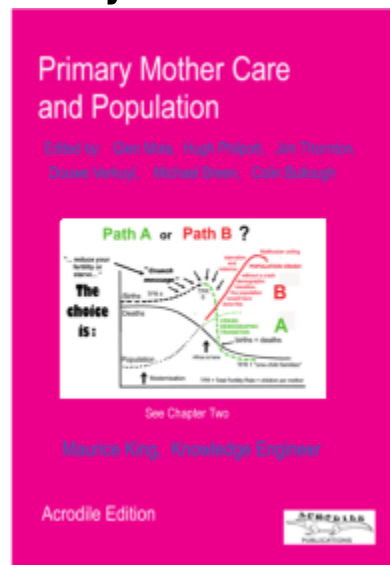


## Primary Mother Care and Population



By Dr Maurice King, Prof Glenn Mola et al

ISBN – 9966-7249-5-8

Kshs:1500.00

This book has 400 pages 400,000 words and more than 700 illustrations. It tells you how to deliver a mother at home, or in a health centre. Although it is mainly written for assistant midwives, it will be useful all kinds of medical reader, including especially medical students, and indeed for the general public, since all the technical words are carefully explained.

As the preface says the authors are concerned with the ever widening gap between: (1) 'High-tech hospital obstetrics, with its increasing reliance on laboratory methods, foetal monitoring, and high rates of Caesarian section. And (2) the needs in the districts for the practical management of obstetric problems. Instead of transferring the difficult hospital methods into primary care, it tries to spread modern 'low-tech' skills as widely as it can, and to adapt them to the difficult conditions under which you work. The authors imagine that most of you are in an isolated unit, and are unable to refer your patients to hospital. If you are lucky, you will enjoy good facilities, but more often you will have to make do with almost none

Not only does it deal with delivery, and with care after delivery it also discusses antenatal care and family planning, both those methods which are used before conception, and those which need to be used afterwards.

Chapter 2 "How many children?" is especially important, since it is concerned with the problem of 'too many people for the land to support and nowhere to go'. This is called 'demographic entrapment' which is much too difficult for most people to discuss, so do read what it has to say!

Chapter 4, 'Making a good start' is about 'sex and relationships education', and is most useful for schools and for teacher training colleges.

Chapter 6 is for devout Catholics who want to learn about 'The Natural Methods' of family planning which the Roman Church allows.

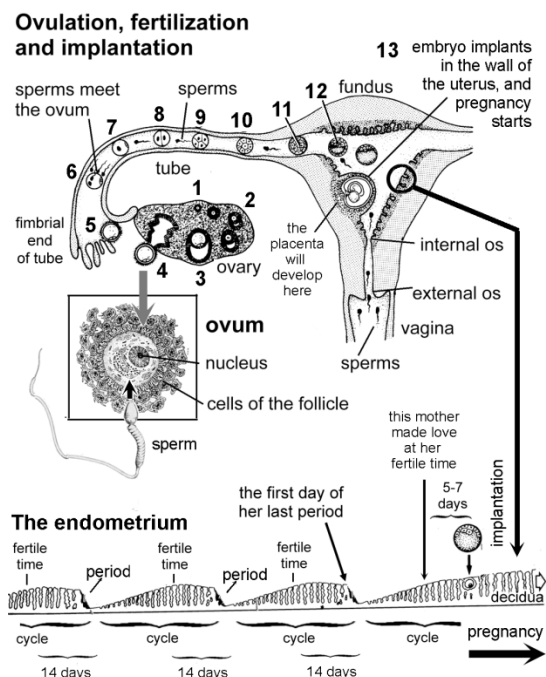
Chapter 9 on 'The Postcoital Methods' is for mothers who have become pregnant by mistake, and don't want to be pregnant. It stresses that the *earlier* you do something about this the better!

Some chapters have received particularly high marks — particularly Chapter 19, 'The Third Stage of Labour', discussing bleeding after delivery which is also called postpartum haemorrhage or PPH.

## Sample Content

**5 Family planning** 5.1 Precoital methods. 5.2 No method is 'perfect'. 5.3 Safety, reliability and failure. 5.4 The failure rate. 5.5 Risk and benefit. 5.6 Which is the best method for *them*? 5.7 'Spacers', 'limiters', 'avoiders' and 'chance takers'. 5.8 Child spacing. 5.9 Methods for husband and wife. 5.10 Other ways of looking at precoital methods. 5.11 'Social marketing' 5.12 Discontinuing and 'dropping out'. 5.13 Teaching family planning. 5.14 Running your clinic. 5.15 A family planning supermarket. 5.16 Evaluating family planning. 5.17 Indicators for family planning. 5.18 Are you succeeding? 5.19 More help in small print.

