

AEROSPACE MEDICINE

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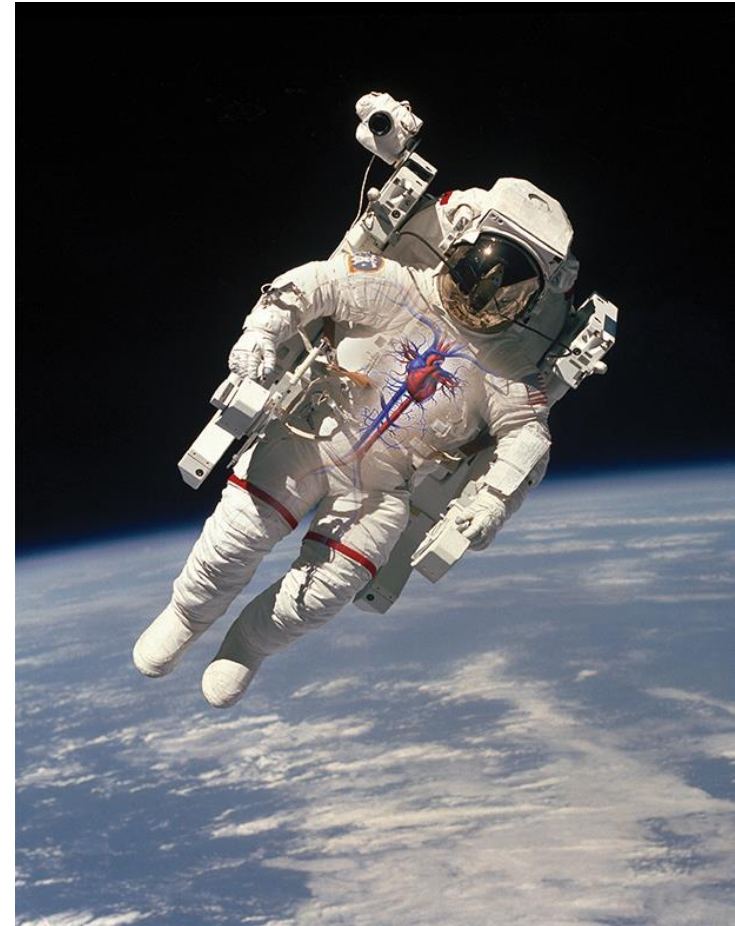
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Director, Health and Medical Systems

NASA Headquarters



Acknowledgement and Disclaimer

- **This presentation represents the views of the author and not necessarily of NASA**
- **No financial relationships to declare**

A Different Perspective

- On medical specialty
Aerospace Medicine



Where did 25 years go?

- **Texas Christian University**
- **Southwestern Medical School, Dallas**
- **Internship in General Surgery with US Air Force**
- **Duty as Squadron Flight Surgeon in United Kingdom and Germany**
- **Residency in Aerospace Medicine and Occupational Medicine**
- **Other assignments in Florida, DC, Germany, and Korea**
- **Now at NASA as a civil servant**



NASA Centers

ONE NASA

Ames Research Center



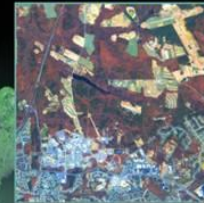
Glenn Research Center
Plum Brook Station



Glenn Research Center



Goddard Space
Flight Center



Dryden Flight
Research Center



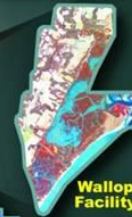
White Sands
Test Facility (JSC)



Marshall Space
Flight Center



Wallops Flight
Facility (GSFC)



Langley
Research Center



Jet Propulsion Laboratory
(NASA Contractor)



Johnson Space Center



Michoud Assembly
Facility (MSFC)



Stennis Space Center



Kennedy Space
Center



Major Center Functions

- **Ames Research Center-** IT, fundamental aeronautics, bio and space science technologies
- **Armstrong Flight Research Center-** Flight research
- **Glenn Research Center-** Aeropropulsion and communications technologies.
- **Goddard Space Flight Center-** Earth, the solar system, and Universe observations
- **Jet Propulsion Laboratory-** Robotic exploration of the Solar System
- **Johnson Space Center-** Human space exploration
- **Kennedy Space Center-** Prepare and launch missions around the Earth and beyond
- **Langley Research Center-** Aviation and space research
- **Marshall Space Flight Center-** Space transportation and propulsion technologies
- **Stennis Space Center-** Rocket propulsion testing and remote sensing technology

Occupational Health Program

- **18,000 Civil Servants and 20-40,000 Contractors**
- **All Center OH clinics are contracted out**
- **Very few civil servant medical professionals**
- **Hazardous Environments**
 - Explosive Chemicals like rocket fuel
 - Reactors
 - Largest indoor pool in the world
 - Confined Space: to include vacuum and microgravity
- **Astronaut Health Care**
 - Full spectrum while actively flying

NIOSH Affiliate

- **Recently invited to be a NIOSH affiliate**
- **Recognized for several decades of strong occupational health and health promotion activities**

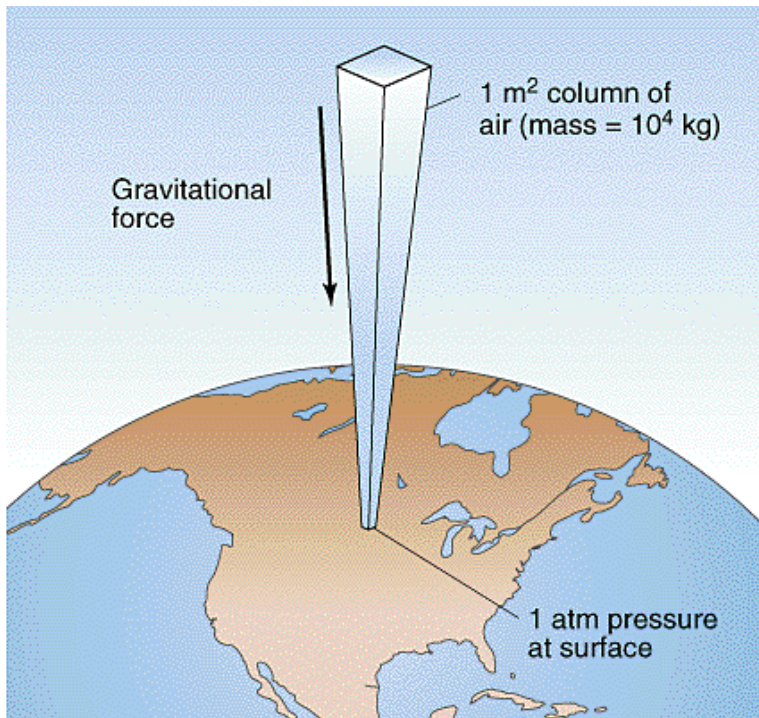
Aerospace Medicine

- **Aerospace Medicine is that specialty area of medicine concerned with the determination and maintenance of the health, safety, and performance of those who fly in the air or in space**

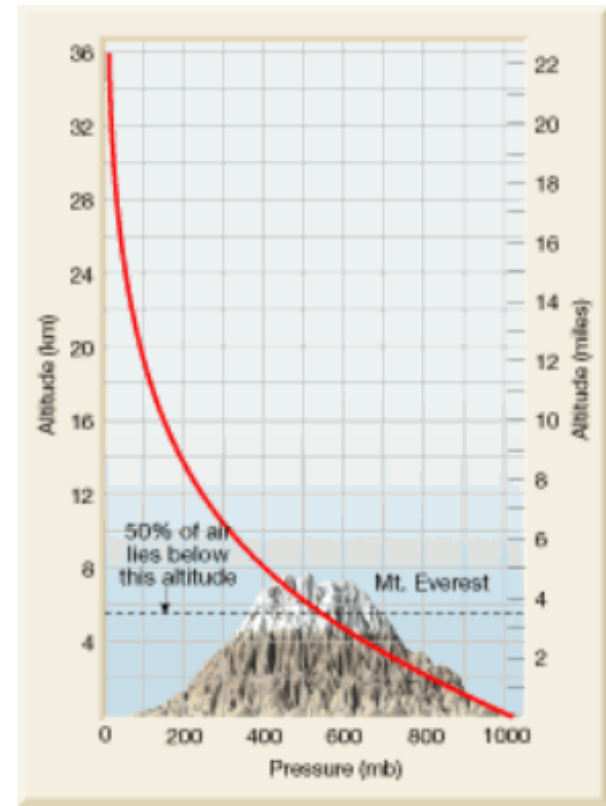


Why Aerospace Medicine

- The physiologic environment changes the moment you leave the surface of the earth



