

# New thesis identifies risks for urinary incontinence due to fistula

November 4 2015, by Sabina Bossi

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Four per cent of women between the ages of 15 and 49 in western Uganda live with urinary and/or faecal incontinence caused by genital fistulas. In a new doctoral thesis, Justus Barageine identifies the risk factors in this setting as caesarean section performed by unskilled medical officers, short stature, large babies and prolonged labour.

Two to three million women around the world live with urinary or faecal incontinence caused by genital fistulas. Justus Barageine conducted four sub studies for his thesis.

The first is a case-control study, in which short stature, large baby, prolonged labour and surprisingly [caesarean section](#) turn out to be [risk factors](#). Secondly, a randomised study concludes that shorter postoperative care involving early discharge with catheter 3-5 days after fistula surgery did not alter the outcomes of treatment or increase the risk of complication when compared with routine late discharge (after two weeks).

The other two studies are qualitative and concern the perceived changes in life quality that living with [urinary incontinence](#) entails for the women and their husbands. While the women discussed their lives in focus groups, their husbands talked about their own experiences in personal, in-depth interviews. The alarming result is that the [women](#) suffer not only social stigmatisation but also depression and serious sexual problems. The interviewed men, who had all remained married, suffered not only from the sexual and financial problems but also felt small, having lost

their "hegemonic masculinity".

Justus Barageine is a gynaecologist and studied for his PhD as part of a long-term, Sida-funded research collaboration between Karolinska Institutet and Uganda's Makerere University. Three of the four studies have already been published, while the fourth is under review by *Lancet Global Health*.

**More information:** Genital fistula among Ugandan women: Risk factors, treatment outcomes, and experiences of patients and spouses.  
[openarchive.ki.se/xmlui/handle/10616/44861](https://openarchive.ki.se/xmlui/handle/10616/44861)

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