

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

Background

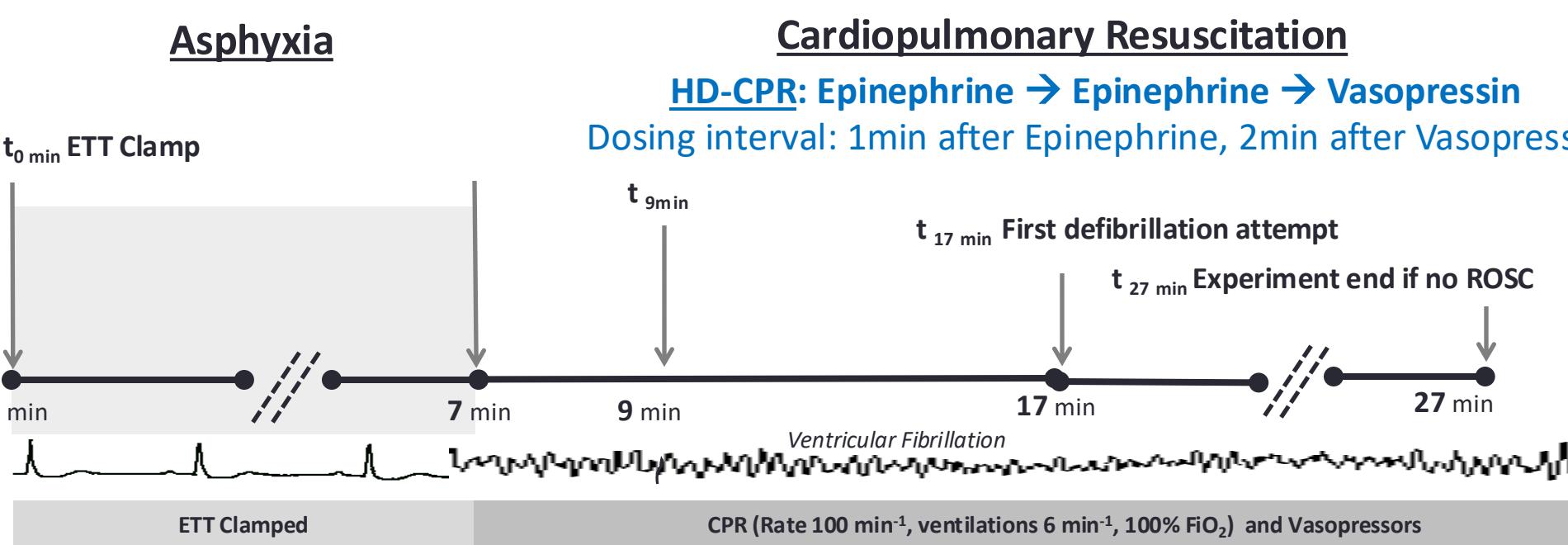
- Preservation of Cerebral Blood Flow (CBF) during Cardiac Arrest (CA) is critical for neurologically intact survival
- Carotid Doppler time averaged velocity (TAV) may be an effective, non-invasive surrogate for CBF during CA

