

## Lecture 12: Respiration (Spirometers)

### 0. Review

#### 1. Basics of Lung Anatomy

#### 2. Spirometers

#### 3. Pneumotachometers

- PreLab 5 due at lab session

- Thu: HW 5 due

- Lab 4 report due Fri (Feb 21)

★ Ellis Hospital Tour

Mar 10 (Tue)

GROUP 1: 12:45 - 2:30 PM

2: 2:45 - 4:30 PM

★ Student presentations (Mar 10 + 12)

→ Teams of 2-3 students (3 is preferable)

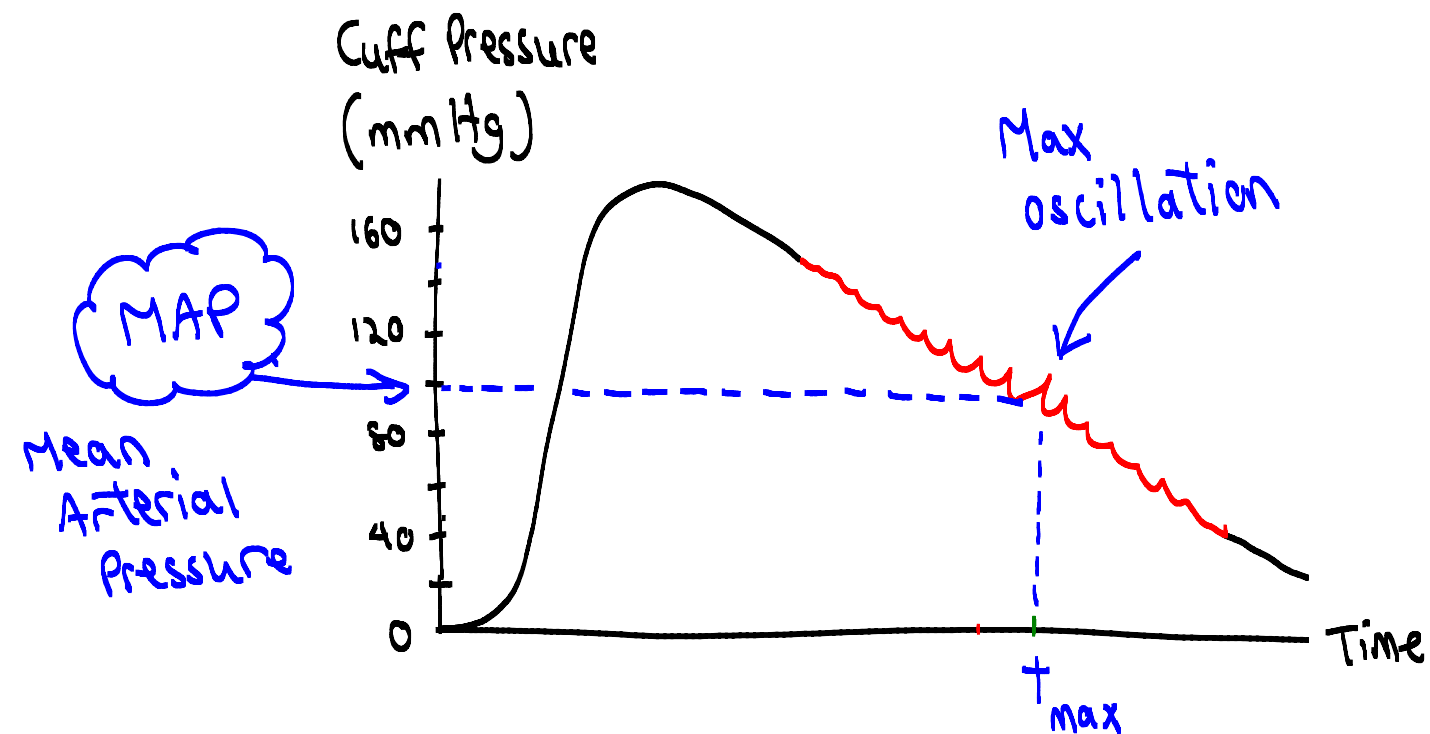
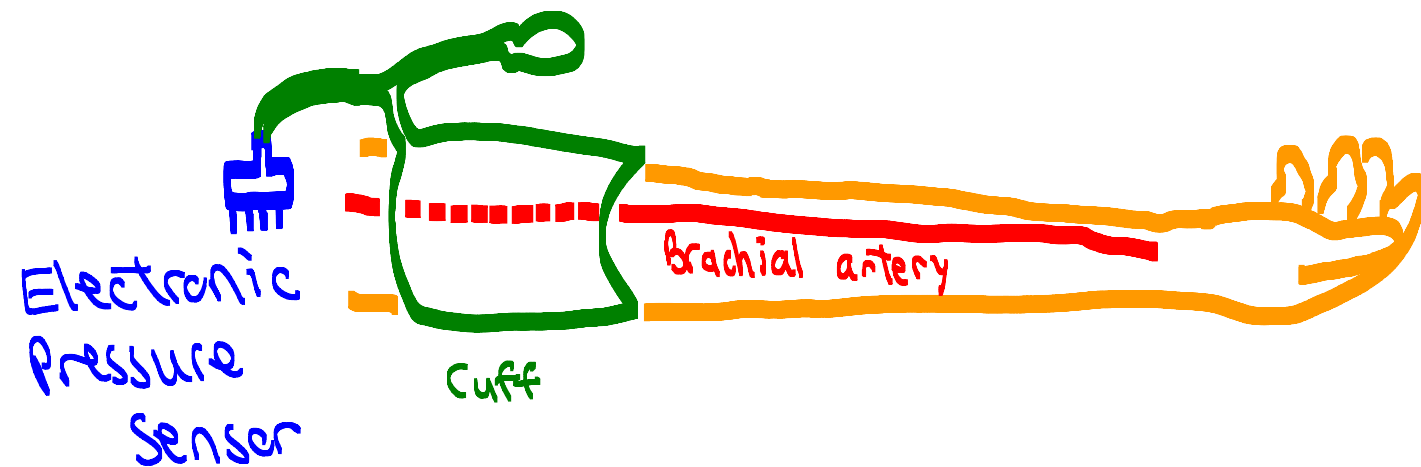
→ 15 min powerpoint

