

Caring

A HEALTHIER, HAPPIER LIFE

中文由
25页起

GIVING TO MAKE A DIFFERENCE

HOW YOUR GENEROSITY
CAN CHANGE THE LIVES
OF OTHERS

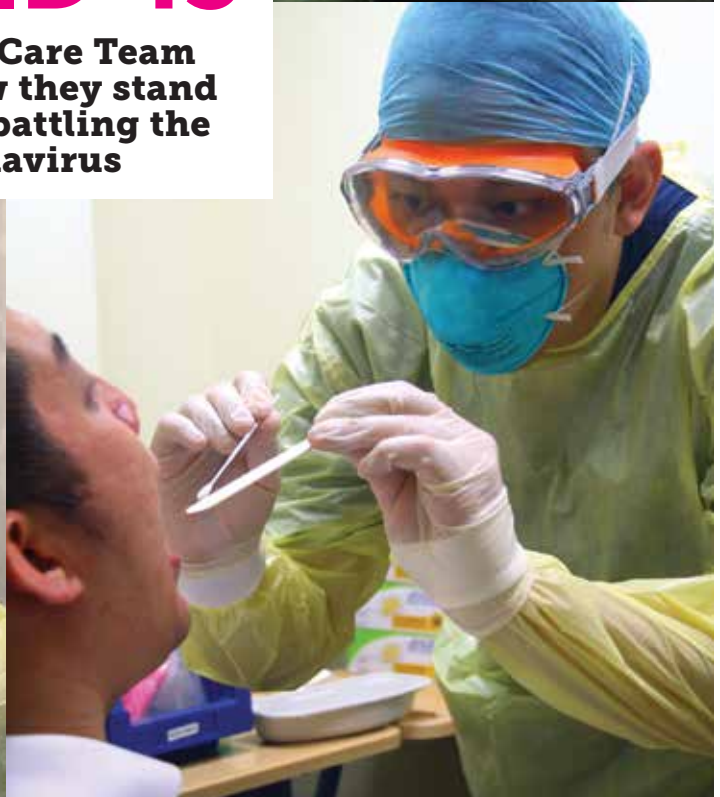
OVERCOMING POST-TRAUMATIC STRESS DISORDER

GET SUPPORT AND
TREATMENT EARLY



THE FIGHT AGAINST COVID-19

The CGH Care Team
shares how they stand
united in battling the
coronavirus





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EDITOR'S NOTE



It has been a challenging period for all of us given the COVID-19 global pandemic. While the global pandemic remains uncertain, we would like to remind our readers to take good care and stay safe. One way you can do this is to maintain a healthy diet — and we can help a little here. Try our Coco-corn with Prawn Soup (**page 24**), which was created by CGH's very own staff members.

In this issue, you'll also learn how you can manage your chronic conditions effectively and, if you are consuming medication, how to store and consume them safely (**page 22**). And could a loved one of yours who is behaving differently lately be suffering from post-traumatic stress disorder? Find out on **page 6**.

We also take the time to honour CGH staff who are in this fight against COVID-19 (**page 9**). These are but a few among the many who are in the battle against the coronavirus — including you! Remember, wear your mask when out and keep to the recommended safe distancing guidelines and wash your hands regularly, you are also keeping everyone else safe.

With this, we would like to inform our readers that *Caring* will go on a short hiatus. Until then, stay safe and stay well!



PS: check out the mental health resources by our TRaCS team: <https://bit.ly/2VcXqt2>

Sarah Abdul Karim
Editor

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我们的专家回答关于药物的常见问题

In this issue, we look at the increasing prevalence of Type 2 diabetes in adolescents today, and what younger folks can do about it. Plus, learn about the common causes of hearing loss and the available treatment options. Finally, in light of the ongoing COVID-19 pandemic, we want to encourage readers to keep monitoring updates from the Ministry of Health. It is easy to feel overwhelmed by an unprecedented and uncertain event like this, but let us not forget that we have the power to support and care for one another. Take care, and keep well!

Dr Linsey Utami Gani, ECHO Programme Director



WAR ON TYPE 2 DIABETES STARTS FROM YOUNG

Some tips to help you stave off the disease

You may have heard about Singapore's "War on Diabetes", a Ministry of Health initiative launched in 2016 to stem the rising prevalence of the condition, but how well do you know the disease?

Here are some key points to note.

Who are at a higher risk of getting diabetes?

You are at increased risk if you have one of these risk factors:

- Obesity, with a Body Mass Index over 23.5 (BMI = weight/height²)
- A family history of obesity
- Hypertension (high blood pressure)
- Polycystic ovary syndrome
- High cholesterol levels
- History of ischaemic heart disease
- Gestational diabetes
- Taking steroids

If you do not have any of the above risk factors, testing for diabetes can begin at 40 years old.



Diabetes TYPE 2

- **It makes up 90%-95% of all cases of diabetes.** The other types are type 1 diabetes (autoimmune destruction of pancreas), gestational diabetes (diabetes diagnosed in the second to third trimester of pregnancy), monogenic diabetes (single genetic mutation), pancreatitis and medication-induced diabetes (caused by drugs like steroids).
- **It is common,** with over 400,000 Singaporeans living with this disease. About one in three people are at high risk of developing the condition in their lifetime. Obesity is fuelling this.
- **It is preventable** if we adopt healthy lifestyle habits and a good diet, particularly from a young age.
- **It is an inheritable disease,** but diet and exercise can lower your risk of getting it.
- **It causes damage to your eyes, kidneys and nerves** and increases your risk of heart attack and stroke.

Why is Type 2 diabetes becoming more prevalent, especially in adolescents and young adults?

This is because the obesity rate is rising rapidly — in 2017, 36.2 per cent of Singaporeans were overweight and 8.7 per cent were obese. Obesity is a medical condition that leads to over 200 chronic diseases, including diabetes, gestational diabetes, heart disease, obstructive sleep apnoea, fatty liver and cancer. Globally, there has been an increasing number of people who are consuming energy-dense foods that are rich in fat, while at the same time engaging in less physical activity, because of easier transportation and sedentary lifestyle choices.

lifestyle modification, with a diet restriction to less than 1800kcal a day while exercising over 175 minutes each week, had a weight loss of 7 per cent and better diabetes control. If you are overweight, losing weight is key in managing your diabetic condition and overall health. Besides eating well, exercising regularly and cutting back on drinking alcohol and smoking, treatment of obesity and diabetes may include medication and, possibly, bariatric surgery, especially if your BMI is above 32.5kg/m².

Prevention is better than cure. Lead a healthy lifestyle and have yourself checked for diabetes early if you know you are at a high risk of developing the condition. 🍎

Can you improve your diabetic condition with diet and exercise?

According to a study published in The New England Journal of Medicine, patients with Type 2 diabetes who underwent an intensive

Dr Loh Wann Jia is Consultant, Department of Endocrinology, at CGH



WHAT YOU NEED TO KNOW ABOUT HEARING LOSS

It happens as we age, but can be adequately managed if detected early

The incidence of hearing loss is expected to rise as our population ages. Currently, it is estimated that over 60 per cent of Singaporeans aged 60 years or older suffer from it. Hearing loss often goes unnoticed or is ignored by the sufferer, and is diagnosed through a hearing test known as an audiogram, which measures one's ability to pick up sounds of different frequencies, or pitch.

