





MEDICAL CENTRE OF THE YEAR 2021 AND ONCOLOGY MEDICAL CENTRE OF THE YEAR IN THE ASIA-PACIFIC

Cancer is a global epidemic of the modern world. Every year, millions of people are diagnosed with cancer, and millions more—their families, friends and loved ones—have their lives irrevocably altered.

The silver lining of this reality is that constant advancement in medicines and medical technology are slowly but surely tipping the battle against cancer in our favour.

PCC is home to a comprehensive suite of cancer treatments delivered by an experienced, multidisciplinary team. Every day, and for every patient, its team works hard to deliver holistic cancer care in a safe and comfortable environment, aided by modern technology and proven innovative therapies to achieve optimal clinical outcomes for patients. And since ensuring patients' well-being also means creating a positive experience for them each time, its guest relations officers and translators are always on-hand to greet and attend to them.

The battle against cancer is not an easy one, but through it all, we are there to support and guide our patients. We are here to give them hope.



DR ANG PENG TIAM Medical Director and Senior Consultant Medical Oncology

Parkway Cancer Centre

15 YEARS AND BEYOND

Last year was an important milestone for Parkway Cancer Centre (PCC) as it marked 15 years of PCC's dedication to cancer care and patient care.

PCC has come a long way in making a difference in patients' cancer journeys, earning patients' trust and building many meaningful relationships along the way.

The last two years in particular have been challenging, with constantly shifting pandemic protocols, reduced social interaction and border restrictions.

Despite these adversities, PCC's spirit has not wavered. I am happy to see that the PCC spirit has stayed strong and everyone has continued to work hard together in upholding the sacred mission of serving our patients.

We created this book with patients, caregivers, and everyone else whose lives we have touched in mind. The fingerprints you see on this book were contributed by every one of us in the PCC family. Like the rings of a tree, every line represents PCC's growth and the unique DNA different individuals have brought to PCC over the years.







OUR PAST, PRESENT & FUTURE

WHEN PARKWAY CANCER CENTRE (PCC) BEGAN IN 2006, THE FOUR FOUNDING DOCTORS HAD ONE VISION: TO CREATE A ONE-STOP CENTRE OFFERING SPECIALISED TREATMENTS AND A MULTIDISCIPLINARY TEAM APPROACH TO PERSONALISED CANCER CARE. 15 YEARS ON, PCC'S MISSION TO PLACE PATIENTS AND THEIR LOVED ONES AT THE HEART OF ALL IT DOES REMAINS ITS PRIMARY FOCUS.



2007

The introduction of support programmes under the umbrella of CanHOPE to help patients and their loved ones adjust to changes on their treatment journey.

CanHOPE is a non-profit cancer counselling and support service provided by PCC.

PCC starts the engagement of clinical trials.



2010

The introduction of dietitian services.

The introduction of cool cap services to help minimise hair loss caused by chemotherapy.



PCC was formed by Dr Ang Peng Tiam, Dr Khoo Kei Siong, Dr Teo Cheng Peng, and Dr Lim Hong Liang.



2008

The opening of PCC premium centre at Gleneagles Level 2.

Guest Relations Teams were formed to attend to patients during treatment transitions and help ensure that their cancer care is well coordinated in Singapore and regionally through our network of CanHOPE offices.

The introduction of Home Care services.

The Palliative Care Services in PCC was set up to provide a comprehensive cancer care programme for all our patients.







2013

The integration of Paediatric Oncology services into PCC to provide dedicated, specialised clinical care for children with cancers and blood diseases.



2016

The opening of PCC's second satellite clinic in Myanmar.



2018

The opening of the CanHOPE Cancer Resource Centre in Johor Bahru to offer cancer patient services and products that give patients a sense of normalcy when undergoing cancer treatment.



2015

The opening of PCC Mount Elizabeth Novena Hospital clinic with a dedicated Haematology section.



2021

PCC celebrates its 15th Anniversary.



2012

The introduction of professional counselling services.

The launch of the Haematology centre and Stem Cell Transplant programme.

PCC opens their first satellite clinic in Myanmar to allow patients to receive treatment closer to home.

OUR DOCTORS SPEAK: ON THE FUTURE OF PATIENT CARE

THANKS TO ADVANCES IN MEDICINE AND MEDICAL TECHNOLOGIES, THE HOPE IN THE FIGHT AGAINST CANCER REMAINS STRONG AS EVER AS WE WORK TOWARDS THE NEXT 15 YEARS. WITH THIS HOPE, OUR DOCTORS' SPIRITS AND DETERMINATION ARE UNWAVERED AS THEY COMMIT TO DELIVERING GOOD OUTCOMES FOR OUR PATIENTS.

FROM OUR MEDICAL ONCOLOGISTS

"The battle against cancer is not an easy one but we are here to guide, support, care for and walk the journey with cancer patients."



DR ANG PENG TIAM, MEDICAL DIRECTOR



DR KHOO KEI SIONGDEPUTY MEDICAL DIRECTOR

"Seeds of faith are always within us. Sometimes it takes a crisis to nourish and encourage their growth."



DR LIM HONG LIANG

"Let's all work together to make each treatment journey meaningful and comfortable with positive outcomes."



DR WONG CHIUNG ING

"We will strive to provide holistic care in our patients' cancer journeys with our multidisciplinary approach."



DR SEE HUI TI

"Life is a long journey of infinite possibilities. Often one cannot see the goal at the end. But if we can't see it, doesn't it therefore mean the end is not yet near?"



DR CHIN TAN MIN

"I hope we can treat cancer as a chronic illness in the very near future!"



DR FOO KIAN FONG

"The darkest hours are just before dawn."



DR RICHARD QUEK

"Stay strong. Take each day at a time."



DR ZEE YING KIAT

"Stand in your light and shine brightly because that is how you defeat all the darkness."



DR WONG SIEW WEI

"Each patient is unique and deserves an individualised human touch."



FROM OUR HAEMATOLOGISTS

"Never waver in the fight against cancer." DR TEO CHENG PENG



FROM OUR PAEDIATRIC HAEMATOLOGIST AND ONCOLOGIST



DR LEE YUH SHAN

"With perseverance, dedication, prayers and love from loved ones, we can conquer all obstacles."



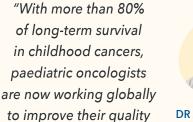
DR COLIN PHIPPS DIONG

"Try your best and don't give up!"



DR DAWN MYA

"Challenges are what makes your life interesting and overcoming them is what makes your life meaningful!"



of survival."



DR ANSELM LEE

FROM OUR RADIATION **ONCOLOGISTS**

"Customised care for each patient with precision medicine delivered based on genetic mutations of each patient's cancer will help achieve cure and reduce side effects of treatment."







DR LEE KUO ANN

"Advancements in A.I. and imaging as well as FLASH and proton therapy will take radiation delivery into the next decade."



DR IVAN THAM

"Cancer treatment will become targeted, whether with radiation therapy, surgery or systemic therapy. We expect to see more cures with less toxicity."



DR YANG TUCK LOONG EDWARD

"We will strive to help our patients not just to survive but to LIVE."



FROM PALLIATIVE MEDICINE

"Every day is a blessing; treasure what you have today." DR KOK JAAN YANG





TREASURING WHAT MATTERS



IT WAS BY ACCIDENT THAT GREGORY DISCOVERED HE HAD EWING'S SARCOMA. IN 2005, HE WAS OFFERED A JOB IN ABU DHABI AND HAD TO UNDERGO A PRE-EMPLOYMENT MEDICAL EXAMINATION IN SINGAPORE. IT WAS THERE THAT HE LEARNT THERE WAS SOMETHING UNUSUAL ABOUT HIS LEFT UPPER ARM.

Gregory, who was a father of two, later discovered he had a malignant tumour on his left upper arm.

"When I woke up from my biopsy, my mother and wife were crying," Gregory recalled. "That was when I knew it wasn't good news."

"I DID NOT KNOW WHAT HIT ME"

When Gregory began chemotherapy treatment, the experience could only be described by him to be "nasty".

"I had to be on a long 20-hour IV drip, on a 3-week cycle. Within 24 hours of beginning my first infusion, I was throwing up non-stop. I did not know what hit me. Drinking water and even swallowing my own saliva was difficult. I also had high fever and found myself shivering non-stop."

According to Dr Khoo Kei Siong,
Deputy Medical Director and
Senior Consultant, Medical
Oncology, undergoing chemotherapy is
an experience that differs from patient
to patient.

While typically, patients can benefit from preparing themselves mentally and emotionally by equipping themselves with knowledge about the treatment, oftentimes, patients do not truly know what to expect until they undergo it themselves.

By the time he finished his 3rd and 4th cycle, Gregory fortunately knew a lot more about what to expect than he did when he walked in for his first infusion 3 months before. Having the right support structure,



for instance, helped in tackling the physical and mental obstacles he underwent.

"Having a sense of familiarity while undergoing treatment helps a lot in making you feel as comfortable as possible despite the struggles. When I was undergoing treatment, some of my friends would come over and sit in my room to watch football with me at 2 in the morning, even when they had work the next morning.

"I also found Christianity, which gave me inner strength within myself on top of the support of family and friends."

APPRECIATING THE LITTLE THINGS

In between treatments, Gregory would take advantage of the days he has normal levels of immunity to send his daughters to school and walk to the nearby hawker centre to enjoy a plate of char kway teow.

"It becomes a routine where you know what to expect," says Gregory. "I'm grateful that I get to slow down and appreciate the little things. If not for cancer, I'll be working in corporate life, getting caught up in a rat's race.

"It becomes a blur because you don't get to see your children growing up. Because of my experiences, I've come to treasure family life and the things I have around me."

Gregory was in remission after the 5-year mark following his last treatment. However, in 2013, he discovered something growing in his lungs and required immediate surgery. He continued to undergo chemotherapy in 2014, but experienced another 2 relapses in 2015 and 2018.

Fortunately, because of the multidisciplinary care and holistic support he received, he continues to thrive until today.

