



ISSUE NO. 02 | JUNE 2024

SLCOG NEWS

Official Newsletter of Sri Lanka College of Obstetricians & Gynaecologists



Council 2024

Patron

Dr (Mrs), Marlene Abeywardane

President

Dr. Mangala Dissanayake

President Elect

Dr. S. P. Akmeemana

Immediate Past President

Prof. S. H. Dodampahala

Secretary

Dr. Achintha Dissanayake

Assitant Secretary

Dr. Udara Jayawardena
Dr. Prabath Randombage

Hony. Treasurer

Dr. Dr. Ruwan Silva

Asst. Treasurer

Dr. Diluk Senadheera

Chairman - Scientific Activities & Research

Dr. Darshana Abeygunawardena

Editor

Dr. Chanil Ekanayake

Chairman - Continuing Professional Development

Dr. Shemoo Marleen

Chairman - Ethics

Dr. A. Sritharan

Social Activities Secretary

Dr. Sudath Senaratne

Chairman - Education And Setting Standards

Dr. Harsha Atapattu

Chairman - Global Relationships

Prof. Nishendra Karunaratne

Chairman - Regional Activities And Developments

Prof. H. M. J. N. Herath

Council Member

Dr. C. Mathota
Dr. R. Vithanage
Dr. B. P. G. N. De Silva
Prof. S. A. C. Silva
Dr. M. C. Gihan
Dr. R. Sakunthala Senevirathne
Dr. Madura Jayawardene
Dr. Rishard Mohamed
Dr. S. N. K. Rodrigo
Dr. Chaminda Hunukumbure
Dr. Sumith Warnasuriya

Dr. Janaki Karunasinghe
Prof. Rukshan Fernandopulle
Dr. Madhava Karunaratne
Dr. Maithri Chandraratne
Prof. Cyril Randeniya

Co- Opted Members

Dr. Kanishka Karunaratne
Dr. Gamini Perera
Dr. U. D. P. Rathnasiri
Dr. Chandana Jayasundara



Editor's Note

The service rendered by the Sri Lanka College of Obstetricians and Gynaecologists (SLCOG) to improve women's health in Sri Lanka transcends all spheres of health care in Sri Lanka, and as such, it is in this light that the events and achievements of the SLCOG and its members are showcased in the newsletter.



An article on Emeritus Prof. Mahasara Gunaratne by Dr B.G.A.Vidyatilake will no doubt illuminate the life and service rendered by a giant of yesteryear. Perhaps this will serve as a guide to the new members to model their lives to the times we live in.

Photographs and details of orations, workshops, Webinars, EOD programs from 1st April to 31st June are shown in this issue. Details of schedule of the annual academic congress and the pre-congress workshops are also displayed for the benefit of the members.

Dr. Chanil Ekanayake
Editor

Subscribe now

SLJOG
Sri Lanka Journal of Obstetrics and Gynaecology
ISSN 1391-7536

Subscription Rates
Individual Copy: Rs. 300

One Year Subscription
(4 Copies): Rs. 1000

Please make the cheques payable to:
"Sri Lanka College of Obstetrics and
Gynaecologists"

Instruction to authors can be
downloaded from the journal

website:
www.slkog.lk/sljog

**Sign up
now**



Contact Details

No. 112, Model Farm Road, Colombo 08.
Tel/ Fax: 0112689036
E- mail: slcogoffice@gmail.com
Web: www.slkog.lk





President's Message



Dear Colleagues and Esteemed Members,

I am delighted to share the latest developments and accomplishments of the Sri Lanka College of Obstetricians & Gynaecologists (SLCOG). Our recent initiatives and events have significantly advanced the field of obstetrics and gynaecology in Sri Lanka, reflecting our unwavering commitment to improving maternal and fetal health. One of our standout achievements was the successful “Cardiac Day” symposium, which we held in collaboration with the Sri Lanka College of Cardiologists. This event, centered on Heart Disease Complications in Pregnancy, provided a valuable platform for interdisciplinary dialogue and learning.

Our “Essentials of Obstetrics at Your Doorstep” project continues to make a meaningful impact by extending vital obstetric care to underserved regions. Recently, we conducted programs at the Teaching Hospital, Rathnapura; District General Hospital, Mannar; and the District General Hospital, Vavuniya. These efforts are crucial in enhancing access to quality care for women in remote areas. Additionally, the Safe Motherhood Programme remains a key component of our strategy to improve maternal health outcomes, with our second session of 2024 successfully concluded at the District General Hospital, Nuwara Eliya.

We also hosted two workshops on Ultrasound in advanced fetal medicine. These events, led by Dr. Raffaele Napolitano and Prof Tiran Dias brought together over 110 medical officers and provided critical insights into fetal care. Our educational webinars have further enriched our offerings, covering essential topics such as “Recognizing Hypoxia in Fetal Medicine” and “Understanding Laparoscopic Hysterectomy,” with valuable contributions from experts Dr. Rajesh Modi and Prof. Mete Gungor. A special Mothers’ Day webinar, in collaboration with the Family Health Bureau, was also a highlight of our recent activities.

