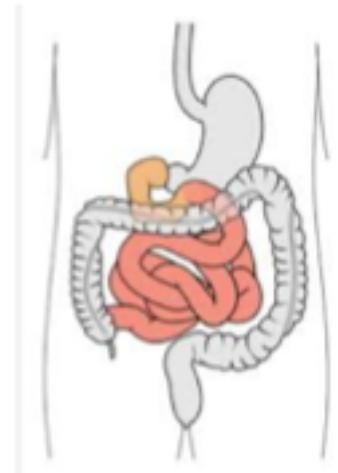
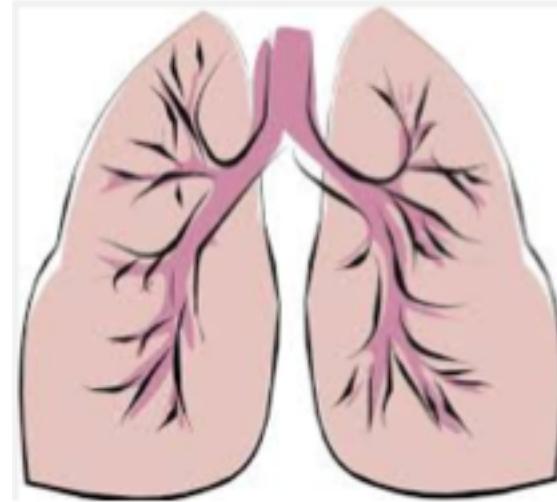
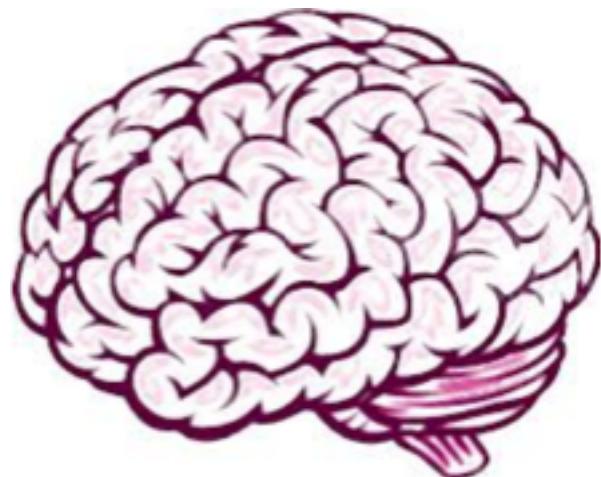


- **Big Headache Mountain**

- Himalayan peak where mountain sickness was first reported by Too Kin, a Chinese official in 37 BC

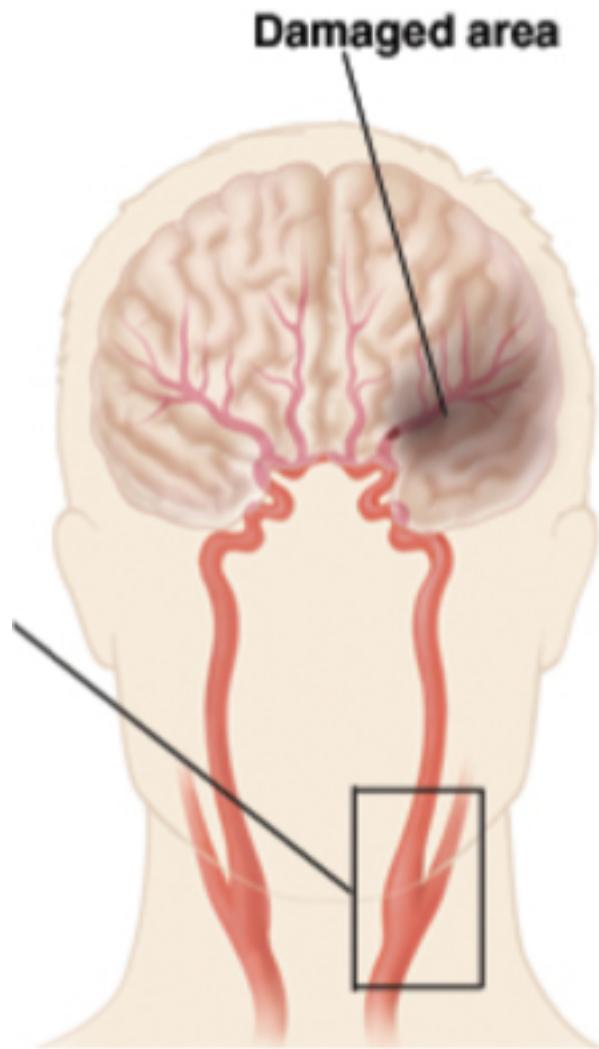


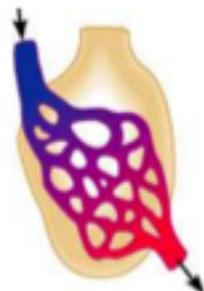
High Altitude Headache

- hypoxemia-induced intracranial vasodilation and subsequent cerebral edema
- acute hypoxia



Lopez et al. 2013 Curr Pain Headache Rep. 2013 Dec;17(12):383.
Imray et al. 2014 High Alt Med Biol. 2014 Apr;15(1):21-7.



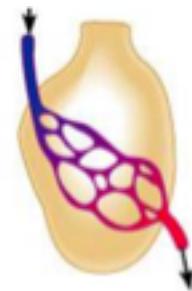


Reduced alveolar ventilation;
excessive perfusion

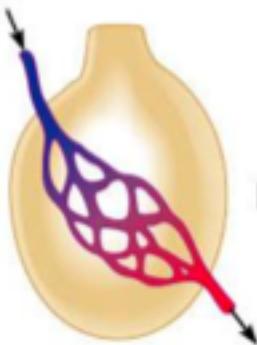
$\downarrow P_{O_2}$
 $\uparrow P_{CO_2}$
in alveoli



Pulmonary arterioles
serving these alveoli
constrict



Reduced alveolar ventilation;
reduced perfusion

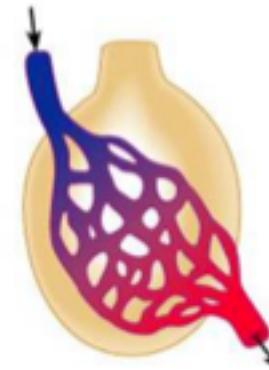


Enhanced alveolar ventilation;
inadequate perfusion

$\uparrow P_{O_2}$
 $\downarrow P_{CO_2}$
in alveoli



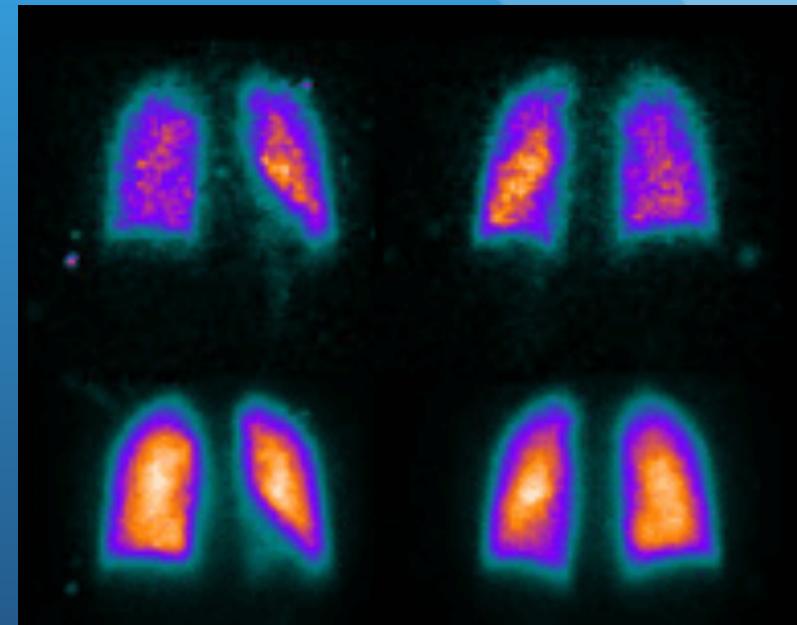
Pulmonary arterioles
serving these alveoli
dilate



