High Level of Specialization Needed for Female Pelvic Health

Women experiencing pain, incontinence, prolapse, or other loss of function in the pelvis can benefit today from interventions ranging from strengthening exercises, vaginal inserts, and injections to stimulatory implants, surgical slings, and pelvic floor reconstruction. With increasing specialization in the field, evaluation and treatment for such conditions is best addressed by a comprehensive and coordinated women’s pelvic medicine program.

“Normal tone, position, comfort, and control are the objectives for managing this range of common challenges that women experience,” said Virtua urogynecologist Kristene Whitmore, MD. She and colleagues in Virtua’s Female Pelvic Medicine program differentially apply a gamut of conservative and direct treatments to patients’ urinary symptoms, sexual function challenges, structural problems, incontinence, and more.

Pelvic Floor Tightness, Pain, Voiding Dysfunction
Loose, tight, or spastic pelvic floor muscles are often the source of the issues, including the common problem of chronic pelvic pain. For example, a malpositioned bladder can cause incontinence symptoms, urgency, or pain during sex.

“Conservative therapy is always our first choice,” said Dr. Whitmore. Fluid and diet changes, medications, and physical therapy that may include biofeedback are effective for many patients. Acupuncture, diazepam suppositories, and other noninvasive alternatives are also options.

In addition, the team performs direct interventions:
- Anesthetic injections at pelvic floor trigger points
- Electromyographically guided Botox injection into pelvic floor muscles, which can resolve a range of symptoms for women who have refractory, high-tone pelvic floor dysfunction
- Nerve stimulation, percutaneously to the tibial nerve, or via a lead to the sacral nerve, is also an option. If an external impulse unit is effective, the team offers an implantable generator.

Pelvic Floor Laxity, Prolapse, Leakage
Incontinence in women often has a prolapse or laxity factor, for which the team can offer modern versions of a pessary (custom fitted and removable) or supportive reconstructive surgery. These procedures include slings for urinary leakage and pelvic floor reconstruction for pelvic organ prolapse.

Virtua’s Female Pelvic Medicine program, which includes Joseph Maccarone, MD, and Sage Claydon, MD, offers multi-channel urodynamic studies and flexible cystoscopy. The group is also experienced in addressing female sexual dysfunction, where managing urogenital conditions can be effective. In addition, the team provides minimally invasive surgical interventions, including suspensions of the vagina, uterus, bladder, and/or rectum.

Surgical mesh contraction can tighten the pelvis and even affect posture and gait. Virtua specialists perform revision surgery to replace the problematic mesh section.

“The earlier patients come to a specialist for care for pelvic problems, the easier and less complicated treatment tends to be,” said Dr. Whitmore.

To schedule an appointment with a Virtua female pelvic medicine specialist, call 856-247-7420.
Addressing Disparities in Women’s Heart Health

Outcomes in heart health may be influenced by the gender of a patient’s cardiologist. A review published this year in the *Journal of the American College of Cardiology* found that women with heart disease are more likely to receive intensive treatment and to benefit from it in survival, when their physician is a woman (see figure).

The conclusion dovetails with other findings in women’s heart health related to gender differences in risks, symptoms, and care. Cardiovascular disease is generally considered to be misdiagnosed and undertreated in women.

“Providers are more likely to attribute signs to stress or anxiety,” said cardiologist Maria Duca, MD, who helps to lead Virtua’s women’s heart health team, made up of female heart specialists. A research team from Drexel University highlighted this contradiction in the *Journal of the American Heart Association* this year, showing that the combined effect of stress from careers and social interactions increases women’s likelihood of developing coronary heart disease significantly, compared to men.

“Women’s hearts, lifestyle influences, and manifestations of heart disease can be different from a man’s. Women, for example, are more likely to suffer from small-vessel and microvascular disease, which is harder to detect and treat,” noted Dr. Duca. They are also less likely to be prescribed care such as statin therapy, coronary stents, or cardiac rehabilitation. And, they wait longer for treatment.

A 2019 review in *Nature Medicine* reveals an alarming failure to successfully treat cardiometabolic disorders, such as diabetes, heart disease, and stroke, in women. Amidst the rise in such disorders, evidence also suggests that obesity-linked heart damage occurs differently in men and women. Offering a comprehensive cardiology program for women—with specialized expertise in treating hypertension, coronary artery disease, and arrhythmia—Dr. Duca and colleagues are also tracking institutional results to improve standards of care across the Virtua system.

The group is attuned to risks linked to pre-eclampsia, gestational diabetes, and lupus and other rheumatologic conditions, and to the undertreatment of some women, particularly women of color. They also focus on cardio- oncology, protecting against, assessing, and managing heart damage related to cancer treatment.

To schedule an appointment with a cardiologist, call Virtua’s women’s health navigators at 833-VHWomen. The navigators also can connect patients to WomenHeart, a cardiac support group for women by women.