

t has been an exceptionally busy 2013 for Mount Alvernia Hospital, which is satisfying because it means more people are choosing our hospital for their care, and at the same time reassuring because it means we are able to deliver to our patients the right level of value-based healthcare services expected from us.

Our major focus has been and always will be our patients and their families. They are the reason that we keep improving our services and facilities, as well as bringing in new ones. The hospital received the Service Excellence Workforce Skills Qualifications (WSQ) Recognition Award 2013, which was presented to only 20 'Role Model Companies' across all industries in Singapore. And we were the only private hospital to receive the award.

The new medical suites block is in its finishing stage now. The new car park is now operational and will have more than 200 car parks for our patients and their families, with designated lots for doctors as well as for the handicapped.

In terms of community outreach, we conducted 50 free public health screenings to more than 5000 residents last year. For the first time in 2013, we also extended our outreach activities to overseas communities in Indonesia and Vietnam through charity events and free health screenings.

Certainly, many great things have taken place at Mount Alvernia Hospital in 2013. Of course, none of this would be possible without the collegial team approach from our doctors, nurses and all our hospital staff; to which we are always very thankful.

Have a great year ahead!

Luna LeeChief Executive Officer

Prepring for Pregnancy



n our brand new series on 'Baby & You', Senior Lactation Consultant Ms Kang Phaik Gaik dishes out tips on pregnancy, baby care and parenthood. This issue, find out how you can plan a smooth pregnancy.

Becoming a parent is one of the most exciting, challenging and joyful experiences in life. However, you may have mixed feelings of happiness, excitement and anxiety, particularly if it is your first baby.

Before Baby comes along, first comes the pregnancy. How can you keep yourself in tip-top condition so as to have a healthy pregnancy? Here is a step-by-step guide to help you and your partner prepare for your new role as parents.

What are some pre-conception care that I should take note of?

It is recommended that you start preparing at least three months before you intend to have a baby. Going for a preconception check-up is one of the most important things you can do to help ensure a healthy pregnancy. Here's a useful checklist:

- Go for a medical assessment to make sure that you are healthy and physically
- The doctor will assess your medical history, surgical history, obstetric history, family history and your lifestyle habits, as your health status may affect the outcome of the mother and baby.
- Follow a healthy, balanced diet
- Adopt a healthy lifestyle and avoid smoking, alcohol and drugs
- Keep fit with regular exercise
- Do get enough rest and sleep
- ☐ Together with your spouse, get your finances in order. Having a baby will add to your expenses!

What should I eat to ensure the best for my baby?

Your diet before and during the pregnancy plays an important part in determining the health of you and your baby. Ensure you have adequate intake of essential nutrients (e.g. folic acid, iron, calcium, DHA). Good nutrition is essential for the healthy development of your growing baby and the maintenance of your own health.

Eat a variety of food from all food groups – proteins, carbohydrates, vitamins, minerals –such as cereals, fruits, vegetables, meat and dairy products. Drink at least eight glasses of fluids daily.

A good diet helps in the following:

- Coping better with the strain of the pregnancy
- Reduces the risk of anaemia
- ☐ Reduces leg cramps in pregnancy
- Reduces mood swings
- Reduces fatigue
- Improves pregnancy outcomes
- Improves your overall health
- Improves baby's health



ditorial Team

Publisher Mount Alvernia Hospital 820 Thomson Road Singapore 57462 Tal: 6347 6688 Fay: 6347 6632

Joyce See

Editorial
Advisor
Gob Hock Soor

Contributing
Writer
Stella Thno

Editorial
Co-ordinator
Premila Elangovan

TOM Design & Communications

For more information, visit the Alvernia Parentcraft Centre at level 2, Mount Alvernia Hospital. Tel: 6347 6641. Email: parentcraft@mtalvernia-hospital.org



COVER STORY



rained as an engineer, Wu How Yih, 57, is accustomed to solving problems.

The former Director of a Japanese MNC would often travel around the region to group companies to support them on technical matters besides the manufacturing operational responsibility he held in Singapore. "I've never switched my handphone off even when I sleep, in case an emergency crops up!" laughed How Yih.

Last November, he encountered some difficulty in swallowing and symptom of breathing difficulty when lying down. Worried, he saw his neurologist whom he has been consulting for Myasthenia Gravis (MG in short), and was told to be hospitalised.

MG, a neuromuscular autoimmune disorder, is caused by a defect in the transmission of nerve impulses to muscles. This occurs when antibodies produced by the body's own immune system attack itself, blocking the transmission of nerve impulses to the muscles, resulting in muscle weakness and fatigue.

The most common symptoms are weakened eye muscles causing droopy eyelids, slurred speech or, like How Yih, difficulty in swallowing. Severe effects include weakness in the arms, hands, fingers, legs and neck, and shortness of breath.

Gasping For Air

How Yih was initially to be hospitalised for a six-day course of intravenous steroid infusion but by the fourth day, he couldn't even sleep properly as lying down caused instant breathlessness. He tried to get some sleep while seated on a sofa chair, however, by the sixth day he encountered severe breathing difficulty. He was then immediately transferred to the Critical Care Unit (CCU) and hooked to a respiratory support system.

