

# Care of the Critically Ill Patient

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Northwick Park and St Marks  
Hospitals

# My Hospital



# My Football Team



# Lecture Aim

- PHYSIOLOGY

How do we treat the very ill patient?

# Supplies

- Making sure that the blood has oxygen in it

# Carrier

- Making sure that the blood has oxygen in it **AND** .....

# Meeting the requirements

- Making sure that the blood has oxygen in it AND that the blood goes round and round the body



# Delivery

- OXYGEN DELIVERY

# Oxygen Delivery

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  - Haemoglobin concentration

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  - The amount of oxygen on haemoglobin (Oxygen Saturation)

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  - Haemaoglobin concentration
  - Oxygen Saturation
  - Amount of blood pumped around the body (Cardiac Output)

# Oxygen Delivery

- Oxygen delivery depends on:
  - Haemaoglobin concentration
  - Oxygen saturation
  - Cardiac output
- If patients don't get any of these the organs begin to fail and die.

# Oxygen delivery ( $\dot{V}O_2$ )

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$$= \mathbf{1000 \text{ ml/min}}$$

# Example 1

- 55 yr old pt 3 days after hysterectomy
  - BP 90/50
  - pulse 140
  - drowsy
  - shallow breathing

# Example 1

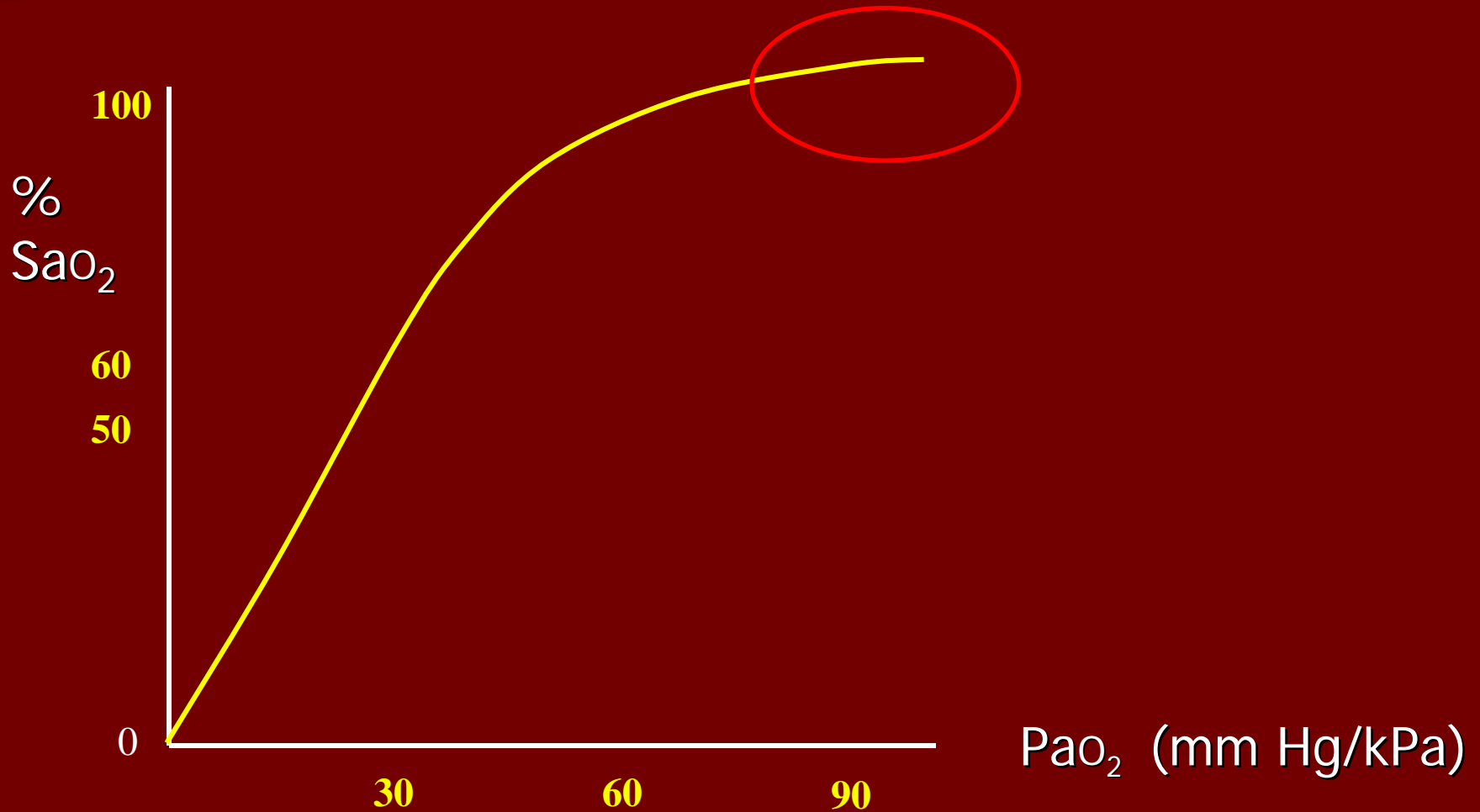
- 55 yr old pt 3 days after hysterectomy
  - BP 90/50
  - pulse 140
  - drowsy
  - shallow breathing

WHAT DO YOU DO FIRST?

