

## Preface

Reduction in maternal mortality and morbidity has been one of the more spectacular achievements of twentieth century medicine, and reduction in fetal and perinatal mortality and morbidity can be expected. That the science of obstetrics is not, itself, now past the age of childbearing is evidenced by the proceedings of this symposium on the pathology of pregnancy, with its twin emphasis on fundamental research into the nature of the mother-fetus relationship and its disorders, and on the application of advanced techniques, derived from other medical and allied sciences, to the care of the pregnant woman and her child. Many of the procedures, and much of the research, described in these proceedings are only possible if delivery is effected in hospital and it is disheartening to reflect that the pace of advance in obstetric care could decelerate if maternity beds were closed.

The proceedings open with with an account of the nature of fetoplacental function, its assessment, and some of the postulated effects of placental insufficiency. Next, coagulation disorders, the haemoglobinopathies, and the management of rhesus haemolytic disease receive consideration. The fact that cases of rhesus haemolytic disease are now so few that it is recommended that care of them be centralized attests the decline in fetal morbidity from this disease. Although much is known of the pathology, in particular, the histopathology, of eclampsia, preeclampsia and renal disease during pregnancy, the papers in this section are a reminder that this is a field inviting active research. Neither puerperal fever nor maternal urinary tract infection figure *per se* in the section on infectious disease, attention being focused on topics that are either controversial or currently under intensive investigation. Thus, the role of mycoplasmas and viruses in maternal and fetal disorders are considered, together with serious bacterial infection in the newborn. The section on trophoblastic tumours emphasizes the importance of collaboration between pathologist and physician, both from the viewpoint of prognosis in the individual patient, and from that of elucidating the fault in the biological system. The closing section on congenital abnormalities highlights that fortunate collaboration between obstetrician, physician and laboratory scientist which has resulted in so many enduring advances in obstetric pathology and obstetric care.

Many interesting and valuable comments were made during the symposium, in discussions on the various papers, providing the impetus for further research. I am grateful to those who participated, and, particularly, to those whose papers are published here. I thank the College Secretariat, who organized the symposium.

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