

# COLLEGE COMMITTEES FOR 2010 - 2011



The newly formed Council met on the 27<sup>th</sup> of June 2010. I was appointed as the Editor of MY COLLEGE Newsletter. I shall do my utmost to get the newsletter going away every month provided the finances are met to publish the newsletter. I shall also do my best to the College and the Membership.

The following committees were approved by the Council on the inaugural day.

## Continuing Professional Development (CPD)

Chairman Eugene Corea  
Secretary Dinusha de Silva  
Members L Amarasekera, K. Sri Ranjan, Nandani de Silva, Susil Gunasekera, Nalin Ashubodha

## Diabetes Interest Group (DIG)

Chairman Preethi Wijegoonewardene  
Secretary K Chandrasekher  
Members Narme Wickremasinghe, Kamala Nonis, Antoinette Perera, Shyamalee Samaranayaka, Janthy Gunasekera, S V Rabel, Y N Rajapakse, D D N Kaluarachchi, Titus Fernando  
Mentors Dennis J Aloysius, Leela De A Karunaratne, Desmond Fernando, W A Ferdinand

## Cardiovascular Interest Group (CIG)

Convenor Erandie Ediriweera  
Members Jayantha Thambar, D G A Abeygunaratne, Percy Motha, Prasad Fernando, Asela Anthony

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**Respiratory Interest Group (RIG)**

Chairman Preethi Wijegoonewardene  
 Secretary Shobhavi Kohombange  
 Members D.G.A. Abeygunaratne,  
 A.J. Jameel, N K Ashubodha

**Non Communicable Disease (NCD)**

Chairperson Preethi Wijegoonewardene  
 Secretary K Chandrasekher  
 Members D G A Abeygunaratne, Asela  
 Anthony, S J V Cooray, Dinusha  
 de Silva, Erandie Ediriweera,  
 Titus Fernando, Janthy  
 Gunasekera, M R Haniffa, K P  
 Jayawardena, A J Jameel, D D N  
 Kaluarachchi, Shobhavi  
 Kohombange, Percy Motha,  
 Kamala Nonis, Antoinette Perera,  
 S V Rabel, Shyamalee  
 Samaranayaka, Jayantha  
 Thambar, Narme  
 Wickremasinghe, H D Wijesinghe  
 Mentors Dennis J Aloysius, Leela De A  
 Karunaratne, Desmond Fernando,  
 W A Ferdinand

**Research Committee**

Chairperson K. Sri Ranjan  
 Secretary Shyamalee Samaranayake  
 Members Dennis Aloysius, K  
 Chandrasekher, Antoinette Perera

**Professional Educational Resource  
 Committee (PERC)**

Chairperson Pushpa Weerasinghe  
 Mentor Leela De A. Karunaratne  
 Secretary Prasad Fernando  
 Members Shani De Silva

**Newsletter**

Editor N K Ashubodha

**Editorial Committee**

Preethi Wijegoonewardene, Tharanga  
 Sendanayake

**Mental and Social Health (MASH)**

Chairperson Nandani De Silva  
 Secretary Sampath Nanayakara  
 Members Tyrell Fernando, F.A.  
 Rajakulendran, Joel Fernando

**Finance Committee**

Preethi Wijegoonewardene, K.Chandrasekher,  
 Pushpa Weerasinghe, Shreen Willatgamuwa

**Building Project Committee**

Chairperson K. Sri Ranjan  
 Members K.Chandrasekher,  
 Jayantha Thambar, Pushpa  
 Weerasinghe

**Fellowship Committee**

Members Dennis J Aloysius, K  
 Chandrasekher, Leela De A  
 Karunaratne, Nandani de Silva,  
 Percy Motha

**Occupational Health Committee**

Chairperson Narme Wickramasinghe  
 Secretary C.M.A. Anthony  
 Members M.G.H.Thilakaratne, M.R.Hanifa,  
 Joel Fernando, K Chandrasekher,  
 Preethi Wijegoonewardene, D  
 Athukorale, A.T. Navaratnam,  
 H.D. Wickramatillke, F.A.  
 Rajakulendran, Carmel  
 Fernandopulle, S.B. Serasinghe

**Sports and Exercise Medicine Committee**

Chairman M G H Thilakaratna  
 Jt. Secretaries Y asas Abeywickrema,  
 Senarupa Jayawardena  
 Members Aranjan Karunanayake, F A  
 Rajakulendran, Shreen  
 Willatgamuwa  
 Consultant D Athukorala

