

The Nursing Life

A Whole Lot More Than a Job

MOUNT ALVERNIA HOSPITAL
Proud To Be a Nurse



Dear Nurse Sophia and Sean
This note is to say a big 'thank you' for the loving care extended to us during the birth of our baby Max. Despite a rocky start, he is doing great now largely thanks to the incredible professionalism you and your colleagues. I am enclosing a photo of Max, aged 10 days!
With Much Love
and Our Sincere Gratitude
Sabina, Harry, Cad
and Max XXX



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*Comparison among all maternal milk in Singapore as of Nov 2017, as declared on the label. Most complete in terms of the total number of vitamins and minerals. †Use as part of individualized healthy eating plan, as advised by a Healthcare Professional. ^25% lower in saturated fat as compared to regular dried milk powder.



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CEO's Message



At Mount Alvernia Hospital, we often see our nurses busy in action – in the clinics, in the wards, by patients' bedsides and assisting families of patients along the ward corridors. But we seldom get to tune in to the snippets of conversation between nurses and patients.

As I do my rounds in the wards, I have had the privilege of seeing our nurses in action and overhearing some of their exchanges with patients. With the young patients in the paediatrics wards, their actions are swift, and responses covered with much love and patience. With the elderly patients in the medical and surgical wards, their tone is infinitely gentle and assuring. I vividly recall one recent exchange I overheard, when a nurse gently assured her elderly patient that her role was to make sure he received the best care – and if he needs to get up and go to the toilet, just call and “don't fall ah”.

I have come to realise that while our nurses are well trained and skilled in their jobs, they also have to perform their tasks with humanity, compassion and

a willingness to be that unique caregiver for each of their individual patients. Compassion will enable our nurses to see a patient as not just a medical scenario or a routine procedure to be managed, but a person in need of care and love. And only with compassion will our nurses find deep satisfaction and fulfilment in the very challenging career to which they have dedicated themselves. Thus, on 1 August, and throughout this month, it gives us great joy and pride to honour our nurses in their defining role in healthcare, and to express our deepest gratitude and appreciation for what they do, faithfully, every day.

In this issue, we also commemorate World Breastfeeding Week 2018. Launched by the World Health Organisation, this annual event officially lasts for one week, beginning on 1 August and ending on 7 August. However, breastfeeding is a very important aspect of our daily routine. When patients are still with the hospital, we have the opportunity to help, guide and facilitate through practices such as skin-to-skin contact and rooming in.

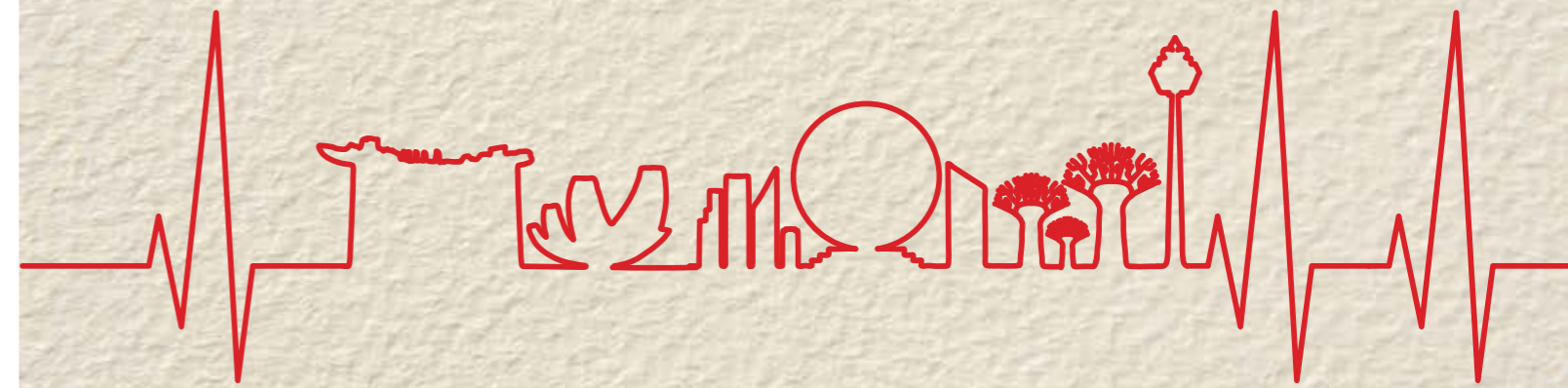
As the adage goes, it takes a village to raise a child. When mothers are breastfeeding, that village really needs to be there for them – to create an enabling environment conducive to breastfeeding. As a hospital, we are also doing our part to promote normalising breastfeeding in public through a Mass Latch-On event on 4 August 2018. Prior to this main event, we had already run two successful seminars cum workshops this year for new parents and expectant parents on how to start and successfully continue breastfeeding. We hope that, through our public education programmes, we can help to build a stronger breastfeeding support network and improve social attitudes towards breastfeeding anywhere, anytime.

Finally, the largest celebration in the month of August has to be our 53rd National Day. As we join all Singaporeans in celebrating our nation's most important event, we are grateful for the support, affirmation and encouragement of our community, our patients and their families for Mount Alvernia Hospital over the last 57 years. Just like how Singapore has grown from a 'little red dot' to the global metropolis of today, we are very proud of our tradition and legacy of care and love, and our growth from a humble facility to a full-fledged tertiary hospital today. To be able to serve all with love is a great privilege. May I take this opportunity to wish all our readers a very Happy National Day 2018.



Dr James Lam Kian Ming
CEO
Mount Alvernia Hospital

HAPPY 53rd BIRTHDAY SINGAPORE!





Letter to Dr Roy Koh, Neurosurgeon, FeM Surgery, Mount Alvernia Hospital

I have been suffering from sleep deprivation for more than three years, since I have been doing late-night shift work. What can I do to improve my health condition?

Chronic sleep deprivation is getting increasingly common due to work, social or family responsibilities and other factors. Sleep deprivation results in reduced performance, poor judgement, increased risk of accidents and death, and daytime sleepiness. It can also affect physical health, causing obesity and an increased risk of developing hypertension, heart attack and other cardiovascular diseases. It also causes a decrease in your body's immunity and makes you more susceptible to infection. The actual amount of sleep required may vary between individuals, however most adults require about six to eight hours of sleep per night. There is no substitute for sleep and if your health condition is already affected as a result of lack of sleep, treatment may be instituted with medications, such as antihypertensive medications for high blood pressure. However, you should try to ensure adequate sleep and a good sleeping pattern to attempt to reverse your problems.

Letter to Ms Sarah Sinaram, Head, Nutrition and Dietetics, Mount Alvernia Hospital

What amount of vegetables should toddlers consume daily? Does this amount vary with each toddler? What are the possible effects of insufficient intake of vegetables on a toddler's growth and development?

Health Promotion Board generally recommends that toddlers aged between one and two years old get at least half a serving of vegetables daily which is equivalent to about 75g raw, leafy vegetables or 50g raw, non-leafy vegetables. Vegetables contain vitamins, minerals, phytochemicals (beneficial plant substances) and dietary fibre. Ensuring your child has an adequate intake of vegetables on a daily basis will help them achieve optimal growth, prevent constipation and possibly prevent chronic diseases such as heart disease, diabetes and even certain cancers later in life.

Letter to Dr Mark Tang, Consultant Dermatologist, The Skin Specialists and Laser Clinic, Mount Alvernia Hospital

When should we be concerned with acne? And in the case of adolescents and teenagers, does it go away as they grow? Are there any foods to avoid?

Acne affects up to 80 percent of teenagers. Although it is very common, many studies have shown that many teens are very affected by their acne, leading to poor self-esteem and self-confidence. In many cases, inflammatory acne can lead to permanent scars, including keloids. Hence, acne needs to be treated early to prevent complications such as scars. Simple over-the-counter products such as benzoyl peroxide cream can help with mild acne. Severe acne needs to be treated with oral tablets and retinoid creams. It has been shown that taking a low glycemic index diet can help reduce acne. So, acne patients should minimise their intake of cakes, sugary foods, soft drinks and sweets!

You Ask

Q: Hi, I am a US citizen about to relocate to Indonesia, and would like to enquire how much a mammogram would cost out-of-pocket?

A: We have a package that consists of Pap smear with Mammogram and it costs \$185.11 with GST included. Please note that we are located at the Main Hospital Lobby, Level 1. Do contact us if you have any further enquiries.

Q: I am holding an Alvernia Ladies Card. I understand that there is a starter kit if I have registered successfully under My First Skool. How should I proceed?

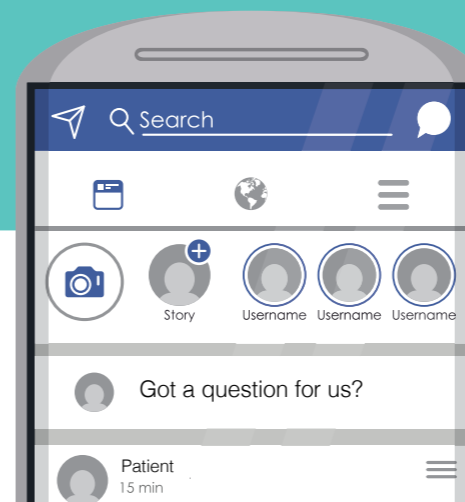
A: Please present your Alvernia Ladies Card during registration and the centre will be able to fulfil the starter kit accordingly. Please note that it is valid with successful registration and your child must be enrolled with the respective My First Skool centre for a minimum of one month.

Q: How long will the Alvernia Ladies Card application process take until approval? If I register for the card today i.e. 1 June 2018, does it mean that my membership will only be valid for two years till 31 May 2020? How do I collect the card?

A: If you are applying online, you can come and collect the card two days after application. If you apply at our Patient Liaison Centre at the Main Hospital Lobby, Level 1, on any weekday between 8.30am and 5.00pm, it can be collected immediately. We have two expiration dates for the Alvernia Ladies Card – if you apply for the card on or before 30 June 2018, it ends on 30 June 2020. If application is received on or after 1 July 2018, it ends on 31 December 2020.

Q: Hi, I would like to check if there is a High Dependency Unit (or ward) for newborn babies at Mount Alvernia Hospital.

A: In Mount Alvernia Hospital, we have a Neonatal Intensive Care Unit (NICU) for newborns as well as a High Dependency Unit (HDU) for paediatrics. Admission to NICU or HDU is subject to a doctor's assessment/ recommendation.



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Healthy Smiles for Toa Payoh East Residents

Some 140 residents benefitted from a free health and dental screening that took place on a sunny Saturday morning in May.

FUNDAMENTAL IMPORTANCE OF ORAL HEALTH

Oral health is essential to general health, well-being and quality of life. It is often placed behind the more pressing priority of putting food on the table and other basic living necessities.

Raising awareness of the importance of oral health was one of the objectives of a recent dental screening event on 12 May. It was organised by Mount Alvernia Hospital in partnership with Toa Payoh East Constituency Office, the Singapore Dental Health Foundation (SDHF) and GSK Consumer Healthcare.



AN ORCHESTRATED EFFORT

The idea first came from Toa Payoh East Constituency Office to conduct dental screening services for the residents of Toa Payoh East through an event. The Constituency Office publicised the event, pre-registered residents and provided the venue. The dental checks were conducted by volunteers who worked under the supervision of SDHF, while GSK Consumer Healthcare kindly sponsored the rental of the dental chairs and provided samples of dental-related products for the participants.

Though the event was open to all residents of the constituency, it was primarily aimed at the vulnerable families and seniors staying in the public rental flats around Toa Payoh East.



In addition to the dental checks, health checks for BMI and blood pressure, together with finger prick glucose checks, were manned entirely by Mount Alvernia Hospital staff volunteers.

These checks were confined to residents aged 40 and above, to look for chronic health conditions with risk factors as a result of ageing.

A FIRST FOR MOUNT ALVERNIA HOSPITAL

The dental screening was the first of our outreach programmes to focus on dental health. This is in line with our belief in holistic healthcare and follows the opening of the Mount Alvernia Outreach Dental Clinic at Agape Village, located at Lorong 8 Toa Payoh. The clinic was opened in 2016 at the behest of our outreach partners, upon observing poor dental health among their beneficiaries.

At the dental screening, participants with dental health issues were referred to the Mount Alvernia Outreach Dental Clinic for follow-up treatment at a highly subsidised rate.



HEALTHY AND BEAUTIFUL SMILES

The successful event saw 146 residents receive dental checks and 101 residents receive health checks. Mount Alvernia Hospital looks forward to continuing its partnership with SDHF and putting more smiles on the faces of Singaporeans through future dental screening events. ■



Baby-on-Board

Held at Singapore Institute of Management Headquarters (SIM HQ) on Saturday 30 June, the Baby-on-Board seminar was attended by more than 200 eager parents. Many of them were first-timers.

All smartphones were switched on and aimed at our Head of Alvernia Parentcraft Centre/Lactation, Ms Kang Phaik Gaik, as she started explaining how to care for a newborn. Using a dummy

baby, she demonstrated basic tasks such as how to expertly swaddle a baby.