- Disease or medical condition
- Electronic instrumentation

← See course website  
for guidelines

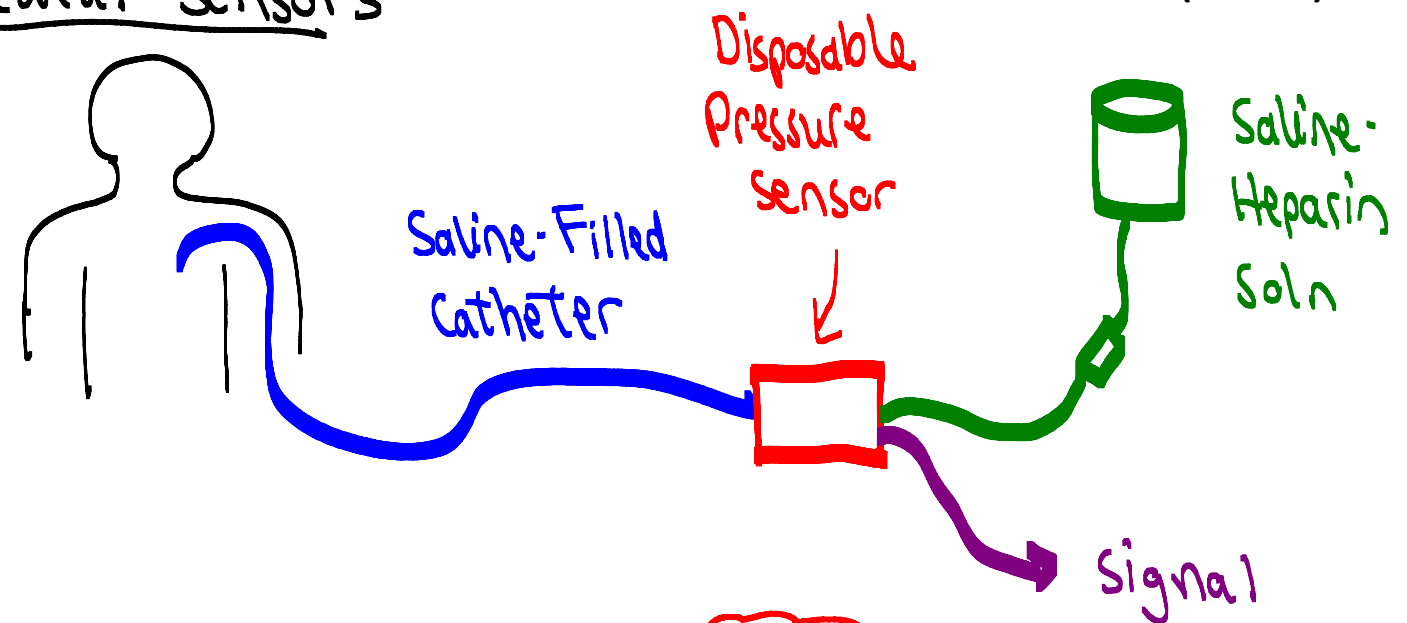
# 0. Review

## ① Oscillometric Method



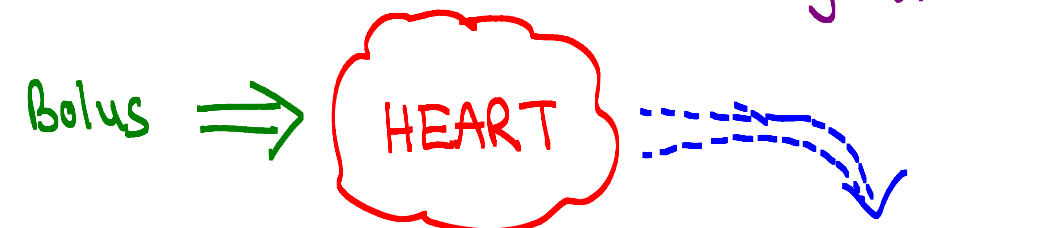
## ② Extravascular Sensors

(12.0)



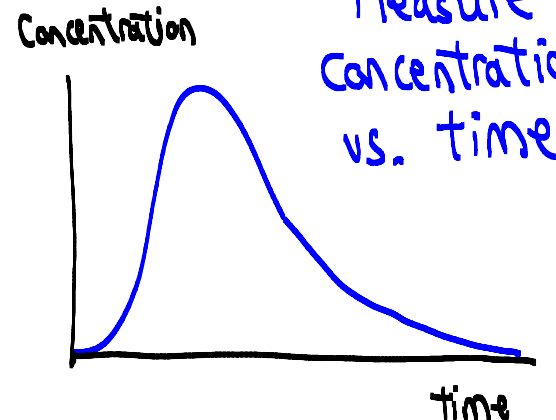
## ③ Cardiac Output

Liters/min



Indicator Dilution Method

$$F = \frac{\text{Quantity of Indicator}}{\int [\text{Concentration}] dt}$$



Thermodilution is common technique

# 1. Basics of Lung Anatomy

• Purpose of respiratory system:

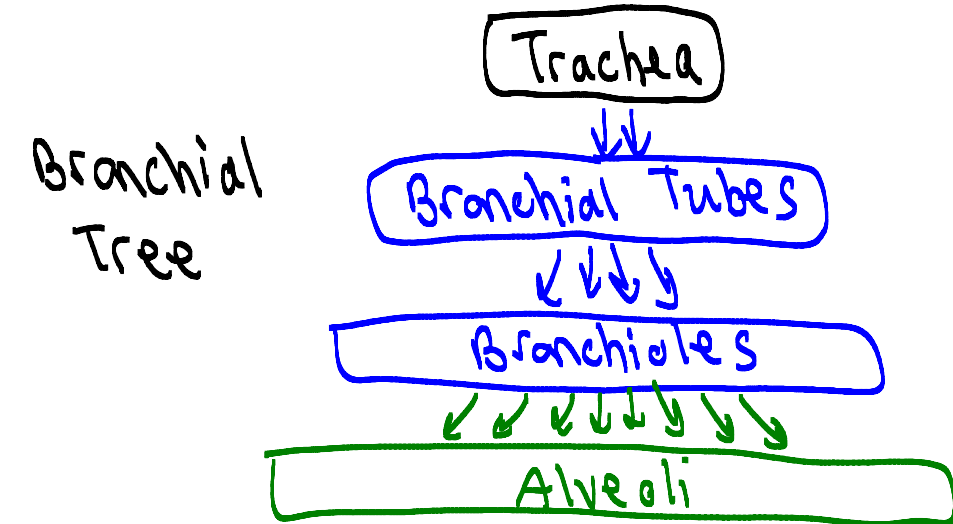
- ① Deliver  $O_2$  to blood
- ② Remove  $CO_2$  from blood ← and other gas waste

Ventilation  $\equiv$  movement of air into and out of lungs

Breathing Rate (12.1)

