

Study on Biological Activities of Phytochemicals and Proteins from *Datura alba* Seeds

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ABSTRACT

Fistula is a medical emergency and it need prompt treatment with highly trained professionals. but before this patient should know about it. Usually there is a concept that rural areas are less privileged and they have no knowledge about certain health issues but this survey not only showed that females belongs to urban area are also not well aware of this medical condition and primarily role of midwife is crucial in both populations to give general awareness about obstetric fistula and seek help from them.

Keywords: fistula, general awareness, midwives, obstructed labor, rural population, urban population.

INTRODUCTION

Fistula -A hole, a dark hole that dumps a human into dark tunnel where very few are there to enlighten your path in correct way and stand by till end.

In general, Fistula is an abnormal connection between two hollow organs.

Obstetric Fistula

A medical emergency - abnormal opening

/hollow space formation between vagina, rectum,

urinary bladder and ureters (thefreedictionary, n.d.). It leads to incontinence of feces or urine, gas or pus from vagina. (Center for Women's Pelvic Health at UCLA, n.d.)

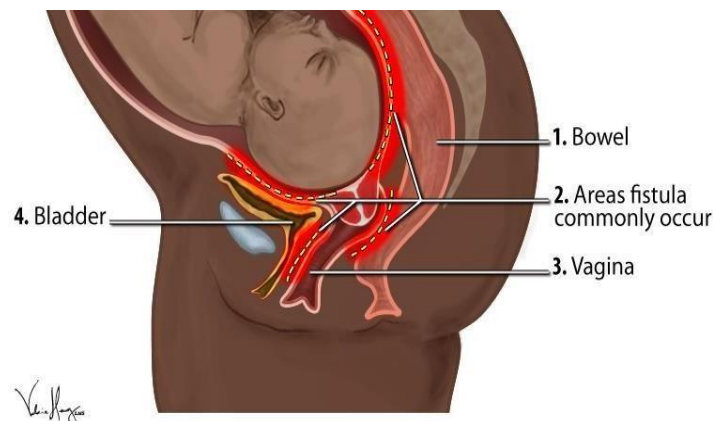


Figure 1. Common sites for obstetric fistula- (en.wikipedia.org, n.d.)

Types of Fistula Rectal

- Perianal- around the anal canal
- Ano-rectal- between anus and rectum

Vaginal

- Rectovaginal- fistula formation from rectum to vagina
- Colovaginal- from colon to vagina
- Vesicovaginal- from urinary bladder to vagina
- Ureterovaginal - from ureter to vagina
- Urethrovaginal- from urethra to vagina

Urinary Bladder

- Vesicouterine – from urinary bladder to uterus (nafc.org, n.d.)

Etiology

1. Early pregnancy
2. Poor nutrition
3. Stunt growth
4. Prolonged obstructed labor
5. Recurrent infection
6. Unhygienic conditions
7. Lack of knowledge
8. Unavailability of good pre-natal, natal and post-natal care
9. Malpractices in C-section
10. Lack of information about contraceptive and etc.

(Lyimo & Mosha, 2019)

Signs & Symptoms

1. Urine & Fecal incontinence from vagina
2. patient has offensive smell
3. Fever
4. Itching
5. Fragile perineal area
6. Abdominal pain
7. Frequent vomiting diarrhea and etc.

(Rane et al., 2020) **Possible Outcome**

Social impact

1. No social life
2. Emotionally patient is deteriorated
3. Family abandon them usually
4. Financial un-stability due to no job

Medical impact

1. No marital relation
2. Unable to conceive
3. Recurrent infections
4. Disturbed GIT

(Changole et al., 2018)

Meta-Analysis

“It is nurses and midwives who will be able to prevent fistula.”— Dr. Shersshah Syed, Pakistan.

