

FOREWORD

It is a great pleasure to contribute a brief introduction to this new book on the pulmonary circulation. As the authors point out in their Preface, Hammersmith Hospital has always had a strong link with the pulmonary circulation. Indeed, the introduction of cardiac catheterization into the UK by Sir John McMichael, Professor of Medicine, in the early 1940s played a large part in developing the 'Hammersmith tradition'. The story is worth briefly recounting here.

Cardiac catheterization was introduced by Werner Forssmann in Germany in 1929. Although he thought this technique might have important applications, the powers that be decided otherwise. Indeed, Professor Sauerbruch, a leading surgeon in Berlin, said that he was not interested because he "ran a clinic not a circus!". Subsequently, André Cournand and Dickinson Richards in Bellevue Hospital, New York, put the procedure on a sound clinical basis. The first publication appeared in 1941.

McMichael had been interested in the measurement of cardiac output by a rebreathing acetylene method. Apparently, his colleague, E.P. Sharpey-Schafer first saw the paper from Cournand's group, and together they decided to try the new technique to obtain right atrial blood samples to measure cardiac output by the direct Fick method. The first patient catheterization at Hammersmith took place in November 1942. McMichael then asked the Medical Research Council (MRC) for approval to study normal volunteers, but was told no committee would assent to such an unorthodox procedure. However, Sir Edward Mellanby, secretary of the MRC, said McMichael could make a personal approach to the Friends Ambulance Unit, formed during the War from Quaker conscientious objectors. As a result, 135 cardiac catheterizations were performed in a little over a year, and in February 1944 McMichael read a paper to the Physiological Society which the session chairman, Sir Thomas Lewis, referred to as "startling". The first publication appeared later that year, but the reaction of London consultants was strongly hostile. Nevertheless, McMichael and his team persevered, and the importance of cardiac catheterisation in the management of patients with heart disease no doubt played a role in his election to the Royal Society, a rare honour for a clinician. The boldness of taking the study to normal volunteers gave Hammersmith a reputation for cutting edge, investigative research which extended to other invasive procedures such as liver biopsy.

Turning to the present book, many reviews have been written about the pulmonary circulation, and I wondered whether the authors could come up with

a new approach. Happily they have done so, producing a splendid, pithy, highly-readable book with superb illustrations. I am certain that many people who think that they are well abreast of research in the field will gain a lot from the book. It will be a great boon to research students and other people embarking on a career. I wish it well.

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