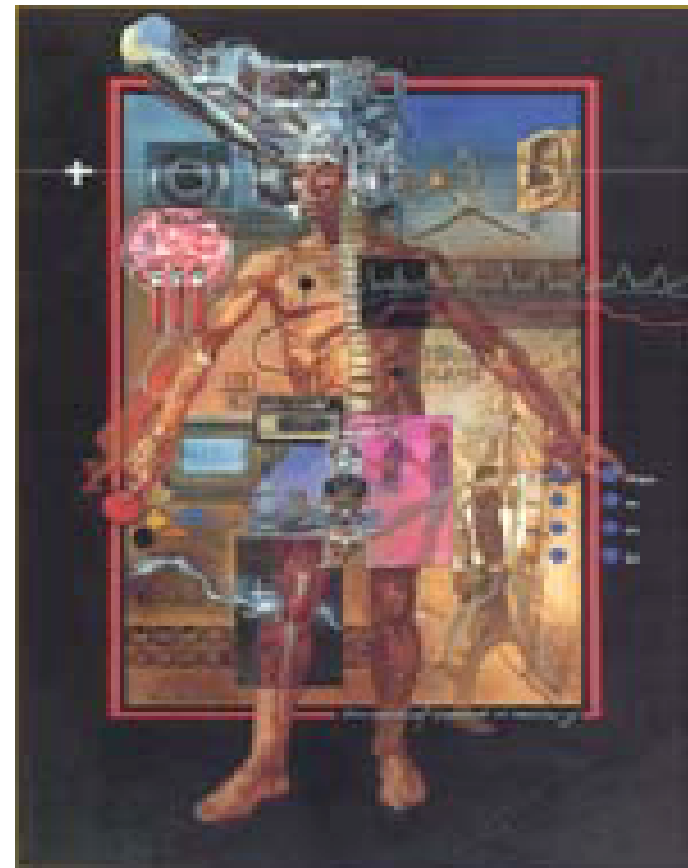


Human Physiology in Space

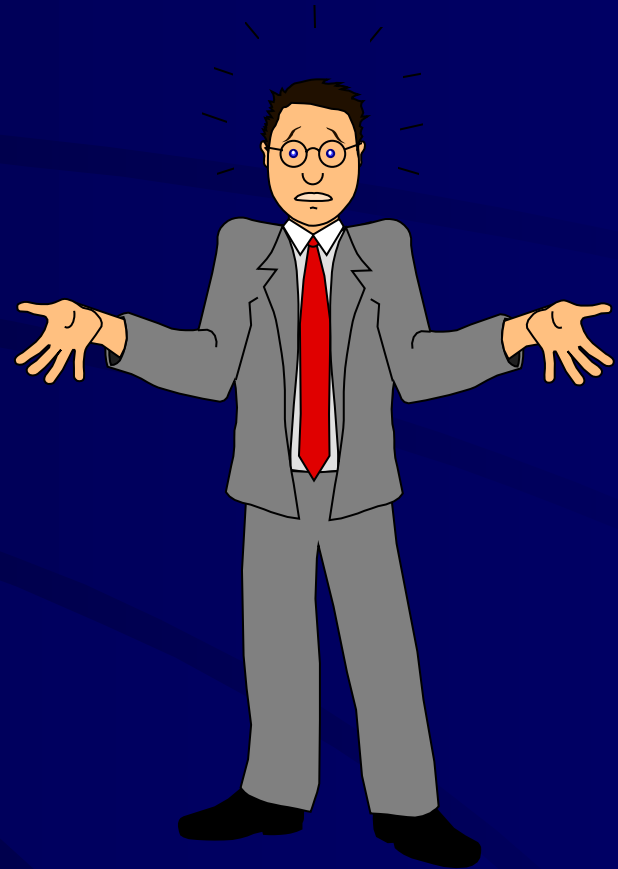
An Introduction

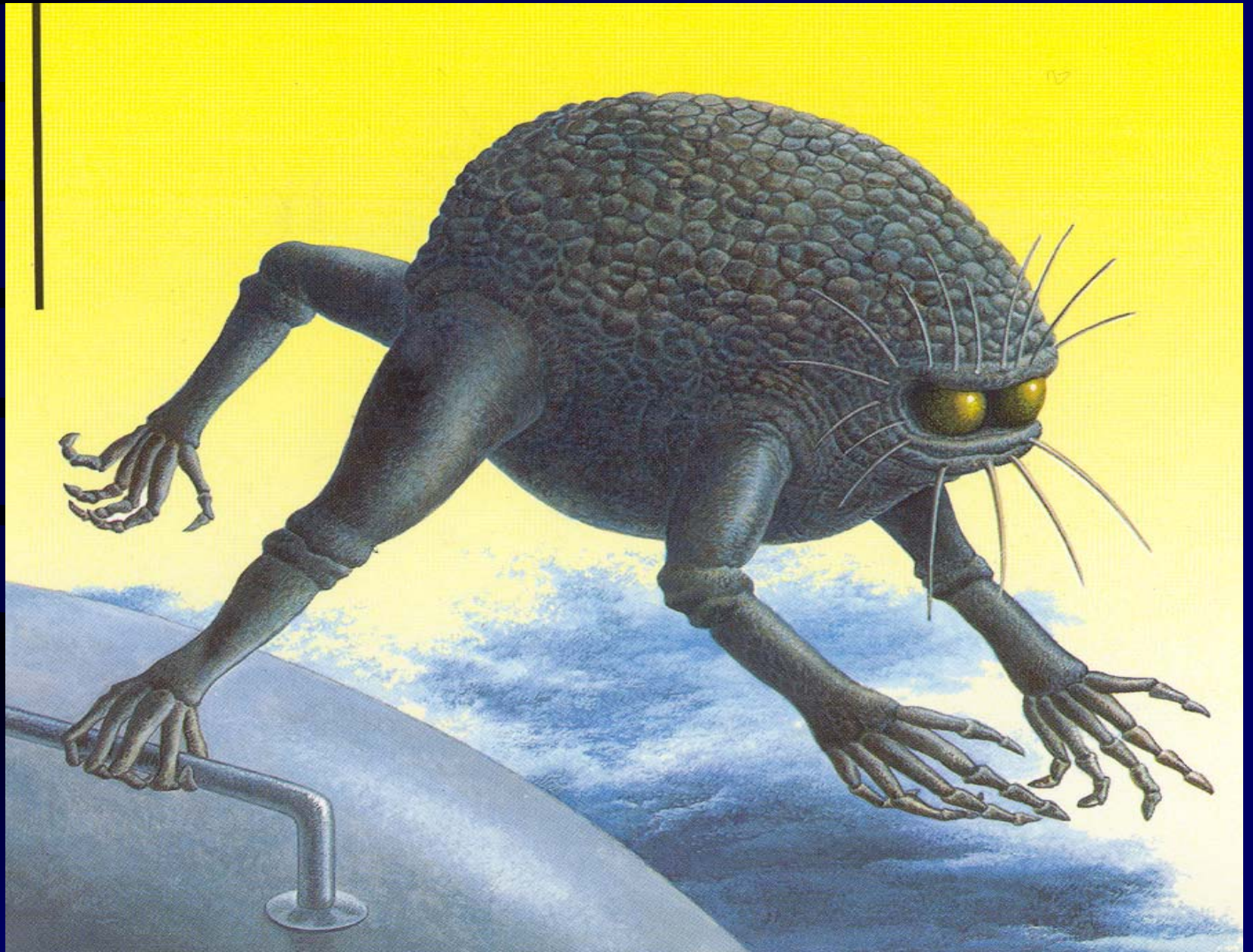
- First - (Gagarin 1961)
- Endurance - (Polyakov, 440 d)
- Farthest (Apollo)
- Oldest (Glenn, 77)



Space Physiology

- [Www.nsbri.org/human](http://www.nsbri.org/human)
Physspace





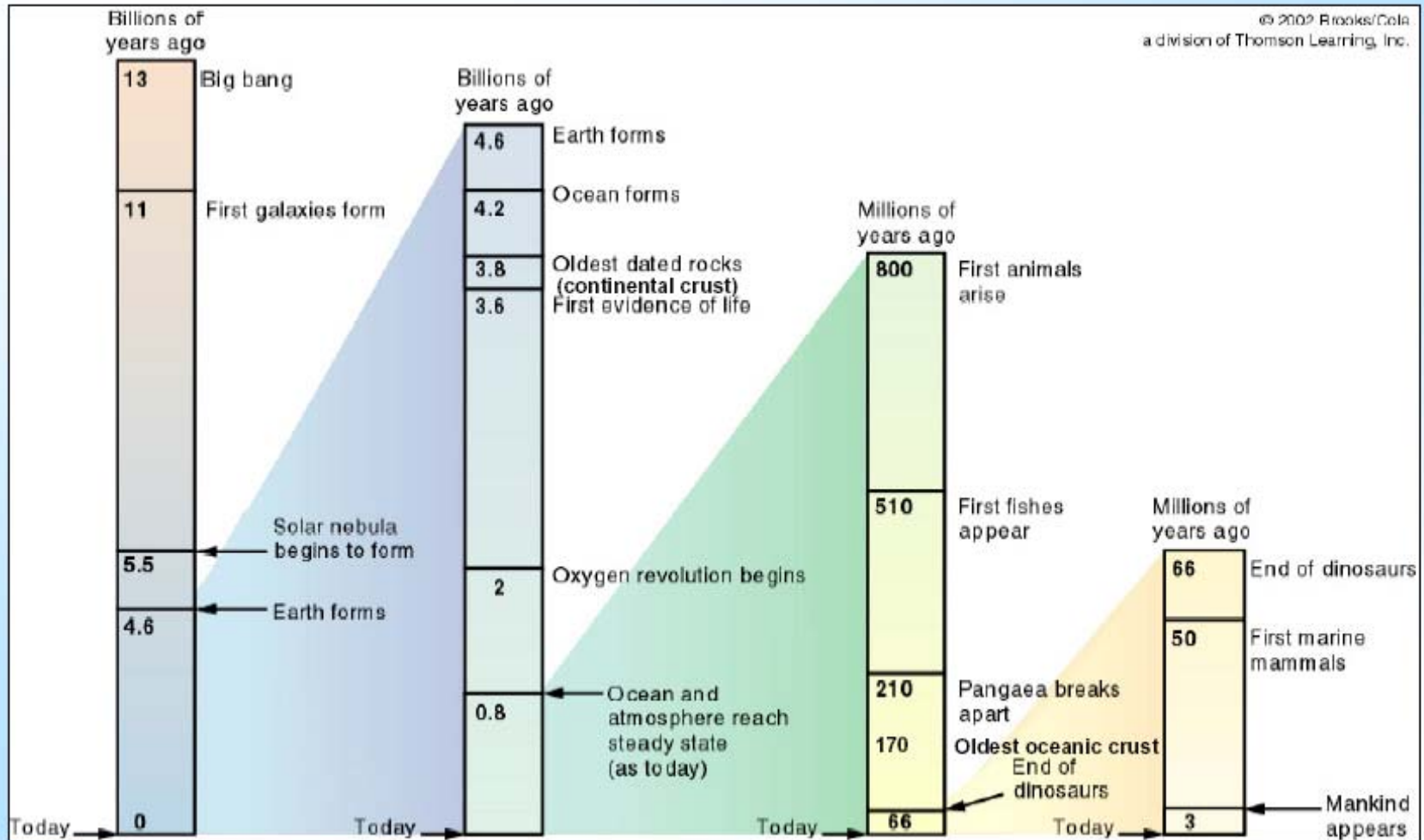
Facts about the universe

- Age
 - 13.7 Billion years
- Consists of
 - Measurable
 - 4% (atoms to energy)
 - *Not measurable*
 - 23% dark matter
 - WIMP
 - 73% dark energy



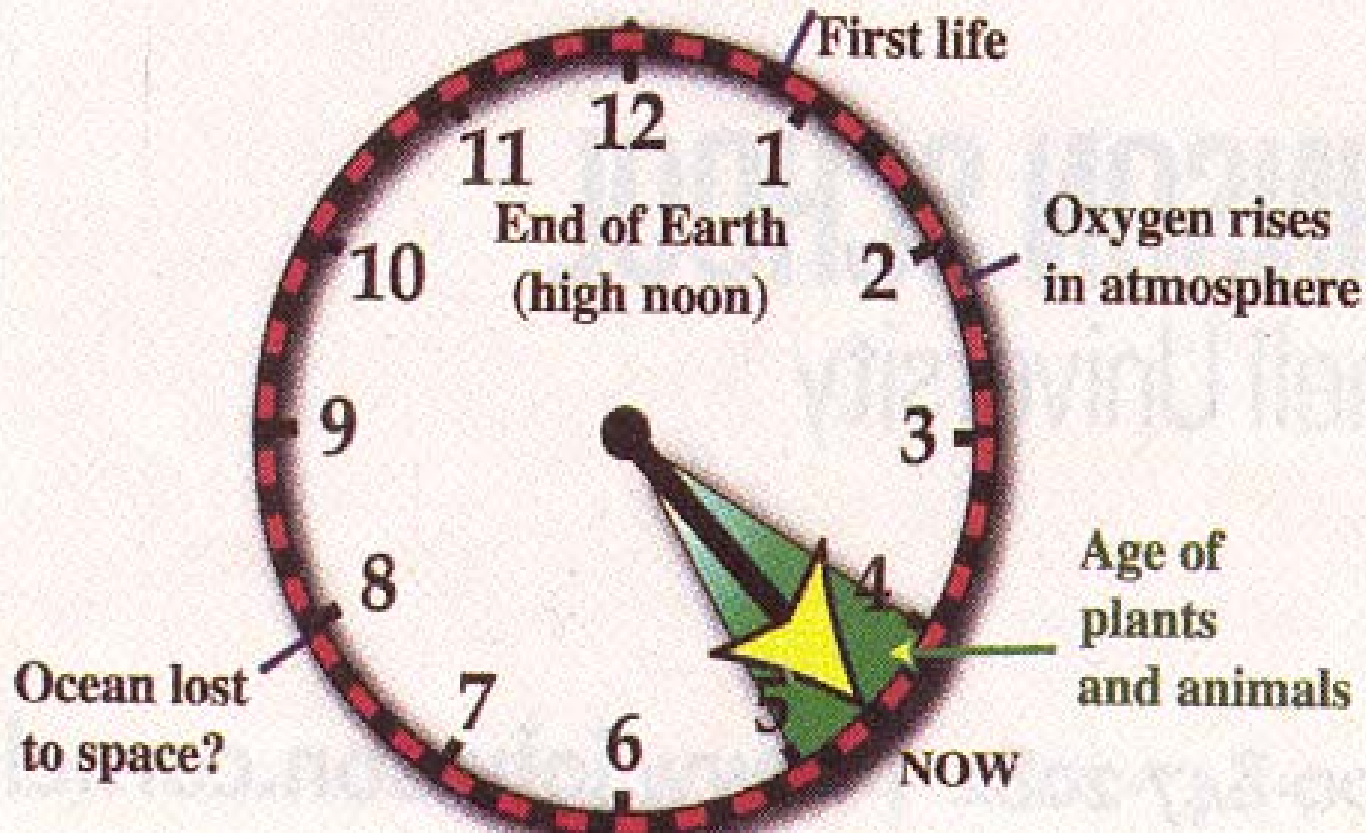
Earth's History

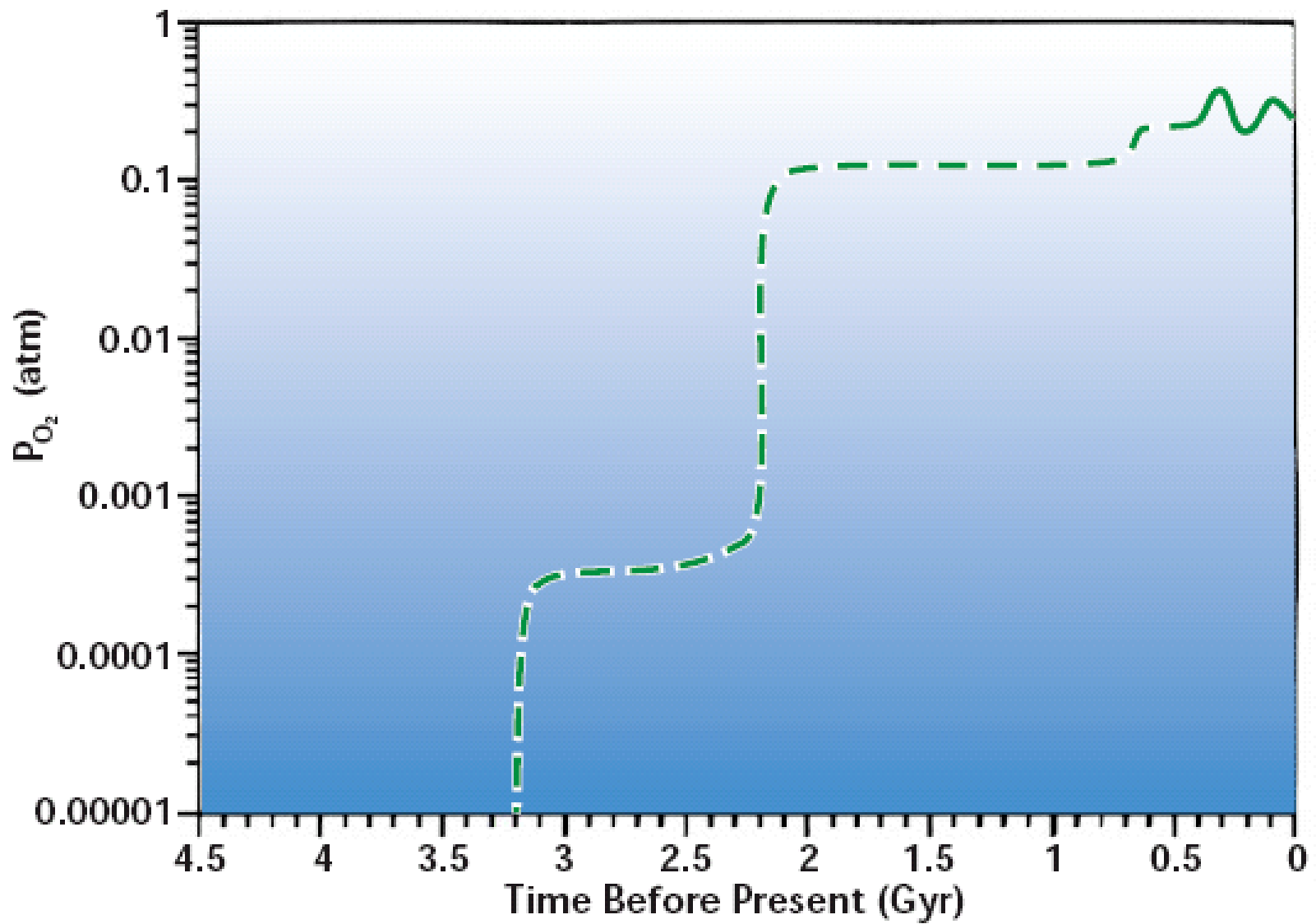
© 2002 Brooks/Cole
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Earth's Clock of Life

(billions of years)





Microbes from 4000 m in ice.