How Yih found himself flat on his back, too weak to even breathe on his own; a big contrast from his usual active and dynamic lifestyle before. Coincidentally, a friend also suffered from a neuromuscular problem and once spent three months in hospital. "She advised me to 'shut my brain' because she knows I'm a highly active person," recalled How Yih. "But I couldn't. My body wasn't working but this was!" he jabbed at his head.

"Being an engineer, I questioned everything," said How Yih. For example, he worried about the mask he wore every night while he received immunoglobulin via a drip to build up his antibodies during his sleep. "What if the machine breaks down?" he asked his doctor. "Will the mask suffocate instead of helping me?"

Overwhelmed by his sudden illness and feeling helpless and

frustrated at his inability to breathe on his own, he lapsed into depression. His wife Grace, 53, two children – Lawrence, 24, and Louisa, 21 – and his three elder siblings rallied around him. Big brother How Thian, 60, visited him every morning while his sisters Felicia, 61, and Patricia, 59, even helped to bathe him. "It turned out to be a good opportunity for family bonding, especially with my siblings" said How Yih.

Helping Others to Help Yourself

How Yih's doctors warned him that recovery was a slow process that couldn't be rushed. He was so weak that brushing his teeth took 25 minutes. What pulled him through his 48 days in hospital were his faith and interestingly, his work philosophy.

Confessing that he was a "not very pious" Christian, he started praying to God one day when it felt like nothing was working. "I truly felt the presence of God and excitedly shared it with my son when he and his church mates visited me that evening!"

Determined to find a solution to his depression, he thought back about how he had handled challenges at work. How Yih often preached and practised this philosophy – "Help others to help yourself". Since he was confined to his four-bedder ward, he looked around to see what he could do. One fellow roommate was a retired Indonesian Chinese businessman who underwent amputation. He only spoke Hokkien and Bahasa Indonesia, which the nurses had difficulty understanding, and was so foul-tempered that he even pulled out his catheter and hit the nurses.

How Yih volunteered to be his interpreter and gently struck up a friendship. When the old man refused to replace the catheter because he said it'd be painful, How Yih encouraged him: "Never mind, it's just a bit of pain. You were a businessman who has experienced so much, this is nothing! Chat with me while the nurse does it, and it'll be over very quickly!"

He even found ways to communicate with a 97-year-old bedridden patient who was unable to talk. Most mornings, How Yih greeted him and the elderly man 'replied' with a blink of his eyes.

When new and elderly patients were warded, he communicated with them and if there were opportunities, found ways to assist them especially where language was an issue.

Previously, How Yih was always too busy to do voluntary work. "This time, I scaled down my skills honed in a business environment for our little ward, but it was good enough for me and kept me going," related How Yih contentedly.

Nurses hailed him as a model patient and appreciated his extra

pair of eyes. When the nursing head of the CCU found out that 12 Dec 2013 was How Yih and Grace's 26th anniversary, she even arranged for a cake for the loving couple, who celebrated it with their son Lawrence!

On one hand, How Yih was trying to find a way out for himself. On the other, he saw the difficulties both the nurses and the patients faced. True to his 'help others to help yourself' motto, How Yih realised that lending a hand indeed helped him not to focus on his helplessness, and even get over his depression, thus allowing the time for the respiratory function to return. "It's a work philosophy I had adopted and taught to my team in my

years as a director of operations. But I certainly never dreamed that I would one day use it in my personal life and for my health rehabilitation!" he said in amazement.

Keep Calm and Keep Breathing

Today, though How Yih knows "my battery will never be 100% charged like everyone else", he is feeling much better. To maintain his health while accommodating his lowered energy level, he takes slow walks every morning. Being diagnosed with MG has also inspired him to eat more healthily. To make up for his current less active lifestyle, he reduced his food volume, choosing more protein and plenty of veggies and fruits over carbohydrates. A non-smoker but an occasional social drinker, he has also since cut out all alcohol.

He is able to breathe normally on his own, though he will be on long-term medication to manage his MG.

Currently taking a break from work to focus on his health, he's still mulling over his next step which may include writing a book or doing voluntary work. "I don't want to retire yet!" he exclaimed.

Despite his close brush with death, How Yih described his 48 days in hospital as "an unfortunate but very good experience". "I truly experienced God's love and presence, and how I can help others and myself," said a grateful How Yih. While spiritual faith and the physical care of doctors and nursing staff may have given him a second chance, his gungho, giving spirit certainly helped in the process.



The Truth About

TOOTH

How should you take care of your pearly whites? Dental Surgeon Dr Anthony Goh answers your FAQs.



A: The correct way that is taught by dentists today is to first get a soft-bristled toothbrush with a small head and a straight handle. The softer the better, as they can bend more and fit into the differentlyshaped curved surfaces between teeth. People who use hard bristles may think that their teeth are cleaner but in reality they are only scrubbing at the most bulbous parts of the teeth, and gradually sandpapering down their teeth (usually at the root). Large-headed toothbrushes are more appropriate for horse-sized mouths!

Hold the bristles at a 45-degree angle to the tooth surface and allow the bristles to reach under the gum collar that fits around each tooth. Keep movements small and circular where the tip of the bristle just jiggles in the gum collar; no large sawing strokes that are more apt to damage the gums and teeth.