Hearing loss may be due to inner ear dysfunction (sensorineural loss), sound not reaching the inner ear due to transmission issues in the outer and middle ear

(conductive loss) or a combination of both (mixed loss). Of these, sensorineural loss is the most common. It is usually the result of age-related hearing loss, also known as presbycusis. Presbycusis is believed to be caused by an accumulation of insults to the inner ear over time. These include exposure to loud noise and ingestion of certain medications, such as aminoglycoside antibiotics. Genetics also play a part — some individuals may experience a more severe loss than others in their age group, despite similar exposures.

More than just the sound of silence

Hearing loss impairs one's ability to communicate and appreciate pleasurable sounds like music. Leaving it untreated can lead to social isolation, anxiety and even depression. The ability to hear well also plays a part in personal safety, keeping you alert in situations such as crossing the road.

More recently, there has been a greater focus on the link between hearing loss and dementia, as the former has been identified as one of the most important risk factors for the latter. In other words, proper management of hearing loss may reduce the risk of dementia and other cognitive disorders.

Hearing aids and beyond

Traditionally, patients resisted hearing aids because of concerns over stigmatisation, cost and sound quality. Fortunately, greater awareness, increased government subsidies and technological advances have addressed these concerns and helped shift public perception, and more patients are now increasingly receptive to the idea of using hearing aids.

Nonetheless, these aids may not be effective for those with severe hearing loss. For these individuals, a hearing implant may be the solution. One such implant, the cochlear implant, allows profoundly deaf individuals to hear again. As a result, hearing remains the only one among our five basic senses that can be restored.

Losing your ability to hear can have a profound impact on your physical, mental and social well-being, so if you think there may be a problem with your ears, get a hearing test without delay! 🗣️

Dr David Low Yong Ming is Consultant, Department of Otorhinolaryngology – Head and Neck Surgery, at CGH



DID YOU KNOW?

CGH has a community-based hearing clinic located at Heartbeat@Bedok, operating in support of Project Silver Screen. The clinic is staffed by CGH's audiologists and facilitates testing and hearing-aid fitting in the community.

DEALING WITH PTSD

Seek help if feelings of distress linger too long

It is hard for anyone to go through a traumatic event. Depending on the event's severity as well as our individual mental make-up, what is known as post-traumatic stress disorder (PTSD) may be triggered.

Anything that is experienced as a threat to one's survival or well-being can generate trauma-related stress, be it a road accident, childhood abuse or birth trauma, and may lead to PTSD if unresolved. This is because our bodies have a natural "fight-flight-freeze" response that automatically jumps into action when we face danger. When we do not fully process a traumatic experience, the body continues to respond as though it is still under threat. So even though the traumatic incident may have passed, the person still functions in a heightened state of anxiety. Depending on the individual, PTSD may show up in the form of recurring nightmares, depression, social withdrawal or irritability.

Both adults and children are susceptible to PTSD. Trauma in children can be detected by changes in their behaviour, such as excessive neediness, withdrawing from others and aggression. They may also regularly experience headaches, stomach aches and fever symptoms. In some extreme cases, the child could even regress to



COMMON PTSD SYMPTOMS

- Intrusive thoughts or flashbacks related to the trauma, which causes anxiety and distress as the person loses sense of reality. Often, the person feels like he's experiencing the trauma again
- Recurring nightmares, which may give rise to insomnia
- Emotional numbness arising from the freeze response associated with the trauma
- Difficulty concentrating on tasks, due to exhaustion from managing trauma symptoms
- Hypervigilance and feeling on edge most of the time, which arise from the body's fight-or-flight response
- Irritability and sudden, aggressive anger when startled or reminded about the traumatic event
- Fears that the world around them is unsafe, which can lead to other mental health disorders like anxiety and depression
- Blaming oneself for the traumatic event, convinced that there were steps he could have taken to prevent it from happening
- Feeling detached from others
- Self-destructive behaviours, which can include alcohol abuse or self-cutting. Self-harm is a coping mechanism that provides temporary relief from emotional pain. The physical pain from self-cutting tricks the mind into believing that the emotional pain he feels is from the physical injury instead of the emotional distress caused by the past traumatic event

behaviours common in earlier stages of life, such as bed-wetting. If such behaviours occur, more support is needed to help them deal with their trauma.

PTSD symptoms typically develop within the first month of a traumatic event. People who suffer from PTSD should understand that this is a normal reaction to the abnormal situation they had experienced. For most, the symptoms do subside and go away with time. Do seek professional help if you or someone you know continues to experience symptoms long after the traumatic event.

The road to recovery

Early intervention is key when it comes to treating PTSD. But for some, this is easier said than done. It is not uncommon for those who had experienced trauma to avoid seeking support and professional help, for fear of having to relive the traumatic experience during treatment.

One treatment option that mental health professionals use is somatic experiencing, which relies on a body awareness approach to treat PTSD. Patients undergoing this treatment are taught to focus on their perceived body sensations and identify with the perceptions, emotions and meaning brought up by the event, such that they are able to work through the trauma without having to share much details of the experience. Somatic experiencing is able to counter the body's fight-flight-freeze response by helping patients process the event, and negotiate the trauma by working through sensations that are stuck in the body as a result of the traumatic experience.

A typical session involves introducing small amounts of traumatic material – for example how the person felt just before an accident, which could be a neutral or positive experience and this is utilised while exploring the traumatic experience of the



accident in small amounts – that may trigger a distress reaction in the patients, whose physiological responses, which may include shallow breathing, twitching and more, are observed by his therapist. The patient is encouraged to observe his own experience and share his current sensations, which could include heaviness in the chest or dizziness. He is also taught self-regulatory strategies, such as how to reorient himself in his present external environment – the counselling room – to remind him that he is now safe, even as he revisits his trauma.

In this way, as he renegotiates the trauma, a discharge and shift can happen, allowing the nervous system to regulate itself better from its previous fight-flight-freeze mode. This process may be a slow one, but it is only through such deliberate and precise work that one can move past his trauma. ©

DID YOU KNOW?

The Department of TRaCS at CGH provides consultation, training and counselling services to help individuals build resilience, provide emotional support in challenging situations and promote mental health literacy at the workplace. It strives to empower individuals to make a difference in the lives of CGH's patients, colleagues and the larger community.

Rena Sivadas is Principal TRaCS Counsellor at CGH



IT TAKES A TEAM

Frontline and back-end workers share how they play their part in the battle against COVID-19





Fighting a pandemic is a task that calls on each and every hospital worker, from the doctors and nurses to researchers and those in housekeeping, to give their all. We speak to CGH staff from across departments on how their work contributes to the greater cause.

**Dr Tan Seow Yen,
Infectious Diseases
Consultant**

I recall when Singapore recorded its first COVID-19 case. While surprised, I felt calm, knowing that as a hospital, we have prepared for this and that the



wards and my colleagues would be ready. However, it soon became clear that while there were broad guiding principles when treating and dealing with infected patients, treatment decisions are never clear-cut as no two patients are the same.

Preparations have been put in place on every level of the hospital. A pandemic like the one we are dealing with calls for us to be agile, as we learn to cope with changes as they unfold — sometimes very quickly! There is a need to communicate well at all levels, which can be tiring

and stressful, but it is gratifying to see colleagues working even closer with one another and moving forward together as a hospital.

At the same time, while we battle the coronavirus, we also have to ensure the rest of the hospital continues operating as usual. We make it a point to maintain normalcy while taking on extra duties to combat the outbreak. There is no compromise when it comes to patient safety, and the same level of care is devoted to all patients who come through our hospital doors, regardless of whether they are positive for COVID-19 or not.