350°C

3,500 msW



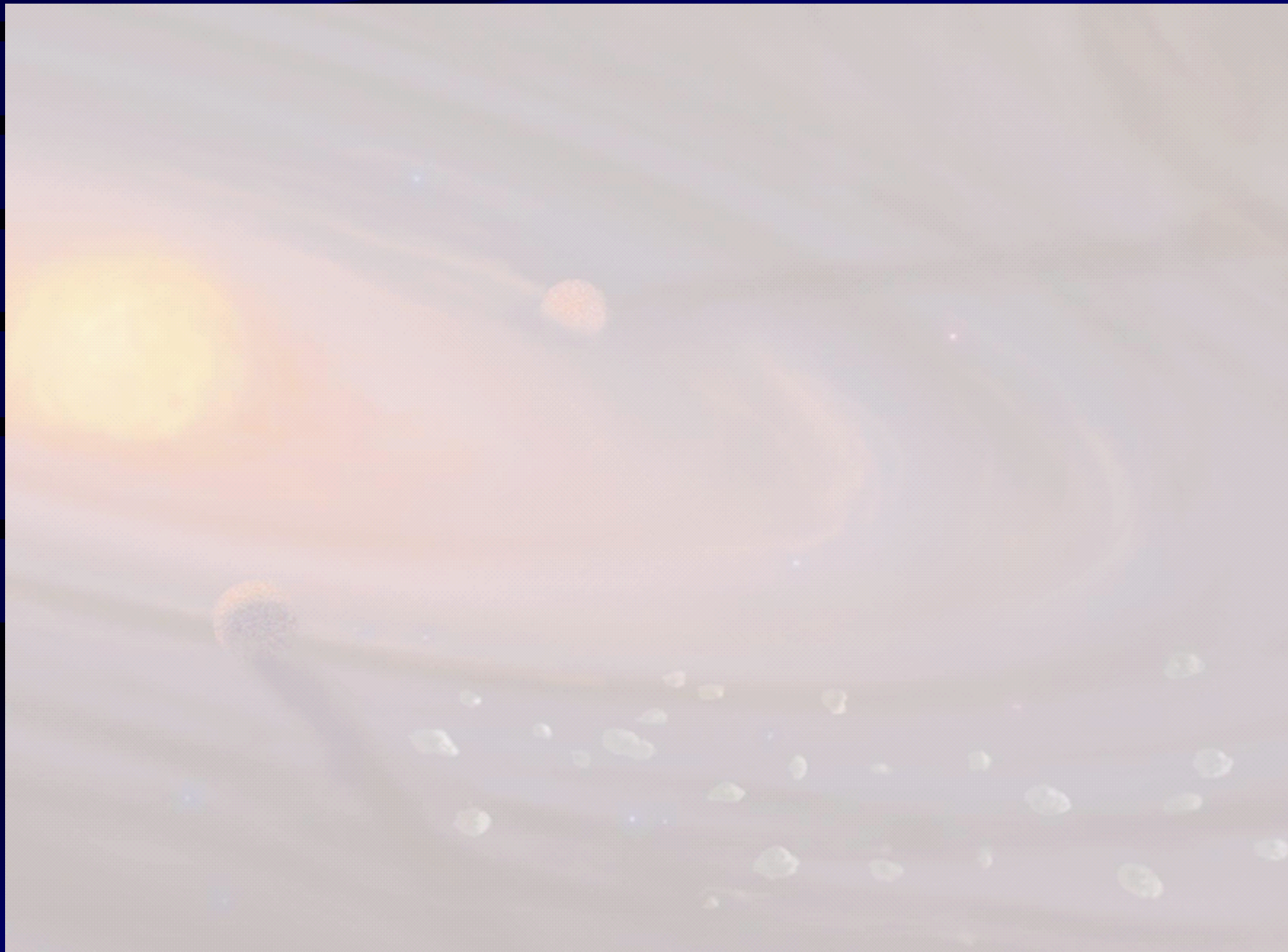
What are extremophiles?

- **EXTREMOPHILES** are organisms that require **extreme environments** for growth.
- **Extremophiles** are organisms that are "fond of" or "love" (-phile) environments including **high temperature, pH, pressure and salt concentration**, or **low temperature, pH, nutrient concentration, or water availability**.
- Extremophiles are also organisms that can **tolerate** extreme conditions including high levels of **radiation** or **toxic compounds**, or those living in conditions that we consider unusual.
- Most extremophiles are microorganisms that thrive under **conditions** that from a human perspective are clearly **extreme**

- **Alkaliphile**: An organism with optimal growth at pH values above 10.
- **Barophile**: An organism that lives optimally at high hydrostatic pressure.
- **Endolith**: An organism that lives in rocks.
- **Extreme Acidophile**: An organism with a pH optimum for growth at, or below, pH 3.
- **Extremophile**: An organism that is isolated from an extreme environment and often requires the extreme condition for growth. Extreme is anthropocentrically derived.
- **Halophile**: An organism requiring at least 0.2M salt for growth.
- **Hyperthermophile**: An organism having a growth temperature optimum of 80 C or higher.
- **Psychrophile**: An organism having a growth temperature optimum of 15 C or lower, and a maximum temperature of 20 C.
- **Toxitolerant**: An organism able to withstand high levels of damaging agents. For example, living in water saturated with benzene, or in the water-core of a nuclear reactor.
- **Xerotolerant**: An organism capable of growth at low water activity. For example, extreme halophile or endolith.

How is this possible ?

- How can macromolecular structure such as proteins be stable at temperatures higher than 100°C ($<160^{\circ}\text{C}$)?
- How is it possible to display appropriate metabolic fluxes at temperatures as low as -2°C ?



Planet	Gravity Constant [m/s²]	Gravity Relative to Earth's Gravity
Mercury	3.53	0.36
Venus	8.83	0.9
Earth	9.81	1
Mars	3.73	0.38
Jupiter	26	2.65
Saturn	11.18	1.14
Uranus	10.5	1.07
Neptune	13.24	1.35
Pluto	2.16	0.22
Earth's Moon	1.67	0.17
Mars' Moon (Phobos)	0.02	0.002
Large Asteroids	0.02	0.002

Table III.6: Gravity on Other Planets of the Solar System [17]

Beyond the solar system

The story so far...

144
planetary
systems

Smallest exoplanet:
0.023 Jupiter or **7** Earth masses

Nearest
exoplanet:

10.5
light years

Farthest exoplanet:

17,000
light years

Largest
exoplanet:

17.4
Jupiter masses

18 multiple
planet
systems

168
extrasolar planets



Key

- Planned Robotic Mission
- Potential Robotic Mission/Decision*
- Robotic Operations
- Planned Human Mission
- Potential Human Mission/Decision*
- Human Operations

* Best-estimated date

NOTE: All missions indicate launch dates

2000 2010 2020

Human Capabilities/Limitations

- Capabilities

- Creativity
- Adaptability
- Multi-sensory perception
- Manual dexterity
- Physical flexibility
- Physical strength
- Physical-mental feedback loop
- Reason/logic
- Cognitive processing
- Data interpretation

- Limitations

- Strange environment
- Limited resources
- Distance from support network
- Reduced-gravity impacts force application
- Cannot work outside without bulky, cumbersome spacesuit





The space environment

- Radiation

All kinds of particle and wave radiation with a wide spectrum, different from those on Earth, exist in outer space and on the other planets of the solar system.

- Gravity

In free space basically no gravitational loads act upon free-flying space vehicles. The gravitational acceleration on other planets varies by a great margin.

- Atmosphere

In free space there is a vacuum, i.e. practically no atmosphere. The structure and behavior of the atmosphere of other planets are physically and chemically different from Earth's atmosphere.

- Magnetic Fields

The magnetosphere of every planet in the solar system is different in orientation and strength. Also there exists an interplanetary magnetic field (IMF).

Earth

Africa



Antartica

Apollo 17 (1972)

Earth Rising on the Moon



Apollo 11

Lunar Phases

Mars

Fourth planet from the Sun at 1.5 AU

7 times smaller than the Earth

Temperatures range from $-140\text{ }^{\circ}\text{C}$
to $20\text{ }^{\circ}\text{C}$

Polar caps of frozen carbon dioxide
and water

Thin atmosphere that is 95 percent
carbon dioxide

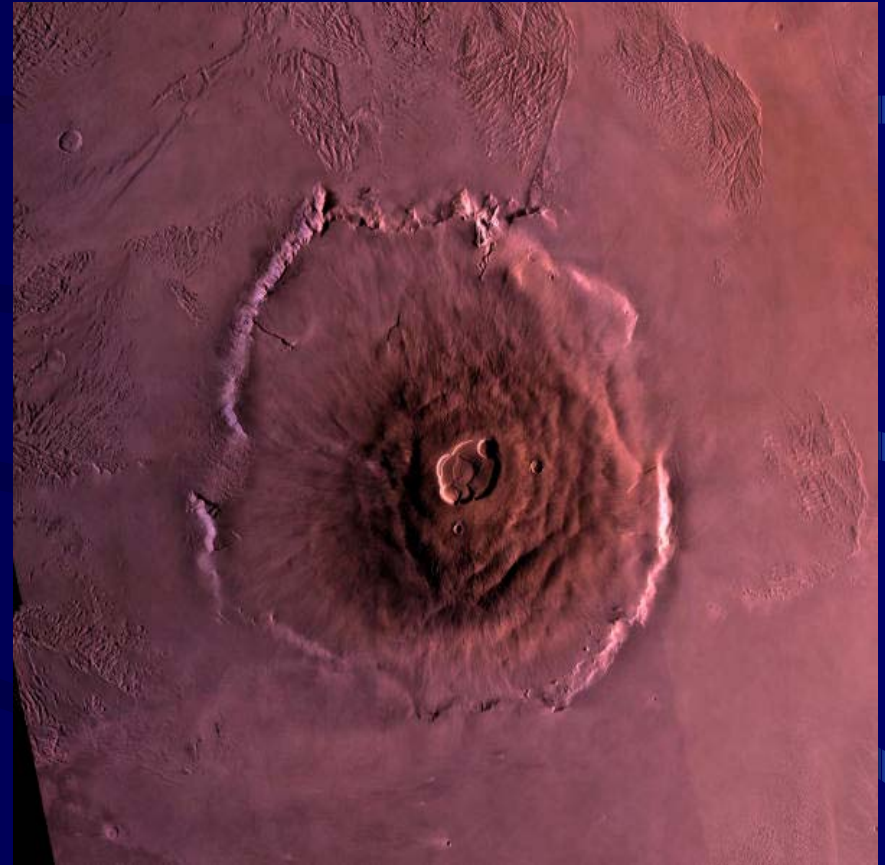
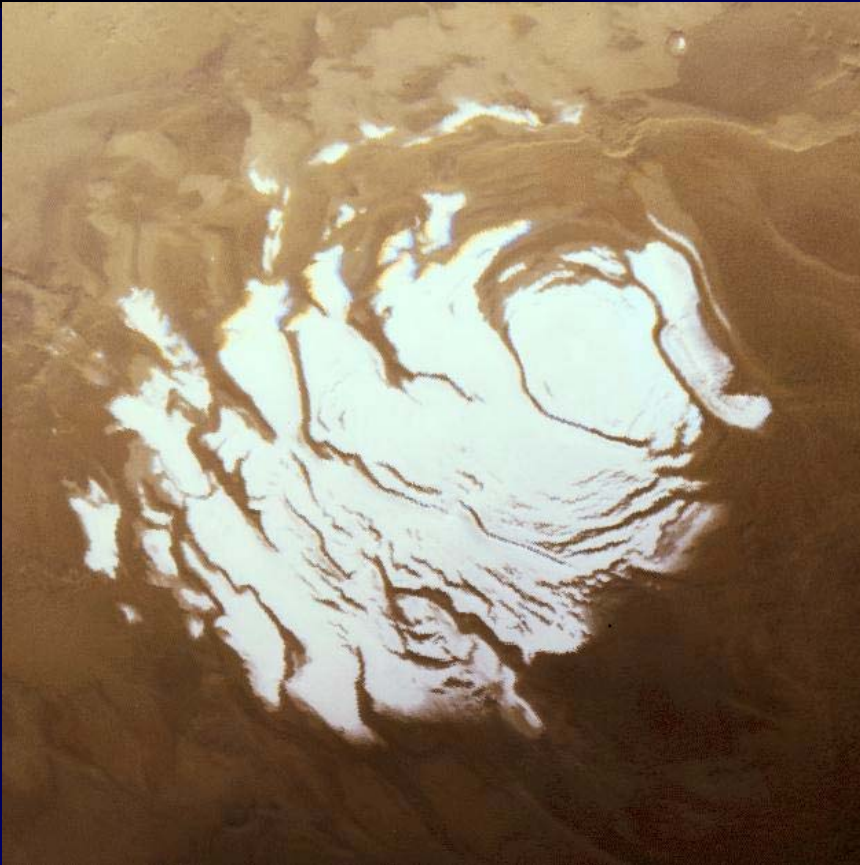


