



Ob/Gyn Inside Story

CHAIR'S CORNER

A GOLF TOURNAMENT STORY

“How about a golf tournament?” she offered as we sat having lunch in my office. Now, for full disclosure, I have over time considered golf tournaments as a lot of work, and little return. And many events do not have sustainability as they address a short term passion or memorialize a loved one. This lunch had been set up in response to her request to “thank us” for the skill and intricate surgery provided by Dr. Fred Howard, director of the Scibetta Fellowship in Minimally Invasive Surgery to address



Joe Scibetta (second from left) and his foursome.

that she felt would be perfect as a way of raising awareness of this important health issue. As she explained, based on comments made by her kids and her husband, her life had been turned around and made whole again. So was focusing on chronic pelvic pain sustainable? Was it smart to take on such a health condition that to this point had received very little public attention?

her chronic pelvic pain. But why a golf tournament? My lunches with grateful patients are designed usually just to allow them to describe their experience and help us to do even a better job next time. She said that her family owned a golf course in Victor, New York

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If you have something you'd like to add to our next edition, a comment or a concern, please email Rebecca Rowley at rebecca_rowley@urmc.rochester.edu

CHAIR'S CORNER (CON'T)

As I considered her offer, I reflected on the fact that the University of Rochester Department of Obstetrics and Gynecology is one of only four academic obstetric and gynecology departments with a fellowship program dedicated to education, treatment, and research of chronic pelvic pain in women. While chronic pain affects a higher proportion of women than men worldwide, women are less likely to receive treatment. Women's pain has a significant global impact, but a lack of awareness and recognition persists. Some of the causes of the disparity of pain recognition, treatment and research between men and women are cultural issues, research bias, lack of individual and societal awareness and lack of awareness among health care providers.

In our specialty, we know that chronic pelvic pain is more common in women than migraines, headaches and asthma. In fact, it affects 17% of women at some time during their life, and in 4% it impairs their ability to work, go to school, or live normally. It is the reason for 17% of



Lining up and ready to go!

“...chronic pelvic pain is more common in women than migraines, headaches and asthma... we have an important and sustainable theme that we can carry into the future.”



all hysterectomies in the United States with direct and indirect costs exceeding more than two billion dollars per year.

After several weeks, in which our development staff created the infrastructure, sponsors were identified, and the event was advertised, we held our first annual Women's Health Golf Classic at Victor Hills golf course, in Victor, New York on June 3, 2011. The day was brilliantly warm and sunny, and the 30 participating foursomes delighted in the competition and camaraderie. A Subaru was offered for a hole in one. (Need I say that no one drove off with a Subaru that day?) The experience showed us that we have an important and sustainable theme that we can carry into the future. The \$15,000 we made this year will be used to broaden the Sciabetta Fellowship. Next year our second annual Women's Health Golf Classic will be held at Victor Hills golf course on June 8, 2012. We plan to offer an 18 hole and 9 hole scramble, both of which will end at the same time in the afternoon for awards, dinner and recognition of sponsors and participants. If you are in the area next year, please consider being a sponsor or participant for this important women's health event.

James R. Woods, Jr., M.D.

EDUCATION CORNER

Meet the New Interns

We are pleased to introduce the new intern class to you.



Back Row (left to right): Jill Uyenishi, Katina Foster, Pakeeza Alam, Rachel Flink-Bochacki

Front Row (left to right): Jaclyn Morrison-Cole, Emily Thompson, Charisse Loder, Kristen Burhans

Congratulations and Best of Luck to Our 2011 Chief Residents



Back Row (left to right): Melissa Gunter, Megan Carmel, Brianne Brandt-Griffith, Elise Simons

Front Row (left to right): Amanda Victory, Natalie Bertoia, Erin Crosby, Miranda Harris-Glocker

Mark your calendar!

RESEARCH WORKSHOP

FALL 2011 - SPRING 2012

Research Workshop exists to provide the department with both a forum to present research and receive feedback as well as a time to hear from speakers outside the department to expand the interdisciplinary nature of our research. Usually held the first Monday of the month at noon, we invite all members of the department and guests from other departments to join us. If you'd like to speak or if you have a speaker suggestion, please email Jena Tyra at jena_tyra@urmc.rochester.edu.

September 12 – TBN

October 3 – Brenda Kavanaugh, ORPA Update

November 7 – TBN

December 5 – TBN

January 9 – TBN

February 6 – TBN

March 5 – David Hackney

April 2 – Adam Griffin

May 7 – Emily Barrett

June 4 – Danielle Benoit

Except for the November and December dates, all workshops will be held in the Theide Room (2-4314). November and December will be in the Louise Slaughter Room (1-9555).



