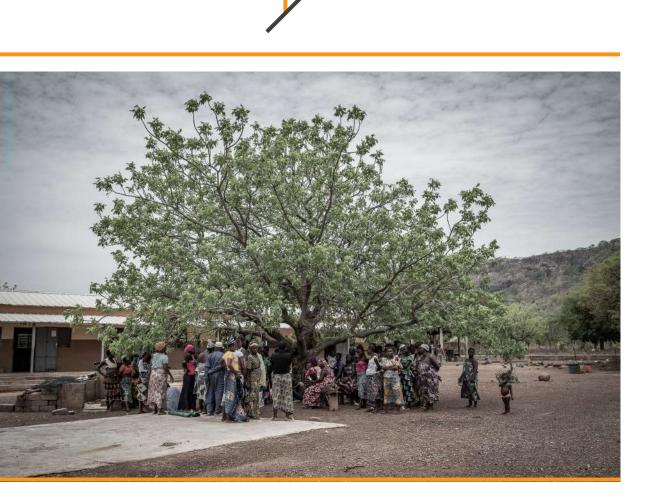


### www.fistulagroup.org A program of the GFMER



Activity report 2020 Fistula Group

written by :

C-H. Rochat & S. Barenne



GENEVA FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH (GFMER)



www.fistulagroup.org A program of the GFMER

## Table of contents



Edito Overview 2020 Operating mis A long-term p Research Exhibition Press review

Acknowledgm

Worldwide

1

2



	03
0	06
ssion	07
programme	09
	11
	13
	15
nents	17
	18

## --/ Edito



#### DESPITE THE PANDEMIC, ERADICATING OBS-TETRIC FISTULA REMAINS A PRIORITY

No one will forget this year 2020. On a personal level, it was marked by a severe infection with Covid 19 disease which led me to spend six weeks at the University Hospitals of Geneva. Thanks to them, I was saved, a chance that some members of our network did not have, such as Dr Franck in Madagascar, who died of COVID the day he received the parcel with the precious urology equipment he was waiting for. The whole Fistula Group pays tribute to him.

Confinement, increased problems of poverty, difficulty in accessing health services or fear of contracting the virus in hospitals, the impossibility for surgeons to travel for long periods of time have made the task of our programme more complex. In Europe, the very local concerns of institutions and even private donors, hit hard by the crisis that began with the economic downturn, have made the search for funds particularly difficult.

But the reason for our work and our commitment has never been more tangible. Our determination to «end with obstetric fistula,» as the United Nations General Assembly once again urged on December 20, 2020, remains intact. Fistula Group remains committed to continuing to care for patients, many of whom are very young - so young that it is sometimes a matter of upholding the rights of women as well as children.

#### «The reason for our work and commitment has never been more tangible, but the funding does not follow.»

The training component of Fistula Group, supported in particular by the CARIGEST Foundation, has continued to grow, despite COVID, and has proved the effectiveness of an intense network built up over the years in Africa, Europe and the United States. The circulation of doctors continues to take place, allowing surgical workshops to be held and young doctors to be trained.

Dr Martin, who had just graduated in medicine in Madagascar, was able to specialise in urology with Dr Gueye in Dakar. Dr Aholou completed his specialisation in France and after having participated in numerous surgical workshops in Tanguiéta was appointed head of the gynaecology department of the Hôpital Saint Jean de Dieu. Dr Guiro, active in Burkina and Benin, is adapting to the conditions of circulation constrained by the health situation and terrorist risks between the two countries. Dr. Yunga, keystone of the operations in Tanguiéta, trainer and international expert with more than 2000 cases, operates in many African countries (DRCongo, Zimbabwe, Benin, Somalia, Somaliland, South Sudan, Chad and Burundi...). Prof. Tébeu, the cornerstone of the Fistula Group in Cameroon and the Central African Region, trains young doctors in numerous workshops and is constantly pushing research. He is the author of numerous scientific publications that are references in the field. Dr Benski, a researcher at Harvard and the University Hospital of Geneva, has joined the team on research projects. The bridges of transmission of knowledge and practices between universities, hospitals and continents are multiplying and enriching the cooperation.

