

The sick heart. Bridges between emotions and infarction

BY CARLOS TAJER

Buenos Aires: Libros del Zorzal; 2008
1st edition
192 pages

Within the microcosm of human beings, it is the heart what should call our attention due to its constant throbbing. Based on this concept, from the earliest times in history man has foreseen the approach to a magic and emotional state through research on its throbbing. Its etymology draws from its beating nature. The most archaic term that refers to the heart is *hrid,* a word derived from the Sanskrit (language spoken by the first inhabitants in India, Indo-European family, 2500 BC). This term phonetically evolved into *krid* or *kurd*, which means "jumping organ", very close to the word *kiruz* (deer). From there on, it evolved into *kardia* (Greek), *hertz* (German), and *cor* (Latin). In the incipient technical medicine, the heart was considered the center of emotions and passion in the circulatory physiology, which lasted until Renaissance. It was the organ where blood received innate warmth. According to the Cartesian System, when soul separated from the body it gave way to the Mechanistic Movement, which was later evidenced in Positivism. Nowadays, a reacting philosophy at the divorce of the unit body-soul tries to recover the Hippocratic Legacy of Cos, which refers to the confluence of the *ars medica* and the *Tekhne Iatrike* in the medical scenario.

Carlos Tajer's work, *"The sick heart. Bridges between emotions and infarction"* (*El corazón enfermo. Puentes entre las emociones y el infarto*), explores this universe not only as a physiopathological vision but also as an explanation of a humanistic diaspora. It deals with the human being. It forces to reflect upon the fundamentals of understanding disease in Ortega & Gasset's words *"humans have no nature, but history"*, in a primary goal to alleviate pain, which entails a clear imprecation of affection. Emotions and pain are self-organizing processes. They feed back each other. The *tekhne* has become a necessity following anguish and pain which are established at the onset of the morbid. Tajer takes the heart as the target of this equation, of which he has been a goldsmith throughout his life. He approaches ancient men in this respect, who considered throbbing as the warm soul (Aristotle), of love (Homer), of goodness and awareness (Egyptians), of emotional life (Indians). But this document has several aspects to be considered. It goes over the patient's biography and it also warns. Moreover, *res cogitans-res extensa* blends into this indissoluble body-soul equation, which mechanisism still divides nowadays, with serious consequences. Tajer's work prompts diseases should be seen through an approach to patients as a whole, including their circumstances. The patient's natural history should also be gone through.

At present, this view is not a theoretical and conceptual fact. It is entangled in the processes of the sciences of complexity, in which the systems are not indefeasibly erected now. They are open and fed back, subject to ongoing transformations, to the sensibility of the conditions that have given rise to them, involved in fate or in lack of knowledge, as explained by Laplace with his *demon*. Today, the intellectual refinement of knowledge speeded up the outcome of divorcing technology from body exploration (*semeion*). It was hastened into a vicious circle of abstraction, knowledge, and doubt. While it was weakened, it was deprived from the subjectivity of facts as vital force; it was progressively taken away from the primitive instinct and carried to the dangerous zone of the world around without enough ethics and moral. An inadequate "progress" turns the concept of the very term into ashes.

The weakness we suffer in today's *ars medica* derives from deepening into the intellect, progressively dissociated from its natural structure. When science is accumulated but no solution is found, where shall we go to? Tajer's work paves us the way by revealing the mystery. He advances through the history to raise our awareness, in its true level, so that it honors humans as circumstantial and ephemeral beings. The space-time dimensions are unending; and so are the body-soul dimensions. This approach that the author introduces may be very well incorporated into today's sciences of complexity, in the most intimate core of nature, where inherent randomization hides.

Source of emotion and deep suffering, in the same way as their opposites, strength and spirit, the heart Carlos Tajer explores offers a vision of the crisis by which medical art slides. Even more important, it reintegrates the body into the soul, pointing out the necessary changes in order that technique reaches its core by means of words and narrative. The psalm reads as follows: *"Unless Yahweh watches over the city, the watchman guards it in vain."*

Jorge C. Trainini