

Cardiovascular Review 1980

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Introduction to Second (1980)
Edition

Cardiovascular Review 1980

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Introduction to Second (1980) Edition

An attempt has again been made to include in the Review, that material which is most clinically germane to the cardiologist, internist and the young physician in training. Accordingly, those topics dealing with the more technologic aspects of cardiovascular disease have been excluded. However, the abundance of major American cardiovascular literature in the last year has required the addition of 1,214 new references enlarging the total number of recent reports in this edition to 3,107. These primarily deal, as they have in the past, with ischemic and valvular heart disease, hypertension, the relationship of pulmonary and cardiovascular disease and other topics emphasized in recent years. A considerable number of new references involving ischemic heart disease, arrhythmias and conduction defects and congestive heart failure have been added because of the plethora of such topics in the last year and a half. The timeliness of these additions has been improved by rewriting the Review at a time more proximate to publication schedules. Thus, all pertinent literature through the first two-thirds (August) of 1979 has been included in this edition.

The format and lexicology are unchanged. Because a system of abbreviations unique to this book has been utilized, a glossary of abbreviations has been added (p. 479). The table of contents has been constructed in as logical an outline form as allowed by the random appearance of new literature. I have included in the table of contents as many specific topics as possible. This has been reconstructed in outline form. Additionally an index has been added to this edition of the Cardiovascular Review.

It is re-emphasized that no topic in this review is exhaustively discussed. The contents of this document should therefore be cross-referenced with existing texts for as current and complete an overview as possible.

Special thanks are extended to Louise Malinowski whose patience, dedication and labors above and beyond the call have made this publication possible. My particular gratitude is owing to Dr. Douglas Westveer for his work on the index, laborious proof-reading and confirmation of every reference.

GCT

November, 1979

Introduction to First (1979) Edition

This work is a seven year summary of the highlights appearing in the major American cardiovascular journals. It has been compiled for those with a special interest in cardiovascular disease who, because of limited time incident to their professional activities or training commitments, have insufficient opportunity to comprehensively study these journals. It is in no way to be construed as a text. On the other hand it summarizes approximately 1500 references which should effectively update any of the general cardiovascular textbooks which usually fall short of being current by several years.

This work has also been compiled for those preparing for their internal medicine or cardiovascular sub-specialty boards. It is intended to serve as reference material especially in the following areas: ischemic heart disease, valvular heart disease, hypertension, arrhythmias and conduction defects, pacemaker medicine, and to a limited degree pulmonary vascular disease. The table of contents initially deals with ischemic heart disease, valvular heart disease and arrhythmias because these topics have been most heavily dealt with in the literature of the 1970s. Thereafter miscellaneous topics are enumerated in alphabetical order.

A major part of cardiology deals with ischemic heart disease and particularly that species thereof resulting from arteriosclerosis. Much of the material in this area is of a statistical nature. This is particularly true of those sections dealing with natural history, risk, and therapeutic results. In many instances, varying and indeed disparate statistical data will be given on a single topic. This is merely because it appears this way in the literature and should be construed within the framework of varying observations and experiences by individual groups dealing with the same subject. These statistics are specifically enumerated throughout this work only to document trends and directions. Their verification is available in the appropriate references cited.

"Contemporary patterns of medical practice often lead to decision making by individual physicians on the basis of their personal experience and their interpretation of articles in the medical literature. The aggregation of the experience of doctors throughout the country, careful analyses of such data and application of those analyses to medical practice are the exception, rather than the rule, curtailing the usefulness of the medical literature" (NEJM 297:1462, 77). This review will hopefully contribute at least in part to the solution of this problem.

The language and nonstandard abbreviations in this presentation are the lexicon of a medical note taker. It is hoped that this will not detract from this review but rather will result in a capsulized but comprehensive exposure to a maximum of literature in the little time that the press of medical affairs allows for the assimilation of new information.

In conclusion, this outline is to be used as a reference and a source of very current data which should properly be supplemented by appropriate textbook material.