**100%**

**O<sub>2</sub>**

# Oxygen Dissociation Curve



# Oxygen delivery ( $\dot{V}O_2$ )

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# Respiratory

- Hypoxia

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  - Hypoventilation
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  - Lung disease
    - Asthma
    - 'Alveolar Block' – Pus / oedema / Blood

# Respiratory

- Hypoxia
  - Hypoventilation
    - Pain and pethidine
  - Lung disease
    - Asthma, 'Alveolar Block' – Pus / oedema / Blood
  - Circulation
    - Poor pulmonary circulation – PE / Heart Failure

# Example 1

- 55 yr old pt 3 days after hysterectomy
  - BP 90/50
  - pulse 140
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  - shallow breathing

# Blood Pressure and Shock

- Shock is a generalized state of hypoperfusion causing:
  - Anaerobic metabolism
  - Lactic acid production
  - Cellular dysfunction
  - Cell death
  - Organ Failure

# Blood Pressure

■ BP =

# Blood Pressure

- $BP = CO \times SVR$



# Blood Pressure



# Cardiac Output

■ CO =

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- $CO = \text{Stroke Volume (SV)} \times \text{Heart Rate (HR)}$

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# Control of stroke volume

- $CO = SV \times HR$

Blood Volume

Preload

Stroke Volume

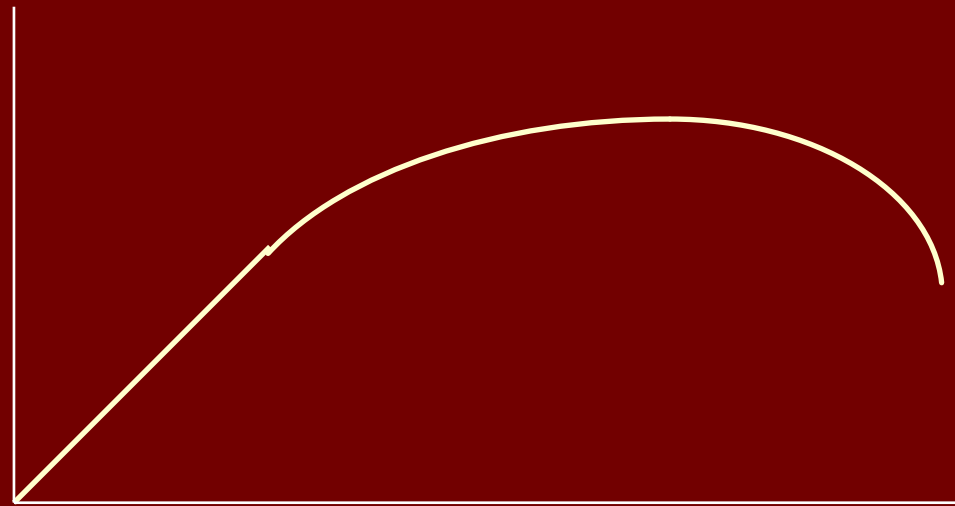


```
graph TD; A[Preload] --> B[Stroke Volume];
```

The diagram illustrates the relationship between preload and stroke volume. It features two rectangular boxes: an orange box labeled 'Preload' on the left and a purple box labeled 'Stroke Volume' on the right. A white arrow originates from the bottom of the 'Preload' box, extends horizontally to the right, and then turns vertically downwards to point at the top of the 'Stroke Volume' box. This visualizes that an increase in preload leads to an increase in stroke volume.

# Starling's Law of the Heart

**Stroke volume**  
**(BP, CO, UO)**



**Initial fibre length**  
**(JVP, CVP)**

# CVP – the dip stick



# CVP measurement

- Zero taken:
  - 5 cm below sternum
  - mid-axillary line in the 4<sup>th</sup> interspace
- Normal CVP - 3 to 12 cm H<sub>2</sub>O



# Starling's Law of the Heart

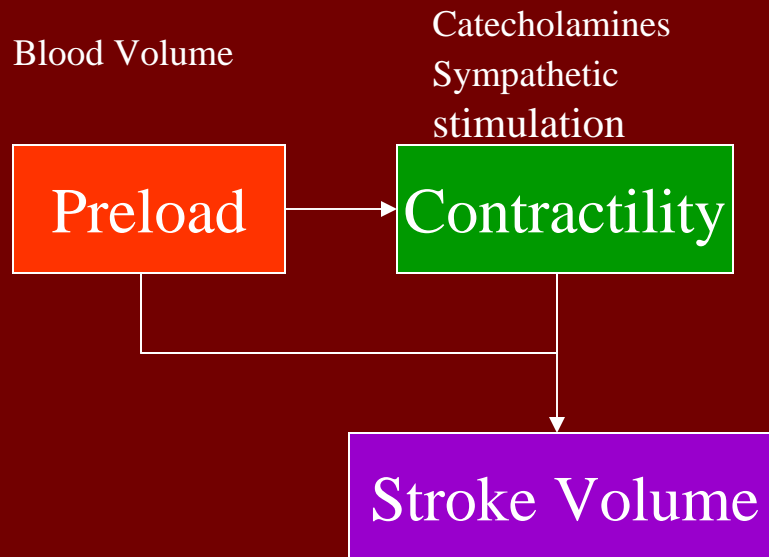
**Stroke volume**  
(BP, CO, UO)



