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Subject: Embargoes Speech by Minister Lim Hng Kiang, 17 Jan 2000, 8am

# *Singapore Government*

## ***PRESS RELEASE***

Media Division, Ministry of Information and the Arts, #36-00 PSA Building, 460 Alexandra Road,  
Singapore 119963. Tel: 3757794/5

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### **EMBARGOED TILL AFTER DELIVERY**

**OPENING SPEECH BY MR LIM HNG KIANG, MINISTER FOR HEALTH AND SECOND MINISTER FOR FINANCE TO THE 9TH NATIONAL HEART CENTRE OF SINGAPORE LIVE DEMONSTRATION COURSE IN CARDIOVASCULAR INTERVENTION - CONJOINT MEETING WITH THE PARIS COURSE ON CARDIOVASCULAR INTERVENTION, ON 17TH JANUARY 2000, AT 8.00 AM, AT SUNTEC INTERNATIONAL CONVENTION HALL**

### **Introduction**

I am pleased to be here on this special occasion of the 9th Live Demonstration Course in Cardiovascular Intervention. This course is jointly organised by the National Heart Centre of Singapore and the world-renowned Paris Course on Revascularisation. In addition, for the

first time, the Singapore Radiological Society has been invited to join NHC in organising a one-day workshop on peripheral vascular intervention. These professional exchanges are critical in ensuring that advances in medical knowledge are shared across national boundaries. They also help translate technological advances into good quality and cost-effective clinical treatment for our patients. Maintaining close professional links with the best institutions in the world is an important strategy in our efforts to tackle the growing incidence of heart diseases in Singapore.

### **Incidence of heart disease**

2 Heart disease is a major cause of ill health in the world. In 1998, coronary heart disease alone claimed 7.4 million lives world-wide, ranking it the leading cause of death. It was also the 6th most important cause of disability in the world. The WHO estimates that coronary heart disease will be the largest single cause of disease burden globally by the year 2020. One of the main reasons for this phenomenon is the ageing of populations.

3 Singapore is no exception. Heart disease is a major cause of death in Singapore after cancer. One in four deaths every year result from heart disease. After the age of 60, it becomes the most important cause of death. As our population ages, we too can expect a rising burden of coronary heart disease. Singapore's approach in tackling this trend covers prevention, treatment and rehabilitation. We will continue to actively promote healthy lifestyles, and at the same time, devote resources to reduce the mortality and morbidity of heart diseases by ensuring high standards of cardiac care are accessible to all Singaporeans.

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4 In keeping with the rapid changes seen in the standard of our healthcare services over the past decades, clinical cardiac care in Singapore has advanced significantly over the years. Medical procedures which were once considered complex and high risk are now fairly routine. Singaporeans with heart diseases have access to high quality medical care and are assured of good clinical outcomes, comparable to many developed countries. However, there is a need to expand our present infrastructure to cope with the increasing demand for cardiac services and to keep abreast with the latest developments and innovations in cardiac care.

#### **Development of a heart hospital**

4 5 The Government has decided to develop a new Heart Centre building with upgraded facilities to replace the current ambulatory centre. The new heart hospital will be located within the campus of the Singapore General Hospital and is expected to be completed in 2005. It will have inpatient and outpatient facilities under one roof, such as operating theatres, coronary care and intensive care units, outpatient clinics, laboratories for invasive and non-invasive investigations, radiology and clinical laboratories, as well as rehabilitation facilities. This one-stop concept will minimise unnecessary duplication in manpower, facilities and equipment, thus resulting in more efficient and cost effective services. This integrated service concept will improve the delivery of cardiac care to the growing numbers of Singaporeans who need tertiary cardiac treatment.

6 The NHC will serve as the national referral centres for complex heart cases. It will have research and training facilities to enable it to pioneer and assess new cost-effective treatments for the management of heart diseases in Singapore, in collaboration with other institutions.

### **Role of healthy lifestyles**

7 While we cannot avoid growing old, we can avoid the other factors that play a major role in the development of coronary heart disease. There is clear evidence identifying the principal risk factors of coronary heart disease. We know now that many of the risk factors are linked to modern lifestyles. These include high blood cholesterol, smoking, hypertension, diabetes, sedentary lifestyles and a high fat diet. Our national health survey in 1998 showed that incidence of diabetes, high blood pressure, cigarette smoking and high cholesterol remain high. The proportion of Singaporeans with high blood pressure rose from 22.2% to 27.3% from 1992 to 1998, while those with high cholesterol increased from 19.4% to 25.4% over the same period. Therefore, we must step up our public education efforts to first, encourage the adoption of healthy lifestyles, second, recognise the early symptoms of heart disease and third, educate the individual on how to prevent the onset of more severe complications. To be more effective, our health education programmes would be tailored to particular target groups that have been identified as high risk. This will be our strategy for the coming years.

### **Conclusion**

8 In conclusion, I would like to congratulate the organisers for the excellent foresight in initiating this demonstration course. I look forward to seeing more of such events. I wish you all a productive conference and, to the foreign delegates, a pleasant stay in Singapore. It is now my pleasure to declare open the 9th Live Demonstration Course in

Cardiovascular Intervention.

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