



Sri Lankan Medical and Dental Association in the UK

SLMDA

Spring Scientific Meeting And Charity Dinner Dance

Sunday 4th May 2025

**Courtyard by Marriott
London Heathrow**

LONDON 2025

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VOTE OF THANKS

The President and committee wish to thank

The Scientific Committee members
 Panel of judges for oral and poster presentations
 Scientific Session chairpersons
 Abstract evaluation committee
 Everyone who sold tickets for the Charity Dinner Dance
 Management of Courtyard by Marriott, London Heathrow
 All sponsors
 Exceed for their fantastic music
 Donors of our raffle prizes
 Our advertisers for contributing to the Souvenir
 All past Presidents and their spouses and friends
 All spouses of current committee members
 Each and everyone of you present tonight
 The editor of the souvenir, Dr Mahendra Gonsakorale
 All others who contributed to this event

SLMDA COMMITTEE



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Prof DYD Samarawickrama
Dr Ruwan De Soysa
Dr Melanie Weerasuriya

Welcome Message

From the President, Prof Suranjith L Seneviratne

It is my great pleasure to welcome you all to the SLMDA 2025 Spring Scientific Meeting and Charity Dinner Dance, held at the Courtyard by Marriott, London Heathrow, London, on Sunday 04th May 2025.



The SLMDA is the oldest and largest professional organisation in UK, and is dedicated to help and nurture medical education in Sri Lanka. The SLMDA directs the charitable funds it collects in assisting Sri Lanka to continue producing well trained and highly skilled and knowledgeable doctors and dentists for the present and future medical needs of the country. The SLMDA funds the provision of important and essential medical and dental text books for medical and dental students in Sri Lanka. We also provide student bursaries to each medical and dental faculty in Sri Lanka, so as to assist students in financial need in these faculties and also award research grants annually, for medical and dental students or junior doctors or dentists in Sri Lanka to do research on diseases that are important and common to Sri Lanka.

The theme for the 2025 SLMDA Spring Scientific Meeting is '**Health aspects related to our homeland – Sri Lanka**'. We are very proud to have a panel of very distinguished speakers who would share their expertise on this theme. Please join me in thanking them for taking the time to give these talks. I have to specially thank Dr Duminda Munidasa, Dr Uluwattage Wimalasiri and Prof. Ishan De Zoysa, who travelled specially to the UK from Sri Lanka, to deliver their talks and to add their expertise to our spring scientific meeting. Prof. Ishan De Zoysa would deliver the prestigious SLMDA Oration. I also thank Prof Mahesh Nirmalan for his help in organising the talk on a very topical area of Artificial Intelligence in Medicine.

I extend my thanks to all of you for your presence and contributions, to both the Spring Scientific meeting and the Charity Dinner Dance. Hope every one of you enjoy both the scientific and social aspects of this event.

Prof. Suranjith L Seneviratne

Professor and Consultant in Clinical Immunology, Allergy and Immunogenetics

Souvenir Editor's message

Dear Patrons, Colleagues and Friends of the SLMDA,

Welcome to the 2025 Annual Spring Scientific Sessions and Charity Dinner Dance of the SLMDA. I hope you enjoy the occasion and make every effort to attend the Autumn Dinner dance in October.



A key aim of these scientific sessions is to provide young doctors and dentists in the early stages of their careers, as well as medical and dental students, an opportunity to present their research as a poster or an oral presentation. Please take time to view the posters. You will find them insightful, useful, and interesting. Please discuss them with the presenters as it will encourage them and provide them with valuable experience in facing the scrutiny of the scientific community. Please also note that this souvenir was prepared before the meeting, and some abstracts may have been updated.

The Organisers have endeavoured to produce a meeting of high scientific value, and we hope you will find the sessions both enjoyable and educationally stimulating.

It has been my pleasure to produce the souvenirs for the SLMDA events for the past ten years. At all times, the Presidents and Committee members extended their fullest cooperation and I wish to thank them. I found it a most enjoyable, rewarding and meaningful activity. This will be my last effort as I believe the time has come to pass on to the younger generation. I wish my successor all the best.

Mahendra Gonsalkorale

About the SLMDA.

It is a non-political, non-racial organisation respecting equality and diversity without any religious affiliations. It was founded in 1982. The present membership of Sri Lankan doctors and dentists exceeds 400. The main aim of the SLMDA is to assist undergraduate medical & dental education in Sri Lanka. The constitution has since been extended to support humanitarian causes of exceptional significance to Sri Lanka. (e.g. 2004 Tsunami). It is managed by an elected Council consisting of members headed by the President, and an Advisory committee.

Support to Sri Lanka is provided in the following ways:

Promoting Medical & Dental Education

Annual book donation to libraries of all the Medical Schools in Sri Lanka.

Award of bursaries (2/faculty/yr) to needy medical and dental students.

Special Projects, e.g. English Skills lab.

Lectures & workshops by expatriate doctors & dentists.

Supporting Humanitarian Causes: examples

Support to medical and dental students affected by the Tsunami

During the recent economic crisis in SL, we collaborated with our colleagues in the medical profession in Sri Lanka and designed an effective pathway to fundraise to provide emergency medical supplies to Sri Lanka

SLMDA 2025 Scientific Sessions - Programme

'Health aspects related to our homeland – Sri Lanka' Sunday 4th May 2025

08.15 - 08.55 Registration and Sri Lankan Breakfast/Coffee

08.55 - 09.00 SLMDA President's Welcome – Prof. Suranjith L Seneviratne

Session 1: Chairs - Dr Melanie Weerasooriya and Dr Shayamalie Bopitiya

09.00 - 09.30 Detection and Management of
Early arthritis

Dr Duminda Munidasa
Consultant Rheumatologist
Past-President Ceylon College of Physicians

Trainee presentations

09.30 - 09.40 Abstract Oral -1

Dilhan Jayaweera

09.40 - 09.50 Abstract Oral -2

Oshith Wendakoon

Session 2: Chairs - Dr Alistair Solomonsz and Dr Shirmila Withana

9.50 - 10.20 Leptospirosis Pulmonary Haemorrhage
- a looming threat in the tropics

Dr Wimalasiri Hewa Uluwattage
Consultant Physician ,Past President, Galle
Medical Association

Trainee presentations

10.20 - 10.30 Abstract Oral -3

Dinul Doluweera

10.30 - 10.40 Abstract Oral -4

Yohan Gunawardena

10.40 - 10.50 Abstract Oral -5

Venuja Jayawardena

10.50 - 11.15 *Tea Break and Poster viewing*

Session 3: Chairs - Dr Roshan Perera and Prof Mahesh Nirmalan

11.15 - 11.45 The use of AI in quality Improvement
through automation of medical records

Mr Rakesh Kaipenchery
Mr Mike Reeve
CEO and Advisory Board Member HealthOrbit AI

11.45 – 12.15 Personalised Medicine: the future

Prof. Suranjith L Seneviratne
President, SLMDA

SLMDA Oration 2025

12.15 – 12.45 Colorectal Cancer in Sri Lanka:
our experience

Prof Ishan De Zoysa
Professor in Surgery
President CoMSAA

12.45 – 1.15

Awards and closing ceremony

1.15 - 14.00

Lunch

14.00 – 15.00

Annual General Meeting (Members only)

Topics and Biographies of Guest speakers

Detection and Management of Early arthritis

Dr. Duminda Munidasa, MBBS (COLOMBO), MD(MEDICINE), FCCP, FRCP



Specialist in Rheumatology and Rehabilitation
Board certification 2001 by the Postgraduate Institute of Medicine, University of Colombo. Consultant in Rheumatology and Rehabilitation, Rheumatology and Rehabilitation Hospital Ragama Sri Lanka. Undergraduate and Postgraduate trainer in Rheumatology, Rehabilitation Medicine
Past President Ceylon College of Physicians 2023. Past President College of Specialists in Rheumatology and Rehabilitation Sri Lanka 2020
Past Chairperson Specialty board for Rheumatology PGIM University of Colombo
Member of Board of Stud Medicine PGIM University of Colombo
Few publications in Rheumatology and Rehabilitation Medicine.

