

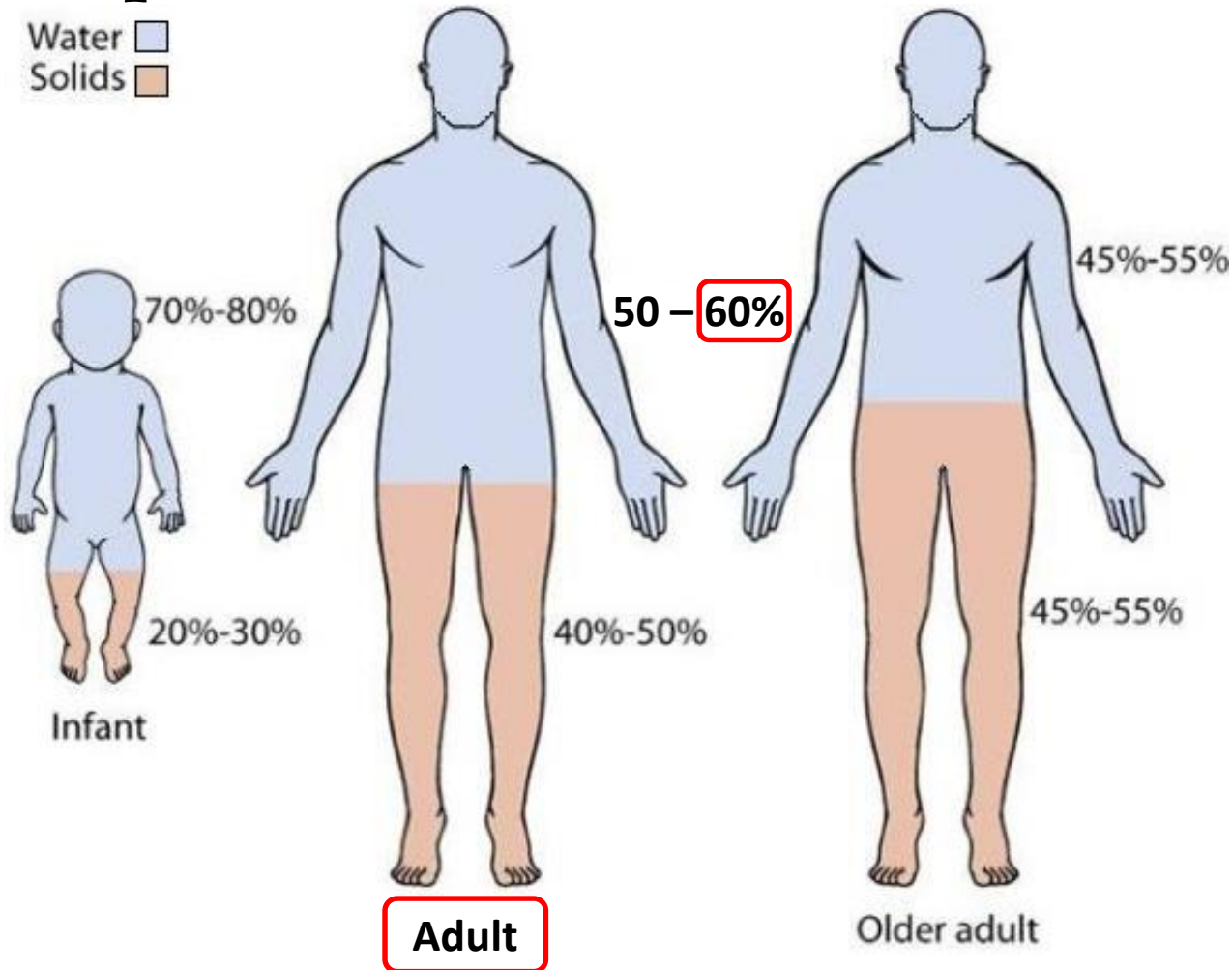
# **Fluid & blood**

Dr. Philip Hung

# Outline

- body fluid
  - body composition
  - difference of body composition in gender, age, and body size
  - body fluid compartment
  - chemical composition of body fluid
  - different solution for fluid imbalance
- blood
  - function
  - physical characteristics
  - RBC
  - WBC

