

# SMA

NEWS



Volume 45 No. 10 October 2013

MCI (P) 211/01/2013



Staying in the

**PINK** of **HEALTH**

**The 44th SMA National Medical Convention**



Participants looking forward to the informative sessions lined up for them

## Staying in the **PINK** of **HEALTH**

The 44th SMA National Medical Convention

By Mellissa Ang

### Public Symposium

**W**oman – a single word that entails multiple connotations and responsibilities: daughter, sister, mother, caregiver, and – although some may abhor this particular reference – the weaker sex. Without any gender prejudice, speakers at the 44th SMA National Medical Convention, held on 31 August 2013 at the Suntec Singapore International Convention & Exhibition Centre, enlightened participants about the truth behind why women are more vulnerable than men, at least health-wise.

Dr Bertha Woon, Chairperson of the Convention Organising Committee, delivered her welcome address to a 300-strong audience comprising mainly female members of the public (except for a handful of dedicated male attendees), and officially kicked off the public symposium. Dr Woon thanked the audience for their support, and concluded her speech with the well-known Chinese saying, *nu ren neng ding ban bian tian* (literally “women can hold up

half the sky”, meaning “women are capable of greatness”). SMA President A/Prof Chin Jing Jih then took the stage to give his opening address. Although SMA is the national medical organisation representing the majority of medical practitioners in both the public and private sectors, A/Prof Chin emphasised that SMA believes in empowering patients as well. He explained, “Preventive health for women is very important, and the reason why we chose such a ‘pink’ topic this year was because we know that it’s quite stressful to be a woman today.”

#### Heart matters

The convention’s keynote speaker, Dr Carolyn Lam spoke about cardiovascular diseases in women and professed, “The most important reason why I’m here is because I’m a woman, and I *really* get it.” She proved that she *really* gets it as she joked that housework does not count as a form of exercise, which is an excuse commonly used by older Singaporean women. Dr Lam, a consultant cardiologist at the National University Heart Centre, shared that despite popular belief that breast cancer is the major cause of death in Singapore women, cardiovascular





Dr Carolyn Lam

**By the time girls are seven, they can identify something they would like to change about their appearance.**

– Psychiatrist Dr Lee Ee Lian on lifestyle habits and how they affect women



**When affection is only demonstrated in the context of sex, women in particular can feel used.**

– Obstetrician and gynaecologist Dr Yong Tze Tein on improving sexual intimacy



**Some tips on how to improve sleep include adjusting to a cool temperature, turning off the bedroom lights, setting regular sleep and waking times, and avoiding alcohol and caffeine.**

– Prof Michael Chee, faculty member at Duke-NUS Graduate Medical School, on how to get a good night's rest



disease (heart disease and stroke) is the actual top culprit, taking the lives of one in three women in Singapore.

Are heart diseases the same in women and men? According to Dr Lam, the differences are aplenty. A Google search on “person having heart attack” brings up images of white males gripping their chests tightly. However, she clarified that this does not reflect real-life situations. Most of the time, women face different symptoms, risk factors, outcomes and disease mechanisms as compared to men. As women are inherently more complicated, they experience less recognisable symptoms like jaw pain, neck pain, nausea, fatigue, or sometimes, as patients often describe it – *zhat zhat* (Hokkien for “chest tightness”). Dr Lam warned women in the audience to not dismiss symptoms of an

impending heart attack with reasons like “it must be stress” or “I should not have eaten that plate of *char kway teow*”. She then explained how a heart attack differs between men and women, with an easily understood analogy about how the two genders distribute fat in their bodies – “men just dump the fat in one spot along the artery while women tuck the fat away neatly throughout”. Most importantly, Dr Lam advised that there is still hope as some risk factors for cardiovascular disease, such as obesity, are controllable.

After Dr Lam wrapped up her insightful keynote lecture, the audience could choose to attend any one of four different breakout sessions with these overarching themes – body image, sexuality, sleep and ageing changes (the first three breakout sessions were conducted in English, and the last in Mandarin). Many participants adjourned to the Mandarin breakout room for three half-hour discussions on ageing, led by Dr Tan Puay Ling, Dr Esther Chuwa and Dr Christopher Chong respectively.