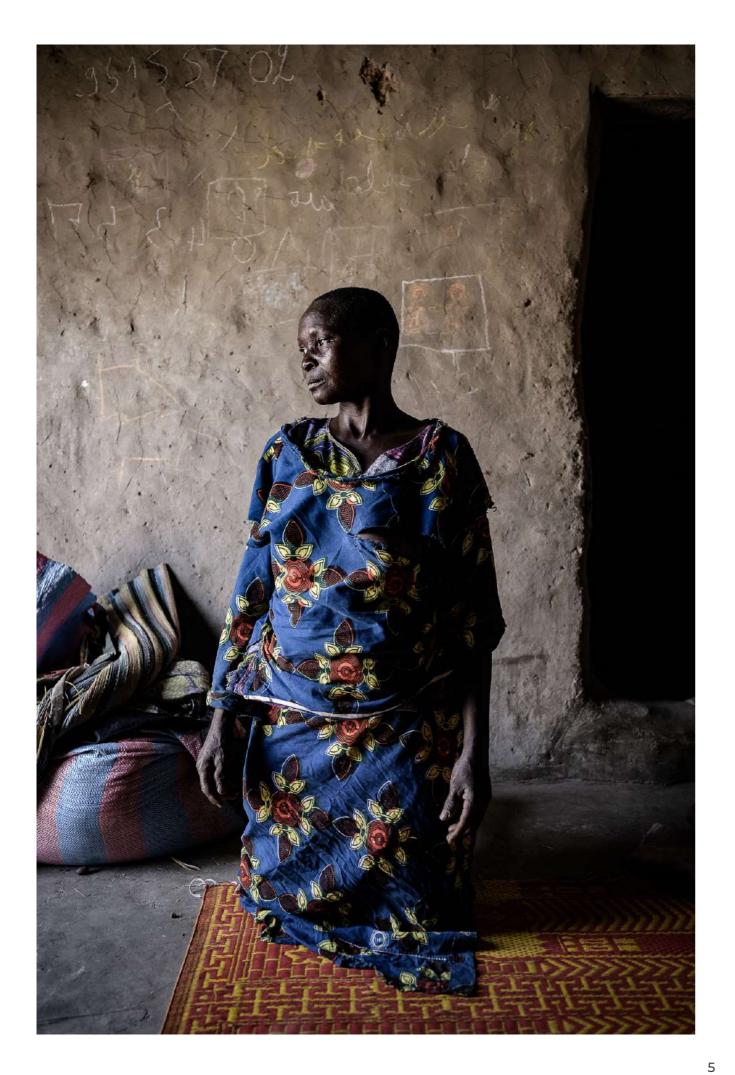
3

The year 2020 was also highlighted by a new partnership with the Artemedis Foundation, which has been operational since the last 2020 operation in Tanguiéta.

The Albatros Foundation, the Amber Foundation, the Baur Foundation, the Firmenich Foundation, the Global Foundation for Life Sciences, the Fondation de Bienfaisance de la Banque Pictet et Cie, the Rumsey Cartier Foundation, Pharos Trust, the Genolier Foundation and the Commune de Chêne Bourg, as well as many loyal donors, have remained generously supportive of the Fistula Group programme, despite the pressing requests of many associations seeking funding. Unfortunately, some of them have already announced their withdrawal in 2021, to support other causes.

We would like to thank all these actors for their support. It perpetuates our action, which needs, more than ever, visibility and encouragement.

C-H. Rochat



## —/ Overview 2020

#### **BENIN AND CAMEROON**

Since 1993 and Dr Rochat's meeting with Brother Florent, the network has not stopped to expand and the actions to take place... even in times of COVID.