Be systematic and don't miss spots. After brushing, give each tooth a run-through with floss. Flossing gets to the hard-to-reach-witha-toothbrush bits of a tooth where gum disease usually starts. This is especially true for the wider back teeth as the bristles of the toothbrush cannot reach in between to effectively clean off the

Q: How often should we change our toothbrushes?

A: Once the bristles look less-than perfectly straight, it's time to replace it. This varies from a few weeks for the really hard brushers (highly discouraged!) to a few months for the gentler ones.

However, a toothbrush tends to collect colonies of the bacteria that grow in the mouth, and are kept in damp places. It may be wise to change it, even if it's not frayed, after three to four months to maintain good hygiene.

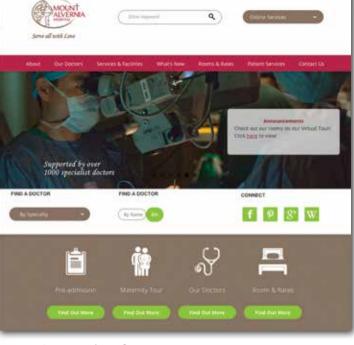
Q: Can oral gargles rinses replace brushing?

A: How we all wish we can do away with the tedium of brushing teeth! Unfortunately, there are no mouthwashes, rinses, gargles, gurgles, nor tonics that can replace the mechanical removal of the layer of plaque that forms in the mouth. Most of these solutions have a psychological effect because they smell good! It's like not bathing and hiding the smell with lots of perfume. If one brushes properly, there is no need for any oral rinses.

Q: When should we start practising good dental care?

A: Dentists recommend the first dental visit at age 12 to 18 months. This is when the first teeth have started cutting through and before the child develops stranger anxiety. It's good for spotting any early decay, for example, from Baby Bottle Tooth Decay, and for any growth disturbances. As the child gets familiar with the dentist, there is less fear and the visits are not associated with discomfort nor

I always beg parents never let our own dental anxiety cloud the child's experience. And never, never, never use "If you don't behave, I'll take you to the dentist and ask him to pull all your teeth out" as a threat. It breaks my heart to have to re-train children not to be afraid of dentists because of 'faulty programming'.



Go on a Virtual Tour

Unless you've had the experience of staying at or visiting someone at Mount Alvernia Hospital previously, you probably wouldn't have any idea how the rooms look. Even those who have signed up for maternity tours may not have had the chance to visit all rooms as they could have been in use during their

To help patients make a better informed decision before their choice of accommodation, the new website now offers an insider's view of eight room types: the Suite, Super Deluxe, Single Deluxe, Single Room, 2-bed Room, 4-bed Room, 6-bed Room and the Children's Room. Click on any of them to get a 360-degree view of the comfortably and stylishly furnished room. Stop at any time to enlarge for a closer look or speed up the viewing. You can even venture further; click on the bathroom doors marked with a "plus" sign and take a peek inside.

Best of all, the virtual tour helps make patients feel as comfortable as possible so they know what to expect when they arrive. It's all part of our goal to ensure that every patient at Mount Alvernia Hospital receives world-class care.

Apply for the Alvernia Ladies Card

The popular Alvernia Ladies Card Programme offers members a host of benefits and deals, from maternity packages, paediatric, parentcraft and health screening services, and at the 24-hour walk-in clinic and retail pharmacy. Now, it's even more

convenient to apply for it on the revamped website. Fill in your contact details online and you can conveniently pay the \$68 fee (for two years' membership) via your Paypal account or using major credit cards.



Site Seeing

Have you checked out Mount Alvernia Hospital's revamped website yet? Besides the fresh and bright new look, here are four new features you'll enjoy.

Parents-to-be, also look out for our online form to register for Childbirth Education. Sign up for the antenatal classes and get ready to welcome your bundle of joy!

Send Enquiries in a Jiffy

Have something to ask us? On the previous website, you'd need to look through a list of email addresses for the right department to direct your enquiry to, and send an email via your email account. To simplify the process, you can simply fill in a General Enquiry form



on the website now. It comes with a selection of subject titles like 'Enquiries & Feedback', 'Patient Assistance' and 'Health Screening'. Interested in working at Alvernia? Choose 'Jobs @ Alvernia' or 'Work Attachment & Training'.

Request for back issues of My Alvernia

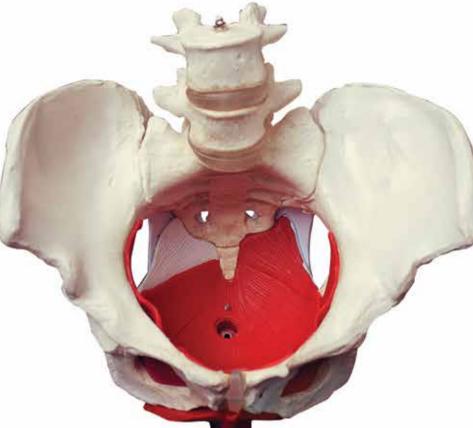
The hospital puts out a quarterly magazine to provide our patients and all our readers relevant information that will be useful for them in living healthy and fulfilling lives. Using the expert knowledge and experience from a team of medical doctors and other health consultants, the hospital has published a total of 16 issues of My Alvernia so that our readers have ready access to correct and certified knowledge about health, medical issues and issues related to them. So if you missed any of the previous editions, you can send in your request at www.mtalvernia-hospital.org/

Visit www.mtalvernia-hospital.org for a revamped web experience !! \[\]

Dr Anthony Goh is based at Mount Alvernia Medical Centre Block B, #03-10, Tel: 6251 1189.

