In the introduction to his book, Rob Scott Millar states: ‘This is not a textbook. Its core value depends on the variety of real ECG traces and their interpretation which will, hopefully, assist you in interpreting similar rhythms that you encounter in your practices.’ In stating this, his humility may lead you to underestimate the value of this book, which is filled with pearls that only an experienced electrophysiologist and enthusiastic teacher of Rob Scott Millar’s stature can provide. His humble description should rather read: ‘Its core value depends on the variety of real ECG traces and their interpretation, which will definitely assist you in interpreting similar rhythms that you encounter in your practices.’

Scott-Millar’s approach to arrhythmias, based on systematic observation prior to the application of basic principles, equips the reader with a lasting skill in assessing any arrhythmia. This is far preferable to relying on snap judgements and algorithm-based approaches, which may provide the right answer sometimes but in reality stand between the clinician and the growth in skilled ECG interpretation that comes with the experienced operator making systematic and meticulous observations and finding explanations that respect the basic principles of the de- and repolarisation of the heart and the methods we use to record them.

There are a few minor points that can be addressed to improve the publication, the first of these being the binding of the atlas. Scott Millar is known to place emphasis on the value of having a full-size standard 12-lead ECG at one’s disposal to formulate an opinion. This principle has clearly impacted upon the format of the atlas, and hence upon the method used to bind it. However, the ring binding with the overlay-type front cover may soon result in an atlas without a front cover, and content that gradually transforms into a collection of loose pages. I don’t judge a book by its cover, but having said that, I do enjoy a book that has been bound in an appealing and lasting manner. Further to express my view on the binding perspective, I have to confess that I am a bit of a bibliophile and that I find pleasure in the feel and look of a good book in my hands. Having said that, an electronic format of this book will be well received.

The cross-references provided in the atlas are valuable in reinforcing important principles and examples. A few cross-referencing mistakes provided minor irritation, e.g. on p. 64 a reference is made to Figure 2.09A, which could not be found. Similarly, on p. 183 a reference is made to an earlier diagram which should read 5.06 and not 5.05. Reference to alternative sources, such as the reference to an updated list of drugs to avoid in patients with QT prolongation, is also valuable. However, the reference given (www.azcert.org) takes one to the Crediblemeds.org website, which is maintained by the Arizona Centre for Education and Research on Therapeutics. It requires registration with the website, presumably with some commercial goals following by the beginner, but will prove equally interesting and informative to the experienced ECG interpreter. It is certainly a source that can be recommended to the undergraduate medical student as well as the specialist training in cardiology.

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