#### 110 WOMEN TREATED IN 2020 DU-RING SURGICAL WORKSHOPS

Among Fistula Group's most significant operations this year were five surgical workshops that made a lasting difference to the lives of nearly 110 women and enabled :

The teams in training, most of whom are resident doctors, known as D.E.S. (doctors specialising in urology and/or obstetrics and gynaecology), to familiarise themselves with complex operating techniques



to develop new surgical approaches and form the basis for further scientific publications.

#### 5 SURGICAL WORKSHOPS IN 2020 DIVIDED BETWEEN BENIN AND CAMEROON

A PARTNERSHIP AGREEMENT WITH THE ARTEMEDIS FOUNDA-TION ALLOWS FOR THE SUSTAI-NABILITY OF FIELD ACTIONS IN BENIN

6



### MADAGASCAR

Since Dr Rochat's last mission to Madagascar in 2019, the cooperation has intensified, enabling repair missions to be carried out on a recurring basis in various hospitals of SALFA, an organisation that groups together ten Lutheran hospitals in Madagascar and 40 health units spread throughout the country.

### 89 WOMEN TO HAVE SURGERY IN 2020

After training specifically in the demanding field of fistula surgery, Dr. Randria became responsible for fistula surgery for the SAL-FA hospitals, performing regular operative campaigns. Having reached retirement age in November 2019, he can nevertheless continue to manage and teach fistula surgery, thanks to the support of Fistula Group.

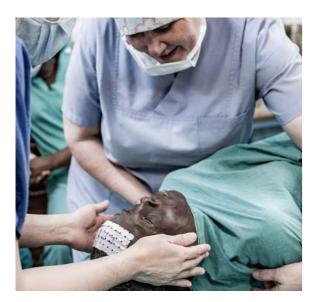
#### DELIVERY OF EQUIPMENT

Affected by a major political crisis, Madagascar has fallen into a critical economic and social situation, particularly between 2009 and 2013.

Now one of the poorest countries in the world, the country has a significant deficit of infra-structures and equipment, particularly in the health sector.

Fistula Group was able to send two respirators (donated by the Genolier Foundation), an electric scalpel and endoscopy equipment to Antananarivo.

## -/ Operating missions /--



Benin : 24 February - 3 March 2020 13 - 18 July 2020 30 November 8 December

Cameroon : 29 July - 7 August 2020 3 March - 4 April 2020

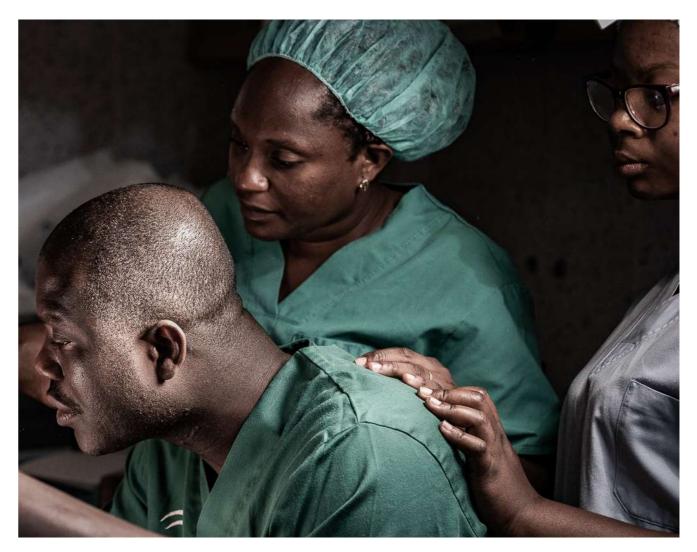
Madagascar : Jamuary - May - June - August-September - October - November-December 2020

In total, almost 200 patients were treated with very good results despite the complexity of the cases treated.



Compared to WHO standards and the complexity of the cases treated in Tanguiéta, the result is considered particularly satisfactory.





