

# Cardiovascular Consequences of Positive Pressure Ventilation during Severe Hemorrhage

Joshua Lampe
Acting Vice President
Clinical and Scientific Affairs

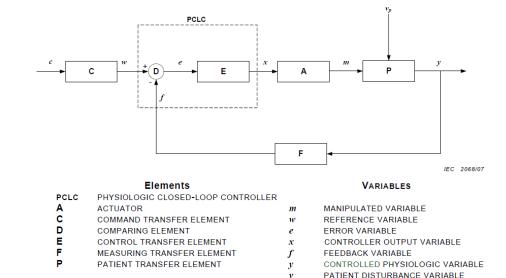
## **Project Motivation: PCLC Ventilation**

Noninferiority Study: FIO<sub>2</sub> PCLC vs. Manual Control

- Prospective, parallel trial design
- N = 210 randomized; N = 195 completed the study
- Study duration: 12 hours

#### **Endpoints:**

- Effectiveness: PCLC is not inferior compared to manual control
  - Relative duration 92%  $\leq$  SpO<sub>2</sub>  $\leq$  96% or SpO<sub>2</sub>  $\geq$  92% when FIO<sub>2</sub> = 21%
    - 0.63 (0.11) (PCLC) vs. 0.54 (0.12) (Manual)
- Safety: Proportion of Patient with  $SpO_2 \le 88\%$  for any duration
  - 30% (PCLC) vs. 48% (Manual)
  - Risk Difference: -18% (-31%,-5%) (95% CI)
- The study identified no additional risks for FIO<sub>2</sub> PCLC
  - No Serious Adverse Events in PCLC group



From IEC 60601-1-10 2020

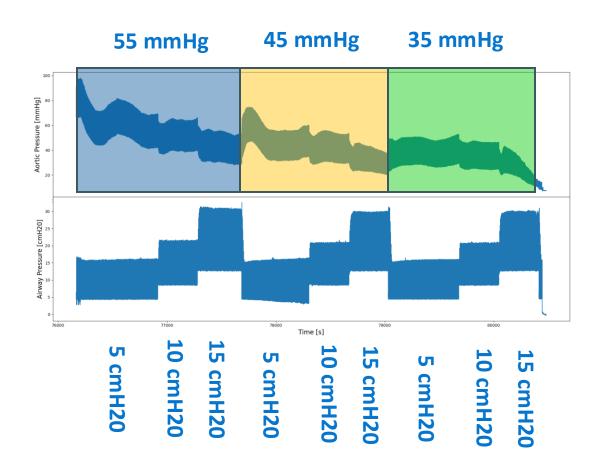
COMMAND VARIABLE

### **Animal Protocol**

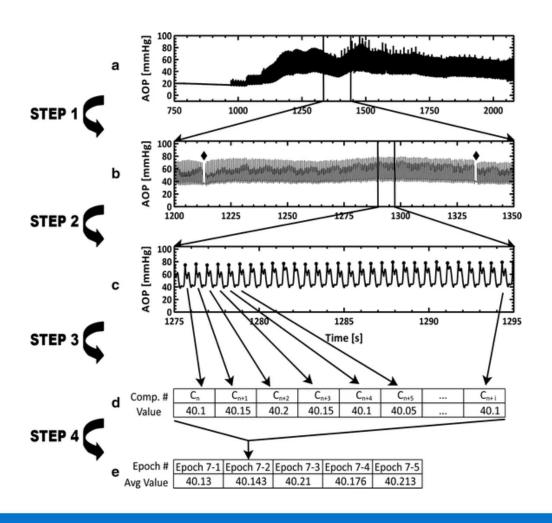
4 female swine (~30 kg)

### **Surgical Prep**

- CRI Ketamine/Midazolam
- Invasive Blood Pressures
- Invasive Blood Flows
- Hans Rudolph
- Bleed managed manually

