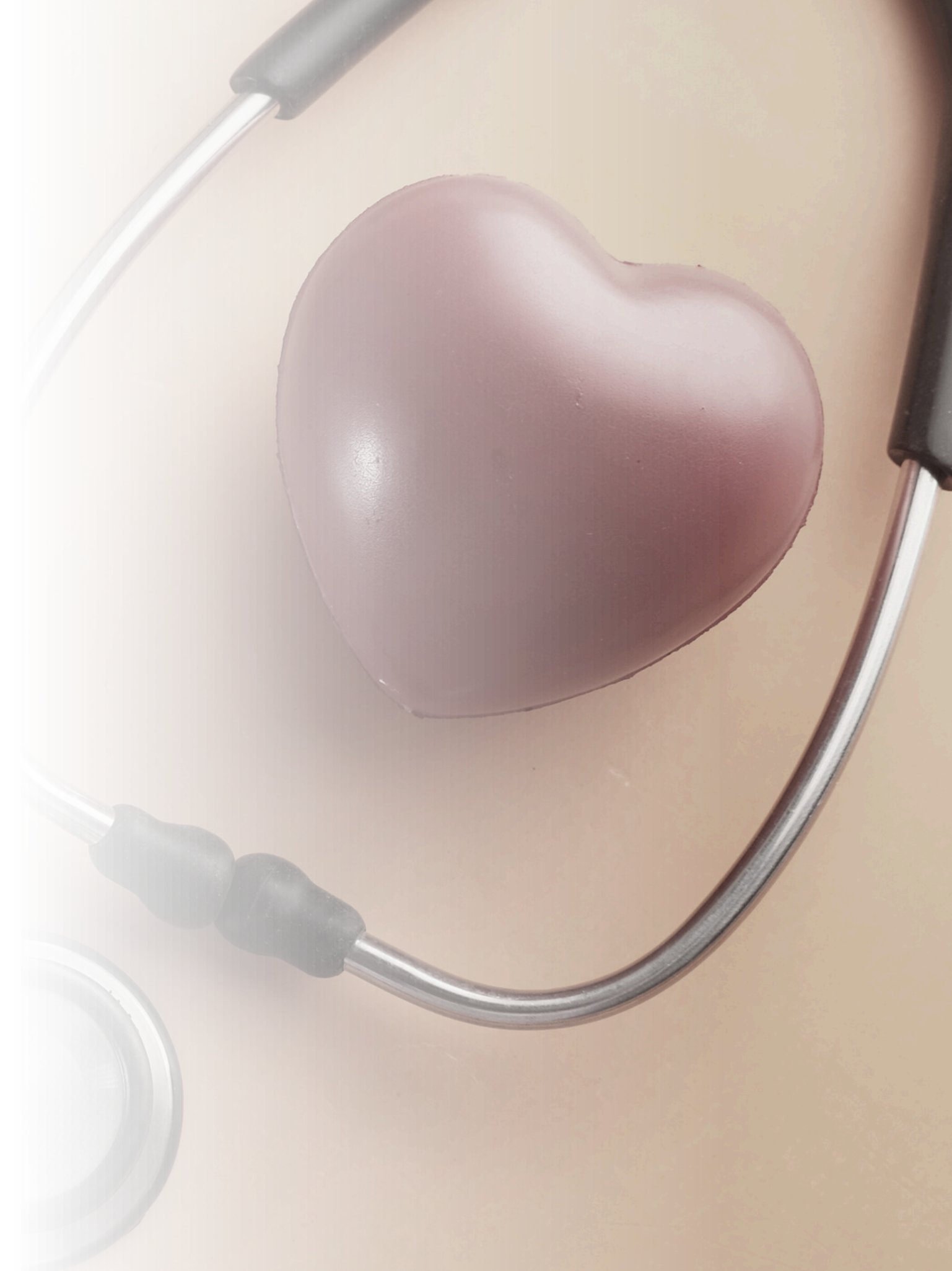


BLOOD PRESSURE MONITORING

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Introduction

- Blood Pressure is one of the 4 **main vital signs**
- Used daily in:
 - Emergency medicine
 - Primary care
 - Home monitoring
- Essential for early detection of **cardiovascular risk**
 - *silent killer*
- First aider at EPFL

