

# HEART SOUNDS

By

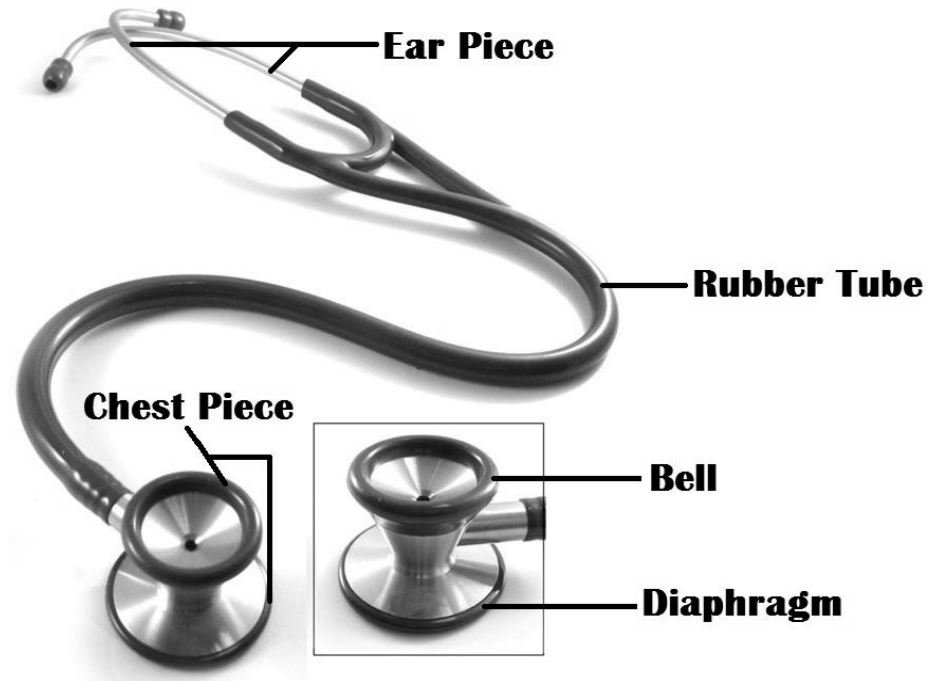
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# Objectives

- To understand why the different heart sounds are produced.
- To know the sites at which heart sounds are best recorded.
- To recognize the value of phonocardiography.

