

# Correspondence

## Two sets of ten commandments for obstetricians

SIR

### Part One

If your main aim is to control parturition and protect yourself against legal charges of negligence:

- 1) Belong to a huge, anonymous medical team, so that the 'patients' don't know you personally.
- 2) Be as conventional as possible in your medical practice.
- 3) Control the process of delivery as much as possible.
- 4) Never allow a labouring woman to be without a professional.
- 5) Chart everything as much as possible.
- 6) Share your anxiety with all the members of your team.
- 7) Share your responsibilities with as many different kinds of doctors as possible.

8) If you have a choice between waiting to see what happens and intervention, intervene.

9) As soon as a baby is born, send it to a paediatric unit if there is the slightest problem.

10) Don't pay any attention to statistics because lawyers only ever consider individual cases.

### Part Two

If your main aim is to facilitate the physiological process of parturition (and help to make childbirth the utterly satisfying process it should be):

- 1) Help the parturient to feel that she is not an anonymous person among anonymous professionals.
- 2) Trust what you have learned from your own experience.
- 3) Help the parturient to feel free and spontaneous.
- 4) Remember that total privacy is often the best way to release inhibitions during labour.

5) Spend more time listening to people than making medical notes.

6) Ensure that there are no anxious people in the place of birth.

7) Allow as few people as possible to be responsible for the care of the parturient.

8) Trust the patience of an experienced and motherly midwife.

9) After the birth, always try to keep mother and baby together.

10) Monitor your statistics carefully over the years because they will reflect the quality of your practice.

I thank Iain Chalmers, Director of the National Perinatal Epidemiology Unit in Oxford for encouraging me to present this letter in such an unconventional way.

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