



GMOA

THE GOVERNMENT MEDICAL OFFICERS' ASSOCIATION

No.275/75, Professional Centre, Prof. Stanley Wijesundara Mawatha, Colombo 07

ESTABLISHED IN
1926
TU No. 291

Tel : 2580886 / 2055415 / 0718552552
Fax : 4518668 / 2503586
Web : www.gmoa.lk
Email : info@gmoa.lk
office@gmoa.lk

GMOA Situational Report of COVID-19, Sri Lanka – 24th March 2020 (4 pm)

1. COVID 19 has begun to spread throughout our country. Prevention of the further spread of the disease and mitigation efforts must be followed through.
 2. As of today, 99 patients (101-2 = 99) are currently receiving treatment for COVID 19. Two patients are currently receiving ICU care, and two patients have fully recovered.
 3. Nineteen thousand (19,000) of our population may have been exposed to this disease condition, and they are now under the observation of Medical, Military, and Administrative structures.
 4. As requested by GMOA with technical evidence, His Excellency the President has completely halted the entrance of individuals into the country by shutting down the airport and harbour.
 5. We must now act accordingly by preventing those who are diseased and their contacts from further spreading the disease.
 6. There are three distinctive treatment arms involved:
 - a) Primary prevention: Preventing individuals from becoming infected
 - b) Secondary prevention: Treatment of infected individuals
 - c) Tertiary prevention: Management of complications and morbidities
 7. WHO has explained four stages of COVID-19 :
 - I. No Cases
 - II. Sporadic Cases
 - III. Clusters
 - a) **Home Clusters***
 - b) Small Groups of Clusters (e.g., Village Clusters)
 - IV. Community Transmission
- *Sri Lanka is now at Stage III(a)
8. At present, Sri Lanka is in Stage III(a), but once the curfew has been lifted, we may proceed to Stage III(b) or stage IV.



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9. The first case was identified in Sri Lanka on the 11.03.2020 and today, 24.03.2020 can be defined as **Day 14**.
10. We have two types of COVID-19 patients as of today
 - a) Confirmed Cases (by PCR)
 - b) True Cases (Actual number of cases) – Total number of Patients including those who have not presented to medical attention
11. At present (Day 14), a total of 101 patients have been confirmed as positive by PCR testing- 10(a) [Total number of confirmed cases – 101]
12. Based on estimates of Hubei province, China (published by John Hopkins Hospital, USA) at present, the number of True Cases should be 8-fold of the Current Confirmed Cases. [10(b) is eight folds of 10(a)]
13. Of the 101 Confirmed cases, 32 are from those who arrived at the airport and quarantined directly and 69 from the community. Therefore, it can be technically assumed that at present, 550 infected individuals are circulating within the population. A portion of this 550 maybe under either in quarantine centres or under home quarantine. [**Calculation: (101-32) x 8 = 552**]
14. These 550 possible patients have had a total of 19,000 contacts. As such, the Epidemiology Unit, Police Department, Military Intelligence, and the Administrative officers are currently actively involved in tracing these contacts.
15. Since this cohort of 19,000 individuals may be at present spread throughout the island, Sri Lanka per se is **at risk**. The districts of Colombo, Gampaha, Kalutara, and Puttalam can be identified as **high-risk areas**.
16. Till 15.03.2020 free movement took place within the island (No Social Distancing)
17. Subsequently, from 16.03.2020 to 19.03.2020 as airports were shut-down, schools were closed, and Public Holiday was declared, it can be considered that 50% social distancing took place.
18. From 20.03.2020 onwards, as curfew was imposed, it can be considered that 75% of social distancing is taking place.



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19. If movement freely takes place (no social distancing), one individual can infect nearly 500 others within 30days; in 50% social distancing, one individual can infect 15 others, thus by 75% social distancing, the ability to infect others is only 2.5 per one infected person within 30days.
20. Therefore, it is essential to note that if the curfew is lifted, social distancing will be considerably affected.
21. Based on this, the following predictions can be made:
 - a) Considering Western nations that have been unsuccessful in carrying out social distancing, it can be assumed that, between the period of 25.03.2020 and 07.04.2020, if present social distancing is not carried out, the numbers will face a rapid increase. Thus, if the citizens of Sri Lanka follow through with the health advice that is given, we can assume that there will be a favourable outcome in the subsequent two weeks.
 - b) If an adverse outcome were to result
 - a) The capacity of physical resources would reduce in quantity and quality
 - b) If advices are not followed through by the public; health care workers would have to be subjected to quarantine due to exposure to infected persons and thus cause a considerable decline in human resources

Therefore, Sri Lankans should be advised to incorporate the following into their life and lifestyles:

1. Finances: When interacting with banks, social distancing should be maintained as recommended.
2. Dry Rations: A mechanism should be set in place to distribute dry rations and other essential goods by the coordination of the disaster management unit and the divisional secretariat with the assistance of the health sector, police, and armed forces.
3. Fresh produce: A similar mechanism as above should be set in place to ensure the distribution of these goods.
4. Medications and medical goods: Necessary medications and medical goods could be given via a mobile service, which should be arranged with the Ministry of Health. To do this, a system can be set in place in collaboration with the Ministry of Health, Telecommunication partners of Sri Lanka.
5. As the public will have to remain indoors due to curfew, they may follow the advice given by the GMOA to stay healthy and disease-free.

Government Medical Officers' Association