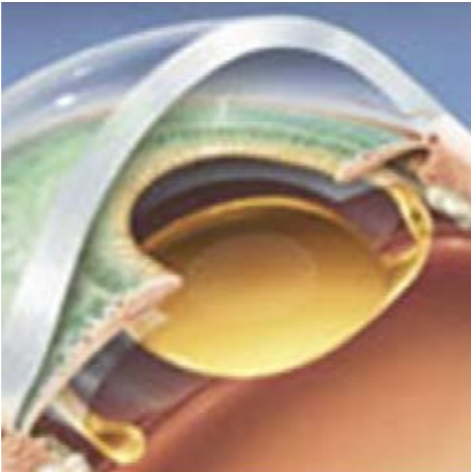
For more information, please visit www.eyendaesthetics.com or call +65 6884 4726



Lens nucleus and soft lens material is removed by ultrasound and aspiration; the space in the anterior chamber is maintained.



After the lens nucleus is being removed, an Intraocular Lens (IOL) is implanted into the capsular bag of the patient's eye.



The patient's vision is restored after the surgery.

- Pictures courtesy of Alcon

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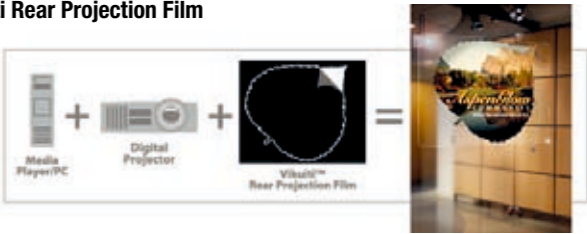
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Typical system components for a 3M Vikuiti Rear Projection Film display include:

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Worried about the Lump in your neck?

Dr Andrew Loy updates *Healthy Times* on what to know about head and neck cancer.

What should I do about the lump in my neck? Lumps or growths in the head and neck region are very common. These lumps may be benign (or non-cancerous) to malignant (or cancerous). Examples of benign lumps include enlarged lymph nodes, thyroid cysts and nodules, and branchial cysts. Enlarged lymph nodes are the most common cause for a lump in the head and neck region. The majority of these lymph nodes become enlarged as a result of infection and can usually be cured with medication. Head and neck cancers account for 3 to 5 percent of all cancers. These cancers usually occur in men and are more common over the age of 50. Smoking and alcohol abuse are the most important causes for head and neck cancers, and the risk is much higher for people who indulge in both. In cancers of the thyroid and nasopharynx, a positive family history of cancer is an additional important risk factor.

What are the dangerous signs and symptoms? When a patient presents with a lump in the head and neck, firstly it is important to determine if it is cancerous to start the necessary treatment. If the lump is benign, it can be left alone. Lumps which are fast growing, hard to touch, are large (> 1 cm diameter) and are multiple in number, have an increased risk of being cancerous (see Fig 1).

Additional important symptoms that may suggest that lumps are cancerous include:

- Blood-stained nose or throat discharge
- Persistent throat pain or blockage
- Ulcers in the mouth or throat that do not heal (see Fig 2)
- Difficulty swallowing
- Change in voice or hoarseness
- Persistent ear pain
- Change in the way your dentures fit
- Unexplained facial pain

What about a Thyroid Lump or Nodule? The thyroid gland is located on the lower front portion of the neck. It produces thyroid hormone, which regulates the production of energy in your body. A healthy thyroid gland is shaped like a butterfly, with the right and left lobes connected by a bridge called the isthmus.

Nodules or lumps occur commonly in the thyroid gland (see Fig 3). It has been shown that 5% of the general population has a thyroid lump which can be found on clinical examination. While up to 30-40% of the population have a nodule which cannot be felt but can be identified only by ultrasound examination. Thyroid nodules occur much more commonly in women. The good news is that the vast majority of these nodules are benign or non-cancerous, with only approximately 10% of all thyroid nodules being found to be malignant or cancerous. Occasionally there may be multiple nodules in the thyroid gland in a condition known as multinodular goitre. When these nodules become very big, it results in compression of the trachea or windpipe (known as oesophagus) causing breathing or swallowing difficulties. Cancers occurring in the thyroid gland are categorized as papillary and follicular carcinoma, medullary carcinoma, and rarely lymphoma or anaplastic carcinoma.

What are the worrying symptoms and signs for a thyroid nodule? While the majority of thyroid nodules are non-cancerous and do not cause any discomfort to the patient, apart from a lump in the centre of the neck, there are

several symptoms and signs which are worrisome for the possibility of a thyroid cancer. These include:

1. Large size of the nodule (more than 4 cm)
2. A nodule which is growing rapidly
3. A nodule which is hard and painless
4. Fixation of the nodule to the overlying skin or underlying deep neck structures
5. Presence of a hoarse voice
6. Difficulty in swallowing due to the nodule
7. Presence of other enlarged lymph nodes in the neck
8. If the patient is very young (less than 20 years old) or older (more than 60 years old)
9. If the patient has a strong family history of thyroid cancer
10. If the patient has previous exposure to radiation

What tests are available? While the traditional practice of taking a medical history and thorough physical examination is still important, new diagnostic methods have allowed the ENT-head & neck surgeons to assess and evaluate a lump to provide an accurate diagnosis.

Flexible fiberoptic endoscopes are routinely used to visualize areas in the head and neck which were previously hidden or poorly assessed (fig 4). Videostroboscopic examination of the larynx allows tiny lesions of the vocal cords to be picked up, and the functioning of the larynx can also be examined (fig 5). Fine needle aspiration biopsies are done in the clinic setting with minimal discomfort to obtain tissue from the lumps for microscopic examination (Fig 6). This enables the clinician to quickly assess the histologic characteristics of the lump and determine the potential for malignancy or cancer. Imaging methods

like ultrasound, computed tomography scans (CT) or magnetic resonance imaging (MRI) is ideally suited to assess head and neck lumps. New imaging techniques such as PET-CT scans and 64 or 320 slice CT scanning are now routinely available and provide additional important information for the surgeon (fig 7).

What are the treatment choices for a lump in the head and neck? Surgery for head and neck lumps has traditionally been the treatment of choice, and is still indicated for most benign and some cancerous lumps. However the use of radiotherapy and chemotherapy (often in combination) is increasingly important for the treatment of head and neck cancers. These new treatment options allow for the preservation of some of the important structures in the head and neck, without compromising the eventual cure rate of the patient. The ENT-Head & Neck surgeon will be able to advise the optimal and ideal treatment choices.

For patients undergoing surgery, new techniques of rehabilitation allow for the quality of life to be preserved. An example is the use of voice prostheses to enable patients to speak after cancer surgery of the larynx. The development of multidisciplinary teams for the treatment of head and neck cancers (inclusive of plastic surgeons, dental surgeons, speech and swallow therapists) provides new reconstructive and therapeutic methods. These techniques enable us to achieve the best possible outcome for the patient.



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Fig 1
Large neck lymph nodes which were malignant due to nasopharyngeal cancer



Fig 2
Tongue ulcer and mass which was proven to be malignant after biopsy




Fig 3
Patient with a large thyroid mass




Fig 4
Flexible fiberoptic examination being performed to examine the nose, throat and larynx




Fig 5
Flexible fiberoptic examination of the larynx showing a large vocal cord polyp causing hoarseness




Fig 6
Fine needle biopsy being done for a thyroid nodule




Fig 7
CT scan showing a large cancerous lymph node in the patient's left neck

Zzz

Sleeping Well for Better Health

With the launch of the inaugural Singapore Sleep Awareness Week 2010 campaign, the Singapore Sleep Society aims to create awareness on the importance of getting sufficient sleep, as well as provide a platform for Singaporeans to learn more about how to achieve good sleep for good health. Keith Boi reports

It is well accepted by most people that regular exercise and a nutritious diet are essential for staying healthy. But how many of us have stopped to consider the significance of proper sleep habits to our physical health and emotional well-being?

Indeed, the importance of getting sufficient sleep tends to be rather underestimated even in modern societies such as Singapore, where there is a noticeable lack of awareness about what constitutes good sleep, as well as a lack of proper understanding about sleeping disorders and the many health issues associated with sleep deprivation.

Dr Lim Li Ling, Singapore Sleep Society president, states that approximately 30 percent of the global population suffer from various forms of sleep problems.

“In general, sleep deprivation can be considered as a silent epidemic,” she says. “If you were to ask the average person whether they get six to eight hours of sleep per day, it would be the minority who would say they are getting enough sleep.”

Considering how physical and social factors can lead to sleep difficulties, Dr Lim further observed that an excessive amount of activities, a fast pace of life and the high level of stress experienced by the typical Singaporean do contribute to the increasing trend of people not getting enough sleep.

Creating greater awareness for sleep

Sleep is very much a necessity of life, and yet many people seem to neglect the fact that the amount of sleep you get has a direct impact on how well you function. And most people who get by on fewer than five-six hours of sleep daily are probably not getting enough sleep – it does not matter whether the lack of sleep is caused by sleep disorders such as insomnia or by

voluntary sleep deprivation because the unwelcomed effects are the same.

Indeed, Dr Lim believes that if more Singaporeans are aware that their brain functions and work performance are directly affected by sleep deprivation, it is not hard to persuade people to better prioritise sleep and restfulness.

One of the enduring myths is that sleep is not specifically valuable or that it is acceptable for people to sleep less in order to “achieve more” – in the way that, say, students spend one or two more hours to catch up on schoolwork at the expense of sleep.

“I think there is a general misconception held by many that by depriving themselves of sufficient amount of sleep, they can achieve more out of their life – but what they are not aware of is that the lack of sleep can affect them directly and may even do them more harm over the long term,” Dr Lim says. “When people sleep less, their brains are not functioning at their optimal level and they can’t perform at their best. In fact, the brain is actually the organ most sensitive to lack of sleep.”

Furthermore, short sleepers tend to lose insight into the impairment of their mental functions when they are deprived of sleep over a period of time – for instance, young people who lack sleep are often unaware that their growth and learning capabilities are being affected.

Over the long run, the health consequences of chronic sleep deprivation include increased risk of heart diseases, weight gain, increased tendency to suffer from diabetes, stroke or long-term depression, and ultimately a shorter lifespan.

Treating insomnia

According to Dr Lim, the most common sleep problems in Singapore are insomnia and obstructive

sleep apnoea. (Refer to page XX for information on obstructive sleep apnoea.)

For insomnia sufferers, the causes are mainly psychological-based; when people have to deal with excessive stress or when they suffer from full-blown depression and anxiety, they tend to experience difficulties getting to sleep.

“Depression and anxiety are clinical conditions in which people experience a lot of unhappiness due to a wide range of reasons including retrenchment, recession, family quarrels and bad relationships. This is the most common disease state that leads to insomnia, but just as common as these cases is those people who have to deal with a lot of stress over a long period of time,” Dr Lim explains.

Dr Lim also stresses on the importance for sleep problems to be treated in the same way how other health ailments are being treated, and people who have difficulty sleeping should try to determine the root cause of their problem. In addition, the routine or long-term use of sleeping pills, without proper identification of the cause of insomnia, is not recommended.

