



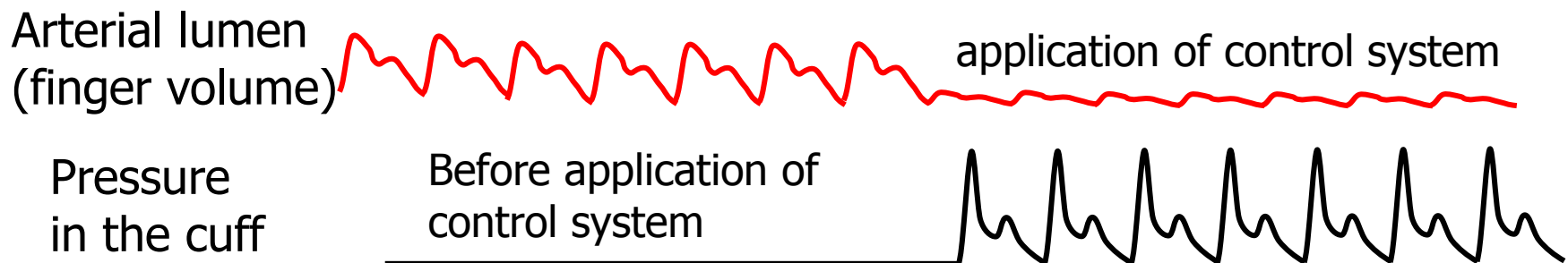
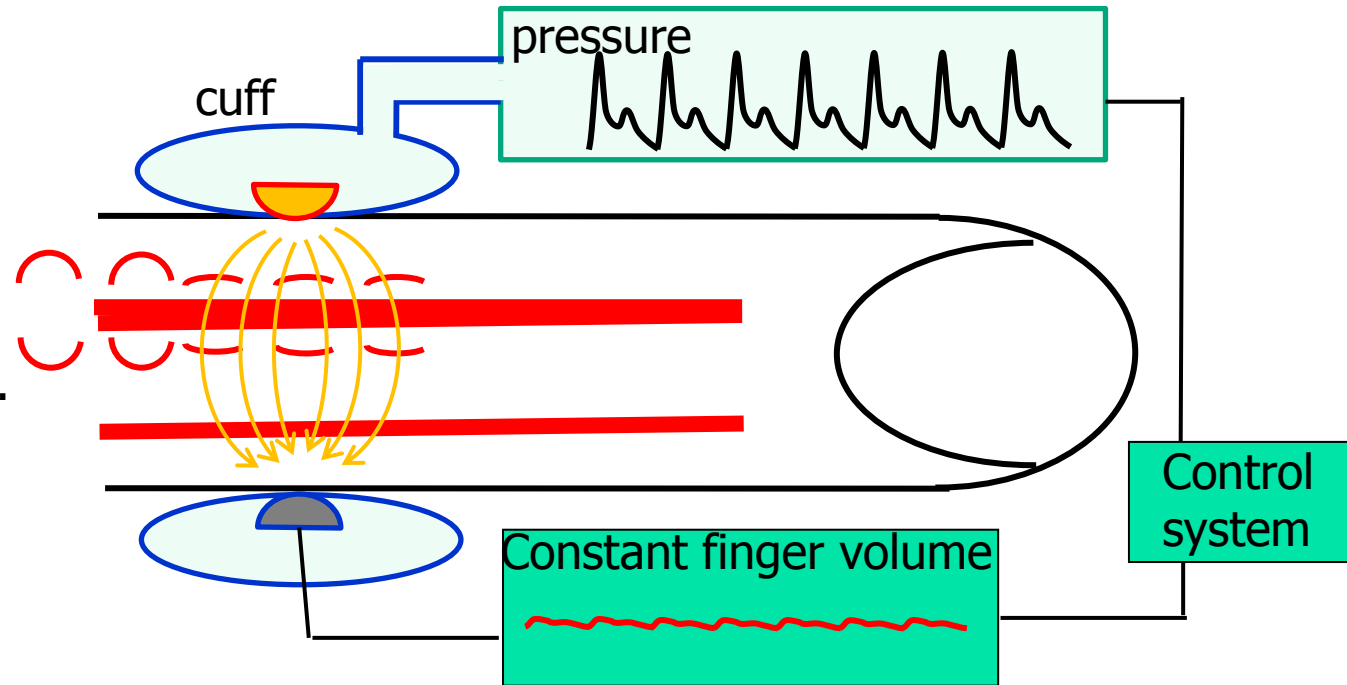
Photoplethysmographic blood pressure measurement

Peňáz's method,
volume-clamp
method



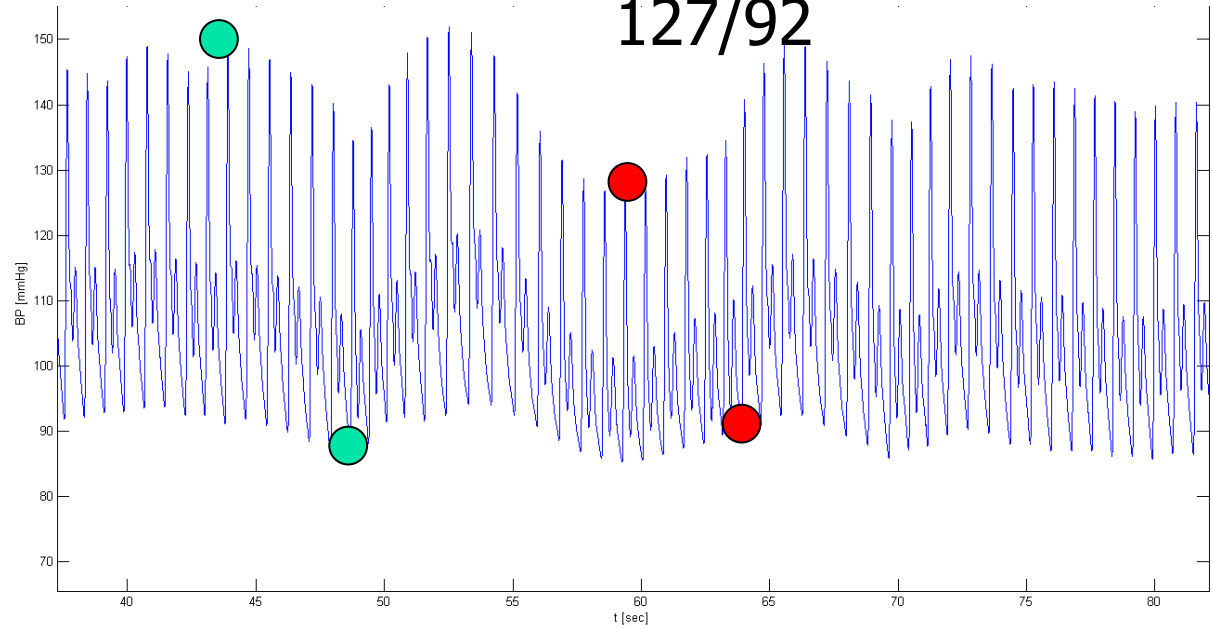
Principle of continual blood pressure measurement

Control system:
 Correction of the pressure in the finger cuff according to the arterial lumen changes. Aim: maintaining of constant arterial lumen through pressure changes in the cuff.

