

# ***The Challenge of Immature Respiratory Control in a Developing Lung***

**Richard J. Martin, M.D.**

*Professor, Pediatrics, Reproductive Biology,  
and Physiology & Biophysics*

*Case Western Reserve University School of Medicine*

*Drusinsky/Fanaroff Professor*

*Director, Neonatal Research*

*Rainbow Babies & Children's Hospital*

*Cleveland, Ohio*



**Before 1972**

**After 1974**



*Opera House  
Sydney, Australia*



*Rock 'n' Roll Hall of Fame  
Cleveland, Ohio, USA*



# ***The Challenge of Immature Respiratory Control in a Developing Lung***

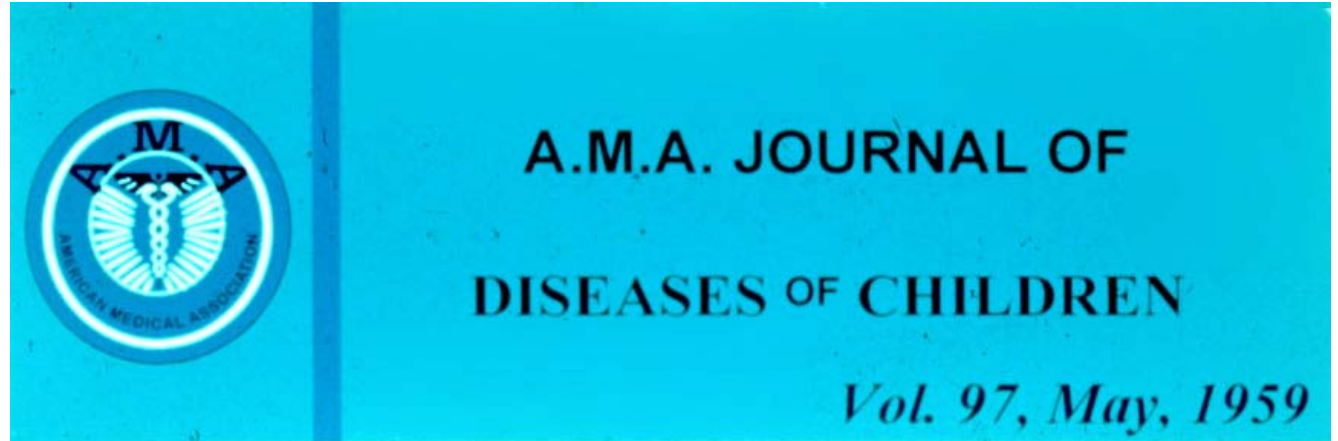
- ***Where have we been?***
- **The challenge of ongoing respiratory morbidity**
- **Linking immature respiratory control and respiratory morbidity**
- **Exploring underlying mechanisms**



## ***Advice for an Entry Level Neonatologist in the 1970s***

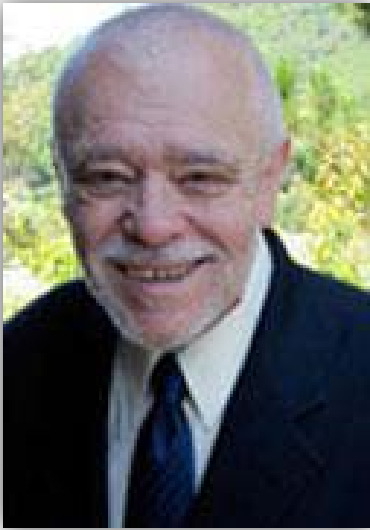
***“A solution for prematurity is at hand”.  
Implication: this is a risky career move***

***“All the respiratory problems have been solved”.  
Implication: avoid  
respiratory research***



# Surface Properties in Relation to Atelectasis and Hyaline Membrane Disease

Mary Ellen Avery, M.D., and Jere Mead, M.D., Boston



The NEW ENGLAND  
JOURNAL of MEDICINE

***Treatment of the Idiopathic Respiratory-  
Distress Syndrome with Continuous  
Positive Airway Pressure***

George A. Gregory, M.D., Joseph A. Kitterman, M.D., Roderic H. Phibbs, M.D., William H. Tooley, M.D., and William K. Hamilton, M.D.

*N Engl J Med 1971; 284:1333-1340*



# The New England Journal of Medicine

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**Number**

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**PULMONARY DISEASE FOLLOWING RESPIRATOR THERAPY OF  
HYALINE-MEMBRANE DISEASE\***

**Bronchopulmonary Dysplasia**

**WILLIAM H. NORTHWAY, JR., M.D.,† ROBERT C. ROSAN, M.D.,‡ AND DAVID Y. PORTER, M.D.§**

**PALO ALTO, CALIFORNIA**



March 2012  
To my friend  
Richard  
with love  
Marie

**ASSISTED VENTILATION  
IN TERMINAL HYALINE MEMBRANE DISEASE**

BY

**MARIA DELIVORIA-PAPADOPOULOS and PAUL R. SWYER**

*Reprinted from Archives of Disease in Childhood, Vol. 39, No. 207 October 1964*

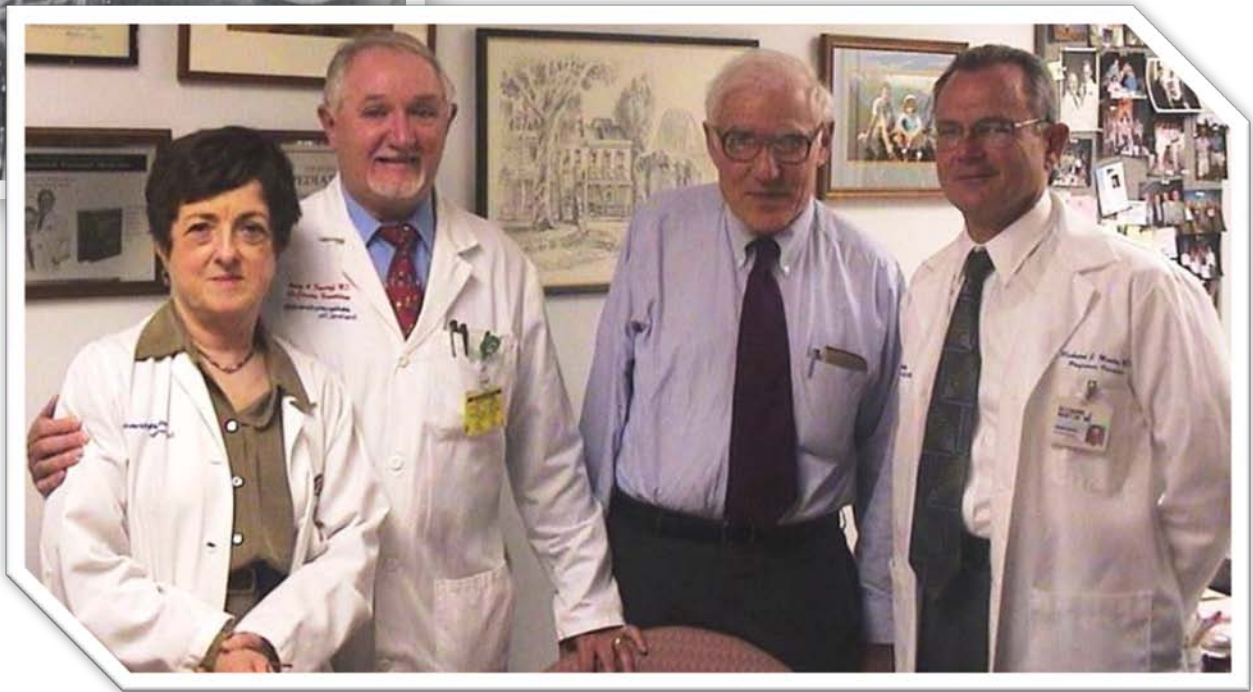
APNEA IN PREMATURE INFANTS: MONITORING, INCIDENCE,  
HEART RATE CHANGES, AND AN EFFECT OF  
ENVIRONMENTAL TEMPERATURE

William J. R. Daily, M.A., M.D., Marshall Klaus, M.D., and  
H. Belton P. Meyer, M.D.

ABSTRACT

*“...Continuous monitoring of respiration in  
small infants is now clinically feasible.”*

Pediatrics 1969



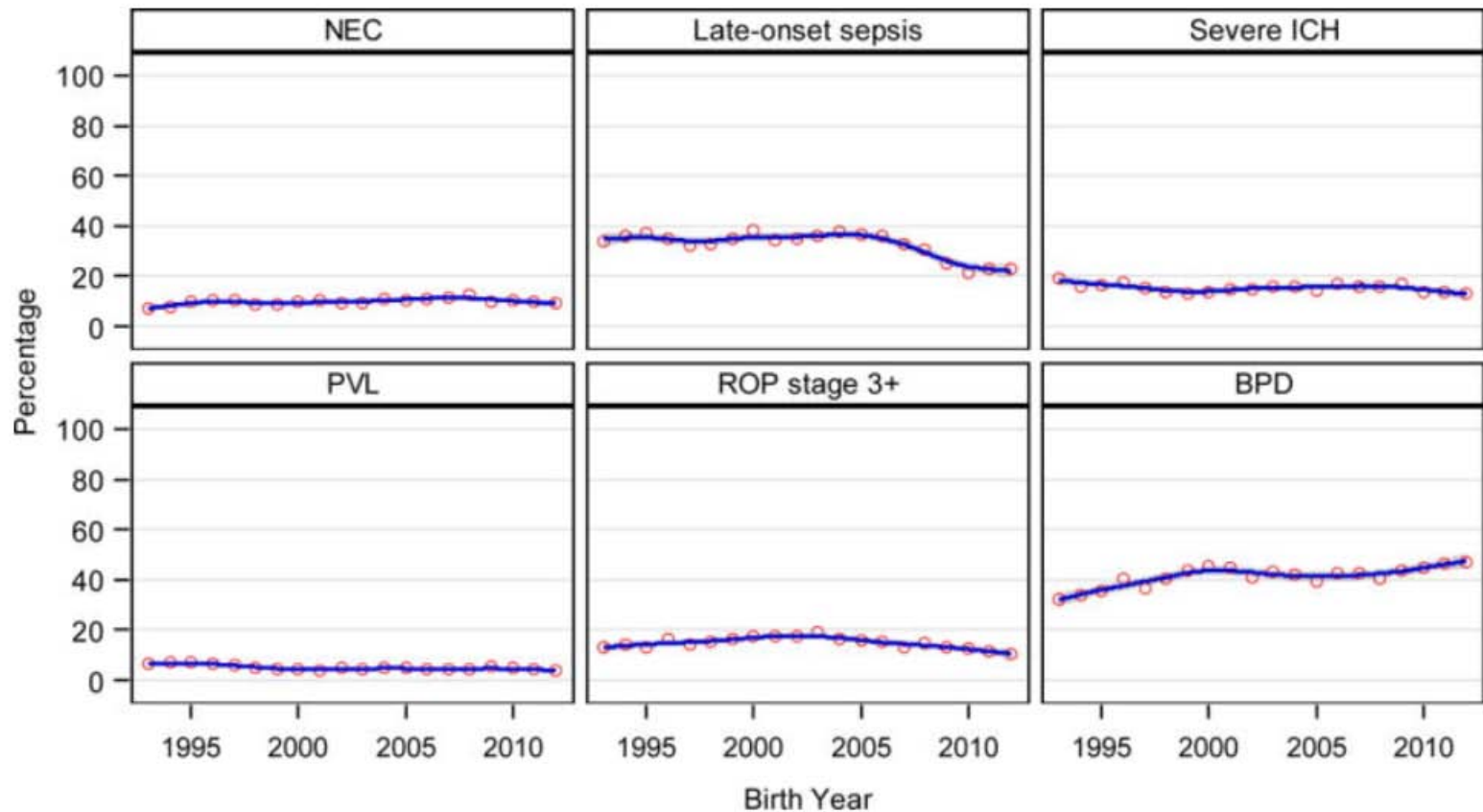
# ***The Challenge of Immature Respiratory Control in a Developing Lung***

