



### > Q1 | Pregnancy Aches & Pains

I am 21 weeks pregnant and am experiencing upheaval at work and at home. Recently, I've noticed that whenever I'm feeling extra stressed out, I'd get a nagging twitch or pull at the side of my stomach or right above my pelvis. It happens as frequently as once every minute, to just a constant nagging pain. It usually goes away after I've calmed down, although it could take hours. But I've also read that my abdominal muscles could be stretching due to my pregnancy. Should I be worried?



There are a few reasons for abdominal pain in pregnancy. As long as the pain is relieved on its own and the intensity of the pain is not getting worse, then it may not be a serious issue. In your case, it looks like your pain gets worse when you are stressed and it gets better when you calm down.

Hence you should try to lessen your stress at work. Talk to your boss and colleagues to off-load some of your work and if necessary, to take few days of rest at home. The pain could be arising from the abdominal muscles, stretching of uterine ligaments, early onset of labour pains, from fibroids in the uterus or ovarian cysts.

The other reasons could be due to urinary infection, appendicitis, gastric flu or from constipation. Hence, you must make an appointment to see your gynaecologist who may examine you and treat you accordingly.

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### > Q2 | Is A Second Surgery Her Best Bet?

My mother is 54 and has just been diagnosed with Stage 4 Colorectal cancer which has spread to her liver. She's always been mildly anaemic and suffers from low blood pressure. When she had to undergo emergency surgery to remove the tumour in her large intestine, she needed two packs of blood transfusion before the doctors could operate on her. Her surgeon has recommended chemotherapy to reduce the tumours around her liver, until they're small enough to be operated on. I've heard about other patients whose condition deteriorated very quickly after a second major operation. For her age and condition, should we take the risk?

Colon cancers often bleed silently and as such, anemia is one of the common symptoms. This is the reason why your mother could have needed the transfusion before the surgery.

When the tumor is sizeable, they can cause obstruction and this often necessitates a surgery. In later stages of colon cancer, ie Stage 4, there is still a possibility of controlling the disease with chemotherapy. In some situations, chemotherapy may even downstage the tumor to a smaller size or to a location more suitable to operate on, for example, one part of the liver or part of a lung.

Currently the best chance of cure for patients with colorectal cancer that has spread to the liver is to have the tumours in the liver removed surgically. This however may not be possible at

the first instance but very often, with a suitable course of chemotherapy, the tumours will then be surgically removed.

It is not true that patients deteriorate very quickly after a 'second' operation. Currently with development in liver surgery, most of patients recover very quickly after surgery, be it their first or second surgery. In fact, some patients were suitable for laparoscopic liver resection for such 'second' operations and they recovered extremely well. Your mother is 54 years old and is certainly not considered as 'old' since nowadays, we are operating on an aging population and a large number of patients we see are older than your mother.

What is more important is whether your mother has any other medical conditions which may complicate the recovery process. In addition, the timing of the liver surgery is also important. The liver and the body need to recover sufficiently from the chemotherapy before surgery. For this aspect, your oncologist or liver surgeon will give you the best advice.

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### > Q3 | Salt Assault

Whenever I'm feeling 'heaty', my mother would ask me to drink a glass of salted water because it would 'cool' me down. I've been doing it for years until I recently did a full body check-up and discovered that I'm suffering from mild high blood



**pressure which hovers around 150. I've heard that I should reduce my salt intake to improve my condition. Can I continue to take salted water when I'm feeling heaty? Can you recommend another natural remedy?**

From the medical nutrition therapy's perspective, there is no differentiation of foods or drinks into 'cooling' or 'heaty'. This is solely based on belief passed down from previous generations or alternative medicine's perspective.

Usually when patients complain of 'heatiness', it is due to constipation as a result of inadequate fluid or fibre intake. The solution to counteract this so-called 'heatiness' is to drink enough water (six to eight glasses per day) and take enough fibre (two servings of fruits and vegetables daily).

Studies have shown a close association between high sodium intake and hypertension. Hence, you should stop drinking salted water since this will unnecessarily increase your sodium intake per day especially now that you are suspected to have hypertension. Going on a low-salt diet, exercise, avoiding smoking and alcohol, maintaining a healthy weight and living a stress-free life are various non-pharmacological measures to control hypertension. Regular check-ups and monitoring of blood pressure are essential in the follow-up of hypertension.

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## **> Q4** | **Supplements For Kidney Failure?**



**My father is undergoing dialysis for kidney failure. We've been recommended all types of supplements and vitamins from outside sources, mostly from multi-level marketing companies. I don't believe these would cure his illness but I would like his health to improve so that he's able to go through the regular dialysis. I'd like to know more about alternative treatments that might help his condition. Are there any specific vitamins you can recommend?**

Kidney function for patients with end stage kidney failure on dialysis is irreversible and will not improve with supplements and vitamins.