“What we would like more people, including healthcare professionals, to know is that the right way to manage sleep disorders is the same as how you might manage other health problems ie by treating the specific underlying cause of the problem” she says. “We need to bust the myth that sleeping pills are the only mode of treatment, and it would be helpful if there is a greater awareness that sleeping pills are addictive and may only cover-up the symptoms without specifically treating the actual cause, such as depression or anxiety.”

The Singapore Sleep Awareness Week 2010 will be a 10-day long campaign (March 19-28) featuring activities to make learning about sleep disorders accessible, informative, interactive, and interesting to the public. A comprehensive portal on sleep-related issues has also been launched (www.singaporesleepsociety.com/ssaw2010) to provide easy and quick access to online resources about sleep.

About sleep apnoea

Dr Ignatius Mark, chairman of Singapore Sleep Awareness Week organising committee, gives a quick insight into sleep apnoea:

Snoring is the sound caused by the vibration of the walls of the air passages and throat when it partially collapses during sleep. Snoring when associated with choking, unrefreshing sleep, daytime sleepiness or fatigue, is a symptom of Obstructive Sleep Apnoea (OSA).

OSA is a condition where there is repeated upper airway closure during sleep, causing breathing to stop and oxygen levels to drop. This is sensed by the brain which needs to wake up temporarily to open the airway to breathe before falling back to sleep again. On returning to sleep the obstruction occurs again and this cycle repeats. This causes poor sleep quality and unrefreshing sleep.

Snoring by itself is not dangerous, however it may create social problems and cause sleep disturbance to the sleeping partner. Untreated OSA increases your risk developing high blood pressure, heart disease and stroke. Excessive sleepiness may predispose to accidents in the workplace if one is operating heavy machinery or on the road if one is driving.

There are many symptoms associated with OSA and not all patients have all the symptoms. Most of these symptoms are also not exclusive to OSA.

Daytime symptoms include:

- Unrefreshing sleep,
- Waking up with a dry mouth or throat
- Waking up with a headache.
- Daytime sleepiness

Night time symptoms include:

- Loud snoring which may disturb sleeping partners
- Frequent awakenings from sleep
- Frequent trips to the toilet to pass urine
- Insomnia in the middle of the night

Using symptoms alone to diagnose OSA is inaccurate but it does raise the suspicion of the condition. It is therefore important to do sleep studies to confirm OSA.

Visit www.singaporesleepsociety.com/ssaw-sleep_articles to find out more.

Some tips on how to improve sleep habits:

- Cut down on things that don’t necessarily enhance your life, and adjust your activities according to priorities
- Incorporate some exercise into your daily life
- Avoid excessive consumption of caffeine; limit yourself to one or two beverages daily, and no less than 8-10 hours before sleep
- Set aside a “sacred time”, or maintain a form of pre-sleep routine (one or two hours before sleep), to do something relaxing

TARGETED THERAPIES

Is there a new hope for breast cancer patients, in the form of targeted therapies? Dr Lavina Bharwani of Johns Hopkins Singapore International Medical Centre updates Healthy Times on the latest developments.

As researchers discover more about the gene changes in cells that cause cancer, they are able to develop newer drugs that specifically target these changes.

Many of these newer treatments are called targeted therapies because they target specific characteristics of cancer cells and do not harm healthy, normal cells. New targeted therapies are emerging on a regular basis, and the results of recent clinical trials on these new medications have been encouraging.

Targeted cancer therapies are treatments that target specific characteristics that spur cancer growth, such as a protein that allows the cancer cells to grow in a rapid or abnormal way.

The key benefit of targeted therapies, sometimes called “smart” drugs, is that they are less likely than chemotherapy to harm normal, healthy cells. Some targeted therapies work like the antibodies made naturally by our immune systems. These types of targeted therapies are sometimes called immune targeted therapies.

What type of targeted drugs are used to treat breast cancer?

A few of the more commonly used targeted therapies are explained here – for example, Trastuzumab, Lapatinib and Bevacizumab – but this is not an exhaustive list. In fact, there are many different targeted therapies currently in use, and a number of these are still in the process of development.

Trastuzumab is a type of drug known as a monoclonal

antibody, which is a man-made version of an immune system protein. Trastuzumab targets the HER2 cancer cell to slow down cancer growth and may also stimulate the immune system to effectively attack these HER2 cancer cells. Trastuzumab is also usually combined with chemotherapy treatment for a better outcome.

Lapatinib is another drug that targets the HER2

protein. This drug is given in a pill form to patients with advanced HER2-positive breast cancer that is not responding positively to chemotherapy and Trastuzumab.

Bevacizumab is another monoclonal antibody that is prescribed to patients with metastatic breast cancer. This antibody is directed specifically against

vascular endothelial growth factor, a protein that helps tumours form new blood vessels. As such, Bevacizumab has been effective in the treatment of a variety of cancers, including breast cancer, as it prevents cancer cells from growing by inhibiting the formation of blood vessels. Bevacizumab has also been shown to slow the progression of advanced breast cancer when it is combined with chemotherapy.

Are there side effects from targeted therapies?

Yes, there are potential side effects, such as fever and chills, tiredness, nausea, vomiting, cough, diarrhoea and headache. These side effects occur less often after the first dose. Other side effects may include high blood pressure, blood clots, low white blood cell counts, mouth sores and loss of appetite.

Can targeted drugs be used for early stages of invasive breast cancer to avoid surgery?

Breast-conserving surgery has always been the choice of treatment option for early-stage breast cancer if the tumour is small. If the cancer tumour is too large, a mastectomy or complete removal of the breast will be needed, unless pre-operative chemotherapy can shrink the tumour enough to allow breast-conserving surgery. Chemotherapy will be recommended for

tumours with a diameter larger than one cm and is usually given after surgery. Radiation therapy will also be needed for patients who have gone through breast-conserving surgery or mastectomy. Some patients may be tempted to avoid radiation, but studies have shown that avoiding radiation increases the risk of recurrence.

Are targeted drugs also a new pillar of hope for patients with advanced breast cancer?

For Stage IV breast cancers that have spread beyond the breast and lymph nodes to other parts of the body, surgery and/or radiation are unlikely to help. So systemic therapy is the recommended treatment. By systemic therapy, we refer to the use of hormone therapy; chemotherapy; targeted therapies such as Trastuzumab or Bevacizumab, or a combination of these treatments. Trastuzumab may help women with stage IV HER2-positive cancers live longer if it is given with the chemotherapy.

Although treatment for advanced breast cancer can often shrink or slow the growth of the cancer cells, it may not be effective after a period of time. Further treatment at this point depends on several factors,

including the patient’s age, general health and desire to continue getting treatment.

With the availability of targeted therapies, there are more treatment options for patients as well as increased chances of positive outcomes. For instance, a HER2-positive breast cancer patient that does not respond to Trastuzumab may respond to Lapatinib, another drug that attacks the HER2 protein, which can be prescribed with an oral chemotherapy drug.

Targeted cancer therapies are a huge part of cancer research today. These agents may be a better way to treat cancer with little damage to normal, healthy cells. This means less side effects and a better quality of life.

Dr Lavina Bharwani has been a consultant with Johns Hopkins Singapore International Medical Centre since September 2006. Prior to joining Hopkins, Dr Bharwani was an assistant professor of medicine in the division of hematology/oncology at Baylor College of Medicine in Houston, Texas, USA. Dr Bharwani is American Board certified in internal medicine, hematology and medical oncology, and her areas of specialty include breast, gynecologic and gastrointestinal cancers.

Crossing the Bridge – A Mental Shift to Wellness

Do you truly understand the concept of wellness? More importantly, do you know how to set about attaining wellness? Dr David Lim provides some advice on how you and your family can truly maximise your true health potential – to practise wellness for life.

There is an old Chinese saying: There wouldn't be any major health problems if we paid attention to minor ones.

Most people ignore their health problems until it becomes more significant - essentially practicing crisis care for their health. The vast majority of people wait until they have an obvious health problem before they seek help. Why not practice preventive health maintenance?

Wellness defined

What is the definition of wellness? You would think the definition would certainly relate to health. In fact, the definition of health as described by The World

Health Organisation (WHO) is as follows:

“Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.”

As such, the WHO definition embraces total health, which can also be referred to as wellness.

Wellness is an ongoing and active process of becoming aware and making consistent wise choices toward a more successful and fulfilling life. In the context of health, most would consider success to be related to the capacity of living a fulfilled life based on each individual's expectations – living a life filled with joy, vitality, energy, and an overall sense of accomplishment.

Six ways to wellness

The following are some of the things you can do to reclaim health for yourself and your family and to maintain your health throughout your lifetime:

1. Proper nutrition - Say yes to plenty of fruits and vegetables along with fibre-rich complex carbohydrates; Say no to “junk foods”, processed foods, artificial sweeteners and genetically modified foods.

- 2. Stay hydrated** - Drinking alcohol, coffee, sugary soft drinks actually dries you out. Drinking quality spring or filtered water is good for you and necessary to prevent disease and maintain optimal health.
- 3. Stay physically active** - Your body is made for action. Good exercise keeps your heart, lungs and other internal organs healthy, and lengthens your life. A nice walk along the East Coast Park with a friend can do wonders for your physical and mental health.
- 4. Get enough rest** - Quality sleep is a necessary ingredient to maintain peak performance in your health.
- 5. Enjoy nourishing relationships** - Those in committed relationships live longer and are healthier. The more connected you are, the happier you are.
- 6. Stay subluxation-free** - Chiropractic care focuses on the proper alignment and function of the spine and nervous system, which controls every aspect of how the rest of your body works. A subluxation is a misalignment in your spine that causes nerve damage. The more commonly seen symptoms of subluxations are: premature aging, loss of height, unbalanced posture, weakness and pain. However, subluxations can also cause or contribute to internal organ malfunction; muscle, cartilage and spine degeneration and lowered resistance to disease.

Illness takes time

Except in cases of trauma, the development of disease is often a slow, gradual process. Look at the sick and elderly around you. Do you think they willingly gave up, overnight, the vibrancy in their step, the glow in their eyes, the energy in their being? No one wakes up feeling suddenly older. The silent weakening, wearing down and stiffening of their lives, and the resulting pain and suffering, happened slowly, ever so slowly.

Wellness is Chiropractic

The first goal of the chiropractor is to keep people so healthy that they don't get sick in the first place. But chiropractic is about more than “not getting sick” – it promotes wellness, wholeness and optimal

function. Chiropractic patients report improved physical and emotional health, less stress and more enjoyment of life.

Chiropractors are the only professionals that are trained to locate and correct subluxations. Doctors of chiropractic can help release this deep stress that has been interfering with your ability to function at your best. Chiropractic promotes balance, resistance to disease and improved function. Ongoing chiropractic care can help you achieve and maintain your wellness potential. No matter what condition you are in, you need a subluxation-free body to keep your healing ability at its optimum.

