PREVALENCE OF URETERIC FISTULA AND ASSOCIATED RISK FACTORS IN CCBRT, TANZANIA

Hypothesis / aims of study
Ureteric fistulas are secondary nicks, cuts, or ties in the distal ureter where it is near the cervix(1). Ureteric injury is a serious complication. It causes significant morbidity to the patients. Ureteric injuries have become increasingly common in Obstetrics and Gynaecology(2). This study was conducted to find out prevalence of ureteric fistula and associated risk factors in low resourced setting in Africa.

Study design, materials and methods
Descriptive cross sectional study was conducted in Comprehensive Community Based Rehabilitation Centre in Tanzania. Ureteric Injuries in females presenting to biggest fistula treatment centre in Africa between 2011-2015 (5years) were evaluated. Causes of fistula, duration of incontinence and treatment mode were recorded and analysed.

Results
There were total 2750 patients with genitourinary fistula in 5 years in CCBRT. 108 patients were diagnosed as ureteric fistulas. Prevalence of ureteric fistula was 3.92% among all genitourinary fistula. 85 ureteric fistula patients details were available for review. Left to right ratio was about 2:1.
73 out of 85 patients (85.8%) patients developed ureteric fistula secondary to obstetric cause. Most common among them was caesarean section secondary to obstructed labour (46/73, 63%). 11% (10/85) patient developed ureteric fistula secondary to gynaecological surgery (elective hysterectomy).
Most of the patients (75/85, 88%) had abdominal reimplantation of ureter. 8 patients had vaginal reimplantation. 95% (81/85) had good outcome. 4 patients still leaked after reimplantation. 3 were vaginally reimplanted among them.

Interpretation of results
In low resourced setting, Obstetric cause are still the most common cause of incontinence secondary to ureteric injuries.

Concluding message
Better health care delivery system and good maternity services would go a long way preventing these problems.

References

Disclosures
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