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



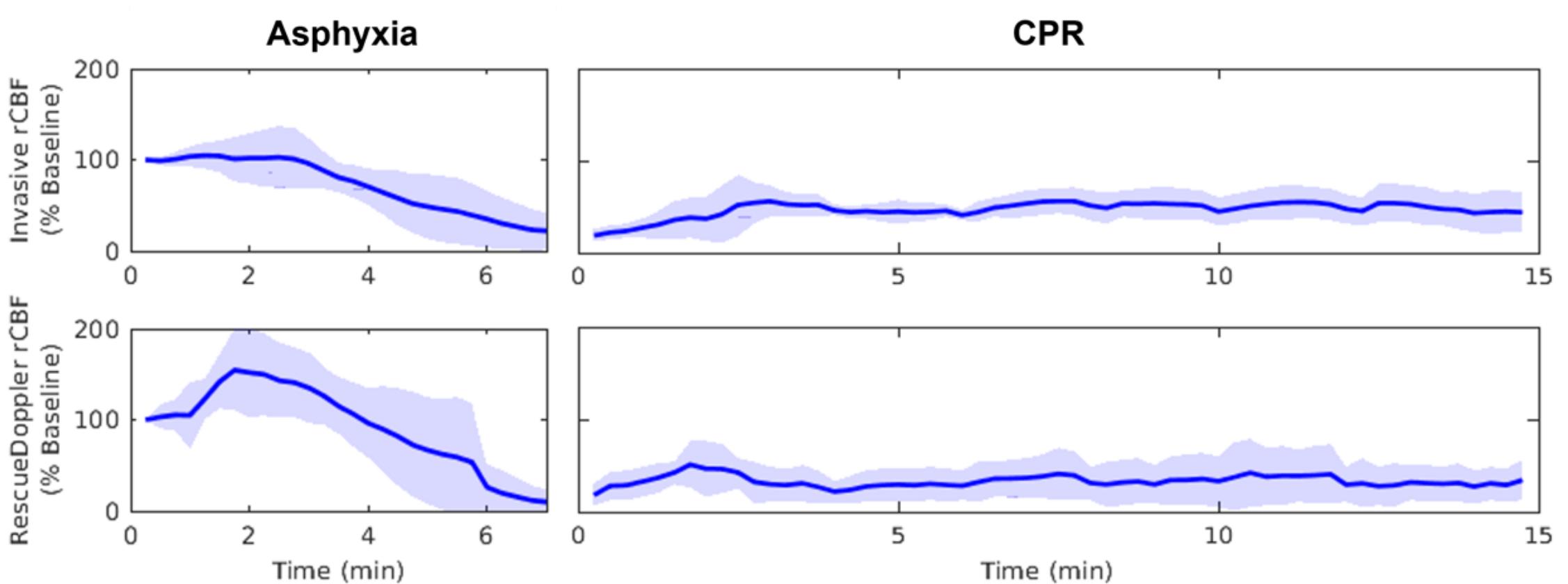
Statistical Analysis

15-second block averages during asphyxia (n=8) and CPR (n=6)

- Repeated measures correlation (association for paired measures assessed multiple times; rmcorr; 95% confidence interval)
- Linear mixed effects (quantitative relationship between devices; accounts for non-independence, Slope mean \pm standard error)