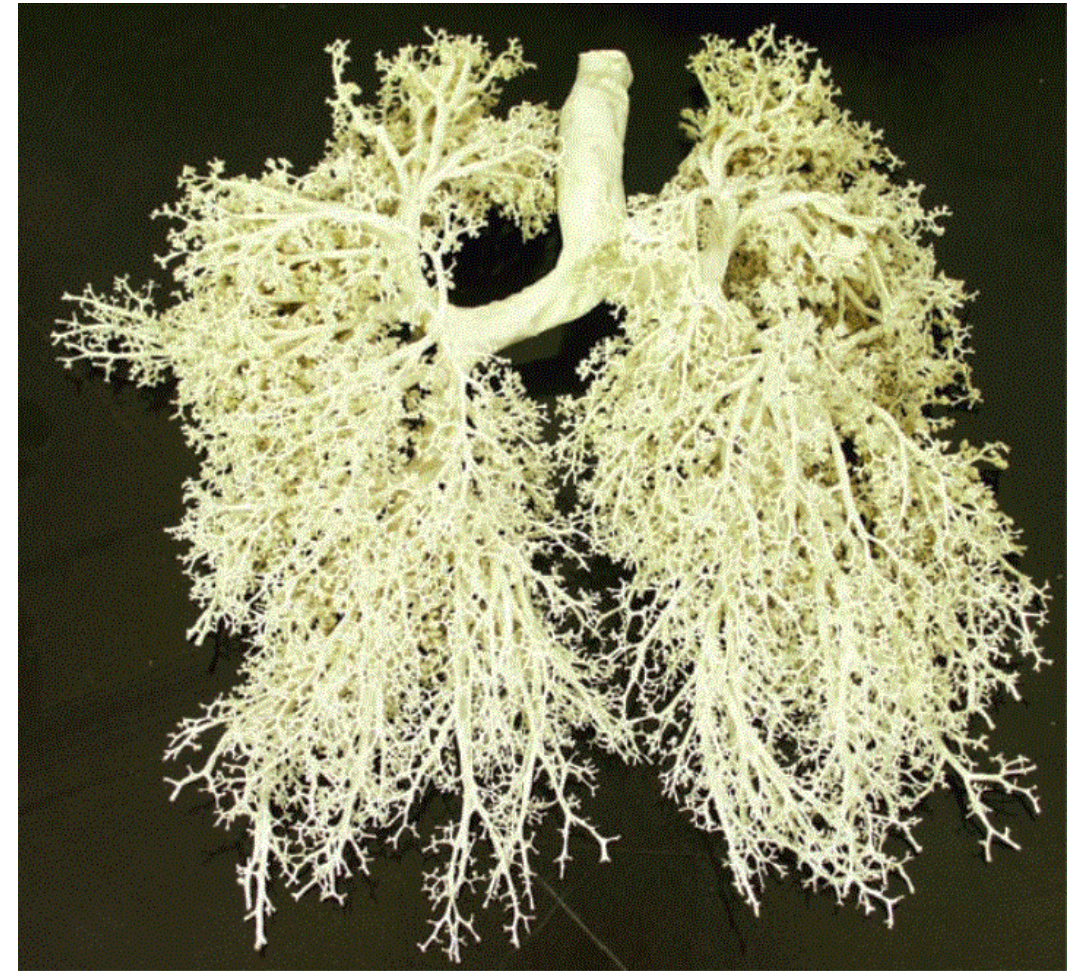
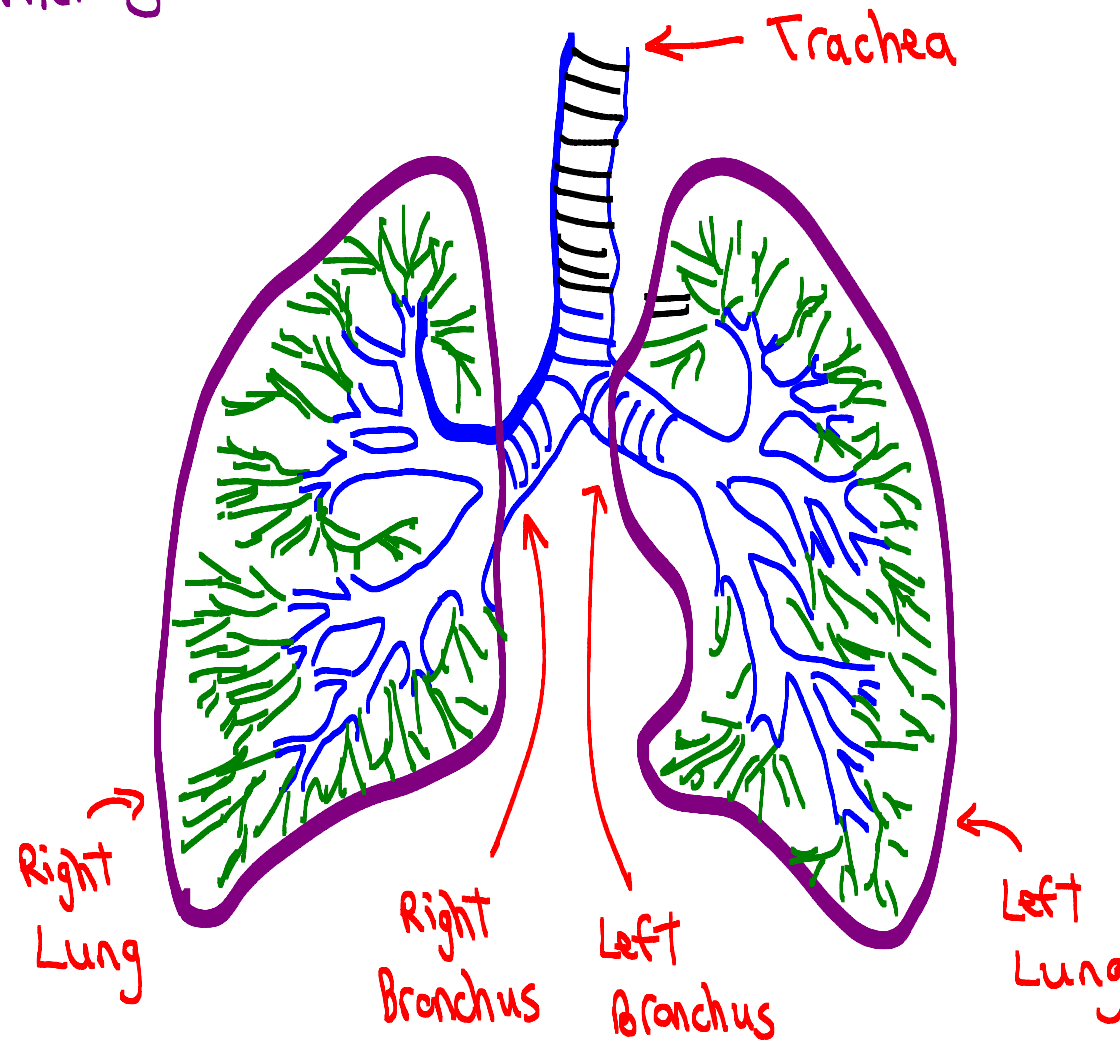
$\sim 6$  Liters/min rest

$\sim 75$  Liters/min exercise



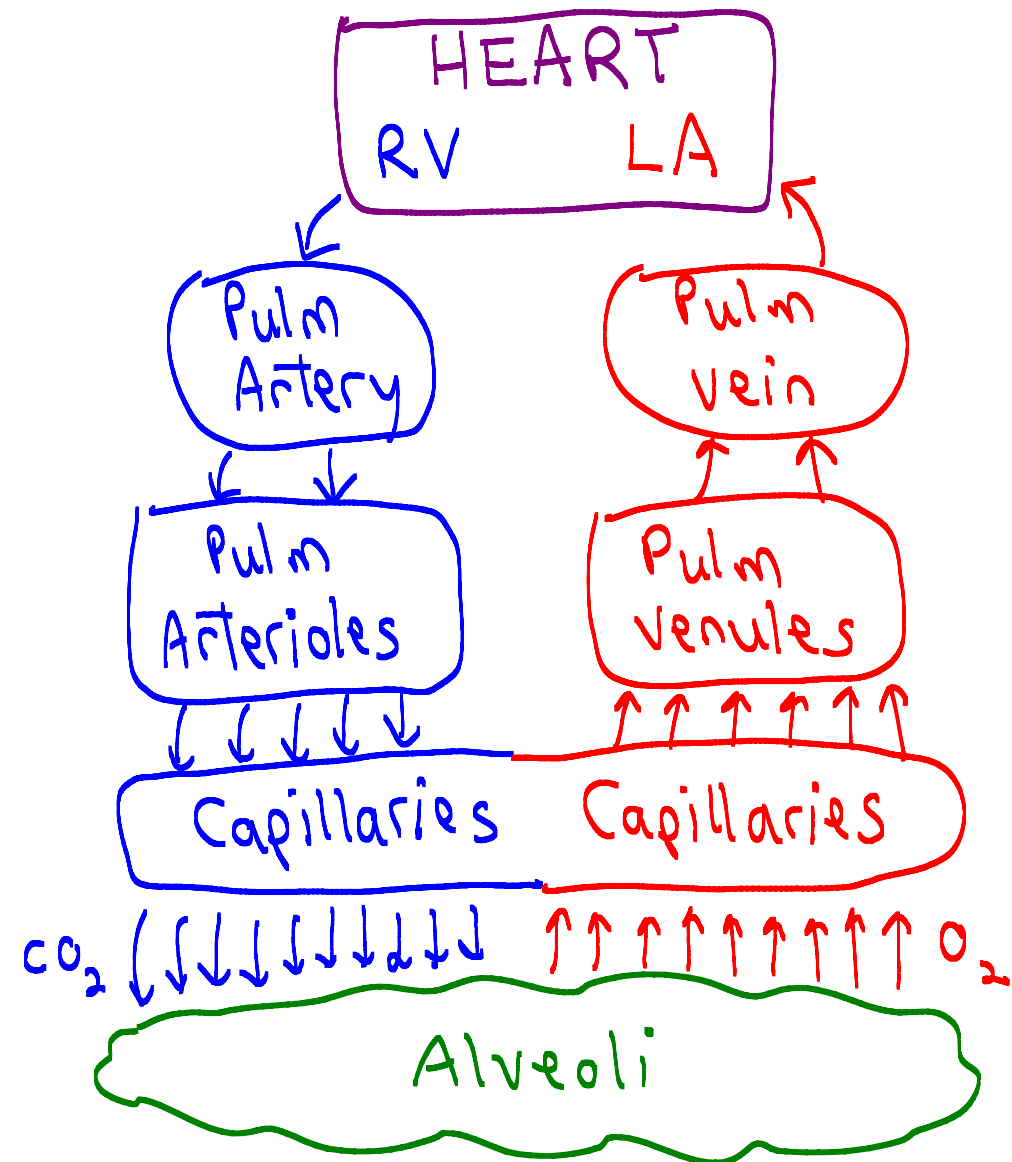
Gas is exchanged between alveoli and capillaries

$\sim 300$  million alveoli have same surface area  $\nabla$  as a tennis court.