- Where have we been?
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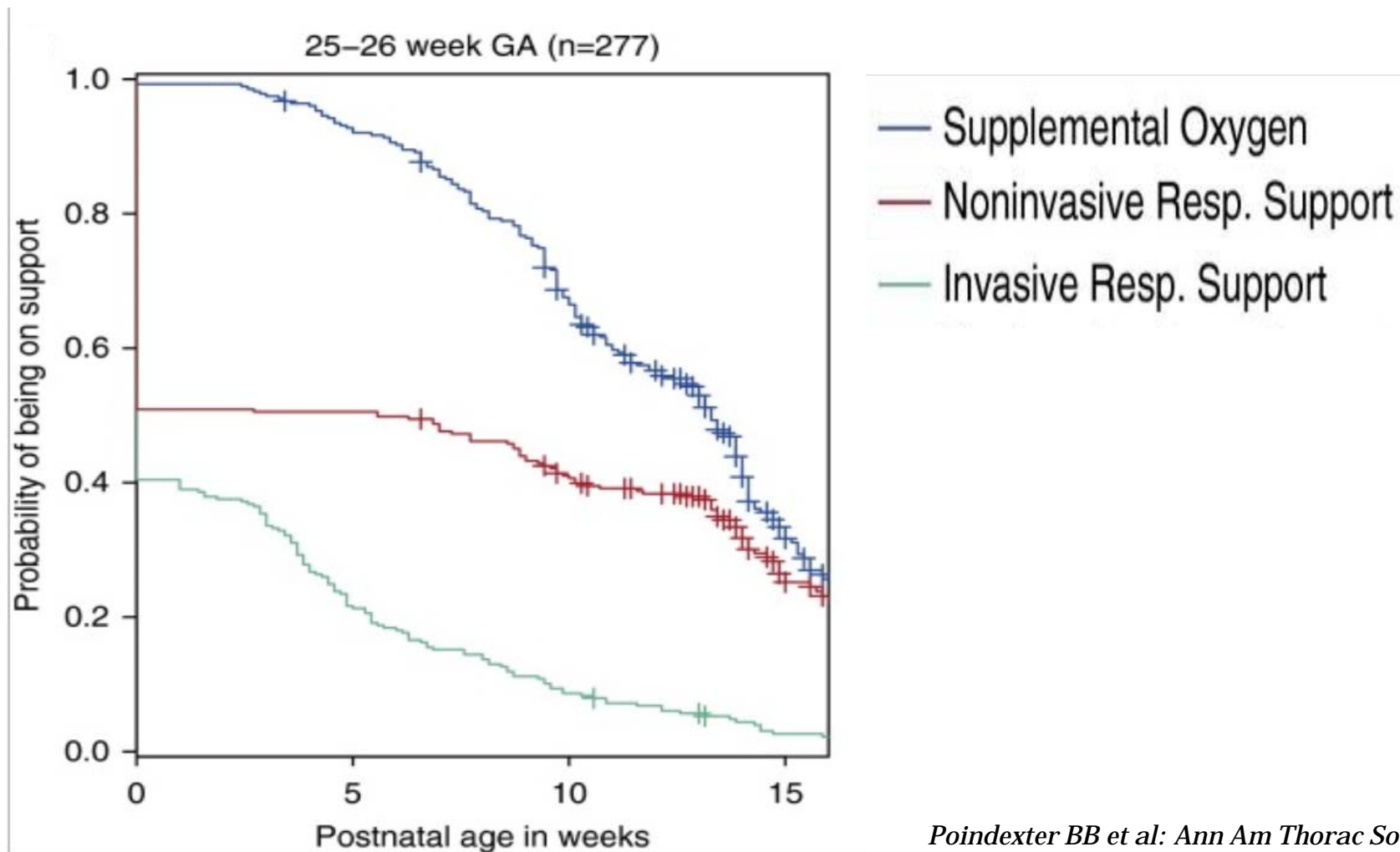
# ***The BPD Challenge***

- **Incidence in ELBW infants approaches 40%**
- **No clear definition**
- **Animal models remain a challenge**
- **Strong relationship with neurodevelopmental handicap**

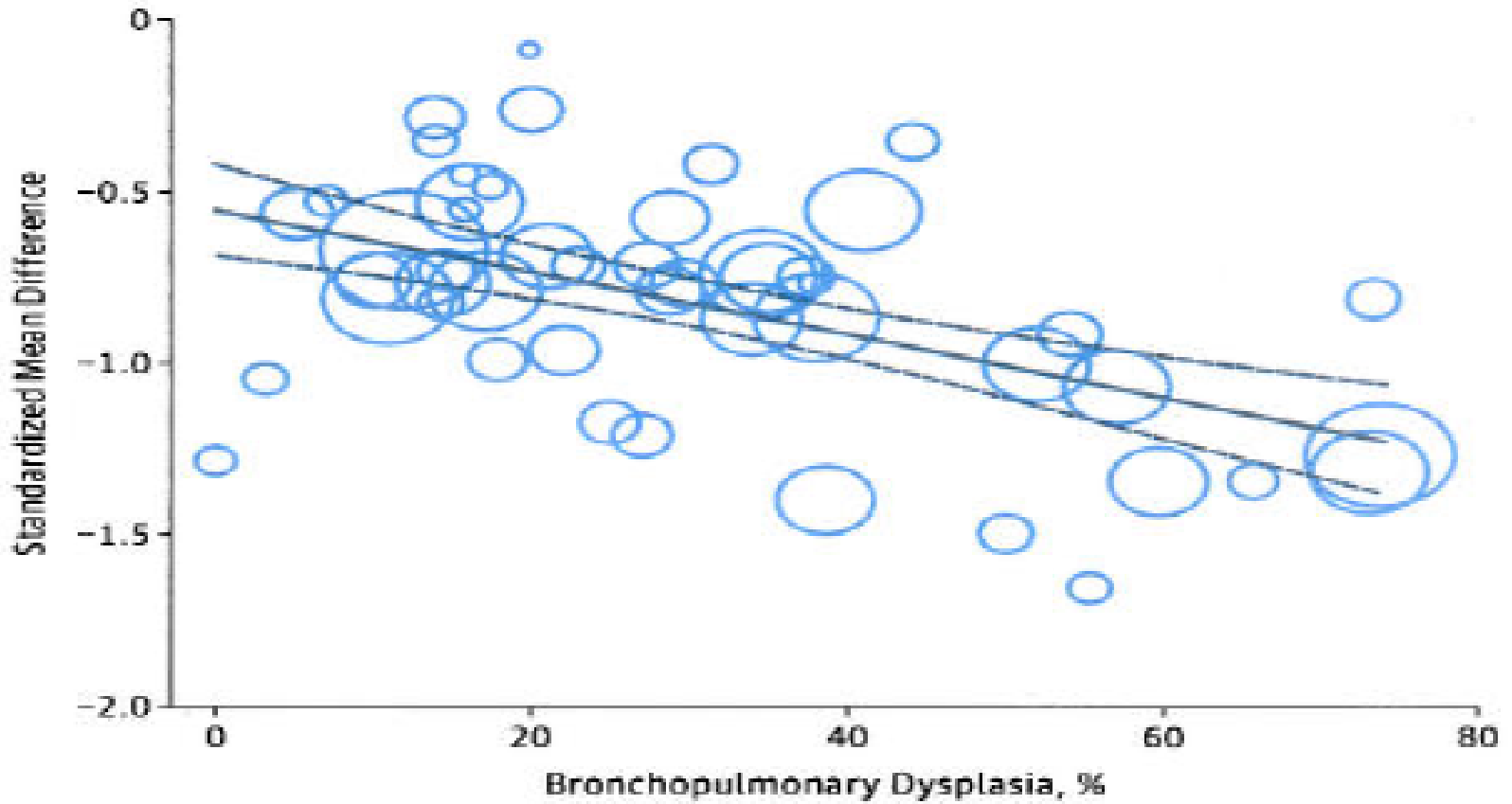
# ***Neonatal Morbidities at 22-28 Weeks' Gestation [1993-2012]***



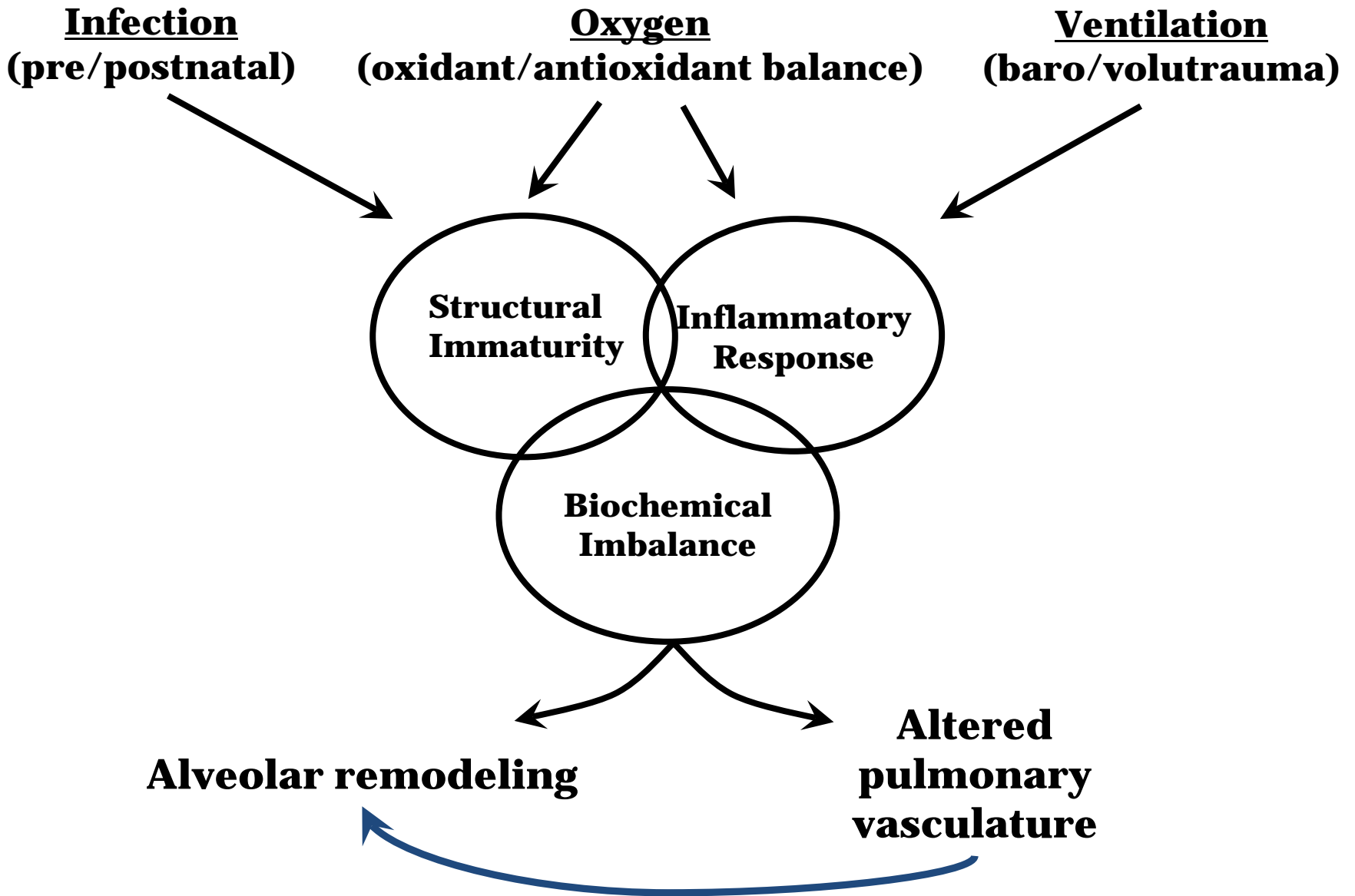
# ***Limitations of Current Definitions of BPD for the Prematurity and Respiratory Outcomes Program***