“
A pandemic like the one we’re dealing with calls for us to be agile, as we learn to cope with changes as they unfold — sometimes very quickly!”

DR TAN ON...



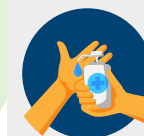
The frequency of washing your hands

There is a need to strike the appropriate balance so you’re washing your hands just enough to protect yourself from germs and not causing irritation to the skin, which can cause more problems. The key rule is to follow basic hygiene practices — wash after using the bathroom, before and after eating and after coughing.



Using wet wipes

The effectiveness of the wipes depends on the type of wipes you are using, the material being used and alcohol content of the wipes. Wipes are generally not as effective as washing your hands with soap and water. It is recommended that you use wet wipes only as an alternative when soap and water are not readily available.



Hand sanitisers and hand rubs

It is key to choose sanitisers that have an alcohol content of at least 60 per cent, which works better to kill germs than those with low or no alcohol content. However, hand rubs do not eliminate all germs and harmful chemicals, so if your hands are visibly soiled or greasy, do wash them with soap and running water.

“
With the ongoing spread of COVID-19, we now have to take extra care to clean the wards and rooms more thoroughly

At the end of the day, any patient, whether he or she is in the isolation ward or not, deserves to be treated not only with good medical care, but also compassion and empathy. With every patient encounter, I make it a point to bring positive energy to all parties, as I believe that helps put our patients at ease.

It seems that the only constant is change these days. I have now learnt to better handle and respond to change. While it is still uncertain how this outbreak will eventually unfold, it will be some time before it's all over, so we make it a point to take care of ourselves while we work together to fight the long fight.

Dr Jiang Boran, Senior Medical Laboratory Scientist

One particular challenge we have had to face is that the emergence of COVID-19 coincided with the regular flu season, which added to the number of tests that we needed to administer. Fortunately, we were able to meet this challenge, thanks to the support of departments like the Supply Change Management and Biomedical



Engineering, which prioritised the ordering of reagents, consumables and equipment needed, as well as the Clinical Trials and Research Unit, which provided additional manpower and equipment. And colleagues who had fought SARS and H1N1 harnessed lessons from their experience to help better our fight against COVID-19.

Yin Yin Mon, Housekeeper

I've been an inpatient housekeeper at CGH for over a year and am currently stationed in the isolation ward. I treat the ward like it's my home and my job is to provide a clean environment that is not only safe for doctors, nurses and others, but also clean and comfortable for patients.

With the ongoing spread of COVID-19, we now have to take extra care to clean the wards and rooms more thoroughly. On top of the twice daily routine cleaning of the ward, we also perform a thorough and extensive cleaning and disinfection of the isolation room after each patient is discharged. This includes wiping down everything, from the walls and windows to the furniture and floors, as well as changing the linens.

The work we do can be hazardous, so it is imperative that we put on the appropriate Personal Protective Equipment (PPE) when working. To safeguard and protect us, we were trained to put on our PPE properly and to sanitise our hands properly. We are

briefed daily by the isolation ward nurses on what to do and what to look out for. When I clear waste and soiled linen, I must also be careful to ensure trash is properly cable-tied to prevent spillage.

Having undergone an intensive training to prepare myself for work in high risk areas, I am not afraid of working in the isolation ward. During breaks, we try to remain in the ward so as to minimise contact with colleagues working in other wards and lower the risk of cross infection.

Wong Nga Chi, Assistant Nurse Clinician

While we did feel a little unnerved when the hospital first began receiving COVID-19 cases, our training taught us to

remain calm while adapting to changes in workflows and adhering to infection control procedures. There is very good teamwork and coordination among us. We support one another through encouragement and regularly check in with each other on how we are coping with the stress of fighting this healthcare crisis. I am very thankful for my colleagues and I hope that everyone stays safe and healthy as we work together.

We have also received support from patients who have battled and recovered from COVID-19. Recently, a patient returned to CGH to thank doctors and nurses who treated and cared for him. I was very happy to see him again and felt very encouraged by his show of appreciation. ☺



VOICES FROM THE FRONTLINE

Meet CGH's staff who are courageously battling the COVID-19 pandemic

It is not easy being on the frontline in the ongoing fight against the coronavirus.

But despite the increased workload, CGH staff say that they are regularly encouraged by the show of support from not just their own colleagues, but also their patients and members of the public.

Here, they tell us how they are coping in this challenging period while working to deliver quality patient care.

Dr Kelvin Kuan, Consultant, Accident & Emergency Department

As a hospital, we feel we are relatively prepared for COVID-19 because of the models we developed after battling SARS and H1N1. We also felt more encouraged and prepared when our Infection Prevention and Control nurses put us through a refresher training course on Personal Protective Equipment (PPE). To stay nimble, our workflows and protocols are also constantly adapted as the health emergency evolves.



Adora Cheng, Senior Staff Nurse, A&E Department

Our PPE can feel hot and stifling and also impedes verbal communication with our patients, but we know these measures are necessary to protect ourselves, our patients and our families.

I am also incredibly thankful to have supportive family and friends to encourage me at this time. In the midst of a crisis where the battle is against an invisible foe, it is rewarding to witness unity and teamwork among us healthcare professionals. I believe we are only as strong as our weakest link, and so every individual plays an important role in our fight against the disease. If everyone practises good personal hygiene, social responsibility and takes ownership of his/her own health, I firmly believe that Singapore can overcome this pandemic.

Tenny Chow, Deputy Director, Environmental Services

My department oversees housekeeping and portering efforts at CGH.

Since the outbreak of COVID-19, we have



stepped up cleaning and disinfection at all public areas and within the wards. My team definitely sees a greater purpose in their tasks now. They understand that their jobs play a major role in infection control as well as defending patients and staff against the virus.

On my part, I keep an open line of communication with the housekeepers and porters. For example, I check in regularly with those who are assigned to the higher-risk areas of the hospital, to ensure they are comfortable enough to be in those areas and to remind them to let me know if they have any concerns. I constantly remind them to practise proper hand hygiene and to stay hydrated as their jobs are physically demanding. We also make it a priority to provide them PPE training regularly so they know how to protect themselves adequately.

I have a good relationship with my team, who has also taught me what to do when I occasionally help them with the cleaning work! I must admit that it is now more physically challenging, and I have a deeper appreciation for what my team does.

Mohamed Sidiqie bin Mohd Aiks, Manager, Emergency Planning

I believe that challenging times like the one we are in brings out the best in people, and we have certainly seen this from CGH staff. We have witnessed teams extend support to one another as they regularly check in on each other's well-being, provide goodies and send encouraging post-it notes to teams that are taking the next

shift in the Operations Centre. I am deeply inspired by everyone's professionalism, perseverance and drive and I am confident that together, we can overcome this crisis.

Nicole Teoh, Senior Executive, Office of Improvement Science

I was prompted to volunteer because we understood that many of our colleagues — particularly those fighting on the frontline of the battle against COVID-19 — were stretched. Since volunteering in end-January, I have been stationed at various locations at CGH, including the Medical Centre, the Main Building, the A&E entrance and in our basement carparks — sometimes on weekends, too. I take pride in volunteering at areas such as the screening stations, which allows me to play an active role in supporting my colleagues.

