

Biology 112

Study Notes Exam 5

Chapter 13: Cardiovascular System

Introduction

Cardiovascular system: a pump (the **heart**) that delivers blood to vessels (**arteries**) that circulate blood throughout the body; materials in blood are exchanged with cells through tiny vessels (**capillaries**); blood is returned to the heart by another group of vessels (**veins**)

- **pulmonary circuit:** blood vessels that carry blood to & from the lungs
 - o sends deoxygenated blood to lungs to pick up oxygen & unload carbon dioxide
- **systemic circuit:** blood vessels that carry oxygenated blood to body tissues & return deoxygenated blood with wastes to heart

Structure of Heart

- heart size varies; an average adult heart is about 14 cm long x 9 cm wide
- heart is within *mediastinum*; bordered laterally by lungs, posteriorly by vertebral column & anteriorly by sternum
- extends 12-14 cm within mediastinum, from 2nd rib to 5th intercostal space
- **base:** attaches to large vessels; superior/posterior aspect of heart
- **apex:** pointed inferiolateral aspect of heart; pointed slightly to left
- **pericardium:** double-walled sac enclosing heart
- **fibrous pericardium:** outer dense connective tissue layer
 - o anchors heart to surrounding structures (diaphragm, vessels)
- **serous pericardium:** deep to fibrous pericardium
 - o **parietal layer:** lines internal surface of fibrous pericardium
 - o **visceral layer (epicardium)** – deep to parietal layer; outer layer of heart wall
- **skeleton of the heart:** fibrous connective tissue anchored to vessels & septum; strengthens & holds tissue together

Layers of heart wall:

- **epicardium:** visceral layer of serous pericardium; often accumulates fat
- **myocardium:** cardiac muscle deep to epicardium; bulk of heart tissue
 - o branched cardiac muscle cells linked by connective tissue fiber bundles (collagen & elastin) – fibrous skeleton of heart
- **endocardium:** thin inner myocardial surface; sheet of endothelium (squamous epithelium) resting on connective tissue
- lines chambers & valves; continuous with endothelial linings of major vessels

Heart Chambers & Valves

- **atria:** upper chambers; receiving chambers for blood
 - o **auricles:** small protruding appendages that slightly increase atrial volume

- **right atrium** receives deoxygenated blood from **superior vena cava** (from areas above diaphragm), **inferior vena cava** (from areas below diaphragm), & **coronary sinus** (from myocardium)
- **left atrium** receives oxygenated blood from **pulmonary veins** (4, from lungs)
- **ventricles**: lower chambers; discharging (pumping) chambers for blood
 - **papillary muscles**: conelike muscle bundles in ventricular cavity; attached to tendon (*chordae tendineae*) that play a role in valve function
 - **right ventricle** pumps blood into **pulmonary trunk** (to lungs)
 - **left ventricle** pumps blood into **aorta** (to systemic circulation/body tissues)
- **septum**: separates atria & ventricle on left side from right side
- **atrioventricular (AV) valves**: prevent backflow of blood from ventricles to atria
 - **tricuspid valve**: right AV valve; has 3 cusps (flaps of endocardium reinforced with CT)
 - **bicuspid (mitral) valve**: left AV valve
 - *chordae tendineae*: collagen cords attached to AV valve flaps; anchor cusps to papillary muscles
- **semilunar (SL) valves**: prevent backflow of blood from great vessels to ventricles
 - **aortic valve**: prevents blood from flowing back into **left** ventricle following ventricular contraction
 - **pulmonary valve**: prevents blood from flowing back into **right** ventricle following ventricular contraction

Pathway of blood through heart:

- **pulmonary circuit**: blood vessels that carry blood to & from the lungs
- **systemic circuit**: blood vessels that carry oxygenated blood to & from body tissues
- **superior & inferior vena cava and coronary sinus** → **right atrium** → (**tricuspid valve**) → **right ventricle** → (**pulmonary semilunar valve**) → **pulmonary trunk** → **pulmonary arteries** → **lungs** → **pulmonary veins** → **left atrium** → (**bicuspid valve**) → **left ventricle** → (**aortic semilunar valve**) → **aorta** → **body tissues**

Coronary Circulation: functional blood supply of heart (myocardium)

- **coronary arteries**: arise from the base of the **aorta**; carry oxygenated blood to myocardium of atria & ventricles
- **cardiac veins**: carry deoxygenated blood from myocardium to **coronary sinus**, which empties into **right atrium**
- proper circulation (constant blood supply) to myocardium is critical; blockage of coronary arterial circulation can be serious/fatal
 - **collateral circulation**: smaller branches of coronary arteries have connections (anastomoses) for alternate blood pathways
 - **angina pectoris**: chest pain due to short block of blood supply to myocardium
 - **myocardial infarct (MI, heart attack or coronary)**: can result from prolonged blockage

Heart Actions & Cardiac Cycle

- **Cardiac cycle**: all events associated with blood flow through heart
 - **systole**: contraction

- **diastole**: relaxation (dilation or expansion)
- sequence:
 - ventricular filling (mid to late ventricular diastole)/atrial systole
 - ventricular systole/atrial diastole
 - early ventricular diastole
 - relaxation
- **Heart sounds**: lub-dup sound
 - **AV valves close** (lub); **SL valves close** (dup)
 - **murmurs**: sounds often indicative of valve problems

