Improving Quality of Life for Women

The urogynecology physicians at Methodist Physicians Clinic Women's Center may not be dealing with life-threatening illnesses on a daily basis, but they are significantly improving the quality of life for women across the region.

Dr. Jessica Bracken, M.D.

Urogynecology, a sub-specialty of obstetrics and gynecology, focuses on the evaluation and treatment of conditions that affect the female pelvic organs and the muscles and connective tissue that support the organs.

"Many symptoms can present themselves when a woman is in her 30s, 40s or much later in life," said Jessica Bracken, M.D., one of three fellowship trained urogynecologists at the Methodist Physicians Clinic Women's Center. "The symptoms can be minor or very severe. Regardless, women are limited in their ability to enjoy life."

As a urogynecologist, Dr. Bracken is able to help patients suffering from pelvic prolapse, urinary incontinence, difficulties with emptying the bladder or rectum and pelvic or bladder pain. A patient who struggles with stress incontinence will leak urine when they cough, laugh or sneeze. Urgency refers to a strong need to empty the bladder, resulting in a fear of leakage.

"There was a time when these types of conditions were embarrassing and rarely talked about," Dr. Bracken said. "In recent years women are talking, joking with friends, etc., and there is much better information available. Women have realized help is available."

The form of help some women are pursuing is surgical resolution for their condition. According to market data, in 2010 approximately 300,000 women in the U.S. underwent surgery for pelvic organ prolapse, while another 260,000 did so for stress incontinence.

Dr. Bracken notes patients have many options when it comes to surgery. These can range from abdominal surgeries, such as robotic, laparoscopic or open incision to vaginal, which involves the use of mesh or native tissue.

While there has been plenty of media attention with regard to mesh for these types of procedures, Dr. Bracken says it may be the best option for some women to reduce the reoccurrence of pelvic organ prolapse. "For some women, their physician may feel utilizing mesh will provide them with the best long-term cure rate," Dr. Bracken said. "Mesh provides the reinforcement and support the tissue needs. But it can come with complications and women need to know and understand what those are."

Those risks can include mesh erosion, which means the mesh can expose itself through the vaginal tissue. Vaginal shortening is another risk which can be painful for the patient.
“Whether a physician uses mesh or native tissue, complications can arise,” Dr. Bracken said. “It’s fair for patients to ask their doctor about their complication rate. A doctor should also be able to share their success rate with both approaches.”

Dr. Bracken says the important thing for women to remember is there are solutions to the problems they are facing. It may be surgical, or perhaps it can be resolved through physical therapy. Patients must be open and be knowledgeable about all the options available to them.