# BRAUNWALD



# 

A Textbook of Cardiovascular Medicine

TH EDITION

VOLUME 1

# HEART DISEASE

### A Textbook of Cardiovascular Medicine

**VOLUME 1** 

Edited by

### **EUGENE BRAUNWALD**

A.B., M.D., M.A. (hon.), M.D. (hon.), Sc.D. (hon.), F.R.C.P.

Vice President for Academic Programs, Partners HealthCare System; Distinguished Hersey Professor of Medicine, Faculty Dean for Academic Programs at Brigham and Women's Hospital and Massachusetts General Hospital, Harvard Medical School, Boston, Massachusetts

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# HEART DISEASE

A Textbook of Cardiovascular Medicine

### Dedicated to

### ELAINE

KAREN, ALLISON, JILL

DANA, ALEX, MARA, ELISE, CARI, and BENJAMIN

## **CONTRIBUTORS**



#### ELLIOTT M. ANTMAN. M.D.

Associate Professor of Medicine, Harvard Medical School. Director, Coronary Care Unit, Brigham and Women's Hospital, Boston, Massachusetts

Acute Myocardial Infarction; Medical Management of the Patient Undergoing Cardiac Surgery

#### S. SERGE BAROLD, M.D.

Professor of Medicine, University of Rochester School of Medicine and Dentistry. Chief, Cardiology Division, Department of Medicine, The Genesee Hospital, Rochester, New York

Cardiac Pacemakers and Antiarrhythmic Devices

#### JOHN A. BITTL, M.D.

Associate Professor of Medicine, Harvard Medical School. Director of Interventional Cardiology, Brigham and Women's Hospital, Boston, Massachusetts Coronary Arteriography

#### ROBERT O. BONOW, M.D.

Goldberg Professor of Medicine and Chief, Division of Cardiology, Northwestern University Medical School. Chief, Division of Cardiology, Northwestern Memorial Hospital, Chicago, Illinois

Cardiac Catheterization

#### HARISIOS BOUDOULAS, M.D.

Professor of Medicine and Pharmacy, Ohio State University College of Medicine. Director, Overstreet Teaching and Research Laboratory (Division of Cardiology), Ohio State University Medical Center, Columbus, Ohio Renal Disorders and Heart Disease

#### EUGENE BRAUNWALD, M.D.

Vice President for Academic Programs, Partners HealthCare System; Distinguished Hersey Professor of Medicine, Faculty Dean for Academic Programs at Brigham and Women's Hospital and Massachusetts General Hospital, Harvard Medical School, Boston, Massachusetts

The History; Physical Examination of the Heart and Circulation; Pathophysiology of Heart Failure; Assessment of Cardiac Function; Clinical Aspects of Heart Failure: High-Output Heart Failure; Pulmonary Edema; Management of Heart Failure; Pulmonary Hypertension; Valvular Heart Disease; Coronary Blood Flow and Myocardial Ischemia; Acute Myocardial Infarction; Chronic Coronary Artery Disease; The Cardiomyopathies and Myocarditides; Primary Tumors of the Heart; Traumatic Heart Disease; Hematological-Oncological Disorders and Heart Disease

#### BRUCE H. BRUNDAGE, M.D.

Professor of Medicine and Radiological Sciences, University of California, Los Angeles, School of Medicine, Los Angeles, California. Chief of Cardiology and Scientific Director, St. John's Cardiovascular Research Center, Harbor-UCLA Medical Center, Torrance, California

Relative Merits of Imaging Techniques

#### AGUSTIN CASTELLANOS, M.D.

Professor of Medicine, University of Miami School of Medicine. Director of Clinical Electrophysiology, Jackson Memorial Hospital, Miami, Florida Cardiac Arrest and Sudden Cardiac Death

#### BERNARD R. CHAITMAN, M.D.

Professor of Medicine, St. Louis University School of Medicine. Chief of Cardiology, St. Louis University Health Sciences Center, St. Louis, Missouri Exercise Stress Testing

#### KENNETH R. CHIEN, M.D., Ph.D.

Professor of Medicine and Member, Center for Molecular Genetics, University of California, San Diego, La Jolla, California. Attending Physician, University of California, San Diego, University Hospital, San Diego, California *Principles of Cardiovascular Molecular and Cellular Biology* 

