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HIPS THAT HURT

A rising number of younger people here are seeking help for hip pain



Akshita Nanda
Correspondent

Cherie Koh, 34, had to change jobs twice because of persistent hip pain.

In 2024, the mother of three worked at an infant care centre, but found it too hard to sit cross-legged.

She switched to assembling furniture and repair work. However, the pain grew worse. "I couldn't squat, I couldn't walk for a long time, I couldn't climb a ladder," she recalls. "It was very painful."

She had keyhole surgery in 2025 to repair a tear in the labrum of her right hip, as well as shave off excess bone growth that caused the thigh bone to rub against the hip socket painfully.

She is now back to work, this time installing curtains and blinds, or removing them, for clients of a local laundry service.

Koh is among a rising number of people aged 20 to 50 who are seeking help for hip pain.

Doctors say these people are more likely to engage in high-impact activities that stress the joint. Increased activity can lead to injury or to discomfort from structural issues in the joint that might otherwise be asymptomatic.

They tell The Straits Times that hip pain used to be a less common complaint.

Wang Ming, an adjunct assistant professor from National University Hospital's department of orthopaedic surgery, says: "Five years ago, I might have seen one or two patients with hip pain in a typical week. Today, it is not uncommon for me to see four or five such patients weekly."

The consultant puts this increase across all age groups down to more people choosing to run or do high-intensity fitness activities, which increase the risk of hip injury.

People also want to stay physically active for longer, even as they age. They thus seek help for conditions that limit their activity.

Consultant T. Jegathesan, of Tan Tock Seng Hospital's (TTSH) department of orthopaedic surgery, has noticed more people aged 20 to 50 seeking medical attention for hip pain. In 2022, he saw fewer than 50 patients in this age group. In 2025, he evaluated 150 patients in this age group for hip pain.

Orthopaedic surgeon Lim Chin Tat from private practice The Or-

thopaedic Practice and Surgery says he has seen at least a 10 per cent increase in patients aged 20 to 45 complaining of hip pain.

The senior consultant attributes this to more participation in sports and exercise, including fitness races such as Hyrox.

"These events often require repetitive deep squat-type movements, such as wall balls, burpees and sandbag lunges. The increased hip flexion and loading involved in these activities can place stress on the hip joint and may lead to injuries," he says.

WHERE DOES IT HURT?

Wang says pain in the front of the hip or groin region is commonly associated with osteoarthritis; or with tears of a cartilage structure in the hip, known as the labrum; or with a structural abnormality called femoroacetabular impingement (FAI). People with FAI have an abnormally shaped thighbone or femur which comes in repeated contact with the edge of the hip socket.

Pain over the outer hip is associated with inflammation or irritation of the tendons and bursae, which are fluid-filled sacs that cushion the bones, tendons and muscles around the joints.

Pain in the buttock region is often not caused by the hip, but because of issues with the lumbar spine and surrounding muscles.

Lim says pain from hip degeneration through arthritis is more common in older people. Patients aged 20 to 45 are more likely to suffer from FAI, also known as hip impingement.

Doctors say it is not known why some people have extra bony prominences around the hip joint. It could be due to genetic factors, or because of high levels of sporting activity during adolescence.

It is not clear how many people in Singapore have FAI. The condition is better known in the US, where it is estimated that around 54 in 100,000 people have hip impingement.

LABRUM TEARS IN HIP CAN HURT

Two-thirds of the hip-related cases Jegathesan sees involve labral tears. The labrum is the cartilage that cushions the hip joint. It also acts as a seal, stabilising the ball-like top of the thighbone in the hip socket.



A 3D-printed hip model. Doctors say hip pain used to be a less common complaint. ST PHOTO: GAVIN FOO



Before surgery in 2025, Cherie Koh, 34, could not climb ladders because of hip pain. ST PHOTO: LIM YAOHUI

A torn labrum usually will not heal on its own and needs to be stitched up through surgery.

Jegathesan says the labrum can tear because of accidents, or repetitive loading of the hip joint through activities such as high-intensity interval training (HIIT), football, CrossFit, running and gym-based strength training.

Even lifting and carrying children or other loads in daily life can increase stress on the hip.

Hip impingement can also cause labral tears. Small tears in the labrum begin to enlarge because of repetitive stress. The resilience of the labral and cartilage tissue declines, and people begin to notice discomfort and pain.

In the case of his patient Koh, the pain affected her ability to make a living, as well as care for her three children aged nine to 12.

She opted for surgery and had to stay off her feet for three to four months to heal. During this time, she did paperwork, instead of more laborious work that paid better.

