

Introduction to GYN Specialties

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Gynecology + Minimally Invasive Gynecologic Surgery

Outline

- Gynecologic Oncology*
- Female Pelvic Medicine and Reconstructive Surgery*
- Reproductive Endocrinology and Infertility*
- Pediatric and Adolescent Gynecology**
- Family Planning**
- Reproductive Infectious Disease**
- Benign Gynecology
- Minimally Invasive Gynecologic Surgery**

**ABOG Fellowship*

***Non-ABOG Fellowship*

Gynecologic Oncology

- Every year, in the US, more than 90,000 women are diagnosed with a gynecologic cancer and approximately 30,000 die from a gynecologic cancer
- GYN oncologists are specialists who provide consultation on comprehensive management of patients with gynecologic cancers:

Outpatient evaluation

Surgery

Chemotherapy

Radiation therapy

Postoperative, intensive and palliative care





Site	New Cases Worldwide (2020)	% of all cancers (women)
Cervical	604,127	6.9
Uterine	417,367	4.8
Ovarian	313,959	3.6
Vulvar	45,240	0.5
Vaginal	17,908	0.2



Surgeries for Gynecologic Cancer

Procedure

Description

Staging surgery

This will help determine the best course of treatment, as cancers in different stages may be treated differently.

Debulking surgery

Reduce tumor burden, often in preparation for chemotherapy.

Total hysterectomy

Removal of the uterus, including the cervix.

Radical hysterectomy

Removal of the uterus, cervix, and part of the vagina.

Omentectomy

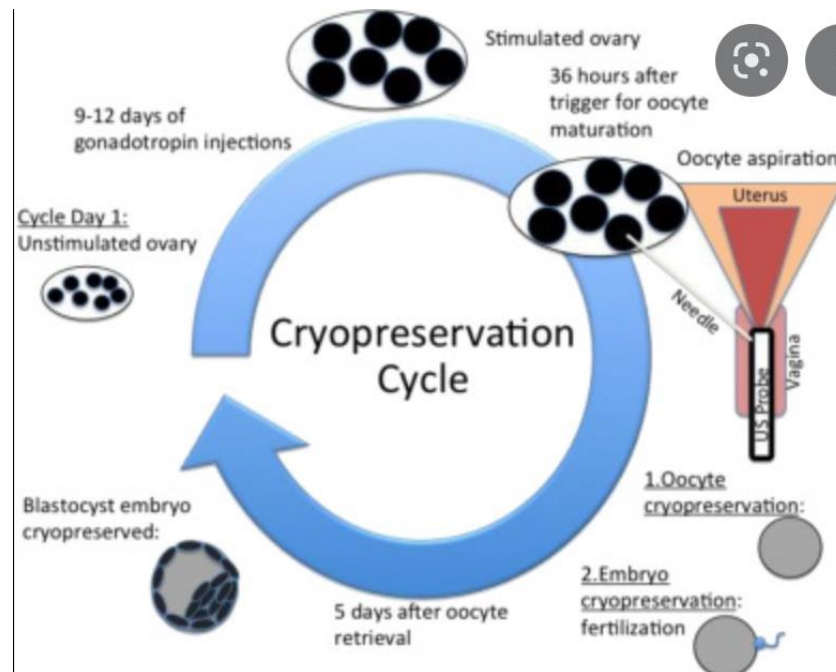
Removal of the omentum.

Lymph node removal

Removal of all or a portion of lymph nodes.

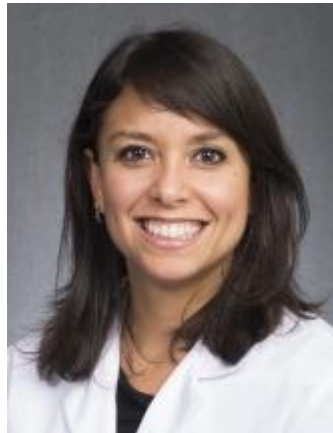
Beyond Treatment

- Genetic counseling and testing for women with family history of gynecologic cancer
- Oncofertility services to maximize the reproductive potential of cancer patients and survivors
- Evaluation, counseling and management of cancer-related sexual issues



Female Pelvic Medicine and Reconstructive Surgery (FPMRS/Urogynecology)

- Specialists who provide evaluation, diagnosis, and treatment of conditions that affect the muscles and connective tissue of the female pelvic organs
- Conditions treated include urinary incontinence, fistulas, overactive bladder, pelvic organ prolapse, and myofascial pelvic floor disorders.



