

National Conference 2023

SEXUAL AND REPRODUCTIVE HEALTH

AND RIGHTS IN BANGLADESH

SHOWCASING RESEARCH THROUGH IDEAS, INGENUITY AND
INNOVATIONS

Fistula Elimination from Bangladesh: Way to 2030

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Let Us Hear Stories

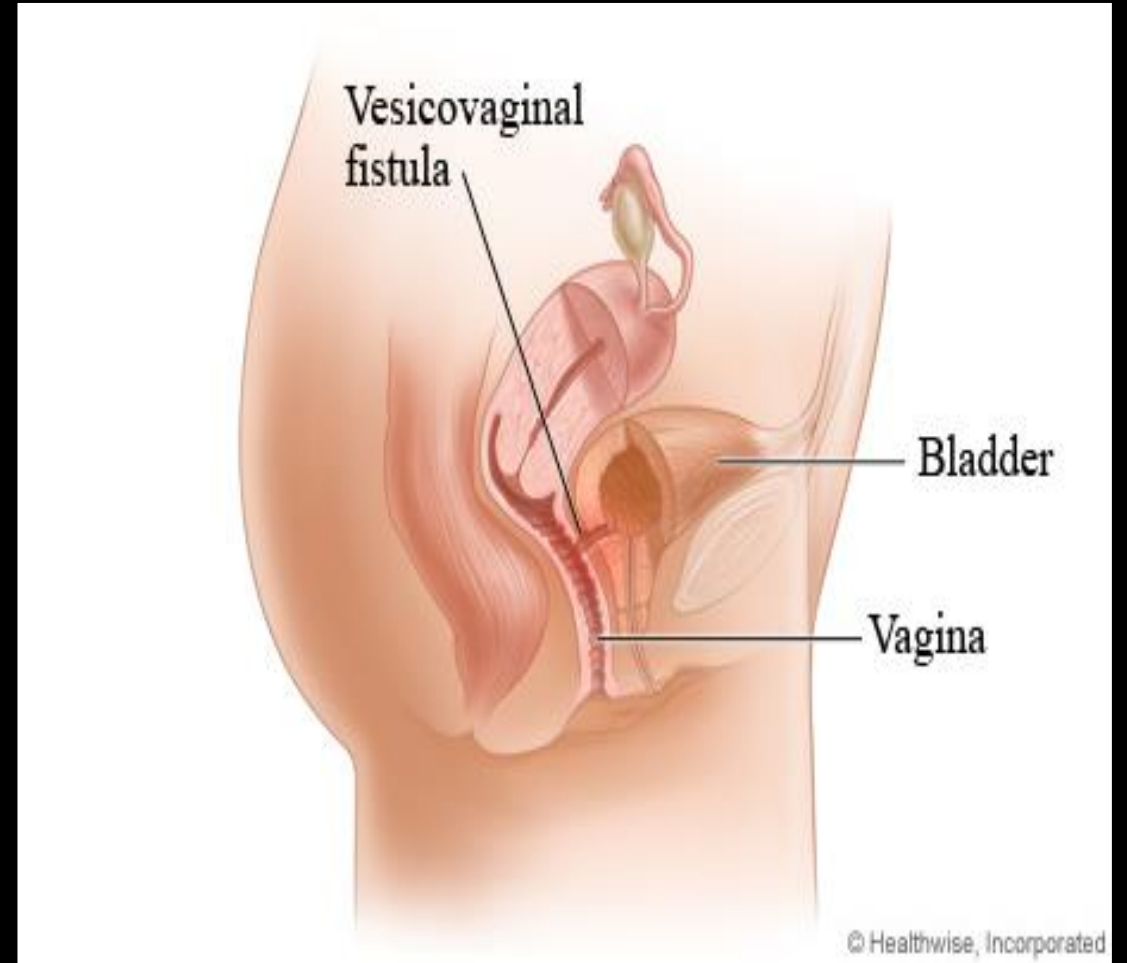
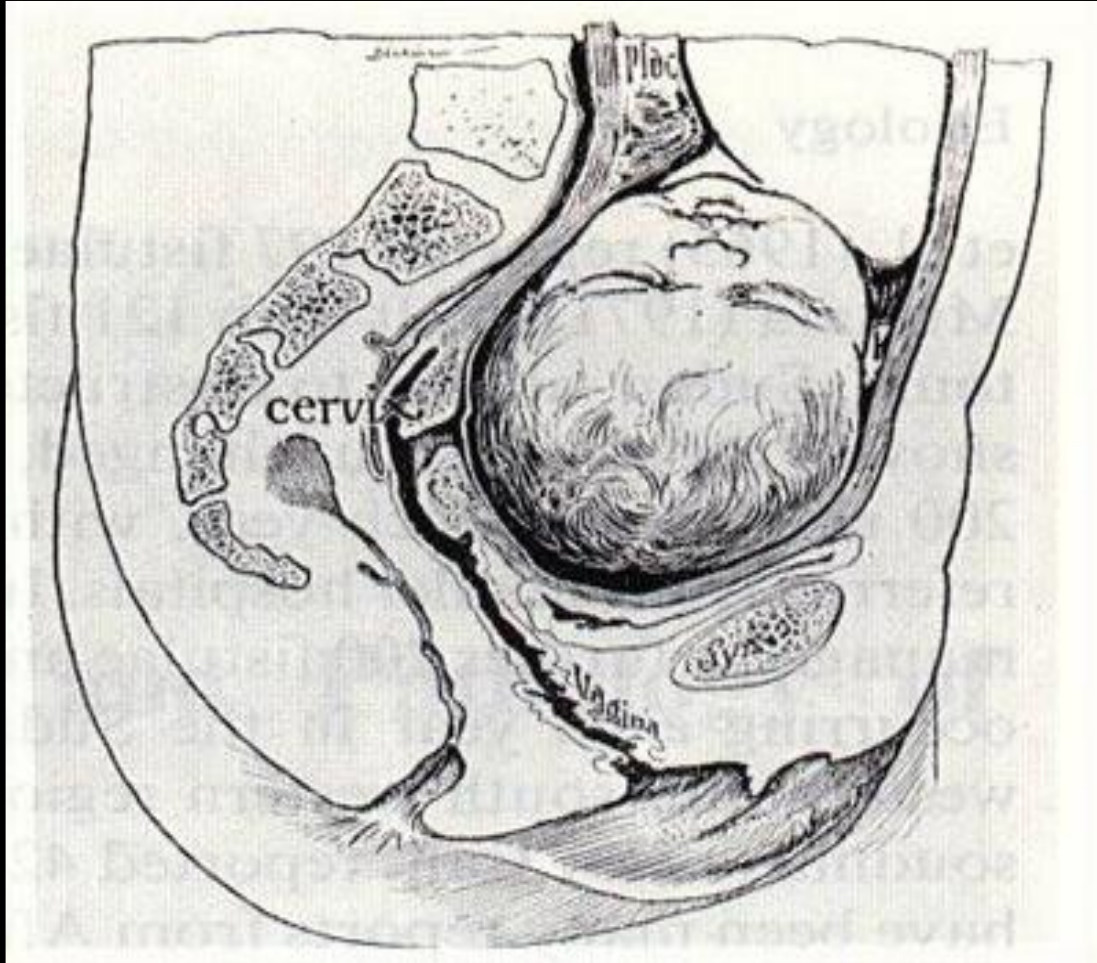


