



Sequoia D. Ernst^{a,b}, Thomas G. Bissen^{a,b}, Christin Domeier^{a,b}, Joseph D. Vondrasek^{a,b}, Pannonica Silvestri^{a,b}, Joseph C. Watso^{a,b} ^aCardiovascular and Applied Physiology Laboratory, Florida State University; ^bInstitute of Sports Sciences and Medicine, Florida State University

INTRODUCTION

- A high body mass index (BMI) is linked with exaggerated cardiovascular responses during exercise among adults¹.
- Hyperpnea (i.e., increased minute ventilation) is associated with increases in heart rate and blood pressure². The greater ventilation-related cardiovascular responses may contribute to augmented cardiovascular responses during exercise.
- However, the association between BMI and cardiovascular responses during hyperpnea independent of exercise is unclear.

PURPOSE & HYPOTHESIS

We tested the hypothesis that a higher BMI correlates with greater cardiovascular responses during experimental hyperpnea without concurrent exercise.

EXPERIMENTAL DESIGN

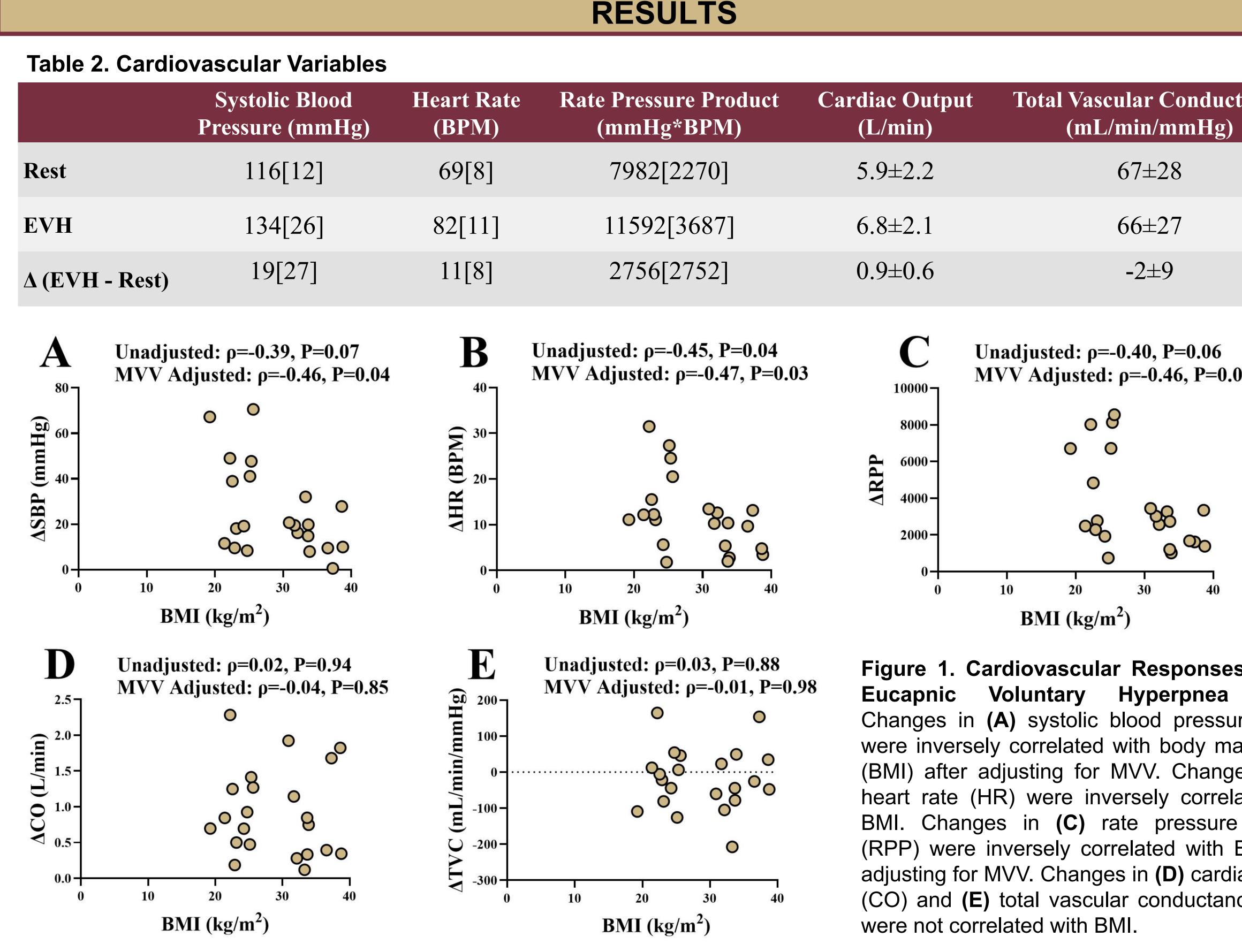
- •We measured heart rate (electrocardiogram), beat-to-beat hemodynamics (photoplethysmography), and ventilation (spirometry) during a 5-minute rest period and an 8-minute eucapnic (4 or 5% inspired CO_2) voluntary hyperpnea (EVH) test at 60 L per min at 20 breaths per min among adults free from overt disease.
- We calculated the rate pressure product (systolic blood pressure * heart rate) as an index of myocardial oxygen demand (i.e., heart stress). We report data as mean±SD for normally distributed data or median[IQR] for non-normal data determined by Shapiro-Wilk tests.
- We correlated cardiovascular responses (final 30 seconds of EVH minus rest) with BMI using Spearman's rank (p) correlations before and after adjusting for maximal voluntary ventilation (MVV; 10-15 seconds on room air).

