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# Hamlin Fistula- Ethiopia



## The Addis Abeba Fistula Hospital and its expanding activities

Members of the Japanese Parliament came to visit Addis Abeba Fistula Hospital on August 18, 2008. The Parliamentarian members were visiting to observe issues related to sexual and reproductive health, Maternal Health, Gender, Youth, Poverty and HIV/AIDS issues in Ethiopia.

Japan hosted the G8 Summit in May 2008 and these situation especially regarding reproductive health and related issues and needs were discussed ,the visit was a follow up to this meeting. The Parliamentarian members met with Dr. Hamlin and discussed about our programs in Midwifery and its connection to those who are suffering from Obstetric Fistula. They showed interest in supporting the hospitals needs.



### Message from the CEO- Mark Bennett

After the official opening of our center in **Harar** we remained with significant work to do to get the center ready to receive patients. This included completion of the lower level and fitting the rooms with equipment. Modifications to the Kitchen area had to be made and we also took the decision to increase the water storage capacity on site and to collect rainfall during the rainy period in a storage system. The centre is now ready to begin its work and **Dr Yifru** and his team will accept the first patients at the end of September. The **Midwifery college** has now completed one full year of training for the first intake of Students, who attended their clinical practice in two locations outside Addis Ababa. Student selection for the second year intake is now complete and the staff are busy in preparation for the arrival in October of these students.

It has been a difficult period with the resignation of some of our senior doctors, but **Dr Habte** and **Dr Hailemariam** have worked hard to fill the gap and together with the assistance of visiting specialists (mentioned below), have managed to treat our patient load and to actually manage many cases that had been on site for some months.

Our hospital is now in good shape with bed utilization improving and the numbers of patients waiting in accommodation at **Desta Mender** now lower than it has been for some time. In **Mekele** we have installed a new water plant that is now ready for testing, to capture rainwater, increase our storage capacity and also to soften the water which has damaged our sterilization equipment. This will begin operation in October. We completed the bid process for the construction of the **Metu centre**, and have selected a contractor. Late in October we will visit the site and prepare for commencing construction with a planned opening in early 2010. We have completed another step in our development of policies and systems with the completion of our **HR and Policy Manual** which will be distributed to staff in October. As many of you know **Dr Hamlin** has been taking treatment for TB. She is doing well and getting back into her regular routine on the wards staying close to the patients that she loves.

## Medical News



*Fistula Patients at the AAFH waiting to be seen in the outpatients section.*

Even though it is a rainy season and from our past experience the number of our patients decreases ,this year it was different . In our main centre were able to perform 362 surgeries from July –September and admitted 222 patients. we also had 19 high-risk mothers who came to our Hospital to have their babies.

Starting from May 2008 we had three doctors From England. Dr. John Kelly ,

Dr. Brain Hancock and Dr.Tom Rassen, from Netherlands (AMREF), who were doing surgeries in Addis Abeba Fistula Hospital, working alongside our team

Professor Gordon Williams has continued to assist in his specialized 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.

## Hamlin Fistula-

The new barn constructed in Desta Mender now functions very well. The income the women generate from the dairy farm is increasing and is very encouraging. Some are planning to move out of the village starting in the coming month. This will be a major step for them towards self-reliance. We hope many more will follow as we work to build their confidence and capacity.

We now have three batches of chickens in the poultry house. A hopeful & smiling resident of the village named Yeshalem keeps the record on feed, egg production, and on sales. She and her friends in the farm are working determinedly.

## Desta Mender

This last month 6 new women were referred to Desta Mender. Sr Belaynesh, the village resident nurse, has organized a welcoming ceremony to introduce the new comers to the staff & other residents and to inform them about the village.

We are also working to modify the Literacy class in Desta Mender to a kind of preparatory program that comprise confidence development elements, basic skills such as business and mathematics, as well as topics on hygiene & personal health management and other essentials.

We believe the program will support and provide better chance for the women in their progress to sustainable independent livelihood.

We will soon open the café by the lake. Mrs. Rae Newman, a friend from Australia, is now with us. She is lovingly training some of the women on catering & hospitality. Those women will run the cafeteria. They are learning to make Pastry, Pies, Cakes, Soups and several other meals. What an exciting time!

( prepared by Ato.Ephrem Aklilu )

## Outreach Centers

“Whole hearted commitments to women with childbirth injuries with God’s love and compassion”

We have been able to treat more patients at Hamlin Fistula Centers, because they now know now where to go through the work of our public health officers.

In Bahir dar Hamlin Fistula Center, starting from July 2008 until September 2008 there were 172 patients who were admitted to the centre and operated on. Of these 63 surgeries were done for the second time. There were 21 high risk mothers, cared for. Among the patient admitted 135 patients were given literacy training and 4 doctors were trained in how to do the fistula surgery.

In our Mekele Hamlin Fistula Center about 50 patients were admitted with 49 surgeries done and we had one patient who had a second surgery. 36 patients were cured the others are still under treatment.

In our Yirgalem Center we have admitted 99 patients starting July up to September 2008 with 72 having a fistula surgery. Among these 58 were fully cured and the others are still taking treatment. Dr. Einar has been doing surgery in Yirgalem and Sr. Sara who was on maternity leave

is back now assisting at the OR along with our Nurse Aids and Sr. Wolela.

Harar Center will start receiving patients in early October and a public health officer is hired to train and raise awareness which will help to receive more patients. Dr. Yifru is ready to begin surgery along with our nurses and nursing aids.