Hubble Space Telescope

Martian Surface

South polar cap

400 km in diameter



Olympus Mons

24 km in height

Viking Orbiter



Mission Scenario*

Outbound - 150 d

Stay - 619 d

Return - 110 d

Total - 879 d



*2009 Reference Mission / ARC

Planetary Science on the Web

NASA – Space Science

<http://spacescience.nasa.gov/>

NASA's Planetary Photojournal

<http://photojournal.jpl.nasa.gov/>

National Space Science Photo Gallery

http://nssdc.gsfc.nasa.gov/photo_gallery/

Views of the Solar System

<http://www.solarviews.com/>

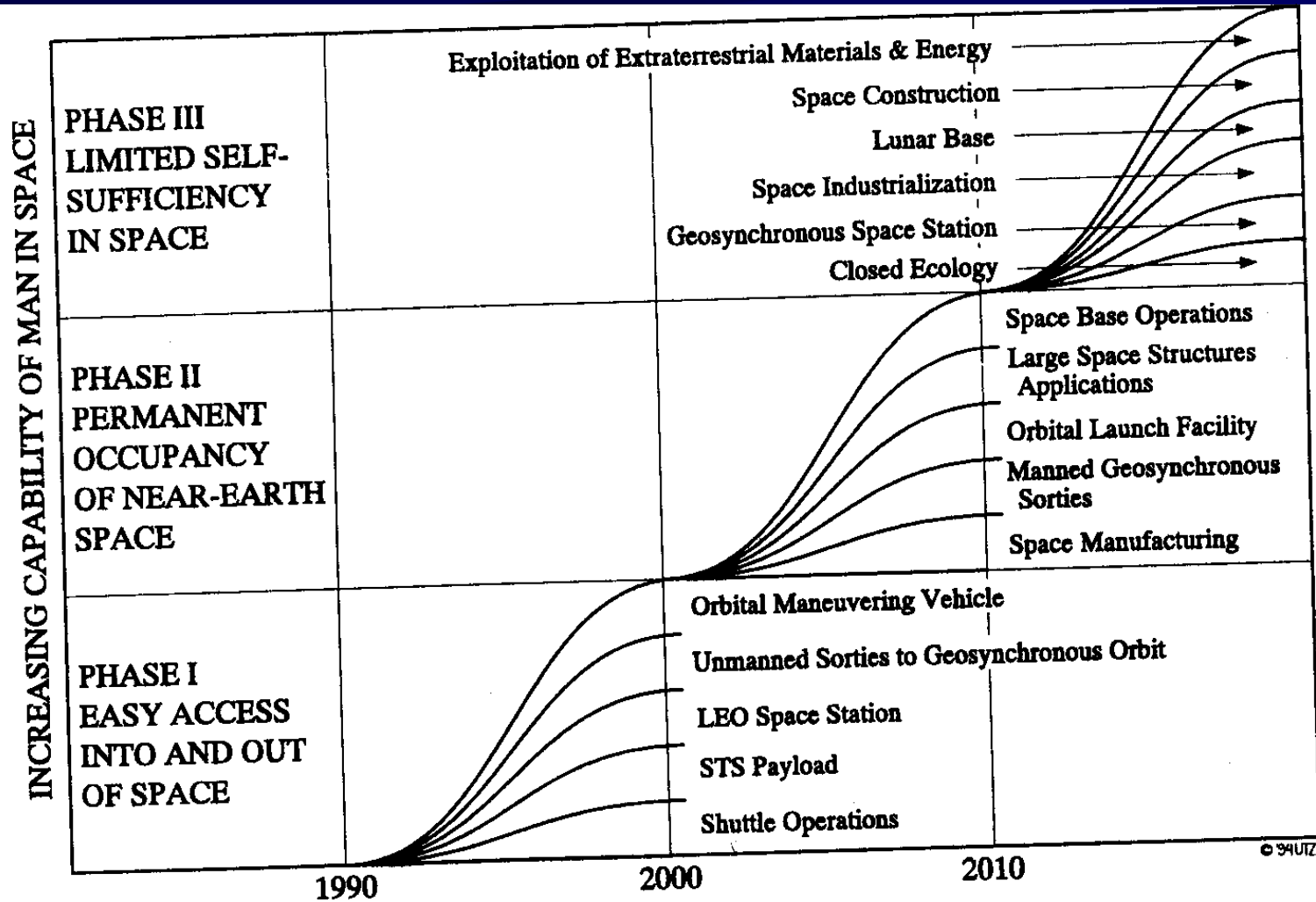
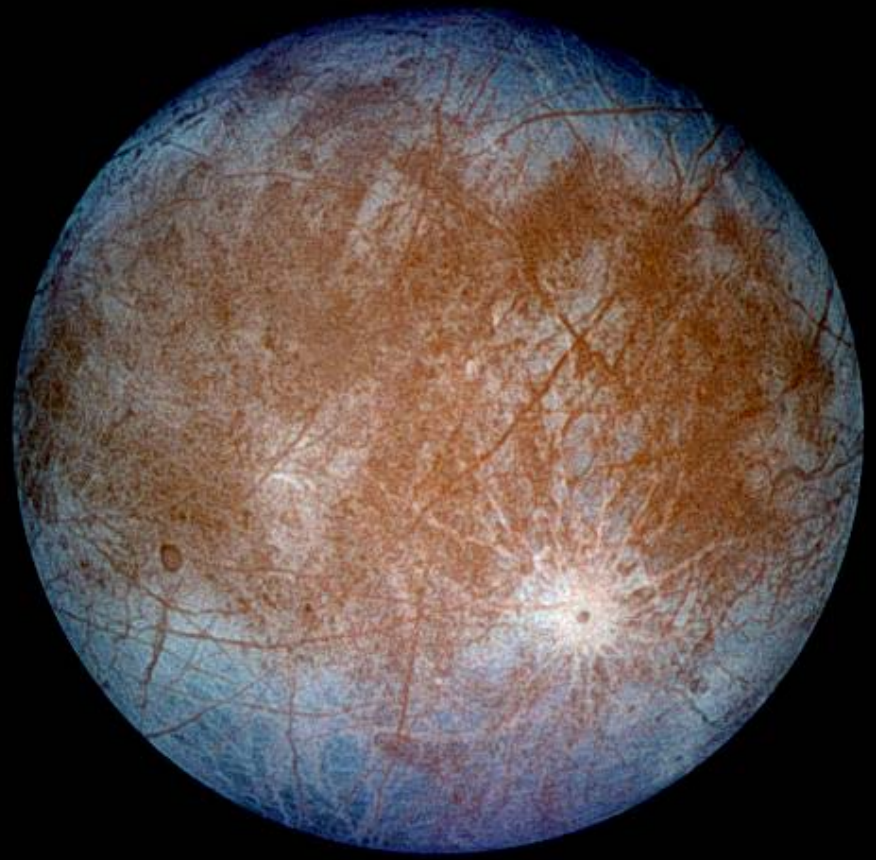
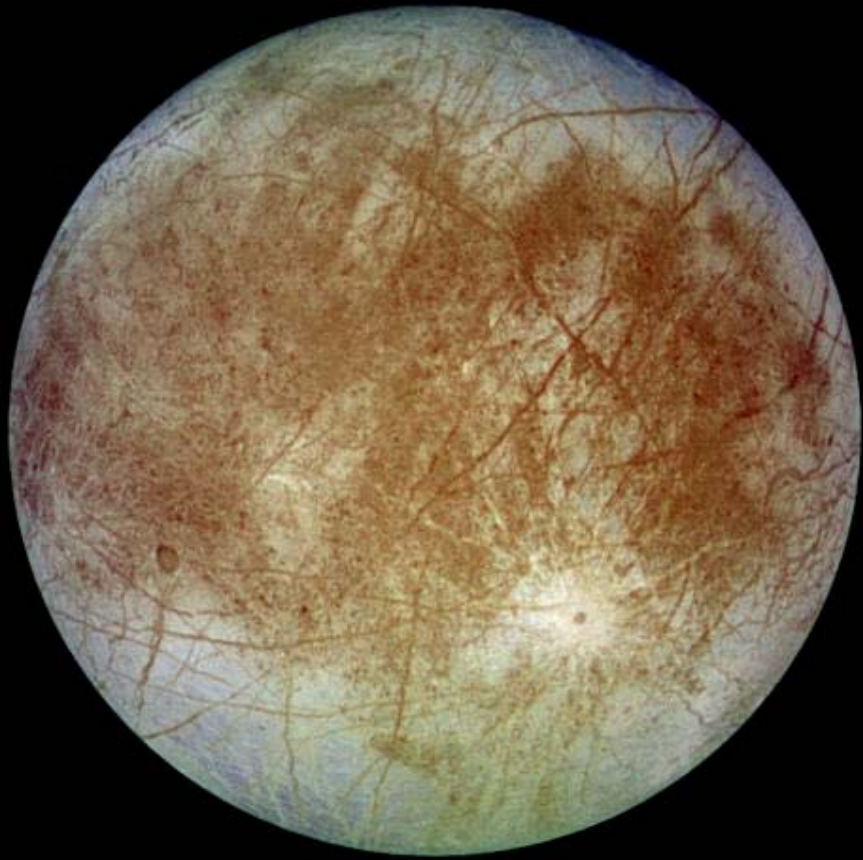
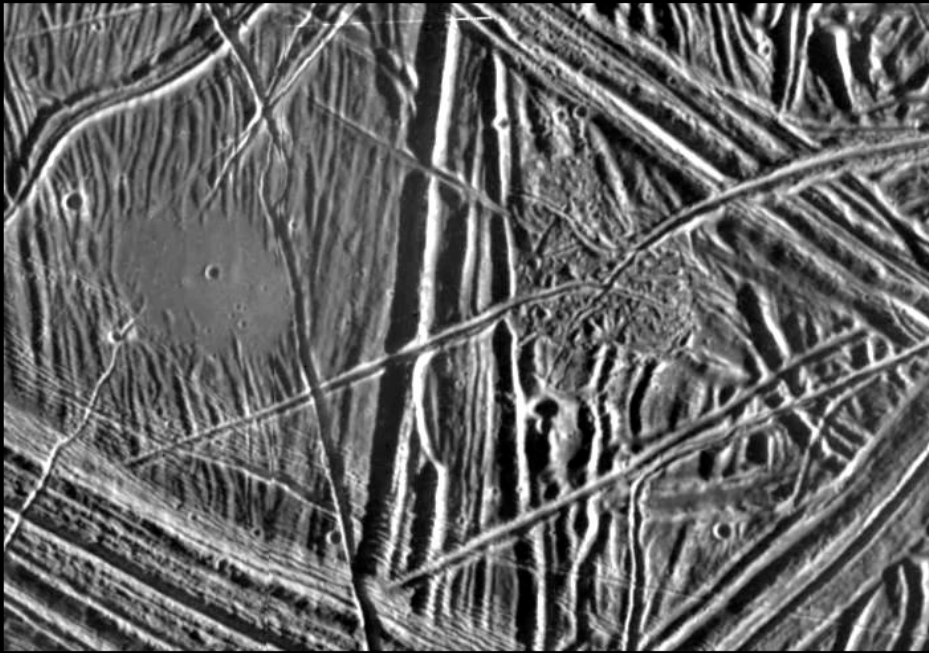


Figure I.3: Progress in Spaceflight [6]

Classes of Potential Benefits	Comments
Intellectual	Derived from science - new knowledge and new technologies
Utilitarian / Materialistic	Industrial products, terrestrial applications, commercialization
Humanistic	Communications and informations from space, e.g., social and health services, international cooperation, cultural and spiritual effects

Europa





Europa Features

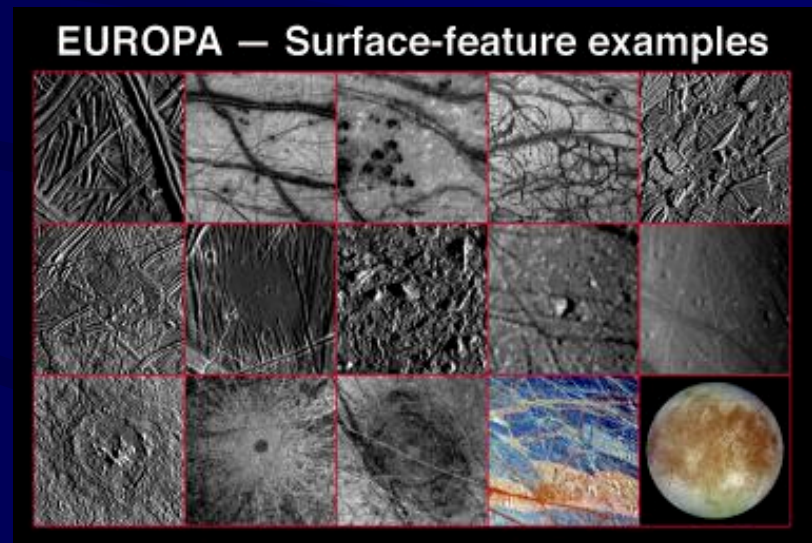


Why go to Europa?

Evidence of Liquid Water

- Water leads to life?

Extremophiles



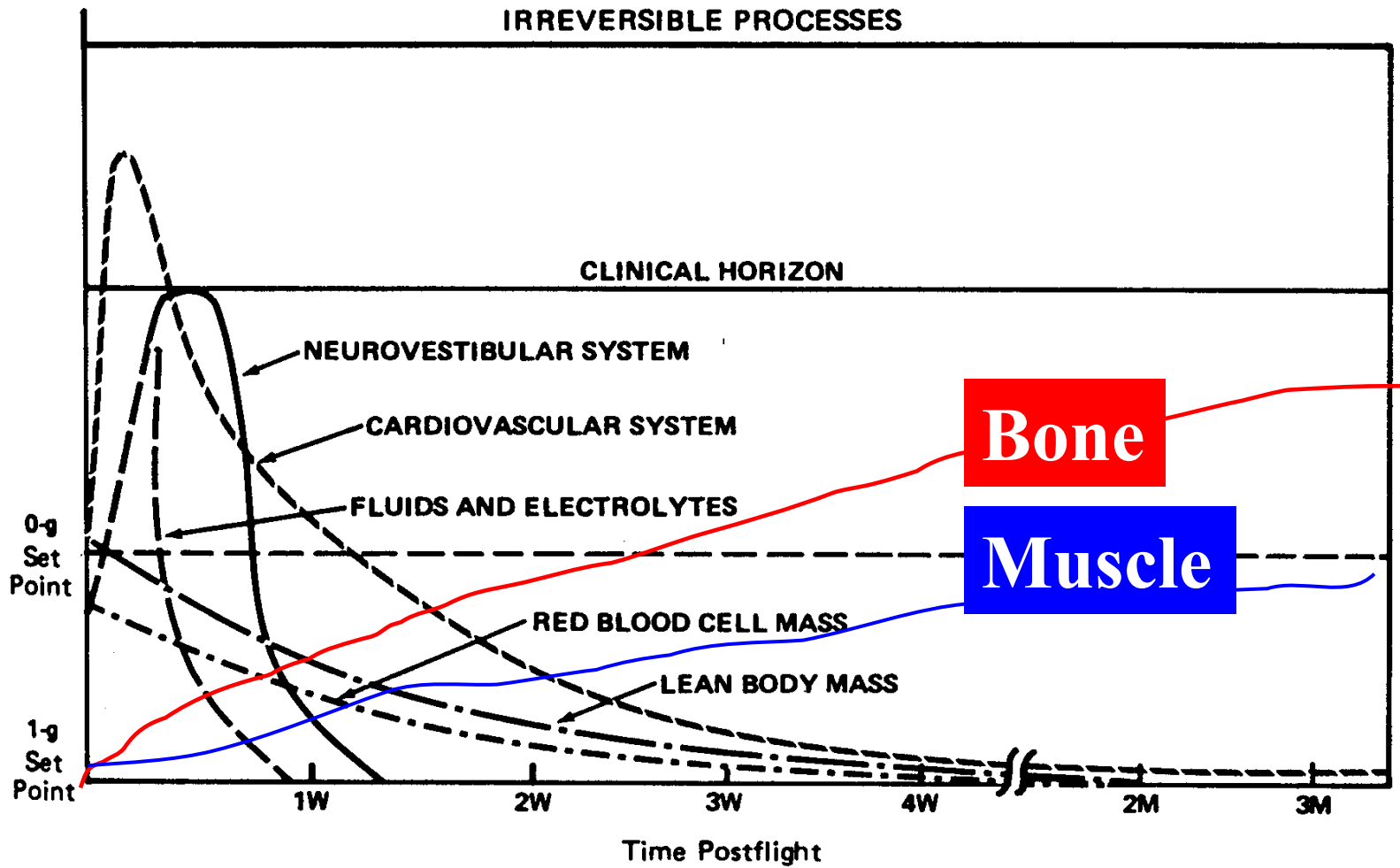




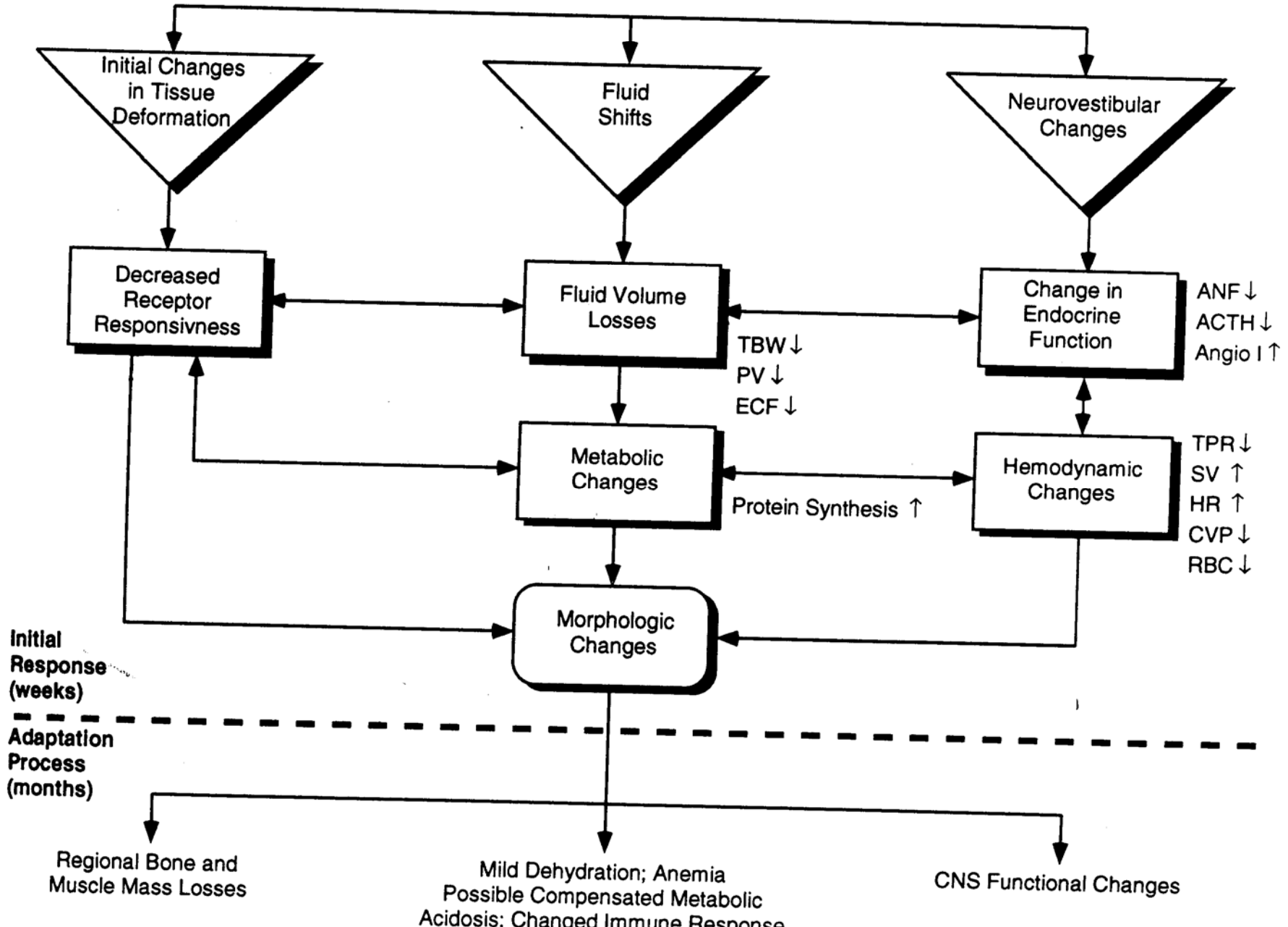
Things (and people) float!