Leptospirosis Pulmonary Haemorrhage - a looming threat in the tropics

Dr Wimalasiri Hewa Uluwattage, MBBS MD FRCP(Edin) FCCP



Consultant Physician National Hospital, Galle, Sri Lanka
Memberships of professional bodies
Currently the president of Galle Medical Association
Member of Board of Studies in Medicine- Postgraduate Institute of Medicine- University of Colombo
Fellow- Ceylon College of Physicians 2015
Council Member- Ceylon College of Physicians 2019, 2020 and 2021
Council Member- Sri Lanka College of Internal Medicine 2019, 2020, 2021 and 2023
Secretary-Emergency medicine specialty board- PGIM 2017
Currently the Convener of Infectious Disease forum- Ceylon College of Physicians and working to make it a common platform to all the stakeholders who are interested in infectious disease in Sri Lanka.
In June 2023 organized the country's first International Infectious Dis-

ease Conference in collaboration with International Society for Infectious Diseases (ISID) and the Drugs for Neglected Diseases Initiative (DNDi)

Academic and research contributions

While being an active member of Ceylon college of Physicians and Sri Lanka College of Internal medicine, has contributed number of academic activities and conducted lectures and workshops at the PGIM and as a part of regional and national level of college activities.

Main research interest is in Leptospirosis and published his work in national international level. Has delivered lectures on Leptospirosis on invitation at many national and international academic forums including European Congress on Infectious Diseases (ECIM)

Pioneered the use of Plasmapheresis as a therapeutic modality in the treatment of Leptospirosis Pulmonary Hemorrhage. That led to save lot of lives from the dreaded complication of leptospirosis in Sri Lanka.

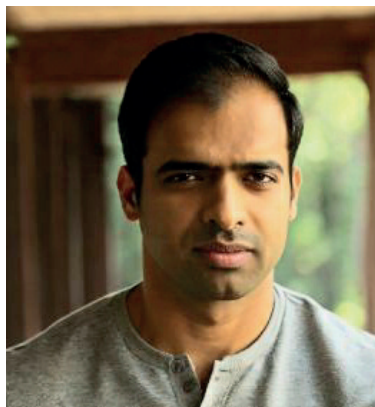
A member of National Steering Committee for Leptospirosis in the Ministry of Health.

Lead the National Committee for Development of Clinical management Guidelines of Leptospirosis 2025

Topics and Biographies of Guest speakers

The use of AI in quality Improvement through automation of medical records

Rakesh Kaipenchery, CEO & Co-Founder, HealthOrbit AI



Drawing from his experience in building user-friendly enterprise systems, Rakesh Kaipenchery saw an opportunity to make healthcare technology work better for doctors. As co-founder of HealthOrbit AI, he brings a refreshing approach to medical technology - making it simpler, more intuitive, and focused on giving doctors more time with patients.

Mr Mike Reeve

Advisory Board Member at HealthOrbit AI
Deputy Chief Executive of Navigo CIC
and Medical Executive
Former Senior Responsible Clinician for
International Relationships Humber North
Yorkshire ICB

Mike Reeve is Deputy Chief Executive at Navigo CIC with decades of experience in frontline psychiatry and NHS service development. Renowned for leading ethical reforms in mental health care, he has also advised on suicide prevention, neurodevelopmental services, and international collaboration, bringing thoughtful leadership to complex clinical and operational challenges.



Personalised Medicine: the future

Professor Suranjith Seneviratne, DPhil(Oxon), MBBS, MD, DPath, MRCPPath, MRCP, FRCP, FRCPath, FSLCGP, FCCP



President, Sri Lankan Medical and Dental Association in the UK
Professor and Consultant in Clinical Immunology, Allergy and Immunogenetics
Royal Free Hospital, University College London and Health Services Laboratories, London, UK
Nawaloka Hospital Research and Education Foundation, Sri Lanka

Professor Suranjith Seneviratne completed his basic Medical Degree at the Faculty of Medicine, University of Colombo with First Class Honours, eight distinctions and ten Gold medals and was placed first in his year. He completed his MD in Internal Medicine and trained in Clinical Immunology and Allergy at the John Radcliffe Hospital in Oxford. He completed a Doctor of Philosophy in Molecular Medicine at the University of Oxford as a Commonwealth Scholar. He is one of the best Clinical Medicine Researchers in Sri Lanka, has authored 304 journal publications and has an h-index of 53. He has published in Journals such as: Nature, Science, Nature Medicine, Blood, American Journal of Medical Genetics, American Journal of Human Genetics and Journal of Experimental Medicine. Professor Seneviratne is an International expert in Immunodeficiency, Autoimmune, Allergic/Mast Cell disorders and Immunogenetics. He is the Director of the Centre for Mast Cell Disorders and the President of the UK-Sri Lanka Immunology Foundation, an organisation that contributes to Immunology and Allergy education in Sri Lanka. He is a Fellow of the Royal College of Physicians, Royal College of Pathologists, Royal Society of Medicine, Sri Lanka College of General Practitioners and Ceylon College of Physicians. He is the President of the Sri Lanka Medical and Dental Association (SLMDA) and a Advisory Board member of the International Weera Foundation.

SLMDA ORATION 2025

Colorectal Cancer in Sri Lanka: our experience

Prof Ishan De Zoysa

Prof. Ishan De Zoysa is a Professor in Surgery, Faculty of Medicine, University of Colombo and an Honorary Consultant Surgeon of the National Hospital of Sri Lanka.



He graduated from the Faculty of Medicine, University of Colombo, Sri Lanka in 1992 with Second Class Honours in all undergraduate examinations. He completed the Master of Surgery from the University of Colombo, Sri Lanka 1999. He obtained the both the Fellowships of the Royal College of Surgeons of England and the Royal College of Surgeons of Edinburgh in 2000. He was board certified as a Gastro-intestinal Surgeon in 2002.

He joined the Department of Surgery, Faculty of Medicine University of Colombo in 2002 as a Senior Lecturer. In 2009 he was promoted to Professor in Surgery on merit. He was awarded Fellowship of the College of Surgeons of Sri Lanka in 2013 and Honorary Fellowship of the International Society of Coloproctology in 2014. He obtained Doctor of Medicine (DM) by thesis from the University of Colombo in 2017. He is the President of the Colombo Medical School Alumni Association.