Facts about Female Genital Fistula

- Fistula is an abnormal connection of urinary bladder/rectum with birth passage.
- It occurs as a complication of neglected, prolonged and obstructed labor.
- There is continuous leakage of urine/stool through vagina.
- Sometimes fistula can also occur as a complication of surgeries like: caesarean section, hysterectomy etc.



Facts about Female Genital Fistula Cont...



Fistula Types

1

Obstetric

2

Iatrogenic

3

Traumatic

4

Congenital

5

Others

The Characteristics of Fistula Victims

Obstetric Fistula (OF)

OF victims: Young, poor, malnourished, illiterate, rural, suffer from gender discrimination and early marriage

Iatrogenic Fistula (IF)

IF victims: Typically in their thirties or older, married with 1 or 2 children, not necessarily poor or uneducated

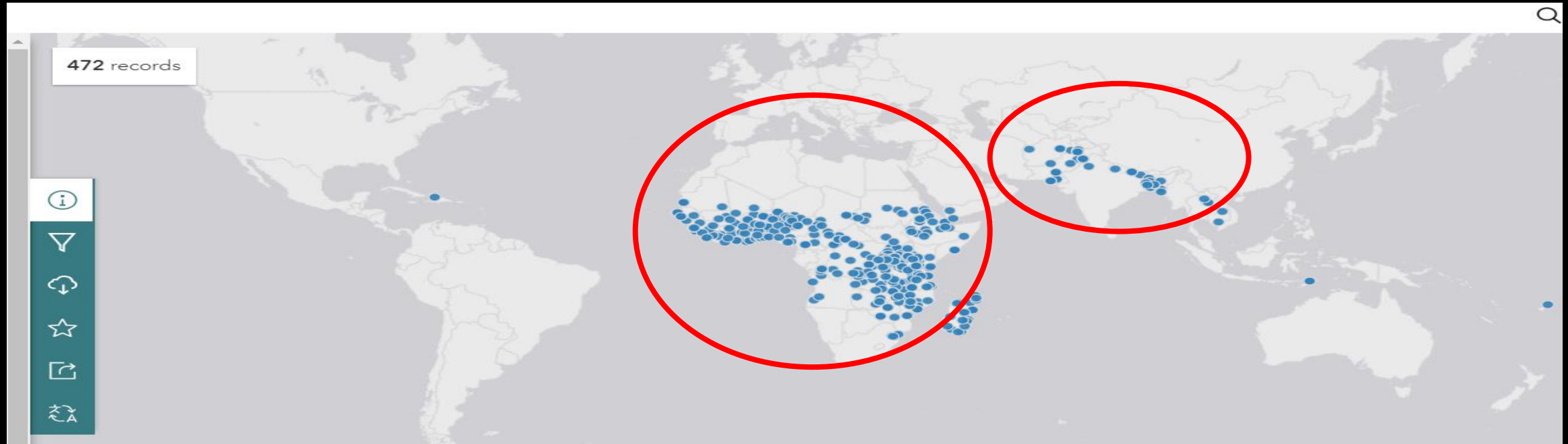
Both face social ostracization and inability to work due to debilitating incontinence