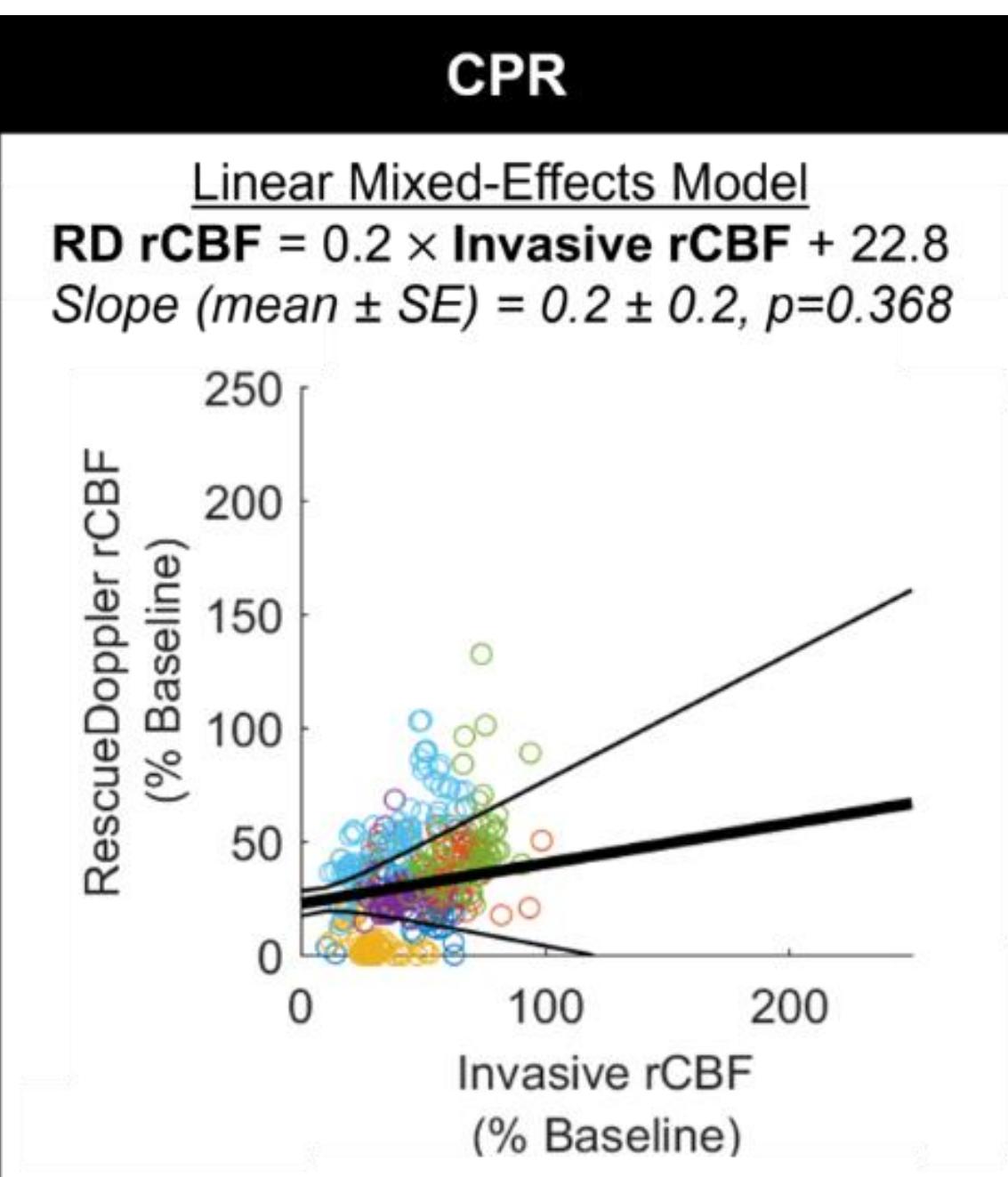
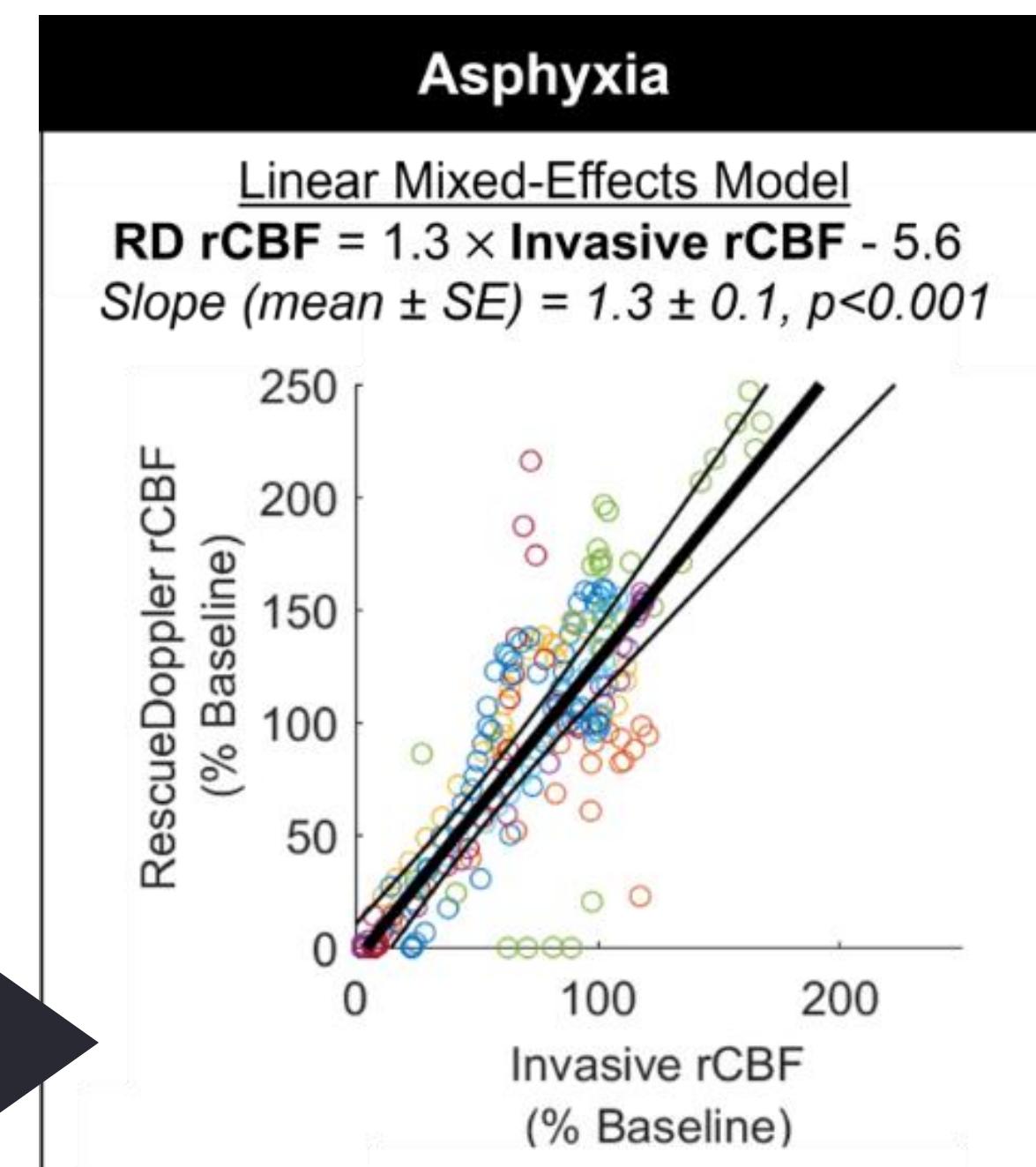
Results

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