



# IMPA

THE OFFICIAL NEWS LETTER OF THE INDEPENDENT  
MEDICAL PRACTITIONERS ASSOCIATION

# NEWS

www.impa-sl.com

ISSUE 07 | VOLUME - 29 | JULY 2025



## FROM THE PRESIDENT'S PEN...



Dear Colleagues,

As we close the month of July, I am filled with immense pride and gratitude for the remarkable milestones we've achieved together. Our collective commitment to advancing medical education and excellence continues to elevate IMPA's impact. Here are the highlights:

### 1. Outstanding CME Programs: Advancing Knowledge & Practice -

July saw two highly impactful Continuing Medical Education (CME) sessions, each **addressing** critical areas of modern medicine - "**Dementia Diagnosis and Management**" Led by Dr Harsha Ediriweera (Consultant Psychiatrist) and Associate Professor Sunera Fernando (Consultant Psychiatrist), this session provided cutting-edge insights into early detection, therapeutic interventions, and holistic care approaches for dementia patients.

### Beyond the Curve: Advanced Strategies in Scoliosis Care -

Featuring Dr Pramod K. Sudarshan (Scoliosis Surgeon), this program explored innovative surgical and non-surgical techniques to improve patient outcomes in spinal deformities.

### "Changing Landscape of Cancer: SBRT CyberKnife & PBT"

Professor Sridhar P. S. delivered an enlightening talk on the transformative role of Stereotactic Body Radiotherapy (SBRT) and Proton Beam Therapy (PBT) in oncology, offering hope for precision-driven cancer care. These sessions were met with overwhelming participation and engagement, reflecting our community's thirst for knowledge and collaboration.

### 2. Presidential Induction Committee: A Heartfelt Thank You

The Presidential Induction Committee worked tirelessly throughout July to orchestrate a seamless transition and celebratory event. Their dedication - from venue coordination to program curation—has been nothing short of exemplary. We look forward to unveiling their hard work at the upcoming induction ceremony.

Together, we are shaping the future of healthcare.

With gratitude,  
Thank you,  
Yours Sincerely,

**Dr. Sanath Hettige** MBBS, DFM, MD, FCGP

President, Independent Medical Practitioners Association of Sri Lanka

Board Certified Specialist in Family Medicine,

Honorary Senior Lecturer, Faculty of Medicine, University of Colombo,

Chief Scientist, Oil of Dermae Laboratories & Dermae Research Medical Center

Chairman, Health & Nutrition Committee, Organization of Professional Association of Sri Lanka

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# IMPA CPD Program 2<sup>nd</sup> July 2025

The Independent Medical Practitioners Association had the first CPD program for July on Wednesday, the 2<sup>nd</sup> July 2025, at the OPA auditorium, 275/75, Prof. Stanley Wijesundara Mawatha, Colombo 7.

Two eminent speakers made the following presentation.

## “Dementia Diagnosis and Management”

by

**Dr Harsha Ediriweera**

Consultant Psychiatrist, South East Sydney Local Health District,  
Conjoint Senior Lecturer, UNSW Sydney

and

**Associate Professor Sunera Fernando**

Consultant Psychiatrist, Northern Sydney Local Health District,  
Clinical Associate Professor, Macquarie University, Sydney and  
Clinical Associate Professor, Graduate School of Medicine,  
University of Wollongong, NSW



# IMPA CPD Program 13<sup>th</sup> July 2025

The Independent Medical Practitioners Association had the 2<sup>nd</sup> CPD program on Sunday, the 13<sup>th</sup> July 2025, at the OPA auditorium, 275/75, Prof. Stanley Wijesundara Mawatha, Colombo 7.

Two eminent speakers made the following presentations.

