

- randomized controlled trial. *Climacteric* 2003; **6**: 302–310.
- 12 Mastorakos G, Sakkas EG, Xydakis AM, Creatsas G. Pitfalls of the WHIs Women's Health Initiative. *Ann NY Acad Sci* 2006; **1092**: 331–340.
  - 13 Shapiro S. Causation, bias and confounding: a hitchhiker's guide to the epidemiological galaxy. Part 1. Principles of causality in epidemiological research: time order, specification of the study base and specificity. *J Fam Plann Reprod Health Care* 2008; **34**: 83–87.
  - 14 Machens K, Schmidt-Gollwitzer K. Issues to debate on the Women's Health Initiative (WHI) study. Hormone replacement therapy: an epidemiological dilemma? *Hum Reprod* 2003; **18**: 1992–1999.
  - 15 Klaiber EL, Vogel W, Rako S. A critique of the Women's Health Initiative hormone therapy study. *Fertil Steril* 2005; **12**: 84: 1589–1601.
  - 16 Hersh AL, Stefanick ML, Stafford RS. National use of postmenopausal hormone therapy: annual trends and response to recent evidence. *JAMA* 2004; **291**: 47–53.
  - 17 Du Y, Doren M, Melchert H, Scheidt-Nave C, Knopf H. Differences in menopausal hormone therapy use among women in Germany between 1998 and 2003. *BMC Womens Health* 2007; **7**: 19.
  - 18 Barbaglia G, Macia F, Comas M, Sala M, del Mar Vernet M, Casamitjana M, et al. Trends in hormone therapy use before and after publication of the Women's Health Initiative trial: 10 years of follow-up. *Menopause* 2009; **16**: 1061–1064.
  - 19 Guay M, Dragomir A, Pilon D, Moride Y, Perreault S. Changes in pattern of use, clinical characteristics and persistence rate of hormone replacement therapy among postmenopausal women after the WHI publication. *Pharmacoepidemiol Drug Saf* 2007; **16**: 17–27.
  - 20 Coombs NJ, Boyages J. Changes in HT prescriptions in Australia since 1992. *Aust Fam Physician* 2005; **34**: 697–698.
  - 21 Gayet-Ageron A, Amamra N, Ringa V, Tainturier V, Berr C, Clavel-Chapelon F, et al. Estimated numbers of postmenopausal women treated by hormone therapy in France. *Maturitas* 2005; **52**: 296–305.
  - 22 Townsend J, Nanchahal K. Hormone replacement therapy: limited response in the UK to the new evidence. *Br J Gen Pract* 2005; **55**: 555.
  - 23 Waaseth M, Bakken K, Lund E. Patterns of hormone therapy use in the Norwegian Women and Cancer study (NOWAC) 1996–2005. *Maturitas* 2009; **63**: 220–226.
  - 24 US Preventive Services Task Force. Postmenopausal hormone replacement therapy for primary prevention of chronic conditions: recommendations and rationale. *Ann Intern Med* 2002; **137**: 834–839.
  - 25 Grodstein F, Manson JE, Stampfer MJ. Hormone therapy and coronary heart disease: the role of time since menopause and age at hormone initiation. *J Womens Health* 2006; **15**: 35–44.
  - 26 Hernan MA, Alonso A, Logan R, Grodstein F, Michels KB, Willett WC, et al. Observational studies analyzed like randomized experiments. An application to postmenopausal hormone therapy and coronary heart disease. *Epidemiology* 2008; **19**: 766–779.
  - 27 Manson JE, Bassuk SS. Menopausal hormone therapy and the risk of coronary heart disease. Does the relation vary by age or time since menopause? *The Monitor* 2007; **October**: 17–22.
  - 28 Manson JE, Bassuk SS. Invited commentary: Hormone therapy and risk of coronary heart disease – why renew the focus on the early years of menopause? *Am J Epidemiol* 2007; **166**: 511–517.
  - 29 Rossouw JE, Prentice RL, Manson JE, Wu L, Barad D, Barnabei VM, et al. Postmenopausal hormone therapy and risk of cardiovascular disease by age and years since menopause. *JAMA* 2007; **297**: 1465–1477.
  - 30 Manson JE, Allison MA, Rossouw JE, Carr JJ, Langer RD, Hsia J, et al.; the WHI and WHI-CACS Investigators. Estrogen therapy and coronary-artery calcification. *N Engl J Med* 2007; **356**: 2591–2602.
  - 31 Salpeter SR, Walsh JME, Greyber E, Salpeter EE. Brief Report: Coronary heart disease events associated with hormone therapy in younger and older women. *J Gen Intern Med* 2006; **21**: 363–366.
  - 32 Harman SM, Naftolin F, Brinton EA, Judelson DR. Is the estrogen controversy over? Deconstructing the Women's Health Initiative study: a critical evaluation of the evidence. *Ann NY Acad Sci* 2005; **1052**: 43–56.
  - 33 Grodstein F, Clarkson TB, Manson JE. Understanding the divergent data on postmenopausal hormone therapy. *N Engl J Med* 2003; **348**: 645–650.
  - 34 Naftolin F, Taylor HS, Karas R, Brinton E, Newman I, Clarkson TB, et al. The Women's Health Initiative could not have detected cardioprotective effects of starting hormone therapy during the menopausal transition. *Fertil Steril* 2004; **81**: 1498–1501.
  - 35 Manson JE, Bassuk SS, Mitchell Harman S, Brinton EA, Cedars JL, Lobo R, et al. Postmenopausal hormone therapy: new questions and the case for new clinical trials. *Menopause* 2006; **13**: 139–147.
  - 36 Juni P, Dieppe P. Older people should NOT be prescribed 'coxibs' in place of conventional NSAIDs. *Age Ageing* 2004; **33**: 100–104.
  - 37 Worrall J. Evidence in medicine and evidence-based medicine. *Philosophy Compass* 2007; **49**: 395–400.
  - 38 Ortiz E. Market withdrawal of Vioxx: is it time to rethink the use of COX-2 inhibitors? *J Manag Care Pharm* 2004; **10**: 551–554.
  - 39 Shapiro S. Risk of cardiovascular disease in relation to the use of combined postmenopausal hormone therapy: detection bias and resolution of discrepant findings in two Women's Health Initiative studies. *Climacteric* 2006; **9**: 416–420.
  - 40 Ettinger B, Grady D, Tosteson ANA, Pressman A, Macer JL. Effect of the Women's Health Initiative on women's decisions to discontinue postmenopausal hormone therapy. *Obstet Gynecol* 2003; **102**: 1225–1232.
  - 41 Rossouw JE. Postmenopausal hormone therapy for disease prevention: have we learned any lessons from the past? *Clin Pharmacol Ther* 2008; **83**: 14–16.
  - 42 Michels KB. Hormone replacement therapy in epidemiologic studies and randomized clinical trials – are we checkmate? *Epidemiology* 2003; **14**: 3–5.
  - 43 Salpeter SR, Walsh JME, Greyber E, Ormiston TM, Salpeter EE. Mortality associated with hormone replacement therapy in younger and older women. *J Gen Intern Med* 2004; **19**: 791–804.