Lack of awareness and affordability to prevent access to treatment for most

Fistula: Across the Stages of Life



Global Fistula Scenario

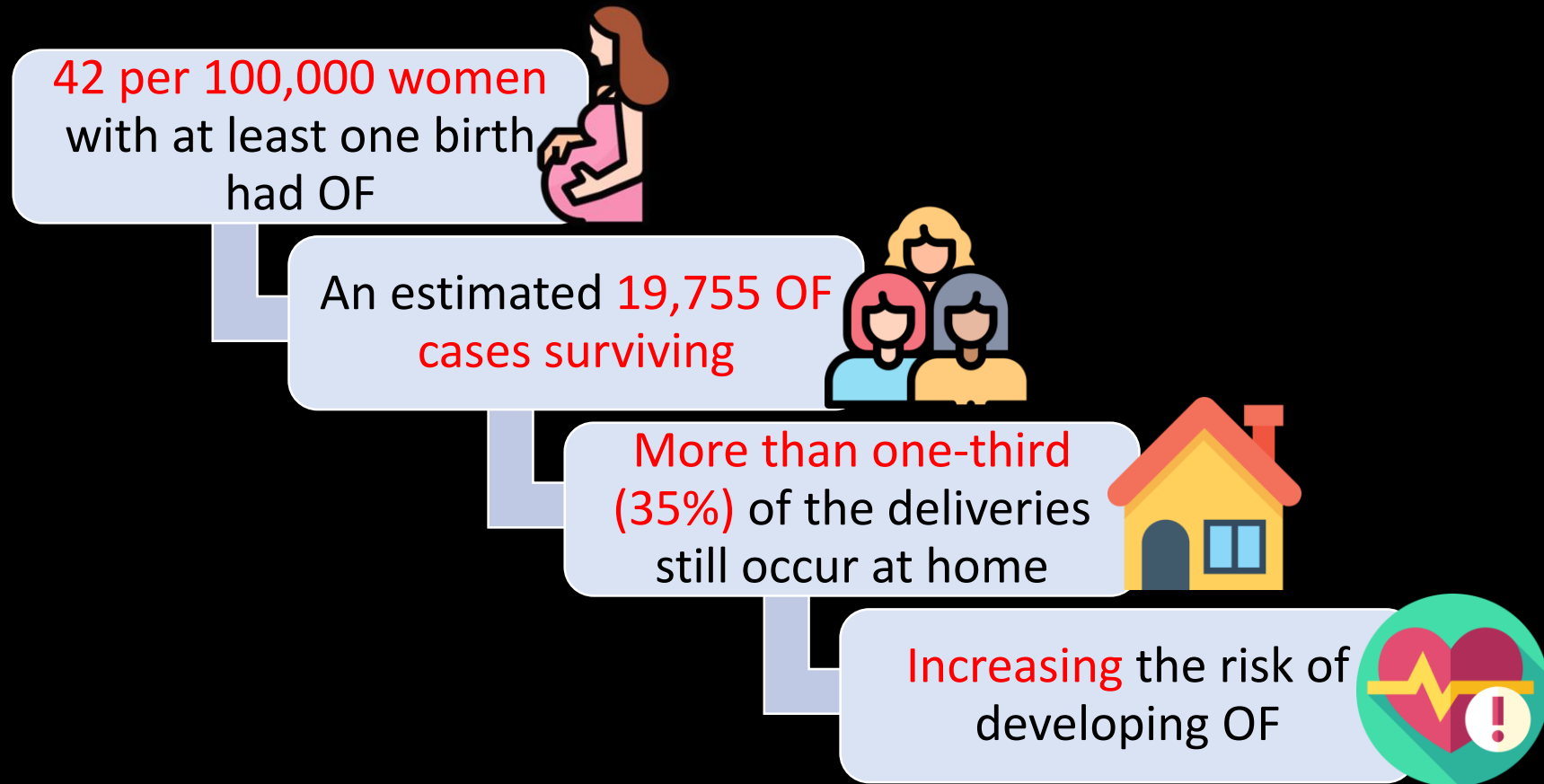


Fistula

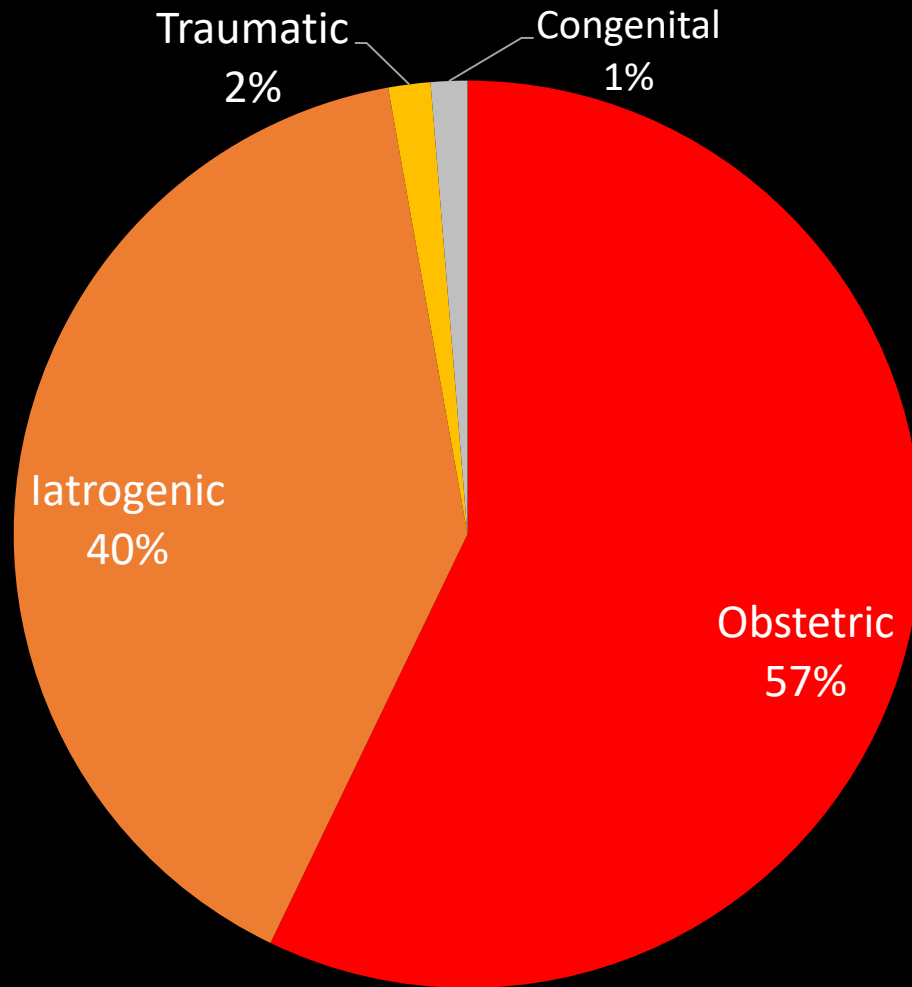
- ⚠ Develops 50,000-100,000 new cases per year globally
- ⚠ The most devastating maternal disability, prevalent in Sub-Saharan Africa and South east Asia
- ⚠ Affects more than 2 million women in Sub-Saharan Africa and Asia
