

my Alvernia

Inspiring Healthy Living | Issue 52

Giving Hope

Mount Alvernia Hospital's Community Outreach Team spreads light and joy to vulnerable communities in need



Special Feature: Mount Alvernia
Community Outreach

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As we step into 2024, we are filled with humility and gratitude as we reflect on the milestones that Mount Alvernia Hospital has accomplished in 2023.

I wish to acknowledge the past year's accomplishments that define our collective commitment to providing quality healthcare, starting with the opening of our 10-storey maternity and paediatric building, the St Anne Mother & Child Centre. This endeavour is a culmination of four years of careful preparation and construction, demonstrating resilience in overcoming challenges, and signifying our dedication to serving mothers, children, and our future generations.

Another notable milestone is the inauguration of Icon Cancer Centre, a pivotal partnership with the Icon Group. This venture amplifies our commitment to provide cancer patients with a comprehensive continuum of care.

With these achievements as a solid foundation, we eagerly anticipate the journey that lies ahead – a journey marked by strength and energy, symbolised by the auspicious Year of the Dragon.

Congratulations to our 19 colleagues who clinched the Singapore Health Quality Service Awards 2024. Their unwavering commitment to providing outstanding service to patients and caregivers have not gone unnoticed. This accolade acknowledges and honours healthcare staff who tirelessly contribute to improving patient experiences, and we are very proud of our dedicated Mount Alvernia team.

The dawn of the new year serves as a poignant reminder of the ethos instilled by our founding FMDM Sisters. Their selfless spirit of giving, rooted in compassion, continues to shape our commitment to providing compassionate care and giving back to the community.

This legacy of giving back is steadfastly continued by our committed Community Outreach Team, who has been actively reaching out to help the underserved and vulnerable population. In this issue, we recount the history of Mount Alvernia Hospital's community outreach efforts over the years, and take a closer look at our key outreach initiatives. Additionally, we are thrilled to introduce the passionate individuals who form the heartbeat of our Outreach Team.

In the spirit of progress, I am delighted to share that the next phase of our hospital's main building development is well underway, with commendable progress. This phase includes the refurbishment and upgrading of existing facilities, with a focus on improving patient experience via a new rehabilitation centre, cardiovascular laboratory, and intensive care unit. We look forward to sharing more details as these projects near completion.

In closing, I would like to wish our readers, patients, families and colleagues an inspiring and blessed 2024, as we carry forward the enduring mantra that defines Mount Alvernia Hospital – **Serve all with Love.**



God bless.

Dr James Lam Kian Ming
CEO, Mount Alvernia Hospital

Special Feature

Mount Alvernia Community Outreach: Continuing the Enduring Legacy of the Founding Sisters

Mount Alvernia Hospital (MAH), founded in 1961 by the dedicated Sisters of the Franciscan Missionaries of the Divine Motherhood (FMDM), stands as a beacon of compassionate healthcare rooted in Catholic values. Central to its mission is a commitment to giving back to the community and serving the vulnerable, a legacy carried forward by MAH's Community Outreach Team. This section offers a look into the history and significant milestones of MAH's community outreach.



1961: The Founding Vision

In the 1950s, the founding FMDM Sisters embarked on their vision to start a private not-for-profit hospital to ease the overcrowded and understaffed public hospitals. MAH officially opened on 4 March 1961, with a mission to not only provide quality nursing care for the population, but also to give back to the community in need. This commitment remains a cornerstone of MAH's identity since its inception.

Founder FMDM Sr Angela McBrien (3rd from right) with nurses in the 1960s.



The former Assisi Hospice after relocation from Khoo Block.

1969 to 1992:

Assisi Hospice

A first major outreach milestone for MAH emerged on 25 March 1969 with the establishment of the Khoo Block, a four-storey wing built to provide a home for up to a hundred chronically ill patients in financial need.

Subsequently renamed Assisi Home and Hospice, this wing started offering respite and palliative care, and relocated to larger premises. Although Assisi Hospice was established as a separate and distinct institution in 1992, it maintains very close links with MAH.

2009:

Establishment of a Dedicated Outreach Department

Recognising the presence of other underserved communities beyond hospice care, MAH established a dedicated community outreach department to consolidate and streamline MAH's outreach activities. The department's first initiatives included the launch of a health education programme consisting of health screening and informative talks, with the purpose of raising awareness of good health among the vulnerable communities.

October 2015:

Opening of Inaugural Outreach Clinic at Enabling Village

The idea of establishing a clinic within the community outside of the hospital came to fruition. The Mount Alvernia Outreach Clinic at Enabling Village, Lengkok Bahru officially opened in October 2015, offering primary medical care at highly subsidised rates for vulnerable and disadvantaged individuals such as Persons With Disabilities, isolated seniors and low-income families staying in rental flats.

In 2021, the clinic expanded to include dental services, with customisations to serve Persons With Disabilities.



The first Mount Alvernia Outreach Clinic opened in October 2015 at Enabling Village.

OUTREACH



April 2016:

Launch of Offsite Initiatives to Bring Healthcare to the Disadvantaged

Noting that there are individuals who face challenges in accessing basic healthcare services and checks, the Outreach Team started offsite programmes to bring healthcare to these communities. The first initiatives included running mobile clinics at migrant worker dormitories and shelters, halfway houses for ex-offenders, and home visits for seniors staying in HDB rental flats.



August 2016: Opening of Second Outreach Clinic at Agape Village

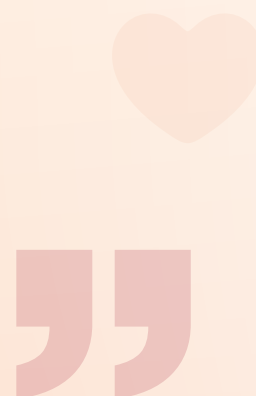
The second Mount Alvernia Outreach Clinic was set up in Agape Village, Toa Payoh. This expansion, and inclusion of dental services serve to address the oral health needs of the low-income population residing in Singapore.



Fr John Paul blessing the Mount Alvernia Outreach Clinic at Agape Village during its opening.

“Mount Alvernia Hospital is a monument to the people of Singapore for it was by their money that it came into existence.”

– Sister Angela McBrien, FMDM





September 2016: First Hospital-Based Services Case

The Outreach Team attended to its first hospital-based services case, offering specialist consultation and assistance to a pregnant transnational spouse. This initiative expanded through partnerships thereafter, starting with a collaboration with People's Association to provide cataract surgeries for seniors in Tanjong Pagar, Holland-Bukit Timah and Jalan Kayu.

June 2022: Formalising of Three Key Outreach Programmes

After a market study done by consultancy firm Bain & Co on a pro bono basis, the Outreach Team's activities were streamlined into three key programmes: Outreach Clinics, hospital-based services, and offsite initiatives. This strategic move ensured a more focused and impactful approach to address healthcare gaps in various community segments across Singapore.

December 2023:

Through the Outreach Team, MAH continues to provide essential healthcare services to the vulnerable and disadvantaged, reflecting the enduring commitment of the FMDM Sisters and the hospital's unwavering dedication to its founding mission.

Our Reach in 2023

66
Volunteers
involved

68
Special service
agencies supported



3,400
Lives touched

Scan the QR code to learn about how the Mount Alvernia Outreach Team helps the underserved communities through its three pivotal programmes; and hear the story of Mdm Yaiwong, a transnational spouse who almost lost her eyesight but now has a new lease of life, thanks to the outreach programmes.

For more information on Mount Alvernia's outreach programmes, please contact outreach@mtalvernia.sg



Scan to watch

Special Feature

The Outreach Programmes

At the core of Mount Alvernia's outreach commitment are three pivotal programmes, purposefully defined and overseen by the Outreach Team. These initiatives are structured to systematically reach diverse target segments, ensuring appropriate assistance is provided to the identified underserved and disadvantaged communities.



Mount Alvernia Outreach Clinic at Enabling Village

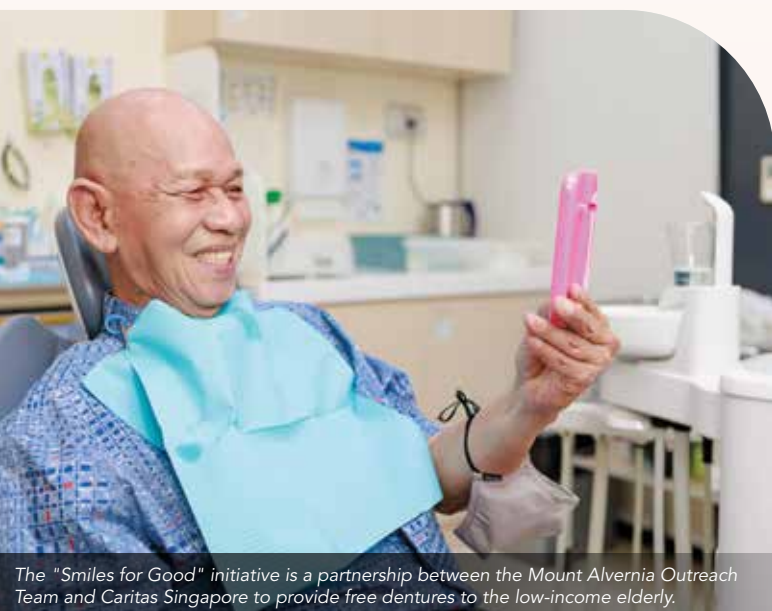


Mount Alvernia Outreach Clinic at Agape Village

1 Mount Alvernia Outreach Clinics: Bridging Gaps, Restoring Smiles

The Mount Alvernia Outreach Clinics, located in Enabling Village (Redhill) and Agape Village (Toa Payoh), consist of the Mount Alvernia Outreach Medical Clinic (MAOMC) and the Mount Alvernia Outreach Dental Clinic (MAODC). Run by the Outreach Team, the Outreach Clinics aim to provide essential healthcare services to vulnerable and disadvantaged individuals at subsidised rates.

MAOMC provides general practitioner consultation and medication for the management of common illnesses, as well as chronic conditions such as diabetes and hypertension, while MAODC provides basic dental services such as routine scaling, polishing, filling and extraction.



