



International Federation of Gynecology and Obstetrics

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September 2016

NEWSLETTER

FIGO reinforces its vision and mission on the global stage

Dear FIGO Colleagues

It is my great pleasure to provide you with an update on FIGO activities over the last few months.

As you will be aware, the Chief Executive of FIGO, Professor Hamid Rushwan, will be retiring in September after nine years of service to FIGO. I am pleased to announce that Mr Johan Vos has been appointed the new Chief Executive Designate, and joined FIGO on 1 August 2016 for a comprehensive induction period.

The PCO (Professional Congress Organiser) selection process for FIGO's Rio Congress in 2018 has also been completed, and FIGO will be signing the contract soon, to proceed with arrangements.

Many FIGO Committees had meetings, several held in London.

I attended two meetings in an ex-officio capacity – the Reproductive Medicine Committee, chaired by Professor Edgar Mocanu, and the Capacity Building for Education and Training Committee, chaired by Professor

Ernesto Castelazo Morales. A Safe Motherhood and Newborn Health Committee meeting, chaired by Professor Gerry Visser, also took place in London. It was decided to prepare PowerPoint presentations of all FIGO recommendations and utilise them by disseminating at all FIGO Member Societies' meetings.

Extensive global representation

In the last few months, I have travelled extensively to represent FIGO.

The Executive Board had a very productive meeting in Washington, in May, followed by the American College of Obstetricians and Gynecologists' (ACOG) Congress. FIGO – under Professor Yirgu Gebrehiwot – has decided to formulate a strategic plan for FIGO's vision for the next five years, and I will let you know once we have it in place. I must convey my sincere thanks to ACOG for looking after everyone so well.

In Washington, we had a unique opportunity to sign a Memorandum of Understanding with 'Direct Relief', who will provide operating kits to

doctors for surgery training, free of charge, for our fistula project. This will benefit a large section of women undergoing fistula surgeries in the project.

The 'Women Deliver' conference which followed immediately, in Copenhagen, was a highly successful event, where FIGO was well represented. Many issues concerning women's health, wellbeing and empowerment were discussed and deliberated upon by prominent personalities. I also had an opportunity to discuss with many NGOs and donors FIGO's continued role and efforts in women's health.

A 'Partnership for Maternal, Newborn and Child Health' (PMNCH) meeting was also held after this in Copenhagen, where FIGO was represented as the Chair of the Health Care Professional Associations on the Executive Board.

The European Board and College of Obstetrics and Gynaecology (EBCOG) Conference took place in late May in Turin – I participated in the Presidents' Session and spoke on women's

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The FIGO Executive Board meeting in Washington, USA (May 2016)

INSIDE:

FIGO bids farewell to Chief Executive Professor Hamid Rushwan
| Washington welcomes FIGO Executive Board 2016 | New FIGO Chief Executive appointed |
Mongolia and Fiji join the FIGO family | New PPIUD Deputy Director to join project team

PRESIDENT'S MESSAGE

FIGO reinforces its vision and mission on the global stage

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health and FIGO initiatives. It was a short one-day visit but it provided ample opportunity to meet and interact with European ob/gyn leaders. Dr Tahir Mahmood and Professor Chiara Benedetto looked after everyone with grace, hosting a splendid dinner.

Cali in Colombia was my next destination for the Colombian Congress – I delivered two talks, focusing on FIGO's recommendations on nutrition. It was a well attended Congress with major ACOG involvement.

In June, I attended the 12th AAGL International Congress on Minimally Invasive Gynecology in partnership with the Indian Association of Gynaecological Endoscopists. There were 62 live surgical operations by experts from all over the world. Live relays of intricate endoscopic, as well as vaginal, surgeries were keenly watched by more than 1,500 delegates. I had the privilege to be the Chief Guest at the glittering inaugural function.

As a follow-up to the efforts of the United Arab Emirates association in joining the African Federation of Obstetrics and Gynecology

(AFOG), I had a meeting in Dubai with the Emirates Medical Association (EMA) and the Dubai Tourism Board to discuss an EMA, FOGSI, AFOG and FIGO joint conference in Dubai, supported by the Dubai Government, to promote obstetrical and gynecological advances in the region. It was a fruitful meeting, and it was decided to plan two meetings, one in December 2016 and the other next year.

The FOGSI-FIGO Congress in Pune, India, held in late June, was a huge success. The theme was to disseminate and discuss Best Practice recommendations and dilemmas. The FIGO Committee for Gynecologic Oncology held a meeting under the leadership of the new Chair, Professor Neerja Bhatla. A one-day workshop on oncology was organised by the Committee, in which I talked about the burden of disease and potential solutions (relating to the Indian scenario). There were 10 other pre-congress workshops on various subjects which were well attended, and the inaugural function was colourful, with a wonderful Indian flavour, which was appreciated and enjoyed by all.

The political commitment to fully support women's health and empowerment was emphasised by the Chief Guest and Guest of Honour.

The PPIUD project in India has been doing commendable work and, as President of FIGO, I personally applauded their efforts and gave certificates of appreciation to the best performing teams in order to encourage them and boost their morale.

Lastly, 1 July 2016 was 'Doctors' Day' in India – the Medical Council of India and the Government of India honoured me with the prestigious B C Roy Award for 'Excellence in Medico-Social Work', presented by His Excellency Shri Pranab Mukherjee, the president of India, at the Rashtrapati Bhavan in Delhi.

Wishing you the very best.

C N Purandare

Professor C N Purandare
FIGO President
2015–2018



L-R: Professor Marleen Temmerman; the Prime Minister of Denmark, Lars Lokke Rasmussen; FIGO President (Women Deliver, May 2016, Copenhagen)



In discussion at FOGSI-FIGO, Pune (June 2016)



Professor Purandare (third from right) in Colombia (May 2016)



Chief Guest in Mumbai
(June 2016)



Being presented with the B C Roy award (July 2016)

'A Farewell to FIGO'

Dear Colleagues

I hope you are all well, and that your respective work projects are in full swing. This year seems to have moved exceptionally fast!



The last few months have taken me to Washington for the FIGO Executive Board meeting; to the 'Women Deliver' conference in Copenhagen; and to Geneva for the World Health Assembly. I also represented FIGO in Geneva at a meeting of the Policy and Co-ordination Committee (PCC) of the UNDP/UNFPA/UNICEF/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP).

