

## Risk of cardiovascular disease $\geq 20\%$

The 10-year cardiovascular risk is estimated using WHO/ISH Cardiovascular Risk Prediction Chart. In the 2021, among the eligible participants screened 2.45% (n=5,580) were found with cardiovascular risk  $\geq 20\%$ . Among the participants screened, 2.48% (n=1953) males and 2.43% (n=3627) females had cardiovascular risk  $\geq 20\%$ .

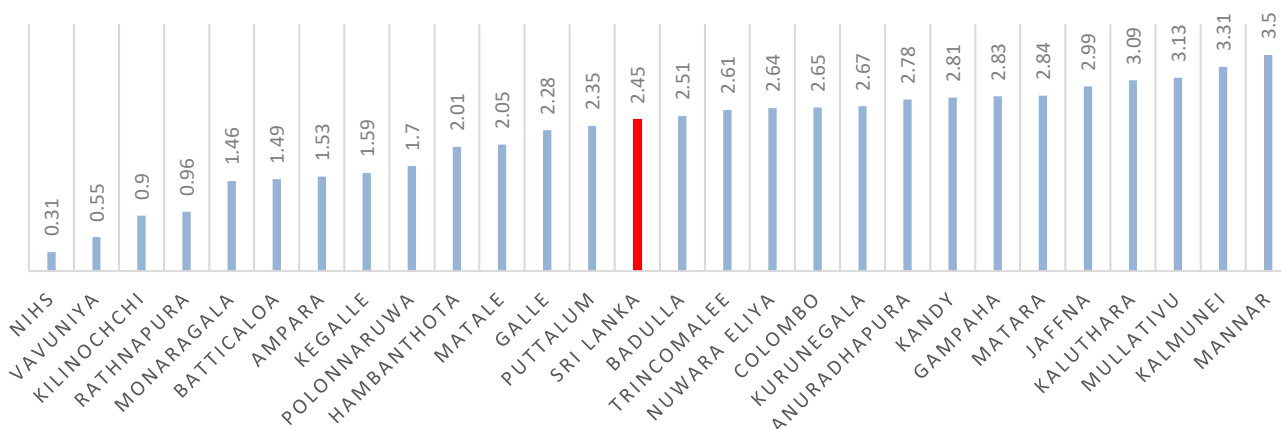


Figure 5: Distribution of percentage of participants with cardiovascular risk  $\geq 20\%$  among the population screened by districts in the year 2021

## Physical Inactivity<sup>10</sup>

Of the eligible population screened, 31.23% (n=85,127) were physically inactive.

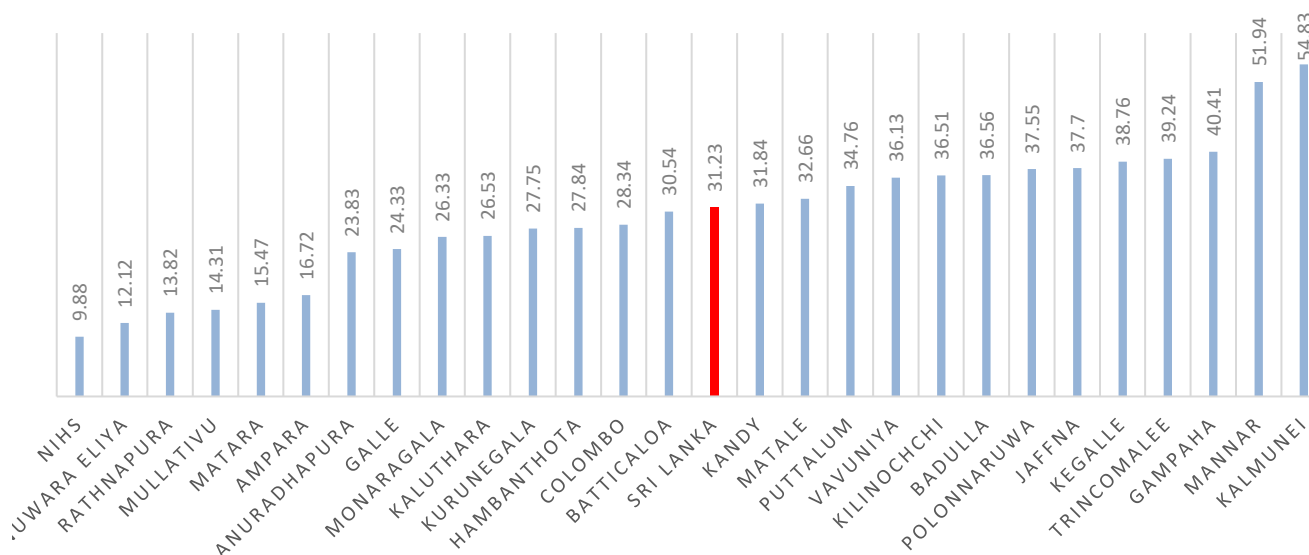


Figure 11: Distribution of percentage of participants with physical inactivity among the population screened by districts in the year 2021

