

sterilisation are happy to consider other reversible, effective contraceptive methods that have proven non-contraceptive benefits. Detailed counselling before sterilisation helps to avoid the regret faced by some,<sup>2,3</sup> with few women and their partners returning within the next 2 years for sterilisation.

Sterilisation is still the most commonly used method of contraception worldwide.<sup>4</sup> Despite this, the number of endoscopic female sterilisation procedures performed in England and Wales is declining. The total number has fallen by 37.2% from 47 288 in 1998/1999 to 29 686 in 2002/2003.<sup>5</sup> Over this time the number of female sterilisations performed in the Newcastle area has also declined by 53.4% (Figure 3). We feel that this reduction is due partly to the comprehensive counselling that the women receive in primary and secondary care and partly to the fact that a number of long-term, effective and reversible methods of contraception are now available. Women no longer see sterilisation as the only reliable method of contraception available to them.

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## Book Reviews

**Helping People with Sexual Problems: A Practical Approach for Clinicians.** P Trigwell. Oxford, UK: Mosby (Elsevier), 2005. ISBN: 0-7234-3409-3. Price: £15.99. Pages: 108 (paperback)

Sexual problems are common in people attending health services, as they are in the general population; some seek professional help, others would like to. People with sexual difficulties present to a wide range of health care services: Some may present with a direct request for help; others may raise this as a 'parting shot' at the end of a consultation for an unrelated reason. In some cases sexual dysfunction (SD) is detected by sensitive enquiry during consultation for a medical condition with which sexual difficulties may be associated. Service provision for people with SD is, however, variable and insufficient.

Peter Trigwell, a consultant in liaison psychiatry and psychosexual medicine, brings his wealth of clinical experience to this book. His aim is to help the clinician assess his/her patient's SD, paying attention to both physical and psychological aspects of the aetiology, to make a formulation and decide upon an appropriate course of action. His practical approach enables the clinician to help those patients for whom provision of relevant information and specific suggestions may obviate the need for referral to specialist services, and to identify those for whom such a referral is indicated.

In this book Dr Trigwell demonstrates the clinical importance of SD and offers an aid to understanding normal sexual functioning, before introducing the reader to the classification of sexual difficulties and their management. The book concentrates on SD as defined in the *Diagnostic and Statistical Manual of the American Psychiatric Association* (Version IV). It guides the clinician through the assessment of the patient presenting with SD, to identify sexual health needs and possible undiagnosed underlying pathology. He describes a general approach to sex therapy and introduces specific techniques used to help people with a range of sexual difficulties including lack of sexual interest, impaired arousal, difficulties with orgasm, sexual pain and vaginismus. A variety of approaches including

pharmacological and counselling therapies are introduced. The effects of drugs on sexual function are highlighted. A brief chapter provokes consideration of ethical dilemmas in sexual medicine. The book is well referenced and signposts useful resources for both patient and clinician.

In my opinion, this short book is a useful resource for the busy clinician who wishes to help patients who present with sexual problems achieve a level of sexual function that is adequate for their sexual needs. Health care professionals from many disciplines will appreciate this accessible and well-written text.

Reviewed by **Pippa Green**, DFFP, DipPST, Associate Specialist in Sexual Health, Pennine Acute Hospitals NHS Trust, Rochdale, UK

**International Handbook of Chlamydia (2nd edn).** T R Moss (ed.). Haslemere, UK: Euromed Communications Ltd, 2005. ISBN: 1-8990-1559-0. Price: £16.95. Pages: 212 (paperback)

Despite a vast number of publications and its own website, this handbook is a welcome addition to the current knowledge of chlamydia. Revised 5 years after the publication of the first edition, it covers many aspects of chlamydial pathogens whilst focusing on *Chlamydia trachomatis*.

The book – written by a largely UK-based group of authors – is easy to read and covers topics ranging from diagnosis and clinical manifestations of infection with chlamydia to economic evaluations of screening and control strategies. Most chapters provide an extensive literature review for those interested in more detail.

I think the book would have benefited from a more in-depth update on the natural history and pathogenesis of chlamydia, which in its current format is only covered in fragments in different sections. Conversely, I felt the chapter on 'Is there a role for serology?' was too detailed for a general readership and misleading in its current role and use.

I liked the fact that the book includes chapters on *C. pneumoniae*, trachoma and a clinically useful summary on the causes and management of chronic pelvic pain in young women, although the latter made little reference to the contribution of *C. trachomatis* to this common condition. With the word 'International' in the title, I would also have expected more coverage of the importance of *C.*

*trachomatis* in the context of resource-poor countries, and in particular its synergism with HIV acquisition and transmission and the challenge of its control by screening asymptomatic individuals.

My main criticism has to be of the chapter on '*Chlamydia trachomatis* in Fallopian tube disease – the Swedish experience', which includes many assertions and conclusions based on evidence exclusively referenced by publications from the author and includes treatment recommendations that are not recommended practice in national and international guidelines.

Reviewed by **Eva Jungmann**, MRCP, DFFP, Consultant Physician in GUM/HIV, Camden PCT, London, UK

**Sexual Health and the Menopause.** J M Tomlinson, M Rees, T Mander (eds). London, UK: The Royal Society of Medicine Press Ltd, 2005. ISBN: 1-8531-5620-5. Price: £12.95. Pages: 80 (paperback)

With advancing age, there is generally a decrease in the frequency of sexual intercourse. However, in modern times, with increasing numbers of failed partnerships, older women may wish to establish new relationships, usually resulting in increased coital frequency.

Published on behalf of the British Menopause Society, this concise text provides useful information to general practitioners, gynaecologists, genitourinary physicians and psychologists who may have to deal with older couples with problems of sexual health.

There are significant contributions that critically review male and female sexual dysfunction, sexually transmitted infections, pharmacotherapy and hormone replacement therapy.

Older women may feel inclined to abandon contraception. An unintended pregnancy at a relatively late age may lead to disastrous consequences. There is a well-written chapter on contraception for perimenopausal women.

Each chapter has a list of relevant references. This small volume is indeed a valuable source of up-to-date information for the management of sexual health problems in the older couple.

Reviewed by **R K Bhatena**, FRCOG, FFFP, Consultant Obstetrician and Gynaecologist, Bombay, India