RESIDENT RESEARCH DAY

The Resident Research Day was held on Thursday, May 5. The morning began with the 31st Annual Rudolph Lecture. This year's Rudolph lecturer was Charles J. Lockwood, MD, MHCM. Dr. Lockwood is the Anita O'Keeffe Young Professor of Women's Health and Chair, Department of Obstetrics, Gynecology & Reproductive Sciences at Yale University School of Medicine and Chief, Obstetrics & Gynecology – Yale-New Haven Hospital. Dr. Lockwood's lecture topic was Maternal and Fetal Consequences of Inherited Thrombophilias. Following the Rudolph Lecture, awards were presented as listed below:

AAGL Excellence in Endoscopic Procedures Award and The Society of Laparoscopic Surgeons Resident Award presented annually to the chief resident who has special excellence in endoscopic procedures. This year's recipients were Brianne M. Brandt-Griffith, MD and Amanda J. Victory, MD, respectively.

The 2011 APGO Excellence in Teaching Award was given to David C. Foster, MD, MPH.

The CREOG National Faculty Award was given to Sarah J. Betstadt, MD, MPH.

The Obstetrical Perinatology Award was established in 1982 to recognize the ob/gyn nurse and resident who have demonstrated interest, compassion, and a progressive attitude toward the care of complicated obstetrical patients. This year's awards were presented to Kathryn Flynn, NP, RNC and Lisa M. Gray, MD.

“This year's Rudolph lecturer was Charles J. Lockwood, MD, MHCM.”



This year, the third year residents presented their research project reports as listed below:

- Jillian J. Babu, MD, Long-term maintenance of QOL but not weight loss after short-term intervention in teens with PCOS
- Nigel H. Campbell, MD, The Impact of Body Mass Index on the Course of Oxytocin Labor Induction
- Lisa M. Gray, MD, Correlation of adnexal mass gynecologic ultrasound findings with surgical pathology
- Lori D. Homa, MD, Personhood status of human embryos through various stages of development: a comparison of provider and patient opinions.
- Lisbeth A. Murphy, MD, Complications of Surgical Termination of Pregnancy in Obese Versus Non-obese Women
- Holly R.N. Sato, MD, Rates of Compliance with Postpartum Testing for Diabetes Mellitus in Women with Gestational Diabetes Mellitus
- JoAnna Wawrzycki, MD, Subclinical Iron Deficiency and Placental Oxidative Stress

HELLO / GOODBYE PICNIC AND ROAST

The annual Hello/Goodbye Picnic and Roast were held at the Burgundy Basin Inn on Thursday, June 23, where residents and their families as well as faculty and staff celebrated our incoming interns and our outgoing chief residents. The Chief Resident Commencement Banquet was held at Casa Larga on the following evening. The chief residents received their residency certificates and department awards were presented.

Following is a list of the awards presented at the banquet:

The Curtis J. Lund Awards for meritorious scientific papers were awarded to JoAnna Wawrzycki, MD, 3rd place; Lisbeth A. Murphy, MD, 2nd place; and Nigel H. Campbell, MD, 1st place.

The William Clay Award established in 1995, in recognition of the intern who has demonstrated outstanding skills as a teacher and compassionate physician as exemplified by the life and career of Dr. William Clay, Jr. This year's recipient is Elizabeth A. Fountaine, MD.

The Ward L. Ekas Award established in 1968, in recognition of the resident who has demonstrated characteristics of leadership among his/her peers. The award was presented to Brianne Brandt-Griffith, MD.

The Richard E. Fullerton Award established in 1995, in recognition of the second year Ob/Gyn resident who has best demonstrated the outstanding skills as a teacher and compassionate physician as exemplified by the life and career of Dr. Richard E. Fullerton. Natalie S. Whaley, MD was the recipient of this award.

The Jerome H. Rudolph Award established in 1981, in recognition of the Ob/Gyn resident who has best demonstrated the personal qualities that distinguished the late Dr. Jerome H. Rudolph--a warm, compassionate, skilled physician whose untiring efforts on behalf of his patients resulted in an immense following of devoted friends and grateful families. This year the award was presented to Elise J. Simons, MD.

The George C. Trombetta Award established in 1988, in recognition of the Ob/Gyn resident who has consistently demonstrated excellence in teaching of medical students and fellow residents. Erin C. Crosby, MD was the recipient of this award.