**Handling hand and wrist conditions**

Dr Tan Puay Ling, a Hand Surgery consultant at Tan Tock Seng Hospital, spoke about the degenerative conditions in the hand and wrist, which are prevalent in women due to the stress incurred from daily activities like carrying babies or doing housework. Throughout her presentation, Dr Tan used numerous illustrations to provide more in-depth explanations about the conditions, and participants were seen mimicking the positions that she showed on the screen.

**Understanding breast cancer**

Following recent news about actress Angelina Jolie’s double mastectomy, Dr Esther Chuwa, a breast surgeon in private practice, explored the topic of breast cancer. After Dr Chuwa explained the characteristics and risk factors of breast cancer, she teased that instead of making a medical decision that goes to extremes like Jolie, Singaporean women should follow the Government’s call to give birth and breastfeed more.

**Addressing urogynaecological issues**

Dr Christopher Chong, an obstetrician and gynaecologist in private practice, conducted the last discussion in the Mandarin session with a variety of topics related to Urogynaecology, which is a surgical subspecialty of Urology and Gynaecology. Besides sharing the symptoms of conditions like pelvic organ prolapse and urine incontinence, Dr Chong urged females in the audience to go for regular screening and to adopt prevention techniques.

The Public Symposium’s various breakout sessions concluded at noon, and participants left the Convention Centre empowered with newfound knowledge about female-centric topics and armed with a goodie bag each.



## Lunch Symposium

The Public Symposium concluded at noon, but the convention programme continued into the afternoon with the Lunch Symposium, which was sponsored by Delphi Bioscience, Majeton and Sincere Medical Specialist Centre for Women (Singapore). The audience, comprising medical practitioners and healthcare workers, enjoyed a sumptuous buffet lunch while listening to the three speakers, Dr Dharshini Gopalakrishnakone, Dr Michele Lee and Dr Tay Eng Hseon discuss treatment and management methods for different female conditions.

### The new age of menopause treatment

Dr Dharshini Gopalakrishnakone, a consultant obstetrician and gynaecologist in private practice, provided insights into how doctors could help menopausal and

postmenopausal female patients deal with this natural process.

Although menopause is a result of various types of hormonal imbalances, oestrogen levels have been heavily discussed and researched on for menopause management. As such, Dr Dharshini devoted approximately half of her discussion on oestrogen levels for menopause management, as this particular hormone has multiple functions, which include increasing metabolic rates and blood flow, and helping to prevent muscle damage. After Dr Dharshini described the three types of oestrogens – oestrone (O1), oestradiol (O2) and oestriol (O3), she revealed that there is evidence showing that O3, which is mostly produced during pregnancy, protects women against breast cancer and blocks off O1 by occupying the oestrogen receptors of breast cells, in addition to other benefits.

There are two competing pathways in oestrogen metabolism, 2-hydroxyestrone and 16-hydroxyestrone. Dr Dharshini advised that doctors should help postmenopausal patients work towards acquiring the 2-hydroxyestrone pathway as it can be protective against cancer when methylated by the catechol-O-methyltransferase enzyme. She suggested that one way that doctors could raise 2-hydroxyestrone levels in patients without introducing additional medical supplements, was to advise them to ingest cruciferous vegetables and high protein products.

On top of using blood specimens to determine oestrogen levels, Dr Dharshini said that she uses saliva (to test for O1, O2 and O3 levels on a cellular level) and urine specimens. She opined that if oestrogen levels are determined solely on blood specimens, it may be an underestimation of the amount of oestrogen in the female patients. Apart from oestrogen levels, Dr Dharshini briefly discussed progesterone, testosterone and dihydroepiandrosterone deficiencies, and recommended treatments and supplements for these conditions.

### Fertility management beyond primary care

Like Dr Dharshini, Dr Michele Lee is also a consultant obstetrician and gynaecologist in private practice. Dr Lee discussed fertility management – probable causes, available tests for infertility in primary care, and the pros and cons of various treatment options. She advised that doctors in primary care could consider ordering various tests for their patients who are experiencing difficulties conceiving, such as ultrasound scans to exclude gynaecological pathology like ovarian cysts, and blood tests to rule out anaemia and diabetes. She recommended three different treatments to improve a patient's fertility: ovulation induction, surgery and assisted reproductive techniques.

