

**MESSAGE FROM PRESIDENT CGPSL 2017/2018**

I welcome all of you for my 2nd term in office as the President of the College of General Practitioners of Sri Lanka. It was a very healthy AGM, yet the attendance was not very encouraging. We are a small yet important cog in the wheel of General Practice and all of us in the Private Sector. We must meet at least once a year to be counted as well as to be recognized. I request all of you to update your membership, and encourage many others who are there to join the fold so that we increase our membership to at least 500.

This year too I have started with the floods and the members of the CGPSL headed by Council Member Dr. H D Wijesinghe and Past President, Dr. Preethi Wijegoonewardene initiated and collected contributions to purchase raw provisions; this was distributed by Dr. Wijesinghe, Dr. A J Jameel and Senior Administrative Officer Dimuthu, in Ratnapura. Dimuthu and Dr. Jameel were affected by the flood so they personally identified and visited each family and made their lives better by your generosity. Thanks to all my Council Members and others who helped. Dr. Preethi Wijegoonewardene, Dr. M R Haniffa, Dr. H D Wijesinghe, Dr. C M Asela Anthony and the young GPs Dr. Sankha Randanikumara, Dr. Hiranthini de Silva and others went out into these areas and looked into their health needs together with SLMA, IMPA and Spice Route Movement.

This year the SLMA gave us a full Symposium on Family Medicine and it was well attended at Hotel Galadari on 13th July 2017 with the participation of PP Dr. Preethi Wijegoonewardene, Dr. M R Haniffa, Dr. Athula Kahandaliyanage and Prof. S D Jayaratne who made meaningful contributions on "**Whom do we need more? Qualified General Practitioners or Specialists?**". Prof. Nandani de Silva made a presentation on "**Communication skills in General Practice**" and Prof. Kumara Mendis on "**Evidence based practice: keeping the busy family physician updated**". We made a good impact on the audience present, and would be following it up at a different forum at the Annual Academic Sessions.

The office vacancy has been filled up and now all of you should take the task of carrying out the MCGP examination very seriously and carefully. The MCGP Examination is scheduled for September 2017. Kindly encourage other GPs to enroll for the next intake which will be advertised shortly.

The 43rd Annual Academic Sessions of the CGPSL is scheduled for 14th, 15th and 22nd of October 2017. The Pre-congress is scheduled for 14th Morning; a Master Trainers Course in Management of Vertigo by Prof. Micheal Strupp of UK at the Family Health Bureau. The Inauguration is at Waters Edge and it will be by invitation, do get in touch with the College office and give your consent to attend so that invitations could be sent on time.

The Main Congress too will be held on 15th at Waters Edge on the theme "Empathy, Safety, Standards; the Strengths of General Practice". We have called for Dr. M P M Cooray Oration and Dr. B D J Silva Oration, Free papers and Fellowships. Kindly send in your applications before the deadline.

Kindly attend CPD update organized by CGPSL/ IMPA – Leprosy update on 30th July 2017.

Dr. Carmel Fernandopulle, President

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FREE HEALTH CAMP, AT A RURAL VILLAGE FOUR MILES OFF MADHU CHURCH, ON 19TH MAY 2017



On the 19th May 2017, to coincide with The WORLD FAMILY DOCTOR DAY, eight doctors, with three spouses, from the North Western Chapter of the College of General Practitioners of Sri Lanka, conducted a free Health Camp, at a rural village four miles off Madhu Shrine, situated in Vanni, Mannar District, in the Northern Province

on 19th May 2017. Over 300 patients were examined and treated with medication, and advice on various health problems, including screening for Depression.

Some members of the Lions Club of Negombo Orient, did blood tests to screen for Diabetes. An Optometrist from the same Lions club examined Eyes and Eye glasses for selected people, were issued free of charge.

Dr. Titus Fernando
Secretary
North Western Chapter of the College of General Practitioners of Sri Lanka

Donation for Flood Victims

FREE HEALTH CAMP ON 3RD JUNE 2017 FOR THE FLOOD VICTIMS OF THE KALUTARA DISTRICT

Dr. Lakshman Weerasena, a Past Vice President of the College of General Practitioners of Sri Lanka, organised a free health camp on 3rd June 2017 for the flood victims of the Kalutara district at the Yatawara Temple, Galpatha. Dr. Asela Anthony, Hony. Secretary of the College and Dr. Kaluarachchi a member of the College also participated in this endeavor. About 1000 needy patients were attended to.



