



Clinical Indications for Hyperbaric Oxygen Therapy in 2011

Part 1

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What is HBO therapy ?

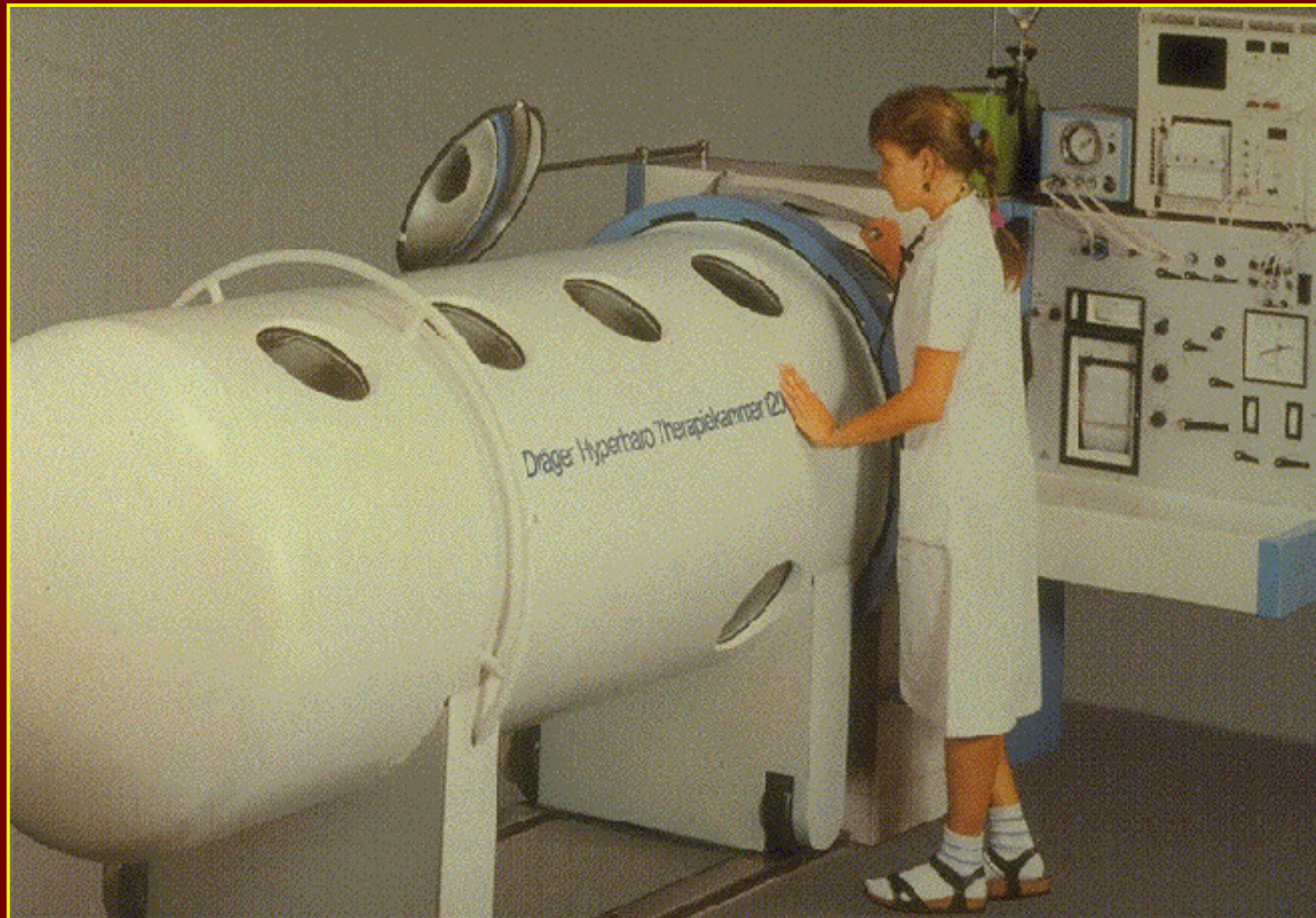
“Breathing oxygen under pressure for therapeutical purposes”

- Increase of oxygen transport
- Increase of oxygen delivery
- Oxygen “as a drug”
 - Indications, dose, side effects



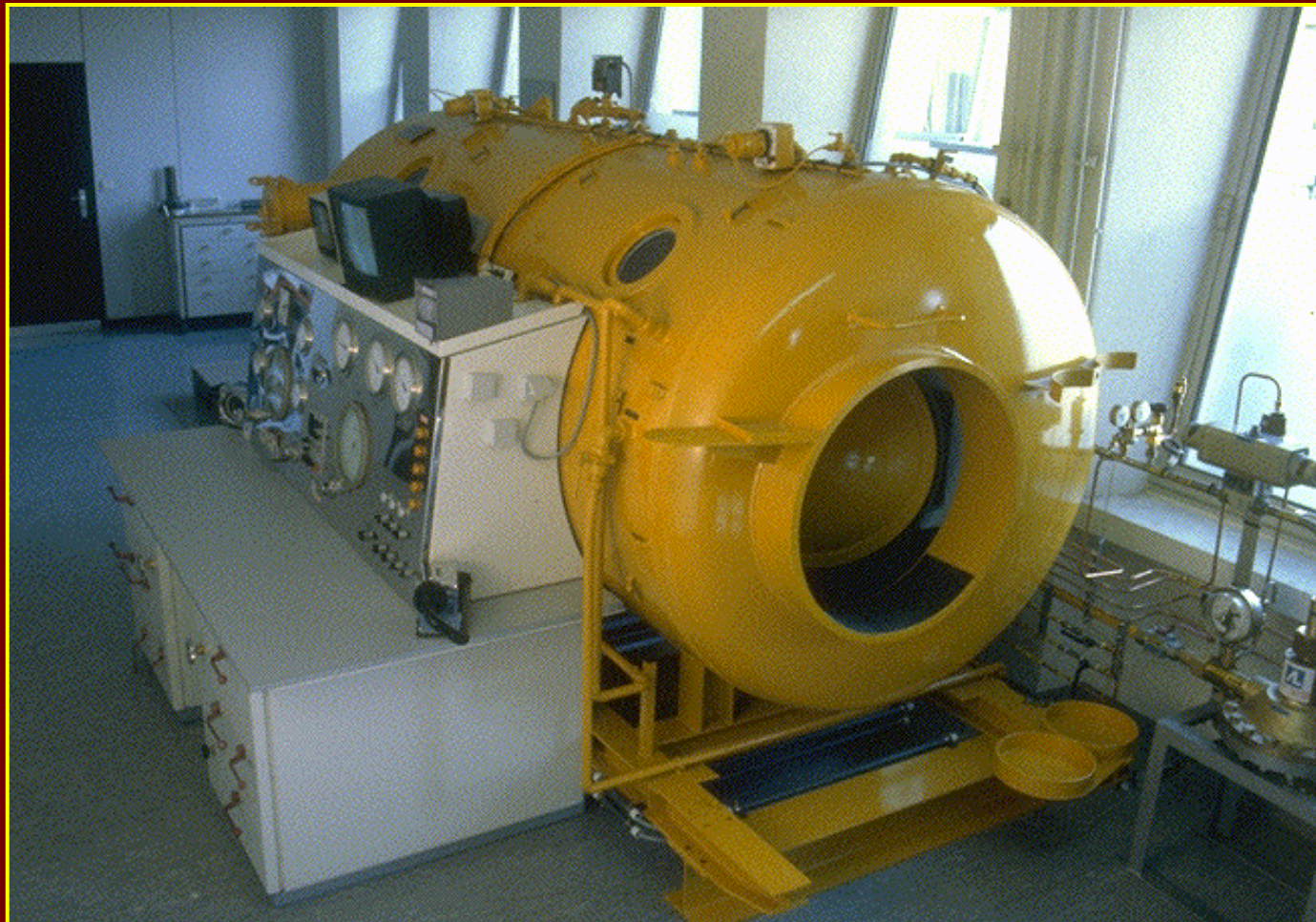
How to administer HBO ?

- “Monoplace” hyperbaric chambers



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- “Monoplace” hyperbaric chambers
- “Multiplace” hyperbaric chambers



How to administer HBO ?

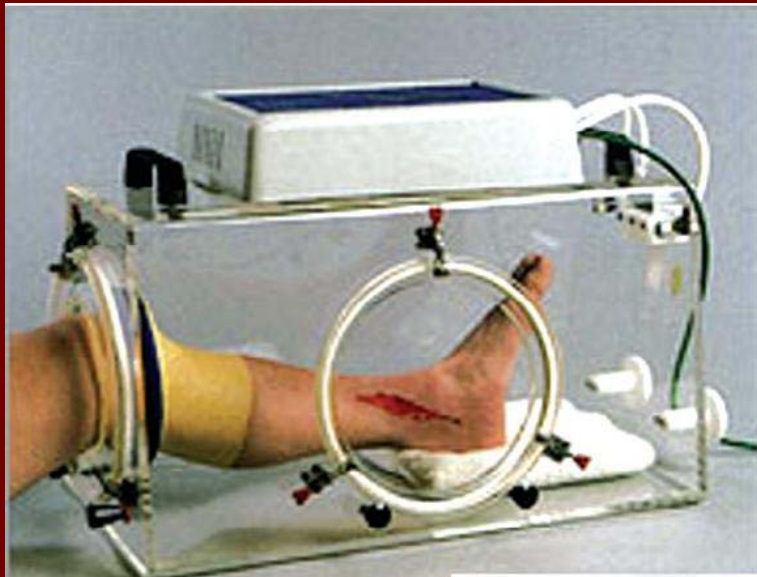
- “Monoplace” hyperbaric chambers
- “Multiplace” hyperbaric chambers

- Pressure of at least 2 ATA
- Duration of at least 60 minutes of O₂



How to administer HBO ?

- Pressure of at least 2 ATA
- Duration of at least 60 minutes of O₂
- “Topical” application of oxygen is NOT HBO Therapy !



Effects of breathing oxygen at pressure

- Increase of P (alv) O_2
- Increase of P (art) O_2
- Increase of P (ven) O_2

- Hemoglobin saturation in venous blood = 100%



Oxygen transport in blood

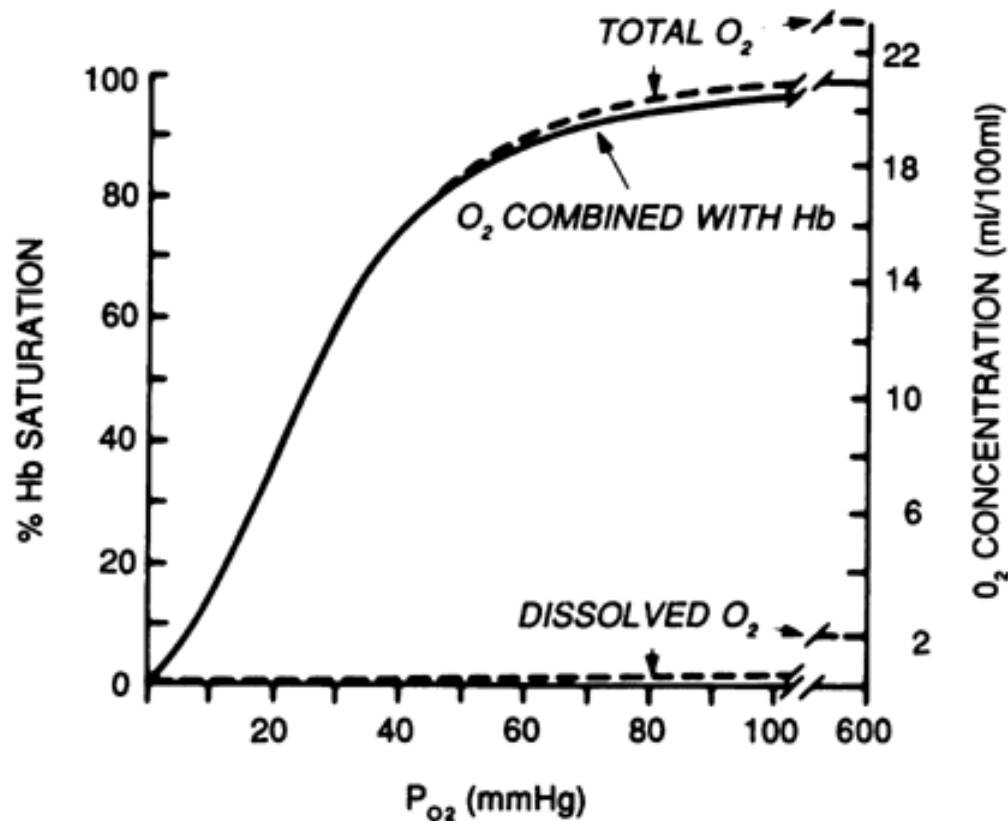
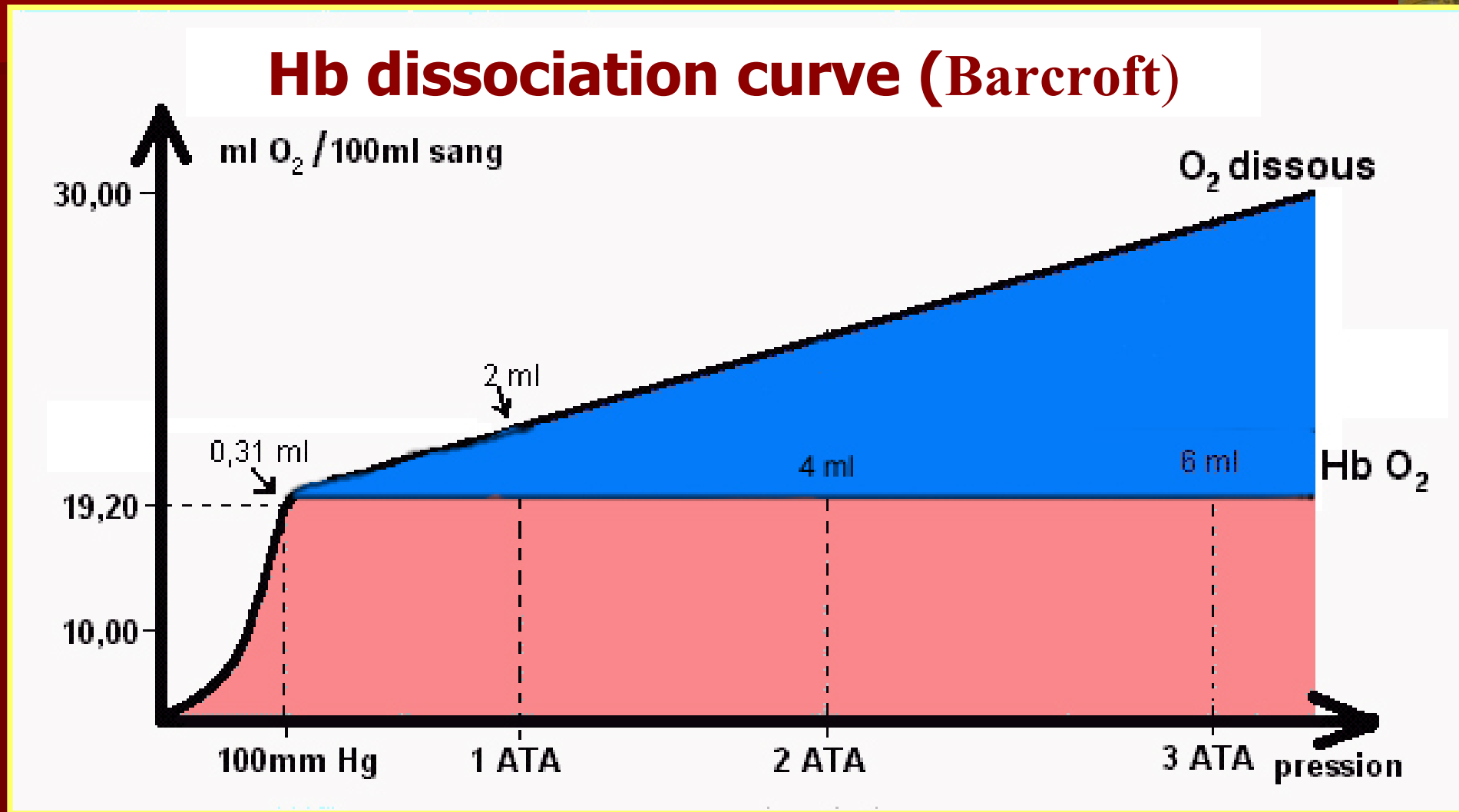


