

A Fieldstudy to Examine the Demands of the Firefighters

with no control group

Before and 10 mts after the exercise the following parameters were measured:

Study Design

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- RR (Blood pressure)
- Blood sugar
- Stress hormones
- ECG
- FEV₁ (Lung function)
- SpO₂ (peripheral oxygen saturation)
- Body weight
- Core temperature

Study Design

During the exercise the following parameters were taken telemetrically:

- Blood pressure
- Oxygen saturation
- Heart rate

Requirements to take part in the study

- Ergometry in last 12 months
 100% performance
- Normal blood pressure

(under therapy)

- Normal lung function
- BMI < 30 31
- No acute infection

ANAMNESIS

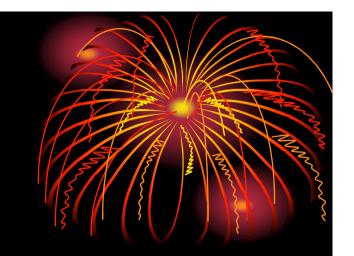


- Past infections
- Smoking habits
- Drinking habits

PREPARATION

- A CONTRACT OF THE PROPERTY OF
- No nil by mouth (no fasting)
- Consumption of ½ liter of water
- Empty bladder
- Wear protective trousers and boots
- Naked from waist up
- Anamnesis

PARTICIPANTS



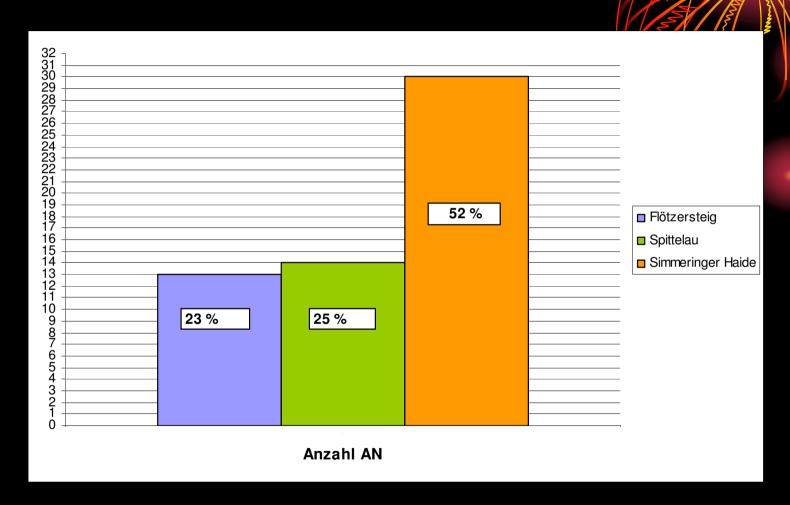
112 employees registered

However:
Only 57 took part
Which equals 51%

REASONS for DECLINING

9%
11%
Contact of the second o

PARTICIPANTS



Participants and Refusers

A quick look showed no difference.

BUT:

It is perfectly clear that refusers show abnormal findings.

HOWEVER:

The group with the risk of high blood pressure was relatively high.

The state of the s

AGE:

mean =

Min.

Max.

38,5 yrs

22 yrs

60 yrs

HEIGHT:

mean =

Min.

Max.

179 cm

153 cm

194 cm

WEIGHT:

mean = 84,9 kg

Min. 55 kg

Max. 129 kg

BODY MASS INDEX:

