GP Bulletin

Issue 2 | September 2020

Welcome!

We bring you the latest information to support you in your practice, including recorded CME webinars, highlights on SKH services and 'Pearls of Wisdom' on patient care. We hope you enjoy our second edition of the GP Bulletin!

Hello from our CMB, Assoc Prof Ong Biauw Chi



Long before Covid-19 redefined our lives and before "new normal" became the buzzword, Sengkang General Hospital had already started building a relationship with and collaborating with GPs in our Primary Care Network (PCN). We hope that this will allow a more seamless and better continuity of care for our shared patients.

Covid-19 has not stopped this urgency for collaboration but has accelerated the need to help keep the population as healthy as possible, for as long as possible, through health education and preventive care. The new norm of communication in Covid-19 has in fact become an opportunity to reach even more GPs through our CME webinars. The last two webinars were very well attended and we aim to provide relevant clinical updates that are practical for patient care. Please do not hesitate to give us your feedback and input on what is relevant and useful to you, and our team will also continue to work on more engaging methods of sharing via webinar and zoom.

In this bi-monthly bulletin we touch on two topics that are relevant to keeping patients healthy and back on track to health and fitness. We thank our GP partners who have come on board and participated in the outreach and right siting efforts and hope that more will find these programs useful for their patients as well.

Together, let us remain steadfast in building purposeful relationships with the patients and population so that we can encourage them to take greater ownership of their health. We will also be happy to continuously improve on our various programs in the current changing environment. I am sure together we can add quality to life and not just years to life.

SKH CME Webinar | Upper Gastrointestinal Conditions Relevant to the Modern Life

We recently organised a webinar on 25 August 2020 where a panel of SKH General Surgeons,

SKH Gastroenterologist as well as a primary care physician from SingHealth Regional PCN engaged in an open dialogue to address common key takeaways on best practices in managing upper gastrointestinal conditions. If you had missed our webinar, you can view the recorded version by clicking 'Play Video'.

Play Video

FEATURING:





Dr Baldwin Yeung Consultant **Upper Gastrointestinal** and Bariatric Service Dept of General Surgery, SKH

Dr Toh Bin Chet Consultant Upper Gastrointestinal and Bariatric Service Dept of General Surgery, SKH



Dr Chris Kong Head & Senior Consultant Gastroenterology and **Hepatology Service** Dept of General Medicine, SKH



Dr Chua Hshan Cher Family Physician Medial Director Phoenix Medical Group SingHealth Regional PCN

- 1 CME point will be awarded to eligible GPs.
- Doctors who attended the actual webinar will have points submitted by SKH on your behalf.
- Doctors who watch the recorded webinar in your own time can submit self-claims via SMC portal (under Cat 3A). Please contact Ms Julian Ang (Julian.ang.x.l@skh.com.sg) to obtain the SMC-accredited and approved event ID for your Cat 3A self-claim.
- This webinar is part of a series. Details of the next webinar will be shared soon. Stay tuned!

Highlights

Bariatric Surgery Helps Lose Weight and Fight Disease

Obesity is a chronic disease with severe complications and requires long-term management and prevention. When diet and lifestyle changes do not result in permanent weight reduction in patients who are obese, bariatric surgery is an option, and should not be seen as the last resort. The SWITCH clinic (Sengkang Weight Improvement Therapy and Complete Health) at SKH performs Bariatric surgery, better known as a type of weight loss surgery, which has become the treatment of choice for morbid obesity. All bariatric and metabolic surgeries are done for strict medical reasons.

SWITCH is a holistic weight management service offered at SKH and is based on the collaborative effort from surgeons, bariatric physicians, dietitians, psychologists, physiotherapists and bariatric nurse specialist. Here's a snapshot of the SWITCH programme at SKH and how it has benefited our patients.



If you are interested to know more, please contact:



Dr Baldwin Yeung Consultant Upper Gastrointestinal and Bariatric Service Dept of General Surgery, SKH



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Dr Toh Bin Chet Consultant Upper Gastrointestinal and Bariatric Service Dept of General Surgery, SKH

Treatments for Gastro-oesophageal reflux disease (GERD)

Gastro-oesophageal reflux disease (GERD) is a relatively common gastrointestinal condition seen in Singapore and Southeast Asia with an estimated prevalence of 6.3% - 18.3%. The cardinal symptoms of heartburn, regurgitation or chest pain, if present, allow for an empirical clinical diagnosis but GERD may also present atypically with voice hoarseness, chronic cough, sinusitis or asthma. This may complicate diagnosis and warrant further investigation.