WHAT'S UP DOC

Grappling with constantly wetting or soiling your pants can be embarrassing but with the right treatment, pelvic floor disorders can be managed without further suffering, says General Surgeon Dr Aileen Seah.



A Leaky Situation

ou're terrified of going anywhere without close access to a toilet as you have trouble holding your pee. Or there's a pain in your nether areas which you're hoping will go away by itself. Perhaps you just can't seem to 'coordinate' a proper bowel movement, leading to uncomfortable constipation. These are some symptoms of pelvic floor disorders which, though not life-threatening, can lead to a lot of disruption to a sufferer's daily routine and even lead to feelings of embarrassment or shame.

To understand why some suffer from pelvic floor disorders, we must first understand how the pelvic floor works. "It's a set of flat muscles with its supporting structures at the bottom of pelvis which hold up the pelvic organs – the rectum, the bladder and for women, the vagina and uterus," explained Dr Aileen Seah, a general surgeon with Colorectal Clinic Associates. These organs are tubular and serve as conduits; for example, the rectum for faeces, the bladder and urethra for urine, and the uterus and vagina for babies.

"Hence, the pelvic floor has a complex function of supporting these structures while playing a role in continence. It holds the stool or urine in whilst a person is moving around and relaxes when it is time for a bowel movement or a pee, so that the conduit can open up and allow the passage of stool or urine." Read on as Dr Seah reveals more.

What are the different types of pelvic floor disorders and what causes them?

Pelvic floor disorders can be subdivided into:

Problems of support: Pelvic organ prolapse occurs when the pelvic organs slide out.

Problems of continence: Urinary and faecal incontinence. The pelvic floor plays a gatekeeper role and has to open and close the 'door'. It can't remain constantly open or it will result in incontinence.

Problems of passage: A patient could suffer from constipation due to pelvic floor dyssynergia. Having a bowel movement involves the coordination of multiple muscles; the abdominal muscles has to contract to increase intra abdominal pressure to push the stool out while the pelvic floor muscle has to relax to allow the rectum to straighten so that the stool can pass out. Dyssynegia happens when the pelvic floor muscles closes up instead of opening and prevents the stool from coming out. It is akin to pushing against a closed door

Problems of spasm of the pelvic floor muscles: These are pelvic pain or certain types of rectal pain which can contribute to sexual dysfunction.

Can one suffer from multiple disorders at the same time?

Yes. Pelvic floor disorders involve multiple organs and hence, multiple subspecialties such as gynaecology, colorectal surgery and urology. Often, symptoms do not just involve one system so at Colorectal Clinic Associates, we have a collaborative relationship with gynaecologists and urologists in evaluating patients with pelvic floor disorders to look out for other dysfunctions.

Are pelvic floor disorders part and parcel of ageing?

The pelvic floor comprises a complex support system of muscles and ligaments. As we age, our muscles get weaker and less bulky; as our ligaments are stretched, the pelvic floor can sag. So yes, pelvic floor disorders tend to become more prominent as we grow older.

Young people can get pelvic floor disorders as well when there is damage to the structures. If just one part of the system fails, sometimes the other parts can compensate. Usually, the problem occurs when there're multiple failure points; that's why pelvic floor disorders tend to manifest at a later age, when the other compensatory mechanisms also fail.

For example, a patient whose anal sphincter was damaged when he was 20 years old may not have issues with faecal incontinence until he hits about 60, because his other muscles were previously able to make up for it.

Why are women more prone to pelvic floor disorders?

Women go through childbirth so the passage of the baby through the pelvic floor stretches the pelvic floor. Women have a uterus which swells up with a baby and strains the pelvic floor. Women also have a vagina which is a space or channel where the neighbouring organs like the bladder or rectum can herniate through it (rectocoele or cystocoele).

That said, men can also get pelvic floor issues as well such as pelvic, rectal pain or bladder irritation, bowel dysfunction and rectal prolapse.

How serious are pelvic floor disorders? Can it lead to other health complications?

Some pelvic floor disorders such as urinary or faecal incontinence can be embarrassing and turn sufferers into social recluses just to avoid these embarrassing moments. This can be crippling to a person as social interaction contributes to a person's wellbeing. There may also be other issues such as frequent bouts of urinary tract infection.

A pelvic organ prolapse causes pain and discomfort, especially if the organs prolapse out of the vagina. These contribute to a sensation of constantly wanting to void. For some, the prolapse causes the organ structure to be distorted which can cause difficulty in voiding, be it urine or stool. Pelvic floor disorders may not really be life threatening but it can really be bothersome.

How do you treat pelvic floor disorders? Is surgery recommended?