Figure 6.1. O₂ dissociation curve (solid line) for pH 7.4, P_{CO₂} 40 mm Hg, and 37°C. The total blood O₂ concentration is also shown for a hemoglobin concentration of 15 gm/100 ml of blood.

$$Ca(O_2) = (Hb \times SaO_2 \times 1.34) + (PaO_2 \times 0.003)$$



Oxygen transport in blood



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Oxygen transport in blood

■ Physiological O₂ consumption

TABLE 14-1. — MEAN VALUES FOR BLOOD O₂, CO₂ AND PH IN HEALTHY RESTING YOUNG MEN*

	ARTERIAL BLOOD	MIXED VENOUS BLOOD
1. O ₂ pressure (torr)	100	40
2. Dissolved O ₂ (ml O ₂ /100 ml W.B.†)	0.3	0.12
3. O ₂ content (ml O ₂ /100 ml W.B.)	20.3	15.5
4. O ₂ combined with Hb (ml O ₂ /100 ml W.B.)	20.0	15.4
5. O ₂ capacity of Hb (ml O ₂ /100 ml W.B.)	20.6	20.6
6. % saturation of Hb with O ₂	97.1	75.0
7. Total CO ₂ (ml CO ₂ /100 ml W.B.)	49.0	53.1
(mmoles CO ₂ /L)	21.9	23.8
8. Plasma CO ₂ (ml CO ₂ /100 ml plasma)	59.6	63.8
a. Dissolved CO ₂ (ml CO ₂ /100 ml)	2.84	3.2
b. Combined CO ₂ (ml CO ₂ /100 ml)	56.8	60.5
c. Combined CO ₂ /dissolved CO ₂	20/1	18.9/1
d. CO ₂ pressure (torr)	40	46.5
9. Plasma pH	7.40	7.376

*Modified from Albritton, E. C. (ed.): *Standard Values in Blood* (Philadelphia: W. B. Saunders Company, 1952).

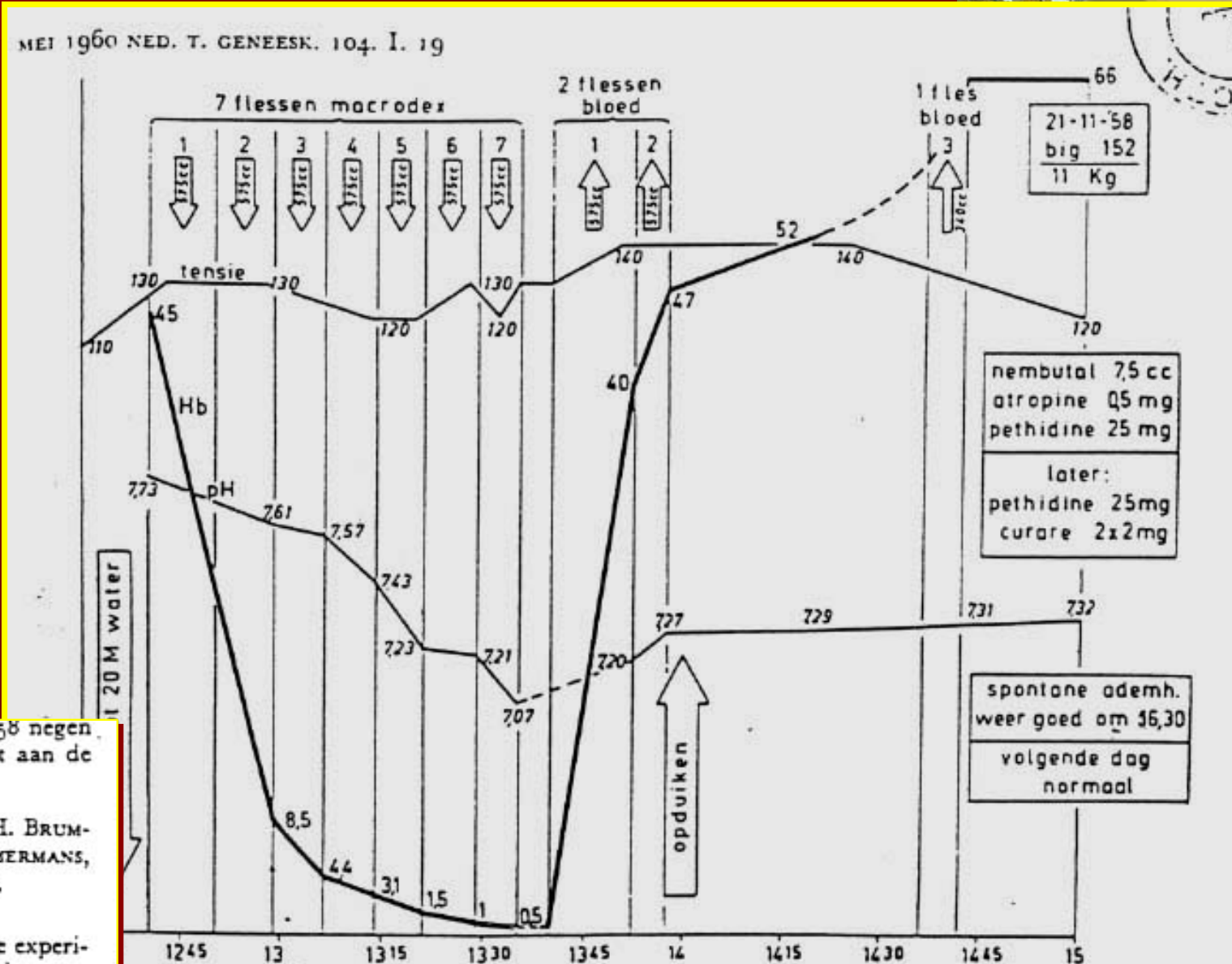
†W.B. = whole blood.



“Life without blood” ?



Boerema 1959



...der leverchirurgie, heeft tot 1 januari 1958 negen patiënten geopereerd. Hij houdt zich dan ook niet aan de indicatie van gemetastaseerd levercarcinoom.

Prof. Dr. I. BOEREMA, Dr. N. G. MEYNE, Dr. W. H. BRUMMELKAMP, S. BOUMA, Dr. M. H. MENSCH, F. KAMERMANS, M. STERN HANF en Dr. W. VAN AALDEREN,
Leven zonder bloed

Toen wij (BOEREMA c.s.) in 1948 begonnen met onze experimenten betreffende hypothermie, was ons einddoel het metabolisme van een warmbloedig dier zover te verlagen, dat alle fysiologische processen vrijwel tot stilstand zouden komen. Als wij hierin slaadden, zou het mogelijk zijn, het hart te

Verdunning van het bloed bij een druk van 3 atmosfeer met 7 flessen Macrodex. Het laagste hemoglobinegehalte was 0,5 pct, de p_H daalde tot 7,07. De bloeddruk was vrijwel onveranderd tijdens het gehele experiment. Herstel na infusie van twee flessen bloed. De volgende dag geheel normaal.

Life without blood !





Effects of hyperbaric hyperoxia

- Increased O_2 transport in blood



Effects of hyperbaric hyperoxia

- Increased O₂ transport in blood
- Pressure effect (Boyle-Mariotte's law)

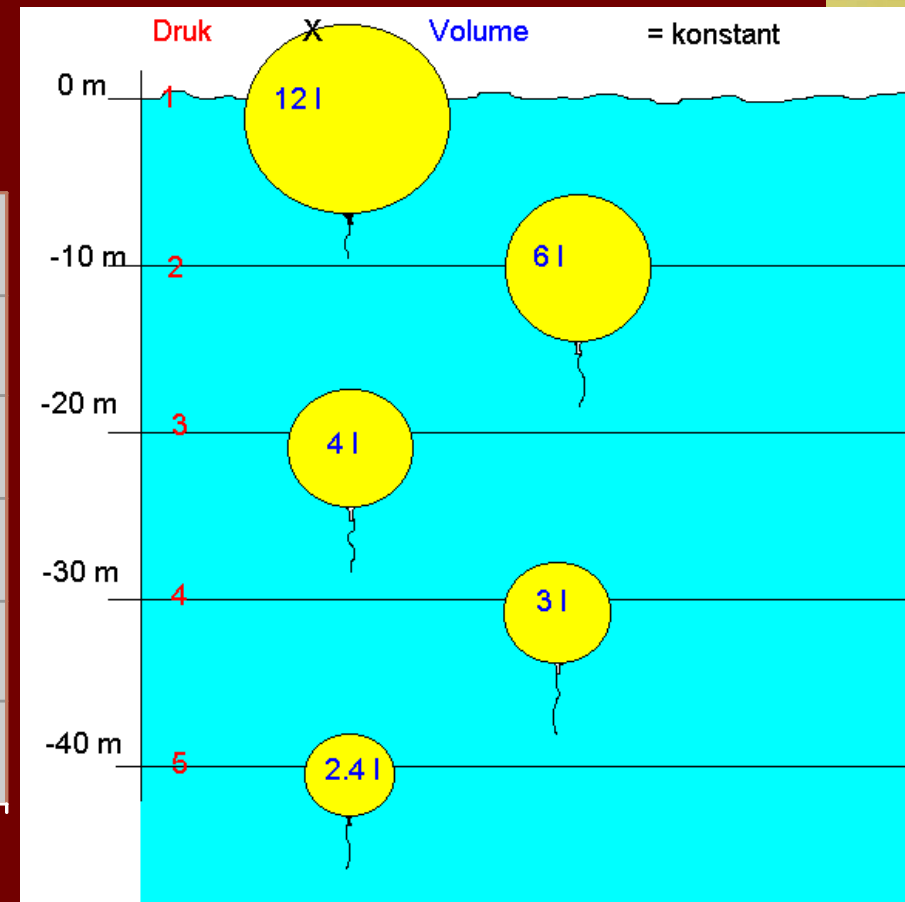
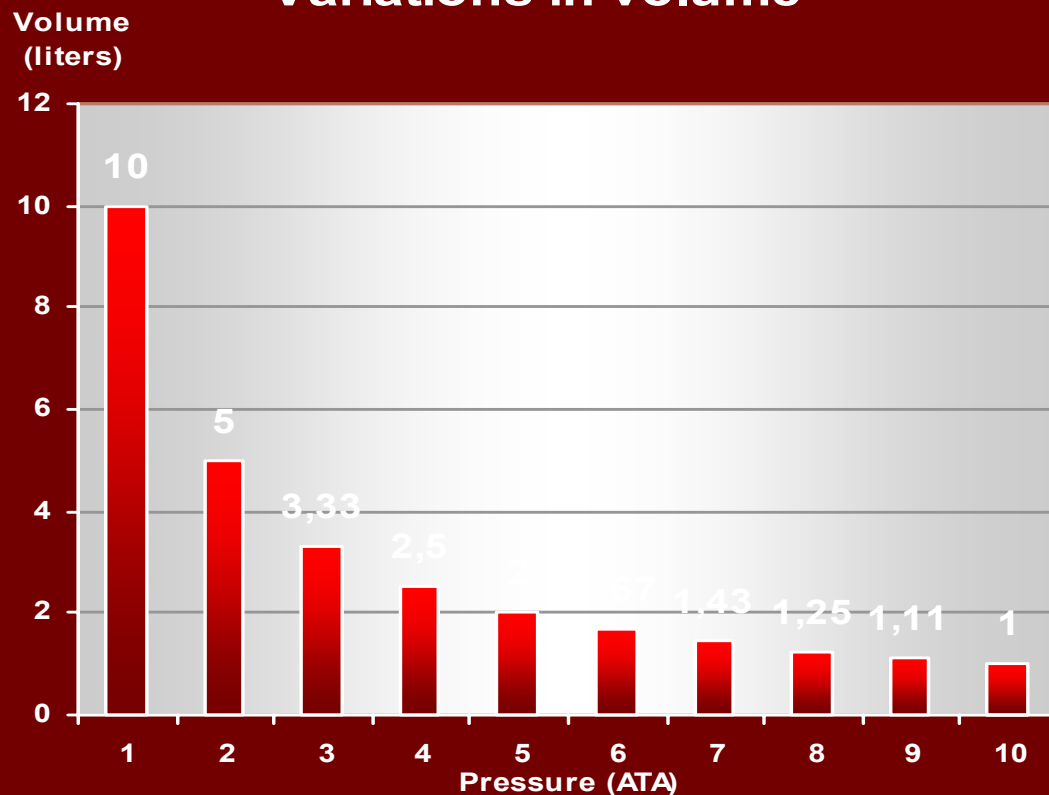


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Variations in volume



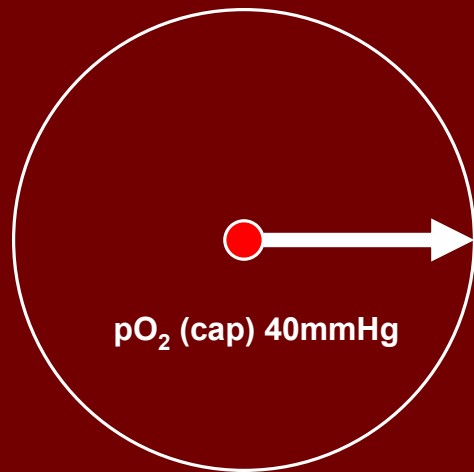
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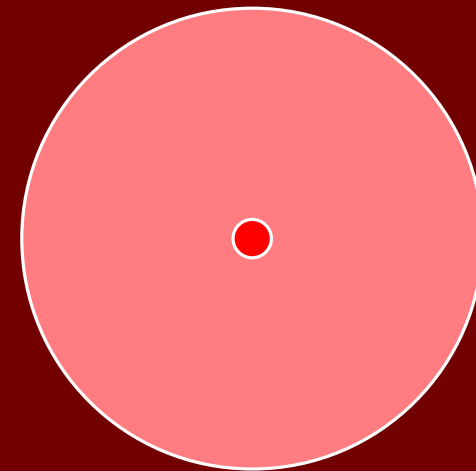
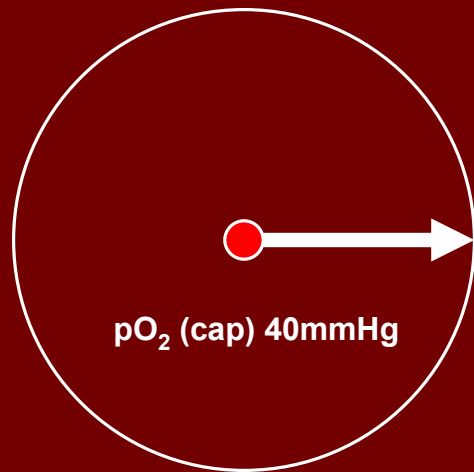