- ⚠ Develops 2-3 cases per 1000 deliveries in countries where MMR is high

Fistula Scenario in Bangladesh

Obstetric fistula (OF):



Obstetric Fistula



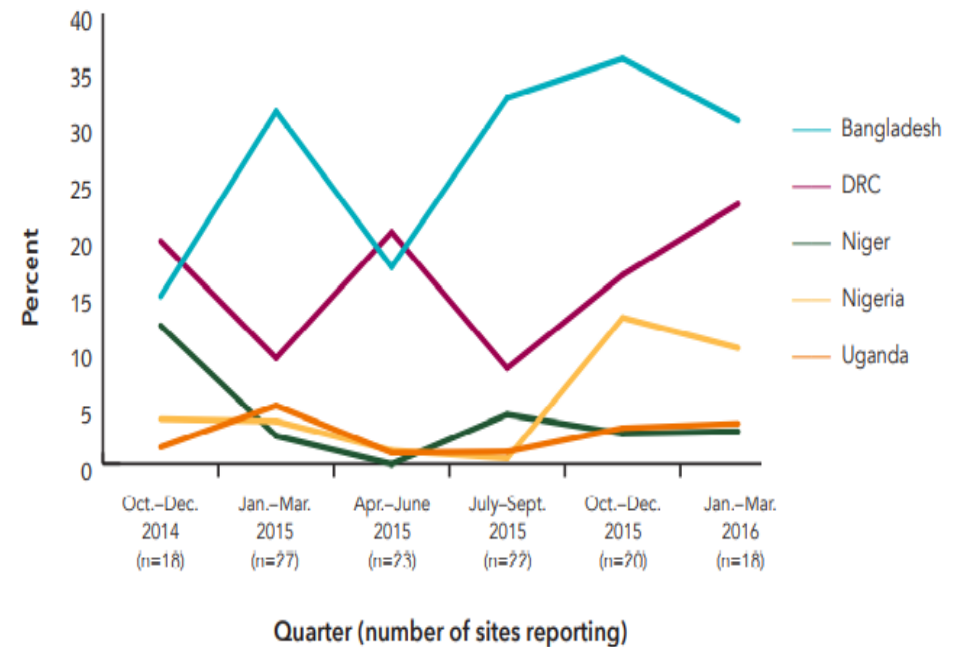
- According to annual report on Obstetric Fistula in Bangladesh 2021, 477 fistula cases were operated last year. Among them 273 cases were OF and 191 cases were iatrogenic fistula.
- **This constitutes around 57% of total case load.**

