

OUR GPS CAN TREAT

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 lower back pain and what to do with a foreign object in the throat.

LOWER BACK PAIN

Question: | am a female in my early 40s. As an administrative assistant, I spend most of my working hours sitting at the desk. For the past two months, I've been experiencing a dull ache in my lower back, especially when waking up in the morning. The condition seems to be worsening and would occur if I sit too long. I also have difficulty climbing stairs and squatting down. I'm worried as the occurrence of sharp pain has increased with sudden movements, lasting longer and extending down to my right hip. Should I head to the A&E for this?

Answer: Lower back pain is a common problem

for many people, especially those with a sedentary lifestyle. This is usually related to stiff back muscles, which is mainly treated with physiotherapy and exercise.

If back pain is prolonged, occurs more than four weeks, or is accompanied by additional symptoms such as pain extending to the legs, numbness or tingling sensation in the legs, then further investigation is needed.

The aggravation of symptoms you recently experienced could be related to impingement of nerves in your spine, causing the pain

> to radiate down your leg. It is recommended you visit your GP as soon as possible. Your GP will ask you some questions to determine the causes of the problem, and will examine you for signs of nerve compression, such as sharp, aching or burning pain, which may radiate outward. The doctor will then advise you on further investigations

(X-rays or MRI) or specialist treatment if needed.

If you experience any changes in bladder or bowel control (loss of control or urine retention), it is advisable to head to the A&E immediately. If you are unsure whether your condition is serious enough to head to the A&E, always visit your GP first as he or she will assess your condition and offer you the best advice.

Regular exercise, including stretching and core



Dr Kiran Kashyap has been practising medicine for over 20 years and is currently a Senior Family Physician at East Coast Family Clinic. She received her MBBS (Bachelor of Medicine and Bachelor of Surgery) and MMed Family Medicine (Master of Medicine) from the National University of Singapore. She is currently an Adjunct Lecturer at NUS and is also a member of NUH Committee on Bioethics.

strengthening exercises are helpful in preventing back problems. Maintaining a healthy body weight, and having adequate calcium and vitamin D are also important.

A poor posture can also make back pain worse, especially if you sit for long periods. Do not slump over your keyboard and always sit upright with your shoulders relaxed and your body supported against the back of a chair. You may also wish to put a pillow between your lower back and your seat and keep your feet flat on the floor.

