

my Alvernia

Inspiring Healthy Living | Issue 54

Precious Moments

St Anne Mother & Child Centre Turns One!



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Welcoming Mount Alvernia's New Medical Specialists

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As we approach the end of 2024, we look back on a year of growth and collaboration. This October marked the first anniversary of St Anne Mother & Child Centre (SAMCC), which has welcomed over 6,300 newborns since its opening. I would like to express my deepest gratitude to the families who have entrusted us with such an intimate part of their lives, and to our doctors, nurses, and staff, who have devoted themselves to making SAMCC a trusted, warm, and supportive environment.

In this spirit of appreciation, we honoured our nursing professionals during our annual Nurses' Day celebration. This year's theme — "Kung Fu Nurses: Finding Zen in the Midst of Chaos" — perfectly captures the strength and comfort that our nurses bring, even in the face of challenging circumstances. The day was filled with lively events, games, and music, creating a joyful tribute to the nurses' invaluable contributions to patient care.

This year has also been one of leadership transition. On 26 August, we bid a fond farewell to our former Chairman of seven years, Mr Ho Tian Yee. Known for his visionary leadership, strategic insights and calm approach, Tian has steered us through significant challenges, including the COVID-19 pandemic, and the construction of SAMCC and our integrated cancer centre. His dedication has left a lasting legacy, and we are deeply grateful for his contributions.

In his place, we warmly welcome our new Chairman, Ms Chan Chia Lin, who has served on our Board for seven years, and played a pivotal role in shaping our financial strategies as the Chairman of our Finance Committee. With Chia Lin's strong analytical skills and sound judgement, we look forward to her guidance in advancing Mount Alvernia's mission, including our new initiatives for mental wellness.

On that note, I am pleased to announce the opening of our Alvernia Wellness Centre, dedicated to supporting the mental health needs of teenagers, young adults, and new mothers. Our goal is to provide a safe, supportive space where individuals can find guidance and resources tailored to their unique challenges. I hope that this new initiative will empower our community to prioritise mental well-being, and seek help when it is needed.

Our outreach team continues to bring care to underserved communities, upholding the mission of our Founding Sisters. In partnership with IDHealth, we have launched a pilot programme offering coordinated medical and dental care to individuals with intellectual disability at our Outreach Clinics in Enabling Village. Additionally, we work with our clinics and specialists who provide their services pro bono to help vulnerable, low-income transnational spouses needing urgent medical care. We truly appreciate these doctors and clinics for their kindness and commitment.

As we look toward 2025, I extend my heartfelt thanks to our patients, families, doctors, and all Mount Alvernia colleagues for their ongoing support. Together, let's welcome the new year with hope, purpose, and the continued commitment to Mount Alvernia's mission to **Serve all with Love**.



God bless.

Dr James Lam Kian Ming
CEO, Mount Alvernia Hospital

A Conversation with Chairman Ms Chan Chia Lin

Mount Alvernia Hospital (MAH) warmly welcomes Ms Chan Chia Lin as its new Chairman, starting 26 August 2024. A familiar face at the hospital, Ms Chan has served on the Board of MAH for the past seven years, contributing her expertise in finance and governance to guide the hospital's mission-driven growth.

Ms Chan is also deeply committed to social service, evident in her work with non-profit organisations such as HealthServe which serves and advocates for migrant workers.

In this candid chat, Ms Chan opens up about her journey to accepting the Chairman's role, her passion for mental wellness, and the personal experiences that continue to shape her leadership.

1 What excites you most about stepping into the role of Chairman at MAH?

Firstly, I feel incredibly grateful to have served on the Board of MAH all these years. MAH is a very special organisation. We are a not-for-profit hospital, but we are not a charity where we solicit funds from the public. We have to operate for profit and meet marketplace challenges to be sustainable financially, yet serve patients with compassion. Combining the dual aspects of profit with the mission, and maintaining this balance is something I look forward to in my role as Chairman.

Most of all, I am excited to see how I can continue the great work that has been done in the past years by the Founding Sisters and subsequent board members and management teams.

2 What were your thoughts when you were first approached for the role?

When Mr Ho Tian Yee, the previous Chairman, first approached me, my initial reaction was one of shock, as I felt there were others on the board who were more qualified than I was for the role.

I took a while to reflect on it, seeking advice from former Chairman Mr Phillip Tan, who was very encouraging, and discussing it with my family. It's a heavy responsibility, and I wanted to be sure I was adequate for the job. Ultimately, what led me to take up the role was a strong conviction in the hospital's mission and a strong desire to explore how MAH can serve the community in the area of mental health.

3 Mental wellness is such an important yet often overlooked area of healthcare. What sparked your interest in this cause, and how do you hope to make an impact in this area at MAH?

I feel for marginalised causes in general, which was what brought me to volunteering in the migrant worker space to begin with. Mental illness has long been stigmatised and, up until recently, mental health had been an underserved cause in Singapore.

There's also been the personal experience of seeing friends and family members struggle with mental health challenges. Mental stress or illness can affect anyone, across all ages and income groups, and it impacts not just the individuals but their families.

I always cite this anecdotal example of why I think this issue is so important. I don't personally know anyone who lost a loved one during the Japanese occupation, but I know at least seven friends, friends of my parents or distant relatives who have either committed suicide or lost someone to suicide.

Looking forward, I believe mental health will become an even more pressing issue, especially as our youth face social media pressures, and our seniors, who are fast increasing in numbers, grapple with loneliness and depression.

My fellow Board members and Executive Team at MAH are similarly interested in mental health. We've already begun work on mental wellness, starting with our pilot Alvernia Wellness Centre. We are excited to see where this will lead us to next.

4 How do you think your work with other social service organisations contributes to your role at MAH?

My involvement in the social service sector has deepened my understanding of the challenges faced by those from disadvantaged backgrounds, and helped me develop a network of friends working in this space.

I believe this perspective allows me to contribute more meaningfully towards MAH's mission of serving those in need.

5 Outside of your professional life, what's one hobby that people might be surprised to learn about you?

I have an interest in old Indonesian textiles. It all started when I moved into my current home 30 years ago, and wanted a horizontal wall hanging for my dining room. I stumbled upon an old Indonesian *songket* in one of the antique shops in the old Tanglin Shopping Centre.

That purchase sparked my curiosity in Indonesian textiles. Apart from aesthetics, I liked that the weaving was primarily done by women and revealed

differences in ethnography across the country. Each piece reflects the distinct identity, economy and culture of that particular region. For example, Sumantran textiles were often made of silk and gold threads as Sumatra was a wealthy island, while textiles from Flores tended to be more tribal, and using spun cotton and natural dyes.

6 When you look back on your tenure in the future, what contributions do you hope to have made to MAH?

What I hope for at the end of my tenure, is to know that I have continued and added to the work of the many dedicated people who have brought MAH to what it is today.

I would like to see us as having substantially expanded our outreach work, be it in mental health or other areas.

Ms Chan with her dog, Bella



St Anne Mother & Child Centre Turns One!

St Anne Mother & Child Centre (SAMCC) celebrates its first year of new beginnings and life-changing moments. Since its opening, SAMCC has welcomed over 6,300 babies, each bringing a unique story of joy and love. Let's take a look at some memorable first moments from this past year!

Ginelle, Giselle and Gisela: Triple the joy

Meet Ginelle, Giselle, and Gisela – the first triplet babies born at SAMCC! Born on 27 June 2024, their arrival brought boundless joy to their parents – Singaporean Mr Chen Si Jin, 34, and Vietnam national Mdm Nguyen Yen Nhi, 32.

The couple's love story began in 2017 at a wedding in Vietnam, where they first met. Despite language barriers, they connected using Google Translate, and in 2018, they got married. In 2024, they were thrilled to learn they were expecting triplets.

The pregnancy was far from smooth, with the triplets arriving prematurely, and having to spend over a month in the Neonatal Intensive Care Unit (NICU). Mdm Nguyen expressed deep gratitude to the NICU nurses, saying, "As a first-time mother caring for triplets, I was overwhelmed, but the nurses' kindness and guidance reassured me every step of the way."



Mr Chen and Mdm Nguyen with their precious triplets.



“ These first moments were emotional, surreal and once in a lifetime. ”

Throughout the high-risk triplet pregnancy, the couple also found great reassurance in the care of Mount Alvernia Hospital's obstetrician and gynaecologist, Dr Tony Tan and paediatrician Dr Sim Chiang Khi.

Mr Chen described the moment he first laid eyes on his daughters as "emotional, surreal and once in a lifetime." Now, they are embracing the adventure of raising their three daughters.



Welcoming SAMCC's first triplets - Ginelle, Giselle and Gisela.



Mdm Koh and Mr Tan, with their three-year-old daughter and newborn twins.

“ My wife's strength and love for our family fuelled her recovery. ”

Gweneth and Gwenlyn: Double the love, double the strength

Born on 28 September 2024, identical twin girls Gweneth and Gwenlyn have already filled the hearts of their parents, Mr Daniel Tan and Mdm Koh Wen Xin, both 32, with boundless joy. The couple's family has now expanded to three children, with their three-year-old daughter eagerly embracing her role as a big sister to the new additions.

The pregnancy was a wonderful surprise, though not without its trials. Mdm Koh endured persistent nausea and vomiting but focused on the happiness the twins would bring. The couple chose SAMCC for the delivery, drawn by its peaceful and reassuring environment.