Iatrogenic Fistula: An Emerging Threat

Iatrogenic fistula

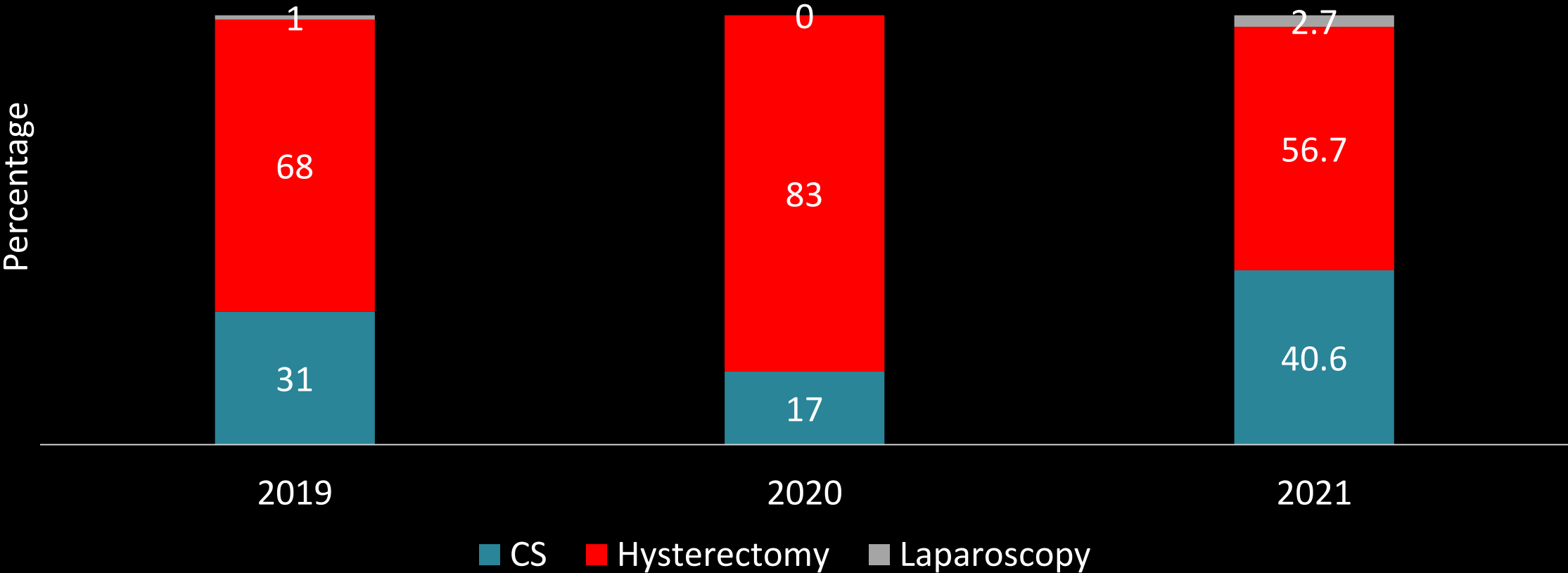
- Contributes significantly to the burden of genital fistula in low income countries.
- **Highest in Bangladesh** compare to some African countries
- Ranges from **15-36%** between 2014 and 2016 in Bangladesh

Figure 1: Percentage of fistula cases classified as iatrogenic* at FC+-supported treatment sites, by country, October 2014–March 2016



*Among all cases for which a cause could be documented

Indication of Surgery Causing Fistula: National Data from 15 Facilities



Source: Annual report on obstetric fistula in Bangladesh 2019, 2020, 2021 (GOB with the support of UNFPA)

