



Message

from **Irene Lim** (President)

I started year 2012 feeling somewhat apprehensive, but determined to do my best for LAS. One of my primary goals was to make the association more vibrant by recruiting more volunteers and introducing more member-based activities. I have come some distance though there's much more to be done. I am lucky to have committed Council members and volunteers working alongside me towards my goal.

I hope you have enjoyed reading our newsletters, been empowered by our educational talks and have taken inspiration from the over-comers featured in our newsletters and our new DVD. I also hope that you have taken effort to join us in our activities. I will work further to introduce more activities like get-togethers, dancing classes, excursions etc. However, remember that all these will only be possible with your active participation and support.

2013 is just around the corner. New Year greetings are the best way to remind people that you care. They express hope and wishes for dreams and aspirations to come true. Here's wishing one and all a Happy, Healthy and Joyous year ahead!

I have a great feeling about 2013 and I am very excited about going into this New Year together with all of you!

新加坡狼疮协会主 Irene Lim - 2013 年致词:

2012年上任时, 心里有点忐忑不安, 但我仍然下定决心要为狼疮协会尽一分力。通过招集更多义工和举办更多狼疮会员参与的活动, 我希望能够达到一个首要目标, 就是将狼疮协会活动办得有声有色。在我的努力之下, 狼疮协会有所改变, 但仍有进步的空白。很幸运的是, 狼疮协会执委和义工们与我共同努力, 朝目标前进。

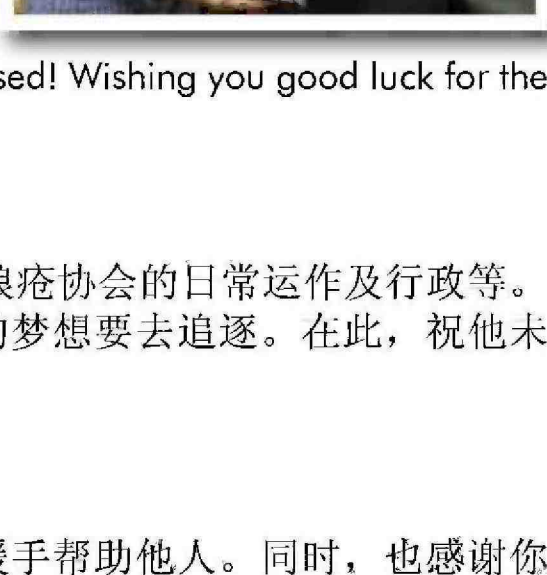
希望读者们喜欢阅读我们的期刊, 并且从教育讲座、期刊或者是DVD中狼疮病患身上获得启发。希望每个读者都会积极参与狼疮协会举办的活动, 我会继续努力为大家举办更多活动, 譬如聚会、舞蹈课和一日游等。但是, 大家要积极参与活动, 我们才有动力继续办下去。

一转眼, 2013年来临了。一句简单的祝福能让人知道你是在乎他们的。祝福承载着期望与梦想。在此祝大家新年快乐, 身体健康。

我期盼2013年会更美好, 很开心能和大家一起迎接2013年。谢谢大家。

Thank you David!

Mr David Au was LAS part-time accountant since August 2005. Apart from doing our accounts impeccably, he was also familiar with the operations and running of our office administration etc. He was indeed an asset to our association. We are sad to see him leave but we do understand he has his own grander plan of things and we wish him all the best! For his invaluable contribution to our association through the years, we presented him with a commemorative plaque.



Here's my personal message to David:

Over the short period of time that we worked together, you have shown yourself to be an amazing colleague and a friend. Thanks for being that wonderful person who was always willing to extend a helping hand. Thanks too for all those times you guided me when I was new in the job. I learnt much about the workings of the association from you. You will be missed! Wishing you good luck for the future.

谢谢你, 大卫!

自2005年8月以来, 大卫担任狼疮协会的兼职会计师。除了管理帐务, 大卫也熟悉狼疮协会的日常运作及行政等。他是狼疮协会重要的成员之一。虽然我们舍不得他离开, 但是我们理解他有自己的梦想要去追逐。在此, 祝他未来一切顺利! 我们颁发一张奖状给他, 以感谢他7年来对狼疮协会的贡献与付出。

在此, 我想对大卫说几句话: 感谢你一直以来愿意伸出援手帮助他人。同时, 也感谢你的指导。我从你的身上学习了狼疮协会的日常运作。我们会想念你的! 祝你一路顺风!