**Initial fibre length**  
(JVP, CVP)

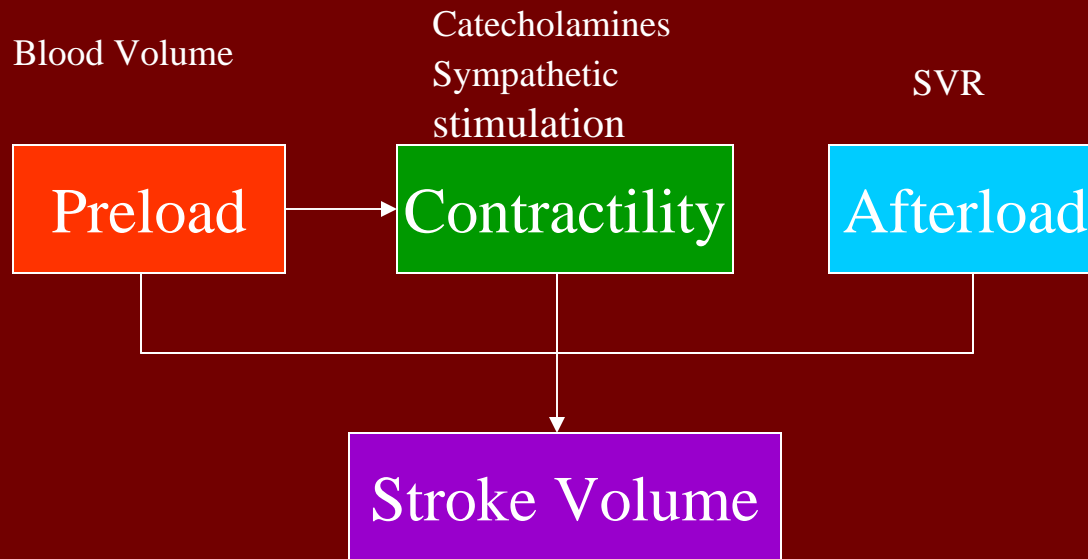
# Control of stroke volume

■  $CO = SV \times HR$



# Control of stroke volume

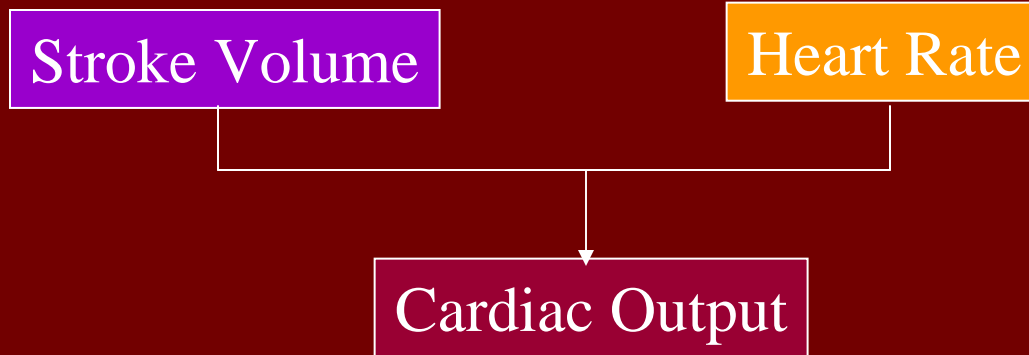
■  $CO = SV \times HR$



