

# ACEINSIGHTS

Driving better decision-making in healthcare

## MAKING A SUSTAINED IMPACT



I hope you have enjoyed the previous issue of ACE Insights, in which patients shared how device subsidies have positively impacted their lives. In this issue, you will hear from healthcare professionals who have leveraged ACE's work to enhance their practice.

We are glad to share that ACE's recommendation to subsidise acupuncture for lower back and neck pain has not only made treatment for patients like Mrs Kong and Mr Kek Beng more affordable but have also greatly improved their quality of life. As you read more about it, do check out the refreshed technology guidances as well.

You may be familiar with ACE Clinical Guidances (ACGs) that provide concise, evidence-based recommendations for specific areas of clinical practice. Each ACG is developed in collaboration with a multidisciplinary group of local experts representing relevant specialties and practice settings. Dr Manju Chandran, Chairperson of one of the ACG Expert Groups, outlines her involvement in ACG development and implementation and shares her views on how ACGs contribute to better clinical care in Singapore. Dr Sharon Shen and Ms Marine Chioh also talk about how the use of ACGs benefits their respective professions as family physician and nurse educator.

Another key area of our work is ACE Clinical Update Service (CUES), our new national educational visiting service. We are heartened by how this personalised approach to continuing professional education supports healthcare professionals like Dr James Cheong and Dr Wong Toon Heng in delivering evidence-based care to improve patient outcomes. Read about their experience of ACE CUES educational visiting and how they apply what they have learnt.

I invite you to take advantage of the clinical resources and continuing professional education activities offered by ACE. We look forward to continuing our collaboration with you to drive the practice of appropriate care to optimise patient outcomes and the value of healthcare.

### DR DAPHNE KHOO

Executive Director, ACE  
Deputy Director of Medical Services,  
Healthcare Performance Group, MOH

## SUBSIDY TO SUPPORT A MORE HOLISTIC WAY TO TREAT LOW BACK PAIN AND NECK PAIN

Adults with low back and neck pain can now enjoy subsidised acupuncture treatments at public healthcare institutions.



ACE conducted technology evaluations, in consultation with acupuncturists and senior clinicians for the use of acupuncture to aid in pain management and rehabilitation. These evaluations informed Ministry of Health's (MOH) Medical Technology Advisory Committee's (MTAC) decision to subsidise acupuncture for low back and neck pain in PHIs.

Ms Melissa Ong, who is an acupuncturist, considers it an achievement that more doctors now recognise the positive effects of acupuncture and increasingly refer patients for such treatment. She believes that MOH subsidies have helped make the treatment more affordable and accessible to patients. She treats an average of 160 patients a month and shares that 85 per cent of them see her for pain reduction or functional improvement in low back pain and/or neck pain. Consistent with Ms Ong's observations, statistics from MOH show that musculoskeletal disorders accounted for about 13 per cent of disability-adjusted life years in 2017 and

62 per cent of patients who received acupuncture treatment for musculoskeletal disorders at public healthcare institutions (PHIs) in 2018 sought help for low back pain and neck pain.

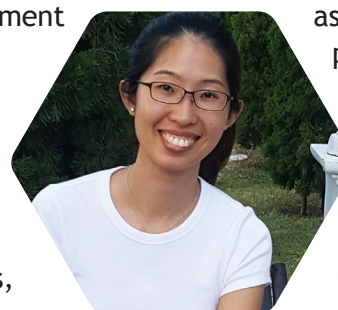
### AN EFFECTIVE COMPLEMENT TO STANDARD CARE

Standard treatment options for low back and neck pain such as analgesia, physiotherapy and surgery may not satisfactorily or safely alleviate these conditions. ACE's evaluation found that acupuncture was generally more effective than standard treatments in reducing low back pain in the short term ( $\leq 3$  months). When administered

as an adjunctive therapy, acupuncture provided additional pain relief, with potential benefits lasting up to one year. In addition, acupuncture was also found to be more effective in reducing functional disability within one week when used as a therapy adjunct to standard care for treating low back pain.

