Trends in fistula admissions at Komfo Anokye Teaching Hospital; Kwame Nkrumah University of Science and Technology, KUMASI, GHANA

By
Dr. K. A. Danso
Dept of Obstetrics and Gynaecology
KNUST School of Medical Sciences, Kumasi.

This presentation
- Brief information about Kumasi and Komfo Anokye Teaching Hospital
- Data on KATH fistula admissions
- KATH fistula resources
Kumasi

- Ghana’s second largest city
- Population 1,337,729 (projected from 2000 census)

Introduction

Komfo Anokye Teaching Hospital

- 1,000 bed hospital in Kumasi
- Commissioned in 1955 as Kumasi Central Hospital
- Named Komfo Anokye Hospital in 1966
- Became the Teaching Hospital of Kwame Nkrumah University of Science and Technology School of Medical Sciences in 1979
- Provides services in teaching, general and tertiary care and research
- No dedicated fistula centre at hospital
- Fistula surgery part of Gynaecology service
KATH Obstetric indicators

- Over 11,000 deliveries annually
- MMR 9-10 per 1,000 live births
- C-section rate 20%
- 2004 data
  - Total deliveries: 11,133
  - Total c-section: 2,229
  - Maternal deaths: 111
  - Leading c-section indication: Feto-pelvic disproportion
Data on fistula admissions at KATH I

- Available since 1977
- Systematic compilation since 1999
- 1977 – 1992 (16 years)
  - 164 fistulas
  - 10.9 fistulas per year
  - 150 (92%) of Obstetric origin with 5 RVF
  - 12 of Gynaecologic origin
  - 2 from Lymphogranuloma venereum infection
  - Publication: Epidemiology of Genitourinary Fistulae in Kumasi. Int Urogynecol J. 1996. 7 pp 117-120

### Annual Fistula Admissions and Deliveries at KATH 1977-1992

<table>
<thead>
<tr>
<th>YEAR</th>
<th>FISTULA ADMISSIONS</th>
<th>DELIVERIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1977</td>
<td>12</td>
<td>9,905</td>
</tr>
<tr>
<td>1978</td>
<td>6</td>
<td>8,848</td>
</tr>
<tr>
<td>1979</td>
<td>4</td>
<td>8,253</td>
</tr>
<tr>
<td>1980</td>
<td>3</td>
<td>9,970</td>
</tr>
<tr>
<td>1981</td>
<td>11</td>
<td>9,293</td>
</tr>
<tr>
<td>1982</td>
<td>11</td>
<td>9,654</td>
</tr>
<tr>
<td>1983</td>
<td>14</td>
<td>8,213</td>
</tr>
<tr>
<td>1984</td>
<td>4</td>
<td>9,481</td>
</tr>
<tr>
<td>1985</td>
<td>8</td>
<td>11,055</td>
</tr>
<tr>
<td>1986</td>
<td>6</td>
<td>11,255</td>
</tr>
<tr>
<td>1987</td>
<td>12</td>
<td>10,711</td>
</tr>
<tr>
<td>1988</td>
<td>17</td>
<td>9,447</td>
</tr>
<tr>
<td>1989</td>
<td>9</td>
<td>10,889</td>
</tr>
<tr>
<td>1990</td>
<td>25</td>
<td>10,274</td>
</tr>
<tr>
<td>1991</td>
<td>13</td>
<td>10,667</td>
</tr>
<tr>
<td>1992</td>
<td>9</td>
<td>9,534</td>
</tr>
</tbody>
</table>
Data on fistula admissions at KATH II

- 1993 – 1998 (6 years)
  - 78 fistulas
  - 13 fistulas per year
  - 74 (95%) of Obstetric origin with 6 RVF
  - 3 of Gynaecologic origin
  - 1 cancer related fistula
  - 0 infection related fistula

Data on fistula admissions at KATH III

- 1999 – 2004 (5 years)
  - 56 fistulas
  - 55 (98%) obstetric origin
  - 1 post radiation
  - 11.2 fistulas per year
### Data on fistula admissions at KATH IV

**DURATION OF INCONTINENCE AMONG FISTULA ADMISSIONS AT**

Komfo Anokye Teaching Hospital, Kumasi. 1999 – 2004

<table>
<thead>
<tr>
<th>Years</th>
<th>&lt; 1</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6 -10</th>
<th>&gt; 10</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>3</td>
<td>3</td>
<td>5</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>2000</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>13</td>
</tr>
<tr>
<td>2001</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td></td>
<td>7</td>
</tr>
<tr>
<td>2002</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>2003</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>2004</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>11</td>
</tr>
<tr>
<td>Total</td>
<td>11</td>
<td>11</td>
<td>12</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>7</td>
<td>6</td>
<td>56</td>
</tr>
<tr>
<td>%</td>
<td>19.6</td>
<td>19.6</td>
<td>21.4</td>
<td>7.2</td>
<td>5.4</td>
<td>3.6</td>
<td>12.5</td>
<td>10.7</td>
<td>100</td>
</tr>
</tbody>
</table>

---

### Fistula admissions at KATH

- Annually since 1977
- Occurrence about 12 per year
- Predominantly of obstetric aetiology
- Recent data indicate ongoing occurrence and a backlog of unrepaired cases
KATH fistula surgery resource over the years I

- 1977 – 1992
  - Gynaecology service: Late JO Martey, FO Ofosu-Barko
  - Following introduction of OBGYN Fellowship training in 1989, fistula surgery was boosted by visiting fistula surgeons: Late JB Lawson, Late TE Elkins.

KATH fistula surgery resource over the years II

- 1993 – 1998
  - Fistula missions to northern parts of Ghana
  - Advanced fistula training in Addis Ababa for 2 faculty members: KA Danso, HS Opare-Addo
  - L Lewis Wall, Worldwide Fund for Women Injured in Childbirth collaboration and providing support.
Since 1999

- Fistula surgery and training ongoing
- Using general surgical instrumentation and ward nursing
- Combined surgery with urologists in difficult cases
- OBGYN Fellowship trainees get hands on exposure
- Fistula missions to northern Ghana, though infrequent now.

Acknowledgements

- Presentation prepared with input from
  - Dr K. A. Danso, Dept of OB/GYN
  - Dr H. S. Opare-Addo, Dept of OB/GYN
  - Dr K. E. Aboah, Dept of Surgery
  - Mr N. O. Frimpong, Dept Medical Records and Statistics
Thank You