However, Mdm Koh's journey took a difficult turn shortly after the birth. Just two hours post-delivery, she faced severe complications as her uterus would not contract, leading to a drop in her haemoglobin levels and a diagnosis of anaemia. An emergency hysterectomy became necessary to stop the bleeding, and Mdm Koh spent three critical days in the Intensive Care Unit (ICU).

Despite these early setbacks, Mdm Koh's strength and love for her family fuelled her recovery, and helped her overcome the challenges she faced.

With Mdm Koh now in recovery, the family is cherishing every precious moment spent together.

“ The arrival of Baby Nehemiah is a testament to the power of faith and family. ”



The Wongs welcome Baby Nehemiah to their family.

Baby Nehemiah: The Wong family welcomes eighth baby

Welcoming the eighth addition to the Wong family! Born on 13 July 2024 at 10.32am after six hours of labour, Nehemiah Thomas Wong continues the family tradition of names beginning with "N", like his seven older siblings. Parents Nicholas and Noeline Wong, both 43, met through their church's youth wing and dreamed of building a large family from the start of their relationship.

For the Wongs, the journey to parenthood has been filled with joy, and the arrival of Baby Nehemiah is yet another precious chapter, a testament to the power of faith and family.



Baby Hansel: SAMCC's first dragon year blessing

Baby Hansel Zhang made his grand entrance 12 seconds after midnight on 10 February 2024, the first day of the Lunar New Year, fulfilling his parents' dream of having a Dragon Year baby.

Weighing 3.595 kg and measuring 52 cm, Hansel was expected to be a larger-than-average newborn, leading his parents, Mr Zhang Yu and Mdm Han Xu, to arrange for an induced birth on the eve of the Lunar New Year.

However, Baby Hansel had other plans. On 9 February, Mdm Han began experiencing regular contractions and some bleeding, prompting her doctor to suggest she head to the hospital. After about 10 hours of labour, Hansel arrived just after midnight, to the joy and surprise of his parents.

First-time parents Mr Zhang, a project manager, and Mdm Han, in sales, are overjoyed. "We've been hoping for a Dragon Year baby, and we're thrilled our wish came true," shared Mr Zhang, thanking their obstetrician Dr Joycelyn Wong for her expert guidance.



Baby Hansel arrived 12 seconds past midnight, becoming the first Dragon baby to be born in SAMCC.

“ We've been hoping for a Dragon Year baby, and we're thrilled our wish came true! ”

Baby Kyler: A leap year arrival

SAMCC proudly introduces its first leap year baby! Born on 29 February 2024, Baby Kyler has already leapt into the hearts of his thrilled parents, Mr Chan Keng Pang and Mdm Neo Yi Ting, both 31. Weighing 3.435 kg and measuring 51 cm, Kyler's birth was originally due on 9 March, but he surprised everyone by arriving early after Mdm Neo's water broke on 28 February. Following a short labour, Kyler made his debut at 12.47am.

"Having a leap year baby is special, like the Olympics," said Mdm Neo, who plans to have dual birthday celebrations on 28 February and 1 March in non-leap years. Mr Chan added, "As first-time parents, we're excited for this new journey!"

“ Having a leap year baby is special, like the Olympics. ”



Leap year baby Kyler with his thrilled parents.



New parents Jamie and Andy with their National Day miracle Baby Jayley.

“ It felt like the universe conspired to bring us good fortune. ”

Baby Jayley: Stealing the show on National Day

Baby Jayley made her grand entrance into the world at SAMCC on 9 August 2024, Singapore's National Day, following 11 hours of labour. For her parents, Andy and Jamie, both 33, her birth was a double blessing. Not only did they welcome their beautiful daughter, but the sale of their house was finalised the day before. "It felt like the universe conspired to bring us good fortune," Andy shared with excitement.

Sharing a birthday with the nation means that Jayley's special day will always be marked by grand celebrations, filled with pride and patriotism. Her parents are looking forward to watching her grow up, surrounded by the love of family, and the spirit of Singapore.

As SAMCC marks its first anniversary, Mount Alvernia Hospital extends a heartfelt 'thank you' to the families who have entrusted SAMCC with such an important part of their journey. Wishing them all continued health, happiness, and a lifetime of cherished memories with their little ones.



Mount Alvernia Celebrates Its Kung Fu Nurses

Mount Alvernia Hospital honoured its nursing team on 1 August with a special celebration to recognise their dedication, strength and compassion.



The Nurses' Day celebration on 1 August honoured the commitment of Mount Alvernia's nursing team.



The Executive Team distributed gifts to nurses during their walkabout.

Mount Alvernia Hospital (MAH) held its annual Nurses' Day celebration on 1 August, paying tribute to the commitment of its nursing team.

This year's theme, "Kung Fu Nurses – Finding Zen in the Midst of Chaos," reflects the resilience and calm required of nurses who navigate the daily challenges of healthcare with unwavering grace.

On the morning of 31 July, MAH's Executive Team had a walkabout through the hospital, delivering special gifts to nurses to show their heartfelt appreciation for their dedication.

Later that afternoon, a Nurses' Day Mass led by Friar William Lee, was held in the MAH Chapel.



Nurses' Day Mass led by Friar William Lee.

The mass served as a time of reflection and gratitude, with prayers of thanksgiving and blessings offered for all nurses and caregivers, who are the backbone of the hospital's compassionate care.

The celebration continued on Nurses' Day, starting at noon with pre-event activities that included lively photo booths, games with prizes, and ice cream to add to the celebratory atmosphere.



Director of nursing Ms Shirley Tay (centre) with Nurses' Merit Award 2024 winners Sr See Bee Fong (left) and Sr Kartikawani Binti Asmawi (right).

The main programme began after lunch, kicking off with musical performances by MAH doctors, nurses, and staff members. Games, a lucky draw, and a cake-cutting ceremony provided joy and relaxation, allowing nurses a moment to unwind and celebrate together.

A highlight of the event was the presentation of the Nurses' Merit Award 2024, awarded by the Ministry of Health. This year, Senior Nurse Manager Sr See Bee Fong from the St Dominic Ward and Nurse Manager Sr Kartikawani Binti Asmawi from the Delivery Suite received the award, which recognised their outstanding performance and commitment to advancing the nursing profession.

Ms Shirley Tay, director of nursing at MAH, applauded the nurses, saying, "The global economic situation and the declining birth rate in Singapore have presented unprecedented obstacles. Yet, despite these difficulties, the nurses at Mount Alvernia Hospital have demonstrated remarkable efforts and professionalism. Your unwavering commitment to patient care has been a beacon of hope and strength, and for that, I extend my heartfelt gratitude."

“ As we celebrate Nurses' Day, we also recognise the challenges and demands of this profession. Regardless of these challenges, you continue to inspire us with your resilience and your commitment to our patients. So, let us take a moment to appreciate the incredible work that our nurses do every day. ”

– Dr James Lam, CEO

Ollella Opens at Mount Alvernia Hospital

Mount Alvernia Hospital welcomes Ollella to its food and beverage offerings!

Founded in 2016, Ollella is a traditional *kueh* and pastries store dedicated to preserving and sharing the rich culinary heritage of the Southeast Asian *kueh*. With a legacy rooted in recipes passed down for over 70 years from the founders' grandmother, Ollella continues to handcraft each *kueh* using time-honoured methods and the finest ingredients.

The brand prides itself on maintaining the authenticity of these cherished treats while introducing them to new generations of food lovers. Now in its eighth year, Ollella is committed to keeping the legacy of freshly made, authentic *kueh* alive, bringing the nostalgic taste of the past into the present.

Visit Ollella on level one of the hospital and experience a taste of tradition!



Ollella offers freshly made, authentic kueh and pastries.

Paddling for a Cause at the Singapore Regatta 2024



The 24-member MAH team trained every Sunday, rain or shine.

The Mount Alvernia Hospital (MAH) dragon boat team proudly participated in the Singapore Regatta 2024, held on 14 and 15 September at the Kallang Watersports Centre. The 24-member MAH team trained every Sunday afternoon, rain or shine.

This year's regatta was organised in partnership with the Breast Cancer Foundation to raise awareness for breast cancer through dragon boating. The MAH team paddled alongside international teams of breast cancer survivors and other hospital teams, united for this meaningful cause.

Beyond the dragon boat races, the event featured a variety of activities, including a mammogram bus offering free mammogram screenings to visitors, interactive booths on cancer care, stage performances, and food and beverage options such as the Milo van and ice cream.



Serve all with Love

Nutrition & Engagement for Seniors today (NESt)



What is NESt?

NESt is a unique workshop combining dietetics and occupational therapy to address common aging issues. Through this workshop, seniors are empowered to make healthy food choices and engage in hobbies and social interaction. This helps to improve self-esteem and quality of life.

WHAT YOU WILL LEARN:



Identify signs of malnutrition



Make proper food choices for nourishment and energy



Learn techniques to perform daily activities confidently



Engage with people better daily

Value:
\$109*
for 1 session (2 hours)
(*inclusive of GST)

Caregivers also gain skills to take better care of seniors while encouraging their independence.

Each workshop is limited to 4 participants.
Open to seniors and accompanying caregivers.



Scan to register today!

Embrace Living, Age Gracefully!

To find out more, please contact us:
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Nutrition & Dietetics
Tel: 6347 6702

Rehabilitation Centre
Tel: 6347 6203 / 6347 6365

Discover

Dining and Retail Choices at Mount Alvernia Hospital

Mount Alvernia Hospital features a variety of dining and retail options to suit different preferences. Whether you are in the mood for a quick snack, a sit-down meal with family, or shopping for essentials, here's a glimpse of the offerings available on-site.

