Family planning and GUM interface

BOOK REVIEWS


The 48-year-old pallid woman in front of you anxiously asks to have her hormones checked. A haemoglobin and ferritin are more immediately relevant. The menopause as a physiological stage often coincides with the development of other chronic diseases and this should be explored. By the time both patient and doctor are ready for specific information they should have got to know each other. It needs to be considered why the woman has presented, and what her expectations are.

Those in search of fast facts about the menopause have a lot of choice. Amazon has many titles to choose from. The Internet has many suitable sites; some are referenced at the back of this book. Several other books aimed at UK clinicians have preceded this one.

In just 103 pages this book covers, chapter by chapter, the common symptoms expressed by menopausal women. It also describes the types of hormone therapy (including tibolone), their side effects and risks as well as alternative treatments. Refractively, the book does not take a partisan approach to hormone replacement therapy (HRT) but offers a rational résumé of the options available.

Written in a good style, the text flows sufficiently well to read at one sitting. For subjects like the Women’s Health Initiative Study, the summary is easy to read and sensibly explained. Time is taken to describe symptoms carefully and systematically. Key points are clearly presented, and the book is attractively laid out. The illustrations break up the text well but some diagrams seem a little superfluous, as often happens in this style of publishing where a series of topics are presented in a unified pattern. Many doctors would do well to study the British National Formulary as first choice before prescribing HRT, but it is useful to have another short text available for reference. Sometimes referring to a book can be reassuring for the patient at the consultation, by providing an objective view. This book is a reasonable choice for GPs who do not wish to specialise in this area.

Frequently asked questions are presented in a useful table, though wisely the authors avoid the question of duration of use. Long-term users often have strong feelings when cessation is suggested! The book offers a discussion in general terms, together with a sensible synopsis of the evidence base.

Reviewed by Helen Grace Gibson, MRCPG. DFFP. General Practitioner. Kingston-upon-Hall, UK


Karen Ballard is an academic medical sociologist with a special interest in women’s health issues. This book is one of a series, mainly directed at patients, to increase the understanding of various health problems. It achieves its aim admirably. It is clearly written and set out in ten self-contained chapters. The chapters stand alone, and could be read in any order as there is cross-referencing and reiteration. As stated in the introduction, the book does not need to be read through but can be kept for reference. Although aimed at patients, I think it will be useful for medical students or health professionals new to the subject. Written in 2003 there are already a few things that are out of date, but this is inevitable with books. Throughout the text, areas of uncertainty and ongoing research are mentioned.

The first chapter encompasses biological changes during the menstrual cycle and menopause. This is mostly excellent. Whilst the text is accurate and clear, I cannot say the same about the line sketches. The drawings throughout are in the same style and add a light-hearted flavour to the book. Conversely, this style is not useful when describing the anatomy of the female genital tract. The second chapter gives a balanced account of symptoms of the menopause. The author draws on personal accounts from ‘The Women’s Health Study’. This was a recent postal survey of 650 women, with in-depth interviews in 32 women. I found it of interest that half the women surveyed reported a drop in libido after the menopause.

Further chapters deal competently with menorrhagia and fibroids. There is a good description of the types and means of hysterectomy, together with more cameos accounts from women about their experiences. These accounts help keep the book alive. Another chapter deals with the ‘Change of Life’, which is not seen to be the same thing as the menopause. We hear the voices of the women discuss the upheavals of mid-life, often coinciding with the menopause. Ballard then describes in detail health changes associated with the climacteric and gives good general preventative medicine advice. Not everyone would agree that hormone replacement therapy (HRT) protects against Alzheimer’s disease, however.

Suddenly, in the middle of the book, the author describes how attitudes and theories around the menopause have changed throughout history. I am not quite sure why this entertaining chapter is here rather than at the beginning. Evidence of benefit for non-hormonal treatments is discussed in a refreshing manner. Ballard exaggerates the evidence for benefit from phyto-oestrogens in bone protection. Unlike many authors, Ballard discusses the side effects and drug interactions of alternative therapies. Chapters on HRT and contraception at the menopause are well-balanced and informative.

This is an easy book to read. It is balanced and would be helpful for women deciding whether to take HRT. I would have no reservations in recommending it to a patient and hope that it is updated soon. I will keep it on the shelf in my surgery and lend it out only to those patients or students whom I am sure will return it!

Reviewed by Margaret Denman. DFFP. PPM. General Practitioner, Oxford, UK

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References


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