Synopsis

This is the second book in a two-volume set. The definitive guide for practicing physicians and pharmacists who need to know about drug therapy for heart conditions. The fully updated Second Edition explores mechanisms of action, all the cardiovascular agents now available, drugs in development, molecular biological advances, and specific drug treatments.

Book Information

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Customer Reviews

I am an M.D. but not a cardiologist. I looked at this book for a very specific purpose. I wanted to learn about nutrients as adjunctive therapies in heart disease. My interest in this topic arose because a family member, who has CHF, is not getting adequate relief from his medical regimen. This text is clearly not a nutritional or alternative work; it is very mainstream and the vast majority of the text is devoted to usual pharmacotherapeutic topics. But unlike almost any other book I saw, this one devoted short, highly focused, and serious review coverage to cardioactive nutrients like L-carnitine, fish oils, taurine, and coenzyme Q-10. The parts I read were well written and well thought out. I also glanced through the rest of the book and it appears to be a text that the authors worked diligently to make into something truly exceptional—not just a bunch of review articles thrown together. The entire book seemed to be nicely conceptualized and nicely laid out. The truth is, I almost bought the book just out of interest, even though I do not practice and therefore had no direct need for it. My guess is that clinicians and fellows, especially cardiologists but probably also internists, and perhaps critical care specialists and some others as well, might find this a very
interesting and helpful addition to their personal reference library. As for the nutrients discussed in the book, I had previously done extensive literature searches in MEDLINE and came away impressed by the body of evidence suggesting that these may be helpful in many cases and harmful in practically none. After exploring the issue, I was frankly amazed that some of these nutrients are not more widely used as adjunctive therapies in many cardiovascular conditions.

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