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# Contents

• **December 2017**

Aloft and Above: A Recap of HITC 2017



## **Festive Focus**

◀◀ **12** ▶ Give Yourself the Joy of Christmas

## **Nutri-Wise**

**11** ▶ Something for Stroke

**14** ▶ Easy Christmas Fruit Parfait



## **Healthy Living**

**16** ▶ Making A Move

**18** ▶ A Better Eye Drop for Dry Eyes

**20** ▶ The Ever-Improving Treatment Options for Fibroids

**24** ▶ The War Against PTSD

◀◀ **28** ▶ Break Free of Your Smart Phone!

**30** ▶ Eating Disorders: Deadly Psychological Conditions

◀◀ **34** ▶ The Sustenance that is Nature





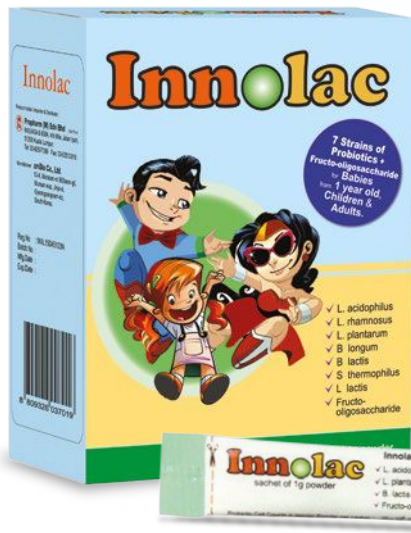
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# Contents

• **December 2017**

This issue's Cover Celebration – Henry Cavill



## Advertorial

**37** ▶ A Problem of Overproduction

**38** ▶ Your Child's Healthy Gut

## Body's Best

**50** ▶ Everybody Can Swim!

## HITC 2017 Recap



**56** ▶ Aloft and Above!

## Regulars

**08** ▶ Editor's Note

**10** ▶ Letters to the Editor



**44** ▶ Cover Celebration

**54** ▶ Subscription Promotion

**66** ▶ Out & About

**71** ▶ Hot & Trending







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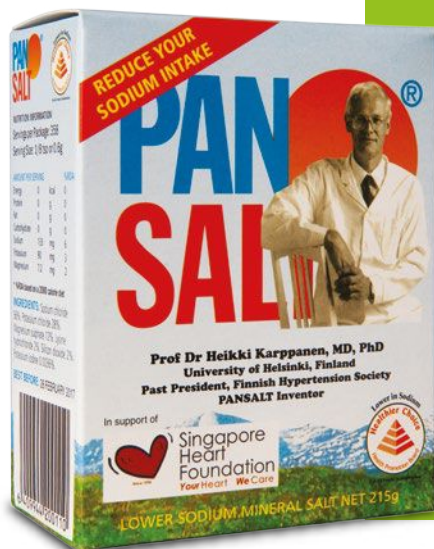
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#### Reference:

\* Karppanen, H. An Antihypertensive Salt: Crucial Role of Mildred Seelig in its Development. JAM Coll Nutr 1994, 13; 493-495. \* The use of a reduced sodium salt containing potassium & magnesium as an Adjunctive approach to treatment of Hypertension with Antihypertensive medications, Whelton P, Cohen J, Jones D, Weinberger M, 1999. \* Effect of mineral salt diet on 24-h blood pressure monitoring in elderly hypertensive patients, Journal of Human Hypertension (1999) 13, 777-780. \* Adherence to and population impact of non-pharmacological and pharmacological antihypertensive therapy. Journal of Human Hypertension (1996) 10, suppl 1, s57-s61. \* Replacement of Regular Salt by a Novel Salt Alternative Improves the Cardiovascular Effects of the ACE Inhibitor Enalapril, Hypertension Resources, 1994, 17:59-69. \* Reduction in blood pressure with low sodium, high potassium, high magnesium salt in older subjects with mild to moderate hypertension. British Medical Journal, Volume 309 13 August 1994.

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# Did you have a **HEALTHY** 2017?

**A**nother year is on its way out. Where did the time go? More importantly, did you manage to keep any of the health resolutions you made in the beginning of the year? Did you start exercising regularly? Did you achieve your target weight? Did you quit smoking? Have you gotten sufficient sleep? Did you reduce sources of stress? Did you cut down on sugar intake? If you answered in the affirmative to any of these or other health resolutions you made, congratulations!

If you didn't hit any of your health targets this year, fret not. Now is the time to start planning for your 2018 health goals. Your health and wellbeing really are investments for the future, so why not make some effort to protect those investments?

We have some good news that might help you on your journey to good health: starting from 2018, this magazine will cost you less! So if anyone tells you that the prices of goods only go up and never down, tell them that *HealthToday* is now priced less than before.

We just concluded our flagship event, Health in the City (HITC), in November. If you were one of the 300 participants who joined us, we hope you had a terrific and educational time. If you missed this year's HITC, we have a recap of the event starting on page 56. Read all about the games, activities and giveaways, as well as the useful talks given by our expert speakers on a variety of conditions including dry eyes, bladder problems, addiction, ageing and glaucoma.

Also in this issue are lots of handy and exciting topics: a recipe for a healthy Christmas dessert by our contributing chef and dietitian (page 14), the benefits of swimming as told by a qualified swimming instructor (page 50) and a new treatment option for uterine fibroids (page 20). We also learn more about post-traumatic stress disorder from

a consultant psychiatrist – it affects more people than we realise, not just soldiers or war veterans. Turn to page 24 to find out more. And did you know that nature has a measurably positive effect on our health? In researching this fascinating story, we discovered that access to nature can help you to heal quicker, reduce the amount of pain you feel and even reset your mind to a more rested, productive, creative state. Go to page 34 to read about it.

Before I go take a walk through the nearest forest reserve, there's one more thing to do: from all of us at *HealthToday*, have a merry Christmas and a healthy, happy new year! **HT**

*Mok Shi-Lynn*

Editor  
shilynn.mok@mims.com





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## Dear Editor,

The mini report on dealing with advanced breast cancer caught my attention since I have a family history of this very disease. I strongly agree that the patient is not only battling the disease, but also cultural perceptions and social stigmas that accompany the diagnosis.

Lack of knowledge about treatment, no screening and follow up by most of the Asian population has caused the disease to be diagnosed late. It's important to keep up with yearly check-ups for early detection so that the disease can be cured at an early stage.

Also, women's health should be treated as a priority as the cost of treatment has increased.

Thank you, *HealthToday*, for this useful and caring feature.

**Hazlina, Sungai Besi, KL**

## Dear Editor,

I like your article in the November 2017 issue, "Bust Those Blues". It states very clearly what to avoid to lessen the depressed feeling and what to consider to alleviate the symptoms. I especially like the point on staying active and I totally agree that exercise or sports can change your mood from low to high. I would recommend performing HIIT or High Intensity Interval Training. All the movements and keeping track of time train the mind to focus on the present. In other words, being mindful and not letting your thoughts wander. I hope your readers would find this tip useful too.

**Thiam Ming, Iskandar Puteri, Johor**



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You can also email us at **enquiry@my.healthtoday.net** or **fax 03-7623 8188**. Or simply go to our Facebook page at **www.facebook.com/HealthToday**.

Include your name, address, I/C number and phone number. Letters may be edited for length and clarity.



# Something for **STROKE**

**A beneficial substance in the common red palm oil could be a solution in protecting us from stroke.** Words **Lim Teck Choon**

## Professor Chandan Sen

Executive Director  
Ohio State University Comprehensive Wound Center



**E**very year, stroke claims 4.5 million lives. Of the 9 million or so stroke survivors every year, they face a risk of disability as well as the possibility of another stroke.

- At least 1 in 4 stroke survivors will experience another stroke in his or her lifetime.
- Within the first five years of a stroke, the risk of a female stroke survivor having another stroke is 24%, while in male survivors the risk goes as high as 43%.
- Recurrent or repeat strokes bring on a higher rate of death and disability, as parts of the brain are already damaged when the second stroke strikes.

Therefore, as important as it is for us to minimise our risk of stroke, it is just as important for stroke survivors to ensure that their risk of having another stroke is minimized as much as possible.

## **Tocotrienols: complementing efforts to keep stroke away**

Professor Chandan Sen emphasizes that 80% of all stroke diseases are preventable so long as we exercise good control over our blood pressure and blood glucose levels via healthy, balanced meals and regular physical activities.

However, there is no harm in adding a little extra boost to our efforts in the form of tocotrienols, a group of beneficial vitamin E substances found in abundance in our very own red palm oil.

Before we can understand how tocotrienols help, let's take a quick look at what makes a stroke so dangerous to our health. Basically, a form of stroke, called ischaemic stroke, occurs when blood vessels in the brain become blocked by plaque. Plaque formation is worsened when our blood cholesterol and triglycerides levels are higher than normal. When plaque blocks a blood vessel, blood flow is disrupted, and the parts of the brain that are connected by the affected blood vessel experience lack of oxygen and nutrients. Over time, the brain cells in these parts begin to die, triggering a stroke.

Prof Sen explains that early studies of tocotrienols in the laboratory suggest that, after 10 weeks of taking tocotrienol supplementations, blood vessels affected by such blockage will expand and dilate. This allows blood to flow around the blockage, hence reducing the risk of a stroke.

While such studies are still at an early stage, Prof Sen and his colleagues are optimistic that they may uncover further evidence that tocotrienols can be an inexpensive yet effective option to boost the protective effects offered by current stroke treatments. **HT**



# Give Yourself the Joy of Christmas



**Christmas is usually viewed as a joyous time of love and giving with loved ones and friends, but some of us may not be so fortunate. If you are spending this holiday season alone, here are some ways for you to still experience the joy of Christmas.**

Words **Lim Teck Choon**

**N**o one wants to spend the holidays alone, but it can happen to some of us. Maybe we live alone, far from our loved ones, or we are just not in the mood to mingle with other people. Some people are naturally introverted or suffer from social anxiety, and prefer to be alone during the holidays. No matter what the reasons are, many of us may feel more acute loneliness than usual during this time.

Some studies in the US found that there is usually a higher spike in depression during the Christmas season, with a resulting rise in suicides as well as attempted suicides. Among the attributed causes are the association of Christmas with spending (which triggers depression among those who are financially strapped) and loved ones (which can affect people who have lost loved ones).

If you are spending this holiday season alone, it's okay. This may seem like a cliché, but you have the right to be alone, so don't let anyone judge you for your decision or circumstance. What matters most is that you can still celebrate the holidays no matter how alone you feel you are.

## **#1** *Be a volunteer*

Many charitable bodies need volunteers during the holiday season, so it's a good time to sign up at the nearest soup kitchen, orphanage, hospice and such. Volunteering is a good way to meet people, and helping the less fortunate can make you feel good about yourself and boost your self-esteem. Helping the less fortunate will also help you realize that you are not as unfortunate as you think you are, therefore improving your outlook and making you look forward to 2018.



## *#2 Turn your solitude into a time of self-discovery*

This holiday season is a good time to discover new things about yourself. Plan your daily menu with dishes that you have never tried before, for example, or stay in to watch movies that you normally wouldn't pick on Netflix and other streaming services. How about learning some new phrases in a different language by watching YouTube videos? If you have always wanted to write, why not start this holiday season? Whatever you do, make it something that will surprise you, disrupt your usual routine and remind you that there are still so many things to discover and enjoy in the days ahead.

## *#3 Throw a Christmas party – online!*

If you are anxious about meeting people in real life, or you have no one to celebrate Christmas with, why not throw a Christmas party online? This is not as silly as it sounds. With innovative social media such as Snapchat and Facebook Live, you can upload a fun video of yourself enjoying Christmas in solitude for others to share and comment on. You can plan in advance, inviting other “Christmas orphans” to post similar videos, communicate with one another via Skype or WhatsApp during the celebration and more. Just use your imagination! When you do this, you may be celebrating in solitude in real life, but you will find joy and comfort in knowing that you still have people to share your company with, no matter how far the physical distance is between you and your online friends.

## *#4 If you have to work, make it work for you*

If you have to work on Christmas, try not to wallow in negative feelings as that will only make you feel worse. Instead, put a positive spin to it. Organise a gift-exchange during lunch with fellow co-workers who are also working alongside you, for example. Don't forget the wifie! Greet

clients or customers with a smile, and wish them a great Christmas; they will respond in kind and make you feel good about yourself as a result. Even if you have to work on Christmas, make that Christmas a day of positivity and share your positive feelings with the others around you.

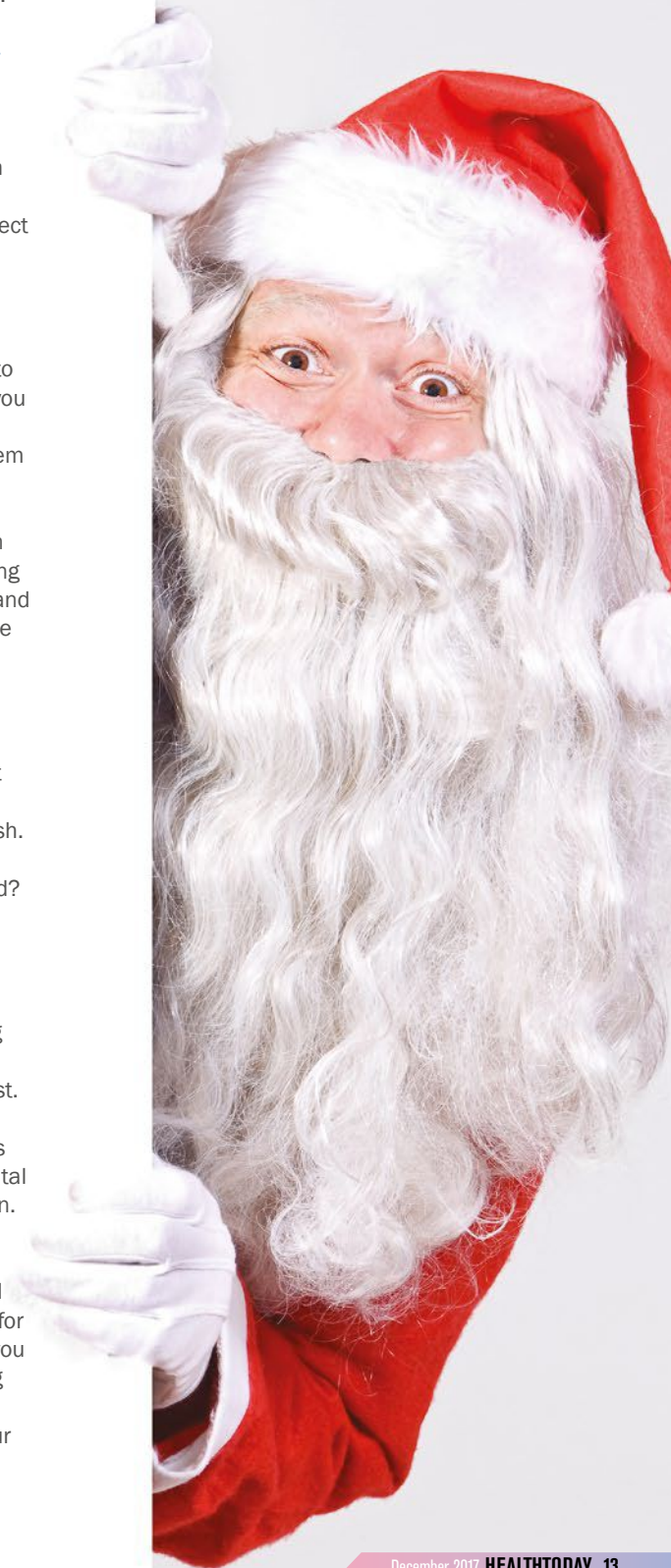
## *#5 Find reasons to be grateful and hopeful*

It can be very difficult to celebrate Christmas if you are suffering from losses and setbacks. Use your solitude this holiday season to reflect on what you still have as reasons to look forward to waking up each morning.

Perhaps you still have loved ones to cherish, or you have dreams that you wish to pursue one of these days. Whatever your reasons are, list them down. There is no right or wrong – your reasons can be anything from wanting to see your grandson graduate from university or planning to get in shape the following year and slip into that bikini in order to make your ex regret ever leaving you!

If you lost someone recently and it still hurts to think about him or her, write letters addressed to that person. Talk about the good times together that you will always cherish. Do you remember the hopes and dreams the two of you have shared? Reminisce about them, and think: how can you make these dreams come true for the two of you? As you plan, you may find once again the spark inside you, to keep living while holding on to the cherished memories of the ones you have lost. If you still find it hard to cope, you can call a support helpline such as the Befrienders for a non-judgmental listening ear and shoulder to cry on.