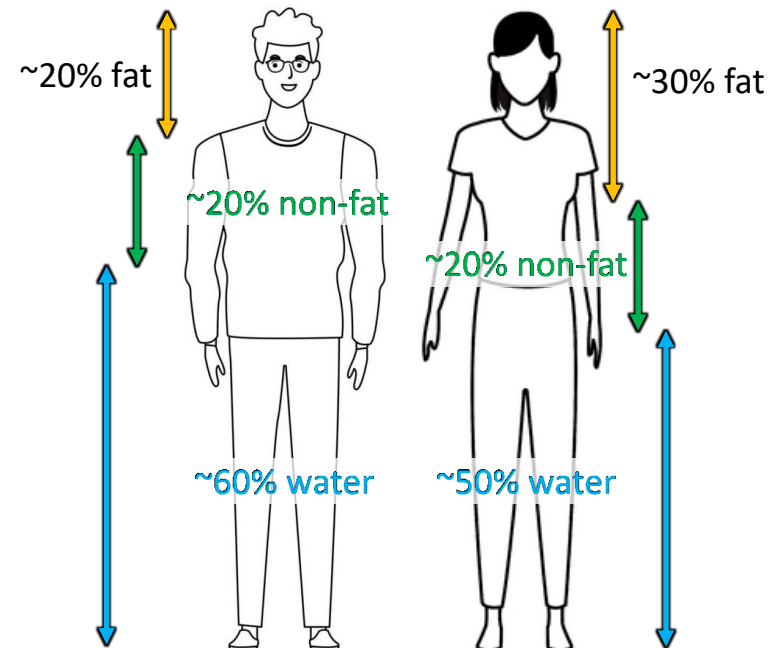
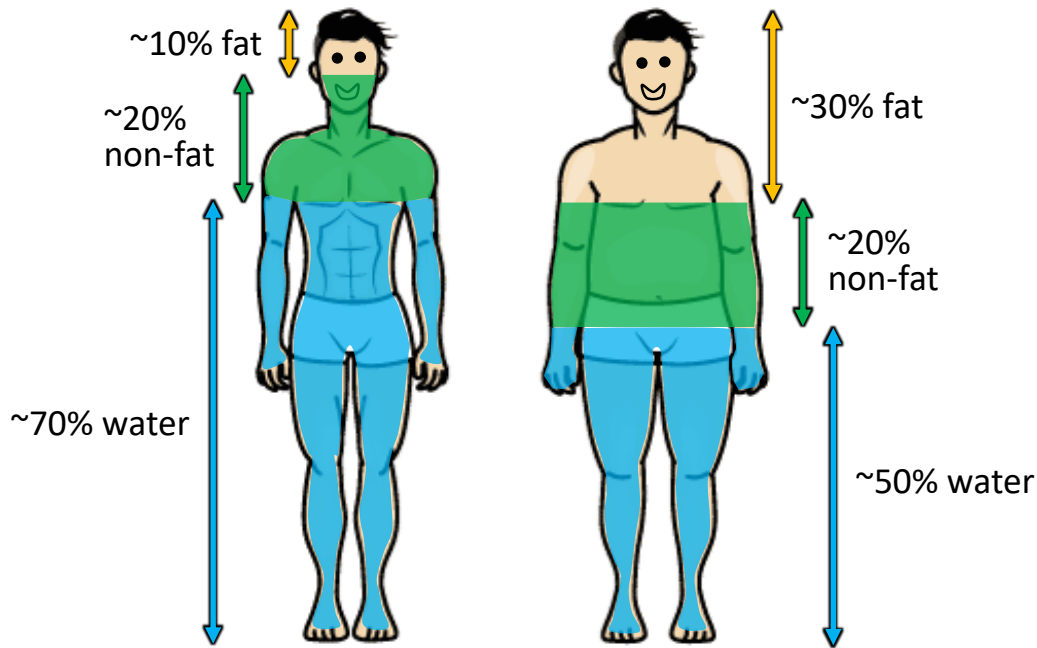
# Body composition



- during aging, there is a decrease in lean body mass in favor of fat.
- **elderly** therefore have **less body water** than the young one