GCT

October 1978

CONTENTS



Introduction to Second (1980) Edition	1
Introduction to First (1979) Edition	1
Ischemic Heart Disease	1
I Natural History	1
A Angina	1
1. Risk of Acute Coronary Event	1
2. Mortality Risk of Angina Pectoris	1
a. Angina	1
b. Preinfarction or Unstable Angina	1
c. Good Risk and Poor Risk Angina	2
3. Anatomic and Physiologic Relationships to Risk	2
B Acute Myocardial Infarction	5
1. Survivors	5
2. Mortality	6
3. Electrocardiogram	6
4. Heart Size	6
5. Hypertension	6
C Aneurysm	6
D The Changing Mortality of Coronary Heart Disease	6
E Progression of Coronary Atherosclerosis	7
F Regression	8
II Epidemiology and Risk Factors	9
A General	9
B Age and Genetics	9
C Lipids	9
D Uric Acid	10
E Smoking	10
F Blood Pressure	13
G Endocrine Influences	14
H Contraceptives	15
I Coffee	15
J Obesity	15
K Diabetes Mellitus	16
L Personality	16
M Physical Fitness	16
N Stress Electrocardiography	16
III Clinical	17
A Angina	17
1. Classification	17
a. Primary and Secondary	17
b. Stable and Unstable Angina	17

A Angina (continued)	
2. General	18
a. Exercise Testing	18
b. Angina vs Silent Ischemia	18
c. Angina, Respiration and the Valsalva Manuever	18
d. Post-Infarction Angina	18
e. Chest Wall Pain	19
3. Angina with Normal Coronaries	19
4. Angina and Myxedema	21
5. Angina at Rest	22
6. Variant (Prinzmetal's) Angina	22
a. Pathophysiology and Pathology	22
b. Cardiodynamics and Hemodynamics	24
c. Arrhythmias and Conduction Defects	24
d. Myocardial Infarction	24
e. Prognosis	25
f. Diagnosis	25
1) Clinical	25
2) Electrocardiogram	25
a) Resting	25
b) Exercise	26
3) Echocardiography and Scintigraphy	27
4) Catheterization	27
g. Prevalence	27
h. Treatment	27
1) Medical	27
2) Surgical	28
7. Significance of Angina	29
8. Angina vs Esophageal Pain	29
9. Post Infarction Angina	29
10. Remission and Disappearance	29
B Arrhythmias and Conduction Defects	30
1. Arrhythmias	30
a. Atrial Arrhythmias	30
b. Junctional Arrhythmias	31
c. Ventricular Arrhythmias	31
1) Premature Ventricular Contractions	31
2) Grading Systems	31
3) Age and Cardiac Status	32
4) Stress Testing	32
5) Premature Ventricular Contractions Occurring in Late Diastole	32
6) Prevalence and Grade	33
7) Heart Rate	33
8) Ventricular Tachycardia	34
9) Late Hospital Premature Ventricular Contractions	34
10) Early Freedom From Premature Ventricular Contractions	34
11) Ventricular Arrhythmias and Asynergy	35
12) Accelerated Idioventricular Rhythm	35
13) Aminophyllin Usage	36
14) The Effect of Vagal Tone on Ventricular Ectopy	36
d. The Biochemistry and Electrophysiology of Arrhythmias	37
2. Conduction Defects	38
a. Atrioventricular Block (AVB)	38
b. Intraventricular Conduction Defects	38
1) Fascicular Blocks	38
2) Bundle Branch Block (BBB)	39

