



SRI LANKA COLLEGE OF INTERNAL MEDICINE
ONE NATION - ONE STANDARD ACHIEVING EXCELLENCE IN HEALTHCARE

SIMCON 2025 *Colombo*

14TH - 16TH NOVEMBER
SHANGRI - LA - COLOMBO

IN ASSOCIATION WITH



Endorsed by



CONFERENCE PROCEEDINGS



SRI LANKA COLLEGE OF INTERNAL MEDICINE

ONE NATION - ONE STANDARD ACHIEVING EXCELLENCE IN HEALTHCARE

SRI LANKA COLLEGE OF INTERNAL MEDICINE
One Nation - One Standard | Achieving Excellence in Healthcare



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CONTENT

1.	Message from the President	03
2.	Message from the Honorary Joint Secretaries	04
3.	Message from the Chief Guest	05
4.	Message from the Guest of Honour	06
5.	SLCIM Council 2025	07
6.	Academic Programme	09
7.	Prof. T Varagunam Oration	21
8.	Faculty	24
9.	Books Launched by SLCIM	61
10.	List of Free Papers	63
11.	Committees and Judges	74
12.	Awards	76
13.	Acknowledgements	78
14.	Sponsors	80

MESSAGE FROM THE PRESIDENT



The Scientific Programme of SIMCON 2025, held under the visionary theme “One Nation, One Standard – Achieving Excellence in Healthcare,” presents a rich and diverse academic agenda spanning two days of immersive learning, clinical insight, and regional collaboration.

In keeping with this spirit of SIMCON 2025, the Pre-Congress Workshops offered a series of skill-based, interactive learning experiences designed to empower clinicians and trainees alike. Conducted across multiple venues prior to the main congress, these sessions combined practical training, innovation, and reflection—bridging technology, bedside care, and humane values. These sessions featured workshops on Artificial Intelligence, skills workshops on Respiratory Support and Point of Care Ultrasonography, Acute Medicine, and a unique storytelling session on Humane Care.

The main conference opens with the “How to Pass MD” series, spanning over three sessions and providing targeted guidance for postgraduate trainees, followed by a series of high-impact plenaries, expert panels, and symposia exploring key domains such as acute and emergency care, non-communicable diseases, infectious diseases, toxicology, and emerging therapeutics. The Global Forum will feature regional experts from India, Nepal, and Bangladesh.

A major addition to SIMCON 2025 is the introduction of Masterclass Tracks, a series of parallel sessions specifically curated to enhance diagnostic reasoning and practical therapeutic skills, covering topics such as advanced ECG and ABG interpretation, bedside neurology, joint examination, stroke imaging, smart clinical triage, nutrition in chronic disease, and the transition from trainee to specialist—all led by esteemed local and international experts.

The academic program was further enriched by free paper presentations, case-based discussions, and poster displays, offering valuable platforms for scholarly exchange. Dedicated segments for Young Internists, Meet the Experts, the Veterans’ File, and the SIMCON Quiz added vibrancy and inclusivity to the event.

With contributions from world-renowned institutions including the Mayo Clinic, ACP-USA, API-India, SIMON-Nepal, and APB-Bangladesh, alongside Sri Lanka’s leading clinicians and academics, SIMCON 2025 stands as a celebration of excellence, innovation, and collaboration — shaping the future of internal medicine through shared vision and collective purpose.

The Sri Lanka College of Internal Medicine extends its warmest wishes for the continued success of this academic session and to all who contribute to its enduring legacy of excellence. Special appreciation is extended to the Scientific Committee for meticulously drafting this inspiring program and to our valued sponsors for their generous support in advancing medical education and professional development across the nation.

Dr. Krishantha Jayasekera
President
Sri Lanka College of Internal Medicine

MESSAGE FROM THE HONORARY JOINT SECRETARIES



As the Honorary Joint Secretaries of the Sri Lanka College of Internal Medicine, we are delighted to extend our warmest welcome to all participants of SIMCON 2025, the 9th Annual Academic Sessions of our College. This flagship event marks the culmination of a year filled with dedication, progress, and unity, a true reflection of our shared commitment to advancing Internal Medicine in Sri Lanka.

This year's theme, "One Nation, One Standard – Achieving Excellence in Healthcare," captures the spirit of our mission to establish uniform standards of care across the country while nurturing excellence in education, research, and clinical practice. Under the inspiring leadership of our President, Dr. Krishantha Jayasekera, and the dynamic Council, the College has continued to champion the professional growth of physicians and promote evidence-based, patient-centered care.

Throughout the year, the College has spearheaded several high-impact educational initiatives. The Doctors' Educational Programme and Nurses' Educational Programme, themed "Towards Excellence – Setting Clinical Standards in Medicine," were webcast live from Colombo to more than one hundred peripheral hospitals, creating a unified platform for learning and improving clinical standards across Sri Lanka. Complementing these were the audit and implementation programs conducted at leading hospitals, focusing on antibiotic stewardship, oxygen prescription practices, and the use of early warning scores, which are vital steps towards strengthening patient safety and quality of care.

The College also reached out to its members across the island through regional meetings and peer learning forums, promoting collaborative learning and equitable access to professional development. Skill-based programs, including Respiratory Support in Internal Medicine and Point of-Care Sonography workshops, have empowered postgraduate trainees and medical officers with essential clinical competencies. The success of regular webinars and lectures led by expert committees of SLCIM was another milestone.

Preceding this year's main conference, a series of pre-congress workshops, including AI for Healthcare Professionals and Academics, Humane Care Workshop, PCSIM, and ReSIM, set the tone for an intellectually stimulating and forward-looking academic program. Strengthening its global ties, the College continued fruitful collaborations with the American College of Physicians (ACP), International Society of Internal Medicine (ISIM), and other regional associations, fostering cross-border academic exchange and shared learning.

We extend our heartfelt gratitude to all resource persons, organizing committees, sponsors, and well-wishers for their invaluable support in making SIMCON 2025 a success. As we unite under one standard and one vision, may we continue to raise the bar of healthcare in Sri Lanka and beyond.

We warmly welcome you all to SIMCON 2025!

Dr. Rakitha Higgoda and Dr. Sahan Mendis
Honorary Joint Secretaries
Sri Lanka College of Internal Medicine

MESSAGE FROM THE CHIEF GUEST



It gives me great pleasure to extend my warmest greetings to the Sri Lanka College of Internal Medicine on SIMCON 2025, the 9th Annual Academic Sessions of the College. This event stands as a testament to the unwavering dedication of our nation's physicians to advancing clinical excellence and improving patient care.

The theme for this year, "One Nation - One Standard: Achieving Excellence in Healthcare," is both timely and visionary. In a rapidly evolving healthcare environment, the establishment of uniform, evidence-based standards is essential to ensure equity, quality, and safety in medical practice across all regions of Sri Lanka.

I commend the college for its leadership in promoting standardisation through continuous professional development, clinical audits, and educational initiatives that reach both doctors and nurses. Such endeavours not only uplift clinical standards but also cultivate a culture of accountability and lifelong learning within our healthcare system.

Embedding quality-improvement principles into everyday clinical care is no longer optional; it imperative. By integrating these principles into routine practice, we can move beyond reactive medicine toward proactive, patient-centered care that aligns with international benchmarks while addressing local needs.

As we gather here to share knowledge and experiences, let us reaffirm our shared responsibility to uphold the highest standards of professionalism and compassion. Together, we can strengthen our health system and ensure that every citizen, regardless of geography, receives the same standard of excellence in care.

I extend my best wishes for a successful and inspiring conference and applaud the Sri Lanka College of Internal Medicine for its continued service to the nation

Dr Anil Jasinghe
Secretary
Ministry of Health & Mass Media

MESSAGE FROM THE GUEST OF HONOUR



As President of the International Society of Internal Medicine, I am honored to attend 2025 SIMCON and bring greetings from the Society. The Sri Lankan College of Internal Medicine has been an active member of ISIM since 2017 and both organizations have had productive collaborations around SIMCON annual meetings. I wish to thank SLCIM President Jayasekare and the organizers for their kind invitation to attend the 2025 session.

As ISIM's purpose is to promote scientific knowledge and unity in Internal Medicine, to further the education of young internists and to encourage friendship among physicians in all countries, I cannot think of a more fitting venue than SIMCON to further these efforts. My wish is for everyone attending to benefit from the educational opportunities and fellowship that are provided by the excellent program being presented, and I look forward to participating.

Virginia L. Hood
President
International Society of Internal Medicine

SRI LANKA COLLEGE OF INTERNAL MEDICINE COUNCIL 2025



Sri Lanka College of Internal Medicine 2025



Row 01:(Seated) : Dr Raketha Higoda (Jt. Secretary), Dr Shashi Karunaratna (College Editor), Dr Harsha Sathesdandra (Past President Representative), Dr Kumudini Jayasinghe (Senior Representative), Dr Bandusri Rathnayake (Vice President),
(Left to Right) Dr Madhuwanti Hettiaratchi (President Elect), **Dr Krishantha Jayasekera (President)**, Dr Suranga Manigama (Immediate Past President), Prof Priyanti Jayasekera (Vice President),
Dr Ganika Senarathne (Past President Representative), Dr Dilusha Lamabadusuriya (College Editor), Dr Yana Udaya Kumara (Treasurer), Dr Sahana Mendis (Jt. Secretary).

Row 02:(Standing) : Dr Nandhini Gnanaprasan, Prof M Umakanth, Dr Senaka Pihapitiya, Prof Chamila Mettananda, Dr Durgan Wanontar, Dr Kittsir Niwunneela, Dr Chaminda Kotagge, Dr P Subhasan, Dr Disnan Perera, Dr Usraani Wanyapperuma,
(Left to Right) Dr Nilanka Perera, Dr Koitha Jayasindara, Prof Namal Wijesinghe, (Senior Representative), Dr Nandana Dikmadugoda (Senior Representative),

Row 03:(Standing) : Dr Raw Jayawardene, Dr Rohitha Amara Witharana, Dr Rohitha Gamlath, Dr Roshan Uvanaage, Prof Chamara DeLuigama, Dr Lakma Fonseka, Dr Warnana Pathirana, Dr Fannuditha Madanayake, Dr Nuwan Premawardana,
(Left to Right) Dr Saliadurai Prasath, Dr Ranga Gunasekera, Dr Kavindra Lokugamage, Dr Jagath Pusipakkumara.

SRI LANKA COLLEGE OF INTERNAL MEDICINE COUNCIL 2025

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Dr Nandana Dikmadugoda

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Dr Pamuditha Madanayake

Dr Durga Manohari

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Dr Kithsiri Niwunhella

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Dr Selladurai Pirasath

Dr Nuwan Premawardana

Dr Jagath Pushpakumara

Dr P Sutharsan

Prof M Umakanth

Dr Ushani Wariyapperuma

Dr Rohitha Amara Witharana

Pre Congress Workshops

Workshop 01

11th October 2025

AI for Consultants and Academics: From Insight to Impact

Workshop 02

12th October 2025

AI for NextGen Doctors:
A Workshop for PG Trainees and Medical Officers

Workshop 03

26th October 2025

Respiratory Support in Internal Medicine (ReSIM)

Pre Congress Workshops

Workshop 04

1st November 2025

Case Based Discussion in Acute Medicine-Fostering
Multidisciplinary Collaboration

Workshop 05

2nd November 2025

Point of Care Sonography in Internal Medicine (PCSIM)

