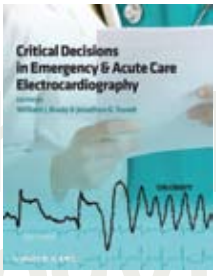
Book reviews

Critical decisions in emergency and acute care electrocardiography

Editors: Brady WJ, Truwit JD
Publisher: Wiley-Blackwell, Oxford, 2009
ISBN: 978-1-4051-5906-7
Price: £59.99



Now electrocardiography is used in daily clinical practice, it is probably widely perceived to have lost its exciting mystique but the basic knowledge enabling accurate ECG interpretation is as important to emergency doctors as it is to electrophysiologists. Throughout this book there are many common clinical scenarios, which are well illustrated with good examples of ECGs. The topics covered appear thoroughly researched and supported by numerous references, useful for further reading. The contributors are a large number of senior medical professionals, the majority with a background in Emergency Medicine.

The book has a unique structure for a text about ECGs. It is divided into sections such as: the ECG in clinical practice; the ECG in acute coronary syndrome; and the ECG in critical care. Chapter titles within each section are questions such as: what are the limitations of the ECG in clinical practice?; how should the ECG be used in the patient during and following cardiac arrest?; and what QRS complex abnormalities result in ST segment elevation that may mimic or obscure AMI? Answers to these question comprise the chapter text, using case scenarios and ECG examples.

I found the chapter titled 'What are the electrocardiographically silent areas of the heart?' to be interesting and reflective of the general style of the book. Immediately following the case presentations, the answer to the question posed is briefly presented followed by a more in-depth discussion with ECG examples.

The title of this book might suggest it to be an easy-to-use, quick reference guide, perhaps suitable for daily use in the accident and emergency department or intensive care unit. The A4 size and information-packed 492 pages mean this is not the reality. The authors make no pretence to this initial assumption. It is, instead, to be used as an educational resource to develop on basic ECG interpretation skills.

Overall, I found this book to be unlike any other ECG book I have come across. It is informative and well illustrated but a little too protracted. Unfortunately, the 'unique format' makes it somewhat difficult to use in the Accident and Emergency Department.

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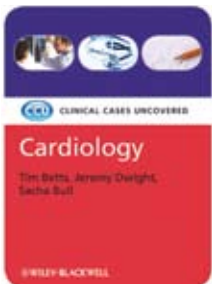
Cardiology clinical cases uncovered

Authors: Betts T, Dwight J, Bull S
Publishers: Wiley-Blackwell, 2010
ISBN: 978-1-4051-7800-6
Price £24.99



Do we need yet another cardiology book? There are already scores of them – a simple internet search provides the evidence! Interestingly, *Cardiology Clinical Cases Uncovered*, a manageable compendium of 245 pages of cases, is immediately apparent on well known on-line book sales sites. Yes, we do need new cardiology texts. This book is contemporary, real world and targeted at a niche market – junior doctors and medical students.

Betts, Dwight and Bull have delivered a commendable book concerning 'everyday' cardiology. They offer clinical scenarios and lead the reader through the presentation, examination, investigation and treatment, to discuss evidence-based management. The authors write in an open, comprehensible manner that encourages the reader to continue with ease through the 26 cases.

But who are the target audience? The authors suggest that it is primarily for medical students and junior doctors. I agree. It is also applicable to specialist nurses and nurse practitioners. There is an underlying theme of assessment, and the book is designed to complement the reader's learning styles to this approach. For those interested in teaching, this book is worth the investment.

The book compromises 3 sections. In part 1 entitled 'Basics', there are essentially 37 pages of cardiology theory (anatomy, physiology, clinical skills, pathology and investigations). This section is well written and supported by a plethora of great diagrams. There is limited attention to imaging modalities, however, all are covered to some extent.

Part 2 entitled 'Cases' is the main part of the book. It follows a question and answer approach, supplemented by many photographs and diagrams. The majority of the common and many of the rarer 'classic' cases are presented. The reader is guided through the cases, differential diagnoses are offered and the cases justified. The scenarios are, however, biased towards ECG interpretation.

Finally, part 3 looks at self assessment with 26 pages of MCQs, EMQs SAQ, and of course the answers!

Would I buy this book? Yes I would – but only as a reference for the purposes of teaching. I do not think that it is appropriate as an educational aid for trainees in cardiology.

At £25, (£19 on Amazon), the book offers good value for money. It is easy to read, clinically relevant, and should be appealing to medical students and junior doctors. It strengthens the Wiley-Blackwell series of 'Clinical Cases Uncovered' and would not go amiss on the book shelf of an aspiring cardiology trainee.

