

Jaffna Medical Association



Eight Annual Scientific Sessions

25th, 26th & 27th May 1990

Chief Guest

His Excellency

David Gladstone

High Commissioner For U. K. in Sri Lanka

Venue : Kailasapathy Auditorium, 25th May 4 p.m.

Nurses Training School 26th & 27th May 9 a.m. 5 p.m.

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யாழ் வைத்திய சங்கம் - வாழ்த்துப் பாட்டு

ராகம் :- ஹம்சத்வனி

தாளம்:- ஆதி

பல்லவி

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வளருக இதன் புகழ் நாளும்

அனுபல்லவி

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(வாழிய)

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(வாழிய)

சரணம் 2

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வளர்ச்சிகள் புதுமைகள் அனைத்தும்
தாங்கிய தான சஞ்சிகை படைத்தே
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ENDOSCOPIC EVALUATION OF GASTRO-DUODENAL MUCOSAL CHANGES
AND LONG TERM LOW DOSE ASPIRIN THERAPY

Mathialagan R., Fernando M.J.,
Gunasekera P., Jayasinghe N.S.

The Medical Unit, Sri Jayewardenepura General Hospital.

It is well-recognized that Aspirin in doses necessary to produce analgesia or anti-inflammatory effect produces gastroduodenal mucosal lesions. These have been demonstrated in earlier trials and reported in the literature. Non steroidal anti-inflammatory drugs other than Aspirin have also been incriminated and gastroduodenal mucosal lesions induced by these agents have also been described. Long term low dose Aspirin is being used increasingly in different clinical situations such as, in preventing coronary thrombosis, cerebral thrombo-embolic disease, transient ischaemic attack, unstable angina and myocardial infarction. So far, no study has reported the effects of long term low dose Aspirin on the gastroduodenal mucosa.

We evaluated the endoscopic appearances of the gastroduodenal mucosa in 50 patients taking regular low dose Aspirin for cardiovascular and cerebro-vascular diseases.

Six patients (12%) had an endoscopically normal stomach and duodenum. Forty four patients (88%) had evidence of mucosal injury. (Superficial gastritis 50%, erosive gastritis 18%, gastric ulcer 14%, duodenal ulcer 4%, duodenitis 2%).

Dyspeptic symptoms were present in 33% of those with completely normal endoscopy and in only 13% of those with abnormal endoscopic findings. Only 3 of the 9 patients with ulcer had dyspeptic symptoms.

Patients on our study group could be divided into 3 categories. Patients from each category were re-examined endoscopically after a follow-up period of 12 months to 18 months.

Endoscopic findings and their clinical relevance is discussed based on our findings.

MANAGEMENT OF RESPIRATORY PARALYSIS DUE TO
SNAKE BITE IN A PERIPHERAL HOSPITAL

Sivakumar K.

District Hospital, Kilinochi

Snake bite is a major problem in rural or jungle areas and had caused several deaths in the past. In the Northern Province Kilinochi had recorded a high incidence of snake bites.

Respiratory paralysis caused by the neurotoxic component of the snake venom, is an important cause of death, especially in a peripheral unit with limited facilities. This paper is presented to highlight the fact that early admission to Govt.hospital, without seeking the treatment from native physicians, prompt management of respiratory paralysis with intubation and ambu bag ventilation, could prevent such deaths. Early recognition of respiratory paralysis and prompt treatment with intubation and ambu bag ventilation had saved many lives, and made transfers to the General Hospital less frequent for this purpose. The public must be educated regarding the availability of effective treatment for snake bite poisoning and advised to take patients direct to the Govt.hospital, the Govt.hospitals in the periphery must all be provided with equipments such as laryngoscope, endotracheal tubes and ambu bag and the medical personnel must be well trained in intubation and ventilation in order to reduce death rates from snake bites.

ASSESSMENT OF THE SIGNIFICANCE OF MECONIUM
STAINED LIQUOR AMNII AND ITS MANAGEMENT

Viveganandan K., Nanthakumar B.

Mahadeva J., Gunaratnam M.