Workshop 06

8th November 2025

Heart of Healing: Life Stories of Illness
Story Telling Session on Humane Care

ACADEMIC PROGRAMME

15th November 2025

07.30 AM - 08.30 AM

HOW TO PASS MD - SESSION 01

LONG CASES

Professor Champica Bodinayake

SHORT CASES

Dr V Sujanitha

08.30 AM - 09.00 AM

KEYNOTE ADDRESS

FRONT DOOR TO THE WARD:
DIFFERENTIATING ACUTE AND
EMERGENCY MEDICINE

Dr Aruna Maharaj

09.00 AM - 09.30 AM

MEET THE EXPERTS - 01

OSTEOPOROSIS UNCOVERED:
CHALLENGES IN DIAGNOSIS AND
TREATMENT

Professor Sarath Lekamwasam

09.30 AM - 10.45 AM

SYMPOSIUM 1 - BRIDGING THE GOLDEN HOUR AND BEYOND

STORMS IN THE LIVER: NAVIGATING
ACUTE ON CHRONIC LIVER FAILURE

Dr Channa Jayasekera

THE EVOLVING LANDSCAPE OF ACS
MANAGEMENT

Dr Upul Wickramarachchi

FROM SUBTLE SIGNS TO SAVING
LIVES: A PHYSICIAN'S GUIDE TO
EARLY DETECTION

Dr Ganaka Senaratne

10.45 AM - 11.15 AM

TEA

11.15 AM - 11.45 AM

PLENARY 1

WORDS THAT HEAL: EMPOWERING
PATIENTS AND PEERS THROUGH
EFFECTIVE COMMUNICATION

Professor Arosha Dissanayake

11.45 AM - 01.00 PM

SYMPOSIUM 2 - MULTIDISCIPLINARY APPROACH TO COMMON CLINICAL PROBLEMS

RECLAIMING BREATH: NEW LIFE INTO
COPD MANAGEMENT

Dr Amila Rathnapala

FROM SYMPTOM TO DIAGNOSIS: A
SYSTEMATIC APPROACH TO
HEADACHE EVALUATION

Professor Tashi Chang

DECODING BACKPAIN: A CLINICIAN'S
ROADMAP FROM ASSESSMENT TO
ACTION

Dr Duminda Munidasa

ACADEMIC PROGRAMME

01.00 PM - 02.00 PM

LUNCH

02.00 PM - 02.30 PM

MEET THE EXPERTS 2

**UNDERSTANDING HFPEF: NEW
INSIGHTS INTO A GROWING
CHALLENGE**

Dr Jithendra Bermacha

02.30 PM - 03.00 PM

PLENARY 2

**BEYOND OVARY:
UNDERSTANDING PCOS AS A
SYSTEMIC DISEASE**

Professor Chandrika Wijeratne

03.00 PM - 04.15 PM

SYMPOSIUM 3 – ENHANCING NCD CARE ACROSS THE CONTINUUM

**INDIVIDUALIZING GLYCEMIC
GOALS AND THERAPY IN TYPE 2
DIABETES**

Professor Thilak Weeraratne

**OBESITY – THE WEIGHT OF THE
EPIDEMIC**

Dr David Chascsa

**ADVANCING REPERFUSION
STRATEGIES IN STROKE – BEYOND
CONVENTIONAL WINDOW**

Dr Tamra Ranasinghe

04.15 PM - 04.45 PM

PLENARY 3

**STONES, BONES AND THE
METABOLIC SYNDROME:
ROLE OF THE INTERNIST**

Professor Virginia Hood

04.45 PM - 05.45 PM

HOW TO PASS MD – SESSION 2

**MANAGEMENT OF CHRONIC
DISEASES**

Dr Barana Millawithana

CLINICAL TRIALS

Professor Prasad Katulanda

ETHICS

Professor Shyamali
Abegunawardena

ACADEMIC PROGRAMME

16th November 2025

07.30 AM - 08.30 AM

HOW TO PASS MD - SESSION 03

COMMUNICATION

Professor Shamila De Silva

OBSERVED HISTORY TAKING

Professor Udaya Ralapanawa

08.30 AM - 09.30 AM

YOUNG INTERNISTS' LENS

**INTERACTIVE CASE BASED
DISCUSSION**

Professor Chamara Dalugama

Dr Pamuditha Madanayake

09.30 AM - 10.45 AM

SYMPOSIUM 4 - TOXINS AND BITES - FROM EXPOSURE TO RECOVERY

**CONTROVERSIES IN SNAKEBITE
MANAGEMENT: NAVIGATING THE
GREY AREAS**

Professor Anjana Silva

**CRISIS INTERVENTION: ACUTE
MANAGEMENT OF PSYCHOACTIVE
SUBSTANCE MISUSE**

Professor Indika Gawarammana

**BEYOND DETOX - INTEGRATING
ADDICTION MANAGEMENT TO
MEDICAL PRACTICE**

Dr Kapila Marambage

10.45 AM - 11.15 AM

TEA

11.15 AM - 11.45 AM

PLENARY 4

**TAILORED TO HEAL: NEW ERA OF
INDIVIDUALIZED MEDICINE**

Professor Chandani Wanigatunge

11.45 AM - 12.15 PM

MEET THE EXPERTS 3

**EVALUATION OF FOOD ALLERGIES:
FROM CLINICAL SUSPICION TO
CONFIRMED DIAGNOSIS**

Professor Neelika Malavige

12.15 PM - 01.30 PM

GLOBAL FORUM

UNMASKING MELIOIDOSIS

Dr Amit Saraf

NOVEL THERAPEUTICS IN DIABETES

Professor Ratnamani Gajurel

**AI IN HEALTHCARE - APPLICATIONS IN
THE SOUTH ASIAN CONTEXT**

Dr Shohael Arafat

01.30 PM - 02.30 PM

LUNCH

ACADEMIC PROGRAMME

02.30 PM - 03.45 PM

SYMPOSIUM 5 – DEFEATING INFECTIONS RESPONSIBLY

THE ROLE OF MICROBIOLOGICAL INVESTIGATIONS IN TARGETED THERAPY

Dr Mahen Kotalawala

PRESCRIBE WITH PURPOSE: THE PHYSICIAN'S ROLE IN ANTIMICROBIAL STEWARDSHIP

Professor Andrew Seaton

SEPSIS 2025 – EVOLVING INSIGHTS, EMERGING INTERVENTIONS

Dr Jithendra Barmecha

03.45 PM - 04.15 PM

VETERAN'S FILE

ANECDOTAL REFLECTIONS BY A VETERAN PHYSICIAN

Professor Kolitha Sellahewa

04.15 PM - 04.45 PM

SIMCON QUIZ

Dr Ushani Wariyapperuma

Dr Dilshan Perera

04.45 PM - 05.00 PM

SIMCON AWARDS/CONCLUDING REMARKS

SIMCON
2025 *Colombo*

ACADEMIC PROGRAMME

MASTERCLASS TRACKS

15th November 2025

TRACK 01

EXAMINE WITH CONFIDENCE

11.30 AM - 01.00 PM

STRUCTURED APPROACH TO LARGE JOINT EXAMINATION

Dr Kalum Deshapriya

NEUROLOGY AT THE BEDSIDE. ENHANCING CLINICAL SKILLS FOR BETTER OUTCOMES

Dr Darshana Sirisena

TRACK 02

PRESENT TO IMPRESS

02.00 PM - 03.30 PM

MASTERING THE ART OF SCIENTIFIC PRESENTATION

Professor Thashi Chang

TRACK 03

ADVANCING DIAGNOSTIC PRECISION

03.45 PM - 05.15 PM

ECG MASTERCLASS - TACKLING THE TOUGHEST TRACINGS

Dr Lalaj Ruchiranga

ADVANCED BLOOD GAS ANALYSIS - FROM PHYSIOLOGY TO PRACTICE

Dr Lasanda Gajaweera

16th November 2025

TRACK 04 CLINICAL PEARLS 01

ADVANCING DIAGNOSTIC PRECISION

08.00 AM - 09.30 AM

SMART TRIAGE - CLINICAL ALGORITHMS FOR CHEST PAIN, RULE - IN & RULE - OUT

Dr Aruna Maharaj

NEUROIMAGING IN STROKE 2025 - EVOLVING TOOLS FOR ACUTE CARE

Dr Tamra I Ranasinghe

EARLY RECOGNITION AND MANAGEMENT OF INFECTIONS IN THE ED

Professor Andrew Seaton

ACADEMIC PROGRAMME

TRACK 05

BEYOND MEDICATIONS: INTEGRATING NUTRITION & EXERCISE INTO CLINICAL CARE

09.45 AM - 11.15 AM

**PERSONALIZED NUTRITION
THERAPY: ENHANCING OUTCOMES
IN CHRONIC ILLNESS**

Dr Jayani Tennakoon

**EXERCISE AS A MEDICINE -
PRESCRIBING GUIDE TO INTERNISTS**

Dr Fariz Ahamed

TRACK 06 CLINICAL PEARLS 02

DECODING DIVERSE HEPATIC DISORDERS

11.30 AM - 01.00 PM

**UNRAVELING ALCOHOL & DRUG
INDUCED LIVER INJURY**

Dr Channa Jayasekera

**NOVEL HORIZONS IN NAFLD
MANAGEMENT**

Dr David M. H. Chascsa

**OPTIMISING DIABETES CARE IN
PATIENTS WITH LIVER DISEASE**

Professor Anuradha Dassanayake

TRACK 07

NAVIGATING THE PATH FROM ADVANCED TRAINEE TO SPECIALIST

02.00 PM - 03.30 PM

**PATHWAYS TO SUCCESS:
FROM PROFICIENCY EXAMS TO TIPS
FOR SUCCESSFULL OVERSEAS
TRAINING**

Dr Vihangi Fernando

Dr Nipun Ranaweera

**PREPARING FOR PRE-BOARD
CERTIFICATION ASSESMENT**

Professor J Indrakumar

PRE CONGRESS WORKSHOP 01 & 02

FACULTY



Dr. Vaikunthan Rajaratnam

FRCS (Ed), Dip Hand Surgery (Eur)
Senior Consultant at Khoo Teck Puat Hospital, Singapore
Program Director AI for Healthcare and ID for Healthcare Education

PRE CONGRESS WORKSHOP 03

FACULTY



Dr Krishantha Jayasekara

MBBS, MD, FRCP, FCCP
Specialist Physician in Internal Medicine
National Hospital Galle



Dr Jagath Pushpakumara

MBBS, MD (Col),
MRCP(UK), MRCP(London)
Post Grad Dip in Respiratory Medicine (UK)
Specialist Physician in Internal Medicine
Prof Senaka Bibile Memorial Hospital, Bibile



Dr Saliya Wijenayake

MBBS, MD (Anaesthesiology)
Special Training in Intensive Care
Consultant Anaesthetist
National Hospital Galle



Dr Neranjan Dissanayake

MBBS, MD, MRCP
Consultant Respiratory Physician
Teaching Hospital & District Chest Clinic,
Kalutara



Dr Gihan Piyasiri

MBBS, MD (Anaesthesiology)
Consultant Anaesthetist
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Dr Arosha Abeywickreme

MBBS (Ruhuna) MD (Colombo) MRCP (UK)
Consultant Physician,
National Hospital Galle

PRE CONGRESS WORKSHOP 04

FACULTY



Dr Pamuditha Madanayake

MBBS, MD, MRCP (UK)
Consultant Physician in Internal Medicine
National Hospital Galle



Dr Dilshan Perera

MBBS, MD
Senior Lecturer and Consultant Physician
Faculty of Medicine
General Sir John Kotelawala Defence University



Dr Dushyantha Goonewardena

MBBS, MD (Emergency Medicine), MRCP
Consultant Emergency Physician
National Hospital of Sri Lanka



Professor Nilanka Perera

MBBS, MD, MRCP (UK), FRCP (Lon), DPhil (Oxon)
Professor in Medicine
Faculty of Medical Sciences, University of Sri
Jayawardenapura



Professor Priyamali Jayasekera

MBBS, MD, MRCP, FRCP, FACPE, FACP, FCCP, MRCP
SCE Endocrinology & Diabetes
Professor in Clinical Medicine
General Sir John Kotelawala Defence University



Dr Sanjeewa Rajapaksha

MBBS, MD, MRCP, FSCAI
Clinical and Interventional Cardiologist,
Colombo North Teaching Hospital



Dr Madhuwanthi Hettiarachchi

MBBS, MD(Medicine-Colombo), FCCP,
FACP(USA), FRCP(Edinburgh)
Specialist in Internal Medicine
Toxicology Unit
Teaching Hospital Peradeniya



Professor Rajitha Abeysekera

MD, MRCP (UK), MRCP-Nephrology, MSc
(Biostatistics), SharE-RR Fellow, FSN
Professor in Nephrology & Consultant Nephrologist
Department of Medicine, Faculty of Medicine,
University of Peradeniya, Teaching Hospital Peradeniya



Dr Nuwan Premawardana

MBBS (Colombo), MD (Colombo)
Specialist in Internal Medicine
Teaching Hospital Anuradhapura



Dr Manjula Caldera

MBBS(Col), MD(Col), MRCP(Lond), MRCP Neuro (UK)
Consultant Neurologist
Teaching Hospital Anuradhapura



Dr Jagath Pushpakumara

MBBS, MD- Internal Medicine, MRCP (UK), MRCP (London)
Post Graduate Diploma in Respiratory Medicine (UK)
British Thoracic Society certified in thoracic ultrasonography (UK)
Specialist in Internal Medicine
Professor Senaka Bibile Memorial Hospital, Bibile



Dr Dilshan Priyankara

MBBS MD (SL) FRCP (UK) EDIC
Consultant in Critical Care Medicine
National Hospital of Sri Lanka

PRE CONGRESS WORKSHOP 05

FACULTY



Dr Krishantha Jayasekara

MBBS, MD, FRCP, FCCP
Specialist Physician in Internal Medicine
National Hospital Galle



Dr Ganaka Senaratne

MBBS MD MRCP(UK) FRCPL FACP(USA) FCCP(SL)MRCP
SCE Acute Medicine (UK)
Head of Department, of the Emergency Treatment Unit
National Hospital Galle



Dr Prasad Siriwardana

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Consultant Physician in Internal Medicine
Teaching Hospital Rathnapura



Professor Namal Wijesinghe

MBBS, MD (Med), FRCP (Lond), FRCP (Edin),
FRACP, FCCP, FCSANZ
Professor of Medicine, Faculty of Medicine,
General Sir John Kotelawala Defence University



Dr Jagath Pushpakumara

MBBS, MD- Internal Medicine, MRCP (UK), MRCP (London)
Post Graduate Diploma in Respiratory Medicine (UK)
British Thoracic Society certified in thoracic ultrasonography (UK)
Specialist in Internal Medicine
Professor Senaka Bibile Memorial Hospital, Bibile



Dr Arosha Abeywickreme

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Consultant Physician
National Hospital Galle



Dr Indika Boteju

MBBS, MD, FCCP
Consultant Physician in Internal Medicine
De Soysa Maternity Hospital for Women



Dr Sanka Vijayabandara

MBBS, MD
Specialist Physician in Internal Medicine
Emergency Treatment Unit
National Hospital Galle



Dr Chaminda Kottage

MBBS, MD
Consultant Physician in Internal
Medicine
National Hospital Galle



Professor Priyamali Jayasekera

MBBS, MD, MRCP, FRCP, FACPE, FACP, FCCP, MRCP
SCE Endocrinology & Diabetes
Professor in Clinical Medicine
General Sir John Kotelawala Defence University



Dr Kolitha Jayasundara

MBBS, MD (Medicine)
Specialist in Internal Medicine
Colombo North Teaching Hospital

PRE CONGRESS WORKSHOP 06

FACULTY



Dr Ganaka Senaratne

MBBS MD MRCP(UK) FRCPL FACP(USA) FCCP(SL)MRCP
SCE Acute Medicine (UK)
Head of Department, of the Emergency Treatment Unit
National Hospital Galle



Professor Saroj Jayasinghe

MBBS, MD(Col), MD(Bristol), MRCP(UK),
FRCP(Lond), PhD(Colombo), FCCP, FNASSL
Emeritus Professor of Medicine
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Dr Rohitha Gamlath

MBBS, MD
Specialist in Internal Medicine
National Hospital Kandy



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Professor Ranil Fernando

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University of Kelaniya



Dr Neranjan Dissanayake

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Consultant Respiratory Physician
Teaching Hospital & District Chest Clinic,
Kalutara



Professor Harshani Rajapakse

MBBS, MD Psych. PhD (Durham), FRCP (London),
FSLCPsych
Professor in Psychiatry, Faculty of Medicine,
University of Ruhuna



Professor Rifdy Mohideen

MBBS MD MRCP FRCP FCCP FRACP (Hon)
Emeritus Professor of Medicine
Faculty of Medicine
University of Ruhuna



Dr Duminda Samarasinghe

MBBS, DCH, MD, FACC
Consultant Paediatric Cardiologist,
Lady Ridgeway Hospital for Children, Colombo



Professor Arosha Dissanayake

MBBS MD FRCP FCCP
Professor in Medicine
Faculty of Medicine, University of Ruhuna



Professor T Varagunam

Professor Varagunam, who hailed from Batticaloa, had his secondary education at Royal College, Colombo where he won many prizes in science. He passed the MBBS in Colombo with Honours and soon afterwards went to UK where he obtained MRCP from Royal College of Physicians, London. He first worked in the Department of Health Services in the Colombo General Hospital as Resident Physician, from where he switched to his academic career by joining the then new medical school in Peradeniya. In addition to his academic work, he with his late friends Dr K E De S Karunaratne and Mr Rudra Rasaretnam, started the Kandy Society of Medicine, to promote academic activities and scientific research in the field of health. While he was at Peradeniya Medical School, he helped to develop the new Department of Medicine along with the late Professor Macan Markar particularly in promoting its research activities. After he became Professor of Medicine, he spent his sabbatical year at the University of Illinois in Chicago USA, earning a Master's degree in Medical Education. On his return, he along with the late Professor Bible started the Medical Education Unit which subsequently became the WHO Regional Centre for training medical teachers. Dr Varagunam's research covered a wide field including medical education, where he was the first in the world to demonstrate empirically the value of making students aware of learning objectives.

His expertise in research in medical education and internal medicine was widely known to the World Health Organization. They invited him to be in charge of research training in the WHO's new programme for research in tropical diseases which was based in Geneva, Switzerland. Having worked in Switzerland for a total of 10 years, he returned to Sri Lanka where he was made Chancellor of the Eastern University for another decade. He was based in Kandy from where he travelled to UK every year to be with his grandchildren.

When in Kandy, he continued with his interest in research by chairing the Kandy Hospital's Research Ethical Review Committee. He passed away on 4th of February 2018, coincidentally on an Independence Day, which is remarkable since he was a doyen in the field of internal medicine in the post-independent Sri Lanka.

The Sri Lankan Diabetes Paradox: A Looming Public Health Crisis



Professor H.M.M. Herath

MBBS, MD, MRCP, FRCP, FRACP
Specialist in Internal Medicine
Professor in Medicine at the Faculty of Medicine
University of Ruhuna

Professor H. M. M. Herath is an accomplished academic, clinician and researcher, currently serving as Professor in Medicine at the Faculty of Medicine, University of Ruhuna, Galle, and Honorary Consultant Physician at the National Hospital, Karapitiya. He also contributes internationally as Consultant Physician in Internal Medicine at Southwest Health Care, Victoria, Australia, and Honorary Senior Lecturer at Deakin University, Australia.

A graduate of the University of Ruhuna with First Class Honours and distinctions in nine subjects, he ranked second in the national merit list and received seven gold medals, including the Sir Ernest de Silva Gold Medal for the Most Outstanding Medical Graduate. He obtained his MD from the University of Colombo, MRCP (London), FRCP (Edinburgh), FCCP (Sri Lanka), and FRACP (Australia).

Prof. Herath has held several leadership roles, including Secretary of the Sri Lanka College of Internal Medicine (SLCIM) and the Galle Medical Association, President of the Ruhuna Faculty Medical Teachers' Association, and Head of Medicine and Pharmacology at the Faculty of Medicine, Karapitiya. He has authored three medical books, published over 35 papers in peer-reviewed journals, presented more than 60 abstracts, and delivered two prestigious orations on diabetes and cardiovascular risk.

He currently serves as Professor in Medicine, Faculty of Medicine, University of Ruhuna. His research interest includes non-communicable diseases, especially diabetes mellitus, and cardiovascular risk. He is an active researcher with over 30 publications in peer-reviewed journals and over 60 abstract presentations in local and international conferences.

Sri Lanka is a global public health success story and has achieved 'first-world' health status in several key metrics. Its life expectancy is high, and its maternal and child mortality rates rival those of developed nations. However, a profound disparity in outcome quality emerges when examining Non-Communicable Diseases (NCDs), especially diabetes mellitus (DM), which sharply contrasts with the nation's overall health achievements. Sri Lanka currently confronts a rapidly escalating diabetes prevalence, persistently suboptimal metabolic control among diagnosed individuals, and an accelerated incidence of costly and debilitating micro and macrovascular complications. This unaddressed dynamic represents a critical public health crisis, threatening to erode decades of progress in national health. The coexistence of a renowned, high-performing healthcare system with these suboptimal, diabetes outcomes is the central contradiction defining "The Sri Lankan Diabetes Paradox".

During this oration, following 4 important questions are discussed to explore this topic in detail

- Why is Sri Lanka considered one of the main epicentres for diabetes, & what do current prevalence trends tell us?
- Why does the majority have suboptimal control?
- Beyond prevalence, what are the key challenges in community-level diagnosis?
- The Path Forward: What policy shifts are urgently required to move from crisis management to sustained national control?

The reported (IDF) overall diabetes prevalence in Sri Lanka, based on modelling data, was 10.3%; however, determining the true prevalence and magnitude of the disease was

ORATION

critically important. Our first study directly addressed that public health gap by aiming to produce the robust, nationally representative estimates of diabetes and pre-diabetes prevalence in Sri Lankan adults. We analysed data from 6,661 adults participating in the inaugural 2018/2019 wave of the Sri Lanka Health and Ageing Study (SLHAS). We used fasting plasma glucose (FPG), and oral glucose tolerance test (OGTT) to ensure maximum accuracy and comparability. The results were striking: The overall prevalence of diabetes was found to be a staggering 21.8%. The prevalence of pre-diabetes was equally concerning at 30.5%. Combined, over half of the Sri Lankan adult population (52%) is living with either diabetes or pre-diabetes. Critically, the prevalence of both diabetes and pre-diabetes remained remarkably high even in individuals classified as having a normal body weight, reaching 21% and 29% respectively. This study uncovered that Sri Lanka has a very high diabetes prevalence, significantly surpassing previous estimates (around 8%–15%).

Accurate determination of the DM epidemic's magnitude necessitates the use of the most appropriate diagnostic assays. Prior research from our group highlighted the limitations of standard testing protocols at the community level. Specially, one of our studies found that the OGTT was significantly superior to FPG, diagnosing three times more patients with DM. A separate community-based study further elucidated the differential performance of three commonly used diagnostic tests: FPG, OGTT, and HbA1c. This study revealed significant variability in the DM prevalence based on the assay used: prevalence was only 12% with FPG, rising marginally to 16% with the OGTT. Most importantly, the prevalence estimate soared to 27% when HbA1c was used. These findings strongly indicate that FPG alone is insufficient for effective DM screening and fundamentally fails to capture the true burden of the disease at the community level in Sri Lanka.

In our third study, utilizing the same data, we assessed the diabetes care cascade framework to evaluate the current national response to this crisis. We evaluated the diabetes care cascade, estimating levels of (i) prevalence, (ii) testing, (iii) diagnosis, (iv) awareness, (v) treatment, (vi) medication adherence, and (vii) control. Performance was benchmarked against other countries. Among patients with diabetes, 86.0% had been tested, 62.3% been diagnosed with DM, 58.6% aware, 44.7% treated, and 20.6% (HbA1c < 8.0%) and 12.4% (HbA1c < 7.0%) controlled. Older adults and those with hypertension achieved higher rates at all steps, while disparities by gender, education, location, and body mass index were minimal. Concentration indices confirmed pro-rich inequity from testing to treatment but revealed no Sri Lanka outperforms most low- and middle-income countries (LMICs) in testing, diagnosis, treatment, and disparities in coverage, possibly reflecting underlying health system strengths. But only one in five Sri Lankans with diabetes achieve control, with significant losses post-treatment. This study indicates a large management gap, with only 12% of patients achieving optimal control. Therefore, there should be greater focus on understanding the reasons for poor control and improving treatment outcomes.

In our next study, we sought to address the underexplored influence of patient adherence on optimal metabolic control, specifically by evaluating how self-reported dietary and drug compliance affect the attainment of combined optimal glucose and lipid control. This single-centre study revealed that only 30% achieved optimal glucose control, 62% achieved optimal LDL control, and just 23% achieved both targets. This study further revealed a significant association between self-reported high dietary compliance and the achievement of both optimal parameters. In conclusion, these findings underscore the importance of dietary and drug compliance adherence as a critical factor in achieving successful treatment outcomes.

Since poor compliance is often associated with low Knowledge, Attitude, and Practice (KAP), we assessed public KAP levels to identify behavioural and perceptual barriers to diabetes management and prevention. As there was previously no validated KAP questionnaire available, we validated a new questionnaire specifically to assess KAP among the Sri Lankan public. The study revealed that the majority (75%) had either moderate or above moderate knowledge on DM, and the level of education was positively associated with knowledge. Unlike knowledge, the attitude towards diabetes was poor in the majority (90%), and the level of education had no significant effect on attitude. With regards to practices, more than half of study subjects had never had their blood sugar checked, about 65% used to consume refined sugar liberally, and a large majority (80%) had no regular exercise activity. This study revealed that the majority had higher knowledge of DM, but their attitude and practices toward diabetes were poor. It also showed that higher knowledge of diabetes did not translate into good practices. Therefore, more emphasis should be given to addressing the issue of poor attitude and practices toward diabetes mellitus among the general public in Sri Lanka.