$$F_{\text{gravity}} \propto \frac{Mm}{d^2}$$



Dennis Tasa

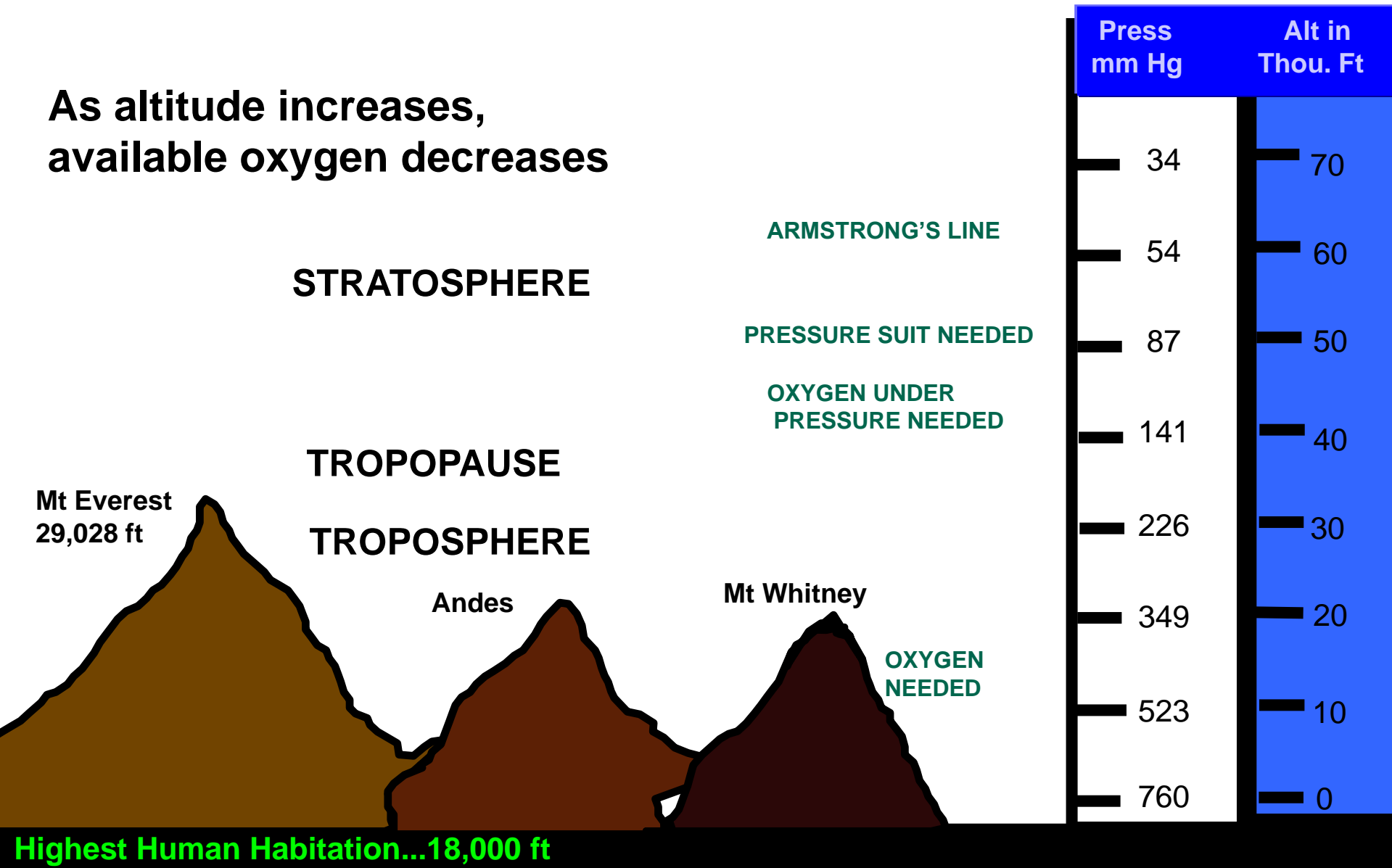
14.69 lbs/in² at Sea Level

Physiologic Effects of Air Travel

- **Hypoxia**
- **Decompression Sickness**
- **Trapped Gas**
- **Acceleration**
- **Spatial Disorientation**
- **Visual Illusions**
- **Somato-sensory Illusions**
- **Human Factors**

Environmental Requirements Oxygen

As altitude increases,
available oxygen decreases



Hypoxia

- **Subjective symptoms**

- Breathlessness, apprehension, headache, dizziness, fatigue, nausea, blurred vision, tunnel vision, numbness, tingling

- **Objective signs**

- Increased respiratory depth and rate, cyanosis, confusion, poor judgment, behavioral changes, loss of coordination, somnolence, unconsciousness

- **Effective Performance Time**

- 18000 ft – 20 to 30 minutes
- 25000 ft – 3 to 5 minutes
- 30000 ft – 1 to 2 minutes
- 35000 ft – 0.5 to 1 minute
- 40000 ft – 15 to 20 seconds
- 43000 ft – 9 to 12 seconds



Cyanosis of
the nail beds

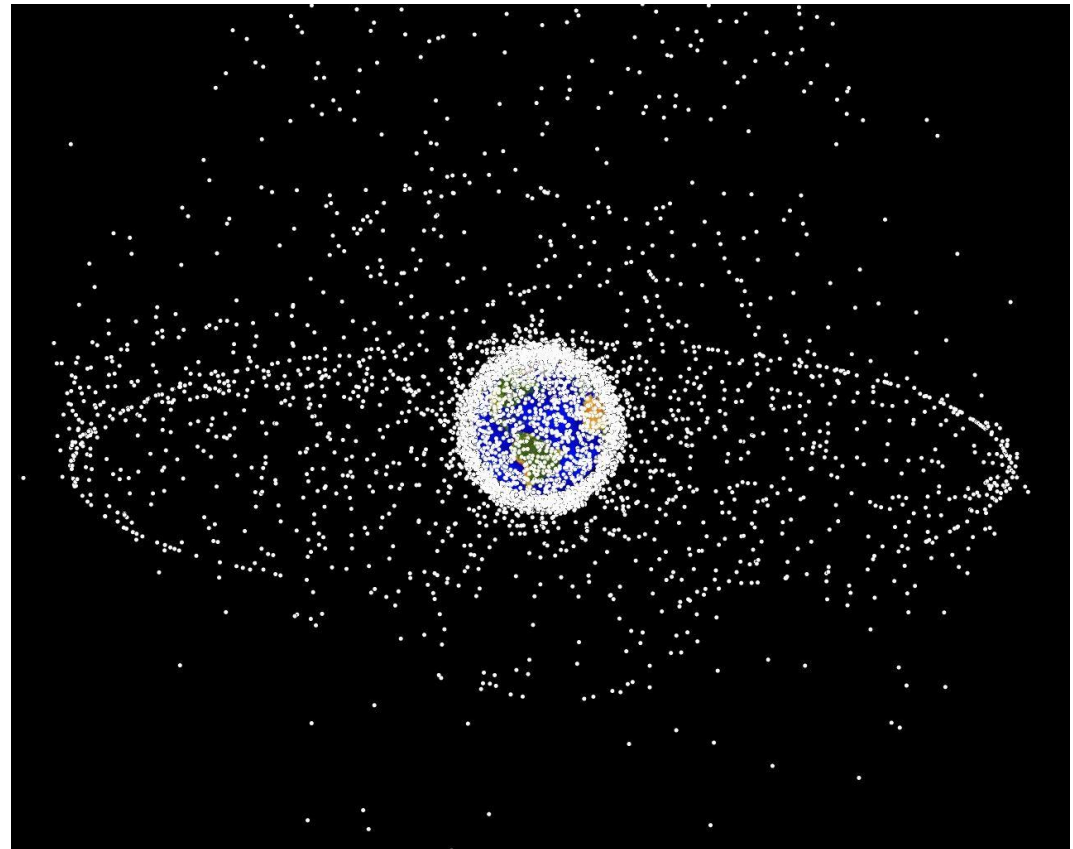
What's the big deal

- **Huge consequences, in flight**
- **There isn't always a curb to pull over too**

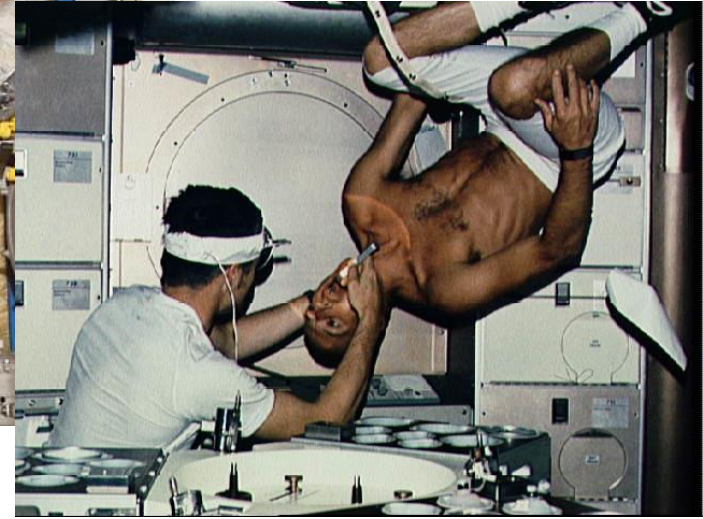


Challenges to Humans of Space Travel

- **No Air**
- **Different Gravity**
- **Really High Speeds**
- **Really Long Distances**
- **Too much Radiation**
- **Isolation**



