Greetings! I am delighted to serve as your new chair of the OB/GYN department at UCLA Health. I wish everyone a warm welcome back into the academic year. New beginnings are exciting and present a chance for a fresh start; UCLA medical students are now interviewing for competitive residency positions, our outgoing residents matched at their first-choice fellowships, and top graduates from all over the country have joined our OB/GYN residency training and sub-specialty fellowship programs. I want to give a special welcome to the new OB/GYN physicians who have joined the department. We are excited to have you on board! In this newsletter, you will see that UCLA Health and the Division of Family Planning prepares our graduates for distinguished careers in clinical practice, education, research, and public service. As we begin the new academic year, I hope that you feel the same enthusiasm and gratitude as I do for this amazing program. On behalf of the entire Department and the Division of Family Planning, welcome to UCLA!
UCLA MIDWIFERY PROGRAM

The UCLA Midwifery program supervises a prenatal clinic at West Medical UCLA OB/GYN clinic. This relationship allows our OB/GYN residents and UCLA medical students to develop a specialized skill set and to be inclusive of nurse-midwifery practices. Together, we emphasize health promotion and disease prevention during prenatal care, with a focus on healthy practices during pregnancy and preparing for childbirth. We attend births together at The Birthplace Westwood Ronald Reagan UCLA Medical Center and make midwifery practices available to our community. Our nurse-midwives feel privileged to collaborate with our OB physician colleagues and the amazing team of nurses and staff in the West Medical clinic.
REPRODUCTIVE HEALTH EXTERNSHIP

UCLA OB/GYN is host to the [MSFC Reproductive Health Elective (RHE)](https://www.medicalline.org/). This elective allows extramural students to participate in full spectrum family planning care that is otherwise unavailable at their home institution. Dylan H. was the recipient of this funded educational opportunity this past year.

"The [UCLA reproductive health elective](https://www.medicalline.org/) opened my eyes more than I could have imagined. Besides the core content of the [Ryan program](https://www.ryanprogram.org/), online modules, and working with some of the best providers in the field, it was humbling to meet all the wide array of patients in clinic -- who come seeking help at a vulnerable time in their lives. The biggest lesson I learned during my time in clinic was the true meaning of compassionate care. Ironically, it was not something I had experienced at my home institution...I appreciate the perspectives I have
STAFF UPDATES

**Title X** - Welcome to Caitlin O'Connor, the new Title X Program Manager. This program provides quality sexual and reproductive health education and counseling to our patient population, with particular focus on community outreach in the greater Los Angeles area and beyond. Caitlin received her Master in Public Health from UCLA.

**Front Desk** - Welcome to Cynthia Martinez, our new front desk scheduler. Cynthia grew up in Healdsburg, CA, a small wine country town in Sonoma County. Cynthia is working on her degree in Health Administration and plans to pursue a Master in Public Health with focus on Health Policy and Management.

UCLA OB/GYN clinic staff strive to provide quality care to all members of our community.

Donate to our Patient Access Fund

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UCLA AT THE FORUM
The Division of Family Planning traveled to the North American Forum on Family Planning, co-hosted by Association of Reproductive Health Professionals, Planned Parenthood Federation of America, and Society of Family Planning. Research and clinical work by UCLA trainees and faculty were promoted at this national platform.

UCLA medical student Joseph Friedman MPH (center) presented his winning poster, "Access to abortion in the Mexico City metropolitan area: an observational geospatial study of the legal status of abortion and social class."

Dr. Angela Chen and Dr. Radhika Rible stand in front of Dr. Aparna Sridhar's poster, "Comics for contraceptive implant information: A pre-post test quasi-experimental study."

Dr. Kathrine Taylor, UCLA Family Planning fellow, presented her research proposal on optimizing referrals for women seeking abortion care at the First Year Fellows symposium. She will work with regional providers to establish best practices for abortion referrals. Dr. Taylor comes to the UCLA Fellowship in Family Planning after having completed her OB/GYN residency at Drexel University.
Giants in Family Planning inspect the latest research posters at the Forum.
Pictured: Dr. Uta Landy, Dr. Willie Parker, Dr. Angela Chen, and Dr. Amita Murthy.

