

ThePro

# Linking patients, doctors and families

Oncology nurse acts as advocate for cancer patients to ease physical, emotional suffering

Joyce Teo

**Q** I specialise in thoracic oncology nursing because...

**A** I want to help alleviate cancer patients' suffering, be it emotional or physical.

**Q** If I were to give an analogy for what I do, I'd be a...

**A** Bridge. I usually approach patients after they receive the news of their cancer diagnosis, which can be shocking for them. I will help to allay their concerns and discuss with them the available options in the current cancer treatment.

When a patient is diagnosed with cancer, it affects not only the patient, but also the whole family. Family members who care for the patient may be experiencing an emotional roller coaster. It is never an easy journey for patients and their family.

I also ensure the patients' care is seamless as they transit across Singapore General Hospital, National Cancer Centre Singapore and National Heart Centre Singapore.

**Q** I come across all types of cases...

**A** From patients with lung cancer or gastrointestinal cancer to cancer of the breast or head and neck, and more.

Every patient is unique. This

means that even patients with the same type of cancer may get different treatment plans as these are tailored to them individually.

Other than the co-morbidities (additional diseases or disorders) that patients have, their functional status and social support play an important part in their cancer treatment journey.

**Q** The more challenging ones are...

**A** Those where family members do not know what the patient wants because they are afraid to ask.

Or when patients are unaware of the diagnosis because their family members fear that the news will be too much for the patient to bear. However, patients are even more distressed when they are kept in the dark.

It is also impossible for patients to make informed choices about their treatment plans without fully understanding what is going on.

**Q** A typical day for me is one...

**A** That starts at 7.30am, when I see patients in the ward and discuss their care plan with the doctors.

I will also identify the patients who may need more attention. I will then go back to them after the ward round to address their concerns.

I track the updates in patients' treatment plans and coordinate



SGH nurse Lim Wen Ting has learnt to deal with difficult questions about death in her 14 years in oncology nursing. The awkward questions are opportunities to connect with patients, she says. PHOTO: GIN TAY FOR THE STRAITS TIMES

their care processes. At times, I also train new nurses to equip them with the knowledge and skills to care for cancer patients.

Although my days are occupied and busy, it is fulfilling knowing that my work has an impact on the patients. On weekends, I put work aside to recharge myself and spend quality time with my family.

**Q** One little known fact about the profession is...

**A** Lung cancer patients often suffer from shortness of breath, a most distressing symptom that causes discomfort for the patients and emotional unrest for their families.

I am one of the first people they can approach to ask for help. I act as an advocate for patients and communicate their needs to the care team so that we can work towards an optimal outcome.

**Q** Patients who get my goat are...

**A** None that I can think of. I can imagine how devastating it is to find out about a cancer diagnosis.

Initially, the patient may be in denial and will get angry at everything and with everyone, but these are unintentional.

**Q** A memorable patient was one...

**A** Who insisted on continuing his chemotherapy even though it would not benefit him as he was already in the last stage of the cancer.

We later found out that he wanted to live long enough to witness his daughter's wedding. He gave the treatment one last try but his condition deteriorated further. So his family finally agreed to focus treatment efforts on the management of his symptoms instead.

That was when we arranged for

the traditional wedding tea ceremony to be held in the ward.

Although the patient eventually passed on, it was fortunate that we could fulfil his last wish.

**Q** Things that put a smile on my face are...

**A** When I know that my patients are able to find closure with their families and journey together with them during the illness.

I see them spending quality time together as a family. Family bonds are strengthened as a result.

Another instance would be to witness patients pulling through and getting stronger with rehabilitation.

**Q** It breaks my heart when...

**A** I see cancer patients declining functionally to the point of requiring intensive care.

BioBox

LIM WEN TING

Age: 34

**Occupation:** Advance practice nurse (thoracic oncology), Singapore General Hospital.

She has been in oncology nursing for 14 years. When she was a junior nurse in the oncology ward, she would dismiss some questions that patients asked because she did not know how to handle them.

They would say to her: "I was told I have cancer. Will I die soon?" She would brush such questions aside as she felt awkward. "However, with experience, I have come to understand that this is because the patients felt comfortable with me. And that was actually an invitation for me to engage further with them," she said.

"If we are open to it, it would become an opportunity to understand how we can help the patients to feel better," she added.

Ms Lim has a master's degree in nursing from the National University of Singapore. Her 32-year-old husband is in sales.

For patients who no longer have cancer treatment options, I do my best to help them spend their last days more comfortably by focusing on palliative care, which also involves symptom management.

I also help my patients and families find closure by discussing end-of-life issues with them.

**Q** My best tip is...

**A** It's never too early to show your care and concern for your loved ones because you never know when they will not be around.

**Q** I wouldn't trade places for any other discipline in the world because...

**A** I make a big difference to the lives of my patients and their family. It is a privilege to care for them.

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### Ask The Experts

## Which health-screening package should I choose?

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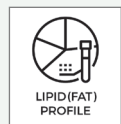
**Q** My husband and I are in our 40s and want to go for health screening. However, with so many health-screening packages available, we don't know which one to choose. Can you advise which are the most essential tests and how we can pick the right package?

**A** I generally encourage patients to select packages based on their specific needs.

### Factors to consider

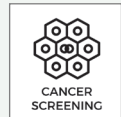
The choice may depend on your family history, age, lifestyle and any present health concerns.

Upon consultation and after a review of your family history, the doctor may order additional screening items if they are not included in the selected package.



**Diabetes and high cholesterol**  
Many conditions such as diabetes and high cholesterol level often have no early signs or symptoms. All packages now include these as standard tests.

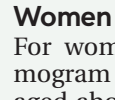
### History of hereditary conditions or cancer



For patients with certain health risk profiles – such as history of hereditary conditions or cancer – the package should include items such as cancer markers, ultrasounds of the relevant organs and stool occult blood test.



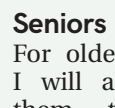
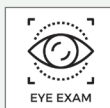
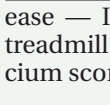
PHOTOS: ISTOCK



**Women**  
For women, mammogram (for those aged above 40) and PAP smear may be recommended, depending on your health risk profile.

### Risk of coronary artery disease

If there is a risk of coronary artery disease – for example, if you smoke or lead a sedentary lifestyle, or have health conditions such as obesity, hypertension, diabetes or family history of heart disease – I may suggest a stress treadmill test or even a CT calcium score or CT angiogram.



**Seniors**  
For older patients, I will also advise them to screen for glaucoma and osteoporosis (for post-menopausal women).

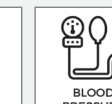
### Tests and consultation

Our health-screening centre staff will discuss with you and make recommendations on a suitable health-screening package to guide your decisions.

### Initial screening

They will also explain how the tests are conducted, and perform the initial screening – such as taking measurements for parameters such as height,

weight and blood pressure, and collecting the blood, urine and stool samples.



You will then see our experienced doctor for a full consultation and physical examination.

### More specific screenings

Other more specific screenings – including eye screening and radiologic tests such as X-rays, ultrasounds and CT scans – will be arranged.

One key point to remember is that the health screening will only pick up health conditions that are present at the time of screening.

Regular screening helps to detect conditions that may develop after the previous screening. Hence it is also important to go for screenings at the recommended frequency.



Dr Mok Ying Jang



Director, Hospital Services, Mount Alvernia Hospital