

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 heel pain and finger numbness.

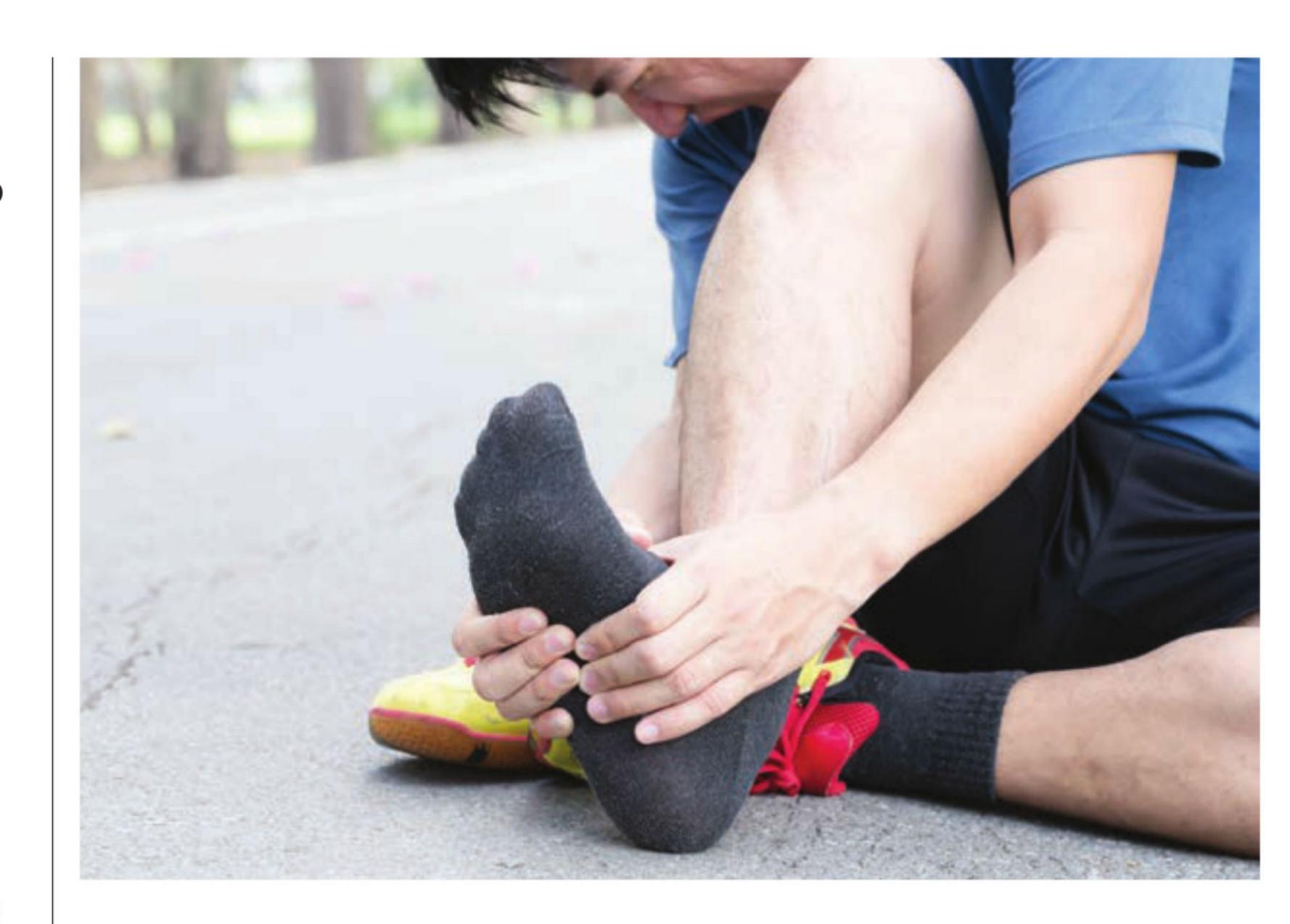
HEEL PAIN

I am a 35-year-old security guard and I enjoy running after work every day. However, about three weeks ago, I started experiencing some pain and stiffness on my right heel and sole. The pain feels most severe when I take my first few steps in the morning after I get out of bed. The initial sharp, stabbing pain usually eases into a dull ache after I try to walk for a while. However, the pain returns whenever I walk or stand for long periods of time, and can be so severe that I start to limp. Will my GP be able to help me with the pain and can I take part in a marathon?

