## hyperbaric and undersea medicine

hyperbaric and undersea medicine is a specialized branch of medical practice that focuses on the physiological and pathological effects of pressure changes on the human body, particularly in underwater and hyperbaric environments. This field encompasses both the treatment of conditions arising from diving and exposure to increased atmospheric pressures, as well as the therapeutic use of hyperbaric oxygen therapy for various medical conditions. Professionals in hyperbaric and undersea medicine address complex challenges such as decompression sickness, arterial gas embolism, and other diving-related injuries while advancing the understanding of human tolerance to pressure. The integration of technology, physiology, and clinical care makes hyperbaric and undersea medicine a critical discipline for both recreational and commercial diving safety and the management of specific medical disorders. This article explores the foundational concepts, common conditions treated, diagnostic techniques, therapeutic interventions, and ongoing research within hyperbaric and undersea medicine.

- Overview of Hyperbaric and Undersea Medicine
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- Diagnostic and Therapeutic Techniques
- Applications of Hyperbaric Oxygen Therapy
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## Overview of Hyperbaric and Undersea Medicine

Hyperbaric and undersea medicine is a multidisciplinary field that combines elements of physiology, emergency medicine, and environmental health to address the effects of pressure changes on the human body. It primarily involves the study and treatment of medical conditions resulting from exposure to high-pressure environments, such as those experienced during diving, underwater work, or hyperbaric oxygen therapy sessions. The field requires an in-depth understanding of gas laws, human respiratory and circulatory physiology, and the pathophysiology of pressure-related injuries. Physicians and healthcare providers specializing in this discipline are trained to manage emergencies like decompression sickness and arterial gas embolism, as well as chronic conditions responsive to hyperbaric treatment. The development of hyperbaric chambers and diving technology has significantly advanced both preventive and therapeutic approaches within this specialty.

### Historical Development

The origins of hyperbaric and undersea medicine trace back to early diving practices and the recognition of decompression sickness among deep-sea divers. Over the 20th century, the establishment of hyperbaric chambers allowed for controlled pressure environments to treat various illnesses. Advances in diving technology and understanding of gas physiology further shaped the field, leading to the formal recognition of hyperbaric medicine as a distinct medical specialty. Today, hyperbaric and undersea medicine continues to evolve with innovations in clinical protocols and expanded therapeutic indications.

### Fundamental Principles

The core principles of hyperbaric and undersea medicine revolve around the effects of increased ambient pressure on gas solubility, diffusion, and tissue oxygenation. According to Henry's and Boyle's laws, gases behave differently under pressure, which can cause nitrogen bubbles to form in tissues during ascent from depth, leading to decompression sickness. Hyperbaric oxygen therapy utilizes increased pressure to enhance oxygen delivery to hypoxic tissues, promoting healing and combating infections. Understanding these physical and physiological principles is essential for effective clinical management and prevention strategies in undersea and hyperbaric environments.

### Common Medical Conditions Treated

The scope of hyperbaric and undersea medicine includes a variety of conditions related to pressure exposure and oxygen deprivation. These conditions often require prompt diagnosis and treatment to prevent serious complications or permanent damage. The most frequently encountered disorders in this field arise from diving accidents and other hyperbaric exposures.

### **Decompression Sickness**

Decompression sickness (DCS), also known as "the bends," occurs when inert gases, primarily nitrogen, dissolved in body tissues during a dive, form bubbles as pressure decreases during ascent. These bubbles can cause joint pain, neurological symptoms, and cardiovascular issues. DCS severity ranges from mild discomfort to life-threatening conditions requiring immediate hyperbaric oxygen therapy. Recognition of symptoms and rapid treatment are vital to patient outcomes.

### Arterial Gas Embolism

Arterial gas embolism (AGE) arises when gas bubbles enter the arterial bloodstream, typically due to lung overexpansion injury during ascent. AGE can lead to ischemia in vital organs such as the brain and heart, causing stroke-like symptoms, respiratory distress, and sudden collapse. Emergency hyperbaric treatment

aims to reduce bubble size and restore blood flow to affected tissues.

