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Woman turned to private sector as she had to wait 5 months for colonoscopy at SGH



Madam Tan (not her real name) went to the polyclinic when she found blood in her stools in January 2021. ST PHOTO: LIM YAOHUI



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SINGAPORE - Madam Tan (not her real name), 73, went to the polyclinic in January 2021 when she found blood in her stools. She had been constipated for some weeks and laxatives had not helped.

The doctor feared she might have colon cancer and wanted her to do a colonoscopy - where an endoscope is inserted into the rectum and large intestine to check for polyps and other signs of cancer.

She was referred to a specialist at Singapore General Hospital, but the appointment for the scope was five months away, in June.

Public hospitals have had to grapple with the Covid-19 pandemic over the past two years, which led to non-urgent elective surgery being deferred while they attended the rise in Covid-19 cases.

At the last multi-ministry task force media conference, director of medical services Kenneth Mak said that public hospitals remain stretched as they deal with a backlog of non-Covid-19 patients.

It “reflects a debt that we had incurred over the last few months”, he said, adding that hospitals are now focusing again on providing care for these patients.

Fearing cancer, Madam Tan did not want to wait, and turned to Dr Desmond Wai, a specialist in liver and gastrointestinal diseases who has a clinic at Mount Elizabeth Novena Specialist Centre. He saw her on Feb 3 and did the scope within the week.

Her worst fears were realised. Not only did she have colon cancer, it was quite advanced and had spread to her liver.

Dr Wai suggested she return to the polyclinic with the results so that she could be referred to a public hospital for subsidised treatment. He assured her that other patients diagnosed with cancer whom he had sent back to the public sector were given priority and seen within a fortnight.

But Madam Tan, who is single and has only the basic MediShield Life, feared any delay might cause her cancer to spread further.

At that time, she already had one tumour in the liver, and it was big at 5cm.

Dr Wai said a five-month delay in diagnosis could have resulted in more tumours, making it more difficult to treat. But he felt an additional two weeks to get it treated would not make much material difference.

Madam Tan's younger siblings, whom she had looked after when they were young, all agreed that she should get treated immediately in the private sector, and they and their children chipped in to help defray the cost.

Dr Wai suggested she opt for the cheaper six-bed ward at Mount Alvernia Hospital, which she did. The total bill came to \$50,000 to \$60,000. MediShield Life, meant for subsidised care, paid only a fraction of the bill.

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After a few rounds of chemotherapy to shrink the tumours in her liver and colon, she was operated on in June last year and is now doing well. No further spread of the cancer has been detected.

Shortly after her surgery, she received a letter from SGH telling her that her colonoscopy had been rescheduled to November - another five-month wait.