The third edition of the “Spandana” Gynec Conclave, featuring live demonstrations and hands-on sessions, provided practical training and insights to participants. Moreover, our international speaker program featured Dr. P.M. Gopinath, who addressed the complex issue of “Unexplained Recurrent Pregnancy Loss - A Clinician’s Dilemma,” enhancing our understanding of recurrent pregnancy loss. Our Training of Trainers program for the “Essentials of Obstetrics at Your Doorstep” project is progressing well, ensuring that our trainers are well-prepared to deliver high-quality education.

Finally, we held our first guideline revision meeting for the SLCOG Postpartum Haemorrhage (PPH) guidelines, aiming to refine and enhance our protocols for managing this critical condition. These achievements reflect our dedication to advancing maternal and fetal health through continuous education, collaboration, and innovation. I extend my sincere gratitude to all members and collaborators whose expertise and commitment drive our mission forward.

Warm regards,

Dr. Mangala Dissanayake
President, SLCOG



Secretary's Message

It is my great pleasure to issue a message for the second newsletter of the SLCOG for the second quarter of the year 2024 under the presidency of Dr Mangala Dissanayake. This year is filled with academic programs and so far we have successfully completed many under the theme of “Quality healthcare through standards in training and service delivery” - a right of every women. The “Essentials of Obstetrics at your Doorstep” is continuing successfully and recently we have held programs at TH Rathnapura, DGH Mannar and DGH Vavuniya with the co-participation of subareas. Capacity building of health professionals, institutional nurses, and field staff is instrumental to uplift women’s health. The upcoming EOD programs are planned to be held at DGH Elpitiya and DGH Nikaweratiya. At the end of the year, we are hoping to cover the entire island with such programs.

Safe Motherhood program was conducted at DGH Nuwara Eliya with the co-participation of staff from DGH Dikoya. I wish to thank all who actively contributed to make this event a success.

Two workshops on fetal medicine were held at Colombo and Kandy and several webinars were conducted as well with participation of several postgraduate trainees. The MD part II training program was completed successfully with the guidance of Dr. Madawa Karunaratne. Guideline revising is continuing and the PPH guideline was revised recently with the collaboration of the Sri Lanka College of Anaesthesiologists. We are planning to complete important guideline revision sessions this year as well.

Finally, we are awaiting the most anticipated event in our academic calendar - the 57th Annual Academic Congress - 2024 which will be held from 30th August to 1st of September at the Galadari, Colombo. It will be a great opportunity for sharing knowledge and skills in the field of Obstetrics and Gynaecology and enjoying the fellowship of local as well as foreign professionals. I would like to invite you all to register in advance and make use of the early bird registration and submit your valuable abstracts for free communications. I would like to thank President Dr Mangala Dissanayake for his immense leadership and guidance throughout. I also wish to appreciate, all the hard work and effort done by the council and SLCOG college staff in making each of the above events a success. Wishing you all the very best and hope to see you all in the upcoming events.

Dr Achintha Dissanayake
Hon. Secretary, SLCOG

Professor Mahasara Gunaratne



Passing away of Prof Mahasara Gunaratne, removed from our midst a colossus in the speciality, a great teacher, a fine clinician, a meticulous surgeon an eminent researcher, an erudite scholar, and last but not the least, a benevolent guru. His clinical practice spanned over six decades of which more than five decades were spent in helping subfertile couples. Subfertility was his forte. Even before the R.C.O.G recognised it as a subspeciality Prof Gunaratne was interested in it. He recalled as to how he became interested in the subspeciality in his presidential address to the SLCOG in 1996. "My own interest has revolved around in fertility because of a specialised training I received in Paris and Johns Hopkins University, Baltimore. That was in 1975 and from there onwards I took on the unenvious task of helping the infertile couple" His establishment of the first subfertility clinic in 1976 in the General Hospital Kandy was a landmark in the history of obstetrics and gynaecology in Sri Lanka. He believed in proper record keeping and hence prepared a comprehensive questionnaire involving both the husband and the wife. It was a time when there were no ultrasound scanning, laparoscopy or hormone assays. Even a basic fertility drug like clomiphene was not heard of. By thorough interrogation, clinical examination and few basic tests he arrived at a diagnosis and commenced treatment. Thousands of couple were benefited over the years and as the fame of the clinic spread people came in large numbers from faraway places. Dr Ranjith Almeida, registrar and myself, tutor were the first two assistants to the professor. But he took individual care of all his patients. On the 10 th anniversary of the clinic, he brought out a book, 'Childlessness - a layman's guide' which was well received.