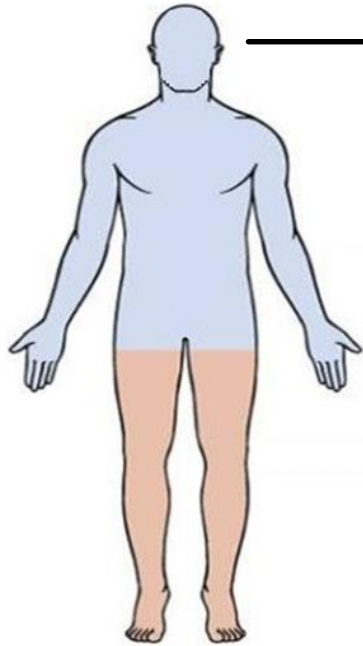
**A fat man contains less water (%)  
than a thin man.**

**Women contains less water (%)  
than men.**



# Body fluid: different compartments

Total body fluid  
(~60% body weight)



intracellular fluid ( $\frac{2}{3}$  of total body fluid)

extracellular fluid ( $\frac{1}{3}$ )

intravascular fluid (20–25%)

interstitial fluid (75–80%)

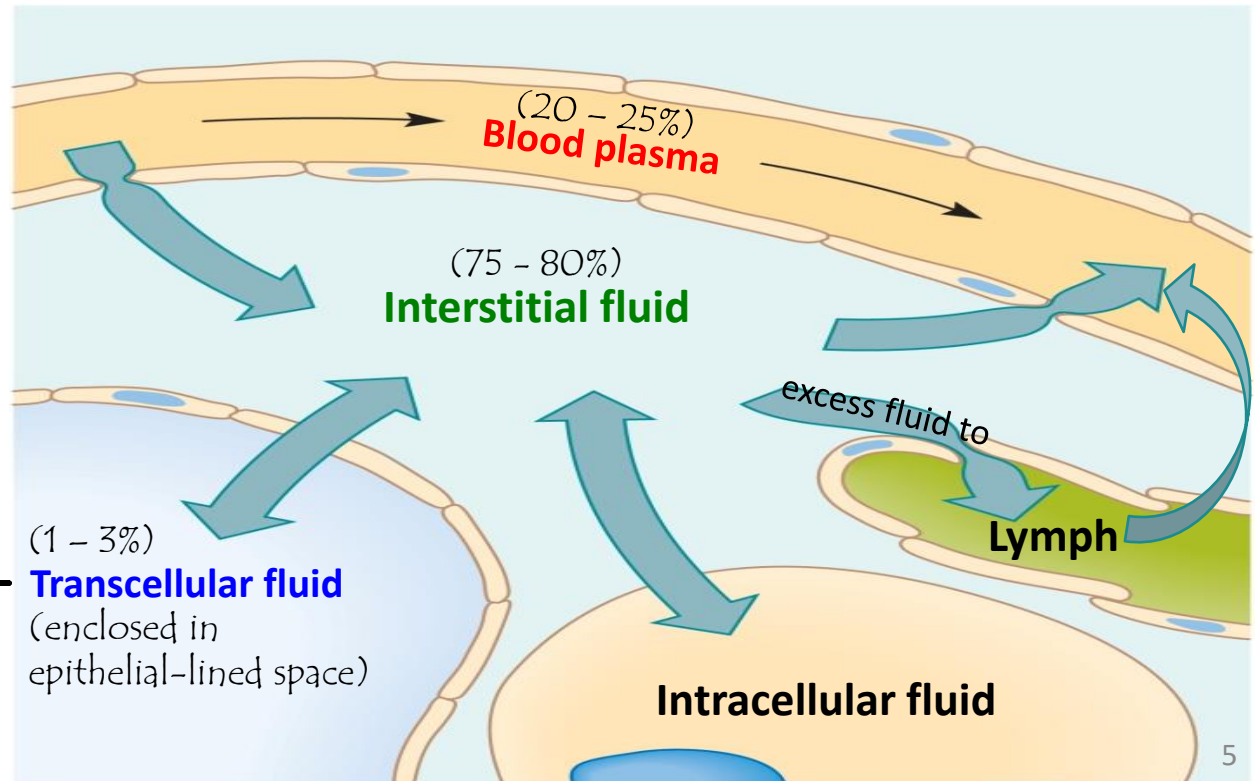
transcellular fluid (1–3%)

