Presidential Address

Making a Difference: Learning from Our Giants, Leaning on the Present, Building for the Future

Good evening. This Global Congress is about building upon the legacy of the people before us and taking gynecologic surgery to the next level. And for me it is largely about mentorship, learning from the giants of our past and then leaning on the present—the people in this room—to build for the future.

Who were my giants? My first giant was Maria Delivoria-Papadopoulos. I was a freshman at the University of Pennsylvania, having come from a small-town high school, not knowing a soul, and made my way to her lab where she took me under her wing. I eventually determined that I wanted to go into medicine, and she helped me get into Columbia—the first medical school in the United States. And then her mentoring continued, as she said, “Gary, you have to go to Pennsylvania Hospital for residency. It’s the place that’s the best fit for you.” So, I proudly went on to Pennsylvania Hospital, which was founded in 1751 and is our nation’s first hospital. Dr. Marcello Ceccaroni from Italy shared with me that his hospital dates all the way back to 1288, so I feel our international colleagues do have a little more history than we do!

In residency at Pennsylvania Hospital, I developed incredible lifelong friendships with attendings and fellow residents such as Frances Batzer, Ben Gocial, Dennis Easter, Mark Woodland, Jeff Peipert, and Norman Breast. Also, enter my second giant, Stephen Corson, former AAGL President. Dr. Corson was everything. He was an REI (which was where I eventually ended up in) with his own endocrine lab in his office, which was virtually unheard of. He was involved in a myriad of studies—including, while I was a resident, the sentinel study on Synarel, which was the precursor to Lupron, published in the New England Journal of Medicine. This study brought GnRH agonists to the United States. Dr. Corson was incredibly renowned, and people came from all over the world to watch him operate. He invented multiple surgical instruments, including the Corson Myoma Grasper, which I feel I use every week. Stephen mentored me, and, along with Mark Woodland, we published my very first paper ever under his tutelage. Among his many accomplishments, he was the Editor-in-Chief of JMIG following Dr. Hunt. And he eventually, when I was more senior, put me on the JMIG Editorial Board. I met a number of people through Dr. Corson, including Barbara Levy, the first female president of the AAGL, who remains a valued colleague today.

After my residency, I was off to fellowship at the University of Connecticut. There I met Anthony Luciano—another giant in my career and another former AAGL President. Stephen was YAG Laser, Tony was CO2 laser, so I was fortunate enough to learn both. Tony had interests in menopause and adhesions. Fellowship has a large research component, in addition to polishing clinical skills, so we published a lot together. Tony is truly a Renaissance Man, and he taught me a lot of things, not the least of which is family. He practices to this day with his daughter with whom he has a fellowship. Along these lines, he mentored me in a lot of ways, not just research. This included introducing people to me who were instrumental in who I became, including Togas Tulandi and the Nezhats. It is really one of the thrills of my presidency to be able to honor some of my giants.

Following my fellowship, I went to Brown University, and I have been there to this day. Here I have had incredible colleagues such as Bala Bhagavath and Sandee Carson. Sandee was my Division Director, and she did me a great honor when she gave a speech at APGO/CREOG, talking about what people had taught her. She said, “Gary taught me to never say no.” This has been a signature of my career—to seize opportunities and make the most of them, to be appreciative of them, and to learn from them. I have tried to take these principles with me educating the next generation.

In my close to 30 years with the AAGL, I have had the privilege of being involved with many committees. Each one involved a lot of work, a lot of satisfaction, a lot of growth, and a lot of meeting people along the way. I suspect everyone in this meeting hall has tremendous friends that they’ve met through the AAGL, through their hard work, through their travel, and through these incredible meetings. Many of my mentors have also become my friends, including Drs. Adamson, Liu, and Magrina. I have learned that not every mentor is older than you, some junior people teach you, such as Dr. As-Sanie, who leads by example and talent. And one of the greatest privileges of my time in the...
AAGL and in my time in leadership roles in the AAGL is meeting people such as these.

Along these lines of mentorship and opportunity, Dr. D. Alan Johns took a chance on me and offered to let me start this crazy idea of a LISTSERV back in 2004. The LISTSERV was so much work with so much time and energy spent on it. But it was very successful and rewarding. It is also a great example that it’s important as you move forward to let other people take over, so we have Dr. Kyle Wohlrab, who is now running it along with the AAGL office.

