

The Obstetrical Society of Philadelphia

To embrace our legacy, foster collegiality, and share expertise to improve the health of women in Philadelphia and beyond

OCTOBER 2018

Newsletter

VOL. 46, NO. 2

President's Message

The Obstetrical Society of Philadelphia; Is It Worth Our Time and Effort?

PETER F. SCHNATZ, D.O.

As we celebrate our sesquicentennial anniversary and spend time focusing on our accomplishments and achievements over the years, it causes us to look forward to the future of our organization. Many state OBGYN societies have stopped functioning over the past decade or so, for a variety of reasons, including finances, time constraints, the busyness of our personal and professional lives, and an assortment of other competing factors. Before strategizing ways to be successful this year, and in the coming years, it is important to ask the following question; "Is the society truly of value or are we simply keeping it going for the sake of nostalgia?" While the acquisition of medical knowledge and guest presenters are at the core of what we do, this can be acquired through a variety of mechanisms and in and of itself is probably not worth sustaining the organization. As I assess our society, here are some of the core values and reasons I see to spend our time, finances, and resources in support of this organization.

- 1. The association offers the opportunity for the gathering of like-minded individuals, from numerous regional facilities, at a wide range along the spectrum of our careers. We range from student, to resident, to junior attendings, to fellows, to seasoned faculty, to retired Emeritus members. Many members have been here, or will be here, for years and years, providing connections and history which is deep and rich. The organization provides an opportunity to network, build social connections, and develop local, regional, and even national initiatives.
- 2. One of my presidential initiatives is to increase attendance as well as involvement, and to diversify the ways our meetings can encourage people to use them for more than 1 purpose. For example, we are encouraging different groups within the society, Chairman in ObGyn, Residency Program Directors, residents, and other groups to meet before, or after, for additional networking and collaborative purposes. As we become more and more dependent upon technology and less reliant upon individual contact, we need to find ways to keep good relationships, interpersonal communication, and networking at the forefront of making us the best we can be. The Philadelphia ObGyn society Is truly a unique organization with a strong heritage, sustained current potential, and boundless future opportunities. As we embark upon the year ahead, please continue to engage your strengths and resources while encouraging your colleagues and junior mentees to become involved and to make this organization all that it can be. Continued on page 3.

Upcoming Lecture



Thursday, November 15, 2018, 6:00 PM

"Osteoporosis: Update and Overview"

We hope that you will be able to join us for our October meeting, when Michael McClung, M.D., of Oregon Osteoporosis Center will discuss osteoporosis.

See page 3 for details.

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Embrace Our Legacy



The following was selected from "Transactions of the Philadelphia Obstetrical Society" 1869-1875

DEFORMITIES OF THE PELVIS,—THEIR ORIGIN AND TYPI-CAL CHARACTER

BY ROGERT P. HARRIS, M.D., PHILADELPHIA.

(Read before the Philadelphia Obstetrical Society, October 5th, 1871.)

Although the deformities of the female pelvis are exceedingly diverse in many minor points, still they will admit of being arranged under general and special heads, based either upon a uniformity of origin, or a marked similarity of contour in the superior strait. If we examine a large number of contracted and collapsed pelves, we shall find certain general characteristics, that mark almost unerringly the nature of the disease in which the deformity originated. The great mass of the cases arise either from infantile or adult bone-softening, and in our own country almost exclusively from the former. Rachitis and malacosteon bear a close pathological relationship to each other, but occurring at remote periods of life, produce very different effects, as a general rule, upon the contour of the pelvis, and give rise to two general classes, which may be denominated reniform or kidney-shaped, and rostrate, or beaked, the former being produced by anteroposterior collapse, and the latter by postero-lateral.

The deformities of the pelvis which we have to contend with in this country are almost entirely due to rickets; some few are believed to be congenital, or may result from coxalgic distortion; but cases of malacosteon, so common in some European localities, are exceedingly rare, so much so that many of our most experienced obstetricians have never seen an example of the disease. The general contour of the superior straight

in most cases of deformity will indicate the disease which produced it; the rostration of the ossa pubis being due in almost all instances to adult pelvic softening, and the reniform changes of the strait to rickets. But there are exceptions to this rule, as irregular rostration is sometimes produced by the latter.

Rachitis is hereditary to some extent, and unquestionably in some cases congenital; but it is as yet undetermined whether or not deformity commences in utero, although mothers have frequently expressed the opinion that their children were born with pelvic distortion. In the normal position of the fœtus the limbs are suspended from the acetabula, and the lumbo-pelvic curve straightened, the weight of the legs having a tendency to elongate the superior strait antero-posteriorly, which is the reverse of the reniform change usually produced by rachitis, and in correspondence with the normal shape of the fœtal pelvis.

