

Mount Elizabeth Hospital's Pre-Annual Seminar: Towards a healthier life

Mount Elizabeth Hospital, operated by Parkway Hospitals Singapore, is considered to be one of Asia's top hospitals providing cutting edge technology. It recently concluded its 29th annual medical seminar with the theme: "Enhancing life with breakthrough medicine. It's Possible". Amidst a backdrop of prevailing haze, due to an outbreak of fire in a neighbouring country, the seminar invited some of the brightest minds from both home and abroad to take part in history as it was being made. Before the seminar proper, the pre-annual medical seminar symposium was held on the 23rd of October at the Mount Elizabeth Novena Hospital and everyone present looked forward with anticipation, given the success of last year's event.

Dr. Kevin Loh, the Senior Vice President of Parkway Hospitals Singapore and CEO of Mount Elizabeth Novena Hospital began the welcome address to officially kick off proceedings. Dr. Kevin began by highlighting some of Parkway Hospitals' biggest strengths, extolling the virtues of the fact that they are integrated across the entire healthcare value chain. "We encompass the entire healthcare spectrum from Lab Radiology, Primary Care clinic, Hospitals, Medical Centres to the Centre of Excellence", he explained. "Within Singapore, we have four hospitals under the Parkway Hospitals banner; Mt. Elizabeth Orchard, Mount Elizabeth Novena, Gleneagles, and Parkway East, which combined offers a 1000+ bed capacity and 43 operating theatres," he said. He also pointed out Parkway's excellent record of services highlighting its dominance in winning the Singapore Experience Award in 2013, 2014 and 2015. Winning the award three years in a row resulted in the group being awarded the Exceptional Achievement Award, another feather in the cap conferred by the Singapore Tourism board. With highly experienced physicians of whom 70 % boast a sub-specialty and trained in top institutes the world over, Dr. Kevin Loh promised unbeatable quality at the best possible price.

Dr. Tay Hin Ngan, an ENT surgeon, took to the podium next. The first ever distinction candidate in the Exit Examinations from NUS, Dr. Tay brought with him a wealth of knowledge and experience and drove right into his topic titled "Head and Neck Cancer and Minimally Invasive Option." First, he clarified the term robotic surgery, which he explained was not a surgery done by robots but rather doctors who controlled them. It was a point worth making and he walked the audience through the concepts of "surgeon consoles", "vision cart", "magnified 3D HD images", "angled endoscopy" and much more. "Using this technology ensures a tremor free exercise which results in more finesse. The camera and retraction are both controlled by the doctor and this allows him the ability to observe areas which normally cannot be seen," he said. Speaking of the merits of non-invasive surgery, Dr. Tay explained how a minimally invasive procedure can better deal with conditions like

opharyngeal and hypopharyngeal cancers. "Traditionally, you'd have to saw open the jaw, followed by a complex non-anatomical reconstruction," he said, his words accompanied with graphic images of what such a surgery would look like. He then explained how it is better to treat primary tumours with minimally invasive methods, which could also help avoid chemotherapy. "The pain would last for maybe two hours, and the patient can start eating normally in only two weeks," he said of the procedure. He summed up the benefits in a few key points: Smaller incisions, which translates to reduced risk of infection, less blood loss and minimal post-operative scarring; less trauma, resulting in reduced pain; less medication and a shorter recovery time; simpler and more precise stitching of fine threads; better clinical outcomes and shorter hospitalisation, which means lower hospital bills and an earlier return to your everyday routine.

The next illustrious name to grace the occasion was Radiation Oncologist Dr. Lee Kim Shang. His topic was "Tomotherapy: Non-surgical management of brain

anaesthesia for invasive surgeries, RT again comes as the best option," he said. Dr. Lee then mentioned that the procedure is even useful for certain areas, such as when there is a tumour at the base of the skull. "The tumour can be very radiation resistant but the results are better when RT is used," Dr. Lee Kim opined. As an example of its prowess, he cited a case where a young man suffering from such a condition, and partially blind as a result, began seeing better halfway through the process. Dr. Lee added that tomotherapy is known to work where other procedures have failed, with only 5-10 days needed for the effect to be seen on normal sized tumours. Despite being a more costly option than surgery, Dr. Lee pointed out that it meant almost no recovery period is needed, and presented almost no other disadvantage.