Manning the screening counters also gives me the opportunity to interact with frontline doctors and nurses. Their words of encouragement during our brief conversations never fail to give me the hope and encouragement that helps me through these shifts. ☺



**THANK YOU FOR
THINKING OF US AND
STANDING WITH US IN
OUR COLLECTIVE FIGHT
AGAINST COVID-19**



Do note that some of the photos shown here were before the Circuit Breaker measures were put in place.

WHY GIVING MATTERS

It transforms the lives of others and gives us greater purpose and meaning

You're likely familiar with the saying "It is better to give than to receive", but have you ever reflected on its meaning?

Giving allows us to be part of a cause that's greater than us, and in so doing, creates deeper meaning and purpose in our lives. Helping others gives us perspective on our own lives, and being part of a greater cause allows humans to grow.

Today, there are many areas where philanthropy is making a mark in the world, whether it is in sustainability, healthcare or education. Having been in the position to advocate and build support for public institutions in the education industry over the last 13 years, I can attest to the far-reaching impact philanthropy has had on Singapore.

I have seen how the generosity of strangers made it possible for students to achieve their dreams, enabling them to pursue their education and become the first

in their families to receive a tertiary degree. These students are now young adults building their careers and families, and contributing actively to society. This would not have been possible without the support of individuals willing to give, ensuring students in need do not fall through the cracks and that equal opportunities are available to our young.

I have also noticed similar trends in healthcare. Support for innovation, research and education enables our healthcare system to stay ahead of the curve of demand, energise improvements across the board that will benefit future generations, and bulwarks our healthcare system against social and health





4 WAYS CHANGI HEALTH FUND MAKES A DIFFERENCE

Set up in 2011, CGH's Changi Health Fund (CHF) aims to improve the health of our community through research, innovation and education, and ensures that financially disadvantaged patients are appropriately supported. Here's how the CHF meets the needs of our community.

1

It equips medical professionals to save lives

The CHF enables the translation of the **future of healthcare from a dream into a reality through education**. High quality clinical training and education equips our next generation of doctors, nurses and allied health professionals with the right skills and values in practising the art and science of medicine.



"Nursing education is an area that's constantly evolving. If we continue to teach the same way that we were taught, we medical professionals will not be ready for our future. My learners have taught me that learning never stops and should never stop. Over the years, I have learnt that an effective educator and nurse is one who observes from many perspectives, then interprets, clarifies and improves every day."

**GRACE HO HUI LING,
NURSE EDUCATOR,
NURSING EDUCATION**

3

It funds medical research

This enables healthcare professionals to tackle the health challenges of the day and **advance medical knowledge**. At CGH, a conducive environment for research is created by our Health Services Research department, and Clinical Trials and Research Unit.



"I find research rewarding knowing that our patients and doctors of today are working together to find better care for our patients of tomorrow."

**DR TROY PUAR
CONSULTANT, ENDOCRINOLOGY**

4

It brings innovation closer to you

You don't have to go to a hospital to experience the benefits brought on by **innovations in healthcare**. The CHF also funds projects such as the Self-Empowering and Enabling Kiosk (SEEK), which enables individuals to monitor their health conditions without excessive visits to the doctor. SEEK units can be found at some polyclinics and senior activity centres.



"Innovation is empowering because it allows every nurse to explore new possibilities in care and to be an agent of change."

**NURI SYAHIDA NG
SENIOR NURSE MANAGER,
NURSING QUALITY AND
TRANSFORMATION**

2

It cares for those in need

Since its inception in 2002, HomeCare Assist, a patient welfare fund under the CHF, has **reached out to over 4,900 patients**. HCA provides interim assistance to needy patients who have discharged from the hospital in various areas such as renal dialysis, respiratory care equipment and other consumables.



challenges. CGH's Changi Health Fund is among the many platforms out there that drive these initiatives (see infographic for details).

Outbreaks such as the COVID-19 pandemic have underscored the need for our healthcare systems to be prepared for ever-changing locally and globally. We need to continue to find better solutions to keep our population healthy and treat diseases. As we find more cures to diseases, patients' accessibility to such treatments should continue to grow.

Through philanthropy, we can transform people's lives for the better and make our society better. ☺

Marc Chan is Assistant Director, Corporate Affairs (Development), at CGH



WHAT THE DOCTOR SAYS

Our specialists answer patients' commonly asked questions

I am a 65 year-old woman suffering from hypertension, high cholesterol and diabetes. I am taking close to 10 types of medication — about two to three kinds of medicine for each condition. Despite this, my health doesn't seem to be improving. Recently, my doctor informed me that he plans to increase the dosage of my medication. I really do not like taking so much medication, for fear of over-reliance on these drugs and possible side effects, so on days where my blood pressure is in the normal range, I will skip my blood pressure medication. Is it advisable to also skip my diabetes medication on days where my sugar level is fine?

Hypertension, diabetes and high cholesterol are very common chronic diseases in Singapore. It is very important to have them in good control to prevent cardiovascular diseases such as heart attack, stroke, kidney failure or leg gangrene. It is therefore essential to adhere to your prescription and follow up regularly with your doctor.

Unfortunately, it is quite common to require a few medications to control each of these chronic diseases. These medications work in different ways to bring down your blood pressure, blood sugar and cholesterol. Sometimes, when they are used together, their combined effect is enhanced.

Secondly, because they work in different ways, these medications have different advantages. For example, some medications for hypertension are also beneficial to the kidneys, particularly for patients with diabetes. Each medication also has its own side-effect profile. Therefore, the

combination of medications prescribed to a patient is specific to him, taking into account his age, the severity of each chronic disease from which he suffers and his tolerance for each medication's side effects, among others. For these reasons, each patient is prescribed his own set of drugs, which is tailored to his condition after a careful assessment by his doctor.

Thirdly, the targets for the control of chronic diseases tend to differ from patient to patient. For example, doctors typically recommend a tighter blood pressure control (systolic blood pressure below 110mmHg to 120mmHg) to patients who also suffer from diabetes. However, a more relaxed blood



pressure target (systolic blood pressure above 140mmHg) is better suited to older patients above 80 years, due to their higher fall risk from having low blood pressure.

It is thus often necessary to use multiple medications to treat each chronic disease.

Is it possible to reduce the number of medications prescribed to me? I am also taking multivitamins such as calcium supplements. Will these interfere with my medication?

First, before adding more medications, I would suggest using one suitable and tolerable medication for each condition at its optimal dose.

Second, patients should monitor their own blood pressure and blood sugar levels at least twice a week. Record the readings in a diary and inform your doctor of them during your check-ups. This is extremely helpful as the data can be referred and enable your doctor to make the proper adjustments to your prescription as your condition changes.

TIPS ON STORING YOUR MEDICATION

- Medicines should be kept in a cool, dry place, as heat, air, light and moisture can damage them. You may also store them in a storage box
- Most drugs can be kept at room temperature, unless instructed by your pharmacist
- Drugs that need to be refrigerated include insulin, antibiotic liquids, injections, eye drops and some creams

You should skip your blood pressure or diabetes medication only when your blood pressure or blood sugar levels are too low, especially when you feel dizzy. When your readings are normal, it is recommended that you continue taking your medication as prescribed, so your blood pressure and sugar levels remain stable.

Third, maintaining a healthy diet with limited amounts of food that is rich in starch, salt and cholesterol can help lower your reliance on medications. Regular exercise also enhances your rate of metabolism, lowers your blood pressure, sugar and cholesterol levels, and together with your calcium supplement, strengthens your muscles and bones. Given your age, you may also want to ensure you are consuming enough protein and vitamin D, as they can help prevent bone and muscle loss. It is usually fine to take these vitamins while you are under medication for these three diseases.

