books that address pregnancy, birth, and breastfeeding. The books and DVDs reviewed in this issue's column include *Birth and Parenting Skills: New Directions in Antenatal Education*, edited by Mary L. Nolan and Julie Foster, with foreword by Nola Ishmael; *The Complete Illustrated Pregnancy Companion: A Week-by-Week Guide to Everything You Need to Do for a Healthy Pregnancy*, by Robin Elise Weiss, with Marcello Pietrantoni; *Gentle Birth, Gentle Mothering: A Doctor's Guide to Natural Childbirth and Gentle Early Parenting Choices*, by Sarah J. Buckley, with foreword by Ina May Gaskin; *Empowered to Birth Naturally: One Woman's Journey to Homebirth*, by Patrice A. London; *Labor of Love: A Midwife's Memoir*, by Cara Muhlhahn, with foreword by Abby Epstein and Ricki Lake; *The Wonderful Place*, by Chrissy Butler; *When the Labyrinth Becomes a Laborinth*, by Pam England; *FitBALL® USA's Great Expectations Pregnancy Program*, DVD

produced by Ball Dynamics, with Lisa Westlake as instructor; *Lullaby Exercises*, produced by chickens and directed by Darcy Novo Albrecht; *Preterm Labor: Reduce Your Risks & Learn the Signs*, produced by InJoy Birth and Parenting Videos; *Dunstan Baby Language: Learn the Universal Language of Newborn Babies*, produced and directed by Dunstan Baby; and *Hab It – Pelvic Floor*, produced by PT Partners, LLC.

In “Deb’s Last Laugh” column, titled “Sympathy Lactation,” Deb Gauldin uses humor to describe assisting a parent and her young children with boarding an airplane.

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Visit the new Lamaze research blog, Science & Sensibility (www.scienceandsensibility.org), to stay up to date and comment on the latest evidence that supports natural, safe, and healthy birth practices.

LETTER TO THE EDITOR

Welcoming Transparency: Some Physicians Find Merit in Online Ratings

Jacqueline Levine, BA, CD(DONA), CLC, LCCE, FACCE

ABSTRACT

This letter to the editor is in response to Wendy Budin's editorial, “Welcoming Transparency,” published in the Volume 18, Number 2 (Spring 2009) issue of *The Journal of Perinatal Education*. As Dr. Budin noted, some individuals in the medical community want to counter consumer-led efforts to rate doctors' performance and find relevant health-care information online. Their opposition to such efforts is exemplified by extreme measures such as the “gag order” mentioned by Dr. Budin. However, a recent article published by Medscape reveals that some physicians understand and welcome the need for transparency in health care.

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It's very true that, at this juncture, there are no ideal online rating tools for the consumer who needs reliable, vetted, thorough, and usable information about health-care providers and facilities. It's also true that public reporting brings transparency and improvement in services, and that's what a good online resource has the power to accomplish. Consumers seem to agree, and they are using existing sites, whatever the shortcomings.

It's understandable, too, that physicians don't want to be rated unfairly and anonymously; some have eagerly responded to the strategy of the “gag order” as an extreme defense against the unregulated nature of more than 40 online sites. But not all doctors feel that way. For example, in a recent Medscape article, several physicians made some rather candid self-appraisals, including tacit approval of and positive reaction to the whole situation of online ratings. I find their opinions very revealing and worth quoting at length. Here is a portion of the comments posted on Medscape's Physician Connect (MPC), a physician-only discussion board, as reported in Nancy R. Terry's April 24, 2009, Medscape article, entitled “Physician-Ratings Websites Get Zero Stars from Doctors”:

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6 pounds and 12 ounces at birth. Our “little guy” is clearly a great eater—after 6 months of exclusively breastfeeding Rowen, we are adding fruits and vegetables to his diet, much to his delight. Each day seems to bring a new adventure and a new glimpse into the little boy he is growing into. Watching Rowen experience the world with his huge eyes and big smile makes all of the tasks that go with being new parents worthwhile. I love that he loves to give kisses—big, giant, wet ones that we call “sloppy joes.” The kid is wallowing in love, and it’s so cool to watch him turn around and give it to others.

From the yoga to the doula and, of course, to our rock star midwife—we couldn’t have been more happy with the results of our birth experience. Even though I work in health care and know the statistics, I was still astounded by hearing the stories in my new-mom’s group: Out of the 11 of us, only two had vaginal births and only a handful were able

to avoid NICU stays and other complications. Russ and I consider ourselves truly blessed to have had an amazing natural birth and to have a happy and healthy baby boy. Our birth experience wasn’t exactly how I planned it, but it was the perfect introduction to parenthood—take deep breaths, do your best, and then let it go.

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A casual survey of www.RateMD.com [a well-populated ratings site] reveals that many patient postings focus more on the doctor-patient interaction than on the quality of care. “Patient outcomes, whether we like it or not,” remarks an orthopedic surgeon, “are strongly related to psychological factors, so doctors lacking in people skills should be alerted to this.” A cardiothoracic surgeon adds, “Let’s face it. It’s a consumer society and how we treat people is part of our product.”

Some MPC contributors admit that not all patient criticisms are groundless. “How many of us do not even look a patient in the eyes?” remarks a critical care physician, who admits that he often is glued to the computer screen or a patient’s chart. “There are a lot of physicians out there who are frankly very arrogant, even with colleagues, and are especially demeaning toward patients,” comments an MPC contributor. “Most people are good natured,” adds a radiologist, “and if they receive a positive experience, they will tend to reflect it.”

One internist views the proliferation of online patient comments as a wake-up call. “If I were still practicing, I would welcome my patients to comment. As I see it, one of two things would happen: [the postings] would become a source of referrals, or I would learn something and my skills would improve. Either way I would be better off!” (para. 11–13)

“I don’t think we should criticize patients without asking ourselves if there’s something we should have done better,” says a neurologist. “I want to be a better doc next year than I am this year, and I hope that even sour-grapes patients can help me get there.” (para. 15)

I was pleased to read what these physicians had to say, and I hope that opinions such as theirs are foils to those who decry the reality of consumer ratings and are averse to transparency in health care. As Wendy Budin wisely predicts, Internet rating systems will indeed be the “norm” someday, especially if true health-care reform becomes a reality.

In the meantime, I must speak briefly about *The Birth Survey* (a project launched by the Coalition for Improving Maternity Services) and give it a deserved boost. *The Birth Survey* stands as a fine example of an effective ratings site for maternity care, and embodies the best standards for collecting information and disseminating it to consumers. This project is a real first. At the survey’s free and easily navigable Web site (www.thebirthsurvey.com), mothers can input their varied birth experiences at the one end, and parents-to-be can retrieve ratings of local providers and facilities at the other end, nationwide. It’s an invaluable and ever-growing resource that already posts statistics from the health departments of nine states, with more to come. As of this writing, almost 18,000 surveys have been initiated. I urge all mothers who have given birth in the last 3 years to log on and take the survey, or support this effort to promote choice and transparency in maternity care by volunteering, downloading promotional information from the site, or e-mailing a friend to spread the word.

JACQUELINE LEVINE is committed to providing a continuum of care to underserved women in Long Island, New York, where she teaches free Lamaze classes and provides free labor, birth, and breastfeeding services to all the women in her classes at Planned Parenthood of Nassau County. She is a contributing author to the Lamaze e-newsletter, Building Confidence Week by Week, and a Marketing Ambassador for the Grassroots Advocacy Committee of the Coalition for Improving Maternity Services.