### Other Diving-Related Injuries

Additional conditions managed within hyperbaric and undersea medicine include pulmonary barotrauma, nitrogen narcosis, oxygen toxicity, and hypothermia. Pulmonary barotrauma results from pressure-induced lung injury, while nitrogen narcosis affects cognitive function at depth. Oxygen toxicity is a risk during prolonged exposure to high partial pressures of oxygen. These conditions require careful monitoring and preventive strategies to ensure diver safety.

## Diagnostic and Therapeutic Techniques

Effective diagnosis and treatment in hyperbaric and undersea medicine rely on specialized equipment, clinical protocols, and multidisciplinary collaboration. Rapid and accurate assessment of pressure-related conditions is essential for timely intervention.

### Hyperbaric Chambers

Hyperbaric chambers are the cornerstone of treatment in this field, allowing patients to breathe pure oxygen at pressures higher than atmospheric levels. These chambers can be monoplace (single occupant) or multiplace (multiple occupants) and provide a controlled environment for decompression and oxygen therapy. Treatment protocols vary depending on the condition being addressed but generally involve repeated sessions to optimize outcomes.

### Imaging and Monitoring

Diagnostic imaging such as Doppler ultrasound, chest X-rays, and MRI are utilized to detect gas bubbles, tissue damage, and complications associated with diving injuries. Continuous monitoring of vital signs, oxygen saturation, and neurological status is critical during treatment. Advanced monitoring equipment helps clinicians tailor therapy and identify early signs of deterioration.

### **Emergency Management Protocols**

Standardized emergency protocols guide the initial assessment, stabilization, and referral of patients with diving-related illnesses. Immediate administration of 100% oxygen, fluid resuscitation, and positioning to prevent further embolism are key initial steps. Coordination with hyperbaric facilities ensures prompt treatment, reducing morbidity and mortality.

## Applications of Hyperbaric Oxygen Therapy

Beyond diving injuries, hyperbaric oxygen therapy (HBOT) has expanded into diverse clinical applications, leveraging its ability to enhance oxygen delivery and promote tissue repair.

### Wound Healing and Infection Control

HBOT is widely used to treat chronic wounds, including diabetic foot ulcers and radiation-induced tissue damage. The increased oxygen concentration stimulates angiogenesis, enhances immune response, and inhibits anaerobic bacterial growth, thereby accelerating healing and reducing infection risk.

### Treatment of Carbon Monoxide Poisoning

Carbon monoxide poisoning is a critical indication for HBOT, which facilitates the displacement of carbon monoxide from hemoglobin and restores oxygen delivery to hypoxic tissues. Early hyperbaric treatment decreases the risk of neurological sequelae and improves survival rates.

### Other Emerging Indications

Research continues to explore the benefits of HBOT in conditions such as traumatic brain injury, stroke recovery, and autoimmune diseases. While evidence is evolving, these applications highlight the potential of hyperbaric therapy beyond traditional uses.

## Training and Safety in Undersea Medicine

Proper training and safety protocols are essential components of hyperbaric and undersea medicine, ensuring the well-being of divers and patients undergoing hyperbaric treatment.

### Certification and Education

Medical professionals specializing in this field undergo rigorous training in diving physiology, emergency management, and hyperbaric technology. Certification programs and continuing education maintain high standards of care and safety. Additionally, divers receive education on dive planning, decompression schedules, and emergency procedures to minimize risks.

### **Diving Safety Protocols**

Safety measures include adherence to dive tables or dive computers, proper equipment maintenance, and buddy systems during dives. Pre-dive medical evaluations identify risk factors that may predispose divers to complications. Post-dive monitoring is also critical for early detection of decompression illness.

### Facility Safety Standards

Hyperbaric facilities follow strict safety guidelines to prevent hazards such as fire, oxygen toxicity, and pressure-related injuries. Regular equipment inspections, emergency drills, and adherence to regulatory standards ensure patient and staff safety during hyperbaric sessions.

### Research and Future Directions

Ongoing research in hyperbaric and undersea medicine aims to refine existing treatments, discover new therapeutic indications, and improve understanding of human physiology under pressure.

### Innovations in Hyperbaric Technology

Advancements include the development of portable hyperbaric chambers, improved monitoring systems, and optimized treatment protocols tailored to individual patient needs. These innovations enhance accessibility and efficacy of hyperbaric therapy.