# Auscultation Method

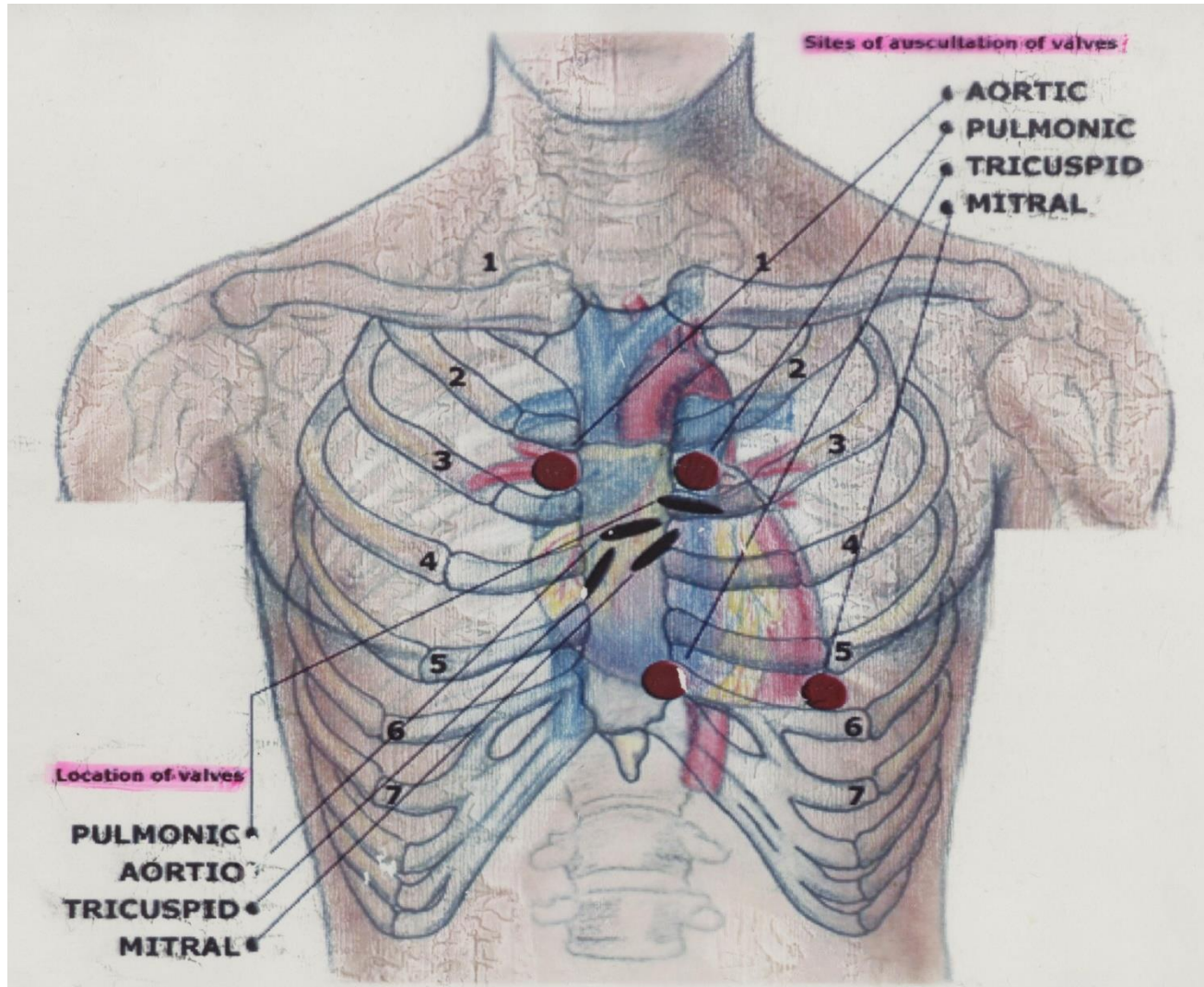
## The stethoscope



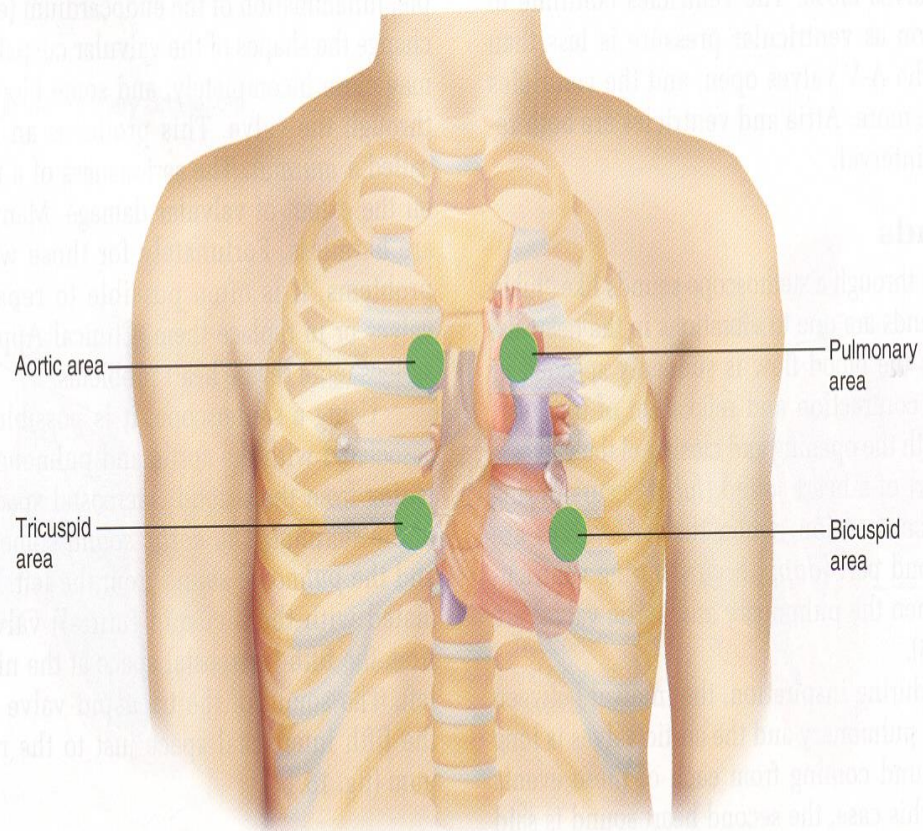
# The position of the patient

- The heart should be auscultated when the patient is in the following positions:
- Supine.
- Left lateral.
- Sitting.