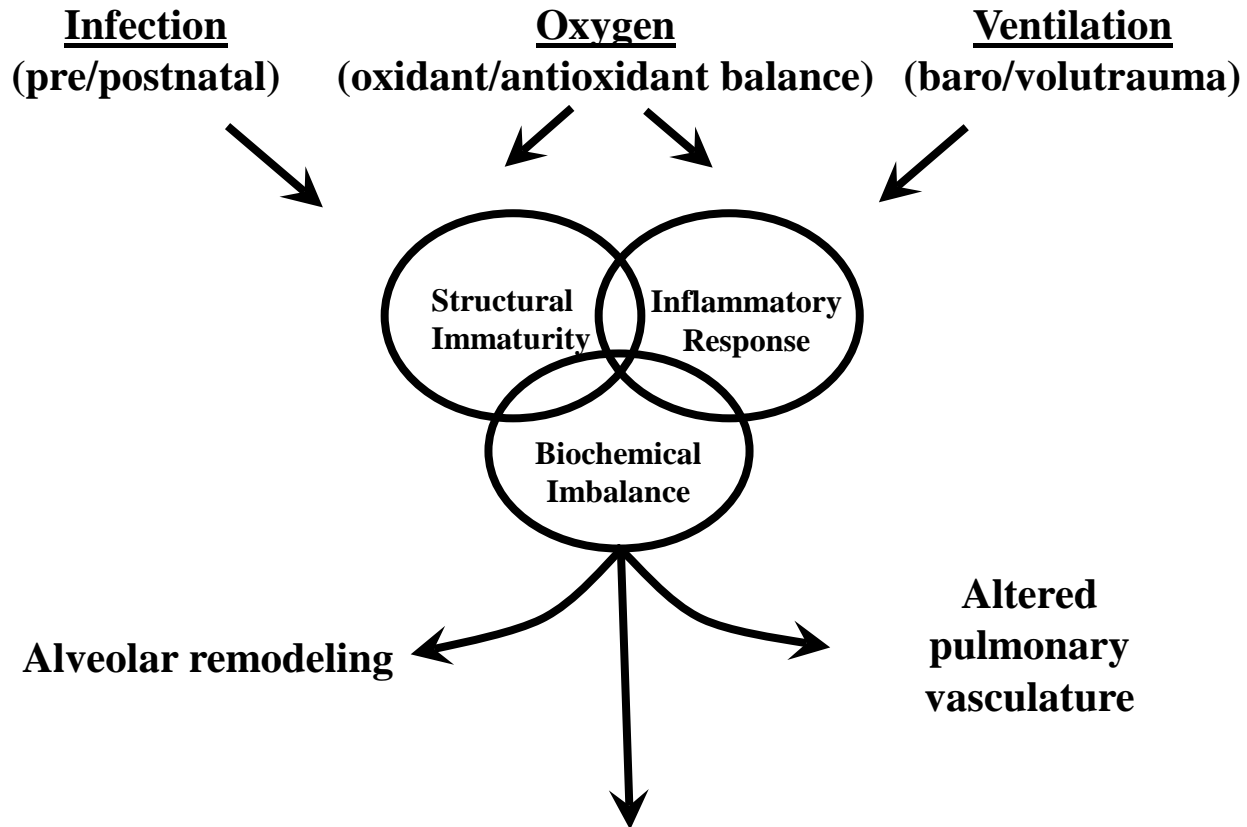


# ***Association between BPD Incidence and IQ Deficit***



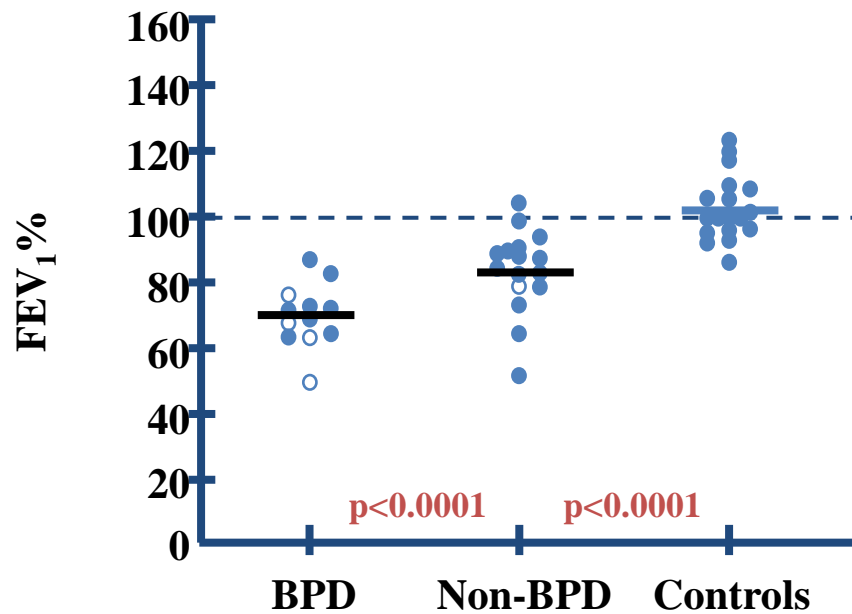




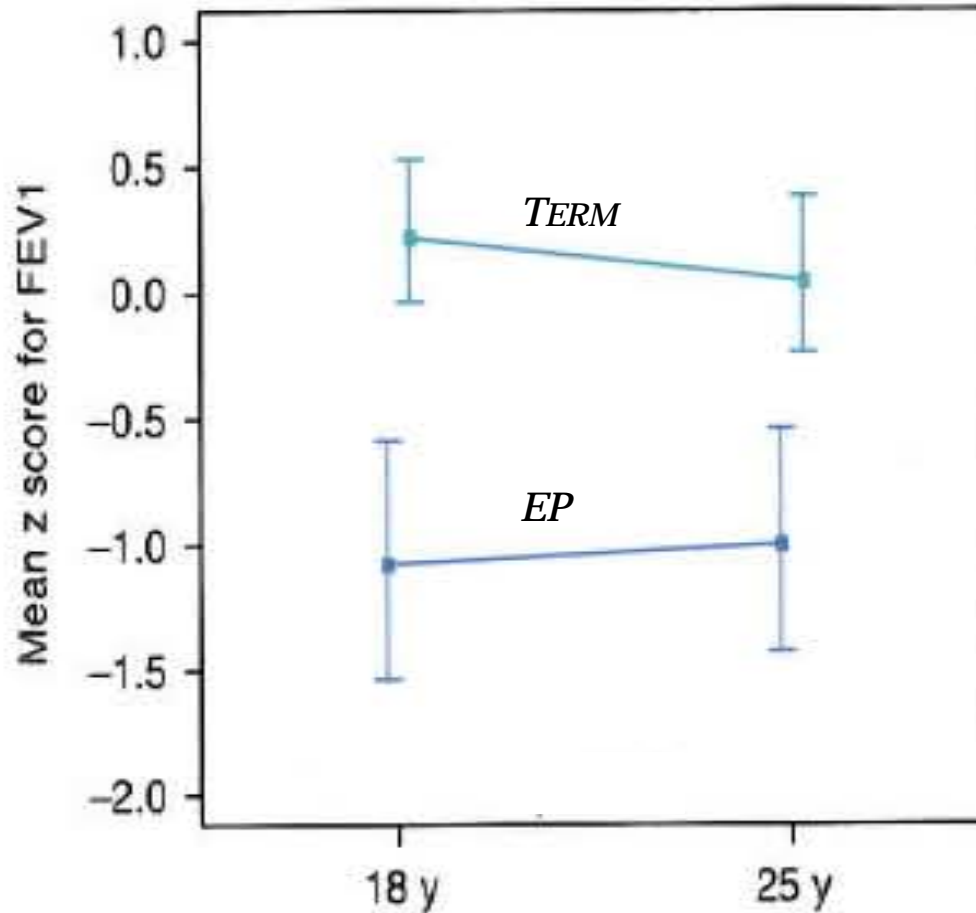


## **Impaired Airway Structure and Function**

# ***Airway Hyperresponsiveness in School Children Born Very Preterm***



# ***Adult Progression of Bronchial Responsiveness after Term and Extremely Preterm [EP] Birth***



# ***Ventilation in Extremely Preterm Infants and Respiratory Function at 8 Years***

*Lex W. Doyle, M.D., Elizabeth Carse, M.D., Anne-  
Marie Adams, Ph.D., Sarath  
Ranganathan, Ph.D., Gillian Opie, M.B., B.S., Jeanie  
L.Y. Cheong, M.D., for the Victorian Infant  
Collaborative Study Group*

N Engl J Med  
Volume 377(4):329-337  
July 27, 2017

## ***Days of Respiratory Support in Extremely Preterm Infants [ $<28$ wk]***

	1997 [n=151]	2005 [n=170]
Endotracheal ventilation		
Median	19	10
Interquartile range	8–32	2.5–23.5
Mean	23.1±21.0	19.9±28.6
Nasal CPAP		
Median	24	31.5§
Interquartile range	14–36	16.8–42§
Mean	26.0±15.3	33.3±26.0§
Supplemental oxygen		
Median	45	53.5
Interquartile range	10.5–88	9.8–106
Mean	65.1±48.0	75.1±68.0

# ***Expiratory Flows at 8 Years of Age in Each Period***

<b>Variable</b>	<b>1997 (N=112)</b>	<b>2005 (N=123)</b>
FEV <sub>1</sub>		
Raw value — liters	1.43±0.30	1.25±0.28
z score	-0.65±1.30	-1.19±1.17†
Percent of predicted value	92.0±15.7	85.4±14.4†

