

By Dr Desmond Wai

SRI LANKA – Land of Sunshine and Beautiful Beaches

I had the privilege of being invited by the Ceylon College of Physicians to deliver a lecture on live donor liver transplantation at their annual meeting in October 2008. Sri Lanka is located very close to Singapore; only slightly more than three hours of flight time away.

The Bandaranaike Airport at Colombo was very clean and pleasant, just like Changi Airport and there was a big crowd outside the airport, waiting for the arrival of their family members. Shuovo, my local contact, picked me up and we went straight to the hotel.

The weather was very warm and I was dehydrated. I noticed many hawkers selling coconut drinks along the road so we stopped to enjoy the local favorite, the King Coconut. It was juicy and sweet, and tasted very different from the Thai coconuts that we have in Singapore.

The schedule on my first day was quite light; I had time to enjoy the hotel facilities like the restaurant and the swimming pool. Work life in Singapore is so busy that I hardly have a chance to hit the pool. The weather in Colombo was very warm, and thus soaking in the pool was fantastic.

After my relaxation, I met up with some of my patients who visited me at the hotel, showing me their latest scans and medical results. It was a good time catching up with old patients, as it was not feasible for all my overseas patients to see me at my clinic in Singapore regularly, so this was a good chance to be updated on their conditions.

There was a very good seafood restaurant at my hotel, the Cinnamon Grand Hotel and I had dinner with four senior doctors from Colombo. All of them were senior consultants in surgery, oncology, and gastroenterology. We had great seafood but I enjoyed the conversation with the doctors more, as they described to me the Sri Lanka healthcare system.

These senior doctors worked in government hospitals in the daytime, from 8am to 4pm. They were very busy and my gastroenterologist

friend told me there were less than 10 trained gastroenterologists in the whole country. He worked in a 2,750-bed general hospital and performed endoscopies from morning till the end of the day. After the official work at the government hospital and a short break, he went for private practice.

His private practice lasted from 5pm till 8-9pm, depending on the number of patients arriving. Reputation, he said, was very important in Colombo. One or two cases of mismanagement might send all these patients away. Saturday was their off day in civil service so it became a full day for private practice.

Sri Lanka has a very different epidemiology of liver diseases. Fatty liver disease and alcoholic liver disease are the most common causes of liver problems. They have a negligible number of patients with hepatitis B and C. In fact, my gastroenterologist friend told me he had only seen two hepatitis C patients over the last 5 years, and both had worked in the Middle East. I told him I saw an average of two hepatitis C patients daily! With Singapore as a regional medical hub, I thought that we were fortunate to be able to see a variety of patients who come from other parts of Asia.

The other three senior specialists also followed the same regime, conducting private practice in the evening and I was curious as to why they, unlike myself in Singapore, did not turn to full time private practice. Their reply was that most specialists had been sent overseas for further training, and therefore they felt obliged to serve their country upon return. But as the salary of doctors was not high, they still needed supplemental income to subsist.

My talk was on the second day at the 41st Ceylon College of Physicians Meeting and I was heartened to see the lecture hall being filled up with local doctors. After my lecture, I rushed to a local TV station, the Derana, for a live interview. Because Sri Lanka has very low prevalence of viral hepatitis B and C, and



Desmond is a gastroenterologist with special interest in transplant hepatology.

Desmond is invited frequently to speak on various aspects of live donor liver transplants at overseas conferences. Running is his passion and he tries to do it even when he is travelling.



Sweet and juicy King Coconuts. The gentleman in the background (carrying a sharp knife) cut it fresh from the twigs, and then opened it up for me.



Derana TV station studio, a local TV station where I had a live interview. As Sinhalese is the official language, I needed a translator (middle). I thought the translator was more stressed than me.



I had a soothing morning jog along the Galle Face Green, a coastal area. The sound of the waves was the best environment for jogging. Three tall buildings in the background: (L-R) Bank of Ceylon, World Trade Centre Tower 1 and 2. The WTC towers are the tallest buildings in Sri Lanka at 34 storeys.



Professor Mohideen (second from the right) the President of the Ceylon College of Physicians welcomed me outside the convention hall.

the most common problem is non-alcoholic fatty liver disease, unsurprisingly, all those who called in asked about fatty liver disease. This was very different from my Singapore experience where most questions were focused on hepatitis B.

That evening, I was given a treat at a local restaurant by one of my patients. He particularly wanted me to try their local food. It was a great experience as I learned that coconut rice was their favorite local food, and most of the dishes were cooked in curry. Well, maybe that was why their prevalence of fatty liver disease was high.

As I thought about the healthcare system in Sri Lanka, I wondered to myself if a patient could see a specialist at the local hospital free of charge, why then should he or she pay to see the same doctor at their private clinic. My patient enlightened me by sharing with his experience. He needed an opinion from an oncologist and thus went to the government clinic. As the queue was long, he arrived at 6.30am. The long queue started moving only after a 2 ½ hour wait, and by mid-morning, he was in the consultation room. He needed to consult an oncologist but ended up seeing a junior doctor. When he insisted on meeting the oncologist, he was told that subsidised patients could not choose their doctors. Well, his story

sounded familiar and I thought to myself, maybe that was the reason why foreign patients came all the way to Singapore to see me.

After the meeting, I left for the airport in a taxi and my driver chatted with me. When he found out I was from Singapore, he told me, “You know, doctor, 30 years ago your then Prime Minister, Mr Lee Kwan Yew, visited Colombo. He commented that Colombo was developing well, and wished Singapore could emulate Colombo. But look at what happened now after 30 years; Singapore has surpassed Sri Lanka by leaps and bounds.”

I was not too sure if our former PM actually said this as I did not read his memoirs, but I felt that despite all our problems in Singapore, we were still very much envied by others.

On the way to the airport, I detoured somewhat and went to a local beach. It was filled with warm sunshine, great waves, and fine sands. I was the only one swimming there and I had the whole beach to myself. I later found out it only cost US\$50 to stay a night at the beach hotel.

Well, Sri Lanka is full of sunshine and beaches, but it is also a place filled with warm and hospitable people. Reflecting on their praises on various aspects of Singapore, I think we Singaporeans should be more grateful of what we have. ■