Miller School Researcher Exposes Racial Disparities in Women with Pelvic Floor Disorders

Raveen Syan, M.D., notes that an estimated that 30% to 40% of women have one or more symptoms related to pelvic floor disorders, yet minority women are less likely to receive treatment than white patients for such conditions.

From left, Raveen Syan, M.D., Cindy Goodrich, M.A., Nicole Sultan, P.A., and Sabika Hadiq, medical student

“There are many effective therapies for pelvic floor disorders, yet studies have shown that minority women are much
less likely than non-minority women to be treated for these disorders,” said Dr. Syan, assistant professor of Clinical Urology at the University of Miami Miller School of Medicine. “Robust studies looking at why treatment disparities among minority women with pelvic disorders exist are lacking, so that is my research focus.”

Pelvic floor disorders include overactive bladder, urinary incontinence, pelvic pain syndrome, interstitial cystitis and sexual dysfunction, according to Dr. Syan, who specializes in female pelvic medicine and reconstructive surgery.

A 2021 American Urological Association Research Scholar, Dr. Syan has received AUA funding to pursue research into racial disparities among women with pelvic floor disorders. The project, which she started this year, involves creating focus groups that include Hispanic, Black and Haitian Creole women.

She is working with the Behavioral and Community-Based Shared Resource (BCSR) group, which focuses on community outreach research efforts and helps researchers recruit and study diverse local research participants. She not only studies racial and ethnic disparities, but also how health care access, income and more might impact urological health disparities among women.

“First, we will develop questionnaires that are mindful of these minority populations. Then we are going to sit with these women and ask what they are experiencing in the way of pelvic floor disorder symptoms — what they understand about the conditions, what their attitudes are about having the disorders and seeking treatment, if they have access to treatment, and if not, what barriers they face,” Dr. Syan
said.

Dr. Syan recently completed another study looking at urinary incontinence among diverse groups within the Hispanic population, using the Hispanic Community Health Study/Study of Latinos (HCHS/SOL) database. The Miller School is one of TK centers involved in the study, which recruited about 16,000 men and women of Hispanic heritage.

“This data basically looks at disease prevalence, development and risk factors that exist among Hispanics,” Dr. Syan said. “Participating centers recruited patients from 2008 to 2011. They did extensive questionnaires, clinical exams, lab work, then they conducted second visits from 2014 to 2017 to study health changes over time. At the second visits, they asked specifically about urinary incontinence among Latin and Hispanic people.”

Dr. Syan was the first researcher to study predictors of urinary incontinence among the nearly 5,200 women in the
HCHS/SOL, which included women of Mexican, Cuban, Puerto Rican, Dominican, Central American and South American heritage.

“Historically, studies on urinary incontinence have looked at Hispanics as a singular group, and have shown that Hispanics may have a higher prevalence of urinary incontinence and definitely lower treatment compared to whites,” Dr. Syan said. “We found there were significant differences in urinary incontinence among Hispanic subgroups, with Mexican women being the subgroup most affected by urinary incontinence. This is an important study because it supports the hypothesis that we can’t treat Hispanics as a single entity. Certainly, this is true in the field of pelvic floor disorders.”

In a recent review of racial and ethnic disparities in female pelvic floor disorders published in the journal *Urology*, Dr. Syan and coauthors Megan Mathew, a Miller School medical student, and Daniel C. Gonzalez, University of Miami research fellow, summarized current knowledge about racial and ethnic disparities in overactive bladder, urinary incontinence, both stress urinary incontinence and urgency urinary incontinence (mixed), pelvic organ prolapse and interstitial cystitis/bladder pain syndrome. The review revealed disparities in all pelvic floor conditions, as well as problems with today’s racial and ethnic classification systems.

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