Lung  
Parenchymal  
Injury



↓ Bronchoalveolar  
attachments



↓ Airway caliber

Airway  
Constrictor/  
Dilator  
Imbalance



Excessive  
constriction

Altered Airway  
Smooth Muscle  
Properties



↑ Airway  
smooth muscle



↑ Contractility



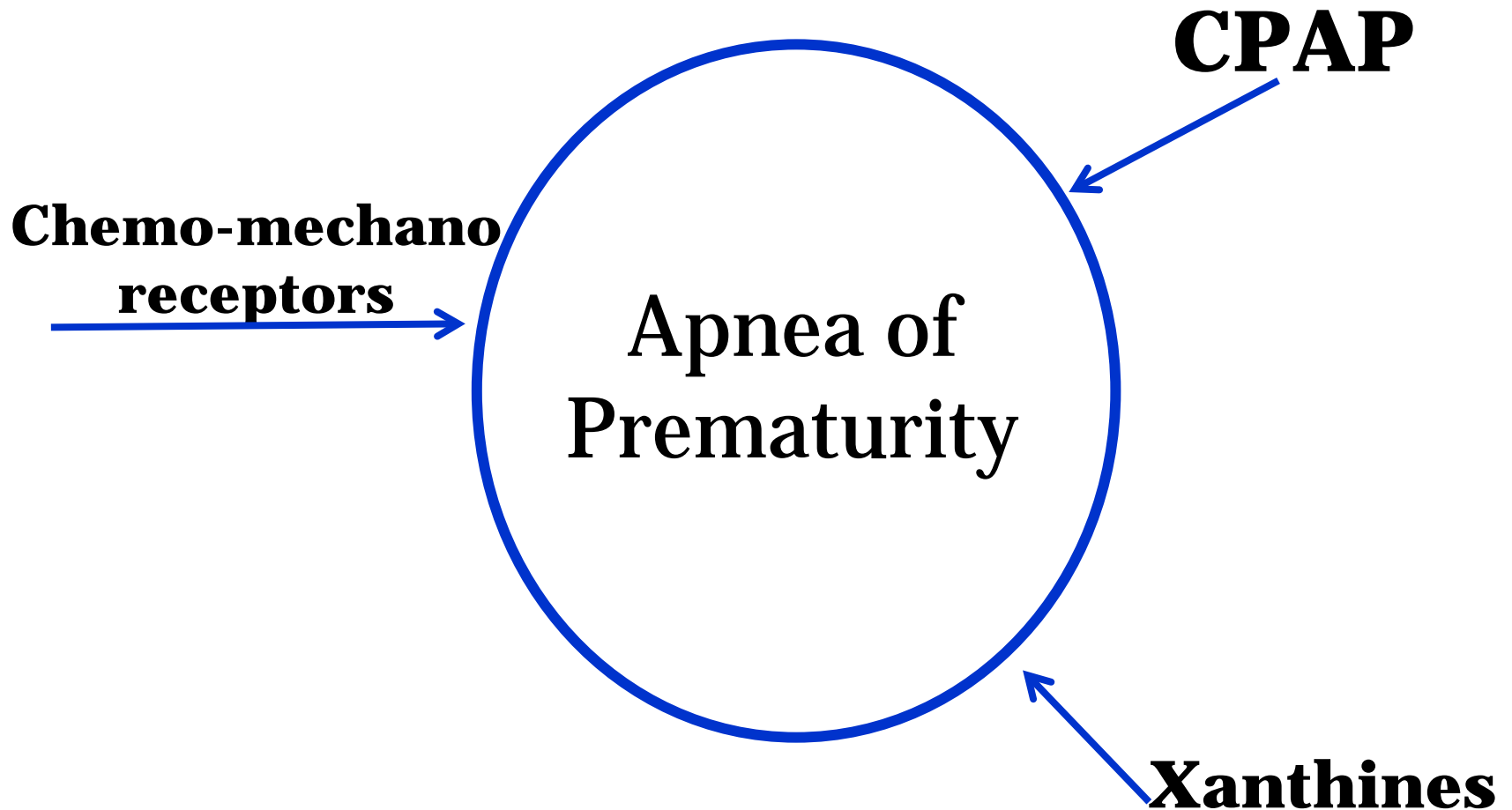
Airway  
hyperreactivity

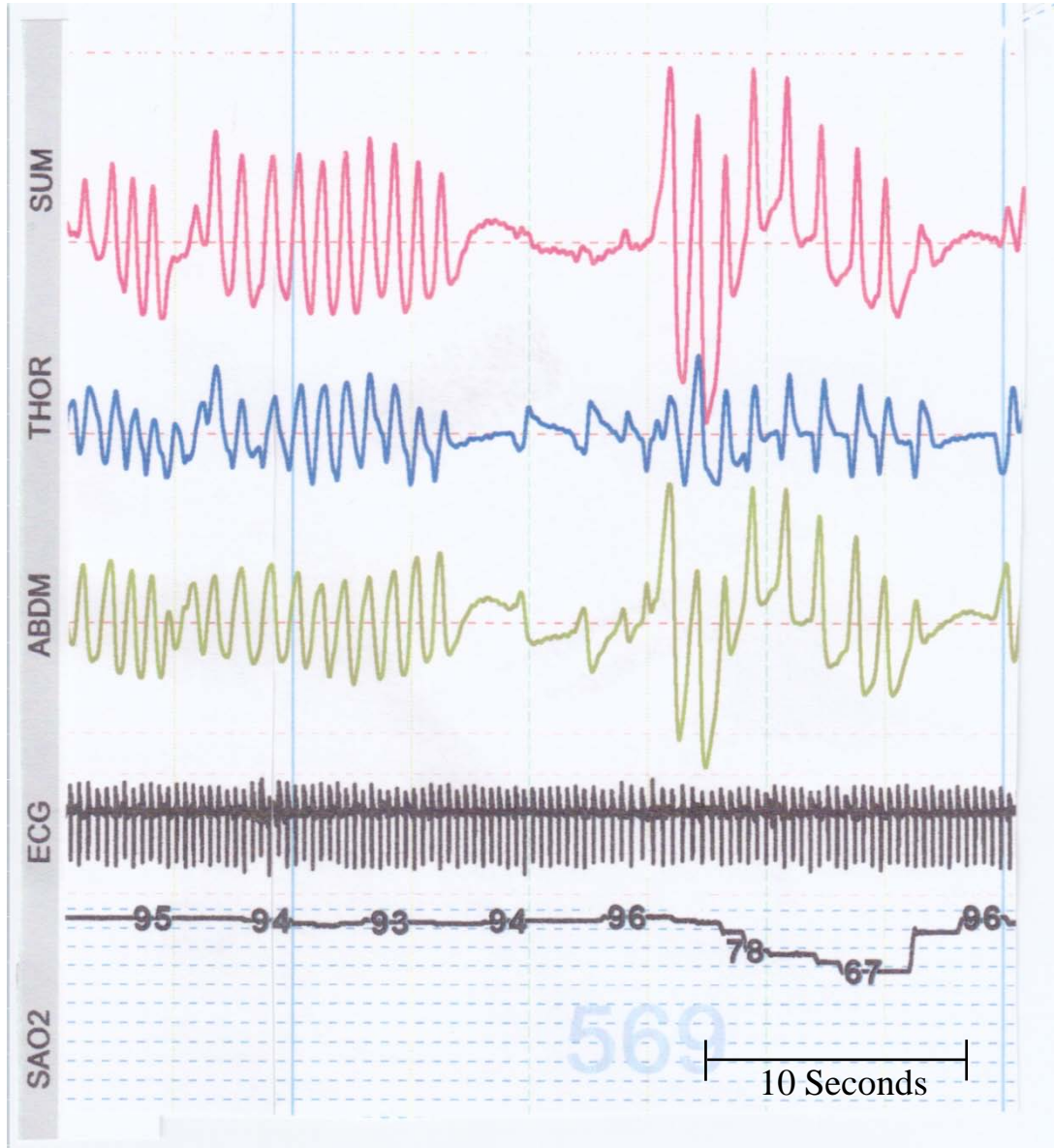
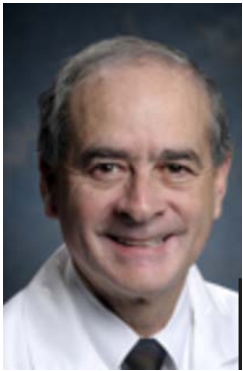


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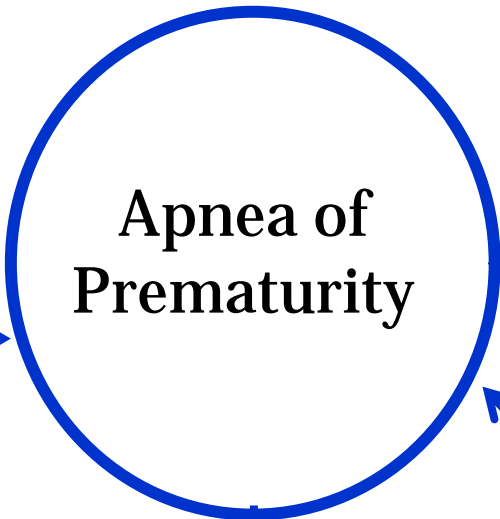
- Where have we been?
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# ***Physiologic Pathways Leading to Mechanisms of Action***