#### JONATHAN S. COBLYN, M.D.

Assistant Professor of Medicine, Harvard Medical School. Associate Director, Robert B. Brigham Arthritis Center, Brigham and Women's Hospital, Boston, Massachusetts

Rheumatic Diseases and the Heart

#### PETER F. COHN, M.D.

Professor of Medicine and Chief, Cardiology Division, State University of New York Health Sciences Center, Stony Brook, New York Traumatic Heart Disease

#### WILSON S. COLUCCI, M.D.

Professor of Medicine, Biochemistry and Physiology, Boston University School of Medicine. Associate Chief, Cardiovascular Division, and Director, Cardiomyopathy Program, Boston University Medical Center. Chief, Cardiology Section, Boston Veterans Affairs Medical Center, Boston, Massachusetts

Pathophysiology of Heart Failure; Clinical Aspects of Heart Failure: High-Output Heart Failure; Pulmonary Edema; Primary Tumors of the Heart

#### ADNAN S. DAJANI, M.D.

Professor of Pediatrics, Wayne State University School of Medicine. Director, Division of Infectious Diseases, Children's Hospital of Michigan, Detroit, Michigan

Rheumatic Fever

#### CHARLES J. DAVIDSON, M.D.

Associate Professor of Medicine, Northwestern University Medical School. Chief, Cardiac Catheterization Laboratories, Northwestern Memorial Hospital, Chicago, Illinois

Cardiac Catheterization

#### CHARLES DENNIS, M.D.

Chairman, Department of Cardiology, Deborah Heart and Lung Center, Browns Mills, New Jersey  $\,$ 

Rehabilitation of Patients with Coronary Artery Disease

#### ROMAN W. DeSANCTIS, M.D.

Professor of Medicine, Harvard Medical School. Director of Clinical Cardiology and Physician, Massachusetts General Hospital, Boston, Massachusetts Diseases of the Aorta

#### PAMELA S. DOUGLAS, M.D.

Associate Professor of Medicine, Harvard Medical School. Director, Noninvasive Cardiology, Beth Israel Hospital, Boston, Massachusetts

Coronary Artery Disease in Women

#### KIM A. EAGLE, M.D.

Associate Professor of Internal Medicine, University of Michigan School of Medicine. Director of Clinical Cardiology, University of Michigan Medical Center, Ann Arbor, Michigan Diseases of the Aorta

#### URI ELKAYAM, M.D.

Professor of Medicine, Division of Cardiology, University of Southern California School of Medicine. Director, Heart Failure Program, and Director, High Risk Cardiology Perinatal Clinic, Los Angeles, California

Pregnancy and Cardiovascular Disease

#### JOHN A. FARMER, M.D.

Associate Professor of Medicine, Sections of Atherosclerosis and Cardiology, Baylor College of Medicine. Chief of Cardiology, Ben Taub General Hospital, Houston, Texas

Dyslipidemia and Other Risk Factors for Coronary Artery Disease

#### HARVEY FEIGENBAUM, M.D.

Distinguished Professor of Medicine, Indiana University School of Medicine. Senior Research Associate, Krannert Institute of Cardiology, Indianapolis, Indiana

Echocardiography

#### CHARLES FISCH, M.D.

Distinguished Professor Emeritus of Medicine, Indiana University School of Medicine, Indianapolis, Indiana Electrocardiography

#### ROBERT F. FISHMAN, M.D.

Assistant Professor of Medicine, Northwestern University Medical School. Attending Physician, Northwestern Memorial Hospital, Chicago, Illinois Cardiac Catheterization

#### WILLIAM F. FRIEDMAN, M.D.

J. H. Nicholson Professor of Pediatrics (Cardiology), Department of Pediatrics, and Senior Advisor, Clinical Affairs, to the Provost and Dean, University of California, Los Angeles, School of Medicine, Los Angeles, California Congenital Heart Disease in Infancy and Childhood; Acquired Heart Disease in Infancy and Childhood

#### VALENTIN FUSTER, M.D., Ph.D.

Arthur M. and Hilda A. Master Professor of Medicine, Mount Sinai School of Medicine. Director, Cardiovascular Institute. Dean for Academic Affairs and Vice Chairman, Department of Medicine, Mount Sinai Medical Center, New York, New York

Hemostasis, Thrombosis, Fibrinolysis, and Cardiovascular Disease

#### PETER GANZ, M.D.

Associate Professor of Medicine, Harvard Medical School. Director of Research, Cardiac Catheterization Laboratory, Brigham and Women's Hospital, Boston, Massachusetts

Coronary Blood Flow and Myocardial Ischemia

#### BERNARD J. GERSH, M.B., D.Phil.

Professor of Medicine and Chief, Division of Cardiology, Georgetown University Medical Center, Washington, D.C.