Mummies and daddies eagerly surrounded our speakers, Dr Chua Yang and Ms Kang, and inundated them with questions on birthing and caring for their babies. In addition to the talks and demos, participants were also treated to refreshments, goodie bags and lucky draw prizes.



Successful Breastfeeding

This popular seminar, presented by Pigeon in collaboration with Mount Alvernia Hospital, took place on Saturday 7 July from 11am to 4.30pm at Parkroyal on Beach Road.

The assembled mummies and daddies were treated to a thorough walk-through of the A to Zs of breastfeeding, bathing and massaging baby by our Head of Alvernia Parentcraft Centre/Lactation, Ms Kang Phaik Gaik. The talk and demos gave new parents a good idea of what to expect and, for the not-so-new parents, a good refresher.

Our on-campus dermatologist Dr Colin Theng joined us to expound on the common skin conditions that can affect babies and the best skincare practices to maintain healthy baby skin. In addition to a wealth of sound breastfeeding knowledge, participants took home baby care starter kits worth \$80 each, courtesy of Pigeon.



If you are keen to attend and/or receive updates about our upcoming events, follow us on Facebook @mtalverniahospital

Baby's First Colours

Part of the adventure of becoming a parent is planning the nursery. We asked experts at Nippon Paint for their advice on painting baby's very first room outside of the womb.



COLOUR CONUNDRUM

If you've chosen not to know the gender of your baby until the birth, the default option of pink for a girl and blue for a boy obviously won't apply. A gender-neutral green, perhaps? Or a sunshiny-bright yellow?

In truth, babies don't develop good colour vision until around four or five months of age. Then the question becomes – do you want to excite and stimulate your baby with bright colours, or calm and soothe your baby with soft colours? If the primary activity that will take place in the room is sleeping, the latter is probably more logical.

“There are now paints available that can kill harmful bacteria and eliminate dengue-carrying mosquitoes. They are highly recommended for painting nurseries and homes with very young or very frail, elderly occupants.”

Generally speaking, colours on the blue side of the spectrum, including purple and green, tend to have a calming effect. Conversely, colours on the red side of the spectrum, such as orange and yellow, tend to have an energising effect. That said, colour is subjective and not everyone responds to colours in the same way.

CLUES FOR HUES

Shelly Chan, Marketing Manager at Nippon Paint Singapore and a loving mother of a one-year-old, recommends these colours for nurseries.

Soft blues	Relaxing and calming
Muted greens	Evoke feelings of safety and security
Lavender and light purples	Soothing and stabilising
Pale pinks	Loving and comforting
Earthy neutrals	Protective and cosy
Creamy whites	Restful and reassuring

PAINT YOUR LOVE

Colours aside, your choice of paint can help protect your baby from common bacterial and viral infections, as well as mosquito bites.

“There are now paints available that can kill harmful bacteria and eliminate dengue-carrying mosquitoes. They are highly recommended for painting nurseries and homes with very young or very frail, elderly occupants,” said Shelly.

From calming a baby to ridding a room of germs and mozzies, who knew a can of paint could do so much? 📌



Alvernia Ladies Card With You Every Step of the Journey



The launch of the new Alvernia Ladies Card (ALC) brings big benefits for expecting mums and their little ones, including complimentary accident coverage for parents and newborns.

FRESH NEW LOOK AND BENEFITS

The refreshed Alvernia Ladies Card comes with a host of hospital benefits that represent substantial savings on maternity bills, babies' first consultation at selected paediatric clinics on the campus, health screening packages and purchases at our Retail Pharmacy and gift shops, and visits to our emergency and 24-hour clinic.

If you are an expectant mother, the card allows you to save on Childbirth Education Courses conducted by the Alvernia Parentcraft Centre. And if you are planning a baby shower event, there's even a venue for you to consider.

In addition, the card gives you privileges offered by service providers to celebrate your new arrival. And as you prepare to return to work, there is an infant care centre and services that may interest you.

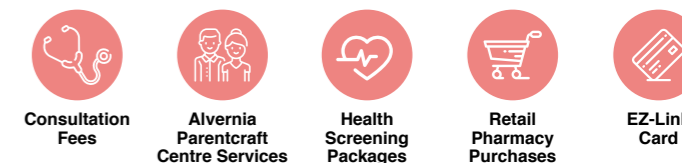
Lastly, the card has EZ-Link functions that allow you to use your personal ALC membership card for all your public transport use, parking, small purchases at selected F&B outlets and even reserving your favourite read from the National Library.

SIX MONTHS OF COMPLIMENTARY ACCIDENT COVERAGE

Perhaps the most exciting new benefit of the refreshed ALC Card is the complimentary six-month MyFamilySecure personal accident plan coverage from Aviva. It includes coverage for the member, her newborn and her spouse. A personal accident plan is a good idea at

all times, but more so when you are pregnant or caring for a newborn. The policy reimburses medical expenses incurred as a result of a mishap, and pays you a daily hospitalisation allowance to spend as you wish. This is particularly useful if you do not have paid medical leave.

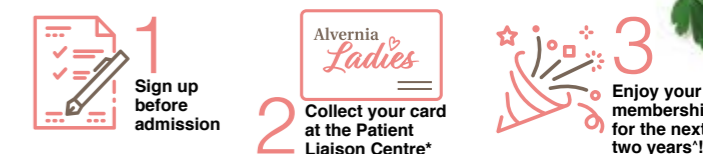
BENEFITS TAILORED TO YOUR NEEDS



SIMPLE TO SIGN UP

We've made it really easy to become an Alvernia Ladies Card member. What's more, your membership lasts for two whole years – which means that the savings really add up over the long term.

Follow these three simple steps to join the membership.



*Located next to the Retail Pharmacy (open on weekdays from 9am to 5pm)
^Starting from the application date

New at Mount Alvernia Hospital

MUMS CLUB SINGAPORE, #01-28

Opening Hours: 10am to 8pm (Daily excluding Sun and PH)



What started as a digital platform

where mothers can gather, share and socialise now has a physical space at Mount Alvernia Hospital. Check out the amazing array of products from Mums Club partners, spanning everything from baby monitors and baby slings to feeding bottles and more.

BIG SHOT B&G LifeCasting photostudio

BIGSHOT PHOTOSTUDIO AND B&G LIFECASTING, #01-22
Opening Hours: 10am to 6pm (Daily excluding Sun and PH)

Two great services are now being provided under one roof – adorable baby, child and family portraits from established photography studio BigShot Photostudio, and meaningful keepsakes of your little one's earliest footprints and handprints from B&G Lifecasting. You can even commission a cast of all your family members' hands intertwined.

Winning at Weaning

After six months of age, a little one needs nutrients beyond breast milk. For first-time parents, the questions never end – from ‘When do I start?’ to ‘How do I know if my baby is ready?’, ‘What food to start with?’ and so on. Here’s a list of commonly asked questions and some simple tips to help you start successful weaning.

Q. *What is the ‘right’ age for weaning – or is there no ‘right’ age? If so, how does a mother know when her baby is ready to be weaned?*

A. An infant’s need for energy and nutrients starts to exceed what is provided by breast milk at around the age of six months. However, readiness varies as babies develop at different rates.

Some signs of readiness are when a baby:

- Holds his head in an upright position
- Sits upright in a high chair and swallows well
- Chews on his fingers, knuckles, feet, etc.
- Stops pushing food out of the mouth
- Drools less and is able to move food to the back of the mouth and swallow
- Demands more feedings
- Is curious about what you’re eating

Q. *What is the ideal method of weaning a baby?*

A. A good weaning method is to offer food in consistent amounts and at the same frequency to condition your little one. You should also provide a variety of foods to ensure that the nutritional requirements of the growing child are adequately covered while maintaining breastfeeding.

Q. *What are the common challenges mothers and babies face during the weaning process?*

- A.**
- Acceptance of foods
 - Achieving the right consistency/texture
 - Managing messy meal times

Q. *Can you recommend two early foods for parents to reference and prepare?*

A. There is no one food that is recommended as a first food. Single-ingredient foods should be introduced first, ideally one at a time to observe for signs of possible food allergies. Single-grain infant cereal has traditionally been used as a first supplemental food as it supplies additional calories and iron. Fortified rice cereal is commonly offered first because it is widely available and is least likely to cause an allergic reaction. Fortified oat cereal is another good choice. First foods need to be finely puréed, contain only one ingredient, and should not contain additives such as salt or sugar.

Q. *What should be considered when selecting and preparing early foods? And why is it critically important?*

A. Introduce foods one at a time and look out for any possible food allergic reaction, such as a rash, swelling of the face, tongue or lip, vomiting or diarrhoea, wheezing or shortness of breath. Common food allergens include seafood, eggs and cow’s milk. Start with small quantities and add a little of your baby’s usual milk (breast or formula) to mix with food. Allow three to four days before introducing another new food.

Mount Alvernia Hospital has launched a series of weaning workshops that include food preparation demonstrations and hands-on practice. The workshops are conducted monthly, and each group size is limited to a maximum of ten couples to allow for one-on-one consultation.

Scan for more information on weaning workshops at Mount Alvernia Hospital:



Winning @ Weaning Workshop

When your baby is six months old, you would have tackled most issues with feeding breast milk or formula milk. Now, it is time to introduce solids to your baby’s diet!



While it does sound like a natural next-step to toddlerhood, it can be quite daunting to new parents - imagine a mess created by spit-outs and spills!

- How do you start the weaning process?
- Which is better: Purees & Mashes or Baby-Led Weaning?
- In the first place, is my baby ready for solid food?
- What about food allergies?

Join us and learn from our nutrition experts the steps to weaning and prepare simple culinary delights for your little ones at the hands-on session! Each attending couple will receive a weaning starter pack.

Programme Highlights

- Introducing solids
- Demonstration using various food textures
- Practical session on making baby food

Each registration is for 2 pax

- * Workshop fee is \$38 per couple
- * Fee covers practical tips on weaning, food ingredients used in the class and a book on simple home cooked meals for your baby.

If you need to find out more about the session, please contact us at 6347 6702 or email us at mah@mtalvernia.sg



Serve all with Love

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Faces of Healthcare

Men and women, daughters, mothers and grandmothers, locals and foreigners – they are all nurses. Despite their different genders, nationalities and ages, and the various different reasons that compelled them to answer their calling, they serve all with love. Meet the people behind the faces of healthcare at Mount Alvernia Hospital.



A Nurses' Day Message

from Ms Shirley Tay, Director, Nursing,
Mount Alvernia Hospital



Every year on 1 August, we take the time to commemorate the rich nursing history at Mount Alvernia Hospital while celebrating our nurses of today. Our history began when our Sisters arrived in Singapore in 1949, a post-war period during which sanitation was very poor and poverty was rife. That was almost seven decades ago.

Those pioneering FMDM Sisters laid the foundation for us to move forward and accomplish even more. In addition to the nursing knowledge they brought, they displayed courage and an awe-inspiring passion to heal the sick, especially those infected with tuberculosis and leprosy. Because they broke down barriers to advance their cause, we were able to take it to the next level and start a hospital in 1961, which has become today's multidisciplinary general acute care hospital.

Nurses are respected members of the healthcare team and we have an integral role in Singapore's healthcare structure. Our role will only grow in importance in the coming years, as the wheels of our social demographics trends continue to turn. One of our key missions is to collaborate with physicians and other healthcare professionals to develop a plan of care in tandem with the changes in society and the advances of science, for our patients as well as their friends and families. At every stage of the process, we strive to promote the attainment of positive outcomes.

Turning the spotlight on all our nurses, we are happy to see more male nurses in the profession and, in terms of cultural mix, we have become more diverse. This can only be a good thing, given the open economy of Singapore, as we see patients from different races and places. It empowers our calling of serving all with love, as we can now overcome language and cultural barriers to serve even more.

Like all professions, nursing practice has evolved. Our veteran nursing team shares their perspectives on the changes in nursing, as we aspire to improve the comfort and quality of the patient experience.

If there's a wish for our nurses on this special occasion, it would be to keep learning and seize any opportunities that come along to investigate and pursue new processes and technologies. Only then are we well prepared to support our patients as they aspire to recover.

I extend my sincere thanks and appreciation to all our nurses for their resilience. And to all the doctors and patients reading this magazine, thank you for giving us an opportunity to serve.

Happy Nurses' Day!

Veteran Nurses

Though the nursing profession has been around since the beginning of time, nurses' duties have undergone dramatic changes over the last few decades. Mount Alvernia Hospital is proud to have senior nurses on its staff, who have not only witnessed but personally kept pace with the evolution of this dynamic field of healthcare.

TIMES CHANGE, VALUES REMAIN

Wee Jee Tin's ties with the hospital go beyond work – all her grandchildren were delivered at Mount Alvernia Hospital!



A practising nurse since 1969, Jee Tin completed her training in general nursing and midwifery in the UK. She then worked in Hong Kong for three years, where she married her Singaporean husband. On returning to Singapore, she worked in private nursing while her children were small, and subsequently in a maternity hospital before coming to Mount Alvernia Hospital, where she now works in the maternity wards.