CPAP



Xanthines



Chemo-mechano  
receptors

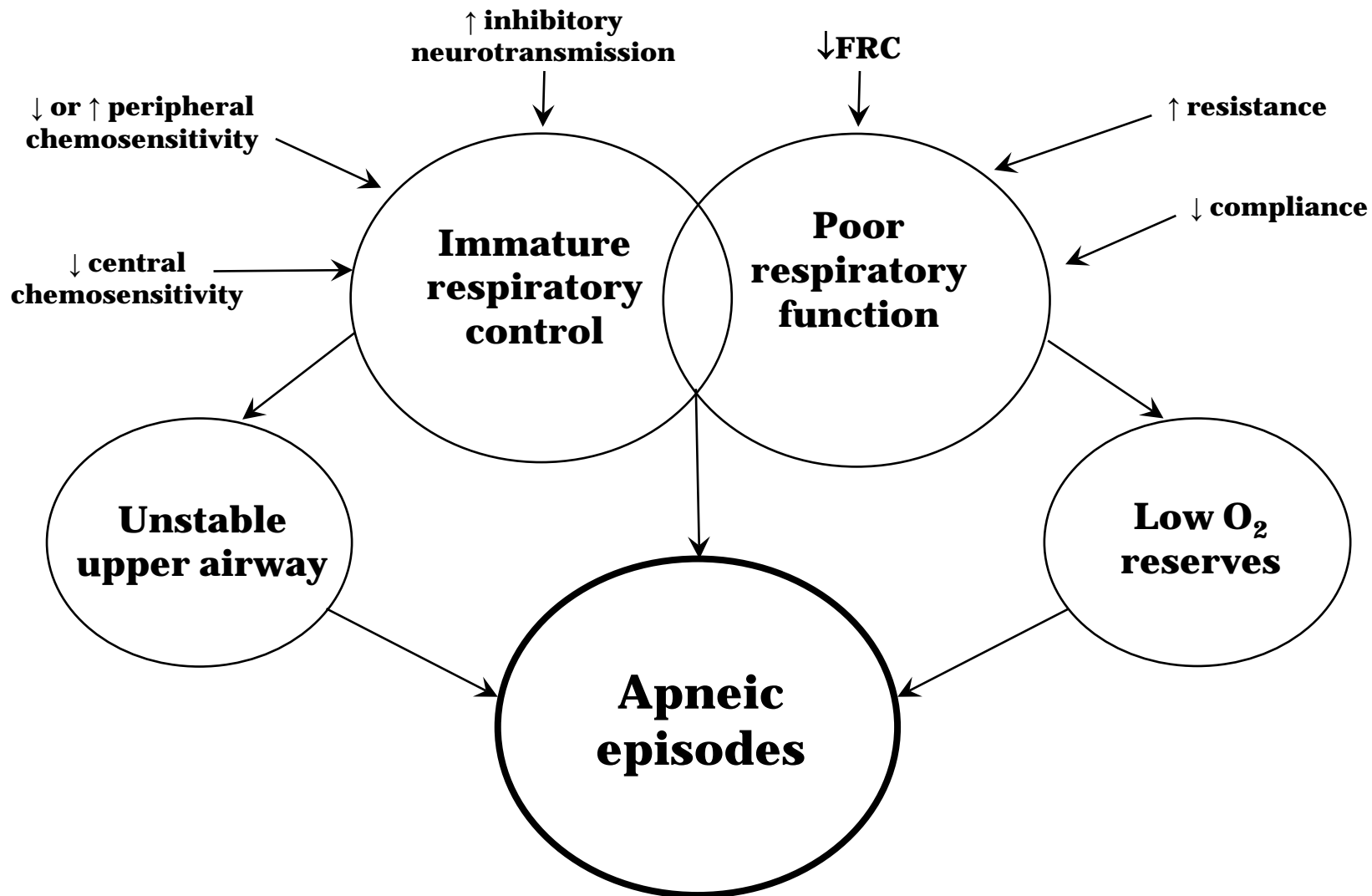


**Intermittent  
Hypoxia**



**Longer Term  
Neurorespiratory Morbidity**

# ***All Roads Lead to Apnea***



Immature  
Respiratory  
Control

Compromised  
Lungs and  
Airways

Pulmonary  
Hypertension

Low Baseline  
Oxygenation

```
graph TD; A[Immature Respiratory Control] --> B[INTERMITTENT HYPOXIC EPISODES]; C[Compromised Lungs and Airways] --> B; D[Pulmonary Hypertension] --> B; E[Low Baseline Oxygenation] --> B; B -.-> F[POSSIBLE ADVERSE NEURORESPIRATORY OUTCOMES];
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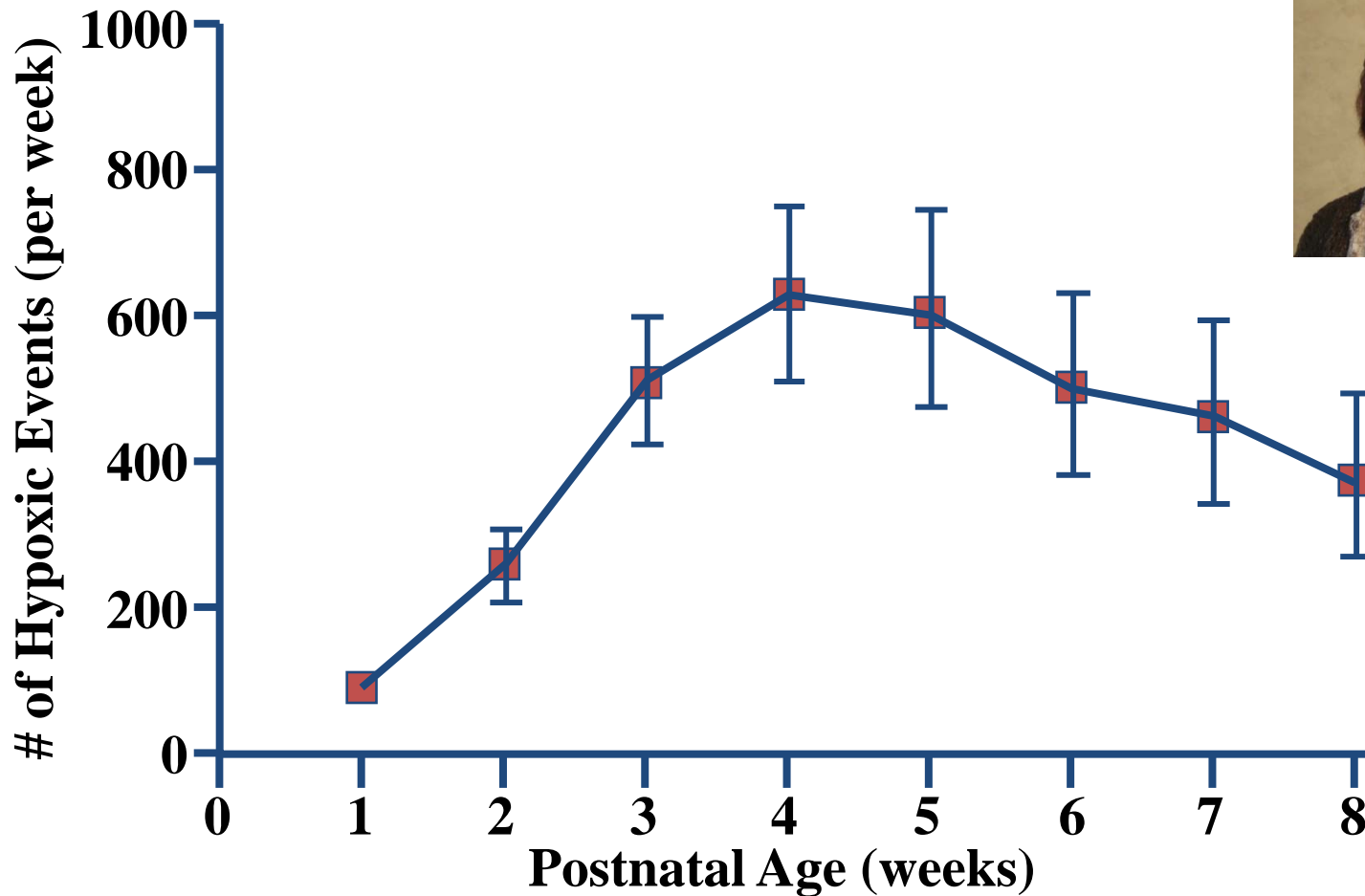
INTERMITTENT HYPOXIC EPISODES

POSSIBLE ADVERSE  
NEURORESPIRATORY  
OUTCOMES

# ***Risk of Bronchopulmonary Dysplasia***

“The only treatments that have reduced the incidence of BPD in randomized trials without serious adverse events in premature infants are **caffeine** and vitamin A”.

# ***Mean Number of Desaturation Episodes in Infants of 24 to 28 Weeks' Gestation Over the First 8 Weeks***

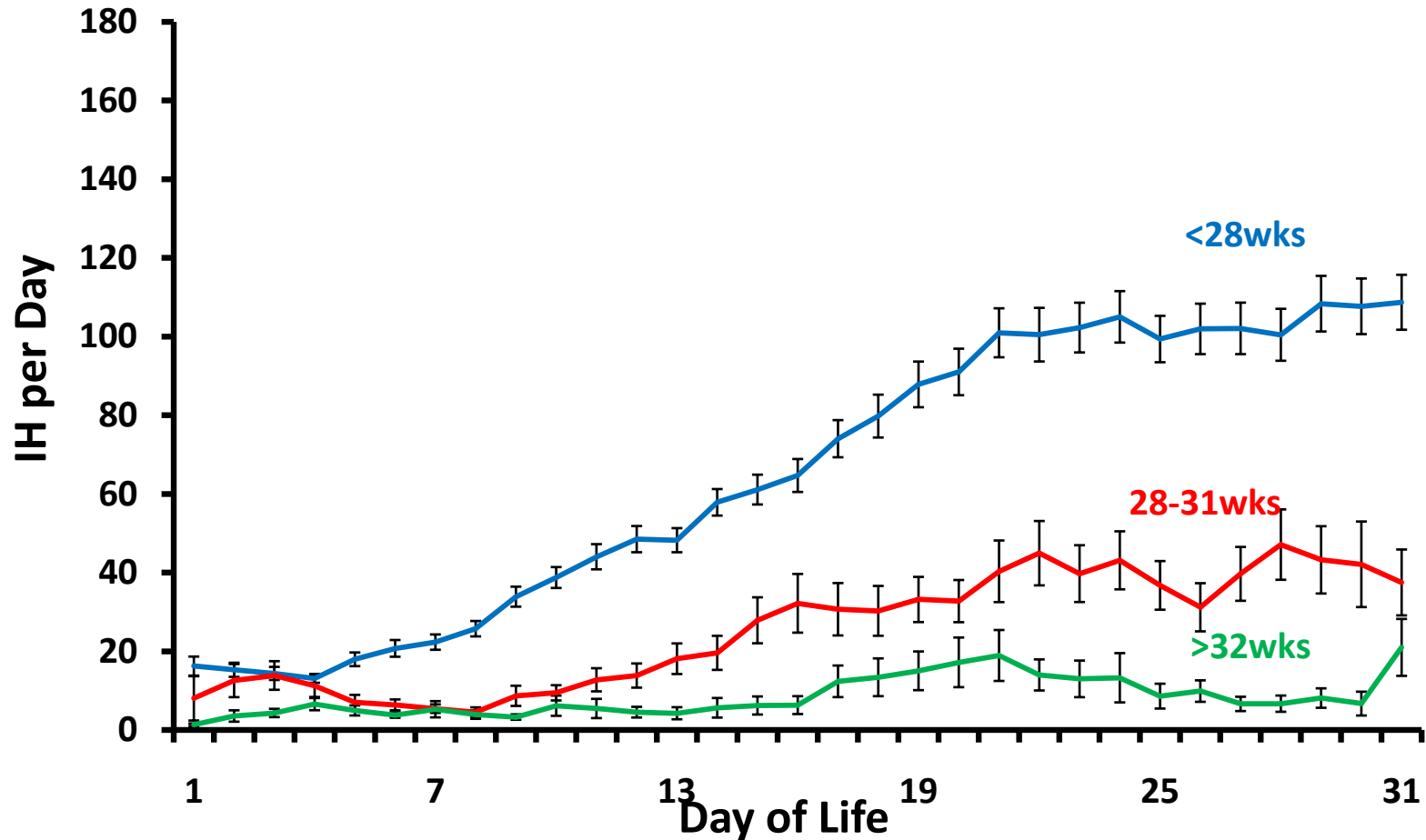


mean±95% confidence interval

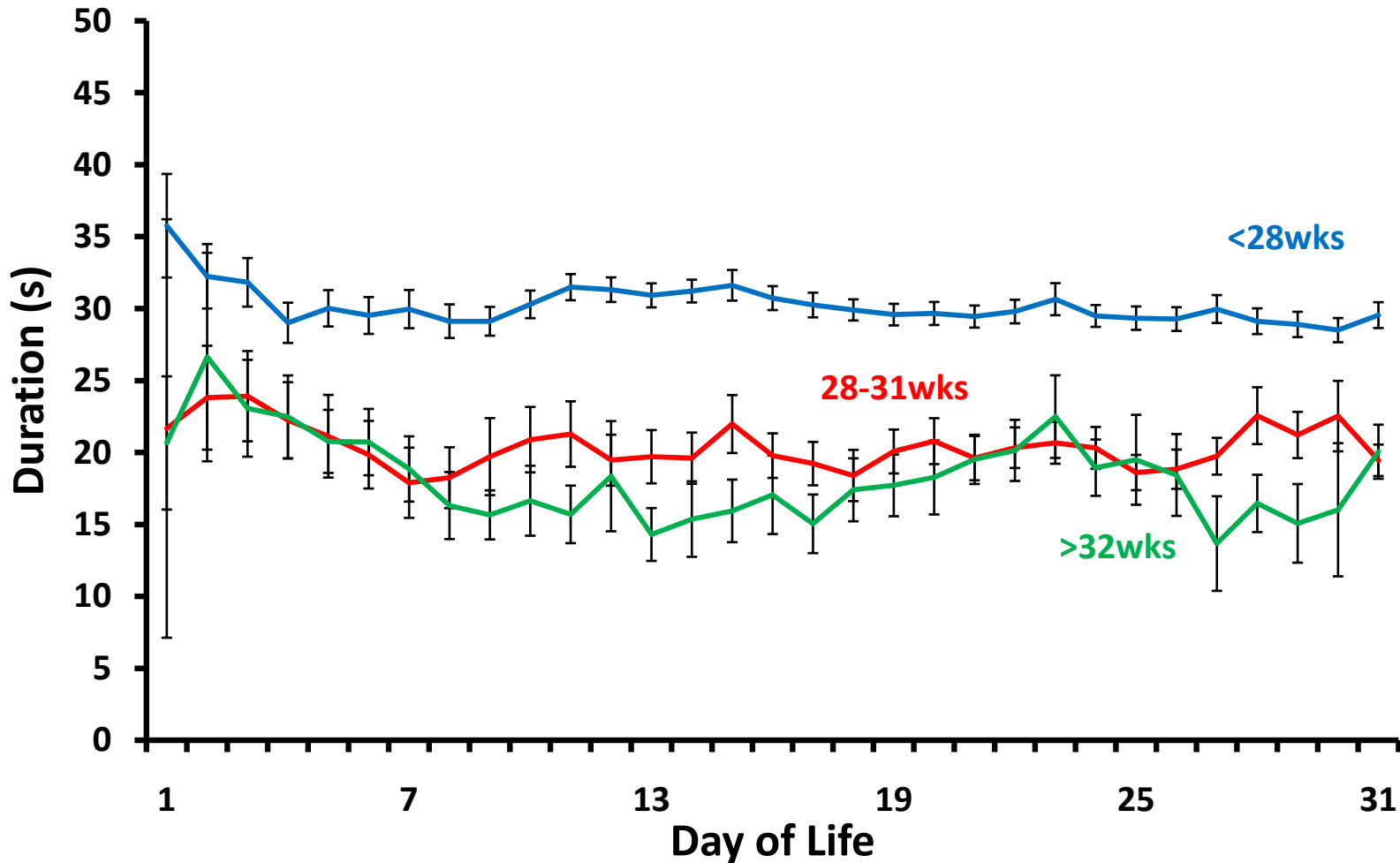
*J Di Fiore: J Pediatr 2010*



# ***Incidence of Intermittent Hypoxia at Various Gestational Ages***

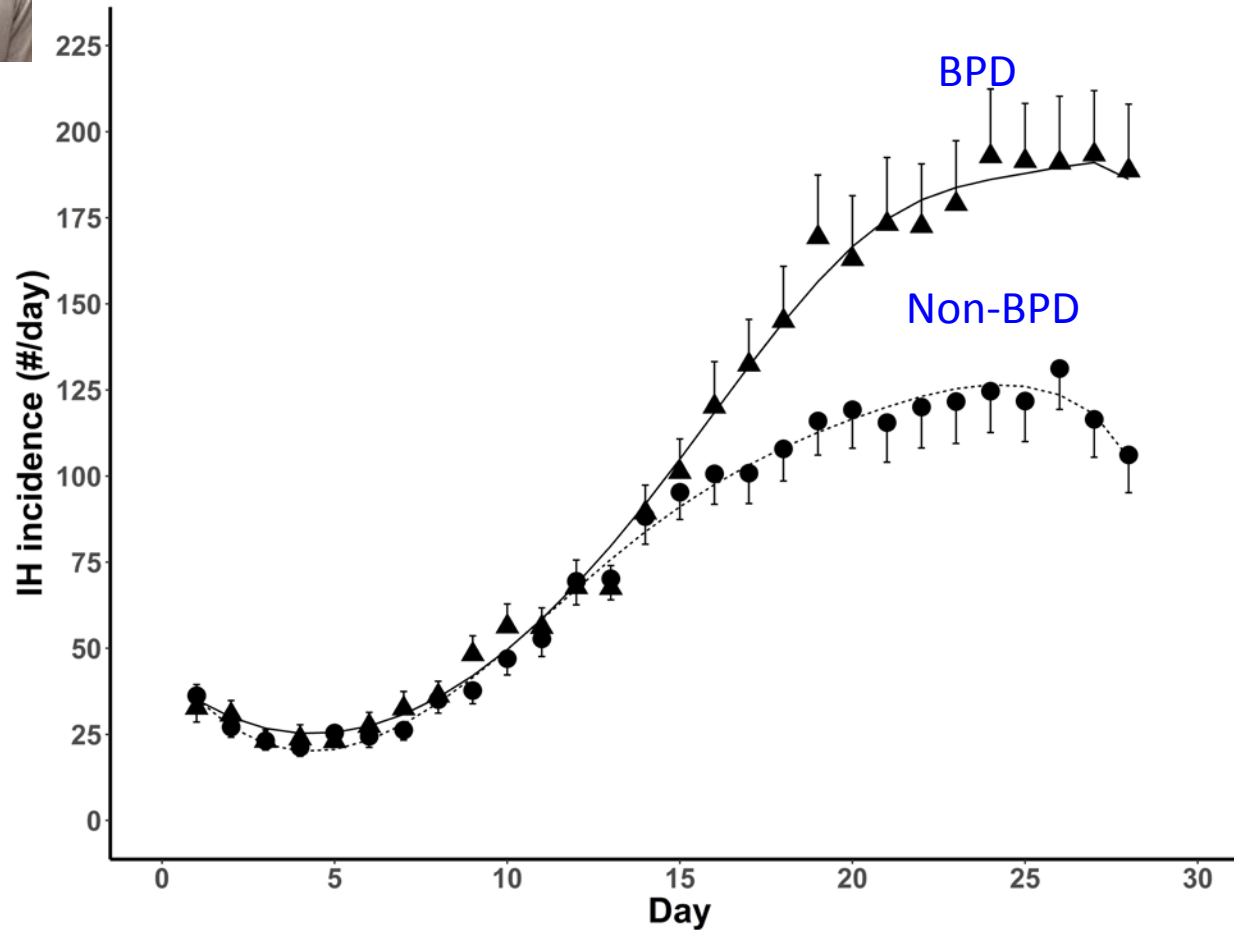