In summary, Sri Lanka faces a severe DM epidemic, which defines the "Diabetes Paradox": high prevalence and poor outcomes despite a well-performing health system and high public knowledge on DM. The core action requires a fundamental policy shift. We must redefine the screening tool to ensure accurate diagnosis of most patients with DM and, most critically, focus on preventive actions specifically targeting attitude and practices at the community level. Primary Care must be empowered to take preventive actions and make adherence and dietary counselling mandatory, recognizing that: "Our future lies in closing the gap between the head and the hand."

KEYNOTE ADDRESS

Front Door to the Ward: Differentiating Acute and Emergency Medicine



Dr Aruna Camille Sharma Maharaj

MBBS, MRCP (Glasgow) CCT in Acute Internal Medicine, FRCP (Glasgow), MBA
Consultant Acute Physician
Shrewsbury & Telford Hospital NHS Trust

Dr. Aruna Camille Sharma Maharaj is an accomplished Acute Physician with extensive leadership experience in clinical transformation and acute pathway redesign. Holding an MBA in Healthcare (Nottingham, 2018) and FRCP (Glasgow, 2015), she combines medical expertise with strategic and managerial insight. Since 2012, she has served as a Consultant in Acute Medicine and currently holds senior roles including Divisional Medical Lead for Performance, Medical Lead for Financial Recovery, and Associate Clinical Information Officer at Shrewsbury and Telford Hospital NHS Trust. She previously directed Acute Internal Medicine (2020–2024) and contributes nationally as a Clinical Lead for the RCP Invited Reviews Team and faculty member for Quality Improvement and Leadership teaching. An RCP examiner and ALS Instructor, she is also pursuing a PGCert in Medical Education. Dr. Maharaj is recognized for collaborative, inspirational leadership focused on governance, change management, and workforce wellbeing. She believes in innovative, patient-centred solutions to complex healthcare challenges and has a track record of driving operational excellence through strategic vision and compassionate engagement.

I aim to develop a discussion around Acute Medicine and Emergency Medicine, I will walk through history of General Internal Medicine (GIM) to understand why Acute Internal Medicine (AIM) emerged. General Internal Medicine (GIM) emerged in the late 19th and early 20th centuries. GIM aimed at providing holistic care for adults and was the basis for all other internal medicine subspecialties. After World War II, specialisation of physicians was encouraged which gradually undermined care of the medical patient presenting acutely to hospital. In the UK, safety concerns in acute medical care led to the creation of Acute Medical Units (AMUs) and soon emerged need for physicians to manage these areas. AMU's are responsible for the care of patients during the first 24–72 hours. It was thought it would provide the appropriate care by the right person in the right setting thereby improving patient flow and minimising admissions. AIM remains strongest in the UK, Ireland, and parts of Europe. Hospitalists in North America. In Sri Lanka, GIM physicians largely perform AIM functions. The histories of GIM and AIM are intertwined: GIM provides the breadth and continuity, while AIM arose as a system response to acute pressures. The ED acts as a portal of entire for acute medical care. Today, all are viewed as complementary, forming the backbone of modern acute medical care.

MEET THE EXPERTS – 1

Osteoporosis Uncovered: Challenges in Diagnosis and Treatment



Professor Sarath Lekamwasam

MBBS (Peradeniya), MD (Colombo), FRCP (London), PhD (Erasmus)
Professor Emiratus
University of Ruhuna

Professor Lekamwasam is a distinguished physician and medical academic currently serving as a Medical Advisor and Physician at Asiri Hospital, Galle. He previously held several senior leadership positions including Chair Professor of Medicine and Dean of the Faculty of Medicine at the University of Ruhuna, and Chairman of the Board of Study in Medicine at the Postgraduate Institute of Medicine (PGIM). A past President of the Ceylon College of Physicians, Sri Lankan Geriatric Association, and Osteoporosis Sri Lanka, he has played a pivotal role in advancing internal medicine, geriatric care, and bone health in Sri Lanka. Internationally, he serves as a Scientific Advisor to the International Osteoporosis Foundation (IOF) and Board Member of the Asia Pacific Osteoporosis Society (APOS). Throughout his career, Prof Lekamwasam has demonstrated a strong commitment to clinical excellence, medical education, and the development of evidence-based healthcare strategies, earning wide respect as a leader, educator, and advocate for improving medical standards and patient outcomes.

Many advances have been made in the management of osteoporosis and fragility fracture during the recent years. Those immediately relevant to clinicians include AI driven algorithms for opportunistic screening, newer therapies with improved anti-fracture efficacy, sequential treatment modalities and personalized therapy. While multidisciplinary care pathways have improved the outcome of hip fracture patients, fracture liaison services (FLS) have enhanced the long-term care of post-fracture patients.

AI driven tools have shown high sensitivity and specificity in detecting spinal fractures in images performed for other clinical reasons. As a substantial proportion of spinal fractures are asymptomatic and undetected, early identification and treatment of these fractures would change the clinical trajectory of these patients by preventing subsequent fractures. Although bisphosphonates still remain the most preferred medications, other medications such as denosumab, romozosumab and abaloparatide are considered the first-line therapy when rapid increase in BMD is desired due to imminent risk of subsequent fracture.

It is widely accepted that multidisciplinary team approach helps optimizing care of patients following hip fracture and prepare them for early surgery. Perioperative pain management and early nutritional interventions are considered mandatory in the effective management of post hip fracture patients.

SYMPOSIUM – 1

Storms in the Liver: Navigating Acute on Chronic Liver Failure



Channa R. Jayasekera

MD, MSc
Consultant Transplant Hepatologist
Mayo Clinic, Phoenix, Arizona

Dr. Channa Jayasekera is a Consultant Transplant Hepatologist at Mayo Clinic Arizona. He received his undergraduate education at Cornell University, medical education at Duke University, residency in Internal Medicine and fellowship in Gastroenterology at Stanford University, and fellowship in Transplant Hepatology at California Pacific Medical Center. Dr. Jayasekera was an Assistant Professor in the Liver Transplant Program Stanford University and Clinical Chief of Hepatology at Kaiser Permanente Washington before joining Mayo Clinic. Dr. Jayasekera's interests are in liver transplant outcomes, cholestatic liver diseases (primary sclerosing cholangitis, ischemic cholangiopathy, and primary biliary cholangitis), hepatocellular carcinoma, and improving access to care. He is the recipient of several research grants, serves on the Mayo Clinic Arizona Research Operations Management Team, and has lectured nationally and internationally.

The lecture will outline the pathophysiology, clinical presentation, classification, and management of acute on chronic liver failure (ACLF), an entity that is distinct from acute liver failure and decompensated cirrhosis. There will be an emphasis on the importance of early recognition of this high-mortality manifestation of chronic liver disease, and a review of the literature on targeted interventions, tailored to the Sri Lankan clinical practice context.

Evolving Landscape of ACS Management



Dr Upul Wickramarachchi

MBBS (Sri Lanka), MRCP (UK), MD (Research, UEA, UK), and CCT (Cardiology, UK)
Consultant Interventional Cardiologist
Lanka Hospitals, Colombo

Dr. Upul Wickramarachchi is a Consultant Interventional Cardiologist with dual specialist registration in the UK and Sri Lanka. Currently based at Lanka Hospitals, Colombo, he has previously served at Norfolk and Norwich University Hospital and James Paget University Hospital in the UK. His key expertise includes complex coronary interventions, drug-coated balloon (DCB) angioplasty, intravascular imaging (IVUS, OCT), and coronary physiology (FFR, iFR). Internationally recognized for pioneering work in stentless angioplasty, he has contributed as invited faculty and live case operator at major cardiology conferences, including TCT USA, Singapore Live, APSC and BIT. His MD research on DCB angioplasty led to many publications and registry studies, contributing to expand this novel technique worldwide. A council member of the Sri Lanka College of Cardiology and a leading advocate for innovation and education, Dr. Wickramarachchi combines academic excellence, clinical leadership, and dedication to advancing patient-centred interventional cardiology.

Over the past two decades, the management of Acute Coronary Syndrome (ACS) has undergone a remarkable transformation driven by advances in diagnostics, pharmacotherapy, revascularisation techniques, and preventive strategies. This talk will explore how these evolving aspects have reshaped patient outcomes and the contemporary approach to ACS care. There will be a focus on rapid diagnosis and risk stratification. The talk will also reflect on the advances in antiplatelet and antithrombotic therapy including P2Y12 inhibitors (ticagrelor, prasugrel) and tailored anticoagulation strategies using parenteral and oral agents. Revascularisation remains central to ACS care, but the timing, approach, and extent of intervention have evolved. The trend toward early invasive strategies in NSTEMI, the expanding role of radial access, and the use of physiology- and imaging-guided PCI have improved both procedural safety and long-term outcomes. In multivessel disease, the choice between culprit-only versus complete revascularisation, guided by trials like COMPLETE and FLOWER-MI, continues to refine decision-making algorithms. Finally, the focus will be on secondary prevention and long-term management. The emphasis has now shifted from acute stabilization to sustained cardiovascular protection. Understanding this evolving landscape ensures clinicians remain at the forefront of delivering timely, effective, and holistic care to patients with ACS.

SYMPOSIUM – 1

From Subtle Signs to Saving Lives: A Physician's Guide to Early Detection of Critically Ill Patients



Dr Ganaka Senaratne

MBBS MD MRCP(UK) FRCPL FACP(USA) FCCP(SL)MRCP SCE Acute Medicine (UK)
Head of Department, of the Emergency Treatment Unit
National Hospital Galle

Dr. Ganaka Senaratne is a experienced Consultant Physician and Specialist in Internal Medicine. He currently serves as the Head of the Emergency Treatment Unit at the Teaching Hospital, Karapitiya, Sri Lanka. His professional interests include Acute Medicine, postgraduate medical education, cardiopulmonary resuscitation, humane care, communication, and ethics. A dedicated educator, he is a visiting lecturer in Pharmacology at the Faculty of Medicine, University of Ruhuna, and a Full Instructor in Advanced Life Support with the European Resuscitation Council. Dr. Senaratne also contributes nationally through the Ministry of Health's Advisory Committee on Resuscitation, the National Simulation Centre, and the Dengue Death Review Committee. He served as President of the Sri Lanka College of Internal Medicine (2022), is the founder and Chair of its Humane Care Expert Committee, Course Director of Point-of-Care Sonography in Internal Medicine (PCSIM), and the President-Elect of the Galle Medical Association.

Medical emergency is a status where the physiology is disturbed, which can progress towards cardiorespiratory arrest and death. Even though the disturbance of physiology is a result of a pathological process, stabilizing the physiology takes the precedence over understanding and treating the pathology to prevent eminent cardiorespiratory arrest and death. This progression happens so fast like we travel in a highway therefore we need to take quick actions to stabilize the physiology. In order to do that physiological abnormalities have to be picked up early. Longer you proceed in the highway it will be harder to come back the same distance. Another way of saving lives is catching the dangerous pathologies which can disturb the physiology in no time, which are called time critical illnesses. Commencement of a dangerous pathology is like a status where the patient is at the entrance to the said highway. If the physician can identify such and anticipate the physiological disturbance which is due, patients' lives can be saved effectively. It's like we prevent the patient being entering to the said highway at the entrance. Physicians need to understand the interplay between physiology and pathology which is well evident in Emergency set up. This understanding is the key to achieve the vision of "saving lives" at any acute care facility. In this presentation I will be discussing above concepts

PLENARY – 1

Words that Heal: Empowering Patients and Peers Through Effective Communication



Professor Arosha Dissanayake

MBBS MD FRCP FCCP
Professor in Medicine
Faculty of Medicine, University of Ruhuna

Professor Arosha Dissanayake is a professor in medicine and a specialist physician. He is a past president of both the Ceylon College of Physicians in 2022 and Galle Medical Association in 2019. He is the regional international advisor for the Royal College of Physicians, UK. He is the International Editor of “Clinical Medicine”, the journal of the Royal College of Physicians, UK. His clinical and research interests include diabetes, tropical medicine and medical humanities. He delivered the Prof T Varaganam Oration of the Sri Lanka College of Internal Medicine in 2023. His interests beyond medicine include literature, music and philosophy. He is an associate member of the Royal School of Music and co-founded the Southern Symphonia, a musical ensemble which performs at medical concerts as well as conducts music for healing programmes. He is also a past finalist of the Chartered Institute of Management Accountants. During his undergraduate days, he worked as an investigative journalist for the Sunday Times newspaper writing on the civil war and the political landscape. Presently he promotes “compassionate leadership” within the medical profession.

Medicine is an applied science. It is built upon a foundation of the natural sciences such as biology, chemistry, physics and even mathematics. A doctor needs to acquire an extensive knowledge base which is expanding exponentially as new research unfolds. A doctor is expected to develop skills to critically analyse patient problems and carry out therapeutic interventions. In the practice of such precise science, in a world where robots are increasingly assigned medical skilled tasks, what is the place for communication skills for a doctor? Is merely writing an evidence based prescription or carrying out a surgical procedure with minimal invasion not sufficient? Can communication with patients, carers and peers add anything of value to the process?

I dare to suggest that the thought that the practice of medicine is a precise science is merely an illusion. More often than not even the most knowledgeable and skilled doctor faces uncertainties as our understanding is limited. Patient behaviour is also more often than not unpredictable. Hence a successful outcome from the doctor-patient encounter depends on how well they relate to each other, how much they trust each other and how much they empathize with each other.

Medicine is no longer a one man enterprise but a venture of a team of highly skilled individuals. Teams are hierarchical and different knowledge, skill and experience levels are possessed by individual members. Respectful, friendly and precise communication with peers not only helps to minimize errors but to provide best patient care and minimize adverse impacts of increasingly stressful environments in which medical teams operate.

The bedrock for the journey together for the patient and doctor as well as medical professionals within a team is empathetic communication. This remains perhaps the only way to pacify the vagaries of medical science, the human body and human behaviour.

SYMPOSIUM – 2

Breathing New Life into COPD Management



Dr Amila Rathnapala

MBBS, MD, MRCP, Specialty Certificate in Respiratory Medicine
Consultant Respiratory Physician
National Hospital Galle

Dr. Amila Rathnapala is a Consultant Respiratory Physician with extensive experience in respiratory medicine and interstitial lung disease. From 2022 to 2024, he served as Consultant Respiratory Physician at Glangwili General Hospital, Carmarthen, UK, and completed a Lung Transplant Fellowship at the Royal Brompton and Harefield Hospitals in London. Between 2018 and 2023, he worked as a Consultant in Respiratory Medicine with a special interest in interstitial lung disease at the Teaching Hospitals of Anuradhapura, Kurunegala, and the National Hospital, Kandy. Earlier, he trained as a Clinical Fellow in Interstitial Lung Disease at Oxford University Hospitals, UK. Dr Rathnapala holds an MD in Medicine from the University of Colombo, a Specialty Certificate and MRCP from the Royal Colleges of Physicians (UK), and a European Diploma in Respiratory Medicine (HERMES). He is also a recipient of several research and training awards, including recognition from the Oxford University Hospitals NHS Trust and the British Thoracic Society.

Chronic Obstructive Pulmonary Disease (COPD) continues to be a leading cause of morbidity and mortality worldwide, placing an immense burden on patients, families, and healthcare systems. Traditional approaches have focused on symptomatic relief, yet recent advances in science, technology, and healthcare delivery are reshaping how we understand and manage this disease.

This talk, Breathing New Life into COPD Management, explores innovative strategies aimed at improving outcomes and quality of life for individuals living with COPD. We will review the evolving role of early diagnosis, emphasizing the importance of screening high-risk populations and utilizing spirometry more effectively. Attention will also be given to novel pharmacological therapies, including dual and triple inhaler regimens, that go beyond symptom control to reduce exacerbations and disease progression.

Equally critical are non-pharmacological interventions—pulmonary rehabilitation, structured exercise programs, and nutritional support—that empower patients to reclaim independence. The integration of digital health tools, from remote monitoring to mobile applications, is creating opportunities for proactive and personalized care. Furthermore, we will discuss the importance of multidisciplinary collaboration, involving respiratory physicians, primary care providers, physiotherapists, and nurses, in delivering comprehensive COPD management.

Finally, this talk will highlight patient-centered approaches that place education, self-management, and shared decision-making at the heart of treatment. By aligning clinical innovation with patient empowerment, we can move toward a future where COPD care is not just about prolonging life, but about enhancing its quality.

A Systematic Approach to Headache Evaluation



Professor Thashi Chang

MBBS, MD, MRCP(UK), MRCP(UK)(Neurol), DPhil(Oxon), FCCP, FRCP(Lond)
Senior Professor in Neurology
University of Colombo, Sri Lanka

Professor Chang is a Senior Professor in Neurology in the Department of Clinical Medicine at the Faculty of Medicine of the University of Colombo and an honorary Consultant Neurologist in the Professorial Unit in Medicine at the National Hospital of Sri Lanka. He graduated from the University of Colombo with first class honours. He is a Commonwealth Scholar and obtained his DPhil in Clinical Neurology from the University of Oxford, United Kingdom. He was the President of the Association of Sri Lankan Neurologists from 2019 to 2020.

Headache is among the most frequent symptoms presenting to clinicians, yet its evaluation can be challenging due to its wide-ranging causes. This presentation offers a structured, symptom-based approach to the assessment of headache disorders, aimed at improving diagnostic accuracy and guiding appropriate management. This presentation outlines a systematic approach to the evaluation of headache disorders, enabling clinicians to differentiate between primary and secondary headache disorders and identify medically urgent causes. Through illustrative cases and practical insights, the talk highlights how a methodical clinical approach can help avoid misdiagnosis, unnecessary investigations, and delayed interventions for potentially life-threatening conditions.

This overview is designed to equip clinicians with a clear framework for navigating headache presentations in diverse clinical settings.

