



# University of Jaffna



**Dr. M. Ganesaratnam**  
**Memorial Lecture – 2022**

**“Surgery Beyond the Scalpel”**

by

**Dr. Satish Kumar Goonesinghe**

MBBS(Col), LLB(OUSL), MS(Col), MA(Kel), FRCS(Edin), FCSSL  
President, The College of Surgeons of Sri Lanka  
and Consultant Urological Surgeon

on

***Monday, 05<sup>th</sup> December 2022***  
***at 3.00pm***

at

**Hoover Auditorium**  
**Faculty of Medicine, University of Jaffna.**

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# Message from the Vice-Chancellor

It is indeed fitting that the University of Jaffna has chosen to honour Dr. Ganesaratnam, who served the community and the country in important ways, by way of organizing a lecture in his memory. Dr. Ganesaratnam was an eminent General Surgeon and a Past President of the College of Surgeons of Sri Lanka. He contributed immensely to the field surgery in Sri Lanka, especially in Northern part of the country, during the most difficult of times. He gave exceptional leadership to the field of medicine and surgery when he was attached to the Jaffna Teaching Hospital as Consultant Surgeon for over two decades. He tirelessly performed surgeries in trying circumstances and under difficult conditions to save the lives of thousands of war victims. Moreover, his contribution to the Faculty of Medicine of the University of Jaffna in conducting Professorial and Clinical Surgery was most recognized and will be remembered forever. His selfless professional services speak of his humanitarian outlook and his deep commitment to social wellbeing.

I am very pleased that Dr. Satish Kumar Goonesinghe, President of the College of Surgeons of Sri Lanka and Consultant Urological Surgeon, Karapitiya Teaching Hospital, Galle, Sri Lanka, has agreed to give this year's Dr. Ganesaratnam Memorial Lecture. Dr. Goonesinghe excels in the field of surgery. He received his education and training in the area of surgery at the University of Colombo, National Hospital of Sri Lanka and the Royal Hallamsire Hospital, Sheffield, UK. He won the Fellowship of the Royal College of Surgeons of Edinburgh in

1999. His academic and professional credentials too many to list here. Dr. Goonesighe has served different parts of Sri Lanka and is respected for his commitment to the medical profession, teaching and social work.

I am confident that Dr. Satish Kumar Goonesinghe's lecture will inspire many youngsters to take up the challenges associated with the medical profession with courage and confidence.

I wish to express my sincere thanks and gratitude to Dr. Satish Kumar Goonesinghe for consenting to deliver the Memorial Oration despite his busy schedule.

May Almighty God bless him with peace and prosperity.

**Prof. S. Srisatkunarajah**  
B.Sc.(Hons) Jaffna, PGDE (Merit) OUSL  
Ph.D (Heriot-Walt)  
Professor in Mathematics  
Vice-Chancellor  
University of Jaffna

## **Dr M Ganesaratnam Memorial Lecture 2022**

### ***Surgery beyond the scalpel***

**Satish K Goonesinghe**

#### **Dr Mailoo Ganesaratnam**

This lecture is held in the memory of a great Sri Lankan surgeon who has made a major imprint in Sri Lankan surgery as an excellent teacher, dedicated surgical trainer, committed surgeon *par excellence* and a prominent national surgical leader. He occupies a special place in the minds of the people of Jaffna and the Northern Province as a dedicated surgeon who served them with utmost dedication during the most difficult times.

He had his initial education at Royal College, Colombo and later moved to Jaffna with his parents and studied at St John's College. After entering the Faculty of Medicine, Peradeniya of the then University of Ceylon, he displayed his brilliant academic prowess with excellent results. After graduation, he sat for the primary FRCS and thereafter proceeded to the UK for his postgraduate studies. He obtained the Fellowship of the Royal College of Surgeons of England – the FRCS in 1976.

Before coming to Jaffna in 1989, he served as a Consultant Surgeon in different parts of the country for 13 years. The late Dr Ganesaratnam worked and provided dedicated surgical services to the people tirelessly under difficult circumstances in Jaffna until 1995. He played a pivotal role in medical education during his tenure in Jaffna.

Thereafter moved to the National Hospital of Sri Lanka, Colombo in 1995, where he excelled in his work. His talents in hepato-biliary- pancreatic surgery and laparoscopic surgery are well known. He was an examiner on postgraduate surgical examinations and served as a member of the Board of Study in. Medicine, Postgraduate Institute of Medicine, University of Colombo. Even though he moved to Jaffna he continued links with the University of Jaffna. During his tenure in Jaffna, he was appointed as a Visiting Lecturer in Anatomy and Surgery from 1990 to 1995. He was appointed a Visiting Professor in Surgery from 2004 to 2006. He served in the Council of the University from 1992 to 1996. He led the vibrant Jaffna Medical Association as its President from 1992 to 1994.

