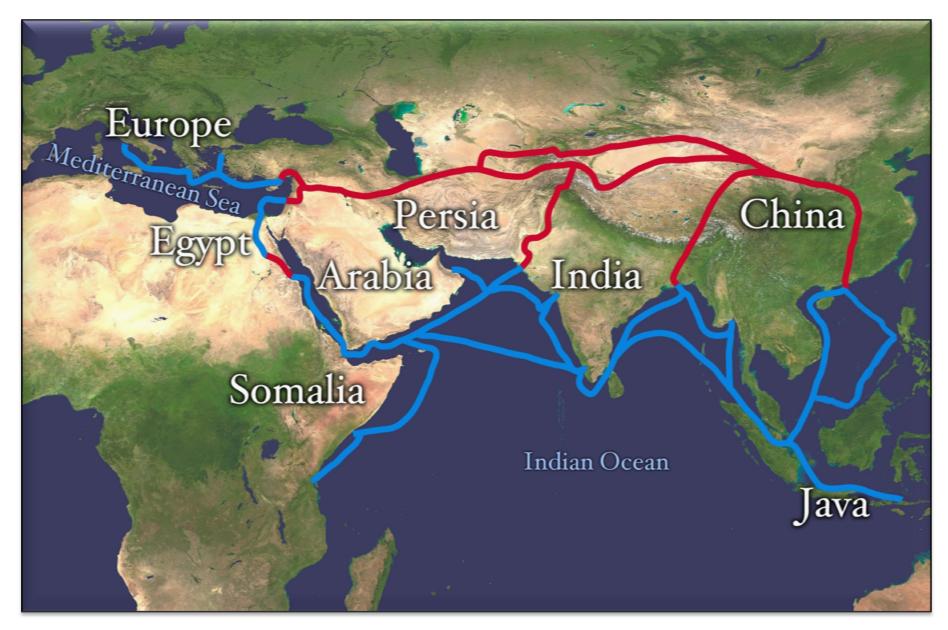
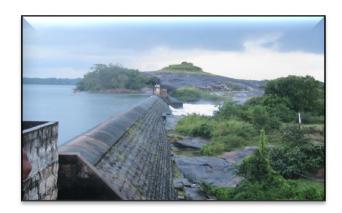
Creating the Ecosystem for Taking Genetics from Bench to Bedside in a Developing Country: A Personal Experience from Sri Lanka

Prof. Vajira H. W. Dissanayake MBBS, PhD, FNASSL
Professor and Medical Geneticist
Human Genetics Unit, Faculty of Medicine
University of Colombo









300 BC 161-137 BC

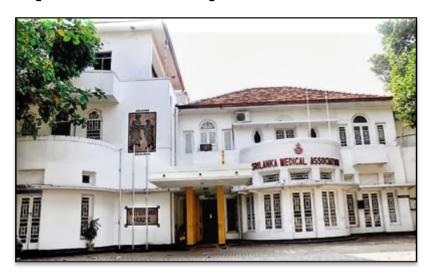




Mihintale Hospital - The most ancient hospital in the World 437 – 367 BC



Colombo Medical School [Established 1870] - The second oldest Medical School in Asia



Sri Lanka Medical Association [Established 1887]
The oldest National Medical Association in Asia and Australasia

Human Genetics Unit

www.hgucolombo.org



Faculty of Medicine, University of Colombo (Established in 1983)

HOME HISTORY TEAM MEETINGS AWARDS SERVICES EDUCATION RESEARCH POLICY ETHICS AWARENESS DONATE GALLERY CONTACT US

UPCOMING

mark your calendars

International Conference on Birth Defects 2014

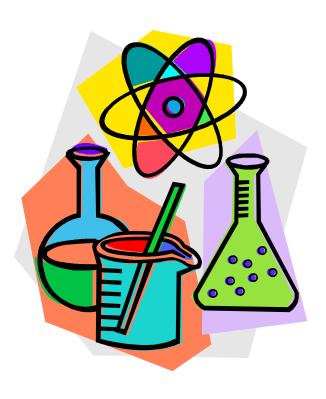
Upcoming Conference

Human Genetics Unit of the Faculty of Medicine University of Colombo is the only centre in Sri Lanka dedicated to providing clinical genetic services including genetic testing and genetic counselling. In addition we conduct both undergraduate, postgraduate, and CME courses in genetics for medical and allied health professionals and programmes aimed at raising genetic awareness among the public. We have an active research programme in reproductive genetics. We play in advocacy to make genetic services available to the people of Sri Lanka and contribute to policy formation in the field of genetics in Sri Lanka.

