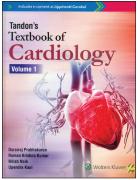
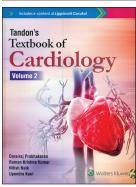
## Book Review

**Text Book of Cardiology (two volumes).** Dorairaj Prabhakaran, Raman Krishna Kumar, Nitish Naik, Upendra Kaul (eds). Wolters Kluwer, New Delhi, 2019. *1603pp; price not mentioned*. ISBN 988–93–88696–16–6.





I take great pleasure in reviewing the first edition of the new multiauthor textbook of cardiology dedicated to the memory of Dr Rajendra Tandon.

This two-volume work consists of comprehensive and current chapters written by mostly Indian authors. The overall production values, editing and printing are up to international standards and even include an e-learning platform. The choice of chapters reflects cardiology practice in India and other less developed countries and hence is relevant to Indian and international students of cardiology alongside the standard western texts. The editors are all thought leaders and experts in different areas of cardiology and have done a commendable job in guiding this project and contributing many of the chapters.

Why do we need this book in the context of existing excellent texts available from western sources? One

reason is that this book mainstreams the teaching of diseases with a non-western bias—most notably the continued relevance of rheumatic heart disease and tuberculosis to our practice of cardiology. Hitherto, our students have resorted to monographs and updates for these topics, making them an add-on rather than a central concern. Hopefully, this will improve the understanding of diseases in the tropics, as also avoid being surprised during viva voce examinations. Even the common diseases need to be handled in the Indian context with emphasis on local protocols, and this book fulfils an important need.

More fundamental, and central to the dedication to Professor Tandon, is the focus on clinical aspects of disease as opposed to data and investigations. To his legions of students, Dr Tandon best exemplified the vanishing art of listening patiently first to the patient, and then to her heart sounds, along with keen observation and deduction worthy of any detective. In a roomful of cardiologists, Professor Tandon would be the most soft-spoken, yet once he had used his trademark double-lumen stethoscope, his comments would be the most incisive. Investigations would not be the primary tool for diagnosis but rather a confirmation. Indeed none of us who witnessed this intellectual tour de force could be immune to its grace and power. This book thus attempts to redress the balance between clinical evaluation and advanced technology, with a great measure of success. Hence, it is a good attempt at teaching the process of cardiology.

Another focus of the book that owes much to the memory of Professor Tandon is the emphasis on ethics and doctor–patient rapport, which feature as separate chapters. The practice of cardiology must be passionate as well as compassionate, humane as well as technically advanced. These concerns have been placed at the very beginning of this book. The eponymous dedication of this book to Professor Rajendra Tandon may be taken as emblematic also of our regard for other giants such as Professor B.C. Roy, who exemplified similar values. Yet, the work stands on the quality of the text and not merely on the shoulders of these giants.

Areas that have been well covered include diet, exercise and lifestyle and cardiovascular epidemiology. Multidisciplinary concerns such as cardio-diabetology and cardio-renal syndromes have been addressed. A generous list of further readings in most chapters ensures that the text becomes the start of the quest for further knowledge.

Separate chapters on innovative indigenous technologies, evaluating published resource and knowledge resources in cardiology are also among the unique features of this book.

The section on congenital heart disease is clear and concisely written. It best emphasizes the physiological approach of Professor Tandon in first identifying the clinical syndrome, then individual lesions, and is a great learning experience for the young student. This clinical approach then forms the foundation for the exposition of the latest interventional and surgical solutions.

The book also devotes over 100 pages to arrhythmias and deals with major arrhythmias in detail making it one of the strong points of the book.

What would I improve? This is a tough one given the quality of the text. However, an expansion of the section on coronary artery disease and its various syndromes would be welcome given the ongoing epidemic of this disease in India and its neighbourhood. Although these topics are well covered in existing textbooks, yet they need to be handled in an Indian context emphasizing both greater severity of disease and cost-effective treatment. We need to focus on how our protocols need to be different from the West and deliver value for money, keeping local resources in mind.

How does a book become a standard text for cardiology? This work certainly stands out for its excellent pedigree and the credentials of its editors and authors. Since information is freely available today, it is the processing and analysis of this information that distinguishes this important textbook and elevates knowledge to the level of wisdom. Continued revision of content, broadbasing of the list of contributors and emphasis on local concerns will add heft to this work. The publishers might also keep economics in mind and bring out a soft-bound low-cost edition.

I compliment the editors and authors for a job well done and hope they will carry it forward.

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