He is a Past President of the Sri Lanka Society of Gastroenterology and the Faculty of Medicine Teachers Association of the Faculty of Medicine, Colombo. He is the President of the Colombo Medical School Alumni Association. He is past Secretary of the Sri Lanka Medical Association and the College of Surgeons of Sri Lanka. He is also a member of the Ethical Review Committee at NHSL.

He has over 45 publications in peer reviewed journals and over 100 published abstracts and he has authored 2 chapters in the Textbook of Gastro-intestinal Surgery. He has won 9 best paper awards for research presentations and a National Research Council award for publications in 2016.

He has been an invited speaker at many local and international meetings.

His surgical and research interests include Diagnostic & Therapeutic Endoscopy Advanced Laparoscopic Surgery, Colo-rectal surgery, Upper Gastrointestinal Bariatric and Metabolic Surgery.

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Junior Forum – Oral presentation abstracts

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O1: Temporal Artery Biopsy Audit: Assessing Diagnostic Yield and Procedural Efficiency in GCA Evaluation

Presenter: *Dilhan Jayaweera, Trust Grade FY2, Kent and Canterbury Hospital, EKUFT*

Co-authors: Prabodha Arachchige, Vickna Balarajah, Hasantha Thambawita, Thomas Rix

Introduction and Objectives:

Giant Cell Arteritis (GCA) is a vasculitis requiring early diagnosis to prevent complications such as vision loss. Temporal artery biopsy (TAB) remains the diagnostic gold standard, but its invasive nature, low positivity rate and variability in sample quality necessitate reassessment. This audit evaluates TAB's diagnostic efficiency, focusing on biopsy length, referral-to-operation time, and diagnostic yield for GCA.

Methods:

A retrospective study analysed 93 cases; after excluding known GCA cases, missing biopsy results, and absent biopsies, the final sample size was reduced to 86 cases. The audit assessed biopsy length compliance (>10 mm), referral-to-operation time, and GCA positivity rates. The mean biopsy length and confidence intervals were calculated to evaluate sampling adequacy.

Results:

The audit found a low positivity rate (15.11%, 95% CI: 9.05% – 24.16%) for GCA. While 31.39% (95% CI: 22.56% – 41.82%) of biopsies were below the recommended 10 mm threshold, referral-to-operation time remained efficient. The mean biopsy length was 13.41 mm (95% CI: 11.81 – 15.02 mm, SD: 7.44 mm), with significant variability in sample sizes. Most biopsies were performed within one week of steroid initiation, yet the GCA yield remained low, highlighting the need for better patient selection.

Conclusions:

Audit findings led to a shift toward pre-biopsy ultrasound screening, improving diagnostic accuracy, reducing workload, minimizing procedures, and enhancing cost-effectiveness. Further research will evaluate duplex ultrasound's effectiveness, compare it with TAB, and assess its long-term impact on diagnostics, patient outcomes, and resource allocation.

O2: A systematic review on intravascular ultrasound-guided percutaneous coronary intervention versus angiography-guided percutaneous coronary intervention with regards to clinical endpoints

Presenter: *Oshith Wendakoon, 3rd year Medical Student, University of Southampton, England*

Co-author: Michael Mahmoudi

Background:

Despite much evidence to dignify the use of IVUS-PCI, angiographic guidance remains the gold-standard. Although IVUS has outwitted angiography with cross-sectional imaging, offering greater detail of vessel and plaque make-up, reports evaluating clinical outcomes were not driven to compare the impact of both technologies on key clinical endpoints. CAD is on a global rise. In a developing country like Sri Lanka, resource constraints may be alleviated by the cost-effectiveness of IVUS.

Aims:

This systematic review compares IVUS-PCI and angiography-PCI, focusing on key endpoints: MI, repeat coronary revascularisation, admission to hospital with ACS, mortality and stent thrombosis.

Methods:

Searches were conducted across MEDLINE, Embase, PubMed and Cochrane Library. RCTs were identified and screened for eligibility based on the PICOS criteria. Eligible articles underwent full-text screening, with inclusion/exclusion criteria applied. Study quality was assessed using RoB.2, with an independent researcher further contributing to the evaluation.

Results:

5,177 records were initially retrieved. Deduplication and manual exclusion resulted in 68 articles eligible for full text screening. Trials were allocated a JADAD score and 14 relevant studies were selected for this review. MSA and TVF were examples assessed as primary endpoints, although MACE was more frequently discussed, where key clinical outcomes were identified.

Conclusions:

IVUS-PCI is linked with better long-term patient outcomes across key endpoints compared to angiography-PCI. Future trials should be multicentered, have a larger sample size and involve electronic randomisation to reduce bias. Trials must have consistent long-term follow-up times in order to validate differences in key endpoints between IVUS and angiography.

O3: A longitudinal ultrasonographic study of plasma leakage and abdominal organomegaly in dengue

Presenter: *Dinul Doluweera, Intern Medical Officer, Department of Surgery, Faculty of Medicine, University of Colombo, Sri Lanka*

Co-authors: Visula Abeysuria, Minul Doluweera, Apsara Epa, Sriskantha Kowshika, Chandana Peiris, KPDA Chamantha, S Shageevan, TMDW Thennakoon, Upul Dissanayake, Ishan De Zoysa, Suranjith L. Seneviratne.

Introduction and objective:

Severe dengue is characterised by plasma leakage, where early identification of at-risk patients is crucial. Ultrasonography (USS) is a promising tool for detecting plasma leakage, but its temporal progression remains unclear. This study evaluated the temporal kinetics of plasma leakage and abdominal organ enlargement using serial USS to improve early detection of severe dengue.

Methods:

A prospective observational cohort study was conducted in two tertiary hospitals in Sri Lanka from April to September 2024. Adult patients with confirmed or suspected dengue were included. Serial USS was performed daily to assess plasma leakage markers—gallbladder wall thickening, pericholecystic fluid, ascites, and pleural effusions—as well as hepatic and splenic diameters. Patients were classified based on WHO 2009 dengue criteria.

Results:

Among 140 patients (median age 29 years, 55% male), dengue without and with warning signs were observed in 52.1% and 38.6%, respectively, while 9.3% had severe dengue. Radiological evidence of plasma leakage was seen in 25%, with onset ranging from day 3-7 and peak on day 5 (45.7%). Gallbladder oedema (22.1%) was the earliest marker, preceding ascites and pleural effusions. Plasma leakage persisted for 2 days. Patients with severe dengue exhibited significantly earlier onset and longer duration of leakage compared to non-severe cases ($p < 0.001$).

Conclusion:

Serial USS from day 3 improves early detection of severe dengue. In severe dengue, plasma leakage develops earlier and lasts longer than non-severe dengue. Gallbladder edema and pericholecystic fluid are key markers, while hepatomegaly and splenomegaly lack predictive value.

