

# Hands Free Carotid Doppler Correlates with Cerebral Blood Flow in a Pediatric Porcine Model of Asphyxia Associated Cardiac Arrest

## Background

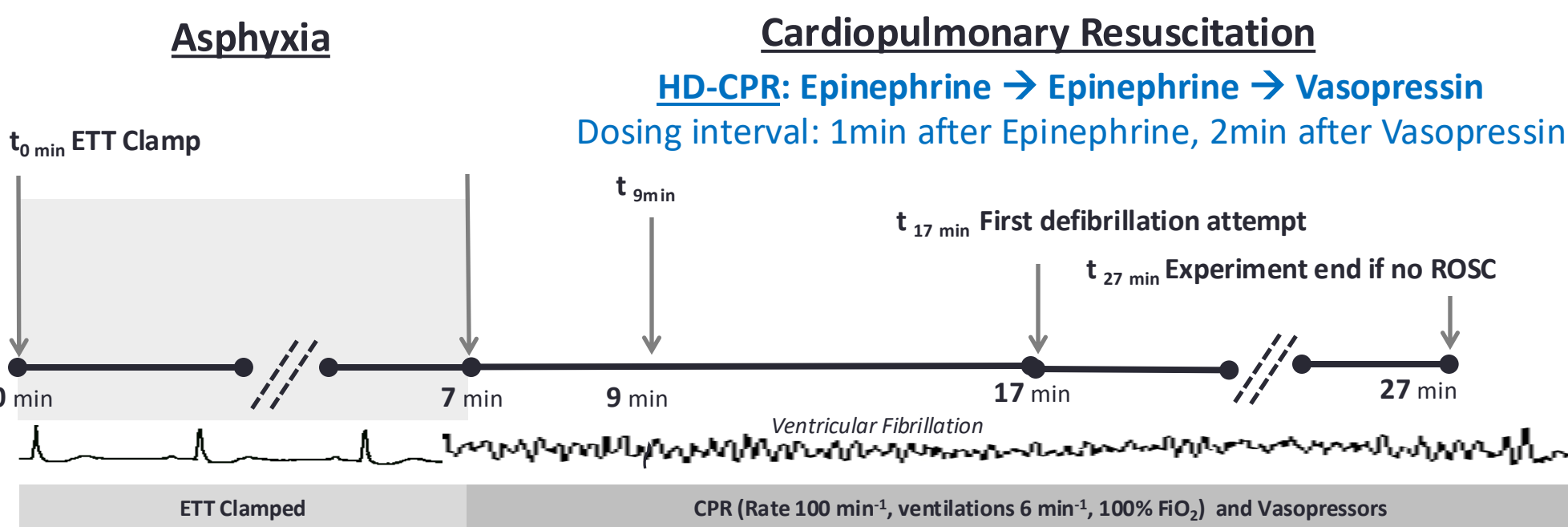
- Preservation of Cerebral Blood Flow (CBF) during Cardiac Arrest (CA) is critical for neurologically intact survival
- Carotid Doppler time averaged velocity (TAV) may be an effective, non-invasive surrogate for CBF during CA

## Hypothesis and Methods

**Hypothesis:** Carotid Doppler ultrasound (RescueDoppler; RD) will be correlated with invasive CBF (laser Doppler flowmetry) in a swine model of asphyxia associated pediatric CA

### Pediatric Swine Model of Asphyxia-Associated Cardiac Arrest:

- 4-week-old piglets underwent asphyxia (7 minutes) and VF arrest
- HD-CPR (goal SBP 90, coronary pressure 20) for 10-20 minutes
- RD probe over left common carotid
- Laser doppler through right anterior burr hole