Talk in Review

Dealing with chronic pain in lupus

Dr Warren Fong - Registrar
Department of Rheumatology and Immunology
Singapore General Hospital

1. What are the causes of chronic pain in lupus?

Pain in a patient with lupus may occur due to many different reasons. Common causes include arthritis, destruction of the bone (avascular necrosis), osteoporotic fractures and fibromyalgia.

Arthritis is one of the most common manifestations of lupus and majority of patients will have arthritis at some stage in the course of their disease. Patients will often experience pain, swelling and stiffness of the finger, wrist or knee joints. "Jaccoud's arthritis" is characteristic of lupus, and patients will have reversible joint deformities.

Avascular necrosis occurs when part of the bone does not get blood and dies. The bone may subsequently collapse and cause arthritis if untreated. The hips are most commonly affected. Patients can experience pain in the affected groin, decreased movement of the hip and inability to weight-bear on the affected side. Risk factors include the use of high dose corticosteroids, antiphospholipid syndrome and trauma.

Osteoporosis is a condition where the bones are fragile and prone to break, leading to fractures with minimal or no trauma, termed osteoporotic fractures. They are most commonly seen in the spine, hips and wrists of affected patients. Patients with lupus have higher risk of osteoporosis and fractures compared with general population.

Fibromyalgia is a chronic widespread pain disorder and can affect 16-30% of patients with lupus. It is often characterized by widespread pain and "tender points", and associated with

fatigue, non-restful sleep, cognitive dysfunction and mood disorders.

2. What is the treatment of arthritis in lupus?

Medications such as paracetamol and non-steroidal anti-inflammatory drugs (NSAIDs) can be used. In addition, anti-inflammatory drugs such as prednisolone, and disease modifying agents such as hydroxychloroquine, methotrexate and leflunomide are also used. Occasionally, patients might need the use of biologic therapy, such as Rituximab, TNF inhibitors and others. Active and passive exercises, heat or cold therapy and resting of painful joints are also important.

3. How is avascular necrosis of the bone treated?

Aims of treatment are pain relief and avoidance of weight-bearing activities on the joint. Bisphosphonates may be helpful, and surgical therapy includes core decompression, bone grafting and joint replacement.

4. How do we prevent and what are the treatment options for osteoporotic fractures?

Prevention of osteoporosis is ensuring that we build up our bone density by consuming enough calcium in our diet, as well as participating in regular exercises. It is also important to stop smoking and limit alcohol consumption to no more than 3 drinks per day. The use of medications, for example, bisphosphonates, are

Patients also need to practise joint protection techniques, and they can also obtain assistive devices or splints if needed.



also helpful in reducing the risk of osteoporotic fractures. Once a fracture develops, then therapy would be aimed at reducing pain, ensuring the fracture is stable, and restoring function. Analgesics and intranasal calcitonin can be used to help alleviate pain, whilst surgery will be considered if the fracture is unstable or there are neurological deficits present. Patients are also often advised to participate in physiotherapy sessions and use a supportive devices eg a back brace, as this helps to reduce pain and preserve function.

5. What can I do if I have fibromyalgia?

It is important to set realistic treatment goals between your doctor and yourself. Medications such as pregabalin and duloxetine can be of help. It is important to restore restful sleep, and engage in exercise. Learning various relaxation techniques and coping skills are often helpful to reduce the negative impact of fibromyalgia on your daily life. The active participation in cognitive behavioural therapy is also an important and integral part of the therapeutic process, and there are online resources such as:

www.cfidsselfhelp.org and www.treat4sfm.org which might be useful.

如何治疗狼疮引发的疼痛

1. 为何狼疮会引发疼痛?

狼疮引发的疼痛是由不同因素造成的。一般因素包括关节炎 (arthritis), 骨头缺血性坏死 (avascular necrosis), 骨质疏松症 (osteoporotic fractures) 和纤维肌痛症 (fibromyalgia)。

关节炎 (arthritis) 是最普遍的症状, 多数病患会在某个阶段产生关节炎。病患常常会觉得手指、手腕或膝盖疼痛、浮肿或僵硬。狼疮容易引发雅库斯关节炎 (Jaccoud's arthritis)。病患也会产生可逆性关节形 (reversible joint deformities)。

骨头缺血性坏死 (avascular necrosis) 指的是部分骨头没有获取足够血液而坏死。如果没有获得妥善治疗, 受影响的部分可能坍塌。人体的股骨头最容易出现症状。病患可能觉得受累的部位疼痛, 僵硬及受影响的部位难以承受重量。骨头缺血性坏死 (avascular necrosis) 的危险因子包括: 服用高剂量的类固醇 (corticosteroids), 患上抗磷脂症候群 (antiphospholipid syndrome) 或受到外伤 (trauma)。

骨质疏松症 (osteoporotic fractures) 则指骨质脆弱, 容易骨折。人体的脊柱、腰部和手腕最容易出现骨折。狼疮患者患上骨质疏松症的风险比一般人来得高。

纤维肌痛症 (fibromyalgia) 一般是慢性疼痛。30%-40%的狼疮病患都患有纤维肌痛症。它的症状包括身体多处疼痛, 容易疲惫, 睡眠品质不佳, 产生认知障碍和情绪波动。

2. 如何治疗关节炎?