The target groups of patients include Persons with Disabilities (PWDs), vulnerable children and families (in particular vulnerable transnational families), isolated seniors, and other disadvantaged segments of the local resident population.

Given that a significant number of patients who visit the Outreach Clinics are PWDs, Outreach Clinic staff are trained to display calmness and patience so that both patients and caregivers can feel more comforted and assured.

The Outreach Clinics, besides providing medical and dental care, also collaborate with various social service agencies to serve their members' needs. One such initiative is the Smiles For Good project, a partnership with Caritas Singapore to provide free dentures for low-income individuals.

The "Smiles for Good" initiative is a partnership between the Mount Alvernia Outreach Team and Caritas Singapore to provide free dentures to the low-income elderly.

The work of the Outreach Clinics also extends to addressing transport challenges of its PWD beneficiaries. Recognising that some PWDs are unable to go to the Outreach Clinics due to their mobility challenges and disabilities, the Outreach Team engaged a team of kindhearted volunteer drivers to ferry PWD beneficiaries to their appointments.

“ The essence of our Outreach Clinics lies in providing not just medical and dental care, but fostering an environment of compassion and support. ”

– Ms Anthea Neo, assistant director for community outreach



The Outreach Team engages a team of volunteer drivers to provide free transportation for PWDs to and from the Outreach Clinics.

Do you know?

The Mount Alvernia Outreach Dental Clinic at Enabling Village provides a wheelchair tilter, allowing wheelchair-bound patients to receive treatment comfortably in their wheelchair without the need for transfer to a dental chair. On the tilter, the patient's wheelchair can be reclined to a position that is most comfortable for both patient and dentist.



2 Hospital-Based Services for Vulnerable Transnational Spouses

The rise in transnational marriages in Singapore, where a foreigner relocates to start a family with a Singaporean, has brought to light unique challenges for the foreign spouse.

As foreigners, transnational spouses do not receive any government health subsidies, presenting a considerable hurdle for vulnerable low-income transnational families when they have health issues.

Recognising this gap, the Mount Alvernia Outreach Team started a hospital-based support programme to help financially struggling transnational spouses referred by social service agencies.

This support includes maternity assistance for transnational mothers for their prenatal and childbirth needs; diagnostic services for transnational spouses who have undiagnosed health symptoms impacting daily life; and non-complex surgeries such as cataract removal and hand surgery.

In these instances, in addition to facilitating the waiver of all hospital charges in Mount Alvernia Hospital (MAH), the Outreach Team engages on-campus medical specialists to offer their consultation and surgical services pro bono. Beyond financial aid, the Outreach Team prioritises emotional support by having a team member accompany beneficiaries to consultations, ensuring a seamless process while offering reassurance to the spouses that they are not navigating these challenges alone.

We explore the story of two transnational spouses who have found support through the hospital-based outreach programme.

FATIMA LEGRARI, 33, MOROCCAN

Moroccan Fatima Legrari, 33, and her Singaporean husband Hijji Bournadiane, 53, met and fell in love before COVID-19 hit, and have been married for four years. Hijji had a good job as an admin manager at a travel agency then – until the pandemic almost pulverised the travel industry.

In June 2021, Hijji was retrenched. Unable to find a full-time job amidst the economic slowdown, Hijji became a freelance web designer, earning a meagre \$400 per month – hardly enough for the couple and their daughter Maryam, now 2 years old. Their financial struggles deepened when Maryam developed multiple allergies, requiring regular visits to KK Women's and Children's Hospital.

An anxious Hijji shared, "I faced sleepless nights, wondering how we would manage medical bills and make ends meet."

When Fatima discovered she was pregnant with her second child, her prenatal care presented further financial strains on the family as being a foreigner, Fatima was not entitled to any government subsidies.

The family's unfortunate situation was brought to the Outreach Team's attention when the Ministry of Social and Family Development's Social Service Office at Jalan Besar sought the Team's assistance.



Hijji and Fatima with 2-year-old Maryam and Baby Asmaa.



As the Outreach Team has an established Transnational Maternity Assistance Programme, they were well positioned to help Fatima and her family. This vital support included arranging for essential prenatal consultations and tests with an obstetrician, with MAH and the obstetrician waiving the hospitalisation, delivery, and professional charges entirely, alleviating a significant financial burden for the couple.

Post-delivery, the Outreach Team also engaged a paediatrician to tend to their newborn pro bono, while MAH's Clinical Pastoral Care counsellors provided Fatima with counselling and emotional support during her hospital stay.

On 2 August 2023, amidst adversity, the couple welcomed a healthy baby, Asmae.

Fatima and Hijji's story highlights the transformative impact of community support, showcasing how the Transnational Maternity Assistance Programme can turn challenges into triumphs, uplifting those in need.

A healthy Baby Asmae greeted the world on 2 August 2023.

LAI AH CHAN, 84, MALAYSIAN

Mdm Lai Ah Chan, a Malaysia citizen, came to Singapore more than 60 years ago, and settled down here when she met her Singaporean husband. When her husband passed away, she found herself facing financial challenges as being a foreigner on a Long Term Visit Pass, she has neither a Central Provident Fund account nor any form of subsidies from the government, leaving her without a reliable source of income.

To add to her financial concerns, she has hypertension as well as severe cataracts in both eyes which greatly affected her daily routine. She recounted, "My vision was so bad that I did not dare to step out of the house." Unfortunately, with no health insurance or government subsidies, she was unable to afford surgery to correct her eyesight.

The Mount Alvernia Outreach Team stepped in to help when they received information about Mdm Lai's circumstances. As the primary concern was Mdm Lai's eyesight, the Outreach Team swiftly engaged an ophthalmologist who performed a cataract procedure on Mdm Lai, waiving consultation and surgery fees. MAH covered hospitalisation and hospital-related charges. Mdm Lai's hypertension is being managed at the Mount Alvernia Outreach Medical Clinic at a highly subsidised rate.

With her vision restored, Mdm Lai now enjoys a clearer view of the world, and can take better care of herself.

Said Ms Clara Teo, senior manager for community outreach, "Supporting Mdm Lai was not just our duty but our privilege. We are happy to make a positive impact on the lives of underserved transnational spouses like her."



A smiling Mdm Lai Ah Chan after her cataract surgery.

OUTREACH

3 Offsite Programmes: Taking Healthcare Beyond Clinics

Many vulnerable individuals, such as Persons With Disabilities (PWD) or the elderly, find it challenging to go to the clinics for health and dental checks due to their mobility difficulties, health conditions or other constraints.

Recognising this issue, the Mount Alvernia Outreach Team goes the extra mile to bring healthcare services closer and more accessible to this population, ensuring that their health is not neglected.

Initiatives include collaborating with various social service agencies to regularly conduct complimentary health screening and flu vaccination services at the agency's premises where their members are familiar and comfortable with. Individuals who are found to have undiagnosed conditions during the offsite programmes will be referred to the Mount Alvernia Outreach Medical Clinic for further investigations.

Here is a look at some offsite activities the Outreach Team carries out to ensure that essential healthcare reaches the disadvantaged community.



Flu vaccination for SPD members.



Flu vaccination for members of the Singapore Association of the Visually Handicapped.

Flu Vaccinations for PWDs, Seniors and Caregivers

The Health Promotion Board recommends annual flu vaccinations to safeguard against the common flu. Flu vaccinations are even more important for PWDs and the elderly who have weakened immune systems, making them more vulnerable to viruses and could suffer worse complications from a flu.

In view of this, the Outreach Team conducts complimentary annual flu vaccinations for members of various social service agencies and centres at their respective premises. In the year 2023, the Outreach Team successfully administered flu vaccinations to nearly 900 individuals, including PWDs, seniors, their caregivers and staff working at the centres and disability homes, ensuring their protection against the flu.

Complimentary Offsite Health Screening for PWDs

PWDs are reluctant to seek help for any health symptoms due to their mobility difficulties, particularly when they are wheelchair-bound, and specialised transportation is needed. Financial constraints also contribute to their hesitancy in spending on health checks.

To address this issue, the Outreach Team collaborates with several social service agencies to conduct complimentary offsite health screenings at their respective premises for their members, and some for their members' caregivers too. Members who need follow-up care based on their screening results are given the option to receive further checks and management at the Mount Alvernia Outreach Medical Clinic or with their family doctor.

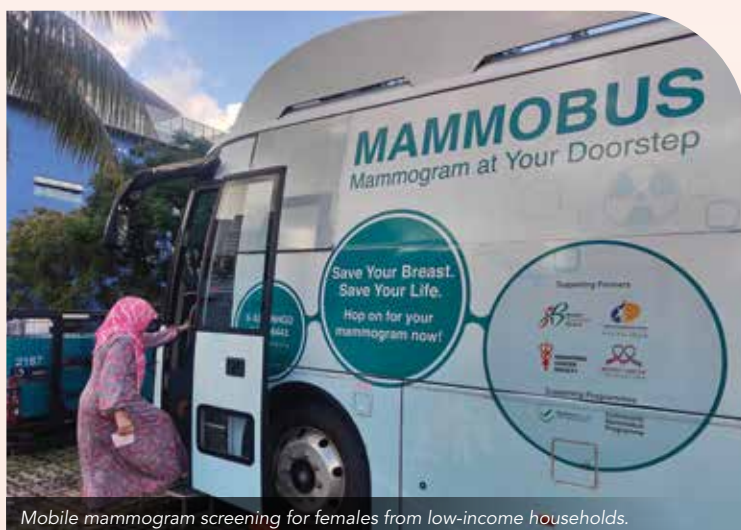
In 2023, the Outreach Team carried out health screening for more than 270 PWDs and caregivers from 5 different social service agencies.



Health screening for individuals with intellectual disabilities at the IDHealth Health Fair.



Health screening for members of the Cerebral Palsy Alliance Singapore.



Mobile mammogram screening for females from low-income households.

Mammobus: Mobile Mammogram Screening for Rental Flat Residents

While mammogram screening was widely available at polyclinics, cost was a hindrance to females from low-income households. Many were also busy caring for their children or working hard to supplement their families' income, leaving them with no time to go for mammogram screening.

