

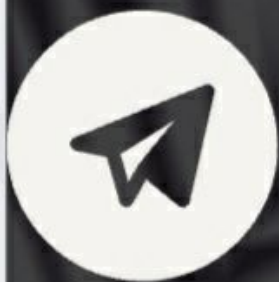
LEARN WITH SASHA 



Body fluids and Circulation Handwritten Notes



Human Physiology



For pdf, join my telegram channel
link in description

CHAPTER = 18

BODY FLUIDS AND CIRCULATION

Nutrients, O_2 and other essential substances

→ Living Cells →

Waste or harmful substances.

→ We need efficient mechanisms.

① Sponges, Coelentrates → Circulate water through their body cavities.

② High Organisms, Humans → Blood, lymph (tissue fluid)

* Blood → Special Connective Tissue.

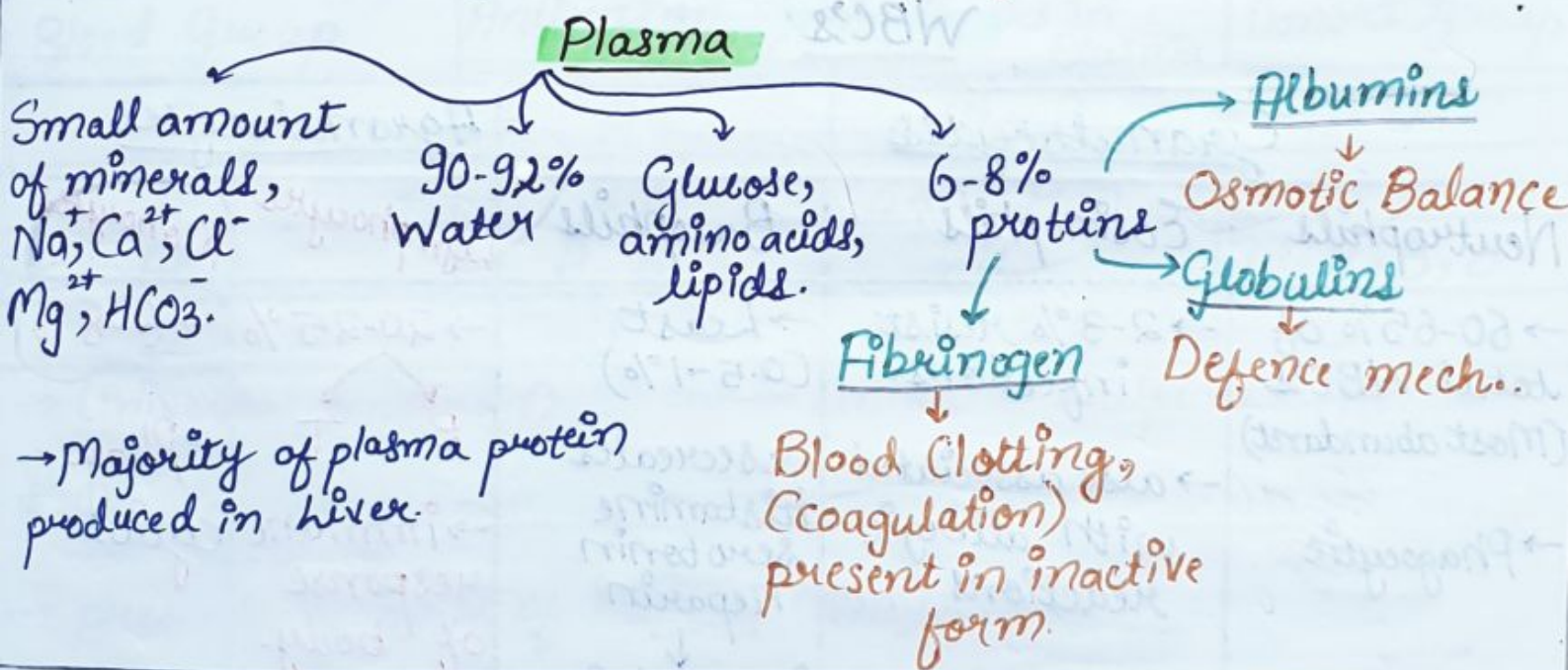
Fluid Matrix

Plasma

Formed Elements

① Plasma → Straw Coloured
→ Viscous fluid
→ 55% of blood.

→ Plasma without clotting factors → Serum.



* Formed elements → 45% of blood.

