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The Galle Medical Association

GMA Office

National Hospital Galle

Galle

SRI LANKA

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Tel/Fax: +94 91 2232560

E-mail : gmj@gma.lk

gmjgalle@gmail.com

Web Site: www.gma.lk

Internet Home Page:

<http://www.sljol.info/index.php/GMJ>

Editorial

The numeric face of human disease: In diagnosis, treatment and prognostication

Disease entails disordered structure and/or function of a complex biological system of *Homo sapiens*. The complexity and heterogeneity of variables and attributes in some situations make it difficult to arrive at definitive diagnosis or to work with precision. The process of assigning numeric values to different factors helps to arrive at a score at global or subdomain level.

Different scoring systems in both clinical and non-clinical spheres have immensely helped patient management. Scoring systems help in the diagnosis and risk assessment, prognosis, triage and resource allocation and monitoring disease progression. The APACHE (Acute Physiology and Chronic Health Evaluation) score and SOFA (Sequential Organ Failure Assessment) score are predictive scoring systems in critical care situations. The well-known Glasgow Coma Scale (GCS) help in the triage and subsequent monitoring of patients with head injuries. There is a multitude of clinical scoring systems across clinical specialties.

In their paper Gunaratne and Makarim in this issue of *GMJ* consider the predictive value of a region-appropriate scoring system - the TICS (Tropical Intensive Care Score) - with globally used scoring systems; APACHE, SOFA in the assessment of the critically ill in a relatively resource-poor situation. This paper highlights the suitability of globally used scoring systems under different circumstances.

Scoring systems are used beyond clinical disciplines as well. *e.g.* in diagnostic histopathology, the Gleason system in prostate cancer - based on architectural patterns of cancer cells and the Bloom-Richardson System in breast cancer-based on cellular features are a few examples. Scoring systems are widely used in beyond medicine as well.

Scoring uses structured systems to quantify and evaluate complex concepts by converting qualitative observations into numerical data. It additionally helps to compare data between centres, different studies and meta-analyses and systematic reviews.

Satish K Goonesinghe

Eisha I Waidyarathne

Editors - The Galle Medical Journal