blood  
lymph

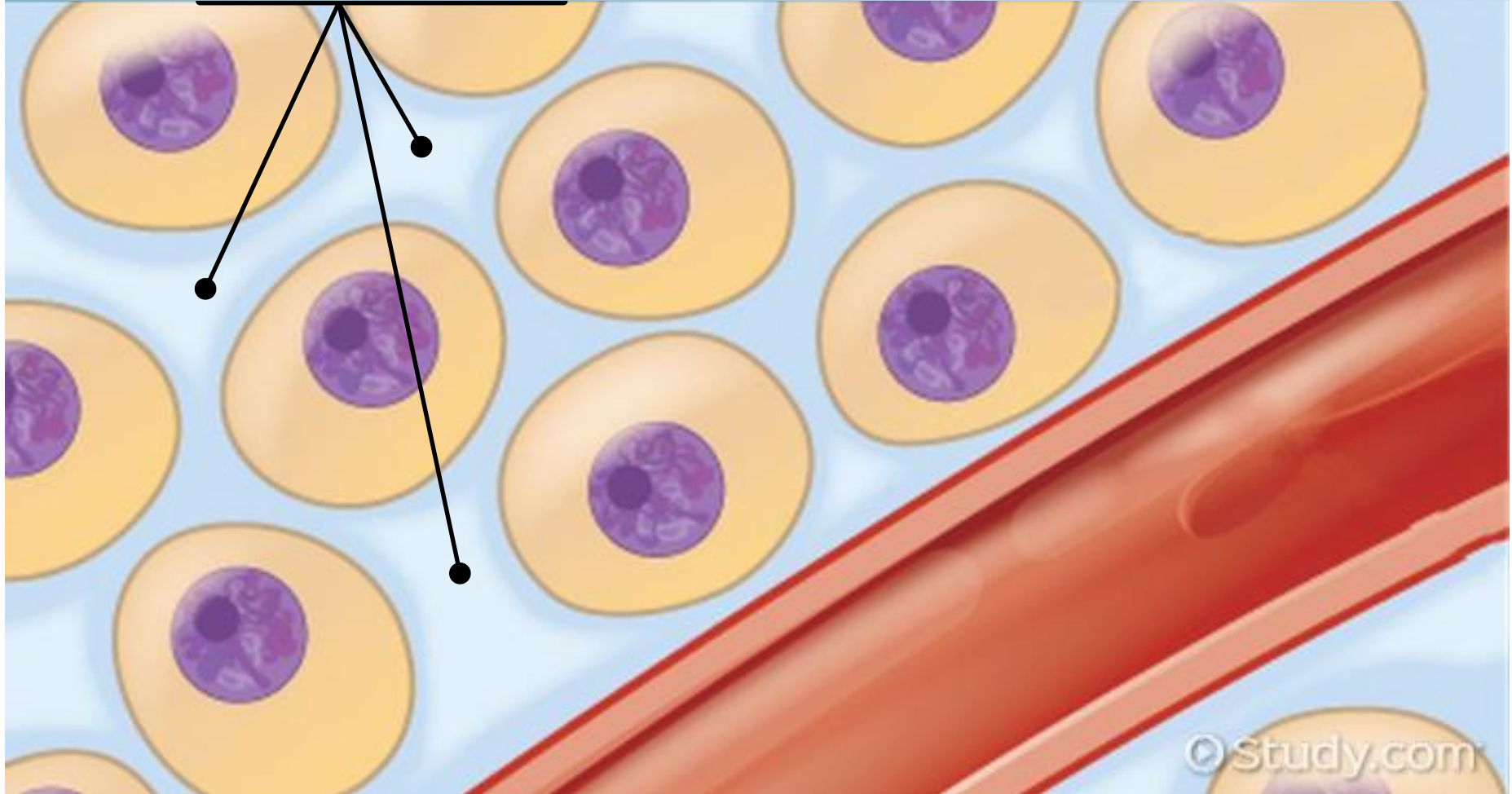
Additional info:

e.g. synovial fluid,  
peritoneal fluid  
cerebrospinal fluid  
gastrointestinal fluid  
urine

(1 – 3%)  
**Transcellular fluid**  
(enclosed in  
epithelial-lined space)