### Physiological Studies

Research into the molecular and cellular effects of hyperbaric oxygen continues to uncover mechanisms of tissue repair and immune modulation. Studies also investigate genetic and biochemical factors influencing susceptibility to diving injuries.

## **Expanded Clinical Applications**

Clinical trials explore the use of hyperbaric and undersea medicine in neurodegenerative diseases, chronic pain syndromes, and rehabilitation. Future directions may establish new standards of care and broaden the impact of this specialized medical field.

 Key benefits of ongoing research include improved patient outcomes, enhanced safety, and expanded therapeutic options.

- Collaboration between clinicians, scientists, and engineers drives innovation in hyperbaric and undersea medicine.
- Ethical considerations and cost-effectiveness analyses guide the integration of new treatments into clinical practice.

## Frequently Asked Questions

### What is hyperbaric medicine and how is it used?

Hyperbaric medicine involves the medical use of oxygen at pressures higher than atmospheric pressure. It is primarily used to treat conditions such as decompression sickness, carbon monoxide poisoning, non-healing wounds, and certain infections by enhancing oxygen delivery to tissues.

# What conditions can be treated with hyperbaric oxygen therapy (HBOT)?

HBOT is used to treat decompression sickness, carbon monoxide poisoning, gas gangrene, chronic wounds, radiation injuries, certain infections, and to promote healing after skin grafts or flaps.

### How does hyperbaric oxygen therapy benefit divers?

Divers use HBOT to treat decompression sickness, also known as 'the bends,' which occurs when inert gas bubbles form in the bloodstream due to rapid pressure changes. HBOT helps reduce bubble size and improves oxygen supply to affected tissues.

# What are the risks and side effects associated with hyperbaric oxygen therapy?

Potential risks include barotrauma to ears and lungs, oxygen toxicity seizures, temporary vision changes, and claustrophobia. These side effects are generally rare and manageable under medical supervision.

### How is undersea medicine related to hyperbaric medicine?

Undersea medicine focuses on the health and safety of individuals exposed to underwater environments, including divers and submarine personnel. Hyperbaric medicine is a subset that deals with treating conditions caused by pressure changes, such as decompression sickness, common in undersea environments.

## What advancements have been made recently in hyperbaric and undersea medicine?

Recent advancements include improved hyperbaric chamber technology, better protocols for treating traumatic brain injuries, enhanced diver monitoring systems, and research into new therapeutic indications for HBOT like neurodegenerative diseases and COVID-19-related complications.

### Can hyperbaric oxygen therapy help with neurological conditions?

Emerging research suggests that HBOT may aid in neurological recovery by improving oxygen delivery and reducing inflammation, potentially benefiting conditions like traumatic brain injury, stroke, and certain neurodegenerative diseases, though more studies are needed for definitive conclusions.

## What safety protocols are essential during hyperbaric oxygen therapy sessions?

Safety protocols include thorough patient screening, monitoring for signs of oxygen toxicity, ensuring proper chamber pressurization and depressurization rates, emergency preparedness for barotrauma, and continuous supervision by trained medical personnel.

## How do hyperbaric chambers work?

Hyperbaric chambers work by increasing atmospheric pressure around the patient, allowing them to breathe 100% oxygen at pressures typically between 1.5 and 3 times normal atmospheric pressure. This increases the amount of oxygen dissolved in the blood and tissues, facilitating healing and recovery.

# What role does hyperbaric medicine play in treating decompression sickness in commercial and recreational divers?

Hyperbaric medicine is critical in treating decompression sickness by recompressing the diver in a hyperbaric chamber to reduce gas bubble size and facilitate reabsorption. Timely treatment helps prevent permanent tissue damage and neurological deficits in affected divers.

### **Additional Resources**

### 1. Hyperbaric Medicine Practice

This comprehensive book covers the fundamental principles and clinical applications of hyperbaric oxygen therapy. It includes detailed discussions on indications, contraindications, and the physiological effects of hyperbaric treatment. The text is designed for both clinicians and researchers interested in diving medicine and wound care.

### 2. Undersea and Hyperbaric Medical Society's Diving Medicine for Scuba Divers

Aimed at recreational and professional divers, this book provides essential medical knowledge about divingrelated illnesses and injuries. It explains the pathophysiology of decompression sickness, nitrogen narcosis, and barotrauma. The guide also offers practical advice on prevention and emergency management underwater.