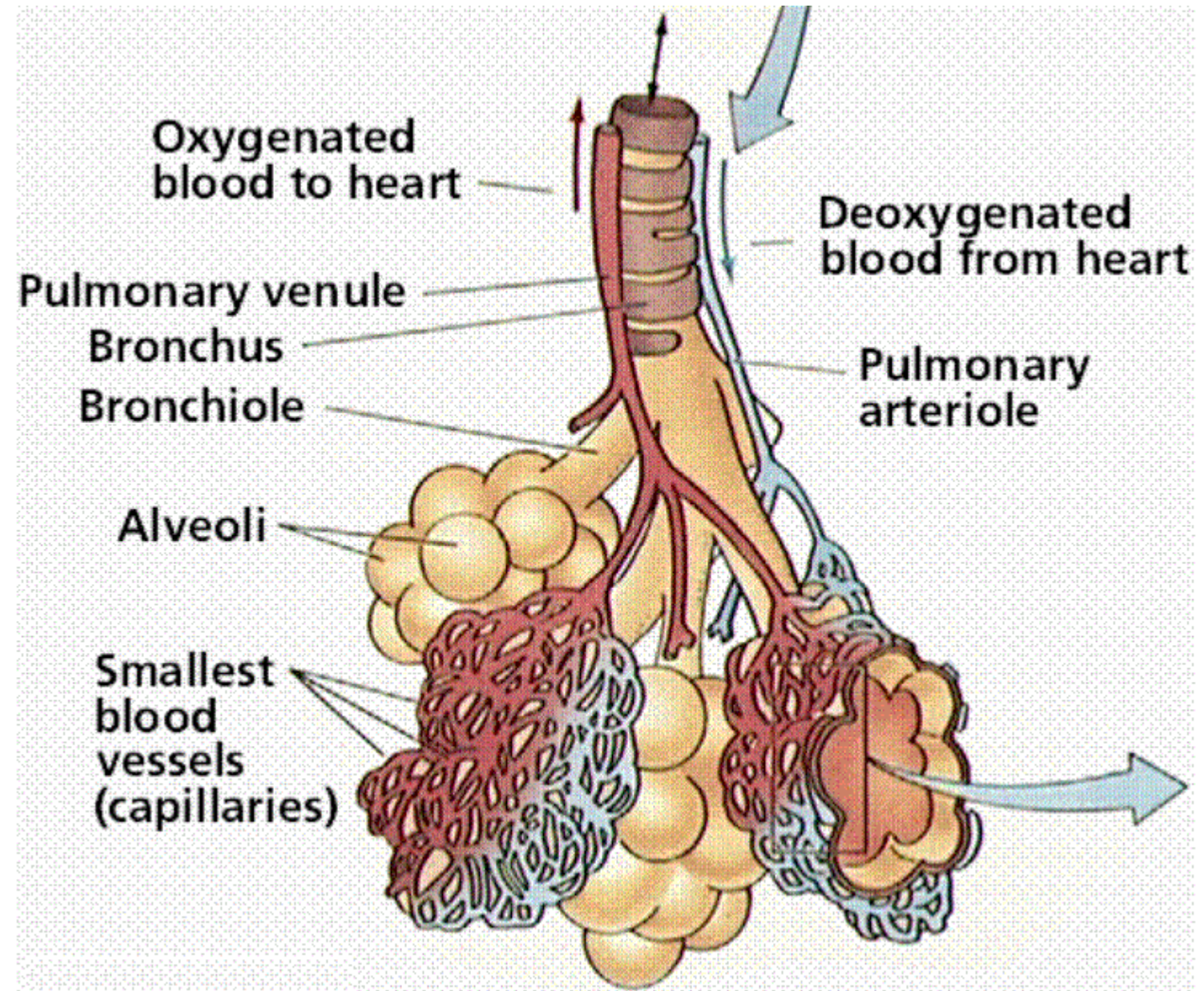


F. deJongh, Breathe, pp. 251-254 (2008)

• Bronchial Tree + Pulmonary Vasculature



Gas exchange between alveoli and capillaries!

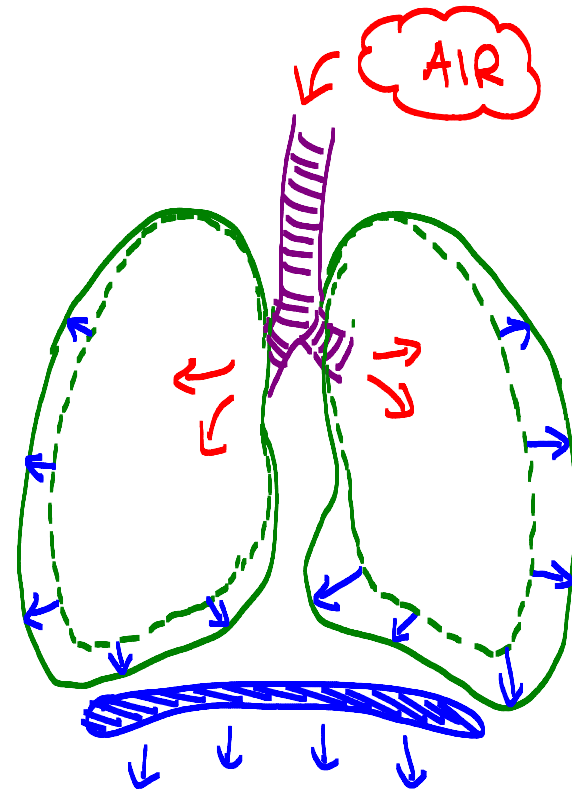


emc.maricopa.edu

## • Ventilation

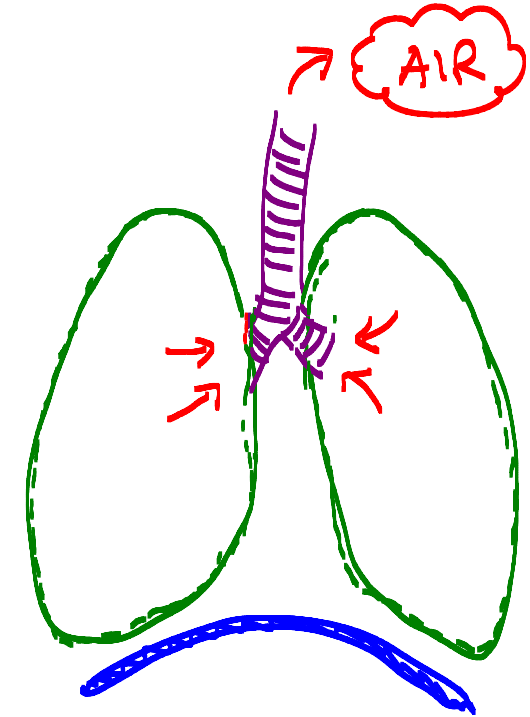
### INSPIRATION

- Diaphragm contracts  
→ Pushes abdominal organs down
  - External intercostal muscles contract  
→ Raises rib cage
- ⇒ Increases chest cavity size  
⇒ Negative relative pressure draws air into the lungs



### EXPIRATION

- Elastic recoil returns the lungs to original size



⇒ Pushes air out of lungs

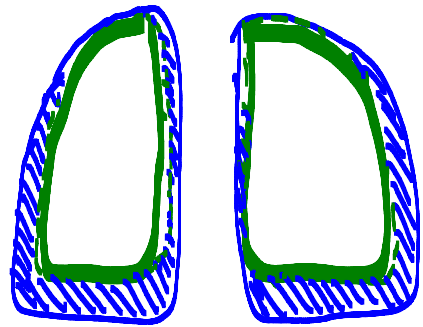
NOTE: Forced expiration involves contraction of internal intercostals