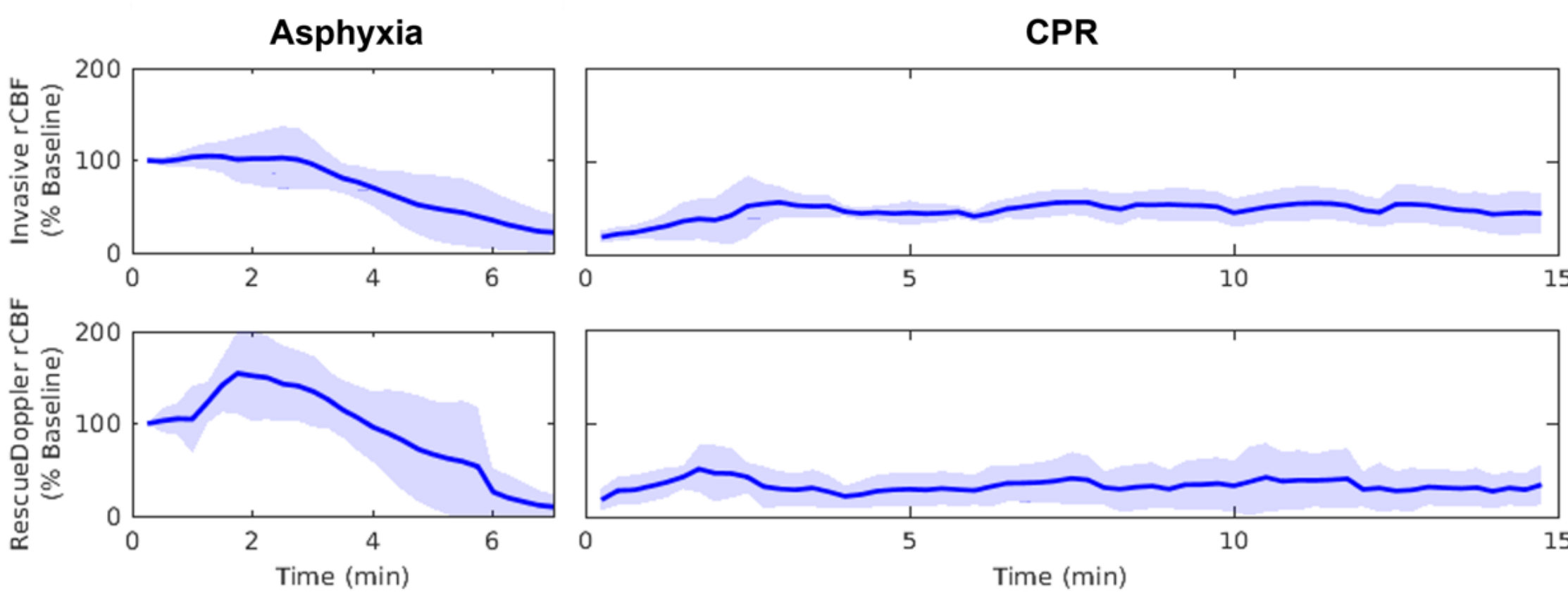


## Statistical Analysis

- 15-second block averages during asphyxia (n=8) and CPR (n=6)
- Repeated measures correlation (association for paired measures assessed multiple times; rmcrr; 95% confidence interval)
- Linear mixed effects (quantitative relationship between devices; accounts for non-independence, Slope mean ± standard error)