There is no doubt that achieving health goals and living a wellness lifestyle requires conviction, the application of knowledge, motivation, and continuously making wise choices. Every day, we have a choice to make - whether to build our health stronger or to break it down slowly.

Ask yourself what your life will be like if you do not start making wiser choices. What will the life of you and your family be like by not getting on the path to wellness? Join the wellness movement and see how chiropractic can help you and your family live a life of extraordinary health. Let your chiropractor be your wellness lifestyle coach - so you too can have wellness for life!



Dr David Lim is a graduate of a five-year double-degree course from Palmer College of Chiropractic (Iowa, USA) where he was awarded his Doctor of Chiropractic degree with honours.

He has been in practice for ten years, working in successful offices in the United States, Malaysia and Singapore.

Currently, Dr Lim practices at the Wellness for Life Chiropractic office located in Bishan. Wellness for Life Chiropractic has a second branch at Harbour Front Tower 1.

For more information, please call: (65) 6253 3353 or www.wellnessforlife.com.sg



The Chiropractic Way to Health!

(Left to right) Dr Marc Wong, Dr Zachary Donnici, Dr David Lim

Ever wondered why even after your regular seven hours of sleep, you still find it impossible to roll out of bed? Or do you have to constantly ease your strained neck muscles after sitting at your office desk for a whole day? Fortunately, you are not alone in the wide range of modern bodily grievances and there is a better solution than worrying.

Enter Wellness for Life Chiropractic, a renowned clinic that specialises in unique corrective chiropractic care for people from all walks of life. Managed by three young and affable chiropractic doctors, Dr David Lim, Dr Zachary Donnici and Dr Marc Wong, the clinic focuses on providing excellent healthcare services to families, especially young children.

Started three years ago with their first clinic at Bishan, which was followed by last year’s launch of a second clinic located at Habourfront, Wellness for Life Chiropractic is determined to educate the public about correcting subluxations – a chiropractic term for a misalignment in the spine that causes nerve damage – the importance of a healthy nervous system to a person’s general well-being. Lareina Chong finds out more about the doctors.

“Healthy Times: What drew you to pursue a career in Chiropractic?”

Dr David Lim: Growing up in a family where my dad is a medical doctor, it seemed as if I was destined to follow in his footsteps. I had a happy childhood but my teenage years brought many health challenges. I was considered a “healthy” child, but one that was suffering from asthma, eczema, migraine headaches and sinus problems. And so, for a so-called “healthy” child, I was taking medications for each condition.

As I grew older, I began to think there had to be a better way. Thus began my search for a healthier way, which led me to chiropractic. It worked so well for me that I decided to become a chiropractor myself!

Dr Zachary Donnici: I was very keen on a holistic approach to healthcare, having studied medicine in university. After graduation, I backpacked around Asia and was drawn to start my career and practice in Singapore.

Dr Marc Wong: My interest and passion have always been in healthcare. One day, my father recommended me to speak to his friend, a chiropractor, and I was very inspired by his experiences in this field. After that, my interest in chiropractic grew and it became my main professional focus.

HT: Tell us more about Wellness For Life Chiropractic – how did you three get started?

Dr Donnici: It started as a dream, three great friends getting together with a common vision – in hopes of serving the people of Singapore to build the headquarters of a chiropractic wellness movement that is sweeping the world.

HT: Can you share with us about how one can benefit from regular chiropractic care?

Dr Lim: Your health is your responsibility, so ultimately the choice is yours – but a complete understanding of chiropractic and its goals are essential so you can

make the best informed decision for you and your family’s health.

The chiropractic message is simple: you have within you an inborn or innate natural healing ability. Your body is your best healer. But subluxations create a serious stress that interferes with your natural ability to function properly. You’ll feel better, heal better and function better if you have no subluxations inside you. Periodic chiropractic examinations and adjustments help keep you free from subluxations and allow your body to maximize your optimal health potential.

HT: Can you describe some of your techniques and procedures?

Dr Lim: Upon a thorough consultation and examination, we need to determine if we can accept the individual for care. If accepted, based on the clinical findings of subluxation, a specific chiropractic adjustment is performed to restore proper nerve flow to the irritated spinal joints. Evaluations are performed throughout the course of care to monitor the progress to ensure optimal nerve flow and healing.

HT: What are some of the ways that your clinic has taken to raise more awareness about Chiropractic benefits?

Dr Lim: We regularly conduct community awareness programmes such as talks for the general public and spinal screenings to educate the public about the importance of a healthy spine and nervous system.

HT: Why is there a focus on treating young children?

Dr Wong: We notice that young schoolchildren carry such heavy backpacks to school. As a result of that as well as long studying hours, subluxations are particularly damaging to children because of their active lifestyles and how rapidly their bodies change.

HT: Can pregnant women receive chiropractic care?

Dr Lim: Yes, not only is it safe but also highly beneficial for pregnant women to have a chiropractic check-up and find out how it can help. A pregnant woman needs to have her body as healthy and strong as possible in order to handle the rigours of pregnancy and childbirth. Chiropractic care will help ensure that all body systems function properly, especially the reproductive system including the uterus, ovaries and related organs and structures so essential for a healthy pregnancy. If the body structure is causing the slightest nerve interference to these systems, it could adversely affect the mother and the developing foetus. Your chiropractor will examine your body for subluxations and correct them with a chiropractic adjustment accordingly.

HT: Are there any noticeable trends in the field of chiropractic today?

Dr Lim: There is a global trend toward greater health consciousness. The wellness and holistic trend

in healthcare today has been the overall theme of chiropractic in the past, present and into the future. The goal for chiropractic today is to continue to educate the public about the importance of a healthy nervous system and expand its role as a primary care physician for the general population.

HT: Singaporeans are facing increasing work stress. How does Chiropractic benefit them?

Dr Lim: To be truly healthy, you must be able to adapt to life’s stresses. Various forms of stress, including work stress, can create disruptions in your nervous system leading to a lowered state of health. Chiropractors are specialists in removing those interferences. By doing so, your body is able to function at a more optimal state of health whereby your ability to adapt to life’s stresses and challenges is enhanced. That’s why people who choose a chiropractic lifestyle report a better quality of life, improved physical and emotional health, fewer drugs in their lives and more energy, vitality and life enjoyment.

HT: What are your tips on maintaining a healthy lifestyle?

Dr Lim: Keep it simple:

- Restful/adequate sleep
- Stay physically active
- Proper nutrition
- Positive relationships
- Get checked by a chiropractor to ensure a healthy spine and nervous system! ”



It Happens to All of Us

So, are you feeling down? Overwhelmed that nothing can be done about this loss of youthfulness and that you can't turn back the clock? The aging process can be reversed with human Growth Hormone (HGH). HGH is a hormone that doesn't only slow biological aging but can actually reverse it!

HGH allows you to remain healthy and vigorous as you age, to stretch out the good years rather than prolong the bad ones. After years of research, science and medicine now confirm what you should have known earlier. Boost the levels of HGH in your body and you've got the key to looking young and feeling young. The important question now is, what is the best and safest way to increase HGH levels? Evidence points to the fact that vigorous exercise, fasting and taking certain supplements can stimulate your natural production of HGH. Indeed, HGH is the most powerful anti-aging compound ever discovered.

The pituitary gland, which is located in the brain, is the factory that produces HGH. This hormone is continually secreted throughout life, but the levels get less and less with age. It plays a very important part in helping our muscles, organs and bones to develop when we are young, and also influences cell functions and repair.

In fact, HGH promotes a number of biological functions most of which are associated with the vitality of youth. The decline of such a useful hormone leads to wrinkling, graying hair, decreased energy and sexual functions, declining memory and vision, lowered immunity, increased body fat, blood pressure, cholesterol, and development of heart problems, osteoporosis and other medical conditions thought to be part of the natural aging process.

Today, we understand that HGH declines with age not only because its production decreases, but also because it fails to be

released from the pituitary gland. Statistics show that from the age of 21 to 60, our production of HGH can drop as much as 80%. After you've passed your 21st birthday, your HGH levels decline by 14% per decade. Think of it this way. When you are 60, you have only one quarter of the HGH level you had when you were 21!

The happy news is that clinical studies show that increasing levels of HGH can dramatically reverse the signs and symptoms of aging. Until recently, HGH therapy has only been in the form of injections that are very expensive and difficult to obtain. Only the rich are able to afford it, and thus remain looking and feeling young. Special formulas using nutrient compounds are now available which coax the pituitary to produce and release HGH. Homeopathic preparations of HGH are also available, which increase the body's own HGH levels. These are all now freely available, and more importantly – affordable.

Tell-tale Signs of HGH Deficiency

Low HGH levels are accompanied by tell-tale features:

- increased anxiety
- reduced energy
- easily fatigues
- looking and feeling old
- reduced vitality
- decreased libido
- declining memory
- poor general health
- unexplained depression
- increased fat around abdomen and hips
- difficulty in keeping trim
- reduced endurance and strength
- poor quality of sleep
- high cholesterol (LDL) levels
- etc...

HGH Trims Body Fat

Notice that staying trim gets harder as the years go by? The body fat piles up faster than you can say "EXERCISE!". Now, by raising HGH levels, a series of enzymatic reactions are triggered which accelerates the burning of body fat. HGH helps you lose fat but gain lean muscle. Your weight may remain the same or even go up a little, but you become firmer and leaner, with marked reduction of fat around the abdomen and hips.

HGH Gives a Natural Face Lift

Still wish for that rosy, smooth, youthful complexion of days gone by? With HGH, you can look visibly younger within a few months. HGH stimulates protein synthesis and increases the production of collagen and elastin. Skin becomes firmer, elasticity returns, fine lines and wrinkles vanish, age spots fade and eye bags diminish. Even your hands and feet will get a new feeling of youthful smoothness.

HGH Boosts Energy

Say bye-bye to fatigue once and for all! HGH re-hydrates your body tissues and speeds up cell metabolism to increase vitality and energy. Within a few weeks on HGH you will have increased energy levels, better mood, less anxiety and feel like a younger person.

HGH Enhances Memory

Forgetting names and appointments? Finding difficulty to concentrate and losing track of your thoughts? Research shows that growth hormone deficient adults, when given HGH, improve their cognition (thinking and reasoning ability) as well as memory.

Maintaining high levels of HGH as we age may stem the loss of brain cells and keep our brains functional throughout our life span.

HGH Improves Vision

It's a fact of life – as you age your vision is going to fade. This is the result of the loss of lens elasticity in the eyes, starting from age 30 and becoming worse after 40. Although the effect of HGH on eye sight is not known, those on this hormone report improvement in their vision – they no longer need reading glasses, have sharper focus, better colour adaptation and enhanced night vision

HGH Restores Deep Sleep

A good night's worth of deep, nourishing sleep is what you need to look younger and feel great. The body's natural growth hormone release occurs shortly after we fall asleep. The highest release of HGH happens during deep sleep. Adults with low levels of HGH and the elderly have abnormal, disturbed sleep patterns. They get up frequently at nights and find it hard to get back to sleep, often waking up feeling tired. By increasing HGH levels many report that their sleep patterns improved and they enjoy restful, deep, quality sleep – like a baby. Some say that they need less sleep but feel well rested and energetic.

