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**A900**

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9:00 AM - 11:00 AM

Room Hall E2-Area G,

**Modeling the Rate of Decrease in Brain Oxygen Saturation during DHCA with Cerebral Oximetry**

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**Introduction:** Cerebral Oximetry is a non-invasive optically based technology that measures cerebral tissue oxygen saturation (SctO<sub>2</sub>). The FORE-SIGHT® (CASMED, Branford CT USA) cerebral oximeter measures absolute SctO<sub>2</sub> values without the need for a pre-induction baseline. We characterized the rate of SctO<sub>2</sub> decrease during deep hypothermic circulatory arrest (DHCA) at 12-15°C.

**Methods:** With IRB approval and informed consent, patients undergoing elective thoracic aortic surgery with deep hypothermic circulatory arrest (DHCA) were monitored intraoperatively using the FORE-SIGHT monitor. Two sensors were placed on the subject's forehead bilaterally for continuous monitoring of SctO<sub>2</sub>. The subject is in the supine position during surgery. There was no alteration in surgical technique or routine clinical monitoring.

**Results:** To date, 30 subjects have been monitored. Of the 30 cases, 26 cases demonstrated a typical pattern of SctO<sub>2</sub> throughout the procedure. To determine the rate of SctO<sub>2</sub> decline during DHCA, SctO<sub>2</sub> values were collected from the following events: DHCA Onset (n=26), +5 minutes post DHCA Onset (n=25), +10 minutes (n=25), +15 minutes (n=25), +20 minutes (n=20), +25 minutes (n=11), & +30 minutes (n=7). For each category, the SctO<sub>2</sub> mean and SD was determined. See Figure 1. Using non-linear regression, we fitted the data to a two compartment model because SctO<sub>2</sub> decreased more rapidly in the first 10 minutes. From this model, the second term appeared linear, so we fitted the data using a simplified two compartment model:  $SctO_2[t] = 73.81 + 10.53 \cdot \exp(-0.238 \cdot t) - 0.51 \cdot t$

For trending SctO<sub>2</sub> (SctO<sub>2</sub>=0 at DHCA onset) or for any SctO<sub>2</sub> value at t=0, this model becomes:  $SctO_2[t] = SctO_2[t_0] - 10.53 + 10.53 \cdot \exp(-0.238 \cdot t) - 0.51 \cdot t$

As a secondary analysis, a linear model closely fitted the data for +10 minutes after onset of DHCA. From the linear regression equation slope (Figure 1), SctO<sub>2</sub> decreased at a mean rate of 0.55% per minute after 10 minutes. This compared well to the simplified two compartment model, where the  $-0.51 \cdot t$  term approximated the decrease in SctO<sub>2</sub> of 0.51% per minute after 10 minutes.

**Discussion:** At the onset of DHCA cerebral blood flow is arrested. A gravitational redistribution of blood volume occurs resulting in a pooling of blood into the occipital regions of the brain. Subsequently, the frontal lobes, which represent the regions being interrogated by the oximeter, become blood volume depleted. This in addition to ongoing cerebral metabolism explains the rapid decline of SctO<sub>2</sub> during the first 10 minutes. Once a new steady state is reached, cerebral metabolism becomes the sole determinant of the linear regression slope (Figure 1). From our data, we show that a simplified two compartment model fits the data whereas the first term  $\{10.53 \cdot \exp(-0.238 \cdot t)\}$  characterizes cerebral metabolism and the redistribution of blood oxygenation by blood volume redistribution from DHCA, and the second term  $\{-0.51 \cdot t\}$  represents elimination (metabolism) of oxygen in cerebral tissue.[figure1]

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**Figure 1**

**Rate of Decrease in SctO2 during DHCA (26 subjects)**