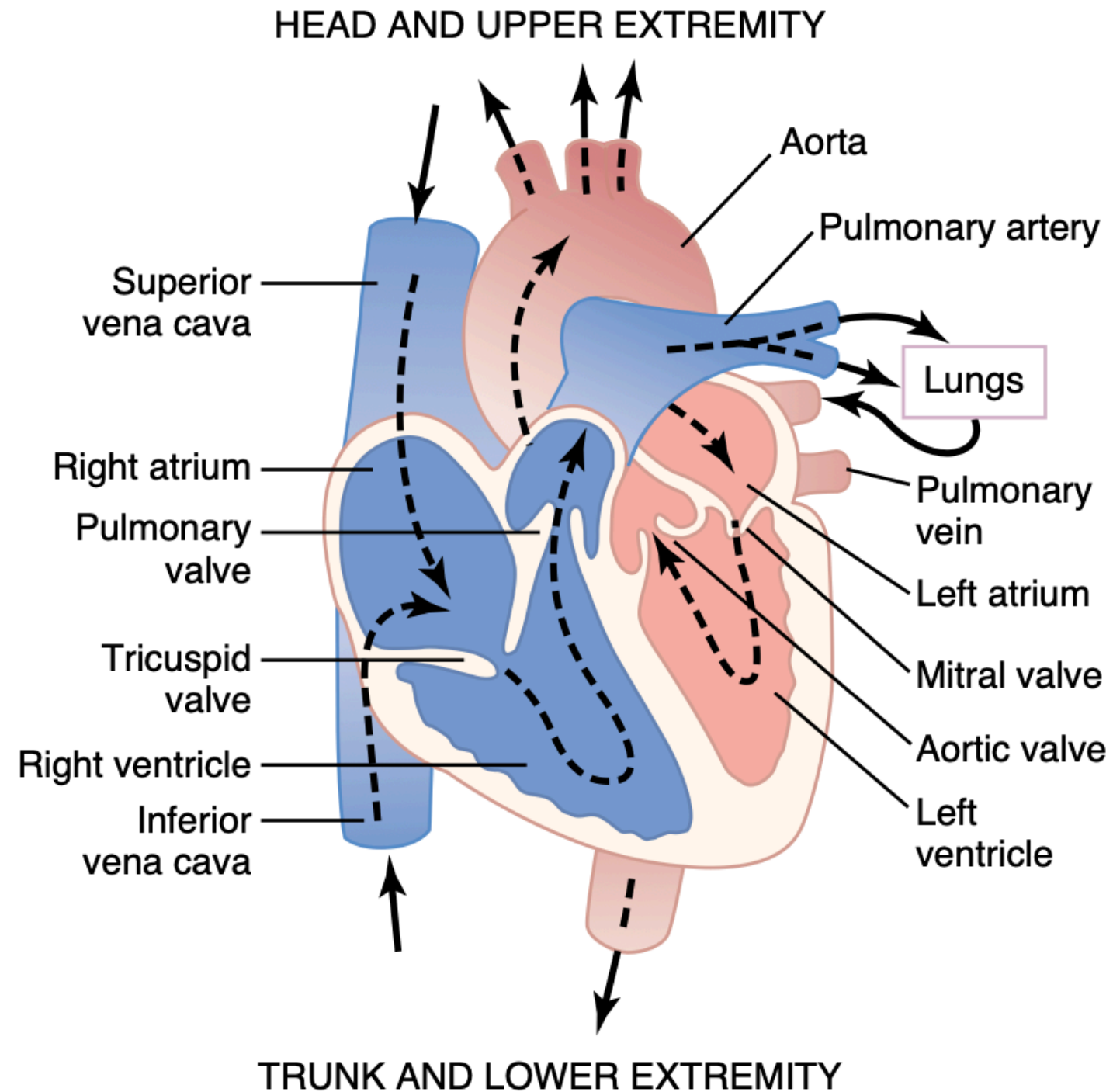


Why does Blood Pressure matters ?

- Blood pressure determines **organ perfusion**
- Essential for adequate delivery of:
 - Oxygen
 - Nutrients
- Two types of Abnormal blood pressure:
 - **HYPERTENSION** (*too high*) - $\frac{1}{3}$ of adults between 30 & 79
 - Cardiovascular events (Strokes, Heart attacks...)
 - Internal bleeding
 - Organ damage
 - **hypotension** (*too low*)
 - Organ damage
 - Faintness → falls

The Heart as a Pump

Physiologic aspects



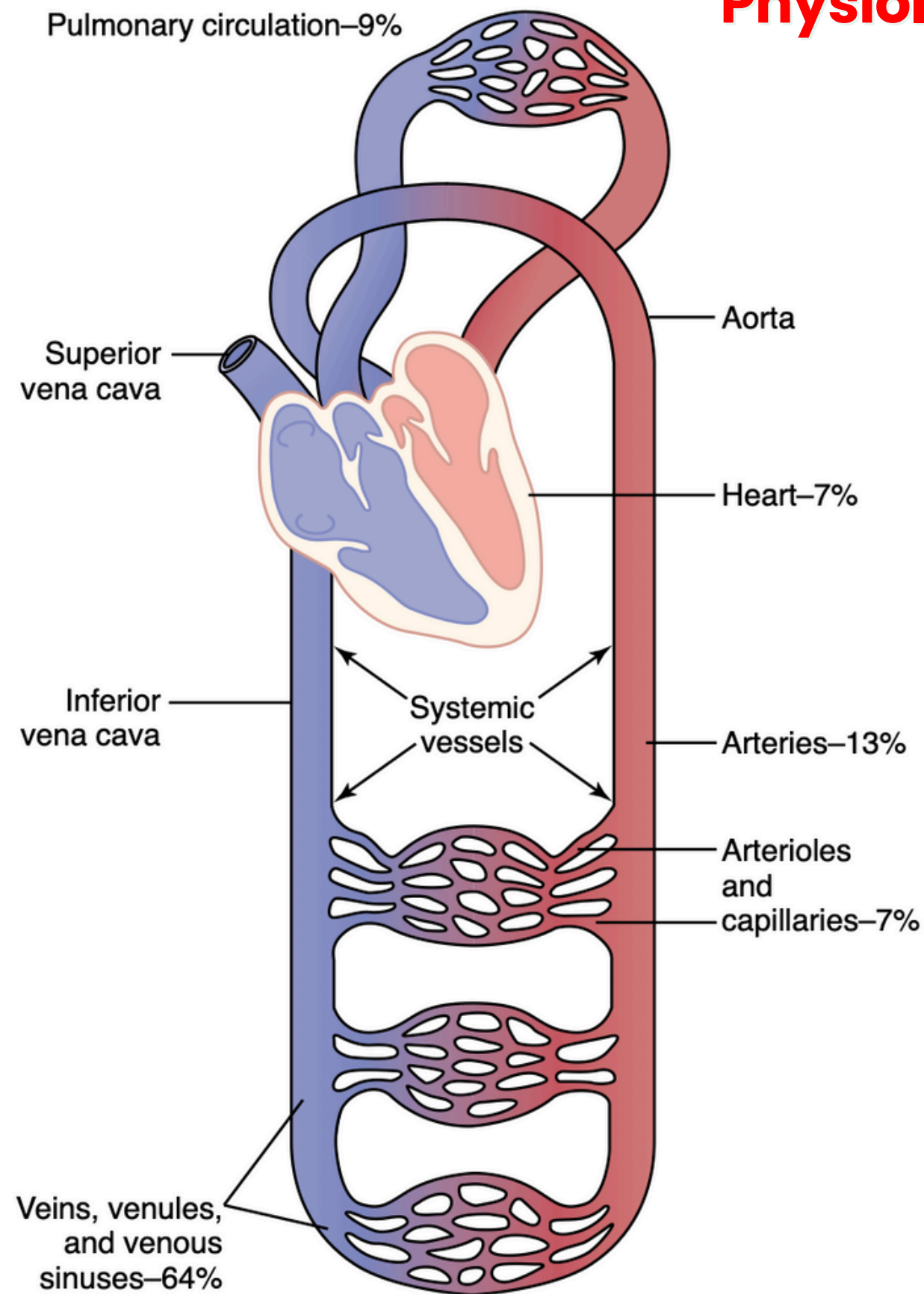
- Two separated pumps :
 - **Right heart** =
 - Receives deoxygenated blood
 - pumps blood through the lungs (low P)
 - **Left heart** =
 - Receives oxygenated blood
 - pumps blood through the peripheral organs (high P)
- Each heart are composed of an **atrium** and a **ventricle**
- **Cardiac cycle**:
 - **systole** : ventricular contraction
 - **diastole** : ventricular relaxation



