Book Reviews

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Clinical Cardiology. By M. Sokolow and M. B. McIlroy. Los Altos, California, Lange Medical Publications, 1977. Pages: 659. Price: $16.00.

Drs. Sokolow and McIlroy have attempted an ambitious condensation of their specialty into the format of the Lange Medical Series. To present in a little more than six hundred pages a subject that stretches to more than two thousand in Hurst's opus necessarily entails a marked restriction in the extent and depth of coverage of the subject; and the authors state this at the beginning. They emphasize the clinical core of their discipline—coronary-artery disease, hypertension, arrhythmias, valvular heart disease and cardiac failure. Topics such as basic and developmental anatomy, physiology, diagnostic techniques, monitoring, and associated organ diseases are surveyed, but not in great depth. Special emphasis is given according to the authors' estimation of the importance of each subject in their specialty.

The early chapters in the book have little to offer the practicing anesthesiologist who maintains a reasonable familiarity with cardiac disease, although they provide concise summaries of cardiac history-taking and circulatory physiology. In a similar fashion, anesthesiologists will find the brief sections on oxygen and carbon dioxide much too elementary to be of much use. The section which follows, on measurement of cardiac output and calculation of hemodynamic values, while basic, provides a ready reference for the formulas used and normal values for these modalities, not easily obtained elsewhere. The section on noninvasive techniques of diagnosis has a short, easily understandable section on the relatively new and burgeoning field of echocardiography. Other techniques such as ST segment mapping, myocardial enzyme determinations, exercise testing, various graphic methods, and electrocardiography are given only passing notice. The section on invasive investigations overlaps with the anesthesiologist's use of invasive hemodynamic monitoring, and there are points of technique with which many will disagree. We would certainly take issue with the statement that for indwelling arterial catheters of more than one day's duration the brachial artery is the artery of choice, being "less painful and restricting than radial or femoral sites." The technique described for insertion of arterial catheters seems overly involved and traumatic—a somewhat complicated version of the Seldinger technique using a Cournand needle. The authors raise the specter of peripheral embolization from arterial lines with splinter hemorrhages and Osler's nodes; this is certainly at variance with our experience and the results of a number of published studies. Why the authors do not mention the ease and advantages of the internal jugular route for the placement of the Swan-Ganz catheter is not at all clear; nor is their omission of the role of endotracheal intubation in the hospital setting of a cardiac arrest understandable.

The authors clearly come into their own in the sections on coronary-artery disease, valvular disease, arrhythmias, and cardiac failure. These chapters constitute the centerpiece and bulk of the book. The chapter on coronary-artery disease is problem-oriented, one would suspect, to guide house officers in the management of coronary-artery disease and acute infarctions. The following chapter, on hypertension, has much the same orientation, as do the chapters on valvular disease and heart failure—with suggested courses of management and drug therapy. These chapters are especially useful because they provide the detail on cardiac diseases which is usually necessarily absent from anesthesiology texts, and they make a welcome supplement in this regard. However, new therapeutic interventions for heart failure such as Dobutamine, afterload reduction, or the intra-aortic balloon are only briefly discussed.

With the exceptions already noted, this book is successful in providing a concise summary of clinical cardiology; while it would not be called a definitive text, it is an excellent middle-level work.

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Diagnostic Electrocardiography. Second edition. By M. C. Ritota. Philadelphia, J. B. Lippincott, 1977. Pages: 210. Price: $22.50.

The second edition of Ritota's *Diagnostic Electrocardiography* is a basic text broadly directed at nurses, interns, and primary physicians. His intention is to provide a streamlined and stepwise discussion of the interpretation of electrocardiograms. Topics newly introduced include: atrial T-waves, left atrial hypertrophy, trifascicular block, hemiblocks, and monitoring leads frequently used in intensive care units. The book is presented in an outline format, with many electrocardiographic tracings.

Aside from a few poor or absent correlations between the text and illustrations, the book is well organized. The chapters on technical and mechanical considerations provide information that may be left out of more advanced texts. Illustrations are large and numerous, and the frequent inclusion of complete electrocardiograms is especially helpful. A list of electrocardiographic criteria accompanies each pathologic condition discussed. Unfortunately, it is not clear whether all or just some combinations of the diagnostic criteria are (is) necessary for each particular disease entity. Topics covered range from atrial and ventricular arrhythmias through heart blocks, to pericarditis, ischemic heart disease, and drug and electrolyte effects on the electrocardiogram. The chapter on new monitoring leads used in the coronary care unit is especially helpful. It discusses the MCL_1 lead as well as the Lewis lead, and what the author calls the "Bastard Bipolar Lead II."

The author deliberately omits a great deal of theory and discussion of electrophysiology with the intention of sparing the reader discouragement. These reviewers believe that it is more discouraging to have to memorize, without benefit of reason, lists of events and conditions than it is to tackle a complex subject armed with understanding of the basic pathophysiology and electrophysiology. The omission of the electrophysiologic data severely limits the usefulness of this book for the practicing physician, and especially the anesthesiologist.

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