

# HYPOXIC CHALLENGE ACTIVATES HUMAN SYMPATHETIC BRAINSTEM AND HYPOTHALAMIC SITES

Darius A. Gerlach<sup>1</sup>, Jorge Manuel<sup>2</sup>, Alex Hoff<sup>1</sup>, Hendrik Kronsbein<sup>1,3</sup>, Fabian Hoffmann<sup>1</sup>, Karsten Heusser<sup>1</sup>, Heimo Ehmke<sup>3</sup>, Jens Jordan<sup>4</sup>, Florian Beissner<sup>2</sup>, Jens Tank<sup>1</sup>

<sup>1</sup>Division of Cardiovascular Aerospace Medicine, Institute of Aerospace Medicine, German Aerospace Center (DLR), Cologne, Germany, <sup>2</sup>Hannover Medical School, Somatosensory and Autonomic Therapy Research, Institute for Neuroradiology, Hannover, Germany, <sup>3</sup>Institute of Cellular and Integrative Physiology, University Medical Center Hamburg-Eppendorf, Hamburg, Germany, <sup>4</sup>Institute of Aerospace Medicine, German Aerospace Center (DLR) and Chair of Aerospace Medicine, Cologne, Germany

**BACKGROUND:** Peripheral carotid chemoreceptors, which raise sympathetic activation at the brainstem level, may be altered through atmospheric condition and is further affected by weightlessness-induced neural plasticity. However, human peripheral chemoreflex regulation in the brainstem is poorly understood due to the lack of suitable methodologies. Therefore, we combined measurements of beat-by-beat blood pressure and SpO<sub>2</sub>, and high-resolution functional magnetic resonance imaging (fMRI) to elucidate human brainstem circuits engaged through hypoxic peripheral chemoreceptor activation.

**METHOD AND MATERIAL:** We submitted 12 healthy men (29.7 ±6.6 years; 24.0 ±1.86 kg/m<sup>2</sup>) to five hypoxic episodes by breathing 10% oxygen for 180 seconds followed by 90 seconds normoxia during multiband fMRI brain acquisitions. We monitored continuous finger arterial blood pressure using customized hardware, ECG, and SpO<sub>2</sub>. Brainstem and hypothalamus fMRI images were analyzed to identify nuclei involved in peripheral chemoreflex processing. Systolic blood pressure (SBP) and SpO<sub>2</sub> time courses were correlated with the blood-oxygen-level-dependent signals with a general linear model.

**RESULTS:** With hypoxia, SpO<sub>2</sub> decreased by 12.32 ±3.68% (p < 0.01), heart rate increased 13.86 ±3.47 (p < 0.01), and SBP decreased with hypoxia 5.45 ±5.5 mmHg (p < 0.01). In the brainstem, the nucleus tractus solitarius (t-values: SpO<sub>2</sub>: 5.9; SBP: 4.79), the caudal ventrolateral medulla (SBP: 5.59), intermediate reticular nucleus (SBP: 5.98), nucleus ambiguus (SBP: 5.59), dorsal motor nucleus of the vagal nerve (SBP: 4.79), and inferior olive (SpO<sub>2</sub>: 4.7, SBP: 6.16) were identified with high sensitivity and corrected for multiple comparisons (p < 0.01). Furthermore, we observed activation of the following hypothalamic nuclei: paraventricular nucleus (SpO<sub>2</sub>: 7.67), anterior and lateral hypothalamic area (SpO<sub>2</sub>: 7.67, SBP: 4.79), supraoptic nucleus, and tuberomammillary nucleus (SpO<sub>2</sub>: 7.07).

**CONCLUSION:** High-resolution brainstem fMRI during repeated hypoxia traces brainstem circuits engaged by peripheral chemoreceptors. This methodology allows the analysis of neural adaptation to atmospheric conditioning and short- and long term weightlessness. Furthermore, the understanding of the peripheral chemoreceptor contributions to human cardiovascular disease may enlighten not only antihypertensive therapy.