## BOOK REVIEW

**Revolutionary Conceptions: Women, Fertility and Family Limitations in America, 1760–1820.** Susan E. Klepp. 2009. NC, USA: The University of North Carolina Press. ISBN-13: 978-0-8078-5992-6. Price: £53.95. 352 pages (hardback)

This book has been published on behalf of the College of William and Mary and the Colonial Williamsburg Foundation in the USA, both of which coincidentally I came across this summer while in Virginia. It is very clear that Americans have a deep relationship with their colonial heritage and take huge pride in authenticating and recreating their origins, as anyone who has visited Williamsburg will have witnessed. Similarly, this book has been meticulously researched from a wealth of sources and challenges old assumptions on fertility and family planning in colonial times. The author's central theory is that American women began to reject the lifetime of childbearing and started to limit births more than 100 years in advance of

Western Europe, with the exception of France; an alternative 'American revolution' that was invented and implemented by women themselves.

This book is not easy bedtime reading material and has numerous footnotes with historical references. It relates to many diverse ethnic, cultural and religious groups such as Quakers, the Pennsylvania Dutch, rural and urban populations. There are attractive illustrations of women and family groups, often portrayed with fruit and flowers as iconic props representing 'female promise and procreation'. There is a complex association throughout with the demographics of enslaved women; I would have been interested in a chapter specifically on their lives and patterns of childbearing. Thomas Jefferson, the third USA president, took up with a slave, Sally Hemmings, after the death of his wife in 1782. Modern DNA testing has suggested his lineage continues in the current African-American population although, as a consummate politician, he denied any carnal relationship with

a slave at the time.

The birth control chapter states that most historians conclude that contraception was not significant in colonial America. The author disputes this and found examples to the contrary, but mainly referencing herbal remedies from diaries, chemists and doctors' notes. She found little reference to sexual abstinence other than with nursing mothers. Given the lack of effective contraception from the modern perspective, it is not exactly clear what underpins the revolutionary limitation of family size.

In summary, if you are writing a PhD on historical patterns of fertility in North America this book will be a godsend. For the rest of us, it may become a little dusty on the bookshelf but was an interesting read over the Christmas break nevertheless.

Reviewed by **Ailsa Gebbie**, FRCOG, FFSRH, Consultant in Community Gynaecology, NHS Lothian, UK