

Blog About Pelvic Pain

by Sara K. Sauder PT, DPT

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Interview with Dr. Andrew Goldstein Part 2

A week's worth of time probably did your mind some good. Here's the second half of my interview with Dr. Andrew Goldstein.

6. I'm curious. Are you treating any pregnant women with vulvar pain?



Dr. Goldstein: Yeah, I mean, unfortunately with pregnancy there's not much that I can do during pregnancy, not because I'm scared about it, but because, well, you can't give them too many medicines. But, again, it depends on the cause of the pain. Women with pelvic floor dysfunction get better because of progesterone and smooth muscle relaxation during pregnancy plus the weight of the fetus and the uterus pushing down on the pelvic floor tends to improve hypertonicity. It worsens, of course, pudendal neuralgia. Of course, it's one of the few times vaginal delivery is contra-indicated – for true pudendal neuralgia.

7. That makes sense. Are there any medical management or surgical procedure options that are going to soon become available for vulvar pain that you are excited about or looking forward to?

Dr. Goldstein: Well, I mean, the ones that we use are a lot different than some others. We use topical hormonal treatments that a lot of people don't. And again, we use topical estrogen and testosterone as opposed to just estrogen because the glands of the vestibule are testosterone-dependent glands. Again, it's using the right thing at the right time. We are going to do a study on using something called platelet rich plasma on vestibulodynia. PRP. I guess you may know about this for joints and things like that, so we are going to do this for vestibulodynia. And this will be for the people who really do have inflammation– the true “vestibulitis.”

8. Do you ever see people that have nickel allergies that create pain at the vestibule?

Dr. Goldstein: Not that I know of.

9. What are your thoughts on Ospheña to help with localizing estrogen in the vagina for women who are not menopausal?

Dr. Goldstein: So, we have absolutely zero, zero data – actually not “we” – no one has any data on what Ospheña does for the vulva. There is not one study, there is not one bit of data – I've begged the company again and again to do this – and given that the vulva is essentially the center of where the majority of pain is, until that study is done, I can't recommend the drug. It's just, we have no idea what it does at the area where most people have pain. So, it's impossible to recommend something without any information whatsoever. And I say the same thing for menopausal women. I just can't recommend the drug right now because there is no data.

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10. Let's get serious. What was it like to tell Barbara Walters where her G-spot was?

Dr. Goldstein: Oh God. She actually had zero desire to actually know. Three seconds before I got on the air, live, she was like "Why are we talking about this? Who wants to talk about this?" This is just clearly not her – it wasn't her desire to have me on. She obviously didn't know about me. But, people like Whoopi were very interested as well as Joy Behar. It was fun being on The View.

Sara: I watched you on it, I mean, not at the time, I've seen the clip. My husband actually says "That's interesting, because Barbara Walters has made a career out of not knowing where her G-spot is."

Dr. Goldstein: Exactly, she had no desire. "Why are we talking about this? Who wants to talk about this?"

Sara: Who wants to talk about this??? I don't know, maybe people under 80!!! People over 80 as well...

Dr. Goldstein: So funny.

11. What song best describes your work ethic and why?

Dr. Goldstein: That's a good one, I have no idea. It's funny, I've been to so many concerts in the past ten years. It's funny, I can't answer that question.

Sara: Okay, let me put it another way then. **When you're in surgery, what do you want to hear?**

Dr. Goldstein: Every single time, before I operate, every single time, I listen to Werewolves of London. I have no idea why. It started way back when. I love the song. I'm not even a huge Warren Zevon fan. For some reason, it just gets me "up" and really focused to do the surgery and not to be superstitious, I think I have really good success with the surgery. I really care about my patients. When I operate, they are a part of the family and I have to do the best possible thing – every single time, I listen to that song.

12. Who is your professional mentor?

Dr. Goldstein: I can name a lot of people. Stan Marinoff who is definitely a mentor. I have learned a lot from Gordon Davis. He is really the first guy to put me on to the importance of birth control pills as the cause of pain. I've learned a lot from Irwin Goldstein – he really taught me the importance of the role of androgens, testosterone, in sexual health. I also have learned a lot working with Susan Kellogg. We've given many, many, many lectures together. I think that every time we give lectures together we each teach each other. We do very similar stuff. And so, she teaches me a ton. I hope that I teach her too.

Carolyn Pukall, who is a Canadian psychologist. We wrote the textbook of Female Sexual Pain Disorders as well as When Sex Hurts. She really has taught me a ton about two things: One – the importance of really adhering to the biopsychosocial model. Even if it's a purely physiological and I can take care of the pain, that doesn't absolve the other responsibility of taking care of the psychological ramifications of their pain. So, that's very important. As well as good study design. She designs beautifully designed studies. So, I think these people have really helped me a lot and hopefully in

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return I have helped them too. I think it's a very collaborative effort.

Oh, I also have to [mention] how much physical therapists Amy Stein and Pam Morrison have taught me. They both have spent a fair amount of time in my office teaching me and hopefully I am teaching them. It's really important. No less than probably 35 physical therapists have spent at least a day with me. Each one teaches me something about the exam, what I may be missing, so I think it's helped me with my pelvic floor exam. So, I don't have the amazing evaluation like a good PT. I know when someone has pelvic floor dysfunction, but I also can make the distinction between pelvic floor dysfunction causing pudendal neuralgia or some pudendal neuralgia causing pelvic floor dysfunction. I'm getting decent at figuring out the role of the hip and SI joint. Now, again, I rely on my physical therapists to – you guys spend much more time doing this, right? I have to say, working with Pam Morrison, well I consider her one of the world's best diagnosticians of these things. She really starts at the top of the spine and works her way down and she really just can put her finger on the important things. As well as Amy Stein. Both her book and her new video – it's just so important because we know there are not enough good pelvic floor physical therapists around the country. We are lucky in certain major metropolitan areas, but a lot of people don't live there, so without those tools, it would be very, very difficult. So, those are the people I would say who have meant a lot. You know, they continue to teach me and my goal is to continue to teach as many people as possible.

13. If you were not a gynecologist, what would you be doing?

Dr. Goldstein: In medicine?

Sara: If you were not a gynecologist, what would you be doing if the world was your oyster?

Dr. Goldstein: I'd probably be a psychiatrist. Umm – if I could do anything I'd have a rock club and a brewery.

And there you have it: Dr. Andrew Goldstein.

It was a lot of fun to talk to him – I think that he challenges me in a great way and I am grateful for the opportunity to have interviewed him.

Dr. Andrew Goldstein is located at the Centers for Vulvovaginal Disorders in New York City, Washington DC and Annapolis, Maryland. He was the president of the International Society for the Study of Women's Sexual Health (ISSWSH) 2013-2014 and is still a vital leader in the group lecturing to the sexual health medical community.

Dr. Goldstein is the author of Reclaiming Desire and When Sex Hurts, the editor of the textbook Female Sexual Pain Disorders: Evaluation and Management and associate-editor of Journal of Sexual Medicine and the Female Patient.

If you have any questions, please email me at Sara@Sullivanphysicaltherapy.com or leave them anonymously in the comment section below.