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சுகாதாரம், போசணை மற்றும் சுதேச வைத்திய அமைச்சு  
Ministry of Health, Nutrition & Indigenous Medicine

General Circular No: 01-14/2018

To: All Provincial Directors of Health Services,  
All Regional Directors of Health Services,  
All Heads of Institutions including Medical Officers of Health

**Banning of betel quid chewing and selling of betel quid, tobacco and areca nut products in hospital premises and all other healthcare facilities**

Betel chewing is considered as a socially and culturally accepted habit among Sri Lankans from the historical times and is continuing in the same manner. However, there is sufficient scientific evidence that chewing betel quid with or without tobacco, and chewing tobacco and areca nut mixed products, are to be major risk factors for oral cancer.

In Sri Lanka, betel chewing is more prevalent in the rural communities when compared to urban communities. This was more prevalent among older age groups. However, there is an emerging trend of increased usage of commercially as well as self-prepared smokeless tobacco and areca cut products among younger age groups. Unhealthy habits acquired younger age are more likely to last longer and more difficult to reverse. Non Communicable Risk Factor Survey (STEPS Survey) Sri Lanka 2015, reported that among the adults aged 18-69 years - more than one fourth of males (26.0%) and nearly 5% of females are currently using smokeless tobacco. The National Oral Health Survey 2003, showed a betel-chewing prevalence of 34% among 34 - 44 year olds and 47.7% among 65 -74 year olds.

Oral cancer is traditionally defined as squamous cell carcinoma of the lip, oral cavity and oropharynx. According to cancer incidence data in year 2010, lip, oral cavity and oropharyngeal cancers accounted for 14.3% of all reported cancers in Sri Lanka and it is the commonest cancer among males. Out of new cancer cases reported among males in 2010, 24% were cancers of the lip, oral cavity and pharynx. Apart from being a major risk factor for oral cancer, there are other health and cosmetic effects of betel chewing such as cracked lips and tongue, attrition of teeth, discoloration of mouth and teeth. Such effects may contribute towards personality problems of these betel chewers. The betel spit can make the environment unpleasant and could be considered as a major threat to the cleanliness of the institutional environment.

Therefore, a decision has been made at the National Advisory Committee on Prevention and Control of Cancers, which was held on 24 November 2017, to ban betel quid chewing within hospital premises and all other healthcare facilities with immediate effect. Furthermore, selling of betel quid and any form of tobacco and areca nut products within hospital premises and all other healthcare facilities will be banned.

All the heads of institutions should take responsibility to ensure that their institutions are free of betel quid chewing and selling. Appropriate disciplinary actions should be taken against if any employee continue to not to adhere to above instructions. If any person wants to quit the habit but in difficulty due to addiction, they should be referred for a dental surgeon.

All the Provincial and Regional authorities are advised to take necessary measures to facilitate and coordinate this initiative in order to reduce the burden of oral cancer and other related health problems in Sri Lanka.

If you need any further clarifications please contact the Director or Consultant in Community Dentistry of National Cancer Control Programme (Tel: 0112368627).

**Janaka Sugathadasa**  
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**Janaka Sugathadasa**  
Secretary  
Ministry of Health, Nutrition & Indigenous Medicine

cc: Hon. Minister of Health, Nutrition & Indigenous Medicine - for your information please  
Deputy Minister of Health, Nutrition & Indigenous Medicine - for your information please  
All Provincial Health Ministers  
All Provincial Health Secretaries  
Director General of Health Services  
All Deputy Director Generals  
Director - National Cancer Control Programme  
Director - NCD  
Director - Dental Services  
Director - Mental Health  
Director - Primary Care  
Director - Family Health Bureau  
Provincial Consultant Community Physicians/ Consultants in Community Dentistry  
Chief Medical Officer (School Health)  
All Regional Dental Surgeons  
All Medical Officers (Non Communicable Diseases)  
All Medical Officers (Maternal and Child Health)