In evaluating the patient, a thorough assessment should be conducted to find out how much it affects the patient's life and other concerns. Every patient has different needs and lifestyle while different treatments have their pros and cons. It doesn't mean going in to do the surgery and just fixing it. The pelvic floor is dynamic and is a complex structure. Sometimes, by repairing one area, an issue with another area becomes prominent. Hence, I usually work in a team with colorectal surgeons, gynaecologists and urologists. Sometimes multiple surgeries may be needed. Thus, the treatment plan has to be customized for individual patients.

Some people may be embarrassed to seek help for pelvic floor disorders. Any words of advice?

We do know that pelvic floor disorders can be a source of embarrassment. Take heart, you're not alone as there are other fellow sufferers around, but we can help. By talking with your doctor, you will better understand your condition and learn ways to cope and deal with it. Do not suffer silently.



8

Stir Fried Jade' Cabbage with Sweet Peas & Carrots

Ingredients

300 g50 gSweet peas

50 g Carrots, thinly cut into strips 10 g Shallots, sliced 20 m Cooking oil

25 ml Shao Xing wine or Hua Teow wine 5 q Salt

Serves 4

Nutrition Content

Total (per serving):

77 kilocal Energy
2 g Protein
5 g Total fat
0.4 g Saturated Fat
2.3 g Dietary Fibre
509 mg Sodium

Method

- 1. Cut the long cabbage stems into sticks (approximately 9 cm by 1.2 cm)
- **2.** Cut the carrot strips into the same length as the long cabbage with thickness of approximately 0.3 cm.
- 3. Break the tips of the sweet peas and gently pull off the 'vein'.
- **4.** Boil a pot of water and blanch the carrot and sweet peas quickly. Remove the veggies and drain dry.
- **5.** Heat up the cooking oil at low heat and add in shallots to fry until fragrant.
- **6.** Add salt to the oil, stir-frying until it turns slightly brown.
- 7. Remove the shallots and reheat the oil at high heat.
- **8.** Add long cabbage sticks and stir fry for 1 minute before adding the sugar peas and carrots strips.
- **9.** Fry for another minute. Drizzle Shao Xing wine or Hua Teow wine over the veggies and serve. The cabbage sticks should look white and transparent but still retain a firm texture.

Recipe courtesy of Mount Alvernia Hospital Executive Chef Ho Limg Neng Nutritional analysis and tip courtesy of Miss Sim Chin Ting, Dietitian, Mount Alvernia Dietetics and Nutrition Department



at the Hospital, explains wine character refers to acidity, tannic and alcohol content.

"It is not possible to experience the character of the wine through

each and every bottle of wine." Alan Lim, 51, supervisor of Café 820

stay at the Chateau which triggered his

Alan has been into wine appreciation for more than 10 years. He talks about his interest as a wine enthusiast and his

hat set off his interest in wine was a desire to learn about

applying your knowledge to appreciate wine. When you

make the wine, you can literally shape the character of

wine from the winemakers themselves. "It is a step beyond

cowing

theoretical knowledge alone. You have to taste a wine to know if it is tannic in nature; because it is through tasting, you can pick up the dryness of the wine itself."

interest in wine making.

"Most young wines usually are very acidic and dry in nature. Cheese or crackers go very well with it because the oil content in the cheese and the salt present in the crackers will assist in neutralizing the tannins present in the wine, making the wine taste better. In addition to using cheese, fruits such as dried apricot and grapes can serve as a substitute."

In 2005, Alan stayed at a winery at Saint-Émilion, one of the principal red wine areas of Bordeaux in southwestern France. "At the Chateau, we studied the soil type and the harvesting methods in the vineyard, the manufacturing process of wine in the cellar, and the barrelling process before they are finally bottled up and sold in stores." He further explains that process involves the fermentation of fruit, as well as blending and aging of the juice from the grapes.

"It can take as long as 3-5 years to complete the process and finally mature the wine in the cellar. It takes a lot of patience, experience and precise timing to get the right taste. It was an eye opener for me."

OUR HIDDEN TALENTS

"The most noticeable smell that first assails your nostrils when you sniff a glass of wine is perhaps a smell very reminiscent of the ethanol present in alcoholic beverages. This is why it is important to let the wine "breathe" for about 20 – 30 minutes.

This length of time may even extend up to an hour for extremely vintage wines. This is so that the actual palate of the wine can be brought out." Alan sounded exactly like a sommelier as he advised how to savour wine and described the technical lingo wine enthusiasts used.

Old World wine refers to wine made in France, Italy, Spain, and other parts of Europe and it is used in contrast to "New World wine" which refers primarily to

wines from New World wine regions such as the United States, Australia, South Africa and South America. The difference between the old and new is in the winemaking philosophies, Alan explained.

"My next step is to visit a new world winery. I have not visited or lived in a new world winery before. It would be interesting to learn and see the difference in the making." Alan said his choice destination would be either Australia or New Zealand.

HEALTH TIP

Vegetables are one of the best sources of fibre and anti-oxidants in our diet and stir frying is considered a healthy cooking method when a moderate amount of oil is used as the dish will contain less calories and fat. Stir frying of vegetables over high heat with just a little bit of oil ensures that the vegetables remain crisp and nutrients are retained.





f one's eyes are really the window to your soul, then Dr Lam Pin Min's peepers reveal a deep love for kids and animals alike. They light up as the experienced Paediatric Ophthalmologist regales us with stories about cheeky 'uns, from his brood of pets and his young patients.