Burden of Incontinence

- In the US, the cost among adults was estimated at \$19.5 billion (2000)
- A majority of costs are attributed to resources used for incontinence management (absorbent pads, protection, laundry)

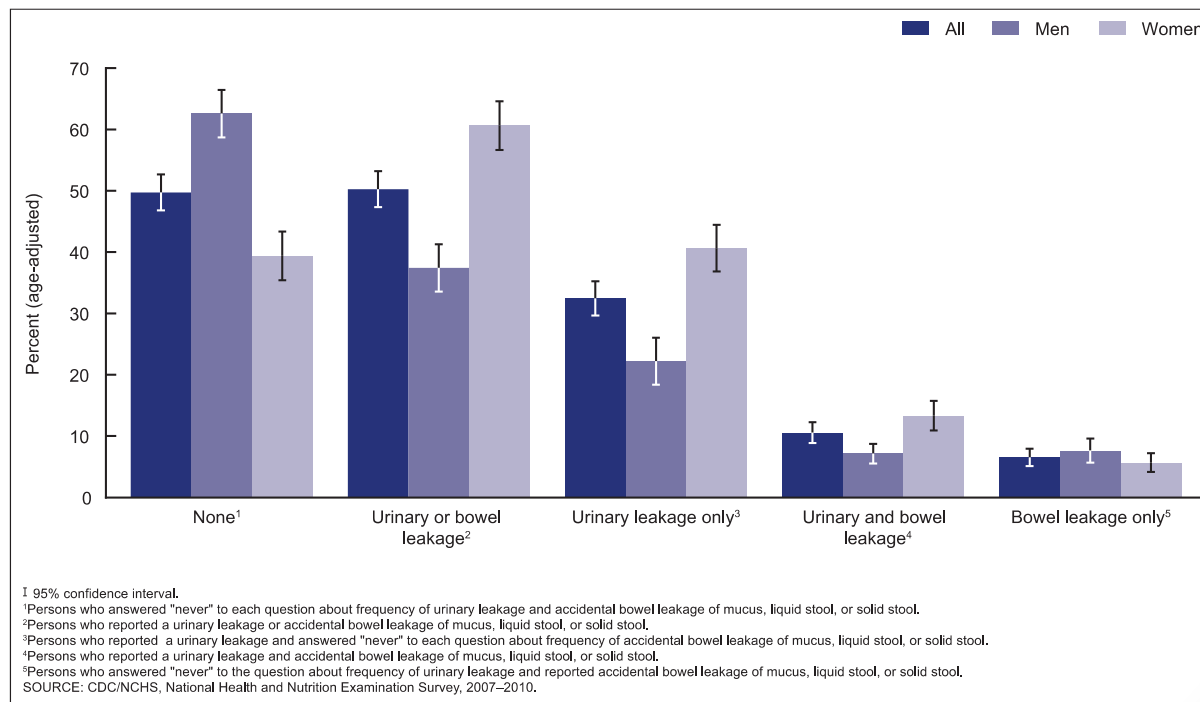
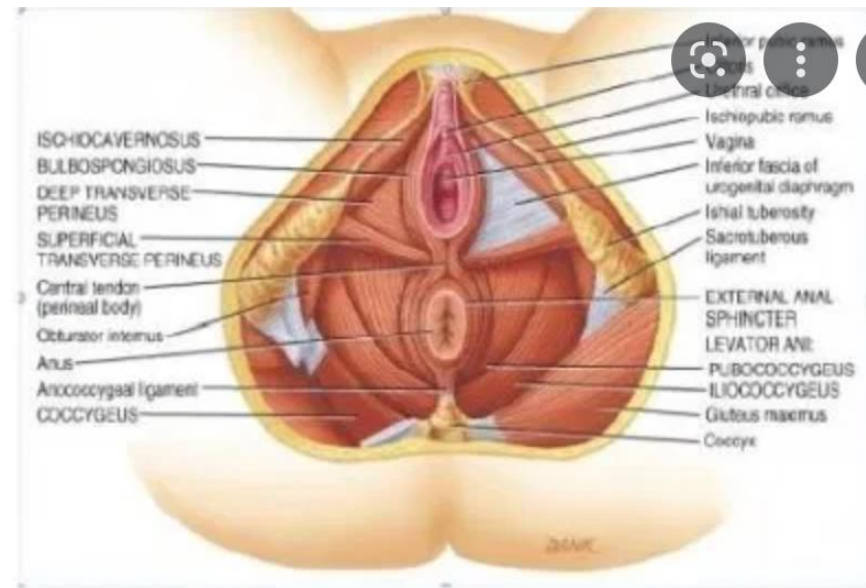