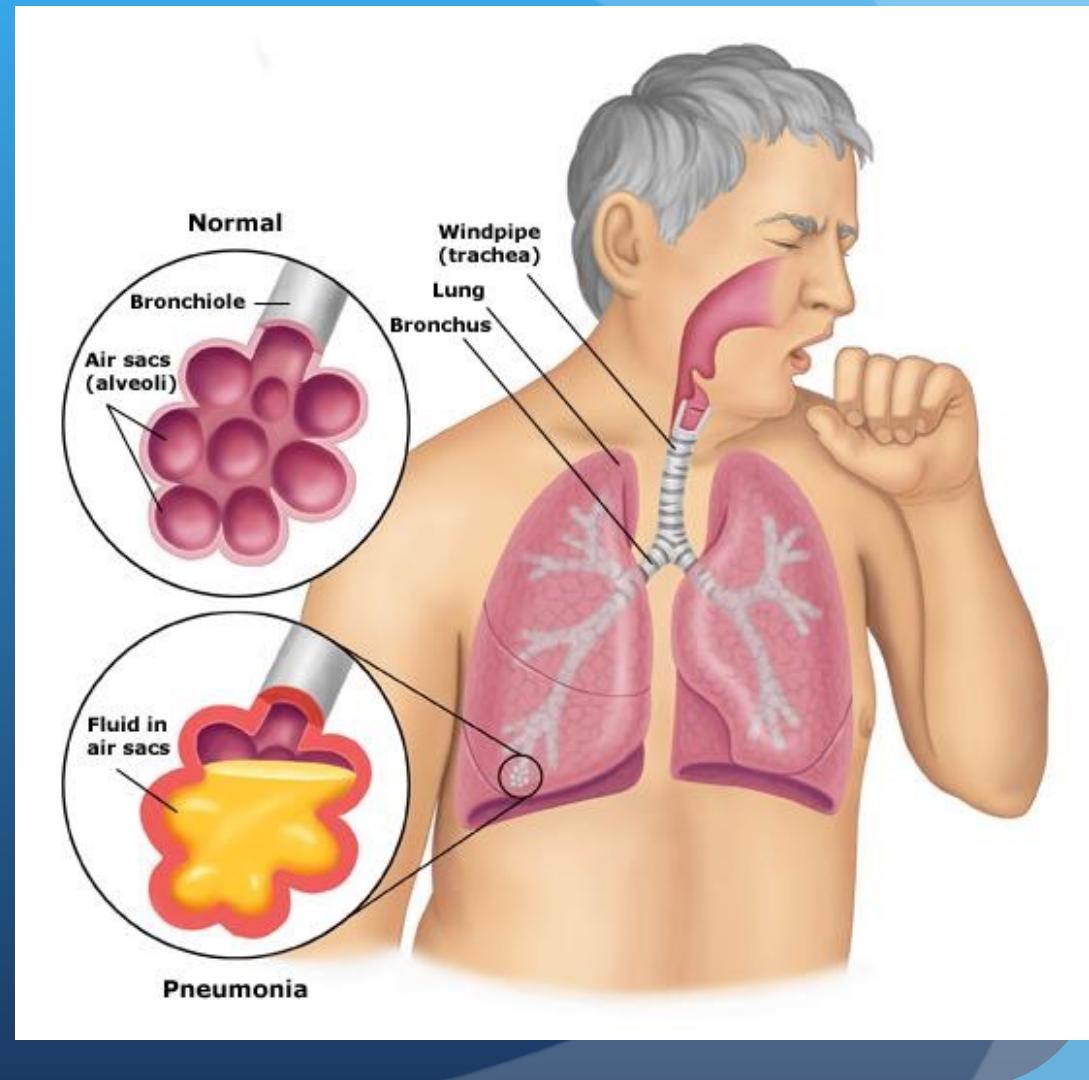
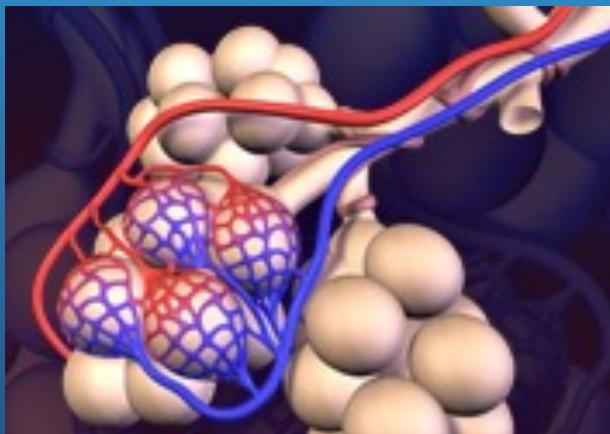
Enhanced alveolar ventilation;
enhanced perfusion

V/Q matching - maintains blood oxygenation

- Air flow and blood flow
- Moves blood towards normal part of lung to maintain normal oxygen levels in arteries.