P=Pressure

Blood Circulation

Physiologic aspects



- Blood circulates through a **closed vascular system**

- **Primary Roles of the circulation:**

- Transport oxygen and nutrients to muscles & tissues
- Remove waste products
- Conduct hormones
- Support the immune system
- Regulate the body temperature

- **Vessel types:**

- *Arteries* – high pressure, elastic
- *Arterioles* – resistance vessels
- *Capillaries* – exchange of gases and nutrients →
- *Venules & veins* – low pressure, blood reservoir

→ Blood pressure **decreases** progressively along the circulation

How to calculate Blood Pressure ?

Definition: BP is the **force** that our blood places on our vessels

Blood Pressure = Cardiac Output x Systemic Vascular Resistance

$$\text{BP} = \text{CO} \times \text{SVR}$$

HR x SV

Heart Rate x Stroke Volume
(beats / min) x (Volume ejected / beat)



(measured in mmHg)

Normal BP values

Low BP:

→ Alarming only if *symptomatic*

Pre-High BP:

→ *Lifestyle modification* **recommended**:

- Reduce salt intake, increase physical activity, weight management, stress reduction

High BP Stage 1:

→ *Lifestyle modification* **mandatory**:

- Medical follow-up **advised**, pharmacological treatment may be considered

High BP Stage 2:

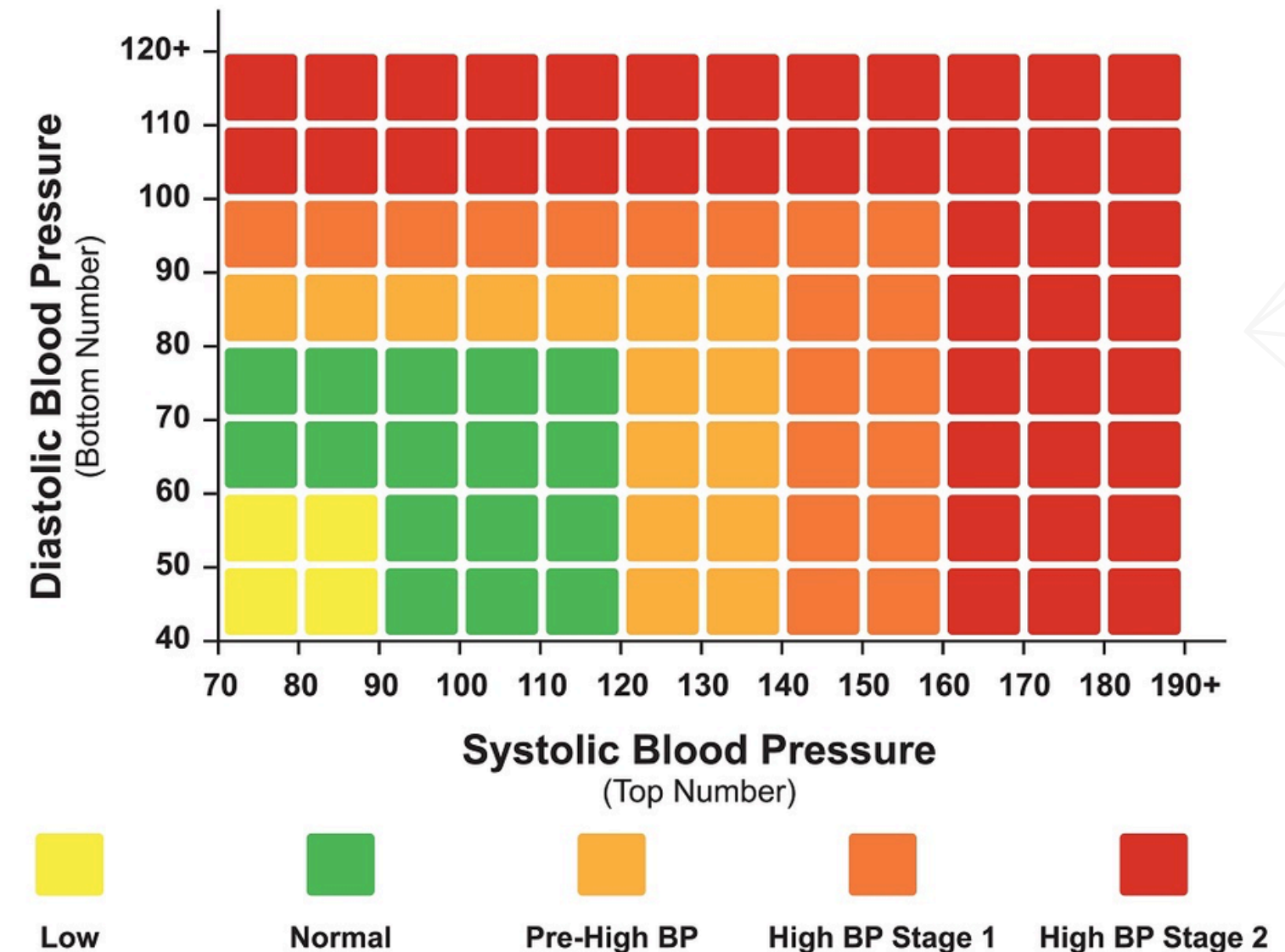
→ Medical evaluation **required**:

- Antihypertensive medication usually initiated
- Regular and strict BP monitoring
- Risk of long-term organ damage