HGH Boosts Immunity

There is no doubt that immunity, aging and longevity are closely linked with growth hormone. Dr Greg Fahy, a prominent researcher in cellular physiology at Naval Medical Research Institute, Maryland, USA says – "HGH rejuvenates the immune system and is one of the most promising treatments

for human health and reversal of degenerative diseases. We have a chance of maintaining an immune system at the age of 80 which is similar to what we had at 20". Boosting immunity with HGH means you can be free from illness and disease and enjoy a longer, healthier life span.

Increased HGH Levels through Natural Supplements

Certain compounds found in nature can effectively raise HGH levels. Now there are natural HGH stimulating formulations designed to assist the body in producing and releasing more of its own HGH. There are currently a few different supplements available which can raise HGH levels through various methods. One simple and effective method is the unique spray device which delivers micro-doses of HGH directly into the blood via the mucous membrane under the tongue. Other methods include special formulas and diets with amino acid supplements.

Restore Your Quality of Life

Human Growth Hormone is truly the Fountain of Youth. It can enhance your looks, increase your vigour and zest for life, improve your health and boost your vitality. In fact, it is an amazing hormone which acts on almost every system of your body to revitalize and rejuvenate aging and damaged cells, even on the emotional level. If you are over 30, and you feel that you are losing the vitality of youth, consider taking a HGH-stimulating supplement to raise your body's own natural HGH levels the safe and effective way.

FORMULA 1 V2000



Formula1 V2000 has the highest concentration level of biologically active Growth Factors, orally administered, on the market today.

Comprising of over 2000ng per dosage, Formula1 V2000 stimulates the pituitary gland and imitates the body's natural secretion of Growth Hormone.

Growth hormone, HGH or GH, also known as Somatotropin, is the naturally occurring substance in our bodies responsible for the cellular regeneration of our organs, skin, muscles and bones - virtually all body tissue. It plays an important role in the balance of the endocrine system, enzyme function, immune

performance and brain function.

After the age of 20, our bodies GH production will decline at approximately 14% per decade. By the age of 30, the effects of aging could be felt acutely.

As we continue to secrete less and less growth hormone, the aging process accelerates. When we supplement with Formula1 V2000, we will be bestowed with: increased energy and stamina, improved mental function, stronger emotional well-being, better sleep patterns, excess fat loss, lean muscle gain, improved sexual performance, more effective digestion, enhanced immunity, reduction of wrinkles and cellulite.

For more information, please visit www.honeycombtechnology.com

a TCM Perspective on SKIN DISEASES

Although generally not recognized as a disease, Pruritus or itchy skin is certainly one. Ask anyone suffering from it and they will tell how it kills when itching kicks in. All of us have heard ‘to itch is human, to scratch is divine’. Scratching is one of the most satisfying of human sensations. But the ‘gifts’ we get in the form of ugly scars are very bothersome. There is this irresistible urge to scratch but the consequences of doing so keep nagging in the back of our minds. But then, Traditional Chinese Medicine (TCM) is there to help you.

TCM consider lungs as ‘heaven or sky’ due to its location on the uppermost part of the body and believes that the functions of our skin, the largest organ of human body, are closely related to the lungs. This in turn means that many skin diseases are caused by problems in the lungs. Thus, while treating diseases that occur on the limbs or scalp like acne, tinea (damp-typed eczema, psoriasis), spots, rash etc; medications for lungs such as ephedra, almond, schizonepeta, root of divaricate saposhnikovia are given for effective cure.

Even the ‘Synopsis of Golden Chamber – Pulse Tracing and Prognosis for Edema’ states - ‘Floating

and Bounding pulse: while the floating pulse is due to wind, the bounding pulse is due to vital energy (qi). Comparing both, signs of stronger wind indicates urticaria. Patients showing symptoms of itching leading to rashes eventually form scabs.’ The Floating pulse is also of pulmonary nature. Thus during diagnosis, lungs must be taken into consideration.

Following cases are two examples of wind pathogens hidden under the striae. The treatment in-cooperated the theory of lungs dominating the skin and hair, and the method of perspiration was used to expel the wind pathogens from the striae to achieve recovery.

CASE 1 An eight-year-old Chinese girl suffered an invasion of external pathogenic factors into the interior causing urticaria (hives), due to the improper handling of external infection. In three days, 70 percent of her skin was covered with different sizes of hives. After diagnosis, she was prescribed with Xiaofengsan, Jingfengbaidu powder and Wulingsan mainly to dispel wind, clear heat and dampness, along with Chinese medication for external use. After 3 days all the rashes on the girl’s body completely disappeared.

CASE 2 A 33-year-old Chinese male woke up to find an outbreak of hives, with lesions occurring particularly on the inner thigh region. Though initially the lesions appeared as simple mosquito bites, itching and swelling soon followed, which subsided after one or two hours each day. He had been suffering from this disease for over 20 years. After diagnosis, he was prescribed with Guizhi decoction and was fully recovered two weeks later. This is what Zhang Zhong Jin refers to as “recovery after sweat”.

Next, according to ‘The Inner Canon of Huangdi (Huangdi Neijing)’, all pain, itch and sores are primarily due to the heart. The heart controls blood circulation and poor blood circulation affects menstruation. It induces chloasma (freckles) commonly seen in middle-aged women. Chloasma

mostly occurs around the cheekbones appearing in the form of irregular brown to dark brown pigments which will darken when exposed to sunlight. Some patients also suffer from dark eye circles and a darker complexion as a result of poor menstrual discharge.

CASE 3 A case detailing the above was of a 26-year-old female who suffered severe stomach cramps with every menstrual cycle and had psoriasis on her limbs, mostly occurring symmetrically on the elbows and knees. Soon, the lesions on her body developed into thick and dry scales. After thorough diagnosis, she was prescribed Guizhi Fulin and was supplemented with meridian-warming decoction. In a month, the cramps reduced and she felt refreshed after discharging a large blood clot during her menstrual cycle. The psoriasis condition also saw an improvement of 50percent.

However, not all skin symptoms can be attributed to the lungs or the heart. One such exception is the SLE or Systemic Lupus Erythematosus. Treatments for these are more complex than the aforementioned cases.

possible to achieve effective treatment as long as the physician is able to grasp the pattern of syndrome and prescribe suitable medications.

One such case was of a 40-years-old female teacher who discovered rashes under her armpit, which persisted for days and was administered western drug injection. But not only did the symptoms remain; it also caused her heart palpitations. Then she went for TCM treatment. The diagnosis showed that the disease originated from her Kidney and was administered Zhulin decoction (polyporus sclerotium), along with Chinese medication for external use. She recovered after five days of treatment. While we know that liver helps in detoxification, but it is the Kidney that expels and filters the toxins. And the Zhulin decoction helped in expelling the dampness, thus aiding recovery.

The abovementioned four cases reflect different types of skin diseases displaying different symptoms like psoriasis, urticaria, acne, chloasma etc. In TCM terms, it is



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Varicose veins are the enlarged, tortuous and unsightly veins that usually appear on the legs. Varicose veins are a common condition and it affects up to 25-40 percent of females and 10-15 percent of males. It is estimated that it affects nearly 15 – 20 percent of all adults.

Treatment of Varicose veins and Spider veins



What causes varicose veins?

Risk factors are age, family history and pregnancy whereas obesity, prolonged standing, infection and trauma also make varicose veins worse.

The main problem is that these veins have “faulty or damaged” valves. These one- way valves are located throughout the length of the inside of these veins. “Faulty or damaged” valves are also known as incompetent valves.

Veins normally return blood from the legs to the heart and usually these one-way valves prevent blood from flowing backwards (reflux). When these valves are “faulty or damaged”, blood flows in both directions thereby causing pooling. This pooling of blood in the leg veins over a period of time causes the vein to bulge and protrude from the skin surface.

What are the symptoms?

Some patients have no symptoms whilst others may experience:

- Calf aches
- Calf heaviness
- Swelling of the legs
- Nocturnal calf cramps
- Itching
- Eczema
- Discolouration of the skin
- Hardening of the skin
- Thrombophlebitis
- Bleeding
- Ulcer formation

Diagnosis

Before treatment can be instituted, a duplex ultrasound should be performed. It is to determine the exact pattern of abnormal blood flow (reflux) and the location of the abnormal or “faulty” valves.

Treatment for varicose veins is targeted at the superficial leg veins or the long saphenous vein (LSV). It is important that the deep leg veins are assessed before treatment to ensure they are normal.

The duplex ultrasound is performed in the clinic with conduction gel. there is no downtime, no pain and no needles.

The results of the scan are immediate and with this result, the best treatment plan can be tailored for each individual patient.

What are the treatments?

The treatment of varicose veins depends on the results of clinical examination and duplex scan. Only the superficial vein or LSV is treated for varicose veins. These veins have “faulty or damaged” valves and hence are non- functioning. After treatment of the superficial vein or LSV, the blood from the legs now flows upwards through the deep vein system. There are many treatment options and the best option will be catered for each individual patient. In some cases, a combination of the treatment options may be useful

Endovenous Laser Therapy (EVLT)

This procedure is the latest treatment for varicose veins. It is the minimally invasive alternative to conventional vein surgery. It is safe, fast and effective.

A fine needle puncture is performed into the thigh vein(LSV) around the knee area and through this needle puncture, a laser fibre is inserted. This is performed using ultrasound guidance.

The thigh vein is called the long saphenous vein and it is this vein that has the “faulty” valves that cause varicose veins. The laser fibre is heated and damages the inner lining of the “faulty” vein. This causes the vein to collapse and close. The collapsed vein disappears over time.

This procedure is performed under sedation or regional/general anesthesia and is usually done as a day case. EVLT of a single leg usually takes less than an hour.

All patients walk home after the procedure and usually return to normal activity within a few days. There is no lengthy hospital stay, no scarring and minimal pain. Patients are encouraged to walk as much as possible after EVLT.

Possible complications include haematoma, bruising, numbness and phlebitis, which are all not serious.

Maximum benefit can be observed after 4- 6 weeks and residual varicosities can be treated either by injection sclerotherapy or ambulatory phlebectomy.

The most recent studies have shown EVLT to have good results up to a maximum of 5 years and a success rate of more than 98 percent. Most patients will wear elastic stockings for two weeks after treatment, depending on the size and extent of the veins treated.

Conventional Vein Surgery

This procedure has been done for decades and has been proven to be safe and effective. It has a success rate of more than 95 percent. It involves a small incision in the groin and removal of the “damaged” vein (LSV) via the groin incision. Other small incisions are made below the knee to remove varicose veins.

This procedure requires general or regional anesthesia. It requires hospitalization, longer recovery period and has more post operative pain/scarring when compared to EVLT.

This procedure has also been proven to have more bleeding, wound infection rates as compared to EVLT.

Conventional vein surgery is still recommended for some patients who some reason or other may not be suitable for EVLT.