<sup>10</sup> Not involved in moderate or vigorous intensity activity throughout the week

## **Unit for Injury Prevention**

### **Development of the Multisectoral Strategic Action Plan on Injury Prevention and Management (MSAP) 2021-2025**

MSAP 2021-2025 was developed based on the National Policy and Strategic Framework on Injury prevention and Management of Sri Lanka. The extended scope for the MSAP was identified by both Health and Non-Health stakeholders working on injury prevention and management. The key priority areas addressed by MSAP include transport safety, drowning safety, home safety, workplace safety, vulnerable group safety and post event care. This was finalized following series of consultative meetings conducted with various stakeholders including other Ministries, Professional colleges, NGOs, and funding agencies. MSAP was developed under five strategic areas: advocacy, partnership & leadership, health promotion & risk reduction, post event care, capacity building, and surveillance, monitoring, evaluation, and research.

### **Commemoration of National Injury Prevention Week**

The National Injury Prevention Week 2021 was organized for the sixth successive time by the NCD unit from 5<sup>th</sup> to 9<sup>th</sup> July 2021. The intention was to raise public awareness about the prevention of injuries with special emphasis on prevention of home injuries during the period of COVID 19 pandemic. A wide media coverage was obtained for this week with the media briefings conducted at the Health Promotion Bureau and the Department of Government Information. Possible adverse consequences of injuries during the COVID pandemic were discussed in printed and electronic media interviews to emphasize the importance of injury prevention during the pandemic. Many awareness activities were conducted at district and divisional level in parallelly with the coordination of MO NCDs of the districts to commemorate the week.

### **Commemoration of World Drowning Prevention Day**

World Drowning Prevention Day was commemorated on the 25<sup>th</sup> of July 2021, in collaboration with the multiple stakeholders working on drowning prevention. The theme was “Anyone can drown, no one should”. Media briefings were conducted at the Health Promotion Bureau and the Department of Government Information to emphasize the importance of inculcating water safety culture within the society. Numerous district level awareness programs were also conducted successfully by the district MO NCDs.

## **National Injury Surveillance System National review and Award Ceremony for best performances**

The National Review and award ceremony for the best performances in injury surveillance was conducted for the 4<sup>th</sup> successive year on 29<sup>th</sup> of April 2021 at the Sri Lanka Foundation Institution. This was organized by the NCD Unit to recognize and appreciate the commitment of health care institutions, districts, and provinces who have performed well in injury surveillance. It was expected that this would encourage others to perform better by learning from experiences and building capabilities to strengthen the National Injury Surveillance System.





### **Capacity building**

The injury prevention unit was able to conduct several data management training programs on national injury surveillance system targeting district MO NCDs and staff at sentinel hospitals conducting injury surveillance. Except a few programs most of the trainings were conducted by virtual means due to the prevailing COVID pandemic. Capacity building programme for provincial and district level CCPs and District MONCDs on national injury prevention and management programme was also conducted by virtual means.

### **Development of National Curriculum on basic first aid**

A national curriculum on basic first aid was an essential requirement to streamline the haphazard basic first aid trainings conducted by various parties throughout the country. Therefore, it was decided to develop a national curriculum on basic first aid with the involvement of experts in the field of first aid. The draft curriculum was developed following a series of consultative meetings with the College of Emergency Medicine, Sri Lanka Red Cross, and St. John's Ambulance Services. Once finalized, this curriculum will be introduced to all stakeholders who conduct basic first aid trainings to make them adhere to a uniform training programme on basic first aid.



## Covid 19 Pandemic Activities

Issued guidelines to ensure uninterrupted services for patients with chronic NCDs followed up at hospital clinics.



Coordinated with district level Medical Officers of NCD (MONCD) to address the issues in relation to the supply of medicines and follow up of patients with NCD attending medical clinics in government sector. Home delivering medicines through health staff (PHNO and Midwife) and non-health staff (Grama Niladhari, Development Officers, village leaders, volunteers) was another mechanism adopted. Patients regularly taking treatment from government hospitals, but for whom there was no urgent need to be seen by a doctor, were delivered medicines through the Department of Postal Services. A list of contact numbers of all government hospital clinics was made available to the public via the Ministry of Health website.