Reflecting on the changing roles of nurses over the decades, Jee Tin said, "Today, nurses are healthcare professionals in their own right. They are taking on more technologically challenging roles and are more tech-savvy compared to my time. Technology in nursing makes nursing more advanced, enabling us to measure vital signs quickly and record information efficiently."

On the subject of what has not changed, Jee Tin said, "Nurses still need to rely on their eyes and their minds, to read patients and reveal stories that vital signs and statistics alone cannot tell. Technological advances are great, but not at the expense of

direct person-to-person care. The human touch is still very, very important. Nurses continue to be the heart and soul of hospitals and medical institutions around the world."

Jee Tin speaks wistfully of her early years of nursing, which were very hands-on.

"It makes your work easier if you love interacting with people, and also if you can relate to them as your own family."

"You can have a university degree, but dealing with patients is a very different thing. Young nurses need to work on our core values like compassion, humility, integrity, respect, peace – all this you cannot learn at university. You learn it on the wards, and when you encounter different kinds of patients, your empathy grows," said Jee Tin.

"It makes your work easier if you love interacting with people, and also if you can relate to them as your own family," shared Jee Tin.

When her young nurses encounter a 'difficult' patient, Jee Tin urges them to look for the underlying reason. She tells them, "When a case like that comes to you, put all your training to work. Win the patient over with your care."

We asked Jee Tin to utter the first thought that springs to mind upon reflecting on her 50 years of nursing. She said in a heartbeat, "I'd do it all over again."

AN ACCIDENTAL NURSE AND A LIFELONG EMPLOYEE

Sharon Chioh Kim Hong, a senior staff nurse who works in the operating theatre of Mount Alvernia Hospital, is refreshingly honest in explaining the accidental series of events that



resulted in her becoming a nurse. When she accompanied her friend who was attending an interview to become a nurse, the matron saw her lingering in a corridor and asked her to fill out a form. Ironically, her friend didn't get selected to be a nurse, but she did.

"So you see it's not because I wanted to be a nurse, but I happened to become a nurse," she said with a good-natured chuckle.

Yet though Sharon may not have answered a calling, over the years she grew to love her job, especially when she was posted to the operating theatre.

Sharon has seen a lot of changes in her time, from the uniforms that have dispensed with the once-iconic cap, to the much improved remuneration.



"Last time, it was just maternity and general surgery. Now we have cardiology, neurology, orthopaedic... There is more variety and there are more opportunities. Nowadays, you can go for a degree and specialise in trauma care or operating theatre nursing," commented Sharon.

Like Jee Tin, Sharon has no regrets. "If I had my time all over again, I would still become a theatre nurse."

A UNIVERSAL MOTHER TO ALL NEWBORNS

Ong Lye Woo began her nursing training in 1972, doing her general training at Oxford and her maternity training in Birmingham. She worked in Malaysia for a year before returning to Singapore, and has been with Mount Alvernia since 1979.



When Lye Woo was posted to maternity, she found that the neonatal training during her maternity course was insufficient. To confidently provide optimal care for the newborns that were entrusted to her, she voluntarily undertook a six-month neonatal intensive course at the Birmingham Maternity Hospital in the UK.

"Babies are small and we cannot compromise their care. Every time when I care for any baby, my focus is to give my best – it's my privilege to give my care to a new life. Just like a mother wants to give her best to her child – that's the drive," explained Lye Woo, shedding light on what compels her to constantly upgrade her skills. ■



Reflections of a Former Nurse

Last issue, we introduced you to Gladys Loong, a Malaysian-born Singaporean former nurse who moved to Canada with her young family in the mid-70s, where she continued a nursing career that spanned 25 years. She not only worked at Mount Alvernia Hospital but also gave birth to her daughter Karyna here. Though she has since left the nursing profession, she calls nursing her 'first love'. She fondly recalls her days at Mount Alvernia Hospital and reflects on the changes she has witnessed.



"Technology is great. Before, when you went for a cataract surgery, it took days in hospital. Now it's day surgery. I love technology, but I also feel that we must not lose our personal touch, the human thing," reflected Gladys.

To the nurses of today, she offers this advice. "You are the caring professionals. Always be caring, and strive to be the best you can," said Gladys. "Never think that you can't do anything. The minute you say 'I can't do that!', you put roadblocks in front of you and you can't go forward."

Mr Nurse

Women have been lauded for entering male-dominated fields for decades. But it is less common for a predominantly female occupation to have a substantial increase in its share of men. Nursing is one of them.

BENDING GENDER STEREOTYPES

Like most professions, nursing is no model of gender equality. Particularly among older patients and in certain areas of nursing with more traditional gender-based roles, a male nurse is a rarity and greeted with something akin to disbelief. It calls to mind the movie of a few years ago, 'Meet the Parents', in which Ben Stiller played a nurse whose girlfriend's father threw a reserved and quizzical look when Ben said he is a nurse.



Fortunately, there are some men who dismiss the outmoded notion that caregiving jobs are women's work. After all, compassion and efficiency are not gender-specific qualities and they can do everything else that a female can do – not to mention flex some muscle when it comes to helping move heavy patients.



For Santiago Reynald Fortich, who has been in nursing for 14 years with the last five of them spent at Mount Alvernia Hospital, gender has not been a setback.

"I have no problem being a male in a female-dominated industry. As long as you give your sincere care to a patient, they will almost always respond accordingly," said Santiago. In fact, he recalls only one occasion when a female patient objected to having a male nurse attend her.

Back home, Santiago's family are proud of their son's career path. He explained, "Nursing is a very respected profession in the Philippines,



and being a nurse is considered a very noble job. I also feel proud of what I do."

When we asked Santiago what inspired him to enter nursing, he cited his mother's selfless example of service to her family. "She was a full-time housewife. She devoted her life to caring for us and attending to our needs."

"In my first year of nursing, I was in the Emergency Department. There was a mother who came in, panicking, because her son was not breathing. I managed to remove something from his mouth, and he started breathing again. I actually saved a life."

Interestingly, when asked when he realised with absolute certainty that his career choice was the right one for him, Santiago cited an instance when his swift professional response put a frantic mother at ease.

"In my first year of nursing, I was in the Emergency Department. There was a mother who came in, panicking, because her son was not breathing. I managed to remove something from his mouth, and he started breathing again. I actually saved a life," recalled Santiago.

NOT A BATTLE OF THE SEXES

Another male nurse and also with 14 years of nursing experience, Sunga Richard Villanueva works in the Intensive Care Unit at Mount Alvernia Hospital. Unlike Santiago, he has encountered several female patients who have objected to being cared for by a male nurse.



Sunga recalled one particular incident during his early days at Mount Alvernia Hospital, when he was asked by a female colleague to help change the position of a female patient. The latter complained bitterly to her husband about being handled by a male nurse. While at



first Sunga felt hurt that he had been corrected for lending a helping hand, he now chooses to empathise when he is criticised. With understanding comes forgiveness.

Patients' prejudices aside, Sunga first had to overcome the opposition of his own father to follow his heart into nursing.

"It's not a battle of the sexes here. Promotion depends on a person's drive and dedication to the job. As long as people see you as a very responsible individual, promotion will come regardless of gender."

"At first, my dad didn't want me to become a nurse," said Sunga. "There was a stigma that it was women's work and not a male profession. But when he saw me at work, when one of my relatives was in the hospital where I was working, he could see what I was able to do for them. He now accepts and appreciates my choice of career."

When it comes to climbing up the corporate ladder, Sunga does not see his gender as a handicap.

"It's not a battle of the sexes here. Promotion depends on a person's drive and dedication to the job. As long as people see you as a very responsible individual, promotion will come regardless of gender," said Sunga.

IT'S ALWAYS PERSONAL

You know the adage that 'it's not personal, it's just work'? Well, Shawn Lee, a male nurse in the Intensive Care Unit of Mount Alvernia Hospital, strongly disagrees.



"Right from when I first went into nursing, I realised that I enjoyed it because it's very 'face to face'. When you encounter a patient, it feels very personal. And you only know how that feels once you are a nurse," shared Shawn.

Though initially Shawn wanted to pursue the more traditionally masculine profession of being a doctor, he had a friend who was a nurse and encouraged him to follow in her footsteps. He has no regrets.

"Even though it's the doctor that issues all the orders, it's the nurse who carries them out, so you actually see the effect of all the medicines that you're giving and all the therapies that you're carrying out," reasoned Shawn. ■



Geriatric Nursing

Shawn Lee chose to specialise in geriatric nursing. While it may seem an unlikely choice of specialty for a young man, Shawn explained why he is drawn to old people.

"I opted for geriatric nursing because old people are very cute. It's interesting to me that when you age, you become like a child again. Old people often become forgetful and repeat themselves. And when they stay in ICU for a long time, with all the lights constantly on, they tend to lose track of time and forget what day it is. You have to be very patient and very gentle," said Shawn.

Geriatric nursing, also called gerontological nursing, is a field of nursing that deals with the care of elderly people. In elderly patients, minor health concerns can often escalate because of physical frailty and low immunity. Depression due to failing health and boredom can also take a toll on elderly patients' outlook on life. Geriatric nurses are trained to look out for physical symptoms as well as early warning signs of mental and emotional health problems.

Due to increasing life expectancy and the ageing populations of first-world countries, geriatric nursing is expected to be in increasing demand in the years to come.

Celebrating Diversity

Our nurses care for a culturally diverse patient population in Singapore. Their patients vary in shape, size, age, ethnicity, religion, health, ability, education, cognitive capability and style. Conversely, our patients are served by nurses who hail from vastly different cultures and backgrounds. The diversity of our nursing staff equips us with a range of languages and a depth of cultural understanding that help us provide the care that our patients expect and deserve.

A LONG WAY FROM CHINA, A BIG LEARNING CURVE

Duanmu Chuanfang, a nurse clinician in the Day Surgery Department of Mount Alvernia Hospital, has lived and worked in Singapore since 2002. Prior to that, she had been practising nursing in her native China since 1988.



Today, Duanmu communicates easily with her peers and patients. In fact, she relishes the very diversity that once daunted her.

“With so many nationalities and cultures among the staff, it is a more international environment. In China, we were all the same. Here, I have learned so much about people,” reflected Duanmu.

FOLLOWING IN HER FATHER'S FOOTSTEPS, ALL THE WAY FROM INDIA

Devipriya Kuppuswamy, a senior staff nurse in Mount Alvernia Hospital's St Francis' Ward, has been in nursing for 25 years. After her grandmother had a stroke, she was nursed by Devipriya's father in India. His tenderness and diligence in caring for his bedridden mother inspired her to take up nursing.



In Singapore, Devipriya was immediately struck by the prevalence of labour-saving machinery and technology. And the differences didn't stop there.

“Care-wise there was a huge difference between nursing in India and here in Singapore. Here, there is one nurse to six patients. In India, there is one nurse to 15 to 20 patients,” explained Devipriya.

Reflecting on the changes within herself, Devipriya shared that she has become more patient over the years. Furthermore, her role as a mentor to younger nurses provides endless opportunities for self-improvement – she must constantly learn before she can teach.

“Even though I had finished my BSc degree in Nursing in India, and was qualified as a Registered Nurse and Registered Midwife, my dream was fulfilled by doing my Advanced Diploma in Orthopaedic Nursing, which I completed in 2015,” shared Devipriya. “I am so thankful to my management, who really encouraged me to go for this specialty.”

As for culture shock, Devipriya remains unable to adapt to Chinese food. She veers towards vegetarianism, and buys her favourite Indian veggies from Little India. Otherwise, she is now totally at home here. In fact, when she returns to India and is confronted by the chaos of her homeland, she yearns for the systematic way of life in Singapore.

ACROSS THE CAUSEWAY, FOR A CAUSE

Vithya Mathivanan, a staff nurse in Our Lady's Ward, was admitted to hospital in Malaysia for severe gastric at the age of seven. To this day, she still remembers the loving care of the nurses, and credits them with inspiring her to enter nursing. She has worked in Mount Alvernia Hospital's maternity ward since 2013, after a couple of months in the Operating Theatre.



At first, Vithya struggled with criticism, and recalls bursting into tears after a harsh word from a patient or a stern word from a superior. Today, she takes all feedback, good and bad, in her stride.

“I knew I had to change if I wanted to work here. Now when I encounter difficult people, I don't get discouraged, I just look for the positives,” said Vithya.



Initially, Vithya was taken aback by the pace of life in Singapore. Now, when she goes back to Malaysia, she finds herself rushing and has to consciously reset her clock to Malaysian time.

A FILIPINA NAMED DOLOR (MELICCA) WHO ADORES OLD PEOPLE

Dolor Melicca Soliven is a staff nurse from the Philippines. She has been in nursing for eight years, the last four of them at Mount Alvernia Hospital, where she currently works in St Joseph's Ward.



“I have found that working in this hospital makes your faith deeper and helps you become a better person in the long run.”



Melicca always knew she wanted to be a nurse, just like her mother before her. She particularly loves looking after old people, as she grew up with a much-loved grandmother.