In the later years after I became a consultant I used to refer my clinical problems in subfertility to Prof Gunaratne. He always had the patience to go through them and send me long answers enhancing my knowledge. When I brought out a book on subfertility in Sinhala "Obatath Babek" in 2005, he was very happy to preside at the launching held at the De Soysa Maternity Hospital. Our teacher pupil relationship continued till he stepped down from the practice due to ill-health.

Prof Gunaratne was a keen researcher and his papers brought him fame and fortune. One such paper presented at the Family Planning Association of Sri Lanka made such an impact on a visiting foreign delegate Raoul Palmer, a world famous subfertility specialist, who invited him to his clinics in Paris. There he had Infertility and Restorative Tubal Surgery. Another paper on the "Transmigration of IUCD" published in

the International Journal of Infertility brought him another scholarship to the world famous Johns Hopkins University, Baltimore, USA. It was an intensive training programme. He was exposed to some of the best in the USA. Finally as a senior commonwealth scholar he visited world famous Bournehall Clinic in the UK, where the first test tube baby was born. In the same trip he visited the fertility unit in the Royal Free Hospital London, enhancing his knowledge and skills further. These visits brought him fame and international recognition as a subfertility specialist. His interest and enthusiasm in subfertility influenced many of his trainees including myself in the direction of the subspeciality.

University Don He joined the Peradeniya medical faculty as a senior lecturer in obstetrics and gynaecology in 1971 when I was a final year medical student. Soon he achieved a name as an excellent lecturer. His surgery was neat and meticulous and it was a feat to watch him operating. In subsequent years I had the fortune of assisting him at surgery. I was fascinated by his skill at microsurgery. In 1978 during his sabbatical leave he joined the University of Nairobi, Kenya. There he did original research in to urinary fistula and presented a paper at the Kenyan Obstetrics and Gynaecology Society Scientific Sessions 1979. Since his return to Sri Lanka he continued his research work while attending to the university commitments and attended numerous scientific conferences and seminars abroad receiving international fame. Orations and lectures He delivered the Murugesu Sinnathamby Oration in 1976 and K Rajasooriya Oration in 1998. He gave the plenary lecture on Prof D A Ranasinghe in 1998 in Dhaka, Bangladesh. Religion ha never been a topic in my discussions with professor. So I was surprised to see him giving a lecture on late Mr Asoka Weeraratne who pioneered buddhist activities in Germany and also founded the Meethirigala hermitage. It was named "Life and Work of Asoka Weeraratne" and delivered on the 7 July 2007 at Mahaweli auditorium Colombo.

SLCOG He was the president of the college from 1996 to 1998. Author Prof Gunaratne followed the tradition laid down by some great medical men like Dr Lucien de Zilva and Dr R.L.Spittle in a bygone era by engaging himself in literary work. His first book was "Five Dons" in which he paid tribute to five teachers of his university days. Eminent surgeon Dr P.R.Anthonis hails his achievement as a writer in the forward. "It is not every professional man who can write and write well. The author belongs to that select few. He is not only an eminent professor of obstetrics and gynaecology, but an able writer who portrays human character an achievement brilliantly. Reading through I realised that the medical profession has gained what the journalists world had lost". "Five Dons" was followed by several novels. In 2011, his autobiography, "A Rupee in my Pocket" was published. It is a candid account of his life revealing his ups and downs and how he faced triumph and disaster. In conclusion, the following lines he wrote on the passing away of his colleague and friend Dr W.H.Fernando suits him equally well.

"He belonged to a generation far removed from modern day practice. Like many of his fold, he had the fortune to train with the very best, the masters of the art for whom one cannot find sufficient superlatives to venerate"(Sept 2003).



Compiled by

Dr B.G.A. Vidyatilake

Consultant Obstetrician and Gynaecologist

SAFE MOTHERHOOD PROGRAMME

@ District General Hospital, Nuwara Eliya

The second Safe Motherhood Programme for 2024 was successfully concluded at the District General Hospital, Nuwara Eliya, on May 31, 2024. Capacity building of health professionals, doctors, institutional nurses, and field staff was done. The programme was designed and launched under the leadership of Dr Mangala Dissanayaka, President of SLCOG, with the tremendous support of Dr Darshana Abeygunawardana, Chairman-Scientific Activities & Research and Dr Jagath N Herath, Chairman-Regional Activities & Development. Dr Sajith Jayasundara and Dr Nalin Srinath coordinated the programme on behalf of the SLCOG. Dr Mahendra Seneviratne, Hospital Director, DGH, Nuwara Eliya,

Dr M.N. Weerasooriya, Provincial Director and Dr. Asela Perera, Regional Director, participated and addressed the gathering at the inauguration. This was a one-day programme, and after the inaugural session, two parallel sessions for field staff, doctors and nurses were conducted by well-experienced senior members of the college. At the end of the inaugural program, there was a session to provide space for discussing the challenges and problems faced by the professionals with the health administrators of the area. At the end of the day, it was a very productive event pertaining to maternity care. All the members of the college who participated in the event as well as who extended support in numerous ways must be appreciated for the excellent work done.











