



Supporting the Leicester-Gondar Link

PROJECT UPDATES

PROJECT NAME : PELVIC FLOOR DISORDERS IN WOMEN IN RURAL ETHIOPIA

PROJECT CONTACT : PROFESSOR DOUG TINCELLO

Period Covered : March – July 2018

Introduction – Professor Tincello has been awarded £100,000 from the Wellcome Trust to support this work.

Technical Summary - Urinary incontinence (UI) and pelvic organ prolapse (POP) commonly affect women after childbirth. In the developed world initial treatment is non-surgical with pelvic floor exercises for UI and vaginal support pessaries or pelvic floor exercises for POP. Working with colleagues in Ethiopia we know that UI and POP affect much younger women, with greater severity. Conservative treatments are not offered because of lack of trained personnel, and significant difficulties with transport and access to care. Pelvic floor disorders are a modern epidemic and the introduction of sustainable treatment models is a public health priority. Our long term goal is to design acceptable, sustainable and deliverable fully developed conservative treatment interventions for the treatment of pelvic organ prolapse and urinary incontinence to be disseminated, delivered and evaluated in a large prospective study. This application will fund three work packages which bring key disciplinary perspectives together to lay the groundwork for this goal: a priority setting partnership in Gondar, Ethiopia; formative research with qualitative interviews to understand views and experiences of women and stakeholders to inform the design of the intervention, and an exploration of individual and community stigma associated with the condition to develop educational materials using concepts of communication for social change.

Lay summary - Incontinence of urine and prolapse (dropping) of the womb are common conditions affecting women in middle age. Treatment is with pelvic muscle training for both these problems, supervised by a physiotherapist. The research team have been working in Ethiopia where these conditions are much more common than in Europe or the USA, but where women have no access to treatment because there are few trained staff, based in only a few larger towns. Prof Tincello and his team will interview patients, their families and healthcare workers to gain important insights into the challenges of providing treatment. They will also explore what women and their communities understand by prolapse and develop relevant information materials for education. Thirdly they will run a priority setting partnership where women, their families and healthcare staff will agree the “top 10” treatment questions to guide future research into these conditions in low and middle income countries.

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