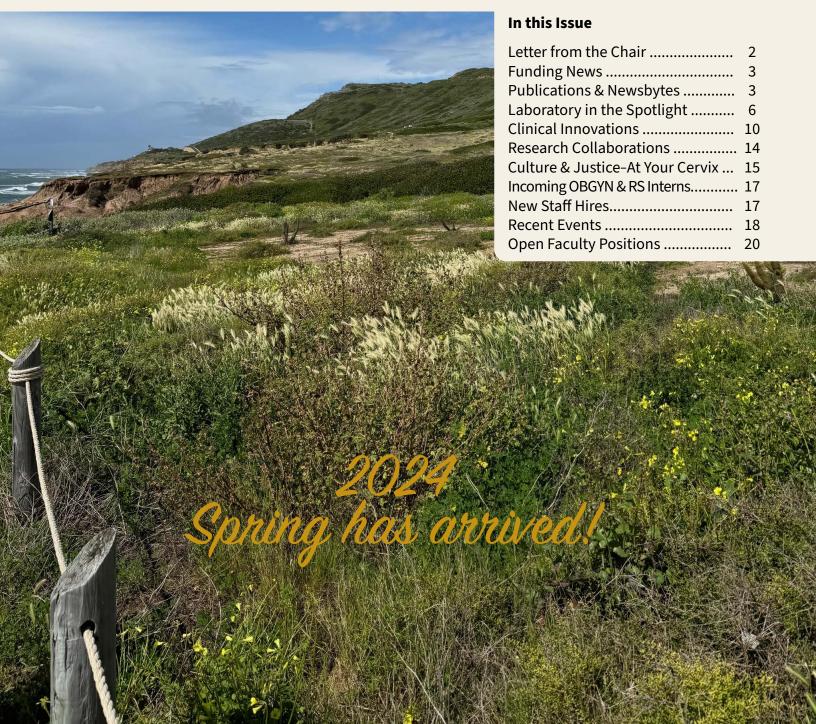
UC San Diego

Department of Obstetrics, Gynecology & Reproductive Sciences

APRIL 2024 VOL. 18





Letter from the Chair

Dear Colleagues,

Spring has arrived! With the spring comes rebirth, and San Diego County is experiencing our second super bloom in as many years. Volume 18 of the *Fimbria* spotlights the lab of physician scientist Heidi Cook-Andersen, MD, PhD, a professor and faculty member in the Division of Reproductive Endocrinology and Infertility. We also feature our Menopause program led by clinical innovator Kathryn Macaulay, MD. Our Culture & Justice Quorum hosted Black Maternal Health Week Living Library with a successful UC San Diego Health Birth Community Symposia and Donation Drive in partnership with the Black Pre-Med Society and the UCSD Student National Medical Association. In this edition, we welcome our incoming OBGYN & RS interns! Additionally, we captured images of our faculty and trainees at various national meetings in the past few months.

Visit our <u>website</u> for more information on our divisions, clinical programs, novel research, and varied educational offerings. Please enjoy this issue, and email us with any feedback to <u>Fimbria@ucsd.edu</u>.

Thank you!



Cynthia Gyamfi-Bannerman, MD, MS | Samuel SC Yen Endowed Chair Department Chair, Obstetrics, Gynecology, & Reproductive Sciences and Professor, Maternal-Fetal Medicine, Obstetrics and Gynecology

UC San Diego Health





Department CV | Website

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FUNDING NEWS

Congrats to recent awardees on funding for impactful research and scientific discovery



Marianna Alperin, MD, MS

Sponsor

California Institute for Regenerative Medicine

Grant

Foundation – Discovery Stage Research Projects for "Harnessing the rejuvenating capacity of pregnancy-associated factors to restore aged stem cell function"

Award

7/1/2024-6/30/2027 \$1,539,520



Lindsey Burnett, MD, PhD

Sponsor

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A172825 Grant

The Role of Bystander Empathy in Recovery from Birth Trauma

Award

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Heidi Cook-Andersen, MD, PhD

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American Society for Reproductive Medicine

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"Non-destructive assessment of human embryo implantation potential using Raman spectroscopy"

Award

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Varykina Thackray, PhD

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BG114254 Grant

"Next Generation probiotics to improve metabolic dysregulation in PCOS"

Award

2/1/2024-2/28/2025 \$10k

PUBLICATIONS Recent Publications of Outstanding Work by Department of OBGYN & RS Members PUBLICATIONS Recent Publications of Outstanding Work by Department of OBGYN & RS Members

Marianna Alperin, May Alarab, Sylvia Botros-Brey, Harold Drutz, Jenny King, Oksana Shynlova

The Future of Basic Science: Development of the Next Generation of Mechanistic Researchers in Female Pelvic Medicine | International Urogynecology Journal • MARCH 2024

Tonya C Lee, Evan Walker, Michelle A Ting, Divya S Bolar, Jeffrey Koning, Bobby S Korn, Don O Kikkawa, David Granet, Shira L Robbins, **Marianna Alperin**, Elizabeth C Engle, Catherine Y Liu, Jolene C Rudell

The influence of orbital architecture on strabismus in craniosynostosis | *JAAPOS* • FEB. 2024

Caitriona Brennan, Kristina Chan, Tanya Kumar, Erica Maissy, **Linda Brubaker,** Marisol I Dothard, Jack A Gilbert, Katharine E Gilbert, **Amanda L Lewis, Varykina Thackray,** Amir Zarrinpar, Rob Knight

Harnessing the Power Within: Engineering the Microbiome for Enhanced Gynecologic Health | Reproduction & Fertility • APRIL 2024

Shayna D Cunningham, Sarah Lindberg, Carol Joinson, David Shoham, Haitao Chu, Diane Newman, Neill Epperson, **Linda Brubaker,** Lisa Kane Low, Deepa R Camenga, **D Yvette LaCoursiere**, Melanie Meister, Kimberly Kenton, Siobhan Sutcliffe, Alayne D Markland, Sheila Gahagan, Tamera Coyne-Beasley, Amanda Berry; Prevention of Lower Urinary Tract Symptoms (PLUS) Research Consortium*

Association Between Maternal Depression and Lower Urinary
Tract Symptoms in Their Primary School-Age Daughters: A Birth
Cohort Study | JWOCN • FEB. 2024

Ukachi N Emeruwa, Hooman Azad, Samsiya Ona, Shai Bejerano, Sarah Alnafisee, Jordan Emont, Sharon Matthew, Michelle Batlle, Denice Arnold, Erinma P Ukoha, **Louise C Laurent, Marni Jacobs**, Janice J Aubey, Russell S Miller, **Cynthia Gyamfi-Bannerman**

<u>Lasix for the prevention of de novo postpartum hypertension: A randomized placebo-controlled trial (LAPP Trial)</u> | *AJOG* • APRIL 2024

PUBLICATIONS

Recent Publications of Outstanding Work by Department of OBGYN & RS Members

Daisuke Nishizaki, Ramez N Eskander

<u>Targeted Therapies, Biologics, and Immunotherapy in the Neo-adjuvant and Adjuvant Settings: Perioperative Risks</u> | *Surgical Oncology Clinics N AM* • APRIL 2024

Britt K. Erickson MD, Brian Slomovitz MD, Matthew Powell MD, Ramez N. Eskander MD

Top advances of the year: Uterine cancer | Cancer • APRIL 2024

Ramez N Eskander

Revisiting immunotherapy in endometrial cancer | Clin Adv Hematol Oncol • FEB. 2024

Lauryn C Gabby, Chelsea K Jones, Brendan B McIntyre, Zoe Manalo, Morgan Meads, Donald P Pizzo, Jessica Diaz-Vigil, Francesca Soncin, **Kathleen M Fisch, Gladys A Ramos, Marni B Jacobs,** Mana M Parast

Chronic Villitis as a Distinctive Feature of Placental Injury in Maternal SARS-CoV-2 Infection | AJOG • APRIL 2024

Cynthia Gyamfi-Bannerman, MD, MS; Rebecca G Clifton, Alan T N Tita, Sean C Blackwell, Monica Longo, Jessica A de Voest, T Michael O'Shea, Sabine Z Bousleiman, Felecia Ortiz, Dwight J Rouse, Torri D Metz, George R Saade, Kara M Rood, Kent D Heyborne, John M Thorp Jr, Geeta K Swamy, William A Grobman, Kelly S Gibson, Yasser Y El-Sayed, George A Macones; Eunice Kennedy Shriver Maternal-Fetal Medicine Units Network

Neurodevelopmental Outcomes After Late Preterm Antenatal Corticosteroids The ALPS Follow-Up Study | JAMA • APRIL 2024

Cynthia Gyamfi-Bannerman

From Mentee to Leader-Thoughts From an Immigrant | Clinical Obstetrics and Gynecology • APRIL 2024

Caleb Ing, Jeffrey H Silber, Deven Lackraj, Mark Olfson, Caleb Miles, Joseph G Reiter, Siddharth Jain, Stanford Chihuri, Ling Guo, **Cynthia Gyamfi-Bannerman**, Melanie Wall, Guohua Li