Dr. Leon Foo, an orthopedic surgeon, took center stage next. His topic was "Complex Bone Cancers". He began by underlining some key points on the issue, outlining a few treatment procedures before diving right into his lecture. One of the recurring themes of his talk was resection consider-

crucial to the well-being of a patient. "Sarcoma surgeries are very long surgeries. My longest surgery was for 52 hours," he said.

Dr. Lim Yeong Phang, a cardiac surgeon, was the final speaker. He spoke about heart surgery without a sternotomy. His was a gory presentation, with explicit images that forced the audience to re-consider their lifestyle choices whilst instantly augmenting the respect they felt for doctors. He began speaking about coronary artery bypass grafting or CABG, commonly known as heart bypass surgery. Listening to him, it dawned upon a lot of people who till now thought otherwise, that the bypass surgery doesn't in fact cure heart disease. Instead, it minimises the risk of angina, lowers the risk of heart attacks and can give the patient a better quality of life. Dr. Lim, who specialises in minimally invasive surgeries in this regard, explained that his method brings a lot of benefits. "An invasive heart bypass surgery uses small cuts, instead of dividing the sternum to reach the heart," he explained. "This way complications and wounds heal faster, infection rates are lowered, the procedure is fast and you can go back to work in only 3-4 weeks," he said. He showed the remarkable recovery of a 30-year-old through images to drive home his point. In a press conference, he also told the amazing story of a 9-month pregnant, 35-year-old woman. Although, the doctor assured her that the surgery she needed could be done, her baby would be at risk. With consultation from her gynaecologists, the surgery was carried out and in the end, both lives were saved and each made better because of the risks mother and child had undertaken together.

As applause greeted Dr. Lim's conclusion, Mr Alvin Neo, the Chief Marketing Officer of Parkway Hospitals Singapore took to the podium. He thanked everyone for their presence, thanked the sponsors, the specialist speakers and bid everyone farewell. As the session drew to a close, it was easy to be awed by the technological advancement Parkway Hospitals had made. They are pioneers in fields that others had yet to even discover, and with their state-of-the-art equipment - complemented by a set of the best doctors, it really seemed like anything could be cured. History was being made here and it was good to be part of it.

Check this space next week for a full report on Mount Elizabeth Hospital's 29th Annual Medical Seminar, themed on the topic, "Enhancing Life with Breakthrough Medicine. It's Possible" to get an even better idea of what Singapore has to offer when it comes to the best possible healthcare! Zahid Khan, Director of Dhaka office also took a delegate of doctors from various hospitals of Bangladesh to participate in the seminar. The doctors from Bangladesh enriched the conference and took part in important information sharing and discussion, both of which will be focused on in next week's article.

By Osama Rahman back from Singapore
Photo Courtesy: Parkway Hospitals Singapore



tumours". Tomotherapy, he explained, is a type of radiation therapy (RT) in which the radiation is delivered slice by slice. This method of delivery is vastly different from older techniques where one or more opposing fields of radiation would encompass the entire tumour but result in significantly more radiation to normal structures. "This procedure targets very specific areas and targets areas up to 160 cm in length while decreasing the risk of other areas being exposed to radiation needlessly," he said. "Tomotherapy is a revolutionary radiation technology that uses Intensity-Modulated Radiation Therapy (IMRT) to treat different tumours. It allows doctors to directly target the radiation beams on the diseased tissues, while sparing the surrounding healthy tissues from radiation damage," he explained. Using such radiation therapy as an alternative to surgery could be much more useful in cases such as those of small brain tumours, tumours of eloquent areas, multiple tumours etc. "In the 1990s, neurologists and radio therapists would argue about whose method was better but over the years, both have accepted the merits of RT. When patients do not respond well to

ation and he brought up a few questions before considering the method of treatment. "If it's the bone then which bone? Is there any joint involvement?" he asked. "Biopsy and resection surgery should be done by the same person as he is already familiar with the patient," he said. "The skin incision should be minimised as much as possible. It is best to take the most direct route," he continued, adding that the biopsy must be planned carefully with ample consideration given to possible malignant elements. He further suggested that the biopsy tract is best kept in a single compartment, warning practitioners to avoid neurovascular structures and transverse joints. "You can actually salvage a lot of parts for re-construction," he reminded the audience when going back to explaining the need to plan resection surgeries ahead. He then began speaking about peri-operative management. The peri-operative period, also called the peroperative period, is the timeline describing the period of a patient's surgical procedure, including ward admission, anaesthesia, surgery, and recovery. In terms of very long surgeries, a properly structured pre-op management is