Vasoconstriction & Pneumonia



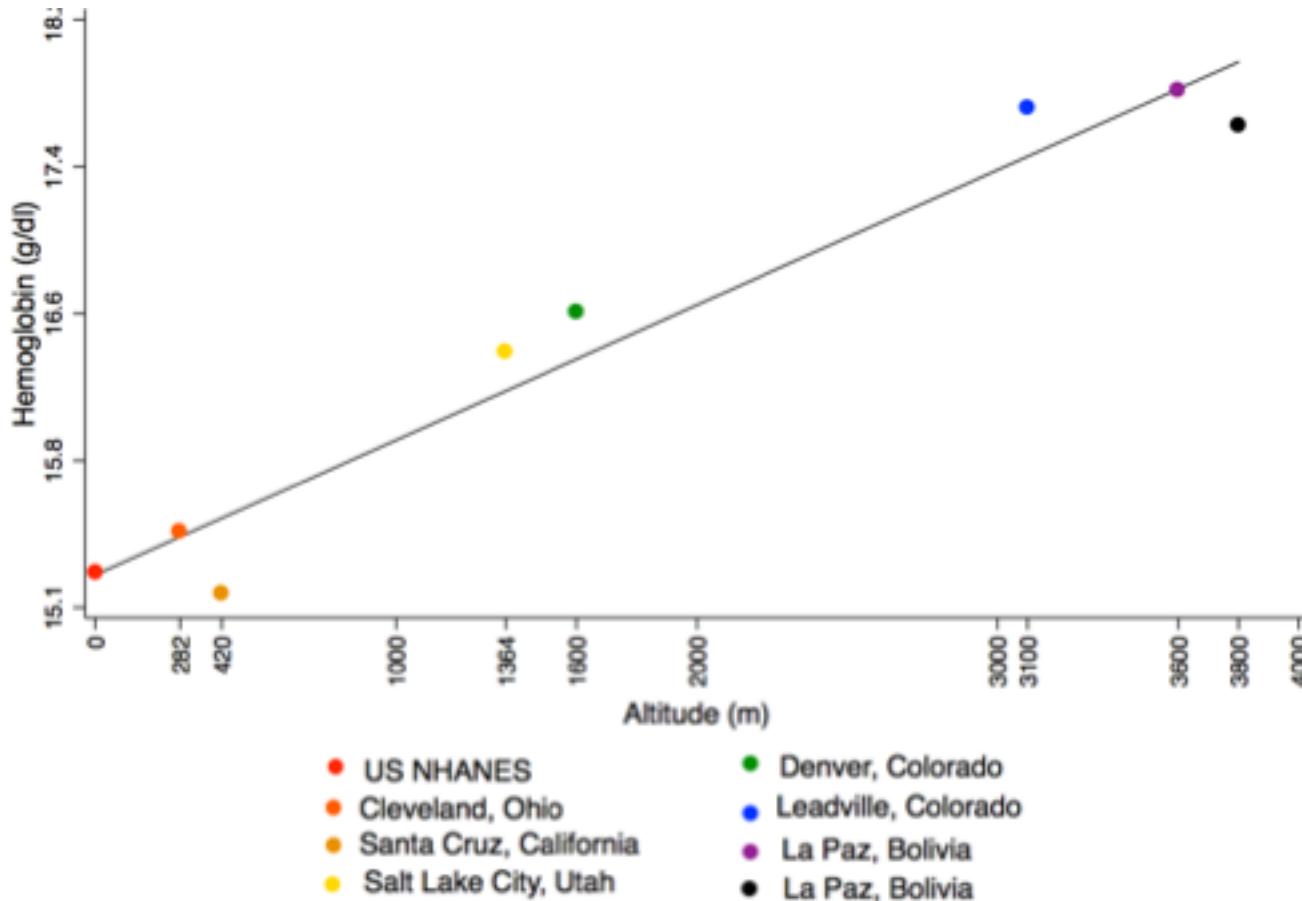
High Altitude Pulmonary Edema

- Lung vessels shrink, pressure goes up, fluid leaks





Hemoglobin and altitude



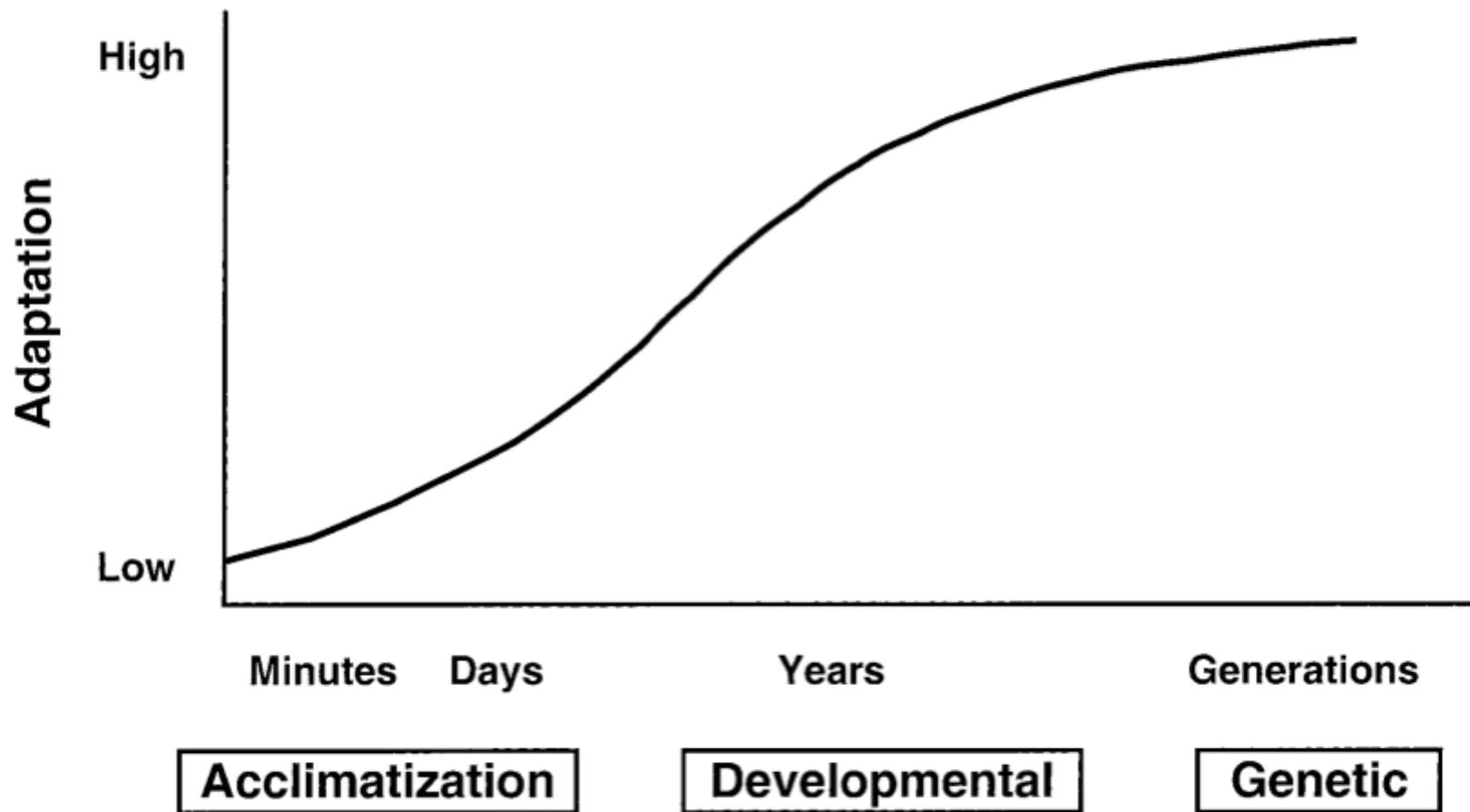


FIG. 1. Adaptation to high altitude in relation to time.