mean = 26,4

Min. 21

Max. 31

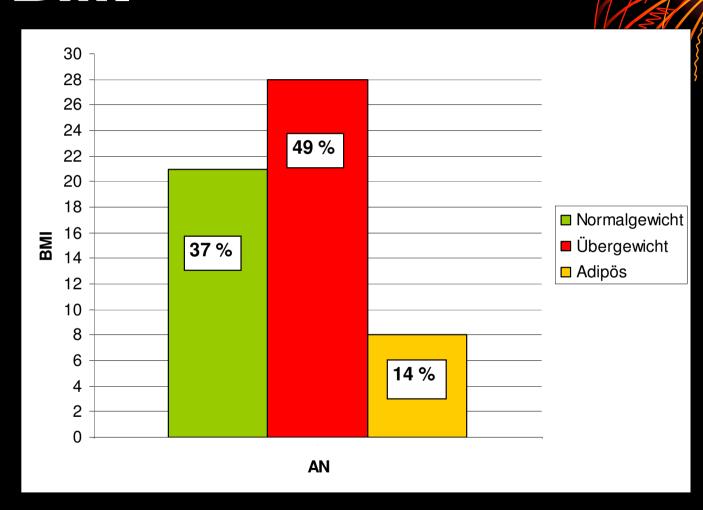
42

63% were overweight
14% of these were extremly overweight

BUT:

Only a measurement of fold fat can show how much of the weight derives from muscles.

BMI





ERGOMETRY:

Mean of the group during last ergometry*

= 109,1%

Min. = 83 %

Max. = 135 %

42% of employees reached > 110 %

^{*} According to the Austrian Society of Cardiology



SMOKING HABITS:

Smokers: 39% participants

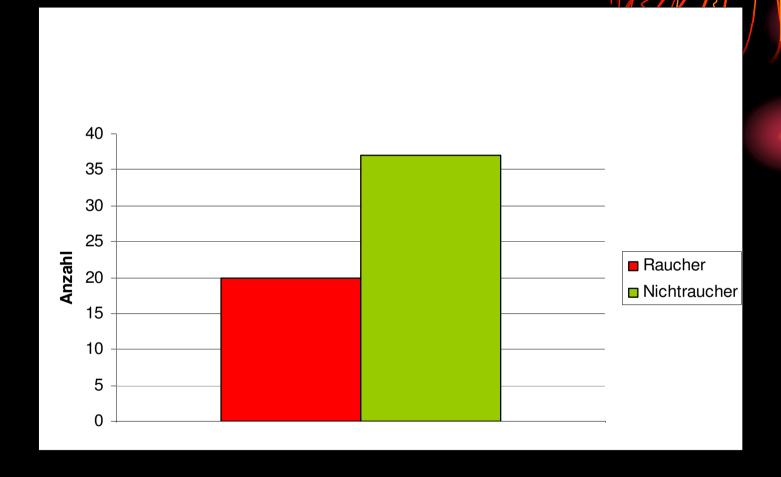
DRINKING HABITS:

*Regularly: 11% participants

*Occasionally: 89% participants

^{*}from personal statements

SMOKERS





FEV1 – LUNG FUNCTION:

Before the exercise:

slightly < 100%

After the exercise:

42%

> 100%

21% of these

> 110%

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BLOOD PRESSURE:

There were more diastolic hypertensive measurements than one would expect among this age – group.



BLOOD PRESSURE Before exercise:

• **28%** (16 employees)

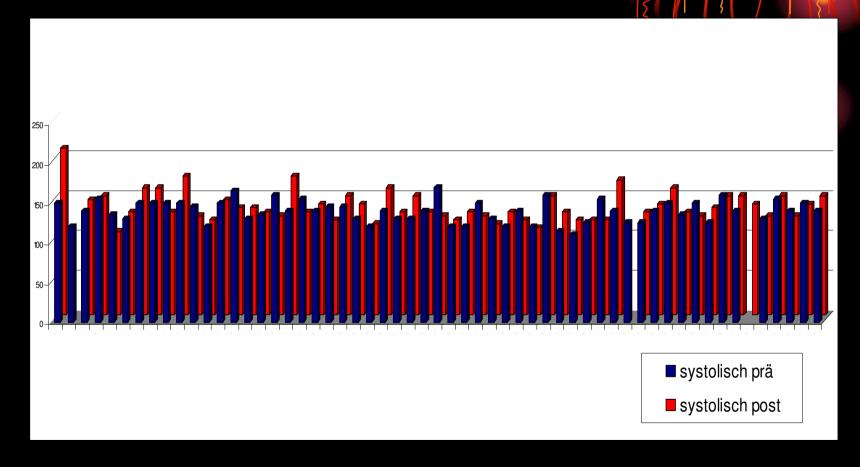
Mean:

needed controlling = 149/97 mm Hg

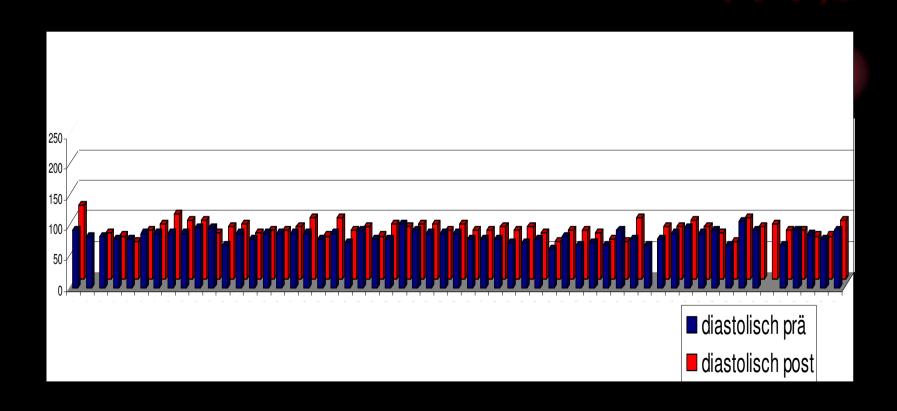
• **12%** (7 employees)

hypertensive

DEVELOPMENT of Systolic Blood Pressure



DEVELOPMENT of Diastolic Blood Pressure



60

BLOOD PRESSURE and HEART RATE:

Some participants showed typical characteristics of anticipation such as

- typical stress caused red hypertension or
- a slight stress caused tachycardia

CORE TEMPERATURE:

Rise of mean temperature

from 36,7°C → to 38,3°C

influenced by

- strain
- heavy protective clothes

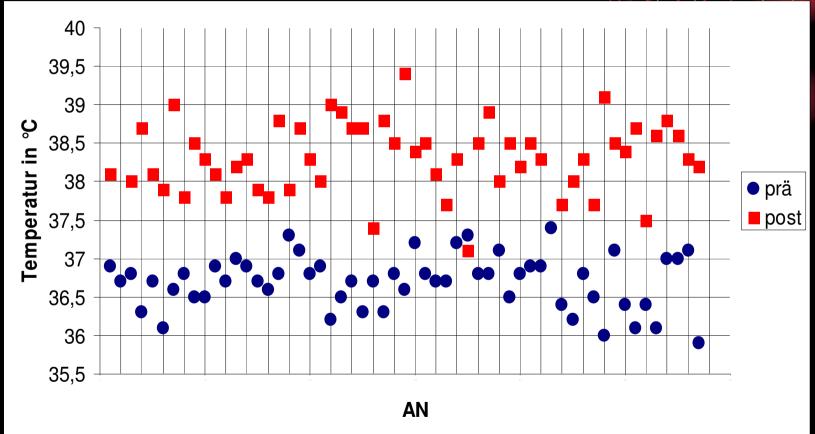
ranging from

37,1°C

39.4°C

Variation in TEMPERATURE





LOSS of WATER:

Average loss of water during
the exercise was

0,9 I

ranging from 0 to 2,5 kg loss of weight.

BLOOD PRESSURE:

Mean RR

before after the exercise

134/83 139/85

Mean RR of participants suspected of Hypertonia

149/97 162/99

NB: The mean of Adrenalin was lower to normal range → therefore it cannot be used as an explanation.

HEART RATE:

Mean frequency

before

after

73,9 bpm

the exercise 101,4 bpm

NB: ECG was as expected.

FEV1 - LUNG FUNCTION:

Mean

before

after

the exercise

95,9%

99,9%

NB: Significant with p < 0.05

SpO2 - OXYGEN SATURATION:

The measurements were clearly below 100!

