Book Reviews

Nanette K. Wenger, Margaret E. Mattson, Curt D. Furberg, Jack Elinson (eds) Assessment of Quality of Life in Clinical Trials of Cardiovascular Therapies

It should be said that this book is a pleasant surprise for the cardiologist. At a time when there are so many who are aware of the statistical significance, and so few who are aware about soft end-points, this book opens up new horizons and perspectives as to forthcoming trends in cardiology. All of us have been, for too many years, involved in trying to add years to life, but only a very few of us have also tried to add life to years.

This book is edited by well known authorities dealing with the problems of The Assessment of the Quality of Life in Clinical Trials of Cardiovascular Therapies. There are three main parts: (1) A Review of the State of the Art dealing with the concept of the quality of life as a philosophical analysis; (2) Assessment of the Changes and Applications, and (3) summarizes the return of the working groups which discuss selected topics such as mild hypertension, myocardial infarction, congestive heart failure and coronary artery bypass graft surgery.

In the appendix we find some selected test instruments and a bibliography. I think that this is a most important contribution to the National Heart Lung and Blood Institute which organised the workshop on the Assessment of Quality of Life, in June 1983. The editors have mentioned in their preface some of the components which the quality of life includes, such as: physical capabilities, the emotional status, social and economic interactions, intellectual functioning and others. The book will help to increase the interest of the profession to the quality of survival. It will deepen the understanding that it is not enough to provide acute care but also to find therapeutic solutions and the importance of preparing the patients for a productive and meaningful life.

This book is recommended to every physician treating patients. The publishers should be complimented for producing this book that is printed clearly and is easy to read.

Jan J. Kellermann, Tel Hashomer
St. W. Miller

Cardiac Angiography


This is a general text on cardiac angiography which includes a comprehensive introduction and chapters on coronary artery disease, myocardial and pericardial disease, valvular and congenital disease. Its strong point is in the radiographic description of anatomy and does not attempt to be comprehensive with regard to catheterization technique, radiographic systems, radiation safety or hemodynamic principles. It is a comprehensive text on the radiographic anatomy of cardiac disease and will be useful to the cardiac angiographer.

W.C. Sheldon, Cleveland, Ohio

E. Stanley Crawford Diseases of the Aorta

An Atlas of Angiographic Pathology and Surgical Technique
The purpose of this atlas is to present in picture form all diseases of the aorta, the multiple variations which each may assume, and the techniques available for their surgical treatment. This statement from the preface of the book is brilliantly fulfilled by an expert illustration of the manyfold conditions of all segments of the aorta. The self-explanatory illustrations comprising angiographic and schematic depiction of the various conditions and of their surgical repair are accomplished by a concise but most competent text on the incidence, clinical manifestations, diagnosis and surgical management of the numerous aortic diseases. Moreover, reference is made to all important contributors to this medical field, which has made so much progress within the last two decades. This atlas presents in a most easy way the enormous experience of the authors and of many cited contributors to the reader. Its use is highly recommended to all persons involved with the diagnostic and therapeutic management of diseases of the aorta. The book will be extraordinarily profitable to its readers and – hopefully – to their patients as well. Martin Rothlin, Zurich

usually well written. The illustrations are the finest ever published in any textbook. Clarity and interpretation have been utmost and fully honored by the authors. Sufficient information is available for basic electrophysiology, arrhythmia interpretation and management. The authors have taken advantage of many review articles to supplement a complete and up-to-date bibliography. The authors have given sufficient balance to the interpretation and management of the various arrhythmias. Their interpretation is clear and serves an extremely useful purpose for teaching and understanding both simple and complex cardiac arrhythmias. I can highly recommend the use of this text for all students, cardiac fellows and clinicians. At present, there is no text that can match this presentation and the clarity of the illustrations. Leonard S. Dreifus, Philadelphia, Pa.