Dr Kiran Kashyap

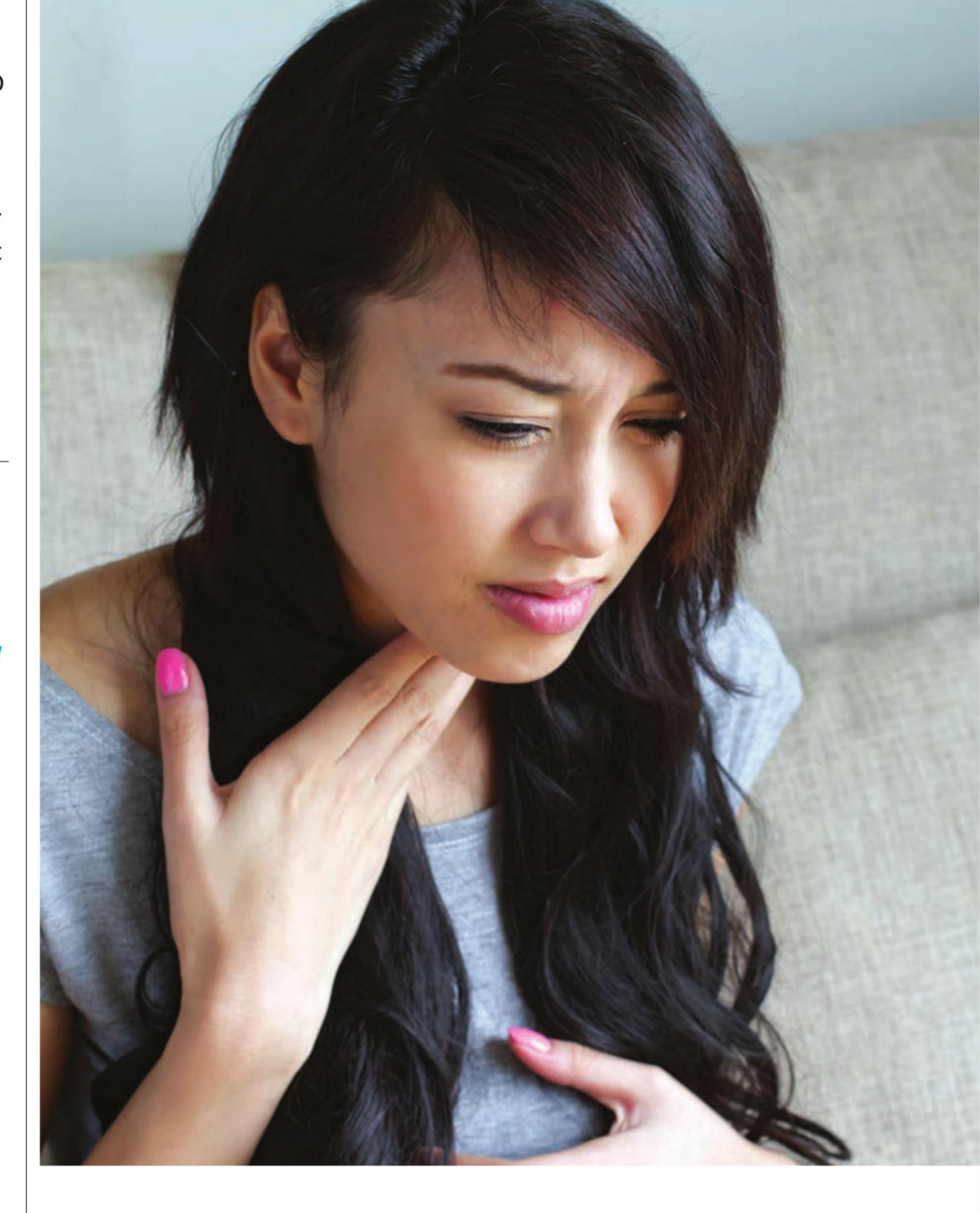
FOREIGN OBJECT IN THROAT

Question: I am a 38-year-old female. After dinner yesterday, there was a feeling of discomfort and pain in my throat whenever I swallowed. I suspect I may have accidentally swallowed a fish bone. I had mixed the salmon with rice and that was probably how I missed the bone. Though not very painful, the sensation of a splinter-like pain whenever I yawn or laugh is uncomfortable. I'm concerned whether the fish bone would cause an infection if the problem is not attended to immediately. I wonder if my family GP can help.

Answer: Yes, it sounds like you have swallowed a fish bone! Symptoms suggestive of a fish bone lodged in your throat include the onset of pain immediately after food, a sharp pain triggered by specific mouth or throat movements such as yawning, swallowing or laughing, and the ability to pin-point the location of pain.

The family GP first confirms the presence of a fish bone. Using a light source and a tongue depressor, the doctor can see the first part of the oral cavity. Both sides of the throat where the tonsils are found is a place where fish bones most commonly lodge. Another area where fish bones are stuck frequently is at the base (back end) of the tongue. With a cooperative patient and the right instruments, the GP can often remove the fish bone in his clinic.

If the GP does not see any abnormality, but the symptoms are still indicative of a bone in the throat, you may be referred to the hospital for further management. Having a fish bone stuck in the throat is usually not an emergency, but is extremely uncomfortable and may eventually result in infection Dr Tan Teck Jack



after a few days. Rarely does it become dangerous when lodged deep in the digestive tract, despite worrying signs of abdominal or chest pains that may appear to require emergency treatment.

Common myths on how to deal with fish bones include swallowing mouthfuls of rice or bananas, or inducing vomiting to dislodge them. These are dangerous manoeuvres and may cause the foreign object to venture deeper, or result in aspiration, especially in children. To prevent these incidents, one should be vigilant during meal times, and especially when feeding fish to a child. Always seek immediate attention from a family GP if you are unsure and suspect a fish bone is stuck in the throat.



Dr Tan Teck Jack is the medical director of Northeast Medical Group. He has been practising medicine for more than 20 years. He received his MBBS from the University of Melbourne, Australia and was awarded diplomas in Occupational Medicine from Singapore and in Dermatology from Cardiff, Wales. Dr Tan is currently pursuing a Masters in Public Health with humble aims of better serving the society.

22 MAY-JUN 2017 CARING