O4: Biochemical variability of blood serum in patients with gallstone disease evaluated via Raman spectroscopy

Presenter: *Yohan Gunawardena, MPhil student, Center for Instrument Development, Department of Physics, Faculty of Science, University of Colombo*

Co-authors: Sumudu Kalum Kumarag, Lal Chandrasena, Prasana B Galhena, Hiran Jayaweera, Siyath Gunewarden, Visula Abeysuriya, Vasitha Abeysuriya

Introduction and Objectives:

Raman spectroscopy is a non-invasive vibrational spectroscopic technique. Its selectivity and sensitivity make it ideal for the biochemical analysis of biofluids. Standard chemometric techniques, or more recently, machine learning approaches, can be applied to differentiate Raman spectral variations.

Methods:

We measured the Raman spectra of blood serum collected from patients with gallstone disease. Data from five patients were analysed, with triplicate Raman spectral measurements.

Results:

The three main Raman spectral peaks were observed at wave numbers 1164 cm^{-1} , 1199 cm^{-1} , and 1528 cm^{-1} . These Raman peaks are associated with the Raman-active molecule Bilirubin. Notably, the Raman peaks were significantly elevated in the patient with higher Bilirubin levels. The Raman spectra of blood serum collected on the same day from three patients were subjected to principal component analysis. Using the Gaussian clustering method, we successfully distinguished the samples.

Conclusions:

These preliminary results warrant further investigation to determine if elevated levels of Bilirubin can serve as a Raman-active biomarker for the early detection of gallstone disease.

O5: Determination of the antibacterial, antioxidant and photocatalytic activity of silver nanoparticles green synthesized using extracts of six species of the *Diospyros* genus

Presenter: *Venuja Jayawardena*, 2nd Year MBBS Student, Queen Mary University of London
Co-author: Mathivathani Kandiah

Introduction:

Green synthesis of silver nanoparticles (AgNPs) using plant extracts is an eco-friendly alternative to conventional methods. *Diospyros* leaf extracts, native to Sri Lanka and rich in phytochemicals, act as natural reducing and stabilizing agents, enhancing AgNP properties. This study evaluates the synthesis, characterization, and biological activities of AgNPs derived from five *Diospyros* species, emphasizing their potential applications in biomedicine and environmental science.

Methods:

AgNPs were synthesized by mixing *Diospyros* leaf extracts with 1 mM AgNO₃ and heating at 90°C for 1 hour. Characterization was conducted using UV-Vis spectroscopy (SPR at 420 nm) and TEM (confirming ~30 nm spherical particles). Antioxidant activity was analysed via total antioxidant capacity (TAC), total flavonoid content (TFC), total phenolic content (TPC), and DPPH radical scavenging. Photocatalytic activity was assessed through the degradation of Eriochrome Black T, and antibacterial efficacy was tested against *Staphylococcus aureus* and *Escherichia coli* using agar diffusion assays.

Results:

AgNPs demonstrated significantly higher antioxidant activity than water extracts, with *Diospyros oocarpa*-derived AgNPs showing the strongest effect. Photocatalytic degradation of Eriochrome Black T was most efficient at 333 ppm AgNPs with NaBH₄, indicating their potential for environmental remediation. Antibacterial assays revealed greater inhibition zones for *S. aureus* than *E. coli*, likely due to structural differences in their cell walls, suggesting their effectiveness as antimicrobial agents.

Conclusions:

Diospyros-derived AgNPs exhibit strong antioxidant, photocatalytic, and antibacterial properties, supporting their use in biomedical, environmental, and antimicrobial applications. Further research should explore large-scale production, long-term stability, and practical industrial implementation.

Some notable landmarks of the SLMDA UK Dr Mahendra Gonsalkorale (Editor)

SLMDA is the oldest Sri Lankan professional association in the UK. The inaugural meeting was held at the Ceylon Tea Centre in London on Saturday the 27th March 1982 with Dr Seetha Siriwardena in the chair

The original aims of the Sri Lanka Doctors Association as it was called then, were to help Sri Lankan medical schools and to create a forum for the SL doctors to exchange academic ideas and social pleasantries.

The first Christmas Dance held on the 31st December 1982 was attended by a massive gathering of 454

The first Annual General Meeting and Scientific Meeting held outside London was in Bisley, Surrey in 2003.

The first academic meeting was held on the 19th of March 1988 under the aegis of Dr Punchihewa and Dr Izmeth.

The first Dinner Dance of the SLMDA was held on the 26th of June 1982 at the Cunard International Hotel in London. Ticket price was £12.50.

The SLMDA was recognised as a registered charity (No:800821) by the UK Charity Commissioner in 1990. Also in the same year, SLMDA held its first Dinner Dance outside London, in Warrington, Cheshire

2015 SLMDA launches pump priming grants

SLMDA fact finding tour of Sri Lankan medical faculties 2015

2010 Initiation of the Youth Forum :Oral and Poster presentations and Founder's prizes and abstract booklet .

The first Law Medical Cricket match was held in 2004

2022 SLMDA begins annual charity hikes

Please visit the SLMDA website for all information on the SLMDA.
<http://www.srilankan-mda.org.uk/>



Drawing by Lakshmi Perera

Junior Forum – Poster presentation abstracts

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P1: A systematic review of the efficacy and effectiveness of Lyfgenia and Casgevy gene therapies for Sickle Cell Disease

Author: *Venuja Jayawardena, 2nd Year MBBS Student, Queen Mary University of London*

Introduction:

Sickle cell disease (SCD) is a severe genetic disorder characterized by haemolytic anaemia and vaso-occlusive crises (VOCs), with cases primarily in Africa but also reported in South Asia, including Sri Lanka. In December 2023, the FDA approved Lyfgenia (lovotibeglogene autotemcel) and Casgevy (exagamglogene autotemcel), the first gene therapies for SCD. Lyfgenia uses a lentiviral vector to introduce a modified β -globin gene, while Casgevy employs CRISPR-Cas9 gene editing to upregulate foetal haemoglobin (HbF). This review evaluates their comparative efficacy, safety, and potential clinical impact.

Methods:

A systematic review of clinical trials, FDA filings, and peer-reviewed studies was conducted, focusing on VOC-free survival, haemoglobin correction, safety outcomes, and long-term durability. Data were extracted from Phase 3 trials and real-world evidence, emphasizing patient outcomes and potential risks.

Results:

Casgevy demonstrated a 93.5% VOC-free survival rate (29/31 patients) in clinical trials, with patients showing increases in HbF. No cases of graft failure or malignancy were reported over follow-up periods. Lyfgenia demonstrated an 88% VOC-free survival rate, with 28 patients experiencing no VOCs between 6- and 18-months post-treatment. Additionally, 31 of 36 patients (86%) achieved a sustained increase in HbF production. However, one case of leukaemia led to an FDA boxed warning for malignancy risk. In terms of cost, Casgevy is priced at \$2.2 million, while Lyfgenia is priced at \$3.1 million.

Conclusion:

Both therapies show high efficacy, but Casgevy demonstrates a superior safety profile, durability potential, and cost-effectiveness. Long-term follow-up is needed to confirm sustained benefits, safety, and real-world patient outcomes.