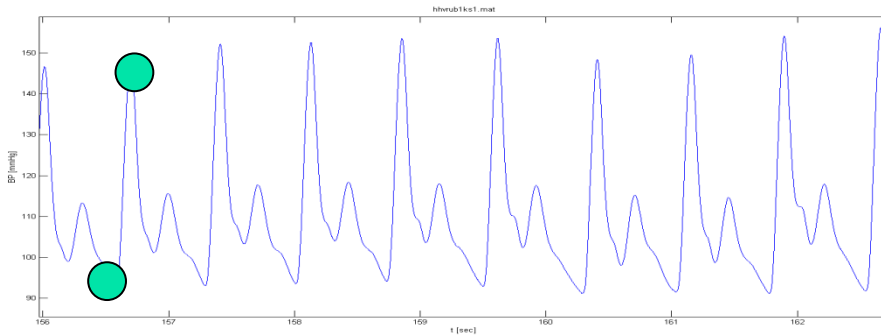


150/90

127/92



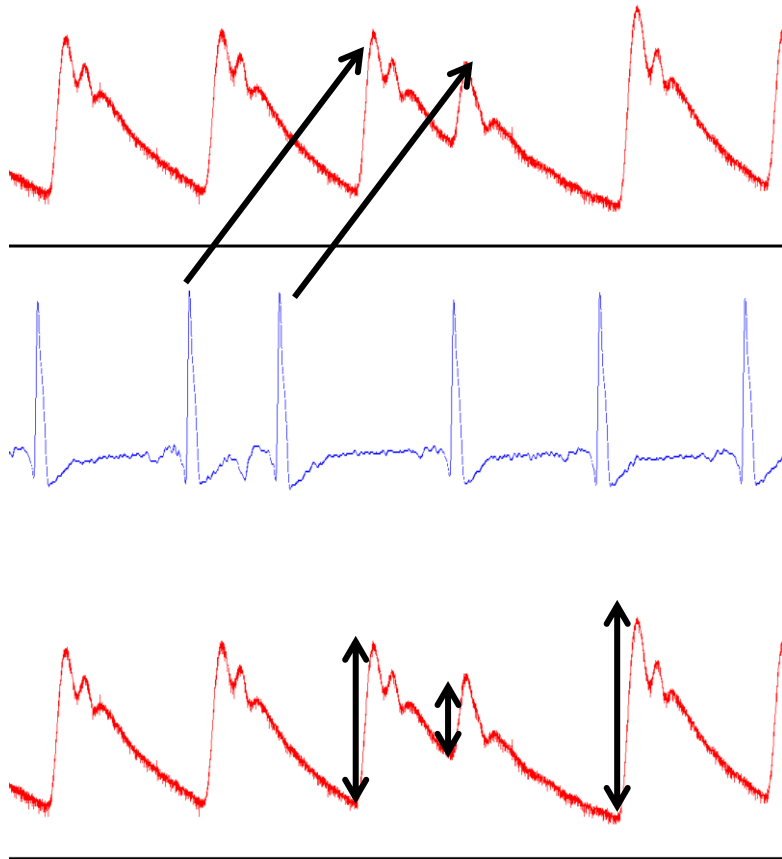
SBP



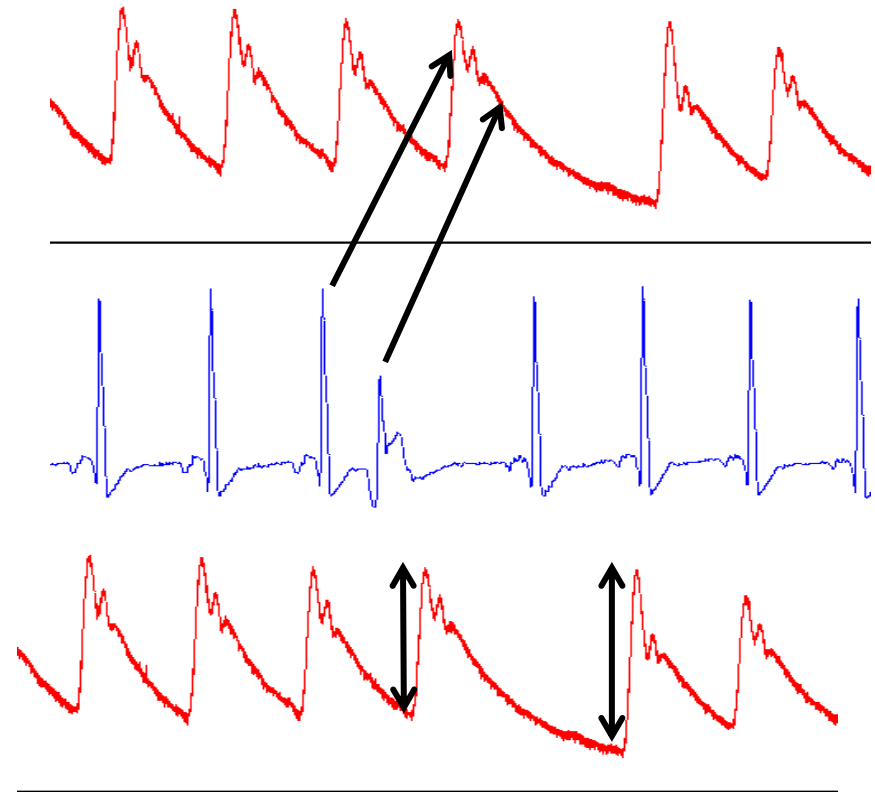
DBP

Extrasystoles

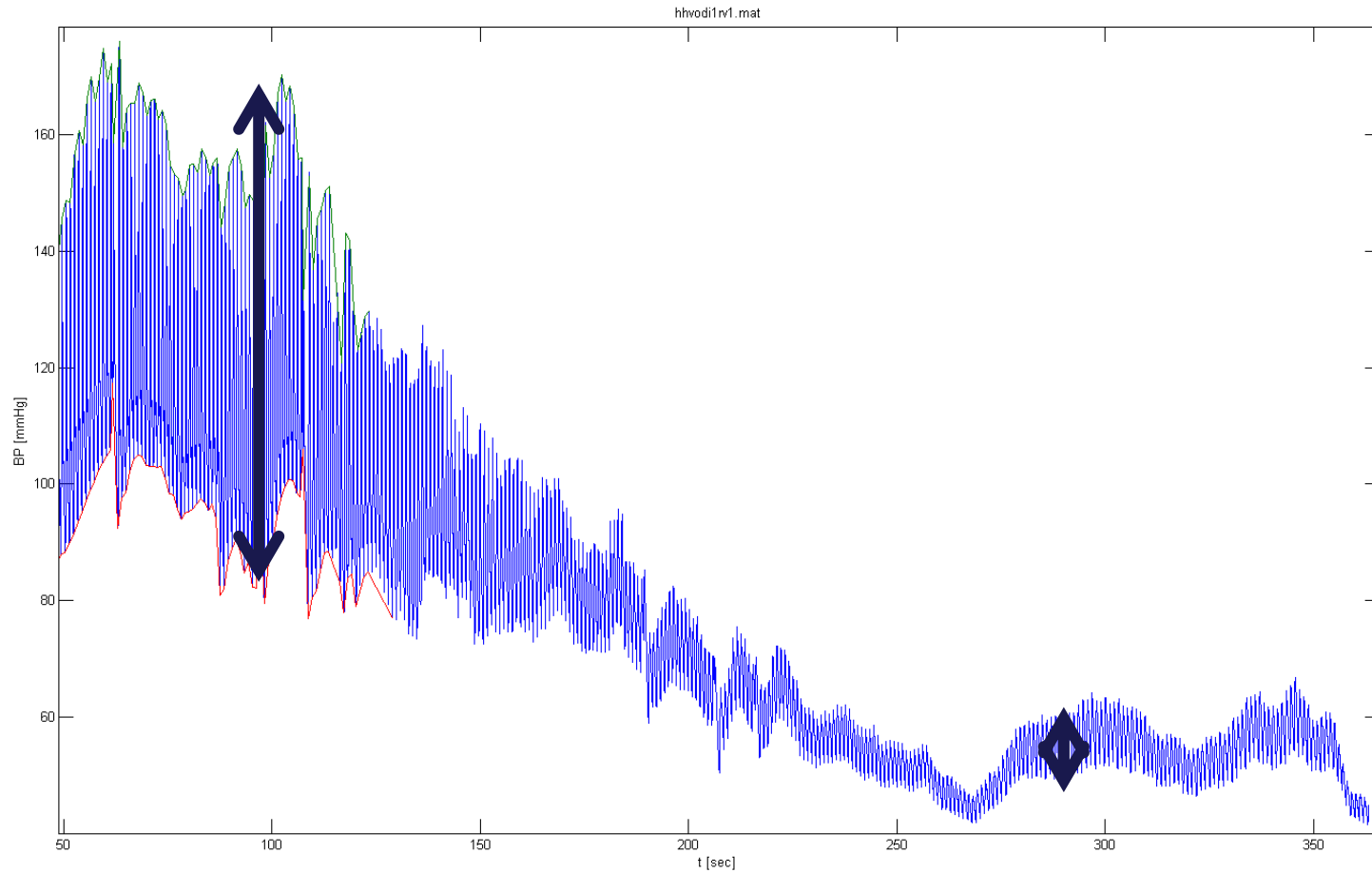
supraventricular



ventricular

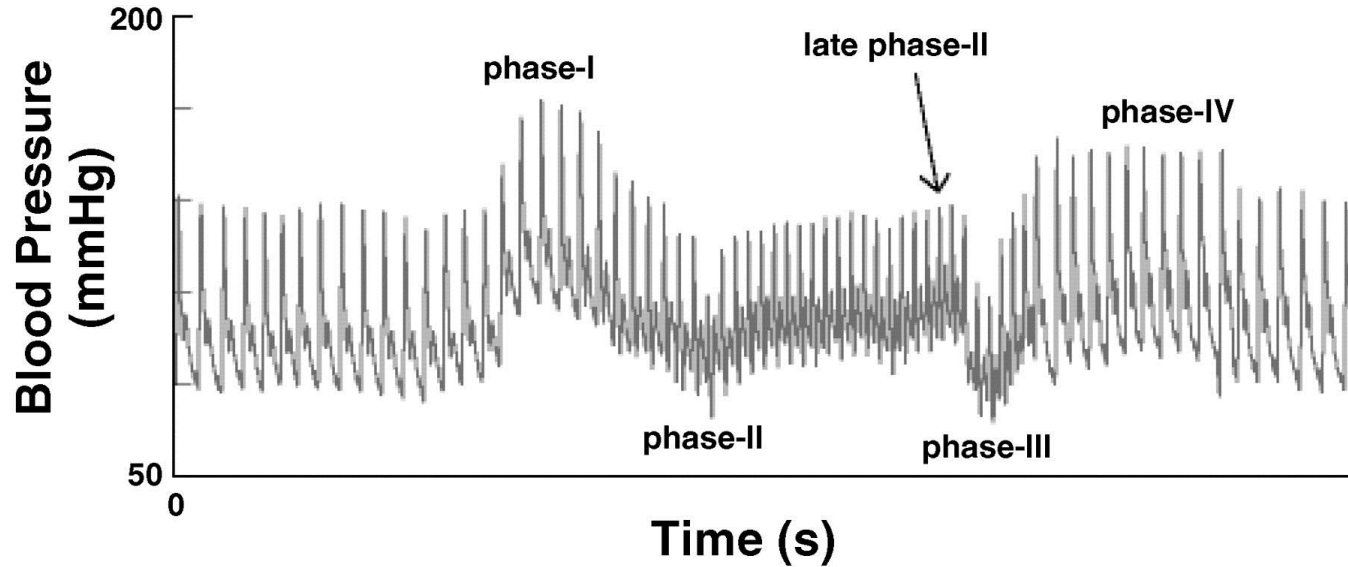


Orthostatic hypotension

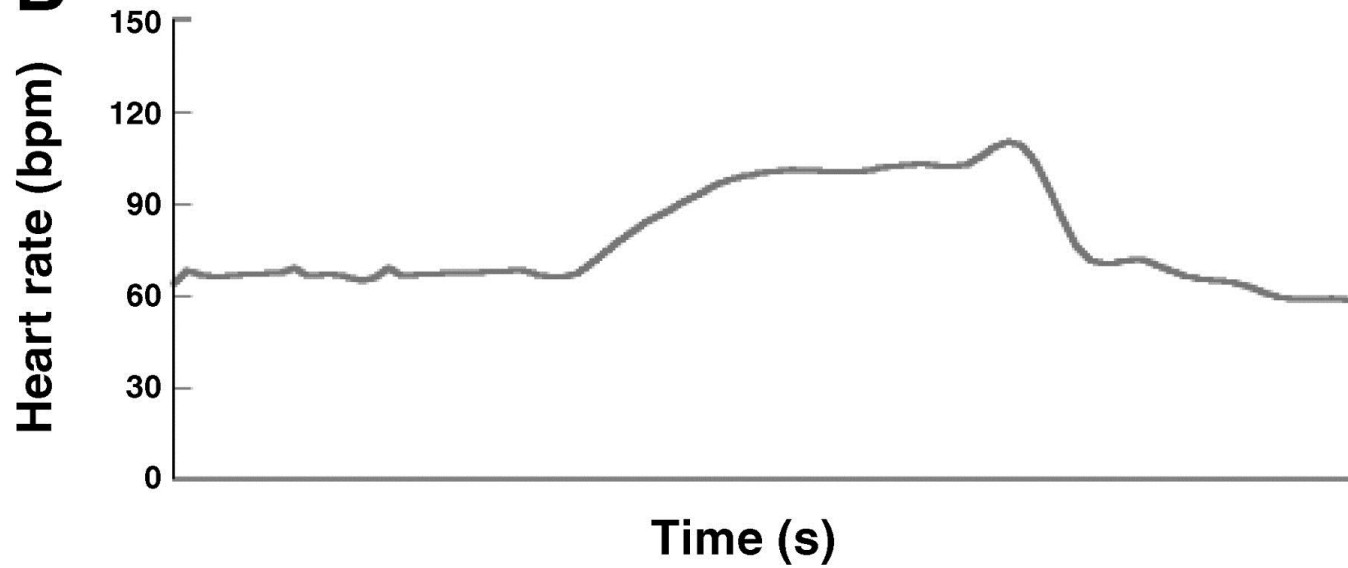


Valsalva manoeuvre

A



B





See videos:

oscilometric method of BP measurement

<https://www.youtube.com/watch?v=Y-NvovSaWTc&t=113s>

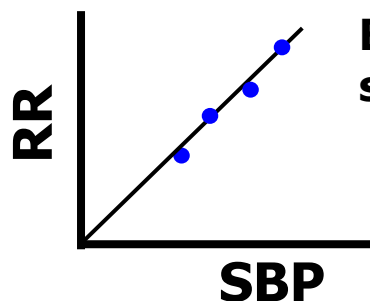
