



SAFE HYSTRECTOMY

Organized by Ibn-e-Sina University in collaboration with Pakistan National Forum on Women's Health.



Prof. Pushpa Siri Chand



Prof. Qamar-un-Nisa

Middle-aged women suffering from vesicovaginal fistula following hysterectomy represent a significant health issue within the community. Accurate diagnosis and appropriate treatment selection are crucial for achieving effective outcomes. Ureterovaginal fistula is a severe condition that poses considerable clinical challenges, exacerbated by social and psychological factors.

On September 19, 2024, a one-day workshop was conducted in partnership with the Pakistan National Forum on Women's Health and Muhammad Medical and Dental College, featuring Professor Pushpa Sirichand and her team. The event took place at Muhammad Medical and Dental College in Mirpurkhas and included participants from the Obstetrics and Gynecology department, postgraduate trainees, house officers, and paramedic staff from Muhammad Medical College and Isra University.

The workshop commenced with a welcoming address delivered by the Head of the Department, Professor Qamar un Nisa Habib, followed by a recitation of the

Holy Quran by Professor Ambreen Amna.

Subsequently, Professor Pushpa Sirichand highlighted the rationale behind organizing the workshop, noting the increasing number of fistula patients following hysterectomy. She underscored the necessity of identifying the underlying issues and implementing corrective measures to mitigate the incidence of vesicovaginal fistula post-hysterectomy. Professor Sirichand further illustrated the severity of the condition by stating that if a blind patient suffering from fistula were given the choice between regaining her vision or achieving dryness, she would prioritize becoming dry over restoring her sight.

This emphasizes the significant psychosocial morbidity associated with the condition.

The workshop commenced with presentations from various esteemed speakers:

"Narrators"

Prof. Qamar-un-Nisa.

Prof. Madhu Bala.

Date;

19th September 2024.

Venue:

A.H. Muhammad Conference Hall. Muhammad Medical College. Mirpurkhas.



- **Professor Gul-farheen SP** delivered a talk on the "Course of Ureter and Preventing Ureteric Injuries During Pelvic Surgeries," highlighting the significance of understanding the ureter's pathway and the identification of surrounding tissues.
- **Dr. Azra Rajpar** discussed the "Pre-operative Selection of Patients for Safe Hysterectomy," stressing the critical role of a multidisciplinary team, pre-operative counseling, and rehabilitation programs in minimizing the risk of vesico-vaginal fistula.
- **Professor Ambreen Amna** presented on "Safe Catheterization and Early Referral," emphasizing the necessity of counseling patients post-fistula repair regarding the resumption of physical and sexual activities to prevent recurrence.
- **Professor Sarwat** addressed the principles that can be implemented to avoid ureteric injury during gynecological surgeries, underscoring the importance of a thorough understanding of normal anatomy and the variations in the ureter's course.
- **Dr. Amna** provided insights on the prevention of ureteric injuries in obstetric patients.
- **Professor Pushpa Sirichanad** showcased three videos focusing on safe hysterectomy, the prevention of urinary tract injury during challenging abdominal hysterectomies, and the prevention of urinary tract injuries during vaginal hysterectomies.
- The workshop also included hands-on practice with manikins for all participants, which was a remarkable experience under the guidance of Madam Pushpa and her team.
- The event concluded with a delightful hi-tea, where guests were adorned with Ajrak, and a photo session was held to commemorate the occasion with participants and guests.

Conclusion: Vesicovaginal fistula following hysterectomy is a condition that can be prevented through meticulous patient selection, thorough preoperative evaluation and optimization, anticipation of potential challenges, comprehensive preoperative counseling, measures to monitor the ureter's pathway, collaboration with a multidisciplinary team, and prompt recognition of complications along with appropriate referral.