# ***Duration of Intermittent Hypoxia at Various Gestational Ages***





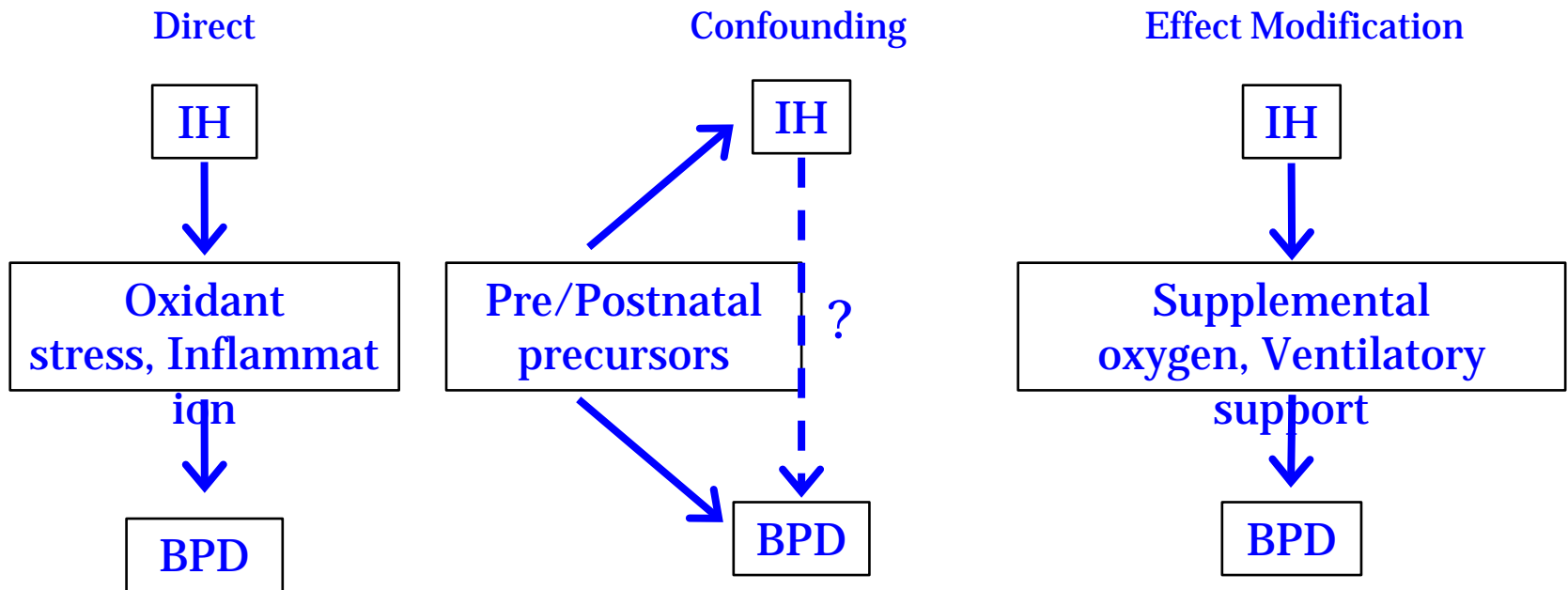
# ***Neonatal Intermittent Hypoxemia Events are Associated with Diagnosis of Bronchopulmonary Dysplasia at 36 Weeks Postmenstrual Age***



# ***Oxygen Desaturations in the Early Neonatal Period [1<sup>st</sup> 4 wks] Predict Development of BPD***

“Measures of desaturation, but not bradycardia, significantly added to the predictive model. Desaturation metrics also added to clinical risks for prediction of severe intraventricular hemorrhage, retinopathy of prematurity and prolonged length of stay in the NICU”.

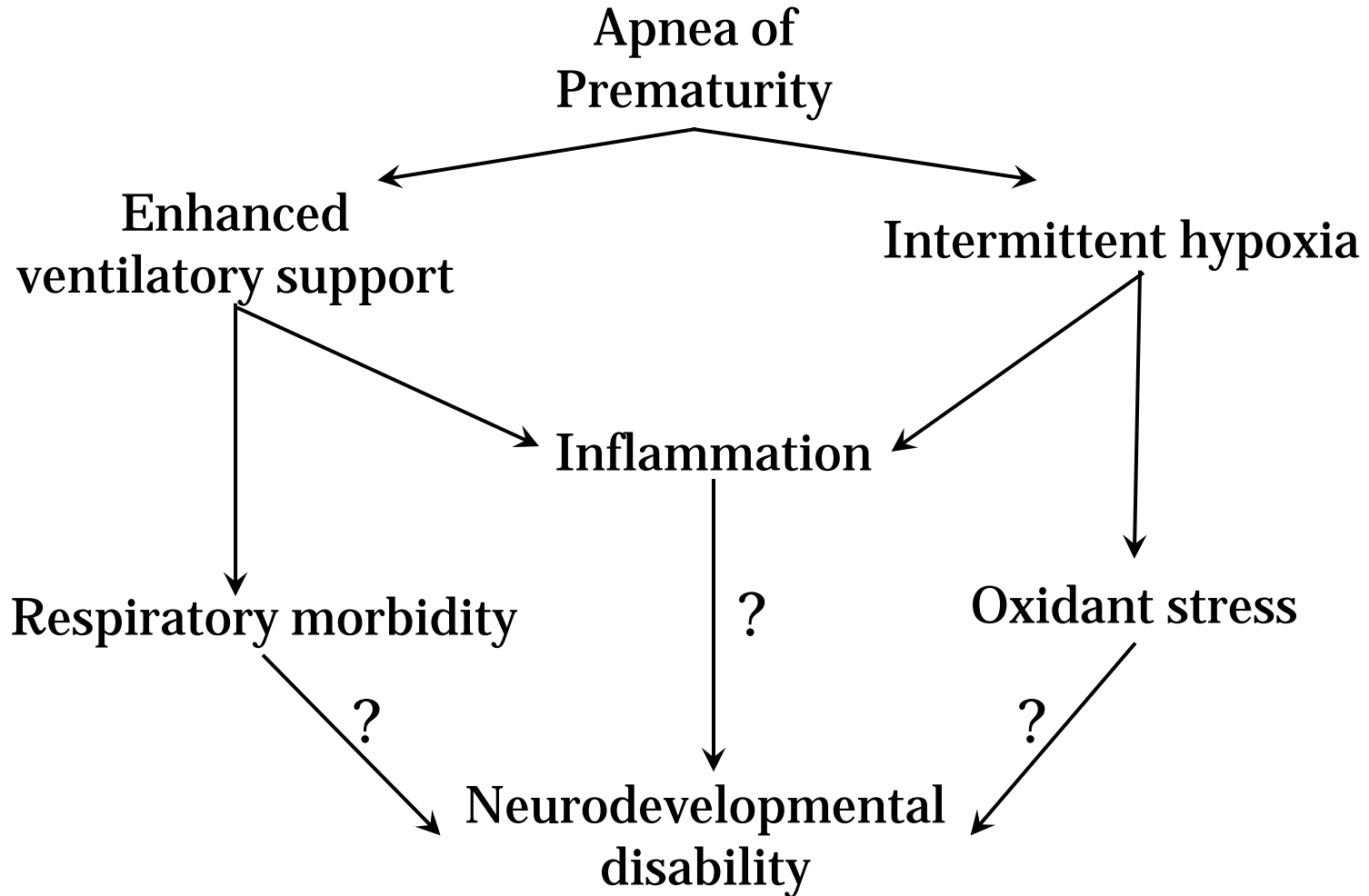
# POTENTIAL CAUSAL PATHWAYS BETWEEN INTERMITTENT HYPOXIA AND BRONCHOPULMONARY DYSPLASIA



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# ***Potential Consequences of Immature Respiratory Control***



***Postnatal Intermittent Hypoxia/Reoxygenation***



**Oxidative Stress**



**Inflammation**

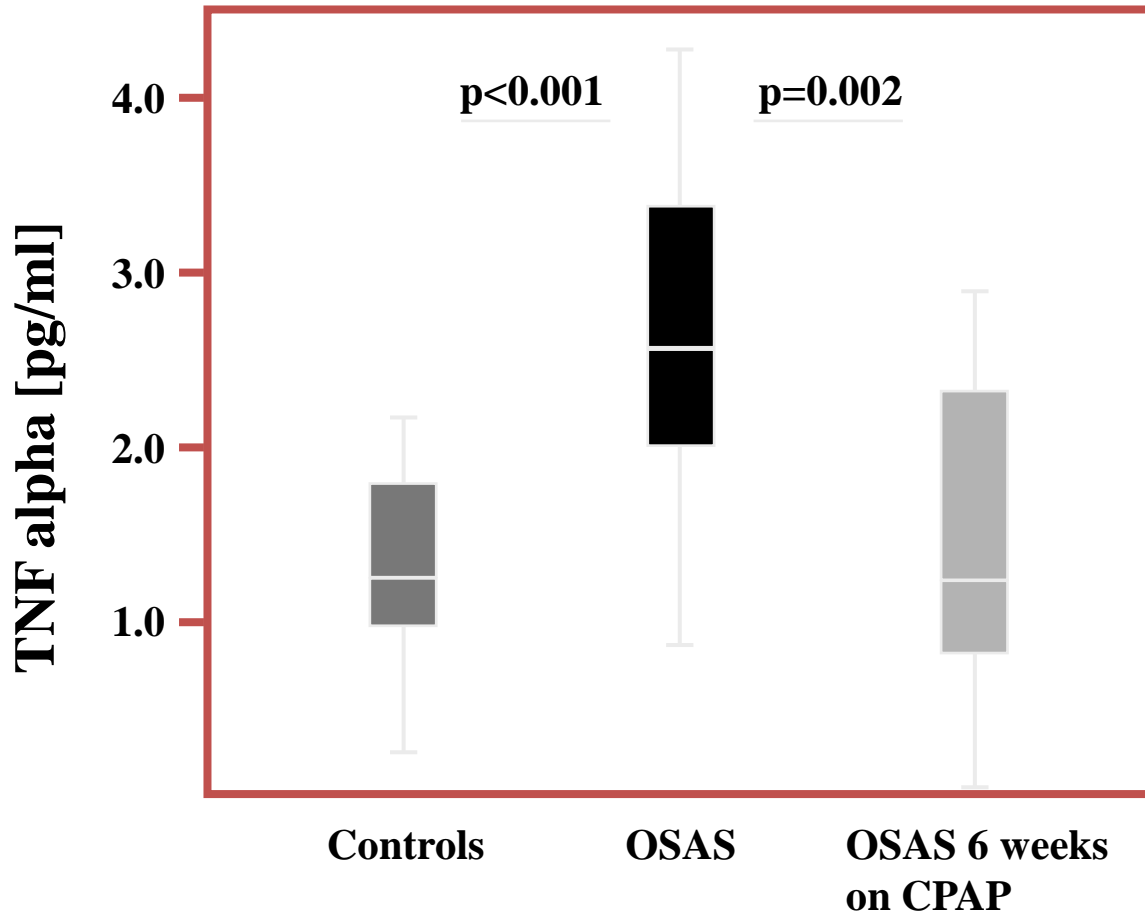


**Longer Term Sequelae**

*Adapted from Ryan S, et al: Thorax 2009*

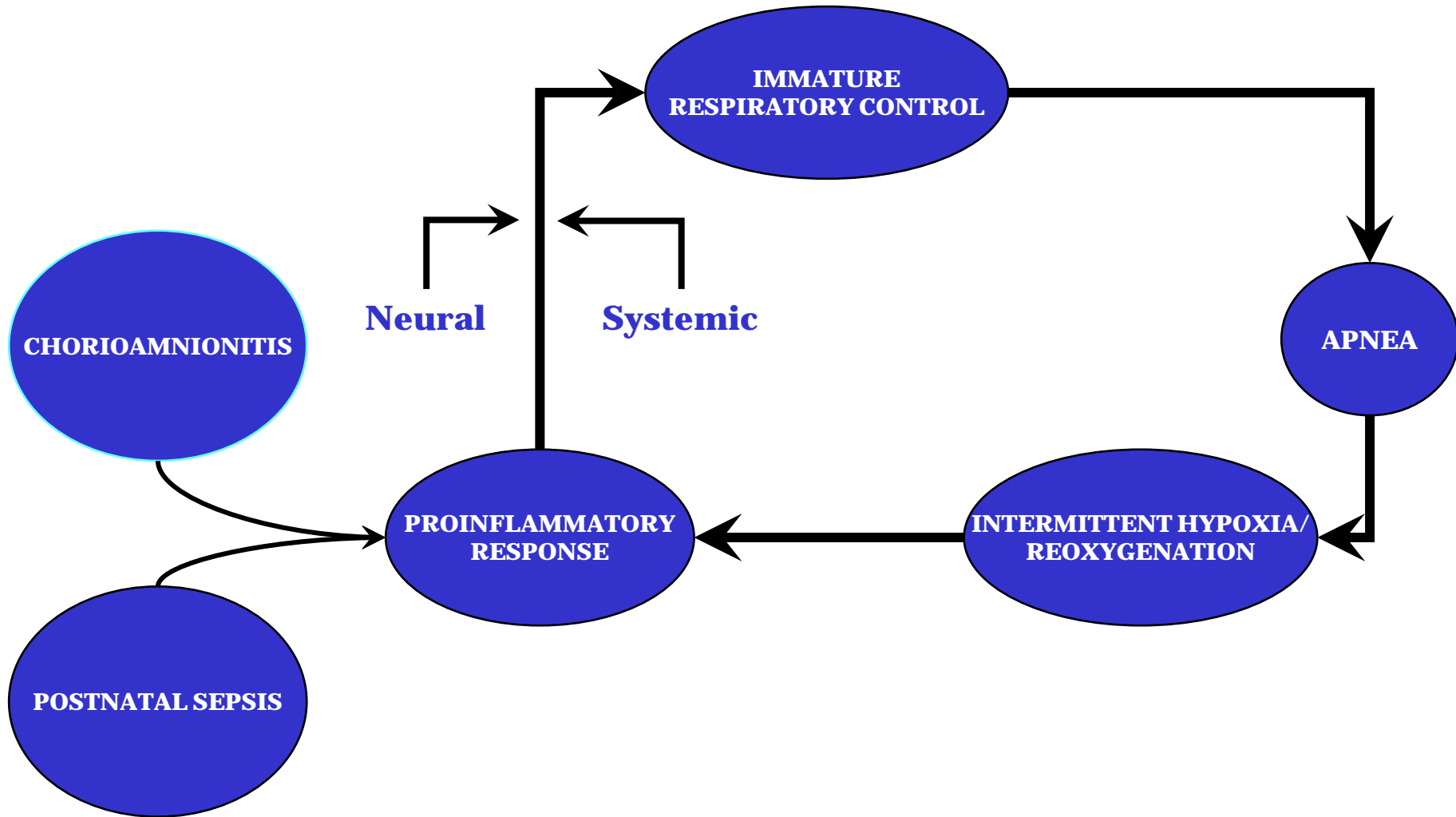


# *Inflammatory Pathways Associated with Intermittent Hypoxia in Obstructive Sleep Apnea*



*Ryan: Circulation 2005*

