



A learning network governed by Primary Care Academy

Editor's Notes

January/February 2014

Wishing all readers a Happy, Healthy and Better 2014! The first article in this 2014 Plexus bulletin is in conjunction of with World Cancer Day in February 2014. As the title suggests it offers a lowdown on GI cancer markers; including how sensitive or specific they are as tools to screen for certain gastrointestinal cancers. The New Year, especially after the festive binge, is also often the time for new resolutions including weight reduction. We hope you enjoy the 2nd brief article that sheds some light on some fad diets. Perhaps, the golden rule is to adhere to a balanced varied diet even while dieting. Enjoy and stay happy and healthy!

GASTROINTESTINAL CANCER MARKERS: THE LOWDOWN FOR FAMILY PHYSICIANS

Dr Jarrod Lee, Gastroenterologist, Mt Elizabeth Novena Hospital

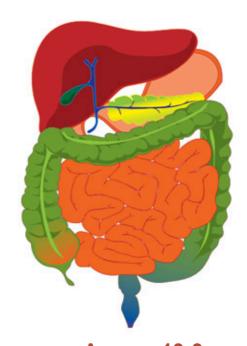
ancer markers for gastrointestinal (GI) cancers are increasingly used as part of health screening packages. We give the 'lowdown' on the commonly used GI cancer markers of: AFP (alpha fetoprotein), CA 19-9 (carbohydrate antigen 19-9) and CEA (carcinoembryonic antigen).

ALPHA FETOPROTEIN

- Elevated in both hepatocellular carcinoma (HCC) and chronic liver disease
- Also elevated in germ cell tumours and metastatic liver cancers
- Sensitivity 60% for HCC (with 20 ng/mL as cut-off);
 will miss 40% of HCCs if used alone
- Inadequate for HCC screening; should be used in conjunction with ultrasound
- · If raised, may need dynamic imaging of the liver

CARCINOEMBRYONIC ANTIGEN

- Raised primarily in colorectal cancer
- May also be raised in the following cancers: gastric, pancreatic, lung, thyroid, breast
- May be raised in the following non-neoplastic conditions: smokers, inflammatory bowel disease, pancreatitis, cirrhosis, hypothyroidism, COPD
- Very low sensitivity, not recommended for colorectal cancer screening
- Mainly used in surveillance following curative resection
- Also used for determining prognosis and monitoring therapy in advanced disease



CARBOHYDRATE ANTIGEN 19-9

- Raised primarily in pancreatic cancer
- May also be raised in the following cancers: colorectal, gastric, esophageal, liver, ovarian
- May be raised in the following non-neoplastic conditions; pancreatitis, cirrhosis, biliary tract disease, bile duct obstruction
- Low sensitivity and specificity, not recommended for pancreatic cancer screening
- Mainly used in surveillance following curative resection
- Also used for determining prognosis and monitoring therapy in advanced disease

HIGH PROTEIN DIET FOR WEIGHT LOSS: FAD OR FACT

Mr Won Tin Chiang, Senior Dietitian, National Healthcare Group Polyclinics



e have heard of many dietary fads. Let's explore some types of high proten diets, e.g. Atkins, South beach, Zone diet etc. These are high proten, low carbohydrate diets favoured or even endorsed by celebrities, such as Jennifer Aniston and Kim Kardashian, and promoted as successful weight loss plan.

They often give misconceptions about carbohydrates, insulin resistance and using ketosis to promote fat burning as the best way for weight loss. Let us further examine the Facts and the Risks.

Facts

- The New England Journal of Medicine in a review of randomized controlled trials, 'Comparison of Weight-Loss Diets with Different Compositions of Fat, Protein, & Carbohydrates' reported that reduced-calorie diets result in clinically meaningful weight loss regardless of which macronutrients they emphasize (1).
- These diets can cause a quick drop in weight because excluding carbohydrates causes a loss of body fluids (2).

The best approach for weight loss is through a healthy balanced diet and regular physical activity while meeting basic nutritional needs of the body.

Risks

- High protein diets are ill -balanced and restrict entire food groups. Very often, high protein diets are high in fat. This raises cholesterol and increases cardiovascular risks. As they limit many nutrient rich foods, people on high protein diets may fail to meet essential nutrient needs for certain vitamins, minerals (2).
- May result in ketosis, a dangerous condition in which the body has become too acidic, as fats are being broken down as 'fuel' for the body, due to the lack of carbohydrates (2).

While these diets may not be harmful for most healthy people for a short period of time, there are no long-term scientific studies to support their overall efficacy and safety (2).

Ketsosis causes bad breath, irritability, nausea and fatigue. The American Heart Association (AHA) stated that high-protein; low-carbohydrate diets put people at risk of heart disease (2).

Recommendation

American Heart Association (AHA) encourages people who want to lose weight to eat a variety of food, cut back on calorie intake and undertake regular exercise.

Reference

- (1) Sacks, FM et al. (2009) "Comparison of Weight-Loss Diets with Different Compositions of Fat, Protein, & Carbohydrates." The new England journal of medicine, vol. 360, no. 9.
- (2) American Heart Association, accessed on 05 Dec 2013, http://www.heart.org/HEARTORG/GettingHealthy/NutritionCenter/High-Protein-Diets_UCM_305989_Article.jsp#

ABOUT THE COURSE

General Practitioner's (GP) Assistant Course is designed to prepare anyone who is interested in working in GP clinic. The course is also intended to raise the level of service provided by the GP clinic to the public. The course is designed at three levels, Foundation, Intermediate and Advance.

FOUNDATION

- An overview of healthcare organization in Singapore
- Role of GP's Assistant
- Fundamental concepts of patient care delivery
- · Basic communication skills and delivery
- Basic measurement skills (Height, Weight, Tympanic & Digital Axillary Temperature Taking, BMI Calculation and Waist Conference)
- Fundamentals of infection control in clinic settings
- Basics on how medication works and avoiding medication errors



Date/Time: 22 & 23 May 2014, 1.30pm to 5pm

Venue: PCA Learning Centre
Choa Chu Kang Polyclinic
2 Teck Whye Crescent
Singapore 688846

Cost: \$180 (excluding GST)

To register, call 64966 6682 email secretariat@pca.sg

For more info, visit www.pca.sg

Course Calender

February - April 2014

Date	Course Topic	FEBRUARY
11 Feb	Enhancing Critical Communication Skills that Matter!	
19 Feb	Interpretation of Screening Result (DRP)	
20 Feb	Simplified Use of Medical Terminology	
26 Feb	BCLS Full Certification	
27 Feb	BCLS Re-Certification	
27 Feb	AED Certification	
28 Feb	CPR + AED	

Date	Course Topic	MARCH
19 Mar	BCLS Re-Certification	
20 Mar	BCLS Re-Certification	
20 Mar	AED Certification	
26 Mar	Caregiver Course - Care for the Eldely	
29 Mar	Introduction to Research	

Date	Course Topic APRIL
02 Apr	English-Chinese Medical Translation Course
09 Apr	Basic Health Parameters for Clinical Ancillary Staff (CAS)
11 & 12 Apr	Advancing Ethics and Professionalism in Primary Care
12 Apr	Evidence Based Medicine - Guide to Critical Appraisal (Therapy)
19 Apr	Evidence Based Medicine - Guide to Critical Appraisal (Diagnosis)
17 Apr	Enhancing Critical Communication Skills that Matter!
23 Apr	BCLS Full Certification
24 Apr	BCLS Re-Certification
24 Apr	AED Certification
26 Apr	Developmental Assessment in Children

Editorial Box

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