

**DO YOU NEED ‘ANNUAL BODY CHECK
UP’? WHAT TESTS DO I DO? ARE
THESE TESTS GOING TO MAKE ME
LIVE LONGER AND HEALTHIER? THE
MORE THE BETTER?**

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Why do we want / need to have 'check up' even when we are feeling okay?

- - **prevent illness**
- - **early detection of diseases**
- - **live longer**
- - **live healthier**

- **AND THE BEST & MOST RELIABLE TEST IS**

**As a human being, we have the instinct
to explore our future...**



DISEASE PREVENTION

- PRIMARY PREVENTION

- Implementation to prevent diseases from happening
 - Immunization
 - Behavior and lifestyle: sunscreen, wearing helmet, smoking cessation, physical activity, healthy diet...etc.
 - NO test is needed.

SCREENING TEST “check up”– SECONDARY PREVENTION

- IDEAL CRITERIA FOR SCREENING TESTS
- DISEASE:
 - Must cause significant suffering or death
 - Natural history must be understood
 - Must have any asymptomatic stage that can be detected by a test
 - Early detection & intervention must result in improved outcomes
 - Incident is not too high or too low

Ideal screening test / “check up”

- **TEST:**

- High sensitivity and specificity
- Safe, rapid, easy and relatively inexpensive
- Acceptable to providers and to population

In reality

- HEALTH CARE SYSTEM
 - Capacity for reporting, follow up , and treatment of positive screens
 - Cost effective
 - Sustainable program
 - Clear policy guidelines

Our crystal ball in Canada

- SCREENING PROGRAM IN B.C. (well established recall and follow up system)
 - FIT (stool occult blood test): 50 – 74 years old; every 2 years
 - Screening mammogram: 40 years or above; every 2 years
 - PAP: every 3 years
- *That's it??!!*

OTHER AGE & GENDER APPROPRIATE SCREENING TEST “so called regular check up”

- **DM:** Anyone over the age of 40 should be tested for **diabetes** every three years. If you have one or more risk factors, you should be tested earlier and more frequently. HbA1c & fasting glucose or OGTT
- **Cholesterol:** In Canada, it is recommended that anyone who has strong risk factors for heart disease
- People who have a family history of early [coronary artery disease](#)
- Men aged 40 and older.
- Women aged 40 and older or who are post-menopausal
- Frequency of testing depends on your medical condition
- **Osteoporosis:** aged 65 years and older. Earlier if other risk factors
- **Prostate cancer:** PSA test. Controversial

Some more....

- TERTIARY PREVENTION

- Treatment and rehabilitation of disease after it has been diagnosed so as to prevent progression and permanent disability. (e.g., DM, hypertension, osteoporosis, hepatitis B)
- Diabetes: 3-monthly HbA1c & urine ACR. Yearly kidney function, lipid, +/- B12
- Hepatitis B: 3-monthly liver function & 6-monthly ultrasound
- Colonoscopy every 3 or 5 years for known colon polyp
- *That's all??!!*

- In another words, we only ***screen*** colon cancer, breast cancer, cervical cancer, diabetes mellitus, high cholesterol and osteoporosis (or perhaps prostate cancer)...so disappointing!!!

What about...

- What about brain cancer, stroke, lung cancer, stomach cancer, liver cancer, pancreatic cancer, kidney cancer, bladder cancer, ovarian cancer, testicular cancer, bladder cancer, bone cancer, muscle cancer, nerve cancer, leukemia, lymphoma ...and all other serious non-cancerous condition...dementia, stroke, heart attack, ALS, kidney failure...?



Any “total body” check up or screening which we can find out any hidden disease? Unfortunately, no. WHY?! We do not have an accurate crystal ball and we are not a fortune teller.



WHAT ABOUT THOSE “TOTAL BODY SCAN” AND “HEALTH CHECK UP PACKAGE”??

- HEALTH/ BODY CHECK UP PACKAGE is very common in some parts of the world e.g. Hong Kong. Those packages are usually pre-set by the private labs and do not require consultation with a medical doctor.
- They usually include CBC, kidney and liver function, glucose, and cholesterol levels.
- If you are willing to pay more, you can check some tumor markers for cancers of prostate, pancreas, ovary, liver...etc. Some package also contains ECG, chest x-ray and even ultrasound of the abdomen or pelvis... so the more money you are willing to pay, the more you will know, right?

HEALTH CHECK UP PACKAGE

- How useful are these exam package?
- Are they useful in health promotion, disease prevention, early disease detection and treatment and better prognosis?
- Is “the more tests the better”? The more frequent the better?
- Your comments and experience?

So confusing! To test or not to test?
What should I do??



SPECIAL SCREENING TESTS FOR SPECIFIC GROUPS OF PATIENTS

- HEPATITIS B:
 - 3-monthly blood tests including liver enzyme ALT, hepatitis B viral DNA +/- AFP
 - 6-monthly ultrasound
- COLON POLYPS:
 - Colonoscopy every 3 or 5 years, depends on the polyp's pathology.

