

# PeMSAA Newsletter

Peradeniya Medical School Alumni Association

**March 2022**



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# THE OMICRON VARIANT, IMMUNITY AND LOOKING AHEAD

## Omicron

The rapid spread of variant of concern Omicron has led to a significant upswing in global case numbers. It is now present in almost every country and has replaced Delta as the dominant variant in almost all parts of the world.

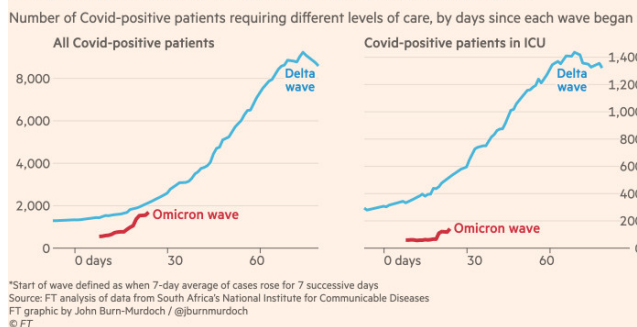
Omicron (B.1.1.529) emerged in Botswana and South Africa and was recognized to have a significant number of mutations compared to all other variants of concern including a significant number of mutations at the receptor binding domain of the spike protein. It has a significant advantage in growth rate and there is an increased risk of a close contact becoming a secondary case, with an increase in observed number of people infected by index case compared to Delta. The high growth rate is likely due to a combination of factors including immune evasion (virus evades the protective immune system) and potential intrinsic increased transmissibility.

Though highly transmissible, studies from several countries suggest Omicron infection has a reduced risk of hospitalization compared to Delta, with the reduction in risk ranging from 50-60%. The lower severity of Omicron infection is likely due to multiple factors including widespread use of vaccines including booster doses in risk groups as well as immunity from previous infection in the community. However, though infection appears to be associated with lower severity, the large number of people being infected with it, translates to significant numbers of patients requiring hospital admission, putting strain on healthcare systems. This has also translated to many healthcare workers contracting the disease and being unable to attend work.

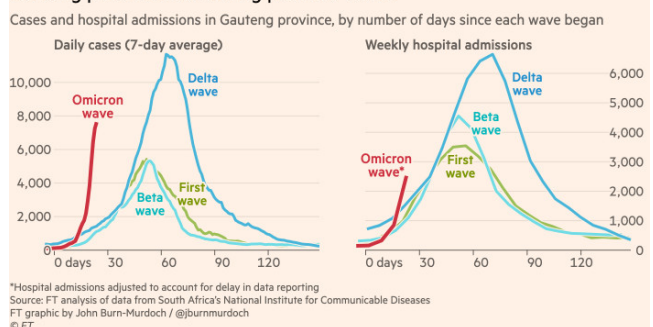
Vaccine effectiveness estimates show reduced effectiveness against infection and symptomatic disease compared to Delta across all ages. However, importantly, current COVID-19 vaccines are providing strong protection (approximately 75%) against severe disease and death. Preliminary vaccine effectiveness estimates appear greater following booster than primary series for most vaccines. (mRNA vaccine effectiveness against hospitalization-52% 2 weeks after 2 doses, 32% >6months after 2 doses, 82% after 3 doses). A study from Canada looking at vaccine effectiveness of mRNA vaccines showed that a primary series of two doses were unlikely to protect against Omicron infection (vaccine effectiveness 6%) while a third dose provided some protection. This was however, substantially lower than that for Delta. Another study from the US showed low effectiveness after two doses of Moderna with increase after the third dose, while there was considerably lower immunity in immunocompromised individuals.

Reinfection rates (UK definition- 120 days or four consecutive negative PCR tests between the positive tests confirming the two case events) have increased 15 fold since the arrival of Omicron and currently reinfections account for about 10% of all infections reported in the UK compared to the 1% during November 2021. Data shows that 46% of Omicron reinfections are symptomatic compared to the 44% of reinfections caused by Delta. A study from the UK showed risk for reinfection with Omicron to be 5.4 times higher than for Delta, with a relative risk of 6.4 for unvaccinated cases and 5.0 for vaccinated cases. In addition, secondary infection in a household (likelihood of another person in the house getting infection) was 2.6 times more likely with Omicron infection than Delta in people who had completed the primary vaccine series, and 3.66 times more likely in those who had received the booster dose, though not different to Delta in the unvaccinated. This shows that Omicron is much more successful at breaking through vaccine immunity and even immunity generated by previous infection than Delta.