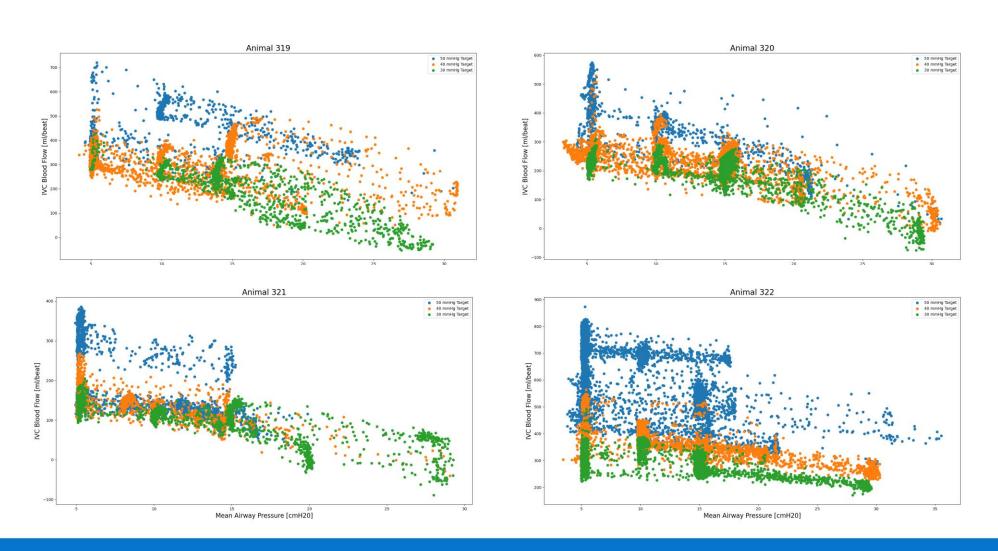


## **Data Analysis**



- Physiological parameters were calculated on a per compression basis using python scripts
- Statistics were calculated using Stata IC 15

### **IVC Blood Flows**

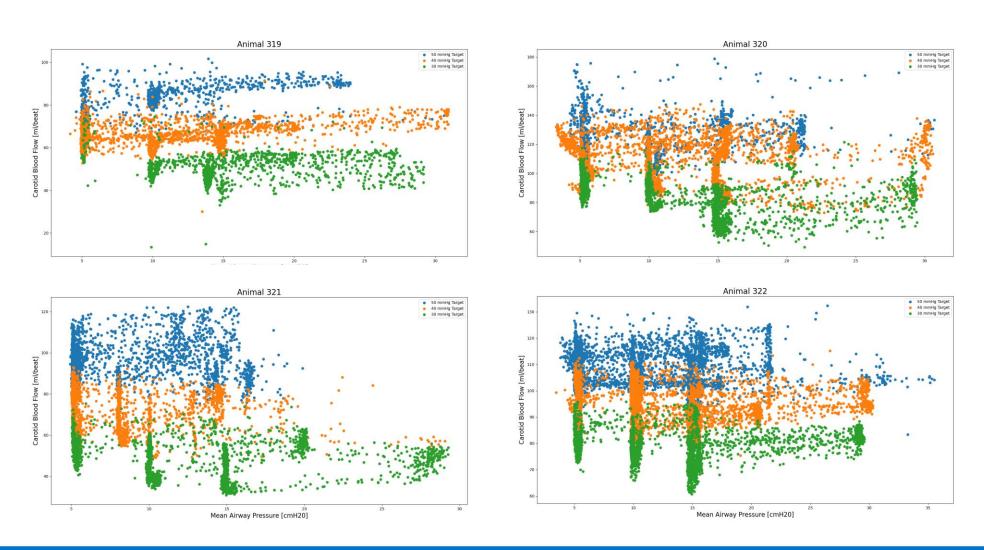


55 mmHg target

45 mmHg target

35 mmHg target

### **Carotid Blood Flows**



55 mmHg target

45 mmHg target

35 mmHg target

## **Linear Regression**

$$Flow_x = P_{Airway} + P_{Aorta} + Animal$$

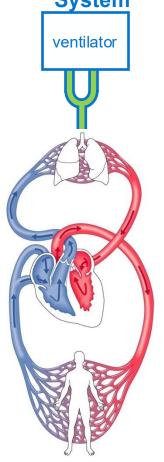
Carotid Flow	Coef	Std Err	95% CI	Р
Mean Airway Pressure	0.068	.01	(0.040,0.09)	<0.05
Mean Aortic Pressure	1.78	.006	(1.77, 1.79)	<0.05
Animal	1.99	.07	(1.8, 2.1)	<0.05
const	8.4	.4	(7.6, 9.2)	<0.05