The Obstetric Unit, G.H.Jaffna

3 Deliveries complicated by meconium stained liquor amnii (MSL) was studied over a six month period. The incidence of MSL was 10.87%. There was a 50% increase in perinatal mortality and a three-fold increase in operative deliveries. The overall incidence of still birth and birth asphyxia (SB/BA) was 21.70%. The main associated factor with MSL was consanguinity which occurred in one-third of patients and which surprisingly had a relatively good prognosis with a SB/BA rate of 11.63%. When MSL was associated with fetal heart rate abnormalities or preeclampsia/eclampsia the prognosis was poor with SB/BA rates of 57.14% and 40% respectively. Thick meconium itself was associated with a poor prognosis with a SB/BA rate of 48.75%. Management of these patients is discussed.

3

PLACE OF SORBITRATE IN THE MANAGEMENT OF
ALARI SEED (YELLOW OLEANDER) - POISONING
AN EXPERIENCE IN THE PERIPHERAL UNIT

Sivakumar K.

District Hospital, Kilinochi

Alari seed (Yellow Oleander) is a commonly used substance for suicide in the Northern and Eastern regions of Sri Lanka. It has a cardiotoxin with an effect that is similar to that of digoxin. The presently practiced management of this poisoning include stomach wash, and atropine infusion or bolus injection for sinus bradycardia or heart blocks. Dopamine infusion is tried when the blood pressure starts to drop and external pace maker used for complete heart block or asystole. The experience of the author is that when such a state develops, the prognosis is very poor and the mortality is very high. A new regime, using sorbitrate along with atropine infusion was tried in this condition which apparently has had beneficial effects. Discussion will be based on this limited experience and the possible ways by which sorbitrate could help.

3

A CASE REPORT OF ACUTE FATTY LIVER OF PREGNANCY

Mathialagan R., Fernando M.J., Jayasinghe D.S.J.

Wijayarathne D.N., Jayasinghe N.S.

Sri Jayawardenepura General Hospital

Acute fatty liver of pregnancy is a rare disease. Only 100 cases have been reported in the English literature, but it is of interest because of its high fetal and maternal mortality rate. (85 and 75 percent respectively).

We describe what we believe to be the first reported case of acute fatty liver of pregnancy in Sri Lanka though confirmation of this diagnosis cannot be made in our set up due to lack of facilities at present.

The patient is Mrs. P.L. Chandrika 20 yr. old house wife from Panadura, was admitted to Sri Jayawardenepura General Hospital (SJGH) on 30th of November 1989 because of jaundice and impending labour.

She was well until one week earlier when she developed anorexia, nausea, vomiting and mild fever for which she was warded at B.H. Panadura and transferred to SJGH two days later.

On the day of admission, her POA was 37 weeks and 5 days. She was markedly jaundiced, confused and restless. There was no evidence of cutaneous stigmata of chronic liver cell disease. Her first and second trimester was reported to be uneventful.

Five hours after admission, she vomited fresh blood and developed melaena. Asterexis was observed. Her B.P. dropped to 80 mm Hg systolic and haematocrit came down to 20% and she was transferred to Intensive Care Unit. On the 2nd hospital day, she remained confused, agitated and continued to vomit fresh blood. Her urine output was 700 ml. in the first 24 hours. She delivered a still born baby boy followed by severe post partum haemorrhage.

On the 3rd hospital day, the upper GIT bleeding continued and B.P. dropped further. Bleeding appeared at all skin puncture sites. During the next few days, a low grade fever persisted, but subsequently, patient improved and went home on 28th December 1989.

In summary, this 20 yr. old previously healthy young woman during her 3rd trimester of the 1st pregnancy presented with jaundice, GIT bleeding, hepatic and renal failure with evidence of severe DIC.

The details of the investigations performed, management of this patient and the diagnosis of this case is discussed.

EFFECTS OF MILD PHYSICAL ACTIVITY ON WHITE CELL COUNT

Parameswaran.S.V., Sivapalan K.

Senathirajah S., Thurairajah T.

Dept.of Physiology, Faculty of Medicine, University of Jaffna.

An experiment was carried out in normal adults to study the effects of mild physical activity such as coming to hospital on a bicycle. The subjects came to the Department of Physiology and rested on a bed for 30 minutes (rest). Then they worked on cycle ergometer (set with a constant mild resistance) at a speed of 10 km/hr for four minutes (E1). After resting for about 20 minutes they worked at a speed of 20 km/hr for four minutes (E2). Total and differential white cell counts were done on capillary blood obtained by finger prick at the end of each procedure.

