



Active with Allergies

THE 45TH SMA NATIONAL MEDICAL CONVENTION

By Denise Yuen and Mellissa Ang

Public Symposium

THIS YEAR'S SMA National Medical Convention, Active with Allergies, was held at Sheraton Towers Singapore on 30 August 2014.

SMA President A/Prof Chin Jing Jih kicked off proceedings in the morning with a welcome address, in which he expressed his hope that members of the public in attendance could benefit from what the speakers had to offer. He emphasised the importance of getting patients to be part of their own care management teams. Next, Dr Tan Tze Lee and Dr Amy Stebbings, Chairperson and Vice Chairperson of the Convention Committee respectively, performed an entertaining bilingual skit to introduce various allergies to the audience in a light-hearted manner.

After the opening ceremony had wrapped up, the participants, who numbered close to 150, were free to attend the talks held in either English or Mandarin.

English session

Can my child eat this?

The first speaker was Dr Soh Jian Yi, who is an associate consultant with the Division of Paediatric Allergy, Immunology and Rheumatology at National University Hospital (NUH). Dr Soh presented a short introduction on what constitutes food allergy. He also emphasised that parents should not stop their children from eating certain types of food to prevent the onset of a food allergy, because it could increase the risk of developing one due to lack of exposure. During the question and answer segment, a few members of the audience posed questions varying from the causes of food allergies to the

possibility that they would develop in an individual's later years. Dr Soh shared that although there were various food allergy tests, he would ask "20,000 questions" before determining that the patient does have a food allergy.

I have asthma – is it safe for me to exercise?

Dr Ben Tan, a senior consultant and Chief of the Department of Sports Medicine at Changi General Hospital, addressed one of the most common respiratory allergies, asthma, during the second talk. He focused on the topmost question asthmatic patients ask – "Is it okay for me to exercise?" The well-known sports physician and sailing athlete explained the epidemiology and pathophysiology of the condition, before narrowing down the scope to exercise-induced bronchospasm. Dr Tan highlighted that contrary to popular belief, exercise abstinence would likely worsen the situation. He firmly stated that asthmatic patients should have no problems exercising, provided they have detailed exercise plans and appropriate medications on standby. Dr Tan shared that although he has been an asthmatic since he was a young boy, he still runs, scuba dives, skis and kite surfs today – a living testimony that individuals with asthma can still engage in high intensity sports with the right management plan.

The eternal itch

The third and final English talk, about battling eczema, was led by Dr Alison Joanne Lee, a registrar with the Department of Paediatric Medicine at NUH. Unlike the other two English



sessions' speakers, Dr Lee spent most of her talk showing the audience how to manage various types and degrees of eczema using the SHAPE (Soothe, Heal, Activity, Prevention, Emergencies) method. She recommended various treatment and management strategies to help children with eczema, ranging from patient-centred approaches like applying moisturisers and taking antihistamines, to environmental methods like washing bed sheets in hot water and freezing soft toys overnight to kill dust mites. A member of the audience shared the difficulties she faced as a housewife who has skin allergies, to which Dr Lee recommended soap-free hand wash and latex-free gloves.

Feedback from the public

Rosalind Tan, mother of a teenage son with atopic eczema and allergic rhinitis, found that all three English talks were affirmative of her knowledge about allergies. However, she felt that more emphasis should have been placed on management concepts as she felt that that was what participants were most interested in.

Mandarin session

Food allergy and intolerance

The first talk was delivered by Dr Wong Soon Tee, consultant dermatologist at Assurance Skin, Laser & Aesthetics, who noted that food allergies were on the rise. He named some common food allergens, including milk and dairy products, eggs, wheat and bird's nest. Interestingly, bird's nest is the topmost cause of anaphylactic shock in children locally. Dr Wong explained that allergies occur when the body's immune system overreacts to foreign substances. In particular, the human antibody immunoglobulin E plays an essential role in many allergies. He also identified various allergic symptoms, including skin conditions (like urticaria), respiratory problems (like rhinitis) and anaphylactic shock. Dr Wong also elaborated on the proper management of food allergy. For example, patients could keep a food diary to ensure an accurate record of what they consumed and minimise confusion over what triggered their allergy. An

older woman in the audience said that eating *char kway teow* from different stalls always caused her to have diarrhoea, so she gave up eating it, and asked Dr Wong for possible reasons. Dr Wong replied that she might lack the enzymes needed to digest such oily food.

Controlling asthma and living well

Dr Theodric Lee, a registrar at the Division of Pulmonology and Sleep, Department of Paediatrics, NUH, began his presentation by identifying several prominent sports personalities, like footballer Paul Scholes, who had done well in their chosen sports despite suffering from asthma. He noted that with timely diagnosis and treatment, asthma symptoms could be controlled, and patients would not be affected by them when engaging in exercise. On the contrary, a lack of physical activity often leads to obesity. Therefore, Dr Lee encouraged asthmatic patients to exercise as it reduced their risk of obesity, which in turn could ameliorate their symptoms, allowing them to lead full and healthy lives. He recommended that they take up sports like swimming and running, which are less likely to trigger asthmatic symptoms, and suggested other preventive measures like carrying inhalers at all times.