### 3. Principles and Practice of Hyperbaric Medicine

This authoritative reference explores the science behind hyperbaric oxygen therapy and its use in treating various medical conditions. It details the latest research findings, treatment protocols, and equipment technology. The book serves as a valuable resource for hyperbaric medicine specialists and healthcare providers.

### 4. Handbook of Hyperbaric Medicine

A concise and practical handbook, it offers quick access to essential information on hyperbaric therapy indications and treatment guidelines. The book is particularly useful for clinicians managing patients with diving injuries, chronic wounds, and radiation tissue damage. Its clear format supports decision-making in clinical settings.

### 5. Diving and Subaquatic Medicine

This text delves into the medical challenges associated with underwater environments and diving activities. Topics include physiological adaptations, diving-related pathologies, and emergency response strategies. It is an ideal resource for dive medicine practitioners, hyperbaric specialists, and underwater explorers.

### 6. Hyperbaric Oxygen Therapy: A Guide for Nurses

Focused on nursing care, this book outlines the role of nurses in administering hyperbaric oxygen therapy safely and effectively. It covers patient assessment, monitoring, and management of potential complications. The guide emphasizes interdisciplinary collaboration within hyperbaric treatment teams.

### 7. Advanced Underwater Diving and Hyperbaric Medicine

This advanced text addresses complex issues in diving medicine and hyperbaric treatments, including mixed gas diving and decompression algorithms. It integrates clinical case studies and research insights to deepen understanding of undersea medical practice. Suitable for specialists seeking to expand their expertise.

### 8. Clinical Hyperbaric Medicine

Offering a clinical approach, this book discusses diagnosis and therapeutic use of hyperbaric oxygen in various medical conditions such as carbon monoxide poisoning and chronic wounds. It highlights evidence-based practices and patient outcomes. The volume serves as a practical resource for both clinicians and students.

### 9. Fundamentals of Diving and Hyperbaric Medicine

This introductory book provides foundational knowledge of diving physiology, hyperbaric principles, and

medical considerations. It covers essential topics like gas laws, decompression theory, and treatment of diving-related illnesses. Ideal for newcomers to the field or as a refresher for experienced professionals.

### **Hyperbaric And Undersea Medicine**

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hyperbaric and undersea medicine: UHMS Hyperbaric Oxygen Therapy Indications, **14th edition** Undersea & Hyperbaric Medical Society, 2019-05-01 Since its first appearance in 1977, the UHMS Hyperbaric Oxygen Therapy Indications has served as a guide for practitioners and scientists interested in hyperbaric and undersea medicine. Past UHMS president Richard E. Moon, chair of the Hyperbaric Oxygen Therapy Committee and editor for the 14th edition, along with additional Committee members and leading experts in the field, authored chapters in their respective fields. This publication continues to provide the most current and up-to-date guidance and support in hyperbaric medicine. Updates in the 14th Edition - Revised and updated references - A new chapter summarizing recently published data on trails of HBO2 for chronic traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD) - Addition of flowcharts to specific chapters to aid in treatment of decision-making Table of Contents Preface Members of the Hyperbaric Oxygen Therapy Committee I. Background II. Hyperbaric Oxygen: Definition III. Utilization Review For Hyperbaric Oxygen Therapy IV. Acceptance (Addition) of New Indications for Hyperbaric Oxygen Therapy V. List of Abbreviations VI. Author Biographies PART I. Indications 1. Hyperbaric Treatment of Air or Gas Embolism: Current Recommendations 2. Arterial Insufficiencies A. Central Retinal Artery Occlusion B. Hyperbaric Oxygen Therapy for Selected Problem Wounds 3. Carbon Monoxide Poisoning 4. Clostridial Myonecrosis (Gas Gangrene) 5. The Effect of Hyperbaric Oxygen on Compromised Grafts and Flaps 6. The Role of Hyperbaric Oxygen for Acute Traumatic Ischemias 7. Decompression Sickness 8. Delayed Radiation Injuries (Soft Tissue and Bony Necrosis) and Potential for Future Research 9. Sudden Sensorineural Hearing Loss 10. Intracranial Abscess 11. Necrotizing Soft Tissue Infections 12. Refractory Osteomyelitis 13. Severe Anemia 14. Adjunctive Hyperbaric Oxygen Therapy in the Treatment of Thermal Burns PART II. Additional Considerations 15. Mechanisms of Action of Hyperbaric Oxygen Therapy 16. Side Effects of Hyperbaric Oxygen Therapy 17. Oxygen Pretreatment and Preconditioning 18. Randomized Controlled Trials in Diving and Hyperbaric Medicine 19. Hyperbaric Oxygen for Symptoms Following Mild Traumatic Brain Injury Appendix A. Approved Indications for HBO2 Therapy Index

