





An inspiring mentor and leader, Prof Low Poh Sim has always dedicated herself to helping children with special needs throughout her career in Paediatrics. As Head of the NUH Division of Paediatric Neurology and Development Paediatrics, the paediatric neurology team soared to greater heights under her exemplary leadership skills. For her many contributions to the Department, as well as her dedication in nurturing young minds, Prof Low was awarded the National Outstanding Clinician Mentor Award in July 2009. SMA News is truly honoured to be able to ask her about her journey into Medicine, and the inspirations that guided her way.



FEATURE



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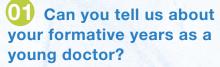
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Paediatrics is like spring time when you see buds becoming flowers in full bloom. The sick children

when listless and limp are like dehydrated flowers but when they get well, they spring back rapidly with vitality and life.

It is a specialty where we see hope and the future.



There was a lot of hard work after graduation, which I accepted to be necessary for learning and training. Life revolved around the duty roster: work came first; social and personal activities had to be fitted in. For years until I completed my postgraduate training, the norm was 10 stayin calls a month. Going through this frequency of calls and the high volume of admissions at that time, the learning curve was vastly shorter than it is now. Whenever I was on duty, the challenge I gave myself was to do my best not to lose any patient, no matter how sick they were, and hand them over safely to the next call team. During my housemanship, there were usually two of us on call. At 10pm, we split the night into two four-hour shifts so that each of us could catch some sleep, as we still needed to work a full day the next morning. I always volunteered for the first shift, which

was usually the busier of the two, as I could never sleep in peace until I had completed my work and duty.

The most enjoyable time each day was the whole unit ward round conducted by Emeritus Professor Wong Hock Boon. Rain or shine, weekday or weekend, this would begin with rounding the most sick in the admitting ward at 7.30am sharp. In about an hour, this teaching round would have gone through the whole unit of more than 120 beds. This routine inculcated in me the discipline of time and the responsibility of being ready with the latest updates about the patients. Even today, my work day begins before 7.30am.

My formative years also taught me many core values as a doctor, including self-discipline, responsibility, integrity, respect, teamwork and compassion.

While I practice subordination to authority and respect for my seniors, this is without compromise to professionalism, ethics and moral standards.



to think very hard what



I would like to do for my postgraduate training. Looking back, everything seemed to fall into place as though pre-arranged by the creator. During my time, housemanship was two six-month postings. My first posting was Paediatrics and the second was Obstetrics and Gynaecology (O&G). As a medical student, I found O&G to be very exciting - delivering babies and bringing new lives into the world. After going through the two postings, I was very certain about doing Paediatrics. I found it more interesting and suitable for me. The Paediatric environment was so cheery and this was especially so during my time when children were seen and warded at Mistri Wing, the newer part of the old Singapore General Hospital.

In Paediatrics, the babies delivered by the obstetricians come to us and we have the joy of looking after their health and following their growth and development. I would describe childhood and adolescence as bright, youthful, energetic, positive, and forward-going. Paediatrics is like spring time when you see buds becoming flowers in full bloom. The sick children when listless and limp are like dehydrated flowers but when they get well, they spring back rapidly with vitality and life. It is a specialty where we see hope and the future.

Who were some of the mentors who have inspired you?

During the 1970s, Paediatrics was very much without the subspecialties of today. We practiced general paediatrics first, and had a secondary subspecialty interest. The most important, respected and honourable mentor I had was the late Emeritus Professor Wong Hock Boon, the acclaimed Father of Modern Paediatrics. For many of us who trained in the University Department of Paediatrics, he was our beloved teacher, mentor and role model. In his very quiet way, he inspired me in my formative years through the encyclopaedic knowledge he had for medicine, his thirst for more information and his persevering efforts to improve the health of Singaporean children. He unreservedly trained and educated his prodigies. His quiet demeanor was very unusual for someone who was so dynamic. In my memory, he never scolded his juniors yet we did not end up "spoilt". I always respected him and wanted to do my best in order not to disappoint him. He got me interested in different fields of Paediatrics, including cardiology and haematology. I ended up doing Paediatric neurology, not because it was my first love, but to meet a pressing need in the Department at that time. As the development of Paediatric subspecialties in Singapore was only emerging in the 1970s, I had to rely on an overseas training stint at the Royal Hospital for Sick Children in Edinburgh. A great deal of what I learnt subsequently was through medical literature and clinical experience over the years.