At Mount Alvernia Hospital, Melicca has grown spiritually as well as professionally. “I have found that working in this hospital makes your faith deeper and helps you become a better person in the long run,” said Melicca.

FROM INDONESIA WITH LOVE

Hailing from Indonesia, Annabel Halim is now a Permanent Resident of Singapore. She works as a staff nurse in St Raphael's Ward of Mount Alvernia Hospital and loves the teamwork among her colleagues.



Annabel credits her mother as her source of inspiration. "My Mum was very encouraging and very inspiring. She taught me that you must work from the heart. If you're going to work every day just to go through the motions, to earn money, even if you're paid a million dollars a month, you're never going to find happiness," Annabel reflected.



Annabel says that nursing has helped her mature and has taught her to be more empathetic. Today, instead of countering an emotional outbreak with an emotional response, she remains calm and tries to see things from the patients' point of view.

"Sometimes the patient is just in pain," explained Annabel, reminding us of the fact that with understanding comes tolerance.

FROM MYANMAR, WITH A MISSION

Naw Moo Law Eh, a Myanmar national who works in the Diagnostic Imaging Department of Mount Alvernia Hospital, has been in nursing for 14 years, the last ten of them in Singapore.



Regarding the differing job scopes of nurses in Singapore and Myanmar, Naw Moo Law Eh shared, "In Singapore, the technology is far more advanced. In Myanmar, patients only come to hospitals when they are very sick. Here, people come for checkups and preventive and elective treatment."

Naw Moo Law Eh experienced some culture shock when she came to Singapore. While she was taught to read and write in English, speaking and listening were another matter. It took her a

good few months before she became comfortable with the spoken language, Singlish included.



"My aunt and my sister are also nurses. I see it as a kind of ministry, and I have been on medical mission trips with my church. I wanted to work at Mount Alvernia Hospital because of the healing ministry here."

So what brought Naw Moo Law Eh all the way from Myanmar to Mount Alvernia Hospital?

"My aunt and my sister are also nurses. I see it as a kind of ministry, and I have been on medical mission trips with my church. I wanted to work at Mount Alvernia Hospital because of the healing ministry here," shared Naw Moo Law Eh.

SU SU WIN IS 'SINGAPOREANISED'

Another Myanmar national, Su Su Win works in the Cardiovascular Laboratory of Mount Alvernia Hospital. She joined Mount Alvernia Hospital in 2012, after having worked in Myanmar for four years.



Su Su Win has a close-knit group of friends here in Singapore, many of them classmates from her university days back home. When she's on call, she makes sure to be well-rested, as she could be called back to the hospital within 30 minutes.

When Su Su Win returns to Myanmar, she misses Singapore's orderly public transport. She shared that boarding a bus in Myanmar is the equivalent of embarking on a magical mystery tour.

FROM MYANMAR TO SINGAPORE VIA SAUDI ARABIA

Yet another Myanmar national, Marlar Tin Aye has been working in the Outpatient Department of Mount Alvernia Hospital for three years. After working in Saudi Arabia, she chose to come to Singapore because of its relative proximity to Myanmar and its clean environment.



In Singapore, Marlar Tin Aye found the medical technology far more advanced than in Myanmar. This has enabled her to learn more technical skills, for which she is grateful. Though she observed cultural differences between her Singaporean and Saudi patients, she chooses to dwell on their common humanity.



"In Myanmar, sometimes we needed to improvise. For example, we have a lot of pre-soaked alcohol swabs here. In Myanmar, we had to use cotton wool and manually dip it in alcohol."

For Su Su Win, the challenge of speaking English was compounded by the profusion of different accents in Singapore. "Chinese nurses have different accents, Indian nurses have different accents, Filipina nurses have different accents," said Su Su Win, in excellent English.



"I accept their differences, which are only cultural. As a nurse, I treat all my patients the same," said Marlar Tin Aye.

Marlar Tin Aye takes an equally open-minded approach to socialising. Rather than seeking out her compatriots, she has forged friendships with colleagues of all nationalities.

"In my department, there are many nationalities – Singaporean, Malaysian, Chinese, Filipina, Indian," said Marlar Tin Aye. "They are all my friends." ■

An Exceptional Nursing Career

Working in a hospital's Intensive Care Unit (ICU) is a serious business. It takes an intelligent mind, quick thinking, time and dedication to achieve the advanced skills necessary for the job. However, there are some nurses, like Rosalind Goh, Head of Mount Alvernia Hospital's ICU, who thrive on its challenges. Her greatest satisfaction is being a part of her patients' journey to recovery.



A PERFECT MATCH FOR HER PERSONALITY

After her secondary schooling, Rosalind's first choice of career was nursing. She instinctively felt that her warm and compassionate personality would be suited to the job. Eighteen years later, she has no regrets.



At the request of the hospital's Director of Nursing, Rosalind moved into critical care nursing in 2004, and studied for her advanced Diploma in Critical Nursing in 2005. In the ICU, the nurse to patient ratio is one nurse to just one or two patients, compared to one nurse to eight to ten patients in the general wards.

"As a critical care nurse, you need to anticipate, react and act fast. You also need to prioritise your work, and possess good critical thinking and communication skills. Teamwork is also very important in the ICU," shared Rosalind.

Elaborating on the need for good communication skills, Rosalind added, "As people are more educated nowadays, we not only need to do a lot of explaining to the patient but also to the patients' families. Gaining their trust is very important."

JOY ON THE JOB

When asked to cite a highlight of her nursing career, Rosalind told us about a young patient from Brunei who was admitted to Mount Alvernia Hospital with a brain tumour. She had chemotherapy and four brain surgeries in Singapore, and celebrated her second birthday in the ICU.

"Before her discharge, the doctor told the family that the brain scans done immediately after surgery and those taken three

months later showed that all the tumour cells were gone and she should be able to grow up normally. There was so much joy and relief from the nursing team," recalled Rosalind.

THAT FAMILY FEELING

Rosalind balances her nursing career with marriage and motherhood, and is fortunate to have a supportive husband and a retired father who helps with the care of her two children, one of whom has type 1 diabetes. Rosalind draws on her deep love of family and channels it into her daily work.

"I give my best to my patients by being non-judgemental and treating each patient as my family member. In this way, you will definitely give the best care that you can to all your patients," explained Rosalind.

ADVICE FOR ASPIRING NURSES

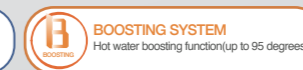
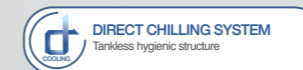
When asked for some words of advice for school leavers contemplating a career in nursing, Rosalind said, "Nursing is all about being compassionate, dedicated and passionate about what you are doing. If you are looking for a career that allows you to have a real impact on patients' lives, nursing could be the right field for you."



We congratulate Rosalind on receiving the Nurses' Merit Award this year, given by the Ministry of Health to recognise her outstanding performance and contribution to the profession. ■

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The Anatomy of Back Pain

Back pain can affect everyone, regardless of age, occupation, gender and class. Dr Leslie Ng, Consultant Orthopaedic and Spine Surgeon at Island Orthopaedic Consultants, explains its causes and methods of treatment.

BACK TO BASICS

The back is part of a larger organ, the spine. The spine consists of 33 stacked bones called vertebrae, which are cushioned by soft discs. Another part of the back is the facet joint, which is the part that moves. A large and complex group of muscles supports the spine and allows the body to move, twist and bend. A complex network of nerves connects the spinal cord with specific regions of the body.

In other words, there's a lot that can go wrong in a back. And it does, often. In fact, Dr Ng shares that four out of five of us can be expected to experience some form of back or neck pain during our lives.

“Long-term reliance on braces or any other orthosis may actually weaken the muscles. The patient should undertake correct physical activities, possibly guided by a therapist, for improved muscle strength and core muscle rehabilitation.”

BACK PAIN AFFECTS EVERYONE

Along with the rest of the developed world, the incidence of back pain is on the rise in Singapore.

“Back pain permeates all age groups, all social classes and many different occupations. In the younger age group, the most common cause of back pain is competitive sports. In the middle-aged group,



it tends to be related to lifestyle and work environment, particularly in office-based workplaces and among industrial, manufacturing and manual workers. In the elderly group, it tends to be related to the inherent ageing of the spine,” shared Dr Ng.

According to Dr Ng, back pain also affects some pregnant women due to hormonal changes and weight gain. The changes in the hormonal balance lead to ligament laxity and therefore an increased risk of suffering from a slipped disc.

FIRST TO THE FAMILY DOCTOR... SOMETIMES TO A SPECIALIST

At his specialist clinic, Dr Ng only sees what he calls ‘the tip of the iceberg’ of back pain sufferers, since most cases can be managed by family doctors who are trained to recognise normal back pain and abnormal back pain.

“Normal back pain covers what we call primary mechanical back pain, which most of us would have experienced from time to time. This generally resolves within one to two weeks. Abnormal back pain covers pain that has been persistently present for more than two weeks, as well as pain that doesn't change in character throughout the day, impedes sleeping at night, and doesn't improve after bed rest,” explained Dr Ng.

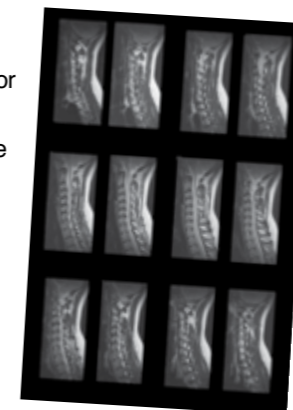
Dr Ng points out that back pain is sometimes associated with a nerve problem. Symptoms of nerve-related back pain, also known as sciatica, include weakness of the arms and radiating pain that goes from the neck to the arms or down the legs. Further investigation by a specialist is required when this kind of pain is present, as it can be very disabling and unable to be managed through standard pain medication.

TREATING THE PERSON NOT JUST THE PAIN

When Dr Ng sees a patient referred to him by a family doctor, he first connects with the person. He makes it a point to acknowledge the patient's pain, empathise with their complaints and then get down to ascertaining its source and causes. In Dr Ng's case, the empathy is very real, as he himself has experienced recurring back pain after suffering from a slipped disc that required surgery when he was just 20 years old.

With some patients, there is a need for a magnetic resonance scan (MRI) to identify the location of the pain source within the spine. An X-ray alone is unable to capture the nerves and the discs, which show up as transparent.

According to Dr Ng, the majority of patients do not require surgery for back pain. More often than not, their pain can be resolved by modifying their lifestyles.



“I always tell the patient – I am treating you, I am not treating the X-ray or MRI image findings. As a practitioner, we need to focus on how to resolve patients' pain through simple lifestyle measures such as changes in posture and diet,” said Dr Ng.

While back braces can relieve pain in the short term, Dr Ng warns against long-term reliance on such devices.

“Long-term reliance on braces or any other orthosis may actually weaken the muscles. The patient should undertake correct physical activities, possibly guided by a therapist, for improved muscle strength and core muscle rehabilitation,” advised Dr Ng.

WHY BONES NEED VITAMIN D

At his clinic, Dr Ng has observed a disturbing number of cases of vitamin D deficiency across all age groups. Vitamin D facilitates the absorption of calcium from food into the gut and bloodstream, which in turn delivers it to the bones. It therefore has a direct impact on bone strength as well as muscle movement, tone and strength. A healthy body produces vitamin D when bare skin is exposed to sunlight.



“It is unclear why a lot of patients are lacking vitamin D, especially as some of them are actually exposed to a lot of outdoor activities. Some studies may have postulated that it is due to genetics or other factors that result in the liver and kidney not producing sufficient amounts of an active form of vitamin D. Of course, nutritional factors play a part, particularly in the elderly whose diets are often inadequate,” shared Dr Ng.

