

PSREI Newsletter

Volume 9, Issue 18

May 2007

From the President

Corazon T. Lim, MD, FPOGS



Greetings!

New beginnings often come with the price of expectation. On the one hand, frontrunners of change have the responsibility of surpassing their prede-

cessors. Thus, I believe that the challenge of equally – or even surpassing – the dynamic leadership that has paved the way for the society's present state is upon me. On the other hand, I have in my hands the ability to steer this august body into a path unlike any other before and fter my privileged stay as its president.

I believe that the election of a new set of officers every so often should not be looked at as a different vision coming in. I propose that we look at it as some sort of changing of the guards. After all, the leadership and the ensuing success of our society does not stem from its officers but in the integral role of every member.

With that, I welcome everyone to a season of new experiences, new opportunities and new triumphs for our society! And I welcome all my fellow members – leaders in their own respective rights!

Mabuhay kayong lahat!

2nd PSREI & PSCM JOINT MIDYEAR CONVENTION OPENS TODAY!

ANNUAL PSREI CONVENTION SET OCTOBER 3-5

"Reproductive Endocrinology and Infertility: Responding to the Challenges of Current Practice" is the overlying theme as the 13th Annual PSREI Convention gets underway at the Hotel Intercontinental Manila, Makati City. A banner attendance of REI doctors and enthusiasts is expected as guest foreign speakers and local experts deliver the latest in the field on October 3-5, 2007. PSREI president Dr. Corazon T. Lim shall lead holding of the convention and shall welcome all participants to the annual meet.

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EDITOR'S CORNER

Noel E. Raymundo, MD

Protecting our Integrity



The dulling of borders brought about by globalization has ushered in the slow stream of Filipino health workers into other countries. This phenomenon is truly a testament to the fact that Filipinos are able to meet the standards and demands of the global market. Furthermore, we as health workers bring with us that recognizable "brand" of Filipino service — one that underscores our caring and sharing nature. This worldwide recognition of excellence has become the cornerstone of the integrity that we so delicately hold. It is this integrity — founded on sound training and tempered by gathered experiences — that drives medicine as a profession, as a business or as a passion.

This integrity, easily marred by a slip of the scalpel or the rashness of a diagnosis, has a pervasive effect. After all, we are all part of a community where the triumph of one merits accolades for all while the mistake of another bears as a failure for the rest. In recent history where stories of isolated malpractices and debatable test results have dented not only our colleagues but this industry as a whole, the reality of the fragile integrity of the Filipino doctor, nurse or health worker is pressing. The constant reminder of protecting such is a constant cudgel to everyone.

With our gift of aiding the creation of life, our task becomes more evident as we extend our service not only to the couple we help (the lives that are) but also to the children they hope to conceive (lives that will be). The society becomes a crucial partner to each member as presents various opportunities in honing this integrity. The environment of service and excellence through the fellowship of the society becomes one of the many driving forces that seeks to bolster and safeguard this integrity.

Protecting the very reason why our patients here and abroad continually trust us with their lives is an ever-present challenge. With this comes the constant mantra that each doctor becomes an ambassador to the cities and provinces, to the hospitals and clinics, here and abroad. This profession where we are called to touch and nurture lives demands nothing less than utmost care and flawless service. Hence, protecting our integrity in what we do means protecting the lives we continuously touch and help create.

INTERNATIONAL CALENDAR

July, 2007

 23rd Annual Meeting of ESHRE by European Society of Human Reproduction and Embryology (ESHRE)
 01-Jul-07 to 04-Jul-07 Lyon (Lyon Convention Centre), FRANCE EUROPE (Reproductive Medicine - Female)

September, 2007

14th World Congress on In Vitro Fertilization & the 3rd World Congress on In Vitro Maturation by International Society for In Vitro Fertilization (ISIVF)
 15-Sep-07 to 19-Sep-07 Montreal (Fairmont The Queen Elizabeth), PQ CANADA (Reproductive Medicine - Infertility)