**Committee on Elderly Care**

Chairman D G A Abeygunaratne  
Secretary Dushyanthi Weerasekera  
Members Dennis J Aloysius, N K  
Ashubodha, B G D Bujawansa,  
Leela De A Karunaratne, Nandani  
de Silva, W A Ferdinand, Titus  
Fernando, M R Haniffa, Lucky  
Jayasekera, Janaka Ramanayake,  
B Karunaratne

**Values Committee**

Chairman Eugene Corea  
Secretary Shobhavi Kohombange  
Members Preethi Wijegoonewardene,  
Duncan Bujawansa, Percy Motha,  
Antoinette Perera, A J Jameel,  
Dushyanthi Weerasekera

*Note: Eugene Corea, President and Jayantha Jayatissa, Hony. Secretary are Ex-Officio in all Committees*

*Nalin Kumudu Ashubodha*

*Editor – MY COLLEGE*

*Mobile: 075 – 7911658*

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**Jeewaka Suwathaa****FROM HEMAS HOSPITALS**

## **SPECIAL MEDICAL PACKAGE FOR MEMBERS, ASSOCIATES, AND THEIR STAFF**

**Thousand rupee discount + 20% off for further tests**

As an initiative for uplifting the health of medical professionals, their family members (including the extended family members) and employees, Hemas Hospital has decided to introduce a special health screening package (Jeewaka Suwathaa) at a concessionary price. The programme will be coordinated by Shreen Willatgamuwa, MOIC / Wellness and Screening. The details of the programme are given below.

- Full Blood Count
- Fasting Blood Sugar
- Lipid Profile
- SGPT
- SGOT
- Serum Creatinine
- Urine Full Report
- ECG
- Complete Physical Examination with height, weight, vision, BMI and report

**Cost**

The package will be offered at a special price of Rs.1,950.00 per person (the normal price of these tests would exceed Rs.3,000.00).

**Additional Tests / Investigations**

We are also pleased to offer a special discount of 20% for additional investigations requested along with above package.

Please feel free to contact Shreen Willatgamuwa (0773-933561) or the undersigned for further details or clarifications.

*Nishantha Jayamanne*

*Head of Marketing*

*Hemas Hospitals (Pvt) Limited*

Tel: 011 – 7888888

## THE RIGHT PEOPLE

The film Miracle tells the true story of the 1980 US Olympic ice hockey team as it marches to an improbable gold medal. At the outset of the story, coach Herb Brooks is shown selecting the players for his team. When he gives assistant coach Craig Patrick a list of names he has chosen, Craig says in surprise, “You’re missing some of the best players”. Brooks responds, “I’m not looking for the best players, Craig – just the right ones”.

Brooks knew that individual talent would take the team only so far. A willingness to fit into his style of selfless play would be far more important than talent. Clearly, team success, not individual glory, was the priority.

*Courtesy Leela De A Karunaratne*

*Team work is more important than individual effort – Editor*

### Penicillin Sensitivity Test

FOR YOU

## AVOID ALL PENICILLINS

If ST positive

This is to bring to your kind notice that a decision was taken at the Recall Committee & Technical Advisory Committee meetings chaired by DGHS held on 15.07.2010, to inform the relevant prescribing officers, the following:

All injection pertaining to 'penicillin group' (namely, Benzylpenicillin, Ampicillin, Amoxicillin, Cloxacillin, Flucloxacillin, Co-amoxiclav, Piperacillin, Ticarcillin etc.) should be avoided in patients who are positive to penicillin sensitivity test.

*Arjuna Pathmaperuma*

*Pharmacist*

*Medical Technology & Supplies*

*(Cosmetics Devices & Drugs Authority)*

### 36<sup>TH</sup> ANNUAL ACADEMIC SESSIONS – 2010

**Towards a satisfied patient in Family Practice**

**Pre-congress workshop**

**Sunday, 3<sup>rd</sup> October 2010**

**Inauguration**

**Friday, 8<sup>th</sup> October 2010**

**Academic Sessions**

**Sunday, 10<sup>th</sup> October 2010**

**Post-congress workshop**

**Sunday, 17<sup>th</sup> October 2010**

**Please keep the dates free !!!!!**

## ABOUT DENGUE

### It's important to get these messages across

Dengue is at its worst peak this season. It's important to protect kids against mosquito bites especially during daytime. Keeping the environment clean is as equally important. If a child gets fever, a blood count MUST be done by the 2nd day & shown to a Doctor. If dengue is suspected in the blood count, it's important not to waste time, and bring the child quickly to LRH where the child can be monitored continuously. We see children treated in private medical institutions being transferred late to LRH, in a serious condition. By that time the critical phase has passed & its difficult to save the life. **If you are suspecting a serious illness like dengue, bring the child to LRH.** Like all other Government institutions, facilities and resources are limited. LRH doesn't have the comforts, but it is able to provide what matters most, patient care. You won't get a comfortable bed (sometimes 2-3 children have to share the same bed), or other luxuries (no bed for mother, attached bathrooms, A/C, satellite TV etc which are available elsewhere), and the Doctors and