Adaptation to space



Weightlessness

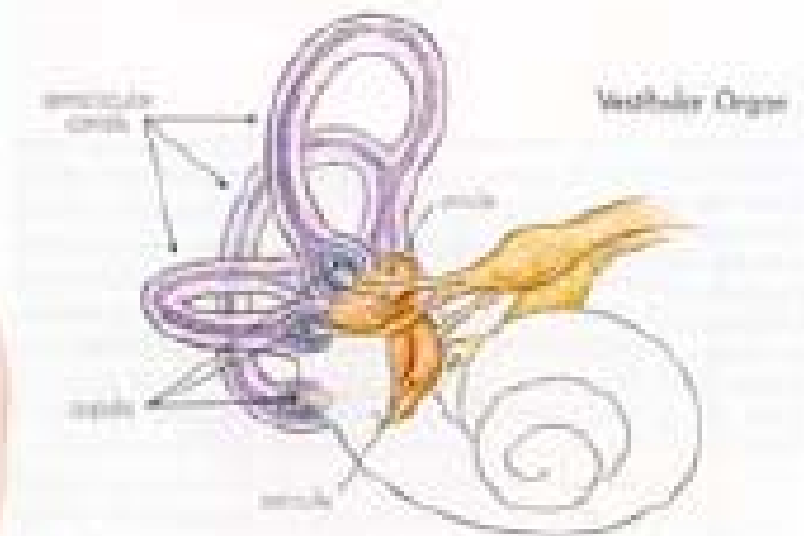


Balance / Neurovestibular

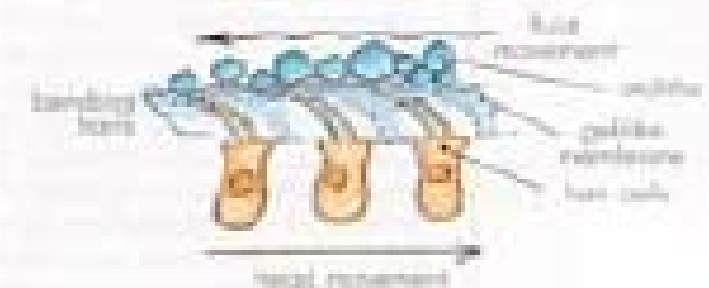
Components

- Vestibular - Inner ear
- Visual - Eyes
- Proprioceptive - Joints, muscles, tendons
- Neuro - Brain and nervous system

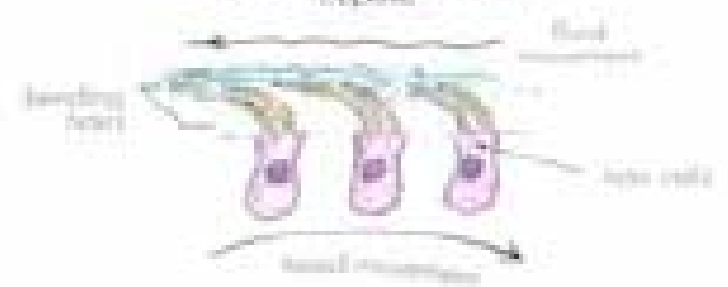




b. Utricle and Saccule



a. Semicircular canal cupule



Sensory and Balance System

- Signal conflict
- Space Motion Sickness
 - 66%
 - Adapt quickly
- Postural changes
 - Inflight
 - Postflight

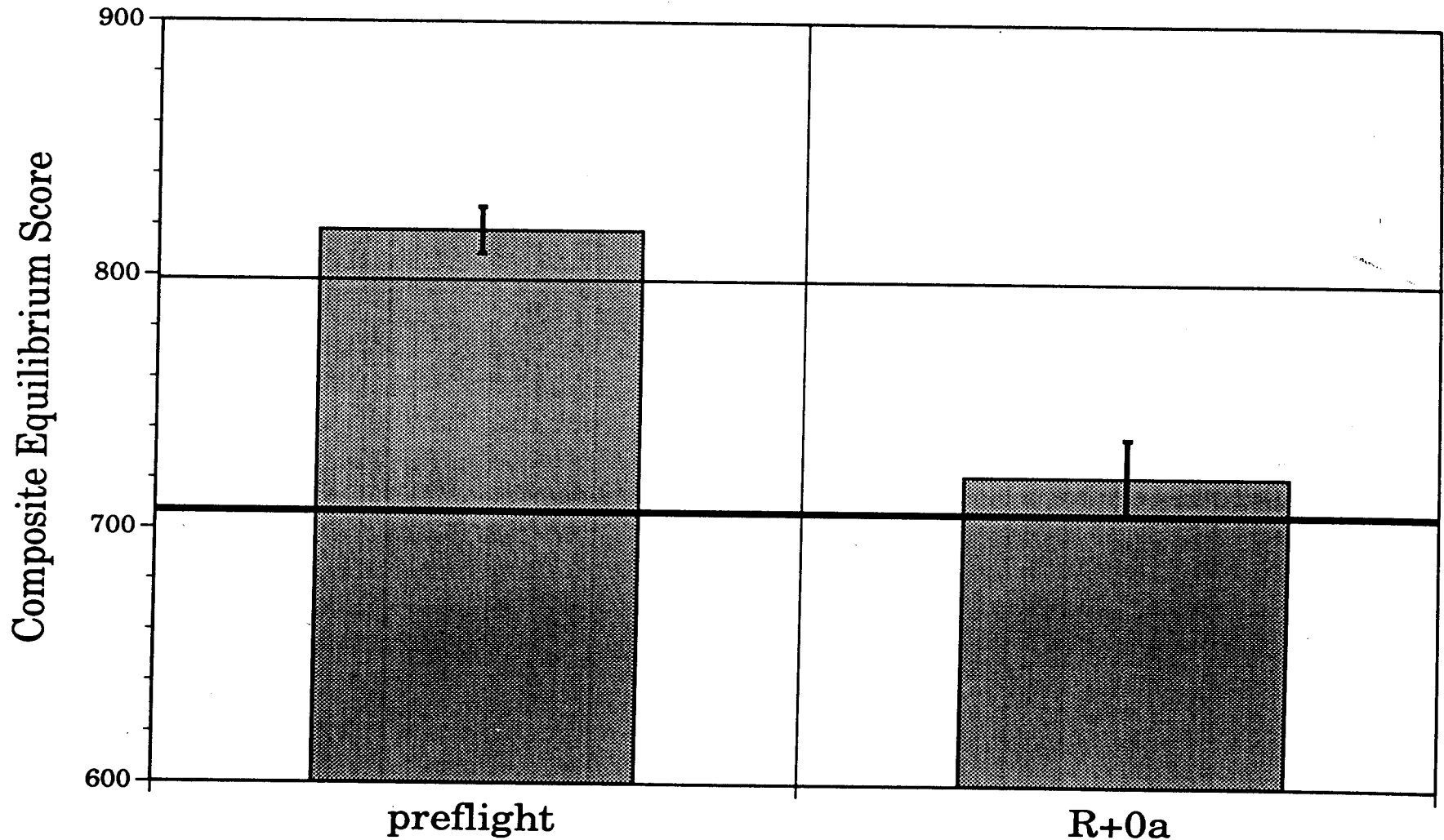


INCIDENCE AND SEVERITY OF SPACE MOTION SICKNESS DURING 36 SPACE SHUTTLE FLIGHTS

Motion-Sickness Rating	Number of Crewmembers		Totals
	First Shuttle Flight	Later Shuttle Flight	
None	32 (29%)	28 (45%)	60 (35%)
Mild	36 (33%)	24 (39%)	60 (35%)
Moderate	29 (27%)	10 (16%)	39 (23%)
Severe	12 (11%)	0 (0%)	12 (7%)
Totals	109 (64%)	62 (36%)	171 (100%)

(Adapted from Davis et al [1988] and Beck [personal communication, 1991].)

Postural stability



Countermeasures for SMS

- Motion sickness drugs
- Accupuncture
- Biofeedback training
- Adaptation (patience)

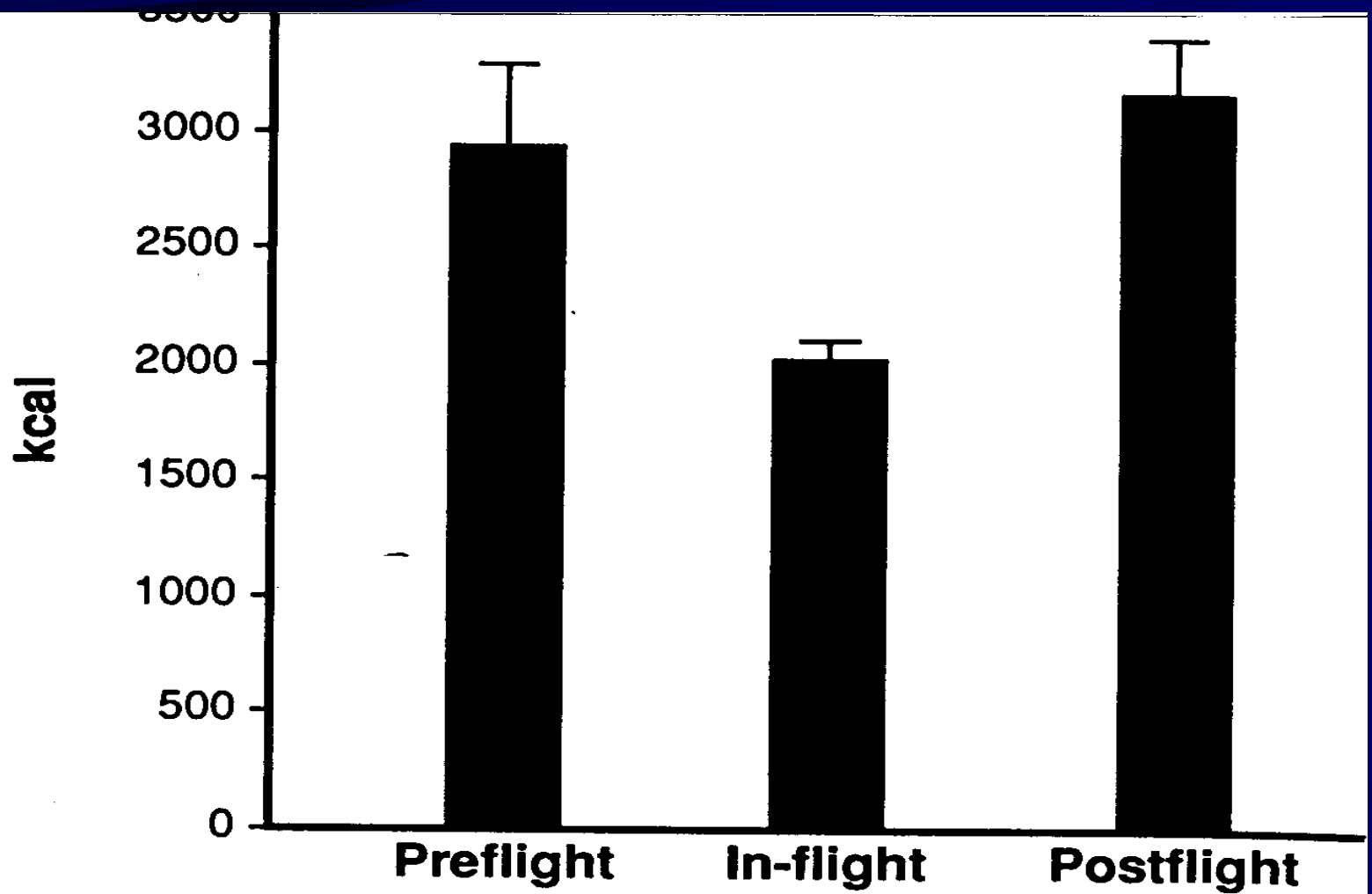
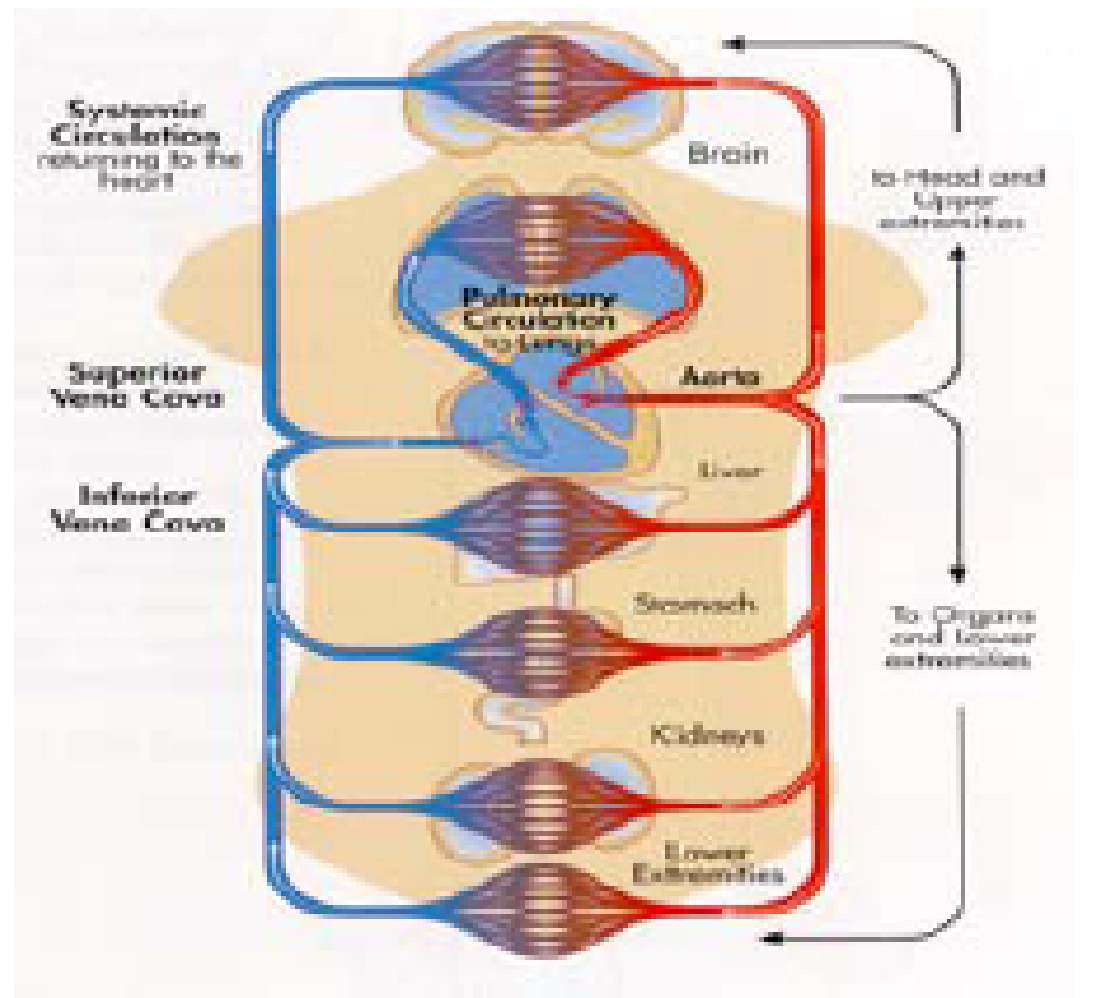


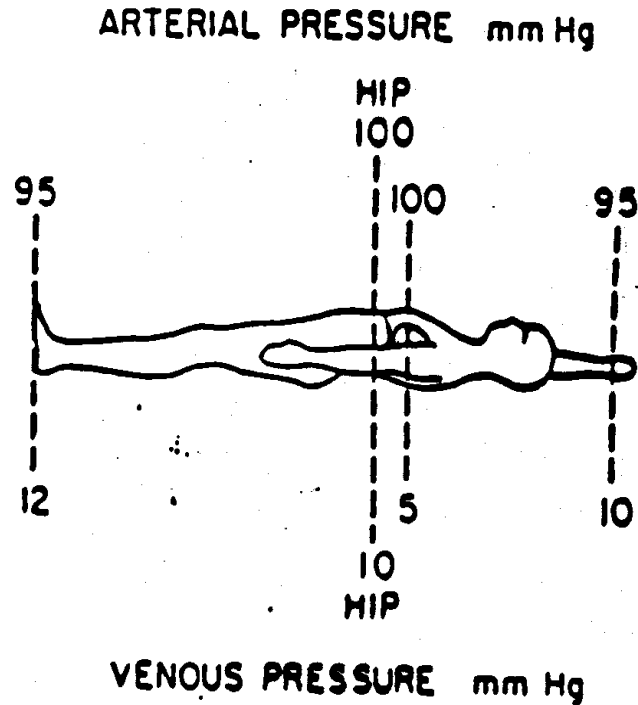
Figure 15-3. Energy consumed by the STS-4 payload crew before, during, and after flight.

