

Diagnoses and procedures of inpatients with Female Genital Mutilation/Cutting in Swiss university Hospitals: a cross-sectional study

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Abstract

Objective: FGM/C can result in short and long-term complications, which can impact physical, psychological and sexual health. Our objective was to obtain descriptive data about the most frequent health conditions and procedures associated with female genital mutilation/cutting (FGM/C) in Swiss university hospital inpatient women and girls with a diagnosis of FGM/C. Our research focused on the gynaecology and obstetrics departments. Design: Cross-sectional study. Setting: Swiss university hospitals (Geneva, Lausanne, Bern, Basel and Zurich). Population: Inpatient women and girls with a primary or secondary coded diagnosis of FGM/C. Methods: Four of the five Swiss university hospitals provided anonymized data on all inpatient women and girls admitted between 2016 and 2018 who had a primary or secondary diagnosis of FGM/C. Main outcomes measures: Primary and secondary diagnoses coded with the International Classifications of Diseases (ICD) and interventions coded in their medical files. Results: Between 2016 and 2018, 207 inpatients had a diagnosis of FGM/C. The majority (96%) were admitted either to gynaecology or obstetrics divisions with few genito-urinary and psychosexual conditions coded. Conclusions: FGM/C coding capacities in Swiss university hospitals are low, and some complications of FGM/C are probably not diagnosed. Pregnancy and delivery represent key moments to identify and offer medical care to women and girls who live with FGM/C. Funding: Swiss Federal Office of Public Health, Swiss Network against Female Circumcision, Caritas Switzerland. Keywords: Female genital mutilation, female genital cutting, female genital mutilation/cutting, international classification of diseases, ICD, coding, Switzerland

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