

Calling All Women: Have You Heard of Urogynecology?

There is a female-focused field of medicine that you may not have heard of and it's called urogynecology. We recently had a conversation with Cristina Saiz, M.D., FCOG, medical director, Female Pelvic Medicine and Reconstructive Surgery (urogynecology), Valley Medical Group, about the field of urogynecology and the important role that urogynecologists play in helping women to maintain their health and quality of life.



Dr. Cristina Saiz

Q. What is urogynecology?

A. Urogynecology, which is also known as female pelvic medicine and reconstructive surgery, is the medical subspecialty exclusively dedicated to the treatment of women with pelvic floor disorders. To become a urogynecologist, we must complete a four-year residency program in obstetrics and gynecology and then undergo an additional three-year fellowship training program where we learn to manage pelvic floor disorders. Once our training is complete, we take a comprehensive exam in order to become board certified in urogynecology.

Q. What are pelvic floor disorders?

A. The pelvic floor is a term we use to describe the muscles, ligaments and connective tissue that provide support for a woman's internal organs (including the bowel, bladder, uterus, vagina, and rectum). Not only does the pelvic floor prevent these organs from falling down or out, but it also plays a very important role in making the organs function properly. When a woman's pelvic muscles are weakened or she develops tears in the pelvic connective tissues, she is considered to have a pelvic floor disorder.

Q. What are the symptoms of pelvic floor disorders?

A. Women with weakness of the pelvic muscles or tears in the connective tissue may begin to have problems controlling their bladder and bowels. They often describe a bulge sensation, pressure or a protrusion through the vaginal opening

("dropped bladder or womb"), urine leakage (urinary incontinence), frequency or urgency of urination, difficulty emptying the bladder, bowel gas or stool leakage (anal incontinence), etc.

Other symptoms are recurrent urinary tract infections (cystitis) and painful bladder syndrome/interstitial cystitis.

Q. Are there different types of bladder control problems?

A. Yes, the two major types of bladder control problems are stress incontinence and urge incontinence. In stress incontinence, activities that cause pressure on the abdomen such as laughing and exercise lead to urine leakage. In urge incontinence, women are unable to make it to the restroom in time and experience leakage. Often times, patients have a combination of both stress and urge incontinence.

Q. How common are these conditions?

A. These disorders are a very prevalent problem. For example, it's actually estimated that 11 percent of women will undergo reconstructive pelvic surgery by age 70. In terms of urinary incontinence (leakage of urine), studies show that this affects 30 to 50 percent of women. The occurrence rates go up with age, but incontinence among young women is also common. However, it's important to note that urinary incontinence is not considered "normal" at any age.

Q. Are there treatments available for these disorders?

A. Yes, there are a variety of non-surgical and surgical treatment options available to patients. In my practice, I take a very individualized approach to caring for my patients. I believe it's crucial to take a patient's personal preferences into account when making any treatment decisions. As such, when a patient comes to see me, I discuss the treatment options that are best suited to that patient's specific needs – both clinically and personally.

Dr. Saiz is a certified robotic surgeon and specializes in minimally invasive urogynecologic procedures. She holds a dual board certification in obstetrics & gynecology and in female pelvic medicine and reconstructive surgery (urogynecology). A native of Spain, Dr. Saiz is fluent in Spanish.

To make an appointment with Dr. Saiz, call 201-221-0504.