### Although the number of Covid-positive patients in Gauteng is approaching the level from the Delta wave, the number in ICU is much lower



### Covid cases and hospital admissions are rising faster in South Africa's Gauteng province than during previous waves



Source: Financial Times Oliver Barnes and John Burn-Murdoch in London DECEMBER 7 2021

<https://www.ft.com/content/d315be08-cda0-462b-85ec-811290ad488e>

How long immunity lasts after booster doses remains a question. Real world data show that immunity from boosters decreases faster against Omicron than against Delta, while laboratory studies show that neutralizing antibodies should be effective up to 4 months. Preliminary data from Israel after giving a 4<sup>th</sup> dose to health care workers and susceptible populations showed some level of reduced risk of infection. However, whether giving 6-monthly booster doses to populations is sustainable or will continue to be effective against newly emerging variants is a question.

The major sub-lineages of Omicron are the BA.1 and BA.2 variants. BA.2 has a relatively higher growth advantage and transmissibility compared to BA.1. BA.2 is also more likely to cause household reinfection. Therefore BA.2 is likely to become the dominant sub-lineage as seen in many countries. However there doesn't appear to be any difference in clinical severity and no difference hospitalization. The vaccines seem to be equally effective against both lineages (2 weeks after booster- 63% to 70% for both BA.1 and BA.2).

### Possible outcomes over the coming months to years.

The WHO expert panel discussed 3 possible scenarios that could occur over time. The first scenario is where COVID19 remains highly contagious but causes mild illness in the majority of cases. The virus can be grouped with the four other corona viruses that circulate endemically. This scenario may take many years to be realized. Scenario 2 is where the disease presents as recurring epidemics of flu-like illness when the conditions of transmission are favorable (similar to seasonal influenza). Since the population has basic immunity, severe forms of the disease are observed only in people at risk. Continued vaccination will be vital in high-risk groups and adoption of preventive measures when transmission is high will be required. The third scenario is where there is an ongoing pandemic through new variants of concern. A new variant emerges evading acquired immunity and results in a large number of cases. The health system is overloaded and therefore there are more deaths. The situation is similar to what we experienced at the beginning of 2020 in many regions of the world.

What the world will face in the coming months to years is still unknown. Whatever the outcome, continuous monitoring of the situation with continuing behavioral adaptation will be necessary.

#### Dr. Champa N. Ratnatunga

Department of Microbiology  
Faculty of Medicine, University of Peradeniya



## THOUGHTS ON THE ROLE OF THE MEDICAL FACULTY LIBRARY - PAST, PRESENT & FUTURE



### Past

The Peradeniya Medical Faculty library began in 1962 in the area currently occupied by the Medical Education unit. Professor Tommy Wickremanayake, the then Professor of Biochemistry was instrumental in the construction of the current library. He being the Head of the Nuclear Medicine Unit at that time, slotted this Unit at one end of the new library building. From then to the first decade after the Millennium this library has provided yeoman service to the students and staff.

### Present

During the past two years, I have been visiting the library very regularly, referencing for two books that I was writing for the College of Surgeons. I observed very few 'on site users' as compared to earlier years, when it was in full swing. Covid-19 alone seemed unlikely as the

faculty was in session. So I wondered whether it was the smart phones with access to online books and literature, the cause. During ward classes I conducted in the past, I noticed that students had access to Bailey and Love on their smart phones. An audit of the percentage of students possessing smartphones is worthwhile.