# Areas of auscultation



# Areas of auscultation



**FIGURE 15.17**

Thoracic regions where the sounds of each heart valve are most easily heard.

- **The mitral area (apex):** This is found in the left 5<sup>th</sup> intercostal space, approximately 1 cm medial to the mid-clavicular line.
- **The tricuspid area:** This is found just to the left of the lower border of the sternum.
- **The pulmonary area:** This is found in the left 2<sup>nd</sup> intercostal space at the sternal border.
- **The aortic area:** This is found in the right 2<sup>nd</sup> intercostal space at the sternal border.

# Phonocardiography

Phonocardiography is the sensitive technique, by which a recording can be made of all four heart sounds by placing a transducer on specific areas of auscultation.



# First heart sound (S<sub>1</sub>)

- It is always normal. It sounds as “lub”. It is also called S<sub>1</sub>.
- It is usually prolonged, but dull in nature.
- It is caused by the closure of AV valves.
- It is best heard when auscultated at mitral and tricuspid areas.
- It occurs at the beginning of ventricular systole in relation to cardiac cycle.
- It occurs just after QRS complex if we relate it to ECG
- Frequency: 50-60 Htz
- Time: 0.15 sec

# Second heart sound (S2)

- It is always normal. It sounds as “dub”. It is also called S<sub>2</sub>.
- It is usually short and sharp in nature.
- It is caused by the closure of semi-lunar valves.
- It is best heard when auscultated at aortic and pulmonary areas.
- It occurs at the beginning of ventricular diastole in relation to cardiac cycle.
- It occurs just after T wave if we relate it to ECG.
- Frequency: 80-90 Hz
- Time: 0.11 sec

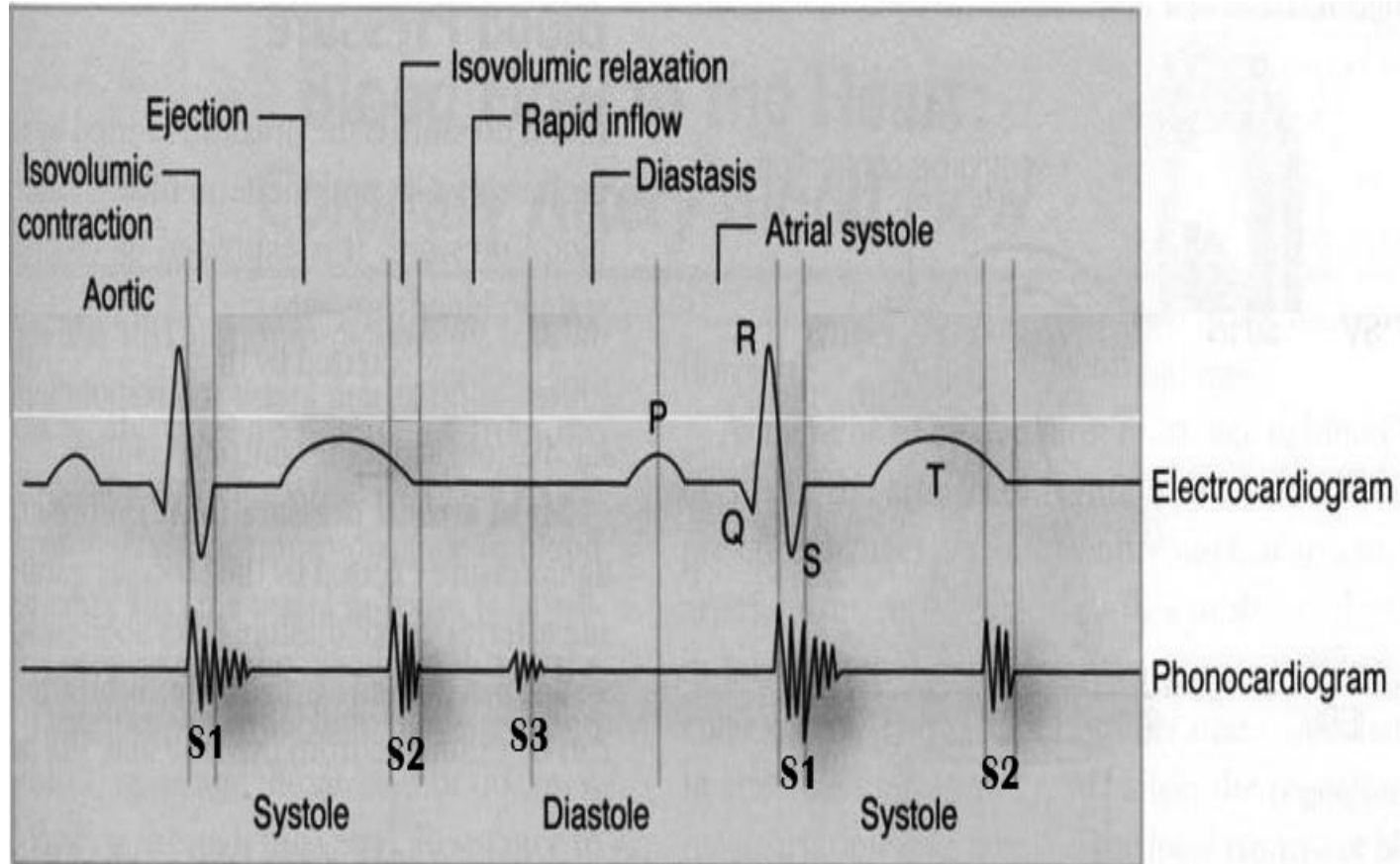
# Third heart sound (S3)