Dr Lam, who grew up with a pet dog, gave up his dream to become a veterinarian as it required him to study abroad which would have wiped out all his parents' life savings meant for his and three other siblings' tertiary education. "Studying hard to get into the Medical School in Singapore seemed to be the most logical and feasible option then. Besides, becoming a doctor was an easy decision as I always felt the need to help the sick and vulnerable," recounted Dr Lam in his gentle, measured tone. He eventually fulfilled this calling in more ways than one when he became a politician in 2006, currently serving as the Member of Parliament for Sengkang West Single Member Constituency.

After graduating from the National University of Singapore in 1993, he was a House Officer with the Ministry of Health who later trained to be an eye specialist because "I felt that looking after the eyes was a fairly precise practice which did not involve a lot of blood or life-threatening situations." His love for kids shaped his interest to sub-specialise in the field of Paediatric Ophthalmology.

Today, the 44 year-old is daddy to two daughters Kate-Lynn, 13, and Emma-Lynn, 10, (with his wife, Dr Jeanette Chen, an Obstetrician and Gynaecologist in private practice, whom he met at Wesley Methodist Church), two furkids named Brisby the beagle and

Keagan the dachshund, over a dozen dwarf rabbits ("They all have names too!") who roam free in his garden, and two terrapins. "I spend more time with the dogs, especially Keagan, an eight-monthold pup. But his legs are so short that when we go for walks, I end up carrying him and walking around," shared Dr Lam with a crinkly-eyed laugh.

From Soldier to Paediatric Eye Doctor

In 1997, Dr Lam signed on with the Republic of Singapore Airforce (RSAF), "a decision that took me a lot of courage and deliberation to detour from mainstream doctoring to embark on a military profession". The first qualified Aviation Ophthalmologist in Singapore, he spent three months in East Timor in 2000 at the United Nations military hospital, as part of SAF's humanitarian support mission.

He received the United Nations Medal for Service but more importantly, that experience taught him invaluable lessons. "Because it was a war zone, we had very basic facilities and we had to improvise to care for very varied cases, from gunshot and grenade wounds, to even aircraft accident injuries," recalled Dr Lam. In his free time, he helped with humanitarian work in the villages and orphanages. "It made me realise how lucky we are in Singapore and how we shouldn't take things for granted. I also learned to appreciate the little things in life that we often overlook."

Among these little things, perhaps, are the tiny steps he takes to connect with even the most fretful of kids. The former senior consultant in KK Women's and Children's Hospital paediatric eye department joined Eagle Eye Centre in January 2014 to help set up and head the Paediatric Ophthalmology & Strabismus Service. "Most people hate to work with children because it takes a lot of patience but I find it tremendously challenging and satisfying to be able to gain their trust and to treat their eye problems," said Dr Lam.

His office is decorated with colourful robot animals, trains and all sorts of toys. "You've to bring yourself to the children's level in order to make them feel comfortable; and when that happens, you would have won half the battle. Use their lingo. Make funny noises. Try to make conversation. Distract them with toys and gadgets."

When all else fails, he pulls open a drawer filled with stickers, ink stamps, sweets and erasers, which he personally replenishes. "I'll coax them by promising them extra stickers and treats! Children lose interest very quickly and you have got to be swift and purposeful in your examination. So yes, they come for an eye examination and go home all smiles, often with a present."



I (Can't) Spy With My Little Eyes

His young patients' most common eye problems are refractive error conditions such as myopia, astigmatism and hypermetropia, squints (or misalignment of the eyes), allergic conjunctivitis and lid infections (styes and chalazia). "Singapore has the reputation of being the myopia capital of the world. The prevalence of myopia is about 27.8% at age seven years, 34.5% at eight years and 43.4% at nine years. This increases to about 50-60% at 12 and reaches almost 80% at 18," noted Dr Lam, who started wearing glasses at the age of nine.

In Singapore, eye screenings as early as at Kindergarten 1 under the National Myopia Prevention Programme (NMPP) help identify children with amblyopia (lazy eyes) and other refractive errors early in life, so as to facilitate prompt treatment.

Though the exact cause of myopia is unknown, the high incidence of myopia in Singapore has been attributed to genetic and environmental factors.

Chinese kids face higher risk of developing myopia compared to Malays, Indians and other races, a common phenomenon observed in other Chinese-centric countries like Hong Kong, Taiwan and China. Moreover, children of myopic parents are at an increased risk of developing the condition.

Dr Lam urged parents to try to reduce the environmental harm. "Children who read a lot and play computer, iPhone, iPad and handheld games frequently tend to develop myopia. Parents, help your children adopt good reading habits early, such as sitting upright, proper lighting, maintaining a reading distance of at least 30 to 50cm and avoid prolonged near work. The children should also take a 5 to 10-minute break after every 45 minutes of near work. More outdoor activities have also been proven to be useful in slowing down the progression of myopia."