Dr. Falcone, having seen that I was on the JMIG Editorial Board, was looking for a second in command and offered me the spot of Deputy Editor on JMIG, which has been just an astronomical amount of work and an astronomical amount of fun. And under his leadership, we took what Dr. Corson, and everyone before us created, built upon it and just crushed the Impact Factor, which is the mark of the how widely quoted is your journal. And without the mentorship of Dr. Corson, without the opportunities within the AAGL, without learning how to do research under Dr. Luciano, these opportunities would never have happened for me.

So, what is the AAGL doing and what have I and your Board been doing to build upon the incredible organization from the legacy of the giants before us? Importantly, we are an international organization. We have 47 sister societies outside the US. These societies aren’t outside of the AAGL, they are the AAGL. We collaborate internationally, and if you visit aagl.org you will see a number of meetings scheduled for this year, in countries like Italy and Colombia. In fact, consider this as a shameless plug if anyone wants to go to any of these amazing international meetings. Each meeting has its own special flavor with things that you will take away along with friendships and relationships that you will build upon. Our membership is about 50/50 US and international, and, again, one of the privileges of being on the Board is working with all these incredible international colleagues as well as our US-based leadership.

Your Board works hard! We have a WebEx meeting every month, and then 4 times a year we have an in-person board meeting. In 2018 we had one in California, and then I was able to host one in my home state of Rhode Island. It is a lot of hard work, but it is also an incredible honor. And as the Board works really hard, the staff also works incredibly hard behind the scenes. You can see their efforts, along with that of the Scientific Program Committee, with the results of this meeting.

A word on our incredible FMIGS program. I have helped in a small way with FMIGS. I was on the Fellowship Board and the curriculum committee. Based on everyone’s efforts and expertise, FMIGS is poised to rock the world. We have 46 fellowship programs, 390 graduates, and 80 current fellows. We continue to be the most competitive fellowship in OB/GYN; the number of applicants as compared to the number of available spots reflects, again, the people in this room. This is also the first year of an international fellowship, so I’m giving a shout-out to Colombia and J.D. In this international expansion there will be other non-North American training programs modeled after the time-tested programs and curriculum here—again building on the legacy of those before us. Interest has been expressed by Spain, Germany, Saudi Arabia, South Korea, and Brazil. When I say we are poised to rock the world I am not exaggerating at all!

AAGL also has Focused Practice Recognition and a partnership with ABOG. Focused Practice Recognition is a formal accreditation with ACGME, the governing body for graduate medical education. This landmark recognition is through the work of many including Drs. Yunker, Anderson, Magrina, Milad, and Siedhoff. When FMIGS began 30 years ago, there was no formal recognition and only a few training sites. Now we are an incredible fellowship, and we are training the physicians of the future to take care of women via minimally invasive gynecology.

What is EMIGs? It is our Essentials in Minimally Invasive Gynecology. This is an incredible program that is not FLS—it is richer and more complete than FLS. It is multifaceted; not only hands-on examination, but a curriculum that represents so much work for so many years and includes both laparoscopy and hysteroscopy. As the saying goes, “it takes a village,” and for EMIG it really does. With ACOG/CREOG, we have again Mark Woodland and we have Erica Banks. Mark is the Chair of the CREOG, and Erica is the Head of the Gyn ACOG Simulation Centers Consortium. They have been facilitating our partnership with ACOG along with Sandee Carson. Within EMIG, we have video curriculum overseen by Drs. Wasson and Green, our skills and cognitive tests formulated by Br. Bhagavath, and our Steering Committee overseen by Drs. Einarsson and Munro. This accomplishment is just incredible, and when I say it’s a village, I refer to all of the sites around the country involved with the validation study as well as the different investigators and the support staff of the AAGL, all of whom have been working tirelessly to make this happen. The EMIG group just had an 8-hour meeting today going over the data from the plenary studies, analyzing outcomes, and planning the next steps. The possibilities are endless, whether it’s a partnership with CREOG or placing it in the OB/GYN Residency’s hands. EMIG could be used as a scalable evaluation, it could be used for FMIGS graduation, for ACGME focus practiced, for benchmarking for board passing—the possibilities are just endless. And this is just the beginning, the tip of the iceberg. I truly applaud the EMIG team!

The Choosing Wisely Campaign started before my presidency, but again we are taking care of women via the AAGL. This web resource is designed to educate the public and physicians on different ways to practice medicine safely and cost-effectively. There have been over 125,000 hits for the items that the AAGL initiated.

