

Urologic Disease in a Resource Poor Country

Introduction and Objective: Establishing a baseline for understanding the role that urologic disease plays within central Haiti could lead to the development of sustainable and regionally appropriate urologic care. We aim to document the prevalence of urologic surgical disease presenting for treatment in central Haiti.

Materials and Methods: We conducted a retrospective review of surgical case logs at five Partners in Health (PIH) and Zanmi Lasante (ZL) hospitals in central Haiti. Data were collected from June 30, 2009 through July 29, 2010 and included patient demographics, disease processes, interventions required, surgeon name, and surgeon training (urologic versus non-urologic trained).

Results: Urologic surgical disease comprised 498/5539 (9.0%) of all surgical cases in central Haiti from July 2009-July 2010. A total of 492 diagnoses and 498 urologic procedures on 469 patients were recorded. The most common diagnoses included hydrocele (33.3%), phimosis (23.0%), benign prostatic hyperplasia (BPH)(10.8%), and cryptorchidism (7.3%). Hydrocelectomy was the most commonly performed procedure (160/498, 32.1%), followed by circumcision (117/498, 23.4%) and open prostatectomy (38/498, 7.6%). Surgeon training information (urologic trained versus non-urologic trained) was determined for 360/498 (72.3%) of surgical cases. Urologic-trained surgeons performed 55/360 (15.3%) of all surgical procedures. Among patients who underwent prostatectomy for BPH, there was no statistically significant difference for the use of the open prostatectomy technique between urologic trained (14/31(45.2%)) and non-urologic trained surgeons (17/31 (54.8%)), $p=0.86$. Urologists performed all transurethral resections of the prostate (TURP) (9 v. 0, $p=0.007$) while non-urologic trained surgeons only performed open prostatectomy.

Conclusions: Urologic surgical diseases comprise a substantial source of morbidity for patients in central Haiti. Understanding the scale and scope of urologic disease is important in developing health systems to adequately address the regional burden of surgical disease in limited resource settings.