Fiscal Year:	FY 2016	Task Last Updated:	FY 02/03/2016
PI Name:	Hargens, Alan R. Ph.D.		
Project Title:	Fluid Distribution before, during and after l	Prolonged Space Flight	
Division Name:	Human Research		
Program/Discipline:	HUMAN RESEARCH		
Program/Discipline Element/Subdiscipline:	HUMAN RESEARCHBiomedical counte	ermeasures	
Joint Agency Name:		TechPort:	No
Human Research Program Elements:	(1) HHC :Human Health Countermeasures		
Human Research Program Risks:	 (1) Cardiovascular: Risk of Cardiovascular Outcomes (2) SANS: Risk of Spaceflight Associated N 		erse Mission Performance and Health
Space Biology Element:	None		
Space Biology Cross-Element Discipline:	None		
Space Biology Special Category:	None		
PI Email:	ahargens@ucsd.edu	Fax:	FY
PI Organization Type:	UNIVERSITY	Phone:	858-534-7837
Organization Name:	University of California, San Diego		
PI Address 1:	Altman Clinical and Translational Research	1 Institute	
PI Address 2:	9452 Medical Center Drive/0863		
PI Web Page:			
City:	La Jolla	State:	CA
Zip Code:	92037-0863	Congressional District:	52
Comments:			
Project Type:	FLIGHT	Solicitation / Funding Source:	2011 Crew Health NNJ11ZSA002NA
Start Date:	04/05/2013	End Date:	09/30/2018
No. of Post Docs:	1	No. of PhD Degrees:	
No. of PhD Candidates:		No. of Master' Degrees:	1
No. of Master's Candidates:	1	No. of Bachelor's Degrees:	3
No. of Bachelor's Candidates:	4	Monitoring Center:	NASA JSC
Contact Monitor:	Villarreal, Jennifer	Contact Phone:	281-483-7306
Contact Email:	jennifer.v311larreal@nasa.gov		
Flight Program:	ISS		
Flight Assignment:			
Key Personnel Changes/Previous PI:	February 2016: No changes.		
COI Name (Institution):	Arbeille, Phillipe (CERCOM) Chang, Douglas (University of California Gunga, Hanns-Christian (CHARITE - UN Liu, John (University of California, San I Macias, Brandon (University of Californi	NIVERSITATSMEDIZIN BERLIN Diego)	1)
Grant/Contract No.:	NNX13AJ12G		
Performance Goal No.:			
Performance Goal Text:			

Task Description:	SAME TITLÉ AND PRINCIPAL INVESTIGATOR. We will use state-of-the-art, non-invasive technologies to quantify upper-body compartmental volumes and pressures in crew members before, during, and after prolonged space flight. Importantly, we will correlate these data with vision deficits that occur in order to establish pathophysiologic mechanisms that will serve as a basis for future countermeasure development. After successful completion of our investigation, we will deliver a comprehensive database of microgravity-induced, head-ward volume and pressure changes (type and magnitude) and a prioritization of these changes as to their deleterious effects on vision in crewmembers during and after prolonged space flight. We are proposing a well-documented and validated battery of non-invasive or minimally-invasive, image-based tests developed to identify and quantify microgravity-induced, head-ward volume and pressure changes. We hypothesize that prolonged microgravity-induced, head-ward volume and pressure changes. We hypothesize that prolonged microgravity-induced, head-ward volume and pressure changes. We hypothesize that prolonged microgravity-induced, head-ward volume and pressure changes. We hypothesize that prolonged microgravity-induced, head-ward volume and pressure changes. We hypothesize that prolonged microgravity-induced, head-ward volume and pressure changes. We hypothesize that prolonged microgravity-induced, head-ward volume and pressure changes. We hypothesize that prolonged microgravity-induced, head-ward volume and pressure changes critical Path Roadmap Risks and Questions regarding "Risk of Microgravity-Induced Visual Alterations and Intracranial Pressure," specifically Integrated Research Plan (IRP) Gap Cardiovascular (CV) 7: How are fluids redistributed in-flight? and IRP Gap Vision Impairment and Intracranial Pressure (VIIP) 1: What is the etiology of visual acuity and ocular structural and functional changes seen in-flight and post-flight? Our first specific aim is to study periocular fluid volume	
	To our knowledge, this study will be the first to provide detailed and non-invasive measures of compartmental volume and pressure changes in the upper body induced by prolonged microgravity and to correlate these specific changes with decrements in vision for crewmembers. The proposed techniques represent the best available, state-of-the-art tools to quantify and document features that are clinically suspected as vision deficit generators. By correlating volume and pressure changes with vision problems, we expect to identify factors that will later motivate targeted development of effective physiologic countermeasures such as low-level lower body negative pressure exposure or thigh cuffs in space. This project has the potential to prevent loss of vision in crewmembers exposed to prolonged space flight and upon return to Earth.	
