

A Multidisciplinary Approach To Cancer Care

Cancer care is complex and the treatment of the cancer patient is multifaceted

In cancer care, no one size fits all. With newer treatments for various types of cancer constantly emerging, there are different strategies for therapy, which should be tailored and personalised to the patient and the disease to achieve optimal results. Dr Lee Ser Yee and Dr Tan Wah Siew of Surgical Associates shares why a multidisciplinary team (MDT) is a key driver for successful treatment.

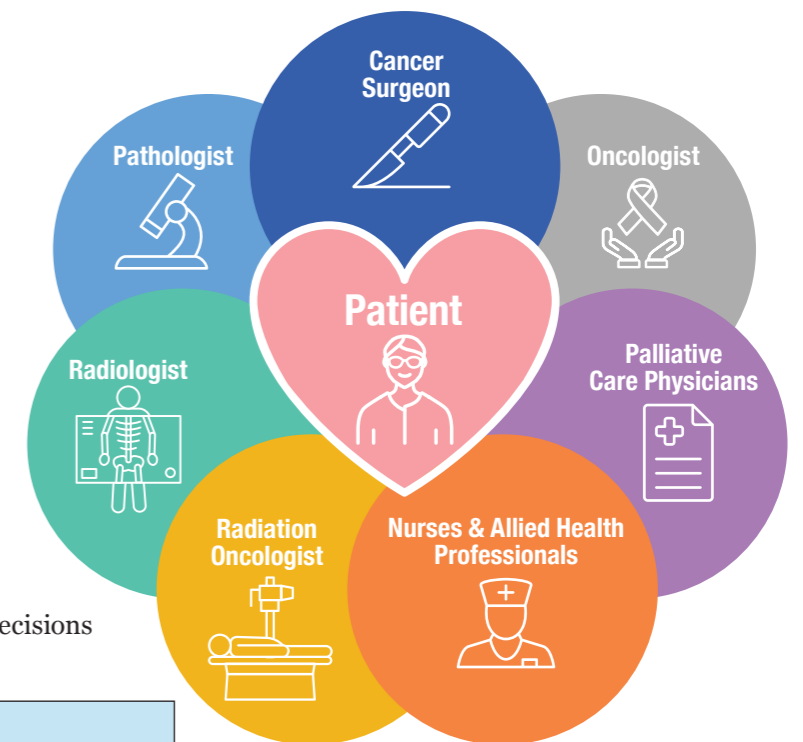
Multidisciplinary team approach

In a disease as complex as cancer, each aspect should be cared for by a different specialist. Members of a multidisciplinary team (MDT) include a cancer surgeon, oncologist, radiation oncologist, pathologist, radiologist, palliative care physicians, nurses, and allied health professionals such as nutritionists.

This collaborative team approach consolidates

all relevant information and options to develop an individualised treatment plan for each patient.

Such an approach is integral to modern cancer care and has been recommended by many cancer centres as best practice. Studies have shown that MDT decisions



lead to revision of cancer diagnoses, treatment plans and better adherence to evidence-based guidelines. Importantly, patient satisfaction and outcomes have shown excellent results.

Metastatic Colorectal Cancer - Improving the standard of care

Colorectal cancer, the leading cancer in Singapore, is a prime example of how the MDT approach works best. Says Dr Tan Wah Siew and Dr Lee Ser Yee: "Up to 60 per cent of patients with colorectal cancer may develop liver metastases during the course of their life. For example, a patient diagnosed with colorectal cancer that has spread to the liver would traditionally be treated with chemotherapy only, and/or colorectal resection."

Today's newer strategies may now include various treatment options: single-stage simultaneous liver and colorectal resection followed by chemotherapy, liver-first approach followed by chemotherapy and colorectal resection, or Colorectal resection followed by chemotherapy and/or liver resection. What's more, both colorectal and liver surgery can be performed with minimally invasive techniques, leading to faster recovery and the possibility of a shorter interval between surgery and chemotherapy.

Each strategy has its role and potential benefits. Such complex decision-making is best achieved on an MDT platform where the patient's condition and disease can be discussed as a team and a consensus achieved.



SURGICAL ASSOCIATES
Minimally Invasive Surgery

Cancer care is complex and ever-changing. We believe by working together as a team, we can offer evidence-based care, translating to the best possible outcomes for our patients.

Dr Lee Ser Yee & Dr Tan Wah Siew

Dr Lee Ser Yee

MBBS, M.Med, M.Sc., FAMS, FRCS(Ed)
Senior Consultant

Hepatopancreatobiliary & General Surgeon

Dr Tan Wah Siew

MBBS, M.Med, FAMS, FRCS(Ed)
Senior Consultant

Colorectal & General Surgeon



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MULTIDISCIPLINARY TEAM APPROACH TO CANCER CARE

- Colorectal liver metastasis
- Metastatic neuroendocrine cancer
- Close collaboration with Oncologists and various cancer specialists and professionals

Suite 08-07, Mount Elizabeth Medical Centre

3 Mount Elizabeth, Singapore 228510

Tel: 6454 0054 • WhatsApp: 9012 0054 • ask@surgicalassociates.sg

