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Obstetric services in low income countries (Sudan as an example)

edical services in general, and anesthetic services, in Sudan have been vulnerable to changes secondary to the socio-economic factors over the last few decades. This cross-state survey aims to identify the current set up of obstetric anesthesia services in 19 hospitals - representing all public hospitals in Khartoum State with maternity unitsand audit them against internationally set standards. This is a cross-sectional descriptive non-interventional study. Questionnaires- based on the World Federation of Societies of Anesthesiologists (WFSA) Safe Anesthesia Standards- were distributed to Anesthetic departments' heads at the time of the study (first to fourteenth of May 2016) of 19 public hospitals. This is the total number of public hospitals delivering obstetric services in Khartoum State. All filled out questionnaires were returned (response rate 100%). Collected information/data provided were subsequently entered an Excel sheet and analyzed. Results were tabulated. There was a considerable variation in the capacity of the surveyed hospitals in terms of

human resources, caseload and set up. Improper utilization of already deficient anesthesiologist in covering high load obstetrics services was also noticed. All the hospitals fell short of recommendations for minimum standards set by the World Federation of Societies of Anesthesiologists (WFSA). There is a vast gap between international set standards and the current set up of obstetric anesthesia in Khartoum State public hospitals. Necessary concerted efforts from governmental, non-governmental and professional bodies are warranted to improve obstetric anesthetic services in Khartoum State.

Speaker Biography

Hayat Elfil has completed her higher training in anesthesia in Ireland and obtained her Obstetric anesthesia fellowship from the National maternity hospital, Dublin, Ireland. She currently works as a consultant in obstetric anesthesia in the Women wellness research center, Doha, Qatar.

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