Write down also your hopes, both for yourself and the people around you. Do you wish for better health for yourself in 2018? If so, what can you do to make that happen? Planning for the days ahead can help clear negative clouds of emotions in your head, and give you the impetus to embrace life again. **HT**



# Easy Christmas Fruit Parfait

**Christmas is coming and, with it, lots of delicious seasonal treats. Our contributing chef and dietitian offers a healthy, yummy homemade dessert so that you can watch your waistline while still enjoying the flavours of the season.** Compiled by Mok Shi-Lynn



## Georgen Thye

BSc. (Hons) Nutrition and Dietetics, IMU  
Dietitian, Holmusk  
Council Member, Malaysian Dietitians' Association (MDA)  
Founder of Georgen Cooking  
[www.facebook.com/georgencooking](http://www.facebook.com/georgencooking)  
[georgen\\_thye@live.com](mailto:georgen_thye@live.com)



**H**o ho ho!  
It's the  
Christmas  
season.  
And with all  
the festive  
joyfulness and tempting  
treats, our self-control and  
ability to listen to our body's  
cues tend to go out of the  
window. The weighing scale  
is likely to go up rather  
than down after this festive

season – not a good gift  
to those who are looking  
after their weight!  
Dessert is one of the  
most calorie-dense foods  
and can be deceiving at  
the same time. The table  
below shows the calorie  
content in different but  
common Christmas  
desserts and how long  
you need to run to burn  
the calories off.

Dessert	Calorie (Kcal)	Time needed to run, at 5 mph (mins)
1 slice of Christmas pudding (150g) & 1 scoop of vanilla ice cream	557	59
1 cup of chocolate mousse (200g)	454	48
1 slice of apple pie (155g)	411	44
1 small piece of fruitcake (43g)	139	15
1 piece of ginger bread (30g)	101	11

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\* The duration for running is calculated based on weight of 70kg/154lb



Try these tips to sail through the sea of desserts safe and sound during this festive season:

## 1 Have fruits

Fruit can be an awesome snack and dessert. It is loaded with fibre, vitamins and antioxidants which are beneficial for health. The high fibre content in fruit can help to make you feel fuller hence less craving for more food. More importantly, 1 serving of fruit has only 60Kcal! One serving of fruit is about the size of a fist or one wedge of watermelon or pineapple or papaya or one cupped hand of berries or grapes.

## 2 Choose low fat and low sugar

If you are buying the desserts from a grocery store or supermarket, read the nutrition label and ingredients list to help you make healthier choices. Refer to the per 100g column to compare similar products, choose the product with lesser calories, sugar and fat. Another important tip is to avoid desserts that contain trans-fat or have partially hydrogenated oil used as part of the ingredients. Trans-fat is bad for the heart.

## 3 Make your own

What is better than a heart-warming homemade

dessert? Making your own dessert means you have more control over the ingredients and portion. For example:

- Make yourself a frozen fruit sorbet with plain Greek yoghurt to save yourself six teaspoons of sugar from having one cup of vanilla ice-cream!
- Substitute butter with mashed avocado in baking to reduce the saturated fats and increase the heart healthy fats.
- Add fruits to your dessert for more fibre, beneficial nutrients and natural sweetness so you can cut down or even skip the sugar from the original recipe.

## Method

1. Mix ingredients A (see table below) well in a mixing bowl. We call this granola.
2. In another bowl, mix raspberries with honey and mash with a fork to become raspberry jam.
3. Mix strawberries and jackfruit together in a third bowl.
4. Layer 2 tbsp of plain Greek yoghurt into the bottom of 3 glasses.
5. Alternate layers of raspberry jam, fruits and granola with yoghurt until glasses are filled to the top.
6. Serve parfaits immediately to keep granola crunchy. **HT**

## Nutrition content per serving

Calories (kcal)	253
Carbohydrate (g)	35.6
Protein (g)	8.7
Fat (g)	8.4
Fibre (g)	6.7

## Easy Christmas Fruit Parfait

Servings: 3

Preparation time: 15 mins

Ingredients	Measurement	Notes
<b>A</b>		
Rolled oats	½ cup	Lightly toasted on a non-stick pan
Wholemeal cream crackers	3 pieces	Coarsely crushed in a ziplock bag
Pistachios	¼ cup	
<b>B</b>		
Raspberries	1 cup	
Honey	1 tbsp	
<b>C</b>		
Strawberries	6 pieces	Cubed
Jackfruit	3 pieces	Deseeded, cubed
<b>D</b>		
Plain Greek yoghurt	6 tbsp	

# Making a **MOVE**

**Joint pain isn't life threatening, but it is quality of life threatening.** Words Lim Teck Choon

**A** global study showed that joint pain affects more than 40% of Malaysians aged 18 onwards, severely impacting their ability to work, exercise and go about their daily routines. For almost half of us, joint pain is a weekly occurrence, making it hard to spend time on hobbies and to enjoy the shared passions that really matter with our friends and family.

Worryingly, the study also reveals that about 47% of Malaysians with joint pain hide it from their loved ones, often waiting for days before taking action to relieve their pain.

## What is joint pain?

It is pain that arises from problems within the joint. A joint is the junction between two bones. There are various types of joints, but the ones we are all familiar with are called synovial joints, which are joints that facilitate movement. The name derives from the word 'synovium,' which is the lining of the joint which allows it to move smoothly. Movement is aided by the production of synovial fluid, which is the lubricating fluid found at the joint.

## Who suffers from joint pain?

Unfortunately, everybody will suffer from joint pain at some point in their lives. This can vary from minor, temporary pain, like knee aches from a game of football with the kids, to more persistent or debilitating pain, which may require medical attention.

In general, the older we are, the more likely we are to suffer from joint pain. This is because, as we age, our bones may become thinner due to the loss of calcium and other minerals. Other factors that contribute to joint pain include joints becoming stiffer and less flexible, loss of cartilage in hip and knee joints, and reduced muscle strength.





## What are the causes of joint pain?

Joint pain can be caused by wear and tear around the joint, or 'degenerative' joint pain. It can also be due to injuries.

Also, there are two main categories of diseases that can cause joint pain. Osteoarthritis is the primary condition associated with degenerative joint pain, occurring when the cushioning material or cartilage between joint breaks down to cause pain, stiffness and swelling. In comparison, there are an array of conditions which can result in inflammatory joint pain, such as rheumatoid arthritis and gout. The level of joint pain very much depends on its cause.

## When is joint pain a problem?

In many cases, joint pain is temporary, and goes away once the body has had time to heal.

However, if the joint pain or problem is substantial enough to impair our function or if the problem persists, we should seek medical attention.

## What are the long-term effects of joint pain?

If the pain is severe or causes ongoing functional difficulties, it may become a disability, resulting in long-term impairment.

Suffering from any type of joint pain can have a significant impact on our quality of life – the discomfort and reduced function can affect our ability to easily go about our daily routine, prevent us from enjoying activities with friends and family or even from making a living. All this can take a toll on us both physically and emotionally.

Joint pain can also have an indirect effect on the economy in terms of affecting employee productivity, impacting companies and organisations on a broader scale.

## How can joint pain be managed?

There are a range of steps we can take to relieve ourselves from the everyday joint pains that many of us experience. Paracetamol is a recommended form of treatment for short-term joint pain, and is often used by patients as a first step, effectively reducing pain for between 4-6 hours when taken at the recommended dose. Extended release paracetamol can also be useful in pain management as the slow-release formula reduces the number of pills people need to take a day, providing both immediate and sustained pain relief for several hours.

Other methods such as massage, plasters, gels or other topicals (medicines applied on the surface of the body) are also available to help ease joint pain.

The way joint pain is managed is dependent on the severity and cause of the pain. It is also down to the patient's personal experience; often, patients will experience varying degrees of pain, and it is up to the sufferer to determine just how much pain or discomfort they are willing to put up with.

## What are the challenges or misconceptions associated with paracetamol use?

Paracetamol is one of the most widely used of all medicines and is commonly available. Because of this prevalence, individuals may

be unaware of, or occasionally, may overlook how much paracetamol they should be taking, and may consequently exceed the recommended dose.

Using all medicines carries a certain degree of risk and so it is important to ensure that we always read and follow the label. When taken at the recommended dose – that is, 500 mg to 1,000 mg every 4 to 6 hours as needed (but not exceeding 4 g a day) for adults and children over 12 years – paracetamol has a low rate of side effects and rarely causes serious interactions with other medicines. This is particularly important as people grow older and may use multiple types of medication at the same time.

Another challenge associated with paracetamol in pain management is the persistent myth amongst certain individuals that paracetamol causes dependency or “accumulate” in the body, a misconception which may prevent them from managing their joint pain appropriately. In actual fact, studies have shown that, when taken as directed, 85-90% of ingested paracetamol is expelled from the body within 24 hours in most healthy people.

## What should I do if my joint pain doesn't go away?

Joint pain is a problem that many of us will suffer from at some point, but one which can usually be managed easily. If our joint pain persists, seek advice from our doctor or pharmacist to ensure our joint pain is managed effectively and appropriately.

*For more information on the management of joint pain, please speak to your doctor or pharmacist.*

# A Better EYE DROP for Dry Eyes

Words **Lim Teck Choon**

**H**ave you ever wondered what keeps dirt and other impurities out of our eyes?

Nature has designed a layer called the tear film that acts as our eyes' first line of defense against the environment. There are actually three layers in the tear film.

- **The oil layer.** This is the outermost layer of the tear film. Glands in our eyes, called the Meibomian glands, secrete oily substances that help coat **the** layer. Oil and water don't mix well, hence this layer helps to keep the tears from spilling out of the eye and prevent loss of moisture from the eyes.
- **The aqueous layer.** This is the watery layer, containing water mixed with proteins to form what we know as tears.
- **The mucous layer.** This is the slippery layer, containing viscous substances that help the tear film adhere to the eye.

## When eyes dry up

Dry eyes commonly arise when there are issues affecting the tear film.

- Evaporative dry eye, the most common form of dry eye disease, occurs when the Meibomian glands in the oily layer are blocked, causing less oil to be produced and hence more tears to become evaporated.
- Aqueous dry eye occurs when tear glands do not produce enough water in the aqueous layer to keep the eyes moist.

It is possible for someone to experience both types of dry eye diseases at the same time.

## Creating a "tear film"-friendly eye drop

Dry eyes are commonly treated using eye drops.

However, in the past it was challenging to create an eye drop that can work optimally.

Watery, or aqueous, eye drops have a tough time penetrating the oil layer of the tear film. Emulsion eye drops – which are formulated to allow the droplets to move through the oil layer better – work better, but, if they contain negative charges, they are repulsed by the mucous layer (see below), hence the spread of the eye drops on the eye surface may be limited.

And then, nanodroplet emulsion technology was developed with the following properties to overcome previous limitations. The end result is more effective eye drops for dry eyes.

**Opposites attract.** The mucous layer is, overall,

negatively charged. The nanodroplet emulsion technology takes advantage of this property by creating **positively charged** eye drop emulsions. As oppositely charged entities attract, the eye drop emulsion therefore will spread across the eye at a greater rate and area, while being retained longer in the eye as well. As a result, there will be greater improvements seen to one's dry eyes.

### Small can be better.

Studies found that eye drop emulsions work better when the droplet size is reduced. The smaller the droplet size, the greater will be the surface area covered by the eye drop. Like its namesake, nanodroplet emulsion technology allows the creation of eye drops containing **nano-sized droplets**, which allows optimal coverage of the eye surface with every drop. **HT**

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# TOUGH ON JOINT PAIN NOT ON YOU



# The ever-improving treatment options for **FIBROIDS**



**Fibroids are most often nothing to worry about. But if they do give you problems, there are new treatment options available that are less invasive and more targeted.** Words Hannah May-Lee Wong

**Dr Raman Subramaniam**

Consultant Obstetrician &  
Gynaecologist



**F**ibroids are common. About one in three women develop uterine fibroids by the age of 50.<sup>1</sup> Uterine fibroids, also known as leiomyomas, are noncancerous growths around the uterus. They mostly do not cause any symptoms and they very seldom develop into cancer.<sup>2</sup> However, fibroids do come in many shapes and sizes. Some fibroids can grow so big, they begin to cause pain and all sorts of health issues.

## What causes uterine fibroids?

The cause for fibroids is unknown, but hormones such as estrogen and progesterone seem to play a key role in the growth of fibroids. Dr Raman explains that each fibroid comes from the mutation of one cell, which divides into thousands and thousands of cells to form a mass. You could get multiple masses at different sites, each of them growing at different rates and each of them responding differently to treatment. This is due to the genetics, receptor sites for hormones and the nature of each fibroid being different.

## How does a woman know she has uterine fibroids?

Most fibroids are asymptomatic, meaning they do not cause you any pain nor harm and they can even go unnoticed for a long time. But when fibroids grow too big, or in uncomfortable places, the affected woman begins to seek treatment options. Dr Raman says that fibroids are a real problem if:

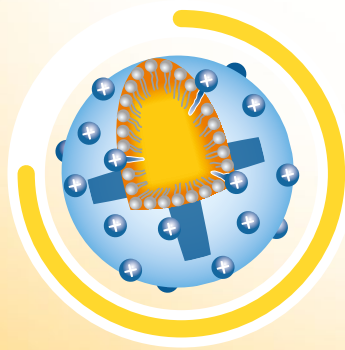
- The fibroid grows big enough that the woman feels a mass. If the mass is pressing on her bladder, it could cause her pain and difficulty in urinating.
- The fibroid undergoes degeneration or torsion (pedunculated type) which may give rise to pain.
- The fibroid is touching the lining of the uterus causing heavy periods or infertility.
- In pregnancy, if the fibroid undergoes sudden degeneration it could cause severe pain and/or premature uterine contractions.
- In pregnancy, if the fibroid is located at the lower end of the uterus, it could block the path for the baby to come out.



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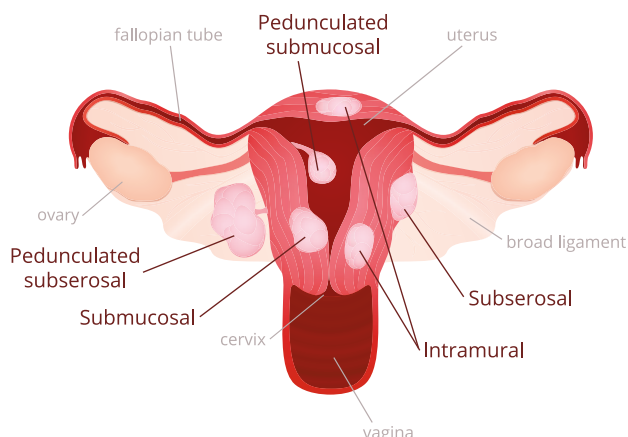
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## UTERINE FIBROIDS: types of uterine fibroids



### Uterine fibroids and endometriosis

How are uterine fibroids different from endometriosis, which is another common condition? Endometriosis happens when the lining of the endometrium grows outside the uterus (the womb), in places such as the ovaries, fallopian tube and other organs. These displaced endometrial cells still menstruate, and when the blood has nowhere to go, blood cysts called endometriomas form.<sup>3</sup> If the endometrium grows into the wall of the uterus, the condition is called adenomyosis. This causes symptoms like severe pain, heavy bleeding during menstruation and infertility.

### Who is affected by uterine fibroids?

Any woman could develop fibroids. That said, genetic links have been shown, with black African women having the highest incidence of developing uterine fibroids. Furthermore, if a mother has fibroids, it is more likely her daughter will develop fibroids as well. Never having children, or extended periods of non-childbearing years also increases risk, says Dr Raman.

### How are uterine fibroids diagnosed?

The simplest way to detect a fibroid is to do an ultrasound scan. Dr Raman adds that most times, an ultrasound is all you need to do. But if doubts appear, for example, if the doctor suspects it could be adenomyosis or endometriosis, then you'll need to do an MRI (magnetic resonance imaging) to confirm. In some cases, two-dimensional or three-dimensional ultrasound imaging is useful in seeing whether the fibroid is impinging on the lining of the uterus. This can result in heavy periods and/or infertility.

### What are the treatment options?

Firstly, it is important to note that many women who show no symptoms live normal healthy lives. If the fibroids do not cause any problems such as pain, infertility or pregnancy complications, then no treatment is necessary. When women reach menopause, the fibroids will shrink on their own.

Conversely, if the woman does show symptoms, they are encouraged to talk to their doctors about their options because the best treatment method depends on the woman's preference, her age and the condition of the fibroid. Dr Raman shares the pros and cons of the treatment options available:

#### 1 Surgery

It is possible to remove fibroids surgically. However, Dr Raman says, "Surgical removal of fibroids does not decrease the risk of fibroids recurring. The only way you can guarantee that the fibroids will not grow again is if you perform a hysterectomy (removal of the uterus). But my personal view is that you should try medical treatment first before you consider surgery." The National Institute for Health and Care Excellence (NICE) UK also recommends that a hysterectomy should only be considered if all other treatment methods have failed, as a hysterectomy comes with risks.<sup>4</sup> However, fibroids which are pedunculated or grow in spite of medical therapy usually require surgical removal after adequate counselling.

#### 2 Medication

There are several medicines available that interfere with the growth of fibroids. Dr Raman talks about two classes, namely GnRH (Gonadotropin-releasing hormone) agonists and the newer option, SPRMs (Selective Progesterone-Receptor Modulator).

GnRH agonists inhibit the production of hormones estrogen and progesterone, creating an "artificial menopause" where menstruation stops, causing the fibroid to shrink.<sup>2</sup> The decreased size of the fibroid will stop the heavy bleeding and pain. Dr Raman warns that prolonged use of GnRH leads to side effects such as bone loss, caused by







the “artificial menopause” effect. Furthermore, if you are given hormone replacement therapy after GnRH treatment, fibroids may grow back. That said, GnRH is chosen over SPRMs if the patient also has endometriosis or is also going through treatment for infertility.