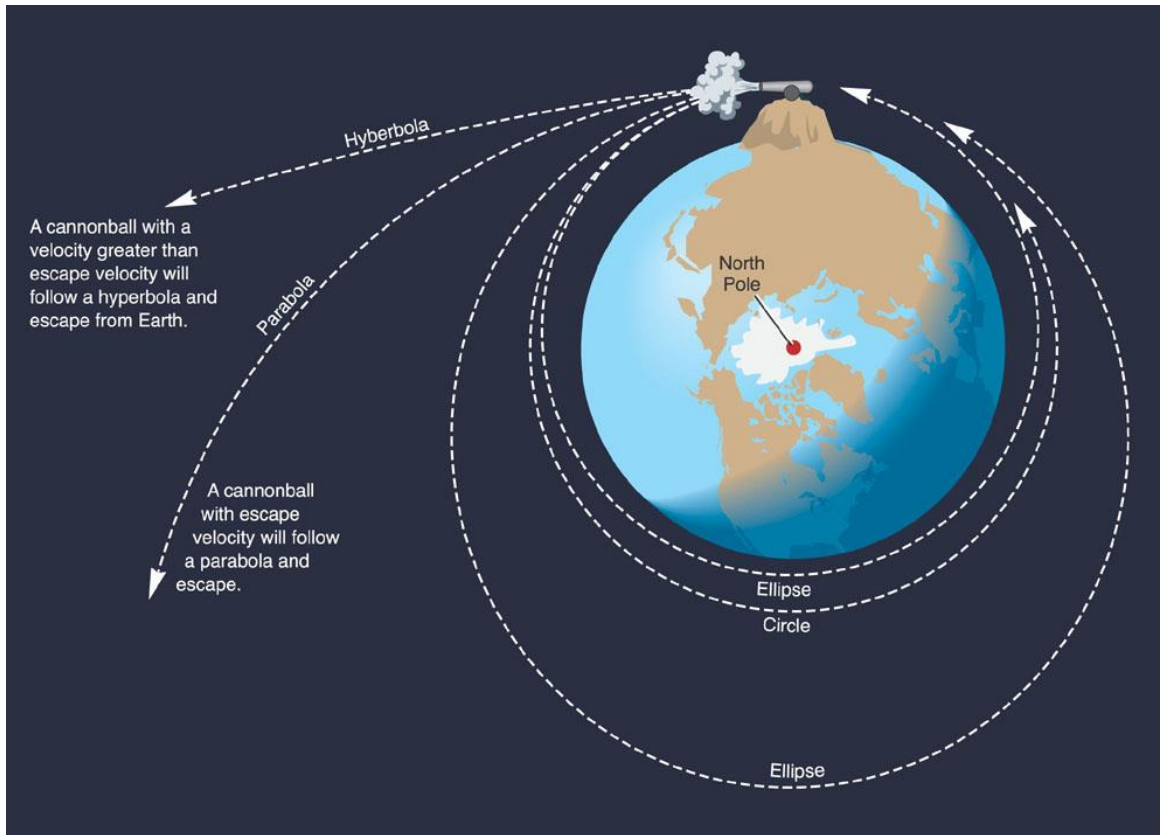
Weightlessness



High Speeds

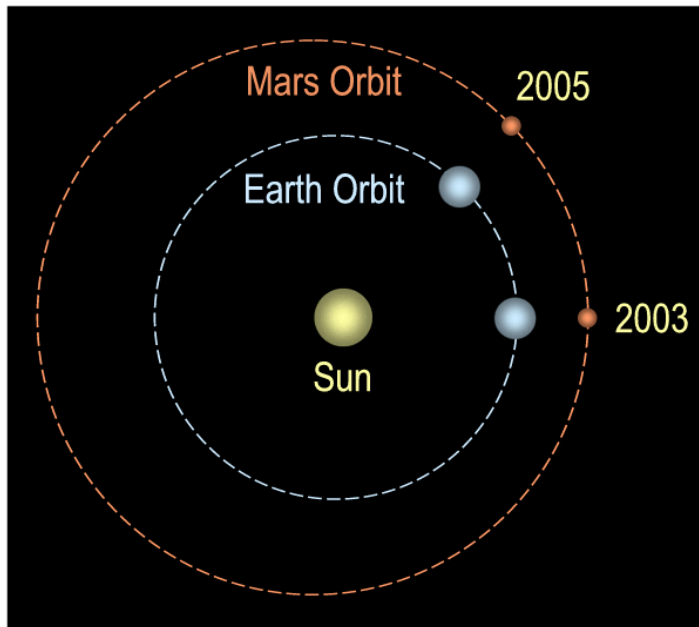
- **Orbital velocity is 17,000 miles per hour**
- **Escape velocity is 25,000 miles per hour**

**** Airliners fly at about 600 miles per hour****



Long Distances

The average distance from the Earth to the Moon is 238,854 miles

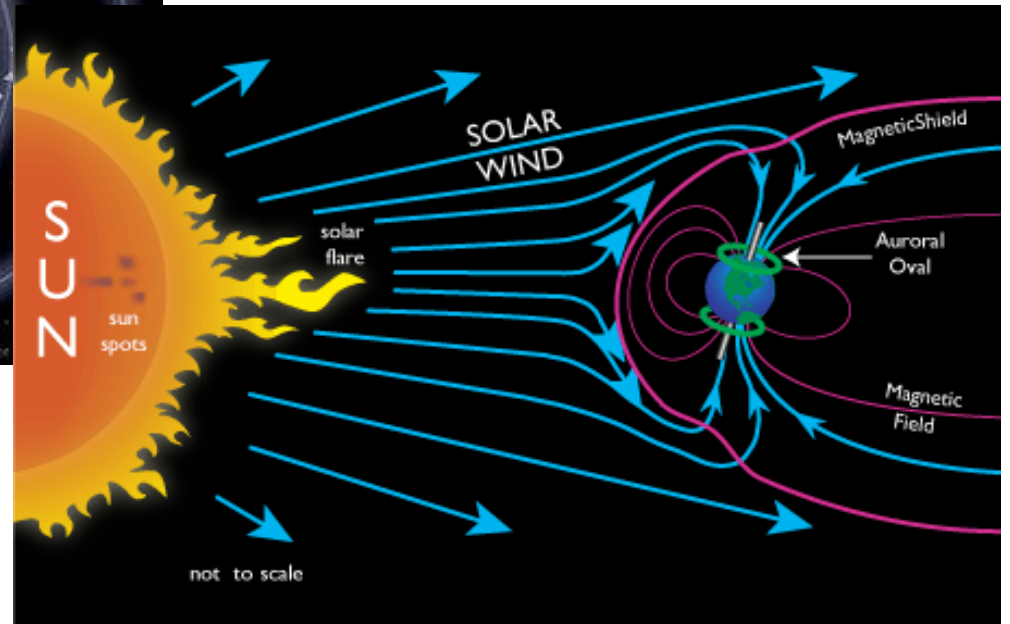
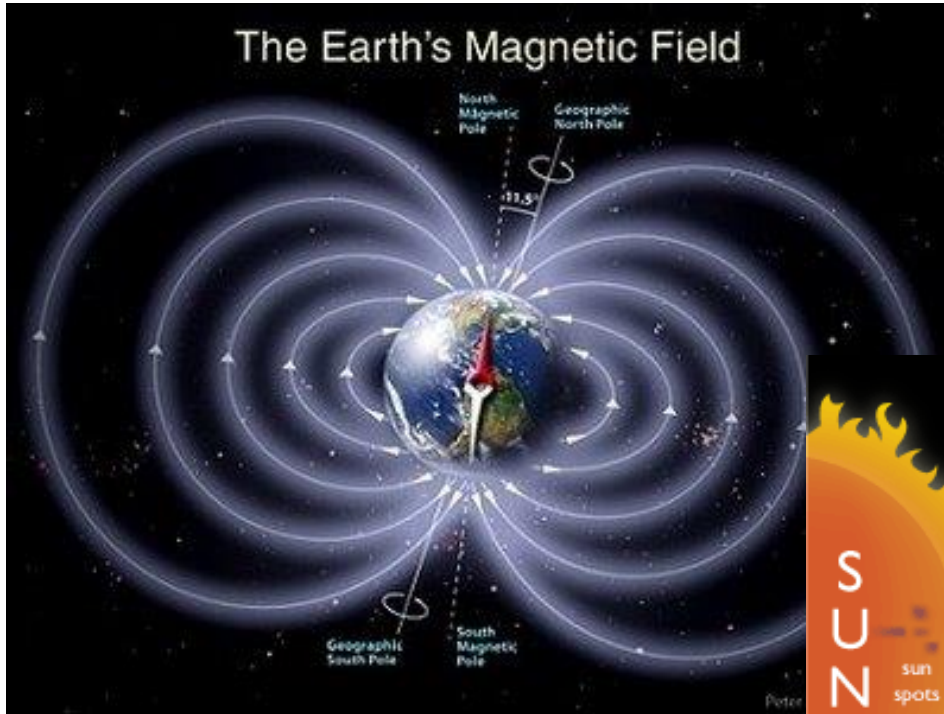


The average distance from Mars to the Earth is about 142 million miles, with a range of 56 to 401 million miles

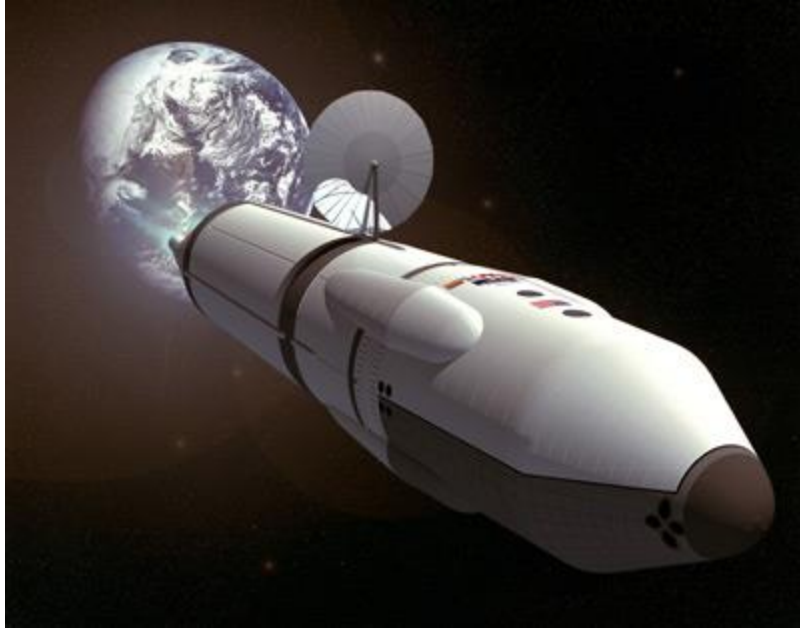


Voyager 1, 1977
119 AU

Radiation Protection



Isolation



Eating and Drinking in Space



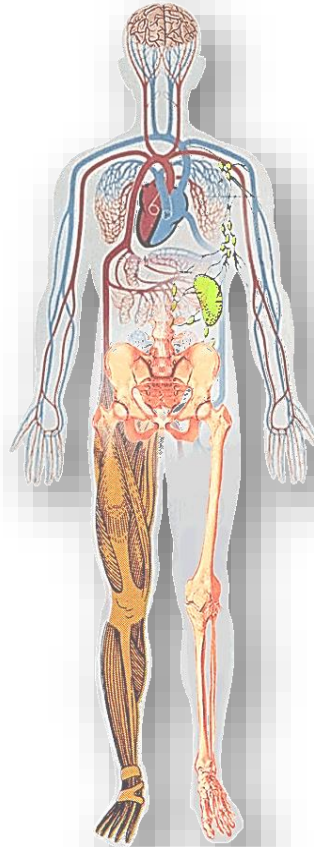
Human Spaceflight Risks Derive from Hazards

Altered Gravity - Physiological Changes

Balance Disorders
Fluid Shifts
Visual Alterations
Cardiovascular Deconditioning
Decreased Immune Function
Muscle Atrophy
Bone Loss

Space Radiation

Acute In-flight effects
Long-term Cancer Risks
CNS & Cardiovascular Risks



Distance from Earth

Drives the need for additional
“autonomous” medical care
capacity – cannot come home
for treatment