7-Eleven

Established in 1983, 7-Eleven has over 400 stores in Singapore, offering a wide array of quality products, food and services for customers' convenience.

Daily: 7am-11pm



Alvernia Retail Pharmacy

The Alvernia Retail Pharmacy offers health supplements, skin care products, gifts, books, toiletries and surgical supplies, while catering to the dispensing needs of walk-in patients.

Mon-Fri: 8.30am-5.30pm |
Sat: 8.30am-1.00pm | Closed on
Sun and PH



Fun Toast

Serving traditional coffee, kaya toast, and local delights, perfect for a quick, comforting meal.

Mon-Sat: 8am-6.30pm | Sun
and PH: 8.30am-3.30pm



Jollibean

A go-to for healthy soy snacks and drinks, providing a nutritious option on the go.

Mon-Sat: 8am-6pm | Sun and PH: 8am-4pm



Mums Club

Carries a wide range of maternity and baby products carefully curated by a team of mothers.

Mon-Sat: 10am-6pm | Closed on Sun and PH



Olella

Specialising in traditional *kueh* and pastries based on 70-year-old Indonesian recipes passed down from the founders' grandmother.

Mon-Sat: 7.30am-3.30pm |
Closed on Sun and PH



Polar Puffs & Cakes

Offering a delicious selection of pastries, cakes, and savoury puffs, freshly baked every day.

Mon-Sat: 8am-8pm
| Sun: 8am-4pm



SF Farm Mart

Committed to providing fresh quality fruits and juices, globally sourced from trusted farms around the world.

Daily: 9am-9pm



SG Hawker

Savour a variety of local street food favourites at our modern kopitiam, featuring Halal-certified Encik Tan, 85 Redhill, and Nam Kee Pau.

Mon-Fri: 8am-8pm | Sat,
Sun and PH: 8am-5pm



Subway

Bite into freshness! Customise your sandwiches and salads, expertly crafted to your taste. Enjoy a light yet satisfying meal that's perfect for every craving!

Mon-Sat: 8am-8pm | Sun
and PH 10am-7pm



Umisushi

A Japanese food favourite, serving sushi, bento boxes, and sashimi for a quick and healthy bite.

Mon-Sat: 10am-8pm | Closed on Sun
and PH



B&G Lifecasting

B&G Lifecasting creates detailed, high-quality, non-toxic hand and foot casts using premium European materials, offering cherished keepsakes for celebrating milestones and special moments.

Mon-Sat: 9am-5pm | Closed on
Sun and PH



The Aging Prostate: Key Changes and How to Manage Them

The prostate changes as men age, and with it, a higher risk of prostate cancer. Dr Joe Lee, a senior consultant urologist and andrologist, explains how the organ changes, how to check one's prostate health, and lifestyle changes to adopt for a healthy prostate.



Dr Joe Lee King Chien
Senior Consultant Urologist and Andrologist
Asian Healthcare Specialists (Alvernia)
Medical Centre A #05-03



As men age, one of the most common changes in prostate health is the gradual enlargement of the prostate gland, a condition known as benign prostatic hyperplasia (BPH).

"The prostate is usually considered a sexual organ because it produces fluids that nourish sperm. As such, it is highly sensitive to hormonal changes, particularly testosterone. Over time, prolonged exposure to testosterone causes the prostate to grow," says Dr Joe Lee, senior consultant urologist and andrologist at Mount Alvernia Hospital.

He adds, "As it enlarges, the gland may press against the urinary tract, leading to urinary symptoms."

Age also increases the risk of prostate cancer which often progresses slowly over the years. Prostate cancer is the most common cancer among males in Singapore, according to the Singapore Cancer Registry Annual Report 2021 from the National Cancer Centre Singapore.

Differences between benign prostatic hyperplasia and prostate cancer

BPH and prostate cancer can share similar urinary symptoms, such as difficulty in urinating and frequent urination accompanied by a feeling of incomplete bladder emptying.

The key difference lies in the progression of symptoms. BPH symptoms develop gradually over time. In contrast, prostate cancer often has no noticeable symptoms until it

Regular prostate screenings and healthy lifestyle choices play a key role in maintaining prostate health.

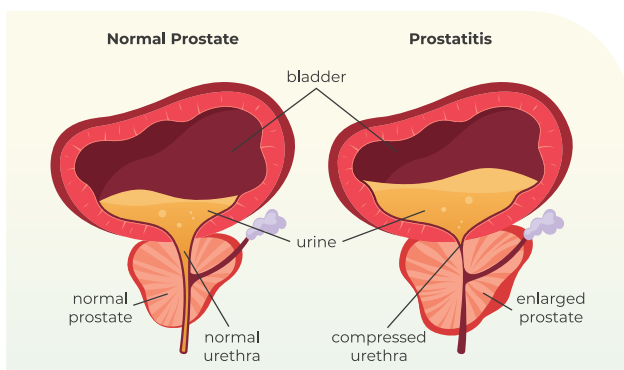
has reached a more advanced stage, and when symptoms do appear, they evolve rapidly. These symptoms may include blood in the urine or semen, bone pain, and loss of appetite and weight.

BPH, if left untreated, can lead to complications like urinary tract infections, bladder stones, and even kidney damage. While BPH affects quality of life, it is not cancerous.

Prostate screening

Screening for prostate health typically involves two common methods.

The first is a digital rectal examination, where a doctor inserts a gloved finger through the anus and feels for any abnormal lumps on the prostate.



This diagram shows a normal prostate alongside an enlarged prostate, where the swelling compresses the urethra, often causing urinary symptoms.

The second is a blood test known as the prostate-specific antigen (PSA) test. While PSA is produced by normal prostate cells, prostate cancer cells produce it in higher amounts, so an elevated PSA can be a potential indicator of cancer.

“ Men should start to discuss prostate screening with their doctor at age 50. For those with a family history of prostate cancer, it is advisable to start earlier at age 45. ”

– Dr Joe Lee

The doctor may recommend screening annually or every two to three years based on individual risk factors.

Early and regular screenings are crucial for detecting prostate cancer in its most treatable stages, and if PSA levels are abnormal, further evaluations such as MRI scans or biopsies may be conducted to assess the patient's condition.

Tips for maintaining prostate health



Consume a diet rich in fruits, vegetables, whole grains, and lean proteins, while reducing overall fat intake especially trans fats and saturated fats. Focus on healthy fats such as omega-3 fatty acids from nuts, seeds and fish. Foods high in antioxidants, such as tomatoes which contain the substance lycopene, have been shown to slow the growth of prostate cancer cells.



Exercise regularly and maintain a healthy weight.



Stop smoking and reduce alcohol consumption. Taking these two actions also benefits one's overall health and reduces the risk of other types of cancer.



Engage in regular sexual activity. Studies suggest that men who ejaculate more are up to two-thirds less likely to be diagnosed with prostate cancer as it clears the body of toxins.



Go for regular screenings such as prostate exams and prostate-specific antigen tests for early detection from age 50, or 45 for those with a family history of prostate cancer.

Finding Relief from Chronic Sinusitis

Despite recurrence, newer treatments are proving more effective in managing chronic sinusitis.

A constant stuffy nose, thick mucus, or postnasal drip, these uncomfortable symptoms are often unrecognised symptoms of chronic sinusitis, a condition where the sinuses, normally air-filled spaces in the skull, become inflamed and swollen for a prolonged period, preventing infected mucus from draining effectively.

Dr David Chin Chao-Wu, senior consultant ENT surgeon, explains what causes chronic sinusitis and the different ways to treat the condition.

Q. What is the difference between chronic and acute sinusitis?

Acute sinusitis involves symptoms lasting less than three months, often starting with a viral upper respiratory infection, which creates the conditions conducive for bacterial infection. The resulting inflammation leads to a combination of swelling of the mucous lining in the sinuses, increased mucus production, compounded by impaired mucus outflow, or blockage of the sinuses.

Chronic sinusitis occurs when symptoms persist beyond three months, causing prolonged damage to the sinus lining, creating a vicious cycle of inflammation and blockage.

Q. What are common causes of chronic sinusitis?

- 1 Chronic sinusitis without nasal polyps (CRSwoNP)**
Occurs when acute sinusitis is not resolved in a timely

fashion due to frequent viral infections, enlarged adenoids (especially in children), allergies that cause chronic swelling in the nose, or structural issues that block sinus drainage.

- 2 Non-invasive fungal sinusitis**
Fungus may get into a sinus, causing inflammation and resulting in the formation of debris. As fungal debris is semi-solid, they are not effectively cleared from the sinuses, often taking months or years before symptoms appear.

- 3 Odontogenic sinusitis**
Bacterial infection from the teeth that spreads to the sinus of the cheek (maxillary sinus), occasionally affecting neighbouring sinuses.

- 4 Chronic sinusitis with nasal polyps (CRSwNP)**
Grape-like polyps formed from ongoing inflammation of the sinuses, often leading to loss of smell along with other sinusitis symptoms. The condition may develop gradually over months and years before becoming noticeable.



Q. How can chronic sinusitis be treated?



Chronic sinusitis occurs when symptoms persist beyond three months, causing prolonged damage to the sinus lining.

Treatment for chronic sinusitis often involves a combination of methods.

✚ Saline irrigation

Helps reduce clogging of the sinuses by clearing inflammatory debris and improving mucus flow. It is, however, more effective after sinus surgery when the openings to the sinus have been widened.

