



ORAL HEALTH REPORT

2020/2021

**Ministry of Health
Sri Lanka**

Oral Health Report

2020/2021



Research and Surveillance Unit
Institute of Oral Health
Maharagama
Ministry of Health
Sri Lanka

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Institute of Oral Health
Maharagama

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Message from the Director General of Health Services



First and foremost, let me congratulate the head and the team of the Research and Surveillance unit, Institute of Oral Health, Maharagama for their hard work on publishing the Oral Health Report for the years 2020/2021.

It is well known that oral health related problems and diseases are major public health concerns in Sri Lanka. The Ministry of Health has a huge challenge to reduce the disease burden by implementing various treatment and preventive strategies. Therefore, for the purpose of monitoring and evaluation of the current system and planning and implementation of new strategies, this periodic evaluation is essential.

I take this opportunity to request all the relevant parties to review this report and take maximum benefit of it, to uplift the oral health service in the country and I wish this process will continue in future.

Dr. Asela Gunawardena
Director General of Health Services
Ministry of Health

Message from the Deputy Director General (Dental Services)



It is with great happiness that I am writing my message to the “Oral Health Report 2020/2021” which is compiled by Research and Surveillance Unit, Institute of Oral Health, Maharagama, Ministry of Health.

This report contains the data gathered primarily from the monthly returns of dental surgeons. Even though we faced the COVID pandemic in 2020, by reviewing this report, I am pleased to see that oral health service providers under the Ministry of Health has rendered a great service to the Sri Lankan public.

Hence, to improve the oral health services further, I hope all the relevant stakeholders will utilize this source of information.

Finally, I congratulate Dr. Prasanna Jayasekara, Consultant in Community Dentistry and the team members of Research and Surveillance Unit for their dedication towards this publication.

Dr. Ananda Jayalal
Deputy Director General (Dental Services)
Ministry of Health

Preface

The Research and Surveillance Unit of the Institute of Oral Health, Maharagama is pleased to present the third Oral Health Report and it is for the years 2020/2021. This report provides the progress made in oral health services in Sri Lanka throughout the years 2020/2021.

This report contains, routine data reported through monthly returns of dental surgeons (H1201a), school dental therapists (H982), data gathered from specialized oral health units, and secondary data from other published health reports.

This is a reliable reference document that summarizes the government oral health services provided to the public in Sri Lanka. The information provided here can be utilized by many stakeholders at various levels.

It is a great pleasure to extend my sincere gratitude to the Director General of Health Services, Deputy Director General (Dental Services) and the relevant authorities of the Ministry of Health, the Head of the Institution of Institute of Oral Health, Maharagama, all the experts who contributed with the valuable technical inputs, consultants and their team members in all specialized oral health units, the Director of Family Health Bureau for providing the relevant statistics related to the school dental clinics, the regional dental surgeons, dental surgeons and school dental therapists, and the team of the Research and Surveillance Unit, Institute of Oral Health, Maharagama for their valuable contribution to make this effort a success.

Dr. Prasanna Jayasekara
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Executive summary

This Oral Health Report illustrates the oral health services provided by the dental professionals attached under the Ministry of Health, to the Sri Lankan public during the years 2020 and 2021. The information provided here was formulated by analyzing the data gathered from health institutions of the whole island and presented at the national and district levels which will be useful to plan, monitor and evaluate the oral health services provided by the Ministry of Health, Sri Lanka.

Key findings related to oral health services in Sri Lanka-2020/2021

	2020	2021
Number of consultants including acting consultants *	120	125
Number of dental surgeons*	1,667	1,654
Number of Intern dental surgeons	87	93
Number of school dental therapists	373	356
Dentist to population ratio	12,265.8	12,460.4
Average target population per school dental therapist	2,766.3	3,102.9
Total number of patients treated in OPD dental clinics	2,655,068	2,092,265
Monthly average number of patients treated by a single OPD dental surgeon	219.3	166.4
Monthly average number of patients treated in a single OPD dental clinic	319.7	237.2
Monthly average number of pregnant mothers treated in a single OPD dental clinic	24.9	18.3
Monthly average number of children less than 3 years, treated in a single OPD dental clinic	4.2	3.5
Monthly average number of adolescents treated in a single OPD dental clinic	21.6	15.3
Annual average number of Oral Potentially Malignant Disorder (OPMD) cases identified in a single OPD dental clinic.	6.3	4.9
Monthly average number of school children screened by a single school dental therapist	74.9	86.4
Monthly average number of treatments completed by a single school dental therapist	23.5	22.8
Monthly average number of patients treated in a single Oral and Maxillofacial Surgical clinic	576.1	388.1
Monthly average number of patients treated in a single Restorative Dentistry clinic	1,017.4	315.0
Monthly average number of patients treated in a single Orthodontic clinic	670.1	551.0
Monthly average number of patients treated in a single Preventive Oral Health clinic	601.6	361.0

**All consultants and dental surgeons in the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya*

Index

Number	Description	Page number
I	Message from the Director General of Health Services	iii
II	Message from the Deputy Director General (Dental Services)	iv
III	Preface	v
IV	Contributors	vi
V	Executive summary	vii
VI	Index	viii
VII	List of Tables	x
VIII	List of Figures	xii
IX	Abbreviations	xxiii
X	Summary Statistics- Sri Lanka	xxv
XI	Vision and Mission	xxix
1. Introduction		
1.1	Organization of oral healthcare delivery system in Sri Lanka	01
2. Human resource profile of oral healthcare services in Sri Lanka		
2.1	Human resource profile of oral healthcare services in Sri Lanka under the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya	03
2.2	Distribution of government dental surgeons	05
2.3	Specialized Oral Healthcare Services in Sri Lanka	10
2.4	Distribution of school dental therapists in Sri Lanka	16
3. Statistics related to OPD dental clinics under the Ministry of Health, Sri Lanka during 2020 and 2021		
3.1	Statistics related to patients treated by OPD dental surgeons under the Ministry of Health, Sri Lanka during 2020 and 2021	18
3.2	Statistics related to types of dental treatments done by OPD dental surgeons under the Ministry of Health, Sri Lanka during the years 2020 and 2021	24

3.3	Statistics related to the selected special groups of patients managed by OPD dental surgeons under the Ministry of Health, Sri Lanka in 2020 and 2021	53
3.4	Statistics related to dental treatments carried out by OPD dental surgeons during 2020 and 2021 under the Ministry of Health, Sri Lanka according to types of OPD dental clinics	71
3.5	Trend analysis of dental treatments carried out by OPD dental surgeons	102
4. Statistics related to Specialized Oral Healthcare Services under the Ministry of Health, Sri Lanka during 2020 and 2021		104
4.1	Oral and Maxillofacial Surgery	105
4.2	Restorative Dentistry	112
4.3	Orthodontics	116
4.4	Community Dentistry-Preventive Oral Health Clinics	120
5. Preventive Oral Health Services		123
5.1	Oral Health Promotion Unit - Health Promotion Bureau	124
5.2	Oral Health Unit - Family Health Bureau	131
5.3	Oral Cancer Prevention and Control Unit- National Cancer Control Programme	134
5.4	Research and Surveillance Unit- Institute of Oral Health Maharagama	140
5.5	Training Unit - Institute of Oral Health Maharagama	143
5.6	Oral Health Unit - Office of the Provincial Director of Health Services, Sabaragamuwa province	146
5.7	Oral Health Unit-National Institute of Health Sciences-Kalutara	147
6. School Dental Service in Sri Lanka		149

List of Tables

Table Number	Description	Page Number
2.1	Distribution of the human resource in oral healthcare services in Sri Lanka including the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya (at the end of 2021)	04
2.2	Distribution of government dental surgeons (including consultants) per 100,000 population in the year 2021: district variation	07
2.3	Distribution of dental consultants according to the speciality at the end of 2021 (including those who were under the Ministry of Health, Ministry of Defence, and Faculty of Dental Sciences, University of Peradeniya)	10
2.4	Distribution of different types of dental consultants under the Ministry of Health across the districts in Sri Lanka at the end of the year 2021	14
3.1	(a) Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of Health during the year 2020: district variation	26
	(b) Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of Health during the year 2021: district variation	27
3.2	Total numbers and annual average numbers of OPMD cases identified in a single OPD dental clinic during the years 2020 and 2021: district variation	48
3.3	Total numbers and monthly average numbers of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health in the years 2020 and 2021: district variation	56
3.4	Total numbers and monthly average numbers of children less than 3 years managed in a single OPD dental clinic under the Ministry of Health in the years 2020 and 2021: district variation	61
3.5	Total numbers and monthly average numbers of adolescents managed in a single OPD dental clinic under the Ministry of Health in the years 2020 and 2021: district variation	66
3.6	(a) Total number and monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in 2020 according to types of OPD dental clinics	89

3.6	(b)	Total number and monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in 2021 according to types of OPD dental clinics	90
3.7	(a)	Monthly average number of special groups of patients managed by a single OPD dental surgeon under the Ministry of Health in the year 2020 according to types of OPD dental clinics	95
	(b)	Monthly average number of special groups of patients managed by a single OPD dental surgeon under the Ministry of Health in the year 2021 according to types of OPD dental clinics	95
4.1		Number of patients managed according to different treatment categories at OMFS clinics in Sri Lanka during the years 2020 and 2021	108
4.2		Number of patients managed according to different treatment categories at Restorative Dentistry clinics in Sri Lanka during the years 2020 and 2021	115
4.3		Number of patients managed according to different treatment categories at Orthodontic clinics in Sri Lanka during the years 2020 and 2021	119
5.1	(a)	Activities carried out by the Oral Health Promotion Unit of HPB in 2020	124
	(b)	Activities carried out by the Oral Health Promotion Unit of HPB in 2021	127
5.2	(a)	Activities carried out by the Oral Health Unit of FHB in 2020	131
	(b)	Activities carried out by the Oral Health Unit of FHB in 2021	133
5.3	(a)	Activities carried out by the Oral Cancer prevention and control unit of NCCP in 2020	134
	(b)	Activities carried out by the Oral Cancer prevention and control unit of NCCP in 2021	137
5.4	(a)	Activities carried out by the RSU in 2020	140
	(b)	Activities carried out by the RSU in 2021	142
5.5	(a)	Activities carried out by the training unit in 2020	143
	(b)	Activities carried out by the training unit in 2021	145
5.6	(a)	Activities coordinated and supervised by the provincial CCD in Sabaragamuwa Province during the year 2020	146
	(b)	Activities coordinated and supervised by the provincial CCD in Sabaragamuwa Province during the year 2021	146
5.7	(a)	Activities carried out by the Oral Health Unit of NIHS in 2020	147
	(b)	Activities carried out by the Oral Health Unit of NIHS in 2021	148
6.1		Performance of SDTs in the years 2020 and 2021	153

List of Figures

Figure Number	Description	Page Number
1	Organogram of the oral healthcare service profile under the Ministry of Health	02
2.1	Distribution of government dental surgeons per 100,000 population from 2010 to 2021	05
2.2	Distribution of government dental surgeons per 100,000 population at the end of 2021: district variation	06
2.3	Dentist to population ratio at the end of 2021: district variation	08
2.4	Distribution of OPD dental clinics and OPD dental surgeons under the Ministry of Health, Sri Lanka at the end of 2021: district variation	09
2.5	Distribution of different dental consultants in Sri Lanka at the end of 2021 according to the speciality including those who were under the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya	11
2.6	Distribution of government dental consultants per one million population in Sri Lanka at the end of 2021 including those who were under the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya	12
2.7	Distribution of different types of dental consultants under the Ministry of Health across the districts in Sri Lanka at the end of 2021	13
2.8	Distribution of SDCs and SDTs in Sri Lanka at the end of 2021: district variation	16
2.9	Target population that should be cared by a single SDT for the year 2021: district variation	17

3.1	(a)	Total number of patients treated by OPD dental surgeons under the Ministry of Health in the year 2020: district variation	18
	(b)	Total number of patients treated by OPD dental surgeons under the Ministry of Health in the year 2021: district variation	19
3.2	(a)	Monthly average number of patients treated by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation	20
	(b)	Monthly average number of patients treated by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation	21
3.3	(a)	Monthly average number of patients treated in a single OPD dental clinic under the Ministry of Health in 2020: district variation	22
	(b)	Monthly average number of patients treated in a single OPD dental clinic under the Ministry of Health in 2021: district variation	23
3.4	(a)	Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020: national values	24
	(b)	Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021: national values	25
3.5	(a)	Monthly average number of Extractions carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation	28
	(b)	Monthly average number of Extractions carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation	29

3.6	(a)	Monthly average number of Amalgam restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation	30
	(b)	Monthly average number of Amalgam restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation	31
3.7	(a)	Monthly average number of GIC restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation	32
	(b)	Monthly average number of GIC restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation	33
3.8	(a)	Monthly average number of Composite restorations done by a single OPD dental surgeon under the Ministry of Health during the year 2020: district variation	34
	(b)	Monthly average number of Composite restorations done by a single OPD dental surgeon under the Ministry of Health during the year 2021: district variation	35
3.9	(a)	Monthly average number of completed RCTs done by a single OPD dental surgeon under the Ministry of Health during the year 2020: district variation	36
	(b)	Monthly average number of completed RCTs done by a single OPD dental surgeon under the Ministry of Health during the year 2021: district variation	37
3.10	(a)	Monthly average number of Scalings done by a single OPD dental surgeon under the Ministry of Health in 2020: district variation	38
	(b)	Monthly average number of Scalings done by a single OPD dental surgeon under the Ministry of Health in 2021: district variation	39

3.11	(a)	Monthly average number of Fluoride applications done by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation	40
	(b)	Monthly average number of Fluoride applications done by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation	41
3.12	(a)	Monthly average number of Fissure Sealant applications carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation	42
	(b)	Monthly average number of Fissure Sealant applications carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation	43
3.13	(a)	Monthly average number of Temporary fillings carried out by a single OPD dental surgeon under the Ministry of Health during the year 2020: district variation	44
	(b)	Monthly average number of Temporary fillings carried out by a single OPD dental surgeon under the Ministry of Health during the year 2021: district variation	45
3.14	(a)	Monthly average number of post-operative infections and bleeding episodes reported by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation	46
	(b)	Monthly average number of post-operative infections and bleeding episodes reported by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation	47
3.15	(a)	Total number of OPMD cases identified in OPD dental clinics under the Ministry of Health during the year 2020: district variation	49
	(b)	Total number of OPMD cases identified in OPD dental clinics under the Ministry of Health during the year 2021: district variation	50
3.16	(a)	Annual average number of OPMD cases identified in a single OPD dental clinic during the year 2020: district variation	51
	(b)	Annual average number of OPMD cases identified in a single OPD dental clinic during the year 2021: district variation	52

3.17		Monthly average numbers of pregnant mothers, children less than 3 years, and adolescents (13-19 years) managed in a single OPD dental clinic under the Ministry of Health Sri Lanka in the years 2020 and 2021	53
3.18	(a)	Percentage of pregnant mothers screened for oral diseases in Sri Lanka for the year 2020: district variation	54
	(b)	Percentage of pregnant mothers screened for oral diseases in Sri Lanka for the year 2021: district variation	55
3.19	(a)	Total number of pregnant mothers managed in OPD dental clinics under the Ministry of Health during the year 2020: district variation	57
	(b)	Total number of pregnant mothers managed in OPD dental clinics under the Ministry of Health during the year 2021: district variation	58
3.20	(a)	Monthly average number of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health during the year 2020: district variation	59
	(b)	Monthly average number of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health during the year 2021: district variation	60
3.21	(a)	Total number of children less than 3 years managed in OPD dental clinics under the Ministry of Health during the year 2020: district variation	62
	(b)	Total number of children less than 3 years managed in OPD dental clinics under the Ministry of Health during the year 2021: district variation	63
3.22	(a)	Monthly average number of children less than 3 years managed in a single OPD dental clinic under the Ministry of Health in the year 2020: district variation	64
	(b)	Monthly average number of children less than 3 years managed in a single OPD dental clinic under the Ministry of Health in the year 2021: district variation	65

3.23	(a)	Total number of adolescents managed in OPD dental clinics under the Ministry of Health during the year 2020: district variation	67
	(b)	Total number of adolescents managed in OPD dental clinics under the Ministry of Health during the year 2021: district variation	68
3.24	(a)	Monthly average number of adolescents managed in a single OPD dental clinic under the Ministry of Health in the year 2020: district variation	69
	(b)	Monthly average number of adolescents managed in a single OPD dental clinic under the Ministry of Health in the year 2021: district variation	70
3.25	(a)	Distribution of the total number of patients managed at OPD dental clinics in the year 2020 according to types of OPD dental clinics	72
	(b)	Distribution of the total number of patients managed at OPD dental clinics in the year 2021 according to types of OPD dental clinics	73
3.26	(a)	Monthly average number of patients managed by a single OPD dental surgeon under the Ministry of Health in 2020 according to types of OPD dental clinics	74
	(b)	Monthly average number of patients managed by a single OPD dental surgeon under the Ministry of Health in 2021 according to types of OPD dental clinics	75
3.27	(a)	Monthly average number of patients managed in a single OPD dental clinic under the Ministry of Health in the year 2020 according to types of OPD dental clinics	76
	(b)	Monthly average number of patients managed in a single OPD dental clinic under the Ministry of Health in the year 2021 according to types of OPD dental clinics	77
3.28	(a)	Distribution of the percentage of Extractions carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	78
	(b)	Distribution of the percentage of Extractions carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics	78

3.29	(a)	Distribution of the percentage of Temporary fillings carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	79
	(b)	Distribution of the percentage of Temporary fillings carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics	79
3.30	(a)	Distribution of the percentage of Amalgam restorations carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	80
	(b)	Distribution of the percentage of Amalgam restorations carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics	80
3.31	(a)	Distribution of the percentage of GIC restorations carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	81
	(b)	Distribution of the percentage of GIC restorations carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics	81
3.32	(a)	Distribution of the percentage of Composite restorations carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	82
	(b)	Distribution of the percentage of Composite restorations carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics	82
3.33	(a)	Distribution of the percentage of completed RCTs carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	83
	(b)	Distribution of the percentage of completed RCTs carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics	83

3.34	(a)	Distribution of the percentage of Scalings carried out at OPD dental clinics in 2020 according to types of OPD dental clinics	84
	(b)	Distribution of the percentage of Scalings carried out at OPD dental clinics in 2021 according to types of OPD dental clinics	84
3.35	(a)	Distribution of the percentage of Fluoride applications carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	85
	(b)	Distribution of the percentage of Fluoride applications carried out at OPD dental clinics in the year 2021 according to the types of OPD dental clinics	85
3.36	(a)	Distribution of the percentage of Fissure Sealant applications carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics	86
	(b)	Distribution of the percentage of Fissure Sealant applications carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics	86
3.37	(a)	Monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020 according to types of OPD dental clinics	87
	(b)	Monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021 according to types of OPD dental clinics	88
3.38	(a)	Distribution of the percentage of pregnant mothers managed at OPD dental clinics in 2020 according to types of OPD dental clinics	91
	(b)	Distribution of the percentage of pregnant mothers managed at OPD dental clinics in 2021 according to types of OPD dental clinics	92

3.39	(a)	Distribution of the percentage of children less than 3 years managed at OPD dental clinics in the year 2020 according to types of OPD dental clinics.	93
	(b)	Distribution of the percentage of children less than 3 years managed at OPD dental clinics in the year 2021 according to types of OPD dental clinics.	93
3.40	(a)	Distribution of the percentage of adolescents managed at OPD dental clinics in the year 2020 according to types of OPD dental clinics.	94
	(b)	Distribution of the percentage of adolescents managed at OPD dental clinics in the year 2021 according to types of OPD dental clinics.	94
3.41	(a)	Monthly average number of special groups of patients managed per OPD dental surgeon in the year 2020 according to types of OPD dental clinics	96
	(b)	Monthly average number of special groups of patients managed per OPD dental surgeon in the year 2021 according to types of OPD dental clinics	97
3.42	(a)	Total number of OPMD cases reported by OPD dental clinics under the Ministry of Health in the year 2020 according to types of OPD dental clinics	98
	(b)	Total number of OPMD cases reported by OPD dental clinics under the Ministry of Health in the year 2021 according to types of OPD dental clinics	99
3.43	(a)	Annual average number of OPMD cases reported in a single OPD dental clinic in the year 2020 according to types of OPD dental clinics	100
	(b)	Annual average number of OPMD cases reported in a single OPD dental clinic in the year 2021 according to types of OPD dental clinics	101

3.44	Statistics related to dental treatments carried out by OPD dental surgeons under the Ministry of Health from 2014 to 2021	102
3.45	Dental treatments carried out by OPD dental surgeons under the Ministry of Health according to types of Restorations from 2014 to 2021	103
4.1	Total numbers of patients visited and managed at OMFS clinics in Sri Lanka during the years 2020 and 2021	105
4.2	Total numbers of treatments carried out in OMFS clinics in Sri Lanka during the years 2020 and 2021 according to types of treatments	106
4.3	Monthly average numbers of treatments carried out per single OMFS clinic in Sri Lanka during the years 2020 and 2021 according to types of treatments	107
4.4	Distribution of different types of Oro-facial trauma managed at OMFS clinics in Sri Lanka during the years 2020 and 2021	109
4.5	Presentation and management of Oral cancer at OMFS clinics in Sri Lanka during the years 2020 and 2021	110
4.6	(a) Presentation of OPMD cases to OMFS clinics in Sri Lanka during the year 2020: according to types of OPMDs	111
	(b) Presentation of OPMD cases to OMFS clinics in Sri Lanka during the year 2021: according to types of OPMDs	111
4.7	Total number of patients visited and managed at Restorative Dentistry clinics in Sri Lanka during the years 2020 and 2021	112
4.8	Total numbers of treatments carried out in Restorative Dentistry clinics in Sri Lanka in the years 2020 and 2021 according to types of treatments	113
4.9	Monthly average numbers of treatments carried out in a single Restorative Dentistry clinic in Sri Lanka during the years 2020 and 2021 according to types of treatments	114
4.10	Total numbers of patients visited and managed at Orthodontic clinics in Sri Lanka during the years 2020 and 2021	116

4.11		Total numbers of treatments carried out in Orthodontic clinics in Sri Lanka in the years 2020 and 2021 according to types of treatments	117
4.12		Monthly average numbers of treatments carried out in a single Orthodontic clinic in Sri Lanka during the years 2020 and 2021 according to types of treatments	118
4.13		Monthly average numbers of patients treated in a single Preventive Oral Health clinic during the years 2020 and 2021 according to types of clinic visits	120
4.14		Monthly average numbers of selected special groups of patients managed in a single Preventive Oral Health clinic during the years 2020 and 2021	121
4.15		Monthly average numbers of different types of selected treatments provided in a single Preventive Oral Health clinic during the years 2020 and 2021	122
6.1	(a)	Monthly average number of school children screened by a single SDT in the year 2020: district variation	149
	(b)	Monthly average number of school children screened by a single SDT in the year 2021: district variation	150
6.2	(a)	Monthly average number of children with treatment completions per SDT in the year 2020: district variation	151
	(b)	Monthly average number of children with treatment completions per SDT in the year 2021: district variation	152
6.3	(a)	Percentage of children treated by SDTs, out of those who needed treatments during the year 2020: district variation	154
	(b)	Percentage of children treated by SDTs, out of those who needed treatments during the year 2021: district variation	154
6.4		Monthly average numbers of selected types of treatments carried out by a single SDT in the years 2020 and 2021	156

Abbreviations

ADC	- Adolescent Dental Clinic
AHB	- Annual Health Bulletin
BCC	- Behaviour Change Communication
BH	- Base Hospital
CBSL	- Central Bank of Sri Lanka
CCD	- Consultant in Community Dentistry
CCP	- Consultant Community Physician
CDC	- Community Dental Clinic
DDG	- Deputy Director General
DDG /DS	- Deputy Director General (Dental Services)
DGH	- District General Hospital
DH	- Divisional Hospital
DS	- Dental Surgeon
ECDO	- Early Childhood Development Officer
ET and R	- Education, Training and Research
FHB	- Family Health Bureau
GDP	- Gross Domestic Product
GIC	- Glass Ionomer Cement
HEO	- Health Education Officer
HPB	- Health Promotion Bureau
HP	- Health Promotion
IEC	- Information Education Communication
IOH	- Institute of Oral Health
MCH	- Maternal and Child Health
MOH	- Medical Officer of Health
MO	- Medical Officer
NCCP	- National Cancer Control Programme
NCD	- Non-Communicable Disease
NDHTSL	- National Dental Hospital (Teaching) Sri Lanka
NIHS	- National Institute of Health Sciences
NOHS	- National Oral Health Survey

NSECD	- National Secretariat for Early Childhood Development
OMFS	- Oral and Maxillofacial Surgery
OPD	- Out-Patient Department
OPMD	- Oral Potentially Malignant Disorder
PDHS	- Provincial Director of Health Services
PGH	- Provincial General Hospital
PGIM	- Post Graduate Institute of Medicine
PHC	- Primary Health Care
PHI	- Public Health Inspector
PHM	- Public Health Midwife
PHPS	- Preschool Health Promotion Setting
PHS	- Public Health Service
PMCU	- Primary Medical Care Unit
PHNS	- Public Health Nursing Sister
RCT	- Root Canal Treatment
RDHS	- Regional Director of Health Services
RDS	- Regional Dental Surgeon
RHMIS	- Reproductive Health Management Information System
RPHNS	- Regional Public Health Nursing Sister
RSU	- Research and Surveillance Unit
SDC	- School Dental Clinic
SDS	- School Dental Service
SDT	- School Dental Therapist
SPHM	- Supervising Public Health Midwife
SSDT	- Supervising School Dental Therapist
TH	- Teaching Hospital
TOT	- Training Of Trainers

Summary Statistics- Sri Lanka

Indicator	Data		Source
	2020	2021	
Demographic Indicators			
Total population (Mid-year population estimates)	21,919,000	22,156,000	Department of Census and Statistics 2021
Land area (km ²)	65,610	65,610	Survey Department
Population density	350	354	Department of Census and Statistics
Crude birth rate (per 1000 persons)	13.8	12.9	
Crude death rate (per 1000 persons)	6	7.4	
Sex ratio (Number of males per 100 females)	93.9	93.9	
Under five-year-old age population (percentage)	8.6	8.6	
Urban population (percentage)	19	19	World Bank Report
Socio economic indicators			
Unemployment rate	5.5	5.1	Annual Report 2021 CBSL
Total age dependency ratio [Total number of dependents (elderly + young people) per 100 people in the workforce (15 – 64-year-old)]	54%	54%	World Bank Report
Old age dependency ratio [Total number of elderly people (> 64-year-old) per 100 people in the workforce (15 – 64-year-olds)]	17%	18%	
Young age dependency ratio [Total number of young people (0–14-year-old) per 100 people in the workforce (15 – 64-year-old)]	36%	36%	
Literacy rate (age 15 years and above)	93	93	Annual Report 2021 CBSL
Per capita GNI (Gross National Income) (US\$)	3,591	3,722	Annual Report 2021 CBSL
Per capita GDP (Gross Domestic Product) (US\$)	3,695	3,815	

Health Indicators			
Life Expectancy at birth male/female (2020)	74.0/80.0	74.0/80.0	World Bank Report
Mortality rate under the five-year-old age group (per 1000 live births)	9.5	11.1	Family Health Bureau
Maternal mortality rate (per 100,000 live births)	30.2	29.2	
Health Resource			
Total health expenditure (Rs. Millions)	-	387,121	Annual Report 2021 CBSL
Total Health Expenditure as a % of GDP	1.6	2.3	
Population per dental surgeon	12,265.8	12,460.4	Research and Surveillance Unit, Institute of Oral Health, Maharagama
Dental surgeons per 100,000 population	8.2	8.0	
Number of hospitals with dental OPD clinics	694	737	
Number of consultant dental surgeons, including acting consultants (Ministry of Health, Ministry of Defence, Faculty of Dental Sciences)	120	125	
Number of consultant Oral and Maxillofacial surgeons including acting consultants (Ministry of Health, Ministry of Defence, Faculty of Dental Sciences)	40	46	
Number of consultant Orthodontists including acting consultants (Ministry of Health, Ministry of Defence, Faculty of Dental Sciences)	28	31	
Number of consultants in Restorative dentistry including acting consultants (Ministry of Health, Ministry of Defence, Faculty of Dental Sciences)	26	28	
Number of consultants in Community dentistry (Ministry of Health, Ministry of Defence, Faculty of Dental Sciences)	10	13	
Number of consultants in Oral Pathology (Ministry of Health, Faculty of Dental Sciences)	7	7	

Total number of dental surgeons including consultant dental surgeons (Ministry of Health, Ministry of Defence, Faculty of Dental Sciences)	1,787	1,779	Research and Surveillance Unit, Institute of Oral Health, Maharagama
Total number of school dental therapists	373	356	
Total number of dental laboratory technicians (Ministry of Health, Faculty of Dental Sciences)	44	44	
Oral Health Indicators			National Oral Health Survey Sri Lanka 2015-2016
Percentage of 12 -years -old with dental caries	30.4	30.4	
Mean DMFT – 12 -years -olds	0.6	0.6	
Percentage of 12-year-old with calculus	47.0	47.0	
Percentage of 35- 44 -years -old with periodontal pockets > 4 mm	25.3	25.3	
Percentage of 12 -years- old who brush their teeth twice a day	50.1	50.1	

Vision and Mission

VISION

A healthier Sri Lankan nation with healthy mouths contributing to its economic, social, mental and spiritual development

MISSION

Contribute to social and economic development of Sri Lanka by performing all possible activities for achieving the highest attainable oral health status through promotive, preventive, curative dental services of high quality made available and accessible to people of Sri Lanka

Chapter 1

Introduction

The Ministry of Health, Sri Lanka publishes this Oral Health Report 2020/2021 for the third time to provide information which describes the public sector oral healthcare service of the country. This report provides feedback and helps to evaluate the oral healthcare services in view of the successes and finding ways for further improvements of oral health programmes. Data and information collected through monthly returns from Dental Surgeons (DSs), specialized oral health units and School Dental Therapists (SDTs) were summarized and analyzed. Secondary data from the Annual Health Bulletin (AHB) were also utilized for trend analysis.

1.1 Organization of oral healthcare delivery system in Sri Lanka

Oral healthcare services provided by the Ministry of Health Sri Lanka include curative and preventive services. Curative oral healthcare services consist of both general oral healthcare and specialized oral healthcare. General oral healthcare is provided through the clinics located in Primary Medical Care Units (PMcUs), Divisional Hospitals, Base Hospitals, District General Hospitals, Provincial General Hospitals, Teaching Hospitals and National Hospitals. Specialized oral healthcare is provided through specialized oral health units in hospitals such as Oral and Maxillofacial Surgery (OMFS) Units, Restorative Dentistry Units, Orthodontic Units, Oral Pathology Units. Preventive Oral Healthcare services provided through Adolescent Dental Clinics (ADCs), Community Dental Clinics (CDCs), Preventive Oral Healthcare Units and National Programmes. A detailed description of these services and training of the oral health workforce in Sri Lanka were included in “Oral Health Report 2018”. Trends in oral health status among Sri Lankan population according to the past National Oral Health Surveys were described comprehensively in “Oral Health Report 2018”.

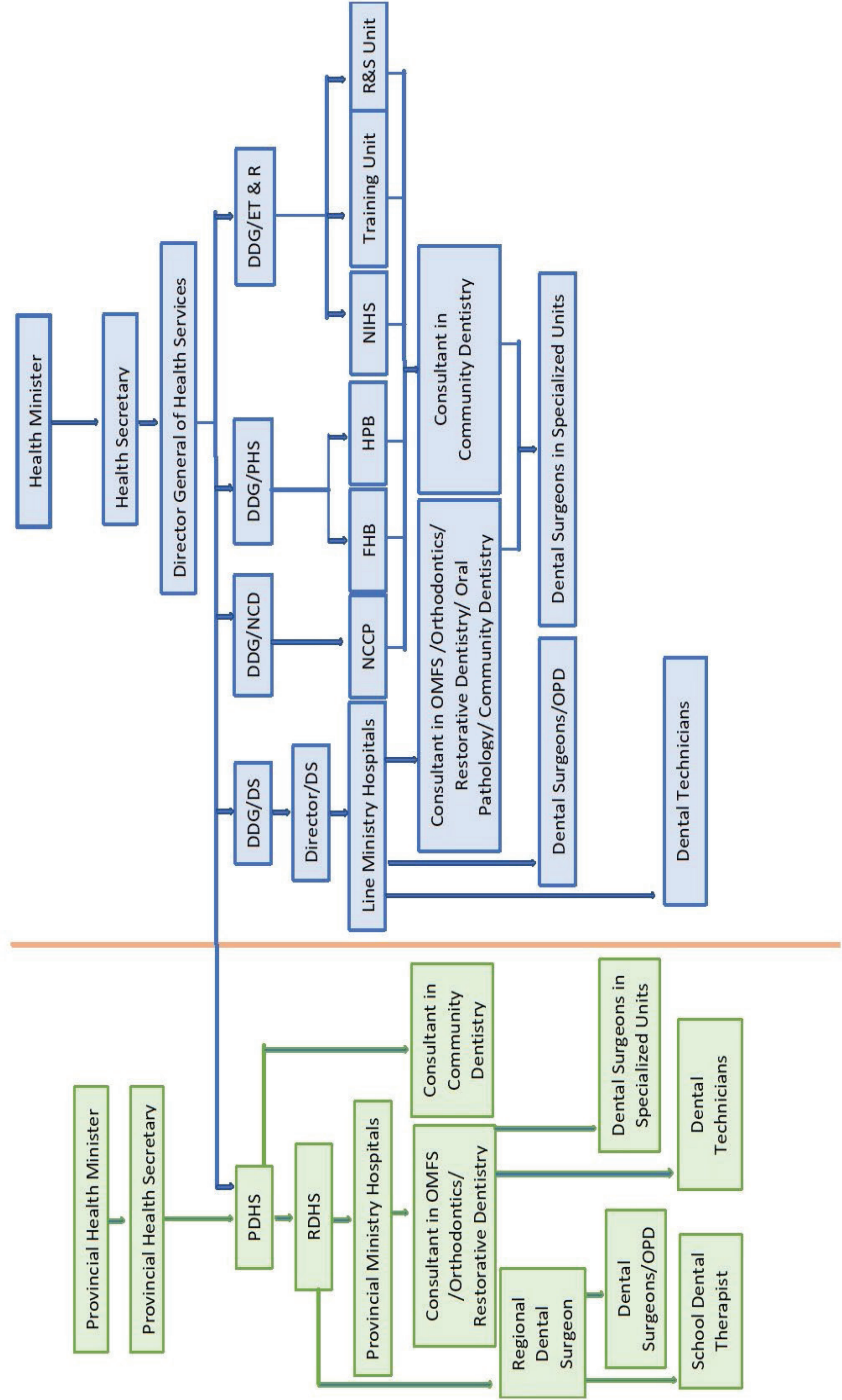
[\[http://www.health.gov.lk/moh_final/english/public/elfinder/files/publications/2021/Oral%20Health%20Report-2018.pdf\]](http://www.health.gov.lk/moh_final/english/public/elfinder/files/publications/2021/Oral%20Health%20Report-2018.pdf)

“Oral Health Report 2019” is also available for reference.

http://www.health.gov.lk/moh_final/english/public/elfinder/files/publications/2021/Oral%20Health%20Report%20cover%20combined.pdf

The overall management of the oral healthcare services is under the purview of Deputy Director General (Dental Services) and the organogram of the oral healthcare service profile under the Ministry of Health, Sri Lanka is explained below in figure 1

Fig.1: Organogram of the Oral Healthcare Service Profile under the Ministry of Health



Chapter 2

Human resource profile of oral healthcare services in Sri Lanka

2.1 Human resource profile of oral healthcare services in Sri Lanka under the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya

Table 2.1 explains the distribution of the human resource profile of oral health services in Sri Lanka across the districts. Consultants and Senior Registrars /Registrars (SR/R) in the field of dentistry are categorized as:

- Clinical (C), Non-Clinical (NC): Those who are under the Ministry of Health
- Forces (F): Those who are under the Ministry of Defence
- University (U): Those who are working in the Faculty of Dental Sciences, University of Peradeniya.

Clinical and Non-Clinical are defined as follows:

- Clinical: When a person is engaged with direct patient treatments, which include Oral and Maxillofacial Surgery, Restorative Dentistry, Orthodontics, Community Dentistry (clinical) and Oral Pathology.
- Non-Clinical: When a person is not engaged with direct patient treatments, which include Community Dentistry (non-clinical).

As shown in table 2.1, at the end of 2021, 96 dental consultants were working (both clinical and non-clinical) under the Ministry of Health, 8 dental consultants under the Ministry of Defence and 21 dental consultants in the Faculty of Dental Sciences, University of Peradeniya and 1654 dental surgeons were working in the government sector. Although there were 459 School dental clinics (SDC) throughout the island, only 356 School dental therapists (SDT) were in place. At the end of 2021, 44 Dental laboratory technicians were working under several specialities of government dental service in Sri Lanka.

Table 2.1: Distribution of the human resource in oral healthcare services in Sri Lanka including the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya (at the end of 2021)

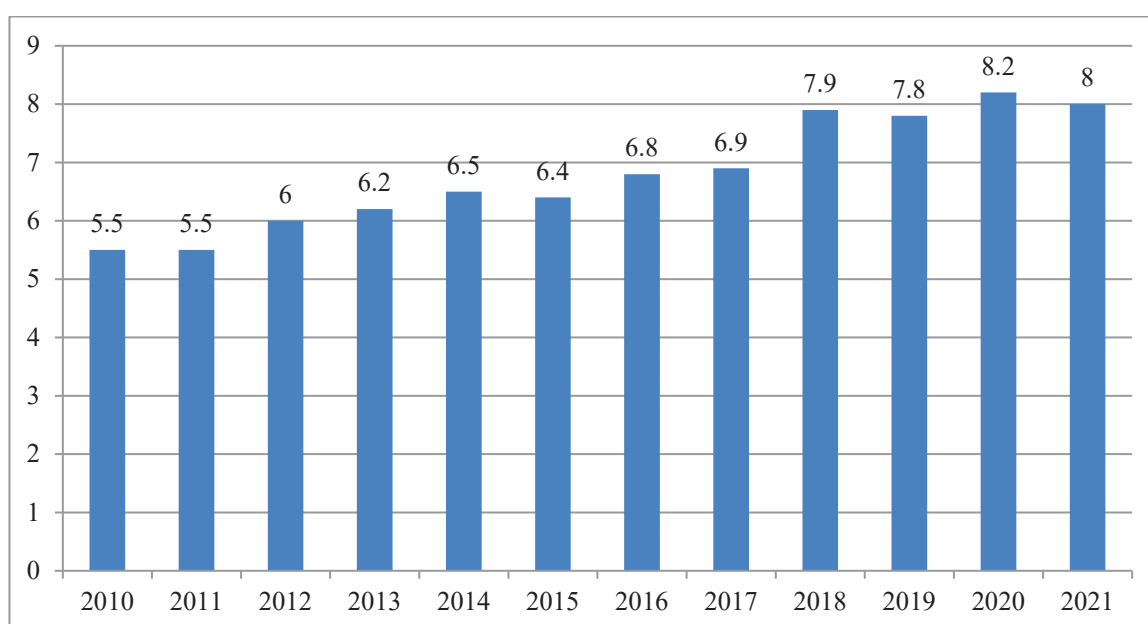
District	Consultants				PGIM					RDS	SHO / HO	Dental Surgeons			Interns	SDT	SS DT		
					SR/R				MSc + Dip			OPD	NC	F					
	C	NC	F	U	C	NC	F	U											
Colombo	21	10	8		25	23	3		15	1	97	133	13	65	93	44	1		
Gampaha	6				11	0			1	2	27	66				31	1		
Kalutara	4				0	0				1	13	44				18	0		
NIHS area	0	1			0	0				1	10	7				4	0		
Kandy	6			21	18	0		17	4	1	57	72				20	1		
Matale	2				0	0				1	6	22				8	0		
Nuwara Eliya	1				0	0				1	5	31				8	0		
Galle	5	1			5	0			1	1	19	43				25	0		
Matara	2				0	0				1	8	30				20	0		
Hambantota	2				0	0				1	8	29				10	0		
Jaffna	3				2	0				1	9	40				7	1		
Kilinochchi	0				0	0				1	0	10				2	1		
Mullaitivu	0				0	0				1	0	8				2	1		
Vavuniya	2				0	0				1	5	11				3	1		
Mannar	1				0	0				1	0	17				2	1		
Batticaloa	3				0	0				1	13	35				6	0		
Ampara	2				0	0				1	6	20				4	0		
Trincomalee	1				0	0				1	2	23				6	0		
Kalmunai	0				0	0				1	0	43				9	0		
Kurunegala	4				0	0			2	2	13	71				28	1		
Puttalam	2				0	0				1	8	39				11	1		
Anuradhapura	3				0	0				1	13	34				17	1		
Polonnaruwa	3				0	0				1	11	26				10	1		
Badulla	3				0	0				2	16	57				18	0		
Monaragala	1				0	0				1	0	31				9	1		
Rathnapura	4				0	0				1	15	72				18	1		
Kegalle	2	1			0	0				1	10	34				16	1		
TOTAL	83	13	8	21	61	23	3	17	23	30	371	1048	13	65	93	356	15		
	125				104														
	1654																		

2.2 Distribution of government dental surgeons

There were 1,779 dental surgeons (including dental consultants) in the government sector working under the Ministry of Health, Ministry of Defence, and the Faculty of Dental Sciences, University of Peradeniya at the end of 2021.

Figure 2.1 explains the distribution of government dental surgeons per 100,000 population from 2010 to 2021.

Fig. 2.1: Distribution of government dental surgeons per 100,000 population from 2010 to 2021



Data source- From 2010 to 2017- Annual Health Bulletin,

2018- Oral Health Report 2018

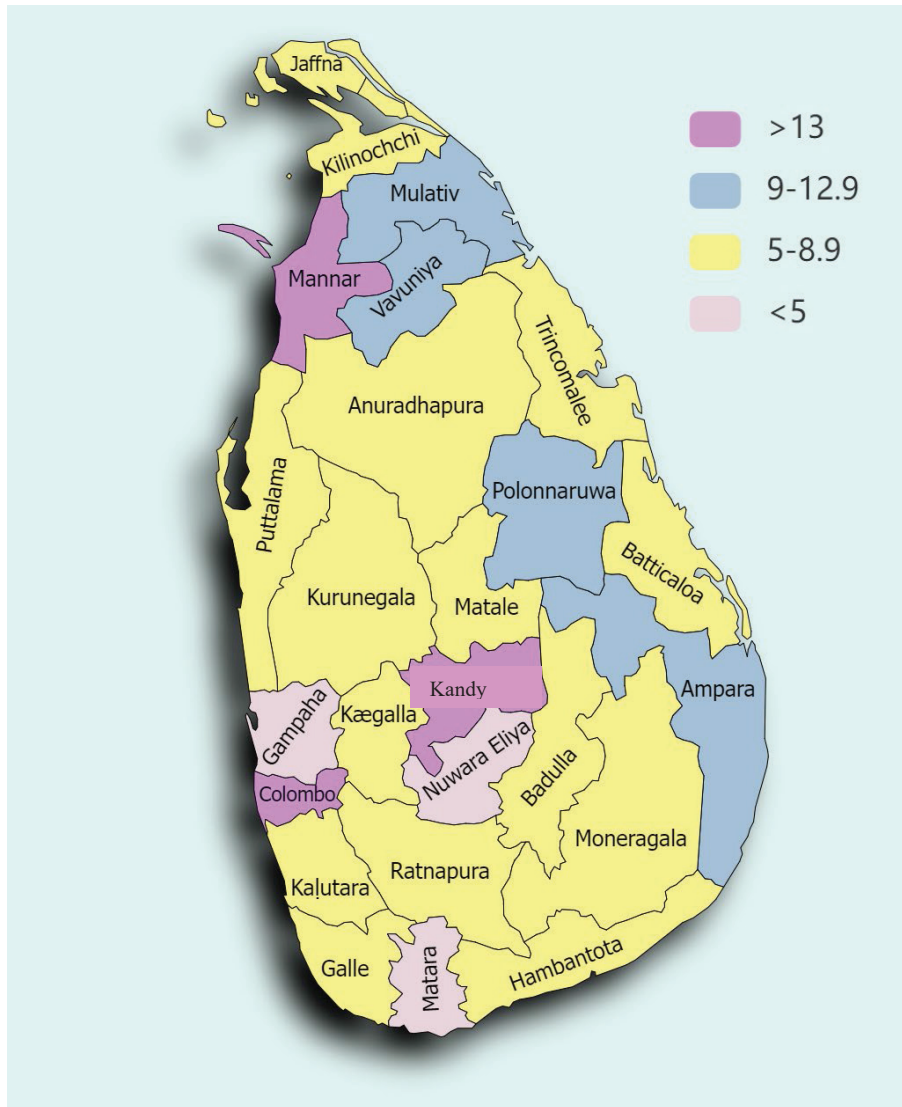
2019-Oral Health Report 2019

2020/2021-Unpublished data

According to the Fig: 2.1, there is a gradual increase in the number of dental surgeons per 100,000 population in Sri Lanka from 2010 to 2021. That trend is slightly altered in 2015 compared to 2014, 2019 compared to 2018 and in 2021 compared to 2020.

Figure 2.2 explains the distribution of government dental surgeons (including consultants) per 100,000 population across the districts in Sri Lanka at the end of 2021.

Fig. 2.2: Distribution of government dental surgeons per 100,000 population at the end of 2021: district variation



The average distribution of government dental surgeons per 100,000 population in Sri Lanka at the end of 2021 is 8.0. It varied across the districts with the highest being 16.7 in Colombo district and Mannar district and the lowest being 4.6 in Gampaha district.

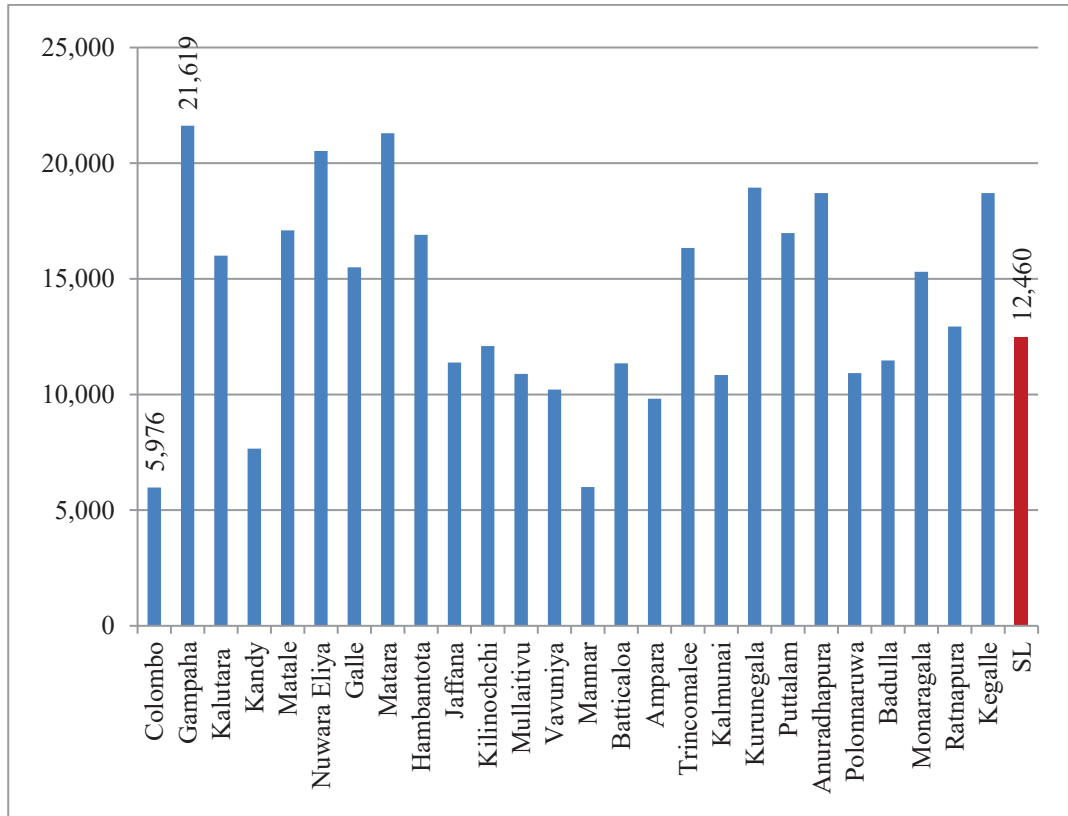
Table 2.2 gives a further illustration of the district wise distribution of government dental surgeons (including consultants) per 100,000 population at the end of 2021.

Table 2.2: Distribution of government dental surgeons (including consultants) per 100,000 population in the year 2021: district variation

District	Dental professionals per 100,000 population 2021
Colombo	16.7
Gampaha	4.6
Kalutara	6.3
Kandy	13.1
Matale	5.8
Nuwara Eliya	4.9
Galle	6.5
Matara	4.7
Hambantota	5.9
Jaffna	8.8
Kilinochchi	8.3
Mullaitivu	9.2
Vavuniya	9.8
Mannar	16.7
Batticaloa	8.8
Ampara	10.2
Trincomalee	6.1
Kalmunai	9.2
Kurunegala	5.3
Puttalam	5.9
Anuradhapura	5.3
Polonnaruwa	9.2
Badulla	8.7
Monaragala	6.5
Kegalle	7.7
Ratnapura	5.3
Sri Lanka	8.0

Figure 2.3 explains the dentist to population ratio in Sri Lanka at the end of 2021.

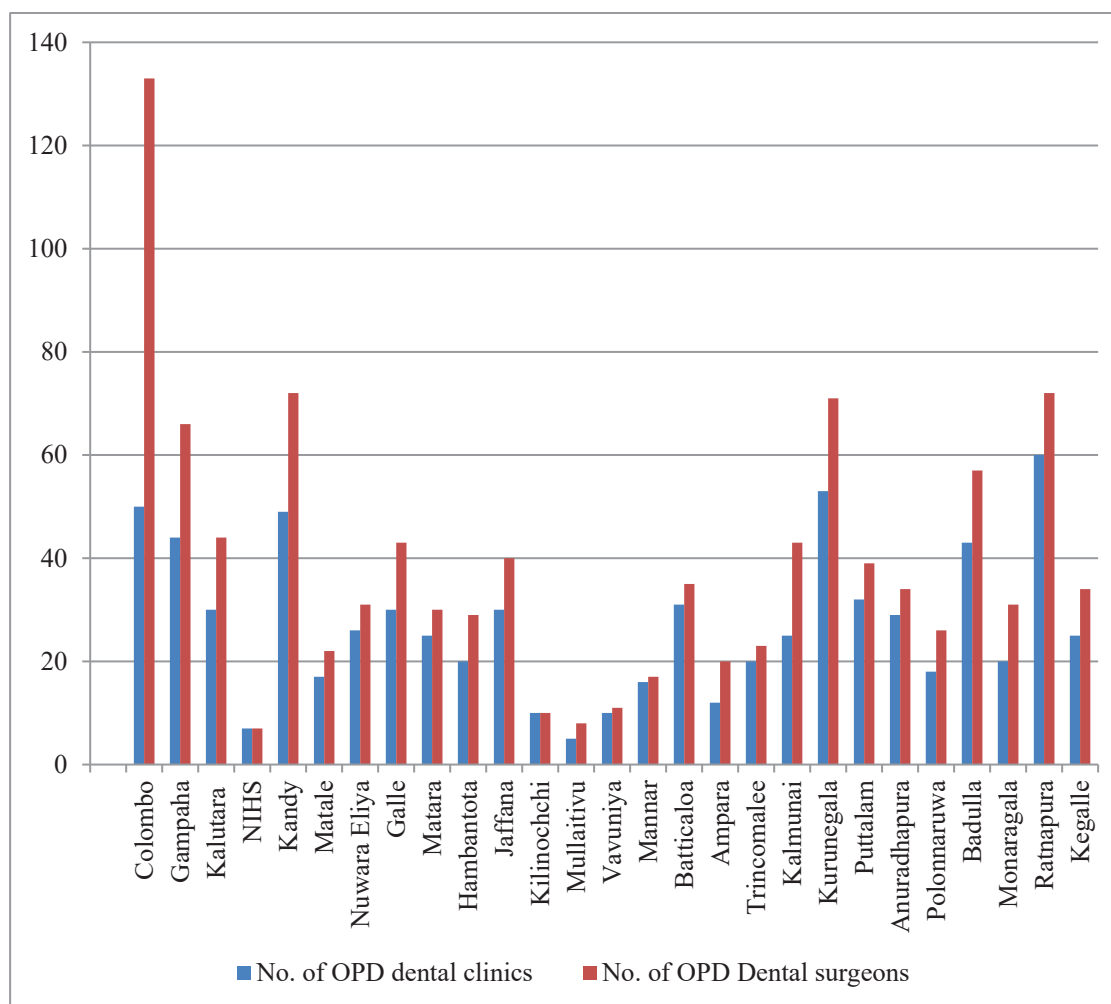
Fig. 2.3: Dentist to population ratio at the end of 2021: district variation



There were 1,779 dental surgeons including consultants working in the government sector by the end of 2021. As the projected value of the Sri Lankan population was 22.15 million for 2021, the national figure for dentist to population ratio was 12,460.4. When district figures of dentist to population ratios were considered, they varied from the lowest value of 5,975.9 in the Colombo district to the highest value of 21,619.5 in the Gampaha district. Nuwara Eliya and Matara districts also had figures above 20,000, while Kandy, Mannar and Ampara districts, together with the Colombo district had values below 10,000.

Figure 2.4 explains the distribution of OPD dental clinics and OPD dental surgeons under the Ministry of Health, Sri Lanka at the end of the year 2021.

Fig. 2.4: Distribution of OPD dental clinics and OPD dental surgeons under the Ministry of Health, Sri Lanka at the end of 2021: district variation



At the end of 2021, 1,048 OPD dental surgeons were practising clinical dentistry in 737 government OPD dental clinics in Sri Lanka under the Ministry of Health. Out of them, 212 were attached to 49 OPD dental clinics in hospitals under the line ministry and 836 OPD dental surgeons were attached to 688 OPD dental clinics in hospitals under the provincial ministries. The distribution of dental surgeons was the highest in the Colombo district, while more than 60 dental surgeons per district were working in Kandy, Kurunegala, Rathnapura and Gampaha districts.

2.3 Specialized Oral Healthcare Services in Sri Lanka

Specialized oral healthcare services are provided through specialized oral health units in the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya, under dental consultants in different fields. Specialized oral healthcare services are classified as Oral and Maxillofacial Surgery, Restorative Dentistry, Orthodontics, Community Dentistry and Oral Pathology. These units are under the consultants namely consultant in Oral and Maxillofacial Surgery (consultant- OMFS), consultant in Restorative Dentistry (consultant-RD), consultant in Orthodontics (consultant-O), consultant in Community Dentistry (consultant-CD) and consultant in Oral Pathology (consultant-OP) respectively.

Table 2.3 explains the distribution of dental consultants in Sri Lanka at the end of 2021. Consultants include both board certified consultants and acting consultants.