Behavioural disorders after prenatal exposure to anaesthesia for maternal surgery | British Journal of Anaesthesia • FEB. 2024

Ann M Bruno, Grecio J Sandoval, Brenna L Hughes, William A Grobman, George R Saade, Tracy A Manuck, Monica Longo, Torri D Metz, Hyagriv N Simhan, Dwight J Rouse, Hector Mendez-Figueroa, **Cynthia Gyamfi-Bannerman**, Jennifer L Bailit, Maged M Costantine, Harish M Sehdev, Alan T N Tita; Eunice Kennedy Shriver National Institute of Child Health and Human Development Maternal-Fetal Medicine Units Network, Bethesda, MD

Postpartum pharmacologic thromboprophylaxis and complications in a US cohort | AJOG • FEB. 2024

Adina R Kern-Goldberger, Nigel Madden, Caitlin Baptiste, Alexander Friedman, **Cynthia Gyamfi-Bannerman**

<u>Maternal and Neonatal Morbidities by Race in College-Educated</u> <u>Women | American Journal of Perinatology Reports</u> • JAN. 2024

Henderson, Tatyanna MD; Christman, Karen L. PhD, **Alperin, Marianna MD, MS**

Regenerative Medicine in Urogynecology: Where We Are and Where We Want to Be | Urogynecology Journal • APRIL 2024

Kathryn J Lindley, Andrew Perry, **Marni Jacob**s, Lauren Petty, Kaushik Amancherla, Shilin Zhao, Claire Barker, Victor G Davila-Roman, Sadiya S Khan, Sarah S Osmundson, Kahraman Tanriverdi, Jane E Freedman, Jennifer Below, Ravi V Shah, **Louise C Laurent**

<u>Differences in Cardiometabolic Proteins in Pregnancy Prioritize</u>
<u>Relevant Targets of Preeclampsia</u> | *Arteriosclerosis, Thrombosis, and Vascular Biology* • FEB. 2024

Björn Schlier, Tania M Lincoln, **Jessica L Kingston**, Suzanne H So, Brandon A Gaudiano, Eric M J Morris, Lyn Ellett

Cross-cultural validation of the revised Green et al., paranoid thoughts scale | Psychological Medicine • FEB. 2024

Alyssa J Kobayashi, Francesca Boscolo Sesillo, Emmy Do, Marianna Alperin

Effect of nonsteroidal anti-inflammatory drugs on pelvic floor muscle regeneration in a preclinical birth injury rat model | AJOG • APRIL 2024

Jenny B Koenig, Lindsey A Burnett

Understanding the Role of Obesity and Metabolism in Pelvic Floor Disorders | *Urogynecology* • MARCH 2024

Selina Sandoval, Sally Rafie, **Gennifer Kully, Sheila Mody, Sarah Averbach**

<u>Pharmacist provision of medication abortion: A pilot study</u> | *Contraception* • MARCH 2024

Jasmine A Scott, Jenna Glavy, Bradley Deafenbaugh, William Kent, **Yvette LaCoursiere**, Alexandra Schwartz, Monica Lutgendorf, Benjamin M Wheatley

<u>Do All Patients with History of Pelvic Ring Injuries Need a Cesarean</u> <u>Section? - A Survey of Orthopaedic and Obstetric Providers | Contraception • FEB. 2024</u>

Katherine Lee, Kyucheol Cho, Robert Morey, Heidi Cook-Andersen

An extended wave of global mRNA deadenylation sets up a switch in translation regulation across the mammalian oocyte-to-embryo transition | Cell Reports • FEB. 2024

Jennifer N Chousal, Robert Morey, Srimeenakshi Srinivasan, **Katherine Lee,** Wei Zhang, Ana Lisa Yeo, Cuong To, **Kyucheol Cho,** V Gabriel Garzo, Mana M Parast, **Louise C Laurent, Heidi Cook-Andersen**

Molecular profiling of human blastocysts reveals primitive endoderm defects among embryos of decreased implantation potential | Cell Reports • FEB. 2024

Brenda Rojas Romagnoli, Thao-Ly T Phan, **Amanda M Lewis**, Melissa A Alderfer, Anne E Kazak, Kamyar Arasteh, Paul T Enlow

The Psychosocial Impact of the COVID-19 Pandemic on Families of Youth of Color: A Prospective Cohort Study | Journal of Pediatric Psychology • FEB. 2024

Nicole Hamilton Goldhaber, Shivani Mehta, Christopher A Longhurst, Elizabeth Malachowski, Melissa Jones, Bryan M Clary, Robin L Schaefer, **Michael McHale**, Lisa P Rhodes, Kristin L Mekeel, J Jeffery Reeves

Call me Ishmael: addressing the white whale of team communication in the operating room with labelled surgical caps at an academic medical centre | BMJ • APRIL 2024

Suha J Patel, Samantha Truong, Samantha DeAndrade, Julianne Jacober, Matthew Medina. Khady Diouf. **Audra Meadows**. Nawal Nour. Julianna Schantz-Dunn

Respectful Maternity Care in the United States-Characterizing Inequities Experienced by Birthing People | Maternal and Child Health Journal • FEB. 2024

Elijah N Holland, Marc A Fernández-Yagüe, Dennis W Zhou, Eric B O'Neill, Ayanna U Woodfolk, Ana Mora-Boza, Jianping Fu, **David D Schlaepfer**, Andrés J García

FAK, vinculin, and talin control mechanosensitive YAP nuclear localization | Biomaterials • MARCH 2024

Kellie Schueler, Marni Jacobs, Sarah Averbach, Antoinette Marengo, Sheila K Mody

<u>Understanding medication abortion ineligibility due to gestational age</u> <u>among a cohort of patients in Southern California</u> | *Contraception* • FEB. 2024

Caryn Dutton, **Sheila K Mody**, Siripanth Nippita, Laura E Dodge, Trudy Pang, Page B Pennell, Anne Davis

<u>Depot medroxyprogesterone acetate concentrations in patients with and without the use of antiseizure medications</u> | *Contraception* • MARCH 2024

Carmen Conroy, Tanya Jain, Tuo Lin, Sheila K Mody

Assessing Interest in a Peer Support Person for Patients Experiencing Early Pregnancy Loss: Results from a National Survey | Women's Health Reports • MARCH 2024

Marielle E Meurice, **Sheila K Mody**, Jesse Nodora, Antoinette Marengo, **Sarah Averbach**

Social determinants of choosing telemedicine for contraceptive care: A retrospective cohort study | Contraception • FEB. 2024

H. Irene, Su, MD

Alabama's Embryo Personhood Decision Threatens Patients, Medicine and Advances in IVF | Scientific American • MARCH 2024

H Irene Su, Bonnie N Kaiser, Erika L Crable, Ricardo Flores Ortega, Sara W Yoeun, Melina A Economou, Estefania Fernandez, Sally A D Romero, Gregory A Aarons, Sara B McMenamin

Implementation of state health insurance benefit mandates for cancer-related fertility preservation: following policy through a complex system | Implementation Science • FEB. 2024

Samantha Mannion, Alexandra Higgins, Nicole Larson, Elizabeth A Stewart, Zaraq Khan, Chandra Shenoy, Hazel B Nichols, **H Irene Su**, Ann H Partridge, Charles L Loprinzi, Fergus Couch, Janet E Olson, Kathryn J Ruddy

<u>Prevalence and impact of fertility concerns in young women with breast cancer</u> | *Scientific Reports* • FEB. 2023

Elise M Wilson, Ramez N Eskander, Pratibha S Binder

Recent Therapeutic Advances in Gynecologic Oncology: A Review | Cancers • FEB. 2024

Beth Zhou, Brian Kwan, Milli J Desai, Vinit Nalawade, Joe Henk, Nina Viravalli, James D Murphy, Paul C Nathan, Kathryn J Ruddy, Ksenya Shliakhtsitsava, **H Irene Su, Brian W Whitcomb**

Association of platinum-based chemotherapy with live birth and infertility in female survivors of adolescent and young adult cancer | Fertility and Sterility • FEB. 2024

NEWSBYTES

Recent News Featuring Department of OBGYN & RS

News featuring Breanna Chachere, MPH

Student Driven to Improve Care for Underserved Communities | AAFP • FEB. 2024

News featuring Ramez Eskander, MD

FDA Grants Priority Review to Merck's Keytruda Combo for Endometrial Carcinoma | PharmExec • MARCH 2024

News featuring **Erin Gross**, **MD**

Study Reveals AI Enhances Physician-Patient Communication | UC San Diego Today • APRIL 2024

Podcast featuring Cynthia Gyamfi-Bannerman, MD, MS

SMFM Podcast: SMFM President Cynthia Gyamfi-Bannerman | SMFM • MARCH 2024

News featuring Cynthia Gyamfi-Bannerman, MD, MS

Study: New Research Finds Steroids Safe and Effective for Late Preterm Infants | News Wise • APRIL 2024

