The average life expectancy of women in the United States has increased markedly over the past century, with the average woman now living more than a third of her life after menopause. Among clinicians caring for women across the lifespan, there is growing interest in developing interventions that not only prolong life, but also preserve multidimensional functioning and wellbeing as women age. One major consequence of menopause and aging in women is the development of degenerative, inflammatory changes in the urogenital tissues, collectively described as urogenital atrophy. In up to half of postmenopausal women, these changes are accompanied by painful and distressing urogenital symptoms (e.g., soreness, dryness, itching, burning, and pain and discomfort during sexual intercourse) that can have a marked and lasting impact on quality of life.

Despite the widespread prevalence of urogenital atrophy, the impact of the symptoms on the functioning and wellbeing of older women is poorly understood. To date, clinical trials of therapies have tended to rely on physical measures of atrophy (e.g., changes in vaginal cytology, pH, and microbial flora) to measure effects of treatment. These measures have important limitations, not the least of which is that women with very similar physical findings may have very different views of the subjective bothersome and functional disruptiveness of their symptoms.

With the support of the T. Franklin Williams Scholars Award in Geriatrics, I plan to develop and validate a structured, self-administered instrument for assessing the impact of urogenital atrophy symptoms on functioning and well-being in older women. This research will significantly advance our understanding of the multidimensional consequences of urogenital aging in women and help ensure that new therapies for urogenital atrophy address women's real-life experience of this condition. In preparation for this effort, I have conducted in-depth focus groups of women with ongoing urogenital atrophy symptoms and developed a preliminary instrument to assess the impact of symptoms on women's functioning and well-being. For the next stage of my research, I will examine the psychometric properties of this preliminary instrument in a cohort of 2,100 racially and ethnically diverse older women. I will use a refined version of the instrument to examine differences in the impact of urogenital symptoms by race and ethnicity, sexual activity status, postmenopausal stage, and comorbidity level.

During the award period, I will also participate in teaching conferences, works-in-progress sessions, and didactic seminars sponsored by the University of California, San Francisco, School of Medicine’s Division of Geriatrics to gain further insight into the priorities and perspectives of the geriatrics community and apply these to my work on older women's urogenital health. My long-term goal is to lead a multidisciplinary team of general internists, geriatricians, urogynecologists, and outcomes researchers to promote greater understanding and better management of urogenital health conditions in older women. The T. Franklin Williams Scholars Program is ideally suited to help me solidify connections with experts in aging research, master methodologies critical to research in ethnically diverse older women, expand my involvement in geriatrics-based activities, and advance my multidisciplinary research agenda on the determinants, consequences, and management of urogenital aging in women.