Table 2.3: Distribution of dental consultants according to the speciality at the end of 2021(Includes those who were under the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya)

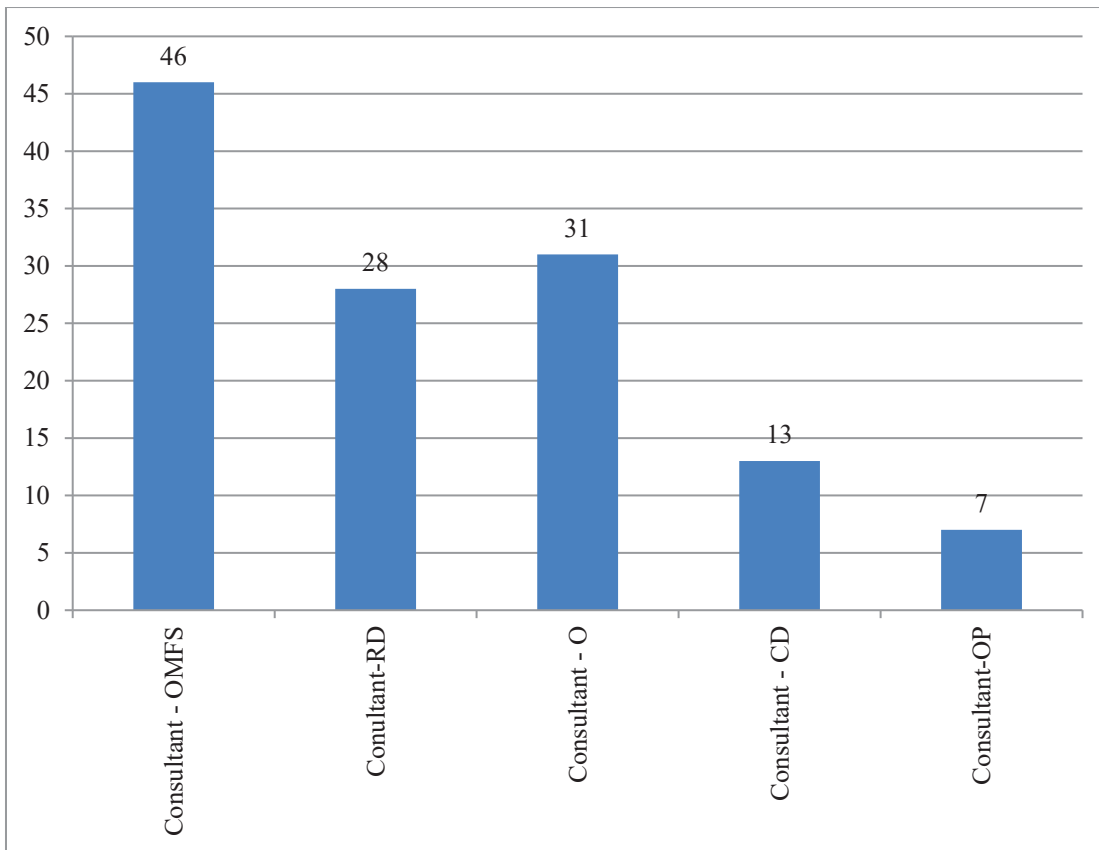
Affiliation	Consultant - OMFS	Consultant -RD	Consultant -O	Consultant - CD	Consultant - OP	Total
Ministry of Health	39	19	25	10	3	96
Ministry of Defence	2	2	3	1	0	8
Faculty of Dental Sciences, University of Peradeniya	5	7	3	2	4	21
Total	46	28	31	13	7	125

Consultants include both board certified consultants and acting consultants.

Consultants working in departments of Paedodontology, Periodontology and Prosthetics are taken into Consultant in Restorative Dentistry and Consultants in Oral Medicine are taken into Consultant in OMFS in the Faculty of Dental Sciences, University of Peradeniya

The distribution of different dental consultants in Sri Lanka at the end of 2021 is illustrated in figure 2.5.

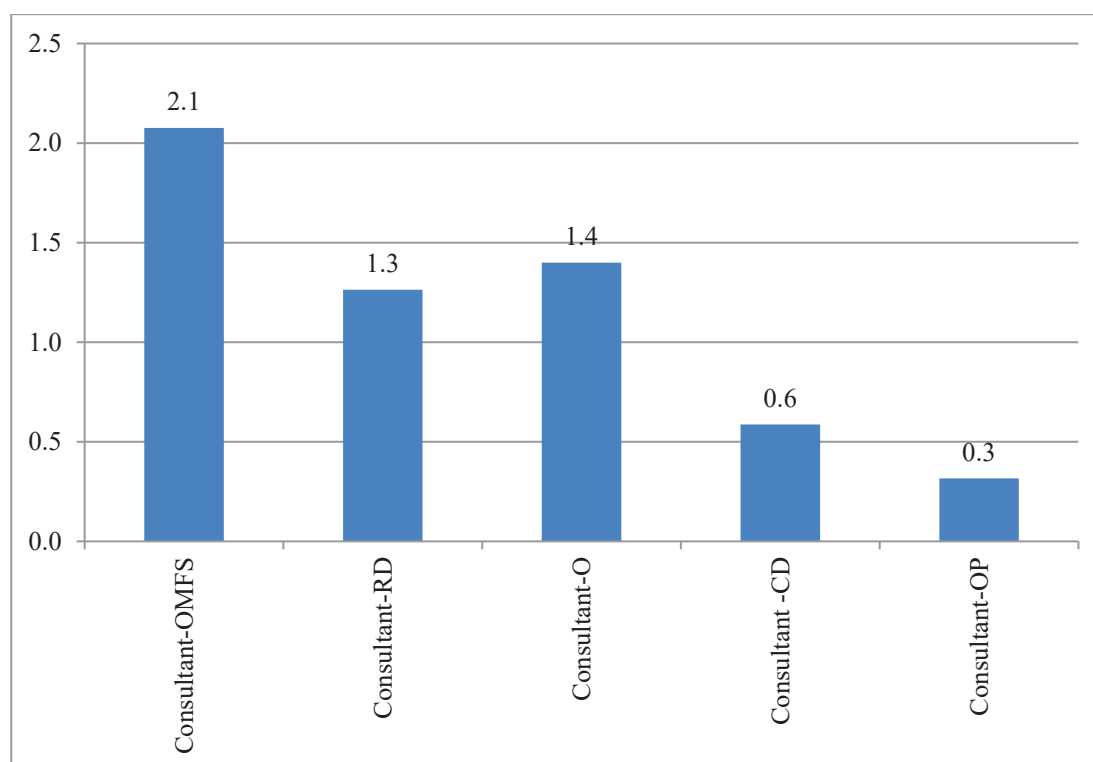
Fig.2.5: Distribution of different dental consultants in Sri Lanka at the end of 2021 according to the speciality including those who were under the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya.



Consultants include both board certified consultants and acting consultants.

The distribution of government dental consultants per one million population in Sri Lanka at the end of 2021 is explained in figure 2.6.

Fig. 2.6: Distribution of government dental consultants per one million population in Sri Lanka at the end of 2021 including those who were under the Ministry of Health, Ministry of Defence and Faculty of Dental Sciences, University of Peradeniya



Consultants include both board certified consultants and acting consultants.

According to the statistics, there were 2.1 consultants in OMFS, 1.3 consultants in Restorative Dentistry, 1.4 consultants in Orthodontics, 0.6 consultants in Community Dentistry and 0.3 consultants in Oral Pathology per one million population in Sri Lanka at the end of 2021.

District level distribution of dental consultants under the Ministry of Health, Sri Lanka for the year 2021 is explained in table 2.4.

Table 2.4: Distribution of different types of dental consultants under the Ministry of Health across the districts in Sri Lanka at the end of the year 2021

District	Consultants -OMFS	Consultants -RD	Consultants -O	Consultants -CD- Clinical	Consultants -CD- Non- Clinical	Consultants -OP
Colombo	7	7	5	2	6	2
Gampaha	3	1	2	0	0	0
Kalutara	2	1	1	0	1	0
Kandy	2	2	2	0	0	0
Matale	1	0	1	0	0	0
Nuwara Eliya	1	0	0	0	0	0
Galle	3	1	1	0	0	1
Matara	1	0	1	0	0	0
Hambantota	1	0	1	0	0	0
Jaffna	1	1	1	0	0	0
Kilinochchi	0	0	0	0	0	0
Mullaitivu	0	0	0	0	0	0
Vavuniya	1	0	1	0	0	0
Mannar	1	0	1	0	0	0
Batticaloa	1	1	1	0	0	0
Ampara	2	0	0	0	0	0
Trincomalee	1	0	0	0	0	0
Kalmunai	0	0	0	0	0	0
Kurunegala	2	1	1	0	0	0
Puttalam	1	0	1	0	0	0
Anuradhapura	1	1	1	0	0	0
Polonnaruwa	1	1	1	0	0	0
Badulla	2	1	1	0	0	0
Monaragala	1	0	0	0	0	0
Rathnapura	2	1	1	0	0	0
Kegalle	1	0	1	0	1	0
Sri Lanka	39	19	25	2	8	3

Consultants include both board certified consultants and acting consultants

Consultants in OMFS were distributed across all 9 provinces representing 23 districts except Mullaitivu, Kilinochchi and Kalmunai.

Consultants in RD were distributed across all 9 provinces representing 12 districts namely Colombo, Gampaha, Kalutara, Kandy, Galle, Jaffna, Batticaloa, Kurunegala, Anuradhapura, Polonnaruwa, Badulla and Rathnapura.

Consultants in Orthodontics were distributed across all 9 provinces representing 19 districts namely Colombo, Gampaha, Kalutara, Kandy, Matale, Galle, Matara, Hambantota, Jaffna, Vavuniya, Mannar, Batticaloa, Kurunegala, Puttalam, Anuradhapura, Polonnaruwa, Badulla, Ratnapura and Kegalle.

Two Community Dentistry consultants were working in two clinical units namely “Preventive Oral Health Unit - National Dental Hospital (Teaching) of Sri Lanka and Preventive Oral Health Unit - Institute of Oral Health, Maharagama”. Both units are located in the district of Colombo. Other CCDs were working in non-clinical stations, 2 were attached to PDHS, namely Western Province and Sabaragamuwa Province and one was attached to Oral health Unit-National Institute of Health Sciences, Kalutara. The other five consultants were working in the Family Health Bureau, National Cancer Control Programme and Institute of Oral Health, Maharagama where all located in the Colombo district.

Consultants in Oral Pathology were distributed across 2 provinces representing 2 districts namely Colombo and Galle.

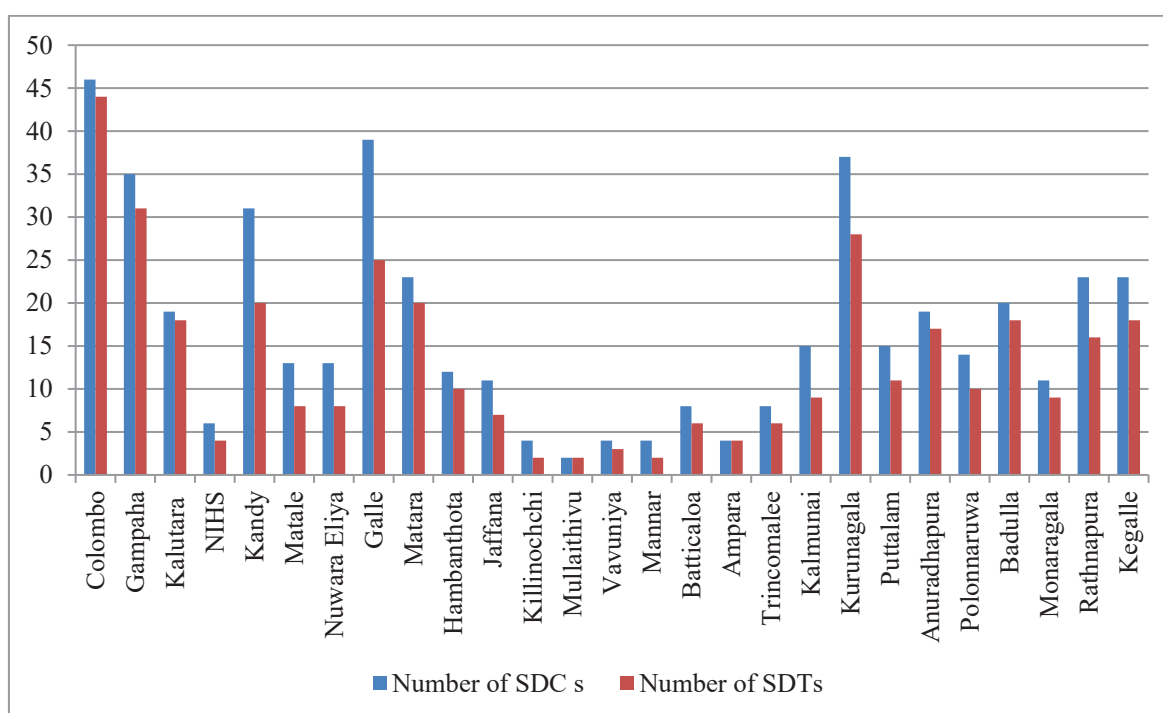
In contrast to other provinces, the Western Province had all 5 types of dental consultants. Consultants in OMFS, consultants in RD and consultants in Orthodontics were distributed across all nine provinces. Consultants in CD were distributed only in Western and Sabaragamuwa Provinces and consultants in Oral Pathology were distributed only in Western and Southern Provinces.

2.4 Distribution of School Dental Therapists in Sri Lanka

School Dental Therapists (SDTs) provide preventive oral healthcare for children aged between 3-13 years. Their target group for treatment is children in grade 1, grade 4 and grade 7 classes in schools where there are more than 200 students. Oral health care should be provided to all children below 13 years in schools with less than 200 children. The current norm is to have one School Dental Clinic (SDC) per one Medical Officer of Health (MOH) division and 2,000 target population per SDT.

Figure 2.8 explains the distribution of SDCs and SDTs in Sri Lanka at the end of the year 2021.

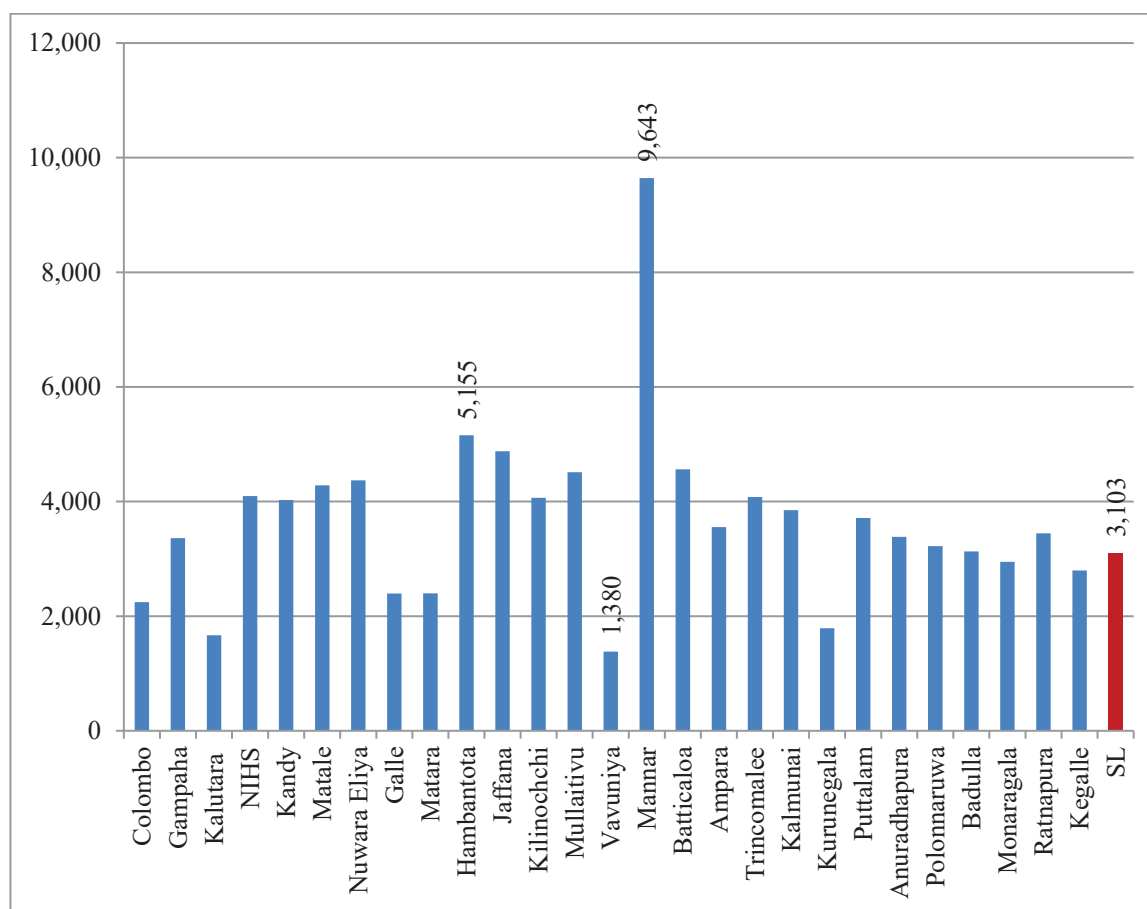
Fig. 2.8: Distribution of SDCs and SDTs in Sri Lanka at the end of 2021: district variation



There were 356 SDTs working in 459 SDCs in Sri Lanka at the end of 2021. These SDTs were working under the administration of provincial Ministries of Health. The distribution of both SDCs and SDTs was highest in the Colombo district.

Figure 2.9 explains the target population that should be cared by a single SDT in Sri Lanka for the year 2021.

Fig. 2.9: Target population that should be cared by a single SDT for the year 2021: district variation



Even though the norm for the target population is 2,000 children, the average target population per SDT in 2021 for Sri Lanka was 3,102.9 children. It varied from 1,380.3 in the Vavuniya district to 9,643 in the Mannar district. The target population for the Hambantota district was also more than 5,000.

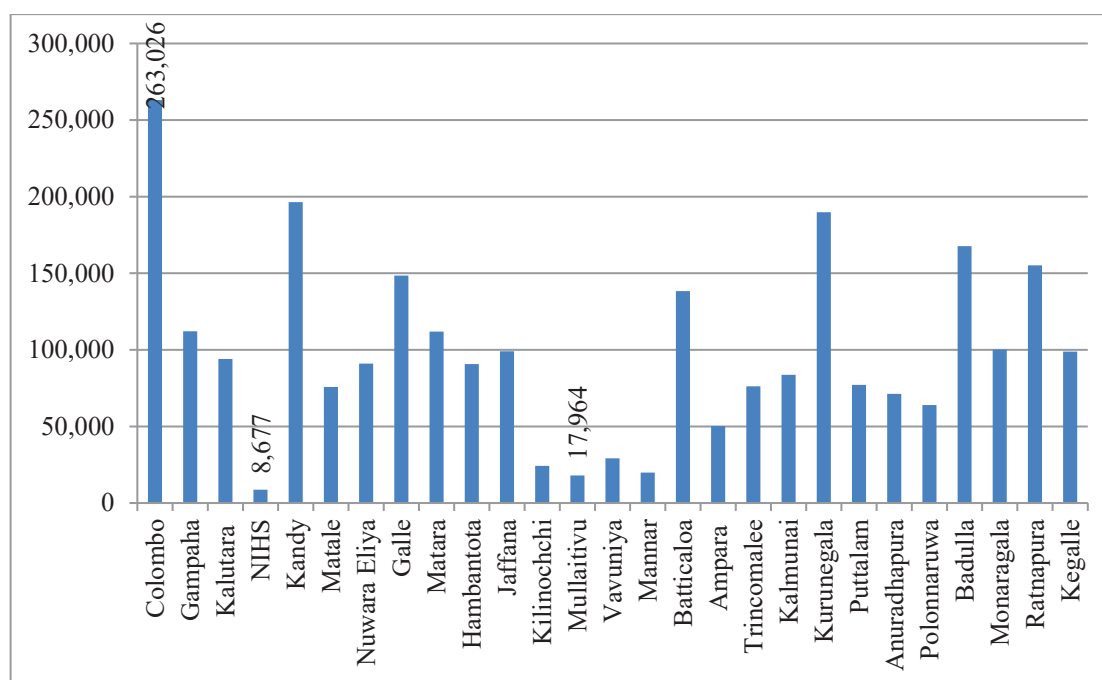
Chapter 3

Statistics related to OPD dental clinics under the Ministry of Health, Sri Lanka during 2020 and 2021

3.1 Statistics related to patients treated by OPD dental surgeons under the Ministry of Health, Sri Lanka during 2020 and 2021

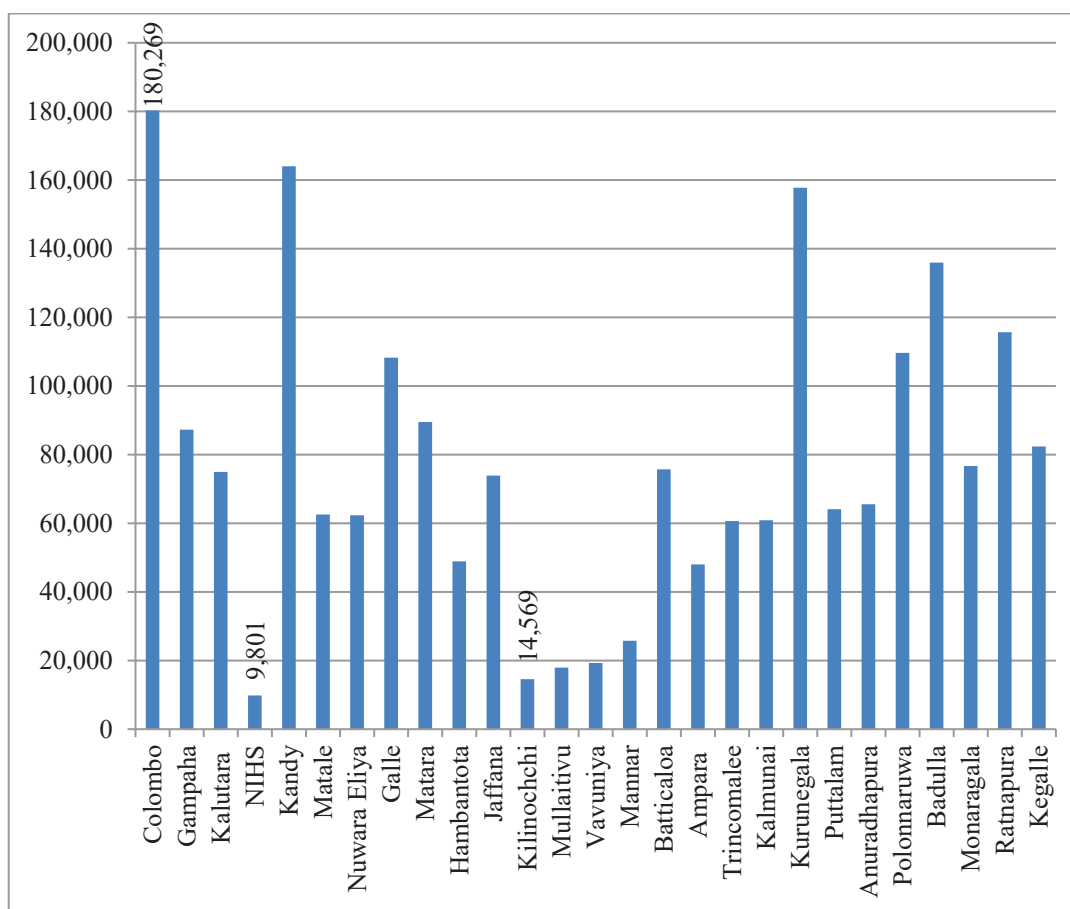
The total number of patients treated in OPD dental clinics by OPD dental surgeons under the Ministry of Health, Sri Lanka for the years 2020 and 2021 are explained in figures 3.1 (a) and 3.1 (b).

Fig. 3.1 (a): Total number of patients treated by OPD dental surgeons under the Ministry of Health in the year 2020: district variation



During the year 2020, a total of 2,655,068 patients attended OPD dental clinics under the Ministry of Health. According to district values, during the year 2020, the total number of patients treated by OPD dental surgeons varied from 8,677 in the NIHS area Kalutara to 263,026 in the Colombo district. The total number of patients treated exceeded 150,000 in Kandy, Kurunegala, Badulla and Ratnapura districts.

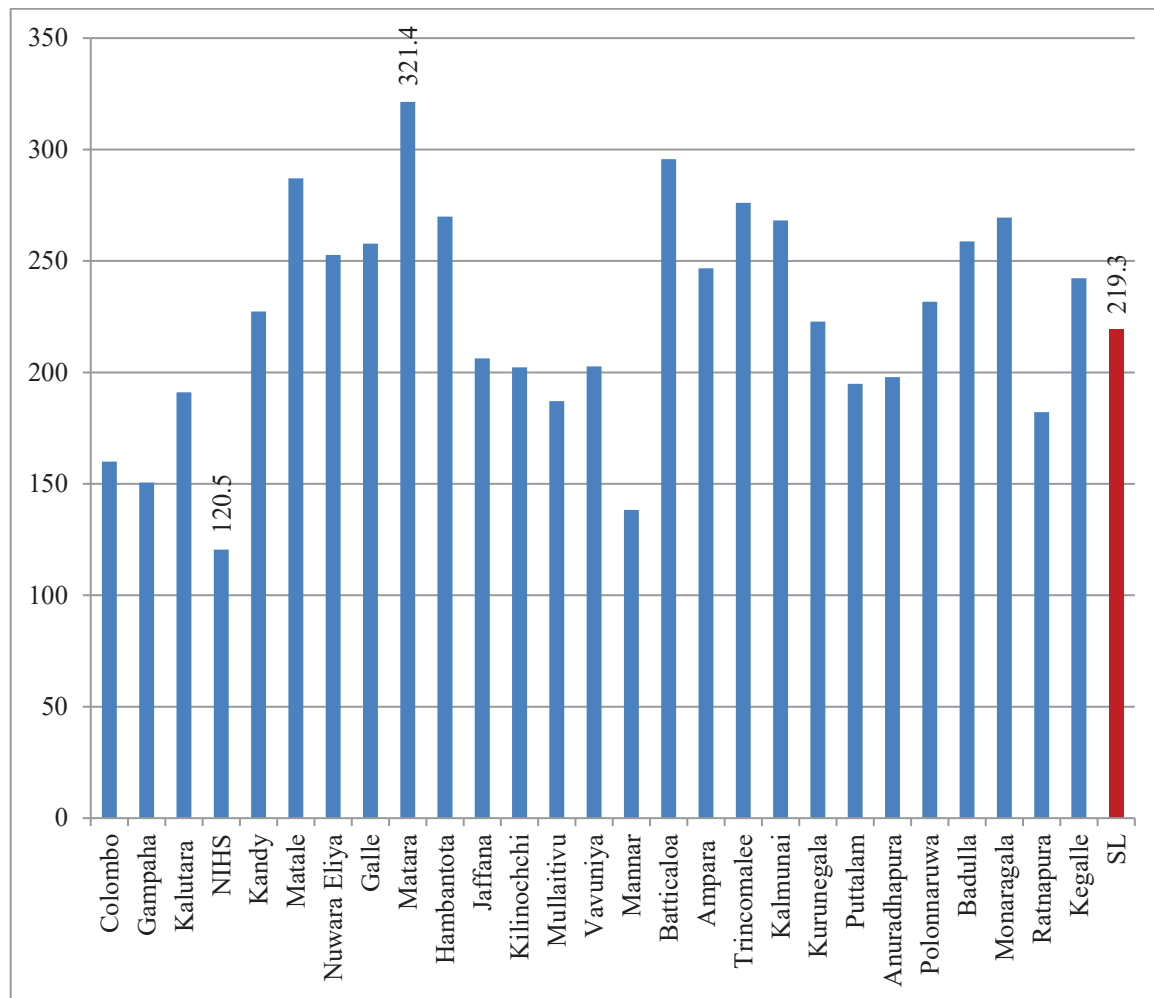
Fig. 3.1 (b): Total number of patients treated by OPD dental surgeons under the Ministry of Health in the year 2021: district variation



During the year 2021, a total of 2,092,265 patients attended OPD dental clinics under the Ministry of Health. According to district figures, during the year 2021, the total number of patients treated by OPD dental surgeons varied from 9,801 in the NIHS area Kalutara, to 180,269 in the Colombo district. The total number of patients treated exceeded 150,000 in Colombo Kandy and Kurunegala districts.

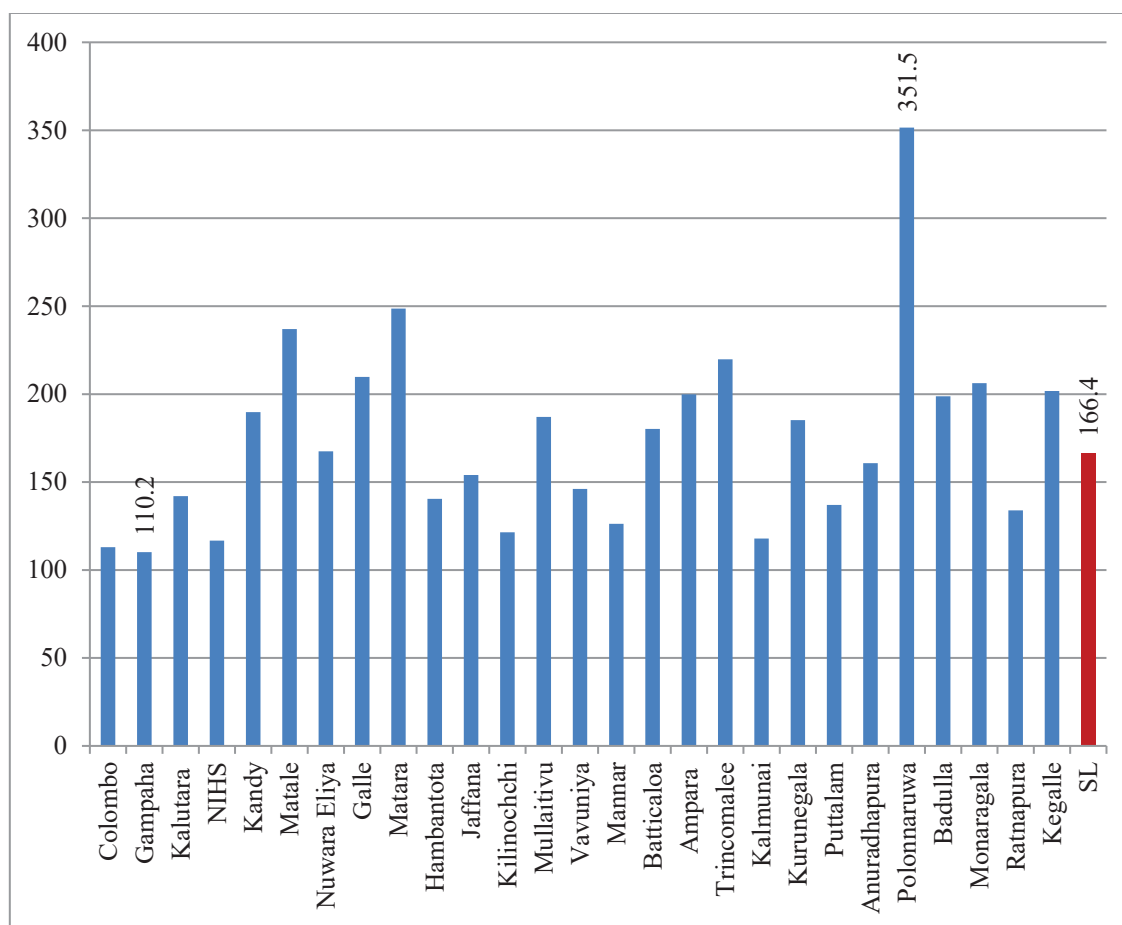
Figures 3.2 (a) and 3.2 (b) explain the monthly average numbers of patients treated by a single OPD dental surgeon working in OPD dental clinics under the Ministry of Health, Sri Lanka for the years 2020 and 2021.

Fig. 3.2 (a): Monthly average number of patients treated by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation



The monthly average number of patients treated by an OPD dental surgeon under the Ministry of Health was 219.3 in the year 2020, and district values varied from 120.5 in NIHS area Kalutara, to 321.4 in Vavuniya district.

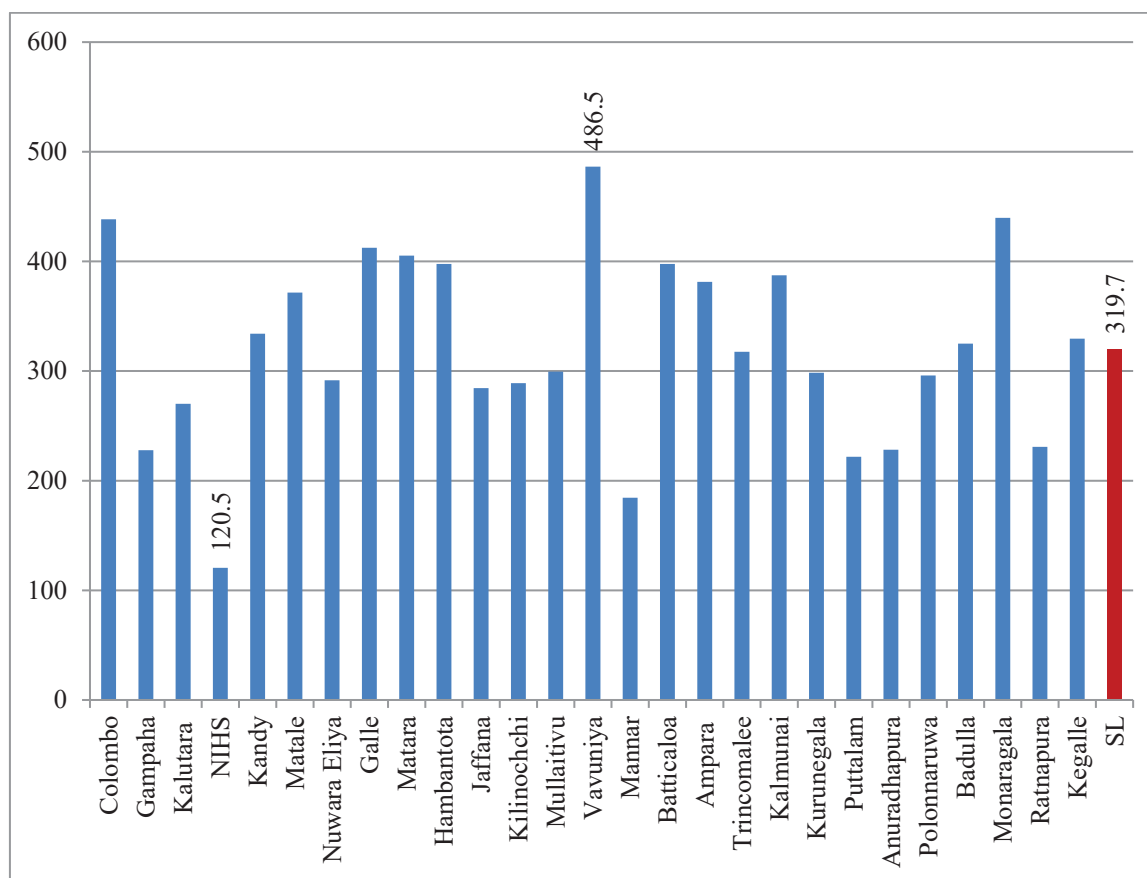
Fig. 3.2 (b): Monthly average number of patients treated by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation



The monthly average number of patients treated by an OPD dental surgeon under the Ministry of Health was 166.4 in the year 2021 and it varied from 110.2 in Gampaha district to 351.5 in Polonnaruwa district.

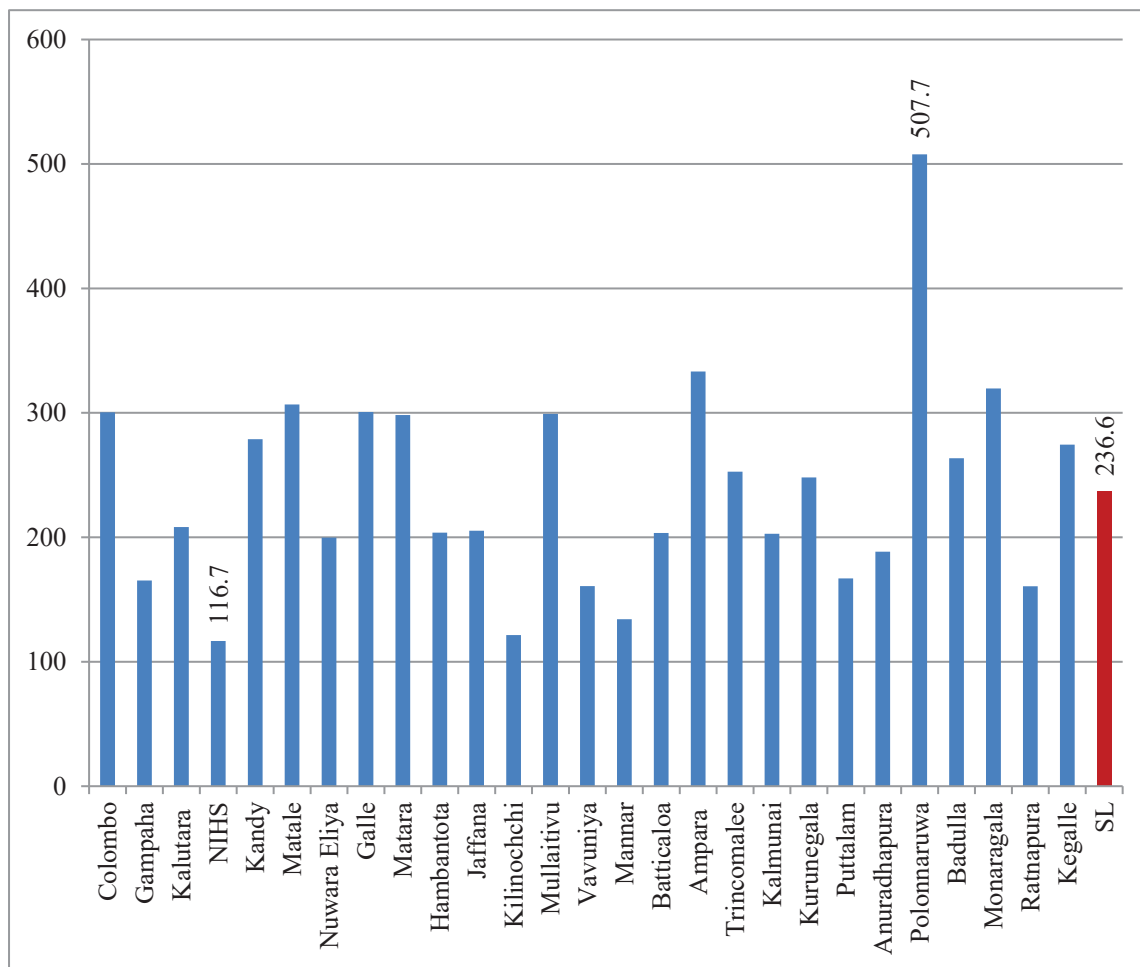
Figures 3.3 (a) and 3.3 (b) explain the monthly average numbers of patients treated in one OPD dental clinic under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Fig. 3.3 (a): Monthly average number of patients treated in a single OPD dental clinic under the Ministry of Health in 2020: district variation



On average 319.7 patients were treated in one OPD dental clinic per month in Sri Lanka, in the year 2020. This value varied from 120.5 patients treated in a single OPD dental clinic per month period in the NIHS area Kalutara to 486.5 patients in the Vavuniya district.

Fig. 3.3 (b): Monthly average number of patients treated in a single OPD dental clinic under the Ministry of Health in 2021: district variation

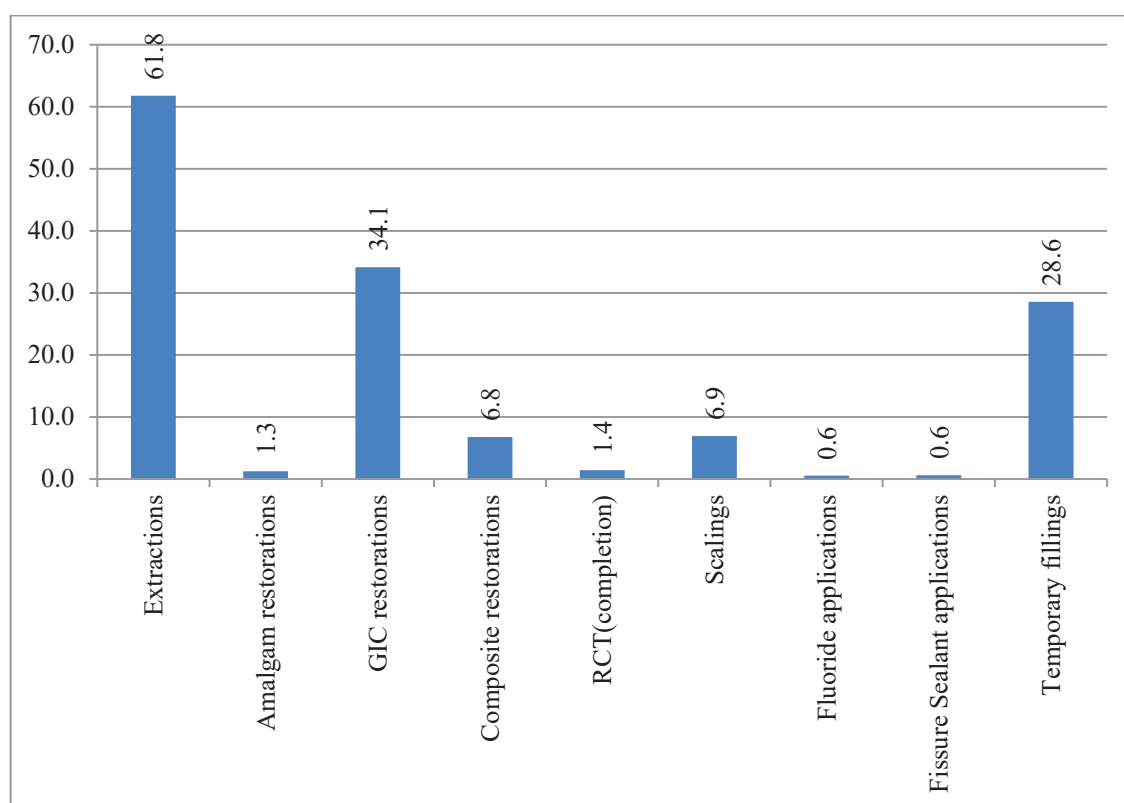


On average 236.6 patients were treated in one OPD per one month period in Sri Lanka during the year 2021. This value varied from 116.7 patients treated in one OPD dental clinic in one month period in the NIHS area Kalutara to 507.7 patients treated in the Polonnaruwa district.

3.2 Statistics related to types of dental treatments done by OPD dental surgeons under the Ministry of Health, Sri Lanka during the years 2020 and 2021

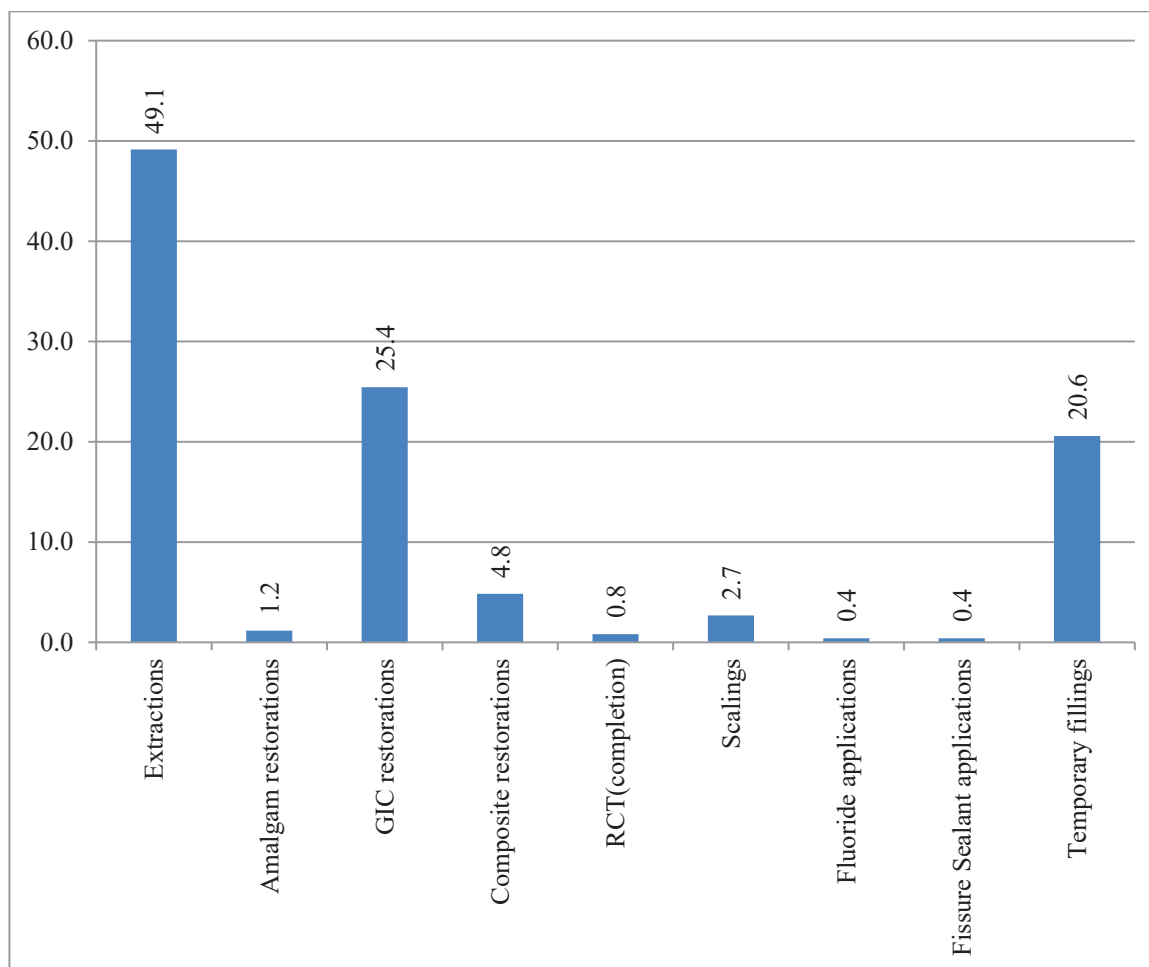
Monthly average numbers of selected dental treatments carried out by a single OPD dental surgeon in OPD dental clinics under the Ministry of Health, Sri Lanka for the years 2020 and 2021 are explained in figures 3.4 (a) and 3.4 (b)

Fig. 3.4 (a): Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020: national values



According to national figures, a single dental surgeon extracted 61.8 teeth per month during the year 2020. The monthly average number of Glass Ionomer Cement restorations (GIC restorations) done was 34.1, while the number of Temporary fillings done was 28.6. On average a single dental surgeon had done 6.9 Scalings, 6.8 Composite restorations, 1.3 Amalgam restorations and 1.4 completed Root Canal Treatments (RCT) in one month period during the year 2020.

Fig. 3.4 (b): Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021: national values



On average a single dental surgeon had extracted 49.1 teeth per month during the year 2021. The monthly average number of GIC restorations done was 25.4, while the number of Temporary fillings done was 20.6. On average a single dental surgeon had done 2.7 Scalings, 4.8 Composite restorations, 1.2 Amalgam restorations and 0.8 completed RCTs in one month period during the year 2021.

Tables 3.1 (a) and 3.1 (b) further explain the district wise statistics of selected dental treatments carried out by a single OPD dental surgeon in OPD dental clinics under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Table 3.1 (a): Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of health during the year 2020: district variation

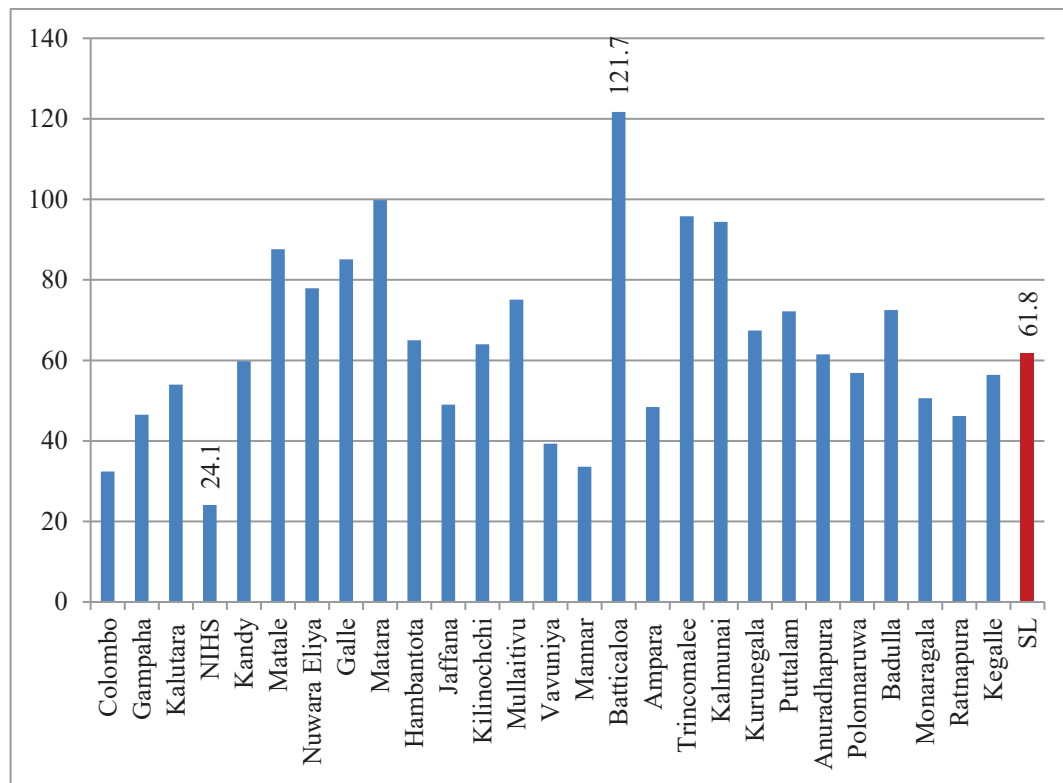
District	Extractions	Amalgam restorations	GIC restorations	Composite fillings	Completed RCTs	Scalings	Fluoride applications	Fissure Sealants	Temporary fillings
Colombo	32.4	0.6	30.8	4.6	1.0	5.5	0.4	0.1	20.9
Gampaha	46.5	3.1	20.2	2.6	0.9	3.6	0.1	0.1	24.1
Kalutara	54.0	0.9	24.8	3.8	0.5	3.0	0.1	0.0	30.3
NIHS area	24.1	1.5	54.8	4.3	1.0	3.3	1.4	0.8	20.0
Kandy	59.8	0.9	45.7	5.5	1.2	5.7	0.8	0.1	33.4
Matale	87.6	3.0	40.8	5.9	2.4	12	2.6	4.7	46.4
Nuwara Eliya	77.9	2.4	52.0	5.7	1.3	8.5	0.5	2.2	35.5
Galle	85.1	0.5	37.4	7.6	2.1	7.2	0.0	0.2	43.8
Matara	99.8	2.3	76.3	10.0	5.2	11.8	0.8	4.7	61.0
Hambantota	65.0	0.1	33.2	2.3	0.8	4.1	0.1	0.1	24.7
Jaffna	49.0	0.4	15.0	5.8	1.0	5.8	0.5	0.1	12.9
Kilinochchi	64.0	0.0	22.1	15.0	2.1	8.8	0.0	0.0	13.3
Mullaitivu	75.1	0.4	14.3	7.2	1.3	1.3	0.6	0.0	12.7
Vavuniya	39.3	0.6	20.2	0.8	0.2	0.2	0.0	0.0	12.0
Mannar	33.6	0.0	5.4	1.6	0.2	0.2	0.0	0.3	4.3
Batticaloa	121.7	0.2	31.0	17.3	1.5	12.7	0.7	1.6	20.9
Ampara	48.4	0.4	45.6	11.1	2.0	12.5	0.7	0.0	33.2
Trincomalee	95.8	0.8	17.4	6.9	0.8	6.9	0.2	0.3	18.1
Kalmunai	94.4	0.4	23.5	15.5	1.2	7.4	0.2	0.1	16.5
Kurunegala	67.4	3.7	28.8	4.9	1.1	5.6	1.3	0.4	31.7
Puttalam	72.2	0.1	26.3	9.0	1.7	6.6	0.4	0.5	18.2
Anuradhapura	61.5	0.1	17.8	1.8	2.3	3.3	0.5	0.0	27.9
Polonnaruwa	56.9	0.4	51.6	3.0	1.6	11.2	0.6	0.1	27.2
Badulla	72.5	4.5	43.1	11.6	1.7	12.4	0.7	0.8	32.8
Monaragala	50.6	0.0	47.9	13.0	1.5	13.0	0.2	0.0	47.4
Rathnapura	46.2	0.4	37.0	7.3	1.8	5.8	1.2	1.5	33.3
Kegalle	56.4	0.9	48.0	6.7	1.7	4.7	0.5	0.1	27.9
Sri Lanka	61.8	1.3	34.1	6.8	1.4	6.9	0.6	0.6	28.6

Table 3.1 (b): Monthly average number of selected dental treatments carried out by a single OPD dental surgeon under the Ministry of health during the year 2021: district variation

District	Extractions	Amalgam restorations	GIC restorations	Composite fillings	Completed RCTs	Scalings	Fluoride applications	Fissure Sealants	Temporary fillings
Colombo	28.6	0.4	21.1	2.3	0.8	1.1	0.6	0.0	15.1
Gampaha	37.6	0.7	16.2	1.6	0.4	1.0	0.0	0.0	17.2
Kalutara	38.5	1.4	19.6	1.7	0.3	1.0	0.0	0.0	19.6
NIHS area	23.4	0.7	38.7	4.8	0.0	0.9	0.2	0.7	17.3
Kandy	54.0	0.8	36.4	7.5	0.9	1.8	0.5	0.5	32.7
Matale	78.1	0.2	34.8	5.7	1.3	6.3	2.0	2.6	37.2
Nuwara Eliya	56.8	0.9	32.8	3.3	0.6	2.3	0.6	1.1	25.3
Galle	68.0	0.9	32.0	3.7	1.0	1.2	0.0	0.0	25.1
Matara	86.3	3.8	49.2	6.9	2.2	4.3	0.7	1.9	43.6
Hambantota	40.1	0.0	14.2	0.4	0.1	0.2	0.0	0.0	10.3
Jaffna	32.6	0.4	10.4	2.7	0.3	1.9	0.0	0.0	8.4
Kilinochchi	22.6	0.0	4.3	3.2	0.1	1.1	0.0	0.0	2.5
Mullaitivu	79.7	0.5	13.2	8.3	0.8	10.4	0.1	0.1	16.5
Vavuniya	34.0	1.1	15.0	0.7	0.1	0.6	0.0	0.1	12.0
Mannar	30.5	0.0	6.3	2.2	0.4	1.4	0.0	0.0	5.8
Batticaloa	75.0	0.4	23.5	11.2	1.0	8.5	0.1	1.6	14.6
Ampara	39.2	0.1	43.0	10.2	1.9	6.7	0.6	0.2	28.5
Trincomalee	84.2	0.1	13.9	5.6	0.4	3.8	0.2	0.5	13.9
Kalmunai	43.9	0.4	12.7	8.2	0.5	3.1	0.0	0.0	10.8
Kurunegala	55.7	1.9	24.4	3.3	0.7	1.8	1.1	0.2	25.6
Puttalam	60.4	0.6	19.3	6.6	1.4	3.4	0.2	0.0	13.7
Anuradhapura	48.6	9.5	3.9	0.4	0.6	0.1	0.0	0.2	7.2
Polonnaruwa	90.2	0.1	69.6	6.7	1.6	12.0	2.2	0.2	33
Badulla	52.7	2.5	28.6	12.3	1.2	4.5	0.3	0.2	25.1
Monaragala	44.9	0.0	47.2	7.8	1.2	6.1	0.1	0.1	33.0
Rathnapura	34.9	1.0	27.5	3.8	0.8	1.6	0.5	1.5	20.4
Kegalle	53.9	1.1	32.3	5.2	1.0	1.3	0.1	0.1	24.3
Sri Lanka	49.1	1.2	25.4	4.8	0.8	2.7	0.4	0.4	20.6

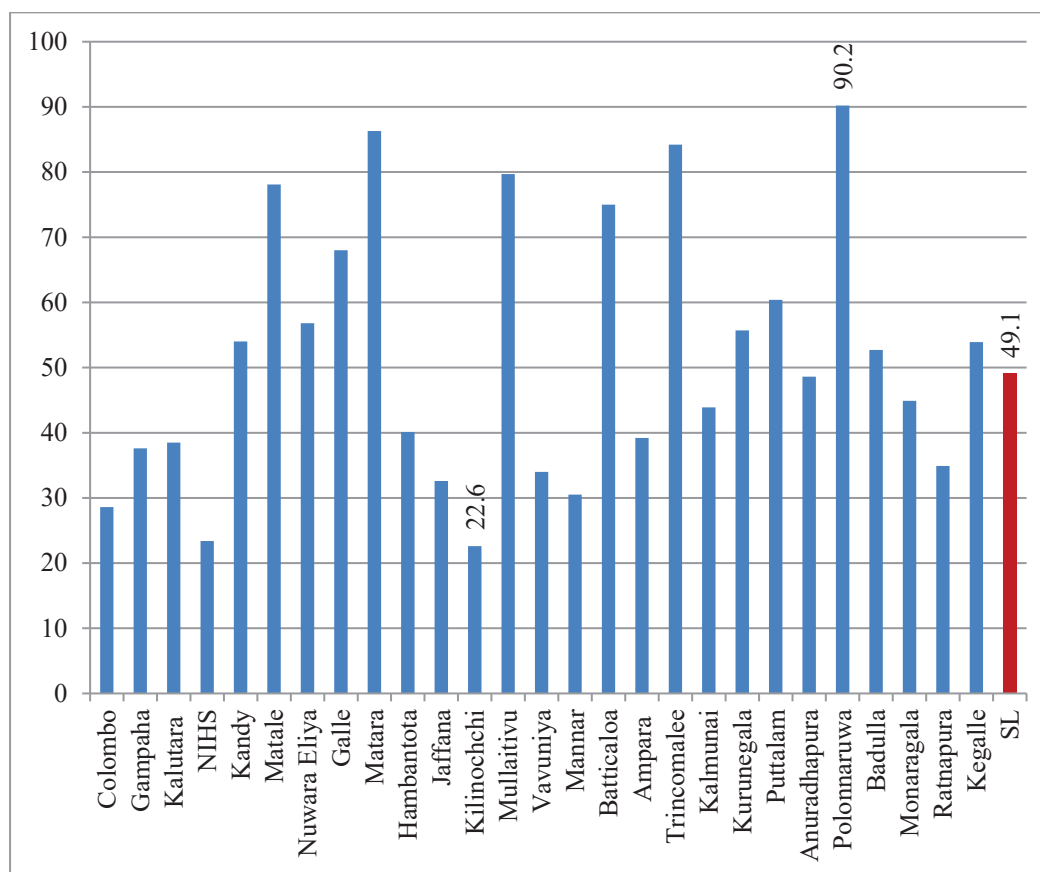
Figures 3.5 (a) and 3.5 (b) explain the monthly average numbers of Extractions carried out by a single OPD dental surgeon working in OPD dental clinics under the Ministry of Health, Sri Lanka for the years 2020 and 2021.