That is not to say that acupuncture should replace standard treatments. Ms Ong,

*Continued on page 2*



**MS MELISSA ONG,**  
Acupuncturist at Sports and  
Exercise Medicine Centre,  
Yishun Health Campus



### TRUSTWORTHY INFORMATION FOR SOUND CLINICAL DECISION-MAKING

Read about the usefulness of ACGs through different perspectives of healthcare professionals. *Page 3*



### ENHANCING CLINICAL PRACTICE THROUGH EDUCATIONAL VISITING

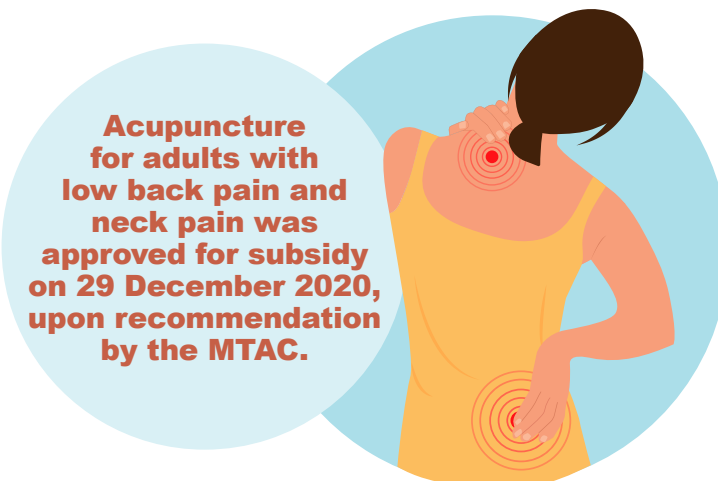
See how doctors benefit from ACE CUES educational visiting, a convenient and engaging form of continuing professional education. *Page 4*



who works at the Sports and Exercise Medicine Centre under Yishun Health – where most patients receive acupuncture as an adjunct to standard care – emphasises that acupuncture complements standard treatments and is most effective when they are used together. “This way, we can personalise treatment plans of each patient. We also observe better clinical outcomes for patients who comply with multidisciplinary treatment plans. Therefore, I always encourage patients to take their medicines or do their exercises even if they express a preference for acupuncture only,” says Ms Ong.

She explains that acupuncture should be performed by a trained practitioner to minimise risk of infection and haematoma. “Most patients experience soreness at the sites of acupuncture temporarily, but that is a normal reaction from treatment,” she clarifies. “Some patients experience an immediate effect from the

**Acupuncture for adults with low back pain and neck pain was approved for subsidy on 29 December 2020, upon recommendation by the MTAC.**



treatment, but most require a course of treatment complemented by standard care like physiotherapy.” Ms Ong adds that patients with acute conditions generally recover better than those with chronic ones. On 29 December 2020, acupuncture for adults

with low back pain and neck pain based on ACE’s evaluation, was officially approved for subsidy in PHIs upon recommendation by MTAC. Besides cost savings, Ms Ong added that another benefit of receiving acupuncture in public hospitals where patients are treated for their conditions is better communication between the acupuncturist and other healthcare professionals like physicians, physiotherapists and podiatrists. “Acupuncturists have access to tests performed in the hospital but would have to rely on doctor’s notes for tests done outside the hospital,” she says.

[Find out more about ACE’s Technology Guidance on acupuncture for adults with low back pain and neck pain](#)



## HOPE FOR PAIN-FREE LIVING

The acupuncture subsidy not only helps patients defray treatment costs but also empowers them with a better quality of life.



**P**ain is something Mrs Kong battled with on a daily basis since she injured her back in March 2020. The situation was so bad that she thought of ending her life. The 51-year-old who enjoys working and is not used to being housebound says candidly, “I could not accept my condition and felt handicapped when I couldn’t work. No work means no income and it was frustrating.” Diagnosed with cervical spondylosis and lumbar spondylosis, Mrs Kong relied on Anarex, a strong painkiller, to alleviate the pain in her lower back, neck and right leg when it was too much to bear. “I was often in a bad mood because of the strong pain when standing, walking, sneezing and coughing. Even sleeping was difficult,” she recounts.

