

hypermetabolism. Antibiotics and antifungal medications can reduce the overall microbial load. To control the type and activity of the gut microbiota and faecal microflora transplantation (FMT), use dietary management or the addition of live bacteria.

Conclusion. After severe burn injuries, infections are now the leading cause of mortality. Therefore, in burn patients with multidrug-resistant flora, empirical antibiotic therapy is required. It is anticipated that probiotics and FMT would prove to be effective therapies for intestinal changes in patients with severe burns according to their favourable results in a number of intestinal inflammatory diseases.

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STRATEGIES FOR CANCER CONTROL IN SRILANKA. PREVENTION INITIATIVES

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Introduction. In Sri Lanka, the most commonly diagnosed cancers include breast, cervical, oral, lung, and colorectal cancers. In 2022, the country reported a total of 33,243 new cancer cases, resulting in an age-standardised incidence rate of 106.9 per 100,000 individuals [1].

Aim of the study. To study cancer prevention measures in Sri Lanka.

Materials and methods. Study of regulatory documents.

Results and discussion. Globally set targets by 2025 in Sri Lanka: A 25% reduction in premature mortality from cancer; a 10% relative reduction in the use of alcohol; a 10% relative reduction in the prevalence of insufficient physical activity; a 30% relative reduction in mean population intake of salt /sodium; a 30% relative reduction in prevalence of current tobacco use in persons aged over 15 years. An 80% availability of affordable basic technologies and essential medicines including generics, required to treat major non communicable diseases in both public and private facilities. The Cancer Early Detection Centre, operated under the National Cancer Control Programme of the Ministry of Health, has established a successful public-private

partnership with the Rotary Club of Colombo. Sri Lanka commenced the HPV vaccination in 2017 – PRESENT, targeting girls aged 10 to 11 through a school-based program. The healthcare system provides screening programs for various cancers, including breast, oral, and cervical cancers.

WHO recommends a set of interim targets that each country should meet by 2030 to get on the path to eliminate cervical cancer within the century. These are: 90% of girls fully vaccinated with HPV vaccine by the age of 15; 70% of women screened using a high-performance test by the age of 35 and again by the age of 45; 90% of women identified with cervical disease receive treatment. National Strategic Plan to Reach the Interim Targets of Cervical Cancer Elimination in Sri Lanka 2021-2030 was launched. National Strategic Plan on Childhood & Adolescent Cancer Care in Sri Lanka 2021-2025 was launched. Social Behaviour Change Communication Strategy to support prevention and control of common cancers in Sri Lanka was launched.

A training program on colposcopy and cervical cancer prevention for ten selected consultant obstetricians and gynecologists representing the entire country was conducted. Training programs on colposcopy for postgraduate trainees in gynecology and obstetrics were also held. Public awareness campaigns on cancer prevention and early detection included events commemorating “World Cancer Day” on February 4th and “World Breast Cancer Awareness Month” in October. Tobacco Control Policies. In 2015, the Parliament passed legislation increasing the size of the pictorial warnings to 80%. This requirement entails that warnings, inclusive of pictorials, must cover 80% of the total area of each cigarette packet, package, or carton, and must be printed on both sides. Health warnings are required to be refreshed every six months. The National Authority on Tobacco and Alcohol provided a list of acceptable pictorials, pictograms, and messages for use.

Conclusion. Through such preventive programmes and measures, Sri Lanka hopes to achieve reduction in the number of cancer.

ЛІТЕРАТУРА

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