>180 /(or) >120:

→ **Medical emergency ==> Hospital**

Blood Pressure Chart



Different types of Monitoring

Blood Pressure can be measured using two main approach:

- **Non-invasive technique:**
 - Pressure-based
 - Optical-based
- **Invasive technique:**
 - Invasive Blood Pressure Sensor
- **5 distinct techniques**, each with different principles, accuracy, and clinical applications

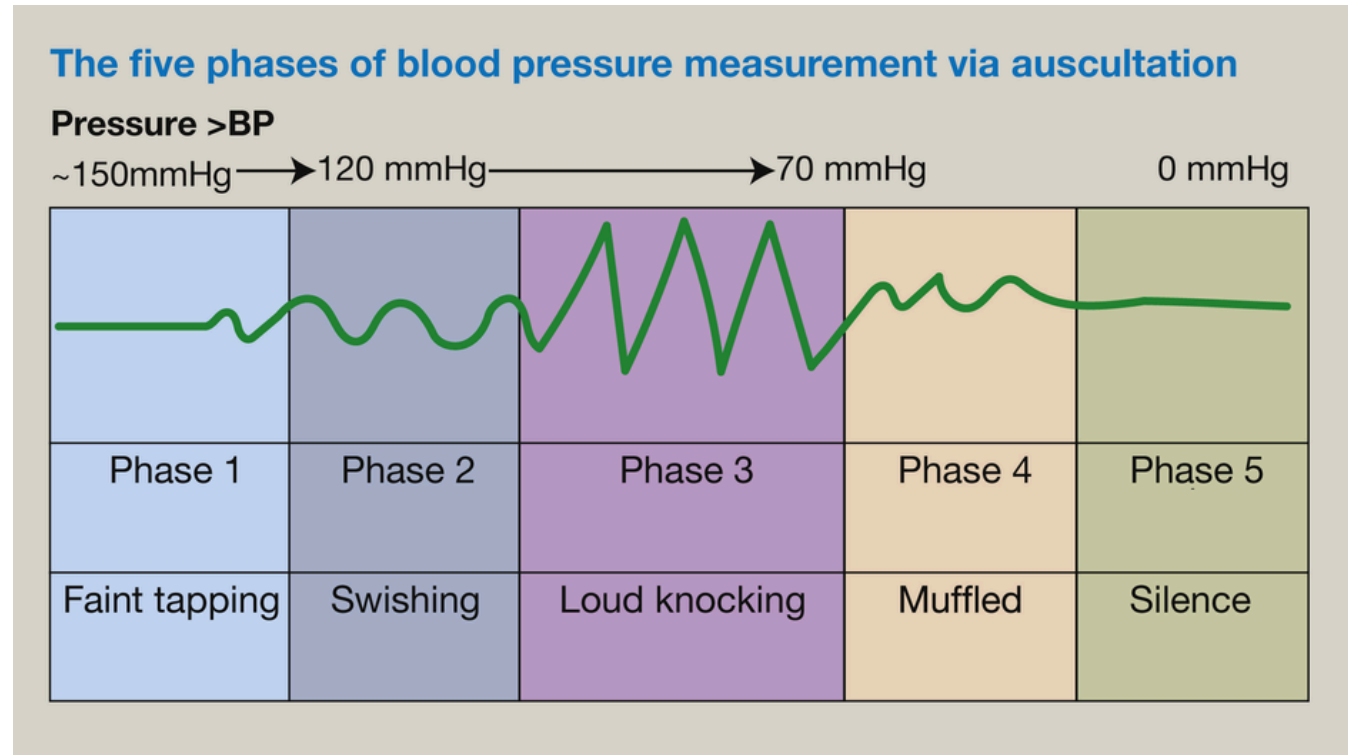
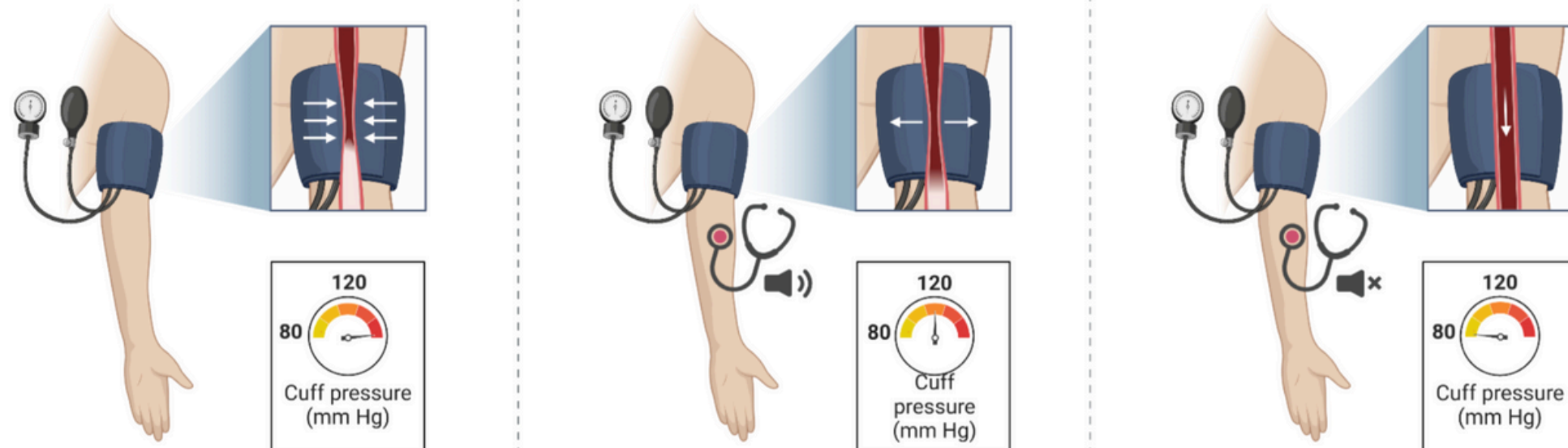
Non-invasive Pressure-based: Auscultatory BP monitoring

Working principal :

- **Sphygmomanometer** (*inflatable cuff and manometer*)
- **Stethoscope** on brachial artery

Based on **Korotkoff** sound.