Cardiovascular System

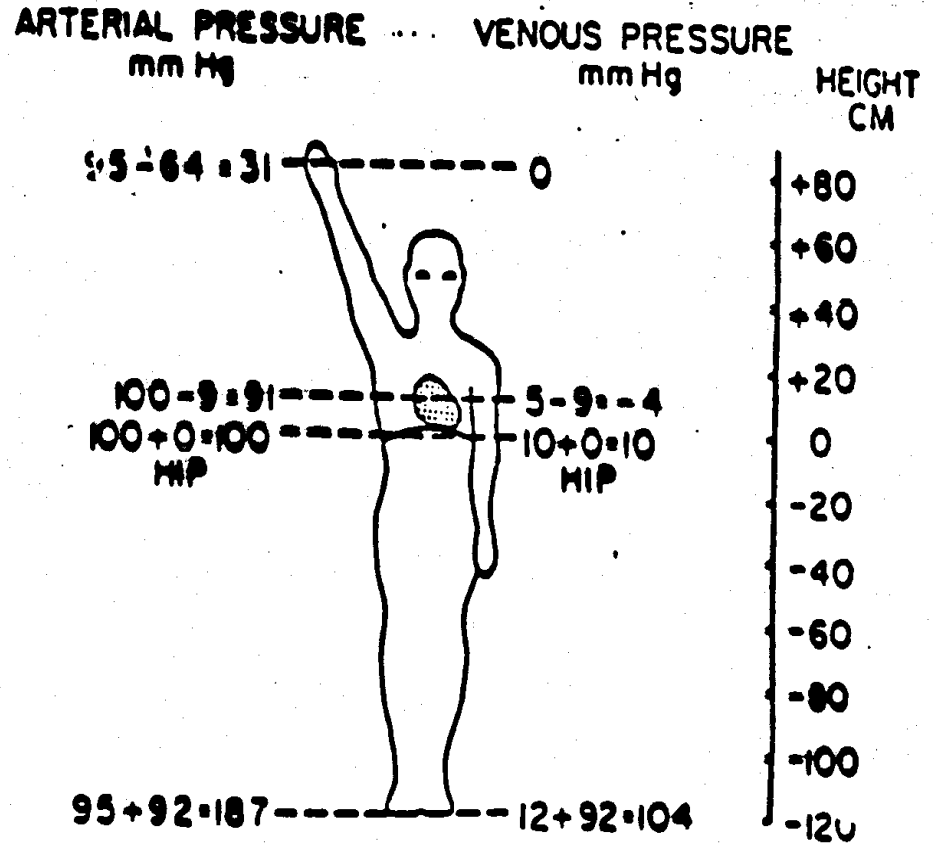
- Heart
- Lungs
- Blood vessels
- Blood



A



B



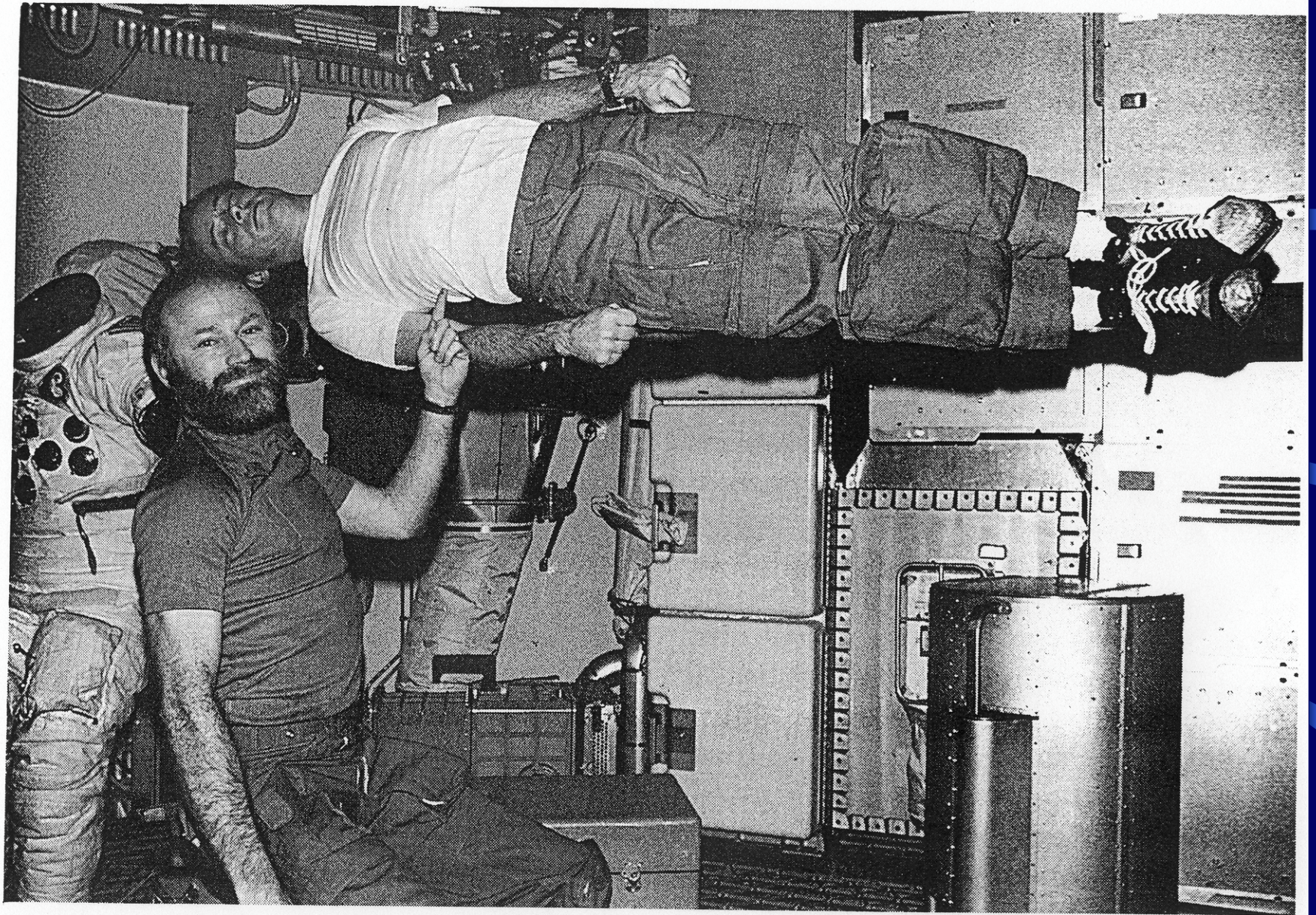
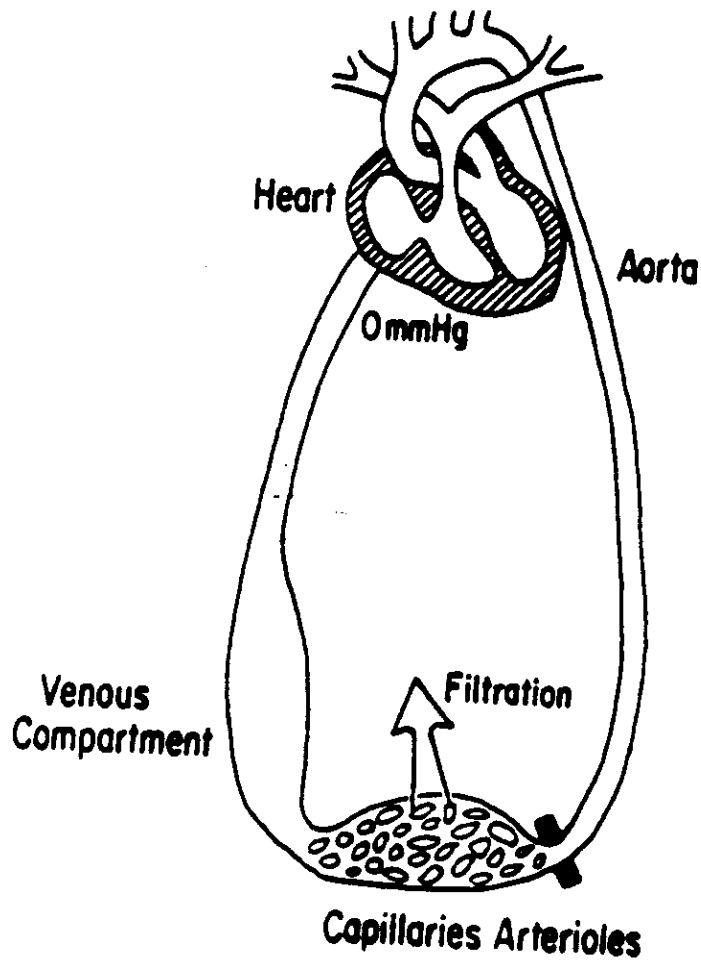
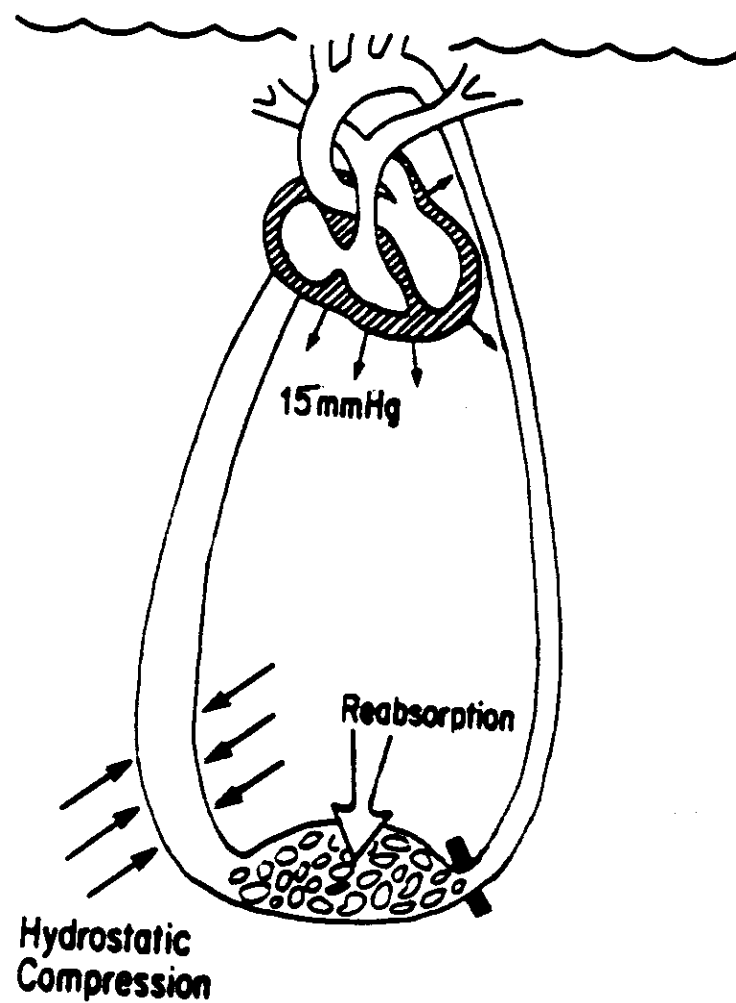


Figure 2-4. Skylab-4 astronauts demonstrate the effect of microgravity on weight.

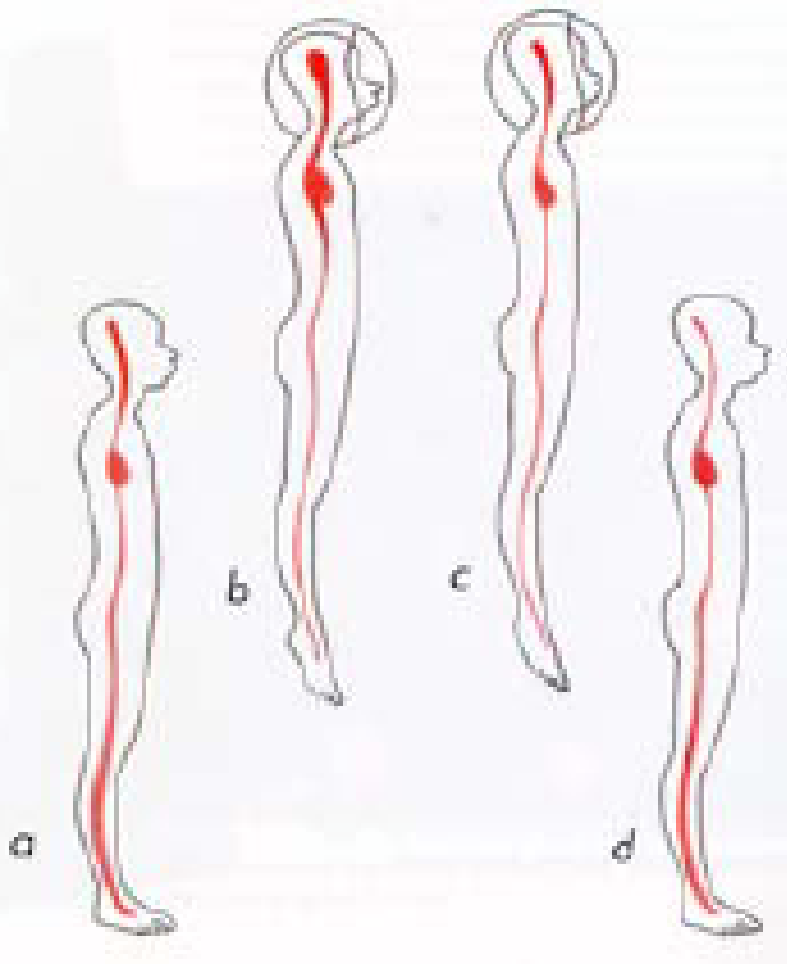
Erect-Air



Erect-Water



Cephalid (Headward) Fluid Shift



Assignment

CV problems

- Puffy face (skinny legs)
- Fluid loss
- Anemia (RBC)
- Postflight orthostatic intolerance (fainting)



Countermeasures

- Fluid loading
- Electrolytes
- Lower body negative pressure (LBNP) suit
- G suits

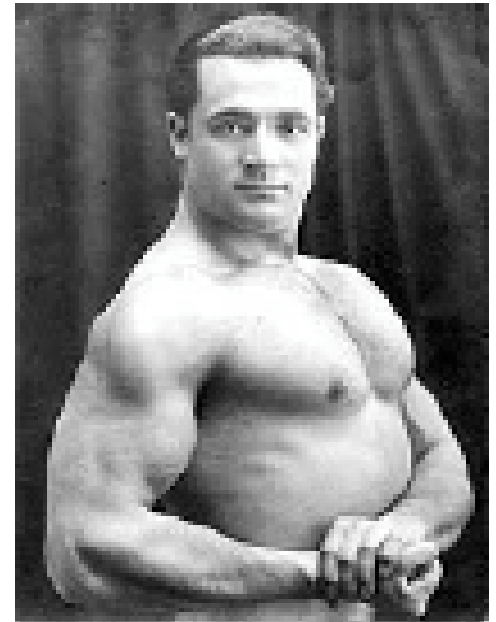


Figure 14-5. Astronaut James Voss uses the mobile in-flight LBNP device on STS-44 while Maria Runco observes.

