

# Preface

Doppler echocardiography has become the mainstay of adult cardiology practice worldwide. It provides essential information on cardiac anatomy and physiology. Its ease of use and complementary role to the bed-side examination has even given it the name of the “imaging stethoscope.”

In *Echocardiography in Adult Congenital Heart Disease*, we present our clinical experience in applying echocardiographic techniques specifically to the diagnosis and management of adult patients with congenital heart disease. Wherever possible, we have tried to provide suggestions for the adaptation of standard imaging protocols to accommodate specific congenital heart conditions. The extremely varied morphologic spectrum of congenital heart disease, however, reinforces the need for describing individual components of anatomy, that is, the atrioventricular and ventriculoarterial connections, and this cannot be overemphasized for complex lesions.

Our practical textbook provides an anatomical basis for these malformed hearts, together with a discussion of the physiological patterns seen in different conditions. Our focus has been on contemporary clinical practice. We have, thus, related imaging to the clinical status of the patient, and provided information on disease progression and the effects of further intervention whether surgical or catheter.

We hope that we have given a sufficient number of examples of the many different conditions and variations on physiology to have written a useful guide for the diagnosis and management of your patients with congenital heart disease. We have made this book a focused manual, which can be kept by the echo machine for easy reference, rather than a large textbook, which might gather dust on a shelf. This means that we have, to some extent, sacrificed additional information, which would have had less impact on day-to-day practice and would have made it more difficult to follow. We have also used terminology and descriptions with which both paediatric and adult congenital heart disease practitioners will be acquainted.

We are indebted to our patients who gave us such an opportunity to improve our understanding of congenital heart disease; clearly, without them this book would not have been possible.

We would value a great deal of your feedback as to what else you would like to see included in the second edition and any comments on how we can make this focused textbook better for your day-to-day echocardiographic practice.

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