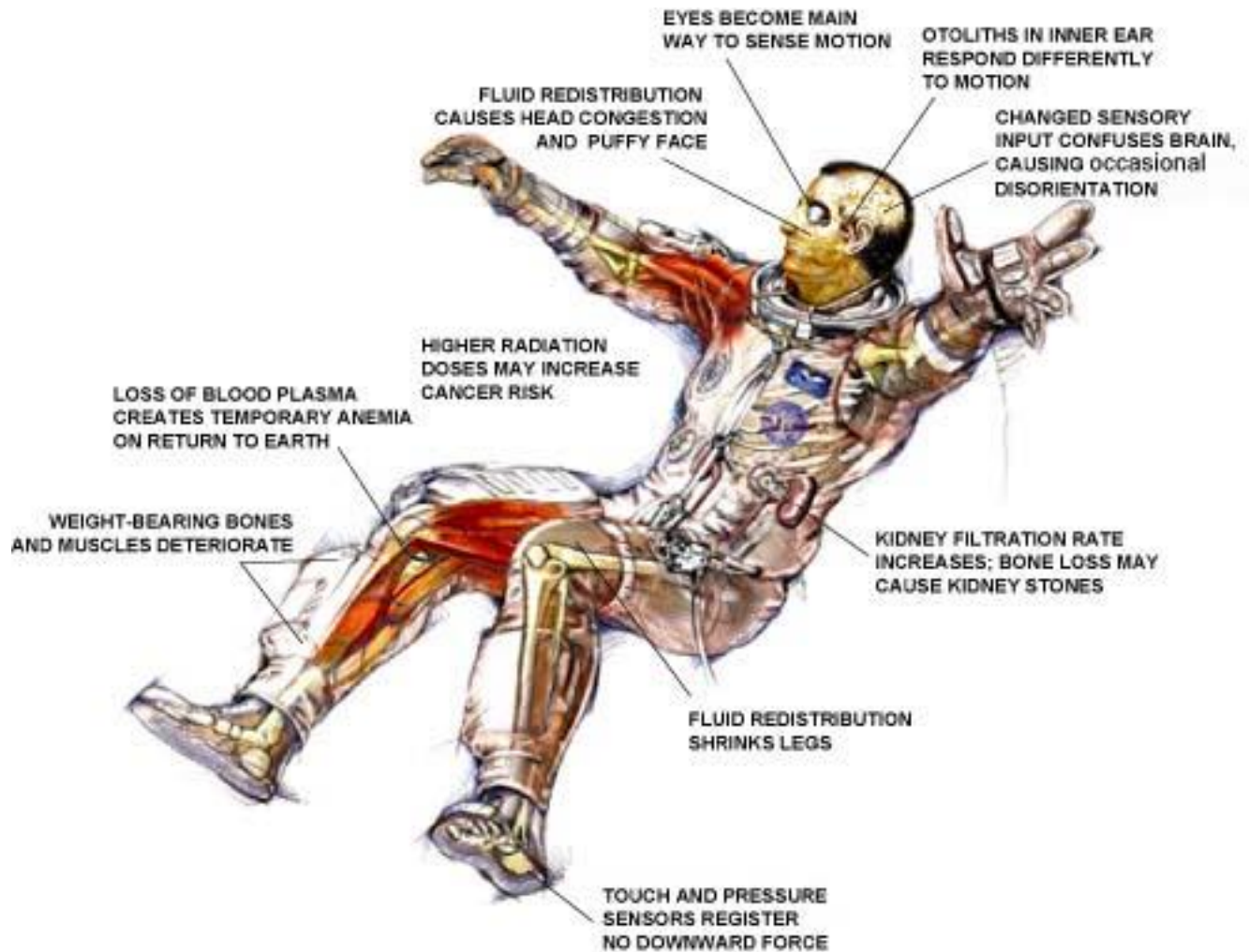
Hostile/ Closed Environment

Vehicle Design
Environmental – CO₂ Levels,
Toxic Exposures, Water, Food

Isolation & Confinement

Behavioral Aspect of Isolation
Sleep Disorders

Space Physiology



Top 3 Human Health Risks

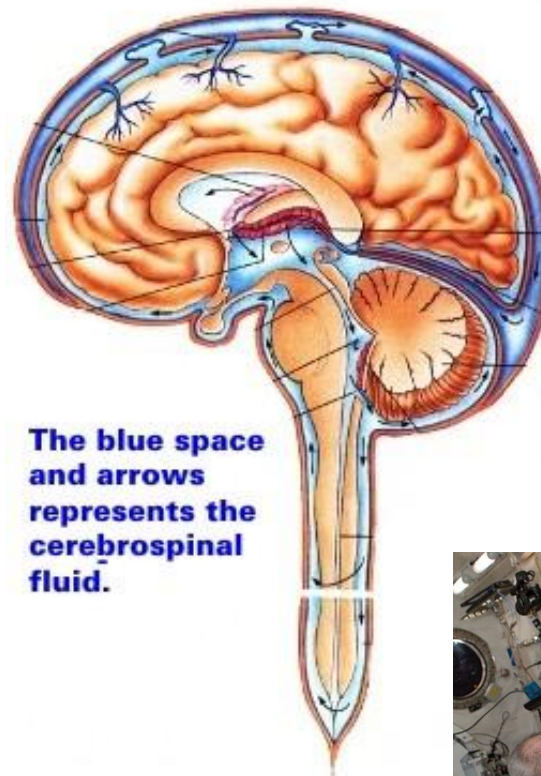
- **Visual Impairment and Increased Intracranial Pressure (VIIP)**
- **Bone Loss**
- **Radiation Exposure**



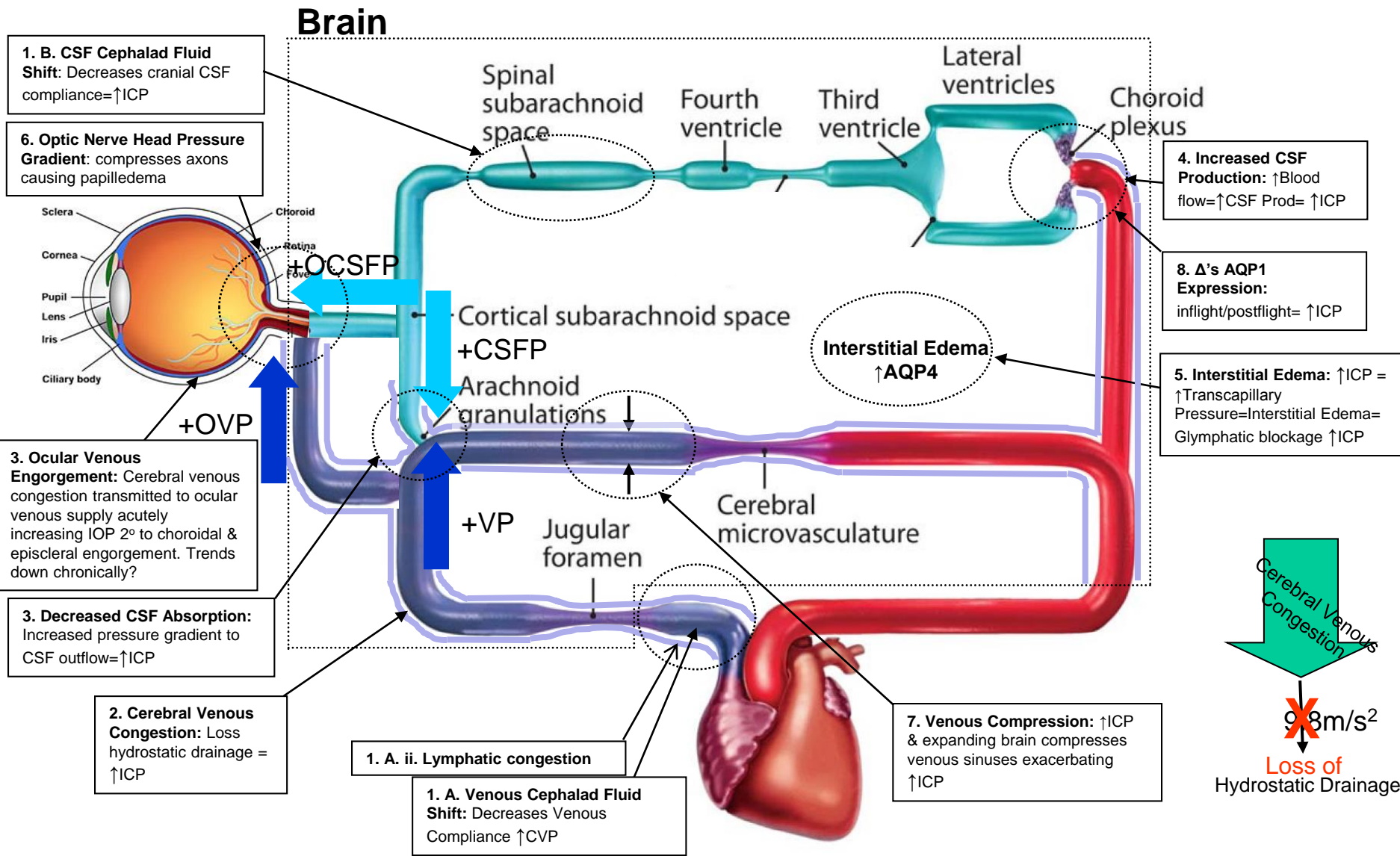
Risk vs Cost of Mitigation

Intracranial Pressure (ICP)

- This risk was “recently” found
 - First case noted in 2008
- Visual degradation and increased cerebral spinal fluid pressure found after “long duration” space flight
- Symptoms include visual disturbances after long duration space flight
- Postulated causes: microgravity fluid shift or physiologic response to increased CO₂ levels
- New assessments and research initiated