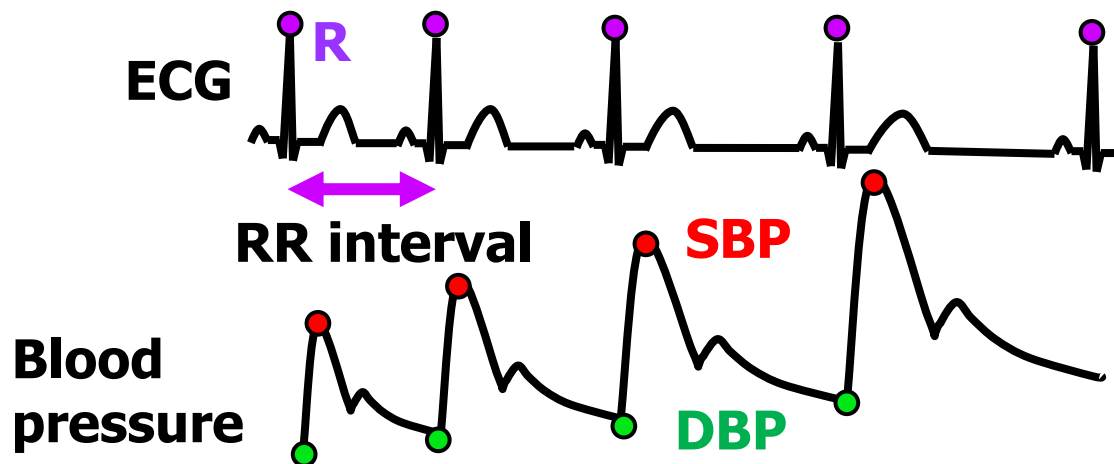
BP changes during smoking

<https://www.youtube.com/watch?v=J5vPJPfNH3k&t=1s>

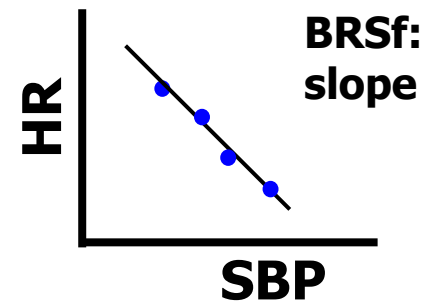
Baroreflex sensitivity, BRS

Evaluation of cardiac baroreflex function through SBP and heart rate (cardiac cycle) changes

BRS: change of cardiac cycle caused by SBP change by 1 mmHg [ms/mmHg]



BRS:
slope



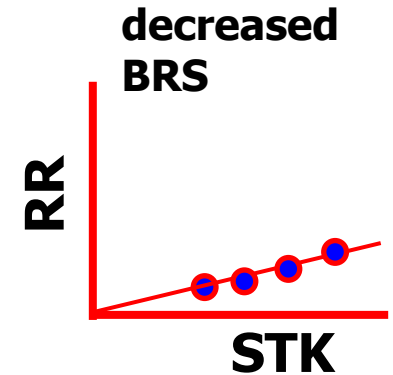
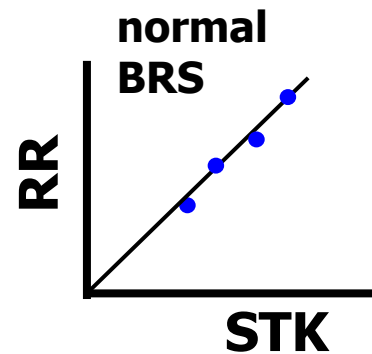
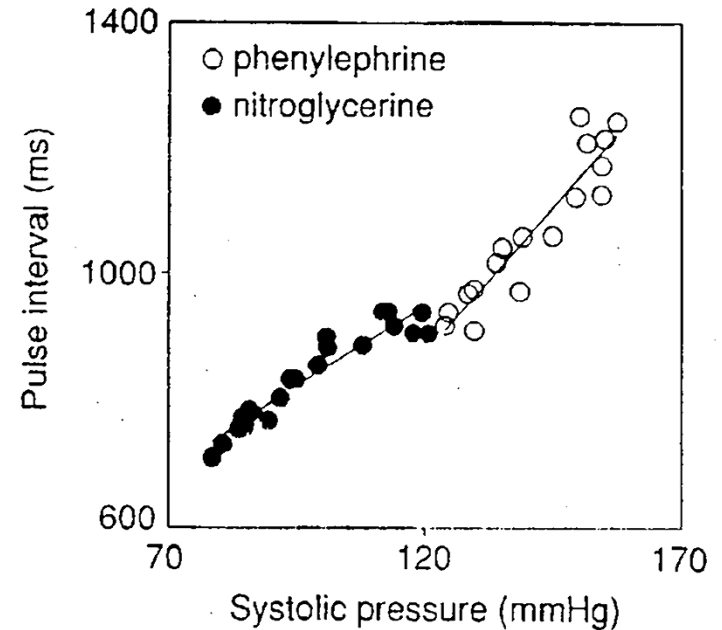
BRSf:
slope