B	Arrhythmias and Conduction Defects (<i>continued</i>)	41
	3) Prevalance and Risk	41
	c. Pacemakers	41
	d. Hemodynamics and Conduction	41
C	Asymptomatic or Unrecognized Ischemia and Myocardial Infarction	42
	1. Asymptomatic Ischemia	42
	2. Unrecognized Myocardial Infarction	42
D	Diabetes	43
	1. General	43
	2. Myocardial Abnormality	43
	3. Coronary Arteries	44
	4. Platelets	44
	5. Hyperglycemia	45
	6. Hypoglycemia	45
E	Disappearance of Symptoms	45
F	Embolism and Thrombosis	46
G	Extension vs Expansion of Myocardial Infarction	46
H	Fever	46
I	Heart Size	47
	1. General	47
	2. Increased Size	47
J	Hypertension	47
K	Hyperventilation	47
L	Hypoxemia	47
	1. General	47
	2. Shunting	47
M	Ischemic Cardiomyopathy	47
N	Left Main Coronary (LMC) Disease	48
	1. Natural History	48
	2. Prevalence	48
	3. Stenosis	48
	4. Total Occlusion	49
	5. Diagnosis	49
O	Pericarditis	50
P	Prehospital Course	50
Q	Preinfarction Syndrome and Unstable Angina	50
	1. Angina	50
	2. Stenoses	50
R	Premonitory Symptoms (Prodrome)	51
S	Prognosis and Survival	51
	1. Predictors of Survival in Coronary Heart Disease	51
	2. Angina	52
	a. Natural History	52
	b. Good Risk and Poor Risk	52
	c. Unstable Angina	52
	3. Myocardial Infarction	53
	a. Natural History	53
	b. Risk and Survival of Hemodynamic Classification	53
	c. Acute Mortality	53
	d. Post Infarction Angina	54
	e. Pre-Infarction Syndrome vs Myocardial Infarction	54
	f. Prognostic Indices	54
	g. Lipids and Survival	55
	h. Smoking and Survival	55
	i. Blood Pressure and Survival	55
	j. Sex, Morbidity and Mortality	55

S	Prognosis and Survival (<i>continued</i>)	
k.	Myocardial Infarction Prognosis Complicated by Ventricular Fibrillation or Cardiac Arrest	55
T	Pulmonary Edema	55
U	Renal Disease	56
V	Rupture	56
1.	Free Wall	56
2.	Septal	56
3.	Papillary Muscle	57
W	Sex	57
X	Shock and Lactic Acidosis	58
Y	Site of Infarction and Its Significance	59
1.	Anterior vs Inferior Infarction	59
2.	Nontransmural Myocardial Infarction	60
3.	Right Ventricular Infarction	61
Z	Sounds and Murmurs	63
1.	S1 and S2	63
2.	S3	63
3.	S4	63
4.	Murmurs	63
a.	Ventricular Septal Defect	63
b.	Papillary Muscle Dysfunction	64
c.	Innocent Murmurs	64
AA	Sudden Death and Prehospital Cardiac Arrest	64
1.	Prevalence	64
2.	Prodrome	64
3.	Risk Factors and Pathogenesis	64
a.	Risk	64
b.	Pathogenesis	65
4.	Pathology	66
5.	Specific Arrhythmias	67
6.	Prognosis	67
7.	Prevention	67
BB	Valsalva Maneuver	68
CC	Wolff-Parkinson-White Syndrome in Myocardial Infarction	68
DD	Young People with Coronary Heart Disease and Myocardial Infarction	68
1.	Females	68
a.	Atherosclerotic Heart Disease	68
b.	Age	68
c.	Risk Factors	69
2.	Males	69
a.	Angina	69
b.	Age	69
c.	Mortality	69
IV	Pathogenesis, Pathophysiology and Pathology	69
A	Alcohol	69
B	Anomalies	69
C	Aortic Regurgitation	70
D	Arteriovenous Fistula	70
E	Asynergy	70
F	Atrial Involvement	70
G	Collaterals	70
H	Complement	72
I	Coronary Artery Aneurysms	72
J	Coxsackie Virus	72

