

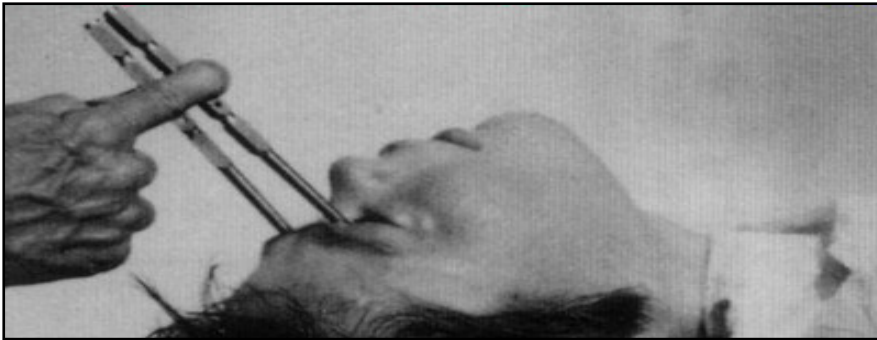


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# NEWSLETTER

## GALLE MEDICAL ASSOCIATION

2016 March Issue



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***GMA Office, Teaching Hospital, Karapitiya, Galle.***

Web site: [www.gma.lk](http://www.gma.lk)

Tel / Fax: 091-2232560; e-mails: [gmathk@gmail.com](mailto:gmathk@gmail.com)

***Editors: Dr. Harshini Rajapakse & Dr. Harshini Dharmawardane***

## From the GMA President 2016



We belong to the second oldest medical association of Sri Lanka - the Galle Clinical Society- the precursor of the Galle Medical Association (GMA) was founded in 1940. The Sri Lanka Medical Association was founded as the Ceylon Branch of the British Medical Association in 1887.

The GMA has evolved over the years under the leadership of its distinguished Past Presidents and their efficient and innovative Executive Committees. This year we will be holding our 75<sup>th</sup> Annual Academic Session from 5<sup>th</sup> - 7<sup>th</sup> October 2016 (The Diamond Jubilee Annual Meeting). It is a time for us to celebrate, not with a grand

celebratory event but with measures to reflect, consolidate and plan the future of academic and professional quality, development and direction.

The GMA needs to be relevant to all categories of doctors – postgraduate and non-postgraduate. Postgraduates are the future medical leaders while non-PG doctors are professional work force colossus that runs our health sector. Throughout this year the GMA will hold academic and professional events focusing on all doctors – *Our GMA!* We also need to recognize that the mere dissemination of ‘knowledge’ will not promote the genesis of good doctors. We will endeavor to develop attitudes, ethical concerns and professionalism.

The GMA membership includes hospital doctors, university academics and the GPs – we need to be relevant to all these categories as well. We intend to create a structured research fund – it will be publicized once the structure and modalities are defined. We are going to launch a new website of the GMA ([www.gma.lk](http://www.gma.lk)) and we intend to keep the membership updated about all our academic and social events. It will be the platform to submit abstracts for the annual meeting. We expect excellent two-way communication between the committee and the membership via the website. Our journal the *Galle Medical Journal* (GMJ) too will be linked to the website. The *GMJ* is on course to become an indexed journal and hopefully we can achieve this during the next few years.

We shall keep you updated through the website and newsletters regarding the coming events. I together with the Executive Committee look forward to your valuable guidance to run and develop your Association.

**Satish K Goonesinghe**  
President,  
Galle Medical Association

## THE ANNUAL GENERAL MEETING – GALLE MEDICAL ASSOCIATION

The 74<sup>th</sup> Annual General Meeting of the Galle Medical Association was held on 12<sup>th</sup> January 2016 at 11.20 a.m. at the GMA Lecture Theatre, Teaching Hospital Karapitiya.

The meeting was chaired by the outgoing president Dr. Champica Bodinayake. The minutes of the 73<sup>rd</sup> Annual General Meeting and the Secretary's report for the year 2015 were read by the joint Secretary Dr. Ajith Jayasekara. The Treasurer's report was presented by the treasurer Dr. Kesharie De Silva. The out-going president, Dr. Champica Bodinayake addressed the gathering and expressed her gratitude to the executive committee and all the members for making year 2015 successful. Dr. Satish Goonesinghe was inducted as the new president. He, while thanking the outgoing president for the yeoman service done for the GMA, highlighted his vision and mission for the forthcoming year. The following GMA members were elected as the office bearers of the GMA committee for the year 2016.

