

Non-invasive methods of blood pressure measurement

Arterial blood pressure curve

Blood pressure (BP): pressure on vascular wall (continual variable)

Mean arterial pressure (MAP): mean value of blood pressure in the inter-beat interval (IBI)

- area under MAP = area above MAP
- approximation: $MAP \approx DBP + 1/3 PP$ ($PP = SBP - DBP$)

Definition:

SBP - maximum of BP in the inter-beat interval

DBP – minimum of BP in the inter-beat interval

Attention: Values of SBP and DBP varies in different parts of cardiovascular system

SBP

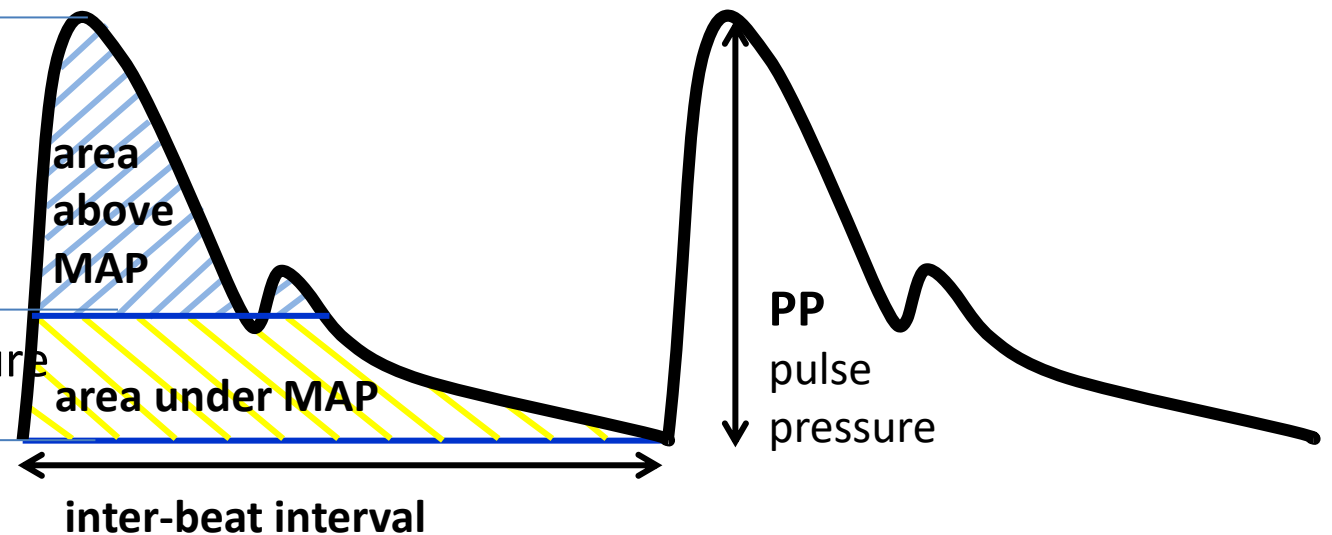
Systolic blood pressure

MAP

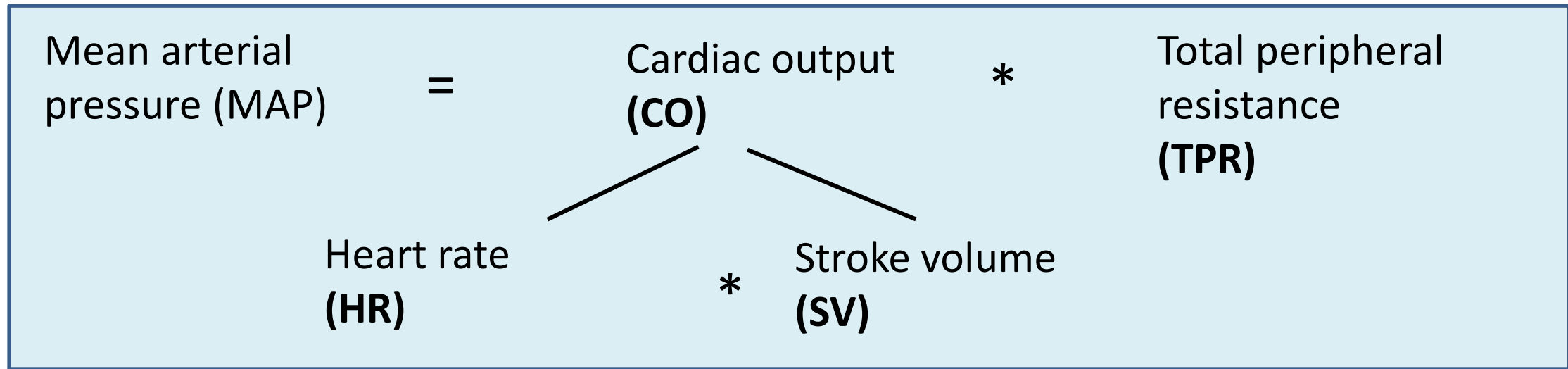
Mean arterial pressure

DBP

Diastolic blood pressure



MAP is a function of cardiac output and total peripheral resistance



- SBP is given mainly by CO
- DBP is given mainly by TPR

Methods of the arterial blood pressure measurement

In practicals:

Palpatory
(sphygmomanometer)



Auscultatory
(sphygmomanometer,
stethoscope)



Oscillometric



Another approaches:

24-hour blood pressure monitoring



Photoplethysmographic (volume-clamp method, Peñáz)



Laminar / turbulent flow, Korotkoff sounds

$$Re = \frac{v \cdot S \cdot \rho}{\eta}$$

laminar flow $Re < 2000$

turbulent flow $Re > 3000$

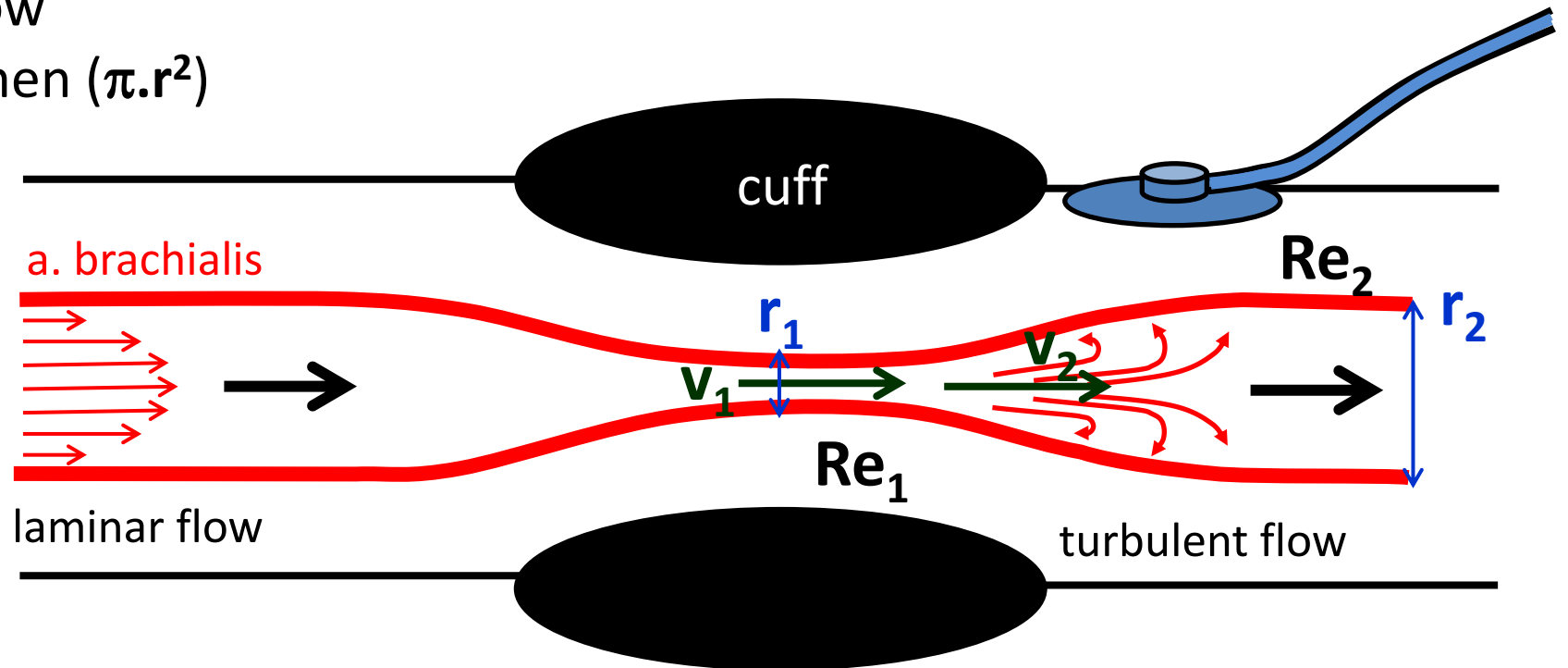
Reynolds number Re: predicts the transition from laminar to turbulent of flow

v: velocity of blood flow

S: area of vascular lumen ($\pi \cdot r^2$)