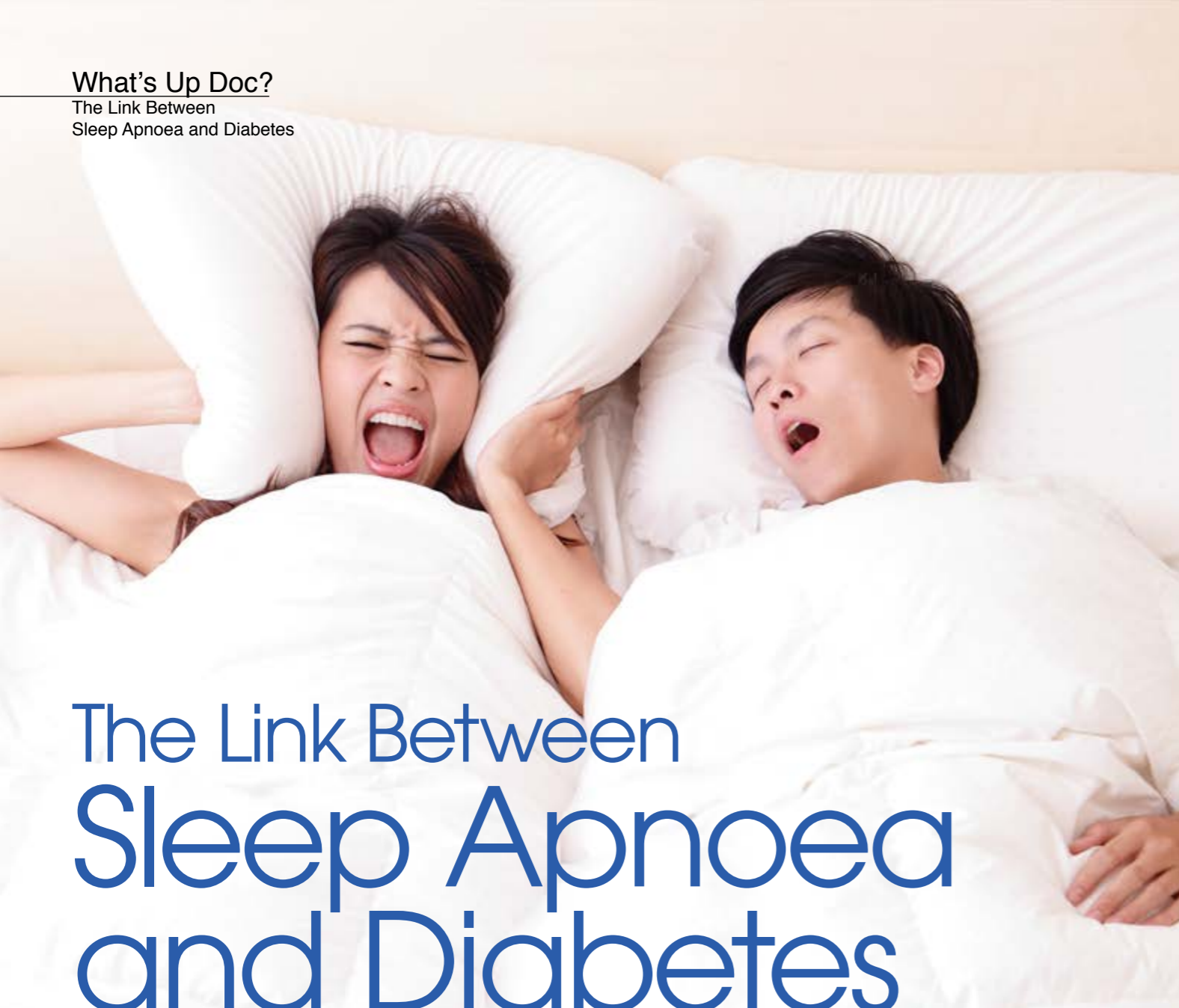
BONE SCREENING

Dr Ng underlines the importance of bone screening in the prevention of back pain. Since bones undergo changes as we age due to declining levels of sex hormones, loss of bone density is common among post-menopausal women and males after the age of 75. Due to the lack of these specific hormones, calcium leaks out from the bones, which causes them to weaken. Bone screening can check on a patient's calcium and vitamin D levels. If necessary, supplements can be prescribed.

LOOK FORWARD, NOT BACK

We all know that there's truth in the saying – prevention is better than cure. Keep fit, eat well, watch your posture and go for regular bone screenings if you're in an at-risk age group. You may well be one of the lucky one in five who escapes back pain. If you're not, take heart from the fact that the vast majority of cases can be managed without surgical intervention. ■

Island Orthopaedic Consultants
Medical Centre A, #01-04



The Link Between Sleep Apnoea and Diabetes

It's common for people with type 2 diabetes to also have obstructive sleep apnoea (OSA), according to Dr Lee Yeow Hian, Consultant Chest and Sleep Physician at Lee Respiratory and Sleep Clinic. We learn more about the sleep disorder and its link to diabetes.

SEPARATE BUT RELATED CONDITIONS

While OSA and diabetes can occur independently, they frequently overlap, according to Dr Lee. Patients who are overweight and obese have a higher risk of developing both conditions.

"It has been reported that up to 40 percent of OSA patients may have type 2 diabetes and up to 20 percent of type 2 diabetics may have OSA. It is therefore important to screen for both OSA as well as diabetes in these at-risk groups," said Dr Lee.

UNDERSTANDING THE RELATIONSHIP

There are several mechanisms by which OSA increases insulin resistance and the risk of type 2 diabetes. Dr Lee explained three interlinked scenarios that can lead to or worsen diabetes.

1. The repeated episodes of apnoeas and arousals lead to overactivation of the sympathetic nervous system with an increased production of catecholamines and cortisol. This is part of the body's fight or flight response and leads to higher blood sugar through increased gluconeogenesis and breakdown of glycogen.
2. Cycles of low oxygen and hyperoxia resulting from repetitive apnoeas and hyperpnoeas leads to increased oxidative stress and increased levels of inflammatory cytokines, which in turn causes increased insulin resistance.
3. The sleep fragmentation and intermittent hypoxia in patients with OSA, along with the mechanisms mentioned above, leads to a decreased Adiponectin and increased Leptin level, which again promotes insulin resistance and glucose intolerance.

In layman's terms, OSA disrupts the metabolism and stresses the body by depriving it of oxygen. This in turn triggers the release of stress hormones that can interfere with the body's blood glucose levels.

TREATING OSA

The 'gold standard' treatment for OSA is Continuous Positive Airway Pressure (CPAP) therapy. During this therapy, a minimal pressure is applied to the upper airway, which prevents it from collapsing while sleeping. When the repeated closures of the upper airway are prevented, the patient's breathing is maintained during sleep, preventing the harmful cycles of apnoeas, hyperpnoeas, arousals and sleep fragmentation. This is a non-invasive treatment with no long-term side-effects, although a period of acclimatisation is required for most patients.

For selected patients, a mandibular advancement device can be considered. These oral appliances work by moving the mandible (the lower jaw) forward and thus opening the airway.

Surgery is sometimes used to complement the usual treatment options. For example, nasal surgery aims to improve nasal patency, or clear the nasal passage, to improve CPAP tolerance. With a few exceptions, surgery to the upper airway – such as the palate or the base of the tongue, for the sole purpose of treating OSA is generally considered a treatment of 'last resort' that is only considered when all other treatment options have been exhausted. In general, weight loss is recommended for overweight patients with OSA or type 2 diabetes. Positional therapy can also help patients whose OSA occurs mainly in certain positions, usually supine. In these cases, sleeping on the side may help.

REAL RISKS

Patients with severe OSA, which is defined as anyone who stops breathing or has periods of under-breathing or shallow breathing more than 30 times in an hour, have been proven to be at an increased risk of dying prematurely.

It is now widely accepted that untreated OSA is an independent risk factor for sudden cardiac death, heart attacks, stroke, hypertension, heart failure, abnormal heart rhythms and insulin resistance. With fatigue comes a loss of alertness and an increased risk of becoming involved in traffic accidents and potentially fatal mishaps related to machinery. According to reports, the risk of dying due to any cause is tripled for patients with severe OSA compared to their peers who do not suffer from the condition.

Apart from the long-term health consequences, the sleep fragmentation and disruption resulting from OSA can lead to excessive daytime lethargy, sleepiness, poor concentration, poor mood and low productivity. In addition, bedmates frequently complain of disrupted sleep due to their partners' frequent gasping and snoring.

OTHER RISK FACTORS

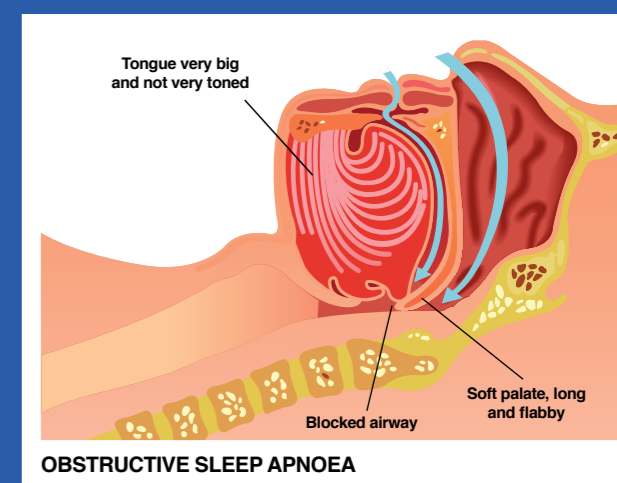
It is now widely accepted that being overweight, diabetic or not, increases the risk of developing OSA as the excess tissue causes narrowing of the upper airway.

People who snore are also at a higher than average risk of suffering from OSA, as snoring indicates that the airway is narrowed during sleep. In addition, patients with a family history of OSA are particularly at risk as this may indicate a familial tendency to have a small or narrow airway.

In general, Asians have a narrower airway than other races. When coupled with a small jaw, this increases the risk of airway closure during sleep, regardless of whether the person is overweight. Unless OSA is managed with weight loss, it seldom goes away without treatment. ■

What is Obstructive Sleep Apnoea (OSA)?

OSA is a disorder characterised by repeated episodes or complete or partial collapse of the upper airway during sleep. It can occur at any age. In children, OSA is often the result of enlarged tonsils or adenoids causing obstruction to the airway. In adults, OSA is more common in middle age. It is more common in men than in women, although after menopause women may be more at risk. Symptomatic OSA is very common and occurs in about four percent of middle-aged men and in two percent of middle-aged women. However, minimally symptomatic or asymptomatic OSA is estimated to occur in about one out of five adults.



Source:
http://www.leerespiratoryandsleep.com/medi_page/site_web_lrs/common_page.asp?pg=9

Lee Respiratory and Sleep Clinic
Medical Centre D #05-58

Your Diet Matters

for a Healthy Birth Outcome

See next issue for Part 2 of this article

Pregnancy is no doubt an exciting and rewarding journey but it is understandable that you may worry about how much food to consume while carrying your growing baby.

QUALITY AND QUANTITY

Well, even though the amount of food you eat matters during pregnancy, research shows that what you eat is also critical for your baby's birth and growth outcomes too. Without an optimal diet during pregnancy, the lack of nutrients will affect foetal growth and your baby's weight at birth, as well as increase your risk of developing pregnancy complications.

With all that said, do you think you are consuming a healthy diet during your pregnancy?

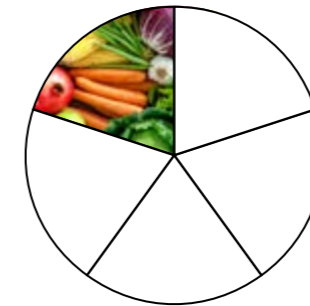


Contributed by Abbott

Here's What Singaporean Mums Report About Their Diet

Perception vs. Fact
A 2017 survey[^] among pregnant mums shows most (77 percent) think they were eating a well-balanced and nutritious diet.

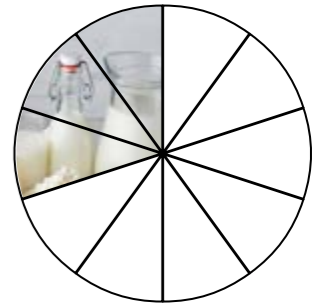
The Fact Is...
Many were not meeting the key diet goals recommended by the Health Promotion Board.



Almost **4 out of 5** were not eating 3 servings of vegetables daily.



4 out of 10 were not consuming 2 servings of fruits daily.

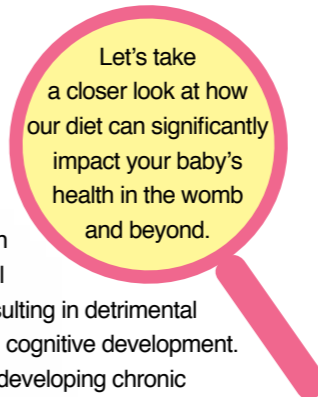


More than **6 out of 10** were not drinking 500ml of milk daily.

[^]Survey of dietary intake of pregnant women in Singapore, March 2017.

WHY YOUR DIET MATTERS

A healthy diet during pregnancy impacts your baby's health in both the short and long term.



Birth Weight

Poor maternal nutritional status can lead to a baby being born too small (< 2.5kg) or too large (> 4.5kg), resulting in detrimental effects on the baby's immunity and cognitive development. It also increases the baby's risk of developing chronic diseases in the future.

Complications

If you overeat during pregnancy, the resulting excessive weight gain can increase your risk of gestational diabetes and hypertension.

Nutritional Foundation for Baby

While in the womb, babies require more than 40 nutrients, including iron, folate, calcium and vitamin D. These nutrients help to establish a strong foundation for healthy growth beyond the infant years.

Apart from delivering the right amount of calories, a balanced and nutritious diet during pregnancy and breastfeeding is necessary as your baby needs sufficient (and the right) nutrients to develop healthily in the womb and beyond. To ensure you are getting enough nutrients, scientifically formulated maternal milk can be considered to supplement the diet*.



THE RIGHT WAY FORWARD:

CHOOSE HEALTHIER ALTERNATIVES

If you're not sure where to start, take a look at the examples below and get on the right track towards healthy eating! 🍴

MEAT	
Instead of Prime, marbled cuts or ribs	Go for this! Lean cuts such as tenderloin and loin chop
VEGETABLES	
Instead of Fried vegetables	Go for this! Steamed vegetables
SWEET TREATS	
Instead of Doughnuts and pastries	Go for this! Fresh fruits
SNACKS	
Instead of Potato chips	Go for this! Unsalted pretzels
SIDE ORDERS	
Instead of French fries	Go for this! Baked potato
DAIRY	
Instead of Whole milk	Go for this! Low-fat maternal milk fortified with vitamins and minerals

DID YOU KNOW?

