

YOUR GPs CAN TREAT THESE CONDITIONS!

In January 2014, Eastern Health Alliance (EHA) launched the GPFirst programme to encourage patients in the eastern region of Singapore to see their general practitioners (or GPs) for mild to moderate medical conditions. In this regular series, our EHA community GPs step in to help with common ailments *Caring* readers might face.

Visit www.gpfirst.sg or see your GP for more information on common conditions such as cuts, bruises, nausea, nosebleeds, colds, insect bites, headaches, sprains and fevers. Read on to learn more about minor burns and UTIs.

SCALDS AND BURNS

Question: I'm a 31-year-old housewife. Yesterday evening, I scalded myself when a pot of soup I was preparing toppled over and splashed on my hand. I was in a lot of pain and rushed to the bathroom to run cool water over my hand. About an hour later, I noticed a few blisters had formed on my hand and the wound became increasingly painful. I loosely wrapped my hand with gauze, hoping the blisters would improve. However, the next morning I noticed that some blisters had burst with yellow discharge. The wound appeared to be swollen

and wet. I am worried about the risk of infection – should I go straight to the A&E?



Answer: Your body responds to burns by turning red or growing blisters that contain a yellowish or clear fluid called serum. This normally occurs within seconds and up to 24 hours after you're burned. Small burn wounds generally recover without becoming infected.

Signs of infection include the appearance of pus in the blisters, redness spreading around the blisters, or if there is increased pain or fever. If in doubt, have your wounds checked by your GP, who can prescribe an antiseptic or a course of applied or oral antibiotics if there is an infection.

The hospital A&E normally deals with severe burns caused by chemicals, electricity or lightning, or when the burnt skin is white, leathery or charred (third-degree burns). The A&E also handles burns that are large – bigger than the size of your palm – and burns in the mouth, throat, eyes, ears or genital area.

Some advice if you get a minor scald:

- Soak or run the injured area in cold water immediately for at least 20 minutes or until there is no more pain.



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- Apply a “wet” dressing instead of a dry one, which tends to stick to the wound.
- Do not apply any creams or toothpaste on the wound, as these have not been shown to be helpful.
- Do not tear apart the blister as doing so increases the risk of infection.
- When the wound has dried, apply a scar cream three times a day to reduce scarring
- See a GP if you have the following danger signs: pain despite medications, fever, bleeding, pus discharge or if you need help with the dressing.

By Dr Ang Teng Soon Paul

URINARY TRACT INFECTIONS

Question: I am an 18-year-old female. During my school holidays, I worked as a retail shop assistant. I normally go for a toilet break only during lunch or after I finish work as I have to mind the busy shop alone. There is often pain in my abdomen and recently, I experienced discomfort and a burning sensation when passing urine. I got a shock when I saw traces of blood in the urine. I am worried about my condition, and I wonder whether my GP can treat me?

Answer: You probably have a urinary tract infection (UTI). Your family doctor should be familiar and confident in treating UTIs because they are so common. They occur mainly in women and affect the bladder (causing abdominal pain, bleeding and an urge to urinate often) and urethra (causing burning pain in the urinary passage).

Your busy job probably caused you to not adequately clear your urine, which led to an increased chance for bacterial growth in the bladder. Your GP will likely prescribe a course of oral antibiotics to treat this infection. He/she may also add an alkalising agent to make the passing of urine less painful. With sufficient fluid intake, you should recover within 24 to 48



hours. However, it is essential to complete the prescribed course of antibiotics.

If UTIs occur more frequently for you, additional investigation may be required to identify the type of bacteria and the precise antibiotics required to treat the infection. Ultrasound imaging of the kidneys and bladder may also be done to exclude underlying problems such as stones or abnormal anatomy that may predispose you to recurrent UTIs.

Here are some tips to avoid UTIs:

- Water helps flush your urinary tract, so make sure you drink plenty of plain water daily.
- Avoid holding your urine when you need to pass it out. Holding it enables any bacteria that may already be present develop into a full-fledged infection.
- Wipe from front to back after a bowel movement, to prevent bacteria in the anus from entering the urethra.
- Avoid unnecessary rinsing of the genital area as this may introduce bacteria into the urethra.
- Wash your genital area before and after sexual intercourse to prevent transferring bacteria to the urethra or vaginal area.
- Avoid feminine hygiene sprays and douches, as they can irritate the urethra and possibly lead to a UTI.

By Dr Tan Teck Jack



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 obtained diplomas in Occupational Medicine in Singapore and in Dermatology in Cardiff, Wales. Dr Tan is currently pursuing a Masters in Public Health.