P2:Trends in adenoma detection rate in lower gastrointestinal endoscopy in symptomatic patients undergoing lower alimentary endoscopy

Presenter: *Dinul Doluweera*, Intern House Officer, *Department of Surgery, Faculty of Medicine, University of Colombo, Sri Lanka*

Co-authors: Suranjith L Seneviratne, Ishan De Zoysa

Introduction:

Colorectal cancer (CRC) remains a significant health concern. Adenoma Detection Rate (ADR) is a crucial metric in evaluating colonoscopy effectiveness. This study reports the ADR and detection of colorectal CA while exploring the associated factors.

Methods:

Data from 334 consecutive patients undergoing lower gastrointestinal endoscopies by a single endoscopist at a single centre during a three-year period was analysed. Demographic information and polyp characteristics such as location, morphology and histopathological diagnosis were collected. The chi-square and Fischer's test were used to compare the ADR between the different age groups and genders, taking a p-value of 0.05 as significant.

Results:

Majority of patients were males(56%) and above 60 years(54.8%), with a median age of 58 years(IQR 42-69). Colonoscopy with a 100% caecal intubation rate accounted for 70.4% of tests. Suspicious polyps/masses were detected in 18%(n=60) of all tests. Adenomas, malignancies and hyperplastic polyps were detected in 50, 7 and 3 patients, respectively. The ADR was 15%. Most adenomas were sessile(77%,n=64) and located in the descending or sigmoid colon(39.6%), followed by 33.3% in the transverse colon. There was a statistically significant rising trend of ADR with age, with those above 60 years having the highest ADR(21.2%).

Conclusion:

Despite the lower incidence of CRC (15/100,000) in Sri Lanka, the ADR was comparable with the global average of 15% and varied with age and polyp location. Larger multi-centre studies are needed to ascertain the ADR and other risk factors for colonic adenomas in Sri Lanka.

P3: Art of managing anaemia; its not just about transfusion

Presenter: *Dinath Perera, Senior House Officer in Acute Medicine , James Cook University Hospital,Middlesbrough.*

Introduction/ Background:

Anaemia of any cause affects around 30% of the global population. Whilst in the correct situation blood transfusion can be lifesaving, inappropriate transfusion without just investigation into the cause, can put our patient population at risk of complications from transfusion. Complications include circulatory overload and transfusion related acute lung injury. Alternatives to blood transfusion are often underused.

Objectives:

Highlight the importance of checking haematinics before blood transfusion.

Materials & Methods:

The importance of appropriate investigations into the cause of anaemia was highlighted in an interesting case. A 23 year old female with a background of epilepsy and cerebral palsy presented with a 2 week history of shortness of breath, chest pain,palpitations and lethargy. She had been taking phenytoin for five years.

Results:

Initial investigations revealed a pancytopenia with a haemoglobin of 40 g/dl. She was transfused 1 unit of blood. However, crucially prior to transfusion the haematinics and iron studies were checked. This revealed a B12 and folate deficiency .The patient was subsequently started on B12 replacement followed by folic acid replacement.

Conclusions:

In this case a combination of long term phenytoin and poor diet both lead to B12 and folate deficiency. Had the patient been transfused prior to checking their haematinics this would have resulted in a delay in diagnosis and possible need for further inappropriate transfusions if the cause was not found.

This case also highlighted the importance of counselling those patients on phenytoin on the importance of a balanced diet containing B12 and folate.

P4: Evaluation of the quality and readability of web-based patient information on colorectal cancer surgery

Presenter: *Dinul Doluweera, Intern House Officer, Department of Surgery, Faculty of Medicine, University of Colombo, Sri Lanka*

Co-authors: Suranjith Seneviratne, Ishan De Zoysa

Background:

Effective patient education is crucial for empowering patients with colorectal cancer to make informed decisions. This study evaluated the quality and readability of web-based patient information on colorectal cancer surgery.

Patients and methods:

A cross-sectional study on patient-based websites was carried out in February 2024. The leading search engines Google, Yahoo!, and Bing were searched using the keyword "colorectal cancer surgery". The top 100 results from each platform were screened further based on predetermined criteria. The results were evaluated using the validated FRES, GFI, and DISCERN scores for readability and quality of information.

Results:

A total of 39 websites were analysed. The mean FRES and GFI were 51.5 (range: 30.7-70.1) and 9.37 (range: 5.8-13.6), respectively, both exceeding the recommended reading level for health resources. The mean DISCERN score was 50.4/80 (range: 24-73), indicating "fair" reliability and quality. Few websites provided references (35.9%; n=14) or were reviewed by experts (n=15; 28.5%). Websites providing information on the benefits and risks of surgery were scarce (7.7% and 30.8%, respectively). Less than 30% provided sufficient information on post-treatment, quality of life and stoma care. Among the top 10 DISCERN-rated websites, only 3 appeared among the first 10 websites on the SERPs, while only one had the recommended FRES.

Conclusion:

Patient information websites are of satisfactory quality but had low readability and lack key information on risks, benefits, and effects on quality of life. This highlights the need for expert-regulated patient education resources and for patients to be cautious consumers of online health information.

P5: Improving patient journey in Spinal Anaesthesia

Presenting author: *K.V.S.C.Keppetipola, Clinical Observer in Anaesthetics, Princess Alexandra Hospital, Harlow*

Co-author: S.Premathilake

Introduction and Objectives:

WHO checklist, fasting duration, and theatre waiting times are indicators of quality of care in the perioperative phase. The objective of this study was to evaluate current practices and identify areas for improvement in spinal anaesthesia administration at Base Hospital Dickoya, Sri Lanka.

Methods:

Data were collected from the medical records of 37 patients over 17 days, achieved by sampling every third patient receiving spinal anaesthesia in a randomly chosen operating theatre.

Results:

37 cases (27 elective, 10 emergency, 11 obstetric) were analyzed.

Elective surgical WHO compliance: sign-in 82%, time-out 91%, sign-out 64%. Elective gynaecology/obstetrics: 100% compliance. Emergency surgical: sign-in/time-out 60%, sign-out 20%. Emergency gynaecology/obstetrics: sign-in 100%, time-out/sign-out 80%.

Average fasting times: surgical electives 9h37m, gynaecology/obstetrics electives 11h 43m, surgical emergencies 8h32m, gynaecology/obstetrics emergencies 6h 40m. Elective average fasting: 10h 40m. Average waiting times: surgical electives 1h24m, gynaecology/obstetrics electives 1h 51m. Obstetric emergencies: less than 10 minutes. Partner presence was not facilitated in any of the obstetric cases done in the theatre.

Conclusions:

There was a significant discrepancy in the WHO compliance between elective and emergency surgical procedures. Although WHO adherence was on target for Gynaecology and Obstetrics the fasting times were prolonged than 6 hours, and partner presence was not always facilitated.

Recommendations:

Interventions are needed to improve adherence of WHO compliance for surgical elective and emergency procedures. Workflow measures are needed to reduce Fasting times for all elective procedures. Measures are needed to facilitate partner presence in elective Obstetric cases.

