35 years in service to you, our community of reproductive health care clinicians

In January 2023, OBG Management begins its 35th year of publication, in service to our readers and their patients



Robert L. Barbieri, MD

Editor in Chief, OBG MANAGEMENT
Chair Emeritus, Department of Obstetrics and Gynecology
Brigham and Women's Hospital
Kate Macy Ladd Distinguished Professor of Obstetrics,
Gynecology and Reproductive Biology
Harvard Medical School

he mission of OBG Management is to enhance the quality of reproductive health care and the professional development of obstetrician-gynecologists and all reproductive health care clinicians. As we celebrate the beginning of our 35th anniversary year, we recommit to our mission, providing the highest quality reproductive health information in both print and electronic portals. Guiding all our actions is our deep commitment to being worthy of the trust of our readers.

Boston, Massachusetts

OBG MANAGEMENT is one of the most widely-read publications dedicated to obstetrician-gynecologists. We recognize that it is difficult for clinicians to keep up with the vast and growing corpus of information that is relevant to clinical practice. A priority goal of OBG MANAGEMENT is to ensure our readers are aware of practice-changing information. The OBG MANAGEMENT Board of Editors guide all aspects of the editorial

The author reports no conflict of interest related to this article.

doi: 10.12788/obgm.0255

work at OBG MANAGEMENT, alerting us to upcoming practice-changing discoveries, including new research findings, new medications, and important guidelines. As we begin our 35th anniversary year, we would like to highlight our distinguished Board of Editors. Of note, this year, Dr. Cheryl B. Iglesia was named as Deputy Editor, with an expanded responsibility to curate the gynecology content for OBG MANAGEMENT.

We wish all our readers a wonderful New Year and the best health possible for our patients.

RBARBIERI@MDEDGE.COM

Arnold P. Advincula, MD



I serve on the executive board that oversees the Fellowships in Minimally Invasive Gynecologic Surgery (FMIGS), and in

January 2023 will transition into the role of President. I bring to this leadership role nearly 25 years of surgical experience, both as a clinician educator and inventor. My goal during the next 2 years will be to move toward subspecialty recognition of Complex Gynecology.

Linda D. Bradley, MD



My passion is diagnostic and operative hysteroscopy, simple procedures that can both evaluate and treat intra-

uterine pathology. Recently, I was thrilled to coauthor an article on office hysteroscopy for Obstetrics & Gynecology (September 2022). I will have a chapter on operative hysteroscopy in the 2023 edition of TeLinde's Textbook of Gynecology, and I am an author for the topic Office and Operative Hysteroscopy in UpToDate. Locally, I am known as the "foodie gynecologist"-I travel, take cooking classes, and I have more cookbooks than gynecology textbooks. Since Covid, I have embraced biking and just completed a riverboat biking cruise from Salamanca, Spain, to Lisbon, Portugal.

Amy L. Garcia, MD



I am fellowship trained as a minimally invasive gynecologic surgeon (MIGS) and have had a private surgical practice since

2005. I am involved with The American College of Obstetricians and Gynecologists (ACOG), AAGL, and international surgical education for office hysteroscopy and related practice management. I am passionate about working with start-up companies in the gynecologic medical device arena and innovation in gynecologic surgery.

Steven R. Goldstein, MD, NCMP, CCD



I just completed my term as President of the International Menopause Society. This culminated in the society's 18th

World Congress in Lisbon, attended by over 1,700 health care providers from 76 countries. I delivered the Pieter van Keep Memorial Lecture, named for one of the society's founders who died prematurely of pancreatic cancer. I was further honored by receiving the society's Distinguished Service Award. I am very proud to have previously received the NAMS Thomas B. Clarkson award for Outstanding Clinical and Basic Science Research in Menopause. I also have one foot in the gynecologic ultrasound world and was given the Joseph H. Holmes Pioneer Award and was the 2023 recipient of the William J. Fry Memorial Lecture Award, both from the American Institute of Ultrasound in Medicine, having written the second book ever on vaginal ultrasonography.

On a personal level, I love to play golf (in spite of my foot drop and 14 orthopedic surgeries). My season tickets show some diversity—the New York City Ballet and St. John's basketball.

