

# Meridian DPA-Interpreting the Results

This diagram shows where you will find the numbers needed to fill out the form and gather the important information from the test. Print out these sheets and fill in the information.



## PTG Analysis Report

Patient Information				Diagnosis	
Chart No.	00001			Chief Complaint	
Name	Test Patient				
Sex	M	Age	56		
Birthday	1958-01-01	Visit	2014-12-27		

Analysis Data			
PTG Analysis		APG Analysis	
HR	70	DE I	0.15
ET	1.09	ETc	291 ms
PH	0.76	PH	1.54
EE I	0.61		
DDI	0.24		
a - b	85	b / a	-0.6
a - c	155	c / a	-0.29
a - d	185	d / a	-0.3
a - e	275	e / a	0.32
		AI	-0.33

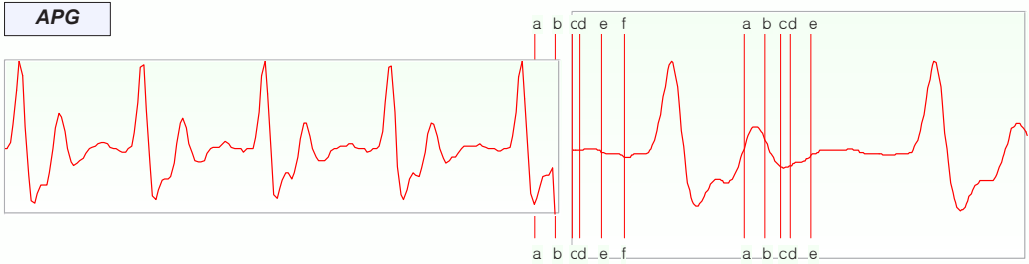
Circulation Analysis	Analysis Result																										
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**3. Heart Rate**

**2. Ejection Time**

**4. Pulse Height**

PTG	APG
	

**1. Recognition**

**6a. EEI**

**6b. DDI**

**6c. DEI**

**7. APG Type**

**5. PTG Form Regular? Notch?**

\*The Digital Pulse Analyzer is an information tool only. Final medical diagnosis is the sole responsibility of a licensed health care practitioner.\*

For Additional Information on the Meridian DPA, Sales or Service  
Please Call (210)-601-1050 or visit [www.digitalpulseanalyzer.com](http://www.digitalpulseanalyzer.com)

## Digital Pulse Wave Analyzer Test -Interpretive Guide

Patient Name: \_\_\_\_\_

Date \_\_\_\_\_

Age related changes in the arteries are implicated in the development of cardiovascular disease. These changes promote arterial stiffening which contributes to hypertension. At the same time, age-related changes also make it easier for fatty deposits to build up on the inside of the arteries. In some people these changes occur at an accelerated rate and in others, they occur much more slowly. Epidemiological studies have consistently shown that people with the greatest amount of arterial stiffening and thickening are at the highest risk for cardiovascular disease. The Digital Pulse Wave Analyzer (DPA) provides information on arterial wall stiffness and estimates the biological age of arteries. The Pulsewave analyzes and provides an assessment of how the walls of the arteries expand and relax when the heart beats and the blood travels through the arteries.

**1. Recognition** \_\_\_\_\_/\_\_\_\_\_ *pulsewaves*=\_\_\_\_\_ % **Normal 80% to 100%**

Poor Recognition may be the result of an irregular heartbeat, poor peripheral (microvascular) circulation, cold hands, acrylic nails and nail polish. Below 80% test is considered invalid.

**2. Etc** \_\_\_\_\_ (*Ejection Time*) **Normal: 260-380ms**

This is the time in milliseconds it takes the left ventricle to finish its contraction before the aortic valve closes.

**Where Low** < 260ms: Sometimes seen with anxiety or with hyperthyroid.

**Where High** > 380ms: May indicate it is taking longer for the left ventricle to finish its contraction and is sometimes seen in patients with aortic stenosis (valve opening is narrowed)

**3. HR** \_\_\_\_\_ (*Heart Rate*) **Normal: 60-100 BMP**

This is the Resting Heart Rate.

**Where Low:** Well conditioned athletes, metabolic disturbances, medication, aging, pre-existing heart disease.

**Where High:** Exercise, high anxiety, excitement, fever, high blood pressure, low blood pressure, anemia, panic disorder, nicotine, caffeine, some medications.

**4. PH** \_\_\_\_\_ (*Pulse Height*) **Normal: 2.0 - 8.0**

How much pressure and volume with each heartbeat, this value will vary throughout the day and with each heartbeat.

**Where Low:** Low blood pressure, hypothyroidism, dehydration, adrenal fatigue.

**Where High:** Heavy exercise, pregnancy, fever, anxiety, high blood pressure, fluid overload, hyperthyroidism, anemia.

5 PTG Waveform \_\_\_\_\_ (Regular or Irregular)

Notch \_\_\_\_\_ Yes/No

This is the arterial pulse waveform resulting from the ejection of blood from the left ventricle and moves with a velocity much greater than the forward movement of the blood itself.

**Normal:** A regular pattern with a dicrotic notch indicating younger arterial elasticity.

6. Circulation Analysis Section (PTG Waveform) Indicates arterial elasticity.

6a. EEI: = \_\_\_\_\_ (Ejection Elastic Index) Large Arteries. Normal: 0.4 to 0.8

Measuring potential atherosclerosis or plaque build up in the arteries.

**Where Low:** Indicates that there is loss of elasticity in the large arteries. Frequently there is a history of high blood pressure or high cholesterol although not always seen. Studies have shown hormonal influences contribute to stiffer large vessels in menopausal women and menopause amplifies the age-dependent increase in arterial stiffness.

**Where High:** Indicates dilation in the artery. May be elevated by pharmaceuticals and some nutritional supplements. May also be seen in well-conditioned athletes, people with anemia and some heart conditions.

6b. DDI: = \_\_\_\_\_ (Dicrotic Dilation Index) Small Arteries Normal: 0.2 to 0.4

**Where Low:** May be due to arterial wall stiffness, hypertension, and the body's stress hormones. If a good notch is seen in the waveform, a decrease is probably due to stress hormones. Caffeine and smoking may also temporarily increase elasticity in small arteries.

**Where High:** May be due to pharmaceuticals for high blood pressure, some nutritional supplements or acute anxiety. Also may be seen in well conditioned athletes.

6c. DEI: = \_\_\_\_\_ (Dicrotic Elastic Index) Peripheral Arteries

**Where Low:** Constriction due to emotions, dehydration, caffeine, nicotine. If pulse height is also low it is more likely to be dehydration. This index rarely comes into the normal range due to the preceding.

**Where High:** Dilation of arteries due to nutritional supplements, pharmaceuticals.

7. APG Waveform

AI: \_\_\_\_\_ (Aging Index) Letter Grade \_\_\_\_\_ (+20-40)(50-60)(-70-80)

APG Assigns an estimate of the biological age to the arteries according to the letter pattern by measuring differences within the secondary waveform. Normal Aging pattern are A,B,D,F,G.

**A= 20 Years | B= 30 Years | D= 50 Years | F= 70 Years | G=80 years (+/-5 years)**

The letter C or E is generally seen in people with known hypertension, valve problems or in menopausal women. The number in brackets is not the biological age, but rather is used to scale the letter grade. For example a "D" (72) is not as young as a "D" (65).