OBSTETRIC FISTULA IN SIERRA LEONE: PREDICTORS OF SUCCESSFUL SURGICAL REPAIR IN A RURAL HOSPITAL.

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Objective: To investigate predictors of successful outcome of surgical repair of vesico vaginal fistula (VVF).

Method: Data on parity, number of children alive, duration and outcome of labour, length of time since injury sustained, and marital status was obtained on 158 women with confirmed VVF in rural Sierra Leone. Defects were classified according to position, size (in cms) and severity of scarring. Routine closure was performed in 3 layers using vaginal flaps. Outcome of the repair was documented at 3 months.

Results: Mean parity was 3.5 (SD=2.72, range 1-14). 47.7% reported having no live children. Labours lasted a mean of 3.31 days (SD=1.55, range 1-7) and 91.1% resulted in a stillbirth. 44.3% of the women reported abandonment by their husbands. Mean duration of the fistula was 6.89 years (SD=6.52, range 0.25 - 40). 91 were deemed operable in our setting. 82.6% of operated cases were reported as successful. Pearsons χ² test for trend demonstrated a significant association with scarring and negative surgical outcome (p<0.05). No significant association was found with position (p=0.124) or size of the defect (p=0.717). Logistic regression was used to verify the findings.

Conclusion: Women who sustain VVF in rural Sierra Leone report worrying socio-demographic factors. Scarring is associated with adverse outcomes of surgical repair.