Essentials of Obstetrics at your Doorstep

Lead by:



Dr. Mangala Dissanayaka
President
Sri Lanka College of Obstetricians & Gynaecologists

Coordinated by ;



Dr. Darshana Abeygunawardana
Chairman Scientific Activities & Research
Sri Lanka College of Obstetricians & Gynaecologists

Coordinated by ;



Dr. Prabath Randombage
Assistant Secretary
Sri Lanka College of Obstetricians & Gynaecologists

PHASE - 04

The fourth program of the project series was successfully held at the Teaching Hospital, Rathnapura, on April 26 2024. The programme was launched under the leadership of President SLCOG Dr Mangala Dissanayake. The event was coordinated by Dr Darshana Abeygunawardana, Chairman of Scientific Activities & Research, and Dr Prabath Randoombage, Assistant Secretary. Health Staff from the Teaching Hospital Rahtnapura and sub-areas joined the session. Capacity building was done for health professionals, institutional nurses, and field staff.



PHASE - 05

The fourth program of the project series was successfully held at the District General Hospital, Mannar, on 09th May 2024. The programme was launched under the leadership of President SLCOG Dr Mangala Dissanayake. The event was coordinated by Dr Darshana Abeygunawardana, Chairman of Scientific Activities & Research, and Dr Prabath Randoombage, Assistant Secretary. Health Staff from the District Base Hospital Mannar and sub-areas joined the session. Capacity building was done for health professionals, institutional nurses, and field staff.





PHASE - 06

The fourth program of the project series was successfully held at the District General Hospital, Vavuniya, on 10th May 2024. The programme was launched under the leadership of President SLCOG Dr Mangala Dissanayake. The event was coordinated by Dr Darshana Abeygunawardana, Chairman of Scientific Activities & Research, and Dr Prabath Randoombage, Assistant Secretary. Health Staff from the District General Hospital Mannar and sub-areas joined the session. Capacity building was done for health professionals, institutional nurses, and field staff.



SLCOG

WORKSHOP

2023



Colombo Advanced Fetal Medicine Workshop 2024

“Colombo Advanced Fetal Medicine Workshop” was successfully concluded on 27th of May 2024 at the SLCOG Auditorium with a participation of over 60 medical officers in the field of Obstetrics and Gynaecology. The main resource person for the day was Dr Raffaele Napolitano, Consultant in Fetal Medicine, UCLH, UK, MSc UCL/UCLH Programme Director and Honorary Associate Professor, UK. The workshop was organized by Prof Tiran Dias on behalf of the SLCOG under the leadership of Dr Mangala Dissanayake, President SLCOG.



Kandy Ultrasound in Obstetrics and Fetal Medicine Workshop 2024

“Kandy Ultrasound in Obstetrics and Fetal Medicine Workshop” was successfully concluded on May 29, 2024, at the Main Auditorium, Teaching Hospital Peradeniya, with over 50 medical officers in the field of Obstetrics and Gynaecology participating. The main resource person for the day was Dr Raffaele Napolitano, Consultant in Fetal Medicine, UCLH, UK, MSc UCL/UCLH Programme Director and Honorary Associate Professor, UK. The workshop was organized by Prof Tiran Dias on behalf of the SLCOG under the leadership of Dr Mangala Dissanayake, President SLCOG.



UPCOMING EVENTS



SRI LANKA COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

57TH ANNUAL ACADEMIC CONGRESS

"Quality health care through standards in training and service delivery" – A right of all women

30TH AUGUST TO 1ST SEPTEMBER 2024 AT HOTEL GALADARI, COLOMBO

PROF. SIR SABARATNAM ARULKUMARAN
YOUNG GYNAECOLOGIST AWARD
SLCOG 2024



"CALLING YOUNG GYNAECOLOGISTS UNDER 45 YEARS"

CALL FOR ABSTRACTS
FOR FREE COMMUNICATIONS

DEADLINE FOR ABSTRACT SUBMISSION

15TH JULY 2024

IMPORTANT DATES & ORATIONS

COLLEGE BANQUET:

31ST AUGUST 2024 @ HOTEL KINGSBURY, COLOMBO



PROF D. A. RANASINGHE MEMORIAL ORATION:
30TH AUGUST 2024 @ GALADARI HOTEL, COLOMBO

DR P. DISSANAYAKE ENDOWMENT LECTURE:
31ST AUGUST 2024 @ GALADARI HOTEL, COLOMBO



INAUGURATION:

30TH AUGUST 2024 @ GALADARI HOTEL, COLOMBO



DR ROHANA HATHTHOTUWA ORATION:
1ST SEPTEMBER 2024 @ GALADARI HOTEL, COLOMBO

VISIT OUR WEBSITE FOR
MORE DETAILS



- PRE-CONGRESS WORKSHOPS: 23RD TO 29TH AUGUST 2024
- SLCOG YOUNG GYNAECOLOGIST FORUM: 31ST AUGUST 2024

CONGRESS SECRETARIAT

+94 77 967 8787
slcogsessions2024@gmail.com
<https://congress.slco.org.lk/>



Save The Date

**SRI LANKA COLLEGE OF
OBSTETRICIANS AND GYNAECOLOGISTS**

57TH ANNUAL ACADEMIC CONGRESS

"Quality health care through standards in training and service delivery" – A right of all women

