

ADDIS ABABA FISTULA HOSPITAL

Quarterly Report January 2009

From Mark Bennett – Hospital Chief Executive

After the official opening of our centre in **Harar** we still had significant work to do before we were ready to receive patients, such as completing the lower level and fitting out rooms with equipment. We have good water storage capacity on site and we are able to collect rainfall in the storage system during the rainy period. The centre was soon ready to begin its work and then **Dr Yifru** and his team accepted the first patients.

The **Midwifery College** has completed one full year of training for the first intake of students, selection for the second year has been completed and the staff are busy in preparation for the arrival of the new students.

We are seeing more patients for operations at the Hospital and this makes the number of women waiting in accommodation at **Desta Mender** lower than it has been for some time.

In **Mekele** we have installed a new water plant that will collect rainwater, increase our storage capacity and also soften the water which up till now has been damaging our sterilisation equipment.

We have selected a contractor for the construction of the new **Metu Centre**, the fifth of our Outreach Centres. Building will commence shortly and we are planning the opening early in 2010.

Visit by members of the Japanese Parliament

Members of the Japanese Parliament have visited Ethiopia to observe issues relating to sexual and reproductive health, maternal health, gender, youth poverty and HIV/AIDS. Japan hosted the G8 Summit in May 2008 and the visit was a follow up to that meeting.



They met with **Dr Hamlin** at the Addis Ababa Fistula Hospital and the situation especially regarding reproductive health and related needs were addressed. **Dr Hamlin** discussed with them our programmes in Midwifery and its connection to those who are suffering from Obstetric Fistula and they showed interest in supporting the needs of the hospital.

Medical News

From past experience, the number of our patients decreases during the rainy season, but the last time it was different. In our main hospital centre we admitted 222 new patients and were able to perform 362 surgeries. We also had 19 high-risk mothers who came to deliver their babies.

We have had three visiting doctors who have been working alongside our own team, **Dr John Kelly** and **Dr Brian Hancock**, both members of our UK Trust, and **Dr Tom Rassen** from the Netherlands (AMREF). **Professor Gordon Williams** has continued to assist in his specialised area of surgery and we are fortunate to have him as resident now in Ethiopia. He has been appointed to the role of Dean of the newly formed St Paul's Medical School.



Patients relaxing

Desta Mender—Report by Ato Ephrem Aklilu the Manager

The dairy farm is progressing well and the income the women generate is very encouraging. Some are planning to move out of the village, this will be a major step for them towards self reliance. We hope many more will follow as we work to build their confidence.

We have three batches of chickens in the poultry house. **Yeshalem**, the hopeful and smiling resident of the village, keeps records on feed, egg production and sales, she and her friends at the farm are working determinedly.

Sister Belaynesh, the village resident nurse, organised a welcoming ceremony for the new women referred to **Desta Mender** from the hospital. They were introduced to the staff and other residents and were given information about the village.

The literacy class is working to teach the women basic skills such as business and mathematics, as well as topics on hygiene and personal health management. The new programme will support and provide a better chance for them in their progress to sustainable and independent living.

We will soon open the Café by the lake. **Mrs Rae Newman** from Australia has been here with us and has been training some of the women in catering and hospitality. They have been learning the art of making pastry, pies, cakes and soups, as well as other meals. They will be running the cafeteria – what an exciting time for them!



Patients at Desta Mender

Outreach Centres

We have been able to treat more patients at the **Hamlin Fistula Centres** because the women are learning where to go through the work of our Public Health Officers.

In **Bahir Dar** centre almost 200 operations were performed in the last quarter, of these, 63 surgeries were done for a second time, and 21 high-risk mothers were cared for. Among the patients admitted, 135 were given literacy training and four doctors came for training in fistula surgery.

In **Mekele** centre 50 patients were admitted in the last quarter, 49 had surgery. Of these, 36 were cured and the others had to undergo further treatment.

In **Yirgalem** centre 99 new patients were admitted, 72 had surgery and 58 were completely cured, the others having further treatment. **Sister Sara** has returned from maternity leave and is once again assisting **Dr Einar** along with **Sister Wolela** and the nursing aides.

Now that the **Harar** centre is receiving patients, a Public Health Officer has been hired to raise awareness of fistula in that area, this will lead more patients to the centre.

Prevention

We are working towards prevention so that young girls will not face the same problems as their mothers. One of the ways to prevent fistula is by educating the community about obstructed labour and teaching them what fistula is and why it occurs.

We recently received two patients and we immediately saw a resemblance between them. We thought they may be sisters so we asked if they were related. The older one said, "Yes, we are related, she is my eldest daughter." The mother is forty years old, she had a fistula eight years ago after delivering a stillborn baby and being in labour for five days. Her husband soon abandoned her, even though he was the father of her four other children. She explained how shameful it was and also how the society in the village treated her. **Hawa**, the daughter, said, "All through this, my fifth pregnancy, my fear was not to have the same problem as my mother. I was in labour for four days and I also had a stillborn baby and a fistula. It was a nightmare because I knew I would have to face the hard life I had witnessed with my mother." Fortunately for **Hawa**, she only stayed with this problem for seven months.



Hawa with her mother

Our **Public Health Officer** in **Bahir Dar** has done training in the **Amhara** region and also spoken on the radio about the symptoms of a fistula patient. It is because of the radio broadcast that **Hawa** and her mother presented themselves to the Fistula Centre in **Bahir Dar** before being referred to us in Addis Ababa.