### President

Dr. Satish Goonesinghe

### President Elect

Dr. Sarath Kularatne

### Immediate Past President

Dr. Champica Bodinayake

### Vice President

Dr. Kesharie de Silva

### Joint Secretaries

Dr. Aruna de Silva

Dr. Eisha Waidyaratne

### Treasurer

Dr. Upeksha Liyanage

### Postgraduate Coordinator

Dr. Nalaka Herath

### Social Secretary

Dr. Channa Yahathugoda

### Co-Editors

Dr. Harshini Rajapakse

Dr. Harshani Dharmawardane

### Committee Members

Dr. Ajith Jayasekara

Dr. Arosha Abeywickrama

Dr. Nayana Liyanarachchi

Dr. Chandima Siritunga

Dr. Lanka Dasanayake

Dr. Arosha Dissanayake

Prof. Mahinda Kommalage

Dr. Manjula Dissanayake

Dr. Mahinda Rodrigo

Dr. Eric de Zoysa

Dr. Ruwan Jayasinghe



## Calendar of Events

### ★ Bi-weekly Continuing Medical Education Programme

This ambitious venture is an attempt to reach out to the medical officers at the Teaching Hospital Karapitiya engaging in primary care to enhance their knowledge and skills. Every second Tuesday, an important topic will be covered by a Consultant and the participating doctors have the opportunity to interact at first hand with the Consultant and gather knowledge and clarify doubts. The first such CME programme was conducted on 1<sup>st</sup> March 2016 by Dr. Upul De Silva, Consultant Physician on assessing the ECG of a patient suspected to have a cardiac problem. The programme had a wide participation and was well received by the audience.

### ★ GMA - CCP - RCP Clinical Examination Skills Assessment Workshop

The GMA in collaboration with the Ceylon College of Physicians and the Federation of Royal Colleges of Physicians, UK conducted an interactive workshop aimed at assessment of Clinical Examination Skills on 29<sup>th</sup> February 2016. A simulation of the stations two, four and five of the MRCP PACES was conducted with practical examination like scenarios being constructed. Dr. Peter Trewby, MRCP examiner and International Associate Director for International Medical Graduates of the RCP and Dr Donald Farquhar, Director of MRCP participated as resource persons from the RCP. This interactive workshop aimed at postgraduate trainees received excellent feedback from the participants.

### ★ World Kidney Day Programme

The World Kidney Day was celebrated on 10<sup>th</sup> March 2016 with an academic programme titled Diabetes and the Kidney. There was wide participation from doctors from both THK and nearby hospitals. Consultants from the THK were the resource persons. The academic programme highlighted important aspects of prevention, early recognition and treatment of kidney diseases.

### ★ Advanced Life Support Training Course

This skill training programme is an ongoing effort initiated by the Anaesthetist colleagues from THK. The programme aims to provide the most up to date training on cardio pulmonary resuscitation (CPR) to doctors. Training and certification is provided to all newly appointed house officers in addition to other participant doctors from senior grades. The first programme for 2016 was held on 26<sup>th</sup> January.

### ★ Guest Lectures

1. **Professor. Alan Bittles**, Adjunct Professor and Research Leader, Centre for Comparative Genetics, Murdoch University, Australia delivered a lecture titled, **“Community Genetics, Consanguinity and Genetic Disease in South Asia”** on 29<sup>th</sup> January 2016. In addition to the dissemination of knowledge, initial steps were taken to establish collaborative research efforts in genetics with local colleagues with a similar research interest.

2. **Dr. Mark Gelfer**, Consultant Physician, delivered a lecture titled “**Importance of accurate blood pressure measurement and early diagnosis of hypertension**” was held on 16<sup>th</sup> February 2016. Hypertension remains perhaps the most important modifiable cardio vascular risk factor and the evidence based insight provided by Dr. Gelfer was well received by an appreciative audience.



3. **Prof. Sunil Wimalawansa**, Professor of Medicine, Endocrinology and Nutrition, Cardio Metabolic Institute of New Jersey, U.S.A. delivered a lecture on “**Relationship of Type II Diabetes Mellitus and Cardiovascular Disease to Vitamin D**” on the 16<sup>th</sup> of March 2016.