Malacosteon commences in the adult with pains in the bones, and admits of locomotion for a longer or shorter period, during which the pelvis gradually yields to a collapsing pressure at three points, produced by the weight of the body acting through the spine, and the resistance of the ossa femora bearing on the acetabula. The first step generally in the resulting deformity is the forcing of the acetabula to approach each other, and thus rostrate the superior strait, by bringing the ossa pubis near together. The disease being progressive, and generally incurable, advances gradually in its distorting influence, until not only is rostration complete, but collapse of the entire pelvis results, even to the closure of the rectum, to be hereafter referred to.



COMMENTARY BY LUISA GALDI DO, FACOG, NCMP BEBE HEALTHCARE

In 2,507 pages of *Transactions of the Philadelphia Obstetrical Society*, this is only reference to bone disease that is found. And, it clearly has nothing do with menopause. In fact, I found no case reports or discussions surrounding the health of aging women at all. Hmmm... I found myself personifying "Thinking Face Emoji¹." Why were our predecessors not discussing bone health in postmenopausal women?

In an effort to satisfy this burning question (and to cleverly connect this excerpt to our upcoming lecture, compelling you to continue reading my little commentary), I did some research. As it turns out, the concept that we now refer to as "bone remodeling" was identified by English surgeon John Hunter in the eighteenth century. But, interestingly, the disease process coined "osteoporosis" was not recognized in patients until the 1830s thanks to French pathologist Jean Georges Chretien Frederic Martin. And, it took another 100 years for Fuller Albright of Massachusetts General Hospital to question why there was a peculiar susceptibility to this brittle bone disease in menopausal women. Finally, in the 1940s, Dr. Albright started treating "postmenopausal osteoporosis" with estrogen.²

Since our Transactions collections only extends as far as 1901, it is clear why I had such difficulty with the topic this month. The conversation simply was not on the table for more than half of our society's existence. I'm glad to see that it IS a topic at our table today and look forward to this month's presentation by Dr. Michael McClung. I hope you do too. (1)

References 1. https://emojipedia.org/thinking-face/ 2. https://reliawire.com/history-osteoporosis/

President's Message



On November 15, 2018, I will be excited to welcome our second speaker of the year, Dr. Michael McClung. He will be our next presenter for this year's theme of: "Improving menopausal education and health care in the 21st century." Michael will be giving us an Osteoporosis update and overview.

His Bio is as follows:

MICHAEL McCLUNG, MD

Dr. Michael McClung is the founding director of the Oregon Osteoporosis Center. He is a graduate of the University of Texas Southwestern Medical School in Dallas and completed a fellowship in Endocrinology at the National Institute of Health in Bethesda, Maryland. For many years, he was on the faculty at the Oregon Health Sciences University and in the Department of Medical Education at Providence Portland Medical Center where he was actively involved in the training of young physicians.

At the Oregon Osteoporosis Center, Dr. McClung has had an active clinical practice, taken part in multiple educational initiatives and has been the principal investigator in many clinical trials evaluating the effects of therapeutic agents for osteoporosis and utility of tests for diagnosis and monitoring that disease. These activities have resulted in more than 250 scientific and clinical publications. He is frequently invited to speak at national and international society meetings and is the recipient of several teaching and service awards from those societies, including, in 2015, the President's Award from the International Osteoporosis Foundation, the Dr. John P. Bilezikian Global Leadership Award of the International Society for Clinical Densitometry and the Leon Speroff Award for Excellence in Education from the North American Menopause Society. Dr. McClung serves as the Associate Clinical Editor of BoneKey and is on the editorial board of several other journals including Osteoporosis International. He has been an active member of the IOF Council of Scientific Advisors since 1999. Dr. McClung served on the WHO Fracture Risk Assessment Task Force that led to the implementation of the FRAX fracture risk assessment tool, is on the Board of Directors of the North American Menopause Society, and he has been involved in the development of clinical guidelines for several national osteoporosis societies.

Please join us November 15th, and encourage as many of your colleagues, friends, residents, and students as possible to attend this interesting and second program of the year.

November Meeting

The Obstetrical Society of Philadelphia

OUR MISSION: "TO EMBRACE OUR LEGACY, FOSTER COLLEGIALITY, AND SHARE EXPERTISE TO IMPROVE THE HEALTH OF WOMEN IN PHILADELPHIA AND BEYOND."