Considered the **clinical reference method**



Pros :

- High accuracy
- Direct identification of S. and D. BP
- Low cost & no battery needed

Cons:

- Operator dependant (skills)
- Non-continuous

Non-invasive Pressure-based: Oscillometric BP monitoring

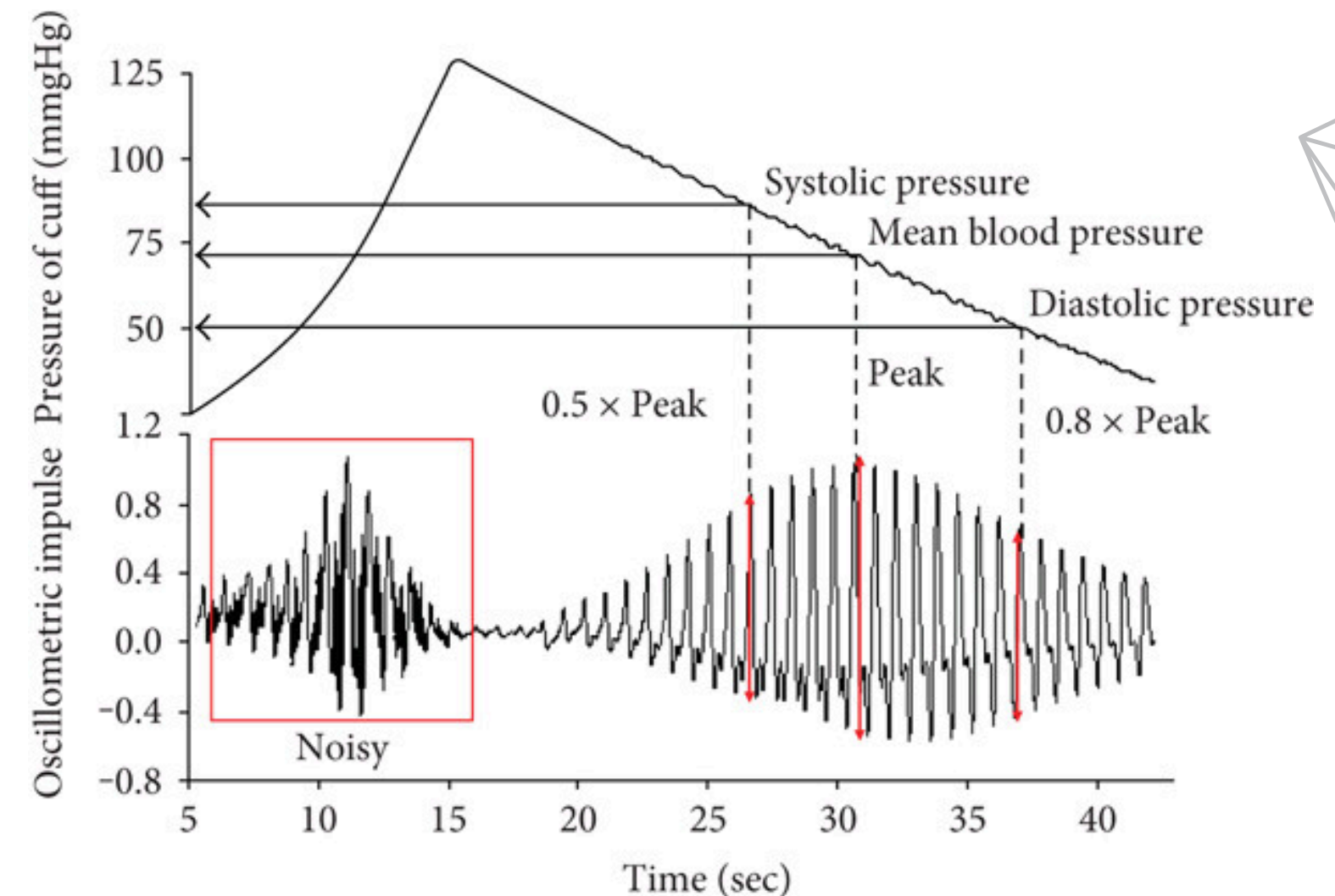
Working principal :

- **Sphygmomanometer** with electronic pump
- **Pressure sensors** inside the cuff
- **Displayer**

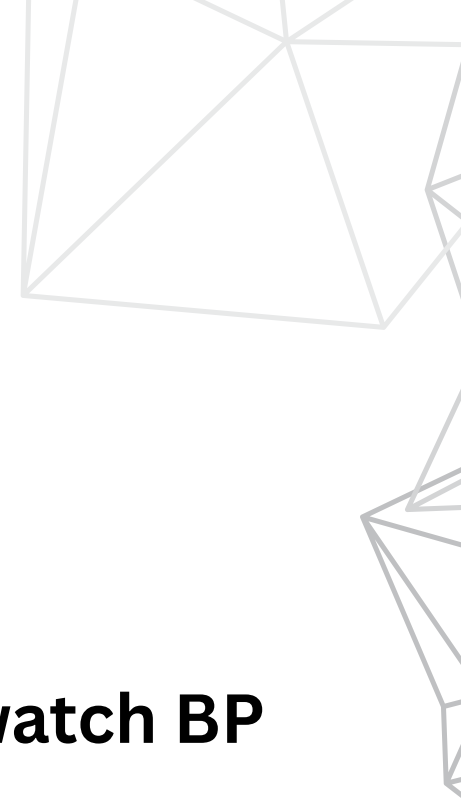
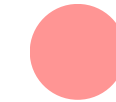
Measures Pressure changes of the artery (oscillations).