The reasons we do have many good screening program / tests are mostly because: the disease is not very common, short pre-symptomatic stage, no specific/sensitive/acceptable tests available.

- *For example, pancreatic cancer has a high mortality rate. However, it is not very common and it is not appropriate to do CT scan regular for every adult. And even if we have a 'radiation-free' CT scan (which does not exist), how often should we scan ourselves? Once a year or once a month. What about the cost and anxiety created by the test?*
- *Another example is leukemia or blood cancer. We cannot do a bone marrow biopsy every month to confirm that you do not have leukemia.*

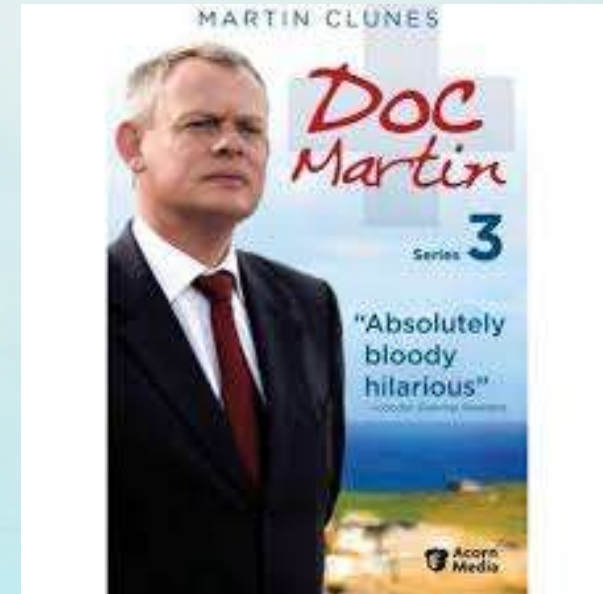




DIAGNOSTIC TESTS

When we suspect a certain disease condition, sometimes we need a “diagnostic test” to confirm or exclude the diagnosis.

“Test” is not everything



Take home message:

Know your body well

Treat your body well

Let your doctor know you well

At the end of the day, we will all get old...

A physician is somewhat like a detective



- -History
- -Physical exam
- -Investigation

【杏林在線】驗身驗甚麼

- <https://youtu.be/3VdeH1HtwW8>

vaccination

- VACCINATION FOR (OLDER) ADULT
 - PNEUMOVAX & PREVNAR-13
 - SHINGLES (HERPES ZOSTER)
 - HEPATITIS A
 - INFLUENZA
 - TETANUS
- PERTUSSIS

PNEUMOVAX & PREVNAR-13

- Prevent invasive pneumococcal diseases: pneumonia, meningitis and septicemia
- Pneumovax : all adult > 65 years old. MSP covered
- Pneumovax : immunocompromised condition such as DM, COPD, chronic hepatitis B carrier, chronic alcoholism...
- Prevnar-13 : MSP not covered. Adult > 50 years old

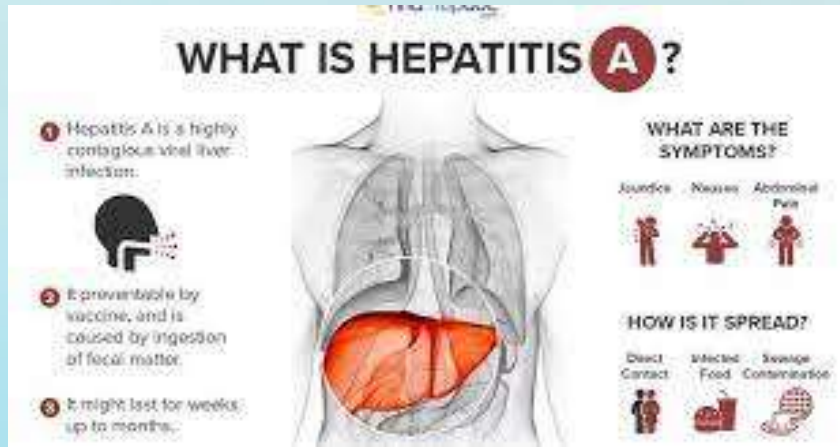
SHINGLES (HERPES ZOSTER)

-Shringrix (2 doses)



- Prevention of shingles which is the reactivation of chicken pox.
- Adult > 50 years old

HEPATITIS A



- Hepatitis A vaccine
- 2 doses
- Need to check Hep A antibody before receiving the vaccine

A scenic landscape featuring a calm lake in the foreground, reflecting the surrounding environment. In the background, there are rolling mountains and hills, some covered in dense green forests. The sky is a pale, hazy blue. The entire image is overlaid with a semi-transparent teal gradient, which is most prominent on the right side and fades towards the left.

INFLUENZA vaccine

Yearly vaccination needed. Usually available in late October.

TETANUS

- A complete vaccination comprises 3 doses
- Protection last for 10 years

PERTUSSIS

- Specific group of people
- Pregnancy
- Household members of the pregnant patients

THANK YOU FOR YOUR ATTENTION

- ANY QUESTION?