Cardiac Conduction System

- **sequence of excitation**:
 - **sinoatrial (SA) node**: **autorhythmic cells** here are the fastest to generate impulses (~75/min, called sinus rhythm); hence, this is the heart's **pacemaker**
 - **atrioventricular (AV) node**: receives impulses from SA node; fewer connections between cells delay impulse long enough for atria to complete contraction; also autorhythmic cells here, but slower impulses (~50-60/min, called junctional rhythm), so these cells do not set the pace unless there is damage to SA node cells
 - **atrioventricular (AV) bundle (bundle of His)**: electrical connection between atria & ventricles; transmits impulse to ventricles
 - **right & left bundle branches**: sends impulse along cells of interventricular septum toward apex
 - **Purkinje fibers**: extend from inferior aspect of interventricular septum to apex & into outer walls of ventricles
- **Electrocardiography**
 - **Electrocardiograph**: measures electrical currents generated during heart contraction with a series of electrodes placed on 12 body regions
 - **Electrocardiogram (ECG or EKG)**: recording from electrocardiograph
 - **P wave**: atrial depolarization
 - **QRS complex**: ventricular depolarization
 - **T wave**: ventricular repolarization
 - P-Q interval: beginning of atrial depolarization until beginning of ventricular depolarization
 - Q-T interval: beginning of ventricular depolarization until beginning of ventricular repolarization
- **Regulation of heart rate**:
 - **Sympathetic division of ANS**: increases heart rate
 - stimulated by cardioacceleratory center in medulla oblongata
 - **Parasympathetic division of ANS** (vagus nerve): decreases heart rate
 - stimulated by cardioinhibitory center in medulla oblongata
 - **hormones**:
 - **epinephrine & norepinephrine**: increases heart rate
 - **thyroxine**: slow sustained increase in heart rate
 - **ions**: calcium, sodium & potassium

Blood Vessels

Structure of Blood Vessel Walls:

- **tunica interna (*tunica intima*):** innermost tunic (layer)
 - o endothelium (simple squamous epithelium) lining lumen of all vessels
- **tunica media:** middle tunic
 - o mostly smooth muscle cells & sheets of elastin fibers
 - o generally thickest layer in arteries
 - o smooth muscle innervated by vasomotor fibers of sympathetic division of ANS
 - **vasoconstriction:** reduced lumen diameter due to smooth muscle contraction
 - **vasodilation:** increase in lumen diameter due to smooth muscle relaxation
- **tunica externa (*tunica adventitia*):** outermost tunic
 - o mostly loose collagen fibers; protect & reinforce vessel wall & anchor it to surrounding structures
 - o contains nerve fibers, lymphatic vessels, & elastin in larger veins

Arteries: transport blood away from the heart

- **elastic (conducting) arteries:** thick-walled arteries near heart (aorta & branches)
- **muscular (distributing) arteries:** branch from elastic arteries to distribute blood to body organs; includes most named arteries
- **arterioles:** vary in size; lead from muscular arteries to capillary beds
 - o blood flow into capillary beds determined by arteriole diameter
 - o if arterioles constrict, tissue is largely bypassed

Capillaries: smallest blood vessels; exchange materials (gases, nutrients, hormones, etc.) in blood with tissues

- only tunica interna (endothelium)
- **microcirculation:** flow of blood from arteriole to venule
- **precapillary sphincter:** at root of metarteriole & capillary; acts as valve to regulate blood flow into capillary (constricts to send blood through bed (using vascular shunt))
- capillary exchange of respiratory gases & nutrients: oxygen, carbon dioxide, most nutrients & cellular wastes pass between blood & interstitial fluid by **diffusion**
- **fluid movement:** pressure & capillary pores allow fluid to leave capillaries at arterial end of capillary bed, but most returns at venous end
 - o **hydrostatic pressure:** force exerted by fluid pressing against a wall
 - in capillaries, same as capillary blood pressure
 - *capillary hydrostatic pressure* tends to force fluids through capillary walls
 - *interstitial fluid hydrostatic pressure* pushes fluid back in
- colloid osmotic pressure: large non-diffusible molecules (proteins) draw fluid toward them through osmosis
 - o capillary colloid osmotic pressure: large molecules cannot move through capillary membrane; draw fluid in

Veins: transport blood toward heart

- **venules:** smallest veins; range from postcapillary venules (only tunica interna) to larger venules with additional one or two layers of smooth muscle cells & thin tunica externa

- **veins:** large vessels with all 3 tunics; vessel walls smaller & larger lumens than corresponding arteries
 - o *capacitance vessels (blood reservoirs):* at any given time, most blood in the body is within veins
 - o **venous valves:** formed from folds of tunica externa; flaps that prevent backflow of blood, especially in limbs