"I saved up and was prepared for a long period of recovery," she says. "Before the surgery, I felt very restricted. It was very painful. After the surgery, I can sit cross-legged again."

ABNORMAL BONE SHAPE CAN LEAD TO PAIN

Chia Jun Siong, 30, has been playing badminton since primary school.

A few years ago, he began experiencing pain after his weekly sessions that made it hard for him to sleep.

"It was like a knife poking the skin," he says, adding that the pain surfaced only when he lay down.

Chia, who works in his family's wholesale business, runs up to three times a week as well. Running caused him some discomfort, but not as much as playing the racket sport.

In 2024, he was sent to TTSH for whiplash after a car accident and decided to seek help for his hip as well.

Magnetic resonance imaging revealed excess bone growth around the head of the thighbone or femur that rubbed abnormally against the hip socket when he moved. He also had a tear in the labrum.

He had a keyhole procedure, hip arthroscopic surgery, to shave the excess bone and repair the labrum in 2025.

CONTINUED on C2

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‘Not being able to exercise was tragic for me’

FROM C1

He had to stay off his feet for several months, and needed a family member's assistance even to sit on the toilet.

“Not being able to exercise was tragic for me,” he says. “My body felt different. The more I slept, the more tired I became.”

He resumed exercising about six months after surgery, and is now preparing to run the 2026 BYD Singapore International Marathon in December.

It will be his first marathon, and he aims to run another in Tokyo in 2027.

After that, he will go for further surgery to correct the impingement of his left hip.

“I want to complete these races first because the recovery period is very long,” he says.

IS SURGERY ALWAYS NEEDED?

Doctors say many cases of labral tears or even hip impingement can be managed through physiotherapy and lifestyle modification.

For example, if repeated deep squats cause pain, opt for other strength exercises. Switch to stationary cycling and swimming instead of running.

Physiotherapy can help patients build strength and learn to move properly to reduce pain and stress on the hip joint.

Max Khoo, 33, had the option of treating the dull pain in his hip through physiotherapy and conservative treatment.

However, the public servant decided to go for surgery at TTSH in January because he wanted to maintain a more active lifestyle. He had hip arthroscopy to shave away excess bone and to repair a labral tear.

After surgery, since he could no longer keep up his routine of running, HIIT or birdwatching hikes,



Chia Jun Siong, 30, with orthopaedic surgeon T. Jegathesan. He had hip surgery in 2025. ST PHOTO: GAVIN FOO



Max Khoo, 33, had surgery in January to address the dull pain in his hip. He is now training for a 170km hike in Europe. ST PHOTO: ARIFFIN JAMAR

he focused on physiotherapy to strengthen the hip. He also incorporated more strength training into his regimen, doing exercises such as seated chest presses, dumbbell presses and lat pull-downs.

“The surgery was a wake-up call that it's time to get my health together and build muscles for old age,” he says.

Back on his feet, he is now training for a 170km hike in Europe around the Mont Blanc massif.

He urges others to seek help early if they feel hip discomfort affecting their daily activities.

“Listen to yourself when you know there's a problem,” he says. “Hips don't lie.”

akshitan@sph.com.sg

4 ways active people can reduce the risk of hip injury

Akshita Nanda
Correspondent

Doctors say hip pain has become a more common complaint in the past five years, with more people aged 20 to 50 seeking medical help.

This is because more people in that age group take part in high-intensity physical activity and sports.

Many of the cases doctors see are for tears in the labrum or cartilage that cushions the hip joint and stabilises the head of the thighbone or femur as it operates in the hip socket.

Here are four ways to reduce the risk of hip injury.

1. STRENGTHEN AND STRETCH

Consultant T. Jegathesan from Tan Tock Seng Hospital's department of orthopaedic surgery points out that strong hip and core muscles stabilise the joint.

Strength workouts should include exercises that train the gluteal muscles, the core and the deep hip rotators.

Planks, yoga and pilates are low-impact exercises that can help.

Orthopaedic surgeon Lim Chin Tat from private practice The Orthopaedic Practice and Surgery says it is important to do dynamic stretches before exercise, and static stretching afterwards.

Muscle tightness, especially from the hip flexors, can aggravate pain or lead to injury.

2. WARM UP WITH NEUROMUSCULAR TRAINING

Incorporate balance, strength, plyometric and agility exercises into your warm-up.

Adjunct assistant professor Wang Ming from the National University Hospital's department of orthopaedic surgery says these reduce injury risk by improving movement mechanics and muscular coordination.

Single-leg deadlifts, lateral hops and side planks are all helpful before a run, for example.

Weightlifters might start with bodyweight squats, checking for proper form before adding load.