Established a 'Front desk' to measure Blood Pressure, Blood Sugar level of NCD attending medical clinics in government sector. Digital BP 1000 and glucometers distributed through MONCD to facilitate establishment of the front Desk.



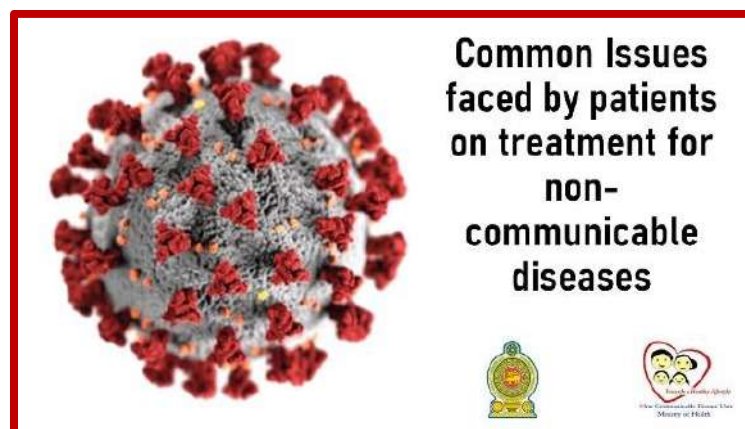
As requested by DGHS, Directorate of NCD visited all Intermediate Care Centers in the Gampaha district to oversee the requirements to provide care for COVID patients.



A tri-lingual telephone hotline was maintained to provide information on NCD related medical services



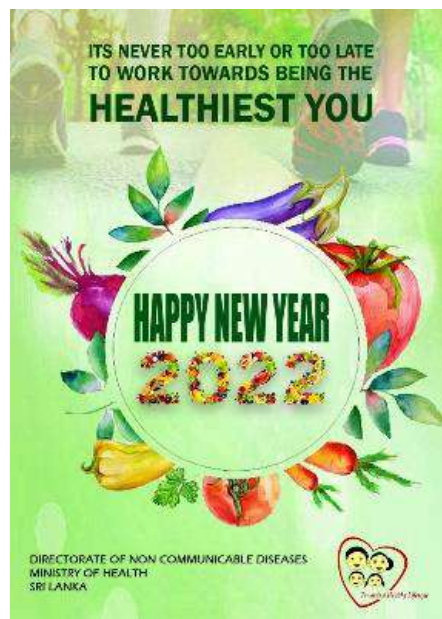
Health messages were disseminated via mass and social media on maintaining proper control of NCDs, how to recognize danger signs of NCD related emergencies and how to reach for medical services if an emergency is suspected.



## Celebrations with Healthy Eating

All Sri Lankan festivals and celebrations have one key component common to all, and that is the excessive consumption of sweets and traditional foods. Majority of these traditional foods are either sweet and have high concentrations of sugar and fats, or are spicy with high amounts of salt, and most are deep fried in oil. Excessive amounts of sugar, fats and salt are the main unhealthy components in food and have a direct causal relationship with the development of Non-Communicable Diseases. The Sinhala and Hindu traditional new year table has numerous sweetmeats such as Kevum, Kokis, Peni walalu, Laddu, Milk toffees and cakes etc., all of which contain excessively high amount of sugar and fats. The Easter is celebrated with numerous cakes, chocolates, easter eggs and other types of sweets, which again contain large amounts of sugar and fat, in form of margarine or butter. At the end of the daily Ramadan fasting, Muslims consume a lot of fried, fast foods, followed by meals high in fried meat. The celebration lunches and dinners include lots of spicy, fried foods with excessive amounts of salt and oil, and desserts high in sugar. Hence, it can be noted that in the month of April, people consume a lot of unhealthy food.

However, there are numerous healthy options which can be utilized to fill the new year and celebration feasts. Different types of fruits and vegetables can be used to create highly appetizing, but Nontraditional dishes. The amounts of traditional food consumed can be reduced by including several dishes of fruits and vegetables. A couple of plates, each filled with different fruit slices, a big bowl of fruit salad, and dishes with thinly sliced vegetables such as carrots, tomatoes, lettuce and cucumber can be lain, along with a spicy sauce, which are some examples that could be used for the traditional food table. Similarly, more salads can be included into the celebratory meals including dinners, which will reduce the quantity of unhealthy foods consumed.