The Executive Board meeting in May 2016 – together with other associated FIGO meetings – was a great success, thanks to the splendid hosting by the American College of Obstetricians and Gynecologists (ACOG). We are deeply appreciative of their superb organisation of proceedings. You can find a full report on our Washington visit on page five.

FIGO success at 'Women Deliver'

The 'Women Deliver' conference took place in Copenhagen, Denmark, in mid-May, to great acclaim. Congratulations are due for what was a truly marvellous event, one in which FIGO fully participated. A special FIGO booth, manned by FIGO project staff, drew much attention, as did side events connected with the FIGO-Gynuity Misoprostol Initiative and sessions on diabetes involving the Chair of the new FIGO Hyperglycemia Working Group, Professor Moshe Hod. I would like to place on record my admiration of the 'Women Deliver' Founder and President, Jill Sheffield – I am delighted and honoured that she is the Chair of the new FIGO

Working Group on Contraception. Don't miss our illuminating conversation with her on page four!

I represented FIGO at the World Health Assembly in Geneva at the end of May. This important annual event brings together those in close affiliation with the World Health Organization (WHO), including many NGOs. It was a good opportunity to touch base with many FIGO colleagues on issues of importance to women's health. In addition, the WHO PCC meeting shortly afterwards was well attended and gave important updates and insights on global strategies and country engagement.

In late July, I attended a WHO Workshop in Johannesburg, South Africa, on the implementation of Family Planning/Contraception Guidelines, with the participation of several FIGO Member Societies from Africa. This follows on from the collaboration between FIGO and WHO in Vancouver, building on the work of the Pre-Congress workshop on this topic.

Leaving FIGO

This is a very bittersweet overview* to write, as it is my final contribution for the FIGO Newsletter!

[*Please see Professor Rushwan's special extended message on page 6.]

As many of you will be aware, I am retiring as Chief Executive at the end of September 2016. It has been an enormous pleasure to have been at the helm of such a prestigious and important organisation for almost a decade. There have been many changes and new developments within the organisation, and many significant achievements also. I shall greatly miss the strong working relationships that have been built up and nurtured between FIGO and its many collaborating partners. I also owe a great debt of thanks to the committed and hardworking staff at the FIGO Secretariat – without their dedicated service and attention to detail, my role would have been all the more challenging! I know they

will provide the same excellent support to my successor, Johan, in the months and years to come.

As this Newsletter goes to print, I am preparing for some final trips.

I fly to Vancouver shortly to attend the 28th International Congress of Paediatrics, which will involve, among other activities, meetings of the Health Care Professional Organisations – FIGO, IPA and ICM – to continue discussions started in London in February 2016 with regard to preparing a joint project on the implementation of 'Essential Interventions'. This will be submitted to the Bill & Melinda Gates Foundation for funding.

My last engagements as FIGO Chief Executive will be to represent the organisation at the conferences of two Member Societies, Ukraine and Serbia, Montenegro and the Republic Srpska, at the end of September. I extend my sincere thanks to them, and look forward to meeting with valued colleagues.

Finally: I know that you will all continue to take forward FIGO's vision that women of the world achieve the highest possible standards of physical, mental, reproductive and sexual health and wellbeing throughout their lives. Thank you for your outstanding efforts, and my very best wishes to FIGO and its many partners for a successful and thriving future.

It has been my pleasure and privilege to serve you all – of course, there is much work still to do!

All best wishes

Professor Hamid Rushwan
FIGO Chief Executive
2007–2016



FIGO Executive Board meeting, Washington (May 2016)

International Federation of Gynecology and Obstetrics

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Readers are invited to refer items for consideration by email to communications@figo.org no later than Friday 14 October 2016 for the next issue.

The views expressed in articles in the FIGO Newsletter are those of the authors and do not necessarily reflect the official viewpoint of FIGO.

Produced and edited by Alexandra Gilpin at the FIGO Secretariat © FIGO 2016.

'In conversation ... with Jill Sheffield'



Jill Sheffield is a global educator and advocate who has worked to promote women's health and rights around the world for more than three decades. She is the Founder and President Emeritus of *Women Deliver*, an international advocacy organisation that convenes global leaders to galvanise action for girls and women, specifically their sexual and reproductive health and rights.

Jill, what motivates and drives you in your valuable work?

Very unlike the membership of FIGO, I had no training in the reproductive health field... that came later. My background is in education. But when fate brought me to the family planning outpatient clinic of Pumwani Maternity Hospital in Nairobi, the experience was seriously educational, especially for a 26-year-old woman from the United States. While the feminist movement was flourishing back home, the Kenyan women I met through the clinic were barred from using contraception without their husbands' permission. These women walked or travelled all day to get help and were often denied service. They were dying and their children were dying in childbirth – too many pregnancies, too little spacing, not enough trained providers to help. From that point on, I knew I would be working for these women and others like them.

I founded Family Care International in 1987 and we became the home of the Safe Motherhood Initiative in response to the silent tragedy of women dying at the rate of one every single minute from pregnancy-related causes. Our work was important and energetic, but progress was slow. Everyone was sympathetic, but women were not a priority and Millennium Development Goal No 5 – to improve maternal health – seriously lagged behind all the others. I wanted world leaders, as well as heads of governments, to step up, rally around the issue, and take action. So we convened a conference in London in 2007, *Women Deliver*, to promote the economic case as well as the humanitarian case for saving women's lives. When registration was low, I was advised to cancel the meeting. Instead, I pulled out my Rolodex and got busy. Over 1,700 people attended and the world took notice.



After that first *Women Deliver* conference, we needed a way to keep the pressure on. To fill that gap, I founded *Women Deliver*: the organisation – a fully-fledged global advocacy movement for the health, rights and wellbeing of girls and women, with a firm stance on sexual and reproductive health and rights. Four conferences and a decade later, maternal mortality has dropped

considerably thanks to the work of the many governments, non-governmental organisations, and advocates we bring together from every corner.

Women Deliver works with people. We mobilise. We urge collaboration. Partnerships aren't always easy. Indeed, they are usually difficult. But if you really want progress, that's the surest way to achieve it. As the new Chair of the FIGO Working Group on Contraception, that's exactly the approach I hope to bring to the table. Just as maternal health was one piece of a larger puzzle of women's wellbeing, contraception is only one aspect of choice. There is an enormous goldmine within the FIGO membership – passionate, skilled clinicians, researchers, educators, policymakers, business people and activists – all with their own expertise and their own networks. One of my goals is to turn every member of FIGO into an advocate of reproductive freedom for women everywhere.