Fig. 3.5 (a): Monthly average number of Extractions carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation



On average 61.8 Extractions were done by a single OPD dental surgeon per month during the year 2020. It varied from 24.1 Extractions in the NIHS area Kalutara to 121.7 Extractions in the Batticaloa district.

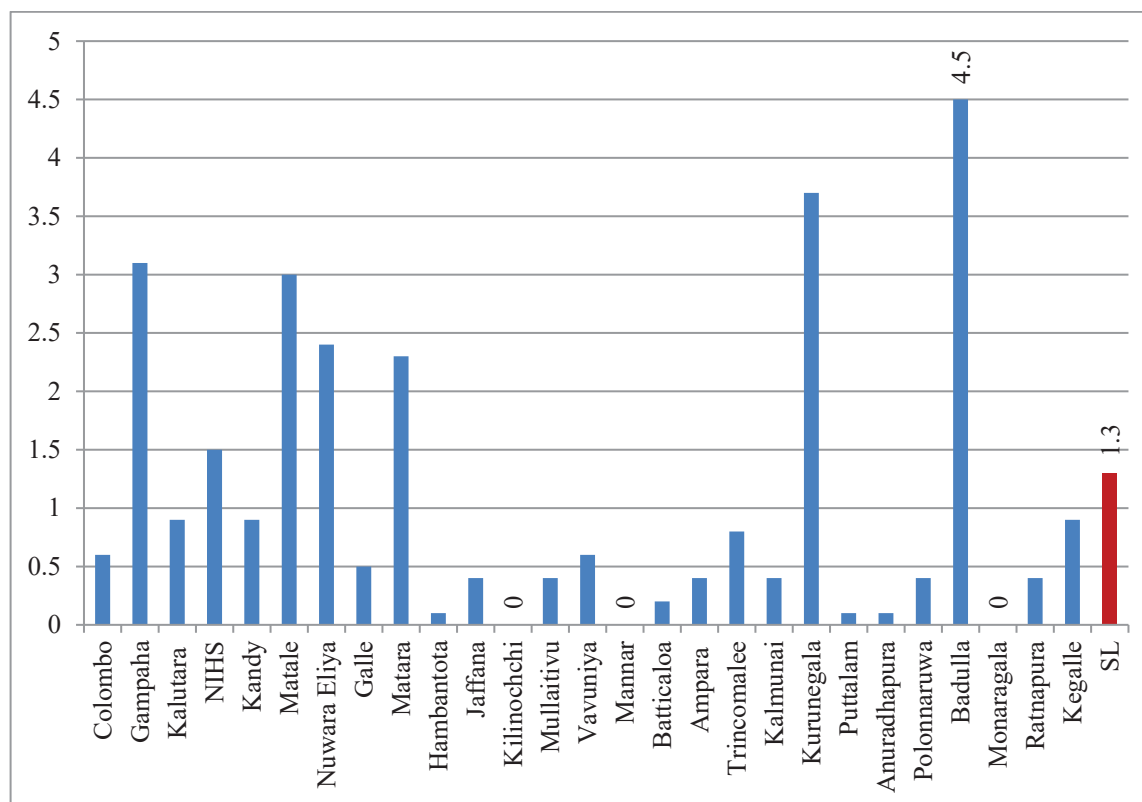
Fig. 3.5 (b): Monthly average number of Extractions carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation



On average 49.1 Extractions were done by a single OPD dental surgeon per month during the year 2021. It varied from 22.6 Extractions in the Kilinochchi district to 90.2 Extractions in the Polonnaruwa district.

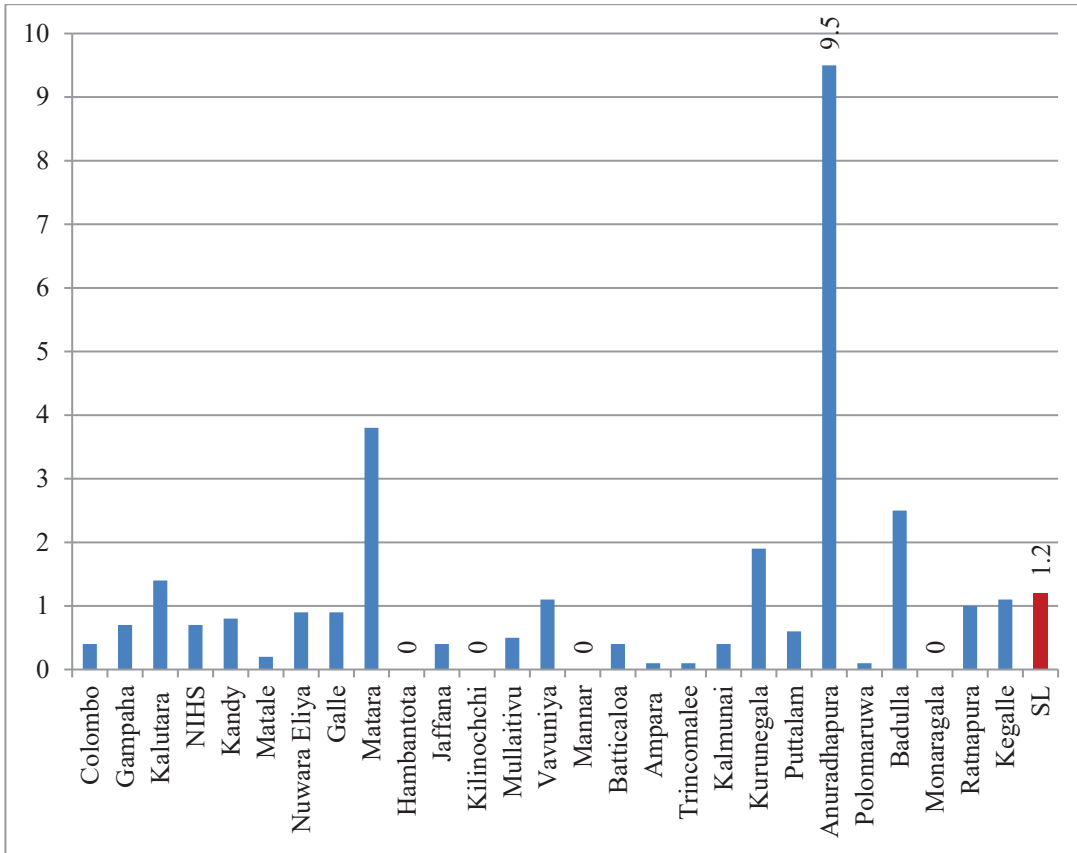
Figures 3.6 (a) and 3.6 (b) explain the monthly average numbers of Amalgam restorations carried out by a single OPD dental surgeon in OPD dental clinics under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Fig. 3.6 (a): Monthly average number of Amalgam restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation



The average number of Amalgam restorations done by a single OPD dental surgeon per month during 2020 was 1.3. The highest number of Amalgam restorations was done in Badulla district (4.5) while in most of the districts, Amalgam restorations were rarely done. In Kilinochchi, Mannar and Monaragala districts Amalgam restorations were not done.

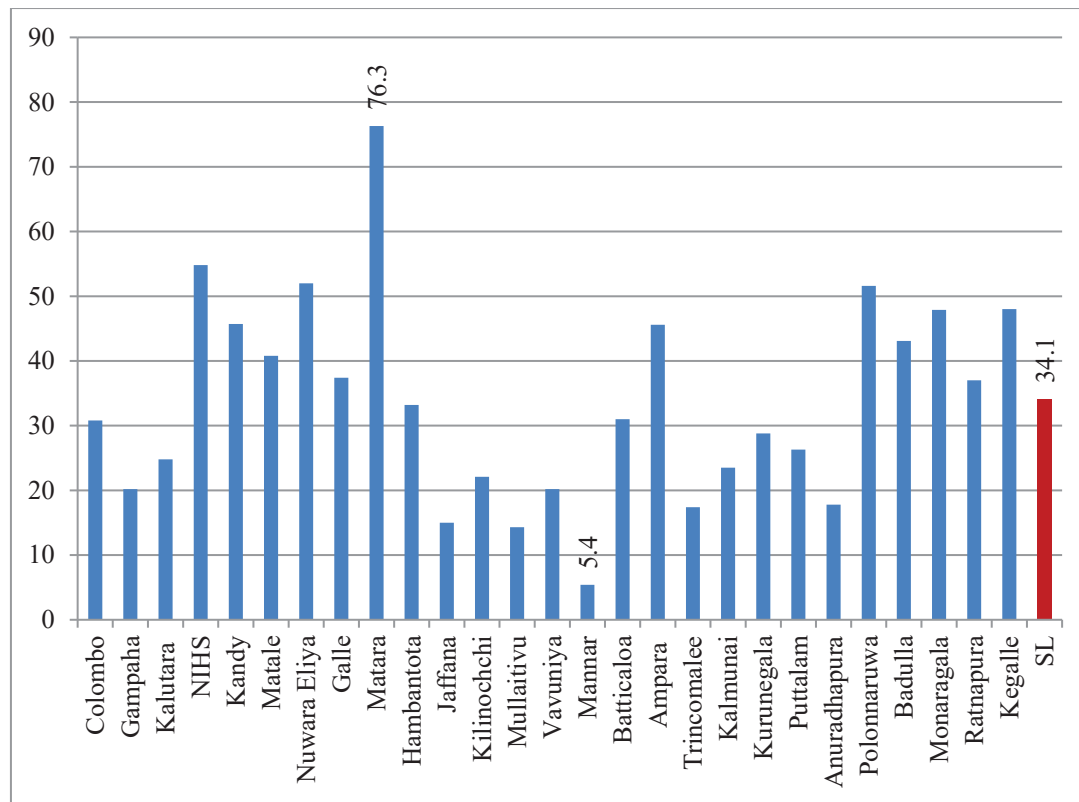
Fig. 3.6 (b): Monthly average number of Amalgam restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation



The average number of Amalgam restorations done by a single OPD dental surgeon per month during 2021 was 1.2. The highest number of Amalgam restorations which is 9.5 was done in the Anuradhapura district. In most of the districts, Amalgam restorations were rarely done, while in Hambantota, Kilinochchi, Mannar and Monaragala districts Amalgam restorations were not done.

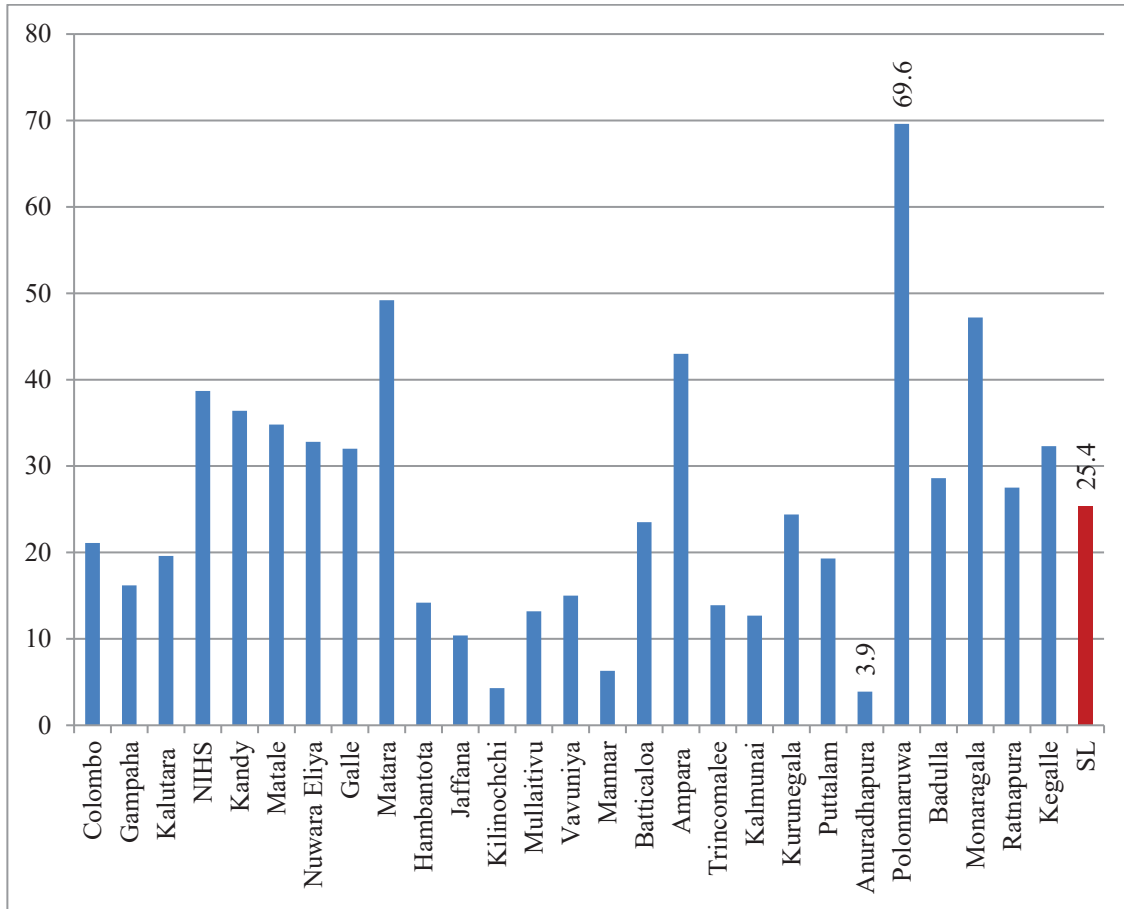
Figures 3.7 (a) and 3.7 (b) explain the monthly average numbers of GIC restorations done by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Fig. 3.7 (a): Monthly average number of GIC restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation



According to national figures, 34.1 GIC restorations were done by a single dental surgeon per month during 2020. It varied from 5.4 GIC restorations per month per dental surgeon in the Mannar district to 76.3 GIC restorations in the Matara district.

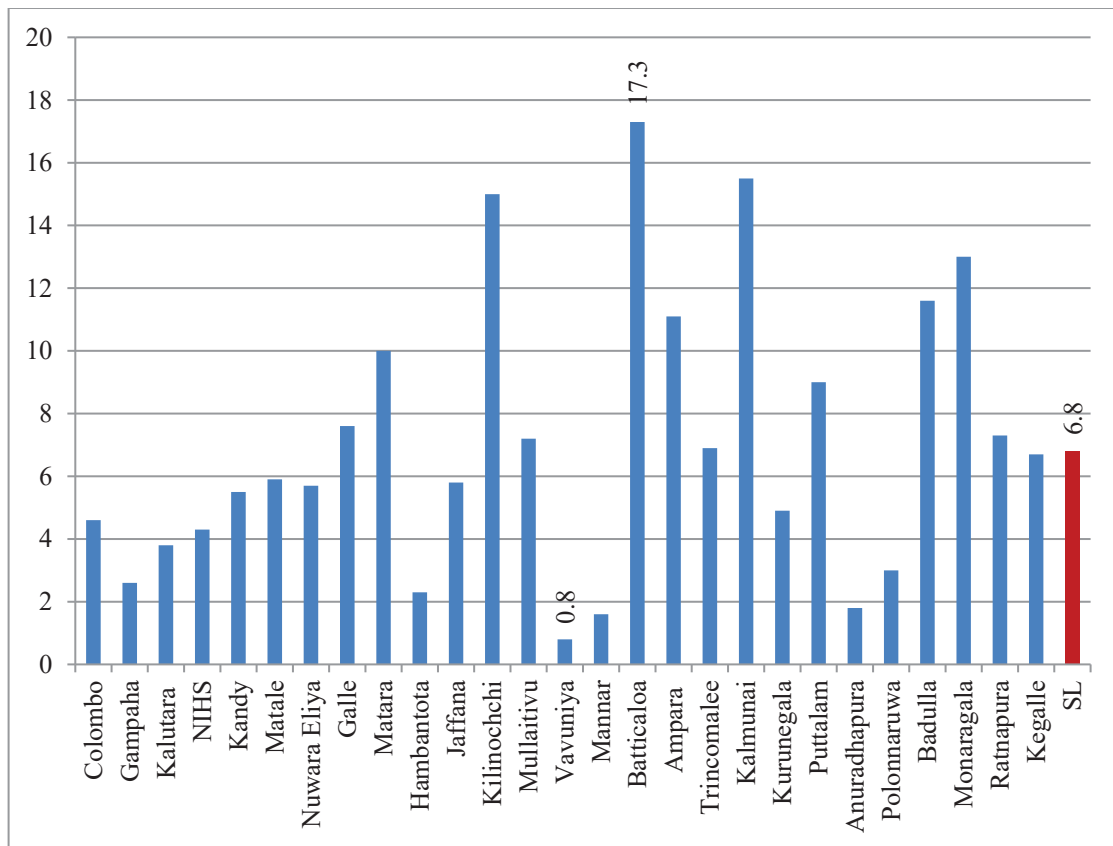
Fig. 3.7 (b): Monthly average number of GIC restorations done by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation



On average 25.4 GIC restorations were done by a dental surgeon per month during 2021. It varied from 3.9 GIC restorations per month per dental surgeon in the Anuradhapura district to 69.6 GIC restorations in the Polonnaruwa district.

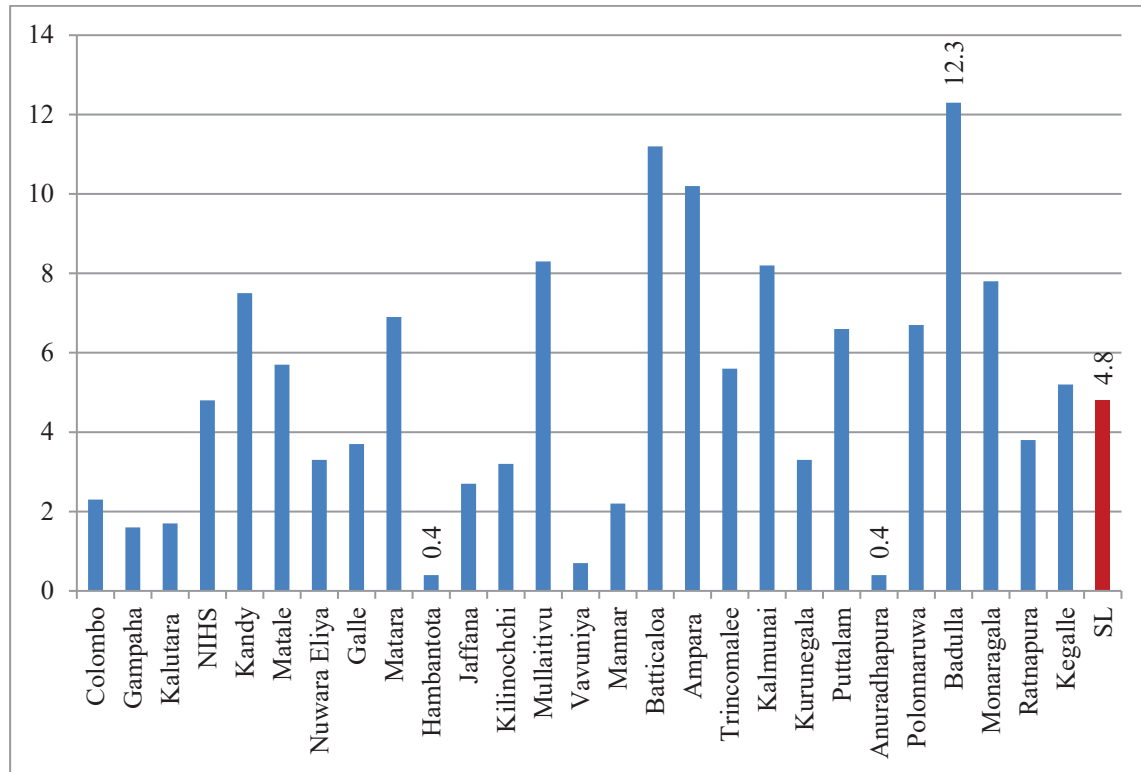
Figures 3.8 (a) and 3.8 (b) explain the monthly average numbers of Composite restorations done by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Fig. 3.8 (a): Monthly average number of Composite restorations done by a single OPD dental surgeon under the Ministry of Health during the year 2020: district variation



On average 6.8 Composite restorations were done by a single dental surgeon per month during 2020. It ranged from 0.8 Composite restorations in the Vavuniya district to 17.3 Composite restorations in the Batticaloa district.

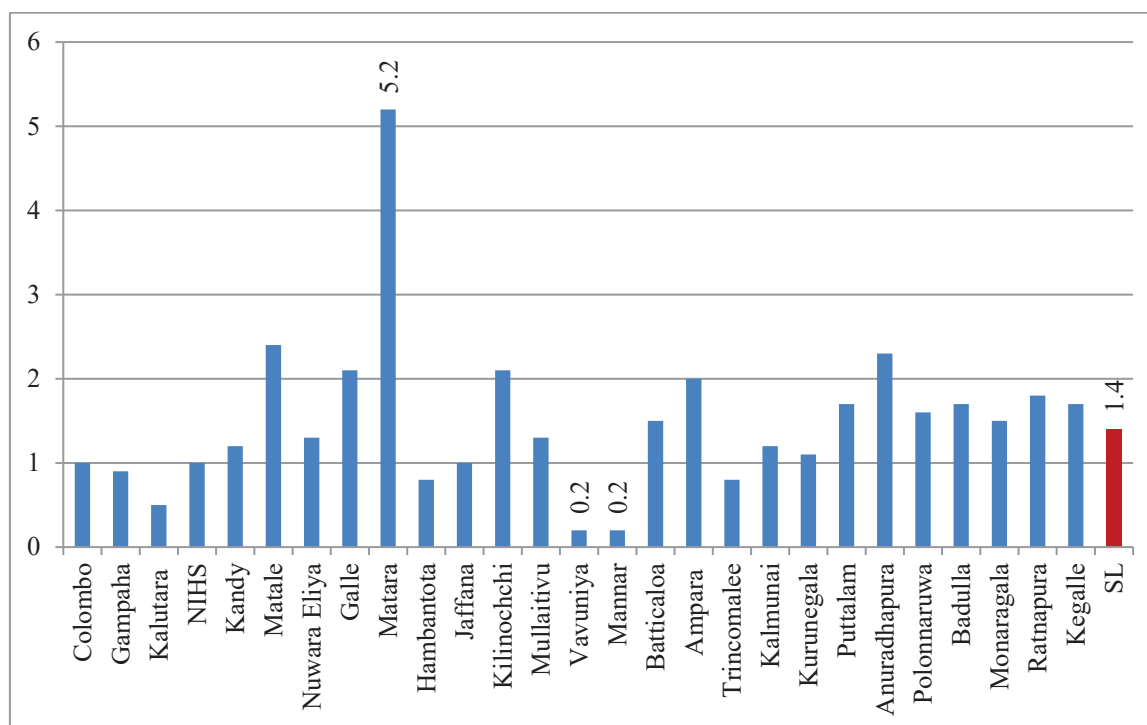
Fig. 3.8 (b): Monthly average number of Composite restorations done by a single OPD dental surgeon under the Ministry of Health during the year 2021: district variation



On average 4.8 Composite restorations were done by a single dental surgeon per month during 2021. It ranged from 0.4 in the Anuradhapura and Hambantota districts to 12.3 in the Badulla district.

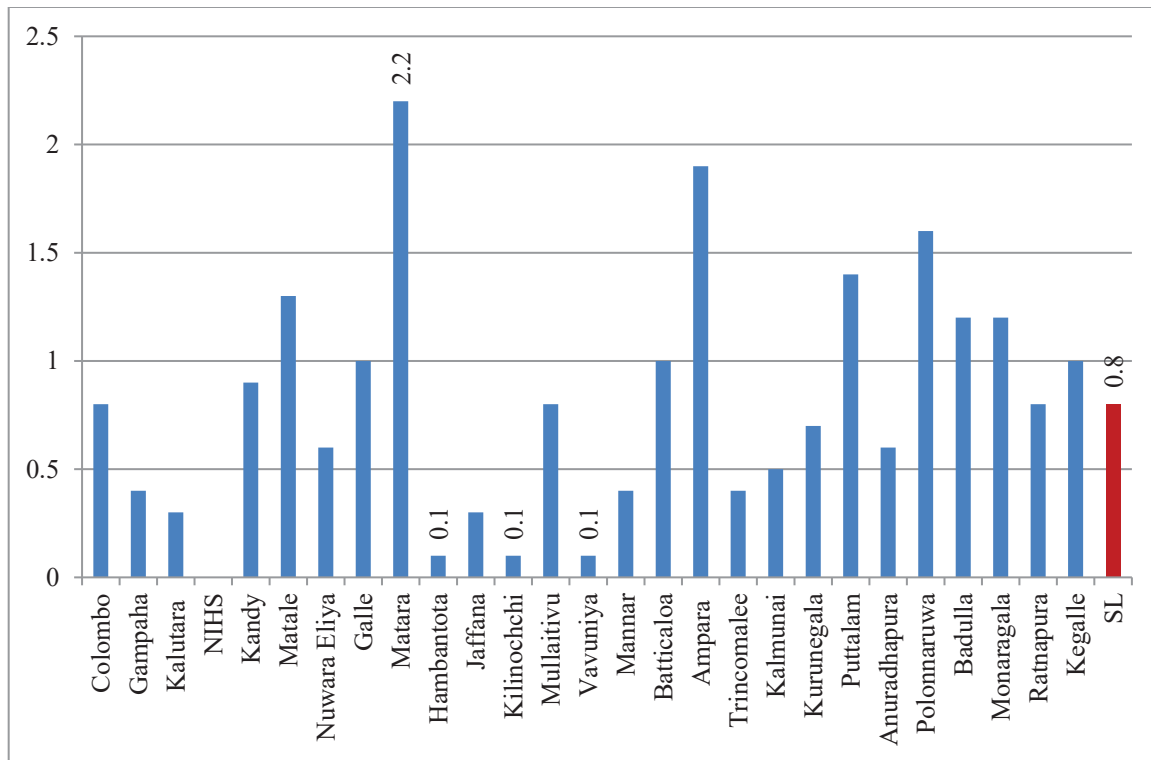
Monthly average numbers of completed RCTs done by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021 are explained in figures 3.9 (a) and 3.9 (b)

Fig. 3.9 (a): Monthly average number of completed RCTs done by a single OPD dental surgeon under the Ministry of Health during the year 2020: district variation



The monthly average number of completed RCTs performed by a dental surgeon in Sri Lanka in 2020 was 1.4, and it varied from 0.2 in the Vavuniya and Mannar districts to 5.2 in the Matara district.

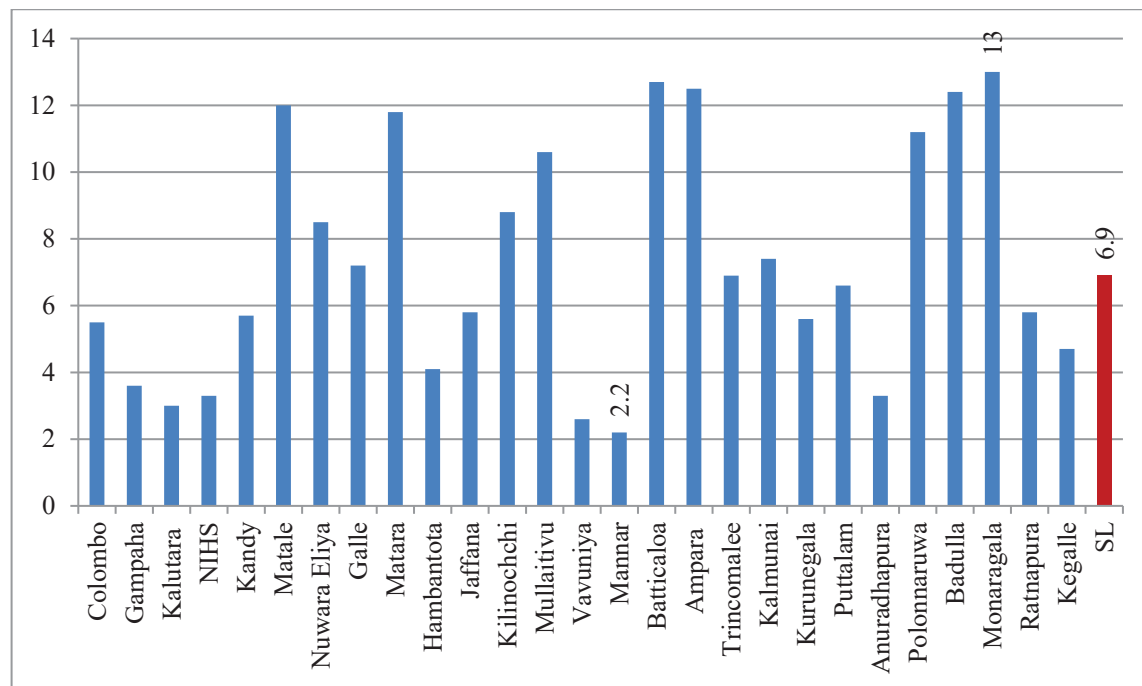
Fig. 3.9 (b): Monthly average number of completed RCTs done by a single OPD dental surgeon under the Ministry of Health during the year 2021: district variation



The monthly average number of completed RCTs performed by a dental surgeon for the year 2021 in Sri Lanka was 0.8 and it varied from 0.1 in Hambantota, Kilinochchi and Vavuniya districts to 2.2 in Matarata district. There were no RCTs done in the NIHS area Kalutara.

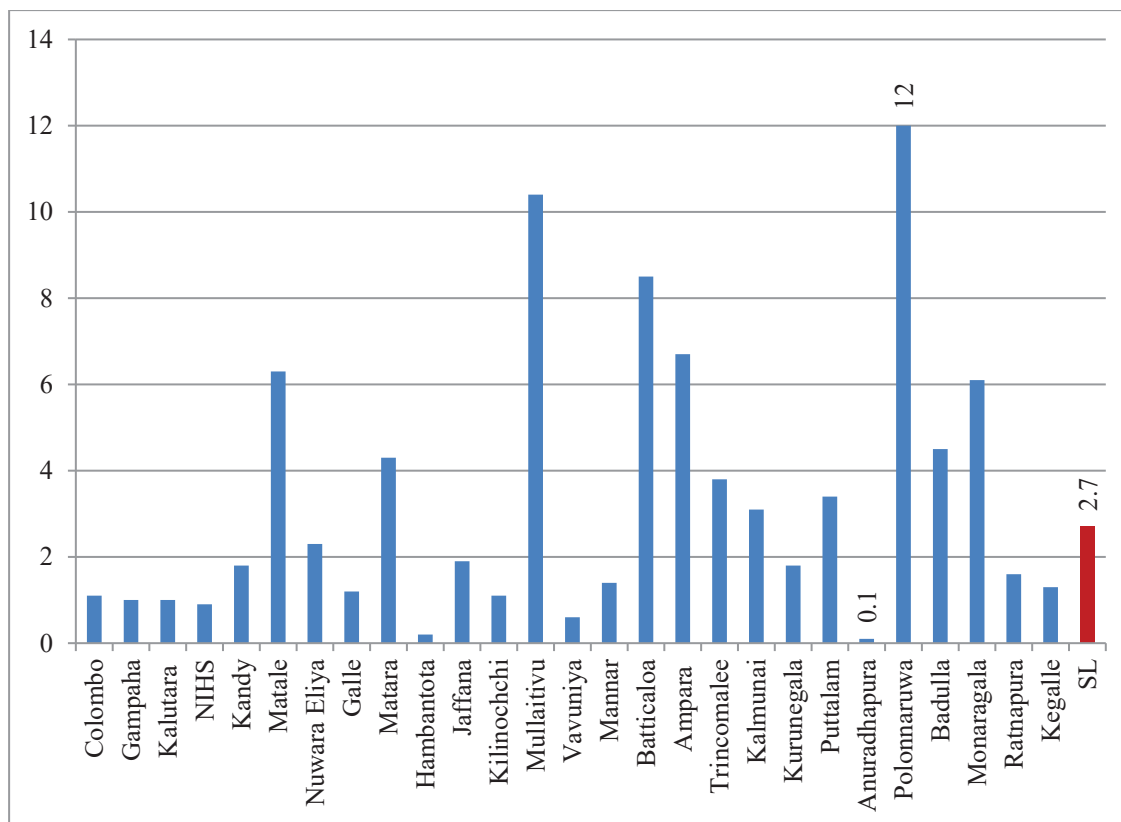
Monthly average numbers of Scalings done by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021 are explained in figures 3.10 (a) and 3.2 (b).

Fig. 3.10 (a): Monthly average number of Scalings done by a single OPD dental surgeon under the Ministry of Health in 2020: district variation



The monthly average number of Scalings done by a single OPD dental surgeon in Sri Lanka during the year 2020 was 6.9. It varied from 2.2 Scalings in the Mannar district to 13 Scalings in the Monaragala district.

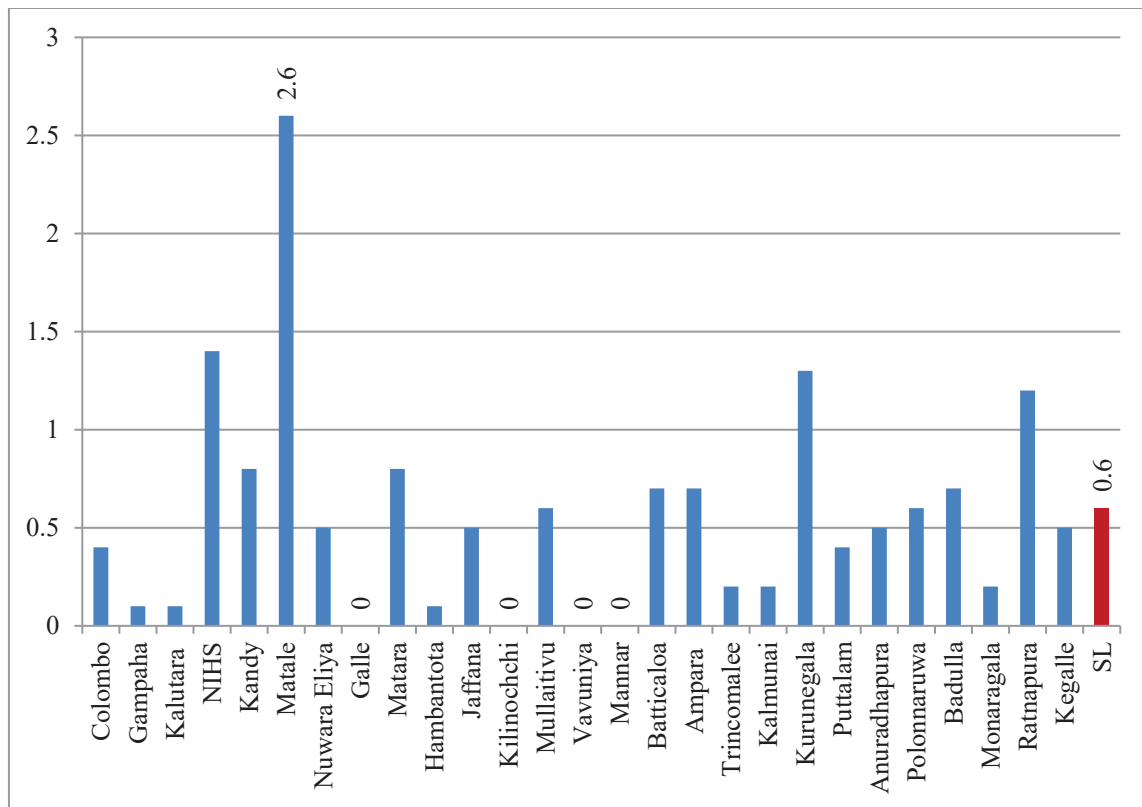
Fig. 3.10 (b): Monthly average number of Scalings done by a single OPD dental surgeon under the Ministry of Health in 2021: district variation



The monthly average number of Scalings done by a single OPD dental surgeon in Sri Lanka during 2021 was 2.7. It varied from 0.1 Scalings in the Anuradhapura district to 12 in the Polonnaruwa district.

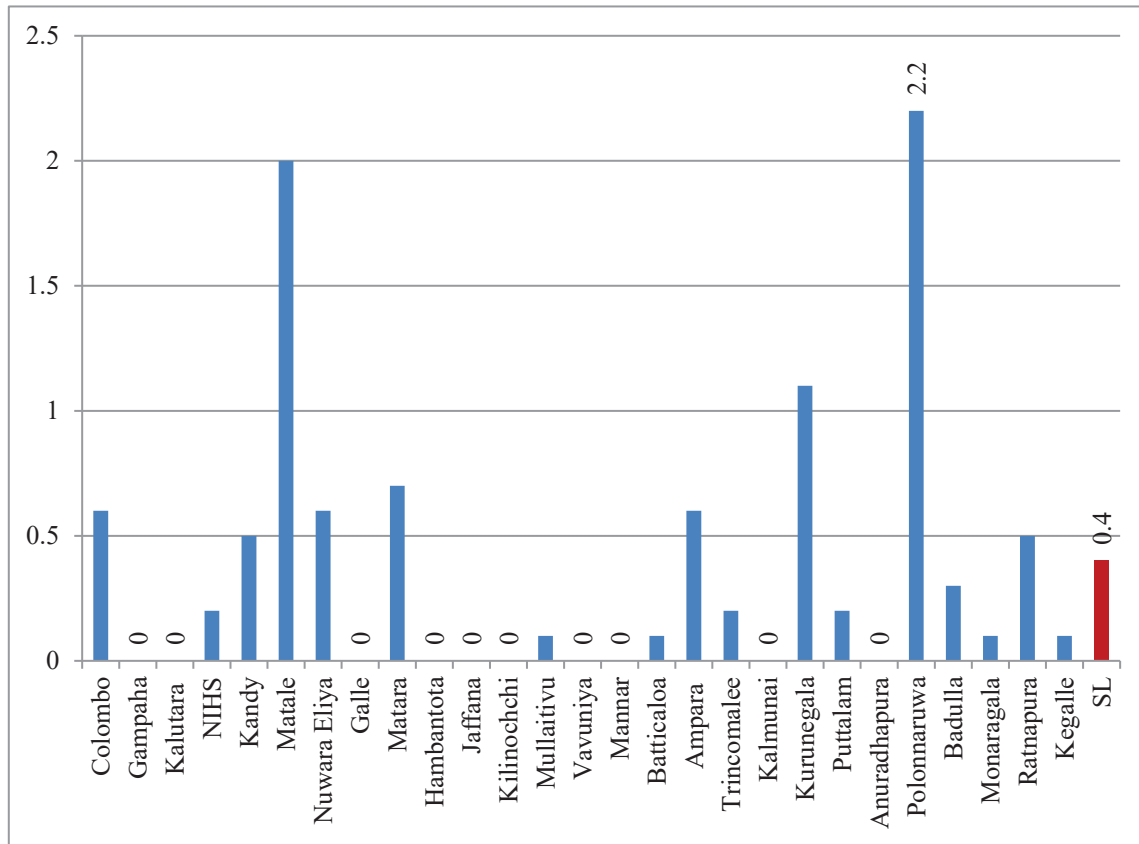
Monthly average numbers of Fluoride applications done by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021 are explained in figures 3.11 (a) and 3.11 (b)

Fig. 3.11 (a): Monthly average number of Fluoride applications done by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation



On average, a single OPD dental surgeon had done 0.6 Fluoride applications per month during 2020. The highest number of Fluoride applications (2.6) was done in the Matale district. Fluoride applications were not done in Kilinochchi, Mannar, Vavuniya and Galle districts during the year 2020.

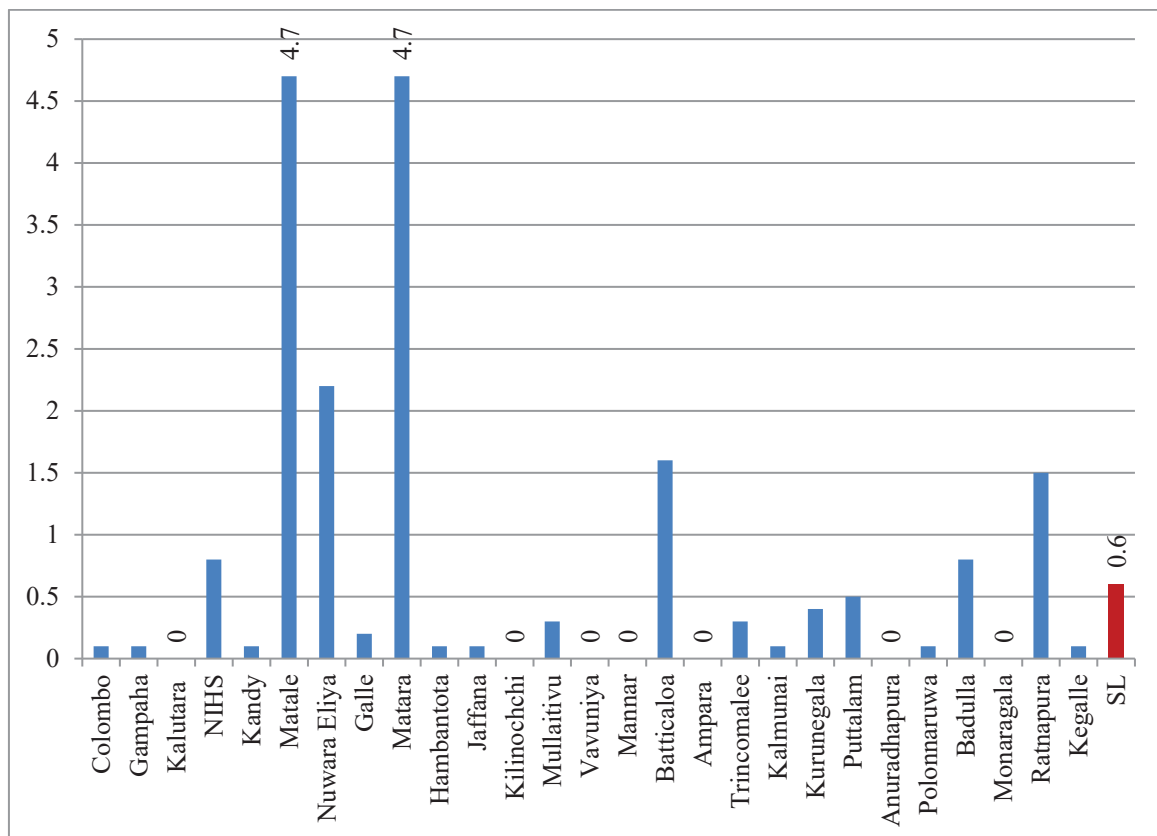
Fig. 3.11 (b): Monthly average number of Fluoride applications done by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation.



On average, a single OPD dental surgeon had done 0.4 Fluoride applications per month during the year 2021. The highest number of Fluoride applications (2.2) was done in the Polonnaruwa district. Fluoride applications were not done in Gampaha, Kalutara, Galle, Hambantota, Jaffna, Kilinochchi, Vavuniya, Mannar, Kalmunai and Anuradhapura districts during the year 2021.

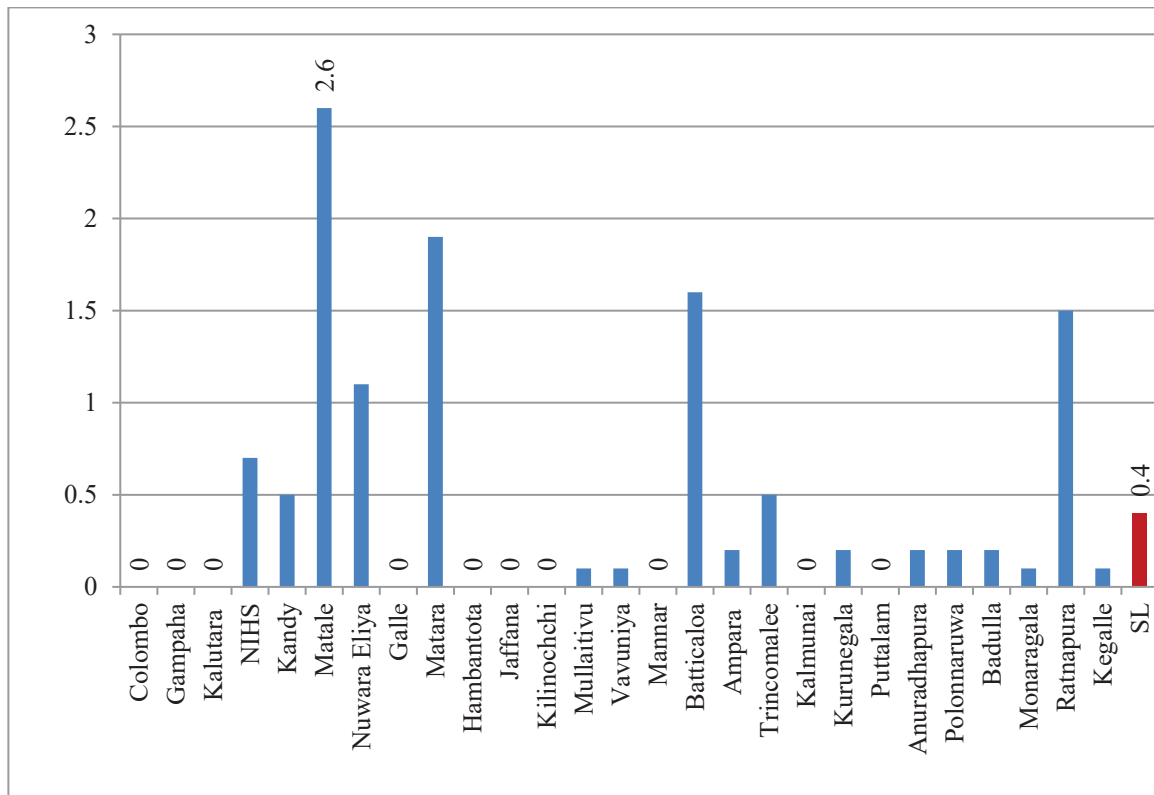
Monthly average numbers of Fissure Sealant applications carried out by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021, are explained in figure 3.12 (a) and 3.12 (b).

Fig. 3.12 (a): Monthly average number of Fissure Sealant applications carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation



On average, a single OPD dental surgeon had done 0.6 Fissure Sealant applications per month in the year 2020. The highest number of Fissure Sealant applications was done in Matale and Matara districts which were 4.7 per dental surgeon per month. Kalutara, Kilinochchi, Mullaitivu, Vavuniya, Anuradhapura, Ampara and Monaragala had not done Fissure Sealant applications during the year 2020.

Fig. 3.12 (b): Monthly average number of Fissure Sealant applications carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation

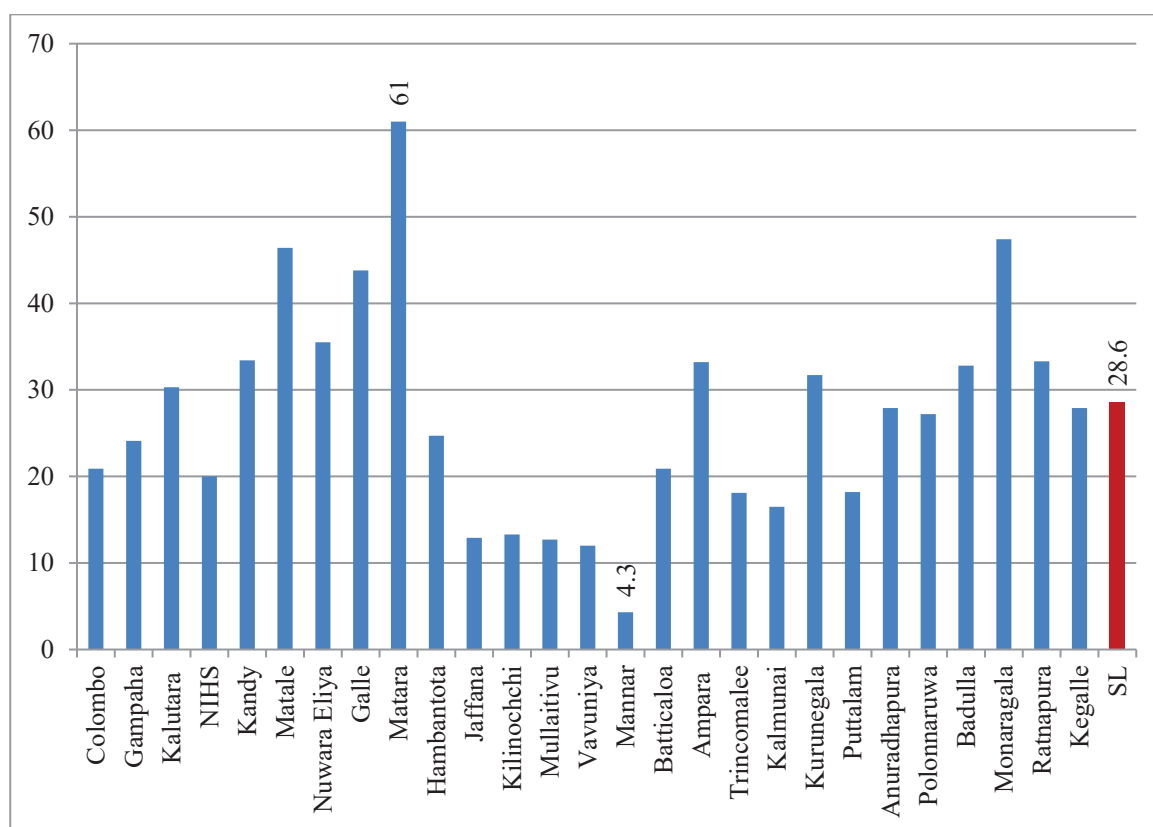


On average, a single OPD dental surgeon had done 0.4 Fissure Sealant applications per month in the year 2021. The highest number of Fissure Sealant applications was done in the Matala district which is 2.6.

Fissure Sealant applications were not done in Colombo, Gampaha, Kalutara, Galle, Hambantota, Jaffna, Kilinochchi, Mannar, Kalmunai, and Puttalam during the year 2021.

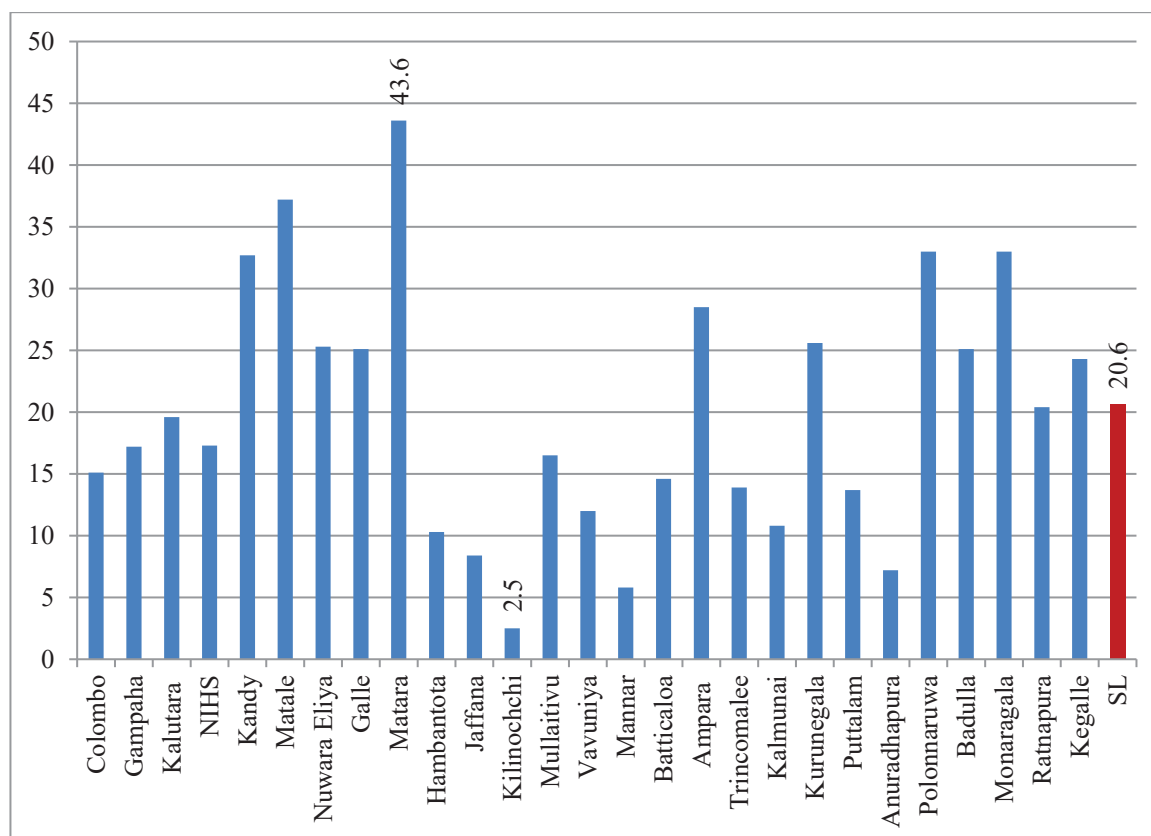
Figures 3.13 (a) and 3.13 (b) explain the monthly average numbers of Temporary fillings done by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Fig. 3.13 (a): Monthly average number of Temporary fillings carried out by a single OPD dental surgeon under the Ministry of Health during the year 2020: district variation



On average, a single OPD dental surgeon had done 28.6 Temporary fillings during a month in the year 2020. The highest number of Temporary fillings was done in Matarara district which was 61. The least number of Temporary fillings per OPD dental surgeon per month was done in the Vavuniya district and it was 4.3.

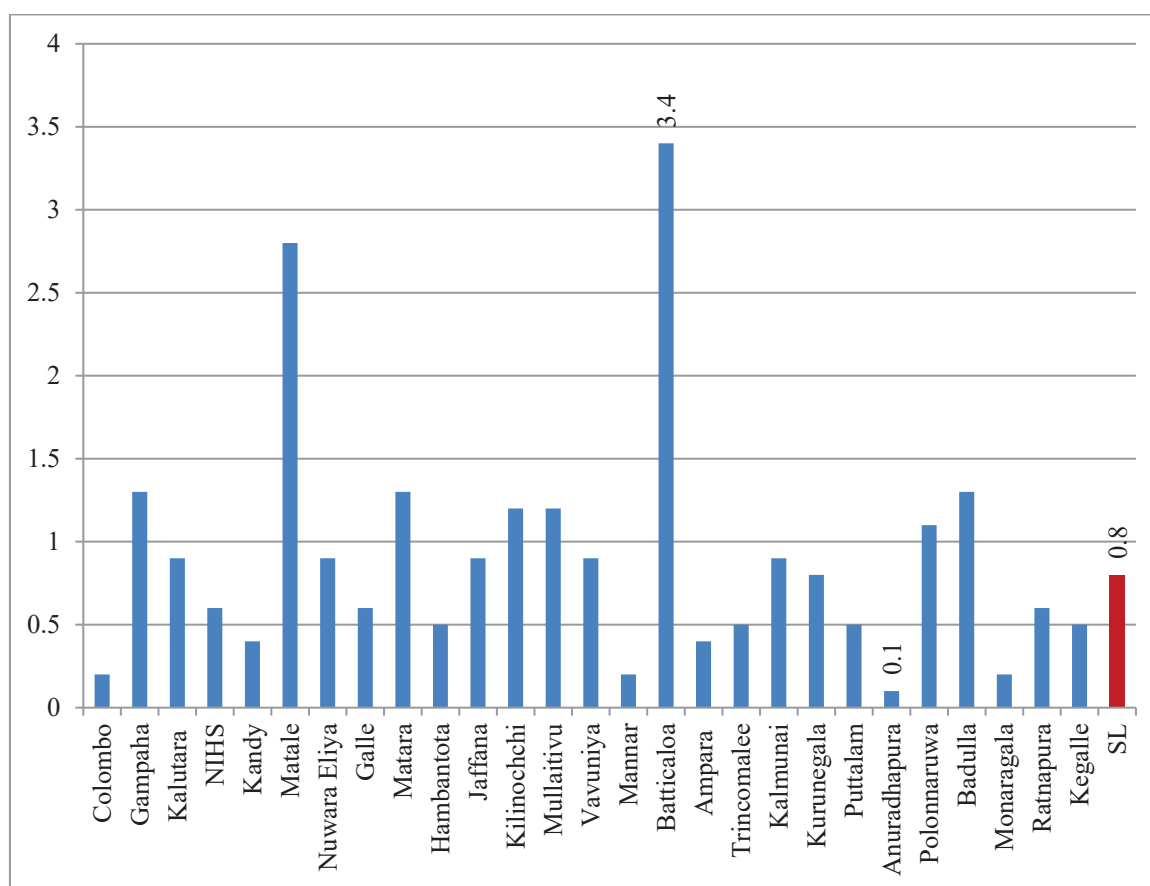
Fig. 3.13 (b): Monthly average number of Temporary fillings carried out by a single OPD dental surgeon under the Ministry of Health during the year 2021: district variation.



