0112669192,0112675011 දුරකථන මගේඅංකය 0112698507,0112694033 தொலைபேசி எனது இல 0112675449,0112675280 Telephone My No. ෆැක්ස්) 0112693866 0112693869 பெக்ஸ் ඔබේඅංකය Fax)0112692913 உமது இல Your No. විද්සුත් තැපෑල,)postmaster@health.gov.lk மின்னஞ்சல் முகவரி දිනය e-mail சுவசிரிபாய திகதி වෙඞ්අඩවිය) www.health.gov.lk Date SUWASIRIPAYA இணையத்தளம் website

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General Circular Number: 91.- 76 / 2020

DDG-NHSL, DDG-NH Kandy,

All Provincial Directors of Health Service,

All Regional Directors of Health Service,

Hospital Directors/Medical Superintendents/Heads of Medical Institutions,

Director/ National Institute of Health Sciences.

Chief Medical Officer of Health/Colombo Municipal Council,

All District Tuberculosis Control Officers (DTCOs)

Baseline and Follow-up investigations for Tuberculosis patients who attend to **District Chest Clinics**

Annually nearly 8000- 9000 patients with Tuberculosis have been reported in Sri Lanka. Case fatality rate of TB in Sri Lanka remains at 6%-7% without any significant reduction during the last few years. Hence, above 500-600 patients with TB die annually. Significant proportions of TB patients are in the age group of above 55 and have one or more medical co-morbidities. Treatment success rate of patients with TB which is currently stagnated at 84%.

To achieve the End TB targets in 2025, it is mandatory to reduce 95% of the deaths of TB patients. During 2019, 70% of patients who died of TB had a co-morbid condition and more than 50% had diabetes. In order to achieve the objectives, proper management of co morbidities during the period of TB treatment is essential.

Therefore, following investigations should be carried out in all patients who are diagnosed with TB at the initiation of treatment.

1.Full Blood Count

2.Blood sugar (FBS with or without PPBS)

3.SGPT(ALT), Serum Bilirubin

4.S. Creatinine

5.ECG

6 Chest X ray

7.HIV ELISA Screening Test

8. Any other required

- Furthermore, it is the responsibility of the District Chest Clinic staff to ensure that all patients diagnosed with TB having medical co-morbidities to be discussed with Consultant Respiratory Physician and arrange relevant specialist clinic referrals.
- On follow up visits, it is mandatory that patients adhere to the treatment recommended by the specialized clinics and make sure the medical conditions are under control (Blood Pressure, Blood sugar, S. Creatinine).
- The referrals and lab investigation findings should be documented in the patient's clinic records.
- District chest clinics in which basic investigation facilities are not available should arrange investigations from the nearest Health Institutions/Hospital.

Dr. Asela Gunawardana

Director General of Health Services,

Ministry of Health

Dr. ASELA GUNAWARDENA

Director General of Health Services

Ministry of Health
"Suwasirlpavs"

385 Rev. Baddegama Wirnalawansa Thero Mw., Colombo 10.

CC: Sri Lanka College of Pulmonologist Ceylon College of Physicians Sri Lanka College of Internal Medicine Sri Lanka College of Endocrinologist Sri Lanka College of Pediatricians