★ **GMA Lecture**

**Dr. Harshini Rajapakse**, Senior Lecture in Psychiatry, Faculty of Medicine, Galle and Consultant Psychiatrist at Teaching Hospital Karapitiya, delivered a lecture on “**Music Therapy for Reminiscence**” on 29<sup>th</sup> of March 2016. It was a time to relax and reminiscence!



★ **GMA Short Trip**

There was fun and frolic galore when the GMA members embarked on the short trip to Horana, Nature Lovers’ Resort on 3<sup>rd</sup> of January 2016. A day away from the demands and stresses of clinical and academic activity was a most enjoyable and memorable occasion.



## Upcoming Events

### ★ Workshop on Trauma

This will be held on 10<sup>th</sup> May 2016 at the Clinical Lecture Theatre, Faculty of Medicine.

### ★ Bhakthi Gee Programme

This will be held on Thursday, 19<sup>th</sup> May 2016. Practices will commence on 3<sup>rd</sup> May at 3.00 pm at the GMA Lecture Theatre.

### ★ Annual Law Medical Cricket Match

The dates are yet to be announced but it is hoped that last year's success will be repeated this year by the GMA doctors.

### ★ GMA Long Trip

This year we are planning to visit Jaffna by train on the 3<sup>rd</sup>, 4<sup>th</sup> and the 5<sup>th</sup> of June by train. Please keep the dates free and await further details.

## From the Journals

### Zika Virus Infection in pregnant women: Mild Symptoms, severe complications

*Brasil P et al. N Engl J Med 2016 Mar 4.*

Evidence is mounting that Zika virus infection (ZIKVI) may be a cause of serious fetal outcomes, including severe central nervous system complications and death.

To further characterize manifestations of ZIKVI in pregnant women and fetuses, investigators at a febrile-illness clinic in Rio de Janeiro conducted a prospective cohort study involving 88 pregnant women at any week of gestation who presented with acute onset rash that had developed within the previous 5 days. Medical, prenatal, and clinical data for each patient were obtained along with serum and urine specimens. Patients were referred for fetal ultrasonography, and infants born to ZIKVI-positive mothers were evaluated.

Overall, 82% of the women were ZIKVI-positive, based on reverse-transcriptase –polymerase-chain-reaction assays of blood and urine. The ZIKVI-positive women were more likely than ZIKVI-negative women to have a maculopapular rash (44% vs. 12%;  $P=0.02$ ), conjunctival involvement (58% vs. 13%;  $P=0.002$ ), and lymphadenopathy (40% vs. 7%;  $P=0.02$ ). Remarkably, 12 (29%) of 42 women who underwent ultrasonography had fetal abnormalities, none of which were seen in the ZIKVI-negative cohort. In the eight women who had delivered babies to date, ultrasonographic findings were confirmed at birth.

### **Comment**

The prevalence of ultrasonographic abnormalities in this subpopulation of pregnant women is extremely disturbing. The evidence continues to mount that Zika virus should be added to the list of viruses that can impact fetal development and survival.

## The GMA Quiz

We are pleased to announce that we would be conducting a quiz quarterly this year. To win **dinner for two at Lighthouse Hotel, Galle**, please submit your answers by email [gmathk@gmail.com](mailto:gmathk@gmail.com) or hand them over to the GMA office on or before the **15<sup>th</sup> of May 2016**.

- Which of the following is false regarding Hippocrates?
  - The Hippocratic oath was written in Greece in 5<sup>th</sup> century BC
  - When taking the oath the oath taker swears on Greek god Zeus
  - Clubbed fingers are sometimes referred to as 'Hippocratic fingers'
  - The 'Hippocratic face' is the change in the face produced by impending death
  - Hippocratic corpus is a collection of medical works from ancient Greece
- Who is known as the world first Physician?
  - Imhotep/ Imuthes
  - Herophilus of Chalcedon
  - Erasistratus of Ceos
  - Hippocrates of Kos
  - Galen of Pergamon
- The world's first stethoscope was made of
  - Gold
  - Silver
  - Rubber
  - Steel
  - Wood
- In the ancient times what was a 'medical finger'?
  - An index finger used for examination
  - An inflamed whitlow
  - An ingrown toe nail
  - A finger that physicians used to stir ointment
  - A damaged finger nail
- Back in the 19<sup>th</sup> century the word 'anatomy' was used to describe
  - Genitalia
  - A child
  - A young man
  - An elderly man
  - A very skinny person
- What is the name of the famous surgeon with the record for a 300% death rate in one operations?
  - Galen
  - Andreas Vesalius
  - Robert Liston
  - Ambroise Pare
  - John Hunter
- Which of the following was not accounted for the 300% death rate in that famous operation?
  - Amputation of his fingers
  - Amputation of a leg
  - Amputation of assistant's fingers
  - Slashing of the coat tails of a distinguished spectator
  - A spectator dropping dead from fright
- Which of the following is false regarding microbes and antimicrobials?
  - Germ theory of disease was forwarded by Louise Pasteur
  - Ignaz Semmilwek is known as 'savior of mothers'

