



COMPARISON OF SpO₂ IN DIFFERENT FINGERS OF DOMINANT AND NON-DOMINANT HAND OF RIGHT AND LEFT-HANDED SUBJECTS

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ABSTRACT

Pulse oximetry is a frequently used tool in measuring SpO_2 . It gives valuable information about arterial oxygen content, tissue perfusion and heart beat rate. This study compares capillary haemoglobin oxygen saturation (SpO_2) values among every finger of the two hands in subjects with different handedness. SpO_2 measurement from the fingers of the both hands with the pulse oximetry, the middle finger and thumb have statistically significant higher value when compared with others fingers of the hand. But no statistically significant difference is found in between dominant and non- dominant hand.

Key Words

Pulse Oximetry, SpO₂, handedness.

INTRODUCTION

The human eye is poor at recognizing hypoxemia. Even under ideal conditions, skilled observers cannot consistently detect hypoxemia until the oxygen (O_2) saturation is below 80%. Peripheral capillary oxygen saturation (SpO₂) measured by pulse oximeter, is a simple and reliable objective measurement in routine medical practice that approximates the level of oxygen in arterial blood. Measurements with this inexpensive and non-invasive method also provide heart rate and an indication of tissue perfusion (pulse amplitude). Low perfusion (due to hypothermia, low cardiac output, increased systemic vascular resistance, profound anaemia or etc.), venous pulsations in a dependent limb, nail polish, excessive ambient light or motion can cause pulse oximetry artifact. Also, carboxy-hemoglobinemia, methemoglobinemia and intravenous dyes can cause false SpO2 readings (Butterworth et al. 2013; Chan et al. 2013; De Meulenaere 2007)^{1,2,3}. There have been few studies suggesting use of right middle finger and





right thumb gives the most accurate value that reflect the arterial oxygen saturation in righthanded volunteers (Basaranoglu 2015)⁴. There has been no study comparing the effect of handedness on SpO₂ values from different fingers.

The aim of this study is to determine if there is difference of SpO_2 values in different fingers of dominant and non-dominant hand of right and left-handed subjects.

METHODS AND MATERIAL

This is a cross sectional study which was conducted at Late Shri Lakhiram Agrawal Memorial Govt Medical College, Raigarh after obtaining approval from institutional Ethical committee. 70 healthy volunteer of age group 18 to 30 were enrolled for the study after obtaining written informed consent. The subjects were selected after completion of Edinberg Handedness inventory (Figure-1). All subjects with score of > +40 were considered to be Right-handed, -40 to +40 were considered to be ambidextrous and < -40 score were considered to be left-handed. Subjects with history of smoking, undergoing menstruating, having positive Allen test showing ulnar or radial artery failure, having hypotension, anaemia, haemoglobinopathy or bradycardia were excluded from the study.

STUDY PROTOCOL

- 1. Subjects were asked to observe 8 hours of fasting before the test. Subjects were asked to remove any nail paint if present on the fingers.
- 2. After 5 minutes of resting blood pressure, Heart rate and bod temperature was recorded.
- 3. Pulse oximetry was recorded in each finger in ambient light with 1-minute waiting between each finger. The subjects were asked to keep the hand steady during the procedure to prevent motion artifacts. Abbreviations used for various fingers in used is shown in table-1.

Finger	Abbreviations
Right Thumb	R1
Right Index finder	R2
Right Middle Finger	R3

Table 1 - Abbreviations used for various fingers





Finger	Abbreviations
Right ring finger	R4
Right Little Finger	R5
Left Thumb	L1
Left Index Finger	L2
Left Middle Finger	L3
Left Ring Finger	L4
Left Little Finger	L5

STATISTICAL ANALYSIS

Repeated Anova test was used to compare measurements. If there was significant result a post hoc Bonferroni test was used to evaluate all multiple comparisons (p < 0.05 was considered to be statistically significant.

RESULTS

A total of 70 volunteers participated in the study. In 70 volunteers 35 were right-handed, 20 left-handed and 15 ambidextrous. The demographic profile of the subjects is given in table -2. SpO₂ was recorded of all the 10 fingers of each participant hand and total of 700 fingers were evaluated. Comparison of mean SpO₂ values in different fingers of right-handed, left-handed and ambidextrous subjects is given in table-3.

Table 2 Demographic profile of the subjects.

Parameters	Right-Handed	Left-handed	Ambidextrous
Subjects	35	20	15
Male	20	12	8
Female	15	8	7





Parameters	Right-Handed	Left-handed	Ambidextrous
Age(years)	23.26 ± 3.2	24.21 ±2.4	23.61 ± 3.6
SBP (mm/Hg)	118.6 ± 9.6	117.4 ± 7.6	118.3 ± 10.5
DBP (mm/Hg)	76.4 ± 12.3	75.6 ± 9.3	76.5 ± 8.6
Heart Rate(/min)	74 ± 5.4	75 ± 6.3	74 ± 8.2
Temp(⁰ C)	36.03 ± 0.2	36.01 ± 0.4	36.07 ± 0.5

Table 3: - Mean SpO₂ in various subjects.

