

Tourniquet Release and Systemic Metabolic Acidosis

Tourniquets stop arterial blood flow to a limb, causing local tissue hypoxia and anaerobic metabolism. In the ischemic muscle, lactate and H^+ accumulate, lowering local pH. When the tourniquet is released, this acid-laden blood "cold and acidotic" flows back into the circulation 1. The washout of lactic acid and CO_2 causes a **transient systemic metabolic acidosis**. In anesthesiology texts this is well recognized: "Tourniquet deflation causes release of anaerobic metabolites into the systemic circulation causing … metabolic acidosis, hyperkalemia…" 2. Likewise, one review notes that limb occlusion increases lactate and decreases pH in the cuffed limb, and that toxic metabolites produce pathophysiological changes when they are released systemically 3. In other words, ischemic metabolites built up under the tourniquet inevitably enter the bloodstream on release, lowering systemic pH.

Systemic "reperfusion syndrome" effects. In practice, tourniquet release can produce a characteristic set of systemic changes. These include:

- Metabolic acidosis: A surge in blood lactate and CO₂ causes a drop in arterial pH (2) (3).
- **Hypotension:** Return of blood into the limb and vasodilatory metabolites can suddenly drop blood pressure 1 2.
- **Hyperkalemia and myoglobinuria:** Ischemic muscle releases K⁺ and myoglobin, risking arrhythmia and renal injury ² ⁴.

These are often grouped under "tourniquet release" or **reperfusion syndrome**. For example, a Saudi anesthesia report describes a patient who developed "sudden hypotension, metabolic acidosis and hyperkalemia" about five minutes after deflation of a 105-min tourniquet ⁴. Similarly, military guidelines explicitly warn that venous return from a reperfused limb is "acidotic with … high concentrations of potassium and myoglobin," and that hypotension and acidosis should be anticipated ¹. In short, the literature consistently notes that deflating a prolonged tourniquet causes a **flush of anaerobic metabolites** into the circulation, producing a transient metabolic acidosis (sometimes called myonephropathic metabolic syndrome).

Evidence from studies and cases. Clinical studies and case reports confirm these effects, especially after longer tourniquet times. For example, a classic anesthesiology study in children found that systemic pH fell after release of long or simultaneous tourniquets – "systemic acidosis from release of lactate and PaCO₂ after tourniquet deflation" was observed, though healthy children tolerated it ⁵. In adults, surgical studies show clear metabolic changes on deflation. One trial of ankle fracture repair found that a single full release led to higher serum lactate and CO₂ spikes than a staged (staggered) release; the authors concluded that staggered deflation "reduced the rate of acute systemic metabolic changes associated with limb reperfusion" ⁶. In a reported case of tibia fracture surgery, tourniquet release (after ~105 min inflation) precipitated cardiac arrest – laboratory data showed pH 7.23 and K⁺ 5.9 mmol/L immediately post-release, attributable to reperfusion of acidotic muscle ⁷. Although in many patients the acidosis is transient and self-correcting, these examples illustrate that a **direct cause–effect is established** in the literature: quick deflation after prolonged ischemia can induce a systemic metabolic acidosis.

Guidelines and precautions. Both civilian and military sources emphasize anticipating these metabolic effects. Advanced care protocols recommend proactive resuscitation before deflating a long-standing tourniquet. For instance, an Australian military medical review advises treating the patient to *"minimise the systemic metabolic impact of tourniquet release"* – noting that reperfusion blood is cold, acidotic and potassium-rich ¹. Tactical Combat Casualty Care guidelines similarly caution that tourniquets in place >6 hours should not be removed without advanced monitoring (to manage sudden acidosis, hyperkalemia, etc.) ⁸. These sources recommend controlled or staged deflation and correcting acidosis (e.g. IV fluids, bicarbonate) to blunt the impact. In short, the **established literature and guidelines repeatedly link tourniquet removal to a transient metabolic acidosis**, and advise clinicians to anticipate and mitigate it

In conclusion, there **is** a direct, documented relationship between tourniquet removal and systemic metabolic acidosis. Prolonged limb ischemia causes anaerobic metabolite buildup, and their sudden washout on deflation acutely lowers blood pH ³ ⁷. This reperfusion-induced acidosis is typically short-lived, but it can be clinically significant (especially after lengthy occlusion) and is explicitly discussed in peer-reviewed and military sources. Clinicians are advised to prepare for and treat this transient acidosis when removing tourniquets after prolonged use.

Sources: Recent reviews and studies of tourniquet physiology and trauma care 2 3 7 6 5 9 1 8.

1 The Reperfusion Toolbox: How to Resuscitate a Casualty in Preparation for Tourniquet Removal after an Extended Duration of Application | The Cove

https://cove.army.gov.au/article/reperfusion-toolbox

- 2 3 Tourniquet application during anesthesia: "What we need to know?" PMC https://pmc.ncbi.nlm.nih.gov/articles/PMC5187604/
- ⁴ ⁷ Saudi Journal of Anaesthesia

https://journals.lww.com/sjan/fulltext/2015/09040/cardiac_arrest_following_tourniquet_release__needs.32.aspx

- 5 Systemic responses to tourniquet release in children PubMed https://pubmed.ncbi.nlm.nih.gov/3089065/
- 6 European Journal of Emergency Medicine

 $https://journals.lww.com/euro-emergencymed/Fulltext/2013/12000/Reducing_the_potential_for_tourniquet_associated.5.aspx? \\ generateEpub=Article%7Ceuro-emergencymed:2013:12000:00005\%7C10.1097/mej.0b013e3283591668\%7C$

8 fmtbneast.marines.mil

https://www.fmtbneast.marines.mil/Portals/237/Docs/Student%20Materials/TCCC%20Guidelines.pdf and the state of the state

9 A Tourniquet De-Escalation Framework for the Australian Defence Force | The Cove https://cove.army.gov.au/article/tourniquet-de-escalation-framework-australian-defence-force