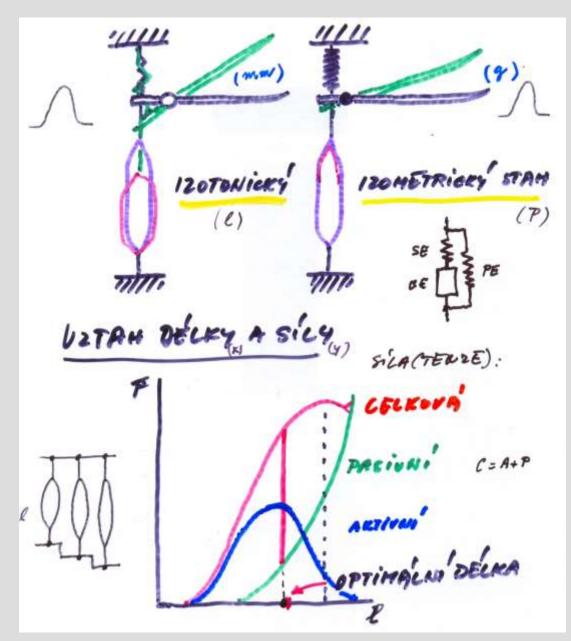
CARDIAC MECHANICS CARDIAC CYCLE HEART FAILURE

PASSIVE STRETCH

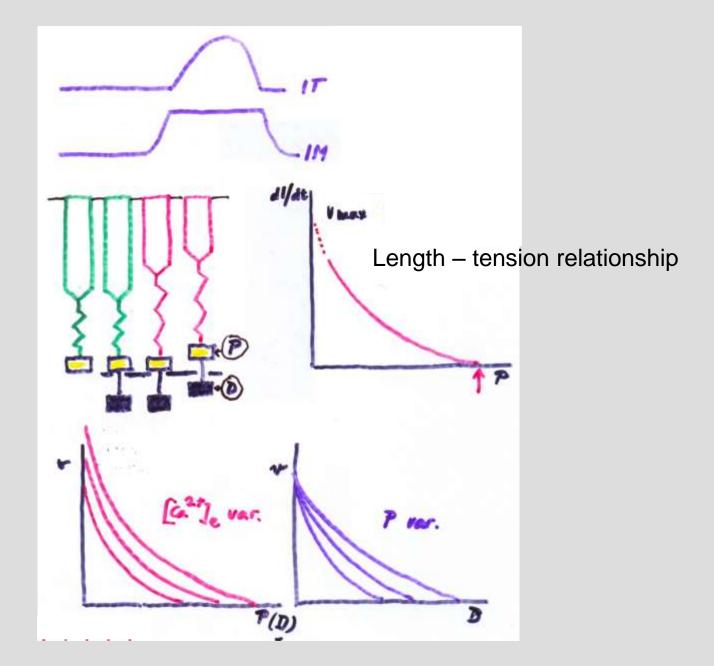
ACTIVE STRETCH

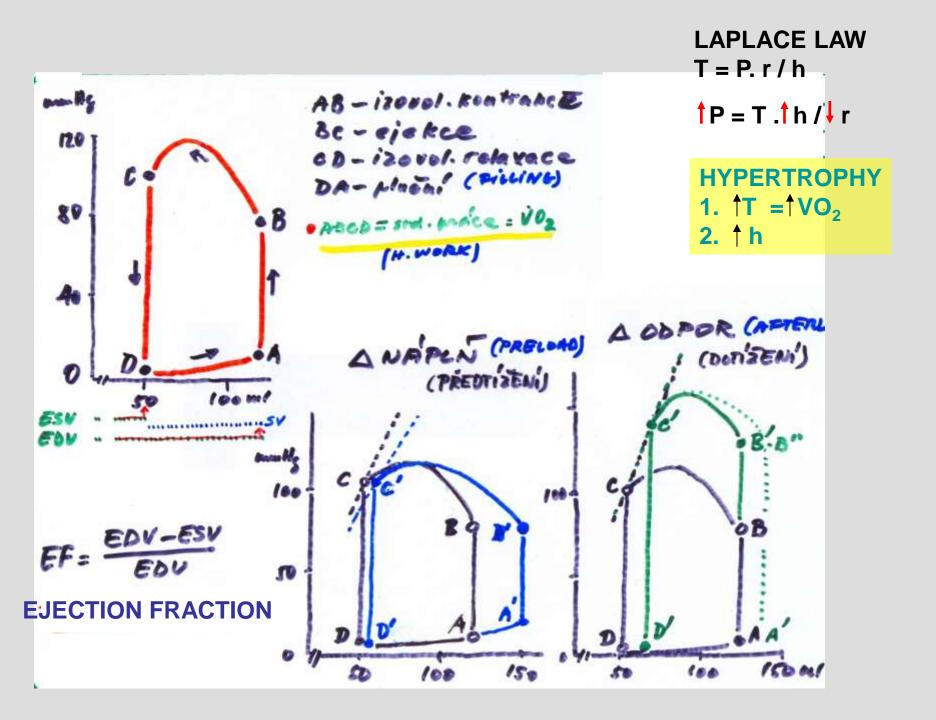


STARLING PRINCIPLE (heterometric autoregulation)

