Topol

介入心脏病学

Textbook of

INTERVENTIONAL CARDIOLOGY

第3版 **3**rd Edition

英文影印版

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TEXTBOOK OF INTERVENTIONAL CARDIOLOGY

第3版

Third Edition

Eric J. Topol, MD



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Textbook of INTERVENTIONAL CARDIOLOGY

3rd Edition

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To my wife, Susan and children, Sarah and Evan

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Percutaneous Balloon Pericardiotomy for Patients with Pericardial Effusion and Tamponade

Preface

When the first edition of this textbook was published in 1990, the field of interventional cardiology had not even been named and a dedicated "textbook" seemed precocious and out of place to many. Now, nearly a full decade later, the discipline has greatly matured. It is this transformation that is captured in the third edition of the book—major consolidation and advances.

The pharmacology had undergone pronounced improvement, both with respect to anticoagulation and antiplatelet therapy. New classes of drugs appeared in our patients, including the adenosine diphosphate receptor antagonists, glycoprotein IIb/IIIa blockers, low-molecular-weight heparins, and direct thrombin inhibitors. The critical emphasis on aggressive management of hyperlipidemias has also been part of the growth of the field, and these steps of pharmacologic progress have been embodied in the first section of the new edition.

Rather than nine sections and more than 100 chapters as appeared in the last version, the current edition has only five sections and 51 chapters. This consolidation has been enabled by avoiding separate chapters on each stent, laser system, and specific device. Instead, a patient- or, when necessary, a lesionspecific approach, is taken. Such changes are evident in the largest (second) section of the book, in which particular clinical syndromes such as unstable angina and acute myocardial infarction are addressed, but new chapters have also been added. These include periprocedural myocardial infarction, long lesions and diffuse disease, and ostial and bifurcation stenoses. One of the exciting new areas of the field is radiation, or commonly called brachytherapy, and this is reviewed in depth. Similarly, albeit less studied to date, is the use of percutaneous myocardial revascularization and angiogenesis, for which a new, dedicated chapter is incorporated. The other three sections of the book approach the pivotal areas of coronary imaging (third section); valve, congenital, and pericardial disease (fourth section); and health care policy, including the controversial areas of credentialing, quality, and economic issues (fifth section).

This "slimmed down" version of the textbook has been facilitated by such remarkable maturation of the field. Stenting has become the dominant approach for percutaneous coronary interventions, and more than 500,000 patients per year will be undergoing prosthetic implants by the turn of the millennium. The interventional cardiologist will be increasingly likely to approach noncoronary lesions, including the peripheral arteries and the cerebrovasculature. Other techniques, such as debulking and laser, have been defined as taking on a subsidiary or ancillary role to stenting or balloon-mediated revascularization. Four years ago much of this was highly controversial, but now the sense of where the field is moving is much easier to ascertain.

We still are in need of making interventional cardiology more of a science and less of pure "art." This attitude has been fostered by the selection of the authors in this book, who have provided a balanced review of each subject, trying to present the evidence in a comprehensive fashion. This mission of emphasizing the science of the field is buttressed in the book by basic science chapters on the biology of restenosis and on gene therapy, and, in the clinical arena, by highlighting the results of randomized, controlled trials and seminal observational studies.

I remain exceptionally indebted to the 62 authors who contributed to this text, who not only totally revamped previous chapters or prepared new ones but also fulfilled highly ambitious deadlines, making the book especially up to date. The managing editor, Donna Wasiewicz-Bressan, at The Cleveland Clinic Foundation, and the editorial and production staff at WB Saunders, including Richard Zorab, Sue Reilly, and Denise LeMelledo, deserve utmost recognition. We hope that you will find the third edition by far the best yet, and that it will serve your needs as a useful reference in the dynamic field of interventional cardiology.

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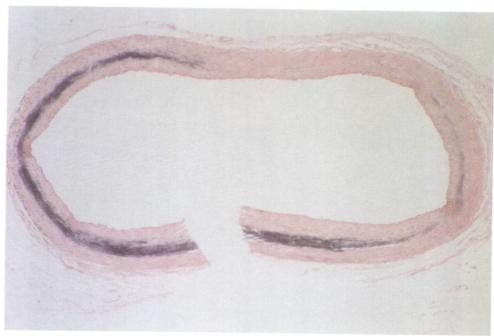


FIGURE 38–1. See page 705.

