

*Mark S. DeFrancesco*  
(IS4)



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**CURRICULUM VITAE**

**Mark S. DeFrancesco, M.D, MBA**

Past President of the American College of Obstetricians and Gynecologists (ACOG)

**EDUCATION**

1976-1980 Univ. Of Conn. School of Medicine Farmington, CT MD  
1980-1984 Residency: Obstetrics and Gynecology Univ. Of Connecticut

**OFFICES HELD / ACTIVITIES**

2016-2019 ACOG representative on National Academy of Medicine' s Collaborative  
on Clinician Well-Being and Resilience  
2006-2013, 2014-2017 Member, ACOG National Executive Board

**BOARD MEMBERSHIPS**

**Accreditation Commission for Health Care (ACHC)**

2020-present Member of Board of Commissioners  
2022-present Secretary

**Accreditation Association for Hospitals and Health Systems (AAHHS):**

2012-2020 Member of Board of Directors, AAHHS  
2018-2020 Vice Chair  
2012-2018 Treasurer

**Accreditation Association for Ambulatory Health Care (AAAHC):**

2009-2010 President  
2008-2009 Vice-President  
2007-2008 Secretary  
2005-2006 Chair, AAAHC Accreditation Committee  
2010-2017 Chair, Bylaws Committee

**OTHER ACTIVITIES:**

1984-present Connecticut State Medical Society  
1984-present New England OB-GYN Society  
2013-2014, 2022 President

**HOSPITAL APPOINTMENTS**

**St. Mary' s Hospital, Waterbury, Connecticut:**

1987-2010 Chairman, Department of Obstetrics and Gynecology  
2010-2020 Courtesy/Community Attending Staff

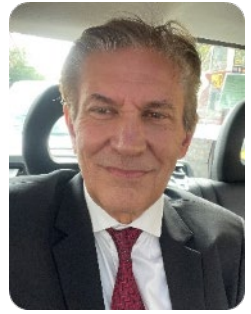
## Challenges to ObGyn Practice in a Changing Environment

*Mark S. DeFrancesco, MD, MBA, FACOG  
Past President, ACOG (2015-16)*

There have been many changes in technology, society and healthcare that have impacted the way we practice medicine. These changes are real challenges to medical practice as we have traditionally known it. New and better methods of screening for cervical cancer for instance, have reduced the recommended frequency of traditional screening. Long acting contraception has also reduced the need for more frequent visits to the clinic. Increased specialization within our specialty (sub-specialization) has had a major impact on our medical workforce, as has the changing demographics of that workforce. Electronic medical records have changed the workflow in our clinics and added in many cases to physician "burnout," threatening medical provider wellness. Accreditation seeks to assure high quality care, but at the same time is very challenging to small private practice to undergo the accreditation process. Many of these challenges, as well as the tremendous economic pressure of providing care, have led to the formation of large, corporate organizations to provide healthcare, with another whole set of challenges resulting from that phenomenon.

This presentation will review the major challenges facing medical practice today and suggest ways that these challenges can be met.

*Philippe Descamps*  
(IS5)



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## CURRICULUM VITAE

PHILIPPE DESCAMPS M.D, Ph.D

### CURRENT POSITIONS

**Distinguished Professor, Obstetrics and Gynecology**

**French National College of Gynecologists and Obstetricians (CNGOF)**

2012- President of the International Relations Committee

**French Society of Gynecological and Pelvic Surgery (SCGP)**

2011- Vice-President of the society

**International Federation of Gynecology and Obstetrics (FIGO)**

2015- Council Member, elected as French representative during the FIGO World congress held in Vancouver

Member of the Endometriosis and Uterine Disorders (SEUD) and World Endometriosis Societies

## Salivary miRNA Signature of Endometriosis

*Sofiane Bendifallah, M.D., Ph.D.*

*Yohann Dabi, M.D., Stéphane Suisse, Léa Delbos, M.D., Andrew Spiers, M.D.,  
Mathieu Poilblanc, M.D., François Golfier, M.D., Ph.D., +14, and Philippe Descamps, M.D.,*

### BACKGROUND

The discovery of a saliva-based micro – ribonucleic acid (miRNA) signature for endometriosis in 2022 opened up new perspectives for early and noninvasive diagnosis of the disease. The 109-miRNA saliva signature is the product of miRNA biomarkers and artificial intelligence (AI) modeling. We designed a multicenter study to provide external validation of its diagnostic accuracy. We present here an interim analysis.