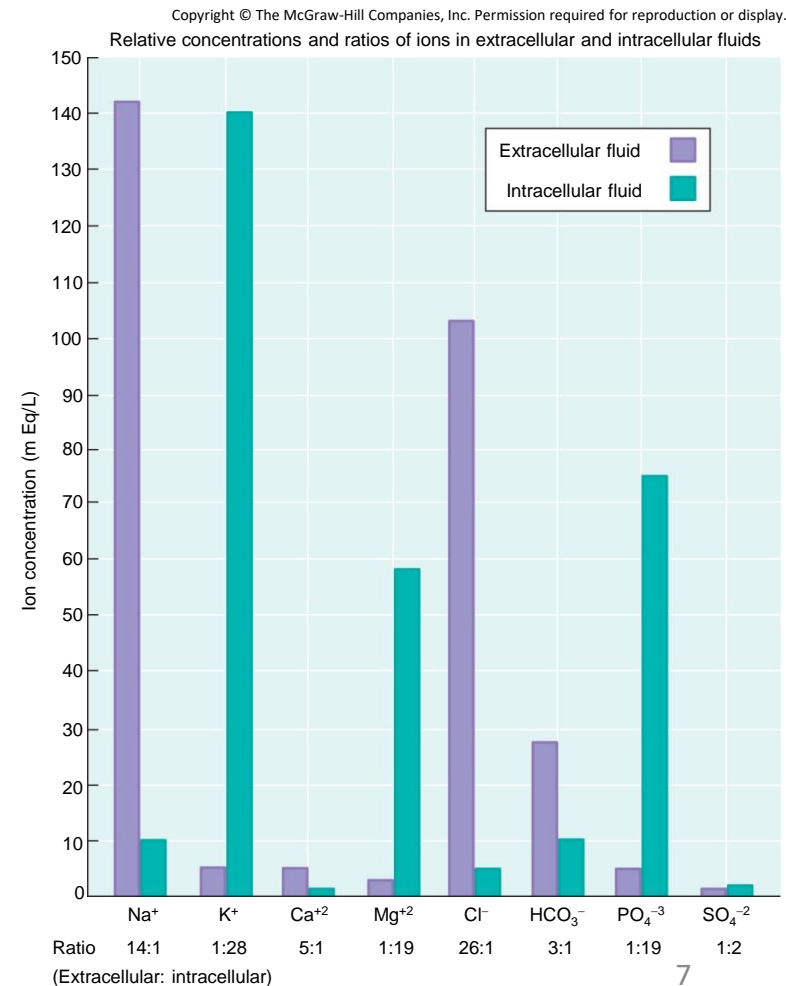
What is interstitial fluid?



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# Body fluid: chemical composition

- **extracellular** fluid: relatively high in
  - **sodium ions**,  $\text{Na}^+$
  - **calcium ions**,  $\text{Ca}^{2+}$
  - **chloride ions**,  $\text{Cl}^-$
  - **bicarbonate ions**,  $\text{HCO}_3^-$
- **intracellular** fluid: relatively high in
  - **potassium ions**,  $\text{K}^+$
  - magnesium ions,  $\text{Mg}^{2+}$
  - **phosphate ions**,  $\text{PO}_4^{3-}$
  - sulfate ions,  $\text{SO}_4^{2-}$





# Infusion solutions used for fluid imbalance

- **Isotonic**
  - if solution has the osmolarity the same as that inside the cell & **blood**
- **Hypertonic**
  - if solution has the osmolarity higher than that inside the cell & **blood**  
*[more concentrated]*
- **Hypotonic**
  - if solution has the osmolarity lower than that inside the cell & **blood**  
*[less concentrated]*





# Questions...

Which of the solutions is preferred in the following situations?

- hyponatremia (blood sodium lower than normal range)  
[hypo- = “lower” ; natr- = “sodium” ; -emia = “in blood”]
- hypernatremia
- bleeding

Way of thinking:

- water follows s \_ \_ \_ or s \_ \_ \_ \_ \_

# Osmolarity OR osmolality

Both indicate total concentration of all solutes...but...