The Gilford Woodrow Wilson Memorial Award established in 1999, in recognition of the resident who has consistently displayed the compassion to his or her patients that was displayed towards Fletch and Hollis Wilson during Gilford's life. Natalie S. Whaley, MD was presented with this award.

The Faculty Awards established in 1973, by the interns and residents in the Department of Ob/Gyn, in recognition of a faculty member for his/her excellence in teaching and his/her interest in the professional development of the house staff. This year, the awards were presented to Rita A. Clement, MD (Highland Hospital) and Joseph J. Scibetta, MD (Strong Memorial Hospital).

The Ambulatory Award in recognition of the Obstetrics and Gynecology resident who demonstrates outstanding clinical performance in the outpatient ambulatory setting. This year's recipient was Jillian J. Babu, MD.

The Oncology Resident Award in recognition of the Obstetrics-Gynecology resident who has demonstrated high achievement in Gynecologic Oncology on the CREOG In-Training Examination. Elise J. Simons, MD was the recipient of the award.

The Urogynecology Award in recognition of the third year resident in Obstetrics and Gynecology who has demonstrated outstanding understanding and ability in the treatment of women with incontinence and pelvic organ prolapse. Lori D. Homa, MD and Lisbeth A. Murphy, MD were presented with this award.

WELCOME NEW FELLOWS AND STAFF MEMBERS!

Two new fellows have begun their training in the Urogynecology Division. Paula Doyle, MD in Urogynecology and Reconstructive Pelvic Surgery will be with us 3 years and Miya Yamamoto, MD in Minimally Invasive Gynecologic Surgery will be with us 1 year.

REI welcomes new staff members Heather Barger, Amanda Beales, and Colleen Michael.

The Office of Research Administration welcomes Sajitha Veettilakath, Jena Tyra and Erin Driscoll-Brantley to our team. Sajitha is our new accounting bookkeeper, Jena our new administrative assistant and Erin a study coordinator for the NIH-funded TIDES study.

Welcome to all and best of luck in your new positions!

CONGRATULATIONS!

PAPERS, PRESENTATIONS, AND ABSTRACTS

Claire Hoffmire, Patricia Chess, Taha Ben Saad, and Chris Glantz published “Elective Delivery Before 39 Weeks: The Risk of Infant Admission to the Neonatal Intensive Care Unit” in the Maternal Child Health Journal.

Chris Glantz and Natalie Bertoi’s article, “Preterm Nonstress Testing: 10-beat Compared with 15-beat Criteria” was published in Obstetrics and Gynecology.

Kristin Knight and David Hackney’s article, “Re-evaluation of the subgroup analysis from the Royal College of Obstetricians and Gynaecologists randomized controlled trial of cervical cerclage” will appear in the Journal of Maternal Fetal Neonatal Medicine.

Kristin Knight, Lorelei Thornburg, Anna McNanley, Dwight Hardy, David Vicino, and Chris Glantz will publish, “The Effect of Intrapartum Clindamycin on Vaginal Group B Streptococcus Colony Counts” in the Journal of Maternal Fetal Neonatal Medicine.

Kristin Knight, Eva Pressman, David Hackney, and Lorelei Thornburg published, “Perinatal Outcomes in Type 2 Diabetic Patients Compared with Non-Diabetic Patients Matched by Body Mass Index” in the Journal of Maternal Fetal Neonatal Medicine.

Lisbeth Murphy’s research project “Complications of Surgical Termination of Pregnancy in Obese Versus Non-obese Women” has been accepted for a poster presentation at the annual meeting of the Association of Reproductive Health Professionals and will also be published in Contraception.

Patricia Rodier and Rich Miller published a reply to “Does treatment of premature labor with terbutaline increase the risk

of autism spectrum disorders?” by Frank R. Witter in the American Journal of Obstetrics and Gynecology.

Chris Stodgell and Rich Miller published “Hyperglycemia, hypoxia and their combination exert oxidative stress and changes in antioxidant gene expression: studies on cultured rat embryos” in Birth Defects Research. Part B, Developmental and Reproductive Toxicology.

Constantino Fernández, charter club member of the Rochester Latino Rotary Club, gave a talk on health issues affecting Latinas.

NEW GRANT AWARDS

Shawn Murphy was awarded \$35,000 by the Mae Stone Goode Foundation to study “Inhibition of IFN- γ Responses in Human Trophoblast Cells: Role in susceptibility to Infection by Intracellular Pathogens.”

