In Ceylon there has been no marked change in the pattern of disease since malaria and other major communicable diseases have been brought under control. A five-year anti-malaria programme aimed at wiping out malaria completely from the island has been formulated. This is to be the last stage of the battle against this disease.

According to the demographic records, the mortality rates are the lowest ever reached in Ceylon: the birth rate is 35.3 while the crude death rate is 9.7 per 1,000.

Of the notifiable diseases, typhoid fever and the dysenterics still maintain their high incidence. A division of communicable diseases has been set up within the Health Directorate, and epidemiological investigations into the outbreaks of typhoid, dysentery, smallpox, etc., have been made.

The most important public health problems of the country are (1) unsatisfactory water supply and environmental sanitation, and (2) poor nutrition. The need for urgent action in these fields is being felt. It has been decided to set up a National Water Resources Board to take over the control of water supplies, sewerage and drainage. In order to improve the nutritional standard, the Government is taking co-ordinated action with the various departments and ministries such as those of Food and Agriculture, Health, Education, and Fisheries.

Considerable building activities have been undertaken by the Government for the expansion of hospital and other public health facilities in the island.
Aim of the project. To upgrade the Children's Department of the Kalutara Health Unit Hospital; to integrate the preventive and curative sides of child care at the hospital and in the field; to improve public-health nursing in the Health Unit and train various categories of health personnel.

Assistance provided by WHO during the year. (a) A paediatrician and a public health nurse; (b) An international twelve-month fellowship.

Probable duration of assistance. Until the end of 1963.

Work done during the year. The original objectives were reached at the beginning of 1956, and the scope of the project was then widened. As a result, assistance was given to six paediatric departments in provincial hospitals in their efforts to develop consultative services for nearby peripheral units and health units. Some of the practices and procedures developed at Kalutara were introduced into other hospitals.

A special clinic for follow-up of protein malnutrition cases was started in Kalutara. Preliminary findings indicated that protein malnutrition was uncommon in children who regularly visited the child welfare clinics.

Groups of nurses were given refresher courses in paediatric nursing. Several lectures and demonstrations were also given in Kalutara in connection with training courses for public-health educators and public-health nurses.

The paediatrician completed his term of service in February 1959 and left the project after handing over his duties to his WHO successor. The public health nurse proceeded on study leave in August 1958, and a suitable replacement is under recruitment.

Aim of the project. To assess the work of the national venereal-disease control programme since the end of 1953 (when WHO staff was withdrawn).

Assistance provided by WHO during the year. A consultant for six weeks.

Work done. The venereal-disease control project in Ceylon started in July 1951 with assistance from WHO. At the end of 1953, the WHO staff was withdrawn, and since then the programme has been carried on successfully.
by national personnel. WHO assigned a short-term consultant in November 1958 for a period of six weeks to assess the control programme. According to his observations:

(a) The Central Clinic, Colombo, now provides a high standard of diagnosis, treatment and case-finding facilities and is a satisfactory training centre for all grades of staff required for the expansion of the anti-venerale-disease campaign. Its figures show a decrease in cases of early, acquired and congenital syphilis, whilst the seropositivity rates in expectant mothers has fallen from 5% in 1951 to 1% in 1957. The problem of controlling gonorrhoea remains, however, a difficult one.

(b) There are eight major outstation venereal-disease centres, and another seven are aimed at. Smaller peripheral clinics are also in operation. The rate of progress in outstation clinics has varied, since it depends upon the availability of staff for recruitment and training. A satisfactory reduction in all stages of syphilis and some decline in gonorrhoea have taken place.

(c) Routine ante-natal serological testing and prevention of congenital syphilis have progressed well in Colombo; progress is slower elsewhere but should achieve comparable results in due course.

(d) A well-sited port clinic in Colombo was opened in October 1958 and has made a promising start.

Recommendations for further improvements in the administrative and technical aspects of anti-venerale-disease work in Colombo, the outstation clinics and the port clinic were made by the consultant, and his report was submitted to the Government.

Ceylon 23 Medical Stores Management


Aim of the project. To develop the organization and administration of medical stores.

Assistance provided by WHO during the year. A consultant for three months.