Evaluation of BRS

Standard(oxford) method:

- Application of phenylephrine (vasoconstrictor)

Bolus injections of vasoactive drugs



Decreased BRS

- Physiologically
 - psychic stress – increased sympathetic activity
 - Physical exercise – increased sympathetic activity
 - In old age

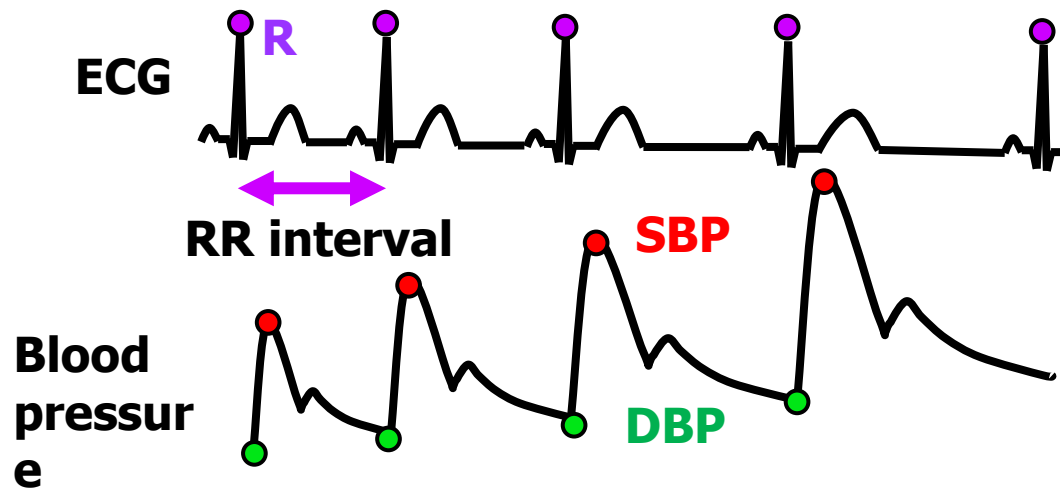
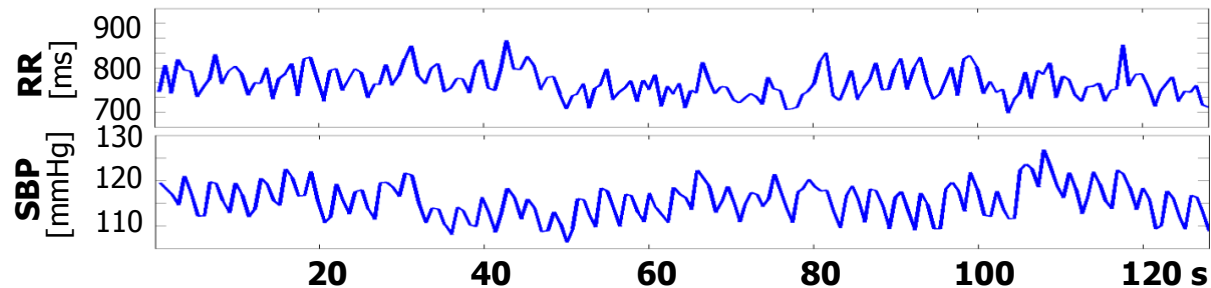
- Pathologically
 - hypertension – decreased baroreceptor sensitivity (atherosclerosis, increased arterial stiffness)
 - diabetes – neuropathy of autonomic nervous system
 - Chronic depression (neurogenic)
 - Heart insufficiency/failure – heart do not response
 - Transplanted heart - denervation
 - Myocardial infarction – heart do not response



Signal: time series

Beat to beat (for example 5 minutes)

- RR interval: 805, 820, 815, 817, 822, 816,..... ms
- Hear rate: 70, 73, 68, 65, 67, 71,..... bpm
- Systolic blood pressure: 115, 117, 120, 116, 121, 119,..... mmHg



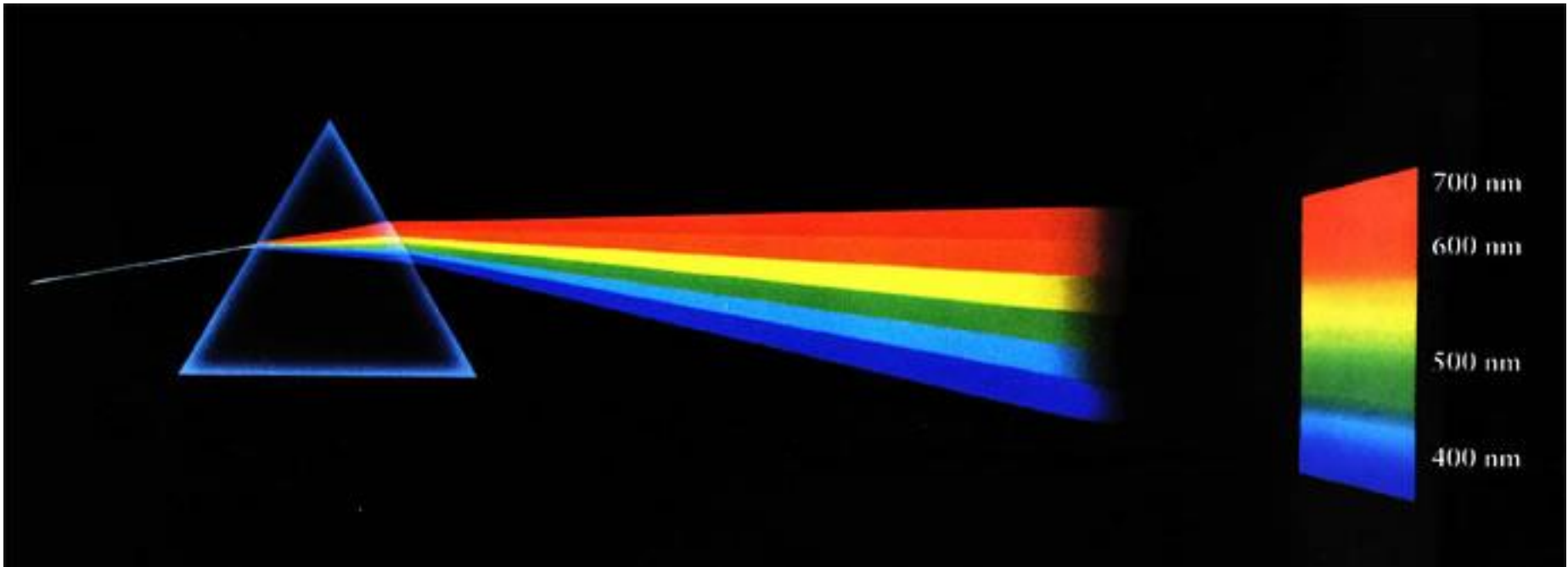
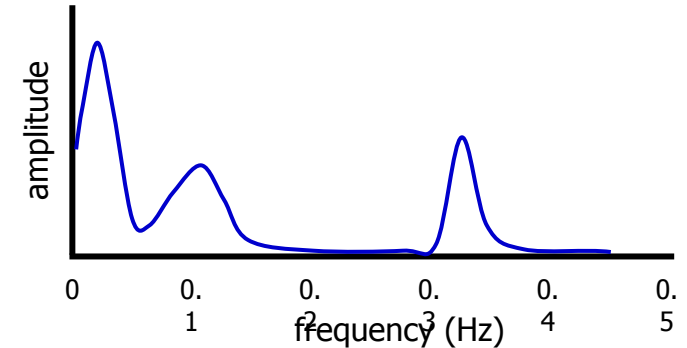
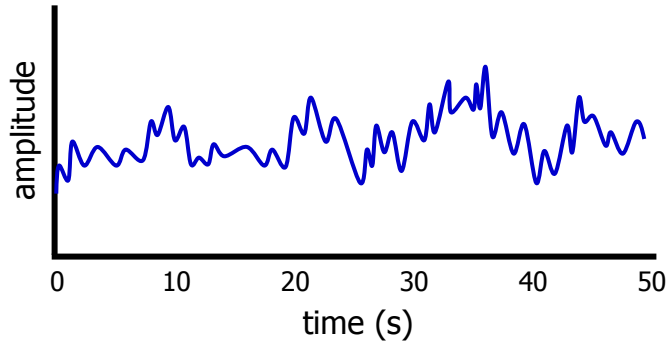
Frequency domain methods – spectral analysis

