Non-invasive stroke volume assessment using the thoracic electrical bioimpedance – advances in impedance cardiography

Von der Fakultät für Elektrotechnik und Informationstechnik der Rheinisch-Westfälischen Technischen Hochschule Aachen zur Erlangung des akademischen Grades eines Doktors der Ingenieurswissenschaften genehmigte Dissertation

vorgelegt von

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- advances in impedance cardiography

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Abstract

Monitoring the human stroke volume or cardiac output non-invasively is a challenging task which has kept scientists and researchers occupied for decades. Impedance cardiography provides the possibility to estimate the stroke volume using a harmless alternating current (AC) injected into the body. This thesis presents new research in this field.

A new application area in medical care is introduced in the form of a wearable impedance cardiograph integrated into a shirt for home monitoring in a personal healthcare scenario. Therefore, conductive textile materials were analyzed and used as electrodes and electrical wiring in a suitable garment. The garment provides an easy connection to the lightweight hardware which transmits the data wirelessly to a receiving station. Thus, monitoring patients 24/7 is possible.

In addition, physiological sources contributing to the impedance waveform were analyzed using a 4D model of the human thorax and finite element simulations. The results show that blood conductivity changes due to red blood cell orientation are the major contributor to the impedance signal. The second factor influencing the impedance is aortic wave propagation, whereas lung conductivity and heart volume changes compensate each other.

With this model, negative influences of heart failure on the measured impedance were identified. These results were verified by results obtained from clinical trials: a recompensation study and a pleural drainage study. It could be shown that with increasing lung conductivity due to lung edema or pleural effusion, the impedance decreases, leading to a lower stroke volume.

Furthermore, improved algorithms to assess characteristic points in the impedance cardiogram were introduced, performing better than those in a commercially available reference device. Therefore, the discrete wavelet transform was used to get better estimates for the opening and the closure of the aortic valve as assessed by Doppler echocardiography.

Last but not least, completely new application areas outside classical medical care scenarios were made accessible by human trials. In one trial, the feasibility of impedance cardiography to estimate the blood alcohol content was analyzed, showing promising results. In another trial, the stroke volume of sport divers was assessed to characterize different stages of underwater apnea. It could be shown that the stroke volume decreases in the easy-going apnea phase and increases in the subsequent struggle phase dominated by diaphragm contractions.

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