K	Geometry and Severity of Coronary Heart Disease	73
L	Hemodynamics of Coronary Stenosis	73
M	Hyperlipoproteinemia	73
N	Myocardial Blood Flow (Endocardial Viability Ratio)	74
O	Myocardial Oxygen Consumption (MVO_2)	75
P	Nephrotic Syndrome	76
Q	Pathology	76
R	Peripheral Vascular Disease	76
S	Personality	77
T	Pharmacologic Agents	77
U	Platelets	77
V	Radiation	78
W	Significance of Pathologic Anatomy	78
	1. Significance of Coronary Artery Distribution	78
	2. Cardiogenic Shock	78
	3. Murmur of Papillary Muscle Dysfunction	78
X	Thrombosis	78
Y	Tolbutamide	79
Z	Types of Atherosclerotic Plaque and Their Extent	79
AA	Vasospasm	80
V	Diagnosis	81
A	History and Physical	81
B	Bayes' Theorem: The Effect of Pretest Likelihood of Disease on the Utility of Diagnostic Tests	82
C	Electrocardiogram and Vectorcardiogram	82
	1. Resting Electrocardiogram	82
	2. Pathologic Q Waves	82
	a. Extent of Myocardial Infarction	82
	b. Inferior Q Waves	82
	c. Transient Q Waves	83
	d. Multiple Myocardial Infarctions	83
	e. Asynergy and Aneurysms	83
	f. Perioperative Q Waves	84
	g. Noninfarction Q Waves	84
	h. Q Waves with Conduction Defects	84
	1) Fascicular	84
	2) Bundle Branch Block	85
	3. R Waves	85
	4. ST Segments	85
	a. Anatomy	85
	b. Sustained ST Segment Elevation	86
	c. Maroko (Precordial ST Segment) Map	86
	d. Current of Injury	89
	5. P Waves	89
	6. T Waves	89
	7. QT Interval	89
	8. Voltage	90
D	Dynamic (Ambulatory) Electrocardiogram	90
E	Exercise Electrocardiography	90
	1. Treadmill vs Ergometer	90
	2. Interpretation of a Positive Response	91
	a. R Wave	91
	1) Amplitude	91
	2) Sensitivity, Specificity and Predictive Value	91

E	Exercise Electrocardiography (continued)	
b.	ST Segment	91
1)	Time and Duration of ST Shift	91
2)	ST Configuration	92
3)	ST Segment Amplitude	92
4)	Sensitivity, Specificity and Predictive Value of ST Segment	93
a)	General	93
b)	Sensitivity of Individual Leads	94
c)	Abnormal Baseline Electrocardiogram	96
d)	Bundle Branch Block	96
e)	Drug Therapy	97
f)	Sensitivity/ST Shift Amplitude	98
g)	Sensitivity of ST Segment Compared to QX/QT, QTc and R Wave	99
h)	False Positives and False Negatives	99
i)	Aortic and Mitral Valve Disease	101
j)	Kinetic and Isometric Exercise Combinations Thereof	101
k)	Kinetic vs Psychologic Stress Testing	101
l)	ST Segment Sensitivity and Fluoroscopy (Coronary Calcification)	101
m)	Asymptomatic Populations	102
c.	Frontal Plane Axis	104
d.	Chronotropic Incompetence	104
e.	Hypertension	104
f.	Hypotension	104
g.	Chest Pain and Silent Ischemia	105
h.	Other Indicators of a Positive Response	106
3.	The Semiquantitation of a Positive Response	106
4.	Exercise Testing Shortly After Myocardial Infarction	107
5.	Prediction of Multivessel Disease After Myocardial Infarction	109
6.	Exercise Testing in Variant Angina	109
7.	Prognosis	109
8.	Positive to Negative Conversions	110
9.	Stress Testing By Atrial Pacing	110
10.	The Value of Exercise Testing as a Diagnostic Tool	110
F	Chemical Diagnosis of Ischemia	111
1.	Enzymes	111
a.	Creatine Kinase	111
b.	Lactic Dehydrogenase	114
2.	Myoglobin	114
3.	Myosin	115
4.	Phosphorus	115
G	Scintigraphy (Radioisotopic Imaging)	115
1.	Technecium-99m Stannous Pyrophosphate	115
a.	Hot Spot Labeling	115
1)	Grading or Classification	115
2)	Sensitivity and Specificity	116
3)	Angina vs Infarction	117
4)	Operative Infarction	118
5)	Timing of Studies	118
6)	Persisting Images	118
7)	Prognosis and Significance	119
b.	Gated Imaging	119
1)	Exercise and Ejection Fraction	119
2)	Wall Motion Studies	119
3)	Ventricular Aneurysm	120
2.	Thallium-201	120
a.	Infarction Identification, Size and Location	120