October, 2007

- 17th World Congress on Ultrasound in Obstetrics and Gynecology by International Society of Ultrasound in Obstetrics and Gynecology (ISUOG) 07-Oct-07 to 11-Oct-07 Florence (Palazzo dei Congressi / Palazzo degli Affari), ITALY (Medical Imaging - Ultrasound - OB/GYN
- 17th World Congress on Ultrasound in Obstetrics and Gynecology by Society for Maternal-Fetal Medicine 07-Oct-07 to 11-Oct-07 Florence (Palazzo dei Congressi / Palazzo degli Affari), ITALY (OB - Maternal Fetal Medicine)
- 63rd Annual Meeting of the ASRM by American Society for Reproductive Medicine (ASRM)
 13-Oct-07 to 17-Oct-07 Washington, DC (Washington Convention Center), DC USA (Reproductive Medicine - Female)
- <u>Vascular Imaging and Doppler</u> by Thomas Jefferson University Hospital
 17-Oct-07 to 20-Oct-07 Philadelphia (Thomas Jefferson University Hospital /Jefferson Ultrasound Research and Education Institute), PA USA (**GEN - Medicine**)
- by Gulfcoast Ultrasound Institute
 29-Oct-07 to 30-Oct-07 St. Pete Beach (Gulfcoast Ultrasound Institute), FL USA (Medical Imaging Ultrasound OB/GYN)

THE PSREI NEWSLETTER

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EDITORIAL STAFF:

Editor-in-Chief : Dr. Noel E. Raymundo
Contributors : Dr. Corazon T. Lim
Secretariat : G/F POGS Bldg., #56 Malakas

Street, Diliman, Quezon City

Telefax: 920-9565

Email: psrei2001@yahoo.com

13th Annual Convention

October 3-5, 2007 Hotel Intercontinental Manila, Makati City

"Reproductive Endocrinology and Infertility: Responding to the Challenges of Current Practice"

October 3, 2007

7:00 - 8:00am - Registration

8:00 - 8:30am - Opening Ceremonies

Morning Session:

Moderator: Dr. Santiago A. Del Rosario

8:30 - 9:00am - Recent Trends in the Management of

Osteoporosis

Dr. Florante P. Gonzaga

9:15 - 9:45am - PCOS: Current Evaluation and Management

Dr. Eileen M. Manalo

10:00 - 10:30am - Advances in Ultrasound in ART

Dr. Ma. Trinidad R. Vera

10:45 - 11:15am - New Hormonal Strategies for Dysfunctional

Bleeding

Dr. Lilia P. Luna

11:30 - 1:00pm - Luncheon Symposium

c/o Astra Zeneca

Afternoon Session

Simultaneous Session:

Time	Function Room 1	Function Room 2
1:00 – 2:00pm	Eggs Embryos and Endometrium: Minimizing Hype and Realizing Hope	Guidelines in REI
2:00 – 3:00pm	Menopause and Osteoporosis: Evidence Based Approach in Menopausal Medicine	Amenorrhea in the Adolescent: Cause, Effect and Consequences
3:00 – 4:00pm	Gynecologic Endoscopic Surgery	Optimizing IVF Results by Tailoring Ovulation Stimulation Protocols
4:00 – 5:00pm	Reproductive Imaging: See Better, Do Better	Ethics, Law, Policy and Science: Finding Harmony in Clinical Practice

October 4, 2007

Morning Session:

Moderator: Dr. Rosalinda B. Arceo

8:30 - 9:00am - Surgical Menopause: Is Prophylactic

Bilateral Oopitorectomy Justifiable

Dr. Delfin A. Tan

9:15 – 9:45am - Guidelines in Reproductive Endocrinology

and Infertility: Friend or Foe?

Dr. Ma. Antonia Habana

10:00 - 10:30am - Recent Trends in the Diagnosis and

Treatment of Pelvic Endometriosis

Dr. Gilda G. Martinez

10:45 - 11:15am - In Vitro Maturation: Recent Technology in

ART

Dr. Leonardo A. Almeda

11:30 - 2:00pm - Luncheon Symposium

Business Meeting

Afternoon Session:

Moderator: Dr. Milagros Chan

2:00 – 2:30pm - Super Ovulation Strategies in ART

Dr. Ian Olofson

2:30 - 3:00pm - The use of GnRH Antagonists in Assisted

Reproduction Dr. Ian Olofson

3:00 – 3:30pm - Male Infertility: What Works?