SYMPOSIUM – 2

Decoding Back Pain: A Clinician's Roadmap for Assessment & Treatment



Dr Duminda Munidasa

MBBS, MD, FRCP

Consultant in Rheumatology and Rehabilitation
Rheumatology and Rehabilitation Hospital, Ragama

Dr Duminda Munidasa is a Board-Certified Specialist in Rheumatology and Rehabilitation, accredited by the Postgraduate Institute of Medicine, University of Colombo, in 2002. He currently serves as a Consultant in Rheumatology and Rehabilitation at the Rheumatology and Rehabilitation Hospital, Ragama. A respected clinician and academic, Dr. Munidasa plays an active role in postgraduate and undergraduate medical education as a trainer and examiner for senior registrars, registrars, and medical students. He is a Board Member of the Postgraduate Institute of Medicine, contributing to the Board of Study in Medicine and the Interim Specialty Board for Rehabilitation Medicine, and has previously served as Chairperson of the Specialty Board for Rheumatology and Rehabilitation. Dr. Munidasa has also held key leadership positions as Past President of the Ceylon College of Physicians and the College of Specialists in Rheumatology and Rehabilitation. Through his extensive clinical expertise, academic mentorship, and commitment to professional development, he has made a significant contribution to the advancement of rheumatology and rehabilitation medicine in Sri Lanka.

Back pain affects 65–80% of the global population at some point in life and is the fourth leading cause of disability-adjusted life years (DALYs) worldwide. While 90% of cases are mechanical, early identification of non-mechanical causes is critical. Clinical assessment by history and physical examination are the cornerstones of diagnosis. Early imaging or investigations are reserved for cases with red flag signs (e.g., Cauda Equina Syndrome), suspected medical or systemic causes and elderly patients with new-onset symptoms. In uncomplicated mechanical back pain, investigations are deferred unless symptoms persist beyond 4–6 weeks of treatment with analgesics, physical therapy and activity modification. It is important to emphasize on active recovery, avoid reinforcing illness behaviour or recommending prolonged bed rest. Non-responders should be evaluated based on pain distribution: as localized low back pain, radiating pain below the knee (sciatica), anterior thigh pain and posterior thigh pain. Treatment modalities for mechanical back pain include pharmacotherapy, core muscle strengthening exercises, behavioural interventions and orthotic support aimed at biomechanical correction, reducing muscle spasms to improve flexibility and by enhancing and maintaining muscle strength for secondary prevention.

MEET THE EXPERTS – 2

Understanding HFpEF: New Insights into a Growing Challenge



Jitendra Barmecha

MD, MPH, MACP
Associate Professor of Clinical Medicine
Associate Professor of Clinical Medicine
CUNY School of Medicine, New York

Dr. Jitendra Barmecha, a graduate of Gauhati Medical College, India (circa 1992), began his clinical and healthcare leadership career at SBH Health System (SBHHS), Bronx NY as Chief Medical Resident after completing three years in the Internal Medicine Residency Program.

Following his chief medical residency, he earned his MPH degree in Health Management and Policy at New York Medical College, while continuing to provide patient care services as faculty in the Department of Medicine (Hospitalist Division) at SBHHS. He is the Associate Professor of Clinical Medicine at CUNY School of Medicine (CSOM) and Adjunct Associate Professor of Medicine at New York College of Osteopathic Medicine (NYCOM).

Dr. Barmecha served as inaugural chair of the Digital and Telehealth Advisory Board at the American College of Physicians and past member of Medical Informatics Committee. He is the Past President and Governor of the NY State Chapter and Master of the American College of Physicians, Senior Fellow of the Society of Hospital Medicine and Fellow of European Congress of Internal Medicine.

As a Chief Information and Digital Strategy officer, he is involved in SBHHS digital transformation journey by upgrading the health systems technologies (Epic EHR and Oracle ERP), telecom infrastructure, Information Security, Augmented Intelligence governance; ensuring clinical information systems and patient monitoring devices are well integrated into the electronic health records along with data innovations and patient engagement solutions.

Heart failure with preserved ejection fraction (HFpEF) is rising worldwide, comprising half of heart-failure presentations, especially in older adults with obesity, hypertension, diabetes, or atrial fibrillation. HFpEF is defined by symptoms and signs, left-ventricular ejection fraction $\geq 50\%$, and objective evidence of elevated filling pressures or diastolic dysfunction on echocardiography or natriuretic peptides. Diagnosis requires exclusion of mimickers. We will review the role of non cardiac structures in the pathogenesis. Beyond diuretics and risk-factor control we will discuss the novel therapies that are on the horizon for HFpEF.

Beyond the Ovary: Understanding PCOS as a Systemic Disease



Professor Chandrika Wijeratne

DM, MD, MBBS, FRCP
Emeritus Professor
Faculty of Medicine, University of Colombo

Professor Chandrika Wijeratne is an Emeritus Professor of the Faculty of Medicine, University of Colombo, and former Vice Chancellor of the University of Colombo. She has made outstanding contributions to clinical medicine, medical education, and health leadership in Sri Lanka. A Past President of the Sri Lanka Medical Association, the Ceylon College of Physicians, and the Endocrine Society of Sri Lanka, her clinical focus has centred on women's health, with research interests in polycystic ovary syndrome (PCOS) and hyperglycaemia in pregnancy. She continues to champion self-directed learning among Sri Lankan medical students and advocates for the prevention and control of chronic non-communicable diseases and women's health in Sri Lanka and the South Asian region. Her work also emphasises the importance of multi-sectoral coordination in achieving the United Nations Sustainable Development Goals (UN SDGs) for Sri Lanka.

Polycystic ovary syndrome (PCOS) is now recognized as a multisystem condition rather than a disorder confined to the ovary. Affecting approximately 10% of women in their reproductive years, it represents a diverse interplay of genetic susceptibility, hormonal imbalance, and environmental influences. While characterized primarily by hyperandrogenism, anovulation, and polycystic ovarian morphology, accumulating evidence shows that its impact extends across multiple physiological systems. Insulin resistance, persistent low-grade inflammation, lipid abnormalities, and vascular dysfunction collectively heighten the risk of metabolic syndrome, type 2 diabetes, hypertension, and cardiovascular disease. Psychological comorbidities such as anxiety, depression, and reduced well-being further compound its burden.

As women age, reproductive manifestations often wane, yet metabolic and cardiovascular risks remain. Viewing PCOS through a systemic lens emphasizes the need for coordinated management that integrates reproductive, metabolic, and psychological care. This approach refocuses clinical attention from symptom control to long-term health preservation and personalized therapy. Future longitudinal studies are essential to clarify phenotype-specific trajectories and uncover modifiable biological pathways linking ovarian and systemic features of PCOS.

SYMPOSIUM – 3

Individualizing Targets and Therapy for Patients with Type 2 Diabetes – One Size Doesn't Fit All



Professor TP Weeraratna

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Dean, Faculty of Medicine
University of Ruhuna

Professor T. P. Weeraratna is the Dean and Senior Professor of Medicine at the Faculty of Medicine, University of Ruhuna, and serves as a Consultant Physician at the National Hospital, Galle, Sri Lanka. A distinguished clinician and academic, he was the Past President of the Sri Lanka College of Internal Medicine in 2020. Professor Weeraratna has delivered five orations and published over fifty research papers in national and international journals. He is also the author and co-author of five books on medical emergencies, therapeutics, and clinical medicine. His primary research interests focus on type 2 diabetes and cardiovascular risk factors, with a strong commitment to advancing clinical care and academic excellence in internal medicine.

Type 2 diabetes mellitus (T2DM) represents a heterogeneous spectrum rather than a single disease entity—marked by wide variation in insulin resistance, β -cell function, comorbidity burden, and treatment risk. Rigid, uniform glycaemic targets risk both overtreatment and harm. This presentation elaborates contemporary evidence and guideline-based frameworks to individualize glycaemic targets and therapy, integrating emerging precision-medicine insights.

Drawing from recent ADA/EASD, AACE, and KDIGO consensus reports alongside meta-analyses of landmark RCTs, the presentation contrasts traditional HbA1c-based assessment with continuous glucose monitoring (CGM)–

derived metrics such as Time-in-Range (TIR), Time-Below-Range (TBR), and variability indices—highlighting their complementary roles in achieving safe and durable control. It introduces a pragmatic risk-stratification model combining age, comorbidities (ASCVD, CKD, HF), hypoglycaemia risk, and patient preferences to set individualized HbA1c/TIR goals and guide therapy sequencing.

Evidence summaries underscore the cardiorenal and metabolic benefits of SGLT2 inhibitors and GLP-1 receptor agonists, while acknowledging well established roles for metformin, TZDs, DPP-4 inhibitors, and insulin. Practical algorithms for CKD-, ASCVD-, and obesity-centric phenotypes are presented, emphasizing organ protection, hypoglycaemia mitigation, and cost-access balance.

Future directions include genotype- and phenotype-driven clustering, metabolomic risk scoring, and AI-assisted titration—tools that herald a transition from “glucose normalization” to “organ preservation.” By combining high-level evidence with a 10-step clinical algorithm, this presentation provides a patient-centred roadmap for individualized diabetes care, aiming to align therapeutic intensity with physiological heterogeneity and patient context while paving the road toward precision medicine for the next level of care.

Obesity The Weight of the Epidemic



David M. H. Chascsa, M.D.

Assistant Professor of Medicine
Mayo Clinic Alix School of Medicine
Consultant, Divisions of Gastroenterology & Hepatology and Transplant Center
Mayo Clinic Arizona

Dr. Chascsa attended Vanderbilt University, graduating magna cum laude with a B.S. in Chemistry and minor in Spanish Language. He completed his doctorate at Georgetown University School of Medicine. Subsequently, he pursued Internal Medicine Residency training at the University of Colorado, Denver. Gastroenterology fellowship followed at the University of Maryland, National Institutes of Health Clinical Scholars program. His final year of subspecialty training in Transplant Hepatology was at Mayo Clinic Arizona where he currently practices hepatology.

He is an Assistant Professor of Medicine in the Mayo Alix School of Medicine and a Consultant in Hepatology and Liver Transplant Medicine. He is the Program Director for the Transplant Hepatology Fellowship in Arizona. He is certified in Internal Medicine, Gastroenterology, Transplant Hepatology and a diplomate of the American Board of Obesity Medicine. He co-founded the Metabolic Hepatology Clinic at Mayo Clinic. He has lectured throughout the United States and authored several papers.

This 25-minute talk will cover the complex topic of obesity and its implications for global health. Areas of exploration will include the possible explanations for the increasing prevalence of obesity and its impact on the healthcare system. We will explore the difficulty in treating this condition and the impact that lifestyle and lifestyle modifications may have by comparing and contrasting the effects of efforts aimed at healthy eating and healthy activity. Next, the audience will become familiar with end-organ damage triggered by obesity. The specific disease of steatohepatitis will be covered in depth in a Masterclass Track. Finally, we will look at treatments that are available including pharmacologic and non-pharmacological treatments and how they impact organ systems. Lastly, we will explore how to assess markers of disease progression or improvement beyond body mass index.

SYMPOSIUM – 3

Advancing Reperfusion Strategies in Stroke - Beyond Conventional Window



Dr Tamra Ranasinghe

MBBS, FAHA

Program Director Vascular Neurology Fellowship

Assistant Professor Department of Neurology

Division of Cerebrovascular Diseases, Mayo Clinic Arizona

Dr Tamra Ranasinghe is a Senior Associate Consultant, Mayo Clinic Arizona and Assistant Professor of Neurology, Division of Cerebrovascular Disease, Mayo Clinic Alix School of Medicine. He is a board certified neurologist and a vascular neurologist with experience in acute stroke care, secondary stroke prevention, cerebrovascular research, and medical education. He completed his medical training at Kasturba Medical College, Manipal, India and neurology residency and chief residency at West Virginia University, USA followed by a vascular neurology fellowship and NIH StrokeNet fellowship at University of California San Diego, USA.

He serves as the Program Director of the Vascular Neurology Fellowship training at Mayo Clinic Arizona, he also received multiple teaching awards. He has led and co-investigated numerous NIH StrokeNet multicentred clinical trials, with numerous peer-reviewed publications. He is a distinguished Fellow of the American Heart Association with a clinical focus in Neuro-Cardiology, and he is pioneering the establishment of a Heart-Brain Clinic at Mayo Clinic Arizona.

Reperfusion therapy has transformed acute ischemic stroke care, with intravenous thrombolysis and mechanical thrombectomy offering dramatic benefits when delivered in a timely fashion. Treatment has been limited to rigid time windows 4.5 hours for IV thrombolysis and 24 hours for thrombectomy in patients with a small to moderate core infarct; leaving many patients without access to effective intervention. However, advances in imaging, patient selection, and therapeutic approaches are expanding opportunities for reperfusion beyond these conventional boundaries.

We will review the evolving evidence supporting extended and tissue-based treatment windows, including landmark trials that demonstrated the safety and efficacy of IV thrombolysis beyond the conventional 4.5 hours and mechanical thrombectomy in carefully selected patients with a large ischemic core. We will examine the role of advanced neuroimaging in identifying viable penumbral tissue, guiding decisions for thrombolysis and thrombectomy in late-presenting, wake-up and large core strokes. By shifting from rigid time-based criteria toward individualized, tissue-based paradigms, the field is moving closer to ensuring that more patients can benefit from reperfusion therapy. Advancing reperfusion strategies beyond conventional windows represents not only a scientific evolution but also a commitment to equity in stroke care bringing lifesaving therapies to patients who previously would have been excluded.

PLENARY – 3

Kidney Stones, Bones and Metabolic Syndrome: Shared Pathogenic Features, Prevention and Treatment Strategies



Virginia L. Hood

MBBS, MPH, MACP, FRACP, FRCPE

Professor of Medicine Emerita, University of Vermont

President of the International Society of Internal Medicine

Prof Virginia L. Hood is a distinguished physician based in Burlington, Vermont. She is Professor of Medicine Emerita at the University of Vermont and serves as a nephrologist at the University of Vermont Health Network. Dr. Hood has held several prominent international leadership positions, including serving as President of the International Society of Internal Medicine and as President Emerita of the American College of Physicians. Through her extensive contributions to clinical medicine, medical education, and global professional leadership, Prof. Hood has played a pivotal role in advancing the practice and principles of internal medicine worldwide.

Kidney stones, osteoporosis and metabolic syndrome with its components have a high prevalence in populations globally. Each is responsible for significant morbidity and cost for individuals and health care systems. There is considerable overlap in prevalence, pathogenesis, modifiable risk factors and responses to dietary interventions and medications. The main modifiable risk factors include adequate but not excessive dietary calcium, protein, sodium, and citrate containing foods. Medications that can reduce risk factors, and address recurrence and progression include thiazides, SGLT 2 inhibitors, bisphosphonates, allopurinol, citrate supplements. Monitoring with 24 h urine values, blood chemistries and imaging of kidneys and bones is important for optimizing care and enabling better patient participation. Every person suffering from one or more of these conditions can benefit from preventive strategies which can reduce morbidity and cost to individuals and the healthcare system

SYMPOSIUM – 4

Controversies in Snakebite Management: Navigating the Gray Areas



Professor Anjana Silva

MBBS, MPhil, PhD
Chair Professor of Parasitology
Faculty of Medicine and Allied Sciences
Rajarata University of Sri Lanka

Anjana Silva is a toxinologist and he combines experimental, clinical, and epidemiological research to answer real-life problems related to snakebite. He is currently the chair professor of Parasitology at Rajarata University, an Adjunct Senior Research Fellow at Monash University, Australia, and a research associate of the South Asian Clinical Toxicology Research Collaboration. Prof. Silva obtained an MBBS and M.Phil from the University of Peradeniya and a PhD in toxinology from Monash University, Australia. He is a Fellow of the National Academy of Sciences of Sri Lanka. He has delivered four prestigious orations and over ten keynote addresses, including last year's CCP oration. He has received over 30 international and local research awards, including research awards from European, North American and Asia Pacific Associations of Clinical Toxicology and the TWAS/NSF Young Scientist Award in 2013. He received the CVCD Excellence Award for the most outstanding young researcher in the field of medicine and health sciences in 2020.

Snakebite remains a critical health issue in rural tropical areas, predominantly affecting impoverished farming communities. It causes local necrosis at the bite site and systemic effects such as venom-induced consumption coagulopathy (VICC), neuromuscular dysfunction, acute kidney injury, and thrombotic microangiopathy. Despite its severity, there remain significant gaps in understanding, particularly regarding the pathophysiology of envenoming and the development of effective interventions, which hinder global mitigation efforts. In Sri Lanka, the sole antivenom available is the Indian polyvalent formulation, which often triggers adverse reactions like anaphylaxis, necessitating cautious administration only upon confirmed systemic envenoming. The pathophysiology of snake envenoming is largely irreversible, as antivenom is most effective when toxins are still in the bloodstream, before reaching peripheral tissues. In VICC cases, antivenom's role is to halt further clotting factor consumption, although it cannot reverse factors already depleted. For neurotoxic envenoming, particularly with krait bites, toxins cause permanent damage to motor nerve terminals that cannot be reversed by antivenom and recover spontaneously over days. This highlights the importance of prompt diagnosis and immediate antivenom administration. Even with timely hospital access—80% of victims in Sri Lanka arrive within two hours—delays in treatment are common due to the lack of rapid, reliable diagnostic tools. Standard bedside tests like the 20-minute Whole Blood Clotting Test (WBCT20) are unreliable for mild VICC and early detection. Consequently, the International Normalized Ratio (INR) is recommended for diagnosis and monitoring, with combined use of WBCT20 and clinical features improving diagnostic accuracy.

SYMPOSIUM – 4

Crisis Intervention: Acute Management of Psychoactive Substance Misuse



Professor Indika Gawarammana

MBBS, MD, PhD, FRCPE
Senior Professor of Medicine, Faculty of Medicine
University of Peradeniya

Professor Indika Gawarammana is a Senior Professor of Medicine at the University of Peradeniya and Consultant Physician at Teaching Hospital Peradeniya. Leading the South Asian Clinical Toxicology Research Collaboration (SACTRC), his work on pesticide poisoning has saved 140,000 lives through regulatory changes. With over 110 peer-reviewed publications, 2316 citations since 2018, and an h-index of 37, he has presented at over 90 international conferences. Gawarammana developed a species-specific antivenom for Sri Lankan snakebites and secured grants, including AUD 750,000 from NHMRC and GBP 6 million from NIHR for poisoning prevention.

A psychoactive substance is a chemical substance that alters psychological functioning, such as mood, perception, or consciousness, by affecting the central nervous system. Acute management of psychoactive substance misuse is no different to management of any medical emergency- assessment, stabilization and specific treatment. However, two other concepts come into play i.e. management of withdrawal and providing continued care. In addition, you are likely to deal with a disturbed combative patient.

Clinical clues such as pulse rate, blood pressure, size of the pupils, temperature, ECG and presence or absence of sweating or hallucinations will often lead to the identification of the psychoactive agent involved. Acute management of psychoactive substance misuse focuses on stabilizing an individual during a crisis, typically involving intoxication, overdose, or withdrawal. This critical intervention, often in an emergency department, prioritizes patient safety and addresses immediate medical and psychiatric concerns.