Working with Beyond Social Services, the Outreach Team brought complimentary mammogram screening to female Singaporeans and Permanent Residents staying in rental flats near the Mount Alvernia Outreach Clinic at Enabling Village.



Special Feature

Meet the Outreach Team

Discover who are the team members driving Mount Alvernia's community outreach initiatives as each team member shares their thoughts on their journey with the Outreach Team.



Han May Ching

Director, Corporate Development and Human Resources

“As a not-for-profit Catholic hospital and living on our founding FMDM Sisters' legacy, it aligns with our values to proactively give back to the community. This commitment came in the form of our Community Outreach Department.

When we first started a dedicated Community Outreach Department in 2009, our outreach efforts focused on raising health awareness. Today, beyond health education, our outreach efforts encompass running the Outreach Clinics and partnerships with social service agencies to reach more underserved communities. We have clear target segments with tailored programmes to address their needs.

As we enter 2024, we aspire to sustain and build upon this momentum, advancing our commitment to touch more lives among the vulnerable population.”

Ms Han during a mobile flu vaccination for residents of Pertapis Senior Citizens Fellowship Home.



Low Kar Yin

Senior Executive, Community Outreach

“It can be challenging for PWDs to visit the polyclinics due to mobility issues or their health condition. So my role includes working with social service agencies to provide flu vaccination and health screening for their PWD members at the agencies’ premises. This responsibility is fulfilling as it ensures PWDs receive necessary protection against chronic conditions. Often, the individuals we help think they are in a dark tunnel with no way out, but when they discover our Outreach Team can offer help, it’s like seeing light at the end of this tunnel. It is a very great feeling to know that we can help and instill hope in their lives.”



Nina (left) and Dorine

Nina Widjaja

Dental Surgery Assistant, Mount Alvernia Outreach Dental Clinic

“Working in the Outreach Clinic has exposed me to many patients from vulnerable communities, especially the PWDs. Communicating with PWD patients requires more time and patience, and interacting with them involves understanding their individual needs and the challenges they faced from their specific disability. But all this is worth it when we see the patients taking better care of their teeth and returning for subsequent visits.”

Dorine Tan

Dental Surgery Assistant, Mount Alvernia Outreach Dental Clinic

“I have learned a lot about providing care for disadvantaged patients, particularly the PWDs. It’s easy to assume we know their needs, but they actually do not want sympathy. They want to express their own needs, and be treated like any other patient. Understanding their extra sensitivity to how others view them has shaped my approach when serving them. I am more tactful and considerate in my interactions with both the PWD patients and their caregivers. This makes my job very meaningful, knowing that I can make them feel more comfortable and reassured while getting their dental needs met.”

OUTREACH

Anita John

Dental Surgery Assistant,
Mount Alvernia Outreach Dental Clinic

“Many patients who visit the clinic are unaware of their oral condition, so after their consultation and treatment, I make it a point to explain the dentist's recommendations, and emphasise the importance of following the treatment plan. It's very gratifying when patients acknowledge and commit to following the advice. This motivates me to reach out to even more vulnerable individuals who neglect their health amidst their many life challenges.”



Anita (left) and Leny



Koo Hoong Mun

Senior Officer, Community Outreach

“I was involved in mostly events that cater to a bigger crowd, and there wasn't much interaction with beneficiaries on a one-on-one basis. But once, I had the opportunity to witness the impact of our work from start to end, when I was tasked to be the coordinator for a case involving an elderly transnational spouse who had a severe eye condition that required surgery to prevent blindness. Seeing her initial worry of potentially going blind, to her becoming more cheerful and confident to go about her life, is something that serves as a constant reminder of the important and meaningful work that we do.”

Yang Yuzi

Executive, Community Outreach

“I enjoy talking to the patients I accompany, or rather, listening to them talk. Some of them have shared that they didn't have anyone to talk to. Some even apologised, thinking they were boring me. When beneficiaries choose to open up and share their thoughts and worries with me, it is a feeling I can't put into words. It's also really nice to feel the optimism some of them choose to have, even when they have every right to be pessimistic about life given their circumstances.”



Yuzi (left) with a transnational spouse who needed medical assistance.



Leny Cabugao Ahmat

Dental Surgery Assistant, Mount Alvernia Outreach Dental Clinic

“ There was once a foreign domestic helper who walked in to the clinic without an appointment because she was in severe pain. I managed to fit her in for dental treatment. I found out that the helper was the sole caregiver for an isolated senior. Both the helper and senior repeatedly told me how thankful they were for the Outreach Clinic. This experience made me realise that by helping these helpers, we also indirectly support the seniors who rely heavily on them for care. This makes my job even more meaningful. ”



Clara (left) with Mdm Lai whose story can be found on page 11.

Clara Teo

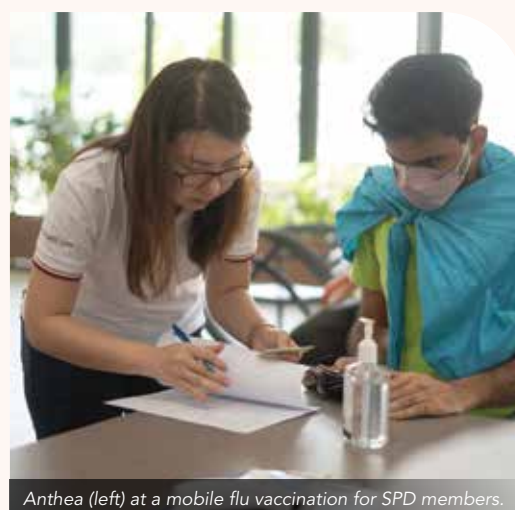
Senior Manager, Community Outreach

“ A friend asked me if it's depressing to be in Outreach since we often had to witness challenging circumstances and unfortunate events. My answer was an instant no. Instead, it made me appreciate more the simple things in life – being healthy, and being mobile. My encounters with beneficiaries may be brief. I cannot change their lives or erase any bad experiences they had in the past. But helping them regain their health is bringing them one step closer to achieving whatever means the most to them. Knowing this is enough for me to continue helping the vulnerable and marginalised communities. ”

Anthea Neo

Assistant Director, Community Outreach and Business Analysis & Strategic Planning

“ When I meet up with the social service partners, they recount the difficulties their beneficiaries face, for instance, how hard it is for them to get even basic dental care, or how transnational spouses have no financial means at all to seek medical help. These gaps really drive us to think of how we can serve the community better, and push us to experiment, evolve and expand our programmes to address those needs. ”



Anthea (left) at a mobile flu vaccination for SPD members.

Congratulations to Winners of the Singapore Health Quality Service Awards 2024!



Guest of Honour Dr Janil Puthucherry (5th from right), MAH CEO Dr James Lam (5th from left) and MAH Director, Corporate Development and Human Resources Ms Han May Ching (4th from left) with award winners of MAH.

In a ceremony held at the National University of Singapore on 23 January 2024, the Singapore Health Quality Service Awards 2024 honoured and celebrated the exceptional contributions of healthcare professionals.

Themed "Celebrating Healthcare's Brightest Stars" this year, the annual event organised by SingHealth Duke-NUS Academic Medical Centre celebrates those who tirelessly improve patient experiences. The ceremony, graced by Guest of Honour Dr Janil Puthucherry, Senior Minister of State for Health, saw the deserving winners from Mount Alvernia Hospital (MAH) stepping into the limelight.

Heartiest congratulations to the 19 esteemed staff of MAH who clinched the awards, showcasing their unwavering commitment to providing outstanding service to patients and caregivers. Their dedication reflects the essence of healthcare excellence, and we applaud them for being the bright stars of the healthcare galaxy.

Star Award

Loon Foong Lin Jessie, Diagnostic Imaging

Gold Award

Chong Pui San Yvonne, CQII

Ong Jin Mei, CQII

Sy Yu Pei, CQII

Lee Lucksmie Arroyo, CQII

Norhanisah Binte Mohamed Roslan, CQII

Bernadeth Requisa Buendia, St Michael Ward

Raganit Maybelline Gonzales, Day Ward

Glenda Lor Cabansay, St Michael Ward

Eng Lee Lan, St Michael Ward

Silver Award

Zoe Loke Yin Ling, St Michael Ward

Pumaren Bituin Pumaren, St Michael Ward

Seet Lay Tin, Parentcraft

Ivy Tan Siew Lian, Nursing Administration

Ooi Bee Choo Jenny, Nursing Administration

Lee Xiu Juan Angeline, Nursing Administration

Clemente Jhoeanna Lyn Sanchez, St Nicholas Ward

Roobaneswary Amurthalingam, Day Ward

Aye Moh Moh Khaing, Day Ward

Welcoming Mount Alvernia Hospital's First Baby of 2024

At St Anne Mother & Child Centre, the arrival of 2024 brought not only the dawn of a new year but the first cries of Baby Brilynna, the hospital's inaugural newborn of the year. Born at 12:03am on 1 January 2024 to first-time parents, Mr Huang and Ms Zhang, the baby girl weighed 2.975kg and measured 50cm.

Despite the slight delay from the original due date of 27 December 2023, the Huang family welcomed their precious addition after 23 hours of labour. Mr Huang, a 45-year-old professional in the manufacturing industry, and Ms Zhang, a 35-year-old brands director, met 2.5 years ago at a marketing event, exchanging vows in January 2022.

Surrounded by the warmth of family, Ms Zhang expressed gratitude to her supportive husband and caring parents, whose support paved the way to the birth of their healthy baby.

Mount Alvernia Hospital's director of corporate development and human resources, Ms Han May Ching, presented the family with generous gifts from sponsors. The gifts included a GB Qbit stroller and Jujube diaper pouch from Global



Ms Zhang with precious Baby Brilynna.

Outsource Solution, gift vouchers and hampers from Beauty Mums & Babies, Noel Gifts, and Pigeon Singapore, as well as a \$188 red packet from the hospital, symbolising the community's shared joy and best wishes for Baby Brilynna.

SG Hawker Opens at Mount Alvernia Hospital

In an exciting development towards enhancing the overall experience for patients and visitors, Mount Alvernia Hospital warmly welcomes SG Hawker, a contemporary kopitiam, to its premises. Taking over the space on level one of the hospital previously occupied by Café 820, SG Hawker brings a vibrant culinary experience to hospital visitors.

