

Pediatric and Adolescent Gynecology as a Tapestry



I recently inherited my grandmother's cherrywood floor loom, a beautiful machine that I am learning to use to create fabric, enjoying the process of learning a new craft and becoming a weaver. I've concluded that woven fabric is a good metaphor for my life's work. The field of pediatric and adolescent gynecology (PAG) also represents a tapestry to which many of us from different backgrounds contribute to care for those children and adolescents who were assigned female at birth.

I am currently working part time in semi-retirement. In truth, I'm working about 40 hours a week, which most people consider a full-time job but, as JPAG readers know, isn't nearly full time for physicians. In my semi-retirement, I am seeing patients 2 days a week. I am also reading more, exercising more, connecting with friends, and volunteering for my Unitarian Universalist church, and I have taken up weaving. I continue to write JPAG editorials.

Working part time has meant that I have more time to think about how my career has woven together the threads of pediatrics, adolescent medicine, gynecology, surgery, reproductive justice, advocacy, care for individuals with differences of sex development (DSDs), gender care, contraception and abortion access, respect for the function and dysfunction of the menstrual cycle, feminism, teaching/learning, scholarship, writing, and clinical research into a tapestry of 40+ years as a pediatric and adolescent gynecologist. The North American Society for Pediatric and Adolescent Gynecology (NASPAG) weaves together the disciplines of adolescent medicine and gynecology, with the addition of threads from other disciplines—urology, pediatric surgery, nursing, genetics, endocrinology, and more. The tapestry of PAG was beautifully illustrated for me this week at a retreat for the Stanford Children's Health DSD clinic, when clinicians, researchers, and individuals from many fields came together to share our visions of care for individuals with DSDs.

I have immense gratitude for my mentors who helped guide my career along and between these various paths. Our mentors form the warp, the longitudinal threads of our tapestry/careers, serving to guide us as we weave the cross-threads, the weft into the whole cloth. I appreciate and am grateful for the many learners who have taught me much more than I have taught them. They create the color combinations that are more than any single thread or group of threads alone. In weaving, and in life, the color combinations are remarkable and more exciting than a monotone.

My life tapestry has been created as a result of my personal career and journey. Your tapestry will be differ-

ent from mine, and just as complex and beautiful. As I prepare over the next 2 years for the day when I will step down from my clinical duties, I am actively thinking about how I can continue to contribute toward making the world a better place for all individuals who are assigned female at birth. I am privileged to be able to share my wisdom, experience, and insights gained over the course of my career.

One of the ways that I plan to continue to contribute beyond my official retirement date from Stanford is through JPAG. I am very proud of this journal and its place in the field of PAG. As Editor-in-Chief, I enjoy having the "bully pulpit" to write about whatever I choose in the JPAG editorials. My work with JPAG is one of the ways in which I learn about advances in our field, and in my editorials, I work to weave together the threads of PAG, my own professional career, and my life. In my editorials, I highlight some of what I've learned, as you, the authors and JPAG contributors, share your knowledge with us.

In this issue, you will find a review of female genital mutilation/cutting by Beausang and Mama; a multi-site study on recurrence rates for pediatric benign ovarian neoplasms from the Midwest Pediatric Adolescent Gynecology Consortium; a study assessing the use and accuracy of frozen section analysis for ovarian masses, also from the Midwest Consortium; and an examination of racial and ethnic disparities in contraceptive delivery, showing high prescription of long-acting reversible contraceptives to Black adolescents.¹⁻⁴ You will also find poster, oral, and video abstracts for the NASPAG Annual Clinical and Research Meeting (ACRM), scheduled for March 24-26 in Nashville, Tennessee, and for the World Congress of Paediatric and Adolescent Gynecology (WCPAG), scheduled for May 18-21 in Belgrade, Serbia. At both of these meetings, I will be talking to the presenters, urging them to submit their work for consideration of publication in JPAG.

We all learn and teach each other. Because your tapestry is different from mine, we will each take home something a little different from JPAG, the NASPAG ACRM, and WCPAG. My job as Editor-in-Chief of JPAG is to offer an issue in which there is something for each of us to learn as we weave our lives and careers.

May JPAG inform your clinical care,

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JPAG Editor-in-Chief

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References

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