Andes





Males

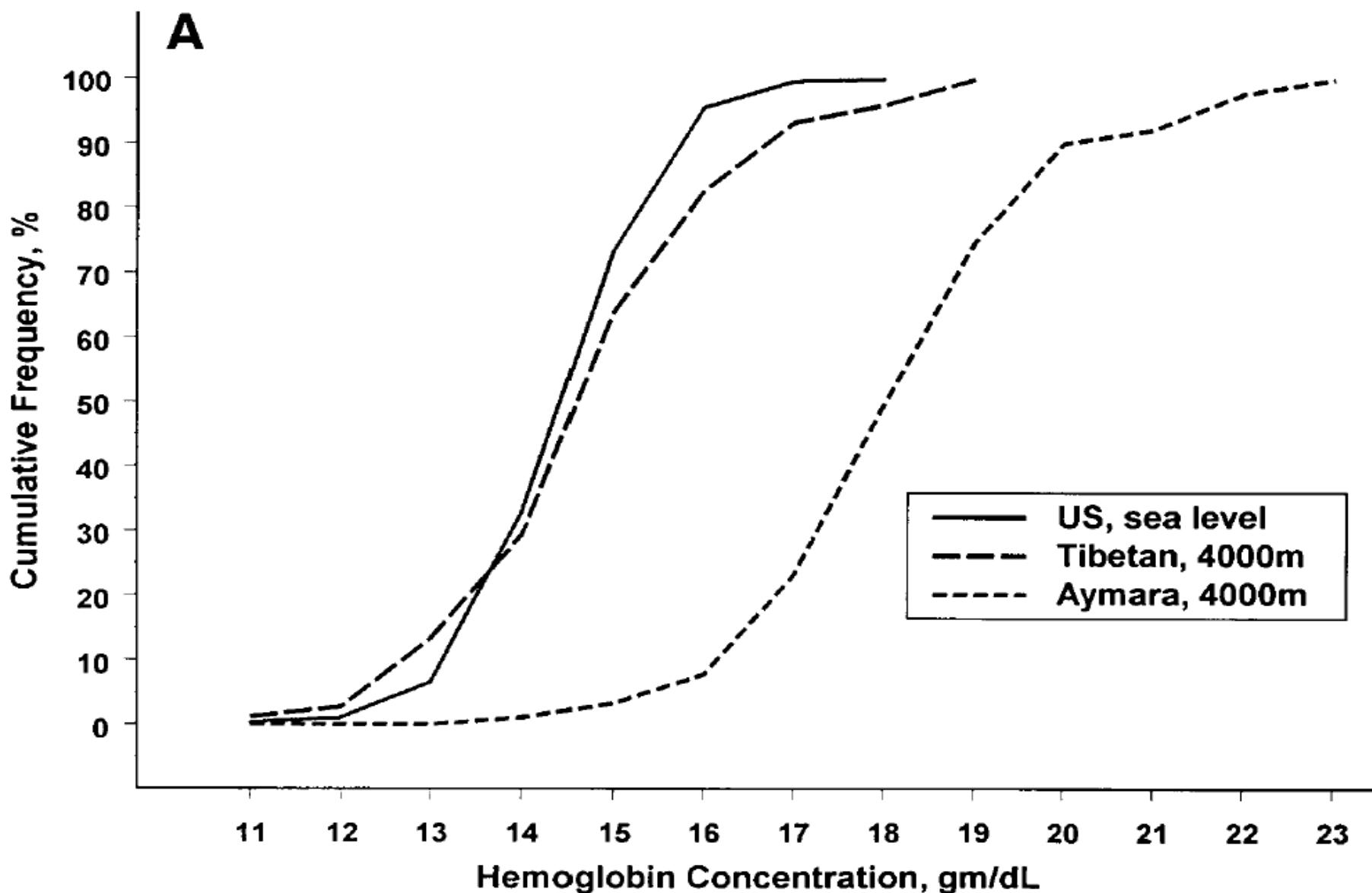
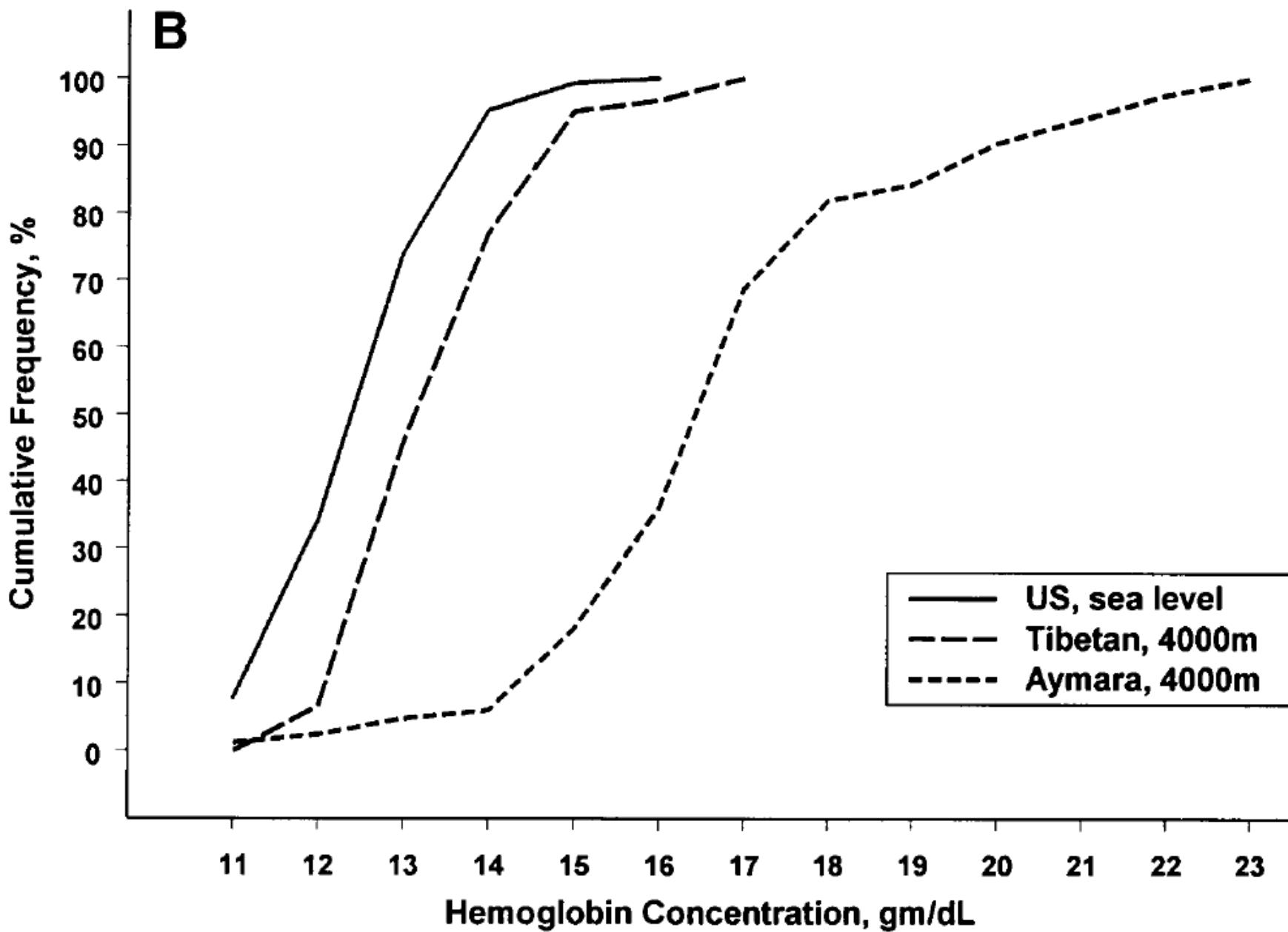


Fig. 4. Cumulative frequency distribution of United States, Tibetan, and Aymara hemoglobin concentrations. **A:** Males. **B:** Females.

Females



SCIENCE

Vol. 95

FRIDAY, JANUARY 23, 1942

No. 245

LIFE IN THE ANDES AND CHRONIC MOUNTAIN SICKNESS

By Dr. CARLOS MONGE

UNIVERSITY OF SAN MARCOS, LIMA, PERU

Tibet

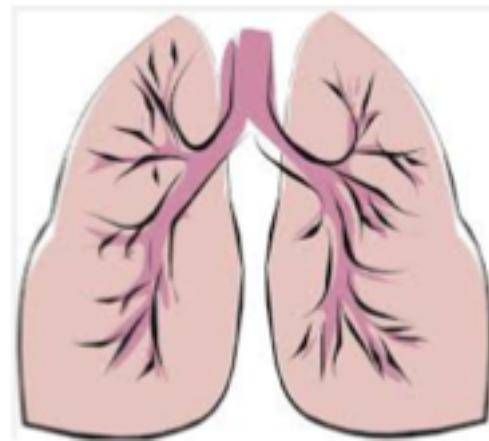


Richard I'Anson

Moore LG, et al. Human adaptation to high altitude: regional and life-cycle perspectives. *Am J Phys Anthropol.* 1998;Suppl 27:25-64

Who is more likely to suffer mountain sickness?