✚ Corticosteroids

- **Intranasal corticosteroid sprays:** Effective in reducing nasal lining inflammation. However, since the sprays are designed to treat allergy in the nose rather than the sinuses, they do not effectively enter the sinuses even if sinus surgery has been performed. Hence, while beneficial in improving symptoms, they have little or no direct effect on the sinuses.
- **Systemic corticosteroids (e.g. prednisolone):** While effective in treating CRSwNP, they provide only short-term relief (up to three months), and carry risks with prolonged usage.
- **Topical corticosteroids:** For patients who have had sinus surgery, topical corticosteroids can effectively treat sinusitis, especially CRSwNP, without the long-term problems of oral corticosteroids.

✚ Mucolytics

These are medications that can help to clear thick mucus. Side effects are rare.

✚ Decongestants

Topical and systemic decongestants can provide significant relief in nasal congestion and obstruction, but only suitable for short-term use.

✚ Surgery

While some forms of sinusitis may be successfully treated with medical treatment alone, surgery is often required for CRSwNP and fungal sinusitis.

Balloon sinuplasty and functional endoscopic sinus surgery (FESS) are both effective, minimally invasive surgical techniques to treat chronic sinusitis, but they differ in approach and use.

- Balloon sinuplasty uses a small balloon to open blocked sinus passages by no more than 5mm to drain mucus without removing tissue. This is ideal for milder cases with faster recovery.
- FESS is performed through the nostrils using an endoscope and surgical instruments to remove tissue or bone causing sinus blockages, offering more extensive relief. This is typically used for more severe or chronic sinus issues, and may require a longer recovery period.

There are also more advanced techniques, such as the endoscopic Lothrop procedure for the frontal sinus, which open sinuses to their widest extent to achieve better control of the nasal polyps.

✚ Biological treatments

Biological medications, such as dupilumab and mepolizumab, are developed for specific targets in the body, and are effective for treating CRSwNP. Administered via injections at two to four-week intervals, they have significantly improved disease control and quality of life for patients with severe or recurrent nasal polyps.



Dr David Chin Chao-Wu
Senior Consultant ENT Surgeon and Rhinologist
Ascent ENT Alvernia Holdings Pte Ltd
Medical Centre D #08-63

Conquering Breast Cancer During Pregnancy

Having breast cancer when pregnant may be challenging, but there are effective treatments available, says Dr Lee Guek Eng, a senior consultant and specialist in medical oncology.

Receiving the news of a breast cancer diagnosis when pregnant can be overwhelming and too much to bear. Alarm bells ring, panic and anxiety may set in, and a ton of questions arises.

One in 3,000 pregnant women get breast cancer, according to the National Cancer Institute. However, there are treatments available to help navigate the disease.

"The priority for the mother is to have a thorough discussion with a multidisciplinary team of treating doctors. These



Dr Lee Guek Eng
Senior Consultant, Specialist in Medical Oncology
Icon Cancer Centre at Mount Alvernia
Medical Centre E #02-91



include a breast surgeon, a breast medical oncologist and her obstetrician," advises Dr Lee Guek Eng, a senior consultant and specialist in medical oncology at Mount Alvernia Hospital.

She will first have to undergo imaging tests and investigations before her care team can formulate an optimal course of treatment.

Treatment options for breast cancer while pregnant

Treatment for pregnant women with breast cancer is approached with the safety of both the mother and foetus as top priority.

There are three main methods to treat pregnancy associated with breast cancer. "The first is to offer treatment with chemotherapy and/or surgery," says Dr Lee. "The second is to consider a medical termination of the pregnancy, and the last option is to deliver the baby before initiating treatment." Each case is different based on factors like the type and stage of the cancer and the gestational age of the foetus.

One in 3,000

pregnant women get
breast cancer, according
to the National Cancer
Institute.

The stage of pregnancy plays a significant role in determining the treatment plan.

If breast cancer is diagnosed early, it is advisable for patients to undergo chemotherapy or surgery. However, chemotherapy can only be given from the second trimester onwards due to potential risks to the foetus. The medical team will closely monitor both mother and foetus, using only drugs that are safe for pregnant women.

If breast cancer is diagnosed towards the end of the pregnancy, treatment may be postponed until after delivery.

Risks of postponing treatment

For many pregnant women, the idea of postponing cancer treatment until after delivery may seem like a safer option so as not to affect the health of the growing foetus.

However, Dr Lee cautions against it unless the baby is very close to term. "Studies have shown that the survival of pregnant women with breast cancer is comparable to non-pregnant breast cancer patients provided that they start timely treatment," she says.

Given the complexities of the situation, the multidisciplinary medical team will work closely together to safeguard the well-being of both the mother and the foetus, ensuring neither's care is compromised.

For those worried about the side effects of chemotherapy during pregnancy, Dr Lee assures that the amount of chemotherapy drugs given is measured in doses according to the patient's height and weight so that they are well tolerated.

Safe adjunct treatments such as anti-emetics and anti-allergy medications are also given to reduce side effects, so most patients can get sufficient nutrition during their treatment. Where needed, the oncologist will also work with a dietitian to optimise nutritional intake for patients.

Roles of the multidisciplinary team in tackling breast cancer pregnancy

 **Breast surgeon:** The breast surgeon's primary role is to assess the tumour and determine the best surgical treatment, whether it's a lumpectomy or mastectomy. The surgeon will evaluate if surgery can be performed safely during pregnancy and plan the timing in coordination with the other specialists. The goal is to remove the cancer while minimising risk to the baby.

Breast medical oncologist: The medical oncologist oversees chemotherapy or other systemic treatments, ensuring the treatment is safe for both the mother and the foetus. The oncologist also monitors the cancer's progression and adjusts treatment plans as needed.

Obstetrician: The obstetrician's role is to monitor the health and development of the foetus throughout the cancer treatment; ensure that the baby is not adversely affected by the treatments; and manage any pregnancy-related concerns. Additionally, the obstetrician coordinates with the other specialists to determine the best timing for delivery if necessary, ensuring the baby's safe birth while balancing the urgency of the mother's cancer treatment.



Developmental dysplasia of the hip is a condition where the hip joint does not properly form in infants and young children.

When Your Child’s Hips Aren’t Right

Learn about developmental dysplasia of the hip in children, from recognising early symptoms to understanding treatment options.



Dr Lam Kai Yet
Paediatric Orthopaedic Surgeon
Bone Island Children’s Clinic
Medical Centre A #02-02

Ever notice how a child may be walking with a limp or have a clicking sound at the hips? It could be a sign of developmental dysplasia (dislocation) of the hip (DDH).

DDH is a condition where the hip joint does not properly form in infants and young children.

The condition is a common one, affecting about 1 in 1,000 newborns worldwide, says paediatric orthopaedic surgeon Dr Lam Kai Yet.

DDH encompasses a spectrum of hip abnormalities ranging from mild acetabular dysplasia (shallow sockets) to complete dislocation.

“The exact cause of the condition is not known and is likely due to multiple factors. There are several risk factors for DDH including breech presentation, big babies in small wombs, multiparous pregnancies, a family history of DDH and firstborn females. Interestingly, the condition is more common in girls than boys,” he adds.

Recognising the signs of DDH

DDH ranges in severity. It is usually painless. In its mildest form, there are no outward signs of unnatural movement.

In its more severe form, however, parents may notice decreased hip movement, particularly, hip abduction which is when the leg moves away from the middle of the body, on the affected side.

There may also be clunks or clicks on hip movement, and asymmetrical groin and thigh folds.

“When the child starts walking, other signs that may be present include a persistent limp, limb length discrepancy, or a waddling gait (if both hips are dislocated),” says Dr Lam.

Screening for newborns

Fortunately, most babies born in Singapore are screened at birth for DDH as part of newborn screening.

“Doctors perform the Barlow and Ortolani tests, which help to identify the babies that have DDH at the worst end of the spectrum,” explains Dr Lam.

He stresses that such clinical tests should be performed regularly when parents take their babies for vaccinations and routine screening in the initial months of their child's birth.

Babies found to have a higher chance for DDH will have to undergo further ultrasound screening at four to six weeks old. Ultrasound imaging helps to show the baby's anatomy clearly and is also safe for the baby as there is no exposure to radiation.

Once the baby hits six months of age, X-rays of the hips are more suitable to check for bones as the baby's cartilage has started to harden.

Clinical examinations used to detect DDH in infants

Barlow Test: Performed to assess if the hip can be dislocated. The doctor gently pushes the baby's thigh backward while the hip is flexed to feel if the hip moves out of the socket.

Ortolani Test: Used to confirm if a dislocated hip can be repositioned. The doctor gently lifts and moves the thigh outward to check if the hip can be relocated into the socket, often feeling a noticeable “clunk” if the hip is unstable.

Treating DDH at different ages

The purpose of screening at such a young age is to detect if there are any chances of DDH, allowing for early intervention and treatment. Milder forms of DDH may not even require treatment as they tend to resolve on their own.

Treatment of DDH differs at varying ages.



A Pavlik harness helps keep the baby's hips properly aligned and secure within the joint.

📅 At 0 to 6 months

The baby is treated in a Pavlik harness, which consists of some straps and foot stirrups that keep the child's hips in an abducted and flexed position. This is the most ideal position for hip development. The typical treatment time takes three months, and it is successful in over 95% of cases.

📅 At 6 to 12 months

The child may need surgery to release tight muscles around the hips, followed by wearing a hip spica cast for three months.

📅 At 12 to 18 months

Most children with DDH detected at this age are offered the option of surgery, as it can release tight muscles around the hips. Post-surgery, the child will have to wear a hip spica cast for three months too.

