

## SAR DFP on pelvic floor dysfunction: annual report

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### Listing of active members

#### Co-chairs

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#### Members

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#### Look back

Pelvic floor dysfunction DFP has been devoted to the cause of successfully imaging pelvic floor disorders with emphasis on the use of various modalities during the didactic workshops which encompassed topics pertaining to ultrasonography, fluoroscopic defecography, MRI-based assessment of pelvic floor and tips to set up a new pelvic floor practice.

Members of the DFP also participated in 2 (self assessment module) SAM sessions pertaining to pelvic floor.

In light of the April 2019 Food and Drug Administration (FDA) withdrawal of surgical mesh products used for transvaginal repair of anterior compartment prolapse, the use of these surgical mesh products is expected to decline [1]. However, due to favorable risk to benefit ratio, FDA still permits the use of transabdominally placed mesh for treatment of pelvic organ prolapse, as well as slings used to treat stress urinary incontinence. Furthermore, patients with prior transvaginal mesh are not advised to have the mesh surgically removed, but rather are recommended to continue routine care with their care providers. Therefore, imaging will continue to play an important role in assessment of complications following transvaginal and transabdominal repair.

The DFP in the years past has successfully taught the art of interpreting both ultrasound and MRI in post-surgical patients with mesh/sling during the 4-h hands-on interactive didactic workshop and will continue to improvise this workshop with newer cases based on attendee feedback.

#### Look ahead

In 2019, the pelvic floor disorders consortium (PFDC) between representative members of the SAR DFP on pelvic floor dysfunction, and representatives of clinical societies, namely American Society of Colon and Rectal Surgeons (ASCRS), American Urologic Association (AUA), and American Urogynecologic Society (AUGS), was formed. The purpose of the consortium was to create a consensus document that addresses utilization of various imaging modalities (namely, dynamic pelvic floor magnetic resonance imaging (MRI), fluoroscopic defecography and transperineal ultrasonography), for assessment of pelvic floor dysfunction disorders, based both on the available literature as well as expert opinion. Several members of our DFP continue to be actively involved in this multi-society

collaborative approach with the aim of publishing multi-society guidelines paper.

In 2020, a special abdominal radiology issue with focus on imaging of pelvic floor dysfunction disorders is planned. The members of the DFP will create a collection of review articles, focusing on anatomy and function of the pelvic floor, technical considerations for dynamic pelvic floor MRI, fluoroscopic defecography and transperineal ultrasonography, as well as applicability of the various modalities in setting of pelvic floor dysfunction and defecatory disorders. Additionally, the members of the DFP serve as reviewers for this important issue.

For the annual meeting of the Society of Abdominal Radiology (SAR) in March of 2020, a hands-on workshop on pelvic floor imaging focused on dynamic pelvic floor MRI and imaging assessment following surgical repairs of the pelvic floor dysfunction, will be offered. This workshop was well received in previous years and will be offered again.

Additionally, several didactic workshops on the issues pertaining to pelvic floor imaging will be offered, discussing pelvic floor anatomy, fluoroscopic defecography, and approach to building a successful pelvic floor imaging program.

Throughout years past and present, the DFP has also actively sought and recruited senior faculty with expertise on subject matters and as well as uplifted promising junior faculty who have embarked on their academic journey by assigning them active roles.

## Reference

1. <https://www.fda.gov/medical-devices/implants-and-prosthetics/urogynecologic-surgical-mesh-implants>. Last accessed on September 5, 2019.

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