Dr. Virgilio M. Novero Jr.

3:30 – 4:00pm - Hysteroscopic Myomectomy

Dr. Blanca C. De Guia

4:00 - 4:15pm - Open Forum

4:15 – 5:30pm - Research Paper Presentation Contest

Interesting Case Paper Presentation

October 5. 2007

8:00 – 12:00nn - Workshop on Ovulation Induction

THE PHILIPPINE BOARD OF REPRODUCTIVE ENDOCRINOLOGY & INFERTILITY

Vision:

The ultimate vision of the board of Reproductive Endocrinology & Infertility is to provide the highest quality standards of education, training, research & service towards certification for the specialty practice of endocrinology & infertility.

Mission:

Committed to the highest quality standards of education and training, research & service in Endocrinology & Infertility, the Philippine Board of Reproductive Endocrinology & Infertility is in the forefront in the formulation, development and implementation of certification & accreditation of Fellowship Training Program in Reproductive Endocrinology & Infertility.

Goal:

To be on the forefront in the formulation, development and implementation of national quality standards for certification of Diplomates and accreditation of Fellowship Training in REI in the Philippines.

Objectives:

- To conduct examinations and/or other procedures to test the qualifications of candidates leading to certification as Diplomates in Reproductive Endocrinology & Infertility. The criteria for certification shall be applied equally to all candidates.
- To issue certificates or any evidence of competence to eligible physicians who the PBREI considers to have demonstrated adequate knowledge & professional competence relating to the practice of REI.
- 3. To accredit the Fellowship Training Program of all hospitals that have qualified for accreditation and award re-accreditation to those who have continued to maintain their accredited programs.
- 4. To ensure the establishments & maintenance of quality assurance of the faculty & staff of accredited institution.
- To evaluate the cognitive performance of fellows-in-training through an annual in-service training examination for standardization and upgrading of existing program.

Composition:

The Philippine Board of Reproductive Endocrinology and Infertility (PBREI) shall be composed of all past presidents of the society, one of whom will be the chairperson.

A secretary recommended by the chair will serve as the administrative officer and is a non voting member. The secretary must be an active fellow for at least 5 yeats and must come from an academic sector with a minimum rank of assistant professor.

The Chair will serve for a period of 1 year.

Functions of the Board: It:

- shall certify Diplomates in REI upon passing the certifying examination.
- 2. shall formulate the requirements, rules & regulations governing

the Diplomate Certifying Examination.

- 3. shall determine the requirements for a candidates re-examination for a specified number of tries.
- shall set the minimum requirements for accreditation of a Fellowship Training Program in REI and periodically audit or monitor compliance to such standard.
- shall recommend the suspension of accreditation of a training program for failure to meet requirements. Fellow in such program shall not be certified for the duration of suspension.
- 6. shall determine fees for accreditation, re-accreditation, examination & re-examination.
- 7. shall conduct annually an in-service examination.
- shall formulate additional requirements, rules & regulations deemed necessary for efficient functions of the PBREI, and shall enforce such immediately.
- shall continuously promote the infusion of advanced, modern & relevant technology into the health care delivery system cacredited hospitals to be concurrent in the global trends in health care relevant to health needs.

Academic Program:

The program consists of 2 years documented, graduated and progressive training in hospitals accredited by the PBREI. The instructional objectives and program for academic activities for the fellows in each year of training must be submitted in the core curriculum set by the PBREI.

Consortium Program:

This is intended to assist a program until it is fully established to stand on its own as an accredited training program. Necessary guidelines have been set that include such criteria as proximity or accessibility of institution common curriculum, common consultants, availability for supervisions, common conferences, sharing of patients and responsibility, and others that should be worked out to define the relationships in memorandum of agreement approved by the PBREI. The consortium is allowed for only 5 years in existence.