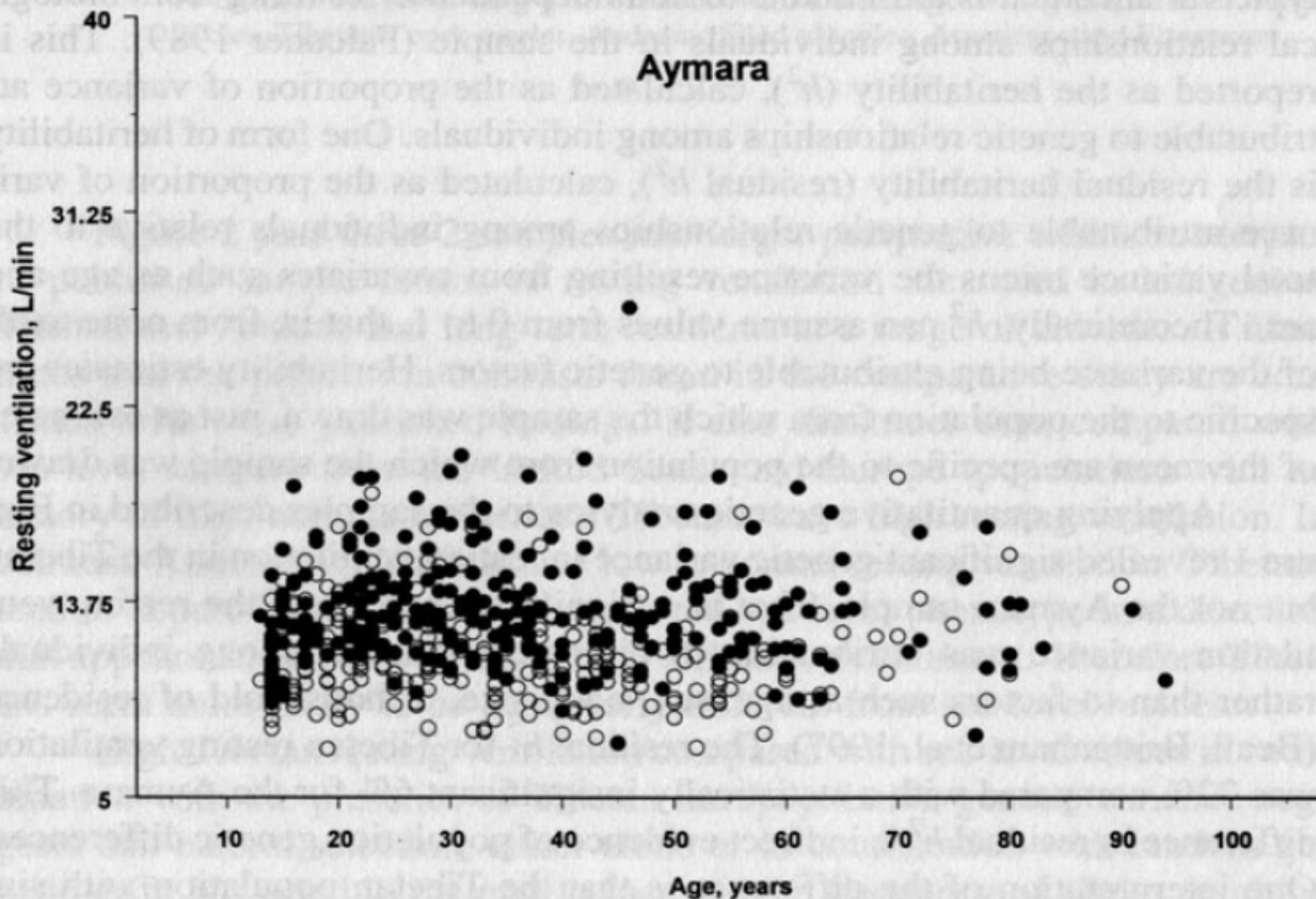
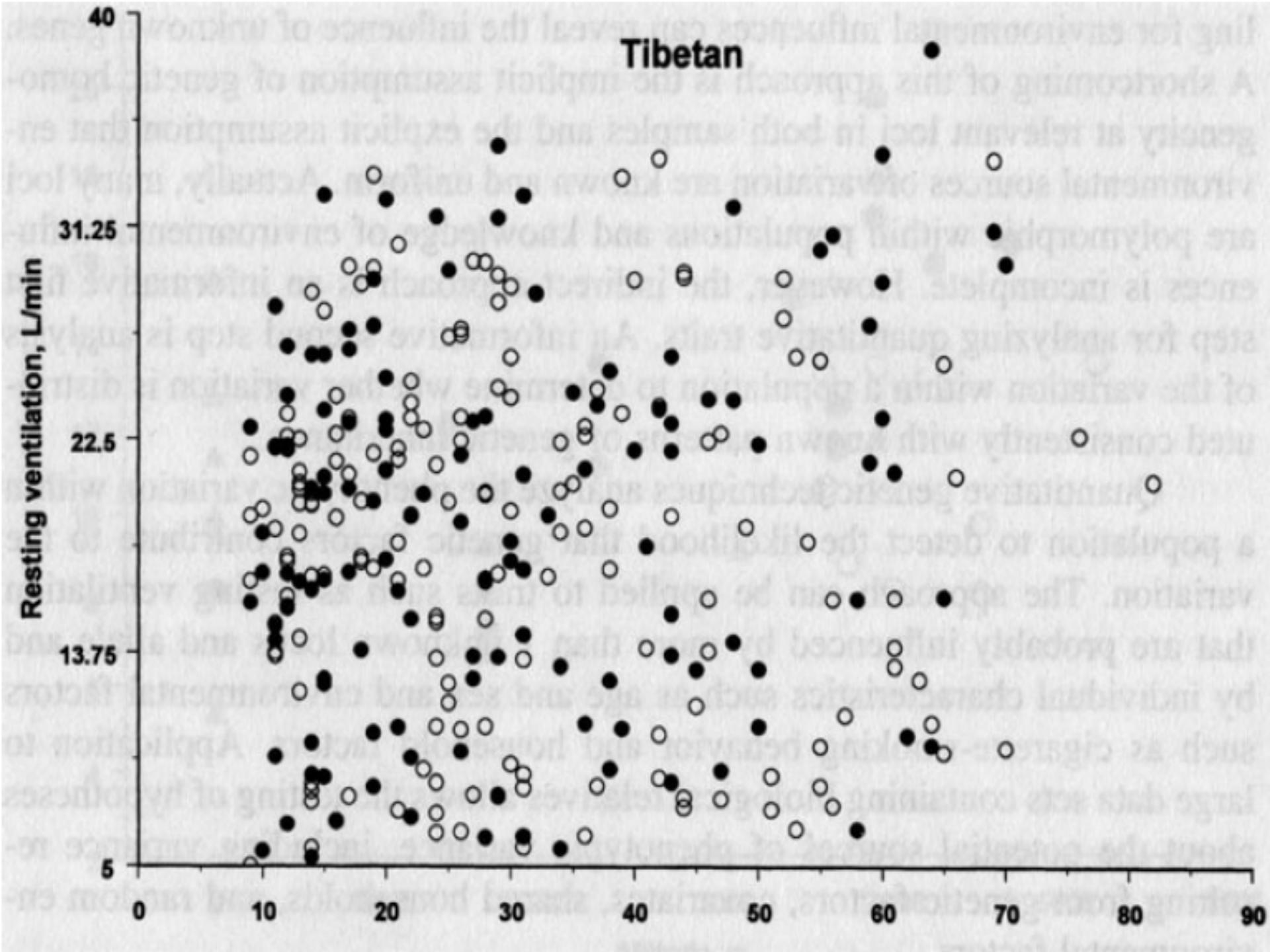


Figure 1. Scatterplot of resting ventilation with age comparing Tibetan and Aymara high-altitude natives at a median altitude of 4,000 m. Filled circles, males; open circles, females.

Tibetan





Minimal hypoxic pulmonary hypertension in normal Tibetans at 3,658 m

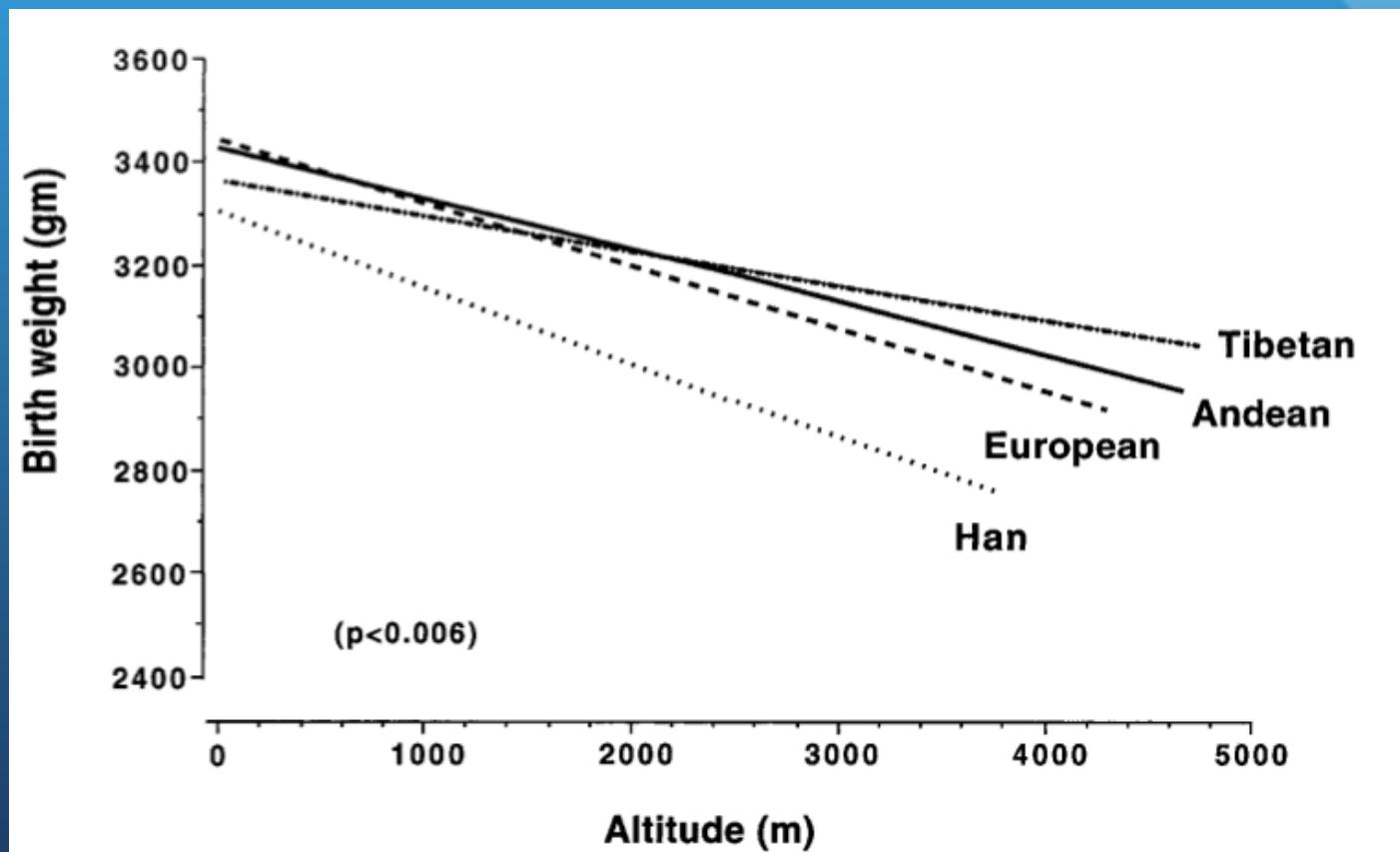
B. M. Groves, T. Droma, J. R. Sutton, R. G. McCullough, R. E. McCullough, J. Zhuang, G. Rapmund, S. Sun, C. Janes, L. G. Moore
Journal of Applied Physiology Published 1 January 1993 Vol. 74 no. 1, 312-318 DOI:

