

# 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](http://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 migraine and food allergies.

## MIGRAINE

**Question:** I am in my early 40s and I work as a sales representative for a pharmaceutical company. I often travel from clinic to clinic, and lately I've been having frequent headaches, especially in the afternoon and after long hours out in the sun. I often get an intense pounding pain on one side of my head and sometimes experience pain near my eyes. I had a headache with blurred vision and vomited twice yesterday while I was on my way home. Should I head to the A&E for frequent severe headaches like this?

**Answer:** It sounds like you suffer from migraine, which has two main types: migraine with an aura (a warning sign that occurs before the headache), also known as classic migraine, and migraine without an aura, also known as common migraine.

People who suffer from migraine usually develop a one-sided headache that is pulsating in nature. The pain can be moderate to severe in intensity. It is most commonly present with nausea and/or vomiting. Usually, the headache worsens gradually and can last between four and 72 hours. People with

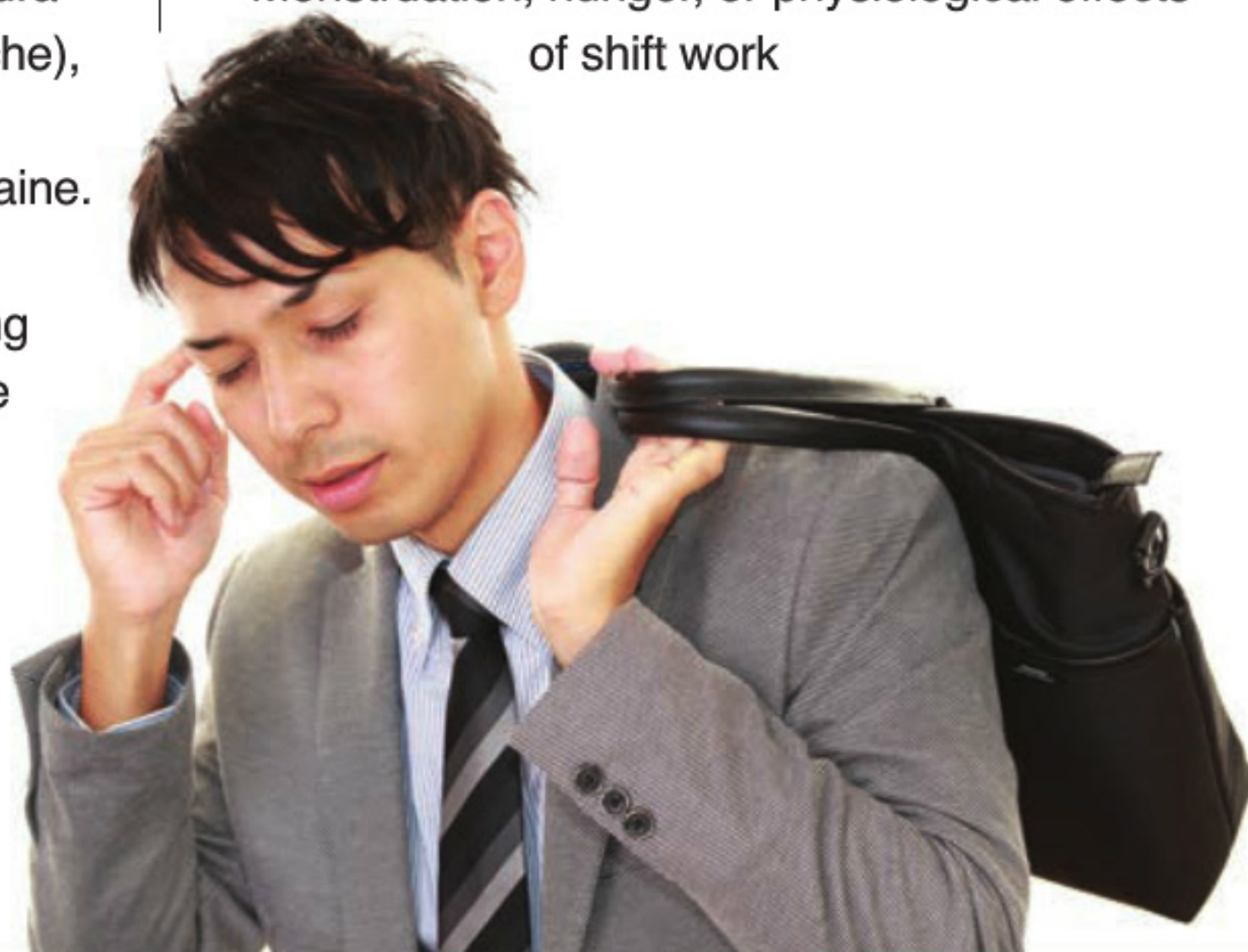
migraine tend to avoid bright light or loud noises, and find solace in a quiet and dark room.