Ultrasound guided sclerofoam therapy(UGFT)

Using a fine needle, sclerofoam is injected carefully into these spider veins and reticular veins. Sclerofoam is mixture of sclerosant (liquid) and air. The sclerofoam damages these small veins and causes them to collapse, these veins are then reabsorbed by the body.

This procedure is performed in the clinic. It requires multiple sessions, approximately 6-8 weeks apart. UGFT is performed with topical anesthetic cream, there is no downtime and patients can resume normal activity immediately. Possible complications include bruising, bleeding or staining but all of these are not serious.

Ambulatory Phlebectomy

This procedure involves making small incisions along the varicose veins and removing them using special tools. It may require multiple incisions and local anesthesia is needed.

It can be performed in the clinic with minimal downtime/pain and the patient can resume daily activity within 24 hrs. It can be performed as an adjunct to EVLT and possible side effects include, bleeding and haematoma and numbness.



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Proven, Effective and Less INVASIVE

More and more people are seeking sophisticated solutions to improve their looks, and it does seem like the future in beauty treatment lies increasingly with minimally-invasive procedures. Dr Sylvia Ramirez shares with us more about the latest treatments and how you can improve your sense of well-being by appearing more attractive.

In a study by Johnson, it was shown that attractive people, even among the elderly are perceived to be “youthful”, and are thought to be more successful in work and in life. In fact, his study concluded that attractiveness is largely determined by the appearance of youth and vigour in an individual.

Such an improvement in one’s perception of attractiveness has been shown to directly translate into improving self-esteem, lifting a low mood, and making it easier to interact with others.

What does it mean for our day-to-day lives? These findings suggest that there is nothing wrong with trying to look our best!

Regardless of our age, this is a natural desire that allows us to feel better about ourselves and for others to perceive us as full of energy and youthful. In fact, clinical studies show that patients who have undergone aesthetic treatments have an improved sense of well-being, felt more confident in social situations and experienced improved quality of life.

Now with the latest developments in health, we are able to make graceful and more natural improvements in our appearance even as we age. Besides regular exercise, healthy nutrition and good lifestyle habits; these non-invasive aesthetic treatments can be used in a preventive manner without ever looking artificial.

Treatment – and understanding what best suits you

The most recommended beauty procedures must correspond to the needs of patients, as ageing changes our face in several ways.

The skin becomes lax due to loss of collagen, and a normally oval face becomes rectangular or pear-shaped. The cheeks drop, resulting in an exaggeration of the nasolabial fold and development of two lines on the sides of the mouth. These lines may make a person appear sad, and is a common complaint among Asian patients. Lack of collagen also results in our skin pores becoming more prominent.

There are several treatments that can improve skin laxity by building collagen in the dermis.

These treatments include the Titan, an infrared device that is also known as the “non-surgical facelift” , Thermage as well as Apollo by Pollogen both of which work using radio-frequency. These technologies have a sufficient body of clinical studies to establish the safety and effectiveness of the treatments

Expression lines become deeper and more prominent with age. These lines which form due to facial expression and muscle contraction are the lines on our forehead (“frown lines”), next to our eyes (“smile lines”), around our lips (“lipstick lines”) and others. Over time, these lines become fixed, and can make us look “always angry” even when we are not using the muscles of expression

A simple way to temporarily reduce these expression lines is injection with Botulinum toxin A (one such brand is Botox). ‘Botulinum toxin A’ works by temporarily weakening the muscles that form the lines of expression.

Furthermore, an accumulation of sun damage results in changes in skin texture including development of fine and coarse wrinkles, formation of tiny blood vessels on the face (spider veins, telangiectasia), and sun-induced pigments including freckles, age spots or liver spots.

There are several treatments that can reduce the effects of sun damage. Some of these treatments may require a series of sessions, such as pigment removal by IPL. Other treatments may only need one or two sessions such as resurfacing devices (for example the Pearl). There are so-called because the damaged surface of the skin is gently removed, while stimulating the formation of new “baby” skin.

But how should patients ascertain which type of cosmetic treatments are reliable? This is a very important – and often difficult to establish – aspect in selecting the right physician and treatment.

In considering where to receive treatments, patients may want to consider the following factors:

- **Training of the physician**
- **Quality of machines: this may be difficult to judge for a consumer, it is important to ask for evidence that every claim is backed by clinical studies. A USFDA seal also adds a cushion of safety. Not all lasers are equal. Some of the cheaper machines may have a higher risk of burn and complications if there is no real time calibration.**
- **Do not be afraid to ask for before and after photos.**
- **Satisfied customers and word of mouth**
- **Dedication to evidence-base – ask for clinical studies**

- **Safety first, not necessarily cutting edge, the newest or the latest.**

The use of Botulinum Toxin and Fillers

These treatments are very effective in improving the appearance of wrinkles. Botox temporarily blocks the signal from a nerve to a muscle. The treated muscles are weaker, so that the wrinkle formed by muscle contraction relaxes and softens. Botox treatment lasts three to six months and lines and wrinkles gradually reappear as Botox wears off. With repeated treatments, however, we have observed that Botox may last longer as the muscles become less prominent from non-use. Recently, there has been news that non-physicians are injecting botulinum toxin. While considering the use of Botox, have it done only from a trained physician.

One of the questions often asked is whether Botox results in worsening of the wrinkles and the skin condition. In fact, there are no clinical studies that suggest that this can occur.

In our youth, our faces have full cheeks whereas the ageing face has a deflated and fallen appearance. Deep wrinkles may form such as those between the nose and cheeks- known as “naso-labial folds”.

Placing fillers can reduce the appearance of lines and wrinkles, fill in under-eye circles, define or enlarge the lips, and restore volume to areas that appear flattened such as the cheeks. It can even be used to improve the appearance of your nose- the so-called “5 minute nose job”. In these and many other ways, you can achieve a natural youthful appearance non-surgically with injectable fillers.

Dr Sylvia Ramirez is the scientific and medical director at Cutis Medical Laser Clinics. She is a Harvard-trained doctor and is US-board certified.

www.cutislaser.com





Fractional Laser Resurfacing

Ageing is certain. But ageing gracefully is in your hands.

As we age, our skin loses elasticity and moisture. It becomes slack, rougher and more fragile. It becomes more transparent due to the thinning of its surface. Such factors result in imperfections such as skin pigmentation, discolouration, wrinkles, frown lines, acne scars, textural irregularities, enlarged skin pores and sagging skin.

Besides these, other factors contribute to the deterioration of the skin and speed up the manifestations of the ageing process: the environment we live in, personal habits like smoking, exposure to sun, the food we eat and our lifestyle. Now, science has the solutions to successfully improve your skin condition and bring a higher quality of aesthetic treatment – be it the face, skin or body – with minimal discomfort.

Technology offers a variety of solutions to address your exact problems and provide a range of skin care products to suit different needs, from simple skin care and maintenance to complex plastic surgery. For skin problems in which simple topical creams fail to do the job, aesthetic treatment can help. One of these procedures is fractional laser resurfacing.

With modern technologies, people do not need to put up with skin imperfections anymore. Science is always on its search for innovative and accessible ways to reduce signs of ageing on the skin of men and women who value aesthetics as much as well-being. Dr Joseph Soh Liang of Neuglow shares more about the advent of fractional laser resurfacing.

What is fractional laser resurfacing?

Fractional laser resurfacing, also called fractional photothermolysis, is a non-invasive treatment that uses a device to deliver a laser beam pixel-led into thousands of microscopic treatment zones that target a fraction of the skin at a time. Fractional laser resurfacing combines the gap between ablative and non-ablative laser treatments that are used to treat photo-damaged and aging skin.

The concept of skin resurfacing basically comes from the idea that injuring a cell in a controlled manner will initiate healing, and will bring forth skin stronger and healthier than before, just like controlled sunburn.

Similar to how a digital photo is edited pixel by pixel, fractional laser resurfacing uses micro beams to damage certain targeted areas of the skin. Thus, causing only “fractional” damage to specific areas through the heat of the laser, leaving other areas intact and undamaged.

In fractional laser resurfacing, after laser beams pass through the skin’s surface (epidermis) and the middle layer of the skin (dermis), the injured cells then start the process of healing through the release of collagen. The surrounding undamaged tissues then become an adequate reservoir of viable tissue by filling in the damaged areas with new cells. This allows more rapid repair of the epidermis.

This treatment is used for improving skin pigmentation, melasma, sun-damaged skin, freckles, age spots, acne scars, facial wrinkles and lines, surgical scarring and chloasma. After fractional laser resurfacing treatment, the skin texture and tone will improve because of the collagen remodelling. At lower levels of treatment, fine wrinkles are reduced, and at higher levels of treatment, deep wrinkles are reduced. Facial contours will improve and your overall appearance will be enhanced due to a new healthier collagen growth.

How it feels

According to most patients, depending on the type of device used and the part of the body that is to be treated, just a localised sensation of mild, tolerable heat can be felt during the brief procedure. A topical anaesthesia, usually cream, is applied before the procedure to lessen the discomfort. Also, the need for topical anaesthesia, contact gels, cooling systems and optical dyes will depend on the type of device used.

Immediately after the treatment, the skin may feel tight and look pinkish, like sunburned. Usually, the skin will appear red for two days following the session, after which the redness will subside and make-up can be applied. Mild exfoliation of the skin may last for up to one week.

Not for you?

If you have a history of skin sensitivity to light, scarring problems, impetigo or an active infection near the site of treatment, then fractional laser resurfacing is not for you. Also those who have been using oral-retinoids in the treatment of acne in the past 12 months should refrain from this treatment. Since the safety of this treatment of pregnant and breastfeeding mothers is still not established, it is best to wait until you have given birth or finished breastfeeding before you undergo this form of treatment.

It is always safe to take precautions and ask your doctor to recommend the appropriate treatment regime for you. Typically, this will vary from three to six treatments, depending on your desired outcome, the condition of your skin and the level of improvement you are seeking relative to downtime or recovery time.



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Be it East or West, the desire to look good is universal. And what can be considered as another example of this being the Asian century, the “aesthetic surgery wave”, which was mainly a western phenomenon a few years back, has made inroads in the Asian market like never before. *Healthy Times* reports

Singaporeans going for

From eyelids to abdomen, or from breast augmentation to liposuction, there is no denying the fact that an ever increasing number of Singaporeans or South Asians in general are going under the knife for better looks – even if the science is anything but new to the region, as it’s here, in India in the sixth century BC, that the oldest Sanskrit ayurvedic text on plastic surgery, “Sushruta Samhita”, was written.

Today, the Asia Pacific region including Singapore is witnessing an increasing desire to acquire typical Caucasian features such as long nose, bigger bosom, and the most popular, wider eyes. (The procedure for the latter is known as blepharoplasty, or surgical modification of the eyelid.)

Growing demand for aesthetic surgeries

Additionally, psychologists believe that with society becoming more and more materialistic, people are getting conscious about their looks and believe that “being attractive” is a guarantee enough for success. The desire, it seems, is to be “forever young”.