Mean white cell count at rest was 5853 (S.D. = 905).

The subjects were divided into two groups on the basis of previous training on muscular activity (sports) etc. Subjects with exercise training did not show statistically significant alteration at E1. The increase was statistically significant at E2 (mean increase = 1038, S.D. = 919) and the difference between E2 and E1 also was significant (mean = 950, S.D. = 831).

Those who had no exercise training showed a statistically significant reduction at E1 (mean = -808, S.D. = 796). The difference between rest and E2 was highly variable ranging from 1350 to 1450. (mean = 1400, S.D. = 1179). The difference between E2 and E1 was also same (mean = 708, S.D. = 886, range from -400 to 2050). The changes in the total count were seen in both lymphocyte and neutrophil counts. In general, the results indicated a reduction at E1 and increase at E2.

We wish to thank the laboratory staff of the Department for technical assistance and the subjects for the help and cooperation given in this work.

EFFECT OF LONG TERM USE OF THERAPEUTIC
STERIODS ON GLUCOSE TOLERANCE

Balasubramaniam K., * Nageswaran A.

Mahendran S., Ganeswaran V.

* Department of Medicine & Department of Biochemistry,
Faculty of Medicine, University of Jaffna,
Kokuvil, Sri Lanka.

The effect of long-term use of steroids (Prednisolone) on glucose tolerance, was carried out on 12 non diabetic asthmatic patients who have been under steroid therapy for more than one year. The selected subjects had no previous or present history of diabetes mellitus, hyperinsulinism, and hyper function of adrenal cortex. It is noted that they were consuming the drugs during the experimental period also. The mean period of steroid treatment was (3.66) years. Ten non-steroid users from the same age range were considered as controls. The blood sugar was estimated at zero hour and 2h after the glucose load. The administration of this steroid (Prednisolone) led to an increase in the blood sugar level. The mean fasting blood glucose levels of patients and normal subjects were 101.3 ± 24.3 mg/dl and 73.7 ± 13.7 mg/dl respectively. The values show that there was a significant, ($P < 0.01$) elevation in fasting blood glucose level in steroid users. The mean 2h blood glucose levels of patients and normal subjects were 136.6 ± 29.5 mg/dl and 67.7 ± 6.4 mg/dl respectively. These values also show that there was a significant ($P < 0.01$) elevation in 2h blood glucose level in steroid users. The qualitative urine glucose tests showed negative results throughout the test in all the patients and controls. Further studies must be carried out to confirm this observation.

MORTALITY FROM CORONARY HEART DISEASE IN THE
JAFFNA MUNICIPAL POPULATION FOR THE YEAR 1989
AND A COMPARISON WITH THAT OF 1986

Nageswaran A., Sivapragasam (Miss).S.
Vigneswaran K.

University Medical Unit, Jaffna

During the year 1989, 51 patients died from coronary heart disease (CHD) in the Jaffna Municipal Area, giving a mortality rate of 43.1 per 100,000 population, in comparison to 53.3 for the year 1986. 7.35% of all deaths (total 693) from Jaffna Municipal Area for the year 1989 was from CHD. Between the ages of 41 - 70 yrs, 12.4% of deaths among males (20 out of 161) and 10.5% of deaths among females (9 of 86) were due to CHD. A significantly narrowed male:female ratio in deaths from CHD was observed in this area. In 1986 it was 2.9:1 and for 1989 1.8:1. Most number of deaths occurred in the 61-80 year age group in both sexes (60.6% among males and 66.7% among females). 51.5% of males (17 out of 33) and 22.2% of females (4 out of 18) died at home or before reaching hospital giving an overall non-hospital death rate of 41.2% for the year 1989 in comparison to 31.7% for 1986. Except in one case there had been no hindrance for the transport of patients to hospital. However delay in making decision to take the patient to hospital and the difficulty in finding a hiring car quickly had been the major factors in bringing the patients earlier to the hospital. Four patients, who had been suffering from CHD for a length of time, had preferred to stay at home during the terminal illness and one patient went home from hospital to die there. In this analysis 12 males (36.4%) collapsed and died within a matter of minutes due to acute chest pain with or without acute breathlessness and among them 10 were smokers. This is not so among females among whom only 3 out of 18 (16.7%) died in such a manner. 57.6% of males had been smokers, many of them smokers of cigar and 27.8% of females too had been smokers of cigar in this series. Diabetes mellitus was an associated illness in 19.6% of patients (in 1986 - 16.6%) Hypertension was found in 21.6% (27.1% in 1986) and a further 9.8% of patients had both diabetes and hypertension (18.8 in 1986).