Systemic Blood Pressure: blood pressure = cardiac output x peripheral resistance

- measured from *brachial artery* with *sphygmomanometer*
 - o uses *auscultatory method* (listening for filling of artery as pressure in cuff drops below arterial pressure)
 - o normal resting ranges: systolic BP: 110-140 mm Hg; diastolic BP: 75-80 mm Hg
 - o **hypotension:** low blood pressure (systolic BP below 100 mm Hg)
 - o **hypertension:** high blood pressure (sustained arterial pressure > 140/90)
- **systolic pressure:** pressure generated in aorta following (left) ventricular systole (~120 mm Hg)
- **diastolic pressure:** pressure in aorta following ventricular diastole (70-80 mm Hg)
- **pulse pressure:** systolic pressure – diastolic pressure
- **cardiac output (CO):** CO = Stroke Volume (SV) x Heart Rate (HR)
 - o normal resting values: SV = 70 ml/beat; HR = 75 beats/min; CO = 5250 ml/min
- **resistance:** opposition to blood flow (friction)
 - o **peripheral resistance (PR):** resistance in systemic circulation; contributed by **blood vessel diameter, blood viscosity & blood vessel length**
 - o **blood viscosity:** thickness of blood; more viscosity = greater resistance
 - o **blood vessel length:** longer vessel length = greater resistance
 - **blood vessel diameter:** most likely to alter resistance; decreased diameter = greater resistance
 - smooth muscle fibers control blood vessel diameter

Maintaining Blood Pressure:

- **Short Term Regulation**
 - o **neural controls:**
 - vasomotor center: sympathetic neurons in *medulla oblongata* integrate blood pressure control by altering cardiac output & blood vessel diameter
 - baroreceptor-initiated reflexes: **baroreceptors** = pressure-sensitive mechanoreceptors that respond to changes in arterial pressure & stretch
 - chemoreceptor-initiated reflexes: **chemoreceptors** respond to changing blood levels of oxygen, carbon dioxide & acidity
 - higher brain centers: hypothalamus (e.g.: fight or flight response) via medulla
 - o **chemical controls:**
 - adrenal medulla hormones; atrial natriuretic peptide (ANP); antidiuretic hormone; angiotensin II; nitric oxide (NO); inflammatory chemicals; alcohol
- **Long Term Regulation: Renal regulation**
 - o direct renal mechanism: blood volume altered through filtration in kidneys
 - o indirect renal mechanism: renin-angiotensin mechanism leads to aldosterone production

Systemic Circulation:

- **major systemic arteries:**
 - **aorta, aortic arch, descending aorta** (thoracic & abdominal aorta)
 - **3 branches from aortic arch:** brachiocephalic artery, left common carotid artery & left subclavian artery
 - **common carotid arteries:** serve head
 - *vertebral & internal carotid arteries* give off branches to form **Circle of Willis** in brain (several paths for blood to brain tissue)
 - **subclavian arteries:** serve arms
 - **common iliac arteries:** branch to *internal iliac arteries* (serve pelvic organs) & *external iliac arteries* (serve legs)
- **major systemic veins:**
 - **external & internal jugular veins:** drain blood from brain, head & neck
 - **subclavian arteries:** drain blood from arms
 - **brachiocephalic arteries:** receive blood from jugular & subclavian veins & enter *superior vena cava*
 - **hepatic portal vein:** receives blood from abdominal (digestive) organs & enters liver (metabolism & detoxification)
 - **common iliac veins:** receive blood from *internal iliac veins* (from pelvic organs) & *external iliac veins* (from legs)
 - *common iliac veins* merge to form **inferior vena cava**

Chapter 14: Lymphatic System & Immunity

Introduction/Functions of the Lymphatic System

- *draining excess interstitial fluid*: lymphatic vessels drain excess fluid from tissue spaces & return it to the blood
- *transporting dietary lipids*: lymphatic vessels transport lipids & lipid-soluble vitamins (A,D,E & K) absorbed by GI tract to the blood
- *carrying out immune responses*: lymphatic tissue initiates specific immune responses to microbes or abnormal cells

Lymphatic Pathways: lymphatic capillaries → lymphatic vessels → subclavian veins

- **lymphatic capillaries**: microscopic closed-ended tubes that extend into interstitial spaces & receive **lymph** through their walls
- **lymphatic vessels**: walls similar to veins (thinner) with valves to prevent backflow
- large lymphatic vessels pass through lymph nodes & merge into *lymphatic trunks*
- *lymphatic trunks* lead to 2 collecting ducts: thoracic duct & right lymphatic duct
- collecting ducts join **subclavian veins**

Tissue Fluid & Lymph

- tissue fluid is formed from blood plasma; includes smaller proteins (excludes large)
- increased protein concentration in tissue fluid increases **colloid osmotic pressure**
- pressure increase forces some tissue fluid into lymphatic capillaries → **lymph**
- **lymph** returns proteins with fluid to bloodstream & transports foreign particles to lymph nodes
- movement of lymph is generally slow due to low pressure; contraction of skeletal muscles & pressure due to breathing accelerates lymph movement

Lymphoid Organs: Thymus & Spleen

Thymus: located in mediastinum above heart

- composed of lymphatic tissue subdivided into lobules
- size is large at birth; shrinks during aging following puberty
- T lymphocytes mature (become fully active) in the thymus; the mature T cells then may migrate to other lymphoid tissues to provide immunity