Figure 1. Age-adjusted incontinence among noninstitutionalized persons aged 65 and over, by type of incontinence and sex: National Health and Nutrition Examination Survey, 2007–2010

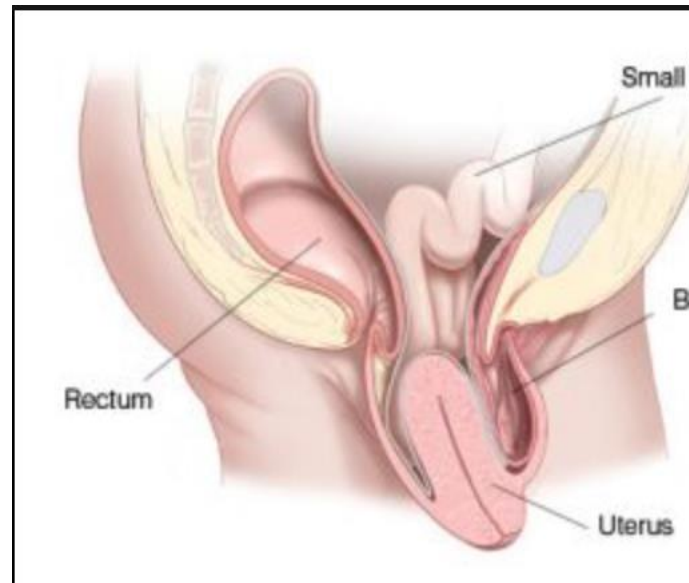
Non-Surgical Treatments

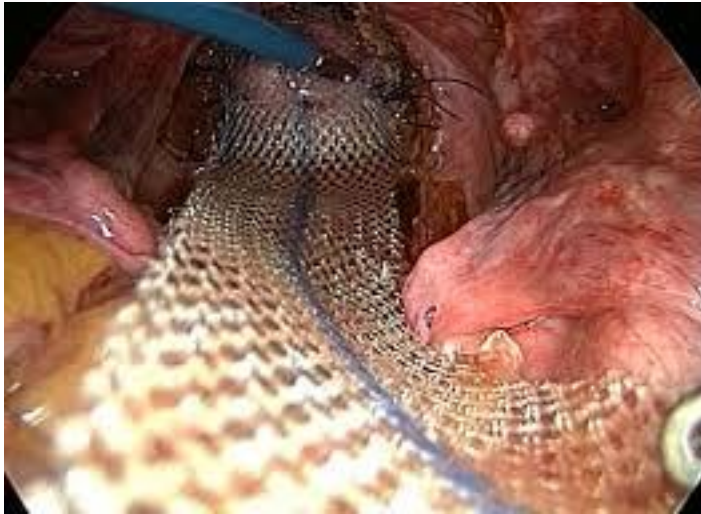
- Pelvic floor physical therapy
- Biofeedback
- Pessary
- Injections or instillations
 - Botox
 - Bulking agents
- Pharmacologic therapies
 - Anticholinergics