## “ Beyond the Curve: Advanced Strategies in Scoliosis Care.”

by

**Dr Pramod K. Sudarshan**

MS Ortho, Fellow in Spine Surgery(ASSI), International Spine Fellowship (IGASS, SICOT, Eurospine),  
Senior Consultant Spine & Scoliosis Surgeon, Apollo Hospitals, Bengaluru

and

## “Changing landscape of cancer - SBRT Cyberknife, PBT”

by

**Prof Sridhar**

P.S. Senior Consultant - Dept. of Radiation Oncology, Clinical Lead Cyberknife,  
Apollo Hospital, Bengaluru

The event was sponsored by **MEDICARE GLOBAL CONNECTIONS**



# When Good Intentions Backfire: Avoiding Unintended Effects in Public Health Programs

**S Rajhkumar**

MD | Consultant in Medical Administration | RDHS Polonnaruwa

Public health promotion programs are vital – from vaccination drives to health education campaigns, sanitation improvements, and mental health initiatives. However, even the best-intended programs can sometimes produce unexpected negative effects.

## What are these unintended effects?

- Causing fear, guilt, or stigma
- Encouraging riskier behaviours due to false security
- Widening health inequalities
- Cultural resistance or backlash
- Financial burden on poor households
- Confusion or message fatigue
- Privacy concerns or community tensions

## Why do they happen?

When programs overlook cultural context, psychological impact, fairness, or fail to evaluate and adapt continuously.

- How can we prevent them?
- Engage communities early - listen first
- Use behavioural insights to predict reactions
- Pilot test before rollout
- Ensure equity and reach all groups
- Monitor, evaluate, and adapt rapidly
- Use positive, empowering messages
- Collaborate with local leaders and sectors

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## Bottom Line

Public health programs should **heal, not harm**. Designing with humility, cultural respect, and real-time learning ensures **good intentions lead to good results** for every community.

# Global Public Health Summit 2025: A Resounding Success in Driving Change for Health Equity

The Global Public Health Summit 2025 (GPHS2025), jointly hosted by the College of Community Physicians of Sri Lanka (CCPSL) and the Faculty of Medicine, University of Colombo, unfolded from 13<sup>th</sup> to 16<sup>th</sup> July 2025, marking a landmark convergence of global thought leaders, researchers, and policymakers under the theme “Delivering High-Quality Care in Resource-Limited Settings - Ensuring Every Baby Thrives, Every Community Flourishes.”

This notable event was presided over by Dr. Kapila Jayaratne President - College of Community Physicians of Sri Lanka, a Board-Certified Specialist in Community Medicine and a Senior Lecturer, Department of Community Medicine, Faculty of Medicine, University of Colombo.

This four-day event was enriched by collaborations with the Ministry of Health Sri Lanka, Commonwealth

Medical Association, WHO, UNICEF, and UNFPA, bringing together over 500 national and international delegates.

GPHS2025 set a new benchmark for inclusive, evidence-driven public health dialogue. The summit empowered young researchers through thematic abstract sessions, providing exposure to key public health challenges and innovative solutions and inspired future public health leaders.

CCPSL remains committed to ensuring that every baby thrives and every community flourishes through continued advocacy, policy engagement, and capacity building.



# IMPA Journal Guidelines

Articles are requested for publication in the IMPA journal 2025, to be released at the IMPA AGM on 14<sup>th</sup> of December. The deadline for the submission of articles is 30<sup>th</sup> September 2025. Please follow the guidelines given below for the submission of articles.

## 1. Scope and Focus

IMPA Journal is published annually by the Independent Medical Practitioners Association of Sri Lanka. The Journal will be released at the AGM of that particular year. This is a Medical Journal with the ISSN 2465-6135. The journal welcomes submissions that contribute to the advancement of knowledge and practice in independent medical practice, including but not limited to:

- Clinical case studies and research
- Health policy and regulation analysis
- Practice management and innovation
- Ethics, law, and patient care
- Continuing medical education
- Experiences from practice
- Any Other relevant articles and news

## 2. Article Types

- Original Research Articles (1000-3000 words)
- Case Reports (800-1500 words)
- Review Articles (2000-3500 words)
- Opinion/Commentary (500-1200 words)
- Practice Pearls (300-500 words)
- Letters to the Editor (up to 500 words)
- Book/Resource Reviews (up to 800 words)

## 3. Formatting Guidelines

- Submit in MS Word (.doc/.docx) format.
- Use 12 pt Times New Roman, double-spaced.
- Include title, author name(s), credentials, and affiliation.
- Abstract (150-250 words) for original research and reviews.
- Use Vancouver style reference.
- Images, charts, and figures should be high-resolution and captioned.
- Avoid plagiarism. All sources must be properly cited.