The first priority is to assess for life-threatening issues, such as compromised breathing, low blood pressure, high blood pressure, hyperthermia or altered consciousness. Early administration of antidotes such as naloxone for opioids, intravenous fluids and thiamine for alcohol intoxication and for benzodiazepines for agitated patients should be considered. Medications should also be used to manage uncomfortable and potentially dangerous withdrawal symptoms. A critical part of acute management is transitioning the patient to further treatment. This can involve connecting them with inpatient or outpatient rehabilitation programs, psychotherapy, or support groups to address underlying addiction and prevent relapse.

SYMPOSIUM – 4

Beyond Detox- Integrating Addiction Management to Medical Practice



Dr Kapila Marambage

MD

Associate Professor

University of Texas Southwestern, Dallas, Texas

Dr Marambage is a board-certified psychiatrist and Associate Professor at University of Texas Southwestern. Following his medical education at the Faculty of Medicine, Colombo, Sri Lanka, he completed a residency in Psychiatry at the New Jersey Medical School and Addiction Psychiatry fellowship at Albert Einstein College of Medicine in the Bronx, New York. He is Board certified in Psychiatry, Addiction Psychiatry and Addiction Medicine. He is the Medical Director for Addiction Psychiatry at Parkland Memorial Hospital for UTSW. He works with a marginalized and underserved population that battles substance use disorders. He facilitates detoxification and the initiation of medication-assisted treatment (MAT) for aftercare. At UT Southwestern, Dr. Marambage develops advanced, evidence-based medication protocols that are tailored to the needs of patients. He facilitates MAT for high-opioid-utilizing sickle cell patients, as well as pain and palliative care for micro inductions. He is also a member of and the addiction psychiatry expert for both the Parkland and UT Southwestern Peer Review Committees. He also collaborates with partners at Parkland and across Dallas county through the MAT work group as well as the Jail Health Program with the Dallas County Jail, as a subject expert and the Medical Director for the Paths to Recovery Clinic in Dallas, TX which services the Jail Release program.

The talk will introduce the system wide Addiction Psychiatry Services in UT Southwestern – Parkland Teaching Hospital system followed by a description of the substance use issue in Sri Lanka including epidemiology, health and social Consequences. The pharmaceutical options available for treatment will be summarised. There will also be an account on the Medication Assisted Treatment Model used in the USA - the rationale and possible benefits of such a system. Brief interventions including motivational interviewing. Consultation Liaison Addiction Services / Hub and Spoke model / Screening Brief intervention and Referral to Treatment (SBIRT) Model and their compatibility within the Sri Lankan context will be discussed. When to consider for referral to an Addiction Psychiatry team will also be explored.

Tailored to Heal: The New Era of Individualised Medicine



Professor Chandanie Wanigatunge

MBBS Hons (NMC), MD (Col), FCCP (SL), FRCP (Edin), FRCP (Lond)
Professor of Pharmacology, Faculty of Medical Sciences
University of Sri Jayewardenepura

Prof. Chandanie Wanigatunge is a Specialist Physician and a Clinical Pharmacologist and is currently the Senior Professor and Chair of Pharmacology of the Faculty of Medical Sciences, University of Sri Jayewardenepura, Sri Lanka. A Clinical Pharmacologist by training and profession, she provides her expertise to the Ministry of Health and the NMRA on medicines related activities and is the incumbent President of the Sri Lanka Association of Clinical Pharmacology and Therapeutics. Her research interests include antibiotic use, medicines use in older adults and ethics in research. Professor Wanigatunge has been involved with activities related to research ethics since 2004. She has been an international surveyor for the SIDCER recognition programme of the Forum for Ethical Review Committees in the Asian and Western Pacific Region (FERCAP) and is the Chairperson of the Forum for Research Ethics Committees in Sri Lanka (FRECSL).

The practice of medicine is shifting from a “one-size-fits-all” approach to one that is increasingly personalised, aiming to optimise care for each individual. Personalised medicine focuses on tailoring treatment strategies to a patient’s unique clinical profile, lifestyle, and preferences, thereby enhancing therapeutic efficacy and minimising harm. Building upon this foundation, precision medicine incorporates genomic, molecular, and data-driven insights to further refine medical decisions. Advances in genomics, proteomics, and bioinformatics have enabled clinicians to identify patient subgroups who may benefit from specific therapies, transforming the way we understand disease risk, prevention, and treatment.

Emerging at the frontier of this evolution is the concept of digital twins: dynamic virtual models of individuals that integrate genetic, physiological, and real-time health data. Digital twins offer the potential to simulate disease progression, predict treatment responses, and design interventions before applying them in the real world. These innovations promise improved outcomes and greater efficiency in healthcare systems.

However, these opportunities bring significant ethical and moral considerations. Challenges such as fair access, data privacy, algorithmic bias, and the potential loss of patient autonomy must be tackled to ensure progress in personalised medicine remains true to the principles of justice, fairness, and trust.

This presentation will explore the transition from traditional individualized treatment to precision medicine and digital twins, highlighting both the transformative promise and the ethical challenges.

MEET THE EXPERTS – 3

Evaluation of Food Allergies: From Clinical Suspicion to Confirmed Diagnosis



Professor Neelika Malavige

DPhil (Oxon), FRCP(Lond), FRCPath (UK), FNASS
Professor
Department of Immunology and Molecular Medicine
University of Sri Jayewardenepura

Neelika Malavige is a Professor at the Department of Immunology and Molecular Medicine, University of Sri Jayewardenepura, and an Academic Visitor at the Weatherall Institute of Molecular Medicine, University of Oxford. A medical graduate of the University of Colombo, she completed her DPhil at Oxford as a Commonwealth Scholar. She was elected Fellow of the Royal College of Physicians (London), the Royal College of Pathologists, and the National Academy of Sciences of Sri Lanka. Currently President-elect of the International Society for Infectious Diseases, she also chairs its Research Committee. She was the previous Head of the Dengue Global Program at the Drugs for Neglected Diseases Initiative in Switzerland and continues to contribute her expertise through numerous national and international scientific advisory boards, funding panels, and editorial boards, where she serves as a member or chair. She has received multiple local and international accolades in recognition of her contributions to research

Food allergy and anaphylaxis have emerged as significant clinical challenges in Sri Lanka, mirroring global trends in the rising prevalence of allergic diseases. An analysis of over 1600 patients seen between 2023 and 2025 showed that nearly one-fifth presented with anaphylaxis, most often triggered by food allergens. Through a synthesis of local clinical experience and educational workshops, key diagnostic and management issues were explored. The cases highlighted the importance of careful history-taking in distinguishing true food allergies from mimicking conditions and in identifying cofactors such as exercise and medications that can exacerbate reactions. Diagnostic strategies incorporating skin-prick testing, in-vitro specific IgE assays, and component-resolved diagnostics were reviewed in relation to locally relevant allergens such as cow's milk, egg, wheat, peanuts, and shellfish. Long-term care requires individualized risk assessment, patient education on allergen avoidance, and periodic re-evaluation for the development of tolerance, particularly in childhood allergies. Overall, the experience underscores that allergic diseases and food-induced anaphylaxis are increasing in Sri Lanka and that improved clinical recognition, context-appropriate diagnostics, and standardized emergency response protocols can substantially reduce morbidity and mortality. Strengthening national laboratory and surveillance capacity is essential for advancing evidence-based allergy care in the region.

Melioidosis: The Emerging Imitator in Tropical Medicine



Dr Amit A Saraf

MD FRCP (London, Edinburgh, Glasgow) FICP FACP (Philadelphia) FCPS
Director, Department of Internal Medicine
Jupiter Hospital, Mumbai

Dr. Amrit Saraf is the Director of the Department of Internal Medicine at the Jupiter Hospital Mumbai. He also serves as the head of Quality Control at the same institute. He holds multiple fellowships including MD, FRCP (London, Edinburgh, Glasgow), FICP, FACP (Philadelphia) and FCPS. He serves as the International Adviser for India to the Royal College of Physicians (London), is a reviewer for the BMJ and Annals of Internal Medicine, and an Associate Editor of the Journal of the Association of Physicians of India (JAPI). He also contributes to medical education as an MRCP (London) Examiner and as a DNB teacher and MD examiner.

Melioidosis, caused by *Burkholderia pseudomallei*, is an increasingly recognized infectious disease endemic to Southeast Asia and Northern Australia, with rising reports from the Indian subcontinent and other tropical regions. This gram-negative, environmental saprophyte thrives in soil and surface water, with infection typically acquired through percutaneous inoculation, inhalation, or ingestion. The disease is notorious for its clinical diversity, mimicking tuberculosis, sepsis, abscess-forming infections, and even malignancy, earning it the moniker “the great mimicker.”

Clinically, melioidosis may present as acute fulminant septicemia, localized abscesses (commonly in lungs, liver, spleen, or prostate), or chronic relapsing infection. Diabetes mellitus, chronic kidney disease, alcoholism, and immunosuppression are key predisposing factors. Diagnosis requires a high index of suspicion and relies on isolation of *B. pseudomallei* from clinical specimens, supported by serology or molecular methods in specialized centers.

Effective management entails an intensive phase with intravenous ceftazidime or meropenem for at least two weeks, followed by prolonged eradication therapy with oral trimethoprim-sulfamethoxazole to prevent relapse. Despite appropriate therapy, mortality remains high, particularly in septicemic cases.

Given its expanding geographic footprint, potential for laboratory misidentification, and classification as a potential biothreat agent, heightened awareness among clinicians is imperative. Strengthening diagnostic capacity and preventive public health strategies are essential to curb the growing global burden of this neglected tropical infection.

Novel Therapeutics in Diabetes



Professor Ratna Mani Gajurel

MBBS, MD (Internal Medicine), DM (Cardiology) TU, IOM, Nepal

Professor in Internal Medicine and Cardiology

President –SIMON (Society of Internal Medicine of Nepal)

Professor Ratna Mani Gajurel is a distinguished academic and clinician serving as Professor of Internal Medicine and Cardiology at Tribhuvan University, Institute of Medicine, Maharajgunj Medical Campus, Kathmandu, Nepal. He is the current President of the Society of Internal Medicine of Nepal (SIMON), Immediate Past President of the Cardiac Society of Nepal (CSN), and Executive Director of the Manmohan Cardiothoracic, Vascular and Transplant Centre at TU, IOM. He holds an MBBS, MD in Internal Medicine, and DM in Cardiology from TU, IOM. His international recognitions include fellowships such as FACC, FSCAI, FRCP (Edin), FICP, FCoPM, FJCS, and advanced training in interventional and congenital cardiology in Singapore and Milan. Professor Gajurel has authored over 70 publications in national and international journals and contributed to multinational clinical trials. His accolades include the “Best of the Best Paper Award” (SCAI, USA, 2018) and Nepal’s prestigious “Jana Sewa Shree” award (2019)

Diabetes mellitus continues to be one of the most significant global health burdens, with its prevalence rising across all age groups and regions. Currently 529 million people of all ages are having diabetes, of all about 90% are T2DM. Globally 1.6 million deaths annually are related to diabetes. About 530000 kidney disease deaths and 11% of all cardiovascular deaths are related to diabetes. Despite major progress in conventional therapies, optimal glycaemic control and prevention of long-term complications remain challenging. Recent advances in molecular medicine, pharmacology, and biotechnology have paved the way for a new era of innovative and targeted interventions in diabetes management. Newer Diabetes technology like BGM devices, CGM (continuous glucose monitoring), Insulin pens, CSII (continuous subcutaneous insulin infusion) and AID (Automated insulin delivery) is few examples of targeted intervention in diabetes.

Novel classes of antidiabetic agents are reshaping treatment paradigms. The incretin and poly-cretin based therapies, including GLP-1 receptor agonists, dual GIP/GLP-1 receptor agonists and glucagon triple agonist, have shown superior efficacy in glycaemic control, weight reduction, and cardiovascular protection. SGLT2 inhibitors and finerenone (Non-steroidal MRA) have revolutionized care by offering not only glucose lowering but also significant benefits in heart failure and chronic kidney disease. Emerging molecules targeting hepatic glucose metabolism, insulin sensitization, and β -cell preservation are under active investigation. Beyond conventional and newer pharmacotherapy, technological innovations such as continuous glucose monitoring, closed-loop insulin delivery (“artificial pancreas”), and smart insulin formulations are enhancing precision and patient empowerment. Furthermore, cell-based therapies, islet transplantation, stem cell regeneration, Stem-cell derived islets (VX-880, VX-264), and gene-editing technologies represent exciting frontiers with potential for disease modification and even cure. Together, these novel approaches mark a paradigm shift from a purely glucose-centric model to a comprehensive metabolic and organ-protective strategy, aiming to improve outcomes, quality of life, and long-term sustainability in diabetes care.

AI in Healthcare Applications in the South Asian Context



Professor Shohael Mahmud Arafat

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Professor S M Arafat is a distinguished clinician, educator, and researcher with over three decades of experience in internal medicine. Currently, he is serving as Professor of Internal Medicine at Bangladesh Medical University (BMU), Dhaka. As Chairman (2020–2023), he led departmental expansion, advanced postgraduate training, and spearheaded institutional COVID-19 policy and clinical protocols. He has supervised numerous MD and FCPS theses and serves as Convener of the FCPS Fellowship Examination and MD (Internal Medicine) program. His research spans infectious and non-communicable diseases, endocrine dysfunctions in COVID-19, and public health issues among marginalized groups. He has authored over 60 peer-reviewed publications, including in *The Lancet Regional Health – Southeast Asia* and *IJID Regions*, and serves on multiple editorial boards. Currently, he is Secretary-General of the Association of Physicians of Bangladesh (APB), promoting national academic and clinical excellence.

Artificial intelligence (AI), as a central driver of the fourth industrial revolution, is transforming healthcare through advancements in diagnostics, clinical decision support, and health-system management. This framework delineates the distinctions between AI, machine learning, deep learning, and neural networks, and describes the data-driven pathway from data acquisition to learning, analysis, and detection. AI offers substantial benefits in enhancing diagnostic accuracy, enabling remote consultations, optimizing resource allocation, and improving early outbreak detection.

Within Southeast Asia, however, adoption remains heterogeneous. High-income countries such as Singapore have established robust digital infrastructures and regulatory mechanisms, while middle-income nations including the Philippines, Malaysia, Indonesia, and Vietnam are in earlier stages of implementation. In Bangladesh, AI-assisted chest-X-ray interpretation has already shown promise for tuberculosis screening, demonstrating the region's growing capacity for innovation.

Despite its potential, AI deployment faces significant ethical and operational challenges, including data privacy, algorithmic bias, and the risk of exacerbating health inequities. Strengthening governance, ensuring data transparency, and developing context-appropriate regulations are therefore critical for safe and equitable AI integration. The way forward lies in coordinated regional strategies that combine investment in digital infrastructure, capacity building, and cross-sector collaboration to ensure that AI contributes to more efficient, ethical, and equitable healthcare across Southeast Asia.

The Role of Microbiological Investigations in Targeted Therapy



Dr Mahen Kothalawala

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Consultant Clinical Microbiologist
National Hospital of Sri Lanka

Dr. Mahen Kothalawala is a Consultant Clinical Microbiologist at the National Hospital of Sri Lanka with over 19 years of experience in clinical microbiology. He obtained his MBBS from the University of Colombo in 1996, followed by a Diploma in Microbiology in 2000 and an MD in Medical Microbiology in 2004 from the Postgraduate Institute of Medicine, University of Colombo. He also holds a Master of Public Health (MPH) from Massey University, New Zealand (2005). Dr. Kothalawala has made significant contributions to laboratory medicine, infection control, and antimicrobial stewardship within the Sri Lankan healthcare system, with a strong commitment to improving diagnostic microbiology and public health practice.

Microbiological investigations serve as the cornerstone of targeted therapy by precisely identifying the causative pathogen of an infection. Using advanced molecular techniques like Polymerase Chain Reaction (PCR) and Next-Generation Sequencing (NGS), alongside rapid diagnostic tests, these investigations enable a shift from empirical, broad-spectrum antimicrobial use to a pathogen-specific therapeutic approach. This precision is paramount for optimizing clinical outcomes.

A critical function of these investigations is the determination of antimicrobial susceptibility profiles. By identifying the pathogen's resistance patterns, clinicians can select effective treatments, thereby mitigating the risk of therapeutic failure and actively contributing to the global effort against antimicrobial resistance (AMR). Furthermore, analyzing the host's microbiome offers insights into disease pathophysiology and modulates therapeutic response, providing another layer of information for personalized, targeted intervention.

SYMPOSIUM – 5

Prescribe with Purpose: The Physicians' Role in Antimicrobial Stewardship



Professor R Andrew Seaton

MD FRCP DTMH
Consultant in Infectious Diseases
NHS Greater Glasgow and Clyde, UK

Professor Andrew Seaton is a consultant in Infectious diseases and General Medicine since 2000 and is an honorary Professor at the University of Glasgow. Clinical practice based in the Queen Elizabeth University Hospital, Glasgow. Trained in Aberdeen and Dundee and worked in severe Malaria and Cryptococcal meningitis clinical research for 2.5 years in Papua New Guinea as a University of Oxford lecturer. Developed and lead the Antimicrobial Stewardship (AMS) programme in NHS Greater Glasgow and Clyde (population 1.3 m), including a large multi-hospital consultation service and the Outpatient Parenteral Antimicrobial Therapy service. The AMS programme was recently awarded Global Antimicrobial Stewardship Accreditation Scheme (GAMSAS) Level 3 accreditation and designated a centre of excellence. Chair of the Scottish Antimicrobial Prescribing Group (2017-) which oversees AMS in Scotland and current President of the British Society for Antimicrobial Chemotherapy.

An estimated one in six bacterial infections are caused by antimicrobial resistant (AMR) pathogens. AMR and drug-resistant infections are strongly correlated with antimicrobial use and mortality is almost doubled when infection is due to a resistant organism. Antimicrobial stewardship (AMS) is the process of ensuring appropriate and safe use of antimicrobials to maximise patient outcome and safeguard future antimicrobial use. AMS interventions have proven successful in reducing antibiotic related harms including *C. difficile*, MRSA and drug-resistant Gram-negative infections. Physicians have a central role in AMS. Core AMS principles can be summarised as the right drug for the right patient by the right route of administration, at the right dose and for the right duration. WHO Access antibiotics should be used for many bacterial infections and evidence supports use of oral antibiotics and shorter duration therapy for many infections traditionally treated with intravenous therapy and for longer durations in hospital. It is essential that physicians work with nursing and pharmacy colleagues to optimise opportunities for AMS as all clinicians have an important role to play. An AMS programme is reliant on good multidisciplinary team working, surveillance of antimicrobial use, an understanding of local AMR epidemiology and regular educational updates and deployment of quality improvement programmes and acute interventions when required. Without good AMS programmes and focus on careful use of antimicrobials, the burden of AMR mortality is estimated to double by 2050. This will have a profound healthcare and economic impact, so it is essential to act now.