Those with classic migraine experience the aforementioned symptoms with the addition of an aura, which can be visual (e.g. flashes of light), a sensation (e.g. a feeling of "pins and needles" down the limb) or affect speech (e.g. inability to speak). An aura can last up to 60 minutes and the headache follows within an hour. However, some patients may experience an aura without a headache.

A GP will be able to diagnose migraine based on your medical history. He would usually advise remedies such as proper rest in a dark and quiet room. Use of painkillers can sometimes help to further alleviate the headache. If vomiting or nausea is the main issue, the GP usually recommends anti-nausea medication, which can be given orally or through injection (if needed). He may also prescribe medication to prevent migraine if it is deemed regular enough to be disruptive to the patient's lifestyle and well-being.

Most of the time, migraine is triggered by:

- Foods such as chocolate, oranges, tomatoes or cheese
- Bright light or excessive noise, strong odour or extreme weather
- Emotional or physical stress, exercise/physical exhaustion or oversleeping
- Contraceptive pills, monosodium glutamate (MSG)
- Menstruation, hunger, or physiological effects of shift work



**Dr Tan Shi Ching** is a family physician practising at Raffles Medical Group (Tampines 1 and Changi City Point). He received his MBChB from the University of Manchester and Diploma in Family Medicine (GDFM) from Singapore. He is currently the Physician Leader of RMG's Tampines cluster and in the midst of pursuing a Master of Medicine in Family Medicine.

Migraine-sufferers are usually able to identify what their triggers are and avoiding them tends to prevent an attack. It is recommended to keep a headache diary to help identify the trigger factor if you are unsure.

Visit your GP if you are unwell and experiencing symptoms listed below so that he can assess your condition and determine whether a referral to the A&E is required for further investigation:

- Sudden and severe headache
- Disturbed consciousness
- Neurological signs such as unilateral weakness of limb or slurring of speech
- Headache triggered by cough or exertion or while engaged in sexual activity
- Neck stiffness
- Fever
- If you are experiencing headaches and you are above 50 years old, immunocompromised, or suffering from cancer

**Dr Tan Shi Ching**

## FOOD ALLERGIES

**Question:** I am a 30-year-old male who enjoys good food. I went for a buffet dinner yesterday and helped myself to a few servings of seafood, including fresh oysters, clams, mussels and snow crabs. I was about to head home when I felt cramps in my stomach, accompanied by slight nausea and swelling around my upper lip. I did recall episodes of mild reactions after consuming seafood on two previous occasions, but they were nothing serious because the symptoms went away shortly. When I reached home, the cramp worsened. There was a tingling sensation on my tongue and there was swelling around my left eye. Rashes also started to develop on my body. I applied some anti-itch cream (which helped a little) and fell asleep. Fortunately, I felt better the next morning, but the swelling around my eye remained. I am unsure which seafood I am specifically allergic to, and wonder why the symptoms are more severe this time around. What should I do if this happens again? When should I visit the A&E?

**Answer:** It is likely that you have shellfish allergy, in which your body has allergic reactions to crustaceans (such as prawns, crabs and lobster)

## MY GP ANSWERS

and/or mollusks (such as clams, mussels, oysters and scallops).

It is advisable to avoid all of the aforementioned seafood unless advised by your doctor, as most people have allergies to both groups. Your immune system 'remembers' the food and reacts more vigorously with repeated exposure.

Food allergy is caused by the body's immune system overreacting to the protein in the food consumed. Recent studies revealed that Singaporeans are mostly allergic to (in decreasing order) shellfish, egg, cow's milk, peanut, tree nuts and fish.

A GP can treat most mild food allergy by prescribing antihistamines or bronchodilator (medication that relaxes lung muscles), while injectable epinephrine could be used for more severe cases. Self-injectable epinephrine pens may be prescribed by your GP, while oral steroids may be used as supplementary therapy to maximise the effectiveness of the treatment.

You have severe food allergy if you experience two or more of these symptoms:

- Respiratory symptoms such as difficulty breathing, stridor or wheezing
- Fainting spells, giddiness or incontinence (signs of low-blood pressure). Note: It is considered a severe allergy if you experience low-blood pressure even without other symptoms after consuming food you are allergic to.
- Rashes, swelling of the lip, tongue or throat
- Persistent abdominal pain or vomiting

If you have been diagnosed with food allergy, it is important to carefully read the labels of the food you purchase, consume or eat. It is also advisable to understand the ingredients in the dishes you would like to order and ask how the food is prepared when eating out. If you have severe food allergy, it is recommended that you also carry an epinephrine pen with you (be sure to check its expiry date upon use). Should you experience severe allergic reactions, it is advisable to call 995 immediately.

**Dr Ang Kai Kok**



**Dr Ang Kai Kok** is a general practitioner at Zenith Medical Clinic in Punggol ([punggolgp.com](http://punggolgp.com)). He received his MBBS in Singapore. He advocates medical practices based on good scientific evidence.