Chronic Coronary Artery Disease

#### GARY GERSTENBLITH, M.D.

Professor of Medicine, Johns Hopkins University School of Medicine, Baltimore, Maryland

The Aging Heart: Structure, Function, and Disease

#### SAMUEL Z. GOLDHABER, M.D.

Associate Professor of Medicine, Harvard Medical School. Physician, Brigham and Women's Hospital, Boston, Massachusetts

Pulmonary Embolism

#### LEE GOLDMAN, M.D.

Julius Krevans Distinguished Professor and Chairman, Department of Medicine, and Associate Dean for Clinical Affairs, University of California, San Francisco, School of Medicine, San Francisco, California

Cost-Effective Strategies in Cardiology; General Anesthesia and Noncardiac Surgery in Patients with Heart Disease

#### ANTONIO M. GOTTO, Jr., M.D., D.Phil.

Distinguished Service Professor and Chairman, Department of Medicine, Baylor College of Medicine. Chief, Internal Medicine Service, Methodist Hospital, Houston, Texas

Dyslipidemia and Other Risk Factors for Coronary Artery Disease

#### ANDREW A. GRACE, Ph.D., M.R.C.P.

Senior Research Fellow, Departments of Medicine and Biochemistry, University of Cambridge, and Director, Cardiac Electrophysiology Service, Papworth Hospital, Cambridge, England. Visiting Scientist, Department of Medicine, University of California, San Diego, La Jolla, California.

Principles of Cardiovascular Molecular and Cellular Biology

#### WILLIAM GROSSMAN, M.D.

Adjunct Professor of Medicine, University of Pennsylvania School of Medicine, Philadelphia, Pennsylvania. Vice President, Clinical Research, Merck and Co., West Point, Pennsylvania

Clinical Aspects of Heart Failure: High-Output Heart Failure; Pulmonary Edema; Pulmonary Hypertension

#### CHARLES B. HIGGINS, M.D.

Professor and Vice-Chairman, Department of Radiology, University of California, San Francisco, San Francisco, California

 $Newer\ Cardiac\ Imaging\ Techniques:\ Magnetic\ Resonance\ Imaging\ and\ Computed\ Tomography$ 

#### ERIC M. ISSELBACHER, M.D.

Instructor in Medicine, Harvard Medical School. Assistant in Medicine, Massachusetts General Hospital, Boston, Massachusetts

Diseases of the Aorta

#### NORMAN M. KAPLAN, M.D.

Professor of Internal Medicine and Head, Hypertension Division, University of Texas Southwestern Medical Center, Dallas, Texas

Systemic Hypertension: Mechanisms and Diagnosis; Systemic Hypertension: Therapy

#### WISHWA N. KAPOOR, M.D.

Falk Professor of Medicine, University of Pittsburgh. Chief, Division of Internal Medicine, Presbyterian-University Hospital, Pittsburgh, Pennsylvania Syncope and Hypotension

#### ADOLF W. KARCHMER, M.D.

Professor of Medicine, Harvard Medical School. Chief, Division of Infectious Diseases, New England Deaconess Hospital, Boston, Massachusetts Infective Endocarditis

#### RALPH A. KELLY, M.D.

Assistant Professor of Medicine, Harvard Medical School. Associate Physician, Division of Cardiology, Department of Medicine, Brigham and Women's Hospital, Boston, Massachusetts

Drugs Used in the Treatment of Heart Failure; Management of Heart Failure

#### EDWARD G. LAKATTA, M.D.

Professor of Medicine, Johns Hopkins School of Medicine. Professor of Physiology, University of Maryland School of Medicine. Chief, Laboratory of Cardiovascular Science, NIH/NIA/Gerontology Research Center, Baltimore, Maryland The Aging Heart: Structure, Function, and Disease