# Control of cardiac output

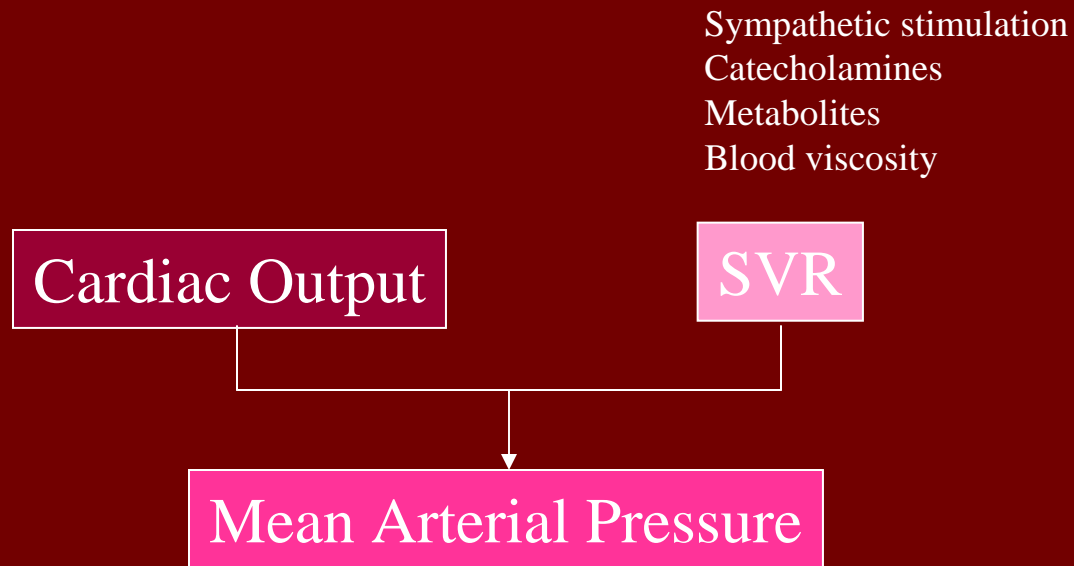
■  $CO = SV \times HR$

Sympathetic stimulation  
Parasympathetic stimulation  
catecholamines

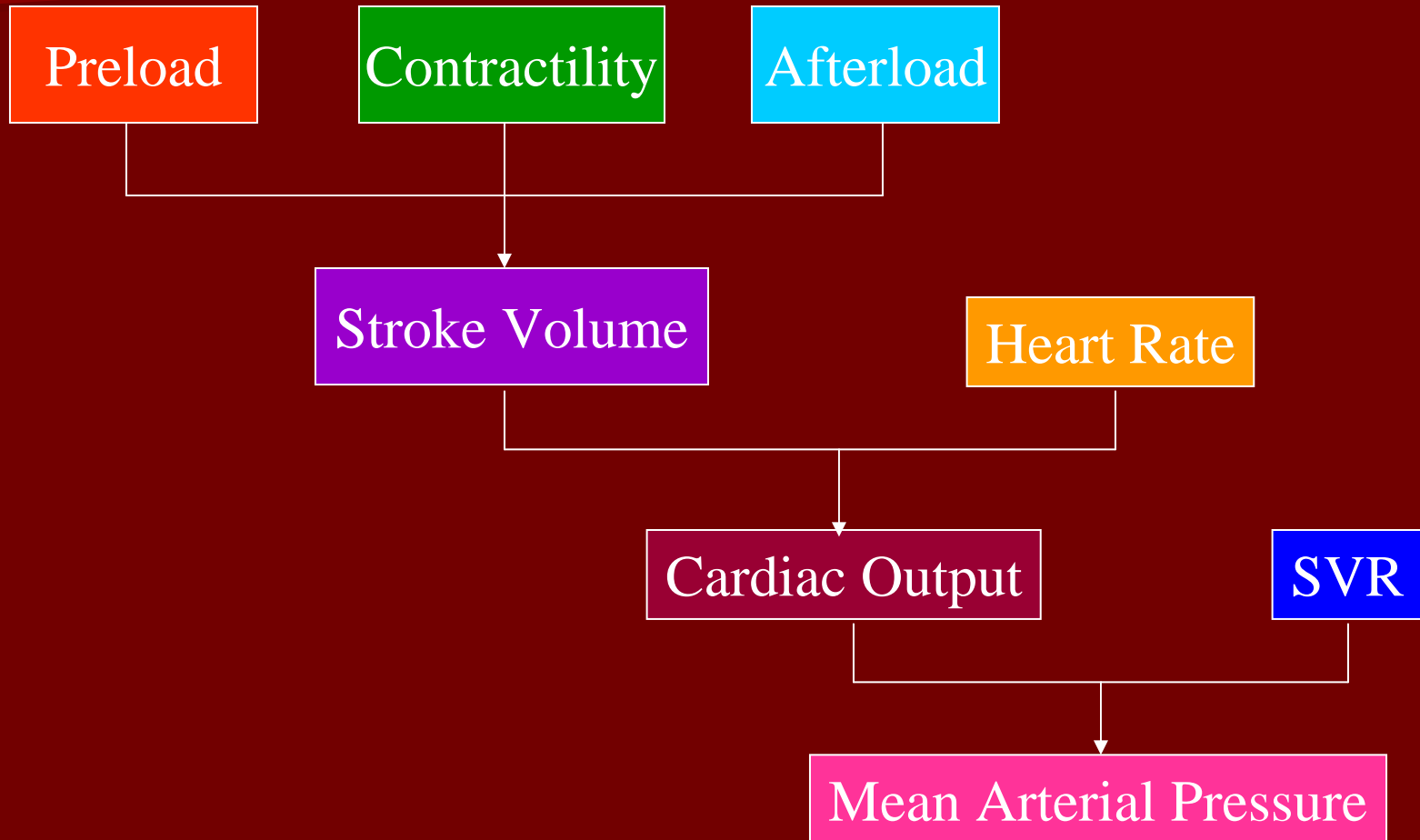


# Control of MAP

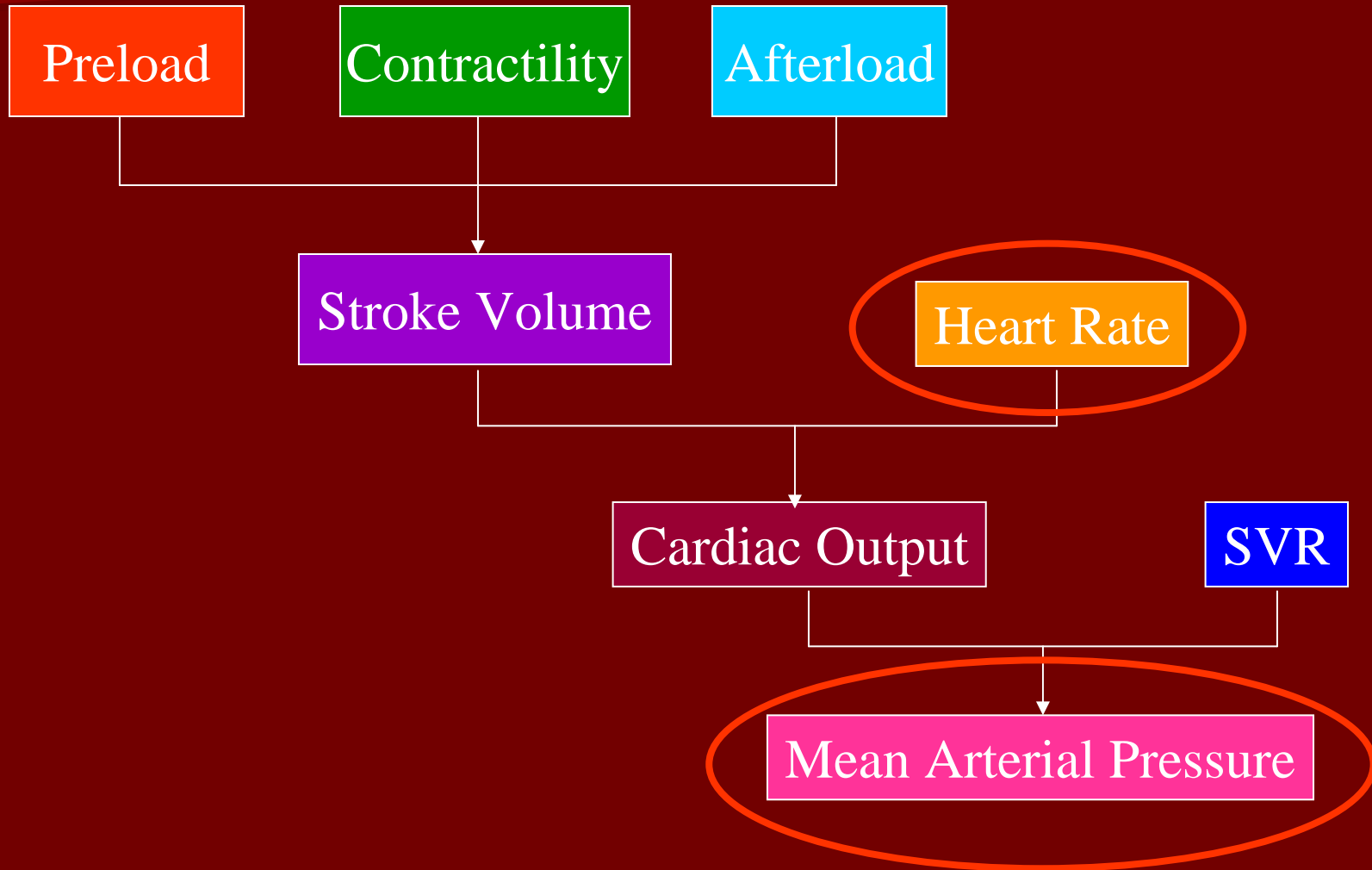
