

PLEXUS

A quarterly e-newsletter by the Primary Care Academy

Editorial Foreword

Primary Care Academy's newsletter Plexus is ending 2025 with two diverse articles. The 1st article on, "**Longevity Medicine – What do we Tell our Patients?**" offers an evidence-based peek at this interesting topic co-written by two Family Physicians. Longevity may increasingly appeal to many in super-aging populations, including Singapore. Healthcare professionals may need to be cognizant of these emerging trends and developments in healthcare to provide stewardship to their patients and the community.

The 2nd article on, "**Personal Mobility Devices (PMDs) –Do's and Don'ts of Navigating in Clinics**", addresses the latest guidelines on the use and safety of both the users and other pedestrians impacted by the presence of such moving devices. This article is courtesy of our Occupational Therapy (OT) colleague at Khoo Teck Puat Hospital.

The Plexus editorial team wish all readers, Season's Greetings, A Merry Christmas and a very Blessed New Year ahead!



"You are never too old to set another goal or to dream a new dream."

– Aristotle

*"A dream written down with a date becomes a goal.
A goal broken down into steps becomes a plan.
A plan backed by action makes your dreams come true."*

– Greg S. Reid

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Primary Care Academy



Longevity Medicine – What do we Tell our Patients?

By:

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Toa Payoh Polyclinic and*

*Dr Chen Tongyuan, Family Physician, Associate Consultant, Assistant Director,
Family Medicine Development, NHG Polyclinics.*



Teresa is a well-informed 67-year-old Senior Executive in a multinational company who has just retired. She comes to the polyclinic regularly for follow-up of hypertension, which is well controlled. She is an empowered patient and takes pains to be well informed about health matters. Today she chats with you, her Family Physician, as she had stumbled on a video on “blue zones” (regions where people have an unusually high life expectancy). This triggered some questions about quality of life and improving health span.

“Doc, I am curious. I want to live a reasonably long life, but quality of life is very important to me as I don’t want to be a burden to my loved ones. I know you have told me about healthier.sg and preventive health measures like vaccination and health screening, but can you tell me more about this so-called “Longevity medicine” that I sometimes hear my friends talk about?”



What is the healthspan-lifespan gap?

Despite high life expectancies (83.5 years), Singaporeans' average healthspan — years lived in good health — lags at 74 years¹. Bridging this decade-long gap improves patients' function, quality of life and reduce stress on healthcare, economy and society.

What is healthy longevity medicine?

Healthy longevity medicine, aka precision geromedicine, is a medical discipline which aims to optimise health and extend healthspan by targeting ageing processes². It is the clinical application of geroscience, which studies biological processes of ageing that drive chronic diseases, thereby providing "pre-preventive care".

Here are some common definitions that you may come across in your reading of literature on this topic.



Gerodiagnostics refer to diagnostic approaches that quantify biological aging through measurable indicators (biomarkers of ageing)³.

Types	Examples
Biological / Molecular	Complete blood count, serum insulin, gut microbiome testing
Physiological	Body composition analysis, VO2 max
Digital	Heart rate, Sleep tracking, step count



Ageing clocks are models using biomarkers which reflect individual's ageing trajectory relative to the reference population.



Gerotherapeutics include lifestyle, social, pharmacological and nutraceutical interventions.