- osmolarity  
= number of all solute particles **per unit volume** (Osm/L)  
[Note: volume changes with environmental temperature] 😞
- osmolality  
= number of all solute particles **per unit weight** (Osm/kg)  
[Note: weight does not change with environmental temperature] 😊

So which unit is preferred to use clinically?

# Crystalloid VS colloid infusion solution

## Crystalloid:

- has solutes which can pass through cell membrane, so fluid (solute+water) can translocate among blood, ISF and even intracellular fluid (ICF)
- e.g. isotonic crystalloid solution (0.9% saline, 5% dextrose[glucose])

## Colloid:

- has solutes which are too big to pass through cell membrane, so fluid stay in blood
- is also called as volume or plasma expander
- e.g. albumin (hypertonic [20%] or isotonic [4%]) for hypoalbuminemia or hypovolemia

# Blood

- River of life that surges within each of us
- Blood is life-sustaining transport vehicle of cardiovascular system

## Transport

- ❖ oxygen, minerals, nutrients
- ❖ metabolic wastes
- ❖ hormones

## Regulation

- ❖ maintains body temperature

## Protection

- ❖ protects from blood loss
- ❖ prevents infections

# Blood: physical characteristics

- sticky, opaque (non-transparent)
- $\sim 8\%$  of body weight
- male: 5 – 6 L ; female: 4 – 5 L
  - e.g. 70 kg man, his blood:  $\sim 5.6$  L
- color depends on  $O_2$  content
  - **high  $O_2$  level: scarlet red**
  - **low  $O_2$  level: dark red**
- pH: 7.4 (7.35 – 7.45), i.e.
  - **slightly alkaline**

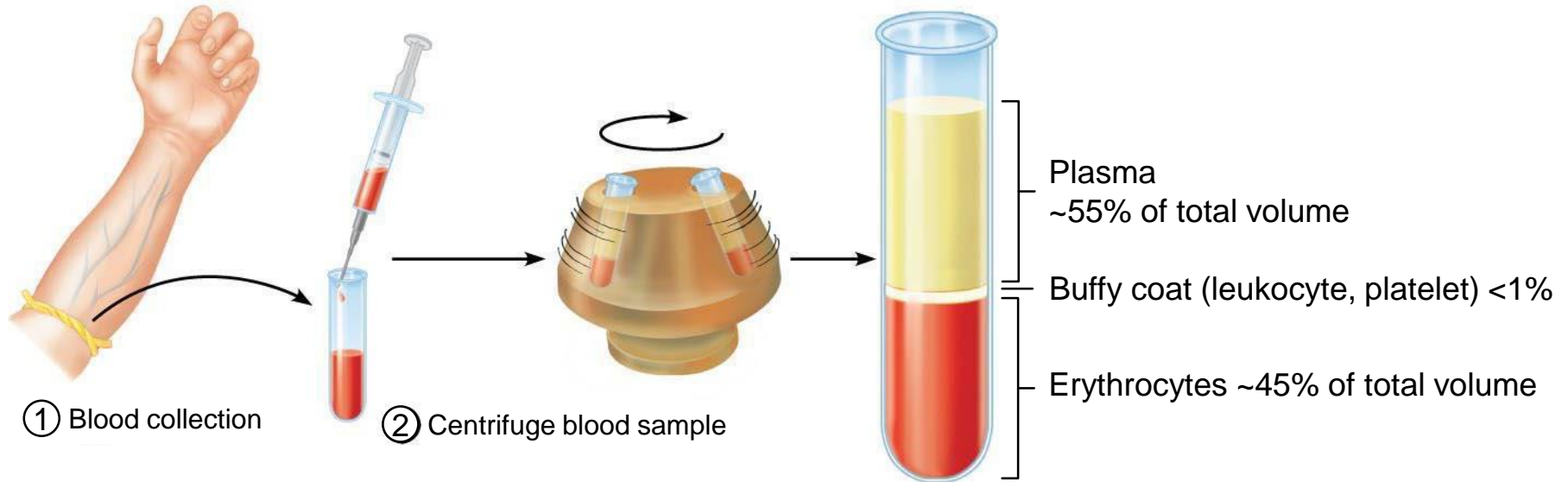


# Blood: composition

Other than lymph, blood is only fluid tissue

- **matrix, i.e. fluid component / plasma**
- **formed elements, i.e. blood cells**
  - **red blood cells** (erythrocytes)
  - **white blood cells** (leukocytes)
  - **platelets** (thrombocytes) for **blood coagulation**