3. INCREASE INTENSITY CAREFULLY

Wang says many injuries occur when people increase their running mileage or training intensity too quickly.

Build baseline muscular strength before moving on to more demanding activities, the consultant adds.

4. DO A VARIETY OF EXERCISES

Jegathesan suggests including low-impact activities such as swimming or stationary cycling along with high-impact sports and activities like running.

Make sure your training regimen includes time spent on mobility, strength and endurance exercises as well.

“A balanced approach helps keep people active while preventing overload, rather than relying on a single activity, such as only running or strength training,” he says.

Doctors also advise seeking help early for persistent or worsening hip pain, especially if it interferes with mobility and daily activity.

Wang says: “Early assessment can help identify underlying conditions and allow timely treatment before symptoms progress further.”

Melinda Wenner Moyer

In the course of a therapy session with Rachel Needle, a US clinical psychologist in West Palm Beach, Florida, patients sometimes say they feel triggered by a variety of things, from everyday annoyances to devastating reminders of traumatic events.

These events vary so much that the word “trigger” has lost much of its meaning, Needle has found. While the term is rooted in trauma psychology, the way it's applied clinically does not always align with how it's commonly used.

In a popular thread with more than 400 comments on Reddit, users shared “uncommon triggers” that remind them of unpleasant past experiences, including Spaghettios, the smell of body wax or foods in crinkly bags.

Yael Schonbrun, a clinical psychologist at Brown University, said that while there are benefits to incorporating psychological terms like trigger into the public lexicon – doing so can reduce stigma and build a cultural shorthand to help people describe their feelings and experiences – there can be a downside too.

The overuse of the word can undermine the experiences of people with a history of trauma or mental health disorders, she said, and prompt others to handle challenging experiences in unhealthy ways.

WHAT ‘TRIGGER’ ACTUALLY MEANS

In psychology, the word has most often been tied to trauma.

A trauma is “an overwhelming event that outmatches a person's ability to cope in the moment”, said Lisa Damour, a clinical psychologist in Cleveland and the senior adviser to the Schubert Center for Child Studies at Case Western Reserve University.

Traumatic memories affect people differently from the way other memories do, Damour said.

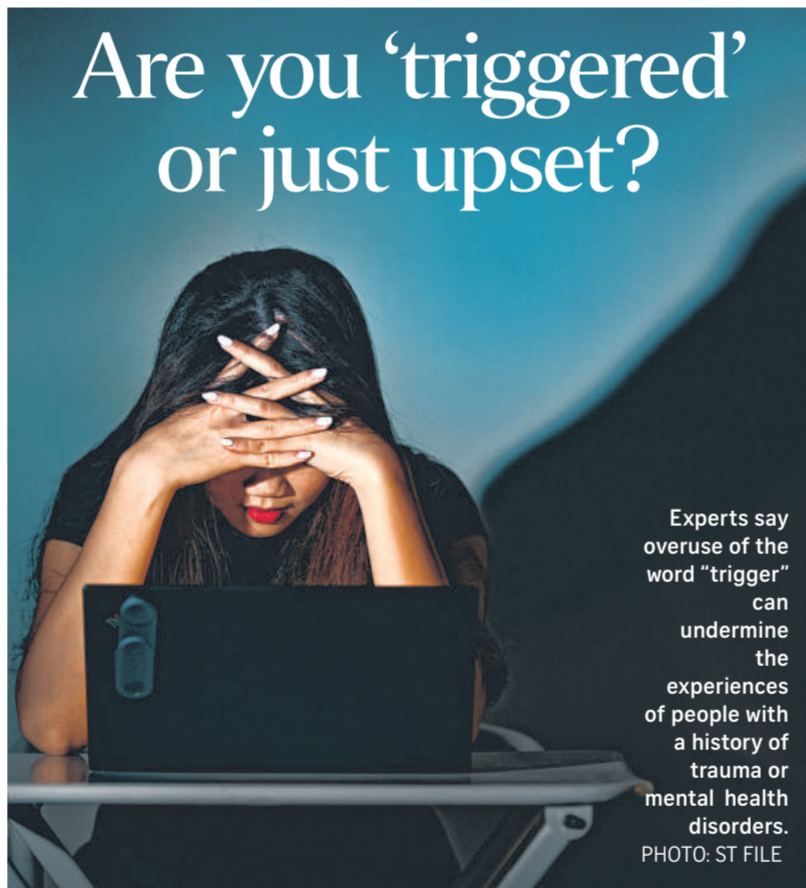
When reminded of a traumatic event, some people may feel as if they are re-experiencing it, rather than just remembering it – “like they're back there, like it's all happening again”, she said. This involuntary re-experiencing is referred to as having flashbacks.