04 What are the challenges you face in your daily work life?

The biggest challenge is to find enough time for everything that needs to be done. During my formative years, the emphasis was to find time outside the 90-hour work week to read and study for my higher examinations. Subsequently, as a member of the academic and teaching staff of the National University of Singapore (NUS), responsibilities went beyond clinical service to include research, teaching and mentoring of students and staff. Administrative duties gradually built up as I became more senior in the Department, and these demanded a substantial portion of my time.

The demands at work have changed tremendously over the past 3½ decades of my work life. When I started working as the most junior member of the staff, to get a "well done!" from the senior doctors and consultant of the team was all that was required at work. Over time, the system has evolved to require good feedback from students I teach and patients I treat, to achieve the performance targets set for me and to obtain good multi-source feedback from my peers and those I work with. Most of us feel driven by all these measures of service standards, which can become a source of stress at work.

05 What has brought you the most satisfaction in your professional journey?

I draw satisfaction from two areas. Firstly, getting the children well, helping the disabled children achieve their maximal potential, and being able to support their families through periods of acute or chronic illness always brings a sense of achievement and satisfaction.



Appreciation shown by them in the form of a thank-you card or a compliment received, especially from families of children whose final outcome was adverse is often the most touching and can move me to tears.

However, what I take pride in and derive greatest satisfaction from is the Department, which I had a chance to shape and build. I am by academic achievements perhaps the least qualified among those in the NUH Department of Paediatrics. There are amongst us, seven President's Scholars, four with the highly coveted MBBS (Honours) degree and several medical undergraduate scholarship holders. Four of the seven MBBS (Honours) degree graduates between 1978 and 1994 were members of the staff. I have none of these qualifications.

When I was called to head the Department in 1995, I had to lead a team of high-achieving, highlymotivated, dynamic and intelligent doctors. Fortunately, we were a very cohesive group of people who were all passionate to build our Department and careers at the same time. I prayed for guidance and the answer came in Proverbs 3:27 "Do not withhold good from those who deserve it, when it is in your power to act." This was indeed divine guidance. Using this principle and being tasked as Head, my team was happy at work, felt appreciated for their efforts and were duly recognised for good work. They were also given every possible opportunity to grow and excel in the system, and as a result, the Department grew in strength and matured in our subspecialty development. There were four Singapore Youth Awards conferred on individuals in my

medical team for excellence in Science and Technology during the period 1998 and 2002, and many more won research awards. There was no fear of success of another colleague. In fact, their success brought much joy and a sense of achievement for me. Those were the fruits of labour that belonged to all in the Department.

I was deeply moved by the show of appreciation when I received the many email messages sent by my staff when I completed my seven years of headship. It was a bonus to be told that I had made a difference to them. I am now even more elated and gratified to see the Department growing from strength to strength under the able leadership of the Heads who took over the reins.

Of As you have to interact a lot with Generation X and Y children/parents, what are your thoughts on them (in managing the parents' expectations and demands of their children)?

Yes, the bulk of the parents of my patients belong to Generation X while I belong to the generation of Baby Boomers. The patients I have generally come from households where both parents work. These parents have fewer children and therefore tend to be protective in a variety of ways. They have less time for their children and are often not the main caregivers. Parents are naturally anxious about their children when the latter fall sick. The conflict of not being able to be there for their children personally may add to this anxiety. Working parents



Prof Low Pow Sim receiving the National Outstanding Clinician Mentor Award from Minister of Health, Mr Khaw Boon Wan.

tend to feel more stress in having to cope with their work as well as with their families. Time management is often critical and when setting up clinic visits for the children, the doctor often has to take the parents' schedules into serious consideration. Hospital admissions for inpatient treatment of the children often have to be weighed against absolute necessity as well as competing social factors like time. Ambulatory care is often maximised.