### Library Vote

I understand that the entire library vote was Rs 3 lakhs in 2019, which dwindled to almost half that figure in 2021. For a journal, like 'Medicine' or 'Surgery International', a year's subscription is Rs 66,050/=. Hence, no journals have been ordered from the library vote for the past 3 years. Fortunately Dr. Krish Radhakrishnan and Prof. R. Swaminathan, of the PeMSAA - UK, have stepped in to make these journals available in our library for the past few years. PeMSAA UK has also donate many books which are in great demand for borrowing by students.

### E-Library

As a mode of information, has the E- library served its purpose? The E library, established during Professor Ananda Wijekoon's Deanship, though located in the library building, is not under the jurisdiction of the library. I would have thought that it would be incumbent of a modern library to be equipped with computer hard ware with Wi Fi access to the myriad web sites on medical topics that dot the

net. Eight computers have been installed for students, but are rarely used, despite the high cost of personal mobile internet connections. Do they know of this facility?

### Group Discussion Rooms

Conceptual differences I believe, must change from a 'silent space' to a space affording group discussion for students, like the pillared area in the faculty. Separate air-conditioned or cool and comfortable rooms/spaces, with good LAN or Wifi, are a must for such discussion areas. Making available screens to watch video presentations on subject matter available on the web, or those developed by staff of the faculty. smart boards and headsets, etc would be useful. A canteen close-by would be a bonus!

### For Staff

The staff should have access to high end journals (that are costly - to get complete articles), via the intervention of the WHO or the British Council, as was possible by the Hinari Scheme. The latter was terminated on us because we became a lower middle income country. This should be re-negotiated or re-sponsored.

### Research

The faculty research publications, should be in archival access, either retrievable as indexed soft or hardcopies. All journals of the Kandy Society of Medicine (KSM), prior to becoming online, books of abstracts of Annual sessions of the KSM and the University Research Sessions, should be available for any National researcher. Researchers of the ilk of Professors Nimal Senanayake, S.A.M. Kularatne, S.N. Arsecularatne, Indika Gawarammana, and many others in this category, should be persuaded to compile their publications, bind them, or convert to soft copies and leave it as a repository in the Library as archives. Professor Milroy Paul has done this and kept his work in the SLMA library, which has proved to be invaluable. Extension of this thought is to have published A Monograph Series by eminent researchers via a rejuvenated University Publishing Facility.

### Training of librarians

Such training must keep pace with the modern day requirements and the digital dissemination of information. The suitable candidate can be offered a scholarship to learn new innovations in library science in medical schools abroad. The transfer of technology will be worthwhile.

### Professor Channa Ratnatunga

Emeritus Professor, Faculty of Medicine, University of Peradeniya



## PROFESSOR HERBERT ALLAN APONSO- HONORED BY THE UNIVERSITY OF PERADENIYA

The University of Peradeniya at its annual convocation honoured Professor Herbert Allan Aponso by conferring him an honorary DSc. Professor Aponso is an eminent scholar, skilled clinician, passionate teacher and a compassionate human being who deeply touched the hearts of his patients and their parents with his healing touch.

Herbert Allan Aponso was born on the 25<sup>th</sup> of March 1925 and received his education at Prince of Wales College, Moratuwa where he excelled in oratory and English literature. He graduated from the Colombo Medical College with honors in 1949 and subsequently was appointed as acting Port Health Officer, Colombo. During the next few years, he worked in various hospitals serving people from all walks of life. He grabbed the opportunity of pursuing a career in Paediatrics and left for the United Kingdom to receive training at the prestigious Great Ormond Street Hospital. From there onwards he flourished in his field by obtaining his DCH, MRCPCH and the MD.

In 1963, Dr. Aponso was selected as a Senior Lecturer in Paediatrics, University of Ceylon. Dr. Aponso was a born teacher and had great passion in guiding the young medical students to reach their goals. Hence, Prof.C.C.de Silva thought he was the most suitable person to lead the Department of Paediatrics in the newly formed medical school at Peradeniya. As the sole lecturer recruited, he shouldered the responsibility of teaching Paediatrics for the first four batches of the medical students.

The young Aponso exhibited great dedication and enthusiasm towards the success of the department and the field as a whole. He was a multifaceted personality with exceptional skills, talents and roles. As a clinician his examination was so astute and thorough, as a trainer he instilled discipline among his trainees, as an administrator he had the commitment to take health care to the door steps of his fellow citizens.

