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Reproductive health and the question of unsafe abortion and post abortion care at Kanye Adventist Hospital: A preliminary snapshot

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Introduction: Unsafe abortion is a major public health problem. Preventing maternal morbidity and mortality in countries such as Botswana with restrictive abortion laws is crucial. In 2014, approximately 22 percent of maternal deaths in Botswana were attributed to abortion, which is a significant increasing trend from 15 percent in the past five years. The preliminary record review study assessed the community issue of abortion presenting at a rural missionary district hospital in Southern Botswana, and the maternal health consequences of unsafe abortion.

Methods: Using retrospective medical chart review, patient information was gathered that included socio-demographic information, family history, medical history, obstetric history, medical history, type of termination procedure, immediate complications relating to the abortion, procedures and tests performed. Patient records from January 2010-June 2015 with a final diagnosis of abortion as noted on the morbidity, mortality, and obstetric in-patient form were reviewed.

Results: 865 medical charts were reviewed. Patients ages ranged from 14 to 46 years; gestational age from 3 weeks to 30 weeks; and gravidity (G1P0 to G8P7). Adolescent/youth represented 25.3% (n=219) of the cases. Abortions were categorized as incomplete, complete, septic, threatened, missed, and inevitable. Patients represented four nationalities (India, Zambia, Zimbabwe, and Botswana).

Conclusion: There is a need for a compassionate care approach to guide the development and implementation of appropriate preventive programs, and educational tools. Strengthening post-abortion care and linking it with family planning services in Botswana is warranted.

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