#### THOMAS H. LEE, M.D., M.Sc.

Associate Professor of Medicine, Harvard Medical School and Brigham and Women's Hospital. Medical Director, Partners Community Health Care, Inc., Boston, Massachusetts

Practice Guidelines in Cardiovascular Medicine

#### CARL V. LEIER, M.D.

James W. Overstreet Professor of Medicine and Pharmacology, Ohio State University College of Medicine. Director, Division of Cardiology, and Director, Cardiac Transplantation Service, Ohio State University Medical Center, Columbus, Ohio

Renal Disorders and Heart Disease

#### DAVID C. LEVIN, M.D.

Professor of Radiology, Jefferson Medical College. Chairman, Department of Radiology, Thomas Jefferson University Hospital, Philadelphia, Pennsylvania Radiology of the Heart; Coronary Arteriography

#### LEONARD S. LILLY, M.D.

Associate Professor of Medicine, Harvard Medical School. Associate Physician, Brigham and Women's Hospital, Boston, Massachusetts

The Heart in Endocrine and Nutritional Disorders

#### A. MICHAEL LINCOFF, M.D.

Assistant Professor of Medicine, Ohio State University. Director, Experimental Interventional Laboratory, Department of Cardiology, Center for Thrombosis and Vascular Biology, The Cleveland Clinic Foundation, Cleveland, Ohio Interventional Catheterization Techniques

#### WILLIAM C. LITTLE, M.D.

Professor of Internal Medicine and Chief of Cardiology, Bowman-Gray School of Medicine of Wake Forest University. Chief of Cardiology and Associate Chief of Professional Services, North Carolina Baptist Hospital, Winston-Salem, North Carolina

Assessment of Cardiac Function

#### BEVERLY H. LORELL, M.D.

Associate Professor of Medicine, Harvard Medical School. Director, Hemodynamic Research Laboratory, and Associate Director, Cardiac Catheterization Laboratory, Beth Israel Hospital, Boston, Massachusetts

\*Pericardial Diseases\*\*

#### RICHARD A. MATTHAY, M.D.

Boehringer Ingelheim Professor of Medicine and Associate Director, Pulmonary and Critical Care Section, Department of Internal Medicine, Yale University School of Medicine, New Haven, Connecticut

Cor Pulmonale

#### ROBERT J. MYERBURG, M.D.

Professor of Medicine and Physiology and Director, Division of Cardiology, University of Miami School of Medicine. Chief of Cardiology, Jackson Memorial Medical Center, Miami, Florida

Cardiac Arrest and Sudden Cardiac Death

#### LIONEL H. OPIE, M.D., D.Phil., F.R.C.P.

Professor, Department of Medicine, University of Capetown. Director, Hypertension Clinic, Groote Schuur Hospital, Capetown, South Africa

Mechanisms of Cardiac Contraction and Relaxation

#### JOSEPH K. PERLOFF, M.D.

Streisand/American Heart Association Professor of Medicine and Pediatrics, University of California, Los Angeles, School of Medicine, Division of Cardiology, Departments of Medicine and Pediatrics, UCLA Center for the Health Sciences, Los Angeles, California

Physical Examination of the Heart and Circulation; Congenital Heart Disease in Adults; Neurological Disorders and Heart Disease

#### MARK G. PERLROTH, M.D.

Professor of Medicine, Division of Cardiovascular Medicine, Stanford University School of Medicine, Falk Cardiovascular Research Center. Professor of Medicine, Stanford University Medical Center and The Lucile Salter Packard Children's Hospital, Stanford, California. Consultant Cardiologist, Palo Alto Veterans Administration Medical Center, Palo Alto, California Heart and Heart-Lung Transplantation

#### WILLIAM S. PIERCE, M.D.

Evan Pugh Professor of Surgery, Jane A. Fetter Professor of Surgery, and Chief, Division of Cardiothoracic Surgery, Department of Surgery, Pennsylvania State University College of Medicine, Hershey, Pennsylvania