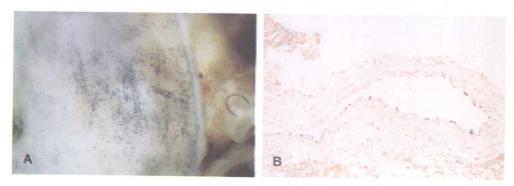


FIGURE 38–14. See page 719.

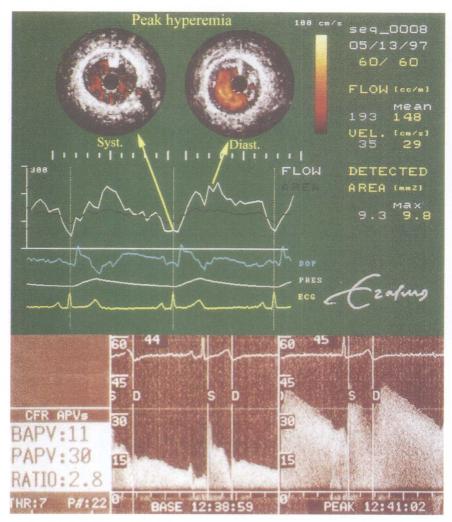


FIGURE 40–16. See page 774.

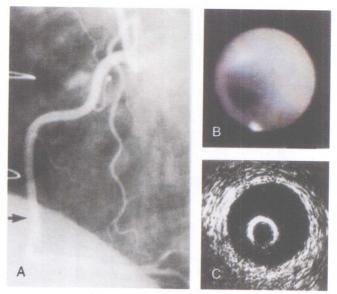


FIGURE 41-2. See page 787.

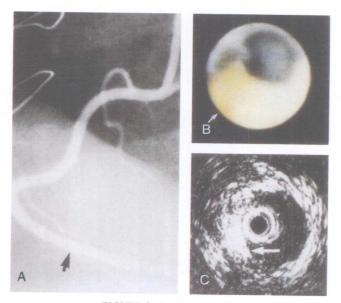


FIGURE 41–3. See page 787.

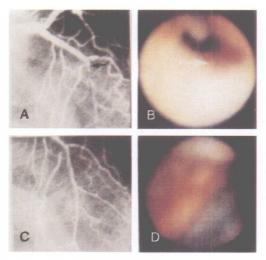


FIGURE 41-4. See page 789.

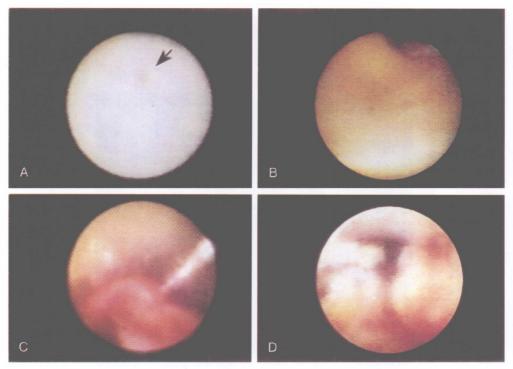


FIGURE 41–5. See page 789.

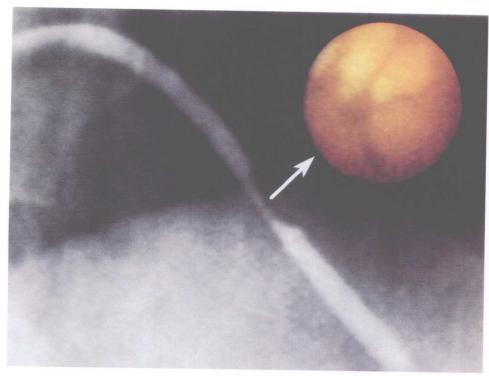


FIGURE 41–7. See page 791.

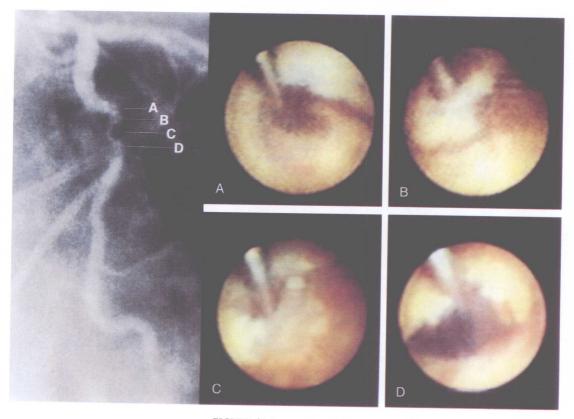


FIGURE 41–8. See page 792.