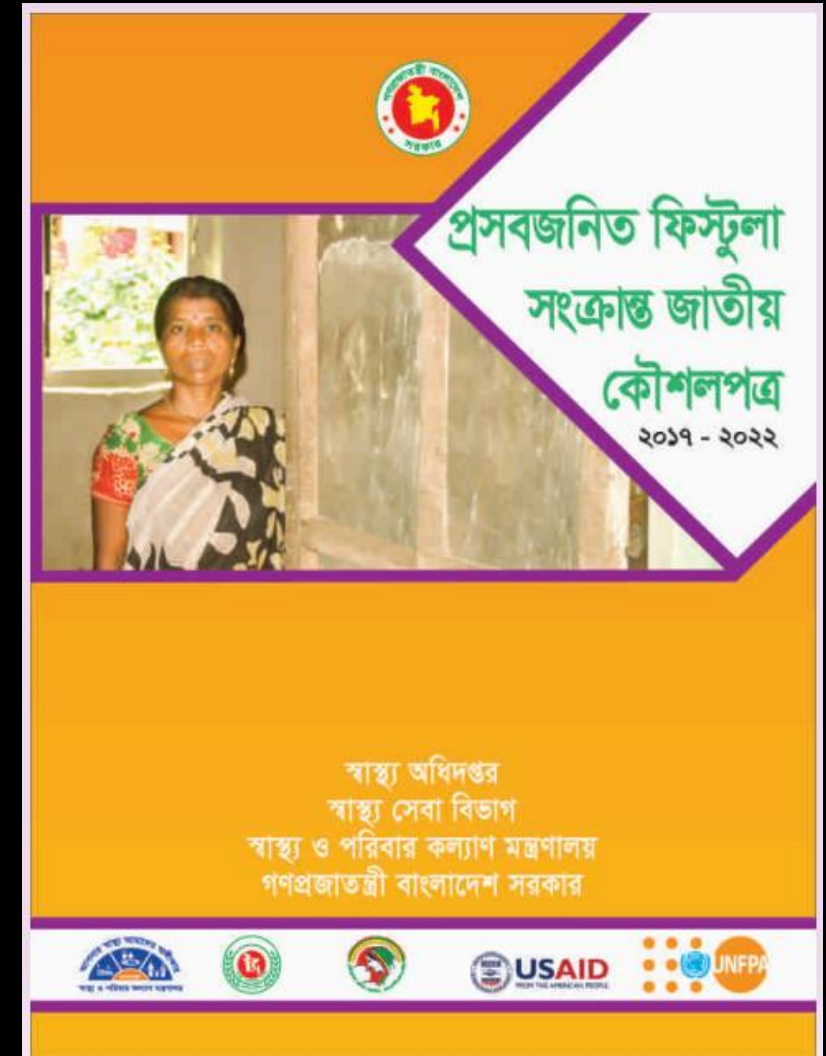
Initiatives Taken to Address Fistula

- Some personal and private initiatives for **fistula management** started long before.
- Later, government and private organizations took **action together in fistula management** .
- The UNFPA launched the "**Campaign to End Fistula**" in 2003 to combat fistula.
- The Ministry of Health took a **programmatic approach** to address the issue
- Bangladesh launched its **second national strategy for obstetric fistula** in 2017 to eliminate obstetric fistula by 2030.

Second National strategy on Obstetric Fistula in 2017

Six strategic directions are included in this National Strategy

- 1 Raising public awareness
- 2 Prevention of genital fistula in women
- 3 Improving treatment for fistula care
- 4 Monitoring the quality of fistula medical care
- 5 Psycho-social rehabilitation and reintegration
- 6 Generating data through research



To End Fistula by 2030: Achievements & Challenges

There are 4 key areas to focus on:



Prevention

Treatment

Rehabilitation & Reintegration

Research

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Prevention of Fistula



Achievements

- A significant reduction of OF due to improvement in quality and access to EmOC
- The percentage of maternal mortality due to obstructed labour has declined from **7% in 2010 to 3% in 2016**
- There has been a rise of facility delivery from **31% in 2011 to 65% in 2022**
- **70%** of births are attended by medically trained providers in 2022



Challenges

- Still **30%** of deliveries are conducted by medically untrained persons
- 3 delays: Insufficient access to delivery care and EmOC services at remote areas
- Early marriage, child bearing & low contraceptive use
- Delivery by C-Section has increased from **17% in 2011 to 45% in 2022**
- There is lack of rules & regulation to stop iatrogenic fistula

To End Fistula by 2030: Achievements & Challenges

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Treatment of Fistula



Achievements

- Fistula surgery is being performed in **15 centers**
- Approximately **300-500 surgeries** are performed per year.
- **Panchagarh** has been declared as fistula-free.
- **Structured programs** for identifying fistula implemented in Rangpur, Sylhet, and Cox's Bazar, and Patients are referred to LAMB, MAMM'S, and Hope hospitals.
- **MAMM'S Institute** provides regular training on fistula surgery and other pelvic floor reconstructive surgery.



Challenges

- Lack of recent estimation of fistula burden
- Lack of systemic and programmatic approach for case identification and referral
- Need for a national database on fistula
- Lack of a national protocol for systematic approach to fistula surgery
- Backlog of **19,755 cases** and shortage of expert surgeons and nurses

To End Fistula by 2030: Achievements & Challenges

There are 4 key areas to focus on:



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Rehabilitation & Reintegration

Research

Rehabilitation & Reintegration



- There is minimal support and rehabilitation efforts for fistula patients, primarily from personal or organizational initiatives. The government had a dedicated rehabilitation and reintegration program from 2006-2017 but not functioning now.
- Funding for rehabilitation and reintegration support is lacking.
- Persistent Fistula Related Disorder (PFRD) is a challenge, as there is no systematic approach for identifying PFRDs in the community, assessing their rehabilitation needs, providing life skills training, and support for their reintegration.