#### SCHOLARSHIPS IN PARTNERSHIP WITH CARIGEST

The Fistula Group programme focuses on reconstructive surgery, treatment of obstetric fistula and prolapse, improvement of the health care system, prevention, reintegration of patients, but also, and above all, training and research. The «Tanguiéta Model» has resulted in one of the most successful training centres for surgical treatment of obstetric fistula in West Africa. In Tanguiéta, dozens of surgeons but also trainers of surgeons have passed through and followed operative workshops. It is also in Tanguiéta that the necessary didactic material was developed in the sub-region and more generally on the African continent. The hospital has generated a «cascade effect» with the replication of «fistula treatment schools» in emerging countries.

8

7

The scholarship programme set up is longterm and covers several years (up to 6 years for surgeons).

It aims to train more than twenty doctors and nurses who have been carefully selected for their skills but also for their professionalism and motivation.

The fellows are mainly from the two partner hospitals of Fistula Group: - Saint Jean de Dieu de Tanguiéta (Benin) - Saint Jean de Dieu d'Afagnan (Togo) - but also from Madagascar, which is cruelly lacking in specialised surgeons, or from Congo or Cameroon.

The programme also relies on practical workshops / operating missions organised on a recurring basis in these partner places, several times a year, in partnership with the hospitals of SALFA (Groupement des Hôpitaux Luthériens de Madagascar) as well as CIESPAC and OCEAC for Central Africa.

## A long-term program

### PARTNERS

Fistula Group has increased the number of cooperation agreements.



- The Artemedis Foundation, which covers

50% of the operating missions in Tanguiéta. - Private donors

- Private foundations: Albatros Foundation, Ambre Foundation, Baur Foundation, Carigest Foundation, Firmenich Foundation, Global Foundation for Life Sciences, Fondation de Bienfaisance de la Banque Pictet et Cie, Rumsey Cartier Foundation, Pharos Trust, Genolier Foundation.

- Institutional partners: the Commune of Chêne Bourg

But fundraising is particularly difficult in times of health crisis. The City of Geneva has withdrawn from the project and some foundations have already announced that they will withdraw next year to focus on other issues.



In Africa :

- to relay the work on the ground, promote the training of local doctors, and organise the operating workshops

- to inform the population and prepare the missions in advance.

This work is accomplished thanks to :

- local NGOs: ESSOR (Benin) - Fondation Sentinelles (Burkina Faso) - OCEAC and CIESPAC (Central Africa) - SALFA (Madagascar) - Engender Health (Guinea Conakry) - local university hospitals



**ISOFS** : International Society of Obstetric Fistula Surgeons (Asia-Africa).

FIGO : International Federation of Gynecology and Obstetrics

FISTULA FOUNDATION : (primarily in Africa but also in Asia).

**UNFPA** : United Nations lead agency for sexual and reproductive health.

**WHO**: Department of Reproductive Health. OFWG: International Obstetric Fistula Working Group

The involvement of parastatal institutions is important. The work with the Claudine Ta-Ion Foundation, the foundation of the First Lady of Benin, is emblematic of this.

Raising awareness among the authorities and the population is also an important part of Fistula Group's joint work with international and local NGOs.

Some countries are stepping up their efforts to reduce the number of fistulas. This is the case in Benin, where the authorities have made Caesarean sections free of charge. Fistula Group is campaigning for this to be extended to the treatment of obstetric fistula as well.

### **AFRICA'S NEXT GENE-**RATION

Fistula surgery is a difficult surgery, which requires precise training, a lot of skill and is not part of the training curriculum of the general surgeon, who must be able to deal with all the emergencies, caesarean sections, extra-uterine pregnancies, appendicitis, fractures and other traumas arriving at the hospital.

The training of African doctors developed

in a difficult context

by the Fistula Group is bearing fruit, as it is now mainly doctors from the continent who treat fistula cases on a daily basis. More than 150 doctors and surgeons have been trained in the course of the operating workshops, including about fifteen who are able to treat the most difficult cases.