Muscular System in Space



- Muscle functions
 - motion and locomotion
 - movement of substrates in body
 - postural maintenance
 - heat production (85%)



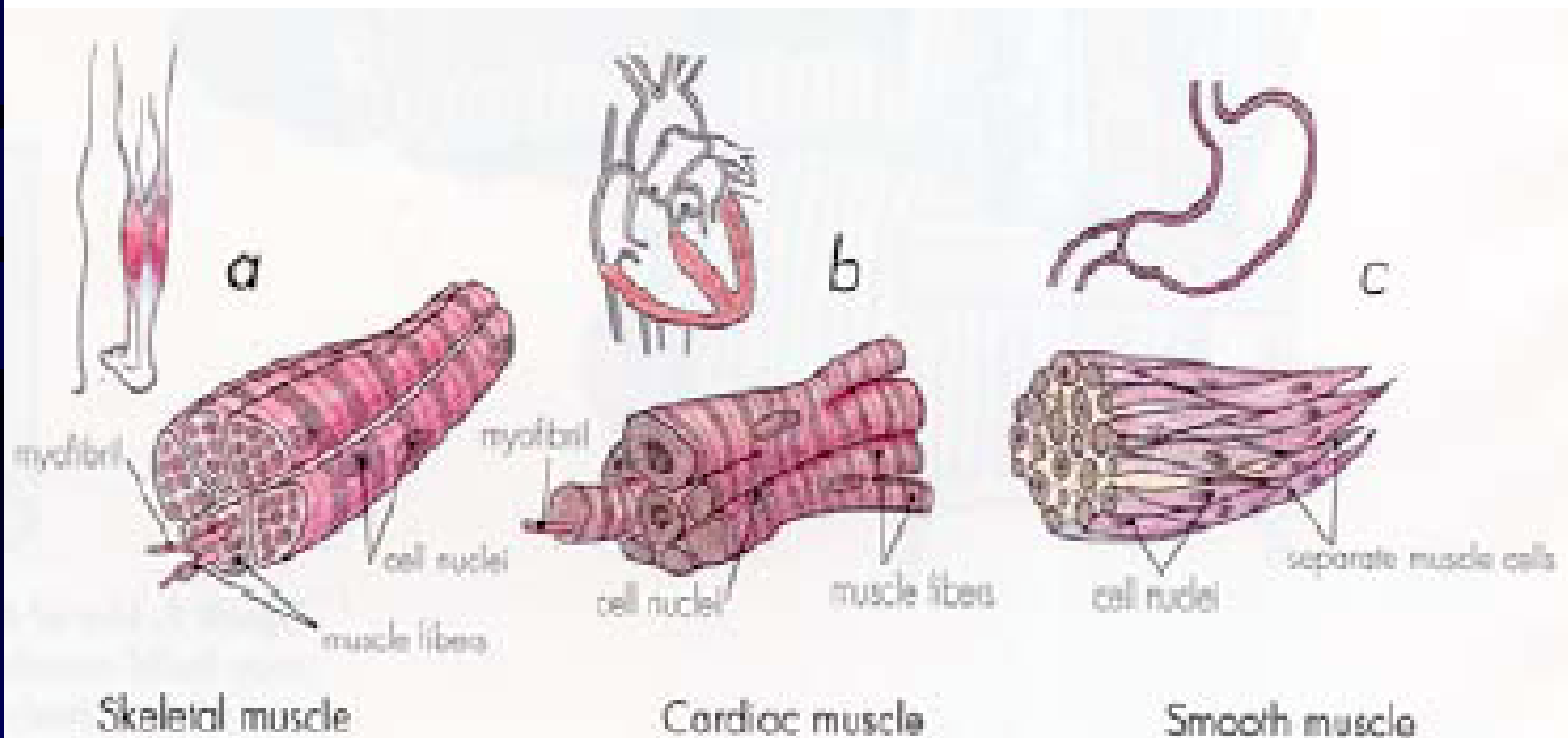
Muscle function in space

Force

- Skylab astronauts who exercised maintained muscle force
- Leg volume reduced, exercise or not
- Proximal antigravity muscles (torso, posture) deconditioned after 5 days

Types of Muscle

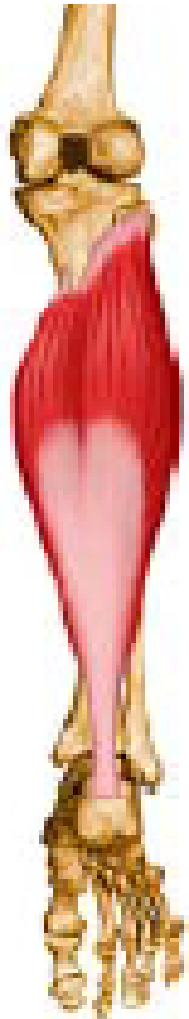
skeletal, cardiac, smooth
fast and slow twitch



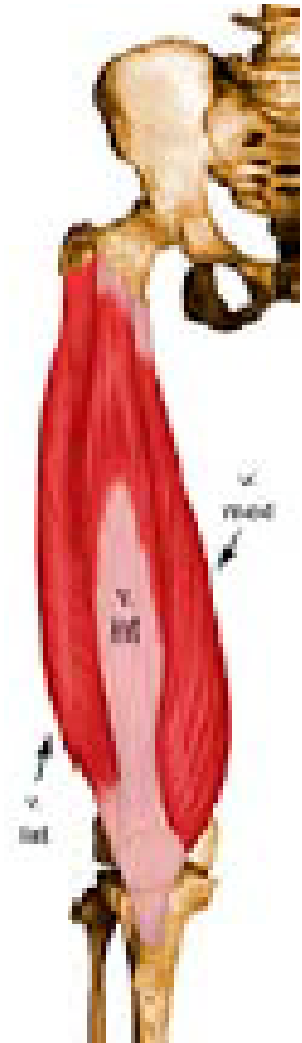
Muscle Atrophy

- Wasting away of muscle. Individual fibers decrease in size due to progressive loss of myofibrils (actin and myosin)
- Caused by:
 - Disuse
 - Denervation
 - Disease

Muscular structure in space



- Using MRI, found soleus volume reduced. No significant recovery after 7 days postflight.
- Using biopsy, found vastus lateralis xs area reduced. Due to loss of fast twitch fibers. Capillary density reduced (decreased oxidative potential).



Muscle function in space

Force

- Skylab astronauts who exercised maintained muscle force
- Leg volume reduced, exercise or not
- Proximal antigravity muscles (torso, posture) deconditioned after 5 days

Muscle function in space (cont)

- Fatigue
 - Greater fatiguing (Skylab)
 - Recovery (9 d mission) of muscle conditioning complete after 2 d postflight exercise
- Control
 - Achilles reflex duration (time between tap on heel and cessation of movement)
 - ARD decreased in flight, but increased postflight (suggests proprioceptive inputs is sensitive to microgravity)

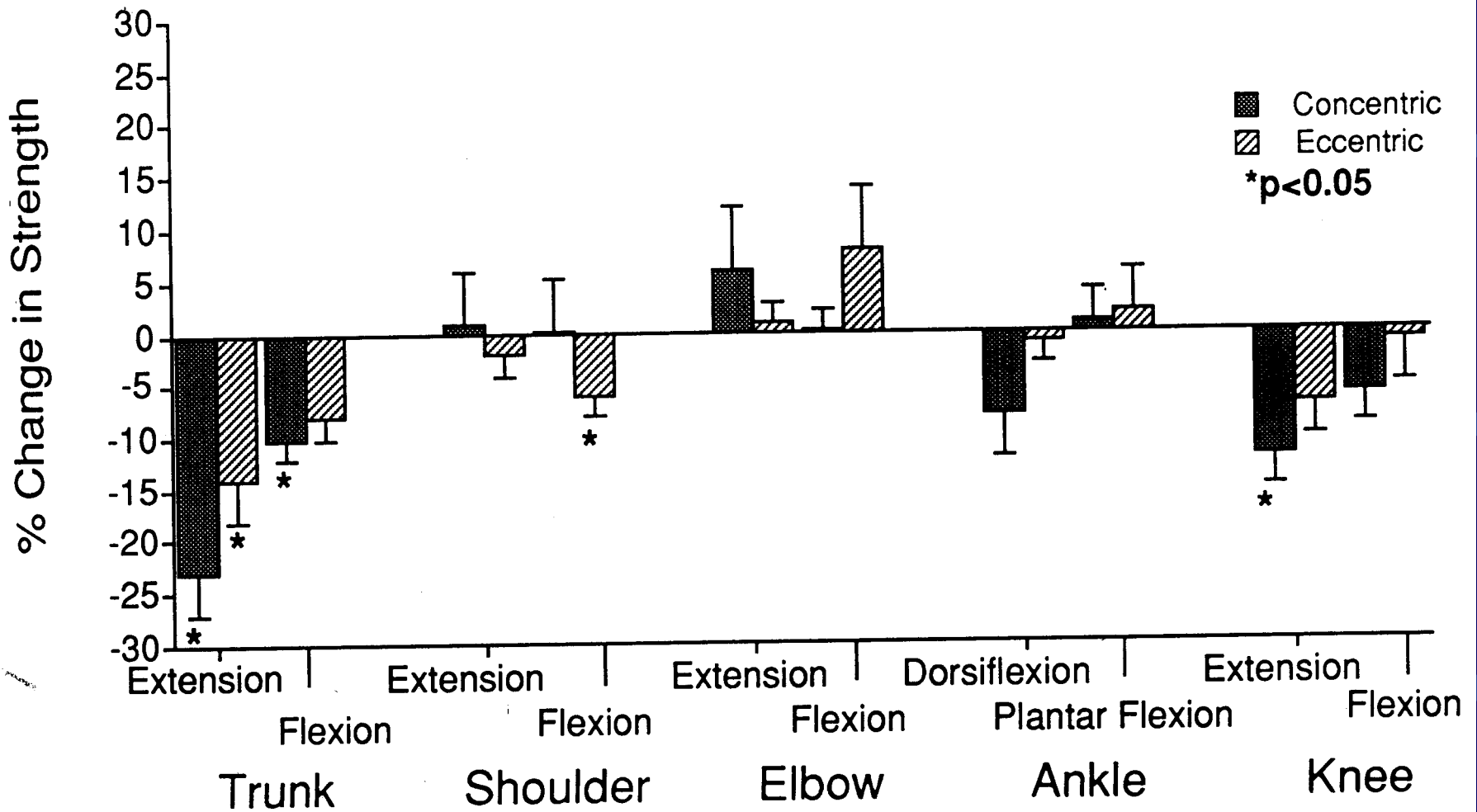


Figure 10-10. Summary of changes in strength in 19 astronauts tested before launch and after 4 to 11 days of space flight.

Countermeasures

- Exercise
- Passive stretch
- Electrical stimulation
- Anabolic drugs
- Proprioceptive neuromuscular facilitation

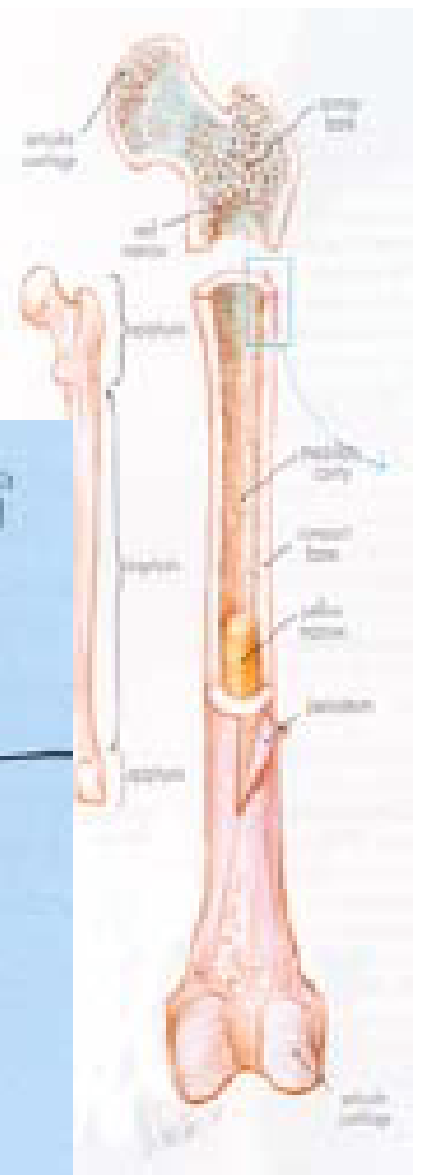
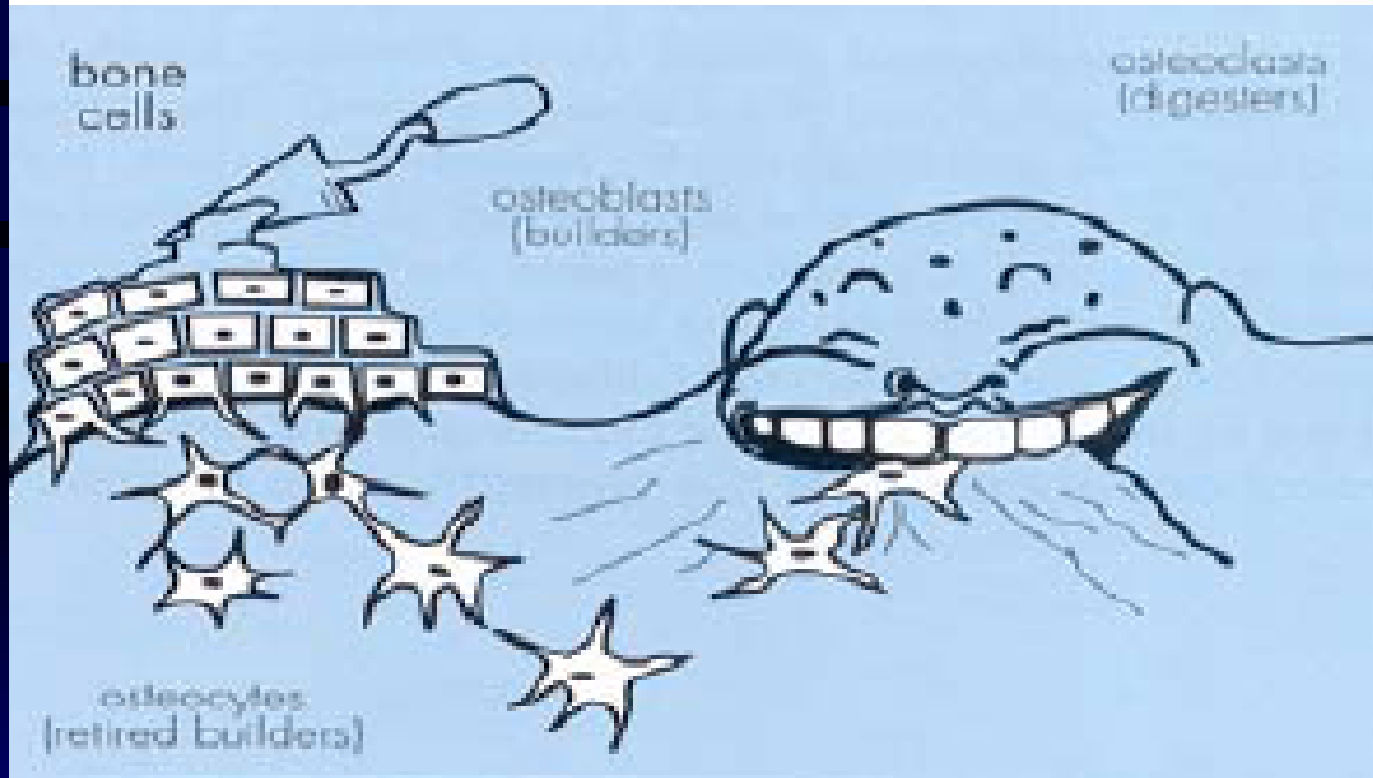


Skeletal System – Functions

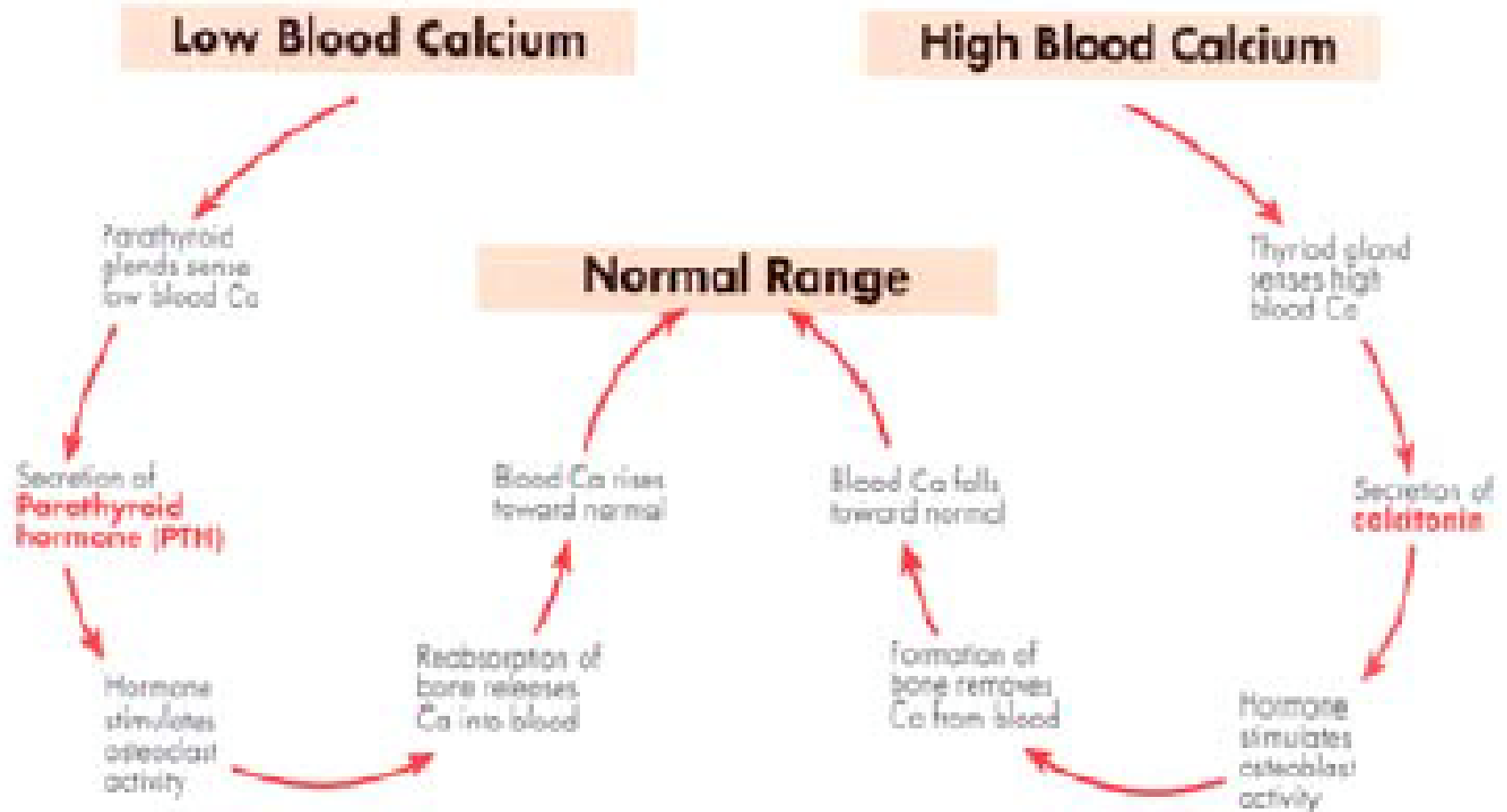
- Support
- Protection
- Movement
- Mineral storage and homeostasis
- Site of blood production (red bone marrow)
- Energy storage (yellow bone marrow)



