

FEBRUARY 2019 ■ Volume 220, Number 2

EXPERT REVIEWS

129 To the Point: The expanding role of simulation in obstetrics and gynecology medical student education

Elise N. Everett; David A. Forstein; Susan Bliss; Samantha D. Buery-Joyner; LaTasha B. Craig; Scott C. Graziano; Brittany S. Hampton; Laura Hopkins; Margaret L. McKenzie; Helen Morgan; Archana Pradhan; Sarah M. Page-Ramsey; Undergraduate Medical Education Committee, Association of Professors of Gynecology and Obstetrics, Crofton, MD

We examine the use of simulation in undergraduate medical education to improve learner confidence, knowledge, skills, and work-place behaviors in the field of obstetrics and gynecology.

SYSTEMATIC REVIEWS

142 Regenerative medicine as a therapeutic option for fecal incontinence: a systematic review of preclinical and clinical studies

Wiep R. De Ligny; Manon H. Kerkhof; Alejandra M. Ruiz-Zapata

The efficacy of regenerative medicine as a treatment for fecal incontinence could not be determined due to low study quality and heterogeneous results.

CLINICAL OPINION

155 Diversity of vaginal microbiota in sub-Saharan Africa and its effects on HIV transmission and prevention



Lois Bayigga; David P. Kateete; Deborah J. Anderson; Musa Sekikubo; Damalie Nakanjako

A better understanding of the role of vaginal microbiota in host susceptibility to HIV infection and its prevention among African women could inform the development of novel local and systemic interventions to minimize new HIV infections among high-risk women.

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HIGHLIGHTING AJOG CITATION CLASSICS

Since its inception 150 years ago, *AJOG* has published many articles that were subsequently referenced so often as to be called citation classics.¹ Throughout the Journal's sesquicentennial year, this space will celebrate some of those groundbreaking *AJOG* papers.

The most frequently cited paper, a review from 23 years ago, had been cited 2,753 times as of mid-January 2019. The authors presented standardized terminology for female pelvic organ prolapse and pelvic floor dysfunction according to a system approved by the International Continence Society, the American Urogynecologic Society, and the Society of Gynecologic Surgeons.² The goal was to enhance communication on the subject among clinicians and academics.

REFERENCES

1. Romero R, Garite TJ, Kim MH, et al. The new *American Journal of Obstetrics & Gynecology*, 5 years later: looking back and moving forward. Editorial. *Am J Obstet Gynecol* 2012;206:364-73.
2. Bump RC, Mattiasson A, Bø K, et al. The standardization of terminology of female pelvic organ prolapse and pelvic floor dysfunction. *Am J Obstet Gynecol* 1996;175:10-7.

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Glossary of Symbols

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IDSOG papers



Articles from the Infectious Diseases Society for Obstetrics and Gynecology

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CALL TO ACTION

167 Addressing maternal mortality: the pregnant cardiac patient

Diana S. Wolfe; Afshan B. Hameed; Cynthia C. Taub; Ali N. Zaidi; Anna E. Bortnick

Cardiac disease in pregnancy is the number one indirect cause of maternal mortality in the United States. We propose a triad solution that includes universal screening for cardiovascular disease in pregnancy and postpartum women, patient education, and institution of a multidisciplinary cardiac team. Additionally, we emphasize essential elements to maximize care for the pregnant cardiac patient based on our experience at our institution in Bronx, NY.

ORIGINAL RESEARCH

Articles abstracted in this issue appear in full at ajog.org

GYNECOLOGY

174 FIRSTT study: randomized controlled trial of uterine artery embolization vs focused ultrasound surgery

Shannon Laughlin-Tommaso; Emily P. Barnard; Ahmed M. Abdelmagied; Lisa E. Vaughan; Amy L. Weaver; Gina K. Hesley; David A. Woodrum; Vanessa L. Jacoby; Maureen P. Kohi; Thomas M. Price; Angel Nieves; Michael J. Miller; Bijan J. Borah; James P. Moriarty; Krzysztof R. Gorny; Phyllis C. Leppert; Amanda L. Severson; Maureen A. Lemens; Elizabeth A. Stewart

Uterine artery embolization provides a lower reintervention rate and greater symptom improvement than magnetic resonance imaging–guided focused ultrasound surgery for uterine fibroid tumors.

177 Self-administered vaginal lidocaine gel for pain management with intrauterine device insertion: a blinded, randomized controlled trial

Jennifer A. Conti; Klaira Lerma; Rebecca J. Schneyer; Charlotte V. Hastings; Paul D. Blumenthal; Kate A. Shaw

Self-administered lidocaine gel before intrauterine device insertion did not reduce insertion pain; majority of participants were willing to wait for pain-control and found self-administration acceptable.

179 Incidence of sarcoma in patients undergoing hysterectomy for benign indications: a population-based study

Francesco Multinu; Jvan Casarin; Lucia Tortorella; Yajue Huang; Amy Weaver; Stefano Angioni; Gian Benedetto Melis; Andrea Mariani; Elizabeth A. Stewart; Shannon K. Laughlin-Tommaso

In patients who undergo hysterectomy for uterine fibroids, the incidence of uterine sarcoma is 0.6%; age ≥ 45 years and uterine weight are associated with risk of uterine sarcoma.

