Introduction/Background
There is increasing recognition of the role of surgery in public health. The provision of emergency and essential surgical care is now a global health priority. To develop such care in low and middle-income settings, there is the need to systematically document the role of surgery in various aspects of essential care. The study was a systematic extraction of data on pregnancy-associated surgical interventions at the Volta River Authority Hospital (VRAH) in Akosombo from 2011 to 2015.

General Objective
To describe how surgical interventions have been applied in maternal health delivery at VRA hospital in Akosombo.

Methods
A retrospective review of 3,221 records on pregnancy-related surgical interventions. Data extraction tool was used to collect the data. Analysis was largely descriptive with exploration of specific parameters of interest.

Results
- About a third (61%) constituted emergency surgeries with 40% coming outside the environs of VRAH.
- Evacuation of retained products of conception (75%) due to incomplete abortions, and caesarean sections on previous uterine surgery (30.6%) were the leading procedures.
- The majority of cases were performed by teams led by residents (28.2%).
- The mean hospital stay post-surgery was 3.4 (SD + 1.9) days. Duration of stay was significantly influenced by the age of patients with the younger staying beyond three days.
- Satisfactory state was recorded as at day 3 post-surgery in 99.8% of cases.
- Less than 1% of cases were referral to higher level facilities.

Discussion
This study confirms existing literature that 90% of all pregnancy losses were due to abortions [1]. It is therefore important that, public health units create abortion awareness and its health implications among the populace. The fact sheet of WHO confirms that about one third of pregnancy related death can be treated with surgery [2]. The findings of the study however indicate that the WHO policy on Comprehensive Essential Obstetric care is being implemented.

Conclusion
A database of five years of pregnancy-associated surgical interventions at VRAH has been established. The analysis generated parameters important for monitoring and promoting the role the VRAH plays in improved maternal care and surgical training in Ghana. The diversity in the indications and procedures performed make the VRAH a candidate facility for the training of undergraduate and postgraduate medical students.

References:
1. Health Sector Advisory Office 2008
2. WHO, 2012

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