Allergic Rhinitis

What is allergic rhinitis?
It is a condition where one is prone to sneezing, nose congestion and sometimes, suffers from a bad cough that worsens at night. Called post-nasal drip, this is due to the secretions running from the nose to the back of the throat, causing irritation.

Why does my child have allergic rhinitis?
This could be due to a combination of genetic and environmental factors, as is the case for most allergic diseases.

What triggers allergic rhinitis?
House dust-mites are one of the most common triggers. These are microscopic creatures that are found everywhere (pillows, mattresses, soft toys etc) and it is their droppings that cause allergic reactions. Other triggers are pollen, pet fur and secretions.

How do I keep allergic rhinitis in check?
Your child should take the prescribed medication and avoid environmental triggers.

What medications can my child take?
Topical steroids (nasal spray) and anti-histamines, nasal decongestants, mucolytics and antibiotics are sometimes prescribed.

How can my child avoid environmental triggers?

For dust-mite allergy:
- Wash beddings in hot water (higher than 60 ºC) at least once a fortnight.
- Avoid pillows and comforters that are made of natural materials (eg, feathers) and use those made from synthetic fibres.
- Avoid using carpets and thick curtains.
- Keep your home dust-free by damp cleaning. Vacuum only when your child is not at home. Air-purifiers may also be helpful.

For pet allergy:
- Avoid contact with the pet but do consult a doctor and let your child have an allergy test.
Eczema

What is eczema?
Also known as atopic dermatitis, eczema is a non-contagious chronic condition that results in red, dry, scaly and itchy skin. It often affects the elbows, knees, neck and face and is more common in young children.

Why does my child have eczema?
This is usually due to a combination of genetic and environmental factors.

How can I keep the eczema in check?
- Moisturise as often as possible using a suitable, alcohol and scent-free moisturiser.
- Use mild soaps and pat the skin dry after showering.

Allergy Tests

What are allergy tests?
In allergies, the body produces abnormal amounts of substance Immunoglobulin E (IgE). Allergy tests use different methods to measure the amount of IgE.

Who should be tested?
Children with persistent and difficult-to-control symptoms should be tested. This includes patients with moderate to acute asthma, eczema, rhinitis or conjunctivitis and suspected food allergy. Children with suspected allergies may also be tested.

What are the allergy tests available and how are they done?
Two types of tests can be done to confirm an allergy.
- Skin-prick test: involves placing a small amount of suspected allergen on normal skin and using a small needle to prick the skin. This test is safe and can be done on patients of all ages. Prior to this test, the child should abstain from short-acting anti-histamines (three days abstinence) and longer-acting anti-histamines (one week abstinence) before the test.

- Blood test: involves obtaining a small sample of blood and testing to see if the child is allergic to common allergens.

Which test is better?
Each test has its advantages but usually, the skin prick test is sufficient as an initial screen. However, the doctor may need both tests to make an accurate assessment of the likelihood of an allergy.

How accurate are the tests?
These tests are rather precise at eliminating substances that do not cause an allergic reaction. However, in the event that they do isolate substances that trigger an allergic reaction, this may not always be accurate. Your doctor will interpret the test(s) for your child and may order more tests if the suspicion is still high.

I CAN!, a programme of The Children’s Asthma and Allergy Network, aims to optimise the care and understanding of asthma and allergies in children. To find out more about I CAN!, visit their website at www.ican.com.sg or call the patient hotline at 6772 5566.
One-Stop for **Mums and their Newborns**

appreciate that my baby and I can see our doctors in the same clinic, especially since I do not need to go to two clinics in different buildings.

With the recent introduction of neonatology and paediatric services in our Women’s Clinic (20 January 2003), mums and their newborns can now receive personalised medical care under one roof.

While mums visit their obstetricians, their little ones can also be seen by our neonatologist/paediatrician at the clinic. This means greater convenience as there’s no longer a need to make a separate appointment for baby at the Children’s Specialist Clinic in Main Building 1.

Appointments for both mother and baby can be made at the postnatal ward (before discharge), or by calling NUH Women’s Clinic (Ruby) at 6772 2255.

New Adult Congenital Heart Disease Clinic

Located within Clinic D, the Adult Congenital Heart Clinic started its operations since January 2003. Currently, this clinic caters to adult patients with congenital heart disease (inclusive of Marfan Syndrome), pulmonary hypertension, heart disease in pregnancy and congenital intervention. Clinic sessions are on Mondays 2pm to 5pm.

For more information, please call the clinic at 6772 5733.

‘Eye Eye’ for Better and Faster Service

Patients at our recently renovated Eye Clinic can now experience a more comfortable and efficient consultation process amidst its fresh new look! The splashes of bright, bold orangey hues evoke a sense of freshness and vibrancy. Creative and contemporary design elements add interesting touches to the look. The pleasant wallpapering is a vast contrast to the previously bare clinic walls.

To reduce the monotony of waiting, more television sets have been installed for patients’ viewing pleasure. Patients will be happy to know that the additional new consultation rooms reduce their waiting time as workload is more efficiently processed. Connecting rooms improve patient flow such that patients are ushered to their next stage of consultation seamlessly.

For enquiries, please call the Eye Clinic (KRW 2) at 6772 5504.