对乙酰氨基酚 (paracetamol) 和非类固醇消炎药 (non-steroidal anti-inflammatory drugs (NSAIDs)) 等药物可以用来治疗关节炎。此外, 类固醇 (prednisolone) 和羟氯喹 (hydroxychloroquine), 甲氨蝶呤 (methotrexate) 和来氟米特片 (leflunomide) 等疾病调节剂也能用来治疗关节炎。有些患者可能需要接受物理治疗, 如服用利妥昔单抗 (Rituximab) 和肿瘤坏死因子抑制剂 (TNF inhibitors)。除此之外, 患者也可以进行有氧和无氧运动, 尝试热敷或冷敷疗法及获得足够休息。患者应该学习保护关节的技巧。如果有需要, 患者也应该购买辅助器。

3. 如何治疗骨头缺血性坏死 (avascular necrosis)?

一般治疗方法是舒缓疼痛和避免触碰受影响关节。其他方法包括服用药物 (Bisphosphonate) 和进行手术如髓芯减压 (core decompression), 骨质移植 (bone grafting) 和关节替换 (joint replacement)。

4. 如何预防和治疗骨质疏松症 (osteoporotic fractures)?

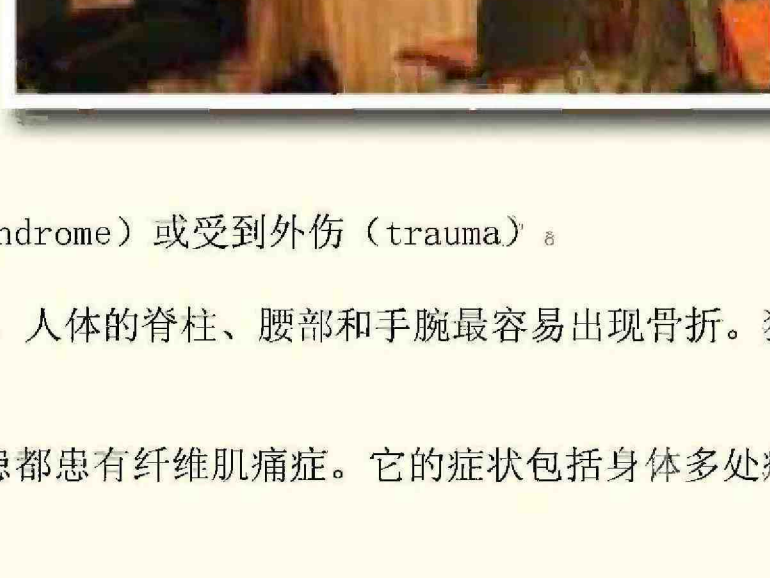
患者该摄取足够钙质, 增强骨质并且常常运动, 才能预防骨质疏松症。此外, 烟应该禁烟, 一天的酒量也该控制在三杯以下。一般药物如bisphosphonates能减低患上骨质疏松症的风险。一旦骨折, 进行治疗能舒缓疼痛, 确保伤势稳定并且逐渐恢复关节功用。服用Anal gesics和 intranasal calcitonin 等止痛药能舒缓疼痛。倘若伤势不稳定或是出现神经功能障碍 (neurological deficits), 才考虑进行手术。

患者应该常常进行物理治疗并且使用辅助器如背部辅助器, 以便舒缓疼痛和维护身体组织功能。

5. 如何治疗和纤维肌痛症 (fibromyalgia)?

患者该和医生商量, 制定实际的目标。一些药物如 pregabalin 和 duloxetine 能舒缓疼痛。患者应该摄取足够的睡眠并且经常运动。此外, 学会放松心情和采取积极乐观的态度能减少和纤维肌痛症对生活的影响。此外, 积极参与心理治疗也是很重要的, 不可或缺的。一些网页如:

www.cfidssselfhelp.org 和 www.treat4sfm.org 也提供额外资料。



LAS Empowerment Talk cum Year-end Party

狼疮协会教育讲座和年终派对

LAS Empowerment Talk cum Year-end Party was held on 3rd November 2012 at the Deck On 9, Singapore General Hospital. The Emcee was, as usual, our Council member and long-time Volunteer, Mr Chan Suan Liang. As always, he did a superb job!