Although her doctor recommended surgery, Mrs Kong was apprehensive about the outcome – citing the example of a friend’s neighbour who had a similar condition as hers who committed suicide after the failed surgery left him permanently bedridden. She elaborates, “I want to be able to walk freely and not be a burden to my family. There’s no guarantee that I can walk and work if I go for surgery.”

### THE HEAVY FINANCIAL BURDEN

Being medically unfit to work put a strain on Mrs Kong’s family finances. She has two school-age children to support and her husband became the sole breadwinner. She had used up her savings and sold jewellery that was part of her dowry to fund her medical treatments, including physiotherapy and acupuncture at private clinics. “I have tried acupuncture at a private centre last year, but it was too costly to carry on with the treatment,” Mrs Kong added.

### ACCESSING AN AFFORDABLE TREATMENT PLAN

Hoping to get better without surgery, Mrs Kong requested to be referred to Singapore General

Hospital (SGH) for acupuncture. That proved to be a turning point in the management of her condition. At SGH, Mrs Kong received medical counselling from a medical social worker who helped her come to terms with her condition and informed her about the acupuncture subsidy for adults with low back pain and neck pain that was announced on 29 December 2020. “Acupuncture was very costly. I felt so grateful to learn that my acupuncture treatments could be subsidised as it helped to lower the overall expenses,” reveals the homemaker who used to share the financial burden.

### AN IMPROVED QUALITY OF LIFE

After five weekly acupuncture treatments under Mrs Kong’s acupuncturist at SGH, whom she says understands her condition very well and always shares information on her condition and attends to her queries, she felt less pain in her lower back. The intensity of pain she feels has dropped from 8 on a scale of 10 to 5. Now 4.5 months since she first started on 26 July 2021, she shares, “I am happier than before! Acupuncture has helped in promoting blood circulation and reducing pain points. My body is less tense and I feel less tired too. I can walk more steadily, cook dinner more often and stand for longer periods than before since the pain is less intense and frequent.” The reduction in pain put Mrs Kong in a more positive frame of mind, which helped improve her relationship with her family. Ever since, Mrs Kong diligently does stretching exercises daily and learned to grow vegetables and maintains a garden at the corridor outside her flat to cheer herself up.

“The progress I have observed through subsidised acupuncture at SGH gave me renewed hope that I should not give up trying to get better. It gave me the motivation to move forward,” she shares. Adding that she confidently requested to cancel her lower back surgery after the sharp pain in her right leg stopped after having ten sessions of acupuncture, Mrs Kong continues, “I was initially very afraid of the needles used in acupuncture but after trying it for a few times, I realise it is not painful. I favour acupuncture over taking painkillers as there are no side effects and I encourage people to give it a try if they have similar conditions.”

## ANOTHER BENEFICIARY OF THE ACUPUNCTURE SUBSIDY

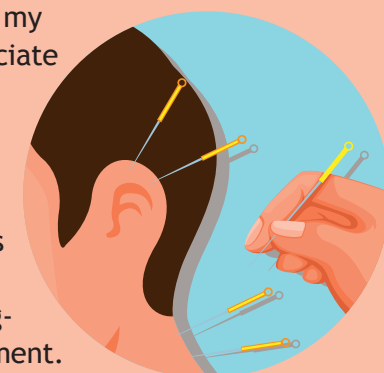
69-year-old retiree Mr Kek Beng suffers from neck, lower back and knee pain. He too has experienced reduced pain and improved mobility since starting acupuncture treatment at Singapore General Hospital in May 2021.

**Why did you make the decision to receive acupuncture at a government hospital?** Acupuncture is a good alternative to oral medication for pain management as the latter may have side effects in the long term. I had tried acupuncture previously in private clinics and now the subsidy has made acupuncture more affordable for me to keep up with regular treatments.

**How did you cope with your condition before receiving the treatment?** I have to take my oral painkillers and do my physiotherapy exercise daily.

**How did your condition affect your daily life?** Due to the pain restricting my mobility, I cannot continue with my day-to-day activities to keep fit such as walking and playing sports.

