



# **Sri Lanka Medical Association**

## **128<sup>th</sup> Anniversary International Medical Congress**

*“Connect, Communicate, Collaborate for  
Improved Health and Healthcare”*

**Inauguration on 5<sup>th</sup> July 2015**

**Cinnamon Grand, Colombo**

**Main Congress from 6<sup>th</sup> – 8<sup>th</sup> July 2015**

**Galadari Hotel, Colombo**

**Results:**

Of 67 participants, the proportion of females and males were 70.6% and 29.4% respectively. More than 90% of elders were below 74 years of age. Half of the participants (45%) were widows and 41.79% of them live with children and look after grandchildren, particularly females (77.61%).

Disease prevalence (non-communicable) is 40.29% in widows population and (32.83%) among others. High blood pressure was most common (44.77%) and access to clinics were high (68.65%). Although vegetable intake is high, fruit consumption is low.

Income generating opportunities are important in active aging, but larger proportion (77.61%) of respondents, particularly females, had no involvements. Farming is the common occupation (22.38%) among elders. Government subsidiaries (50%) and donations from children were the main income for the rest of the group. Sixty five percent of study population live below Anuradhapura district official poverty line – less than Rs 3713 per month.

**Conclusion:** Most of the existing life-style characteristics of elders in rural villages are not compatible with active ageing principles. These findings highlight the need of programs to promote active aging in rural areas and provide background information useful for planning.

Overweight and obesity have been identified as important modifiable risk factors for the development and progression of KOA and more common in female. The aim of this study is to find out the gender differences in the association between BMI and KOA in Jaffna District.

**Method:** Based on American College of Rheumatology classification, 837 KOA subjects were screened and 250 KOA subjects of both genders, aged  $\geq 40$  years were randomly selected at Out Patients Department of Ayurvedic Hospitals in Jaffna District from January 2013 to January 2014. Data were collected by standardized interviewer administered questionnaire. Data were analyzed by SPSS version 16. This study received ethical approval from Faculty of Medicine, University of Jaffna, and registered at SLCTR (No: SLCTR/ 2012/ 009).

**Results:** The majority of the female 79 (31.6%) and 27 (10.8%) male subjects were in the overweight group (23.0 - 27.4) and 64 (25.6%) female and 13 (5.2%) male subjects were in the obese group ( $> 27.5$ ). One way ANOVA revealed that the mean BMI of the female {26.27(SD  $\pm$  4.10)} was highly significant than male {24.13 (SD  $\pm$  3.87)} KOA subjects (F=14.56; P=0.000).

**Conclusion:** The present study results support a positive association between BMI and KOA in both genders.

**Poster session 9****PP146****Prevalence of parent initiated medication in children- a systematic review**

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**PP145****Association between body mass index and knee osteoarthritis among patients seeking ayurveda medicine in Jaffna District**

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**Introduction & objectives:** Knee Osteoarthritis (KOA) the most common form of arthritis, is a progressive joint disorder characterized by gradual loss of cartilage and the leading cause of disability in the elderly. Body mass index (BMI) is suggested as the most appropriate determinate of healthy weight range.