Only Medical Genetics Center in Sri Lanka

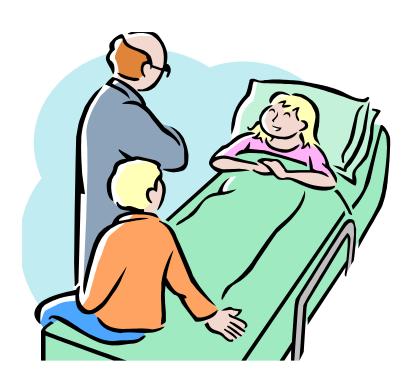
Provide Clinical /Diagnostic Genetic Services, Provide Undergraduate and Postgraduate Training, and Conduct Research by it self and in collaboration with academic and the private sector both nationally and internationally

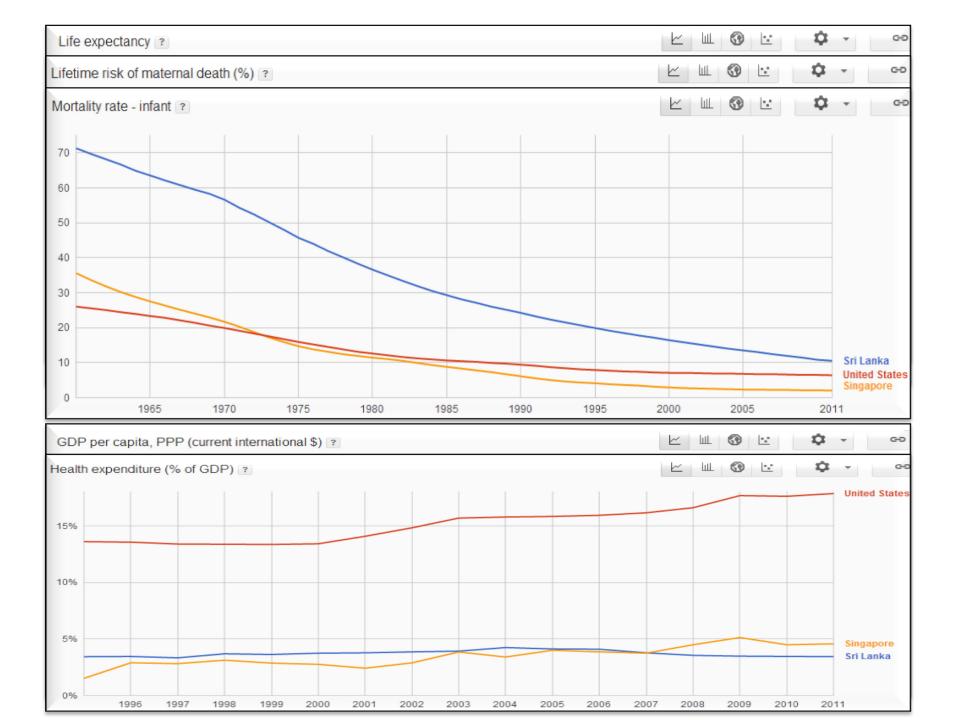
Serving a Population of 20.1 Million People



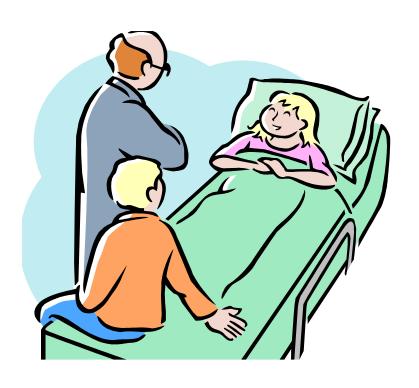












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Faculty of Medicine, University of Colombo (Established in 1983)

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Serving a Population of 20.1 Million People

Vision

To help Sri Lankan families live healthier and happier lives.