He has published widely and has delivered the Canagaratnam Memorial Oration on “Prevention of Illness” and the Sivapathasunderam Oration on “Injuries in Children” He led all Sri Lankan surgeons as the President of the College of Surgeons of Sri Lanka with dedication in 2007. During his tenure as the College President, he led many academic, professional and fund-raising initiatives of the College.

He practiced surgery with compassion and dedication into his retirement. Dr Ganesaratnam left us 5 years ago on 3rd October 2017.

## **Surgery beyond the Scalpel**

### ***The past***

Surgery is a medical specialty with a long history. Mechanical interventions to cure disease have been documented in ancient pharaonic times in Egypt, Indian and Sri Lankan literature. In Jaffna, there is evidence of surgery performed according to *Susruta sanhithai* in Siddha Medicine. They had been apparently performed by barber surgeons known as *pariyariyar*. We also see a parallel phenomenon of barber surgeons in the west too with the advent of surgery as we know today.

### ***Modern surgery***

Modern surgery is founded on strong scientific principles. Gone are the days of mere removal of body parts, organs or parts of thereof. The present-day surgeon plays a pivotal role in the prevention, cure, palliation, restoration of structure and function of patients. Interestingly, the surgeon plays a role in prevention of disease. *e.g.*, prophylactic colectomy in patients with familial polyposis coli to prevent colorectal cancer, prophylactic mastectomy selected patients with strong risk factors including mutations in *BRCA1* and *BRCA2* genes. We now do not see radical disarticulation of limbs in osteosarcomas. The trend here is towards limb preservation and restoration of function. Quality of life in the patient is a major consideration in modern day surgery. Minimal access surgery and “enhanced recovery after surgery” protocols (ERAS) have reduced length of hospital stay and enhanced patient comfort.



### ***Modern surgery: blurring boundaries and redefining roles***

Modern surgery is in a state of flux with modern inventions and the development of new treatment methods and protocols. Furthermore, the traditional boundaries between surgery and medicine are getting **blurred**. With the advent of modern H2 receptor blockers, proton pump inhibitors, prokinetics etc, we rarely see complications of peptic ulcer disease. In the case of benign prostatic hyperplasia, medications such as alpha receptor blockers and 5-alpha reductase inhibitors have almost halved the number of prostate operations world-wide. At the same time we see cardiologists inserting stents to coronary arteries, closing atrial septal defects etc using minimally invasive methods. We see interventional radiologists performing procedures obviating the need for traditional surgery. These prove that the role of the surgeon is being redefined with these changing boundaries that are continuing to evolve.

### ***The Healing Relationship***

In a situation of illness / disease, there is an *illness relationship* between the patient and the doctor.

#### *1. The fact of illness*

This puts the patient in a vulnerable and dependent position and creates an *unequal* relationship with the doctor.

#### *2. The act of profession*

This implies a promise to help / to treat the patient.

### 3. *The act of medicine*

This includes actions that will lead to a medically competent healing decision – medication, procedures or surgery.

However, we are moving out of the traditional paternalistic model of doctor-patient relationships with primacy given to patient autonomy. When we appreciate transcultural variations, we continue to observe paternalistic models continuing to operate in Sri Lanka.

#### *Attributes of a good doctor*

As medical doctors we are committed to delivering clinical excellence. In order to achieve clinical excellence, we need to possess four important attributes –

1. Technical prowess
2. Analytical thinking
3. Effective communication
4. Resilience

(Prof Arosha Dissanayake, Induction Address, The Ceylon College of Physicians, 2022)

*Technical prowess* includes the possession of up-to-date knowledge about disease conditions and their treatment; excellent bedside clinical skills; the ability to perform well-reasoned and focused **relevant** and **appropriate** diagnostic procedures.

In *analytical thinking*, we need to have the ability to understand and solve complex clinical problems by analyzing them to arrive at a comprehensive differential / definitive diagnosis; determination of the most suitable investigations and the institution of patient-centred care.

Most of the problems/ crises in patient management occur with defective communication. *Effective communication skills* are a key attribute that we all should possess.

We also need to be *resilient* as clinicians – the capacity to survive a crisis. Resilience is not mere survival of a crisis – but coming out of the crisis with a greater ability to face up to similar situations in the future. Resilience is nuanced in different situations and contexts – surgery, institutions, pandemics.