	NOTE: This study was merged with investigations from Dr. Michael Stenger (Distribution of Body Fluids during Long Duration Space Flight and Subsequent Effects on Intraocular Pressure and Vision Disturbance) and Dr. Scott Dulchavsky (Microgravity associated compartmental equilibration) resulting in a comprehensive study titled "Fluid Shifts Before, During and After Prolonged Space Flight and Their Association with Intracranial Pressure and Visual Impairment" (short title: Fluid Shifts).	
Rationale for HRP Directed Research:		
	Our proposed tests represent a comprehensive set of state-of-the-art, noninvasive technologies to quantify upper-body compartmental volumes and vascular parameters in crew members before, during, and after prolonged space flight. Importantly, we will correlate these data with vision deficits that occur in order to establish pathophysiologic mechanisms that will serve as a basis for future countermeasure development. After successful completion of our investigation, we will deliver a database of microgravity-induced, head-ward volume and vascular changes (type and magnitude) and a prioritization of these changes as to their deleterious effects on vision in crew members during and	
Research Impact/Earth Benefits:	after prolonged space flight. Finally, our project includes use of lower body negative pressure (LBNP), which is known to sequester fluid in lower body tissues and counteract head-ward fluid shifts. Importantly, these procedures have the potential to reduce intracranial pressure and counteract papilledema, even if the proposed countermeasure acts transiently. This research has immense Earth benefits such as development and validation of a noninvasive ICP device and greater understanding of glaucoma using the latest technology for measuring intraocular and intracranial pressures.	
Research Impact/Earth Benefits:	to sequester fluid in lower body tissues and counteract head-ward fluid shifts. Importantly, these procedures have the potential to reduce intracranial pressure and counteract papilledema, even if the proposed countermeasure acts transiently. This research has immense Earth benefits such as development and validation of a noninvasive ICP device and greater	
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Research Impact/Earth Benefits: Task Progress:	 to sequester fluid in lower body tissues and counteract head-ward fluid shifts. Importantly, these procedures have the potential to reduce intracranial pressure and counteract papilledema, even if the proposed countermeasure acts transiently. This research has immense Earth benefits such as development and validation of a noninvasive ICP device and greater understanding of glaucoma using the latest technology for measuring intraocular and intracranial pressures. We have made significant progress over the past year preparing applications and receiving approvals from the NASA-Johnson Space Center (JSC) and University of California San Diego (UCSD) Institutional Review Boards (IRBs). Moreover, we also made significant progress with optimizing and scheduling our pre-, in-, and post-flight tests to maximize their scientific value and to minimize impacts and risks to International Space Station (ISS) crew members. The "Fluid Shifts: Space Flight Study" was approved by the NASA JSC IRB. In addition, the "Fluid Shifts" study has been approved by the UCSD IRB. Moreover, we have received Japanese Space Agency (JAXA) IRB approval. To date our team has met with one another with the coordination of Erik Hougland, our flight project manager, who has led our bi-weekly Fluid Shifts (FS) team telecons. 	
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	Brandon Macias attended the 2015 Heidelberg Engineering Academy: Spectralis Hands-On Operation Course.
Bibliography Type:	Description: (Last Updated: 10/31/2023)
Abstracts for Journals and Proceedings	Lee PC, Siamwala JH, Macias BR, Hargens AR. "Tibial Bone Hemodynamics during Simulated Microgravity and Lower Body Negative Pressure." Presented at the 30th Annual Meeting of the American Society for Gravitational and Space Research, Pasadena, CA, October 22-26, 2014. 30th Annual Meeting of the American Society for Gravitational and Space Research, Pasadena, CA, October 22-26, 2014. , Oct-2014
Abstracts for Journals and Proceedings	Macias BR, Watkins W, Baird S, Clary E, Hargens AR. "Lower Body Negative Pressure Counters Simulated Microgravity-Induced Elevations of Intracranial Pressure and Jugular Vein Engorgement." 31st Annual Meeting of the American Society for Gravitational and Space Research, Alexandria, VA, November 11-14, 2015. 31st Annual Meeting of the American Society for Gravitational and Space Research, Alexandria, VA, November 11-14, 2015. , Nov-2015
Articles in Peer-reviewed Journals	Siamwala JH, Lee PC, Macias BR, Hargens AR. "Lower-body negative pressure restores leg bone microvascular flow to supine levels during head-down tilt." J Appl Physiol (1985). 2015 Jul 15;119(2):101-9. Epub 2015 Apr 30. http://dx.doi.org/10.1152/japplphysiol.00028.2015 ; PubMed <u>PMID: 25930022</u> , Jul-2015
Awards	Siamwala JH, Macias BR, Healey R, Hargens AR. "American Physiological Society Exercise & Environmental Physiology Section's National Space Biomedical Research Institute's Gravitational Physiology Beginning Investigator Award, April 2015." Apr-2015