

Basic Research Overview

High-Frequency Chest Compression: Mechanisms of Action/Physiological Effects

This *in vitro* study tested the hypothesis that a mucus mass can be moved by the difference between expiratory and inspiratory airflow velocities. An experimental model using mucus gel simulants showed that nonsymmetrical airflow and shearing at the air-mucus interface contribute significantly to enhanced mucus clearance during HFCC

Title	Chang HK, Weber ME, King M. Mucus transport by high-frequency nonsymmetrical oscillatory airflow. <i>J Appl Physiol</i> 1988; 65 (3):1203-1209.
Objective/s	<ul style="list-style-type: none"> • To study air-mucus interaction as a possible mechanism of tracheal mucus transport • To test the validity of using surface tracer displacement to indicate bulk mucus transport
Method	<p>The rate of transport of a layer of simulated mucus lining the bottom of a rectangular trough was measured in two ways during oscillatory airflow. Tidal volumes (V_T) between 50 and 100 ml were generated with a custom-made pump.</p> <ul style="list-style-type: none"> • Peak velocity ratios (R) from 1.0 to 2.0 • Frequencies (f) between 7 and 13Hz <p>Average mucus velocity was plotted as a function of five variables with the following middle values:</p> <ul style="list-style-type: none"> • Bias ratio: $R=1.5$ • Frequency: (f) =10 Hz • Tidal volume (ml): $V_T = 75$ ml • Depth (mm): $\delta =2.0$ mm • Viscosity (P): $\mu = 20$ poise (P)
Results	<ul style="list-style-type: none"> • Mucus movement <i>increases</i> with <ul style="list-style-type: none"> ○ R ○ f ○ V_T ○ Mucus layer depth • Mucus movement <i>decreases</i> with mucus apparent viscosity • There is NO mucus movement at low f, low V_T, and low R

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