nurses may not have much time to talk, smile and be friendly because they have so much of work to attend to, but the level of care given is optimal, and any change in the condition from bad to worse will be detected early. Its the child's life which matters! It is very rarely that I have seen a child brought to LRH in the early stage of the illness succumb and pass away. I am just telling you what I see in reality in day-to-day life, with no intention of promoting the place I work, as I do not have any gain from it. If you can pass this msg across to your friends, especially those with kids, it could help save a life. You have to be in 'the situation' to know what a death of a close one feels like.

*Savin Mendis*  
**Senior House Officer - Paediatric Surgery**  
**Lady Ridgeway Hospital for Children,**  
**Colombo 08**  
[savindra007@yahoo.com](mailto:savindra007@yahoo.com)

*Sent in by Farrouq Sikkander*

FROM RANJIT KURUPPU

## SRI LANKA DRUG INDEX

Further to your notice to collect the above at the AGM. I presume there were sufficient copies for the entire membership. As I was unable to attend the AGM I would be thankful if you could post my copy to me.

The North Western Chapter is the most active chapter of the CGP, I would suggest that you check the attendance at the AGM and send sufficient copies to the members of the North Western Chapter who were unable to attend the AGM.

This could be done via the post or you could hand over sufficient copies either to Dr. Carmel Fernandopulle (President, North Western Chapter / CGPSL) or to Dr. K Sri Ranjan (Past President / CGPSL) to be distributed amongst the membership of the North Western Chapter.

Thanking you.  
 Yours sincerely,

**R V N Kuruppu**

*Consider it done – Chairman CPD*

**WRITE TO US. KEEP IN TOUCH. SHARE YOUR VIEWS. GIVE US YOUR ADVICE.  
 BUT FOR GOD'S SAKE DON'T KEEP QUIET!**

Dear Ranjan,

Thank you very much for your kind encouraging letter dated on 7<sup>th</sup> June 2010. Even though we (I) the distance members cannot participate for most of the College’s events “Energetic people” like you and the Council members, are spreading the vision of the College and updating our knowledge continually and frequently “MY COLLEGE” Newsletter is nicely updated. Kindly include “CME” lecture notes on important topics (as in IMPA Newsletter) which is most valuable to distant members like me.

Thank you again for the memorable work done, and convey my best wishes to people who are helping on this regard.

Yours sincerely,

**Palitha Jayasinghe**

*Good idea Palitha, Yes the IMPA is doing a good job updating members on CPD in the Newsletter. As requested by you this issue of MY COLLEGE carries an update (together with WHO/ISH Risk charts). We will try to provide our members with printed CPD material in the future while maintaining MY COLLEGE as it is. – Eugene / Chairman – CPD*

**College Website**

**FOR YOU**

**GUIDELINES TO ACCESSING THE WEBSITE AND THE DISCUSSION FORUM**

Once you have switched on the computer wait till the screen with the main icons appear.

**How to access the College Website**

- 1) Click on any web browser (eg: internet explorer) and wait for the screen to appear.
- 2) Once the main screen appears type in the box (address bar) the website address [www.cgpsl.org](http://www.cgpsl.org)
- 3) Now press enter.
- 4) You will see the College website appearing in the screen which is the home page.
- 5) At the top you see the various sections of the Website.
- 6) Click into the section you would like to browse.
- 7) You will get total access to the Website if you type in the user name (your name as it appears in the Desk-top Directory-Eg :

initial first and the surname to follow, no full stop in between and all simple letters) and the pass word (your College membership no. **Eg. L/0186 should be typed in as L0186**) and then **click log in**. You **can change** your pass word with a mixture of numbers and alphabets up to 10 characteristics.

**How to access the Discussion section (please log in to participate in this section)**

- 8) In the section “Discussion” you will find questions raised by other colleagues
- 9) Select the question/questions you would like to respond or contribute to and click comment. Once the new page opens up you enter your comments and press enter.
- 10) If you want to initiate a new query select “New topic” and enter your query in the new page that appears and then press enter.

## 2011 SCHOLARSHIP PROGRAMME ANNOUNCEMENT

**Society of Teachers of Family Medicine Foundation (STFMF)**

The Society of Teachers of Family Medicine Foundation offers a scholarship program to provide the opportunity for family physicians/general practitioners from around the world to attend the Annual Spring Conference of the Society of Teachers of Family Medicine (STFM). For 2011, this scholarship is available for family physicians/general practitioners from Asia.