## Prevention

We need to work hard on prevention so that young girls will not face the same problem as their mothers. One of the ways to prevent fistula is by educating the community about obstructed labour and teach them what fistula is and why it occurs.

This month we received two patients and we saw a resemblance between them so we asked if they were related. We thought that they might be sisters, but the older one said that “yes we are related, she is my eldest daughter.

Muche, the mother, is 40 years old and she had fistula 8 years ago, Hawa is now 25 years old and she had a fistula 7 months ago.



Hawa was a first hand witness of her mother’s suffering and her loss because of her injury. Her mother delivered a still birth after staying in labour for five days and her husband even though she was a mother of his 4 children abandon her when she had the fistula. Hawa explained how shame full it was and also how the society in the village treated her mother. “ My mother had four children

and all the time my fear was not to have the same problem as my mother”. Hawa on her fifth delivery faced her long time fear as she was in labour for four days and she also had a still birth with a fistula, this was her nightmare because she would also now face the hard life she has witnessed with her mother.

Fortunately for Hawa she only stayed with this problem for seven month.

Our public health officer in our Bahirdar Hamlin Fistula Center did training throughout the Amhara region, they have involved the radio and talked about the symptoms of a fistula patient to the community and that is how, Hawa and her Mother managed to come to our Bahir Dar Center and were referred here to our main hospital.

We need to educate our society and create more awareness to prevent fistula so that young girls like Hawa will not face their worst night mare.

## 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 16 old she was pregnant with her first child. Wubalem was scared of what was going to happen next. One day the pain started and she had it for the whole day and at night it was even more painful.

Women around her area gathered in her house to help Wubalem but with no success. After waiting for three days her uncle suggested to take her to a hospital. They started the journey with hope in time that she would be able to deliver a healthy baby. After they had walked for an hour the staff at the health center said they would help. After trying for the day they told them to go to a bigger hospital where they could find a doctor but it was too late to make the journey because it was a four hour drive so they waited until the morning. When they got to hospital they were

able to help her to deliver the still birth and were told that she had a bladder problem which could only be treated in Addis Abeba.

Wubalem was treated at the Addis Abeba Fistula Hospital where she stayed for three months going through two operations to be completely cured. After that she was sent home to her village but was told that she would have to go to a hospital the next time she gets pregnant.

Wubalem is at the hospital now for different reason. After two years she is back at the Addis Abeba Fistula Hospital to deliver her baby. This will be her first live baby and we are doing everything we can to make sure she have a safe delivery.

## Stoma Therapy Clinic

Among the patients who come to Addis Abeba a few of them need to go through a urinary diversion operation. These patients need counseling and also get training in the Stoma Therapy Clinic.

The stoma clinic has been functional for the past three years. During these years the number of ostomates with urinary diversion operation has increased. There are now more than ninety women have undergone these operations (urostomy). For these women it is a chance to end the incontinence they have struggled with and to lead a more health life.

Patients come to the clinic for pre and post operative counseling, training, regular follow-up and the monthly supply of bags.

There are only a few women who went back home to their rural villages. Most of them are staying at Desta Mender. Their stay will give them easy access for follow-up and also they learn a range of skills building confidence towards self reliance. There are thirty women who had this operation previously who can welcome and assist new women who are coming to terms with this new challenge in their life. After training in Desta Mender, some are now working as nursing aids, ten are working in the midwifery school in catering and cleaning. For the future the plan is to open opportunities for the women to return to their home region with skills they have learned at Desta Mender.

Our regional centers will be able to ensure they get regular follow up for their health and also supplies of Stoma bags and other needs that they may have.



Sr Ruth Gadissa our Stoma Nurse.

## Midwifery College

**The Hamlin College of Midwives** has completed their first year of studies. The students completed the year with final exams and a six week clinical placement to practice their newly acquired midwifery skills. The students worked in Labour and delivery, Antenatal and postnatal care, family planning, HIV/AIDS counseling and testing and community visiting.

Our students were accompa-

nied 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 have had a month of annual leave and the staff have revised the first year, preparing for the second year and the new intake of students who will come from Tigrey, Oromia outside of Harar and the Sidama region in the south.

Thank you for your support during this first year. Sr Annette Bennett

Below is 1st year student Yingisu counting a fetal heart rate while practicing Antenatal Care in Attat Hospital.

1<sup>st</sup> year student Sinedu, providing Antenatal care in Attat Hospital.





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## THE ADDIS ABEBA FISTULA HOSPITAL

Drs. 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 Abeba Fistula Hospital specifically for women with childbirth injuries.

The Addis Abeba Fistula Hospital is an organization 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 bare foot. Distanced by their relatives, we are their only hope; therefore all care, treatment and surgery is completely free of charge.

We are a registered charity in the Ministry of Justice and under the umbrella of the Federal Ministry of Health.

## Story about our Staff

Sr. Sara Honja have joined our hospital in February 2006. She had a training at the Addis Abeba Fistula Hospital before going to our Center in Yirgalem.

Sara has been working with the Yirgalm Hospital for over 14 years after she had graduated from the Awasa Health Science College before working in our hospital.

“ even after I graduated I wanted to work in my area to help my people.” though most professional medical staff prefer to work in the city rather than in the country side , Sr. Sara decided to stay in her region and help with the community living in the rural area.

Sr. Sara had been on maternity leave for the past three months and she is now back at the Yiralem Hamlin Fistula center assisting Dr. Einar in the Operating theatre.

She has given birth to her first child, a daughter named Selo . She lives in Yir-galem town, and we are grateful to have her in our center with other staff helping our poor women in the southern region.



*Sr. Sara , Selo (4month old)  
and her husband*