📅 At 18 months and above

At this age, the hip has been dislocated for quite some time and the child's bone structure is more developed. Surgery may be needed to release soft tissue and correct the bone.

“While surgery might sound scary, it can make a big difference for kids with DDH. Treating them will help them walk better and make sure they don't have problems with their hips when they get older, such as early hip osteoarthritis.”

– Dr Lam Kai Yet

Questions To Ask Before Your Hospital Stay

Be well-prepared for a smooth hospital experience by asking the right questions.



Hospital admissions can often be a daunting and anxiety-inducing experience. The unfamiliar environment, medical procedures, and uncertainties about what lies ahead can all heighten your worries.

However, asking key questions to clear any doubts can help alleviate some stress and give you a greater sense of control and confidence throughout your hospital journey.

Here are eight essential questions to ask before your hospital stay:

1 What are the costs of the hospital stay, and is my insurance coverage sufficient?

Hospital stays can quickly become expensive, so understanding the potential financial implications beforehand is essential. Ask for a breakdown of the

estimated costs, including room charges, doctor and anaesthetist fees if applicable, as well as fees for tests and medications.

Review your insurance coverage to understand what is included, and any out-of-pocket expenses you may need to cover. For instance, MediShield Life covers only subsidised costs incurred in Class B2 or C wards. Should you require broader coverage, consider an integrated shield plan (IP) which offers higher limits and coverage for higher-class wards. When in doubt, reach out to your insurance provider to ensure that you are financially prepared.

2 What is the admission process?

It is important to understand the hospital's admission process. Ask about the steps you need to take on the day of your admission — where to check in, what forms to fill out, and what documents you will need to bring.

Knowing how the process works, including how long it might take, will help make your arrival at the hospital less stressful and more efficient.

3 What will my daily routine be like during my hospital stay?

Getting a clear understanding of what your day-to-day experience will be like in the hospital can help you mentally prepare for your stay.

Ask about the typical schedule, including meals, medications, and when doctors are likely to visit. Clarify the expected duration of your stay, any tests or procedures you may need to undergo during your stay, and what kind of ancillary care you will receive, such as physiotherapy.

4 What should I bring with me for the stay?

Hospitals typically have a list of items you should bring, such as identification, insurance information, and current medications. However, it is important to confirm specifics, as they may vary depending on the hospital or the nature of your stay.

Ask if you need to bring any personal care items like toiletries or comfortable clothing. Knowing what is allowed and what is unnecessary will help you pack efficiently, and avoid missing out essential items.



5 Should I stop taking any medications?

Certain medications may need to be paused or adjusted before a procedure, particularly blood thinners or supplements. It is crucial to ask your doctor well in advance if any changes need to be made to your regular medications. This allows you to follow the proper instructions and avoid complications during your hospital stay.

It is also wise to inform your medical team of any over-the-counter drugs or supplements you are currently taking.

6 What support services are available?



Hospitals often offer a variety of support services to help both you and your family during your stay. Be sure to enquire about the availability of patient advocates, financial counsellors, emotional support resources, as well as lactation and baby care advisors for maternity care.

These services can help you alleviate some of the burden, ensuring you have the necessary support throughout your stay.

7 Who will be part of my care team?



Your care team comprises various hospital staff who will take care of you throughout your admission and procedure. Know the doctors, nurses and specialists who will be in your care team, and how each will be involved in taking care of you. This way, you will know who is the best person to contact should you require any assistance.

8 What is the discharge procedure?

Understanding the discharge process is just as important as knowing what to expect during your stay. Ask about the steps involved in discharge and any follow-up care you may need. Check when you can expect to be discharged so you can arrange for a family member to accompany you. Also ask if there are any specific instructions for post-hospitalisation care when you get home.

Knowing this information in advance will help you plan for a smooth transition from hospital to home.

Boost Your Brain by Nurturing Your Gut

The gut-brain relationship is a complex one where each organ affects the other. Ms Chinnayan Jayanthi, clinical dietitian at Mount Alvernia Hospital explains how to maintain a healthy gut while supporting mental health.

The phrase “you are what you eat” reflects how diet affects the body. Apart from affecting just one’s physical health, one’s mental health can also be affected by what they eat.

Ms Chinnayan Jayanthi, clinical dietitian at Mount Alvernia Hospital, explains the connection between the gut and brain, and advises how to nourish the body to support mental health.

What is the gut-brain connection and how does it affect cognitive function and mental health?

Known as the body’s second brain for its ability to function independently, the gut has its own nervous system, which is connected to the brain via the vagus nerve. This connection, known as the “gut-brain axis,” is how the gut influences brain function and behaviour.

The gut also produces most of the body’s neurotransmitters, chemicals responsible for transmitting messages within the brain. This includes over 95% of serotonin, a neurotransmitter that regulates mood, appetite, and sleep.

Additionally, the gut contains trillions of microorganisms, or gut microbiota, that produce substances that impact brain function.

Disruptions to the gut-brain axis have been linked to mental health issues like anxiety and depression, as well as impaired cognitive function.

The gut also supports the immune system, acting as a barrier against infections and helping to transport nutrients through lymph vessels.

What type of nutrients are needed for a healthy gut that supports mental health?

Fibre

Soluble and insoluble fibre from wholegrains, fruits, vegetables, legumes, nuts, and seeds act as prebiotics, helping to balance the gut microbiome, improve digestion, and enhance immune function.

Resistant starch

Wholegrains (oats, quinoa, brown rice, millet), legumes, and sweet potatoes are sources of this complex carbohydrate that helps stabilise blood sugar levels and promote serotonin production. By releasing glucose steadily, resistant starch helps maintain consistent energy levels and reduces mood swings. Unlike typical starches, resistant starch is fermented instead of digested, creating a gut-friendly environment that promotes the growth of probiotics.

Polyphenols and flavonoids

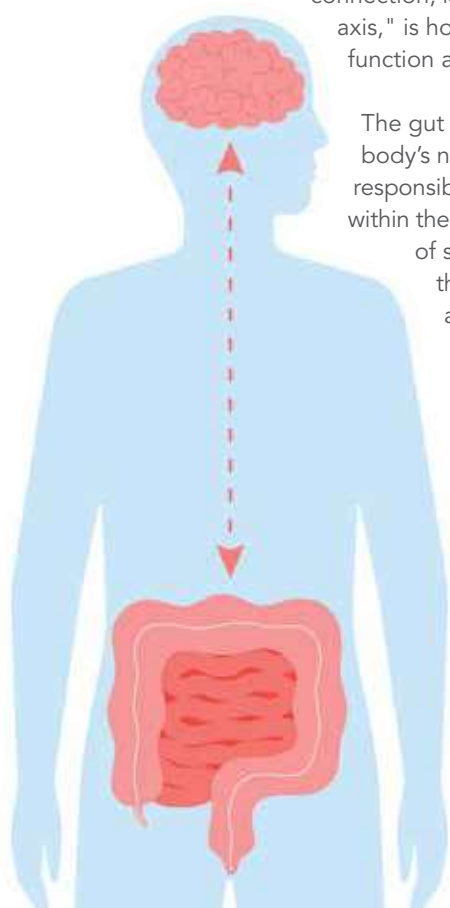
Found in foods like leafy greens (spinach, kale), berries, herbs and spices, polyphenols, including flavonoids, are powerful antioxidants that support gut health by reducing inflammation and encouraging the growth of beneficial gut bacteria.

Probiotics

Yoghurt, kefir, sauerkraut, kimchi, miso and tempeh are rich in probiotic strains called lactobacillus and bifidobacterium. These beneficial bacteria help improve immune and digestive health, and protect against infection.

Omega-3 fatty acids

Found in fatty fish, flaxseeds, chia seeds, and walnuts, omega-3 fatty acids have anti-inflammatory properties that reduce gut inflammation and support a healthy gut lining.



How can dietary choices increase or ease symptoms of anxiety and depression?

A diet rich in refined carbohydrates — such as white bread, pastries, and sugary snacks — can trigger hormonal responses that lead to mood swings, irritability, and anxiety. Consistent overconsumption of these carbs also contributes to weight gain and spikes in blood sugar levels, which further impact mood and heighten irritability.

Similarly, foods high in trans and saturated fats, like fried items and processed snacks, disrupt gut bacteria and their signalling mechanism, leading to increased cortisol and brain inflammation.

Excessive alcohol intake compounds the above effects, disrupting neurotransmitters, increasing stress, impairing sleep, and exacerbating symptoms of depression and anxiety.

What are some foods to incorporate into one’s diet to improve both gut and mental health?

One effective approach is to adopt the MIND diet, a blend of the Mediterranean and DASH diets (Dietary Approaches to Stop Hypertension), designed to support brain health.

The MIND diet emphasises foods rich in prebiotics, probiotics, fibre, and essential fatty acids, all of which contribute to overall wellness and cognitive function.

Here is how to start on the MIND diet:

Incorporate **30 plant foods** a week — vegetables, fruits, whole grains, and legumes as they contain prebiotics that feed the good bacteria in your gut



Include fermented products rich in **probiotics**



Drink **6 to 8** glasses of water daily



Eat at least **three** servings per week of wholegrains, beans and lentils



Add **colourful foods**



rich in polyphenols and antioxidants to fight against inflammation and get rid of free radicals



Consume **omega-3** rich foods such as oily fish, lean meat or poultry and olive oil

Health and Dental Support in One Place for Persons with Intellectual Disability

The Mount Alvernia Outreach Team partners with IDHealth to provide integrated medical and dental care for individuals with intellectual disability, enhancing accessibility and holistic support.