SLMDA Research Grant Winners 2025

SLMDA 2025 Research Grant Winners

Ms Shanika Udari Akurugoda Hewa Gamage

PhD student, Department of Biochemistry and Molecular Biology, Faculty of Medicine, University of Colombo

Effect of the consumption of Sri Lankan traditional fermented cooked rice (Diyabath) as an additional meal compared to its non-consumption; on the nutritional, health and immune parameters of women of reproductive age in Sri Lanka

Dr Abiramy Surenthirarajah

Senior Registrar in Internal Medicine, National Hospital of Sri Lanka, Colombo.

AI-Driven Predictive Risk Modeling for Post-MI Inpatient Outcomes: A Real-World Data Study at NHSL

Ms Thanushi Ranjana Dharmakeerthi

Research Assistant, Centre for TB Diagnosis and Education, Faculty of Medicine, University of Colombo

Comparative Evaluation of Clinical Scoring Systems & Cerebrospinal Fluid (CSF) Laboratory Criteria for Diagnosing Tuberculous meningitis

SLMDA 2025– Authors of the Five best Research Abstracts



The poster features the SLMDA-UK logo in the top left corner. A yellow banner at the top right contains the text "SLMDA Spring Scientific Meeting Sunday, 4th May 2025". A central yellow box reads "Authors of the five best research abstracts". Five author portraits are arranged around this central text, each with a caption. A yellow box at the bottom center states "Prepared By SLS, Sri Lankan Medical and Dental Association in the UK".

SLMDA Spring Scientific Meeting
Sunday, 4th May 2025

Authors of the five best research abstracts

Venuja Jayawardena
Queen Mary University,
London, UK

Dinul Doluweera
Dept of Surgery, UoC, SL

Yohan Gunawardena
Faculty of Science, UoC, SL

Oshith Wendakoon
Univ of Southampton,
UK

Dilhan Jayaweera
Kent and Cantebury
Hospital, UK

Prepared By SLS, Sri Lankan Medical and Dental Association in the UK

In Recognition of SLMDA Video service for the Dance.

Video streaming Media Partner ARA-UK



The logo for ARA-UK consists of a stylized 'A' formed by two overlapping triangles (one orange, one black) on a black background. Below the graphic, the letters 'A R A U K' are displayed in a white, sans-serif font.

A R A U K



CCP - SLMDA CLINICAL IMMUNOLOGY UPDATE

Ceylon College of Physicians (CCP)

In association with the

Sri Lankan Medical and Dental Association in the UK (SLMDA)

Date: Wednesday 18th September 2024

12.45pm - 1.00pm	Registration
1.00pm - 1.15pm	Welcome Address Dr Upul Dissanayake - President, Ceylon College of Physicians Prof Suranjith L Seneviratne - President, SLMDA (UK)
1.15pm - 1.45pm	Clinical Approach to Thrombotic Microangiopathy (TMA) Dr Chandrakumara Wijesekera (UK)
1.45pm - 2.15pm	Use of Biologics in Rheumatological Disorders Dr Lalith Wijeyaratne (SL)
2.15pm - 2.45pm	Acute treatment for stroke Dr Lankanath Alwis (UK)
2.45am - 3.00pm	TEA
3.00pm - 3.30pm	Hypermobility disorders and the Physician Prof Suranjith L Seneviratne (UK)
3.30pm - 4.00pm	Immune Neuropathies Dr Janaka Peiris (SL)

Dr Upul Dissanayake
President CCP



Dr Chandrakumara Wijesekera
Consultant Nephrologist



Dr Lalith Wijeyaratne
Consultant Rheumatologist



Dr Lankanath Alwis
Past-President SLMDA



Prof Suranjith L Seneviratne
President SLMDA



Dr Janaka Peiris
Consultant Neurologist



Pre-Congress Workshop for ANNUAL ACADEMIC SESSIONS
57th Anniversary 2024
Diversity, Inclusivity, Equity

Organized by the Ceylon College of Physicians (CCP) in association with the Sri Lankan Medical & Dental Association in the United Kingdom (SLMDA)

UPDATE IN CLINICAL IMMUNOLOGY Programme

- 12:45pm - 1:00pm Registration
- 1:00pm - 1:15pm Welcome Address
Dr Upul Dissanayake - President, CCP
Prof Suranjith Seneviratne - President, SLMDA
- 1:15pm - 1:45pm Clinical Approach to Thrombotic Microangiopathy
Dr Chandrakumara Wijesekera (UK)
- 1:45pm - 2:15pm Use of Biologics in Rheumatological Disorders
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- 3:00pm - 3:30pm Hypermobility disorders and the Physician
Prof Suranjith Seneviratne (UK)
- 3:30pm - 4:00pm Immune Neuropathies
Dr Janaka Peiris (SL)

WEDNESDAY 18 Sep 2024
TIME 12:45 - 4:00 PM
VENUE CS-MA&C Auditorium, NHSL

Hurry!
Limited seats only! (Prior registration required)
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For more information: CCP Office - 011 2582122 | SLMDA (UK) - 0177 2828282 | Dr Upul Dissanayake - 070 8917024

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CSRRSL – SLMDA Scientific Sessions



IMMUNOLOGY FOR RHEUMATOLOGISTS
CSRRSL – SLMDA UK
Scientific Session

09.15AM-09.30AM Welcome & Introduction - President-CSRRSL & President-SLMDA-UK

Prof. Suranjith L. Seneviratne
President of the Sri Lanka Medical & Dental Association in UK, Professor and Consultant in Clinical Immunology, Allergy and Immunogenetics at the Royal Free Hospital, London, UK

09.30AM -10.05 AM Immunogenetics - the A, B and C
10.05AM -10.40 AM B cells and their impact on Rheumatological disorders

10.40AM -11.00 AM Tea Break

11.00AM - 11.35 AM Role of T Cells and How do we control them in joint disorders?

Dr. Dhanushka Dasanayake
Consultant Immunologist, Medical Research Institute

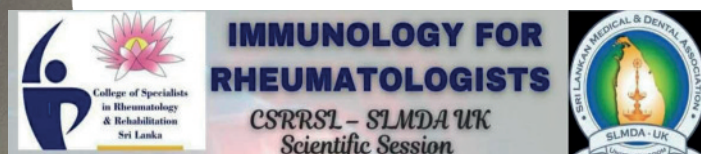
11.35 AM - 12.15 AM Interpretation of immunological reports in Rheumatology

Dr. Hasanthi Perera
Consultant in Rheumatology & Rehabilitation, Rehabilitation Hospital, Galle

12.15 AM - 12.30 PM My experience of liaising with Immunology lab in UK

12.30 PM - 01.00 PM Q & A Session
01.00 PM Onwards Lunch

28/03/2025 09.15 AM - 01.00 PM
NEUROTRAUMA-AUDITORIUM-1015E
AUDITORIUM, FAMILY HEALTH BUREAU



IMMUNOLOGY FOR RHEUMATOLOGISTS
CSRRSL – SLMDA UK
Scientific Session

College of Specialists in Rheumatology & Rehabilitation Sri Lanka

SRI LANKA MEDICAL & DENTAL ASSOCIATION
SLMDA - UK



CSRRSL – SLMDA Scientific Sessions



IMMUNOLOGY FOR RHEUMATOLOGISTS

CSRRSL – SLMDA UK
Scientific Session



09.15AM-09.30AM Welcome & Introduction - President-CSRRSL & President-SLMDA-UK

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Consultant Immunologist, Medical Research Institute



