



Atrial Fibrillation in Clinical Practice

By Mario Fitz Maurice & Fernando Di Tommaso

1st Edition – Autonomous City of Buenos Aires: Inter-Médica; 2016
192 pages. Il.; 20 × 14 cm

Atrial fibrillation is still a pandemic disease and represents the most frequently detected arrhythmia in consultations, during hospitalization, and in emergency rooms. Multiple decisions are made, including arrhythmia management (heart rate control or reversion to sinus rhythm), stroke prevention with oral anticoagulants, and treatment of associated comorbidities, such as heart failure and obstructive sleep apnea.

In general, management is multidisciplinary; however, we physicians often have to make more than one decision at a time in short time intervals. In order for us to keep updated in the different areas of medical competence, new educational technologies have been incorporated -digital texts, canned summaries, APPs, embedded information in social networks, etc.– to our baggage of information.

However, the book, as a vehicle of knowledge, does not perish. The book survives the cruel impact of the flow of time, and it seems that new generations will not let the flame extinguish. What could then be the purpose of Dr. Fitz Maurice and Dr. Di Tommaso in devoting a lot of time to write a book about atrial fibrillation?

Well, I think these two talented cardiologists have managed to understand an important gap that physicians nowadays –particularly those who work in “the trench”– suffer on a daily basis: the near impossibility of following the course of knowledge in various aspects (from diagnosis to treatment) of one of the most prevalent diseases in the world. Therefore, they decided to write a rich, agile, refreshing, and easy-to-read book.

I have had the pleasure of reading *Atrial Fibrillation in Clinical Practice*, and I can confirm how well the book is organized, the high quality of charts and tables, and the comprehensive coverage of the various topics of interest for the clinical management of atrial fibrillation.

In this book, the reader will not find a perfect analysis of each topic but a summary made by experts who have captured the essence of what we should all know, and even more. It is important to highlight all the sections that teach how to assess the patient's embolic risk, and to design proper stroke prevention strategies.

In this regard, the book by Fitz Maurice and Di Tommaso perfectly fulfills this paradigm. I would like to emphasize the valuable fact that this book has been written and published in Spanish. In order to reach all corners of the continent, I believe it is of vital importance that communication between the authors and the reader be fluid and nothing better than communicating in our native language.

For those who want to know how the information we read is conceived and how the guidelines we use are determined, this book also includes a complete review of studies, analyzed in a simple and elegant manner. This allows becoming familiar in a short time with the trials that “made a difference” and are cited over and over again the literature. For readers who can identify atrial fibrillation candidates to treatment with invasive techniques (ablation, implantable devices, percutaneous appendage closure), the authors included didactic chapters that help understand which patients may benefit from this type of treatments.

As you can see, the authors have addressed all the topics in a systematic and attractive way for the reader, and they should be acknowledged for this reason, since making the difficult easy requires talent, effort, and a lot of dedication.

There are books and books. There are books piled up on the shelves, distant in their litany; books that never breathe for they are always closed, longing for a reader. And there are books that are meant to take flight, essentially because the reader will read them again and again searching for some truth in their pages.

Those are the books we need. I welcome this work in Spanish by Dr. Fitz Maurice and Dr. Di Tommaso, who wrote this necessary book with effort and intelligence. A book that will help bring diagnosis and treatment of atrial fibrillation closer to us all.

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