By educating the society we are creating more awareness of the prevention of fistula so that young girls like **Hawa** will not have to face their worst nightmare.

Stoma Therapy Clinic

A small percentage of patients coming to our hospitals need to go through a urinary diversion operation. They come to the clinic for pre and post operative counselling, training, regular follow-up and for the monthly supply of bags. The clinic has been functioning for more than three years now and during this time more than ninety patients have undergone urostomy operations. For these women it is a chance to end the incontinence they have struggled with and to lead a more healthy life. Of these patients, only a few have been able to return to their rural villages, the others are staying at **Desta Mender** where they have easy access to follow-up. Here they will be able to learn a range of skills giving them confidence towards self reliance.



Ruth Gadissa – our Stoma Nurse

At **Desta Mender** the new patients are able to meet with others there who welcome them and help them to come to terms with this new challenge in their lives. Some have trained and have become nursing aides, ten are working in the midwifery college using their skills in catering and cleaning. For the future, the plan is to open opportunities for them to return to their home region with skills they have learned in **Desta Mender**. They will not be far from our regional outreach centres where they will be able to get regular follow-up for their health and also supplies of stoma bags.

Midwifery College—report by Sister Annette Bennett

The students at the **Hamlin College of Midwives** have completed their first year of studies with final exams and a six week clinical placement to practice their newly acquired midwifery skills. They have studied labour and delivery, ante-natal and post-natal care, family planning, HIV/AIDS counselling and community visiting. Our students were accompanied by our midwifery tutors including **Dr Barbara Kwast**, who came from the Netherlands for two months to work with our students and staff.

The students performed well and were genuinely thrilled to be able to practice. They had a month annual leave and the staff have revised the first year and prepared for the second year. **The new intake of students** will come from **Tigrey** in the north, **Oromia**, outside of **Harar** and the **Sidamo** region in the south. We give our thanks for all the support we have had during this first year.



The College Study Room

Story of a Patient

Wubalem Eshete was ten years old when her parents decided that it was time for her to get married. When she was sixteen years old she was pregnant with her first baby and she was scared of what was going to happen to her. One day the pain started and it became worse during the night. Women from her village gathered in her house to help, but with no success. After being in labour for three days her uncle suggested they try to get her into hospital. They walked for a whole day before reaching the nearest health centre and after another day they were told to take **Wubalem** to a bigger hospital where they might find a doctor to help her. It was a four hour drive and it was late in the day so they waited until the next day to travel. When they arrived at the hospital they helped her to deliver her stillborn baby and told her she now had a bladder problem that could only be treated in Addis Ababa.



**Wubalem – such a happy patient
after her second visit to the hospital**

Wubalem eventually arrived at our hospital where she stayed for three months and had two operations before she was completely cured. She went home to her village and was told that if she became pregnant again she must deliver in hospital.

That was two years ago and now **Wubalem** is at our hospital again, this time to deliver her baby. This will be her first live baby and we are doing everything we can to make sure she has a safe delivery.

A story about a member of staff Sister Sara Honja

Sister Sara Honja joined our hospital in February 2006 and she had training at the **Addis Ababa Fistula Hospital** before going to our **Yirgalem Hamlin Fistula Centre**. She had been working in the **general Yirgalem hospital** for over 14 years after she had graduated from the Awasa Health Science College before coming to us. **Sara** said, “Even after I graduated I wanted to work in my area to help my people.” Most professional medical staff prefer to work in the city rather than in the countryside, but **Sister Sara** decided to stay in her region to help with the community living in the rural area. She has been on maternity leave for three months and has now returned to our **Yirgalem Centre**, assisting **Dr Einar** in the operating theatre. Her first child, a daughter, is named Selo. **Sara** lives in the town of **Yirgalem** and we are grateful to have her in our centre where she works with other staff helping our poor women in the southern region.

The story of Almaz

Almaz, who is 18 years old, came from the southern part of Ethiopia. It was her first time in the city and most of the things she saw were unfamiliar and strange to her. She was amazed to see tap water in the hospital and what was even more amazing was the fact that she could get it without having to travel for hours carrying her water pot. She could see people making injera, our common food, using electricity instead of going to the mountains to gather wood for the fire. But one thing that amazed her beyond all her imagination was that she was able to attend classes at the hospital where she could learn to read and write. “Why are you letting us learn and what is the use of that?” she asked, but she continued to attend her classes, learning how to read and write, starting with her own language, Amharic. She could soon write her name and was learning mathematics, English and all about nutrition and hygiene. Now she wants to learn more so that she can share her knowledge with her sisters and friends back in her village.

The difference between **Almaz** on her first day at the hospital and today is that she is smiling, she has confidence to ask questions, she can write her name and read and talk about what she is learning. **Almaz** is now a different person.

Doctors Reginald and Catherine Hamlin, both Gynecologist Obstetricians, came to Ethiopia to work at the Princess Tsehai Memorial Hospital in 1959. They were pioneers in performing surgery for women suffering from obstetric fistula. Once they began this work, the need became so great that in 1974 they established the Addis Ababa Fistula Hospital specifically for women with childbirth injuries.

The Addis Ababa Fistula Hospital is an organisation that cares for women with childbirth and related injuries. These women come to us destitute, in nothing but their urine soaked clothes and, more often than not, with bare feet. Distanced by their relatives, we are their only hope; therefore all care, treatment and surgery is completely free of charge.