SPRMs, namely ulipristal acetate is a relatively new type of medical treatment. Dr Raman explains that progesterone is thought to stimulate the growth of fibroids, therefore ulipristal acetate acts by modifying the activity of progesterone. The effect of this treatment is that multiple fibroids will shrink, and since it does not create an “artificial menopause” like GnRHs, there is no bone loss side effect.

Your doctor also may prescribe some medication to relieve symptoms. These include:

- Oral contraceptives: to help control menstrual bleeding
- Non-steroidal anti-inflammatory drugs (NSAIDs): to help relieve pain

- Tranexamic acid: to help ease heavy bleeding during menstruation

### 3 Minimal to non-invasive procedures

Dr Raman names some new, minimally invasive and targeted treatment options for the removal of fibroids:

- Uterine artery embolization: A procedure involving small pellet-like agents being injected into the uterine arteries so that blood supply to the uterus is blocked, causing the fibroids to shrink.
- MRI focused ultrasound surgery (MRgFUS): A non-invasive procedure whereby your doctor uses MRI to locate the fibroid and uses powerful heat-generating ultrasound waves to kill the fibroid.
- High-intensity Focus Ultrasound (HIFU): This treatment method uses heat from ultrasound waves, guided through a probe, to kill fibroids.

## Can uterine fibroids be prevented?

Because fibroids are not fully understood, there is no simple answer for this. Having many children is one way of preventing fibroids, but this is not a feasible method, says Dr Raman. Consuming plant foods which contain estrogen and progesterone may increase your chance of developing fibroids. Dr Raman suggests staying away from yam.

Dr Raman recommends that all women over the age of 25 should be advised to have a yearly ultrasound of the pelvis for growths such as cysts or fibroids especially if symptomatic. This is also to make sure they have no cysts that could be endometriosis. If they are sexually active, pap smears should be done at regular intervals. If they have fibroids that are asymptomatic, watchful waiting with yearly monitoring is also a good option. **HT**

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# The **WAR** against **PTSD**

Wars begin and end, but the battle against Post-traumatic stress disorder (PTSD) is not over. The disorder that was once associated with war survivors is still very much present today. Dr Gurdeep Grewal educates us on how PTSD presents itself in modern society and how we can overcome it.

Words **Hannah May-Lee Wong**

**Dr Gurdeep Singh Grewal**  
Consultant Psychiatrist





## A tale of two ladies

### Meet Sally\*

Sally is a school teacher. Everything was going well until one day, she got into a car accident while driving to work. Thankfully, Sally escaped without injury, but after the incident, things were not the same. Sally became too afraid to drive herself to work, and even the thought of taking the wheel caused her to break out in a cold sweat. At night, she is haunted by dreams and realistic flashbacks of the accident. Now, Sally relies on relatives to take her to work, but even being in the car makes her anxious. She is beginning to feel like she might be too afraid to leave the house.

### Meet Jennifer\*

Jennifer is a marketing executive. She loves her work and loves her fiancé even more. After having her dream wedding in a marvellous wedding gown, Jennifer and her new husband begin marital bliss by spending their first night together. Unexpectedly, when her husband gets close to her, Jennifer recalls her experience of being sexually assaulted by her uncle when she was 13. A memory Jennifer buried in the recesses of her mind is involuntarily presenting itself as if it had just happened. Jennifer cannot bring herself to get close to her husband.



**T**

he two very different experiences of Sally and Jennifer (not their real names) are some of the modern-day examples of Post-traumatic stress disorder (PTSD). Not too long ago, PTSD was called “shell shock” or “combat fatigue” because it was common among soldiers who had survived wars. It was found that some of the soldiers who witnessed or experienced terrifying or life-threatening events developed a wide variety of anxiety and depressive symptoms. The trauma of war came in the forms of losing limbs, losing friends or almost losing their own life in battle. As a result, these war veterans developed symptoms such as realistic flashbacks, nightmares, being overly anxious or depressed. These symptoms persisted through the passage of time and the veterans were unable to move on with life, experiencing trouble carrying out day to day functioning.

Unfortunately, PTSD does not affect only war veterans. Traumatic events can come in many forms but affect

victims in similar ways. Over the years, psychiatrists fine-tuned the classification and PTSD as we now know it covers a wider set of traumatic events – such as being in an accident, being sexually or physically assaulted, or witnessing a violent crime – that could cause the disorder. Although it is normal to experience emotional distress and difficulty after a traumatic event, if symptoms of severe anxiety, depression and frequent flashbacks affect your daily routine for more than one month, you should seek help from a trained health care professional.

### What are the symptoms of PTSD?

- Re-experiencing the traumatic event: Recurring thoughts and memories of the event, flashbacks, realistic episodes of re-living the event in the mind, nightmares and dreams about the event.
- Avoidance: Actively avoiding places or anything that reminds the victim of the traumatic event, avoiding thinking or talking about the traumatic event.
- Change in mood: Feeling anxious all the time, feeling depressed, angry or emotionally numb.
- Hypervigilance: Always being on high alert although there is no danger, especially in situations that remind them of the traumatic event.<sup>1</sup>



## How is PTSD diagnosed?

Diagnosing PTSD involves a thorough medical and psychological assessment that should be performed by a psychiatrist. It's important to rule out other medical conditions or substance-related conditions because some symptoms that are similar to PTSD may be a consequence of drug abuse.

One key feature of the diagnosis of PTSD is that the symptoms can be traced back to a traumatic event that was life-threatening, involved violence, or involved injury. It should be noted that it's not necessary for the person to directly experience the event; even just witnessing a traumatic event can cause PTSD. "If the person continues to have negative reactions post-trauma and it causes impairment in the person's personal, social and occupational function for more than one month, then it becomes a disorder that

needs to be treated," explains Dr Gurdeep.

## The Malaysian context: traumatic events that can give rise to PTSD

According to Dr Gurdeep, the most common cases of PTSD he treats are caused by events such as sexual assault, physical assault (for example, being robbed or held at knife-point) and road traffic accidents. He adds that the prevalence may be even higher than expected as many cases go unreported.

## What are the risk factors for developing PTSD?

"Those who are more prone to developing PTSD may have

had unstable childhoods, poor parental support, poor social support, other psychiatric diagnoses that preceded PTSD (such as depression) or if they are drug users. Such people tend to have a higher chance of getting PTSD after trauma; they also tend to take a longer time to get better," says Dr Gurdeep. He adds that PTSD can come from a single event or multiple events: repeated exposure to trauma causes more impact and often takes longer to treat.

## How is PTSD treated?

Dr Gurdeep finds that the most effective method of treatment for PTSD is a combination of medication and psychotherapy. "Most antidepressants are quite effective in treating PTSD

because it reduces the effects of anxiety and depression, and some medications help with sleep. But non-pharmacological interventions such as psychotherapy is very important too."

Psychotherapy is a method whereby a mental healthcare professional hosts therapy sessions designed to delve into underlying problems or mental disorders.<sup>2</sup> "Psychotherapy refers to a wide range of therapy sessions ranging from counselling, cognitive therapy aimed at changing thinking patterns, family intervention, marital therapy and so on. Eye Movement Desensitization and Reprocessing (EMDR) is particularly effective in dealing with PTSD," Dr Gurdeep explains.





## How can EMDR help?

EMDR aims to lessen the negative psychological impact caused by traumatic events. The therapy specifically works to reduce the effect of symptoms such as unpleasant memories, flashbacks, nightmares, depression, anxiety, bouts of panic and others, and prevent such symptoms from interfering with everyday life.<sup>3</sup>

"When trauma occurs, the memories, emotions and sensations that are associated with the trauma never gets fully processed by the brain. These negative thoughts linger on in the depths of the mind. Over time, when a reminder of the traumatic event comes along, be it explicit or vague, these reminders activate fear. This leads to recurrent anxiety, a sense of panic and unwanted thoughts bothering you for a long time<sup>4</sup>," explains Dr Gurdeep.

Dr Gurdeep gives a run through on how he conducts an EMDR session. "During an EMDR session, I will guide my patient into analysing his or her feelings, thoughts and emotions related to the trauma. At the same time, I will move my finger back and forth as my patient follows my finger movement with her eyes. It is thought that the movement of the eyes as the patient focuses on the trauma causes neural networks in the brain to breakup or readjust. This allows the brain to properly process these memories and ultimately put them away into long term storage where it will not bother the person again."



Each session of EMDR lasts around one to one-and-a-half hours, and a patient typically needs three to six sessions to see improvement. It should be noted that EMDR should only be performed by a trained practitioner, who will also assess a person's suitability for the treatment.

## How can you help someone with PTSD?

Dr Gurdeep advises that, first and foremost, education about PTSD is important for family members. Knowing what PTSD is and getting help is the most useful thing a family member can do, as early diagnosis and treatment will result in speedier recovery. The second thing would be to remove all stigma associated with seeing a mental health

professional. Family members and employers should not stigmatize but rather encourage an employee or loved one to seek help for their mental health when needed. Lastly, family members should support their loved ones in adhering to and completing treatment plans as recommended by their health care expert. **HT**

## Malaysian study: 1 in 5 cancer patients develop PTSD

Just last month, a local study – led by Dr Caryn Chan Mei Hsien of the National University of Malaysia (UKM) – was published. The study followed 469 patients with various types of cancer for four years to assess the likelihood of developing PTSD.

- 21.7% of the study subjects developed PTSD after initial diagnosis of cancer. The rate dropped to 6.1% at the 4-year

follow-up assessment.

- These cancer patients experience anxiety and depression which may cause them to avoid treatment or doctors' appointments because it triggers negative thoughts and emotions.
- Breast cancer patients were 3.68 times less likely to develop PTSD, probably because breast cancer awareness is more established, and breast cancer patients may receive more social support.





# Break Free of Your SMART PHONE!

We don't want to ditch our smart phones. They are awesome and useful. But becoming too dependent on those nifty devices has its drawbacks. Creating undue anxiety, reducing work productivity, affecting our relationships... these are just some of the issues that arise from too much smart phone dependency. If you are similarly affected, here are five tips to make your smart phone habit more manageable. Words **Lim Teck Choon**



#1

## DON'T CHECK FOR UPDATES AND EMAILS IN THE MORNING (WE CAN DO THAT LATER)

What we do first thing in the morning often sets the tone for the rest of the day. So whatever we do, leave out emails, Facebook posts, tweets, Instagram posts, WhatsApp and everything else in our smart phone. Instead, we prioritize other morning activities such as going for a morning run, prayer, meditation, reading the newspapers, taking time to enjoy breakfast, et cetera.

Over time, we will feel a reduced need to check our social media and emails, and instead take time out to enjoy our morning... and the rest of the day!

#2

## DISABLE ALL SOCIAL MEDIA NOTIFICATIONS AND GAME ALERTS

No, don't scream – it won't hurt to do this. We will cut down considerably the constant reminders to check our smart phone for various new posts and updates, log in to get our daily game bonus and more.

#3

## SET A TIME TO CHECK OUR PHONE, AND STICK TO IT

Allocate certain times when we will check our phone – at the last 20 minutes of our lunchtime, perhaps, or sometime after dinner. This will help cut down on habits that contribute to our reliance on the smart phone, such as reading Facebook while waiting in a queue. If we need distractions for long waits or trips, why not read a book or magazine instead?

#4

## RECORD OUR SMART PHONE USAGE

Start taking notes on the time when we start using our smart phone as well as the time when we stop. This includes moments when we are answering calls, emails and text messages as well as chatting on WhatsApp, browsing Facebook, playing mobile games, et cetera.

After a week, we can total up the time and divide it by seven to get the average time that we spend on our smart phone every day. Now let's see if we can cut that time down a bit. How about by 5-10 percent? That's not as hard as it may seem – if we spend 5 hours daily on the smartphone, 10 percent is just 30 minutes. It's a start, though!

Once we have set this goal, we can continue to track our usage and review at the end of the next week whether we can meet it. If yes – awesome – we can try to cut down the time a bit more until we find a comfortable balance between real life and 'smart phone' life. If not, we can always try again until we get it right.

#5

## IF ALL ELSE FAILS, GO OFFLINE

That's right, we can disconnect from the Web for, say, an entire weekend. Some people disconnect entirely during their vacation. This may sound drastic, but it actually has its advantages. Many people who do this find themselves rediscovering friends and family members, finding new things to appreciate in people and places that they have started to take for granted and in the process, feel rejuvenated to go back to work or school. The more we rediscover these simpler pleasures in life, we will be less dependent on our smart phone for entertainment, stimulation or distraction.**HT**

# EATING Disorders:

## Deadly Psychological Conditions

Eating disorders are not a 'lifestyle choice'. They are complex psychological problems of modern society that affect the lives of many. The consequences of these disorders are serious and sometimes even fatal.

Words Mok Shi-Lynn

**T**here are a number of classified eating disorders but the three major types are anorexia nervosa, bulimia nervosa and binge eating disorder (BED). Anorexia nervosa is characterized mainly by self-starvation and excessive weight loss. People with anorexia often see themselves as overweight, or they possess an intense fear of gaining weight despite being dangerously thin.

Those who have bulimia are often preoccupied with their body weight and shape, causing them to restrict what they eat, which then leads to binge eating. They typically feel very anxious or shameful after the binge and resort to purging to undo to over-eating. These behaviours repeat themselves in a cycle and, according to Dr Prem Kumar Shanmugam, a psychologist and psychotherapist,

they occur at least once a week on average.

Binge eating disorder is quite common; this is when a person loses control and eats an abnormally large amount of food in one sitting. Unlike bulimia nervosa, the person does not go through phases of purging. Instead, he or she experiences guilt and distress about the binge eating, which often leads to more binge eating. As such, a person with BED is often overweight or obese.

### The desire for the perfect body

A study revealed that about one in 10 young urban female college students is prone to eating disorders. According to a survey by the Malaysian Psychiatric Association (MPA), for every 10 to 20 females with eating





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disorders, there is one male with a similar problem. The annual mortality rate from eating disorders in every 100,000 Malaysians has increased by 73.5 percent since 1990, with an estimated average of 3.2 percent a year.

Concerns about body image are very common in societies throughout the world. Many people have negative perceptions about their bodies, but research has shown that women are more likely than men to suffer from body dissatisfaction. Social pressure and the media play a significant role in influencing many girls and women to have a distorted idea of what the ideal body should be. And many women believe that to be pretty, you must be skinny.

While eating disorders can affect males and females of all ages and backgrounds, the average age of onset for these disorders takes place during adolescence. The physical transformation that occurs during this period is intense, and is often intertwined with feelings of extreme self-consciousness about one's appearance, low self-esteem and comparison with peers. All this place an individual at a higher risk of developing an eating disorder.

However, Dr Prem notes that although the above factors do play a part in the development of eating disorders, they are not the only causes. These disorders are caused by a complex combination of factors, including genetic, biochemical, psychological, cultural and environmental.

## Lethal consequences

Anorexia nervosa is a deadly disorder: it has the highest mortality rate of any mental disorder, estimated at around 10 percent. This high mortality rate is mainly due to the numerous

osteoporosis and even death from starvation.

Suicide also contributes to the high mortality rate. Every 1 in 5 of these deaths is by suicide, which is more common in women with anorexia than most mental disorders. People often

can affect all the major organ systems and can ultimately lead to death if left untreated.

Clinical obesity is usually linked to people who suffer from binge eating disorder, leading to the potential development of various other diseases like diabetes, high cholesterol and high blood pressure.

All these disorders can also affect the brain, resulting in neuro damage which can affect the emotional centres of the brain, leading to depression, irritability and isolation.

## Seek help immediately

Eating disorders may lead to severe long-term damage of the organs; some of these are reversible and some not. A person who has been suffering for many years would have accumulated more damage to his or her system. So to make a full recovery, early detection and treatment is very important.

The most effective treatment for an eating disorder is some form of psychotherapy or counseling coupled with meeting medical and nutritional needs. Cognitive, group and family therapy are also incorporated as part of the treatment plan. Care should be provided by a multidisciplinary team that includes a psychologist, psychiatrist, nutritionist and primary care physician.

To begin your journey to recovery, seek out a licensed psychologist, psychiatrist or therapist who has experience in dealing with eating disorders. **HT**



medical complications that accompany anorexia nervosa.

People with anorexia often starve themselves and restrict their food intake, resulting in extremely low body weight. This in turn could lead to serious health consequences such as metabolic collapse, heart attacks, early onset

decide to give up or choose to end their lives as a result of physical exhaustion from the complications of the disease or from mental exhaustion.

As for bulimia nervosa, the recurrent binge-and-purge cycle can affect the digestive system, causing severe electrolyte and chemical imbalances in the body. This





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# The Sustenance

Science has confirmed what our inner selves have always known – there is something powerfully restorative about nature. It is able to heal us, in the body, mind and soul. Words **Pank Jit Sin**

**T**he human psyche is intangible, yet organic. It is alive and it requires sustenance. What then, constitutes sustenance for the psyche (otherwise also known as the soul)? There's no straightforward answer to this, as we know both the biological and spiritual aspects of our body are intertwined; what nourishes the body also nourishes the soul to a certain extent. However, even

optimally nourished people can feel empty, or burnt out.