## 4. Ethical Considerations

- Patient consent must be obtained for identifiable case reports/images.
- Conflict of interest and funding sources must be disclosed.
- Submissions must comply with ethical standards for medical publishing.

## 5. Submission Process

- Submit articles via email to [champa.impa@gmail.com]
- Each submission undergoes editorial review, and selected articles are sent for peer review.
- Authors will be notified of acceptance, revisions, or rejection

## 6. Copyright and Permissions

- Authors retain copyright but grant the journal the right to publish.
- Reproduction of previously published content must have appropriate permissions.

## 7. Contact

For inquiries, reach out to:

**Dr Neelamani Sandhaya Rajapaksa Hewageegana**  
[MD(Timisoara, Romania), MSc, MD (Colombo, Sri Lanka), PhD (Sheffield Hallam, UK)]

*Editor IMPA (Independent Medical Practitioners Association) Journal Email: drneelamani@yahoo.com*

## Links to Interesting Articles

### IMPA

Link : [impa-sl.com](http://impa-sl.com)

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### The Colombo Medical Congress

Link : <https://share.google/VW2dYqIHXRSpUzOP>

.....

### For A Healthier Tomorrow

Link : [Ceylon Today https://share.google/xVmPV2aMSGKihUqQM](https://share.google/xVmPV2aMSGKihUqQM)

.....

### When Public Health Goes Wrong

Link : [https://pmc.ncbi.nlm.nih.gov/articles/PMC10881261/?utm\\_source=chatgpt.com](https://pmc.ncbi.nlm.nih.gov/articles/PMC10881261/?utm_source=chatgpt.com)



**32<sup>nd</sup> ANNUAL  
SCIENTIFIC  
SESSIONS**

**CALL FOR SUBMISSIONS**



# Healthcare Innovations



**SUBMIT  
BEFORE 11<sup>th</sup> AUGUST  
2025**

[https://is.gd/cmasl\\_innovations\\_2025](https://is.gd/cmasl_innovations_2025)

Use the QR or the link to submit your innovations

For Further Details Contact  
Dr. Prasanna Fernando

**+94 (77) 362 7833**

Use this link to download the submission guideline | [https://is.gd/innovation\\_guideline](https://is.gd/innovation_guideline)



**THE COLLEGE OF MEDICAL ADMINISTRATORS OF SRI LANKA**

# Application as CPD Mentees

Official NCPD Channel - Stay updated with CPD registration, submissions & guidance for Sri Lankan healthcare professionals.



## Register for CPD programs:

<https://forms.gle/P2B73UqhZYKiTfSAA>



## Check your CPD Registration & Get your CPD ID:

[https://script.google.com/macros/s/AKfycbxKUfCDnwAf25\\_qDNqUjqIMrYbNVPq-Of0XKwx4KXgH9QI\\_k0lf23wie8\\_jHHUtKuogGg/exec](https://script.google.com/macros/s/AKfycbxKUfCDnwAf25_qDNqUjqIMrYbNVPq-Of0XKwx4KXgH9QI_k0lf23wie8_jHHUtKuogGg/exec)