Time series
Signal in time domain



Spectrum
Signal in frequency domain

Signal is decomposed in individual frequencies



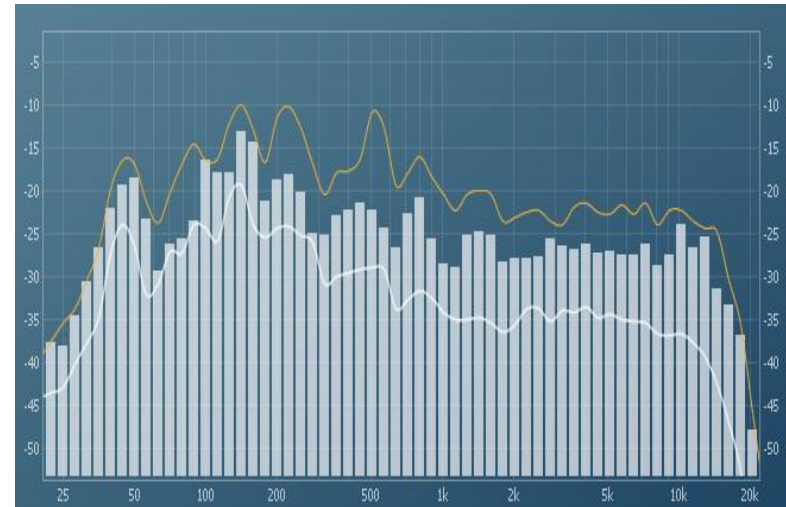
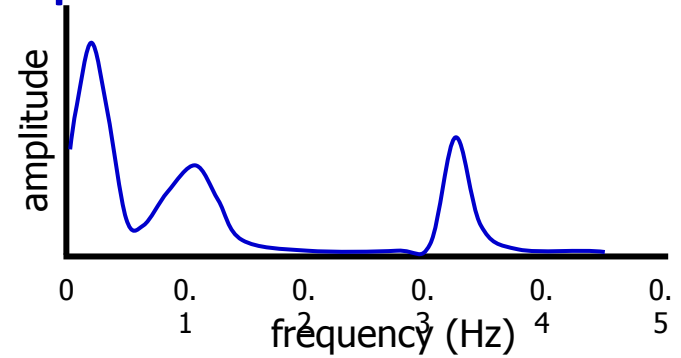
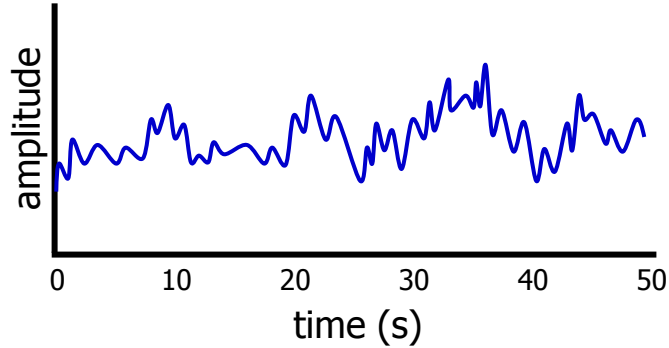
Frequency domain methods – spectral analysis

Time series
Signal in time domain



Spectrum
Signal in frequency domain

Signal is decomposed in individual frequencies



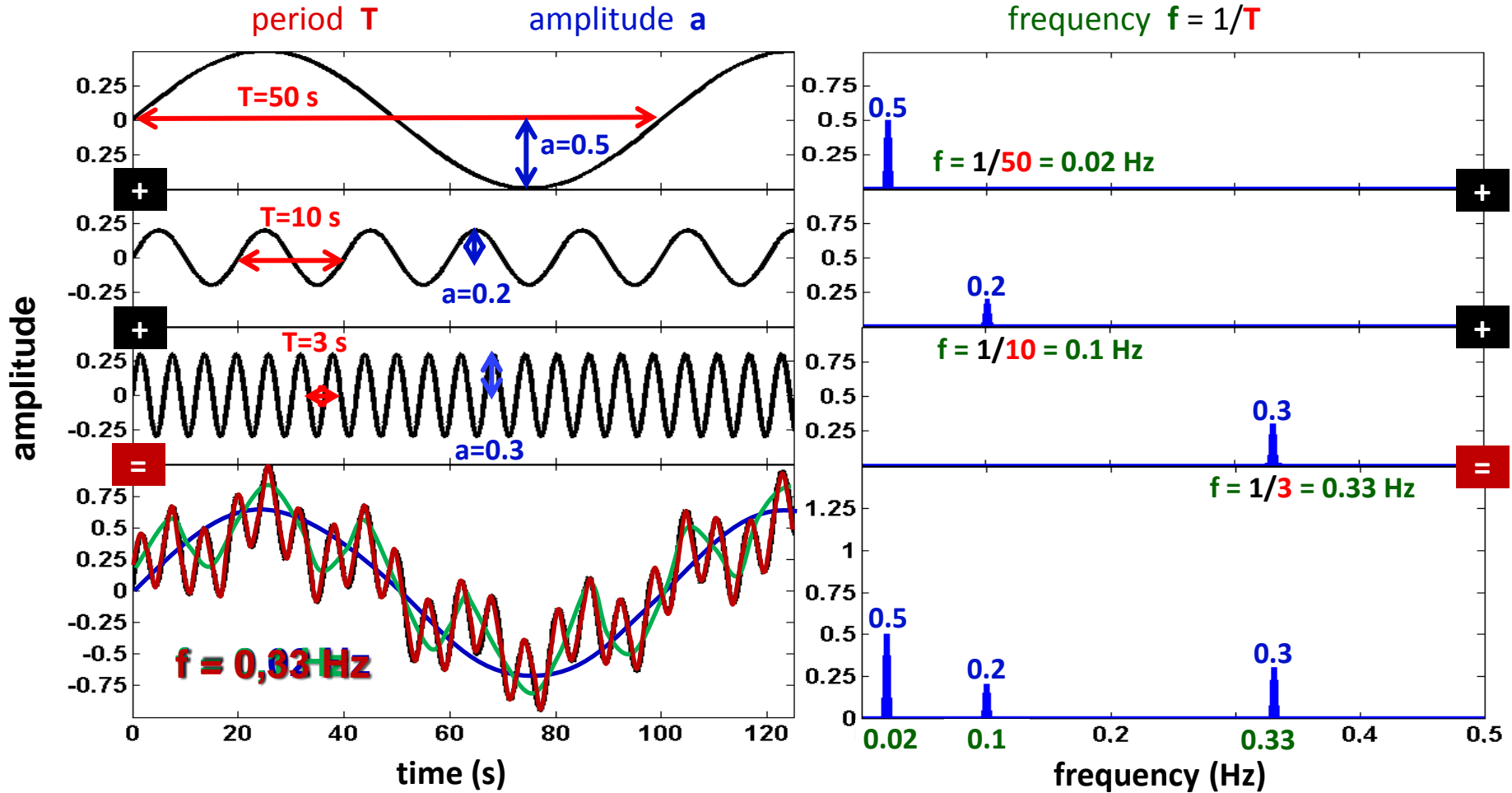


How the spectrum is formed?