From left: Ms Clara Teo (senior manager, community outreach, Mount Alvernia Hospital), Dr Chen Shiling, Dr Berenice Chan, Dr David Lim, Ms Nina Widjaja (dental assistant, Mount Alvernia Outreach Dental Clinic), and Ms Grace Lai (former staff at IDHealth).

The Mount Alvernia Outreach Team has joined forces with IDHealth to offer a coordinated healthcare initiative designed to improve accessibility for Persons with Intellectual Disability (PWIDs). By arranging monthly sessions at the Mount Alvernia Outreach Medical and Dental Clinics at Enabling Village, this partnership enables PWIDs to receive both medical and dental care on the same premises, addressing the unique challenges faced by this community and their caregivers.

IDHealth is a community-based, integrated health team, committed to meeting the healthcare needs of adult PWIDs and their caregivers.

Breaking down barriers to accessible healthcare

PWIDs and their caregivers often struggle to find accessible healthcare. Not only is transportation between separate medical and dental facilities difficult, many healthcare

providers lack the specialised training needed to manage PWID patients who might struggle to stay still or communicate their needs. These challenges can lead to PWIDs' avoidance of necessary check-ups, further compromising both their physical and dental health over time.

Dr Chen Shiling, a medical doctor and founder of IDHealth, highlighted the importance of this initiative, saying, "The strength of having a medical and dental clinic co-locate cannot be underestimated. I believe being able to access both the doctor and dentist in the same session makes a significant difference for the patients and their families."

By centralising services, the collaboration aims to not only streamline healthcare visits but also foster a coordinated approach, where medical and dental providers can work closely to offer holistic care for PWIDs. As Dr Chen observed, "Our goal is not only to provide convenience in terms of visiting the same clinic for different services, but for the medical and dental team to work closely together to ensure holistic care for the patients."

Challenges in providing dental care for PWIDs

Dental care for PWIDs presents distinct challenges. Dr David Lim, a special care dentist involved in this initiative, understands these complexities well. He noted that, for PWIDs, common dental visits can be fraught with difficulty due to a mix of physical and communication barriers. Moreover, as many PWIDs are affected by co-morbid conditions or syndromic causes, addressing these factors requires an extra level of care and consideration.

Dr Lim explained, "Special Care Dentistry encompasses a range of techniques tailored to PWID patients."

The dental team for this initiative, consisting of Dr Lim, volunteer dentist Dr Berenice Chan, and the dental assistants at the Mount Alvernia Outreach Dental Clinic, employs strategies such as using music, video or a soft toy to provide distraction during treatment.



Special care dentistry encompasses techniques tailored to PWID patients such as using soft toys or music to provide distraction.

Other strategies Dr Lim uses in other clinic settings may include advanced behavioural supports, home-based dentistry, and conscious sedation techniques.

Tips for Caregivers Preparing PWIDs for a Dental Visit

Special care dentist Dr David Lim shares practical advice for caregivers.

1 Preparing for the appointment

Familiarisation is key. Caregivers can try showing a video or photo of the clinic beforehand, taking a quick walk in the area, or even doing a video walkthrough of the clinic. Also, bringing a familiar item like a toothbrush, and even a snack, can help reduce stress.

2 Easing anxiety during treatment

A positive tone and reassurance work wonders. Some caregivers may have their own dental anxiety, which can unintentionally transfer to the PWID. Try avoiding comments like, "If you don't listen, the dentist will pluck your teeth." Instead, envision a dental visit as a welcoming experience, even like a "playground" to ease nerves.

3 Maintaining oral health at home

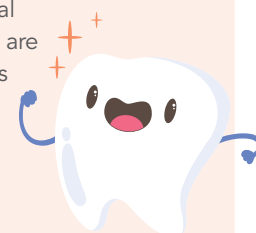
Oral care needs for PWIDs can vary widely. Generally, a soft toothbrush, fluoridated toothpaste, and some form of interdental cleaner (like a floss or interproximal brush) are essentials. Some may also require mouth props for keeping the mouth opened, headrests for managing swallowing, and mouth gels for dry lips.



Dr David Lim (right) with patient Mhd Sharizan.

4 Choosing the right dentist

Different dentists may suit different PWIDs and their caregiving teams; and not all practices have the tools and expertise needed for comprehensive Special Care Dentistry. Factors like the dental team's approach, environment, procedure costs, and access to techniques like sedation or general anesthesia can vary widely. Caregivers are encouraged to seek recommendations from support groups, do online research, visit clinics, or reach out directly for more information.



OUTREACH



Dr Chen Shiling (right) with Jing Ya.

Support for caregivers and families

This initiative not only impacts the PWIDs receiving care, but also supports the families and caregivers who accompany them. Many caregivers are unable to leave work for multiple trips to different clinics, and transportation can be a barrier. Offering joint medical and dental care in a single session help relieve these logistical burdens.

One beneficiary of this initiative is Ms Teo Jing Ya, a 30-year-old born with mild intellectual disability. Jing Ya's mother, Mrs Teo, shared the difficulties her daughter faced, "It is not easy to find a doctor for Jing Ya, who's not able to verbalise her health issues. The doctor she used to see is also far from home. As for dental needs,

Jing Ya stopped going to the dentist due to previous negative experiences."

Now, with the option to receive both medical and dental care at the Outreach Clinics, Mrs Teo felt relieved.

“ Being able to see the medical doctor and dentist on the same premises is very helpful, especially for working caregivers like myself. ”

– Mrs Teo

Looking ahead to supporting more PWIDs

Since its launch in July this year, the programme has held monthly sessions, with plans to expand as demand and resources grow. This format is designed to maintain a manageable flow of patients, allowing the team to give each patient adequate attention.

Dr Chen highlighted the importance of breaking down barriers that PWIDs face in accessing quality healthcare. "To improve care, we will need to target all of these barriers," She elaborated. "This includes increasing the number of primary care touchpoints for adults with intellectual disability, improving clinicians' knowledge and skillsets, addressing communication barriers, and educating disability service providers and caregivers to

better recognise healthcare needs in those they support."



As such, this collaboration between the Outreach Team and IDHealth aims to add a crucial primary care touchpoint for adult PWIDs, offering comprehensive medical and dental services tailored to their unique needs.

The Mount Alvernia Outreach Team is hopeful about the impact of this partnership, which reflects a shared commitment to PWIDs. Although still in its early stages, the programme has already shown positive effects on both patients and caregivers, providing reassurance that healthcare can indeed be adapted to meet diverse needs.

Community Health Comes to Life at Parking Day 2024

The Mount Alvernia Outreach Team was invited by its long-term social service partner, Beyond Social Services, to participate in the annual Parking Day event, held on 14 September at the carpark of Block 52, Lengkok Bahru. The event aims to promote community initiatives relating to health, and featured booths from various resident associations, social service and health organisations, along with telematch games, Zumba, and a lucky draw.

Parking Day, a global movement, temporarily transforms parking lots into community spaces, encouraging people to share ideas on health, wellness, and community well-being.

The Outreach Team's booth engaged participants through a fun quiz with giveaways, with the aim of raising awareness of the services offered at the Mount Alvernia Outreach Clinics at Enabling Village. Free basic health checks at the Outreach Clinics were also extended to Lengkok Bahru's rental flat residents.

Ms Clara Teo, senior manager of community outreach at Mount Alvernia, remarked, "This is the team's second year of participation in Parking Day. Events such as this bring healthcare closer to residents and allow us to build awareness in a friendly, accessible way."



Ms Clara Teo with a participant at Parking Day 2024.

Bringing Mobile Mammogram Screening to the Community



19 women received mammogram screenings on board the Mammobus.

On 2 October, the Mount Alvernia Outreach Team, Beyond Social Services and South Central Community Family Service Centre, co-organised a Community Mammobus event at Enabling Village.

The Mammobus, Singapore's first mobile digital mammogram screening centre offered by the National Healthcare Group, provides an all-female environment, with an experienced radiographer conducting the screenings.

Aimed at making mammogram screenings more accessible and affordable to the population, the initiative was available to women aged 40 and above. Singaporeans and Permanent Residents residing in Lengkok Bahru and Redhill received screenings either for free or at subsidised rates, with additional subsidies provided by the Outreach Team for transnational spouses.

19 women signed up for this on-site mammogram service, with six also receiving complimentary chronic disease screenings at the Mount Alvernia Outreach Clinics in Enabling Village, marking a meaningful step in supporting community health and early detection efforts for women from low income families.

Mount Alvernia Outreach Team Offers Hope to Two Women Named Siti

Through Mount Alvernia Hospital’s support programme for transnational spouses, two women named Siti, facing different challenges, have found renewed hope and critical healthcare support in Singapore.

For Mdm Siti Ayisha and Mdm Siti Zuraida, the first name they share is a common thread in their stories of struggle and resilience. Both women have faced significant challenges as transnational spouses in Singapore. Through the Mount Alvernia Outreach Team’s hospital-based support programme, which assists financially struggling transnational spouses ineligible for government health subsidies to access essential healthcare, they are finding hope for a brighter future.

Mdm Siti Ayisha: Restoring sight and hope

Mdm Siti Ayisha, a 52-year-old Filipino, arrived in Singapore 30 years ago with her late husband, a Singaporean whom she met in Dubai. Her second marriage ended in divorce, leaving her to care for three children alone, as her second husband lacks capacity to provide any alimony or child support. Currently on a Long-Term Visit Pass, she lives in a one-room HDB rental flat with her children, unemployed, and battling a critical health crisis.