**30TH AUGUST TO 1ST SEPTEMBER 2024
AT HOTEL GALADARI, COLOMBO**



No.112, Model farm road, colombo 08
E-Mail: slcogsessions2024@gmail.com
Contact No: +94 77967 8787 / +94 11 268 9036





57TH ANNUAL ACADEMIC CONGRESS

SRI LANKA COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

"Quality health care through standards in training and service delivery" - A right of all women

30TH AUGUST TO 03RD SEPTEMBER 2024 AT HOTEL GALADARI, COLOMBO

Pre & Post-Congress Workshops

Registrations are now open

Registration Fees

Consultants - Rs 2000 /=-

PG Trainees - Rs 1000 /=-

(Per workshop)

**FREE
REGISTRATION**

for

Labour care & CTG workshop & SAFOG
Pre-congress Workshops

- +94 - 77 96 78 787
- stcogsessions2024@gmail.com
- <http://congress.stcog.lk>

No	Pre & Post Congress Workshops	Venue	Date	Participants
01	Subfertility	Auditorium, SLCOG House	19 August	Consultants / Doctors
02	Updates in labour care and physiological CTG interpretation <i>Free Registration</i>	Auditorium, SLCOG House	23 August	Consultants / Doctors
03	Comprehensive Colposcopy with Hands - on Session	Apeksha Hospital, Maharagama	26 August	Consultants / Doctors
04	Live Laparoscopy surgical workshop	University Hospital, KDU	28 August	Consultants / Doctors
05	Fetal Medicine	Auditorium, SLCOG House	29 August	Consultants / Doctors
06	SAFOG Pre-congress workshop (Breastfeeding – current issues and challenges to protect, promote and support breastfeeding in Sri Lanka) <i>Free Registration</i>	Auditorium, SLCOG House	30 August	Doctors / Nursing officers / Midwives
07	Obstetric Anal Sphincter Injury repair Hands-on	Castle Street Hospital for Women	30 August	Consultants / Doctors
08	Master the tips of laparoscopic suturing	Laparoscopy Skills Centre, Department of Surgery, UOC	4 September	Consultants / Doctors
09	Science of Energy Devices	Auditorium, SLCOG House	7,8 September	Consultants Doctors

Payments should be made at:

***Account Name: Sri Lanka College of Obstetricians & Gynaecologists
Account No: 0820 00623484 001
Bank: Seylan Bank, Borella Branch.***

Registrations can be done by visiting the SLCOG Office or calling us at +94 11 26 89 036 / +94 77 96 78 787 / +94 76 99 98 406

(Full details of each workshop along with preliminary programmes will be sooner available at the official congress web portal under the scientilife congress)

Amma & Baby

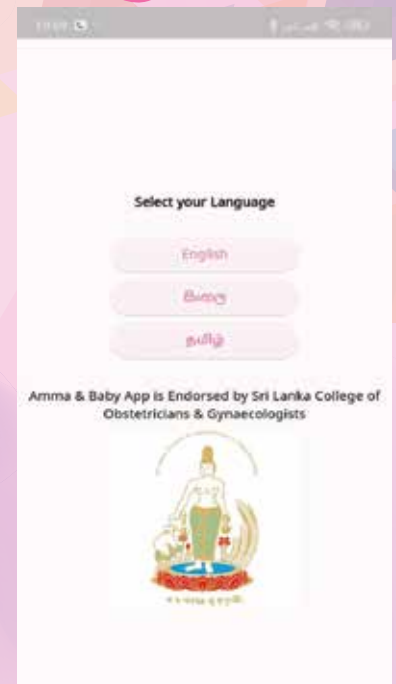
"For a Healthy Mother & Baby"



About this app

This is a mobile application that is available in both android and apple platforms. It is free and can be downloaded from Google Playstore and Apple Appstore. The app is available in all three languages (Sinhala, Tamil and English) and has been endorsed by the Sri Lanka College of Obstetricians & Gynaecologists (SLCOG).

Feel free to download and pass around to colleagues, junior doctors, nurses, midwives and of course patients.



Welcome to Amma and Baby, the ultimate pregnancy companion app for expecting mothers



Amma & Baby





SLCOG

AVURUDU &

Mini Trade Fair

2024



LADIES FORUM





Message from the **SLCOG LADIES FORUM**

As the President of the Sri Lanka College of Obstetricians and Gynaecologists Ladies' Forum, I am honored to extend my heartfelt gratitude to President, Dr Managala Dissanayake and the entire SLCOG for their unwavering support and collaboration with our forum's initiatives. I also extend my deepest thanks to all the office bearers and members of the Ladies' Forum for their dedication and commitment.