People with complicated pregnancies may suffer health problems, die early | Science • APRIL 2024

<u>Hypoglycemia not tied to neurodevelopmental outcomes for children born late preterm</u> | *Healio* • FEB. 2024

UC San Diego OBGYN Chair Named 48th President of the Society for Maternal-Fetal Medicine | UC San Diego Today • FEB. 2024

News featuring Jessica Kingston, MD

Pensievision Awarded \$2M+ by the National Institutes of Health (NIH) to perform clinical testing of a handheld, 3D imaging system for improved screening of cervical neoplasia, to help prevent cervical cancer | AB Newswire • APRIL 2024

News featuring Audra Meadows, MD, MPH

<u>'Safety bundles' may reduce pregnancy-related deaths, particularly among Black women</u> | *American Heart Association News* • APRIL 2024

News featuring Nicole Teal, MD

'I was terrified': Black women may prefer Black OB-GYNs due to fear of discrimination, dying during pregnancy | UC San Diego Today • FEB. 2024

Media Relations Contact: <u>Jeanna Vazquez</u>



Heidi Cook-Andersen, MD, PhD and Lab Fuse New-Era Approaches and Decades-old Questions to Illuminate the Earliest Stages of Mammalian Development

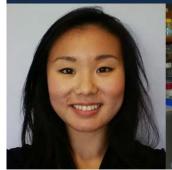
It might surprise you to know that we understand MUCH more about the earliest stages of life for worms, flies, and frogs than we do for our own development, or for any mammal, in fact. This is in large part because the techniques required to answer long-standing questions about these early stages require many more oocytes or embryos than what can be obtained for study in mammalian systems. Luckily, that is shifting, and the Cook-Andersen laboratory is working to help lead this exciting new era in development and reproductive biology.

Heidi Cook-Andersen, MD, PhD, is a physician scientist and Assistant Professor with a dual appointment in the Departments of Obstetrics, Gynecology, and Reproductive Sciences and Molecular Biology at the University of California, San Diego. She completed her clinical training in Obstetrics and Gynecology at the University of Colorado Health Science Center and subspecialty training in Reproductive Endocrinology and Infertility here at UC San Diego. Her basic science training in Molecular Biophysics and Biochemistry was completed at Yale University as a Howard Hughes Predoctoral Fellow. After completing her training, Dr. Cook-Andersen began her independent research program at UCSD as an NIH Women's Reproductive Health Research Scholar and Burroughs Wellcome Fund CAMS Scholar. Most recently, she was honored with the Mentor Award by the School of Biological Sciences. At the Sanford Consortium for Regenerative Medicine, research in the Cook-Andersen Laboratory combines these areas of expertise to investigate the earliest stages of development in mammals with the long-term goal to advance the diagnosis and treatment of infertility.

LABORATORY IN THE SPOTLIGHT Featuring OBGYN & RS Groundbreaking Research Endeavors



MEET THE COOK-ANDERSEN LAB TEAM MEMBERS



Katherine Lee Ruth L. Kirschstein Predoctoral NRSA Fellow, NICHD MD/PhD Student, Biological Sciences



Kyucheol Cho, PhD Assistant Project Scientist



Olcay Soyalan Boehringer Ingelheim Fonds PhD Fellow, Graduate Student, Biological Sciences



Michael Choi, B.S. Master's Student, Biological Sciences



Mashid Bazrafkan, PhD Clinical Embryologist, Visiting Scholar



Jaroslav Slamecka, PhD Assistant Project Scientist



Gopalakrishnan Chandrasekaran, PhD Postdoctoral Fellow, Lalor Fellowhip



lan McNellis Undergraduate Student, Bioinformatics

LABORATORY IN THE SPOTLIGHT Featuring OBGYN & RS Groundbreaking Research Endeavors

Research Goals: Navigating Life's Earliest Challenges

With the goal to one day bring discoveries back to the IVF clinic, research in the Cook-Andersen lab is focused on understanding the molecular mechanisms that underlie the two earliest challenges faced by a new embryo. The mechanisms that drive these critical transitions are key to understanding what it takes to make a "good" oocyte or embryo – i.e., the factors that determine developmental failure and success.

Challenge 1: The oocyte-to-embryo transition

The first challenge is completion of the transition from oocyte to embryo, which ~50% of human embryos fail to fully complete as evidenced by early embryo developmental arrest (Figure 1). Surprisingly, these earliest stages of development occur in the absence of new transcription. Transcription is globally silenced in the fully grown GV oocyte and does not fully resume until embryonic genome activation (EGA) in the late 2 cell embryo in mice and even later, at the 4-8 stage, in humans. Without transcription, regulation of gene expression depends on post-transcriptional mechanisms. However, the molecular mechanisms they regulate—to successfully navigate this transition remain poorly understood.

How is transcription globally silenced in the oocyte?

How is gene expression activated and repressed to drive development without transcription?

How is transcription reactivated for just the right genes in the new embryo?

These are a few of the questions the Cook-Andersen lab is currently working hard to answer.

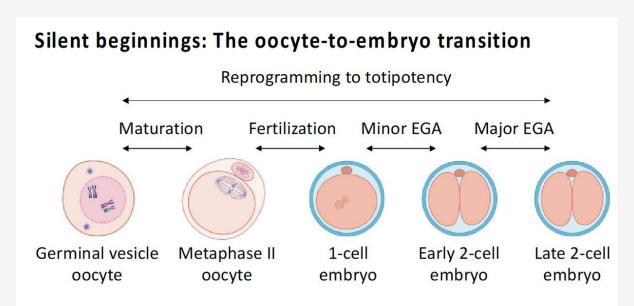


Figure 1. The oocyte-to-embryo transition encompasses 5 developmental stages and occurs largely in the absence of new transcription.

LABORATORY IN THE SPOTLIGHT Featuring OBGYN & RS Groundbreaking Research Endeavors

Challenge 2: Implantation of the human blastocyst

Embryos that successfully complete the oocyte-to-embryo transition and develop to the blastocyst stage after 5 days (Figure 2) face a second major challenge as 50% or more of these embryos will fail to successfully implant in the uterus to initiate a pregnancy. This is true even in women less than 35 years old. However, the molecular factors and pathways required for successful implantation of the human embryo remain largely "a black box" and challenging to study. The Cook-Andersen lab is working to fill this important knowledge gap using both human and mouse embryo models. Current projects also involve collaborations with Drs. Mana Parast and Louise Laurent to develop stem cell models of implantation-competent trophectoderm cells as well to develop a stem cell-based embryo model to examine the role and mechanism of candidate factors they are identifying in embryo studies. Because technical and ethical limitations with the study of human embryos significantly limit advances in the field, stem cell models such as these representing lineages within the blastocyst are critically needed.

The human blastocyst

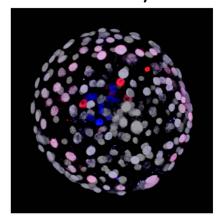


Figure 2. The human blastocyst just prior to the initiation of implantation, comprising the epiblast (blue), primitive endoderm (red), and trophectoderm (gray).

Current Investigation meets Innovation

"Events during the earliest stages of development are highly conserved evolutionarily. However, there are, of course, also critical differences in the details of events in mammals. In particular, the specific factors and pathways that regulate details of these events are much less conserved between organisms. So, despite the challenges, it is essential to uncover the mechanisms that drive these key developmental events in mammals if we want to make advances in the clinic." — Heidi Cook-Andersen, MD, PhD

The analyses necessary to make major advances in our understanding of these early stages in mammals have long been precluded by the small number of oocytes and embryos available for study. To meet this challenge, the Cook-Andersen lab is working to adopt and adapt cutting-edge, genome-wide approaches to study RNA dynamics, transcription regulation, epigenetic modifications, and chromatin structure using an extraordinarily low number of cells. These new approaches allow them to address decades-old questions in mammalian development and to work to improve embryo culture, embryo selection, and IVF success.

Recent Discoveries from the Lab

Factors critical for the oocyte-to-embryo transition:

- ZFP36L2-dependent RNA decay is critical for global transcriptional silencing and developmental competence in the mammalian oocyte
- Elucidation of stage-specific maternal mRNA poly(A) tail dynamics reveals a switch in translation control from oocyte to embryo in mammals

Factors critical for successful embryo implantation:

- Molecular profiling reveals that human blastocysts of reduced implantation potential demonstrate common defects in primitive endoderm development
- <u>UPF2-dependent RNA decay is critical for expansion of the pluripotent epiblast and successful implantation of the blastocyst</u> (in collaboration with the Wilkinson lab)

Thank you, Dr. Cook-Andersen Lab for your inspiring state-of-the-art science and dedication to advancing our basic understanding of early development and infertility treatment for our patients. To explore more visit: <u>Cook-Andersen Laboratory</u> and <u>research publications</u>.