It may be frustrating to see your drug list grow longer. However, with a wide choice of medications available now, it is possible to create a suitable, tolerable and minimal drug regime. Speak to your doctor about your concerns and how your drug list can be optimised, so that you can continue to enjoy a healthy and normal life. ☺

Dr Peter Chow is Consultant, Department of Geriatric Medicine, at CGH



COCO-CORN WITH PRAWN SOUP

A nutritious soup for everyone to enjoy

WHAT YOU'LL NEED

Prawns	200g, minced. Remove shells and set aside
Corn cob	6 stalks, grated
Coconut water	1 litre
Garlic	8 cloves, chopped
Onion	1 large, chopped
Olive oil	2 tbsp
Salt	a pinch
Pepper	a pinch
Moringa or baby spinach leaves	a handful

METHOD

- To prepare the prawn broth, add 1 tbsp of olive oil in a medium heated casserole dish, then sauté half of the chopped garlic and half of the chopped onions. Add the prawn shells and sauté until cooked. Next, add 500g of coconut water. Mix well and let it simmer for 5 to 10 minutes. Strain the broth and set aside.
- In another medium heated casserole dish, add 1 tbsp of olive oil, then sauté the rest of the chopped garlic and onions. Add the minced prawns and sauté until cooked. Next, add salt, pepper and grated corn, then sauté for 5 minutes.
- Add the remaining coconut water, stir well, and let it simmer for 5 minutes before adding the prawn broth. Mix well and let it simmer for another 5 minutes. Season with salt and pepper if needed, then remove from heat.
- Add moringa or baby spinach leaves, then dish out and serve.

PREPARATION TIME

45mins

SERVES



准备时间

45分钟

可供



椰子玉米虾汤

让人感到温暖又营养的汤品，供大家享用

所需材料

虾	200公克，去壳，切碎。 虾壳备用。
玉米棒	6根，刨碎
椰子水	1公升
大蒜	8瓣，切碎
大洋葱	1个，切碎
橄榄油	2汤匙
盐	少量
胡椒粉	少许
辣木叶或小菠菜叶	一把

做法

- 先是准备虾汤。用中火加热炖锅后，倒入1汤匙橄榄油，再倒入一半切碎的大蒜和一半切碎的洋葱。加入虾壳，炒至熟。然后倒入500公克的椰子水。拌匀后用小火煮5至10分钟。把汤渣捞起后丢弃，汤备用。
- 用另一个炖锅，以中火加热后倒入1汤匙橄榄油，将剩余的切碎的大蒜和洋葱炒熟。加入虾末，炒至熟。加入盐、胡椒粉和刨碎的玉米，再炒5分钟。
- 加入剩余的椰子水，拌匀，慢煮5分钟后才加入虾汤。拌匀，小火煮5分钟。若有需要，加入少许盐调味，关火。
- 加入辣木叶子或小菠菜叶，盛入小碗，即可食用。

This recipe was created by the CGH Admission Transit Area team for the Super Soup for the Healthy Soul cooking competition last year, where staff came together to cook up simple, healthy and delicious soup recipes.



此食谱是入院中转区团队为去年在樟宜综合医院举办的“超级烫，健康心灵”烹饪比赛创建的。来自各个部门的员工齐心协力，烹饪出健康、美味的汤食谱，任何人都可以轻松制作。

在本期的《关怀》里，我们将关注青少年患2型糖尿病日渐上升的趋势，以及年轻人可以采取哪些措施。另外，您也可以了解听力损失的常见原因和治疗方案。最后，鉴于目前新冠病毒的疫情，我们要鼓励读者继续关注卫生部的最新消息。像这样不可预知的重大事件很容易让人感到不知所措，但不要忘记，我们有能力相互支持和关怀。保重，并保持健康！

ECHO计划董事Linsey Utami Gani医生



对抗2型糖尿病从年轻开始

一些帮助您预防患糖尿病的指针

您可能听说过新加坡的“对抗糖尿病之战”，这是卫生部于2016年发起的一项旨在遏制该疾病患病率上升的举措。但是您对这疾病究竟了解多少？

以下是几点要点。

谁患糖尿病的风险更高？

以下任何风险因素可能会提高您的患病几率：

- 肥胖，身体质量指数（体重除以身高的平方）超过23.5
- 有肥胖家族史
- 患有高血压
- 患多囊卵巢综合症
- 高胆固醇水平高
- 有血性心脏病史
- 患妊娠糖尿病
- 在服用类固醇



2型糖尿病

- 它占有所有糖尿病病例的90%至95%。其他的类型是1型糖尿病（胰腺自身免疫性破坏）、妊娠糖尿病（在妊娠中晚期诊断的糖尿病）、单基因糖尿病（单基因突变）、胰腺炎和药物引起的糖尿病（如类固醇等药物）。
- 糖尿病很普遍，超过40万新加坡人患有此病，与此同时大约三分之一的人有非常高的患病风险。这大多是由于肥胖所导致。
- 这是一个可预防的疾病，如果我们采取健康生活方式和良好饮食习惯，尤其是从小培养起。
- 这是一种可遗传的疾病，但是良好的饮食和运动可以降低患病的风险。
- 它会损害您的眼睛、肾脏和神经，并增加心脏病发作和中风的风险。

如果您没有上述任何风险因素，则可以从40岁开始做糖尿病测试。

为什么2型糖尿病尤其在青少年和年轻人中越来越普遍？

这是因为肥胖率正在迅速上升。在2017年，有36.2%的新加坡人超重，并且有8.7%的人属于肥胖。肥胖是导致200多种慢性疾病的医疗状况，其中包括糖尿病、妊娠糖尿病、心脏病、阻塞性睡眠呼吸暂停、脂肪肝和癌症。在全球，越来越多人食用富含脂肪的高能量食品，也因交通便利和久坐不动的生活方式而运动量减少。

饮食和运动的功效不可低估

根据《新英格兰医学杂志》上发表的一项研究，那些彻底改变其生活方式的2型

糖尿病的患者把每天的饮食能量摄取限制在1800kcal以下，并且每周运动超过175分钟，他们的体重减轻了7%，并且能够更好地控制糖尿病。如果您超重，那么减肥是控制糖尿病和整体健康的关键。如果您的身体质量指数超过32.5公斤/平方米，那除了饮食要健康之外，还得经常运动、减少饮酒和吸烟，接受有关肥胖和糖尿病的治疗，其中可包括了药物治疗及减肥手术。

预防胜于治疗。保持健康的生活方式，同时如果您知道自己患糖尿病的风险很高，应当及早接受糖尿病测试。●

Loh Wann Jia是樟宜综合医院的内分泌顾问医生



应对创伤后应激障碍

如果困扰的感觉持续时间过长，请寻求帮助

无论是谁都无法预料到创伤事件会发生在自己身上。根据其严重程度以及个人的心理建设，它有可能引发所谓的创伤后应激障碍。

任何让人觉得其生命或生存受到威胁的事件都可能引起与创伤有关的压力，无论是交通事故、童年时受虐待或分娩创伤，以及未解决的创伤都可能导致创伤后应激障碍。这是因为我们的身体具有一种“战斗—逃亡—冻结”的自然反应机制，它在我们面临危险时会自动启动。当我们没有充分处理创伤经历时，身体会处于受到威胁的状态，继续作出反应。因此，即使创伤事件已经过去，受创伤者仍处在高度焦虑的精神状态里。创伤后应激障碍可能会以反复做恶梦、抑郁、社交退缩或烦躁等形式出现，具体表现因人而异。