Krogh's Capillary Model



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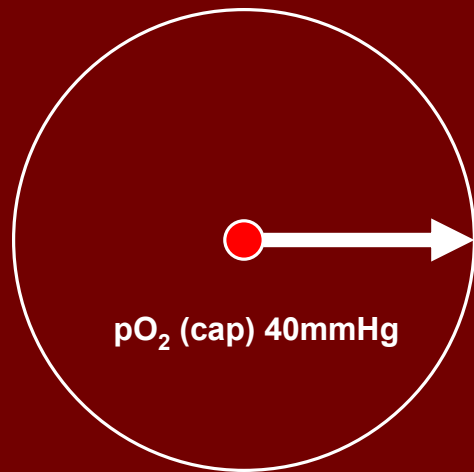


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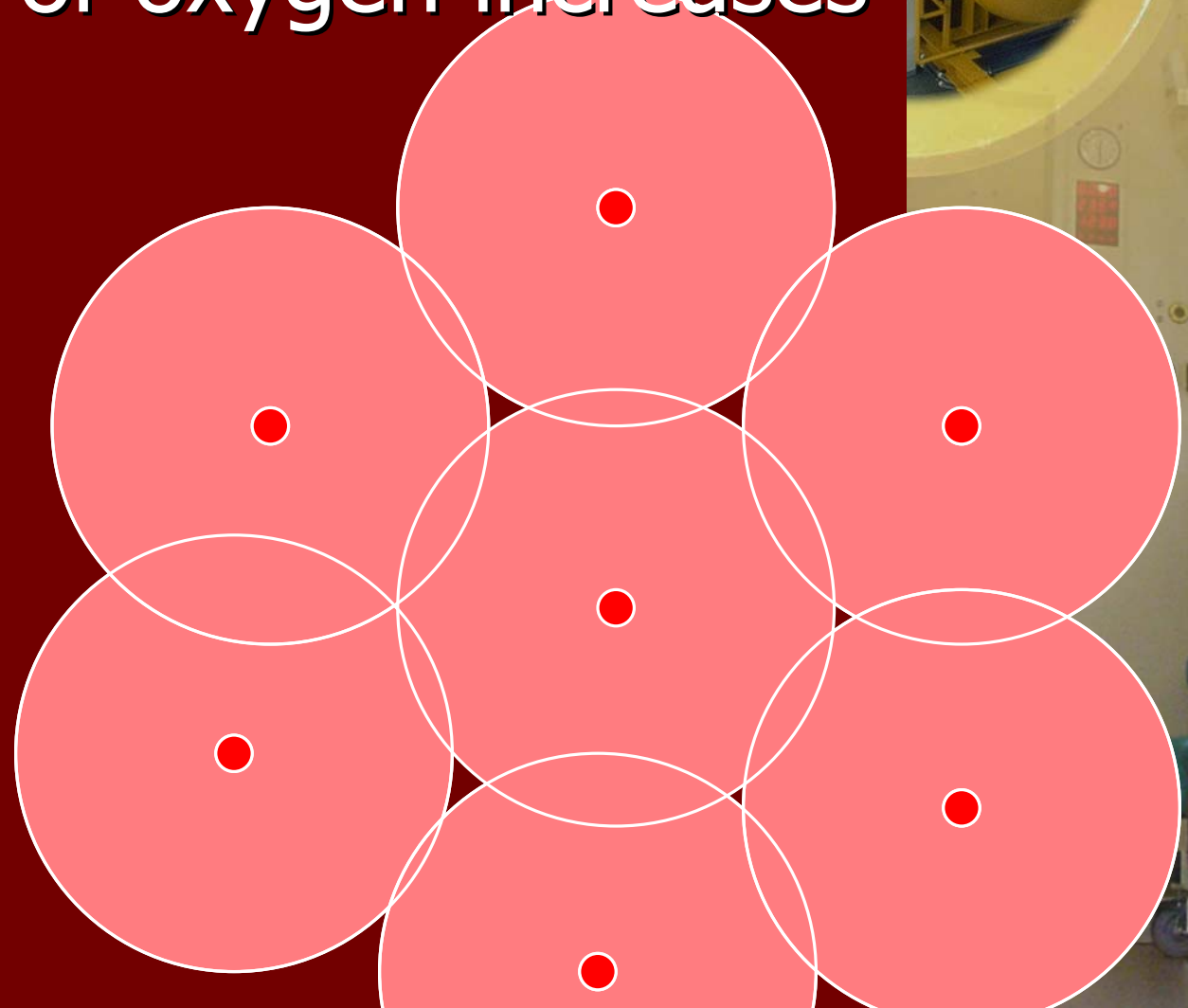


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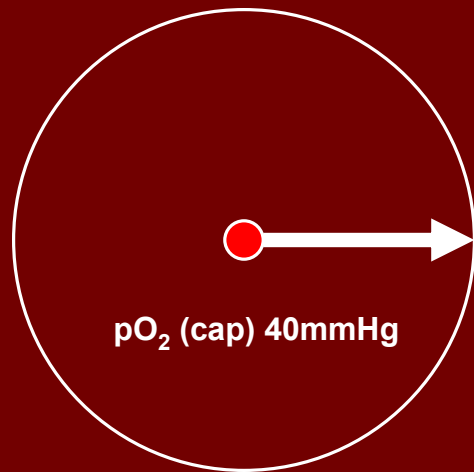


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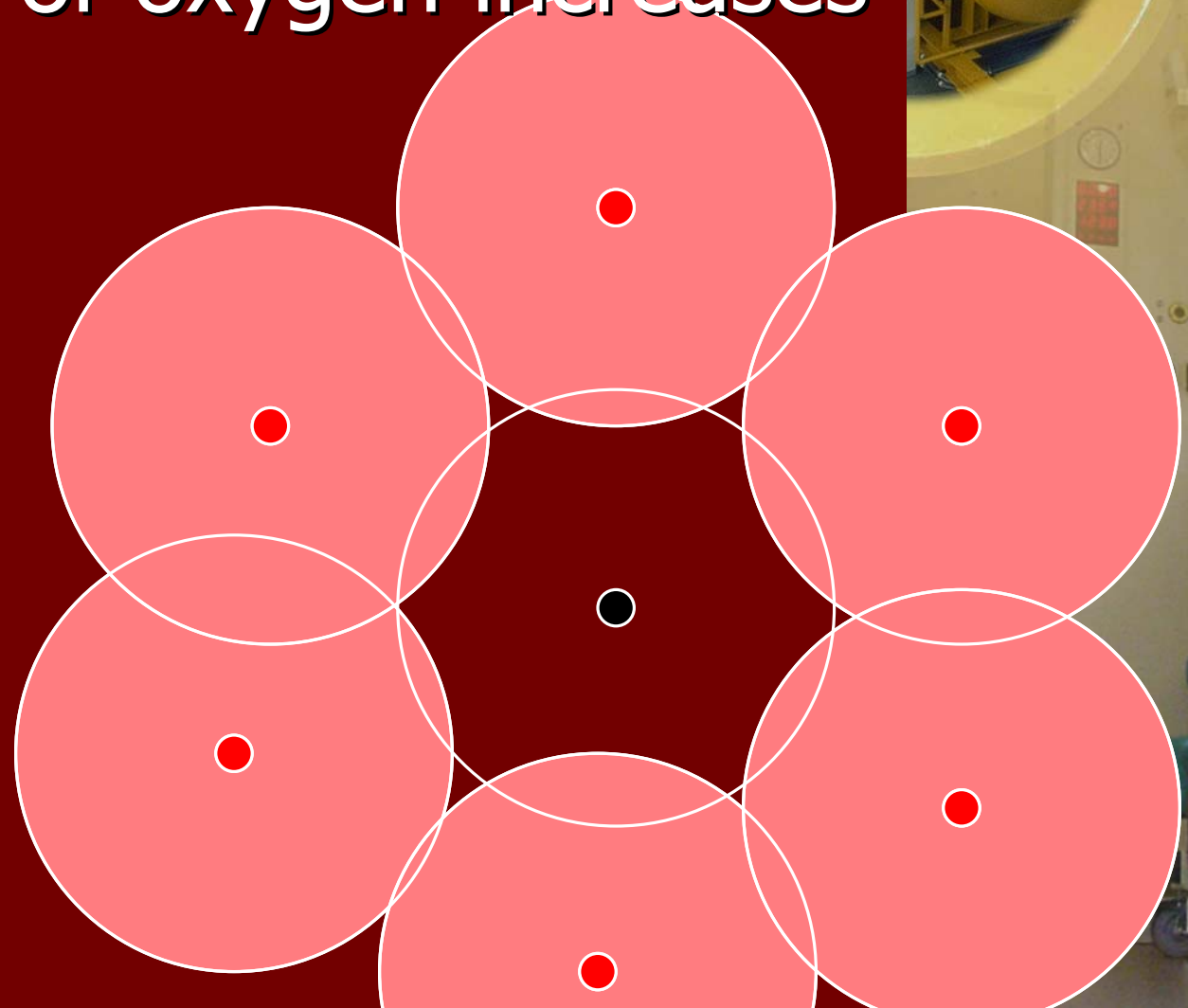


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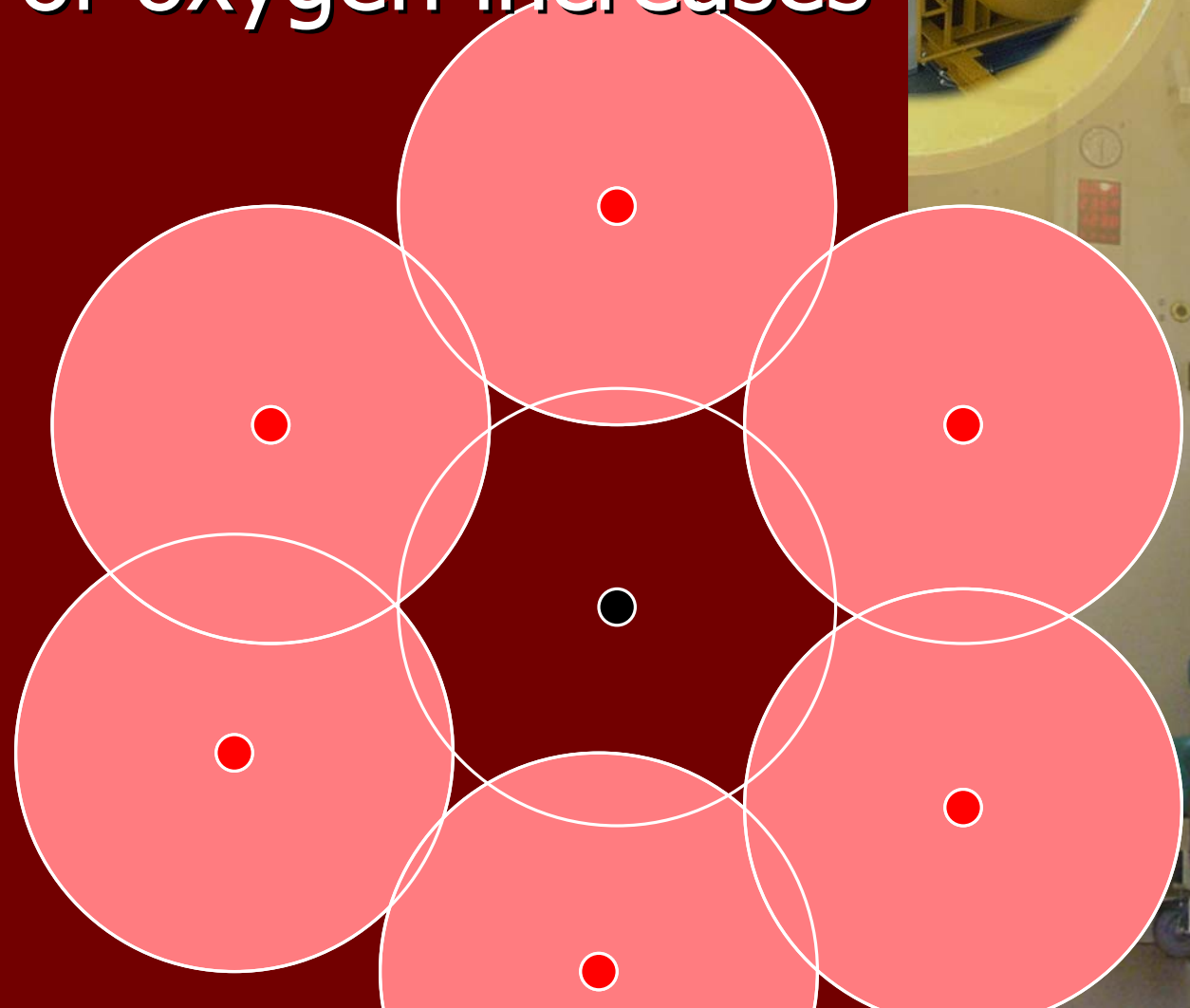
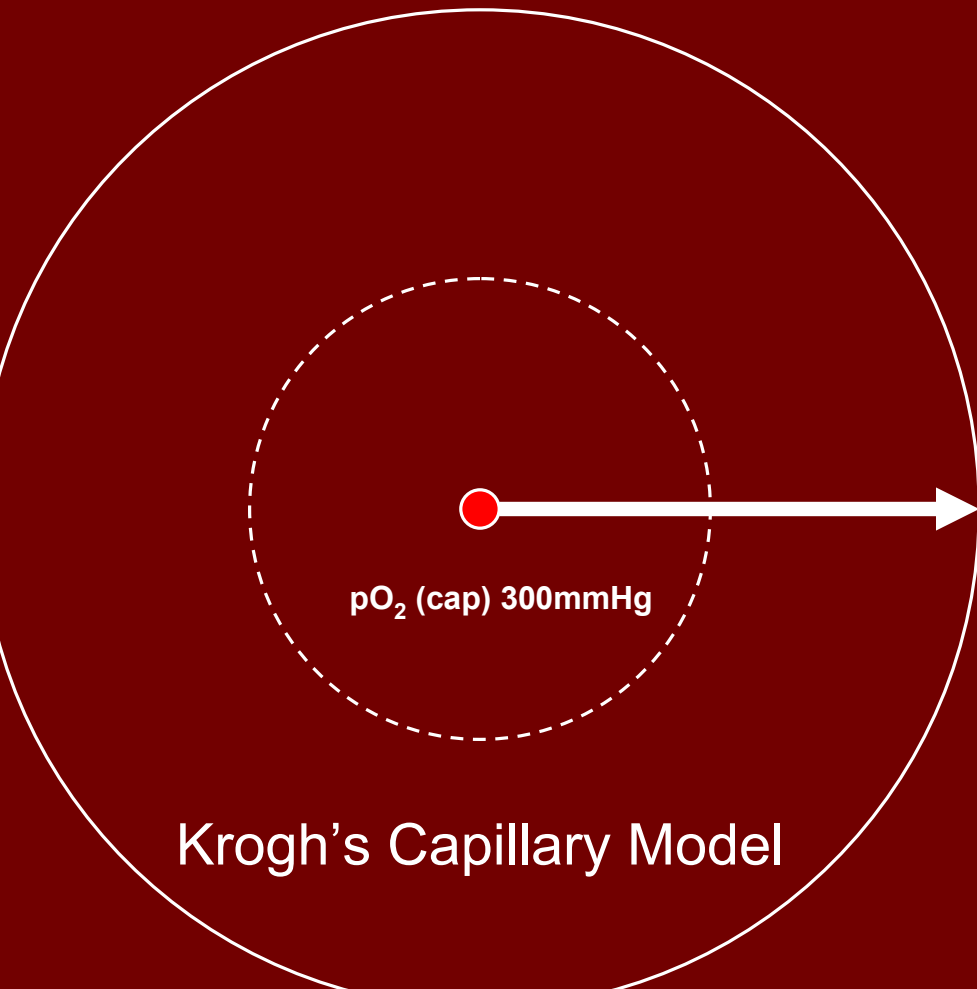


