

## Recent Advances in Obstetrics and Gynaecology

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The science and art of providing quality health care to women has made tremendous strides in recent years. In the sub-specialties of Obstetrics and Gynaecology, recent advances in laboratory techniques and in clinical diagnostic, surgical and laparoscopic skills have improved the prevention and early detection of disease. New frontiers have been established in Maternal Fetal Medicine, Reproductive Medicine and Gynaecological Oncology. This issue focuses on the recent advances that make important reading to the busy clinician on whom the up-grading of clinical skills is imperative and vital to the good practice of Obstetrics and Gynaecology in the years ahead.

As Obstetrics and Gynaecology evolves and changes over the years, the clinician faces new and challenging dilemmas. Maternal request for elective Caesarean delivery is one such issue. Devendra and Arulkumaran have wrestled with many of the clinical, moral and socio-economic issues in their article to help clinicians and patients clarify their decision-making processes in this ever-increasing clinical situation. The litigious nature of our society has resulted in record indemnity subscriptions by Obstetricians and Gynaecologists. It is time to ponder on the absurd situation in which the Obstetrician is placed when deciding on a patient's request for an elective Caesarean delivery for non-medical reasons (with no clear guidelines on which to base decisions upon). Devendra and Arulkumaran's clear and succinct discussion of this topic adds greatly to the clinician's armamentarium when discussing this daily issue with their patients.

Another Obstetric issue that constantly perplexes clinicians is the issue of which test to use to screen for chromosome abnormalities in pregnancy. The plethora of tests, both ultrasound and biochemical, that can be used in the first and second trimesters of pregnancy are clearly evaluated by Stojilkovic-Mikic and Rodeck. The overwhelming impression seems to be the importance of nuchal translucency screening together with either concurrent first trimester biochemical screening (PAPP-A and free beta-hCG) or sequentially with second trimester biochemical screening (with AFP, oestriol and beta-hCG). The relative merits of each of these tests are discussed in a clear and balanced manner, allowing the clinician to draw meaningful conclusions to offer the appropriate screening tests for their patients. Even as screening for chromosome abnormalities moves ever closer to the laboratory, the improvements in laboratory techniques may soon reduce the need for invasive prenatal diagnosis. Choolani provides an excellent summary of the state-of-the-art analysis of fetal cells in the maternal circulation and the various methodologies that have been employed to identify, enrich and analyse the elusive nucleated fetal red blood cells that circulate in the mother during early pregnancy.

Cervical cancer screening is an established procedure which has been shown to decrease the incidence of invasive cervical cancer. Singapore will be embarking on its own screening programme soon. However, quality control of nation-wide programmes is absolutely vital for the integrity of these. Haldwin and Walker document the UK experience and the lessons learnt. The introduction of the Bethesda system of reporting for cervical smears has resulted in the occurrence of a very large numbers of ASCUS (Atypical Squamous Cells of Undetermined Significance) smears. The significance of these smears and their management has been very confusing and led to large numbers of unnecessary colposcopies. Kirby et al, in this issue, discuss the very important triage process for these smears and the role of HPV (Human Papillomavirus) testing.

The practice of Gynaecology in the care of the post-menopausal woman has also changed significantly in the light of the publication from the Women's Health Initiative (WHI) study. Loh discusses the ramifications of this and other trials and its implications on the prescription of hormone replacement therapy (HRT) to the asymptomatic post-menopausal woman. The Editorial Board also invited articles on contemporary management of uterine fibroids (Suresh) and infertility (Yap and Yu) to keep clinicians abreast of the latest developments in these fields.

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Commensurate with the publication of these important landmark articles, the Chapter of Obstetricians and Gynaecologists, Academy of Medicine, Singapore has launched the distance-learning self-assessment multiple-choice questions based on these articles. The Editors would like to acknowledge the contributions of Drs Lai Fon Min, Fong Chuan Wee, Chua Yang, Jeffrey Low, Suresh Nair, Christine Yap, Mahesh Choolani, Loh Foo Hoe and Kuldip Singh in the preparation of these MCQ assessments. The successful completion of these MCQs (after verification) allows Fellow Academicians to accrue up to 8 CME points under Category 3(b) of the Singapore Medical Council (Distance Learning). More information on this can be found on the MCQ card. The Chapter is mandated to provide quality continuing medical education (CME) and continuing professional development (CPD), resulting in high academic and clinical practice standards in Obstetrics and Gynaecology. Together with the development and publication of Clinical Practice Guidelines, the provision of verifiable self-study CME programmes will help to meet the CME need of our Fellows. This is especially pertinent as the Chapter transitions towards College status in 2004, with added responsibilities to meet the academic needs of our Fellows.

The Editors and the Chapter of Obstetricians and Gynaecologists are also delighted with the positive response from our local basic and advanced speciality trainees in Obstetrics and Gynaecology, by the quality of the scientific studies submitted for this edition. The range of subject research matters that our trainees are involved in includes gynaecological oncology, fetal and maternal medicine and labour ward practices. The positive encouragement from the Heads of Departments in grooming our future clinical specialists in the various sub-specialties augurs well for the future.