"The support I received helped treatment sound less scary and easier to accept. Furthermore, the trust you have built with your doctors over the years assures you you're in good hands under their care."





NO SUMMIT OUT OF SIGHT

WHEN NELLIE RETURNED FROM CAMERON HIGHLANDS AFTER NEW YEAR'S IN 2006, SHE BEGAN TO FEEL A SLIGHT DISCOMFORT IN HER ABDOMINAL AREA. WHEN THE PAIN IN HER ABDOMEN BECAME UNBEARABLE, SHE WENT TO SEEK MEDICAL HELP FROM HER COMPANY'S DOCTORS.

Nellie was diagnosed with a urinary tract infection, but after the discomfort persisted and symptoms developed into frequent cramp attacks, she was referred to a gynaecologist for an ultrasound. It was then that she discovered she had a growth in her ovaries.

Upon further scans, she was confirmed to have a cancerous tumour, and was advised to consider immediate surgery.

"My mind was spinning; how can this be? Just 3 weeks ago, I was in the cool mountains of Cameron Highlands. Now, I am in the clutches of cancer."

"We were asked to seek a second opinion, but my mind was made up," shared Nellie. "I asked for the earliest surgery available.

"The next day, I was rolled into the operating theatre."

However, what awaited her post-surgery was more than she could handle. Her tumour had grown to such an extent that it also spread to her omentum, and she was subsequently determined to have Stage 3C ovarian cancer.

"My husband asked our doctor to give it to us in plain English what Stage 3 cancer really meant... 'about 30% chance of survival' was her answer. It took a while to soak it all up."

However, little did Nellie know that hope was waiting around the corner. On the very day of her surgery, an article in the newspaper caught her husband's attention as he sat in the hospital's waiting area.

"It was titled 'One in 4 Singaporeans will die of cancer'," shared Nellie. "Few things could ever compare to the irony of the situation that we were in. Here my husband was on the very day of his wife's surgery, and there it was, an article in the papers saying one in four people will die of cancer.

"In my mind, I was half dreading what's to become of me in the months ahead, but also what I needed to do to win this fight... literally, the fight of my life. But reading into the article a bit more, it showed me how the most aggressive of cancers can be stopped from spreading further, if not fully cured."





In the past, advanced stage cancer was deemed untreatable and terminal. Now, cure can be expected in some cancers, while treatment can be offered for control and prolongation of life in others.

As Dr Ang Peng Tiam, Medical Director and Senior Consultant, Medical Oncology explains, "When I first started my oncology training in 1986, you could count the number of drugs available for cancer treatment with the fingers on your hands.

"Today, thanks to chemotherapy, hormonal therapy, targeted therapy and immunotherapy, there are hundreds of drugs; the field has exploded with many treatment possibilities."

Dr Ang highlighted that cancer research has yielded great advances in medical treatment and technologies that have impacted the lives of many cancer patients.

"People must never lose heart. Many patients are now living in harmony with their disease. If you are on treatment, you can continue to enjoy good quality of life with the disease in remission or under control."

For the past 10 years, between travels to many countries and even Everest Base Camp twice, Nellie also makes what she likes to call a 'pilgrimage' to her follow-up appointments every 6 months.

"It is indeed an achievement to be able to trek given my cancer journey. However, until now, that follow-up trip to the doctor is the one that I find intimidating and fortuitous at the same time," said Nellie. "Intimidating because the needles await me, and one simply does not know if the results will be in my favour, but also fortuitous because I am very grateful that I am in good hands.

"To hear your oncologist tell you 'you are in good shape, Nellie' is simply music to my ears!"

WHEN NOTHING IS IMPOSSIBLE

IMAGINE BEING ESTER-DAUGHTER, FRIEND AND BUSINESSWOMAN, IN THE PRIME OF YOUTH. WHEN THE YOUNG INDONESIAN ENTREPRENEUR BEGAN FEELING TIRED AND BREATHLESS WHEN CLIMBING UP THE STAIRS OF HER HOME IN JANUARY 2021, SHE DID NOT THINK THAT ANYTHING WAS AMISS.



Ester's symptoms persisted for over a month. When her mother noticed that she looked unusually pale and learnt about her symptoms, she decided to go see her doctor about her condition.

"I didn't show any other symptoms, so I did not think too much of it," recalls Ester. "I thought it was just stress—something normal that I was not too worried about."

Despite her mother's concerns, Ester remained optimistic and went to her doctor in Jakarta with a positive attitude in February 2021.



She was ordered to take a blood test, which showed abnormalities in her haemoglobin levels and platelet count. A subsequent biopsy was then carried out, and she was diagnosed to have Acute Myeloid Leukemia (AML).

According to Dr Colin Phipps
Diong, Senior Consultant,
Haematology, acute leukemia
can be categorised into two main subtypes:
Acute Myeloid Leukemia (AML) and Acute
Lymphoblastic Leukemia (ALL).

Many adult patients will eventually need an allogeneic stem cell transplant to give them a good chance for cure. Some of the important tests that determine the need for transplant must be done before any treatment is started.

The journey for cure in acute leukemia patients involves undergoing treatments to kill leukemia cells prior to transplant, searching for a suitably matched donor for transplant, followed by finding the optimal balance between the desirable and unwanted effects of donor cells.

"When I was diagnosed with leukemia, I was so speechless as I did not anticipate it," Ester shared. "I was young, and I had no family history, so how did this happen?

"I thought my life would never be the same again. But I knew that life had to go on, and that God had a better plan for me."

"HOW CAN I GO ABROAD DURING COVID-19?"

According to Ester's doctor in Jakarta, the best course of treatment for AML was to undergo a bone marrow transplant. Unfortunately, the treatment was not available in Indonesia, and Ester's best hope of receiving the treatment was to travel to Singapore—right in the middle of COVID-19 border restrictions.

"When I learnt that I had to travel to Singapore, the one thing that came up in my mind was, 'How can I go abroad during COVID-19?'" said Ester. "I was also not in the right mindset to think about travel visas and travel arrangements."

Fortunately, Ester's parents were able to assist her in finding the resources they needed to get her to Singapore. Accompanied by her father, Ester travelled to Singapore feeling disoriented and confused, but optimistic that her fate will overturn based on the positive stories she heard about Singapore's healthcare system and services.

In Singapore, Ester was given a personalised treatment plan that consists of bone marrow transplant, oral targeted medication and chemotherapy. "This was the first time that I was experiencing something like this," Ester said. "I didn't know what to expect. Chemotherapy, for example, was definitely challenging for me because of the side effects such as hair loss and nausea."

STRONGER THAN YESTERDAY

Despite her initial worries and concerns, Ester set out on her cancer treatment journey feeling optimistic and confident because of the professional, friendly and patient doctors and nurses who uplifted her and encouraged her along the way. With their help, Ester was able to continue her day-to-day life as normally as possible, but with more positive lifestyle modifications such as a healthier diet and more exercise.

"It's great that I can hang out with my friends and continue working on my business," shared Ester. "I still cannot do heavy activities, but everyone in my family has given me their full support to help me through what I need."

Today, Ester is back in Jakarta after nine months of treatment. She continues to take medications daily, and reports her blood test results every week back to her transplant doctor in Singapore.

"I feel stronger than before," Ester shares. "I still feel tired—though not as easily anymore—but I know it'll take time. I'm grateful to God for my strength and healing, and I am confident I will get there day by day. Nothing is impossible with God."



"DON'T NEGLECT IT"



UNLIKE MANY PATIENTS, GOING FOR **DOCTOR APPOINTMENTS INVOLVED** A LOT MORE HASSLE AND PLANNING FOR MR SANKLECHA, WHO IS BASED IN CHENNAI, INDIA.

Before the COVID-19 pandemic in 2020, the Indian national would fly to Singapore regularly on an eight-hour round trip by plane, and spend three to four days away from home, in order to go for his follow-up appointments.

According to Mr Sanklecha, the entire process can be tiring. However, he does not consider it an inconvenience as it makes a significant difference to his overall health.

"[The care I get] is good here [in Singapore]," explained Mr Sanklecha, who began treatment in Singapore for his multiple myeloma in 2018.

Multiple myeloma is a type of cancer affecting white blood cells known as plasma cells, or B cells, explains Dr Teo Cheng Peng, Senior Consultant, Medical Oncology.

"These are immune cells made by the bone marrow which are responsible for making antibodies, which help to fight infection. When plasma cells become abnormal, or cancerous, they may produce antibodies that do not function as they should."

Mr Sanklecha first suspected something was wrong in mid-2018, while on a family holiday to Alaska in the United States.

"I was running a temperature and not feeling well. I was also not able to eat properly," he said.

He decided to see a doctor upon his return home. At his appointment, it was revealed that he had lost a staggering 12 kg over the previous months. Further tests, including a bone marrow biopsy, subsequently revealed he had multiple myeloma.

He was put on a cycle of chemotherapy to treat his disease. However, after experiencing side effects such as numbness in his fingertips and graduallyworsening leg pain, he decided to look for new treatment options elsewhere.

"My brother-in-law suggested we go to Singapore," he said, noting Singapore's general cleanliness and efficient healthcare system. "But it also costs a lot more to seek treatment there."



FINDING HOPE IN SINGAPORE

Despite the financial concerns, Mr Sanklecha and his family decided that his health was a priority and flew to Singapore in December 2018 for treatment. They subsequently stayed there for over three months, during which Mr Sanklecha received eight cycles of chemotherapy and an autologous bone marrow transplant.

Mr Sanklecha was in complete remission after treatment, and continued to travel to Singapore regularly for maintenance treatment in the months that followed.

One of the treatments that Mr Sanklecha has benefitted from is immunotherapy, which is one of the newest treatment options available in the field. The previous therapy Mr Sanklecha had received in India was not suitable due to his diabetes, which made him prone to nerve issues, explaining the side effects he had experienced previously.

Fortunately, thanks to immunotherapy, the side effects have since diminished. Furthermore, when used early and in combination with other treatment modalities, immunotherapy can offer very good outcomes for patients.