### ***Multiple Roles of the Surgeon; Beyond the Scalpel***

The Surgeon's role in patient care, transcends the traditional role of assessment and the mere performance of surgery. A surgeon who delivers clinical excellence should possess many key attributes.

1. Professionalism
2. Compassionate leadership
3. Improvisation, innovation, and development
4. Amenability and adaptability
5. Research orientation

We should always display a high degree of ***professionalism***. The contents of this attribute are vast and subject to variable interpretations. This encompasses utmost

dedication, focused and purposeful planning. Identification of the clinical problem / problems and defining priorities (including *change in priorities* and their dynamics with time), focused and purposeful planning.

As surgeons / clinicians we are leaders. As clinical leaders, we hold positions in trust for the benefit of the patients, akin to an equitable trust we see in law. We need to lead our teams with compassion. Compassion is a core human value, and it is taught in all major world religions. Compassion needs to emanate transcending all boundaries and it flows from deep within us. We should never lead as insensitive dictators but as **compassionate leaders**. Compassionate leadership binds us together and creates a sense of safety and interconnectedness. Being compassionate does not mean being always soft and accommodating every matter. It has been shown that compassionate leadership improves staff wellbeing, patient experience and patient outcomes.

The scope of teamwork needs to move farther afield with **multi-disciplinary team** deliberations in planning effective and purposeful patient management. Gone are the days of decision-making by a single individual in certain clinical situations.

As surgeons we need to **improvise, innovate, and develop** with a positive approach. Most of the successful surgical units in the regions have developed to be centres of excellence through the adaptability, improvisation capabilities blended with **amenability** and commitment of our “frontier” pioneer surgeons.

This phenomenon continues to happen in our country today. Our **amenability** in the face of local crises, wars and disasters and pandemics too are vital. It is essential to emphasize the importance of sharing of units and the further development of existing units

**Research** forms a key component in modern surgery. We need to move beyond the scalpel to be effective research to the country and the world at large. Research can range from simple to complex studies; clinical audits to randomized controlled trials. There needs to be an active role played by national bodies, universities and professional colleges and organizations. Unfortunately lack of funds is a major limiting factor in Sri Lanka. Research motivation is vital in the government sector.

## **Conclusion**

The modern-day surgeon needs to possess many key attributes going beyond mere surgical skills. A skilled surgeon with compassion, professionalism, commitment, amenability with mind towards research will always provide excellent surgical care to a patient at all times.



Dr. Satish Kumar Goonesinghe, MBBS(Col), LLB(OUSL), MS (Col), MA(Kel), FRCS(Edin), FCSL, President of the College of Surgeons of Sri Lanka, Consultant Urological Surgeon, Karapitiya Teaching Hospital, Galle, Sri Lanka. He had his secondary education at Nalanda Vidyalaya, Colombo and won the N.M.De.S Wickramasinghe Memorial Gold Medal for the best all-rounder student at the school in 1981. In 1991 he graduated from Faculty of Medicine, University of Colombo with Second Class Honors division. Following this, he entered the Sri Lankan postgraduate training programme in surgery in 1993 and obtained Master of Surgery (MS) from the PGIM, University of Colombo in 1997 and chose to specialize in urological surgery and had his training in National Hospital of Sri Lanka and the Royal Hallamshire Hospital, Sheffield, UK. Also, he obtained the Fellowship of the Royal College of Surgeons of Edinburgh in 1999 (FRCSEd). Further, he obtained Board certified specialist in Urological Surgery by the Postgraduate Institute of Medicine, University of Colombo in 2000. Took up his first appointment as a Consultant Urologist in District General Hospital, Kurunegala and spent a short tenure in the Anuradhapura Teaching Hospital in 2008. Currently he has been working as a Consultant Urological Surgeon at Teaching Hospital Karapitiya, Galle since 2008 – 14 years.

Along with, he studied for a Bachelor of Laws (LLB) degree at Open University of Sri Lanka and graduated in 2008. Called to the Bar as an Attorney at Law of the Supreme Court in 2009. Obtained a Master of Arts in Buddhist Studies [MA (Buddhist Studies)] with merit from the Postgraduate Institute of Pali and Buddhist Studies, University of Kelaniya in 2019.

Besides, he joined the CSSL Council in 2004 during Prof Mohan De Silva's presidency. Editor, the Suture, the College of Surgeons of Sri Lanka Newsletter for three consecutive years bringing out 6 issues each year. He was the council member of CSSL in following years, 2004 - 2006, 2008, 2011, 2013, 2018 – 2019. In addition, he was the Congress Chairman, Sri Lanka Surgical Congress 2019 held in Galle and Vice President (2020), President Elect (2021).