BOOK REVIEWS


Ambulatory Gynaecology or ‘see and treat clinics’ have become a reality to take women patients in the outpatient setting and take the National Health Service (NHS) into the 21st century. The book addresses many of the questions that are asked about ‘ambulatory gynaecology’. How do you start a unit? How can you offer patients maximum satisfaction with fewer hospital visits? How and where should staff be trained? Can you practise this abroad?

This is a clearly written, introductory book targeting a UK NHS-based readerhip but can easily be modified to suit an international clientele depending on available resources. The book provides tips on application, availability and access to office gynaecology and contains useful websites on information and training. It is evidence-based and has up-to-date references and appendices towards the end of each chapter providing additional information for further reading. Written in a lucid language, it has many flow charts, algorithms, scan images and photographs of equipment, giving the reader useful and retainable information.

The book has nine chapters, of which the first is an introduction about the NHS framework and the need for change, i.e. NHS Plan and pressure on training needs in the background of improving outpatient gynaecology.

Chapter 2 is an overview of anaesthetics and analgesics provides insight into a topic rarely discussed in gynaecology textbooks. It provides practical tips for patient selection, equipment meaning and anaesthetic reference is made to local anaesthesia, which is often used in outpatient settings.

Chapter 3 introduces colposcopy services while Chapter 4 on abnormal uterine bleeding is comprehensive with information on national algorithms, training websites and college programmes. This leads very nicely to Chapter 5 on endometrial ablation with second-generation techniques and equipment, which can be easily applied in the outpatient setting. Interestingly, there is a batchate that can be used as a guide for the introduction of any such service in the outpatient department, theatres or wards.

Chapter 6 is on urinary incontinence and incontinence while Chapter 8 deals with early pregnancy and emergency gynaecology. Chapter 9 is particularly interesting because of the description of the role of pelvic ultrasound in the management of acute pelvic pain.

Overall, this book is ideal for general practitioners, specialist trainees, consultants, nurses, managers, and the college/hospital library. It would also be a useful tool for undergraduate and postgraduate examinations.

Reviewed by Thumuluru Kathiva Madhuri, DRCOG, DFFHRC Clinical Fellow in Gynaecology, Royal Surrey County Hospital, Guildford, UK

and Sonia Chachan, MBBS, MRCP Obstetric and Gynaecology, Royal Surrey County Hospital, Guildford, UK


Gynaecological problems of children and adolescents can often be challenging in terms of diagnosis and management. Some problems may not present often, and many of us feel inadequately prepared to deal with both the patient and concerned parent. Having found the first edition of this book both personally useful and often referred back to it, I was looking forward to the second edition and I was not disappointed. Topics are dealt with sensitively, and with clue consideration of social and emotional factors which contribute to both the presentation and management requirements.

Chapter 1 is a clear, useful reminder about the stages of normal puberty, this concise book then manages to comprehensively cover the most frequently encountered problems such as vaginal period problems, vaginal discharge and primary and secondary amenorrhoea, while also describing less frequently encountered conditions such as endometriosis, endocrine and chromosomal disorders, female genital mutilation and gynaecological tumours.

The most useful chapters for me were ‘Gynaecological problems in childhood’ and ‘Menstrual problems in teenagers’, both of which provide clear explanations of the pathophysiology and recommended investigations, and sensible, practical management advice for common problems. As useful are statements about what not to do, such as discouraging pelvic examination in girls with pain of a different nature, or restricting clinical assessment to offer clear treatment options. Despite the chapters being brief, all the required information is there, with plenty of references for further reading.

An excellent addition is a chapter on child sexual abuse, which is a reminder to us all to be aware of the diversity of presentation and warning signs of this serious problem.

My only slight criticism is related to the contraception chapter, which, although generally helpful, did not provide specific advice on types of oral contraceptives that may be particularly appropriate for teenagers, did not emphasise the hazards of having an accident, and did not mention that commonly encountered in this age group, and did not mention the usefulness of Cerazette® and its 12-hour window in the progestogen-only pill section. Having said that, this book does not set out to be an authoritative publication on contraception in youngsters and so this criticism should not detract from the value and usefulness of the book.

This is an easy to read, accurate, understandable book, which I would highly recommend for those working in general practice, community gynaecology, sexual health or hospital gynaecology.

Reviewed by Heather Currie, DRCOG, MRCPG Associate Specialist Gynaecologist and Obstetrician, Dumfries, UK


The topic of this book has been of interest to both men and women for many years. It has been described since the time of Hippocrates and remains an important subject today.

This book comprises 18 chapters of varying length, each written by different authors or co-authors. Some chapters I found extremely readable but others less so. It is not a book aimed at the layperson but I felt intended more as a reference book for those involved in treating women with premenstrual problems.

The book certainly covers all aspects of the condition, but does not necessarily discuss all the terminology, such as whether we should call it premenstrual syndrome or premenstrual dysorphic disorder, through to the pathophysiologic views concerning. Most of the chapters bemoan the lack of definite criteria to help make the diagnosis. Chapter 2 covers this well and discusses possibilities for future research to help define the criteria.

The chapters run in a logical order starting with a historical background and ending with genetic predisposition. There is some repetition of each previous chapter in the introduction to the next, thus it serves as a useful summary. The book looks at all the current theories of the cause and debates the best treatments. Treatments are discussed in Chapters 12–16, and include complimentary and herbal options. There are also two gynaecological and psychiatric viewpoints.

As there are many contributing authors there are some conflicting opinions; however, this does open one’s mind and perhaps inspires one to look further into the topic. As each chapter covers a different topic, it means that one can dip in and out of the book with relative ease, although a slightly better summary of each chapter would facilitate this.

Although at times I found the physiology and pathophysiology hard going, it was an interesting and informative book that would be useful in a reference library.

Reviewed by Sheila Brown, DRCOG, DFFHRC Senior Clinical Medical Officer in Family Planning, Heart of Birmingham Teaching Primary Care Trust (HoBTPCT), Birmingham, UK


These two pocket-sized books are a delight to provide for patients, and to keep back for oneself, offering clear advice on what I ‘really’ do in my sex therapy sessions. For clients, because they inspire so much more than the often-dry instructions I give them and for myself because they encourage me to think through my theories of sexual something that I ‘really’ do in my sex therapy sessions. For clients, because they inspire so much more than the often-dry instructions I give them and for myself because they encourage me to think through my theories of sexual therapy. For clients, because they inspire so much more than the often-dry instructions I give them and for myself because they encourage me to think through my theories of sexual therapy.

The romantic lover describes in detail a variety of ways in which couples can be romantic with each other and the emphasis is on developing and maintaining intimacy. The book is about what I ‘really’ do in my sex therapy sessions. For clients, because they inspire so much more than the often-dry instructions I give them and for myself because they encourage me to think through my theories of sexual therapy. For clients, because they inspire so much more than the often-dry instructions I give them and for myself because they encourage me to think through my theories of sexual therapy. For clients, because they inspire so much more than the often-dry instructions I give them and for myself because they encourage me to think through my theories of sexual therapy. For clients, because they inspire so much more than the often-dry instructions I give them and for myself because they encourage me to think through my theories of sexual therapy.