LIVING WITH CANCER

Since the COVID-19 pandemic hit, and borders between Singapore and India

were closed, he has continued going for follow-up appointments with his doctor in Singapore via teleconferencing. While teleconferencing is not the same as face-to-face meetings, it has at least reduced the hassle of planning flights and travelling long distances for him and his family.

Living with cancer has not been easy for Mr Sanklecha, who is described by his wife to be an active person. The chartered accountant used to work long hours at the office but now finds himself getting tired more easily.

Despite the day-to-day difficulties, he acknowledges that he is fortunate to have gotten the quality treatment he received, as well as the support of his family throughout his journey. "Every time I come to Singapore, I always have at least three or four relatives accompanying me," he shared.

He also finds himself fortunate that he does not have to worry about the rest of the family at home in Chennai when he is away. As the entire family lives under one roof, it is easier for everyone to watch out for one another. Through his experience, Mr Sanklecha found that seeking treatment early can go a long way, and advises other individuals who find themselves in similar positions to do the same.

"As soon as you suspect there is a problem, or when you see any signs or symptoms, get a check-up; don't neglect it," he said. "God has given you grace [period] after learning something is wrong, so get treatment done as soon as you can."





COVID-19 OUTBREAK ALMOST DERAILED HER CANCER TREATMENT

THE NOVEL CORONAVIRUS (COVID-19) PANDEMIC CAUSED SEVERE DISRUPTIONS TO THE GLOBAL ECONOMY AND IMPACTED MANY INDIVIDUALS' DAILY LIVES WHEN GLOBAL TRANSMISSION OF THE VIRUS TURNED A REGIONAL OUTBREAK INTO A WORLDWIDE PANDEMIC IN EARLY 2020.

For Doreen, the outbreak almost derailed her cancer treatment.

The China national had been receiving chemotherapy treatment for breast cancer since October 2019 to reduce the tumour in her left breast. After reducing the size of the tumour, she underwent surgery in January 2020 to remove the remaining mass.

She was scheduled to come back to Singapore in February 2020 to undergo radiation therapy.

But a few days before, Singapore had imposed travel restrictions on people flying in from China as part of the country's measures to curb the spread of COVID-19.

As anyone flying in from China would have to be put on a 14-day quarantine upon entering the country, this meant that if Doreen flew to Singapore, she would have to be isolated for two weeks before she could begin her treatment.

While Doreen had the option of doing the radiation therapy in China or postponing treatment, there was no way of telling how long the outbreak would last or when Singapore's restrictions on travellers from China would be lifted.

In the end, Doreen chose to fly to Singapore to complete her treatment.

She said, "Everybody in China was scared of going to local hospitals because of the virus. However, the main reason I decided to fly to Singapore to complete my treatment was because I felt very comfortable with the medical team and confident in their ability to take care of me."

Singapore's reputation for its world-class healthcare system was the main reason for Doreen's decision to seek treatment in the country. Furthermore, the cultural and language similarities in Singapore and China meant that she can better communicate with her doctors about her needs.



According to Dr Khoo Kei Siong, **Deputy Medical Director and Senior** Consultant, Medical Oncology, strong doctorpatient partnerships are key during the cancer treatment process.

> Generally, doctors who are kind and compassionate to their patients can help greatly in making patients feel calm and reassured throughout their treatment journey. This is especially as cancer patients are often at such a low point in their lives that their mood is badly affected.

"The patient must be able to trust and feel comfortable with the doctor... this is very important in the treatment process," he said.

Doreen underwent one round of chemotherapy in China and another seven in Singapore. The chemotherapy shrunk her tumour from about 2.8 cm by 2.6 cm to being barely visible even on ultrasound. When the surgery was finally done, only a 2 mm residual tumour was found.

She spent almost six weeks in Singapore during this period-including a two-week quarantine-and her mother and mother-in-law have been helping to take care of her 4-year-old son whom Doreen made video calls to every day.

Doreen flew back to China in early March.

"I really missed my family but I told myself that if I can get through this cancer, I will be able to spend more time with my husband and son in the future," she said.

Having spent so much time in Singapore before she could have her surgery, Doreen was glad to have the support of her medical team, who helped make her stay here as comfortable and pleasant as possible.

She was also glad to have met other Singaporean cancer patients who, upon hearing that she was here alone for treatment, offered her their telephone number and WeChat and asked her to contact them if she encountered any difficulties and keep in touch.

"Getting cancer was an unfortunate event, but I was fortunate that this episode allowed me to find a lot of good people and make friends here in Singapore too," said Doreen. "I definitely do not regret choosing Singapore for my treatment."







MULTIDISCIPLINARY CANCER CARE

CANCER CARE IS A FIELD IN MEDICINE THAT IS CONSTANTLY AND RAPIDLY EVOLVING. AS TREATMENTS BECOME COMPLEX WITH ADVANCES IN THERAPEUTICS AND TECHNOLOGY, THE FOCUS OF CANCER CARE HAS SHIFTED FROM PURE DISEASE MANAGEMENT TO A HOLISTIC, MULTIDISCIPLINARY APPROACH THAT ADDRESSES DIFFERENT POINTS OF CARE.



"In the past, it was a question of 'who sees the patient first'," Dr Ang elaborates. "But as we begin to understand more and more about each patient and their cancer, we realise that we need to collaborate and work better together."

MULTIDISCIPLINARY TEAMS IN CANCER MANAGEMENT

Dr Ang shares that whereas traditionally, doctors work in silos within their own specialities, multidisciplinary care calls for better collaboration and communication across different specialties.

Radiology, for instance, is key in helping establish whether a patient's cancer has spread, while pathologists play a pivotal role in guiding doctors on possible treatment modalities based on the molecular genetics of the cancer, as genetically distinct diseases require different therapeutic approaches.

Plastic surgeons may also get involved in the case of breast reconstruction for patients who need to undergo mastectomy, while dietitians, rehabilitative nurses and counsellors are key in helping patients manage the more social and lifestyle aspects of cancer treatment.

TOWARDS NEW GOALS

"A multidisciplinary approach is important because the patient is no longer treated like a 'football' that is kicked from one doctor to the next," expressed Dr Ang.

"Rather, the multidisciplinary team decides together what would be the appropriate and effective combination of treatment for the patient and their disease, providing what we call patient-centric care."

"The truth of it is that we [Parkway Cancer Centre] started very small," explains Dr Ang.

"We started as general medical oncologists, but today, there is subspecialty development even within our company. We have also included dietitians, counsellors and oncology-trained nurses amongst others into the team, gradually incorporating them into PCC so that we can provide holistic care for our patients.



DR ANG PENG TIAM

Medical Director and Senior Consultant

Medical Oncology

Parkway Cancer Centre



THE FUTURE OF CANCER TREATMENTS AND ROLE OF PCC

IN 2006, CANCER CARE IN SINGAPORE WAS STILL RELATIVELY FRAGMENTED; PATIENTS WOULD SEEK CONSULTATION FROM ONE SPECIALIST TO ANOTHER TO GATHER INFORMATION AND RECEIVE THE TREATMENTS THEY NEEDED. PARKWAY CANCER CENTRE (PCC) HAD A DIFFERENT VISION.

Today, the Centre's mission to provide a comprehensive and integrated cancer service that is patient-focused, stands strong.

What began as a small team of doctors has slowly and steadily evolved over the last 15 years into an experienced multidisciplinary team of medical doctors, nurses, counsellors and other paramedical professionals.

Today, PCC's network of centres has grown to eight clinics at three private hospitals in Singapore: Gleneagles Hospital, Mount Elizabeth Hospital and Mount Elizabeth Novena Hospital.

Together through CanHOPE–PCC's non-profit cancer counselling and support service–PCC has built a wide footprint across 20 major cities in the region. CanHOPE's regional offices play an extended role to PCC, linking patients around the region to the team in Singapore and bridging geographical, cultural and language borders to

provide integrated care and access to information to patients, wherever they may be around the world.

PCC TODAY

The understanding of cancer as a disease and its treatment has become complex compared to 15 years ago.

PCC has invested in bringing together various medical technologies and therapies to support its doctors in the care of our patients.

Some of the medical advances available at PCC today include novel treatments such as targeted therapy, immunotherapy and chimeric antigen receptor (CAR) T-cell therapy.

Targeted therapy involves the use of drugs designed to block the deleterious effects of abnormal genetic alterations caused by cancer (driver mutations). Working closely with Parkway's molecular laboratory, we are able to identify these driver mutations in cancer tissues and/or blood, and match patients to appropriate targeted agents in a timely fashion.

Targeted therapy has been an important pillar in cancer treatment for the past 15 years, and will

become relevant as more driver mutations and targeted agents are discovered.

In immunotherapy, the body's immune system is harnessed to seek and destroy cancer cells. In a way similar to vaccination against viral infections, immunotherapy has the potential to offer long-term control of otherwise incurable advanced cancers. Immunotherapy is now the standard treatment for many cancers.

CAR T-cell therapy is a form of immunotherapy where T-cells are taken from the patient's blood and modified in the laboratory to make these cells able to identify and destroy specific cancer cells. These modified cells are then re-infused back to patients.

CAR-T cell therapy offers patients with blood cancers another treatment option in the event that their disease is not controlled by standard chemotherapy, targeted therapy or bone marrow transplantation. Our team of Haematologists is at present actively preparing for the use of CAR-T therapy for our





lymphoma and myeloma.

In addition to delivering cancer care, PCC is also active in cancer education.

Tumour Board Meetings are held regularly for specialists from different fields to discuss and share treatment strategies for difficult and rare conditions.

Regular oncology talks are also organised for specialists and general practitioners via our Understanding Cancer and Beyond - Continuing Medical Education (CME) Empowerment Series, as well as participation in local and regional professional meetings.

Regular talks by PCC specialists and para-medical staff are also organised for our local and regional patients, as well as the general public.

15 YEARS AND BEYOND

As PCC looks towards the future, holistic, personalised patient care remains our top priority.