Finger	Right-Handed	Left-handed	Ambidextrous
R1	98.02 ± 1.04	97.74 ± 1.15	97.89 ± 1.17
R2	97.79 ± 1.21	97.56 ± 1.34	97.67 ± 1.64
R3	98.29 ± 1.3	97.72 ± 1.65	98.05 ± 1.94
R4	97.71 ± 1.4	97.65 ± 1.3	97.58 ± 1.20
R5	97.20 ± 1.19	97.21 ± 1.33	97.41 ± 1.33
L1	97.69 ± 1.13	98.03 ± 1.14	98.01 ± 1.04
L2	97.24 ± 1.34	97.79 ± 1.21	97.89 ± 1.41
L3	97.85 ± 1.94	98.21 ± 1.2	98.09 ± 1.2
L4	97.58 ± 1.20	97.71 ± 1.3	97.61 ± 1.5
L5	97.21 ± 1.23	97.30 ± 1.29	97.30 ± 1.39

The highest SpO_2 in right-handed subjects was found in right middle finger followed by right thumb and left middle finger while lowest was found in right and left little finger. The mean SpO_2 in right middle finger was found to be statistically significant as compared to left and right little finger. With Rest of the fingers the difference was not statistically significant in right-handed subjects.





In left-handed subjects highest SpO_2 was recorded in left middle finger followed by left Thumb. The mean SpO_2 in left middle finger was found to be statistically significant with right little finger. With rest of the fingers the difference was not statistically significant.

In ambidextrous highest SpO₂ was found in left middle finger followed by right middle fingers and no difference in SpO₂ between fingers was found to be statistically significant.

DISCUSSION

According to our study 70 volunteers participated in which 35 subjects were with right hand dominance, 20 subjects with left hand dominance and 15 subjects were ambidextrous. In right and left-handed subjects, middle finger of the dominant hand had the highest average SpO₂ value with the pulse oximetry while in ambidextrous subject's highest average SpO₂ was recorded in right middle finger. This is in concurrence with Basaranoglu et al where highest average SpO₂ was recorded in right middle fingers of right-handed participants.

According to Mizukoshi et al. 2009⁵ Perfusion Index (PI) value gave different results in each finger (ANOVA, p and the PI value of the middle finger was measured as the highest both during normo-perfusion and hypoperfusion, but no remarkable difference was found in SpO₂ values between fingers. Index finger dominantly is fed from deep palmar arcus created from radial artery. But middle fingers receive both ulnar and radial artery blood supply, so due to increase perfusion Index it shows higher recorded SpO₂. The difference of SpO₂ recordings between different fingers may not be clinically important, but this knowledge may be valuable in conditions with poor peripheral perfusion. Dominant hand and higher perfusion may explain the highest value in middle finger.

According to Basaranoglu et al in the non-dominant hand, the size of the finger may become a negative contributing factor that determines the SpO_2 recording. But in our study the difference in mean SpO_2 recording between middle finger of dominant and non-dominant hand was not significant.

Higher perfusion in the middle finger seems reasonable to expect the highest and most accurate SpO_2 value. According to the results of our study, we believe that the middle finger of the 6 |Chikitsak-October 2021





dominant hand has the highest and possibly the most accurate SpO₂ measurements. The main limitation of our study the SpO2 measure by pulse oximetry was not corroborated by arterial blood gas analyses and PI parameters.

Figure-1 Edinburgh handedness inventory

Your Initials		
Please indicate with a check (\checkmark) your preference following tasks	ce in using your	left or right hand in the
Where the preference is so strong you would no forced to, put two checks ($\checkmark \checkmark$).	ever use the othe	er hand, unless absolutel
f you are indifferent, put one check in each col	lumn (✓ ✓).	
Some of the activities require both hands. In the which hand preference is wanted is indicated in		rt of the task or object f
Task / Object	Left Hand	Right Hand
1. Writing		
2. Drawing		
3. Throwing		
4. Scissors		
5. Toothbrush		
6. Knife (without fork)		
7. Spoon		
8. Broom (upper hand)		
9. Striking a Match (match)		
10. Opening a Box (lid)		
Total checks:	LH =	RH =
Cumulative Total	CT = LH + RH =	
Difference	D = RH - LH =	
Result	$R = (D / CT) \times 100 =$	
Interpretation: (Left Handed: R < -40) (Ambidextrous: -40 ≤ R ≤ +40) (Right Handed: R > +40)		

CONCLUSION

In conclusion, SpO_2 measurement from the fingers of the both hands with the pulse oximetry, the middle finger and thumb of dominant hand have higher average value when compared with non-dominant hand but this difference is not statistically significant. We assume that middle finger is most appropriate for measurement of SpO_2 by pulse oximeter as compared to Index or little finger but no difference between middle finger of dominant and non-dominant hand.





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