On average, a single OPD dental surgeon had done 20.6 Temporary fillings per month in 2021. The highest number of Temporary fillings was done in the Matarara district, which was 43.6. The least number of Temporary fillings per OPD dental surgeon per month was done in the Kilinochchi district and the value was 2.5.

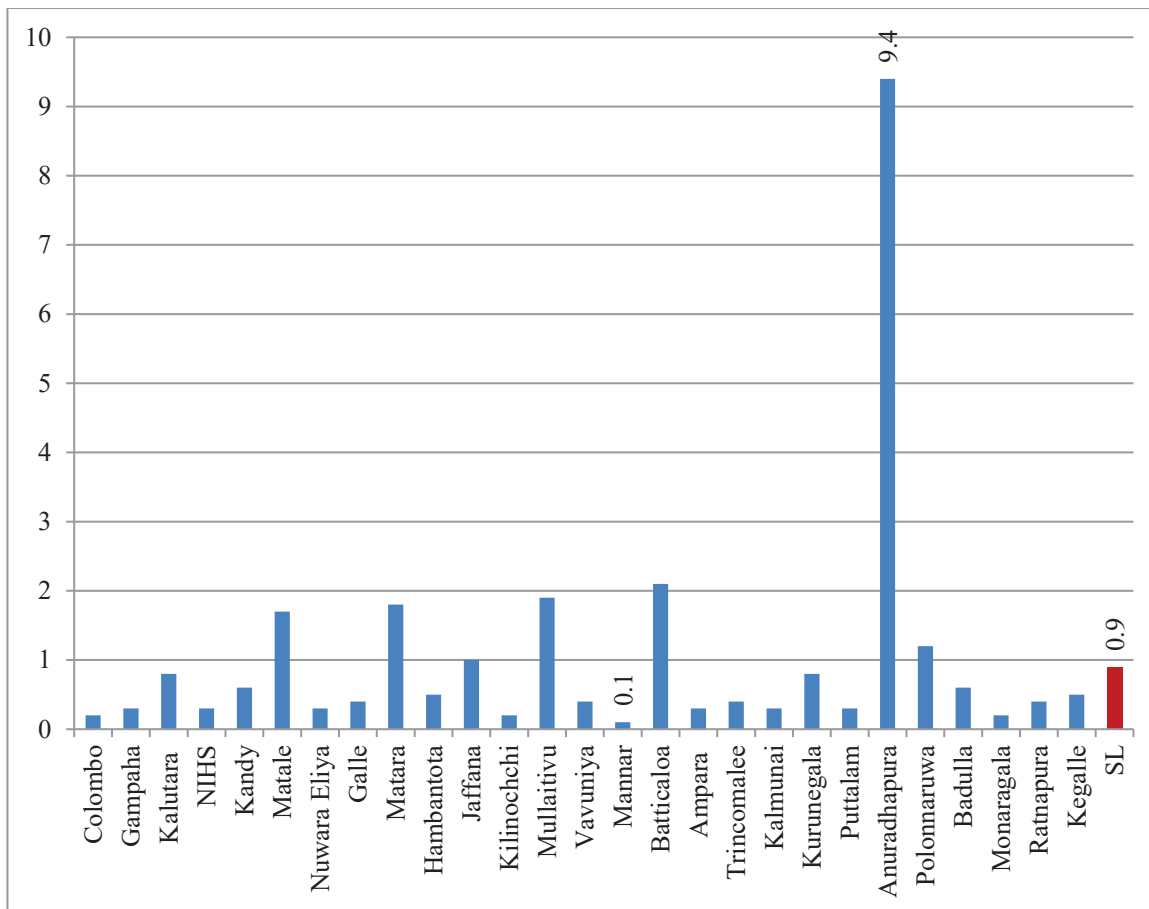
Figures 3.14 (a) and 3.14 (b) explain the monthly average numbers of post-operative infections and bleeding episodes reported by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Fig. 3.14 (a): Monthly average number of post-operative infections and bleeding episodes reported by a single OPD dental surgeon under the Ministry of Health in the year 2020: district variation



The monthly average number of post-operative infections and bleeding episodes reported by a single OPD dental surgeon was 0.8 in 2020. The highest figure of 3.4 was reported in the Batticaloa district and the lowest figure of 0.1 was reported in the Anuradhapura district.

Fig. 3.14 (b): Monthly average number of post-operative infections and bleeding episodes reported by a single OPD dental surgeon under the Ministry of Health in the year 2021: district variation



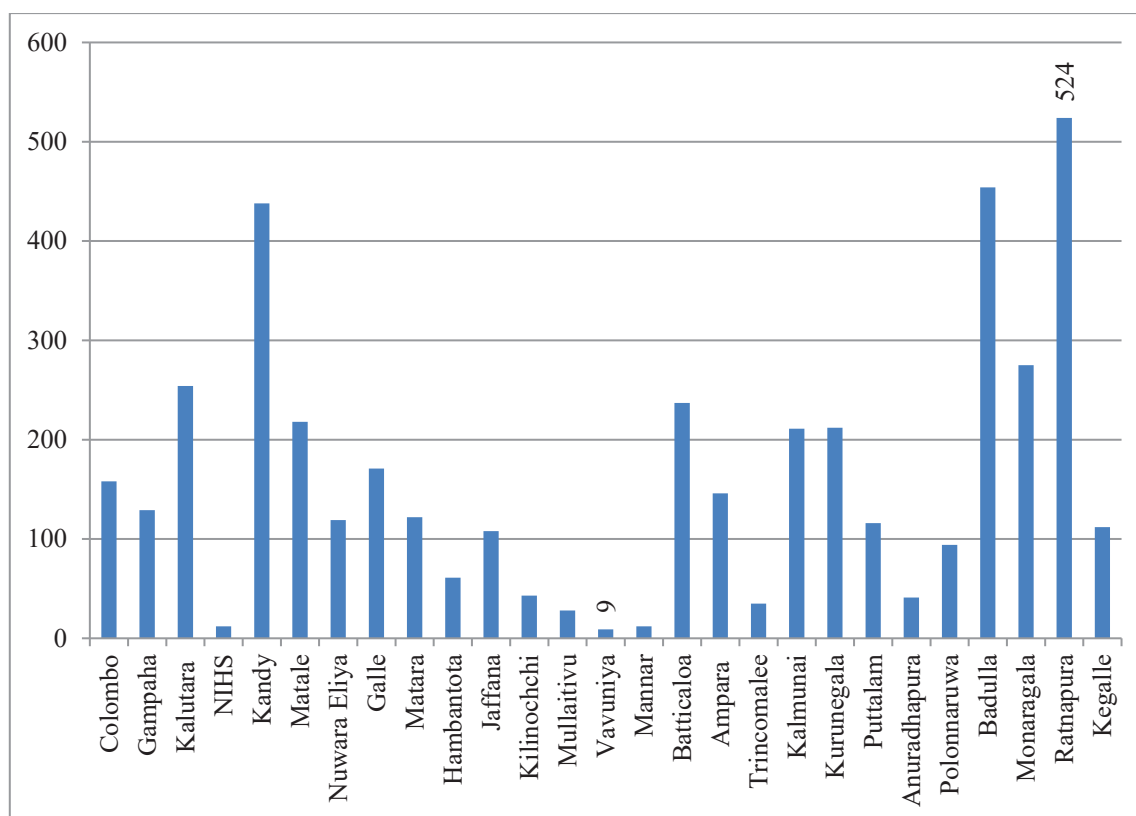
The monthly average number of post-operative infections and bleeding episodes reported by a single OPD dental surgeon was 0.9 in 2021. The highest figure of 9.4 was reported in the Anuradhapura district and the lowest figure of 0.1 was reported in Mannar district.

Table 3.2, figures 3.15 (a), 3.15 (b), 3.16 (a) and 3.16 (b) explain the total numbers and annual average numbers of Oral Potentially Malignant Disorder (OPMD) cases identified in OPD dental clinics under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Table 3.2: Total numbers and annual average numbers of OPMD cases identified in a single OPD dental clinic during the years 2020 and 2021: district variation

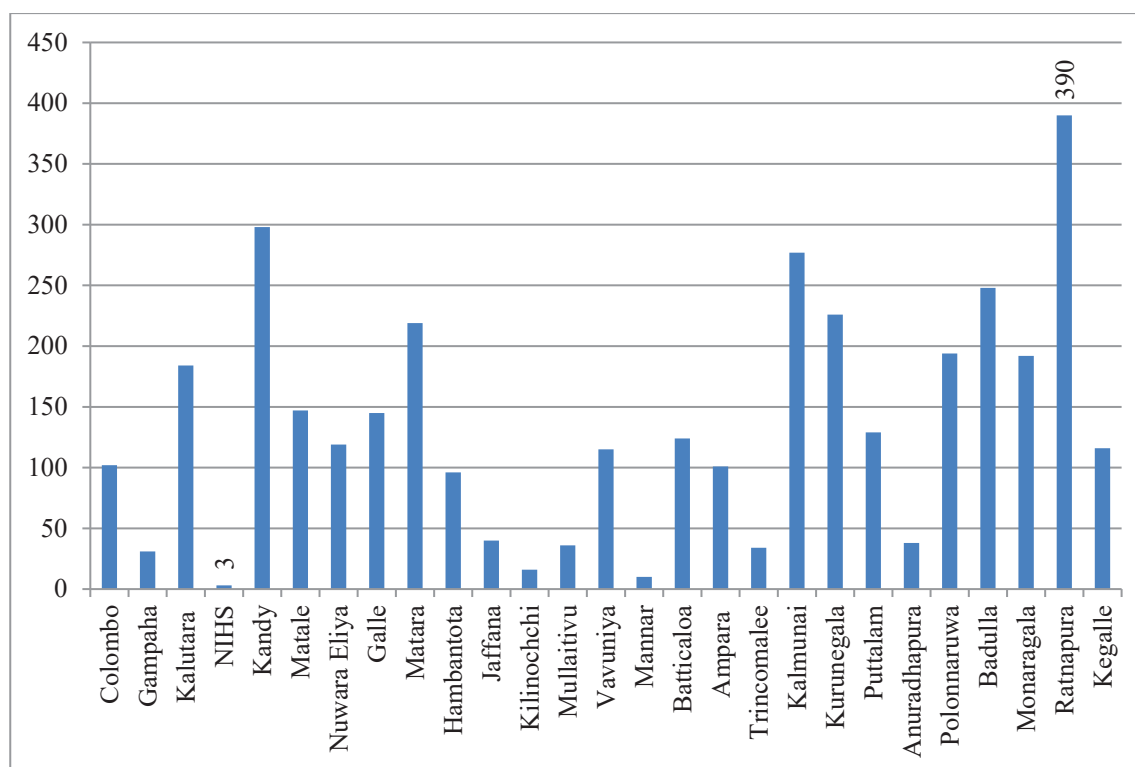
District	Total number of OPMD cases identified in OPD dental clinics in 2020	Total number of OPMD cases identified in OPD dental clinics in 2021	Annual average number of OPMD cases identified in an OPD dental clinic in 2020	Annual average number of OPMD cases identified in an OPD dental clinic in 2021
Colombo	158	102	3.2	2.0
Gampaha	129	31	3.1	0.7
Kalutara	254	184	8.8	6.1
NIHS area	12	03	2.0	0.4
Kandy	438	298	8.9	6.1
Matale	218	147	12.8	8.6
Nuwara Eliya	119	119	4.6	4.6
Galle	171	145	5.7	4.8
Matara	122	219	5.3	8.8
Hambantota	61	96	3.2	4.8
Jaffna	108	40	3.7	1.3
Kilinochchi	43	16	6.1	1.6
Mullaitivu	12	36	2.4	7.2
Vavuniya	9	115	1.8	11.5
Mannar	28	10	3.1	0.6
Batticaloa	237	124	8.2	4.0
Ampara	146	101	13.3	8.4
Trincomalee	35	34	1.8	1.7
Kalmunai	211	277	11.7	11.1
Kurunegala	212	226	4.0	4.3
Puttalam	116	129	4.0	4.0
Anuradhapura	41	38	1.6	1.3
Polonnaruwa	94	194	5.2	10.8
Badulla	454	248	10.6	5.8
Monaragala	275	192	14.5	9.6
Ratnapura	524	390	9.4	6.5
Kegalle	112	116	4.5	4.6
Sri Lanka	4,339	3,630	6.3	4.9

Fig. 3.15 (a): Total number of OPMD cases identified in OPD dental clinics under the Ministry of Health during the year 2020: district variation



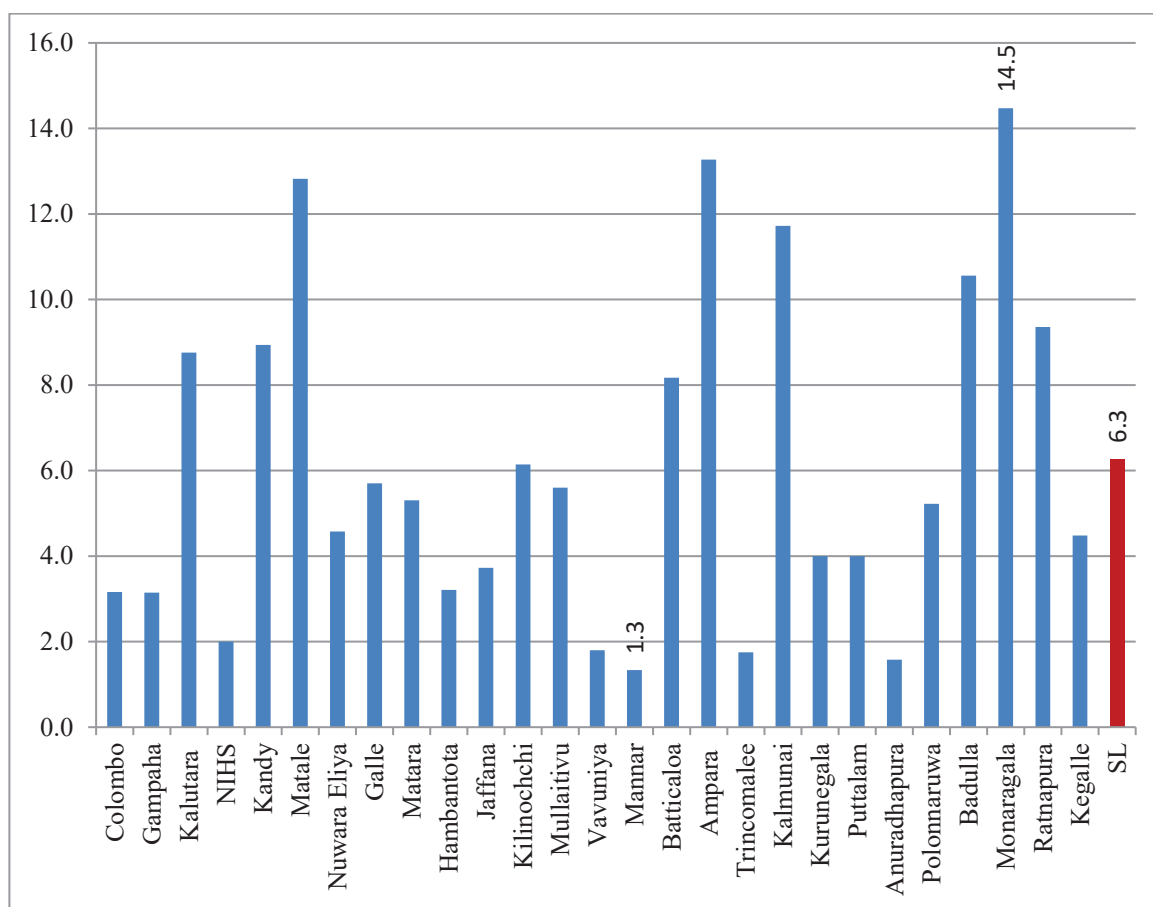
A total number of 4,339 OPMD cases was reported in the year 2020 in OPD dental clinics in the whole island. The highest number of cases was reported in Rathnapura district which was 524 and the lowest number of cases was identified in Vavuniya district which was 9.

Fig. 3.15 (b): Total number of OPMD cases identified in OPD dental clinics under the Ministry of Health during the year 2021: district variation



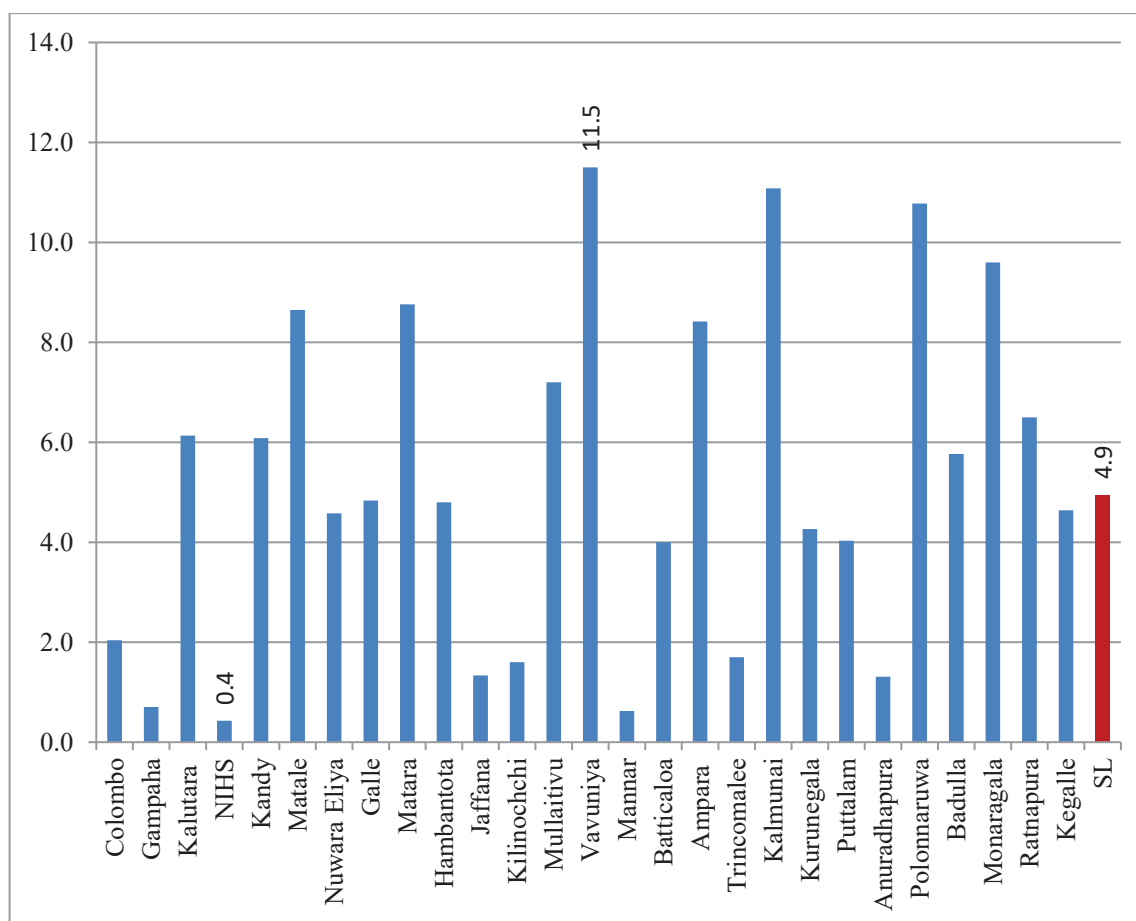
A total number of 3,647 OPMD cases was reported during the year 2021 in OPD dental clinics all over the island. The highest number of cases was identified in Rathnapura district which was 390 and the lowest number of cases was identified in NIHS area Kalutara which was 3.

Fig. 3.16 (a): Annual average number of OPMD cases identified in a single OPD dental clinic during the year 2020: district variation



The annual average number of OPMD cases identified in a single OPD dental clinic during 2020 was 6.3. The highest annual average number of cases per clinic was identified in Monaragala district which was 14.5 and the lowest average number of cases per clinic was reported in Mannar district which was 1.3.

Fig. 3.16 (b): Annual average number of OPMD cases identified in a single OPD dental clinic during the year 2021: district variation

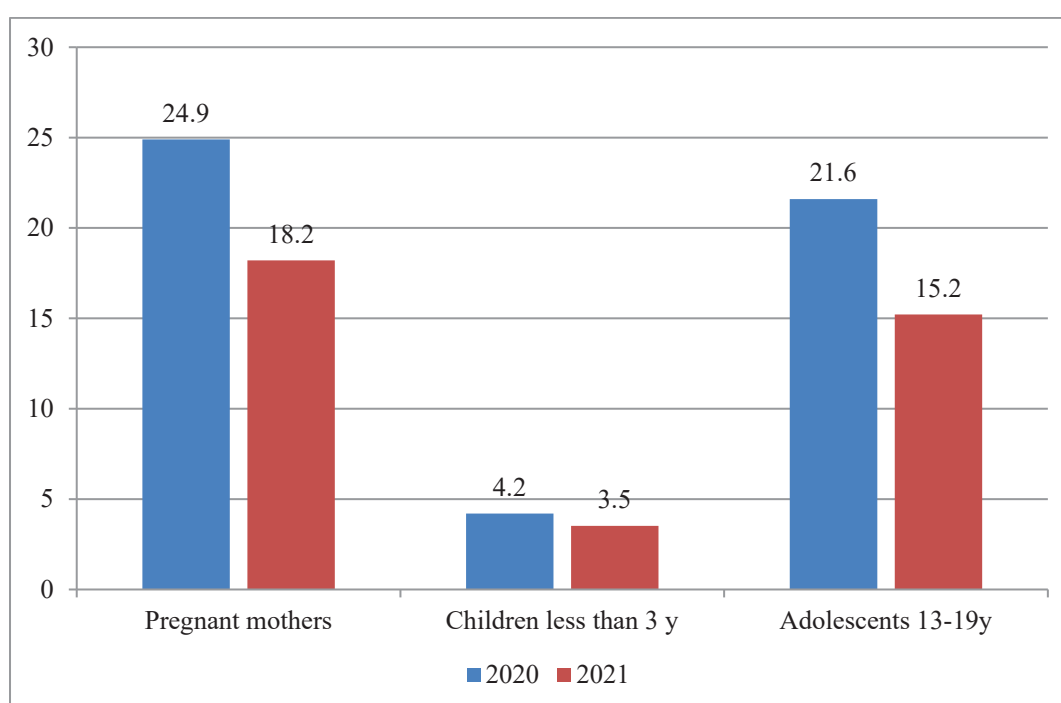


The annual average number of OPMD cases identified in a single OPD dental clinic during 2021 was 4.9. The highest annual average number of cases per clinic (11.5) was reported in the Vavuniya district while the lowest average number of cases per clinic (0.4) was reported in the NIHS area Kalutara.

3.3 Statistics related to the selected special groups of patients managed by OPD dental surgeons under the Ministry of Health, Sri Lanka in 2020 and 2021

Monthly average numbers of selected special groups of patients managed by OPD dental surgeons under the Ministry of Health, Sri Lanka in the years 2020 and 2021 are explained in figure 3.17.

Fig. 3.17: Monthly average numbers of pregnant mothers, children less than 3 years and adolescents (13-19 years) managed in a single OPD dental clinic under the Ministry of health Sri Lanka in the years 2020 and 2021

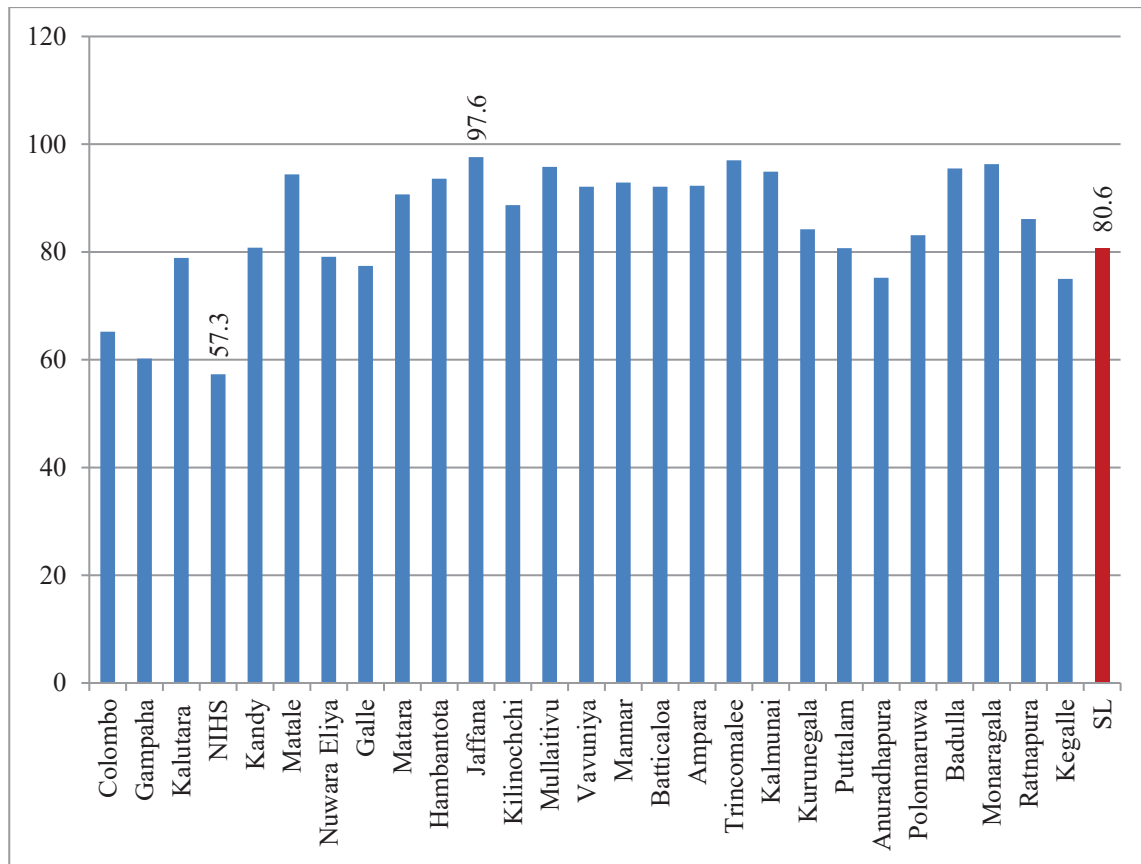


The average number of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health per month during 2020 was 24.9. On average 4.2 children less than 3 years and 21.6 adolescents (13-19 years) were managed in a single OPD dental clinic per month during 2020.

The average number of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health per month during 2021 was 18.2. On average 3.5 children less than 3 years and 15.2 adolescents were managed in a single OPD dental clinic per month during 2021.

All pregnant mothers should be referred to the nearest dental clinic for screening and treatment of oral diseases during the first trimester of pregnancy by the Medical Officer of Health. Figures 3.18 (a) and 3.18 (b) explain the percentages of pregnant mothers screened for oral diseases in Sri Lanka for the years 2020 and 2021.

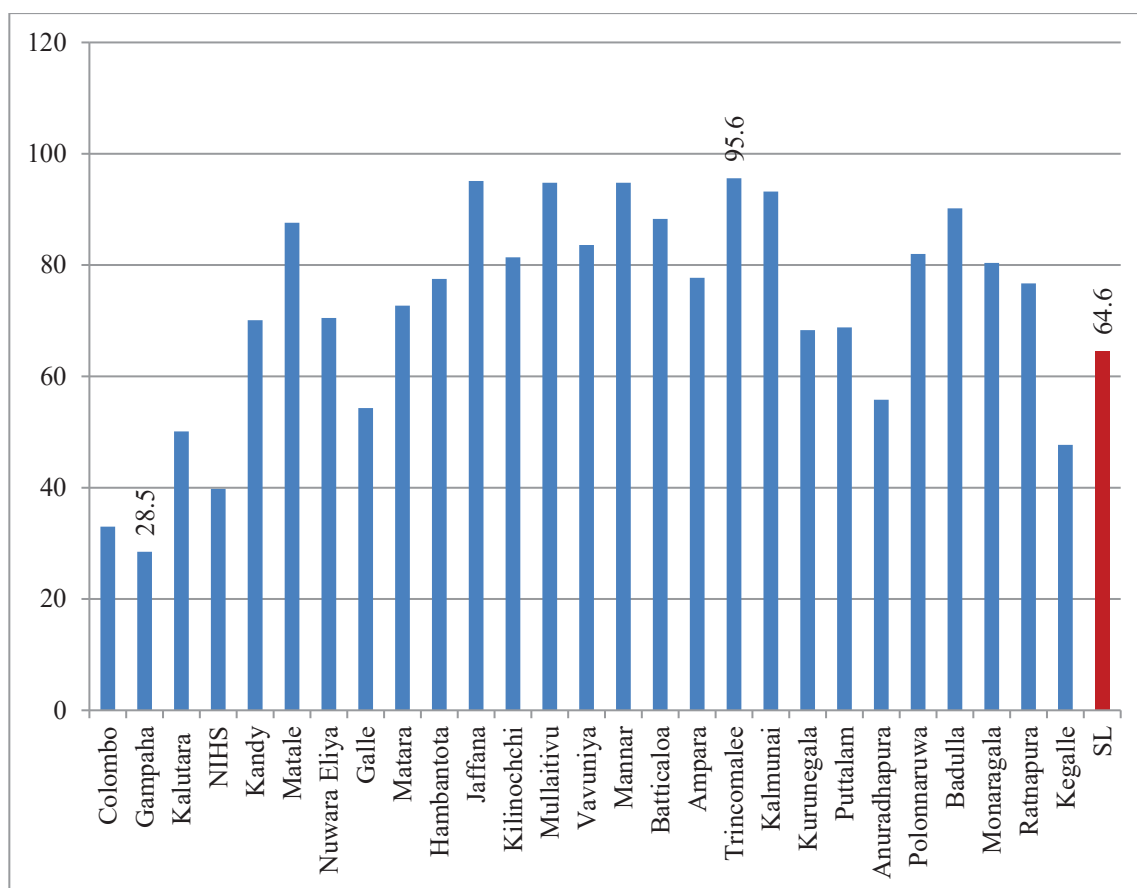
Fig 3.18 (a): Percentage of pregnant mothers screened for oral diseases in Sri Lanka for the year 2020: district variation



(Data from H 520 Monthly Return of Public Health Midwives- Monitoring and Evaluation unit- Family Health Bureau)

In Sri Lanka, 80.6% of pregnant mothers were screened for oral diseases in 2020. Pregnant mothers screened for oral diseases were highest in the Jaffna district with a percentage of 97.6%, while the lowest percentage of 57.3% was reported from the NIHS area Kalutara. Except for Colombo, Gampaha and NIHS area Kalutara, all other districts had screening percentages over 75% for pregnant mothers.

Fig 3.18 (b): Percentage of pregnant mothers screened for oral diseases in Sri Lanka for the year 2021: district variation



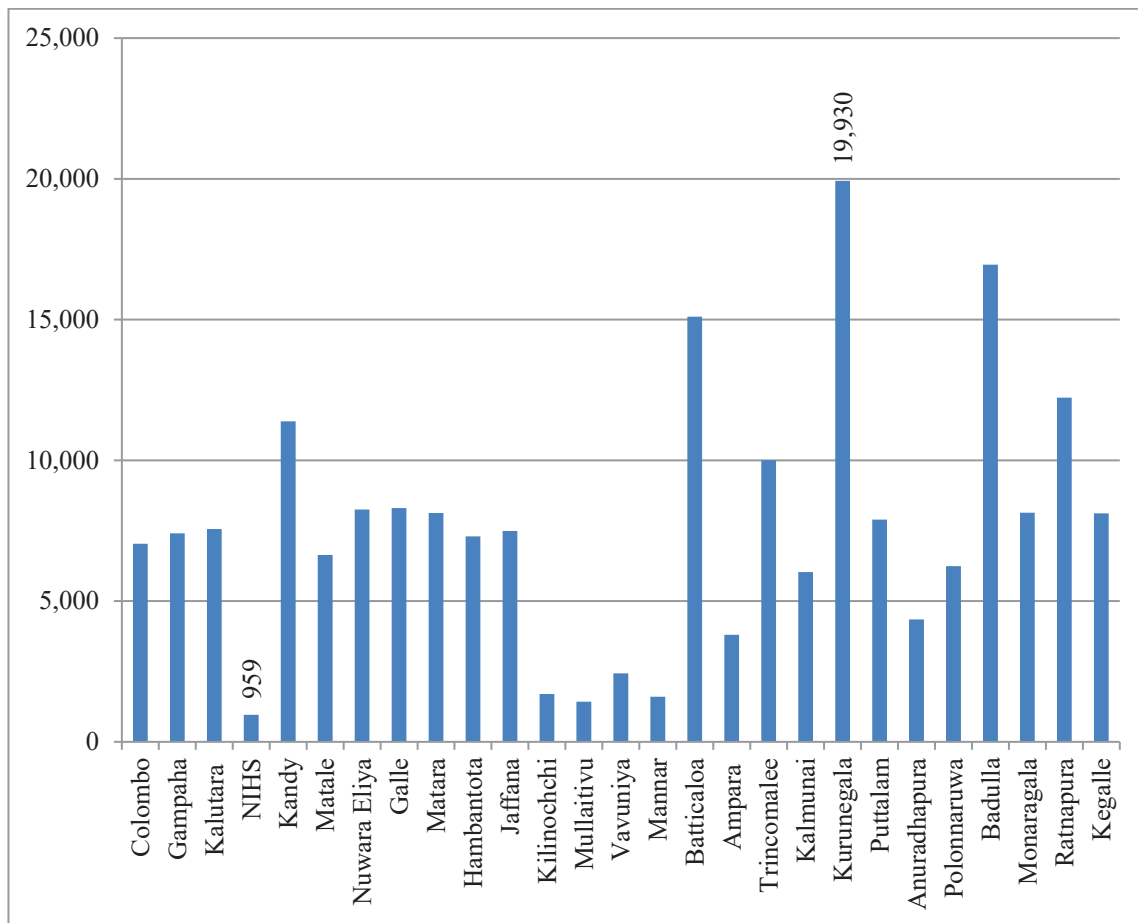
In 2021, when considering the national figure of the island, only 64.6% of pregnant mothers were screened for oral diseases. Pregnant mothers screened for oral diseases were highest in the Trincomalee district with a percentage of 95.6%, while the lowest percentage of 28.5% was recorded in the Gampaha district. Colombo, Gampaha, NIHS area Kalutara and Kegalle districts had less than 50% of the screening rate.

Table 3.3, Figure 3.19 (a), Figure 3.19 (b), Figure 3.20 (a) and Figure 3.20 (b) explain the total numbers and monthly average numbers of pregnant mothers managed in OPD dental clinics under the Ministry of Health, Sri Lanka in the years 2020 and 2021.

Table 3.3: Total numbers and monthly average numbers of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health in the years 2020 and 2021: district variation

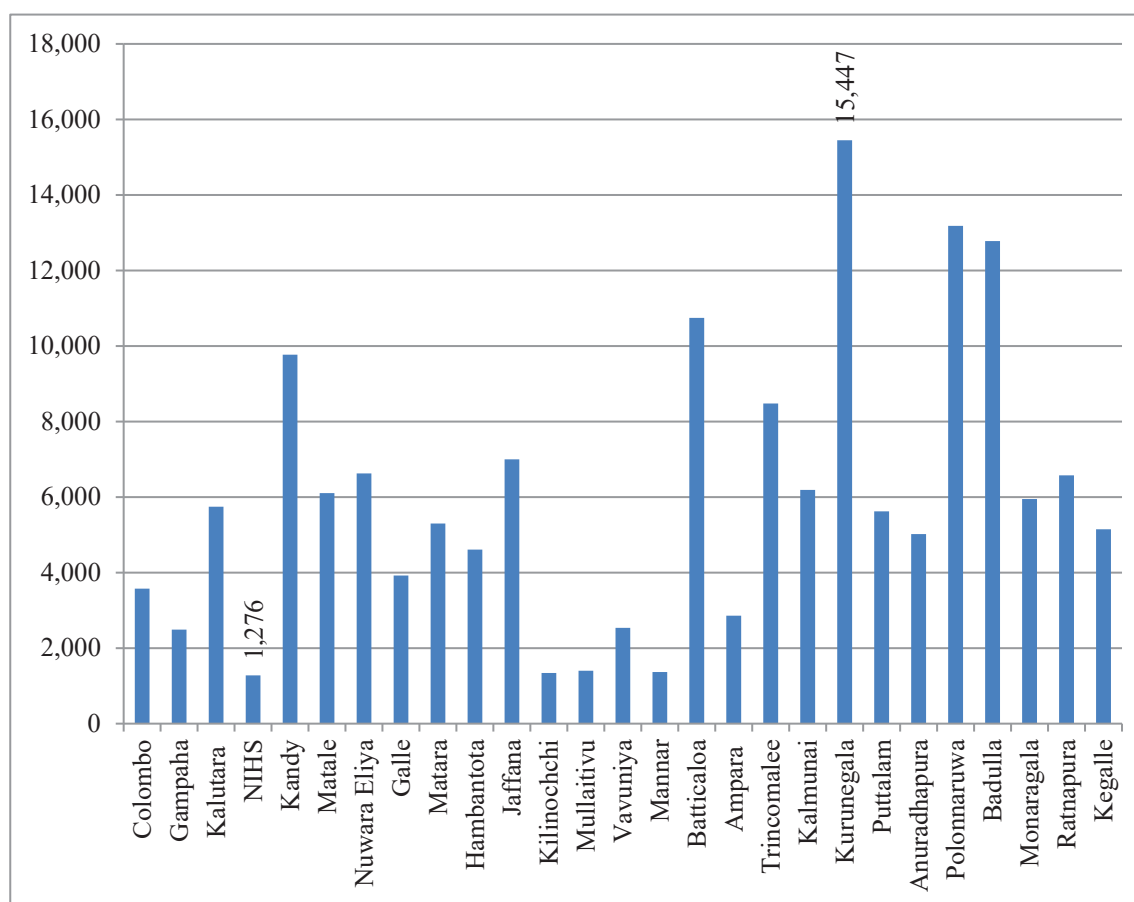
District	Total number of pregnant mothers managed in OPD dental clinics in 2020	Total number of pregnant mothers managed in OPD dental clinics in 2021	Monthly average number of pregnant mothers managed in a single OPD dental clinic in 2020	Monthly average number of pregnant mothers managed in a single OPD dental clinic in 2021
Colombo	7,037	3,575	11.7	6.0
Gampaha	7,408	2,492	15.1	4.7
Kalutara	7,559	5,743	21.7	16.0
NIHS area	959	1,276	13.3	15.2
Kandy	11,389	9,769	19.4	16.6
Matale	6,640	6,106	32.5	29.9
Nuwara Eliya	8,252	6,628	26.4	21.2
Galle	8,303	3,922	23.1	10.9
Matara	8,129	5,301	29.5	17.7
Hambantota	7,298	4,608	32.0	19.2
Jaffna	7,490	6,998	21.5	19.4
Kilinochchi	1,701	1,340	20.3	11.2
Mullaitivu	1,425	1,402	23.8	23.4
Vavuniya	2,431	2,537	40.5	21.1
Mannar	1,600	1,366	14.8	7.1
Batticaloa	15,102	10,746	43.4	28.9
Ampara	3,803	2,857	28.8	19.8
Trincomalee	10,007	8,476	41.7	35.3
Kalmunai	6,029	6,188	27.9	20.6
Kurunegala	19,930	15,447	31.3	24.3
Puttalam	7,898	5,621	22.7	14.6
Anuradhapura	4,348	5,018	13.9	14.4
Polonnaruwa	6,243	13,180	28.9	61.0
Badulla	16,950	12,778	32.8	24.8
Monaragala	8,143	5,950	35.7	24.8
Ratnapura	12,229	6,577	18.2	9.1
Kegalle	8,115	5,148	27.1	17.2
Sri Lanka	206,418	161,049	24.9	18.2

Fig.3.19 (a): Total number of pregnant mothers managed in OPD dental clinics under the Ministry of Health during the year 2020: district variation



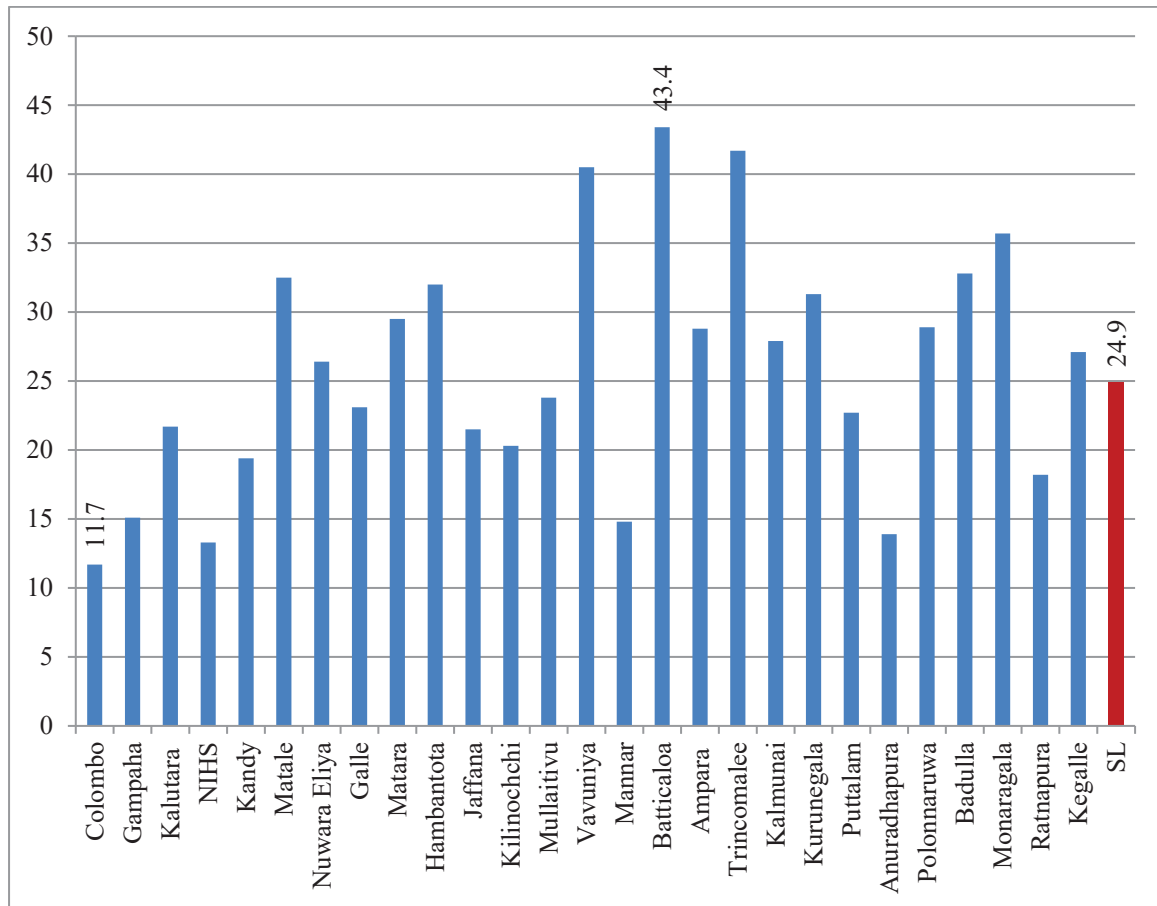
The total number of pregnant mothers managed in dental OPD clinics in Sri Lanka during the year 2020 was 206,418 and it varied from 959 in NIHS area Kalutara to 19,930 in Kurunegala district.

Fig.3.19 (b): Total number of pregnant mothers managed in OPD dental clinics under the Ministry of Health during the year 2021: district variation



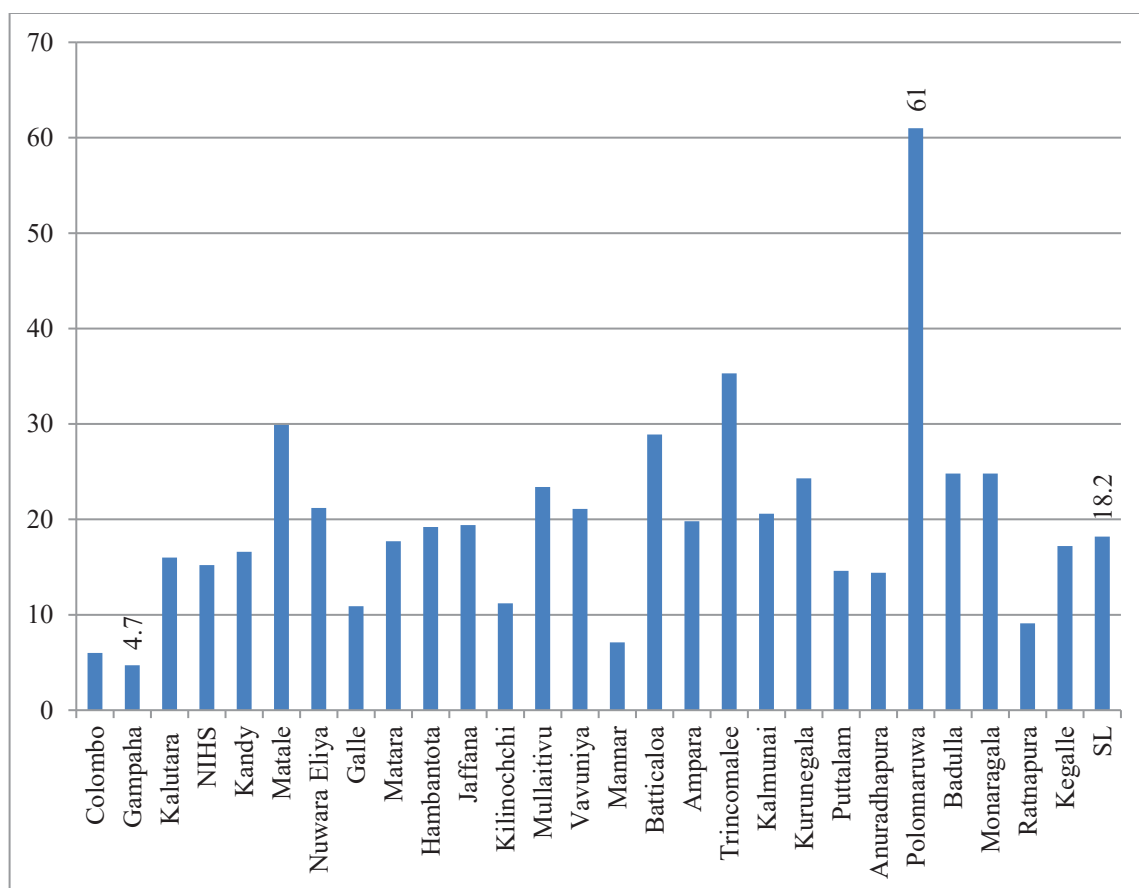
The total number of pregnant mothers managed in dental OPD clinics in Sri Lanka during the year 2021 was 161,049, and it varied from 1,276 in NIHS area Kalutara, to 15,447 in Kurunegala district.

Fig.3.20 (a): Monthly average number of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health during the year 2020: district variation



In Sri Lanka during the year 2020, the monthly average number of pregnant mothers managed in a single OPD dental clinic was reported as 24.9. The highest monthly average number of pregnant mothers managed in a single OPD dental clinic was reported as 43.4 from the Batticaloa district, while the lowest was reported as 11.7 from the Colombo district.

Fig.3.20 (b): Monthly average number of pregnant mothers managed in a single OPD dental clinic under the Ministry of Health during the year 2021: district variation



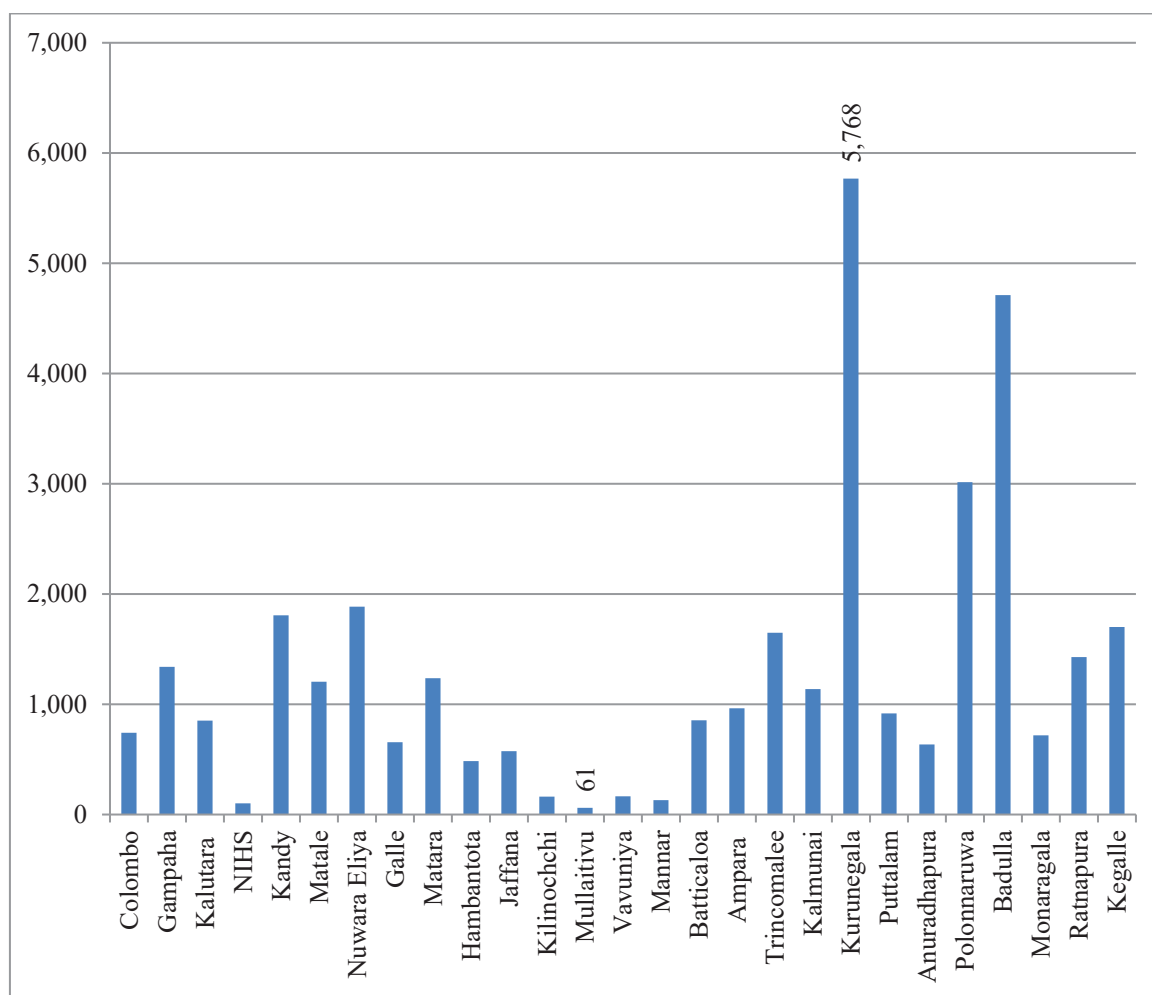
In Sri Lanka during the year 2021, the monthly average number of pregnant mothers managed in a single OPD dental clinic was reported as 18.2. The highest monthly average number of pregnant mothers managed in a single OPD dental clinic was reported as 61 from the Polonnaruwa district, while the lowest was reported as 4.7 from the Gampaha district.