■  $MAP = CO \times SVR$



# Cardiovascular Physiology



# Cardiovascular Physiology



# Example 1

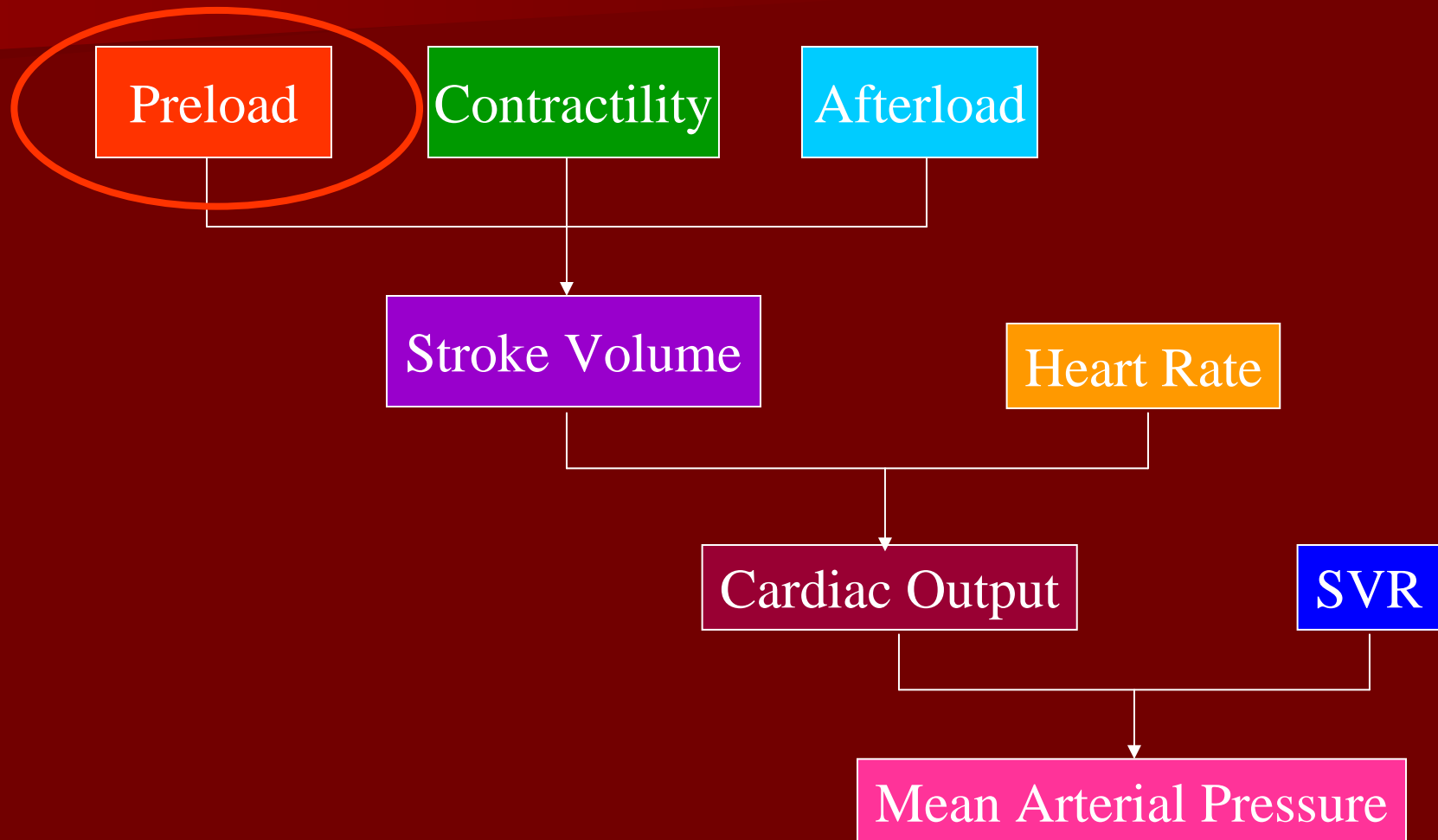
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# Example 1