成人和儿童均可患上创伤后应激障碍。儿童受创伤可较容易从行为上出现变化而被发现，其中可能包括过度依赖他人、不愿与他人交谈和具攻击性。此外，头痛、腹痛和发烧等症状发生的频率也会增加。在某些极端情况下，孩子甚至可能退缩到幼童时期的常见行为，例如尿床。如果有这种行为出现，我们需要给予更多的支持来帮助他们应对创伤。

创伤后应激障碍的症状通常会在创伤事件后的一个月内在发展开来。受创伤后患上创伤后应激障碍的人需要知道，这是他们对所经历的异常情况的正常反应。在大多数情况下，症状会消退并随时间消失。但

是，如果您或您认识的人在创伤事件发生后很长时间仍然出现症状，那最好是寻求专业帮助。

康复之路

有关治疗创伤后应激障碍，早期干预是关键。但是对于有些人来说，这说的比做的要来的更难。对于受创伤的人来说，由于害怕在治疗过程中不得不回顾创伤经历而不愿意寻求支持和专业帮助是相当常见的。

心理学家使用的一种有效的治疗选择是躯体体验，它使用身体意识方法来治疗创伤后应激障碍。接受这种治疗的患者学习如何专注于他们感知到的身体感觉，这样他们便可以应对创伤和该事件所带来的感受，而不必分享事件的细节。躯体体验能够帮助患者通过处理其感受来重新定义创伤和接受事件的发生，从而对抗身体所做出的“战斗—逃亡—冻结”反应。



“当我们没有充分处理创伤经历时，身体会处于受到威胁的状态，继续作出反应。”

一个常规的疗程包括让患者接触少量与创伤事件有关的物件，治疗师会观察患者的身体反应，其中包括呼吸变浅、身体抽搐等。治疗师会鼓励患者观察自己的经历并分享他体验到的感觉，如胸部感到沉重或头晕。患者还会学习到自我调节的策略，例如如何在当前的外部环境（咨询室）里重新定向，以提醒自己，即使他正在回顾创伤的经历，他现在已经脱险了。



创伤后应激障碍的常见症状

- 与创伤有关的侵入性想法或倒叙，由于患者失去现实感而引起焦虑和困扰。患者通常会觉得自己再次遭受创伤。
- 反复做恶梦，可能导致失眠。
- 由于创伤所引起的冻结反应而导致情绪麻木。
- 由于处理创伤症状而精疲力尽，无法集中精力做其他事情。
- 大部分时间处于紧张和过度警觉和状态，这是由于身体做出“战斗—逃亡—冻结”的反应所引起。
- 受到惊吓或提及到创伤事件时变得烦躁、突然变得具备攻击性和愤怒。
- 担心自己所处的世界不安全，这可能导致其他精神疾病，如焦虑和抑郁。
- 为创伤事件自责，深信自己其实可以采取一些步骤来防止事件的发生。
- 感觉与他人生疏。
- 自我毁灭行为，包括酗酒或自残。自我伤害是一种应对机制，可以暂时缓解情绪上的痛苦。自残所造成的身体疼痛让心理误以为自己所感受到的情绪上的痛苦是身体受伤所带来的，而不是过去的创伤事件所造成的情绪困扰。

当患者重新探讨创伤时，神经系统可能会发生释放和移位，让其能做出比以前的“战斗—逃亡—冻结”模式更好的自我调节。这个过程可能是漫长的，但只有通过如此刻意而精确的治疗方式，患者才可摆脱创伤。●

Rena Sivasdas是樟宜综合医院的高级辅导员



齐心协力 抗疫情

前线 and 后勤工作人员分享他们在对抗新型冠状病毒中所扮演的角色

与大流行斗争是一项须要医院里的每一位工作人员，从医生、护士、研究员至清洁员全力以赴的任务。我们向樟宜综合医院各部门的工作人了解他们的工作是如何为医院所有的人提供更安全、更清洁的工作环境。

Tan Seow Yen, 传染病学顾问医生

我还记得新加坡确诊第一例新型冠状病毒病例的情景。在感到惊讶的同时，我的内心是平静的，因为我知道作为一家医院，我们已经为此做好了准备，我们的病房和我的同事们已经准备就绪。但是，我们很快便意识到，尽管在治疗和处理感染患者这方面的工作有广泛的指导原则，但由于没有两个患者的情况是完全一样的，因此治疗决策无法明确。

医院的各个层面都已做好准备。像这样的大流行要求我们保持敏捷，并且得学习应对迅速变化的疫情。我们有必要在各个层次上进行良



医生说



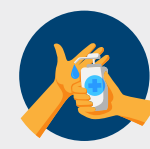
洗手的频率

您洗手是保护自己免受细菌侵害，不会对皮肤造成刺激，否则可能会引起更多问题，两者要保持适当平衡。遵循基本的卫生习惯——在使用浴室后，就餐前后，以及咳嗽后都要洗手。



湿纸巾

有效使用湿纸巾取决于湿纸巾的类型、其材料和酒精含量。湿纸巾通常不如用肥皂和水洗手来得有效。建议您在肥皂和水不易获得时，才用湿纸巾。



洗手液和搓手液

选择酒精含量至少为60%的洗手液是关键，它比低酒精含量或无酒精含量的洗手液更能杀菌。不过，搓手液并不能消除所有细菌和有害化学物质，因此，如果您的手明显弄脏了或是油腻的，请用肥皂和自来水清洗。

“
随着新冠病毒的不断传播，我们现在得格外小心，更彻底清洁病房和房间。”

好的沟通，这既累人又令人感到压力，但令人高兴的是看到同事们之间更加紧密地合作，并共一起向前迈进。

当然，在与冠状病毒作斗争的同时，我们还必须确保医院的其余部分继续照常运作。我们强调保持正常状态，同时承担额外职责以应对疫情。在患者安全方面，我们毫不妥协，并且确保所有入住我们医院的患者，无论他们是否患有新冠病毒，都将获得同等水平的护理。

归根结底，无论患者是在隔离病房或普通病房，他不仅应得到良好的医疗护理，还应该得到我们的同情和怜悯。每次遇到患者时，我都希望为他们带来积极的能量，因为我相信这有助于让他们感到安心。

这些日子，似乎唯一不变的是变化。我现在学会了更好处理并应对变化。虽然仍不确定这次疫情将如何最终展开，它还需要一些时间才会结束，所以在一起做长期战斗同时，我们也着重自我保护。

Jiang Boran, 高级医药实验室科学家

我们面对的一个挑战是新冠病毒的出现恰巧碰上了常规的流感季节，这增加了我们需要处理的测试数量。所幸，在供应变更管理和生物医学工程等部门的支持下，我们能够应对这个挑战。这些部门优先订购所需的试剂、消耗品和设备。临床试验与研究部门也提供了额外的人力和物力。此外，曾经与非典和H1N1流感



战斗过的同事们从当时应付疫情的经验中汲取了经验，从而帮助我们更好对抗新冠病毒。

Yin Yin Mon, 清洁工

我在樟宜综合医院当清洁工已经一年多了，目前在隔离病房工作。我把病房当成自己的家一样对待，我的工作不仅是为医生、护士和其他人提供安全的工作环境，也是为病人提供一个清洁和舒适的环境。