A trigger is a cue or experience that can prompt a flashback, Damour said, adding that it might be a place, smell, sound or situation that “suddenly rockets a person back in time to a traumatic event”.

Because flashbacks are so upsetting, many trauma survivors try to avoid their triggers, Schonbrun said. Avoiding a trigger provides a sense of safety and relief that tells the brain the fear and avoidance were warranted.

But avoidance can just make things worse because it reinforces anxiety, she added.

Psychologists typically use exposure therapy to help people



Experts say overuse of the word “trigger” can undermine the experiences of people with a history of trauma or mental health disorders. PHOTO: ST FILE

work through traumas by having them recount traumatic experiences in a safe setting, Damour said. The goal is that over time, people stop associating their triggers with immediate danger and learn that they don't need to avoid them.

The word trigger is sometimes used in other mental health contexts, Needle said, typically to describe identifiable cues that increase symptoms or problematic behaviours. For example, people diagnosed with substance use disorders, eating disorders or bipolar

disorder might refer to such cues as triggers.

When people use the term instead to refer to everyday things that incite annoyance or offence, they run the risk of conflating traumatic experiences or mental health struggles with everyday challenges, experts said.

There's a big difference between being affected by something and really developing clinical symptoms, Needle added.

Using triggered to describe negative everyday experiences may cause people to misinterpret discomfort as danger. They may start to think that bothersome experiences or everyday challenges are harmful, rather than seeing them as opportunities for learning and growth, Needle said.

If people interpret all negative experiences as harmful or traumatic, they may “see themselves as permanently damaged rather than capable of handling situations”, she added.

Some studies suggest that so-called trigger warnings, which are used to protect people from potentially emotionally distressing material, can reinforce avoidance and anxiety.

A fear of experiencing discomfort when confronted with certain things may even harm relationships, Schonbrun said.

When people say they're feeling triggered while having an argument, for example, the comment could “function as an emergency

brake”, she added, ending what might have otherwise been constructive dialogue.

Sometimes, the word can be used sarcastically or dismissively, Needle said – as in, “Oh, you're just triggered” – to minimise someone's legitimate negative reaction to a comment or action.

“It is basically a way of saying your response is a ‘you problem’, a sign of weakness or oversensitivity, rather than acknowledging that something genuinely hurtful was said or done,” she added.

WIDENING VOCABULARY BEYOND ‘TRIGGERED’

Given all of these potential pitfalls, what should people do or say when they hear the word in conversation or are tempted to use it?

When Damour hears people say casually that they “feel triggered”, she doesn't chide them. “I usually just say, ‘Tell me more about that,’” she said.

Needle suggested that people try to reflect on their difficult experiences and use more specific words or phrases to describe their feelings, like, “That really frustrated me”, or “That reminded me of something difficult that happened in the past”.

“That kind of language is more accurate,” Needle said, “and it helps people understand what you're actually feeling and needing in that moment.”

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<p>ANGEL EYE & CATARACT CENTRE Dr Allan Fong, BBM, PBM, MBBS (Singapore), MMed (Ophth), FRCS (Edinburgh), MRCP (London), FAMS</p> <p>Senior Consultant Eye Surgeon, with Special Interests in Cataract Surgery (FLACS), LASIK & Refractive Surgery, Pterygium, Dry Eye Syndrome, Glaucoma, Diabetic Retinopathy, AMD, Myopia Control and General Ophthalmology</p> <p>+ Royal Square Medical Centre @ Novena • 101 Irrawaddy Rd, #21-07, 5329565 Tel: 6514 3338 • WhatsApp: 9615 0398 • Website: www.angeleye.com.sg</p>	<p>Dr GOH EYE SPECIALIST A/Prof Goh Kong Yong</p> <p>Cataracts, Lasers, Glaucoma, Diabetic Retinopathy, Retinal Disorders, Vision Loss, Double Vision, Floaters, Child Myopia, Blur Vision, Dry Eyes, Neuro-Ophthalmology</p> <p>+ Mount Elizabeth Novena Hospital #07-37, 38, Irrawaddy Road Singapore 329563 • Tel: 6684 4140 / 9644 4830 (24hr)</p>	<p>SPECIALIST PAIN INTERNATIONAL CLINIC Dr Nicholas Chua Hai Liang, MBBS, MMed, Ph.D</p> <p>Special interests in complex spine pain, headaches, facial pain, nerve pain and severe cancer pain.</p> <p>+ Mount Elizabeth Novena Specialist Medical Centre 38 Irrawaddy Road, #09-43, Singapore 329563 Tel: (65) 6339 1880 / 8511 2119</p>
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