In 1977 he was appointed as a Professor in Paediatrics. During his tenure, he obtained equal recognition for paediatrics as major discipline on par with the other three specialties. He raised awareness about the association between paediatric illnesses and the socio-cultural-economic factors. His involvement in social paediatrics made him to be the pioneer in forming a body called 'Center for inter sectorial community health studies, Peradeniya'.

Professor Aponso has done much research in the field of paediatric nutrition and social paediatrics. In an era where there was no access to internet, online search engines and databases, he contributed immensely for the development of the paediatric field by shedding light on many unresolved paediatric problems. Many of his articles were published in journals like the Ceylon Journal of Child Health, Sri Lanka Journal of Medicine and the Ceylon Medical Journal. He authored many books and book chapters for the benefit of the public and the clinicians. He also guided and encouraged his juniors to get involved in research.

Professor Aponso held various coveted positions locally and internationally which speak volumes for his administrative skills and charisma. He was a WHO Consultant in Paediatric Education in India and was a visiting professor of BJ Medical College Ahmedabad. He was also a visiting professor of the University of Connecticut, USA and has received the distinguished scholars' award from that university. He was a member of the WHO Expert committee (Geneva) on acute respiratory infections, President-Sri Lanka paediatric Association, President-Sri Lanka Association for Voluntary Surgical Contraception & Family Health and President of the Kandy Society of Medicine.

Professor Aponso's contributions was not just limited to professional bodies. He has rendered yeoman service to the community by giving leadership to various societies and charity organizations. These organizations included YMCA-Moratuwa, YMCA-Kandy, Y's Men's Club of Kandy, Family Planning Association of Sri Lanka, Sri Lanka Baptist Sangamaya, and the Kandy City Mission.

After 30 years of service, Professor Aponso retired from university service in 1993. As a paediatrician he has seen an evolutionary process of over six decades in the field of paediatrics. After his retirement he continued to teach medical students and serve his patients for many years. He was always enthusiastic and keen in sharing his wealth of knowledge and experience with others at various professional meetings. Despite his achievements and different career roles, he never loses his common touch with the people, he is closely attached to his caring family and to the religious faith which continued to be his strength throughout the life.

Professor Herbert Allan Aponso is a great personality. He is a role model to emulate, a guiding light to his subordinates and benevolence to his patients. Although Professor Aponso had reached the zenith of paediatrics in Sri Lanka, the journey was no bed of roses. He too had to overcome challenges and obstacles at various junctures, but nothing was able to distance him from featuring in a spectacular career. His positive outlook, unblemished character and astute approach helped him traverse the many peaks and valleys in his life journey.

#### **Prof. Heshan Jayaweera**

Department of Paediatrics, Faculty of Medicine, University of Peradeniya

## **ESTABLISHMENT OF A NEW RENAL CARE UNIT - A HISTORICAL LANDMARK AT PERADENIYA**

The Peradeniya Teaching hospital currently remains the leading paediatric nephrology unit in Sri and also the pioneering unit for paediatric kidney transplantation in Sri Lanka. Since 2004 to date nearly 150 paediatric kidney transplants have been performed in 2017, adult nephrology services were also established at Peradeniya. Despite being a leading nephrology centre, a separate unit to provide services to these patients was not available and was a great need for the hospital.

The dream of having a separate unit was finally realised and a fully equipped, Renal Care Unit was formally declared open by the Minister of Health, Hon. Dr. Keheliya Rambukwella on the 7<sup>th</sup> of January 2022. Having recognised the need to have a separate kidney unit, Prof. Asiri Abeyagunawardena and Prof. Chandra Abeysekera pioneered the initial steps in 2015 to make this dream a reality with the support of the Department of Medicine, Faculty of Medicine, Peradeniya. Despite many obstacles, with the support of many individuals and organisations too numerous to list, the renal care unit has finally become a reality. The completion of the unit was a combined effort of the Ministry of Health, the Engineering Division of the Sri Lanka Army, Central Engineering Consultancy Bureau and well wishes of the Peradeniya Kidney Protection Society ([www.kidneyprotectionpdn.org.lk](http://www.kidneyprotectionpdn.org.lk)).