Healthy preparation of traditional sweets can also be attempted where possible, such as using treacle and jaggery in place of sugar, baking and air frying in place of deep frying in oil, etc. These same alternatives to frying can be used in the preparation of the main meals of the day. Cooking practices for reducing the effects of fats and oils, such as the use of herbs and condiments can also be important practices.

Finally, while enjoying the food during the traditional celebrations, it very important that we are more active on that day, especially to utilize the excessive calories consumed. Even traditionally, this may be the reason that numerous traditional games were played on the new year day, and everyone was expected to actively participate. Unfortunately, today, only the food table is celebrated, and the important traditional games are forgotten. Hence, we need to revive those activities, which will enable us to celebrate a healthier new year.





## **Acknowledgement**

We wish to express our gratitude to the Provincial Directors of Health Services, Regional Directors of Health Services and Provincial and District Consultant Community Physicians for the administrative support and technical guidance provided to NCD prevention and control activities carried out in the provinces/districts.

A very big appreciation is extended to the district Medical Officers (MONCD) who are the backbone in the implementation of the national policies and planned activities and play a massive role in leading the community change expected. They are the key implementers of the field level commemorations of special NCD prevention days and programs, and conducting district level advocacy.

We wish to appreciate the technical assistance and support provided in relation to promotion of national physical activity program by relevant units within the Ministry of Health, Sri Lanka Sports Medicine Association (SLSMA), Ministry of Sports, Ministry of Education, Board of Investment (BOI) and Child Fund. Our thanks go to Prof Aranjan Karunanayake, President SLASMA, Dr. Chathuranga Ranasinghe, Chairperson, NIROGI LANKA project of the Sri Lanka Medical Association, and Dr. Lal Ekanayake, Director General, National Institute of Sports Medicine for their unstinted support.

We wish to extend our special appreciation and acknowledgement to the relevant units within the Ministry of Health, Sri Lanka Medical Nutrition Association (SLMNA) and relevant other professional colleges for assistance in formulating the policies, action plans, guidelines in relation to promotion of a healthy diet. We thank Dr. Renuka Jayatissa, Head of the Nutrition Department of the Medical Research Institute, for her continuous guidance and support.

We would like to offer our grateful thanks to Dr Palitha Abeykoon, former Chairman NATA, Dr Jayamal de Silva, Consultant Psychiatrist and Senior lecturer in Psychiatry, MONCDs, Medical Officers of Mental Health, Medical Officers of Health and Public Health Inspectors, Health Promotion Bureau and WHO who offered their expert opinion and contributions for the development of the guideline to establish tobacco free zones and the training manual for tobacco prevention and cessation.

We also wish to extend our appreciation to the different mass media and printed media channels, who extended invaluable assistance to us by disseminating NCD related information and health promotion items, especially pertaining to the commemoration of international days and during the COVID-19 pandemic.

We wish to appreciate Primary Healthcare System Strengthening Project (PSSP) and Health Information Unit of Ministry of Health for their vital contribution in development and implementation of cloud-based Health Information Management System and

training the HLC staff attached to PSSP verifiable hospitals on cloud based HLC-module. A special mention to MO NCD – Polonnaruwa for his contribution in developing Transition Health Information Management System.

We wish to appreciate the support and guidance provided by the Technical Working Group for NCDs consisting of relevant representatives from professional colleges and associations for developing the NCD related National Guidelines for management, referral and follow up.

The World Health Organization and it's Sri Lanka country office is greatly appreciated for their extensive assistance provided through technical inputs as well as providing necessary financial assistance for development and implementation of numerous programs. The RECAP grant also requires special mention and acknowledgement, especially for their assistance in the health promotion work carried out during the year, related to promoting a healthy diet.

The technical guidance provided by Sri Lankan College of Emergency and Retrieval Medicine, Sri Lanka Red Cross, and St John Ambulance Association & Brigade in Sri Lanka in developing the national guidelines on basic first aid is greatly appreciated. In addition, we appreciate the commitment of all sentinel hospitals, regional and provincial directorates in conducting National Injury Surveillance throughout the country. Our thanks also go to Medical Statistics Unit, Ministry of Health for sharing e-IMMR data in assessing the burden related to injuries.

We wish to appreciate the financial assistance provided by Primary Healthcare System Strengthening Project (PSSP) in developing virtual training materials, purchasing essential equipment for Healthy lifestyle centers, for printing of IEC materials needed for the services at primary care services and for coordinating the training program for nursing officers at Primary care for better delivery of NCD services.

## **Our team**

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