Mission

To be the leading Translational Genomic Medicine Institution in South Asia by facilitating the transfer of technology from bench to bedside in the field of genomic medicine by developing clinical genetics and genetic diagnostic services; training medical and allied health staff to provide medical genetics services; conducting genetic research and engaging in advocacy to promote universal access to and availability of genetic services.

International Collaborations

International Networks

Intentional Genetic Education Network (IGEN)

Forum for Ethics Review Committees in Asia and the Western Pacific (FERCAP)

European Molecular Quality Network (EMQN)

Pan Asian Personal Genomics Initiative

Indo-UK Genetics Network Canada University of British Columbia

UK **Kings College, London University of Durham University of Leeds**

> **Norway University of Oslo**

France Pasteur Institute

India

Institute of Gerlomic & Integrative Biology Maniple institute of Regenerative Medicine

Nepal

National Academy of Medical Sciences **Global Hospitals**

Singapore

National University of Singapore

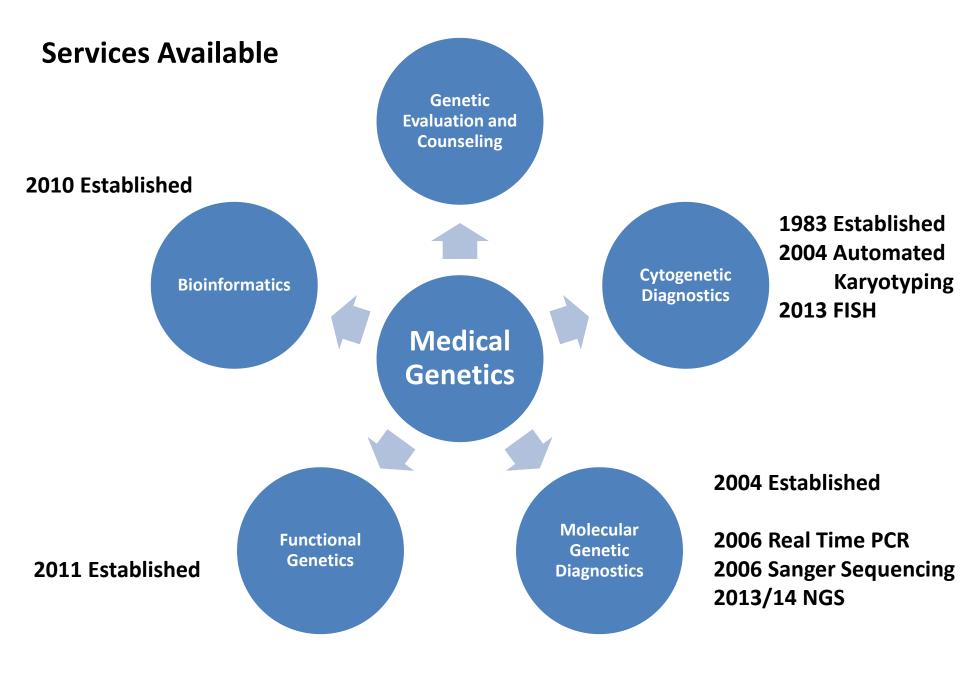
International Collaborations with 16 institutions in 8 countries In 3 continents 5 Networks