Erythrocytes

Leucocytes

Platelets

① Erythrocytes or Red Blood Cells →

- Most abundant
- 5 to 5.5 millions of RBC mm^{-3}
- formed in red bone marrow (adults), Liver (embryonic stage)
- devoid of nucleus (most of mammals) and mitochondria (Yolk sac (foetus))
- biconcave in shape (mature), Circular (immature)
- Red coloured, Fe containing Hb.
- Healthy individual → 12-16 gm Hb in every 100 ml of blood.
- Transport of respiratory gases.
- average life span → 120 days.
- destroyed in spleen (graveyard of RBC's)

② Leucocytes or WBC's →

- Colourless.
- lack of Hb.
- Nucleated.
- 6000-8000 mm^{-3}
- Short lived.

WBC's

<u>Granulocytes</u>			<u>Agranulocytes</u>	
<u>Neutrophils</u>	<u>Eosinophils</u>	<u>Basophils</u>	<u>Lymphocytes</u>	<u>Monocytes</u>
→ 60-65% of total WBC's (Most abundant) → Phagocytic	→ 2-3% resist infections. → also associated with allergic reactions	→ Least (0.5-1%) → secrete histamine, serotonin, heparin ↓ involved in inflammatory rxn.	→ 20-25% B T → immune response of body.	→ 6-8% → Phagocytic.

③ Platelets (Thrombocytes)

- cell fragments from megakaryocytes (special cells in bone marrow)
- 1,50,000 - 3,50,000 platelets mm^{-3}
- coagulation / clotting of blood.
- Reduction can lead to clotting disorders, excessive loss of blood from body.

Blood Groups ↗ ABO ↘ rh

Carl Landsteiner

* ABO Grouping :-

- based on presence or absence of two surface antigens ↗ A
↘ B
- plasma contains two natural antibodies (proteins in response to antigens).
- A, B, AB, O.
- Blood transfusion (Safely).

Blood Group	Antigens on RBC's	Antibodies in Plasma	Donor's Group
A	A	anti-B	A, O
B	B	anti-A	B, O
AB	A, B	nil	AB, A, B, O
O	nil	anti-A, B	O

→ Universal Donor = O

→ Universal Recipient = AB

* Rh Grouping :-

- present in 80% of human (Rh^+)
- Rh^- → antigen absent
- $\text{Rh}^+ \rightarrow \text{Rh}^- \rightarrow$ will form specific antibodies.

→ Rh -ve
mother

Rh⁺
foetus

1st pregnancy

→ Certain factors present at the site of injury also initiate coagulation. (Ca^{+} , K^{+} ions)

* Lymph (Tissue Fluid) (Blood-formed elements - large proteins)

Blood \rightarrow Water + Small water sol. substance.

↓
out into the spaces b/w cells of tissues leaving
larger proteins and most of the formed elements
in blood vessels.

↓
Fluid is called Tissue or Interstitial fluid.

* Circulatory Pathways.

Open

Arthropods, Molluscs

Heart

↓
Large Vessels

↓
Open Spaces or body
Cavities (Sinuses)

Closed

Annelids, Chordates

Closed network of blood
vessels

↓
More advantageous.

* Vertebrates \rightarrow Muscular Chambered Heart

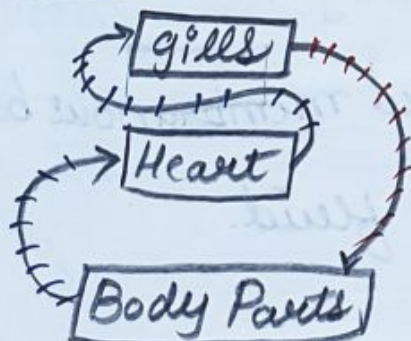
① Fishes (2 chambered) \rightarrow Atrium, Ventricle.

② Amphibians and Reptiles (except crocodile) \rightarrow 3 chambered
↓
2 atria, 1 Ventricle.

③ Crocodiles, Birds, Mammals.

↓
4 Chambered Heart \rightarrow 2 Atria, 2 Ventricle.

* Fishes \rightarrow Heart \rightarrow deoxygenated blood.



↓
Oxygenated by gills.

↓
Body Parts (deoxygenated)

↓
Heart

Single
Circulation

No
mixing.

* Amphibians and Reptiles

Gills/Lungs/Skin

oxy. blood

Left atrium

Other body Parts

deoxy. blood

Right atrium

Incomplete
Double
Circulation

Mixed up in single Ventricle

Mixed Blood.

* Birds and Mammals

oxy. blood

Left atria

deoxy blood

Right atria

Left Ventricle

Right Ventricle

No mixing occurs

Double
Circulation

* Human Circulatory System

or blood Vascular system.

consist of a muscular chambered heart

Network of closed branching blood vessels and blood.

* Heart : → Mesodermally derived.