With a continually evolving medical landscape and changing attitudes of patients, what will continue to remain relevant for PCC going forward is its patientfirst approach to medical care. This is especially so as patients become more independent and take greater charge over their own healthcare decisions in an increasingly digitalised world.

At 15 years and beyond, the numerous advances in cancer research and technologies give PCC the capability and confidence to continue providing patients with up-to-date treatment options to ensure they are receiving quality care.

Together with a multidisciplinary team, PCC will continue to deliver individualised, personalised care in a reliable and supportive environment, which will support patients along their cancer journey.

FACING YOUR FEARS

SENG GUAN WAS TAKING A SHOWER ONE EVENING IN 2011 WHEN HE DISCOVERED A LUMP ON THE RIGHT SIDE OF HIS NECK, JUST BEHIND HIS EAR. HE INITIALLY BRUSHED IT OFF AS A SWOLLEN LYMPH NODE BECAUSE OF A TOOTHACHE THAT HE WAS HAVING. THE LUMP PERSISTED FOR OVER A WEEK, UNTIL ONE MORNING SENG GUAN WOKE UP AND WAS UNABLE TO FULLY OPEN HIS RIGHT EYE.

He went to his doctor and was referred to hospital to undergo further scans. From the results of his PET-CT scan, he was subsequently determined to have Stage 4 nasopharyngeal carcinoma with metastasis to the bones.

nasopha the tissulies behind the nose.

According to Dr Lim Hong Liang, Senior Consultant, Medical Oncology, nasopharyngeal cancer (NPC) is a disease in which malignant cells form in the tissues of the nasopharynx, an area at the upper part of the throat that

Patients with NPC may present with the following symptoms: nose bleed, nasal obstruction, ear symptoms (blocked ear, ringing noise, hearing impairments), headache, neck swelling from enlarged lymph nodes, or drooping of the eyelid.

NPC is the most common head and neck cancer in Singapore, and the tenth most common cancer in Singaporean men. Among the three major races in Singapore, the incidence of NPC is highest in Chinese persons, followed by Malays and Indians. It usually affects adults between 35 and 55 years of age, and is more frequent in males than in females.



DETERMINED TO FIGHT

"When I was told I had Stage 4 cancer, I was in complete shock," Seng Guan recalled. "The first thing that went through my mind was, 'Am I going to die soon? What will happen to my family when I am no longer around?' It felt like doomsday; I was so scared and at a loss for words."

His oncologist had told him that the cancer was incurable. However, Seng Guan decided that he was not going to let that information get him down.

"After some time, the strong will to fight came onto me and I told myself that I was going to make a



Seng Guan said. "I was determined to not give up. I was going to fight and survive this."

MIRACLES HAPPEN

To treat Seng Guan's NPC, his oncologist recommended a treatment plan consisting of 12 cycles of chemotherapy with no radiation. He also prescribed oral medication to be taken alongside treatment.

As Seng Guan wanted to focus on his treatment and recovery, he went on sabbatical from work. He went on a stroll every morning at MacRitchie Reservoir, and would spend his afternoons swimming or working out. As he is a devout Buddhist, he would spend his evenings at the temple to meditate and pray. Between his activities, he maintained a healthy diet comprising fish, vegetables, fruit juice, soya milk and green tea.

Things began looking up for Seng Guan after his second cycle of chemotherapy, where he noticed that the lump on his neck had shrunk and almost disappeared. After his fourth cycle, he underwent a PET-CT scan and discovered that his body was free of cancer cells.

10 years on, Seng Guan has remained well with no disease recurrence. He continues to

go for annual check-ups, but is no longer afraid like his younger self.

"I used to be scared and worried about going for check-ups," Seng Guan admitted. "I feared what I would find out from my results and reports. However, I've learned to face my fears and no longer feel that way. In fact, I feel a lot more relaxed about it."

APPRECIATING THE SMALL THINGS

Seng Guan is grateful he had a supportive family who was there for him throughout his cancer journey. He is also grateful for the fast and efficient medical care he received.

"Being able to receive treatment without delay was definitely a key factor that helped boost my confidence throughout my treatment journey," shared Seng Guan.

"Most of all, I am grateful for all I have in life even with the ups and downs," he continued. "Life is more than just about material possessions and social status; it is about spending quality time with my family and friends, and I'm very thankful that I now get to do all these with the time I have."

FEELING FEARLESS

WENDY WAS ON A LONG-HAUL TRIP TO THE US AND NEW ZEALAND WITH HER FAMILY FOR THE HOLIDAYS WHEN SHE DEVELOPED A COUGH. WHAT SHE THOUGHT WAS AN UPPER RESPIRATORY INFECTION SHE GOT FROM HER TODDLER, ENDED UP BEING A RARE DISEASE: HODGKIN LYMPHOMA.

A month after developing a cough during the holidays with her family in 2019, Wendy went to see a GP who diagnosed it as an upper respiratory infection.

Wendy was given antibiotics, but after developing a fever a week later, she underwent a chest X-ray which later revealed that there was an anterior mediastinal mass on a part of her lung and trachea. A biopsy and several scans later, it was determined that she had Stage 2A Hodgkin Lymphoma.



Hodgkin Lymphoma is a rarer subtype of Lymphoma in adults compared to non-Hodgkin Lymphoma, explains Dr Dawn Mya, Senior Consultant, Haematology.

The disease typically presents with lymph node swelling, most commonly in the neck and chest. It usually progresses from a single lymph node to nearby lymph nodes in a contiguous pattern. These enlarged lymph nodes are not painful but pain can sometimes occur especially with alcohol. Advanced stages will present with unexplained fever, weight loss and night sweats.

The selection of treatment is based on the presenting stage and disease risk factors. Disease-related risk factors allow the discrimination of patients with favourable outcomes from unfavourable outcomes in patients with Hodgkin Lymphoma. Patients with early stage Hodgkin Lymphoma commonly attain a long-term complete remission with treatment. Treatment options include a few cycles of combination chemotherapy and/or radiotherapy. Second line treatment options for refractory/relapsed disease include salvage combination chemotherapy, autologous stem cell transplant, targeted chemotherapy and immunotherapy and immune checkpoint inhibitors.





RECEIVING A CANCER DIAGNOSIS ABROAD

Wendy was based in Singapore when she received her diagnosis. "I don't think it would matter where I lived in the world," Wendy shares. "Receiving the news that you have cancer is devastating and shocking as I thought I was at my healthiest."

However, despite the devastating news, she found it a blessing to undergo treatment in Singapore, particularly during the COVID-19 circuit breaker period, which saw city-wide lockdowns except for essential services and emergencies.

"I was grateful that I could take the MRT to the hospital and not worry about 'germs' as there was hardly anyone around and mandates such as mask-wearing and social distancing were strictly enforced. It was opposite to how the US was handling COVID-19," Wendy explained.

She added that the personalised care she received in the country made an emotionally overwhelming experience more bearable and positive for her.

STAYING POSITIVE AND REALISTIC

Despite a positive mindset, lingering concerns remained. "I knew that I was strong, but the lingering questions of why this was happening and how this would affect my future as a parent to a young child kept plaguing me," shared Wendy.

She credited her vast support system around the world for cheering her on; her helper for helping her make her home feel 'back to normal' amid the countless treatment sessions, appointments and physical and mental fatigue she underwent over a year; and her husband, Steven, and daughter, Stella, for being her pillars of strength.

"We should never forget the caregivers as they need emotional support as well," shares Wendy. "The love that was sent my way truly got me through the treatments and into remission."

Besides the support of her loved ones, Wendy also joined Lymphoma support groups. "Unless your family or friends have/had cancer, they will not truly understand what you are going through. It's important to be realistic," Wendy points out.

FEELING FEARLESS

Wendy achieved remission on World Lymphoma Awareness Day in September 2020. Since then, her approach to life is to be fearless. "Even though I have low bone density and neck arthritis, I feel healthy and strong. After I finished my treatment, I decided to handle my fear of drowning so I hired a private swim coach and learned how to swim. After the first lesson, my coach was surprised as to how confident I was as he expected me to 'freak out' after submerging my head under water. My response was, "I just went to battle with cancer and won so I am feeling fearless right now".

"As a cancer survivor, there are still the long-term thoughts of uncertainty that continue to haunt me; the thoughts of relapse, recurrence, further organ damage, and secondary cancers linger. But I know I can only control what I can control, which is my diet, exercise and my mind, so I eat healthy, stay fit, and stay positive."



A BRAVE WARRIOR

NGUYEN DISCOVERED THAT SHE HAD A UTERINE FIBROID WHEN SHE UNDERWENT AN ULTRASOUND IN HANOI IN 2016. WHAT SHE THOUGHT WAS A NONCANCEROUS GROWTH LATER TURNED OUT TO BE UTERINE LEIOMYOSARCOMA (LMS) FOLLOWING A HYSTERECTOMY.

"The shock of receiving the news felt like rain falling down on me," Nguyen recalls. "I was depressed and cried all night. I had to pretend to be strong in front of my husband and children because I did not want them to break down."

Following the devastating news, Nguyen was referred to a medical oncologist in Hanoi, who ordered a biopsy and PET-CT scan for Nguyen. Based on her results, she was told that she did not need any chemotherapy or radiation therapy, but would need regular follow-ups to monitor her condition.

"Everything seemed normal the first two years after that," explains Nguyen. "I stopped worrying, my general health was stable, and I began social and community work to distract myself from my disease."

Leiomyosarcoma (LMS) is a rare type of soft tissue sarcoma that arises from smooth muscles lining the wall of the uterus, shares Dr Richard Quek, Senior Consultant, Medical Oncology. Sarcomas are malignant tumours that arise from connective tissues that support and surround critical structures and organs in the body.

The signs and symptoms of LMS may vary depending on the location of the tumour. Generally, patients may present with vaginal bleeding (LMS of uterine origin), pain, weight loss, and a persistent lump or swelling (LMS of limb origin).