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hyperbaric and undersea medicine: Physiology and Medicine of Hyperbaric Oxygen Therapy Tom S. Neuman, Stephen R. Thom, 2008-06-05 Written by internationally recognized leaders in hyperbaric oxygen therapy (HBOT) research and practice, this exciting new book provides evidence-based, practical, useful information for anyone involved in HBOT. It outlines the physiologic principles that constitute the basis for understanding the clinical implications for

treatment and describes recent advances and current research, along with new approaches to therapy. This book is an essential tool for anyone who cares for patients with difficult-to-heal wounds, wounds from radiation therapy, carbon monoxide poisoning, and more. - Provides comprehensive coverage of pathophysiology and clinically relevant information so you can master the specialty. - Covers the relevance of HBOT in caring for diverse populations including critical care patients, infants and pediatric patients, and divers. - Features a section on the technical aspects of HBOT to provide insight into the technology and physics regarding HBO chambers. - Presents evidence to support the effectiveness of HBOT as well as the possible side effects. - Describes situations where HBOT would be effective through indication-specific chapters on chronic wounds, radiation and crush injuries, decompression sickness, and more.

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hyperbaric and undersea medicine: Hyperbaric Medicine Practice, 4th Edition Dr. Harry T. Whelan, 2017-06-01 A textbook may sometimes gain the unusual trait of longevity beyond all other books - it can be revised and remain a primary source of information for generations of students. Hyperbaric Medicine Practice seems destined to become such a book. This 4th edition, edited by Harry T. Whelan, pays tribute to its original author, Dr. Kindwall, who died in 2012. It also adds new information of interest to all in the field of diving and clinical hyperbaric medicine. Most chapters have been written or revised by new authors, but many have returned to update their chapters. New chapters include indications for hyperbaric oxygen treatment subjects recently approved for treatment such as idiopathic sudden sensorineural hearing loss and central retinal vein occlusion. There are also chapters on submarine rescue and problems that pertain to technical and rebreather diving. This book will be an important addition to the library of physicians in clinical hyperbaric medicine and those involved with divers—recreational, commercial, and military—as well as other professionals who care for them. - comments by Henry J.C. Schwartz, MD, FACP New Information and Updates in the Fourth Edition Indications for the Use of HBO2 - Completely re-written chapters on basis for HBO2 therapy of Radiation Necrosis and Burns - New clinical trial data for traumatic brain injuries - Tabulation of almost all published cases of hyperbaric oxygen used for refractory osteomyelitis and the new CPT codes needed for reimbursements - Updates on the multiplace hyperbaric chamber with monitoring and provisions for critical care and carbon monoxide emergency - A new complete description of the multiplace hyperbaric chamber as a medical device - Improved illustrations and better clarification for the use of hyperbaric oxygen for crush injuries - Totally new chapter on the role of hyperbaric oxygen for fracture management -Complications and Contraindications for the Use of HBO2 - Completely re-written chapter on the contraindications and relative risks, and the management recommendations - Completely re-written chapter on complications and the management recommendations - Updated details on use of medications and indications for myringotomy The Science of HBO2 - Additional basic science and clinical data regarding HBO2 management of infectious diseases - Completely re-written chapter on basis for HBO2 therapy of Infectious Diseases - Updates on mechanism of action of HBO2 and preconditioning - Added human and animal literature section utilizing hyperbaric oxygen for brown recluse spider bite - Re-written evidence-based recommendations for use of hyperbaric oxygen for brown recluse spider bite - New innovative research developed in Brazil when the first lines of hyperbaric medicine therapy history in South America were written. - Introduces challenging questions to readers including: Should we try HBO2 for Hansen's disease in present day? Is there any better way to increase oxygen toxicity against Mycobacterium leprae than methylene blue? - All new hyperbaric oxygen mechanism chapter complimented by exceptionally well-illustrated figures -New approach to appreciating the mechanisms of hyperbaric oxygen with primary effects that occur immediately and secondary effects that are long standing and generally require repetitive treatments - In-depth discussion about the physiological, cellular and molecular response to exogenous ketone supplementation and ketogenic diet - New section on pharmacokinetic disposition of drugs in HBO2 New section on antibiotic interactions Updated literature on pharmacodynamics