Tibetan adaptations to altitude

- Higher oxygen uptake
- greater ventilation
- larger lung volumes
- better quality of sleep
- lower incidence of acute mountain sickness

Tibetan vs. Han Chinese

- Babies were born 600 g heavier after adjusting for gestational age and maternal parity.



Ethiopia



photo Dukem Restaurant



Ethiopians

- Ethiopian highlanders living at 3,530 meters (11,580 feet)
- Unlike Tibetans- they don't breathe more rapidly and aren't able to more effectively synthesize nitric oxide
- Unlike the Andeans- they don't have higher hemoglobin counts

Ethiopians insensitive to hypoxia

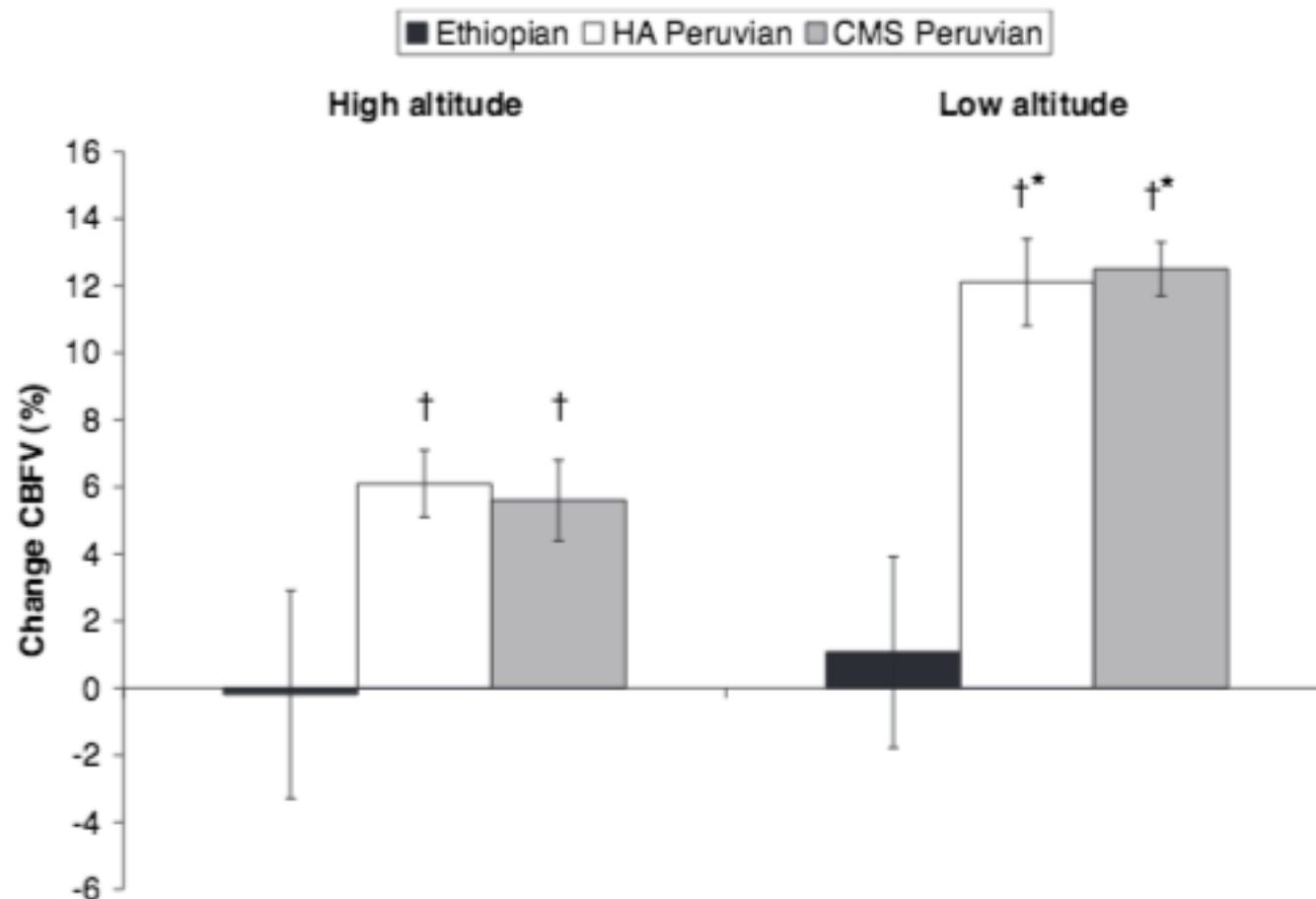


Figure 2. Cerebrovascular responses to normocapnic hypoxia.

Claydon, Victoria E., et al. Cerebrovascular responses to hypoxia Stroke 39.2 (2008): 336-342.