Itch

Dr Wong Soon Tee spoke for the second time that day by delivering the final Mandarin talk. He began by explaining the epidemiology of itchiness. Itch tends to be more common in older people – the reasons for this are often unclear, although as one ages, skin generally undergoes changes, such as a decrease in the skin barrier function and increased dryness. He cited four major causes of itch: histamine, skin disorders, damage to the nervous system or illnesses affecting other organs, and psychiatric conditions. He also noted that patients needed to receive accurate diagnoses before they could receive the right treatment like taking antihistamines, or using moisturisers and creams. A middle-aged woman commented that even after visiting many hospitals and undergoing Traditional Chinese Medicine



Convention speakers in action (from left) Dr Tan Tze Lee, Dr Amy Stebbings, Dr Soh Jian Yi, Dr Ben Tan, Dr Alison Joanne Lee, Dr Theodric Lee, and Dr Wong Soon Tee

treatments, her son's extremely dry skin was still not cured. Dr Wong answered that controlling symptoms was key in the management of allergies. He also observed that unfortunately, many patients could not accept that they could not be completely cured.

Feedback from the public

Peter Tay, a 45-year-old who attended the convention with his 17-year-old son, commented that he found the convention useful, as his son was allergic to crustaceans and they would hopefully be able to apply the knowledge they gained to daily life.

A pair of friends, both housewives, commented that they decided to attend the symposium as they wanted to know more about allergies. One was Mdm Teo, aged 58, who said that one of her children had eczema, and added that she would instruct her child not to scratch if her skin itched. The other, Mdm Lim, aged 62, commented that she now knew that the mild skin rashes she sometimes developed was actually not a true allergy.

Conclusion

The Public Symposium finished at noon, and participants left empowered with an important lesson: manage their allergies well so that they could live as normally as possible.

Lunch Symposium

THE PUBLIC Symposium concluded at 12 pm, but the convention programme continued into the afternoon with the Lunch Symposium. It was a full house, with close to 100 doctors from various specialties enjoying a sumptuous buffet lunch while listening to the talk.

Optimising asthma management in childhood

A/Prof Anne Goh, a senior consultant in the Respiratory Medicine Service at KK Women's and Children's Hospital, was the sole speaker at the symposium.

She started her talk by explaining the various features of asthma in young children. Although wheezing usually indicates asthma in young children, the most common cause of wheezing in such patients is viral respiratory infection; meanwhile, the strongest predictor for wheezing that develops into asthma is atopy.

Citing several studies conducted, she commented that daily use of the medicine Montelukast for over a year significantly reduced asthma exacerbations in children with mild intermittent asthma. Additionally, a short course of this medication given at the first sign of an asthma episode resulted in a modest reduction of healthcare resource utilisation and symptoms.



A/Prof Anne Goh

A/Prof Goh noted that the primary objective of asthma therapy is to gain and maintain control of asthma without any side effects. According to the Global Initiative for Asthma, key action steps in new treatment guidelines are: assessing asthma control, treating to achieve control and monitoring to maintain control.

Examining research done on the episodic use of inhaled corticosteroids versus Montelukast versus placebo in preschool children with intermittent wheezing, A/Prof Goh commented that there was no difference in proportion of episode-free days between groups. There was also no difference in oral steroid use, healthcare utilisation, quality of life or linear growth. However, there was modest reduction in trouble breathing and interference with activity scores in those with positive asthma predictive indices.

Therefore, with regard to pharmacological therapy, the only effective management is that which is accepted by patients or their guardians, despite aspects such as efficacy, adverse effects and cost. A/Prof Goh emphasised that medications are only useful if the patients take them, and are

only effective if they can reach the targeted sites.

She concluded that an accurate diagnosis is necessary for the optimal treatment of asthma, which aims to achieve good control of this condition in children. A simple regimen is important to improve compliance, and doctors should discuss treatment options with patients' parents for long-term compliance.

A/Prof Goh's presentation was complemented by an audience response system, which enhanced interactivity with the doctors present. Whenever she posed questions, participants could use individual handsets to send in their answers. Their replies would be tabulated and displayed in real time. These were then put up for discussion, sparking lively exchanges from the floor.

Medical Symposium

AFTER THE Lunch Symposium ended, the audience of doctors proceeded to the third and final segment of the convention – the Medical Symposium, where Dr Lynette Shek, Dr Samuel Yeak and Dr Wong Soon Tee discussed food, respiratory and skin allergies respectively.