Spleen: located in upper left quadrant of abdominopelvic cavity; under diaphragm & posterolateral to stomach

- resembles large lymph node subdivided into lobules
- islands of *white pulp* contains lymphocytes; surrounding *red pulp* contains red blood cells & some leukocytes
- **sinuses** within splenic lobules filled with blood; spleen is primary site for red blood cell breakdown
- **macrophages** in spleen filter foreign particles & begin breakdown of damaged RBCs

Body Defenses Against Infection: *innate (nonspecific) & adaptive (specific)*

- **pathogens** (bacteria, viruses, fungi, parasites, etc.) cause **infection**

Innate (Nonspecific) Defenses: includes species resistance, mechanical & chemical barriers, fever, inflammation & phagocytosis

- **species resistance:** each species is resistant to diseases that affect other species
- **mechanical barriers:** skin & mucous membranes; block entry of pathogens
- **chemical barriers:** enzymes & acid (low pH) in gastric juice kill pathogens; antimicrobials (lysozyme) in tears kills some pathogens
 - o **interferons:** proteins released by virus-infected cells that stimulate uninfected cells to synthesize antiviral proteins
 - stimulates phagocytosis, blocks viral replication, enhances WBC activity & slows tumor growth
- **fever:** increase in body temperature due to infection
 - o decreases blood iron level (slows bacterial growth) & increases phagocyte activity
- **inflammation:** tissue response to injury or infection
 - o **4 signs:** localized redness, swelling, heat & pain
 - o chemicals released by damaged tissues attract WBCs to site
 - o *inflammatory mediators:* **histamine** from mast cells & basophils & other chemicals that cause vasodilation & increased blood vessel permeability
 - o fibrous CT may form a sac around injured tissue & block pathogen spread
- **phagocytosis:** *neutrophils* & *macrophages* destroy bacteria & foreign particles
 - o neutrophils enter infected tissue from blood; monocytes exit bloodstream & transform into macrophages that stay in tissues
 - o phagocytes associated with lining of blood vessels, bone marrow, liver, spleen, lungs & lymph nodes

Adaptive (Specific) Defenses: immune responses to specific pathogens & unwanted cells by *antibodies* from **B lymphocytes** & **T lymphocytes**

- **antigens:** molecules (especially proteins) that provoke an immune response
 - o during development, body learns to distinguish self antigens from nonself
 - o nonself antigens combine with surface receptors on B cells & T cells and stimulate an immune reaction
 - o *haptens:* small molecules that need carrier (larger molecule) to become antigenic
- lymphocytes are produced in **red bone marrow** & released into blood
 - o **T cells** mature in the *thymus*
 - o **B cells** mature in the *bone marrow*
 - o lymphatic tissues contain both T cells & B cells
- **T cells** interact with antigens *directly* → **cellular immune response**
 - o T cells secrete *cytokines* (*interleukins*) that enhance cellular responses to antigens
 - o T cells may also secrete toxic substances that destroy target cells
- **B cells** interact with antigens *indirectly* → **humoral immune response**
- T cells & B cells can form millions of different varieties to react against a wide variety of possible antigens
 - o each individual variety can interact with only one specific antigen
 - o members of each variety form a **clone**
- **T cells & cellular immune response**
 - o T cells activate when an *antigen-presenting cell* (**APC**) displays a foreign antigen

- macrophages phagocytize pathogen or large antigen, partially digests proteins & displays antigens on cell surface in association with **major histocompatibility complex (MHC or HLA)** protein
- **helper T cell:** activated by binding antigen/HLA complex on APC
 - when helper T cell binds antigen/HLA complex on B cell, it releases **cytokines** that stimulate B cell & T cell proliferation & attracts macrophages for phagocytosis
- **cytotoxic T cells** recognize antigen/HLA complexes on **tumor cells or virus-infected cells** & destroy these cells with **perforin** proteins
- **memory T cells** respond quickly to subsequent antigen exposure
- **B cells & humoral immune response**
 - a B cell becomes **activated** when **antigen** binds to cell surface receptors; activation may be enhanced by *helper T cell stimulation*
 - an activated B cell generates a **clone** that produces **memory B cells & plasma cells** that secrete **antibodies**
 - **antibodies** bind to & generally inactivate the *antigen*
 - B cells & their antibodies can defend against millions of different antigens by forming different *antigen-binding sites* on antibodies
- **5 classes of antibodies (immunoglobulins)**
 - **antibodies** are soluble proteins consisting of 4 polypeptide chains (2 heavy chains, 2 light chains) that form a Y-shaped structure
 - each antibody has **2 antigen-binding sites** at *variable* regions of chains
 - **IgD:** B cell antigen receptor
 - **IgM:** pentamer in blood; first Ig class secreted; agglutinating agent; activates complement
 - **IgG:** most abundant antibody in blood; protects against bacteria, viruses & toxins; activates complement; crosses placenta
 - **IgA:** dimer found in secretions (mucus, saliva, sweat intestinal juice, milk), helps to prevent pathogens from entering body
 - **IgE:** normally rare in blood (increase during allergic reaction), binds to mast cells & basophils & causes release of histamine & other mediators of inflammation
- **antibody actions**
 - antibodies bind to antigens, activate complement, & stimulate tissue inflammation
 - antigen binding results in **agglutination, precipitation or neutralization**
 - activated **complement** attracts phagocytes, makes foreign cells more susceptible to phagocytosis & ruptures foreign cell membranes (**lysis**)
- **primary & secondary immune responses**
 - **primary immune response** is body's first response to antigen; **antibodies** are produced for several weeks & long-lived **memory cells** are produced
 - **secondary immune response** uses memory cells to react quickly to subsequent exposure to previously encountered antigen
- **practical classification of immunity**
 - **active immunity:** produce own antibodies; **passive immunity:** given antibodies
 - **naturally acquired active immunity:** produced through antigens from *infections*
 - **artificially acquired active immunity:** produced through antigens from *vaccines*
 - **naturally acquired passive immunity:** antibodies pass from *mother* to child