Table 1. Participant Characteristics

Table 1. Participant Characteristics		
	Mean±SD or Median[IQR]	
Biological Sex	10 Female/12 Male	
Race	14% Asian, 5% Black, 81% White	
Ethnicity	36% Hispanic/Latinx	
Age (years)	24[6]	
Body Mass Index (kg/m ²)	29.0±6.2	
Resting Systolic Blood Pressure (mmHg)	115±15	
Resting Diastolic Blood Pressure (mmHg)	73±15	
Maximal Voluntary Ventilation (L/min)	140±27	
AFFILIATION & FUNDING SOURCES		
Fellowship CAP K01HL1607	tate University Graduate School Legacy (CD), National Institutes of Health 772 (JCW), and American Heart Association 7938 (JCW).	

Association Between Body Mass Index and Cardiovascular Responses During Eucapnic Voluntary Hyperpnea Among Young Adults

Table 2	. Cardiovasc
	Sy
	Pres
Rest	



Contrary to our hypothesis, these data suggest that a higher BMI is associated with attenuated blood pressure and heart rate responses during experimental hyperpnea among young adults with and without obesity free from overt disease.

1. Itagi ABH, Jayalakshmi MK, Yunus GY. Effect of obesity on cardiovascular responses to submaximal treadmill exercise in adult males. J Family Med Prim Care. 2020 Sep 30;9(9):4673-4679. doi: 10.4103/jfmpc.jfmpc_543_20. PMID: 33209782; PMCID: PMC7652132. 2. Shimizu K, Shiozawa K, Ishida K, et al. Age and sex differences in blood pressure responses during hyperpnea. Experimental Physiology 2021.

CONCLUSIONS

REFERENCES



ic Output /min)	t Total Vascular Conductance (mL/min/mmHg)
9±2.2	67±28
8±2.1	66±27
9±0.6	-2±9
C 10000- 8000- 6000-	Unadjusted: ρ=-0.40, P=0.06 MVV Adjusted: ρ=-0.46, P=0.04

Figure 1. Cardiovascular Responses During (EVH). Changes in (A) systolic blood pressure (SBP) were inversely correlated with body mass index (BMI) after adjusting for MVV. Changes in (B) heart rate (HR) were inversely correlated with BMI. Changes in (C) rate pressure product (RPP) were inversely correlated with BMI after adjusting for MVV. Changes in (D) cardiac output (CO) and (E) total vascular conductance (TVC)