Menopause Health Program

Mapping the inevitable and inescapable middle-age female journey from internal body bonfire to out-of-the woods climacteric clearing

An interview with Kathryn Macaulay, MD, Director of the UC San Diego Menopause Health Program and Clinical Professor of Obstetrics and Gynecology at the University of California San Diego, sheds light on the evolving phases of menopause, myths, trends, and expectations. Dr. Macaulay is well versed in advising on woman wellness practices traversing perimenopause through the maelstrom to post-menopause. In the same vein as the "So long, farewell, Auf Wiedersehen" song from the classic film "The Sound of Music," menopausal women wave goodbye to their periods, period products, and monthly mood swings as they prepare for the menses-free calm ahead. Navigating this personal journey is best done with the guidance of an Obstetrics and Gynecology clinician and not alone due to the variable and unique individual experiences associated with this natural aging process.



Kathryn Macaulay, MD, Director of the Menopause Health Program (photo used with permission)

Tell us about your background and how you came to specialize in menopause:

Public cry origins

Spurred by the JAMA July 2002 publication "Risks and Benefits of Estrogen Plus Progestin in Healthy Postmenopausal Women" and subsequent heavily broadcasted trial results in the Women's Health Initiative Randomized Controlled Trial which concluded "overall health risks exceeded benefits from use of combined estrogen plus progestin for an average 5.2-year follow-up among healthy postmenopausal women." Increased risks of coronary heart disease, breast cancer, stroke and pulmonary embolism, were now associated with using hormone therapy, causing an uproar of worry about disease prevention.

Dr. Macaulay described the widespread implication of this news and social climate as her impetus to action:

"thousands of women stopped using hormone therapy and health care providers became risk adverse to prescribing hormones

– women were left with an unmet need to handle their menopause symptoms." – Kathryn Macaulay, MD

Before this point, hormone therapy was the standard treatment of menopause care. To address the needs of her patients, Dr. Macaulay rocket-launched the Menopause Health Program at UC San Diego in 2004 and it is going stronger than ever today with a large volume of new and returning patients.

In 2013, JAMA published a <u>sequel study</u> "The Women's Health Initiative Hormone Therapy Trials: Update and Overview of Health Outcomes During the Intervention and Post-Stopping Phases" which walked-back some of the early hormone therapy findings to re-assess quality of life measures, primary efficacy, and safety. Fence-straddled providers and patients were once again weighing hormone therapy risks and benefits.

CLINICAL INNOVATIONS

OBGYN & RS State-of-the-Art Programs Advance Patient Care

The bridleway path to clinic

When Dr. Macaulay was a junior faculty, the idea for a menopause program originated as her clinical project for the National

Center of Academic Leadership in Medicine (NCLAM) career development. Her professional goal was to start a menopause program and she came up with a brilliant clinical model that involved expansion with interdisciplinary providers. This program is dedicated to helping women sort out the pros and cons of using hormone therapy and is structured to spend more time with women consulting on menopause care. Dr. Macaulay and her clinic partner at the time, a now retired Nurse Practitioner, acquired esteemed knowledge on the ins and out of managing menopause, completing training through the North American Menopause Society (NAMS or new moniker The Menopause Society) and receiving menopause certification. This society is the authority writing menopause guidelines for providers. Credibility and reputation generated soaring demand as the extra certification designated the Menopause Health Program as a menopause specialty clinic listed on The Menopause Society's website.

What and When is Menopause with expert clinician Dr. Macaulay

MENOPAUSE JOURNEY MAP

An Expert Clinician Guide by
Kathryn Macaulay, MD, Menopause Health Director



Forties (40s)

Fifties (50s) Sixties (60s)



PERIMENOPAUSE

Menstrual cycle changes can start

Average age of perimenopause is ~47 yrs and perimenopause can last for several years (avg ~3-4 yrs)

Some women can start having perimenopausal symptoms like hot flashes and night sweats even before menstrual cycles start to change

Hormone levels (FSH, estradiol) can fluctuate widely so hormone testing typically not useful in this stage

Be mindful of mental health: depression and anxiety more likely to develop during perimenopause later in menopause

Don't forget to use contraception (if needed)-!!!! ovulatory cycles still occur erratically in perimenopause

MENOPAUSE

Menopause is reached after 12 consecutive months of amenorrhea, avg age 51-52 yrs

The good news:

- No more periods!!!
- No more birth control!!
- Mood, cognitive changes stabilize

VMS may start, median duration ~7-8 years but there are treatment options!

Hormone therapy, non-hormonal treatments

Safe time for most women to start HT

Start vitamin D, make sure diet is rich in calcium, and engage in weight bearing exercise at least 2x/week in addition to regular cardiovascular exercise)—for osteoporosis prevention

Consider getting a baseline DEXA (bone density scan) if +risk factors for osteoporosis

POSTMENOPAUSAL YEARS

"Smooth sailing"

Hot flashes have typically resolved

DEXA scan at age 65 (at the latest!)

Good time to wean off Hormone therapy, may no longer be needed for vasomotor symptoms

No more pap tests after age 65! (if you qualify to "age out" of screening)

UC San Diego

Department of Obstetrics, Gynecology & Reproductive Sciences

CLINICAL INNOVATIONS

OBGYN & RS State-of-the-Art Programs Advance Patient Care

Perimenopause Prep

Perimenopause is the stage leading up to menopause and begins in a women's late 40's – average age is around age 47 with an anticipated duration of transition to menopause of ~3 to 4 years. Signs of perimenopause:

- Irregular menstrual cycles
- Vasomotor symptoms (hot flashes and night sweats)
- Mood changes, irritability, worsening depression or anxiety
- Cognitive changes, impaired concentration and focus
- Decline in libido (sexual desire)
- Genitourinary symptoms, vaginal dryness

Menopause Milestone

Around 51-52 years of age, menopause arrives and is officially reached after 12 consecutive months of amenorrhea. (Though younger women can experience menopause if undergoing surgery to remove ovaries or due to chemo or radiation therapy). While not all women are bothered by menopause symptoms, common complaints associated with menopause include:

- Vasomotor symptoms (75-85% of women)
- Cognitive disruptions
- Irritability
- Weight gain
- Difficulty sleeping (insomnia, night sweats)
- Pain during intercourse, vaginal dryness, irritation
- Low libido
- Bone health concerns, osteoporosis



Postmenopause

Periods stop and many discomforting symptoms, like jumbled brain fog, abate. Risk for osteoporosis increases after estrogen levels decline permanently so women who have risk factors for osteoporosis should consider early screening (or if average risk, usual screening at age 65). Vaginal bleeding is not expected after menopause, so any postmenopausal bleeding should be evaluated by an Ob/Gyn.

Modern program momentum

Today, Dr. Macaulay is the primary provider seeing patients in the menopausal program and is searching for a Nurse Practitioner to join the program. She frequently collaborates with an Internal Medicine provider who is also trained in menopause when needed for management of medically complex menopausal patients. Her consultation practice is based in La Jolla and Encinitas, CA. The specialty program trains 3rd year Ob/Gyn residents, Internal Medicine interns rotating through Women's Health, and covers didactics for OBGYN 3rd year medical students and residents in Primary Care, Ob/Gyn and Psychiatry. Patients travel mostly from Southern California, Nevada, and Arizona for menopause treatment at UC San Diego.

Trends

"In the past year, we have seen renewed interest, an uptick in women in general – and in the media – discussing menopause out in the forefront." – Kathryn Macaulay, MD

Menopause is having a big moment and generational shift thanks to increased media coverage and celebrity highlights. Previously, the topic was taboo and women suffered silently. With newer research studies and a reversal of the hormones-as-harm messaging – more women than ever are coming in to see Dr. Macaulay to manage their symptoms, even women over 60. She notes, "While menopause is not reversible, it is a time for women to look at their overall health and make a plan for healthy aging moving forward." Menopause comes, it conquers, and life sails on. She directs to a fresh take in the wake of the initial hormone study with New York Times stories "5 Things to Know About Menopause and Hormone Therapy" article (Feb. 2023) and "Women have been Misled About Menopause" article (Feb. 2023). Turns out, risks aren't as high as initially publicized in healthy women within 10 years of menopause and under the age of 60. Many women in their 40s and 50s who are healthy and early in the menopause transition are candidates for hormone therapy. Consulting with an Ob/Gyn or menopause practitioner is recommended to discuss treatment options. Women over 60, while typically not candidates to start hormone therapy for the first time due to increased cardiovascular risks, can consider non-hormonal treatment options and targeted low dose hormonal therapies for vaginal symptoms.

CLINICAL INNOVATIONS

OBGYN & RS State-of-the-Art Programs Advance Patient Care

"While the media has been helpful in promoting the safety of hormone therapy, it is important for women who are years past the transition to menopause to understand that hormones may not be safe but other treatment options exist." – K. Macaulay, MD

Insights from our expert clinician, Dr. Macaulay. There are a large portion of women who are really symptomatic who can benefit from hormone therapy. Last year, viewership and publicity from media publications, including one by a journalist who gave the keynote address at the annual meeting of The Menopause Society in 2023, educated the lay public about where we are with hormone therapy and who is a safe candidate for using it. More providers are asking about using hormone therapies and want to talk about menopause and concerns about the risk. The general public has a better understanding, and there is less use of unapproved compounded hormones. There are safe FDA-approved "bioidentical" hormones and therefore, typically no need to prescribe/use unapproved hormone products from compounding pharmacies. A deleterious trend was seen where women were going to alternative providers –who weren't giving the safest forms of hormone therapies – and then facing potential risks. Interest in treating menopausal women grew after a study looked for other ways to treat symptoms.

