Nursing the Neonate

Edited by Helen Yeo, Oxford,
Blackwell Science, 1998, 324 pages,
£19.99.

History demonstrates that nursing practice has been shaped primarily by medical instruction and never more so than when considering neonatal nursing and ethical aspects of neonatal care.

This book, written by nurses, begins by giving a historical overview of the development of neonatal care from 1960 to the present time. As indicated in the preface much of the text is through necessity dedicated to disease processes: management of respiratory, cardiac, genetic and surgical problems, jaundice and infection. Other topics include: nursing care of the small baby, the critically ill baby and the dying baby; transcultural nursing; community care; stress, and ethical issues in the neonatal unit. A consistent theme throughout the text was the psychosocial needs of parents.

Contributors allude to ethical issues and dilemmas: from the provision of service to extremely low birthweight infants:

"Often these babies die, or if they live their quality of life may be poor, raising ethical questions about treatment. Morale may be low if nurses are not involved in team decisions and feel strongly about certain ethical aspects" (page 289)
to the rights of infants:

"Human beings of all ages, in hospital, have the right to receive the most effective pain relief that can be safely provided" (page 35), and the role of parents as decision makers and providers of care:

"As the baby's condition improves the parents can do more, bathing, cuddling and feeding" (page 77).

However, none of the contributors truly examine the issues surrounding these concepts. It would seem that the physical and emotional "needs" and not the ethical/moral "rights" of infants and their families were considered, for example: "The nurse looking after the baby can usually judge if the parents have such a need" (page 285). It may be that the ethical stance and thus reasoned argument and justification for practice was not the remit of individual contributors. As it was,

some authors offered an account which lacked depth and explanation on ethical matters in relation to their particular topic. Perhaps discussion on issues with ethical/moral implications should have been left to the final chapter.

In the last chapter, chapter 16, Ethical issues in neonatal care, Mary Sheenan provides an excellent synopsis of the difficulties in delivering "ethical" care and treatment to patients who are extremely vulnerable and unable consensually to contribute to the process. She tackles four issues: personhood and assigned value to life; nursing advocacy and conflict; decision making and informed consent, and empowering parents. Each of these topics is reviewed from both a nursing and medical ethics standpoint, but perhaps examples of "everyday practice" could have been utilised to demonstrate nursing dilemmas, for example showing visitors, other than parents and extended family, around the neonatal unit; giving intravenous fluids instead of formula milk in the absence of breast milk, the extended role of the neonatal nurse/midwife and subsequent responsibility and accountability. The topics discussed by Sheenan could have been individual chapters in themselves. However, the interested reader who wishes to delve further into the ethical aspects of neonatal nursing is offered a well-constructed reading list.

For the most part, this is a good book, giving guidance on basic nursing care as related to pathophysiology. The theme linking each chapter is parent acknowledgment and participation, with an ethical perspective being explored. This reflects the current philosophy of family-centred care within the neonatal environment.

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Reproducing Narrative: Gender, Reproduction and Law

Michael Thomson, Aldershot, Hants, Dartmouth, 1998, 228 pages, £40 (hb).

Thomson's book combines his doctoral research, which began in 1992, with his more recent investigations of the connections between law, constructions of gender and reproductive

developments. This publication contributes to the growing scholarship on how gender influences medical developments and the legal response. Medical and legal reproductive discourses and practices exist as influential technologies of gender. These discourses and practices justify and maintain inequalities (page 219). Thomson describes how non-reproductive factors determine reproductive policies and the ways in which this influences women's autonomy. Also, he demonstrates how non-medical issues are conceptualised as medical, thereby shifting the locus of power to the medical realm.

Why is this process significant for medical ethicists? We must be aware of multiple and pernicious factors which create and perpetuate regressive reproductive policies. If gender is a regulatory system to maintain and legitimate inequality, and if medical and legal reproductive developments are the "technologies of gender", we must understand how they contribute to the oppression of women. To understand the sources of inequality is to combat them.

Thompson exhibits a readiness to confront complex ethical issues with intellectual rigour. In exposing the externalities which influence reproduction, he explores narratives, perceptions, myths and institutions. He identifies that the narratives of gender represent social relations and this has particular significance when reproduction is viewed through the lens of medical control. For example, the fifth chapter examines how the reproductive narrative influenced the criminalisation of abortion in the nineteenth century and how non-medical factors were adopted as relevant by the medical anti-abortion campaign. He identifies abortion as one of many practices which perpetrated inequality by limiting women's reproductive freedom and economic independence, and their access to employment and higher education.

Thomson draws from international research; Linda Williams's primary research with Canadian women who have experienced the trauma of *in vitro* fertilisation is cited and analysed. But Thomson's approach solidly emphasises the social, economic, and political ethos of the United Kingdom. Drawing from abundant and well-referenced sources, he applies feminist theory to women's material and reproductive circumstances, in the tradition of Sue Millns, Jo Bridgeman, Sally Sheldon, and Ellie Lee.