

Butterflies in my stomach

by Dr Low Sher Guan Luke, FCFP(S), Council Member, Editor

“You have 99+ new messages”. I could hear my phone going off all day, and I have had to continually charge my phone so that the battery is put on continuous life support, failing which it will drain and die off and I won’t be contactable by staff. You might ask “Who are sending those messages?” Essentially, it comes from a very busy chat group populated by our fellowship trainees who are abuzz with chatters on their preparations on the upcoming exams. There was so much anxiety, excitement, fear all accumulated and rolled together, that the chat group was filled with sharing of experiences and raising of questions and answers. Yes, indeed our fellowship trainees are all very motivated and many of them wish to go through the exams without a hitch. Considering this is an exit exam, it really is a high-stakes summative exam for many of them.

Having had many chances to interact with these trainees, I understood some of the reasons why they chose to go through such a traumatic training and exam. Most of them have good intentions to learn and train. Even for the occasional ones who are looking for career advancement, they too will benefit from the training, and that is all that truly matters.

The day of exam result release was even more dramatic. Many of them were so anxious that they could not focus at work. Those who had the luxury of taking leave on the day of result release told me they could not enjoy the leave fully. For me, it was like déjà vu as I recalled how this process caused me similar anguish and anxiety 3 years ago. Seeing how tortured our trainees and friends were, it was as though I was reliving that moment myself. I could fully empathize as well as sympathize with our trainees on this.

The results were finally released at the end of the day. For some, it was a dream come true, and definitely a sigh of relief. For some others, disappointment and perhaps anger at times. It was a potpourri of emotions and feelings poured out over the chat group. The trainees started to take stock of who made it and who nearly made it. It was never easy for those who fell slightly short of the finishing line. Believe me, many of them had tried to run the good race... at least they had the courage to try.

For those who really believe in training and ultimately passing the fellowship exams, I sincerely believe that they will clear the exams

with determination and hard work eventually... it becomes a matter of when. Not to say that retaking exams are easy tasks, as I do not wish to belittle the gigantic effort needed. To spur us on, we are very privileged to have Dr Alvin Ong share his fellowship learning journey with us in this issue. Our editorial team member Dr Vincent Chan will also be revisiting our various college training programmes and how they can fulfill a family physician’s life-long desire to train.

Even after clearing the fellowship exams, what then? In our neighbouring countries in Asia, those who exit the family medicine fellowship exam are recognized as a specialist in family medicine. Does being termed a “specialist in family medicine” mean we are narrow in discipline and look through the microscope? Or does it mean we are specialists in a generalist sense? Does according the discipline with the well-deserved recognition that she deserves help her to attract more aspiring young doctors to choose family medicine as a discipline to train in? What does it mean for the healthcare landscape? More of this in the article “My country’s family medicine is better than yours?” that is hilarious yet serious and debatable in topic.

Recently, I was at a National Healthcare Group (NHG) senior residency open house where various institutions were there to offer themselves as a possibility for our exiting senior residents to consider working in. There were other hospital booths being set up, and the respective chairmen of medical board (CMB) or divisional heads were there to promote the strengths of their own. I witnessed the usual “Why join me?, and the occasional “Why you should not join the others” kind of talk, but what was particularly different was when Associate Professor Pang Weng Sun spoke of Alexandra Health System with its upcoming Woodlands Integrated Healthcare Campus. For those of us who have not had the pleasure of knowing Prof Pang, he is CMB of Yishun Community Hospital and one of the giants in geriatrics in Alexandra Health, and perhaps Singapore as well. He was giving us information on Woodlands Campus, but at the very end of his talk, he said humbly “Medicine is a calling, and we often have to consider the nation’s healthcare needs and where this calling is the strongest. Sengkang Health needs good people to join as they are next in line to open in 2018, so do consider joining Sengkang Health where they need you the

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most...” or something really close along that line. I was pleasantly stunned! What I had just witnessed was the spirit of honor and magnanimity coming from a gentle-giant! Something which I thought had been largely lost in our current competitive society, found again in the heart of a humble man who will continue to influence the hearts of many aspiring young clinicians and staff alike who works closely with him. As the saying goes, “近朱者赤，近墨者黑”。It is little wonder why my friend Dr Lawrence Tan always speaks so fondly of his head, Prof Pang. Along these lines of “lost-and-found”, I also recently witnessed the lost-and-found of “team family medicine” spirit. More of this is found in my article in this issue.

And as usual, our team always strives to give you a different flavor of family medicine with all our issues. This time is no different. We have invited Dr Richard Tan to tell us more about how he uses acupuncture to complement his daily practice as a physician in a community hospital. We have also invited Dr Jean-Jasmin Lee (with guidance from Dr Ang Seng Bin) from KKH family medicine service to tell us more about how family medicine has gone beyond the bedroom to tackle some of the patients’ sexual health issues. A statement from her article reads “Studies have shown that one third of women aged 75-85 are sexually active...” Interested enough? Read on!

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Major challenges lies ahead. We have a very rapid aging population. Today 1 in 8 Singaporeans are above the age of 65 years old. By 2030, this ratio is expected to double to 1 in 4. Chronic diseases are prevalent. About 25% of Singaporeans above the age of 40 have at least 1 chronic disease. Not only will there be more chronic diseases with an aging population, the complexity of diseases will worsen.

Demand for healthcare will increase. The model of healthcare that we grew up with, centred around hospitals will have difficulty to meet these demands, and the Ministry of Health (MOH) has started the initiative to move to that of community based, integrated with the rest of the healthcare sectors.

Primary care is the critical element for this to succeed. The MOH has a vision of “One Singaporean, one Family Doctor”. The family doctor is the trusted healthcare partner of every Singaporean. A strong family doctor-patient relationship enables the family doctor to have a holistic understanding of the patient and his family’s medical and social care needs. He is the patient’s health advocate monitoring the patient’s risk factors in chronic

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