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(Received 28 Feb 2002, accepted 7 Jun 2002)



Book Review

Emergency Surgery

Obstetrics and Gynaecology Surgery in the Third World. Advice for surgeons and medical officers without previous obstetrics and gynaecology experience providing medical and health care services to Third World communities. Jones I, Oats J, Likeman R. Brisbane: Mater Misericordiae Health Services Ltd. 2001. ISBN 0-9597299-2-5

MILITARY PEACEKEEPING operations which include humanitarian aid have become familiar to Australian military physicians and surgeons from their work in Rwanda, East Timor and Bougainville. The military surgeon must be familiar with obstetrics and gynaecology (O&G) as it is practised in the developing world. Obstetrics and gynaecological disorders are commonly encountered in places where humanitarian aid is provided, and often the condition of the women on presentation is advanced and/or complicated, thus heightening the challenge for the doctors and nurses involved. Maternal and infant mortality are already extremely high in these deprived environments.

The Definitive Surgery for Trauma Course (DSTC) and the military module (*see page 68*) prepare the surgeon for military deployment and the latter component includes limited O&G teaching. Many general surgeons also observe caesarean sections and other operative procedures before their deployment. However, the “occasional” obstetrician/gynaecologist also needs a reference or practical manual close at hand while on deployment.

Obstetrics and Gynaecology Surgery in the Third World is a concise, clearly written and well-illustrated 77-page paperback written by three eminent Australian obstetrician/gynaecologists with a strong collective experience of O&G in the developing world, including ADF military service. The authors have encapsulated the essence of their specialty and provide the appropriate perspective for the practitioner working in the developing world. Major-General John Pearn, our esteemed former Surgeon General, has written a cogent foreword. The book is divided into three sections: obstetrics, gynaecology, and surgical procedures. There is also a brief conclusion entitled “The realities of Third World medical care”. The index is comprehensive.

Doctors, nurses and midwives who deploy on ADF operations, or indeed undertake any humanitarian aid in the developing world, will find this book invaluable. I have no doubt that by using this book the practitioner will be better able to practise O&G while working in unfamiliar territory, and therefore contribute significantly to the improvement of the health of women and children in the developing world.

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