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Rubicon Research Repository > Search Rubicon Rubicon Foundation Archive > Go Undersea Biomedical Research Journal > Advanced Search Please use this identifier to cite or link to this item: 🕑 <u>Home</u> http://archive.rubicon-foundation.org/2572 Title: O2 pressures between 0.12 and 2.5 atm abs, Browse circulatory function, and N2 elimination **Communities** (->) Authors: Anderson, D & Collections Nagasawa, GK 🥑 Titles Norfleet, W 0 **Authors** Olszowka, A Lundgren, CEG 🤒 By Date Keywords: rebreather decompression Sign on to: nitrogen elimination hypoxia updates oxygen , My Rubicon Issue Date: 1991 authorized users Citation: Undersea Biomed Res. 1991 Jul; 18(4): 279-92. 🥺 Edit Profile Abstract: To study the effects of inhaled oxygen pressures on N2 elimination, 72, 2-h washouts were performed in 6 subjects at oxygen pressures of 🕑 <u>Help</u> 0.12, 0.2, 1.0, 2.0, and 2.5 atm abs using a closed circuit system that supplied an O2-argon mixture and collected the N2 off-gassed. Hypoxia induced a significant (9.4%, P less than 0.05) increase in nitrogen eliminated as compared to normoxia. Pure oxygen breathing induced a small, insignificant (3.5%) decrease in nitrogen yields, but further increases in oxygen pressure induced significant decreases in nitrogen yields (-8.9%) and -16.9% for 2.0 and 2.5 atm abs, respectively). Heart rate, cardiac output, skin perfusion and leg blood flow decreased, whereas mean arterial pressure increased with increasing oxygen pressure. We conclude, therefore, that perfusion-dependent N2 elimination decreases secondary to vasoconstriction induced by increasing oxygen pressures. Changes in inhaled oxygen pressures during different phases of compression-decompression may induce alterations in the rate of inert gas uptake and elimination. Although not currently quantifiable, such alterations would imply added uncertainties in the computation of decompression schedules. Oxygen breathing during decompression should be performed at the lowest possible ambient

pressure compatible with freedom from pathogenic bubble formation.					
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