IVC Flow	Coef	Std Err	95% CI	Р
Mean Airway Pressure	-5.1	0.1	(-5.27, -4.8)	<0.05
Mean Aortic Pressure	13.2	0.05	(13.1, 13.3)	<0.05
Animal	39.9	0.6	(38, 41)	<0.05
const	-270	3.2	(7.6, 9.2)	<0.05

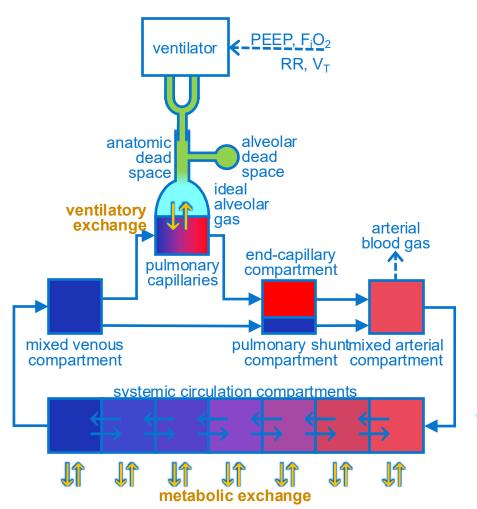
# Changes in Airway Pressure impact venous return but not blood supply to the brain

## **Cardiopulmonary Model**

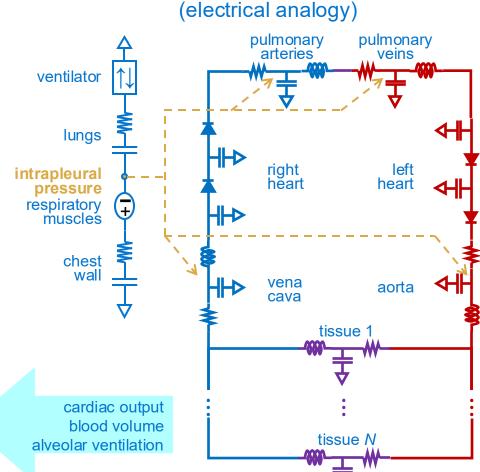
### A. Patient-Ventilator System



#### **B.** Gas Exchange Model



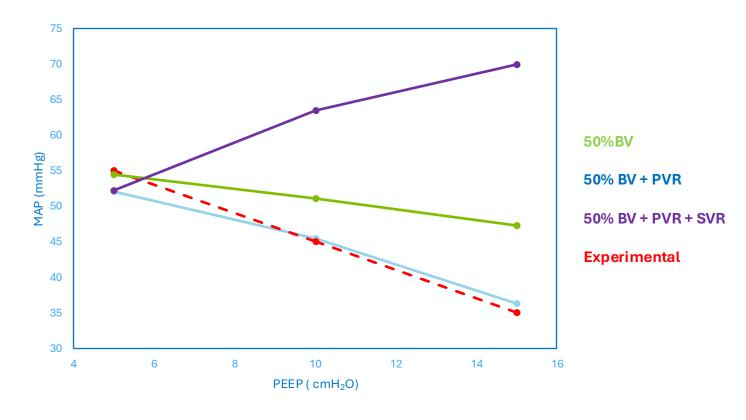
#### C. Pneumatic & Hydraulic Circuit Models



Mihiret Redhi, Jacob Herrmann, David Kaczka Ulowa

# **Exploring Ventilation during Hemorrhage using modeling**

- Animals were bled to a MAP of 55 mmHg and provided mechanical ventilation at PEEP values of 5, 10, or 15 cmH<sub>2</sub>O
- Simulations included
  - 50% blood loss
  - 50% blood loss and increased pulmonary vascular resistance
  - 50% blood loss and increased pulmonary and systemic vascular resistance



## Remaining Questions

- Validating the observation from the computational model that PEEP changes required changes in pulmonary vascular resistance to replicate our experimental results
- Understanding how to detect and navigate the differential hemodynamic changes caused by PPV
- How do these observations relate to patient outcomes

## Thank you

QUESTIONS?

