Report on IUGA Educational Observership in the Urogynecology and Pelvic Floor Reconstruction Unit of Croydon University Hospital, Croydon, UK, led by Miss Ranee Thakar and Mr. Abdul Sultan

In 2019 I received one of the IUGA’s observership grants. Unfortunately, due to the COVID-19 pandemic, several restrictions did not allow me to travel and visit the Croydon University Hospital until November of 2022. Dr. Thakar and Dr. Sultan have hosted multiple observers and fellows over the past years, and their team is experienced in helping the trainees and observers to come to Croydon.

During my visit, I had the opportunity to learn more about the perineal clinic and the overall management of pelvic floor disorders. The clinic works like a well-oiled machine with an excellent collaboration of nurses, fellows, midwives, and consultants. Is impressive the degree of efficiency that the clinic has achieved in taking care of the patients but also being prolific in research and collaborating with other units across the United Kingdom to standardize care in pelvic floor disorders. Creating algorithms and flowcharts allows proper standardization in care, excellent coordination of patient care, and collaboration among other consultants and general practitioners.

Obstetrical pelvic floor trauma is one of my interests and during my stay I was able to learn more about anal manometry and the use of anal ultrasound. The unit has cut of the edge anal ultrasounds that allows to identify defects in the sphincteric complex after a vaginal delivery. Learning how to collect and use this information to provide more guidance about the mode of delivery in subsequent pregnancies was very relevant for me. I am looking forward to introducing what I have learned into my clinical practice.

The last part of my experience culminated in attending the British Society of Urogynecology (GSUG) meeting, where Mr. Sultan received the BSUG lifetime achievement award. Mr. Sultan gave a very passionate lecture. It was very impressive to understand all the long pathway that he had to go over to not only change physiologic and anatomical concepts in medicine but also to clinically translate that knowledge into interventions that can help prevention and adequate repair of obstetrical lacerations. His speech also ended encouraging future generations to continue doing research and helping patients with pelvic floor disorders. The rest of the lectures also allowed me to understand the current scenario in the Britain about the use of mesh and other procedures. It is interesting to see different practices compared to what I normally see and use in my patients in the US.

I am grateful that IUGA understood the difficulties of finding the time for me to travel and extend the deadline for this observership. I am also thankful to Miss Thakar, Mr. Sultan, and the rest of the unit members at the Croydon University Hospital for all that they taught me. I encourage all the fellow members of IUGA to find the time in their training or busy schedule to apply for this grant and take advantage of this unique opportunity.

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