Guidelines for Evaluation of Fellowship Training Program

- 1. The program must have a competency based core curriculum in the format prescribed by the Philippine Board of REI.
- The section must have at lest 3 board certified consultants. (all fellows of PSREI)
- The section head & the training officer must be a PSREI & POGS fellow
- 4. Trainor to trainee ratio is 1:1
- In a consortium there should be a lead hospital which must be a university hospital
- Training facilities must include out patient services, teachings, & training beds, operating room for major gynaecologic surgery, endoscopy room for laparoscopy & hysteroscopy, an ultrasound section, a laboratory for semen analysis, sperm washing,

hormonal evaluation and immunologic testing. Lecture room and or conference room. Access to assisted Reproductive Technology laboratory.

- 7. Patient load requirements: Collectively by Fellow as Primary Physician
 - a. minimum of 20 patients/week in out-patient clinic
 - b. minimum of 3 endoscopic procedures per week
 - c. minimum of 3 major reproductive operations per month
 - d. exposure to ART procedure at least 15 per year
 - e. minimum of 25 ultrasound scanning per week
 - f. minimum of 4 cases of IUI per month
- 8. Didactic programs should include lectures, case conferences, pre & post operative conference, journal club & clinico-pathologic conference in the following topics:
 - a. female & male reproductive tract anatomy & embryology
 - b. reproductive endocrinology
 - c. regulation of the menstrual cycle
 - d. sperm & egg transport, fertilization & implementation
 - e. normal & abnormal sexual development
 - f. abnormal puberty & growth problem
 - g. ovulation & polycystic ovary
 - h. hirsutism
 - menstrual disorder
 - j. breast
 - k. menopause & treatment of problem in the menopause
 - I. obesity & reproductive
 - m. thyroid & reproduction

- n. ART
- o. male infertility
- p. pediatric & adolescent gynecology
- q. reproductive immunology
- r. molecular biology & genetics
- s. fertility regulation
- t ovulation induction
- u. endoscopy
- v. ultrasound in reproduction & infertility
- 9. section must submit annually the following:
 - a. statistical reports in procedures and number of cases done by the fellows.
 - b. 2 year OPD census
 - c. list of consultant staff
 - d. names of fellows with their corresponding year level
 - e. weekly activities
 - training program based in the standard training program
 - g. certificate of accreditation for training
 - log book for each fellow for inspection.
- Research committee to monitor interesting and research cases of fellows
- 11. Documents of Training Institutions must be kept for 5 years.
- 12. Site inspection of the hospital and evaluation of the program shall be accomplished by designated number of PBSREI. Site inspection is done every 2 years.
- 13. Accreditation maybe revoked at any time during the 2 year for non-compliance with the requirements.

Guidelines in the IUI

Ethics and practice of IUI

Intrauterine insemination is a medically and ethically acceptable second-line technique in the treatment of various causes of infertility including unexplained infertility, and specific conditions of male and female infertility.

Qualifications to practice IUI

Because of certain risks in intrauterine insemination especially in cases where ovarian stimulation is required, a minimum standard of competence (Level II Care, Section 2) is necessary. This corresponds to PSREI fellows with certified competence in the conduct of IUI including ovarian stimulation and who are knowledgeable about the effectiveness, adverse effects and costs of IUI treatment. Responsibilities of the IUI practitioner

- Counseling regarding the benefits and risks of IUI
- 2. Counseling regarding the benefits and risks of ovarian stimulation (when applicable)
- A report of the IUI procedure which includes pertinent information (especially sperm count and motility) about the pre-wash and post-wash samples and a description of the concluded IUI procedure (difficulty, manipulation if any, catheter used, ultrasound guidance, etc)
- 4. Inform the couple that, in the event of a pregnancy, children conceived after IUI are considered legitimate children provided that a written instrument is executed by both husband and wife authorizing such an insemination before the birth of the child (Article 164 of the Family Code). This instrument shall be recorded with the civil registrar with the birth certificate of the child.

2007 BOARD OF DIRECTORS



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MEMBERSHIP QUALIFICATIONS.

The active membership shall consist of physicians who are certified Diplomates or Fellows of the Philippine Obstetrical and Gynecological Society, of high ethical standing. The founding members are classified as active members. To maintain active membership, the member shall comply with the duties and responsibilities as provided for in section 5, Article 1 of this By-laws.