**How has the acupuncture subsidy helped you?** Although I cannot be as active as before I was diagnosed with the back pain issue, I feel less pain and I am more mobile. Acupuncture has improved the quality of my life. The subsidy has also made it more affordable to treat my conditions. I appreciate the subsidy and encourage others suffering from age-related degenerative issues to try it as an alternative for long-term pain management.







# TRUSTWORTHY INFORMATION FOR SOUND CLINICAL DECISION-MAKING

Find out the value of ACE Clinical Guidances (ACGs) from healthcare professionals involved in ACG development or regularly use ACGs in their practice.

**A**CE Clinical Guidances (ACGs, also known as Appropriate Care Guides) provide concise recommendations to support clinical decision-making, based on best available evidence at the time of development. ACGs are contextualised to Singapore, and each is developed in collaboration with a multidisciplinary group of local experts representing relevant specialties and practice settings.

One of these experts, Associate Professor Manju Chandran, shares insights on her involvement as the Chairperson of the Expert Group for the [ACG 'Osteoporosis – identification and management in primary care'](#).

## How can ACGs enhance clinical practice?

ACGs are derived through rigorous evaluation of relevant literature and present well-considered, feasible recommendations suitable for Singapore's context, thereby bridging the gap between science and clinical practice. As each ACG is developed

with experts from associated specialties and practice settings, ACGs incorporate multidisciplinary viewpoints, offering balanced information in a non-prescriptive manner for healthcare professionals to individualise. Furthermore, ACGs are structured in a readily understandable format. This is critical for time-strapped healthcare professionals.

“ACGs are a unique and novel approach to providing clinical guidance in that they provide sensible, pragmatic and non-prescriptive recommendations contextualised to Singapore and are easy to implement in clinical practice.”

## Which aspects of ACGs do you find most helpful?

The conciseness of ACGs is one of their most attractive features. I have also received feedback that pictorials, graphs and infographics in ACGs summarising vital information are extremely helpful.

## What was interesting about your experience in the Osteoporosis ACG Expert Group?

It was interesting to me that even though Singapore is not a big country, it is diverse and healthcare professionals in the country have differing viewpoints on the same subject. Admittedly, it was challenging to bring varied perspectives together as the Expert Group's Chairperson, but this mix added to the utility of the ACG across a range of healthcare environments while holding fast to scientific evidence.

## How have you used or shared the Osteoporosis ACG in your own practice?

Besides applying the Osteoporosis ACG in my own practice, I also use it to highlight critical points regarding osteoporosis care in educational activities to other specialists and primary care practitioners. ACGs are positively received, and the main theme from comments I hear among fellow healthcare professionals is that they find ACGs very easy to use in their daily practice.



Associate Professor Manju Chandran, Senior Consultant and Director of Osteoporosis and Bone Metabolism Unit, Department of Endocrinology at Singapore General Hospital

## WHAT ACG USERS SAY

I like that ACGs are concise, and I love the patient education aids that come in the form of useful infographics. I refer to them quite a bit when educating patients on managing their chronic disease. Knowing that ACGs are endorsed by experts and professional bodies and used nationwide, my patients are more assured and are more likely to adhere to the treatment prescribed.

For instance, I find the [ACGs on pre-diabetes](#) and [gout](#) highly relevant and helpful as patients with these conditions are commonly encountered – I often have the ACGs open on my computer screen and use the infographics to explain recommended regimens to my patients. In particular, the ACG on gout has also changed the way my patients perceive this condition. Patients may regard gout as an acute joint problem and put up with frequent flare-ups. The ACG on gout has helped my patients see that it is in fact a chronic disease, in which a healthy lifestyle has a large part to play and that they need to keep their uric acid levels at bay through urate-lowering therapy (ULT) to reduce the risk of flare-ups.



