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hepatitis. The majority of the patients among anti TB DIH were having pulmonary TB with a percentage of 53.9%. The majority of them were smear positive with a percentage of 63.4%. The majority of the anti TB DIH patients were treated with category I with a percentage of 92.2%. Most of the patients have received two tablets per day according to their weight. The majority of the patients have developed DIH after 14 days. 52.9% of the patients were not overdosed with rifampicin. Only 51% were overdosed with isoniazid. The majority of them were overdosed with pyrazinamide with a percentage of 63.7% which was supported by previous study evidences. 94.1% of the DIH patients were overdosed. The majority of the DIH patients were not consuming alcohol. Only 9.8% of the DIH patients were abusing drugs while the majority were not. Among those patients who developed anti TB DIH there were a majority of age <55 years, weight >50kg, males, PTB, occurrence >14days of treatment, pyrazinamide over dosage according to the weight. There was no significant association between the duration of treatment prior the development of anti TB DIH and age, sex, co morbidities, site, alcohol consumption, abuse of drugs, overdose of rifampicin, pyrazinamide and isoniazid.

Conclusions: The prevalence of anti TB DIH in Sri Lanka in 2013-2015 is 1.4%. There is a significant reduction of the prevalence of anti TB DIH in Sri Lanka when compared with the last study done in 2005 which was found to be 9.7%.

PP41

Quality of life among patients with intestinal stoma: Preliminary results from the Apeksha Hospital, Maharagama, Sri Lanka

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Objective: To describe quality of life (QOL) among patients with intestinal stoma at Apeksha Hospital Sri Lanka.

Methods: A descriptive cross sectional study was done on conveniently selected patients with intestinal stoma (n=50) attending ostomy care clinic and wards at Apeksha Hospital, Sri Lanka. Pre-tested interviewer administered questionnaire adapted from City of Hope Quality of Life questionnaire for ostomy patients was used to collect data. Questionnaire was pre tested among 10 patients with intestinal stoma who did not participate in this study to determine acceptability, feasibility and appropriateness. Ethical approval was obtained from the Ethics Review Committee, Faculty of Medical Sciences, USJ.

Results: The mean ages were 58.23 ± 12.54 (SD) and 57.50 ± 9.56 (SD) years respectively for males and females. Gender ratio was 1:1. Colostomies were applied to 94% while 6% had ileostomy. Cancer was the main reason for stoma in 84% patients and vaginal fistula, trauma and bowel obstruction were other common indications for surgery. QOL assessed in four domains (physical, psychological, social, spiritual well-being) and mean overall QOL in stoma patients is 5.72 ± 1.22 (SD). Physical and psychological wellbeing in turn 76.6% and 76% indicated poor and moderate outcomes while social and spiritual wellbeing obtained 64.6% for poor and moderate outcomes in each category. Severe and moderate impact on overall QOL was seen in 89.4% while 10% had mild impact on QOL.

Conclusions: The findings highlighted that most of the subjects reported low level of QOL. There is a need of tailored interventions to improve QOL among patients with intestinal stoma.