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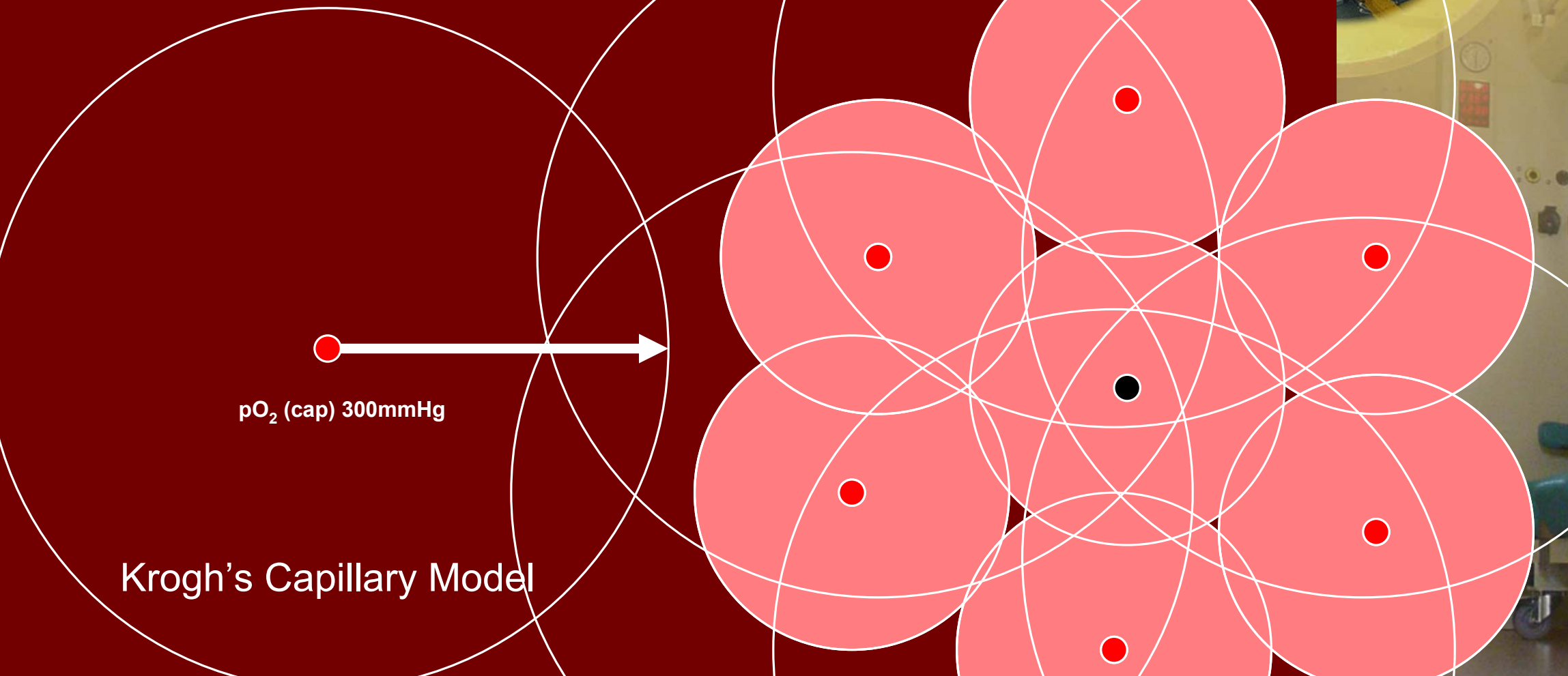
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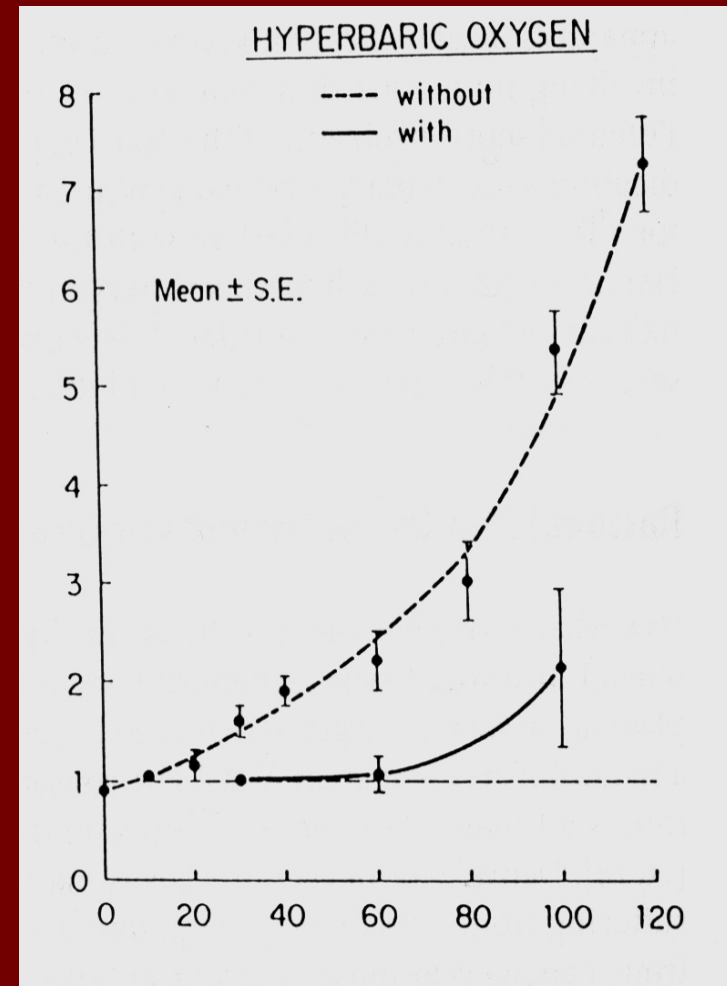
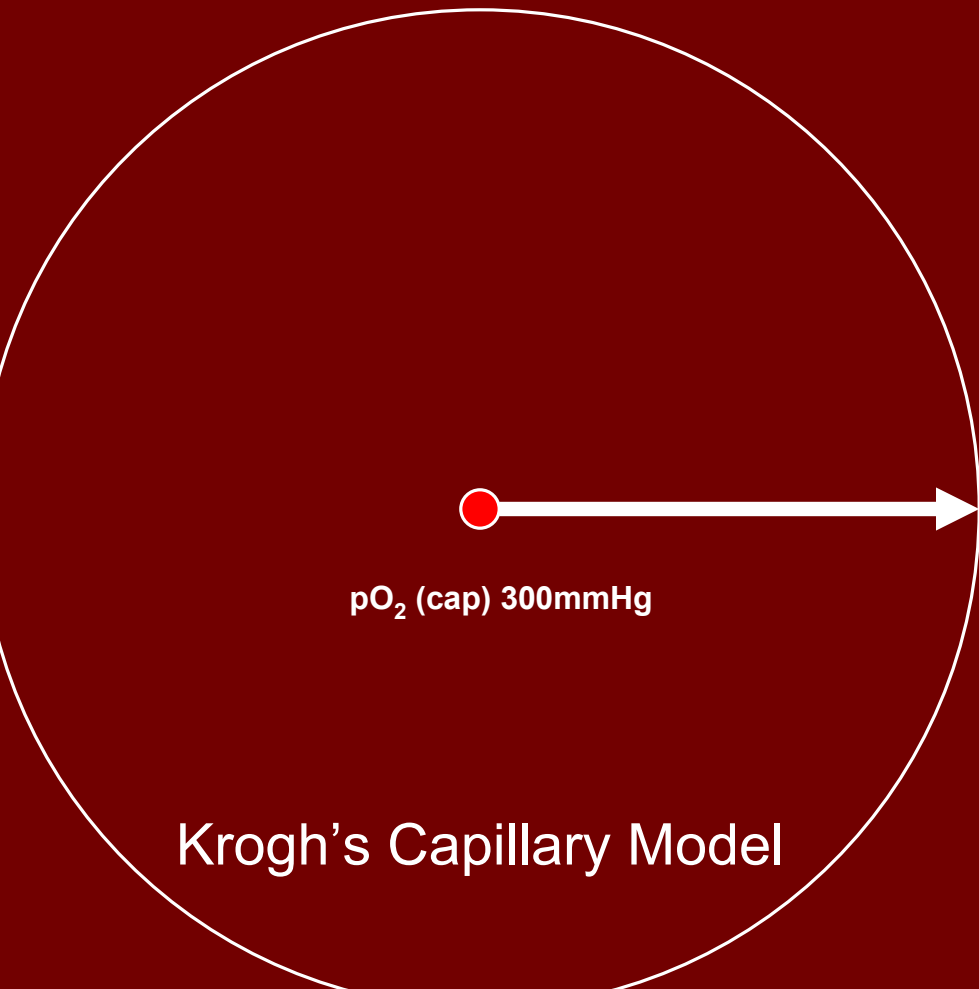
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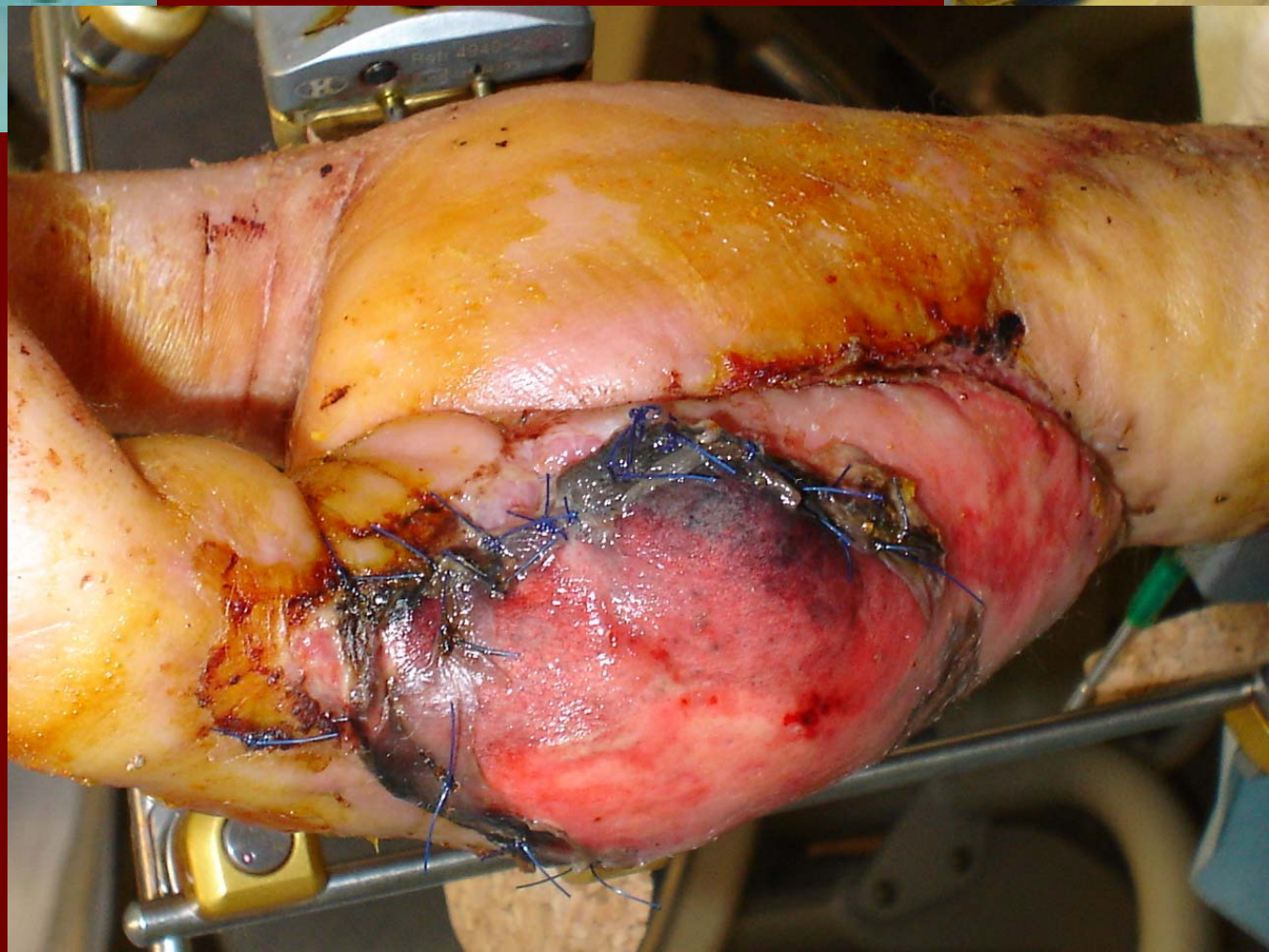
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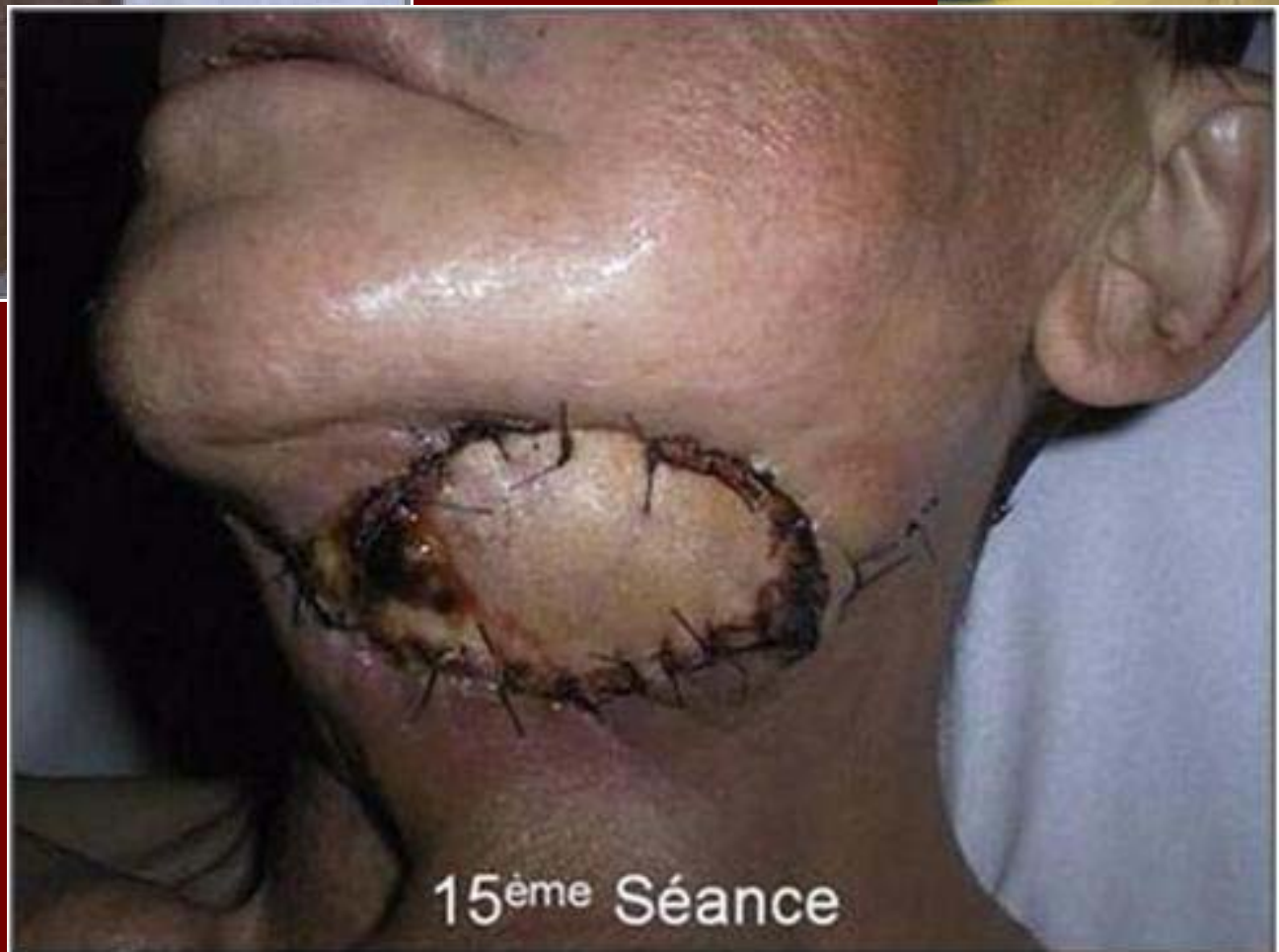
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1^{ère} Séance