Spectrum

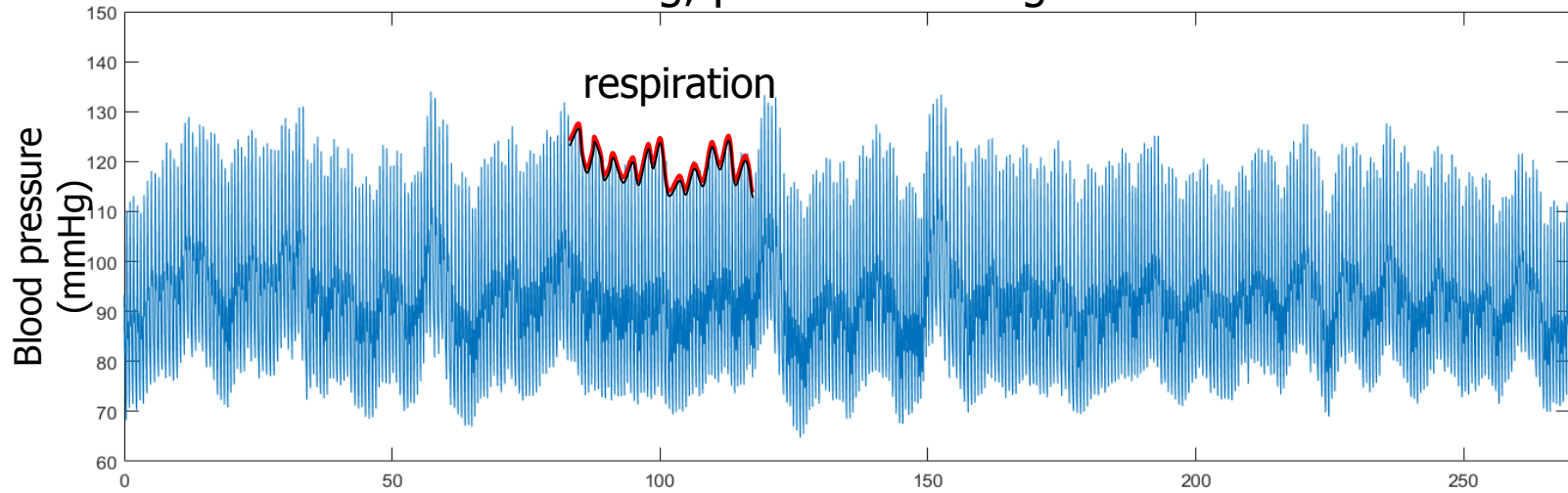
Frequency domain

Time domain

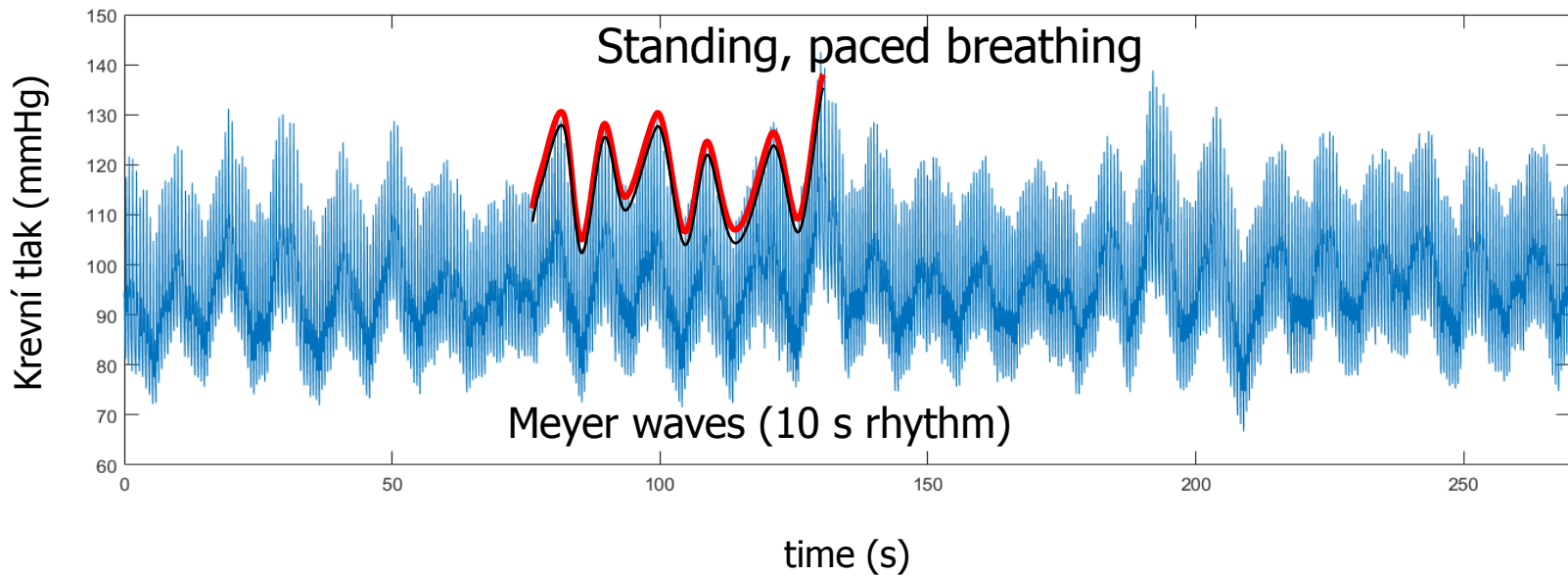


Blood pressure signal (270 s)

