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சுகாதார, போசணமற்றும் சுதேசவத்திய அமைச்சு
Ministry of Health, Nutrition & Indigenous Medicine

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All Provincial Secretariat of Health
All Provincial/ Regional Directors of Health Services,
All Deputy Provincial/ Regional Directors of Health Services,
All the Heads of Decentralized Units/Special Campaigns,
Director/ National Institute of Health Sciences,
All the Heads of Health Institutions/All Medical Superintendents/District Medical
officers/Medical Officers in Charge of Hospitals,
Chief Medical Officer of Health, Colombo Municipal Council,

Ending TB in Sri Lanka by 2025: Strengthening the screening of presumptive tuberculosis (TB) patients

The National Programme for Tuberculosis Control and Chest Diseases (NPTCCD), Ministry of Health, Nutrition and Indigenous Medicine is aiming to reach end TB targets by the year 2025. This initiative needs scaling up of current strategies on screening, detection and management of TB patients.

One of the major challenges of TB control in Sri Lanka is the gap of about 4,000 cases between the World Health Organization estimated incidence of 13,000 cases per year and the numbers of patients identified as TB. Therefore, it is utmost important to screen all patients suspected of TB (presumptive TB) in all possible occasions. A presumptive TB patient is a person, who presents with symptoms or signs suggestive of TB, particularly with cough lasting for more than 2 weeks.

Latest guidelines recommend to do sputum examination and a chest X ray for any symptomatic patient suggestive of TB (Annexure I). Further, it is necessary to maintain a presumptive TB register at each outpatient department (OPD). It is expected to refer about 2% of OPD attendees for TB screening, the usual estimated proportion of patients with respiratory symptoms.

The sputum microscopy testing is carried out at Microscopic Centers located in identified hospitals/ District Chest Clinics. Presently, most of the microscopic centers are underutilized due to inadequate referrals (Annexure II).

Please advocate your staff in OPD, Medical wards, Pediatric wards, other wards and clinics to carry out following actions to end TB by 2025 in Sri Lanka.

- 1) Screen and refer all patients with symptoms and signs suggestive of TB for sputum microscopy and chest X ray (as per availability). Hospitals, without microscopy facilities shall collect and transport sputum samples to nearest microscopy center.
- 2) Provide special emphasis on high risk groups(elderly, diabetics, patients with chronic kidney diseases and other immunosuppressed) presenting with symptoms suggestive of TB (i.e.,cough for any duration) and refer them for sputum microscopy and chest X ray.
- 3) Facilitate carrying out chest X rays for OPD referrals of presumptive TB patients by giving priority.
- 4) Maintain presumptive TB registers in the OPD(Annex III) and monitor daily by identifying the missing cases between OPD and Microscopy center and take necessary actions.
- 5) Maintenance and review of a presumptive TB register is a responsibility of Senior Medical Officer (OPD).

Your valuable contribution in ending TB in Sri Lanka by 2025 will be highly appreciated. Please contact NPTCCD (Tel: 011-2368386/ District Chest Clinics for more information (Annex IV)

Thank you,



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