ADVOCACY SPOTLIGHT

Dr. Aparna Sridhar and Senator Connie Leyva, author of SB320, address the availability of medication abortion at health centers in college campuses.

Women's Foundation of California co-sponsored the UC Students Organizing Summit where Dr. Sridhar conducted a workshop with student organizers and advocacy
team members. Senator Leyva and Dr. Sridhar partnered together for a Q&A session at the interactive workshop attended by students from all the UC campuses.

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ALUMNI UPDATES

Agatha Berger MD MPH, former UCLA Family Planning fellow, is now Assistant Director of the Division of Family Planning at Christiana Care Health System in Newark, Delaware. Dr Berger is building on her fellowship research project by spearheading Christiana Care's program to provide for the reproductive health care needs of women with substance use disorders.
Comparison of complications associated with induction by misoprostol versus dilation and evacuation for second-trimester abortion

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Abstract
Objective: To compare the frequency of complications between medical induction with misoprostol and dilation and evacuation (D&E) for second-trimester uterine evacuation.
Methods: In a retrospective cohort study, records were reviewed from all women who underwent second-trimester uterine evacuation between 14 and 24 weeks of pregnancy at an academic hospital in the USA from January 2007 to December 2008. Total complications and serious complications were compared between medical induction and D&E, and clinical covariates associated with complications were assessed.
Results: Overall, 465 women were included. At least one complication occurred in 28 (23.0%) of 122 women in the medical induction group, and 24 (7.0%) of 343 women in the D&E group (P< 0.001). One or more serious complications occurred in 4 (3.3%) women undergoing medical induction and 5 (1.5%) undergoing D&E (P=0.251). Logistic regression analysis demonstrated that increasing pregnancy length (P=0.003) and medical induction (as compared with D&E; P=0.004) were associated with complications.
Conclusion: Although D&E resulted in fewer overall complications as compared with medical induction, the rate of serious complications did not differ between the two procedures.

Keywords:
Abortion; Dilation and evacuation; Induction abortion; Misoprostol; Second trimester

1 INTRODUCTION

Worldwide, an estimated 56 million induced abortions occur each year.1 Although data on the global incidence of abortion in the second trimester is difficult to obtain, it is estimated that 10%-15% of abortions occur in the second trimester.2,3 Techniques for uterine evacuation in the second trimester include medical induction and dilation and evacuation (D&E). Historically, medical induction has been conducted by various methods, including intra-amniotic saline, uterine, and ethacridine lactate, but the use of serial misoprostol, either alone or in combination with mifepristone, is the current standard of care.4-6 Most second-trimester uterine evacuations in the USA are currently performed via D&E,7 but there are women in the USA and internationally who do not have access to a provider with the resources or training for D&E: furthermore, some women prefer medical induction.8 Previous studies suggest that D&E has a lower risk for complications than does medical induction.9,10 However, the study populations included women who underwent induction by both antiquated and more modern methods,9,10 and/or excluded women who underwent uterine evacuation for induced abortion because of non-medical indications.11 Additionally, the method or timing of retained placenta management in medical induction is not always clearly defined in research, and thus the rates of retained placenta in induction methods might be artificially elevated.

Sarita Sonalkar MD MPH, (left) former UCLA OB/GYN resident, went on to her first choice fellowship in Family Planning and is now an Assistant Professor at the University of Pennsylvania. Dr. Sonalkar recently published with UCLA collaborators.
Kyle Bukowski MD, former UCLA student and resident, is now Associate Medical Director of Planned Parenthood of the Pacific Southwest where he fiercely advocates for clients throughout San Diego, Riverside, and Imperial Counties. Dr. Bukowski continues to give back to UCLA by volunteering at the West Medical Clinic.

Jennifer Salcedo MD MPP MPH, is now Associate Professor and Residency Director at the University of Texas Rio Grande Valley. Dr. Salcedo graduated with her award-winning thesis from the UCLA School of Public Affairs when she completed the Family Planning Fellowship at UCLA.