

12 **saturday people**



“Rooney has always been one of football’s fighters, he possesses an uncanny habit of silencing the doubters. An angry Rooney is usually a very effective Rooney.”
ADRIAN CLARKE • 32

Empathy is a doctor’s true measure, so a commentary writer wrote – and in the case of two veteran specialists, losing their mothers when they were 26 inspired their life-saving work and compassion for patients.

HEARTACHE SHAPES A DOCTOR’S HEART

WOO SIAN BOON
woosianboon@mediacorp.com.sg

He came home to find his mother collapsed on the floor, surrounded by a medical team. She had suffered a heart attack and stopped breathing.

Refusing to accept that she was dead, Tan Huay Cheem, then a 26-year-old army doctor, insisted on trying to resuscitate her throughout even the ambulance ride to Tan Tock Seng Hospital (TTSH).

“Imagine doing CPR on your own mother ... that journey to TTSH was the longest I’d ever made in my life although it was only about 15 minutes,” he said.

“I dared not stop because if you stop, that’s the end ... She was only 55, she hadn’t had a chance to experience the fruits of her labour.”

Now 50, the cardiac specialist can in retrospect recognise the signs of a possible heart attack in his mother all those years ago — the tightness of throat and toothaches which the family had attributed to a dental problem.

At the time, he was a top student in obstetrics and all set to become an obstetrician and gynaecologist. Her unexpected death changed the course of his life.

“I figured ... if I can’t save my own mother, surely one day I can save other people. I decided then to do cardiology — specifically, I want to be an

interventional cardiologist.” In simple terms, an interventional cardiologist is a “high-class plumber” — “we unchoke blocked arteries,” explained Associate Professor Tan, now the Director of the National University Heart Centre, Singapore (NUHCS) and a Senior Consultant Cardiologist.

95% CHANCE OF LIVING

It was a long training process, which involved a stint in general cardiology before entering Duke University in North Carolina to specialise in interventional methods.

Returning to Singapore, he started the primary Percutaneous Coronary Intervention (PCI) programme at NUHCS in 1997, where emergency heart attack patients are given an immediate angioplasty (a balloon inserted into a blocked artery to allow blood flow) instead of just medication.

This is a literal life-saver — the shorter the time elapsed between a patient entering the A&E and getting a balloon into his artery, the better his chances. The quickest door-to-balloon time at NUHCS was 57 minutes in 2010, compared to the international benchmark of 90 minutes.

Every year, about 450 patients are treated under this service, and the overall mortality rate is “exceedingly low” at 5 per cent, said Assoc Prof Tan. “So if, say, you had a heart attack and you come to this hospital, 95 per cent of the time you’ll walk out alive.”



PHOTO: DON WONG

The unexpected death of Assoc Prof Tan’s mother changed the course of his life, as decided to go into cardiology because of her.



PHOTO: TAN HUAY CHEEM

Ten years ago, he was appointed Director of the NUHCS, which was a milestone opportunity for him.

“You get presented with the responsibility to change the way in which a public service is organised. And you hope you create better, more affordable, accessible care for Singaporeans,” said Assoc Prof Tan, who has introduced a Cardiovascular Research Institute and mentorship schemes, among other things.

STAYING IN THE PUBLIC SECTOR

These days his expertise is in high demand here and abroad; he is a visiting professor at several universities in China and travels at least once a fortnight giving talks and lectures around the world.

But despite the demands of being an administrator and a teacher, he has never forgotten why he became a cardiologist — to stand between life and

LOVE, A KID’S BEST MEDICINE

Sitting in the sterile, harshly-lit confines of a hospital’s isolation ward as his mother fought to recover from a complicated liver transplant, Dr Daniel Goh — then a 26-year-old fresh from his medical housemanship — truly understood how it felt to be in the shoes of a relative and caregiver.

“It was a different side of the story. Just sitting with her, it was very, very strenuous. Emotionally, you’re very burdened. I was not in control of the situation, I didn’t know what was going to happen next.

“And the whole environment ... was very unfriendly — when you’re in an intensive care unit, there is no night and day difference. The day just goes on and on, and when your whole bio-rhythm goes, it’s a very sick feeling,” said the paediatrician.

His mother eventually was discharged and spent the Christmas of 1990 at home. The next month, she attended her daughter’s wedding. But one week after, her condition deteriorated and she died. She was 54.

Sharing this was evidently painful for Associate Professor Goh, 49, who choked up and teared as he spoke.

“She was a chronic carrier of Hepatitis B. It was a known risk, but the rapidity with which she deteriorated and went into liver failure was very acute. We were very close to her, that’s why when she passed on, it was a very big blow to all of us,” he said.

That experience of caring for his mother has profoundly affected him, and shaped the way the National University Hospital’s (NUH) Paediatric cluster — or nukkids — is run. As head of the cluster, he advocates a “child-friendly, family-centred centre” where not only the child is occupied but family members also feel at home and comfortable.

CARING FOR THE WHOLE KAMPUNG

“When a child comes to the clinic, the whole kampung comes as well. It is very different from an adult, who will probably come with a spouse. We not only have to care for the child, we have to manage the family as well,” he said.