A recent clinical study* showed that pregnant mums who included maternal milk in their diet experienced improved birth outcomes. Plus, it was found that they achieved significantly higher intakes of protein, carbohydrates and energy; and yet maintained similar weight vs. those who just took folic acid and iron supplements.

*Huynh DTT, et al. J Matern Fetal Neonatal Med. 2017. DOI:10.1080/14767058.2017.1320984.

Money Mi\$takes New Parents Make (and How to Avoid Them)

You might be able to get away with a few bad financial decisions as a young adult. But now that you're married and thinking of having kids, it's time to get serious about your money. Here are some common financial pitfalls to avoid – and save money and minimise stress – when planning to grow your family.

1 NOT BEING OPEN ABOUT YOUR FINANCES
Discussing your financial plan, personal finances, debts and spending habits with your partner is crucial if you want to start a family. Divergent attitudes about money are the root of many a broken marriage, so ensure you're on the same page on everything from the right time to have a baby to the type of property you'll live in when kids come into the picture. Draft a budget, have a plan for clearing your debts, and list down the financial goals that you plan to achieve as a couple.

2 GOING ALL OUT FOR YOUR FIRST CHILD
Inexperience and the excitement of becoming a parent often lead to overspending on a first child. You may want your child to grow up in a comfortable environment but ask yourself if it's necessary to spend thousands of dollars on a stroller or fancy clothes in different colours?

What's more important than plush comfort is having the confidence that you're financially ready for baby's arrival. Cash saved on non-essentials can go towards a good maternity plan that'll give you peace of mind should pregnancy complications arise or if your child is diagnosed with congenital illnesses. Insurance plans such as Aviva's

Inexperience and the excitement of becoming a parent often lead to overspending on a first child.



MyMaternityPlan¹ covers up to 10 pregnancy complications, 23 congenital illnesses as well as hospitalisation due to pregnancy complications for mums. The plan also provides coverage for severe neonatal jaundice and developmental delay in the child.

3 THINKING THAT YOU'RE IMMUNE TO ACCIDENTS
Chief among the concerns of parents-to-be are health and safety during pregnancy and childbirth, as well as the costs of raising a family and healthcare.

Consider protecting yourself against the unexpected with a plan like Aviva's MyAccidentGuard¹ – a low-cost personal accident plan that offers high and comprehensive protection as a result of a mishap (from a traffic accident to Zika or Dengue). It also pays a daily hospitalisation allowance for up to a year to spend as you wish (particularly useful if you're a freelancer or stay-at-home parent).

When you're busy preparing for baby's arrival as a parent-to-be or wrapped up in late-night feeds, the last thing you need is financial stress due to an accidental injury – to you, your child or spouse.

4 NOT HAVING CRITICAL ILLNESS INSURANCE
Critical illness insurance often gets put on the back burner as most 30-somethings think they're still young and healthy.

While your health insurance takes care of hospitalisation and perhaps outpatient treatment, your critical illness plan gives out a sum of money that you can use for all other costs such as regular bills and daily expenses that you'll continue to incur despite your income loss while on no-pay leave.

Getting a critical illness cover at a young age means lower premiums and no health exclusions. So should the unfortunate happen to you, you'll have the peace of mind to focus on your family and on recovery.

5 ASSUMING YOU WILL HAVE MORE MONEY IN THE FUTURE
One common mistake by young professionals nowadays is that they assume their salary will always increase. While this may be true, this is not a legit reason to spend and not save, especially with the rising costs in education. Relying on future income and always assuming you'll make more money is poor financial planning.

The future is full of uncertainties and you might be faced with retrenchment if the economy is not doing well. Your best bet is to live within your means and be prepared for rainy days and start saving today!

¹For full details of MyMaternityPlan and MyAccidentGuard, please obtain a copy of the product summary from Aviva or your financial adviser representative.

Contributed by Aviva



Don't Forget Your Support System

An Action Plan for Your Family and Friends



Studies have found that women are more likely to start and continue breastfeeding if they receive positive encouragement from the people around them. These are your 'support team'.

HELPING THEM HELP YOU

Breastfeeding is a commitment that starts when your baby is born and can, ideally, continue for six months or more. Many people in your life may want to support you during this exciting time – your partner, family, friends, and your healthcare provider. Letting them know what you need (and when!) can help them to help you.

Here are some tips to help rally your support team. Because every support team is unique, feel free to come up with some special ideas of your own.

1 LEARN TOGETHER

Encourage the people on your support team to become informed about breastfeeding. The more they know, the more you can discuss the process together.

2 TALK TO EACH OTHER

Communication is key. Talk about how you're feeling, and let the people around you know how they can help out. While the actual act of breastfeeding may happen just between you and your baby, your overall breastfeeding experience will be a more positive one if you are willing to let others help you.

3 SUPPORT EACH OTHER

Kindness, patience, and encouragement will go a long way no matter who is on your support team. You and the people around you should be proud of your decision to breastfeed. So remember to be a support for each other and to back

each other up when talking to people about your decision to breastfeed. Support can also mean helping you stay healthy. Your partner can help you eat right and stay hydrated, as this will help your milk production.

4 GET HELP WITH CHORES

Don't be afraid to ask your partner or people on your support team to help out with household chores, running errands, or preparing healthy meals so you can feed the baby or rest.



5 IF YOU HAVE A PARTNER, ASK HIM OR HER TO JOIN YOU WHEN YOU BREASTFEED

Breastfeeding can be a calm and relaxing time for you, your partner, and your baby to just be together and bond. There are lots of ways your partner can help out, even though you are the one doing the actual feeding.

For example, when you and your baby are still learning how to breastfeed, your partner can help you to read your baby's hunger and fullness cues. He or she could also change the baby's diaper before night-time feedings.

And because it is so important to stay hydrated when you're breastfeeding, your partner can take on the job of bringing you a glass of water to drink while your baby is nursing.

6 NURTURE THE BABY

While babies get nutritional nourishment from your breastfeeding, emotional nourishment is important for your baby, too. Partners can cuddle, hug, play, and spend as much time as possible nourishing your baby's development.

7 FIND A BREASTFEEDING PARTNER

Finally, remember that your 'partner' can be any trusted, reliable friend or family member who is eager to support your desire to breastfeed your baby for as long as possible.

STORE YOUR BREAST MILK

Store your breast milk right after you pump it. You can store it clean in:



Hard, BPA-free Plastic Bottles



Glass Bottles



Breast Milk Storage Bags

Make sure to only use bags or bottles made specifically for storing breast milk. Disposable bottle liners or regular plastic bags aren't appropriate.

DON'T FORGET TO LABEL IT



Include the date you pumped the milk.



Personalise the container with your baby's name if you are bringing the milk to a daycare centre.

CHILL OR FREEZE BREAST MILK ASAP

Colder is always better, but there's more than one way to safely store breast milk:



ROOM TEMPERATURE
15°C to 30°C
3 to 4 Hours
Breast milk can be kept at room temperature for a few hours.

COOLER WITH ICE PACKS
15°C
Up to 24 Hours
Don't open the cooler more than you have to. Make sure the ice packs are in contact with the container.

REFRIGERATOR
4°C or Colder
Up to 3 Days
Keep containers in the back of the refrigerator where it's coldest, not in the door compartments.

FREEZER
-4°C or Colder
Up to 6 months
Keep containers in the back of the freezer where it's coldest, not in the door compartments.

HOW TO THAW BREAST MILK

Check the date on the container – always use the oldest milk first.



PLACE the container in the refrigerator overnight OR place the sealed container in a large bowl or pot of warm water.



POUR the breast milk into a clean bottle (if it was frozen in a bag) once it is slightly warm or at room temperature. See tip below.



TEST the temperature of the milk by placing a drop on your wrist (the milk should be slightly warm).



SWIRL (don't shake!) the milk around in the bottle.

IF YOUR BABY DOESN'T FINISH THE BOTTLE



Room Temperature
1 to 2 hours is best.
3 to 4 hours is okay.



Refrigerator
24 hours



Freezer
Never re-freeze breast milk.

NEVER:



Heat your breast milk on the stove.



Microwave breast milk (it may heat unevenly and burn your baby's mouth).



Did you know that World Breastfeeding Week is 1 to 7 August 2018?

The World Breastfeeding Week (WBW) was established in 1992 to celebrate the importance of breastfeeding, and is coordinated annually by the World Alliance for Breastfeeding Action (WABA). It marks the anniversary of a declaration by UNICEF in support of breastfeeding and offers an opportunity for people worldwide to join together in celebration and action.



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& ROLL

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Musical Kids Are Sociable Kids

Early engagement with music can help your child become a team player, an empathetic friend and a broad-minded person.

NEVER TOO YOUNG

Babies listen to music, perhaps more attentively than at any other age. Research has shown heightened brain activity in newborns when music was played. The reactions were increased when movement was involved while music was playing.

It follows that babies respond not only to rhythmic patterns in music, but also to those in speech. By exposing a baby to music, you are helping to attune his ear to the cadences of the human voice. In general, babies respond favourably to 'baby talk', cooing, humming and singing. Hence, early exposure to music may support babies' earliest abilities to engage in positive social interactions with loved ones.

GROUP GROOVING

For young children, music is best experienced in a group. Learning music through games helps because everybody likes to play games! In group music-making, children develop intrinsic skills like respect and waiting to take their turn. For example, tasking a child to sing in rounds, leaving out some lyrics and joining in for others, is a great way to teach self-control and self-regulation. The same goes for playing instruments – hitting the triangle or tambourine at a certain point in time requires great self-control, not to mention listening skills. Resisting the impulse to do something is of course a vital life skill at any age.

Group music-making not only teaches children when to step back, but also when to step up. In class or at home, when children are encouraged to take the lead for others to follow, their confidence will grow. When applause follows, even if the lyrics are a little muddled, the child's self-esteem will soar.

APPRECIATION OF DIVERSITY

Group music-making can teach children to appreciate and respect differences in ability as well as differences of opinion and expression. Some children like beating on a drum, while others may prefer blowing on a recorder. When dancing, one child may sway his body in a laid-back manner, while another may exuberantly star-jump and twirl. It helps children understand the fundamental notion that everyone is different and entitled to express his or her own unique response to a situation.

Music also helps children develop an appreciation of and respect for diversity. Children are not born with a set of musical tastes. Rather, it develops over time due to societal experiences, encounters with different genres of music in the home and school environments, and so on. Hence, children should be exposed to all kinds of music. The marvellous multi-faceted nature of music in its width of rhythms, sounds, beats, contrasting parts, different voices and different instruments can be only be introduced to young children by allowing them to listen to almost everything (save trance and techno) – from nursery rhymes through to folk, jazz and orchestral music.

Exposure to music from other cultures is a great way to introduce children to the concept of human diversity. World music can literally open their ears and subsequently their eyes to the incredible possibilities of human experience on our planet.

THE MAGIC MIX

Children have an innate need to move, sing and play. Activities work best when they are delivered to their level with these components. Music should never be a 'read and perform' subject for children, and it is important to note that adults and children do not interact with music in the same way.



Group music-making can teach children to appreciate and respect differences in ability as well as differences of opinion and expression.

Music experiences should be 'whole-child' experiences. In other words, it is not possible to segregate a socially and emotionally beneficial activity from a cognitive, physical or musical one. In general, positive musical activities and experiences will help develop every aspect of a child. ■

Written in collaboration with Kindermusik

Sources:
<http://www.washington.edu/news/2016/04/25/music-improves-baby-brain-responses-to-music-and-speech/>

<https://www.parenttoolkit.com/social-and-emotional-development/news/general-parenting/creating-harmony-how-music-can-support-social-emotional-development>



Bathing Babies

It can be nerve-wracking for new parents to bathe a precious newborn. Learn some bathtime basics to build your confidence and safeguard your baby.



HOW OFTEN AND HOW LONG?

A bath two to three times a week is enough to keep a newborn baby clean, as long as adequate cleansing is done during diaper changes and after feedings. However, if your baby really enjoys a bath, you can bathe him or her once a day. Bathing more often than this may dry out your baby's skin.

A newborn baby's bath should be kept from five to ten minutes. This is especially important if your baby has dry or sensitive skin.

From about four months of age, once your baby starts crawling and eating solid foods, you will need to bathe him or her once or twice daily. Do not be tempted to exceed two baths a day, as excessive bathing can cause skin dryness and decrease the natural bacteria count of your baby's skin. This, in turn, may increase his or her risk of developing eczema later in childhood.

TUB TIME WITH BUB

Many parenting authorities encourage co-bathing with babies as an extra opportunity for beneficial skin-on-skin contact. Studies have shown that skin-on-skin contact improves breastfeeding success, helps decrease infant crying and even helps to maintain infant blood sugar levels and temperature.