# ***Proposed Central Role for Respiratory Control in Mediating Inflammatory Responses***



**Immature or impaired  
respiratory control**



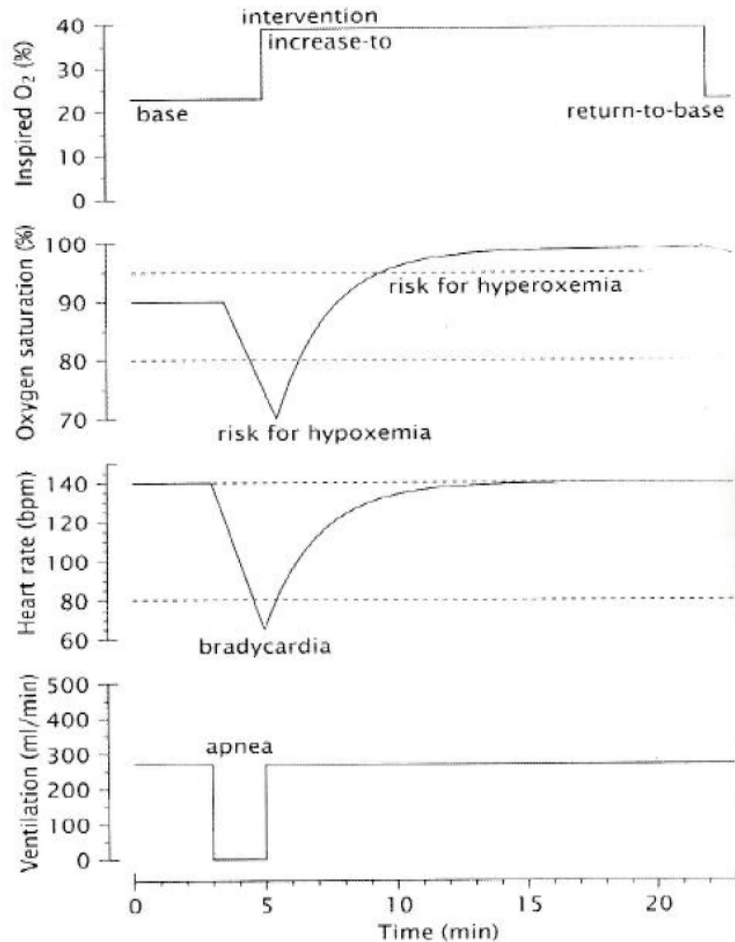
**Intermittent  
hypoxia/reoxygenation**



**Proinflammatory  
response**

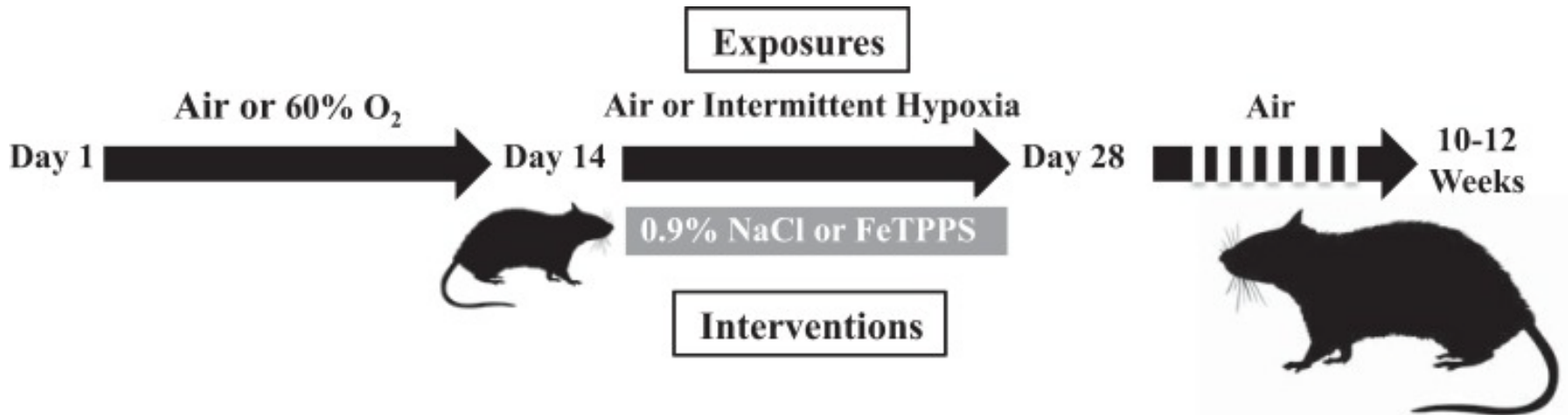


# ***The Risk for Hyperoxaemia after Apnoea, Bradycardia and Hypoxaemia in CPAP-treated Preterm Infants***



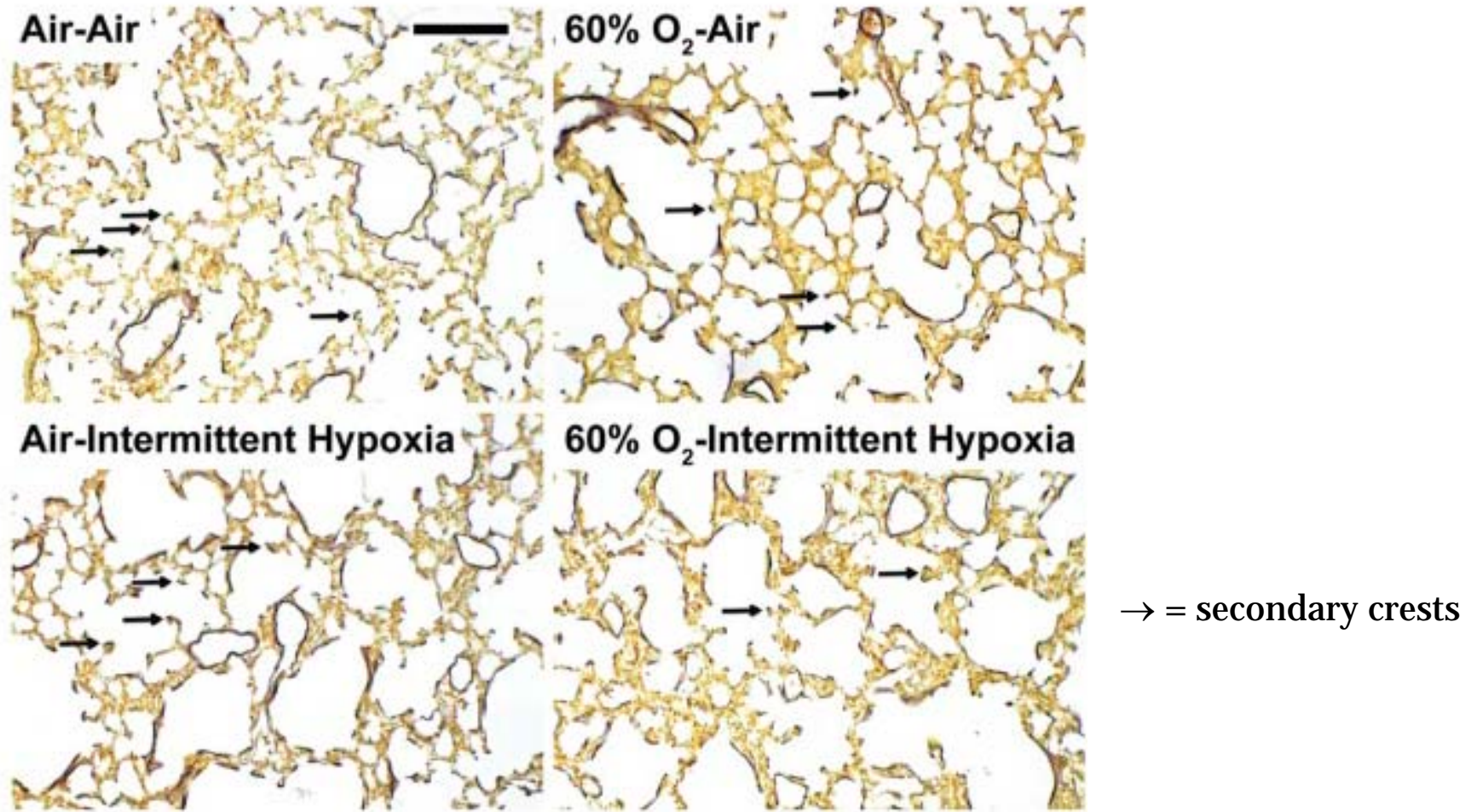
*van Zanten HA: Arch Dis Child 2014*

# ***Intermittent Hypoxia during Recovery from Neonatal Hyperoxic Lung Injury Causes Long-term Impairment of Alveolar Development: A New Rat Model of BPD***



*Mankouski A et al: Am J Physiol Lung Cell Mol Physiol 2017*

# ***Intermittent Hypoxia during Recovery from Neonatal Hyperoxic Lung Injury Causes Long-term Impairment of Alveolar Development: A New Rat Model of BPD***



# ***The Contribution of Intermittent Hypoxemia to Late Neurological Handicap in Mice with Hyperoxia-induced Lung Injury***

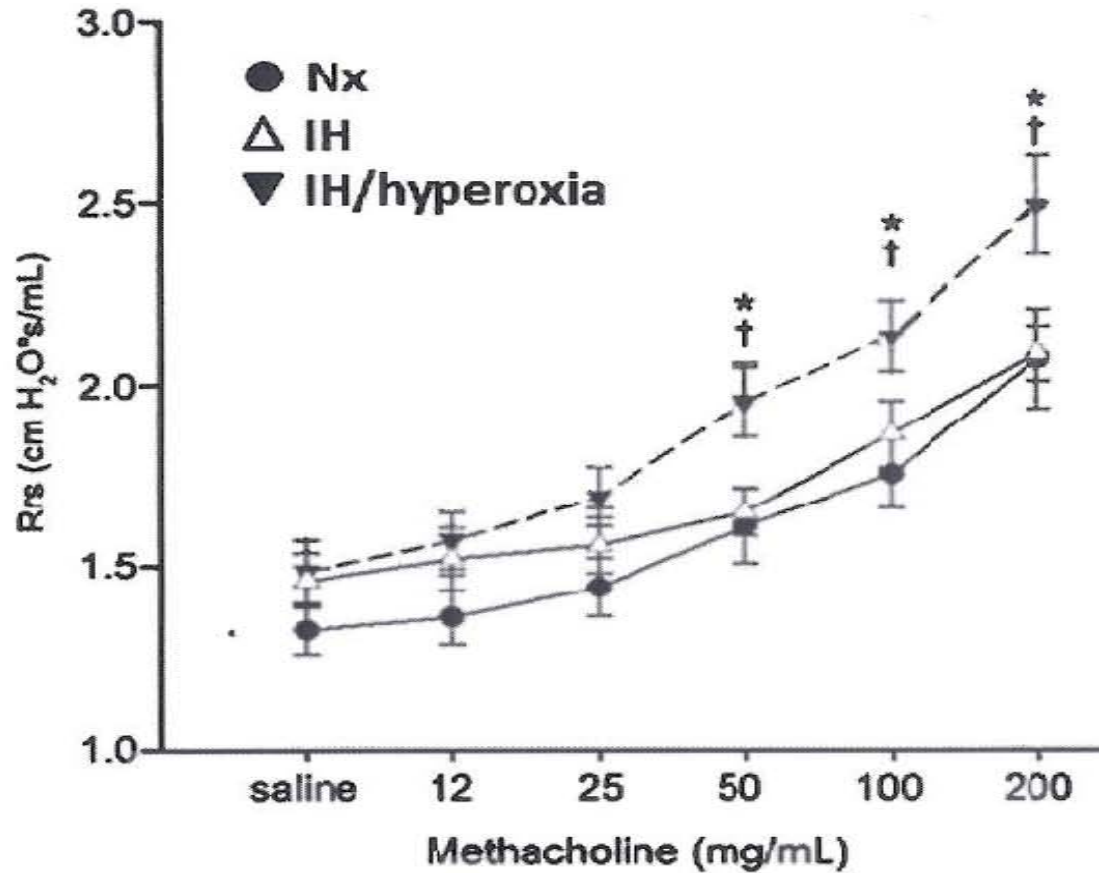
*Ratner V, Kishkurno SV, Slinko SK, Sosunov SA, Sosunov AA, Polin RA, Ten VS*

*“Our results suggest that intermittent hypoxia associated with hyperoxia-induced lung injury, but not lung injury itself, results in significant neurological handicap in neonatal mice with BPD”.*

*Neonatology 2007; 92(1):50-58*

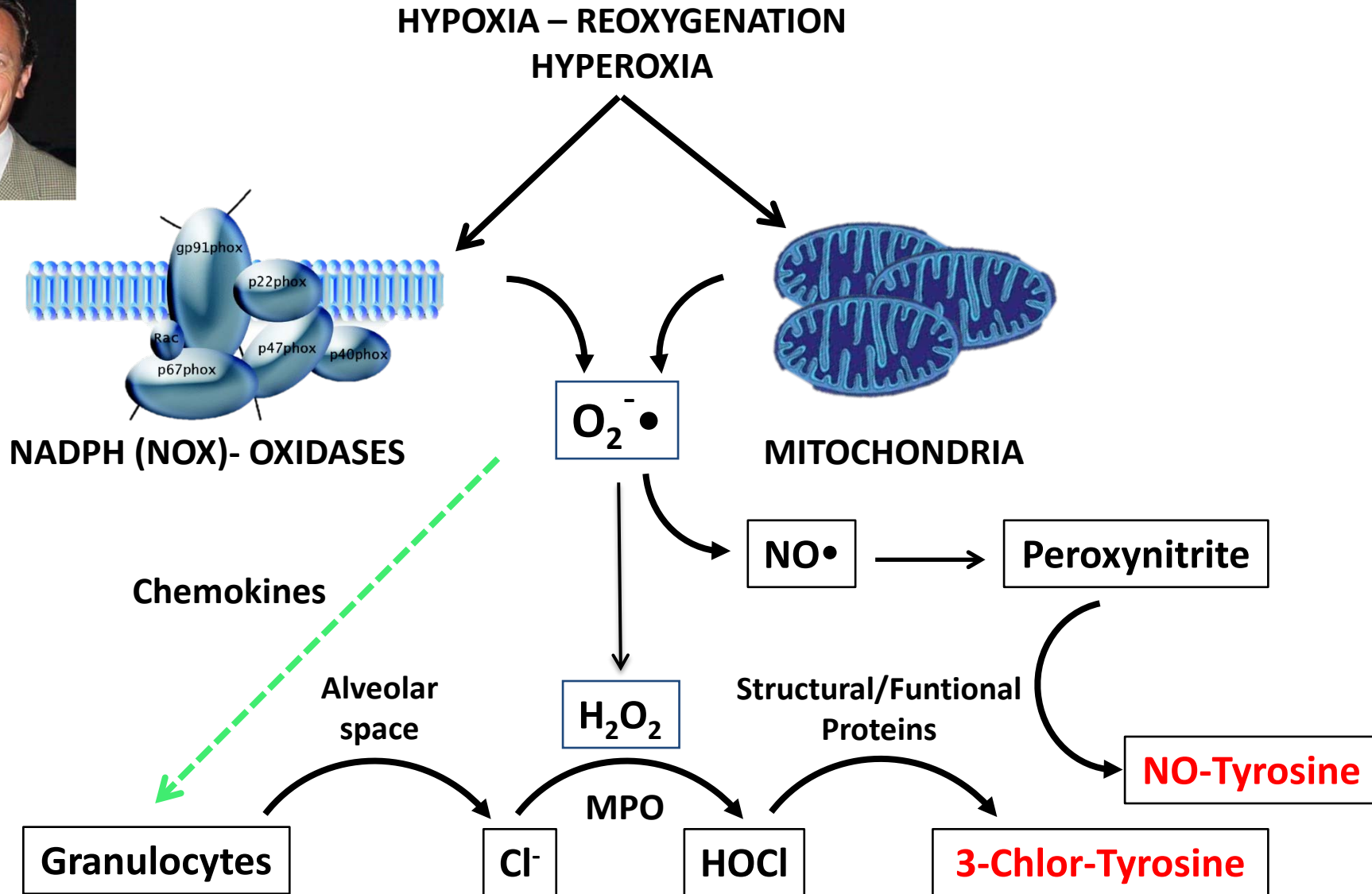