- *artificially acquired passive immunity*: antibodies acquired from *immune serum*
- **allergic reactions**
 - *allergic reactions* are excessive immune responses to antigens (*allergens*) that may damage tissue
 - repeated exposure to antigens can result in *delayed hypersensitivity* that can cause skin inflammation
 - *immediate hypersensitivity* results from overproduction of **IgE** against allergen
 - **allergy** results from *mast cells* releasing *histamine*, *prostaglandin* & *leukotrienes* that cause tissue *inflammation*, contraction of bronchial & intestinal smooth muscles & increased mucus production
 - allergy symptoms include hives, hay fever, asthma, eczema & gastric disturbance
- **transplantation & tissue rejection**
 - *tissue rejection* occurs when immune system of transplant recipient reacts against donated tissue
 - *matching* donor & recipient tissue antigens (**MHC** antigens (*HLA* in humans) on cell surface of tissue cells) & *immunosuppression* can minimize tissue rejection
 - immunosuppressive drugs may, however, increase likelihood of infection
- **autoimmunity**
 - in *autoimmune disorders*, the immune system produces *autoantibodies* that attack a person's own body tissues
 - autoimmunity may result from a previous viral infection, faulty T cell development or a nonself antigen that resembles self antigen

Chapter 15: Digestion & Nutrition

Introduction

- **digestion:** mechanical & chemical breakdown of food & absorption of nutrients
- **alimentary canal:** continuous passageway (8m long) created by organs of digestion
 - o mouth, pharynx, esophagus, stomach, small intestine, large intestine, rectum, anus
- **accessory organs:** organs that are not part of the **GI tract**, but participate in digestion
 - o salivary glands, liver, gallbladder, pancreas

General Characteristics of Alimentary Canal

- wall of GI tract consists of 4 layers
 - o **mucosa:** innermost layer, lines lumen; **stratified squamous or simple columnar epithelium** with *mucus-secreting glands*; folded in stomach & intestine to increase surface area for absorption; lined with thin layers of connective tissue & smooth muscle
 - o **submucosa:** loose CT, glands, blood vessels, lymphatics & nerves (plexuses)
 - o **muscularis externa:** 2 layers of smooth muscle (inner circular & outer longitudinal layers) that produce movements of tube to propel food
 - o **serosa:** visceral peritoneum; fibrous CT; secretes serous fluid to reduce friction
- **mixing movements** by rhythmic contractions of smooth muscle to crush food & mix with enzymes
- **propelling movements:** wavelike contraction (**peristalsis**) of alternate smooth muscle layers to propel food along tube

Mouth: receives food & begins mechanical & chemical digestion; includes **oral cavity & vestibule** (between teeth & cheeks/lips)

- **cheeks:** outer layers of skin, pads of fat, muscles associated with expression & chewing & inner lining epithelium
- **lips:** highly mobile with skeletal muscle, sensory receptors & rich blood supply
- **tongue:** rough surface for gripping food & mixing with saliva
 - o surface contains *papillae* with **taste buds**
 - o lingual tonsils (immune cells) at root of tongue
- **palate:** roof of oral cavity has **hard palate** formed from bone & mucosal **soft palate**
 - o **uvula** at tip of soft palate closes off nasal cavity during swallowing
 - o **palatine tonsils:** at either side of opening to throat at back of oral cavity
- **teeth:** begin mechanical digestion by breaking food into smaller pieces to increase surface area for chemical digestion
 - o 20 primary & 32 secondary teeth
 - o each tooth consists of **crown** (above gums) & **root** (below gums) & composed of **enamel** (*calcium phosphate* coating over crown), *dentin* (bulk of tooth), *pulp*, nerves & blood vessels
 - o **periodontal ligament** attaches tooth to alveolar process in maxilla or mandible

Salivary Glands: secrete **saliva**, which moistens food & begins chemical digestion of carbohydrates, dissolves food chemicals for taste & cleanses mouth

- **salivary glands** include serous glands that secrete digestive enzymes & mucous glands that secrete mucus
- **parotid glands** (anterior/inferior to ear) secrete **amylase**, an enzyme that digests carbohydrates
- **submandibular gland** secrete viscous saliva (serous fluid & mucus)
- **sublingual gland** secretes mucus

