

# REPORT OF THE SURGICAL MISSION AND TRAINING COURSE ON THE MANAGEMENT OF OBSTETRIC FISTULA IN TANGUIETA (BENIN)

12 March - 29 March 2008

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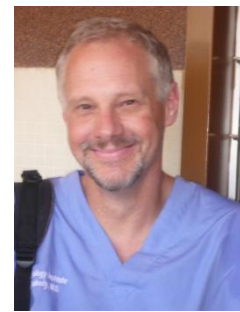
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**Wednesday 12 March 2008:** departure from Geneva with Nadine, our nurse. In Paris, we meet with Dr Françoise Giaume - anesthetist and Dr Bogdan Georgesciu, Fellow in Gynecology at the Albert Einstein University in New York. Flight AF 730 to Ouagadougou where we take our luggage which include 55 kilos of medical material.

Discussion with Augustin Koditombe at the *Ok Inn* hotel about the recruitment of fistula patients for the areas of Zabre and Manga. Augustin is in charge of the recruitment of women with fistula since 10 years and his collaboration is highly appreciated. I initiated a contact between him and *Sentinelles* to take his patients from his area to Tanguieta and to make the follow up. However, we come to the conclusion that *Sentinelles* cannot currently take care of more patients and that a parallel management should be organized on Augustin personal commitment so as to guarantee a long term post operative follow up.



*Meeting with Augustin Koditombe at Ouagadougou*

**Thursday 13 March 2008:** departure by van to Tanguieta. We stop in Fada N’Gourma in early afternoon to meet with Dr Josiane Diallo, who is in charge of the department of Urology of Fada Hospital. The meeting is about the last surgical mission which took place in Fada in January, and was conducted by Dr Moussa Guiro and Dr Jean Lalaude from France. Sentinelles was in charge of the recruitment of patients and the follow up and UNFPA participated for the material expenses. Dr Diallo was complaining about the quality of the suture material. I suggested that she can go to Tanguieta and take the material there from the GFMER stock. It is agreed to maintain the fistula missions taking place in Fada into the GFMER Program as agreed with Dr Moussa Guiro. Dr Diallo is planning to go to Tanguieta during the next mission to take place in October.



*Part of the surgical staff together with Dr Françoise Giaume, anesthetist from Nice, France*



*Dr Josiane Diallo*

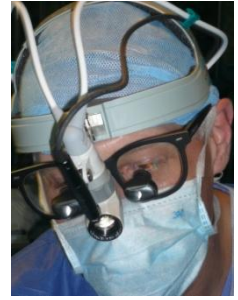
At our arrival in Tanguieta, we pay a visit to the *Frères de l’Ordre Hospitalier de Saint Jean de Dieu* and notice with pleasure that Brother Florent, Dr J.-B. Priuli is doing well after the fracture of his femur and that he has gone back to work.



*In the middle, the minister of labor of Benin together with Brother Florent*

Once there, we are informed that 16 patients have been hospitalized and that the surgical program for Friday is already scheduled. Are already there, Dr Sostene Adisso from Cotonou, Dr Tamou from Bembereke and Dr Richard Enga from Ouagadougou, as well as gynecologists working in Tanguieta, Dr Rene Darate and Dr Dieudonne Zaongo. Samuel Sommaruga has been there for already 10 days and takes care of the list of hospitalized patients, particularly according to their country, knowing that patients from Burkina are taken care of by the staff of *Sentinelles*. 4 assistants in gynecology from the CHU of Cotonou are also present. After putting the material in the operating theater, we all meet for dinner.

**Friday 14 March 2008:** first surgical day where 5 vesico-vaginal fistulas are repaired on 2 tables. It is an opportunity to experiment the new lamp *Luxtec* with an integrated digital camera which not only allows us to record the interventions on a CD, but also gives the possibility to the assistants to be able to watch the intervention in real time on a big screen.



At the end of the day, Dr Dramane Cisse who will be the first intern of the DES of Urology in Cotonou joins the team for the mission.

In the evening, a theoretical session is organized and lasts until 23 hours.



**Saturday 15 March 2008:** there are 4 fistula repairs planned together with an ablation of stone of the under urethra of a patient from Cotonou. At 16 hours, departure of the whole team into two cars for the visit of the Pendjari park.

**Sunday 16 March 2008:** arrival of Jim Peabody who joins the missions a couple of days later, but we are really happy to see him again in Tanguieta.