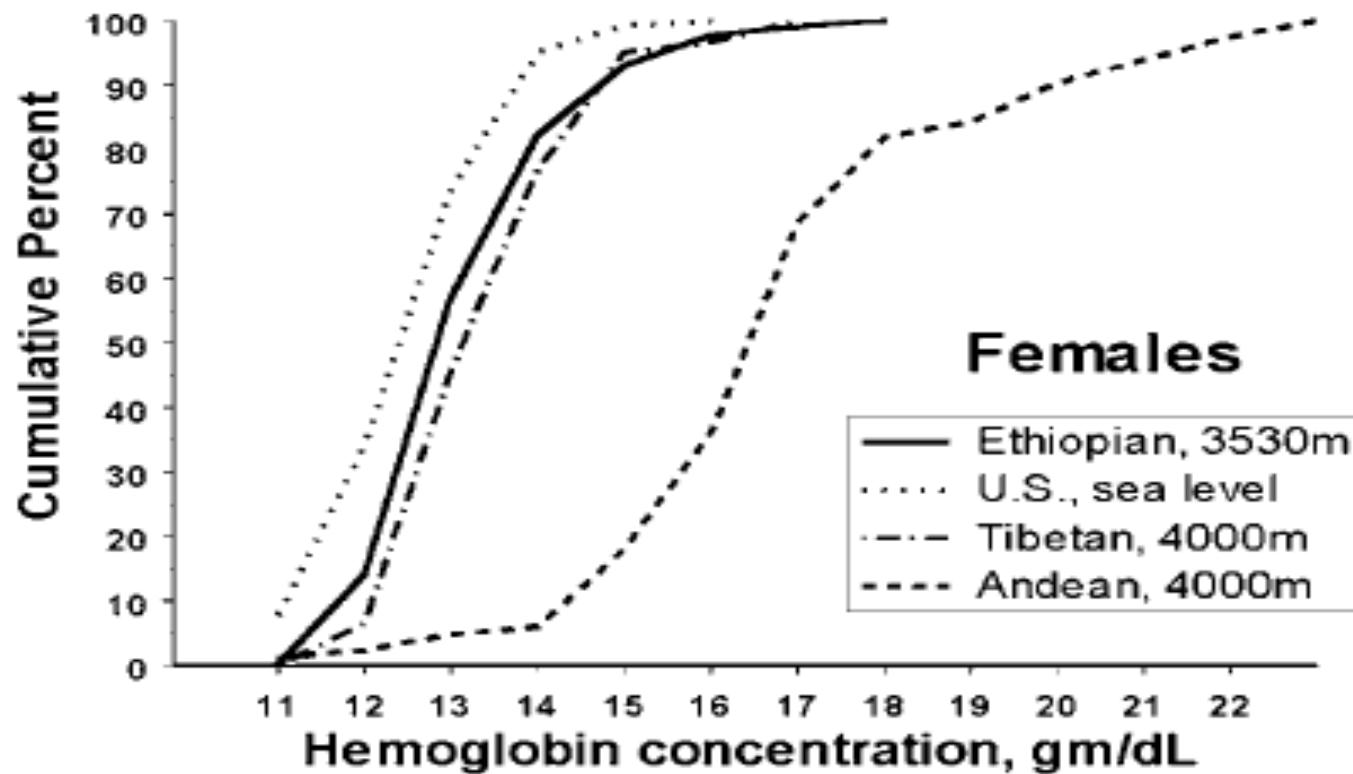


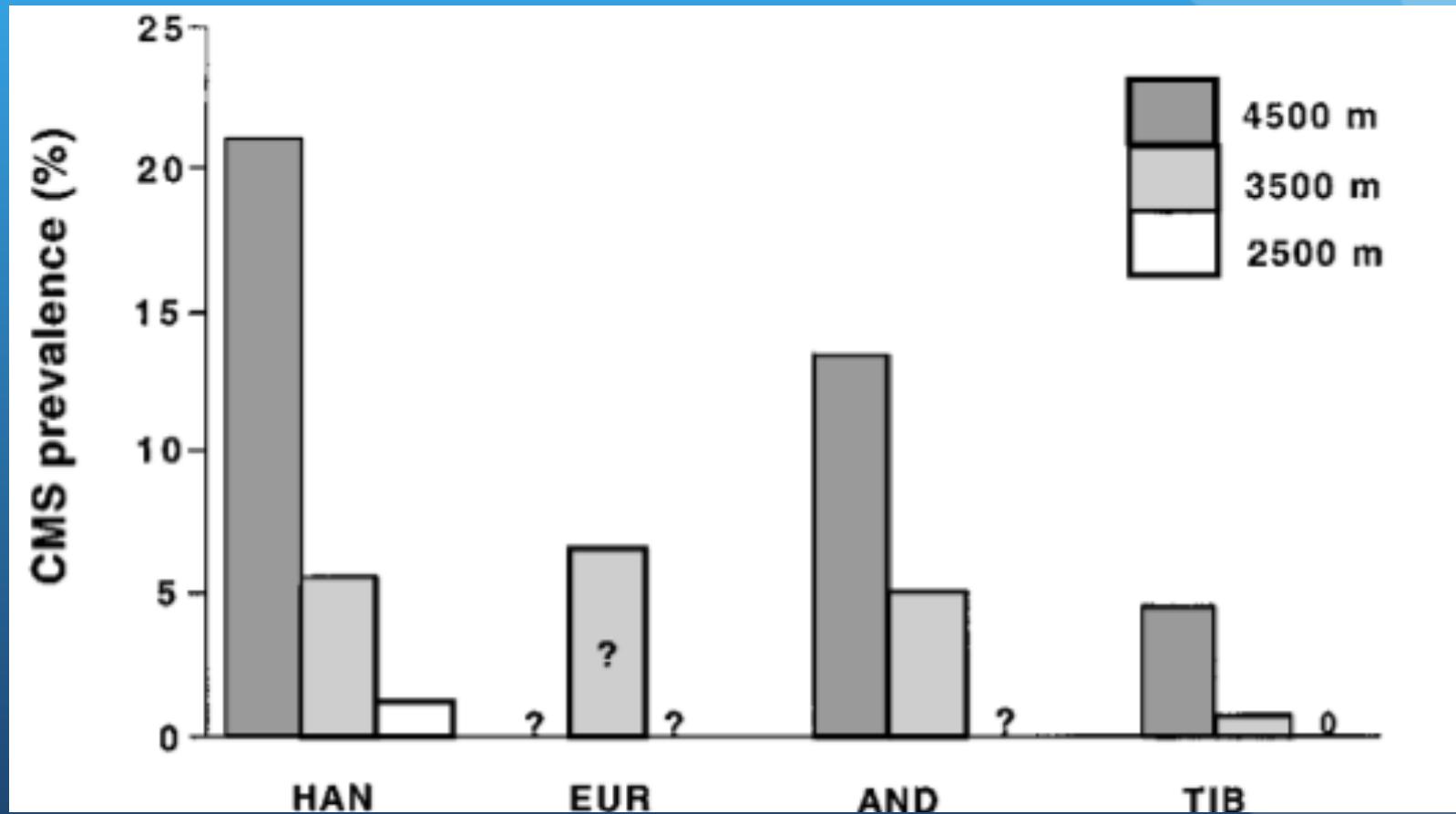
Fig. 2. Hemoglobin concentration distributions of U.S. sea level and Ethiopian and Tibetan high-altitude females coincide and contrast with the higher hemoglobin concentrations of Andean females. Shown is the cumulative frequency distribution of hemoglobin concentration of Ethiopian high-altitude, U.S. sea level, and Tibetan and Andean high-altitude females.

Table 1. Three patterns of adaptation to high-altitude hypoxia are identified by comparing the presence (+) or absence (–) of erythrocytosis and arterial hypoxemia

	Partial pressure of inspired oxygen, % of sea level	Erythrocytosis	Arterial hypoxemia
Sea level	100	–	–
Ethiopian	64	–	–
Tibetan	60	–	+
Andean	60	+	+

Data were obtained by using the mean values of hemoglobin concentration and oxygen saturation of hemoglobin of sea level populations as a point of reference, published values from Andean and Tibetan high-altitude populations at 4,000 m (12, 17, 18), and the present Ethiopian sample.