Some exciting things are coming down the pike. We have Drs. Cohen and Wright overseeing creating surgical
patient information sheets. So, what is this going to look like? We are going to have information sheets that you can tear off and give to your patient in the office. Each will go over a common surgical procedure that MIGs surgeons perform. The sheets will follow the template of a typical consent visit going over the indications, the risks, and the recovery. It will be a way to educate your patients and will be written in lay English. You will also be able to refer to these, legally documenting that the patient was given the information sheet that covers the common risks supplementing your informed consent discussion. The Postgraduate Course Leaders are going to contribute based on their courses and expertise (spoiler alert: the SIGs will also be asked to contribute). This will result in a robust number of surgical patient information sheets. The plan is for this resource to be on our patient website to educate the women that we serve as well as for our members to use. Truly exciting.

Other initiatives include collaborations within the AAGL. We have truly remarkable platforms that have been built including the NewsScope, JMIG, SurgeryU, and the LISTSERV. Our incredible office staff and the leadership of these platforms are having regular conference calls to see how we can work together and partner to further leverage all of these resources and talent. This is reflected in output like SurgeryU Friday or putting things out through social media that ties to JMIG. We’ve had some great successes with more to come.

We also have really exciting collaborations outside the AAGL. We have been trialing a new venture with AUGS, the Indian Association of Gynecologic Endoscopy, and the Australian Society of Gynecologic Surgery with our SurgeryU. In short, we are going to host the surgical videos of these societies. These are pilot programs, and our goal is to host all the surgical videos of all gynecologic surgical societies throughout the world. This resource will be open access with no charge regardless of membership within the AAGL. As such, all trainees and all societies can look at the SurgeryU Editorial Board—approved videos that are felt to be of good quality. This means that if a surgeon anywhere in the world wants to find a video, rather than going to YouTube or doing a web search, SurgeryU will be their one-stop shopping. As noted, the goal is to work through our pilots and then to open it up to all of our sister societies and then all societies—again at no charge. This is what international leadership looks like to me and how the AAGL is at the forefront.

Diversity and inclusion has been a major initiative. Dr. Jubilee Brown has helped lead these efforts with our committee, and we’ve developed an anti-harassment policy. The AAGL has seen our work adopted by other major societies as a best practice, which is the highest compliment I can think of. I wrote a piece in the NewsScope a little while ago about how our Executive Board and our AAGL Committee Chairs have changed over time. With our 2019 elections, our Executive Board percentage of women rose from 25 to 66% and our regular board rose from 25 to 64%. So basically two-thirds of both our Executive Board and our full board are women, which is the most it has ever been in the history of AAGL, reflecting again the people in this room. Along these lines we are tapping into our recent FMIGS graduates, and we are tapping into what OB/GYN is about. Although our AAGL membership is roughly 50/50, it’s because of the people that are my age with a demographic group that is more male. But we all know that 80% of OB/GYN graduates now are female. And this is our future, and the future is here, and our AAGL future is now with the members at this Global Congress.

Building for the future is leadership, and I would be remiss without pointing out the leadership of Dr. Loffer and Linda Michels as well as shout-out to Dr. Linda Bradley, who is taking over as Medical Director, which is so exciting. Thank you. Who do our leaders lean on and who do we, the Board and the membership, lean on but the amazing AAGL staff. And this talk would be pointless without thanking the staff for their incredible hard work, for making this Global Congress look effortless and flawless, and so I just would like to give a round of applause to the staff. Thank you. And who do I lean on? My family, my wife Meredith, my son Sam, and daughter Caroline, all here, and my third child, He Who Shall Not Be Named (who decided to choose this month to do a semester abroad).

So, I want to end with words that I wrote in 2006 for my first giant, Maria Delivoria-Papadopoulos, for an event honoring her. I think it summarizes a lot of the things we talked about, and the fact that I wrote it more than a decade ago doesn’t change its intent or meaning:

“Maria made amazing contributions on some of the most important career decisions in my life. Although I was a mere ‘undergraduate’ while working in her lab, she treated me with respect, mentored me and encouraged my academic growth. In the background of my personal experience in her lab, I saw other people working there who were also taking advantage of and benefiting from her mentorship to improve and advance their life. Maria’s tutelage and leadership were synonymous with success and she was never so happy as when she lost a technician who was going on to better things.

“Maria, in short, I would not be where I am today, without your guidance, leadership, and mentoring. When I consider that I am but a single person among the many whose life you have touched, the legacy that you have created and the lives you have impacted in all aspects of your career is amazing. Thank you, applaud, and attempt to emulate you.”

It is my personal goal that people view me in a similar light and that they view the Fellowship Directors and the other leadership in the AAGL this way. I think we have all...
learned from our personal giants and it is our collective responsibility to lean on the present talent and to teach the next generation so that we can together build on the future.

I thank you for the privilege and opportunity of having served as President of the AAGL.

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