

Pelvic floor disorders in Tanzania (PEDITA) - A Health System Strengthening Intervention Study

Project description:

Background: International donor organisations are increasingly acknowledging the problem of maternal morbidity and investment has been made to strengthening health systems and ensuring adequately trained and skilled human resources, especially with a view to the management of obstetric fistula. An obstetric fistula is the result of obstructed labour where a hole is formed in the vaginal wall communicating into the bladder. The consequence of fistula is urinary incontinence, i.e. permanent leakage of urine through the vagina, a condition that is almost unendurable for women. Women who survive a difficult vaginal delivery are in addition to the risk of obstetric fistula at risk of developing other pelvic floor disorders especially, urinary incontinence and pelvic organ prolapse. These pelvic floor disorders are substantial causes of suffering and burden of disease among adult women, particularly as they get older. However due to the stigma associated with these health conditions, there is lack of evidence about the true magnitude of the problem and associated consequences.

Objectives: 1) To assess the prevalence of pelvic floor disorders in rural Tanzania; 2) To describe acceptance and experience of pessary management for urinary incontinence among rural Tanzanian women; 3) To describe acceptance and experience of pessary management for pelvic organ prolapse among rural Tanzanian women; 4) To assess the long-term recovery and social re-integration among fistula women who have undergone fistula repair.

Methodology: The prevalence of obstetric fistula, urinary incontinence and pelvic organ prolapse will be assessed through a community based study where women will be interviewed about symptoms of pelvic floor disorders and subsequently diagnosed at health center level. Fistula women will then through a cell phone intervention be linked to treatment and ongoing care at referral level. Women with urinary incontinence and pelvic organ prolapse will be offered treatment by trained midlevel providers working at health center level. All women will be followed to assess the effect of the treatment. The research project will build on established partnerships with institutions in Tanzania and will integrate capacity strengthening in the partner institutions.