OBGYN Resident Training in Vaginal Dilator Therapy: An Education Approach to Addressing an Underutilized Therapy
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Introduction
Vaginal dilator (VD) therapy is an essential part of gynecology. It is known that among reproductive health providers, there is little education on how to teach and support patients with VD therapy. Of those who do, many learn from another provider in their practice or during fellowship, such as in pediatrics/adolescent gynecology and reproductive endocrinology.

No research has been published on VD education among OBGYN residents. Our objective is to assess OBGYN resident comfort with this topic and propose a strategy to fill this knowledge gap.

Methodology
We surveyed residents from 6 different OBGYN residency programs, 5 of which are academic institutions within the United States. Our survey consisted of 6 questions regarding OBGYN resident comfort with VD education. We received a total of 45 responses.

Results
Preliminary results indicate 44% of OBGYN residents feel "somewhat confident" while 49% report feeling "not so confident" or "not confident at all" discussing VD therapy with patients (Figure 1). In addition, 80% of residents feel it is "extremely" or "very" important for them to be able to do so (Figure 2).

Approximately 89% of residents "definitely" or "probably" would like to receive education on VD, though the majority (67%) had either never observed any counseling regarding VD, or had only once.

Future Directions
Our proposed intervention is a 1-hour didactic session lead by residents and facilitated by faculty. This includes lecture on indications, types of dilators, lubricants, and vaginal moisturizers and simulation to exemplify appropriate techniques. Residents will practice instructing patients in VD in a small group setting. Knowledge will be tested through case scenarios.

Conclusions
It is our responsibility as Gynecologic providers to lead the discussion on VD therapy. This conservative, non-pharmacological measure is an intimate intervention that impacts quality of life for patients with concerns including sexual dysfunction, gynecologic cancer, and reconstructive surgery. By incorporating curricular training, residents will be able to facilitate patients’ successful therapy.

References