VIIP Pathophysiological Hypotheses: Vascular, CNS & Ocular



C. Otto, M.D., Lead Scientist, NASA VIIP Risk.

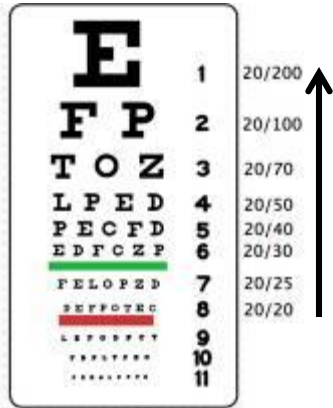
Image adapted from Rekate *Cerebrospinal Fluid Research* 2008 5:2

Clinical Findings

After long-duration spaceflight astronauts had findings consisting of:

•Hyperopic Shifts

-Up to +1.75 diopters

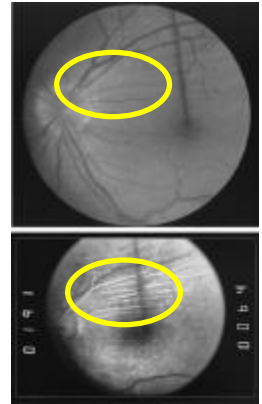


•High Intracranial Pressure

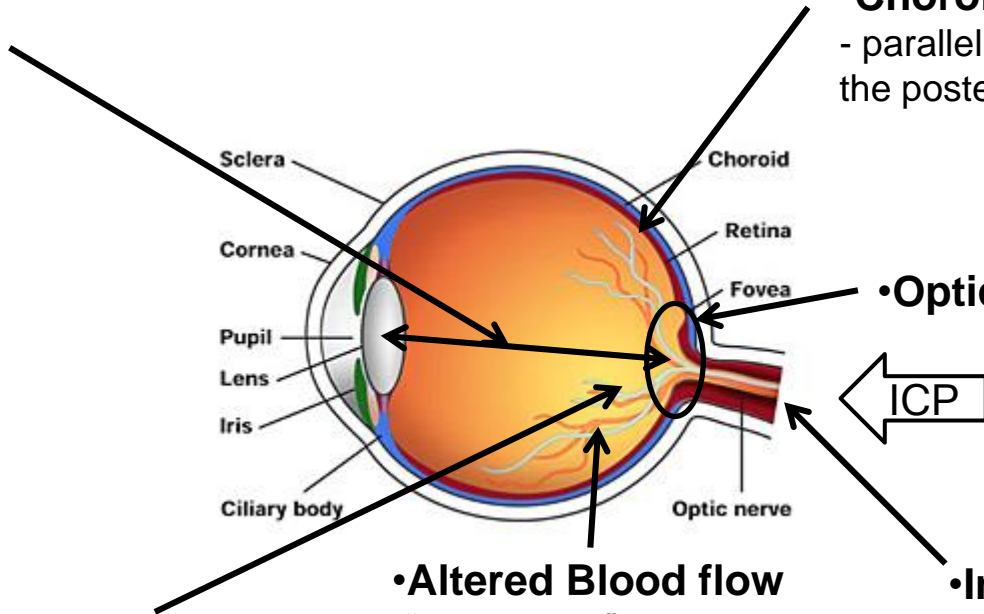
-Up to 28.5 mmHg

•Choroidal Folds

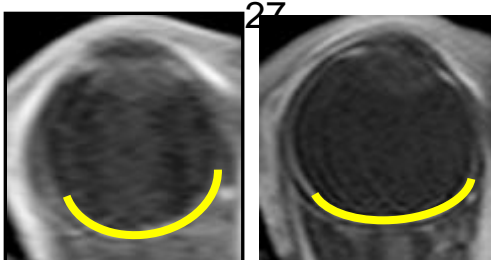
- parallel grooves in the posterior pole



•Optic Disc Edema (swelling)



•Globe Flattening



Normal Globe Flatten Globe

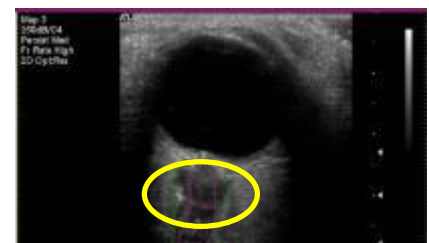
MRI Orbital Image showing globe flattening

•Altered Blood flow •“cotton wool” spots



[Small, illegible text block]

•Increased Optic Nerve Sheath Diameter

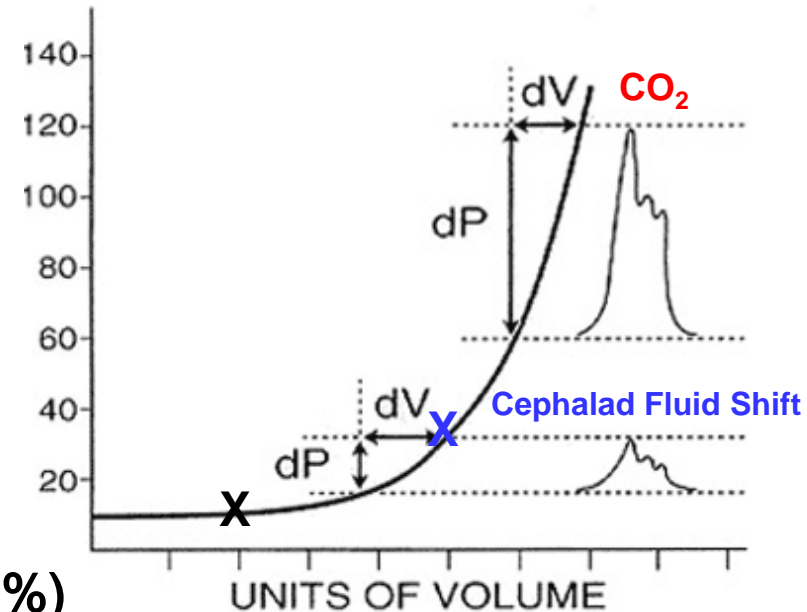


CO₂ Levels on ISS

- CO₂ is an extremely potent vasodilator
 - Every 1mmHg increase PaCO₂=4% increase in dilation
 - Cerebral blood vessels are already congested

Pressure

Adapted from Alperin et al. Radiology, 2000



- CO₂ mission average=3.56mmHg (0.33%)
 - 10x normal sea level atmospheric: 0.0314%
 - Average Peak CO₂=8.32mmHg (0.7%) (20x)
- *CO₂ also causes increased CSF production*

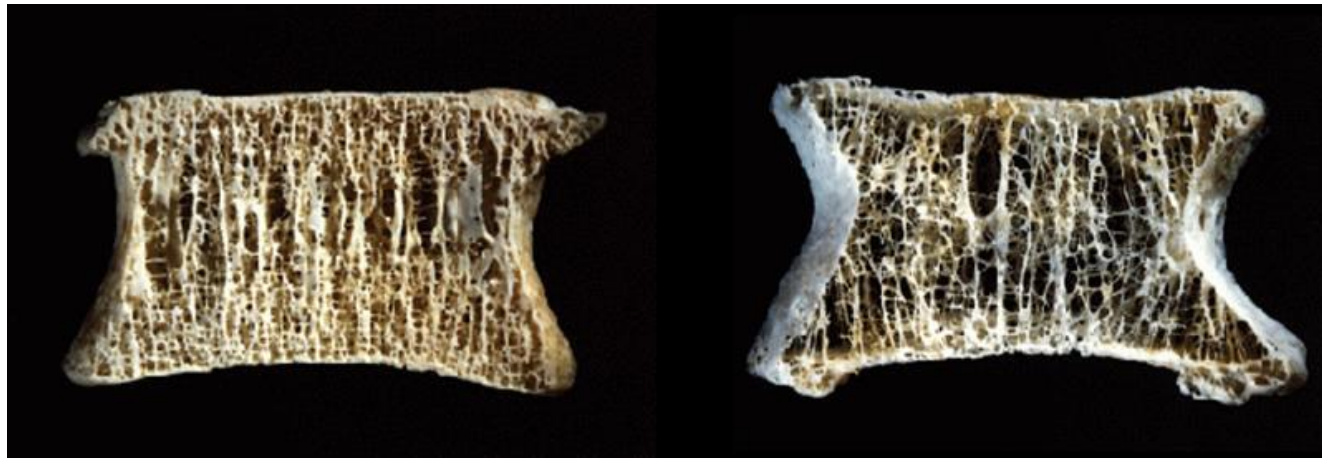
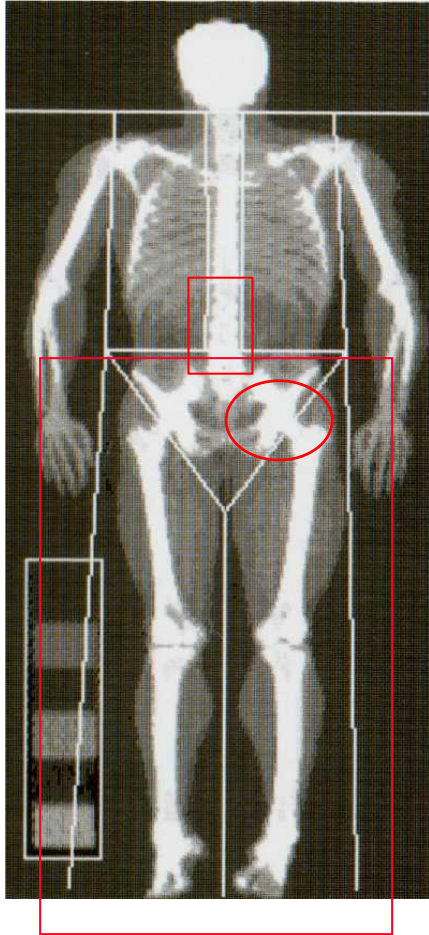
Bone Loss

- Given some parameters of skeletal adaptation may not be reversible after return to earth, there is the possibility that an early onset of osteoporosis may occur.

