about his own patients and his own emotions within the highs and lows of cancer care.

This is a book that should be read by every medical and nursing student, primary care resident, and public health official. It is a compassionate account of what has been, and what will be, in the realm of cancer.

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Woman-Centered Care in Pregnancy and Childbirth
Sara G. Shields and Lucy M. Candib, eds

In the preface of Woman-Centered Care in Pregnancy and Childbirth, Sara Shields, MD, MS, and Lucy Candib, MD, state that “During the last 15 years together, we realized we were talking about births differently from other colleagues and paying attention to details in prenatal care that were not a part of teachings in the standard obstetric or maternity care textbooks. [We] had never seen a text trying to teach from this perspective.” Though there is other literature that addresses providing effective care for women in pregnancy and childbirth, this book is unique in maintaining its focus on providing it in a woman-centered way and in its comprehensive approach to the topic.

The reader is taken on a journey with experts in the provision of maternity care and long-time teachers. The journey may confirm aspects of our own individual style of care but certainly challenges the current overall approach to maternity care in this country and in many other parts of the world. The book challenges us to fundamentally reframe our approach to caring for pregnant women. We are asked consistently to take into account the woman’s needs, wants, and hopes given her particular circumstances. We are asked to use evidence-based medicine not to support the best interventionist model, but to support the best care for a particular patient at a given time.

Woman-Centered Care in Pregnancy and Childbirth is accessible to readers across multiple disciplines. Though it is geared toward those who provide obstetrical care, the language is not highly medical, making it interesting for anyone concerned with the way obstetric care is provided and how it might be improved. The book is academic, gleaning from medical, health policy, social science, and also lay press literature. Each section ends with references, each list a valuable resource in and of itself. An additional strength in every section is detailed stories of patients and providers, which are gathered in their entirety at the end, refreshing readers about important issues for particular patients and bringing together the wholeness of the provider, the women, and their families.

The book begins by defining the problem, the current lack of woman-centered care. The organization follows the patient-centered clinical method, as do all the books that are part of the patient-centered series of books edited by Moira Stewart, Judith Belle Brown, and Thomas R. Freeman. The six sections of the method include (1) Exploring the “disease and illness.” In the case of obstetrical care, the multiple dimensions of the woman’s and provider’s experiences of normal pregnancy and problems in pregnancy are explored, (2) Integrating the concepts of disease and illness with an understanding of the whole person. This section explores the layers of experience of pregnancy in a woman’s life, taking into consideration her immediate as well as her broader circumstances. It examines issues of patients who fall outside of the norm, including lesbian mothers, women with substance abuse, and women in prison and emphasizes the import of culture, (3) Finding common ground with patients. Here the book explores issues related to pregnancy from the construct of “problems, goals, and rules,” which are presented by addressing the perspective of both the patient and the provider, (4) Health promotion and prevention. Pregnancy is a natural opportunity for health promotion and prevention and empowerment of women. The concentrated frequency of office visits for women with healthy pregnancies allows this time period to serve as a model of health for the rest of one’s life, (5) The helping relationship. This concentrated continuity between patient and provider creates the potential for a deep clinical relationship during the childbearing year and beyond, and (6) Being
realistic. The text acknowledges current realities of obstetric practice in the United States and keeps the emphasis on fostering the positive, encouraging teamwork, and discouraging fear-based practice.

This book is dense, but each section readily stands alone and can be used for teaching purposes around particular aspects of obstetrical care or as a ready reference. Reading the book as a whole, however, creates an experience of “settling in” to a different approach, promoting an overall reorientation from current obstetrical care styles. The approach challenges providers to maintain a positive outlook at all times in the care of women, freeing us of resentment or frustration we may bring to clinical encounters when patients are unable to follow all of our advice. The book has the capacity to speak to us on this very personal level, yet also addresses the global and often more complex interweaving of factors that have led to what the editors refer to as the “syndemic of interventionism”. Practical recommendations are given to help counteract these forces that often appear unstoppable. Woman-centered decision making, patient empowerment through utilization of options such as group prenatal visits and doulas, and promotion of primary care maternity providers are examples of such ideas. In the end, we are encouraged to continue striving toward a woman-centered approach, despite the enormous challenges that currently obstruct the way.

Woman-Centered Care in Pregnancy and Childbirth is a monumental work with the capacity to serve as a catalyst for changing our current style of obstetrical care. The passion and experience of the editors and contributors resonate through the pages. It should be required reading for anyone involved in providing obstetric care for women.

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