- Thoracic Cavity (btw. the two lungs)

- Slightly tilted to the left

- Size of a Clenched fist.

* Pericardium : → protected by double walled membranous bag
C → enclosing the pericardial fluid.

* Chambers :- Two small upper chambers = Atria.
↳ Two larger lower chambers = Ventricles.

* Inter-atrial Septum :- (Thin, muscular wall)
↳ Separates right and left atria.

* Inter-Ventricular Septum :- Separates left and right ventricles.

* Atrio-Ventricular Septum :- Thick fibrous tissue.
↳ Separates atrium and ventricle.

Tricuspid Valve

Three muscular cups
b/w right atrium
and right ventricle.

Bicuspid / Mitral Valve

2 muscular cups b/w left
atrium and left ventricle.

* Semilunar Valves :- Opening of right and left
ventricles into pulmonary artery and aorta.
→ Valves prevent any back flow.

⇒ Heart → Made up of Cardiac Muscles.

Walls of Ventricles are much thicker than that of
atria.

* Nodal Tissue :- (Special Cardiac musculature)
distributed in heart.

→ Upper right corner of right atrium = Sino-atrial Node.

→ Lower left corner of right atrium close to atrio-
ventricular septum = Atrio-Ventricular Node.

* Bundles of Nodal fibres

Atrio-Ventricular Bundle (AV Bundle)

passes through AV Septa

emerge on the top of Inter-Ventricular Septum

Left Bundle

Right Bundle.

→ These branches give minute fibres throughout the Ventricular musculature of respective sides and are called Purkinje Fibres.

* Auto excitable (generate action potential without external stimuli.) (myogenic)

* No. of Action Potential: →

→ SAN = 70-75 beats/min (Max.)

(resp. for initiating and maintaining rhythmic contractile activity of heart)

→ Called as Pacemaker / Heart of Heart

→ Heart → 70-75 b/min.
avg. 72 b/min.

* Cardiac Cycle

4 Chambers → Relaxed State (Joint Diastole) (50%)

Bicuspid & Tricuspid → Open

Pulmonary Veins

↓
Left atria.

↓
Left Ventricle.

Vena Cava

↓
Right atria

↓
Right Vent.

→ Semilunar Closed.

→ SAN → action potential → atria undergo ^{0.1 sec} simultaneously contraction. (atrial systole)

increase flow of blood into Ventricles by 30%.

→ AV Node and AV bundle.

Bundle of His

Action potential ↓

To entire Ventricular musculature

Ventricular muscles contract
(Ventricular systole)

Atria → relax (diastole)

⇒ Ventricular Systole — bro kaam par (0.3 sec)

(Lub) Closure of tricuspid and bicuspid. — Bhen ka gate band

Ventricular pressure ↑↑ — Kaam

Semilunar Valves Open — Bahar se kaam ke aaye

Ventricles Relax (diastole) — Relax (0.5 sec)

Ventricular Pressure ↓↓ — Relax

(Dub) Closure of Semilunar Valves. — Ghar Band

Ventricular pressure ↓↓, So, tricuspid and bicuspid Valves are opened by increasing atrial pressure.

Blood moves freely into Ventricles

Ventricles and atria again relaxed (diastole.)

→ Clinically repeated → Cardiac Cycle.

Systole Diastole
Both atria and Ventricles

→ Cardiac Cycle → 72 times/min.

→ duration of one = 0.8 second.

Stroke Volume → Blood pumped out by each Ventricle during Cardiac cycle. (approx. 70 mL).

Cardiac Output → Stroke Vol. X Heart Rate.
5000 mL or 5 L.

Body can alter stroke Volume, heart Rate.
Hence, Cardiac Output.

Two Prominent Sounds

Lub

Closure of Tricuspid
and Bicuspid Bhen
Kagate

Dub

Closure of Semilunar
Valves

→ Stethoscope

→ Clinical diagnostic Significance.

* Electrocardiograph (ECG)

pip... pip... pip... pee ee → Cardiac Arrest

→ Electrocardiogram

→ Graphical representation of electrical activity of heart during C.C.

3 electrical leads.

→ One to each wrist and left ankle.

→ For detailed evaluation → Multiply leads to chest Region

P-Wave

- Electrical excitation (or depolarisation) of atria.
- Contraction of both atria.

QRS Complex

- Depolarisation of ventricles, initiates ventricular contraction.
- Contraction starts after Q and beginning of systole.
- T Wave → Return of ventricles excited to normal state (Repolarisation)
- End of T Wave → End of Systole.
- No. of QRS complexes → Heart beat rate of individual.
- Any deviation in shape → Abnormality or disease.
- **Great Clinical Significance.**



Double Circulation

Blood → Blood Vessels (Arteries, Veins) → 3 layers.

