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MEDIA REVIEWS

Caesarean: Just Another Way of Birth?

Rosemary Mander Routledge/Taylor & Francis, 2007 270 Madison Avenue, New York, New York 208 pp, \$41.95, pb

It doesn't matter if you do it naturally without drugs or have a Cesarean. Because you end up with a baby, and what could be more natural than that?

A new mother

Caesarean: Just Another Way of Birth? is a useful addition to the growing literature that addresses the increase in cesareans and the changes in societal and medical attitudes toward this operation. Rosemary Mander, a midwife and professor of midwifery at the University of Edinburgh in Scotland, draws upon an extensive body of research to strengthen the case against its expanding and often indiscriminate use.

Chapter 1, "The Game of the Name," seeks to disentangle myth ("the godly way to be born") from actual history, describing the circumstances under which cesareans have been performed over the centuries until now.

The medical and social climates in which they occur have continued to change over time. But how much have we learned about their effects on women and babies? Much obstetrical research is slanted, misleading, inconclusive, or entirely absent, especially as it relates to women's feelings, needs, and desires. In "What are the Questions and Who's Using the Answers?" readers are urged to consider carefully the sources of available research and to take a close look at the origins and ethics of studies and trials, which can be vulnerable to deliberate or unintended distortion and omissions.

One must always question the relevance of the research to the woman and her health care provider. Randomized controlled trials and evidence-based practice alone may not provide adequate bases for care of childbearing women, Mander notes. The "reductionism" of quantitative research contains strengths but ignores so much that makes up the complexity and humanity of giving birth. It is necessary to check out the context of the research that determines practice and beliefs, including the researchers' professional backgrounds and agendas, their personal experiences, research methodology, institutional protocols and standards of care, the timing of data collection, and where and upon whom it takes place.

"The Caesarean Operation—Issues and Debates" addresses the technical, surgery-related issues that

may have short- or long-term repercussions for women inasmuch as they affect mother, baby, family dynamics, and the healing process. These include physiological reasons for the operation, the mother's psychological preparation, the timing of the event, hospitalization, personnel in attendance, anesthesia method used and details of the surgery itself. Mander critiques the words "elective" and "emergency cesarean" as being open to very different interpretations. It becomes clear that many indications for cesareans vary according to both acknowledged and unspoken factors.

"International Matters" discusses the harmful implications of globalization and privatization of health in relation to cesarean deliveries. Some of the most deleterious effects include the standardization of practice required by the World Health Organization's partograph, unreliable or incomplete data from low-income countries, insufficient training of practitioners, inadequate or inaccessible health care facilities, the inappropriate overuse or, conversely, the unavailability of the operation, the eradication of public funding streams, and the ensuing lack of money available for women's health initiatives. Several countries, among them the United States, Ireland, the United Kingdom, Brazil, and China, are described in more detail.

"Cesarean Decision Making—Who's Choosing the Choices?" describes the complex and dynamic nature of choice as determined by culture (peer pressure, technological advances, surroundings, defensive obstetric practice, ethics) and the power relationships between women and their practitioners. Mander provides fairly extensive lists of both the absolute medical signs and the many relative indications for performance of a cesarean that enter into decision-making for mothers and practitioners. Cesarean on demand and abnormal and persistent fear of childbirth (tocophobia) are but two examples of how women's view of the experience has been influenced and changed.

"The Immediate Implications of Caesarean," points out the physiological harm that can possibly ensue from postoperative procedures, and discusses risks such as infections, thrombo-embolic conditions, and impaired bowel function, as well as problems with mother-baby attachment, difficulties in breastfeeding, and the effects on the baby of any separation. The author deplores the normalization of extreme interventions. She explores the concept of iatrogenesis as it applies to the increase in cesarean operations.

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The following chapter, "The Long-Term Implications of Cesarean," concerns the heightened likelihood of future cesareans, long-term pain, emotional devastation (posttraumatic stress, sense of loss, anger, feelings of failure), urinary incontinence, impaired sexual function, and more. The practice of midwifery itself is seriously affected, endangered, and diminished by the increasing use of cesareans, Mander observes, since midwives are likely to lose many of their skills in medicalized settings.

"Trial of Labor and VBAC" concludes the book with a discussion of the downturn in rates of trials of labor and VBACs. It investigates what is meant by "safety"—safety for whom? Who is at risk? Mother? Baby? Practitioners and hospitals? Once again, the author urges caution in interpreting current studies.

In each chapter Mander advocates for the interests of childbearing women that are all too often ignored in current obstetrical practice. She asserts the need for further research about the effects of cesarean operations on the father, on the developing child as a person, and she asks upon whom, exactly, do the many physical, emotional, and financial costs of cesareans accrue?

A short review cannot do justice to the book's richness, precision, and compassion. Rosemary Mander combines attention to language, meticulous organization of each topic, knowledge of medical issues, and critiques of available research and research methodology with a positive view of the benefits of midwifery and an accurate perception of women's rights and needs, among them comfort, appropriate care, attention to the whole picture, and truly informed consent. Implicit in the text is a plea for practitioners to reorient their studies, attitudes, and practice so as to meet those crucial needs.

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