- It may be heard normally in children, thin adults, and pregnant women or after exercise. It is also called  $S_3$ .
- It is caused by the striking of the blood to the wall of ventricles during rapid filling phase of ventricular diastole.
- It occurs in the early diastole in relation to cardiac cycle.
- Frequency: 20-30 Htz
- Time: 0.1 sec

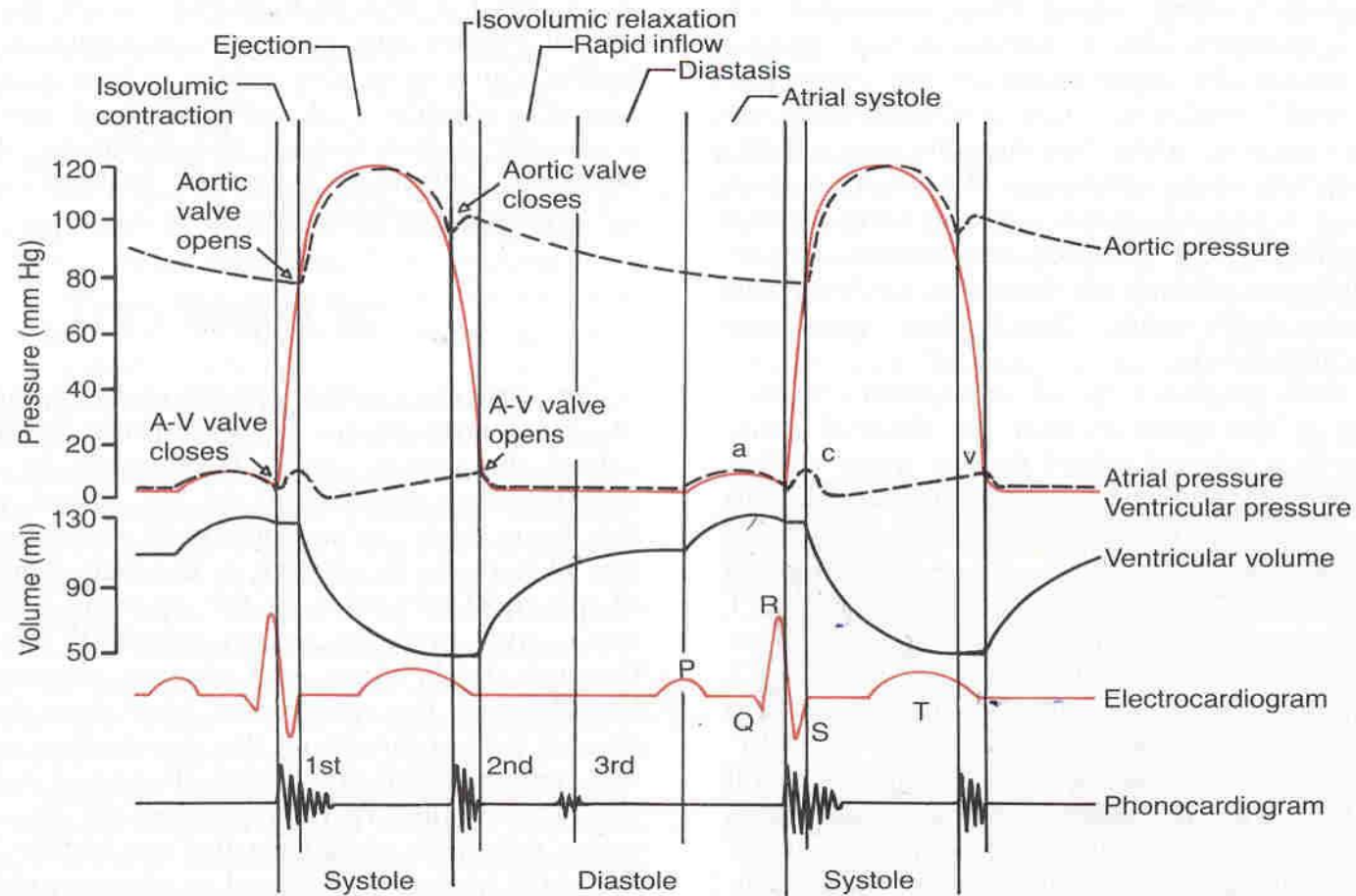
# Fourth heart sound (S4)