It is time we take a larger look at girls and women. Yes, they deliver babies, and too many of them still die doing so. But they have great value beyond their reproductive miracles. Girls and women deliver stronger economies. They deliver healthier societies. And when their human rights are fulfilled, they deliver a ripple effect of prosperity and stability. It is time we work together to realise that future.

Over the coming years, I hope to see maternity mortality continue its decline, reproductive health information and services increase, and governments finally match policies and services to the needs of their people. This change is entirely, absolutely possible. We can do this. But a change like this only happens with people like the members of FIGO.

Here is a phrase that's old and still true: *If you cannot plan your fertility, you cannot plan your life.*

We know how to support women in their choices, we just have to want to do it. Do we? Will we?



Johan Vos

FIGO appoints new Chief Executive Designate

Johan Vos has been appointed to the role of FIGO Chief Executive Designate, and joined us on 1 August for a comprehensive induction period.

Johan has over 20 years' experience working within the charity/not-for-profit sector, and has extensive experience of leadership within national and international health charities and membership-based organisations.

His most recent position was as Deputy Executive Director at Alzheimer's Disease International (ADI) where he gained significant experience of advocacy and influencing global, regional and national health agendas with Governments and international health agencies such as the World Health Organization. In addition, Johan has represented ADI on the global stage, negotiated and managed strategic partnerships with global industry (including pharma) and has wide-ranging experience of policy and membership development.

Prior to this, he worked within senior leadership and income development roles for the world's leading charities that include Alzheimer's New Zealand, Arthritis New Zealand and UNICEF New Zealand.

Johan said: 'I am delighted to join FIGO during an exciting chapter in the organisation's history – over the last few years it has grown significantly under Professor Rushwan's meticulous stewardship, and its many projects and activities are currently flourishing.'

'I greatly look forward to working with the staff, Member Societies and FIGO's many collaborating partners to continue to consolidate FIGO's vision – that women of the world achieve the highest possible standards of physical, mental, reproductive and sexual health and wellbeing throughout their lives.'

A full interview with Johan will be carried in the December 2016 issue.

New PPIUD Deputy Project Director Appointed

FIGO is saddened to announce that Dr Linda de Caestecker, PPIUD Deputy Project Director/FIGO Director of Projects, stepped down from her role(s) at the end of July.

Professor Sir Sabaratnam Arulkumaran, FIGO Past President, and PPIUD Project Director, said: 'Linda joined FIGO in August 2015. In recognition of her great knowledge, experience in women's health and administrative abilities, she was additionally appointed as Director of FIGO's projects within months.'

'The PPIUD initiative – carried out in 48 large institutions in six countries – is complex with a myriad of practical, technical and political issues. Linda guided the FIGO and country teams to overcome these hurdles by excellent communication and negotiation skills. The key to her success is energy, enthusiasm and hard work. Her calm nature and long experience as the Director of Public Health with NHS Greater Glasgow and Clyde benefited FIGO. Linda returns to Scotland after one year of secondment from her post. We wish her well in her job and have no doubt that she will continue to contribute to the improvement of women's health globally.'

Professor Hamid Rushwan, FIGO Chief Executive, said: 'FIGO is immensely grateful for her very significant contributions during her time at the organisation, and we wish her success in her future endeavours.'

Fiona Cullinane has been appointed to the role of PPIUD Deputy Project Director, and will join the team in September (more information will be available in the next Newsletter).

Washington plays host to FIGO Executive Board 2016

The 2016 FIGO Executive Board meeting was hosted by the American College of Obstetricians and Gynecologists (ACOG) from 10–13 May 2016.

ACOG is a longstanding FIGO Member Society, with a strong mission and vision:

Operational Mission Statement

The American Congress of Obstetricians and Gynecologists is a membership organization dedicated to the advancement of women's health care and the professional and socioeconomic interests of its members through continuing medical education, practice, research, and advocacy.

Vision Statement

The Congress, as the premier organization for obstetricians and gynecologists and providers of women's health care, will provide the highest quality education worldwide, continuously improve health care for women through practice and research, lead advocacy for women's health

care issues nationally and internationally, and provide excellent organizational support and services for our members.

(Source: www.acog.org/About-ACOG/About-Us/ACOG-Mission-Vision-and-Core-Values)

This important annual meeting enabled FIGO's elected Officers and Executive Board members to come together to take clear decisions on important matters affecting the running of the organisation. The Board meets at least once every year, is elected by free vote at the General Assembly, and its members comprise representatives of 24 national societies and the six Officers.

As is traditional, in addition to the main Board and Officers' meetings, FIGO officials participated in a number of side meetings/events, including tours of the on-site ACOG Resource Center, History Library and Ralph W Hale History Museum, as well as a national society briefing.

At the Board meeting, a presentation was made to ACOG from FIGO, to thank them for their



hospitality. There was also a special presentation from the FIGO Executive Board to Professor Hamid Rushwan, FIGO Chief Executive, to thank him for his dedicated service over nine years [he is retiring from FIGO in September].

Professor Rushwan said: 'I was greatly moved to receive a beautiful gift [an engraved fruit bowl] from the Board – it will serve as a poignant reminder of past enjoyable meetings and the firm friendships created.'

He ended: 'FIGO would like to convey sincere thanks to the College and especially Professor James Martin, Past President, and Dr Thomas Gellhaus, the new ACOG President, for their hard work in hosting such a successful event which we know was greatly enjoyed and appreciated by the Board and Officers.'



L-R: Professor Hal Lawrence (ACOG Executive Vice President and Chief Executive Officer) and Dr Mark DeFrancesco (ACOG Immediate Past President) receiving a gift from Professor C N Purandare (FIGO President), on behalf of FIGO



Professor Rushwan, FIGO Chief Executive, receiving his gift from Professor Purandare, on behalf of the FIGO Executive Board

IJGO to publish with

WILEY

As of January 2017, the *International Journal of Gynecology & Obstetrics* (IJGO), the official journal of FIGO, will begin a new publishing partnership with John Wiley and Sons Inc. Wiley, the leading society publisher, has 12 journals in its women's health portfolio (including the RCOG's *British Journal of Obstetrics and Gynaecology*). This new relationship will see the IJGO move to the Wiley Online Library platform, where in 2015, over 4 million article downloads in the obstetrics and gynecology portfolio were generated. With Wiley's extensive experience



Maria Khan, Wiley's Society Director

in society publishing and IJGO's international standing, this new collaboration is certainly set to complement FIGO's vision for women's health.