- Meta-analysis done for role of midwives in prevention of obstetrical fistula, the statistics shows that there are almost 1,000,000 cases worldwide reported for fistula in 55 countries and almost 50,000 cases comes into highlight every year out of which 16,000 are treated annually and moreover new cases also being reported yearly (operation fistula, n.d.)
 - Lucy Abasa a national reproductive health trainer from Uganda quotes the importance of partograph during labor and education of staff to take timely decision according to partograph is vital in preventing obstructed prolonged labor so is chances of fistula development. fistula care plus, n.d.)
 - In 2014 a research conducted in rural community of Pakistan with help of Midwives for prevalence of fistula in randomly selected 5064 women of age 15 yrs. and older (96% response rate). Showed that women of rural areas are more in number who had fistula and parous women with fistula are from age group of >20 yrs. 20 women were identified with fistula from rural area and only 4 took the treatment out which 3 females faced failed repair (Jokhio, Rizvi, J Rizvi, & MacArthur, 2014)
- An article published in Dawn in 2015, Razia (Blind) married at the age of 14 and developed fistula and lost the baby in obstructed prolonged labor for 10days. She visited Koochi Goth hospital for treatment and now started her life again. She quotes, **“It is better to be blind than to suffer from obstetrical fistula”**
- According to WHO, health inequities in Pakistan shows that most affected region are rural areas due to lack of hygiene, sexual/ marital education, poor water supply, early marriages, obstructed labor, lack of obstetric care. Though graph is getting better over years but still on very slow pace (Nabi, 2015)

Over 2 million women are living with untreated fistula in Asia and Africa, abstinence from traditional ways of delivering baby, early marriages and obstetric care can prevent this health emergency and it can be possible by a strong bridge “MIDWIVES” and 40,000 midwives are needed to eradicate this health emergency (WORLD HEALTH ORGANIZATION, 2018)

Solution Is Divided into 4 Parameters 1. Prevention > via Midwives 2. Financial support > via government 3. Reintegration strategies and interventions > by healthcare organizations

Advocacy and awareness > via usage of social, electronic and print media, approaching rural areas through Midwives

(Cathrine Hamelin Fistula Foundation, n.d.)

METHODOLOGY

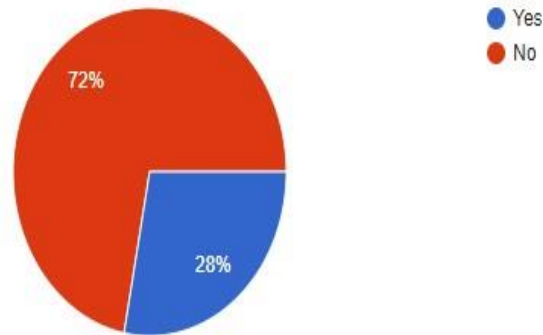
A survey is conducted via google form questionnaire among random urban population including 25 females only of all age groups, married, unmarried and university students from all discipline.

RESULT

The survey showed following results. Only 48 percent females of all ages know about fistula while 52% don't know about it. This shows a high demand of general public awareness in urban population about obstetric fistula as well. 84% females know about midwife while 16 % don't know about midwife. This shows a larger population can seek help from midwife, which is a good sign

do you know if any female suffers from fistula where she can go for treatment

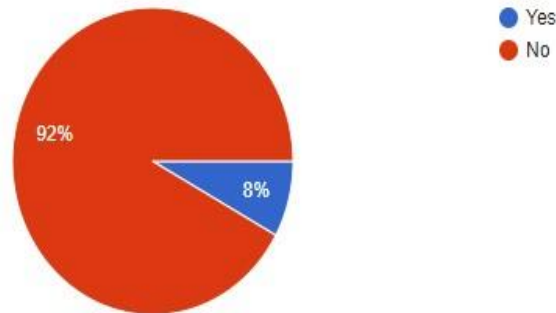
25 responses



72% of females don't know where to go for the treatment of fistula while 28 % knows from where to get treatment. This a really high misbalance among awareness about fistula in females of child bearing age

do you know fistula can be treated free of cost in Pakistan

25 responses



On asking that do they know fistula is treated free of cost in Pakistan. Only 8% knows about it while a larger no of educated females belongs to urban area i.e., 92% don't know that fistula is treated free of cost in Pakistan

CONCLUSION

The conclusions lead to the fact that there is a dire need of Midwives on extremely urgent basis to help out females who don't even know about fistula and its treatment, the survey conducted via Google form is from urban area and awareness about fistula, midwives and its treatment is also lacking in urban areas. Then what one can expect from rural areas where fistula ratio is already high.

PREVENTION is better than CURSE (fistula)

Educate and Eradicate

Via Bridge (Midwives) Educate **Parents, Couples, Teenagers at Pubertal Age**

Education Will be given to rural and urban areas population by midwives and different media platforms

Eradicate Midwives, Primary, Secondary

&Tertiary Healthcare Systems

Eradicate by Making Bridge Between Primary, Secondary and tertiary healthcare systems and general population via Midwives to educate and guide on strategic basis, designed to improve women health infrastructure at grass root level.

Midwives are from people for people – locals trust them as they are from their community and things can be easy to make it understandable among customs driven locals. Fistula campaigns are needed to be run like polio campaigns

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