- 55 yr old pt 3 days after hysterectomy
  - BP 90/50
  - pulse 140
  - drowsy
  - shallow breathing
  - WHAT WILL YOU DO?

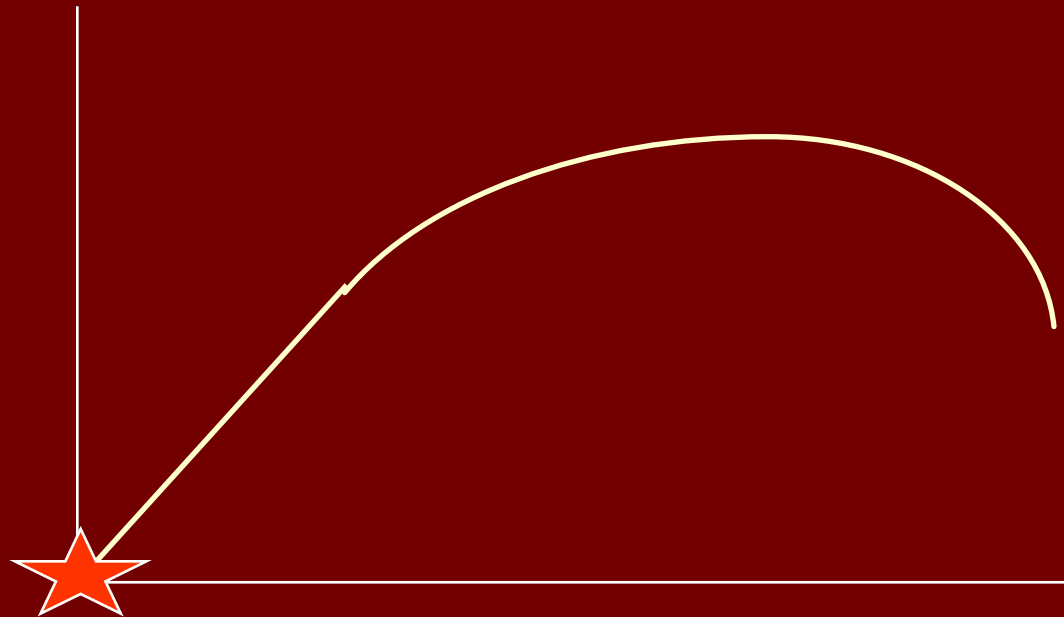
# Cardiovascular Physiology



# Treatment of shock

## Starlings Law of the Heart

**Stroke volume  
(BP, CO, UO)**



**Initial fibre length  
(CVP, PCWP, LVEDP)**

# CVP measurement

- Zero taken:
  - 5 cm below sternum
  - mid-axillary line in the 4<sup>th</sup> interspace
- Normal CVP - 3 to 12 cm H<sub>2</sub>O
- THE RULE OF 2's and 5's

# Example 1

- Give fluid 200ml x5

# Example 1

- Give fluid 200ml x5
  - BP 120/70
  - pulse 82
  - CNS: Improved level of consciousness
  - Skin: Warm, capillary refill
  - Respirations: Improved rate and depth



# Oxygen delivery ( $\dot{V}O_2$ )

■  $\dot{V}O_2 = [\text{Hb}] \times 1.34 \times \text{SaO}_2 \times \text{CO}$

= 150 (g/dl) x 1.34 x 100% x 5 (l/min)

= **1000 ml/min**



If patient is losing blood.....

**GIVE BLOOD !!**

# Oxygen delivery ( $\dot{V}O_2$ )

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$= 150 \text{ (g/dl)} \times 1.34 \times 100\% \times 5 \text{ (l/min)}$

$= \mathbf{1000 \text{ ml/min}}$

# Example 2

- 55 year old with a high fever
  - UO 20 mls/hr

# Renal

- Low urine output:
  - Appropriate response to dehydration.

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  - Appropriate response to dehydration.
  - Pre-renal (commonest)
    - Reduction in perfusion/BP
  - Renal
    - Intrinsic diseases of the kidney
  - Post-renal
    - Obstruction

# Example 2

- 55 year old with a high fever
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries
- What do you do?



**100%**

**O<sub>2</sub>**

# Example 2

- 55 year old with a high fever
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries
- What do you do now?