Dr. C M Asela Anthony, Hony. Secretary

DONATION FOR FLOOD VICTIMS IN RATNAPURA

02nd June 2017

Ratnapura was one of the worst effected areas during the recent floods. CGPSL collected funds from the Council Members and Dr. Preethi Wijegoonewardene was very helpful in getting Dry Ration parcels. Dr Wijesinghe with Dimuthu of the CGPSL travelled to Ratnpura on Friday 2nd of June and visited a remote area affected by floods and distributed dry rations. Dr. A J Jameel from Ratnapura participated as well and contributed for the flood relief. Transport was provided by Dr. Wijesinghe and additional ten bags of dry rations provided by Dr. Wijesinghe. We distributed about 50 bags of dry rations to mostly middle income families who were affected by the floods and were very helpless. The highlight was visiting the house and identifying the affected houses. Dimuthu and her family helped a great deal to make this project successful.



We thank all the CGPSL Council Members who generously contributed for this project.

*Dr. H D Wijesinghe
Project Chairman*

Health Camp at Bulathsinhala

WORLD FAMILY DOCTOR DAY CELEBRATIONS BY THE SPICE ROUTE MOVEMENT OF SRI LANKA



Spice Route Movement of Sri Lanka under the auspices of the College of General Practitioners of Sri Lanka (CGPSL) celebrated the World Family Doctor Day 2017 on the 19th of May in a unique way, by gifting a free health camp to an underprivileged area.

We selected Molkawa closer to Kukuleganga in Bulathsinhala area for our one day health camp. Young GPs along with the members of the CGPSL and some medical students, left Colombo early in the morning. We reached the buddhist temple Sri Maha Viharya at about 7.00am. The Lions Club members of the area were present there who joined hands with us to organize this important event. They especially helped us in publicity and the arrangements.

We had two main components in this health camp; treating the self-limiting ailments and opportunistic screening for non-communicable diseases (NCD). Medical students helped in client registration, measuring height, weight and calculating the BMI and measuring capillary blood glucose. Clients were also provided with a healthy breakfast following the capillary blood sugar measurement.

The Spice Route members and the family physicians from the CGPSL consulted all the clients and families comprehensively. Their blood pressure was measured, individual cardiovascular risk was calculated and advices on lifestyle modification were given. The leaflet prepared by the NCD subcommittee of the CGPSL ‘10 health tips at your fingertips’ was instrumental in educating our clients and it was distributed among all the participants. Moreover, the screening questionnaire had two simple questions to identify depression in clients, in accordance with 2017 World Family Doctor Day theme. Considering the fact of having many asthmatics in this area we arranged a demonstrator to correct their inhaler techniques on an individual basis and also we were able to distribute free DP capsules and MDIs to needy patients. All the simple illnesses of the participants were treated and depending on the requirement, referels were made to the primary care hospitals, GPs in the area and also to specialized institutions to ensure the continuity of care of the patients.

Following a successful day the enthusiastic team members headed to an estate bungalow owned by our senior family physician and Spice Route advisor Dr. Preethi Wijegoonewardene, which was situated in a picturesque location. Dr. Preethi, with his usual hospitality, had arranged a delightful lunch for us which was appreciated by all.

Sankha Randanikumara

Examiner Training Workshop

EXAMINER TRAINING WORKSHOP CONDUCTED BY THE FACULTY OF TEACHERS CGPSL 02nd April 2017



Workshop on Teacher training Programme on OSCE was held on 02/04/2017 from 9.00am to 12.30pm at CLINMARC Auditorium at National Hospital of Sri Lanka. The Resource Persons were Prof. Nandani de Silva, Prof. Antoinette Perera, Dr. Preethi Wijegoonewardena and Dr Shyamalee Samaranayaka.

TRIAGE OF FEVER PATIENTS WITH SUSPECTED DENGUE AND CRITERIA FOR ADMISSION

by Epidemiology unit, Ministry of Health

Suspected dengue patients seeking care need to be evaluated at Fever Room in the outpatient department based on symptoms and signs together with Full Blood Count according to the day of illness.

- Patients who are having fever with suspected dengue will be sent to the **Fever Room**.
- At the Fever Room, the decision on admission or ambulatory care will be taken by an experienced Medical Officer, depending on the clinical picture and the Full Blood Count (FBC) of the patient.
- Admissions will get priority according to the decision of the Medical Officer in the Fever Room.
- **RDT-NS1 positivity** on Day 1 of fever is not an indication for hospital admission.

