

YOUR GPs CAN TREAT THESE CONDITIONS

In January 2014, Eastern Health Alliance (EHA) launched the GPFirst programme to encourage patients in eastern Singapore to see their general practitioners (GPs) for mild to moderate medical conditions, rather than head to the emergency department first. In this regular series, our EHA community GPs offer advice on common ailments *CARING* readers might face.

Visit www.gpfirst.sg or see your GP for more information on common conditions such as cuts, bruises, mild scalds, nausea, headaches, sprains and fevers. Read on to learn more about athlete's foot and acute bronchitis.

ATHLETE'S FOOT

I am an 18-year-old National Serviceman. After completing my field camp last week, I found a scaly rash on the sides of my feet. The skin between my toes and soles is cracked and peeling, and there is an unpleasant smell from my shoes. I applied moisturiser every day, but the condition did not improve. In fact, the itching and burning have increased over time. I feel really uncomfortable. Can my GP treat this condition?

These symptoms are caused by *tinea pedis*, also known as athlete's foot, a fungal skin infection. It affects your soles and the skin between your toes. It thrives in warm, humid conditions, so it commonly affects National Servicemen and athletes, who tend to wear socks and shoes for long periods and have sweaty feet. Athlete's foot causes an itchy rash, which may progress to skin breakdown and secondary bacterial infection if not treated.

Your GP will examine your feet for telltale signs of fungal infection. The symptoms include cracked or peeling skin, blisters, toenail changes (including thickening, discolouration and nails



peeling away from the nailbed), as well as other associated conditions like bacterial infection and poor blood circulation. The treatment consists of topical creams and medication to help alleviate itching. If your infection is more severe, your GP may prescribe oral anti-fungal medication; if it is complicated by bacterial infection, he or she may treat it with antibiotics.

To prevent the recurrence of athlete's foot, it is important to maintain proper foot hygiene. Keep your feet clean and dry by frequently changing your socks, airing your feet and footwear, and wiping your feet. Use anti-fungal foot powder to wick away moisture. Wear sandals in public places like gyms and gym showers to reduce the likelihood of fungal skin infections.

If your infection persists or recurs frequently, your doctor may recommend skin scraping or blood tests, including diabetes screening. These tests will help exclude resistant infections or pre-existing conditions that may make fungal infections more common.

Dr Eve Anwar



Dr Eve Anwar graduated from the University of Melbourne in 2005 and currently practises at OneCare Medical. Her areas of interest include women's and children's health, and chronic disease management. She focuses on empowering patients with knowledge to better care for their conditions. Believing that good health is born of a trusting and open relationship between a doctor and her patient, she strives to make communication the cornerstone of her consultations.

ACUTE BRONCHITIS

I am a healthy 40-year-old man, a non-smoker with no known medical history. I have been having a bad cough for the past 10 days. Sometimes, especially at night, I experience shortness of breath. Good sleep has become increasingly difficult. Initially, I had symptoms of the common cold. My nasal congestion and sore throat have since resolved, though not the cough. I also cough up yellow phlegm. Will my GP be able to help me?

Most likely, you have acute bronchitis. It is an inflammation of your lower respiratory tract (the windpipe and the structures and passages within your lungs). Your persistent cough may be due to your lungs' hyper-responsiveness.

Acute bronchitis typically starts with symptoms of the common cold, such as nasal congestion, runny nose, sore throat and cough. These symptoms progress to a predominant cough when the infection involves the lower respiratory tract. You may experience wheezing and even chest pain when you are coughing. You may expel pus in your sputum but that does not indicate a bacterial infection.

Apart from checking your temperature and pulse rate, your GP will examine your lungs. In particular, he or she will listen for a dullness when your chest is tapped, decreased breaths and rattling sounds.

When your doctor finds such abnormalities together with systemic symptoms such as fever, he or she will perform a chest X-ray. If you have a chest infection or pneumonia, he or she will prescribe antibiotics.

That said, antibiotics are usually not necessary for acute bronchitis as most cases are due to viral infections. Acute bronchitis is a self-limiting illness that typically resolves in one to three weeks. Your GP may prescribe throat lozenges or cough syrup for cough relief, or recommend that you take hot tea or honey.

Unnecessary use and overuse of antibiotics will lead to the increase of drug-resistant bacterial infections.

Your GP will be able to explain in detail the risks and benefits of antibiotics and the problems of their overuse.

Other common causes of acute, persistent cough include asthma, post-nasal drip syndrome and gastro-oesophageal reflux disease, though these are unlikely in your case.

Dr See Qin Yong



Dr See Qin Yong is staff registrar in the Department of Care and Health Integration, CGH. He received his MBBS (Bachelor of Medicine and Bachelor of Surgery), Graduate Diploma in Family Medicine and Master of Medicine (Family Medicine) from the National University of Singapore. He is now pursuing the Fellowship Programme in Family Medicine from the College of Family Physicians, Singapore.

