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Contribution of Iatrogenic Cause to Female Genital Fistula Burden in a New Classification System

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Objectives

- To propose a consensual classification for Female genital Fistulae
- To identify types of iatrogenic genitourinary fistulae, circumstances of occurrence & diagnostic tools
- To assess the surgical treatment outcomes

Background

Increasing interest amongst female genital fistula
Stakeholders to understand the growing incidence of
iatrogenic fistula

Patients, materials & methods

- Prospective study & Literature Review:

- 300 patients registered
- June 2011-June 2014
- Hôpital National de Lamordé (Niger)
- National Referral Center for Fistula (Niger)

-HINARI, PubMed & Medline Classification Review

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Iatrogenic Fistula

- **Prospective study: 72 of 724 fistula patients**
Jan 2009 - Sep 2015 at both sites
- **Diagnosis:** history, symptoms, clinical exam, dye test, imaging, endoscopy
-
- **Surgery:** transvesical or transperitoneal route:
 - 47 bladder fistula
 - 20 ureteric fistula
 - Ureteric reimplantation*
 - Boari flap*
 - Ureteral anastomosis*
 - 4 Urethral reconstruction
 - 1 vaginoplasty

RESULTS for Closure and Continence

7,7% lost to follow-up at 3 months

95.37% successful closure

89,6% closed and continent

Continence range:

100% type I to 23% type III C.

Iatrogenic fistula anatomy

- retro trigonal, vesico-uterus
- vesico-utero-cervico-vaginal
- uretero-vaginal
- urethra-vaginal



Fig.1 “condom cystoscopy”

ILLUSTRATIONS

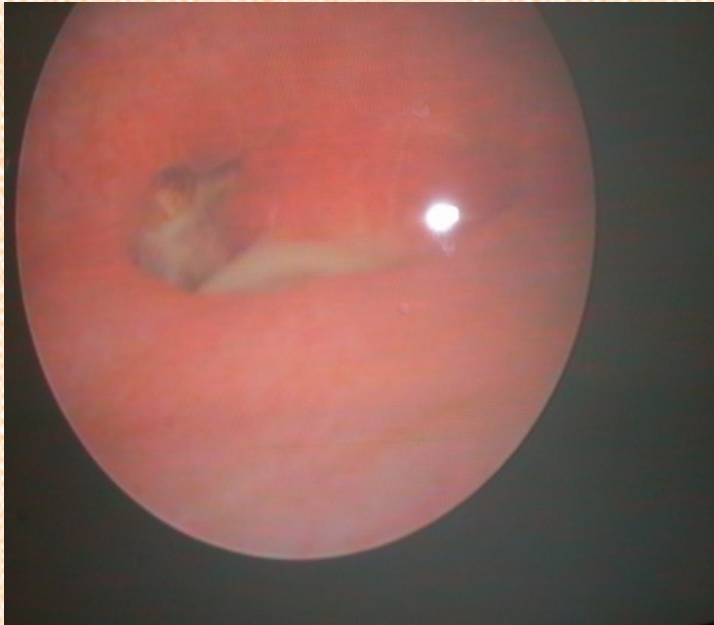


Fig. 2 Condom Cystoscopic view of vesico-uterine fistula.
Transperitoneal/vesical suture



Fig. 3 IVP: Uretero-vaginal fistula
End to end anastomosis

Table I. Iatrogenic fistula cases

Types of fistula	Context of occurrence	Nbr of fistula	Symptoms	Diagnostic tools	Surgical routes	Results
Vesico-cervico-uterus	C-section hysterectomy	42	Urine leakage thru cervix vagina, menoury	Condom cystoscopy/ (blue, indigo-carmin)	Transvesical/ transperitoneal	success
Uretero-vaginal	C-section / hysterectomy	20	Urine leakage thru vagina, normal micturitions, flank pain	Cystoscopy/ indigo carmin, IVP	Transperitoneale/ transvesical	success
Trigono-vaginal	C-section	5	Urine leakage thru vagina	Condom cystoscopy	transvesical	success
Urethro-vaginal	Forceps/yankan gishiri	5	Urine leakage thru vagina	Gynecologic Examen	vaginal	success (3), failure (2)

Discussion

Mean age: 27 yrs \pm 6 yrs (23-56 yrs)

Bouya et al > 55% patients < 30 yrs

Kazadi Buanga et al : younger

Iatrogenic fistula rate Niger:

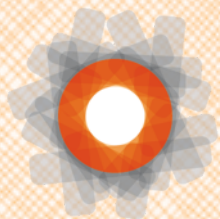
72 iatrogenic of 724 fistula = **9,9%**

Raassen et al, Dapang: **13,5-16%**

Conclusion

- **Iatrogenic fistula:** an issue with significant concerns for treatment & prevention
- **Causes:** CS, hysterectomy, instrumental
 - Are yankan gishiri complications iatrogenic or traumatic?
- Situation to be addressed in curricula development
- Promote prevention thru:
 - use ureteral stents before planned pelvic surgery
 - qualified EMOC & Gyn competency-based training

Fistula Care Plus Partners



Maternal Health **Task Force**

