



Cardiointensivismo Pediátrico. Fisiología y Decisiones

BY EDGARDO BANILLE, EDITOR

ILLUSTRATED, 854 PAGES

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After the successful advent in medical and scientific contexts of his book *“Hojas de Ruta en el Perioperatorio Cardiovascular Pediátrico”* [Guidelines for the Pediatric Cardiovascular Perioperative Period], released in 2006, Edgardo Banille undertook an ambitious project, whose outcome is this treatise called *“Pediatric Interventional Cardiology. Physiology and Decisions”*, which goes far beyond the earlier work, focused exclusively in perioperative and postoperative issues concerning pediatric patients who have undergone cardiovascular surgery.

On this occasion, the author –who serves as Chief of the Cardiovascular Recovery Area of the Intensive Care Unit at the Children’s Hospital, in addition to being a professor in the Chair of Pediatrics II at the Catholic University of Córdoba– gathered a group of 37 local, national and international experts who, over the 30 chapters covering 854 pages, develop the work in two parts. The first part –more general, comprising 16 chapters– deals with major syndromes, entities that may lead to them, diagnostic methods, and the non-invasive and invasive monitoring required for intensive care. Ventilatory strategies –which are often necessary for these patients– are also considered, and even the role of the psychologist, so important in containing families, is also taken into account.

The second part, more specific, is substantial with

cardiovascular postoperative care. Pathophysiological advances occurred since the release of “Guidelines...” are fully updated here, and there is an outstanding active role of experts from different areas in diagnostic and therapeutic techniques, all brilliantly coordinated by the author and editor.

The book is easy to read, and includes several graphics, images, algorithms and tables that facilitate quick reference in case of emergencies and, consequently, in decision taking.

The importance of this work is highlighted in the prefaces by a pediatric cardiologist and two intensivists –one of them cardiovascular intensivist only– with a high reputation, so there is little to add apart from congratulating the author for his Herculean task, not at all easy if we consider that the daily work must go on. I extend my congratulations to Alfredo Benito for his careful printing of this issue, which should be read by all the professionals involved in one way or another in the care of these patients. It should also be part of the libraries of institutions and be on the desks of pediatric intensive care units.

Dr. Luis E. Alday^{MTSAC}

Specialist in Cardiology

Specialist in Pediatric Cardiology

Specialist in Pediatric Interventional Cardiology

Professor Emeritus of the Catholic University of Córdoba