Dr Lee suggested that doctors could use ovulation induction treatment for patients with polycystic ovarian



syndrome (which approximately 20% of women with fertility problems suffer from), as they have irregular menstruation and do not ovulate regularly. Oral medication will be prescribed to the patients first, before they can opt for hormonal injections to increase their chances of conceiving. With regard to the second treatment option, Dr Lee stated that there are two types of surgery for fertility treatment: therapeutic laparoscopy and hysteroscopy. She pointed out that when doctors advise patients about the treatment options, they should note that ovulation induction only lasts for one menstrual cycle, while the positive effects of surgery usually last for approximately six months. After Dr Lee defined the suitable patient candidates for intrauterine insemination (IUI), she highlighted that when administering this treatment method, doctors should ensure that the tubes used are patented before the process is carried out. In addition, she introduced the option of in vitro fertilisation if repeated tries of IUI were unsuccessful, and if the female patients are fairly young and do not have any fertility problems.

### Evolution of cervical testing – cytology testing and what next?

The last speaker for the lunch symposium, Dr Tay Eng Hseon is a medical director of a private cancer centre, and he shared the evolution of cervical testing. Showing statistics from a nationwide survey on cancers in female Singaporeans over the last 40 years, Dr Tay proudly declared that cervical cancer was the second most common cancer 40 years ago but is the ninth most common cancer among Singapore women today.

Dr Tay emphasised the importance of detecting the pre-cancerous phase in women, which he claims has been the objective over the last 40 years. While Dr Tay acknowledged the effectiveness of the widely-used Pap smear test to detect cervical cancer thus far, he pointed out that it is not an accurate test as it has up to 30% false negative rates due to improper sampling and preparation errors. Dr Tay shared that according to a 1999 medical research paper, an earlier finding showed that the human papillomavirus (HPV) was found in 93% of cervical cancers but it was later revised to be prevalent in almost all cervical cancer patients.<sup>1</sup> Consequently, the importance of HPV testing has increased over the last decade, and there has been an international shift towards liquid-based mediums which HPV testing requires. The Delphi screener, a vaginal self-sampling medical device validated to be used for cervical cancer screening, was one such medical invention. Dr Tay addressed doubts surrounding this new device, including its effectiveness for Asian women since the device was developed in Netherlands. He then showed the public's acceptance of the Delphi screener from a



Dr Dharshini Gopalakrishnakone



Dr Michele Lee



Dr Tay Eng Hseon

local research study that sampled 150 local women aged between 25 to 69 years old who never had a Pap smear for four years or more, to look at the susceptibility of the new device.

### Reference

1. Walboomers JM, Jacobs MV, Manos MM, et al. Human papillomavirus is a necessary cause of invasive cervical cancer worldwide. *J Pathol* 1999; 189(1):12-9. Available at: <http://www.ncbi.nlm.nih.gov/pubmed/110451482>. Accessed 1 October 2013.



## Medical Symposium

After the Lunch Symposium ended, the audience proceeded to the last segment of the convention – the Medical Symposium. The last three speakers of the day, Dr Chua Tze Ern, Dr Ng Kah Wee and Dr Neoh Ching Yin, talked about women's mental health, body image and hair loss problems respectively.

### Women's mental health – psychological disorders related to childbearing and the menstrual cycle

The first speaker, Dr Chua Tze-Ern, an associate consultant with the Department of Psychological Medicine at KK Women's and Children's Hospital (KKH), shared emotional problems and psychological disorders that some women face at specific stages in their lives: premenstrual

dysphoric disorder (PMDD), antenatal and postnatal depression, and menopausal depression.

Dr Chua started her presentation with antenatal and postnatal depression, grouped under an umbrella term – perinatal depression (PND). She shared that based on her experience in KKH, approximately two out of three young mothers experience baby blues today. In addition, 12.2% of new mothers experience antenatal depression while 6.8% of them undergo postnatal depression. As women may be subjected to stressors that are internal (like hormonal fluctuation) and external (like strained relationships) respectively, Dr Chua emphasised that such stressors could cause brain changes like serotonin imbalances and reduced hippocampal volume, which would then result in depression. Dr Chua quoted an *American Journal of Psychiatry* paper which showed that "patients with depression had a statistically significant 19% smaller left hippocampal volume than comparison subjects", which in turn affects memory and space orientation.<sup>1</sup> However, she noted that treatment with fluoxetine could reverse the stress-induced changes in both hippocampal neurogenesis and behavioral phenotypes.<sup>2</sup>