Chronic Mountain Sickness





Cold

- ADRA2A
- ADRA2C

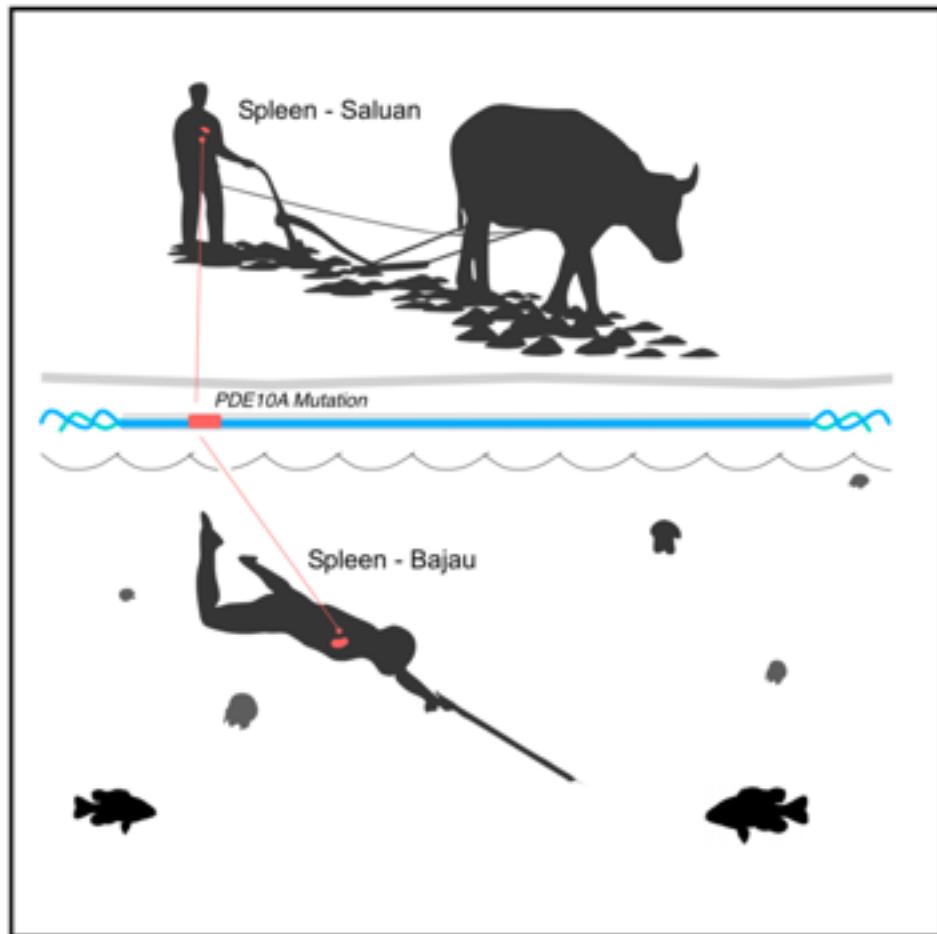






Physiological and Genetic Adaptations to Diving in Sea Nomads

Graphical Abstract



Authors

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Thorfinn S. Korneliussen, ...,
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In Brief

Genetic and physiological adaptations enable the remarkable breath-holding ability of marine nomads.

An ethnic group of Malay origin, the Bajau Laut have lived almost entirely at sea for centuries. They are some of the last true nomads of the ocean.



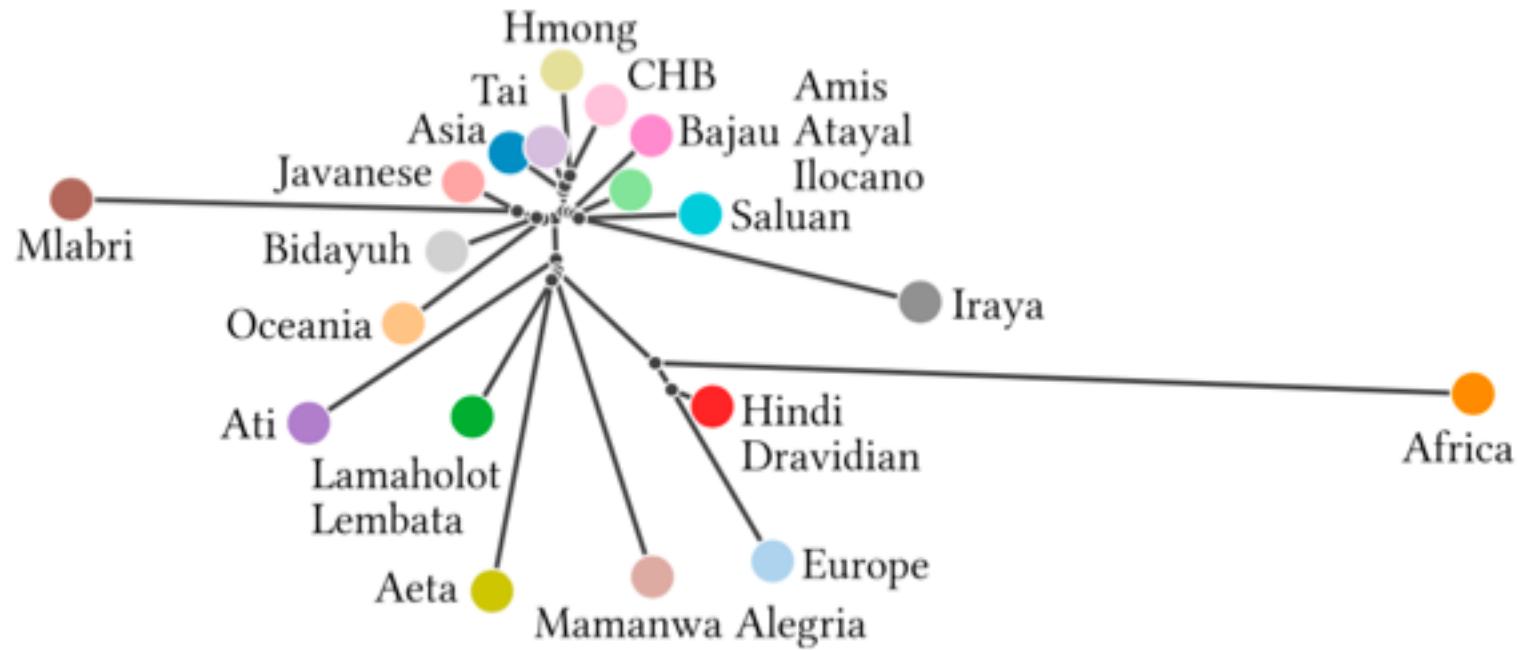
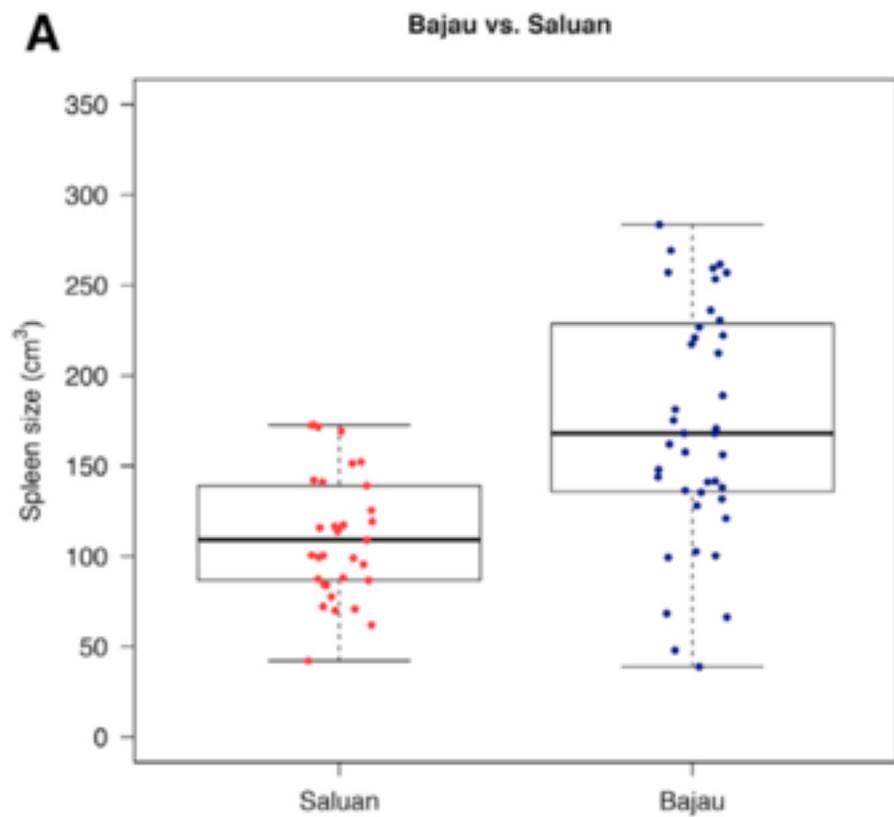


Figure 3. Pan-Asian Admixture and Tree Estimate for $K = 19$, Where Bajau and Saluan Receive Their Own Unique Components
See also [Figure S4](#).

A**B**