Background
The Fistula Care Project in Nigeria observed variations in pre-, intra-, and postoperative procedures for management of obstetric fistula among five northwestern Nigerian States. In addition, there are different levels of administrative support in provision of services among the different sites, as well as a huge backlog of women awaiting repairs.

Objectives
Fistula Care in Nigeria sought to use clinical peer support networks to encourage standardization and improvement of quality of services across facilities.

Methods
• Convened quarterly retreats of fistula surgeons and nurses, including trainers.
  • Retreats provided an avenue to share successes and challenges.
• Pooled fistula surgical teams to provide fistula treatment at alternating facilities.
  • Pooled teams have addressed the backlog of clients.
• Collaborated with stakeholders to form statewide task forces.

Results
• Increasingly uniform pre-, intra-, and postoperative procedures.
  • For example, informed consent counseling, follow-up schedules.
• Improved interaction among surgeons and nurses.
• A total of 783 clients have been repaired through pooled efforts.
  • Pooled effort repairs as a percentage of total number of repairs increased from 16% in 2007 to 28% in the most recent quarter.

Conclusion
Bringing surgical teams together from different facilities provided an avenue to share ideas, discuss innovations, and tackle challenges.

The Fistula Care Project in Nigeria will continue to work with statewide fistula task forces, support the national task force in its effort to coordinate fistula management across the country, and provide training opportunities for interested junior surgeons to acquire fistula repair skills.