

Practising psychiatry in Sri Lanka: challenges and opportunities

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This month's issue of *BJPsych International* focuses on psychiatry in Sri Lanka, with articles on suggested improvements in education and training, the country's outdated legislation regarding involuntary psychiatric treatment, and the misuse of prescription medications.

Our theme this month concerns the practice of psychiatry in Sri Lanka, with three related articles by Hapangama and colleagues. The first of these concerns the training of medical students and postgraduate education in psychiatry.¹ Throughout the world, as medicine advances, one might expect the attitude of medical students to have evolved towards greater interest in and empathy for mental illness, among their peers and patients. Recent research (e.g. Wang et al, 2016;² Pascucci et al, 2017³) suggests that negative attitudes persist. In Sri Lanka, the place of psychiatry in the medical school curriculum is not prominent, and the authors propose introducing a post-graduate internship in psychiatry as an option during foundation year training. It would be interesting to see how enthusiastically this option is selected.

A second article considers the need for an updated version of Sri Lanka's mental health legislation concerning the management of involuntary patients.⁴ Some elements of the existing law date back to the days of British governance in the 19th century, and reform has been pending for decades. It is concerning to learn that current official guidance mandates involuntary treatment in just one hospital, which is located in Colombo,

so patients may be held 'on remand' for weeks in other parts of the country before their transfer can be arranged.

Finally, the authors draw our attention to the problem of drug misuse in Sri Lanka, with a focus on the ready availability of prescription drugs that are effectively unregulated.⁵ As we know from the epidemic of misuse of drugs such as OxyContin in the USA and Europe, even if there are controls on who has a license to prescribe, these can easily be undermined. The concerns expressed here about the ready availability of mind-altering legal medications are not confined to Sri Lanka.⁶

Declaration of interest

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References

- 1 Hapangama A, Kuruppuarachchi K, Hanwella R. Achievements and challenges in psychiatric education and training in Sri Lanka. *BJPsych Int* 2023; this issue.
- 2 Wang PW, Ko CH, Chen CS, Yang YHC, Lin HC, Cheng CC, et al. Changes of explicit and implicit stigma in medical students during psychiatric clerkship. *Acad Psychiatry* 2016; 40: 224–8.
- 3 Pascucci M, Ventriglio A, Stella E, Di Sabatino D, La Montagna M, Nicastro R, et al. Empathy and attitudes towards mental illness among Italian medical students. *Int J Cult Ment Health* 2017; 10: 174–84.
- 4 Hapangama A, Mendis J, Kuruppuarachchi K. Why are we still living in the past? Sri Lanka needs urgent and timely reforms of its archaic mental health laws. *BJPsych Int* 2023; this issue.
- 5 Hapangama A, Kuruppuarachchi K. Sri Lanka's response to prescribed drug misuse: is it enough? *BJPsych Int* 2023; this issue.
- 6 Morley KI, Ferris JA, Winstock AR, Lynskey MT. Polysubstance use and misuse or abuse of prescription opioid analgesics: a multi-level analysis of international data. *Pain* 2017; 158: 1138–44.