Pharynx & Esophagus: food passageways to stomach

- **pharynx** is divided into *nasopharynx*, *oropharynx* & *laryngopharynx*
- **swallowing stages:** food mixed with saliva & forced into pharynx; involuntary reflexes move food into esophagus; peristalsis transports food to stomach
- **esophagus:** passes through diaphragm & joins stomach at *cardiac sphincter*
- **cardiac sphincter:** smooth muscle valve that prevents backflow of food from stomach

Stomach: receives food, mixes it with *acidic gastric juice*, begins *chemical digestion of proteins*, absorbs limited materials, & moves food into small intestine

- stomach divided into *cardiac*, *fundic*, *body* & *pyloric* regions
- **pyloric sphincter:** valve to prevent backflow between stomach & small intestine
- gastric glands secrete **gastric juice** containing **pepsin** (protease; digests proteins), **hydrochloric acid (HCl)** and **intrinsic factor** (required for vitamin B12 absorption)
- parasympathetic impulses & the hormone **gastrin** enhance gastric secretion
- reflexes due to food in small intestine inhibit gastric secretion
- a few substances (water, small molecules) may be absorbed from the stomach wall
- mixing movements help produce chyme; peristalsis moves chyme into pyloric region & then small intestine
- rate of emptying depends on fluidity of chyme & type of food present

Pancreas: produces **pancreatic juice** containing *digestive enzymes* that is moved into the duodenum of the small intestine through the pancreatic duct

- pancreatic juice contains enzymes that digest carbohydrates (amylase), proteins, fats & nucleic acids
- pancreatic juice has a high **bicarbonate ion** concentration (**alkaline**) that helps neutralize chyme
- the hormone **secretin** stimulates release of pancreatic juice with bicarbonate ions
- the hormone **cholecystokinin** (CCK) stimulate release of pancreatic juice with enzymes

Liver: *metabolizes carbohydrates, lipids and proteins*; stores some substances; filters blood; destroys toxins & *secretes bile*

- left & right lobes contain hepatic lobules that secrete **bile**; bile is carried to hepatic ducts & flows into either *cystic duct* into **gallbladder** (storage) or **common bile duct** into duodenum of small intestine
- in small intestine, bile salts act as an **emulsifier** (mix lipids & water) to help *digestion* & absorption of **lipids** (fatty acids & cholesterol) & fat-soluble vitamins
- bile contains **bile salts** made from **cholesterol**, bile pigments (*bilirubin*), & electrolytes

- **gallbladder** stores bile between meals; gallbladder located under right lobe of liver
- the hormone **cholecystinin** (CCK) stimulate release of bile
- **sphincter muscle** at base of common bile duct controls bile flow into duodenum

Small Intestine: receives pancreatic juice from pancreas & bile from liver &/or gallbladder, *completes digestion* of food, *absorbs nutrients*, and transports residues to large intestine

- small intestine consists of **duodenum, jejunum & ileum**
- wall is lined with **villi** (folds) that increase surface area & aid in mixing & absorption
- **intestinal glands** located between villi
- secretes **mucus & digestive enzymes** (break down sugars, proteins & fats)
- gastric juice, chyme & stretch reflexes stimulate secretions
- enzymes on microvilli of mucosal cells complete digestion
- villi **absorb monosaccharides, amino acids, fatty acids & glycerol**; nutrients move through mucosal cells & into *capillaries*
- **long-chain fatty acids** absorbed by **lacteals** (lymphatic capillaries); **short-chain fatty acids** absorbed by blood capillaries
- **mixing movements & peristalsis** propel material through small intestine
- **ileoecal sphincter** controls movement of materials into large intestine

Large Intestine: *reabsorbs water & electrolytes*; forms, stores & *eliminates fecal waste*

- large intestine consists of **cecum, colon, rectum & anal canal**
- colon divided into **ascending, transverse, descending & transverse colon**
- tissue of wall similar to stomach & small intestine, but longitudinal muscle layer arranged in distinct bands (*teniae coli*); muscle tension forms pouches (*haustra*)
- forms mucus; little to no digestive function
- movements similar to small intestine; mass movements 2-3 times daily
- defecation reflex stimulates defecation to remove waste
- **internal anal sphincter** (smooth muscle) & **external anal sphincter** (skeletal muscle) control removal of waste
- **feces** consist of water, undigested material, electrolytes, mucus & bacteria
- color of feces due to bilirubin pigment of bile converted to dark pigment by bacteria

Nutrition: study of **nutrients** & how the body utilizes them

- **macronutrients** (carbohydrates, lipids & proteins) required in large amounts;
- **micronutrients** (vitamins & minerals) required in smaller amounts
- **calories** measure potential energy in foods
 - o **calorie** is amount of energy needed to raise temperature of 1g of water by 1°C
 - o kilocalories (**Cal**) are used to measure potential energy in macronutrients
 - o **carbohydrates & proteins** yield ~ 4 Cal/gram; **lipids** yield ~ 9 Cal/gram
- **carbohydrates:** used primarily to supply **energy** for cellular processes
 - o carbohydrates include **sugars** (monosaccharides & disaccharides) & **complex carbohydrates** (starch, glycogen & cellulose)
 - o starch from grains & vegetables; glycogen from meats; disaccharides from cane sugar; monosaccharides from honey & fruit