Cheryl B. Iglesia, MD



I am the 49th president of the Society of Gynecologic Surgeons, the 5th woman to hold this position, and the first of

Filipino-American descent. I recognize that it is only through extraordinary mentorship and support from other giants in gynecology, like Drs. Andrew Kaunitz (fellow OBG MANAGEMENT Board member), Linda Brubaker, and Dee Fenner and the love, support, and encouragement of my parents, husband, and daughters that I have been able to reach this milestone. A feather in my cap is the recent appointment to Deputy Editor of Gynecology for this journal, under the tutelage of Dr. Robert Barbieri. Over the pa st 31 years, I have had the privilege of learning from the best experts and gynecologic surgeons and the honor of working with skilled partners as we pass on our collective knowledge to our fellows, residents, and medical students. The passion in this next generation of ObGyns is so invigorating!

PS—In the spirit of continually learning, I want to add the Argentine tango to my dancing repertoire and go on an African safari; both are on my bucket list as the pandemic eases.

Andrew M. Kaunitz, MD, NCMP



Since starting with the University of Florida College of Medicine-Jacksonville in 1984, I have enjoyed caring for

patients, training residents and medical students, and being involved with publications and research. My areas of focus are menopause,

contraception, gyn ultrasound and evaluation/management of women with abnormal uterine bleeding. In 2020, I received the North American Menopause Society/Leon Speroff Outstanding Educator Award. In 2021, I received the ACOG Distinguished Service Award. I enjoy spending time with my family, neighborhood bicycling, and searching for sharks' teeth at the beach.

Barbara Levy, MD



I have been privileged to serve on the OBG MANAGEMENT Editorial Board for several decades. I am passionate about

delivering the best possible care for the patients we serve, and helping women's health care professionals provide that care. Through positions at AAGL, ACOG, and the American Medical Association, I have worked hard to champion best practices and to support fair, equitable, and accessible care for our patients and reimbursement for our services. My true north is to base patient care on reliable, valid, and properly interpreted data.

David G. Mutch, MD



I am ending my 6-year term as Chair of the National Cancer Institute's (NCI) gynecologic cancer steering commit-

tee. That is the committee that vets all NCI-sponsored clinical trials in gynecologic oncology. I am on the International Federation of Gynecology and Obstetrics (FIGO) Cancer committee, Co-Chair of the American Joint Committee on Cancer gyn staging committee and on the Reproductive Scientist Development Program selection committee. I also

Looking over the horizon to the future of obstetrics and gynecology

I asked our distinguished Board of Editors to identify the most important changes that they believe will occur over the next 5 years, influencing the practice of obstetrics and gynecology. Their expert predictions are summarized below.

Arnold Advincula, MD

As one of the world's most experienced gynecologic robotic surgeons, the role of this technology will become even more refined over the next 2-5 years with the introduction of sophisticated image guidance, "smart molecules," and artificial intelligence. All of this will transform both the patient and surgeon experience as well as impact how we train future surgeons.

Linda Bradley, MD

My hope is that a partnership with industry and hysteroscopy thought leaders will enable new developments/technology in performing hysteroscopic sterilization. Conquering the tubal ostia for sterilization in an office setting would profoundly improve contraceptive options for women. Conquering the tubal ostia is the last frontier in gynecology.

Amy Garcia, MD

I predict that new technologies will allow for a significant increase in the number of gynecologists who perform inoffice hysteroscopy and that a paradigm shift will occur to replace blind biopsy with hysteroscopy-directed biopsy and evaluation of the uterine cavity.

Steven Goldstein, MD, NCMP, CCD

Among the most important changes in the next 5 years, in my opinion, will be in the arenas of precision medicine, genetic advancement, and artificial intelligence. In addition, unfortunately, there will be an even greater movement toward guidelines utilizing algorithms and clinical pathways. I leave

you with the following quote:

"Neither evidence nor clinical judgement alone is sufficient.

Evidence without judgement can be applied by a technician.

Judgement without evidence can be applied by a friend. But the integration of evidence and judgement is what the healthcare provider does in order to dispense the best clinical care."