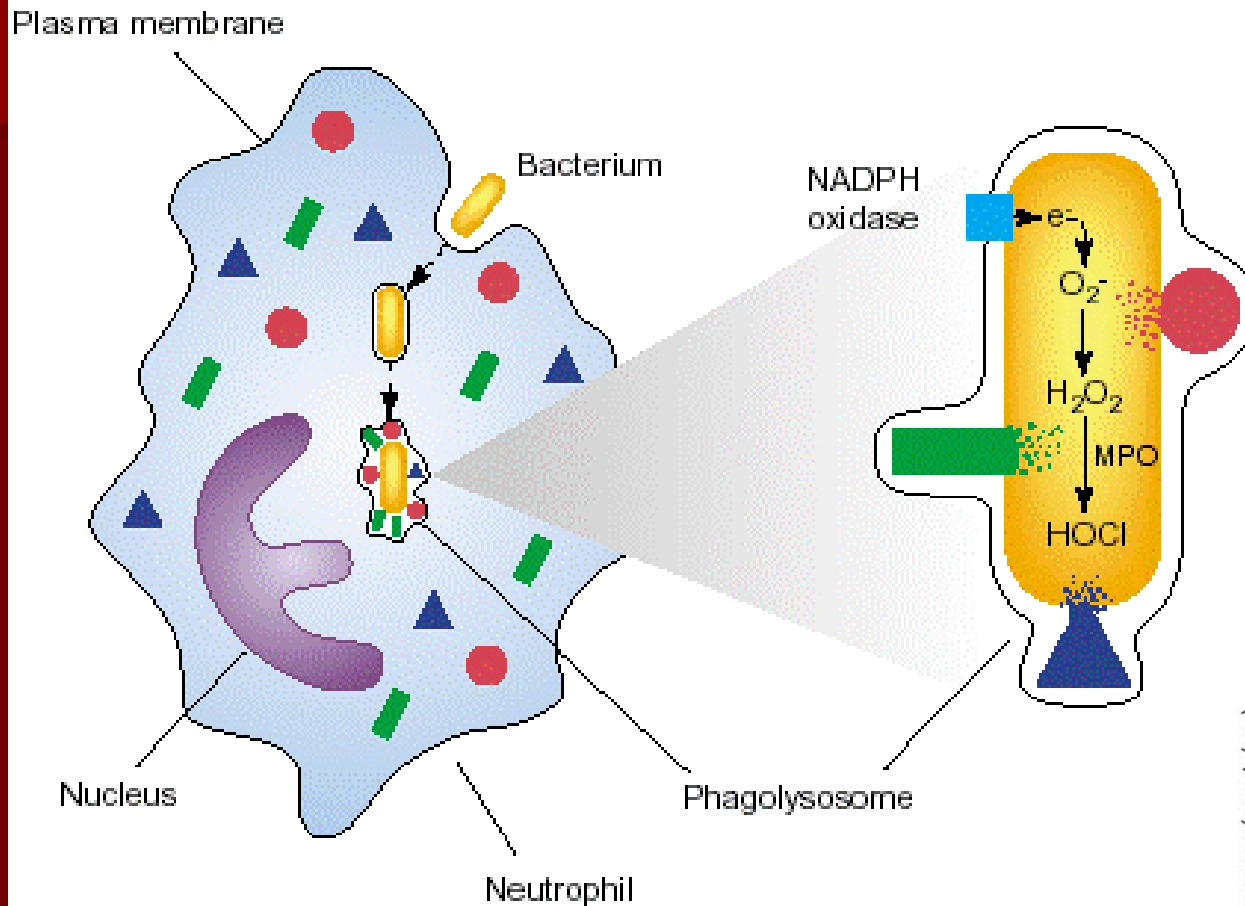
15^{ème} Séance

Effects of hyperbaric O₂

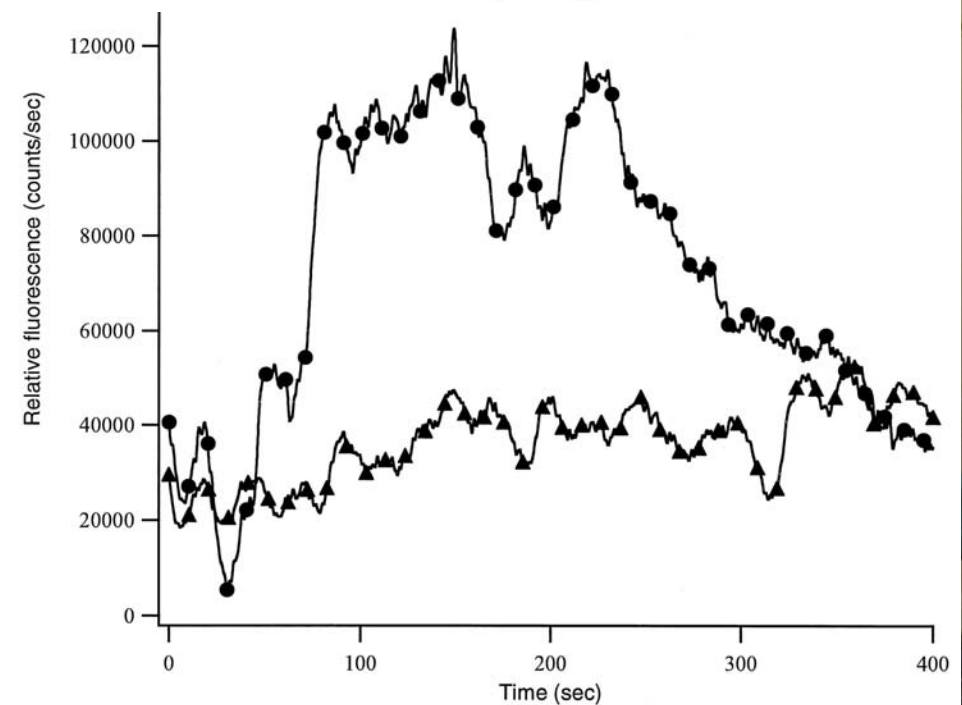
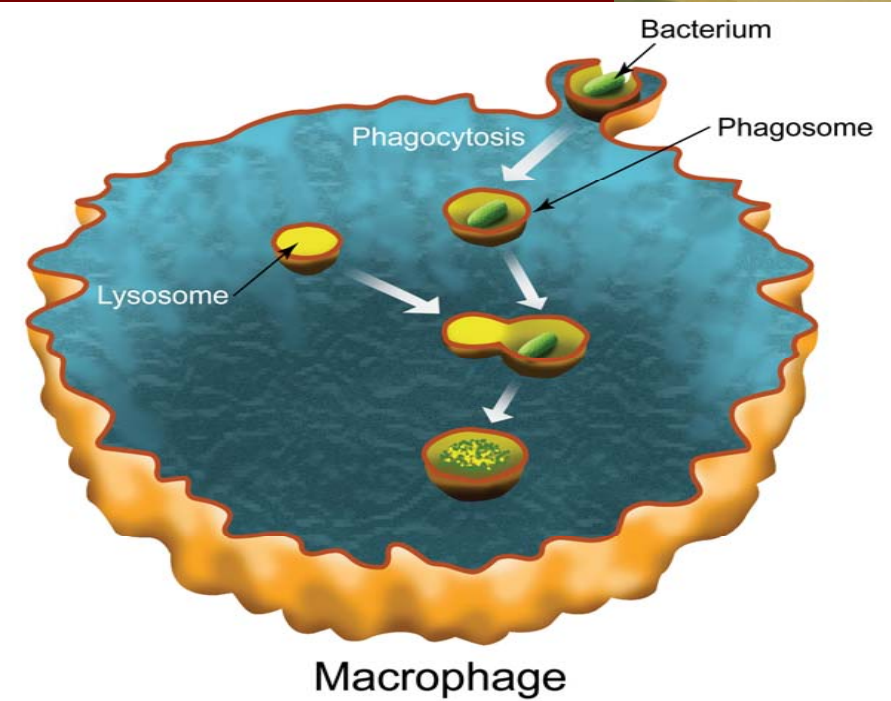
- Increased O₂ transport in blood
- Pressure effect (Boyle-Mariotte's law)
- Diffusion distance of oxygen increases
- Anti-infectious defense mechanisms
 - Direct (anaerobic bacteria)
 - Indirect (white blood cell function, ATB)



Effects of hyperbaric O₂

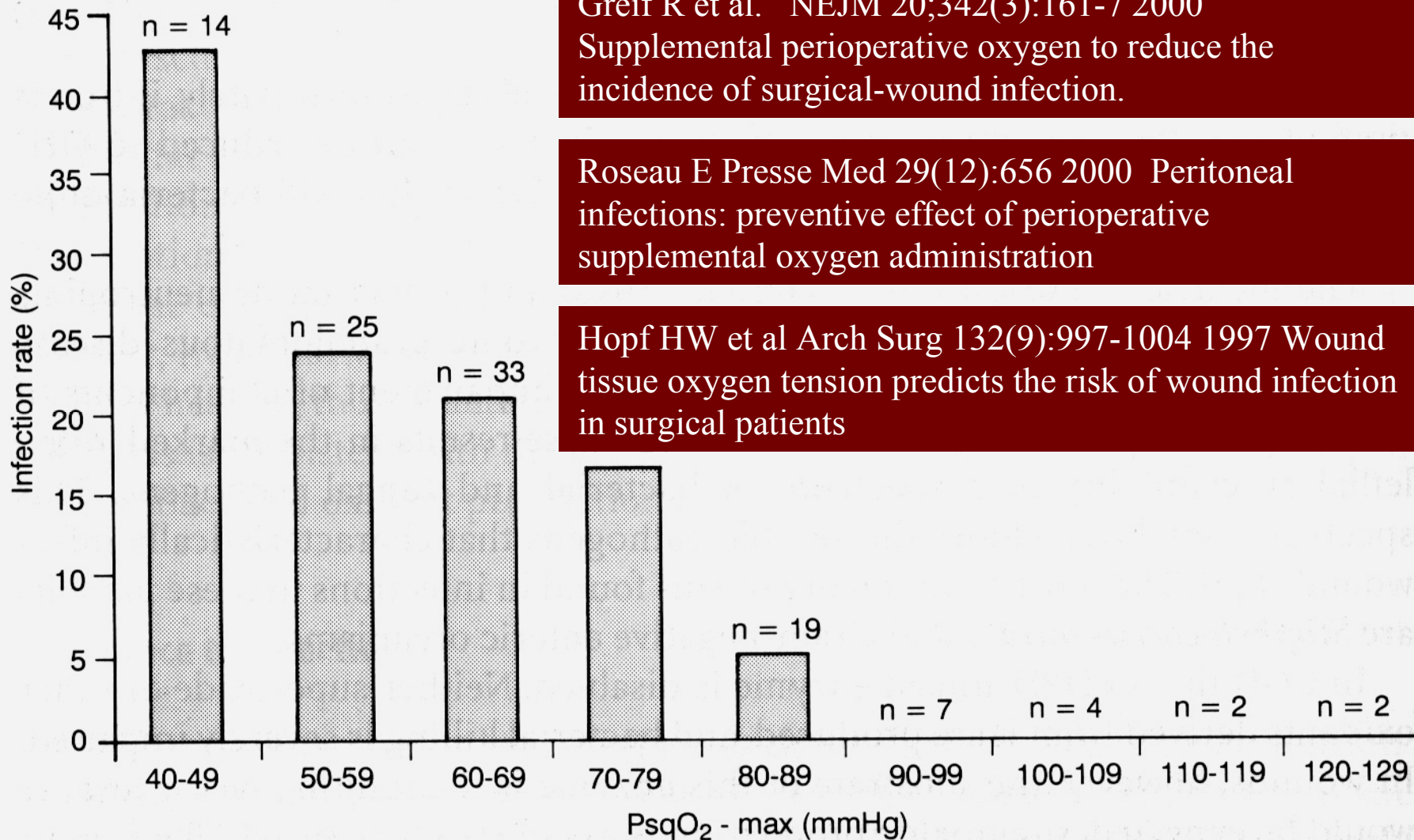


- Azurophilic granules
e.g.: CG, NE, defensins, MPO, BPI, lysozyme
- Specific granules
e.g.: hCAP-18, lactoferrin, lysozyme
- ▲ Gelatinase granules
e.g.: lysozyme, acetyltransferase, gelatinase



Effects of hyperbaric O₂

Infection rate in 153 operative surgical patients at high risk for infection - correlation with SC pO₂ (FiO₂ = 0.5)



Greif R et al. NEJM 20;342(3):161-7 2000
Supplemental perioperative oxygen to reduce the incidence of surgical-wound infection.