Spending the day and the night in the park has been a very nice experience, particularly because most of the doctors who are being trained in Cotonou have never visited the North of Benin. This visit gave them the opportunity to closely see elephants, buffalos and even a lion.



*Mare Bali, Pendjari park*

**Monday 17 March 2008:** normal surgical day with 4 fistula repaired including 1 very complex (vesico and recto-vaginal). Examination of many patients who were awaiting hospitalization. Meeting in the evening with Brother Florent and Brother Boniface to discuss about the status of obstetric fistula activities and the GFMER program at the Tanguieta hospital.

**Tuesday 18 March 2008:** surgical day at the end of which we come to 18 patients to have undergone surgery since the beginning of the mission. In the afternoon, we receive a delegation led by Prof. Serigne Gueye from Dakar.



He is escorted by Prof. Xavier-Rene Perrin from Cotonou, Dr. Theodore Soude from UNFPA Cotonou, Dr Traore, WHO representative and the Delegate of the Minister of Health. The following people are also participating in the meeting: Dr Ali, coordinator of Tanguieta area, Brother Florent, Dr. Rene Darate, Dr. Didier Komongui and Dr Dieudonne Zaongo. The purpose of the meeting is to discuss the management policy for women living with obstetric fistula in Benin. The minutes of the meeting will be prepared by UNFPA. At the end of the meeting, Brother Florent and I are invited by Prof. Gueye to participate and present our program at the Pan African Urology Congress to be held in October in Dakar.

**Wednesday 19 March 2008:** operating day with a heavy workload. Unfortunately, a patient who underwent surgery 3 days ago had developed an anuria. It was a case of complex fistula for which the repair led to the obstruction of ureters requiring a review with a re-implantation on both sides. At the end of the day, 4 students (4th year DES) arrived from Cotonou to replace the preceding ones with whom we really appreciated to work.

**Thursday 20 March 2008:** operating day. In the evening, the whole staff of the maternity operating theatre is invited to the traditional dinner which is meant to thank all the collaborators for their respective commitment to make the mission a success. We all meet on the terrace of the APP restaurant.



*Dr Didier Komongui (standing)*

**Friday 21 March 2008:** Operating day. Meeting with the doctor in charge of this medical area with other people among whom Anne-Marie Pilonnell of *Sentinelles*. The meeting is about the screening and the sensitization of women with fistula. Dr Ali informs us that UNFPA has started the decentralization of its activities and that he himself is in direct contact with UNFPA Cotonou to develop a policy of management of VVF in the medical area of Tanguieta. We also meet Dr. Ali's wife who is the Director of *Essor*, an NGO in Benin. This NGO deals with health and education, and is now interested in developing an activity around women with fistula.



*Meeting with people in charge of the medical area*

Anne-Marie Pilonnell thinks that *Sentinelles* could envisage a sponsorship to help *Essor* in the management and follow-up of women with fistula, on the basis of their existing forms which are compatible with the GFMER Database. If this is established, GFMER could financially support *Essor* via the St. Jean de Dieu Hospital.

**Saturday 22 March 2008:** operating day. In the morning, we undertake 2 urinary derivations (implantation of ureters in a pocket made with the large intestine). Then the whole team - including the 2<sup>nd</sup> group of vaginal surgery and fistulology DES of Cotonou – leaves for the Porga camp.

We stop at the health centre of Porga to invite the Brothers for dinner. Before that, we make a vision stroll in the park.



In the evening, I speak with Brother Olivier and Brother Justin about the situation of the maternity of Porga. Almost five years after its inauguration, the number of deliveries increases every year, but the maternity is facing financial difficulties particularly for the functioning budget, and I suggest that an activity report of the last five years should be prepared, for me to present it to the *Frères de nos Frères* once back in Geneva, as they are the ones who sponsored the building.

**Sunday 23 March 2008:** Vision stroll with 2 cars in the park, with a picnic in the bush. In the evening, we are invited by the Brothers for a community meal. Late in the evening, I have a meeting with Brother Boniface, Director, Brother Cosme, who is the new prior, as well as Brother Florent, the medical

Director. We discuss about the support of GFMER to the hospital by mentioning the possibility to create a scholarship for African doctors.