-Hertzel Gerstein, MD

Cheryl Iglesia, MD

Technology related to minimally invasive surgery will continue to change our practice, and I predict that surgery will be more centralized to high volume practices. Reimbursements for these procedures may remain a hot button issue, however. The materials used for pelvic reconstruction will be derived from autologous stem cells and advancements made in regenerative medicine.

Andrew Kaunitz, MD, NCMP

As use of contraceptive implants and intrauterine devices continues to grow, I anticipate the incidence of unintended pregnancies will continue to decline. As the novel gonadotropin-releasing hormone (GnRH) antagonists combined with estrogen-progestin add-back grow in use, I anticipate this will provide our patients with more nonsurgical options for managing abnormal uterine bleeding, including that associated with uterine fibroids.

Barbara Levy, MD

Quality will be redefined by patient-defined outcome measures that assess what matters to the people we serve. Real-world evidence will be incorporated to support those

am completing my term as Chair of the Foundation for Women's Cancer; this is the C3, charitable arm, of the Society of Gynecologic Oncology. We have distributed more than \$3.5 million to young investigators to help start their research careers in gynecologic oncology.

Errol R. Norwitz, MD, PhD, MBA



I am a physicianscientist with subspecialty training in high-risk obstetrics (maternal-fetal medicine). I was born

and raised in Cape Town, South Africa, and I have trained/practiced in 5 countries on 3 continents. My research interests include the pathophysiology, prediction, prevention, and management of pregnancy complications, primarily preterm birth and preeclampsia. I am a member of the Board of Scientific Counselors of the National Institute of Child Health and Human Development. I am currently President & CEO of Newton-Wellesley Hospital, a comprehensive community-based academic medical center and a member of the Mass General Brigham health care system in Boston, Massachusetts.

Jaimey Pauli, MD



I am the Division Chief and Professor of Maternal-Fetal Medicine (MFM) at the Penn State College of Medicine and

Penn State Health Milton S. Hershey Medical Center. I had exceptional mentoring throughout my medical career, particularly by a former member of the Editorial Board, Dr. John T. Repke. One of the biggest perks of my job is that our division provides measures and provide data on patient outcomes in populations not studied in the randomized controlled trials on which we have created guidelines. This will help to refine guidelines and support more equitable and accessible care.

David Mutch, MD

Over the next 5 years, our expanding insights into the molecular biology of cancer will lead to targeted therapies that will yield better responses with less toxicity.

Errol R. Norwitz, MD, PhD, MBA

In the near future we will use predictive AI algorithms to:
1) identify patients at risk of adverse pregnancy events;
2) stratify patients into high-, average-, and low-risk; and
3) design a personalized obstetric care journey for each patient based on their individualized risk stratification with a view to improving safety and quality outcome metrics, addressing health care disparity, and lowering the cost of care.

Jaimey Pauli, MD

I predict (and fervently hope) that breakthroughs will occur in the prevention of two of the most devastating diseases to affect obstetric patients and their families—preterm birth and preeclampsia.

JoAnn Pinkerton, MD, NCMP

New nonhormone management therapies will be available to treat hot flashes and the genitourinary syndrome of menopause. These treatments will be especially welcomed by patients who cannot or choose not to take hormone therapy. We should not allow new technology to overshadow the patient. We must remember to treat the patient with the condition, not just the disease. Consider what is important to the individual woman, her quality of life, and her ability to

function, and keep that in mind when deciding what therapy to suggest.

Joseph S. Sanfilippo, MD, MBA

Artificial intelligence will change the way we educate and provide patient care. Three-dimensional perspectives will cross a number of horizons, some of which include:

- advances in assisted reproductive technology (IVF), offering the next level of "in vitro maturation" of oocytes for patients heretofore unable to conceive. They can progress to having a baby with decreased ovarian reserve or in association with "life after cancer."
- biogenic engineering and bioinformatics will allow correction of genetic defects in embryos prior to implantation
- the surgical arena will incorporate direct robotic initiated procedures and bring robotic surgery to the next level
- with regard to medical education, at all levels, virtual reality, computer-generated
 3-dimensional imaging will provide innovative tools.