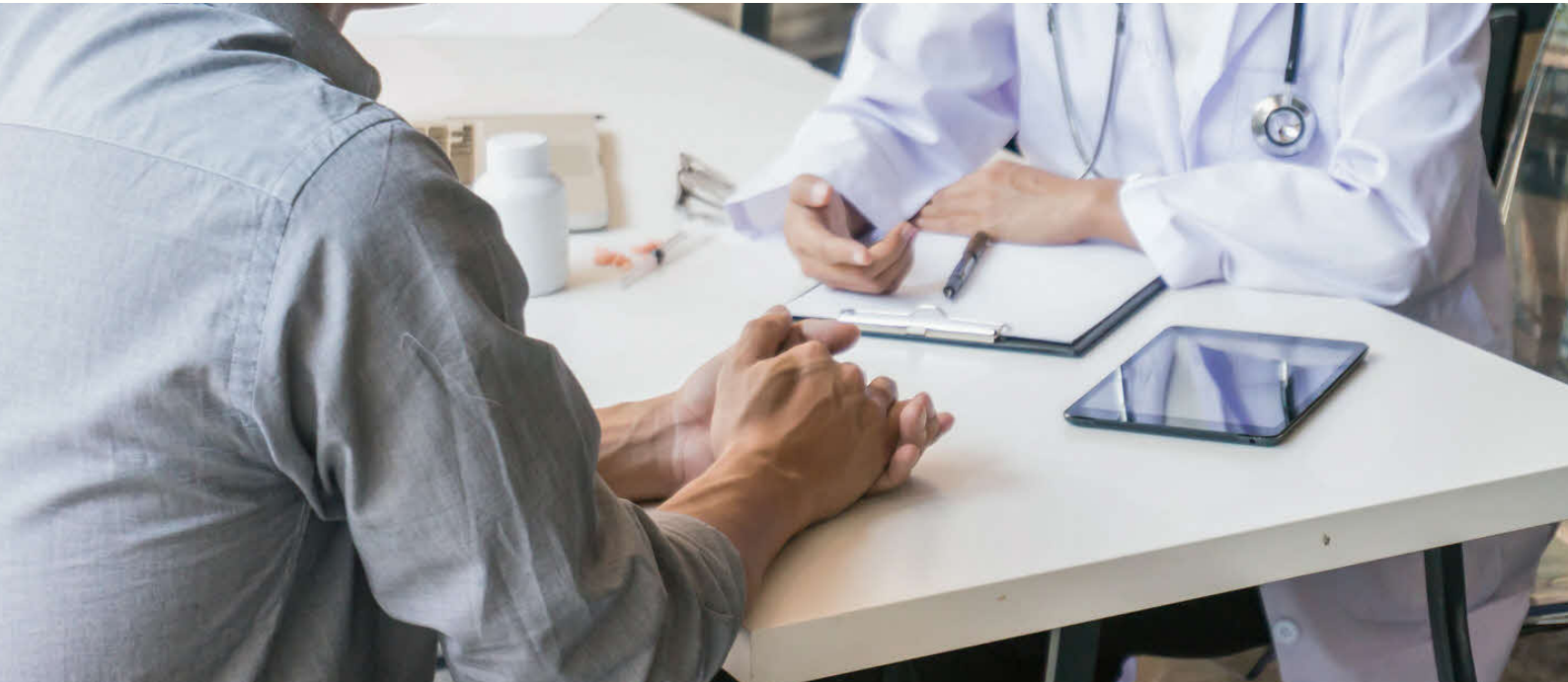
Types	Examples
Lifestyle and Social	• Exercise (aerobic, resistance, balance) • Diet (plant-rich, low in red meats) • Avoiding harmful substances (smoking) • Community engagement
Pharmacological	Repurposed drugs* e.g., Metformin, Rapamycin
Nutraceutical	Omega-3, Vitamin D, Nicotinamide mononucleotide (NMN)*

* Some interventions have shown promise in animal studies but lack robust human evidence. For now, supplements are most beneficial for those who have deficiencies. Clinicians should therefore guide patients towards proven interventions while awaiting further research.



Primary care and healthy longevity

Primary care practitioners should keep abreast of evolving evidence, co-develop patients' health plans and help them navigate the ever-expanding and accessible pool of medical information⁴. While some interventions seem in the realm of the affluent or savvy (e.g. biohackers), other evidence-based interventions (e.g. tailored exercise prescriptions, use of wearables) can be readily implemented in our daily practices.

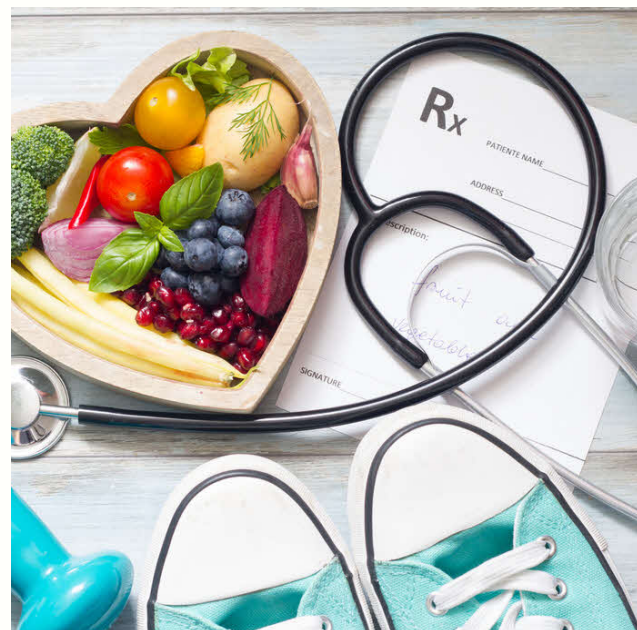


Back to Teresa

As her Family Physician, I would reaffirm her goal of staying healthy and disability-free.

Apart from managing her hypertension and ensuring her age-appropriate cancer screening is up to date, I would perform a comprehensive review of her diet, physical and social activities to tailor a lifestyle action plan. For instance, I would encourage a multi-modal exercise regime at sufficient frequency, duration and intensity. I will encourage the use of wearables to track exercise, sleep and vital signs to empower her to continue healthy behaviours and to track progress.

Involving the patient actively in her own management strengthens our therapeutic relationship.