The talk on 'Dealing with Pain in Lupus' was conducted by Dr. Warren Fong Weng Seng, Registrar, RAI Dept, SGH. Apart from fulfilling our association's aim of empowering our members with Lupus-related knowledge, LAS Talks also acts as a platform for our members to mingle and socialize.

The day's programme also included games, Lucky Draw and a Belly dance performance by professional Belly dance Teacher, Ms Angelina Tay and her students. A glimpse of their amazing performance is shared through the photos in this issue.

This year, we also presented Certificate of Appreciation to our volunteers. It was a wonderful party and everyone had fun! It is heart-warming to watch the excitement of the regular attendees as they catch up with one another. Personally, I love seeing the familiar faces and I particularly enjoy meeting new faces as it is, to me, a testament of the reach of our association.



2012年11月3日, 狼疮协会在新加坡中央医院举办教育讲座和年终派对。(照片1)当晚的主持人是狼疮协会的执委, Mr Chan Suan Liang。他是会会的长期义工及经验丰富的主持人。

Dr. Warren Fong Weng Seng 为大家在教育讲座讲解 "如何治疗狼疮引发的疼痛"。

除了增强会员对狼疮的知识, 狼疮协会也是个绝佳的社交平台。

当日的节目包括游戏, 抽奖及肚皮舞。专业肚皮舞老师, Ms Angelina Tay 和她的学生所呈现的精彩表演。

今年, 我们也首次为义工们颁发服务证书。

年终派对举办得有声有色, 每个人都玩得很开心。能看到会员们聚在一起聊天真的很温馨。我很开心看到熟悉的脸孔和一些新脸孔。因为对我来说, 这代表狼疮协会不断的在进步。

Talk in Review

Sjogren's syndrome: Dealing with Dryness

Dr Faith L Chia - Consultant
Department of Rheumatology, Allergy and Immunology - Tan Tock Seng Hospital

What is Sjogren's syndrome?
Sjogren's syndrome is a chronic autoimmune disease in which a person's white blood cells attack their moisture-producing glands such as the salivary glands or tear glands.

d) Other uncommon symptoms in Sjogren's syndrome include joint aches, rashes, lung involvement causing hardening or fibrosis of the lungs or nerve involvement that might result in weakness or numbness.

Who gets Sjogren's syndrome?
It is estimated that 1 in 500 people are affected by Sjogren's syndrome, out of which 90% are usually women in their mid 40s to 50s. Sjogren's syndrome can occur on its own (called primary Sjogren's syndrome) or with another autoimmune disease like lupus (called secondary Sjogren's syndrome). Half of patients with Sjogren's syndrome have another rheumatic disease, and up to a quarter of patients with lupus may also have Sjogren's syndrome. Because the symptoms can be mild and develop gradually, the diagnosis can sometimes be delayed for many years.

How would my doctor diagnose Sjogren's syndrome?
Your doctor will ask questions about symptoms that may suggest Sjogren's syndrome and do a physical examination. There will be a test for tear production (called a Schirmer's test) where filter paper is put under your eyelids and the amount of tears you produce is measured. You may also have to do blood tests for antibodies in Sjogren's syndrome. If the diagnosis is not clear despite these tests, your doctor may offer a minor salivary gland biopsy to confirm the diagnosis.



tears from the eye may be done. Patients with dry eyes can also help their eyes with simple measures such as avoid having air or smoke blowing into their eyes, humidifying the air and giving their eyes frequent breaks, particularly when working on a computer or screen.

How would Sjogren's syndrome affect the body?
The most common symptoms in Sjogren's syndrome are dry eyes and dry mouth.

How would my doctor treat Sjogren's syndrome?
Sjogren's syndrome cannot be cured, but it can be treated. Treatment revolves around symptom relief, the use of anti-inflammatory medication and drugs such as hydroxychloroquine (which is also commonly used in lupus) or stronger immune suppressants if there are other organs involved.

a) Dry eyes can feel tired or gritty, causing a sensation that something is stuck in the eye. Patients might experience blurred vision if the tear film isn't formed properly and the eye may become red in very dry eyes.

a) Treatment of dry eyes
Dry eyes can be treated with tear substitutes that might come in the form of eye drops or ointments.

b) Dryness in the mouth can cause difficulty in chewing or swallowing due to lack of saliva. Some patients feel a burning sensation on their tongue, and those who wear dentures may find it uncomfortable. Patients with Sjogren's syndrome are at risk for increased tooth decay as saliva protects our teeth from bacteria.