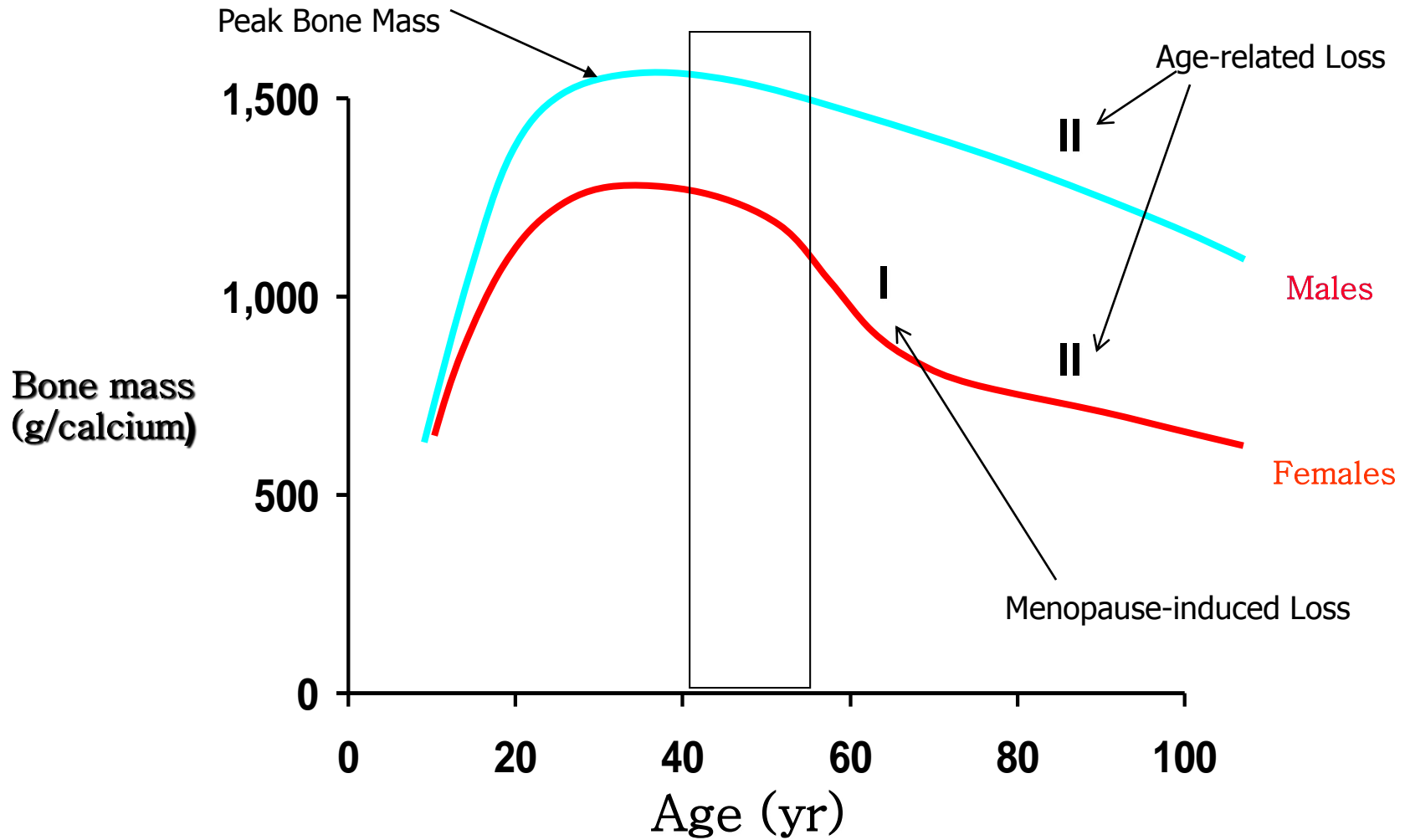


Bone Loss

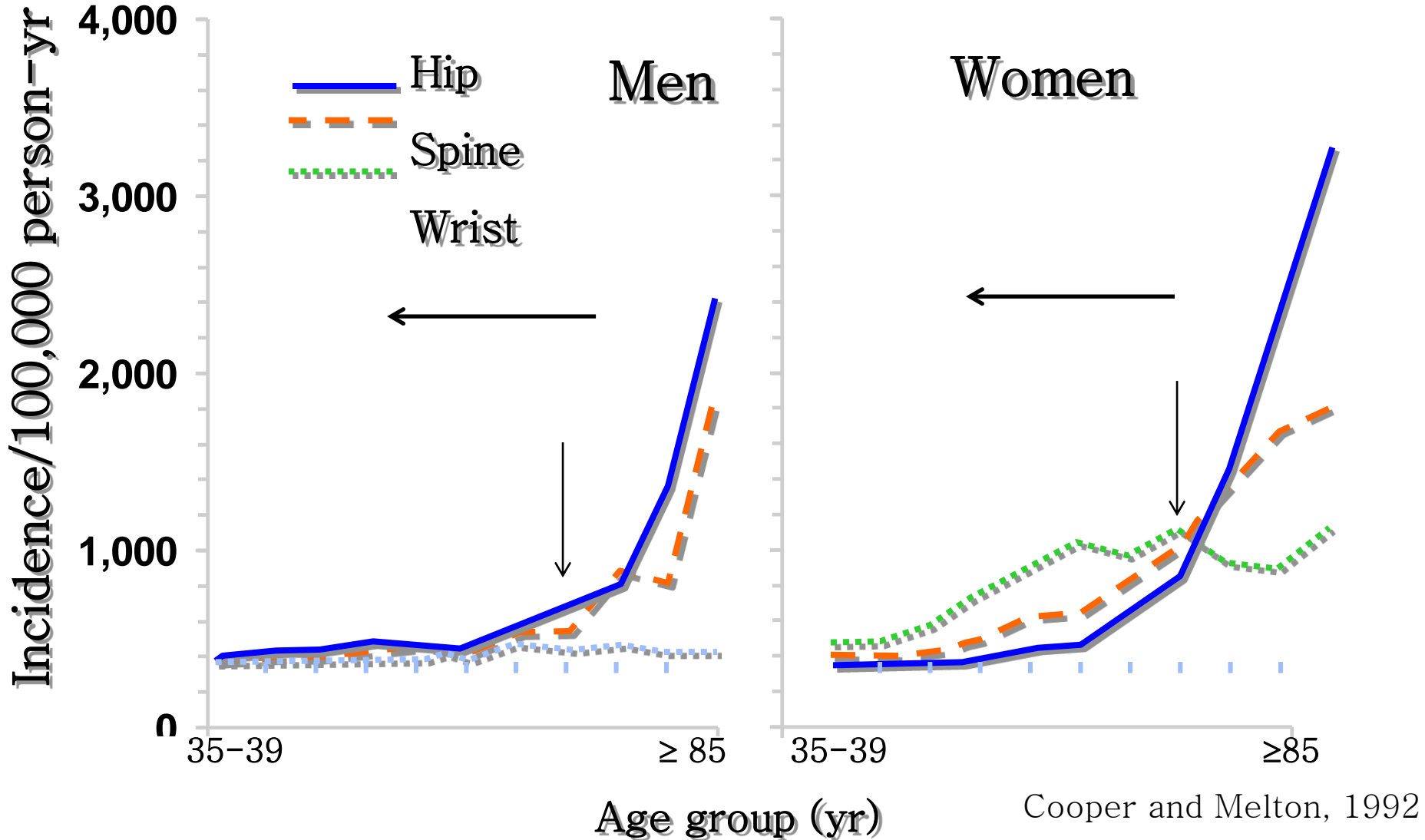
- Loss of horizontal trabecular struts



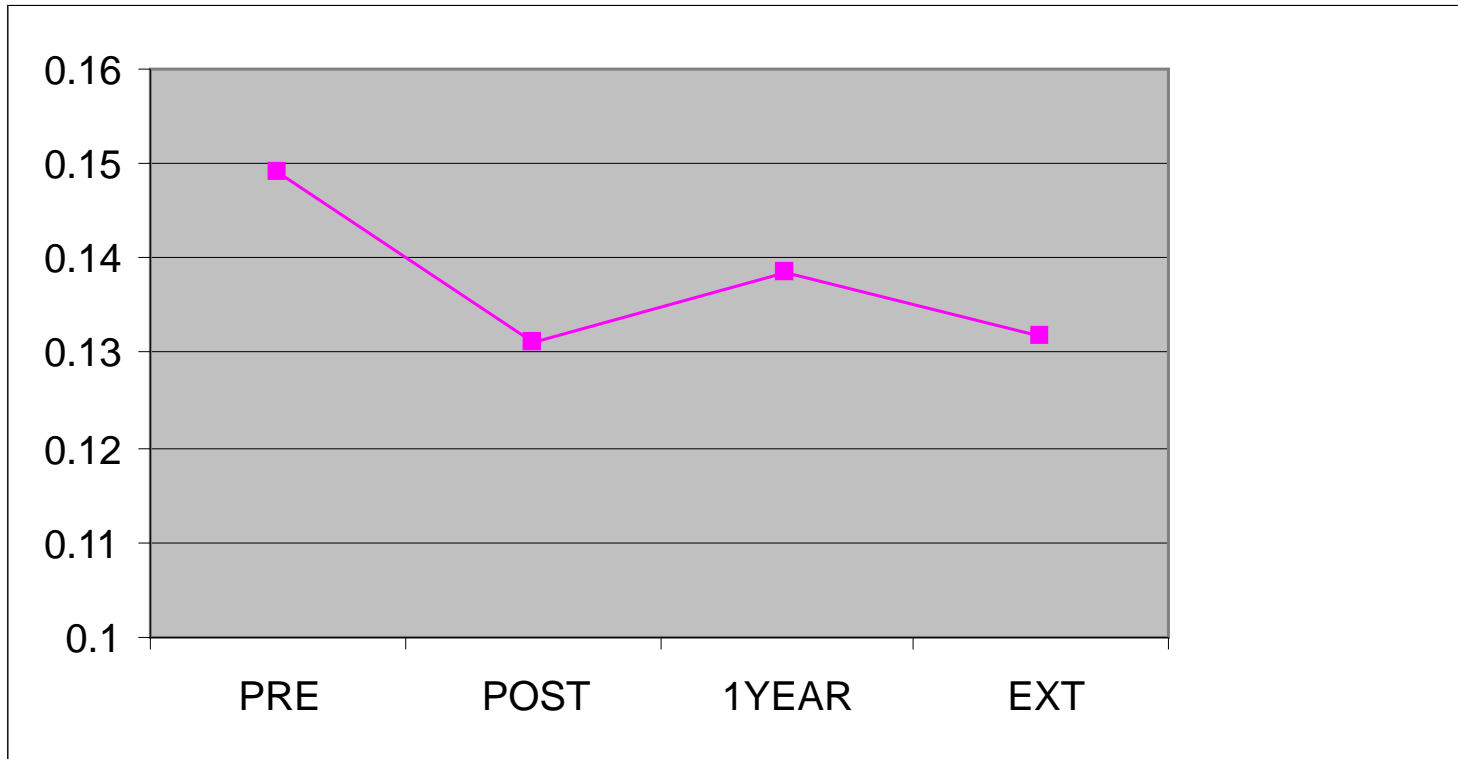
Risk/Concern Description



Age-Related Fractures



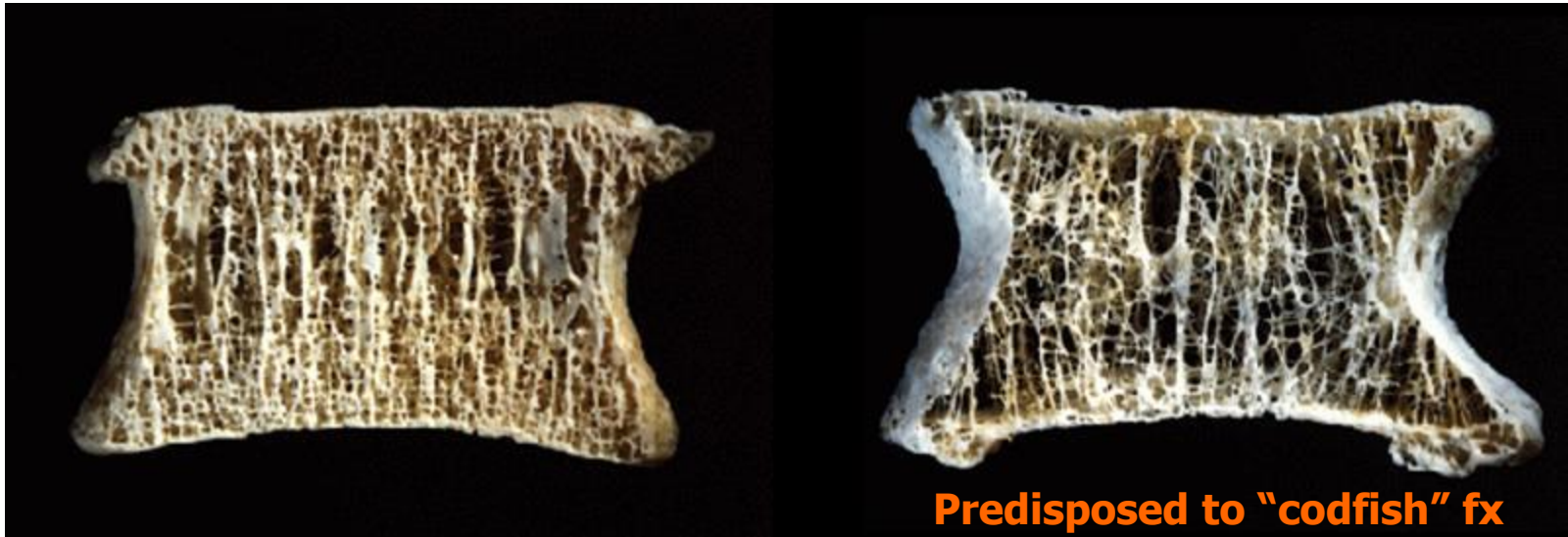
QCT: Trabecular BMD at hip does not appear to show a recovery 2-4 years postflight.



PRE: n= 16 POST: n= 16 1 YEAR: n=16 EXT: n=8

QCT Extension Study (n=8) Postflight Trabecular BMD in hip. Carpenter, D et al. Acta Astronautica, 2010.

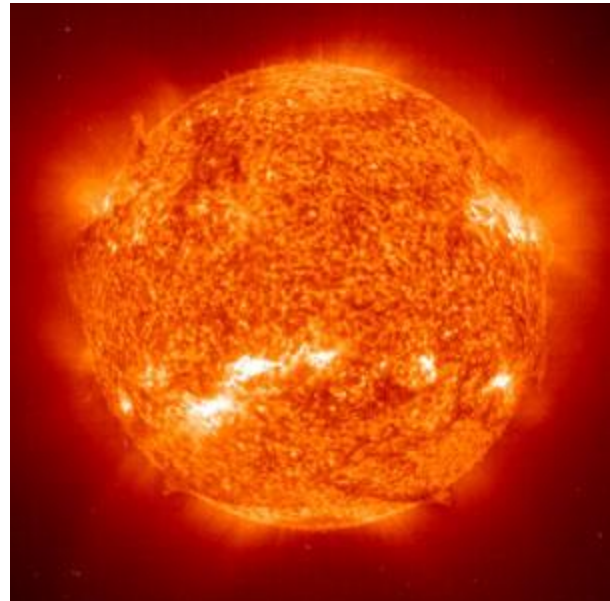
What is the impact of Trabecular Bone Loss on whole hip bone strength?



- Impact on hip, on its microarchitecture UNKNOWN*
- Knowledge base: Vertebral trabecular bone loss with menopause.
- Loss of horizontal trabecular struts and directionality , perforation of trabeculae* , reduction in mechanical strength, and increase in fracture risk (Mosekilde, 2000; Seeman, 2002, Silva 1997; Kleerekoper 1985)

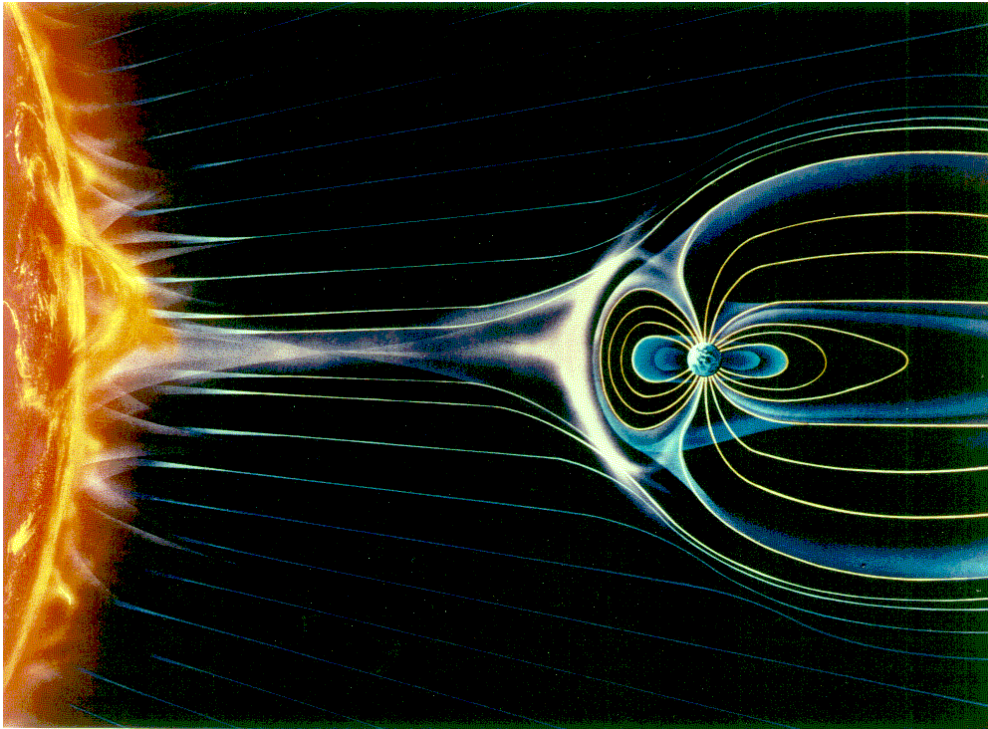