What then, can we – the perennially overworked, overstretched urbanites – do to recharge ourselves? Very often, we get told to go for a vacation or take some time off. These rarely work. We come back from these so-called vacations feeling worse off than before when faced with the pile of overdue work or chores awaiting us.

The answer lies in nature. We are strongly bonded to

our primeval roots. Our time since becoming agrarian, house-dwelling civilizations for the past 5,000 years or so is merely a blink in the evolutionary scale of things.

Our biology still craves for nature and long periods away from it can leave one feeling empty and possibly depressed. There are many instances of individuals suddenly leaving everything behind and choosing instead to lead a life of solitude in the wilderness. One such documented case is that of

Christopher Knight, of Maine, USA. At age 20, Christopher suddenly decided to leave everything and walk into the wilderness. He stayed in the woods for 27 years before he was found – only because he was stealing food and necessities from campers and holiday makers.

Many questions come to mind and there doesn't seem to be any clear answers. However, it could be as simple as one person's search for a way to heal the fracture in his soul. More evidence of the power



# that is Nature

of nature and its healing capabilities are cropping up. Let's look at some.

## Healing the mind helps heal the body

The healing power of nature and natural surroundings was demonstrated in the late 1980s. Back then, researchers noticed that certain patients were recovering faster than others in a hospital in Paoli, Pennsylvania. This group of patients had all undergone gallbladder surgery.

Looking further, they found that the speed of recovery coincided with the rooms the patients were placed in during convalescence. You'd be forgiven for thinking it had something to do with feng shui, which might be at the top of most people's minds.

Instead, what the researchers discovered was the patients with the fastest recovery rates all had a view of the courtyard of the hospital. The courtyard had a short row of trees. The patients who recovered slower were those whose windows

faced a brick wall. They required an additional day of hospitalization compared to the ones who had a green view.

When the patients with the courtyard view and the brick wall view were compared and matched (age, weight, gender, smoking status and even healthcare professionals attending to them), the researchers found that patients with the courtyard view were FOUR times better off than those who had the brick wall view. There's

more: those who had the natural view also needed less painkillers to help them cope with the pain of surgery compared to those who were looking at brick walls.

Green, natural views not only help sick patients heal, they also help children with attention deficit/hyperactivity disorder (ADHD). Researchers in Europe found a link between the 'green-ness' of a child's surroundings and their physical as well as cognitive development. They suggest



that more green places be made available at schools to improve schoolchildren's mental and physical wellbeing.

Recent findings reveal that traffic noises worsened ADHD symptoms by around 25 percent. In contrast, green and blue spaces (ie, trees, grass, forests, beaches and seas) improved ADHD symptoms. The children with greater exposure to green and blue spaces had less ADHD symptoms while at the same time got on better with their peers.

David Suzuki, a well-known academic, author, environmental activist and host of long-running television programme, *The Nature of Things*, highlighted a study on the link between city living and increased sensitivity to social stress. Greater exposure to urban surroundings correlate to increased activity in the amygdala, which is the brain centre involved in processing emotions and the production of stress hormones. Those who spent their childhood (15 years) in urban settings had increased activity in their amygdala and were thus more likely to have raised sensitivity to stress compared to those who spent their early years in rural or natural settings.

## Bathe in the wonder of nature

The Japanese, long famed for

their concept of Zen and their obsession with perfection, have a method of soul therapy known as shinrin-yoku, loosely translated as forest bathing. This therapy is simple – the person in search of healing takes long walks in the forest while breathing deeply to allow the scents of the forest to permeate through every part

Strayer says the 3-day effect has a 'cleaning' effect on the mind and has demonstrated that people who undertook the 3-day wilderness trips performed 50 percent better in creative problem solving situations compared with those who didn't. He notes that the sense of smell and hearing are recalibrated on

*Mycobacterium vaccae* could help with depression. Study patients exposed to the bacteria were happier, more active and had better cognitive function.

Should space be a limiting factor, try decorating our houses with hardy potted plants or even pictures

of beautiful natural scenery. (Although there's no evidence that paintings can replace the real thing.)

There's an increasing precedence of people cementing or tiling up their small plots of lawn because they don't want to maintain a garden. Now that you know how important greenery is, perhaps it's time to break up that patch of cement and let nature in.



of the body. A similar therapy exists in Germany, called Kneipp therapy, where the patient undertakes physical exercise in forest clearings. If one were to look closely at both therapies, it involves breathing deeply of forest air and looking at natural surroundings.

Professor David Strayer, a cognitive psychologist at the University of Utah, USA, is a great proponent of nature as a healing tool for stressed out urbanites. In an article appearing in *National Geographic*, he describes a term known as the 3-day effect. The 3-day effect can 'reset' the mind, thus giving it a new lease of life.

the third day and one begins to hear and smell things that were previously unnoticed.

## What can we urban dwellers do?

The answer seems obvious – go live in the jungle! Okay, that's not a practical possibility for most of us. But we can start somewhere: those with gardens should think about planting trees and flowers. It would be better still if the planting was done by your own hands. Evidence is slowly pointing to the benefits of gardening; a recently discovered benefit of gardening is that a common soil bacteria called

Then there's always the option to take regular walks or hikes through natural surroundings. Even within the Klang Valley, there are a few green reserves and parks where you can get close to nature.

Nature is shaping up to be such an important element that some are calling it Vitamin N. The rewards are instantaneous and the effects are long lasting. All we need is to make small changes in our environment and make time to revel in natural surroundings. Give it a try – it will be good for your body and your soul. **HT**



# A Problem of Overproduction

**Professor Dato' Dr Zulkifli Md Zainuddin**

Consultant Urologist  
Surgical Department,  
Hospital Canselor Tuanku Muhriz,  
UKM Medical Centre



**N**octuria is defined as a condition in which a person wakes up from sleep to urinate at least once a night. One of its more common causes is nocturnal polyuria, which causes the bladder to produce a greater volume of urine during the night.

Consultant urologist Professor Dato' Dr Zulkifli Md Zainuddin shares that the bladder of people with nocturnal polyuria produces over one third or about 30% of its daily urine output during the night.<sup>1</sup> This causes the affected person to experience frequent need to go to the toilet, thus interrupting their sleep.

## Is this a serious problem?

It can be. Prof Dr Zulkifli shares that he has patients who have to go to the toilet every hour or so during the night. The lack of sleep can cause fatigue and lack of concentration during the day, which in turn can affect the person's performance at work or school as well as his or her relationship with other people.

Furthermore, elderly people face the risk of sustaining injuries due to falls while going to the toilet at night. Hip fracture is especially a cause for concern: risk of death among the elderly within a year

after sustaining one is 15% to 20%, while about 50% of patients face ongoing disability and require institutionalization.<sup>2</sup>

Therefore, people who find themselves often waking up at night more than once to urinate should see a doctor, advises Prof Dr Zulkifli.

## BREAKING THE NIGHTTIME CYCLE

Treatment of nocturia often involves two components: behavioural modification and medication.

### Behavioural modification

The urologist will advise patients to take measures to improve their condition. These measures may include:

- Reducing the amount of fluids consumed throughout the day (especially coffee, caffeinated drinks and alcohol).
- Improving 'sleep hygiene' (the bedroom lighting, ventilation, temperature, ambiance, etc) to be more conducive for better sleep.

### Medications

Prof Dr Zulkifli points out that there are two types of medications that are in use.

**Timed diuretics.** Diuretics are medications that promote increased production of urine. For patients with

heart failure, for example, they tend to have considerable fluid retention in their extremities such as the legs. This accumulated fluid can seep back into the bladder when these patients lie down to sleep, giving rise to nocturia. In such a situation, diuretics can be prescribed so that the patient can take them during the day and 'let everything flow out' before bedtime arrives.

**Timed antidiuretics.** According to Prof Dr Zulkifli, treatment is increasingly shifting towards the use of timed antidiuretics. Unlike diuretics, antidiuretics suppress urine production. They are normally taken by patients before bedtime.

It is Prof Dr Zulkifli's opinion that, while antidiuretics also may cause side effects, they are generally safe for use provided that there is proper monitoring by the patient's healthcare team.

Visit [www.waketopee.ie](http://www.waketopee.ie) for more information on nocturnal polyuria as well as nocturia.

**References:** 1. Kujubu, D.A. (2009). Nocturia in elderly persons and nocturnal polyuria. In *Geriatric nephrology curriculum*. Retrieved from <https://www.asn-online.org/education/distancelearning/curricula/geriatrics/Chapter19.pdf> 2. Brunner, L.C., Eshlian-Oates, L., & Kuo, T.K. (2003). Hip fractures in adults. *American Family Physician*;67:537-42.

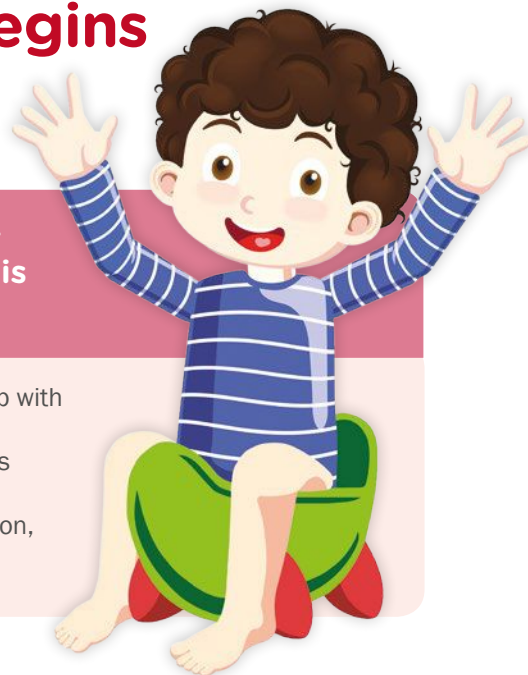
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**FERRING**  
PHARMACEUTICALS

## Your child's healthy gut begins with nice n' easy poop.

Going poo-poo on a regular basis shows your child's gut is working properly. A healthy gut is important as it leads to:

- Healthy digestion and better absorption of nutrients which help with optimal growth and development.<sup>1</sup>
- Good support for your child's immune system against germs as 70% of the immune cells are located in the gut.<sup>1</sup>
- Less digestive problems such as hard poop (stools), constipation, diarrhoea and stomach cramps.<sup>1</sup>



### Did you know?

Hard stools or constipation is one of the most common digestive problems among children.

1 out of 3 children worldwide may suffer from constipation.<sup>2</sup>

Children suffering from constipation have poor appetite and are slow to gain weight and grow in height.<sup>3</sup>



## Are your child's poo habits healthy?

Observe your child and note what are his/her poo habits:











- **Poop frequency:** Your child should have normal poop and go 'poo-poo' from 3 times a day to 3 times a week.<sup>4</sup>
- **Poop volume:** Most children aged 1-4 years produce poop the size of a small sausage (25 ml).<sup>5</sup>
- **Poop consistency:** Your child's poop should be soft and look like Type 3 or 4 in the Bristol Stool Chart (see next page).<sup>6</sup>

### Tips & Advice for Parents:

- \* Watch out if your child's poop looks like Type 1 or 2 on the Bristol Stool Chart – this shows your child has hard poop and he/she needs help.
- \* Every child has different poop habits, therefore it is important for you to be familiar with your child's poop patterns and consult doctor if you have any questions.



# The Bristol Stool Chart is a tool designed to help identify the types of stool.<sup>6</sup>

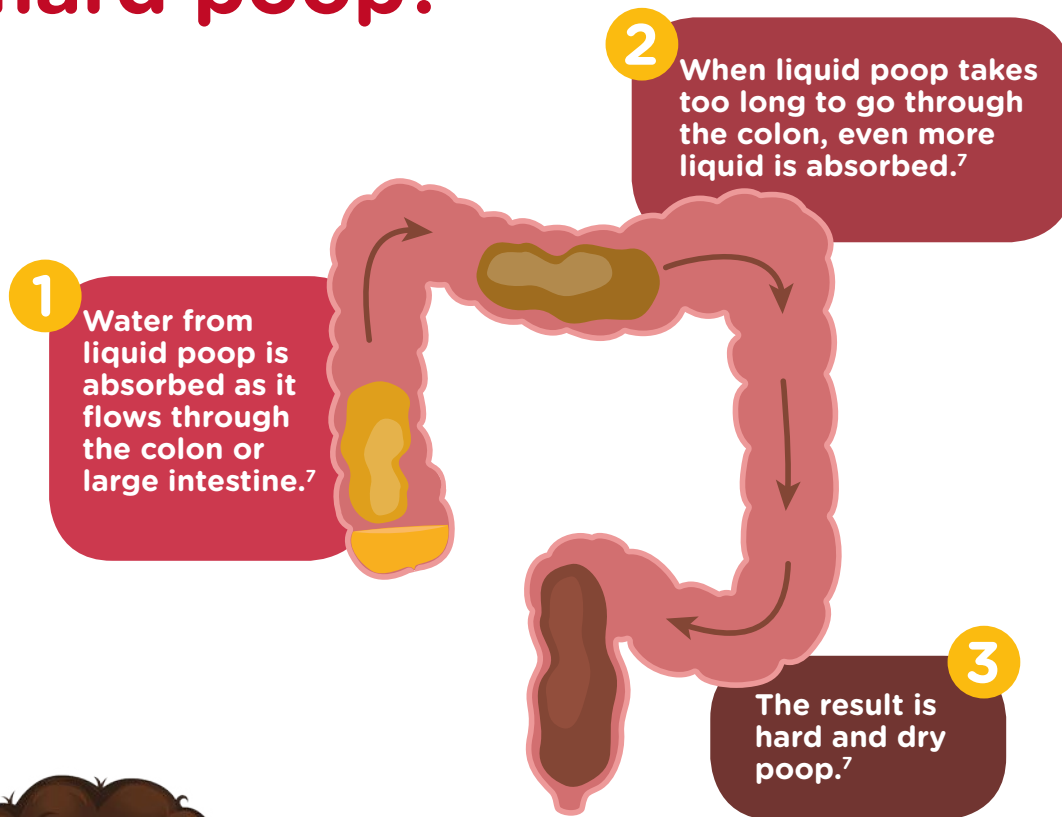
Bristol Stool Chart				
 <p>This range of poop types could be an indicator of constipation.</p>	Hard Stool Range	Type 1		Separate hard lumps, like nuts which are hard to pass.
		Type 2		Sausage-shaped but lumpy.
 <p>This range of poop types is the most ideal as they are easy to pass without being too watery. This can be a sign of your child's healthy gut.</p>	Normal Stool Range	Type 3		Like a sausage but with cracks on the surface.
		Type 4		Like a sausage or snake, smooth and soft.
 <p>This range of poop types tend towards diarrhoea.</p>	Loose & Watery Stool Range	Type 5		Soft blobs with clear-cut edges.
		Type 6		Fluffy pieces with ragged edges, a mushy stool.
		Type 7		Watery, no solid pieces. Entirely liquid.
Adapted from Bristol stool form scale <sup>6</sup>				

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**DISCOVER MAMIL**  
*See the difference*

# Why does your child have hard poop?



**Your child may be at risk of passing hard stools due to the changes he/she undergoes during transitional phases, such as:<sup>7,8</sup>**

## **Switching to family diet**

Your child may not be drinking enough water or not taking enough fibre.

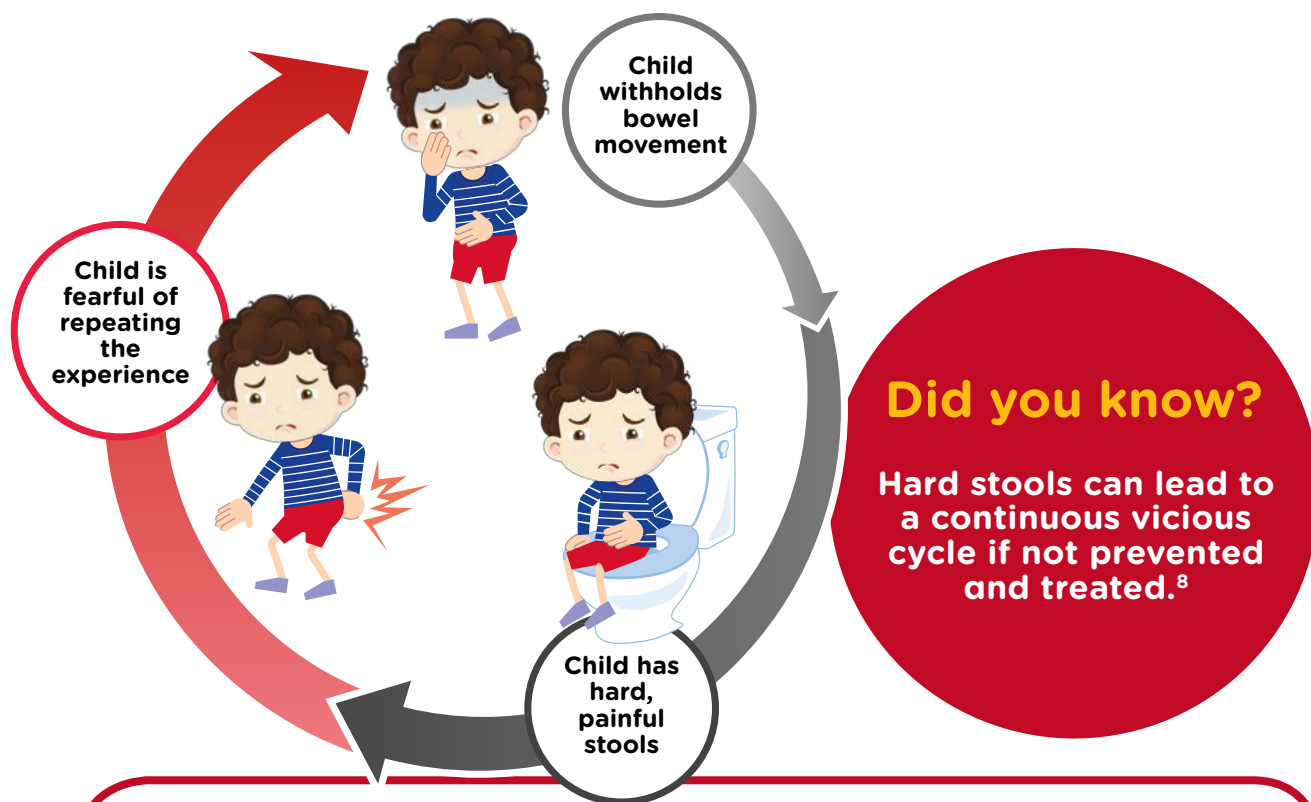
## **Potty training**

Your child may be too young and not yet ready for potty training. On the other hand, waiting too long to toilet train your child can also cause problems in their poop habits.