## • Lung Volume Parameters

### ① Tidal Volume (TV)

Volume change of lungs during normal breathing

NORMAL INHALE



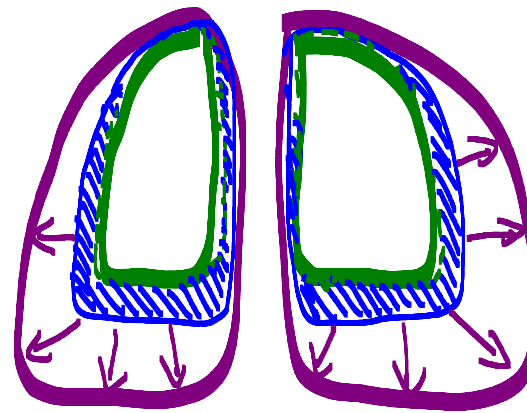
(Typically 0.5L)

(IRV)

### ② Inspiratory Reserve Volume

Additional volume increase during forced inhalation

FORCED INHALE



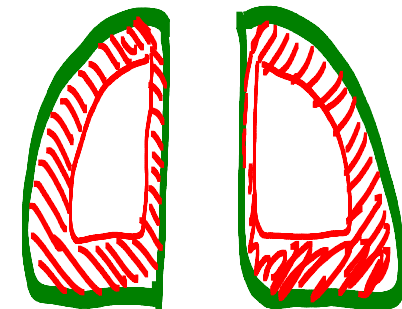
(Typically 2-3L)

(ERV)

### ③ Expiratory Reserve Volume

Additional volume decrease during forced exhalation

FORCED EXHALE



(Typically 1L)

# Summary of lung volume parameters

Absolute Volume

**TLC** (Total Lung Capacity)

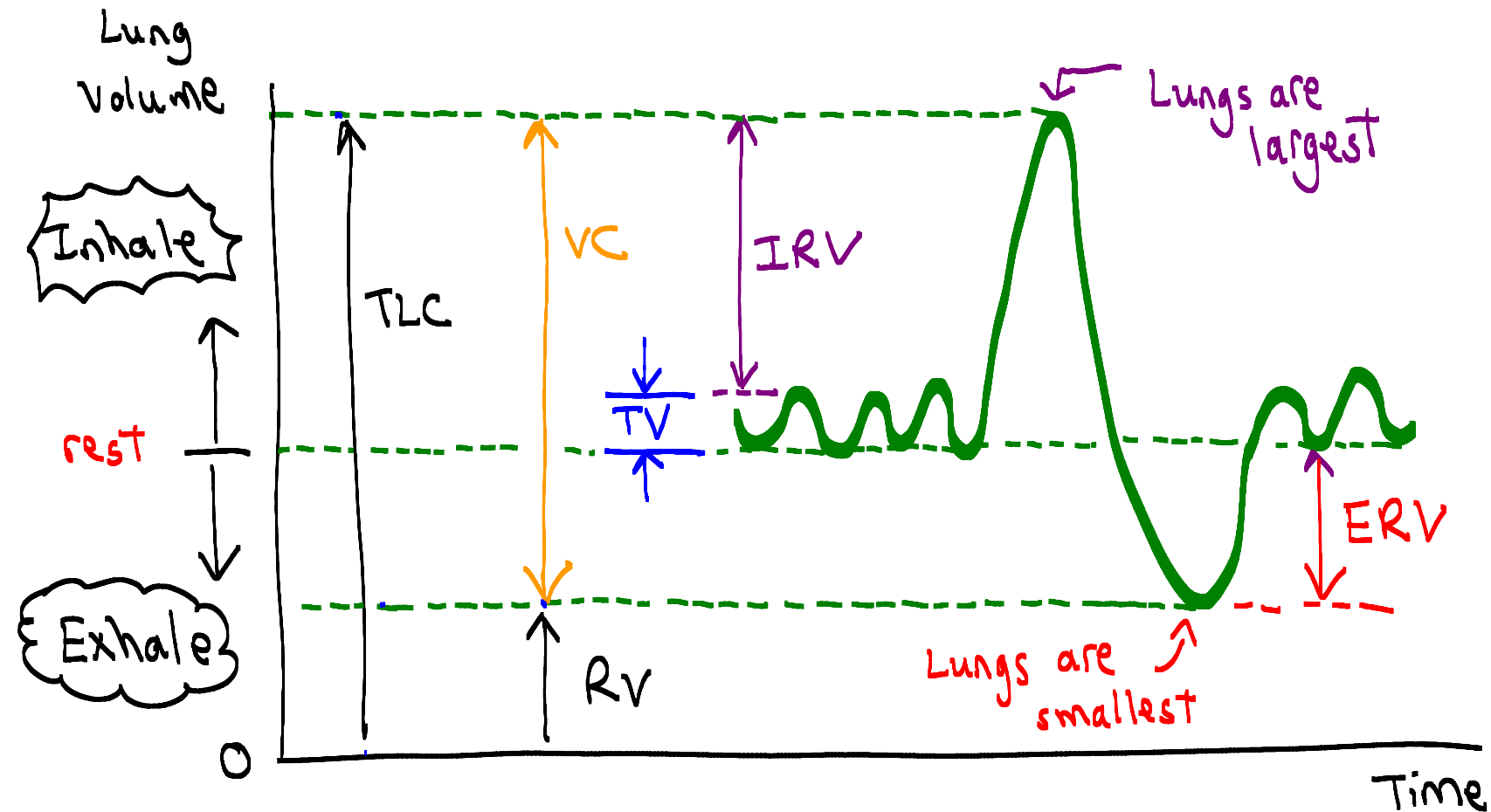
**RV** (Reserve Volume)

~1L

Change in volume

**VC** (Vital Capacity)

3.5-4.5L



$$\text{VC} = \text{IRV} + \text{TV} + \text{ERV}$$

(Inspiratory Reserve Volume) + (Tidal Volume) + (Expiratory Reserve Volume)

## 2. Spirometers

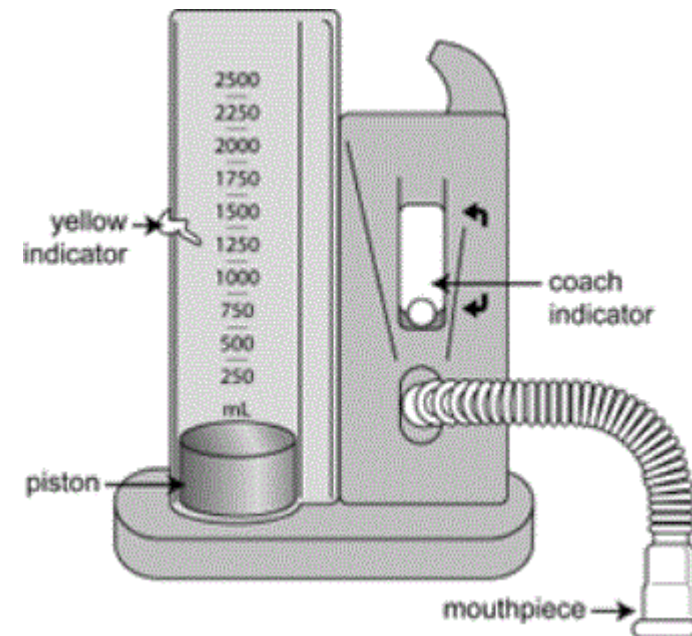
- Spirometry: Medical screening test that measures breathing and lung function.