Tables 3.4, figures 3.21 (a), (b) and 3.22 (a), (b) explain the total numbers and monthly average numbers of children less than 3 years managed in OPD dental clinics under the Ministry of Health, Sri Lanka in the years 2020 and 2021

Table 3.4: Total numbers and monthly average numbers of children less than 3 years managed in a single OPD dental clinic under the Ministry of Health in the years 2020 and 2021: district variation

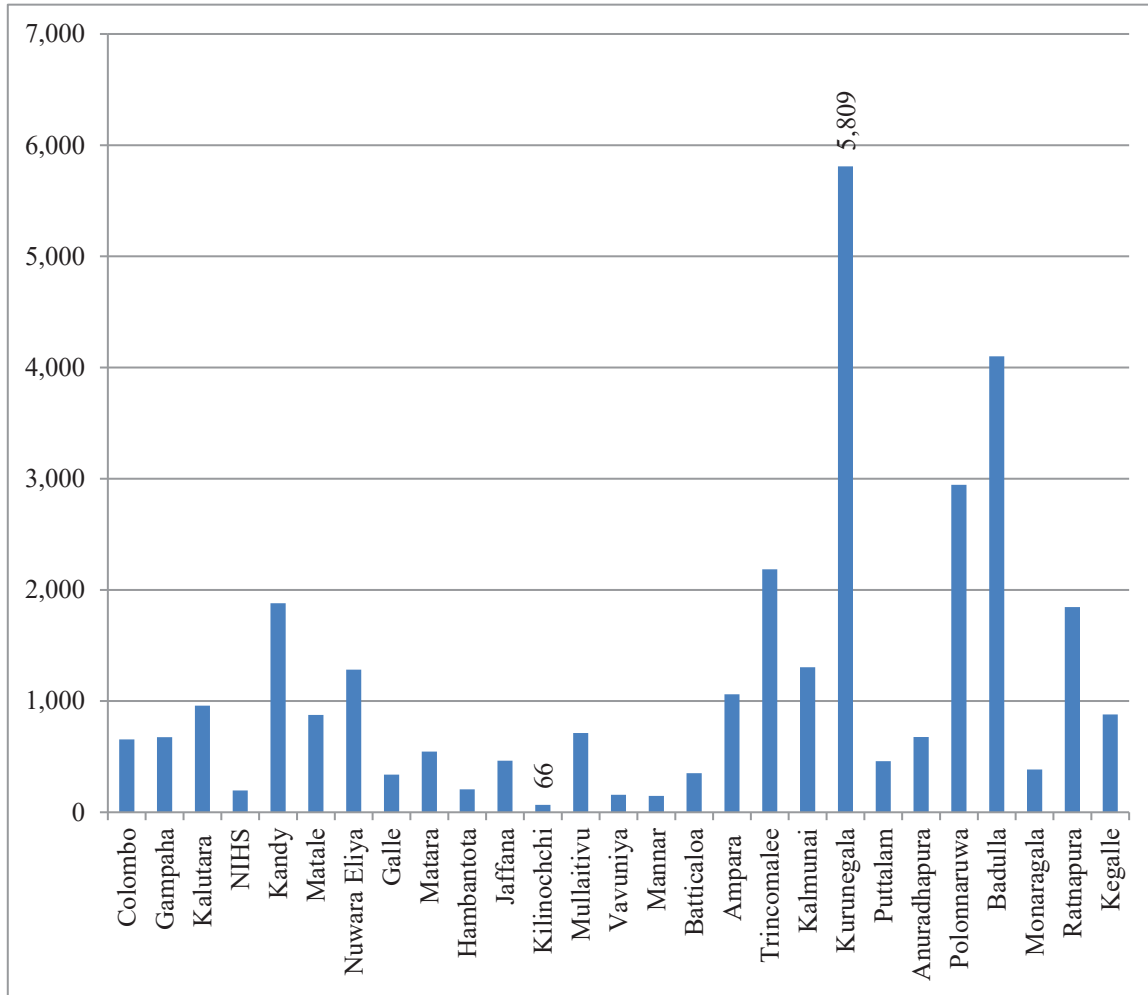
District	Total number of children less than 3 years managed in OPD dental clinics in 2020	Total number of children less than 3 years managed in OPD dental clinics in 2021	Monthly average number of children less than 3 years managed in a single OPD dental clinic in 2020	Monthly average number of children less than 3 years managed in a single OPD dental clinic in 2021
Colombo	742	655	1.2	1.1
Gampaha	1,340	675	2.7	1.3
Kalutara	852	959	2.4	2.7
NIHS area	101	196	1.4	2.3
Kandy	1,807	1,880	3.1	3.2
Matale	1,204	876	5.9	4.3
Nuwara Eliya	1,885	1,283	6.0	4.1
Galle	656	339	1.8	0.9
Matara	1,237	546	4.5	1.8
Hambantota	485	206	2.1	0.9
Jaffna	575	464	1.7	1.3
Kilinochchi	163	66	1.9	0.6
Mullaitivu	61	713	1.0	11.9
Vavuniya	165	157	2.8	1.3
Mannar	131	147	1.2	0.8
Batticaloa	855	351	2.5	0.9
Ampara	964	1,061	7.3	7.4
Trincomalee	1,649	2,185	6.9	9.1
Kalmunai	1,138	1,304	5.3	4.3
Kurunegala	5,768	5,809	9.1	9.1
Puttalam	917	459	2.6	1.2
Anuradhapura	636	677	2.0	1.9
Polonnaruwa	3,014	2,945	14.0	13.6
Badulla	4,711	4,101	9.1	7.9
Monaragala	718	384	3.1	1.6
Ratnapura	1,428	1,846	2.1	2.6
Kegalle	1,701	880	5.7	2.9
Sri Lanka	34,903	31,164	4.2	3.5

Fig. 3.21 (a): Total number of children less than 3 years managed in OPD dental clinics under the Ministry of Health during the year 2020: district variation



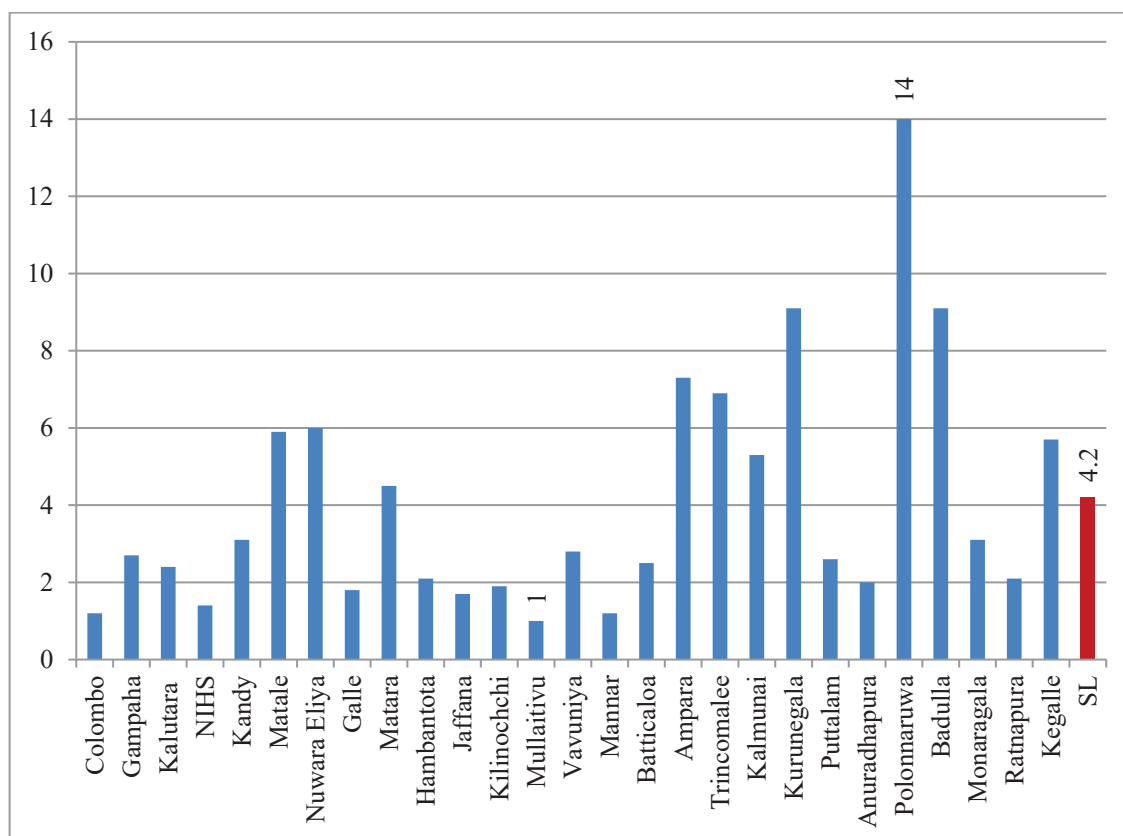
The total number of children less than 3 years managed in OPD dental clinics in Sri Lanka in the year 2020 was 34,903 and it varied from 61 children in Mullaitivu district to 5,768 children in Kurunegala district.

Fig. 3.21 (b): Total number of children less than 3 years managed in OPD dental clinics under the Ministry of Health during the year 2021: district variation.



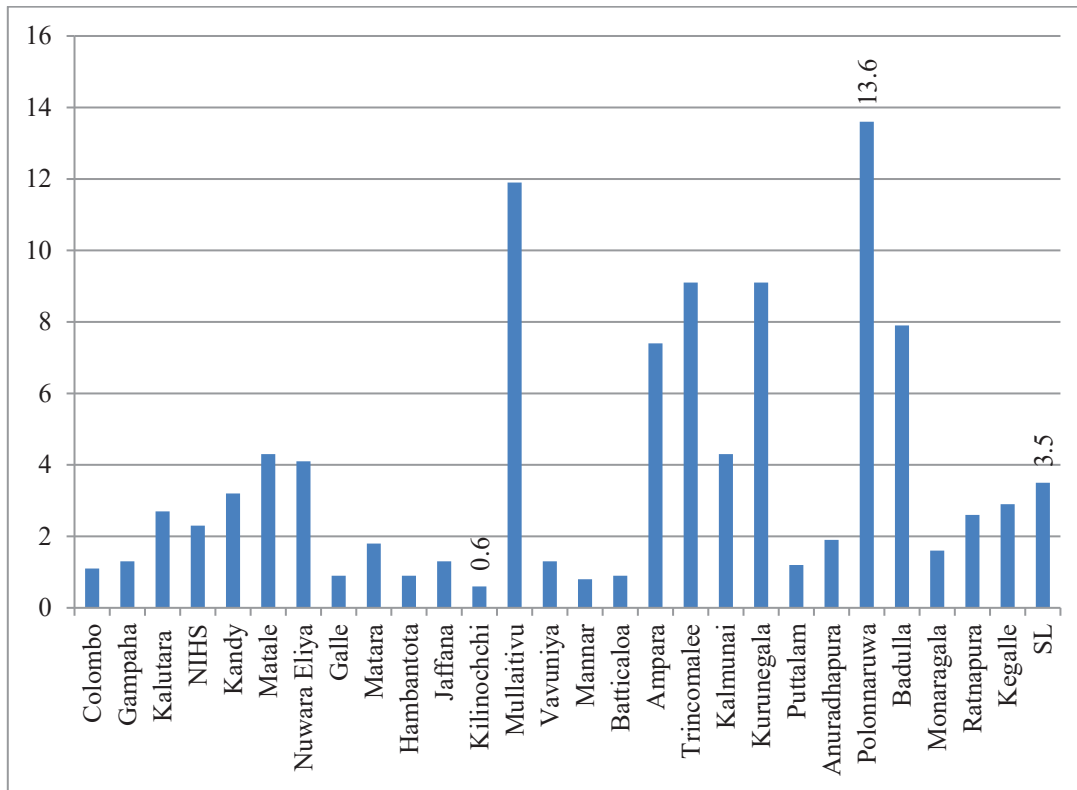
The total number of children less than 3 years managed in OPD dental clinics in Sri Lanka in the year 2021 was 31,164 and it varied from 66 children in Kilinochchi district to 5,809 children in Kurunegala district.

Fig. 3.22 (a): Monthly average number of children less than 3 years managed in a single OPD dental clinic under the Ministry of Health in the year 2020: district variation



In Sri Lanka for the year 2020, the monthly average number of children less than 3 years managed in a single OPD dental clinic was 4.2. The highest monthly average number of children less than 3 years managed in a single OPD dental clinic was from the Polonnaruwa district, with a value of 14 children, while the lowest monthly average number was from the Mullaitivu district which was one child per clinic.

Fig. 3.22 (b): Monthly average number of children less than 3 years managed in a single OPD dental clinic under the Ministry of Health in the year 2021: district variation



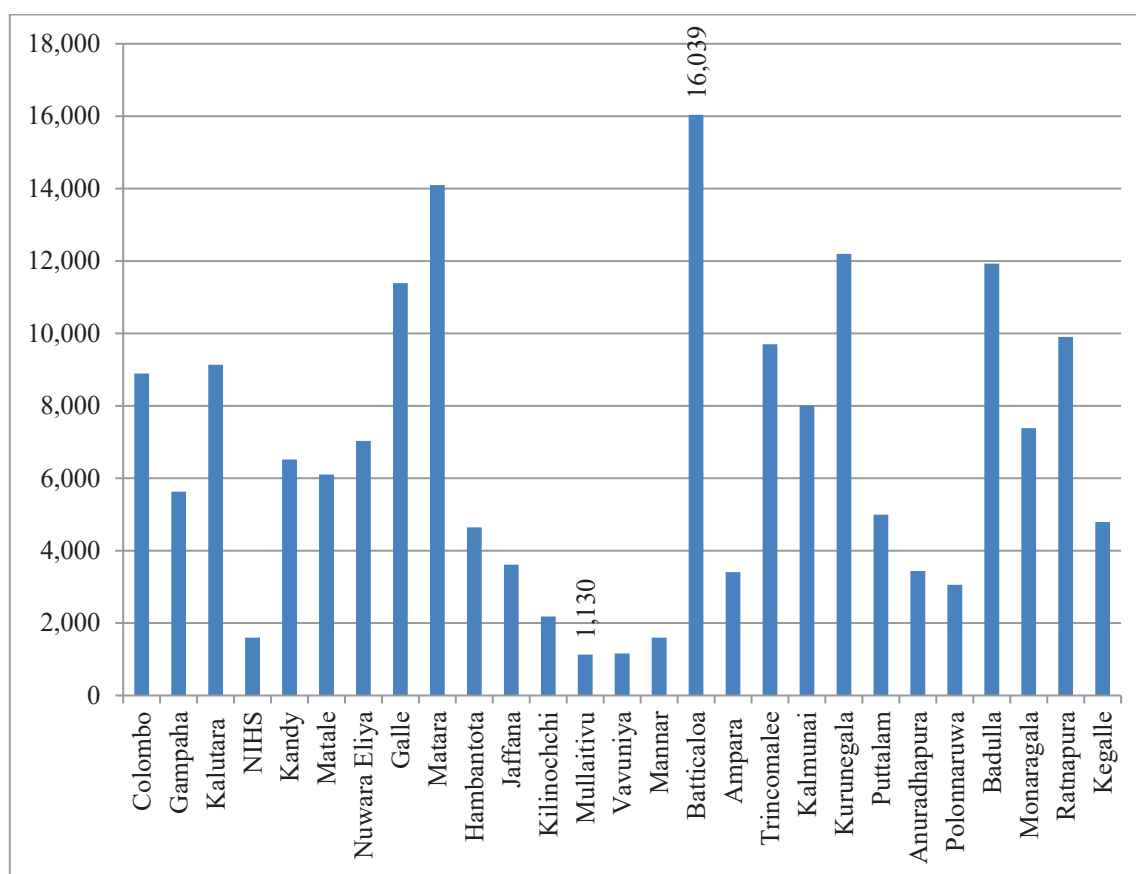
In Sri Lanka for the year 2021, the monthly average number of children less than 3 years managed in a single OPD dental clinic was 3.5. The highest monthly average number of children less than 3 years managed in a single OPD dental clinic was from the Polonnaruwa district, with a value of 13.6 children, while the lowest monthly average number was from the Kilinochchi district which was 0.6 children per clinic.

Tables 3.5, figures 3.23 and 3.24 explain the total numbers and average numbers of adolescents (13-19 years) managed in OPD dental clinics under the Ministry of Health, Sri Lanka during a month in the years 2020 and 2021.

Table 3.5: Total numbers and monthly average numbers of adolescents managed in a single OPD dental clinic under the Ministry of Health in the years 2020 and 2021: district variation

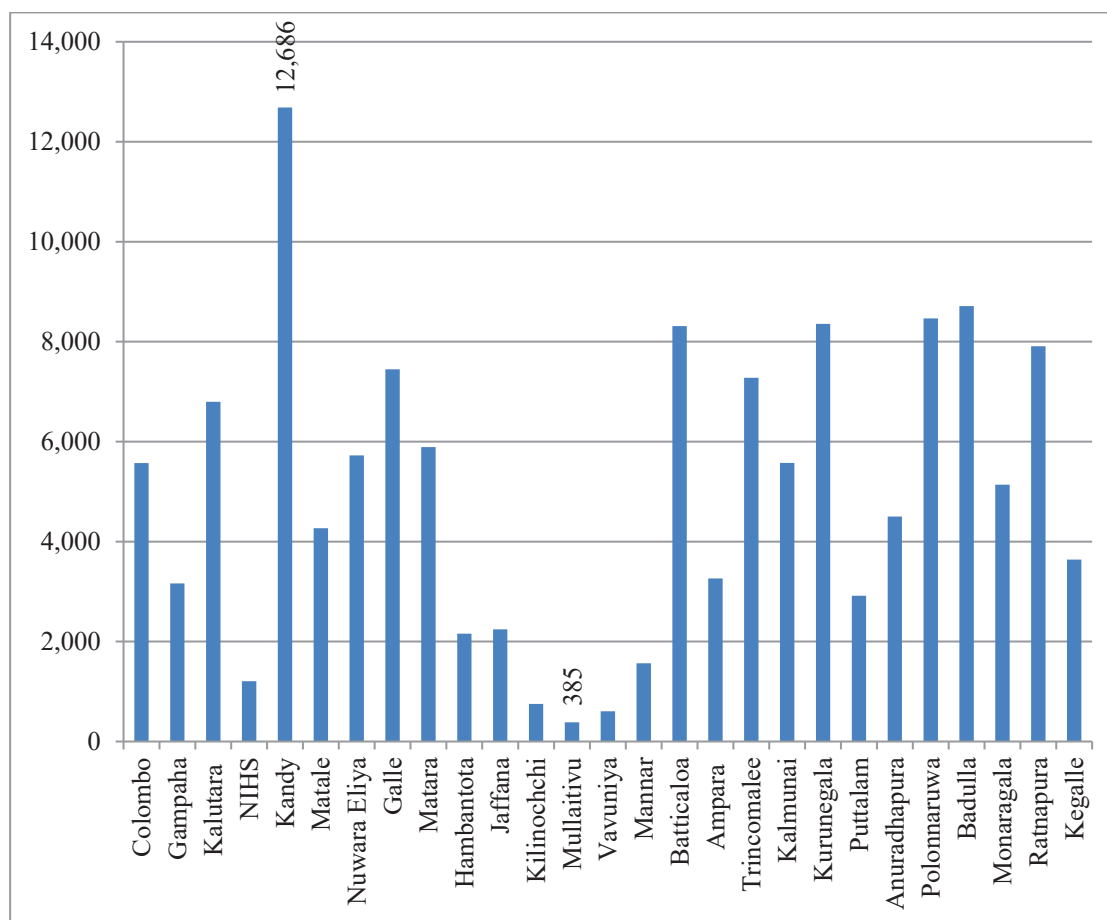
District	Total number of adolescents managed in OPD dental clinics in 2020	Total number of adolescents managed in OPD dental clinics in 2021	Monthly average number of adolescents managed in a single OPD dental clinic in 2020	Monthly average number of adolescents managed in a single OPD dental clinic in 2021
Colombo	8,891	5,570	14.8	9.3
Gampaha	5,631	3,163	11.4	6.0
Kalutara	9,133	6,796	26.2	18.9
NIHS area	1,600	1,206	22.2	14.4
Kandy	6,517	12,686	11.1	21.6
Matale	6,103	4,269	29.9	20.9
Nuwara Eliya	7,030	5,724	22.5	18.3
Galle	11,391	7,448	31.6	20.7
Matara	14,100	5,890	51.1	19.6
Hambantota	4,645	2,159	20.4	9.0
Jaffna	3,615	2,245	10.4	6.2
Kilinochchi	2,181	752	26.0	6.3
Mullaitivu	1,130	385	18.8	6.4
Vavuniya	1,162	605	19.4	5.0
Mannar	1,600	1,564	14.8	8.1
Batticaloa	16,039	8,310	46.1	22.3
Ampara	3,405	3,262	25.8	22.7
Trincomalee	9,702	7,276	40.4	30.3
Kalmunai	8,007	5,573	37.1	18.6
Kurunegala	12,196	8,355	19.2	13.1
Puttalam	4,993	2,918	14.3	7.6
Anuradhapura	3,439	4,501	11.0	12.9
Polonnaruwa	3,059	8,466	14.2	39.2
Badulla	11,928	8,712	23.1	16.9
Monaragala	7,386	5,140	32.4	21.4
Ratnapura	9,906	7,907	14.7	11.0
Kegalle	4,790	3,639	16.0	12.1
Sri Lanka	179,579	134,521	21.6	15.2

Fig. 3.23 (a): Total number of adolescents managed in OPD dental clinics under the Ministry of Health during the year 2020: district variation



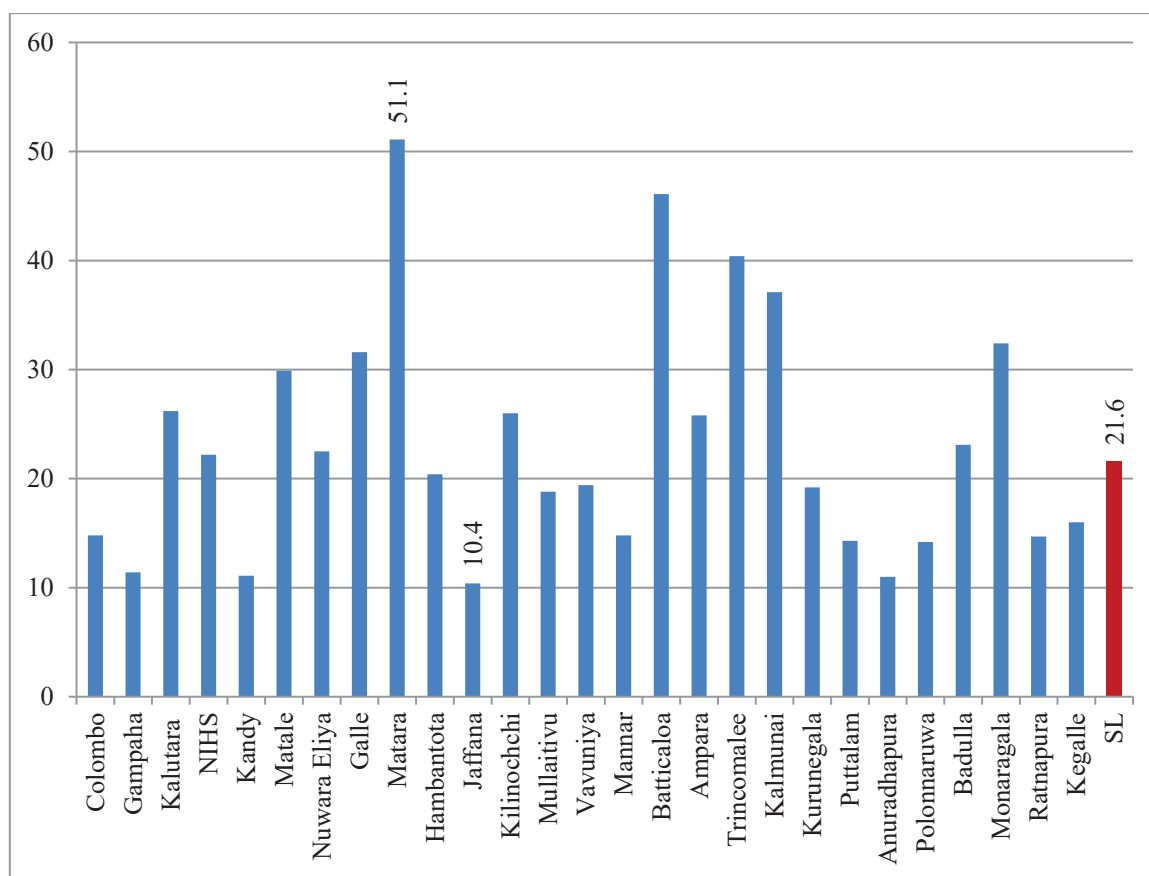
The total number of adolescents managed in OPD dental clinics in Sri Lanka during the year 2020 was 179,579. The highest number of adolescents (16,039) was managed in the Batticaloa district and the lowest number of adolescents (1,130) was managed in the Mullaitivu district.

Fig. 3.23 (b): Total number of adolescents managed in OPD dental clinics under the Ministry of Health during the year 2021: district variation



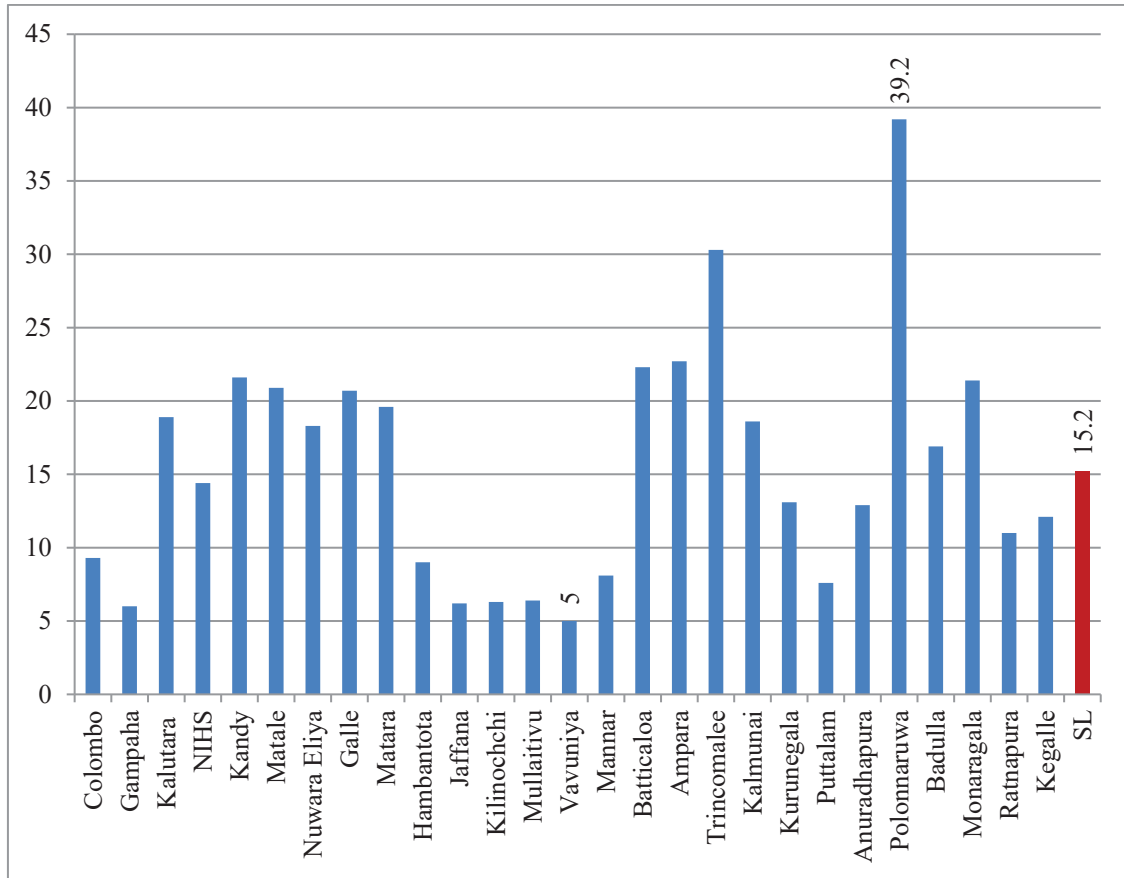
The total number of adolescents managed in OPD dental clinics in Sri Lanka during the year 2021 was 134,521. The highest number of adolescents (12,686) was managed in the Kandy district and the lowest number of adolescents (385) was managed in Mullaitivu district.

Fig. 3.24 (a): Monthly average number of adolescents managed in a single OPD dental clinic under the Ministry of Health in the year 2020: district variation



In Sri Lanka, an average number of 21.6 adolescents were managed per month per OPD dental clinic during the year 2020. The highest average number of adolescents per month per clinic was managed in the Matara district with a value of 51.1, while the lowest average number was from the Jaffna district with a value of 10.4.

Fig. 3.24 (b): Monthly average number of adolescents managed in a single OPD dental clinic under the Ministry of Health in the year 2021: district variation



In Sri Lanka, an average number of 15.2 adolescents were managed per month per OPD dental clinic during the year 2021. The highest average number of adolescents per month per clinic was managed in the Polonnaruwa district with a value of 39.2, while the lowest average number was from the Vavuniya district with a value of 5.

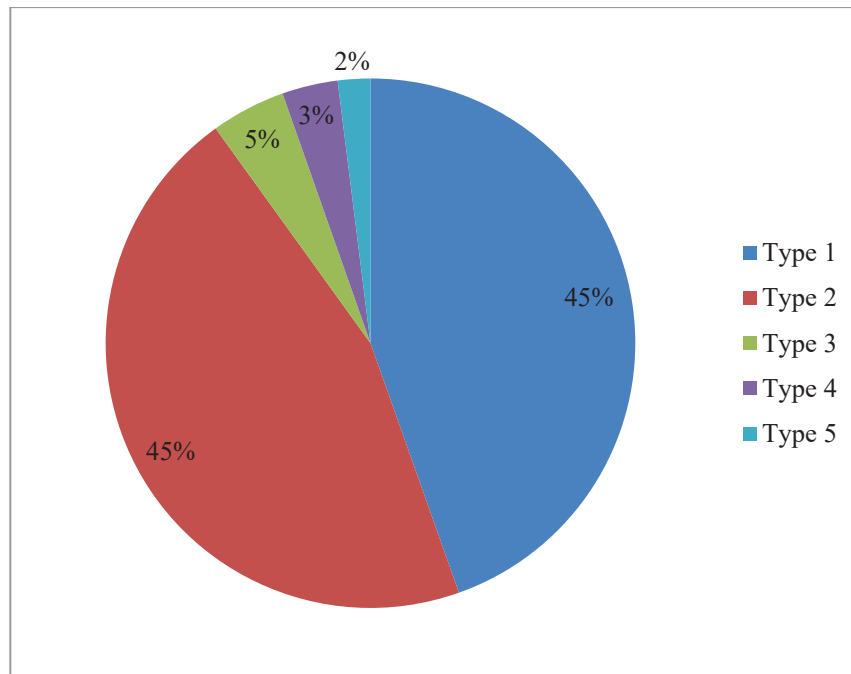
3.4 Statistics related to dental treatments carried out by OPD dental surgeons during 2020 and 2021 under the Ministry of Health, Sri Lanka according to types of OPD dental clinics

Types of OPD dental clinics

- Type 1 – OPD dental clinics in National Hospitals in Sri Lanka, Teaching Hospitals, Provincial General Hospitals, District General Hospitals and Base Hospitals
- Type 2 – OPD dental clinics in Divisional Hospitals and Primary Medical Care Units
- Type 3 – Adolescent Dental Clinics
- Type 4 – Community Dental Clinics and Dental Clinics under the Medical Officer of Health
- Type 5 – Mobile dental clinics

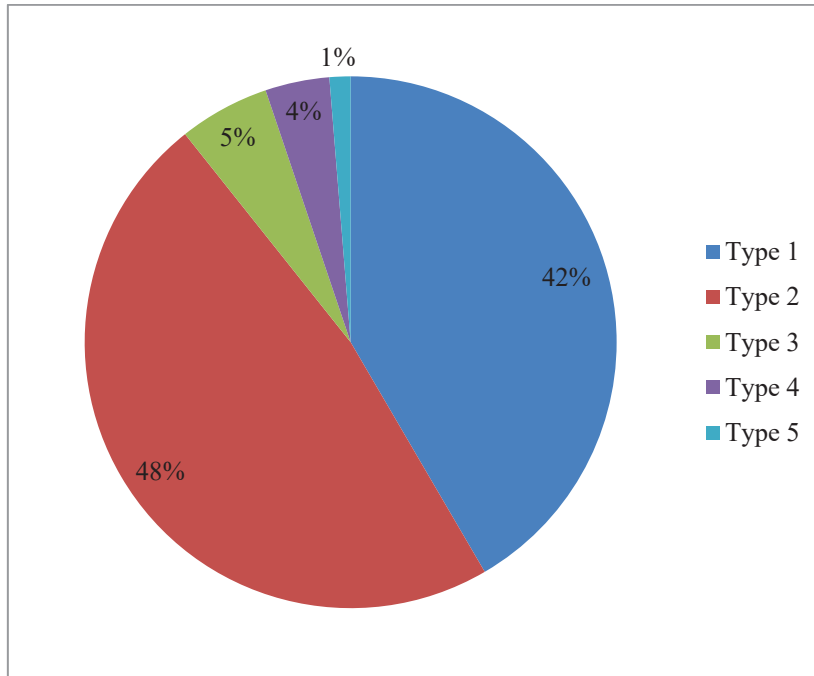
Figures 3.25 (a) and 3.25 (b) explain the total number of patients managed at OPD dental clinics under the Ministry of Health, Sri Lanka in the years 2020 and 2021 according to the types of OPD dental clinics.

Fig. 3.25 (a): Distribution of the total number of patients managed at OPD dental clinics in the year 2020 according to types of OPD dental clinics



The total number of patients managed at OPD dental clinics in the year 2020 was 2,655,068. Out of that 45% of patients were managed in type 1 OPD dental clinics, another 45% of patients were managed in type 2 OPD dental clinics while only 2% were managed at type 5 OPD dental clinics.

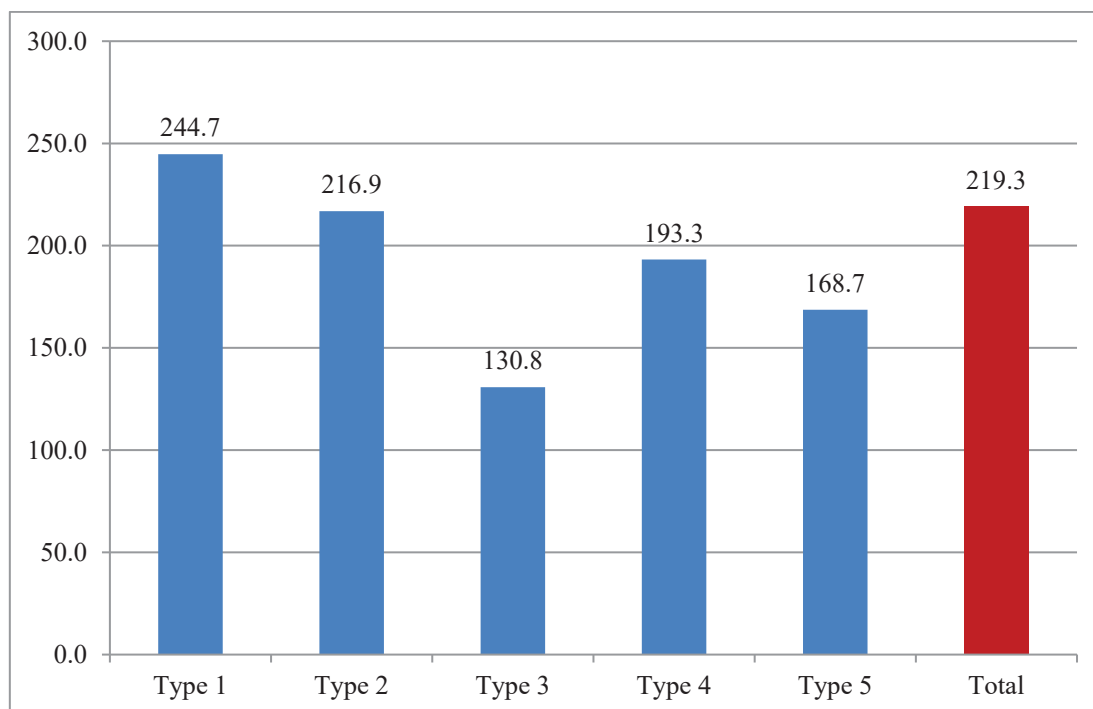
Fig. 3.25 (b): Distribution of the total number of patients managed at OPD dental clinics in the year 2021 according to types of OPD dental clinics



The total number of patients managed at OPD dental clinics in Sri Lanka for the year 2021 was 2,092,265. Out of the total number of patients managed, 48% were managed at Type 2 OPD dental clinics, while only 1% were managed at Type 5 dental clinics.

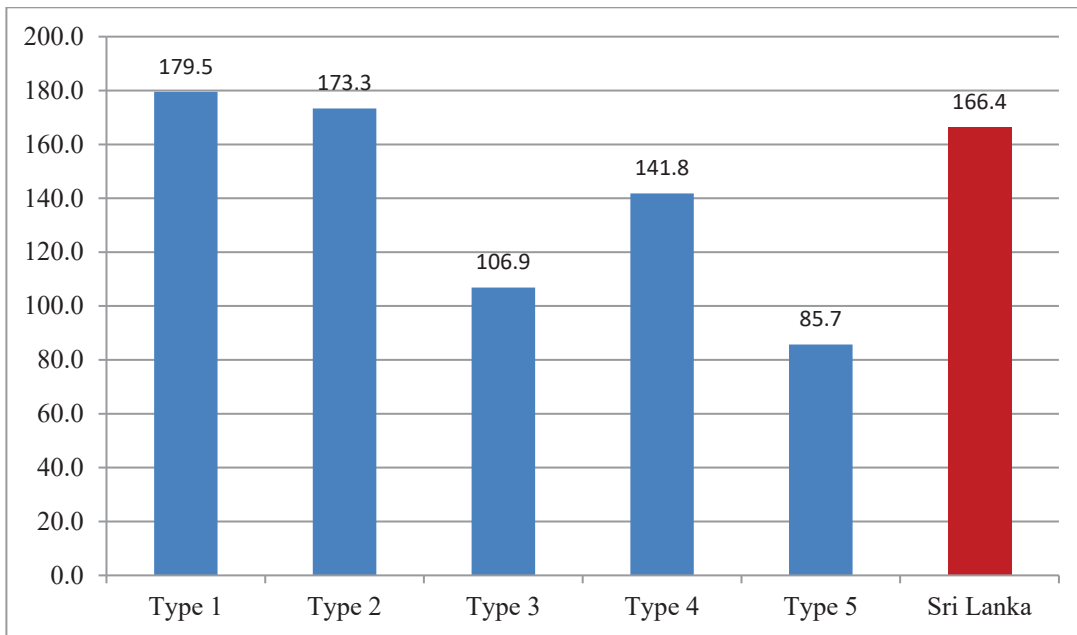
Figures 3.26 (a) and (b) explain the monthly average numbers of patients managed by a single OPD dental surgeon working under the Ministry of Health, Sri Lanka in the years 2020 and 2021 according to types of OPD dental clinics.

Fig. 3.26 (a): Monthly average number of patients managed by a single OPD dental surgeon under the Ministry of Health in 2020 according to types of OPD dental clinics



Considering the whole island, on average 219.3 patients were managed by a single OPD dental surgeon per month in the year 2020. The highest number of patients managed by a single OPD dental surgeon per month was reported from Type 1 OPD dental clinics which was 244.7. The least number was reported from ADCs, which was 130.8. The number of patients managed by a single OPD dental surgeon working in a mobile dental clinic per month was 168.7 and it included those patients who were screened. Dental surgeons working in Community Dental Clinics and dental clinics under the MOH were supposed to screen patients and the monthly average number of patients managed by a single dental surgeon working in these clinics was 193.3.

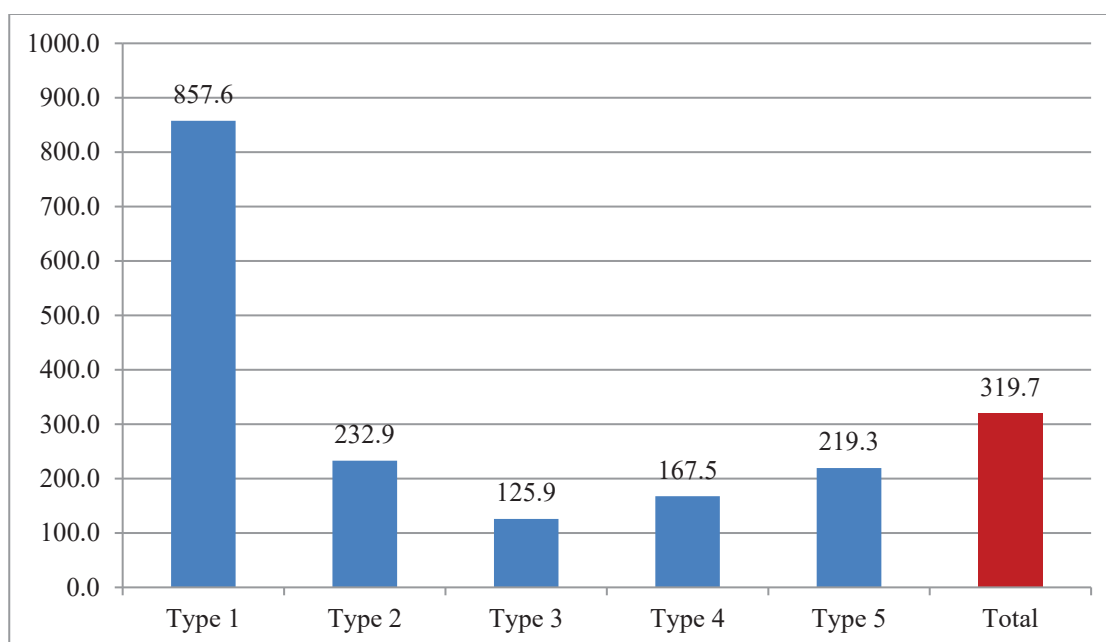
Fig. 3.26 (b): Monthly average number of patients managed by a single OPD dental surgeon under the Ministry of Health in 2021 according to types of OPD dental clinics



When considering the whole island data, on average 166.4 patients were managed by a single OPD dental surgeon per month in the year 2021. An average number of 179.5 patients were managed by a single OPD dental surgeon attached to Type 1 OPD dental clinics, which was the highest among all types of OPD dental clinics. A single dental surgeon attached to a mobile dental clinic treated the least number of patients, which was 85.7 per month during the year 2021. Dental surgeons working in Community Dental Clinics and dental clinics under MOH were supposed to screen patients, and the monthly average number of patients managed by a single dental surgeon working in these clinics was 141.8.

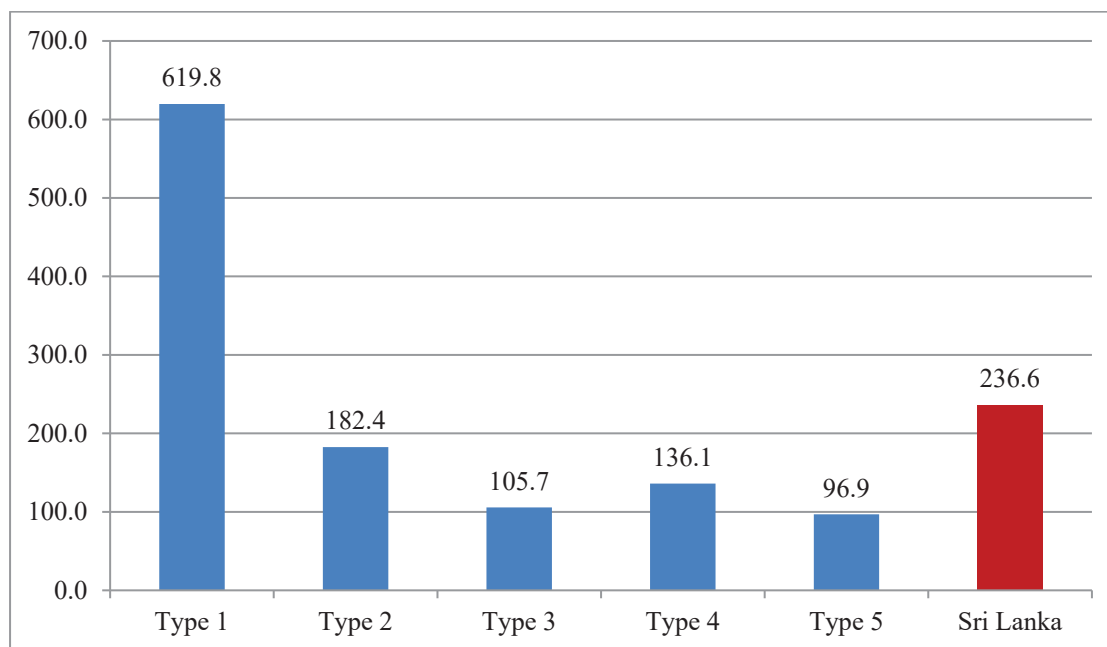
Figures 3.27 (a) and 3.27 (b) explain the monthly average numbers of patients managed in a single OPD dental clinic under the Ministry of Health, Sri Lanka in the years 2020 and 2021 according to types of OPD dental clinics.

Fig. 3.27 (a): Monthly average number of patients managed in a single OPD dental clinic under the Ministry of Health in the year 2020 according to types of OPD dental clinics



Out of all the OPD dental clinics under the Ministry of Health, Sri Lanka, on average 319.7 patients were managed in one OPD dental clinic per month in the year 2020. The monthly average number of patients managed in a single OPD dental clinic was highest in Type 1 OPD dental clinics with a value of 857.6 and the least monthly average number of patients was managed in Adolescent Dental Clinics with a value of 125.9.

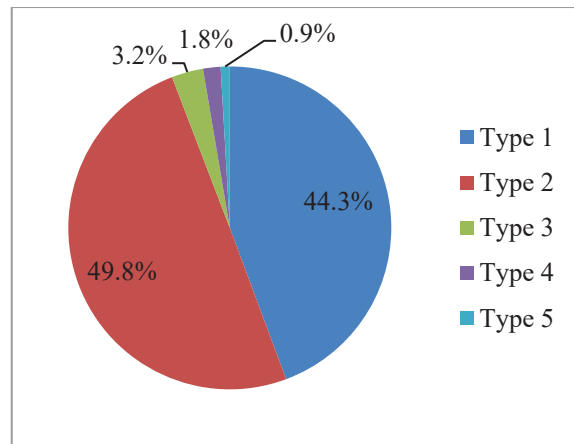
Fig. 3.27 (b): Monthly average number of patients managed in a single OPD dental clinic under the Ministry of Health in the year 2021 according to types of OPD dental clinics



Out of all the OPD dental clinics under the Ministry of Health, Sri Lanka, on average 236.6 patients were managed in a single OPD dental clinic per month in the year 2021. The monthly average number of patients managed in a single OPD dental clinic was highest in Type 1 OPD dental clinics with a value of 619.8 and the least monthly average number of patients was managed in mobile dental clinics with a value of 96.9.

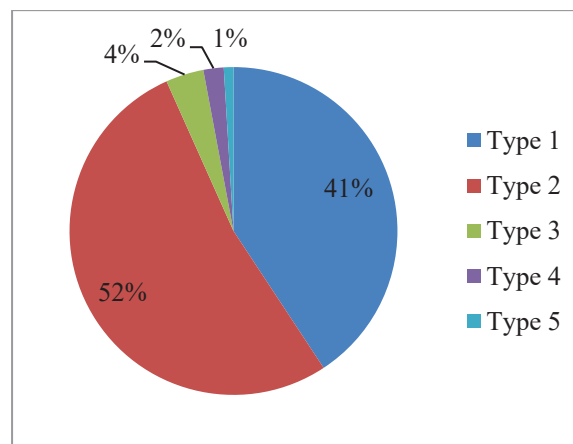
Figures 3.28, 3.29, 3.30, 3.31, 3.32, 3.33, 3.34, 3.35 and 3.36 explain the percentages of selected types of treatments carried out at OPD dental clinics under the Ministry of Health, Sri Lanka in the years 2020 and 2021 according to types of OPD dental clinics.

Fig. 3.28 (a): Distribution of the percentage of Extractions carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics



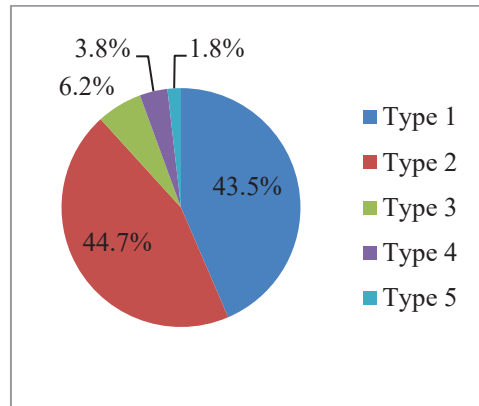
The total number of extractions carried out in 2020 at OPD dental clinics was 748,179. From the total, 49.83% of extractions were carried out at the Type 2 OPD dental clinics while Type 5 OPD dental clinics carried out only 0.91%.

Fig. 3.28 (b): Distribution of the percentage of Extractions carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



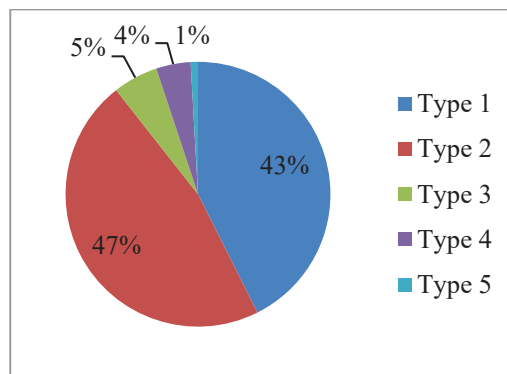
The total number of extractions carried out in 2021 at OPD dental clinics was 251,758. From the total, 52% of extractions were carried out at Type 2 OPD dental clinics, while Type 5 OPD dental clinics carried out only 1%.

Fig. 3.29 (a): Distribution of the percentage of Temporary fillings carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics



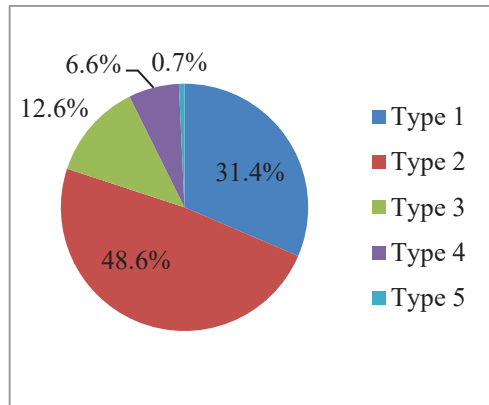
The total number of Temporary fillings carried out in the year 2020 in all OPD dental clinics in Sri Lanka was 345,823. Out of the total, 44.7% of Temporary fillings were carried out at Type 2 OPD dental clinics while only 1.8 % were carried out at mobile dental clinics in Sri Lanka.

Fig. 3.29 (b): Distribution of the percentage of temporary fillings carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



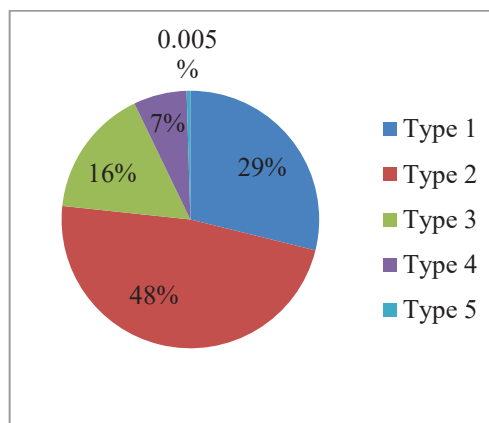
The total number of Temporary fillings carried out in the year 2021 in all OPD dental clinics in Sri Lanka was 258,711. Out of the total, 47% of Temporary fillings were carried out at Type 2 OPD dental clinics while only 1 % were carried out at mobile dental clinics.

Fig. 3.30 (a): Distribution of the percentage of Amalgam restorations carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics



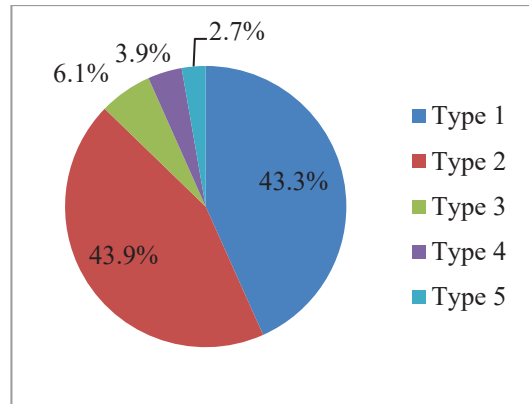
The total number of Amalgam restorations carried out in the year 2020 at OPD dental clinics in Sri Lanka was 15,194. From the total, 48.6% of Amalgam restorations were carried out at Type 2 OPD dental clinics while in Type 5 OPD dental clinics, only 0.7% of Amalgam restorations were carried out.

Fig. 3.30 (b): Distribution of the percentage of Amalgam restorations carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



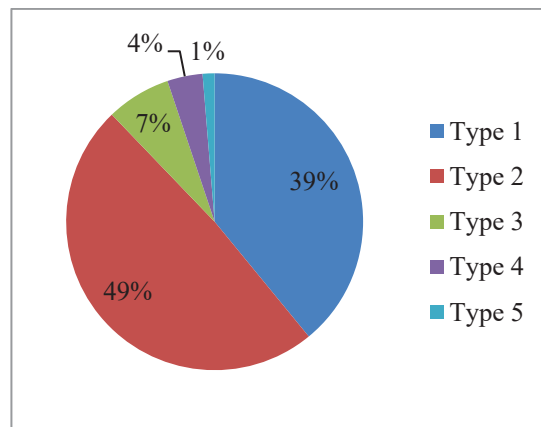
The total number of Amalgam restorations carried out in the year 2021 at OPD dental clinics in Sri Lanka was 14,606. From the total, 48% of Amalgam restorations were carried out at Type 2 OPD dental clinics while at Type 5 OPD dental clinics carried out only 0.005% of Amalgam restorations.

Fig. 3.31 (a): Distribution of the percentage of GIC restorations carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics



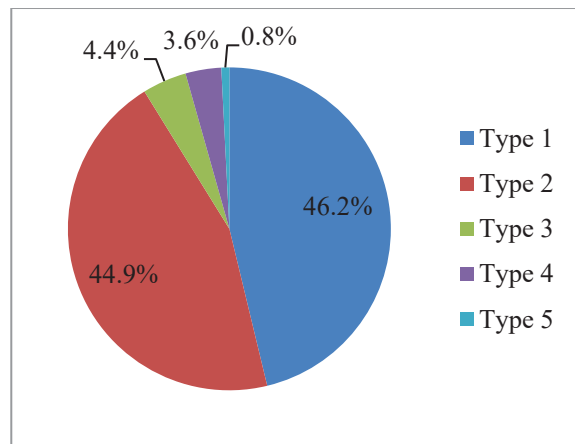
The total number of GIC restorations carried out in the year 2020 at OPD dental clinics in Sri Lanka was 413,405. From the total, 43.9% of GIC restorations were carried out at Type 2 OPD dental clinics, while 2.7% of GIC restorations were carried out at Type 5 OPD dental clinics.

Fig. 3.31 (b): Distribution of the percentage of GIC restorations carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



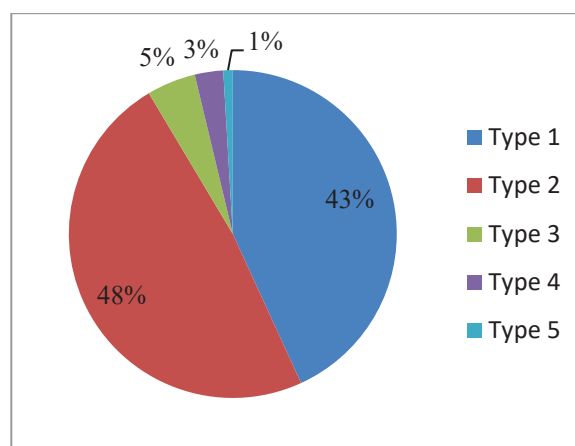
The total number of GIC restorations carried out in the year 2021 at OPD dental clinics in Sri Lanka was 319,950. From the total, 49% of GIC restorations were carried out at Type 2 OPD dental clinics, while only 1% of GIC restorations were carried out at Type 5 OPD dental clinics.

Fig. 3.32 (a): Distribution of the percentage of Composite restorations carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics



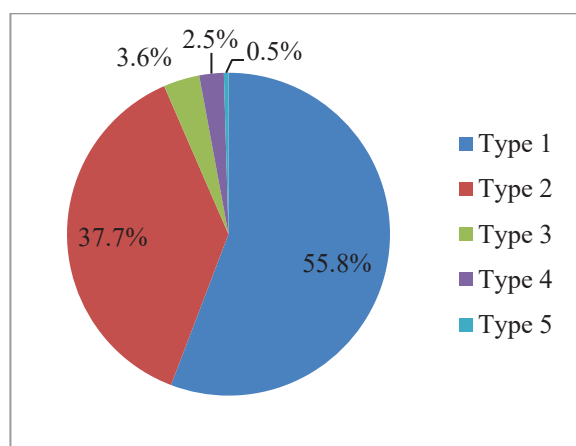
The total number of Composite restorations carried out in the year 2020 at OPD dental clinics was 81,976. From the total, 46.2% of Composite restorations were carried out at Type 1 OPD dental clinics, while 0.8% of Composite restorations were done in Type 5 OPD dental clinics.

Fig. 3.32 (b): Distribution of the percentage of Composite restorations carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



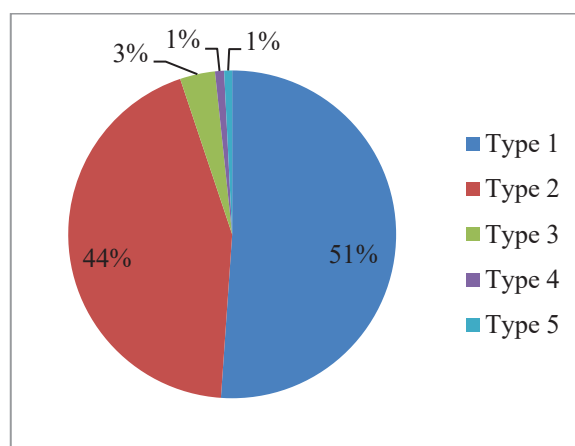
The total number of Composite restorations carried out in the year 2021 at OPD dental clinics was 60,826. From the total, 48% of Composite restorations were carried out at Type 2 OPD dental clinics while 1% of Composite restorations were done in Type 5 OPD dental clinics.

Fig. 3.33 (a): Distribution of the percentage of completed RCTs carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics.



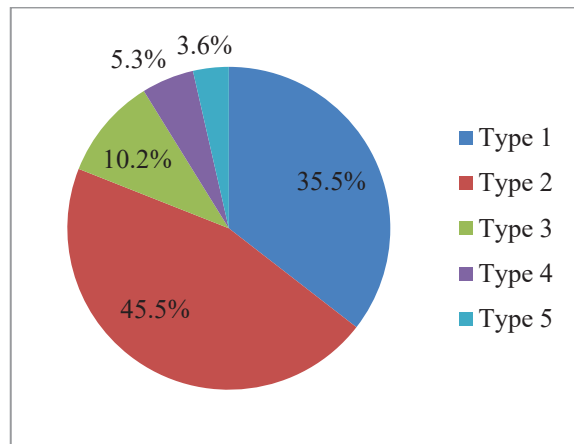
The total number of completed RCTs carried out in the year 2020 at OPD dental clinics was 17,359. From the total, 55.8% of completed RCTs were carried out at Type 1 OPD dental clinics.

Fig. 3.33 (b): Distribution of the percentage of completed RCTs carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



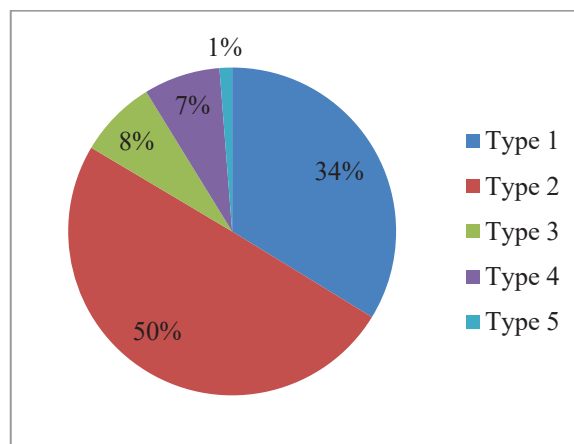
The total number of completed RCTs carried out in the year 2021 at OPD dental clinics was 10,318. From the total, 51% of completed RCTs were carried out at Type 1 OPD dental clinics.