To End Fistula by 2030: Achievements & Challenges

There are 4 key areas to focus on:



Prevention

Treatment

Rehabilitation & Reintegration

Research

Research



There is a large gap in the field of research on female genital fistula in Bangladesh

Some following research questions can be addressed:

- What is the current prevalence of fistula in Bangladesh?
- How can community-based health interventions be implemented to prevent obstetric fistula in places where home births are widespread and medical facilities are scarce?
- Why young surgeons are not interested to be fistula surgeons?
- How PFRD cases can be identified and reintegrated in the society?



Lack of base line data to conduct research



Lack of funding

Research Cont...

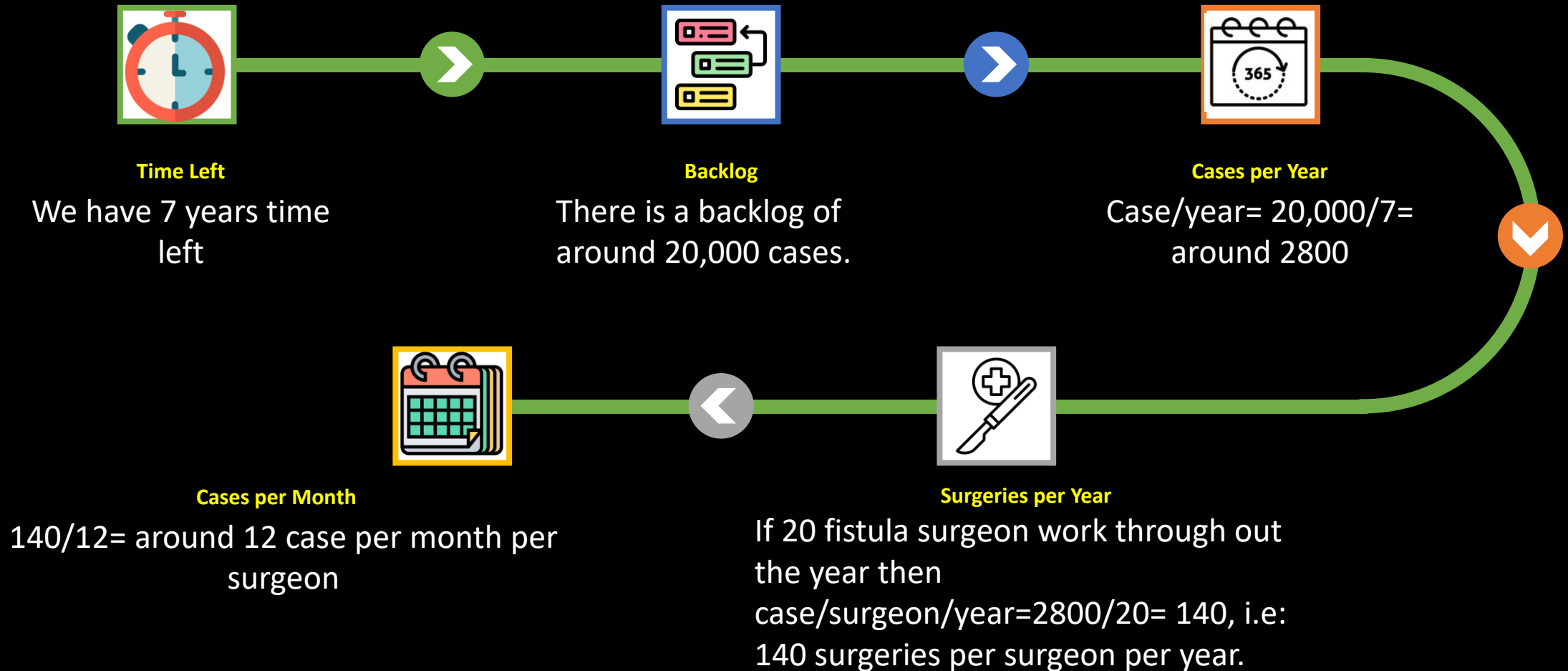


- Last year MAMM'S Institute of Fistula and Women's Health has received a research award
 - From Integrated Health-Science Research & Development Fund of Ministry of Health & family welfare
 - For conducting research on PFRD

Way forward to 2030

- To increase the availability, accessibility & quality of EmOC services at the grass root level to prevent OF.
- To prevent IF: Training on “Safe surgical practice”- safe hysterectomy and C-section
- Advocacy for fistula: To increase awareness amongst general population. Involvement of mass media, influential persons & religious leaders.
- Inclusion of fistula elimination program in Government operational plan
- Intensify countrywide campaign: For fistula patients identification
- Increase the number of repairs by training and developing new fistula surgeons