- *cellulose* (in plant cell walls) cannot be digested by humans → **fiber**; provides bulk that assists movement through GI tract
- **energy** is released from glucose through **oxidation** (*aerobic cellular respiration*)
- *lipids & proteins* can be utilized for energy in most cells if glucose levels low
- *neurons require constant supply of glucose*
- excess glucose is *stored as glycogen or converted to fat* (stored in adipose tissue)
- carbohydrates required to synthesize nucleic acids & breast milk
- carbohydrate requirements vary for different people depending on activity
- **lipids**: supply *energy* for cellular processes & aid in building structures such as cell membrane & molecules such as steroids
 - lipids include **fats** (mostly **triglycerides**), **phospholipids** & **cholesterol**
 - *saturated fats* found in meats, eggs, milk & some oils; *unsaturated fats* found in seeds, nuts & plant oils (monounsaturated fats in olive, peanut & canola oils considered healthiest); cholesterol in egg yolk, milk, butter, cheese & meats
 - digestion breaks down *triglycerides* to **fatty acids & glycerol**
 - **beta oxidation** releases *acetyl coA* from fatty acids; acetyl coA can be used for energy or converted to ketone bodies (acetone)
 - excess fatty acids & glycerol stored in *adipose tissue*
 - *linoleic acid, linolenic acid & arachidonic acid* are **essential fatty acids** (required in diet)
 - *liver* synthesizes triglycerides, phospholipids, lipoproteins (transport lipids in blood) & cholesterol
 - **cholesterol** used in synthesis of bile salts, steroid hormones, membranes & vitamin D
 - fat intake requirements also vary for individuals; must be sufficient to carry fat-soluble vitamins (A, D, E & K)
- **proteins**: wide variety of functions... enzymes control metabolism in cells; clotting factors clot blood; structural proteins include keratin of skin & collagen of connective tissue; plasma proteins regulate water balance; actin & myosin in muscle cells; hormones & antibodies in blood
 - proteins can be broken down for **energy**; must be converted to *amino acids* & amino acids **deaminated** (removes amino group; converted to *urea* waste) & converted to acetyl coA
 - proteins found in meats, fish, poultry, cheese, milk, nuts, eggs, cereals & legumes
 - 8 amino acids (10 in children) are **essential amino acids** (required from diet)
 - **complete proteins** provide all essential amino acids; meats provide complete proteins; vegetables must be combined for complete proteins (grain & legume)
 - protein requirements: must have sufficient protein to supply all essential amino acids & to provide nitrogen for synthesis of nitrogen-containing compounds
- **vitamins**: organic molecules that are essential nutrients required for metabolism
 - **fat-soluble vitamins** (vitamins A, D, E & K) are absorbed with lipids
 - **water-soluble vitamins** (vitamin C & B vitamins) absorbed with water
 - **vitamin A** can be synthesized from **beta-carotene** (*antioxidant* in orange vegetables) required for *synthesis of visual pigments*, normal development of bones, teeth & maintenance of epithelia
 - **vitamin D** required for *calcium & phosphorus absorption* during digestion

- **vitamin E** is *antioxidant* (prevents oxidation of vitamin A & polyunsaturated fatty acids)
- **vitamin K** required for *blood clotting*
- **B vitamins** (B1-B12) required for cellular metabolism
- **vitamin C** (ascorbic acid) required for collagen production, storage of folic acid, & metabolism of some amino acids; promotes iron absorption & synthesis of steroid hormones
- **adequate diets**: provide sufficient energy & essential nutrients to support growth, maintenance & repair of tissues
 - *food guide pyramids* can help to personalize diets
 - *malnutrition* is poor nutrition due to lack of food or failure to utilize food

Chapter 16: Respiratory System

Introduction

- **respiratory system** includes tubes that remove particles from incoming air & transport air to & from lungs and air sacs where gases (oxygen & carbon dioxide) are exchanged
- **respiration** is entire process of gas exchange between atmosphere & body cells
 - o *ventilation (breathing)*: moving air into & out of lungs
 - o *external respiration*: gas exchange between blood & air in lungs
 - o transport of gases in blood between lungs & body cells
 - o *internal respiration*: gas exchange between blood & tissue cells