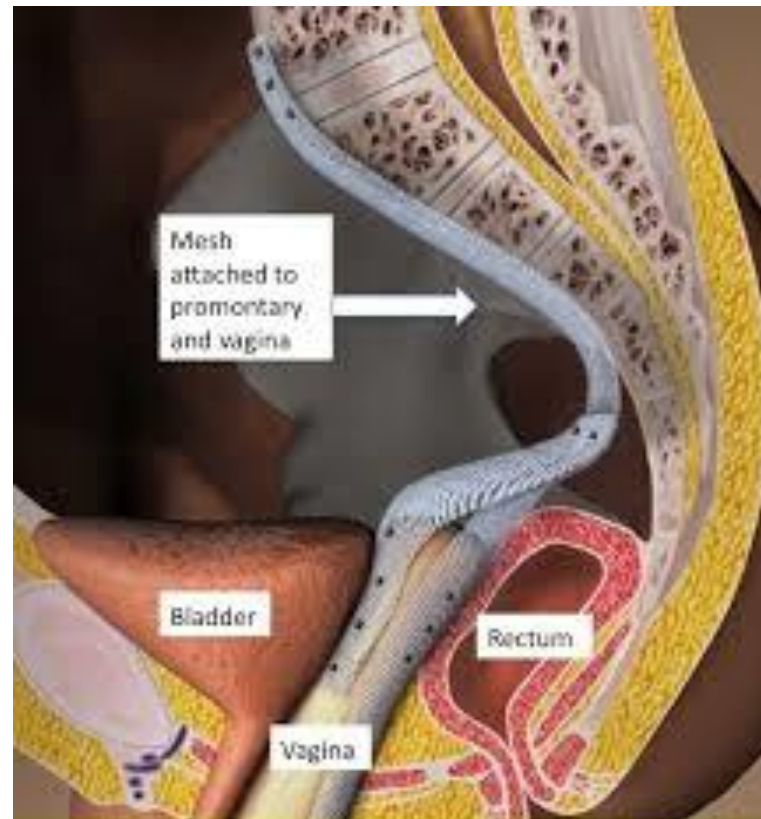
Surgical Treatments

- Anal sphincteroplasty
- Colpocleisis
- Cystocele/rectocele/enterocele repair
- Perineorrhaphy
- Sacral neuromodulation
- Urethral diverticulectomy
- Fistula repair
- Sacrocolpopexy
- Mid-urethral sling