James Simon, MD, CCD, IF, NCMP

Medicine's near-term future portends the realization of truly personalized medicine based upon one's genetic predisposition to disease, and intentional genetic manipulation to mitigate it. Such advances are here already, simply pending regulatory and ethical approval. My concern going forward is that such individualization, and an algorithm-driven decision-making process will result in taking the personal out of personalized medicine. We humans are more than the collected downstream impact of our genes. In our quest for advances, let's not forget the balance between nature (our genes) and nurture (environment). The risk of forgetting this aphorism, like the electronic health record, gives me heartburn, or worse, burnout!

full-scope MFM care. While I often serve as the more traditional MFM consultant and academic educator, I also provide longitudinal prenatal care and deliver many of my own patients, often through subsequent pregnancies. Serving as a member of the Editorial Board combines my passion for clinical obstetrical care with my talents (as a former English major) of reading, writing, and editing. I believe that the work we do provides accessible, evidence-based, and practical guidance for our colleagues so they can provide excellence in obstetrical care.

JoAnn Pinkerton, MD, NCMP



I am a Professor of Obstetrics and Gynecology and Division Chief of Midlife Health at the University of

Virginia (UVA) Health. Passionate about menopause, I am an executive director emeritus of The North American Menopause Society (NAMS) and past-President of NAMS (2008-2009). Within the past few years, I have served as an expert advisor for the recent ACOG Clinical Practice Guidelines on Osteoporosis,

the NAMS Position Statements on Hormone Therapy and Osteoporosis, and the Global Consensus on Menopause and Androgen Therapy. I received the 2022 South Atlantic Association of Obstetricians and **Gynecologists Lifetime Achievement** Award for my expertise and work in menopause and the NAMS 2020 Ann Voda Community Service Award for my biannual community educational symposiums. I remain active in research, currently the lead and UVA principal investigator for the Oasis 2 multicenter clinical trial, which is testing a neurokinin receptor

EDITORIAL

antagonist as a nonhormone therapy for the relief of hot flashes. Serving on the OBG MANAGEMENT Editorial Board is an honor that allows me to use my expertise in menopause management and hormone therapy to provide practical, evidence-based guidance for clinicians.

Joseph S. Sanfilippo, MD, MBA



I feel honored and privileged to have received the Golden Apple Teaching Award from the University of Pittsburgh School

of Medicine. I am also fortunate to be the recipient of the Faculty Educator of the Month Award for resident teaching. I have been named Top Doctor 20 years in a row. My current academic activities include, since 2007, Program Director for Reproductive Endocrinology & Infertility Fellowship at the University of Pittsburgh and Chair of the Mentor-Mentee Program at University of Pittsburgh Department of Obstetrics, Gynecology & Reproductive Sciences. I am Guest Editor for the medical malpractice section of the journal Clinical Obstetrics and Gynecology. Recently, I completed a patient-focused book, "Experts Guide to Fertility," which will be published in May 2023 by J Hopkins University Publisher and is designed for patients going through infertility treatment. Regarding outside events, I enjoy climbing steep hills and riding far and wide on my "electric bike." Highly recommend it!

James Simon, MD, CCD, IF, NCMP



It's been an honor serving on the OBG MANAGEMENT Board for many years, as a boardcertified obstetri-

cian/gynecologist/reproductive

endocrinologist, certified menopause practitioner, and sexuality counsellor. Nicknamed "The Menopause Whisperer" by Washingtonian Magazine, my solo, private practice, IntimMedicine Specialists®, one of the few such practices remaining in Washington, DC, is about 6 blocks from the White House. By virtue of my practice's location, I care for women at the highest levels of government seeking personalized gynecological, menopause, and sexual medicine care. Some high-powered patients believe they have all the answers even before I open my mouth, so I just fall back on my experience as both the President of NAMS, and The International Society for the Study of Women's Sexual Health, or principal investigator on more than 400 clinical research trials, or Chief Medical Officer of a pharmaceutical company, or author of more than 800 publications. I love what I do every day and cannot imagine slowing down or stopping.