

ABSTRACT

Objective: To determine the incidence/proportion of yankan gishiri as a cause of obstetric fistula.

Methods: This paper presents a three year review of 1372 cases operated on for obstetric fistula in three specialist centres in Kano. Post operation documents at Laure, Danbatta and Wudil centers were retrospectively studied to see how many of the VVF patients have had yankan gishiri in their lifetime and if this resulted in urine leakage.

Results: From June 2007 to May 2010 1372 VVF patients were operated upon by the author and it was found that 78 (5.68%) of them had fistulae due to the cultural practice of yankan gishiri. Of these cases 48 (61.53%) were performed by a Wanzami (a local/traditional barber) and 30 (38.47%) by an Ungozoma (traditional birth attendant).

Conclusion: The study revealed that a significant percentage of urinary fistula is caused by the cultural practice of yankan gishiri which can be prevented with awareness creation and adequate mobilization.

Keywords: *Yankan Gishiri; obstetric fistula, genital cutting*

Yankan Gishiri (Salt Cut)

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Introduction

Yankan Gishiri which literally means salt cut is a cultural practice found exclusively among the Hausa/Fulani tribes living in Northern Nigeria and southern part of the Niger Republic. Although yankan gishiri does not fit the classical term of female genital mutilation (FGM), this practice is quite mutilating and leads to the devastating condition of urine leakage.¹

It is usually a longitudinal cut made either on the anterior or posterior vaginal wall using a sharp object, mostly a knife or razor for various cultural reasons. Its awareness is not widely spread among the tribes being mostly restricted to the rural dwellers and virtually absent among those living in the major towns and cities. It is referred to by different names because of difference in dialect among the tribes and of course for the different reasons why it is being performed. These names are; beli or belu, koko, dankali, angurya, kakanda, zul-zul, zir-zir, tsatstsafe, tsgai etc.²

Contrary to what is obtained in the rest of the world in Hausaland a significant number of urinary fistulae is caused by the cultural practice of yankan gishiri.^{3, 4} This is important to understand as the practice can be prevented with awareness creation and adequate mobilization.² This brief paper aims to determine the incidence/proportion of yankan gishiri as a cause of obstetric fistula and give an overview of the practice to aid understanding.

Method

A review was performed of three years documentation of fistula operated cases at Laure fistula centre in Kano, the Danbatta fistula center and the Wudil fistula unit, from June 2007 to May 2010.

Results

Out of the 1372 fistula operated patients 78 (5.68%) of them were due to yankan gishiri while the rest were as a result of prolonged obstructed labor. Tables 1 and 2 demonstrate the involvement of the operator, and reasons for the patients looking for assistance.

Table 1: Operator of yankan gishiri (salt cut)

	Wanzami	Ungozoma	Total
Number	46	32	78
Percentage	59%	41%	100%

Table 2: Reasons for yankan gishiri (salt cut)

Reason	Number	Percentage
Ba hanya (tight introitus or vaginal stenosis)	43	55%
Obstetric reasons eg., episiotomy, prolonged labour	19	24%
Genital itching/ pain/ boil / abscess	7	8.9%
Infertility	3	3.8%
Genital prolapse	6	7.6%

Discussion

Yankan gishiri is preformed mainly by a Wanzami (a local/traditional barber), an Ungozoma (a traditional birth attendant - TBA) or in some cases by the patient herself. The barber performs it with the patient mostly in a lying position; single handedly or with the help of others to hold her. The TBA does it in either the lying or squatting position depending on the reason why it is done. If done for prolonged labor then the patient is lying down and if for other reasons like a boil or infection or pain then it's done in the squatting position.

In all the process of making the salt cut the operator uses a sharp object to incise, scratch, or excise some tissue from a site in the vagina which is usually a few centimeters from the external urethral opening and directly overlying the urethral tract. The most frequently used sharp objects are a razor blade for the TBA, and a knife for the barber.

Significantly, the reasons why people resort to salt cut are many.² These can be divided into gynecological causes such as vaginal stenosis or “ba hanya”(no road), painful or difficult intercourse, infertility, pelvic floor prolapse and urinary retention. For instance ba hanya is a common presentation by either the husband or the wife or even by the relatives indicating there is a problem with penetration at intercourse. Or when the young newly married girl is

refusing the husband, who is probably not her own choice but was forced on her, she will adopt a method of running away from her matrimonial home. If this happens on several occasions then the parties involved will rule out that she has a problem in her private parts which is referred to as gishiri.

Gishiri means salt and it refers to another thing in the issue of yankan gishiri. Linguistically in Hausa, some things that are especially related to sexuality (and for moral reasons) are given names which symbolize functions or images. Looking at it this way, salt is necessary in making foods sweeter and more palatable, as such sexual organs for both sexes are referred to as gishiri (salt). Some literature relate it to historical events when salt was brought to Hausa land and the way the seller handled it. (Reference) There is a popular saying in Hausa “gishirin zaman duniya” that is the “salt of life” as refers to the sexual organs.

Another reason for performing yankan gishiri is for obstetric situations such as an attempt at making an episiotomy or prolonged labor. When there is prolonged obstructed labor due to undiagnosed situations and when the lady has been laboring for days at home and where the negative attitude of hospital delivery is high, the only available option is seen as to seek the services of a traditional birth attendant. She after making several futile attempts will resort to yankan gishiri with the assumption that it is the gishiri which is blocking the presenting part from coming out.³

There may be other reasons for yankan gishiri such as an attempt at psycho conversion in a woman thought to have psychiatric/ psychological problems. In addition pain or vaginal itching, especially in those women with advanced age, those who have high parity or have had several vaginal deliveries and maybe approaching menopause and cannot find explanation for their problems of dyspareunia, dryness of the vagina or vaginitis, are in the end considered as a problem of gishiri and usually it is the wanzami who will be contacted for assistance. Boils and abscesses on the labia and in the vagina, vaginal polyps, and forms of vaginosis are also mistakenly considered as gishiri in those communities where orthodox medical practice is not recognized as standard or is very difficult to access.

Lastly, utero-vaginal prolapse is another condition where yankan gishiri causes urine leakage, because it is such a disturbing situation to the patient, when the cervix/uterus is protruding through the introitus, and the fear is of not being able to make love. In this situation it is the anterior vaginal wall which is at risk of being damaged by the sharp blade of the operator and most usually the urethra-vesical junction is affected. It is a significant reason (10.9%) for yankan gishiri as Waaldijk reported in a work on 577 patients who have had yankan gishiri fistula.⁴

This study indicates that yankan gishiri can constitute up to 5.68% of urinary fistulas as compared with 3.7% in the literature.⁴ However, the figure of the cut itself may even be more as this study involved only those who reported to the hospital seeking for service because they could not bear the terrible condition they found themselves in. If the injury is not extensive incontinence of urine may not develop and as such they may not come to the hospital.

Conclusion

Contrary to what is obtained in the rest of the world by what is called FGM, in the Hausaland yankan gishiri is the cultural practice where wanzami-a barber or ungozoma makes a cut in the vagina for one reason or another, and depending on the extent and severity it may result in a urinary fistula. It can cause a significant percentage of urinary fistula and can be prevented with awareness creation and adequate mobilization of communities and some more attention especially from the advocates of women rights.

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