Dr Woffles Wu, a prominent aesthetic surgeon in Singapore, says: “A combination of three factors – rising disposable incomes, development of sophisticated methods of aesthetic surgery and a large degree of patient awareness – has made this aesthetic wave a reality in Asia.”

Although there are no official figures, rough estimates suggest that the number of people going in for aesthetic surgeries in Singapore alone has increased by nearly three times in the past decade.

The growing trend in Singapore is testimonial to the fact that the inaugural edition of the Aesthetics Asia Exhibition and Congress in September 2009 was attended by 1,402 delegates from 29 countries. It was the largest event in Asia for plastic surgeons, cosmetic surgeons, dermatologists, anti-aging physicians and aesthetic practitioners. Its success has prompted the Singapore Association of Plastic Surgeons, one of the partners in the event, to hold the 2010 edition of Aesthetics Asia at the brand new Marina Bay Sands from September 17 to 19.

better looks, quite literally!

Clearer regulation guidelines

And for those who can’t afford aesthetic surgeries in Singapore, neighbouring countries such as South Korea, Thailand and Taiwan provide a cheaper option. “The cost of surgery in these places can be as low as one-tenth of that in Singapore,” says a travel agent who specialises in such medical tours.

But, these cheaper options come with a price. Dr Wu, who has been practising since 1987, cautions: “Aesthetic surgery is a highly skilled job. People should avoid falling into the trap of false advertising and misguided awareness.”

Recognising the importance of this, the Singapore Medical Council (SMC), a statutory board under the Ministry of Health, had laid down clear guidelines on aesthetic practices to govern and regulate the professional conduct and ethics of registered aesthetic surgical practitioners.

“Now, it’s up to the SMC to ensure the effective implementation of these guidelines and prevent General Practitioners from carrying out aesthetic surgeries which they are not authorised to do,” Dr Wu concludes.





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Want to turn the clock backwards?

Try Instant-Result Face Lifting Treatment...

To “look and feel good” has been a universal human desire since time immemorial. But as we grow old, our muscles mature and age starts to show up on our bodies. Though, with regular exercises and proper diet, we can keep ourselves in shape, this doesn’t necessarily bear fruit for the human face.

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But then, the “Instant-Result Face Lifting Treatment” comes to the rescue. It gives you a shield against ageing by hydrating the skin and restoring its elasticity and firmness. It’s like taking your facing muscles for a work-out!

The Instant-Result Face Lifting Treatment is a nine-step procedure, designed to make you ‘look and feel youthful’, just after one session. After taking into account any additional skin and facial concerns, the treatment begins with a facial cleanse. Following is the detailed procedure:

step 1

Cleansing

The consultant thoroughly cleanse the face and remove all traces of make-up



step 2

Scrub/Exfoliating

The consultant wipes off the cream with soft gauze.

The cleansing ritual is then followed by a facial scrub to help exfoliate dead skin cells and other impurities

Exfoliating cream is massaged onto the face.

Exfoliating creams is wiped by using gauze.

step 3

Skin Elasticity Analysis

The consultant analyses skin elasticity/ suppleness and points out the areas which need lifting and toning.

step 4

Triple Effect Face Lifter

The Triple Effect Face Lifter is gently massaged around the chin area and all throughout one side of the face. Same is continued for the other side as well.



step 5

Ultrasound

The ultrasound helps in allowing the serum to fully penetrate into the skin and carefully glided all over the face.



step 6

Point Massage

Point massage on various acupuncture points is performed to relax the skin and muscles by stimulating the lymph nodes. This also helps in allowing the skin to absorb the serum.

step 7

Moisturising Mask

An aloe vera mask is used to further lift the face and soothe it.

The mask is left for 15 minutes, after which the gauze is peeled off, along with the mask.

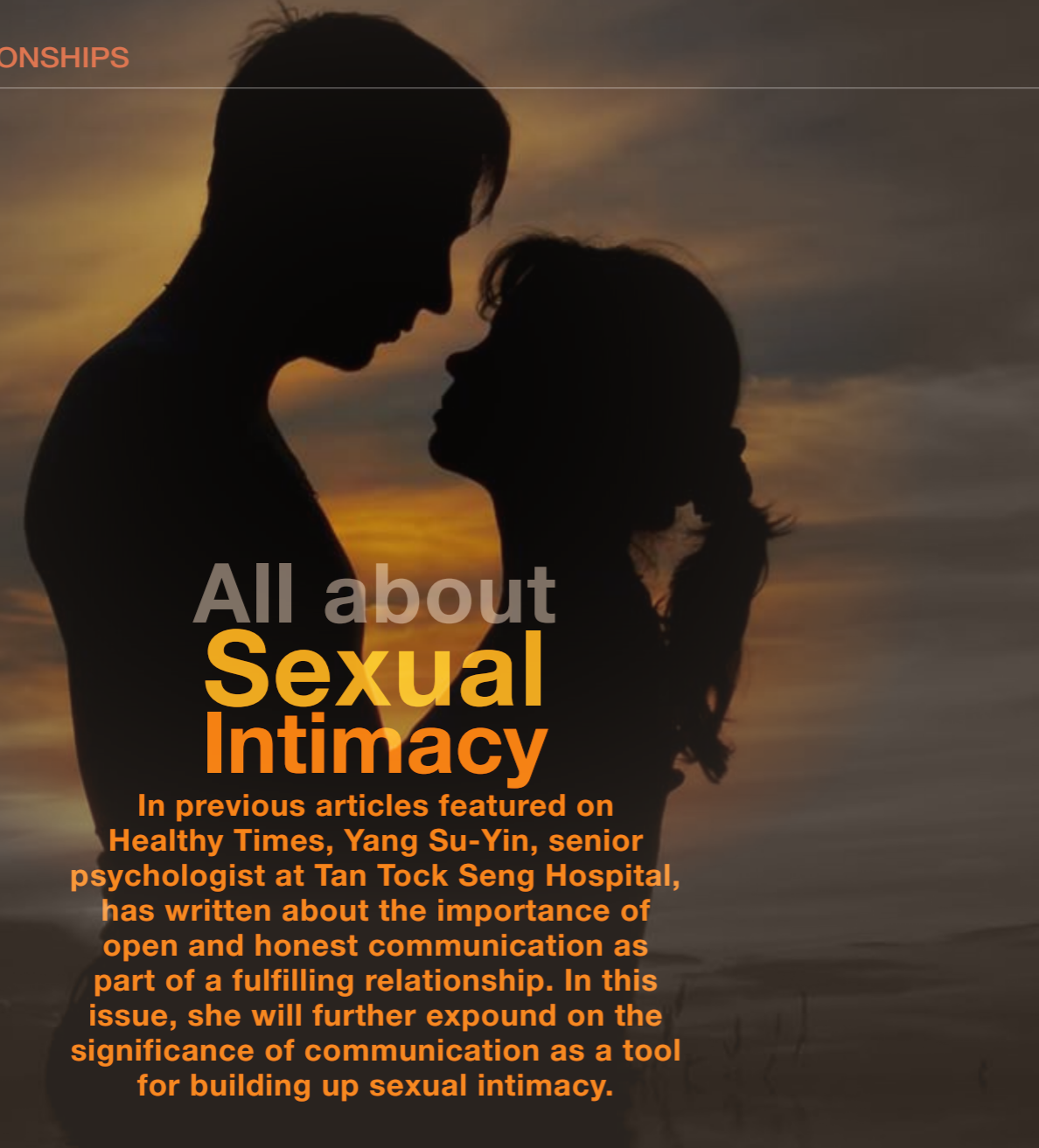
step 8

Finishing Touch

A combo of toner, moisturizer and sun-block is patted onto the face as part of final finishing touches.

The entire procedure will take approximately 90 minutes and visible results just in one session. The face will start glowing and radiating youthfulness!

All this makes Instant-Result Face Lifting Treatment a must-try for women who want to turn the clock backwards!



All about Sexual Intimacy

In previous articles featured on Healthy Times, Yang Su-Yin, senior psychologist at Tan Tock Seng Hospital, has written about the importance of open and honest communication as part of a fulfilling relationship. In this issue, she will further expound on the significance of communication as a tool for building up sexual intimacy.

You often hear remarks about how good communication between a man and a woman is critical to maintaining a strong sexual relationship. It is a line of thinking that is rather easy to grasp perhaps, as it is not difficult for most people to understand that effective communication is at the core of most healthy relationships. But things turn a bit trickier when couples come to terms with having to communicate effectively and speak to each other honestly about one’s romantic thoughts, sexual gratification and desires. Indeed, open communication about sex between partners is essential for couples to develop sexual intimacy. Sexual intimacy can often be misinterpreted as simply being a physical act of sexual intercourse

or outercourse (non-penetrative sex). But in this context, it actually points more to the sense of closeness that two individuals share with each other, a close bond between the two that ‘feels right’. **Achieving sexual intimacy** So what can couples attempt in their relationship to enhance sexual intimacy? The achievement of true sexual intimacy in a relationship does require some work in the form of good communication, transparency, and coming to terms with each other’s vulnerability. A two-way response here is particularly important; only through mutual understanding and interaction can one be allowed the private knowledge of his or her partner.

As such, sexual intimacy is not achieved overnight, and is built through patience, understanding and a willingness to communicate about one’s thoughts, feelings, sexual likes and dislikes and preferences. Oftentimes, a certain level of comfort and understanding must be established before a couple would be able to communicate openly about their sexual concerns. A couple will need to provide gentle and clear instructions in an open and non-judgemental environment, where both can learn from each other. For instance, if the man is having sexual difficulties or a high sex drive and the woman is unable to respond to these needs and desires adequately, it is a problem for the couple to solve together. This understanding is especially important in long-term relationships as changes in the life stages and the ageing process can affect the sexual relationship; as the ageing process can alter hormonal level, more physical stimulation may be required or more time needed for sexual arousal. **Expressing a common language** In most healthy relationships, sexual fulfilment and intimacy begin with the quality of life in the non-sexual areas of a relationship. That’s why it is hardly surprising that a woman who is treated with little respect in a relationship can respond well to the advances of her husband. It helps to develop a personal vocabulary that allows you to discuss intimacy comfortably and to communicate likes and dislikes without being judged as awkward or odd. As a result, you will feel less conscious when you want to ask your partner either to do something specific or to stop certain behaviour. You will also be aware of what gives your partner pleasure, and you can indulge in them or have the freedom not to do so.

Rekindling passion in your relationship Make an effort to try new activities with your partner, create an environment of romance, and experience a change in environment once in a while. In other words, do things that you would as if you were two young lovers in love, and not allow the relationship to turn stale.

Establishing good communication Again, a good two-way communication in a relationship is very important; negotiation and compromise, together with expression of affection, are major ingredients of good sex. The communication of one’s needs and affection assures your partner of the stability of the relationship and allows one to feel relaxed enough to enjoy sex. Good communication also allows the couple to address awkward issues such as sexual fears, lack of sexual information, the inability to reach orgasm, loss of sexual functions and negative beliefs about sex. Find out and understand what constitutes a good experience for your partner. Learn about your partner’s moods, timing and what is relaxing, stimulating and pleasurable.