Today, doctors Moussa Guiro for Burkina Faso, Pierre-Marie Tebeu for Central Africa and Cameroon, Jean de Dieu Yunga Foma for Benin, or Kindy Dialo for Guinea have become respected experts in this field. This objective of knowledge transfer is es-

sential.

### THE GLOBAL CARE MODEL

Built up over the years, this model consists of :

- Searching for cases, through partner NGOs, and bringing them to the hospital on a specific date.

- The reception of patients in a structure called «la maison des fistuleuses», close to the hospital.

- The provision of an operating theatre equipped with adequate material - which implies its regular renewal.

- Operating sessions lasting about ten days, two or three times a year, during which about thirty patients are operated on.

- The presence during these sessions of an expert surrounded by surgeons who have come to learn or perfect their operating technique.

- Theoretical training to complement the acquisition of practical skills.

- Full coverage of the costs of treatment and hospitalisation of the patients for a month or more.

10

9

- Assistance in their social reintegration and long-term follow-up.

- Networking with hospitals in the country, and in partnership with the Faculty of Medicine and international organisations such as the United Nations Population Fund (UNFPA) and the World Health Organisation (WHO).

- A range of information and prevention activities through rural radio stations, local newspapers, village community workers, faith-based centres and the «Women for Women» initiative, providing free ambulance transport to those who can afford to pay a very small fee.

- Using computers and the internet, a database of all cases.

- Articles in the general press to draw attention to the problem.

- A scientific component: scientific research and publications, medical theses, participation in national and international meetings. - Finally, fundraising to ensure and develop this programme.

This global vision, which is very relevant, considers the woman not as a medical and surgical case, but as a woman in her entire life, as a teenager married and pregnant too early, stigmatised and made to feel quilty by her fistula, and who will only benefit from her recovery if she is fully reintegrated into her family, into society and rehabilitated in her dignity. It is thus a medical and health programme in the broadest sense, curative and preventive, it is also a question of social justice and ethics, and therefore of Human Rights.