① Subject is asked to perform a forced expiratory maneuver (FEM)

- Take a full deep breath
- Exhale as forcefully as possible

② Inhaled + exhaled air are measured by a spirometer  
(2 types)

Traditional kind  
↙  
① VOLUME



my\_clevelandclinic.org

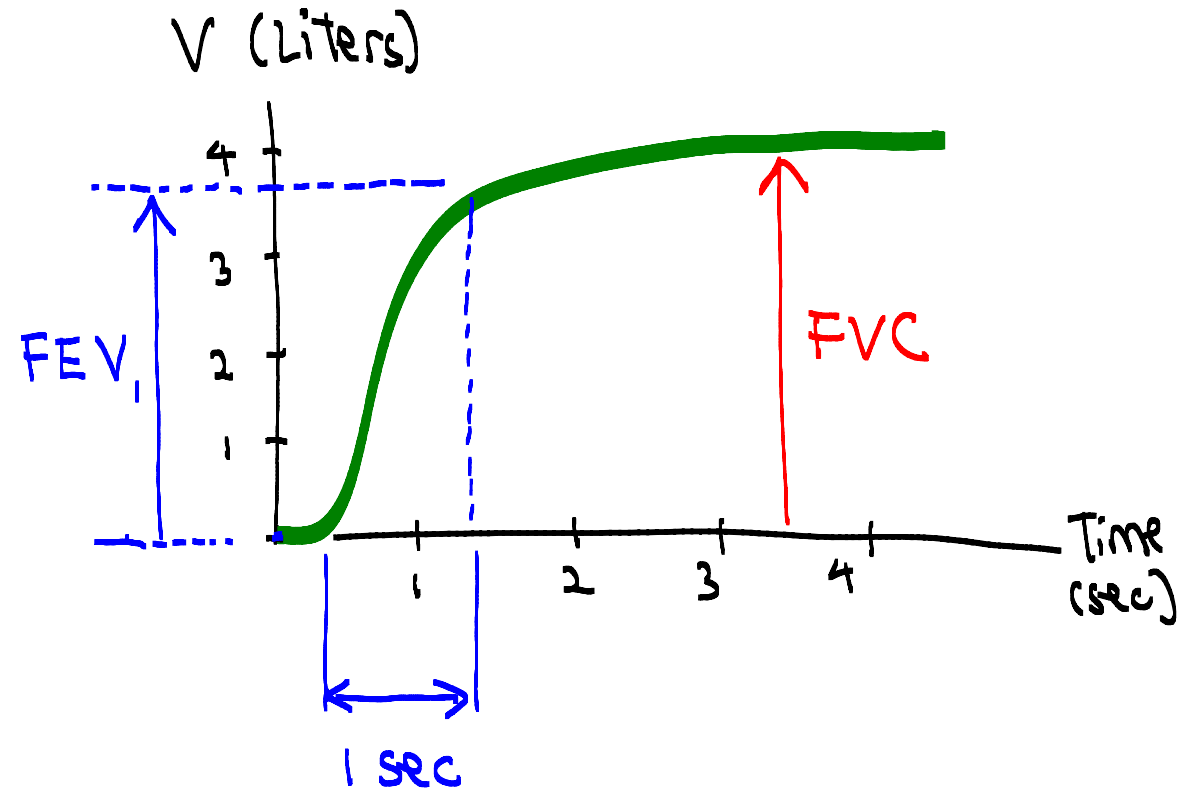
Most portable  
↙  
electronic systems

② FLOW



wikipedia

## • Volume Measurement

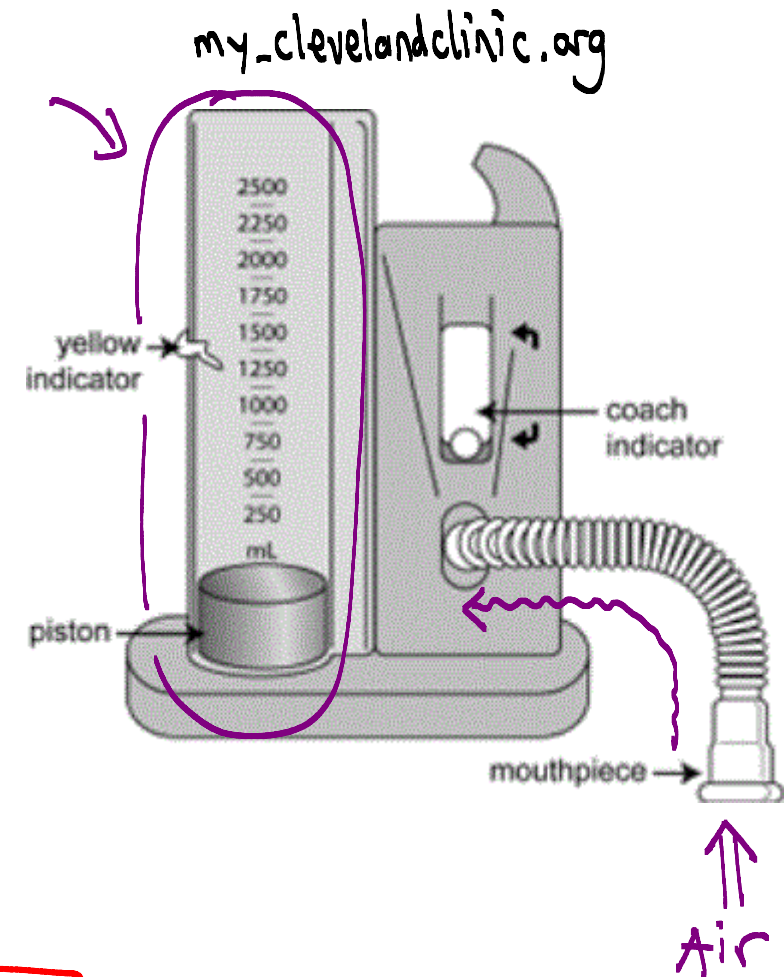


$FEV_1$

Forced Expiratory Volume  
in one second

- Volume spirometers are bulky ∴  
but maintain accurate calibration ∴  
Cross-contamination is also an issue

Expandable  
compartment



$FVC$

Forced Vital Capacity

similar to VC, but  
exhaling is done  
with maximum force

(12.7)

## • Flow Measurement

Q: How to measure flow (L/sec) with a volume spirometer?