A STUDY OF THE FEASIBILITY OF USING SCHOOL TEACHERS TO SCREEN
SELECTED HEALTH PROBLEMS AMONG SCHOOL CHILDREN

A Preliminary Report

Sivarajah N., Sivayogan S., Jegatheesan J.,
Manoharan S., Ambalavanar G.

Dept. of Community Medicine, University of Jaffna

Twenty five school teachers from 14 schools in the Kokuvil-Kondavil Community Health Project Area were provided with a 5-day training to identify and refer common health problems among school children.

1682 children aged 5-18 years were screened by the teachers. A 10% random sample of children, stratified by schools was re-examined by us, to estimate the correctness of the diagnosis made by the teachers.

This paper deals with the data from 7 schools. The extent of agreement between the teachers and the authors was found to be high reliability varied between 0.7 and 1.0 depending on the Health problem. The sensitivity and specificity of identifying health problems is also discussed in the paper.

The study shows that teachers could be used successfully to identify most of the common defects found among school children.

THE EFFECT OF ORAL CONTRACEPTION ON BIOCHEMICAL PARAMETERS

Balasubramaniam K., Mahendran S, Parasuraman V.,
Pushpakumar P., Ramesh N.

Department of Biochemistry, Faculty of Medicine,
University of Jaffna.

This study was carried out to find out the effect of prolonged usage of oral contraceptive (MIORO GYMON LNG 150 μ g: EE 50 μ g) on serum cholesterol, HDL cholesterol, Blood pressure (both systole & diastole) serum Fe, TIBC and glucose tolerance. 11-15 healthy non-obese, well motivated young women in the age group 19-30 yrs were assigned for this study. They are regular users of oral contraceptives for more than one year. 11-15 women of same age group with the same dietary habits who were non contraceptive users were considered as controls. The mean serum Fe and TIBC levels in oral contraceptive users were found to be 222.2 \pm 18.8 μ g/dl and 447.12 \pm 22.8 μ g/dl respectively. In non users, these values were 152.7 \pm 23.9 μ g/dl and 349.2 \pm 38.6 μ g/dl respectively. Statistical analysis showed that this difference is significant ($P < 0.01$). Serum cholesterol and HDL cholesterol levels were measured by WHO method. The mean ratio between total cholesterol and HDL cholesterol for prolonged contraceptive users was 5.2 and for the non users was 3.1. This difference was also statistically significant. The mean blood pressure in users and non users was 126.0 mmHg/85 mmHg and 110.1 mmHg/74.6 mmHg respectively. Glucose tolerance test was done on contraceptive users and non users. Both the fasting and 2 hour blood glucose levels were significantly elevated in users than the control. Prolonged usage of oral contraceptives impaired the glucose tolerance.

ANTIBACTERIAL ACTIVITY OF SELECTED PLANT EXTRACTS
USED BY AYURVEDIC PHYSICIANS IN JAFFNA

Jacintha Kanthasamy (Miss)

Sherine Subodhini Sabanathan (Miss)

Eleven plant materials claimed to have antibacterial activity by Ayurvedic physicians were tested, in two concentrations, for their activity against four selected organisms namely *Staphylococcus aureus*, *Escherichia coli*, *Pseudomonas pyocyanea* and *Klebsiella aerogenes*. The activity was compared with standard antibiotics used in the hospital.

Among the plants tested for antibacterial activity, Lythraceae alba (maruthondri) and Datura albae (umaththai) showed some activity in normal and double the concentration. Moringa pterygosperma (murungai) and Ocimum album (kanjangkoorai) showed activity in normal concentration only and Sterculia foetida (poonari) in double the concentration only.

