An update on pelvic inflammatory disease. Ross JDC. Sex Transm Inf 2002; 78: 18–19

The difficulties in clinically diagnosing pelvic inflammatory disease (PID), new diagnostic advances and the relation ship with intrauterine devices (IUDs) are reviewed in this article, which is well worth reading. The sensitivity and specificity for diagnosing PID is poor with rates of 62% and 77%, respectively, even with logistic regression. Key predictors are gonococcal or chlamydial infection and an elevated temperature with a high white cell count. Transvaginal ultrasound combined with ‘power Doppler’ seems promising, as it appears capable of measuring the hyperemia of tubal inflammation with positive and negative predictive values of 91% and 100%, respectively. It seems most useful in milder disease but larger studies are needed.

Meta-analysis has identified a relative risk for symptomatic PID of 3.3 in women with IUDs. However, many studies used inappropriate control groups and sexual behaviour was not controlled for. Even if the relative risk of PID is higher in IUD users, the absolute risk remains low and is of the order of 1:1000. Most of the excess PID risk appears limited to the first few weeks after IUD insertion and therefore a major determinant is the prevalence of chlamydia and gonococcal infection. The effectiveness of antibiotic prophylaxis before insertion of an IUD is uncertain.

Screening for sexually transmitted infections and rapid empirical use of effective antibiotics remain the cornerstone of PID control.

Reviewed by Elizabeth Carlin, FRCGP, DFFP, Consultant in Genitourinary Medicine, Nottingham City Hospital NHS Trust, Nottingham, UK.


A DARE abstract looked at the evidence behind the headlines about the relationship between hormone replacement therapy (HRT) and the risk of dementia. The evidence was generated from the Women’s Health Initiative (WHI) Memory Study – a subset of the WHI Study. The objective of the study was to assess the effect of oestrogen and progesterone on the incidence of dementia in postmenopausal women aged 65 years or above. The study was well designed – randomised, placebo-controlled, double-blind, and well powered to justify the conclusion that HRT doubles the risk of dementia. This refers to an absolute increase of 23 cases per 10,000 women per year. These findings do not necessarily mean that all women need to take HRT at a younger age for menopausal symptoms. The preparation of HRT used in the study is not available in the UK.

Reviewed by P S Arunakumari, MD, MRCOG, Specialist Registrar in Obstetrics and Gynaecology, Norfolk and Norwich University Hospital, Norwich, UK.

Quality of life following early medical or surgical abortion. Morrow E, L. Contraception 2003; 67: 41–47

This study took place in a private practice setting in New York. Women who were having an abortion before 9 weeks’ gestation were invited to enrol in the study. The researchers went through a validated 30-item questionnaire on three occasions with the 97 patients who were willing to participate. The first questionnaire was filled in at the end of the first consultation, the second one week later at the time of the termination, and the third by telephone after a month. The scores on the questionnaire were compared at the three points of time.

At the baseline assessment, patients reported numerous symptoms and functional impairments. At 1 week, apart from physical function and pain, most measures showed some improvement. By 1 month, the scores for each type of function and symptom had improved. Improvements were marked in emotional function, appetite and global health. Those who opted for a surgical termination (42) had more symptoms and a higher level of impairment of function at the baseline assessment than those who chose a medical termination (55). The authors speculated that those who were most distressed wished for a speedy resolution of their problem and chose surgical termination. However, by the final assessment there were no obvious differences.

It would be risky to generalise from these results to other settings. Women seeking abortion at private facilities may be unlike those attending public funded services. This study used a questionnaire to complete questionnaires may differ from those who decline – in particular, those who are most distressed or most uncertain about their actions may decline. However, the study does add to a growing literature that some women may have a better quality of life, and feel relief rather than distress, once the difficulties of facing an unwanted pregnancy are overcome.

Reviewed by Gill Wakley, MD, MFFP, Visiting Professor in Primary Care Development, Staffordshire University and Freelance General Practitioner and Writer, Abergavenny, UK.

Website Reviews

A recent research paper suggests up to 40% of women will have abnormal cytology at some time in their lives.1 An abnormal smear result can be extremely distressing and it is useful to be able to recommend some good sites.

www.womens-health.co.uk is an excellent website with sensible information in all areas of obstetrics and gynaecology for the general public. Edited by Danny Tucker, Clinical Lecturer at Oxford University, this site reliably provides useful information and makes useful recommendations. The site contains a list of useful links to other sites on sexual health or relationships are provided.

Reviewed by Gill Wakley, MD, MFFP, Visiting Professor in Primary Care Development, Staffordshire University and Freelance General Practitioner and Writer, Abergavenny, UK.

Women’s sexual health choices

‘Power to choose: young women and sexual health’ gives health professionals an overview of sexual health choices available to women. This website developed by the Young Women’s Christian Association (YWCA) also includes a summary of existing research about sexual health for women. Several other publications available either to purchase or to download concern women’s issues, but readers may find it difficult to find specific information. Good if you just want to browse for ideas, though. Website address: www.ywca-gb.org.uk/pcpublications.asp.

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