GERD leads to an impaired quality of life and increases medical costs for patients. GERD also may result in serious complications such as oesophageal strictures, oesophagitis, and Barrett's oesophagus which may progress to adenocarcinoma of the oesophagus.

These patients and patients who present with alarm symptoms, such as weight loss, dysphagia, odynophagia, or a significant family history of gastric cancer, may require specialist evaluation and further evaluation with gastroscopy.

Current guidelines recommend the use of proton pump inhibitor (PPI) therapy as a first line treatment via acid suppression. Despite its high efficacy, many patients may not respond to PPI therapy.

After evaluation by our gastroenterologists with gastroscopy, patients may also be further investigated with oesophageal physiological testing with high resolution oesophageal manometry (HRM) and 24-hour pH and impedance studies.

Treatment subsequently may include further medical therapy, reinforcement of lifestyle changes or surgery by our upper-GI surgeon colleagues. GERD can be a bothersome condition for our patients but together with our multidisciplinary specialist approach, we may yet help our patients get better.

If you are interested to know more, please contact:



Dr Ng Yi Kang Associate Consultant Department of Pain Medicine SKH

SKH Appointment Hotline: Tel: 6930 6000 | Email: appointments@skh.com.sq

Services

Online Consultations for Patients

We are now offering video or phone consultations to patients. Teleconsultation services are available for the selected clinical specialties and Allied Health services at SKH as listed below (as at 9 September 2020).

Note: Patient's eligibility is assessed after first face-to-face consultation with SKH healthcare professional.

Bariatric Surgery Pain Management Anti-Coagulation Clinic ٠ • • Breast Surgery Palliative Medicine Dietetics • • Cardiology Plastic Surgery Occupational Therapy • • Psychology Colorectal Surgery • Psychiatry Endocrinology and Respiratory Medicine Speech Therapy • Diabetes Rheumatology **General Surgery** Upper Gastrointestinal Geriatric Medicine Surgery Internal Medicine Urology Neurosurgery Vascular Surgery Otolaryngology

SKH patients also pay lower teleconsultation charges than face-to-face (F2F) consultation charges.

- Video Consult: Same rate as F2F consultation charges (25% discount valid till 30 September 2020)
- Phone Consult: 25% cheaper than F2F consultation charges

* VC discount of 20% is not applicable for Non-Residents.

Free Medication Delivery

(ENT)

Patients can now enjoy free medication delivery for most medicines, and can also choose to self-collect at SKH Pharmacy. Please note that we can only process SKH prescription for medication delivery. We are unable to process external prescription including GP scripts or scripts from other institution for delivery.



Pearls of Wisdom



Prof C Rajasoorya Senior Consultant Department of General Medicine Sengkang General Hospital

CASE

A 40 year old female was under follow up for well-controlled hypertension of more than 8 years duration treated with Losartan 50mg daily. Lately, blood pressure had been suboptimal. The patient was asymptomatic other than having nocturia and a low serum potassium of 3.4 mmol/L consistently. How would you assess and manage the patient? **COMMENTS:** Although we should consider secondary causes, the commonest cause of hypertension is still essential (primary) hypertension, particularly so when it was well-controlled. Secondary causes should be suspected in the young or late onset hypertension, those with symptoms, or in those requiring multiple drugs therapy or rapidly developing complications. It is useful to understand why she recently developed hypokalaemia which can possibly account for the polyuria, in the background of hypertension

4 common causes of

Hypertensi

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with

Sengkang General Hospital

CLINICAL EVALUATION: The patient was clinically well and was not Cushingoid. She had no renal masses, or renal bruit. She had no evidence of atherosclerosis. Cardiovascular examination was normal. Specifically when questioned she had the habit of taking liquorice (甘草) candies.



- Lifestyle factors may commonly influence disease outcomes
- · Combination of Hypertension with hypokalaemia (think of secondary causes)
- A well taken history can save \$\$\$ of investigations
- Liquorice can aggravate hypertension and cause hypokalaemia
- (pseudo-hyperaldosteronism)

MANAGEMENT: Patient was advised to stop her liquorice candies blood pressure and potassium both normalized.

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If you have any questions or wish to provide feedback, please email <u>Julian.ang.x.l@skh.com.sg</u> You have received this GP Bulletin because of your relationship with Sengkang General Hospital Pte. Ltd. We respect your privacy and will never share your email address with a third party.