- ① **Tunica Interna** → Inner lining of squamous epithelium.
- ② **Tunica Media** → Middle layer of smooth muscle, and elastic fibres.
→ **Comparatively thin in Veins.**
- ③ **Tunica Externa** → External layer of fibrous connective tissue.

Artery

Carry blood away from Heart

Tunica media thick

Deep

Carry Oxygenated blood (except pulmonary artery)

Valves present

Blood flow discontinuous

Vein

Carry blood towards heart.

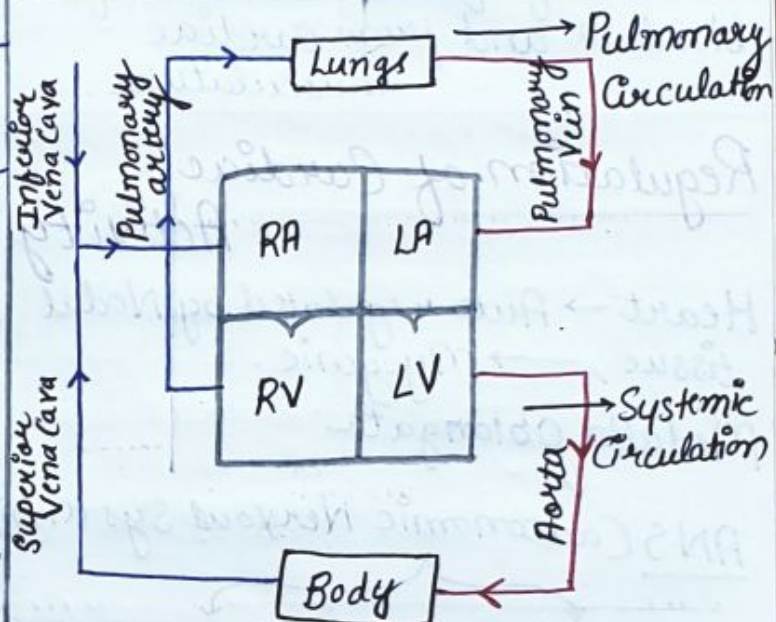
Tunica Media thin

Superficial

Carries deoxygenated blood (except pulmonary vein)

Valves present.

Blood flow continuous.



- **Largest Artery** → Aorta
- **Largest Vein** → Vena Cava

Pathway of Blood →

Artery → Arteriole → Capillaries
↓
Venules
↓
Veins.

- Systemic Circulation** →
- ① provides nutrients, O_2 , and other essential substances.
 - ② Take CO_2 , other harmful substances away for elimination.

Hepatic Portal System

→ Unique Vascular Connection
blw digestive tract and liver.

→ Hepatic Portal Vein

↓
Carries blood from intestine to liver

↓
then, systemic circulation

→ Special Coronary system of blood vessels present in our body exclusively for circulation of blood to and from cardiac musculature.

Regulation of Cardiac Activity

Heart → Auto regulated by Nodal tissue, → Myogenic.

Medulla Oblongata

↓
ANS (Autonomic Nervous System)

Sympathetic Nerves

Heart Beat ↑↑
Cardiac Output ↑↑

Parasympathetic neural signals

Heart Beat ↓↓
Cardiac Output ↓↓

Hormone

Adrenaline
Heart Rate ↑↑

Thyroxine
Heart Rate ↓↓

Tachycardia → High Heart Beat $90 <$

Bradycardia → < 60

Disorders of Circulatory System

① High BP (Hypertension) →

Normally → (120/80) → 80 mmHg (diastolic)
120 mmHg (Systolic) ↓
pumping pressure Resting pressure

Hypertension → (140/90) or higher

mmHg → millimeters of mercury pressure

Hypertension → Heart diseases and affect Vital Organs, like brain Kidney

② Coronary Artery Disease → (CAD) / Atherosclerosis.

→ affect vessels that supply blood to Heart muscle.

→ Caused by deposition of Calcium, fat, cholesterol, fibrous tissues

↓
make lumen of artery narrower.

③ Angina → (Angina Pectoris)

→ Symptom - Acute Chest pain.

→ O₂ don't reach heart muscle

→ More common among middle aged and elderly.

→ Occur due to condition that affect blood flow.

④ Heart Failure →
When Heart is not pumping
sufficient blood.

Main Symptom → Congestion of Lungs
↓
Congestive Heart failure

⑤ Cardiac Arrest →
Heart Stops beating.

⑥ Heart Attack / Myocardial
infection →
→ Death of Myogenic tissue, by
inadequate blood supply



NEET
SLAYER