→ Detecting the peak oscillation to find **Mean Arterial Pressure**

- *Secret algorithm* to calculate SBP and DBP



Non-invasive Pressure-based: Oscillometric BP monitoring



OMRON

Healthcare

Cuff-based Smartwatch BP Monitor

→ new technology
Used in for ambulatory monitoring, for people with hypertension

Pros:

- Comfortable
- Continuous monitoring

Cons:

- Less accurate than upper-arm cuff monitors
- Intrusive measurement
- Expensive

Electronic BP Monitor

→ one of the most used in the world

Used in different context :

- Hospital, Doctors
- Home
- Emergency, First responder

Pros:

- Clinically validated
- Affordable/Accessible

Cons:

- Intermittent measurements only



560CHF



80CHF



Non-invasive Optic-based :

Uses **photoplethysmography** (PPG)

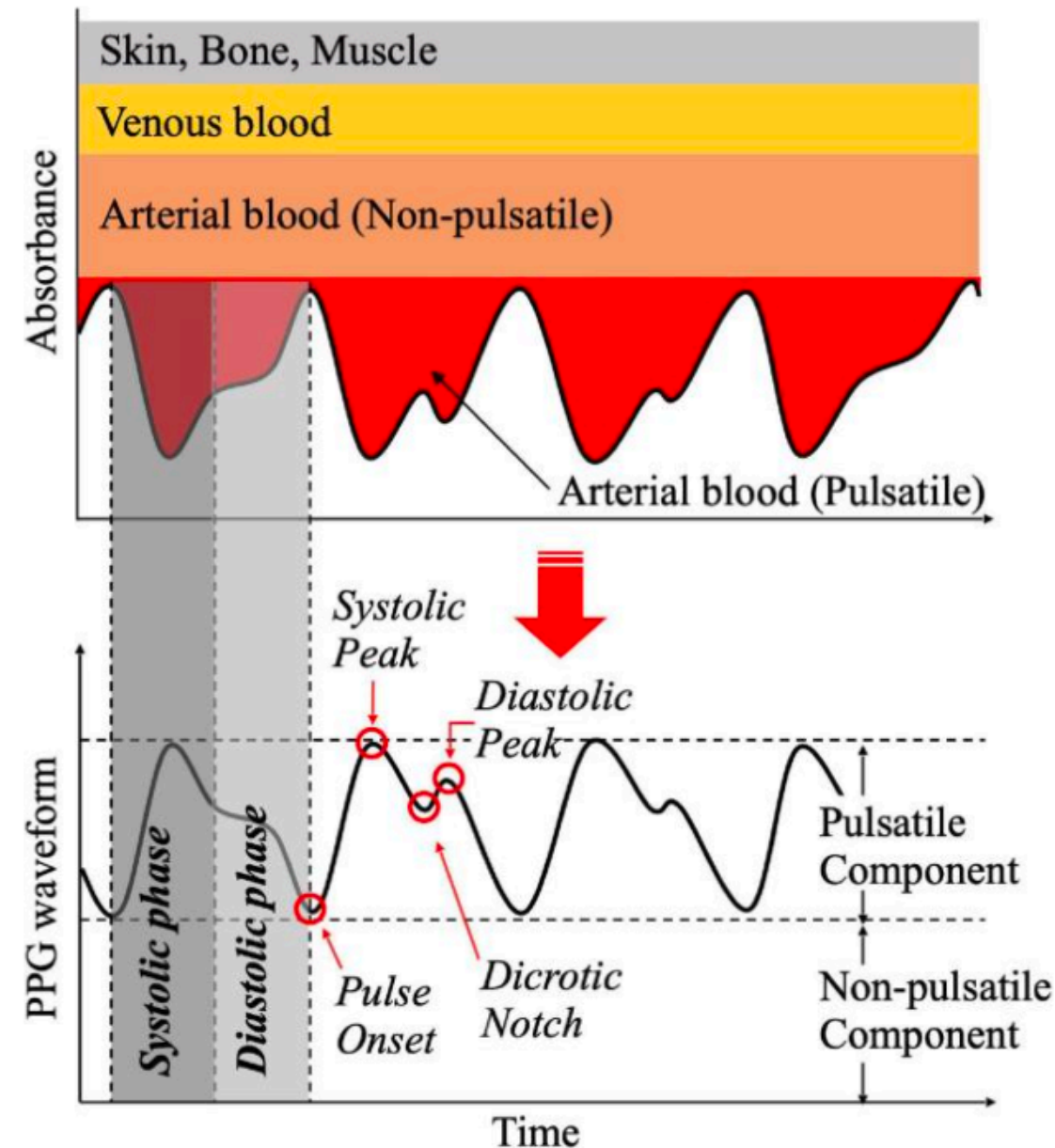
→ Measures blood volume changes in the skin

Blood pressure is estimated, not directly measured → not diagnostic tool

Requires calibration with a cuff

Working principles:

- **Light emission** (by the device)
- Interaction with Arterial blood
- **Photodetection** of the reflected light
- Signal Analysis
- **Displayer**



240CHF

Pros:

- Comfortable
- Continuous monitoring
- No inflation

Cons:

- Indirect measurement
- Sensitive to motion and skin properties
- Lower clinical accuracy