G	Scintigraphy (<i>continued</i>)	
b.	Infarction Induced Ventricular Dysfunction	120
c.	Ischemia vs Cardiomyopathy	120
d.	Ischemia vs Aortic Stenosis	121
e.	Unstable Angina	121
f.	Exercise	121
1)	Sensitivity and Specificity	121
2)	Extent of Coronary Heart Disease	123
3)	The Assessment of Revascularization	124
g.	Dipyridamole	124
3.	Dual Imaging	124
4.	Tomography	125
H	Echocardiography	125
I	Systolic Time Intervals	125
J	Sizing of Myocardial Infarction	126
K	Cardiac Catheterization (Hemodynamic, Cardiodynamic and Coronary Arteriographic Studies)	126
1.	Coronary Arteriography	126
a.	Correlation with Electrocardiogram	126
b.	Risk and Complications	127
c.	Indications	127
d.	Timing (Including During Acute Myocardial Infarction)	128
e.	Accuracy	129
f.	Spasm	129
2.	Collaterals	130
3.	Calcification and Ectasia	130
4.	Hemodynamics	131
5.	Ventricular Function	131
a.	General	131
b.	Volume and Ejection Fraction (with and without intervention study)	132
c.	Relation of Left Ventricular Function to Extent of LV Injury	132
d.	Diastolic Function	133
e.	Relation of Left Ventricular Function to the Extent and Location of Coronary Artery Disease	134
f.	Left Ventricular Function Geographically Remote to Myocardial Infarction	134
g.	Left Ventricular Function with Acute Myocardial Infarction and Temporally Remote to Myocardial Infarction	134
h.	Asynergy	135
6.	Ventricular Metabolism	136
VI	CCU Hemodynamic Monitoring	136
A	Pulmonary Artery End-Diastolic Pressure (PAEDP) and Pulmonary Capillary Pressure (PCP)	136
B	Oncotic Pressure	137
C	Complications	137
VII	Treatment	137
A	Medical Management	137
1.	Anticoagulants	137
a.	Oral	137
b.	Parenteral	139
2.	Antiplatelet Drugs	141
a.	General (Mechanism of Effect)	141
b.	Aspirin	142
c.	Dipyridamole	143
d.	Sulfipyrazone (Anturane Reinfarction Trial)	143

A Medical Management (<i>continued</i>)	
e. Methysergide	144
3. Atropine	144
4. Diet	146
5. Lipid Lowering Drugs	147
a. Beta-Sitosterol	147
b. Cholestramine and Colestipol	147
c. Clofibrate	148
d. Dextrothyroxin	149
e. Nicotinic Acid	149
f. Probucol	149
6. Inotropic agents	149
a. Digitalis	149
1) Ischemia, Acute and Chronic	149
2) Myocardial Blood Flow and Oxygen Consumption	150
3) Pharmacokinetics	151
4) Polarity	151
5) Predictability of Effect	151
6) Effect on Exercise Capacity	152
7) Effect on Myocardial Infarction Size	152
8) Intoxication	152
9) Systolic Time Intervals	154
10) Use With Digitalis and Nitroprusside	155
11) Digitalis and Propranolol	155
b. Dopamine	155
c. Dobutamine	156
d. Isoproterenol	157
e. Noradrenalin	157
f. Phosphodiesterase Inhibitors	157
7. Lidocaine and Other Antiarrhythmic Agents	158
a. Clinical	158
b. Electrophysiology	158
c. Dose	159
d. Prophylaxis	159
e. Pharmacokinetics	160
f. Hemodynamics	160
g. Toxicity	160
8. Propranolol, Metoprolol and Other Beta Blockers	161
a. Pharmacology and Pharmacodynamics	161
b. Metabolism	163
c. Hemodynamic and Cardiodynamic Effect	164
d. Effect on Total Oxygen Consumption (VO ₂)	165
e. Myocardial Blood Flow Effect	165
f. Myocardial Metabolism Effect	166
g. Hemoglobin-Oxygen Dissociation Effect	167
h. Platelet Effect	167
i. Angina	167
j. Myocardial Infarction and Myocardial Salvage	168
k. Arrhythmias	170
l. Survival	170
m. Combination with Digoxin	171
n. Combination with Nitroglycerin	171
o. Adverse Reactions	171
p. Airway Resistance	172
q. Contraindications	172
r. Breast Milk	172