WHEN PROSPECTS TURN BLEAK

Nguyen's prospects began to turn bleak in 2019. During one of her regular follow-up appointments that year, a chest X-ray revealed that there was a small opaque nodule in Nguyen's lung. This persisted for three months. A subsequent lung biopsy showed that Nguyen's uterine LMS had indeed spread to her lungs.

Numbed by shock, Nguyen was unable to process the next steps recommended by her oncologist. Fortunately, her daughter—who was based in Ho Chi Minh City—called at that moment. Upon learning about her mother's condition, she decided that she was going to bring her mother to Singapore for treatment.

"I flew to Ho Chi Minh City to join my daughter and son-in-law," Nguyen describes. "Prior to that, they both had already consulted with the CanHOPE office in Hanoi for information and guidance about what my treatment in Singapore was going to look like." When the three of them arrived in Singapore, they met with a medical oncologist, who gave them an overview of the treatment options available, and requested some blood tests and a PET-CT scan.

That same afternoon, Nguyen was confirmed to have uterine LMS with metastasis to the lung.

"I initially wanted to return to Vietnam and undergo treatment there," shared Nguyen. "But my children placed a lot of trust in Singapore's healthcare system, especially in the field of cancer treatment, and wanted me to undergo treatment here.

"What motivated me to stay was the thought of my second daughter back home. I did not want to miss her big milestones in life, like her wedding. And so, I decided to receive treatment in Singapore and get better for her."

"I WAS NOT DONE WITH MY TREATMENT"

In Singapore, Nguyen's children took her sightseeing, shopping, and dining. This helped her mentally and emotionally prepare for the start of her treatment journey in December 2019.

However, it did not prepare her for what was going to happen in 2020.

Halfway through her course of treatment in March 2020, Nguyen learnt shocking news that could derail the rest of her treatment journey: Singapore's borders were going to close due to the COVID-19 pandemic.

"I was upset because it meant that we would be stuck in Singapore," Nguyen recalls. "I was worried about the high cost of accommodation, and there were no flights home. Furthermore, I was not done with my treatment."

In total, Nguyen underwent 6 cycles of chemotherapy over 18 weeks, and the plan was to consolidate with radiation therapy thereafter. But the COVID-19 pandemic was ever-worsening and borders all over the world were closing fast. Disoriented by the news and pressured by fast-changing global circumstances, Nguyen had to quickly weigh her options and settle on a decision that could alter the course of her journey over the next few months.

Despite increasing worry about being stranded abroad for an indefinite period of time, and

even greater worry about getting infected by an unknown virus, Nguyen decided to stay in Singapore to complete her treatment. Desperate for a way to leave the country after completing her chemotherapy, she wrote to the Embassy of Vietnam in Singapore asking for help in returning home.

Fortunately, Nguyen was able to get a seat on a rescue flight home in April 2020. However, her radiation therapy was not completed yet. Should Nguyen miss this flight, it was unclear when the next available flight would be. Alerted to Nguyen's situation, her treatment team had to scramble, using all their wits and resources to expedite her radiation treatment in time for Nguyen to catch her flight. Thanks to their quick response, Nguyen was able to complete her treatment and return home safely.

"I burst with joy when I learnt I was finally going to return home to my beloved family," shared Nguyen.

RISING TO BE A BRAVE WARRIOR

Today, Nguyen is well and still undergoes regular check-ups and scans at her hospital in Hanoi. Her results are sent to her oncologist in Singapore to review and advise the next steps.

"If my children had not decided to bring me to Singapore for treatment, I may not be here today," Nguyen says. "My children have given me life. I feel like I have been revived for the second time. For that I'm grateful.

"I'm also grateful to Ms Hanh from the CanHOPE office in Hanoi, who gave me the guidance and support I needed so I can focus on recovery, checked in on me regularly, and helped get my

test results and reports translated to Vietnamese so I could easily get up to date on my condition.

"I would also like to thank Carol Theu who always encouraged me with positive thoughts and helped me whenever I needed it, as well as the doctors and the nurses who took good care of me and gave me the support I needed during my treatment journey.

"Thanks to them, I can be a brave warrior in my fight against cancer."





FINDING THE RIGHT TARGET

LIKE MANY CANCERS, LUNG CANCER DOES NOT SHOW SYMPTOMS IN ITS EARLY STAGES. MANY PATIENTS WITH THE DISEASE USUALLY PRESENT LATE IN THE COURSE OF THE DISEASE.

By the time Rany presented with symptoms and went to seek medical advice, her cancer was already in Stage 4. She was later determined to have advanced stage Epidermal Growth Factor Receptor (EGFR)-positive lung cancer, with metastasis to the brain.

Lung cancer accounts for approximately 1 in 13 cases of cancer diagnosed in Singaporean women, shares Dr Chin Tan Min, Senior Consultant, Medical Oncology. This makes it the third most common cancer in women, after breast cancer and colorectal cancer.

Lung cancer can be caused by a number of genetic mutations, from EGFR to ALK and KRAS. EGFR-positive lung cancer refers to lung cancer that has a positive EGFR gene mutation.

In EGFR-positive lung cancer, the EGFR is mutated, causing it to be constantly turned on, hence resulting in cells growing uncontrollably and leading to cancer. At advanced stages of the disease (Stage 3, 4), the malignant cells have spread beyond the primary site of the cancer and surrounding lymph nodes, and to other parts of the body such as the brain, liver and bones.

"LIFE HAD TO GO ON"

"I was really shocked and frightened when I received the news," Rany recalled.

Rany's biggest worry when she learnt about her condition was her immediate family. Her son and her two grandchildren lived abroad in the United Arab Emirates, and were a 10-hour flight away.

At home, she only had her husband to turn to. The couple lived together in Bandung, Indonesia with only a part-time helper at their house to help around with the household chores. Without an adequate support system under their roof, it was a struggle for Rany and her husband to adapt to this 360 degree turn in their lives.





"It was really hard for me and my husband to deal with these changes," shared Rany. "But life had to go on."

Determined to get the health support she needed for her condition, Rany went to seek advice and recommendations on hospitals and cancer centres in the region. She knew that Singapore had a great reputation for its efficient and effective healthcare system, so she decided to fly to Singapore with her husband to seek treatment.

TREATING A ONCE UNTREATABLE **DISEASE**

In the past, advanced lung cancer was an incurable disease. At late stages of the disease, treatment options are aimed at control rather than cure, and are generally more intense, with modest efficacy.

Fortunately, advances in cancer treatment have led to more precise and accurate novel diagnostics and treatment modalities that make effective management of advanced disease possible.

Lung cancer patients who carry EGFR genetic mutations can be treated with an oral targeted agent that targets the EGFR protein. This targeted agent will then block the particular receptor and disrupt cancer cell growth.

> Compared to traditional treatment modalities for Stage 4 lung cancer

(i.e. chemotherapy), the side effects of targeted therapy are usually less, with a longer period of disease control and significantly improved survival outlook. In fact, the survival rate of these patients are no longer measured in terms of months, but in terms of years.

Despite her age, Rany was able to undergo brain surgery in Singapore to treat her secondary brain cancer. This was followed by a course of treatment including oral targeted treatment and chemotherapy, to keep her primary disease under control.

After her initial treatment, Rany was well, relatively symptom free, and able to maintain a good quality of life in Bandung with her family. For the past 8 years, she has been returning to Singapore for regular follow-up treatments to keep her disease under control. Due to the COVID-19 pandemic and border closures between Singapore and Indonesia, her follow-ups in Singapore had to be rescheduled, but her cancer treatment continues with close collaboration between her Singapore

and Bandung doctors. Rany sees COVID-19 and travel difficulties as a temporary challenge. Importantly, Rany finds herself fortunate that her cancer had an actionable target that can be treated, and is hopeful that her future will continue to remain positive and bright.

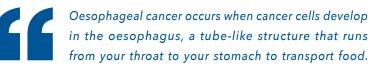
OVERCOMING CANCER RECURRENCE

TWO YEARS AFTER HAVING UNDERGONE SURGERY TO REMOVE CANCER CELLS DEVELOPING IN HIS OESOPHAGUS, MR MOHD EXPERIENCED THE SAME SINKING FEELING WHEN HE BEGAN EXPERIENCING DISCOMFORT EATING AGAIN.

The pain worsened with time and eventually, he was not able to swallow or consume much food, losing almost 40 kg within a short span of time.

When he went to see an oncologist about his condition, he was not able to consume any food orally and had to be fed through a tube in his abdomen that was connected to his small intestines.

A scan taken later showed that the cancer had recurred in the lower end of Mr Mohd's oesophagus and resulted in a total obstruction of the tube.



The cancer typically begins in the inner layer of the oesophagus and can spread throughout the other layers of the oesophagus and metastasise to other parts of the body.

Such patients tend to be weak due to their difficulty in eating, which leads to severe weight loss.

Dr Ang Peng Tiam, Medical Director and Senior Consultant, Medical Oncology said that surgery for oesophageal cancer is a "complex operation as it entails entering both the chest cavity as well as the abdominal cavity".

For a patient like Mr Mohd who had previously undergone surgery to treat the cancer, chemotherapy combined with monoclonal antibodies could be another treatment option, said Dr Ang.

He added that, "The diagnosis of cancer recurrence is often psychologically devastating to the patient. It takes courage on the part of the patient as well as trust in the medical team to optimise one's chances of success."







Q₀

Mr Mohd was initially very resistant to the idea of further treatment and took some time to come to terms with the recurred disease. However, he went on to complete four cycles of chemotherapy. A PET scan after the fourth cycle found there were no more residual cancer cells. Subsequently, he had radiation done on the site of the cancer recurrence to kill off any remaining cancer cells.

The most amazing thing for Mr Mohd was that through his multiple treatment cycles, he felt "absolutely no discomfort".

"There was not a single painful episode... none," shared Mr Mohd. "I did not feel tired either and I also did not experience any hair loss."

He found that it helped greatly that the doctors arranged for quick results for scans and blood tests to reduce his anxiety from waiting for the results.