Conceptualised by Fei Siong Group, a powerhouse in Singapore's food and beverage industry, SG Hawker boasts 15 brands of hawker-style cuisine under its umbrella. The food outlet officially opened its doors on 7 December 2023, offering a diverse range of local street delights.

Featuring four stalls, including Encik Tan (halal), 85 Redhill, Nam Kee Pau, and a dedicated drinks stall, SG Hawker caters to varied tastes with popular local favourites. Whether craving a hearty meal or a quick snack, hospital visitors can



SG Hawker serves a range of local delights.

now indulge in a culinary journey right within the comforting walls of Mount Alvernia Hospital.

Mount Alvernia Hospital and ACMI Unite for Transnational Families' Year-End Celebration



Volunteers from the Franciscan Young Adults organised a night of fun and games for the transnational families.

In a heartwarming collaboration between Mount Alvernia Hospital (MAH) and The Archdiocesan Commission for the Pastoral Care of Migrants and Itinerant People (ACMI), transnational families found a special reason to celebrate the year-end. Held on a Saturday, 16 December 2023, this special celebration brought together families from Vietnam, Indonesia, the Philippines, and India, emphasising the joy of Christmas, family bonds, and a newfound focus on health.

The primary objective of this event was to bring together low-income transnational families and, in addition to celebrating Christmas, shed light on the importance of a healthy lifestyle. For the first time, ACMI collaborated with Mount Alvernia Hospital's Community Outreach Team and Nutrition and Dietetics Department, marking a significant step in fostering health awareness within this community.

At the beginning of the event, dietitians from MAH, Tan Shiling and Aileen Ling, conducted a workshop on "Affordable Healthy Living" for the attendees. Covering the why, what, and how of maintaining a healthy lifestyle, the session included a live cooking demonstration for one of four healthy recipes shared with the audience.

Sr Sylvia Ng, representative of ACMI, stated, "This informative segment empowered these families with valuable insights, enabling them to make informed decisions about their food consumption. This is beneficial, as their dietary choices not only affect their financial management, but also contribute to improved health, reducing the likelihood of medical issues."

Pham Thi Duyen, a Vietnamese transnational spouse, expressed hope for her daughter's healthier diet, reflecting the sentiment of many attendees. Filipino Ladia Gilda Sison found solace in the shared struggles of parenting, "I was heartened to learn that I am not alone, as other parents are also facing similar struggles about feeding children who are picky with food."



Dietitians Aileen Ling and Tan Shiling performing a live cooking demonstration for transnational participants.

Following the health segment, the families, with their children, gathered for a Christmas party filled with fun, games, a lucky draw, and a delightful Christmas buffet dinner organised by ACMI in collaboration with volunteers from the Franciscan Young Adults.

In conclusion, this event not only allowed vulnerable transnational families to revel in the festive holiday spirit but also provided a platform for transnational spouses to connect, support one another, and gain valuable health insights. MAH is thankful to have been part of this heartening celebration, contributing to the well-being and unity of these families.



From left: Tan Shiling (Senior Dietitian), Yang Yuzi (MAH Outreach Team), Sr Sylvia Ng (ACMI), Aileen Ling (Dietitian), and Clara Teo (MAH Outreach Team)



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Programme Highlights

- Introducing Solids
- Demonstration Using Various Food Textures
- Practical Session on Preparing Baby Food

Workshop Details (please select 1 date)

Schedule:

March	9 March (Saturday)	10am - 12pm
	22 March (Friday)	10am - 12pm
April	6 April (Saturday)	10am - 12pm
	26 April (Friday)	10am - 12pm
May	3 May (Friday)	10am - 12pm
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Cost: \$54.50* per couple for 1 session
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Scan to register

What Every Woman Should Know About Cervical Cancer

The 10th most common cancer that affects women in Singapore, cervical cancer is a serious but largely preventable disease. Dr Wong Wai Loong, senior consultant gynaec-oncologist at Mount Alvernia Hospital, elaborates on the must-knows of cervical cancer.



Dr Wong Wai Loong
Senior Consultant Gynaec-oncologist
STO+G Women's Health Specialists
St Anne Mother & Child Centre #04-84
Mount Alvernia Hospital



Why is regular cervical cancer screening important?

90 per cent of cervical cancer cases are caused by the Human Papilloma Virus (HPV), which is categorised into high risk and low risk strains. Only the high risk strains of HPV lead to the development of cervical cancer.

It takes many years from the time of HPV infection till the development of cancer.

The pre-cancerous changes to the cervix, known as cervical intraepithelial neoplasia (CIN), is asymptomatic, so you may not be aware that there is anything wrong.

However, this stage is very treatable and has a high chance of cure if detected early, which is why it is important to go for screening regularly. Regular screenings are pivotal in the early detection of abnormalities, enabling timely intervention and enhancing the chances of successful treatment.

Screening for cervical cancer should begin from 25 years in women who have previously engaged in sexual intercourse.

What are the screening methods for cervical cancer and the differences between them?

There are two main methods to screen for cervical cancers: A HPV test and PAP smear. During these procedures, a speculum is inserted through the vagina to visualise the cervix, followed by the insertion of a brush to collect cells for analysis.

The HPV test aims to detect presence of the high risk strains of the virus which may cause cancer, while a PAP smear is to identify any abnormal cells that may indicate the presence of pre-cancerous or cancerous conditions.

Women aged 25 to 29 should go for a PAP smear once every three years to detect abnormalities in cervical cells, while those 30 years and above should go for a HPV test once every five years.

What recent advancements are there in cervical cancer screening technologies?

There are self-sampling kits available at certain gynaecologists' clinics. Samples are obtained in the clinic where there is no need for a speculum examination. The accuracy of such kits is comparable to HPV tests performed by doctors.

In future, we hope that these kits will be readily available and can be administered in the comfort of one's home. This convenience will increase the rate of screening.

What common misconceptions do women often have about cervical cancer?

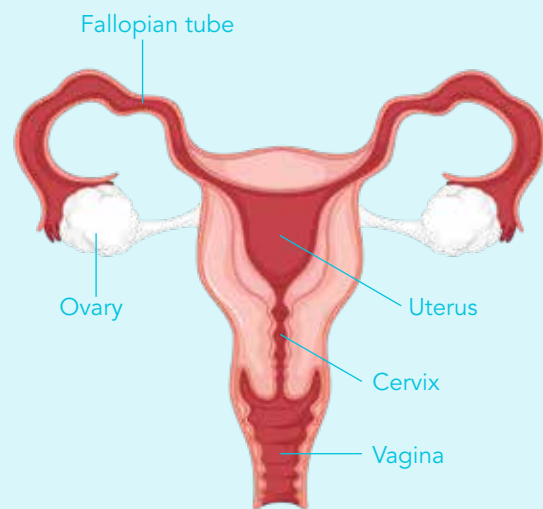
A common misconception is that cervical cancer is hereditary. It is not. It is caused by high risk HPV strains.

Many also think that once they have taken the HPV vaccine, there is no need to do PAP smears and HPV screenings anymore. This should not be the case. Screening is still essential even after one has had the HPV vaccination.

Vaccination only prevents 90% of HPV infections. There is still a remaining 10% of infections that could develop into cancer, and these can only be detected by screening.

People also think that HPV is a sexually transmitted disease but it is not classified as one. While HPV is spread through sex, it is usually a mild infection and can resolve on its own. This does not mean that all HPV strains lead to cancer.

Where is the cervix, and what are its functions?



The cervix is the lower, narrow part of the uterus that opens into the vagina. The cervix serves several important functions, including producing cervical mucus to influence fertility chances, dilating during labour for childbirth, and safeguarding the uterus from bacteria and foreign objects.

What lifestyle habits can women adopt to reduce the risk of developing cervical cancer?

To minimise the risk of developing cervical cancer, women can adopt several good lifestyle habits.

- **Stop smoking.** Quitting smoking is crucial, as smoking weakens the immune system and may make one more susceptible to the HPV.
- **Delay the age of first sexual intercourse.** Delaying the age of one's first sexual intercourse can be beneficial, as it may reduce the exposure to HPV.
- **Avoid multiple sexual partners.** This is essential, as it decreases the chances of encountering different strains of HPV.
- **Screen regularly.** Going for regular screenings, such as PAP smears and HPV tests, is vital for early detection and intervention.
- **Maintain a healthy lifestyle.** A balanced diet, regular exercise and optimal stress management supports one's overall well-being.



Is it time for a knee replacement?

As one ages, an unwelcome companion often emerges – persistent knee pain. For some, this discomfort impacts not just their daily activities, but mobility itself, prompting the question: Is it time for a knee replacement? Dr Alvin Tan Chin Kwong, orthopaedic surgeon, offers clarity on what a knee replacement surgery is, the medical conditions necessitating it, and modern procedures and recovery approaches available.



Dr Alvin Tan Chin Kwong
Orthopaedic Surgeon
Pinnacle Orthopaedic & Sports Centre (Alvernia)
Medical Centre D #05-55
Mount Alvernia Hospital



When that knee pain significantly impairs daily activities, it may be time for a knee replacement.

Understanding knee replacement

Knee replacement surgery, also known as knee arthroplasty, is a surgical procedure where a damaged knee joint is replaced with an artificial implant.

It is often performed for conditions such as osteoarthritis, rheumatoid arthritis and other inflammatory arthritis. It may also be recommended in other conditions such as osteonecrosis (when bone tissue dies) and occasionally, even for an acute fracture when the injury cannot be treated with a surgical repair.

The purpose of a knee replacement is to relieve pain, restore function, and to correct any abnormalities in the alignment of the lower limb. Dr Tan highlights, "When the pain in your knee is causing significant impairment to your daily activities such as walking, jogging, stair climbing and squatting, it may be time to consider a knee replacement surgery."

