

Scotty, Beam Me - Might Your Vagina Benefit from a Good Zap?

During menopause, the level of the estrogen decreases in our bodies. And, as levels drop, the lining of a woman's vagina may become thinner and dryer. This can lead to irritation of the tender vaginal tissues. Low-dose estrogen is often used to treat these problems. Researchers from the Rutgers-Robert Wood Johnson Medical School, however, studied an alternative option. In 2014, the <u>US Food and Drug Administration</u> approved the use of laser devices for genitourinary procedures. You may be have heard of cosmetic treatments that use lasers. The laser restores vaginal tissues the same way it repairs aging facial tissues. The results of four initial studies on vaginal tissues look promising. A total of 220 women participated in these studies. After laser therapy treatments, most of them reported less problems with vaginal dryness, itching, and burning. They also noted less pain with urination and sexual relations. This treatment is still very new and better studies are needed to really evaluate the effectiveness. If you are interested in learning more about it, ask your doctor for information on how the latest testing of this new therapy is going.

I'm Pregnant—Is Sacral Nerve Stimulation OK?

<u>Sacral nerve stimulation (SNS)</u> is a therapy that tempers inflamed pelvic nerves. These pelvic nerves go to the bladder, bowels, urinary and anal sphincters, and pelvic floor muscles. And, problems with these nerves can lead to involuntary loss of urine and accidental bowel leakage (ABL). SNS has been found to help control ABL. This therapy involves implanting a small device in the "sacral" area of the back,

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which is near the spinal canal. Once implanted, the device sends small electrical pulses to the nerves that control your bowels. By pinging these nerves, SNS can help increase your control of ABL. A group of researchers assessed the safety of SNS during pregnancy. They collected information on the experiences of 32 women. Based on the current evidence, SNS treatments do not appear to prevent women from getting pregnant or pose a potential risk to the unborn baby. In addition, studies did not find a link between premature labor and SNS therapy. The biggest consideration turned out to be the mode of childbirth. Specifically, women with SNS implanted devices may be advised to have a C-section. The reason had nothing to do with the health of the mother or baby. The reason was out of fear that during a normal vaginal delivery (think PUSH PUSH), the pressure of the baby against the pelvic area might damage the implanted SNS device. This was discovered after doctors noticed more problems with the SNS devices after women gave birth vaginally. There are lots of other considerations to weigh in selecting your mode of delivery. Talk with your OB or childbirth provider about the option that is best for you.

• Learn more about <u>delivery options</u>.

Acupuncture Helps Fight Belly Fat

Yoga therapy is an emerging treatment for chronic pain conditions.

For many women, the hot flashes and night sweats of menopause are accompanied by unwanted weight gain. Post-menopausal women often collect those extra pounds in their bellies. Some refer to this as the "menopause muffin top." Despite cutting calories and increasing activity, many women struggle to lose these extra pounds. In addition, the fat cells tend to cluster around body organs. Called visceral adipose tissue, this pattern of abdominal weight gain increases our risks for death due to heart disease, strokes, and complications of diabetes. In this study, researchers compared low-calorie weight loss diets with and without" <u>laser acupuncture</u>. Chinese medicine principles classify obesity, like other health problems, as an energy imbalance. Laser acupuncture aims to rebalance the metabolism of energy. Seventy-four women, aged 50 to 62 years, participated in the study. They were divided into two groups. Women in both groups lost weight. However, the group who had laser acupuncture lost 5 percent more weight than those in the diet-only group.

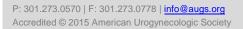
The takeaway: This was a small study. Thus, the value of laser acupuncture in weight loss requires further research. It's interesting that the women in the diet only group lost weight as well. This suggests that for those of us who are struggling to lose that menopause muffin top, it may help to try a structured weight loss program.

• Find a registered dietitian nutritionist in your area to help figure out a structured weight loss program that may work for you.

Silicone Catheters: Should You Use Them for ISC?

About half of women who have urogynecological surgery experience trouble emptying their bladders. The symptoms are usually temporary. However, during this time, they may need use a catheter at home. A catheter is a plastic tube temporarily placed to drain urine from the bladder. Intermittent self catheterization (ISC) is a fancy way of saying a woman performs catheterization on herself a few times a day to help drain the urine from her bladder. Catheters are made of soft plastic materials, including latex, silicone, and polyurethane. Thirty-seven women from the UK, aged 24 to 83 years, agreed to test out a new silicone catheter. This catheter was designed specifically for women. It also had a self-hydrating coating. Most of the women in the study were pleased with this new catheter. Eighty-one percent said they were likely or extremely likely to continue to use the catheter. And, even more women—86 percent—said they would recommend it to other

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women. Four out of five women reported no pain with insertion. And, two-thirds found the silicone catheter comfortable or very comfortable. In addition, most said that the package was easy or very easy to open! If you need to do ISC, ask your provider about using a catheter specially designed for women. Find out about the different types of catheters available to you.