Sepsis 2025: Evolving insights, Emerging Interventions



Jitendra Barmecha

MD, MPH, MACP

Associate Professor of Clinical Medicine
Associate Professor of Clinical Medicine
CUNY School of Medicine, New York

Dr. Jitendra Barmecha, a graduate of Gauhati Medical College, India (circa 1992), began his clinical and healthcare leadership career at SBH Health System (SBHHS), Bronx NY as Chief Medical Resident after completing three years in the Internal Medicine Residency Program.

Following his chief medical residency, he earned his MPH degree in Health Management and Policy at New York Medical College, while continuing to provide patient care services as faculty in the Department of Medicine (Hospitalist Division) at SBHHS. He is the Associate Professor of Clinical Medicine at CUNY School of Medicine (CSOM) and Adjunct Associate Professor of Medicine at New York College of Osteopathic Medicine (NYCOM).

Dr. Barmecha served as inaugural chair of the Digital and Telehealth Advisory Board at the American College of Physicians and past member of Medical Informatics Committee. He is the Past President and Governor of the NY State Chapter and Master of the American College of Physicians, Senior Fellow of the Society of Hospital Medicine and Fellow of European Congress of Internal Medicine.

As a Chief Information and Digital Strategy officer, he is involved in SBHHS digital transformation journey by upgrading the health systems technologies (Epic EHR and Oracle ERP), telecom infrastructure, Information Security, Augmented Intelligence governance; ensuring clinical information systems and patient monitoring devices are well integrated into the electronic health records along with data innovations and patient engagement solutions.

Sepsis is now framed as a life-threatening organ dysfunction caused by a dysregulated host response to infection, driven by immunothrombotic cascades, endothelial-glycocalyx injury, mitochondrial dysfunction, and microcirculatory failure, with heterogeneous molecular endotypes. Clinically, sepsis requires suspected/confirmed infection plus an acute increase in SOFA ≥ 2 ; septic shock is defined by vasopressor-dependent hypotension to maintain MAP ≥ 65 mmHg and lactate > 2 mmol/L despite adequate fluids. Emerging diagnostics include rapid multiplex molecular panels and host-response transcriptomic/proteomic signatures integrated with metabolomics for pathogen-agnostic detection and risk stratification. Key emerging concepts in precision diagnostics, personalized therapies, advanced digital tools in early detection and intervention will be discussed.

Anecdotal Reflections by a Veteran Internist



Professor Kolitha H Sellahewa

MBBS, MD, FCCP, FRACP (Hon.)
Professor & Consultant Physician
Dr Neville Fernando Teaching Hospital, Malabe

Kolitha Harischandra Sellahewa is currently Consultant Physician at NFTH who retired from public service from NHSL in 2008. He is a Past President of the Ceylon College of Physicians, Menopause Society of Sri Lanka and Sri Lankan Society of Critical Care and Emergency Medicine. Former Chair professor of Medicine SAITM and Chairman of snakebite expert committee SLMA. Essentially a clinician with special interest in dengue and snakebite. Delivered the SLMA oration, P B Fernando and K Rajasuriya memorial orations. Pioneered research on clinical features of Hump-nosed viper and utilization of Immunomodulating effects of fresh frozen plasma for snakebite and dengue.

This is a collection of career anecdotes transiting from 20th to 21st century addressing the vast gap of available facilities in caring, yet transcending beyond patient care to research and teaching.

It begins with an adverse event as a final year medical student turned out to advantage by being truthful and conveys a strong message of importance of honesty in shaping careers of physicians irrespective of the era of practice.

The hardships of internship with only two intern MOs to a unit without registrars or senior registrars and a huge patient load is hard to conceive. Call book in an ambulance had to be sent to consultant's house in seeking an opinion as land phones were sparse and modern communication facilities like mobile phones, social media and emails were non-existent.

At a time without US SCANS, CT and MRI; plain X-rays were a luxury. Diagnostic and management pathways were dictated by thorough clinical evaluation and rational application of sound knowledge of fundamentals and common sense. Anecdotes are presented to highlight the importance of a strong clinical sense and optimal utilisation of available resources for benefit.

Fatal outcomes that may have been prevented by availability of radio imaging techniques are presented.

At a time, inundated with information from diverse sources, overwhelming technology, and high expectations by patients and litigation; there is a compelling need to revive the true art of medicine to protect both patients and physicians. It is feasible by practicing a humane, empathetic approach to care grounded on righteousness.

HOW TO PASS MD – SESSION 01



Professor Champica Kasmari Bodinayake

MD, FRCP (UK) , FCCP (SL), ACP, FELLOW FAIMER (USA)
Professor in Medicine, Department of Medicine Faculty of Medicine
University of Ruhuna

Adjunct Professor of Duke Global Health Institute USA

Head of Administration and the lead Physician of Ruhuna-Duke collaborative research and education program

Professor Champica Kasmari Bodinayake is Professor in Medicine at University of Ruhuna and Adjunct Professor of Duke Global Health Institute USA, Fellow of FAIMER (Foundation for Advancement of International Medical Education) institute USA, Head of Administration and the lead Physician of Ruhuna-Duke collaborative research and education program. Her research interests are on infectious disease focusing on dengue, respiratory infections , leptospirosis, rickettsial disease and antibiotic resistance. She has been the recipient of several local and international research grants and has over 100 publications including 60 original full research papers published in peer reviewed journals. She is the recipient of five presidential awards and four National Research Council merit awards and five National awards at research symposia. She has held the positions of President, Secretary, Editor, Treasurer of the Ruhuna Medical School Alumni Association and has been a Past President of the Galle Medical Association



Dr V Sujanitha

MBBS(Jaffna), MD(Colombo), FRCP Edin, FCCP, FACP, Specialty Certificate in Geriatric Medicine
Senior Lecturer in Medicine

Department of Medicine, Faculty of Medicine
University of Jaffna

Dr. V. Sujanitha is a graduate of the Faculty of Medicine, University of Jaffna, with Second Class Honours, five distinctions, several gold medals, and numerous university prizes. She is a board-certified consultant physician and is currently a Senior Lecturer in Medicine in the Department of Medicine, University of Jaffna, and also serves as an Honorary Consultant Physician at Teaching Hospital, Jaffna. She served as the Head of the Department of Medicine at the Faculty of Medicine, University of Jaffna from 2022 to 2025. Dr. Sujanitha has made significant contributions to postgraduate medical education. She served as the Secretary and Course Coordinator of the Board of Study in Medicine at the Postgraduate Institute of Medicine (PGIM), Colombo, from 2021 to 2024. She is the Secretary of the Specialty Board in Internal Medicine at the PGIM from 2024 to date. She has also served as a Council Member of the Ceylon College of Physicians, SLCIM, Sri Lanka Association of Geriatric Medicine and Jaffna Medical Association. Dr. Sujanitha is an experienced examiner for MBBS, ERPM, MD Medicine, and MD Geriatrics examinations. She has published many articles in peer-reviewed international and local journals. Her research interests include elderly care, anaemia, and hypertension.

HOW TO PASS MD – SESSION 02



Dr Barana Millawithana

MBBS(Col), MD (col), MRCP(UK), FRCP (Lon), FCCP
DGM(Lon), MRCP (SCE) Geriatrics (UK)
Consultant Physician
Colombo North Teaching Hospital, Ragama

Dr. Barana Millawithana has served as a Consultant in General Internal Medicine with the Ministry of Health, Sri Lanka, since 2013, and is currently based at Colombo North Teaching Hospital, Ragama. He also functions as a trainer and examiner in General Internal Medicine and Geriatric Medicine for postgraduate trainees of the Postgraduate Institute of Medicine, University of Colombo. In 2022, he was appointed Chairman of the Specialty Board in Geriatric Medicine, and since 2024 he has served as Chief Examiner for the MD Geriatric Medicine Examination. He has also been an examiner for the MD Medicine Selection Examination and the Diploma in Geriatric Medicine since 2017, and, from 2025, for the MD Medicine Examination. In addition, Dr. Millawithana serves as the Federation Host of the MRCP (UK) PACES Examination in Sri Lanka on behalf of the Ceylon College of Physicians, fostering its international collaboration in medical training and assessment.



Professor Shamali Abeyagunawardena

MBBS, MD, MRCP(UK), FRCP(London), FACP
Professor in Medicine at the Faculty of Medicine
University of Peradeniya

Professor Shamali Abeyagunawardena is a Professor in Medicine at the Faculty of Medicine, University of Peradeniya and a Specialist in Internal Medicine at the Professorial Medical Unit, Teaching Hospital, Peradeniya. She was the founder treasurer of the Sri Lanka College of Internal Medicine, and the Vice President of the Sri Lanka College of Internal Medicine in 2020. She was the founder treasurer of the Sri Lanka Hypertension Society in 2020 and the founder secretary of the Hypertension Research Centre, University of Peradeniya, from 2020 to 2024. She has many full paper research publications in Nephrology, Gastroenterology and Hypertension and has received several awards for research work. She is a clinical examiner in the MD Medicine and MD Family Medicine examinations, and a Specialist in Internal Medicine at the Professorial Medical Unit, Teaching Hospital, Peradeniya. She was the founder treasurer of the Sri Lanka College of Internal Medicine, and the Vice President of the Sri Lanka College of Internal Medicine in 2020. She was the founder treasurer of the Sri Lanka Hypertension Society in 2020 and the founder secretary of the Hypertension Research Centre, University of Peradeniya, from 2020 to 2024. She has many full paper research publications in Nephrology, Gastroenterology and Hypertension and has received several awards for research work. She is a clinical examiner in the MD Medicine and MD Family Medicine examinations.



Vidya Jyothi Professor Prasad Katulanda

MBBS, MD, FRCP (Lond), FCCP, FACE, FSLCE, FNAASL, FPSIM, DPhil(Oxon)
Professor in Medicine
Faculty of Medicine, University of Colombo

Vidyajyothi Professor Prasad Katulanda graduated with First Class Honors from University of Colombo winning the Student of the Year award. He obtained MD (Medicine) from the Postgraduate Institute of Medicine and DPhil from the University of Oxford.

The President of Sri Lanka awarded the Highest Honor for scientific research Vidya Jyothi title to him and he won the Ten Outstanding Young Persons (TOYP) award. He has been recognized nationally and internationally with fellowships from the Ceylon College of Physicians, Royal College of Physicians – London, American College of Endocrinologists, Sri Lanka College of Endocrinologists, National Academy of Sciences Sri Lanka, Pakistan Society of Internal Medicine and Harris Manchester College, University of Oxford. Prasad has won many research awards including Presidential Research awards.

Contributing immensely into the scientific literature on diabetes among South Asians, genetics, metabolic medicine, endocrinology and non-communicable diseases he has published peer reviewed 170 full paper publications. His work is highly cited with an h-Index of 48.

Prasad established the Diabetes Research Unit at the University of Colombo and he has obtained highly competitive international research grants. He is the President of the Ceylon College of Physicians, had been a past President of the Endocrine Society of Sri Lanka, Diabetes federation, Secretary of the Ceylon College of Physicians, Endocrine Society, and a Vice president of the Sri Lanka Medical Association. Prasad has supervised several PhDs, MPhils and MDs. Prasad is the Head of the Department of Clinical Medicine and an honorary consultant endocrinologist at National Hospital of Sri Lanka. He had been the Chairperson of endocrine training program in Sri Lanka.

HOW TO PASS MD – SESSION 03



Professor Shamila De Silva

MBBS (Col), MD (Col), MRCP (Lon), FRCP (UK), FCCP (SL)
Professor and Specialist Physician in Internal Medicine
Department of Medicine, Faculty of Medicine, University of Kelaniya

Prof. Shamila De Silva is a Professor and Specialist Physician in Internal Medicine at the Department of Medicine, Faculty of Medicine, University of Kelaniya. She was a member of the Committee appointed by Board of Study in Medicine, Postgraduate Institute of Medicine, University of Colombo in 2015/16 that revised MD Medicine curriculum. Currently serving on the Board of Study in Internal Medicine, she has been chief examiner/examiner for MD Medicine Clinical, Theory, and Selection examinations.

With over 55 peer-reviewed publications in indexed international journals and 85+ abstracts presented at national and international forums, she has received 25+ research awards. Her primary research focus encompasses cardio-metabolic disorders, particularly chronic kidney disease and metabolic syndrome.

Prof. De Silva previously served as chairperson of her faculty's Ethics Review Committee and currently serves as Editorial Board member of the Journal of the Ceylon College of Physicians, MPhil supervisor, and reviewer for national and international journals



Professor Udaya Ralapanawa

MBBS(Pera), MD(Colo), MRCP(UK), FRCP(Lond), FRCP(Edin), FCCP, ISHF, FNASSL, PhD
Professor in Medicine and the Head of the Department of Medicine
University of Peradeniya, Sri Lanka

Prof. Udaya Ralapanawa is a Professor in Medicine and the Head of the Department of Medicine, University of Peradeniya, Sri Lanka. He is serving as a Consultant Physician, at the Professorial Medical Unit, Teaching Hospital, Peradeniya, Sri Lanka. In addition to being a fellow of ISH, he has been a past President of the Sri Lanka Hypertension Society and the Director of the Hypertension Research Center Peradeniya. His research interests are hypertension, non-communicable diseases, and tropical medicine. He was awarded the Most Innovative Outstation Physician award by the Ceylon College of Physicians and presented the Dr Rajasuriya memorial oration. He has also been a winner of KSM Health Research Prize Oration 2025.



Professor Chamara Dalugama

MBBS, MD, MRCP (UK), MRCP (Acute Medicine), MRCP (Diabetes and Endocrinology), MRCP (Geriatrics), FRCP (Edinburg), FRCP (London), FRCP (Glasgow)
Professor in Medicine
Faculty of Medicine, University of Peradeniya

Prof. Chamara Dalugama is a Professor in Medicine at the University of Peradeniya. He graduated from Peradeniya in 2013. During his undergraduate years he obtained distinctions in all subjects and ranked first in the all-island common merit list in 2013.

Prof. Chamara Dalugama joined the University of Peradeniya in 2016. He obtained MD in 2019. He was promoted to full Professor in Medicine on merit in the year 2022. He obtained MRCP in 2019 and MRCP Speciality certificates in acute medicine, Diabetes and endocrinology and Geriatrics. He is a Fellow of the Royal Colleges of Physicians of Edinburg, London, Glasgow

Prof. Dalugama has more than fourth publications in peer-reviewed indexed journals and authored 2 books. He is a peer reviewer of several National and International journals.

He is currently the chairperson of the board of study of clinical sciences of Post Graduate Institute of Medical Sciences at Peradeniya.



Dr Pamuditha Madanayake

MBBS (Colombo), MD (Medicine), MRCP (UK), MRCP (Edin.), MRCP SCE (Geriatric Medicine, Palliative Medicine, Diabetes & Endocrinology, Acute Medicine)
Consultant Physician at the National Hospital, Galle

Dr. Pamuditha Madanayake is a Consultant Physician at the National Hospital, Galle, and a Council Member of the Sri Lanka College of Internal Medicine. He also serves as an External Examiner for the Final MBBS at the Universities of Peradeniya and Ruhuna. He obtained his MBBS with Second Class Honours (Upper Division) from the University of Colombo in 2009 and received multiple gold medals including the M.V.P. Peiris Gold Medal for Surgery. He completed his MD (Medicine) at the University of Colombo in 2015 and the MRCP (UK) in 2017, followed by multiple MRCP Specialty Certificates in Diabetes and Endocrinology (2021), Acute Medicine (2021), Geriatric Medicine (2023), and Palliative Medicine (2024). Dr. Madanayake underwent MD training at the National Hospital of Sri Lanka and Colombo South Teaching Hospital, followed by overseas training at the John Radcliffe Hospital, Oxford University Hospitals, where he served as Registrar, Senior Clinical Fellow, and Acting Consultant in Acute Medicine from 2020 to 2024. He has presented and published widely, with work appearing in BMC Infectious Diseases and the New England Journal of Medicine (as co-investigator in the Head Positioning in Acute Stroke trial).

MASTERCLASS TRACKS



Dr Kelum Deshapriya

MBBS, MD, FCCP
Consultant in Rheumatology and Rehabilitation
National Hospital - Galle

Dr. Randoombage Kalum Deshapriya is a Senior Consultant in Rheumatology and Medical Rehabilitation at the Department of Rheumatology and Rehabilitation, National Hospital, Galle. A distinguished clinician and academic leader, he has served as President of the College of Specialists in Rheumatology and Rehabilitation, Sri Lanka (2017–2019), the Galle Medical Association (2020), and the Ruhunu Clinical Society (2009–2011). Dr. Deshapriya has played an influential regional and international role as Country Representative for the Spondyloarthritis and Epidemiology-COPCORD Special Interest Groups of the Asia Pacific League of Associations for Rheumatology (APLAR) and as a Founder Member of the South Asian Rheumatology Forum. He also served as Vice President of the Sri Lanka Spinal Cord Network and as an Extended Faculty Board Member of the Faculty of Medicine, University of Ruhuna. His academic and professional contributions include participation in national and APLAR guideline development committees and being the recipient of the ILAR Project Grant for Rheumatology in Developing Countries (2017).



Dr Darshana Sirisena

MBBS.MD (Col.), FCCP, FRCP(Edin)
Consultant Neurologist, National Hospital Sri Lanka

Dr Sirisena graduated from Kelaniya Medical Faculty in 1999 and obtained MD (medicine) in 2006 from University of Colombo. Had specialist training in Clinical Neurology at the Institute of Neurology, National Hospital of Sri Lanka and later completed a fellowship in movement disorders at Monash University Melbourne Australia.

He has special interest in Movement Disorders and stroke and has many research papers to his credit which had been published in peer reviewed journals. He is the immediate past president of the Association of Sri Lankan Neurologists and the founder secretary of the Movement Disorders Society of Sri Lanka.

Currently works as the Consultant Neurologist at National Hospital of Sri Lanka and worked as the consultant Neurologist at PGH Badulla and TH Anuradhapura, TH Kurunegala and North Colombo Teaching Hospital Ragama.