Sitting, paced breathing



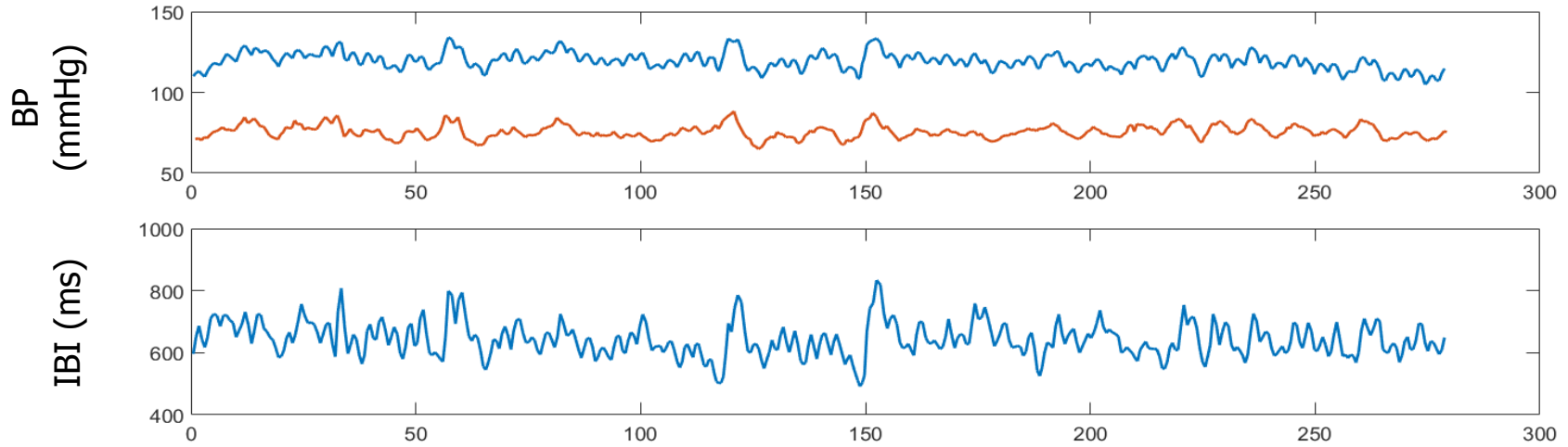
Standing, paced breathing



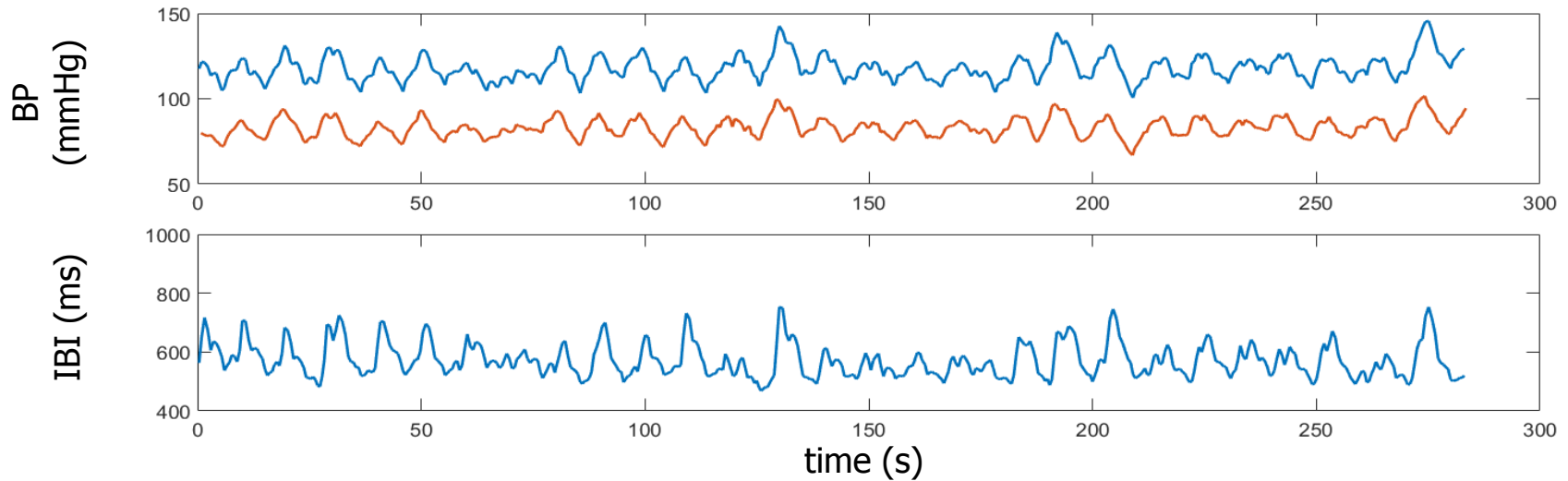


sequentions of SBP, DBP and inter-beat intervals

Sitting, paced breathing

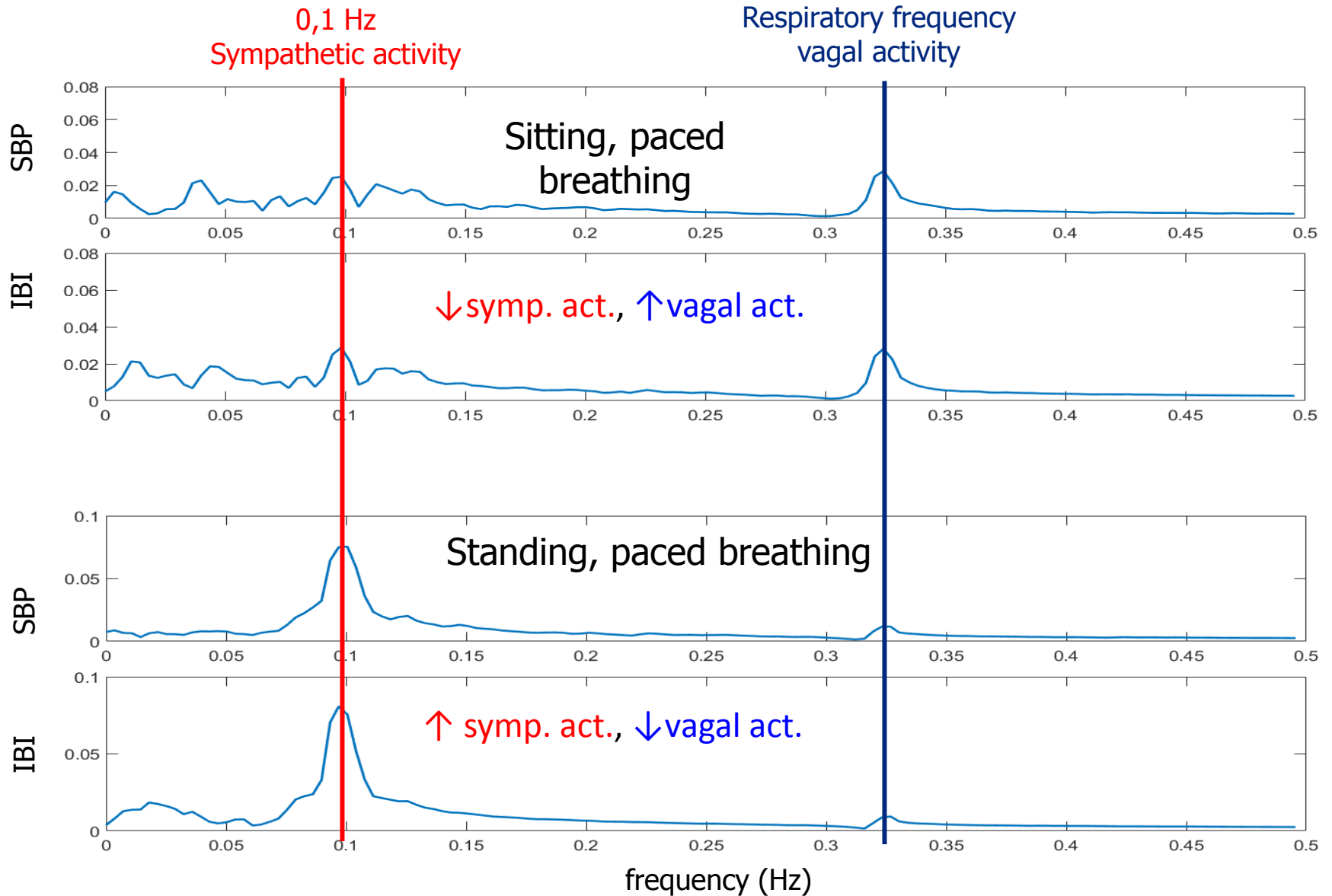


Standing, paced breathing



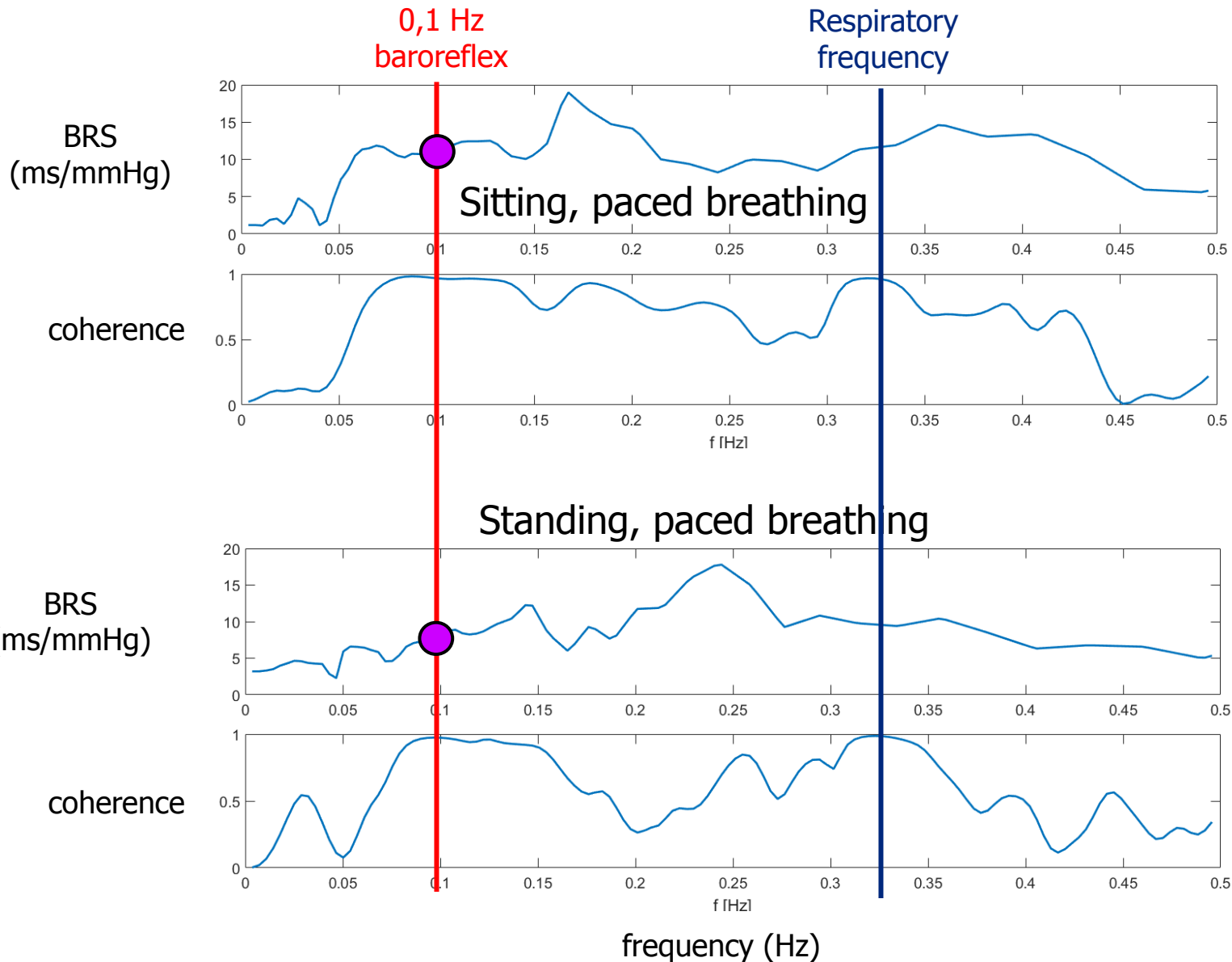


Spectra of SBP and IBI



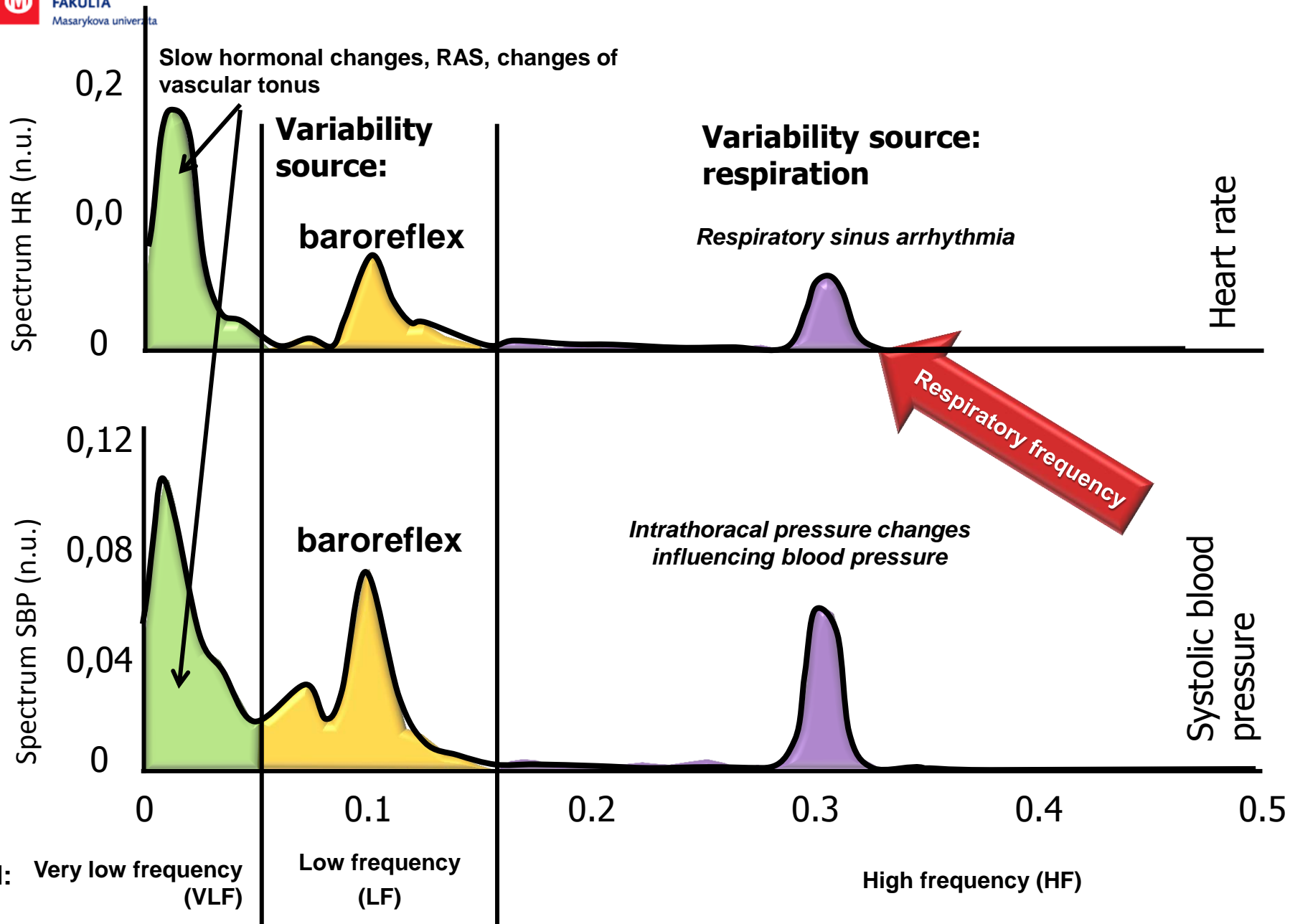
Coherence a BRS

coherence: synchronization between signals (correlation on particular frequency)





Physiological significance – frequency bands





← parasympathetic activity

← Sympathetic activity

Time lag < 1 s

Fast oscillations

Time lag > 6 s
Slow oscillations

baroreflex

Respiratory sinus arrhythmia

Spectrum HR (n.u.)

0,2
0,0
0

Heart rate

0,12
0,08
0,04
0

