

Artery Research Vol. 25(S1); 2019, p. S95 DOI: https://doi.org/10.2991/artres.k.191224.085; ISSN 1872-9312; eISSN 1876-4401 https://www.atlantis-press.com/journals/artres



## P54 Age-specific, Pressure-independent Acute Changes in Carotid-femoral Pulse Wave Velocity During Head-up Tilt

Giacomo Pucci<sup>1,2,\*</sup>, Alberto Avolio<sup>3</sup>, Bart Spronck<sup>4,5</sup>, Gaetano Vaudo<sup>6</sup>, Fabio Anastasio<sup>7</sup>, Anton H. Van den Meiracker A.H<sup>2</sup>, Francesco U.S. Mattace-Raso<sup>2</sup>

<sup>1</sup>Department of Medicine, University of Perugia - Unit of Internal Medicine, Terni University Hospital, Terni, Italy

<sup>2</sup>Department of Internal Medicine, Erasmus MC University Medical Center, Rotterdam, The Netherlands

<sup>3</sup>Department of Biomedical Sciences, Faculty of Medicine and Health Sciences, Macquarie University, Sydney, Australia

<sup>4</sup>Department of Biomedical Engineering Yale University, New Haven, CT, United States

<sup>5</sup>Department of Biomedical Engineering, CARIM School for Cardiovascular Diseases, Maastricht University, Maastricht, The Netherlands

<sup>6</sup>Department of Medicine, University of Perugia, Unit of Internal Medicine, Terni University Hospital, Terni, Italy

<sup>7</sup>Unit of Cardiology, ASST-VAL Hospital of Sondrio, Sondrio, Italy

## ABSTRACT

**Introduction:** Acute, gravity-induced blood pressure (BP) changes during head-up tilt may generate concomitant variations in carotid-femoral pulse wave velocity (cf-PWV). We aimed to separate the pressure-dependent and -independent components of cf-PWV changes observed during head-up tilt.

**Methods:** 30 healthy individuals (age  $48 \pm 18$  years (mean  $\pm$  SD), 38% males, BP  $130/74 \pm 12/8$  mmHg) underwent head-up passive tilting at  $a = 0^{\circ}$ , 30°, and 60°. BP was taken at the upper arm, constantly kept at heart level. Aortic BP was reconstructed from radial tonometry (SphygmoCor). Stiffness index b0 was estimated at 0°. 1 Assumptions: [1] from MRI2, the effective cf-PWV travel distance (ETD, 80% of straight carotid-to-femoral distance) begins at heart level; [2] the change in DBP along the aorta is predictable from the hydrostatic pressure gradient (0.73 mmHg/cm) 3; [3] cf-PWV and hydrostatic pressure relate linearly, hence predicted cf-PWV can be calculated as the average of aortic (PWVaorta, using b0 and aortic DBP) and femoral (PWVfem, using b0 and femoral DBP, corresponding to aortic DBP + (ETD × sin(a)'0.73)) PWVs.

**Results:** Both young (24–48 years) and old (48–82 years) individuals showed increasing trends for peripheral SBP, DBP, PP, and central DBP with tilting; central SBP remained unchanged. Heart rate (HR) and cf-PWV increased with body tilt in both groups (Figure, left). b0 linearly correlated with age (R = 0.70, p < 0.01). After adjustment for HR4, observed-vs-predicted cf-PWV exponentially increased as a function of age ( $R^2 = 0.38$ , p < 0.01 for quadratic equation, p = 0.04, vs. linear; Figure, right).

Conclusion: With aging, the acute relationship between BP and cf-PWV becomes progressively nonlinear.



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