## **New environment**

Your child may feel shy or uncomfortable using toilets outside of home, or withhold poop due to being more interested in playing than going poo-poo.

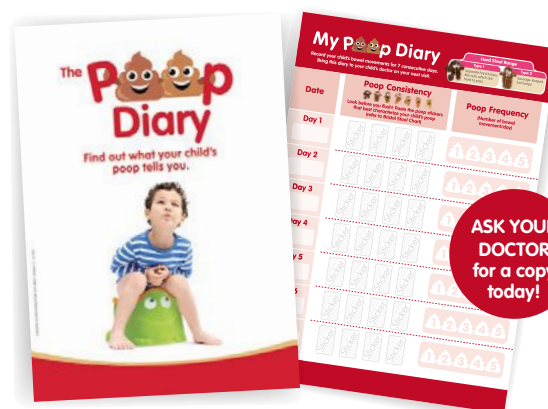




## Break the cycle!

**You can help your child develop healthy poo habits by:**

- Teaching your child to eat healthy foods containing fibre and prebiotics<sup>9</sup>
- Making sure your child is drinking enough water<sup>9</sup>
- Encouraging your child to be active and exercise<sup>10</sup>
- Fixing a toilet routine for your child<sup>11</sup>
- Keeping a poop diary<sup>12</sup>.



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**Mamil**  
**DISCOVER MAMIL**  
*See the difference*

# Fibre and prebiotics are important for your child's gut health<sup>13</sup>

Prebiotics are a type of fibre which are foods for good bacteria (probiotics). Prebiotics and probiotics are building blocks for healthy gut, which can help to promote good digestion and immune system for a healthy, happy child.

## Did you know?

**A specific prebiotics mixture of GOS/IcFOS in 9:1 ratio can help your child develop good gut health by:**

- 1 Supporting stronger gut protective barrier to prevent harmful bacteria from entering the body<sup>15</sup>
- 2 Increasing good bacteria and decreasing the growth of harmful bacteria<sup>16,17</sup>
- 3 Promoting good bowel movement with softer stools.<sup>17</sup>

## Where can your child get prebiotics from his/her daily diet?<sup>13,14</sup>



Spinach



Lentils



Green peas



Apple with skin



French beans



Soybeans (edamame)



Sweet potato



Peanuts



Banana



Pumpkin seeds



Mamil® growing up milk

**You can make sure your child gets prebiotics by supplementing his/her diet with Mamil® growing up milk.**

- **Mamil® contains a combination of Internationally Patented Prebiotics Oligosaccharide Mixture GOS/IcFOS (9:1) that helps improve bowel movements.**

**References:** 1. Bischoff, S.C. (2011). 'Gut health': a new objective in medicine? *BMC Med*;9:24. 2. Mugie, S.M. et al. (2011). *Best Pract Res Clin Gastroenterol*;25(1):3-18. 3. Chao, H.C. (2008). The impact of constipation on growth in children. *Pediatr Res*;64(3):308-11. 4. Connell, A.M. (1965). Variation of bowel habit in two population samples. *Br Med J*;2(5470):1095-9. 5. Weaver, L.T. (1984). The bowel habit of young children. *Arch Dis Child*;59(7):649-52. 6. Lewis, S.J., et al. (1997). Stool form scale as a useful guide to intestinal transit time. *Scand J Gastroenterol*;32(9):920-4. 7. Johns Hopkins Medicine: Constipation. Available at: [www.hopkinsmedicine.org/healthlibrary/conditions/digestive\\_disorders/constipation\\_85,P00363](http://www.hopkinsmedicine.org/healthlibrary/conditions/digestive_disorders/constipation_85,P00363) 8. Mayo Clinic: Constipation in children. Available at: [www.mayoclinic.org/diseases-conditions/constipation-in-children/symptoms-causes/dxc-20235978](http://www.mayoclinic.org/diseases-conditions/constipation-in-children/symptoms-causes/dxc-20235978) 9. Gibson, G.R. (1995). Dietary modulation of the human colonic microbiota: introducing the concept of prebiotics. *J Nutr*;125(6):1401-12. 10. Centers for Disease Control and Prevention: How much physical activity do children need? Available at: [www.cdc.gov/physicalactivity/basics/children/index.htm](http://www.cdc.gov/physicalactivity/basics/children/index.htm) 11. The American Occupational Therapy Association, Inc.: Establishing Toileting Routines for Children. Available at: [www.aota.org/About-Occupational-Therapy/Patients-Clients/ChildrenAndYouth/Toileting-Routines.aspx](http://www.aota.org/About-Occupational-Therapy/Patients-Clients/ChildrenAndYouth/Toileting-Routines.aspx) 12. familydoctor.org: Stool Soiling and Constipation in Children. Available at: <https://familydoctor.org/stool-soiling-and-constipation-in-children/> 13. One Green Planet. Available at: <http://www.onegreenplanet.org/natural-health/best-prebiotic-foods-for-optimal-digestive-health/> 14. USDA (2015b). Dietary Guidelines for Americans 2015-2020, 8<sup>th</sup> Edition. Department of Agriculture and Department of Human Health Services USA, 2015. 15. Knol, J. et al. (2005). Colon microflora in infants fed formula with galacto- and fructo-oligosaccharides: more like breast-fed infants. *J Pediatr Gastroenterol Nutr*;40(1):36-42. 16. Schmeizel, H. et al. (2003). Randomized Double-Blind Study of the Nutritional Efficacy and Bifidogenicity of a New Infant Formula Containing Partially Hydrolyzed Protein, a High beta-Palmitic Acid Level, and Nondigestible Oligosaccharides. *J Pediatr Gastroenterol Nutr*;36(3):343-51. 17. Moro, G. et al. (2002). Dosage-Related Bifidogenic Effects of Galacto- and Fructooligosaccharides in Formula-Fed Term Infants. *J Pediatr Gastroenterol Nutr*;34(3):291-295.



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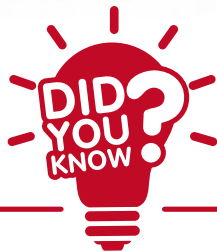
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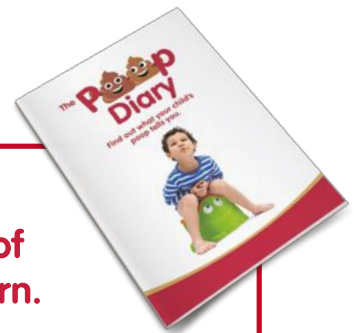


✓ **Internationally Patented Prebiotics**  
GOS/lcFOS (9:1)  
helps promote good  
bowel movement

✓ **77mg/100g DHA<sup>1</sup>**



Dear Parents,  
**Poop** diary can help you keep track of  
your child's bowel habits and poop pattern.  
Grab a copy from your doctor today!



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\* Results may vary according to individual  
<sup>1</sup> Mamil Learning DHA content

The  
**SUPERMAN**  
of a new generation:

**HENRY  
CAVILL**



Piercing blue eyes, chiselled features and tall, toned stature describe the man who is Henry Cavill. It's no wonder he's the Superman of our generation. Cavill returns to the big screens as the man of steel in DC's latest blockbuster, *Justice League*.

Words **Hannah May-Lee Wong**

**H**

enry William Dalglish Cavill was born on the 5th of May, 1983 to Marianne Dalglish and Colin Cavill, a stockbroker. He

was born in Jersey, one of the Channel Islands between England and France, making him the first British actor to ever play Superman on the big screen. Henry grew up in a big family, being one of five brothers.

Young Henry attended school in Buckinghamshire, England. There, he played rugby, a sport he still follows to this day, supporting the England national rugby union team. In 2000, actor Russell Crowe happened to be filming *Proof of Life* at the school Henry attended. Unbeknownst to Henry, Russell Crowe noticed him as Henry was playing rugby. His dominance and fluidity on the field caught the attention of the already famous actor.

After the rugby match, 16-year-old Henry made his way to shake Russell Crowe's hand, as you do when you're a teenager meeting a famous star. From that moment, all Henry could ask Russell were questions about acting. He asked what it was like being an actor and if Russell could offer any tips on becoming an actor. The encounter must have left a deep impression because as soon as Russell got back to his home country (Australia), he thoughtfully sent Henry a package for encouragement.

The package Henry received read "Dear Henry, a journey of a thousand miles begins with a single step. Russell." The package came complete with a signed autograph from Russell, an Australian Rugby jersey, some Australian snacks and a music CD.

One can only imagine the excitement Henry must have felt as a teenager receiving such a gift from a famous movie star.

Fast-forward 10 years: young Henry has blossomed into one of the most sought-after actors in Hollywood. As fate would have it, the young and veteran actors were reunited when Russell was cast as Superman's father, leading to the two working and appearing on screen together.

## Taking off into the sky

Henry's passion for acting really took off after his early encounter with Russell Crowe. He starred in school plays such as *A Midsummer Night's Dream*, *Grease* and *Hamlet*. He started appearing on film in 2001, where he had a role in *Laguna* and *Count of Monte Cristo* in 2002. He then appeared on TV in BBC's *The Inspector Lynley Mysteries* (2002), *Goodbye, Mr Chips* (2002) and *Midsomer Murders* (2003).

In 2007, Henry played a small role in the big screen adaptation of *Stardust*, starring alongside the likes of Claire Danes, Sienna Miller, Robert De Niro and Michelle Pfeiffer. In that same year, he would star in the role that launched him into Hollywood stardom. From 2007 to 2010, Henry appeared in the television series *The Tudors* as Charles Brandon, the best friend and right-hand man of King Henry VIII. The series was a period drama set in 1500s England, shown on American television channel *Showtime*. Henry credits the series as his big break into the American entertainment industry as the series was well received, winning an Emmy Award in 2008. From then on, he was in the running for bigger films such as Edward Cullen in *Twilight* and James Bond in *Casino Royale*.

In January 2011, Henry got his second big break – a *really* big one – winning the choice role of Superman in Zack Snyder's reboot titled *Man of Steel*. It was a dream come true for Henry, who grew up on stories of Superman, Iron Man and the X-Men. Henry revealed that when they were assembling the Superman suit, he tried on different prototypes of each component such as the cape, the belt and the outfit without the "S". As he was trying them on, he deliberately would not look in the mirror until he got the final complete outfit. When he finally put on the complete Superman costume and turned around to look at the mirror, he felt like it was the proudest moment of his life when he realized that he would play Superman.

Henry got to play the flying super-strong hero not once, not twice, but three times. The first film released in 2013 titled *Man of Steel* was a dark, ultramodern debut of Henry's Superman that gave a glimpse into Superman's home planet of Krypton. In his second film, Superman appeared alongside the brooding bat (Ben Affleck) in *Batman v Superman: Dawn of Justice* (2016). The biggest and latest instalment of the DC extended universe is this year's *Justice League* where every comic book fan's dream comes true seeing Superman, Batman, Aquaman, The Flash and Wonder Woman fighting alongside each other.

## The Superman workout

According to *Men's Fitness* magazine, Henry's superhero workout regimen involved CrossFit style training. This means a combination of aerobic exercise, body weight

exercises, plyometrics (a form of exercise to stretch and strengthen muscles) and Olympic weightlifting movements. One of Henry's trainers, Mark Twight, owns a "serious business only" gym that trains athletes, members of the military and actors. Mark Twight was also the trainer for the cast and stunt crew of the movie *300*, and the other cast members of *Justice League*. The gym is anything but cosy, having no television, no machines, no sofas or places to sit and no mirrors – a complete opposite of the leisurely gym environments that we normal folk are used to.

Henry described his training as not only a means to build muscles and fit into the costume, but a functional training to build his strength, endurance and athleticism. To achieve a body worthy of Superman, he adopted a workout routine that had four steps: preparation, bulking, leaning out and maintenance. He liked to remind his fans that he put in a lot of time and hard work into getting his physique. Occasionally, Henry posts clips of his workouts on Instagram accompanied with a motivational caption because he wants people to know that it does not happen overnight. According to him, the secret to his Superman physique is dedication, hard work and really great trainers. Henry credits his body building success to his two trainers, Michael Blevins and Mark Twight, who supported and guided him throughout his fitness journey.

In an interview with *Men's Fitness*, Michael Blevins explained Henry's bulking

up phase which required him to perform Olympic weightlifting movements. These weightlifting exercises involved lifting a barbell in a few warmup sets, slowly increasing the weight of the barbells until he is carrying the heaviest load he can hold with good form. Each routine should take him less than 10 repetitions to reach his maximum weight load. For example, he could do two reps at half his maximum weight, then another two reps at three quarters maximum load, and then a few more increased weight loads that build up to the heaviest barbell load that he can hold.

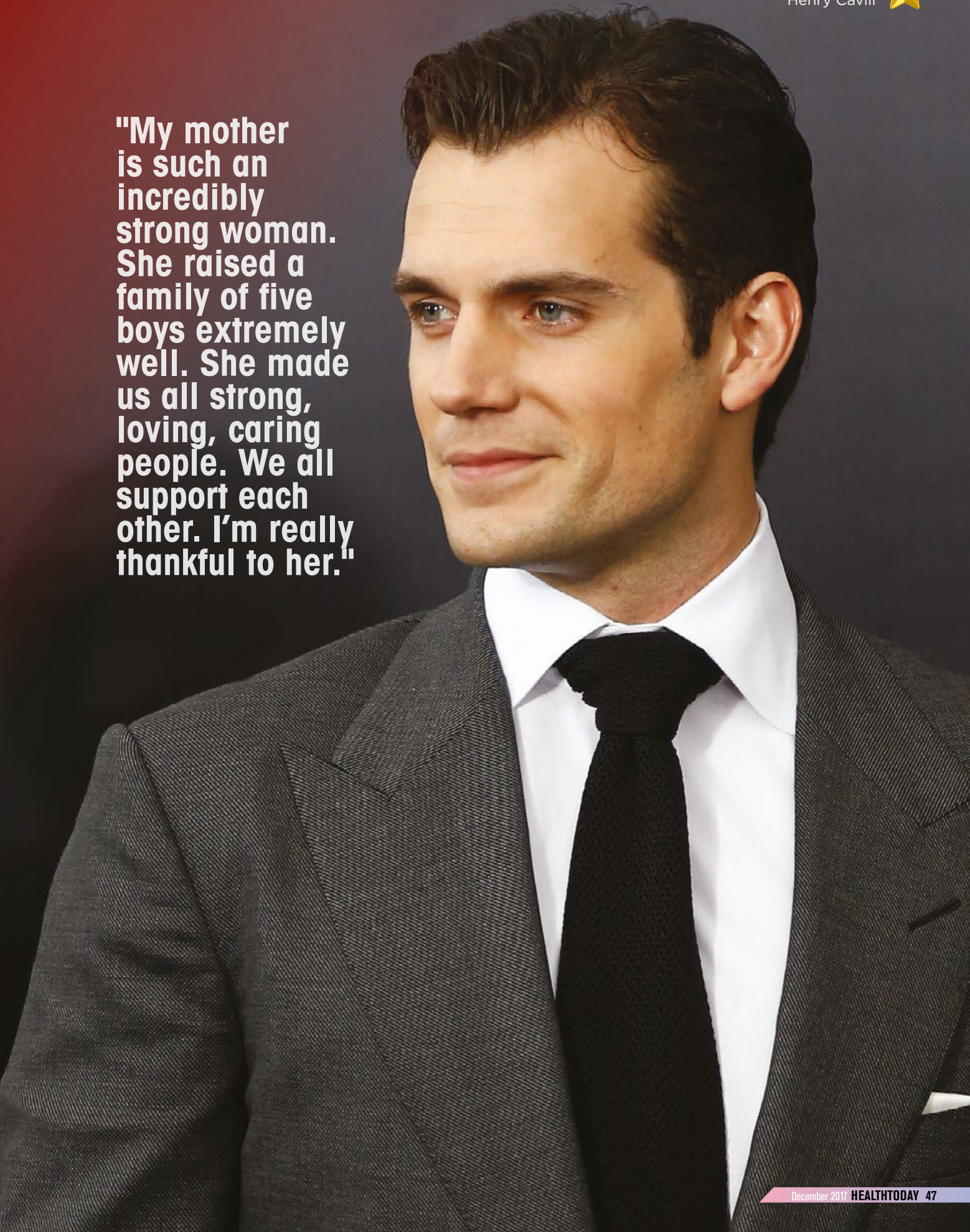
The weightlifting movements for the bulking up exercise varies, each one catered to target specific sets of muscle. One of the movements, the Hang Clean and Jerk, involves the athlete lifting the barbell over his head while jumping with one foot in front of the other. This exercise builds up the shoulders and back muscles, as well as the hamstrings and glutes in the lower half of the body. The front squat sees the athlete hook the barbell on his hands while his wrist and forearms are facing upwards. The athlete then squats down as low as he can while maintaining the arch on his back. The front squat trains the forearms, wrists and thighs.