## Research

## In 2020, 4 articles were published in academic reviews.

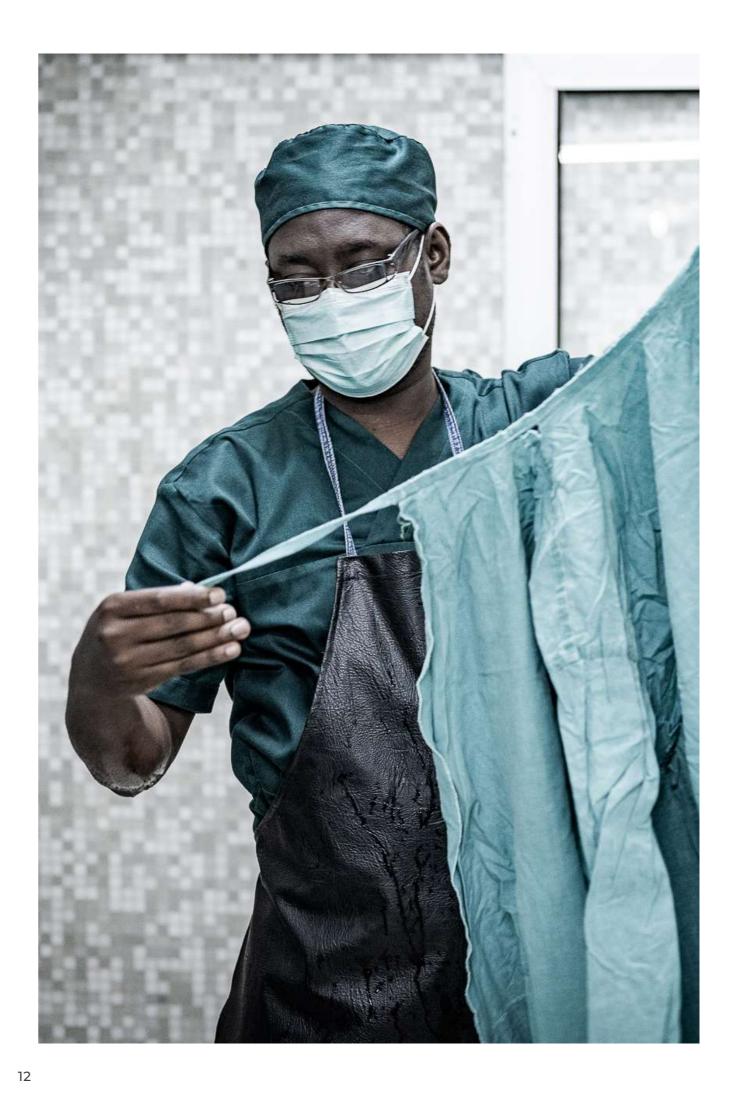
### Scientific papers

■ 1. Title : Réinsertion psycho-sociale et économique des femmes opérées pour fistules obstétricales et non obstétricales au Congo, Auteur(s) : P.M. Tebeu, R.S. Bakouetila, W. Odzebe Anani, J.S.S. Antaon, C.R. Mabiala, C.H. Rochat, Date of publication : 15.08.2020

■ 2. Title: Best Practices in Robotic-assisted Repair of Vesicovaginal Fistula: A Consensus Report from the European Association of Urology Robotic Urology Section Scientific Working Group for Reconstructive Urology, Auteur(s) : Marco Randazzo, Linda Lengauer, Charles-Henry Rochat, Achilles Ploumidis, Darko Kröpfl, Jens Rassweiler, Nicolo Maria Buffi, Peter Wiklund, Alexandre Mottrie, Hubert John, Date of publication : 09.07.2020.

■ 3. Title : Connaissances, attitudes et pratiques des professionnels de la communication sur la fistule obstétricale à Yaoundé (Cameroun), Auteur(s) : Claudine Tseunwo, Sylvain Honoré Woromogo, Jesse Saint Saba Antaon, Claude Messanga Obama, Pierre Marie Tebeu, Charles Henry Rochat, Date of publication : 30.06.2020

■ 4. Title : Besoins en réinsertion psycho-sociale et économique des patientes opérées de fistule vésico-vaginale au Cameroun, Auteur(s) : Pierre Marie Tebeu, Jean Pierre Kamga Olen, Estelle Carine Ngoula Zeck, Jesse Saint Saba Antaon, Charlemagne Simplice Moukouta, Charles Henry Rochat, Date of publication : 06.04.2020.



## Exhibition Awareness

#### **EXHIBITION** AT THE UNIVERSITY OF GENEVA



On the occasion of the Dies Academicus 2020, and the awarding of the title of Alumnus 2020 to Dr. Charles-Henry Rochat, Fistula Group highlighted its projects through an exhibition by the photographer Nicolas Cleuet, who was present during a Fistula Group mission to the Saint Jean de Dleu

#### An exhibition to shed light on a a taboo subject

Hospital in Tanguiéta.

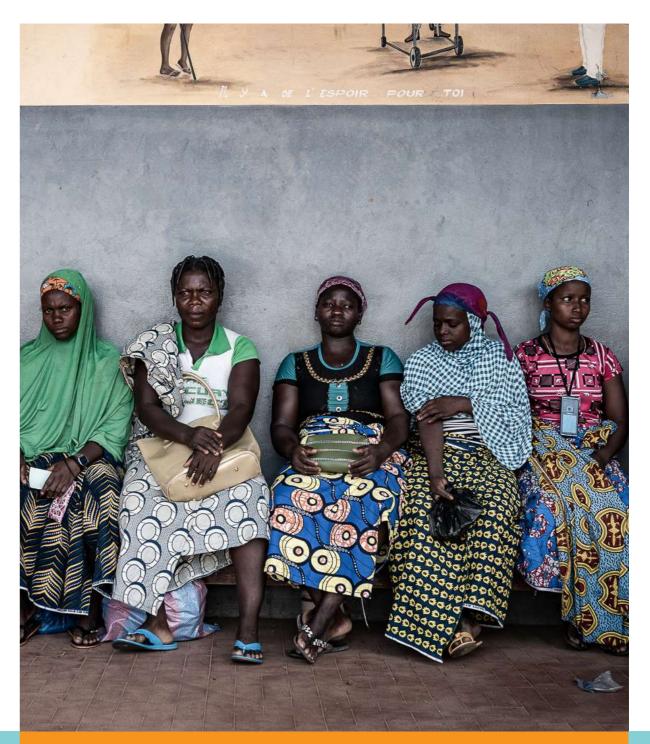
Africa is the continent where the social and health situation is the most worrying and where progress towards the UN Millennium Development Goals is the slowest. While significant progress has been made, with a decline of maternal and child mortality worldwide, WHO and UNICEF statistics also show great disparities.

