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Book reviews

WHO Working Group, Safe Motherhood: Care in Normal Birth – a Practical Guide, World Health Organization, Geneva, 1996.

Archie Cochrane, the founding father of evidence-based medicine, is credited with having rated obstetrics by far the lowest on the scale of medical disciplines making use of scientific method to maintain and improve its standards. It is still, to a large extent, a branch of medicine where traditional principles and personal experience reign supreme; birth, it seems to be felt, is a physiological process which does not change, which only by exception calls for a truly medical or surgical intervention, and which provides little opportunity or reason to develop science-based innovative methods. All the same, a process of change and renewal in obstetrics is discernible. Something of that change is reflected in WHO's new "practical guide" to safe birthing. The study devotes a great deal of attention to the extent to which obstetric methods have objectively tested and their value and safety confirmed, contrasting them with the methods in which that standard has not been attained. Why, it asks, is amniotomy so widespread where there is as a rule no real need for it? What are the correct means of electronic monitoring of the foetus and why are they not consistently applied? How long should one properly wait after premature rupture of the membranes before taking steps to induce delivery? It may be too ambitious to imagine that such a traditional calling as obstetrics will ever be standardized across the world, and it is probably not desirable or necessary that it should be. This report, more modestly, demands in effect that wherever obstetrics is practiced the methods employed be set against be set periodically against the current state of knowledge; at least the practitioner – whether physician or midwife – will thereby have an opportunity to determine whether he or she might be doing better for the parturient mother and her child. A sensible, worthwhile study.

Ellen J. Sokol, *The Code Handbook – A Guide to Implementing the International Code of Breastmilk Substitutes*, International Code Documentation Centre, Penang, 1997.

Artificial breast milk substitutes are a classic example of a good idea in health care which has gone wrong – or which, to be more precise, has been grossly abused and has thereby done harm. Where breast feeding fails (and given proper management it only fails very rarely) one has to make use of cow's milk, and means of modifying to approximate to the human infant's need have been with us for centuries. It was only to be expected that in the present century the manufacture of breast-milk substitutes would be commercialized, thereby assuring quality, ready availability and a closer approximation to the nutritional ideal. What was not to be expected, expect by a hardened cynic, was that artificial breast milk would become the object of hard-sell campaigns, a status symbol, and in much of the world a favoured substitute for natural feeding, to the detriment of children and the impairment of the mother-child relationship. It has been established that in the developing world the risk of death for infants who are not breastfed is 10 to 15 times greater in the first three to four months of life than in babies receiving only breastmilk.

The aggressive advertising which was the dynamo of this unhappy development came formally under attack only twenty years ago when a joint WHO/UNICEF meeting in October 1979 called for an International Code for the Marketing of Breastmilk Substitutes. The Code itself followed two

years later and was adopted by the World Health Assembly with a number of milk exporting countries abstaining and the United States, cynically and shamefully, voting against it.

Ellen Sokol's 350-page volume "The Code Handbook" chronicles events in the fifteen years which have elapsed since then. On the positive side of the balance it is able to present the full text of numerous national laws and regulations which have, at least nominally, put the Code into effect; by 1996, 17 countries had established laws to enforce the Code, 27 had enacted certain of its clauses, and many others had taken lesser measures. Of 19 major companies supplying breast milk substitutes, on the other hand, none has attained compliance with all aspects of the code, though partial (nominal?) compliance is common. Other initiatives have had greater or lesser effect; a series of conferences have demanded further action, and a model law has been drawn up to make future legislation simpler to formulate.

Is that good enough? At least the campaign to call a halt to the growth of unnecessary venture bottle feeding, in this and other ways, has achieved a stalemate; things are not getting worse, and in a few countries they are getting distinctly better. That certainly shows what international action, largely on the basis of voluntary initiative and consumer pressure can achieve. It is all gratifying, but there is still a dreadfully long way to go.