Mdm Ayisha is severely diabetic, and the long-term effects of the disease have led to a serious condition known as diabetic retinopathy, where high blood sugar levels have caused damage to the retina in both eyes, putting her sight at risk. Her condition has also affected her ability to walk properly.

Her plight came to the attention of the Mount Alvernia Outreach Team through the Social Service Office @ Kreta Ayer and Bukit Merah.

The Outreach Team arranged for Mdm Ayisha to have her condition assessed at the Eagle Eye Centre (EEC), who

graciously waived charges for all diagnostic tests done at their clinic. The assessment revealed bleeding and retinal damage in her right eye that could not be treated with laser therapy alone. A procedure known as vitrectomy (surgical removal of the vitreous fluid from the eyeball) was required to repair the retina and save her vision.



A smiling and relieved Mdm Ayisha (centre) with her eldest son (right), and her case manager from the Outreach Team, Ms Yang Yuzi.

Dr Paul Zhao, a senior consultant ophthalmologist at EEC, performed the surgery pro bono. Laser treatment was also provided for her left eye. The Outreach Team covered Mdm Ayisha's hospitalisation charges.

"Words cannot express how grateful I am," says Mdm Ayisha. "Without this help, I could have lost my vision and ability to care for my children." The successful surgery allowed her to focus on managing her diabetes at the Mount Alvernia Outreach Medical Clinic.



Mdm Zuraida (left) with Ms Anthea Neo.

Mdm Siti Zuraida: Another Siti, another journey

Mdm Siti Zuraida, a 50-year-old Indonesian, has been living in Singapore for 24 years. Married to a 70-year-old Singaporean, she is currently undergoing divorce proceedings. As her husband is not willing to continue sponsoring her Long-Term Visit Pass, her greatest worry is not being able to remain in Singapore to care for their 14-year-old son. She is currently holding a Short-Term Visit Pass, which prohibits her from working.

Mdm Zuraida's health issues came to light when she experienced prolonged menstruation, extreme fatigue and lightheadedness. She has put off seeking medical help for her symptoms since she is not working, and unable to pay for any medical bills.

Mdm Zuraida's social worker from the THK Family Service Centre @ Macpherson reached out to The Inclusive Fund, who referred her to the Mount Alvernia Outreach Team. The Team then arranged for her to be assessed by obstetrician and gynaecologist Dr Lee Lih Charn. During her examination, Dr Lee noted that her full blood count was dangerously low at around 5g/dL (the normal range being 11 to 16g/dL), indicating severe anaemia. Dr Lee advised immediate admission for a blood transfusion,

along with a pelvic ultrasound and hysteroscopy to investigate the cause of her prolonged menstruation.

The Outreach Team covered all hospitalisation charges, while Dr Lee waived her consultation and procedure fees. After the transfusion and procedure, Mdm Zuraida felt revitalised, and expressed her feelings of relief, "I am very grateful to the Outreach Team and Dr Lee for covering my medical bills. It feels like God has sent me angels, offering help when I needed it."

Providing renewed hope

Both Mdm Ayisha and Mdm Zuraida's stories illustrate how the Mount Alvernia Outreach Team's support programme for transnational spouses has helped change lives.

"Our objective is to provide crucial care to this underserved community, offering not just financial assistance, but also renewed hope," shared Ms Anthea Neo, assistant director of community outreach at Mount Alvernia Hospital.



Contact outreach@mtalvernia.sg to find out more about Mount Alvernia Hospital's outreach programmes.

Welcoming Mount Alvernia's New Medical Specialists

Mount Alvernia Hospital is pleased to introduce 18 new specialist doctors who have recently joined the Mount Alvernia family. Let's warmly welcome them as they uphold the hospital's mission to **Serve all with Love!**



Dr Foo Chek Siang
Clinic for Digestive Surgery

Dr Foo Chek Siang is a general and upper gastrointestinal surgeon who has been in private practice since 2012 after 15 years of working in restructured hospitals. He had previously undergone fellowship training in a double fellowship, firstly at the Institute of Laparoscopic Surgery in Bordeaux, France in advanced laparoscopic techniques. This was followed by a year in advanced upper gastrointestinal and bariatric surgery in St George Hospital, Kogarah-Sydney in 2019.

Dr Foo's repertoire ranges from endoscopy and general surgical procedures to advanced laparoscopic resections of upper gastrointestinal cancers that include the oesophagus and stomach. This also includes metabolic and bariatric operations that assist in weight loss for the improvement of diabetes and related conditions.



Dr Jacqueline Jung Jingjin
ACJ Women's Clinic
Pte Ltd

Dr Jacqueline Jung graduated from the Imperial College School of Medicine, London in 2008 and obtained her Membership of the Royal College of Obstetricians and Gynaecologists, United Kingdom in 2015. She is a Ministry of Health Singapore, Specialists Accreditation Board-recognised obstetrician and gynaecologist.

Prior to entering private practice, Dr Jung was a consultant with the Minimally Invasive Surgery Unit in KK Women's and Children's Hospital. She subspecialises in advanced minimally invasive surgery for benign gynaecological conditions such as fibroids, ovarian cysts and endometriosis, and is a certified advanced laparoscopic surgeon. She is also a council member for the Society of Gynaecological Minimally Invasive Surgery Singapore.

Dr Jung is a strong advocate for patient care and firmly believes that every patient deserves the best when it comes to their health and pregnancy journey.



Dr Lau Leok Lim

Orthopaedic and
Hand Surgery
Partners

Dr Lau Leok Lim, an orthopaedic surgeon specialising in spine surgery for more than 13 years, is an expert in both the operative and non-operative care of spinal conditions across all age groups. Whilst in public service, he routinely managed a high volume of patients and performed hundreds of surgeries annually.

One of Dr Lau's notable achievements is leading a decade-long project that achieved the aim of reducing surgical eligible rates for adolescent idiopathic scoliosis by championing preventative measures. He introduced advanced innovative surgical techniques for the most severe scoliosis, and also embraces technology such as vertebral-body tethering (VBT), robotic surgery, endoscopic deformity correction and 3D printing to optimise patient care.

A recognised leader in spine surgery, Dr Lau presents regularly at the national and international medical conferences.



Dr Darren Lee Hai Liang

Heart & Lung Centre
@ Alvernia Pte Ltd

Dr Darren Lee practises general adult cardiothoracic surgery, with special interests in minimally invasive cardiac surgery and extracorporeal (ECMO) life support. He graduated from the University of Dublin in 1999, and trained in cardiothoracic surgery at the National University Hospital, Singapore (NUH). He continued on at the Department of Cardiac, Thoracic and Vascular Surgery at NUH where he became a consultant surgeon in 2017.

Dr Lee was the clinical lead surgeon and programme director for the Endoscopic Harvest of Long Saphenous Vein (EVH) programme, which he expanded to include endoscopic harvest of radial artery and sural nerve. He also helped develop the ECMO programme in the department.

Dr Lee was a clinical tutor at the National University of Singapore, and faculty for the two-yearly specialty update courses at NUH.



Dr Liew Woei Kang

SWC Paediatric
Clinic (Alvernia)

Dr Liew Woei Kang is a paediatrician subspecialising in paediatric allergy, immunology and rheumatology. He is experienced in managing allergy disorders (asthma, allergic rhinitis, eczema, food and drug allergies); immunological disorders (inborn error of immunity and periodic fever syndromes); and rheumatological disorders (Kawasaki disease and juvenile idiopathic arthritis).

Beyond standard therapies, he is also well-versed in prescribing allergen/food immunotherapy, immunoglobulin replacement and various biologics for severe allergies and autoimmune diseases.

Dr Liew continues to be a visiting senior consultant paediatrician at KK Women's and Children's Hospital's Department of Rheumatology and Immunology. He remains active in professional matters, and has served as the past president of the College of Paediatrics and Child Health, Singapore, and the Allergy Clinical Immunology Society (Singapore).

DOCTORS



Dr Cheryl Loh
Garden Grove Clinic

Dr Cheryl Loh completed her medical undergraduate degree at the National University of Singapore in 1999, and specialty training in psychiatry in 2008. Before starting private practice in 2024, she has worked as a psychiatrist in Changi General Hospital, where she started the Adolescent Psychiatry Service in 2008 and its head of department from 2020 to 2024.

Dr Loh has special interests in adolescent depression, obsessive-compulsive disorder, and high functioning Autism Spectrum Disorder. She also treats adult general psychiatry conditions including depression, anxiety, schizophrenia, bipolar disorder and dementia; and sees primary school children with behavioural and adjustment difficulties.

Dr Loh approaches her patients with patience and gentleness, and engages them with common sense and humour.



Dr Amitabh Monga

Clinic for Liver &
Digestive Disorders
Pte Ltd

Dr Amitabh Monga is an academy-accredited, fellowship-trained gastroenterologist subspecialising in advanced therapeutic endoscopy, apart from general gastroenterology and hepatology.

Dr Monga pursued his specialist training at Tan Tock Seng Hospital, and was accredited as a specialist in gastroenterology in 2009. He completed a fellowship in advanced therapeutic endoscopy and endoscopic retrograde cholangio-pancreatography (ERCP) at the Asian Institute of Gastroenterology (AIG), India, and received his Fellowship of the Royal College of Physicians of Edinburgh in 2013.