- It may be heard normally in older people. It is also called  $S_4$ .
- It is caused by the forceful contraction of atria.
- It occurs just before the first heart sound during late diastole in relation to cardiac cycle.
- Frequency:  $< 20$  Htz

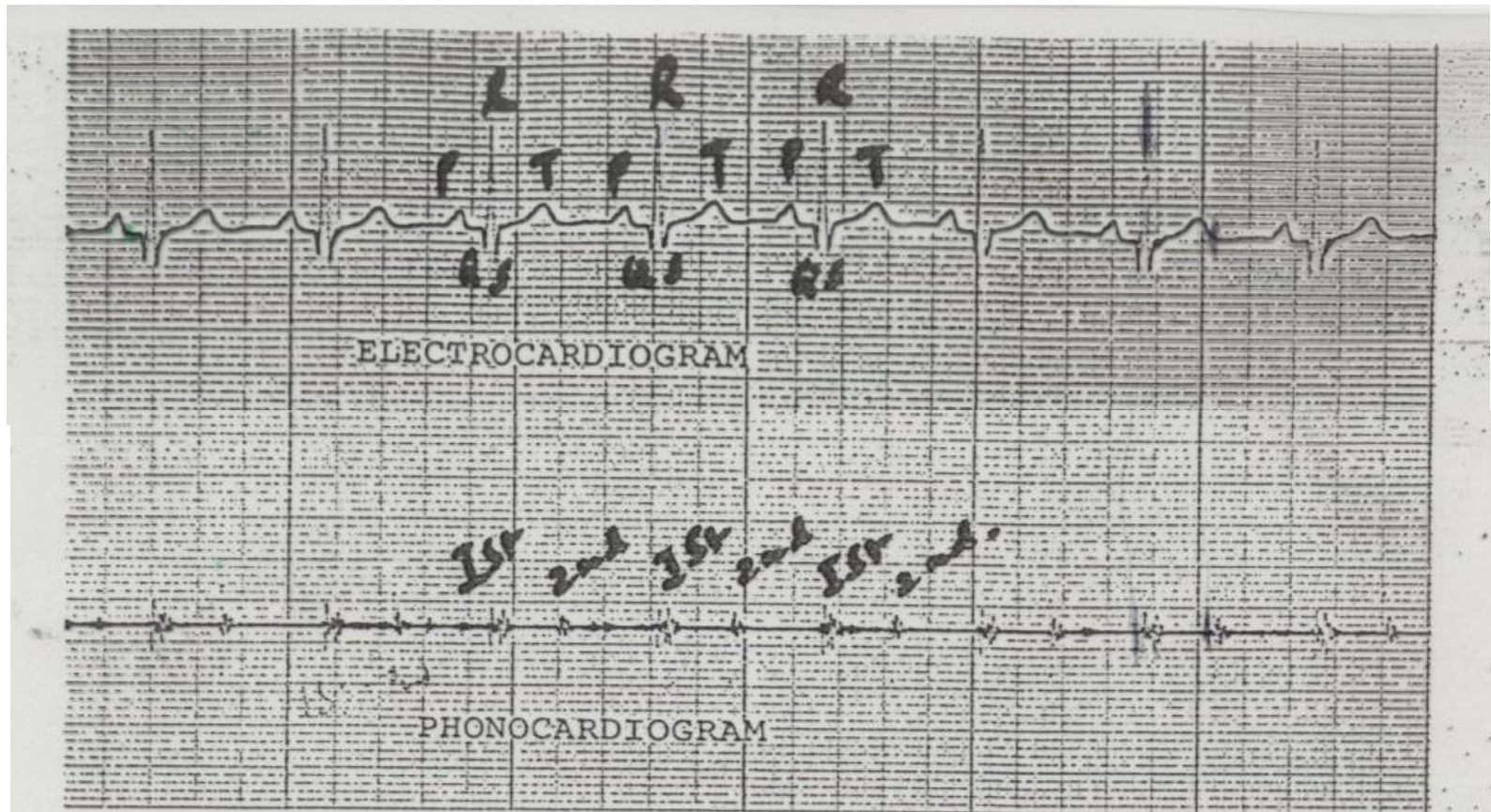
# Heart sounds using Phonocardiography



# The Events of the Cardiac Cycle



# Relationship of heart sound with ECG



# Splitting of second heart sound $A_2$ - $P_2$

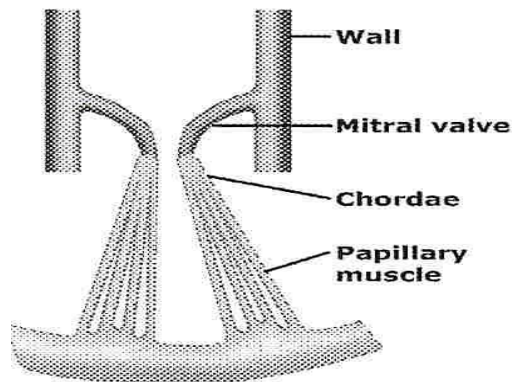