DR SHARON SHEN,  
Family Physician in a heartlands practice

I use ACGs in team-based training I conduct for nurses in Primary Care Networks (PCNs) and Community Health Centres (CHCs), sharing with them on how to apply the recommendations in practice. For example, recommendations in the [ACG 'Foot assessment in people with diabetes mellitus'](#) have been incorporated into nursing assessment and documentation, including a risk assessment tool developed by a podiatrist from KTPH and a clinician from NHGP to support nurses in performing foot assessment. In addition, guided by the ACG, capability to test for peripheral arterial disease (PAD) using toe pressure has been improved so more patients with PAD can be identified and cared for accordingly. In these ways, the ACG facilitates better communication between healthcare team members, and more importantly, enables more patients to receive the appropriate treatment they need.



MS MARINE CHIOH,  
Nurse Trainer at  
Agency for Integrated  
Care (AIC)



# THE CUES TO ENHANCE CLINICAL PRACTICE THROUGH EDUCATIONAL VISITING

ACE launched ACE Clinical Update Service (CUES) in October 2020, providing Singapore's nationwide educational visiting service for healthcare professionals. In educational visiting, clinical updates based on best available evidence are delivered through individualised discussions (while the discussions typically take place in person at the healthcare professional's workplace, they have been conducted online due to COVID-19). Complementing other forms of continuing professional education, educational visiting is a convenient and efficient way for healthcare professionals to keep abreast of relevant developments in clinical practice. Here, primary care doctors share their experience of ACE CUES educational visiting on the topic of asthma management.



Dr James Cheong Siew Meng (left)

## ACTIONABLE AND VALUABLE INSIGHTS THROUGH ONE-ON-ONE DISCUSSIONS

Dr James Cheong Siew Meng, Family Physician with C3 Family Clinic @Aljunied Crescent, shares how ACE CUES educational visiting has supported his clinical practice and improved the care of his patients.

**A**s a busy general practitioner (GP), a challenge Dr James Cheong faces is staying up to date with clinical advances while juggling the day-to-day responsibilities of a private practice.

When he learnt that GPs could get insights on asthma management through the new educational visiting service, he was among the first to sign up. He sees a number of patients with asthma, and thought it would be advantageous to align his practice with the latest local guidelines to further benefit his patients.

Dr Cheong points out that primary care settings can be diverse, and each has its own enabling and stumbling factors. General continuing medical education (CME) can paint broad strokes across the important domains of asthma care, but not how each GP can actually translate clinical guidelines to care for individual patients.

"So that's where ACE CUES educational visiting comes in to fill the gap. What is good about it is that

it not only summarises the latest evidence and key take-home messages of the guidelines. It is also a good vehicle for GPs to express their practice limitations and get a personalised understanding of how to apply the recommendations in their practice," he explains.

Dr Cheong's session provided him with focused information and practical resources that can be readily incorporated in patient care, including on assessing inhaler techniques and educating patients about asthma control. He finds the curated resources shared by the educational visitor (such as patient education flipchart and inhaler technique videos) to be useful tools in making patient education more efficient in a busy practice.

"I have also used the inhaler technique videos as a teaching aid for my clinic assistants, who then help to extend the care of patients," he comments, adding that the information on use of spacers has been particularly valuable, since nebuliser use is minimised during the COVID-19 period considering the infection risk.

**ACE CUES educational visiting has provided a one-on-one, learner-centric platform, where practitioners can draw on credible, evidence-based clinical updates to enhance patient care. Through this platform, I have gained actionable medical knowledge to better manage patients with asthma."**

Summing up his views on the session, Dr Cheong says, "With the information gained, my staff are more empowered and have more job satisfaction as they can contribute more meaningfully. Knowing what we have put in place is recognised as part of the latest clinical guidelines gives me and my clinic assistants more confidence."

## INTERACTIVE AND TARGETED PROFESSIONAL EDUCATION

Dr Wong Toon Heng, GP at Faith Medical Clinic and Surgery, finds ACE CUES educational visiting to be a refreshing and engaging CME option.

**W**hen Dr Wong Toon Heng first heard about educational visiting in an email from ACE, he thought it was a novel idea and decided to give it a go. It was the first time he had clinical recommendations presented through a customised approach, and the session exceeded his expectations.

"As doctors, we've all sat through big group CME lectures, probably not absorbing as much of the content as intended," Dr Wong reflects candidly.