NATIONAL HONORS FOR THE DEPARTMENT

It is with a great congratulation and pride that I alert you that we (URMC) were named Number 32 on the list of best gynecology programs in the nation by U.S News and World Report magazine. This honor is shared by Strong and Highland and involves a number of measures including patient volume, safety, quality, mortalities etc under the umbrella of gyn, urogyn, and gyn oncology. While it is always difficult to tease out what exactly we did to deserve this, the quality and safety of our care are the foundations of this award. We can all be proud of this achievement.

James R. Woods, Jr., M.D.

THE 3RD ANNUAL UNIQUENESS OF WOMEN'S HEALTH

Join us on September 16, 2011 for the 3rd Annual Uniqueness of Women's Health Conference at the University of Rochester Medical Center. This post-graduate course will provide didactic teaching on the latest diagnostic, treatment and prevention strategies for problems seen daily by health care providers including chronic pelvic pain, lipid disorders, anxiety, depression and sleep disorders. The conference will review cervical cancer screening guidelines and the Institute of Medicine recommendations for cancer survivors care. The course is appropriately designed to provide primary care providers, physicians, nurse practitioners and nurses with a thorough update of the selected topics, bridge gaps in knowledge and provide tools for all care providers to assist patients decision making surrounding available screening, prevention and treatment.

The University of Rochester School of Medicine and Dentistry designates this live activity for a maximum of 6.00 AMA PRA Category 1 Credits™.

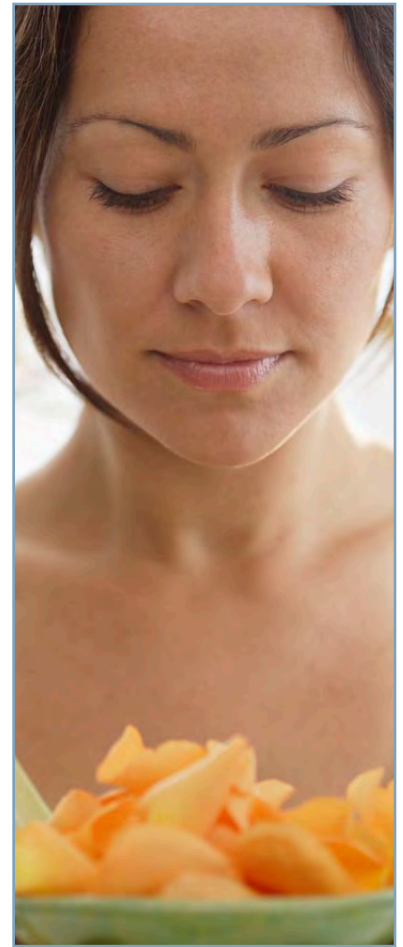
Non-Physician Conference Registration \$120.00

Discounted Price \$95.00 (if registered by Friday, September 2, 2011)

Physician Conference Registration \$160.00

Discounted Price, \$130.00 (if registered by Friday, September 2, 2011)

For more details or to register, please visit the website by clicking here.



“For making certain changes to your grant you need prior approval from your NIH grant manager. Otherwise you risk losing your funding.”

ORA FLASH: PRIOR APPROVAL FROM NIH

Did You Get Prior Approval for Changes to Your NIH Award?

The answer should be “yes” for making certain changes to your grant. You must get NIH's permission before modifying its scope, changing key personnel or institution, adding a foreign site, or doing any of the actions listed in NIAID's [Prior Approvals for Post-Award Grant Actions SOP](#).

Otherwise, you risk losing your funding.

To make these sorts of changes you will need to work with ORA and ORPA to send an official letter requesting the change to your NIH Award's Grant Manger for approval. Make sure to request the change at least a month before you'd like it to start to give NIH time to review and process your request.

You don't need NIH's go-ahead for other changes, which are described in NIAID's [Grantees Can Take Many Actions Independently in the NIH Grant Cycle: Application to Renewal](#).

Have questions? Check your Notice of Grant Award (NOA) or call Rebecca Rowley.



FACULTY DEPARTURES

Danielle Durie has relocated to Allentown, Pennsylvania.

Yekaterina Rabkin has relocated to Winchester, Virginia.

Ja Hyun Shin has accepted a position at Albert Einstein School of Medicine.

Nancy Stanwood has accepted a position as Section Chief of Family Planning at Yale University.