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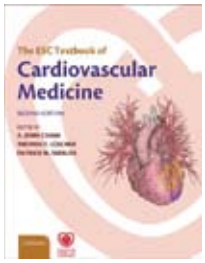
The ESC textbook of cardiovascular medicine, 2nd edition



Editors: Camm AJ, Luscher TF, Serruys PW
Pulbisher: Oxford University Press, Oxford, 2009
ISBN: 978-0-19-956699-0
Price £195

The second edition of the *ESC Textbook of Cardiovascular Medicine* is heralded as "Europe's definitive print and online guide to the latest in cardiology". This 2nd edition, a formidable 1,300 pages in 38 chapters, is completely revised and updated since the first edition which appeared in 2005, and it includes new cardiological information in many specific areas, such as pregnancy, choice of imaging techniques, sports medicine and certification, for example. It also has more images and video content, with extensive MCQs, which can be completed to gain EBAC-accredited CME points.

The new edition reflects current European guidelines and the latest evidence-base, which is intended to harmonise the way we practice throughout Europe and beyond. Updated guidance can be found on www.escardio.org. The European Society of Cardiology (ESC) now represents over 60,000 cardiology professionals across Europe and the Mediterranean.

The sections on cardiac rhythm management are current, concise and comprehensive. As with all chapters the authors are internationally known. These include, syncope (Michele Brignole, Jean-Jacques Blanc, Richard Sutton, Angel Moya), bradycardia (Panos Vardas, Hercules Mavrakis, William Toff), SVT (Jeronimo Farre, Hein Wellens, Jose Rubio, Juan Benezet), atrial fibrillation (John Camm, Paulus Kirchhof, Gregory Lip, Irina Savelieva, Sabine Ernst), VT and sudden cardiac death (Lars Eckardt, Gunter Breithardt, Stefan Hihnloser).

In the chapter on syncope one soon becomes fluent with newer abbreviations, T-LOC, transient loss of consciousness; POTS, postural orthostatic tachycardia syndrome, and so forth. Throughout the book there is liberal dipping in to the latest ESC guidelines for various conditions and provision of key algorithms ranging from angina to pulmonary hypertension. The table on recommendations for competitive sport participation in athletes with inherited cardiomyopathies is another example of very useful information distilled from an ESC working group consensus document which one might not ordinarily have seen.

Newer techniques such as transcatheter aortic valve implantation (TAVI) and optical coherence tomographic (OCT) imaging are amply covered. Comprehensive discussion is also given to fractional flow reserve, including also a discussion of pitfalls and limitations, for example poor reliability in the setting of STEMI.

Clearly there is something for everyone in this definitive textbook. It is not inexpensive. Neither is it bedside reading. It is, however, a 'tour de force, to which everyone in cardiology, Europe-wide, should either possess or readily have access.

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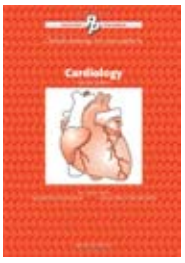
Patient pictures: cardiology (second edition)



Author: Forfar C
Publisher: Health Press Limited, Abingdon, 2009
ISBN: 978-1-903734-04-9
Price £10.00

Since the advent of online self-diagnosis sites, such as www.diagnose-me.com, and online doctors (www.netdoctor.co.uk), the increase of knowledgeable patients has been noticeable in GP's surgeries and specialists alike, with patients often arriving with an expectancy of something being wrong rather than the hope of all being well. To combat this, carefully written and well-presented patient literature – in both online and traditional print matter – has increased massively.

Much current literature is poorly written and suffers from low patient recall due to the heavy repetition of technical words (*Health Communication* 1994;**6**:327–35). *Patient pictures: cardiology* is one of a new breed of patient literature directed with images at the forefront. Other examples include the comic series targeted at children, *Medikidz*, which recently received a *BMJ* write up and *Joe's Guide to Diabetes*, which made its way into *The Times*.

Using an article from the *Student BMJ* archive on how to write effective patient literature (http://archive.student.bmj.com/issues/05/05/careers/200.php), I rated the book using their paramaters. The article asks: "What is the most appropriate way to give the information?" and *Patient pictures: cardiology* is laid out in precisely the right way. A bullet point structure removes any patronisation, while the use of adjacent clinical drawings and real world examples leads to a well-rounded understanding of what to expect and what will occur. Technical terminology is highlighted and explained immediately, helping the reader become accustomed to complex language.

A second question in the *Student BMJ* article asks: "What messages do medics want to convey?". This text covers all the ground, from examining risk factors for coronary heart disease, or diagnostic tools such as radionuclide testing and angiograms, to treatment involving drugs, pacemakers or electrical intervention. One of the better sections is on cardioversion – the most instantly recognisable of treatments – and *Patient pictures: cardiology* carefully explains this with detailed pictures and bullet points as well as other choices.

Finally onto the first question: **"**What do patients want to know?"**.** This is where *Patient pictures: cardiology* really excels. The best information in the book I believe is the flow chart of 'Hospital visits for heart diseases', which breaks down exactly what a patient can expect from the doctors over the course of their treatment.