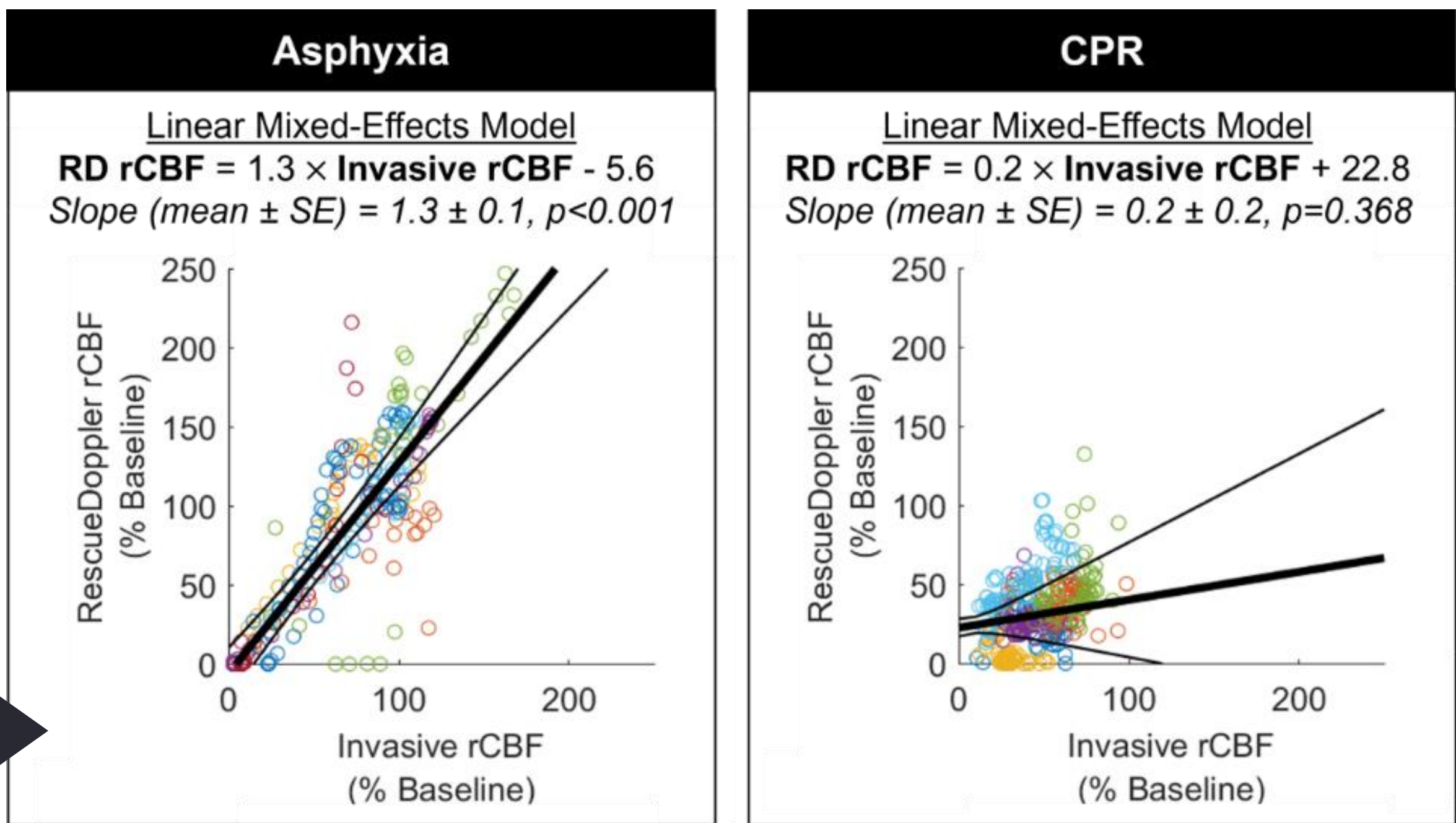
## Results

### Mean (SD) of relative invasive CBF and relative RescueDoppler CBF during asphyxia and CPR.



	Repeated Measures Correlation	Linear Mixed Effects Modeling
Asphyxia	0.84 (0.8, 0.87) p<0.001	1.3 ± 0.1% change in RD TAV per 1% change in invasive CBF (p<0.001)
CPR	0.31(0.22, 0.4) p<0.001	0.2±0.2% (p=0.368)

### Linear Mixed Effects Models of the quantitative slope relationship between RescueDoppler (RD) and CBF during asphyxia and CPR.



## Conclusions

- RescueDoppler is correlated with invasive CBF during asphyxia and, to a lesser degree, during CA in pediatric swine
- RescueDoppler is a novel, non-invasive CBF surrogate in a pediatric swine model of CA and may be a promising physiologic tool for targeted CPR to improve neurologic outcomes.

## Future Directions

- Future study may be strengthened by increased dynamic range of CBF during CPR and improved device stabilization