



## FISTULA GROUP

A program of the Geneva Foundation for  
Medical Education and Research (GFMER)

# 2025 Activity Report

Fistula Group Program



## Obstetric fistulas

In 2025, the GFMER “obstetric fistulas” program, called Fistula Group, made it possible to carry out field activities in the form of surgical workshops and to support a large number of doctors in their training as well as in their clinical practice.

Field surgical activities also covered repair of urogenital prolapse as well as men’s urological conditions, mainly prostate operations and traumatic urethral stricture surgery.

In terms of equipment provision and support to infrastructure, the focus was mainly on Tanguiéta Hospital in Benin.



Intensive care unit at Saint-Jean-de-Dieu Hospital in Tanguiéta, Benin

# 208

patients operated on during 2025 through missions coordinated or supported by our obstetric fistula program

## Surgical workshops

### Benin

A surgical mission led in April 2025 at Tanguiéta Hospital by Dr Charles-Henry Rochat enabled surgery on 48 patients. The mission planned for October was moved to Cotonou and Parakou, due to insecurity in the Tanguiéta area.

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[Mission Report – PDF, French](#) ↗

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[Mission Report – PDF, English](#) ↗

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### Cameroon

A surgical workshop in March 2025 took place in Yaoundé under the leadership of Professor Pierre-Marie Tebeu, during which 17 patients were operated on for fistulas. A second surgical workshop was planned for October and then moved to February 2026.

### Burkina Faso

Given the closure of the border between Burkina Faso and Benin, patients with obstetric fistulas can no longer be admitted to Tanguiéta. Since 2019 we have therefore financed part of the cost of these procedures at Sainte-Camille Clinic in Ouagadougou under the responsibility of Dr Moussa Guirro. 143 patients were able to be operated on during 2025.

### Madagascar

Due to a coup d’état in October, it was not possible to maintain the mission planned for the end of the year. However, we sent Dr Martin Randriantsalama twice on assessment and reconnaissance missions lasting more than 6 weeks in total.

## Equipment and infrastructure support

Financial support was allocated mainly to Tanguiéta Hospital, with refurbishment of the Clinic building, consumables for the operating theatre, and purchase of parts to repair the CT scanner.

## Training and clinical supervision scholarships

We support three urologists in their specialization pathway in Cotonou and Dakar, and two students at École Polytechnique in Paris. Support for senior physicians at Tanguiéta Hospital is provided through clinical supervision scholarships, since they are responsible for training residents (DES) in different specialties. This line item has grown significantly in our program, which relies heavily on the next generation.

## Recruitment and follow-up organizations

This very important activity of recruiting and following up patients is carried out in Benin by the Claudine Talon Foundation, but we also support local initiatives in Burkina Faso and in the Tanguiéta region.

## Scientific activities, publications and conferences

The Tanguiéta model is structured around treatment, training, recruitment and follow-up, prevention and social reintegration. There is also a scientific component: in 2025, we were able to fund a course on adolescent sexual health organized by GFMER and the WHO, and we also funded the dissemination of the online course on obstetric fistulas in French.

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Online course [↗](#)

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In May, Professor Pierre Marie Tebeu took part, with GFMER's support, in organizing the International Day to End Obstetric Fistula in Yaoundé. He also published a book on good practices in obstetrics.

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Closing the obstetric fistula treatment gap [↗](#)

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Mes grands pas en gynécologie, Tome 2 [↗](#)

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Visiting patients with Dr Renaud Aholou at Saint-Jean-de-Dieu Hospital in Tanguiéta, Benin



Saint-Jean-de-Dieu Hospital in Tanguiéta, Benin

Two of our urologists in training, Drs Randriantsalama and Kikwaya, were able to attend the French Association of Urology congress in Paris in November, accompanied by Dr Rochat.

Dr Martin Randriantsalama graduated in Urology in Dakar in June and, while waiting to start a fellowship, is contributing to the drafting of scientific articles with a GFMER affiliation. Other articles are in the process of being submitted.

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Reverse Spatulated Hybrid Technique of Arterial Anastomosis in Kidney Transplant – Article [↗](#)

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## Our partners in 2025

During the year, we were fortunate to receive support from two new foundations (Nordia Foundation and Greendale Foundation) and the return of the Lotti Latrous Foundation, the Globale Foundation for Life Sciences, as well as a private Swiss foundation.

The other foundations, Topaze, Inspir', Alfred and Eugénie Baur, Rumsey Cartier, Pharos Trust and the Teofilo Rossi Montelera and Di Premuda Foundations, as well as private donors, remained loyal. Thanks to this, we can approach 2026 with peace of mind.

### **Outlook for 2026**

We will strive to find bridging funding for scholarships and clinical supervision support, given that some foundations are reaching the end of their commitment. Financial support for senior physicians in Tanguiéta is all the more relevant as the security situation is not improving, which makes working conditions difficult. The hospital must remain competitive in terms of salaries, while its revenues are also affected by insecurity: patients travel less and often arrive in desperate conditions and without financial means.

We will continue to support fistula surgery in Benin, but at other sites. This should not prevent me, personally, from carrying out a mission to Tanguiéta in May, in particular for general urology cases.

We are considering resuming collaborations for obstetric fistula surgery in Madagascar, but also in Chad and in Guinea-Conakry.

A lightweight website is being prepared for Fistula Group, and in the meantime we will continue to publish newsletters that will be relayed on the GFMER website.

**Fistula Group is a program of GFMER**  
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**Contact**

Fistula Group  
Chemin de Beau-Soleil 12 – 1206 Geneva  
[rochat@fistulagroup.org](mailto:rochat@fistulagroup.org)  
[www.fistulagroup.org](http://www.fistulagroup.org)

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**Copywriting**

Dr Charles-Henry Rochat

**Graphics and layout**

Fabien Bergerat, aminima sàrl – [aminima.ch](http://aminima.ch)

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