'We are delighted to begin this exciting relationship with FIGO to publish IJGO,' said Wiley's Society Director, Maria Khan.



The IJGO team: Sean Fitzpatrick, Antonia Glanfield, Abi Cantor and Clare Addington

'FIGO's mission to improve women's health and rights around the world is an inspiration to us, and we look forward to working with the Federation to further advance the science and practice of obstetrics and gynecology.'

IJGO Managing Editor Abi Cantor commented: 'The journal team is thrilled to be working with Wiley and the opportunities the new partnership will bring. We thank our colleagues at Elsevier for their work on IJGO over the past 35 years, but welcome the change to a new publisher at a time when the journal industry is evolving quickly. We have already begun work with Maria and her colleagues, and hope that our authors, reviewers

and readers will enjoy using our new publishing platforms after their launch.'

Professor Hamid Rushwan, FIGO Chief Executive, stated: 'FIGO is pleased to partner with Wiley on its longstanding and highly regarded publication, IJGO. We are confident that Wiley, with its notable expertise, will provide superb support for authors and subscribers, and enable IJGO to further raise its profile.'

To follow the IJGO on Twitter: @IJGOLive

To like the IJGO on Facebook:

<http://on.fb.me/1YFkAE7>

'It has been my privilege and pleasure to serve you all ... much work still to do!'

Farewell from the FIGO Chief Executive



My dear Colleagues

My association with FIGO started long before joining the organisation in 2007!

It began with the usual attendance at FIGO's World Congresses on a frequent basis. The founder of FIGO, Professor Hubert de Watteville – who also later founded the International Federation of Fertility Societies (IFFS) and the International Association of Maternal and Neonatal Health (IAMANEH) – was a great inspiration. His well established scientific contributions, and his humility, professionalism, dedication and enthusiasm to help women and children

globally, especially in low- and middle-income countries, should be a guide for all of us, including the next generation, to follow.

It was not a planned endeavour on my part to work for FIGO as an organisation but, just like a number of milestones in my career, it happened accidentally!

When I joined FIGO as its first Chief Executive – with a skeleton staff running the organisation's day to day work – it felt like it would be a great challenge to fulfil the expected aims of the job.

However, I was luckily proved wrong in this assessment – the organisation has a ready wealth of knowledge and expertise assembled in its volunteers, starting with its Officers, Executive Board and Committee and Working Group Chairs and members. These comprise highly enlightened and internationally recognised obstetricians and gynecologists from all parts of the globe.

The Member Societies of FIGO (now totalling 130) are important inductive elements to the force of the organisation, because the main aim of FIGO is to strengthen and support the Societies to play a pivotal role in positively advancing policies and practice for the promotion of women's health.

In 2008, I developed a Vision, Mission and Strategic Plan – to which the Officers and Executive Board submitted valuable input – and FIGO began to proceed steadily towards becoming a highly recognised international Health Professional Organisation (HPO), running a number of wide-ranging women's health projects and conducting/presenting in scientific sessions across the world, concentrating on low- and middle-income countries.

These achievements would not have been possible without the great dedication and support I have received from successive Presidents, Officers, Executive Board members, Chairs and members of FIGO's Committees and Working Groups and – not least – staff at the FIGO Secretariat.

I feel that FIGO has been a major milestone in my career, a truly memorable one, and one which I will always remember with great happiness and satisfaction. I hope that the organisation will become even more effective globally to promote its noble Mission.

With my very best wishes

Professor Hamid Rushwan
FIGO Chief Executive
2007–2016

Professor Hamid Rushwan: 2007–2016

► Successful completion of major projects involving collaborative efforts:

- FIGO LOGIC Initiative (Leadership in Obstetrics and Gynecology for Impact and Change) (previously known as the 'FIGO-Gates Initiative')
- FIGO Safe Motherhood and Newborn Health Initiative
- FIGO Adolescent Sexual and Reproductive Health (ASRH) Initiative

- Gestational Diabetes Workshop project

- Gestational Diabetes Initiative
- Advocacy for better practices in PPH and PE/E project

► Implementation of major projects involving collaborative efforts:

- Post Partum IUD Initiative project
- Prevention of Unsafe Abortion Initiative
- Misoprostol Initiative
- Helping Mothers Survive Bleeding after Birth project
- Essential Interventions project
- Global Maternal Nutrition Guidelines project
- Fistula Training Initiative
- Hyperglycemia in Pregnancy project

► Enhancement of FIGO communications

► Increased partner contact with individual organisations

► Strengthened contact with Member Societies

► Support to the activities of the many FIGO Committees and Working Groups

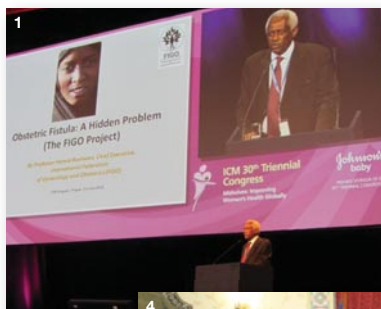
► Representation of FIGO at many meetings related to enhancing the partnerships and effectiveness of FIGO globally and at regional levels

► Creation of the African Federation of Obstetrics and Gynecology (AFOG)

RETIREMENT OF FIGO CHIEF EXECUTIVE

In pictures: Professor Hamid Rushwan, 2007–2016

1. Professor Rushwan represented the work of FIGO at many major congresses and events
2. Visiting the world-renowned Hamlin Fistula Hospital in Ethiopia – FIGO's Fistula Surgery Training Initiative has a base there
3. Regular contact with members: Convening with FIGO's Japanese Member Society for the JSOG Congress in 2014
4. Meeting the President of Nepal in 2013
5. Outlining the importance of education – speaking at a FIGO Adolescent and Sexual Reproductive Health (ASRH) Workshop in 2010



