### oxford women's health

### Spring Newsletter 2023



### GP CME Sessions

Wednesday 18 October 6.30pm-7.30pm Presenter: Fiona Bach (Urogynaecologist) Topic: Prolapse Online

Wednesday 8 November 6.30pm-7.30pm Presenter: Niamh Clerkin (Pelvic Health & Musculoskeletal Physiotherapist) Topic: Incontinence - stress, urge and faecal Online

Wednesday 22 November

6.30 – 7.30pm

Presenter: Janene Brown

(Gynaecologist – Advanced endoscopic surgery and fertility specialist)

Topic: Subfertility workup and basic fertility

Online

If you would like to attend any of these sessions, please contact karen.lavender@ oxfordwomenshealth.co.nz

#### Dear colleagues, Welcome to our latest newsletter.

This month, gynaecologist Olivia Smart provides an update on the new HPV test and the impact this could have on encouraging people to take part in cervical screening. We also offer some insights from the 15th World Congress on Endometriosis; welcome Madeleine Stringer and Bryony Simcock to our team; and advise that from next month we will be providing monthly clinics in Greymouth.

Our wonderful mindful physiotherapist, Jo Hopkinson-Haigh, also shares how she is working with patients to help bring relief from pain and stress for a wide range of conditions. The multi-disciplinary approach is a foundation of our ethos and it's rewarding to see the positive contribution it makes to our patient outcomes. You'll find more about that in this newsletter too. Enjoy!

**Kindest Regards** 

Janene Brown Clinic Director





Gynaecologist Dr Simon Jones

### Clinics in Greymouth

From early October, we are holding monthly gynaecology clinics in Greymouth. Dr Simon Jones will be providing the clinic from Coastal Health, a GP practice in Cowper St. We are very much looking forward to serving the needs of the West Coast community.

endometriosis | menstrual issues | pelvic pain | prolapse | incontinence | menopausal problems | surgery | fertility

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## **Benefits of the new HPV Test**



September, is expected to lead to a 15 per cent reduction in cervical cancer in New Zealand, even if cervical screening rates stay the same, according to Oxford Women's Health gynaecologist Olivia Smart, who spoke at a recent CME presentation to South Island GPs.

The new HPV test, introduced earlier in

Gynaecologist and Obstetrician Olivia Smart

As well as being more accessible and acceptable, the test was more

effective at identifying pre-cancers, she said. "Combined with HPV vaccination in younger women, the future is looking very bright for combatting this disease."

Olivia was particularly positive about the benefits of the test for populations who had previously been more reluctant to have a cervical smear, including Māori and Pacific people, and members of the LGBTQI community.

"People will still have to visit their cervical screening provider but being able to self test and only have it once every five years, instead of every three, should be helpful in encouraging more people to attend regular screening. Immuno compromised patients will still have a test every three years."

While the introduction of the new test occured on 12 September, Olivia said she expected there to be a few things to iron out before it was running seamlessly.

"This is an entirely new screening programme and it will undoubtedly have a few teething issues," she said. "Thankfully the outcomes look well worth any extra time involved in getting this right."

She said to help maximise potentially higher rates of screening, she was making sure her patients knew this test was important for everyone with a cervix, including those who:

- Have ever had intimate skin-toskin sexual activity (even if this was decades ago)
- Have only had non-penetrative sex
- Are straight, gay, lesbian, bi-sexual or queer
- Are transgender, gender-diverse, nonbinary with a cervix
- Have only ever been with one sexual partner
- Have had the HPV vaccination or not
- Are pregnant or who have had a baby
- Have been through menopause

She also encouraged General Practitioners to check who amongst their patients would be eligible for free screening. This includes women and people with a cervix 30 years and over who have never had a screening test or under 35 and haven't had one in five years; anyone who is at higher risk and requires follow-up; Māori and Pacific people; and anyone who is a community services holder.

She said the timetoscreen.nz website was a good place to refer patients for more information about the new test.

# Mindful Physiotherapy

Jo Hopkinson-Haigh is a master of teaching people the tools to find peace in the chaos of modern life.

As a physiotherapist of more than 20 years, she says she always starts with the body rather than the mind when looking to assist people with pain or stress. "If someone is feeling overwhelmed, there will always be a physical response – for example, the way they are holding themselves and the way they are breathing. If we start there the rest follows."

Jo, who runs Mindful Physiotherapy at Oxford Women's Health, is also a qualified contemporary yoga instructor, massage therapist and is trained in acupuncture, and the Bradcliffe Breathing Method. She applies her research-based practices when working with patients to manage and treat the symptoms of menopause, stress, anxiety, breathing pattern disorders, nervous system overwhelm, chronic pain, headaches, sleep disturbance, and the effects of long-Covid and Postural Orthostatic Tachycardia Syndrome (POTS).

She says "coming back to your breath" is a simple technique that she teaches all of her clients to use whenever they need to restore themselves to a state of calm. It can be applied to an incredibly wide range of situations from experiencing a panic attack, to managing pain, and even coping with an unexpected event.

Jo says she has found that pain is greatly influenced by, not only the primary cause, but all the other stresses a person may have in their life. "Some people who have been stressed and in pain for a long time don't even remember what a state of calm feels like. Helping them to get to that is one of the great joys of my job."

Jo says she always takes a multifaceted approach when working with people. This might involve

breathwork, mindfulness, trigger point and myofascial release, massage, pain education, everyday movement, acupuncture, and achievable yoga techniques.

Our patients are reporting positive life changing outcomes from sessions with Jo, across a wide range of conditions.