## Upload your CPD activity/certificate:

<https://forms.gle/cQXGLqPbMQcRrk8W9>



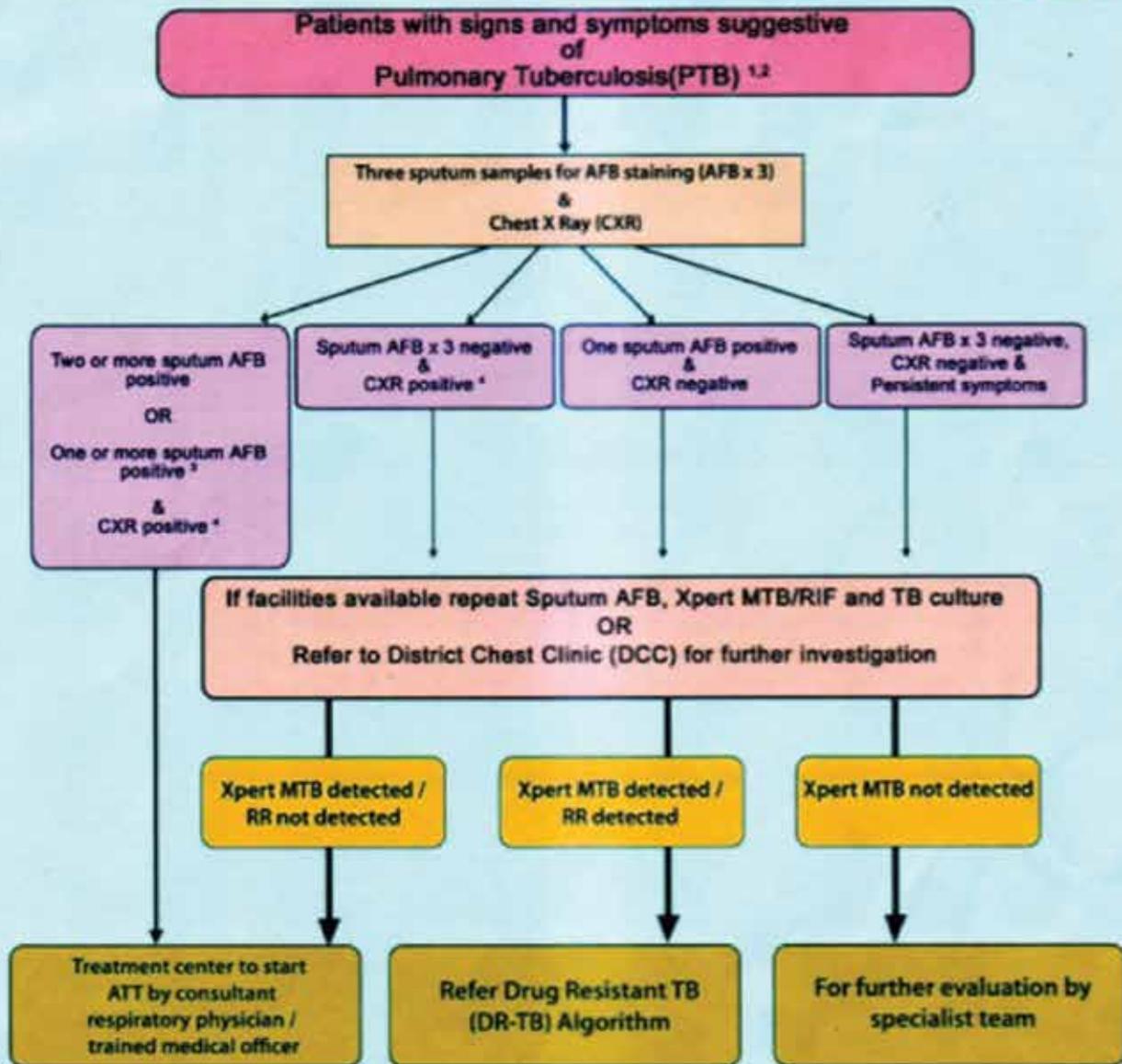
Powered by the Education, Training & Research (ET&R) Unit Ministry of Health - Sri Lanka



## Help your colleagues stay updated - share our channel link!

Follow the CPD For Doctors  | LK Sri Lanka channel on WhatsApp: <https://whatsapp.com/channel/0029Vb5e8GHDuMReWasv6V0V>