interactions Fully updated discussion on the use of hyperbaric oxygen therapy in pediatrics including risks and benefits, practical considerations, indications and controversies and oxygen administration schedules Discussion of latest information on pediatric disease indications for hyperbaric oxygen therapy and current controversies Updated recommendations for pediatric psychological preparation and sedation

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Workman, J. Steven Wood, 2020-03-01 When the first edition of Hyperbaric Facility Safety, A Practical Guide was published it became an integral part of virtually every hyperbaric facility's reference library, serving as the go-to standard for a hyperbaric safety program. In this second edition, editors W.T. "Tom" Workman and J. Steven "Steve" Wood have endeavored to establish a comprehensive balance between those hyperbaric providers who have a keen interest in the underlying design standards and regulatory framework and those who need to "get it done." The second edition is structured into two parts. The first part explains the various regulatory agencies that may influence the field of hyperbaric medicine (including international perspectives), while the second part emphasizes a nuts-and-bolts approach to hyperbaric safety program development and how the safety program integrates all aspects of a hyperbaric facility. The editors, along with the 80 chapter authors and contributors bring experiences from clinical hyperbaric medicine, the U.S. Air Force and Navy, the UHMS Hyperbaric Facility Accreditation program, hyperbaric chamber engineering, manufacturing, and regulatory/standards development.

hyperbaric and undersea medicine: Underwater Medicine and Related Sciences Margaret F. Werts, Charles W. Shilling, 2012-12-06 This volume is the third annotated bibliography on this subject area to be compiled by these authors. The first, published by Gordon and Breach, Science Publishers, in 1971, was entitled AN ANNOTATED BIBLIOGRAPHY ON DIVING AND SUBMARINE MEDICINE. It covered material published during the 1960's. The second volume, entitled UNDERWATER MEDICINE AND RELATED SCIENCES: A GUIDE TO THE LITERATURE, published in 1973 by Plenum Press, covered primarily material published during 1970 and 1971, with some material from 1968 and 1969. The present volume covers material published during 1972 and 1973, but here again some earlier material has been included. The purpose of these annotated bibliographies is to make available a large proportion of the published material, in abstract form, indexed in such a manner as to make it possible to compile a reasonably complete annotated bibliography on any specific subject area in the field. It is possible thus to learn where the work is being done, by whom, and how extensively. Also, it becomes obvious what areas of research are lacking or inadequate. These specific searches can also form a background of reference material on which to base further research, or from which to write monographs or state-of-the-art surveys. Papers, articles and reports listed here are in most cases readily available.

hyperbaric and undersea medicine: Review of Hyperbaric Therapy & Hyperbaric Oxygen Therapy in the Treatment of Neurological Disorders According to Dose of Pressure and Hyperoxia Paul Gregory Harch,, Enrico M. Camporesi,, Dominic D'Agostino, John Zhang, George Mychaskiw II, Keith Van Meter, 2024-11-18 Hyperbaric therapy and hyperbaric oxygen therapy are treatments that have vexed the medical profession for 359 years. Hyperbaric therapy consisted of the exclusive use of compressed air from 1662 until the 1930s-1950s when 100% oxygen was introduced to recompression tables for diving accidents. Broader clinical application of 100% hyperbaric oxygen to radiation cancer treatment, severe emergent hypoxic conditions, and "blue baby" operations occurred in the late 1950s-1960s. Since that time hyperbaric oxygen therapy has become the dominant term to describe all therapy with increased pressure and hyperoxia. It has been defined as the use of 100% pressurized oxygen at greater than 1.4 or 1.0 atmospheres absolute (ATA) to treat a narrow list of wound and inflammatory conditions determined by expert opinions that vary from country to country. This "modern" definition ignored the previous 300 years of clinical and basic science establishing the bioactivity of pressurized air. The Collet, et al randomized trial of

