

Fistula: Fast Facts

- Once common throughout the world, fistula all but disappeared in Europe and North America more than 100 years ago through improved obstetric care.
- The World Health Organization estimates that more than two million women are living with fistula in developing countries; an additional 50,000 to 100,000 new cases occur each year. These figures are based on the number of women seeking treatment, and are likely to be gross underestimates.
- About 15 per cent of all pregnancies will result in complications that require emergency medical intervention.
- Obstetric fistula is a preventable and treatable condition. The average cost of treatment and rehabilitation is USD \$300, well beyond the reach of most women with the condition.
- The success rate of fistula repair for experienced surgeons can be as high as 90 per cent. After treatment, most women can resume full lives and bear more children.
- In 2003, UNFPA and its partners launched a global Campaign to End Fistula – the first international effort to address this condition. The Campaign is now active in more than 30 countries in sub-Saharan Africa, South Asia and the Arab States.

Fistula in Nigeria

- In Nigeria, a woman has a 1 in 18 lifetime risk of dying from complications of childbirth.
- Nigeria may have one of highest fistula prevalence rates in Africa, studies show; the problem is particularly severe in the country's northern states.
- An estimated 400,000 to 800,000 women suffer from fistula in Nigeria, with 20,000 new cases added each year.
- UNFPA is working with the Nigerian government on a nationwide plan to address the growing need for fistula treatment and training services.
- The "Fistula Fortnight" in Nigeria is part of the global Campaign to End Fistula and will guide similar initiatives in other countries.

Key Strategies to Address Fistula

- Provide adequate medical care for all pregnant women and emergency obstetric care for all who develop complications.
- Increase access to education and family planning services for women and men.
- Postpone pregnancy for young girls to minimize the risk of complications during childbirth.
- Improve girls' nutrition to prevent stunted growth (which can leave the mother's pelvis small in relation to the baby's head).
- Repair physical damage through medical intervention and emotional damage through counselling.