Essential criteria for admission

1. Patients platelet count less than 130 000/mm³
 - If the Platelet Count is between 150 000 – 130 000/mm³, the Medical Officer should make a decision depending on the clinical judgment.
 - If the platelet count tested more than 4 hours ago is more than 130 000/ mm³ the patient should be observed in the fever room and a repeat count should be done. If the repeat count is lower, decide on admission.
 - Fever for 3 or more days, and already not performed a Full Blood Count, patient should be observed in the fever room until the Full Blood Count report is available.
2. Rapid drop in Platelet Count over a short period of time (in 2 consecutive FBCs)
3. Patient is clinically unwell specially when fever is settling with deteriorating symptoms as follows (**Warning Signs**)
 - Weakness
 - Lethargy / restlessness
 - Severe headache
 - Persistent severe vomiting
 - Severe abdominal pain
4. Patient insisting on admission – get a senior opinion if necessary
5. Special conditions
 - Pregnant mothers
 - Children who are less than one and half years old (<18 months)
 - Elderly patients
 - Patients with co-morbid conditions like chronic renal disease, ischemic heart disease or any other major medical problem
6. Others
 - Patients with significant Obesity
 - Patients with adverse social circumstances- e.g. living alone, living far from health facility without reliable means of transport, poor compliance

Criteria for ambulatory care

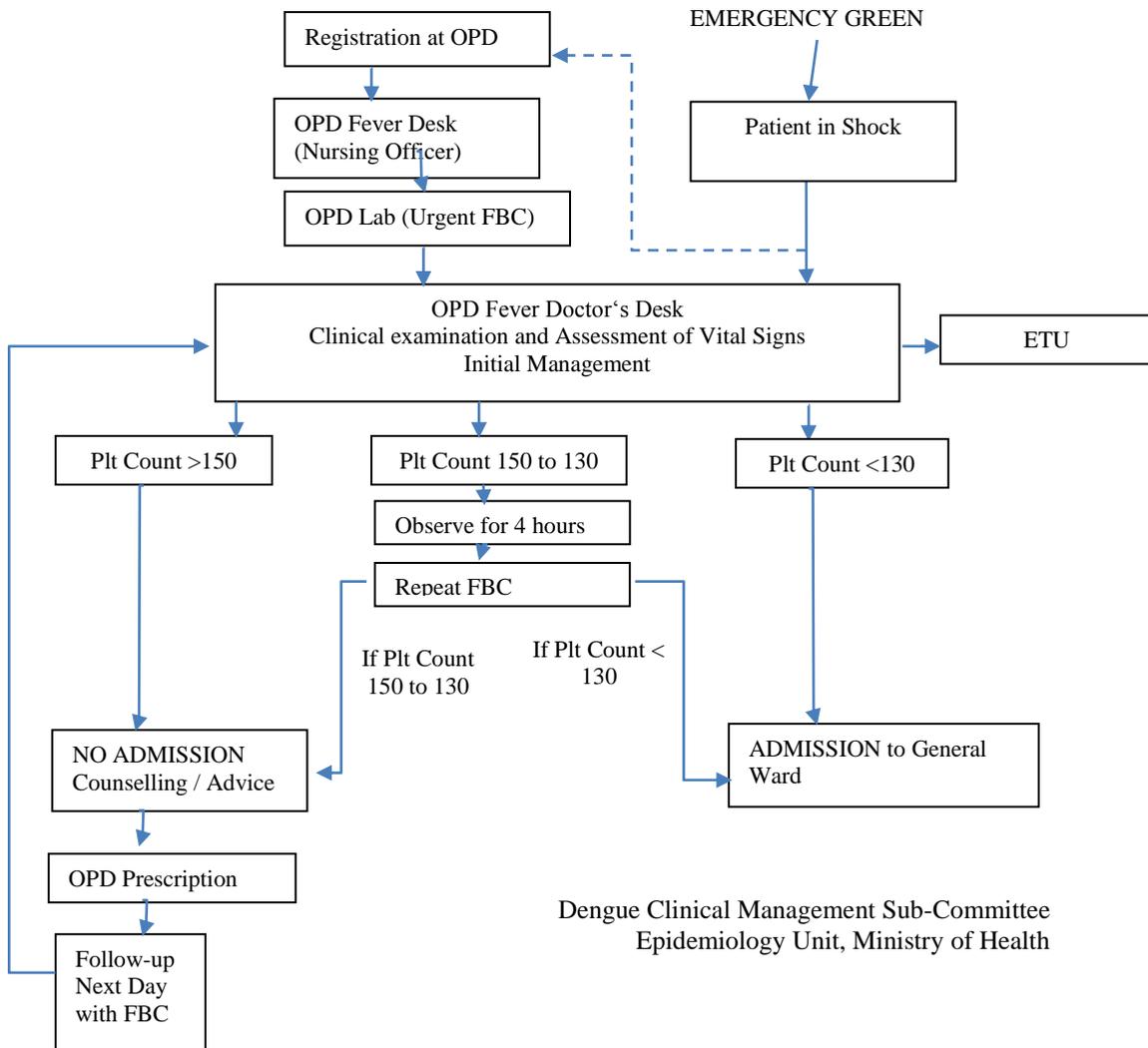
Patients with a platelet count more than 130 000 / mm³ (tested within 2 hours) and clinically stable.