hyperbaric oxygen therapy in cerebral palsy in 2001 exposed the flaws in this non-scientific definition when a pressurized oxygen and a pressurized air group, misidentified as a placebo control group, achieved equivalent and significant cognitive and motor improvements. This study confused the hyperbaric medicine and neurology specialties which were anchored on the 100% oxygen component of hyperbaric oxygen therapy as a necessary requirement for bioactivity. These specialties were blind to the bioactivity of increased barometric pressure and its contribution to the biological effects of hyperbaric/hyperbaric oxygen therapy. Importantly, this confusion stimulated a review of the physiology of increased barometric pressure and hyperoxia, and the search for a more scientific definition of hyperbaric oxygen therapy that reflected its bioactive components (Visit New scientific definitions: hyperbaric therapy and hyperbaric oxygen therapy ). The purpose of this Research Topic is to review the science of hyperbaric therapy/hyperbaric oxygen therapy according to its main constituents (barometric pressure, hyperoxia, and possibly increased pressure of inert breathing gases), and review the literature on hyperbaric therapy/hyperbaric oxygen therapy for acute to chronic neurological disorders according to the dose of oxygen, pressure, and inert" breathing gases employed. Contributing authors are asked to abandon the non-scientific and restrictive definition of hyperbaric oxygen therapy with its arbitrary threshold of greater than 1.0 or 1.4 atmospheres absolute of 100% oxygen and adopt the more scientific definitions of hyperbaric and hyperbaric oxygen therapy. Those definitions embody therapeutic effects on broad-based disease pathophysiology according to the effects of increased barometric pressure, hyperoxia, and "inert" breathing gases. Recent basic science research has elucidated some of these effects on gene expression. Researchers have demonstrated that increased pressure and hyperoxia act independently, in an overlapping fashion, and interactively, to induce epigenetic effects that are a function of the dose of pressure and hyperoxia. Differential effects of pressure and hyperoxia were revealed in a systematic review of HBOT in mTBI/PPCS where the effect of pressure was found to be more important than hyperoxia. In retrospect, the net effect of HBO on disease pathophysiology in both acute and chronic wounding conditions has been demonstrated for decades as an inhibition of inflammation, stimulation of tissue growth, and extensive effects on disease that are pressure and hyperoxic dose-dependent. This Special Topics issue will focus on the scientific definitions of hyperbaric and hyperbaric oxygen therapy, principles of dosing, and an understanding of many neurological diseases as wound conditions of various etiologies. Contributing authors should apply these concepts to articles on the basic science of hyperbaric/hyperbaric oxygen therapy and their clinical applications to acute and chronic neurological diseases.

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hyperbaric and undersea medicine: Auerbach's Wilderness Medicine E-Book Paul S. Auerbach, Tracy A Cushing, N. Stuart Harris, 2016-09-21 Now in its 7th edition, Auerbach's Wilderness Medicine continues to help you quickly and decisively manage medical emergencies encountered in any wilderness or other austere setting! World-renowned authority Dr. Paul Auerbach and 2 new associate editors have assembled a team of experts to offer proven, practical, visual guidance for effectively diagnosing and treating the full range of issues that can occur in situations where time and resources are scarce. This indispensable resource equips physicians, nurses, advanced practice providers, first responders, and rescuers with the essential knowledge and skills to effectively address and prevent injuries and illnesses – no matter where they happen! -Brand-new 2-volume format ensures all content is available in print and online to provide you easy access. - Face any medical challenge in the wilderness with expert guidance from hundreds of outstanding world experts edited by Dr. Auerbach and 2 new associate editors, Drs.Tracy Cushing and N. Stuart Harris - New and expanded chapters with hundreds of new photos and illustrative

drawings help increase your visual understanding of the material - Acquire the knowledge and skills you need with revised chapters providing expanded discussions of high-altitude medicine, improvisation, technical rescue, telemedicine, ultrasound, and wilderness medicine education - Ten new chapters cover Acute High-Altitude Medicine and Pathophysiology; High Altitude and Pre-Existing Medical Conditions; Cycles, Snowmobiles, and other Wilderness Conveyances; Medical Wilderness Adventure Races (MedWAR); Canyoneering and Canyon Medicine; Evidence-Based Wilderness Medicine; National Park Service Medicine; Genomics and Personalized Wilderness Medicine; Forestry; and Earth Sciences - 30+ Expert Consult online videos cover survival tips, procedural demonstrations, and detailed explanations of diseases and incidents - Expert Consult eBook version included with purchase. This enhanced eBook experience allows you to search all of the text, figures, images, videos, and references from the book on a variety of devices