As such, Assoc Prof Goh was a passionate advocate for setting up a Ronald McDonald House at NUH. This is an overnight facility where parents

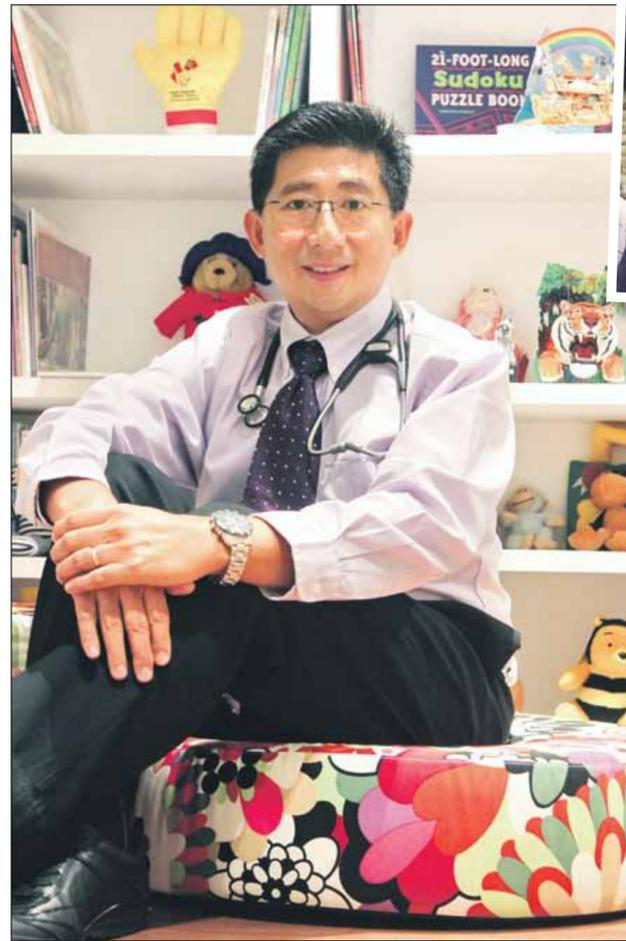


PHOTO: DON WONG

of critically-ill and hospitalised children can take a short respite from their caregiving duties.

Paediatric care is not just about medical care for the young patient, but caring for the family as well, he believes, as their love and support “is as powerful as the strongest medicine”.

“I think parents need a place to escape from a hospital’s sterile environment. Having the option to get out of the child’s room, go to a suite, just be quiet by themselves, to sit down, read a book, pray, have a shower, freshen up, a short catnap, and then come back.

“They’re so much fresher, they will be more able to support their child,

death for his patients, “for as long as I remain useful”.

One of his patients, for instance, tells of how he called Assoc Prof Tan when he had mild pains. The doctor, who was then in China, immediately put him in touch with an NUHCS colleague and insisted he get checked up at once. Don’t ever take it lightly, he warned the patient.

Assoc Prof Tan cited a Korean patient who, eight years after nearly dy-

ing of a heart attack, still flies in every six months for tests and medicine, “just to maintain our relationship. It’s incredible”.

He also continues to supervise operations and personally takes on an operation two mornings a week — the more complicated, the better. “When you hone your skills, you become a better operator over time,” he said.

Being able to take on complex cases is one reason why he remains in pub-

lic healthcare service. “You do a lot of screening (in the private practice). The patients are not so sick. Most times, they just want to get a check-up, make sure they are healthy. But that’s not what I trained for,” he said.

While he admits that his position means seeing more private and “VIP” patients, he also purposefully makes time for Singaporeans from all walks of life. As one patient testifies, he treats both cleaners and dignitaries.

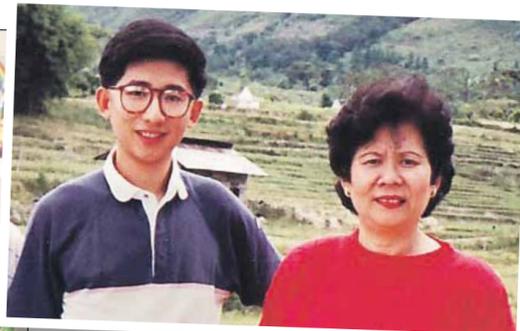


PHOTO: DANIEL GOH

Dr Daniel Goh’s experience of caring for his mother as she battled liver cancer profoundly affected him and shaped the way the National University Hospital’s Paediatric cluster is run.

Ronald McDonald House

● Opened in January, the Ronald McDonald House at the National University of Singapore (RMH@NUH) is a 24/7 free facility which can house up to four families (or eight people) at a time. They include families with a child in intensive care, with cancer, trauma or undergoing organ transplants. Of the 322 RMHs around the globe, only 10 are built within a hospital.

“The child may not be able to express everything accurately. And the parents will interpret it their way — sometimes they over-exaggerate, sometimes they underplay. That’s why our feelers must always be out to sense how parents or children react, all the time.”

He sees patients from all walks of life, a principle he has “refused to give up”. “We made a conscious decision years ago that patients will see doctors most suitable for the disease condition and the complexity of the illness. Our mission here is to treat patients regardless of class status, nationality, race,” he said.

He candidly admits, though, that his many responsibilities caring for other people’s children take him away from his own family, at a time when his three sons, aged 15, 14 and 10, “are growing up most rapidly”. This is what he regrets the most.

“My wife reminds me that I need to spend time with them. So every weekend, I try to play badminton with them. We’ve got a nice badminton court, which I’ll book on Saturday evenings, and we play as a family.”

At the same time, there are many patients and their parents whom he counts as friends today. For example, a few critically-ill newborns he cared for in 1991 are still now, even as young adults, under his care because “they refused to go away”, said Assoc Prof Goh.

“Many of them, they are well and don’t need to see me, but they continue coming. They say, ‘can we just see you once a year to say hello?’ It’s a joy and a privilege to have that kind of rapport ... What you do for them in their childhood can really change their entire lives. That’s the beautiful part of being in paediatrics.” **WOO SIAN BOON**

Assoc Prof Tan said: “By staying in a public institution, I am committed to public care. We must understand that 80 per cent of Singaporeans still go to a public hospital when they require in-hospital care. A majority are subsidised patients.

“I cannot be personally looking after all, but what I can do is to create a team, to build a system where everyone will be looked after, including the subsidised.”