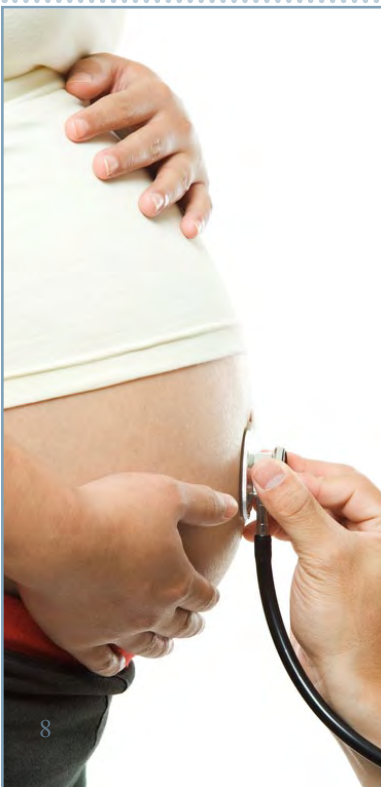
Farewell and best of luck in your new positions!

WORKING WITH LATINAS IN OBSTETRICS AND GYNECOLOGY

(Article originally published in *La Rotariana* the newsletter of the Rochester Latino Rotary Club on April 30, 2011)

Latina's health care issues are the same as in all women but...with a slight twist. They like personal attention [personalísimo], respect, finesse, and commitment. They speak a different language [Spanish, Maya or other indigenous languages] and still it is debatable what to call them. Terms like Hispanic, Latin, Latin-Americans, Latinas are used as well as those denoting the country of origin, like Puerto Ricans, Cubans, Mexicans. There are also questions regarding the meaning of color, race, culture and heritage. We know there is no good definition of race but phenotype and heritage or lineage are acceptable terms. We do know that 99 % of DNA is similar in all women of all origins, and it is that 1% that makes us different. Another way to classify is by genotype [Raymond Cox MD, MPH]. As per an estimate of the population in the U.S., there are 307 millions people in the Country with approximately 15.8 % being of Hispanic or Latino origin and 50.7 % are Hispanic/Latino females. Latinas have not been taught how to be healthy and preventive medicine is non existent for many. They come to the doctor only when they are sick and after having consulted the family and, some times, after trying alternative medicine or medicine they brought from home or after they had seen some healers in the community. The clinical pictures are the same but more severe because they reach care late for multiple reasons. Among these, lack of access to medical care, lack of insurance, transportation, and illiteracy that act as barriers to navigate the health care system and

“Latina’s health care issues are the same as in all women but...with a slight twist.”



the community resources. The Leading cause of death is the same in all women but depending of the area they are scrambled in a different order.

The transformation of the health care has been huge and advances in technology have divided the medical profession in many specialties; and the introduction of computerized medical records give patients the options to use the computer to review their own medical record, request appointments, and communicate with their doctor. All of these factors indicate that in the future patients will need to be educated on how to manage the system. Telemedicine is coming to many communities and technology will continue changing the practice of medicine: social networks, Robotics [Pharmacy and surgery] are being used to offer patient quality of care, safety and better outcomes in medicine.

The Latino culture of the Latinas is changing as well. They are having more control over their lives, they are more acculturated, specially the new generations, but still using Spanish (and sometimes Spanglish) to talk to parents and grandparents. Many of the older generation can be considered to be minority three times over: Hispanic, poor, and elderly].

I have reviewed the medical novelties we have in health care in our communities, finding that for Latinas many of these are an old problem. Starting with family planning. Women are not educated about contraception, but we have the best methods of contraception.

WORKING WITH LATINAS IN OBSTETRICS AND GYNECOLOGY (CON'T)

Jocelyn Elders MD said we have not seen an abortion in a woman who is not pregnant. Prevention, economical development, and education are the key [help in these areas is needed a home, school, and community]. The future of our planet depends on family planning; with simply spacing the children, infant mortality decreases [Herbert Peterson MD].

Elderly care we expect an increase in Hispanic population in the 2050 but the pregnancy rate is decreasing and The elderly population is increasing so we as a community have to be preparing for them. With the elderly population we have many questions that require to be answered: Who is taking care of them? Who will support the caretakers? When is the right time to send grandma to the nursing home? Is elderly abuse taking place? Are there enough physicians with specialty training in geriatric-psychiatry to care for this population? How are cultural issues being addressed?

Then we have to be concerned also with the silent diseases such as: domestic violence, urinary leak-age, osteoporosis, sexual dysfunction. Our communities need to be educated on these topics.