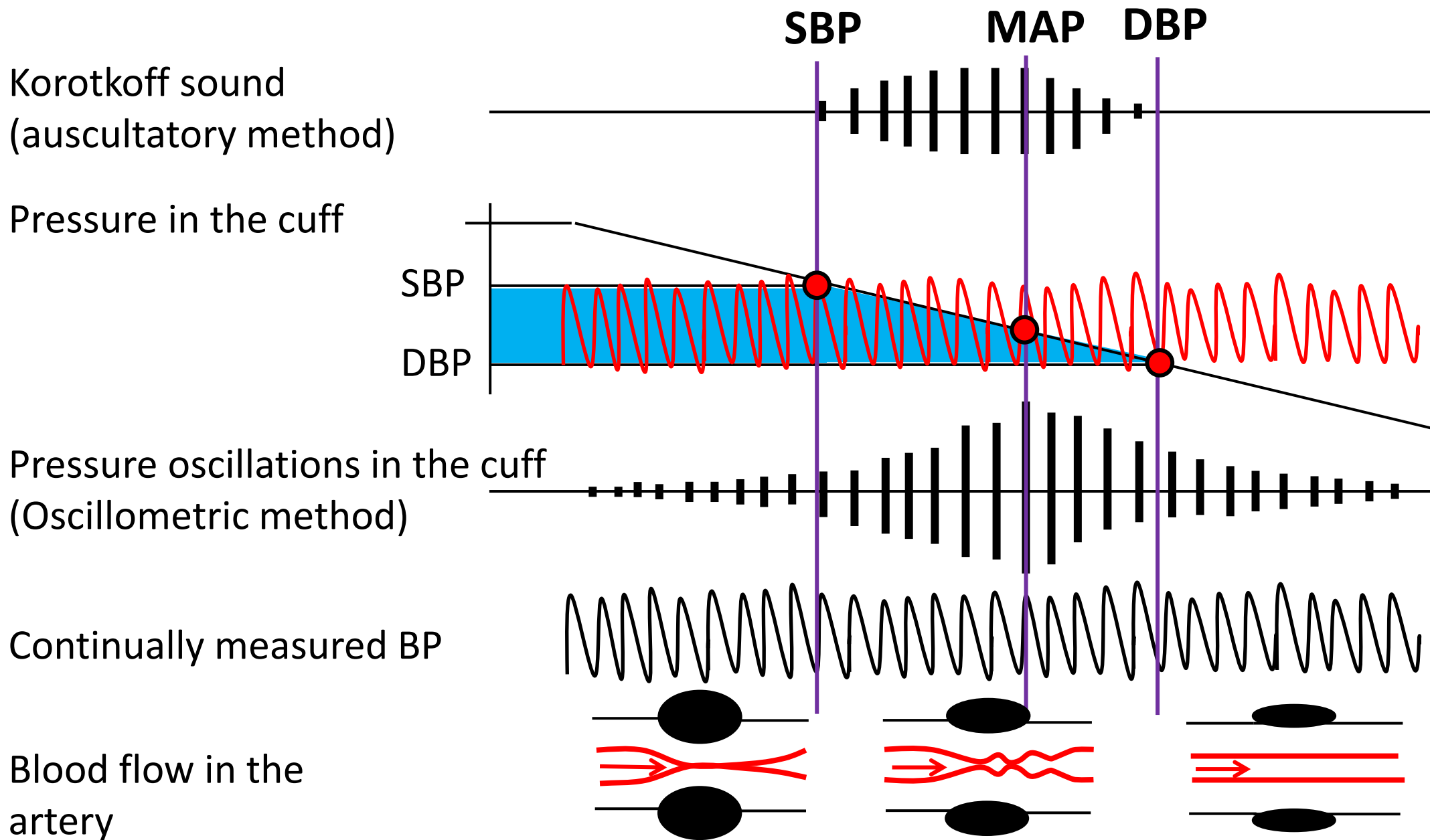
ρ : density of blood

η : viscosity of blood
(higher in anemias)



closely behind narrowing of the artery: $S_1 < S_2$ a $v_1 \approx v_2 \rightarrow Re_1 < Re_2 \rightarrow$ turbulent flow

Principles of blood pressure measurement



During BP measurement following rules must be observed

- Patient is sitting for a few minutes before the measurement.
- Only validated apparatus must be used.
- Perform at least two measurements in the course of 1–2 minutes.
- Use cuff of standard size (12–13 cm width and 35 cm length); however smaller and bigger cuffs must be available for patients with smaller or bigger size of arm, respectively.
- Cuff must be always at the level of heart of examined person.
- Pressure in the cuff must be decreased slowly: 2mmHg/s.

methods	advantages	disadvantages	measured value
auscultatory	<ul style="list-style-type: none"> exact estimation of SBP/DBP easy, it doesn't require electricity 	<ul style="list-style-type: none"> subjective, experience is necessary SBP/DBP from different IBI 	STK a DTK
oscillometric	<ul style="list-style-type: none"> exact estimation of MAP automatic, fast BP can be measured by layman, cheap (home measurement) 	<ul style="list-style-type: none"> DBP/SBP is calculated (dependence on model, influence on shape of pulse wave) SBP/DBP from different IBI false values during arrhythmia 	MAP, sometimes SBP (it depends on device)
24 – hour BP monitoring	<ul style="list-style-type: none"> BP record from whole day diagnosis of white-coat hypertension 	<ul style="list-style-type: none"> disruptive influence of measuring (during sleeping) SBP/DBP from different IBI 	BP is measured each 15 – 60 min
photoplethysmographic (Peňáz)	<ul style="list-style-type: none"> continual BP record possibility of beat-to-beat SBP/DBP calculation (BP variability analysis) 	<ul style="list-style-type: none"> measuring on the finger, brachial BP recalculating expensive device 	continual BP record