A	Medical Management (<i>continued</i>)	
s.	Propranolol Withdrawal	172
t.	New Uses	174
u.	Summary of Effects	174
9.	Vasodilators (Unloaders)	174
a.	Nitroglycerin	174
1)	Hemodynamics	174
2)	Myocardial Blood Flow Effect	175
3)	Regional Effect (Asynergy)	176
4)	Electrophysiologic Effect	177
5)	Anti-Arrhythmic Effect	177
6)	Pharmacokinetics	177
7)	Sustained Release Nitroglycerin	177
a)	Ointment	177
b)	Oral	178
8)	Intravenous Nitroglycerin	179
9)	Dose	179
a)	Sublingual	179
b)	Oral	179
c)	Intravenous	179
10)	Nitroglycerin Combined with Phenylephrine	179
11)	Adverse Effects	180
12)	Current Status	181
b.	Amyl Nitrite	181
c.	Sodium Nitroprusside and Phentolamine	182
1)	Hemodynamics and Clinical Effect	182
2)	Effect on Extent of Injury	183
3)	Chronic Ischemic States	184
4)	Undesirable Effects	184
a)	Blood Gas Effect	184
b)	Cyanide Accumulation	184
5)	Nitroglycerin Combined with Digitalis	185
6)	Nitroprusside Combined with Dobutamine	185
7)	Nitroprusside Combined with Phentolamine	185
8)	Phentolamine	186
9)	Nitroprusside Compared to Nitroglycerin	186
d.	Long-Acting "Coronary Vasodilators"	186
1)	Hemodynamics	186
2)	Myocardial Oxygen Consumption Effect	187
3)	Dose and Duration of Action	187
4)	Side Effects	189
e.	Nitrate Tolerance	189
f.	Coronary Steal	190
g.	The Effect of Vasodilators on Exercise Induced Ejection Fraction Fall in Coronary Heart Disease	190
10.	Volume Loading	190
11.	Other Medical Therapy	191
a.	Alcohol	191
b.	Analgesics	191
c.	Antihypertensives	192
d.	Calcium Antagonists	192
1)	Verapamil	192
2)	Perhexiline	193
3)	Nifedipine	194
4)	Lidoflazine	194
5)	Diltiazem	194

A Medical Management (<i>continued</i>)	
e. Carnitine	194
f. Dipyridamole	194
g. Glucose-Insulin Potassium (GIK)	195
h. Hyaluronidase	197
i. Hydralazine	197
j. Liquids, Hot and Cold	197
k. Mannitol	197
l. Nitrous Oxide	198
m. Oxygen	198
n. Papaverine	199
o. Prazosin	199
p. Sedatives	201
q. Steroids	201
r. Vitamin E	203
B Special Therapeutic Situations	203
1. Ambulation and Discharge	203
2. Exercise	204
3. Cardioversion and Defibrillation	206
a. Cardioversion	206
b. Defibrillation	206
4. Counterpulsation	208
a. Intra-Aortic Balloon (IABP)	208
1) Preinfarction Syndrome	208
2) Acute Myocardial Infarction	208
3) Refractory Arrhythmias	208
4) Prevention of Myocardial Infarction	208
5) Cardiogenic Shock	209
6) Surgery	209
7) Hemodynamics of Intra-Aortic Balloon Pump	210
8) Passage Failures	211
b. External Counterpulsation	211
5. Unstable Angina and Preinfarction Syndrome Treatment	211
6. Pacing	213
a. Acute Conduction Defects	213
b. Chronic Conduction Defects	215
c. Arrhythmias	216
d. Unipolar vs Bipolar Pacing	216
e. HIS Bundle Studies	216
7. Sex	216
8. The Effects of Intensive and Intermediate Cardiac Care	216
9. Percutaneous Transluminal Coronary Angioplasty (PTCA)	217
a. Balloon Technique	217
b. Wire Angioplasty	217
C Surgery	218
1. Preparation	218
a. Digitalization	218
b. Propranolol	219
c. Prophylactic Antibiotics	220
2. Indications	220
a. Stable Angina (Including V. A. Cooperative Study Controversy)	220
b. Unstable Angina	223
c. Refractory Angina	225
d. Acute Myocardial Infarction	225
e. Left Main Coronary Artery Disease	225
f. Severe Asymptomatic Coronary Artery Disease	226

