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Title: Decompression sickness during saturation dives

Authors: Berghage, TE **Keywords:** saturation

> decompression neurological

chamber

Issue Date: 1976

Abstract: Available Navy saturation diving data were analyzed

for an evaluation of the therapeutic adequacy of decompression sickness treatment procedures and for delineation of precipitant factors in the etiology and treatment of decompression sickness during

saturation dives. None of the cases of

decompression sickness recorded during saturation dives involved more than musculoskeletal or joint pain, and in 96% of the cases the joint pain was

confined to the diver's knees. In 89% of the cases symptoms appeared while the divers were still under

pressure. The subsequent recompression treatment of these cases resulted in full relief in only 35% of the cases; the remaining 65% completed the

therapy and subsequent decompression with residual pain which diminished over a period of weeks. The adequacy of the recompression appears to be

inversely proportional to the depth of reported onset of symptoms and the time required to obtain even partial relief is directly related to the magnitude of the recompression ratio used. Four explanations are

suggested for the limited recompression therapy common in saturation diving: increase in musculoskeletal pain with recompression, peer pressure to avoid extension of the chamber

confinement, lack of severe neurological symptoms, and the tremendous depths required to obtain a reasonable recompression ratio. The author further suggests that future treatment procedures will

require a departure from the accepted concept of radically decreasing the volume of inert gas bubbles by increasing pressure.

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