6. The FIGO-SAFOG-SLCOG conference in 2014 was a huge success
7. The importance of capacity building – FIGO's LOGIC Initiative, funded by the Bill & Melinda Gates Foundation, was a major success, steered by Professor Rushwan's effective leadership
8. Enjoying a visit – together with Lord Naren Patel, Emeritus Co-Chair of the FIGO Fistula Committee – to the home of Dr Catherine Hamlin, Co-founder of Hamlin Fistula, Ethiopia
9. In conversation at his first FIGO Congress in Cape Town, 2009
10. Taking a moment with the Founder of the global Safe Motherhood Movement (and FIGO Past-President), Professor Mahmoud Fathalla
11. A lively meeting of the African Federation of Obstetrics and Gynecology, 2013
12. With Professor Marleen Temmerman of the World Health Organization (WHO)
13. With FIGO Immediate Past President Professor Sir Sabaratnam Arulkumaran and Dr Francoise Shenfield at the ICM Congress in 2014

'Women Deliver' reignites passion and inspires attendees

FIGO was thrilled to be involved in the 4th 'Women Deliver' Conference (16–19 May) in Copenhagen, Denmark. As the largest global conference on the health, rights and wellbeing of girls and women in the last decade, it brought together almost 6,000 people from 169 countries to focus on implementing the Sustainable Development Goals (SDGs) to meet the needs of girls and women. FIGO participated in several ways.

A FIGO booth was used to share information about a number of FIGO projects; disseminate new FIGO guidelines on adolescent, preconception and maternal nutrition (APMN) and gestational diabetes; and distribute recent editions of FIGO's International Journal of Gynecology and Obstetrics (IJGO). The APMN project highlighted how FIGO is working towards achieving nutrition-focused SDGs, particularly goal 2.2, which calls to end all forms of malnutrition by 2030 and address the nutritional needs of adolescent girls and pregnant and lactating women.

Professor Moshe Hod and Dr Anil Kapur, respectively the Chair and Advocacy Subgroup Chair of the FIGO Hyperglycemia in Pregnancy (HIP) Working Group, highlighted FIGO's work in collaboration with the World Diabetes Foundation, which calls for countries to follow FIGO's global framework for action to improve the diagnosis and care for women with gestational diabetes. They drew attention to the growing global burden of diabetes in pregnancy and how diagnosis and management could help turn the tide of the diabetes/non-communicable disease (NCD) pandemic. In line with the conference focus, this was linked to the SDGs, in



FIGO's Matthew Pretty enjoys gestational diabetes awareness-raising at the Novo Nordisk booth, with Rikke Fabienke, Project Manager, 'Changing Diabetes in Pregnancy'

particular goal 3.4, which calls for reducing by one third premature mortality from NCDs through prevention and treatment.

In collaboration with Gynuity Health Projects, FIGO held a cocktail event entitled 'Postpartum haemorrhage [PPH]: Still the leading cause of maternal deaths. Time for broader thinking and greater innovation?', which was moderated by Dr Jerker Liljestrand of the Bill & Melinda Gates Foundation. It highlighted some of the most

critical new thinking and research around PPH, with important implications for how we think about and manage this challenge globally.

FIGO also collaborated in a side event to launch SERAH – 'Supporting Expanded Roles for Safe Abortion Care by Health Workers' – a working group assembled to further the implementation of the World Health Organization (WHO) guidelines for expanded roles of health workers in safe abortion and postabortion care. Read more at [www.ijgo.org/article/S0020-7292\(16\)30102-3/abstract](http://www.ijgo.org/article/S0020-7292(16)30102-3/abstract).

FIGO Societies provide valuable feedback on PPH Management

– Findings from a survey with 69 FIGO Member Societies

The background – Post-partum haemorrhage (PPH) is still the leading direct cause of maternal mortality and morbidity globally. Ensuring national guidelines exist and reflect best evidence available is imperative in order to promote best practice of PPH management in-country. Key medicines required for management of PPH (such as misoprostol) must also be listed on national essential drugs lists to facilitate their availability in-country.

The aim of the survey was to find out about countries' national guidelines for PPH, and inclusion of key PPH medicines on national essential drugs lists, as well as any challenges to implementing evidence-based practice.

The results – Of 130 Member Societies, 69 (52%) responded to the survey. Of those, 56 (81%) reported the existence of national guidelines on PPH management. Of these, 33 (59%) contained guidance on use of misoprostol as a key medicine for prevention and treatment of PPH. Route, dose and indication under which misoprostol was recommended varied greatly between guidelines and from international guidelines.

Regarding national essential drugs lists, 42 (61%) reported that misoprostol was included; a smaller proportion reported that it was listed specifically for prevention (26%) and treatment (36%) of PPH. The two most commonly listed challenges to implementing guidelines that include use of misoprostol for PPH management were: lack of supportive policy or programmes for use of misoprostol; and misoprostol not being widely and regularly available.

The conclusions – FIGO calls on Member Societies to ensure their countries have comprehensive, up-to-date, evidence-based guidelines on PPH, and that key medicines are included in national essential drugs lists. Additionally, that we all continue to work towards translating evidence-based recommendations into practices at all levels.

To read the results in more detail, go to www.figo.org/figo-project-publications

Thank you to all Member Societies who took part in this survey.

FIGO is Thinking Nutrition First



Athens was the backdrop for the first meeting of the new FIGO Adolescent, Preconception and Maternal Nutrition Working Group (29–30 May 2016). This coincided with the 9th Annual Meeting of the European Society for

Paediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN), where the group also featured through a poster presentation. The group, chaired by Professor Mark Hanson, comprising experts from different medical and academic backgrounds, was established in 2015 following the publication and subsequent launch at the FIGO Vancouver Congress of *The International Federation of Gynecology and Obstetrics (FIGO) Recommendations on Adolescent, Preconception, and Maternal Nutrition: 'Think Nutrition First'* (available at [www.ijgo.org/article/S0020-7292\(15\)30034-5/abstract](http://www.ijgo.org/article/S0020-7292(15)30034-5/abstract)).

The meeting provided a forum for lively discussion on how the dissemination and implementation of the FIGO recommendations will take place going forward. These efforts will be partially focused around the team of 14 Regional Ambassadors, spread throughout the world, who are developing local adaptations of the FIGO recommendations to make them suitable for their country context. These Ambassadors will then work with in-country stakeholders to implement these guidelines and advocate for increased awareness around women's and girls' nutrition, as well as collecting data to help measure the impact of their work.