- Bone in constant turnover (osteoblasts make and osteoclasts resorb)
- Bone strengthens with mechanical stress



Calcium loss - women begin at 30 y (30% loss by 70 y), men begin at 60 y

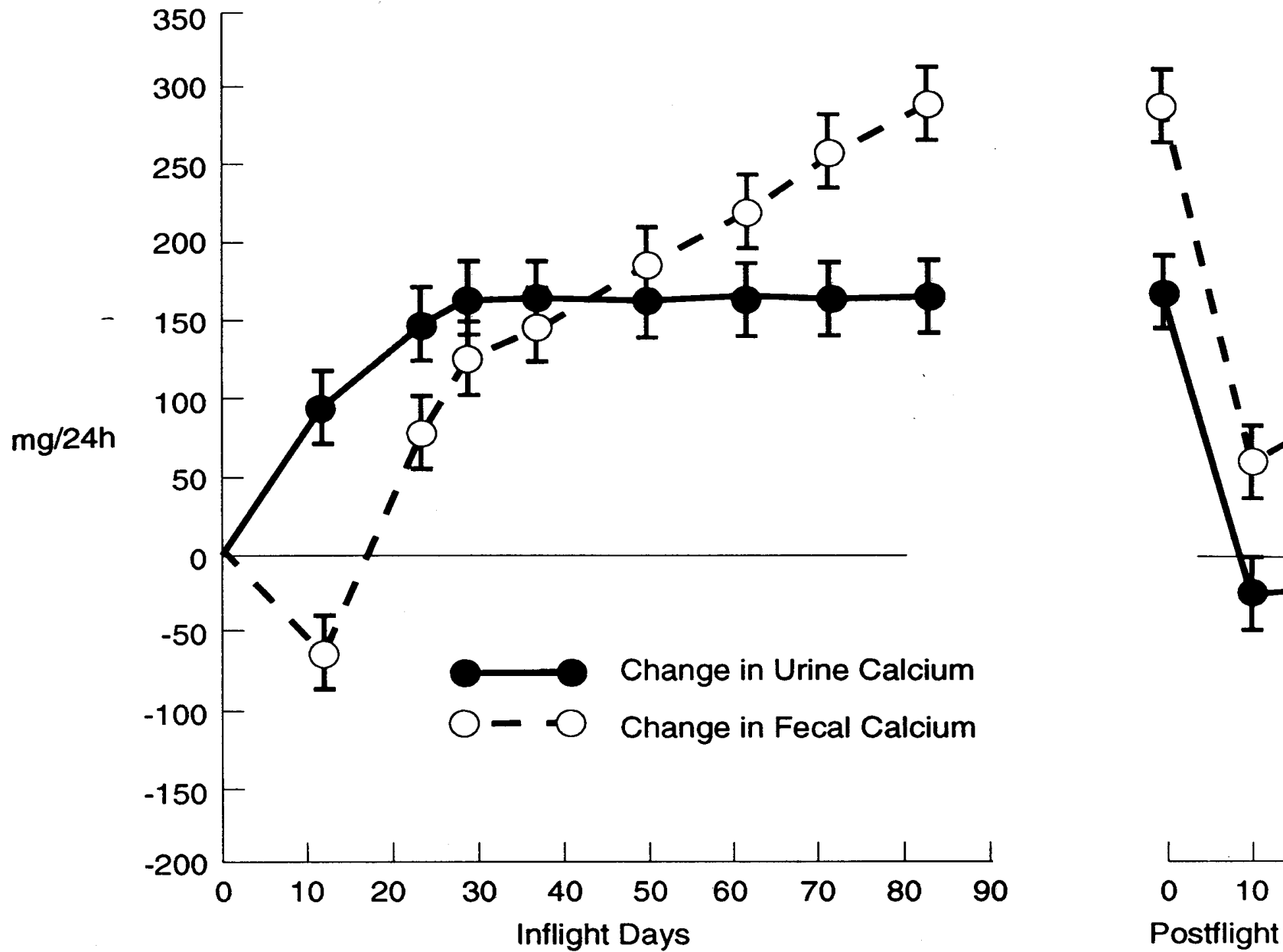


Calcium Balance in Space

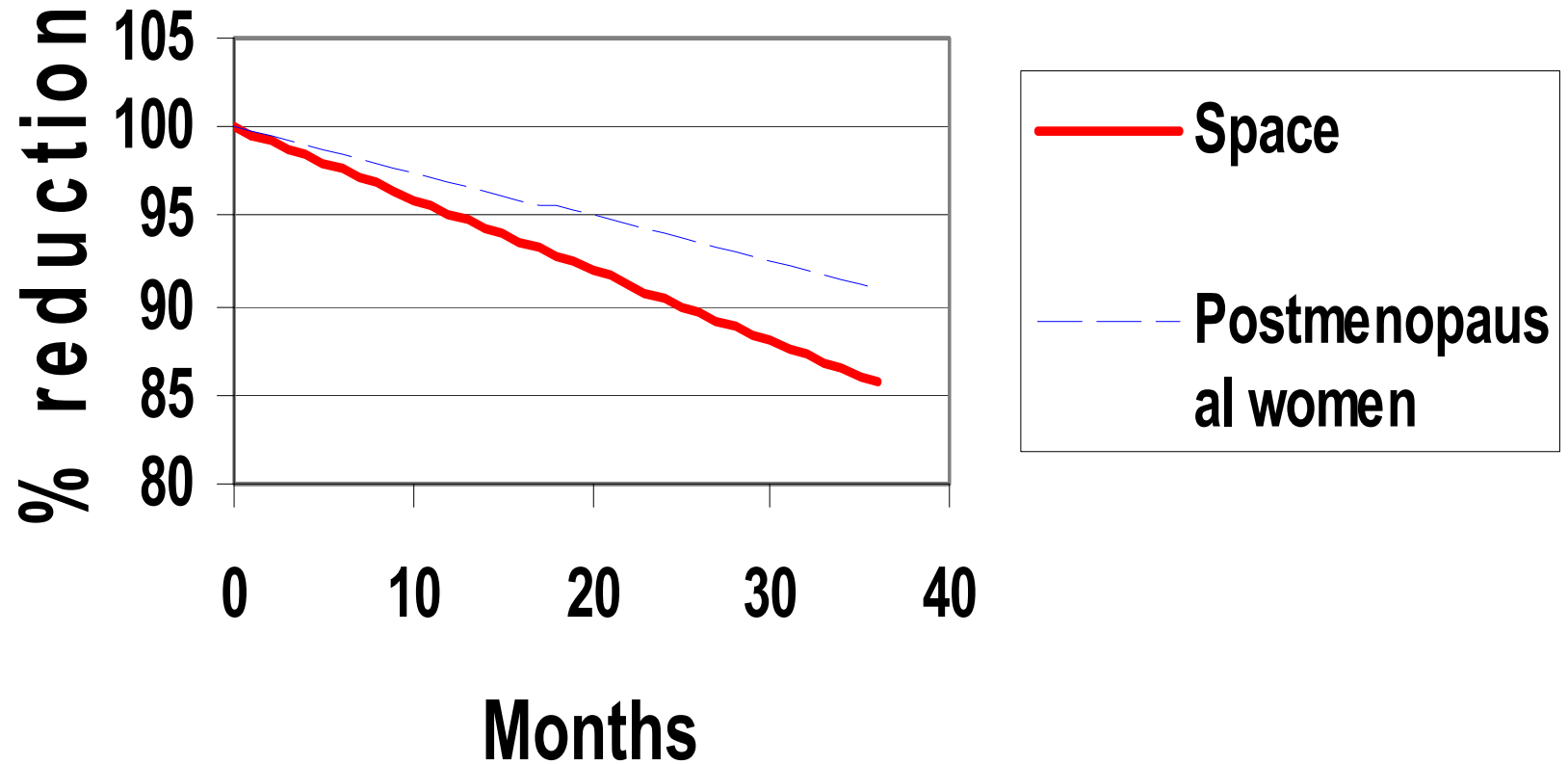
- Skylab (84 d) - Increased Ca output in urine and feces
- Calculated that after 1 y in space that 25% of Ca would be lost
- Recovery of Ca balance (urine/fecal) begins soon after return.

This could be a problem - Why?

Because bone is in a constant state of turnover. If the Ca balance returns to normal quickly, the bone density (strength) may never recover or recover very slowly.



Decrease in Bone mass



Bone strength

- Young rats, 7 d in space, decrease in:
 - bone growth
 - mineralization
 - mechanical bending strength
 - weight of lumbar spine
 - bone cell size
- No change in levels of calcitrol in kidney (involved in bone resorption)

What does this suggest about the mechanism?

Probably caused by inhibited bone formation (osteoblast), not to increased bone resorption (osteoclast).

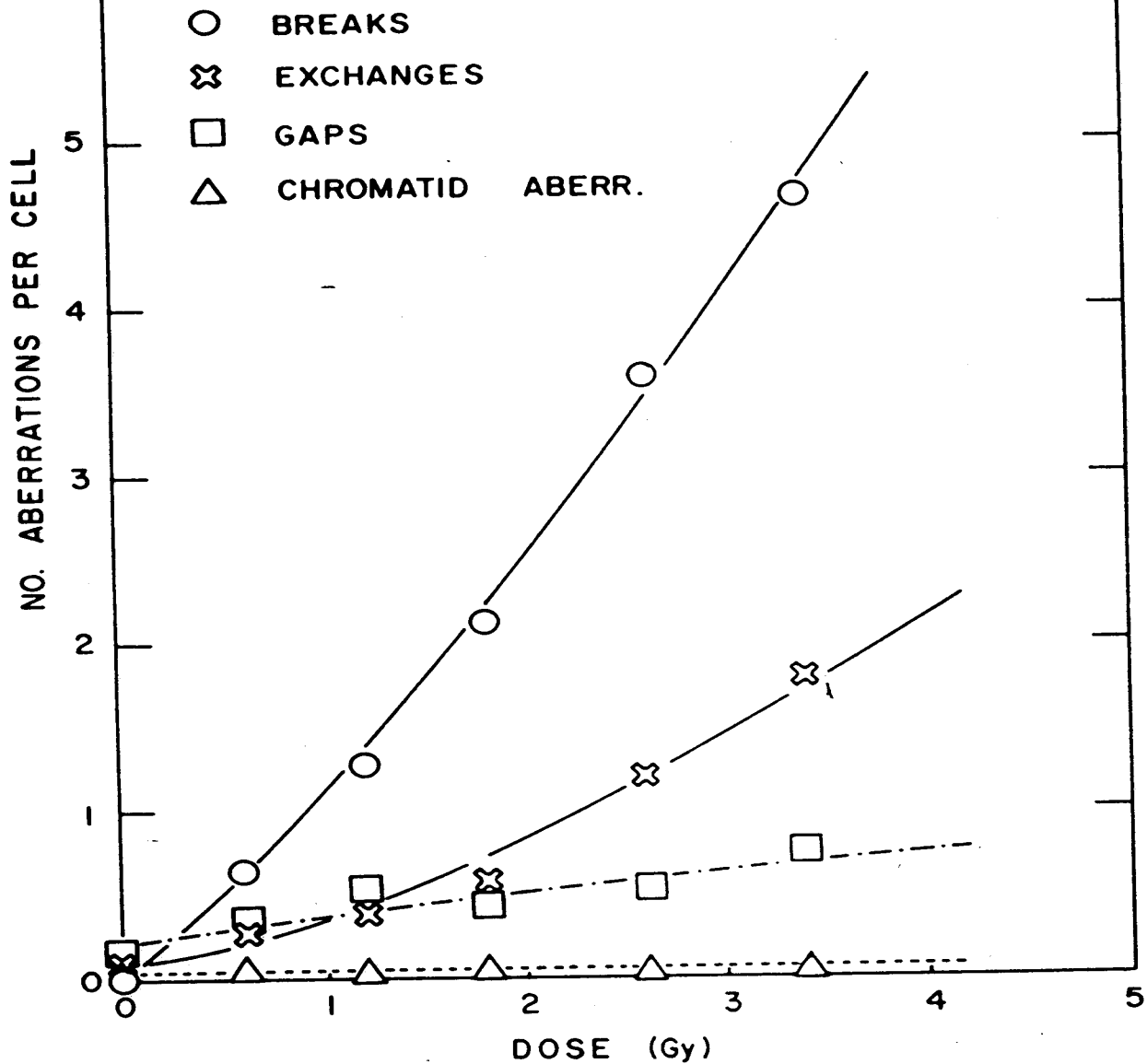
Countermeasures

- Weight loading exercises (still will be bone loss)
- Centrifugation (reduces Ca and P losses from rat long bones)
- Nutrition (supplement diet with Ca and P - *would this cause other problems?*)
- Drugs (fluoride and Clodronate have been effective in bed rest studies)

Radiation	RBE	Occurrence
X-rays	1	Radiation belts, Solar radiation, Bremsstrahlung
5 MeV γ -rays	0.5	Radiation belts, Solar radiation, Bremsstrahlung
1 MeV γ -rays	0.7	Radiation belts, Solar radiation, Bremsstrahlung
200 keV γ -rays	1.0	Radiation belts, Solar radiation, Bremsstrahlung
Electrons	1.0	Radiation belts
Protons	2.0 - 10.0	Cosmic radiation, Inner radiation belt
Neutrons	2-10	Close to the Earth, the Sun and any matter
α -particles	10-20	Cosmic radiation
Heavy particles		Cosmic radiation

Table III.3: RBE and Occurrence of Different Kinds of Radiation [26, 29]

Fe^{56} (600 MeV/u)
CONFLUENT C3H1O1/2 CELLS



Immune System

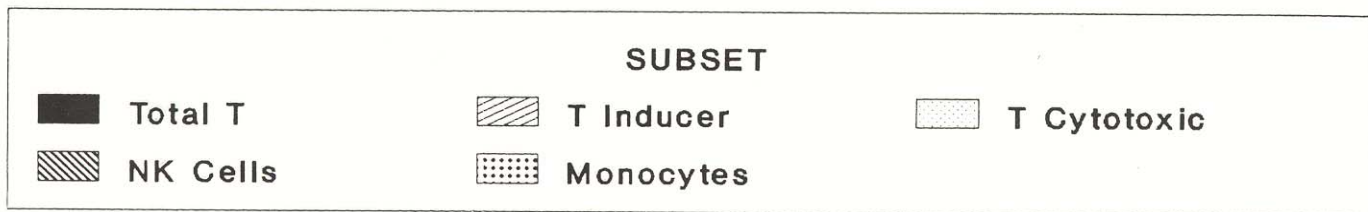
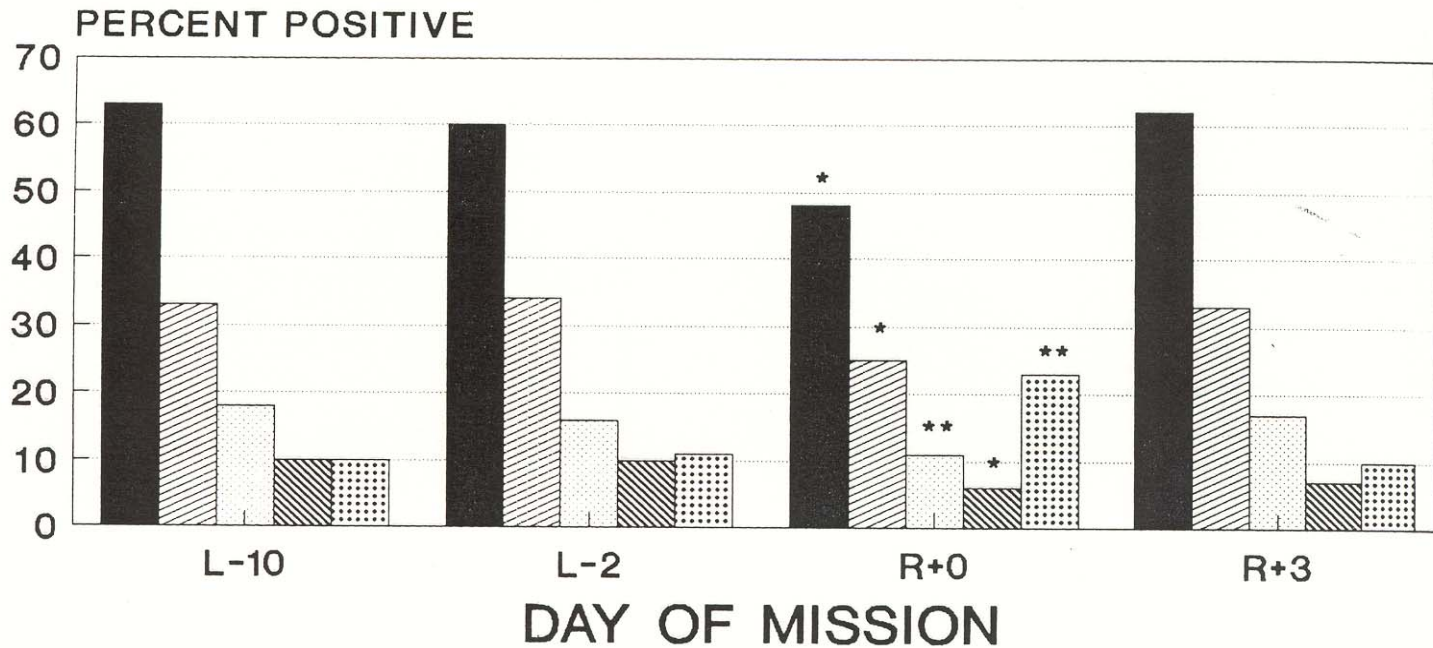


Human immune response may be attenuated during spaceflight

Results point to a decrease in the cell-mediated immune response

Must understand the effects of spaceflight on the microbial agents of disease as well as the human immune response

Immunological effects of space flight



* $p < 0.05$ ** $p < 0.001$

CREW DISPLAYS AND CONTROLS

Program	Panels	Work Stations	Control Display Elements	Computers No./Modes
Mercury	3	1	143	0
Gemini	7	2	354	1
Apollo	40	7	1374	4/50
Skylab	189	20	2980	4
Shuttle	97	9	2300	5/140
Space Station*	200	40	3000	8/200

*Assuming real-time control on board, database management from the ground.