Last year, our forum embarked on a meaningful charity project where we distributed essential items to the labor rooms of five resource-poor hospitals across Sri Lanka. This initiative was particularly crucial amidst the economic challenges faced by many government hospitals at the time. The overwhelming appreciation and encouraging feedback we received prompted President to request the Ladies' Forum to continue and expand this program into the current year.

In response, we partnered with the generous contribution of "HEMAS Manufacturing (Pvt.) Ltd." (Fems) to donate essential items that will be used in labor rooms. This year, our program will align with the hospitals selected for the Safe Motherhood Program conducted by the SLCOG. Our first distribution event was held at District General Hospital Polonnaruwa on March 15th, where we provided bed jackets, cheeththas, 1500 sanitary pads for pregnant mothers, and baby napkins and frocks to both District General Hospital Polonnaruwa and Base Hospital Kanthale.

Building on this success, our second program followed suit, with essentials donated to District General Hospital Nuwara Eliya and District Base Hospital Dickoya during the Safe Motherhood Program held at District General Hospital Nuwara Eliya on May 31st, 2024. Looking ahead, we are committed to continuing this initiative during the upcoming Safe Motherhood Programs scheduled in Thissamaharama and Trincomalee.

As the Ladies' Forum, we are dedicated to enhancing our supportive role alongside the SLCOG to elevate the quality of care in obstetrics and gynaecology throughout Sri Lanka. Our mission remains rooted in compassion, solidarity, and the pursuit of improving maternal and child healthcare outcomes across our nation. In closing, I invite each of you to join us in this noble cause. Your continued support and participation are integral to the success and impact of our initiatives. Together, let us strive to make a tangible difference in the lives of mothers and infants, ensuring they receive the care and support they deserve during such critical moments.

Thank you once again to President, the council of SLCOG, and all members of the Ladies' Forum for your unwavering dedication and support. Let us march forward with determination and compassion, embodying the spirit of service that defines our profession.



Warm regards,
Dr Shiromali Dissanayake
President, SLCOG Ladies' Forum

CHARITY PROGRAMME



LADIES FORUM

Donations at DGH Polonnaruwa



Donations to DGH Nuwara Eliya





Femoston®

estradiol/dydrogesterone

17 β -estradiol
+
Dydrogesterone

Enabling a Happy Transition

Peri-Menopause
Premature
Menopause

Sequential Combined MHT



Only 'E'
E+D

Post-Menopause

Continuous Combined MHT



E+D

#1 Combined MHT Globally

Physiological

Not Androgenic

Convenient

Safer than other MHT#1

Customized

Recommended By IMS



* International Menopause Society #In terms breast cancer safety

Reference: 1. Baber RJ et al. 2016 IMS Recommendations on women's midlife health and menopause hormone therapy. Climacteric. 2016;19(2):109-150 2. Schindler AE. Classification and pharmacology of progestins. Maturitas. 2003;46:7-16