Radiation Risk

- **Risk Statement**
 - **Given that crewmembers are exposed to radiation from the space environment, there is a possibility for increased cancer morbidity or mortality**



Radiation

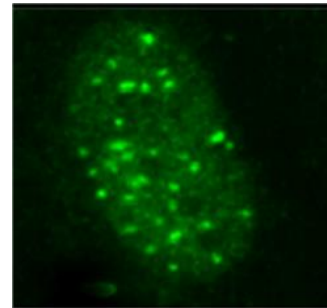
- **Space radiation is a major challenge to exploration:**
 - Risks are high...potentially limiting mission length or crew selection
 - Large mission cost and uncertainties to protect against risks
 - New findings may change current assumptions



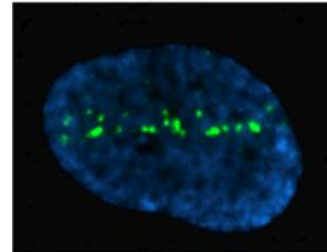
Categories of Radiation Risk

- **Cancer**
- **Acute and Late Central Nervous System (CNS) risks**
 - ✓ Immediate or late functional changes
- **Chronic & Degenerative Tissue Risks**
 - ✓ Cataracts, heart-disease, etc.
- **Acute Radiation Sickness**
 - ✓ Prodromal risks

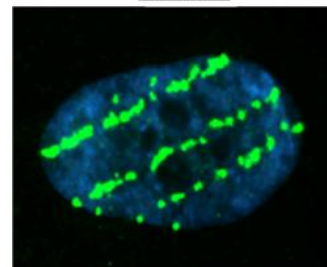
Differences in biological damage of heavy nuclei in space with x-rays, limits Earth-based data on health effects of heavy ions