Roseau E Presse Med 29(12):656 2000 Peritoneal infections: preventive effect of perioperative supplemental oxygen administration

Hopf HW et al Arch Surg 132(9):997-1004 1997 Wound tissue oxygen tension predicts the risk of wound infection in surgical patients



Effects of hyperbaric O₂

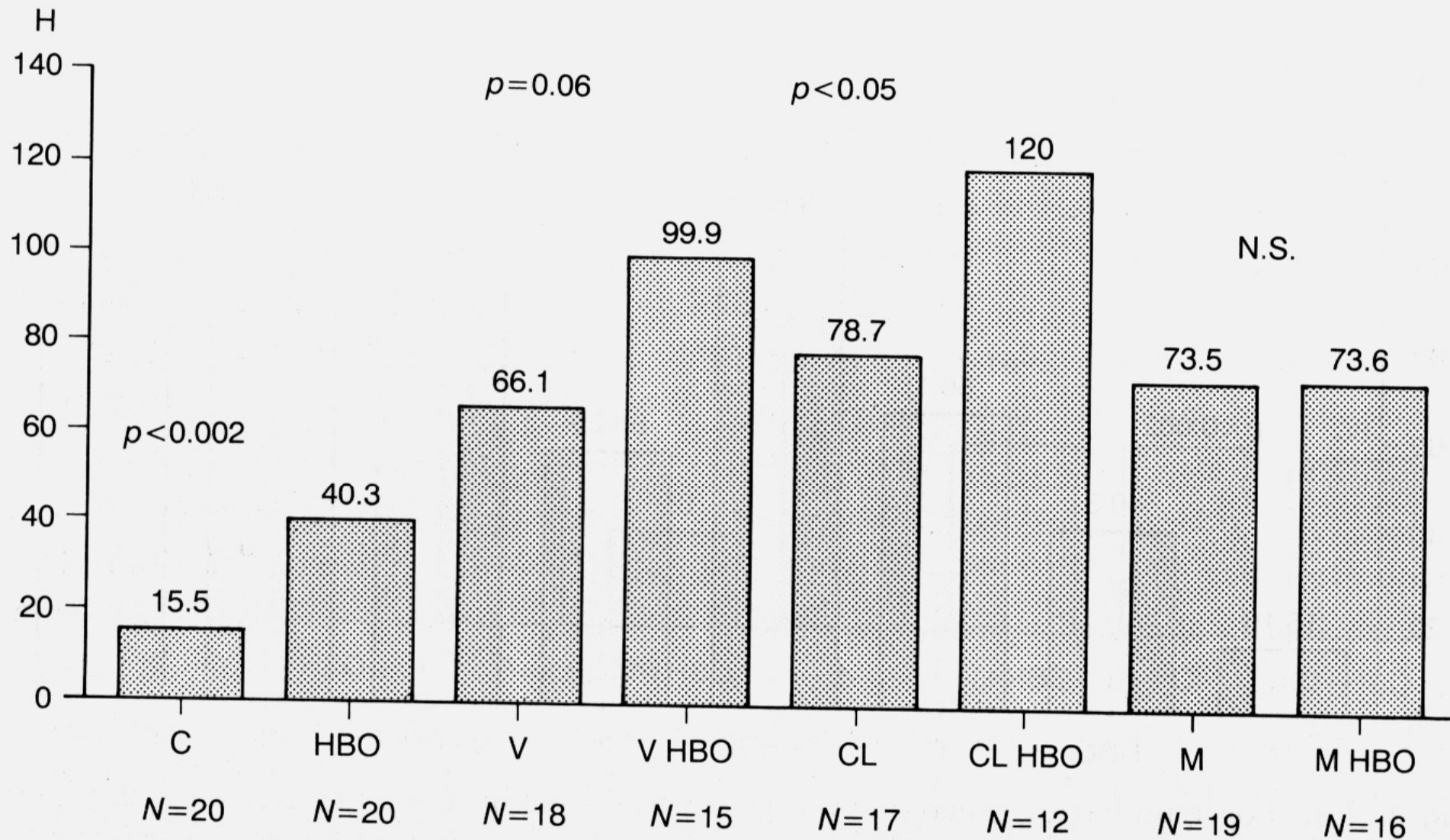


Fig. 5. Effect of hyperbaric oxygen on average survival time in septic rats treated with vancomycin, clindamycin, or metronidazole. (See Fig. 4 for explanation of symbols.)

Effects of hyperbaric O₂

- Increased O₂ transport in blood
- Pressure effect (Boyle-Mariotte's law)
- Diffusion distance of oxygen increases
- Anti-infectious defense mechanisms
 - Direct (anaerobic bacteria)
 - Indirect (white blood cell function, ATB)
- Stimulation of granulation tissue



“Oxygen as a drug” :

Indications

- Any disease where oxygen (maybe) plays a role ?
- Any disease where no other good treatment is available ?
- “A therapy in search of diseases” (Chest, 1987)



Evidence Based Medicine

- Level I evidence
 - Multiple RCTs of good quality: prospective, placebo controlled
- Level II – III – IV evidence
 - Small RCTs without placebo
 - Retrospective studies with patients as their own historical controls
 - Retrospective studies, uncontrolled
 - Case series
 - Animal studies



HBO Therapy Indication

1. Is there a (local or generalised) lack of oxygen ?
2. Does this hypoxia cause or aggravate the disease ?
3. Can HBO improve tissue oxygenation ?
4. Is there evidence that improving tissue oxygenation improves the disease ?
5. Is there a good "risk-benefit" ratio for this particular patient ?



Undersea and Hyperbaric Medical Society, 2010

1. Air or Gas Embolism
2. Carbon Monoxide Poisoning (incl. CO Poisoning Complicated by Cyanide Poisoning)
3. Clostridial Myositis and Myonecrosis (Gas Gangrene)
4. Crush Injury, Compartment Syndrome and other Acute Traumatic Ischemias
5. Decompression Sickness
6. Arterial Insufficiencies (Central Retinal Artery Occlusion, Enhancement of Healing In Selected Problem Wounds)
7. Severe Anemia
8. Intracranial Abscess
9. Necrotizing Soft Tissue Infections
10. Osteomyelitis (Refractory)
11. Delayed Radiation Injury (Soft Tissue and Bony Necrosis)
12. Compromised Grafts and Flaps
13. Acute Thermal Burn Injury



CONDITION	ACCEPTED		
	Level of Evidence		
	A	B	C
Type I			
CO intoxication		X	
Crush Syndrome		X	
Prevention of Osteoradionecrosis (dental extraction)		X	
Osteoradionecrosis (mandible)		X	
Soft Tissue Radionecrosis (cystitis)		X	
Decompression Accident			X
Gas Embolism			X
Anaerobic or Mixed Bacterial Anaerobic Infections			X
Type II			
Diabetic Foot Lesion		X	
Compromised Skin Graft and Musculocutaneous Flap			X
Osteoradionecrosis (other bones)			X
Radio-induced Proctitis / Enteritis			X
Radio-induced Lesions of Soft Tissues			X
Surgery and Implant in Irradiated Tissue (preventive action)			X
Sudden Deafness			X
Ischemic Ulcer			X
Refractory Chronic Osteomyelitis			X
Neuroblastoma Stage IV			X
Type III			
Post-anoxic Encephalopathy			X
Larynx Radionecrosis			X
Radio-induced C			X
Post-vascular P			X
Limb Re-implant			X
Burns >20 % of			X
Acute Ischemic			X
Selected Non-healing Wounds secondary to inflammatory Processes			X
Pneumatosis Cystoides Intestinalis			X



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Conditions where the use of HBO2 was supported by level A, B or C evidence were considered as accepted indications.

- Level A : At least 2 concordant, large, double-blind, controlled randomized studies with no or little methodological bias.
- Level B : Double-blind controlled, randomized studies but with methodological flaws; studies with only small samples, or only a single study.
- Level C : Consensus opinion of experts.

“Military” indications

(Ref RTG-192 NATO Working Group)

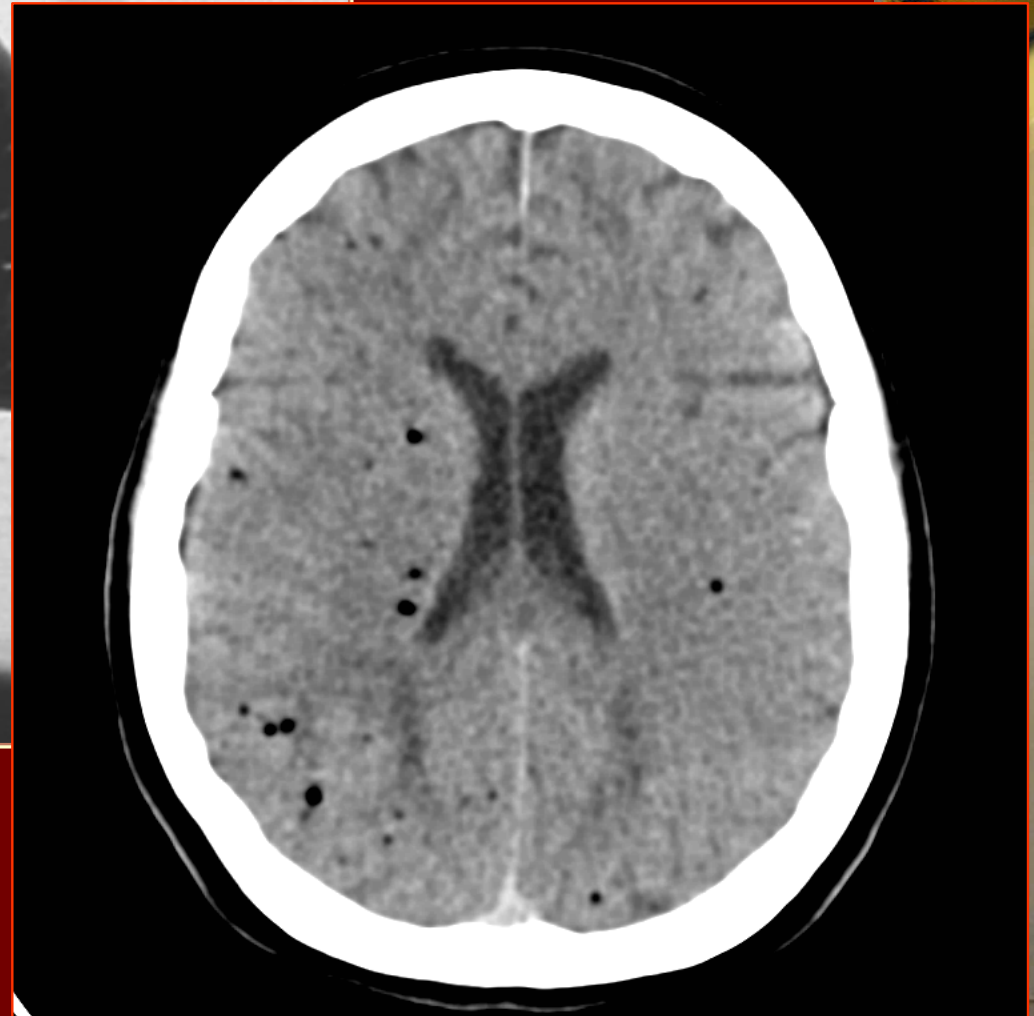
- Decompression Sickness
 - Air embolism
- Crush injury
- Carbon Monoxide Poisoning
- Acoustic (noise) trauma
- Burns
- Anaerobic soft tissue infections



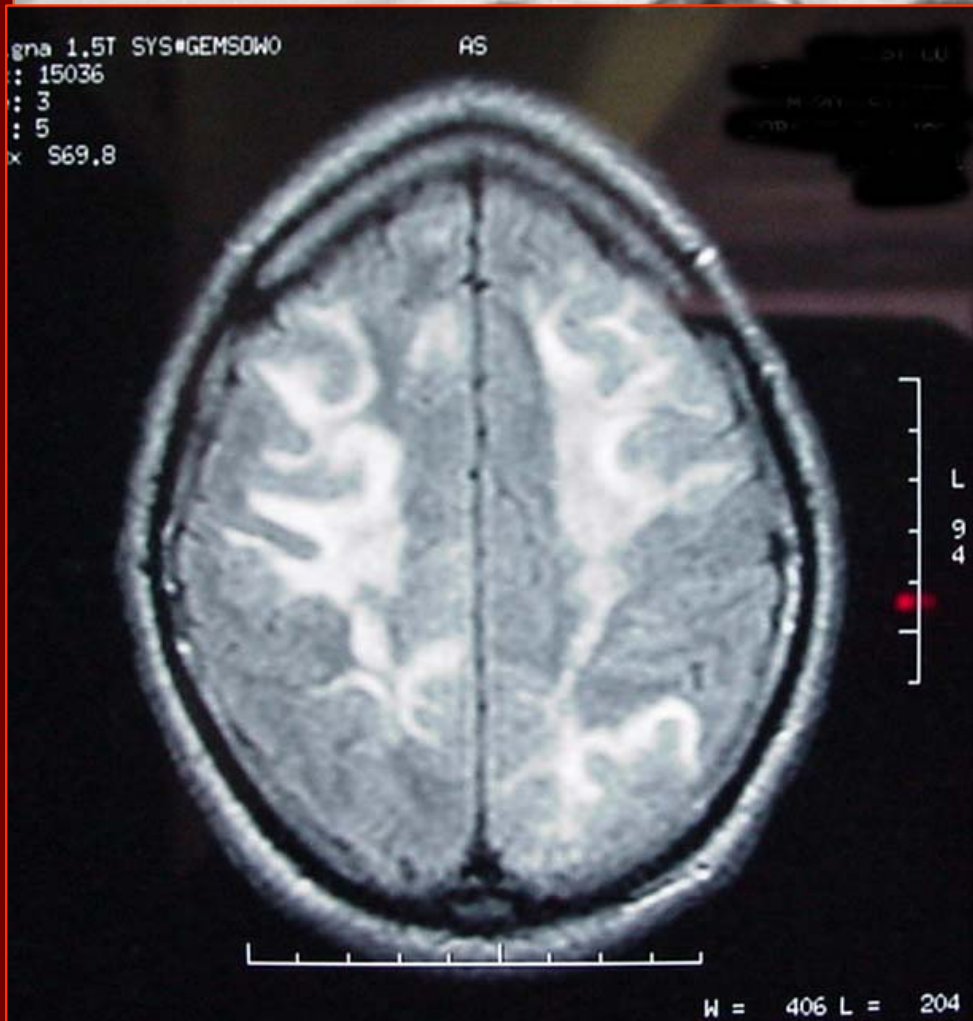
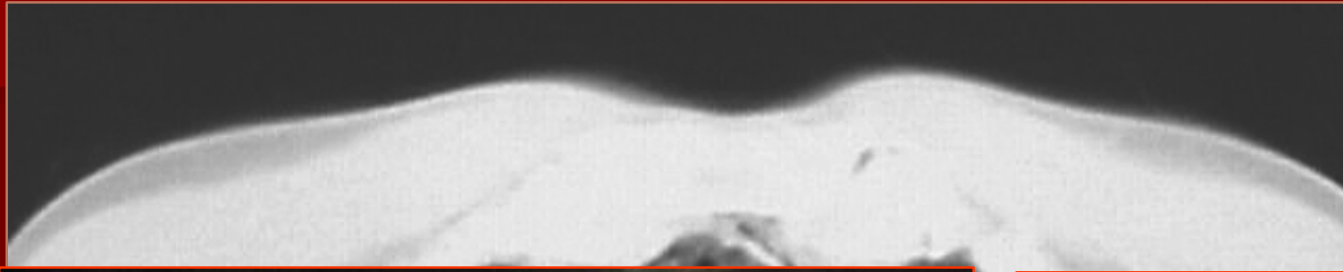
Air embolism