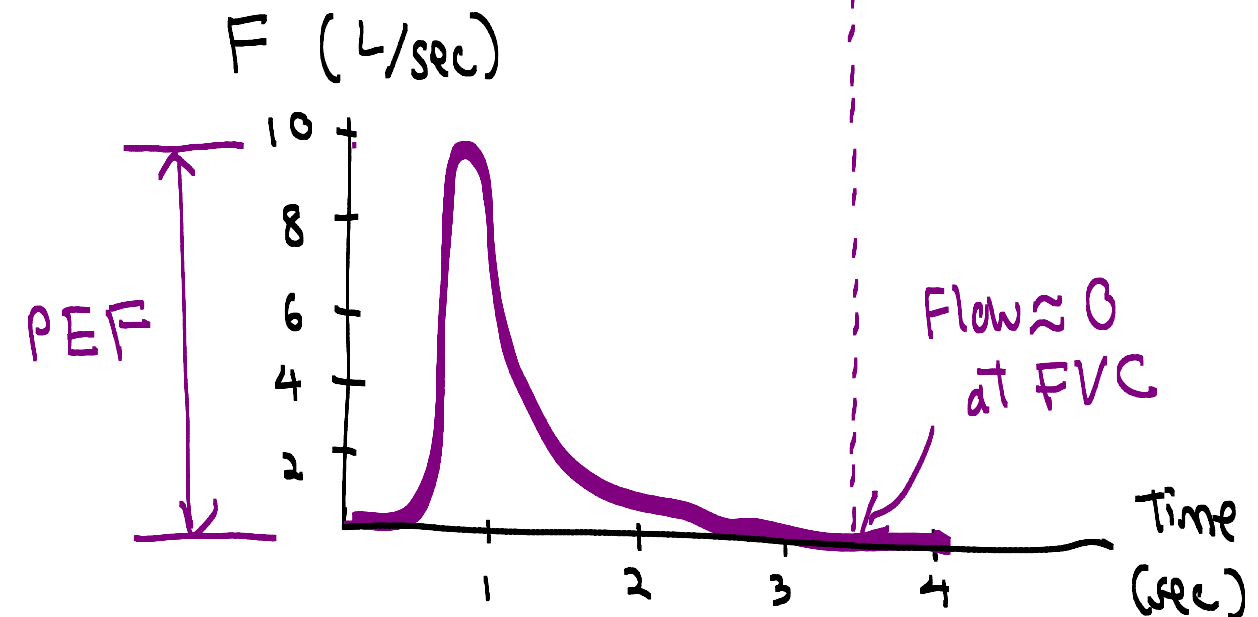
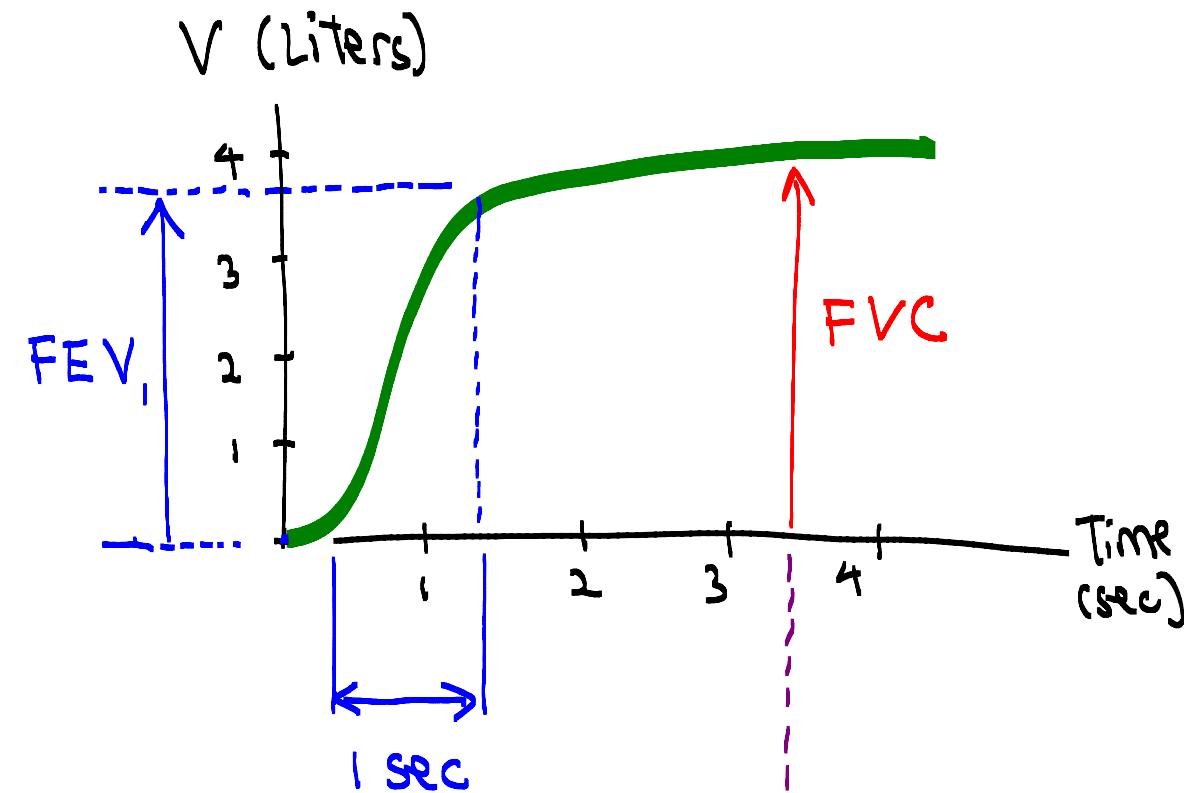
A: Compute the derivative!

$$\text{Flow} = \frac{dV}{dt} \text{ (Liters/sec)}$$

$$\text{Max Flow} = \left( \frac{dV}{dt} \right)_{\text{max}} = \boxed{\text{PEF}}$$

Peak  
Expiratory  
Flow

★ Most portable electronic spirometers directly measure flow, and then compute volume by  $V(t) = \int_0^t F dt$



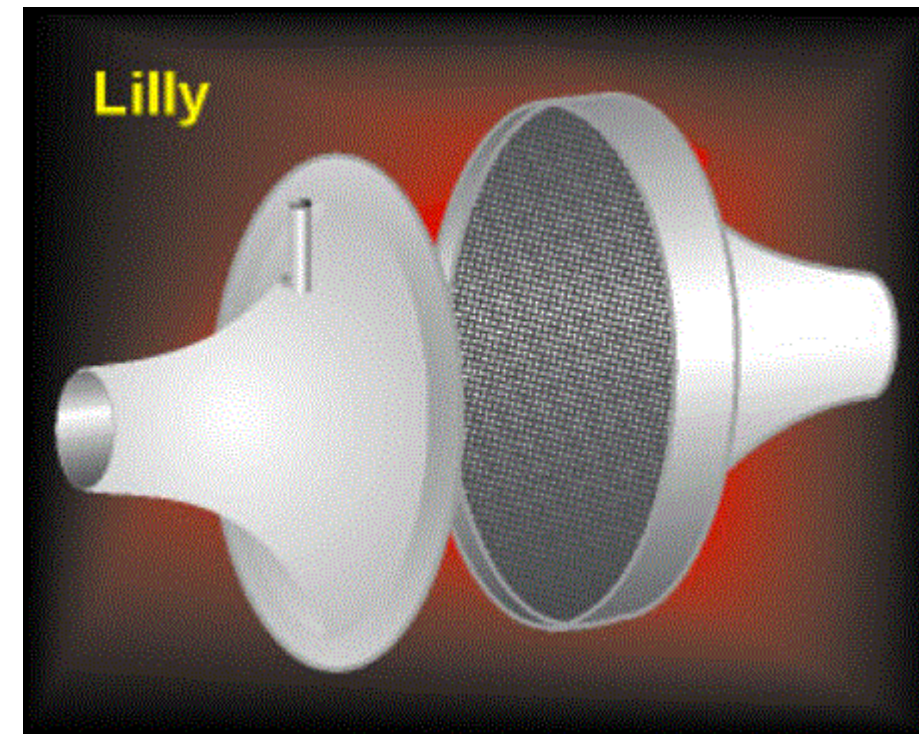
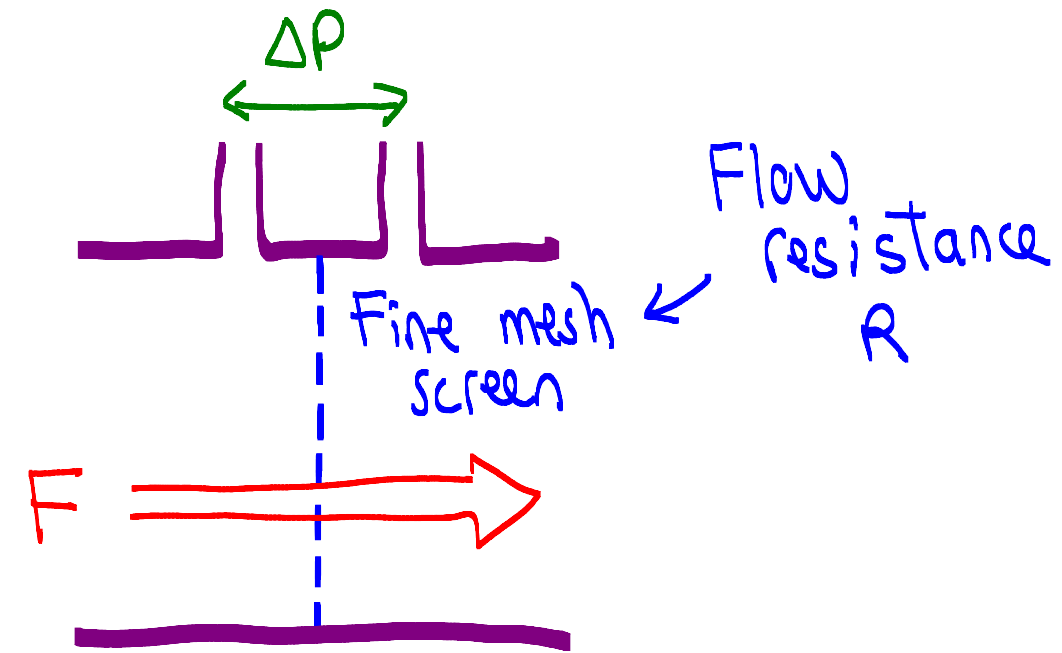
### 3. Pneumotachometers ← Most common type of spirometer

Pneumotachometers measure flow by a pressure difference between 2 points

① Lilly: ★ Linear relationship between pressure change and flow.

