Who is responsible for the preoperative evaluation of patients who are going to have an extracardiac operation, the cardiologist or the anaesthetist? Recommendation III/ D/ 5/82 of the European Advisory Committee for Medical Training is clear that the boundaries between specialties are not fixed. Consequently the real problem should be medical rather than occupational. In Greece the anaesthetist trains in cardiology for 6 months after which he can obviously not be compared to a fully trained cardiologist, as far as cardiological knowledge is concerned. On the other hand, the cardiologist has no training whatsoever in either anaesthesiology or surgery, thus, to a large degree, ignoring the problems of these specialties. The cardiac risk of the surgical patient during anaesthesia and the surgery itself, must be evaluated both pre- and post-operatively. The knowledge required for this purpose is exactly the subject covered by the textbook “Anaesthesia and the Cardiac Patient in Extracardiac Surgery” by P.T. Michelakos and J.B. Vasiades (Parisianos Edition, Athens 2001).

This 741 page textbook systematically examines all those cardiological and anaesthesiological aspects that are necessary for the evaluation and management of the surgical patient before, during and after the operation, as far as the circulatory system is concerned. It begins with the anatomy and physiology of the circulation, proceeds to pathophysiology and the clinical and practical aspects of the problems. Both aspects are tackled in this book, written by two authors, one an anaesthesiologist and the other a cardiologist. The book is rich in figures, tables and references and attempts to clarify the most difficult concepts for both the anaesthetist and the cardiologist. The frequent use of algorithms facilitates the practical scope of the textbook. In studying the book the anaesthetist will be informed...
about the anatomy, physiology and pathophysiology of
the circulatory system, while the cardiologist will
renew his knowledge on this essentially scientific part
of his specialty. The discussion about the strain on the
cardiovascular system during an operation of which
the cardiologist may not be fully aware follows. The
fourth part of the textbook is devoted to the important
practical aspects of the perioperative management of
cardiac diseases during general surgery, a chapter
equally useful for both the cardiologist and the ana-
esthetist. The fifth chapter concerns the anaesthesia of
cardiac patients during extracardiac operations. Al-
though the chapter refers to the cardiac patients, the
 cardiologist will learn, probably for the first time,
something about anaesthesiology, the properties of the
anaesthesiological agents, as well as how to manage
other practical problems, like the perioperative
management of patients receiving anticoagulants etc.
The last part deals with anaesthesia in vascular
surgery, where the risks during the operation originate
primarily from the heart and more generally from the
circulatory system.
This informative book, enriched with the
personal experience of the authors, is clearly written
and easy to read. I am certain it will prove very
useful to trainees, cardiologists, anaesthetists,
surgeons and physicians dealing with intensive
care.
INTRODUCTION Complications during and after non-cardiac surgery are a continuous concern for medical societies, as it was shown in the latest multi-center study with this topic that mortality after surgery in Europe is much bigger than expected and previously estimated - 4%. It is also estimated that 42% of the complications and deaths associated with non-cardiac surgery are due to cardiac complications. Given the fact that there are approximately 19 million major procedures being performed in Europe each year, it can be assumed that 319000 deaths are caused by perioperative cardiac complications. Take your surgical skills to the next level with Cardiac Surgery, a volume in the Master Techniques in Surgery series Cardiac Surgery in the Adult.

The patient underwent general anesthesia and had an uneventful course of surgery and recovery. Management of the patient with a heart transplant includes consideration of the altered physiology of a denervated heart; the perioperative anesthetic considerations specific to this patient population; and the risks of rejection, infection, and pharmacologic interactions brought about by immunosuppression. Cardiac transplantation has proven to be an effective and life-saving option for those patients with congestive heart failure who deteriorate despite maximal medical management. The recipients have been able to return to life as productive citizens with improved quality as well as quantity of life. Clinical considerations in hypertension and the hypertensive patients in elective surgery.