# Example 2

- 55 year old with a high fever
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries
- Give 200 mls of fluid

# Example 2

- 55 year old with a high fever
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries
- Give 200 mls of fluid
- UO 60mls/hr

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# Example 3

- 55 year old man following Myocardial Infarct (MI)
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries

# Example 3

- 55 year old man following Myocardial Infarct (MI)
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries
- **What do you do?**

**100%**

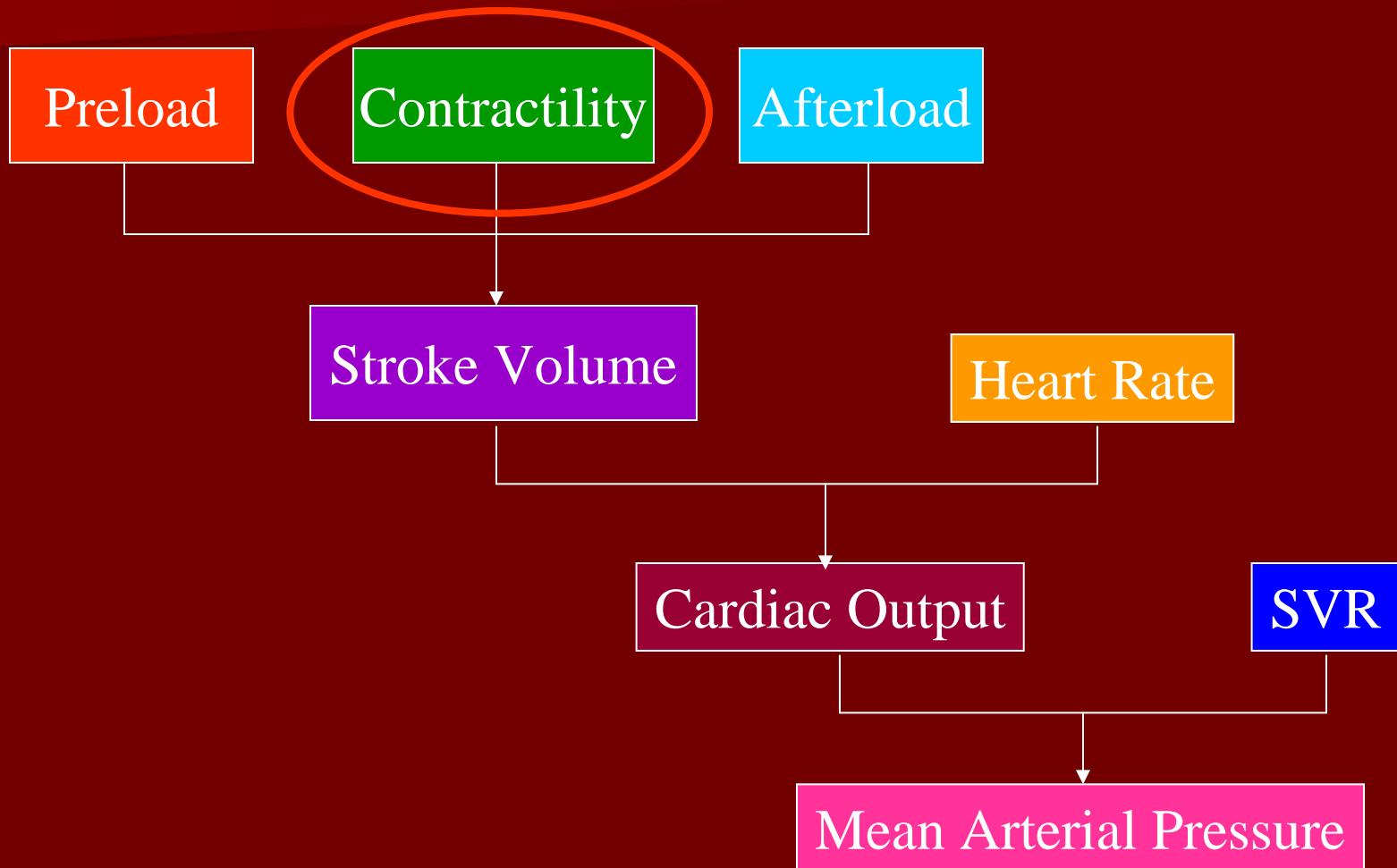
**O<sub>2</sub>**



# Example 3

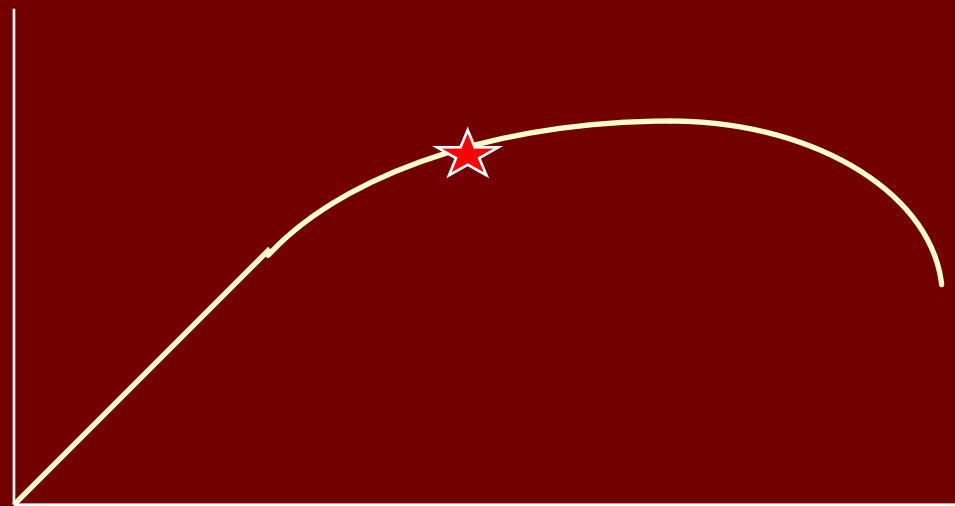
- 55 year old man following Myocardial Infarct (MI)
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries
- **And Now?**