Work done. A short-term consultant was assigned from October to December 1958. During his earlier assignment as medical stores management officer from 1952 to 1954 he had assisted the Government in improving the organization and administration of civil medical stores. The present visit was intended as a follow-up of his previous recommendations.

He found that considerable improvements in stores management had been effected in the period between the two assignments. Further study of the administration of the department showed a need for delegation of greater responsibility to the Superintendent of Civil Medical Stores and for more flexibility in the machinery of tender boards and boards of survey. Short-term and long-term development programmes were suggested.

The report of the consultant and his discussions with the national staff should prove to be a useful guide for the organization and management of medical stores administration in Ceylon.

Aim of the project. To survey the extent of the tuberculosis problem; to establish a model tuberculosis service; to train medical and paramedical personnel in diagnosis and prevention.

Assistance provided by WHO during the year. A one-month regional fellowship.

Probable duration of assistance. Until the end of 1961.

Work done during the year. It has not yet been possible to recruit a statistician to revise the system of records and reports in chest clinics and other institutions dealing with tuberculosis and to organize a central tuberculosis records office, but every effort is being made to secure one.

A regional one-month fellowship was awarded to a medical officer for study at the Tuberculosis Chemotherapy Centre, Madras.

Ceylon 35 Environmental Sanitation, Kurunegala (March 1955 - ) UNICEF

Aim of the project. To set up two pilot projects in rural areas to improve water supplies and excreta disposal and to train personnel in environmental sanitation; to develop a health education programme that will secure the co-operation of the people and prepare the community for the sanitation programme; to apply the experience so gained to the national programme.

Assistance provided by WHO during the year. A sanitary engineer and a sanitarian.


Work done during the year. Work in the pilot area continued, with the construction of squatting plates, syphons, pits and wells.

Refresher courses for public health inspectors were continued, and a short course for seven food-handlers in eating establishments was conducted at Kurunegala. The training course for public health inspectors, started in August 1958 at the Kalutara Health Centre, was completed in February 1959, and another course was started in July 1959. The WHO sanitarian also assisted in short courses for public health inspectors and other health workers.

Field work was reorganized and extended to areas outside the pilot project. A scheme for the reorganization of the public health engineering division was prepared. As a first step, it was decided to put the sanitation work in the Kurunegala area under the responsibility of the regional public health engineer - to which post the national counterpart had been appointed. This is additional to his counterpart duties. A further engineer was appointed to assist the regional public health engineer, and a number of
public health inspectors were placed under his charge. This integration of the environmental sanitation project and the divisional public health engineering offices helped to enable the regional public health engineer to tackle the water supply problems of the division. Proposals have been submitted to the Chief Public Health Engineer to extend this pattern of service to all other regions in Ceylon.

Experiments were conducted with regard to garbage pits for hospitals, a water seal pit to replace the trenching method of disposal in use at the Kurunegala Hospital, a new type of hand pump, improvements in the already developed chain pump and use of roof tiles made of areca-nut palm trees.

The WHO sanitary engineer left the project in April. A successor is being recruited.

Ceylon 38
AGISTANCE IN EPIDEMIOLOGY TO HEALTH DIRECTORATE
(Feb. 1956 -  )

Aim of the project. To establish an epidemiological unit in the Directorate of Health Services, Colombo; to make epidemiological surveys of the disease pattern in Ceylon; to train undergraduate and post-graduate students and a counterpart.

Assistance provided by WHO during the year. An epidemiologist and a specialist in infectious diseases.

Probable duration of assistance. Until the end of 1961.

Work done during the year. The successor to the previous WHO epidemiologist assumed duty in April 1958 and terminated his assignment in July 1959. The national counterpart returned in September 1958 from a one-year WHO fellowship in epidemiology in the USA.

Considerable progress was made during the year. The achievements may be summarized as follows:

(a) A Division of Communicable Diseases was set up within the Health Directorate, under which the following were included: (i) the Epidemiological Unit, (ii) the Specialized Campaigns Section, and (iii) the Public Health Veterinary Section. The closest association with the Health Statistics Unit was also maintained. The primary objective of the project of establishing an epidemiological unit within the Health Directorate was thus achieved.