# Blood: composition

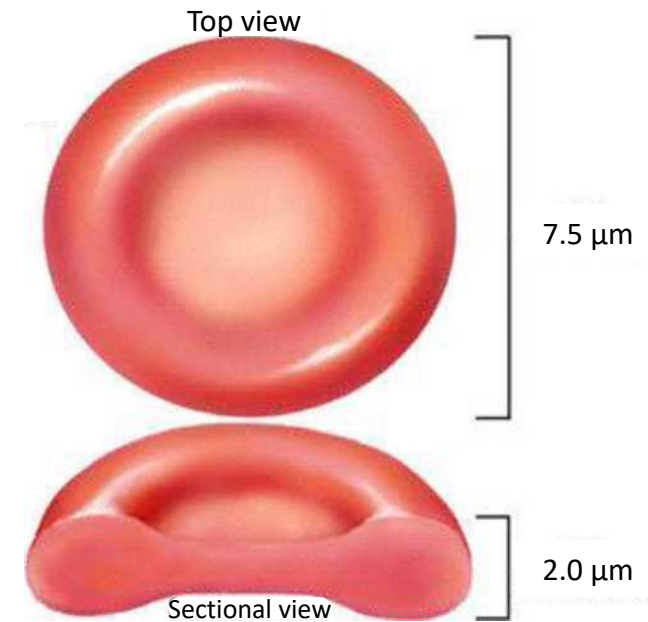




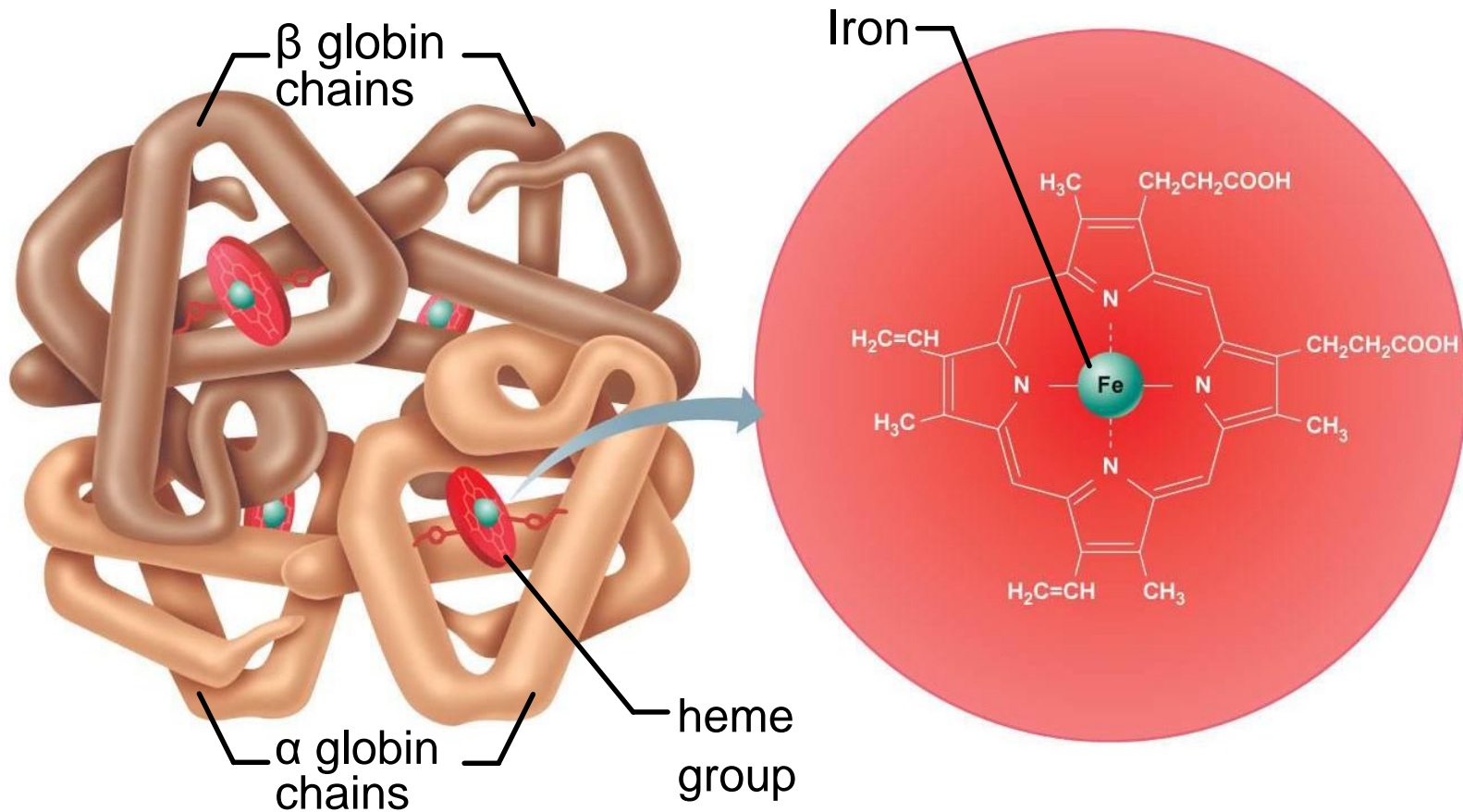
# RBC/erythrocyte

## Structural characteristics

- to facilitate efficient gas transport:
  - is biconcave
    - ❖ so more surface area for gas exchange
  - has no nucleus & no organelles
    - ❖ so more hemoglobin is packed inside cell
  - has no mitochondria,
    - ❖ so does not consume O<sub>2</sub>
- is flexible / change shape when passing through capillaries



# Hemoglobin



- consists of four subunits / polypeptide chains (two alpha & two beta) & four heme groups
  - each heme binds to \_ \_ \_ oxygen molecule

# Leukocytes

- responsible for inflammation, phagocytosis, fever & adaptive immunity
- from most abundant to least abundant
  - **N**ever      **Neutrophil**
  - **L**et      **Lymphocyte, e.g. B cell, T cell**
  - **M**onkeys      **Monocytes/macrophage**
  - **E**at      **Eosinophil**
  - **B**ananas      **Basophil**

Additional info: other leukocyte: mast cell & natural killer cell

# Neutrophil



- most abundant leukocyte in blood
- “bacterial slayer”
- phagocytic



- Neutrophil (60 – 70%)
- multilobed nucleus,
  - pale red & blue cytoplasmic granules