hyperbaric and undersea medicine: Hyperbaric Oxygen 2003 John J. Feldmeier, Uhms, Laurie Beth Gesell, 2008-01-01 Formally The Hyperbaric Oxygen Therapy Committee Report: Indications and Results. As each year goes by, the body of scientific evidence to support the use of hyperbaric oxygen therapy builds. Pressurization of a gas to treat medical disorders was first utilized in 1662 by a British clergyman named Henshaw. At that time, air was compressed in a sealed chamber he called a Domicillium. Without evidence, Henshaw theorized that acute disorders of all kinds would benefit from increased pressure. Compression of oxygen was introduced in 1879 by a French surgeon. Fontaine constructed a mobile operating room which could be pressurized. He observed that pressurized patients were not as cyanotic after the use of nitrous oxide during surgery as compared to patients who had been treated in the traditional fashion. In addition, he noted that hernias were much easier to reduce. Around that same time, the work of Paul Bert and J. Lorrain-Smith showed that oxygen under pressure had potentially deleterious consequences on the human body with side effects that included central nervous system and pulmonary toxicity. The field of hyperbaric medicine evolved from the early years of observation and anecdote to one of scientific trials and evidence-based medicine. The work of pioneers such as Behnke and Cousteau gave us the foundation on which undersea medicine and research has flourished. The efforts of Churchill-Davidson and Boerema spurred the modern scientific use of clinical hyperbaric medicine. In 1967, The Undersea Medical Society was formed to support and further the scientific field of diving and undersea medicine. As the applications and use in the clinical arena grew, the society expanded to include clinical hyperbaric medicine. This evolution prompted the society to formally change its name to the Undersea and Hyperbaric Medical Society in 1986. In 1972, an Ad Hoc Medicare committee was formed to evaluate the efficacy of hyperbaric oxyg

hyperbaric and undersea medicine: Cardiac Rhythm Management Mart Min, Gabriel Cismaru, Raluca Tomoaia, 2022-07-06 Many methods, techniques, and tools have been developed and successfully applied to stabilize and control heart rate. Modern implantable devices (pacemakers, defibrillators, tools for continuous monitoring and resynchronization therapy) and treatment methods, including minimally invasive surgery (ablation, implantation), have been developed for managing cardiac rhythm and avoiding heart failure. In addition to electrical pacing, ablation is an effective minimally invasive surgical method for reducing and blocking arrhythmic phenomena, both as an independent treatment method or in conjunction with pacing therapy. This book discusses modern cardiac rhythm management methods and devices as well as some important medical aspects of their use.

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hyperbaric and undersea medicine: The Physician's Guide to Diving Medicine C.B. Carlston, R.A. Mathias, C.W. Shilling, 2012-12-06 This book is designed to be a physician's guide for those interested in diving and hyperbaric environments. It is not a detailed document for the erudite researcher; rather, it is a source of information for the scuba-diving physician who is searching for answers put to him by his fellow nonmedical divers. Following the publication of The Underwater Handbook: A Guide to Physiology and Performance for the Engineer there were frequent requests

for a companion volume for the physician. This book is designed to fill the void. Production of the book has been supported by the Office of Naval Research and by the Bureau of Medicine and Surgery, Research and Development Command, under Navy Contract No. NOOOOI4-78-C-0604. Our heartfelt thanks go to the many authors without whose contributions the book could not have been produced. These articles are signed by the responsible authors, and the names a~e also listed alphabetically in these preliminary pages. Every chapter was officially reviewed by at least one expert in the field covered and these reviewers are also listed on these pages. Our thanks go to them for their valuable assistance. We are grateful to Marthe Beckett Kent for editing Chapter III. Our thanks also go to Mrs. Carolyn Paddon for typing and retyping the manuscripts, and to Mrs. Catherine Coppola, who so expertly handled the many fiscal affairs.

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