Active Members:

- Abat, Marinella Agnes, MD
- Abeleda, Ma. Lourdes R., MD
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- 61. Co-Sy, Eileen, MD
- Yuchongtian-Sy, Irene Ng, MD 62.
- Tan, Delfin A., MD 63.
- 64. Tan, Maria Victoria R., MD
- 65. Tanangonan, Gladys G., MD
- Tongco, Carmencita B., MD
- Torres, Romerico F., MD 67.
- Vera, Ma. Trinidad R., MD
- Villacorta, Ma. Cecilia M., MD
- Villamar, Lazarito Q., MD
- Villamayor, Teresa Quejano, MD

News 13its

Resident's Interesting Case and Research Paper Contests Set

Research Committee Chair Dr. Marlyn T. Dee announces the holding of the annual Research Contest and the Residents' Interesting Case Contest during the Annual PSREI Convention on October 4, 2007 at the Hotel Intercontinental Manila, Makati City. Cash prizes of P12, 000 for first place, P7, 000 for second place and P5, 000 have been earmarked for each of the two contests. Deadline for the submission of entries have been set on August 24, 2007.

GENERAL RULE:

The contest is open to all OB-GYN Residents in POGS approved Residency Training and Fellows in Training and Service in Reproductive Endocrinology and Infertility

SPECIFIC RULES:

- 1. Subject matter must deal on the science and practice of Reproductive Endocrinology and Infertility
- 2. There is no limit to the number of papers a resident or fellow may submit.
- 3. The principal author must be a resident in OB-GYN or Fellow in Training of PSREI and the co-author must be a member of the PSREI.
- 4. Winning papers will be presented in the scientific session of PSREI annual convention.
- 5. Principal author should submit the winning paper for publication in the Philippine Society of Reproductive Endocrinology and Infertility Journal and/or Philippine Journal of Obstetrics & Gynecology. Author will have the option to have it published in International Journals. Notice should be arranged with the Committee on Research who will forward such notice to the PSREI Board of Directors.

PSREI written exam set in July

The written examinations of the PSREI have been set on July 20, 2007. This examination is open to all certified fellows and diplomates of the POGS of high standing and has completed training in approved training programs in Reproductive Endocrinology and Infertility locally or abroad. For more details, please contact the PSREI Secretariat at 920-9565 or Dr. Trinidad R. Vera at 725-7147. Successful examinees will be inducted into the society during the annual convention in October.

Requirements for Examination:

The Candidate must be:

- A Filipino citizen
- 2. A graduate of a recognized fellowship program in Reproductive Endocrinology & Infertility (2years program)
- 3. Duly licensed to practice Medicine in the Philippines
- Must be a Fellow or Diplomate of POGS.
- A foreign trained graduate of Reproductive Endocrinology & Infertility who meets the requirements set under this category.
- B. The candidate must submit the following:
 - Duly accomplished PSREI application Form (in duplicate) with 2 passport size pictures and endorsement of 3 PSREI fellows.
 - 2. Official documents (photo copy)
 - a. medical diploma
 - b. PRC license
 - Certificate of completions of residency in an accredited OB- Gyn program by POGS duly signed by Department Chairman, Dean of the College of Medicine or Hospital Director

- d. Certificate of POGS Membership (Diplomate or Fellow)
- e. Certification of Training in Reproductive Endocrinology & Infertility 2 years signed by the Head of the Section, Chair of the Department and the Dean or Director of the Hospital.
- A compilation of 100 cases (70% minor, 30% major) performed within the 2 years prior to application with certification from the section head & chair of the Department attesting to the authenticity of cases reported & managed, (10 major; 20 minor) with case discussion.
- submission of 10 major cases & 20 minor with discussion & references.
- Exposure to 5 ART cases as attested by the ART Medical Director with discussions.
- 1 Completed Research Paper (prospective or retrospective) &
 2 interesting cases. The candidate must be the principal investigator/author.
- Must have attended all PSREI scientific activities with certificate copies