Female Genital Fistula: Policy Implications of the changing landscape in Bangladesh

Abu Jamil Faisal, Nazmul Huda

Fistula Care Plus project, EngenderHealth, Bangladesh
We have no conflict of interest to declare
Female Genital Fistula

- Anatomic defect
  - Urinary tract and/or Colorectal tract with genital tract
- Obstructed labor
- Iatrogenic
- Pelvic or genital trauma
- Infection
Fistula Burden

• Globally 1-2 million women are living with fistula
• 50,000 to 100,000 are added every year
• In Bangladesh
  – 71,000 cases were estimated in 2003
  – Approximately 2000 new cases are added every year
Objective

- To explore the demographic profile of fistula cases
- To explore the direct causes of female genital fistula
- To explore the policy implications of preventing the occurrence of fistula
Methods

• Fistula cases who had repair surgery during 2012 to 2014 at National Fistula Center and three other major hospitals
• Data from clinical history sheet were analyzed
• Fistula was classified according to the decisions of the principal surgeon as recorded in the history sheet
Results: Age at Marriage

- **Over all mean:** 15.4 yrs
  - 95% CI: 15-15.8 yrs

- **Obstetric Fistula:** 15.5 yrs
  - 95% CI: 14.9-16.2 years

- **Iatrogenic Fistula:** 15.1 yrs
  - 95% CI: 14.5-15.6 yrs
Results: Age at incident/first delivery:

- Over all mean: 18.1 yrs – 95% CI: 17.6-18.6 yrs
- Obstetric Fistula: 18.4 yrs – 95% CI: 17.6-19.2 years
- Iatrogenic Fistula: 17.8 yrs – 95% CI: 17.1-18.4 yrs
ANC Utilization (n=210)

• Some ANC utilization: 28%
  – 4 or more visits 12%
  – <4 visit 16%

• No ANC utilization: 72%

• No significant difference between the Obstetric fistula and the iatrogenic fistula group ($p=.7$)
Institutional Delivery: Incident delivery for Obstetric Fistula and last delivery for the iatrogenic fistula

<table>
<thead>
<tr>
<th>Type of Fistula</th>
<th>Home delivery (%)</th>
<th>Hospital delivery (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obstetric Fistula</td>
<td>45%</td>
<td>55%</td>
</tr>
<tr>
<td>Iatrogenic Fistula</td>
<td>53%</td>
<td>47%</td>
</tr>
<tr>
<td>Over all</td>
<td>47%</td>
<td>53%</td>
</tr>
</tbody>
</table>

- No significant difference between Obstetric fistula and Iatrogenic Fistula Cases ($p=0.4$)
- Cases may be actually taken to hospital when complication happened
Results: VVF (89%), RVF (11%)
Conclusions

- Age of marriage and age of delivery did not appear as causal factor for fistula
- More than one fourth of all fistula cases were iatrogenic in nature.
- Hysterectomy operation was the most common source of iatrogenic fistula
- Timely referral in cases of home delivery
- Timely adequate obstetric care at facility
- Safe gynecological surgery when required
• More investigations required for understanding the changing scenario of the occurrence of genital fistula
• Accordingly shall have to develop specific prevention strategies
Thank You