AFTERLOADED CONTRACTION

PRELOAD, AFTERLOAD





HEART SOUNDS III. II. IV. NORH AD. STENOSIS -M. REGURGIT. M. STENOSIS Ao. REGURGIT. M.V C 0 Ao.V 0

- I. mitral (+ tricuspidal) valve closure
- II. aortal (+ pulmonary) valve closure
- III. fast filling of ventricles pathological
- IV. contraction of atria mostly pathological

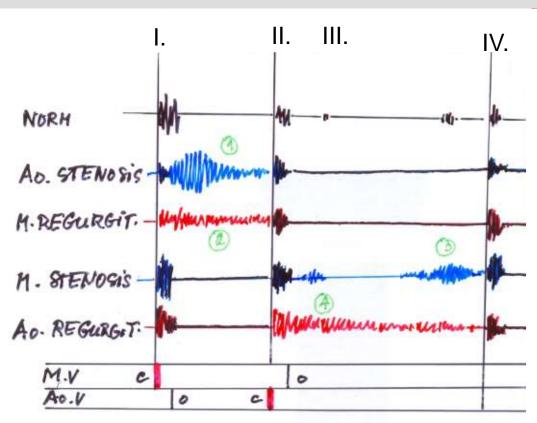
- Caused by vibration of: •Closure and stretching of valves
- Izovolumic contraction of heart
- muscle (papill. muscles, tendons)
- Turbulent blood flow

Vibration of ventricular wall

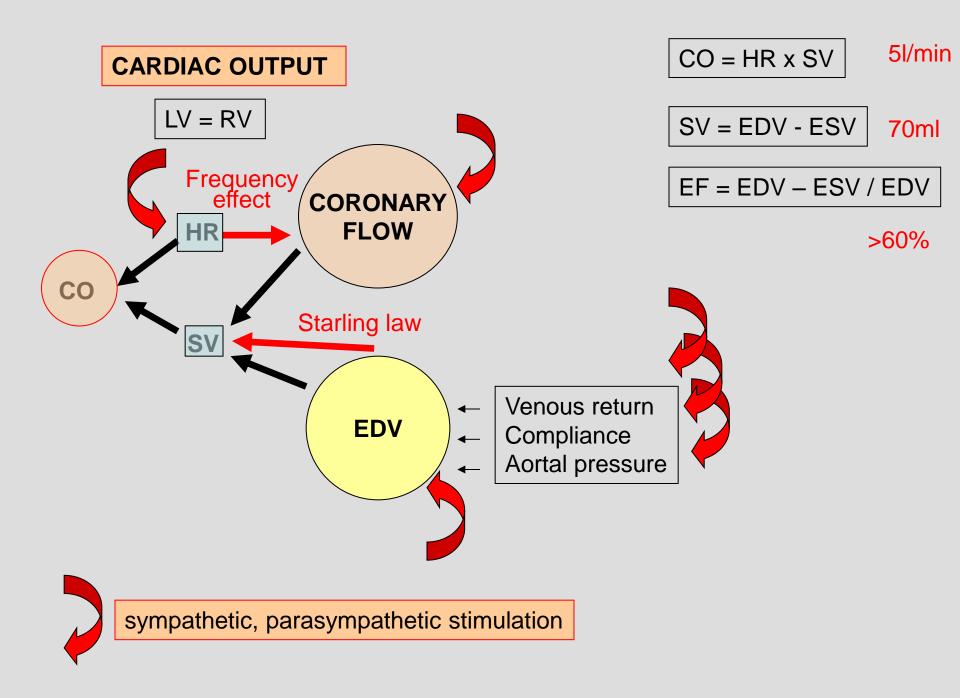
MURMURS – pathological phenomena

- 1. SYSTOLIC:
- Stenosis aortal, pulmonary (1)
- Regurgitation mitral, tricuspidal (2)
- 2. DIASTOLIC:
- Stenosis mitral, tricuspidal (3)
- Regurgitation aortal, pulmonary (4)
- 3. SUSTAINED:
- Defects of septum

Splitting of I. or II. sound: asynchronous closure of M - T valve (I.) or Ao - P valve (II.) (inspiration, hypertension....)