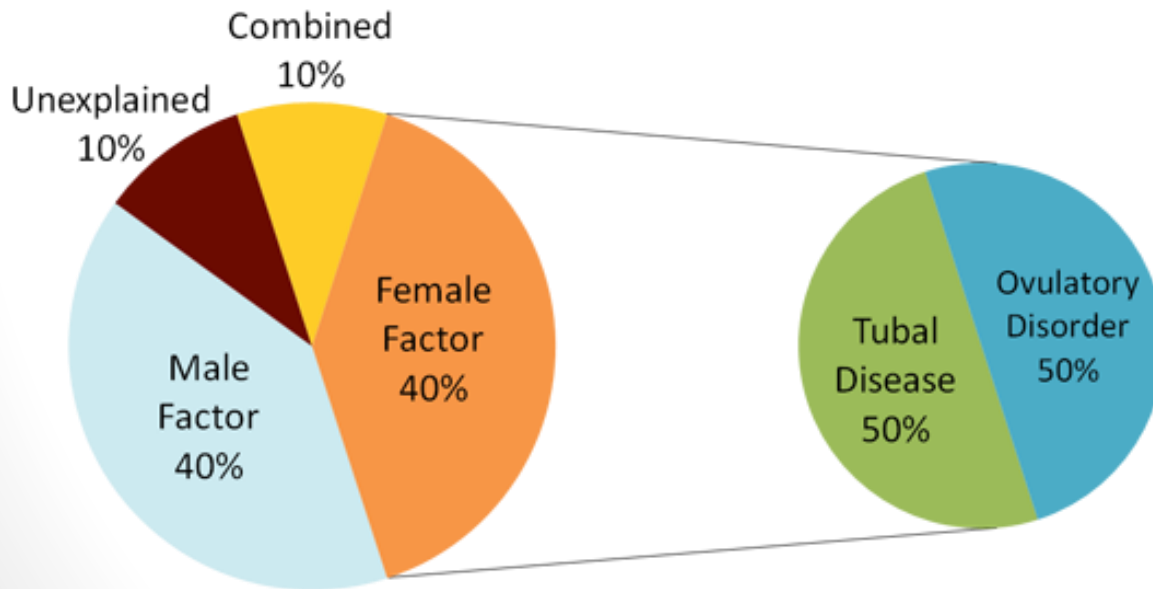


Sacrocolpopexy



Reproductive Endocrinology and Infertility

- Scope of the problem: 1 in 8 couples have trouble getting pregnant or sustaining a pregnancy



niaw
NATIONAL INFERTILITY
AWARENESS WEEK

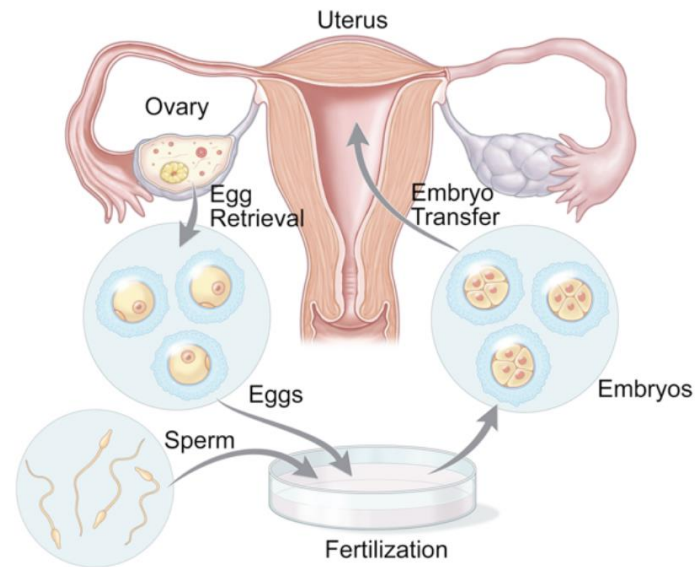
I am 1 in 8

#StartAsking

niaw.org/naw

Clinical Services

- Oncoreproductive health and oncofertility management
- Endocrine disorders which impact reproductive function
- Recurrent pregnancy loss
- Same-sex and single partner fertility care
- Reproduction utilizing donor gametes
- Elective fertility preservation (gamete/embryo cryopreservation)
- Surgical management of Mullerian anomalies
- Surgery focused on restoration of the reproductive tract in the context of fertility optimization



Family Planning

- Subspecialist training in research, teaching and clinical practice in abortion and contraception
- Provision of reproductive services for treatment of miscarriage, contraceptive care, and induced abortion