This fully equipped unit consists of a paediatric dialysis unit, adult dialysis unit, peritoneal dialysis unit, high dependency unit and a renal ward. Furthermore, the nephrology unit provides comprehensive care for both paediatric and adult patients with kidney diseases coming from all parts of the country. In collaboration with the Centre for Education Research Training in Kidney Disease (CERTKID) unit at the Faculty of Medicine, University of Peradeniya this new unit also conducts many training and educational programs for both patients, their families as well as health care workers.



We wish to acknowledge and pay tribute to all those who have supported to make this unit a reality which will provide a great service to the nation and provide a new life to many in need.

**Dr. Rajitha Abeysekera**

Senior Lecturer in Medicine & Consultant Nephrologist, Department of Medicine, Faculty of Medicine, University of Peradeniya  
 Director, CERTKiD, University of Peradeniya



**ATHULA KAHANDALIYANAGE - WITH THE 'PERADENIYA TOUCH'- HAS PASSED ON**

We were batch mates in the Faculty of Medicine Peradeniya. Our batch comprised a very diverse group of young people- some from elite schools, others from rural areas, some fluent in English, others not so, some shy and reticent, Sinhalese, Tamils, and Muslims, - and the list could go on. It was Athula who had the ability to bring all of us together to form a cohesive group, such were his social skills even at that young age. The University of Peradeniya afforded us the unique 'Peradeniya Experience'- living in halls of residence, and meeting students from all faculties. Athula imbibed this to the full, honing his wonderful character and giving him that exclusive 'Peradeniya Touch', which would stand him in good stead later on in life. From the very first day in the faculty we saw a carefree confident chap, always saying things in a light vein - never angry, - never in a bad mood. Undoubtedly clever, we never saw him slogging at books.

He was courteous and charming always, caring as a friend, compassionate to the downtrodden, courageous during adversity, competent in administration, conciliatory during a crisis, careful in conversation - a charismatic persona. He joined the medical administrative service of the Ministry of Health, and steadily rose in the ranks to the highest post of Secretary Health. He was thus able to work in any political scenario which augured well for his integrity. Thereafter he took up a post in the WHO in India, where his abilities were soon recognized, with several other assignments being offered to him. On his return back home, he was in great demand again in the private and public sector.

He was a good and loyal friend to all. If asked for help he would always respond by saying "I will do my best for you".

Our batch had its 40<sup>th</sup> year reunion in 2018. Athula was the force behind the idea of this event. I was co - chair of the organising committee. Most of our Tamil friends were visiting Sri Lanka many years after migrating abroad. Athula told me that he wanted an extra special welcome given to them. In this regard Athula organized a special carriage in the Intercity express from Colombo to Kandy. They were greeted at the Fort railway station by the Station Master himself. On arrival at the Grand Kandyan Hotel in Kandy, they were accorded a real Kandyan welcome.

The reunion dinner was unforgettable because Athula had put in a special word with the management of the hotel to make the event spectacular. He was determined to make this reunion memorable for all, and he did it 'his way'. His soul mate was Indira, his dear wife, a professional in her own right. Together they made a wonderful couple, sharing success and sorrow with grace. He leaves behind also their second son and family.

Athula was planning another re-union with us in Sri Lanka to celebrate his 70<sup>th</sup> Birthday. But this this did not materialize.

What a friend we had in Athula - a friend like no other.

May his soul rest in peace. May he attain the supreme bliss of Nibbana.

**Neelakanthi Ratnatunga** (Neela Ekanayaka), Batch 1973 Peradeniya Medical School.

## PeMSAA / SLCP Joint Sessions

The Sri Lanka College of Paediatricians Regional Sessions organized in collaboration with PeMSAA was held on 8<sup>th</sup> and 9<sup>th</sup> March at the Grand Kandyan Hotel, Kandy. The evening talk at the inauguration was delivered by Prof. Kalana Maduwage and many clinicians and university academics delivered their speeches in the academic session.