Dr Monga is currently a visiting consultant at Raffles Hospital, Tan Tock Seng Hospital and Khoo Teck Puat Hospital. He has performed numerous ERCPs, as well as oesophageal, duodenal and colonic stent placements.



Dr Shanna Ng
Shan Yi

Ark Dermatology

Dr Shanna Ng is a dermatologist subspecialising in paediatric dermatology and eczema. Before entering private practice, she was a consultant at Changi General Hospital (CGH), and a clinical assistant professor with Singhealth Duke-NUS Medicine Academic Clinical Programme. She is currently a visiting consultant with the Eczema Clinic at CGH.

Dr Ng was awarded the Eastern Health Alliance Human Manpower Development Program Fellowship sponsorship to pursue subspecialty training in paediatric dermatology at the University of Miami's Miller School of Medicine, USA in 2015.

She has published in peer-reviewed scientific journals and contributed to the textbooks Pediatric Dermatology 4th edition, Atlas of Asian Pediatric Dermatology and Pediatric Skin of Color; and was the principal and sub-investigator for trials studying the efficacy and safety of biologics in moderate to severe atopic dermatitis.



**Dr Cheryl
Ngo Shufen**

Adult & Child Eye
(ACE) Clinic

Dr Cheryl Ngo is the founding director of Adult & Child Eye (ACE) Clinic. She graduated from the National University of Singapore (NUS) in 2005, receiving the Singapore Medical Association Medal and Yeoh Khuan Joo Gold Medal for Surgery.

Dr Ngo completed specialist ophthalmology training in Singapore and holds a Master and Fellowship of Medicine (Ophthalmology). She is a Fellow of the Royal College of Surgeons of Edinburgh, vice chairman of the Paediatrics Subspecialty Committee (Academy of Medicine) Singapore, and a member of the American Association for Pediatric Ophthalmology and Strabismus.

Dr Ngo did her subspecialty fellowship training at Toronto's Hospital for Sick Children in 2014, specialising in complex eye conditions. She was the former head of paediatric ophthalmology and research director at National University Health System, and is currently a visiting consultant and adjunct assistant professor at NUS.



**Dr Christina
Ong**

Paediatric &
Gastroenterology
Clinic

Dr Christina Ong is a paediatrician with over 20 years of clinical experience, and a senior paediatric gastroenterologist adept at treating children with gastrointestinal problems. She is dually accredited for paediatric medicine and paediatric gastroenterology in both the UK and Singapore; and is one of the few accredited paediatricians in Singapore who can perform gastroscopy and colonoscopy in children and adolescents.

Dr Ong graduated from the Imperial College, London, and completed her general paediatric and neonatology training in the UK. She then subspecialised in paediatric gastroenterology, hepatology and nutrition at Great Ormond Street Hospital for Children, Royal Free Hospital and King's College Hospital in London.

Formerly the head and senior consultant of the Gastroenterology Service at KK Women's and Children's Hospital, Dr Ong continues to serve as a visiting consultant after entering private practice.



**Dr Quan Wai
Leong**

Clinic for Liver &
Digestive Disorders
Pte Ltd

Dr Quan Wai Leong, a senior consultant gastroenterologist and interventional endoscopist, graduated from the National University of Singapore in 1992. After completing his training in gastroenterology at Tan Tock Seng Hospital, Dr Quan spent a year at the Prince of Wales Hospital, Hong Kong focusing on advanced therapeutic endoscopy including endoscopic retrograde cholangio-pancreatography (ERCP) and cholangioscopy, endoscopic ultrasound, luminal stent placement and various mucosal resection techniques.

Previously a senior consultant and the director of the Endoscopy Centre at Tan Tock Seng Hospital from 2010 to 2017, Dr Quan introduced the first Spyglass cholangioscopy system in Singapore to manage difficult bile duct and pancreatic duct stones.

Dr Quan's areas of specialty include ERCP, Spyglass cholangioscopy, endoscopic ultrasound and fine needle aspiration, endoscopic mucosal resection, enteral dilation and stent placement, and double balloon enteroscopy.

DOCTORS



**Dr Sriram
Shankar**

Heart & Lung Centre
@ Alvernia Pte Ltd

Dr Sriram Shankar is a cardiothoracic surgeon, specialising in adult and paediatric cardiothoracic surgery and vascular surgery. After training in the UK and at the Singapore General Hospital (SGH), he spent a year as a fellow in cardiac surgery at the Children's Hospital, Birmingham, UK.

He served as a senior consultant at SGH and a head in KK Women's and Children's Hospital. He also served as a visiting consultant in National University Hospital from 2009 to 2018 where he developed the Cardiothoracic Service for Children.

Dr Shankar was involved in capacity building in cardiac surgery and training local surgeons in various adult, infant and neonatal heart procedures in Friends Without Border's Hospital in Siem-Reap, Cambodia from 2004 to 2015, and Nhi Dong 1 Hospital in Ho Chi Minh City, Vietnam between 2008 and 2017.



**Dr Tan Bo
Chuan**

Clinic for Digestive
Surgery

Dr Tan Bo Chuan is a general surgeon specialising in upper gastrointestinal surgery and bariatric surgery. He was previously the head of the Upper Gastrointestinal and Bariatric Surgery Unit and clinical director of the Integrated Care for Obesity and Diabetes Centre at Khoo Tech Puat Hospital.

Dr Tan earned his Master of Medicine (Surgery) from the National University of Singapore in 2016 and completed his residency training in 2017. He then pursued an Upper Gastrointestinal Surgery Fellowship at Seoul National University Bundang Hospital, training under Professor Kim Hyung-Ho, a renowned gastric cancer surgeon in South Korea.

Dr Tan has a deep clinical passion in minimal access gastrointestinal surgery, encompassing both oncological and metabolic spectrums, in addition to the use of endoscopy in diagnosing gastrointestinal disorders.



**Dr Angelin Tan
Yean Swee**

SWC Paediatric
Clinic (Alvernia)

Dr Angelin Tan is a paediatrician with extensive experience looking after newborns, children and adolescents. She graduated from the National University of Singapore in 1983 and obtained her Master in Paediatrics in 1990.

Before setting up her own private practice, Dr Tan worked at the National University Hospital (NUH). She was instrumental in setting up the ambulatory paediatrics division in NUH, and also facilitated the multidisciplinary clinics.

Dr Tan has published papers in medical journals including the British Medical Journal, European Journal of Paediatrics and The Journal of the Singapore Paediatric Society on various topics including chickenpox and the varicella vaccine, and oral desmopressin for nocturnal enuresis.



**Dr Francis
Wong Keng Lin**

Island Orthopaedics

Dr Francis Wong, a consultant orthopaedic surgeon, completed his Master of Clinical Investigation and PhD at the National University of Singapore (NUS), specialising in stem cell and exosome therapy for cartilage regeneration. He was the first nationally funded orthopaedic surgeon scientist, and has won numerous national level research grants and accolades.

Dr Wong is a world-renowned expert in the field of joint preservation, cartilage repair and orthopaedic regenerative medicine, as well as advanced wound healing and diabetic limb salvage. He formed the Diabetic Limb Salvage Team in Sengkang General Hospital (SKH) which won the Singapore Health Quality Service Award Best Team Award in 2024.

Dr Wong is currently an adjunct associate professor in NUS, and a visiting consultant at National University Hospital and SKH.



**Dr Wong
Keng Yean**

Paediatric
Cardiology

Dr Wong Keng Yean trained in paediatric cardiology for two years in the Royal Children Hospital, Melbourne, Australia. He then worked in the National Heart Centre for two years before setting up and heading the Cardiology Department in KK Women's and Children Hospital (KKH) for 15 years.

Dr Wong was an associate clinical professor and adjunct associate professor at the National University Hospital, and an adjunct associate professor at Duke Graduate Medical School. He was a visiting consultant to the Singapore National Heart Centre, as well as Singapore General Hospital and KKH.

Dr Wong has published research papers on paediatric cardiology in local and overseas journals, and gave the 8th College of Paediatrics and Child Health Lectureship 2013 which was awarded to distinguished College members in recognition of their work in the field.



**Dr Janice Wong
Tzen Yuen**

SWC Paediatric
Clinic (Alvernia)

Dr Janice Wong is a paediatrician with an interest in paediatric neurology and neuro-disability. She has extensive experience managing a wide range of childhood conditions, including newborn and children diseases, paediatric neurology, behavioural and developmental disorders such as global developmental delay, speech delay, autistic spectrum disorder, and ADHD. Proficient in treating children with cerebral palsy and other neuro-disabilities, she is also one of the few paediatricians trained in administering botulinum toxin therapy for spasticity.

After graduating from the University of Sheffield in 1996, Dr Wong completed her postgraduate degree in paediatric medicine in the United Kingdom in 2002, and a fellowship in paediatric neurology and neuro-rehabilitation at Sydney Children's Hospital in 2006. She currently serves as Honorary Secretary of the Cerebral Palsy Alliance Singapore.



**Dr Yeo Tong
Hong**

Paediatric &
Neurology Clinic

Dr Yeo Tong Hong is a senior consultant paediatrician and paediatric neurologist trained in the UK. His special interests in paediatric neurology include seizures and epilepsy, tics and Tourette syndrome, headaches and migraines, dystonia and movement disorders, and cerebral palsy. His clinical expertise includes management of children with neurological conditions as well as performing ultrasound-guided botulinum toxin therapy and invasive neuromodulation.

Formerly the head and senior consultant of the Neurology Service at KK Women's and Children's Hospital (KKH), Dr Yeo continues to serve as a visiting consultant at KKH after entering private practice.

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