Personal Mobility Devices (PMDs) – Do's and Don'ts of Navigating in the Clinics

By:

Ms Kelly Tang, Principal Occupational Therapist, Khoo Teck Puat Hospital



Dr Nathan is a Family Physician who runs a busy neighbourhood GP Clinic.

Yesterday his clinic manager, Jane, highlighted that a patient on a fast-paced PMD had nearly run over the foot of another patient who was waiting to consult Dr Nathan outside his clinic. On another occasion, a patient on a PMD nearly fell when Jane tried to get her out of the PMD for a urine test.

This set Jane thinking about how she could advise those with PMDs who come to the clinic. Jane wondered if there were any latest guidelines governing the use of these PMDs. She wondered if the guidelines were under LTA or MOH. She was keen to learn what she could do to ensure the safety of both, the patient on the PMD, as well as the rest of the patients in the clinic.

Dr Nathan consulted an Occupational Therapist friend in the hospital for advice on the latest guidelines governing PMDs.



Updated guidelines and recommendations for personal mobility aids (PMAs)

Updated guidelines and recommendations for personal mobility aids (PMAs)

PMAs empower individuals with walking challenges to independently access healthcare services and public facilities. Following growing concerns, Ministry of Transport (MOT) and Land Transport Authority (LTA) had introduced revised PMA regulations. Healthcare professionals must familiarise themselves with these changes to enhance patient support and maintain clinic safety.

Readers may refer to the latest guideline at this [link](#)¹, under rules and guideline.

Revised Regulations Effective Q1 2026

- ❄️ **Assessment for Mobility Scooters (AMS)** - Users must obtain an AMS from a doctor or their regular occupational therapist, verifying medical necessity. Those with existing government-funded mobility scooters will receive automatic certification. This requirement does not apply to motorised wheelchairs.
- ❄️ **Revised Speed Parameters** - Maximum permitted speed for PMAs on public walkways reduced from **10km/h to 6km/h**. Current PMAs capable of speeds up to 10km/h may continue operating until end-2028 provided they adhere to the new 6km/h limit on public paths.
- ❄️ **Dimensional & Weight Restrictions** - PMAs must remain within **70cm width, 120cm length, 150cm height**, and **300kg laden weight**, except where medically exemption apply.





Revised Regulations Effective Q1 2026

Do's	Don'ts
Keep entryways and corridors clear and wide for PMA manoeuvring.	Don't move or adjust patient's PMA without consent.
Maintain ramps, lifts, and auto doors regularly.	Don't rush the patient's movement or transfer.
Offer assistance only after asking.	Don't assume a patient cannot transfer, ask first.
Provide designated parking or waiting areas for PMA.	Don't leave PMA blocking access to ramps, doors or accessible toilets.
Train staff on PMA driving etiquette, safety, and updated regulations so that they can advise on deviant models or when unsafe driving is observed.	Don't allow charging of PMA within clinic premises, unless in pre-approved designated safe zones.



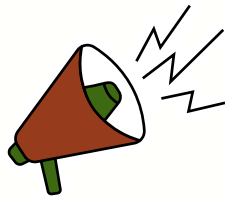
Final Thoughts

The updated PMA guidelines, paired with considerate clinic modifications, can substantially improve healthcare accessibility. Through simple yet effective changes — reviewing physical access, respectful patient interaction, and clear wayfinding signage, clinics can transform the healthcare journey for PMA users whilst benefiting all patients.



PRIMARY CARE ACADEMY

Primary Care Academy (PCA) is a one-stop, regional training centre catering to the training needs and skills upgrading of primary care doctors, nurses, allied health professionals and ancillary staff in primary care. Besides, PCA also provides informative and interactive health talks and workshops for community/public and corporate audiences alike.



UPCOMING EVENTS

Clinic Assistant Course



Basic Level

Module 1 (Patient Care & Health Management)	: 22 Jan or 14 Mar 2026
Module 2 (Patient Engagement & Care Transition)	: 28 Jan or 7 Mar 2026
Module 3 (Communication, Patient Confidentiality & Ethics)	: 31 Jan or 10 Mar 2026
Module 4 (Safe, Effective Healthcare Practices & Medication)	: 24 Jan or 3 Mar 2026

1.30pm - 6.00pm
Ang Mo Kio Polyclinic

For more information, visit

<https://for.sg/apueg2>

Course fees apply. National Silver Academy (NSA) subsidies available & SkillsFuture credit claimable.

INTERPRETATION OF SPIROMETRY RESULTS



28 Feb 2026 (Sat), 2.00pm to 5.30pm

Virtual Workshop

Speaker: A/Prof Tang Wern Ee

Course fee: \$165, CME/CNE points pending approval

For more information, visit <https://for.sg/isr>

Contact us

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At PCA, learning never stops.