Two Ambassadors were in attendance – Professor Carlos Echeverry (Colombia) and Professor Hassan Abduljabbar (Saudi Arabia) presented the issues, challenges and successes of women's and girls' nutrition in their countries, and the group discussed how they could help them achieve their objectives.

The group started the development of a suite of resources to be used by the Ambassadors, healthcare professionals and advocates for women's and girls' nutrition in-country, which include: a nutritional diagnosis checklist; an advocacy tool giving facts and practical advice for what can be achieved at country level; and a slide set for Ambassadors and FIGO Officers to deliver at international, regional and local conferences. Upon completion these will be available on the FIGO website – watch this space!

Information courtesy of Matthew Pretty and Jessica Morris, the FIGO Secretariat

Fiji and Mongolia join the FIGO family

The Fiji Obstetrical and Gynaecological Society (FOGS) was formally launched in June 2012 by the President of the Republic of Fiji in the presence of Presidents of the Asia and Oceanic Federation of O&G (AFOG), the President of the Pacific Society for Reproductive Health (PSRH) and Presidents of National Societies of Australia and New Zealand, India, Mongolia, the Philippines and senior members of the OBGYN family from South Korea, Taiwan, Japan, Hong Kong, Malaysia and Singapore.

The launch coincided with a Council meeting of AFOG and a joint clinical workshop supported by AFOG, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) and the Fiji National University. The workshop targeted key areas in women's health, including colposcopy, ultrasound, intrapartum care and laparoscopic skills.

Since 2012, FOGS has conducted annual scientific meetings each year, combining its last meeting with the PSRH biennial conference in 2015 when over 300 delegates participated. Since its launch, FOGS has encouraged the formation of the Fiji Midwifery Association and they have conducted joint workshops in intrapartum care and the care of the perineum during parturition.

FOGS has worked with the Fiji Ministry of Health and its Clinical Services network to improve the provision of women's health in both tertiary and district hospitals. This has led to contributions to cervical cancer screening programmes, and improvements in the delivery of intrapartum care. Another area of collaboration has been in strengthening both undergraduate and postgraduate training in obstetrics and



The FOGS Scientific Conference, 10 August 2014

gynecology. Both the current President and the Secretary of FOGS hold academic appointments with the University and they have been able to liaise with RANZCOG in these initiatives.

The association with RANZCOG has been important for the fledgling Society which has a small paid-up membership of 34. This network has had several benefits. RANZCOG provides an associate membership to all those who are registered as specialists. This is supported by a continuing education programme requirement. In addition, specialist trainees are eligible to become members. RANZCOG provides scholarships and fellowships for trainees who are FOGS members. FOGS' association with AFOG is also of practical benefit – AFOG's 'Young Gynecologist' Award has been an important initiative. Last year, three FOGS' young members were selected to attend the AFOG conference in Malaysia. One of the awardees was selected as the best presenter of her research and was given a bursary to present at

the FIGO World Congress in Vancouver. Such international exposure will nurture future leadership for our Society.

FOGS – as a small, young OBGYN Society – was honored with FIGO membership in 2015. We think this association with our international organisation could be of immense mutual benefit.

FOGS' contribution to FIGO would be to share learning from activities in a low-resource setting to improve women's health in service delivery, training and research.

FIGO, on the other hand, could share some of its vast resources to strengthen our capacity to contribute to this agenda. This could take the form of fellowships for training, collaborations in research and advice on capacity building [capacity building includes the administration and running of a Society with grants and secretarial support].

Courtesy of Dr Amanda Noovao-Hill, Fiji O&G Society Secretary/Treasurer



Dr Jargalsaikhan Badarch
MD, PhD, MOGNA President

The Mongolian Association of Obstetrics, Gynecology and Neonatology (MOGNA) was founded on 22 January 2014. It is a legally recognised non-governmental professional organisation, whose mission is to

improve the health and wellbeing of women and newborn children in Mongolia; to strengthen the quality of reproductive and sexual rights with access to efficient education and services throughout their life cycle; to upgrade the practice of obstetricians, gynecologists and neonatologists through education; and to train and research to maintain a high standard of professionalism and ethical adherence.

MOGNA aims to achieve its goals by representing and supporting its members in pursuit of the maintenance of high ethical and clinical standards in obstetrics, gynecology and neonatology; encouraging the highest standards of training, both at undergraduate and postgraduate level; promoting and encouraging continuous professional development; uniting obstetricians, gynecologists and neonatologists in making positive changes; protecting the rights of obstetricians, gynecologists and neonatologists and patients' rights in Mongolia; co-operating with other international associations and

societies with similar goals; and introducing modern technologies in obstetric, gynecological and neonatological practice.

Membership is open to obstetricians, gynecologists and neonatologists in Mongolia. MOGNA works closely with the Mongolian Ministry of Health and the World Health Organization (WHO), the United Nations Population Fund (UNFPA) and other international organisations to promote and to develop its function.

Ongoing projects:

- Research project: 'Seasonal Effects of Air Pollution on Mother and Neonatal Health', with Professor David Warburton ScD, University of Southern California, Los Angeles, USA.
- Research project: 'Mother and Child Overweight in Mongolia'. This project collaborates with the Midwives' Association of Japan, Kyushu Medical University.
- Research project: 'Preventable causes of Perinatal Death and Activity Implementation Status in Mongolia', implemented with the collaboration of the Ministry of Health of Mongolia and the Mongolian Perinatology Society.

Workshops have also been conducted with the following themes:

- 'Post-partum Hemorrhage and Post-partum Sepsis'
- 'Adolescents' Sexual and Reproductive Health and Rights' (among adolescents' doctors and obstetricians). This involved collaboration with UNFPA Mongolia and the Departments of Obstetrics, Gynecology and Pediatrics at the Mongolian National University of Medical Sciences.

- 'Early Essential Neonatal Care', which trained national trainers. During this training, 'Early Essential Neonatal Care Methods' were introduced in Mongolia and clinical guidelines and standards for obstetricians, gynecologists and neonatologists in Mongolia were developed.
- 'Neonatology Common Diseases – Diagnosis and Treatment' in collaboration with the Los Angeles Children's Hospital, USA.