Food allergy

Dr Lynette Shek, a senior consultant with the Department of Paediatric Medicine at NUH, was the first speaker. She noted that non-scientific data about food allergy have wrongfully made it the scapegoat for numerous diseases, resulting in an excessive number of children being diagnosed as food allergic. Thus, Dr Shek hoped to rectify some misconceptions about food allergy by providing more information about this condition.

Dr Shek elaborated on different types of food allergy, and food as a trigger for medical conditions such as eczema and gut problems. She advised that if patients, especially children, cannot control their eczema well, they should be sent for food allergy testing. Once doctors receive the test results, they should interpret them thoroughly to determine the types of food that are allergy triggers for their patients.

According to Dr Shek, the most common food allergy affecting adults is food-associated exercise-induced anaphylaxis. The treatment for this group of patients is simple; they simply need to avoid the food trigger and exercise only four hours after eating.

Based on Dr Shek's personal experience, the parents of her young patients often tell her that they do not feed their children milk or any other dairy products when they have runny nose as it causes phlegm. Dr Shek jokingly mentioned that while she would not disagree with age-old Chinese, Indian and Western cultural beliefs, these worries

were not scientifically justifiable. She would recommend removing milk from the diets of these young patients for two weeks and to monitor for any improvement, before eliminating it indefinitely.

Understanding the different types of rhinitis

The second speaker, Dr Samuel Yeak, Director and senior consultant at Amandela ENT Head & Neck Centre, shared about different types of allergic rhinitis that tend to be perennial instead of seasonal. Dr Yeak introduced differential diagnosis for rhinitis, which included nasal polyps, mechanical factors, tumours, granulomas and cerebrospinal fluid rhinorrhoea. He also expressed worries that most patients with perennial allergic rhinitis do not make their conditions known as they have become accustomed to the symptoms and are often told that nothing can be done for their allergies.

Most patients with rhinitis assume that their conditions would worsen when they travel to a drier and cooler climate. However, since one of the top rhinitis triggers for Singaporeans is dust mites, which thrive in warm and humid environments, their condition usually improves instead when they are overseas.

Dr Yeak mentioned that the role of the family doctor is to provide symptomatic relief through medication such as antihistamines and decongestants, ensure proper testing has been done through methods like sinus X-rays, and refer the patient if their rhinitis is recurrent (more than three attacks a year) or chronic (persists for more than eight weeks). On the other hand, he opined that the role of the otorhinolaryngologist is to confirm diagnosis of rhinitis, administer culture-directed antibiotics, conduct appropriate allergy testing, and specify allergy management such as allergen avoidance or even surgery.



The eternal itch

Dr Wong Soon Tee, who delivered two talks during the Public Symposium earlier, led the last presentation of the day. He focused on four aspects of skin allergy – epidemiology, treatment, science, and his personal approach to itch.

According to a British study, out of 100 patients that a doctor sees daily, he will encounter one patient who presents with itch. Dr Wong further explained that approximately 60% of elderly patients above 65 years old will suffer mild to severe occasional itch, and the prevalence of chronic pruritus increases with age. Chronic pruritus is a big problem for elderly patients as the exact mechanisms and causes are unknown; it could possibly be attributed to pathophysiological changes of the aged skin, decreased function, polypharmacy, and so on.

Dr Wong shared some simple approaches to help patients with itch, including steps like looking for inflammation of the skin, identifying systemic and psychiatric causes. He highlighted that patients presenting with itch that are caused by psychiatric reasons can be spotted easily, for example, he had patients who brought their skin flakes to his clinic as they believed that there were bugs in it. Dr Wong reminded the audience to be alert to their patients' conditions and rule out scabies or hives first.

Finally, Dr Wong listed various treatment methods, such as wearing comfortable underwear and using medications like anti-itch creams and powder. He revealed that he sometimes prescribes oral steroids for his patients as a short term approach to stop the inflammation. However, Dr Wong cautioned doctors that they should only use oral steroids to mitigate the problem within a short time frame, before countering the itch cycle aggressively with other medications instead.

In closing

The 45th SMA National Medical Convention – featuring three symposiums comprising 11 talks – finally came to a successful conclusion in the late afternoon. The Convention Committee Chairperson Dr Tan Tze Lee and Vice Chairperson Dr Amy Stebbings, along with the rest of the committee, wish to thank all invited speakers, guests and participants for taking time off to attend the allergy-centred symposiums. The committee would also like to express its appreciation to the convention's sponsors: Tote Board, Lee Foundation, National Healthcare Group, Xepa-Soul Pattinson (S) Pte Ltd, AstraZeneca Singapore Pte Ltd, as well as our product sponsors. See you at next year's convention! ■

From top

Dr Lynette Shek

Dr Samuel Yeak

Dr Wong Soon Tee

Dr Wong (left) and Dr Yeak answering questions from the audience