

# Obstetric fistulae in South Sudan: a paradigm shift in repairs is required

Obstetric fistula (OF) is an abnormal communication between the vagina and the bladder/urethra and/or the rectum, which results in the passage of urine and/or faeces through the vagina. This occurs because during obstructed labour, the bladder, the vagina, and the rectum are compressed between the baby's head and the pelvis leading to ischaemic necrosis of the areas involved thus leading to either vesicovaginal fistula (VVF) or rectovaginal fistula (RVF) or both.<sup>[1]</sup> It is the severest complication of prolonged obstructed labour.<sup>[2]</sup> The World Health Organisation estimates that approximately two million women suffer from OF. About 200-500 cases of OF occur per 100,000 deliveries, with an overall estimate of 0.8 per 1,000 birth.<sup>[3]</sup> The OF case fatality rate in South Sudan is 3.5% and it is high in at least three States mainly Lakes States, Unity State, and Jonglei State.<sup>[4]</sup>

## Obstetric fistulae repairs in South Sudan

The Ministry of Health estimates that there are about 60,000 women living with OF in South Sudan and only about 1,000 of them have had surgical repairs and treatment. Almost all of these surgical repairs of OF were performed during OF camps in various States. These OF camps are sporadic and cannot keep pace with the huge backlog of cases and the ever-increasing numbers of new patients. The OF repairs were mainly done by expatriate fistula surgeons and none by South Sudanese surgeons. The overall cost of one fistula management is about \$1,500<sup>[5]</sup> which is expensive and an unsustainable.

## Paradigm shift in the treatment of obstetric fistulae

Obstetric fistulae repairs and treatment need to be done routinely in ALL Hospitals in South Sudan. It is essential to train LOCAL specialist physicians to treat women with OF. Concurrently, there should be a DELIBERATE effort in building and equipping Operating Rooms in the hospitals dedicated to OF management. Additionally, incentives need to be put in place to motivate the OF teams. Finally, a centre of excellence especially dedicated to the management of patients with OF needs to be built in South Sudan.

## References

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“About 200-500 cases of Obstetrics Fistula occur per 100,000 deliveries, with an overall estimate of 0.8 per 1,000 birth.”

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