Book report

Haemodynamic monitoring in critically ill patients

Andrew Rhodes¹ and Rebecca Cusack²

¹Consultant in Anaesthesia and Intensive Care Medicine, St George's Hospital, London, UK ²Specialist Registrar in Intensive Care, St George's Hospital, London, UK

Correspondence: Andrew Rhodes, arhodes@sqhms.ac.uk

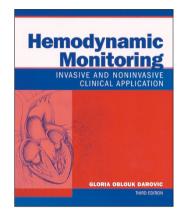
Published online: 13 October 2003

Critical Care 2004, **8:**203 (DOI 10.1186/cc2376)
This article is online at http://ccforum.com/content/8/3/203

© 2004 BioMed Central Ltd

Keywords: cardiovascular, haemodynamic, monitoring, physiology

Darovic GO (Ed): Hemodynamic Monitoring: Invasive and Non-Invasive Clinical Application, 3rd edition. Philadelphia, PA: WB Saunders Company; 2002. 676 pp. ISBN 0-7216-9293-1



It can be difficult to find textbooks of anatomy and physiology that are pertinent to clinical practice. Books are too often weighed down with turgid facts that are often deemed irrelevant to the clinician practicing at the bedside. This book is different. This is the third edition of *Hemodynamic Monitoring: Invasive and Non-Invasive Clinical Application* that has been published. That fact alone should make it worthy of reference. The book does not just provide us with a comprehensive overview of monitoring technologies, but provides us with the necessary anatomy and physiology to make sense of what we are reading. This third edition has been updated to take into account the major advances we have seen over the past 10 years in our understandings of the pathophysiological and therapeutic processes occurring in the critically ill.

This book is divided into three sections and 24 chapters. The sections cover, in a logical order, the anatomy and physiology, the techniques of monitoring and then the implications of the specific monitoring modalities on different diagnostic states. The monitoring modalities range from clinical assessment to invasive monitoring of cardiac output and mixed venous oxygen saturation. Common problems and pitfalls with each modality are discussed in the relevant sections. My only criticism of this text would be that it omits many of the newer cardiac output measuring technologies that are rapidly proliferating around the world. While new technologies for monitoring cardiac output are now commonplace, such as oesophageal Doppler and pulse contour analysis, they are not discussed in the book. This may in part reflect a problem with all textbooks; by the time they come to publication, the books are already slightly out of date. This should not cloud the overall view of this book,

however, which provides a traditional and otherwise comprehensive overview of this subject.

This book is concise and clearly written, and it provides us with an in-depth insight to both invasive and noninvasive monitoring of the critically ill patient. The text is well presented with good use of tables and diagrams to aid the understanding of what are otherwise difficult concepts. I can recommend this book as a valuable resource for any healthcare professional working with the acutely sick or critically ill patient.

Competing interests

None declared.