Patients with very dry eyes may require preservative free eye drops. Some patients require anti-inflammatory eye drops as well, these can only be prescribed by a doctor.

c) Salivary gland swelling may occur in up to 20-30% of patients with Sjogren's syndrome. These usually occur as swelling of the cheeks just under the ear which may be painless.

If the dry eyes do not respond to tear substitutes, a procedure called punctal occlusion which blocks the draining of

Some useful resources: www.sjogrens.org/home

www.rheumatology.org/practice/clinical/patientinfo/diseases_and_conditions/sjogrens.asp

干燥合症治法

陈露露 - 副顾问医生
风湿科, 过敏免疫科门诊 - 陈露露医生

什么是干燥综合症?
干燥综合症是一种慢性自身免疫病, 身体的免疫细胞对抗外分泌腺 (口水腺, 眼泪腺) 导致眼睛与口干等症。

医生如何诊断干燥综合症?
医生主要靠患者的症状和临床症状。检查包括测量泪液分泌, 抽血检查出 anti-Ro 或 anti-La 抗体。如病症不明确, 可需要唇腺活检。

谁会患上干燥综合症?
大约每 500 人便有一人会患上此病, 90% 为女性。任何年龄都有机会患上, 但普遍于 40 至 50 岁时发病。病症分为原发性和继发性, 例如红斑狼疮或类风湿关节炎病人也能患上干燥综合症。病患者如不认为干燥症状是一种疾病, 而不就医, 可延误诊断多年。

治疗法
干燥综合症不能根治, 但可用药物对症治。减轻炎症。药无包括抗疟疾药Hydroxychloroquine, 消炎药, 与其它免疫抑制剂如有严重病变。

干燥性综合症如的病变
a) 干眼症: 病者可出现眼睛干涩、异物感、视物模糊、眼结膜红腫等。

干眼症治疗法包括常用人工泪液 (滴眼液或软膏), 少数病者可须医生配地消炎眼药水。严重干眼症可须泪腺堵塞手术。病者该避免冷气房和干冷气, 避免风吹, 香烟烟雾等。病者可把空气加湿, 在工作时阅读时多休息眼睛。

b) 干口症: 病者可出现口腔味异常、吞咽困难、舌燥、唇裂、蛀牙、牙龈发炎。

干口症治疗法包括常用唾液替代品, 病者该避免用药物刺激口水分泌 (如 pilocarpine)。病者该避免冷饮、凉水, 加湿空气, 避免吸烟或喝过多含咖啡因的饮料。采纳良好口腔习惯, 饭后刷牙, 用牙线清除牙缝中的食物, 避免使用含酒精的漱口水, 定期接受牙医检查。

c) 病患者 (20-30%) 可出现腮腺肿胀或颌下肿胀。

d) 分泌腺以外的病变包括关节疼痛, 关节炎, 皮疹, 容易疲劳等。较罕见的病变包括肺硬化, 神经系统发炎甚至麻或无力。

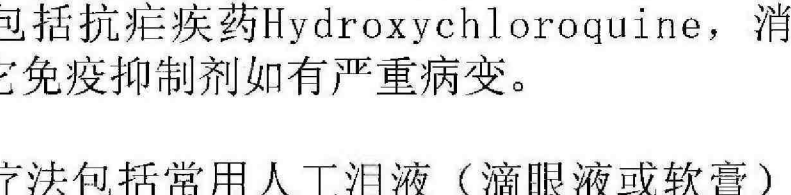
SLE Patient Booklet

In line with our association's aim at patient support and education and the raising of public awareness, we have printed a new SLE guide for patients that provides information on symptoms, causes and diagnosis of the condition, explanation and answers to questions on lupus, updated information on outlook of the disease, new drugs and treatments available and advice on self-help and how sufferers can manage their own condition. The booklet was jointly written by the doctors on our LAS Council. We are distributing the booklets free of charge. Please call our office at 6254 9130 or email us at enquiry@e-lupus.org if you would like to get a copy.

全身性红斑狼疮

Systemic Lupus Erythematosus

A guide for patients



Get to know other members of our Association, share information about your health, and be the first to know about the latest activities and events on Facebook! Do you have a question about lupus? Simply email us so our editorial team may try answering you in the next newsletter.

Like us on facebook

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Reach Us

Office Operating Hours:
Mon-Fri, 12-5pm
Tel/Fax: 6254 9130
Email: enquiry@e-lupus.org
Website: www.e-lupus.org
Mailing Address:
Singapore Road P.O. Box 460
Singapore 322101

Editorial Team & Co-opted Member
Text-Translated Member
Text-Translation

Corinne Kang
Teh Hui Ping