Apart from weightlifting, Henry said that he does lots of rowing as part of his cardio training, and that the rowing movement affects the muscles of the whole body.

Check out Henry's workout regimen at this URL:



**"My mother is such an incredibly strong woman. She raised a family of five boys extremely well. She made us all strong, loving, caring people. We all support each other. I'm really thankful to her."**



[www.mensfitness.com/training/workout-routines/henry-cavills-superman-workout](http://www.mensfitness.com/training/workout-routines/henry-cavills-superman-workout)

## Super animal lover

Henry Cavill is big, strong and 6 ft 1 inch tall, but there is a soft and sensitive side to him as well. He says that his kryptonite is the people he loves and his dog. He owns an Akita named Kal, a fluffy medium-sized, bear-like dog he picked up in Arkansas, USA during a preproduction for *Batman v Superman*. Henry often posts pictures of his dog travelling with him to different filming locations, the latest being the set of the upcoming *Mission: Impossible 6*. Henry adorably tags these pictures with funny captions like the #TheTravelingBear.

Speaking of animals, Henry is the global ambassador for the Durrell Wildlife Conservation Trust. He takes part in the Durrell Challenge every year, including the one held in May this year. The wildlife park located in Jersey (Henry's hometown) hosts a 13km running challenge which Henry participates in. He explained his passion for conservation by sharing that when he was young, he was not the most popular or outstanding kid in school; instead, he was rather quiet and reserved. Now that he has found fame playing the most well-known superhero on screen, he wants to make a difference by speaking up for the animals that a lot of people still don't know about. He said, "These animals are not big, fantastic, popular

species but they are very important to the ecosystem. It would be a shame for these animals to be gone." Durrell Conservation houses critically endangered species like the ploughshare tortoise, black lion tamarin and the Saint Lucia amazon parrot.

## A big heart

Last year, Henry made the dreams of two children,

to raise funds for the Devon Air Ambulance Trust and The Royal Marines Charity by taking part in the 10k courage race, part of the Commando Challenge. It was an endurance course with obstacles such as the Sheep Dip, Crocodile Pit and Smartie tubes. If anyone was wondering, Henry has shared that if he had not become an actor, he would have

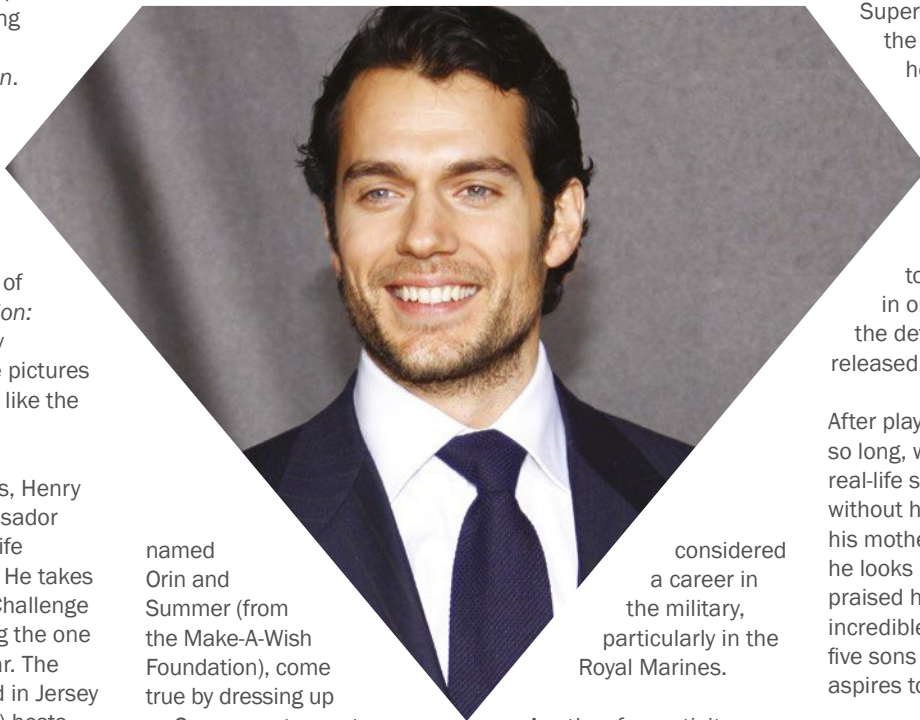
## What's next for Superman?

Henry's first Superman movie, *Man of Steel*, gave the audience an in-depth picture of the history of Superman and who he really is. The second film, *Batman v Superman*, saw Superman making the ultimate sacrifice. Henry explained that the previous two movies were necessary for character build-up, so that when

Superman returns in the *Justice League*, he reappears in his truest form. Finally, we get to see the Superman who is confident, joyful and full of hope. Henry is set to play the iconic hero in one more film, but the details have yet to be released.

After playing a superhero for so long, when asked who his real-life superhero is, Henry without hesitation describes his mother as the person he looks up to the most. He praised his mother for her incredible strength in raising five sons and has said he aspires to be like her.

Apart from Superman, Henry starred alongside Armie Hammer in the colourful action spy-comedy film *The Man from U.N.C.L.E.* released in 2015. He is also working on a psychological thriller, *Nomis*, scheduled to hit the cinemas in 2018. He will also be appearing in the highly anticipated spy movie, *Mission: Impossible 6*, which also stars Tom Cruise, set to release in mid-2018. For now, catch him and cheer him on at your local cinema in the movie *Justice League*. **HT**



named Orin and Summer (from the Make-A-Wish Foundation), come true by dressing up as Superman to meet them. He cheekily posed for pictures with the kids, with the rest of the Justice League in the form of life-sized cutouts.

Henry is also the ambassador for The Royal Marines Charity. His strong ties to the Royal Marines stem from his brother, Lieutenant Colonel Niki Richard Dalglish Cavill, who served in the British Royal Marines and was awarded an MDE (member of the Order of the British Empire) for his service in Afghanistan. Henry helped

considered a career in the military, particularly in the Royal Marines.

Another fun activity Henry has done for charity was a fundraising competition for the Royal Marines Charity. The prize was a ride on the London Eye where the winner got to have champagne with Henry while enjoying London from a bird's eye view. The charity is dedicated to providing the best possible support for the Royal Marines, their families, veterans and cadets. It helps Marines and their families get through injuries, illnesses and transitioning into civilian life.



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# Everybody can *swim!*

Swimming is a great and fun way to exercise that suits almost everyone. Its low impact nature makes it the ideal workout for the elderly, pregnant ladies and even people who have suffered injuries. Swim instructor, Jacqi Lum, tells us how to make the most of your swim.

Words **Hannah May-Lee Wong**

## **Tell us about yourself. When did you start swimming?**

My name is Jacqi Lum Foong Yee. I am a qualified swimming instructor and coach. I run my own swimming academy called the Nemo Swimming Academy. I also teach swimming at an international school. I started swimming when I was five years old. Ever since I was young, I had a natural affinity with water. In my childhood, I loved playing in the pool with my sister.





## How did you qualify as a swim instructor?

When I was in my 20s, I took up a swimming instructor course in my hometown. Then I completed a course from the Amateur Swimming Union of Malaysia (also known as Persatuan Renang Amatir Malaysia (PRAM)), qualifying me to train competitive students at state and national level. After that, I got myself certified as a life-saving instructor by PRAM and the Life Saving Society of Malaysia. I have also been accredited by the WABC (World Aqua Baby Congress) where I was trained to teach babies six months old and above.

## How long have you been teaching?

I have been teaching for around 20 years. I started my academy around 2005. I am both a swim instructor and a swim coach.

## What is the difference between a swim instructor and swim coach?

As a swim instructor, I teach children five years old and upwards to swim. As a swimming coach, I train students at competitive levels. Some of my students have enrolled themselves in competitions and even won medals. Winning is not everything, but when some students unexpectedly win, it gives me a sense of motivation. But ultimately, even if you don't win, it is still a good experience.

## What does it take to be a competitive swimmer?

You'll have to be trained, mentally strong, determined and disciplined.

## What are the health benefits of swimming?

Swimming gives overall good health, improves flexibility, helps weight control and even



improves mental health. It is an especially good exercise for pregnant ladies and people with back problems as it is a low impact exercise. Asthma patients benefit lots from swimming because it provides good breathing techniques. People with injuries who still want to exercise can do so by running in the water.

## How about weight loss by swimming? Which stroke do you recommend?

If you want to burn some calories, I recommend swimming for 30 minutes non-stop. The breaststroke can burn 300-400 calories. The front crawl is also good for calorie-burning because it is a lot like jogging. The butterfly stroke takes up a lot of strength as it uses all parts of the body. It will be difficult to do the butterfly stroke continuously for half an hour, so I suggest alternating it with other strokes.

## Can you give us an example of a calorie-burning workout?

I recommend mixing it up with different strokes. For example, you could do 50 strokes of the butterfly style, then continue with freestyle, take a 2-minute rest and repeat this six to 10 times. This really helps build up your heart rate and burn calories. Best of all, although you've had a great workout, you don't feel it because it is a low impact aerobic exercise that is easy on the joints. Additionally, being in the pool keeps you cool. After your swimming exercise, your resting heart rate, blood pressure, cholesterol and blood sugar levels will lower.

## How about days when you don't feel like working out?

On those days, you could do some aqua-aerobics. Put on some music and do aerobic





## How to warm up and cool down properly

### Warm up

- Warm up just before starting your workout.
- Focus on the muscles you will use and lightly exercise them.
- Swim slowly and leisurely first, and then increase your swim speed gradually after a few laps.
- Do some stretching after your warm up (when your muscles are already warm).

### Cool Down

- Towards the end of your workout, continue the same swim strokes but at a slower, more relaxed pace for about five minutes or so.
- Cool your body by floating on your back, doing light kicks.

exercises as you would on land. Sometimes, you can do half an hour of aerobics and another half an hour doing the breaststroke or freestyle.

## How should you warm up and cool down before and after swimming?

Just like any other workout, warming up before your exercise routine and cooling down after is important. You should always do warm-ups that are related to the exercise you plan to do for the day. For example, if you are doing long-distance

freestyle and breaststroke, you should spend the first half an hour doing a few laps of freestyle, then a few laps of breast stroke, and spend some time holding on to the floating board between your legs. You can also do a few laps with just the leg work of the freestyle kick and the breaststroke kick, then you move on to just the arms. You should end your exercise with a cool down, which is floating on your back resting and kicking your legs.

## How long does it take for a person to learn how to swim?

It usually takes four weeks to be able to master one stroke. I teach students once a week for an hour per session. It also depends on the individual as some people are more comfortable in the water than others. There are some people who are too afraid to even put their head in the water. I take more time getting those students accustomed to the water before I teach them how to blow bubbles in the water. The proper technique for blowing bubbles is to take a deep breath through your mouth and exhale through your nose with your head in the water, slowly releasing bubbles. I then move on to teaching my students paddling, which is kicking underneath the water to propel the body forward. This should not involve too much splashing.





## Jacqi's tips for water safety

- Use a life jacket if you do not know how to swim
- Swim with a buddy if you are not yet confident in the water
- Do not drink the pool water
- Enter the water feet first if you are not sure of the depth
- Make sure the first aid kit is fully equipped
- Make sure somebody around the pool knows CPR

## Jacqi's tips on water safety for children

- It is best to enrol every child for swimming lessons at an early age
- Remove toys from the pool as toys attract young children
- Empty portable pools when not in use as even one inch of water is enough to drown a baby
- If you have a pool at home, build a fence around it to prevent young children from falling in

## What is the ideal age to start your child on swimming lessons?

Five years old is best as this is the age when a child begins to understand more. However, I do have lessons for babies as young as six months old, together with their mothers.

## How do you give swim lessons to babies?

Their mothers must be present during the lessons. I like to place two or three babies on big floating mats to get them used to the water. We also try to teach them how to hold their breath, submerge and float on their backs.

## Is there anyone who should not swim?

In my opinion, everybody can swim. I have even

taught special children, such as those with Down syndrome. The most challenging aspect is their reduced mental focus, but with time and patience, along with the cooperation of their parents, they can eventually learn how to swim. Even the elderly can swim. Although you lose flexibility as you get older, many of the elderly enjoy the buoyancy of water. Once they get into the water, they feel lighter and they like to walk around the pool. I do not overwork my older students though. They'll let me know when they get tired.

## How do you handle students who are afraid of the water?

I have a few students who have had drowning experiences. The key is

communication and gaining their trust. Before the lesson, I will have a conversation with them to get to know them. We walk around the pool and do some exercises. Once they are comfortable with me, I will guide them into the pool, holding their hand and we walk around in the pool. Adults can hop or run inside the water. As for children, we will first have games outside the pool, and then we have toys and games inside the pool. With these students, building rapport is key.



## How many students do you teach per class?

It depends on the age. If the students are very young, they need be accompanied by their parents. For older children, we have a maximum of four to six students per class.

## Here's a question many people want to know: why do calf cramps occur and how can we avoid them?

Calf cramps tend to happen to those who have not warmed up properly. That is why it is important to do proper warm up. Stretching the joints – ankles, wrists, shoulders and knees – before your exercise regimen is essential.

## Any final words of advice?

I think everybody, young or old, should learn how to swim. Swimming is the best form of exercise for any age and is a necessary survival skill for everyone. **HT**

## How much do I burn?

Swimming is good exercise. But how many calories you burn depends on the duration of the swim, type of stroke you do and your weight. Here are estimates of how much you would burn in an hour:

1 hour of exercise	Weight of person and calories burned		
	160lbs / 72.5kg	200lbs / 91kg	240lbs / 109kg
Water aerobics	402	501	600
Swimming laps, light or moderate	423	528	632
Swimming laps, vigorous	715	892	1068

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# Aloft and Above!



## Meet Our Speakers

**Dr Peter Chong Kuok Siong**  
Consultant Eye Surgeon

All eyes were on stage as Dr Peter Chong brought attention to dry eye disease, a common yet bothersome condition that affects all of us at some point. He shared helpful information such as how this disease comes about and how we can treat it.



**Professor Dr Tan Maw Pin**  
Consultant Geriatrician

Professor Dr Tan Maw Pin has been contributing her insight to *HealthToday* on matters related to geriatric health, and now we got to meet her face-to-face as she discussed how we can stay healthy and remain independent as we age.



**Associate Professor Dr Ong Teng Aik**  
Consultant Urologist

He's back, ladies and gentleman! The ever-hilarious Assoc Prof Dr Ong was, in his own words, glad to be not talking about sex for once. Instead, he addressed a common but rarely discussed issue: nocturia, or the urge to urinate frequently at night.



**Health in the City 2017 was better and more entertaining than ever! If you missed this event, don't worry – we have the scoop right from the front row. (PS: join us next year!)**

Words **Lim Teck Choon** and **Hannah May-Lee Wong**

**A**lmost 300 readers of *HealthToday*, both new and regular, marked November 12, 2017 on their calendars as a Sunday to look forward to. Health in the City was back for another year, and while the festival format was familiar with long-time regular “HiTCers”, there was no shortage of surprises and fun in store.

Opting for a change in scenery and atmosphere, the organisers held Health in the City in a more intimate venue, with the

hope of fostering better audience interaction and participation. Despite the ‘newness’ that greeted long-time members of the audience (some of whom are regular ‘HiTCers’ every year), the festive cheer of Health in the City remained intact and palpable.

## We're Aloft Now!

This year, Aloft Kuala Lumpur Sentral was the venue. We picked this place due to its convenient location – right in the middle of the transportation hub connecting buses, LRTs, monorails and taxis – and ample parking spaces.



### Dr Fang Seng Kheong

Consultant Ophthalmologist & Eye Surgeon, Glaucoma Specialist

Ever wondered why glaucoma was considered the 'sneaky thief of sight'? Dr Fang Seng Kheong, an expert on this disease, took the stage to share details and useful tips on everything glaucoma.