### **Goals of the International Scholarship Program**

1. Advance family medicine education worldwide
2. Assist nations with need and potential for growth
3. Support the development of outstanding future leaders internationally
4. Foster relationships with family medicine educators and programs in the US

This announcement seeks nominations for the 2011 program. The nominee selected will receive an award of up to \$3,500 US to support travel expenses to attend the STFM Annual Spring Conference April 27-May 1, 2011, in New Orleans, Louisiana. If feasible, additional time will be spent in the United States visiting family medicine programs and the offices of the American Academy of Family Physicians and STFM in Leawood, Kansas.

There is one award available, and **a limit of one nominee per country**. The criteria for the award are:

### **Requirements for Eligibility:**

1. Must be in first 5-10 years of first faculty appointment.

2. Must be fluent in English.
3. Must have the support of the country's family/general practice organization.
4. Must have a US sponsor to help coordinate the visit.
5. Must have completed advanced training, such as a residency in family medicine or general practice.
6. Must have potential of becoming future leader In family medicine.

### **Criteria for Selection:**

1. Personal need for financial support.
2. Personal potential for contributing to the development of FM in his/her home country.
3. Strength of proposed activities during the US visit.
4. Strength of proposed activities upon returning to the home country.
5. Regional needs and potential for FM development.

International scholars will be expected to submit a brief written report on their activities during their US visit.

**Applications must be submitted electronically to the College office before the 25<sup>th</sup> August 2010.**

*Courtesy Nandani de Silva*

## WHO/ISH RISK PREDICTION CHARTS

### Cardiovascular risk prediction charts and guidelines for assessment and management of cardiovascular risk

Cardiovascular disease (CVD) is preventable. There are many evidence-based interventions that can be applied population-wide, targeting high-risk individuals that prevent the occurrence of heart attacks and strokes.

The WHO/ISH (International Society for Hypertension) risk prediction charts indicate 10-year risk of a fatal or nonfatal major cardiovascular event (myocardial infarction or stroke), according to age, sex, blood pressure, smoking status, total blood cholesterol and presence or absence of diabetes mellitus. The charts provide approximate estimates of CVD risk in people who do not have established coronary heart disease, stroke or other atherosclerotic disease. They are useful as tools to help identify those at high cardiovascular risk, and to motivate patients, particularly to change behaviors and, when appropriate, to take antihypertensive, lipid-lowering drugs and aspirin.

By using the risk prediction charts, an individual can be classified into a category of high risk (maroon & red), medium risk (orange & yellow), or low risk (green) for heart attack and stroke in the following 10 years. If an individual has a high cardiovascular risk the guidelines recommend more intensive treatment, often including drugs – this is because the individual’s risk has to be lowered urgently to prevent a heart attack or stroke. However if the risk is low, the interventions may be more conservative ones like counseling for change of behaviors e.g.: smoking cessation or increased physical activity.

In the past, most cardiovascular disease guidelines focused on single risk factors such as hypertension or dyslipidemia, and there were separate guidelines addressing prevention of coronary heart disease versus prevention of strokes. Implementation was not cost effective for the earlier guidelines, and many countries were unable to afford their implementation. Previous guidelines did not take into consideration some important facts: that multiple risk factors are responsible for cardiovascular disease, that risk factors and determinants of heart attacks and strokes are very similar, and, therefore prevention approaches are similar.

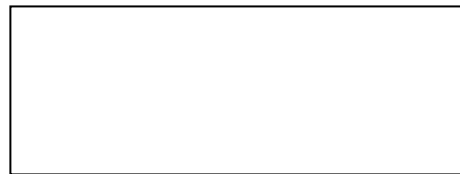
**These risk prediction charts can be used in your clinical practice, which will not only improve evidence based use of medications but is also cost effective. High risk groups can be identified and necessary precautions taken.**

Any Queries please contact World Health Organization Phone: 0112-502319 E-mail: [dissanayaken@searo.who.int](mailto:dissanayaken@searo.who.int)

*NCD Unit - Ministry of Healthcare & Nutrition*

*Courtesy Ruvaiz Haniffa*

*Included in this issue is a free colour copy of the WHO/ISH Risk Prediction chart (obtain for the College Membership by Ruvaiz) which you could try out in office. Please give us your feedback on it’s suitability for general practice – Ed*



**If undelivered please return to:**  
COLLEGE OF GENERAL PRACTITIONERS OF SRI LANKA  
No.6, Wijerama Mawatha, Colombo 7.