Assisted Circulation and the Mechanical Heart

#### REED E. PYERITZ, M.D., Ph.D.

Chair, Department of Human Genetics, and Professor of Human Genetics, Medicine and Pediatrics, and Director, Institute for Medical Genetics, Medical College of Pennsylvania and Hahnemann University, Philadelphia and Pittsburgh, Pennsylvania. Director, Center for Medical Genetics, Allegheny General Hospital, Pittsburgh, Pennsylvania

Genetics and Cardiovascular Disease

#### BRUCE A. REITZ, M.D.

The Norman E. Shumway Professor and Chairman, Department of Cardiothoracic Surgery, Stanford University School of Medicine. Chief of the Cardiac Surgical Service, Stanford Health Services, Stanford, California. Chief of the Pediatric Cardiac Surgical Service, The Lucile Salter Packard Children's Hospital at Stanford, Palo Alto, California

Heart and Heart-Lung Transplantation

#### STUART RICH, M.D.

Professor of Medicine, University of Illinois, Chicago. Chief of Cardiology, University of Illinois, Chicago Medical Center, Chicago, Illinois *Pulmonary Hypertension* 

#### WAYNE E. RICHENBACHER, M.D.

Associate Professor, Division of Cardiothoracic Surgery, Department of Surgery, University of Iowa, Iowa City, Iowa

Assisted Circulation and the Mechanical Heart

#### DAVID S. ROSENTHAL, M.D.

Professor of Medicine, Harvard Medical School. Henry K. Oliver Professor of Hygiene, Harvard University. Physician, Brigham and Women's Hospital. Director and Physician, University Health Services, Harvard University, Cambridge, Massachusetts

Hematological-Oncological Disorders and Heart Disease

#### RUSSELL ROSS, Ph.D.

Professor, Department of Pathology, and Adjunct Professor, Department of Biochemistry, University of Washington School of Medicine, Seattle, Washington *The Pathogenesis of Atherosclerosis* 

#### JOHN D. RUTHERFORD, M.B., Ch.B., F.R.A.C.P.

Professor of Medicine, University of Texas, Gail Griffiths Hill Chair of Cardiology. Associate Director, Division of Cardiology, Southwestern Medical Center, Dallas, Texas

Chronic Coronary Artery Disease

#### HEINRICH R. SCHELBERT, M.D., Ph.D.

Professor of Pharmacology and Radiological Sciences and Vice Chairman, Department of Pharmacology, University of California, Los Angeles, School of Medicine, Los Angeles, California

Relative Merits of Imaging Techniques

#### FREDERICK J. SCHOEN, M.D., Ph.D.

Professor of Pathology, Harvard Medical School. Director, Cardiac Pathology, and Vice-Chairman, Department of Pathology, Brigham and Women's Hospital, Boston, Massachusetts

Primary Tumors of the Heart

#### ELLEN W. SEELY, M.D.

Assistant Professor of Medicine, Harvard Medical School. Director of Clinical Research, Endocrine-Hypertension Division, and Director, Ambulatory Clinical Research Center, Brigham and Women's Hospital, Boston, Massachusetts The Heart in Endocrine and Nutritional Disorders

#### LAWRENCE N. SHULMAN, M.D.

Assistant Professor of Medicine, Harvard Medical School. Clinical Director, Hematology-Oncology Division, Brigham and Women's Hospital, Boston, Massachusetts

Hematological-Oncological Disorders and Heart Disease

#### DAVID J. SKORTON, M.D.

Professor of Medicine, College of Medicine, and Professor of Electrical and Computer Engineering, College of Engineering, University of Iowa. Co-Director, Adolescent and Adult Congenital Heart Disease Clinic. Staff Physician, University of Iowa Hospitals and Clinics. Consulting Physician, Department of Veterans Affairs Medical Center. Vice-President for Research, University of Iowa, Iowa City, Iowa

Relative Merits of Imaging Techniques

#### THOMAS W. SMITH, M.D.

Professor of Medicine, Harvard Medical School. Chief, Cardiovascular Division, and Senior Physician, Brigham and Women's Hospital, Boston, Massachusetts

Drugs Used in the Treatment of Heart Failure; Management of Heart Failure

#### ROBERT SOUFER, M.D.

Associate Professor of Diagnostic Radiology and Medicine (Cardiovascular Medicine), Yale University School of Medicine. Attending Physician, Internal Medicine, Yale-New Haven Hospital. Director, Positron Emission Tomography Center, Yale University-Veterans Administration PET Center, West Haven, Connecticut