Prof Low Poh Sim with team members at the National Medical Excellence Awards Ceremony

I also have a new breed of e-patients. Email consults with video inserts have become more common and these certainly have their limitations. There are risks to giving opinions without being able to physically examine the patient. These parents are IT-savvy and are well-informed through the Internet of the medical conditions or potential medical conditions their children may have. They go to the doctor with detailed notes and a summary of what they have read, what they want to do, and the options that they expect to be given. They

live in a world of instant information and many expect the same level of proficiency of the doctors today. Some Gen X parents can be very challenging for doctors to manage because they can be so demanding while others are increasingly health-conscious and wary of unnatural substances and chemicals called "medicine". There are increasingly numbers of parents who would choose traditional Ayurvedic herbal medication for treatment.

The oldest of the Gen Y-ers are adults in their early 20s and I have contact with them as my medical students and junior colleagues. I find the Gen Y-ers a more protected lot and most find it a challenge to bear physical and emotional stress. Many have high expectations of recognition and reward from others and have a feeling of entitlement. The role models for the Baby Boomers will not be role models for the Gen Y-ers as both have different expectations in life. Respect must be earned; it is not freely granted based on age, authority or title. This is rightly so. In many ways, I find that the system that worked in the past will not work today.



Generation Y doctors place much more importance on lifestyle and work-life balance than their predecessors, who are generally workaholics. Gen Y-ers have great expectations from the workplace and desire to shape their jobs to fit their lives rather than the other way round. As a result, planning the duty rosters for young doctors every month is a phenomenal task, unlike before when the centre of all activities was the duty roster. Now, the roster has to take into consideration everybody's social life. We have staff welfare officers to organise social activities to bond the team. We are seeing an increasing demand for part-time jobs to meet the needs of those who are bringing up their children. There is also a greater need for regular feedback channels for the staff.

07 Have there been any issues in dealing with children of VVIPs?

No. I have not had the experience of treating children of VVIPs.

I would imagine that there is nothing that I would be doing different professionally. I am sure I would receive the best support from the hospital and the supporting staff in making the VVIP's visit a very pleasant experience.

What is your view of the high attrition rates in Paediatrics from the public sector?

Paediatrics as a specialty tugs on the heartstrings of many female doctors and there is a bias for the female gender to take up this specialty. I am not saying that female doctors are more attracted to practice in the private

Paediatrics as a specialty tugs on the heartstrings of many female doctors and there is a bias for the female gender to take up this specialty. I am not saying that female doctors are more attracted to practice in the private sector, but the private sector does offer greater flexibility of part-time employment or practice.

sector, but the private sector does offer greater flexibility of part-time employment or practice. Many women who have completed their training in Paediatrics will see raising a family as their next duty. Being paediatricians, they are even more sensitive and mindful of the fact that mothers have a critical role to play in the formative years of their children's lives, and are more prepared to seek alternative employment in the private sector to allow for more time for them.

09 What is your view of parents taking their sick children to paediatricians rather than general practitioners (GPs) as a first instinct?

All children are very precious to their parents and this is even more so with the low birth rate in Singapore. It is natural that parents would want to give the best care to their children when they are sick.

What do you do for recreation?

Time is a luxury to me. Different hobbies have given way to the pressure of

time. Over the years, I use time for recreation with dual objectives:

- for the enjoyment in doing something not considered "work" and
- (2) to keep mentally and physically fit.

I have a sweet tooth and I used to enjoy making desserts. I have also been rather addicted to doing puzzles - the Rubik's cube during the 1980s and the Sudoku craze when it became an international hit in the last few years. Besides the fun and sense of achievement derived from solving a "level five" Sudoku puzzle in shorter and shorter time, there is the notion that I am maintaining my brain power and undertaking preventive measures to slow down the process of senility and dementia. The other thing I find relaxing and enjoy doing is brisk walking. The time used for keeping physically fit is also spent reflecting on what happened during the day. Although there is much perspiration at the end of a half-hour brisk walk, I end feeling much refreshed.