Editorial

Welcome again to the spring edition of TOG. Hope you approved of the new cover in January and that you felt the content was as fresh as our new look! Let’s kick off by pointing you all towards the spotlight on sexual and reproductive health from TOG editor Nicola Mullin. I know we’re doing all the work for you by signposting TOG’s great content on the subject but we do like to think we’re nothing if not helpful. We should also blow our own trumpet a bit as TOG has four out of the top five most downloaded O&G articles from Wiley Online Library for 2014. So congratulations to the whole team here for all their hard work last year.

Having just come back from running the RCOG maternal medicine course (highly recommended), I was struck by the number of times the speakers were reinforcing the importance of ‘taking a good history’ and ‘performing a thorough examination’. So given that one of the most common measurements we take is that of blood pressure, it is extremely timely that this subject is reviewed by Nathan et al. Not only does this review remind us of the correct technique and the common pitfalls in measurement but it also summarises the most recent evidence around blood pressure thresholds and adverse pregnancy outcome. Having had an MBRRACE update in the last issue, I think Marian Knight’s UKOSS update in this issue further reinforces this message, pointing out the association between pre-existing medical problems and direct maternal deaths. Its sobering to note that hypertension in pregnancy is an independent risk factor for direct maternal death. If that’s not an incentive to measure it properly then I don’t know what is!

We then have a fantastic review from Verghese et al. on constipation in pregnancy. Again with an emphasis on comprehensive assessment through a good history the authors go on to discuss the pathophysiology of a problem many of us might take for granted and the pharmacological options available including newer drugs that you might not be familiar with in pregnancy. They also include a useful treatment algorithm that I suspect will rapidly be deployed in guidelines and I’m delighted that in these two articles we might have addressed two of the most common problems faced by obstetricians, midwives and GPs alike.

The final obstetric review is from Weston and Moroz and covers appendicitis in pregnancy. While a little less common, it does still remain a problem encountered by obstetric units on an annual basis. It is always good to have multidisciplinary input, both into the management of such women and into the articles we publish; this article critically appraises the modalities that are helpful in confirming the diagnosis as well as the treatment options available. It is easy to just assume that laparoscopic management has now taken over in this field but clearly there are circumstances where it might be sensible to adopt some of these basic principles and ensure we start to look after each other as well as the women we care for.

From surgeons and appendicitis we’ve also got urologists and urethral diverticulae in the review from Archer et al. This is rare, but no apologies as it may well present to any of us either electively or on the delivery suite and given the surgical challenges of dealing with this problem it’s good for us all to understand the need to carefully plan management having thought through the differential for the mass in the urethra (sounds like one for the trainees to sign off by ‘other means’).

There is also something for everyone in the review by Joy and McCrystal on counselling in infertility services. As well as raising the awareness of the existence of counselling services in this clinical field it also discusses the role of counselling in the context of fertility treatment, reminding us of the need to be prepared to deal with the issues that might arise not only from the diagnosis of sub-fertility but also the related treatments.

From the fundamentals of counselling we move to an area of reproductive medicine which might not be familiar to all with a review from Radon et al. on female fertility preservation. While the science of these techniques is interesting I have to say I was enthralled by the ethical issues of this sort of ‘elective’ treatment throws up. Whether it’s the discussions around oncology and its treatment, the issues raised regarding health resources in a resource-poor system or the issue of seeming to encourage or support the delay of childbearing for non-medical reasons and the impact this could have on an increasing health burden to the wider society, I’m sure this will generate views expressed through the letters page. Just what a good review should do; inform and then promote debate.

Finally from Walsh et al. we have a review on premenstrual syndrome (PMS). The authors comprehensively discuss the diagnosis and different clinical manifestations of PMS and take us through treatment options available.

So I think that’s it. Great reviews, tons of general CPD and don’t forget to check out TOG ratings for those website, app and book reviews. Enjoy the spring and see you all in July.

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