Abbreviated Prescribing Information Estradiol and Dydrogesterone Tablets Femoston® conti 1/5 mg Combipack of Estradiol and Dydrogesterone Tablets Femoston 1/10 mg Combipack of Estradiol and Dydrogesterone Tablets Femoston 2/10 mg Each film coated tablet contains: Estradiol (as hemihydrate) Ph Eur1 mg Dydrogesterone IP5mg Femoston® 1/10 mg Each of 14 white colour tablet contains: Estradiol (as hemihydrate) Ph Eur1 mg Other each 14, grey colour film coated tablets contains: Estradiol (as hemihydrate) Ph Eur1 mg Dydrogesterone IP10 mg FemostonTM 2/10 mg Each of 14 white colour tablet contains: Estradiol (as hemihydrate) Ph Eur2 mg Other each 14, grey colour film coated tablets contains: Estradiol (as hemihydrate) Ph Eur2 mg Dydrogesterone IP10 mg INDICATION: For Continuous combined; FemostonTM conti 1/5 mg Hormone replacement therapy (HRT) for oestrogen deficiency symptoms in postmenopausal women at least 6 months since last menses. For Continuous sequential; FemostonTM 1/10 mg Hormone replacement therapy (HRT) for oestrogen deficiency symptoms in postmenopausal women at least 6 months since last menses. All formulations: Prevention of osteoporosis in postmenopausal women at high risk of future fractures who are intolerant of, or contraindicated for, other medicinal products approved for the prevention of osteoporosis. Elderly population: The experience in treating women older than 65 years is limited. DOSAGE AND ADMINISTRATION: For oral use FemostonTM conti 1/5: Continuous combined. The oestrogen and the progestogen are given every day without interruption. One tablet to be taken daily for a 28 day cycle. FemostonTM 1/10 and FemostonTM 2/10: Continuous sequential. The oestrogen is dosed continuously. The progestogen is added for the last 14 days of every 28 day cycle, in a sequential manner. For FemostonTM 1/10 and FemostonTM 2/10: Treatment commences with one white tablet daily for the first 14 days followed by one grey tablet daily for the next 14 days, as directed on the 28 day calendar pack. All Formulations: Femoston should be taken continuously without a break between packs. For initiation and continuation of treatment of postmenopausal symptoms, the lowest effective dose for the shortest duration should be used. For FemostonTM 1/10: In general, sequential combined treatment should start with FemostonTM 1/10. For FemostonTM conti 1/5: Continuous combined treatment may be started with FemostonTM conti 1/5 depending on time since menopause and severity of symptoms. All Formulations: Depending on the clinical response, the dosage can subsequently be adjusted. FemostonTM can be taken irrespective of food intake. CONTRAINDICATIONS: Known past or suspected breast cancer. Known or suspected oestrogen-dependent malignant tumours (e.g. endometrial cancer), known or suspected progestogen-dependent neoplasms. Untreated endometrial hyperplasia. Previous or current venous thromboembolism (deep venous thrombosis, pulmonary embolism). Known thrombophilic disorders (e.g. protein C, protein S or antithrombin deficiency. Active or recent arterial thromboembolic disease (e.g. angina, myocardial infarction). Acute liver disease, or a history of liver disease, as long as the liver function tests have failed to return to normal. Porphyria. Known hypersensitivity to the active substances or to any of the excipients. WARNINGS & PRECAUTIONS: For the treatment of postmenopausal symptoms, HRT should only be initiated for symptoms that adversely affect quality of life. In all cases, a careful appraisal of the risks and benefits should be undertaken at least annually and HRT should only be continued as long as the benefit outweighs the risk. If any of the following conditions are present, have occurred previously, and/or have been aggravated during pregnancy or previous hormone treatment, the patient should be closely supervised such as leiomyoma (uterine fibroids) or endometriosis, risk factors for thromboembolic disorders, risk factors for oestrogen dependent tumours, e.g. 1st degree hereditary for breast cancer, hypertension, liver disorders (e.g. liver adenoma), diabetes mellitus with or without vascular involvement, cholelithiasis, migraine or (severe) headache, systemic lupus erythematosus, history of endometrial hyperplasia, epilepsy, asthma, otosclerosis Therapy should be discontinued in case a contraindication is discovered and in the following situations such as jaundice or deterioration in liver function, significant increase in blood pressure, new onset of migraine-type headache and pregnancy PREGNANCY & LACTATION FemostonTM is not indicated during pregnancy. If pregnancy occurs during medication with FemostonTM treatment should be withdrawn immediately. The results of most epidemiological studies to date relevant to inadvertent fetal exposure to combinations of oestrogens with progestogens indicate no teratogenic or foetotoxic effect. There are no adequate data from the use of estradiol/dydrogesterone in pregnant women. Lactation: FemostonTM is not indicated during lactation. ADVERSE REACTIONS: The most commonly reported adverse drug reactions of patients treated with estradiol/dydrogesterone in clinical trials are headache, abdominal pain, breast pain/tenderness and back pain. Issued on: Date (12/Feb/2016) Source: Prepared based on full prescribing information (version 2) dated 25/May/2014

® Registered Trademark of the Abbott Group of Companies



IMPROVES THE MENOPAUSAL SYMPTOMS ¹⁻³

Femoston[®] 1/10
estradiol/dydrogesterone

Femoston[®] 2/10
estradiol/dydrogesterone

Femoston[®] conti 1/5
estradiol/dydrogesterone

Femoston[®] mono
17 beta estradiol 1mg/2mg



For the use of a Registered Medical Practitioner or a Hospital or a Laboratory only.

Image for representation purpose only, not of actual patient

© Registered Trademark of the Abbott Group of Companies.

Reference: 1. Amy JJ. Femoston®: Effects on bone and quality-of-life. Eur Menop J 1995;2(4) (Suppl):16-22. 2. Stevenson JC, Durand G, Kahler E, et al. Oral Ultra-low dose continuous combined hormone replacement therapy with 0.5 mg 17β-estradiol and 2.5 mg dydrogesterone for the treatment of vasomotor symptoms: Results from a double-blind, controlled study. Maturitas 2010;67:227-232. 3. Cierad D, Conrad C, Jesinger D, et al. Clinical study comparing the effects of sequential hormone replacement therapy with estradiol/dydrogesterone and conjugated equine oestrogen/norgestrel on lipids and symptoms. Arch Gynecol Obstet 2006;274:74-80. Image for representation purpose only, not of actual patient