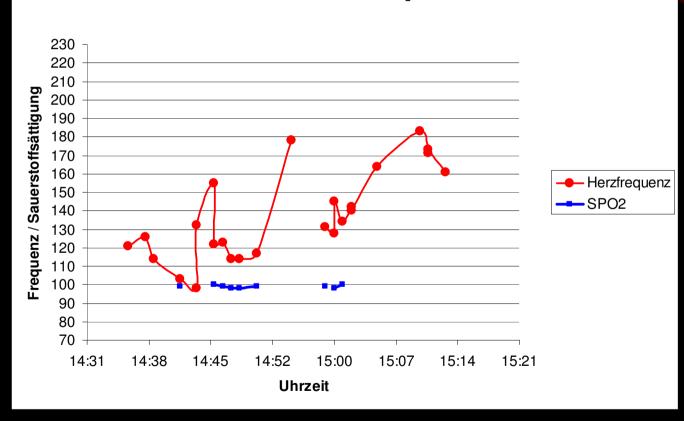
Mean oxygen saturation

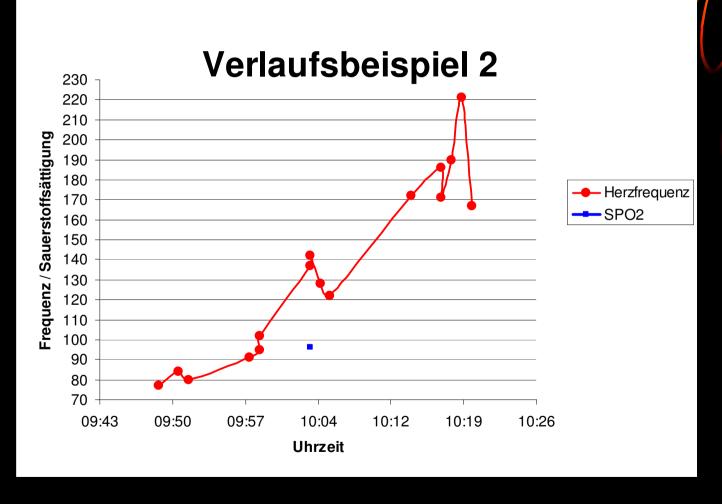
before after

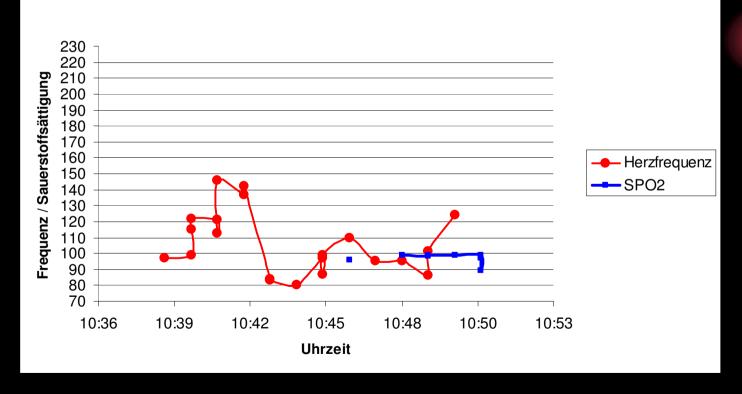
the exercise

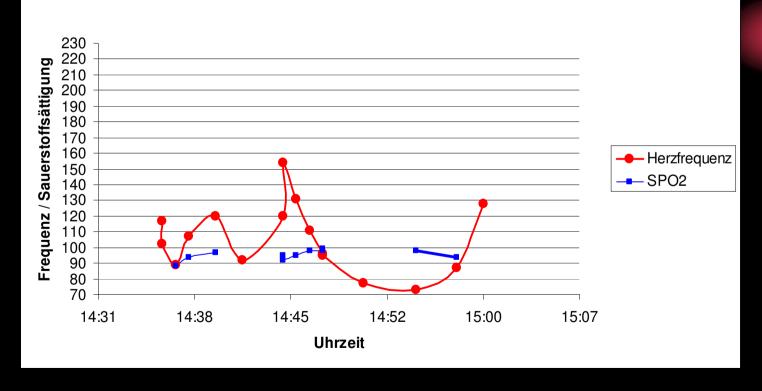
97,4* 93,5

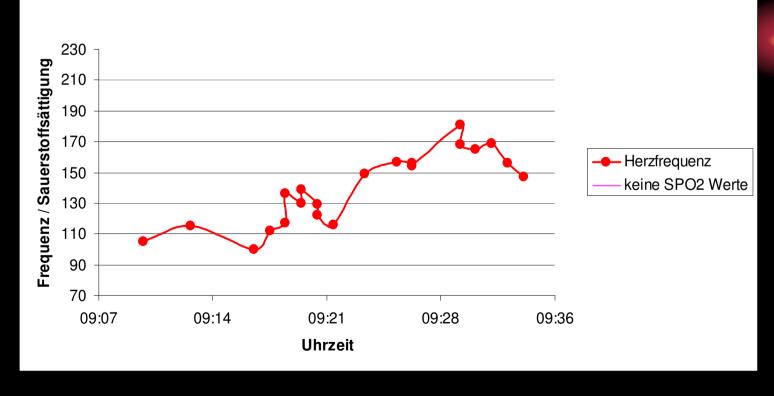
^{*}ranging from 87 to 99











COMPARISONS drawn

BLOOD SUGAR:

Mean glucosis before

after

98,4 mg%Ranging from 69 to 207

the exercise

115,2 mg%Ranging from 69 to 167

* *

COMPARISONS drawn

BLOOD SUGAR:

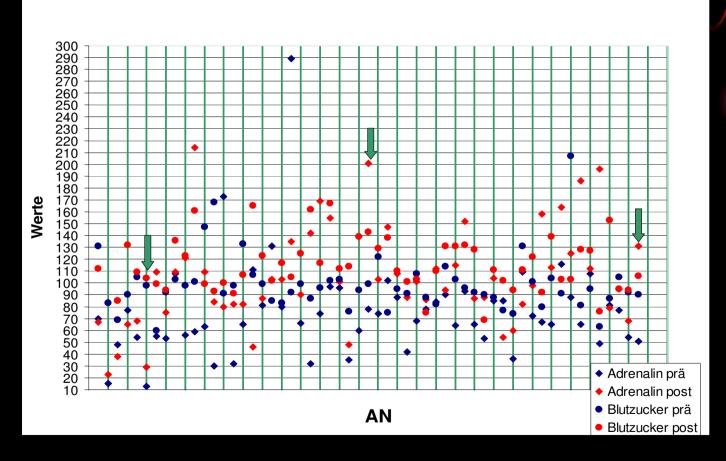