If both a man and a woman are afraid to talk to their respective partner about their difficulties in the sexual relationship and search for a solution together, she and her partner have not truly achieved sexual intimacy.

Indeed, trust forms the basic foundation of any sexual relationship – and sexual intimacy can be enjoyed by all in a relationship as long as there is a foundation of trust and a willingness to communicate.

Some questions you could consider asking each other when communicating about sex are:

- What would make love-making more pleasurable for me? For you?
- What environment would set the best atmosphere for lovemaking for me? For you?
- I may know your likes and dislikes in the past, but are they any different this time?

Some communicative phrases to consider would be:

- I enjoy the way you....
- I take pleasure in our intimacy by the way you....



Paediatric Intensive Care in Cambodia:

Lending a much needed helping hand

Paediatric intensive care is the area of medicine that concerns itself with children who are suffering from serious illnesses. An ongoing project undertaken by the Singapore International Foundation (SIF) in Phnom Penh, Cambodia aims to improve the quality of the Paediatric Intensive Care Unit of the National Paediatric Hospital. Royce Tan reports

Children are a joy to be around. They embody that sweet, lovely innocence that is not of this world. Sadly, as life would have it, they are not spared the vagaries of illnesses as well.

Unlike Singapore where we have a world-class health care system supported by world-class medical professionals such as doctors, nurses, social workers and other medical professionals in the field of paediatric intensive care, children who are ill in Third World countries around the region are not as fortunate. Cambodia is one such country.

Following the success of the Singapore Volunteers Overseas Paediatric Emergency Care project that took place from 2004-2007 in Cambodia, the Singapore International Foundation fostered a new project known as the Singapore Volunteers Overseas (SVO), Paediatric Intensive Care Unit Project, a four-year long capacity building initiative (from 2008 to 2011). The project was organised in partnership with the National Paediatric Hospital of Cambodia (NPH) and Singapore's KK Women's and Children's

Hospital. (KKH) and funded by the Metro for Children Charity.

The Metro for Children Charity, launched in 2001, is an annual fund-raising initiative that aims to help children from needy communities in the region, by supporting Singapore volunteers in conducting skills training and community service projects. The money raised each year will help finance the participation of Singapore students and volunteers in capacity building projects for the long-term benefit and welfare of children around Asia.

During the Khmer Rouge regime, the hospital was abandoned and left in disrepair. Today, the NPH is a government-run paediatric hospital managed by the Cambodian Ministry of Health. The hospital aims to meet the national paediatric needs of Cambodia, and to improve the quality of care for Cambodian children in order to reduce mortality rate, especially of the main killer diseases. The hospital sees over 70,000 to 120,000 consultations per year and 7,000 to 10,000 admissions annually.

“Part of the reason why Cambodia's health and medical care situation is in such a dire and dismal state is due to the devastation of the Khmer Rouge regime during which many intellectuals and scholars were decimated, doctors included. Cambodia was left with about 40 doctors after the Khmer Rouge reign, as compared with over 700 doctors before the Khmer Rouge's rule,” explains Prof Chhour Y Meng, director of the National Paediatric Hospital, who lived through the ominously dark rule of the Khmer Rouge regime.

SIF Phnom Penh Paediatric Intensive Care Unit (PICU) Project

This SIF project's objectives are to assist NPH to upgrade its level of paediatric intensive care delivery as well as to enable NPH staff to manage critically ill neonates, infants and children. It also aims to catalyse improvements in paediatric intensive care in Cambodia's public health care system. The SVO specialist team of volunteers comprises of paediatric intensive care medical professionals from KKH that includes paediatric intensive care doctors, nurses, neonatologist and other specialised personnel such as respiratory therapist and infection control nurse.

Over a four-year period, the team plans to conduct five training frames for some 30 NPH medical personnel. Each frame last three to four days and will take the form of lectures, workshops and hands-on bedside training. On this trip, the team is at the third leg of the project and it includes a two-week mentorship programme.

“Before we embarked on this project, we conducted a feasibility study with SIF to evaluate the state of their Paediatric Intensive Care situation and see how we can possibly make a difference coming here. We needed to know what we can work with, know who the people we would be training are, what motivates them, their perceptions of the problems they face and their medium and long-term goals. We also consider what other help they are getting and try to leverage upon and work with that,” explains Dr Loh Tsee Foong, consultant, Paediatric Intensive Care Unit (PICU), KKH.

“During our first trip, we imparted to them a lot of administrative processes that are needed in Paediatric

intensive care. Our second trip was mostly about sharing knowledge, skills and experiences in nursing neonates and controlling infections in ICUs. This trip, we will be teaching about respiratory failure, use of ventilator machines and Continuous positive airway pressure (CPAP), which is a treatment that delivers slightly, pressurized air during the breathing cycle,” Dr Loh further explains.

“We wanted to find out what state and standard their Paediatric Intensive Care Unit (PICU) is in. What equipment they have and what they don't have. We wanted to know what level of knowledge and skill they possessed and what we can possibly recommend to help improve their PICU. For example, we learnt that they had no cupboards for which to place their medical supplies and that though they had a ventilator, they did not know how to use it,” explains nurse clinician Sister Lee Ang Noi and senior staff nurse Phang Hwei Mei, both of the PICU, KKH, on the feasibility studies the team conducted prior to the project.

On their experiences training the Cambodia doctors and nurses, Dr Loh has this to say: “One thing I have observed is their hesitancy in practicing the things that are taught. Their mindset must change to be willing to accept new things. There is a lot of work to be done in this area. However, they are very frank and open about their ignorance and that makes them easy to teach. And in gauging the efficacy and effectiveness of the PICU we can't just look at the PICU, we need to evaluate aspects of the hospital such as process, manpower, and infrastructure. For example, it's probably not the fault of the PICU if the hospital's labs can't do a certain medical test. I believe it's a process of instilling changes within the whole hospital system. We conduct our training in such a way that it is both modular and interdependent. Everything is related to each other. After training, doctors are given assessment tests on their theoretical knowledge while the nurses are given a practical test.





Sister Lee and Ms Phang have this to add: “We are training nurses now on how to use the ventilator, we tailor our training to be interrelated with what are being taught to the doctors at the hospital. We cover the nursing aspect of what the doctors teach. Our training sessions are more hands on, because we realized earlier through our feasibility studies that it is hands on training that the nurses here lack. After each training session, we allow them to practice on the ventilator and then we test and assess what they have learnt. We realised that because of a shortage of manpower, they only monitor their patients every three hours as opposed to 1 hour that we do back in Singapore. Anything can happen in three hours. The language barrier is definitely an impediment, and we found that the nurses’ knowledge base is not particularly strong either. Furthermore, unlike in Singapore, Cambodian nurses are not trained in any particular specialty. They are, however, very eager to learn.”

As to what compelled the doctors and nurses to volunteer for the project, Sister Lee, who was asked by Dr Loh to join the project mentions, said: “I find it very rewarding that I am able to come here and train the nurses here to competence and effectiveness. It has been a really satisfying experience so far.”

Senior staff nurse Phang, who was persuaded by Sister Lee to come for this project, said: “They prepared me for the situation here, and yet I was still pretty surprised when I actually got here. Things are not very well organised around here. For example, they reuse and recycle some of their medical consumables here again and again. Though they sterilise them, these consumables end up torn after some time. They are however very willing to improve and accommodate us. We recommended for example, that larger sinks be built as they were needed to clean medical equipment and we asked for cabinets to be built to store medical



supplies, and help the nurses to be more organised. They promptly did what we recommended”

With regard to expectation of improvements, Dr Loh said: “We have definitely seen some changes since we first came in 2008. I believe in the value and the potential impact of this project and that is why I am here. Yet, we cannot let our definitions and measurements of change be coloured only by our own perceptions and expectations of what exactly constitutes change. I believe that with changes, the timing has to be right, and so must the pace. There’s not going to be far reaching tidal-wave kind of change overnight sweeping across the whole country, because for that, you need the collective will of the medical and political collective of the country behind it. We are only in the position to help, to teach, and to make suggestions on what they can do to improve. And that is all. They can implement the changes in their own time and space. They are gracious enough to welcome us in their country and we have to return that accord by respecting them and the pace of change that they are comfortable with as well, we have to pay heed to cultural sensibilities. I believe that they can tell that we are sincere in our desire and efforts to help them and they do listen to us. In the end, I believe them (Cambodians) to be genuinely sincere people and I can tell they really appreciate our coming here to share our knowledge and expertise with them. That said, I can see the transformation that has happened here and that is basically why I volunteered for this project. Because I felt like I could effect change.”

As to what he himself have gotten out of the whole experience, Dr Loh spoke with pensiveness: “For one, the friends and relationships that I have had the opportunity and privilege to meet and build will surely stay with me. I have gotten some invaluable insights in our cultural differences, and to me, that is quite rewarding. This is and has been an experience not everyone can get for I know I have experienced some growth in myself and my character.”

When asked about what hopes he have for the paediatric intensive care situation of NPH, Dr Loh concludes: “I don’t hope that they will do good. I know they will become good. The Cambodian people are particularly resilient and hopeful about their future and even though they have faced great adversity they can still manage a smile and a laugh about things. We are encouraged by their enthusiasm and willingness to learn. I believe it is just a matter of time before they achieve a reasonably satisfactory standard in their paediatric intensive care capabilities. I only hope that as their country and culture go about with vast and rapid change that is to come, that they can laugh and be happy about the changes to come just as they can smile and laugh as they are now. I only hope that they do not lose their sense of humour and candour no matter what the future brings.”

With a belief as firm and certain as Dr Loh’s about Cambodia’s potential, we would certainly expect Cambodian doctors and nurses alike to find their footing and go through their own personal process of professional development so that in time to come, Cambodian children who are ill can be afforded the same quality health care as their counterparts in the developed world are afforded. For then, SVOs like Prof Loh Tsee Foong, Dr Siti Nur Hanim Buang, Sister Lee Ang Noi and Senior Staff Nurse Phang Hwei Mei would know that their volunteering efforts have borne fruit. And it is sweet. The wounded soul of Cambodia would then have eased one step closer to healing.



Effecting change

Prof Chhour Y Meng displayed great enthusiasm for the difference made by the SIF initiatives:

“In early 2000, we conducted a statistical study and realized that 56 percent of all fatalities happened within 24 hours of admission. We realised that one of the key reasons for that was that we had no Emergency and Paediatric Intensive Care Unit then.

With the training and help we received from SVOs involved with SIF, over the 2004-2007 Paediatric Emergency Care project and the Paediatric Intensive Care Project (2008-2011) this time, we now have a PICU and learnt much from the SVOs on how to save the lives of children. As a result, we have effectively reduced that number to 34 percent. We have also made vast strides in reducing our mortality rates from 2.4 children per 100 patients in the late 1990s to our present low with just slightly above 1.0+ children per 100 patients admitted. The diagnostic ability of our doctors now is more accurate than ever. These are all very encouraging improvements and we work continuously to reduce these numbers. The effectiveness of the SIF training programs lies in their combining theory with practice. Right now, there are no other NGOs that are

supporting NPH, that are doing what SIF is doing. SIF is advising us on how to improve our capabilities as well. Medical science and technology is always advancing; we must never stop learning, growing and improving.