The maternal mortality rate in sub-Saharan Africa remains a concern. It is 50 times higher than in rich countries. Access to safe and affordable health services, including throughout pregnancy, childbirth and the postnatal period remains a major concern, as improving the quality of preventive and curative care during this critical period has a major impact on maternal, fetal and newborn survival.

#### A fight for women's dignity

The fight isn't over, but the results obtained by a know-how and a network set up over 25 years ago are convincing. The «army» of doctors, mainly Africans, trained in surgical workshops, who have benefited from scholarships and wise advice through the Fistula Group exchange platform, is spreading throughout Africa and beyond. The programme already has several focal points in Central and West Africa.

The eradication of fistula is a long and winding road. It is based on educational programmes, conferences, teaching, dissemination of information, awareness-raising and solidarity. Fistula Group is part of a global social project that aims to reach out to the weakest and help people in the South to take control of their destiny.



## **Destin de femmes**

**Dies academicus** Alumnus 2020





14

### **Press review**



30 October 2020 Léman Bleu

Dr Rochat was the guest of Léman Bleu Télévision on 30 October. He spoke about his recent fight against the disease, his job, and the actions carried out in Africa by Fistula Group.

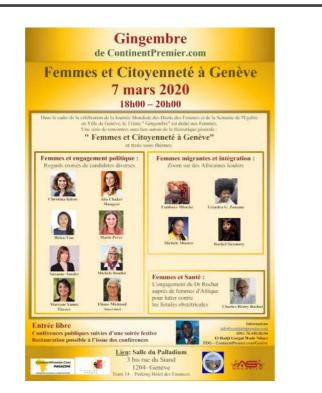




Charles-Henry Rochat Alumnus 2020 of University of Genève 09 October 2020 University of Geneva

Lecture by Dr Rochat Palladium, Geneva 7 March 2020

As part of the International Women's Rights Day and the Equality Week organised by the City of Geneva, Dr Rochat took part in a meeting moderated by El Hadji Gorgui Wade NDOYE, journalist and president of the association ContinentPremier.com, on the following themes: Women and political commitment, Migrant women and integration, Women and health. The last panel gave Dr Rochat the opportunity to talk about his commitment to women victims of obstetrical fistulas in Africa, and about the actions of Fistula Group



# Press

### Charles-Henry Rochat, 25 years fighting obstetric fistula

12 October 2020 Heidi News, by Sophie Woeldgen.

On Friday 9 October, Charles-Henry Rochat received the Alumnus Award from the University of Geneva at the Dies Academicus ceremony. This specialist in operative urology hopes that this award will give visibility to the Fistula Group, a network aiming to treat obstetric fistulas and to train local and international personnel in the surgery of this pathology, as well as in the care of women who suffer from it. Here is a portrait of an extraordinary doctor.

#### **Covid survivor, a doctor honoured** 8 October 2020

Tribune de Genève, by Laurence Bézaguet

Dr Rochat's graduation from the University of Geneva was an opportunity to highlight his humanitarian work and the projects developed by Fistula Group in Africa.