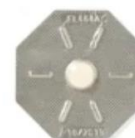


US MEC

US MEDICAL ELIGIBILITY CRITERIA
FOR CONTRACEPTIVE USE, 2016



BEDSIDER PROVIDERS

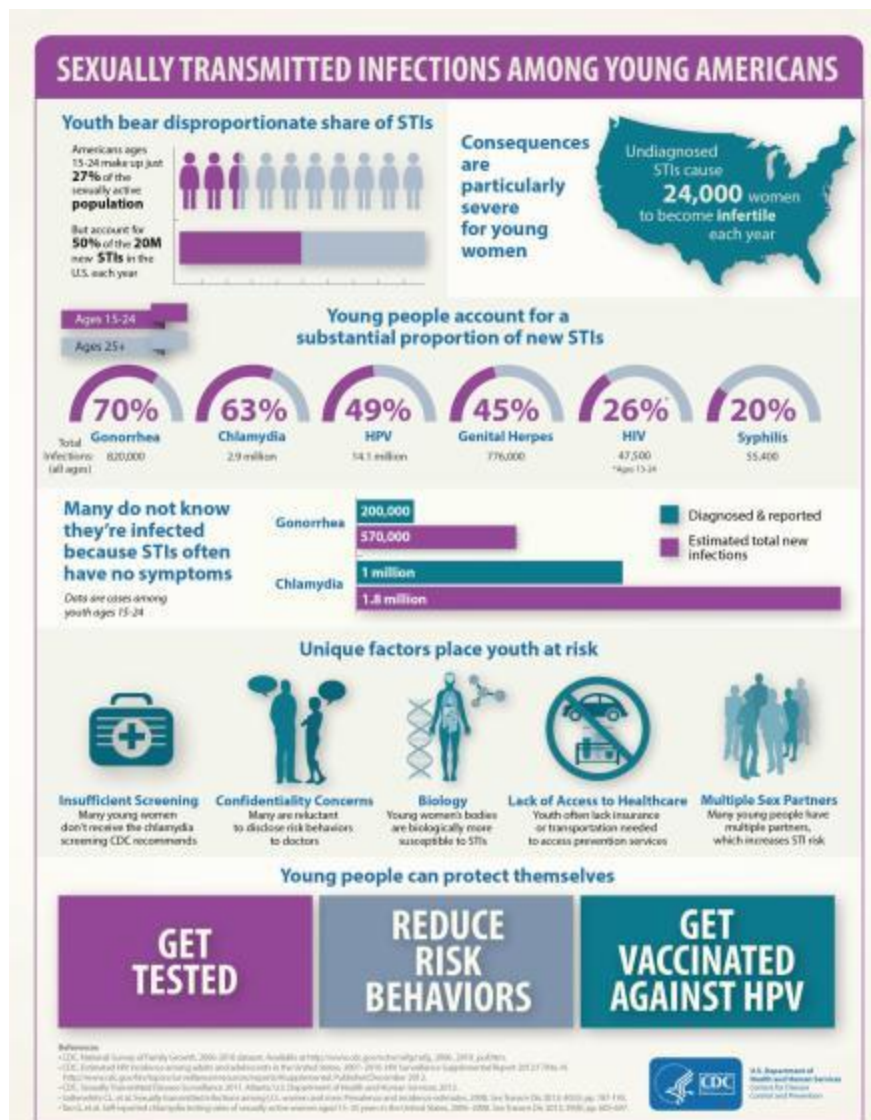


Reproductive Infectious Disease

Collaboration with
obstetricians,
gynecologists,
microbiologists,
reproductive
epidemiologists,
and
pharmaceutical
specialists



- Study of:
 - Unique organisms responsible for infections in OB/GYN patients
 - Clinical manifestations and sequelae of infections including sexually transmitted diseases
 - Clinical manifestations and sequelae of fetal/perinatal infections



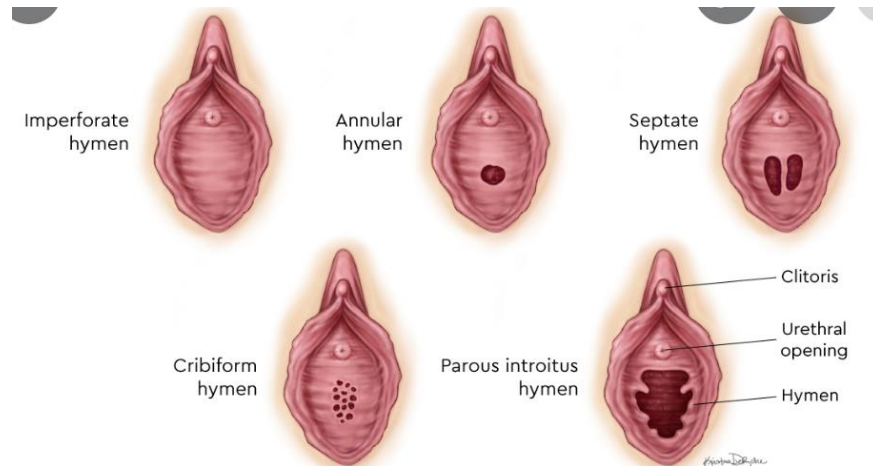
Pediatric and Adolescent Gynecology

- Evaluation and treatment of patients from infancy and childhood through adolescence and young adulthood, giving special consideration to the physical and emotional needs of young women, and providing support in their transition from pediatric care to gynecologic care