Dr Chua briefly discussed the symptoms of PMDD, and acknowledged that it was previously difficult to pinpoint this condition. However, she revealed that the fifth edition of *Diagnostic and Statistical Manual of Mental Disorders* released by the American Psychiatric Association has recently recognised it as a real psychiatric disorder. Dr Chua then moved onto menopausal depression, indicating that females who had a history of PMDD or PND are more prone to menopausal depression as they are more sensitive to hormonal changes. According to a population-based survey of mental disorders in Singapore, Dr Chua revealed that 12% of Singaporean adults have mood, anxiety and/or alcohol use problems,<sup>3</sup> and nobody should deny their existence.

### Helping patients gain a positive body image

Dr Ng Kah Wee, the second speaker, is an associate consultant at Singapore General Hospital's Department of Psychiatry. She brought the audience's attention to various media platforms and toys which reinforce negative stereotypes of women. Dr Ng acknowledged that while the majority who suffer from body image problems are females, more males are expressing similar problems when they are in adolescence or have homosexual tendencies. Dr Ng pointed out that if parents are dissatisfied with their own bodies, their attitude would adversely affect how their daughters perceive themselves.

Dr Ng offered some suggestions that medical practitioners could advise female patients, to encourage them to have a more positive body image, including having



supportive families so that young women will gain positive affirmation from their families regarding their bodies. In addition, Dr Ng highlighted a method known as body image estimation, where patients with eating disorders are told to sketch a perception of their bodies, before the therapists guide them and point out the misconceptions shown through their drawings. Dr Ng ended her presentation with an illustration of fruits that were “dissatisfied” with their body image. Drawing on an analogy from the illustration of fruits, she concluded, “Ultimately, they should not forget that they have such sweet bodies!”

### Hair loss in women: strategic pearls for the best outcome

The last speaker, Dr Neoh Ching Yin is a dermatologist in private practice. She presented a topic that is a persistent problem for many women, although most are reluctant to admit it until apparent hair loss surfaces. Dr Neoh stated that if medical practitioners could meet the patients' expectations, they should help the latter achieve a better outcome. Firstly, she underlined the importance of a thorough and accurate diagnosis, as diagnosing hair loss is similar to diagnosing other medical conditions. A diagnosis for patients with hair loss should determine the nature of the hair loss, dietary habits, drastic changes in weight, and any general health changes.

Dr Neoh advised that most patients would appreciate a customised treatment plan for hair loss. As such, practitioners should customise treatments based on factors like severity of hair loss, and patients' lifestyles, needs and age. After medical practitioners design treatment plans for their patients, they should follow up with the latter and inform them what to expect from the recommended treatments.

### In closing

The 44th SMA National Medical Convention then closed to resounding applause. The Convention Committee Chairperson, Dr Bertha Woon and the rest of the committee wish to thank keynote speaker Dr Carolyn Lam, all invited speakers, guests and participants for taking time off to gain knowledge about staying in the pink of health – for women and those who love them. The committee would also like to express its appreciation to the convention's sponsors: Tote Board, Lee Foundation, Bausch & Lomb, Health Promotion Board, Jurong Health and National Healthcare Group, as well as our goodie bag sponsors. We hope to see you at next year's convention! **SMA**

### References

1. Bremner JD, Narayan M, Anderson ER, et al. Hippocampal volume reduction in major depression. *Am J Psychiatry* 2000; 157:115-8. Available at: <http://ajp.psychiatryonline.org/>



Dr Chua Tze-Ern



Dr Ng Kah Wee



Dr Neoh Ching Yin

2. Dranovsky A, Hen R. Hippocampal neurogenesis: regulation by stress and antidepressants. *Biol Psychiatry* 2006; 59(12): 1136-43.
3. Chong SA, Abdin E, Vaingankar J, et al. A population-based survey of mental disorders in Singapore. *Ann Acad Med Singapore* 2012; 41:49-66. Available at: <http://www.annals.edu.sg/pdf/41VolNo2Feb2012/V41N1p49.pdf>. Accessed 1 October 2013.