Nuclear Cardiology

#### ROBERT M. STEINER, M.D.

Professor of Radiology and Medicine, Jefferson Medical College, Thomas Jefferson University Hospital, Philadelphia, Pennsylvania
Radiology of the Heart

#### LYNNE WARNER STEVENSON, M.D.

Associate Professor of Medicine, Harvard Medical School. Medical Director, Cardiomyopathy and Transplant Center, Brigham and Women's Hospital, Boston, Massachusetts

Management of Heart Failure

#### ERIC I. TOPOL, M.D.

Professor of Medicine, Cleveland Clinic Health Sciences Center, Ohio State University. Chairman, Department of Cardiology, and Director, Joseph J. Jacobs Center for Thrombosis and Vascular Biology, Cleveland Clinic Foundation, Cleveland, Ohio

Interventional Catheterization Techniques

#### MARC VERSTRAETE, M.D., Ph.D.

Professor of Medicine and Former Director, Center for Molecular and Vascular Biology, University of Leuven, Leuven, Belgium

Hemostasis, Thrombosis, Fibrinolysis and Cardiovascular Disease

#### FRANS J. TH. WACKERS, M.D.

Professor of Diagnostic Radiology and Medicine (Cardiology), Yale University School of Medicine. Director, Cardiovascular Nuclear Imaging and Exercise Laboratories, Yale-New Haven Hospital, New Haven, Connecticut Nuclear Cardiology

#### HERBERT P. WEIDEMANN, M.D.

Chief, Pulmonary Department, The Cleveland Clinic Foundation, Cleveland, Ohio

Cor Pulmonale

#### MICHAEL E. WEINBLATT, M.D.

Associate Professor of Medicine, Harvard Medical School. Director of Clinical Rheumatology, Brigham and Women's Hospital, Boston, Massachusetts Rheumatic Diseases and the Heart

#### MYRON L. WEISFELDT, M.D.

Samuel Bard Professor of Medicine and Chair, Department of Medicine, Columbia University College of Physicians and Surgeons. Director of the Medical Service and Attending Physician, Presbyterian Hospital, New York, New York The Aging Heart: Structure, Function, and Disease

#### GORDON H. WILLIAMS, M.D.

Professor of Medicine, Harvard Medical School. Chief, Endocrine-Hypertension Division, and Director, Clinical Research Center, Brigham and Women's Hospital, Boston, Massachusetts

The Heart in Endocrine and Nutritional Disorders

#### GERALD L. WOLF, Ph.D., M.D.

Professor of Radiology, Harvard Medical School. Director, Center for Imaging and Pharmaceutical Research, Massachusetts General Hospital, Boston, Massachusetts

Relative Merits of Imaging Techniques

#### JOSHUA WYNNE, M.D.

Professor of Medicine and Chief, Division of Cardiology, Wayne State University. Chief, Section of Cardiology, Harper Hospital, Detroit Medical Center, Detroit, Michigan

The Cardiomyopathies and Myocarditides

#### BARRY L. ZARET, M.D.

Robert W. Berliner Professor of Medicine, Professor of Diagnostic Radiology, Chief, Section of Cardiovascular Medicine, and Associate Chair for Clinical Affairs, Department of Internal Medicine, Yale University School of Medicine. Chief of Cardiology, Yale-New Haven Hospital, New Haven, Connecticut Nuclear Cardiology

#### DOUGLAS P. ZIPES, M.D.

Distinguished Professor of Medicine, Pharmacology, and Toxicology and Director, Division of Cardiology and Krannert Institute of Cardiology, Indiana University School of Medicine. Attending Physician, University Hospital, Wishard Memorial Hospital, and Roudebush Veterans Administration Hospital, Indianapolis, Indiana

Genesis of Cardiac Arrhythmias: Electrophysiological Considerations; Management of Cardiac Arrhythmias: Pharmacological, Electrical, and Surgical Techniques; Specific Arrhythmias: Diagnosis and Treatment; Cardiac Pacemakers and Antiarrhythmic Devices

# PREFACE

As I complete the preparations of this new edition of *Heart Disease*, I am awed by the continued growth and progress in cardiovascular medicine. During my professional lifetime I have been privileged to observe the field's advance to a point at which the safe and accurate diagnosis and the effective treatment of most forms of heart disease is now feasible. While the overall population is aging and the total prevalence of heart disease rising, the age-adjusted mortality rate for cardiovascular disease in the United States has declined by approximately 1 per cent per year for the last 40 years, and this decline appears to be continuing.