As your baby gets older, bathtime can become a multi-sensory learning experience. You can introduce squeaky bath toys and explore tactile sensations with bubbles and pouring water. It's the perfect setting for a basic anatomy lesson – ask your little one to show you his or her toes, nose and ears... And let the fun times flow!

Instead of a bath, you can treat your baby to a shower. Make sure the surface of the shower cubicle is not slippery, and hold your little one safely in your arms. It's another great way of bonding through skin-on-skin contact.

'TOP AND TAIL' BETWEEN BATHS

Between baths, you can help keep your baby fresh and clean by wiping his or her diaper area, hands and face up to several times a day (top and tail). This cleans your baby's skin without the need for rinsing, moisturising and soothing, while preserving the skin's natural balance and applying a protective film.

HOW TO BATHE YOUR BABY

1. Start with only a few inches of warm water. Baby's bath water should be between 32 and 38 degrees Celsius. After filling the basin or tub, be sure to swirl the water with your hands so there are no hot spots.

2. Before putting your baby in the bath water, test the water's temperature on the inside of your wrist to make sure it is not too hot.

3. Using one arm to gently support your baby's back, head and neck, gently place him or her in the baby bath. Continue to support him or her using one arm while bathing him or her with the other.

4. Eyes: To clean your baby's eyes, you should use a clean cotton pad for each, starting from the inside corner of the eye, moving outwards.

Face: Use a soft washcloth to wipe around your baby's mouth, nose and face, starting from the middle, moving outwards. Remember to wipe the creases in their neck and behind the ears.

5. For younger babies, wet a baby washcloth with warm water and use a gentle cleanser formulated for babies. Don't be afraid to gently wash the soft spots (called fontanel) on your baby's head.

6. Wash the diaper area last. Gently cleanse the genital area by washing from front to back and dry thoroughly. For an uncircumcised boy, avoid pulling back the foreskin.

7. Let your baby take a few moments in the bath to enjoy the warm water. Pour cupfuls of water over your baby's body to keep him or her warm. Be careful when running water directly from the tap as the water temperature can change suddenly.

8. Wrap both hands around your baby's chest, under their arms, and support their head. Lift him or her out of the bath and quickly wrap them in a towel.

9. Dry your baby thoroughly in all the creases, as excessive moisture could lead to skin irritation.

GENERAL GUIDELINES

Clean only what you can see. In other words, avoid putting anything deep into your baby's ear canal or nose.

If your baby's skin is dry, add a few drops of specially formulated baby oil to the bath water.

Remember, every baby is different. Some babies don't like to be bathed too soon after feeding. Many mums find it best to bathe their baby before they eat.

Above all, never leave your baby alone in the bath.

Be prepared. Make sure you have everything you need before giving your baby a bath. Cleanser – check. Shampoo – check. Cotton pads – check. Washcloth – check. Toy – check. Towel – check.

Finally, enjoy bathtime with your baby! 🧼



Baby Product Checklist

When buying baby products, look for:

- ✓ Scientific tests such as dermatological control, hypoallergenic, etc.
- ✓ Pharmaceutical standards
- ✓ Active ingredients of natural origin, selected for extreme gentleness
- ✓ Formulas with a physiological pH 5.5
- ✓ Paraben-free, alcohol-free, phenoxyethanol-free, perfume-free
- ✓ Products that are designed for newborn babies
- ✓ Soap-free, so it won't sting the eyes
- ✓ Moisturising effect, so it won't dry out the skin

Written in collaboration with Biolane

Source:
https://www.huffingtonpost.co.uk/entry/bathing-with-baby-bonding-oilatum_uk_58595a4ee4b0acb6e4b97563?guccounter=1



Understanding IBS

There is a lot of confusion surrounding Irritable Bowel Syndrome (IBS). Dr Reuben Wong, Gastroenterologist at gutCARE, corrects some common misconceptions and explains what can be done to relieve its symptoms.

WHAT IBS IS – AND WHAT IT IS NOT

IBS is often confused with constipation, for good reason. While constipation is a condition characterised by infrequent or hard stools, IBS patients experience abdominal pain or discomfort associated with a change in bowel movements in terms of frequency or stool forms. Hence the IBS subtype known as constipation predominant IBS, or IBS-C, can present in a very similar fashion to chronic constipation.

“While constipation and IBS are considered separate and distinct conditions, both groups of patients are constipated and have poor quality of life. Many of the drugs used to treat both conditions are more or less the same, so it is a bit of an artificial divide,” shared Dr Wong.

Dr Wong also emphasised that there is no link between IBS and stomach and colon cancer, despite patients' understandable 'worst case scenario' fears based on the severity of their symptoms.

By definition, IBS is a chronic functional disorder, meaning that patients need to have had the symptoms for the past six months, with a certain degree of regularity. As there is no definitive test for IBS, the diagnosis is made when patients fulfil the Rome IV criteria (a recognised set of diagnostic criteria for IBS). It is subdivided into different subtypes depending on the predominant stool subtype.

ANYONE CAN SUFFER FROM IBS

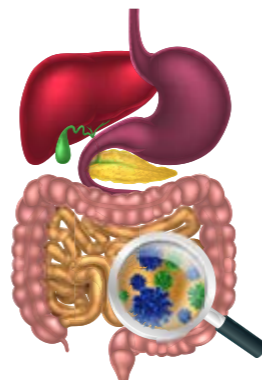
While it was previously thought that young, stressed-out females were at a higher risk of suffering from IBS than other age groups and genders, studies have shown that IBS affects men and women across the age spectrum. It has been estimated that 10 to 15 percent of Singaporeans are suffering from IBS.

The causes of IBS are many, and often difficult to pinpoint. They include genetics, a previous gut infection, diet and nerve hypersensitivity. Hence, Dr Wong stresses the importance of correct diagnosis.

IMPORTANCE OF CORRECT DIAGNOSIS

Given the multi-factorial nature of IBS, diagnosis is often difficult and inaccurate. At his clinic, Dr Wong mainly sees patients who have first consulted a general practitioner. Others may have already consulted a specialist, and come to seek a second opinion.

Some IBS patients resist accepting a diagnosis. Due to the severity of their symptoms, they refuse to accept the explanation of IBS and



continue to search for evidence of a more sinister condition such as appendicitis or cancer.

“The failure to make the diagnosis, or the failure to accept the diagnosis, results in patients going all over the shop, being pushed from scan to scope again and again,” shared Dr Wong.

Incorrect diagnoses and unaccepted diagnoses, which result in the patient undergoing unnecessary surgeries and investigative procedures, carry a high financial cost and also an emotional and psychological one.

“While constipation and IBS are considered separate and distinct conditions, both groups of patients are constipated and have poor quality of life. Many of the drugs used to treat both conditions are more or less the same, so it is a bit of an artificial divide.”

TREATMENT ACCORDING TO CAUSE

When diagnosed correctly, outcomes for IBS patients are very good. Symptoms can be lessened and even eliminated, and quality of life can be vastly improved.



For patients with mild IBS, simple dietary avoidance may be all that is required. Common food triggers include caffeine, chilli, beans and milk.

In particular, cow, sheep and goat dairy products contain lactose, which is a FODMAP. Besides lactose, FODMAPs are a group of

hard-to-digest sugars that are found in garlic, onions, cauliflower, bananas, barley and other foods that are known to cause gas. These foods can be the culprits in IBS, and their intolerance can easily be ascertained by using a breath test. Probiotics may help to restore the balance of good bacteria in some IBS patients, and thus help relieve their symptoms.



For patients with moderate IBS, medication may be required, together with lifestyle modification measures that include dietary avoidance.

For those who suffer from severe IBS, psychotropic drugs that desensitise the numerous nerve endings in the gut may be administered. This form of medical intervention is called neuro-modulation.

If left untreated, IBS symptoms do not go away. However, there are no adverse long-term side-effects, just the daily misery of coping with abdominal pain, constipation, bloating, gas, a restrictive diet and the social embarrassment that goes with it. That's not to forget the knock-on effect that IBS has on those close to the patient.

Dr Wong shared that studies done on the 'partner burden' of IBS showed that spouses can potentially suffer as much or more than the spouses of patients with severe conditions such as cancer and dementia.

AWARENESS IS BUILDING

Dr Wong believes that awareness of IBS is building. However, there is still much room for improvement. Physicians need to be aware of the diagnostic criteria and consider the diagnosis in their patients. Members of the public need to be more tuned in to, and more accepting of, the possibility that they may be suffering from IBS rather than fearing the worst or blaming it on 'gastric'.

Given the treatability of IBS, a diagnosis is something to be welcomed. As with all things in life, knowing the problem is the first step towards finding a solution. ■

gutCARE Digestive•Liver•Endoscopy Associates
Medical Centre D #07-55

Stay Curious

by Anthony Goh

Ageing excuses none from seeking out answers, asking questions and probing the issues that are peculiar to our times.



CURIOUSER AND CURIOUSER

I have always been a voracious reader. From classic coming-of-age novels like *Oliver Twist* by Charles Dickens and *The Adventures of Huckleberry Finn* by Mark Twain, to works of whimsy and imagination such as *The Wonderful Wizard of Oz* by L. Frank Baum and *Alice's Adventures in Wonderland* by Lewis Carroll, my tastes were wide-ranging and my appetite for reading inexhaustible.

Growing up, I became curiouser and curiouser. I devoured self-improvement and leadership books by the likes of Napoleon Hill, Norman Vincent Peale and Dale Carnegie. I moved on to everything from historical fiction to autobiographies and travelogues. My every request was delivered to my office by an obliging Indian vendor who would source for any book I asked, and even allowed me to pay him by instalments.

One derives tremendous benefits from reading about current affairs – political, economic, financial and social factors and events that directly affect our daily lives. Lighter reads on issues such as food, health, gossip and movies, in magazines and periodicals, help to break the monotony of living. I like to visit the magazine stands, and browse through anything I can find in the larger bookshops.

I live by the saying that age is just a number. (Incidentally, I am 80 years old and counting.) Every morning, I take an hour-long morning walk and tone my under-used muscles on the exercise equipment in a nearby heartland. By 8.30am, I make my way to my usual coffee shop for a cup of tea with a copy of *The Straits Times*.

At intervals, I pause from my reading and survey the scenery outside, where I often see a hummingbird benefiting from the heliconia by sucking its nectar. It strikes me as a fitting metaphor for how my

natural curiosity compels me to draw on current affairs to sustain me with knowledge and, hopefully, enrich me with wisdom. My life is certainly more fulfilling for it.

I still contribute my views and opinions on the latest happenings to *The Straits Times Forum* to share with fellow Singaporeans. The regular publication of my letters validates my efforts and tells me that I still have something worth saying – and an appreciative audience willing and perhaps even waiting to hear it.

A CALL FOR ACTION NOT APATHY

I would dearly love to see our children and grandchildren channel the curiosity that is inherent within them and direct it to the issues that are shaping their lives and futures.

I urge everyone to examine the evidence and sift out 'fake news' from authentic reportage. Challenge the status quo and push for answers – for it is only from an informed perspective that we can make decisions that will lead to actions that will in turn bring about positive change.

Curiosity has led me to study the impact of diet and fitness on health, and I like to think that I practise what I preach. I hope that with improvements in infrastructure for senior living, Singapore can someday boast one of the longest life expectancies for men and women among the developed nations.

Curiosity has led me to examine the meaning of happiness, and ask the question – why are we not a nation of happier people? *The World Database of Happiness* (developed by the Erasmus University in Rotterdam) ranked 15 top countries on a scale of 7.6 to 10 and Singapore is not among them. With so much to be happy about, we should be on that list!

WHEN CURIOSITY DESERTED ME

Curiosity and happiness go hand in hand. My own life attests it. When troubles engulf you, curiosity can desert you. But in your darkest hours, it will be curiosity that saves you.

Let me tell you about the time when curiosity deserted me.

From 1963 to 1972, I was preoccupied with my work at Jurong Shipyard and my happy married life at home. I had two young children, aged six and eight years old, and Jurong Shipyard held promising career prospects for me.

Then the bad news came. My wife was diagnosed with kidney failure and needed haemodialysis. She was devastated.

More bad news followed. My father was diagnosed with colorectal cancer and needed immediate surgery.

“What really excited my curiosity was the brand new politics espoused by our government as a non-aligned nation built on democracy and meritocracy.”

This double whammy was enough to kill my curiosity. I became apathetic, but gathered enough energy to consult my dad and seek his advice on what I should be doing to resolve this crisis. He told me to get ready to take over the running of his small hardware company. In the meantime, he would use company funds to pay for his hospital treatment. I told Dad I had to settle my wife's depression first, and talk to him about succession later.

My wife's depression worsened. She refused to undergo dialysis and became severely depressed. For her sake and the sake of my children, I resolved to stay strong. I put everything else aside and help my wife out of her depression. Eventually, she consented to go for dialysis.

Following my Dad's advice, I took the bull by the horns and resigned from Jurong Shipyard to take over the running of my father's company.

