



**KITOVU EXPERIENCE IN
DELIVERY OF QUALITY
FISTULA REPAIR AND CARE
SERVICES.**

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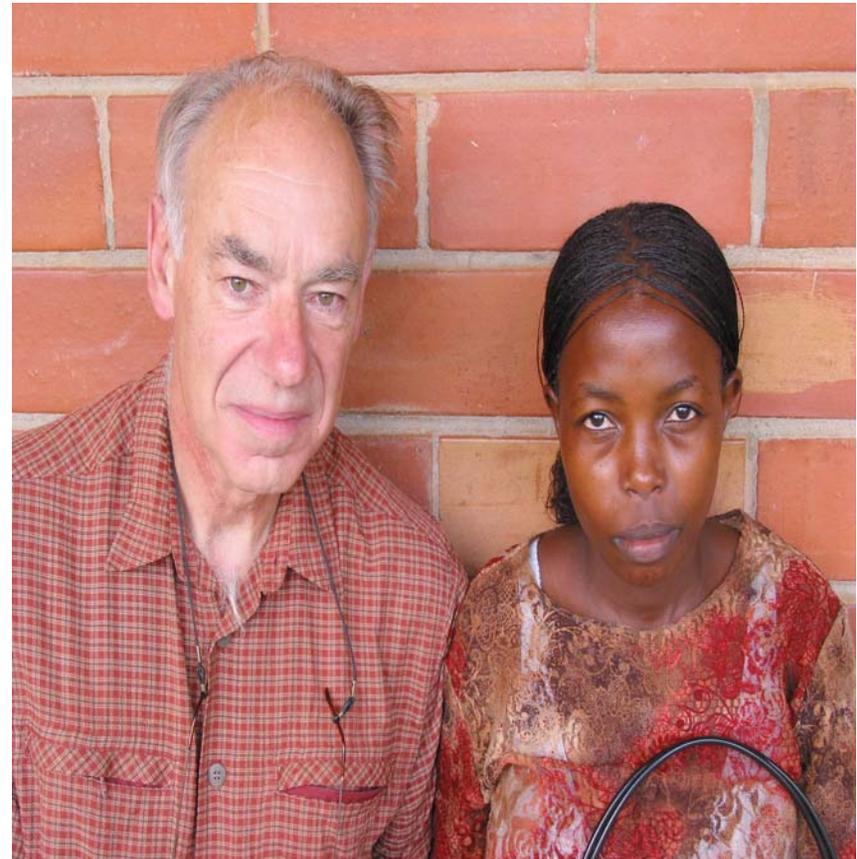
Background

Kitovu hospital Masaka Uganda has been providing Wholistic Care Services to the poor and needy since its foundation in 1955.

Aware of the special needs of survivors of obstructed labour who were disabled by continuous urine leakage (VVF) Dr. Maura (trained in Nigeria 1987) undertook Fistula Repair on presentation at Gynae clinic (elective surgical list), but this was not very satisfactory.

1993 - 2000

Visits from voluntary Expatriate Surgeon/Gynaecologists (Doctors John Kelly, and Brian Hancock) both of whom are still coming as Master Trainers to Kitovu as well as other centers.







2000

The New Millennium brought new hope. With growing awareness and consternation about the plight of women in the Developing World, Women's Dignity, Engender Health (USAID) and UNFPA in consultation/cooperation with Ministry of Health, have centered on factors influencing/ or lacking in the care of the Girl Child, in Maternal Health, Safe Motherhood etc. All this has been exciting and stimulating. With the support, cooperation and funding of the above along with the additional donations from Friends of Kitovu abroad and the voluntary Doctors, We have been empowered to undertake a **cost-free Fistula Repair** and Training Programme from 2004 (November)..

A new 28 bed Unit was completed and officially opened 2 April 2005 which has benefited over 1,300 Fistula women since 2006.



Training



- We are committed to 4 Training Workcamps per year - each with were 60 Repairs sponsored by Engender Health. Trainers and Trainees also sponsored by Engender Health.
- UNFPA has been committed to provide funds for Medical Supplies and Equipment for operations.
- TRAINERS, so far have been expatriate Surgeons/Gynaecologists who have devoted their time skills and experience of many years at Fistula work to train local Doctors



Trainees

Are nominated by MOH/and notified by them. From the beginning we have encouraged Trainees Doctors to bring as part of “Fistula Repair Team” the Theatre Nurse and one post –op care Ward Nurse to form Fistula Repair Team for training.



Challenges



- Trainees are notified late at their places of work and this means that Kitovu is also not notified in time, and Trainees have arrived at Kitovu at the last minute or even late for the first examination/assessment and come without any letter of introduction!
- They also have caused confusion and difficulties because of delayed funding/sponsorship

Recommendations



- Trainees – waiting lists for those who have expressed an interest in training (and not just for a sponsored outing!)
- The trainee doctors should follow a recognized training curriculum for repair of both simple and complicated fistulae.
- Certificates of competency, recognized by MOH should be awarded upon completion of training.

Further Challenges



- To make a difference and repair “all existing fistulae” Kitovu needs to be able to give continuous Fistula Repair Services as well as training of repair teams.
- To enable such a service, we need:
 - * A fully equipped Operating Theatre dedicated to Fistula work.
 - * Its own staff for theatre and post operative ward
 - * Physical Therapist needed for those patients with dropped foot and stress incontinence

Needs of Women after Repair

- Literacy – Adult Education
- Other skills, crafts etc.
- Capital for start-up of business/farming

Maternity services for safe delivery after repair





**Thank
You!**