Treatments

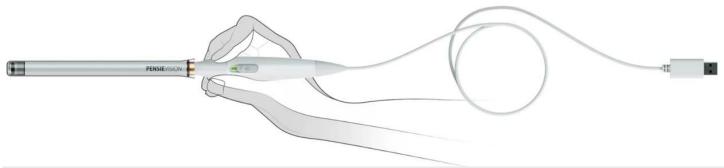
Dr. Macaulay discusses treatments for menopause. Since the 2002 study in hormone therapy, subsequent studies have shown safer routes for using estrogen such as transdermal preparations rather than oral estrogens. The safety profile for certain types of progestogens is also better understood, with micronized progesterone likely to be safer for breast and metabolic health compared to synthetic progestins. Bioidential, not synthetic, progesterone, lower doses for different estrogen gels and patches are used to customize treatment for menopause symptoms. There have been a lot of improvements and several studies looking at non-hormonal new products such as Fezolinetant (VEOZOAH brand name), a novel Neurokin 3 (NK3) receptor antagonist for treating menopausal vasomotor symptoms. The medication works in the thermoregulatory zone in the hypothalamus and was shown in clinical trials to be an effective treatment for hot flashes and night sweats. This provides an alternative for women who can't use hormone therapy such as women with estrogen sensitive breast cancer or history of deep vein thrombosis. Other non-hormonal alternatives include SSRI or SNRIs, a class of anti-depressant. Gabapentin and oxybutynin are other non-hormonal options used off label to treat vasomotor symptoms.

In sum, quality of life during menopause is best treated with the mantra of medicine for woman wellness – rest, healthy diet, and exercise. When these behaviors are not enough to reign in health concerns, a visit to the clinic could help create a custom treatment plan to lessen the burdens of menopause. Dr. Macaulay also educates her patients on preserving bone and cardiovascular health after menopause and encourages regular screenings for breast, cervical and colorectal cancers. After a longer initial consult and curated treatment plan which may involve prescribing medication, a follow-up visit takes place in 3-4 months, and then annually as needed. Patients are also encouraged to have a primary care doctor for other health issues that may arise during the postmenopausal years. Dr. Macaulay helps primary care doctors within the UC San Diego Health system manage their menopausal patients by providing electronic consults for appropriate patients. The growing clinic is seeking a new nurse practitioner with menopause certification.

<u>Discover more</u> about menopause treatment and <u>clinical studies</u> at UC San Diego Health. **Lastly, don't worry – it's not a mid**life crisis, it's just menopause and a new biological age!

RESEARCH COLLABORATIONS

Artificial Intelligence Advances Obstetrics and Gynecology Imaging



Rendering courtesy of Pensievision, Inc.: 3D imaging device to help detect cervical cancer

CervImage™ is a novel medical device and first-of-its-kind Artificial Intelligence 3D imaging system introduced to obstetrics and gynecology clinical research at UC San Diego Health by Jessica Kingston, MD, as a transformative innovation tool to detect and analyze cervical cancer lesions

Human ergonomic influenced slender cylindrical structure, sleek, and timeless industrial design meets groundbreaking functionality as CervImage™ technology imagined by Pensievision, Inc. takes center stage with a \$2M award from the NIH National Cancer Institute (NCI) to improve cervical cancer screening. Clinical tests using this handheld hardware are performed by Jessica Kingston, MD, Division Director of Obstetrics and Gynecology, as part of a phase II grant for the project "A Novel, Low-Cost, Handheld 3D Imaging System for Improved Screening of Cervical Neoplasia in Resource Limited Settings" based in the U.S., Kenya, and Malawi. Dr. Kingston played a pivotal role in advancing the starting star-launch Phase I, in-vivo, anonymous, 3D image next-generation testing as flight commander in her clinic here at UC San Diego. News Release.»

"Working with Joe Carson, PhD and the team has been exciting and rewarding. The technology they have developed and are advancing will hopefully improve the lives of many in low resource settings." – Jessica Kingston, MD

CLINICAL TRIAL UPDATE

Department of OBGYN & RS Pioneers Research in Urogynecology

Clinical Trial Recruitment

Beta-Agonist versus Botox A® Trial for Urgency Urinary Incontinence (BEST) Trial: Therapy for Urge Urinary Incontinence is recruiting at UC San Diego.



Las participantes pueden ser compensadas hasta \$425

¿Necesita ir al baño con frecuencia, con un deseo repentido de orinar que resulta en una fuga antes de llegar al baño?



Si la respuesta es sí, considere participar en el estudio BEST



(858) 657 6154

Escanee este código QR o e-mail
urogynrsch@health.ucsd.edu

UC San Diego Health

CULTURE & JUSTICE

OBGYN & RS Culture & Justice Quorum (CJQ) Spearheads Inclusive Excellence



UC San Diego 2024 Black Maternal Health Week Living Library and Reception

2024 Black Maternal Health Week with UC San Diego Black Pre-Med Society and Student National Medical Association (SNMA)

UC San Diego Health Birth Community Engagement & Symposia Series: "2024 Black Maternal Health Week: Living Library and Reception" hosted by the Department Culture and Justice Quorum (with Cynthia Gyamfi-Bannerman, MD, MS, Department Chair and Audra Meadows, MD, MPH, Vice Chair of Culture & Justice), UCSD Black Pre-Med Society, UCSD Student National Medical Association (SNMA) and community partners at the Ida & Cecil Green Faculty Club. Held annually April 11-17th, Black Maternal Health Week is a week-long campaign to build awareness, activism, and community to address maternal health and equity. The living library featured organizations, programs, and efforts across UCSD and the community that address Black Maternal Health. Guests shared strategies and solutions to mitigate inequities and achieve equity. Attendees were treated to one-to-one conversations presented as table "libraries" to ask questions and learn about southern California OB/GYN services.



Librarians

 $\textbf{Perinatal Quality Collaboratives:} \ \textbf{Audra Meadows, MD, MPH (UCSD)}$

Doula Support: Shani Cooper, DACM, LAc. CLEC (Root and Soul) **Clinical Research:** Cynthia Gyamfi-Bannerman, MD, MS (UCSD)

Healthy Start Programs: Leslie MacFarlane, BA, CBE, CLEC and Yuli Smith, LM, CPM, IBCLC

(San Diego County)

Midwifery Care: Erica Vu Hill, CNM, NP (UCSD)

Black Infant Health Program: Iris Payne, MPH, Director (San Diego County)

Maternal Health Programs: Lisa Bain, MPH (Global Communities, San Diego)

Postpartum "4th Trimester" Support: Ukachi Emeruwa, MD, MPH (UCSD)

Nursing Support: Brittany Daniels, BSN, RNC-OB (UCSD)

OBGYN Hospitalist Care: Mai Hoang, MD (UCSD)

Care Navigation Program: Eliza Garay, BA, Program Manager (UCSD OB Refugee & Asylee Care) **Public Health and Perinatal Equity Initiative:** Rhonda Freeman, MPH and Amanda Lowe-Du-

Bose, DrPH (San Diego County)

San Diego County Community Health Programs: Tasha Lewis, MPH and Sanya Campbell, MPH

CULTURE & JUSTICE

OBGYN & RS Culture & Justice Quorum (CJQ) Spearheads Inclusive Excellence

Conversations for Action

Audra Meadows, MD, MPH joined Mandy Cohen, MD, Director of CDC, Danielle Wright-Terrell, MD, OB/GYN and Founder of HONEY, Lucinda Canty, CNM, and Director of Seedworks Health Equity Program, and Alicia Bonaparte PhD Pitzer College Associate Professor of Sociology for a virtual Maternal Health Fair on April 19, 2024 hosted by Safer Births and Dr. Meadows will join CA Assembly member Dr. Akilah Weber (OBGYN), and Dr. Sylvia Cartwright, MD (Psychiatry) for the San Diego Links Inc. Maternal Health Program on April 27, 2024 to discuss her efforts to promote maternal safety, quality, and equity through the Perinatal Neonatal Quality Improvement Network of MA and at UC San Diego. Ukachi Emeruwa, MD, MPH, also presented on the Safer Birth Virtual Health Fair on April 12th discussing "Preeclampsia Perspectives: Insights for Mamas and Mamas-To-Be."

