

## **ELECTIVE (SSC5b) REPORT (1200 words)**

A report that addresses the above four objectives should be written below. Your Elective supervisor will assess this.

While Singapore boasts a reputation for possessing one of the premier healthcare systems in Asia, the nation grapples with the formidable challenge posed by its rapidly ageing population. Currently, individuals aged 65 and above constitute one-fifth of the total population, marking a substantial 12% increase over the past decade. Consequently, there has been a surge in the prevalence of geriatric conditions, coupled with elevated rates of multi-morbidity. Research indicates a notable uptick in the number of elderly individuals afflicted with multiple chronic diseases. For instance, in 2017, nearly 37% of surveyed elderly respondents reported experiencing three or more conditions, a marked escalation from 20% in 2009.

Among the common geriatric conditions prevalent in the Singaporean population are hyperlipidemia, hypertension, cataracts, arthritis, and diabetes. While these ailments also afflict individuals in the United Kingdom, several factors contribute to differences in prevalence rates. For instance, dietary habits diverge between the two nations, with the United Kingdom favoring a more Western-style diet compared to the Asian-style diet prevalent in Singapore. Additionally, Singapore's ethnically diverse population differs from the more homogenous demographic makeup of the United Kingdom. These factors underscore the multifaceted influences shaping the prevalence of geriatric conditions observed in each respective country.

In Singapore, geriatric services are structured to prioritize community-based care, with institutional care serving as a supplementary option. This framework is realized through the integrated Care System established by the Ministry of Health (MOH), which encompasses an array of services ranging from Family Doctors and Hospitals to Care Centers, home care services, and non-profit organizations.

An intriguing aspect of Singapore's approach is the diverse range of care centers available throughout the island. These facilities cater to various needs, spanning from general day care activity centers to specialized centers tailored for patients with dementia. Feedback from patients and their families suggests that these care centers contribute to the maintenance or enhancement of cognitive function while mitigating social isolation. Additionally, social services play a significant role in these centers, offering amenities such as meals and transportation, thereby enhancing convenience for both patients and their families.

In contrast, the United Kingdom primarily relies on General Practitioners or family members for patient management, with fewer specialized care centers available. Singapore, however, is striving to emulate aspects of the UK's healthcare management by promoting the involvement of family doctors in geriatric patient care within the community. Yet, achieving parity with the UK's standards necessitates time and resources to equip each family doctor with the requisite skillset.

Nevertheless, I am impressed by Singapore's healthcare system, which efficiently and effectively delivers high-quality care to geriatric patients. The ongoing efforts to enhance community-based care reflect a commitment to ensuring optimal health outcomes for Singapore's elderly population.

Amidst the burgeoning ageing population in Singapore, it is imperative for the government to safeguard its

citizens, while also proactively curbing the escalation of geriatric conditions for future generations. Throughout my elective, I have witnessed a multifaceted approach employed to address these challenges.

Firstly, a robust emphasis on active ageing has been evident. This entails the encouragement of seniors to remain mentally, physically, and socially engaged. Initiatives spanning from educational campaigns promoting healthy lifestyles to the establishment of activity centres and workout sessions serve as proactive measures against geriatric conditions.

Secondly, the enhancement of community care stands as another pivotal measure. This encompasses the fortification of home care services, offering therapy and aid with daily living for those in need, alongside the development of Senior-friendly housing featuring amenities such as grab bars and wider doorways.

Thirdly, financial assistance emerges as a crucial pillar in supporting low-income families. Various subsidies and schemes, including the Eldercare Fund, Central Provident Fund (CPF), Medisave, and Medishield, serve to alleviate the financial strain associated with healthcare expenses, thereby enabling citizens to prepare for ageing while mitigating financial burdens.

The implementation of such measures establishes a comprehensive support system for Singapore's ageing population, fostering a milieu where individuals can age with dignity and well-being.

During this elective period, I have deepened my understanding and appreciation for Geriatrics in Singapore. One key insight I have gleaned is the paramount importance of effective communication. This became evident during clinic sessions, where physicians diligently engaged both patients and their families in dialogue about living conditions, encountered challenges, and the potential need for additional support from social services or the hospital. Moreover, the doctors demonstrated remarkable patience and compassion during consultations, ensuring that patients' concerns were thoroughly addressed and that they gained a clearer understanding of their treatment plans. This experience has inspired me to prioritize similar standards of care and communication in my future medical endeavors.

Additionally, this elective has underscored the significance of preventive measures in mitigating the prevalence of Geriatric Conditions. While implementing such measures demands substantial resources and collaboration between government and healthcare entities, the observable benefits were evident during my elective as patients appeared healthier with fewer comorbidities. Overall, I have observed distinct approaches to geriatric patient care between the United Kingdom and Singapore. Nevertheless, there exist valuable insights that both countries can exchange to enhance their respective approaches to geriatric care.