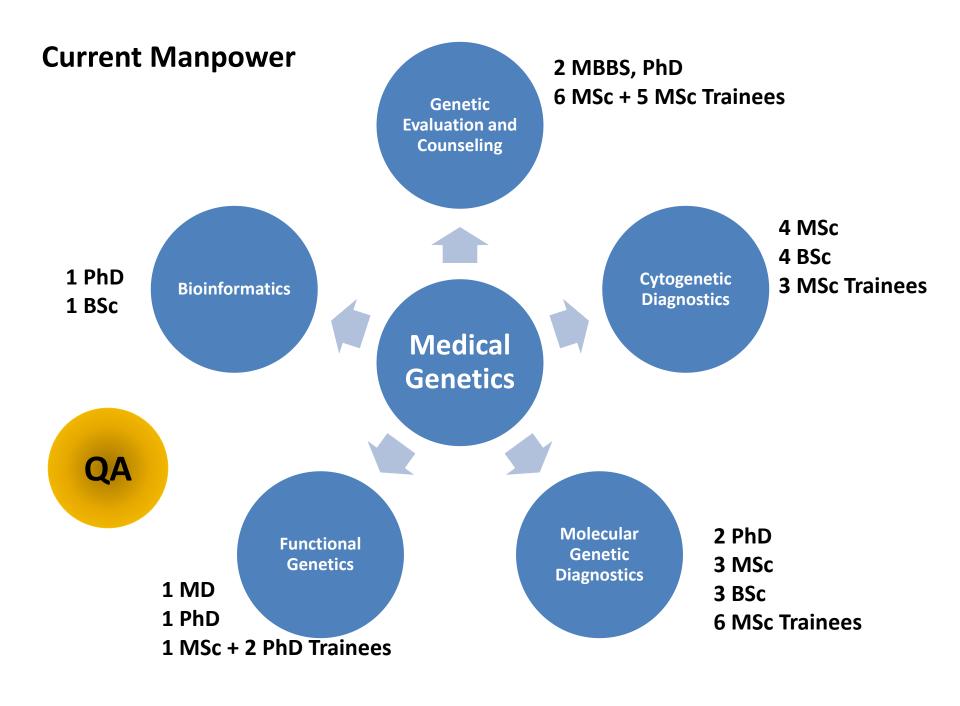
USA

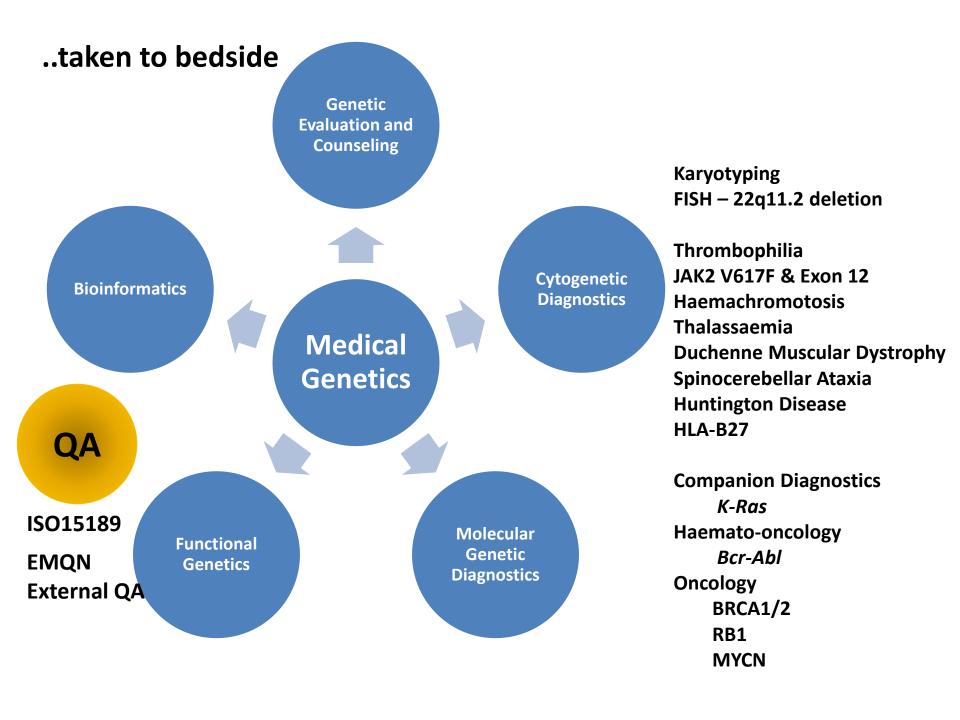
University of Houston Pennsylvania State University **University of Texas**