Looking back on his initial reluctance towards seeking medical treatment, Mr Mohd explained that he did not want to confirm what he already suspected.

"While the results were not the best, it was important to know what was wrong so that the doctors know how to deal with it," he said.

Seeing photographs of other patients who had gone through the same ordeal as him and survived

gave Mr Mohd hope. "I realised that the trick was to follow the programme and go on with my life, and trust the doctor and God to sort out the rest."

Mr Mohd now comes for reviews every year and has remained healthy and well.

"I feel the best I have ever been in my life. I look better and trimmer, and I feel great," he said. "What I experienced made me take better care of myself and respect my body more—something I would never have done had this not happened."

Mr Mohd said he was also fortunate to have the support of his wife throughout his illness.

He added, "Who knows what the future holds. Life can only be understood backwards, but it must be lived forward. I am fortunate to be able to face it with calm confidence and positivity with God in my heart and caring medical doctors by my side."









WHERE WELL-BEING MATTERS - OUR ALLIED HEALTH TEAM





AT PARKWAY CANCER CENTRE (PCC), WE BELIEVE THAT MANAGING OUR PATIENTS' WELL-BEING GOES BEYOND TAKING CARE OF THEIR PHYSICAL HEALTH. OVER 15 YEARS, WE HAVE STRIVED TO INCLUDE PATIENT SUPPORT SERVICES IN OUR LINE-UP OF HEALTHCARE SERVICES. TILL TODAY, OUR ALLIED HEALTH TEAM REMAINS AN INTEGRAL PART OF OUR MULTIDISCIPLINARY CANCER MANAGEMENT.



FAHMA SUNARJA
SENIOR PRINCIPAL DIETITIAN
"Eating right is essential to
holistic healing."



TAN HUI PING

PRINCIPAL COUNSELLOR

"Take good care of your overall
well-being. Self-care isn't selfish,
it is self-responsibility."



"Sometimes days are just rough. It's okay to not be okay. That is being human, which makes room for healing."

CHIA HUI ERL

COUNSELLOR



JAIME YEO

COUNSELLOR

"Out of life's darkest moments can spring forth true and lasting hope, and a fuller appreciation of the beauty and purpose of life."



"Love yourself by eating well, laughing often, and resting enough. A cheerful heart is a good supplement."

CHLOE ONG

SENIOR DIETITIAN



"There is no good or bad food, only the right quantity. Don't forget food for the soul along the way."

GERARD WONG

SENIOR DIETITIAN



HEALTHY RECIPES

SIMPLE AND ESSENTIAL RECIPES FOR CANCER PATIENTS AND THEIR LOVED ONES.



SCRAMBLED EGGS WITH NORI, CRAB AND AVOCADO

Scrambled eggs have long been the comfort food of many. Here it is enhanced with nori (seaweed) which is easy on the palette.



This is inspired by childhood comfort foods. Warm oatmeal can always settle an upset stomach.



You may crave for something warm and soupy when the weather is cold. The umami flavours should whip up an appetite.



Broccoli contains antioxidants and-just as important-is delicious. Easy to make and easy to eat, this soup can be whipped up in a jiffy. Serve with a slice of toasted, buttered rye bread and you're on your way to a nourishing meal.



This is a dish that provides loads of nutrition with bright, vibrant flavours. Serve with steamed brown rice and fresh spinach for a great, nourishing meal.

For more healthy recipes



For more information, please visit: https://www.canhope.org/





HEALTHY TIPS

NUTRITION IS AN IMPORTANT PART OF ONE'S CANCER JOURNEY AND TREATMENT.

YET SOME NUTRITION ADVICE WE FIND ONLINE OR GET FROM WELL-MEANING FRIENDS

AND FAMILY MAY CONTRADICT EACH OTHER AND CAUSE FURTHER CONFUSION.

THESE HEALTHY TIPS PROVIDE CLARIFICATION AND ALLOW YOU TO MAKE AN INFORMED CHOICE ON YOUR NUTRITIONAL HEALTH.



Red meat provides nutrients that are not found in white meat, such as iron, zinc and vitamin B12. These nutrients are important in the formation of red blood cells and haemoglobin. Having it once or twice a week would provide sufficient nutrients. On the other hand, if consumed too much or too often, it may increase the risk of coronary illness and certain cancers.







THERE ARE VARIOUS OPTIONS OF COOKING OIL YOU CAN CONSIDER SWITCHING TO

Mono- and poly-unsaturated fat play a role in lowering triglycerides and low density lipoprotein (LDL) cholesterol hence reducing the risk of coronary heart disease.

There are a variety of unsaturated cooking oils which you can consider switching to. For stir-frying, you can opt for rice bran, soybean, sunflower and canola oil. Extra virgin olive oil has a high amount of monosaturated fat which is best for salads. If possible, reduce saturated fat intake such as coconut oil and ghee.

Although unsaturated fat is healthier, they contain the same amount of calories per gram. Therefore, it is still important to be mindful of the amount used in cooking.





WONDERING IF YOU CAN TAKE TCM DURING TREATMENT?

Traditional Chinese Medicine (TCM) uses completely different ways of assessing health and illnesses. Alternative therapy using TCM to replace conventional cancer treatment such as chemotherapy is not advisable. However, using TCM herbs to help reduce side effects of cancer treatment may be possible.

Do consult your Oncologist for a referral to a TCM physician who will manage your conditions together.

Do also avoid taking TCM herbs on the first cycle of treatment to enable your Oncologist to assess your body's response to treatment better.

INFLAMMATION CAN LEAD TO ILL HEALTH

There are many 'anti-inflammatory' diets and while each plan has its own twist, all are based on the general concept that constant or out-of-control inflammation in the body leads to ill health, and that eating to avoid constant inflammation promotes better health and can keep disease away.

Example of inflammatory foods for cancer are thought to be:

- Moulds and toxins e.g. aflatoxin in cereals, grains and peanuts and fumonisin in maize
- Food preparation:
 - Heterocyclic amines cooking meat at high temperature e.g. deep frying
 - Polycyclic aromatic hydrocarbons produced in meat and fish that have been grilled or barbecued over a direct flame
 - N-nitroso, formed in foods containing added nitrates/nitrites
 e.g. in meat and fish preserved with salt, preservatives,
 smoking or drying

The above have been known to increase the risk of cancer.

A HEALTHY DIET CAN HELP PREVENT CANCER RECURRENCE

The World Cancer Research Fund and American Institute for Cancer Research reviewed thousands of studies and provided a summary of factors that help prevent cancer and cancer recurrence.

These are:

- Body fatness: be as lean as possible within the normal range of body weight
- Physical activity: be physically active as part of everyday life
- Limit consumption of energy-dense foods, avoid sugary drinks
- Eat mostly foods of plant origin
- Limit intake of red meat and avoid processed meat
- Limit alcoholic drinks
- Limit consumption of salted foods, smoked foods, avoid mouldy cereals, grains and pulse
- Aim to meet nutritional needs through diet alone





JOURNEYING WITH YOU

PARKWAY CANCER CENTRE (PCC)'S SUPPORT PROGRAMMES AIM TO EQUIP PATIENTS AND CAREGIVERS WITH HOLISTIC KNOWLEDGE AND INFORMATION ABOUT JOURNEYING WITH CANCER. FROM ONLINE WORKSHOPS ON COOKING AND NUTRITION TO MEDITATION CLASSES AND INFORMATIVE TALKS, THERE IS SOMETHING FOR EVERYONE TO PARTICIPATE IN AND ENJOY.





CNY CRAFTWORK, 2012







A SECOND CHANCE AT LIFE

AFTER JASMINE GAVE BIRTH TO HER FIRST CHILD IN 2019, THE LAST THING SHE EXPECTED WAS GETTING CANCER. FORTUNATELY, THE YOUNG MOTHER MANAGED TO OVERCOME MANY CHALLENGES IN HER FIGHT AGAINST THE DISEASE AND DISCOVERED A SECOND CHANCE AT LIFE.



Jasmine had just returned back to work after her maternity leave when she started getting breathless from walking up flights of stairs as well as a persistent cough for more than 2 months. She had gone to see her GP but her condition was thought to be related to fatigue from taking care of her newborn.

Despite everyone's concerns, Jasmine went on to go for a babymoon holiday with her husband to Bangkok for a week. The trip was an exhausting one for her, as she had to constantly take breaks in between walking and shopping to catch her breath. When she returned home, her concerned mother insisted she get herself a referral to see a specialist and an X-ray to make sure that everything was okay.

Her X-ray showed that one lung was white while the other was black. Her specialist referred her to an oncologist for further testing and biopsy, which subsequently confirmed that she had Stage 4 Diffuse Large B-cell Lymphoma.

According to Dr Richard Quek, Senior Consultant, Medical Oncology, Lymphoma is ranked the 5th most common cancer in men and 6th most common cancer in women in Singapore.

Lymphoma is a cancer of the body's lymphatic system, and can be classified into two main subtypes: Hodgkin Lymphoma and non-Hodgkin Lymphoma. The most common Lymphoma in adults is Diffuse Large B-cell Lymphoma (DLBCL), which is an aggressive type of non-Hodgkin Lymphoma.

DLBCL affects B-lymphocytes, a type of blood cell that produces antibodies to ward off infections. Patients with DLBCL and Lymphoma in general may present with lymph node swelling, unexplained fever, unusual weight loss, low or high lymphocyte count, fatigue, difficulty in breathing, and skin itchiness.

DEALING WITH A CANCER DIAGNOSIS

As a new mother, her first thought upon receiving her diagnosis was her infant daughter.

"My daughter was only 6 months old at the time of diagnosis," recalled Jasmine. "Breastfeeding was put to an abrupt stop, and spending lengths of time in the hospital meant time away from her. I didn't know if I was going to live past this and see her grow up."

Like many cancer patients, Jasmine was also worried about losing her job, not being able to work and not being able to accomplish many things in life, especially as she was still very young.



"As my immunity was low, I was susceptible to infections and constantly had high fever," Jasmine shared. "My doctors were worried and had me admitted each time I had an infection.

