



SLMA

SRI LANKA MEDICAL ASSOCIATION

6, Wijerama Mawatha, Colombo 7, Sri Lanka T'Phone: 2693324 Fax: 2688802

E-mail: office@slma.lk

Website: www.slma.lk

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Press Release

Sri Lanka Medical Association and Intercollegiate Committee Meeting with His Excellency President Gotabaya Rajapaksa

A team of six specialists from the Sri Lanka Medical Association and the SLMA Intercollegiate Committee (SMIC) with expertise in prevention and management of COVID-19 infection, had a fruitful discussion with His Excellency President Gotabaya Rajapaksa yesterday, the 10th of May 2021.

The discussion was cordial and meaningful. The team of experts were able to bring to His Excellency's knowledge that the number of cases of COVID-19 are rapidly and exponentially rising and the number needing ICU care, as well as deaths related to COVID 19, are speedily escalating. They emphasised that all healthcare resources are being overwhelmed, as indicated by the rapid increase in utilization of all health sector beds and healthcare facilities by COVID-19 patients. The number requiring oxygen and the number waiting for Intensive Care Unit (ICU) management is also rapidly rising. There is a severe shortage of PCR facilities, particularly in peripheral hospitals. There are many diagnosed COVID infected individuals languishing at home, awaiting admission to hospitals or intermediate centres. As such, unless a rapid action plan to reduce the case load is implemented, the health care system will inevitably go out of control and end up in a total breakdown.

The facilities for Non-COVID medical problems are also being curtailed through necessity and their management is getting neglected, leading to an unavoidable increase in deaths of patients with Non-COVID diseases. While appreciating the efforts taken by His Excellency to expand the facilities for care of COVID 19 patients by providing beds, ICU beds and oxygen supplies, the team highlighted that they are finite. The possibility of physical and mental fatigue of healthcare professionals is disturbing and quick action to curtail the rapid rise of cases is essential to avert a collapse of the healthcare system.

There is a lag-time of 2 weeks from the time of infection to develop symptoms and another two weeks for the need for ICU care and even death. As such the death rate seen today is the result of infection contracted one month ago. Based on that perception, it is likely that there will be more and more cases and deaths over the next 3 -4 weeks. Unless action is instituted today, there will be an exponential rise of cases followed by a surge, at which time interventions of any sort are unlikely to have any significant impact on the outbreak. In this scenario, a virtual breakdown of the health care system would be unavoidable and perhaps inevitable.

The UK variant of COVID 19 is highly transmissible and infectious. As there is a delay in getting PCR reports, by the time the report is available, the infected patient has already spread the disease to a larger community in society. As such, locking down smaller areas such as Gramaseva Divisions are unlikely to be effective in controlling the spread of infection.

A rapid mass vaccination programme is the solution for the COVID outbreak in the long-term. Nevertheless, vaccines with two doses take a minimum of 6 - 8 weeks to develop an effective immune status. As such, vaccination is not the only or the best solution for the immediate crisis in hand, but the need of the hour is something that offers urgent results of reducing the caseload.

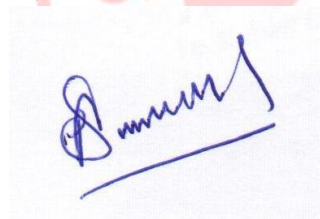
The COVID deaths may reach unprecedented levels and a grave national catastrophe is a real potential threat in the near future unless something that offers rapid results is implemented. Achieving rapid control would save many lives, ease the burden on hospitals, lay the background for vaccination and be economically beneficial in the longer-term.

Despite the hardships encountered by people, evidence from many countries shows that strict and immediate measures to restrict movement of people is the only measure that quickly and drastically reduces the numbers of cases. As such, our request for very stringent implementation of the Extraordinary Government Gazette notification on controlling COVID-19, published in October 2020 with selected Lockdown Processes of certain areas such as districts and even provinces, based only on scientific evidence of the density of caseloads, together with restriction of inter-district and inter-provincial movement of people was well taken up by His Excellency the President, for early implementation.

Request to authorize isolation of families at homes, along with home management of asymptomatic cases, while being carefully and assiduously monitored by health care professionals was also well received. This should be complemented by arrangements being made for early transfer of needy patients with pneumonia, to the closest designated hospital. The need for long-term and sustained adherence to basic health care measures was also highlighted.

Following members were included in the team that met His Excellency:-

Dr Padma Gunaratne, Consultant Neurologist and President, SLMA
Professor Jennifer Perera, Consultant Microbiologist and Past President, SLMA
Dr. Manilka Sumanatilleke, Consultant Endocrinologist and Vice President, SLMA
Dr Harsha Sathischandra, Consultant Physician and President, College of Internal Medicine
Prof Thamasi Makuloluwa, Consultant Anaesthesiologist and President, College of Anesthesiologists
Dr Ruwan Ferdinando, Consultant Community Physician (Planning), National Institute of Health Sciences, Kalutara



Dr. Padma Gunaratne
President
Sri Lanka Medical Association and SLMA Intercollegiate Committee