Explaining the Road Ahead with Simple Arithmetic



Explaining the Road Ahead with Simple Arithmetic



So if each surgeon does 12 cases per month or 3 cases per week then 20 surgeons can complete operating on the backlog 20,000 cases in 7 years



Cases per Month

$140/12 =$ around 12 case per month per surgeon

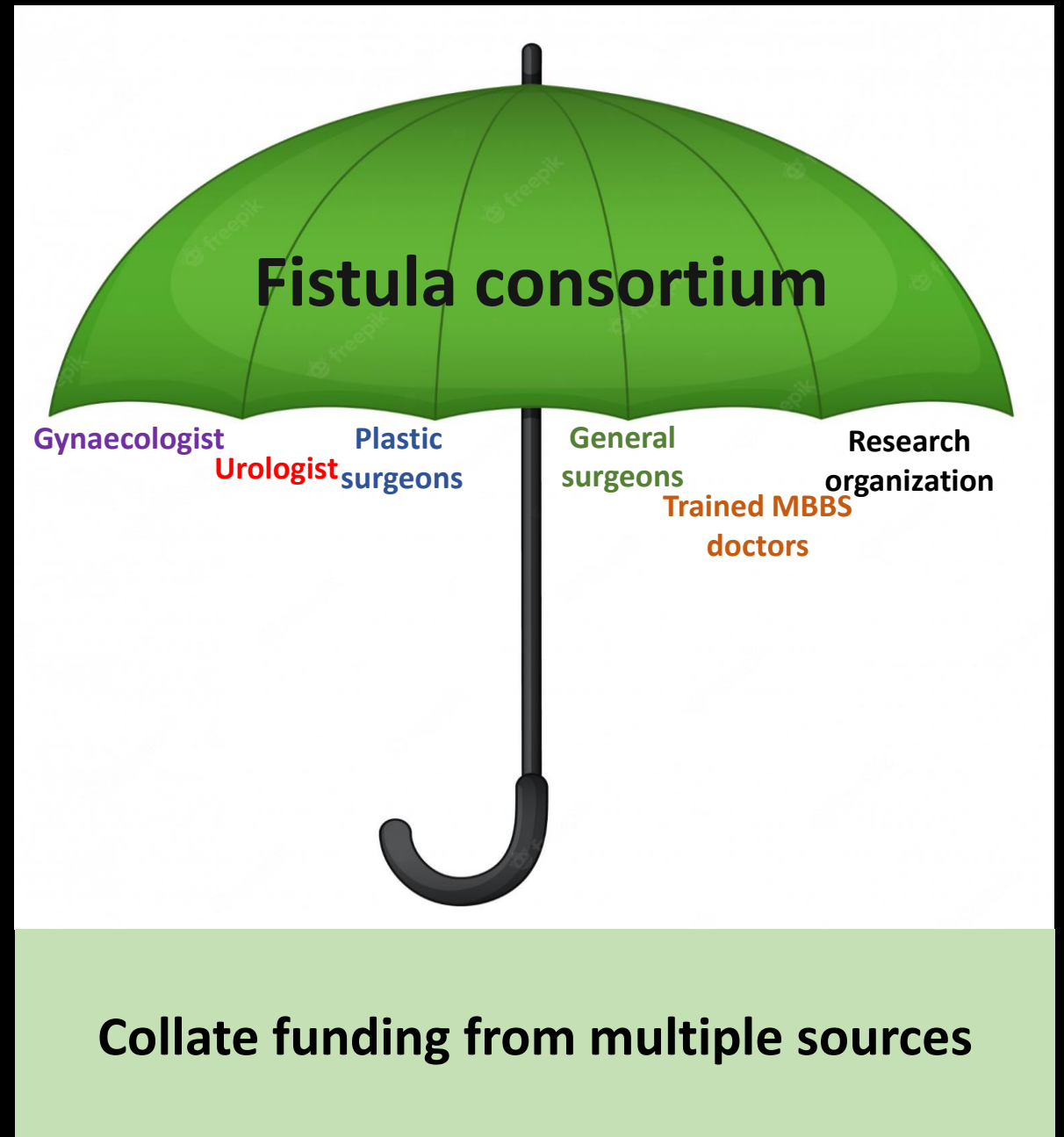


Surgeries per Year

If 20 fistula surgeon work through out the year then
 $\text{case/surgeon/year} = 2800/20 = 140$, i.e:
140 surgeries per surgeon per year.

Forming a Consortium

**Working together
to bring positive
changes!!**



An Appeal from Fistula Survivors



You donate 2.5% of
your wealth as Zakat.
Please donate 2.5% of
your time & expertise
to give us our life
back...

Conclusion

Fistula means “Discrimination”

Discrimination of wealth, social status & dignity

Fistula means “Violation”

Violation of rights of being a human

Fistula means “Stigma”

Stigma that makes a woman feel like a garbage

Let us end this Discrimination, Violation & Stigma

Let's End Fistula Now