"I also lost all my hair from chemotherapy. At the start, it was hard to accept," Jasmine admitted. "I bought wigs and hats to cover up my head because I honestly hated not having any hair. I was also tired and had no energy to eat or look after my daughter, which saddened me."

"LIFE CAN NEVER RETURN BACK TO **NORMAL**"

Jasmine's life took a 360 degree turn after her initial diagnosis. "Life can never return back to normal when you have gone through cancer," she said. "You'll always be more cautious, and even the people around you will be more worried for you."

> However, Jasmine does not see this negatively.

"I learned to look after my body a whole lot more and cherish my time with the people I love, and do the things that I love most."

In March 2020, Jasmine finished 6 cycles of chemotherapy treatment and is currently in complete remission. After such a challenging chapter in her life, she is ready to begin the next with a new lease of life.

"I am grateful for my husband who spent sleepless nights worrying and accompanying me to

parents who looked after me and my daughter during this period. I also had a supportive company for letting me go on long medical leave to recover, as well as family and friends who showered me and my family with lots of love during this difficult period.

"I am thankful for getting a second chance at life. I now treasure the importance of time and the people around me, and am focused on living life to the fullest."



OVERCOMING THE OBSTACLES AHEAD

THE LIVES OF TWO RETIREES WHO JUST **BEGAN THEIR GOLDEN YEARS TOOK** A BIG TURN WHEN THEY WERE BOTH DIAGNOSED WITH COLORECTAL CANCER. FORTUNATELY, THE UNEXPECTED HELP THEY RECEIVED THROUGHOUT THEIR BATTLES WENT A LONG WAY IN HELPING THEM JOURNEY THROUGH NEW CHALLENGES.

"FAMILY IS MY STRONGEST SUPPORT": MADAM FOO'S STORY

From her appearance, one cannot tell that Madam Foo had experienced cancer.

The senior was diagnosed with colorectal cancer in 2012, after she experienced extreme exhaustion and noticed unusual rectal discharge from her anus.

> After getting a better understanding of Madam Foo's condition, her family set out to look for more information and research on where she could find reliable medical support. After getting a recommendation from her cousin to seek treatment in Singapore, Madam Foo decided to head there.

> In Singapore, her oncologist advised her to begin with chemotherapy to shrink the tumour, followed

by surgery to remove the tumour and radiotherapy to kill the remaining cancer cells. Despite her initial fears, Madam Foo's treatment procedure went smoothly, with minimal side effects.

Her condition began to stabilise soon after her planned treatment of chemotherapy followed by surgery, and she remained well.

However, during a routine follow-up in 2017, Madam Foo discovered she had a new 7 cm size tumour on her liver. After overcoming her initial shock from the news, she decided to follow her oncologist's advice and underwent surgery followed by chemotherapy for 6 months on her liver recurrence.

"My body showed no signs of discomfort or symptoms," recalled Madam Foo. "Initially I thought it was related to female health concerns, so I went to see a gynaecologist."

When Madam Foo informed her family about her condition, her daughter arranged for her to do a preliminary examination. After running several tests, she was diagnosed with Stage 4 colorectal cancer.

"My mind went completely blank and I did not know what to do," shared Madam Foo.









Today, after a 10-year battle with cancer, Madam Foo is finally cancer free. Through her long and arduous journey at a prime age in life, she is most grateful to her loved ones for being there for her.

"Family is my strongest support; my family, relatives and friends were always by my side through these tough times," Madam Foo said. "I had no reason to give up, but with their encouragement, I gained even more confidence to continue overcoming the obstacles ahead."

Colorectal cancer is the most common cancer among men and second most common cancer among women in Singapore, says Dr Foo Kian Fong, Senior Consultant, Medical Oncology. Also known as colon cancer or large intestine cancer, the disease is one of the top three causes of cancer-related deaths in Singapore.

Like many cancers, colorectal cancer does not usually produce symptoms in early stages of the disease. However, screening (e.g. colonoscopy or faecal occult blood tests (FOBT)) and early detection can increase the likelihood of treating the cancer effectively.

THE IMPORTANCE OF HEALTHY LIVING: MR ANTHONY'S STORY

Mr Anthony discovered his disease 5 years ago when he was experiencing constipation problems.

He went to seek help for his symptoms, and underwent a colonoscopy to evaluate his condition. From his results, he was confirmed to have Stage 3 colorectal cancer.

"I probably would still be binge drinking and smoking at a never-ending party if not for cancer," said the senior, who kept an irregular lifestyle with excessive smoking and drinking prior to discovering his condition.

Determined to seek quality medical treatment for his disease, Mr Anthony searched all over Johor Bahru and even considered travelling all the way to Guangzhou, China for reliable medical care.

One fine day, Mr Anthony received a call from the Vice President of an oncology hospital in Foshan, Guangdong, thanks to a friend. The Vice President advised him to consider getting treated in Singapore. After deep consideration, Mr Anthony consulted his family doctor, who introduced him to Madam Foo, who was also receiving cancer treatment in Singapore. After connecting with Madam Foo and learning that her treatment was going well, Mr Anthony decided seeking treatment in Singapore would be the best move for his health.

He first underwent surgery, and was subsequently treated with 28 sessions of radiotherapy with chemotherapy, followed by chemotherapy alone. The first course of treatment went well, save for some inflammation on the large intestine

during his last 7 rounds of treatment, which caused slight pain and discomfort. The remaining 6 rounds of chemotherapy went well without any severe side effects.

Today, he is a cancer survivor and continues to gain courage and strength with every follow-up appointment he goes for. He has also learnt to appreciate his health better, and let go of his bad habits and lead a healthier lifestyle.

"Ironically, cancer has changed my life," Mr Anthony laughed. "I have regained my health, and I'm now in my best state. I feel like I've been brought back to life! It is really a blessing in disguise."



EARLY DETECTION -WHY IT MATTERS

WHEN TAMMY FIRST DISCOVERED A LUMP IN HER RIGHT BREAST. SHE THOUGHT IT WAS NORMAL AND WAS NOT BOTHERED BY IT.

It was only when the lump persisted for a few months that she decided to go for a check-up. By the time she went for a follow-up appointment a few months later, the lump had grown by 0.5 cm, and a subsequent biopsy revealed that the growth was cancerous.

"IT'S NOT IN MY GENES."

Dr Wong Chiung Ing, Senior Consultant, Medical Oncology said that women with close relatives who have been diagnosed with breast cancer have a higher risk of developing the disease. However, a large percentage of women can be diagnosed with breast cancer with no known family history of the disease.

"I was very shocked when I found out about my diagnosis," Tammy shares. "I don't have any family history of breast cancer and my gene test was negative so it's not in my genes.

"Fortunately, it also means I don't have a risk of passing the disease down to my children in future."

Receiving a cancer diagnosis can be overwhelming for anyone, especially when it arrives unexpectedly. It is here where many cancer patients benefit from having personalised care within a clinical environment they are comfortable with during the course of their cancer treatment.

"I don't think I'm young but I think I'm too young to be diagnosed with cancer.

"There are things that I worry about as it was my first time and I didn't know what to expect moving forward, so having a clinic environment that is efficient and makes me feel safe and comfortable





was very helpful as I won't have to worry or feel stressed about these things."

WHY EARLY DETECTION MATTERS

Today, Tammy is well along her cancer treatment journey, and goes for a follow-up appointment once every three months, while taking oral medication daily.

"I learnt that when it comes to breast cancer, treatment is given based on how aggressive the cancer cells are, which in turn determines whether you need to do chemotherapy, radiotherapy, or if you need to be on oral medication," she describes.

"I think I was very fortunate that I discovered my disease at a really early stage, as it means that there are more treatment options. If I were to wait one or two years later, it might be too late and I might not be able to survive or would have to do chemotherapy. So I'm very thankful for that.

"Physically, I don't have any major challenges thanks to early treatment, but emotionally, I worry about the future, whether there will be a relapse, and what's going to happen.

> "It's a long journey. It's definitely not something like a cough, fever or a broken leg where you can just heal and move on; cancer is something that will probably stay with you for a lifetime."

"NOT SOMETHING WE SHOULD BE ASHAMED OF"

With many others who are in a similar position, remembering that every individual's cancer journey is not the same is important to understanding the right kind of support that each individual requires, she points out.

"As cliché as it sounds, you only have one life," states Tammy. "Each person's journey is not the same, and in my experience, being able to still be here, every day, is the greatest blessing to me.

"I always look at it as God's blessing, so that I don't allow this episode to leave a black mark in my life. I still have a long life to go, so instead of spending the rest of my life dwelling on this episode, I chose to make full use of my days and make every moment count.

"I think being positive is important, as well as having a strong support system. At the end of it, being diagnosed with cancer is not something we should be ashamed of."









WHAT DRIVES OUR DECISIONS **ON CANCER CARE**

WHEN DAVID EXPERIENCED UNEXPLAINED ANKLE PAIN THROUGHOUT THE FIRST HALF OF 2019, HE BRUSHED IT OFF AS AN UNEXPLAINED INCIDENT. AFTER IT CAME A SECOND AND THIRD TIME, ALONG WITH FREQUENT FEVERS AND PERSISTENT SORE THROATS, HE DECIDED TO SEEK MEDICAL HELP.

It was then that he discovered he had Chronic Myeloid Leukemia (CML).

CML is a cancer of the bone marrow and white blood cells. It is a form of leukemia that is characterised by an increased growth of myeloid cells in the bone marrow and the accumulation of these cells in the blood.

Like many cancers, CML may not show symptoms in its early stages. Some tell-tale signs of CML may include bone pain or swelling at the side of the rib cage when the leukemia cells progress and spread.

Fortunately for David, his CML was treatable.

"The first thing I did was to call my wife and tell her the news," shared David. "There was no crying over the phone because I was reassured by my doctor that it was treatable."