« His humanitarian vocation was born forty years ago. After attending his first ICRC delegate course in 1981, the young Rochat took part in a seven-month stay in Peshawar, Pakistan, in a war hospital. This was followed by a number of missions in Afghanistan, Cambodia and Iraq, with 1,000 war-wounded operated on by him. After his last mission in Iraqi Kurdistan in 1991, Dr Rochat devoted himself to obstetric fistulas.»

16

15











SURGICAL WORKSHOPS

### CHF 60 000.-

BENIN : 3 CAMPAINS CAMEROON : 2 CAMPAINS BURKINA FASO : ANNUEL MADAGASCAR: YEARLY CONGO: YEARLY

### MEDICAL EQUIPMENT CHF 20 000.-

SHIPMENT OF ENDOSCOPIC, UROLOGICAL, & PEDIATRIC EQUIPMENT, AND RESPIRATORS FOR BENIN AND MADAGASCAR.

70% OF THE FUNDS RAISED ARE DIRECTLY INVESTED IN AFRICA IN RESEARCH, TRAINING, CARE AND SENDING MEDICAL EQUIPMENT.

18

#### SCHOLARSHIP

### CHF20000.-

MAINLY IN BENIN IN TOGO IN MADAGASCAR

## VISIBILITY & COMMUNICATION

### CHF 45 000.-

EXHIBITION IN GENEVA WEBSITE COMMUNICATION DOC. INFORMATION LEAFLET DAY-TO-DAY MANAGEMENT

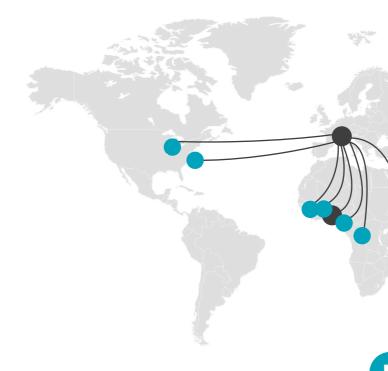
# Acknowledgments /--

Fistula-Group would like to thank all the donors involved in the obstetric fistula program who have made these actions possible:

La commune de Chêne-Bourg Fondations Ambre Fondation ALBATROS Fondation Rumsey Cartier Fondation Philanthropique Famille Firmenich, Fondation de bienfaisance de la banque Pictet & Cie la Fondation Genolier Global Foundation for Life Sciences The Pharos Trust foundation Fondation Baur Swiss Philanthropy Foundation Carigest ARTEMEDIS The long-term supporters

The Foundation would also like to thank Medtronic for its support for suture equipment and SALFA for its support in Madagascar.

# -/ Worldwide





Suisse

Headquarters of Fistula Group (Geneva) and of Sentinelles in Lausanne.



С

Bénin

Focal point of the Fistula Group programme.

New York (USA)

Albert Einstein College of Medicine, collaboration of over 10 years.

Detroit (USA)

Collaboration with Henry Ford Hospital, Detroit, in particular Dr James Peabody, urologist and co-chairman.

20

19



Cooperation via AFOA (Association de Fistula Obstetricale d'Afrique) and Engender Health led by Dr Blanchot and Dr Colas,



#### **Burkina Faso**

Collaboration with Dr Guiro for operations in both Burkina Faso and Tanguiéta.



#### Cameroun

Collaboration with Dr. Tébeu for operative missions in Yaoundé and Central Africa.



#### **Congo Brazaville**



Headquarters of CIESPAC, partner of the Fistula Group.



### Madagascar

Collaboration with SALFA.



## Fistula Group



### **RESTORING DIGNITY TO ALL WOMEN**



### Fistula Group

Un programme de la GFMER (Geneva Foundation for Medical Education and Research) Chemin de Beau-Soleil 12 – CH-1206 Genève <u>www.fistulagroup.org</u> <u>info@fistulagroup.org</u> Tel : +41 78 966 02 75