# ***Longer-term Effects of Intermittent Hypoxia [IH]±Hyperoxia on Respiratory System Resistance in Neonatal Mice***

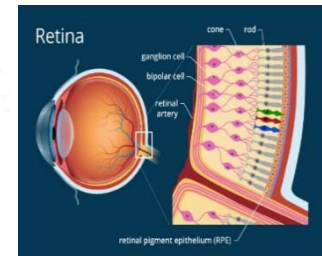
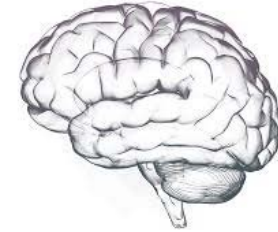
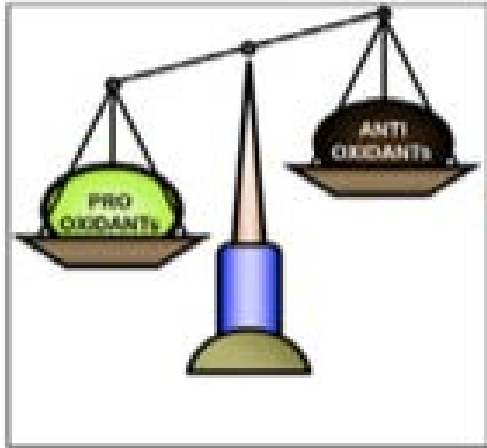




# Oxygen & Free Radicals: Protein Inflammation

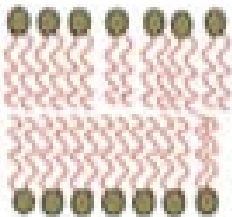


# Oxygen & Free Radicals: Lipid Peroxidation Biomarkers



Lipid peroxidation  
by-products

ROS



Docosahexanoic Acid



NeuroFurans (NeuFs)

Neuroprostanes (NeuPs)

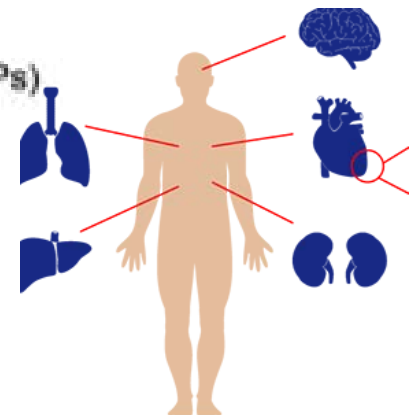
BRAIN

Arachidonic Acid



IsoFurans (IsoFs)

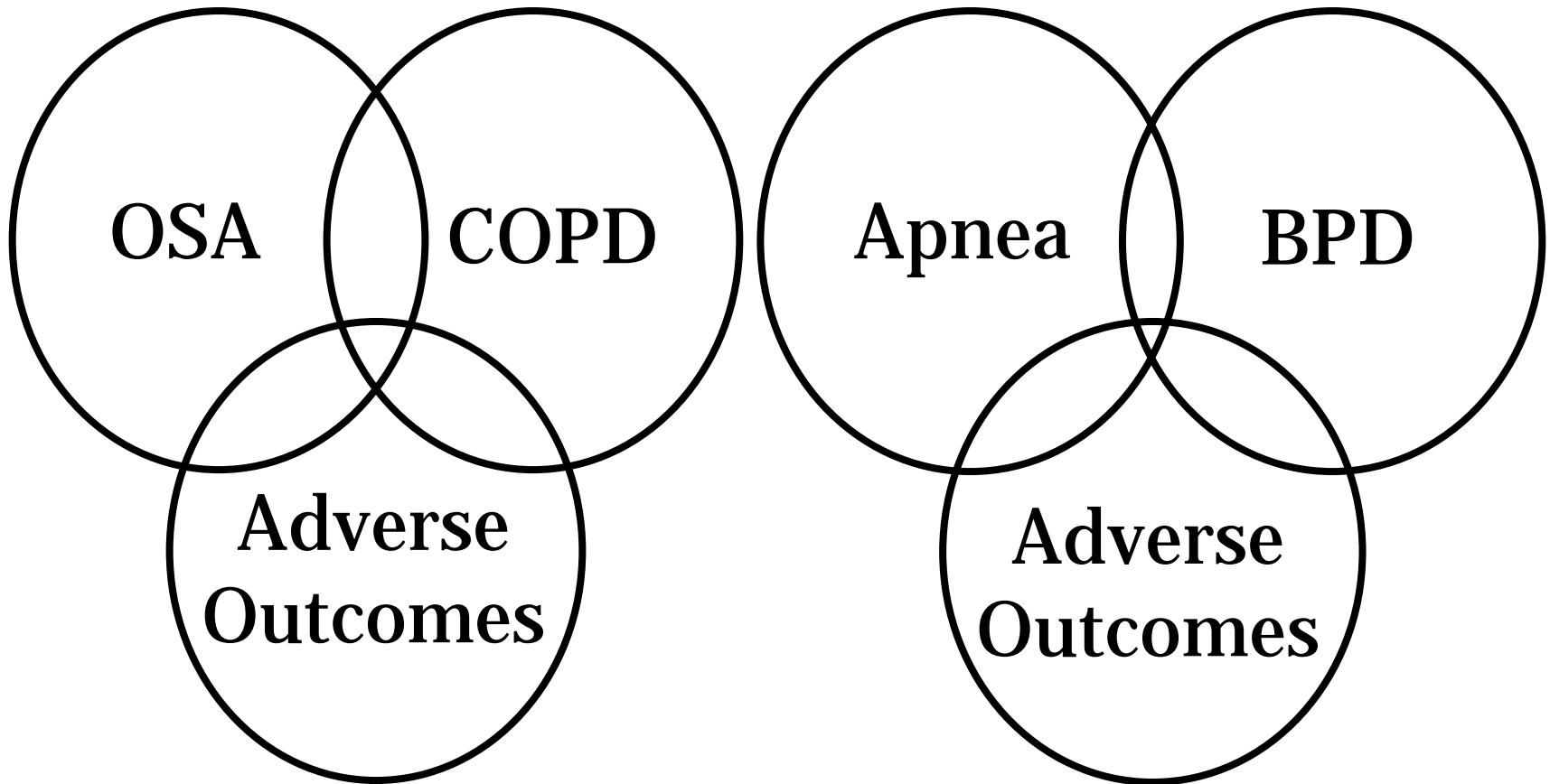
Isoprostanes (IsoPs)



# ***Rainbow Mouse Pup NICU***



# ***Potential Maturational Parallels?***

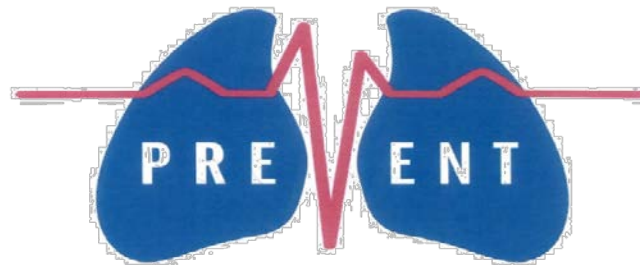


***Adults***

***Neonates***

# ***Prematurity-related Ventilatory Control [PreVent] 2016-***

An **NHLBI** sponsored multicenter observational study to investigate mechanisms of ventilatory control that contribute to the risk of respiratory morbidity in preterm infants



*Case Western • Northwestern • UAB  
Univ Miami • Washington Univ • UVA*

# Thank you to My Research Collaborators



*Catherine Mayer*



*Peter MacFarlane*



*Thomas Raffay*



*Juliann Di Fiore*



*Anna Maria Hibbs*



*YS Prakash*



*NHLBI, NICHD*