"The ACE CUES educational visiting session helped me see the finer details of the clinical guidelines and I am able to glean more out of the guidelines because of the format. With the engaging interaction, I could absorb

the information better too," he adds.

Another plus point is its convenience that GPs can arrange to have the discussion at their preferred timing.

"It is definitely more time-saving and user-friendly for doctors who are running their own clinics as we can schedule it for outside clinic hours," Dr Wong says appreciatively.

Dr Wong is also impressed by the ability of the educational visitor to

understand his challenges and work with him on the practical aspects of introducing certain guideline recommendations in his clinic. Some of the proposed practice changes could be implemented within a week.

The discussion with the educational visitor offered him a fresh perspective on tackling specific barriers to effectively manage asthma. Upon the educational visitor's suggestion, Dr Wong has expanded the range of medications he stocks to include generic inhaled corticosteroid. "This helps to better tailor the choice of medication to the patient's needs and can save them money too," he shares.

The session also affirmed some of Dr Wong's current practices, and he is now more assured about

managing children with asthma, especially those under the age of three years. "The session's duration was excellent and although it wasn't very long, it is relevant and reinforces my understanding of the current guidelines on asthma management," he concludes.



Dr Wong Toon Heng

**The main benefit of ACE CUES educational visiting as compared to the usual CME lectures is that I can backtrack and seek clarification on certain points with the educational visitor at any time, which is not possible during a formal lecture."**

### ARE YOU INTERESTED IN ACE CUES EDUCATIONAL VISITING?

Scan now to [register to receive news from ACE](#) (to be notified of similar activities or clinical resources by ACE in the future)!





# SPOTLIGHT

## 2021 — A YEAR OF BUILDING ACE'S CONTINUING PROFESSIONAL EDUCATION EVENTS

Recognising the spectrum of ongoing needs of healthcare professionals for continuing professional education, in addition to providing educational visiting (see article 'The cues to enhance clinical practice through educational visiting' on page 4), ACE began holding a series of educational webinars in 2021 delivering high-quality content on best practice.

Developed with and presented by experts on the respective subjects, the take-up of the webinars throughout the year has been encouraging, with a total attendance count of more than 1,600.



### ACE WEBINARS IN 2021\*

- 1 Managing asthma — what every primary care clinician needs to know  
**DATE:** 14 January 2021
- 2 When to order MRI for low back pain  
**DATE:** 7 August 2021
- 3 Let's talk about asthma — making asthma patient education meaningful  
**DATE:** 7 September 2021
- 4 Managing pre-diabetes — beyond guidelines for better outcomes  
**DATE:** 27 November 2021

\*Recordings of selected webinars will be made available on the [Video Resources section](#) of the ACE website soon.

### ARE YOU INTERESTED IN ACE WEBINARS?

Scan now to [register to receive news from ACE](#) (to be notified of similar activities, available webinar recordings or other clinical resources by ACE in the future)!



## ACE NEWS

### LATEST TECHNOLOGY GUIDANCES

[ACE's Technology Guidances](#) explain subsidy recommendations made by MOH's Drug Advisory Committee (DAC) and Medical Technology Advisory Committee (MTAC) for evaluated health technologies. They also include the Committees' rationale for the subsidy recommendations and a summary of key clinical and economic evidence that informed their deliberations.



List of ACE's Technology Guidances published in the last 6 months



List of ACE Clinical Guidances (ACGs)

### LATEST CLINICAL GUIDANCES

[ACE Clinical Guidances](#) (ACGs) provide concise, evidence-based recommendations to inform specific areas of clinical practice and serve as a common starting point nationally for clinical decision-making. ACGs are underpinned by a wide array of considerations contextualised to Singapore, based on best available evidence at the time of development. Each ACG is developed in collaboration with a multidisciplinary group of local experts representing relevant specialties and practice settings. ACGs are not exhaustive of the subject matter and do not replace clinical judgement.

### ACE'S EVALUATIONS AND NEGOTIATIONS CONTRIBUTED TO MORE AFFORDABLE CANCER DRUG TREATMENTS



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