Fig. 3.34 (a): Distribution of the percentage of Scalings carried out at OPD dental clinics in 2020 according to types of OPD dental clinics



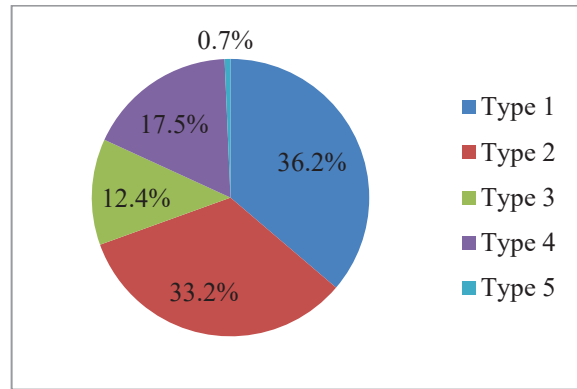
In Sri Lanka, the total number of Scalings carried out in the year 2020 at OPD dental clinics was 83,979. From the total, 45.5% of Scalings were carried out at Type 2 OPD dental clinics, while 3.6% of Scalings were carried out in mobile dental clinics.

Fig. 3.34 (b): Distribution of the percentage of Scalings carried out at OPD dental clinics in 2021 according to types of OPD dental clinics



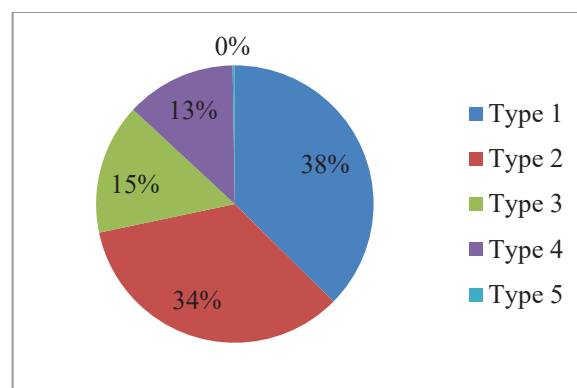
In Sri Lanka, the total number of Scalings carried out in the year 2021 at OPD dental clinics was 33,815. From the total, 50% of Scalings were carried out at Type 2 OPD dental clinics, while 1% of Scalings were carried out in mobile dental clinics.

Fig. 3.35 (a): Distribution of the percentage of Fluoride applications carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics



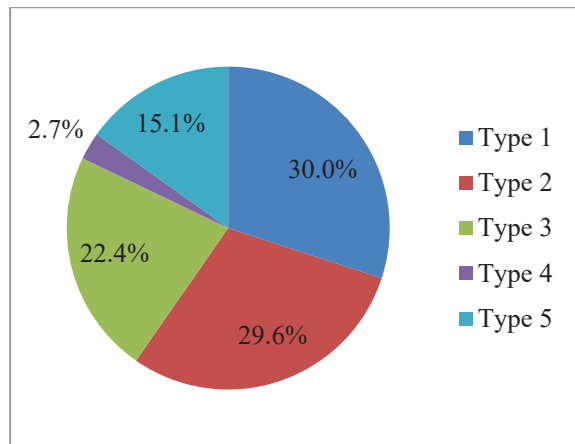
The total number of Fluoride applications carried out in the year 2020 at OPD dental clinics was 6,880. From the total, 36.2% of Fluoride applications were carried out at Type 1 OPD dental clinics. About 17.5% of Fluoride applications were done in Type 4 OPD dental clinics (Community Dental Clinics and dental clinics under the Medical Officer of Health) where pregnant mothers and children less than 3 years should be usually treated.

Fig. 3.35 (b): Distribution of the percentage of Fluoride applications carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



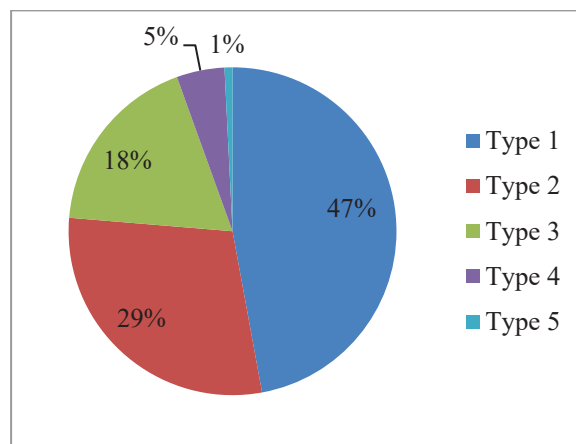
The total number of Fluoride applications carried out in the year 2021 at OPD dental clinics was 5,157. From the total, 38% of Fluoride applications were carried out in Type 1 OPD dental clinics. About 13% of Fluoride applications were done in Type 4 OPD dental clinics.

Fig. 3.36 (a): Distribution of the percentage of Fissure Sealant applications carried out at OPD dental clinics in the year 2020 according to types of OPD dental clinics



The total number of Fissure Sealant applications carried out in the year 2020 at OPD dental clinics was 7,528. Out of the total, 30.0 % of Fissure Sealant applications were carried out at Type 1 OPD dental clinics, while only 22.4% of Fissure Sealant applications were done in Type 3 (Adolescent Dental Clinics) where school children should be usually treated.

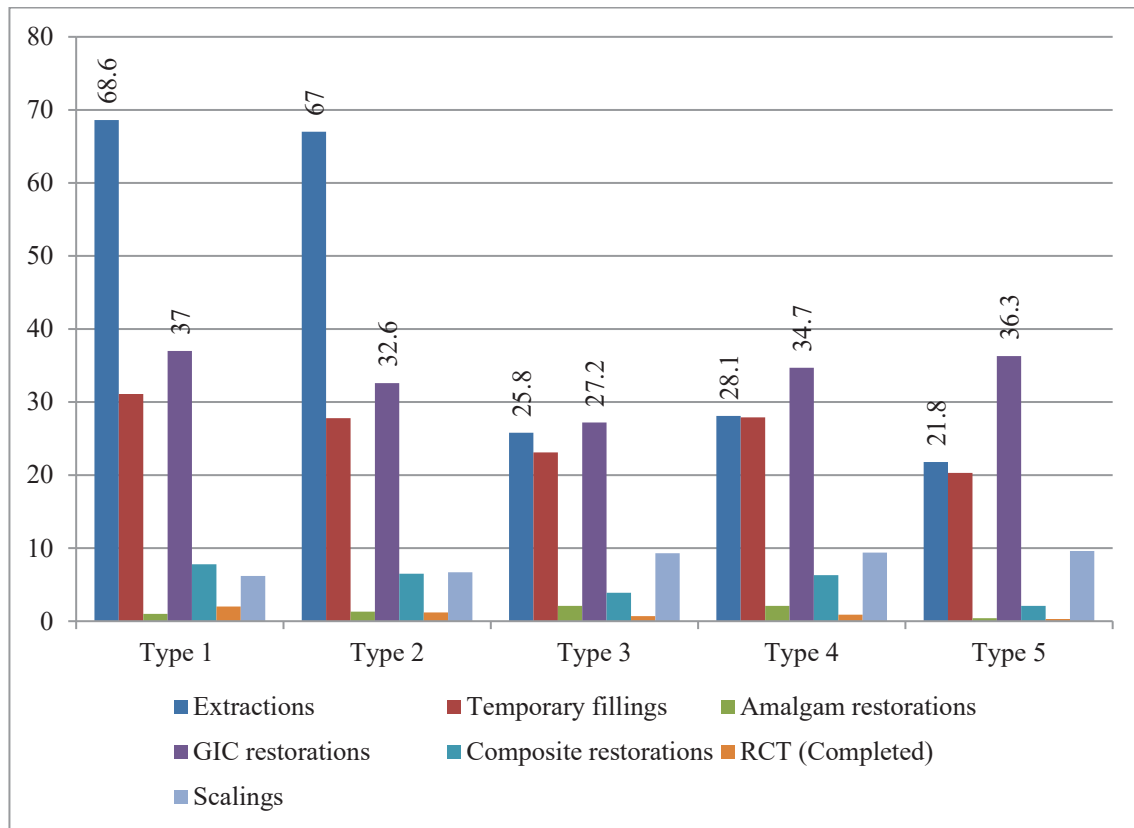
Fig. 3.36 (b): Distribution of the percentage of Fissure Sealant applications carried out at OPD dental clinics in the year 2021 according to types of OPD dental clinics



The total number of Fissure Sealant applications carried out in the year 2021 at OPD dental clinics was 4,973. Out of the total, 47 % of Fissure Sealant applications were carried out at Type 1 OPD dental clinics, while only 18% of Fissure Sealant applications were carried out in Adolescent Dental Clinics.

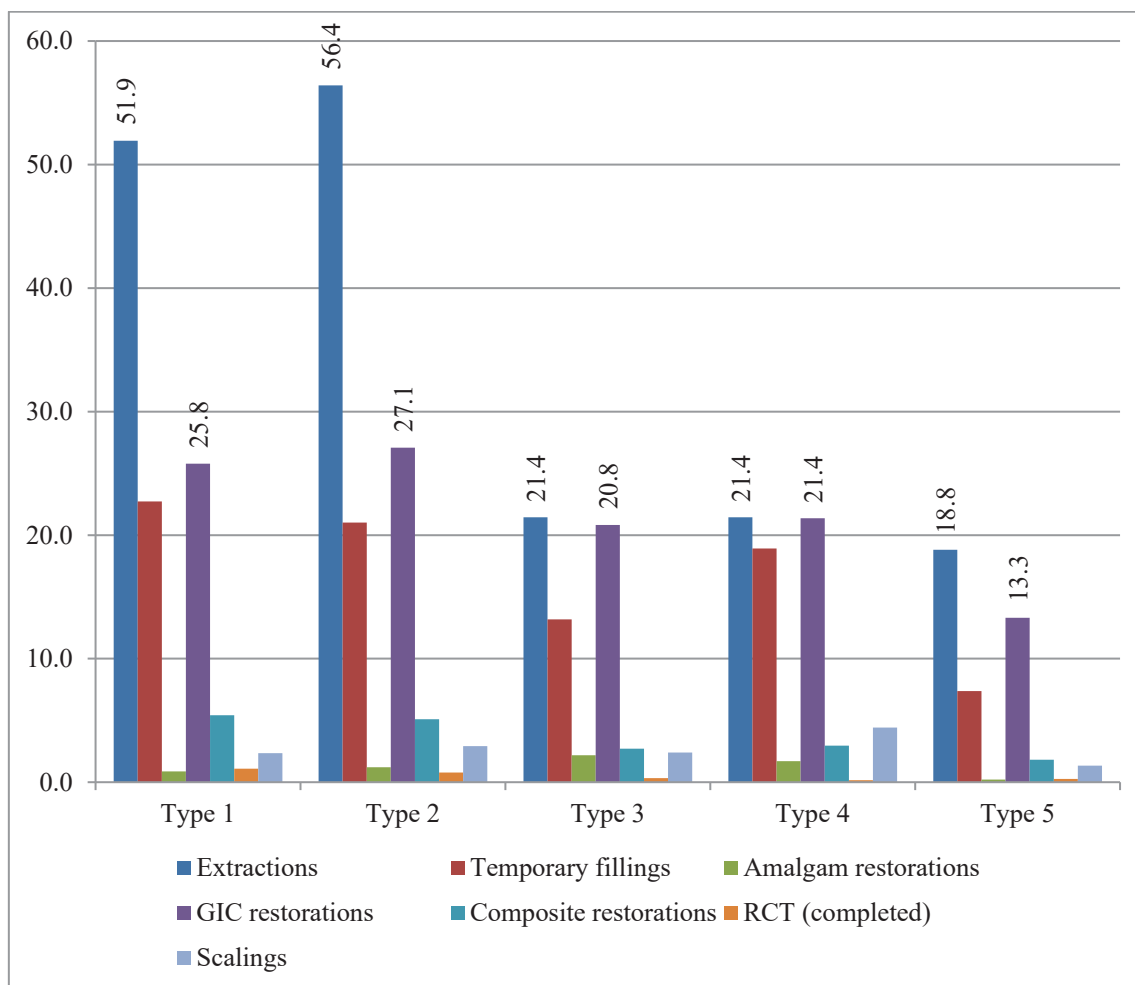
Tables 3.6 (a), 3.6 (b) and figures 3.37 (a), 3.37 (b) explain the monthly average numbers of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health, Sri Lanka in the years 2020 and 2021 according to the types of OPD dental clinics.

Fig. 3.37 (a): Monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2020 according to types of OPD dental clinics



Extractions were the most common type of treatment carried out in Type 1 and Type 2 OPD dental clinics, while in Type 3, 4 and 5 OPD dental clinics, GIC restorations were the commonest type of treatment in the year 2020. GIC restorations were the second most common treatment modality in Type 1 and Type 2 OPD dental clinics. Extractions were reported as the second most common type of treatment in Type 3, 4 and 5 OPD dental clinics.

Fig. 3.37 (b): Monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in the year 2021 according to types of OPD dental clinics



Extractions were the commonest type of treatment carried out in all types of OPD dental clinics followed by GIC restorations, except in Type 4 OPD dental clinics in the year 2021. In Type 4 OPD dental clinics both extractions and GIC restorations were carried out in almost equal manner. Temporary fillings were reported as the third most common type of treatment in all types of OPD dental clinics in Sri Lanka.

Table 3.6 (a): Total number and monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in 2020 according to types of OPD dental clinics

Type of OPD dental clinic	Type 1	Type 2	Type 3	Type 4	Type 5	Sri Lanka
Total Extractions	331,548	372,830	23,842	13,144	6,815	748,179
Monthly average Extractions per dental surgeon	68.6	67.0	25.8	28.1	21.8	61.8
Total Temporary fillings	150,529	154,623	21,317	13,036	6,318	345,823
Monthly average Temporary fillings per dental surgeon	31.1	27.8	23.1	27.9	20.3	28.6
Total Amalgam restorations	4,778	7,385	1,916	1,004	111	15,194
Monthly average Amalgam restorations per dental surgeon	1.0	1.3	2.1	2.1	0.4	1.3
Total GIC restorations	178,980	181,683	25,156	16,252	11,334	413,405
Monthly average GIC restorations per dental surgeon	37.0	32.6	27.2	34.7	36.3	34.1
Total Composite restorations	37,894	36,445	3,638	2,942	660	81,579
Monthly average Composite restorations per dental surgeon	7.8	6.5	3.9	6.3	2.1	6.7
Total RCT (Completed)	9,685	6,539	627	427	81	17,359
Monthly average RCT (Completions) per dental surgeon	2.0	1.2	0.7	0.9	0.3	1.4
Total Scalings	29,806	37,484	8,554	4,415	3,000	83,259
Monthly average Scalings per dental surgeon	6.2	6.7	9.3	9.4	9.6	6.9

The highest monthly average number of Extractions (68.6) was performed by an OPD dental surgeon working in Type 1 OPD dental clinics. The least monthly average number of Extractions (21.8) was performed by a single OPD dental surgeon working in mobile dental clinics (Type 5). The highest monthly average numbers of Temporary fillings, GIC restorations, Composite restorations and RCTs were performed by an OPD dental surgeon attached to Type 1 OPD dental clinics.

The highest monthly average number of Amalgam restorations was done by an OPD dental surgeon attached to Type 3 and Type 4 OPD dental clinics which was 2.1. The highest monthly average number of Scalings (9.6) was performed by a single OPD dental surgeon attached to mobile dental clinics (Type 5).

Table 3.6 (b): Total number and monthly average number of selected treatments carried out by a single OPD dental surgeon under the Ministry of Health in 2021 according to types of OPD dental clinics

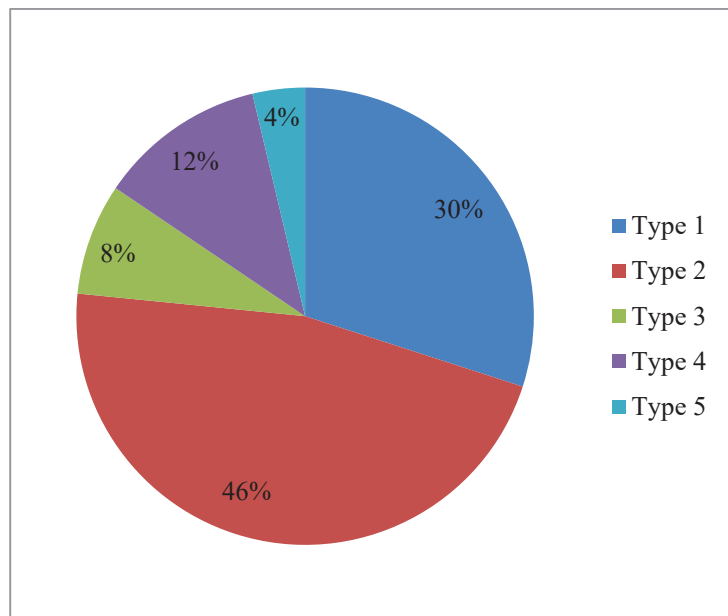
Types of OPD dental clinics	Type 1	Type 2	Type 3	Type 4	Type 5	Sri Lanka
Total Extractions	251,758	324,946	23,159	12,353	5,870	618,086
Monthly average Extractions per dental surgeon	51.9	56.4	21.4	21.4	18.8	49.1
Total Temporary fillings	110,184	121,090	14,234	10,900	2,303	258,711
Monthly average Temporary fillings per dental surgeon	22.7	21.0	13.2	18.9	7.4	20.6
Total Amalgam restorations	4,215	6,985	2,361	977	68	14,606
Monthly average Amalgam restorations per dental surgeon	0.9	1.2	2.2	1.7	0.2	1.2
Total GIC restorations	124,991	156,016	22,484	12,305	4,154	319,950
Monthly average GIC restorations per dental surgeon	25.8	27.1	20.8	21.4	13.3	25.4
Total Composite restorations	26,255	29,367	2,933	1,704	567	60,826
Monthly average Composite restorations per dental surgeon	5.4	5.1	2.7	3.0	1.8	4.8
Total RCT (Completed)	5,272	4,516	357	92	81	10,318
Monthly average RCT (Completions) per dental surgeon	1.1	0.8	0.3	0.2	0.3	0.8
Total Scalings	11,414	16,834	2,598	2,550	419	33,815
Monthly average Scalings per dental surgeon	2.4	2.9	2.4	4.4	1.3	2.7

The highest monthly average number of Extractions (56.4), GIC restorations (27.1) and Scalings (2.9) were performed by an OPD dental surgeon working in Type 2 OPD dental clinics. The least monthly average number of Extractions (18.8) was performed by a single OPD dental surgeon working in mobile dental clinics. The highest monthly average number of Temporary fillings (22.7), Composite restorations (5.4) and RCTs (1.1) were performed by an OPD dental surgeon attached to Type 1 OPD dental clinics.

The highest monthly average number of Amalgam restorations was done by an OPD dental surgeon attached to Type 3 OPD dental clinics, which was 2.2.

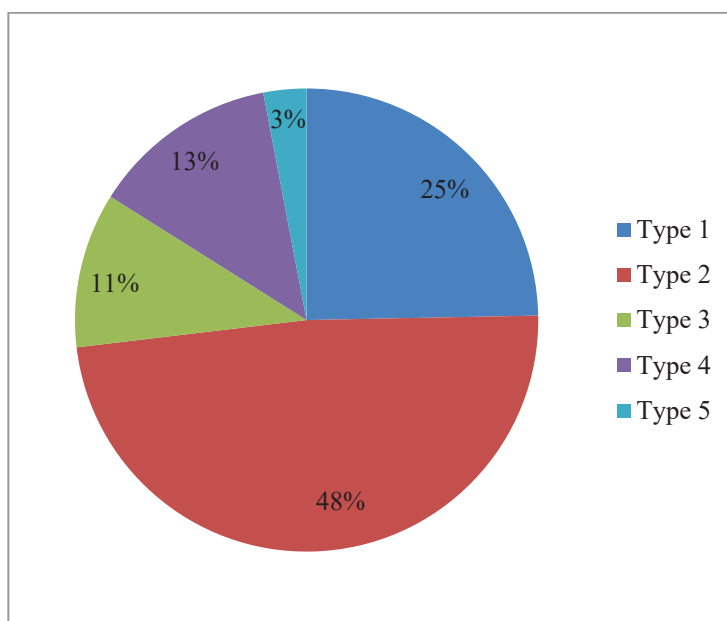
Figures 3.38 (a), 3.38 (b), 3.39 (a), 3.39 (b), 3.40 (a) and 3.40 (b) explain the percentages of special groups of patients managed at OPD dental clinics under the Ministry of Health, Sri Lanka in the year 2020 and 2021 according to types of OPD dental clinics.

Fig. 3.38 (a): Distribution of the percentage of pregnant mothers managed at OPD dental clinics in 2020 according to types of OPD dental clinics



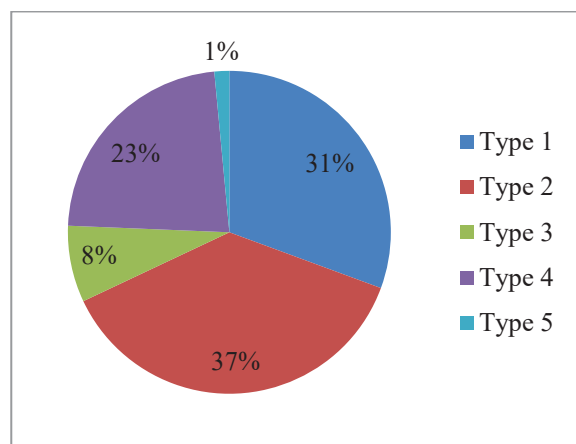
In Sri Lanka, the total number of pregnant mothers managed in the year 2020 at OPD dental clinics was 206,418. From the total, 46% of pregnant mothers were managed at Type 2 OPD dental clinics. Only 12% of the pregnant mothers were managed at Type 4 OPD dental clinics where pregnant mothers should be treated usually.

Fig. 3.38 (b): Distribution of the percentage of pregnant mothers managed at OPD dental clinics in 2021 according to types of OPD dental clinics



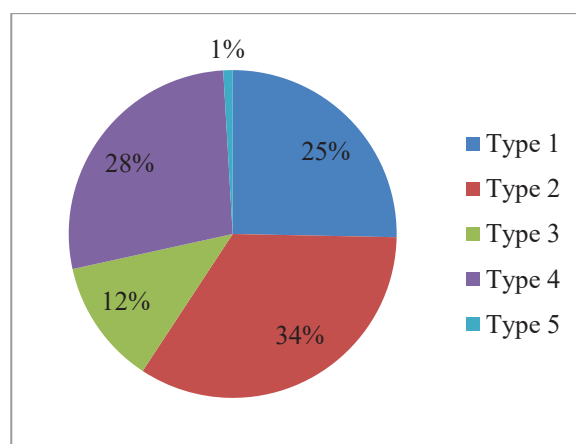
In Sri Lanka, the total number of pregnant mothers managed in the year 2021 at OPD dental clinics was 161,049. From the total, 48% of pregnant mothers were managed at Type 2 OPD dental clinics. Only 13% of the pregnant mothers were managed at Type 4 OPD dental clinics.

Fig. 3.39 (a): Distribution of the percentage of children less than 3 years managed at OPD dental clinics in the year 2020 according to types of OPD dental clinics



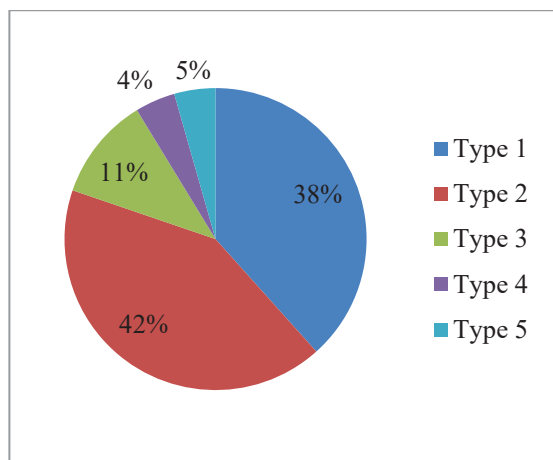
The total number of children less than 3 years managed in Sri Lanka during the year 2020 at OPD dental clinics was 34,903. From the total, 47% of children less than 3 years were managed at Type 2 OPD dental clinics.

Fig. 3.39 (b): Distribution of the percentage of children less than 3 years managed at OPD dental clinics in the year 2021 according to types of OPD dental clinics



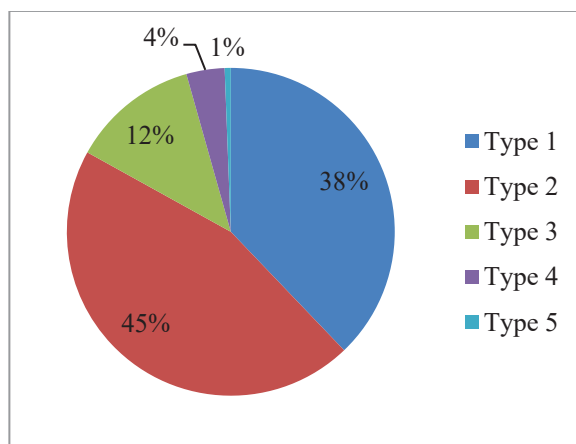
The total number of children less than 3 years managed in Sri Lanka during the year 2021 at OPD dental clinics was 31,164. From the total, 34% of children less than 3 years were managed at Type 2 OPD dental clinics while only 1% were managed at mobile dental clinics (Type 5).

Fig. 3.40 (a): Distribution of the percentage of adolescents managed at OPD dental clinics in the year 2020 according to types of OPD dental clinics



The total number of adolescents managed in the year 2020 at OPD dental clinics was 179,577. From the total, 42% of adolescents were managed at Type 2 OPD dental clinics. Only 11% were managed at ADCs (Type 3) where school children should be treated usually.

Fig. 3.40 (b): Distribution of the percentage of adolescents managed at OPD dental clinics in the year 2021 according to types of OPD dental clinics



The total number of adolescents managed in the year 2021 at OPD dental clinics was 134,521. From the total, 45% were managed at Type 2 OPD dental clinics. Only 12% were managed at ADCs (Type 3).

Tables 3.7 (a), 3.7 (b) and figures 3.4 (a), 3.4 (b) explain the monthly average numbers of special groups of patients managed in OPD dental clinics under the Ministry of Health, Sri Lanka in the year 2020 and 2021, according to types of OPD dental clinics.

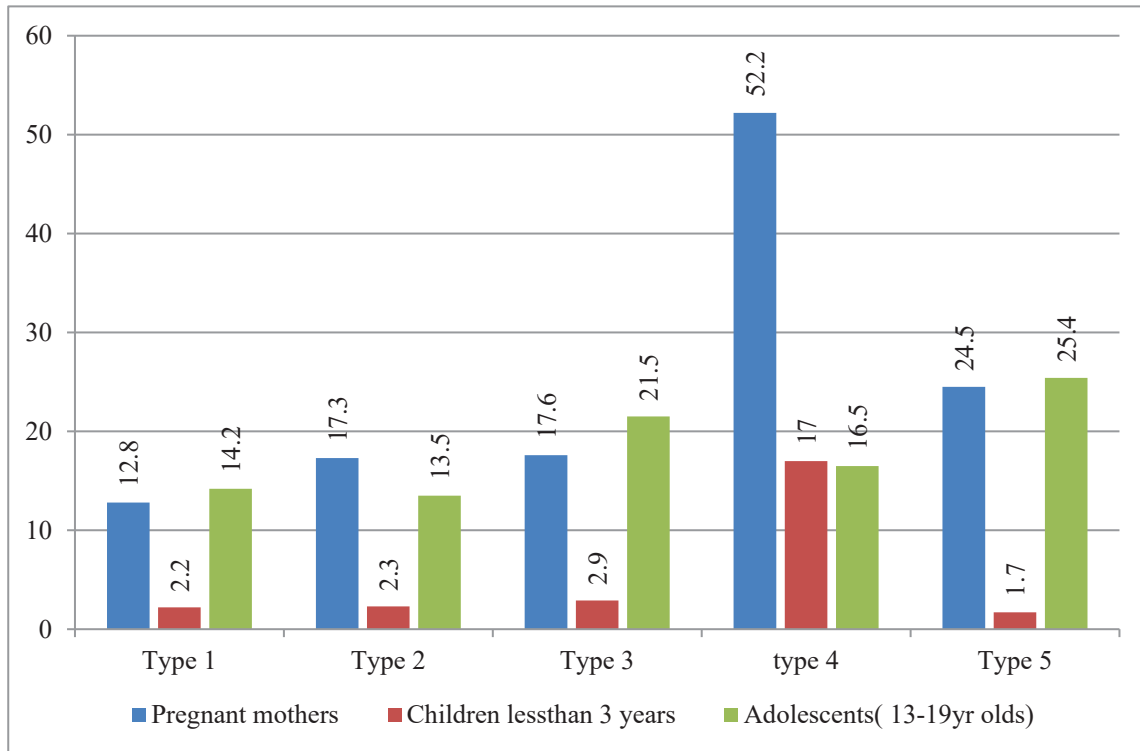
Table 3.7 (a): Monthly average number of special groups of patients managed by a single OPD dental surgeon under the Ministry of Health in the year 2020 according to types of OPD dental clinics

	Type 1	Type 2	Type 3	Type 4	Type 5	Sri Lanka
Monthly average number of pregnant mothers per OPD dental clinic	12.8	17.3	17.6	52.2	24.5	17.0
Monthly average number of children less than 3 years per OPD dental clinic	2.2	2.3	2.9	17.0	1.7	2.9
Monthly average number of adolescents per OPD dental clinic	14.2	13.5	21.5	16.5	25.4	14.8

Table 3.7 (b): Monthly average number of special groups of patients managed by a single OPD dental surgeon under the Ministry of Health in the year 2021 according to types of OPD dental clinics

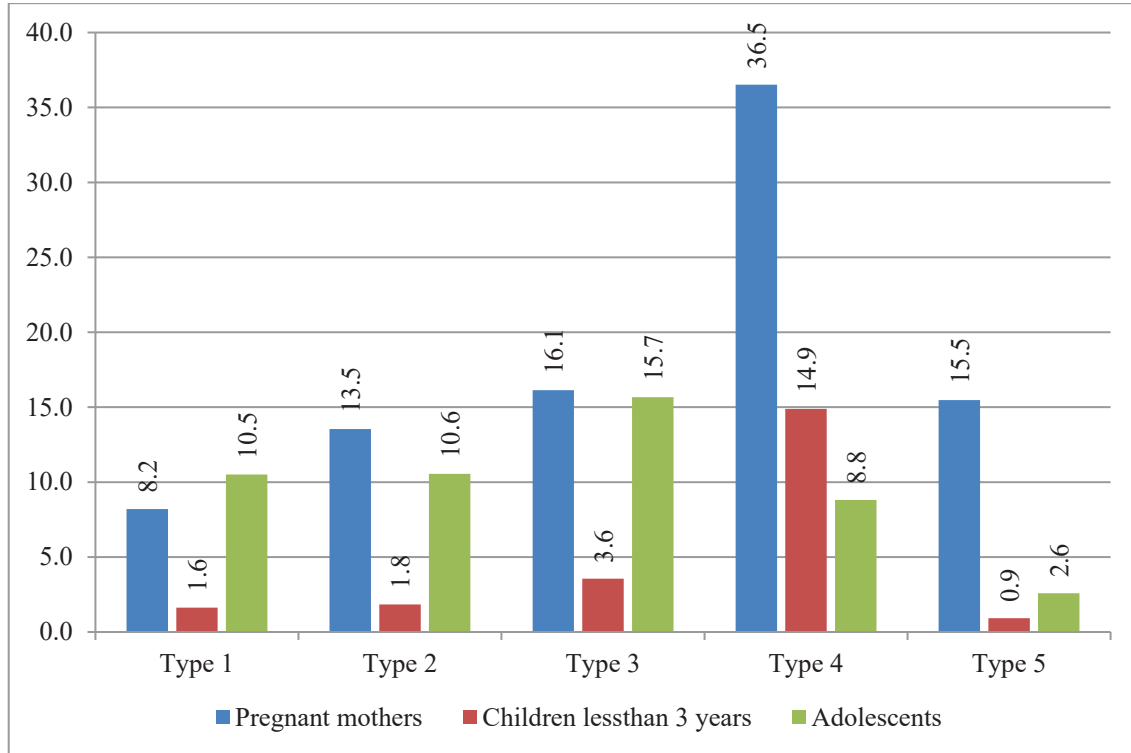
	Type 1	Type 2	Type 3	Type 4	Type 5	Sri Lanka
Monthly average number of pregnant mothers per OPD dental clinic	8.2	13.5	16.1	36.5	15.5	12.8
Monthly average number of children less than 3 years per OPD dental clinic	1.6	1.8	3.6	14.9	0.9	2.5
Monthly average number of adolescents per OPD dental clinic	10.5	10.6	15.7	8.8	2.6	10.7

Fig. 3.41 (a): Monthly average number of special groups of patients managed per OPD dental surgeon in the year 2020 according to types of OPD dental clinics



In the year 2020, the highest monthly average number of pregnant mothers was managed (52.2) in Type 4 OPD dental clinics. Managing children less than 3 years at an OPD dental clinic was comparatively low in all types of OPD clinics except Type 4 clinics which had a value of 17 per month. The monthly average number of adolescents managed at OPD dental clinics was the highest (25.4) in mobile dental clinics (Type 5) which was higher compared to ADCs (21.5).

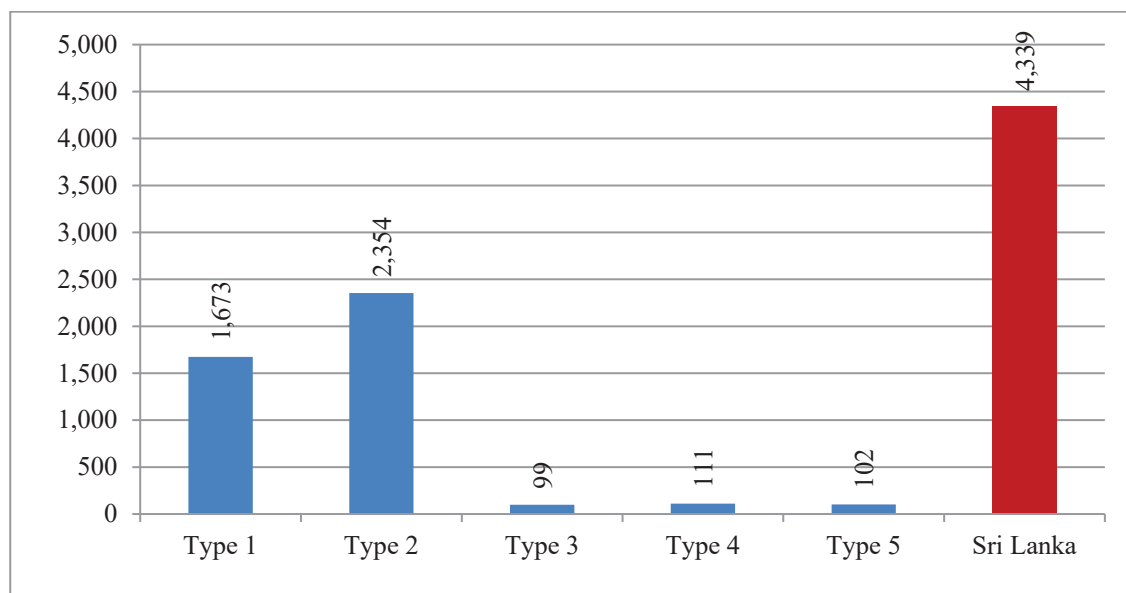
Fig. 3.41 (b): Monthly average number of special groups of patients managed per OPD dental surgeon in the year 2021 according to types of OPD dental clinics



In the year 2021, the highest monthly average number of pregnant mothers was managed (36.5) in Type 4 OPD dental clinics. Managing children less than 3 years at an OPD dental clinic was low in all types of OPD dental clinics compared to Type 4 clinics which had the highest value of 14.9. The monthly average number of adolescents managed at OPD dental clinics was highest in Type 3 OPD dental clinics with a value of 15.7.

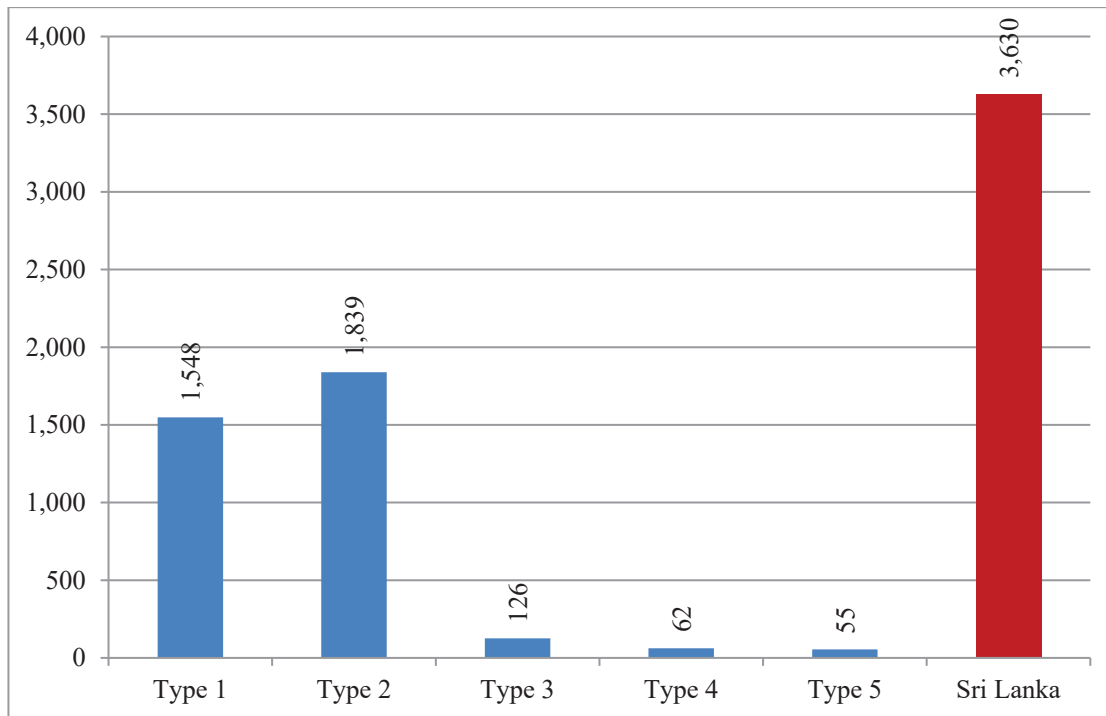
Figure 3.42 explains the total number of OPMD cases reported by OPD dental clinics under the Ministry of Health, Sri Lanka in the year 2020 and 2021 according to types of OPD dental clinics.

Fig. 3.42 (a): Total number of OPMD cases reported by OPD dental clinics under the Ministry of Health in the year 2020 according to types of OPD dental clinics



Out of 4,339 OPMD cases reported by OPD dental clinics in 2020 in Sri Lanka, the highest number (2,354 OPMD cases) was reported in Type 2 OPD dental clinics, while it was very low in Type 3, 4 and Type 5 OPD dental clinics.

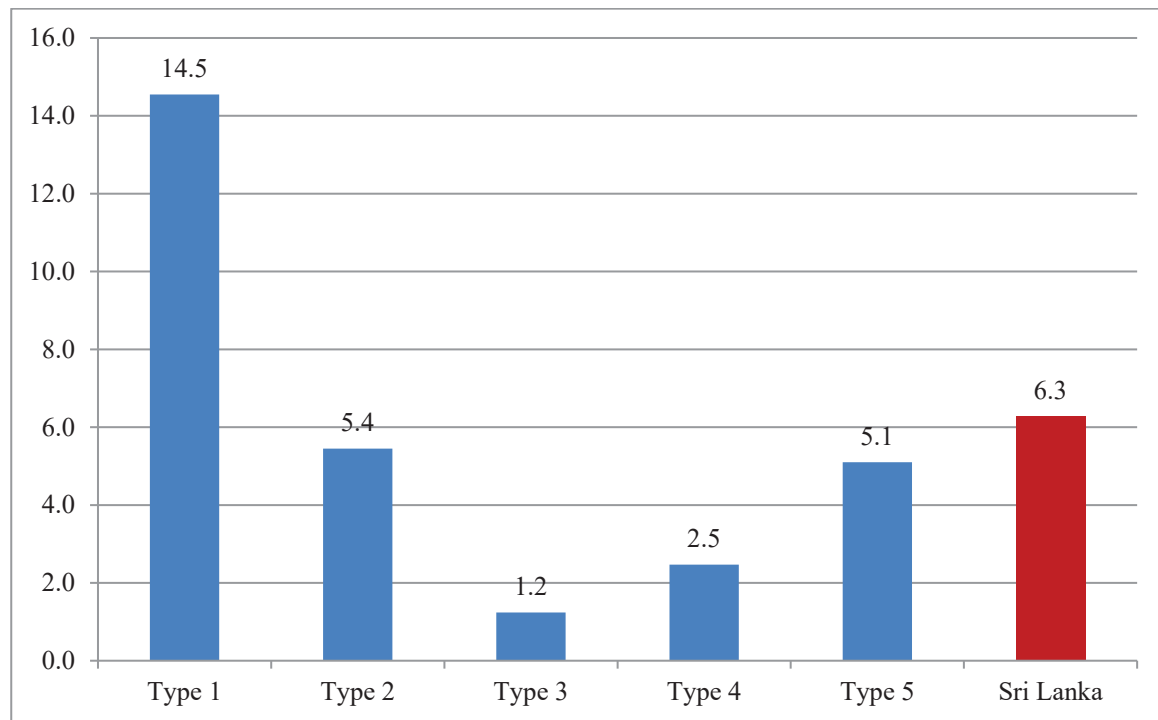
Fig. 3.42 (b): Total number of OPMD cases reported by OPD dental clinics under the Ministry of Health in the year 2021 according to types of OPD dental clinics



Out of 3,630 OPMD cases reported by OPD dental clinics in 2021, the highest number (1,839 OPMD cases) was reported in Type 2 OPD dental clinics, while the lesser number of OPMD cases were reported in Type 3, 4 and Type 5 OPD dental clinics.

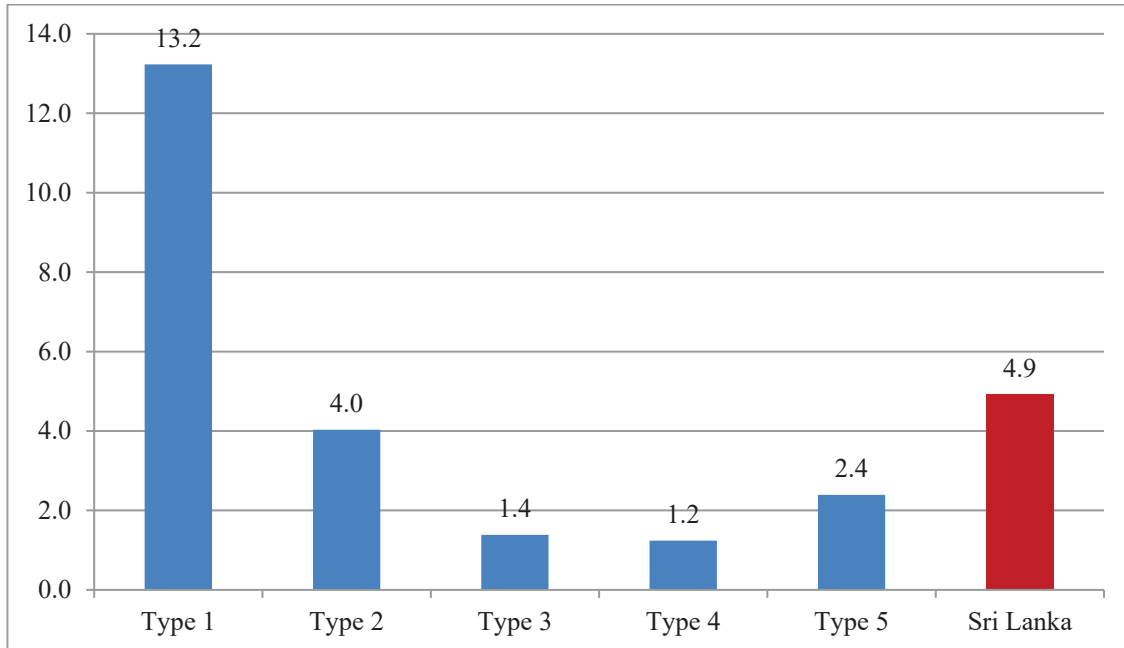
Figures 3.43 (a) and 3.43 (b) explain the annual average number of OPMD cases reported in a single OPD dental clinic under the Ministry of Health, Sri Lanka in the year 2020 and 2021 according to types of OPD dental clinics.

Fig. 3.43 (a): Annual average number of OPMD cases reported in a single OPD dental clinic in the year 2020 according to types of OPD dental clinics



The annual average number of OPMD cases identified in one OPD dental clinic throughout the island in 2020 was 6.3. On average 14.5 OPMD cases were identified in Type 1 OPD dental clinics followed by 5.4 OPMD cases in Type 2 OPD dental clinics.

Fig. 3.43 (b): Annual average number of OPMD cases reported in a single OPD dental clinic in the year 2021 according to types of OPD dental clinics

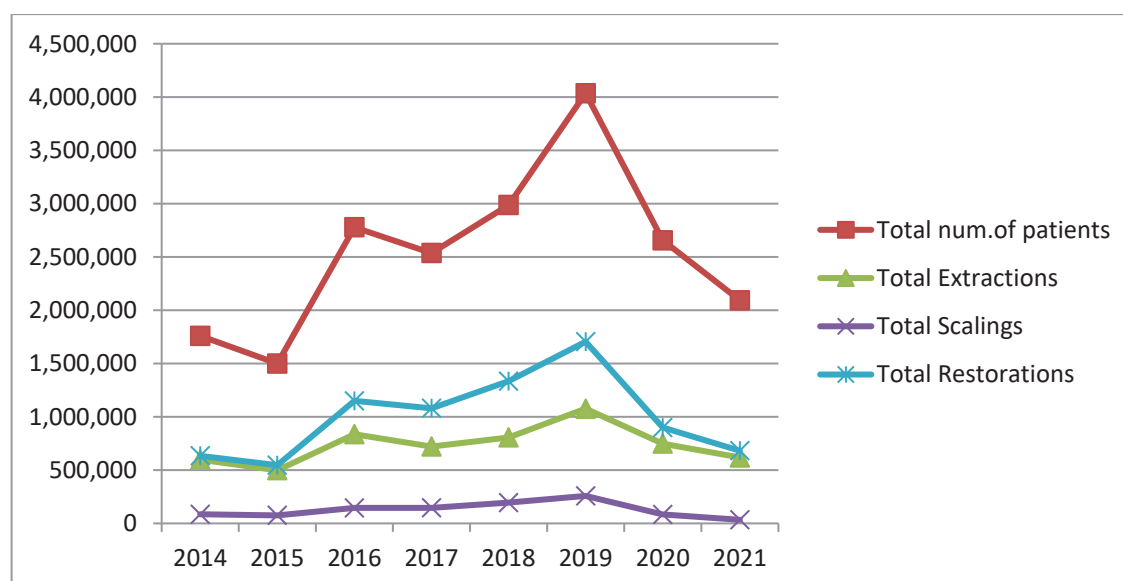


The annual average number of OPMD cases identified in one OPD dental clinic in Sri Lanka for the year 2021 was 4.9. On average highest value of 13.2 OPMD cases was identified in Type 1 OPD dental clinics, while the second highest value (4), was reported in Type 2 OPD dental clinics.

3.5 Trend analysis of dental treatments carried out by OPD dental surgeons

Figures 3.44 and 3.45 explain the statistics related to dental treatments carried out by OPD dental surgeons under the Ministry of Health, Sri Lanka from 2014 to 2021 according to types of treatments and types of restorations respectively.

Fig. 3.44: Statistics related to dental treatments carried out by OPD dental surgeons under the Ministry of Health from 2014 to 2021



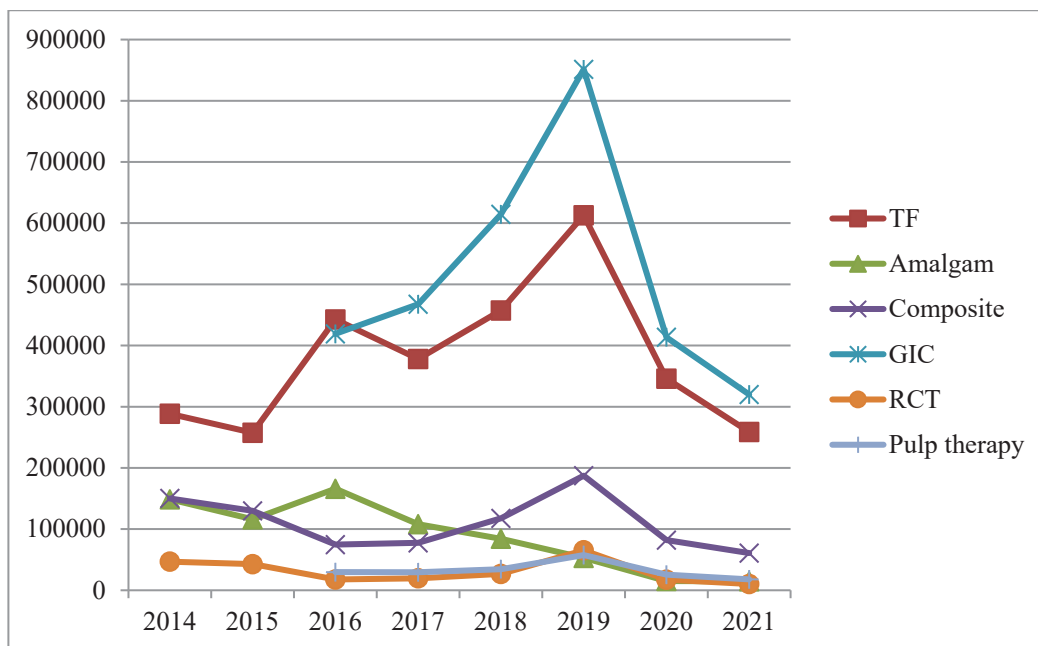
Restorations-This includes Temporary fillings, Amalgam restorations, Composite restorations, GIC restorations, RCT and Pulp therapy

Data from Annual Health Bulletin-2014, 2015, 2016, 2017

Data from Regional Dental Surgeons in hospitals under the provincial council and directly from dental surgeons in hospitals under the line ministry-2018, 2019, 2020, 2021

A total of 2,655,120 patients attended OPD dental clinics in 2020 and 2,092,265 patients during the year 2021. These figures show some downfall in patient flow compared to an upward trend from 2017 to 2019. The total number of Extractions performed has increased from 597,095 in 2014 to 1,076,409 in 2019, but it was reduced to the value of 618,086 during the year 2021. The total number of restorations done has increased from 587,287 in 2014 to 1,704,482 in 2019 but it also shows the same downward trend with the value of 682,252 in the year 2021. The total number of Scalings was also fallen from 257,922 in 2019 to 33,815 in 2021.

Fig. 3.45: Dental treatments carried out by OPD dental surgeons under the Ministry of Health according to types of Restorations from 2014 to 2021



Data from Annual Health Bulletin 2014, 2015, 2016, 2017

Data from Regional Dental Surgeons in hospitals under the provincial council and directly from dental surgeons in hospitals under the line ministry 2018, 2019, 2020, and 2021

According to the available statistics, the number of Temporary fillings and GIC restorations carried out has considerably increased from 2016 to 2019 but again reduced in 2020 and 2021. The number of Temporary fillings done had been doubled from 2014 to 2019. But there was a considerable reduction in 2020 and 2021.

The number of Composite restorations, Amalgam restorations, Root Canal Treatment and Deciduous Pulp therapy had not changed much from 2014 to 2019. Compared to 2019, the number of fillings done in 2020 and 2021 has shown a decreasing trend with the usual pattern as in all other treatment types.

(Annual Health Bulletin data from 2014 to 2017 were compiled only from monthly returns sent by dental surgeons to the Medical Statistics Unit of the Ministry of Health. Therefore, it was passive surveillance. But in 2018, Regional Dental Surgeons were requested to collect monthly returns from the dental surgeons of their districts and were asked to send compiled data- to Research and Surveillance Unit, IOH Maharagama. Monthly returns of the dental surgeons under the line ministry hospitals were directly collected and compiled by Research and Surveillance Unit, IOH Maharagama. Therefore, it was active surveillance)

Chapter 4

Statistics related to Specialized Oral Healthcare Services under the Ministry of Health, Sri Lanka during 2020 and 2021

The duties and the functions of these units have been described comprehensively in ‘**Oral Health Report 2018**’.

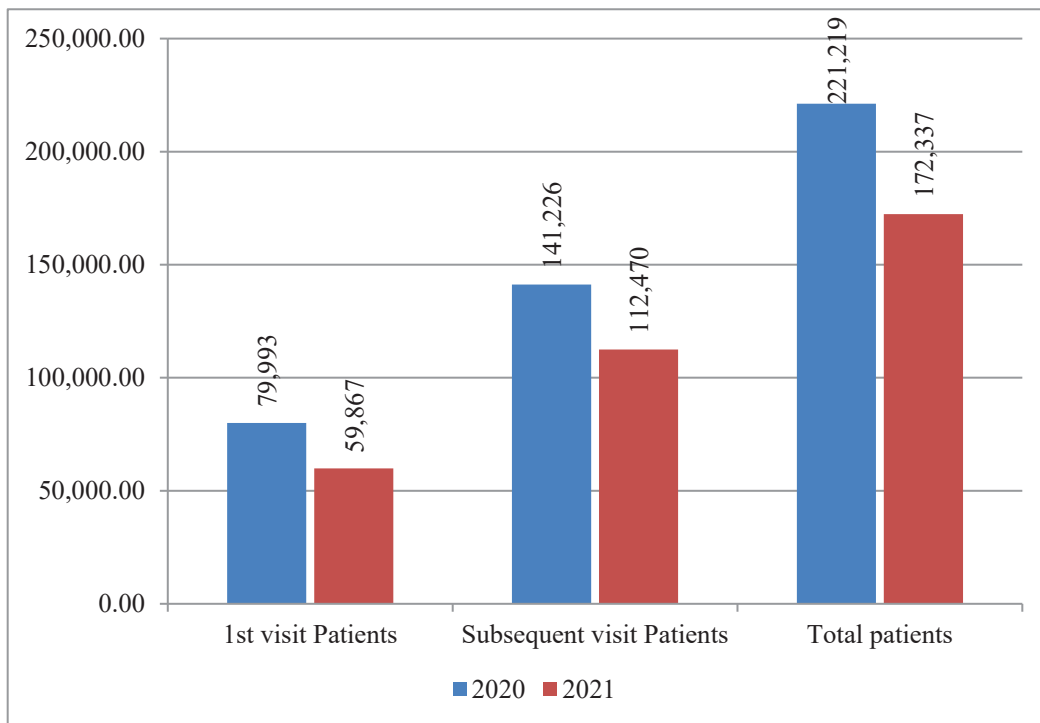
Types of specialized oral healthcare services

- Oral and Maxillofacial Surgery
- Restorative Dentistry
- Orthodontics
- Community Dentistry
- Oral Pathology

4.1 Oral and Maxillofacial Surgery

The total numbers of patients visited and managed at OMFS clinics in Sri Lanka during the years 2020 and 2021 are explained in Figure 4.1.