Air embolism



Air embolism



Air embolism



Air embolism



Crush injury

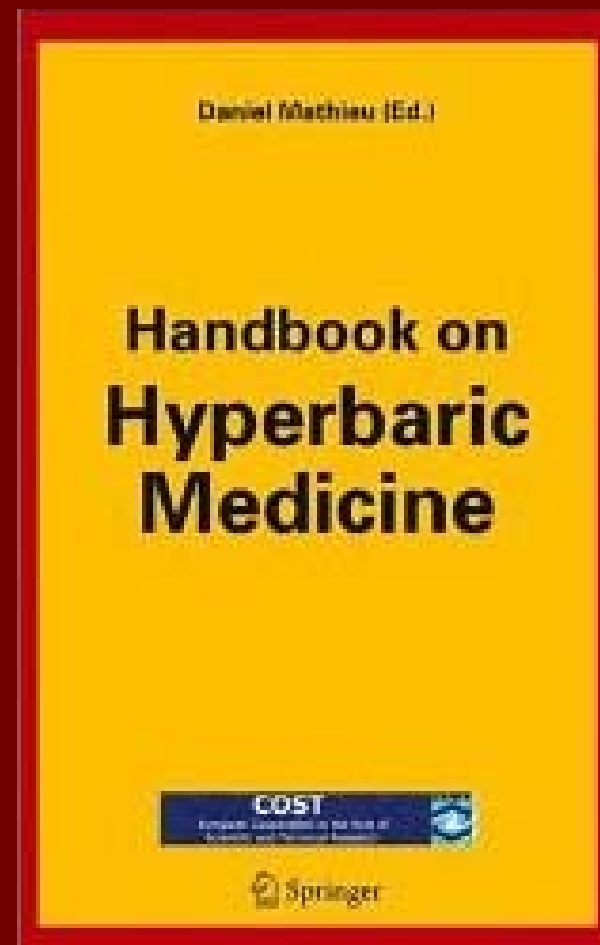


CO Poisoning



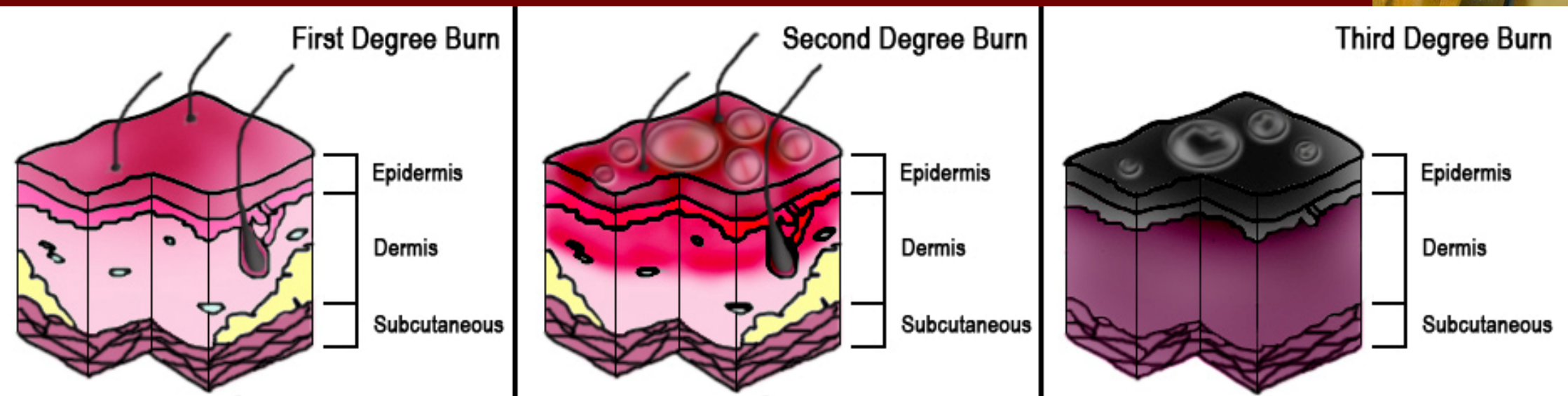
Anaerobic infections

- Animal studies
- Amsterdam Experience



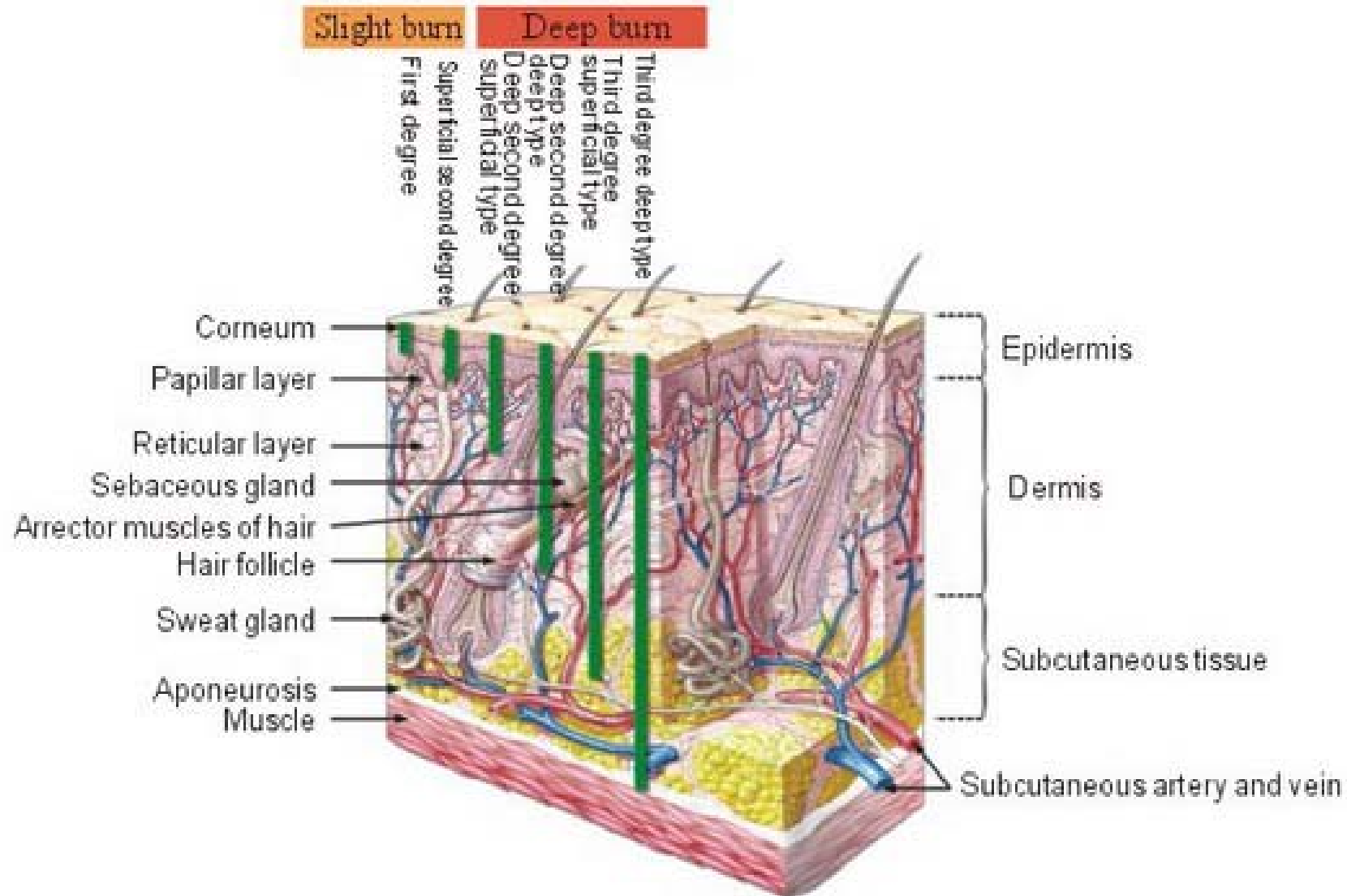
Burns

■ 3 Depth degrees of cutaneous burn



Burns

■ 3 Depth degrees of cutaneous burn



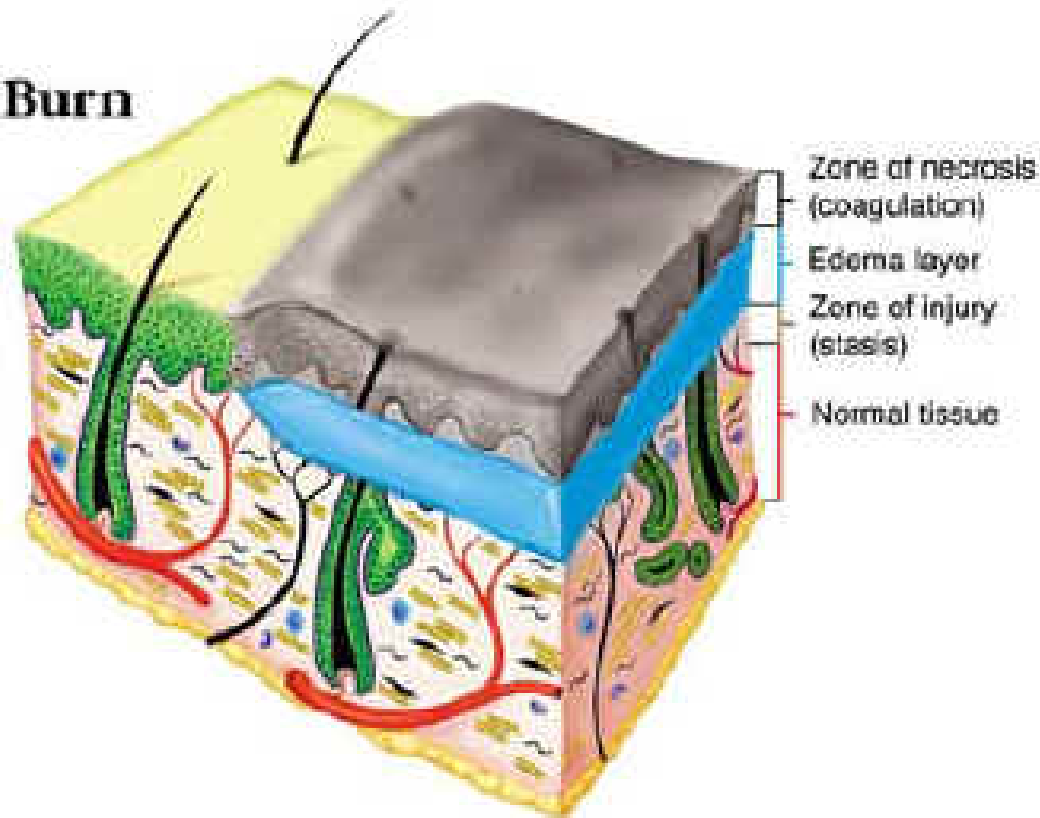
Burns

- 3 Depth degrees of cutaneous burn
- Increasing burn depth over 24 hours
- Jackson concept of 3 zones

Superficial Dermal Burn

Characteristics

1. Necrosis confined to upper third of dermis
2. Zone of necrosis lifted off viable wound by edema
3. Small zone of injury



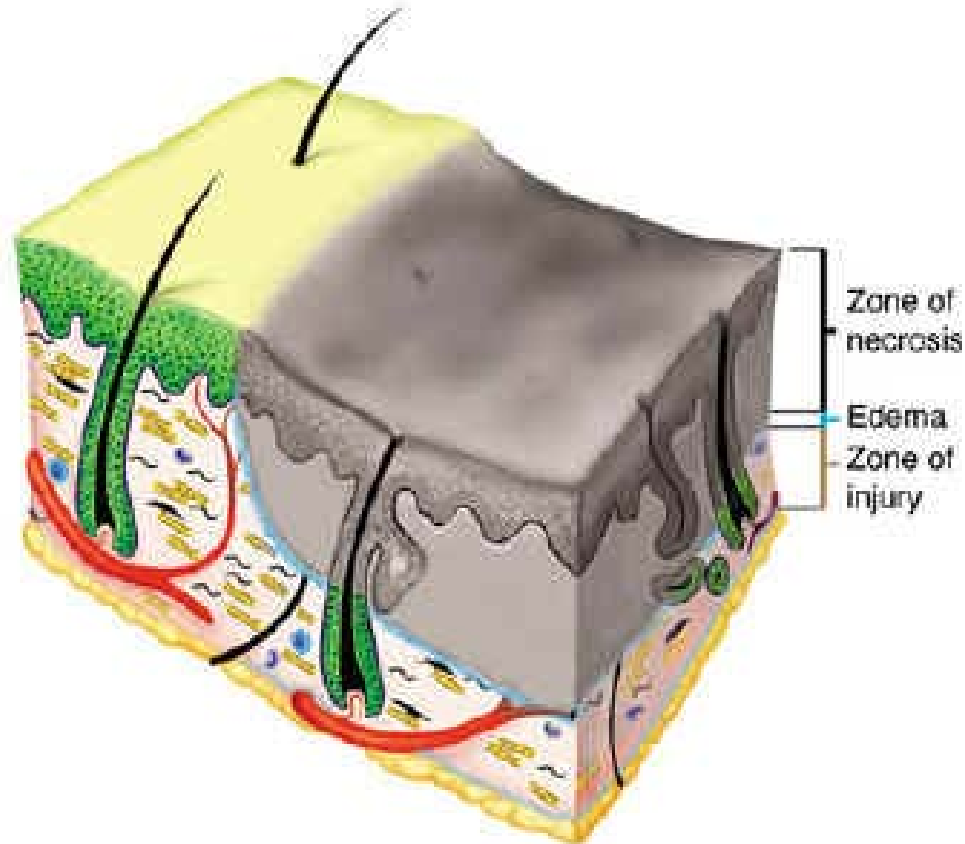
Burns

- 3 Depth degrees of cutaneous burn
- Increasing burn depth over 24 hours
- Jackson concept of 3 zones

Deep Dermal Burn

Characteristics

1. Necrosis involving majority of skin layers
2. Zone of necrosis adherent to zone of injury
3. Smaller edema layer



Experimental evidence

- Animal literature ++
- 1996 CHBO Study on rats
- 2000 CHBO Study 2 on rats



Experimental evidence

Piracetam and HBO in the acute treatment of burns

HYPOTHESIS:

Piracetam and/or Hyperbaric Oxygen Therapy can prevent the progressive deepening of burn injury.

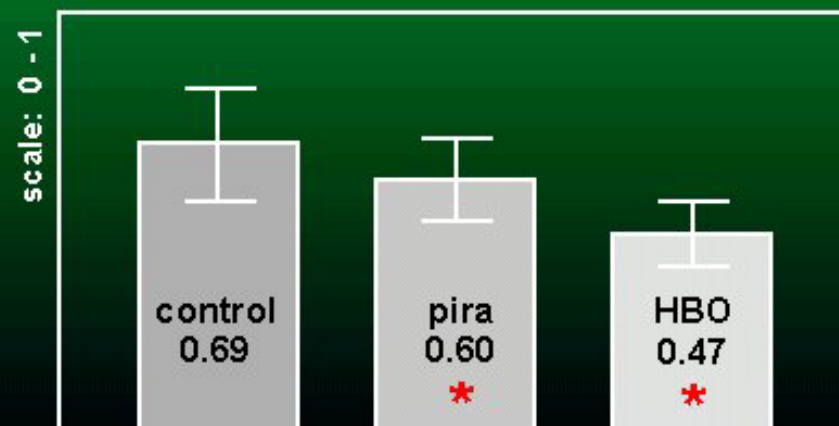
- optimal 'classical' treatment
- realistic time lapse before
- histological study

- development and validation of
- randomized, prospective, single

Piracetam and HBO in the acute treatment of burns

RESULTS

3. degree of inflammation



Experimental evidence

Study Protocol

- Wistar rats 300-350grs, general anesthesia, back shaved & depilated
- 40%TBSA burn by immersion (70°C water, 30sec)
- IP Ringer's Lactate 10mL
- randomisation 3 groups:
 - control sham burn
 - control burn no treatment
 - burn HBOT
- 4 measurement endpoints: 30, 120, 2 after burn

Conclusions

- paradoxically decreased MDA levels
~ less reperfusion damage
- CH50 values restored to ConNoBurn
~ less activation of complement system
- TNFa values within normal range
throughout 6 hours

HBOT is a safe therapeutic procedure
in this burn model



Experimental evidence

- Animal literature ++
- 1996 Study on rats
- 2000 Study 2 on rats
- Why not done ?
 - Clinical human RCTs lacking
 - Optimal environment HBO and ICU lacking