Abbreviated Prescribing Information Estradiol and Dydrogesterone Tablets Femoston 1/10 mg Combi-pack of Estradiol and Dydrogesterone Tablets Femoston 2/10 mg LABEL CLAIM: Each film coated tablet contains: Estradiol (as hemihydrate) Ph Eur 1 mg Dydrogesterone IP 10 mg Femoston 1/10 mg Each of 14 white colour tablet contains: Estradiol (as hemihydrate) Ph Eur 1 mg Other each 14 grey colour film coated tablets contains: Estradiol (as hemihydrate) Ph Eur 1 mg Dydrogesterone IP 10 mg INDICATION: For continuous combined: FemostonTM conti 1/5 mg Hormone replacement therapy (HRT) for oestrogen deficiency symptoms in postmenopausal women at least 6 months since last menses. For Continuous sequential: FemostonTM 1/10 mg Hormone replacement therapy (HRT) for oestrogen deficiency symptoms in postmenopausal women at least 6 months since last menses. For Continuous sequential: FemostonTM 2/10 mg Hormone replacement therapy (HRT) for oestrogen deficiency symptoms in postmenopausal women at least 6 months since last menses. All formulations: Prevention of osteoporosis in postmenopausal women at high risk of future fractures who are intolerant of, or contraindicated for, other medical products approved for the prevention of osteoporosis. Elderly population: The experience in treating women older than 65 years is limited. DOSAGE AND ADMINISTRATION: For oral use FemostonTM conti 1/5: Continuous combined. The oestrogen and the progestogen are given every day without interruption. One tablet to be taken daily for a 28 day cycle. FemostonTM 1/10 and FemostonTM 2/10: Continuous sequential. The oestrogen is dosed continuously. The progestogen is added for the last 14 days of every 28 day cycle, in a sequential manner. For FemostonTM 1/10 and FemostonTM 2/10: Treatment commences with one white tablet daily for the first 14 days followed by one grey tablet daily for the next 14 days, as directed on the 28 day calendar pack. All Formulations: Femoston should be taken continuously without a break between packs. For initiation and continuation of treatment of postmenopausal symptoms, the lowest effective dose for the shortest duration should be used. For FemostonTM 1/10: In general, sequential combined treatment should start with FemostonTM 1/10. For FemostonTM conti 1/5: Continuous combined treatment may be started with FemostonTM conti 1/5 depending on time since menopause and severity of symptoms. All Formulations: Depending on the clinical response, the dosage can subsequently be adjusted. FemostonTM can be taken irrespective of food intake. CONTRAINDICATIONS: Known past or suspected breast cancer, known or suspected endometrial cancer, known or suspected oestrogen-dependent malignant tumours (e.g. endometrial cancer), known or suspected progestogen-dependent neoplasms, Undiagnosed genital bleeding, Untreated endometrial hyperplasia, Previous or current venous thromboembolism (deep venous thrombosis, pulmonary embolism), Known thrombophilic disorders (e.g. protein C, protein S or antithrombin deficiency, Active or recent arterial thromboembolic disease (e.g. angina, myocardial infarction), Acute liver disease, or a history of liver disease, as long as the liver function tests have failed to return to normal, Porphyria, Known hypersensitivity to the active substances or to any of the excipients. WARNINGS & PRECAUTIONS: For the treatment of postmenopausal symptoms, HRT should only be initiated for symptoms that adversely affect quality of life. In all cases, a careful appraisal of the risks and benefits should be undertaken at least annually and HRT should only be continued as long as the benefit outweighs the risk. If any of the following conditions are present, have occurred previously, and/or have been aggravated during pregnancy or previous hormone treatment, the patient should be closely supervised such as: Hypertension (systemic blood pressure), or endometrial, risk factors for thromboembolic disorders, risk factors for oestrogen dependent tumours, 1st degree heredity for breast cancer, hypertension, liver disorders (e.g. liver adenoma), diabetes mellitus with or without vascular involvement, cholelithiasis, migraine (or severe) headache, systemic lupus erythematosus, history of endometrial hyperplasia, epilepsy, asthma, osteoporosis. Therapy should be discontinued in case a contraindication is discovered and in the following situations such as jaundice or deterioration in liver function, significant increase in blood pressure, new onset of migraine-type headache and pregnancy. PREGNANCY & LACTATION: FemostonTM is not indicated during pregnancy. If pregnancy occurs during medication with FemostonTM treatment should be withdrawn immediately. The results of most epidemiological studies to date relevant to inadvertent fetal exposure to combinations of oestrogens with progestogens indicate no teratogenic or foetotoxic effects. There are no adequate data from the use of estradiol/dydrogesterone in pregnant women. Lactation: FemostonTM is not indicated during lactation. ADVERSE REACTIONS: The most commonly reported adverse drug reactions of patients treated with estradiol/dydrogesterone in clinical trials are headache, abdominal pain, breast pain/tenderness and back pain. Issued on: Date (12/Feb/2016) Source: Prepared based on full prescribing information (version 2) dated 25/May/2014



For full prescribing Information please contact:
CIC Holdings PLC
"CIC House", 199, Kew Road, Colombo 02, Sri Lanka.
Tel: +94 112 359 359 Fax: +94 112 327 132
Web: www.cic.lk