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Consultant in Rheumatology & Rehabilitation, TH- Kandy



12.15 AM - 12.30 PM My experience of liaising with Immunology lab in UK

12.30 PM - 01.00 PM Q & A Session
01.00 PM Onwards Lunch



28/03/2025 ⌚ **09.15 AM - 01.00 PM**



NEUROTRAUMA AUDITORIUM, NHSL

PROGRAMME

- 18.15 Photograph of the guests and Drinks reception
 19.00 Welcoming the Guests to the Grand Ballroom
 19.15 President's welcome Address
 19.30 Main Sponsor's Presentations
 19.40 Light Music by the Band
 20.00 Dinner is Served
 21.00 Sale of Raffle Tickets
 21.30 Dancing commences to the music of Exceed
 23.00 Raffle Draw
 23.20 Dancing Continues
 24.00 National Anthem and Carriages

THE MENU

Starter (Table service)

Fish pakora
Vegan jack fruit mini samosa
Spicy lamb kebab
Devilled chicken skewers

Main Meal (Table Service)

Yellow rice
Lamb pepper curry
Chilli devilled fish with spring onion
Fried Aubergine masala (batu moju)
Devilled new potato fry
Dhal curry
Heritage beetroot salad
Papadum's, fried chilli, spiced mango chutney
Mini Naans

Dessert

Opera cake & fresh cut fruits with berries



Recognising the primary scientific sessions and dance organisers



Dr Shyamalie Bopitiya



Dr Thanuja Yasawardena



Dr Mahendra Gonsalkorale



Dr Shirmila Withana



Prof Nirosini Nirmalan



Dr Thushara Rodrigo



Mr Devapriya Perera



Mrs Nilmini Seneviratne



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Trevon Simmons



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Mishtre Photography



SLMDA 2025 SPRING EVENTS MC

Ronald De Visser



“My name is Ronald De Visser, and I have been compering UK events for more than 10 years. My success is down to the primary and secondary education I received from St Peter's College Colombo and when I migrated to the UK in 2003, I invested in my higher education and completed my Degree, Masters and Chartered Marketing. Today, I hold a responsible role in the National Health Service as a Research Trial Manager for the biggest Breast Cancer Screening trial in the UK working at Kings College Hospital London. I truly believe helping others can make a difference in this world, and helping schools, associations, and charities with their events is something I find fulfilling”.

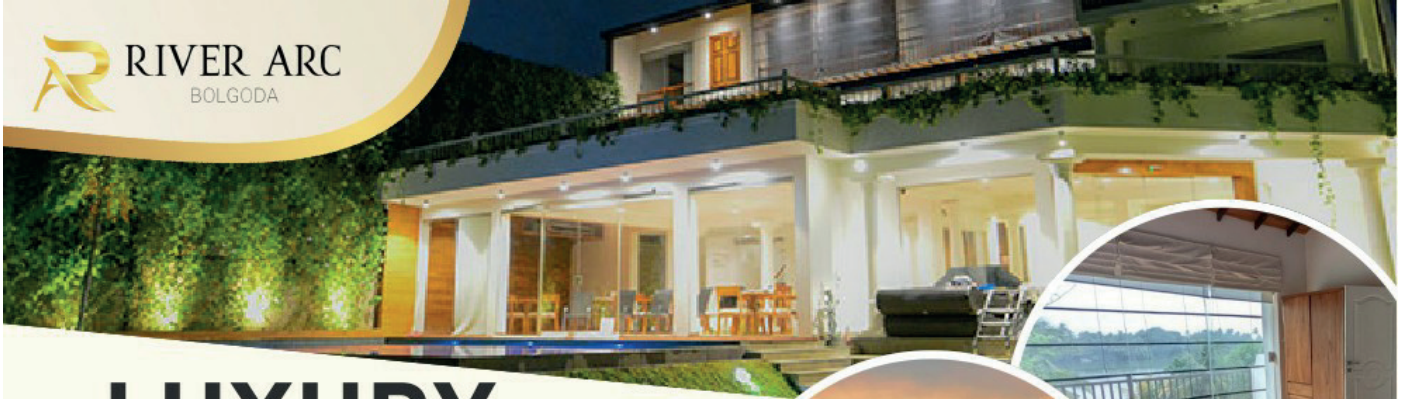


Autumn Ball 2024



Autumn Ball 2024





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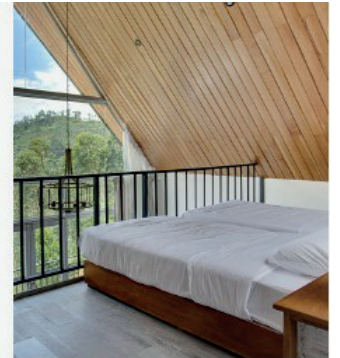
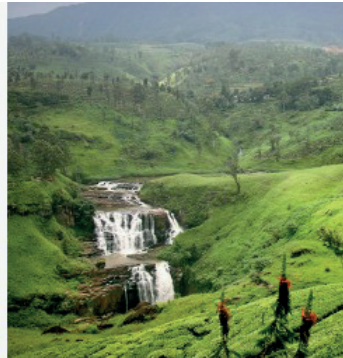
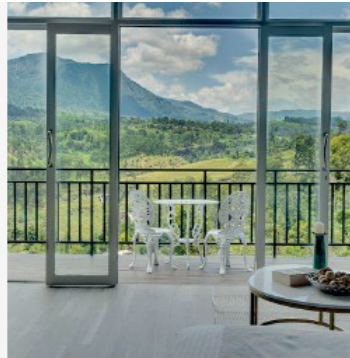
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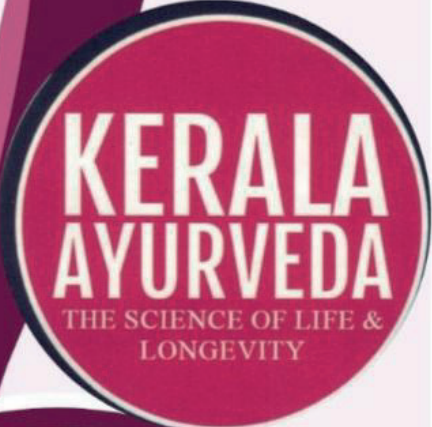
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ලක්ෂි රූපලාවන්ය ආයතනය



මේ වන විට ලන්ඩන් දේශයේ රූපලාවන්ය සම්බන්ධව හසල දැනුමක් ඇති වසර ගණනක සේවා පලපුරුද්ද ඇති London දේශයේ රූපලාවන්ය ආයතනයක් පවත්වාගෙන යන රූප ලා වන්ය ශිල්පිණී ලක්ෂි දුනුම..... විසින් පවත්වනු ලබන රූපලාවන්ය වැඩමුළු ලෝකේ විවිධ රටවල පවත්වමින් යන අතර ඔබටත් ඒ රූපලාවන්ය පාඨමාලාවට සහභාගී වන්නට ආශාවත් කැමැත්තක් උද්ධයෝගයක් තිබෙනවා නම් ඔබේ නගරයට ඇය එනවා ඒ සඳහා පුහුණු වැඩමුළු පවත්වන්නට කාන්තාවන් සහ පුරුෂයන් දෙගොල්ලටම මෙය විවෘතයි