UC San Diego Health Obstetrics (OB) Refugee/Asylee Care Navigation Program Goods Drive

The OBGYN & RS <u>Culture and Justice Quorum</u>, UCSD Birth Community Engagement & Symposia Committee, Black Pre-Med Society, and UCSD Student National Medical Association sponsored a donation drive to benefit the UC San Diego Health Obstetrics (OB) <u>Refugee/Asylee Care Navigation Program</u> and to help eliminate barriers to obstetrics care by making healthcare more efficient, inclusive, and effective for our refugee and asylee patients. This program assists with providing pediatric care for a newborn including supplying baby care items (car seats, baby clothes, diapers, etc.) and works to advance equity for our patients in need. <u>Donations</u> are ongoing. Thank you for supporting this vital program.



At Your Cervix 2023-2024 Resident leads:

Diversity, Equity, & Inclusion Lead: Milli Desai, MD
Diversity, Equity, & Inclusion Lead: Rafa Ifthikhar, MD

Advocacy Lead: Kellie Schueler, MD

Community Engagement and Service Lead: Hayley Schultz, MD (Chief Resident)

This issue of Fimbria's At Your Cervix highlights resident-led initiatives

Updated treatment protocol for opiod use disorder in pregnancy

"UCSD OB/GYN resident physicians, alongside Labor and Delivery nurses and faculty, are leading the development and implementation of a protocol to better care for pregnant patients with opioid use disorder.

In San Diego and across California, Opioid Use Disorder (OUD) in pregnancy is a growing concern. Substance use disorders are chronic medical conditions, effective treatments are available, and recovery is possible. In response, the UCSD Women and Infant unit is introducing a new protocol aimed at optimizing care.

Medication-assisted treatment (MAT) is the preferred approach, offering benefits such as improved prenatal care adherence and reduced risks of preterm birth and opioid overdose. Buprenorphine, in particular, has shown improved outcomes.

Our updated protocol simplifies dose escalation based on patient-reported symptoms, aiming for quicker therapy initiation and higher retention rates.

As our resident team spearheads this initiative, we anticipate further improvements in maternal and neonatal outcomes and better healthcare of our local communities."

CULTURE & JUSTICE

OBGYN & RS Culture & Justice Quorum (CJQ) Spearheads Inclusive Excellence

ACOG Day of Recognition

UCSD OBGYN and RS residents, Dr. Milli Desai and Dr. Rafa Ifthikhar, took the lead in organizing the Department's Annual ACOG Betsey, Lucy, and Anarcha Days of Recognition on March 6, 2024. The event featured a discussion led by Dr. Sarah Averbach, focusing on the historical roots of racism within the field of OBGYN, as well as updates on the department's efforts towards promoting a culture of justice and inclusive excellence.

Please visit our <u>CJQ website</u> to discover more about our Culture and Justice Quorum.

INCOMING OBGYN & RS INTERNS

Welcome to the UC San Diego Health!



Alexandria Gonzalez University of Texas Rio Grande



Leilani Gutierrez-Palominos UC Los Angeles



Isabel Katlaps
Oregon Health &
Science University



Madison Kent UC Los Angeles



Grace Noonan
University of
Kansas



Harriet Rothschild UC San Francisco

NEW STAFF HIRES

Welcome to the Department of OBGYN & RS. We're delighted to have you join the team!





Alondra Salcedo, Helping Hands <u>Doula</u> Volunteer who spent her first day with UC San Diego attending the Black Maternal Health Week OBGYN & RS Living Library

WELCOME NEW RESEARCHERS and ADMINISTRATORS

UC San Diego research labs standout among the world's finest and we're grateful for our talented new Triton team members. A warm welcome to newly arriving lab members:



Rhea-Comfort Addo, PhD
Postdoctoral Scholar
Dr. Kathleen Fisch Lab



Axelle Annie Bouche, PhD
Postdoctoral Scholar
Dr. Marianna Alperin Lab



Jason Yang Research Associate Dr. Sasha Kauffman Lab

RECENT EVENTS

Department of OBGYN & RS Event Happenings, Member Gatherings, and Community Engagement





Society for Maternal-Fetal Medicine

Congratulations Cynthia Gyamfi-Bannerman, MD, MS on being named the 48th President of the Society for Maternal-Fetal Medicine at the annual SMFM pregnancy meeting held in National Harbor, MD.



Society of Gynecologic Oncology (SGO)

The OBGYN & RS Gynecological Oncology faculty Pratibha Binder, MD, Michael McHale, MD and Ramez Eskander, MD and fellows Elise Wilson, MD, Iona Bondre, MD, MPH, and Breanna Hill, MD presented contributions towards cures for Women's Cancer at the Society of Gynecologic Oncology (SGO) Annual Meeting held in San Diego, CA.

Department of OBGYN & RS Grand Rounds

Stella M. Dantas, MD, FACOG, President-Elect of the American College of Obstetrics and Gynecology, presented "Wellness and the Importance of Community, Belonging, and Connection" at the OBGYN & RS Grand Rounds. From left: Pratima Gupta, MD, MPH, Stella M. Dantas, MD, Cynthia Gyamfi-Bannerman, MD, MS, and Audra Meadows, MD, MPH



RECENT EVENTS Department of OBGYN & RS Event Happenings, Member Gatherings, and Community Engagement



American Institute for Ultrasound in Medicine UltraCon 2024 Conference (AIUM)

Tracy Anton, B.S., RDMS, RDCS, Vice President of AIUM Executive Committee, and Miaoying Fan, MS, RDMS presented at the AIUM Conference in Austin, Texas. From left: Lawrence Platt, MD (UCLA), Elena, Sinkovskaya, MD, PhD (EVMS, Norfolk), Tracy Anton, B.S., RDMS, RDCS (UCSD), Celeste Sheppard, MD (UT Austin), and Jay Pruetz, MD (Cedars Sinai)

MEDICAL EDUCATION

Summer Fundamental Critical Care Support Obstetrics with Scott Harvey, MD Register Now!

UC San Diego

Department of Obstetrics, Gynecology & Reproductive Sciences

FUNDAMENTAL CRITICAL CARE SUPPORT: OBSTETRICS



To Register: https://cvent.me/ZNwvKo

Conference Date: July 26-27, 2024

UCSD Simulation Training Center
UCSD Medical Education and Telemedicine Building

For more information contact
Scott Harvey, MD | sharvey@health.ucsd.edu



The Fundamental Critical Care Support (FCCS): Obstetrics course

is designed for intensivists and non-intensivists who may provide maternal/fetal critical care and for clinicians in obstetrics seeking additional education in critical care.

The FCCS-OB course provides a combination of didactic lectures and hands-on skills stations with an emphasis on pregnant patients. The two-day, comprehensive curriculum offers an approach to initial management of the critically ill obstetrics patient for providers not formally trained in critical care.

Participants will learn useful information about the extended care of critically ill obstetrics patients, especially care related to mechanical ventilation, monitoring, organ hypoperfusion and neurological support. Providers will receive guidance for acute problems encountered in the ICU and for sudden obstetrics patient deterioration.



Society of Critical Care Medicine
The Intensive Care Professionals

OPEN FACULTY POSITIONS

Department of OBGYN & RS is hiring new faculty committed to academic and clinical excellence

CLINICAL POSITIONS



Department of Obstetrics, Gynecology, & Reproductive Sciences

Director, Nurse-Midwifery Service

The Director of the Nurse-Midwife Service in the Department of OB/GYN and Reproductive Sciences, provides leadership over the Certified Nurse Midwives (CNM) that work in the Comprehensive Women's Health Program, as well as performing direct patient care.

The Director will work with Department Faculty and Business Office as well as Health System leadership. The Director is expected to develop and foster improvements of Nurse Midwifery care throughout the Health System. This individual will be the leader of the Nurse-Midwifery service with the responsibility for quality of patient care, education and customer satisfaction. These duties include:

- Ongoing development, revision and implementation of CNM Best Practices. This includes review and revision of CNM practice guidelines as necessary.
- Staff recruitment, onboarding, orientation, training, professional development and performance evaluations.
- Ensuring staffing of the outpatient and inpatient services, managing absences / time off requests as well as managing human resource issues.
- Assuring appropriate CNM and ancillary staffing of community clinics that Health System has contracts for CNM services.
- Overseeing quality of care, including reviewing and improving quality metrics as identified by Health System and responding to patient complaints.
- Provide CNM full scope (inpatient and outpatient) patient care.
- · Work collegially in a collaborative care model consulting physicians and specialists.
- Work within a family-centered and culturally sensitive mother-baby friendly philosophy of care.
- Participate in clinical education of medical students, residents, and other healthcare learners.
 Function as a liaison with Health System personnel including case management, financial
- counselors and social workers.

 Participate in community outreach activities and other duties as assigned.
- Promoting clinical investigation and supporting scholarly activities. A highly successful candidate
 will have an interest in research, quality initiatives and publishing research related to midwifery.

The Director will spend the majority of time (50% or more) achieving organizational objectives through the coordinated achievements of subordinate staff. Establishes departmental goals and objectives, functions with autonomy. Manages the accountability and stewardship of human, financial, and often physical resources in compliance with departmental and organizational goals and objectives. Ensures subordinate supervisors and professionals adhere to defined internal controls. Manages systems and procedures to protect departmental assets.