**6 Natural family planning** 6.1 Breast-feeding as a family planning method. 6.2 Withdrawal and heavy pet-



ting. **6.3** Fertility awareness. **6.4** The hormones of the cycle. **6.5** Cycles vary. **6.6** How reliable are natural methods? **6.7** Who can use these methods? **6.8** 'Dry patterns' and 'mucus patterns'. **6.9** Other fluids at the vulva. **6.10** The cervical mucus method. **6.10a** The CycleBeads method. **6.11** The temperature method. **6.12** The symptothermal method.

Read what  
interests  
you



**7 Hormone methods** **7.1** Family planning Pills. **7.2** Which Pill? **7.3** Combined oral contraceptives (COCs). **7.4** How reliable are COCs? **7.5** Who distributes Pills? **7.6** Pills and drug interactions. **7.7** How to use COCs. **7.8** Changing and stopping COCs. **7.9** Missed COCs. **7.10** COC failure, pregnancy. **7.11** Other difficulties with COCs. **7.12** Progestogen only pills (POPs). **7.14** Family planning injections DMPA, 'Depo'. **7.15** Using oestrogens. **7.16** Implants.

**8 Other precoital methods** **8.1** Male condoms **8.2** Female condoms. **8.3** Diaphragms. **8.4** Spermicide. **8.5** Sponges with spermicides. **8.6** Intrauterine devices (IUDs). **8.7** When to fit an IUD? **8.8** Fitting an IUD. **8.9** Danger signs with an IUD. **8.10** Difficulties with an IUD. **8.11** Voluntary surgical contraception (VSC). **8.12** Tubal ligation (TL). **8.13** Quinacrine sterilization. **8.14** Vasectomy

**18 The first and second stages** **18.1** Can a mother get help if necessary? **18.2** A mother's hostel. **18.3** An obstetric flying squad. **18.4** Examining and recording. **18.5** Should you refer her? **18.6** Preventing infection. **18.7** Getting ready. **18.8** Positions in labour. **18.9** A friend for her and a helper for you. **18.10** Pain in labour. **18.11** Has labour started? **18.12** The first stage. **18.13** The second stage. **18.14** Complications.

**19 The third stage** **19.1** Changes in the uterus during the third stage. **19.2** Oxytocic drugs. **19.3** Managing the third stage. **19.4** Retained placenta, manual removal. **19.4** Postpartum haemorrhage, PPH. **19.6** Preventing PPH. **19.7** Hypovolaemic shock. **19.8** Treating PPH. **19.9** Vaginal tears. **19.10** Cervical tears, episiotomy. **19.11** Puerperal haemorrhage (secondary PPH). **19.12** PPHs for TBAs.

## 20 Special babies, special mothers

**SPECIAL BABIES.** **20.1** Foetal distress. **20.2** A baby's first minutes. **20.3** His first hours. **20.4** His first feed. **20.5** Low birth weight babies. **20.6** IUGR (small-for-dates) babies. **20.7** Iso-immunised babies. **20.8** Alcohol and drugs. **20.9** Hopelessly malformed babies. **20.10** Dead babies, DIC. **20.11** Grieving.

**SPECIAL MOTHERS.** **20.12** Polyhydramnios. **20.13** Intrauterine infection (IUI). **20.14** Prolapse and presentation of the cord. **20.15** The membranes rupture too early. **20.16** Labour too early - pre-

**20 Breastfeeding** **26.1** Is your hospital 'baby friendly'? **26.2** Why mothers need help. **26.3** No prelacteal feeds! **26.4** How milk is made. **26.5** A baby's reflexes. **26.6** Position and attachment. **26.7** Engorgement and mastitis. **26.8** Nipples. **26.9** Refusal to breast-feed. **26.10** Expressing breast milk. **26.11** Not enough milk? **26.12** Other difficulties.

**27 Women's diseases** **27.1** Gynaecology. **27.2** The premenstrual syndrome PMS. **27.3** DUB, dysfunctional uterine bleeding, irregular periods, heavy periods. **27.4** Amenorrhoea. **27.5** The Menopause. **27.6** Family Planning. **27.7** Gynaecological pain. **27.8** Dysmenorrhoea. **27.9** Dyspareunia. **27.10** Cancer of the cervix. **27.11** Palliative (terminal) care. **27.12** Endometrial cancer. **27.13** Ovarian tumours. **27.14** Fibroids. **27.15** Prolapse of the uterus. **27.16** Incontinence of urine. **27.17** Incontinence of faeces. **27.18** Bartholin's cysts and abscess. **27.19** Lumps in the breast

## 28 Etcetera Two

**28.1** Antibiotics. **28.2** Blood tests. **28.3** What do the special tests mean? **28.4** Drugs and equipment. **28.5** References.

"If I don't know  
the answers,  
I tell the  
students to  
look them up  
in the index.  
That is what  
an index is for!"