181 Long-term risks of stress and urgency urinary incontinence after different vaginal delivery modes

Riikka M. Tähtinen; Rufus Cartwright; Robin W. M. Vernooij; Guri Rortveit; Steinar Hunnskaar; Gordon H. Guyatt; Kari A. O. Tikkinen

In women younger than 50 years, forceps delivery is associated with increased long-term risk of stress incontinence compared with other vaginal delivery approaches.

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183 Uterine structural abnormality and intrauterine device malposition: analysis of ultrasonographic and demographic variables of 517 patients
Sabrina A. Gerkowicz; Desiree G. Fiorentino; Andrew P. Kovacs; Kristopher L. Arheart; Usha Verma
The presence of uterine anomalies, multiple or submucosal fibroids, and uterine retroflexion are associated with a higher incidence of IUD malposition in women undergoing gynecologic ultrasound.

185 Gaining the patient perspective on pelvic floor disorders' surgical adverse events
 Gena C. Dunivan; Andrew L. Sussman; J. Eric Jelovsek; Vivian Sung; Uduak U. Andy; Alicia Ballard; Sharon Jakus-Waldman; Cindy L. Amundsen; Christopher J. Chermansky; Carla M. Bann; Donna Mazloomdoost; Rebecca G. Rogers; on behalf of the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development Pelvic Floor Disorders Network
Women consider adverse functional outcomes, such as incontinence, sexual dysfunction, and symptom recurrence, as serious adverse events after surgery for pelvic floor disorders.

187 Characterization of the T-cell response to polypropylene mesh in women with complications
Lauren Tennyson; Matthew Rytel; Stacy Palcsey; Leslie Meyn; Rui Liang; Pamela Moalli
T cells play a critical role in the fibrotic response to mesh in women who undergo vaginal mesh excision for complications.

OBSTETRICS

189 Contraction of the levator ani muscle during Valsalva maneuver (coactivation) is associated with a longer active second stage of labor in nulliparous women undergoing induction of labor
 Rasha Kamel; Elisa Montaguti; Kypros H. Nicolaides; Mahmoud Soliman; Maria Gaia Dodaro; Sherif Negm; Gianluigi Pilu; Mohamed Momtaz; Aly Youssef
Contraction of the levator ani muscle during Valsalva maneuver (coactivation) is associated with a longer active second stage of labor in nulliparous women undergoing induction of labor.

191 The impact of extending the second stage of labor to prevent primary cesarean delivery on maternal and neonatal outcomes
Yaniv Zipori; Oren Grunwald; Yuval Ginsberg; Ron Beloosesky; Zeev Weiner
The benefits of preventing primary cesarean delivery by extending the second stage of labor must be weighed against the potential adverse maternal and neonatal outcomes.

193 A simple model to predict the complicated operative vaginal deliveries using vacuum or forceps
 José Antonio Sainz Bueno; José Antonio García-Mejido; Adriana Aquisé; Carlota Borrero; María José Bonomi; Ana Fernández-Palacín
 The combination of the angle of progression and the head circumference can predict 87% of complicated operative vaginal deliveries.

ORIGINAL RESEARCH *(continued)*

- 195 Risk of severe maternal morbidity by maternal fertility status: a US study in 8 states**
Barbara Luke; Morton B. Brown; Ethan Wantman; Valerie L. Baker; Kevin J. Doody; David B. Seifer; Logan G. Spector
Risks of severe maternal morbidities are substantially increased in subfertile pregnancies and in in vitro fertilization pregnancies.
- 197 Two-stage screening for preterm preeclampsia at 11–13 weeks' gestation**
Alan Wright; David Wright; Argyro Syngelaki; Apostolos Georgantias; Kypros H. Nicolaides
Two-stage screening for preterm preeclampsia offers a cost-saving alternative to 1-stage screening.
- 199 Predictive performance of the competing risk model in screening for preeclampsia**
 David Wright; Min Yi Tan; Neil O'Gorman; Liona C. Poon; Argyro Syngelaki; Alan Wright; Kypros H. Nicolaides
Results from 2 validation data sets are consistently good with those of the training set used for development of the competing risk model of screening for preeclampsia.
- 201 Childbirth-specific patient-reported outcomes as predictors of hospital satisfaction**
Kimberly D. Gregory; Lisa M. Korst; Samia Saeb; Jeanette McCulloch; Naomi Greene; Arlene Fink; Moshe Fridman
This prospective observational study identified multiple predictors of women's satisfaction with their childbirth hospital that could be addressed in routine obstetrics practice.

IMAGES IN GYNECOLOGY

- 204 A painful erythematous plaque on the right labium majora**
Qian-Nan Jia; Sergio Vano-Galvan; Dong-Lai Ma
An otherwise healthy 66-year-old woman had an occasionally painful erythematous plaque on the right labium majora for 2 years.

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