For questions, please reach out to Cynthia Gyamfi-Bannerman @ cgyamfibannerman@health.ucsd.edu .



Department of Obstetrics, Gynecology, & Reproductive Sciences

Faculty Positions in Obstetrics & Gynecology

Assistant, Associate or Full Professor

The Department of Obstetrics, Gynecology, and Reproductive Sciences (https://obgyn.ucsd.edu/index.html) at the University of California, San Diego (UCSD) is committed to academic excellence and diversity within the faculty, staff and student body and is seeking board certified physicians in Maternal-Fetal Medicine (MFM), Reproductive Endocrinology and Infertility (REI), Gynecologic Oncology (GynOnc), Female Pelvic Medicine and Reconstructive Surgery (FPMRS), Complex Family Planning (FP), Hospitalist, and General Obstetrics and Gynecology (OBGYN))

The successful candidates will be responsible for providing high quality training and teaching, clinical care of patients and/or research.

Candidates must have a MD or equivalent, PhD or MD/PhD in areas of OB/GYN & Reproductive Medicine or health related fields.

Candidates with a MD or equivalent must be Board eligible or Board certified in areas of OB/GYN & Reproductive Sciences. Candidates with a MD or equivalent must also be eligible for a California medical license or equivalent certification/permit as determined by the Medical Board of California.

Apply Link: https://apol-recruit.ucsd.edu/JPF03836

Appointment will be at the Assistant, Associate or Full Professor level and will be based on the candidate's background and experience.

A link to the full descriptions of each series is provided for your review.

HS Clinical Professor - see: http://www.ucop.edu/academic-personnel-programs/ files/apm/apm-278.pdf Clinical X Professor - see: http://www.ucop.edu/academic-personnel-programs/ files/apm/apm-270.pdf Adjunct Professor - see: http://www.ucop.edu/academic-personnel-programs/ files/apm/apm-280.pdf Adjunct Professor - see: http://wcop.edu/academic-personnel-programs/ files/apm/apm-280.pdf

Appointments may require candidates to be self-funded

As a member of the Health Sciences Compensation Plan, the appointee should be aware that there are limitations on outside professional activities, and clinical moonlighting is expressly prohibited. Additional information can be found here: https://www.ucop.edu/academic-personnel-programs/files/apm/apm-671.pdf

The posted UC Salary scales set the minimum pay at the appointment as determined by appointment type and if applicable, rank and/or step. The base pay range for this position is \$112,500-\$411,500. Salary is negotiated annually. Additional compensation may be available if the position includes membership in the Health Sciences Compensation Plan. UC Salary information can be found here: https://www.ucop.edu/academic-personnel-programs/compensation/2023-24-academic-salary-scales.html.



Department of Obstetrics, Gynecology, & Reproductive Sciences

Assistant, Associate or Full Clinical Professor in Reproductive Endocrinology and Infertility

The Department of Obstetrics, Gynecology, and Reproductive Sciences at the University of California, San Diego (UCSD) is seeking to expand its Reproductive Endocrinology and Infertility (REI) Division with the recruitment of a fellowship-trained, board certified REI OBGYN physician with outstanding clinical and leadership experience and skills. The current division members include nationally recognized leaders of the subspecialty dedicated to training the next generation of leaders in REI. The division engages in basic science, translational and clinical research. Division members provide inpatient and outpatient services including Assisted Reproductive Technology (ART) services.

This position, estimated to be 100% effort, may be in the HS clinical or Clinical X series at the Assistant, Associate or full Professor rank. Candidates should have a commitment to excellence in clinical care, patient safety, patient satisfaction, education, research and participate actively in these missions of the division. Candidates must be board certified in General Obstetrics & Gynecology and board certified in REI or board eligible, and must have or obtain an active license to practice medicine in California.

Ideal candidates should have clinical experience in the management of the full spectrum of REI. Interest in specific areas within REI, such as ART, is welcome. Applicants will be expected to practice clinical REI, teach students, train residents and fellows, mentor resident and fellow research projects and participate in administrative functions of the division, department and University.

The ideal candidate for this position is someone with:

- Demonstrated clinical, scholarship, and teaching skills with commitment to the tripartite mission
- Desire to explore innovative & new methods of care in REI including ART, and training of the next generation of REI specialists
- . The ability to develop and expand the clinical mission to neighboring communities
- . Goals to contribute to the education of medical students, OBGYN and REI fellows

Candidates are required to show a demonstrated commitment to diversity and equity by submitting a Diversity Statement of past contributions and/or future plans of excellence in this area as part of their application for an academic appointment.



OPEN FACULTY POSITIONS

Department of OBGYN & RS is hiring new faculty committed to academic and clinical excellence

CLINICAL POSITIONS



Department of Obstetrics, Gynecology, & Reproductive Sciences

Associate or Full Clinical Professor in Urogynecology and Reconstructive Pelvic Surgery

The Department of Obstetrics, Gynecology, and Reproductive Sciences at the University of California, San Diego (UCSD) is seeking to expand its Female Pelvic Medicine and Reconstructive Surgery (FPMRS) Division with the recruitment of a fellowship-trained, board certified FPMRS OBGYN physician with outstanding clinical and leadership experience and skills. The current division members include nationally recognized leaders of the subspecialty dedicated to training the next generation of leaders in FPMRS. The division shares residency/fellowship training and research activities with colleagues at Kaiser Permanente, San Diego. The division engages in basic science research (which includes pelvic floor physiology), translational research (Urobiome) and clinical research with membership in NIH sponsored networks (e.g. Prevention of Lower Urinary Tract Symptoms (PLUS) and Pelvic Floor Disorders Network (PFDN). Division members collaborate in a multi-disciplinary environment with FPMRS board certified/eligible urologists, who share in the clinical, educational and research missions providing outpatient services at three locations in San Diego County and surgical care at the Jacobs Medical Center in La Jolla. The division plans to expand these services to satellite clinics in outlying San Diego County regions.

This position, estimated to be 100% effort, may be in the HS clinical or Clinical X series at the Associate Professor or full Professor rank. Candidates should have a commitment to excellence in clinical care, patient safety, patient satisfaction, education, research and participate actively in these missions of the division. Candidates must have a MD or MD/PhD, be board certified in general Obstetrics & Gynecology and board certified in FPMRS, eligible for appointment at the Associate Professor/Professor level and must have or obtain an active license to practice medicine in California.

The candidate should demonstrate an eagerness to collaboratively engage as the co-clinical medical director in our multidisciplinary outpatient Women's Pelvic Medicine Center and have the ability to direct the FPMRS fellowship program jointly administered by UC San Diego and Kaiser Permanente. Ideal candidates should have clinical experience in the management of the full spectrum of pelvic floor disorders including vaginal, abdominal and minimally invasive surgical approaches. Applicants will be expected to practice clinical FPMRS, teach students, train residents and fellows, mentor resident and fellow research projects, mentor junior faculty and participate in administrative functions of the division, department and University. Spanish fluency preferred.

The ideal candidate for this position is someone with:

- · At least 4 years post fellowship experience
- Demonstrated scholarship and leadership skills
- Desire to collaborate with a well-established and highly functioning multidisciplinary, multispecialty team of gynecology and urology trained FPMRS specialist
- Interested in developing and refining leadership skills from a team of nationally known faculty and clinical leaders
- Desire to explore innovative & new methods of care in FPMRS, and training of the next generation of FPMRS specialists
- The ability to develop and expand the clinical mission to neighboring communities
 Goals to contribute to the education of medical students, OBGYN and urology residents,
- and FPMRS fellows

Candidates are required to show a demonstrated commitment to diversity and equity by submitting a Diversity Statement of past contributions and/or future plans of excellence in this area as part of their application for an academic appointment.

Interested Applicants must submit a CV, contact information of 3 references, and a separate statement summarizing past or potential contributions to diversity.

Please apply using this job application portal: https://apol-recruit.ucsd.edu/JPF03335

The University of California is an Equal Opportunity/Affirmative Action Employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability, age or protected veteran status.

For questions regarding the position, please contact Emily Lukacz, MD, Division Director, Female Pelvic Medicine & Reconstructive Surgery: elukacz@health.ucsd.edu



RESEARCH POSITIONS



Department of Obstetrics, Gynecology, & Reproductive Sciences

Research Faculty Positions for the Center of Perinatal Discovery

Assistant, Associate or Full Professor

The Department of Obstetrics, Gynecology & Reproductive Sciences (https://obgyn.uesd.edu/index.html) at the University of California San Diego is committed to academic excellence and diversity within the faculty, staff and student body and is seeking applicants for tenure-track OB/GYN research faculty positions.

The Department is comprised of 69 faculty members (53 clinical faculty (including 8 physician scientists) and 16 PhD researchers). We are currently ranked 3rd among OB/GYN Departments in NIH funding and have active research programs in placental biology, exRNA biology, early embryo development, PCOS, stress, neuroendocrine control of reproduction, spermatogenesis, ovarian cancer, pelvic floor muscle physiology, contraception, and the reproductive microbiome. The selected candidates will benefit from the highly stimulating and collaborative environment within the department.