MOGNA has supported the Ministry of Health's 'Maternal and Child Care' Department in the development of policy documents, national protocols and training materials for addressing mothers and neonatology health in the country throughout 'Early Essential Neonatal Care'. It conducted a study on 'Chart review for EMOC cases in health facility and evaluation of care provided for newborns with special needs' with WHO and the Ministry of Health, Mongolia, in May 2016.

Being part of FIGO is a great achievement and a great opportunity for MOGNA.

We dreamt of joining FIGO to help us grow and strengthen, and to broaden collaboration at international levels so that we can achieve our goal of improving women's health in Mongolia.

In addition, MOGNA hopes that being a member of FIGO will give it much opportunity to share knowledge and experience; to publish research materials; to implement projects; and to include members in conferences, workshops and training programmes at an international level. We are available for any project FIGO would like to initiate!

Courtesy of Dr Jargalsaikhan Badarch MD, PhD, MOGNA President

Raising the profile of infertility

by Dr Edgar Mocanu, Committee Chair

The Committee for Reproductive Medicine met at FIGO HQ in April 2016.

During the two-day session, the Committee established new Terms of Reference, which included the implementation of 'The FIGO Fertility Toolbox™' (www.fertilitytool.com) through field testing, user feedback and translation into other languages; 'FIGO Infertility Minimal Care' (a one-stop investigative basic treatment backed by a one-page Committee chart); and strengthening strategic relationships with national and international organisations including the International Federation of Fertility Societies (IFFS); the World Health Organization (WHO); the American Society for Reproductive Medicine (ASRM); the European Society of Human Reproduction and Embryology (ESHRE); and national NGOs. The Committee also discussed the publication of infertility care books and slide sets for meetings.

The Committee recently participated in the



Visit www.fertilitytool.com

international infertility arena. At *Women Deliver* in Copenhagen, infertility featured on the agenda for the first time. FIGO participated in a session with fertility-focused presentations, followed by Q and As, organised by WHO under the stewardship of Dr Ian Askew, the Director of WHO's HRP (the UNDP/UNFPA/UNICEF/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction) Department. An introductory meeting between the HRP and other societies took place, offering FIGO the opportunity to introduce its activities to the WHO HRP Department and consolidate the existing excellent relationships with other

participating societies – ASRM, ESHRE, IFFS and the International Committee Monitoring Assisted Reproductive Technologies (ICMART).

In mid-June, WHO invited all societies promoting the infertility cause to the Policy and Coordination Committee (PCC) at WHO HQ. Infertility was mentioned in the Director's presentation and FIGO had the opportunity to create fertility awareness among participants, which included major funding groups. A follow-up meeting took place between the NGOs invited and the leadership of the HRP. FIGO welcomes the close collaboration developing between the NGOs and WHO, and has offered to help increase access to infertility care for all. One immediate initiative is a new WHO research position in infertility proposed by the HRP, which is fully supported by all participating societies.

Finally, during ESHRE in Helsinki, Committee member Dr Jaideep Malhotra represented FIGO at the first meeting of the 'International Evidence-based Guideline for the assessment and management of PCOS [polycystic ovary syndrome]'. This initiative will revise the previous Guideline and aims to raise awareness and improve care and health outcomes in PCOS.

Improving women's health through human rights implementation

by Professor Chiara Benedetto, Committee Chair



The Committee in action – Professor Benedetto is fifth from right, front row

The Committee for Women's Sexual and Reproductive Rights met in Turin from 30 June – 1 July 2016. Its aim is to improve women's health by integrating scientific knowledge and technology with quality processes and respect for human rights – rights to health, life, non-discrimination, privacy, confidentiality, benefit from scientific progress, information, autonomy and decision making and freedom from inhumane and degrading treatment.

Humanitarian settings, including refugees and internationally displaced persons, camps or allocations, are considered a priority. Specific curricula and checklists for professionals and educational material for women and men regarding life-saving life-styles, contraception, safe pregnancy and delivery, prevention of sexually transmitted infections (STIs), gender violence and unsafe abortion will be produced for these contexts. More globally, the following areas of priority have been identified: implementing respectful behaviour toward women; access to contraception; adoption of a healthy life-style; fertility preservation; preconception counselling; safe pregnancy and delivery; raising awareness of the risks of pregnancy with advancing maternal age; and prevention of STIs, pre-term birth, gender-based violence and unsafe abortion.

Our objective is to develop a communication campaign to ensure that the information reaches target groups: trainers, medical students, clinicians, midwives and women and men in general. As other FIGO Committees and/or Working Groups are already active in some of these areas, we plan to integrate a rights-based approach into their work.

Interactive Workshops are being organised globally to educate professionals towards a thinking approach where women's health and human rights are wholly integrated.

Consideration is being given to a change in our Committee name, from 'Women's Sexual and Reproductive Rights' to 'Women's Health and Human Rights', as this more clearly expresses our mission.

We envisage developing a network with medical training centres, the International Confederation of Midwives (ICM), intergovernmental organisations, NGOs, international charitable organisations, national patient groups and local communities, and to identify ambassadors willing and able to communicate our message to the general public in order to disseminate our project worldwide.

An advocacy strategy will also be developed to target policy makers and regulators to further the recognition, promotion and protection of girls' and women's human rights globally, and at country level. Winning rights for women means investing in a fairer, equal society where health rights, access to education and freedom from violence are assured to each and every woman.

A question of ethics

by Dr Frank A Chervenak, Committee Chair

A meeting of the Committee for the Ethical Aspects of Human Reproduction and Women's Health took place in July, at FIGO HQ in London. All members were in attendance or contributed in absentia. The dynamic of the group was excellent, and the work ably supported by Marie-Christine Szatybelko from the FIGO Secretariat.



Dr Frank A Chervenak, Committee Chair (centre), with members

On the first day, the Committee's first item of business was to update FIGO statements on ethics from the years prior to 2000. The main item was the preparation of a new statement: 'Professionalism in Obstetric and Gynecologic Practice', which will form the basis for future statements from the Committee. It emphasises the following points: professionalism is an essential component of obstetric and gynecologic practice; all obstetrician-gynecologists should identify and routinely fulfil their ethical obligations to patients, to other physicians and healthcare professionals, to healthcare organisations, to insurance companies and governments that pay for patient care, and to society, on the basis of ethical principles and professional virtues, as expressed in the professional responsibility model of ethics in obstetrics and gynecology. FIGO is committed to supporting obstetrician-gynecologists in their fulfilment of these transcultural, transreligious, and transnational ethical obligations. Subsequently, a slide set was prepared for global education.

