

# Editorial

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In this issue, we have nine interesting articles. Tiwari's group<sup>1</sup> has made a contribution to reveal the issue of intimate partner violence in Hong Kong. Wan et al<sup>2</sup> suggested ways to prevent repeated termination of pregnancy. Catherine Tay, a lawyer, advised us on how to obtain informed consent.<sup>3</sup> Wong et al<sup>4</sup> from the Centre for Health Protection updated the current practice of managing human immunodeficiency virus (HIV) in pregnancy and discussed the use of rapid testing.

Tiwari et al<sup>1</sup> reported the territory-wide survey on intimate partner violence among pregnant women in Hong Kong. Of the 3245 pregnant women recruited for this survey, about 7% had had conflicts with their in-laws in the previous 12 months. Intimate partner violence victimisation in the preceding 12 months was reported by 296 (9.1%) of the women, and since becoming pregnant by 212 (6.5%) of the women. Of those abused in the past year, 216 (73%) reported experiencing psychological abuse only and 80 (27%) reported physical and/or sexual abuse. While it is important to screen women with risk factors for intimate partner violence during pregnancy, universal prenatal screening for intimate partner violence is still controversial.

Wan et al<sup>2</sup> retrospectively studied the social factors and contraceptive behaviour among women seeking repeat termination of pregnancy with the view to bring down the rate of repeated terminations. Repeat termination of pregnancy was a more significant problem among those older married women with completed family than non-repeater. The authors suggested increasing education and counselling to reinforce proper and sustained usage of the contraceptive methods chosen by the repeaters.

Wong and To<sup>5</sup> evaluated whether the experience of back pain would affect patients' preference for epidural analgesia in labour by two parallel cross-sectional surveys in a cohort of 261 new antenatal booking patients and a cohort of 365 postnatal patients. It seems that the experience of back pain in the index pregnancy has a significant negative impact on patients' attitudes and utilisation of epidural analgesia

in labour.

Sham et al<sup>6</sup> did a qualitative study on the use of birth plan. Birth plan was a new idea to nearly 97% of the Chinese women. About 77% of the participants were primiparae. The use of birth plan facilitated their self-preparation, communication with midwife, and decision-making.

Yang and To<sup>7</sup> evaluated the use of local oestrogen cream in labial adhesions in 106 children aged 9 months to 6 years. The mean total duration of treatment was around 5 weeks. Younger patients apparently had more rapid response to treatment, but a higher incidence of recurrent adhesions.

Tay<sup>3</sup> wrote an article on informed consent. She quoted some scenarios which are relevant to O&G practice including obtaining consent from a woman in labour, and performing hysterectomy on a woman who gave consent to an abortion. Finally, she reminded us with a checklist for obtaining an informed consent.

Wong et al<sup>4</sup> has updated the current management of HIV in pregnancy. The universal antenatal HIV testing programme has been shown to be an efficient and effective initiative in Hong Kong. To further reduce the mother-to-child transmission, he argued for the implementation of rapid testing for HIV during the intrapartum for late-presenting mothers with unknown status. Provision of a rapid testing is now a current practice in the Hospital Authority.

Suen and Chan<sup>8</sup> reported a case of heterotopic pregnancy in which the ectopic pregnancy was treated by laparoscopic salpingectomy while the intrauterine pregnancy subsequently ended up in a live birth at term.

Lam et al<sup>9</sup> reported a very rare case of vulval tuberculosis and discussed the diagnosis and management.

I hope that you will enjoy reading these articles. I

would like to thank all the authors for their contributions to this journal.

Wish you a prosperous Year of Rat

**KY Leung**

MBBS, FRCOG, FHKAM (O&G)

Editor-in-Chief

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## References

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1. Tiwari A, Chan KL, Fong D, Leung WC, Brownridge DA, Lam H, et al. A territory-wide survey on intimate partner violence among pregnant women in Hong Kong. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:7-15.
2. Wan RS, Li RH, Lo SS, Fan SY. Repeat termination of pregnancy among Hong Kong women: a retrospective audit review. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:23-9.
3. Tay CS. Informed consent in obstetrics and gynaecology. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:43-7.
4. Wong KH, Chan KC, Bognar FA. An update on HIV and pregnancy. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:48-52.
5. Wong MW, To WW. Experience of back pain symptoms and the choice of epidural analgesia in labour: a patient questionnaire survey. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:16-22.
6. Sham A, Chan L, Yiu KL, Ng CW, Ng J, Tang PL. Effectiveness of the use of birth plan in Hong Kong Chinese women: a qualitative exploratory research. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:30-4.
7. Yang TM, To WW. Paediatric labial adhesions: evaluation of response to topical oestrogen therapy. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:37-40.
8. Suen SH, Chan SC. Successful laparoscopic management of a spontaneous heterotopic pregnancy. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:53-5.
9. Lam SK, Chan KS, Chin R. A rare case of vulval tuberculosis. *Hong Kong J Gynaecol Obstet Midwifery* 2007; 7:56.