

Surveying OB/GYN Prescribing Practices For Postpartum Patients

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Background

- My Practicum Site was the University Hospitals Department of Urology (11100 Euclid Ave Cleveland, OH 44106)
- Dr. Rachel Pope has a research focus on addressing barriers to women's sexual and reproductive health care
- In her research regarding topical estrogen for various OB/GYN patient groups, I assisted in examining practices involving postpartum patients

Population

The population of focus is postpartum patients who experience vaginal atrophy and OB/GYN providers who treat these patients. I aimed to serve this community by developing a survey to examine provider perspectives on the use of topical estrogen.

Learning Objectives

1. Identify current available treatment for vaginal atrophy and examine current studies discussing topical estrogen as a potential treatment option
2. Understand and organize pertinent information for IRB documentation and exemption submission
3. Develop and apply surveying methodology to evaluate provider perspectives effectively

Activities

- Conduct a literature review of current treatment options for vaginal atrophy based on clinical trials and the specific needs of postpartum patients
- Identify inclusion criteria for the study's scope
- Meet with Dr. Sarah Koopman Gonzalez to understand surveying methods and how to evaluate attitudes through follow-up questions
- Organize survey questions and options to maximize participation
- Utilize RedCAP to view and obtain participant responses

Methods

A forty-three question survey with percentage ranges, multiple choice, and select all that apply responses were designed. This survey was posted on the "OMG" Facebook group. Questions were designed to confirm practice standards and identify gaps within reasoning for/against topical estrogen use and typical practices with postpartum patients.

