



EDITOR'S MESSAGE

Women's Health

Continuing with 2011 themed journal issues, the editorial committee and staff present an issue focused on women's health. I recall prescribing birth control as a relatively simple task. The women who requested birth control were relatively young, there were no complicating factors, and there was a paucity of data about long-term risks. Times have changed, and prescribing birth control in 2011 is much more complicated because of the following factors:

- The number of birth control options is skyrocketing.
- There are hormonal and nonhormonal methods.
- Barrier method types have increased.
- The incidence of young people with chronic health conditions is higher.
- We are more acutely aware that birth control and hormone replacement comes with a mixed bag of benefits and risks.

In this issue of *Osteopathic Family Physician*, our articles delve into each of these factors.

In our cover article, Jennifer Lykens, OMS IV, and Jane Broecker, MD, provide a comprehensive evaluation of the individualization of birth control in women with metabolic syndrome. This article was invited by the editors after seeing a review for contraception in women with diabetes in the JAOA supplement Health Watch. The authors were asked to apply the same contraceptive methods for women with metabolic syndrome. While there is substantial overlap with the general contraceptive information, the authors highlight features that apply to the metabolic syndrome in the article in this issue. They review the new Centers for

Disease Control and Prevention's safety guidelines and provide practical evidence-based recommendations. In a second article on contraceptive methods, Stephanie Gibson, PharmD, and Sharon Lee Witt, DO, review how to choose between nonoral birth control methods. They provide a practical approach to selecting a method and describe efficacy with "typical" and "perfect" use.

Robin Quesenberry Olsen, MD, MPH, Laura B Cieraszyński, DO, and Shannon Bishop, BS, provide a review of the diagnosis and treatment of human papillomavirus. They explore the prevention of clinically apparent disease, help to provide an early diagnosis, and discuss current treatment options.

Mary Daly, DO, writes about the diagnosis and treatment of acute pelvic pain throughout a women's life. She reviews differential diagnoses in different stages of a women's life and compares common presentations of a variety of etiologies of pelvic pain. In our case report, Luis Perez, DO, presents a case of a postpartum retroperitoneal bleed as a rare complication of a normal vaginal delivery.

Finally, in a medical education article, Greta Gross, DO, and Jonathan Ference, PharmD, describe how a pharmaceutical sales visit can be used as an educational event and provide a meaningful evidence-based review of the information provided. This innovative program provides an example of how physicians can become more active lifelong learners and consumers of new information.

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