Acoustic Trauma

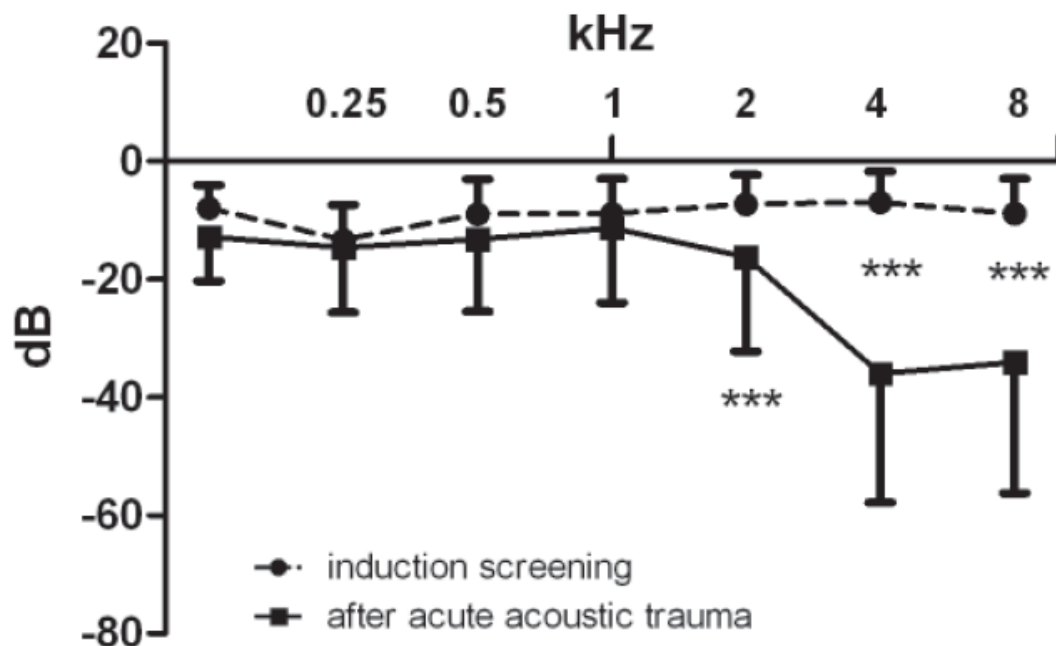
- Frequent, both in military and in civilian youth
- Impulse noise vs longer exposure
- Emergency treatment with HBO & corticosteroids = promising
- RCTs lacking
 - Comparison to hearing before trauma ?
 - Early (>36hr) treatment necessary



Acoustic Trauma

■ Lafere et al. *DHM 2010*

Comparison between the pure tone audiogram on enlistment into the army (baseline) and after acute acoustic trauma in the affected ear (all patients; *** $P < 0.0001$)



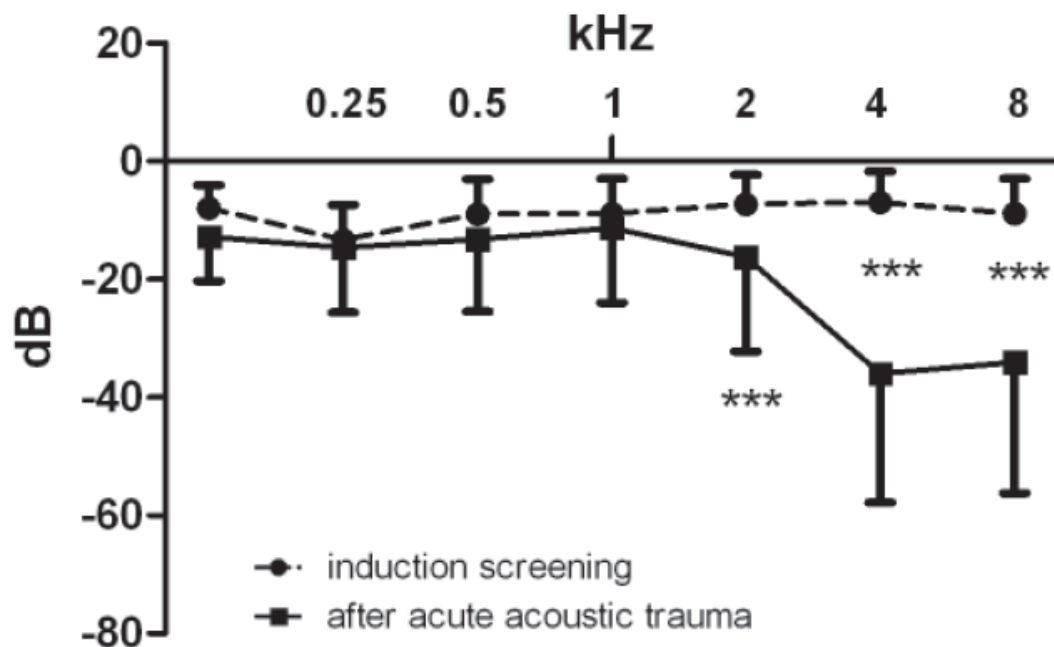
68 Belgian soldiers with acute impulse noise (gunshot) acoustic trauma



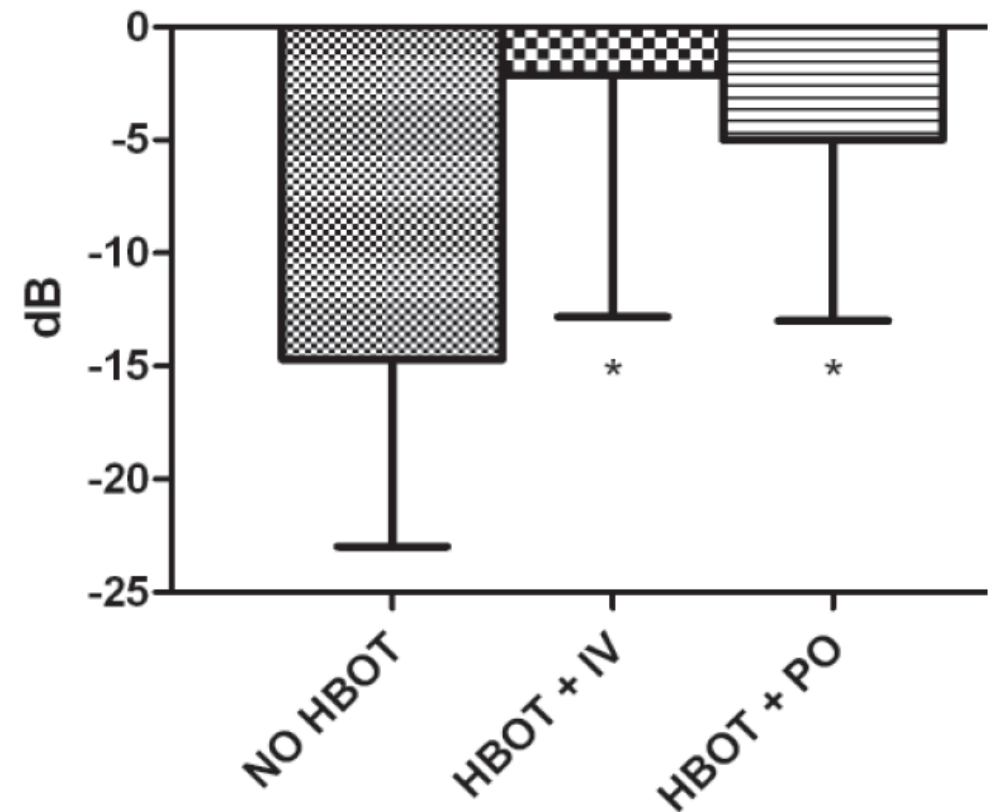
Acoustic Trauma

■ Lafere et al. *DHM 2010*

Comparison between the pure tone audiogram on enlistment into the army (baseline) and after acute acoustic trauma in the affected ear (all patients; *** $P < 0.0001$)



The average residual hearing loss in the three treatment groups (see text; * $P < 0.05$)



Dangers of HBO therapy

- Transportation
- Compression
- Stay at Depth
- Decompression



Dangers of HBO therapy

- Haemodynamically unstable patients should not be moved !
- Barotrauma of the ears
 - Common (10-20%)
 - Preventable
 - Rarely serious
- Hyperoxic seizures
 - Seldom (1 in 1500-5000 treatments)
 - Unpredictable (but...)
 - No sequelae



Dangers of HBO therapy

- Uncontrolled use
 - Diseases with large impact of QoL
 - For which there is no cure
 - For which evaluation of effects is mainly subjective
 - Gives HBO “a bad name”
- Examples...
 - Multiple Sclerosis
 - Chronic Fatigue
 - Autism
 - Cerebral Palsy
- Never say never...But: proof must be given



Hyperbaric4Autism.com
 Best Price...Plus FREE Doctor's Advice

Buy or Rent? Free Consult. Call Now.
Toll Free: 1-866-952-5483
 Not currently using Hyperbaric to treat your child? [Click Here For Info](#)



Hi. I'm Doctor Harold Grams. I use the **Defeat Autism Now!** philosophy and protocols in my care of autistic children.

I've been successfully treating autism with hyperbaric oxygen for over 7 years.

Are you going to a doctor's office now for hyperbaric treatment? And are you looking for a way to control your costs and see the **fastest** possible improvements in your child's autism?

Please call me now to discuss how to get started with hyperbaric treatments in your home--as soon as possible.

I've helped people all over the U.S. and in over 10 countries worldwide to effectively use hyperbaric oxygen to significantly reduce symptoms and **defeat** their children's autism

Tired of the time, cost, and hassle of going to your doctor's office for hyperbaric treatments?

Now you can buy, or rent, a hyperbaric chamber and give your child much-needed treatments in the convenience of your home. This is the most affordable way to bring the healing power of hyperbaric oxygen to your child.

With a portable hyperbaric chamber in your home your child will get double or triple the number of treatments you might be able to schedule at your doctor's office. More treatment sessions means more likelihood your child's symptoms will improve faster. Plus you will save \$1000s of dollars on treatments--and your valuable time.

Choose the best chamber for your personal size and for your budget.

All our chambers work at 4 psi (pounds per square inch). Since all provide the same treatment...the only question is which size chamber is right for you? Which chamber fits your budget? And is it better to buy or rent?

VITAERIS 33.5 inches tall, 7'9" long, 190 cubic feet

Includes chamber, inner frame, mattress, bolster pillows to stabilize chamber, compressor and all hoses and attachments.



Oxyhealth chambers are the originals--used and trusted by more DAN doctor's worldwide than any other. These are FDA approved, medical grade quality,

Rental Savings:\$3,405

The Vitaeris is the chamber of choice for many families who have active children, larger children, or who are uncomfortable in the smaller other chambers.

The Vitaeris is 33.5" tall. This lets an adult prop up with a pillow at a comfortable angle...and leaves lots of room for a child to play in the "submarine" during treatments.

We have put large, immobile stroke patients into this chamber using a special mat. This chamber comes with 2 compressors. This gives more air and makes it a bit cooler inside than the smaller chambers. This is more comfortable for some people.

Home

Autism Nutrition Nutritional & biomedical support for children with autism

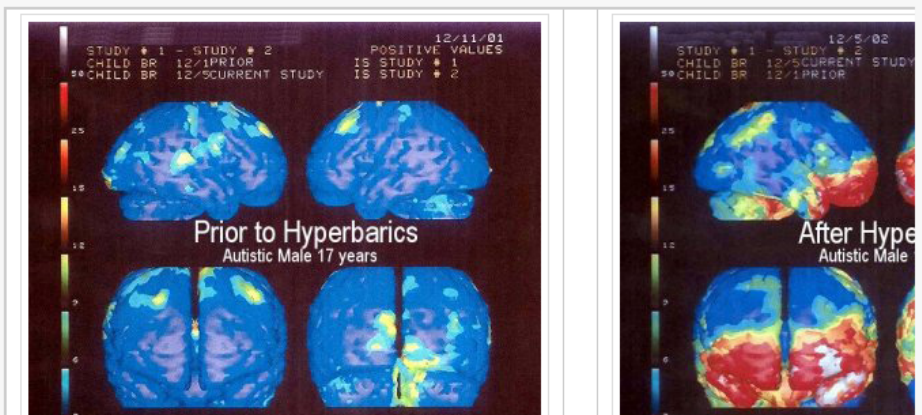
Efficacy of Hyperbaric Oxygen Therapy for Autism

The use of hyperbaric oxygen therapy for the treatment of autism is relatively recent and so there is not a great deal of scientific evidence specifically related to it, but some positive study results are beginning to come in. At the same time, there are many testimonies from families that have used HBOT as an autism treatment for their autistic children and the results have mostly been encouraging.

To gauge the efficacy of HBOT, the brain can be monitored for its perfusion – the extent to which it is supplied by blood – and its activity. At the same time, we can monitor the behavior, response to stimuli (sensory function) and motor skills of the autistic individual, to determine if hyperbaric oxygen therapy has produced any positive results. In addition, hyperbaric oxygen therapy has been used for many years – and proven effective – in the treatment of cerebral palsy, which involves serious damage to brain cells.

Brain SPECT scans

Monitoring of cerebral blood flow can be done with a Brain SPECT (Single Photo Emission Computed Tomography) scan. SPECT scans before and after mild HBOT sessions have shown dramatic improvements in cerebral blood flow that is sustained over time.





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HBOT

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- Crohn's Disease
- Fibromyalgia
- Lyme Disease
- Multiple Sclerosis



Hyperbaric Oxygen Therapy, Alzheimer's and Dementia

by Rashmi Gulati, MD

Alzheimer's is a progressive brain disorder affecting areas of the brain that control behavior, memory, and cognitive thinking skills. Alzheimer's symptoms include loss of memory, difficulty performing familiar tasks, problems with language, disorientation to time and place, poor or declining judgment, difficulty with abstract thinking, and changes in personality. As the nervous system deteriorates there may be involuntary muscle reflexes.

Some toxic metals like aluminum, arsenic, cadmium, lead, mercury, and nickel are taken into our bodies through the air, food, and water. The toxic effects of these metals can remain in our bodies for years, and have been linked to Alzheimer's disease, aluminum toxicity, and mercury poisoning. per million of aluminum in human blood can cause it to coagulate. This slows d shuts off the flow of blood in smaller vessels. Brain cells will die without blood i

Hyperbari

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Banishing Cellulite with Hyperbaric Oxygen Therapy

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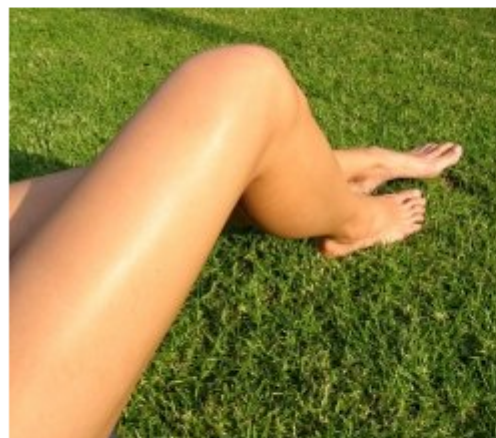
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How to look great on the beach!



Cellulite can be a real problem when you're wanting to look good on the beach. But don't send those high-cut summer shorts and flirty mini skirts to the charity shop just yet. There are therapies which can help with cellulite, and hyperbaric oxygen therapy is one of them.

But what is hyperbaric oxygen therapy and how does it work?

Hyperbaric oxygen therapy is also known as hyperbaric medicine, and involves the use of oxygen at higher pressures than usually experienced with atmospheric pressure.

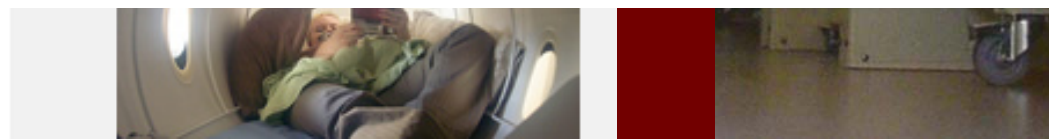
About Us Services/Health Pillars Anti-Aging Supplements



Hyperbaric Oxygen Therapy



It is a safe, powerful, non-evasive alternative treatment that is used for a wide variety of different symptoms and disorders. [view treatable conditions](#)



And even...

Interest in HBOT by the equine industry is due to its ascribed beneficial effects on the healing of lower limb wounds, which remain a major health problem to man and horses worldwide. Slow-healing wounds or those that fail to heal can result in prolonged hospitalisation, numerous surgical interventions and time-consuming wound care. Slow healing is particularly inconvenient and challenging for high-performance human and equine athletes.



And even...