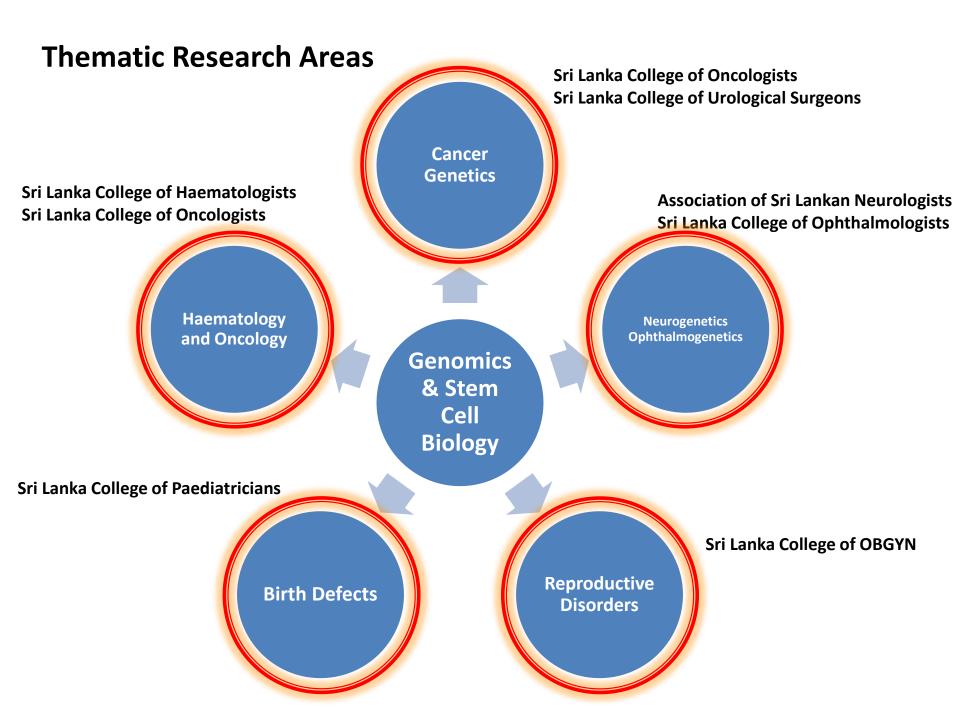
Italy

Cure2Children Foundation









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Singapore

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International Collaborations with 16 institutions in 8 countries In 3 continents 5 Networks

USA

University of Houston Pennsylvania State University **University of Texas**

Italy

Cure2Children Foundation

Thematic Research Areas

Sri Lanka College of Oncologists Sri Lanka College of Urological Surgeons

Sri Lanka Coll Sri Lanka Coll RESEARCH/Original article

Development and implementation of a web-based continuing professional development (CPD) programme on medical genetics Journal of Telemediane and Telecare 19(7) 388–392 © The Author(s) 2013

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Gumindu GAK Kulatunga¹, Rohana B Marasinghe², Indika M Karunathilake³ and Vajira HW Dissanayake⁴

Summary

Sri Lanka Colle

We developed, implemented and evaluated a web-based continuing professional development (CPD) programme on medical genetics. Development of the CPD programme followed the ADDIE model, i.e. Analysis, Design, Develop, Implement and Evaluation. An invitation to participate in a needs analysis survey was sent to all doctors on the email list of the Sri Lanka Medical Association. A total of 129 completed surveys was received (57% of the 228 who accessed the online survey). The average age of respondents was 42 years (range 27-81). The male: female ratio was approximately 2:1. Almost all respondents (96%) selected web-based CPD programmes, or web-based and conventional lectures, as their preferred method of learning. The

e of OBGYN

kan Neurologists

phthalmologists

Birth Defects

Reproductive Disorders



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Expand Cancer Genetic Services

Rationale

Cancer incidence in Sri Lanka has increased 200% in the past 10 years.

The national cancer drug budget is increasing at an alarming rate.

Oncologists are interested in improving cancer genetics services including optimising therapy based on genetic profile of tumours to improve patient outcomes.