Overall, *Patient pictures: cardiology* is an excellent text, neatly packaged, providing excellent recall (as tested on myself!). The mission statement of the *Patient pictures* series is: "to advance the practice of medicine by providing clear, understandable, relevant information both to healthcare professionals and the public". This book is geared towards the public rather than healthcare professionals and would make a good addition to any waiting room.

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Making sense of echocardiography

Author: Houghton A
Publisher: Hodder Arnold, London, 2009
ISBN: 978-0-340-950-043
Price: £29.99

Echocardiography is one of the most widely used diagnostic tests for heart disease. To make sense of an echo is a desirable skill for all those involved in cardiology and this compact handbook does just that. The book contains a total of 23 chapters and is split into three logical parts: essential principles, cardiac imaging techniques and clinical cases. Over half of the chapters are dedicated to clinical cases giving it a strong practical emphasis.

Part 1 takes the reader back to basic cardiac anatomy, physiology and physics of ultrasound assuming no prior knowledge. The chapters are well written and complex theory is made into easy reading by boxed key concepts and multiple clear illustrations. This section concludes with a unique chapter entitled 'Service provision' which details accreditation programmes, staffing, departmental and quality control issues surrounding an echocardiography service.

Contemporary echocardiography, which now includes many sophisticated techniques such as 3-D, transoesophageal, stress and contrast echo, is concisely described in the second part of the book without overwhelming the reader. The author even provides a short chapter on alternative cardiac imaging techniques, which include nuclear, magnetic resonance, computed tomography and cardiac catheterisation. I am not sure what this brief chapter adds, other than reminding the reader that there is more to imaging than echocardiography! However the real strength of this section is the step-by-step guidance given to a transthoracic echo study. Each standard echo window is depicted with anatomical annotations and the accompanying text describes the modalities to use and the structures to evaluate. This chapter ends with somewhat disappointing tips on echo reporting and may have been better approached with an example report or template.

Although part 3 is entitled 'Clinical cases', they are not clinical scenarios. Each chapter details a structure, such as the aortic valve, or a disease process, such as endocarditis. Again, an efficient step-by-step approach is adopted, which makes this an accessible guide. It is mainly written in bullet points with tables, high-quality colour echocardiograms and British Society of Echocardiography (BSE) reference ranges. Calculations are clearly laid out and common pitfalls and tips are helpfully boxed. Latest guidelines are included from diagnostics to management allowing much to be learnt about cardiac medicine as well as echocardiography. Each chapter has a brief sample report illustrating how pathology should be described and the pertinent measurements to be included. Useful references are provided at the end of each chapter for further reading.

This really is a great hands-on introduction to echocardiography and should be recommended reading for cardiology registrars, sonographers, emergency physicians and general practitioners with an interest in echo as well as those preparing for the BSE Transthoracic Echocardiography accreditation examination. Although full of practical imaging advice, the text is written in an engaging tone giving the reader a comprehensive overview. Its accessibility makes it easy to read from cover to cover and more can be gained from the accompanying free website containing 150 video clips. The book's compact size and excellent layout makes it possible to pack each page with information without being intimidating. It thus empowers the reader to go out and echo.

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Trial by fire: lessons from the history of clinical trials

Author: Gaw A
Publisher: SA Press, Glasgow, 2009
ISBN: 978-0956324207
Price: £7.99 (+£2.00 p&p)

Trial by Fire is a wonderful short but poignant book regarding the historical birth of clinical trial aspects such as randomisation, consent (or abuse of), placebo effect, the need to publish and the importance of respecting the rights of patients. With wit and intelligent story telling, Allan Gaw uses hard to extract documents from historical archives in the developing, predominantly western world to keep the reader enthralled, captivated and appreciative of each stage of development of what we now call the randomised controlled clinical trial involving consenting adults. He chooses wisely six key examples from history to demonstrate the key aspects of trial design. These involve well-known figures such as Queen Cleopatra the VII and Benjamin Franklin, who show us the importance of consent and blinding, and lesser known figures such as Van Helmont and Anton Mesmer, who teach us about bias and the placebo effect.

Indeed, he even tackles the thorny, painful side of trials from the Tuskegee syphilis study in the USA to experiments on prisoners of World War II in Germany. While the book is short and almost ends abruptly, the author serves the purpose with which the book was born – to share the lessons of the past to avoid the same mistakes in the future. The book is clearly of interest to anyone undertaking, designing or commissioning clinical trials, especially those teaching about importance of good design and sound ethics in this area. The book is an ideal brief read for those travelling to a conference or a clinical trial investigators' meeting, who will find this material relevant, interesting and perhaps, more importantly, thought provoking. Above all, this material explains how many lives have been and are touched by clinical trials enabling medicine to advance.

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