S.B. King, II; J.S. Douglas
Coronary Arteriography and Angioplasty

This new volume by King and Douglas is an important contribution to the current teaching of coronary angiography. It contains practical information on the performance of coronary arteriography by a variety of techniques and basic principles of interpretation. The final chapter describes percutaneous trans-luminal coronary angioplasty. It should be a valuable reference for those who perform cardiac catheterization and coronary arteriography or percutaneous balloon angioplasty. W.C. Sheldon, Cleveland, Ohio
E. Sandoe; B. Sigurd Arrhythmia
Diagnosis and Management Fachmed AG, St. Gallen 1984 XIV + 536 pp.; SFr. 225. ISBN 3-905-598-00-0
The authors have set out on a very ambitious task to bring the current status of diagnosis and management of cardiac arrhythmias to the student clinician and teacher. The text is extensive, complete and un-

T. W. Meade
Anticoagulants and Myocardial Infarction

This interesting monograph by Dr. Meade and 14 collaborators from the UK and the Netherlands offers a critical reevaluation of the role of blood coagulation in coronary artery disease and myocardial infarction. Surprisingly, few citations are in other than the English language. In spite of publication in 1984, it is unfortunate that the primary role of acute thrombosis in clinical acute myocardial infarction has not been a major focus. The auxiliary role of anticoagulation following acute thrombolysis is crucial and is fundamentally not considered. Other omissions concern spontaneous lysis in the coronary circulation after necrosis is complete and the development, presence and resolution of mural thrombus, which is common not only in ventricular aneurysm but as a transient phenomenon in association with many large infarcts.

There are ten chapters of which four are concerned with more basic aspects of the actions of anticoagulants. Two are concerned with epidemiological evidence and randomized trials, three others with observational studies; and one (excellent) on anticoagulant control and the risk of bleeding.

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The overall subject of the role of blood coagulation in ischemic heart disease is admittedly complex. The appropriate physiological model (or multiple models) are not adequately presented. Although ‘nature is inscrutable’ and self-regulating biochemical systems are unlikely to allow of easy solution, a finer combination of clinical observational studies, together with basic mechanisms, might have allowed for more useful, although speculative, working hypotheses.

The monograph is dominated by the epidemiologic in contrast to a clinical discipline, the editor and his principal contributors. The ‘once and for all answer’ to be gained from further application of strict scientific trials is probably a somewhat forlorn hope. A multifaceted clinical problem is more likely to be answered by multiple treatments, each targeted to a specific disorder, rather than a broad-based population-oriented general intervention. In fact, this issue is insightfully presented in the chapters by Meade and by Mitchell, in which the strengths and weaknesses of randomized trials are lucidly presented – including publication biases which are seldomly adequately addressed. However, figure 6-1 is a striking example of this phenomenon.

The volume, although somewhat expensive, is a worthy contribution and timely, in spite of the deficiencies enumerated above, in the reawakening interest and concern of the complex role of blood coagulation with the process of acute infarction. The monograph is informative, eminently readable and is recommended to investigators in the field of myocardial infarction.

H J. C. Swan, Los Angeles, Calif.

Robert M. Califf; Galen S. Wagner Acute Coronary Care
Principles and Practice
Nijhoff, Boston 1984
With 78 collaborators, the distinguished editors have produced a comprehensive treatise on acute coronary care, comprised of 10 sections and 58 chapters. The section subjects justify the subtitle ‘Principles and Practice’, by including pathophysiology, prediction and prevention of acute ischaemia and infarction, methods for diagnosing and sizing infarcts, monitoring methods, pre-hospital coronary care, post-admission coronary care, coronary care unit organization and coronary care unit phase management, pre-discharge phase and convalescent phase. It is not clear whether the contributions were presentations at a meeting, but the average chapter is less than ten pages. Irrespective of their origin, the editors have produced a masterpiece of organization with minimal overlap. Each chapter is concise and usually comprehensive, with adequate illustrations and tables. That the contents are also authoritative is obvious from the list of contributors, which include: Greenfield, Chahine, Roberts, Gardin, Rosati, Wackers, Adgey, Goldstein, Bulkley, Lie, Moss, Prystowsky, Kaplinsky and the editors themselves. Much of the material covers familiar topics, but often in a novel way, with presentations that are consistently state-of-the-art and state-of-the-science.