*Brother Boniface Sambieni  
Director of the Hospital*

**Monday 24 March 2008:** surgical activity ending at lunch time. We performed 38 operations on women with vesico-vaginal fistula divided as follows:

*31 vesico-vaginal fistulas among which 2 with associated rectal fistulas  
2 recto-vaginal fistulas  
2 derivations (Mayence II) for severe fistula  
3 stress incontinences consecutive to a fistula closure*

*Results at 6 weeks:*

*32 fistulas closed  
2 derivations without problem  
3 marked secondary stress incontinences (IUE III)  
6 light secondary stress incontinences (IUE I)  
2 failures (1 failure of fistula repair and 1 failure of bandage under-urethral (TOT))*

In the afternoon, we visit the Center for women with fistula which was initiated by the diocese of Fada N’Gourma, supported by GFMER, and built under the supervision of the Hospital of Tanguieta. We meet there many patients that we operated, awaiting the return to Burkina. We also notice with pleasure that the center is growing, with 3 new buildings which are supported by the *Liliane Foundation*.



However, the problem of the well is not yet solved which forces to carry water with trucks.

At the end of the day, there is a one and half hour theoretical session. This session is interactive, based on the presentation of the Tanguieta Model as performed during the national congress of French speaking obstetricians and gynecologists held in Paris in December 2007.

([http://www.gfmer.ch/Presentations\\_En/Pdf/Model\\_Tanguieta\\_Rochat\\_2007.pdf](http://www.gfmer.ch/Presentations_En/Pdf/Model_Tanguieta_Rochat_2007.pdf)).

**Tuesday 25 March 2008:** operation sessions being finished, the day is used to examine all the patients who underwent surgery during the mission.



The examination is done on two tables at the maternity. The files are filled in by Dr. Zaongo and Samuel Sommaruga and instructions for post-operative follow-up are given. Fortunately, we do not notice any significant problem or complication.

In the evening, we have our last dinner with all the participants. A Certificate of Attendance is provided to participants.

The training was perfect and took place in a friendly atmosphere, most of the participants expressing their will to attend future missions. After a couple of thankful speeches, we take leave from one another, the return to Cotonou being scheduled early next morning for the gynecologists.



*The 2<sup>nd</sup> team*



**Wednesday 26 March 2008:** travel from Tanguieta to Cotonou without problems but a bit long, due to the road which is bad from the south of the country. Arrival at the hotel and phone calls with our different partners.

**Thursday, 28 March 2008:** second phase of this surgical mission in Benin which is meant to launch a pilot project of the introduction of endoscopic resection at the CNHU of Cotonou. Prof. Cesar Akpo, Chief of the Urology Department and Director of Higher Education picks me from the hotel to his office. Meeting with the staff. Among them, I am happy to see Dr Prince Hounnasso who received a grant from the *Société Médicale de Beaulieu* to participate in the Course in Reproductive Health Research organized by GFMER in collaboration with WHO in 2007, as well as Dr Rene Hodonou with whom we started working on this project of operating endoscopy since 2004. I also meet the director of the Hospital who took out of bond the medical material which was sent by the humanitarian commission of the Hospitals of Newcastle, the Swiss partner of this project.

12 patients were hospitalized for problems of prostatic adenoma and the morning is dedicated to the examination of these patients in the ultrasound room.

Before starting the operating program, I am invited for a meeting in UNFPA offices where the representative for Benin, Mr. Dico is waiting for us.



*Meeting in the UNFPA offices*

The discussion is about building a collaboration between UNFPA and GFMER so as to reinforce the Hospital of Tanguieta for the management of women with obstetric fistulas.

Once back at the hospital, we perform 3 endoscopic resections under video assistance. These are the first interventions of the type to be performed at the CNHU.



In the evening, the Rector of the University, Prof. Norbert Awanou Cossi meets us at the hotel for dinner. This gives us an opportunity to discuss about a possible collaboration between the Hospital of Tanguieta and the University.

**Friday 28 March 2008:** operating morning at the CNHU and meeting with the medias who wished to know more about these endoscopic interventions. Last meeting with Prof. César Akpo and at the end of the day, departure from Cotonou to Paris and then to Geneva where the mission ends.

**Comments:**

These fistula missions launched in 1996, and then where integrated to GFMER as an independent project in 2002, have helped Tanguieta to take the position of a reference centre. We will then be part of the international multicentric study conducted by the John Hopkins Hospital of Baltimore which will comprised 7 centers worldwide. The next step will be to define in a better way the role of Tanguieta in the sub-region.