Excerpt of survey questions and response choices

| | | | |
|---|--|---|---|
| 18) 11. During appointments with postpartum patients, what percent of time do you ask about mental health/depression? | <input type="radio"/> +90% <input type="radio"/> 80-90% <input type="radio"/> 60-80% <input type="radio"/> Under 50% | 33) 24. If you have a patient with postpartum vaginal pain outside the context of vaginal intercourse, how do you treat them? (select all that apply) | <input type="checkbox"/> No treatment <input type="checkbox"/> Behavioral/ lifestyle management <input type="checkbox"/> Over the counter products <input type="checkbox"/> Vaginal laser therapy <input type="checkbox"/> Prescription vaginal hormone therapy <input type="checkbox"/> Pelvic floor Physical therapy <input type="checkbox"/> Other: _____ |
| 19) 12. During your postpartum visit, what percentage of the time do you ask about lactation? | <input type="radio"/> +90% <input type="radio"/> 80-90% <input type="radio"/> 60-80% <input type="radio"/> Under 50% | 35) 25. Do you routinely prescribe vaginal estrogen for women with third and fourth degree lacerations/ tears? | <input type="radio"/> Yes <input type="radio"/> No <input type="checkbox"/> I don't see patients with these tears in follow up |
| 20) 13. During appointments with postpartum patients, what percent of time do you ask about vaginal irritation/bothersome symptoms? | <input type="radio"/> +90% <input type="radio"/> 80-90% <input type="radio"/> 60-80% <input type="radio"/> Under 50% | 36) 26. If you prescribe vaginal hormone therapy in general (to any patient), select all that you prescribe: (select all that apply) | <input type="checkbox"/> Vaginal estrogen cream <input type="checkbox"/> Vaginal estrogen pill <input type="checkbox"/> Vaginal DHEA insert <input type="checkbox"/> Imvexxy (vaginal gelcap) <input type="checkbox"/> Ospemifene (oral SERM) <input type="checkbox"/> Estradiol vaginal ring <input type="checkbox"/> Systemic estrogen replacement therapy <input type="checkbox"/> Compounded vaginal estrogen <input type="checkbox"/> Other: _____ |
| 21) 14. What percentage of your patients are sexually active at six-weeks postpartum? | <input type="radio"/> 0% or nearly 0% <input type="radio"/> < 25% <input type="radio"/> 25 - 50% <input type="radio"/> 50 - 75% <input type="radio"/> 75 - 100% | 38) 27. Select reasons why you would not prescribe vaginal hormone therapy for postpartum patients: (select all that apply) | <input type="checkbox"/> Patient concern of estrogen exposure <input type="checkbox"/> My concern of estrogen exposure <input type="checkbox"/> Patient out of pocket cost <input type="checkbox"/> Symptoms don't improve with therapy or take too long to improve <input type="checkbox"/> Inconvenience of product (need for applicator, ring, other) <input type="checkbox"/> Lack of Research <input type="checkbox"/> Patient concerns about estrogen transfer through breast milk <input type="checkbox"/> Prescriber concerns about estrogen transfer through breast milk <input type="checkbox"/> Other: _____ |
| 22) 15. During appointments with postpartum patients, what percent of time do you ask about pain during intercourse? | <input type="radio"/> +90% <input type="radio"/> 80-90% <input type="radio"/> 60-80% <input type="radio"/> Under 50% | 40) 28. How frequently do you prescribe vaginal estrogen to patients who are postpartum? | <input type="checkbox"/> Never <input type="checkbox"/> Once every six months <input type="checkbox"/> Once a month <input type="checkbox"/> Once a week <input type="checkbox"/> Several times a week |
| 29) 22. If you have a patient who is postpartum and lactating experiencing pain with vaginal intercourse, how do you treat them? (select all that apply) | <input type="checkbox"/> No treatment <input type="checkbox"/> Behavioral/ lifestyle management <input type="checkbox"/> Over the counter products <input type="checkbox"/> Vaginal laser therapy <input type="checkbox"/> Prescription vaginal hormone therapy <input type="checkbox"/> Pelvic floor physical therapy <input type="checkbox"/> Other: _____ | 41) 29. How frequently do you prescribe vaginal estrogen for a non-lactating premenopausal patient? | <input type="checkbox"/> Never <input type="checkbox"/> Once every six months <input type="checkbox"/> Once a month <input type="checkbox"/> Once a week <input type="checkbox"/> Several times a week |
| 31) 23. If you have a general patient experiencing pain with vaginal intercourse (not necessarily postpartum), how do you treat them? (select all that apply) | <input type="checkbox"/> No treatment <input type="checkbox"/> Behavioral/ lifestyle management <input type="checkbox"/> Over the counter products <input type="checkbox"/> Vaginal laser therapy <input type="checkbox"/> Prescription vaginal hormone therapy <input type="checkbox"/> Pelvic floor physical therapy <input type="checkbox"/> Other: _____ | | |

Deliverables

- IRB Study documentation and exemption forms
- Final survey to be sent out to participants in the OB/GYN Facebook group

Lessons Learned

During my practicum experience, I have learned the importance of effective communication when phrasing questions. In order to evaluate implicit perspectives, we asked questions regarding OB/GYN practices based on standard practices and also included questions that inquired whether providers were posing these questions or if they were only reporting instances where patients brought up complaints. When revising the survey, maintaining consistent language and terminology aimed towards my target participants (MD/DO providers) also played a role in how questions were written. Through my experiences collaborating with Dr. Pope and Dr. Koopman Gonzalez, I also learned the importance of evaluating responses in combination with each other, as different factors evaluated in earlier questions may play a role in how participants respond to subsequent questions.

Public Health Implications

This project examines the use of a currently available treatment for vaginal atrophy from the lens of the provider, who is in a position of authority to prescribe treatment. While there is promising evidence for topical estrogen use for vaginal atrophy, this survey takes a snapshot of the potential need for further studies. Further implications include the potential need to disseminate safety assurances throughout the practice.

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| Specialty | Frequency | Percent |
|--------------------------------------|-----------|---------|
| OBGYN | 159 | 100% |
| Subspecialty | 11 | 6.92% |
| Maternal Fetal Medicine | 6 | 3.77% |
| FPMRS/URPS | 2 | 1.26% |
| CFP | 2 | 1.26% |
| Breastfeeding and Lactation Medicine | 1 | 0.62% |

Table 1- Survey Responses by Specialty/Reported Subspecialty