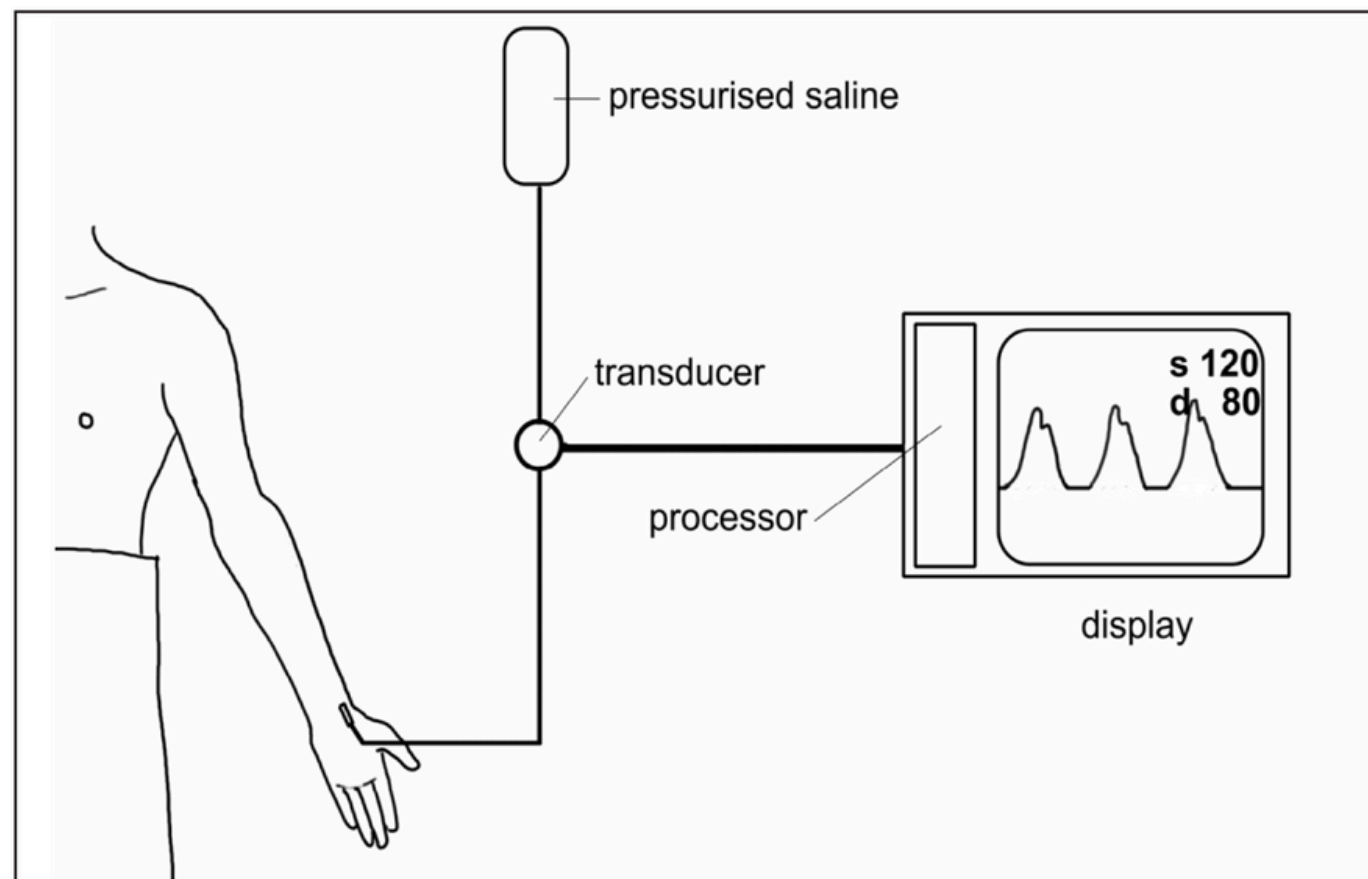
Invasive Blood pressure monitor:

Continuous real-time blood pressure waveform

Working principle:

- Arterial cannula
- Fluid filled pressure system
- **Pressure transducer** → convert pressure into elec. signal
 - should be zeroed at atm P. and placed at heart level
- Displayer

Used in ICU, Surgery, High-risk patients



Pros:

- Very high accuracy
- Continuous monitoring

Cons:

- Invasive procedure
- Risk of infection and thrombosis
- Not suitable for routine use

Product comparison :

Different product, different use



Technique	Invasiveness	Accuracy	Continuous Monitoring	Ease of Use	Clinical Use	Cost
Auscultatory	Non-invasive	High (reference)	No	Medium	Clinical, emergency	\$
Oscillometric BP monitor	Non-invasive	Good	No	High	Clinical, home, ambulance	\$\$
Oscillometric Smartwatch	Non-invasive	Good	Limited	High	Ambulatory monitoring	\$\$\$\$
Optical Wristband	Non-invasive	Moderate	Yes	Very high	Wellness, trends	\$\$\$
Invasive Pressure Sensor	Invasive	Very high	Yes	Low	ICU, surgery	\$\$



Future perspective...

Current Limitations

- Non-invasive continuous methods **lacks clinical-grade accuracy**
- Optical-based methods require frequent calibration
- High inter-individual variability (skin tone, vessel stiffness, motion artifacts)
- Invasive monitoring remains limited to critical care

Technology trends

- **Wearable continuous monitoring**
- Smaller, lower-power sensors integrated into:
 - Smartwatches, Wristbands, Smart textiles
- Advanced signal processing & AI personalize BP estimation

Implantable & Semi-invasive Sensors (Research Stage)

- Implantable pressure sensors for long-term cardiovascular monitoring
- Potential benefits:
 - Continuous, high-accuracy measurements, reduced user dependency
- Challenges:
 - Biocompatibility, long-term stability, infection and ethical considerations



Conclusion

Blood pressure is a **key vital sign**

Hypertension remains a major public health issue due to its silent progression

Blood pressure results from the interaction between:

- Cardiac output
- Systemic vascular resistance

Several monitoring techniques are available:

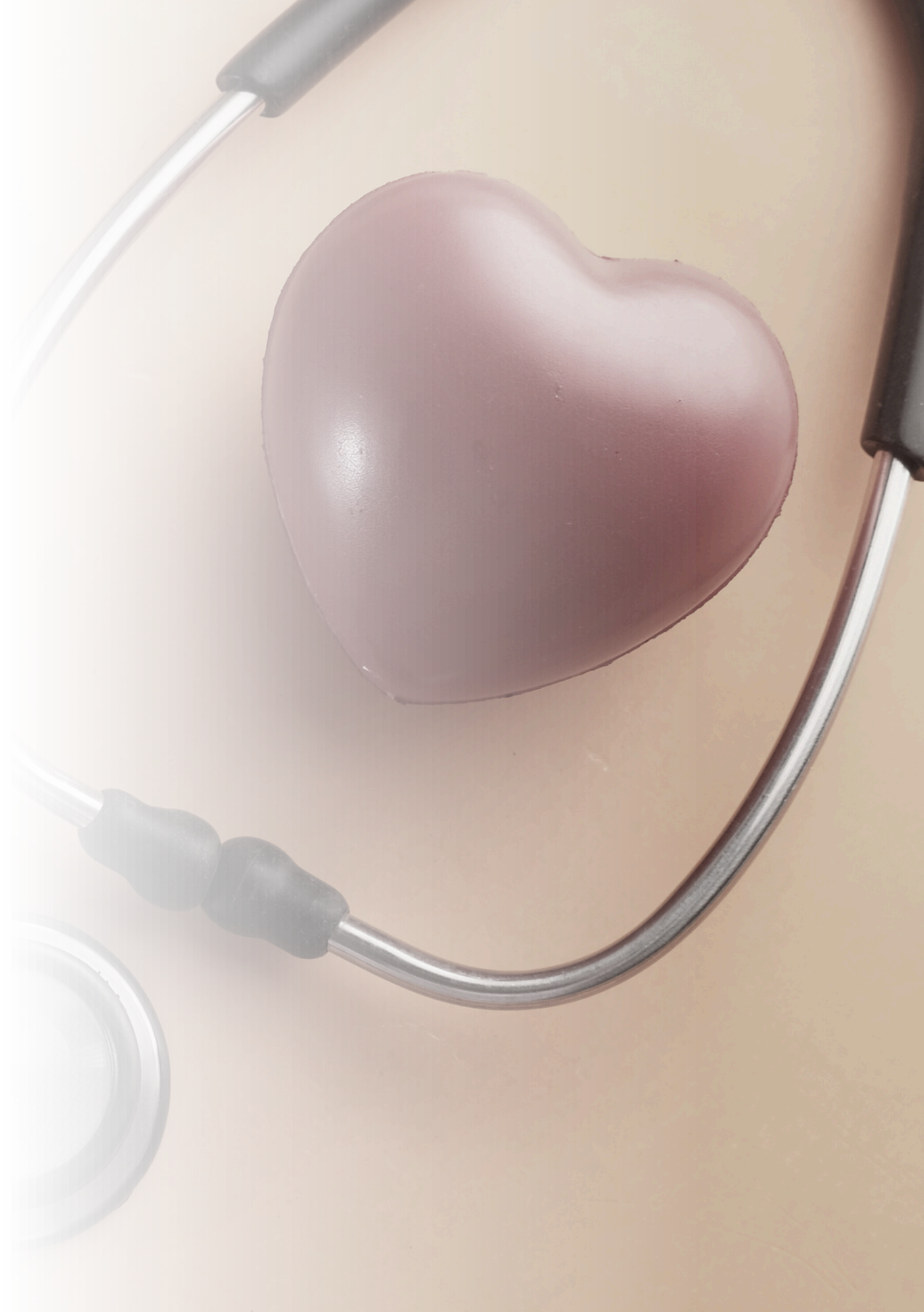
- *Auscultatory* methods as the clinical reference
- *Oscillometric* devices for routine and home monitoring
- *Photoplethysmography*-based wearables for continuous trend analysis
- *Invasive* method for critical care

→ No single technique combines accuracy, continuity, and comfort

Why not Implantable BP sensors?

THANK YOU

Any Question?



Appendix : EPFL implatable BP sensor

WO 2021/232161

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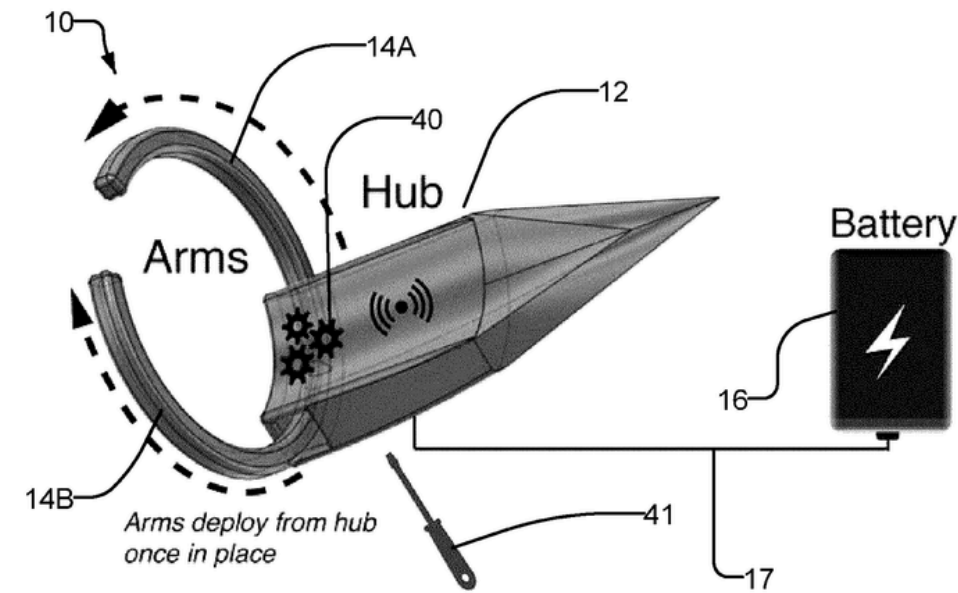


FIG. 1

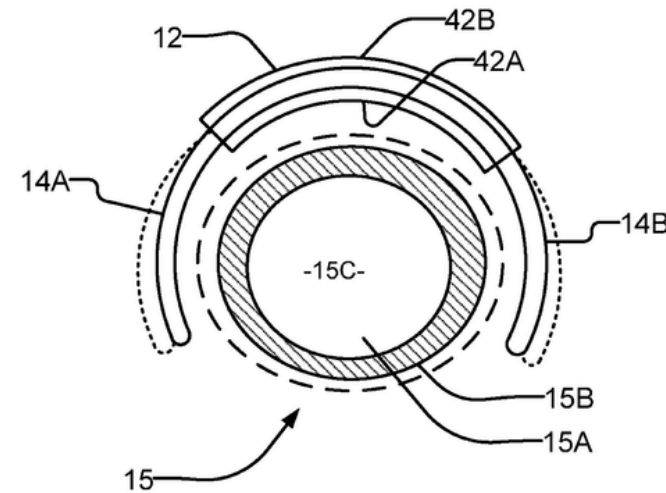


FIG. 2

issued the 25.11.2021 → Worldwide

