What is “Women’s Health”? Women’s Health is medical practice that touches all aspects of women’s lives—from daily wellness and “thrive” to access to quality medical care. It includes medical research that takes into account gender differences—both biologic and sociologic. It includes innovative programs that constantly push the envelope to provide the highest quality and service. It includes providing superior health education materials that are easy to access and assist women in caring for themselves and their families. It includes providing the best evidence-based education for the doctors and nurses who take care of women when they are sick.

Permanente physicians are committed to evidence-based medicine. But sometimes the evidence doesn’t exist in the literature—and we must do our own research to answer our questions about how to best manage our patients. Throughout the Kaiser Permanente (KP) Regions, research studies are designed, the data are analyzed, the answers are applied to our clinical practice, and new innovative programs are born. KP is uniquely capable of translating research into clinical practice that directly improves patient care.

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Innovative programs are often piloted in single medical centers. Through ongoing quality analysis and our rich communications network, programs that are successful are then recreated and restyled from one medical center to the next—and often from one region to the next.

Excellent examples of this process can be seen in the article by Leslie Lieberman, MSW; Cosette Taillac, LCSW; and Nancy Goler, MD, on the Early Start Program (page 62). The clinical need to develop a new way to care for pregnant women with substance abuse problems was identified more than 15 years ago. The key component to Early Start is recognizing that all women need to be screened—both with surveys and toxicology screening. Once women are identified as being at risk, they are managed within the prenatal clinics—using on-site specialists that are part of the obstetrical care team to provide the unique counseling that pregnant women need. Well-constructed research studies showed that this type of identification and intervention could not only help pregnant women stay off drugs but could save money by decreasing hospital admissions for newborns. This program has now been successfully implemented throughout KP Northern California—and is being considered by several other KP Regions for adoption.

The Perinatal Nursing Service is another fine example of how provocative research can translate into groundbreaking clinical practice. Yvonne Crites, MD; Jenny Ching, RN; Connie Lessner, RN; and Deborah Ray, MD, describe this program, which was born at a time when commercial home-monitoring technologies were taking over the management of preterm labor patients (page 37). Permanente researchers suspected that there must be a better way to care for these women. Once the best strategy for managing preterm labor was identified, the Perinatal Nursing Service was created to provide case management. During the past decade, the program has grown to include many medical centers—and has expanded to include different high-risk obstetrical conditions. Because of ongoing outcome assessment, the program is now positioned to be expanded as an interregional program.

Early Start and the Perinatal Nursing Service are just two examples of the fantastic research and innovation that is going on within KP around the country. As you look through this collection of articles from our colleagues, keep in mind that you are only seeing the tip of the iceberg. Permanente researchers and clinicians are constantly striving to create an even better product for our members and patients. It’s what we do best.