



Yesterday, I returned home from Melbourne Australia and the World Congress of Paediatric and Adolescent Gynaecology (WCPAG). At least I think it was yesterday. I left Melbourne on Saturday December 7th at about 1:30 p.m., and arrived in San Francisco at about 4:30 p.m. on Saturday December 7th, having spent more than 24 hours on a plane or waiting in an airport. Strange, I think; I never did really understand the International Date Line. As Charles M. Schulz, cartoonist of Peanuts fame, is quoted as saying, “Don’t worry about the world ending today; it’s already tomorrow in Australia.”

While I’m not sure which time zone my mind and body are in, I do know that I have a deadline for this editorial, and I’ve decided to write a piece that is analogous to the assignments that I recall from the first day back at elementary school —“What I learned from my summer vacation.” It WAS a summer vacation in the southern hemisphere, as signs in the shop windows in Melbourne advertised spring and summer sales. It was also a bit strange to think about Christmas in a warmer clime, although my own San Francisco Bay area climate is sometimes equally warm at this time of the year.

What did I learn from my travels in general, and at WCPAG in particular? My biggest take-home lesson from the meeting was that problems I see as a PAG practitioner in northern California are very similar to the problems that PAG clinicians all over the globe also are addressing. The organizing committee worked hard to cover the waterfront of PAG problems, highlighting local programs and solutions toward problems as general as the challenges of talking to adolescents or conversations about sex and relationships to specific issues including ovarian cysts and malignancies, haematologic problems, Mullerian anomalies, and teen pregnancy. Cyber bullying, chronic pelvic pain, female trafficking, and the perceived need for cosmetic labioplasties were recognized as challenges affecting teens around the world.

The Australian hosts for the meeting, including Dr. Sonia Grover, now past President of FIGIJ (Federation Internationale de Gynecologie Infantile et Juvenile) and her colleagues, introduced us to Australia and to Melbourne by a custom at the beginning of many talks that acknowledged traditional Aboriginal custodianship of the land. We heard words stating that the speaker would like to begin by paying respect to the local Indigenous people (the

Wurundjeri people who lived in the Yarra river valley, the present location of Melbourne) who were the traditional custodians of the land and recognizing their continuing connection to land, water and community. This statement was followed by another paying respect to Elders past, present, and emerging. I hadn’t realized the powerful message that this could convey, and hadn’t previously thought about the ongoing need for such a reminder that we are all custodians of the land for the future of our children and our children’s children. For this I thank my Australian colleagues. I will consider whether I could begin my future talks with a similar statement about the United States, acknowledging the native Americans who were the original custodians of the land as well as the contributions of so many immigrants and descendants of immigrants who came to the US either involuntarily as slaves or as refugees who sought freedom from persecution. Perhaps this acknowledgement could help remind us that we are all now stewards of the land and of the true values that are American and universal—including freedom and equality.

FIGIJ’s new President is Paul Wood, who should be familiar to readers of the Journal of Pediatric and Adolescent Gynecology (JPAG) as an associate editor. By the time you read this editorial, Paul will have officially stepped down from his position as associate editor to devote more time to FIGIJ. Paul has been a valuable contributor to JPAG. He has brought us superb international peer reviewers through his contacts, colleagues, and friends in BritSPAG (the British Society for Paediatric and Adolescent Gynaecology), EURO-PAG (the European Association of Paediatric and Adolescent Gynaecology), and FIGIJ. He has been a champion for PAG in the United Kingdom, and will continue to bring his smile and wit to the broader community of advocates for the gynecologic health of girls, teens, and young women throughout the world. I will miss his succinct and pithy summaries of the reviews of manuscripts that he has shepherded to publication. In Paul’s stead as a JPAG associate editor, we welcome Evelien Roos, from the Netherlands.

Beyond the Melbourne Convention Center, I enjoyed the city, with its easy public transportation, street art in the lanes, river walk, coffee, and Queen Victoria Market. The WCPAG evening gala took place at the Royal Melbourne Yacht Squadron, complete with a spectacular sunset and fairy penguins (about a foot tall) who live on the nearby St. Kilda pier. And only a short train ride from the city, we enjoyed wine tasting in the Yarra Valley, the bonus of tasting at a small distillery with the distinction of having been awarded the 2019 International Gin Producer of the Year award, and a mob of kangaroos, lounging calmly on a golf course. My husband and I also enjoyed an excursion down the Great Ocean Road to see the limestone arches termed the

Postscript: Shortly after I wrote this editorial, and in the weeks since the WCPAG, devastating fires have engulfed parts of Australia. Our colleagues, the individuals who have lost their homes, and the courageous men and women who are fighting these fires are in our thoughts and prayers. The loss of wild lands and wildlife is unimaginable. We are all one people, and we must do what we can—for those affected by these and other climate-related disasters, and for our futures.

“12 Apostles,” a beautiful temperate rain forest and splendid waterfall, more kangaroos on another golf course (I didn’t know this was a thing), and koalas hiding in the trees (koala trivia: chlamydia infection rates are quite high).

Messages from WCPAG include the universality of the work that we face as we address challenges on behalf of our patients—from the tiny newborns with Differences of Sex Development (DSD), through childhood with vulvar skin conditions such as lichen sclerosus that can scar for life, through the mazes of puberty, growth, gender identity, sexuality and adolescence, with menstrual challenges which may impact educational achievements and thus socioeconomic status in life, with threats to young women’s autonomy and personhood through cyber bullying and sexual violence, and in too many parts of the world the risks of being a child bride or having an unintended pregnancy. There is much work to do, but as we face these common challenges together, we can learn from each other. We are making the world a better and healthier place for the future of girls and women.

The manuscripts published in JPAG contribute to this mission. In this issue you will see the second part of a series on care of gender diverse and transgender youth, with an update on the medical options for care, following on the psychosocial overview of care for this population from the last issue of JPAG.^{1,2} In addition, a number of original reports focus on long-acting reversible contraceptive (LARC) options and intrauterine devices (IUDs), including a focus on anticipated pain during IUD insertion, misconceptions about IUD use for nulliparous women among Chinese

health care providers, and issues related to followup and risks for sexually transmitted infections.^{3–7}

Happy reading, and may JPAG inform your clinical care wherever you may practice around the globe.

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