Spectrum SBP (n.u.)

baroreflex

*Intrathoracic pressure changes
influencing blood pressure*

Systolic blood
pressure

0 0.1 0.2 0.3 0.4 0.5

band: Very low frequency (VLF)

Low frequency (LF)

High frequency (HF)



parasympathetic activity

Sympathetic activity

Time lag < 1 s
fast oscillations

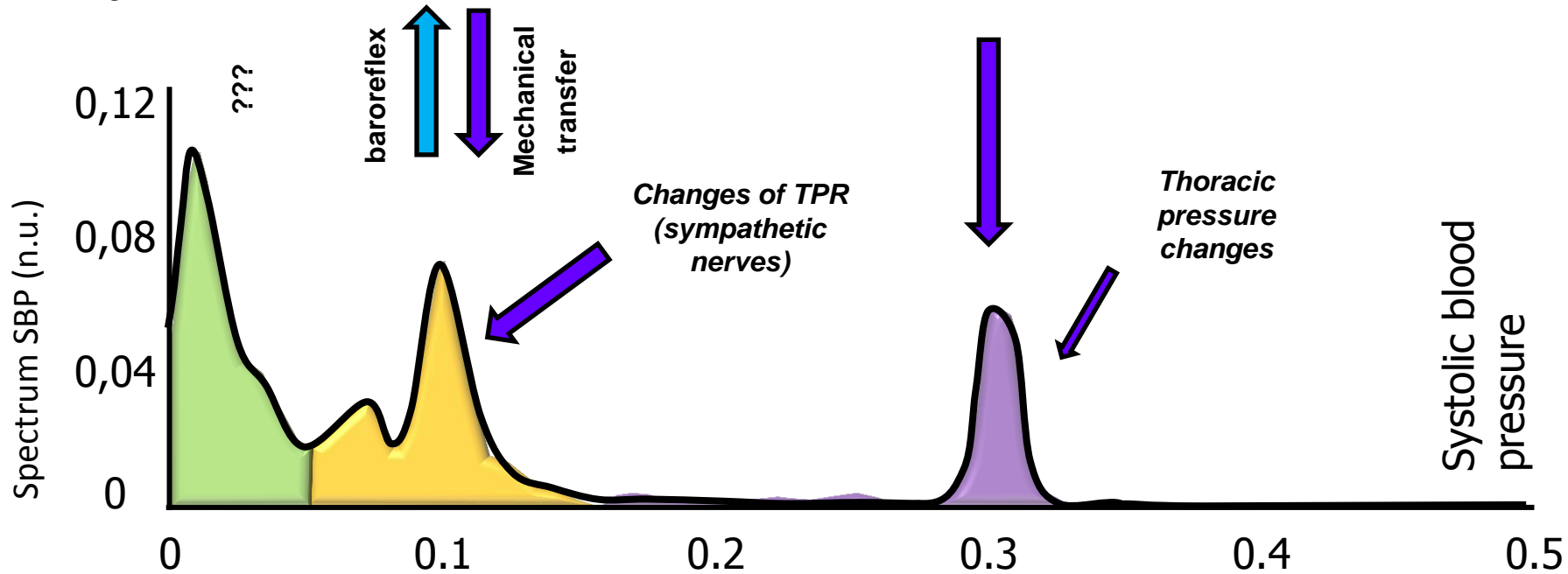
Time lag > 6 s
Slow oscillations

Spectrum HR (n.u.)

0,2
0,0
0

CNS (n. vagus)

Heart rate



Spectrum SBP (n.u.)

0,12
0,08
0,04
0

???

baroreflex

Mechanical transfer

Changes of TPR
(sympathetic nerves)

Thoracic pressure changes

Systolic blood pressure

0

0,1

0,2

0,3

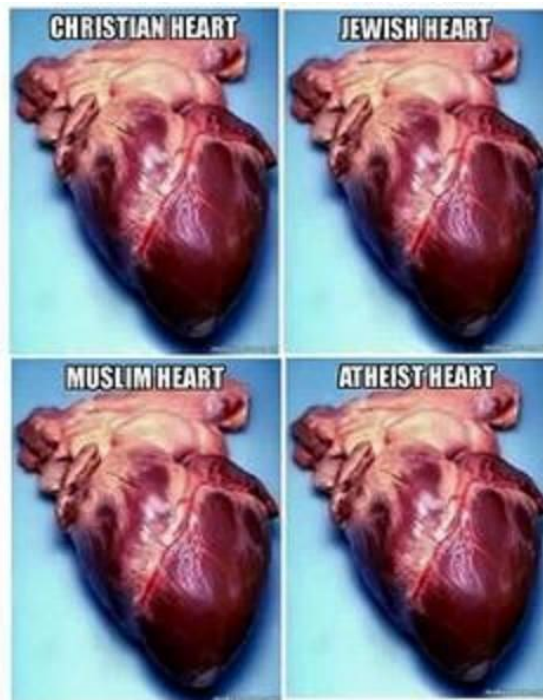
0,4

0,5

band: Very low frequency (VLF)

Low frequency (LF)

High frequency (HF)



Not making a point...
Just showing off my collection