Advices during ambulatory care

1. Suitably document clinical signs and symptoms together with the Full Blood Count report.
2. When and how often should the Full Blood Count to be repeated?
 - Platelet Count 150 000 – 200 000 / mm³ – repeat the count 2 to 3 times per day
(If the Platelet drop in subsequent count is slow- repeat the count 2 times per day and if it is fast, 3 times per day)
 - Platelet Count less than 150 000 / mm³ – repeat the count 3 times per day
3. What to eat and drink?
 - Try to eat and drink normally. Light and nutritious diet more frequently is preferable
 - The fluids should include not only water, but certain electrolyte solutions such as, fruit juice, white rice kanjee, Oral Rehydration Solution (ORS)
 - Do not consume red or brown color foods or beverages to avoid confusion in blood stained vomiting
 - Unless medically advised, other dietary restrictions are not generally recommended
4. How to maintain the urine output?
 - Consume recommended amount of fluids to maintain the usual normal urine output. Amount needed in one hour is approximately double the ideal body weight in milliliters with the maximum limit of 100 milliliters. IF THE PATIENT IS FEELING THIRST TAKING ADDITIONAL FLUID UPTO 4 TIMES /DAY IS ALLOWED BUT IF NEEDING MORE SHOULD SEEK MEDICAL ADVICE AGAIN.
 - Patient should measure the urine output every 4 hourly. Ensure they pass at least about 1ml/ kg / hour urine output (which equal proximately ideal body weight). If the urine output is less than this, patient should consume more fluids to maintain the above urine output.
 - N.B. – Diabetics with poor glycemc control may pass more urine even without adequate hydration. These patients need special attention.
5. How to control the fever
 - Fever should be controlled with Paracetamol only (Dose 15- 20 / kg body weight)
15 mg / kg dose – four times per day
20 mg / kg dose – three times per day
 - Do not exceed 60 mg/ kg /day
 - The gap between 2 doses of Paracetamol should be at least 4 - 6 hours
 - If fever is not adequately subsiding in between Paracetamol doses, using a fan and sponging with moderately hot water is recommended. Patient should be resting with minimal cloths under a bed net.
 - Make sure under no circumstances NSAIDs are used even for the patients who are on these drugs for chronic conditions. Steroids also should be avoided.
6. Care at home
 - Physical rest is highly recommended. All patients should be at home, resting.
 - Make sure patients are not left alone at home. There has to be somebody to look after them always.
7. Symptoms like repeated vomiting, diarrhea can lead to dehydration. Such patients should seek immediate treatment without waiting for the next Full Blood Count

Steps for OPD Fever Desk Screening during Dengue Outbreak

Fever with suspected dengue: headache, retro-orbital pain, arthralgia/ bone pain, myalgia, rash, bleeding manifestations



Dengue Clinical Management Sub-Committee
Epidemiology Unit, Ministry of Health

NOTICE BOARD

43rd Annual Academic Sessions 2017

“EMPATHY, SAFETY AND STANDARDS; THE STRENGTH OF GENERAL PRACTICE”

Keep the dates free:

- Pre-congress – 14th October 2017
- Inauguration – 14th October 2017
- Academic Sessions – 15th October 2017
- Post-congress – 22nd October 2017

**M P M COORAY AWARD
COLLEGE ORATION**

14th October 2017

(The Oration is open to all Medical Officers)
 The topic should be relevant to General Practice
 Script of the Oration (5 copies) should reach the College Office on or before
 05th September 2017
 Guidelines could be obtained from the
 College Web: www.cgpsl.org

B D J DE SILVA ORATION

15th October 2017

(The Oration is open to all Medical Officers)
 The topic should be relevant to General Practice
 Script of the Oration (5 copies) should reach the College Office on or before
 05th September 2017
 Guidelines – should be based on innovative work done in family practice, preferably in relation to minor surgical procedures.

**43rd Annual Academic Sessions
15th October 2017
CALLING FOR FREE PAPERS**

Abstract forms can be downloaded from the website.

Web: www.cgpsl.org

Abstract should reach the College office on or before
 05th September 2017

FELLOWSHIPS

Please send in your applications for Fellowships,
 addressed to the
 Chairman of the Fellowship Committee

Applications should reach the College office by
 14th August 2017 the latest.

(Applications from College office)

Editor: Dr. Maithri Rupasinghe

Editorial Board: Dr. Preethi Wijegoonewardene, Dr. Thivanka Munasinghe, Dr. Sankha Randenikumara, Dr. Dushyanthi Weerasekera

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