Scientific studies also show that using Atropine eye drops can effectively retard the progression of myopia. "Eagle Eye Centre is one of the first in Singapore to use the ultra-low dose Atropine 0.01% eyedrops, which has been shown in recent studies to be effective in controlling myopia without the side effects of the original Atropine 1% dosage," shared Dr Lam.

Most importantly, seek treatment early. Will wearing glasses early in life worsen the condition? "This is completely untrue. In fact, children with myopia who receive medical attention late can develop amblyopia, which can be potentially severe and irreversible!" he cautioned.

As our interview came to a close, we asked the doctor who wears two hats if his vocation has helped him to become a better MP. "Being a doctor taught me to be compassionate and empathetic; I learnt how to lend a listening ear to my patients and constituents. Of course, my analytical skill as a doctor also gives me the edge to help solve my constituents' problems systematically and effectively."



Towards Service Excellence in Healthcare

ount Alvernia was recently honoured with the Singapore Health Quality Service Award (SHQSA) and the WDA Service Excellence Recognition Award for delivering quality care and our commitment to providing excellent service to patients through continued training.

The winners of SHQSA were selected based on stringent criteria such as testimonials of extra-mile acts for patients or colleagues, contributions to service excellence, number of compliments and service awards received as well as contributions to team efforts to improve service quality and delivery of patient care. Winners were selected by a panel of judges comprising industry representatives and champions of service quality.

WDA recognized the hospital's efforts in reinforcing a service mindset among its hospital staff to constantly raise the bar of patient satisfaction and creating value through service excellence. A total of 300 staff were trained over the last three years.

Every patient deserves the best possible treatment and attention at any healthcare institution he entrusts his care to. The skills and knowledge of service excellence acquired over the years will be authentically embedded within the hospital culture and become a part of Mount Alvernia's DNA.



New Doctors/Clinics @ Alvernia

Eagle Eye Centre

Mount Alvernia Medical Centre Blk B, #02-11/12/15/16/17 Tel: 6456-1000

Ophthalmology

Dr Harold Choi Kah Yen Dr Lam Pin Min Dr Lynn Yeo Mei-Wen

Island Orthopaedic Consultants

Mount Alvernia Medical Centre Blk A, #01-04
Tel: 6356-0588

Orthopaedic Surgery

Dr Sean Ng Yung Chuan

MD Specialist Healthcare Pte Ltd (Pacific Specialist Centre)

Mount Alvernia Medical Centre Blk A, #01-06 Tel: 6256-7130

Cardiology

Dr Brian Khoo Chung Hoe

New Patient & Visitor Car Park



The new multi-storey car park with 250 spaces is now open to the public for use. Appropriate signages are in place to direct visitors, with special lots reserved for the handicapped and doctors.

Visitors can either choose to self-park your vehicle or use the complimentary valet service, which is available from 8am to 6pm, Mondays to Saturdays, except on Sundays and Public Holidays.

For more information on parking at Mount Alvernia Hospital, please visit our website at www.mtalvernia-hospital.org/parking.

Health Check Schedule

5-Apr-2014	2-Apr-2014	3-Apr-2014	9-Apr-2013	20-Apr-2014	26-Apr-2014	27-Apr-2014
Sat	Sat	Sun	Sat	Sun	Sat	Sun
Mid Ar-Raudhah	Yio Chu Kang CO	Punggol East CO	Kolam Ayer	Pasir Ris East CO	Singapore Heart	Singapore Heart
Mosque	c/o Yio Chu Kang	Rivervale	Constituency	No 1 Pasir Ris	Foundation (SHF)	Foundation (SHF)
30 Bukit Batok	Comm Club	Community	Office	Drive 4 #01-08	9 Bishan Place,	9 Bishan Place,
East Avenue 2,	50 Ang Mo Kio St.	Centre	3188 Geylang	S519457	#07-01 Junction	#07-01 Junction
S659919	61, S569163	Blk 193 Rivervale	Bahru, S339717		8. S579837	8. S579837
		Drive #01-787			T: 6354 9340	T: 6354 9340
Led by SG Cancer		S540193			F: 6258 5240	F: 6258 5240
Society, G.O.H						
Halimah Yacob						



ommunity outreach is laborious because it requires work at the grassroots level and being in contact with community members to plan and develop activity. However, for Koo Hoong Mun, 46, Coordinator of Community Outreach at Mount Alvernia Hospital, he considers it a gratifying role to be in. "My job is to coordinate and manage various outreach community activities and to uphold the hospital's social mission through sustainable, diverse and regular outreach activities involving as many of the hospital's staff as possible."

Started in 2009, the hospital-wide community outreach programme is focus on promoting health awareness, disseminating health preventive information and providing a greater accessibility to health checks. Deeply rooted in the hospital's tradition of nursing and caring for the community since its founding days, the initiative is supported by 90% of our staff and has reached out to 15,000 people as of end 2013.

Community-based approaches must start from some shared community understanding of local needs as well as a coordinated mobilization of resources to support the activity. Working through People's Association, he and the team of volunteers from other departments within the hospital deliver health screenings conveniently to the residents at their community venues usually either on Saturdays or Sundays. Singapore Heart Foundation is another social group that he works with on a regular basis on health screening for their members and anyone who wants to know how to take care of their heart.