Plantar fasciitis is a common cause of heel pain and is likely to be what's bothering you. This condition is caused by repetitive rubbing of the plantar fascia, a fibrous band of tissue under the foot. Its key function is to hold the bones of the foot together.

This tissue is not visible on X-rays, and plantar fasciitis is usually diagnosed based on the patient's medical history and by examining the feet.

A physician can usually exclude serious



conditions, such as sciatica (pain caused by compression of the sciatic nerve, which travels down from the buttock to back of foot), tarsal tunnel syndrome (pain caused by compression of the tibial nerve where the nerve crosses the ankle), entrapment of the lateral plantar nerve, ruptured plantar fascia or Achilles tendon, to name a few, with a thorough examination. He or she will look out for abnormal bone structures, muscle wasting, nerve dysfunction of sensation or movement, and unusual locations of pain, swelling and tenderness the most painful area typically corresponds to where the plantar fascia attaches to the heel bone or calcaneum. Imaging studies may be ordered if an uncommon condition is present and you may need to be referred to an orthopaedic specialist.

If the GP finds that your condition is not an uncommon or a serious one, he or she will then prescribe a series of exercises for you to do at home as well as oral painkillers to reduce pain in order for you to perform them. The plantar fascia encounters irritation if it is tight and repetitively moved against the hard edges of the bone while running. Hence, an important part of treatment



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is to loosen the taut plantar fascia with gentle but firm stretching. At the same time, it is helpful to stretch your calf muscles. Some examples of the exercises you can do are the tennis ball stretch, where you roll a tennis ball with the arch of your foot while seated, and the calf stretch.

It is most important to rest so as to avoid further injury. Other complementary remedies include wearing dorsiflexion night splints and shoes that provide good support for the arches of your feet.

Most patients recover full function in a few weeks, while others require four to six months of consistent therapy. A few might require a local corticosteroid injection and in rare cases, discussion of surgical options with an orthopaedic surgeon may be necessary.

A review in four weeks (or as soon as the pain has reduced) is recommended to determine whether you can resume your marathon training. You may bring along your running shoes to the review so that your GP can check if they provide the arch support that you need.

Dr Chua Lee Lea Im

FINGER NUMBNESS

I am a 45-year-old female who works as a data entry clerk. I started feeling some tingling, numbness and pain in the first three fingers and palm of my right hand about a month ago. Sometimes the sensations travel from my wrist up to my forearm. The symptoms are worse at night and sometimes wake me up from my sleep. Initially, the symptoms came and went and could be relieved when I moved or shook my hand. However, recently I noticed that the symptoms occur more frequently and persist for longer periods of time. I wonder if the symptoms are related to my prolonged use of the computer and if my GP can help me?

The most likely cause of your symptoms is carpal tunnel syndrome (CTS) as you have described some of the risk factors that lead to

this problem. This condition is common among people who spend prolonged hours on the keyboard (e.g. data entry in your case). It is most likely due to the positioning of your wrist, which may promote the problem after prolonged periods. Other risk factors include medical conditions such as thyroid diseases, diabetes, inflammatory arthritis and pregnancy.

Other symptoms of CTS include pain and autonomic symptoms such as cold, swelling and tightness. There can be weakness or clumsiness especially for precision grips. Some people also experience a loss of proprioception (relative position of body parts compared to other body segments) and motor power. Symptoms will usually worsen progressively over a long period of time.

Your GP will conduct physical examinations, such as the Phalen's sign test where you will hold out your arms and let your wrist hang down in flexion for one minute. Tell the doctor if you feel numbness, pain or tingling sensations. Examination of the neck is also important to exclude common cervical spondylosis (neck arthritis). If your GP

suspects nerve damage, he/she may

order a nerve conduction test,
which will show if the nerves
in your wrist are acting
abnormally.

Your GP may prescribe a course of anti-inflammatory medicine to help reduce the pain and swelling in the carpal tunnel.

In cases with more severe pain, he/she may also prescribe medications that are dedicated for nerve pain.

Aside from medications, it is also important to take note of the environmental risk factors that may promote CTS. In your case, a wrist support at work will help to decrease the stress on the wrist. You can also wear a wrist guard to sleep to prevent the morning symptoms as it keeps the wrist straight throughout the night.

Your GP may refer you to an orthopaedic surgeon if the problem affects the normal function of the hand or if the pain is constant throughout the day.

Dr Lye Tong Fong



Dr Lye Tong Fong is a family physician who has been practising at Central 24-HR Clinic Group since 1999. He is trained in the areas of dermatology, occupational medicine and mental health issues.