Strategies

Promote using family history as a tool for identifying families with inherited cancer syndromes in collaboration with the National Cancer Prevention Programme [Already commenced].

Provide CME to oncologists in partnership with the Sri Lanka College of Oncologists [Already commenced]

Improve haemato-oncology diagnostic service

[Training already planned in collaboration with King's College, London]

Introduce companion diagnostics for cancer

k-RAS [already Introduced]

EGFR mutation testing and HER2/NEU testing [identified for introduction]

Introducing NGS and Clinical Bioinformatics services for tumour tissue genomics.

Prevent and 'Cure' Thalassaemia

Rationale

60-100 children are born with thalassaemia in Sri Lanka every year. [15 % 2nd child in the family]

The total thalassamic patient population of approximately 3000 in Sri Lanka take up 5% of the annual drug budget of the national health service for blood transfusions and ion chelating therapy which is provided free of charge to the patients.

Current HPLC based national screening programme is expensive and as such has not achieved the expected coverage.

Pregnancy termination is not legal in Sri Lanka. Even if legalised would be culturally unacceptable. Cost of one BMT is equal to one year's cost of blood transfusions and iron chelation.

Strategies

Introduce a cost effective population based screening programme for carrier detection using high throughput SNP genotyping and counseling.

Strengthen counseling services for families with thalassaemia.

Support the initiative to establish a bone marrow transplantation center for thalassaemia.

Conduct research to characterise clinical outcomes with primary and secondary genetic modifiers of thalassaemia with the view to using the genetic profile to optimise treatment converting the disease from a fatal one to a non fatal manageable illness.

Prevent and Control Birth Defects and Inborn Errors of Metabolism

Rationale

Sri Lanka is unable to meet MDG4 because birth defects account for 10.1% of Neonatal Death and 18% of Infant Death.

Pregnancy termination is not legalised and and even if legalised would be culturally unacceptable.

Most cases of birth defects go undiagnosed (Diagnostic yield of chromosome culture and karyotyping is approximately 5%. Microarray can improve this up to approximately 30%.)

Take up of genetic testing is low as genetic tests in the national health service are out of pocket for patients.

There is no nationwide new born screening programme although there are limited programmes for neonatal screening for hypothyroidism.

Strategies

Increase awareness about birth defects and prevention and control of birth defects
International Conference on Birth Defects will be held from 9 to 12 February 2014
Introduce diagnostic microarray testing.

Advocate with the Ministry of Health for reimbursement for genetic testing.

Advocate with the Ministry of Health to establish a country wide newborn screening programme.

Improve Genetic Literacy Among Medical and Allied Health Professionals

Rationale

Although there are 8 Medical Schools there is only one academic medical genetics department.

All medical consultations in Sri Lanka before board certification have to serve a mandatory period of at least 1 year abroad (usually in UK or Australia), but when they return, although 'genetically literate', they do not know what genetic services are available.

Genetics is not taught in most allied health courses.

Strategies

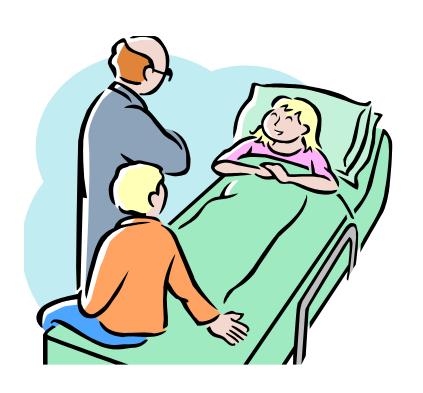
Introduce an online CME courses (Already commenced)

Conduct symposia and workshops with annual sessions of professional medical colleges and associations. (Ongoing)

Advocate for adoption of a core-curriculum in genetics in medical schools and in allied health courses (Already commenced with the IGEN conference in June 2013).

Establish the South Asian Genetics Education Network to promote interaction between South Asian Genetics Educators (Already commenced with the IGEN conference in June 2013. A proposal has been submitted to External Affairs Ministry for submission to the South Asian Secretariat).

Establish HGU-NAMS collaborating center in Kathmandu, Nepal (Already commenced).





Thank you