Outside of work, Hoong Mun also volunteers at the Handicaps Welfare Association together with his ex-colleague, who is wheelchair bound, to collect donations for the association.

In his day-to-day dealings with different people from all walks of life, he has had many different encounters with the public that can be very heartfelt at times. He recounted an incident where he

from the night before to move to the head of the queue, as she was feeling weak and giddy due to the lack of food. As he was moving her to the front and explaining the situation to the others in the queue, they were all very understanding and allowed her to go through. "After she had finished the screening and taken some food, she came to thank me before leaving. One takeaway from this is that if we look hard enough, we can see a lot of goodness around us."

Occasionally, he encountered programme participants who could be quite difficult to handle. "The main thing to do is to stay calm, listen and explain to the participant how and why the health screening is to be done this way. Assure them that we will review our various processes and make improvements wherever and whenever it is possible and practical."

When asked what he loves about his job, he described it as "a good way to stay grounded, and that it could be extremely satisfying when participants show their heartfelt appreciation for what you are doing for them with words of gratitude – 'thank you', 'keep up the good work' and 'well organized".

Persistent DRY, ITCHING Skin?

What is Eczema?

Eczema is derived from the Greek word, ekzema or ekzein; means to break out, boil over. The term "eczema" is used interchangeably with "dermatitis" and refers to inflammation of the skin.

What causes Eczema?

No one knows exactly what causes eczema. However, we do know that people with eczema have skin that is different. It is an itchy, red inflamed rash and the affected person will scratch persistently.

It seems that our **skin barrier** plays a **significant** role in the effectiveness of the skin functions, and provides one explanation why certain people have eczema while others do not.

In healthy skin with a resilient skin barrier, bacteria and irritants are prevented from entering into the skin. The barrier also helps to **maintain** proper levels of **hydration**. Weakened or defective skin barrier allows allergens to **penetrate** the layers of the skin, resulting in itch and red inflamed rashes.

Is there a cure for Eczema?

It is important to know that though eczema is **non-contagious**, it is a **long term**, **chronic disease**. While most children grow out of eczema at a later age, some do not.

As there is no cure for eczema, managing it may be a lifelong effort, even during the potentially extended periods of symptom-free days.



"My almost 4-year-old daughter has been suffering eczema since 11 months of age. She has naturally dry skin, and her eczema often results in intense itch, and crusty, broken skin. While she has seen several health practitioners regarding her condition, treating and living with her eczema is something that we need to manage until her body fully heals itself. This means having to keep her skin clean and moisturized.

For a long time she absolutely hated to have showers, as she said that the water hurt her skin. She would scream and cry each time we bathed her, and would come up with all sorts of excuses to avoid bath time. I would dread this time of the day and would sometimes cry along with her when she had her showers. To be honest, there were days when I let her get away with missing her bath times too, which ultimately made her skin worse, as the dirt and bacteria intensified her itch.

When we were introduced to the SEC Shower System, it was like a breath of fresh air and a relief, because she absolutely loved having her showers thereafter. I was a little skeptical at first, but seeing how she did not mind SEC bubbles spraying on her skin, I was sold. I also noticed that her skin was not as dry as it used to be post showers. I used to have to rush to lather her with creams after showers, but today, it is not as crucial, as her skin feel more supple and less dry! With advice from the SEC folks, I focused the bubbles on the areas of her skin with the worst eczema break-outs. I have noticed that those areas get less red, and heal a lot faster. Today, it is my daughter chasing me for her showers, and not the other way around!

Thank you SEC International for bringing the SEC Shower System to us!"

 Corsage, Mother of 2 girls, Blogger at ADollopOfMe.com (Finalist in Best Family Blog, Singapore Blog Awards 2011)

SEC International Pte Ltd

#07-09 One Pemimpin 1 Pemimpin Drive Singapore 576151

Tel: 6659 7890 (Mon-Fri 10am-5pm)

Email: sales@secitnl.com

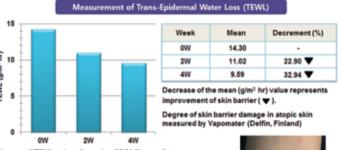
What is SEC Bubble?

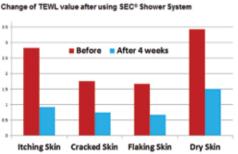
SEC Bubble is an ultra tiny air and oxygen bubble which is smaller than our skin pores. It can penetrate into clogged pores to remove stubborn oil deposits, wastes and dead skin cells. At the same time, when SEC Bubbles penetrate the pores, they release oxygen into the skin and keep it hydrated with increased moisturising effect and improve skin conditions, especially dry and itching skin.

When SEC Bubbles burst, they generate ultrasonic waves that has the natural functions of sterilisation, eliminating bacteria without the use of chemicals.

Furthermore, SEC Bubbles generate an abundance of **negative ions** that are widely credited to support the **immune system**, **fight ageing**, speed up skin **recovery** process, and **reduce fatigue**.

Clinical study by DermaPro Skin and Research Center in Seoul, Korea on the effectiveness of SEC Shower System













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Corporate Development
Mount Alvernia Hospital
820 Thomson Road Singapore 574623
Or just drop it off at our Reception Counter

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