# Diagnostic Algorithm for Tuberculosis



- Key symptoms of TB are cough of 2 weeks or more and/or chest pain, shortness of breath, haemoptysis. In immunosuppressed individuals and in elderly people (50 years or more of age) cough of any duration should be considered. Other symptoms of TB are loss of appetite, tiredness, loss of weight or failure to gain weight in children, low grade fever, night sweats.
- Pulmonary tuberculosis suspects with high risk should be referred urgently / early to District Chest Clinics or situation where no other diagnosis to be consider. These High-risk categories include Health care workers (HCW), Patients living with HIV (PLHIV), prisoners, drug addicts, close contacts of Bacteriologically confirmed PTB patients and patients with past tuberculosis or immunosuppression.
- If two or more sputum samples are positive without chest x-ray, the patient should be referred for treatment
- Positive chest X-ray is defined as any abnormality that could be consistent with TB

#### Abbreviations

AFB - Acid Fast Bacilli, Xpert - Gene Xpert, MTB - Mycobacterium Tuberculosis, RR - Rifampicine Resistance, ATT - Anti Tuberculosis Treatment

**TUBERCULOSIS is completely cured with proper treatment**



**National Programme for Tuberculosis Control & Chest Diseases**

Ministry of Health



# mindfulness and letting go

Trying to control or avoid worries or other negative thinking by answering back, chasing, or suppressing these negative thoughts can sometimes *strengthen* this negative experience rather than diminish it. Mindfulness is one way of skilfully disengaging from or letting go of negative thinking.

This approach involves practicing how to notice when you are automatically drifting into negative thinking and then skilfully redirecting your attention back to the present, to the here and now



It may be helpful to think of this approach in terms of a radio. That is, imagine that the negative thoughts that drift into your mind as coming from a loud

radio that is tuned to a station where the thoughts are very negative and seem to be shouting at you.

The skill in mindfulness is not so much about trying to turn the radio off, but changing the way you listen to the radio. In this way the volume of the radio station can be reduced, and therefore seem less disruptive and distressing.

However, the important thing to remember is this is not a quick fix, it is not easy, and requires regular practice. The thoughts may still shout at you, but you are changing the way you listen. Begin with the formal practice described in this information sheet. Just like any skill, such as learning a musical instrument, you need to practice, practice, practice! By practicing daily you may eventually become better at letting go, and be able to do things in a more informal way.



## Steps for Letting Go

To begin, it may be best to start by practicing with minor concerns before moving onto major worries or negative thoughts.



1) To begin the practice, sit down in a chair and adopt a relaxed and alert posture, then ask yourself, **what am I experiencing right now?** What thoughts are around, what feelings are around, and what body sensations?

Allow yourself to just acknowledge, observe and describe these experiences to yourself, without trying to change them or answer the thoughts back. Spend 30 seconds to 1 minute just doing this.



2) Now bringing **your focus of awareness to your breath**, focusing on the sensations of your breath as it moves back and forth in your belly. **Binding** your awareness to the back and forth movements of the sensations in your belly from moment to moment, and letting all thoughts go. Maybe say to yourself 'relax' or 'let go' on each outward breath. Spend about 30 seconds to 1 minute doing this.

3) Now **expanding your awareness to sensing your whole body breathing**, being aware of sensations throughout your body. If there are any strong feelings around, maybe saying to yourself "whatever it is, it is OK, just let me feel it." Allowing yourself to breathe with these feelings, and if your mind wanders to bothersome thoughts just acknowledge and let go of these - focussing back on sensing your breath. Continue doing this for about 1 minute.

**TIP:** You can try increasing the time of steps 2 & 3 as you start to get more familiar with this skill.

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Centre for  
CCI [clinical] interventions  
• Psychotherapy • Research • Training

## A DOCTOR...

I have studied 14-16 hrs a day .At times much more.

I have worked relentlessly for 36 years. I have not slept for hours to take care of unknown people.

I have experienced the saddest moments of my life when I have lost a patient

I have experienced happiest moments of life. when I could save a gravely ill patient.

I gave up a lot of pleasures of my life to reach to this level.

I took no hesitation in cleaning the dirtiest of wounds ,stool n urine of patients

I have put in my heart and soul into my profession

I do not get any special concessions or support from the government

I have a family and a right to good living too.