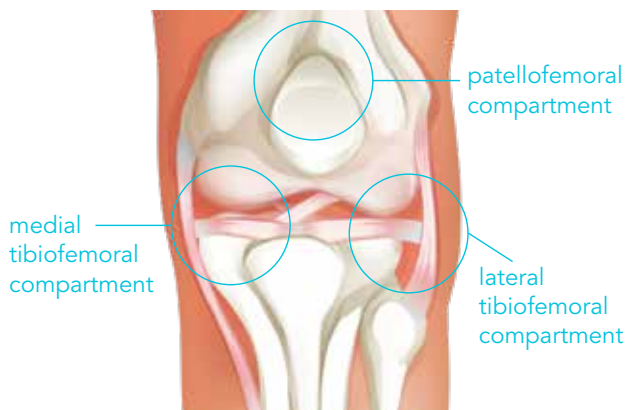
Many patients are worried, or have been told, that they are too young for a knee replacement surgery. Dr Tan dispels this myth, asserting that while there may be problems with the longevity or failure of an artificial knee implanted into a very young patient, there is actually no cut-off age.

“ Total knee surgery is highly successful and most modern implants have been shown to last 15 to 20 years. In addition, measures such as computer aided and robotic surgery have been shown to potentially improve the longevity of implants in young patients. ”

– Dr Tan

Choosing the right surgery

The knee joint is divided into three compartments — the medial tibiofemoral compartment (inside of the knee), lateral tibiofemoral compartment (outside of the knee) and the patellofemoral compartment (kneecap).



When all three compartments are affected by the arthritis, a **total knee replacement** is usually performed. However, when only one or two of these compartments are affected, then a **partial knee replacement** emerges as a viable option.

In a total knee replacement, bone and cartilage in all three compartments are removed and replaced with a prosthesis.

For a partial knee replacement, only the cartilage and bone in the affected compartment are removed to accommodate the artificial joint. The remaining cartilage, bone and ligaments in the other compartments are left untouched.

The decision on whether to perform a total or partial knee replacement also depends on how severe the deformity of the knee is, the integrity of the knee ligaments, and the patient's overall health and lifestyle.

Both total and partial knee replacement can be carried out through conventional or robotic assisted surgery.



Regular exercise strengthens the muscles that support the knees.

Optimising recovery for patients

A comprehensive, evidence-based approach known as Enhanced Recovery After Surgery (ERAS) is the modern approach used to allow the patient to recover after surgery quickly, while keeping the patient comfortable and safe. Commencing with pre-operative optimisation and prehabilitation, ERAS ensures that the patient and the knee are in the best condition to benefit from surgery.

“Intraoperatively, we employ a multimodal approach to analgesia to keep patients pain-free and comfortable, facilitating immediate postoperative rehabilitation, and avoiding complications from prolonged bed rest and hospital stay,” Dr Tan elaborates.

With advanced surgical techniques and minimally invasive procedures, downtime can be minimised. Most patients can walk on the same day after a total knee replacement, although Dr Tan recommends using a walking stick for about four to six weeks. The surgical wound itself will take around two weeks to heal.

The typical absence from work can span two months, although those with more sedentary jobs may resume work in as little as three weeks.

Recovery for a partial knee replacement can be expected to be even faster.

Top 5 tips to prevent knee problems



1. **Maintain** a healthy weight to reduce stress on the knees.
2. **Engage** in regular exercise to strengthen the muscles that support the knees.
3. **Use** proper techniques and equipment during sports or physical activities.
4. **Manage** existing health conditions, such as arthritis, with medical guidance.
5. **Seek** medical help if injured to get treated early.



A UTI is one of the most common bacterial infections in children.

Tiny Troubles: Urinary Tract Infections in Children

It is crucial to treat urinary tract infections (UTI) in children to prevent them from developing into more serious complications. It is also important to evaluate for causes that may lead to recurring UTIs. Dr Lim Kwang Hsien, a consultant paediatrician from Mount Alvernia Hospital explains more on how UTIs affect children, the importance of early detection, and what parents can do to reduce the risk of it happening.



Dr Lim Kwang Hsien
Consultant Paediatrician
Kinder Clinic Pte Ltd
Medical Centre A #06-03/04
Mount Alvernia Hospital

What is a urinary tract infection?

The urinary tract is a system that carries urine out of the body. It starts from the kidneys down the ureter into the bladder, and finally through the urethra. A UTI is an infection of any part of this system, and is usually caused by a bacterial infection. The infection happens when bacteria enter the urethra, commonly from the skin around the groin, and travel up the urinary tract and begin to grow.

Children, like adults, are also prone to getting a UTI. In fact, "UTIs are one of the most common bacterial infections in children", says Dr Lim.

How does UTI happen in children?

The majority of UTI cases in children are caused by hygiene issues.

However, some children with UTIs have underlying abnormalities of the kidneys or urinary tract present at birth that cause them to have urinary tract infections more easily.

Dr Lim advises that it is important to diagnose and treat UTIs as early as possible to prevent long term kidney damage. In young infants, there may be a risk of the bacteria spreading from the kidneys into the bloodstream. This can lead to life-threatening conditions that can cause organ failures and even death.

When discovered early, UTIs can be easily treated with the right course of antibiotics. Some children, especially younger infants, may need to be admitted for intravenous antibiotics.

Not diagnosing UTIs and leaving them untreated can also mean missing any underlying congenital anomalies of the kidneys or urinary tract that need to be corrected to prevent recurrent UTIs.

Hence, Dr Lim emphasises, "All babies diagnosed with UTIs should undergo further medical examinations to ensure that they do not have an underlying kidney condition that will predispose them to recurrent UTIs."

How can parents identify UTI symptoms early?

Identifying UTIs in children is not always straightforward, especially in infants and toddlers who may show no obvious symptoms.

Oftentimes, infants and toddlers will present with fever with no associated urinal symptoms, but accompanied by the following non-specific signs:

- Fussy behavior
- Feed refusals
- Crying during urination

Older children may have the following symptoms:

- Verbalising pain during urination
- Accidental urine leaks
- Difficulty in controlling urination
- Foul-smelling urine
- Lower back pain

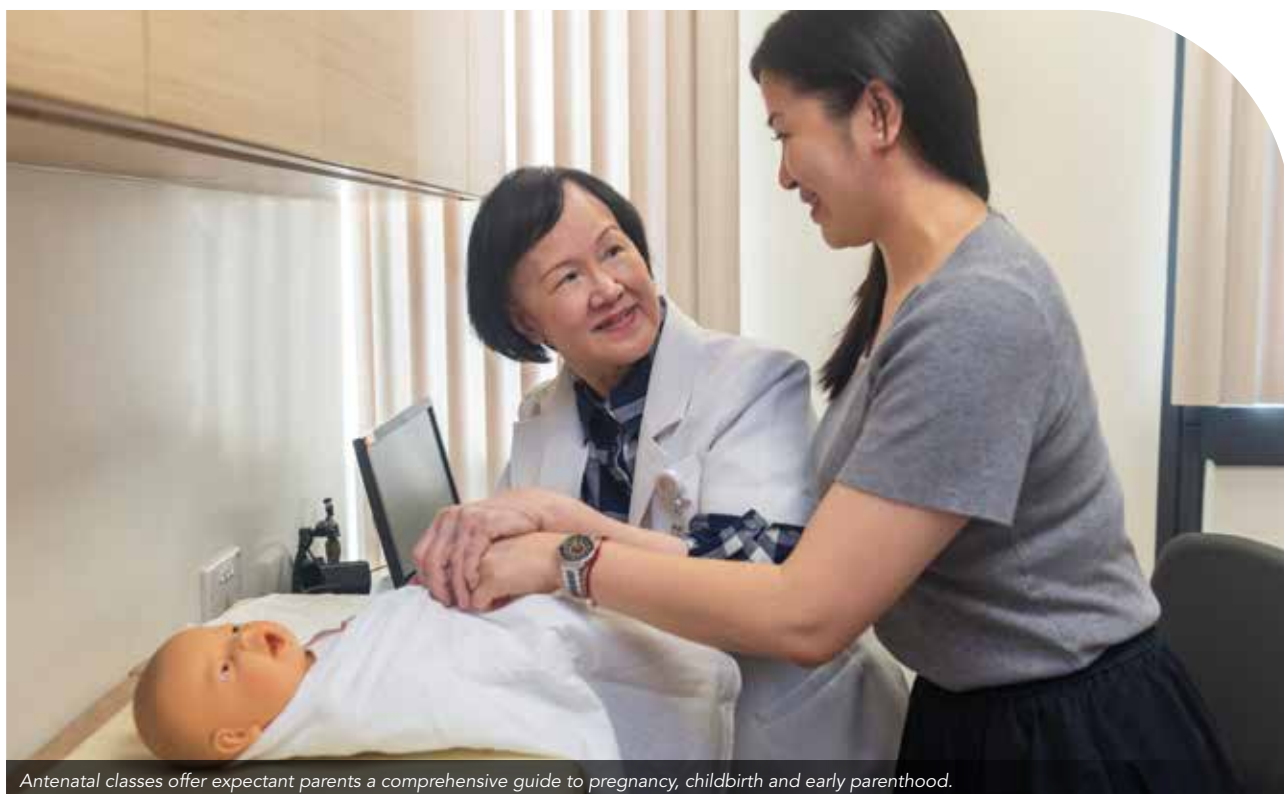
Recognising these symptoms is of utmost importance as it serves as a crucial signal for parents to take swift action and seek timely medical attention to prevent potential complications associated with UTIs.



Tips to prevent UTIs in children

- 1 Frequent diaper changes.**
For infants and toddlers on diapers, change their diapers frequently and keep their genital areas clean during diaper changes.
- 2 Teach proper cleaning techniques.**
For older girls, teach them how to clean their genital areas from front to back, not back to front, to prevent bacteria on the anal area from being transferred to the urethra.
- 3 Minimise bubble baths and avoid long tub baths.**
Bath products may contain irritants that can disrupt the natural balance of bacteria in the genital area, increasing the child's susceptibility to UTIs. Prolonged exposure to water in the tub also contributes to a moist environment that could facilitate bacterial growth.
- 4 Consider circumcision for boys.**
This is especially important if they have a history of UTIs, as the foreskin can trap and create a potential breeding ground for bacteria.
- 5 Avoid and treat constipation.**
Constipation may obstruct proper urine flow. Urine left in the bladder can be the perfect place for bacteria to grow and cause infection.

In conclusion, by understanding more about UTIs, parents can take a proactive stance and become key players in safeguarding their children's urinary health.



