

# YOUR GPS CAN TREAT THESE CONDITIONS

n 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.

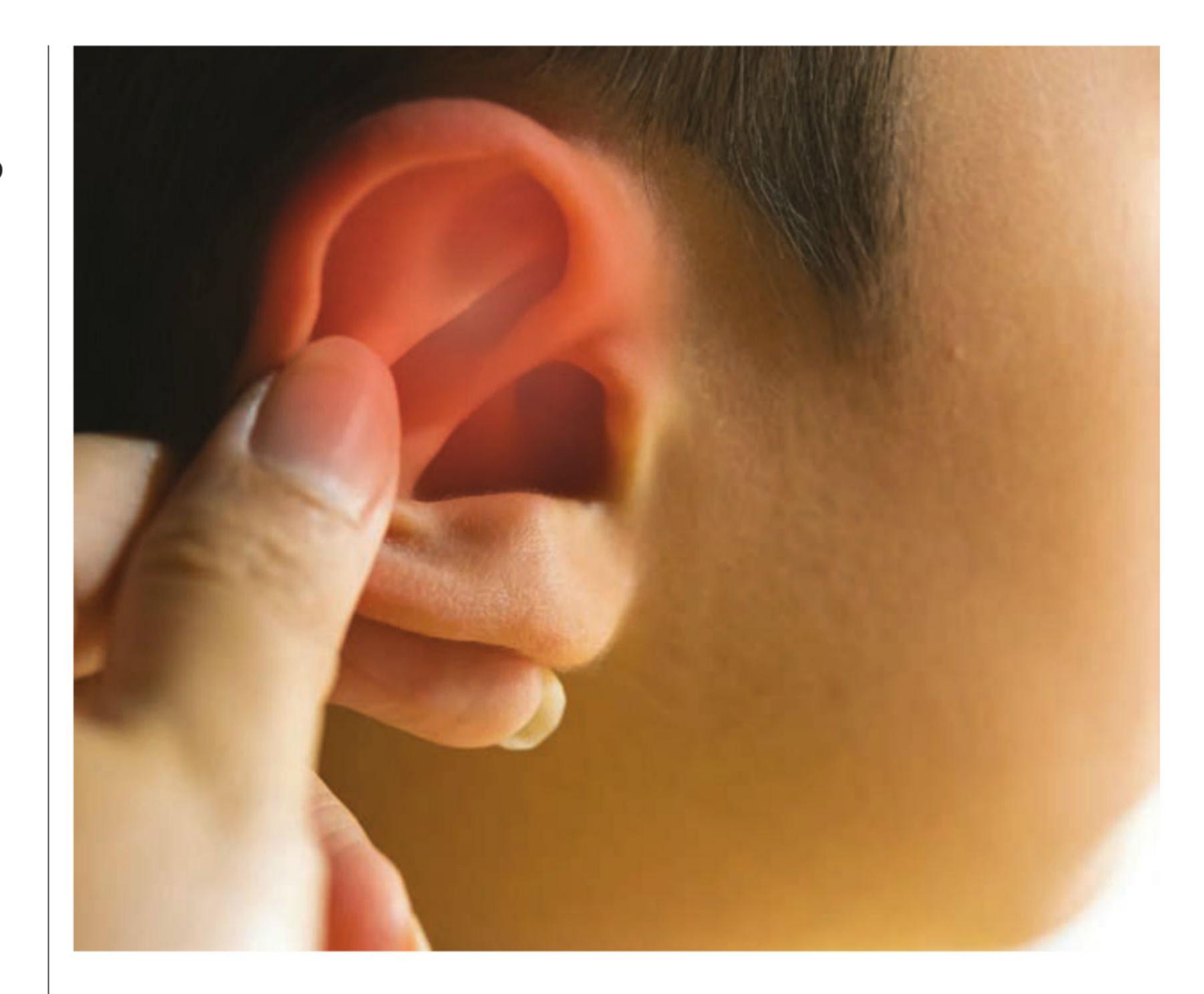
Visit www.gpfirst.sg or see your GP for more information on common conditions such as cuts, bruises, mild scalds, nausea, headaches, sprains and fevers. Read on to learn more about outer ear infection and food poisoning.