C	Surgery (continued)	
g.	Ischemic Cardiomyopathy	226
h.	Single Vessel Disease	226
1)	Isolated Left Main Anterior Descending Disease	226
2)	Right Coronary Artery Disease	227
i.	Severe Cardiogenic Shock	227
j.	Refractory Ventricular Arrhythmias	227
k.	Ventricular Aneurysms	228
l.	Mitral Regurgitation Secondary to Coronary Heart Disease	228
m.	Subsurgical Stenoses	229
3.	Contraindications	229
a.	Distal Run-off	229
b.	Advanced Myocardial Impairment	229
c.	Age	229
4.	Mechanisms of Revascularization Effect	229
5.	Risk	230
a.	General	230
b.	Acute Myocardial Infarction Revascularization Risk	231
c.	Ventricular Aneurysm	232
d.	Predictors of Mortality	232
e.	Surgery Over Age 70	233
6.	Results of Surgery	233
a.	Survival	233
1)	Predictors	233
2)	Surgical Survival (Uncompared to a Medical Control Group)	233
3)	Surgical Compared to Medical Survival	235
4)	Stable Angina	235
5)	Unstable Angina	236
6)	Left Main Coronary Artery Disease	236
7)	Revascularization Plus Valvular Surgery	237
8)	Revascularization Plus Aneurysmectomy	237
b.	Symptomatic Response to Revascularization	237
c.	The Effects of Revascularization on Arrhythmias	237
d.	Exercise Tolerance After Revascularization	237
e.	Left Ventricular Function	238
1)	Global	238
a)	Resting	238
b)	Exercise	239
2)	Regional	239
3)	Compliance	240
4)	Timing of Left Ventricular Function Studies	240
f.	Coronary Blood Flow	241
g.	Ventricular Aneurysm	241
h.	Graft Patency	241
i.	Progression	242
j.	Collaterals	243
k.	Electrocardiogram, Stress Electrocardiogram and Ballistocardiogram	244
l.	Is Postoperative Catheterization Necessary?	244
7.	Complications	245
a.	Intraoperative Myocardial Infarction	245
1)	Prevalence and Mortality	245
2)	Risk Factors and Mechanism of Intraoperative Myocardial Infarction	246
3)	Pathology	247
4)	Significance of New Q Waves	247
5)	Diagnosis	248
6)	Prevention	249

C Surgery (continued)	
b. Intraoperative Ischemia	250
c. Hypercoagulability	250
d. Arrhythmias and Conduction Defects	250
e. Fever	251
f. Clinical Deterioration	251
g. Thrombophlebitis	251
h. Pulmonary Embolus	251
i. Pericardial Complications	251
1) Postcardiotomy Syndrome	251
2) Constriction	252
j. Revascularization Hypertension	252
8. Return to Work After Revascularization	253
9. Cost of Revascularization	253
10. Ten Year Overview	253
a. Negative Aspects	253
b. Positive Aspects	254
11. Noncardiac Surgery	254
12. Second Revascularization	255
Valvular Disease	255
I Etiology	255
II Clinical (Including Natural History)	256
A Aortic Stenosis and Bicuspid Aortic Valve	256
1. Bicuspid Aortic Valves	256
2. Calcification	256
3. Conduction	256
4. Coronary Artery Dominance	257
5. Coronary Heart Disease (CHD)	257
6. Gastrointestinal Hemorrhage	258
7. Left Ventricular Hypertrophy (LVH)	258
8. Prognosis	258
B Aortic Regurgitation	259
1. Acute vs Chronic	259
2. Myxomatous Degeneration	259
3. Ventricular Function and Pathophysiology	259
4. Myocardial Ischemia	259
5. Hypertrophy	260
6. Conduction	260
7. Prognosis	260
C Mitral Stenosis	260
1. Signs	260
2. Thromboembolism	260
3. Atrial Function	261
4. Ventricular Function	261
5. Progression	261
6. Echocardiography	261
7. Prognosis	261
D Mitral Regurgitation	262
1. Intermittent	262
2. Ventricular Function	262
3. Severity Influenced by Ventricular Size	262
4. Prognosis	262