Antenatal classes offer expectant parents a comprehensive guide to pregnancy, childbirth and early parenthood.

Antenatal Classes: What You Will Learn and Why They Matter

Discover why and how antenatal classes help expecting couples be more informed and confident as they step into the world of parenthood.

Antenatal or prenatal classes, also known as childbirth education classes, serve as an invaluable resource for expectant parents, offering a comprehensive guide to the various facets of pregnancy, childbirth, and early parenthood.

A guiding hand for expectant parents

Expectant parents, particularly first timers, may be unsure of what is to come. Parents-to-be may rely on the advice of others who have gone through the process before. But what others have gone through may not be necessarily the same for each couple.

Here is where antenatal classes can help parents prepare for labour, birth of the baby, breastfeeding, and caring for a newborn baby. They are specially curated sessions designed to equip parents-to-be with the knowledge and skills essential for the transformative journey into parenthood.

Key topics covered in antenatal classes:

- Recognising the signs of labour
- When to go to the hospital
- What happens during the process of labour and birth
- Pain management during childbirth
- Induction of labour
- Relaxation techniques
- Different kinds of birth and interventions (e.g. normal, assisted birth and caesarean section)
- Breastfeeding techniques including latching and positioning, and common breastfeeding issues
- Caring for the baby including bathing, sterilisation of feeding equipment, how to handle a crying baby, common problems of a newborn, and newborn safety
- Emotional experiences during pregnancy and childbirth
- Self-care after childbirth
- Healthy post-delivery diet tips
- Roles of each partner
- Bonding with the baby

Partnering for parenthood

Both parents are encouraged to attend antenatal classes together.

Ms Fannie Lo, head of Mount Alvernia Hospital's Parentcraft Centre, elaborates more, "This is to prepare both parents for the labour, birth and a smooth transition to parenthood. It is also an opportunity for parents to discuss their preferences with regards to pain relief, birth method, and baby care."

Through the classes, couples will know what to expect, how to support and encourage each other after learning together, especially with breathing techniques and massages to stay calm and relaxed during labour.

These classes also encourage non-birthing partners to take on an active role in both the pregnancy and the post-birth care of the mother and baby, fostering a sense of partnership and shared responsibility.

A holistic approach

Antenatal classes are also designed to be as all-encompassing as possible to cover the typical issues encountered during the whole journey.

"In recognition of Singapore's multicultural composition, antenatal classes here are tailored to accommodate diverse groups of prospective parents." Sr Adeline Kooh, Mount Alvernia Hospital's assistant director for nursing, explains.

With antenatal classes, expectant parents will be better guided through the uncharted waters of pregnancy and childbirth. The knowledge gained, coupled with the sense of community and emotional support, serves as a confidence booster for new parents, and also lays the foundation for a healthy and confident start to the journey of parenthood.

Why antenatal classes are important

Antenatal classes are invaluable for several reasons.

- 1 Beyond providing up-to-date insights and information on childbirth and baby care, antenatal classes create a hands-on learning environment, allowing expectant parents to practise essential skills.
- 2 Antenatal classes address how to manage the emotional changes a new mother may undergo, whether due to post-partum blues or the stress of being a new mother.
- 3 Parents will benefit from enhanced emotional and physical readiness before the baby arrives, and be more well prepared in making decisions for both mother and child.
- 4 Classes serve as a forum for asking questions, clarifying queries and addressing concerns.
- 5 Through these classes, parents-to-be can connect with others on a similar journey and share experiences.



The Alvernia Parentcraft Centre offers a comprehensive childbirth education course, specially developed by a team of parentcraft specialists to help new parents mentally and physically prepare for their childbirth. If you are an expectant or new parent seeking to learn more, do not hesitate to call 6347 6641 or email parentcraft@mtalvernia.sg for further information.

How do I pick the right health screening package and effectively understand my results?

From cholesterol and blood glucose levels to cancer and bone density tests, a health screening provides an overview of your health.

In today's fast-paced world, prioritising your health is paramount, regardless of age. While it is natural to feel wary of what a health check might reveal, it offers a crucial window into your well-being, enabling early detection and prevention of potential health issues.

Dr Leong Shu Yee of the Alvernia Health Screening Centre offers insights into selecting suitable health screening packages, understanding the results, and the next steps.



What a Health Screening Package Entails

A comprehensive health screening package includes various crucial tests and assessments that collectively provide a comprehensive overview of an individual's health status. These include:

Blood Pressure	Essential for assessing cardiovascular health. High blood pressure is a silent but critical risk factor for heart disease and stroke.
Cholesterol Profile	Helps determine heart disease risk. High levels of LDL cholesterol are associated with plaque buildup in the arteries.
Blood Glucose Test	Vital for early diabetes detection.
Body Mass Index (BMI) Measurement	Assesses weight-related health, highlighting potential risks associated with obesity or underweight conditions.
Cancer Screenings	Depending on age and gender, these may include mammograms (breast cancer), pap smears (cervical cancer), and colonoscopies (colorectal cancer). Early cancer detection significantly improves survival rates.
Liver and Kidney Function Tests	Monitor vital organ health, and identify conditions like liver disease or kidney dysfunction.
Bone Density Scans	Crucial for detecting osteoporosis, especially relevant for postmenopausal women and the elderly.
Electrocardiogram (ECG)	Checks for abnormalities in heart rhythm and function, aiding in the early detection of heart conditions.
Ultrasound	A versatile diagnostic tool that uses sound waves instead of radiation to create images of internal structures in the body.
Other Specific Tests	Depending on individual risk factors, additional tests such as thyroid function tests or prostate-specific antigen tests may be included.

Selecting a package

When choosing a screening package, Dr Leong advises individuals to consider the following factors to ensure that your health assessment aligns with your specific needs.

- **Age and Gender:** Different life stages have varying health risks. For instance, older individuals might prioritise cardiovascular or cancer screenings.
- **Family History:** Genetic predispositions play a significant role in health. If your family has a history of conditions such as heart disease or cancer, opt for screenings for these.
- **Lifestyle and Habits:** Lifestyle choices like smoking, diet, physical activity and alcohol consumption, greatly impact health. Align your tests with these factors.
- **Health Goals:** Determine your health objectives. Whether it is disease prevention, condition management, or overall well-being, let these goals guide your test choices.

How to interpret your results

The dreaded outcome of a health screening is seeing numbers that fall outside the optimal range in the various numerical values and metrics in the report. Dr Leong acknowledges these may be challenging for some to interpret.

She recommends first to discuss risk factors with your doctor as these may influence the results and guide you in preventive measures. You can also consult a specialist to get a more accurate diagnosis of a result and your doctor can provide more context and recommend further testing if necessary.

“ Don't focus on values in isolation. Instead, look for trends in your results over time to identify significant changes. ”

– Dr Leong

Finally, she suggests having a discussion with a healthcare provider to talk about treatment options and lifestyle changes to meet specific needs and objectives.

Early detection is key

Some might choose to forgo health screenings as they are fearful of discovering abnormalities. Reassuringly, not all abnormalities indicate serious health problems.

On the other hand, it is important to note that while false positives and overdiagnosis are possible, the benefits of early detection far outweigh these concerns.

Lifestyle and preventive health recommendations

Apart from test results, a health screening report usually contains recommendations for the individual to improve their overall health and prevent future issues. These include adjusting one's diet and nutrition, increasing exercise, managing stress, cutting down on smoking and drinking as well as staying up-to-date with vaccinations.

It is important to work with a healthcare provider to integrate these recommendations into a personalised daily plan so individuals can proactively address their health and well-being.

Making your health screening work for you

Selecting an appropriate health screening package involves careful consideration of personal factors, understanding the package components, interpreting results with professional guidance, addressing common concerns, and embracing preventive measures as recommended in the reports. This proactive approach to health screening empowers individuals to take charge of their well-being and detect potential health issues early, contributing to healthier lives.



The Alvernia Health Screening Centre offers a range of health screening packages that can be customised to your needs. To find out more, call 6347 6215, Whatsapp 9819 1303, email hsc@mtalvernia.sg or simply scan the QR code to find out more.

Vegan and Vegetarian Pregnancy: Ensuring Nutrient Adequacy

Navigating the plant-based path to parenthood requires careful consideration of nutrient adequacy.



With strategic dietary choices, a vegan or vegetarian pregnancy can be a thriving and healthy journey.

Having a well-balanced diet during pregnancy is pivotal for providing essential nutrition to support your baby's growth. For vegan or vegetarian mums-to-be, the need for mindful nutrient intake becomes more crucial. Clinical dietitians from Mount Alvernia Hospital, Ms Chinnayan Jayanthi and Ms Aileen Ling share the essentials of sustaining a plant-based diet while ensuring optimal nourishment for both mother and child.

The vital nutrients

Expectant mums on a plant-based diet will need to ensure that their diet contains the following essential nutrients.

Protein

The quality of proteins is defined by the amount of essential amino acids they provide. They are most often provided by animal products, because plant-based proteins often lack some of the essential amino acids. Plant-based protein sources such as peas, beans, lentils, chickpeas, seeds, nuts, soy products, and whole grains (e.g. wheat, oats, barley, and brown rice), can however be combined strategically to ensure a complete amino acid profile.

Vitamin B12 and Folic Acid

These vitamins are primarily found in animal products. Although mushrooms, tempeh, miso, and sea vegetables are known to be sources of vitamin B12, their structures do not function in the body the same way. Women on a plant-based diet can take vitamin B12 and folic acid supplements to avoid deficiency and anaemia.

Iron

Although plant-based diets are high in iron from plant foods, this type of iron, known as non-haem iron, is not as well absorbed as iron from meat (haem iron). Combining non-haem iron foods with foods high in vitamin C aids iron absorption.

Zinc

Zinc, crucial for immune system development, can be found in nuts, miso, legumes, wheatgerm, and wholegrains. However, phytic acid found in whole grains, seeds, beans, and legumes inhibit zinc absorption. This can be minimised by soaking these food and discarding the water, and cooking them.

Calcium

Essential for the formation of healthy bones and teeth, calcium can be gained from calcium-fortified plant-based milk drinks, calcium-fortified cereals and fruit juices, sesame seed paste, tahini, tofu, and dark green leafy vegetables (especially Asian greens).