The second day focused on the preparation of another new statement: 'Professionally Responsible Advocacy for Professional Liability Law'. Professional liability, with incurred expenses for premiums, attorney fees, payouts and other costs, has become of increasing concern for obstetrician-gynecologists around the world. Perhaps of even greater concern are public vilification of physicians and criminalisation of negligence. These changes are not only a source of personal stress, but also contribute to obstetrician-gynecologists leaving practice. The new FIGO statement will provide an ethical framework to guide professionally responsible advocacy for the improvement of professional liability law.

In addition, the Committee actively discussed a statement being planned by FIGO in conjunction with the International Confederation of Midwives (ICM): 'Non-Medical Gender-Biased Sex Selection'.

The meeting concluded with planning for future Committee activities, including statements on gene patenting, abortion, sexual boundaries with patients, the number of embryos to be transferred in assisted reproduction, HIV and the Zika infection.

Professor Lynette Denny awarded IARC Medal of Honour

FIGO extends sincere congratulations to Professor Lynette Denny – Head of the Department of Obstetrics and Gynaecology and head of the South African Medical Research Council's Gynaecological Cancer Research Centre – who has recently received the prestigious International Agency for Research on Cancer (IARC) Medal of Honour.

Professor Denny is an esteemed Past Chair of the FIGO Committee on Gynecologic Oncology, and remains a Member.

She has been awarded the honour as a result of her dedicated work on cervical cancer prevention among disadvantaged communities.

She received the accolade on 9 June 2016 at the IARC Conference on Global Cancer; she also presented a keynote address.

Professor Hamid Rushwan, FIGO Chief Executive said: 'This recognition for Professor Denny is richly deserved. FIGO is immensely lucky to retain her expertise on its Committee.'

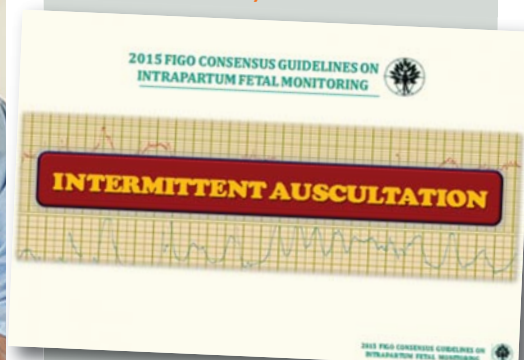
Professor Denny said: 'It was indeed a great honour to receive this award and I accept it on behalf of my many fellow Africans trying to put cervical cancer prevention on the public health agenda.'



Professor Lynette Denny

FIGO Intrapartum Fetal Monitoring Course resource now available!

The recent publication of the '2015 FIGO consensus guidelines on Intrapartum Fetal monitoring' (<http://figo.org/figo-committee-and-working-group-publications>) – involving 50 experts across the world – was followed by the development of a FIGO Intrapartum Fetal Monitoring Course resource (PowerPoint slides) now available for free download on the FIGO website (<http://figo.org/news/figo-intrapartum-fetal-monitoring-course-resource-now-available-download-0015307>).



This resource is aimed at helping healthcare professionals organise learning sessions on intrapartum fetal monitoring in local facilities, based on the 2015 FIGO consensus guidelines. The overall objective is to improve fetal monitoring practices throughout the world and reduce the burden of suffering associated with intrapartum fetal hypoxia/acidosis.

Currently, the available slidesets are in English, Portuguese and Spanish – Chinese and French versions are also being prepared.

The resource was developed by FIGO's Safe Motherhood and Newborn Health (SMNH) Committee, and co-ordinated by SMNH Committee member Professor Diogo Ayres-de-Campos. FIGO is very grateful to Dr Mariana Rei from Porto and Isabel Lloyd, SMNH Committee member, for their collaboration in the translations.

To date, the resource is also proving highly popular on the FIGO Facebook page, being viewed by a high number of Facebook subscribers.

FIGO project infographics now available in several languages!

Two major FIGO activities, the FIGO Gestational Diabetes Initiative and the FIGO Global Maternal Nutrition Guidelines project, have

produced sets of valuable infographics for information and dissemination.

With recent translations added, the Gestational Diabetes Infographics are available in English, French, Spanish, Chinese and Bulgarian and the Adolescent, Preconception and Maternal Nutrition infographics are available in English, French, Spanish and Chinese.

Visit www.figo.org/figo-project-publications.



Diary Dates

The 102nd Annual Congress, Korean Society of Obstetrics and Gynecology
23–24 September 2016, Korea, Seoul
www.ksog.org/eng

16th Congress of the Cuban Society of Obstetrics and Gynecology
4–7 October 2016, La Habana, Cuba
www.ginecobstcuba.com

FIAPAC Conference 'Improving women's journeys through abortion'
13–15 October 2016, Portugal, Lisbon
www.fiapac.org/en/program/20/lisbon-2016

RANZCOG 2016 Annual Scientific Meeting
16–19 October 2016, Australia (& NZ), Perth, Australia
www.ranzcog2016asm.com.au

ICM Africa Regional Conference
17–21 October 2016, Lesotho, South Africa
www.internationalmidwives.org/events

31st Argentine Congress of Gynecology and Obstetrics 2016 (FASGO 2016)
19–21 October 2016, Salta, Argentina
www.fasgo.org.ar

ISOFS Conference (International Society of Obstetric Fistula Surgeons)
24–28 October 2016, Abuja, Nigeria
www.isofsabuja2016.com
(website coming soon)

Global Conference on Maternal Infant Health – Strategies and critical issues for ameliorating global health of the mother, the fetus and the newborn
4–6 November 2016, Florence, Italy
www.eiseverywhere.com/ehome/155029

67th FEMECOG Congress
6–10 November 2016, Yucatan, Mexico
www.67cmgo.org.mx

The 24th World Congress on Controversies in Obstetrics, Gynecology & Infertility (COGI)
10–13 November 2016, Amsterdam, Netherlands
www.congressmed.com/cogi

FIGO/AFOG/SAGO/Burkina Faso Society Conference
21–24 November 2016, Ouagadougou, Burkina Faso
www.sago.sante.gov.ml

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FIGO 2018

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