**SRI LANKA COLLEGE OF PAEDIATRICIANS**  
Regional Sessions - **Kandy**

Organized in collaboration with the Peradeniya Medical School Alumni Association (PeMSAA)

**8<sup>th</sup> & 9<sup>th</sup> March 2022 - Grand Kandyan Hotel**

**08.03. 2022 - Inauguration**

- 7.30pm National Anthem/ Lighting of the traditional oil lamp
- 7.45 pm Welcome Address by the President PeMSA: *Professor Thushara Kudagammana*
- 7.50pm Address by the President SLCP: *Professor Shaman Rajindrajith*
- 7.55 pm Evening talk: *"Clinically Relevant Dilemmas in Snake Envenomation; Evidence from Recent Research"*  
*Professor Kalana Maduwage* - Professor in Biochemistry, University of Peradeniya
- 8.30pm Vote of thanks: *Dr Channa de Silva*, Secretary, SLCP.
- 8.35 pm Dinner/ Cocktails

**09.03.2022 - Academic session**

- 08.15 am Registration
- 08.30 am *Optimizing growth - A case based discussion:*  
*Professor Heshan Jayaweera* - Professor in Paediatrics, University of Peradeniya
- 09.00 am *Solving mysteries of abdominal pain in children:*  
*Professor Shaman Rajindrajith* - Professor of Paediatrics, University of Colombo
- 09.30 am *An overview of mental health issues in adolescence:*  
*Dr Udena Attygalle* - Consultant Child and Adolescent Psychiatrist, SBSCH
- 10.00 am TEA
- 10.15 am *Complicated dengue in children at the midst of the COVID-19 pandemic:*  
*Dr Kosala Karunaratne*, Consultant Paediatrician, LRH.
- 10.45 am *Disorders of puberty in children; an approach to diagnosis and management:*  
*Dr Raihana Hashim* - Consultant Paediatric Endocrinologist, SBSCH.
- 11.15 am *Respiratory Distress Syndrome in preterm babies:*  
*Dr Nimesha Gamhewage*, Senior Lecturer, University of Sri Jayawardeneperura
- 11.45 pm *Initial stabilization of a newborn with surgical problems:*  
*Dr Sampath Herath* - Consultant Paediatric Surgeon, National Hospital Kandy
- 12.15 pm *Approach towards achieving asthma control in children:*  
*Dr Channa de Silva* - Consultant Paediatric Pulmonologist, LRH

## PeMSAA - Regional Clinical Meeting

**REGIONAL CLINICAL MEETING**  
PeMSAA in collaboration with the Matale Clinical Society

**Management of common NCDs at primary care**

**Conducted By:**

- Prof. Udaya Ralapanawe*  
Professor in Medicine
- Dr. Gowri Ratnayake*  
Consultant Endocrinologist
- Moderator :**  
*Dr. Chathurika Dandeniya*  
Consultant Rheumatologist

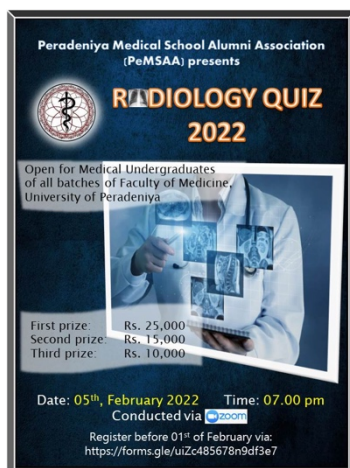
**Hybrid event**  
**Wednesday, 02<sup>nd</sup> February 2022**  
**11:30am - 01:00pm**

**Register and Join -** <https://zoom.us/j/10656695177?pwd=NkMxYzZlSTVlbnh0WmZlZkR0MkxibzQUT08> Meeting ID: 610 6566 9517  
Passcode: f4@NQyB^

The second regional clinical meeting organized by PeMSAA in collaboration with Matale Clinical Society was held on 2<sup>nd</sup> February, 2022 as a hybrid event. It was on "Management of Common NCDs at Primary Care". Prof. Udaya Ralapanawa, Professor in Medicine and Consultant Physician, discussed on management of hypertension and Dr. Gowri Ratnayake, Consultant Endocrinologist, discussed on management of type II diabetes mellitus. The session was moderated by Dr. Chathurika Dandeniya, Senior Lecturer and Consultant Rheumatologist. On behalf of PeMSAA, its Vice President Prof. Indu Nanayakkara addressed the gathering.