# **OUTER EAR INFECTION**

I am an 18-year-old male and I swim three to four times a week. Recently, I experienced some worrying symptoms in my right ear. It started with some redness on my ear, along with slight pain when I pulled my earlobe. I did not pay much attention to this initially. However, after two days, the redness spread and the pain worsened, and they were accompanied by a smelly discharge. My hearing is also muffled and I hear a ringing sound occasionally.

Your symptoms point to an infection in your ear canal. This is a common condition that your GP can attend to. Patients with ear canals that are narrow and tortuous are especially prone to this condition. High humidity, excessive sweating, contaminated water in the ear after swimming, and habits such as ear digging are contributing factors as well.

It is advisable to stop swimming till your ear gets examined by a doctor. More importantly, you should refrain from digging your ear or inserting anything including cotton buds when trying to



relieve the discomfort.

Tell your GP if you have any pre-existing medical conditions. Some diseases that reduce your immunity can make you prone to a particularly severe form of ear infection called malignant otitis externa. Certain skin and autoimmune diseases can manifest in the ear canal too.

The doctor will examine your ear canal with an otoscope to determine if:

- a) the infection is limited to the superficial part of the ear canal
- b) the eardrum is intact
- c) the middle ear behind the eardrum is involved.

The treatment prescribed will depend on which part of the ear is affected. Most cases of outer ear infections caused by bacteria can be resolved with antibacterial ear drops. Gentle removal of pus and debris may also be performed by your doctor. Certain types of ear drops may need to be avoided



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if the eardrum is not intact. If the infection is found to be caused by a fungus, an antifungal ear drop will be prescribed. Do note that prolonged overuse of antibacterial drops may lead to fungal overgrowth.

Oral antibiotics are rarely needed but may be prescribed when the infection is persistent or when there is concurrent middle ear infection.

Most cases of ear infections can be cured with treatment from the GP clinics. However, your GP may refer you to an Ear Nose Throat (ENT) specialist when:

- The infection does not respond to conventional treatment.
- Microscopic suction of copious pus is required for proper evaluation.
- There is a non-healing eardrum perforation.
- There are rare conditions that mimic an ear infection.

### **Dr Wong Kia Boon**

### FOOD POISONING

My 16-year-old daughter woke up to four to five episodes of vomiting and loose, watery stools, accompanied by stomach cramps, weakness and fever. She was at a barbecue with her friends the night before and I suspect that undercooked food could be the culprit. Currently, she is complaining of increased thirst but is unable to drink water as she is still throwing up. I am worried that she will become dehydrated.

Your daughter's symptoms are suggestive of acute gastroenteritis, which usually occurs with diarrhoea, vomiting and/or fever.

Gastroenteritis can be caused by food poisoning, which usually follows ingestion of foods that contain bacteria, virus, protozoa or even preformed toxins that disrupt gastrointestinal function. These foods include undercooked meat, seafood, ready-to-eat meats, milk, pre-cut fruits, undercooked eggs and overnight leftovers.

Mild gastroenteritis is usually self-limiting and will subside with sufficient hydration and rest. Oral rehydration solutions containing sodium, potassium and glucose should be considered for mild to moderate dehydration. Signs

and symptoms of dehydration include excessive thirst, lethargy and little or no urination.

Your daughter should avoid consuming dairy products, oily food and fruit juice. She should stick to eating small, light and non-fatty meals, such as toast, crackers, rice and bananas.

If she has a high fever, an inability to retain food or any symptoms of dehydration, please visit the GP for medical attention.

Your GP will help to further diagnose her condition and will prescribe the necessary treatment. Symptomatic treatments such as antiemetic medicine, anti-diarrhoea medicine and oral rehydration solutions are available at GP clinics.

If your daughter experiences severe pain, blood in her stools, jaundice, high fever for a few days or severe dehydration and weakness, your GP may refer her to the hospital, where further investigations such as blood/stool tests and treatment such as intravenous (IV) drips may be given.

Generally, mild gastroenteritis is easily avoided by following these simple guidelines:

- 1. Wash your hands before and after eating.
- 2. Ensure that meat and seafood are thoroughly cooked, and separate raw and cooked food.
- 3. Avoid eating leftover or cooked food left unheated for more than four hours.
- 4. Consume a healthy balanced diet; include preand pro-biotics to enhance your gut health.

## **Dr Samuel Toh**





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