MASTERCLASS TRACKS



Dr Lalaj Ruchiranga

MBBS, MD (Medicine)
Consultant Cardiac Electrophysiologist

Dr. Lalaj Ruchiranga is a Board-Certified Specialist in Cardiac Electrophysiology. He obtained his MBBS degree from the Faculty of Medicine, University of Ruhuna, Galle, following his education at Richmond College, Galle. He completed his MD in Medicine at the University of Colombo and subsequently trained as a Senior Registrar in Cardiac Electrophysiology at the Institute of Cardiology, National Hospital of Sri Lanka, Colombo. He received advanced overseas training as a Clinical Fellow in Electrophysiology at the Freeman Hospital, Newcastle upon Tyne, United Kingdom. Dr. Ruchiranga currently serves as a Consultant Cardiac Electrophysiologist, contributing to the advancement of cardiac rhythm management and interventional electrophysiology in Sri Lanka. He is an active member of the Sri Lanka College of Cardiology and the Galle Medical Association.



Dr Lasanda Gajaweera

MBBS, MD, MRCA
Consultant Anaesthetist and Intensivist
National Hospital, Galle

Dr. Gajaweera is a highly experienced Consultant Anaesthetist and Intensivist with over 20 years of clinical experience, currently serving at the National Hospital Galle. He has a special interest in Intensive Care. He is also a dedicated trainer, actively mentoring and supervising numerous Anaesthetic, Emergency Medical and Medical postgraduate trainees.

MASTERCLASS TRACKS



Dr Fariz Ahamed

MBBS, Pg Dip Sports Med, MD Sport and Exercise Medicine (Col), MFSEM (UK & Ire), FSEM (UK) MBASEM (UK), Sports Medicine (OMSB)

Lead Consultant Sport, Exercise and Musculoskeletal Physician at the Sport and Exercise Medicine Department, Colombo South Teaching Hospital

Dr Ahamed is the lead Consultant Sport, Exercise and Musculoskeletal Physician at the Sport and Exercise Medicine Department, Colombo South Teaching Hospital. He is the first sports medicine Specialist, to be registered at the Ministry of Health, Oman following Medical Specialty Board assessment. He completed first MD Sport and Exercise Medicine in 2021. He is a member of the Faculty of Sport and Exercise Medicine, UK & Ireland and member of the British Association of Sports and Exercise Medicine, UK in 2022. He holds a Fellowship in Sport, Exercise and Musculoskeletal Medicine from the Institute of Sport, Exercise and Health, University College London Hospitals, UK during 2023-2024. He plays an active role as member of the Medical Committee of the National Olympic Committee Sri Lanka and as member of the Technical Working Group for Promotion of Physical Activity in Sri Lanka and contributed to the national guideline for NCD exercise prescription by the Ministry of Health.



Professor Anuradha Dassanayake

MBBS(C'bo), MD(C'bo), FCCP
Consultant Physician

Colombo North Centre for Liver Disease & Professor in Pharmacology
Faculty of Medicine University of Kelaniya

Professor Anuradha Dassanayake is a specialist Physician with an interest in liver disease. He graduated from the Faculty of medicine university of Colombo. He had his training in Hepatology and in liver transplantation from the liver transplant unit Royal Free Hospital in London. He is a member of the North Colombo liver transplant team and Colombo North Centre for liver Disease. He is an Executive committee member of the South Asian Association for the study of the Liver. He was a contributor to the recent multi society consensus statement on NAFLD nomenclature. His main research interest is Nonalcoholic fatty liver disease and liver transplantation. He has over 65 publications in national and international journals & presented more than 100 abstracts in national and international meetings.

MASTERCLASS TRACKS



Dr Vihangi Fernando

MBBS, MD
Resident Consultant Physician & VP OPD
Teaching Hospital Anuradhapura

Dr. Fernando is an accomplished physician specializing in acute and internal medicine. Currently serving as visiting physician of the OPD at Teaching Hospital Anuradhapura. She obtained her MBBS degree from Faculty of Medical Sciences, University of Sri Jayewardenepura and MD Medicine from University of Colombo. She has extensive experience in acute and internal medicine including placement in Acute Medicine at the John Radcliffe Hospital, Oxford. Her research interests include cardiovascular disease, diabetes, and physician wellbeing with publications.



Dr Jayani Radika Tennakoon Jayaweera

MBBS, MSc (Human Nutrition), MD (Clinical Nutrition)
Consultant Nutrition Physician
Colombo South Teaching Hospital, Kalubowila

Dr. Jayani Tennakoon Jayaweera is the Consultant Nutrition Physician at Colombo South Teaching Hospital, Kalubowila. She obtained her MBBS degree in year 2006 from Faculty of Medical Sciences, University of Sri Jayewardenepura. She chose her post graduate career in nutrition by entering into the MSc (Human Nutrition) 1st Batch in year 2013 and successfully completed the MD (Clinical Nutrition) in year 2019 in the 1st batch. Her foreign training was at St. Mark's Hospital, London, UK.

Dr. Jayaweera has involved in nutrition related audits, research and given her technical contribution for developing nutrition related national guidelines by the Ministry of Health. She is the current president of Sri Lanka Medical Nutrition Association and the President elect of Sri Lanka College of Nutrition Physicians. She is a board member to the Specialty board in nutrition at the Post Graduate Institute of Medicine, University of Colombo.

MASTERCLASS TRACKS



Dr Nipun Ranaweera

MBBS, MD

Consultant General Physician at BH Kiribathgoda

Dr. H.R.N.T. Ranaweera is a specialist in Internal Medicine with extensive experience managing acute and complex medical cases across Sri Lanka and Australia. He currently serves as Consultant General Physician at BH Kiribathgoda, overseeing ward rounds, emergency care, and clinical teaching. Had the foreign training at GVH Shepparton, Australia, enhanced his expertise in mentoring, emergency response, and academic leadership. He earned his MD in Internal Medicine with distinction, receiving the Dr. P.T. De Silva Gold Medal. His research portfolio includes publications on autoimmune encephalitis, lupus syndromes, and tropical diseases.



Professor J Indrakumar

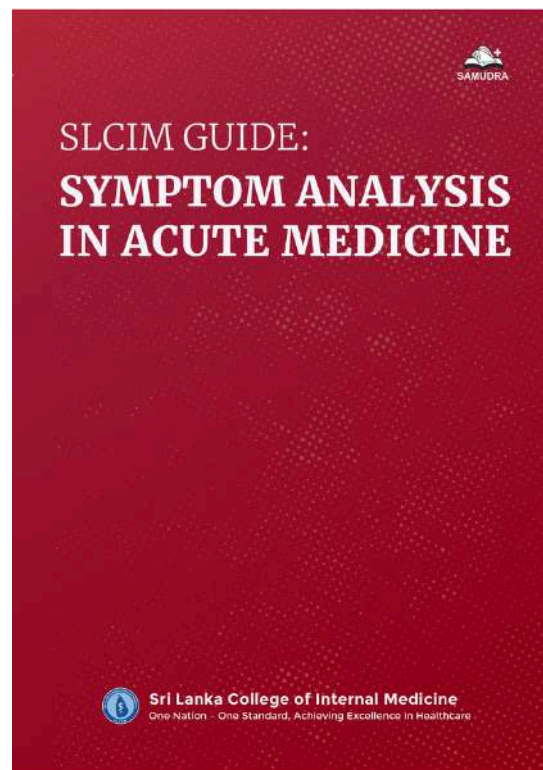
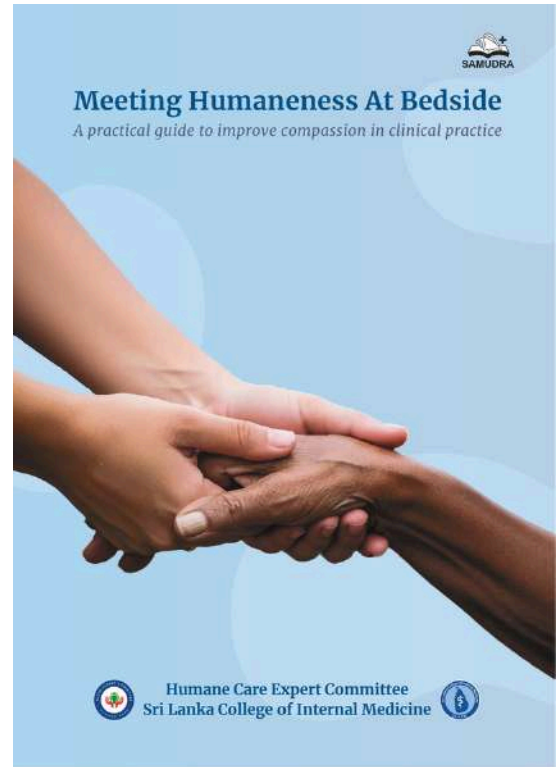
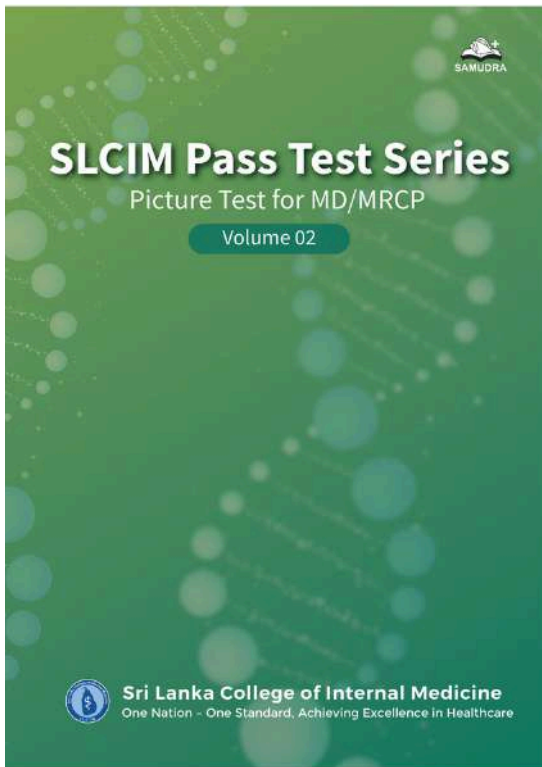
MBBS, MD (COL) FRCP (UK) FCCP

Senior Professor in Medicine

Department of Medicine, Faculty of Medical Sciences,
University of Sri Jayawardenapura

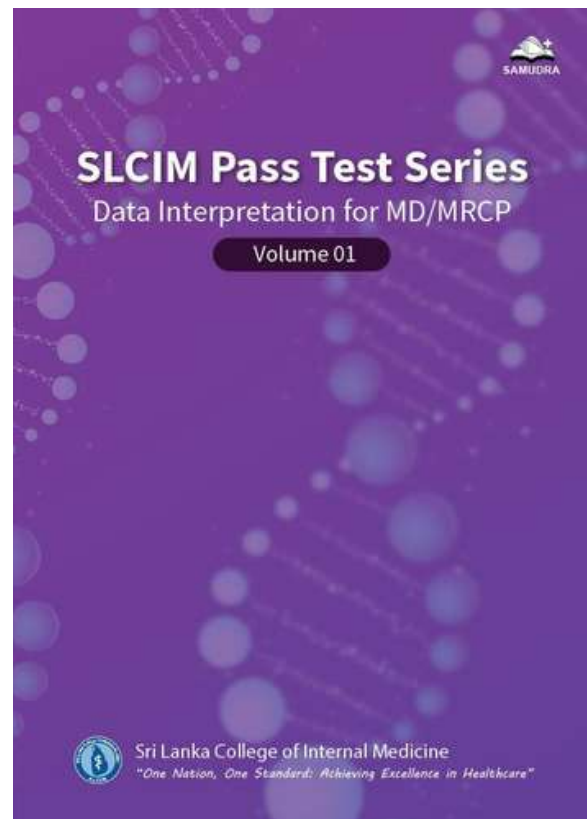
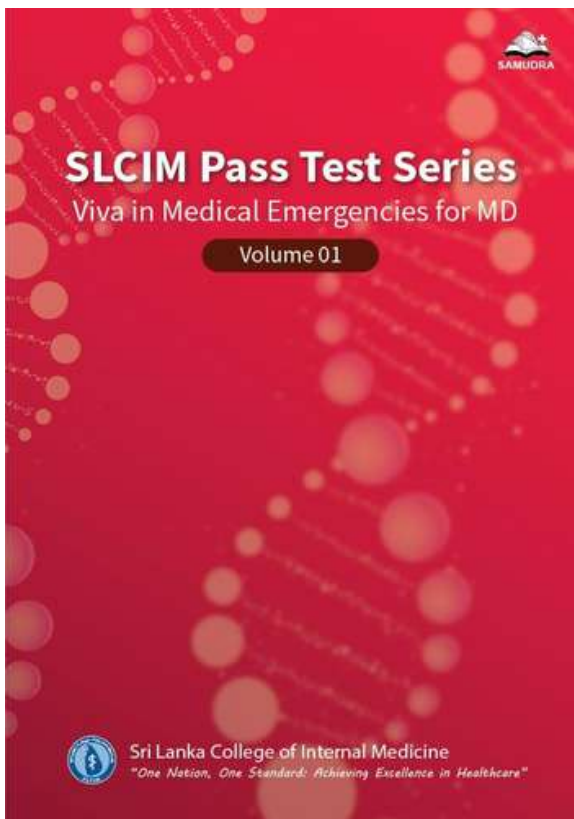
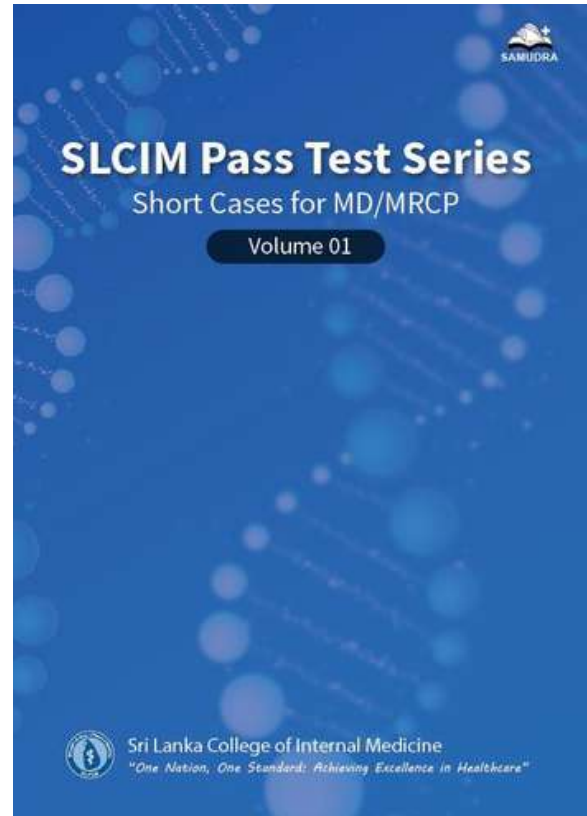
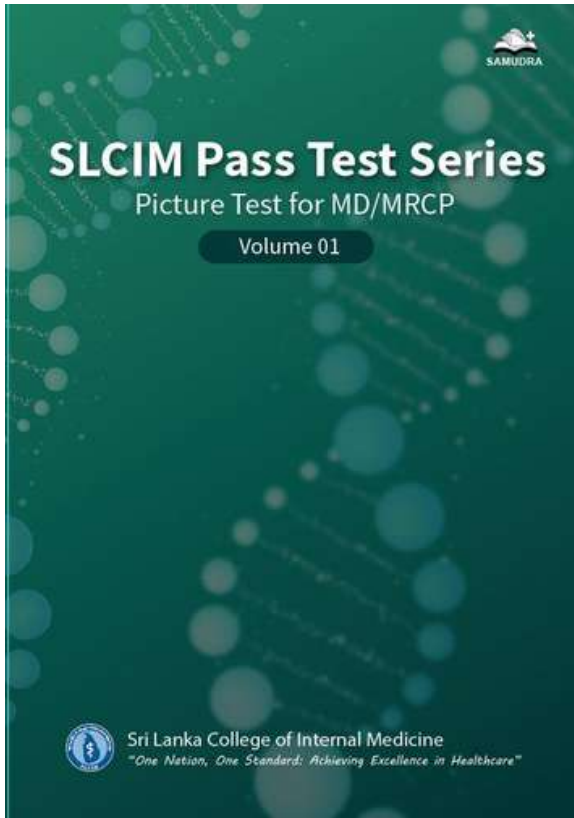
Professor Jegarajah Indrakumar, MBBS, MD (Colombo), FRCP (UK), FCCP, is a distinguished clinician, academic, and researcher serving as Senior Professor in Medicine at the University of Sri Jayawardenapura and Honorary Consultant Physician at Colombo South Teaching Hospital. With over three decades of teaching, clinical, and research experience, he has published extensively in cardiovascular and general medicine, supervised postgraduate research, and contributed to national guideline development. He is also an examiner, editor, and leader in medical education and postgraduate training.