The enormous advances in the field in the five years since the publication of the fourth edition have required the most extensive changes vet made in any revision of this text. Despite the need to include an enormous amount of new information, it was possible to retain the basic format of the previous edition of Heart Disease. The book is divided into five parts: Part I deals with the examination of the patient in the broadest sense, including clinical findings and the theory and application of modern noninvasive and invasive techniques to elicit information about the heart and circulation. Part II is concerned with the pathophysiology, diagnosis, and treatment of the principal abnormalities of circulatory function, including heart failure, arrhythmias, and abnormalities of arterial pressure. Part III, the longest in the book, consists of descriptions of the principal congenital and acquired diseases affecting the heart, pericardium, aorta, and pulmonary vascular bed in adults and children. Part IV deals with the interfaces between cardiology and broad fields such as genetics, aging, management of the postoperative cardiac patient, and the economics of cardiac care. Part V details the relationship between diseases of other organ systems and the circulation and vice versa.

Twenty-one new chapters—the most for any revision to date—have been added or substituted. Many other important new areas are covered in radically revised chapters.

A number of important areas are covered in this edition: The chapter on Physical Examination prepared with Perloff has been expanded and revised because the intelligent contemporary practice of cardiology requires careful integration of findings obtained from the clinical examination with those from the growing number of diagnostic modalities now available. The chapter on the Relative Merits of Imaging Techniques by Skorton and colleagues provides a rational approach to the intelligent selection among the several techniques now available to image the heart.

A new, and I believe unique, aspect of the fifth edition of *Heart Disease* is Lee's comprehensive chapter on Practice Guidelines in Cardiovascular Medicine. Increasingly, practice guidelines are influencing diagnosis and therapy and are rapidly becoming the basis for reimbursement of health care services. This new chapter provides a summary of the most important guidelines put together by authoritative groups—mostly key committees of the American Heart Association and the American College of Cardiology. In addition to a summary of the guidelines, Lee places them into the perspective of modern patient care. The chapter on Cost-Effective Strategies in Cardiology by Goldman explains how cost-conscious practice need not impair the quality of care.

Also of note is a new chapter on a subject that is attracting a great deal of interest—Coronary Artery Disease in Women—by Douglas, which comple-

ments the chapter on Aging in Cardiac Disease. This pair of chapters deals with two large groups of patients with special needs, problems, and issues, who together constitute an enormous percentage of the total population. Advances in interventional cardiology represent one of the most dramatic developments in the field and they are covered in an excellent new chapter by Lincoff and Topol. Cardiologists increasingly need an understanding of hemostasis, thrombosis, and fibrinolysis in their daily practice. Fuster and Verstraete have teamed up to provide a superb new chapter on this subject.

Because it is now clear that abnormalities of molecular processes may be the basis of many cardiovascular diseases and that genetic influences play critical roles in the development of these abnormalities, three new chapters have been included. Opie describes the basic mechanisms of cardiac contraction and relaxation. Chien and Grace present the impact of cell and molecular biology, while Pyeritz summarizes the genetics of cardiovascular disease. The important role played by genetics in cardiovascular disease is underscored by Figure 49–1, on pages 1652 and 1653, specially prepared for this book by Pyeritz, which shows the chromosomal location of 137 human genes whose mutations have been shown to produce deleterious effects on the cardiovascular system. This field is moving very swiftly indeed; undoubtedly many other genes will be identified and their chromosomal locations determined by the time the sixth edition of *Heart Disease* is published.