MICHAEL McCLUNG, MD FOUNDING DIRECTOR, OREGON OSTEOPOROSIS CENTER

Topic: **Osteoporosis: Update & Overview**Date: Thursday, November 15, 2018

Location: A blast from the past... Back to the National Liberty Museum

The National Liberty Museum
321 Chestnut Street, Philadelphia

Time: 6:00 PM Cocktails, 6:30 PM Dinner and Program

Discounted parking available in the Bourse Garage!

Payment by check or online at www.obphila.org
We cannot accept payments at the door.

Members - \$60.00 Non-members \$70.00 **RSVP's are due no later than Tuesday, November 6th.**

Please make your check payable to The Obstetrical Society of Philadelphia 308 Rolling Creek Road, Swarthmore, PA 19081.





UNIVERSITY OF PENNSYLVANIA HOSPITAL



FLORENCIA G. POLITE, M.D.

Florencia G. Polite, MD will be joining the department as the Chief of the Division of General Obstetrics and Gynecology on August 31, 2018.



JOURDAN E. TRIEBWASSER, M.D.

Jourdan E. Triebwasser, MD, MA joined the Division of Maternal Fetal Medicine at Penn Medicine Washington Square (a facility of Pennsylvania Hospital) on August 1, 2018.

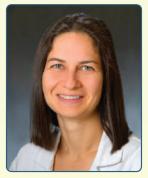


CARA D. DOLIN, M.D., M.P.H.

Cara Dolin, MD joined the Division of Maternal Fetal Medicine at Penn Medicine Washington Square (a facility of Pennsylvania Hospital) on August 20, 2018.



SINDHU K. SRINIVAS, M.D., M.S.C.E.



ADI HIRSHBERG, M.D.

Drs. Sindhu Srinivas and Adi Hirshberg were the second-place winners of the American Hospital Association's inaugural Innovation Challenge for "Heart Safe Motherhood," a patient-centered, innovative approach that leverages technology and redefines the role of obstetrical providers to drive better outcomes for women with pregnancy-related and chronic hypertension in the immediate post-partum period.

THOMAS JEFFERSON UNIVERSITY HOSPITAL

New Faculty



M.D., M.P.H.

New MFM Specialist



RYAN BRANNON, ME OB GYN Generalist



HUDA AL-KOUATLY, MD Genetic/MFM Specialist

Award Winners



AMANDA ROMAN-CAMARGO, M.D. 2018 APGO Faculty Award Winner



MEREDITH BIRSNER, M.D. 2018 CREOG Excellence in Teaching Award





TEMPLE UNIVERSITY HOSPITAL

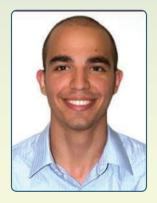
We would like to welcome new faculty to the Lewis Katz School of Medicine at Temple University.



Dr. Claire Faggons was appointed Assistant Professor of Obstetrics Gynecology and Reproductive Sciences. She completed a residency in Ob/Gyn at Tulane University.



Dr. Kathryne Sanserino was appointed Assistant Professor of Obstetrics Gynecology and Reproductive Sciences. She completed her residency in OB/Gyn at Temple University.



Dr. Said Saab was appointed Clinical Assistant Professor of Obstetrics Gynecology and Reproductive Sciences. He completed his residency in Ob/Gy6n at the Hospital of the University of Pennsylvania.

READING HOSPITAL



LAURA CALLANAN, D.O.

Serving the Gynecologic Needs of Men in a Women's Health Center: The Transgender Experience: This 3rd year resident research project done by **Dr. Laura Callanan** of Reading Hospital was awarded the top research award by the ASCCP at their annual meeting. Dr. Callanan also contributed her expertise in help to provide curricular resources on transgender care to CREOG.

Reading Hospital Announces Ultimate Medical School Affiliation: Reading Hospital and Drexel University College of Medicine will embark on a collaborative experience by developing a branch campus of the medical school in Reading. Ultimately, it will be a full four year medical school located in Reading. This full first year class is slated to be in 2021.

CREOG Council Welcomes New Representation in Inter-professional Medicine: One of the priorities of the current CREOG Council is to expand representation. Two subcommittees were developed to accomplish this goal. One was representing focused areas in OBGYN like hospitalist and gynecologic needs of adolescents. The other represent interprofessional educator like nurse midwives, nurse practitioners and sonographers. This was the first time that inter-professional educators were represented on council.



DAVID JASPAN, D.O.