### Dr Prem Kumar Shanmugam

Psychologist & Psychotherapist

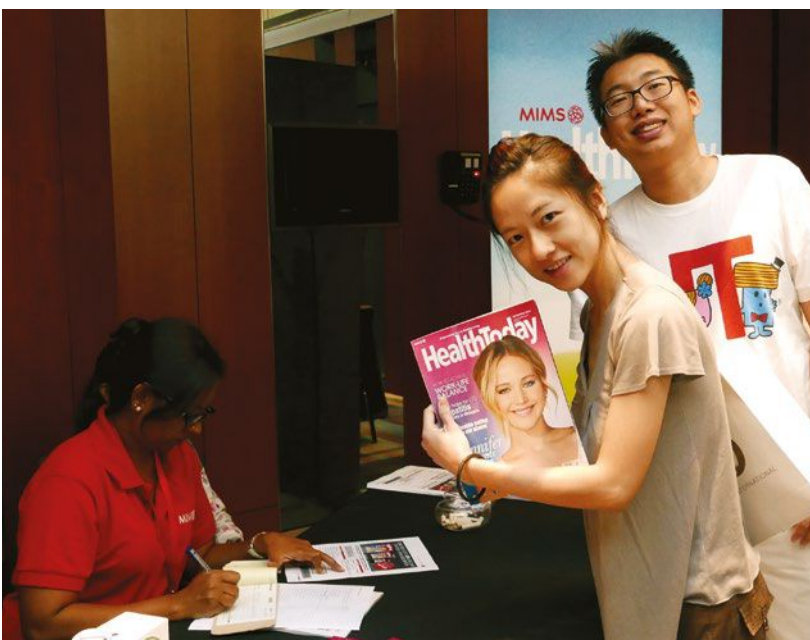
Dr Prem flew in from Sabah just to talk about an important but rarely discussed matter: addiction in the family, and what we can do to prevent it from happening as well as how we can help the affected family member.



## TOP 3 REASONS WHY HEALTH IN THE CITY IS A MUST-ATTEND EVENT

### #1 It's a Carnival!

The sponsor booths always have goodies and special discounts to go along with their fascinating wares and services, and HITCers can't get enough of them.



### #2 Everybody Gets to Have Fun

From fun educational talks to games (and a group Zumba event too!), there were ample opportunities to sit back, laugh, make new friends and, of course, take many selfies!



### #3 Goodies and Prizes Galore!

Thanks to our sponsors, there were many opportunities to win prizes throughout the day. Of course, we can't forget the famous Health in the City goodie bags that can contain anything from supplements to herbal drinks and so much more.



## SEE YOU NEXT YEAR!

If you attended Health in the City 2017, we hope you had as much a good time as we did, and we hope to see you again next year.

If you haven't, well, there's always next year!

To be among the first to find out when Health in the City 2018 is going to happen, visit our Facebook at [www.facebook.com/HealthToday/](http://www.facebook.com/HealthToday/) and give us a 'Like'. **HT**

# Dry Eye Disease – All That You Need to Know

Everyone gets dry eye at some point in life. What exactly is dry eye disease, and how is it treated?



**Dr Peter Chong Kuok Siong**  
Consultant Eye Surgeon

**O**ur eye contains a structure, located around the lateral end, called the lacrimal gland. It continuously releases a fluid that we all know as tears, in order to lubricate and moisten the eye. These tears form a watery layer over the eye, called the aqueous layer.

This aqueous layer is sandwiched by an outer oily layer and an inner mucous layer. Together, these three layers form what we call the tear film. The tear film has four functions:

1. Wash out dust and other substances
2. Bring oxygen and nutrients to the eyes
3. Eliminate bacteria at the

4. Smoothen the eye surface or ocular surface

## Dry Eye Disease

Dry eye disease occurs when problems crop up which prevent the tear film from performing these functions. There are two types of dry eye diseases:

- Dry eye due to reduced tear production, or aqueous-deficient dry eye (ADDE).
  - Dry eye due to increased evaporation of tears from the eye surface, or evaporative dry eye (EDE).
- It is possible for someone to have a mix of both types of dry eye diseases.

Symptoms include:

- Dryness in the eye
- Gritty sensation in the eye

- Reddened eyes
- Your eyes get tired easily
- Tears for no reason
- Some discomfort in the eyes
- Pain in the eye
- Heavy feeling in the eye
- Light sensitivity
- Blurred vision
- Itchy eye

If you have five or more of such symptoms at the same time, there is a

possibility that you have dry eye disease.

## Treating Dry Eyes

The first line of treatment is eye drops, or 'artificial tears'. They can be purchased from the pharmacy. There are two types of eye drops that can be helpful:

- Eye drops containing hyaluronic acid.
- Cationic emulsion eye drops. **HT**

## The following groups are more at risk of dry eye disease

- Computer and smart phone users
- People who spend significant amounts of time every day in air-conditioned environment
- Contact lens users
- Frequent airplane travelers and travelers to countries with dry and windy climate
- Drivers who are constantly on the road
- Females and older people
- Diabetics and glaucoma patients
- People who have undergone eye surgeries



# Healthy Ageing

**Everyone ages. It's an inescapable fact of life, just like death and taxes. No matter how old we are, though, we can still take measures to stay healthy and remain independent.**



**Professor Dr Tan Maw Pin**  
Consultant Geriatrician

**T**here are several official definitions for 'healthy ageing' from various health and socio-economic organisations. Prof Dr Tan personally prefers the definition from the Workshop of Healthy Ageing 2001, which stated the following:

Healthy ageing is described as a lifelong process optimising opportunities for improving and preserving health and physical, social and mental wellness, independence, quality of life and enhancing successful life-course transitions.

## Why should we be concerned?

Our society is changing. Back in the old days,

families were larger, hence one could depend on immediate family members to care and support the elderly. These days, however, families are smaller, and it is not uncommon for family members to live further apart than before.

Data gathered by various organisations found that as more people age every year, the number of younger people capable of supporting them declines. The decline is especially steep in developing countries such as Malaysia compared to that in more developed countries.

Therefore, one can no longer take for granted that someone will be there for care for the elderly. Instead, we should take steps to

ensure that we stay healthy for as long as possible, so as to remain independent and self-sufficient.

## How do we do that?

- Eat healthy and balanced meals, cutting down on sugar, salt and fats while upping our intake of fruits and vegetables.
  - Exercise regularly. Prof Dr Tan especially recommends tai-chi.
  - Have a healthy social network by making new friends and staying in touch with current ones.
  - Keep the brain alert and healthy by constantly learning new things. Prof Dr Tan recommends the elderly to use smartphones and tablets (if they don't already) as
- these devices have many functions and applications that can work the brain as well as allow the users to keep in touch with others via social media.
  - Be independent for as long as possible. As long as we are still capable of doing things on our own (such as driving, doing housework, etc), we shouldn't let our age stop us from living a self-sufficient life.
  - Be financially prepared for health needs in the future. Save a portion of our salary while we are still working, so that when we are no longer working, we still can afford good medical care. Insurance will also be useful for this purpose. **HT**

# Mind Your Own Bladder

If you wake up more than once a night to use the toilet, you have nocturia. But fear not, once you know the cause, nocturia can be easily treated.



**Assoc Prof Dr Ong Teng Aik**  
Consultant Urologist

**T**he definition of nocturia set by the International Continence Society is “the complaint that a person has to wake up from sleep at night one or more times to urinate”. While the problem may seem trivial, constantly waking up to urinate at night disrupts your sleep cycle and in turn will affect energy levels throughout the day. As the problem persists over time, not getting enough sleep will lower your overall quality of life. The message from Assoc Prof Dr Ong is that nocturia can be diagnosed and properly treated.

## More common than you think

- The prevalence of nocturia in men aged 50-59 is 66 percent and rises to 91 percent in men over 80.
- In women, the prevalence of nocturia

is 58 percent in women aged 50-59 and 72 percent in women who are 80 and above.

A study conducted in 2006 which involved 418 male participants found that:

- 54.1 percent of participants aged 40-49 had nocturia.
- 82.1 percent of participants aged 70 and above had nocturia.

## The different types of nocturia

A normal sleep cycle should last six to eight hours without having to wake up to void (pass urine). But nocturia can be categorized based on their different causes:

**Polyuria:** Producing more than 2.8 litres of urine a day

**Nocturnal polyuria:** Your body produces a large volume of urine at night

**Low nocturnal bladder capacity:** Your bladder is not able to hold urine at night

**Mixed nocturia:** A combination of nocturnal polyuria and low nocturnal bladder capacity

**Sleep disorder:** Poor sleep caused by insomnia, obstructive sleep apnoea or other sleep disorders may also cause you to frequently wake up at night.

According to Assoc Prof Dr Ong, the causes of nocturia can be broken down into two categories: urological and non-urological. The urological causes could include benign prostatic hyperplasia (BPH), overactive bladder, incomplete bladder emptying, urinary tract infection and more.

Non-urological causes could include renal failure, diabetes, obstructive sleep apnoea, heart failure, high blood calcium or excessive water intake. Sometimes, the cause is unknown. It is important to get to the root of the problem as the doctor

will plan your nocturia treatment based on the cause.

Here are a few things your doctor will do to find the cause of your nocturia:

- Take down your medical history with focus on potential causes
- Perform a medical examination
- Have you complete a frequency volume chart (FVC) or a bladder diary
- Order a urinalysis
- Do a urine culture

If nocturia has been bothering you for more than several days, make an appointment with your doctor for further investigation. Your doctor may prescribe medication or advise you to make some lifestyle changes. Simple measures such as limiting caffeine intake, drinking less water at night or timing your diuretic medications (if you take any) may help with your nocturia. **HT**



# Beware the Sneaky Thief of Sight

**Glaucoma often shows no signs or symptoms until it starts stealing away its victim's sight. Regular eye screening is recommended for early detection, especially if you are advanced in age or have a family member who has it.**



**Dr Fang Seng Kheong**  
Consultant Ophthalmologist &  
Eye Surgeon, Glaucoma Specialist

**G**laucoma is often called the sneaky thief because it can take away something very precious from us without warning. If left untreated for too long, glaucoma can steal away our sight completely. Glaucoma is silent and often goes undetected until the damage is so extensive that it is too late. According to Dr Fang, it is a condition whereby the optic nerve gets damaged at the point where the nerve meets the eye, most commonly because of an increase in intraocular pressure.

Glaucoma happens when there is a build-up of fluid in the eye cavity. As fluid collects in the eye, pressure

is exerted on the interior walls that presses onto the optic nerve. The more pressure there is, the more damage it causes to the optic nerve. The damage will lead to loss of vision and over time, may lead to blindness.

Here are factors that may cause increase of fluid in the eye:

- Ageing
- Inflammation or infection of the eye
- Cataracts
- Diabetes
- Retinal vein blockage
- Use of steroids
- Genetics (if a member of your family has it, it is more likely that you may get it too)

Unfortunately, unless you have acute angle closure

glaucoma (when your iris blocks the drainage angle in the eye, causing a sudden increase in pressure), there usually are no signs or symptoms that something is wrong. A change in vision field is a sign of glaucoma, but it is rarely noticed. The most effective way of checking for glaucoma is through screening or a routine eye checks.

Your ophthalmologist might do the following tests to screen for glaucoma:

- Tonometer measurement of intraocular pressure
- Vision field test
- Optic disc examination and photo and optical coherent tomography (OCT) to detect optic disc and nerve fibre layer changes

- Gonioscopy to assess the drainage angles in the eye

There is unfortunately no cure for glaucoma, so patients go through lifelong treatment with the aim of preventing blindness and improving quality of life. Treatment options include:

- **Eyedrops** which help relieve pressure by reducing aqueous production or increasing outflow of fluid. Plenty of options are available; your ophthalmologist will prescribe the one most suitable for you.
- **Laser treatments.**
- **Surgery** for relieving the pressure build up in the eye. **HT**

# Families and Addiction

Dealing with addiction in the family is never easy. Dr Prem Kumar shares how addiction is treated via the bio-psycho-social-spiritual model and encourages family members to participate in the therapy programmes too.



**Dr Prem Kumar Shanmugam**  
Psychologist & Psychotherapist

**W**hat is an addiction? Is addiction a flaw in willpower? A disease? A lack of moral values, perhaps? According to Dr Prem Kumar Shanmugam, addiction is a biopsychosocial-spiritual disease that needs to be treated from all angles.

Addiction is a complex problem that affects the reward system in the brain. When a person takes an addictive substance, a surge of dopamine (the 'feel good' chemical) releases in the brain. But as time goes by, the addict realises that the amount of substance needed to get that same surge of dopamine increases. Studies show that drug and alcohol addicts have decreased dopamine receptors and decreased dopamine release in the brain. This leads to loss of control, compulsive substance intake and a sense of being unaware of their addiction.

## The traits of an addict

**Abstinence:** Inability to abstain from the substance  
**Behaviour:** Impairment of behavioural control  
**Craving:** Increased hunger for the substance  
**Diminished self-awareness:** Lessened recognition of significant problems with one's own behaviour and interpersonal relationships  
**Emotional response:** Displaying emotional responses that are dysfunctional

## What are the biopsychosocial-spiritual factors?

**Biological:** Addiction could stem from genetic factors. Some people could be genetically predisposed to having addictive behaviours. Medical, fitness and nutritional management as prescribed by a healthcare professional will help in this aspect.  
**Psychological:** Addicts tend to have a motivational system

that is out of balance. They also could have personal and environmental factors that encourage them to develop compulsivity and/or have psychiatric disorders that increase their risk in developing addiction. Personality profiling and mental health evaluations help find the best treatment programme for the addict.  
**Social:** Peer pressure or family environment that encourages drug abuse or excessive alcohol consumption leads to a person being influenced into developing addiction. This aspect is treated by group therapy, family workshops, recovery journaling and more.

**Spiritual:** Having a belief system like feeling a sense of worthlessness, thinking that his/her needs will never be met or thinking that the addiction is a priority may lead to addiction. Meditation, mindfulness training, yoga, reflective exercises and other similar programmes help readjust the addict's core beliefs.

## How family members can challenge addiction:

- Accept that you cannot change the addict
- Let them know how you feel
- Use "I statements" like "I feel scared you will get hurt" or "I am worried for you"
- Do not enable them by giving them money or paying their bills
- Be supportive of them, especially in seeking treatment and therapy
- Connect with other families who are going through similar situations

## Family involvement is important

Participation of family members in therapy sessions is beneficial because it is known to be associated with better treatment outcomes and compliance for the addict. It is also a good opportunity for family members to get a clearer picture of the recovery programme and how it works. **HT**





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# MENOPAUSE IS NOW ONLINE

Keeping up with the times, the Obstetrical & Gynaecological Society of Malaysia (OGSM) has launched Menopause Facts, a comprehensive and informative website dedicated to Malaysian women.

Words Hannah May-Lee Wong



(from L to R): Brig Gen Dato' Dr T Thavachelvi S Thangarajah, Dr Sharmina Kamal, Prof Emeritus Dato' Dr Nik Mohd Nasri Nik Ismail, Dr Thaneemalai Jeganathan (President of the Obstetrical & Gynaecological Society of Malaysia (OGSM)), Dr Premitha Damodaran, Dr Ho Choon Moy (President of the Malaysian Menopause Society) and Dr Raman Subramaniam (OGSM Past President).

October marked the month of breast cancer awareness, but World

Menopause Day, which falls on October 18, is often less celebrated. Menopause is a topic which may be difficult or even embarrassing to talk about, but it need not be this way. In conjunction with World Menopause Day, the Obstetrical & Gynaecological Society of Malaysia (OGSM) proudly presented Menopause Facts ([www.menopausefacts.org](http://www.menopausefacts.org)), a pioneer website designed for women to hear the voices of Malaysian healthcare specialists and for easy access of Malaysian statistical data.

Launching the website, Dr Thaneemalai Jeganathan, President of OGSM shared about the relevancy of the website in view of our ageing population. He stated that, "By 2030, 15 percent of the Malaysian population will be over 60 years of age. With

longer life expectancy, it is important to remember that a woman may spend a third of her life in menopause."

"Awareness of health issues when approaching menopause (such as risk of developing chronic conditions like cardiovascular disease and osteoporosis), helps a woman prepare herself for this phase of her life," he added.

The mean age of menopause in Malaysian women is 50.7 years of age, with a high percentage of those women still working and contributing to society. Many women having menopause experience symptoms such as hot flushes, fatigue, disrupted sleep, irritability and even heightened cholesterol levels yet do not seek help.

Dr Premintha Damodaran, OGSM Menopause Sub-Committee Chairperson and the person mostly responsible for the

#### Key features of the *Menopause Facts* website:

- In-depth and updated information on menopausal symptoms, treatment and therapeutic options.
- Statistical data and facts from clinical studies undertaken in Malaysia.
- Videos and podcasts featuring healthcare professionals from Malaysia and around the world.
- Online tools for assessing the risk of developing breast cancer, heart diseases, stroke and bone fractures after menopause.

development of *Menopause Facts* shared: "Menopause happens to all women. It's a time when a woman's ovaries stop producing oestrogen and progesterone, signalling the end of her menstrual cycle. Unfortunately, menopause has had bad press; women dread the thought of it and imagine that once menopausal, they are going to be old and unhealthy."

"With *Menopause Facts*, we want to send a message to women that your menopause should firstly be fully understood

and then embraced. With education at the forefront, *Menopause Facts* was conceived as an online resource for Malaysian women to find answers they desperately need. It is the first of its kind for the public, and contains locally relevant research and data on menopause and outlines treatment options available."