# Cardiovascular Physiology



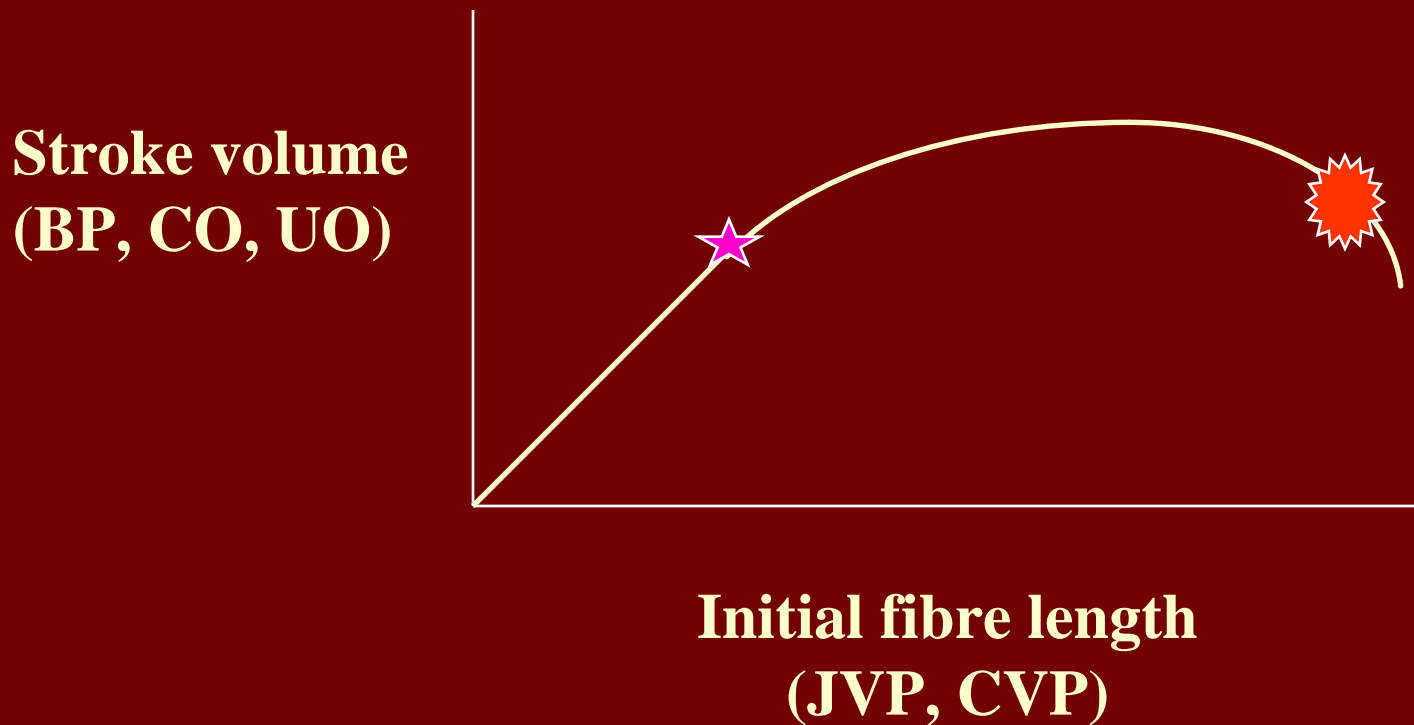
# Starling's Law of the Heart

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# Starling's Law of the Heart



# Example 3

- 55 year old man following MI
  - UO 20 mls/hr
  - BP 90/50, pulse 140
  - dry, clammy, cold peripheries
- Give inotrope

# Example 3

- 55 year old man following MI
  - UO 70 mls/hr
  - BP 120/80, pulse 100
  - Warmer peripheries



# Summary

- Patient tells you he is thirsty
- You feel he is sweaty/cold/clammy
- You see he is confused
- You measure
  - HR
  - BP
  - Temp
  - RR
  - UO



# Summary

- If you always think of PHYSIOLOGY

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  - Oxygen dissociation curve

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- If you always think of PHYSIOLOGY
  - $BP = CO \times SVR$
  - $CO = SV \times HR$
  - Starling's law of the heart
  - Oxygen dissociation curve
  - $VO_2 = [Hb] \times 1.34 \times SaO_2 \times CO$

# Summary

- If you always think of PHYSIOLOGY
  - $BP = CO \times SVR$
  - $CO = SV \times HR$
  - Starling's law of the heart
  - Oxygen dissociation curve
  - $VO_2 = [Hb] \times 1.34 \times SaO_2 \times CO$
  - THEN .....

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1933

1934

1935

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Any Questions?



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