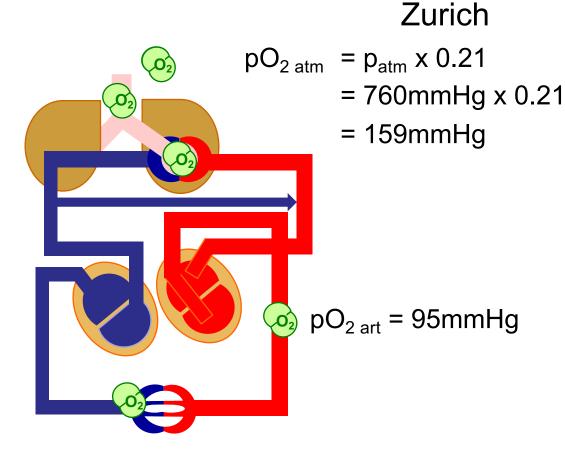
Pathophysiology

Low inspired pO₂





Everest

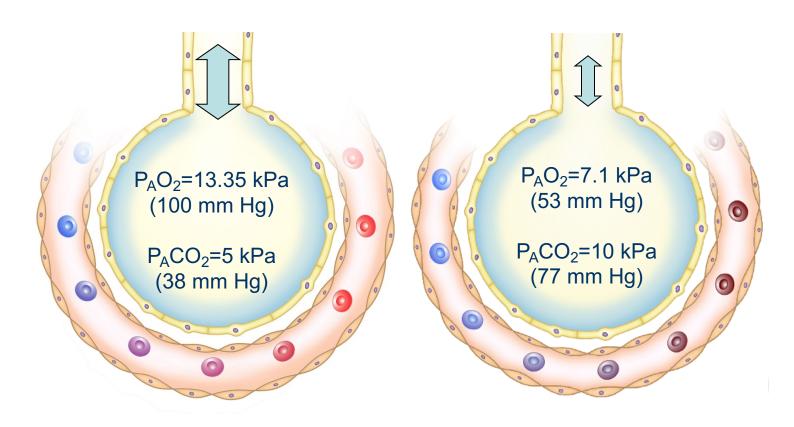
$$pO_{2 \text{ atm}} = p_{atm} \times 0.21$$

= 253mmHg x 0.21
= 53mmHg

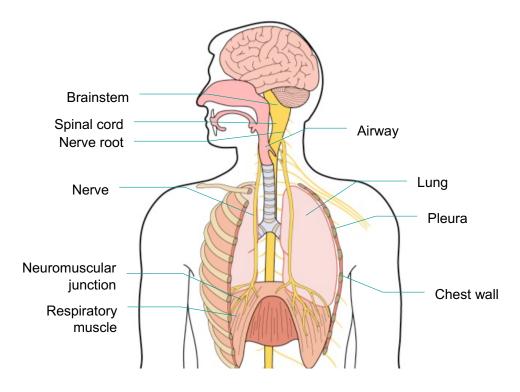
$$pO_{2 \text{ art}} = 24.6 \text{ mmHg}^*$$

* Grocott, NEJM 2009

- Low inspired pO₂
- Hypoventilation

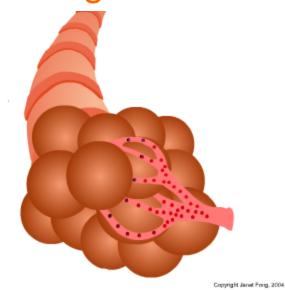


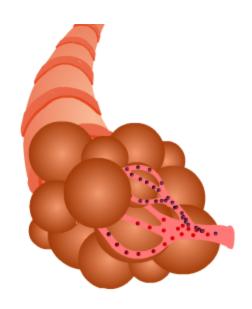
- Low inspired pO₂
- Hypoventilation



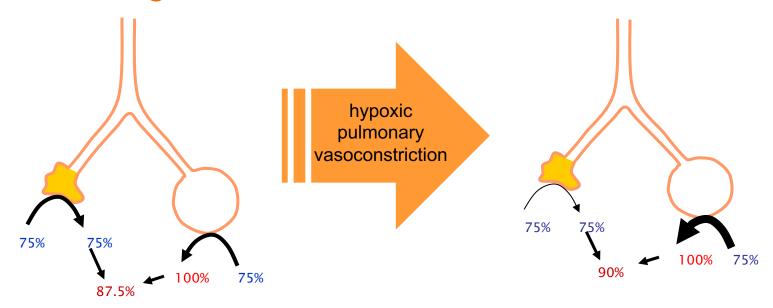
Sites at which disease may cause hypoventilation

- Low inspired pO₂
- Hypoventilation
- Ventilation-perfusion mismatch
 - Shunting





- Low inspired pO₂
- Hypoventilation
- Ventilation-perfusion mismatch
 - Shunting

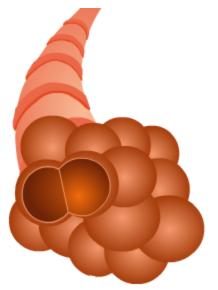


- Low inspired pO₂
- Hypoventilation
- Ventilation-perfusion mismatch
 - Shunting: Intra-pulmonary
 - Pneumonia
 - Pulmonary oedema
 - Atelectasis
 - Collapse
 - Pulmonary haemorrhage or contusion

Intra-cardiac

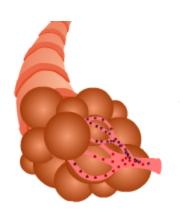
- Any cause of right to left shunt
 - eg Fallot's, Eisenmenger,
 - Pulmonary hypertension with patent foramen ovale

- Low inspired pO₂
- Hypoventilation
- Ventilation-perfusion mismatch
 - Shunting
 - Dead space ventilation

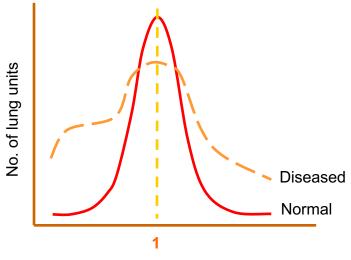


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- Low inspired pO₂
- Hypoventilation
- Ventilation-perfusion mismatch
 - Shunting
 - Dead space ventilation







Ventilation: perfusion ratio

- Low inspired pO₂
- Hypoventilation
- Ventilation-perfusion mismatch
 - Shunting
 - Dead space ventilation
- Diffusion abnormality