Organs of Respiratory System

- **nose**: supported by bone (posteriorly) & cartilage (anteriorly)
 - o nostrils: openings for air
- **nasal cavity**: mucosa-lined passageway for air into nasopharynx; divided into left & right halves by **nasal septum**
 - o *mucous membrane* filters, warms & moistens incoming air
 - o **nasal conchae** divide nasal cavity into passageways & increase surface area to warm & moisten air
 - o ciliary action carries particles trapped in mucus to pharynx, where they are generally swallowed
- **paranasal sinuses**: spaces in bones of the skull lined by mucous membrane that open into nasal cavity
 - o located in *maxillary, frontal, sphenoid & ethmoid bones*
- **pharynx**: passageway for air & food behind nasal cavity (nasopharynx), oral cavity (oropharynx) & larynx (laryngopharynx)
- **larynx** (voice box): conducts air, helps prevent foreign objects from entering trachea & produces sounds of speech
 - o composed of muscles & cartilage; lined with mucous membrane
 - o contains **vocal cords**, which vibrate from side to side & produce sounds when air from lungs passes through them
 - o **glottis**: opening in larynx that serves as a passageway for air
 - o **epiglottis**: elastic cartilage at top of larynx that closes off larynx during swallowing
- **trachea**: extends into thoracic cavity to bronchi entering lungs; anterior to esophagus
 - o lined with C-rings of hyaline cartilage that helps keep airway open; cartilage incomplete at back, allows room for expansion of esophagus during swallowing
 - o divides into **left & right bronchi** that enter lungs
- **bronchial tree**: branched air passages that lead from trachea to air sacs in lungs called **alveoli**
 - o **alveoli** are at the distal end of *alveolar ducts*, the narrowest tubes of tree
- **lungs**: soft, spongy cone-shaped organs on either side of thoracic cavity
 - o *mediastinum* separates left & right lungs; diaphragm & thoracic cage enclose them
 - o *left lung* has 2 lobes & cardiac notch (space for heart); *right lung* has 3 lobes

- *visceral pleura* attaches to surface of lungs; *parietal pleura* lines thoracic cavity
- each lobe of lungs composed of alveoli, blood vessels & supporting tissues

Breathing Mechanism

- **inspiration:** atmospheric pressure forces air into lungs
 - *pressure* in alveoli *decreases* due to contraction of breathing muscles (*diaphragm & intercostals*) & expansion of thoracic cavity
 - when breathing muscles contract, thoracic cage moves upward & outward, increasing volume (decreases pressure)
 - *surface tension* aids lung expansion
- **expiration:** increased pressure in lungs forces air out of lungs
 - elastic recoil of lung tissues & surface tension within alveoli provide forces of expiration
 - when breathing muscles relax, thoracic cage moves downward & inward, decreasing volume (increases pressure)
- **respiratory air volume & capacities**
 - **respiratory cycle:** one inspiration followed by one expiration
 - respiratory volumes measured with **spirometer**
 - **tidal volume (TV):** air volume that moves into & out of the lungs with each breath (~ 500 ml)
 - **inspiratory reserve volume (IRV):** air volume that can be forcibly inspired beyond tidal volume (~ 1900-3100 ml)
 - **expiratory reserve volume (ERV):** air volume that can be forcibly expired beyond tidal volume (~ 700-1200 ml)
 - **residual volume (RV):** air remaining in lungs after forced exhalation (~ 1200 ml)
 - **inspiratory capacity (IC):** TV + IRV
 - **functional residual capacity (FRC):** RV + ERV
 - **vital capacity (VC):** TV + IRV + ERV
 - **total lung capacity (TLC):** VC + RV

Control of Breathing

- normal breathing is rhythmic & involuntary
- **respiratory center** in brainstem includes portions of pons & medulla oblongata
 - medulla rhythmicity center includes 2 groups of neurons
 - *dorsal respiratory group* controls basic rhythm of breathing
 - *ventral respiratory group* increases inspiratory & expiratory respiratory movements during forceful breathing
 - **pneumotaxic area** regulates breathing rate (normally ~ 12 breaths/minute)
- **factors affecting breathing:** chemicals, stretching of lung tissues, emotional states
 - **central chemoreceptors** associated with respiratory center
 - blood concentrations of *carbon dioxide & hydrogen ions* affect chemoreceptors; stimulation of receptors increases breathing rate
 - **peripheral chemoreceptors** are in walls of certain large arteries
 - these chemoreceptors sense low **oxygen** levels; when oxygen levels are low, breathing rate increases
 - overstretching lung tissue triggers *inflation reflex*

- reflex shortens duration of respiratory movements & prevents overinflation of lungs during forceful breathing
- **hyperventilation** decreases blood carbon dioxide levels, *but is very dangerous when done before swimming underwater*

Alveolar Gas Exchange

- gas exchange between blood & air occurs at **alveoli**, tiny air sacs clustered at distal ends of alveolar ducts
- **respiratory membrane**: consists of alveolar & capillary walls
 - site of gas exchange between blood & alveoli
- **diffusion across respiratory membrane**
 - **partial pressure** of gas is proportional to concentration of that gas in a mixture or concentration dissolved in a liquid
 - gases **diffuse** from regions of higher partial pressure to regions of lower partial pressure
 - **oxygen** diffuses from alveolar air into blood
 - **carbon dioxide** diffuses from blood into alveolar air

Gas Transport

- **oxygen** is primarily transported *in red blood cells* bound to **hemoglobin** protein (oxygen binds to **iron** of the heme group of hemoglobin)
 - **oxyhemoglobin** is unstable & releases oxygen in regions where partial pressure of oxygen is low
 - *more oxygen is released as blood levels of carbon dioxide increase, as blood becomes more acidic, and as blood temperature increases*
- **carbon dioxide** may be carried in blood, bound to hemoglobin, or as bicarbonate ion in blood
 - most carbon dioxide is transported as bicarbonate ion
 - enzyme **carbonic anhydrase** forms **carbonic acid** from carbon dioxide & water
 - carbonic acid dissociates to release hydrogen ions & bicarbonate ions; *buffering system in blood*