- use fine mesh screen as flow resistance element

$$\Delta P = \underset{\substack{\uparrow \\ \text{Flow}}}{F} * \underset{\substack{\uparrow \\ \text{Flow resistance}}}{R}$$



[www.spirexpert.com](http://www.spirexpert.com)

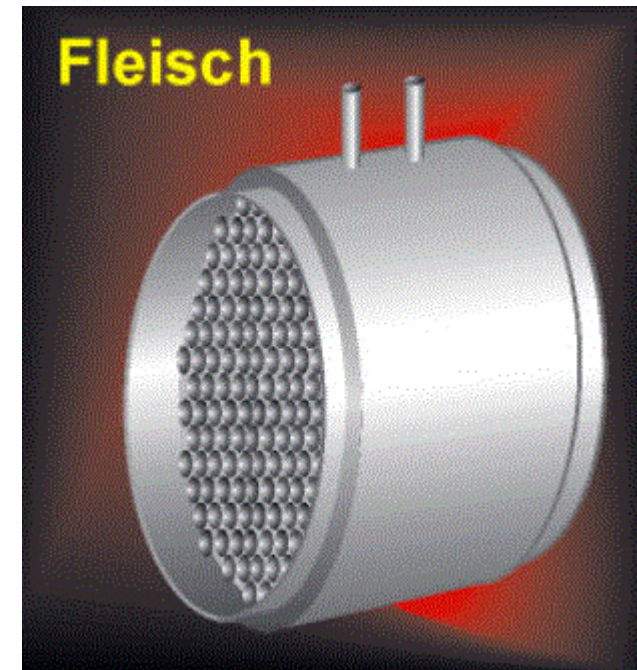
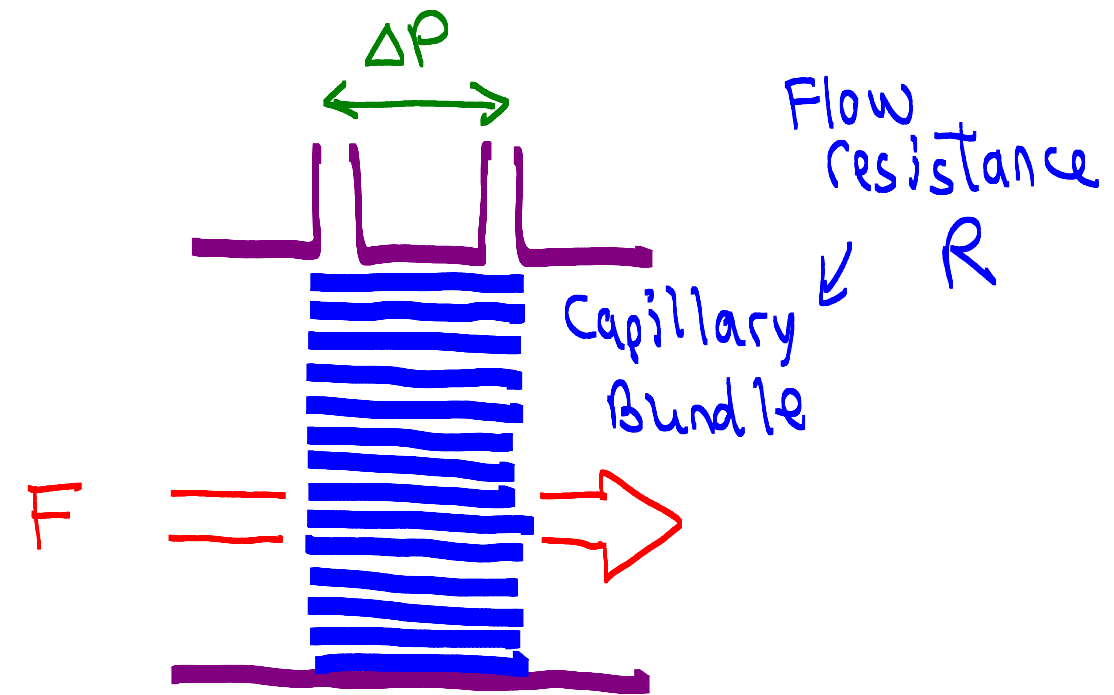
② Fleisch: ★ Linear relationship between pressure change and flow.

- use bundle of capillaries as flow resistance element

$$\Delta P = F * R$$

↑  
Flow
↑  
Flow resistance

NOTE: Both Lilly and Fleisch need the flow-resistance element to be heated to 37°C to minimize condensation



[www.spirexpent.com](http://www.spirexpent.com)

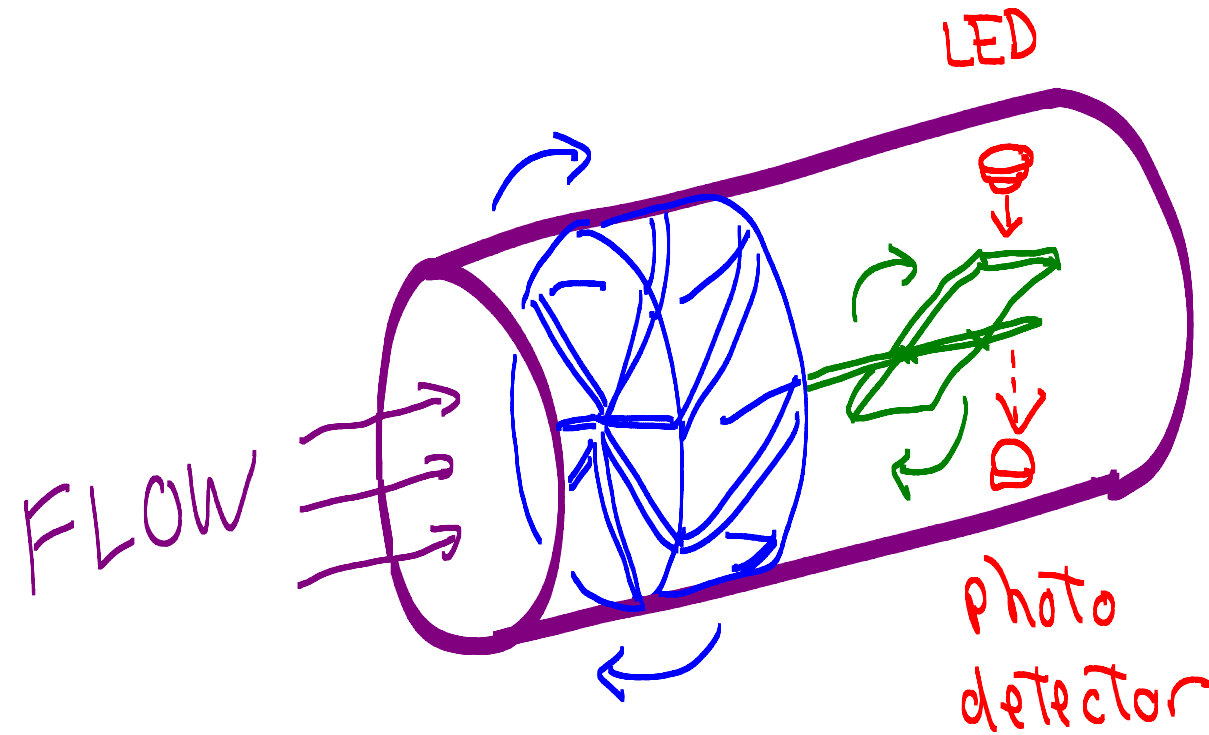
### ③ Turbine (Rotary vane) ←

Does not rely  
on  $\Delta P$

- Air flow pushes turbine-like blades
- Blades turn a rotating vane
- Rotating vane interrupts an LED beam

★ Rotations per second  $\propto$  Air flow

NOTE: Any type of spirometer must be periodically calibrated!



Pro: No heating required 😊

Con: Rotational inertia

Affects accuracy [

- Low flow (start blade motion)
- High flow (blades continue to spin)