It is a shame that there are very few Spanish cardiologists who try to use our language correctly in either written or spoken communications. In most cases, dear colleagues, we are not very concerned with the conceptual precision or the formal riches of our self-expression, and we allow it to be impoverished little by little by mimetic adaptations of English. Not one of us is without fault. Who has not, in either written or spoken word, used incorrect expressions (such as «microalbuminuria» which means dwarf albumin in urine, or «suero fisiológico»), poorly translated expressions (such as post-operative «manejo», «colgajo de TV»), horribly mimetic expressions («prueba de esfuerzo», «en tapiz rodante», «ECAs», «resucitación cardiopulmonar») or simply untranslated words («stents»)? We all do this continuously, premeditatedly, and lamentably; but to some of us it matters, and we intend to improve, and to many others of you it matters much less and you are much less interested in changing.

All of us (both the contrite and the unworried), should read this dictionary. I propose the verb to read. It is not enough to keep it on the bookshelf only to be consulted in an Olympian manner (every 4 years) like a horticulture guide (from grapes to pears) or a liturgical work (from Easter to Christmas). I advise you to read it. From beginning to end. It seems absurd: read a dictionary from beginning to end, as though it were a book? Yes. I assure you that it is not absurd—those of you who belong to the above-mentioned second group will learn many things (you will understand, for example, that every time you write profuse «sudoración» you are committing an atrocity; what you should say is «sudación»; or that «tiroides» is not what you think, but is actually called «glandula tiroides»). Those in the aforementioned first group will enjoy it. And I hope that this modest critique will help all of you, whether real or virtual lovers of the language, to reflect on our responsibility to maintain it, embellish it, and use it well.

I do not have the pleasure of knowing the author personally, but beginning with the prologue I was made aware the he is not only a seasoned expert, but has linguistic sensibilities, culture, literary enthusiasm, and praiseworthy methodological vigor. It is evident that the production of this book has been exacting and careful, as has been the correction of errors (there are very few) and the typographic style (it is a shame that the large number of entries has necessitated somewhat small type size). The pharmacological background of the author is also appreciable by his is particular precision and thoroughness.
on the subject (as is the case in microbiologic and anatomic subjects covered). The broad terminology related to cardiology is adequately –although not thoroughly– represented.

Finally, his imagination also stands out (his proposal to call what is opaquely and incorrectly called «culturismo» «musculismo», for example) and his courage in offering solutions that are different from those proposed by the Royal Spanish Academy (who frequently propose nonsensical terms such as «cederrón», «aerobic», «biomedicine», «radioisotope», «compartimiento», or «colesterina»).

In a field as complicated as the translation of scientific terms from English, it is not possible to always be right. Nevertheless, the author offers on most occasions brilliant solutions to really difficult words (see, for example, «evidence based medicine», «ROC curves», or «informed consent»). In some cases, the proposed changes have no future, as they clash with word use («hiponatriemia», «inótopo», «estimulo laminar») because generalized incorrect use has caused hope to be lost (myocardial «remodelado» used instead of the proposed «reestructuración», or «reactante» instead of «reaccionante») or are ultra purist («sistema renino-angiotensínico»).

In conclusion, I refer to 5 really difficult or conflicting expressions that I immediately went to find as a touchstone for the value of this dictionary. The first is «stent», which the author translates, in my opinion, completely correctly, as «endoprótesis vascular». The second, «bypass», is also well converted into castellan as «derivación». The third, «triage», is not included. The fourth is «angiotensin-converting enzyme». Some call it «convertasa», others «enzima convertidora», «conversora», or «conversiva». The author appears to timidly favor this last choice (actually, he indirectly confesses that he would love to dare to propose «encima» instead of «enzima»), although eclectically he confines himself to indicating that its official name is «peptidildipeptidasa». The last expression is perhaps the only personal disappointment –if it can be called that– the term, «odds ratio». It would have been splendid if the reputed expert could have agreed with my proposal (see «¡Ay, madre! ¡Tengo que dar una charla!»): «momio». You can’t have everything.

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