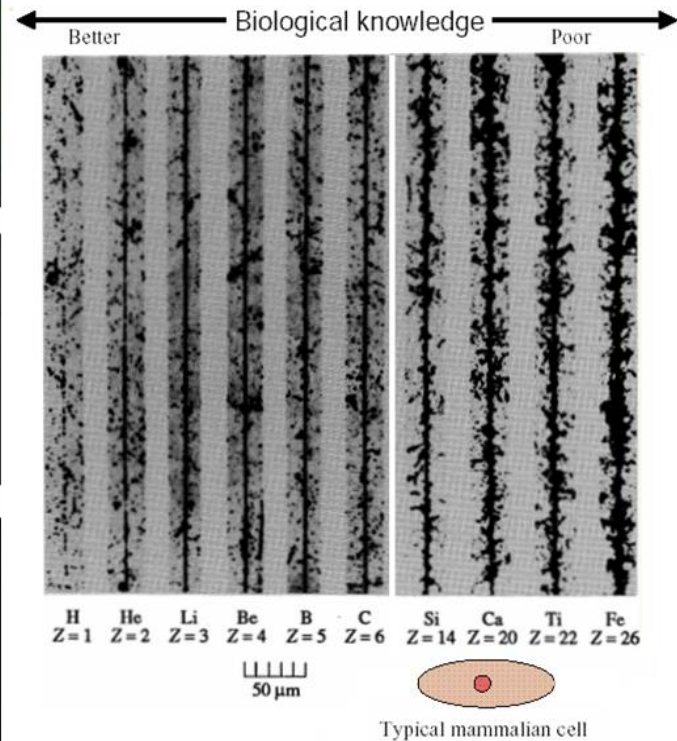
γ - rays



silicon

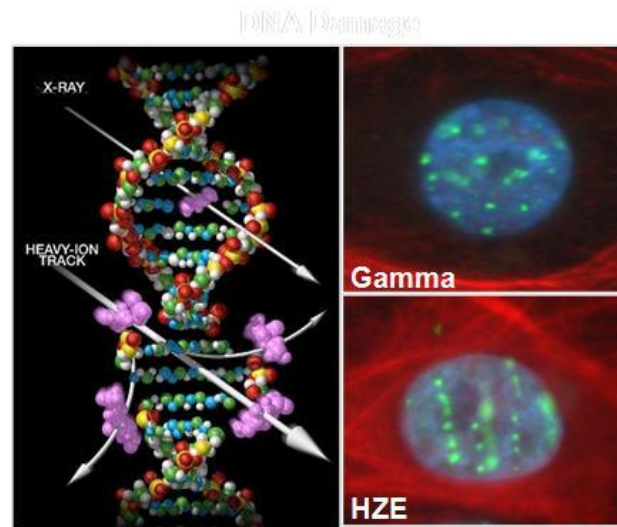


iron



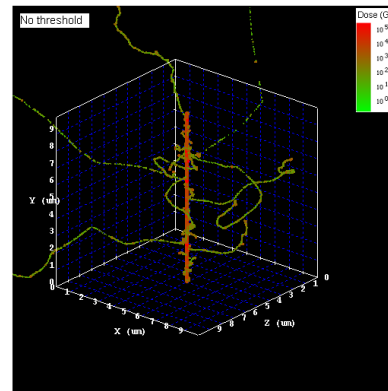
The Space Radiation Problem

- Interplanetary crews will be exposed to a high LET radiation environment comprised of high-energy protons and heavy ions (HZE's) as well as secondary protons, neutrons, and fragments produced in shielding and tissue
- Heavy ions are qualitatively different from X-rays or Gamma-rays: High LET vs. low LET
 - Densely ionizing along particle track
 - Cause unique damage to biomolecules, cells, and tissues
 - Distinct patterns of DNA damage (mutation spectra, chromosome aberrations) and distinct profiles of oxidative damage
- No human data exist to estimate risk from heavy ions found in space
 - Animal and cellular models with simulated space radiation must be applied or developed
- Synergistic modifiers of risk from other spaceflight factors



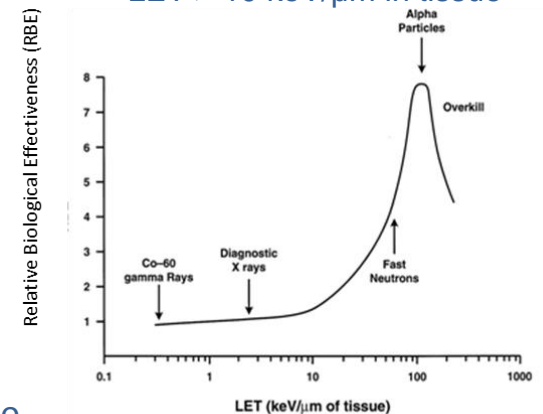
DNA Damage
 γ H2AX foci in EPC2-hTERT cells.
 (Patel and Huff)

1 GeV/u ^{56}Fe nucleus
 LET ~ 150 keV/ μm



Qualitative differences due to track "core" and correlated tissue damage along a particle path.
 (Plante, 2011)

High LET defined as
 LET > 10 keV/ μm in tissue



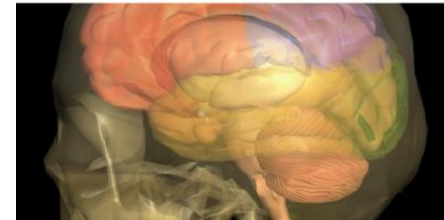
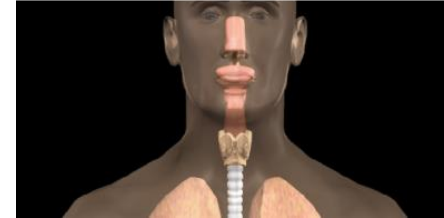
Space Radiation Risks

Risk of Radiation Carcinogenesis

- Morbidity and mortality risks

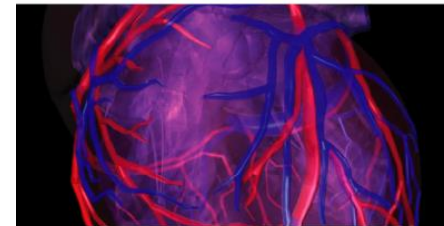
Risk of Acute (in flight) & Late Central Nervous System Effects

- Possible in-flight risks: altered cognitive function including short-term memory, reduced motor function, and behavioral changes which may affect performance and human health
- Possible late (post-mission) risks: neurological disorders such as Alzheimer's disease (AD), dementia, cerebrovascular disease or premature aging



Risk of Cardiovascular Disease and other Degenerative Tissue Effects

- Degenerative changes in the heart, vasculature, and lens
- Diseases related to aging, including digestive, respiratory disease, premature senescence, endocrine, and immune system dysfunction



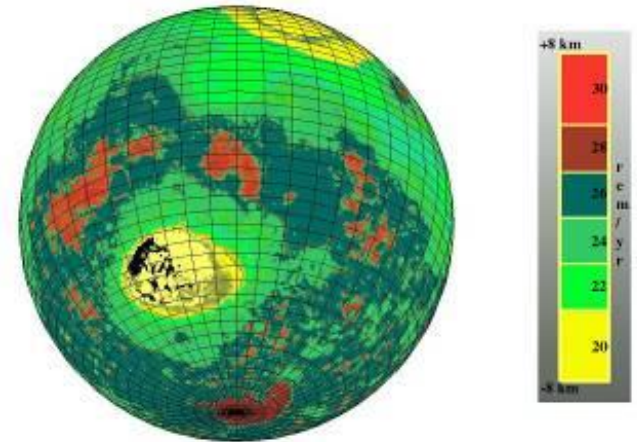
Risk of Acute Radiation Syndromes due to Solar Particle Events

- Prodromal effects (nausea, vomiting, anorexia, and fatigue), skin injury, and depletion of the blood-forming organs



Why space radiation research?

- Astronauts on the International Space Station approach limits for acceptable radiation risks after 1 to 3 missions
- Acceptable levels of risk can be approached or exceeded for Lunar habitat missions after 4-7 months
- Acceptable levels of radiation risk are exceeded for all current Mars Mission Designs



GCR doses on Mars

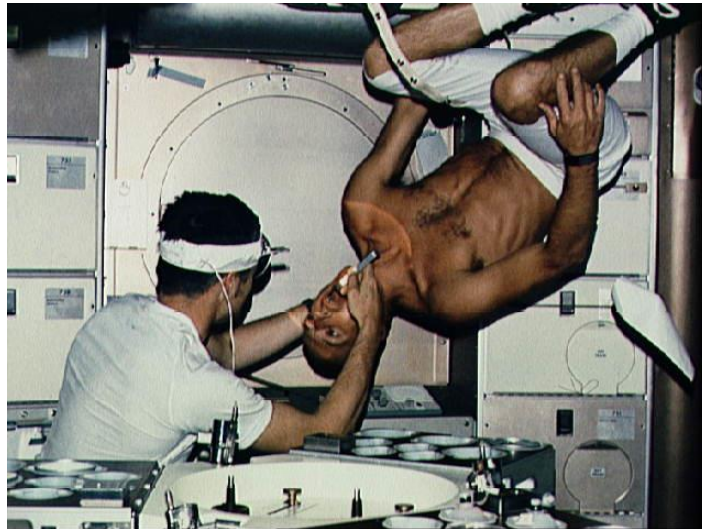
Doctors versus Engineers

- **Are humans the reason for the space program, or an inconvenience to the program?**



Human Systems Integration: The Health Care Professional's Perspective

- **Language Gap**
- **The importance of Human Systems Integration is a lesson that gets relearned over and over again**
- **Health professionals and engineers speak different technical languages**
- **Consistent HSI success occurs when health professionals understand and correctly communicate with engineers using “requirements”**



Human Factors

- **Results:**
 - **Tough lessons relearned**
 - **Frequently noted in mishap reports**
 - **Human factors being considered after the hardware was developed**
 - **Past aircraft and today's spacecraft have similar HSI shortcomings**



Conclusion

- **HSI is prevention**
- **Early HSI consideration saves**
- **Human health risks may be mission limiting, given current technology**

- **Solutions for the risks of long duration space flight**
- **We just need to solve the “big three”**
 - **Non-chemical based propulsion**
 - **Control gravity**
 - **Active Shielding for radiation**

Space Technologies

- **Wireless Devices**
 - Hospital Telemetry Systems
- **Infrared Thermometers**
- **Cordless Tools**
- **Dehydrated food...and ice cream too.**

- **Space program has inspired thousands students to go into Math and Engineering**

Questions