(b) Epidemiological investigations of outbreaks of smallpox, typhoid, bacillary dysentery, food poisoning and influenza were carried out. Studies of the typhus group of fevers, diphtheria, whooping cough, tetanus and poliomyelitis were also initiated. In association with the Public Health Veterinary Officer, proposals were submitted for the further study of the zoonoses and their control in the next Five-Year Plan.

(c) In association with the medical statistician, a revised scheme of notification of infectious diseases was prepared.
Recommendations were made for the improvement of isolation and diagnostic facilities at the infectious disease hospitals. To help in this field, a WHO specialist in infectious diseases was assigned in July 1959 for a period of one year.

Further assistance is envisaged in 1961 in the special field of control of zoonoses.

**Ceylon 39**  
**Assistance to Health Directorate (Nursing Adviser)**  
*(July 1957 - )*  

**Aim of the project.** To provide the Directorate of Health Services with advisory services in connection with nursing organization, education, administration and legislation and with the development of co-ordinated supervisory services, in order to ensure uniformly high nursing standards within the national health programme.

**Assistance provided by WHO during the year.** (a) A nursing adviser;  
(b) Supplies and equipment.

**Probable duration of assistance.** Until the end of 1961.

**Work done during the year.** The nursing adviser made a study of the various aspects of nursing education and prepared a series of reports and recommendations to suit the nursing needs of Ceylon. She served on a committee appointed by the Ministry of Health to make recommendations for the revision of nursing education and service in Ceylon. Assistance was given in preparing suggestions for the organization and administration of the third-year internship period in recognized hospitals for practical experience after two years of actual nursing education. Discussions were held on the nursing aspects of the recommendations of the committee appointed in 1957 to revise the maternal and child health services in the country.

The duration of the public health nursing course was extended from six to nine months, and the system of selecting student nurses will be decentralized so that they may be selected and trained in the nursing schools of their own home provinces.

The WHO nursing adviser is collecting material and studying the legislation of other countries with a view to preparing proposals for the establishment of a Nursing Division and the Council of Nurses, Midwives and Auxiliary Nurses.

**Ceylon 45**  
**Health Statistics**  
*(April 1957 - )*  

**Aim of the project.** To revise the system of records and reports in the health services; to train personnel in the design of documents, the conduct of surveys and other statistical techniques; to set up a permanent statistical service in the Ministry of Health.
Assistance provided by WHO during the year. (a) A health statistician; (b) Supplies and equipment.

Probable duration of assistance. Until 1962.

Work done during the year. Ceylon was well represented at the regional seminar on health statistics (see SEARO 17). Useful working papers were presented by two of the national participants, as well as by the WHO statistician. The contribution of the latter, which will appear in the WHO Bulletin, dealt with levels of diagnostic reporting in cause-of-death statements. It has served as a basis for discussions with the responsible authorities on proposals for reorganizing the collection of mortality statistics in the Registrar-General's Office.

Fruitful collaboration between the WHO epidemiologist and the WHO statistician continued. It included the preparation of a report on the notification of infectious diseases in Ceylon, with proposals for a revised scheme, which have been accepted in principle by the Government. The guiding lines of the report and the new report forms should result in better reporting of this important category of health data throughout the Region.

Continued assistance was given to the dental survey. Also, the pre-operational survey undertaken in connection with the environmental sanitation project at Kurunegala was completed; the material is being processed and analysed by the project staff. A preliminary analysis of the records of the anti-filariasis campaign was undertaken, and discussions were held with the Superintendent. Recommendations have been made for revising the records system so that it may contain more useful information.

The Statistics Branch, the Epidemiology Unit and the Tuberculosis Records and Statistics Section are now housed in a new building. This provides a good opportunity for closer collaboration between the three related sections. Two statistical officers have been appointed to the project and two senior posts for statisticians have been sanctioned.

Ceylon 47

Medical Education (June 1959 ..)

Aim of the project. To assist in the teaching and demonstration of recent advances in clinical post-graduate fields.

Assistance provided by WHO during the year. A consultant professor in obstetrics and gynaecology for three months.