**There were a few Diabetes mellitus endangered employees with measurements above the standard.

COMPARISONS drawn

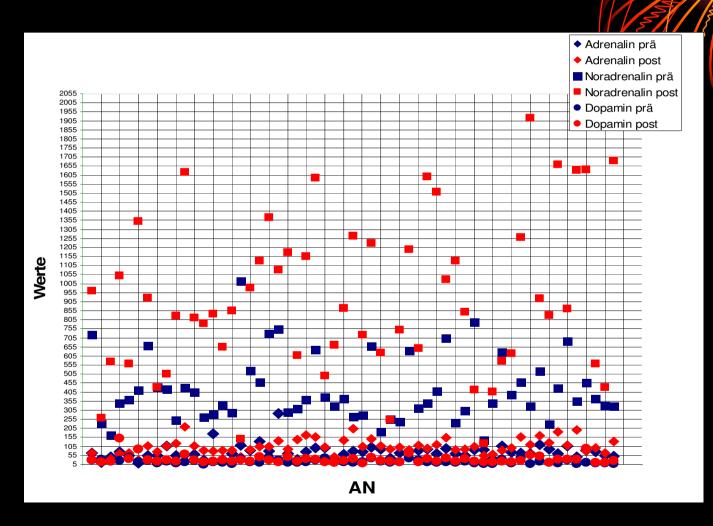
CATECHOLAMINES in Plasma

	before	after normal the exercise	
Adrenalin	75,6	104,9	30 - 100
N-Adrenalin	417,2	923,5	165 - 600
Dopamin	20,8	35,0	80 - 400

CORRELATION Adrenalin – Blood Sugar



CATECHOLAMINES



RISE of HEART RATE

In correlation with:

Rise of Catecholamines

Rise of core temperature

INCREASE in HEART RATE

Per 1°C increase of core temperature



increase of 33 bpm of heart frequency.

