This book is based on, but comprises a total revision of its predecessors (*Contraception* by F. Theron and *Contraception: theory and practice* by F. Grobler). Most authors are specialist gynaecologists and obstetricians.

The book comprises 15 chapters addressing reproductive physiology, contraceptive steroid hormones, oral hormonal contraceptives, injections, intra-uterine contraception, and new developments such as intravaginal, intra-uterine, transdermal and subdermal administrations of contraceptives. Addressed physical contraceptive methods include male and female condoms, diaphragms, cervical caps, sponges and spermicides. Male and female sterilisations as well as the termination of pregnancies are also discussed. Natural and traditional contraceptive methods are discussed in one chapter. Four types of emergency contraceptives (oestrogen-progestogen combination, progestogen only, intra-uterine contraceptive devices (IUCDs) and mifepristone) are presented. ‘Contraception under specific circumstances’ present aspects to be considered when prescribing contraceptives to adolescents, peri-menopausal women, post-abortion women, postpartum and lactating women, mentally disabled women and those who smoke.

One chapter is devoted to providing effective contraceptive services to women with medical conditions such as cardiac, hepatic, renal or neurological conditions, and those suffering from connective tissue, endocrine, metabolic and gastrointestinal disorders. The contraceptive needs of women with gynaecological conditions and malignant disease are also addressed.

Dual contraception is recommended for HIV-infected women because hormonal contraception can effectively prevent conception and barrier methods can protect the woman against infections. Although no interaction has been reported between anti-retrovirals (ARVs) and progestogen-containing contraceptives, drug interactions can occur between oestrogen and non-nucleoside reverse transcriptase inhibitors (such as
efavirenz and nevirapine) as well as with protease inhibitors. “Porgestogen-releasing IUCDs are considered optimal in these women, who are often anaemic, as blood loss is limited, efficacy is very high, drug interactions do not occur and infectious complications are extremely rare” (Soma-Pillay in Dreyer, 2012:143).

The last chapter compares different contraceptive methods in a systematic manner. Throughout the book HIV/AIDS issues are emphasised, as well as the importance of other sexually transmitted infections.

This book should provide up-to-date information to healthcare practitioners providing contraceptive services in South Africa and in other African countries. As stated in the preface of the book: “It is hoped that this revised text will contribute to addressing the unmet contraceptive needs of many women... This can only be done by improving knowledge of the subject, by increasing awareness of the importance of fertility control for women’s health and wellness and by changing perceptions about the effectiveness and safety of modern contraceptives” (Dreyer, 2012:vii).