Latinas accept female cancer screening [cervix, breast, colon] but decline vaccination provable as a cultural taboo. The face of surgery in gynecology is also changing. When it comes to hysterectomy, the question is whether to do abdominal, laparoscopic, vaginal, or single puncture,. The patient needs to talk to her physician about these options and the alternative option of not having a hysterectomy. Vagina by design or cosmetic surgery of the vagina and vulva is a reality in our communities even when the College of OB/ GYN and plastic surgeons do not back them up.

So what are the most important issues affecting Latinas, particularly those residing in the poor neighborhoods in the city? Education, poverty, health care, housing, transportation, language difficulties, are some of the issues coming to mind. Our people believe that the number one priority is education. A high dropout rate among Latino students, early pregnancies, violence in the schools and neighborhoods, lack of parental involvement in their children's education are factors contributing to the low academic achievement among our students.

It is imperative that children be told at home that there is no way out; they have to get an education and be able to support themselves through their profession. Teaching methods that take into account students' learning styles, mentoring, coaching through school and college, community support, and role models can make a big difference in the outcomes.

The economy is the second piece of this puzzle. It is gradually improving, but many feel the administration is not trying hard enough. The financial stress is felt deeply by Latinas, particularly single mothers who struggle with low-paying jobs, unemployment, and underemployment.

Health care is our #3 in the list. As community, we should support the health care reform because we have too much to gain as communities of color. Even though health care reform is the last item, it is not of lesser importance. True, we are more interested in those problems faced by many among the immigrant population, but sooner or later health care plays a big role in the lives of all.

We, doctors, universities, government need to change our culture, We need more doctors and health care professionals in and from the minority communities. "IT IS A DREAM", said Dr. Jaime Torres, but remember Rosa Park moved a powerful Nation in ways no one dreamed before. "Vaya con Dios Amigo" is not enough anymore. As leaders we must coach and mentor our people so they can have a better future education, economic status, and health. As Dolores Huerta taught us in support of the Health Care Reform, "SI SE PUEDE."

Constantino Fernandez, MD

OB/GYN @ URM

The Department of Obstetrics and Gynecology at the University of Rochester School of Medicine and Dentistry is a leader in patient care, investigative research, and obstetric education. The Faculty is dedicated to promoting excellence in all areas that support women's health. The Department is proud to offer care to our patients by physicians who were ranked among the nation's best in U.S. News & World Report's America's Best Hospitals list.



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COMMUNITY UPDATES

NEW FACULTY APPOINTMENTS

Paula Doyle has joined the Division of Urogynecology as Fellow in Female Pelvic Medicine and Reconstructive Surgery effective 7/1/11.

Amy Harrington will be joining the Division of General Gynecology and Obstetrics as Assistant Professor effective 9/1/11.

Melissa Gunter will be joining the ParkWest Women's Group in August.

Brianne Brandt-Griffith will be joining Genesee Valley Ob/Gyn Practice in September.

Neil Seligman will be joining the Division of Maternal-Fetal Medicine as Assistant Professor effective 8/1/11.

Amanda Victory will be joining Southeast Ob/Gyn in August.

Miya Yamamoto has joined the Division of General Gynecology and Obstetrics as Departmental Fellow in their Minimally Invasive Gynecologic Surgery Fellowship effective 7/11/11.

Paula Zozzaro-Smith was appointed Maternal-Fetal Medicine Fellow effective 7/1/11.

FACULTY PROMOTIONS

Emily Barrett's appointment was changed to Assistant Professor effective 7/1/11.

Adrienne Bonham was promoted to Associate Professor of Clinical Obstetrics and Gynecology effective 7/1/11.

Karen Duguid was promoted to Clinical Associate Professor effective 7/1/11.

David Foster was appointed Professor Emeritus effective 8/1/11.

Fred Howard was appointed Professor Emeritus effective 7/1/11.

Deborah Rib was promoted to Clinical Associate Professor effective 7/1/11.



The faculty and staff of the Department of Obstetrics and Gynecology at the University of Rochester Medical Center are proud of the work we do in caring for women throughout the lifespan. Your tax deductible contribution advances our mission of excellence in patient care, research and education.

Make a secure transaction with your Visa, MasterCard, Discover or AMEX at
<http://www.rochester.edu/advancement/>

Make sure you specify in the comments that you wish you to direct your gift to Ob/Gyn and the specific program within the Department.

Thank you for your generosity!