At the moment, Cambodian universities have got post grad training to become specialists in paediatrics but no specialist training programme for sub-specialist training in paediatrics. Doctors have to go abroad for sub-specialty training in paediatric care. Our goal and vision is to have 10 specialists for of every hundred paediatric doctors.”

Said Dr Srour Yina, chief of Paediatric Intensive Care Unit, NPH: “We have clearly benefited from the training we received from the SVOs. After two trips by Dr Loh’s Team, our nursing care has improved drastically and we have now instituted standard monitoring in

our PICU. The SVOs have imparted valuable knowledge and skills to our nurses through teaching and practice as well. The SVOs have taught us how to use the ventilators we have. Most problems in PICU, relates to respiratory and circulatory problems which can result in shock, our doctors have now learned much from Dr Loh and his team on how to treat shock in children. Dr Loh’s particular teaching method of relating theory with bedside problem solving is, I believe, highly effective. I only see that we as doctors are not quite so specialised in our sub-specialty within PICU yet and hope we can focus more on the various sub-specialties of PICU in the future. I look forward to their mentorship program this time round. Medical science is always advancing and there is always something new to learn, and as a doctor, I look forward for that.”

Established in 1991, the Singapore International Foundation is a non-profit organisation that aims to build a better world through shared ideas, skills and experiences, so as to uplift lives and create greater understanding between Singaporeans and world communities.

The Singapore Volunteers Overseas Programme is one of the programmes where SIF and its Singaporean volunteers assist overseas communities based on the idea that shared skills and experiences can empower countries and communities and improve the lives of individuals. Since 1991, the SVO programme has supported more than 1600 Singaporeans who have volunteered overseas. For more information, visit www.sif.org.sg

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SINGAPORE HOSTS INAUGURAL YOUTH OLYMPIC GAMES

As Singapore gears up to host the inaugural Youth Olympic Games (YOG) from 14 to 26 August later this year, the stage is all set for about 3,600 young athletes- aged between 14 to 18 years- from 205 National Olympic Committees (NOCs) to compete in 26 sports. The event will also host about 1,400 officials, along with estimated 1,200 media representatives; 20,000 local and international volunteers and more than 500,000 spectators.

Also on offer will be a Culture and Education Programme to participating athletes showcasing Singapore's methods in conserving and managing water. The Singapore Youth Olympic Games Organising Committee (SYOGOC) will organise tours of the Marina Barrage for some 120 athletes a day, all through the event duration.

Singapore's legacy – YOG Scholarships

Additionally Singapore, as the inaugural host's lasting legacy to the YOG, will provide six scholarships to deserving athletes between the age of 13 and 15 years (one from each of the five continents and one from Singapore) to study at the Singapore Sports School commencing January 2011. Available to all NOCs, these scholarships will be provided in seven sports: aquatics, athletics, badminton, football, golf, sailing and table tennis.

Michael Phelps – official YOG ambassador

Giving a major boost to the games is the appointment of swimming superstar Michael Phelps as the first official Ambassador of the YOG. Phelps, a 16-time Olympic medallist and often considered as the greatest swimmer ever, will be promoting the YOG by encouraging the involvement of young people from around the world.

YOG Mascots – Lyo and Merly

In tune with the Olympic values of Excellence, Friendship and Respect; the official mascots for the YOG are chosen as 'Lyo' (short for "Lion of the Youth Olympics" and pronounced as Leo) and 'Merly' ("mer" meaning the sea and "ly" stands for liveliness and youthfulness). Lyo, a lion cub, embodies the youthful boundless energy, the determination to live life to the fullest and the zeal to strive for Excellence; while Merly, a merlion, encourages young people to play an active role in their communities and promote respect for one another.

YOG village at NTU

While the 18 competition and 12 training venues for the

event are spread all across the island, a YOG village is being prepared at the Nanyang Technological University campus that will house over 5,000 athletes and team officials, for 18 days, starting the 10th of August. The village will be divided into two zones – the Residential Zone (RZ) and the Village Square (VS). It will be well-equipped with training facilities, TV rooms, meeting rooms, wireless Internet hot-spot access, prayer rooms, laundry services and shared medical spaces.

In addition, the VS will hold World Culture Village exhibition featuring the history and cultures of all the participating NOCs, musical performances, concerts, cultural and educational programmes, chat with Champions, and various sport-related forums.

Singapore's hope

With young athletes and debutants being the key contributors in Singapore's impressive haul of 98 medals in last year's 25th Southeast Asian Games held at Vientiane, Laos, all eyes are set on the YOG now.

As these will be the inaugural games, organizers are refraining from making any predictions. But if the medal tally at the 2009 Asian Youth Games is any indication (Singapore stood fourth overall), the host nation hopes will rest on – world sailing champion Darren Choy, Singapore Sports School student and sailor Rachel Lee, shuttler Gerald Ong, Modern pentathlete - Valerie Lim and Loh Jian Han, young wrestler Puteri Erna Natasha, paddlers - Isabelle Li and Kerry Tan, long jumper Nurul Jannah, and fencer Liane Wong.

Nanjing to host the second edition

So as the countdown for YOG starts, the International Olympic Committee (IOC) anticipating the success of the inaugural games has already chosen the Chinese city of Nanjing to host the second edition in 2014.

Metta Charity Walk cum Family Carnival



The Metta Welfare Association (MWA) is organizing a ‘Metta Charity Walk cum Family Carnival’ on Sunday, June 6th, 2010 from 9 am to 6 pm. The venue is Metta Building/ Metta School located at 32, Simei Street 1, for which a free shuttle bus service will run between the event venue and Simei MRT station from 8.30 am to 6.30 pm. The admission for the carnival is free, while individuals will pay \$10 for Charity Walk. The rate reduces to \$5 per person for groups of 20 or more (goodie bag and limited edition tee included). The highlights include games, stage performances, handicrafts, trendy apparel, vegetarian food and a Karaoke competition. Ms Jessica Tan, MP for East Coast GRC, will be the guest of honour, and will also lead a Walkathon. All proceeds will fund MWA’s services in aid of 1,000 beneficiaries from various races and religions. For more information, please visit www.metta.org.sg

‘gloskinMD’,

a revolutionary skin store providing physician recommended top-of-the-line skin care products from around the world, officially opened a new store on 9 Scotts Road #03-07, Pacific Plaza on 29th January 2010 at a gala ceremony. The opening highlights were - the official launch of Truefitt & Hill gentlemen’s toiletries including the world’s finest razors, shaving creams, aftershaves and colognes; and HairMax LaserComb’s latest models including the HairMax LaserComb Advanced 7, Lux 9 and Professional 12.

The store’s main attractions are:

- glōminerals Mineral Make-up: known in Hollywood as the “Miracle Make-up”; it has also gained popularity in Singapore for its long lasting staying power, pharmaceutical grade



ingredients, powerful antioxidants and the infusion of Vitamins C,A,K,E with Green Tea.

- Glōtherapeutics: a revolutionary skin care system that specializes in chemical exfoliation treatments and serums, catering to both men and women with either oily or dry skin.
- Kaeline Argan Oil: imported from Morocco, it has extremely high Vitamin E content along with phytosterols, which are remarkably good for scar tissue reduction and a host of other skin rejuvenating processes.
- Ice Mask: made in Switzerland, it strengthens skin and reduces wrinkles when used regularly. The aloe vera rebuilds aged or sun damaged skin tissues and Vitamin C protects the outer layer of the skin against environmental contaminants. Ice-Mask is all natural and hypoallergenic.
- HairMax LaserComb: US FDA cleared handheld laser devices designed to help hair growth in both men and women.

Colorectal Cancer Awareness Month organized by the Singapore Cancer Society (SCS) in March

In continuation with its effort to fight cancer, the SCS organized its 9th Colorectal Cancer Awareness Month in March with its island-wide Faecal Occult Blood Test (FOBT) kits distribution. The SCS aims to screen nearly 35,000 people in 2010. Last year, close to 30,000 persons were screened using FOBT and it helped save 225 lives, SCS informed. For more information, visit www.singaporecancersociety.org.sg

Sneak Preview
FOR THE NEXT ISSUE

World Alzheimer’s Day and World Heart Day Campaign

World Alzheimer’s Day falls on September 21 each year and is a day focused on raising awareness about Alzheimer’s disease, the most common form of dementia worldwide the impairs mental functions.

Although the course of Alzheimer’s is unique for each sufferer, there are several common symptoms and one of the most commonly recognised symptom is perhaps memory loss. There is currently no cure for Alzheimer’s and the disease is degenerative; therefore, proper management of patients is very important.

World Heart Day will take place on September 26, an occasion created to inform people around the globe that heart disease and stroke are the world leading cause of death, leading to 17.2 million deaths each year.

This year’s campaign message aims to encourage healthy habits in the workplace to reduce the risk for heart disease and stroke.

Find out more about both campaigns in the next issue of *Healthy Times*.

ANNOUNCEMENT:
The contest winners from Healthy Times issue 41 will be announced on www.healthytimes.com.sg/blog



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- 1 set of Lift Technic Slimming Anti cellulite firming care + 1 tube of Lift Technic Slimming Shower Gel
- 2 packs of Jointace chondroitin glucosamine
- Rice bran oil (500ml) worth \$5.00

* While stocks last. In the event of no availability, we will substitute with other products

SUBSCRIPTION FORM

DETAILS :

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NRIC _____ Occupation _____ Age _____
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Yes, many Glucosamine products are not up to standard.

Our standard ✓

Recently, a competitor pointed out that many Glucosamine and Chondroitin products were not up to standard. It quoted a University Alberta, Canada, study showing 13 out of 14 Glucosamine products contained less than 82% of their label claims.

We can't speak for others - but **our standards are high**. And most brands on the market don't come near.

At **MarinEx Pharmaceuticals (Singapore) Pte Ltd.**, every batch of our Glucosamine goes through a series of stringent tests that surpasses even WHO standards. No "simple checks" for us.

Only product that has a purity rating 98% or more is released to you, the public.

We at MarinEx jealously guard our reputation as a world leader in **Glycoscience** research and production

Over the years, we've refined our product through a heavy investment in research and development to a point where MarinEx Glucosamine Sulphate - because of its superior purity and structure – is readily absorbed by the joints to hasten cartilage production and joint pain relief more effectively than most other well-known brands.

Which is why few can reach our standards.

**MarinEx Glucosamine Sulphate
For Healthy Joints and Cartilages**

Singapore's Very First Glycoscience
Biotechnology Company
Buy Singapore Product ✓✓



60 capsules

180 capsules

Developed and quality controlled by:



MarinEx Pharmaceuticals (Singapore) Pte Ltd

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Q: What is VelaShape™?

A: VelaShape™ is the only FDA cleared device that effectively and safely contours, shapes and slims the body by reducing cellulite and firming problem areas in as little as 4 treatments.

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