However, patients may have vitamin deficiency due to various reasons – lowered intake associated with poor appetite from the illness, poor absorption of nutrients in the intestines as well as loss through dialysis treatment. Vitamins and trace elements are required in only small amounts for energy

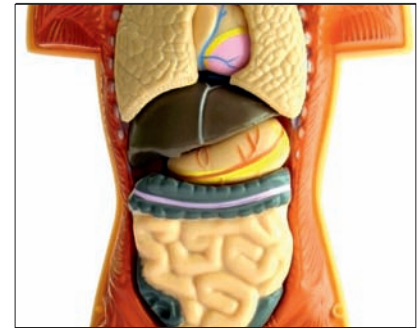
production and organ function. To avoid complications of deficiency, a supplement containing the RDA (Recommended Daily Allowance) for water soluble vitamins is usually prescribed to patients with kidney failure by the renal physician. Depending on the patient's condition, other supplements like Vitamin D, calcium and iron supplements may also be prescribed.

There is currently no evidence for the safety and effectiveness to use supplements and vitamins from multi-level marketing companies in kidney failure patients. In fact, there are potential risks with reports of toxicity from different supplements and herbal remedies due to compounds themselves or from the contaminants. As such, the recommendation is not to take supplements from multi-level marketing companies for kidney failure patients.

You should follow the advice of your father's renal physician as the necessary medications and vitamins will be prescribed based on regular blood tests performed for his dialysis treatment

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## **> Q5** | **Reflux Action**



**Due to my busy work schedule, I'm guilty of eating irregular meals and working late hours. For the last three years, I've been having nagging aches in my abdominal area, which can last anything from 10 minutes to two hours. Last year, I did a stomach scope through my oesophagus and my doctor said I was suffering from 'reflux'. He said there is some slight erosion due to my stomach acids which could lead to stomach ulcers. A friend told me this could even lead to stomach cancer – is this true? The pain usually goes away when I take my medicine (prescribed "to be taken when necessary") but recently, it's come back, probably triggered by work and family stress. My doctor thinks there's no need to do another stomach scope and prescribed more of the same medicine to be taken on a daily basis. How often do you recommend that I go for a stomach scope?**

A stomach ulcer is a break in or disruption in the superficial lining of the stomach wall. An erosion is a smaller or partial break (often 1-2 millimetres in size). Although some stomach erosions may lead to stomach ulcers, most do not. The majority of stomach ulcers is benign and is caused by either a bacteria (*Helicobacter pylori*) or anti-inflammatory medications. These do not usually lead to stomach cancer. Only a very small percentage of stomach ulcers are due to cancer.

Reflux is a condition in which the acid liquid in the stomach regurgitates up into the oesophagus. This may or may not lead to acid injury to the lining of the oesophagus. Reflux is usually not related to stomach ulcers.

It is usually not necessary to go for regular gastroscopies for stomach erosions or mild reflux. Treatment with anti-acid medications is usually sufficient.

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### > Q6

## Let's Talk About Sex

**My daughter just turned 12 and suddenly, her body seems to have developed over night. Although she has already started menstruating and is wearing a bra, she seems to still behave like a child. She grew up with two male cousins who are a year younger and older than her respectively. They are always playing rough, sometimes pushing and rolling about on the floor. I don't know if I'm being oversensitive but I'm becoming increasingly wary that their hugs and kisses may not be entirely innocent, especially the 13-year-old's. My daughter has never asked me any questions about sex and I don't know where to even begin. Should I take the initiative? I'm worried that I might make her feel awkward and uncomfortable around the boys if I don't do it right.**

A 12-year-old girl behaving like a child is not uncommon. Since she has grown up with her cousins from her young age, she may think it is natural to be close and to go along with them. Unfortunately, there is no easy recipe as to what information should you share with them regarding their behaviour with boys and sex education. It depends on her age, mental maturity, your values and how much she can understand.

a) Seize an opportunity to discuss your concerns with your child. For example, when you watch a movie where a child is behaving like your daughter, a good way to begin is to ask her questions about her views about the girl's behaviour. From there you may start a discussion on what is expected at her age, how to deal with boys who are rough to her and her role as a girl of your expectations.

b) Communicate your values. It is important to help them understand your beliefs and values about behaviour. The best way to communicate values is through your own example and being a role model for them to follow. Forcing them or dictating to them will not work. As a parent, give your opinion, be non-judgmental and help them to learn to make their own decisions.

c) Listen to your child's concerns. Being a good listener will help you to understand your child better. Listen carefully for hidden messages at discussions, in case she is trying to tell you that she or one of her friends is facing decisions about dating, etc. Allow your child to ask questions without teasing or punishing her for asking about dating, boy girl relationship and sex.

d) Respect your child's privacy. It has been shown that when parents do not pry into their private lives, they are more likely to discuss their problems and volunteer information.

e) Talking about "SEX" will make not them "DO IT". Giving information about sexuality does not mean that they are given permission to have sex. On the contrary, sex education influences them to be more responsible. Research has shown that when parents are primary source of sex education, children are more careful and postpone their first sexual intercourse.

In conclusion, shielding the facts and information about sex from your children will not help. They get information from friends, television, movies and magazines. Also, children will form their own standards of behaviour with or without your help. The best way to handle children and teenagers is to seize an opportunity at any age and to provide simple information according to their mental maturity.

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