An important responsibility of an editor is to establish the boundaries of a book. In approaching this task, I have deliberately taken a broad approach—in the line with this book's subtitle "A Textbook of Cardiovascular Medicine." I believe that modern cardiologists will best serve their patients by being first broadly based physicians and second accomplished technical specialists. Cardiologists must remain the masters—not become the slaves—of the powerful new diagnostic and therapeutic tools now available. They must also understand the enormous influence that heart disease can exert on the function of other organ systems, as well as the equally important effect that disordered function of other organ systems can have on the circulation. Cardiologists must also be able to function effectively as a consultants to generalists, surgeons, and other specialists. The chapter on Pulmonary Embolism, and all of Part V (Heart Disease and Disorders of Other Organ Systems) explore the important interfaces between cardiology and other branches of medicine. The chapter by Antman on the medical management of the patient undergoing cardiac surgery should be helpful to the cardiologist and internist in what is a growing responsibility. Its companion chapter on noncardiac surgery in the patient with heart disease by Goldman provides an approach to an increasing challenge posed to the modern cardiologist and internist.

Considerable revisions have been made in both galley proofs and page proofs to include information about the most recent advances in the field. Particular emphasis has been placed on ensuring a comprehensive and up-to-date bibliography of more than 18,000 pertinent references, including hundreds to publications that appeared in 1996. Many of the 1,436 figures and 444 tables are new to this edition. The fifth edition of *Heart Disease* is approximately 15 per cent longer than the fourth. This has been accomplished with only a modest increase in the number of pages and bulk in the book through a more efficient page layout, the use of somewhat smaller illustrations, and the more liberal use of a special type face.

In order to allow the reader to keep pace with the enormous expansion of cardiovascular knowledge, the fifth edition is supplemented by a number of companion volumes. First, W.B. Saunders has just published the second edition of *Marcus Cardiac Imaging: A Companion to Braunwald's Heart Disease*, edited by Skorton, Schelbert, Wolf and Brundage, which provides an elegant analysis of the most important cardiovascular diagnostic imaging techniques now available. This companion book is especially useful given the profound advances in cardiovascular diagnosis made possible by modern imaging techniques. No area of cardiology has advanced more rapidly than therapeutics, and therefore it seems logical for the second companion to *Heart Disease* to be *Cardiovascular Therapeutics*. The editorial effort was ably led by my col-

league at the Brigham, Thomas W. Smith, who enlisted the cooperation of a team of outstanding associate editors and authors.

Two other companions to Heart Disease are now in advanced stages of preparation—Molecular Basis of Heart Disease, edited by Chien, and Clinical Trials in Cardiovascular Disease, edited by Hennekens. In addition, a Review and Assessment book, prepared by Mendelsohn, will again accompany this edition of Heart Disease. It consists of 600 questions based on material discussed in the textbook and provides the answers as well as detailed explanations. This multipronged educational effort—Heart Disease, the growing number of companion volumes, as well as the Review and Assessment book, all appearing in print and electronic (CD-ROM) form—is designed to assist the reader with the awesome task of learning and remaining current in this dynamic field.

It is hoped that this textbook will prove useful to those who wish to broaden their knowledge of cardiovascular medicine. To the extent that it achieves this goal and thereby aids in the care of patients afflicted with heart disease, credit must be given to the many talented and dedicated persons involved in its preparation. My deepest appreciation goes to my fellow contributors for their professional expertise, knowledge and devoted scholarship, which are at the very "heart" of this book. At the W.B. Saunders Company, my editor, Richard Zorab, and the production team—Frank Polizzano, Edna Dick, Lorraine Kilmer, and Hazel Hacker—were enormously helpful. My editorial associate, Ms. Kathryn Saxon, rendered invaluable and devoted assistance.

This edition could not have become a reality were it not for the skillful and dedicated efforts of several other individuals. My responsibilities to the Harvard Medical School and the Brigham and Women's Hospital during the leave of absence that I required for much of my own writing were shouldered most effectively by my colleagues Drs. Dennis Kasper and Marshall Wolf, who provided the Department of Medicine with exemplary leadership. My administrative assistant, Ms. Diane Rioux, was enormously helpful in maintaining the orderly flow of activity essential to a busy Department of Medicine. I am especially indebted to Dr. Daniel C. Tosteson, Dean of the Harvard Medical School, and to Dr. H. Richard Nesson, President of the Partners HealthCare System and of the Brigham and Women's Hospital, for graciously allowing me the freedom to devote myself to this task. On a personal note, my wife, Elaine, provided the personal support, encouragement and understanding so essential for one who adds a task of this magnitude to an already full professional life.

EUGENE BRAUNWALD, 1996