PAG Conditions

- Obstructive anomalies of the female reproductive system, such as imperforate hymen or transverse vaginal septum
- Other Mullerian anomalies
- Ovarian cysts and other pelvic masses
- Menstrual disorders
- Amenorrhea
- Preventative health
- Adolescent sexual health
- Disorders of sexual differentiation



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I. Hypoplasia/agenesis



A. Vaginal

B. Cervical



C. Fundal

D. Tubal

E. Combined

III. Didelphys



II. Unicornuate



A. Communicating

B. Noncommunicating



C. No cavity

D. No horn

IV. Bicornuate



A. Complete

B. Partial

V. Septate



A. Complete

B. Partial

VI. Arcuate



VII. DES related

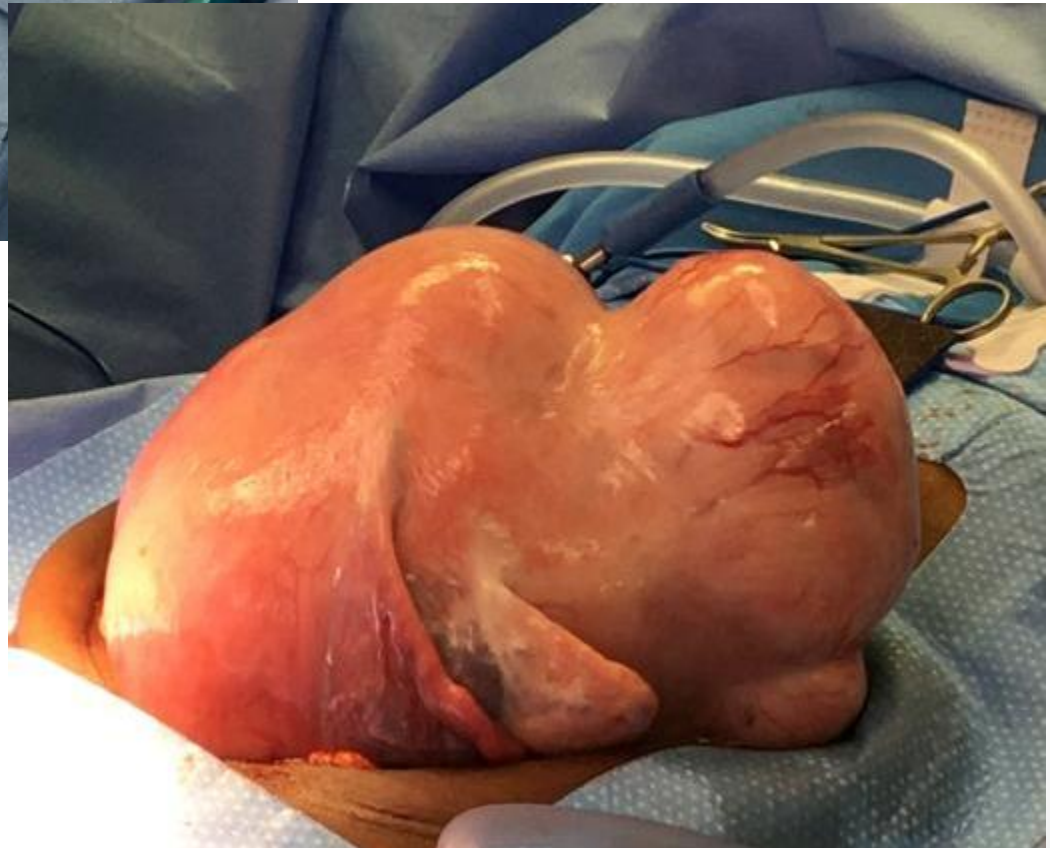


Benign Gynecology



- Menstrual disorders
 - Dysmenorrhea
 - Abnormal uterine bleeding
- Uterine fibroids
- Endometriosis
- Ovarian cysts
- Chronic pelvic pain
- Menopause
- Vulvar health
 - Vulvar dermatoses
 - Vulvodynia