Against *Staph.aureus*, Lythraceae alba, Datura alba, Moringa pterygosperma and Sterculia foetida showed activity. The activity exhibited by Datura alba and Lythraceae alba was comparable to Nalidixic acid and penicillin ($P < 0.05$) and less than that of cefuroxime ($P < 0.05$). Against *E.coli*, Lythraceae alba, Sterculia foetida and Ocimum album exhibited some activity. However their activity were less significant than that of standard antibiotics ($P < 0.05$).

Against *Pseudomonas* and *Klebsiella*, only Lythraceae alba was found to be active. Its activity in comparison to gentamycin (against *Pseudomonas*) and cefuroxime, gentamycin and nalidixic acid (against *Klebsiella*) was however less significant ($P < 0.05$).

The plant materials that showed anti-bacterial activity belong to different families and habitats. Since all these plants were used by Ayurvedic practitioners and as home remedies for infection of urinary tract, respiratory tract and wounds, they cannot be considered merely as disinfectants. This being a preliminary study, further studies could be carried out with the specific extracts of these plants, as there are possibilities of specific chemotherapeutic components occurring in these extracts. Determination of minimum inhibitory concentration (M.I.C.) and conducting clinical trials will help in using these plants in human disease.

CHARACTERISTICS OF PATIENTS WHO HAD ACUTE MYOCARDIAL INFARCTION
FROM THE JAFFNA MUNICIPAL AREA FOR THE YEAR 1989

Nageswaran A., Sivapragasam(Miss) S.
Shanmugarajah(Miss.)H., Vasanthakumar S.

University Medical Unit, Jaffna

88 patients developed acute myocardial infarction (AMI) during the year 1989 in the Jaffna Municipal Area, giving an AMI attack rate of 0.74 per 1000 population. Among them 36 patients (40.9%) had fatal attack. The male:female ratio among those who had such fatal was 1.8:1, where as among the non-fatal AMI, this ratio was much wider, 4.8:1. 52.8% of the fatal AMI had a past history of angina or infarct. 60.9% of deaths among males and 50% of deaths among females occurred between the ages 51-70 years.

82.7% (43) of non-fatal infarcts occurred in males and 69.8% of them were in the 50-69 age group. Only 9 females had non-fatal infarcts during this year and 6 of them were in 60-79 age group. 78.8% of the people who had non-fatal infarct had an educational level of upto grade 10 only and 59.2% were found to fall in social class III and below. 52.9% of non-fatal AMI had been smokers at some stage in their life, and 53.6% of them smoked cigarettes, 14.3% beedi and 32.1% cigars. 85.7% of such smokers had been smoking for over 15 years. Among those who were abstaining from smoking at the time of developing AMI, only 18.8% had abstained for over 10 years, 81.3% had done so for less than 5 years. 88.5% of non-fatal AMI patients were non-vegetarians, 70.6% and 19.6% had been using coconut oil and gingerly oil respectively for cooking. Cow's milk was the commonest type of milk consumed 51.1%, followed by milk powder (21.3%). Non fat milk was used only by 19.2% of patients. 70.2% of such patients had been consuming only 1 to 2 cups of milk daily and only 14.9% over 3 cups per day. 90.4% had never eaten cheese, 75% never used butter and an equal number had never used margarine too. 32.7% had never eaten eggs and only 36.5% had been eating more than 4 eggs per week. Beef, mutton and chicken are the commonest meat eaten and 56.3% eat meat only once a week, 93.8% never more than 3 times per week. 67.4% of patients had been applying gingerly oil to the scalp hair, 36.97% doing so regularly, indicating that this indiginous habit of this population probably has no beneficial effect against CHD. 29.4% of patients had associated diabetes mellitus and 80% of them had been reported to have had satisfactory control before developing AMI. Hypertension was an associated illness in 39.2%. Serum cholesterol could be measured only in 65.4% and it was elevated in 43.6% of non fatal AMI patients.