I take pride in being a doctor...one who is there for all irrespective of caste,class,creed,religion or status..



**WEAR MY SHOES FOR A DAY BEFORE  
YOU JUDGE ME!**

**SAVE THE DATE**

**Paduru Party**  
**22<sup>nd</sup> August**  
*Friday*

**Felicitation**  
of former academic staff

**16<sup>th</sup> September**  
*Tuesday*

**fMJA Night**

**Colombo Medical Congress '25**

**THE COLOMBO MEDICAL CONGRESS 2025**

*Shaping the Future Doctor Through Education, Research and Innovation*

**26<sup>th</sup> - 27<sup>th</sup> November 2025**  
**Pre Congress 25<sup>th</sup> November**

**DEADLINE**

ABSTRACT SUBMISSION **1<sup>st</sup> AUGUST 2025**

**SUBMIT YOUR ABSTRACT HERE**

SCAN THE QR TO UPLOAD DIRECTLY

<https://share.google/VW2dYqIHXRSpUzOP>

# GI PHYSIOLOGY LAB



UNIVERSITY SURGICAL UNIT, NHSL

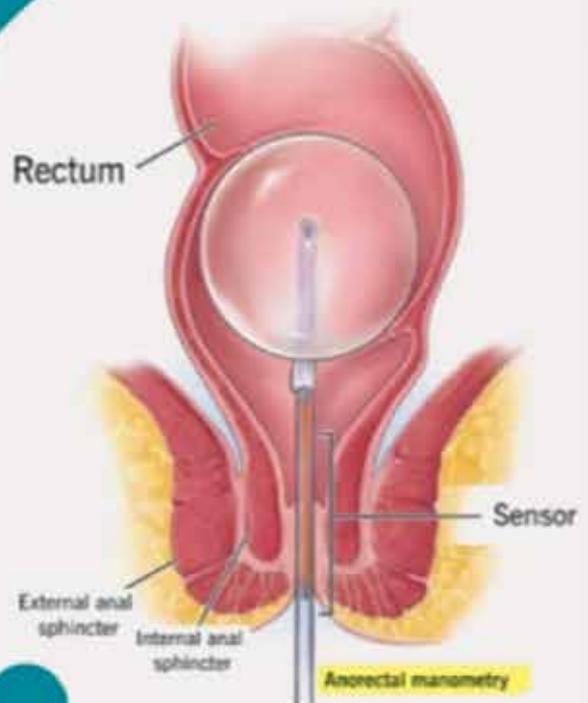
## SERVICES WE PROVIDE:

### Diagnosis of :

- Anal Incontinence
- Chronic Constipation
- Dyssynergic Defecation (DSD)
- Anal Sphincter & Obstetric Injuries
- Rectal Prolapse
- Pediatric Anorectal Disorders
- Dysphagia

### Treatments:

- Kiegel's Exercise for Incontinence
- Biofeedback Therapy for DSD



## HOW TO GET REFERRED?

- Visit University Surgical Unit OPD Clinic.
  - 🕒 Tuesdays @ 7.30 am.
  - 📍 Room 19, 3rd Floor, New OPD, NHSL Colombo.
- After detailed assessment, referred to Anorectal Manometry at the GI Physiology lab for further evaluation & Treatment.
- Wednesdays | 7:30 AM | GI Physiology Lab

## MORE INFORMATION

0112671846

[gilab.cmb.ac.lk](http://gilab.cmb.ac.lk)



Appointment only



## PUBLIC NOTICE

I would like to draw the attention of the public to the **Section 56** of the National Medicines Regulatory Authority Act No. 05 of 2015;

“**56.** (1) Every Medical Practitioner, Dentist or Veterinary Surgeon shall write the generic name of the medicine in every prescription issued by him.

(2) Where the Medical Practitioner, Dentist or Veterinary Surgeon so requires, he may in addition to the generic name write a particular brand name of the medicine in the prescription.

