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Coronary Care Manual 2nd Edition. Peter Thompson MD FRACP FACC MBA

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BOOK REVIEW

Coronary Care Manual 2nd Edition

Thompson, P., MD FRACP FACC MBA

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This practical coronary care manual has been edited by one of Australia's leading cardiologists, with extensive contributions by national and international experts. The first edition was written twelve years ago and an update was urgently needed due to the rapid growth and evolution of diagnostic tests, therapeutic interventions and management strategies in the intervening period.

The manual aims to present a balanced view of the existing scientific evidence relevant to all aspects of coronary care. The evidence base supporting each section is of high quality and well elucidated. Despite its pedigree, the manual is eminently readable and caters to a wide range of health professionals.

The book is organized into ten sections, commencing with a background to coronary care. Sections two and three cover the epidemiology, risk factors, genetics and pathophysiology of the spectrum of diseases that impact the heart. Patient evaluation and diagnostic tests are extensively covered in section four. Updated drug therapies are then discussed in section five. Section six includes all other therapies ranging from basic life support, to pacemakers and coronary artery bypass grafting. Sections seven to nine present practical patient management advice for a range of cardiac clinical conditions. The final section is devoted to management of patients post coronary care.

The publication provides sufficient detail to be a useful reference for those not actively working in acute coronary care units which is its major strength for paramedics. There are two main references to managing an acute cardiac patient in the prehospital setting. The first is in section one, where the introduction of the concept of mobile coronary care is mentioned. Thompson and Finn then co-author an entire chapter on prehospital coronary care in chapter sixty. This chapter is not as in-depth as needed, as changes are already occurring that are not reflective in its content. For example, reference is made to out of hospital fibrinolysis and the practical restraints to its uptake. Twelve lead ECGs with telephonic transmission to receiving hospitals have been in use in a number of Australian states for some time. Funding for prehospital fibrinolysis has also been promised in the recent Victorian election campaign.

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It is noted that there are no paramedic contributors listed. A contributor from this field would have enhanced the publication's appeal to paramedics and provided further insights into the interdisciplinary nature of acute cardiac care.

A critical review of the literature related to patient delay, and factors that contribute to delay, have also been included in the prehospital chapter. This is a valuable inclusion for health professionals working at the community and hospital interface.

In summary, this manual is a valuable contribution to the field and is a worthy addition to the library of all health professionals caring for people with cardiac disease. For paramedics in particular, it provides insights to the ongoing management of patients once they are admitted to hospital. It explains the diagnostic tests patients are most likely to undergo and details ongoing management. An understanding of the spectrum of care can assist paramedics to better prepare patients for what is to come. The prehospital context is limited, however it is acknowledged that this is but one element of the spectrum of care and this is balanced by the comprehensive nature of the publication.

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