Review Committee with Local Leadership By Dr. David Jaspan: Dr. David Jaspan: Dr. David Jaspan: Dr. David Jaspan, Chair of OBGYN at Einstein Hospital took over the reins of the ACGME Residency Review Committee as Chair this spring. This is one of the most important roles in resident education in our country in that the ACGME accredits every program in our country and Dr. Jaspan leads that task.- photo attached



PHOTOS FROM OUR OCTOBER 11, 2018 MEETING

"Preconception Counseling in Women With POI & Early Menopause"

Lawrence Nelson, M.D., M.B.A.
Senior Advisor, Conover Systems



L-R SOCIETY PRESIDENT, PETER SCHNATZ, D.O., MRS. YOKO NELSON AND DR. LAWRENCE NELSON

SUSAN KAUFMAN, D.O., CHAIR OF THE SESQUICENTENNIAL COMMITTEE IS PRESENTED WITH A BOUQUET THANKING HER FOR HER LEADERSHIP AND HARD WORK PLANNING THE 150TH ANNIVERSARY GALA AND EDITING THE COMMEMORATIVE BOOK.



DR. NELSON SIGNS THE BOOK























2018-19 Meeting Schedule



Dinner Meetings

November 15, 2018 Osteoporosis: update & overview

Michael McClung, MD, Director, Oregon Osteoporosis Center

January 10, 2019 Joint PARES/OB Society Meeting

Marcelle Cedars, M.D., Director, Reproductive Health

University of California San Francisco

March 14, 2019 Sexual Dysfunction: screening, interventions & basics

Sheryl Kingsberg, PhD, Div. Chief, OB/GYN Behavioral Health

UH Cleveland Medical Center

April 11, 2019 Controversial issues in menopausal patient care

Barbara Levy, MD

May 9, 2019 President's Night

Peter F. Schnatz, DO, Reading Hospital

NEW VENUE FOR THE DINNER MEETINGS IS THE NATIONAL LIBERTY MUSEUM, 321 CHESTNUT STREET. DISCOUNTED PARKING AT THE BOURSE GARAGE ON 400 RANSTEAD STREET.

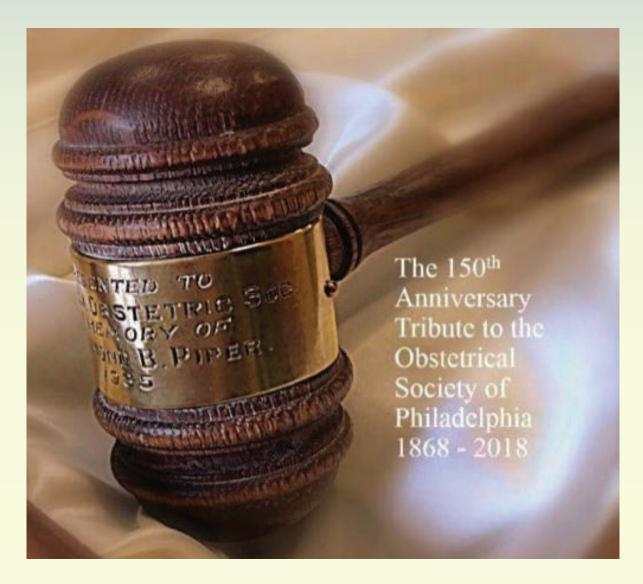
Resident Education Day

To be announced



Embrace Our Legacy





Order, your copy of the COMMEMORATIVE BOOK!

Available on our website www.obphila.org (\$25.00 plus \$3.00 for postage)

OR pick up your copy at the November meeting for \$25.00

Share Expertise



CREOG Educational Report



MARK B. WOODLAND, MS, MD, FACOG CHAIR OBGYN, READING HOSPITAL CLINICAL PROFESSOR OBGYN, DREXEL UNIVERSITY COLLEGE OF MEDICINE

1. HRSA Maternal Mortality Summit -the Health Resources and Services Administration hosted an international summit on Maternal Mortality on June 19th through the 21st 2018 in Rockville, MD. The participants included the United States, Brazil, Candida, Finland, India, Rwanda and the United Kingdom. I represented the American College of OBGYN at this meeting as part of my role as the Chair of the CREOG Council. The meeting started out with an introduction and appeal by the United States Surgeon General Dr. Jerome Andrews. His introduction included a mention of the Pennsylvania Opioid Use Disorder (OUD) Center of Excellence (COE) program and specifically the Center of Excellence program at the Reading Hospital for Maternal Child Health. Having mentioned our program, I took the opportunity to educate him about the 45 COE network in Pennsylvania and the excellent out reach and follow-up work that case management has done for our patients and communities. He was most engaging and interested. He also brought directed attention to some of the racial implications involved in the high maternal mortality rate in the United States. He stated facts which included that black woman are 3-4 times more likely chance to die in or after childbirth as to their other racial counter parts. Additionally, while other countries rely on low risk advance practice clinicians (APC) such as nurse midwives and nurse practitioners, this country does not engage in the same manner. Furthermore, the APC's in this country have a disparity of racial diversity. He believes that we can and should do better and that perhaps these in small ways may help to improve the maternal mortality situation in this country.