Omega-3 Fatty Acids

Diets devoid of fish, seafoods, and fortified eggs are deficient in EPA and DHA, crucial omega-3 fatty acids. Official dietary guidelines recommend 1.1 grams of ALA (alpha linolenic acid) per day for women, but vegans and vegetarians who consume little or no EPA and DHA should get more. One can try flaxseed, walnuts, canola oil, and soy, which are all high in ALA.

Watch out for gestational diabetes

It is found that 1 in 5 pregnancies is complicated by gestational diabetes. For vegan and vegetarian mummies, this poses a great challenge in their meal planning as lentils and legumes, their main protein sources, contain carbohydrates. Seeking guidance from a dietitian is therefore strongly recommended to ensure a diet with the appropriate amounts of carbohydrates. This supports both the mother and baby's growth and development, while managing the mother's blood sugar level.

Dietary recommendations

The dietitians serve up a sample meal plan suitable for expectant mothers following a plant-based diet, ensuring that they meet essential nutrient requirements.

Meals	Suggested Food Choices
Breakfast	1 cup of milk or a high-calcium beverage such as soy, oat or almond milk + 2 slices of wholegrain bread + 1 egg or 2 teaspoons nut spreads
Mid-Morning Snack	1 cup of milk or a high-calcium beverage or 1 serving of fruit (e.g. 1 small apple, 1 wedge pineapple, 10 grapes, or 1 medium banana)
Lunch	$\frac{3}{4}$ to 1 bowl of brown rice, noodles or pasta + 2 small blocks of soft bean curd + 1 to 2 servings of non-starchy leafy vegetables (dark green vegetables preferred, e.g. 4 to 8 tablespoons of cooked spinach) + 1 serving of fruit (optional)
Mid-Afternoon Snack	1 handful of walnuts or 2-3 pieces of wholewheat plain biscuits + 1 cup of plain low-fat or non-fat yoghurt or a high-calcium beverage or 1 serving of fruit
Dinner	1 piece of tortilla or 2 pieces of chappati + 1 small block of bean curd + $\frac{1}{3}$ cup *lentils/pulses + 1 to 2 servings of non-starchy leafy vegetables + 1 serving of fruit (optional) <i>*Note: If there is no concern for gestational diabetes, omit the bean curd, and have $\frac{3}{4}$ cup lentils/pulses instead as a protein source.</i>
Bedtime	1 cup of milk or a high-calcium beverage

Role of supplements and fortified foods

Given the absence of certain nutrients in plant-based diets, supplements and fortified foods become essential. In particular, folic acid, vitamin B12, and calcium are often challenging to meet through food alone, hence necessitating supplements or fortified products like calcium-fortified soymilk and iron-fortified breakfast cereal. Do obtain supplements from reputable sources, and consult a healthcare professional when in doubt.

In conclusion, a vegan or vegetarian pregnancy is not only feasible but can be a thriving and healthy journey with meticulous attention to nutrient intake, consultations with dietitians, and strategic dietary choices. The key lies in embracing a variety of plant-based foods, supplementing wisely, and ensuring a well-balanced diet to nurture the well-being of both mother and baby.



Our dietitians at Mount Alvernia Hospital provide dietary consultations for both pregnant mothers and growing children. Get in touch with the Nutrition & Dietetics Department at 6347 6702 or email dietetics@mtalvernia.sg for more information!

Tips for Expectant Mothers on a Plant-Based Diet



- Avoid coffee and tea, as caffeinated beverages impair iron absorption. Switch to herbal or fruit infusion drinks to improve hydration.
- Include healthy snacks in between meals to achieve daily nutrient needs.
- Go under the sunlight for 15 to 30 minutes twice a week to obtain vitamin D which helps with calcium absorption.

Did You Know?

Having a snack in between meals, even when you are not hungry, can help to reduce nausea and vomiting if you are experiencing morning sickness during pregnancy.

Pineapples cause miscarriages. Fact or myth?

Pineapples, and papayas too, contain enzymes that help relax cervix muscles, hence have been related to increased risk of miscarriages. However, these fruits are safe to consume when taken in moderation. To minimise any risk, maintain daily fruit intake to not more than 2 servings.

Meet Our New Specialist Doctors!

Mount Alvernia Hospital is delighted to extend a warm welcome to 15 specialist doctors who have recently become part of the Mount Alvernia family. Their expertise and compassion will undoubtedly enhance the quality of care to patients at Mount Alvernia Hospital.



**Dr Webber
Chan Pak Wo**

The Gastroenterology
Group Pte Ltd

Dr Webber Chan is a gastroenterologist specialising in managing multiple conditions such as gastroesophageal reflux disease, dyspepsia, irritable bowel syndrome, colon cancer screening, hepatitis, chronic liver disease, as well as inflammatory bowel disease which includes ulcerative colitis and Crohn's disease.

After graduating from the University of Hong Kong and completing his general physician and advanced gastroenterology training at Singapore General Hospital (SGH), Dr Chan further pursued an advanced fellowship in inflammatory bowel disease at Concord Repatriation General Hospital, Sydney, Australia.

Previously Senior Consultant Gastroenterologist and Director, Inflammatory Bowel Disease (IBD) Services at SGH, and Clinical Assistant Professor at Duke-NUS Medical School, Singapore, Dr Chan was also a key member and trainer of the small bowel endoscopy service as well as colorectal cancer screening service in SGH. He is currently a visiting consultant in SGH.



**Dr Chan
Po Fun**

Alliance Heart Centre

Dr Chan, a cardiologist subspecialising in echocardiography and heart failure, is a visiting consultant with the National University Health System. Previously, she was Director of Cardiac Diagnostic Laboratory and Clinical Lead of Heart Failure Services at the National University Heart Centre (Jurong Health Campus).

Having received her testamur from the National Board of Echocardiography (America) in 2023, Dr Chan is trained in transthoracic, transesophageal, pharmacological and exercise stress echocardiography. She is adept at the use of strain-imaging for detection of subclinical cardiac conditions, and competent in 3D techniques for accurate assessment of structural heart problems.

Dr Chan also has special interests in lipidology, cardio-oncology, and female-centric heart conditions.



**Dr Grace
Chan Yin Lai**

Elim Rheumatic
Centre (Alvernia)

Dr Grace Chan is an experienced allergist, clinical immunologist, and rheumatologist who is fluent in English, Mandarin, Cantonese, and Bahasa. She previously served as Senior Consultant at the Department of Rheumatology, Allergy, and Clinical Immunology at Tan Tock Seng Hospital (TTSH), and led the hospital's Allergy and Clinical Immunology Service.

Dr Chan obtained her basic medical degree from the University Malaysia Sarawak in 2000 and became a member of the Royal College of Physicians (UK) in 2006. In 2010, she completed her specialist training in Rheumatology, Allergy, and Clinical Immunology at TTSH. She is a Fellow of the Academy of Medicine Singapore, the Royal College of Physicians (Edinburgh), and the American College of Rheumatology (USA).

Dr Chan is currently Vice President of the Allergy and Clinical Immunology Society (Singapore) and Council Member of the Lupus Association of Singapore.



**Dr Bhavesh
Kishor Doshi**

Gastrohealth Centre
for Digestive and
Liver Care

Dr Bhavesh Doshi is a gastroenterologist with more than 25 years' experience, and has performed more than 4,000 endoscopic retrograde cholangiopancreatography (ERCP) and endoscopic ultrasound (EUS) procedures.

After graduating from the University of Nottingham and completing his specialist training at the Mersey Deanery in the UK, Dr Doshi went on to pursue an advanced endoscopy fellowship at the Mersey School of Endoscopy. His special interests are in gastroscopy and colonoscopy, endoscopic ultrasonography and therapy, ERCP, bowel cancer screening, endoscopic mucosal resection and stenting.

Dr Doshi was the former endoscopy director at the National University Hospital (NUH) and a visiting consultant at Khoo Teck Puat Hospital. He is currently a visiting consultant at NUH and Ng Teng Fong General Hospital. At NUH, he was also the lead ERCP operator for post liver transplant complex biliary strictures, leaks and bile duct stones.



Dr Leonard Ho

One Surgical Clinic
& Surgery

Dr Leonard Ho is a general and colorectal surgeon subspecialising in minimally invasive surgery (MIS). Prior to joining private practice, he was a senior consultant in Sengkang General Hospital where he was one of the lead surgeons in performing Transanal Total Mesorectal Excision (TaTME) for rectal cancer.

In 2003, Dr Ho graduated from the National University of Singapore and subsequently completed surgical training in 2015. He then underwent fellowship training under Professor William Chen in China Medical University Hospital, Taiwan in 2019.

Apart from TaTME, Dr Ho's other surgical interests include minimally invasive colorectal resections, laser haemorrhoidoplasty and hernia surgery.



Dr Joe Lee

Asian Healthcare
Specialists (Alvernia)

Dr Joe Lee is a senior consultant urologist, subspecialising in andrology, prostate diseases, and male infertility including male sexual dysfunction, ageing male diseases and penile corrective surgery.

Previously Senior Consultant and Director of Andrology & Male Reproductive Medicine in the Department of Urology at National University Hospital, Dr Lee obtained his medical degree from the National University of Singapore in 2000, completed his Master of Medicine (Surgery) in 2007, and received his specialist accreditation in Urology in 2011. He went on to complete a Fellowship in Andrology at Canada's St Joseph Hospital, University of Western Ontario, where he trained in penile implants, insertion of artificial urinary sphincters, microsurgeries and sperm retrievals.

Dr Lee is Vice President of the Singapore Men's Health Society and an executive committee member of the Singapore Urological Association.

DOCTORS



Dr Lee Le Ye
Eunice & Geraldine
OBGYN Associates

Dr Lee Le Ye graduated from the National University of Singapore (NUS) and obtained her specialist qualifications in paediatrics. She has sub-specialised in neonatology since 2009 and was a senior consultant with the Department of Neonatology at the National University Hospital for 7 years.

Dr Lee's clinical expertise includes neonatal screening programmes, perinatal infections, infant and childhood vaccination, neonatal jaundice and nutritional management of very low birth weight infants as well as term neonates. She also started a programme to provide an alternative care plan for neonates with palliative care needs, and for supporting parents through stillbirths and miscarriages.