# Monocytes/macrophage



- **largest** of all leukocytes
- **various cellular targets**
- when entering tissue,
  - differentiate into **macrophage**
    - **chief phagocytic**
    - **prefer to reside in tissue**

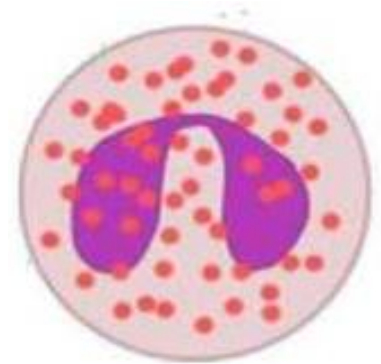


Monocyte (3 – 8%)

- kidney-shaped nucleus
- pale blue cytoplasm

# Eosinophil

- phagocytic
- target parasitic worms
- induce allergies and asthma by stimulating basophils



Eosinophil (2 – 4%)

- bilobed nucleus
- red cytoplasmic granules

# Basophil

- phagocytic
- release heparin to counteract blood clotting
- release histamine (inflammatory chemicals) to
  - induce vasodilation
  - attract leukocytes to inflamed sites



Basophil (0.5 – 1%)

- bilobed nucleus
- purplish-black cytoplasmic granules



# Lymphocytes

- **non-phagocytic**
- crucial to **adaptive immunity**,  
e.g. T cell & B cell
- rather **found in lymphoid tissues**  
than blood circulation



Lymphocyte (20 – 25%)

- large spherical nucleus,
- thin rim of pale blue cytoplasm

## Additional info:

- natural killer cell,
  - lymphocyte, but rather important in innate immunity
  - kill cancer cell or virus-infected cell by inducing apoptosis (programmed cell death)

# Additional info: lymphoid tissues