2. Archives Review Project -in reviewing archived content for the 150th Anniversary Gala, it became obvious that there were elements of the archives that were not indexed, inventoried, or easy to access. To facilitate a further delineation of the information in our archives, we have hired Scott Blum-Woodland to go through the existing collection and produce an itemized summary including list of presidents and initiatives and speakers along with speaker topics, list of resident bowl winners and the institutions represented, and list of resident research projects and the institutions where they performed the research. Mr. Blum-Woodland is working with the Legacy Center staff Matt Herbison to facilitate this process and to deliver a summary as part of a summer research program. Mr. Blum-Woodland currently attends the University of Edinburgh in Scotland and is a history major. He is a recent graduate of the Shipley School and the son of Dr. Mark B. Woodland, past president of the Obstetrical Society of Philadelphia and current head of archives.



3. Reading Posters Go To Washington -it has been almost 3 years since Dr. Gerald Malek of Reading Pennsylvania donated 11 educational posters that were originally drawn from images from a textbook of comprehensive OBGYN published by Rhamsbotham in the 1860's.

Share Expertise





These posters were generously donated to the Obstetrical Society Philadelphia. After appropriate dating and vetting of these gifts, the Society elected to place 8 of the posters in the archives at the Legacy Center. Two of the posters were donated to the American College of OBGYN (ACOG) national offices in Washington DC in honor of the 150th anniversaries of the Obstetrical Society of Philadelphia as well as the Reading Hospital. One of these posters remains in the OBGYN Department at Reading Hospital All three posters were framed in a similar manner. On the back of each of the poster is a representation of the history of the posters as well as images of all 11 posters and their locations. Currently, the two posters donated to ACOG hang prominently in the 2nd floor reception area of the national offices. If you have a chance to go into the ACOG headquarters in Washington DC, please go to the 2nd floor to see these posters and their connection to the Philadelphia/Reading area and representation of the 150th anniversary of the Obstetrical Society of Philadelphia.

PA ACOG Education Report

- an analysis of data from the 2018 CREOG Survey as well as information from the ACOG to Summits on Women's Health. Part of the process was to collect data to help resident apply to and select programs. Additionally, we are developing a meaningful universal post-match program to include such elements as well ness, fetal assessment, interprofessional education, and first assist programs.
- 2. Transition from Residency to Practice/Fellowship CREOG has begun to look at a post residency mentorship program. Additionally, they have voted on promoting a universal delayed start date for fellowships to help transition into these programs.
- **3. Surgical Training Initiatives** CREOG is work on supporting programs as they address the new ABOG requirement for FLS. Additionally they are working with the AAGL in the development and validation of the Essentials in Minimally Invasive Surgery (EMIGS). We are also looking at best practices. The 2019 CREOG Survey will be on perspectives of surgical proficiency of the individual resident.

- **4. Residency Template Proposals** CREOG is currently researching existing resident templates and then will make recommendations about how we move forward. Major changes such as tracking, further sub-specialization, extending residency and promoting better faculty development are in the process.
- 5. Expansion of the CREOG Council CREOG has created two sub-committees of the main committee including focus areas in OBGYN as well as interprofessional educations in OBGYN. These meetings occur twice annually and report directly back to council.
- 6. Special Priorities
 - **a.** Wellness and Satisfaction this work group just published! More to come regarding elements and promotions specific to institutions and faculty/residents. Additionally we are addressing bullying in the work place.
 - **b. Sexual Health** this work group continues to produce and is working on a Transgender Learning module as well as other topics.
- 7. **VP Education Opening** the VP for Education spot with the ACOG is open. Dr. Carson stepped down as of August 1st. ①

Obstetrical Society Of Philadelphia Council Members: 2018-19



OFFICERS



PRESIDENT Peter Schnatz, DO The Reading Hospital and Medical Center Department of OB/GYN 6th Ave & Spruce Street



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Nicole Salva, MD Penn Medicine Washington Square 14th Floor, 800 Walnut Street Philadelphia, PA 19107



Daryl Stoner, M.D. (1st Year) Einstein Healthcare Network 210 Mall Blvd, Suite 203 King of Prussia, PA 19406

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