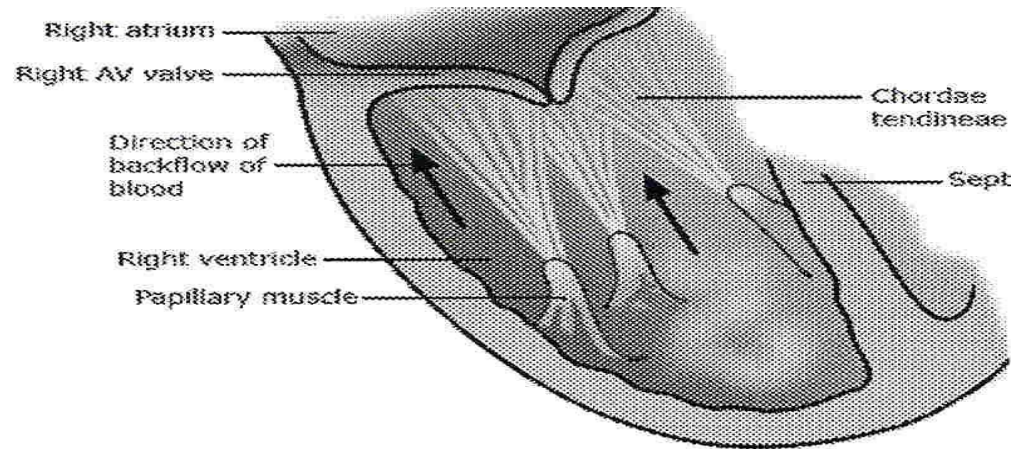
- Physiologic splitting of the 2<sup>nd</sup> heart sound occurs during deep inspiration when the  $A_2$  component splits from the  $P_2$  component by more than 0.2 seconds.
- It is auscultated as “dub, dub” over the aortic or pulmonary areas



# Heart Murmurs

Murmurs are abnormal sounds produced due to abnormal flow of blood through abnormal heart valves e.g. stenosis or regurgitation.

# Function of papillary muscle & Chordae tendineae



**Thank you**