## "Ayubowewa" Rupavahini Programme

For the third time, PeMSAA is contributing to "Ayubowewa", the weekly Rupavahini Programme for the general public to promote health. Twenty health talks on a wide array of topics were recorded with the participation of eminent resource persons. They are scheduled to be aired in the upcoming weeks. Council Member Dr. Iranga Madushan coordinates the programme for PeMSAA.



## PeMSAA Radiology Quiz 2022

The Inaugural PeMSAA Radiology Quiz 2022 for undergraduates was held on 5<sup>th</sup> of February, 2022. Council Member Dr. Priyangi Wijesinghe organized the event. The winners were awarded with cash prizes and certificates.

1<sup>st</sup> place: E. Sandeepani Yasodara  
3<sup>rd</sup> place: N S Wimalaratna  
5<sup>th</sup> place: R M P K Ranasinghe

2<sup>nd</sup> place: N A Yatapana  
4<sup>th</sup> place: Sachini Mayanka Hettiarachchi

## PeMSAA Bursaries

The PeMSAA Bursary Programme was initiated last year to support the financial status of medical undergraduates. The awarding of PeMSAA bursaries to the second group of recipients who were selected from the Batch 19/20 was held on 18<sup>th</sup> March, 2022. This year there were 20 recipients of these bursaries. The event was graced by the presence of Prof. Vasanthi Pinto, Dean of the Faculty of Medicine, and Prof. Thushara Kudagammana, President of PeMSAA. In memory of our alumnus, Dr Yasintha Thilini Heratha (batch 92/93), her mother, Mrs. S.W Dissanayaka donated five bursaries to female students. Our thanks and our thoughts go to Mrs. Dissanayaka and the family of the late Dr. S.D.M.Y.T. Herath.



## PeMSAA - Case-Based Discussions

The second segment of the PeMSAA Evening Talks which was a series of case-based discussions was completed successfully prior to the commencement of the Final MBBS examination. Altogether, PeMSAA has conducted over 50 Evening Talks during the past year. The list of resource persons who contributed to the recent most recent sessions is as follows:

- Dr. Chathura Piyarathne [Batch 2000/01] Case-based Discussion with MCQs: Interpretation of Abnormal Liver Function Tests
- Dr. Sajith Kodithuwakku [Batch 2004/05] Case-based Discussion with MCQs: How to Approach Anaemia in Pregnancy
- Dr. Shyama Arambepola Case-based Discussion with MCQs: How to Approach a Patient presenting with Self Harm
- Dr. Pathum Dissanayake [Batch 1996/97] Case-based Discussion with MCQs: An Infant with Failure to Thrive
- Dr. Lalitha Senarath [Batch 1982/83] Case-based Discussion with MCQs: Neuro-ophthalmology and Systemic Diseases
- Dr. Champika Gihan [Batch 2000/01]P reparation for the Communication and Counseling OSCE in the Final Examination
- Dr. Udeni Herath [Batch 1992/93] How to Approach a Patient with Alcohol Withdrawal



## NEWS FROM OVERSEAS PeMSAA CHAPTERS; PeMSAA - UK

Warm greetings from the UK. As the current President of the PeMSAA - UK, I am delighted and honoured to send this message to the Newsletter.

We have a dynamic Management Committee with a few of the earlier members staying on and we shall strive to honour our commitments to the Faculty in spite of COVID curbing most of our social and fund- raising activities.

Recently we concluded our Academic Awards for undergraduates for 2021, generously funded by an alumnus. Advertisements calling for submissions for the Academic Awards for both postgraduates and undergraduates for 2022 will appear soon. We feel strongly that this is a way to encourage research among the younger generation and will welcome abstracts of work done. The guidelines for submissions are on our website.

