

Shock: Pathophysiology, Diagnosis, Treatment, and Physiologic Response to Trauma

Elizabeth A. Carr

DEFINITION OF SHOCK

In 1872 the trauma surgeon Samuel D. Gross defined shock as “the rude unbinding of the machinery of life.” Shock is the progression of a cascade of events that begins when cells or tissues are deprived of an adequate energy source (oxygen). Shock occurs as a result of inadequate tissue perfusion; the lack of an adequate energy supply leads to the buildup of waste products and failure of energy-dependent functions, release of cellular enzymes, and accumulation of calcium and reactive oxygen species (ROS) resulting in cellular injury and ultimately cellular death. Activation of the inflammatory, coagulation, and complement cascades result in further cellular injury and microvascular thrombosis. The amplification of these processes coupled with increased absorption of endotoxin and bacteria (due to liver and gastrointestinal dysfunction) lead to the systemic inflammatory response syndrome (SIRS) (see Chapter 2), and multiorgan dysfunction and if uncontrolled, ultimately death.

Classifications of Shock

Tissue perfusion is dependent on blood flow. The three major factors affecting blood flow are the circulating volume, cardiac pump function, and the vasomotor tone or peripheral vascular resistance. The interplay of these three factors can be seen in the formula for cardiac output (CO):

$$\text{Cardiac output (CO)} = \text{Stroke volume} \times \text{Heart rate}$$

CO ultimately determines the blood flow to tissues and is regulated, in part, by the stroke volume. Stroke volume is affected by the preload (amount of blood returning from the body and entering the heart), the cardiac contractility (muscle function), and the afterload or arterial blood pressure the heart must overcome to push blood through the aortic and pulmonary valves. Preload is directly affected by the circulating blood volume or amount of blood returning to the heart. Causes of decreased preload include loss of volume, hypovolemia, decreases in vasomotor tone, and vasodilation, which results in pooling of blood in capacitance vessels and decreased return to the heart. In this situation, although the total volume of blood remains unchanged, the effective circulating volume decreases. Afterload,

the third component of CO, is directly affected by vasomotor tone or peripheral vascular resistance. If vascular resistance or tone increases, afterload also rises (hypertension) with a resultant fall in CO and perfusion. The opposite extreme is a severe fall in vascular resistance, which results in pooling of blood in capacitance vessels and a fall in blood pressure and preload, and it ultimately results in inadequate perfusion and shock. CO or flow can, therefore, also be described by the equation:

$$\text{CO} = \text{Blood pressure} / \text{Total peripheral vascular resistance}$$

Shock most commonly occurs because of one of three primary disturbances and can be classified accordingly. *Hypovolemic shock* is the result of a volume deficit, either because of blood loss (e.g., resulting from profound hemorrhage), third space sequestration (e.g., occurring with a large colon volvulus), or severe dehydration. *Cardiogenic shock* or pump failure occurs when the cardiac muscle cannot pump out adequate stroke volume to maintain perfusion. *Distributive shock* or microcirculatory failure occurs when vasomotor tone is lost. Loss of vascular tone can result in dramatic fall in both blood pressure and venous return. Although the drop in blood pressure will initially decrease afterload (which will improve CO), the pooling of blood and loss of venous return results in a severe decrease in preload and consequently, decreased CO and perfusion.

Common causes of distributive shock include neurogenic shock, septic shock, and anaphylactic shock. Because distributive shock is a loss in effective circulating volume, fluid therapy is indicated to help restore perfusion. In contrast, cardiogenic shock is the result of pump failure, and fluid therapy may actually worsen clinical signs. Less commonly, shock can develop when increased metabolic demand results in relative perfusion deficits or when oxygen uptake is impaired because of mitochondrial failure, sometimes termed relative hypoxia or dysoxia.

It is important to recognize that although the inciting cause may differ, as shock progresses, there is often failure of other areas as well. For example, untreated hypovolemic shock can result in microcirculatory failure (loss of vasomotor tone) as oxygen debt causes muscle dysfunction and relaxation. Alternatively, hypovolemic shock can result in myocardial failure as perfusion deficits affect energy supply to the

Shock A Physiologic Basis For Treatment

Mr. Rohit Manglik



Shock A Physiologic Basis For Treatment:

Joshi's-Physiology Preparatory Manual for Undergraduates - E-Book Sadhana Joshi Mendhurwar,2022-04-19 The seventh edition of this book is revised as per guidelines of National Medical Commission in accordance with the Competency Based Medical Education CBME of Physiology In highly simplified language it explores links with Pathophysiology and Medicine focusing on early clinical exposure to students and gearing them towards holistic patient management This book continues to be must have for all undergraduate medical students as it prepares them for both theory and viva voce examinations It is also useful for paramedical dental homeopathy and ayurveda students besides those preparing for PG entrance examinations Logical flow in easy to understand language and systemic presentation of complete theory in Question Answer format helps in revision and self assessment before examination Substantially increased visual representations in the form of diagrams tables and charts to facilitate quick assimilation learning and greater retention of knowledge Clinical Case Studies that draw from the theory covered in the book and impart practical focused learning Significant content enhancement and re organization in line with revised syllabus to ensure continued relevance completeness and renewed focus on application based learning New chapter have been added on Integrated Physiology as per CBME curriculum Comprehensive treatment highlighting horizontal and vertical integration of topics to foster solid understanding Chapter wise exhaustive coverage of topics and mapping with CBME via specific competency codes Pointwise specific and detailed illustrated answers to progressively building up intuitive questions on each topic Insertion of 86 Clinical Case Studies with Question and Answer Mapping and Problem based Learning prepare students for National Exit Test NExT examinations and facilitate an integrated approach that lays a strong foundation for academics and practice Textbook of Medical Physiology 4th Edition - E-Book G K Pal,2021-12-21 Textbook of Medical Physiology 4th Edition E Book Textbook of Medical Physiology_3rd Edition-E-book Indu Khurana,Arushi Khurana,Narayan Gurukripa Kowlgi,2019-11-11 The third edition of this book incorporates thoroughly revised and updated text organized into twelve sections and arranged in three parts Part I General Physiology includes one section having five chapters Part II Systemic Physiology has been arranged into ten sections one on each body system Part III Specialized integrated physiology includes one section comprising of seven chapters Complete and up to date text incorporating recent advances Illustrated by more than 1100 clear line diagrams Complemented with numerous tables and flowcharts for quick comprehension Applied aspects highlighted in the boxes have been expanded and updated with recent molecular concepts on pathophysiology advances in investigations and therapeutic principles Additional important information has been highlighted as important notes The above features of this book make it an indispensable text for postgraduates in Physiology Candidate preparing for PG entrance examination would also find it as an authentic reference source Complimentary access to full e book **Textbook of Human Physiology for Dental Students** Khurana,2009-11-20 The book fully covers the syllabus prescribed by Dental Council of India and presents a thorough exposition of physiology for

undergraduate students The exposition is systematically divided into eleven sections Each section begins with a brief overview highlighting the topics covered The subject is then explained in a graded manner with a large number of diagrams flowcharts and tables to facilitate an easy understanding About the Author Dr Mrs Indu Khurana Associate Professor Department of Physiology Postgraduate Institute of Medical Sciences Rohtak India She has a rich experience of more than 25 years of teaching and research She has to her credit the discovery of a new reflex the oculodepressor reflex ODR and three distinct patterns of oculorespiratory reflex ORR British Journal of Ophthalmology 1997 On account of her contribution to the field her biographical profile was included in the Marquis Who's Who in Science and Engineering *Textbook of Medical Physiology - E-Book* Indu Khurana, Arushi Khurana, Narayan Gurukripa Kowlgi, 2024-09-03 The fourth edition of this well known book has been thoroughly revised and updated as per the suggestions and feedback from students and teachers The text has been arranged in three parts and each part has been further subdivided in twelve sections and seventy eight chapters Part I General Physiology includes one section having five chapters Part II Systemic Physiology has been arranged into ten sections one on each body system Part III Specialized integrated physiology includes one section comprising of eight chapters New to This Edition Addition of a new chapter on Physiology of Yoga explains effectual relationship between aspects of yoga practice and human physiology New applied aspects to emphasize the clinical significance of physiology have been included Additional important notes have been threaded re emphasizing the core concepts Self assessment of the topics studied have been introduced at the end of each chapter helps revision Clinical cases are presented for problem based learning and knowledge at the end of chapters Salient Features Extensive revision of chapters as per the basis on scientific advancement and subject requirement 1140 Illustrations in the form of line diagrams flowcharts clinical photographs incorporated to enhance visual representation Applied aspects highlighted in the boxes presented with recent molecular concepts on pathophysiology advances in investigative and therapeutic principles Important notes highlight the additional valuable information wherever relevant for quick revision Online resource at www.medenact.com Complimentary access to full ebook **Competency Based Questions and Answers in Physiology** Mr. Rohit Manglik, 2024-07-24 A comprehensive question answer format covering all major physiological systems supporting effective learning and exam preparation under CBME norms **Collected Papers in Emergency Medical Services and Traumatology**, 1979 **Shock** Alan Philip Thal, 1971 *Concise Textbook of Human Physiology - E-Book* Indu Khurana, Ayushi Khurana, 2022-07-06 Fourth edition of CONCISE TB OF PHYSIOLOGY incorporates thoroughly revised and updated text The text has been organized into 11 sections and each section has been further subdivided into chapters The content has been arranged in such a way that it provides explanation complimented by numerous tables flowcharts and abundant illustrations Complete and up to date text Illustrated by more than 1000 clear line diagrams Complementated with numerous tables and flowcharts for quick comprehension Balanced amalgamation of pure and applied text Applied aspects highlighted in boxes Additional important

information has been highlighted as important notes For self assessment of the subject the questionnaire and viva voce questions are given at the end of each chapter as self assessment **Concise Textbook of Human Physiology** Indu Khurana, 2018-04-23 Thoroughly revised and updated second edition retains its well accepted unique style of organization of the text in three parts and twelve sections Presentation of the text with various levels of headings subheadings boldface and italics has been maintained to help the students easily understand retain and reproduce Text has been updated incorporating the recent advances in each section including more aspects of molecular physiology Applied physiology has been updated with recent concepts on pathophysiology and recent advances in the basic investigations and therapeutic principles To further upgrade the book many new figures tables and flowcharts have been added Online Content FAQs with reference for the answers in the book

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