TABLE 10-2

SPACE SYSTEM INFORMATION

Program	Displayed to Crew	Measurements Displayed at Mission Control	Totals*
Mercury	53	85	100
Gemini	75	202	225
Apollo			
Command Module	280	336	475
Lunar Module	214	279	473
Skylab			
Command Module	289	365	521
Air Lock Module	326	1,669	1,720
Shuttle	2,170	3,826	7,831
Space Station†	4,000	4,000	10,000

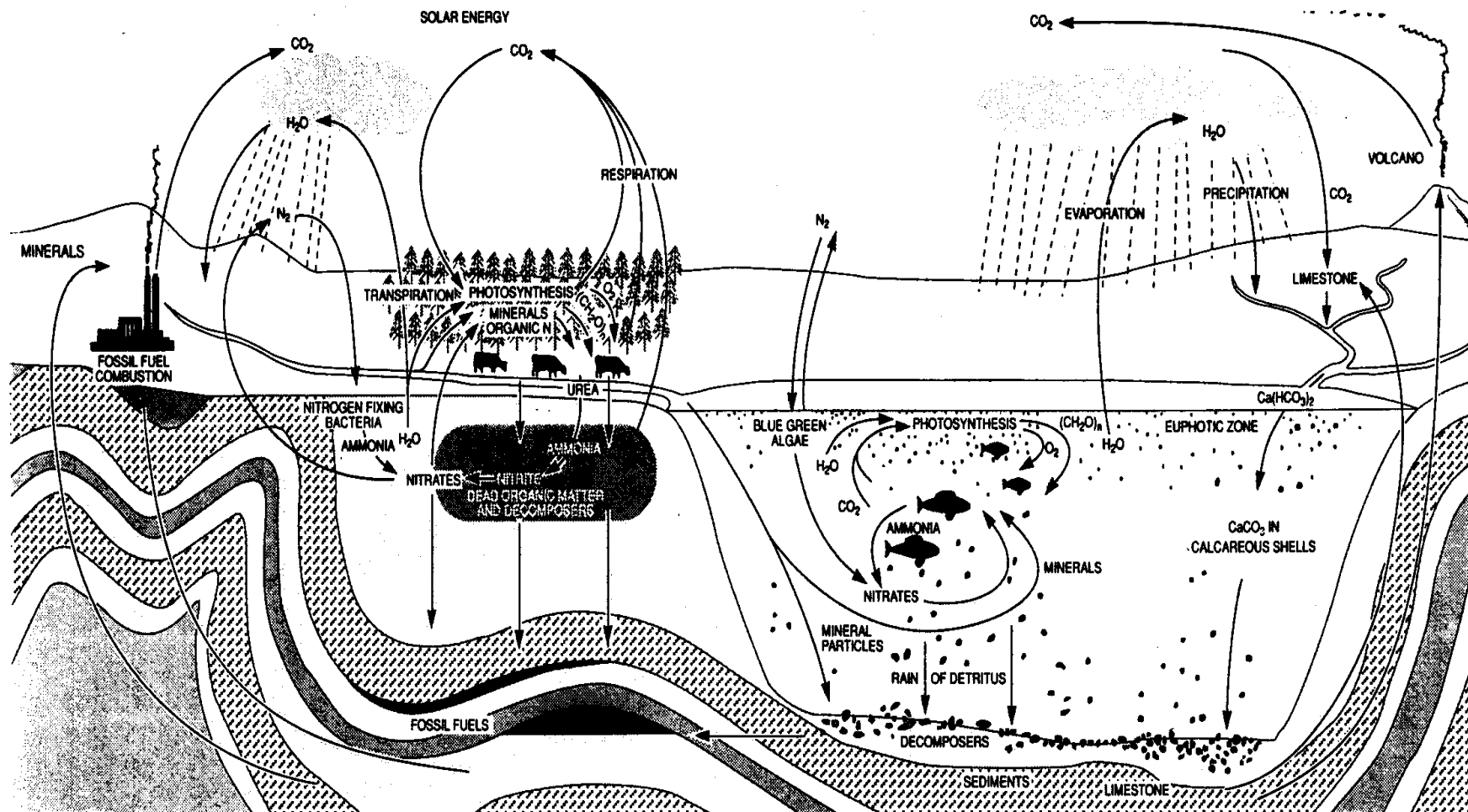


Figure II.13: The Major Cycles of the Biosphere [1]

TABLE 20-1

CLINICAL FINDINGS DURING AND AFTER BED REST AND SPACE FLIGHT

Findings	Bed Rest Position				Space Flight
	0°	-4°	-8°	-12°	
During Bed Rest or Space Flight					
Increased taste and olfactory sensitivity	-	+	+	++	+
Sensation of blood rushing to and heaviness in head	-	+	+	++	++
Nasal congestion	-	+	++	+++	++
Uncomfortable feeling in the nose and throat, hoarse voice	-	+	+	++	-
Increased intranasal resistance	+	+	++	+++	NM
Nausea, stomach awareness	-	-	R	R	+++
Spatial illusions	-	-	+	++	++
Nystagmus	-	-	+	++	++
Facial puffiness, overfilling of sclera and conjunctival vessels	-	+	++	++	++
Sensation of fullness in the eyes, fatigue in eyes during reading, decline in acuity	-	+	++	++	+
After Bed Rest or Space Flight					
Orthostatic intolerance	++	++	++	++	++
Decreased muscle strength	++	++	++	++	++
Loss of bone mineral	++	++	++	++	++
Ataxia	-	-	-	-	++

- = symptoms absent.

+ = symptoms present (++, +++ = pronounced symptoms).

R = symptoms rarely present.

NM = not measured.

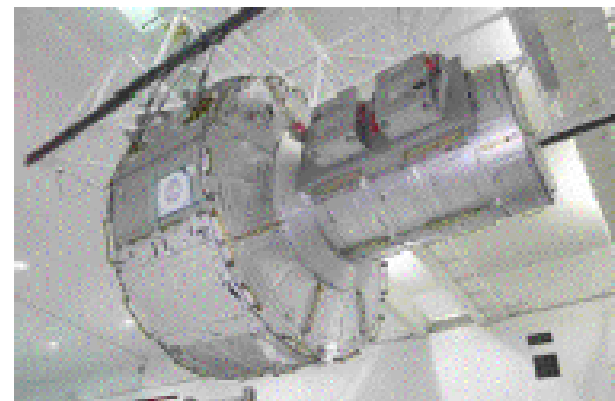
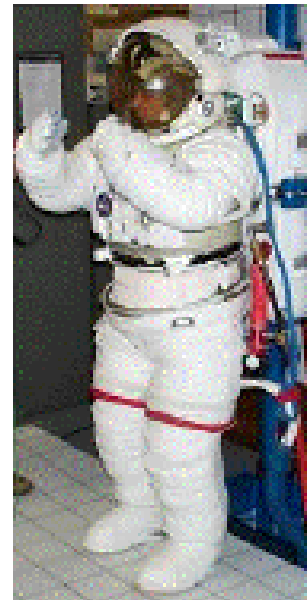
(Adapted from Kakurin et al., 1976.)



Current State of EVA

Existing NASA EVA architecture is over 24 years old (1977) and has evolved from Apollo, Skylab and Shuttle technology and operations.

All current EVA systems are only compatible with low earth orbit zero-G activities and require costly regular ground based maintenance, resupply and monitoring.



Space Fatalities

- Soviet Space Program
 - 1 Fatality – Soyuz 1 (1967) parachute entanglement during reentry
 - 3 Fatalities – Soyuz 11 (1971) cabin decompression during reentry
- U.S. Space Program
 - 3 Fatalities – Apollo 1 pad fire
 - 7 Fatalities – Challenger STS 51L (1986) launch breakup

Medical Evacuation from Space

- Salyut 5 (1976) station abandoned 49 days into 54 day mission for intractable headaches
- Salyut 7 (1985) evacuation at 56 days into 216 day mission for sepsis/ prostatitis
- Mir (1987) evacuation at 6 months into 11 month mission for cardiac dysrhythmia

Medical events in Russian Space Program

- Events not resulting in mission termination or early return
 - Spacecraft fires - 1971, 1977, 1988, 1997
 - Kidney Stone - 1982
 - Hypothermia during EVA - 1985
 - Psychological stress reaction - 1988
 - Spacecraft depressurization -1997
 - Toxic atmosphere - 1997

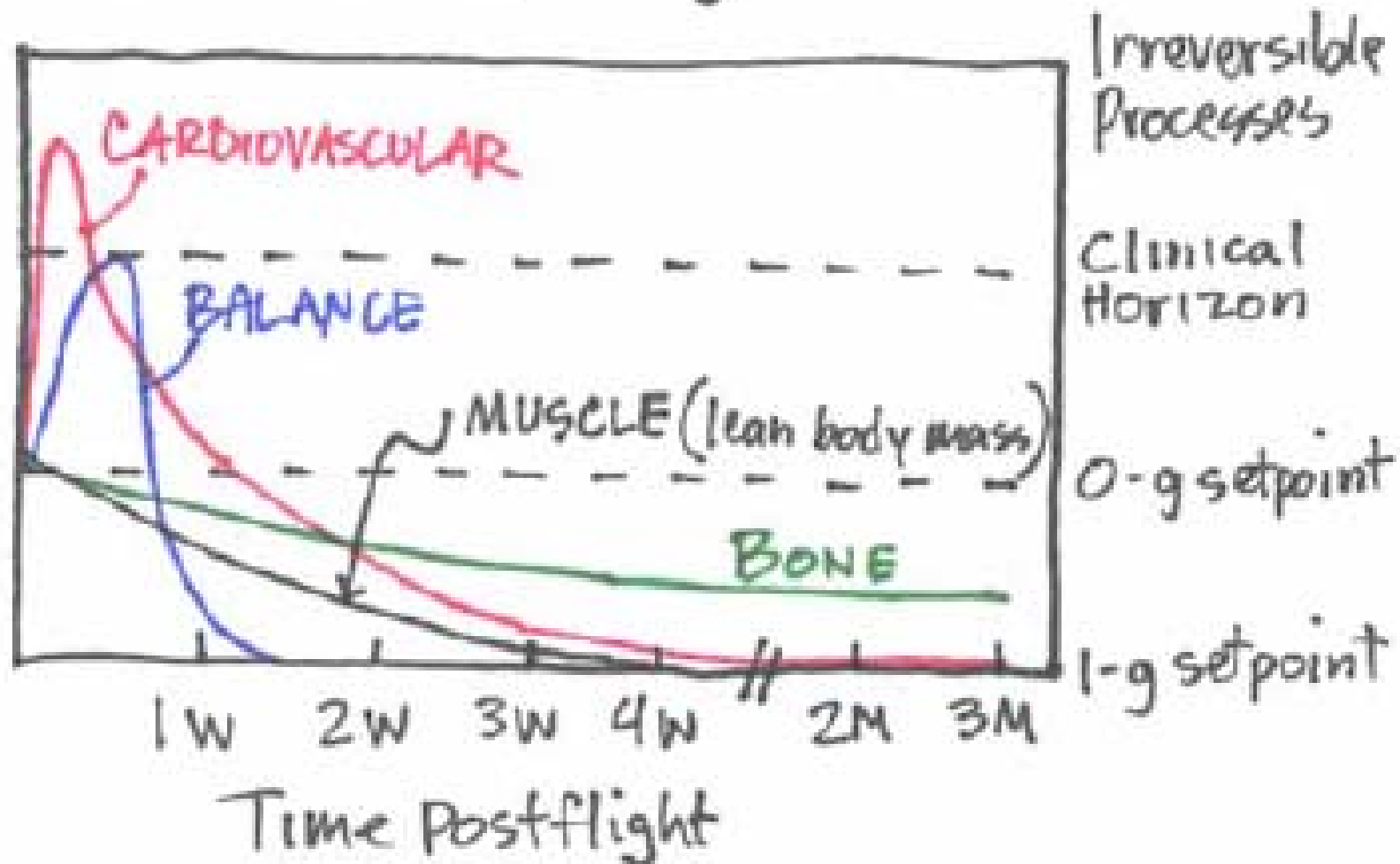
Medical events in U.S. Space Program

- Apollo 8 crew – 1st Americans to report SMS
- Apollo 9 - SMS caused EVA to be rescheduled (1st timeline change due to medical cause)
- Apollo 11 – Type 1 DCS in command module pilot
- Apollo 13 – Kidney infection during mission
- Apollo 15 – Cardiac dysrhythmia
 - (PVC, PAC, bigeminy) during lunar EVA

Medical symptoms in U.S. Space Program

- Shuttle program (89 shuttle missions) 1981-1998
- 508 crew (439 men, 69 women)/ 4443 flight days
 - 79% reported Space Motion Sickness
 - 98% reported some medical symptom
 - 67% reported headache
 - 64% reported respiratory complaints
 - 59% reported facial fullness
 - 32% reported gastrointestinal complaints
 - 26% reported musculoskeletal complaints

RE-ADAPTATION TO 1xg



SIGNIFICANT BIOMEDICAL FINDINGS IN THE APOLLO PROGRAM (PRE- VS. POSTFLIGHT)

Vestibular disturbances

Less than optimal food consumption (1260–2903 kcal/day)

Postflight dehydration and weight loss (recovery within 1 week)

Decreased postflight orthostatic tolerance (tilt/LBNP tests)

Reduced postflight exercise tolerance (first 3 days)

Apollo 15 cardiac arrhythmias (frequent bigemini)

Decreased red cell mass (2–10%) and plasma volume (4–9%)

LBNP = Lower-body negative pressure.

MICROGRAVITY

REDUCED HYDROSTATIC GRADIENTS

ALtered Vitelline Partition

Altered Skeletal Matrix Interaction

REDUCED LOADING AND DISUSE OF WEIGHT-BEARING TISSUES

WEIGHT SHIFT OF ICS FLUID

ALtered Bone Density

ALtered Body Metabolism

MUSCLE ATROPHY

BONE DEMINERALIZATION

REDISTRIBUTION OF CIRCULATING BLOOD

ALtered Renal Kidney Hemodynamics

ALtered Hemorrhagic Response

ALtered Muscle Metabolism

ALtered Urine Function

ALtered Cellular Metabolism and Cytosolic Homeostasis

ALtered Salt Function and ICS

ALtered Blood Pressure Function

ALtered Pulmonary Function

ALTERED ION AND COMPOSITION

ALtered Plasma Electrolytes

ALtered Bone Metabolism

ALtered Urine Function

ALtered Microcirculatory Function and Peripheral Tone

REDUCED OSTEOBLAST TOGETHER

REDUCED BONE TISSUE CAPACITY

LOSS OF ION ELECTROLYTE PUMP AND GATE

SUPPRESSED SYNTHESIS

LOSS OF FIBROBLAST PUMP AND GATE

REDUCED TOTAL BLOOD VOLUME

LOSS OF BODY WATER AND SALT



Human Research Initiative: Enabling Longer Duration Human Spaceflight

SpaceResearch.nasa.gov
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B
P
R**

Office of
Biological
& Physical
Research

- **For future missions beyond low Earth orbit**
 - Improved therapies to prevent bone and muscle loss in space
 - New technology for quickly and accurately monitoring crew health
 - **Improved performance and reliability of microgravity systems for power, propulsion, and environmental control**
 - Reduce, by a factor of three, the time to conduct critical research to certify crew safety for missions beyond low Earth orbit over 100 days
 - Results from space will have applications for improved health care on Earth

For efficiency of life support in space

- Enables knowledge and technology to reduce mass to orbit and beyond for life support by a factor of 3 by 2010
- Improve fire prevention, detection and suppression in space
- Research can be translated into methods for monitoring and identification of biological and chemical agents