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2ND EDITION PUBLICATIONS



FREE PAPER SESSIONS

LIST OF RESEARCH - ORAL PRESENTATIONS

OP 01

A study on determinants of outcomes of ICU patients based upon admission parameters in a tertiary care hospital

Upeksha M, Kirushanth C, Mahima S, Siriwardana G, Perera S, Silva S

OP 02

AI at the bedside: Comparative analysis of GPT-4o and GPT-4o1 in clinical decision making in Internal Medicine

Abeywickrama UK, Manilgama SR, Hettiarachchi NM, Jayasinghe IK, Vaikunthan R

OP 03

Incidence and death rates of cardiovascular diseases in Sri Lanka: Individual-level 10-year follow-up data from a population-based cohort study

Mettananda KCD, Wickramasinghe MKII, De Saram EMTK, Ranasinghe SDAE, Randeni RACA, Dharmapriya HKLS, Silva JALJ, Kasturiratne KTAA, de Silva HJ, Dharmaratne SD, Wickramasinghe AR

OP 04

Knowledge, usage and perceptions of artificial intelligence-based chatbots in medical education: A cross-sectional study of Sri Lankan undergraduates of a selected medical faculty

Higgoda RA, Alahakoon AA, Indrakumar J

OP 05

Evaluation of HEART, GRACE 2.0, and TIMI Scores for risk stratification in acute coronary syndrome: A single-centre pilot study in a Sri Lankan population

Welhenge C, Fernando KM, Fernando JN, Deshapriya PC, Lekamge MLD, Kasturiratne A, De Silva AP

OP 06

Acute poisoning in Sri Lanka: Outcomes and the role of gastric decontamination – A multi-centres Study

Hettiarachchi NM, Manilgama SR, Nugara VA, Jayasinghe I K, Gunasekara HRP, Silva FHDS, Mayurathan P, Perera D, Suganthan N, Liyanage R, Bandusiri RP, Premawardana N, Higgoda R, Karunawansa MGAPK, Kumarihamy P, Niwunhella K, Ranga Chamara KVD, Weerasinghe MS, Jayamanne SF, Karunathilake H, Somarathne D

OP 07

Association of serum soluble vascular adhesion molecules with mortality from Leptospirosis

Wickramasinghe WSM, Lakshika SLA, Jayasundara JMDD, Senavirathna I, Agampodi S, Uluwattage W, Priyankara WDD, Gamage CD, Weerasekera MM, Perera N

OP 08

Efficacy of protocol-based blood pressure management and digital app-based patient follow-up in the outpatient settings of secondary/tertiary-care hospitals in Sri Lanka

Mettananda KCD, Perera A, Premaratna R, Manilgama S, Ranasinghe S, Hettiarachchi NM, Jayasekara P, Lamabadusuriya D, De Zoysa W, Jayasundara K, Matthias AT, Wickramasinghe MKII, De Saram EMTK, Mallawa MSR, Premaratna RA, Fernando JSU, Ranasinghe SDAE, Ranawaka RATSH, Wickramasinghe Champika

FREE PAPER SESSIONS

OP 09

The precipitating factors of hepatic encephalopathy among patients with chronic liver disease in a tertiary care center, Sri Lanka; A descriptive cross-sectional study

Nirujan K, Seneviratne M, Dissanayake D

OP 10

Rational use of intravenous albumin: a national audit of prescribing practices in government hospitals of Sri Lanka

Manilgama SR, Jayasinghe K, Hettiarachchi NM, Nugara VA, Jegathesan N, Deegodagamage YS, Premawardana N, Jayasekera PK, Bandusiri RP, Jayasundara AJMK, Perera N, Mayurathan P, Jayasekara P, Peiris CJ, Wanigaratne T, Galappatthy P, Seneviratne MP, Bowatte PGCS

FREE PAPER SESSIONS

LIST OF RESEARCH - POSTER PRESENTATIONS

PP 01

Clinical characteristics, severity and outcome of community-acquired pneumonia: a multicenter study

Perera N, Manilgama S, Gunaratne MPPM, Gunasekara HRP, Jayasinghe IK, Jayasekera MMPT, Jegathesan N, Premawardana NP, Rathnayake B

PP 02

Predictors of acute coronary syndrome complications using machine learning in a tertiary care hospital in Sri Lanka: A preliminary study

Sahan TD, Siriwardana RIGOB, Mahima S, Kirushanth C, Perera S, Silva S

PP 03

Association of in-hospital morbidity of hypoglycaemia among patients with dysglycaemia in a tertiary care hospital of Sri Lanka.

Jayasekera MMPT, Kariyawasam VT, Edirisiginhe EMDT, Lamabadusuriya DA, Perera DN, Munasinghe JM, Abeykoon AMAA, Angelo Leard PD, Wijesinghe RANK

PP 04

Impact of fasting status on Friedewald formula-calculated low-density lipoprotein cholesterol: Preliminary findings from a Sri Lankan cohort

Fernando KKM, Shifnah MJF, Bandara PGKA, Fernando MJN, Welhenge CU, Chathuranga D, Mettananda KCD, Madanayaka S, Dayanath BKTP, De Silva ST

PP 05

Hepatocellular carcinoma in chronic liver cell disease: Aetiological patterns and outcomes in a Sri Lankan cohort – preliminary report

Premawardana NP, De Silva GCV, Senadhira SDN, Warnasekara J, Samarasinghe KD, Umayanga HD, Fonseka HAN, Karunarathne YD, Karawita SS

PP 06

Hypertension and comorbidities, the double burden: A multicenter study in Sri Lanka.

Matthias AT, Jayasekera MMPT, Sujanitha V, Jayasinghe IK, Wickramaratne WMDD, Bandusiri RP, Dias L, Mayurathan P, De Zoysa W, Karunaratna WGSG, Wickramanyake S, Direcksze NDKN, Prathapan S

PP 07

Patients' knowledge, attitudes, and practices regarding pharmacotherapy in diabetes mellitus at a tertiary care hospital in Sri Lanka

Jayalath RP, Pathirana HPKC, Premathilake PHLP, Dilhari GUD, Dalugama C, Godakanda CNG

FREE PAPER SESSIONS

PP 09

Access to hypertension medication in low - and middle-income countries with universal health care: A multicenter study in Sri Lanka

Matthias AT, Jayasekera MMPT, Sujanitha V, Jayasinghe IK, Wickramaratne WMDD, Bandusiri RP, Dias L, Mayurathan P, De Zoysa W, Karunaratna WGSG, Wickramanyake S, Direcksze NDKN, Prathapan S

PP 10

Identifying fall risk in older adults with COPD: The role of functional capacity, balance, muscle strength, and fear of falling

CA Sooriyaarachchi, AH Wettasinghe

PP 11

Descriptive cross-sectional study on patterns and outcomes of poisoning among patients admitted to a District General Hospital, Sri Lanka.

Pirasath S, De Silva HSC, Umakanth M, Suganthan N, Gnanathan A

PP 12

Factors associated with inadequate symptom control in patients with chronic bronchial asthma: A cross-sectional study in a tertiary care hospital

Ihala Gamage SR, Dahanayake NJ

PP 13

Cardiac complications in Legionella Pneumonia: A 50-patient cohort study from a Melbourne tertiary hospital

Sawandika Rupasinghe, Aisha Khalid, Tenille Rollnik, Moayed Alawami, Christopher Lemoh

PP 14

Descriptive cross-sectional study on epidemiological and clinical manifestations of snake bites in a District General Hospital, Sri Lanka.

Pirasath S, De Silva HSC, Murugananthan A, Suganthan N, Umakanth M, Gnanathan A

PP 15

Challenges in implementing palliative care services for breast carcinoma in developing countries

Rashmi WA, Ridmi WA, Lakpriya WAY, Jayaratne JPDS

PP 16

Predictors of pneumonia severity in Sri Lankan adults at a tertiary care hospital: Population-specific risk stratification by machine learning and regression models

Perera P, Mahima S, Siriwardana RIGOB, Kirushanth C, Perera S, Silva S

PP 17

Outcome of endoscopic retrograde cholangiopancreatography done for acute cholangitis patients at a tertiary care center in Sri Lanka

Aponso T, Wanninayake WMDAS, Peiris R, Wijesinghe IP, Alahakoon A, Pallewatte AS, Nawarathne NMM, Fernandopulle N

FREE PAPER SESSIONS

PP 19

Hypoglycemia in a resource-limited setting: a cross-sectional study from a tertiary care hospital in Sri Lanka

Francis KR, De Silva ST, Premawardhena AP

PP 20

Varying clinical manifestations of Chikungunya infection during an outbreak: a study in a tertiary care hospital

Nanayakkara KA, Subasinghe SASP, Weerasinghe WMIN, Jayakody JAPS, Amanda GWH

FREE PAPER SESSIONS

LIST OF CASE REPORTS - POSTER PRESENTATIONS

P 01

Late-onset acute autologous graft vs host disease occurring five years following an autologous hematopoietic stem cell transplant

Zoysa WLM, Karunatilake H, Dickmadugoda N, De Silva AS, Mahathanthila WDTA

P 02

Systemic lupus erythematosus complicated by vasculitis: A comprehensive case report series

Wijedasa C, Kaleel F, Selvaratnam N, Murugamoorthy M

P 03

Anton syndrome due to Posterior Reversible Encephalopathy Syndrome (PRES) in a Patient with systemic lupus erythematosus (SLE)

Herath HMSN, Gunathilaka KUIS, Shantha DWA, Medagama A, Weerasinghe SC

P 04

Macrophage activation syndrome (MAS) as the first presentation of SLE in a young boy

Perera DBR, Gunathilaka LWS, Samarakoon SPAKT

P 05

A rare case of ANA-negative autoimmune hepatitis complicated by sensorimotor axonal polyneuropathy

Ranawaka SS, Samarakoon SPAKT, Kumari PDK, de Silva MVC, Gunathilake WG, Sathischandra DHHL

P 06

Takayasu arteritis with persistent pericardial effusion and positive ANA case report

Nirujan K, Monica DS, Pasan S

P 07

Moyamoya syndrome in a patient with Down Syndrome

Nagarajah S, Wickramaarachchi WARM, Soysa WLM, Maniharan S, Dickmadugoda N, Karunatilake H

P 08

A case of Area Postrema Syndrome in Neuromyelitis Optica Spectrum Disorder

Udara DLD, Kankanamge HKCA, Wijekoon WMHS, Dissanayake D, Senevirathne M

P 09

When the diagnosis deceives: A febrile puzzle unfolds

De Silva RM, Jayasekera MMPT, Premaratne PH

P 10

Calciophylaxis of the penis in end stage renal disease (ESRD) patient

Nirujan K, Aravinthan V, Dissanayake U

P 11

A rare presentation of hemiparesis with complex ophthalmoplegia: Nine Syndrome

Udara DLD, Kankanamge HKCA, Dissanayake D, Senevirathne M

FREE PAPER SESSIONS

P 12

High-dose methylprednisolone in severe leptospirosis: A case series from UHKDU

Lamabadusuriya D, Fernando VGM, Wijayananda KPDB, Mahabandara MBHYS, Perera ADNW, Jayasekara MMPT

P 13

Silent invader: Disseminated cryptococcosis in a renal transplant recipient

Anpalahan JP, Vithoosan S, Jayanaga WWLA, Karunathilake H, Shanjeeban P

P 14

Plasmapheresis as a therapeutic alternative in Russell's Viper envenomation with antivenom hypersensitivity.

Peiris KLT, Kirushanth C, Aathithya R, Indrakumar JI

P 15

Pulmonary shadows, neurological catastrophe: CNS melioidosis masquerading as tuberculosis

Udara DLD, Kankanamge HKCA, Gunawardane DGMM, Dissanayake D, Senevirathne M

P 16

Beyond the obvious: Persistent fever from co-existing Lues Maligna and Cryptic Tuberculosis

Jayasinghe JAJ, Peiris KLT, Higgoda R, Govindapala D

P 17

Deceptive fluids: Chikungunya in disguise

Jayasekera MMPT, Abeyathirana S, Premaratne PH

P 18

Hollow viscus perforation and peritonitis in chikungunya

Abeyrathna HMMGGSS, Niyas I, Risly NMM, Athukorala KADCK, Jayasinghe IK, Athauda NRKB

P 19

When chikungunya strikes the heart: A rare case of myocarditis with nodal bradycardia and QT prolongation

Abeyrathna HMMGGSS, Niyas I, Athukorala KADCK, Athauda NRKB, Jayasinghe IK

P 20

Disseminated tuberculosis masquerading as post-partum depression

Thabrew NKKS, Herath HMSN, Amaratathna KS, Shantha DWA, Dalugama C, Perera SR, Pathirage LPMMK

P 21

Chikungunya infection presenting as longitudinally extensive transverse myelitis: A case report on expanding neurological spectrum

Shantha DWA, Thabrew NKKS, Abeykoon MM, Dalugama C, Weerasinghe SC, Pathirage LPMMK

FREE PAPER SESSIONS

P 23

Left-sided native valve endocarditis with multiple lung abscesses due to *Burkholderia pseudomallei*

Anpalahan JP, Vithoosan S, Jayanaga WWLA, Karunathilake H, Shanjeeban P

P 24

A case series of Neuro-Chikungunya: Unmasking the neurotropic potential of Chikungunya virus

Supanchana P, Kirushanth C, Wijewardana CT, Pieris LT, Jayasinghe J, Aathithya R, Govindapala DS, Higgoda RA1, Thivakaran T, Muthugala VR, Perera N, Manilgama SR

P 25

Prostate abscess due to melioidosis in an immunocompetent healthcare worker: a potential laboratory-acquired disease

Piyasiri DLB, Abeywickrama LA, Edirisinghe LU, Mahesh WK, Dias KMGHH, Gunawardena PVSU, Nanayakkara PM, Corea EM

P 26

When trauma opens the door: A rare case of Melioidosis after head injury

Niyas I, Abeyrathna HMMHGGSS, Balasinghe ST, Wijekoon VD, Jayasinghe IK, Athauda NRKB

P 27

Rhinocerebral mucormycosis complicating diabetic ketoacidosis in a young woman: A case report

Rodrigo PWDCH, Hettiarachchi R

FREE PAPER SESSIONS

LIST OF CASE REPORTS - FOR DISPLAY

D 01

Acromegaly presenting with non-parathyroid hormone-dependent hypercalcemia: A case report

Gamage AH, Sathischandra H

D 02

Neurological manifestations following chikungunya infection: A case series from a tertiary care hospital in Sri Lanka

Lakruwan TDKT, Gunathilaka LWS, Sathischandra DHHL

D 03

Multiple myeloma with a small bowel extramedullary plasmacytoma presenting as a pyrexia of unknown origin – a case report

Soysa WLM, Mahathanthila WDTA, Karunatilake H, Dikmadugoda N, Priyani AAH, Rathnayake RMJB

D 04

Concurrent Melioidosis and Tuberculosis: A rare clinical entity

Manilgama SR, Handagala N, Alahakoon A

D 05

Rare association of Cold Autoimmune Hemolytic Anemia and Systemic Lupus Erythematosus in a young male patient

Angamma HMLD, Amanda GH, Gunathilaka LWS

D 06

Desiderosmia due to iron deficiency anaemia as the first presentation of Ulcerative Colitis.

Rajayohan L, Soysa WLM, Dikmadugodda N, Karunatilake H

D 07

Post-hypoxic chorea following drug-induced torsades de pointes in a young adult

Ranasinghe RDIH, Gunathilaka LWS, Ranawaka SS, Udapamunuwa JBK

D 08

Nerves under siege: Microscopic polyangiitis presenting with isolated severe axonal polyneuropathy

Balasooriya BMDS, Shantha DWA, Aaqila U, Ralapanawa U, Jayalath WATA, Herath HMSN, Weerasinghe SC, Dandeniya CL

D 09

Acute myopericarditis with bilateral pleural effusions: a rare presentation of systemic lupus erythematosus

Wettasinghe I, Elanko A, Puthra S, Ratnayake A, Ponnampereuma C, Thambipillai R, Sadeekin A, Mendis S

D 10

Acute unilateral sacroiliitis of infectious origin: Don't forget brucellosis

Ihala Gamage SR, Palangasinghe DR

FREE PAPER SESSIONS

D 11

Unmasking the silent threat: A case of Visceral Leishmaniasis as an emerging infection in Sri Lanka

Thabrew NKKS, Shantha DWA, Manthila K, Senevirathne K, Dalugama C, Rathnayake RMPM, Dissanayake P, Pathirage LPMMK

D 12

Secondary polycythemia in a female to male transgender person

Kobbegala KGVJ, Williams S, Costha Y, Hittarage A

D 13

Metachromatic Leukodystrophy: A Neuropsychiatric Chameleon

Wijayananda KDPB, De Silva RM, Gooneratne IK, Jayasena DP, Jayasekera MMPT, Lamabadusuriya DA, Perera ADNW, De Silva NL, Jayasena DH, Wijesinghe RANK, Munasinghe TMJ, Fernando PLN, Fernando VGF, Ranahansi MBSN, Herath HPKS

D 14

Chasing the wrong enemy: A case of sarcoidosis initially treated as TB: A case report

Anpalahan JP, Jayanaga WWLA, Karunathilake H, Karunatilake R De S

D 15

Primary cardiac tumor presenting with severe thrombocytopenia and tumour embolism: A case report

Wijayawardana KCT, Rahuman MBF, Perera N

D 16

Spontaneous pneumomediastinum with Subcutaneous Emphysema-Hamman's Syndrome-Following vigorous cough in a young male: A case report

Kirushanth C, Silva FHDS

D 17

Recurrent Guillain-Barré Syndrome with bilateral facial nerve involvement: A case report

Kirushanth C, Sinthurkka S, Peiris KLT, Jayasinghe J, Silva FHDS

D 18

Spontaneous pneumoperitoneum in an older adult with uncomplicated COVID-19: A case report

Kirushanth C, Silva FHDS

D 19

Patient presenting with severe hyponatremia and raised Creatine Phosphokinase levels as the first manifestation of Empty Sella Syndrome

Peiris KLT, Kirushanth C, Matthias T

D 20

Disseminated intravascular coagulation being the first clinical presentation of Metastatic Prostatic carcinoma

Peiris KLT, Dhammearatchi K, Dangedara M, Jayasinghe J, Wimalarathne LAMK, Matthias T

FREE PAPER SESSIONS

D21

Melioidosis presenting as sepsis-induced cholestasis and prostatic abscess uncovered by TRUS in the presence of persistent urinary symptoms

Supanchana P, Jayasinghe J, Matthias T, Nandasena M, Perera N

D22

Concomitant methicillin-resistant *Staphylococcus aureus* infection and thoraco-lumbar tuberculous spondylodiscitis in a patient following dengue hemorrhagic fever: A case report

Wijayawardana KCT, Jayasinghe JAJ, Perera N, Govindapala G

D23

A case of rare clinical overlap – Severe hypercalcemia as the initial presentation of Thyrotoxicosis, later complicated by Adrenal Insufficiency

Solangaarachchi SASN, Jayasinghe RP, Weerakkody M

D24

Subacute psychosis due to anti-N-methyl-D-aspartate receptor encephalitis presenting with concomitant neuroleptic malignant syndrome

Kobbegala KGVJ, Senanayake B

D25

Chronic osteomyelitis by *Salmonella* following a gunshot injury – a case report of a patient who walked unaided after two decades

Piyasiri DLB, Jayasinghe YARP, Jayasekera PK, Silva R De, Dassanayake D, Thewarapperuma C, Jayathilleke W

D26

An atypical presentation of lung abscess in an HIV patient

Silva SCUM, Piyasiri DLB, De Silva ES, Balasuriya CD

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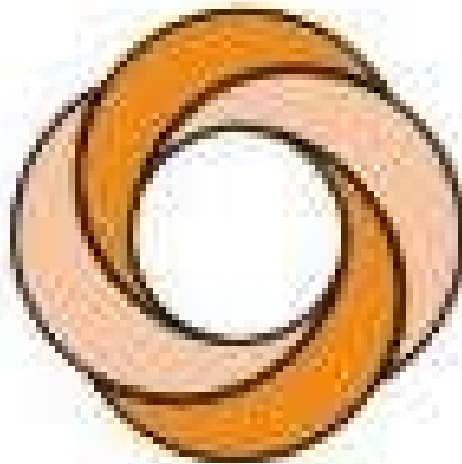
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