随着新冠病毒的不断传播，我们现在得格外小心，更彻底清洁病房和房间。除了每天两次的病房例行清洁外，我们还在每位患者出院后对隔离室进行彻底和广泛的清洁和消毒。这包括了擦拭所有东西，从墙壁和窗户到家具和地板，以及更换所有日常织品。

我们的工作存在一定的危险，因此在工作时必须穿上个人防护设备。为了保护我们，我们接受了正确穿戴个人防护设备和消毒双手的培训。隔离病房的护士每天都会向我们提示要做什么和要注意什么。当我清除垃圾和弄脏的织品时，我还必须小心确保将垃圾正确捆扎防止溢出。我不怕在隔离病房工作，因为我经过严

格的培训，为在高风险地区工作做好准备。在休息的时候，我们会尽量留在病房里，以避免与其他病房工作的同事有接触，从而降低发生交叉感染的风险。



Wong Nga Chi, 助理临床护士

当医院刚开始接收新冠病毒的病例时，我们确实感到有些不安。但我们的培训教会我们在保持冷静的同时，要适应工作流程的变化并遵守传染控制的程序。我们医护人员之间有很好的团队合作和协调能力。我们相互鼓励，互相支持，并定期互相查看是否能够应对这场医疗危机所带来压力。我非常感谢我的同事，并希望在我们共同努力的当儿，每个人都保持安全与健康。

我们还得到了与新冠病毒搏斗并且成功康复的患者的支持。最近，有一位患者回到樟宜综合医院感谢治疗和照顾过他的医生和护士。我很高兴再次见到他，也因他的赞赏而感到鼓舞。☺



来自前线的声音

为您介绍几位在前线与新冠病毒搏斗的樟宜综合医院员工

站 在前线面对冠状病毒并不容易。樟宜综合医院员工说，尽管面临压力和工作量增加，他们时常得到同事、患者和公众的支持，从而感到鼓舞。

在这里，他们告诉我们在这个挑战时期如何应对，同时又致力于提供优质的医疗护理。

Kelvin Kuan, 急诊部顾问医生

作为一家医院，由于我们在对抗非典和H1N1流感之后所开发的工作模式，使我们对这次的新冠疫情做好了准备。当我们的感染预防和控制护士为我们提供有关个人防护设备的进修培训课程时，我们也感到更加鼓舞和有所准备。随着疫情的发展，我们的工作流程和方式也会不断调整。

Adora Cheng, 急诊部高级护士

穿上个人防护设备时会让人感到闷热和不透气，并妨碍与患者的沟通，但是我们知道这些措施对于保护自己、我们的患者和我们的家人是必要的。

同时，我也非常感恩能够得到家人和朋友的支持与鼓励。在这场与看不见的敌人作斗争的危机中，我们见证了医疗保健专业人员之间的团结和团队合作。我相信只有团结才能强大，因此每个人在这场疾病

的斗争中都发挥着重要作用。如果每个人都遵循良好的个人卫生习惯、承担社会责任并管理好自己的健康，我坚信新加坡可以克服这次大流行。



Tenny Chow, 环境服务部副总监

我的部门负责监督樟宜综合医院的清洁和门卫工作。

自新冠病毒疫情爆发以来，我们已在所有公共区域和病房内加强了清洁和消毒工作。我的团队现在对他们的任务看得更重了。他们了解到自己的工作在传染控制以及为患者和员工防御病毒方面发挥着重要作用。

就我而言，我与清洁工和门卫保持通畅的沟通。例如，我会定期与那些被分配到医院高风险地区的人员沟通，以确保他们在这些地区工作没有心理障碍，并提醒他们如果有任何疑问可以随时知会我。我也经常提醒他们要遵守良好的手部卫生习惯和多喝水，因为他们的工作很考体力。我们还优先为他们提供定期的个人防护设备培训，以便他们懂得如何充分保护自己。

我和我的团队有很好的关系，当我偶尔得帮助他们进行清洁工作时，他们也教我该怎么做！我必须承认，他们现在的工作更考体力，我也对我的团队所做的事情有更深敬佩。”

Mohamed Sidiqie bin Mohd Aiks, 紧急策划部经理

我相信在面临危机时才能带出人类最好的一面，而且我们确实是在樟宜综合医院员工的身上看到了这一点。我们看见了运营中心里团队之间相互支持、经常互相问候彼此的健康状况、送上好吃的东西，以及为下一班轮值的团队发送令人鼓舞的便条。我们这里每个人所展现的专业素养、毅力和动力深深地激发了我。我相信，我们可以共同克服这场健康危机的。

Nicole Teoh, 改进科学部高级执行人员

在得知许多同事，尤其是那些在前线对抗新冠病毒疫情的同事，拼尽全力抗疫时，我挺身而出当志愿者。从1月底开始做志愿工作至今，我被分配到樟宜综合医院的各地点，其中包括了医疗中心、主要大楼、急诊部的入口处和地下停车场。有时候，我连周末也去帮忙。我为在检查站等领域的志愿工作感到自豪，这使我在支持同事方面发挥积极而明显的作用。

在检查站工作也让我有机会与前线的医生和护士进行互动。在我们简短的交谈中，他们的鼓励之言总能给我带来希望和鼓舞，让我可以完成志愿工作。☺



施予的重要性

它改变他人的人生，并赋予我们更大的目标和意义

您应该听过“施比受更有福”这句话，但是您是否反思过它的含义？施予让我们可以完成大我，从而在过程中赋予我们更深的人生意义和目标。您经常会听到有一些人活得很不快乐，但最终在帮助他人中找到了慰藉和喜悦。帮助他人有助于塑造我们自己的人生观，而成为伟大事业的一部分可以帮助我们成长。

帮助他人的一种常见方法是捐款。如今，无论是在可持续性发展、医疗保健还是教育领域，慈善事业都在世界上引起了广泛关注。慈善事业的影响是非常明显的。在过去的13年中，我一直在倡导并建立对公共教育机构的支持，我可以证明慈善事业对新加坡有着深远的影响。

我看到了陌生人的慷慨大方如何帮助学生实现梦想，让他们能够继续接受教育并成为家庭中第一个获得大专学历的成员。这些学生现在是年轻的成年人，他们建立自己的事业和家庭，并为社会做出积极贡献。若不是有人愿意付出，这是不可能的，这些人的施予确保了有需要的学生不会陷入困境，以及我们的年轻人拥有平等的机会。

我也注意到了医疗保健领域的类似趋势。





樟宜医疗基金发挥作用的四种方式

樟宜综合医院的樟宜健康基金成立于2011年，旨在通过研究、创新和教育来改善我们社区的健康水平，并确保有经济困难的患者能够获得医疗服务。樟宜健康基金以这几种方法满足社区的需求：

1

使医疗专业人员能够挽救生命

樟宜健康基金通过教育确保了医疗保健的未来。高质量的临床培训和教育让我们下一代的医生、护士和综合医疗保健人员在实践医术和医疗科学方面持有正确的价值观。



“护理教育是一个不断发展的领域。如果我们一直以相同的方式进行教学，那么我们作为医疗专业人员将无法应对未来。我的学生们让我意识到学习是无休止的，也不应该停止。多年来，我了解到了一个有效的教育者和护士是一个能从多个角度观察事情，然后诠释、澄清和每天改善自己的人。”