පුහුණුව අවසානයේදී ඔබට වටිනා සහතික පත්රයක් ඔබට පිරිනැමෙන අතර ඔබ එදිනෙදා රැකියාව කරන අයෙක්නම් ඒ තුළින් ඔබට මුදලක් උපයාගන්නට මාර්ගයක් සකස් කරගන්නට මේ තුළින් හැකියාව ලැබෙනවා



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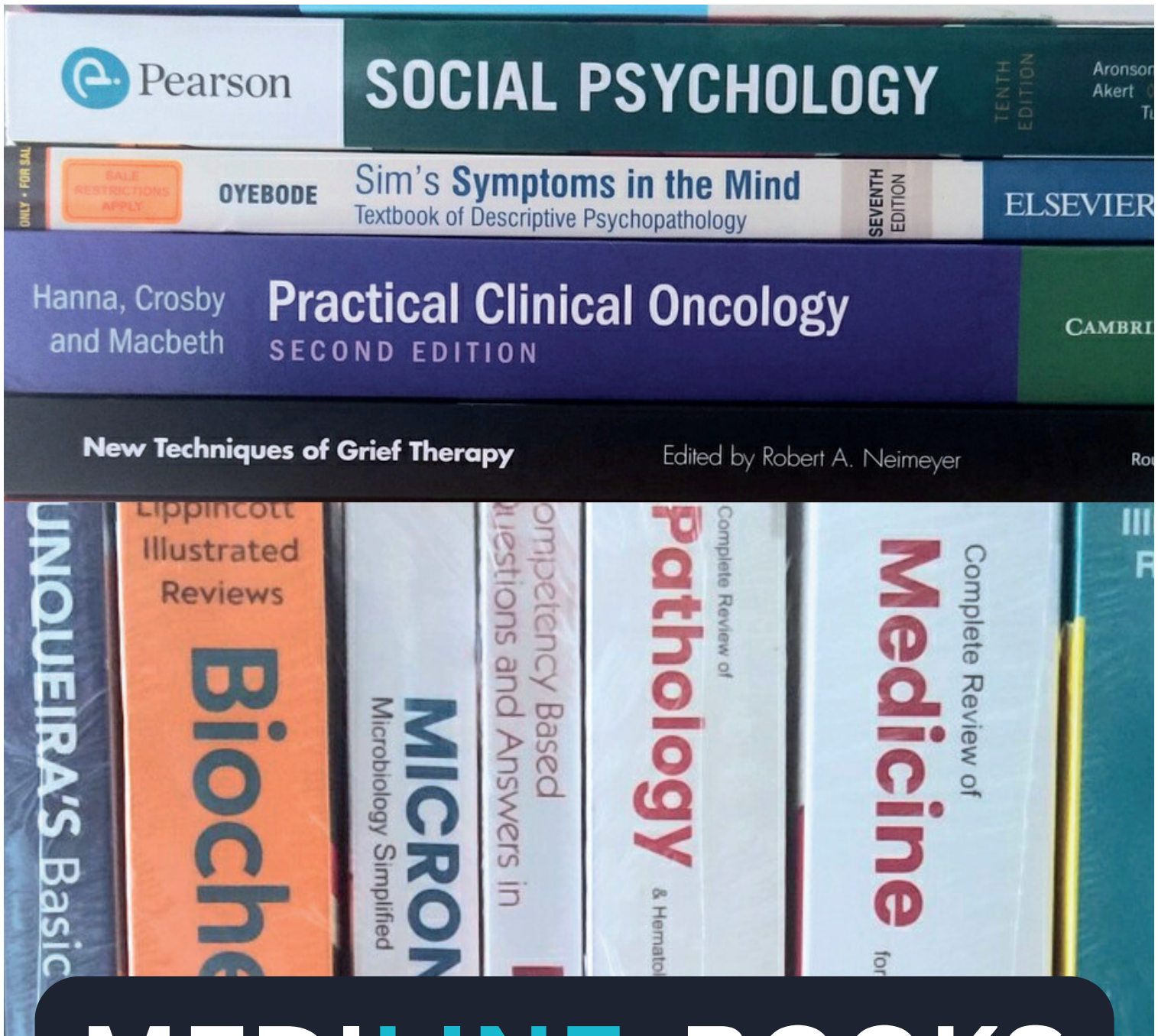
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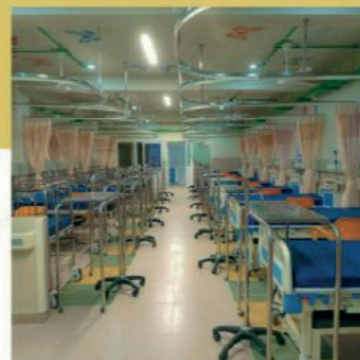
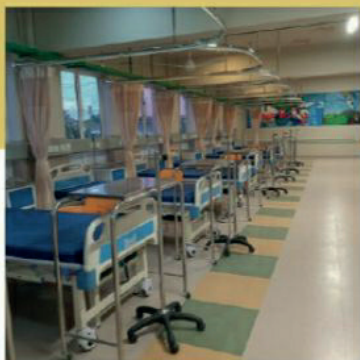
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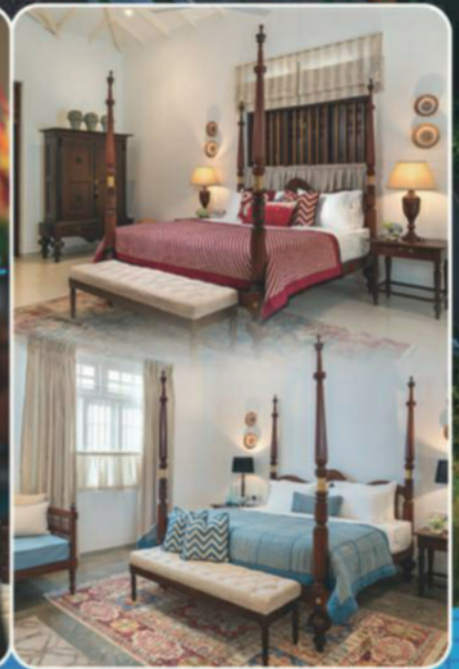
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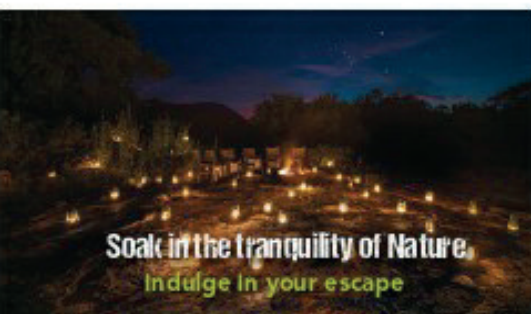


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