Mindful Physiotherapist Jo Hopkinson-Haigh

# Insights from the World Congress on Endometriosis

Oxford Women's Health was well represented at the 15th World Congress on Endometriosis in Edinburgh in May.

Gynaecologist Michael East and Deborah Bush, our Endometriosis and Pelvic Pain Coach, both attended, as well as University of Otago Associate Professor Jane Girling and members of the recently formed New Zealand Menstrual Health Research Network. More than 1,000 delegates travelled from all corners of the world, keen to hear from researchers, clinicians and advocates about progress in scientific research, advances in clinical practice, and what patients need and want.

Here's what our delegates had to say:

#### **Michael East**

One of the key discussions for me was about adenomyosis being more common and a bigger contributor to pelvic pain than previously thought. Historically, it has not been widely acknowledged as being as important as endometriosis but rather a soft sign that endometriosis is present.

There were also some interesting presentations on new oral drugs particularly for pituitary suppression for TSH - that are now available overseas for the treatment of endometriosis but are not available in New Zealand.

A poster with an update on Mike's research on inflammatory mediators in peritoneal fluid, collected before and after surgery to remove endometriosis, was displayed throughout the conference. (We'll update you more on that in the next newsletter).

#### Jane Girling

I found the research about our overall understanding of chronic pain particularly interesting. It was a privilege to listen to Professor Lorimer Moseley (University of South Australia)



of 'Explain Pain' fame, and Daniel Clauw (University of Michigan), who between them have added so much to our understanding of the complexities of pain. Hearing these speakers reminded me that we still have so much to understand about the interaction between endometriosis and the pain experience. The disease is still an enigma, but as each Congress passes, we move a little closer to making change that will improve the quality of life for all those who deal with this nasty disease.

#### **Deborah Bush**

It was great to see New Zealand so well represented at the Congress. For me, this congress offered a more diverse programme which captured the many facets and impacts of endometriosis, adenomyosis and pelvic pain. We heard from experts in sociology, psychology, social media, gut microbiota, diagnostics, aetiology, epidemiology, aspects of pain, and patient centric multi-disciplinary care. There was also good representation from those with endometriosis who articulated their experiences and challenged speakers on current treatment and management.

## Welcome to Madeleine

We are thrilled to welcome new Oxford Women's Health team member Dr Madeleine Stringer.

Madeleine is an obstetrician and gynaecologist with a special clinical interest in general gynaecology, laparoscopy, hysteroscopy, and colposcopy. Alongside her work at Oxford Women's Health, Madeleine is a consultant at Christchurch Women's Hospital, and a senior clinical lecturer at the University of Otago. She is also a wellbeing representative as part of the RANZCOG wellbeing working group, mentors and teaches junior doctors, and presents research at local and international medical conferences.



Gynaecologist and Obstetrician Dr Madeleine Stringer

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#### **Consulting Clinicians**

**Fiona Bach** Gynaecologist

**Janene Brown** Gynaecologist Fertility Specialist

**Richard Dover** Gynaecologist Fertility Specialist

**Michael East** Gynaecologist

**Anna Fenton** Gynaecological Endocrinologist

Simon Jones Gynaecologist

**Benjamin Sharp** Gynaecologist and Obstetrician

**John Short** Gynaecologist

**Olivia Smart** Gynaecologist and Obstetrician

Madeleine Stringer Gynaecologist and Obstetrician

Josie Todd Oncoplastic Breast Surgeon

#### **Menopause Centre**

Specialist General Practitioners

Lauren Goldschmidt

Victoria Price

Jane Scott

Catherine Smart

#### **Allied Health Professionals**

**Deborah Bush** Endometriosis Coach

**Jo Hopkinson-Haigh** Mindful Physiotherapist

#### **Oxford Dietetics**

Cushla Holdaway Sara Widdowson

#### **Oxford Psychology**

Amy Montagu Inga Forman

#### Oxford Physiotherapy – Pelvic Floor

**Niamh Clerkin** 

**Sophie Coulter** 

Rowan Parsons

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### Multi-disciplinary team update



Nutrition Consultant and Dietitian Sara Widdowson Monthly Pelvic Pain Multi-Disciplinary Team (MDT) meetings are now well-established at Oxford Women's Health, and attended by gynaecologists, dietitians, psychologists, pelvic floor physiotherapists, and the senior nursing team. All participants report that the meetings are proving beneficial in reviewing patient care, particularly for those with ongoing chronic pain conditions.

Committee Chair Sara Widdowson says, "The MDT is a valuable space for consultants and allied health team members to present and seek opinion on complex cases. This team approach has resulted in even more referrals to the wider MDT, which has seen improved patient outcomes in regard to pain and their health journey. It has also been a valuable learning space for allied health members of the Oxford Women's Health Team".

### Measuring the skin metabolome to determine menopause status



**Gynaecological** 

Endocrinologist

**Dr Anna Fenton** 

In conjunction with AgResearch and University of Otago, Dr Anna Fenton is running a trial to determine whether the skin metabalome can provide a definitive indication of whether a woman is pre/peri or post-menopausal. The novel test is non-invasive and painless. A small amount of liquid is applied to the participant's inner forearm, and peeled off once it dries. The resultant "skin-peel" is then frozen until it is analysed. Samples will be taken from 180 participants' skin over coming months and the results measured by AgResearch. It is an exciting study and we look forward to sharing the results when they are available.

### Bryony Simcock

We are delighted to advise that Gynae-oncologist Dr Bryony Simcock is joining the Oxford Women's Health team from mid-October. We look forward to introducing Dr Simcock in our summer newsletter.



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