Grace Ho Hui Ling, 护士教育者, 护士教育

3

资助医学研究

它让医疗保健专业人员能够应对当今的健康挑战并提高医学知识。在樟宜综合医院，卫生服务研究部门和临床试验与研究部门也使用这些资金来打造有利的研究环境。



2

“身患重病对一个人来说已经是一个沉重的负担了，但如果还加上经济困难，那便是难上加难。因此，我很高兴参加HomeCare Assist，帮助有需要的患者在出院后的这段最关键和最紧急的时期度过难关。”

Bernard Sabai 企业规划高级经理

2

照顾有需要的人

HomeCare Assist是一个樟宜健康基金属下的患者福利基金，自2002年成立以来已惠及4900多名患者。HCA为有需要的患者在出院后提供各方面的临时帮助，例如肾透析，呼吸护理器材和其他消耗品。



4

让创新更贴近您

您无需亲临医院就可以体验医疗保健创新所带来的好处。樟宜健康基金拨款资助如自主保健自助亭（Self-Empowering and Enabling Kiosk）之类的项目，该项目让个人能够监控自己的健康状况，而无需频频看医生。自主保健自助亭可在指定的综合诊所和老人活动中心内找到。



“创新之所以给予我们自主能力是因为它让每一位护士都能探索护理方面的新可能性，并成为改变的推动者。”

Nuri Syahida Ng 护理质量与转型高级护士经理

各方对于创新、研究和教育的支持使得我们的医疗保健系统保持在需求曲线之前、制造了可进的空间从而造福我们的后代，并强化我们的医疗保健系统以抵御将来可能出现的社会和保健挑战。樟宜综合医院的樟宜保健基金（Changi Health Fund）是推动这些计划的众多平台之一（有关详细信息，请参见信息图）。

突发疫情如Covid-19大流行病凸显了需要加强我们的医疗保健系统，以便为不断变化的需求做好更好的准备，并提出应对全球挑战的应对措施。我们越发需要更好的临床实践和疾病治疗的方案。这将确保我们对资源需求的增长不会超过分配的资源的增长。随着我们找到更多治疗疾病的方法，患者能够获得这些治疗的机会也应继续增长。

通过做慈善，我们可以成为更好的人，改善他人的生活，也改善我们的社会。☉

Marc Chan 是樟宜综合医院企业事务部（发展）的助理总监



医生怎么说

我们的专家回答患者的常见问题

我是一名65岁的女性，患有高血压、高胆固醇和糖尿病。我服用近10种药物，每种病症大约需要2到3种药物。尽管如此，我的健康状况似乎并没有改善。最近，我的医生告诉我他计划增加我的药物剂量。我真的不喜欢服用太多药物，因为担心对这些药物的过度依赖以及可能产生的副作用。因此如果当天的血压处于正常范围内，我便不吃控血压的药物。那如果我当天的血糖水平正常，是不是也可以不要服用糖尿病药物？

高血压、糖尿病和高胆固醇是新加坡非常常见的慢性疾病。良好的控制这些疾病对于预防患上心血管疾病，如心脏病、中风、肾衰竭或腿坏疽，是非常关键的。因此，您必须遵照医生开给您的处方服用药物并定期复诊。

遗憾的是，为了控制好每一种慢性疾病，患者通常需要服用多种药物。这些药物起着不同的作用来降低血压、血糖和胆固醇。有时候，当它们一起被使用时，其综合效果会给格外显著。

其次，这些药物以不同的方式起作用，因此它们具有不同的优势。例如，一些用于控制高血压的药物也有益于肾脏，特别是对于糖尿病患者。每种药物也都有自己的副作用。因此，考虑到患者的年龄，所患每种慢性病的严重程度以及对每种药物副作用的耐受性，针对患者开出的药物组合是特定于他的。基于这些原因，每位患者的药物都是他独有的，并由医生仔细评估后根据他的病情量身定制的。

其三，控制慢性病的目标因患者而异。例如，医生通常建议那些同时患有糖尿病的高血压患者严格控制血压（收缩压低于110mmHg至120mmHg）。然而，那些年龄在80岁以上的年长患者则适合较宽松的血液目标（收缩压高于140mmHg），这是由于他们血压下降会提高跌倒的风险。

因此，使用多种药物来治疗每种慢性疾病是有必要的。

是否可以减少开给我的药物数量？我还服用多种维生素，例如钙补充剂。这些会干扰我的药物的有效性吗？

首先，在添加更多药物之前，我建议针对每种疾病以最佳剂量的方式使用一种合适且可耐受的药物。

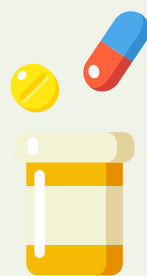
其次，患者应每周至少两次检查自己的血压和血糖水平。把读数记录在日记中，并在检查时告知您的医生。这是非常有用的，因为医生可以参考这些数据，然后根据病情的变化对处方进行适当的调整。

您应该只有在血压或血糖水平过低（特别在感到头晕）时，才停吃控血压或糖尿病的药物。如果读数正常，我建议继续按照处方服药，以便血压和糖水平保持稳定。

其三，保持健康的饮食习惯，尤其是控制富含淀粉、盐和胆固醇的食物的摄入量，绝对可以减少您对药物的依赖。定期运动也可以促进新陈代谢率、降低血压、血糖和胆固醇的水平，并与钙补充剂一起增强肌肉和骨骼。考虑到您的年龄，您可能还需要确保摄取足够的蛋白质和维生素D，因为它们有助于预防骨骼和肌肉的流失。服用这些维生素一般不会和这三种疾病的药物有所抵触。

药物清单不断变长或许会令人感到沮丧。然而，由于现在有多种药物可供选择，因此有可能设定一个既合适又可耐受，同时也是最低限度的药物治疗方案。不妨与您的医生讨论您的顾虑，以及如何优化您的药物清单，以便您可以继续享有健康和正常的生活。●

Peter Chow 是樟宜综合医院老年医学部门的顾问医生



储存药物的小贴士

- 药品应存放在阴凉干燥处，因为高温、空气、光线和水分会损坏药品。您也可以将它们存放在储物盒里。
- 除非药剂师特别嘱咐，否则大多数药物是可以室温存放的。
- 需要冷藏的药物包括胰岛素、液体抗生素、注射剂、滴眼剂和一些药膏。



I SUPPORT HomeCare Assist



“ HomeCare Assist has helped my patients go home with access to practical support. You can make a difference by supporting our needy patients to be cared for in the comfort of their homes. ”

Joanne Lim
Medical Social Worker



— SHOW YOUR —
SUPPORT



Changi Health Fund empowers needy patients through HomeCare Assist by providing interim assistance to support their recovery after discharge.

To date, over 4,500 patients have benefitted from HomeCare Assist, and so will many other patients. Scan the QR code to find out more.

www.cgh.com.sg/givingback

Mild to Moderate
Medical Conditions?

Your GP can **treat it!**



The **GPFirst Programme** is an initiative by Changi General Hospital's Accident & Emergency Department in partnership with over 200 participating GP clinics in eastern Singapore.

Patients with mild and moderate symptoms are encouraged to visit their GPs first to seek treatment at the GP clinics instead of going to the A&E.

Should the patient be referred by his or her GP via GPFirst:

- ✓ Accorded higher priority over other non-emergency cases
- ✓ \$50 programme subsidy* for their A&E attendance fee

For more information, visit www.GPFirst.sg

Like us on Facebook at  [gpfirst.sg](https://www.facebook.com/gpfirst.sg)

*Terms and Conditions apply



GP**FIRST**

YOUR FAMILY DOCTOR, YOUR FIRST STOP