Download the <u>ISC fact sheet</u>.

Preventing UTIs without Antibiotics

How many of us have camped out in the bathroom with a urinary tract infection (UTI)? Caused by an abnormal growth of bacteria in the urinary tract, symptoms of UTI include urgency and frequency of urination. Hence, the need to park yourself on a toilet. After menopause, as our estrogen drops, our risk for UTIs goes up. The culprit is a condition call <u>genitourinary syndrome of menopause</u> (GSM). GSM is caused by changes in the pH of your vaginal tissues. Because of this change, the types of bacteria that live in the vagina can shift to those more likely to cause UTIs. Antibiotics cure most UTIs. However, if a woman gets UTIs frequently, continued use of antibiotics may put her at risk for antibiotic resistance. Thus, a group of medical providers published a paper detailing alternative treatment options:

- Low-dose estrogen: This therapy helps to restore tissues and stimulate healthy vaginal flora. Both of which can reduce your risk for getting an UTI. (Side note: smoking has been found to be detrimental to vaginal flora. So, <u>if you smoke, quit</u> and it may reduce your risk for UTIs.)
- Dietary options: Cranberry juice is an old standby for many women with a UTI. Researchers, however, remain divided about the quality of the evidence behind this recommendation. Probiotics and vitamin D are currently being investigated. For vitamin D, more research is needed to determine the ideal dose. And, for probiotics, studies are comparing consuming them orally with a vaginal suppository (pill place into your vagina).
- **Drug development:** A new oral pill is being tested, which works by stimulating the immune cells in the urinary tract. Some researchers are also testing a <u>vaginal vaccine</u> to help prevent UTIs. Lastly, medicines instilled in the bladder are being studied. These options are also in the early stage of investigation.

If you suffer with recurrent UTIs, ask you provider about the best treatment options for you.

Around the Web

- Voices for PFD has a new look! Check out the updated website.
- Experiencing Painful Sex? You may have vulvodynia. The <u>National Institutes of Health website</u> has detailed information about vulvodynia.
- Living with Interstitial Cystitis/Bladder Pain Syndrome.
- An Oscar Win for Pelvic Floor Muscle Exercises: Oscar Nominees Received a Vagina Fitness Tracker in Their Goodie Bags!
- What the <u>Color of Your Poop</u> Says about Your Health.



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The Rest of the Story

- Arunkalaivanan A, Kaur H, Onuma O. <u>Laser therapy</u> as a treatment modality for genitourinary syndrome of menopause: a critical appraisal of evidence. Int Urogynecol J. 2 Feb 2017. doi: 10.1007/s00192-017-3282-y. [Epub ahead of print]
- Caretto M, Giannini A, Russo E, Simoncini T. <u>Preventing urinary tract infections</u> after menopause without antibiotics. Maturitas. 2017:99;43–46.
- Gordon B, Shorter B, Isoldi K, Moldwin R. <u>Obesity with comorbid stress urinary incontinence</u> in women: A narrative review to inform dietetics practice. J Acad Nutr Diet. November 2016:pii: S2212-2672(16)31191-1. doi: 10.1016/j.jand.2016.09.024. [Epub ahead of print.]
- Hutchinson-Colas J, Segala S. Genitourinary syndrome of menopause and the use of <u>laser therapy</u>. Maturitas. December 2015:82(4);342–345.
- Logan K. The female experience of <u>ISC with a silicone catheter</u>. British Journal of Nursing. 2017:26(2); 82-88.
- Wozniak P, Stachowiak G, Pieta-Dolin A, Oxzukowski P. <u>Laser acupuncture</u> and low-calorie diet during visceral obesity therapy after menopause. Acta Obstet Gynecol Scand. 2003:82;69–73.
- Yaiesh SM, Al-Terki AE, Al-Shaiji TF. Safety of <u>sacral nerve stimulation</u> in pregnancy: A literature review. Neuromodulation. October 2016, 19(7):770–779.



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