If you are a woman approaching, currently experiencing or beyond menopause, head over to the website at [www.menopausefacts.org](http://www.menopausefacts.org) to find out more. **HT**





# Manuka Honey

Given by Nature, Proven by Science



Manuka honey is the only honey that is graded for its medicinal properties. But not all Manuka honey is able to deliver the promising results as claimed on the label due to lack of a scientifically reliable and verifiable testing system measuring its medicinal activity.

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# INNOVATING HEALTHCARE

## for a **Better Tomorrow**



**From data collection to video games, there was much interesting ground to cover at the recent Malaysian Innovative Healthcare Symposium 2017. *HealthToday* reports from the front row.**

Words **Lim Teck Choon**

**T**he Malaysian Innovative Healthcare Symposium (MIHS) is a yearly event organised by the Young Pharmacist Chapter of the Malaysian Pharmaceutical Society to highlight, promote and encourage brainstorming of ideas for innovations in the local healthcare sector. The second MIHS took place on October 7 in Taylor's University Lakeside Campus, with the intriguing theme 'Amalgamation of Technology for Disease Management'.

The publisher of *HealthToday*, MIMS, is one of the sponsors, so naturally Saras Ramiya and myself manage to get ourselves invited to the event. The audience was made up mostly of fresh-faced millennials, many of whom are from the pharmaceutical sector, and if we felt a little out of place (both of us belong to the previous generation), their energy and enthusiasm for the upcoming talks were infectious and we were soon swept up in the talks and heated roundtables of the day.



### **Current Prospects and Potential Growth of Healthcare Technologies**

Natasha Gulati, an industrial manager in digital health, pointed out that mobile apps and horizontal platforms are empowering patients to communicate more closely to healthcare professionals from all over the world. "In a way, it's like a travel agent," she said, "only we're dealing with healthcare." She added that such innovations will allow health tourism to flourish in our country.



Looking ahead, pharmaceutical companies are working closely with healthcare professionals to create means to allow diagnosis of diseases to be imitated even if the patient is in a different country from the healthcare professional. Further on, it is possible that one day healthcare will know no borders, allowing healthcare professionals to better diagnose, monitor and tend to the needs of their patients regardless of physical location.

## From Big Data to Big Impact



Prof Leong Chee Onn (Head of the Center for Cancer and Stem Cell Research, International Medical University), Assoc Prof Dr Liew Su May (Department of Primary Care Medicine, Faculty of Medicine, University of Malaya) and Vincent Ong (Cloud Analytics Architect, IBM) joined moderator Cedric Chua of Hacking Health in discussing the limitations of current record keeping and storage in the healthcare sector, and how technology can overcome these limitations. It is heartening to know that IT professionals are constantly collaborating with healthcare professionals

to create custom solutions tailored to the needs of the industry.

Already cloud computing allows healthcare professionals to retrieve medical records and other important data from anywhere (provided that they have the necessary credentials to access such data, of course!). However, another dilemma arises from this. Where do we keep so much data? Do we have the technology to ensure that such data remain safe over time? What about privacy concerns, or the possibility of someone hacking into the data? We don't have all the answers yet, but the technology is fast evolving to become safer and more sophisticated, so who knows, we will have them faster than we'd think!

## Gamification of Continuous Professional Development for Healthcare Professionals and Patient Care



Ivan Boo, President of the Serious Games Association of Singapore, also works closely with the Ministry of Health Singapore as well as various international organisations to develop video games for the healthcare industry. He was in Malaysia to give us an interesting insight into the use of video games in healthcare. Serious games as he put it, are developed in a manner similar to games meant for entertainment, but the chief purpose is to educate rather than to make a profit.

He showed off a few remarkable examples of such serious games. One of them was a simulation game for nurses, which Ivan Boo had a hand in developing, that allowed players to resuscitate a patient. Unlike a manual training course, this game offered many possible outcomes depending on the player's actions – the player has more chances to succeed or fail, in other words. Such interactive learning was not only effective, players who passed with flying colours also insisted on playing some more! Another example he

shared involved the use of a game that required movement – this game, installed in a community hall in China, actually inspired the locals both old and young to be more physically active!

## Transforming Healthcare Delivery for a Better Tomorrow



Assoc Prof Dr Wong Chee Piau (Lead, Telemedicine Cluster, Monash University Malaysia), Dr Khor Soo Beng (Vice President of Research and Programme Management, CREST) and Dato' Chevy Beh (founder and CEO of BookDoc) along with Mark Cheong from Monash University Malaysia ended the evening with a roundtable discussing the many ways entrepreneurs and healthcare professionals can work together to disrupt the current model, for innovation as well as growth of the healthcare sector. Dato' Chevy Beh's BookDoc venture was hailed as a shining example of such disruptor technology, allowing members of the public to have greater access to healthcare professionals. It was hoped that members of the audience will be inspired to develop their own disruptive models for future betterment of the healthcare sector. **HT**

## Start the Day Right with a Healthy Breakfast



L-R: Yip Siew Ping (Diabetes Care Manager, Roche Diagnostics Malaysia), Dato' Hj Rahimah Dato' Hj Ahmad (General Secretary of Diabetes Malaysia), Yang Wai Wai (Clinical Psychologist, UKM Medical Centre), Foong Pui Hing (Principal Dietitian from the Dietetics and Food Services Department, National Heart Institute), Dr Feisul Idzwan Mustapha (Consultant in Public Health, Non-Communicable Disease Section, Disease Control Division Ministry of Health), Prof Datuk Dr Ikram Shah Ismail (President of Diabetes Malaysia), Emilyn Loo (Business Executive Officer, Nestlé Health Science), and Nirmalah Thurai (Executive Director, Group Corporate Affairs, Nestlé Malaysia).

November saw Nestlé Health Science joining forces with Diabetes Malaysia to commemorate World Diabetes Day through the launch of 'Start Right. Stay Right.' campaign. They hope to promote starting the day with a healthy breakfast as one of the key components of good diabetes management. The campaign was launched by Dr Feisul Idzwan Mustapha, Consultant in Public Health from the Non-Communicable Disease Section, Disease Control Division from the Ministry of Health and included a dialogue session involving expert speakers. Participants were also treated to a smoothie-making session, involving the use of Nestlé's NUTREN UNTUK DIABETIK as well as an energetic Zumba dance session. NUTREN UNTUK DIABETIK also pledged to give more than 8,000 healthy breakfast sets to Malaysians living with diabetes through their roadshow activities held at pharmacies as well as health care centres.

## Nasi Lemak for a Great Cause



L-R: Bryan Teo (Director of Sales & Marketing, Swiss-Garden Hotel & Residences Kuala Lumpur); Dato' Maznah Abdul Jalil (Honorary Treasurer, Malaysian AIDS Foundation) and Puan Sri Betty Saw (chef and food consultant).

Malaysia's very own cooking legend Puan Sri Betty Saw launched the second edition of her bestselling *Everything Nasi Lemak* cookbook in November by offering her culinary expertise in a star-studded charity dinner featuring – what else? – a multi-course *nasi lemak* menu. The Nostalgia Nasi Lemak charity dinner featured a selection of mouth-watering dishes curated by Puan Seri Betty Saw herself. Singer Bob Yusof and comedienne Joanna Kam were among those who provided entertainment alongside the good food. All proceeds from the tickets to the dinner as well as the sales of the cookbook will go to the Malaysian AIDS Foundation (MAF) for its women's HIV treatment, care and support programmes. This dinner was sponsored fully by the Swiss-Garden Hotel & Residences Kuala Lumpur.

## Run to the Beat

KL Sports City was rocked in November when 20,000 people attended the fourth edition of The Music Run™ by AIA Vitality. Unlike in previous years, this time around there was a new timed 10km track for Music Runners who wanted to challenge themselves further. In addition to working up a sweat while running the beat, participants were also treated to a pre-party performance by Kyoto Protocol, as well as a myriad of fun activities ranging from an on-ground carpool karaoke contest with Petron to massage stations by Tiger Balm, and a K-Pop dance challenge by The Face Shop.



Myrna Geronimo (CFO of Petron Malaysia) striking a pose with the Music Runners™ as they get ready to run through the 5km Sound Track.

## Insuring the Health of People with Diabetes

Allianz Life Insurance Malaysia Berhad recently launched Allianz Diabetic Essential, a medical plan especially for people with type 2 diabetes. Now, people with diabetes who are unable to obtain a medical plan have an option to turn to, while those with existing medical plans can top up their current coverage. This plan offers comprehensive medical coverage with a choice of four medical plans that will help cover the cost of hospitalisation and surgery, intensive care unit, obtaining a second medical opinion and more. Those seeking medical care beyond hospitalisation will gain access to outpatient treatment for cancer, kidney dialysis, dengue and enteric fever treatment as well as emergency accidental outpatient treatment.

It also offers health screening benefits with an annual HbA1c blood test, kidney function test, lipid profile as well as medical examination and full urine examination. Additionally, there will be annual premium discounts of up to 40 percent. Visit [www.allianz.com.my/allianz-diabetic-essential](http://www.allianz.com.my/allianz-diabetic-essential) for more information.



L-R: Joseph Gross (Chief Executive Officer of Allianz Life), Myrna Yu (Managing Director, Asia Pacific, Advance Medical) and Yeoh Eng Hun (Chief Strategy & Product Officer of Allianz Life).



**HealthToday**

Would like to wish our readers a

Merry  
*Christmas*  
and a  
Happy New Year



## Drink Milk, Move and Be Strong



L-R: Suraiya Syed Mohamad (Director of Health Education Division, the Ministry of Health), Pesol Md Saad (Deputy Director of School Management Division), Dato' P Kamalanathan (Deputy Minister, Ministry of Education), Saw Chooi Lee (Managing Director, Dutch Lady Malaysia) and Shamsidar Yahya Nassim (Public Affairs and Communications Manager, Dutch Lady Malaysia) with the Anugerah 3K primary school category winners.

At the end of October, winners of the Ministry of Education's Anugerah 3K 2017 were announced to much fanfare. This award was given to schools in recognition of their creativity, resourcefulness and team work in promoting healthy lifestyle habits among their school communities. Dutch Lady was a strategic partner for the health component of this year's award, with their 'Drink.Move.Be Strong' campaign officially integrated into the 3K programme. This year was a milestone year for the award, as the organisers introduced the award on the digital platform in the previous year only to see the number of entrants grow from 51 to 200 schools.

## Ready, Get Set... Grow!



L-R: Assoc Prof Dr Muhammad Yazid Jalaludin (Department of Paediatrics, UM Medical Centre), Ee Boon Huey (President and CEO, Merck Malaysia), Nihayah Ebni Hajar (Head of Library Services at Raja Tun Uda Library), and Dr Azriyanti Anuar Zaini (Department of Paediatrics, UM Medical Centre).

Dr Azriyanti Anuar Zaini and Associate Professor Dr Muhammad Yazid Jalaludin, both paediatricians from the Department of Paediatrics, University Malaya Medical Centre, were proud to launch *Ready, Get Set, Grow!* at the Raja Tun Uda Library, Shah Alam back in October. This book, packed with fun illustrations, is an educational resource for parents whose children are starting on growth hormone therapy. The book was sponsored and published by Merck Malaysia with the support of the Malaysian Paediatric Society and the Malaysian Endocrine and Metabolic Society. *Ready, Get Set, Grow!* will be available in English, Bahasa Malaysia and Chinese at selected major public libraries as well as clinics.

## Think Pink, Play Golf

Malaysia's most fun golf tournament, the Sime Darby LPGA, was back in style in the tail end of October. To commemorate this, some of the world's best female golfers and the nation's corporate and social elites came together to celebrate at TPC Kuala Lumpur. Defending champion Shanshan Feng, world no. 1 So Yeon Ryu and Malaysia's golf sweetheart, Kelly Tan were some of the illustrious guests. Guests were treated with music by local DJs and various culinary delights. The Sime Darby LPGA Malaysia collaborates with Cancer Research every year to raise funds and awareness in conjunction with breast cancer month, and this year is no different.



L-R: Professor Dr Teo Soo Hwang (Chief Executive of Cancer Research Malaysia), Kate Burton (golf TV commentator) and Datin Paduka Zaitoon Dato' Othman (Sime Darby Foundation).

## New Medication for Advanced Stomach Cancer

Eli Lilly (Malaysia) Sdn Bhd announced the launch of CYRAMZA® (ramucirumab), a biologic therapy that treats patients with advanced stomach cancer after their prior chemotherapy was no longer effective. This medication is one of the first approved therapies in the country that can extend the survival of patients suffering from advanced stomach cancer. Two global, randomized, double-blinded and placebo-controlled Phase III studies found that CYRAMZA®, when used in combination with chemotherapy to treat patients who have failed prior treatment, significantly improved the response rate, duration of disease control and survival in advanced stomach cancer patients when compared to chemotherapy alone.



L-R: Dr Tho Lye Mun (Consultant Clinical Oncologist), Assoc Prof Dr Wan Zamaniah Wan Ishak (Consultant Clinical Oncologist), Prof Park Se Hoon (Professor of Hematology-Oncology, Sungkyukwan University School of Medicine, Korea) and Dr Faiz Ansari (General Manager for Eli Lilly and Company, South ASEAN).





## Change Your Skincare

**SK-II Facial Treatment Essence** gets a dramatic makeover. With a choice of three empowering mantras, take your pick from “**Be the Person You DECIDE to Be**”, “**CHANGE is in All of Us**” or “**DESTINY is a Matter of Choice**” being painted across an all-white version of the iconic bottle. In collaboration with powerful women such Chinese singer Dou Jing Tong, SNSD’s Choi Soo Young, and Japanese actress Haruka Ayase, SK-II sends the message that women are capable and can define their own destinies. The limited-edition bottles are available in stores from November 1 to December 31, 2017. Prices range from RM870 for the Skin Revitalizing Set, RM1,212 for the Radiant Aura Set and RM1,252 for the Youthful Beauty Set.

## Angelic Skin for Christmas

**Swiss Line** celebrates Christmas by bringing out their limited-edition Christmas Holiday Kit. Featuring a luxurious vanity case woven in metallic silver, this bag of joy is filled with some of the most well-loved products from Swiss Line’s Cell Shock range. The holiday kit includes the Cell Shock 360° Anti-Wrinkle Serum (30ml), Cell Shock 360° Anti-Wrinkle Eye Serum (15ml), Cell Shock Total-Lift Rich Cream (10ml), Perfect Profile Remodeling Cream (10ml) and the Age Intelligence 3D Hand Cream (15ml). Get yours today for RM1,328 at over 50 Cheerful Beautique member beauty salons nationwide in Malaysia. For the full list of Beautique member locations, check out [www.cheerful.com.my](http://www.cheerful.com.my).



## Be Tall, Be Strong and Be Smart

**Nature’s Way Kids A+ Milk Calcium Buttons** are made from 100% premium Australian milk powder. These crunchy and delicious snacks are high in natural milk calcium for growing up tall, enriched with omega-3 DHA fish oil for growing up smart and enriched with manuka honey for growing up strong. Available in two options, Omega-3 DHA and Manuka Honey, get yours today at RM69.90 for 150 yummy milk buttons at Aeon Wellness Stores, Caring Pharmacy, Guardian Pharmacy, Watsons Personal Care Stores and most independent Pharmacies in Malaysia.

## Guilt-Free Snacking

**Multigrain** and **Corn and Rice Chips** by Mission Foods are the new flavours in town. Both healthy and tasty, you can snack away with a clean conscience knowing they are free from artificial colouring, flavouring and preservatives. The Multigrain option packs a punch of rich and nutty flavour as it contains superfoods such as oats, soybean, sesame and linseed. The Corn and Rice option is gluten free and savoury, made with lime and rice meal. The two

flavours are available in 65g bags priced at RM2.99 and 170g bags priced at RM6.99.



## SALT CANDY

**Himalaya Salt Sports Candy** is made from genuine unpolluted Himalayan salt that is over 250 million years old. Also popularly known as Himalayan Pink Salt, it contains 84 natural minerals and elements found in our human body. These unique benefits have been packaged into Himalaya Salt Sports Candy – Extra Cool, allowing you to enjoy at your convenience. It is now available in leading pharmacies and convenience stores.



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is a mild wash formulated for sensitive, itchy or flaking skin. Made with natural cleaners, coconut oil and glycerine, the formula gently cleanses skin without irritating. Free from sulfates, parabens, synthetics, artificial colours and fragrances, this soap free wash is suitable for use in the bath, shower and hand washing. Get yours today at Caring, Healthlane, Multicare and independent pharmacies for RM35.90 per 250ml bottle.



## Make nasi lemak like a pro

**Everything Nasi Lemak** is a cookbook by celebrity chef Puan Sri Betty Saw. The book comes with more than 74 mouth-watering kitchen-tested recipes, all themed around the Malaysian favourite nasi lemak dish. Try your hand at making *pandan nasi lemak*, *sambal cencalok ikan bilis*, potted fish otak-otak and more. The best part is, the Malaysian AIDS Foundation has obtained the rights to republish the second edition of the book, which means all proceeds will go to women living with HIV. Get your hardcover copy today at RM59.90 from [yam.org.my/V2/project/everything-nasi-lemak/](http://yam.org.my/V2/project/everything-nasi-lemak/)

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