RISE of HEART RATE

After arithmetical elimination of the catecholamines' influence a tachycardia remained in anticipation of appr. 18 bpm, →i. e. appr. the measurements of an experienced long distance runner.

LUNG FUNCTION



Mean lung function before stress:

• Smokers - 87,8%

Non smokers - 98,5%
 of desired value

Peripheral OXYGEN SATURATION and BLOOD PRESSURE

A strong decrease of oxygen saturation

in 6 employees
during the exercise was
connected with
a clear increase in blood pressure.

Peripheral OXYGEN SATURATION and CATECHOLAMINES

The decrease of SpO₂ was connected with a clear increase of Catecholamines above the mean measurement.

Peripheral OXYGEN SATURATION and CATECHOLAMINES

Adrenalin

rise on average from - to

70,7 → **130,2**

Mean rise

(104,9)

Nor - Adrenalin

531,2 → **1086,3**

(923,5)

CORE TEMPERATURE and CATECHOLAMINES

The increase of core temperature correlates clearly with the increase of N-Adrenalin level.

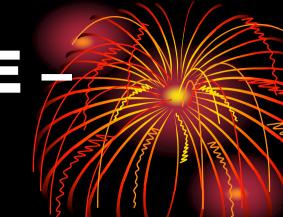
CATECHOLAMINES

The rise of CATECHOLAMINES is expected.

Question:

Are there predictions for a striking increase in other parameters?

CATECHOLAMINE - Increase



An increase of N-Adrenalin to > 1500 caused a stronger rise in :

Adrenalin to 142,6

(Mean 104,9) and

Dopamin to 43,8

(Mean 35,0)

CATECHOLAMINE

Rise

If N-Adrenalin level went up to > 1500

- Mean weight (94 kg) and
- BMI (27,7)

were sigificantly higher than average (mean weight 84,9 kg / 26,4 BMI).

(p < 0.05)

CATECHOLAMINE

Rise

As N-Adrenalin level increased to

> 1500

smoking habits were important.
66% of these employees were
smokers!

Among the others only 30,4% were smokers.

CATECHOLAMINE Increase and SMOKING

As N-Adrenalin level increased to > 1500 we found

Reduced FEV1
 Smokers (FEV1 = 89,9%)
 Non - Smokers (FEV1 = 95,6%)

• More frequent unstable Hypertension (especially diastolic hypertonia).

CATECHOLAMINE RIS

If Adrenalin rose to > 130 it was striking that there was

- slightly lowered SpO₂
- higher blood sugar increase (from 92,4 mg% → 121,9 mg%)

p < 0.05

CORRELATION ERGOMETRY – Results CATECHOLAMINE -

Reaction

There was a negative correlation between

Ergometry - results and **Catecholamine - increase** after the stress

Adrenalin N-Adrenalin

p < 0,003
p < 0,05</pre>

Dopamin p < 0.001

CORRELATION ERGOMETRY – Results CATECHOLAMINE -

is a significant proof of:

The more efficient the Ergometry

→ the less the increase of stress
hormones under enormous stress.

Reaction

CORRELATIONS and QUESTIONS

Can employees with blood pressure risk during the exercise be picked out before?

YES

- Through borderline **RR** – measurements before stress
- Through clearly higher plasma N -Adrenalin

STATEMENTS



Fire trainers have realistic stress.

 We can find risks we would not find otherwise.

• The risks can be minimized through efficient medical check ups.

DEMANDS

 Body fitness through correct training and acceptable nutritional condition

Refrain from smoking

 Regular efficient medical check ups



CONCLUSION

PRECAUTIONS

- Early detection of
 - (labil) Hypertension
 through anamnesis,
 RR measurements, ergometry
 - Diabetes mellitus
 ev. through
 oral glucose load tests
- Ergometry

PRECAUTIONS



- Stamina Training
- Orthostase test (before ergometry)
- Fold fat measurement + BMI
- Dietary advice
- Special programmes

 (e. g. anti smoking campaign)

Thanks to



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