Probable duration of assistance. Until 1961.

Work done during the year. The consultant arrived in June 1959, and after meeting the Director of Health Services and the Dean of the Faculty of Medicine, visited the clinical and pre-clinical departments of the Faculty. He has begun to assist with the teaching of obstetrics and with the organization of the obstetric unit.

A bi-weekly course of post-graduate lectures in obstetrics and gynaecology has been started.
Aim of the project. To improve the organization and plan the development of thoracic surgery.

Assistance provided by WHO during the year. A consultant for one month.

Work done. The consultant made a study of the organization of thoracic surgery units in the Colombo General Hospital. He also examined the possibilities of forming thoracic surgery units in the hospitals at Jaffna, Ratnapura and Kandy.

According to his findings there is sufficient need to justify further expansion of thoracic surgery. An essential prerequisite is the necessity to train an adequate staff, including anaesthetists, nurses and physiotherapists.

In his report he drew attention to the desirability of co-operation between all disciplines concerned with cardiac and chest diseases and to the need for adequate cardio-pulmonary laboratory facilities, for an experimental thoracic surgery laboratory and for an effective organization for maintenance and repair of x-ray and electronic equipment.

There were found to be potential facilities for the ultimate creation of thoracic surgery units at the Jaffna and Ratnapura hospitals. The Kandy hospital appeared to be unsuitable for the purpose.

The consultant pointed out the demands which must be fulfilled if further development is to be achieved. His report has been submitted to the Government.

Aim of the project. To advise on the development of the Cancer Institute, particularly in regard to treatment, training and research.

Assistance provided by WHO during the year. A consultant for one week.

Probable duration of assistance. Until the end of 1962.

Work done during the year. During this short visit, the consultant advised the Government on the organization, administration and equipment of the Institute and also on a pattern of fellowship training for the staff. It was agreed that the most suitable institution for fellowship study was the Indian Cancer Research Centre at Bombay.

The consultant, who is the Director of the Bombay Centre, has indicated that it would be possible to provide the necessary facilities at the Centre for fellows from Ceylon.
Ceylon 50 Fellowship

Leprosy: A three-month fellowship for study in India.

Ceylon 51 Fellowship

Nursing: A twelve-month fellowship for study in the United States of America.

Ceylon 54 Training of Laboratory Technicians

(April 1959 -)

Aim of the project. To establish a programme for training laboratory technicians required for the various laboratories in the country.

Assistance provided by WHO during the year. A laboratory technician.

Probable duration of assistance. Until April 1961.

Work done during the year. The project was started with the assignment of a WHO laboratory technician in April 1959. A list of supplies and equipment to equip the laboratory properly and for the training of the laboratory technicians was drawn up. Counterparts to the WHO expert have been provided by the Government.

An Advisory Committee for the School of Medical Laboratory Technology, consisting of the senior pathologists, the Deputy Director (Laboratory Services) and the WHO laboratory technician, has been formed. A suitable syllabus for the training course has been prepared.

Advice was given on various haematological procedures in the laboratories of the General Hospital, Children's Hospital and the Department of Medicine at the University.

Some provincial laboratories have been visited.

Ceylon 55 School of Physiotherapy, Colombo

(Oct. 1958 -)

Aim of the project. To develop physical medicine and rehabilitation services by training physiotherapists.

Assistance provided by WHO during the year. A senior physiotherapy tutor.


Work done during the year. The physiotherapy tutor arrived in October 1958. He took part in the current training course, which was conducted by three national qualified physiotherapists, and acted as an examiner in the final examination.
As an advisory member of the Committee of the Physiotherapy School, he assisted national staff in drawing up training programmes for courses of two years and three years respectively. It was subsequently decided to adopt a two-year training period. A modified training programme designed to upgrade the assistant physiotherapists now in service was initiated.

The school is accommodated in temporary premises which are not wholly satisfactory. A design for a new building was prepared for consideration by the Hospital Building Committee. The WHO tutor assisted the medical specialist in charge of the school in preparing lists of additional equipment required. Assistance in carrying out his proposals, which have been approved by the national authorities, will henceforth be a part of the project.