(3) A Medical Practitioner, Dentist or Veterinary Surgeon may write only the brand name of a medicine in the prescription where the medicine prescribed is a combined medicine for which the generic name is not available.

(4) Where the brand name of the medicines, which is in the prescription is not available or affordable to the customer, the Pharmacist may dispense any other generic medicine with the consent of the customer.

(5) The Pharmacist shall inform the customer the range of generic medicines with or without brand names available in the Pharmacy and their prices enabling the customer to buy the medicine according to his choice.

(6) A Pharmacist who fails to disclose the generic medicines with or without brand names available in the Pharmacy and their prices to the customer at the time of sale, commits an offence.”

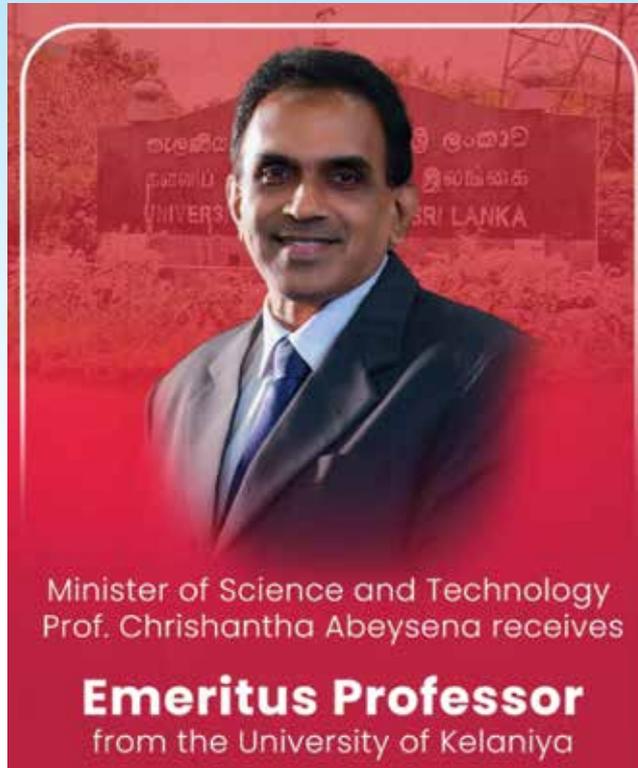
  
Chairman

National Medicines Regulatory Authority

18.12.2024

# Congratulations

IMPA President and the council congratulate Emeritus  
**Professor Chrishantha Abeysena**



.....

## HEARTIEST CONGRATULATIONS on TWO AWARDS in June to the IMPA President

### Dr Sanath Hettige

(MBBS, DFM, MD, FCGP) President, Independent Medical Practitioners Association of Sri Lanka was recognized for:

Teaching medical students by Prof. Vidya Jyothi Vajira H.W. Dissanayake, Dean of the Faculty of Medicine, University of Colombo.

Sustainable Tourism Reward for Eco Jungle Hide Out Tourism Resort by the UNDP Resident Representative Sri Lanka Ms Azusa Kubota.





**Paracetamol (Paracetamol Tablets BP 500 mg 10x10 & Oral Solution BP 120mg/5ml 100 ml)**



**EmpaMor (Empagliflozin Tablets 10 mg & 25 mg 10x3)**



**SalMor (Salbutamol Oral Solution BP 2 mg/5 ml 100 ml)**



**CilniMor (Cilnidipine Tablets IP 5 mg & 10 mg 10x3)**



**BisoMor (Bisoprolol Tablets BP 2.5 mg & 5 mg 10x3)**



**RivoMor (Rivaroxaban Tablets 10 mg & 20 mg 10x3)**



**Ros-10 (Rosuvastatin Tablets BP 10 mg 10x3)**



**MorSartan (Losartan Tablets BP 50 mg 10x10)**



**ChlorMor (Chlorphenamine Tablets BP 4 mg 10x10)**



**FoliMor (Folic Acid Tablets BP 1 mg 10x3)**

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**MAKING PREMIUM HEALTHCARE AFFORDABLE**

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