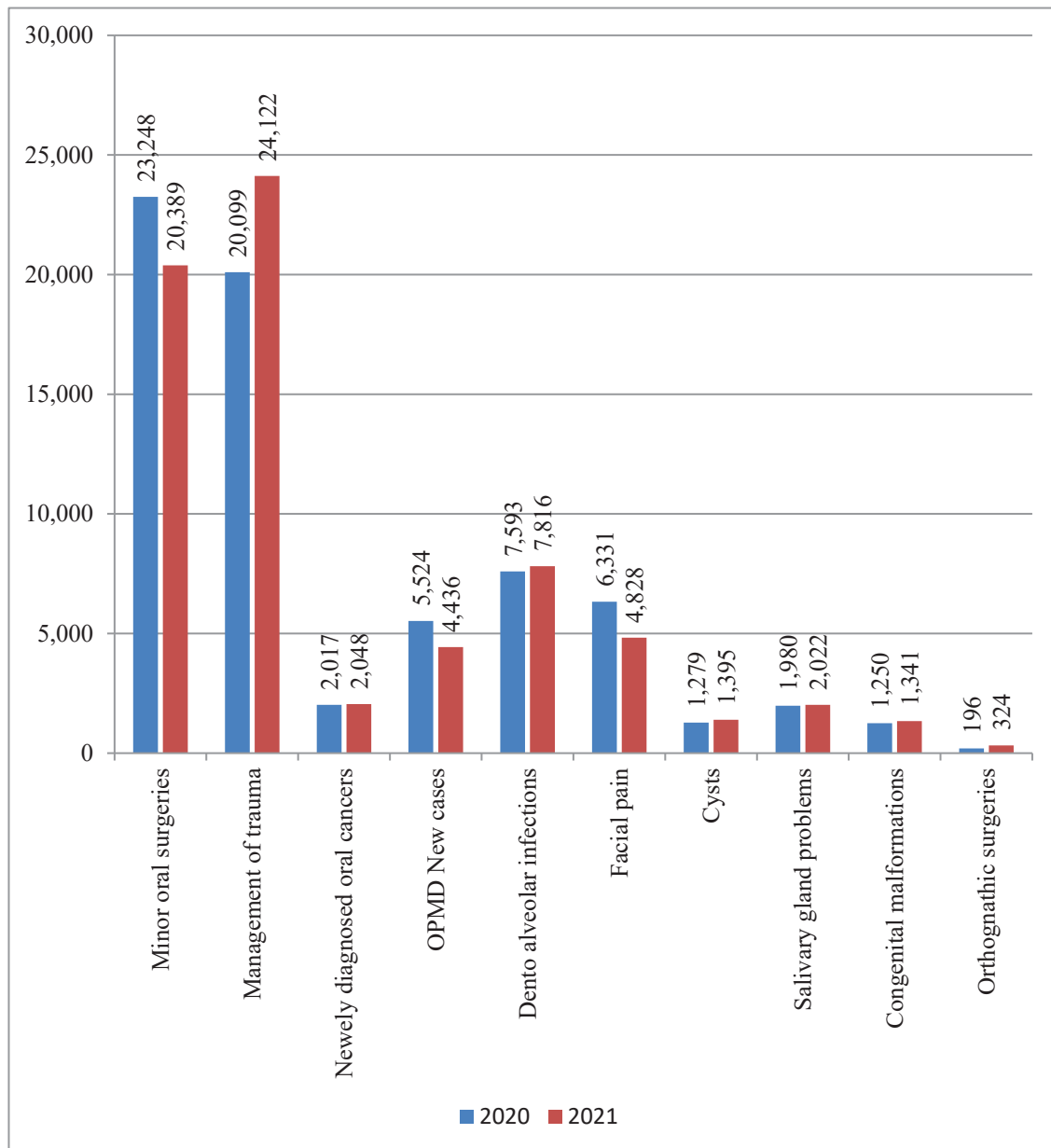
Fig. 4.1: Total numbers of patients visited and managed at OMFS clinics in Sri Lanka during the years 2020 and 2021



During the year 2020 total of 221,219 patients visited OMFS clinics across the island, but that value was reduced to 172,337 in the year 2021. Out of the total, 79,993 patients were reported as 1st visit patients in 2020. In 2021, from the total number of patients, 59,867 patients were reported as 1st visit patients.

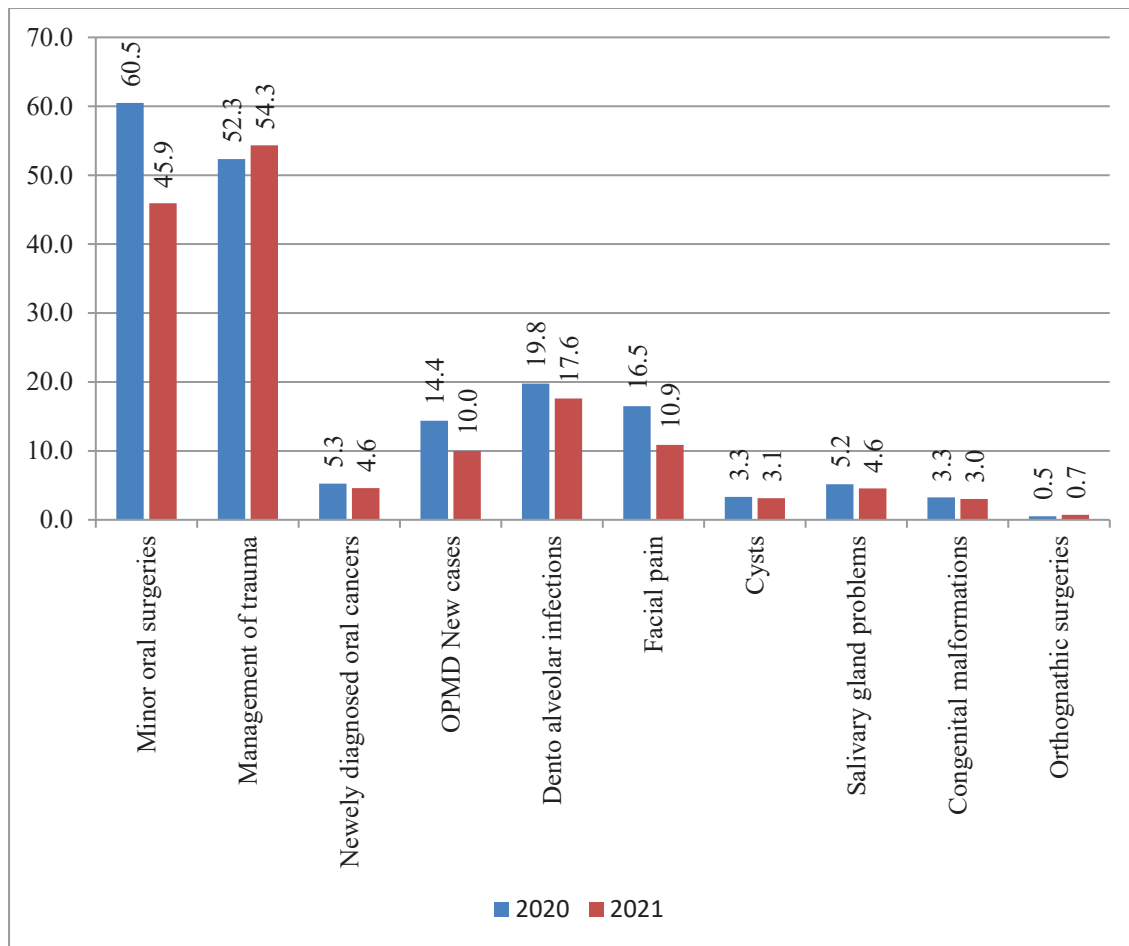
The total numbers of treatments carried out from the selected treatment categories at OMFS clinics in Sri Lanka during the years 2020 and 2021 are explained in Figure 4.2.

Fig. 4.2: Total numbers of treatments carried out in OMFS clinics in Sri Lanka during the years 2020 and 2021 according to types of treatments



The average numbers of treatments carried out in selected treatment categories per month per single OMFS clinic in Sri Lanka in 2020 and 2021 are explained in Figure 4.3.

Fig. 4.3: Monthly average numbers of treatments carried out per single OMFS clinic in Sri Lanka during the years 2020 and 2021 according to types of treatments



The commonest type of treatment carried out in OMFS clinics in Sri Lanka was Minor oral surgeries in the year 2020 with an average value of 60.5 per single OMFS clinic per month, followed by Trauma management with a monthly average value of 52.3.

In the year 2021, Trauma management was the commonest type of treatment category with a monthly average value of 54.3, followed by Minor oral surgeries with a monthly average value of 45.9. In both 2020 and 2021, Orthognathic surgeries were the least common, out of the selected treatment types per single OMFS clinic per month, with values of 0.5 and 0.7 respectively.

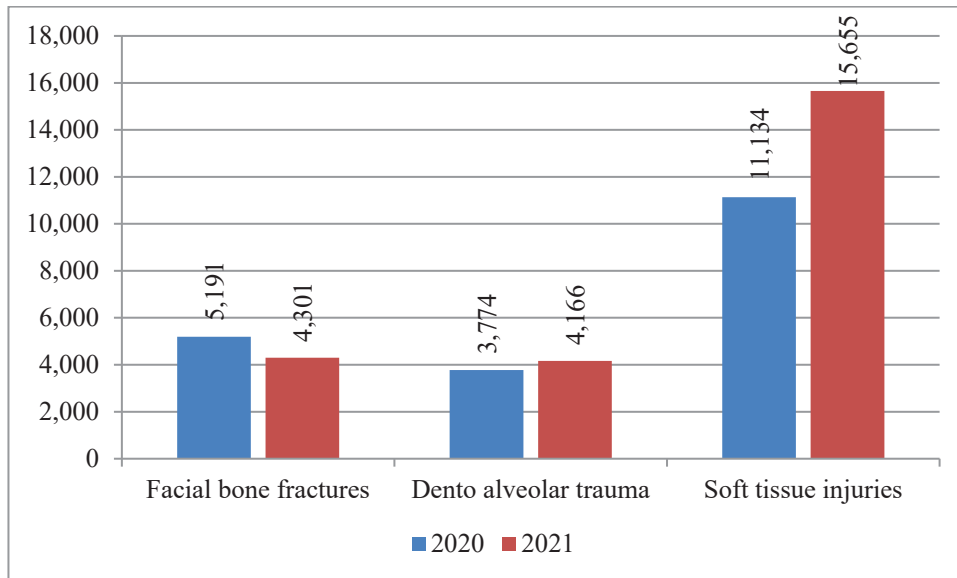
Table 4.1 further explains the total numbers of patients managed and treatments carried out according to the different treatment categories in OMFS clinics in Sri Lanka during the years 2020 and 2021.

Table 4.1: Numbers of patients managed according to different treatment categories at OMFS clinics in Sri Lanka during the years 2020 and 2021

Description		2020	2021
Extractions		15,250	15,088
Minor oral surgeries	Surgical removal of teeth	11,307	8,139
	Other minor oral surgeries	11,941	12,250
Management of trauma	Facial bone fractures	4,991	4,301
	Dento-alveolar Trauma	3,474	4,166
	Soft tissue injuries	10,646	15,655
Head and neck cancers	Newly diagnosed cases	2,017	2,048
	Patients managed surgically	1,939	1,812
	Oncology referrals	920	1,568
OPMD new cases	Leukoplakia	1,444	740
	Erythroplakia	500	563
	OSMF	1,608	1,368
	Erosive lichen planus	931	863
	Others	1,041	902
	Total	5,524	4,436
Biopsies		5,830	5,966
Number of restorations done		4,035	2,033
Root canal treatments completed		1,929	1,192
Scalings		901	436
Management of patients with	Benign tumours	1,246	1,531
	Dento-alveolar infections	7,593	7,816
	Patient with mucosal diseases	3,575	3,496
	Facial pain	6,331	4,828
	TMJ disorders	3,727	4,555
	Congenital malformations	1,250	1,341
	Cysts	1,279	1,395
	Salivary gland problems	1,980	2,022
Orthognathic surgeries performed		196	324
Plastic surgeries performed		536	389
Suture removal		8,520	4,060
Patients managed under GA/gas sedation		7,513	6,265
Inward patients managed		23,879	24,304
Medico-legal cases managed		10,165	9,473
1st visit patients		79,993	59,867
Subsequent visit patients		141,226	112,470
Total number of patients		221,219	172,337

Figure 4.4 explains the distribution of different types of Orofacial trauma managed in OMFS clinics in Sri Lanka during the years 2020 and 2021.

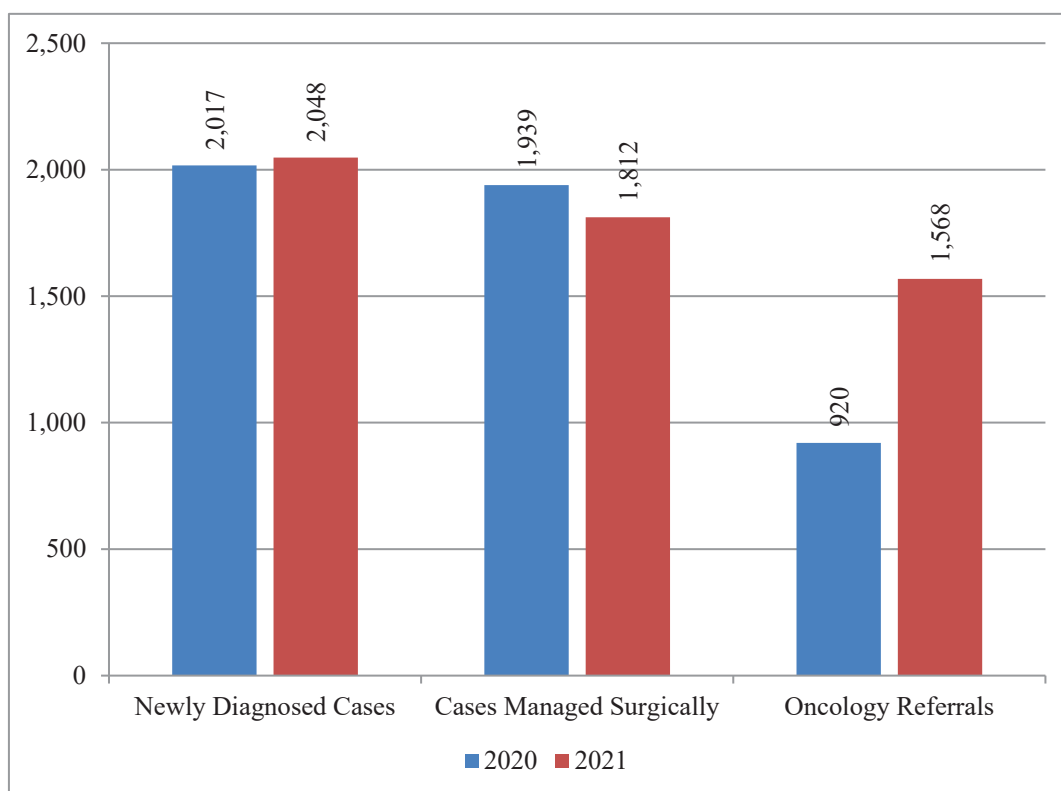
Fig. 4.4: Distribution of different types of Orofacial trauma managed at OMFS clinics in Sri Lanka during the years 2020 and 2021



In both years 2020 and 2021, the commonest type of Orofacial trauma managed at OMFS clinics was soft tissue injuries, but compared to the value of 11,134 in the year 2020, the year 2021 had a higher number of cases (15,655). Dento-alveolar trauma was reported as the least common type of Orofacial trauma with values of 3,774 in 2020 and 4,166 in 2021.

Figure 4.5 explains the presentation and management of Oral cancer at OMFS clinics in Sri Lanka during the years 2020 and 2021.

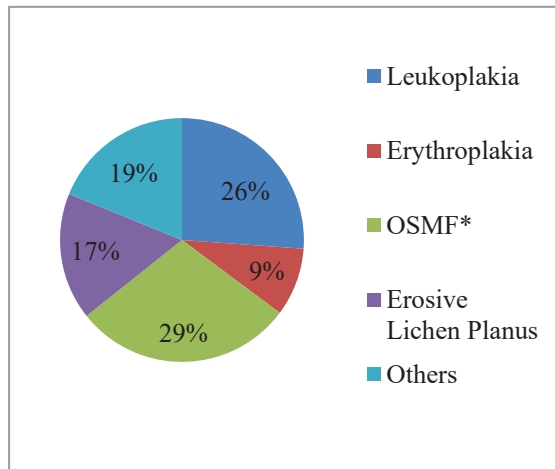
Fig. 4.5: Presentation and management of Oral cancer at OMFS clinics in Sri Lanka during the years 2020 and 2021



According to the data from OMFS clinics across the island, during 2020 and 2021, almost the same number of newly diagnosed Oral cancer cases were reported with values of 2,017 and 2,048 respectively. But in the year 2020, only 920 cases were referred for Oncological management, while 1,568 cases were referred during the year 2021.

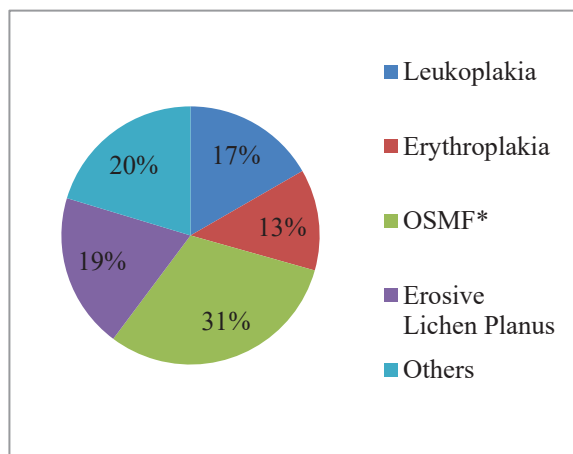
Figures 4.6 (a) and 4.6 (b) explain the presentation of different types of OPMD cases to OMFS clinics in Sri Lanka during the years 2020 and 2021.

Fig. 4.6 (a): Presentation of OPMD cases to OMFS clinics in Sri Lanka during the year 2020: according to types of OPMDs



* OSMF- Oral submucous Fibrosis.

Fig. 4.6 (b): Presentation of OPMD cases to OMFS clinics in Sri Lanka during the year 2021: according to types of OPMDs



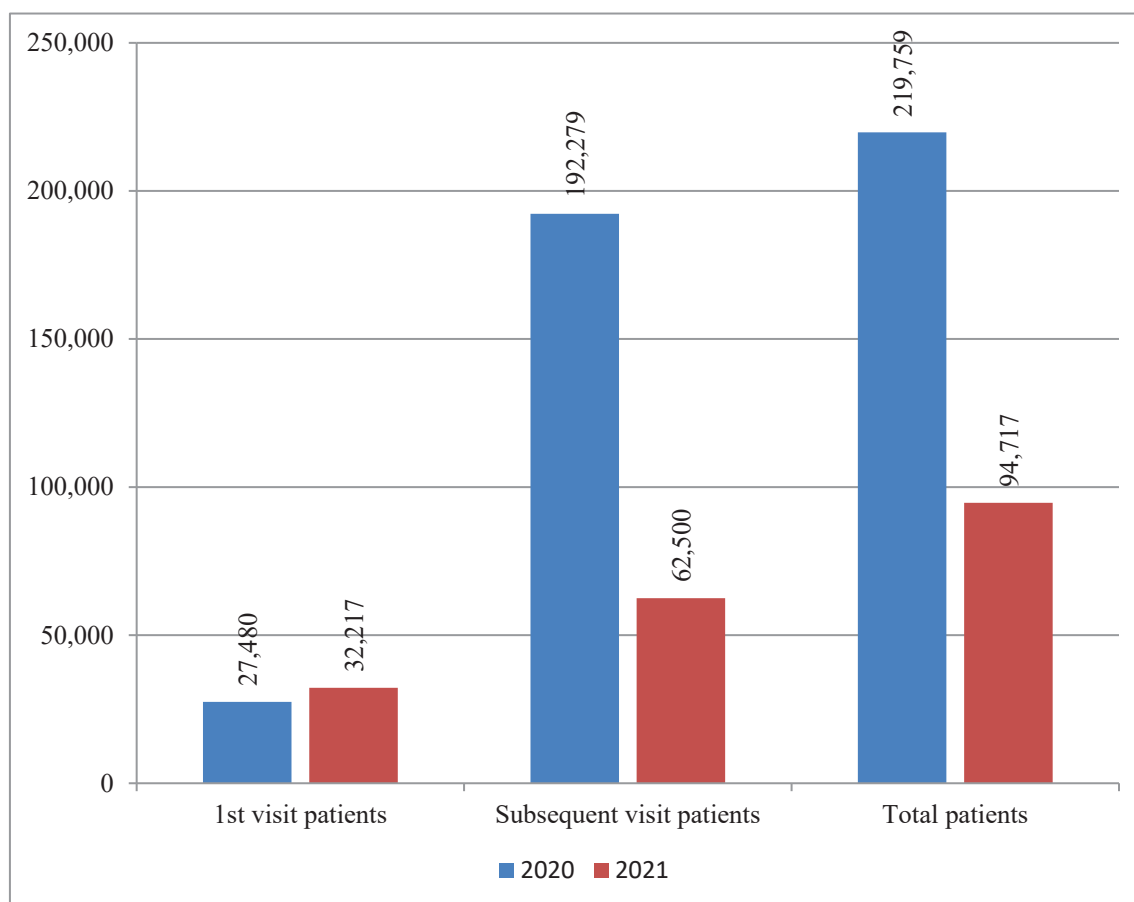
* OSMF- Oral submucous Fibrosis.

Out of all OPMD cases reported to OMFS clinics in Sri Lanka during the years 2020 and 2021, OSMF cases showed the highest presentation with values of 29% and 31% respectively. Erythroplakia was the least presented type of OPMD reported during both years 2020 and 2021 with percentages of 9% and 13% respectively.

4.2 Restorative Dentistry

The total numbers of patients visited and managed at Restorative Dentistry clinics in Sri Lanka during 2020 and 2021 are explained in Figure 4.7.

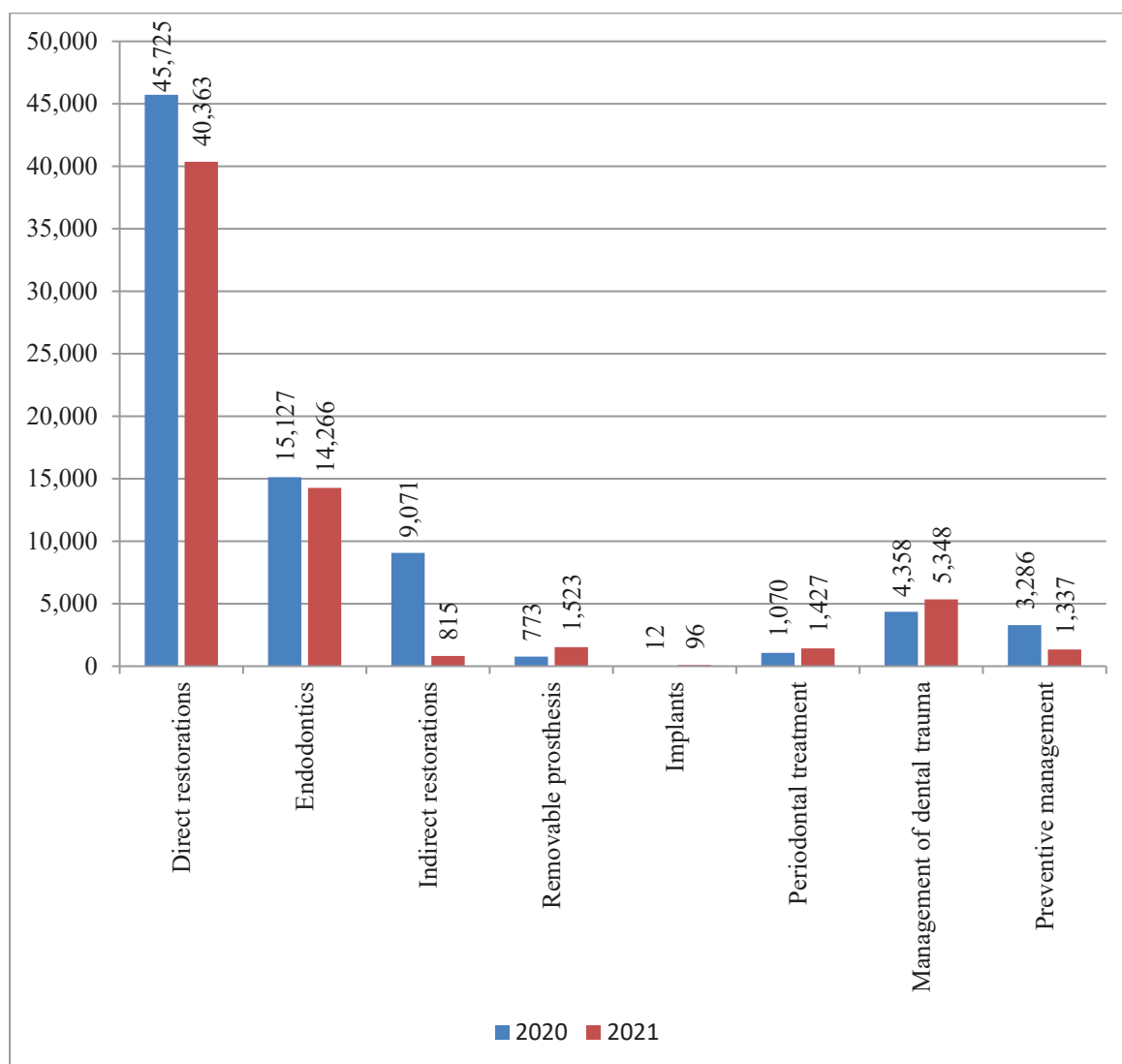
Fig. 4.7: Total numbers of patients visited and managed at Restorative Dentistry clinics in Sri Lanka during the years 2020 and 2021



During the year 2020 total of 219,759 patients visited Restorative Dentistry clinics across the island, but that value was drastically reduced to 94,717 in the year 2021. Out of the total in the year 2020, only 27,480 patients were reported as 1st visit patients. From the total number of patients visited Restorative Dentistry clinics in 2021, only 32,217 were 1st visit patients.

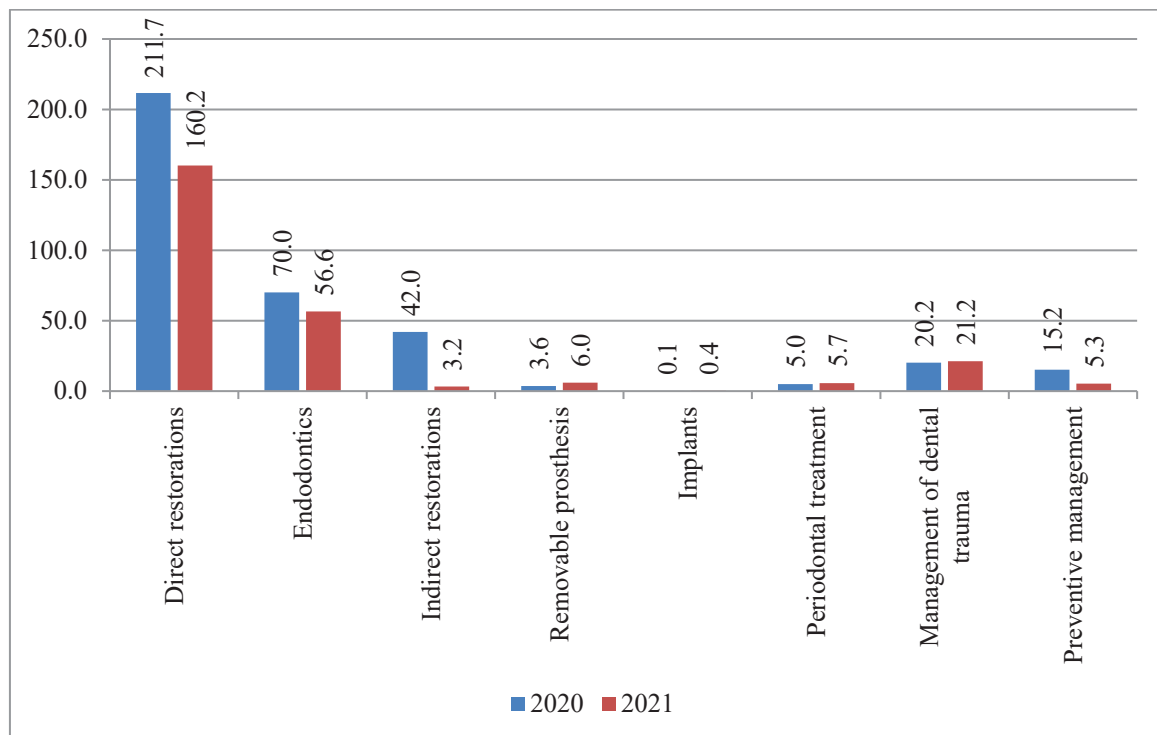
The total numbers of treatments carried out in selected treatment categories at Restorative Dentistry clinics in Sri Lanka during the years 2020 and 2021 are explained in Figure 4.8.

Fig. 4.8: Total numbers of treatments carried out in Restorative Dentistry clinics in Sri Lanka in the years 2020 and 2021 according to types of treatments



The average numbers of treatments carried out in selected treatment categories per month in a single Restorative Dentistry clinic in Sri Lanka during the years 2020 and 2021 are explained in Figure 4.9.

Fig. 4.9: Monthly average numbers of treatments carried out in a single Restorative Dentistry clinic in Sri Lanka during the years 2020 and 2021 according to types of treatments



The commonest type of treatment carried out in Restorative Dentistry clinics in Sri Lanka during the year 2020 was Direct restorations, with an average value of 211.7 per single Restorative Dentistry clinic per month, followed by Endodontics with an average value of 70 per clinic per month.

The year 2021 also showed the same pattern with the highest monthly average value of 160.2 reported for Direct restorations, followed by the monthly average value of 56.6 cases for Endodontics.

In both years 2020 and 2021, Implant placement was the least common type out of selected treatment types in a single Restorative Dentistry clinic per month, with values of 0.1 and 0.4 respectively.

Table 4.2 further explains the total numbers of patients managed and treatments carried out according to the different treatment categories at Restorative Dentistry clinics in Sri Lanka during the years 2020 and 2021.

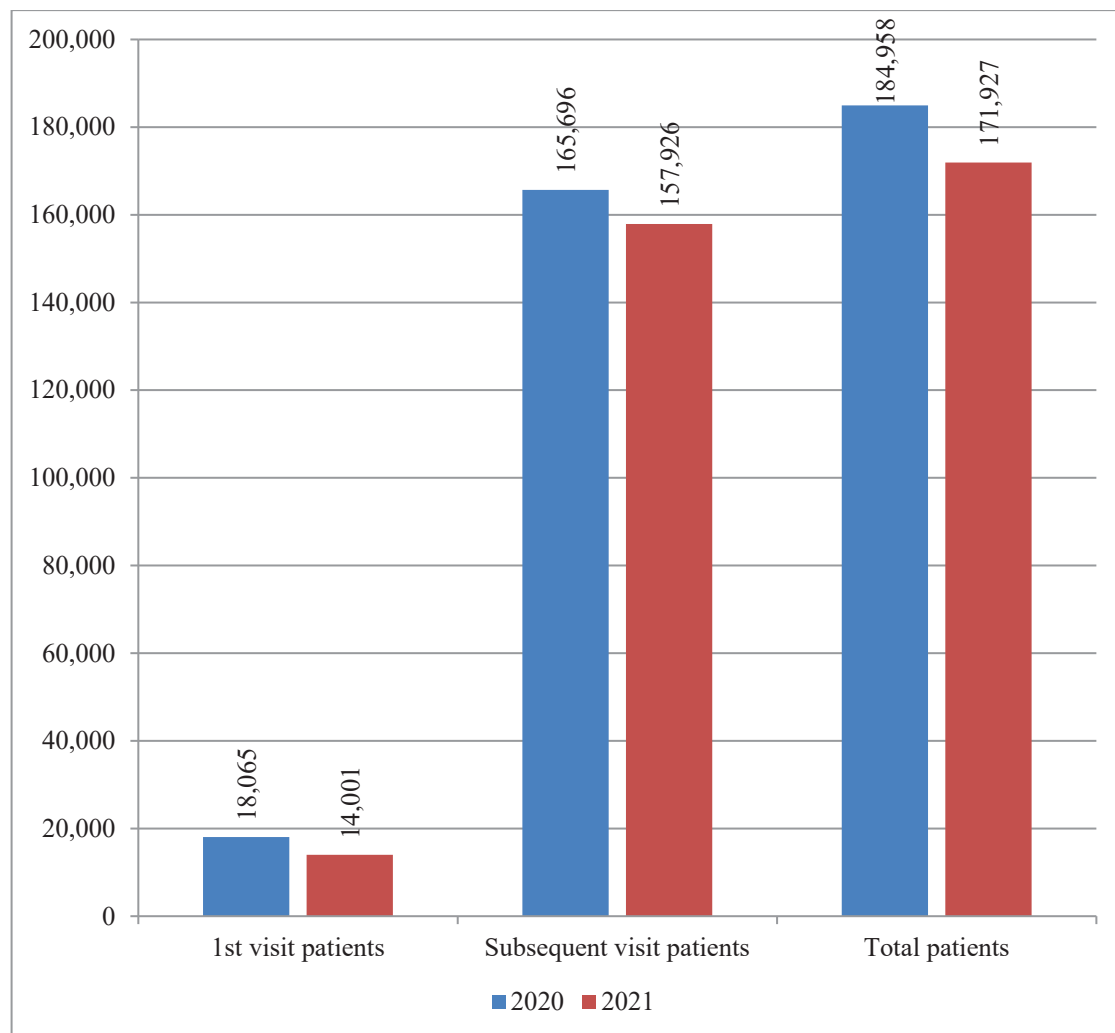
Table 4.2: Numbers of patients managed according to different treatment categories at Restorative Dentistry clinics in Sri Lanka during the years 2020 and 2021

Description		2020	2021
Direct restorations	Temporary	8,974	10,736
	GIC	18,837	16,436
	Composite	17,914	13,191
Endodontic	Pulp therapy for deciduous teeth	3,147	4,309
	RCT completed	11,980	9,957
Post and core build-ups		492	1,731
Indirect restorations	Crowns	617	540
	Others	8,454	275
Removable prosthesis	Dentures delivered	589	1,075
	Denture repairs	184	448
Obturator delivered		101	93
Fixed partial prosthesis delivered		282	438
Implants		12	96
Management of discolored teeth		199	372
Periodontal Treatment	Non-Surgical	976	1,274
	Surgical	94	153
Management of traumatized teeth (new cases)		4,358	5,348
Preventive management	Fluoride application	2,952	1,130
	Fissure sealant	334	207
Patients managed under G/A		44	12
Medico-legal cases managed		672	542
1st visit patients		27,480	32,217
Subsequent visit patients		192,279	62,500
Total number of patients		219,759	94,717

4.3 Orthodontics

The total numbers of patients visited and managed at Orthodontic clinics in Sri Lanka during the years 2020 and 2021 are explained in Figure 4.10.

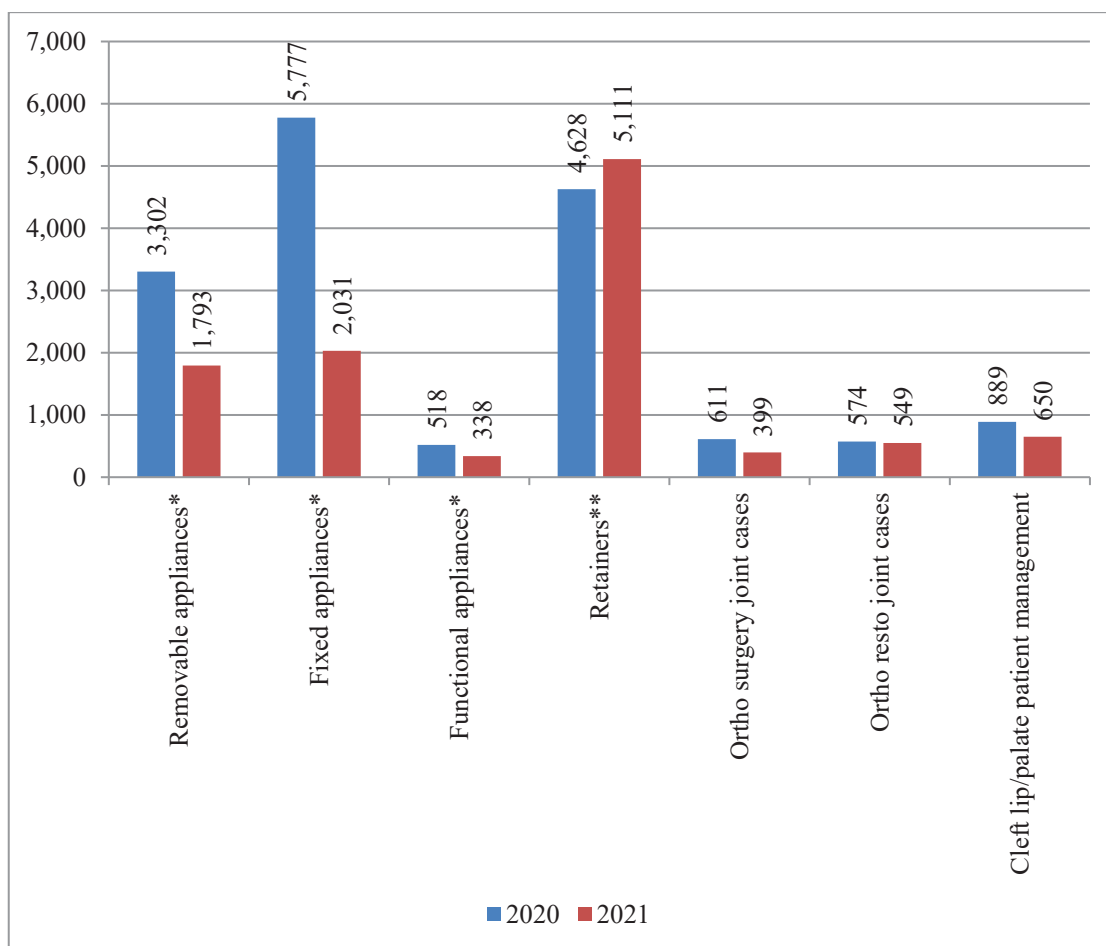
Fig. 4.10: Total numbers of patients visited and managed at Orthodontic clinics in Sri Lanka during the years 2020 and 2021



During the year 2020 total of 184,958 patients visited Orthodontic clinics in Sri Lanka, but that value was slightly reduced to 171,927 in the year 2021. Out of the total in the year 2020, only 18,065 patients were reported as 1st visit patients. From the total number of patients in 2021, only 14,001 patients were 1st visit patients.

The total numbers of treatments carried out in selected treatment categories at Orthodontic clinics in Sri Lanka during the years 2020 and 2021 are explained in Figure 4.11.

Fig. 4.11: Total numbers of treatments carried out in Orthodontic clinics in Sri Lanka in the years 2020 and 2021 according to types of treatments

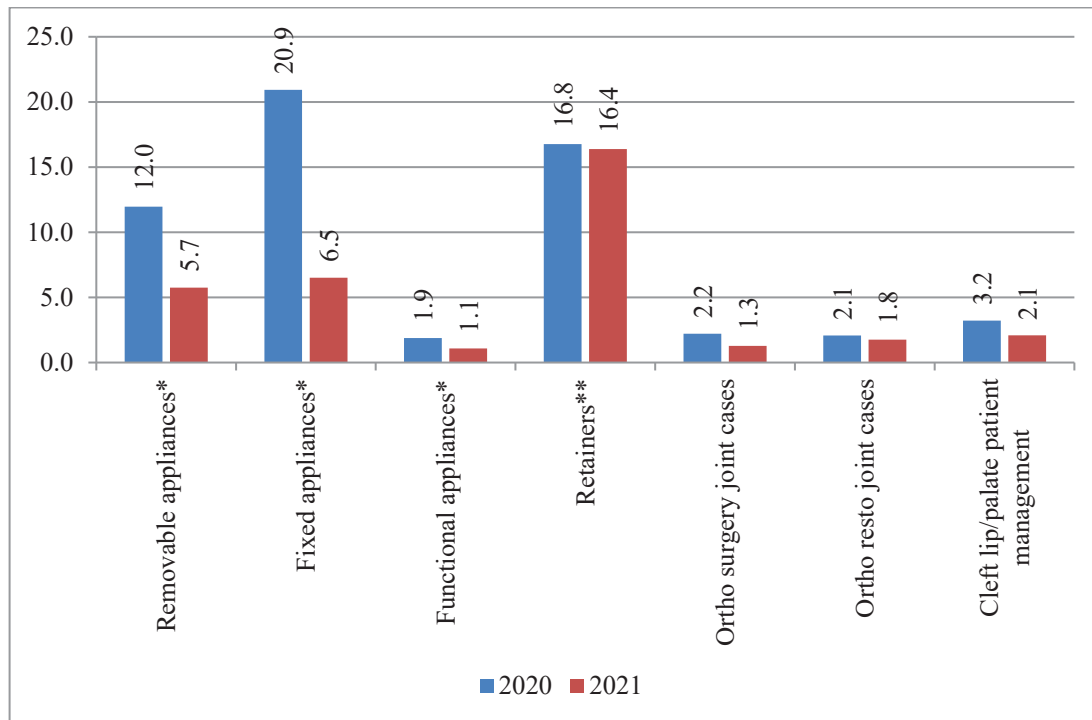


* Completed treatments.

** Total of removable and fixed retainers.

The average numbers of treatments carried out in selected treatment categories per month at a single Orthodontic clinic in Sri Lanka during the years 2020 and 2021 are explained in Figure 4.12.

Fig. 4.12: Monthly average numbers of treatments carried out in a single Orthodontic clinic in Sri Lanka during the years 2020 and 2021 according to the types of treatments



*Completed cases

**Include both fixed and removable retainers

The commonest type of treatment carried out in Orthodontic clinics in Sri Lanka during the year 2020 was Fixed appliances, with an average value of 20.9 cases per single Orthodontic clinic per month, followed by Retainers (removable and fixed) with a monthly average value of 16.8.

In the year 2021, there was a remarkable reduction of completed Removable and Fixed appliance cases compared to the year 2020 with average values of 5.7 and 6.5 respectively. But the number of Retainers showed only a slight reduction compared to the year 2020 with an average of 16.4 cases per month per Orthodontic clinic. In both years 2020 and 2021 Functional appliance cases were the least common, with values of 1.9 and 1.1 respectively.

Table 4.3 further explains the total numbers of patients managed and treatments carried out according to different treatment categories at Orthodontic clinics in Sri Lanka during the years 2020 and 2021.

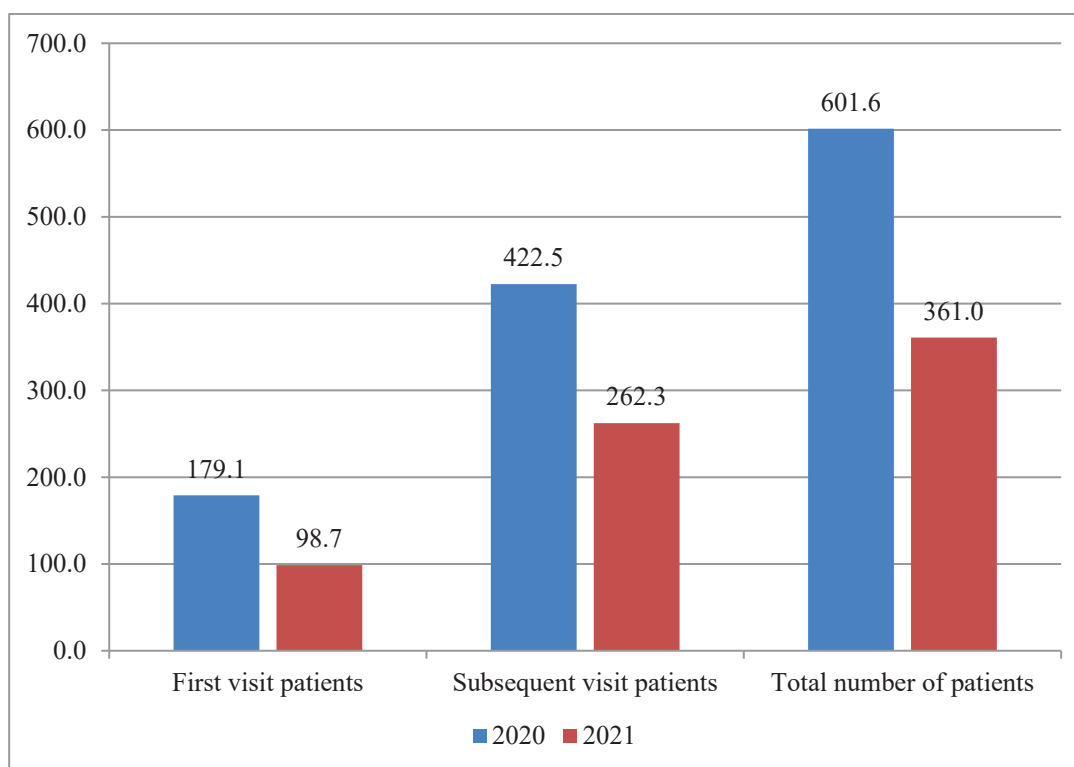
Table 4.3: Number of patients managed according to different treatment categories at Orthodontic clinics in Sri Lanka during the years 2020 and 2021

Description		2020	2021
History taking/treatment planning and impressions		25,158	25,085
Impressions with bands		2,715	2,144
Band cementations		5,820	6,950
Removable appliances	Delivered	4,253	4,249
	Adjustments	48,148	35,009
	Repairs	2,751	2,752
	Treatment completed	3,302	1,793
Fixed appliances	Bonding up new cases	4,089	3,415
	Adjustments/repairs	67,078	46,229
	De-bonding	2,249	2,337
	Treatment completed	5,777	2,031
Functional appliances	Wax bites	1,555	1,545
	Delivered	1,460	1,514
	Repairs	991	977
	Treatment completed	518	338
Retainers - removable		2,221	2,114
Retainers - fixed		2,407	2,997
Fixed habit breakers		181	176
Fixed arch expanders		447	375
Anchorage devices		914	719
Other / adjunctive appliances		5,832	6,095
Head gear / Face mask fittings		215	215
Ortho-Surgery joint cases		611	399
Ortho-Resto joint cases		574	549
Cleft lip/palate patients managed		889	650
Reviews		37,448	32,984
Others		11,001	4,214
1st visit patients		18,065	14,001
Subsequent visit patients		165,696	157,926
Total number of patients		184,958	171,927

4.4 Community Dentistry - Preventive Oral Health Clinics

Figure 4.13 explains the distribution of average numbers of patients treated in a single Preventive Oral Health clinic per month during the years 2020 and 2021 according to the types of clinic visits.

Fig. 4.13: Monthly average numbers of patients treated in a single Preventive Oral Health clinic during the years 2020 and 2021 according to types of clinic visits

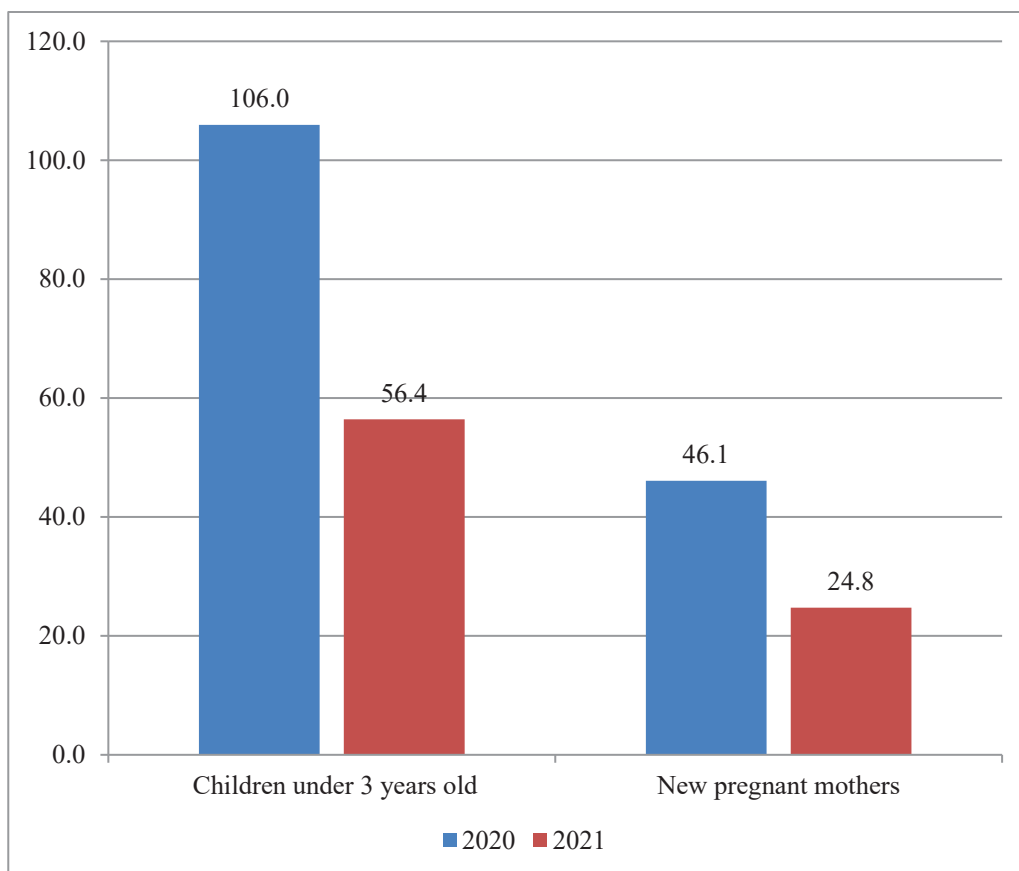


During the year 2020, the average number of patients treated in a single Preventive Oral Health clinic per month was 601.6. That value was considerably reduced in 2021 to an average value of 361.

There was an average number of 179.1 patients recorded as first visit patients in the year 2020, while only 98.7 patients registered as first visit patients in 2021.

Figure 4.14 explains the distribution of special groups of patients treated in a single Preventive Oral Health clinic per month during the years 2020 and 2021.

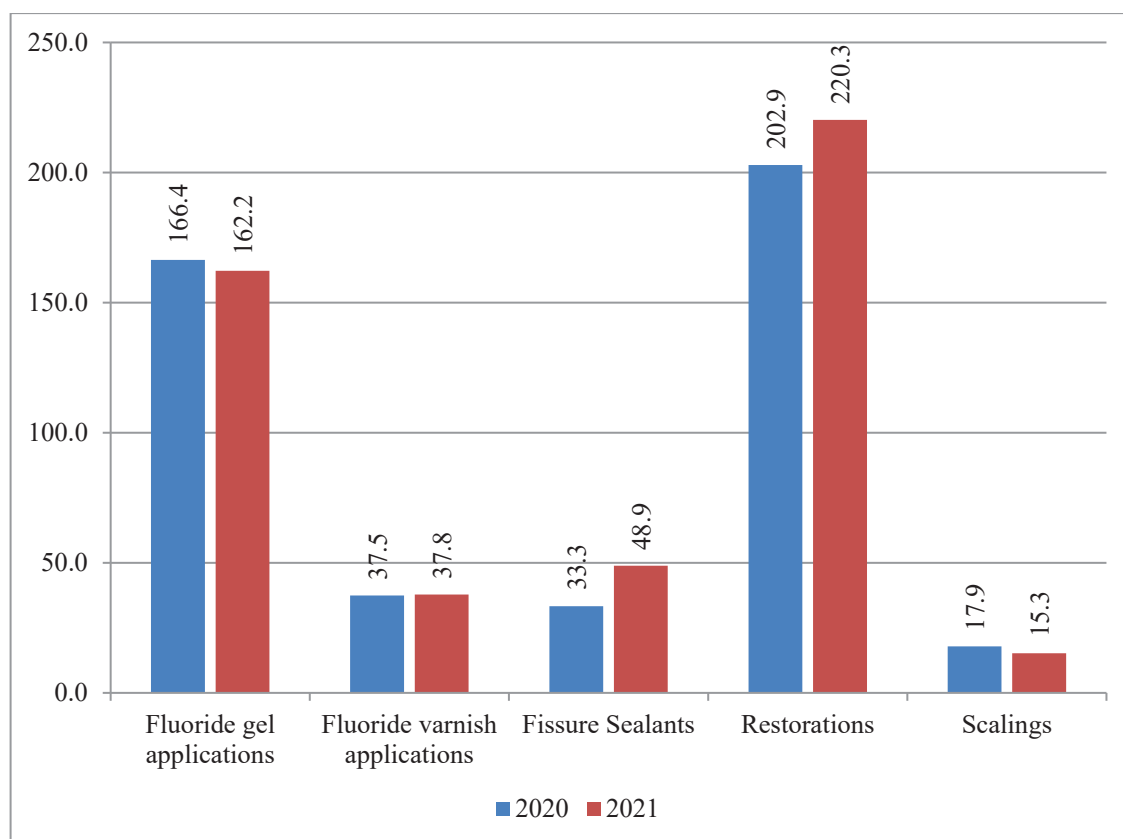
Fig. 4.14: Monthly average numbers of selected special groups of patients managed in a single Preventive Oral Health clinic during the years 2020 and 2021



Monthly average numbers of children less than 3 years and new pregnant mothers managed in a single Preventive Oral Health clinic during the year 2020, were 106 and 46.1 respectively. Compared to 2020, in 2021 it had reduced to 56.4 children under 3 years and 24.8 new pregnant mothers.

The average numbers of different types of selected treatments provided in a single Preventive Oral Health clinic per one month period during 2020 and 2021 are explained in Figure 4.15.

Fig. 4.15: Monthly average numbers of different types of selected treatments provided in a single Preventive Oral Health clinic during the years 2020 and 2021



Considering the selected types of treatments carried out in Preventive Oral Health clinics, the most common type of treatment was restorations, having a monthly average of 202.9 in the year 2020 and 220.3 in the year 2021 per Preventive Oral Health clinic. The next common type of treatment was Fluoride gel applications with values of 166.4 in 2020 and 162.2 in 2021.

Out of all types of treatments, Scaling was the least common type of treatment carried out in both the years 2020 and 2021 with monthly average values of 17.9 and 15.3 respectively.

Chapter 5

Preventive Oral Health Services

Specialists in Community Dentistry are appointed to the following centres of the Ministry of Health. Detail descriptions of those units were included in “Oral Health Report 2018”.

1. Oral Health Promotion Unit - Health Promotion Bureau, Colombo 8
2. Oral Health Unit - Family Health Bureau, Colombo 10
3. Oral Cancer Prevention and Control Unit - National Cancer Control Programme, Colombo 5
4. Oral Health Unit- National Institute of Health Sciences, Kalutara
5. Preventive Oral Health Unit - National Dental Hospital (Teaching), Sri Lanka, Colombo 7
6. Preventive Oral Health Unit - Institute of Oral Health, Maharagama
7. Research and Surveillance Unit - Institute of Oral Health, Maharagama
8. Training Unit - Institute of Oral Health, Maharagama
9. Oral Health Unit - Office of Provincial Director of Health Services-Sabaragamuwa province
10. Oral Health Unit - Office of Provincial Director of Health Services-Western province

5.1 Oral Health Promotion Unit - Health Promotion Bureau

In congruence with the goal of the Health Promotion Bureau (HPB), the Oral Health Promotion Unit work towards improving the oral health and well-being of the Sri Lankan population, while addressing oral health inequalities and social determinants of oral health. The activities carried out by HPB in 2020 and 2021 are summarized in Tables 5.1 (a) and 5.1 (b)

Table 5.1 (a): Activities carried out by the Oral Health Promotion Unit of HPB in 2020

Activity	Output
Behaviour Change Communication (BCC) intervention package for improving the oral health of under 3-year-old children	<ul style="list-style-type: none"> • Development and printing of sets of flashcards on oral health (Sinhala 3,500 and Tamil 2,500), which were to be used at the grass root level as a supporting tool to educate parents and caregivers of children under 3 years of age
Oral health messages related to the COVID-19 pandemic.	<ul style="list-style-type: none"> • Three facebook posts and one video clip were developed regarding ‘Oral healthcare during the COVID pandemic’ in Sinhala, Tamil and English languages and disseminated • Development of an animated video clip on ‘Benefits of Fluoride toothpaste use in improving oral health’ and disseminated via facebook • Development of ten Sinhala and English oral health messages for billboards • Participated in the ‘Nugasewana’ programme for raising public awareness of oral health during the COVID-19 pandemic

Table 5.1 (a) continued: Activities carried out by the Oral Health Promotion Unit of HPB in 2020

<p>Commemorate special days related to oral health: ‘World Head and Neck Cancer Day’ (27th of July) in collaboration with the National Cancer Control Programme</p>	<ul style="list-style-type: none"> • Media seminar on ‘World Head and Neck Cancer Day’ • Development of a short video clip on self-mouth examination and dissemination via facebook page of HPB
<p>Capacity building programmes on Health Promotion and Health Communication</p>	<ul style="list-style-type: none"> • Five online capacity building programmes for RDSs on Health Promotion and Health Communication
<p>‘Suwaseriya’ 24-hour help centre</p>	<ul style="list-style-type: none"> • During the COVID-19 outbreak, the Suwaseriya call centre (1999) was declared as Trilingual Health Hotline. Public concerns were addressed during the period of the COVID -19 pandemic. (Two members of the unit are being engaged as respondents of the ‘Suwaseriya’ team)
<p>‘Preschool Health Promotion Setting Development’ programme</p>	<ul style="list-style-type: none"> • Developing and printing of ‘The manual for Preschool Health Promotion Setting Development’ (Sinhala-14,500 copies and Tamil-2,500 copies). This manual provides comprehensive guide on developing Preschool Health Promotion Setting to health care workers, preschool teachers and other relevant stakeholders. This is a collaborative work involving Family Health Bureau (FHB) and National Secretariat for Early Childhood Development (NSECD)

Table 5.1 (a) continued: Activities carried out by the Oral Health Promotion Unit of HPB in 2020

<p>Oral Health messages related to the COVID-19 Pandemic: Activities related to the preschool community</p>	<ul style="list-style-type: none"> • Development of Information, Education and Communication (IEC) materials for the preschool community for the reopening of preschools in collaboration with NSECD, WHO and UNICEF • Personalized brochure for the parents of preschool children (Sinhala and Tamil languages) • Wall chart, which illustrates the main strategies for the prevention of the spread of COVID-19 infection among preschool children • Video for preschool teachers on the preparation of preschools for reopening (Sinhala and Tamil languages) • Song and video on hand washing technique for preschool children (all 3 languages)
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The development of health promotion settings (applying the ‘setting approach’) is one of the main interventions carried out by the Health Promotion Bureau. Oral Health Unit is responsible for coordinating activities for the development of the ‘Preschool Health Promotion Setting’ (PHPS) as well as developing criteria for oral health promotion in other healthy settings; villages, workplaces, hospitals and schools as well as community-based platforms (e.g., Mother Support Groups). It is a valuable opportunity to keep oral health always on the general health agenda and promote oral health during the life course.

