



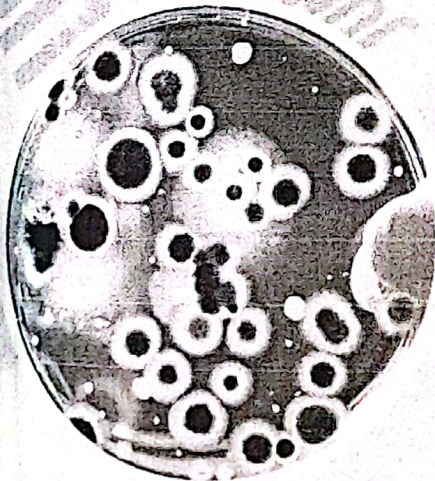
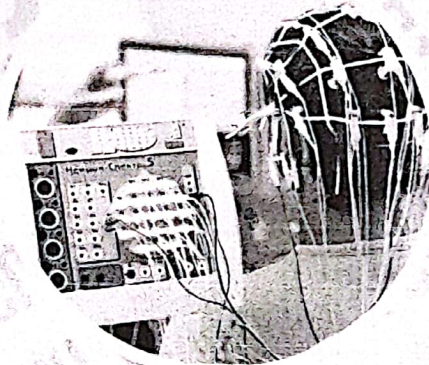
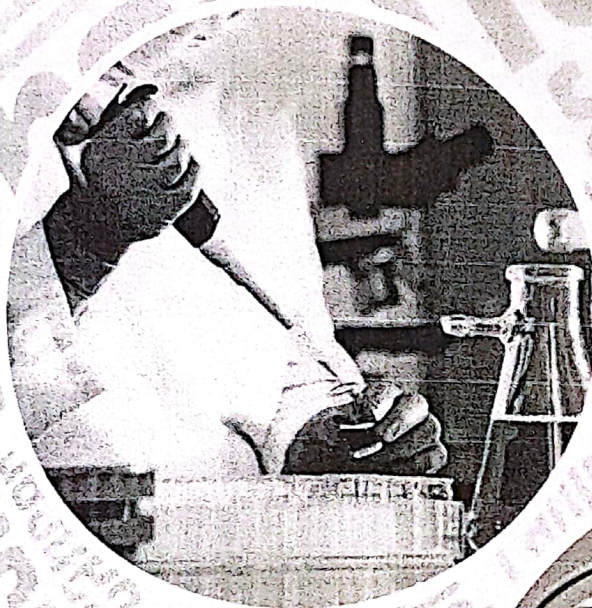
# INTERNATIONAL CONFERENCE ON HEALTH SCIENCES - 2019



“Steering Horizons; Aspiring Excellence!”

**Faculty of Medical Sciences, University of Sri Jayewardenepura**

In collaboration with Colombo South Teaching Hospital,  
Sri Jayewardenepura General Hospital and Base Hospital, Homagama



17<sup>th</sup> & 18<sup>th</sup> OCTOBER, 2019

UNIVERSITY OF SRI JAYEWARDENEPURA SRI LANKA

PP47

**Does Cu IUCD decrease the risk of abnormal Pap Smear?**

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PP48

**Pap smear screening: a retrospective study**

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PP49

**Determination of positive direct antiglobulin test in immune thrombocytopenic purpura patients in a tertiary care hospital in Sri Lanka**

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PP50

**Cortical thickness and subcortical volumes in mesial temporal lobe epilepsy patients measured using automated segmentation of magnetic resonance imaging in a tertiary care centre in Sri Lanka**

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PP51

**Characterization of anaemia in patients with chronic kidney disease at the National Institute for Nephrology Dialysis and Transplantation**

Riyas FR<sup>1,4</sup>, Wickramaratne KAC<sup>2</sup>, Chathuranga BAG<sup>3</sup>, Bandaranayaka KO<sup>4</sup>, Wijesundara C<sup>5</sup>

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PP52

**Serum Vascular Endothelial Growth Factor A (VEGF-A) protein levels and VEGF A gene expression in Oral Squamous cell Carcinoma**

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P051

### Characterization of anaemia in patients with chronic kidney disease at the National Institute for Nephrology Dialysis and Transplantation

Rijes FR<sup>1,4</sup>, Wickramaratne KAC<sup>2</sup>,  
Chathuranga BAG<sup>3</sup>, Bandaranayaka KO<sup>4</sup>,  
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**Background:** Chronic kidney disease (CKD) is the third leading cause of mortality and affect 5-10 million people worldwide. Decreased production of erythropoietin (EPO) caused by renal damage leads to anaemia in CKD patients.

**Objectives:** To characterize anaemia in CKD patients and assess severity, types and factors associated with anaemia of CKD.

**Methods:** A descriptive cross sectional study was conducted among 116 patients attending clinics of NINDT using a consecutive sampling method. An interviewer administered questionnaire was used to obtain information from patients and disease related information was obtained from individual clinic records. Full blood count results of patients were obtained from the NINDT laboratory and blood picture assessment was performed by a consultant haematologist.

**Results:** Majority (68%) were males and more than 1/3 (35.3%) were in CKD stage 3. Proportion of anaemia was 54.3% with a

mean haemoglobin concentration of 11.4 g/dL (SD±2.15). Presence of anaemia was highest in CKD stage 3 (30.2%) followed by stage 4 (27.0%), 5 (25.4%). Characterization of red blood cell morphology revealed normochromic normocytic in 75.0%, hypochromic microcytic (10.3%), dual population (3.8%), macrocytic (0.9%) in the population. The common red cell abnormalities with >5% significance were acanthocytes and pencil cells (6.9%).

**Conclusions:** Prevalence of anaemia increased significantly with advanced CKD stages ( $\chi^2=8.053$ ,  $p=0.005$ ). Factors with significant association with anaemic status and CKD stage were EPO usage and dialysis treatment ( $p<0.01$ ). Further research is crucial to assess the burden of anaemia among CKD patients in Sri Lanka in order to develop policies in effective anaemia management strategies.