



WORLD DAY TO END OBSTETRIC FISTULA 2018

According to the UN, Obstetric Fistula is one of the most serious and tragic injuries that can occur during childbirth. It is a hole between the birth canal and the bladder or rectum caused by prolonged, obstructed labour without treatment. The condition typically leaves women incontinent, and as a result they are often shunned by their communities. Sufferers often endure depression, social isolation and deepening poverty. The UN marks it on 23rd May, promoting action towards treating and preventing obstetric fistula, a condition that affects many girls and women in developing countries.

Causes

It is caused by prolonged obstructed labor, (labor that goes unattended and can last up to six or seven days).

The soft tissues between the baby's head and the pelvic bone are compressed and do not receive adequate blood flow.

The lack of blood flow causes this delicate tissue to die and where it dies, holes are created between the laboring mother's bladder and vagina and/or between the rectum and vagina.

Symptoms

- The continuous leakage of urine and/or faeces
- Foul-smelling vaginal discharge.
- Repeated vaginal or Urinary Tract Infections
- Irritation or pain in the vagina or surrounding areas
- Pain during sexual activity

Predisposing Factors

- Obstructed/blocked labor leading to poor blood flow to the affected area for a prolonged period
- Poor access to medical care
- Malnutrition
- Teenage pregnancy as a result of early marriages and early child bearing age

Types of Obstetric Fistula

1. Vesico-Vaginal Fistula (VVF): hole between the bladder and vagina.
2. Urethra-Vaginal Fistula (UVF): hole between the urethra (bladder outlet) and vagina.
3. Recto-Vaginal Fistula (RVF): between the rectum and vagina.
4. Uretero-Vaginal Fistula: hole between the ureters (kidney tubes) and the vagina.
5. Vesico-Uterine Fistula: hole between the bladder and the uterus (womb).

Sometimes more than one type of fistula may occur at the same time, where damage is severe.

Complications

- Incontinence of urine and/or stool
- Chronic pyelonephritis, hydronephrosis and bladder stones
- Renal failure
- Vaginal stenosis (scarring) and dyspareunia (painful sexual intercourse)
- Pelvic inflammatory disease, amenorrhea and infertility
- Osteitis pubis (infection in the pubic bone and pubic symphysis)
- Depression and anxiety
- Social isolation and abandonment by husbands/partners
- Depression and grief related to infertility
- Inability to work
- Stigmatisation

Prevention:

- Delaying the age of first pregnancy and raising the legal age of marriage to prevent child pregnancy
- Cessation of harmful traditional practices such as female genital mutilation
- Timely access to obstetric care and emergency caesarean section for women in obstructed labour
- Better training of locally based nurses, midwives, doctors and surgeons
- National and regional policy on maternity care
- Providing girls and women with formal education, including health education concerning family planning, pregnancy and childbirth and involvement of the whole local community, including men, in promoting fistula awareness
- Combating poverty and malnutrition