Dr Lee held the title of Assistant Professor at NUS and has published in both local and international journals on these topics. She looks forward to supporting couples on their parenthood journeys.



**Dr Harish
Mithiran
Muthiah**
Neumark Lung &
Chest Surgery Centre

Dr Harish Mithiran is a senior consultant thoracic surgeon. After graduating in 2004, he completed his basic surgical training, later specialising in cardiothoracic surgery at the National University Hospital Singapore in 2009, where he was a senior thoracic surgery consultant before starting his private practice in 2022.

Dr Harish has expertise in new thoracic surgical techniques like Uniportal Video-Assisted Thoracic Surgery (U-VATS), Robotic Assisted Thoracic Surgery (RATS), lung localisation, rib fracture fixation and navigational bronchoscopy.

A recognised key opinion leader in thoracic surgery, Dr Harish contributes actively as a council member for the Chapter of Cardiothoracic Surgeons Singapore, treasurer for the South East Asian Thoracic Society, and a member of the European Society of Thoracic Surgeons.



**Dr Nor Azhari
Bin Mohd Zam**
Asian Healthcare
Specialists (Alvernia)

Consultant Urologist Dr Nor Azhari Bin Mohd Zam graduated from the National University of Singapore in 2001, and completed his urology training at the Singapore General Hospital (SGH) in 2009, where he was awarded with both the College of Surgeons Gold Medal and the Singapore Urological Association book prize.

Dr Azhari pursued further training in Laparoscopic Surgery and Endourology at Westmead Hospital in Sydney, Australia, in 2010. He was previously Senior Consultant Urologist and Director of Endourology (Urinary Stone Service) in SGH from 2016 to 2023.

Dr Azhari has extensive experience in treating patients with kidney stones, including those with complex kidney stones or high-risk medical conditions. His other subspecialty interest lies in laparoscopic surgery for both malignant and benign conditions of the urinary tract.



**Dr Ng
Chee Yung**
One Surgical Clinic
& Surgery

Dr Ng Chee Yung, a colorectal surgeon with over 20 years' clinical experience, was formerly Senior Consultant Colorectal Surgeon at Singapore General Hospital, Consultant Colorectal Surgeon at Tan Tock Seng Hospital, and President of the Society of Colorectal Surgeons Singapore. He excels in advanced minimally invasive colorectal procedures including robotic surgery, colonic stenting and transanal incisionless surgery.

Dr Ng's robotic surgical expertise is recognised worldwide, delivering lectures and performing live demonstration surgeries in global conferences. In a notable achievement, he was the first Singapore colorectal surgeon to have performed live surgery demonstration of his robotic technique at the 2015 ISLCRS Congress.

Dr Ng has particular interest in developing advanced colorectal cancer surgery techniques, and is a pioneer of laparoscopic "D3 lymphadenectomy" and "complete mesocolic excision" to ensure maximum cancer clearance and minimal cancer recurrences.



**Dr Poh
Keng Soon**
Orthopaedic and
Hand Surgery Partners

Dr Poh Keng Soon is a consultant orthopaedic surgeon specialising in shoulder and elbow surgery. His expertise includes keyhole arthroscopic and joint replacement surgery for various shoulder conditions such as recurrent dislocations, rotator cuff tears and shoulder arthritis.

Dr Poh previously served as Consultant in the Department of Orthopaedic Surgery, Division of Sports Medicine, Shoulder and Elbow Surgery, National University Hospital.

After graduating in 2009, Dr Poh did his specialist training in orthopaedics surgery at National University Health System. He was appointed a Member of the Royal College of Surgeons (Edinburgh) in 2013 and earned his Master of Medicine in 2017. Achieving Fellowship in the Royal College of Surgeons of Edinburgh in 2018, he was thereafter honoured with the MOH HMDP award to further train in sports, shoulder and elbow surgery in Melbourne, Australia.



**Dr Ravindra
Singh
Shekhawat**
Straits Specialists
Clinic

Dr Ravindra Singh Shekhawat is a neurologist, with special interests in stroke, epilepsy, headache, neurophysiology and neuroimmunology.

Dr Ravi graduated with a Bachelor of Medicine and Bachelor of Surgery (MBBS) from Madras Medical College, Chennai, India. He later became a member of the Royal College of Physicians, London, before moving on to pursue his senior residency training in neurology at Singapore General Hospital. This was followed by a fellowship at the Academy of Medicine, Singapore (FAMS) and the Royal College of Physicians (FRCP, Edinburgh).

Previously a consultant neurologist at the National Neuroscience Institute (NNI), and a stroke lead in Changi General Hospital under NNI, Dr Ravi has also published several stroke-related and general neurology articles in many well-established journals, and worked as principal investigator in various grant-supported research studies.



**Dr Toh
Bin Chet**
Nexus Surgical

Dr Toh Bin Chet is a senior consultant general surgeon specialising in upper gastrointestinal (UGI), bariatric metabolic surgery and advanced endoscopy. He graduated with commendation from the University of Dundee, United Kingdom, and was honoured as Fellow of the Royal College of Surgeon Edinburgh and the Academy of Medicine, Singapore after completion of specialist training.

Dr Toh successfully completed overseas clinical fellowships in the prestigious Cambridge University Addenbrookes Hospital, UK, and University of Strasbourg, France. He also had clinical fellowship experiences in advanced minimally invasive UGI and bariatric metabolic surgery in various hospitals in Singapore, including Singapore General Hospital, National University Hospital and Tan Tock Seng Hospital. He further honed his surgical skills in Korea for gastric cancer, Italy for bariatric endoscopic procedures, and Thailand for advanced endoscopy and endoscopic retrograde cholangiopancreatography.



Dr Yeow Yuyi
Advanced Urology

Dr Yeow Yuyi is a recognised urologist, particularly in minimally invasive treatments for stone disease. He graduated in 2008 from the National University of Singapore, and earned his specialist accreditation in 2017. Before entering private practice, he was a consultant in the Department of Urology at Tan Tock Seng Hospital.

Dr Yeow trained in supine mini percutaneous nephrolithotomy and complex stone surgery at San Raffaele Hospital in Milan, Italy, in 2019. He also has particular interest in the metabolic evaluation and prevention of stone disease, and regularly manages urological conditions such as benign and malignant conditions of the kidney, prostate, and bladder.

As a visiting consultant at Khoo Teck Puat Hospital, Dr Yeow offers his expertise in complex stone surgery and laparoscopic management of peritoneal dialysis catheters.



**Dr Sulaiman
Bin Yusof**
Colorectal Clinic
Associates

Dr Sulaiman Yusof is a senior consultant colorectal and general surgeon with over 15 years of experience in the field, focusing on minimally invasive surgery, particularly robotic procedures using the da Vinci Xi system.

A University of Sheffield graduate in 2002, he completed house officer and surgical training in the UK, followed by Advanced Surgical Training at Changi General Hospital in Singapore. Specialising in colorectal surgery, he earned a fellowship at Peter MacCallum Cancer Centre, Melbourne, Australia.

A dedicated educator, he held various administrative roles, including Director of Endoscopy, and contributed to undergraduate medical education. Driven by compassion, he forged enduring patient relationships and garnered multiple awards, including the prestigious 2023 Singapore Health Quality Service Star Award.



ASSISI LEARNING *festival 2024*

Started in 1969 as a mission of love to serve the underserved, Assisi Hospice is proud to celebrate its 55th year of Caring for Life by presenting the Assisi Learning Festival 2024 – a series of symposiums presented by various subject experts in palliative care. This series, which is offered free to participants as Assisi Hospice's gift to the community, hopes to empower Singapore's ILTC sector to do more and build a compassionate society.

VOLUNTEER & CARE SYMPOSIUM

CLOTHING THE COMMUNITY IN CARE
THROUGH VOLUNTEERS

22-25 Mar 2024

Assisi Hospice, Essery Hall

Registration opens **1 Feb 2024**

Featuring Dr Aditi-Sethi, a US hospice physician and end-of-life doula who founded the Center for Conscious Living and Dying (CCLD) in Asheville to promote community supported end-of-life care, the Volunteer & Care Symposium will see her share her expertise on:

- Engaging the volunteer community to provide support for palliative patients
- Being present and journeying meaningfully with for those at end-of-life
- Supporting volunteers and caregivers in coping with grief and loss

Team Assisi will also be sharing their knowledge on:

- Building a Sustainable NODA Programme
- Impact of Culture & Religion in Palliative Care
- An Organisational Approach to Setting Up Grief & Bereavement Service to Support Caregivers and Volunteers.

This programme is supported by Community Care Manpower Development Awards (CCMDA).



In this workshop, the Assisi Clinical Pastoral Care team will focus on the delivery of spiritual care in healthcare settings and share their approach in the provision of spiritual care in Assisi Hospice.

Using the Jungian concept of the Wounded Healer, the team will also explore how individuals can be in touch with our own humanity, thereby offering this healing care to the patients whom we serve. There will be opportunities to network with other spiritual carers who journey with people facing serious illness and mortality. This session is suitable for all healthcare professionals.

SPIRITUAL CARE @ ASSISI HOSPICE

EXPLORING YOUR ROLE AS
A PROVIDER OF SPIRITUAL CARE

05 Jul 2024

Assisi Hospice, Essery Hall

Registration opens **1 Apr 2024**

ALLIED HEALTH SYMPOSIUM

NAVIGATING NEW FRONTIERS:
DIVERSE AND INCLUSIVE PALLIATIVE CARE

17 Aug 2024

Assisi Hospice, Day Care Centre

Registration opens **1 Mar 2024**

In this symposium, the Assisi Allied Health team will provide an overview on the changing landscape for patients with serious illnesses in Singapore and showcase Assisi's interdisciplinary approach in supporting this group of patients. We will also be sharing our experiences in managing challenging conversations and addressing spiritual concerns.

Symposium participants may also opt to join the experiential workshops later in the afternoon, which will be conducted by the art therapists and music therapists to find out how creative modalities can be powerful resources to enhance well-being and self-awareness. This session is only open to healthcare professionals.



Scan for Full
Event Details



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