- c. Penicillin was the first chemical compound identified with antibacterial properties
  - d. Prontosil is the first commercially available systemically active antimicrobial drug
  - e. The term 'antibiosis' was introduced by Alexander Fleming
9. What is the first organ that was transplanted successfully to a human
- a. Heart
  - b. Lung
  - c. Pancreas
  - d. Kidney
  - e. Gut

10. Which of the following is not correctly paired
- a. Use of treatment with immediate effect such as venesection, intestinal purging, vomiting- Heroic Medicine
  - b. Use of diluted compounds of substances - Homeopathy
  - c. Diagnosing diseases by identifying the changes of the skull overlying the parts of the brain overlying the corresponding area - Phrenology
  - d. Use of regular medicine-Allopathy
  - e. Using the healing power of water-Hygienic system

## Cover Story

### The 10 most insane medical practices in history

This is one of the 10 most insane medical practices in the history according to cracked.com. It shows a frontal lobotomy carried out by inserting an orbitoclast under the eye lids and driving it through the bone into the brain using a mallet to sever the connection of the frontal lobe with rest of the brain! The inventor of the lobotomy was awarded the Nobel Prize in 1949.

The rest of the insane practices include,

- 10. Narcotics as soothing syrup for children
- 09. Mercury as a treatment of disease
- 08. Heroin as a cough suppressant
- 07. Electric belt for impotence
- 06. Lobotomy for mental disease
- 05. Urine therapy for good health
- 04. Bloodletting (bleeding) to cure disease
- 03. Tapeworms and tapeworm eggs as diet pills
- 02. Trepanation (drilling holes in the head) for seizures and migraine
- 01. Doctor administered vaginal massage for female hysteria - the Doctors became too busy & ultimately led to the invention of the vibrator





*First Announcement***GALLE MEDICAL ASSOCIATION**75<sup>th</sup> Annual Academic Sessions – October 2016**CALL FOR SHORT PAPERS AND GMA ORATION**★ **Abstracts of Short Papers / Poster Presentations**

The number of words should be limited to 250. Two printed copies should be submitted along with a soft copy in Microsoft Word as an e-mail attachment.

★ **Galle Medical Association Oration – 2016**

Full text must be submitted in triplicate.

**Submissions will be accepted up to 15<sup>th</sup> July 2016**

Further details can be obtained from <http://sljol.info/index.php/GMJ/index> and the GMA Office, Teaching Hospital, Karapitiya.

Tel: 091-2232560, e-mail: [gmathk@gmail.com](mailto:gmathk@gmail.com) & [gmjgalle@gmail.com](mailto:gmjgalle@gmail.com)

**GMA - Annual Academic Sessions****75<sup>th</sup> Anniversary**

Annual Academic Sessions will be held on 5<sup>th</sup>, 6<sup>th</sup> & 7<sup>th</sup> October 2016

at the Auditorium of the Faculty of Medicine, Galle.

**Please keep the dates reserved.****A Message from the Editors**

We would like to invite the membership of GMA to contribute to the GMA newsletter. Please feel free to send articles, letters, picture stories, poems, puzzles, jokes, cartoons etc. related to medical profession. We would also like to hear your views about the GMA newsletter. Please send them all to Editors GMA via e-mail [gmathk@gmail.com](mailto:gmathk@gmail.com)

**We would like for invite the non members to join the Galle Medical Association (GMA). Please inquire about the membership form at the GMA Office.**

**TO:***From:***GALLE MEDICAL ASSOCIATION**

GMA Office,

Teaching Hospital – Karapitiya

Galle.

Tel/Fax: 091 2232560

e-mail: [gmathk@gmail.com](mailto:gmathk@gmail.com)web: [www.gma.lk](http://www.gma.lk)