Table 5.1 (b): Activities carried out by the Oral Health Promotion Unit of HPB in 2021

Activity	Output
Behaviour Change Communication (BCC) intervention package for improving the oral health of under 3-year-old children	<ul style="list-style-type: none"> • Training of trainers (TOT) programmes on the BCC intervention package was conducted for RDSs, DSs and SSDTs to promote oral health during early childhood. • A wall chart was developed and printed (Sinhala – 9500 copies, Tamil – 9500 copies) on tooth brushing initiation at the first tooth eruption. Mothers/ caregivers with children up to 3 years of age who are attending child welfare clinics and dental clinics, and service providers in these clinics were targeted through this wall chart.
Oral health messages related to COVID –19 pandemic to social media and mass media to educate the general public	<ul style="list-style-type: none"> • Developing and disseminating COVID-19-related oral health messages, on betel chewing to social media. • Disseminating Oral Health messages related to the COVID-19 pandemic to Mass media <ul style="list-style-type: none"> I. For ITN Sri Lanka, Siyatha TV and Sirasa TV II. Article for Suwaya magazine
Oral health messages to mass media to educate the general public	<ul style="list-style-type: none"> • Oral health programmes for Sitha FM and Vision FM (SLBC) • Press conference on Dental Trauma (02.08.2021) • Article for Lankadeepa Newspaper

Table 5.1 (b) continued: Activities carried out by the Oral Health Promotion Unit of HPB in 2021

<p>Oral health Messages to educate the general public.</p>	<ul style="list-style-type: none"> • Message for parents of preschoolers (Public addressing system) • Oral health messages for billboards – General oral health and child oral health • World Oral Health Day – facebook post for improvement of oral health behaviour during early childhood
<p>Commemorate special days related to oral health: ‘World Head and Neck Cancer Day’ (27th of July) in collaboration with National Cancer Control Programme (NCCP)</p>	<ul style="list-style-type: none"> • Held media seminar on ‘World Head and Neck Cancer Day’ • Development of a short video clip on OPMD and oral cancer and dissemination via the YouTube channel of HPB
<p>Development of training modules</p>	<ul style="list-style-type: none"> • The oral health component of the Health Education Officer (HEO) training module • Training module for TOT programme on National programme for PHPS development • Training module for TOT programme on the BCC intervention on oral health
<p>Behavioural surveillance and research</p>	<ul style="list-style-type: none"> • A rapid assessment survey was carried out among preschool teachers and Early Childhood Development Officers (ECDO) via a Google survey form to assess the reach of the health education materials developed by HPB targeting the preschool community. • Evaluation of the effectiveness of the BCC intervention for Oral Health Promotion among 0 to 3-year-old children using supervision tool.

Table 5.1 (b) continued: Activities carried out by the Oral Health Promotion Unit of HPB in 2021

<p>‘Suwaseriya’ 24-hour help centre</p>	<ul style="list-style-type: none"> • During the COVID-19 outbreak, the Suwaseriya call centre (1999) was declared as Trilingual Health Hotline. Public concerns were addressed during the period of the COVID-19 pandemic. (Two members of the unit are being engaged as respondents of the ‘Suwaseriya’ team)
<p>COVID-19 death-related activities</p>	<ul style="list-style-type: none"> • One member of the unit was appointed as the Colombo district coordinator.
<p>Oral health messages related to the COVID-19 pandemic: Activities related to the preschool community</p>	<ul style="list-style-type: none"> • Two Sinhala and Tamil Live online webinars were conducted to improve knowledge, attitudes and skills on COVID-19, appropriate behaviours and healthy preschool setting development among the preschool community prior to the re-opening of preschools during the COVID-19 pandemic. • Conducting Focus Group Discussions among preschool teachers using an online platform to assess the readiness of the preschool community for re-opening of preschools during the COVID-19 pandemic. • Discussion with Director NSECD, ECDO and HEO for the assessment of appropriate behaviours for preventing the COVID-19 among the preschool community.

Table 5.1 (b) continued: Activities carried out by the Oral Health Promotion Unit of HPB in 2021

<p>‘Preschool Promotion Development’ programme</p> <p>Health Setting (PHPS)</p>	<ul style="list-style-type: none"> • Mediate with NSECD and link with all district and divisional ECDOs for preschool healthy setting development. • Disseminate circular for PHPS development among stakeholders of the health sector. • Increased registration of PHPS via health promotion application of HPB. • Two online advocacy sessions on PHPS development were conducted to introduce the PHPS development manual for CCP, CCD, MO (MCH), MO (HP), RDS and HEO. • Three online advocacy sessions on PHPS development were conducted to introduce the PHPS development manual for ECDOs and SSDTs. • Development and printing of ‘The manual for Preschool Health Promotion Setting Development’ (Tamil language–6000 copies). This manual provides a comprehensive guide to developing PHPS for healthcare workers, preschool teachers and other relevant stakeholders. This is a collaboration work involving FHB and NSECD
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5.2 Oral Health Unit - Family Health Bureau

The main objective of the oral health unit of the Family Health Bureau (FHB) is ‘promoting oral health of mothers and children (0-18years) and thereby promoting oral health of the family through existing Maternal and Child Health (MCH) programme, thus achieving sustainable oral health improvements and quality of life of Sri Lankan population’.

The activities carried out by the oral health unit of FHB in 2020 and 2021 are summarized in tables 5.2 (a) and 5.2 (b).

Table 5.2 (a): Activities carried out by the oral health unit of FHB in 2020

Activity	Output
Reinforcing knowledge on oral health during pregnancy of Supervising Public Health Midwives (SPHM) and Public Health Midwives (PHM).	<ul style="list-style-type: none"> • Conducted physical programme for SPHMs/PHMs of Southern, Central and Eastern provinces. Newly developed flashcards and flip charts were distributed. • Provided technical guidance and IEC materials to all other provinces to conduct similar programmes due to the pandemic situation in the country.
Capacity building programme for SDTs on infection control in the dental settings: special reference to COVID-19 virus spread during dental treatment	<ul style="list-style-type: none"> • Conducted two virtual programmes for all SDTs in the country.
Capacity building programme for dental surgeons attached to the ADCs and CDCs on infection control in the dental settings: special reference to COVID-19 virus spread during dental treatment	<ul style="list-style-type: none"> • Conducted one virtual programme for all dental surgeons attached to ADCs and CDSs.

Table 5.2 (a) continued: Activities carried out by the oral health unit of FHB in 2020

<p>Conducted data analysis programmes for SSDTs, RDSs and development officers (DO) of each RDHS area on the electronic Reproductive Health Management Information System (e RHMIS) database</p>	<ul style="list-style-type: none"> • Conducted one virtual programme covering all districts
<p>Capacity building programme on environmental concerns in COVID-19 control for regional level health managers</p>	<ul style="list-style-type: none"> • Conducted one webinar for all regional level health managers
<p>National review of School Dental Services-2019</p>	<ul style="list-style-type: none"> • Conducted as 02 - day virtual programme
<p>Consultative meeting with SDTs, SSDTs and RDSs to identify the gaps in the school dental service delivery</p>	<ul style="list-style-type: none"> • One physical consultative meeting was conducted.
<p>Developing Guidelines to enable the functioning of ADC and School Dental Clinics (SDC) during the COVID-19 pandemic</p>	<ul style="list-style-type: none"> • Guidelines for service provision during the COVID-19 outbreak and a guideline for the new normal phase of the pandemic were circulated

Table 5.2 (b): Activities carried out by the oral health unit of FHB in 2021

Activity	Output
Capacity building programme for dental surgeons working at ADCs and CDCs	<ul style="list-style-type: none"> All dental surgeons working in ADCs and CDCs in Sri Lanka were trained via two physical programmes and one Zoom programme.
Provincial level progress review 2021/2022 and capacity building of SDTs	<ul style="list-style-type: none"> A progress review of Central Province was completed. Others were cancelled due to prevailing pandemic conditions.
Capacity building programmes for SDTs	<ul style="list-style-type: none"> Four virtual programmes were conducted for all SDTs in the country.
Awareness programme for public health staff on the importance of oral health	<ul style="list-style-type: none"> Virtual programmes were conducted among MO(MCH)s, MOHs and Regional Public Health Nursing Sisters (RPHNS).
RDS training programme- to give updates on the programmes conducted by FHB	<ul style="list-style-type: none"> One virtual programme was conducted with the participation of all RDSs in the country.
Programme to encourage preventive therapies among SDTs	<ul style="list-style-type: none"> Fluoride varnish was purchased and distributed among all SDTs in the country. The virtual training programme was carried out on preventive therapies in dentistry.
Programme to improve the condition of SDCs by providing dental equipment.	<ul style="list-style-type: none"> Purchased and distributed 10 autoclaves among SDCs
National review of School Dental Services-2020	<ul style="list-style-type: none"> Conducted 02 -day virtual programme
Capacity building programme for Senior Registrars and Registrars in Community Medicine/Dentistry	<ul style="list-style-type: none"> One virtual programme was conducted.

5.3 Oral Cancer Prevention and Control Unit- National Cancer Control Programme

The Oral Cancer Prevention and Control Unit of the National Cancer Control Programme is responsible for providing technical support, assistance and guidance to provinces, districts and other organizations and agencies in improving quality, supply and access to prevention, early detection and diagnostic services for oral cancers in Sri Lanka. The activities conducted by this unit in 2020 and 2021 are summarized in Tables 5.3 (a) and 5.3 (b).

Table 5.3 (a): Activities carried out by the Oral Cancer Prevention and Control unit of NCCP in 2020

Activity	Output
Capacity building programmes for medical officers and dental surgeons at the district level	<ul style="list-style-type: none"> Improved knowledge of dental surgeons on prevention and screening of individuals with high risk for OPMDs and oral cancer in Kalutara, Jaffna, Kilinochchi, Ampara and Kalmunai districts. Approximately 150 dental surgeons participated in these programmes.
Capacity building programme for medical officers at Healthy Life Style Centres (HLC) regarding early detection of oral cancers.	<ul style="list-style-type: none"> Improved knowledge of medical officers on early detection of OPMDs in Kurunegala, Gampaha and Galle districts
Published the 'National Guideline for the Management of Oral Cancer in Sri Lanka'	<ul style="list-style-type: none"> 200 copies of the National Guideline printed and circulated among OMFS units, Oncology units and other relevant institutions. Soft copies are available on the NCCP website.

Table 5.3 (a) continued: Activities carried out by the Oral Cancer Prevention and Control unit of NCCP in 2020

<p>Improved awareness of prevention and early detection of OPMD and oral cancer of the general public through the development of IEC material</p>	<ul style="list-style-type: none"> • Reprinting and distribution of 50,000 posters and 50,000 leaflets in Sinhala and Tamil languages. Soft copies are available on the NCCP website.
<p>Promoting self-mouth examination among the general public</p>	<ul style="list-style-type: none"> • The video was developed in collaboration with HPB on self-mouth examination in both Sinhala and Tamil languages. The video was distributed among RDSs. Soft copies are available on the NCCP website.
<p>Commemorating ‘World Head and Neck cancer day 2020’ on the 27th of July</p>	<ul style="list-style-type: none"> • A circular was issued to all health institutions to conduct activities under the theme: ‘Early detection saves lives - Oral Cancer: Detect early - treat promptly’. Ten institutions submitted reports regarding the events conducted to commemorate this day. • Resource persons from the Oral Cancer Prevention and Control unit participated in awareness programmes at the Nurse’s Training School, Colombo and the National Institute of Mental Health. Approximately 80 persons participated in the two programmes.
<p>Media seminar to commemorate World Head and Neck cancer day 2020</p>	<ul style="list-style-type: none"> • The media seminar was conducted with the presence of resource persons representing the preventive and curative aspects of oral cancers

Table 5.3 (a) continued: Activities carried out by the Oral Cancer Prevention and Control unit of NCCP in 2020

<p>Performance review of oral cancer prevention and control activities of RDSs</p>	<ul style="list-style-type: none"> • District performance of cancer prevention and control activities was reviewed using the Zoom platform. The need for improving data quality and reporting mechanism was highlighted and instructions were given to RDSs.
<p>Providing technical inputs for oral cancer prevention and control activities</p>	<ul style="list-style-type: none"> • Technical Advisory Committee on oral cancer prevention and control was initiated and resource persons representing different aspects of oral cancer prevention and control were incorporated as members. Recommendations forwarded to the National Advisory Committee on prevention and control of cancer.
<p>Identifying gaps in the current national programme on oral cancer and developing a model for screening high-risk populations for oral cancer.</p>	<ul style="list-style-type: none"> • Consultative meetings were held with public health experts, OMF Surgeons, RDSs, MO (NCD)s, dental surgeons and PHIs. • Problems were identified and a model for screening of high-risk populations for oral cancer was formulated.

Table 5.3 (b): Activities carried out by the Oral Cancer Prevention and Control unit of NCCP in 2021

Activity	Output
Capacity building programmes for dental surgeons at district levels	<ul style="list-style-type: none"> • Four programmes were carried out with the participation of 150 dental surgeons to improve the knowledge and skills of dental surgeons regarding the prevention and screening of individuals with OPMDs and oral cancer.
Capacity building of Ayurveda university students	<ul style="list-style-type: none"> • The online training session was conducted to improve the capacities of Ayurveda University students on improving early detection of OPMDs as well as habit intervention in clinical settings.
Technical updates to RDSs on developing district level oral cancer programmes	<ul style="list-style-type: none"> • Three online programmes were conducted for all RDSs.
Introducing an e-based surveillance system to OMFS and Oral Pathology units to enter oral cancer incidence data	<ul style="list-style-type: none"> • Distributing 36 laptops to OMFS and Oral Pathology units and training relevant staff on CanReg 5 software
Training of non-health categories on oral cancer prevention	<ul style="list-style-type: none"> • One training programme was conducted for training district level leaders, and volunteers of the Sarvodaya movement at Sarvodaya Headquarters, Moratuwa. • One training programme was conducted for tri-force personnel at the army hospital, Narahenpita on risk habits for oral cancer and the importance of prevention and early detection
Training primary health care staff categories at the district level on early detection and prevention of oral cancers.	<ul style="list-style-type: none"> • Development of a TOT manual on early detection and prevention of oral cancers.

Table 5.3 (b) continued: Activities carried out by the Oral Cancer Prevention and Control unit of NCCP in 2021

<p>Developing IEC materials for the prevention of oral cancer and promotion of early detection</p>	<ul style="list-style-type: none"> • A video was developed on self-mouth examination for the prevention of oral cancer and the promotion of early detection. • Publishing videos on websites and facebook posts on the hazards of chewing tobacco and areca-nut.
<p>Printing of registers for reporting oral cancer incidence data</p>	<ul style="list-style-type: none"> • Fifty registers were reprinted for newly established OMFS units till an e-based surveillance system will be established.
<p>Media related activities to commemorate ‘World Head and Neck cancer day’ on 27th July 2021</p>	<ul style="list-style-type: none"> • A circular signed by the DGHS was issued to all health institutions. The theme for the year 2021 was ‘Stop chewing areca-nut products for good oral health’. • A media seminar was conducted to sensitize the media, to the threat of commercially prepared areca-nut products and their implications. • Publishing newspaper articles on the hazards of chewing tobacco and areca-nut
<p>Assessment of diagnostic and treatment facilities at OMFS units</p>	<ul style="list-style-type: none"> • Questionnaire based survey was conducted to assess the distribution of facilities at all OMFS units.
<p>Performance review of oral cancer prevention and control activities</p>	<ul style="list-style-type: none"> • The online review was conducted with RDSs through Zoom technology to assess oral cancer prevention and control activities at the district level.

Table 5.3 (b) continued: Activities carried out by the Oral Cancer Prevention and Control unit of NCCP in 2021

<p>Conduct Technical Advisory Committee on oral cancer prevention and control for 2021</p>	<ul style="list-style-type: none"> • Four Technical Advisory Committee meetings were conducted and recommendations were forwarded to the National Advisory Committee on prevention and control of oral cancer.
<p>Strengthen the prevention of ‘loss-to-follow-up’ of oral cancer and OPMD patients</p>	<ul style="list-style-type: none"> • A circular signed by DGHS was issued to introduce satellite OMFS clinics in all districts.
<p>Formulate legislation on the use of areca-nut products</p>	<ul style="list-style-type: none"> • A subcommittee comprising of Additional Secretary Public Health, Deputy Director General (Dental services), Estate and Urban Health and Legal Department of the Ministry of Health was established to look for possibilities to formulate a legislative framework targeting the use of areca-nut products.
<p>Implementing a new oral cancer screening programme for estate sector workers</p>	<ul style="list-style-type: none"> • A circular letter was issued with the screening guidelines and indicators to all relevant stakeholders.

5.4 Research and Surveillance Unit- Institute of Oral Health Maharagama

The Research and Surveillance Unit (RSU) of Institute of Oral Health (IOH), Maharagama, is the national level focal point for developing and maintaining a quality and accurate surveillance system for oral health in Sri Lanka and promoting and conducting research. The activities carried out by this unit in 2020 and 2021 are summarized in Tables 5.4 (a) and 5.4 (b).

Table 5.4 (a): Activities carried out by the RSU in 2020

Activity	Output
Maintaining the surveillance system for OPD dental clinics	<ul style="list-style-type: none"> Data collection, compilation and analysis were done with regard to the dental surgeons' monthly statistics
Designing, printing and distributing "Oral Health Report 2018"	<ul style="list-style-type: none"> Designed, printed and distributed 1000 books among dental consultants, regional dental surgeons, dental surgeons and relevant stakeholders An E-version of 'Oral Health Report 2018' was made available on the Ministry of Health website.
Streamlining the OPD surveillance system and introducing an e- surveillance system	<ul style="list-style-type: none"> Surveillance forms are being revised after getting expert opinions to design uniform patient registers and other documents for OPD dental clinics. In the process of basic discussions with the health information unit, the Ministry of Health to convert the surveillance system to an electronic surveillance system (e – surveillance)
Updating the dental surgeons' human resource profile	<ul style="list-style-type: none"> Updated the human resource profile of oral health services for 2019.

Table 5.4 (a) continued: Activities carried out by the RSU in 2020

Surveillance system for specialized oral health units	<ul style="list-style-type: none"> Continued the pilot project in NDHTSL Colombo and IOH Maharagama to introduce patient registers and monthly returns to specialized oral health units.
Surveillance system for dental laboratories	<ul style="list-style-type: none"> Continued the pilot project started at the dental laboratory IOH Maharagama, to introduce a surveillance system
Promoting research activities among government dental surgeons	<ul style="list-style-type: none"> Promotion of research activities among dental surgeons was done by educating them through Zoom meetings and by giving necessary support and guidance at each stage.
Updating knowledge of postgraduate students on research methodology and statistics	<ul style="list-style-type: none"> Conducted educational sessions on the topics of research methodology and statistics for postgraduate students

Table 5.4 (b): Activities carried out by the RSU in 2021

Activity	Output
Maintaining the surveillance system for OPD dental clinics	<ul style="list-style-type: none"> Data collection, compilation and analysis were done with regard to the dental surgeons' monthly statistics
Designing, printing and distributing 'Oral Health Report 2019'	<ul style="list-style-type: none"> Designed, printed and distributed 700 books among dental consultants, regional dental surgeons, dental surgeons and relevant stakeholders The E-version of 'Oral Health Report 2019' is made available on the Ministry of Health website
Streamlining the OPD surveillance system	<ul style="list-style-type: none"> Surveillance forms were under revision after getting expert opinions. In the process of designing Google forms for all dental OPD clinics
Updating the dental surgeons' human resource profile	<ul style="list-style-type: none"> Updated the human resource profile of oral health services for 2020.
Surveillance system for dental laboratories	<ul style="list-style-type: none"> Continue the pilot project started at the dental laboratory at IOH Maharagama to introduce a surveillance system
Promoting research activities among government dental surgeons	<ul style="list-style-type: none"> Promotion of research activities among dental surgeons was done by educating them through zoom meetings and by giving necessary support and guidance at each stage.
Updating knowledge of postgraduate students on research methodology and statistics	<ul style="list-style-type: none"> Conducted educational sessions on the topics of research methodology and statistics to postgraduate students
Collection of dental trauma data	<ul style="list-style-type: none"> Collection and compilation of data related to dental trauma from specialized dental clinics and OPD dental clinics

5.5 Training unit - Institute of Oral Health Maharagama

The training division of the dental service was established in 2011 and is located at the Institute of Oral Health Maharagama which provides training for different categories of staff. The activities carried out by this unit in 2020 and 2021 are summarized in Tables 5.5 (a) and 5.5 (b).

Table 5.5 (a): Activities carried out by the training unit in 2020

Activity	Output
Hands on workshop on infection control procedures during the COVID-19 pandemic for dental surgeons	<ul style="list-style-type: none"> • Two programmes were conducted. • Sixty-three dental surgeons attached to the IOH were trained.
Hands on workshop on infection control procedures during the COVID-19 pandemic for dental surgery assistance	<ul style="list-style-type: none"> • One day programme was conducted. • Twenty-one nursing officers, tutor sisters, dental lab technicians and pharmacists attached to the IOH Maharagama were trained.
Hands on workshop on infection control procedures during the COVID-19 pandemic for other health staff	<ul style="list-style-type: none"> • Two programmes were conducted. • Eighty-seven dental surgery assistants attached to the IOH were trained.
Hands on workshop on infection control procedures for provincial level dental surgeons	<ul style="list-style-type: none"> • Three programmes were conducted and • One hundred and twenty-nine dental surgeons in the Southern province were trained.
Hands on workshop on infection control procedures for provincial level nursing officers	<ul style="list-style-type: none"> • One programme was conducted for • Twenty-five nursing officers in the Southern province were trained.
Hands on workshop on infection control procedures for provincial level dental surgery assistants	<ul style="list-style-type: none"> • Three 2 - day programmes were conducted and 146 dental surgery assistants attached to hospital dental clinics in the Southern province were trained.

Table 5.5 (a) continued: Activities carried out by the training unit in 2020

Online meetings on infection control procedures for SDTs	<ul style="list-style-type: none"> • Two programmes were conducted via Zoom facility and all SDTs in Sri Lanka were trained.
Online meetings on infection control procedures for ADCs and CDCs	<ul style="list-style-type: none"> • One programme was conducted via Zoom facility for all dental surgeons attached to ADCs and CDCs in Sri Lanka.
Lecture on Health Promotion in the school setting	<ul style="list-style-type: none"> • All SDTs in North Central and Central provinces were trained.
'Dental update' for dental surgeons	<ul style="list-style-type: none"> • An e-newsletter containing two articles was circulated online among dental surgeons in Sri Lanka.
'Dental update' for SDTs	<ul style="list-style-type: none"> • An e-newsletter containing two articles was circulated among all the SDTs in Sri Lanka.

Table 5.5 (b): Activities carried out by the training unit in 2021

Activity	Output
Circulating e-newsletter among dental surgeons	<ul style="list-style-type: none"> • Three e-newsletters were circulated among dental surgeons in January, February and March to update their knowledge.
Training programme on “Office management and disciplinary procedures”.	<ul style="list-style-type: none"> • One day programme was conducted. • Dental surgeons, nursing officers and clerical staff attached to IOH, Maharagama were trained (Total participants 43).
Hands on workshop on infection control in dental care setting for dental surgeons and dental clinic assistants in Anuradhapura district	<ul style="list-style-type: none"> • Two programmes were conducted. • All the dental surgeons and dental clinic assistants in Anuradhapura District were trained.
Continuous Professional Development Programme (CPD) (Virtual) for dental surgeons attached to the Ministry of Health in Central province and North Western province	<ul style="list-style-type: none"> • A two-day programme was conducted via Zoom facility for each province. • All dental surgeons attached to the Ministry of Health in Central province and North Western province were trained.
CPD Programme (Virtual) for dental surgeons attached to the Ministry of Health in Uva, Sabaragamuwa, Eastern, North central and Northern provinces	<ul style="list-style-type: none"> • One day programme was conducted via Zoom facility for each province. • All dental surgeons attached to the Ministry of Health in Uva, Sabaragamuwa, Eastern, North central and Northern provinces were trained.
CPD Programme (Virtual) for dental surgeons attached to the NDTHSL	<ul style="list-style-type: none"> • A two-day programme was conducted via Zoom facility. • All dental surgeons attached to the NDTHSL were trained.

**5.6 Oral Health Unit - Office of the Provincial Director of Health Services,
Sabaragamuwa province.**

Provincial Consultants in Community Dentistry (CCDs) are appointed at provincial level to improve oral health within the provinces and to coordinate provincial level activities related to oral health with the central level and various governmental and non-governmental organizations (NGOs) through the Provincial Director of Health Services (PDHS). The activities carried out under the supervision of the Provincial CCD in Sabaragamuwa province are summarized in tables 5.6 (a) and 5.6 (b).

Table 5.6 (a): Activities coordinated and supervised by the provincial CCD in Sabaragamuwa province during the year 2020

Activity	Output
SDT review meeting	<ul style="list-style-type: none"> • One programme was conducted with 47 participants.
Dental surgeon review meeting	<ul style="list-style-type: none"> • One programme was conducted with 40 participants.

Table 4.6 (b): Activities coordinated and supervised by the provincial CCD in Sabaragamuwa province during the year 2021

Activity	Output
A programme to improve the knowledge and skills of the health staff to update knowledge and skills.	<ul style="list-style-type: none"> • One programme was conducted with 50 participants.
Annual review programme for SDTs	<ul style="list-style-type: none"> • One programme was conducted with 31 participants.

5.7 Oral Health Unit-National Institute of Health Sciences-Kalutara

The Oral Health Unit of the National Institute of Health Sciences (NIHS), Kalutara is placed under the Public Health Field Services of NIHS, executing public health functions in both Training Faculty and the Field Services. The training and supervision activities carried out by the direct involvement of the CCD during the years 2020 and 2021 are summarized in Tables 5.7 (a) and 5.7 (b).

Table 5.7 (a): Activities carried out by the Oral Health Unit of NIHS in 2020

Activity	Output
Training programme for field public health staff on oral health care provision for pregnant mothers, infancy and childhood	• Two programmes were conducted.
Pre MD training programme of public health management- ‘Management of common oral diseases and role of RDS/CDS/SSDT/SDT in oral health promotion’	• Two Programmes were conducted.
Pre-MD training programme of public health management-oral health field training	• One programme was conducted.
Training programme for Trainee PHM on the management of common oral diseases, PHPS development and skill development on prevention and control of dental caries, periodontal diseases and oral cancer	• Four programmes were conducted.
Training programme for Trainee PHI on the management of common oral diseases, PHPS development and skill development on prevention and control of dental caries, periodontal diseases and oral cancer	• Two programmes were conducted.
Training programme for trainee Public Health Nursing Sisters (PHNS) on oral healthcare provision for pregnant mothers, infancy and childhood and prevention and early detection of oral cancer and PHPS development	• Three programmes were conducted.
Orientation on the management of Community Health for MOH/RE/MO (MCH)/MO(PH) – Management of common oral diseases and role of RDS/CDS/SSDT/SDT in oral health promotion	• Two programmes were conducted.

Table 5.7 (b): Activities carried out by the Oral Health Unit of NIHS in 2021

Activity	Output
Training programme for field public health staff on oral healthcare provision for pregnant mothers, infancy and childhood	<ul style="list-style-type: none"> • Four programmes were conducted.
Pre MD training programme of public health management – ‘Management of common oral diseases and role of RDS/CDS/SSDT/SDT in oral health promotion’	<ul style="list-style-type: none"> • Two programmes were conducted.
Training programme for trainee PHMs on the management of common oral diseases, PHPS development and skill development on prevention and control of dental caries, periodontal diseases and oral cancer	<ul style="list-style-type: none"> • Ten programmes were conducted.
Training programme for trainee PHIs on management of common oral diseases, and skill development on prevention and control of dental caries, periodontal diseases and oral cancer	<ul style="list-style-type: none"> • Two programmes were conducted.
Training programme for trainee PHNSs on oral health care provision for pregnant mothers, infancy and childhood and prevention and early detection of oral cancer and PHPS development	<ul style="list-style-type: none"> • Three programmes were conducted.
Orientation on Management of Community Health for MOH/RE/ MO(MCH)/ MO(PH) – ‘Management of common oral diseases and role of RDS/CDS/SSDT/SDT in oral health promotion’	<ul style="list-style-type: none"> • Two programmes were conducted.
Training programme for Diploma in Elderly Medicine – ‘Management of common oral diseases in elderly’	<ul style="list-style-type: none"> • One programme was conducted.
Training programme for Ward Clerks – ‘Management of Common Oral Diseases and early identification’	<ul style="list-style-type: none"> • One programme was conducted.
In-service training programmes for dental surgeons in the NIHS area	<ul style="list-style-type: none"> • Four programmes were conducted.
In-service training programmes for SDTs in the NIHS area Kalutara	<ul style="list-style-type: none"> • Four programmes were conducted.

Chapter 6

School Dental Service in Sri Lanka

The school dental service is specially designed and launched for improving the oral health of school children in Sri Lanka which is primarily managed by school dental therapists (SDT) under the direct technical supervision of RDS and direct administrative supervision of the Medical Officer of Health. SDT provides preventative oral healthcare for children aged between 3-13 years. Their target groups for treatment are children in grade 1, grade 4 and grade 7 classes in schools where there are more than 200 students and in schools with less than 200 school children all the children below 13 years. The current norm is to have one School Dental Clinic (SDC) per one Medical Officer of Health (MOH) division and 2000 school children as the target population per SDT.

Monthly average numbers of school children screened by a single SDT in the years 2020 and 2021 are explained in Figures 6.1 (a) and 6.1 (b).

Fig. 6.1 (a): Monthly average number of school children screened by a single SDT in the year 2020: district variation

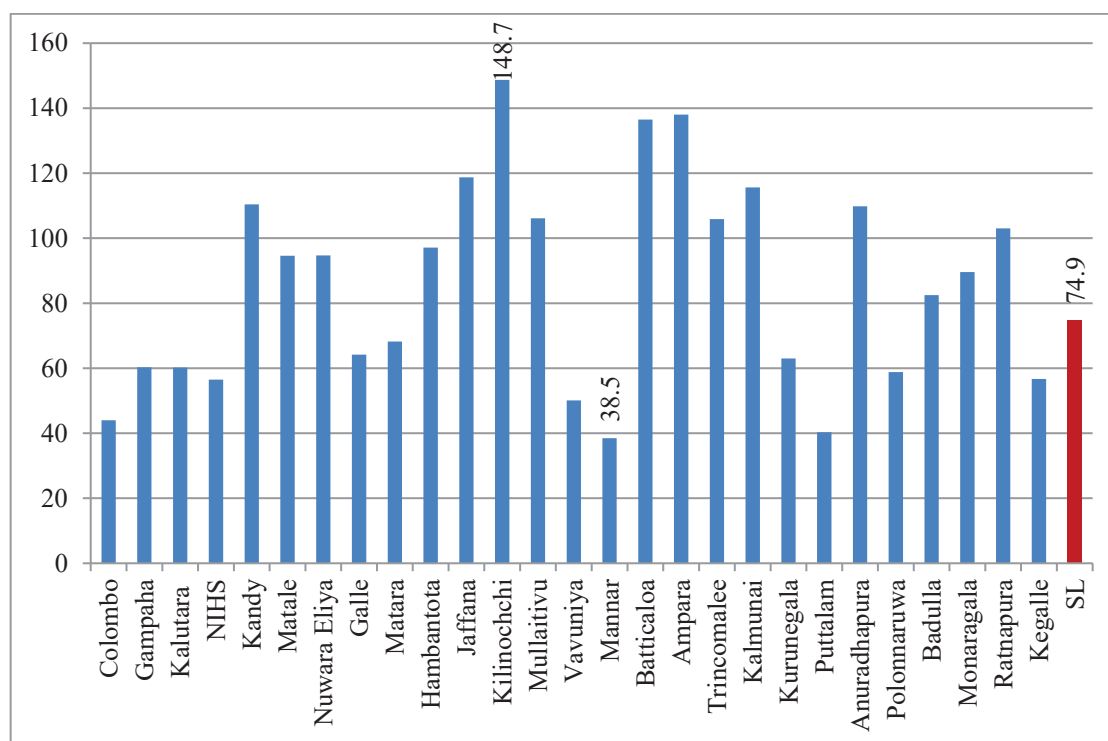
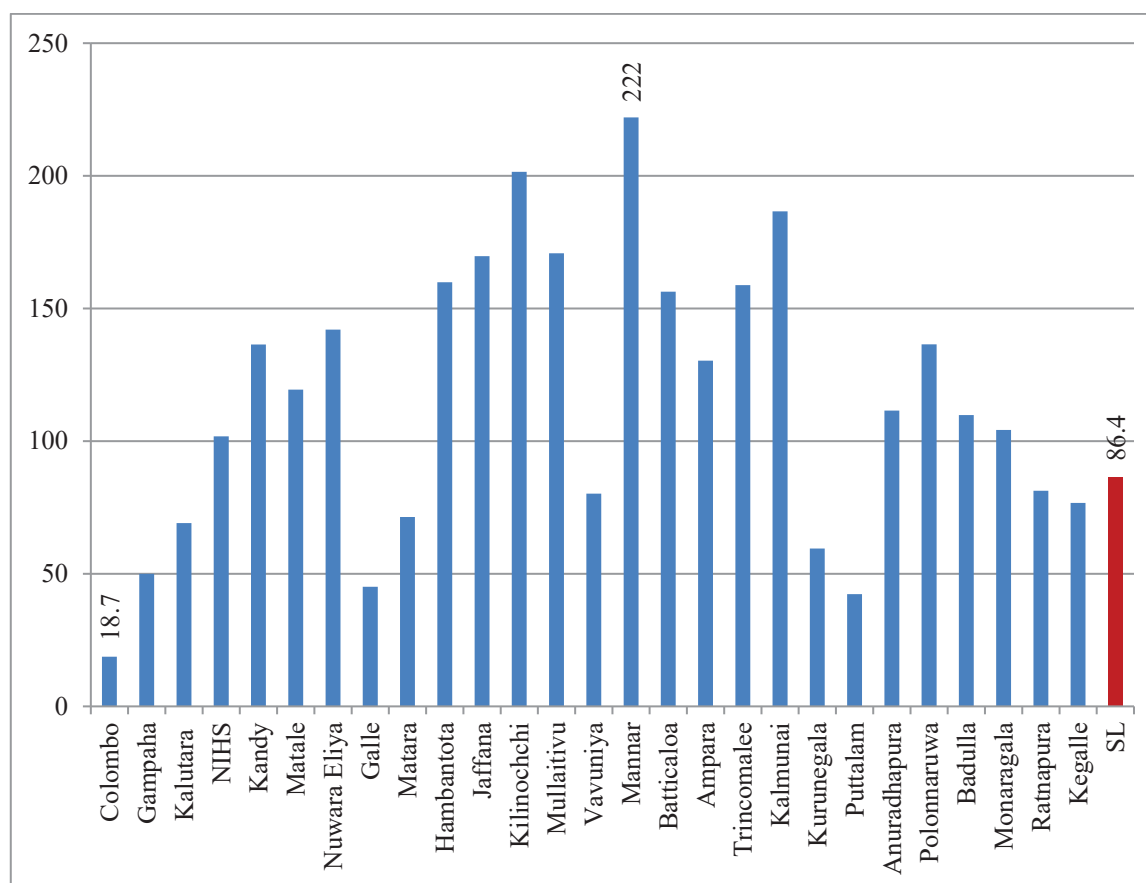


Fig. 6.1 (b): Monthly average number of school children screened by a single SDT in the year 2021: district variation

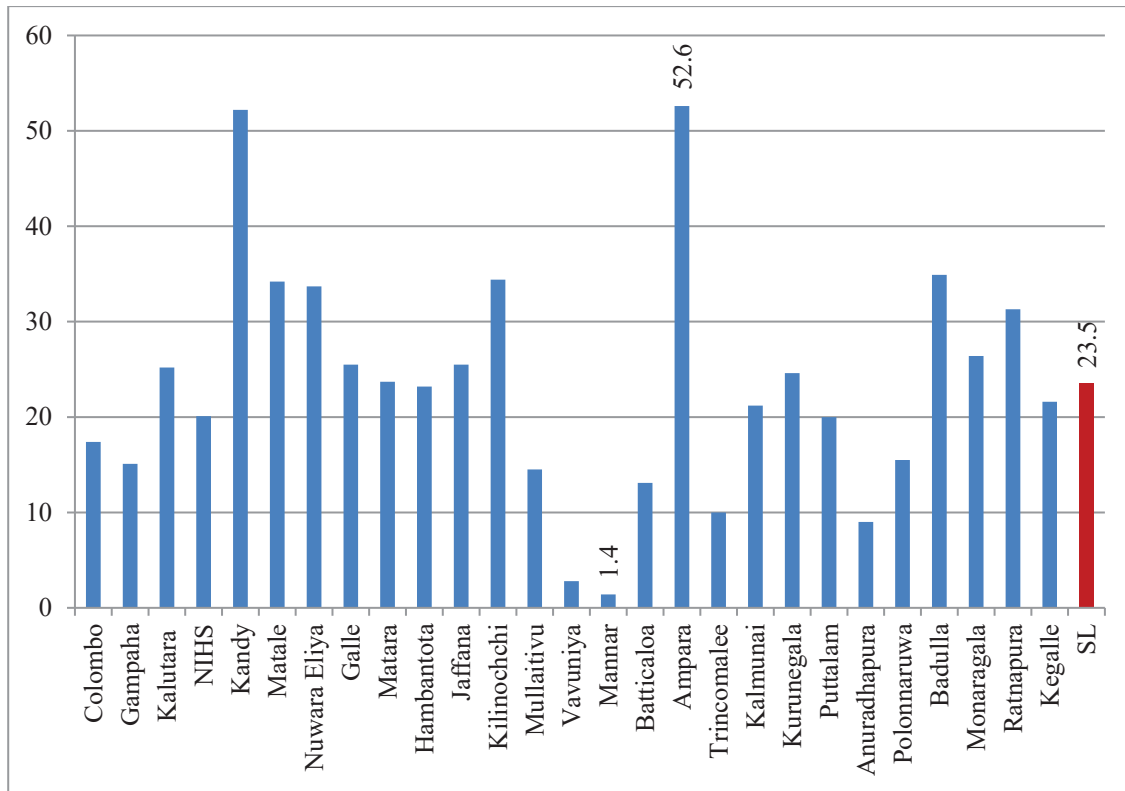


On average, considering the whole island, a single SDT screened 74.9 school children per month in the year 2020 and 86.4 children in the year 2021. In the year 2020, the highest monthly average number of children screened was in the Kilinochchi district (148.7) while the lowest was reported from Mannar district (38.5).

In the year 2021, the highest monthly average number of children screened was in the Mannar district (222) while the lowest was reported in the Colombo district (18.7).

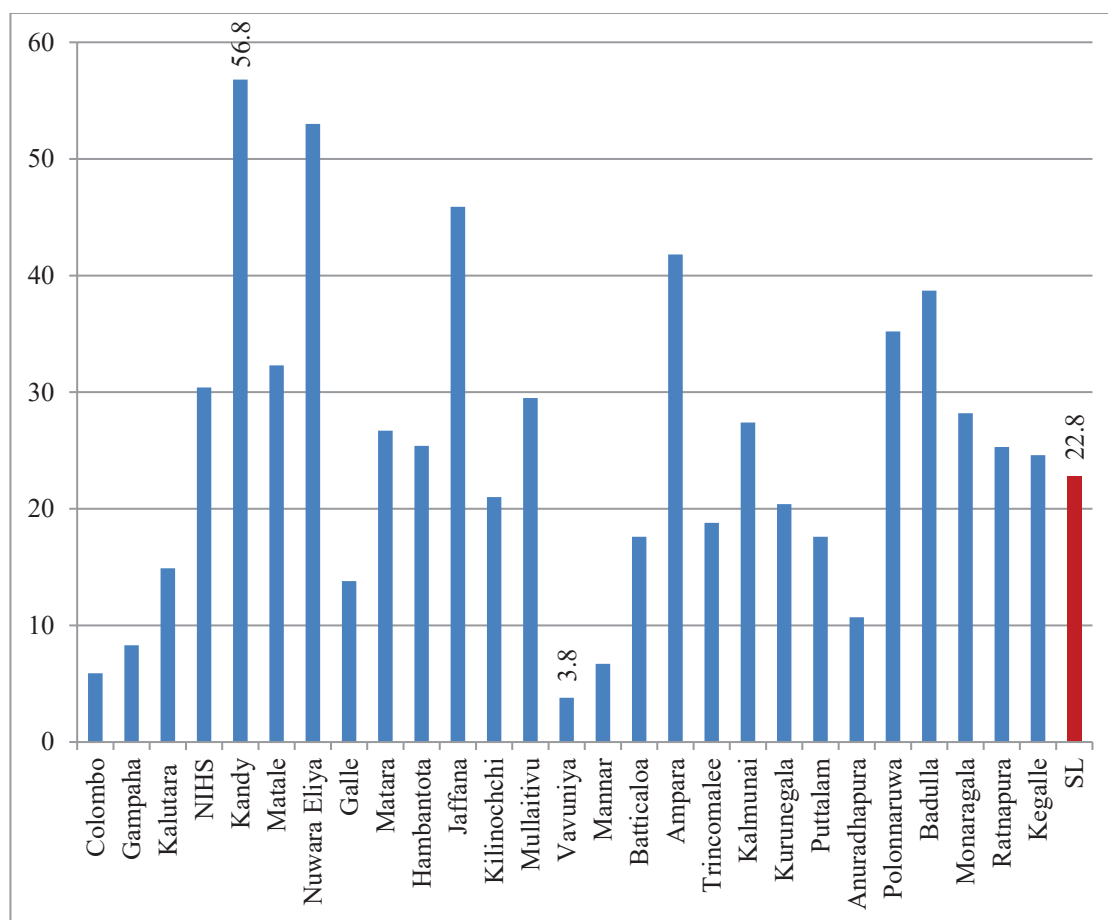
Monthly average numbers of school children with completed treatment by a single SDT in the years 2020 and 2021 are explained in figures 6.2 (a) and 6.2 (b).

Fig. 6.2 (a): Monthly average number of children with treatment completions per SDT in the year 2020: district variation



In Sri Lanka on average, one SDT had completed treatments on 23.5 school children per month in the year 2020. The highest average number of treatment completed children (52.6 per SDT per month) was from the Ampara district and the lowest was reported in the Mannar district (1.4 per SDT per month).

Fig. 6.2 (b): Monthly average number of children with treatment completions per SDT in the year 2021: district variation



In Sri Lanka on average, a single SDT had completed treatments on 22.8 school children per month in the year 2021. The highest average number of treatments completed children (56.8 per SDT per month) was from the Kandy district and the lowest was reported from the Vavuniya district (3.8 per SDT per month).

Table 6.1 explains the district wise values in the years 2020 and 2021 for the total number of children in target groups, the total number of school children screened, the total number of children who needed treatments out of screened children, the total number of treatments completed children and percentage of treatment completed children out of children who needed treatments in each district.

Table 6.1: Performance of SDTs in the years 2020 and 2021

District	Total number of children in target groups		Total number of screened school children		Total number of children who needed treatments out of screened children		Total number of treatments completed children		% treatment completed out of those who needed treatment	
	2020	2021	2020	2021	2020	2021	2020	2021	2020	2021
Colombo*	98,566	98,784	27,427	9,853	14,425	5,254	10,865	3,129	75.3	59.6
Gampaha	100,510	100,824	27,476	17,999	11,550	7,459	6,872	2,998	59.5	40.2
Kalutara	34,639	29,988	15,173	14,920	8,079	8,088	6,340	3,217	78.5	39.8
NIHS area	14,653	16,377	2,714	4,884	1,722	2,998	964	1,457	56.0	48.6
Kandy	76,983	80,503	23,837	32,724	13,812	19,947	11,276	13,640	81.6	68.4
Matale	31,867	34,266	10,221	11,462	5,321	5,783	3,692	3,100	69.4	53.6
Nuwara Eliya	50,949	39,323	11,364	15,338	6,167	7,997	4,043	5,721	65.6	71.5
Galle	55,866	55,109	20,786	12,438	10,550	6,326	8,260	3,819	78.3	60.4
Matara	46,565	45,580	14,721	16,283	6,281	8,502	5,123	6,090	81.6	71.6
Hambantota	36,141	36,080	11,647	13,432	5,225	5,583	2,784	2,133	53.3	38.2
Jaffna	36,031	34,140	9,970	14,254	4,487	6,750	2,139	3,855	47.7	57.1
Kilinochchi	9,055	8,129	5,353	4,837	2,954	2,697	1,237	503	41.9	18.7
Mullaitivu	4,606	9,021	2,546	4,100	1,232	2,030	348	708	28.3	34.9
Vavuniya	3,684	4,141	1,203	2,887	526	964	66	136	12.6	14.1
Mannar	15,617	19,286	924	5,329	488	2,789	33	161	6.8	5.8
Batticaloa	30,018	27,369	9,828	11,250	5,789	6,805	946	1,265	16.3	18.6
Ampara	15,537	14,215	6,625	6,255	3,243	3,217	2,526	2,008	78.9	62.4
Trincomalee	22,181	24,466	7,626	11,437	4,593	6,661	718	1,353	15.6	20.3
Kalmunai	29,202	34,659	13,873	20,157	9,172	12,708	2,547	2,959	27.8	23.3
Kurunegala	41,179	44,711	21,155	17,838	10,006	8,555	8,280	6,134	82.8	71.7
Puttalam	17,025	40,860	6,763	5,582	4,144	3,419	3,363	2,326	81.2	68.0
Anuradhapura	56,995	57,505	25,025	22,754	11,574	9,763	2,046	2,191	17.7	22.4
Polonnaruwa	32,750	32,208	7,760	16,377	4,407	10,124	2,052	4,222	46.6	41.7
Badulla	65,467	56,353	17,818	23,716	9,894	11,746	7,533	8,350	76.1	71.1
Monaragala	35,488	29,469	11,827	12,500	5,024	5,645	3,490	3,387	69.5	60.0
Ratnapura	59,197	58,581	21,021	16,583	10,887	8,818	6,379	5,160	58.6	58.5
Kegalle	52,545	44,752	14,282	14,723	8,133	8,692	5,434	4,727	66.8	54.4
Sri Lanka	1,073,316	1,076,707	348,965	359,912	179,688	189,320	109,356	94,746	60.9	50.1

*Colombo district including Colombo municipal council

Percentages of children treated by SDTs out of the children who needed treatments in the years 2020 and 2021 are explained in Figures 6.3 (a) and 6.3 (b).

Fig. 6.3 (a): Percentage of children treated by SDTs, out of those who needed treatments during the year 2020: district variation

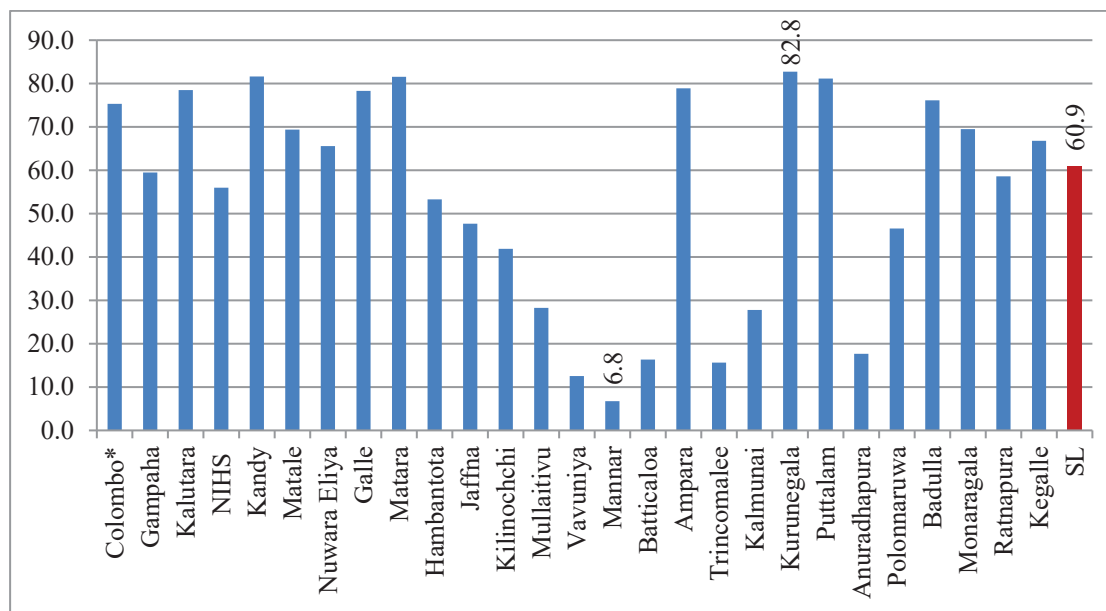
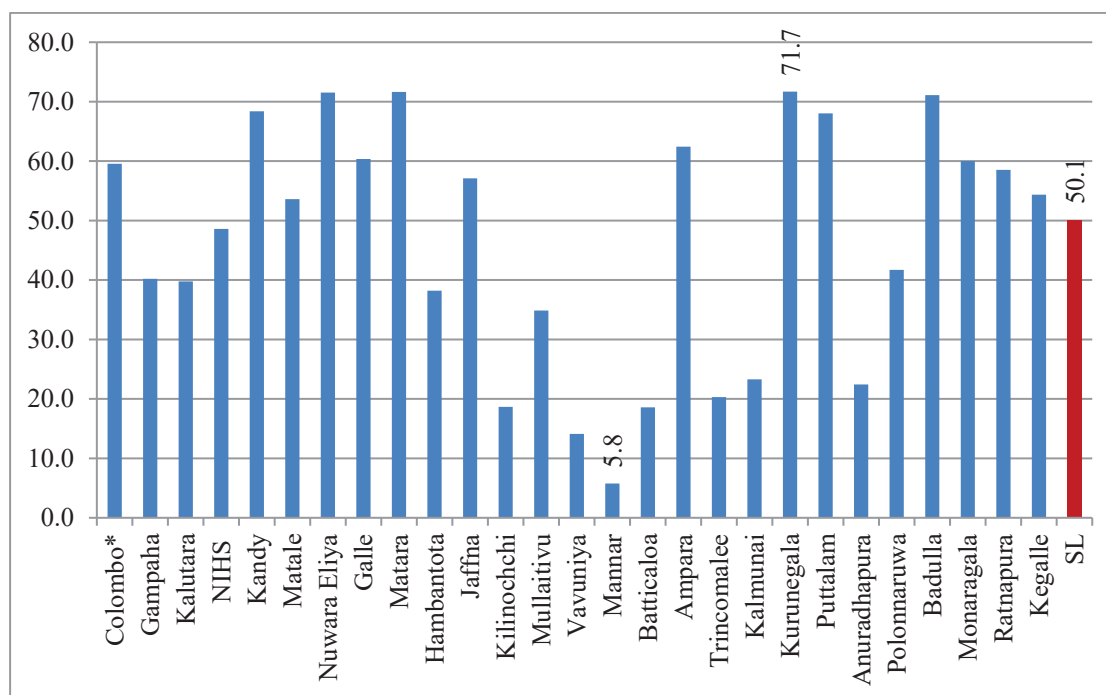


Fig. 6.3 (b): Percentage of children treated by SDTs, out of those who needed treatments during the year 2021: district variation

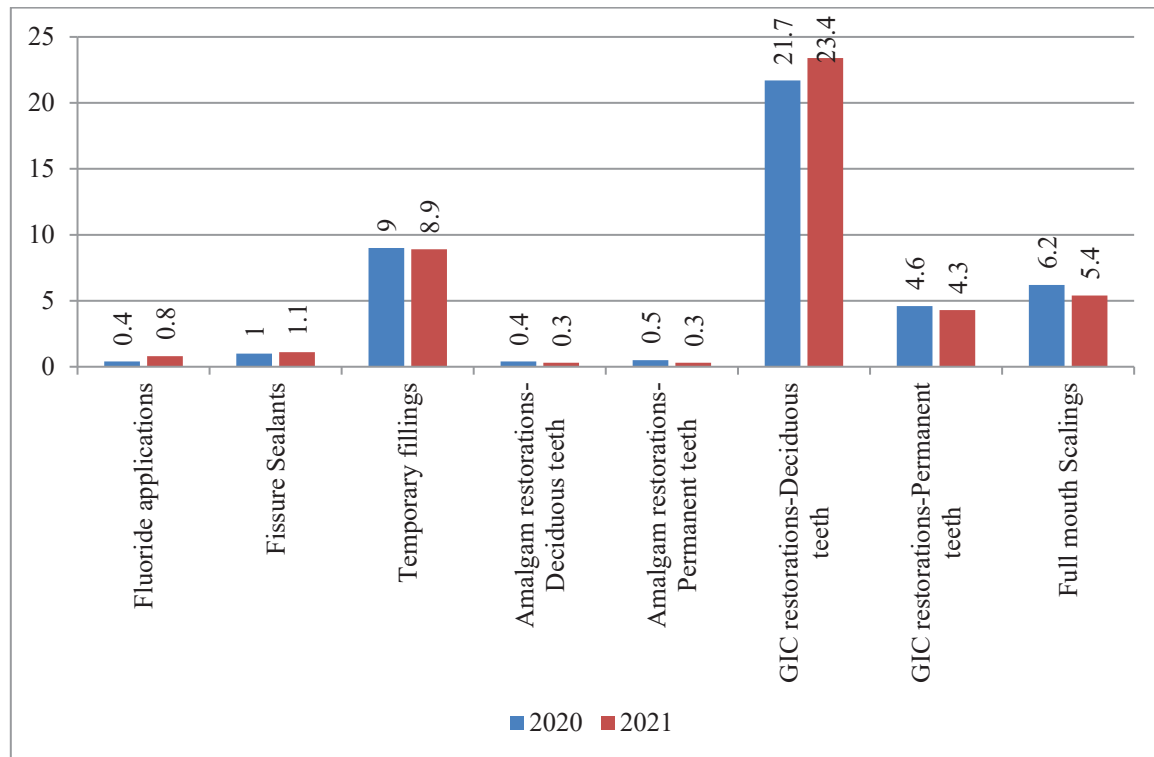


According to Table 6.1 when considering national figures, there were 1,073,316 children within the target groups in 2020 and 1,076,707 children in 2021. Out of that population, only 348,965 children in 2020 (32.5%) and 359,912 children in 2021(33.4%) were screened by SDTs.

Out of children screened in 2020, only 51.5% were identified as having a need for dental treatment, while in 2021 that percentage increased to 52.6%. According to figures 6.3 (a) and (b), out of those who needed treatments, 60.9% of children were treated during the year 2020, while only 50.1% of children were treated during the year 2021. In both the years 2020 and 2021 the highest percentages were reported from Kurunegala district (82.8% and 71.7%), while the lowest percentages were reported from Mannar district (6.8% and 5.8%).

Figure 6.4 explains the monthly average numbers of selected types of treatments carried out by a single SDT in the years 2020 and 2021.

Fig. 6.4: Monthly average numbers of selected types of treatments carried out by a single SDT in the years 2020 and 2021



According to whole island data of selected types of treatments per single SDT per month in both years 2020 and 2021, the most common type of treatment carried out was GIC restorations of deciduous teeth with average values of 21.7 and 23.4 respectively. But Fluoride applications and Fissure Sealant applications were done rarely in both years with average values of less than one treatment per month per SDT for Fluoride applications and around 1 treatment per month per SDT for Fissure Sealants.

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