The successful candidates will be a member of the UCSD Center for Perinatal Discovery. The overarching mission of the center is to advance pregnancy and newborn health through collaborative placental research. The Department is interested in candidates with a commitment to research excellence and participation in teaching, research, service, and in building an equitable and diverse scholarly environment.

The selected candidates will be responsible for training and teaching, basic or translational research, and/or the clinical care of patients.

Candidates must have a MD or equivalent, or PhD in areas of Reproductive Sciences or other health related fields. Candidates with a MD must be Board certified or Board eligible in OB/GYN or related fields. Candidates with a MD or equivalent must also be eligible for a California medical license or equivalent certification/permit as determined by the Medical Board of California.

Assistant Professor (tenure-track): Candidates must have a current research program in a discipline relevant to Women's Health with a track record of obtaining extramural funding and productivity with regard to peer-reviewed publications.

Associate or Full Professor (tenured): Candidates must have a current research program in a discipline relevant to Women's Health with a track record of obtaining substantial extramural funding and high productivity with regard to peer-reviewed publications.

Candidates with a research background in reproductive immunology/infectious disease, endometrial biology, or biomedical informatics are preferred.

The appointment at the Assistant, Associate or Full Professor level will be based on the candidate's background and experience. Series will include 50% Ladder Rank / 50% In-Residence with secured extramural funding or 100% Ladder Rank.

A link to full descriptions of each series is provided for your review:

Ladder Rank Professor - see: http://www.ucop.edu/academic-personnel-programs/ files/apm/apm-220.pdf In-Residence Professor - see: http://www.ucop.edu/academic-personnel-programs/ files/apm/apm-270.pdf

Associate or Full Professor (tenured): Applications must be submitted through the University of California San Diego's Academic Personnel RECRUIT system at: https://apol-recruit.uesd.edu/apply/JPF03672

As a member of the Health Sciences Compensation Plan, the appointee should be aware that there are limitations on outside professional activities, and clinical moonlighting is expressly prohibited. Additional information can be found here: https://www.ucop.edu/academic-personnel-programs/ files/apm/apm-671.pdf

The posted UC Salary scales set the minimum pay at the appointment as determined by appointment type and if applicable, rank and/or step. The base pay range for this position is \$106,900 - \$284,100. Salary is negotiated annually. Additional compensation may be available if the position includes membership in the Health Sciences Compensation Plan. UC Salary information can be found here: https://www.ucop.edu/academic-personnel-programs/compensation/2022-23-academic-salary-scales.html

As a University employee, you will be required to comply with all applicable University policies and/or collective bargaining agreements, as may be amended from time to time. Federal, state, or local government directives may impose additional requirements.

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The University of California, San Diego is an Equal Opportunity/Affirmative Action Employer advancing inclusive excellence. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, age, covered veteran status, or other protected categories covered by the UC nondiscrimination policy.

OPEN FACULTY POSITIONS

Department of OBGYN & RS is hiring new faculty committed to academic and clinical excellence

RESEARCH POSITIONS



Department of Obstetrics, Gynecology, & Reproductive Sciences

Biostatistics Research Faculty in Obstetrics, Gynecology, & Reproductive Sciences

Assistant, Associate or Full Professor

The Department of Obstetrics, Gynecology, and Reproductive Sciences (https://obgyn.ucsd.edu) at the University of California, San Diego (UCSD) is committed to academic excellence and diversity within the faculty, staff, student body, and is recruiting Biostatisticians to join the department's research faculty to support our research programs across the 7 divisions of the department.

In partnership with the Director of Epidemiology and Biostatistics Core, this position will develop a sustainable departmental analytics program. In addition, the biostatistics research faculty will serve as a resource for other faculty and trainees in study design, power calculations, statistical analysis, grant and abstract, and manuscript preparation.

The successful candidates will be expected to develop an independent program of methodological research in their area of interest, while cultivating collaborations with researchers in the department. The selected candidates will be responsible for designing, executing and analyzing data from clinical trials, implementation science projects, and epidemiologic investigations. Duties include statistical design of studies, development of new statistical methodology, statistical analysis of results, mentorship/teaching o trainees, and preparation of statistical and scientific reports and publications.

Candidates must have a PhD in biostatistics or other relevant areas.

Candidates must have a current research program with a track record of obtaining extramural funding and productivity with regard to peer-reviewed publications.

Candidates must also have a track record of teaching and mentorship activities.

Candidates with a current research program in a discipline relevant to Reproductive Health is preferred.

Apply Link: https://apol-recruit.ucsd.edu/JPF03743

Appointment will be at the Assistant, Associate or Full Professor level and will be based on the candidate's background and experience.

A link to the full description of the Adjunct series is provided for your review: Adjunct Professor – see: http://ucop.edu/academie-personnel-programs/_files/apm/apm-280.pdf

As a member of the Health Sciences Compensation Plan, the appointee should be aware that there are limitations on outside professional activities, and clinical moonlighting is expressly prohibited. Additional information can be found here: https://www.ucop.edu/academic-personnel-programs/files/apm/apm-67 and the programs of the state of th

The posted UC Salary scales set the minimum pay at the appointment as determined by appointment type and if applicable, rank and/or step. The base pay range for this position is \$112,500–\$297,200. Salary is negotiated annually. Additional compensation may be available if the position includes membership in the Health Sciences Compensation Plan. UC Salary information can be found here:

https://www.ucop.edu/academic-personnel-programs/compensation/2022-23-academic-salary-scales.html

Appointments may require candidates to be self-funded

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Department of Obstetrics, Gynecology, & Reproductive Sciences

Obstetrics, Gynecology, and Reproductive Sciences Research Faculty Positions

Assistant, Associate or Full Professor

The Department of Obstetrics, Gynecology & Reproductive Sciences (https://obgyn.ucsd.edu/index.html) at the University of California San Diego is committed to academic excellence and diversity within the faculty, staff and student body and is seeking applicants for tenure-track basic science faculty positions.

We are currently ranked 3rd among OB/GYN Departments in NIH funding and have active research programs in neuroendocrine control of reproduction, circadian rhythms, puberty, placental biology, exRNA biology, PCOS, stress, spermatogenesis, early embryo development, gynecologic cancer, pelvic floor muscle physiology, infertility, contraception, and the reproductive microbiome.

The Department is interested in candidates who have a commitment to research excellence, and participation in teaching, research, service, and in building an equitable and diverse scholarly environment. The successful candidates will benefit from the highly stimulating and collaborative environment within the department.

The selected candidates will be responsible for teaching, research and service.

Candidates must have a PhD, MD/PhD, MD or equivalent, or terminal degree in areas of Reproductive Sciences or other health related fields.

Assistant Professor (tenure-track): Candidates must also have a current research program in a discipline relevant to Obstetrics, Gynecology & Reproductive Sciences with a track record of obtaining extramural funding and productivity with regards to peer-reviewed publications.

Associate or Full Professor (tenured): Candidates must also have a current research program in a discipline relevant to Obstetrics, Gynecology & Reproductive Sciences with a track record of obtaining substantial extramural funding and high productivity with regards to peer-reviewed publications.

The appointment at the Assistant, Associate or Full Professor level will be based on the candidate's background and experience. Series will include 50% Ladder Rank / 50% In-Residence with secured extramural funding or 100% Ladder Rank.

A link to full descriptions of each series is provided for your review:

 $Ladder\ Rank\ Professor - see: \ \underline{http://www.ucop.edu/academic-personnel-programs/\ files/apm/apm-220.pdf} \ In-Residence\ Professor - see: \ \underline{http://www.ucop.edu/academic-personnel-programs/\ files/apm/apm-270.pdf} \ Archive the residence \ \underline{http://www.ucop.edu/academic-personnel-programs/\ files/apm/apm-270.pdf} \ Archiv$

Assistant Professor (tenure-track): Applications must be submitted through the University of California San Diego's Academic Personnel RECRUIT system at: https://apol-recruit.ucsd.edu/apply/JPF03669

 $\label{lem:associate or Full Professor (tenured): Applications must be submitted through the University of California San Diego's Academic Personnel RECRUIT system at: $$ https://apol-recruit.uesd.edu/apply/JPF03670$$ and $$ https://apol-recruit.uesd.edu/apply/J$

As a member of the Health Sciences Compensation Plan, the appointee should be aware that there are limitations on outside professional activities, and clinical moonlighting is expressly prohibited. Additional information can be found here: https://www.ucop.edu/academic-personnel-programs/files/apm/apm-671.pdf

The posted UC Salary scales set the minimum pay at the appointment as determined by appointment type and if applicable, rank and/or step. The base pay range for this position is \$106,900 - \$284,100. Salary is negotiated annually. Additional compensation may be available if the position includes membership in the Health Sciences Compensation Plan. UC Salary information can be found here: https://www.ucop.edu/academie-personnel-programs/compensation/2022-23-academie-salary-scales.html.

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