Leiomyomas





Mature Cystic Teratoma (Dermoid Cyst)



Endometrioma

Minimally Invasive Gynecologic Surgery (MIGS)

Laparoscopic, robotic, vaginal or hysteroscopic surgeries performed as alternatives to traditional open surgery

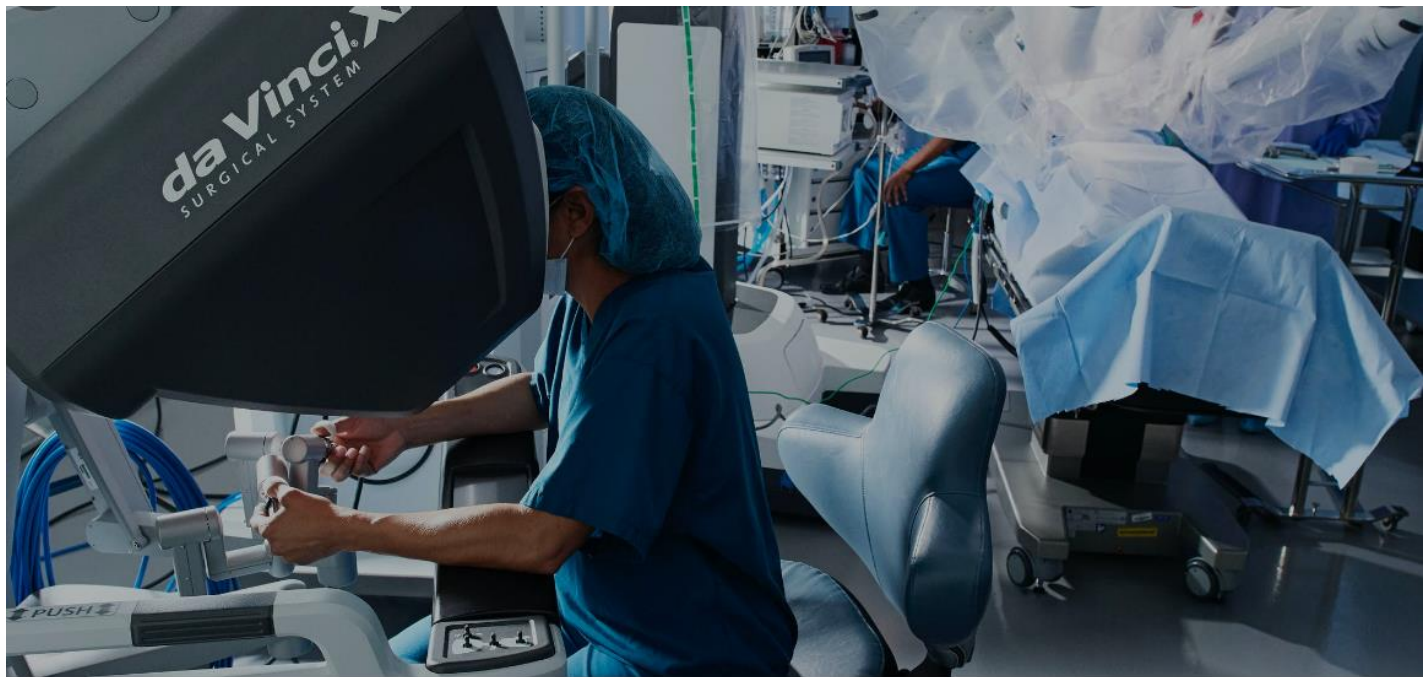
Benefits

- Significantly less pain
- Less blood loss and need for transfusion
- Less risk of infection
- Shorter hospital stay
- Quicker recovery and return to normal activities
- Small incisions for minimal scarring
- Better patient satisfaction

ABOG

American Board of Obstetrics & Gynecology

First in Women's Health®



Good Luck and Have Fun!

- Know your patient
- Know the anatomy
- Ask questions
- You are part of the team!

