

WHAT IS IT?

- A reversible alteration in consciousness that occurs while at depth (usually noticeable around 30 meters or 100 ft)
- Caused by the anesthetic effect of certain gases at high pressure

S. DEPARTMENT





NITROGEN NARCOSIS

Depths Beyond 100 Feet!

Individual Variability
Day-to-Day Variability

Signs and Symptoms of N₂ Narcosis

- Impaired performance mental/manual work
- Dizziness, euphoria, intoxication
- Overconfidence
- Uncontrolled laughter
- Overly talkative
- Memory loss/post-dive amnesia
- Perceptual narrowing
- Impaired sensory function
- Loss of consciousness > 300 ft

Deep Scuba Dives Breathing Air

YEAR	DIVER	DEPTH
1943	Dumas	203 feet
1948	Dumas	307 feet
1967	Watts	390 feet
1968	Watson	437 feet
1989	Gilliam	452 feet



Prevention of Nitrogen Narcosis

- Restrict diving depth to less than 100 fsw
- If affected, return immediately to surface
- Plan dive beforehand
 - Max time to be on bottom
 - Any decompression required
 - Minimum air required for ascent
 - Emergency action in event of accident
- Breathe helium/oxygen mixture

How to Beat Narcosis (Francis 2006)

- Be sober, no hangover and drug free
- Be rested and confident
- Use a high quality regulator
- Avoid task loading
- Be over trained
- Approach limits gradually
- Use a slate to plan dive
- Schedule gauge checks and buddy checks
- Be positive, well motivated and prudent





- MCAND ATMO. • Characteristics:
 - Colorless
 - Odorless
 - Tasteless
- Disadvantage:
 - Toxic when excessive amounts are breathed under pressure PARTMENT

Oxygen is the only gas metabolized by the human body

Too much or too little oxygen is dangerous!





- Oxygen toxicity is generally not a problem for routine air diving operations
 - A diver must dive deeper than 186 fsw before exceeding the 1.4 PO₂ limit
- However, a diver breathing a Nitrox mixture will reach the 1.4 PO₂ limit much shallower than a diver breathing air!

1.4 PO ₂						
AIR	<u>NN32</u>	<u>NN36</u>	<u>100% O₂</u>			
186 fsw	113 fsw	95 fsw	13 fsw			

NOAA PO₂ & Exposure Limits

	ΑΤΑ	CNS SINGLE EXPOSURE	PULMONARY 24 HOUR EXPOSURE			
		(MINS)	(MINS)			
	1.6	45	150			
	1.5	120	180			
<	1.4	150	180			
((1.3	180	210			
	1.2	210	240			
	1.1	240	270			
	1.0	300	300			
	0.9	360	360			
	0.8	450	450			
	0.7	570	570			
	0.6	720	720			

Oxygen Limits Continuum



Hyperoxia

- Contributing Factors:
 - Primary
 - FiO₂
 - Depth
 - Duration
 - Physical exertion
 - Secondary
 - CO₂ retention
 - Cold stress
 - Heat stress
 - Individual physiology

• CNS Toxicity:

- V-vision
 - E-ears
 - N-nausea
- T-twitching
- I-irritability
- D-dizzinessC-convulsions

CNS toxicity varies from person to person and from moment to moment

Unit Pulmonary Toxic Dose (UPTD)

1 UPTD = Pulmonary toxicity due to breathing 100% O_2 at a pressure of 1 atm for 1 min

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Unit Pulmonary Toxic Dose (UPTD)

IC AND ATT. $1 \text{ UPTD} = 100\% O_2 \text{ for } 1 \text{ min at } 1$ ATA **USN 5 UPTD 336 USN 6 UPTD 646 USN 6A UPTD 693** UPTD 615 - vital capacity - 2% UPTD 1425 - vital capacity - 10%

Lung Pathology Phase Exudative Phase

- Interstitial and alveolar edema
- Intra-alveolar hemorrhage
- Fibrinous exudate
- Hyaline membranes
- Capillary endothelial cell
- Swelling/destruction
- Type I alveolar epithelial cells destruction

Lung Pathology Phase 2

Subcutaneous Proliferative Phase

- Interstitial fibrosis
- Fibroblastic proliferation

SOFPARTNET

• Hyperplasia Type II alveolar epithelial cells

Signs and Symptoms of Oxygen Toxicity

V.E.N.T.I.D.C.

- Visual Symptoms
- Ear Symptoms
- Nausea and Vomiting
- Twitching and Tingling
- Irritability
- Dizziness
- Convulsions

Signs and Symptoms of Oxygen Toxicity

Irritability:

Any change in the diver's mental status; including confusion, agitation and anxiety.

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Dizziness: Clumsiness, incoordination and unusual fatigue.

Ear Symptoms:

Tinnitus is any sound perceived by the ears but not resulting from an external stimulus. The sound may resemble bells ringing, roaring, or a machinery-like pulsing sound.

Twitching and Tingling:

Any of the small facial muscles, lips, or muscles of the extremities may be affected. These are the most frequent and clearest symptoms. **Convulsions:** Seizures. Maybe no pre-convulsions indications.

Visual Symptoms:

Tunnel vision, a decrease in the diver's p eripheral vision, and other symptoms, such as blurred vision, may occur.

> **Nausea and Vomiting:** These symptoms may be intermittent.



FIG. 9.14. Perimetric measurements of visual fields in the same subject before and after 3.5 h of oxygen breathing at 3 ATA. Normal pre-exposure visual fields shown in A. Visual fields shown in B, C and D, respectively, were obtained 5, 25 and 50 min post-exposure. (From Behnke *et al.* 1935)

Nitric Oxide and Oxygen Convulsions

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- Increase in NO overrides O₂ vasoconstriction
- Brain tissue pO₂ increases markedly
- Convulsion follows

EFFECTS OF OXYGEN TOXICITY High Inspired Oxygen Pressure



Factors Which Protect Against Oxygen Toxicity

- Intermittent exposure
- Pre-exposure to CO₂
- Tris buffer (tris [Hydroxymethyl] Aminomethane)
- Barbiturates
- Hyperventilation
- Adrenalectomy
- Factors decreasing the metabolic rate

PARTMEN

Factors Which Increase Oxygen Toxicity

- XS CO₂ in mixture breathed
- Increased temperature
- Work or exercise
- Respiratory impairment
- Factors increasing the metabolic rate
- Adrenalin



Questions?