My training in the Japanese shipyard had taught me to be always curious and take tough actions to meet deadlines. The Chinese character for 'CRISIS' consists of two parts – 危机. One part means 'danger' and the other means 'opportunity'. I chose not to dwell on the danger and seize the opportunity to become a risk-taking entrepreneur.

Optimism was a decision. I channelled it into my work. Enquiries came pouring in and sales improved.

I overcame my apathy, turned it into action, and welcomed curiosity back into my life.

WHAT EXCITES ME MOST

The timing of my birth in 1938 and the march of Singapore up to independence on 9 August 1965 – everything that happened in between these two dates continues to enthral and excite me. Perhaps this 'accident of timing' largely explains my lifelong passion for politics and my unflagging pride in our nation's progress.

There was war. There were racial riots. There were diseases and pestilence. And there was an epidemic of human suffering. I lost five siblings born after me from 1939 to 1945.

The fateful day of 9 August 1965 was the proudest day of my life. For the very first time, at the age of 27, I was a free man singing my very own national anthem with a pledge of loyalty to my own motherland. 'I will walk the walk with my Prime Minister and his cabinet. I will honour the flag and I will fight to defend my homeland. Never will I serve under any foreign powers.' This was my vow.

What really excited my curiosity was the brand new politics espoused by our government as a non-aligned nation built on democracy and meritocracy.

We were multi-racial, multi-religious and multi-lingual, with English as the lingua franca common to all races.

With immense pride, I continue to follow the progress of our country from third-world to first, together with all her impressive achievements across a broad spectrum of human endeavour. We belong to a nation that, though small in size, stands tall among the global community.

I hope that all Singaporeans will stay curious and keep striving for self-improvement, as our nation's founding fathers did before us. Then we will surely prosper as individuals and succeed as a nation.

The opinions expressed in this article are those of the author. ■

Food for the Skin

We are what we eat, as the saying goes. And as the skin is the body's largest organ, it follows that diet directly affects its health and appearance. Here's some food for thought on food that's good for the skin from Sarah Sinaram, Head, Nutrition and Dietetics Department and Melanie Khoo, who interned at the hospital early this year.

FIGHT FREE RADICALS WITH FRUITS AND VEG

It's common knowledge that eating fresh fruits and vegetables is good for the skin because they are brimming with something called 'antioxidants'. These naturally occurring wonder-workers play an important role in protecting the skin from the cellular damage caused by free radicals, which begs the question – what are free radicals?

Free radicals are the by-products of normal metabolic processes as well as smoking, pollution, ozone and X-rays and other external sources. They cause damage to cells by stealing their electrons through a process called oxidation, which damages parts of cells including DNA, proteins and cell membranes and results in premature skin ageing.

Antioxidants are the 'dream clean team' that mop up free radicals from the body and prevent or mitigate the damage caused by oxidation. They include betacarotene, which is found in carrots, sweet potatoes and pumpkin, and lutein, which is found in kale, papaya and spinach. Not to forget the super-antioxidant Vitamin C, which abounds in blackcurrants, blueberries, broccoli, guava, kiwi fruits, oranges, papaya, strawberries and sweet potatoes.

IN THE PINK OF HEALTH, LITERALLY

Not only do the antioxidants in fruits and vegetables help prevent skin ageing, but recent research suggests that the carotenoids they contain may help add healthy colour to your complexion. The same benefits have not been seen with supplements, so it's best to get your carotenoids straight from the plate.

FEED YOUR FACE WITH...

In addition to fresh fruits and vegetables, oily fish such as salmon and sardines are great for the skin. There is some evidence to suggest that omega-3 supplementation may help improve psoriasis symptoms.



Turmeric is a herb that is famously good for just about everything, thanks to the presence of an active compound called curcumin. This amazing multi-tasker is an anti-inflammatory, antioxidant, antibacterial, antifungal and antiviral powerhouse that may hasten healing and help prevent photo-ageing.

Foods that are rich in Vitamin E, a fat-soluble antioxidant, are also known to be beneficial for the skin. They include wheat germ oil, oats, sunflower seeds, almonds and hazelnuts, and almond and hazelnut oils.

Green tea is another long-trending super-drink that may actually live up to the hype. Studies show that the brew's catechins, which are a type of antioxidant found in plants, boost blood flow and oxygen to the skin.

MODERATION AND BALANCE

A balanced diet rich in fresh fruits and vegetables, with healthy whole grains and healthy oils and a moderate intake of meat and other proteins, is the best recipe for not only healthy skin but a healthy body.

In other words, when you eat to feel good, you'll invariably look good, too! ■

3 Food Myths



1. There is no conclusive proof that chocolate causes breakouts.
2. Fried foods do not cause acne (overactive sebaceous glands do).
3. There is insufficient evidence to suggest that coffee ages skin.

Go get your glow from this yummy smoothie recipe from Melanie Khoo. It tastes as good as it is good for you!



Matcha-nana Smoothie (Serves 1)

Ingredients

- 1 ripe small banana, frozen
- ¾ cup non-dairy milk
- 1 tsp organic matcha
- 1 to 2 tsp maple syrup
- 2 to 3 ice cubes
- Vanilla extract (optional)
- Spinach (optional)
- Chia seeds, soaked (optional)
- Honey crushed nuts (almonds, cashews, walnuts) (optional)

Method

1. Place all ingredients into blender and blend to a smooth consistency
2. Crushed nuts may be added as toppings

Nutritional Information

Energy	178 kcal
Protein	8.0g
Carbohydrates	31.8g
Fibre	5.1g
Total fat	3.2g

The Facts on Fats

Though fat was once frowned upon in all its forms, many people are now aware of the importance of good types of fat in their diet. Sarah Sinaram, Head, Nutrition and Dietetics Department at Mount Alvernia Hospital, separates the good from the bad.

FATS AND THEIR FUNCTIONS

Fats store energy, insulate us and protect our vital organs. They also act as messengers, helping the proteins in our bodies do their jobs. In addition, they start the chemical reactions that help control growth, immune function, reproduction and other aspects of basic metabolism.

The cycle of making, breaking, storing and mobilising fats is at the core of how humans regulate their energy. An imbalance in any step can result in disease, including heart disease and diabetes. For instance, having too many triglycerides in our bloodstream raises our risk of clogged arteries, which can lead to heart attack and stroke.

Fats help the body store certain nutrients as well. The so-called 'fat-soluble' vitamins – A, D, E and K – are stored in the liver and in fatty tissues.

GOOD FATS

There are two broad categories of beneficial fats – monounsaturated and polyunsaturated. They come mainly from vegetable and fish products.

Monounsaturated fats are fat molecules that have one unsaturated carbon bond in the molecule, also known as a double bond. Oils that contain monounsaturated fats are typically liquid at room temperature but start to turn solid when chilled. Monounsaturated fats can help reduce bad cholesterol levels in your blood, which can lower your risk of heart disease and stroke. They also provide nutrients that help develop and maintain your body's cells.

GOOD MONOUNSATURATED FAT SOURCES

Olive oil, peanut oil, canola oil, avocados, most nuts



Polyunsaturated fats are required for normal body functions including building cell membranes, blood clotting, muscle contraction and relaxation, and inflammation. They also help lower triglycerides. Since the body cannot manufacture them, they must be obtained from food. The polyunsaturated fat known as omega-3 has been proven to help prevent and even treat heart disease and stroke, and could be helpful in the treatment of autoimmune diseases such as lupus, eczema, and rheumatoid arthritis.

Another type of polyunsaturated fat, omega-6, is thought to improve heart health by helping reduce the total and LDL-cholesterol ('bad' cholesterol) levels in the blood.

GOOD POLYUNSATURATED FAT SOURCES

Omega-3: Fatty fish (such as salmon, mackerel, and sardines), flaxseeds, walnuts, canola oil, unhydrogenated soybean oil

Omega-6: Vegetable oils (such as corn, soybean and sunflower oils), seeds (such as sunflower and sesame seeds)



BAD FATS

Saturated fats and trans fats are classified as 'bad' as they have a negative impact on our blood cholesterol levels.

Saturated fats may increase LDL-cholesterol and increase the risk of coronary artery disease. The National Nutrition Survey 2010 showed that 70 percent of Singaporeans exceed their recommended saturated fat intake.

SATURATED FAT TRAPS

Palm oil, coconut oil, butter, lard, meat fats, poultry skin, ghee, full cream dairy and dairy products

Foods containing these ingredients (such as nasi lemak, laksa, curry puffs, kaya and butter toast)



Trans fats may increase LDL-cholesterol and reduce HDL-cholesterol. Intake of trans fats should be kept to a minimum.

TRANS FAT TRAPS

Meat, packaged baked products (such as cookies, cakes, breads and crackers), fast foods, some dairy products, packaged foods that list 'partially hydrogenated vegetable oil' as an ingredient



HEALTHIER CHOICES

Rather than eliminate fats from your diet, target the good ones. Seek out brands that carry the Healthier Choice symbol. A product can claim to be trans fat-free if it has less than 0.5g of trans fat per 100g of product. In Singapore, trans fat-free margarine is now available.

In short, know your fats and make informed food choices.

HEALTHY GUIDELINES FOR EATING FATS

The Singapore Ministry of Health recommends that you limit the intake of saturated fats and trans fats in your diet, and replace them with unsaturated fats. Try following these simple guidelines.



AT HOME

- Use less oil in cooking. Choose oils higher in unsaturated fat, and avoid re-using oils more than twice.
- Adopt healthier cooking methods (e.g. steaming, baking) more often.
- Use fat spreads (e.g. margarine, butter, kaya, peanut butter) sparingly.
- Choose low-fat dairy products, lean meats, fish and skinless poultry.
- Consume fish at least twice a week. Replace meat in dishes with beans and bean products (e.g. tofu) on some days.

WHEN EATING OUT

- Replace fried noodles with soup noodles occasionally.
- Limit deep-fried food to no more than twice a week.
- Consume high-fat bakery products (e.g. pastries, cakes and cookies) less often.
- Remove visible fat and skin from meat and poultry.
- Ask for less oil and gravy in food.

WHEN SHOPPING

- Read the ingredient list to identify products that contain hydrogenated or partially hydrogenated fats/oils/shortening. These are likely to be high in saturated and trans fat.
- Read the Nutrition Information Panel on food labels to compare the amount of fat in food products.
- Choose products with the Healthier Choice Symbol as they are lower in total and saturated fat compared to other products in similar categories. These products also have no trans fat or only negligible amounts of it per serving.

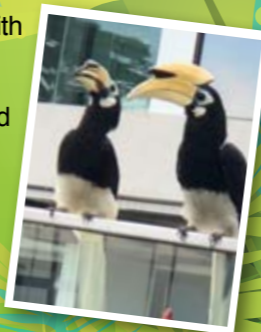


Source: <https://www.healthhub.sg/live-healthy/458/Getting%20the%20Fats%20Right!>

In Love With Nature

At Mount Alvernia Hospital, we are truly blessed to be situated conveniently close to the city, yet near the lush natural beauty of the neighbouring reservoirs. Despite our busy lives, we seize opportunities to connect with nature, fresh air, sunshine and more importantly, marvel at the beautiful outdoors. We recently held a **'Walk-A-Plog'** activity, walking around MacRitchie Reservoir and picking up litter along the way, in support of Public Hygiene Council's 'Keep Clean, Singapore' (KCS).

And at our hospital's recent Father's Day celebration, **'A Day Out with Daddy'**, we brought six daddy-child pairs outdoors to bond along the Pasir Ris Mangrove trails, where they enjoyed close encounters with amazing flora and fauna. Speaking of which, take a look at these two feathered friends spotted in our hospital grounds. Aren't they magnificent?



Walk-A-Plog



A Day Out with Daddy



The greatest gift
you can give your child is
love and protection.



Few things can compare with the joys of motherhood, from feeling your baby move inside your belly for the first time to hearing the tiny wails in the delivery room that announce their arrival. As you embrace maternal bliss, you may also be overwhelmed by multiple night feeds, never-ending laundry, and anxiety about your newborn's health and safety.

At Aviva, we understand that family comes first. That's why we're giving you the essential protection so you can focus on the joys of motherhood. Exclusively for expectant mums planning to deliver their babies at Mount Alvernia Hospital, **MyFamilySecure is a complimentary 6-month personal accident plan¹** for you, your newborn² and spouse³.

To sign up for your complimentary coverage, please speak to our Aviva Relationship Consultant at Level 1 of Mount Alvernia Hospital. You can also find out more by sending us a message via Whatsapp or dropping us an email.

Whatsapp **9239 9689**
Email **arc_MtAlvernia@aviva-asia.com**

Footnotes:
MyFamilySecure is available to Singaporean Citizen or Singapore Permanent Resident or who holds a valid employment pass in Singapore; and Residing in Singapore (not out of Singapore for more than 90 continuous days during the coverage period).
¹ For expectant mums who are patients at Mount Alvernia Hospital and at least 13 weeks pregnant.
² For Newborn, coverage commences when the newborn is 15 days old, or upon discharge, whichever is later.
³ For spouse of Alvernia Ladies Card Members. For details, you can speak to Aviva Relationship Consultants.

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