Some contributions are original attempts to improve fundamental understanding such as Roberts and Gardin’s ‘Terminology for Location of Acute Myocardial Infarcts’, which attempts to bring order out of the chaos of ECG-pathologic correlations. Similarly, Ideker has superbly clarified his topic in ‘Subendocardial vs. Transmural Infarction: Anatomic and Electro-cardiographic Considerations’. Rather original coverage of several important but neglected topics includes Ballantine’s ‘The Role of Nutrition in Atherogenesis and Acute Myocardial Infarction’ and Teague’s ‘The Potential Usefulness of Doppler Ultrasound in Myocardial Infarction’. Even administrative aspects are discussed for mobile intensive care units and the cost-effectiveness of coronary care units. Pre-discharge and convalescent phase issues include Pryor’s ‘Determination of Optimal Time for Patient Mobilization and Hospital Discharge following Acute Myocardial Infarction’, Rotman’s chapter on minimizing psychological stress and Williams’s on minimizing disability and optimizing return to work. Out of personal interest, I gave extra attention to ‘Pericarditis following Myocardial Infarction’. This was a reasonable discussion for a 3-page effort, but with a few disputable points (that can be altered in the next edition). For example, I am not certain that blood in the pericardial space is common during infarction, unless anticoagulant therapy is being given. Infarct pericarditis is ‘apparent two to six days’ after the clinical onset of infarction, but it can occur from the 1st day to 10 or more days later, at which time it is difficult to distinguish from the Dressier syndrome. The statement on the

prognostic effect of infarct pericarditis (p. 460) is contradictory in that it implies both no effect and a pejorative effect. Indomethacin is an effective treatment, but is perhaps best avoided in acute infarct because of Brunwald’s work on increased size of experimental infarcts in indomethacin-treated animals. On the other hand, the author’s advice about avoiding corticosteroid treatment if possible is very well taken.
All in all, this is a superb and often original coverage of a most important subject for which
the distinguished editors and contributors are to be congratulated.


R.J. Boucek

Coronary Artery Disease

Pathologic and Clinical Assessment Williams & Wilkins, London 1984 XVII + 406 pp., US$ 64.00 ISBN 0-683-00900-1

Coronary Artery Disease: Pathologic and Clinical Assessment is deserving of particular attention by all physicians involved in the diagnosis and management of patients with coronary artery disease. Authored by two cardiologists, Drs. Boucek and Romanelli, together with pathologist Prof. Morales, and a giant of diagnostic coronary angiography, the late Melvin P. Judkins, it comprises a critical evaluation of issues practical in everyday clinical practice. Its 14 chapters are divided into 6 concerned with considerations of anatomy and physiology, 5 with the differing etiologies of coronary artery disease, concluding with 5 other chapters which might be included in the notion of ‘clinical affairs’ in modern parlance. However, chapter 12, ‘Clinical Diagnosis of Coronary Stenosis’, is comprised of only 21 of the 400 odd page volume.

The monograph is of unusual interest for two specific reasons. First, it is based upon experimental and observational reports of carefully conducted human studies placed in reasonable context with limited consideration of the epidemiologic and demographic studies which currently appear to be the ‘scientific’ basis for decision making and recommendations, as to therapy. Second, this refreshing perspective is supported by the superb illustrative material. The technical and anatomic excellence of the studies of Dr. Judkins and his colleagues is well known and to be expected. However, the current monograph includes equally superb pathologic and histologic illustrations and line drawings which will undoubtedly be copied by its readers. The legends complement the figures in their clarity and specificity.

The textual material is, to a significant extent, supportive of the illustrative content. Nevertheless, it is extremely well organized and flows in a logical and readable fashion. In particular, the chapter on atheromatous disease gives the reader a clear perspective of the concepts of the author on this extremely complex topic.

It is difficult to find specific areas of criticism. Perhaps the emphasis on those references of historical importance rather than relevance to current thought may be redundant. Authors of monographs are being forced to be more and more selective in their citations, not only because of the avalanche of new papers on the topic, but because of the limited use to which such bibliographies may be placed. Indeed, certain chapters are deficient in failing to adequately consider and cite more recent and relevant work. For example, chapter 6 (Coronary Blood Flow) contains only one reference cited later than 1975.

An overall assessment would indicate that the content of this volume is near required reading for physicians engaged in the diagnosis and management of patients with coronary artery disease. Its production by Williams and Wilkins is superb. The paper quality, the illustrations, accompanying legends and text, are superior to most and exceeded by none. Highly recommended.

H.J.C. Swan, Los Angeles, Calif.