### METHODS

The first 200 patients included in the multicenter prospective ENDOmiRNA Saliva Test study ([NCT05244668](#)) were included for interim analysis. The study population comprised women from 18 to 43 years of age with a formal diagnosis of endometriosis or with suspected endometriosis. Epidemiologic, clinical, and saliva sequencing data were collected between November 2021 and March 2022. Genomewide miRNA expression profiling by small RNA sequencing using next-generation sequencing (NGS) was performed, and a random forest algorithm was used to assess the diagnostic accuracy.

### RESULTS

In this interim analysis of the external validation cohort, with a population prevalence of 79.5%, the 109-miRNA saliva diagnostic signature for endometriosis had a sensitivity of 96.2% (95% confidence interval [CI], 93.7 to 97.3%), specificity of 95.1% (95% CI, 85.2 to 99.1%), positive predictive value of 95.1% (95% CI, 85.2 to 99.1%), negative predictive value of 86.7% (95% CI, 77.6 to 90.3%), positive likelihood ratio of 19.7 (95% CI, 6.3 to 108.8), negative likelihood ratio of 0.04 (95% CI, 0.03 to 0.07), and area under the receiver operating characteristic curve of 0.96 (95% CI, 0.92 to 0.98).

### CONCLUSIONS

The use of NGS and AI in the sequencing and analysis of miRNA provided a saliva-based miRNA signature for endometriosis. Our interim analysis of a prospective multicenter external validation study provides support for its ongoing investigation as a diagnostic tool.

*Bo Jacobsson*  
(IS6)



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**CURRICULUM VITAE**

**Bo Jacobsson, M.D. Ph.D. Professor**

**Education**

2003 Ph.D. Infectious and inflammatory mechanisms in preterm birth and cerebral palsy, University of Gothenburg

**SHORT BIOGRAPHY**

Bo Jacobsson is presently director of the Perinatal Research Laboratory at Sahlgrenska University Hospital in Gothenburg, Sweden where he also does his clinical obstetrical and fetal medicine practice. Prof Jacobsson has also been head of Fetal Medicine department and was a member of the Board of Directors for Sahlgrenska Academy at University of Gothenburg, Sweden between 2015-2021. He is now part of the Research Council at the same institution. From 2023 he is the Deputy Head of the Division, Department of Pediatrics and Department of Obstetrics and Gynecology at Institute of Clinical Sciences, University of Gothenburg.

Prof. Jacobsson's research groups are located in Gothenburg, Sweden and in Oslo, Norway. He is a steering group member of Genomic Medicine Sweden and is chairing the Genomic Medicine Sweden complex diseases group. He is also Swedish representative in Nordic Society of Precision Medicine. Prof. Jacobsson is chair of FIGO Working Group on Preterm Delivery 2019-2021 and he is presently the FIGO Division Director of Maternal and Neonatal Health 2021-2023. He is a part of the Partnership for Maternal, Newborn & Child Health, Knowledge and Evidence Working Group and is a co-lead of the MNCH workstream. He is the co-editor of the "Born-too-soon - the decade version" and co-chairing the Global Advocacy group for the same publication. He is part of the board of directors of European Association of Perinatal Medicine (EAPM) and is chairing the EAPM Special Interest Group of Preterm Birth. He is studying basic and applied aspects of the mechanisms of preterm delivery and genetics of complex disease. Another area that has attracted his interest is genetic components of the timing of delivery and also the interplay between genes and the environment. One of his main interests for the moment is the possibility to prevent preterm delivery to happen by public health, dietary and medical interventions. The main research aim is to identify and apply different strategies to prevent preterm delivery to increase the outcome of healthy children. He has also studied infections during pregnancy and pregnancy and child outcome. Prof Jacobsson has a track record of being involved in all levels of education since 30 years.

## Born too Soon 2023 – the decade version of the WHO report

*Bo Jacobsson*

*Maternal and Neonatal Health, Division Director, FIGO, Sweden*

“Born too soon: decade of action on preterm birth” was launched in May 2023 by WHO, UNPA, UNICEF and PMNCH. FIGO was involved and co-edited the report. The report shows that there has been no global reduction in preterm birth rates but there is a potential to do a lot in the upcoming years. “Born too soon: decade of action on preterm birth” looks to the future, setting an ambitious agenda to reduce the burden of preterm birth by addressing factors outside of the health system that affect preterm birth; and, within health systems, by providing high-quality, respectful care for women and babies so that they can survive and thrive, no matter where they are born.

This report is intended to inspire and support country-led action: politicians, policy-makers and leaders of all stakeholder groups are its primary audience. However, leadership “from the top” often emerges in response to a unified call to action by a broad-based coalition of committed advocates “from the bottom” .