For three months, David underwent a course of treatment that included targeted therapy to control his CML. However, when his ankle pain returned, David found out his CML had transformed into Acute Lymphoblastic Leukemia (ALL), which is characterised by the rapidly progressive growth and accumulation of immature lymphocytes. This was due to a special mutation in the gene driving the CML, making the targeted therapy less effective.

"I was told that the targeted therapy I had been receiving thus far for CML had not been developed far enough for acute leukemia such as ALL," David explained. "Because of that, I was recommended a bone marrow transplant as a treatment course for long-term survival."

FACING THE ODDS OF SURVIVAL

David's biggest concern when he processed the news was the odds of survival. "At the back of my mind, the only knowledge I have of cancer treatment is nausea and hair loss. 'Will I no longer be a human being?'-that was the image I had. But my doctor told me it was humanly doable and humanly survivable.

"When you get hit by such a diagnosis, your priority changes. There was no thinking of money or work. The decision for treatment is the first decision you make. Any other decisions are influenced by that first decision."

Thankfully for David, his insurance took care of the bulk of his financial concerns. Without having to worry about funding for his treatment, David was able to focus on getting well.

CANCER CARE IN A TIME OF COVID-19

However, a different challenge came in early 2020 when the world was hit with the global COVID-19 pandemic and saw city-wide







lockdowns. For vulnerable patients like David, the situation caused minor inconveniences in his cancer treatment journey.

"When you hear about the supermarkets and pharmacies running out of household supplies such as toilet paper and hand sanitisers, we as patients are doubly worried. Without these supplies, we may catch an infection and that may have sent us back to the hospital in no time."

"Patients who have just undergone a bone marrow transplant have weakened immunity and are more susceptible to viruses and infections," commented Dr Lee Yuh Shan, Senior Consultant, Haematology.

COVID-19 also had a social and psychological impact on David's mental health during his posttreatment recovery. "With everyone at home, there was no longer any outside entertainment to keep me occupied," shares David. "So for the first few months, it was mentally difficult because all that came to a stop.

For David, acceptance is key to managing the physical, psychological and emotional turmoil that patients with cancer face.

"When I was reading about leukemia, I found one quote that changed my mindset," shares David. "It says, 'The sooner you accept wholeheartedly that your life will never go back to the way it was before, the happier you will be.'

"There are a lot of big life-changers from diagnosis. If you keep thinking about the past, or if you keep thinking about the future, you will be unhappy.

"If I could tell myself back then what

to do, it'd be to not let anything get to you because we've only got one body. We've only got one life, one health. So we have to treasure that."



VICTORY OVER CANCER... AGAIN

FOR MOST PEOPLE, A SINGLE CANCER DIAGNOSIS CAN BE DEVASTATING. IMAGINE BEING MARY-DIAGNOSED WITH CANCER THREE TIMES IN SIX YEARS: WITH BREAST CANCER IN 2011, OVARIAN CANCER IN 2013, AND CANCEROUS CYSTS AROUND HER UTERUS IN 2017.

The accountant-turned-financial adviser first encountered cancer in 2011, when a routine check uncovered four nodules in her left breast. Tests revealed that of the four nodules, one was malignant.

"Thank God for early detection," she said.

Because of this discovery, Mary underwent an intensive course of radiotherapy, an experience which sapped her. "I felt very sick, and not my usual self; I just had no energy."

As she worked towards recovery, she signed up for the 10 km Great Eastern Women's Run in June of that year. The run was a revelation for her. "When I was doing the run, I felt the energy coming back. I thought, 'Wow! Body movement and exercise really do restore me!" Inspired, she continued to run more half-marathons, and capped off 2012 by completing a full marathon—an entire 42.195 km.

Unbeknownst to her, even as she was growing stronger, something else was developing inside her.

In December 2012, she realised that she had stopped menstruating. She made an appointment to see a doctor in February 2013. That was when the doctor discovered a tumour the size of her fist in her right ovary. Subsequent tests showed it to be malignant.

The news shook her. "I thought, 'How is it possible to get cancer a second time?'"

According to Dr See Hui Ti, Senior Consultant, Medical Oncology, if a patient is diagnosed with cancer a second time, it is usually a recurrence rather than a second cancer. However, she emphasised that while second cancers are rare, they do happen.

"Diagnosing a recurrent cancer is similar to diagnosing cancer for the first time," explains Dr See. "Based on the signs and symptoms, doctors will do an examination to see if there is evidence of a malignant tumour."

If the tumour is malignant, in the case of people who have previously had cancer, the hospital will test to see if the two cancers are alike (a recurrence) or if they are different (a second cancer). According to Dr See, this is an important step as identifying the type of cancer a patient has will determine the treatment the patient will receive.



Mary underwent surgery of her right ovary, and was then recommended 21 cycles of chemotherapy, which Mary resisted. "I thought, 'That's too drastic.'"

She went to seek a second opinion, where she was told she would only need six cycles. Mary was delighted and began treatment in April.

Following surgery, and during the course of chemotherapy, most people would tend to focus on recovery. However, Mary is not like most people. While undergoing treatment, she taught an accounting class. To minimise disruption to her students, she continued teaching even during her chemotherapy.

"It was very painful and I cried," she recalled. One side effect was hair loss, but she took it in her stride. "One day before going to work, my hair fell off after I washed it. I quickly tied a scarf around my head and went to class."

Following chemotherapy, life returned to normal for Mary. But four years later, during a routine

check, she received abnormal results. A pelvic scan showed two cysts around the uterus. "My doctor told me, 'It's time to take out all your reproductive organs and you need to do it ASAP," she recalled.

Her doctor recommended surgery to be carried out in early December, but Mary wanted it done later because she had organised a tour to Changi Airport for residents from the All Saints Home. As a result, it was only the day after taking 14 wheelchair-bound residents through Terminals 1, 2 and 3 that she had her hysterectomy.

Mary has always put others before herself. Part of what kept her going through everything is the fact that she is caring for her 83-year-old mother as well as her younger sister who has Down Syndrome.

Because of her multiple brushes with cancer, Mary has become active in cancer-related charities, doing fundraising for the Breast Cancer Foundation and the Children's Cancer Foundation.

In addition, she is also involved in Coffee and Conversation, a patient support group under CanHOPE—a non-profit cancer counselling and support service. At the monthly meetings, she provides advice, encouragement and a listening ear to cancer patients. "My role is to share and to give them hope. When I refresh others, I become refreshed too," she said.

Based on her experience with cancer, she believes that it is important to get through the stages of denial and anger and into the stage of acceptance.

"Normally, when you first receive your diagnosis, there's the 'why me?' stage. But if you linger too long there, you will have a hard time recovering. When you're in acceptance, that's when the recovery will come because your partnership with a doctor is better at the acceptance stage."







OUR PATIENTS COME FROM ALL OVER THE WORLD TO RECEIVE THE HOLISTIC CARE WE ARE KNOWN FOR. EVEN AFTER THEY RETURN TO THEIR HOME COUNTRY, WE BELIEVE IN DOING WHAT WE CAN TO SUPPORT THEM ON THEIR HEALING JOURNEY.

THAT WAS OUR MOTIVATION FOR SETTING UP CANHOPE OFFICES OUTSIDE SINGAPORE.
BRIDGING GEOGRAPHICAL, CULTURAL AND LANGUAGE BORDERS, WE ARE GRATIFIED TO SAY THAT
TODAY, OUR CANCER CARE REACHES PATIENTS IN SOME 20 CITIES AROUND THE WORLD. MORE
IMPORTANTLY, WE REMAIN COMMITTED TO GROWING OUR CANHOPE NETWORK SO THAT OUR
PATIENTS, NO MATTER WHERE THEY MAY BE, NEVER HAVE TO JOURNEY ALONE.



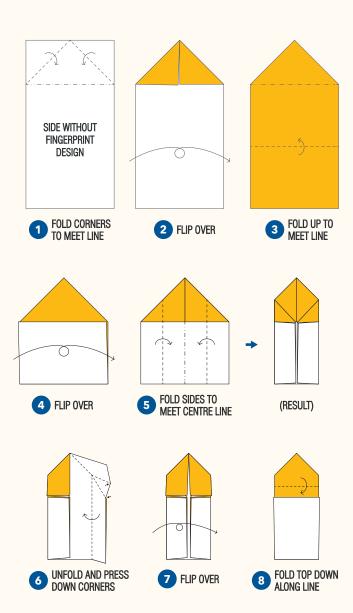
PCC GIVING BACK TO SOCIETY

OVER THE PAST 15 YEARS, PARKWAY CANCER CENTRE (PCC) HAS ACTIVELY ENGAGED IN CORPORATE SOCIAL RESPONSIBILITY (CSR) EFFORTS TO RAISE AWARENESS ON CANCER AND SUPPORT THE LOCAL COMMUNITY.



CREATING HOPE, BUILDING HEARTS

WE INVITE YOU TO BUILD YOUR OWN ORIGAMI HEART
AND WRITE IN MESSAGES OF HOPE TO SHARE WITH OTHERS
AT OUR CLINICS.

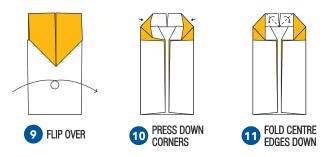


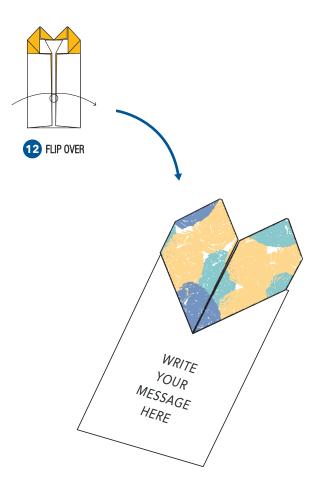
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CONTINUATION OF ORIGAMI FOLDING INSTRUCTIONS





WRITE A MESSAGE ON YOUR ORIGAMI HEART
AND GIVE HOPE TO SOMEONE YOU KNOW OR EVEN
A STRANGER! LET'S BRING HOPE TO EVERYONE
AROUND US.