A RETROSPECTIVE STUDY OF PATIENTS WHO PRESENTED
WITH EPIGASTRIC PAIN TO THE UNIVERSITY UNIT

Karunanathan V., Manoharan V.
Ananthan K., Kumarasamy (Miss).N

University Surgical Unit, Teaching Hospital, Jaffna

42 patients with epigastric symptoms were seen at the Professorial (University) surgical clinic from January 1986 to December 1987. These patients formed 40% of the total number of patients with abdominal pain. 28 patients (67%) had only epigastric symptoms. Of this the balance 14 patients had symptoms not confined to the epigastrium. The main symptoms were burning pain and feeling of epigastric fullness. Palpitation was complained of by 3 patients.

80% of the cases were below 50 yrs of age. 46% of patients were relieved sufficiently - to be able to carry on their usual routine life with antacids taken off & on.

5% were completely relieved within 6 months. Barium investigations were possible only on 10 patients, of which 6 did not reveal any definite lesion. 2 of these had radiological evidence of peptic ulcer. Malignancy of stomach accounted for 6 patients with only palliative surgery was possible.

CONCLUSION:

Epigastric symptoms are common and many patients had no serious effects even after 5 years of onset of symptoms.

This study has prompted us to take on a prospective study with ultrasound and gastroscopic investigations and also better follow up.

ENDOSCOPIC EVALUATION OF UPPER GIT SYMPTOMS -
IN A SURGICAL UNIT TEACHING HOSPITAL, JAFFNA

Pushparajah E.Y., Nanthakumar B., Ganesaratnam M.

Surgical Unit, Teaching Hospital, Jaffna

Fibroptic Gastro-Duodenoscopies were done in 48 patients, during a period of three months (in one Surgical Unit) at Teaching Hospital, Jaffna.

The indications for Gastro-Duodenoscopy were - Epigastric pain, Vomiting, Anorexia and Loss of Weight.

Among them 7 patients had Carcinoma of Stomach (confirmed by Histology) giving an incidence of 14% - other significant finding was a high incidence of Peptic Ulcer in 15 patients. (30%) of whom 11 patients had Duodenal Ulcer and 4 patients had Gastric Ulcer. Other findings were Oesophageal Varices and Hiatus Hernia (one patient each) No abnormalities were found in the remaining 50% of patients.

The above study reveals the significance of Endoscopy as an early investigations in patients with upper Gastro-Intestinal symptoms.

MANAGEMENT OF RESPIRATORY PARALYSIS DUE TO
ORGANOPHOSPHATE IN A PERIPHERAL HOSPITAL

Sivakumar K., Arulanantham M.A., Gnanaseelan G.

District Hospital, Killinochi

Poisoning due to organophosphate is common. It is commoner in areas where ventilatory facilities are not readily available.

We present our experience with 110 patients.

We wish to emphasise that if the patient is to survive ventilatory assistance should be given in the primary health facility itself.

RETROSPECTIVE PRELIMINARY ANALYSIS OF ANAL CONDITIONS

Karunanathan V., Manoharan V
Ananthan K., Kumarasamy (Miss).N

University Surgical Unit, Teaching Hospital, Jaffna

A retrospective analysis of 316 patients admitted with anal conditions to University Surgical Unit in 1985 and 1986 was done.

Of 3891 total admissions to this unit during the period anal conditions constituted 8.12%. The analysis concerned relationship to age, types, associated complications, method of treatment affecting the duration of hospital stay and recurrence.

Of the 316 anal affections 75.3%(238) accounted for haemorrhoids. In this study 55.9% occurred in 21-40 years age group. 16% of patients presented with haemorrhoids had haemorrhoidectomy or manual dilatation of anus in the past 5-10 years time.

Of the other anal conditions fissures accounted for 12%; perianal abscesses 4.8%; fistulae 4.4% prolapse of rectum 2.5% and Perianal sinuses 1%. Manual dilatation of anus was done in 225 cases (94.6%) of the 238 patients with haemorrhoids.

13 cases of haemorrhoids underwent haemorrhoidectomy. Operative treatment was done for Perianal abscesses, sinuses and fistulae. Manual dilatation of anus remained as main method of treatment which required minimum theatre time and hospital stay rather than operative procedures. 38% of cases after treatment were able to be followed up at the clinic upto one month. Only 2% presented to the clinics with symptoms. 60% did not return to the clinic.

On the basis of our findings we are starting a prospective study to identify the indications for manual dilatation of anus and the method of selection of cases.

*Our sincere thanks to the following
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