TURBULENT BLOOD FLOW



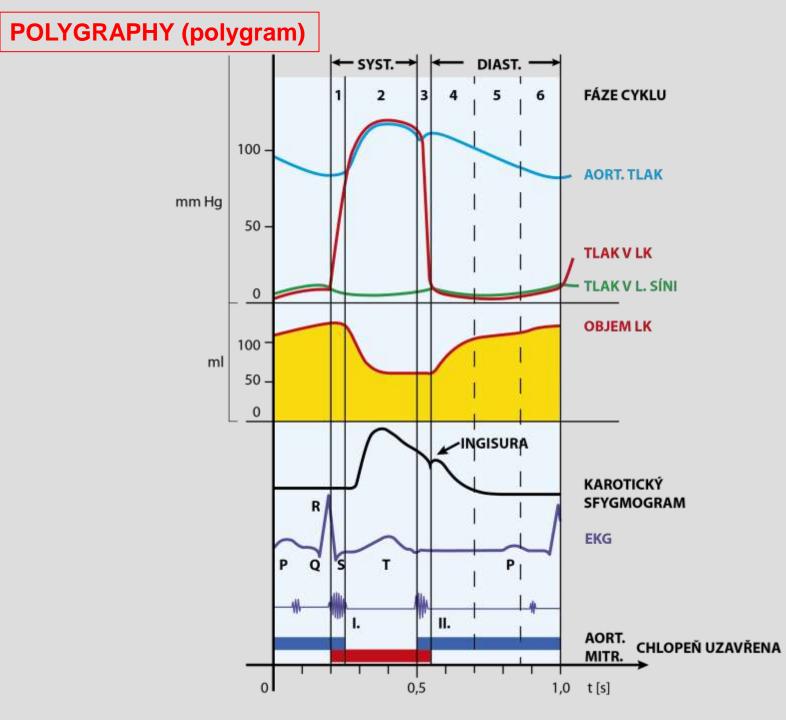
CARDIAC RESERVE = maximal CO / resting CO

CORONARY RESERVE = maximal CF / resting CF **3,5**

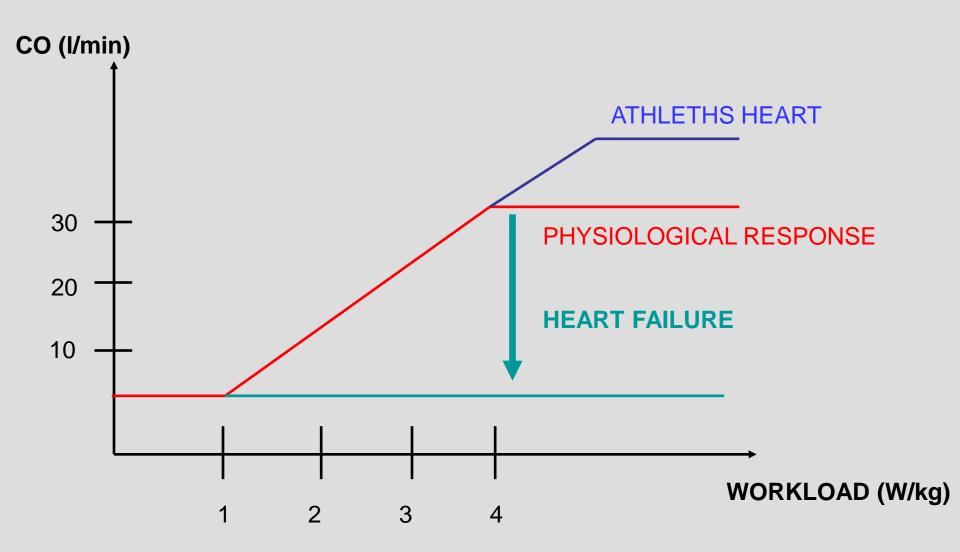
- **CHRONOTROPIC RESERVE** = maximal HR / resting HR **3 5**
- **VOLUME RESERVE** = maximal SV / resting SV **1,5**

CARDIAC INDEX = CO / body surface

4 - 7







HEART FAILURE

The heart is not able pump sufficient amount of blood into periphery <u>at normal</u> <u>venous return</u>.

MOST OFTEN CAUSES:

- Severe arrhythmias
- Overload volume (aortal insufficiency, a-v shunts) or pressure (hypertension

and aortal stenosis - left overload, pulmonary hypertension and stenosis of

pulmonary valve - right overload)

Cardiomyopathy

SYMPTOMS: fatigue, oedemas, venostasis, dyspnoea, cyanosis

ACUTE x CHRONIC. COMPENSATED x DECOMPENSATED.