Following a request for books from Professor Channa Ratnatunga and the then Medical Faculty librarian Ms. Dilini Abeyratna, we managed to donate the majority of the books asked for, thanks to generous donations from alumni and other well-wishers. We will continue to raise funds and hope to purchase the remaining four books in the near future.

Our webinar series is continuing and the next one is planned for the spring. Please look out for the notifications and we welcome all of you to this virtual meeting.

With hopes of COVID suppression and a return of "normality", we have planned a social event in the Spring to help with much needed fund raising, which I sincerely hope will go ahead in spite of the new variant Omicron.

Let me conclude by stating that this partnership with the Faculty of Medicine, Peradeniya is beneficial to both parties. We like to think that we are giving back something good in return for the education we had, so that the current students can reap the benefits.



**Dr. Padma Samarawickrama** MBBS (Cey.), MRCP (UK), President PeMSAA - UK

## PeMSAA - Australasia

It is pleasing to know that the situation with the Pandemic is improving rapidly in Sri Lanka and worldwide.

The Australian Government recently declared that the international & state borders are open with no restrictions for vaccinated visitors. This is a great news for us as we will be able to have our Biannual PeMSAA Conference & Gala Dinner in our great city of Sydney.

Our PeMSAA NSW organizing committee is working tirelessly and negotiating with the venue Sofitel Darling Harbour to make PeMSAA Conference -2022, a memorable one for our international, State and local alumni. It is with great pleasure, I announce that the new dates have been set to hold the 7th Congress in Sydney and it will be a two day Conference on the 7th & 8th October 2022.

Please keep these dates available for you to attend the event and your participation will be greatly appreciated by the organizing committee. Soon we will be starting the Conference registration to allow Early bird registrations and I would like to encourage our colleagues in Sri Lanka to take this opportunity to register early. The PeMSAA Australasia website will be updated soon with the new dates and will have all the information and online registration forms.

We will be happy to answer any questions or queries that you have in planning and attending the conference. Our best wishes to mother PeMSSA Peradeniya.

**Dr Anura Thalagala,**  
President PeMSAA  
Australasia



**PeMSAA - Australasia**  
Peradeniya Medical School Alumni Association

## Donations to PeMSAA Students Crisis Fund

The PeMSAA Student Crisis Fund was established to help Peradeniya medical students during an acute personal crisis such as serious personal health problems, serious health problems of parents or guardians including sudden death or permanent disability and loss of houses due to natural disaster etc. We welcome donations, either as one-off donations or as regular monthly sums to the fund. We sincerely hope our alumni will generously donate to this cause, remembering how difficult life could sometimes be during undergraduate years. The details of the fund are as follows.

**Name of account: 'PeMSAA Student Crisis Fund', Account number: 87997354, Bank name: Bank of Ceylon  
Bank branch: Super Grade Branch Peradeniya, Swift code: BCEYLKX**

## PeMSAA - UK Academic Award 2022 - Call for applications

PeMSAA - UK Academic Award 2022 has called for applications under both undergraduate and postgraduate categories. Please visit: [www.pemsaa.org.uk](http://www.pemsaa.org.uk). Closing date for application: 31<sup>st</sup> July 2022.

## PeMSAA Annual General Meeting

The Annual General Meeting of PeMSAA will be held on 23<sup>rd</sup> of April 2022 as a virtual event.



**PeMSAA**  
Peradeniya Medical School  
Alumni Association



<https://www.pemsaa.org.lk/more/publications-merchandise/memorabilia.html>

## Memorabilia



### Becoming a PeMSAA member

The eligibility for membership is from two main categories; past graduates of the Faculty of Medicine, Peradeniya and academic staff members of the Faculty of Medicine. All the consultants (extended staff) irrespective of their faculties, who are involved in teaching of medical students of the Faculty of Medicine, Peradeniya and at the teaching hospitals are welcome to join.

Details of the membership is available at:  
<https://www.pemsaa.org.lk/membership/how-to-become-a-member.html>

Now available for purchase at the PeMSAA office and via online orders

### Contact PeMSAA

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