දුර කථන) 0112669192 , 0112675011		මගේඅංකය)
தொலைபேசி) 0112698507, 0112694033	78	எனது இல)
Telephone) 0112675449 , 0112675280		My No.) DDG/(PHS-1)/NSACP/2011
<u>ෆැක්ස්</u>) 0112693866			
பெக்ஸ்) 0112693869		ඔබේඅංකය)
Fax)0112692913		உமது இல)
			Your No. :)
විද්සුත් තැපෑල)postmaster@health.gov.lk			
மின்னஞ்சல் முகவரி)	සුවසිරිපාය	දිනය	1
e-mail))
		சுவசிரிபாய	திகதி) 2016.00 3 -
වෙඞ්අඩවිය) www.health.gov.lk		Date) 2016.09. 30
இணையத்தளம்)	SUWASIRIPAYA		
website)			

සෞඛ්‍ය, පෝෂණ සහ දේශීය වෛද්‍ය අමාත්‍යාංශය சுகாதார,போசணைமற்றும் சுதேசவைத்தியஅமைச்சு Ministry of Health, Nutrition& Indigenous Medicine

General Circular No: 01-51 /2016

All Provincial / Regional Directors of Health services,

All Directors of Teaching Hospitals,

All Heads of Specialized Campaigns,

All Heads of Health Institutions

Programme for Ending AIDS by 2025 in Sri Lanka

Sri Lanka is currently planning to work towards ending AIDS by 2025. The decision to treat all persons living with HIV (PLHIV) with antiretroviral treatment was taken by the Ministry of Health after a series of consultations based on the WHO recommendations. To facilitate this process the Ministry of Health procured ARV drugs using government funds from 2016. With appropriate services majority of PLHIV on antiretroviral treatment will achieve undetectable viral loads within months after starting ART minimizing further transmission risks. With use of ART the quality of life and life expectancy has increased among PLHIV. Most PLHIV who adhere to treatment will be asymptomatic and live for many years eliminating the risk of developing AIDS. They will be able to contribute to the betterment of the country, society and their families.

- 02. The diagnosis of HIV affects a person physically, psychologically and socially. Care and support provided by the health care workers without stigma or discrimination will help them to adjust to living with HIV. Early identification through testing is important to provide comprehensive care services to all PLHIV. Services for PLHIV including antiretroviral treatment (ART) are available at STD clinics and Infectious Diseases Hospital (IDH).
- 03. It is necessary to take measures to facilitate comprehensive care services for PLHIV as per the guidelines given below.
 - i. Provider initiated HIV testing should be offered to patients based on symptoms, signs or risky behaviours. Hospital clinic/ward has to arrange collection of 3cc of blood in a vacutainer tube and transport to the local STD clinic for HIV testing.
 - ii. STD clinics have to carry out HIV screening tests on the blood samples received from wards and issue reports. The information on HIV positive reports need to be informed immediately to the relevant medical officer or consultant while taking measures to strictly maintain the confidentiality.

- iii. The screening test positive patient need to be referred to the STD clinic for confirmatory testing. Confirmatory test positive patients will be registered as a person living with HIV (PLHIV) at the STD clinic for further management.
- It is the policy of the ministry of health that all PLHIV requiring institutional care be managed at iv. general wards. Based on this policy decision the following procedures should be adopted. All PLHIV who need inward care facilities should be managed appropriately in the general wards (medical, surgical or any other speciality) in Colombo and in out-stations without stigma and descrimination. (General Circular No. 02/125/98)
- All measures need to be taken to maintain confidentiality. V.
- Patients with infectious complications requiring barrier nursing may be transferred to the vi. National Infectious Disease Hospiital, only if the facilities are not available to manage them at respective health institutions.
- National HIV policy of Sri Lanka states that "The government of Sri Lanka accepts the right of those living with HIV/AIDS to have access to treatment without stigma and discrimination. Persons living with HIV/AIDS requiring antiretroviral treatment and management of opportunistic infections will be provided by the state sector in line with the national guidelines and prevailing National Health policy." (3.8 page 22)
- 05. Further, the judgement given on SC.FR.No.77/2016 on 14.03.2016 states "The court also wishes to place on record that the state should ensure that the human rights of the people living with HIV/AIDS are promoted, protected and respected and measures to be taken to eliminate discrimination against them.(Page 4)
- 06. Ministry of Health seeks the commitment and cooperation of all hospital authorities to implement the programme for ending AIDS by 2025.

07. I reiterate the policy of the Government of Sri Lanka is to provide a comprehensive care services for PLHIV without stigma and discrimination. Your cooperation is earnestly requested.

> Dr. P. G. Mahipala Director General of Health Services Ministry of Health, Nutrition & Indigenous Medicine

Dr. P.G.Mahipala

"Suwasiripaya"

Director General of Health Services Rev. Baddegama Wimalawansa Thero Mawatha, Colombo 10.

Cc

1. Director, Private Health sector, MOH.

2. President, Sri Lanka College of Physicians.

- 3. President, Independent Medical Practitioners Association.
- 4. President, Ceylon College of General Practitioners.
- 5. President, Sri Lanka Medical Association.