

MAKE EN ALE CONTRACTOR OF THE PROPERTY OF THE

2026

BREATHING AND EXHANGE OF GASES

ZOOLOGY

Lecture - 5

By- SAMAPTI MAM



Physics Wallah



Topics to be covered

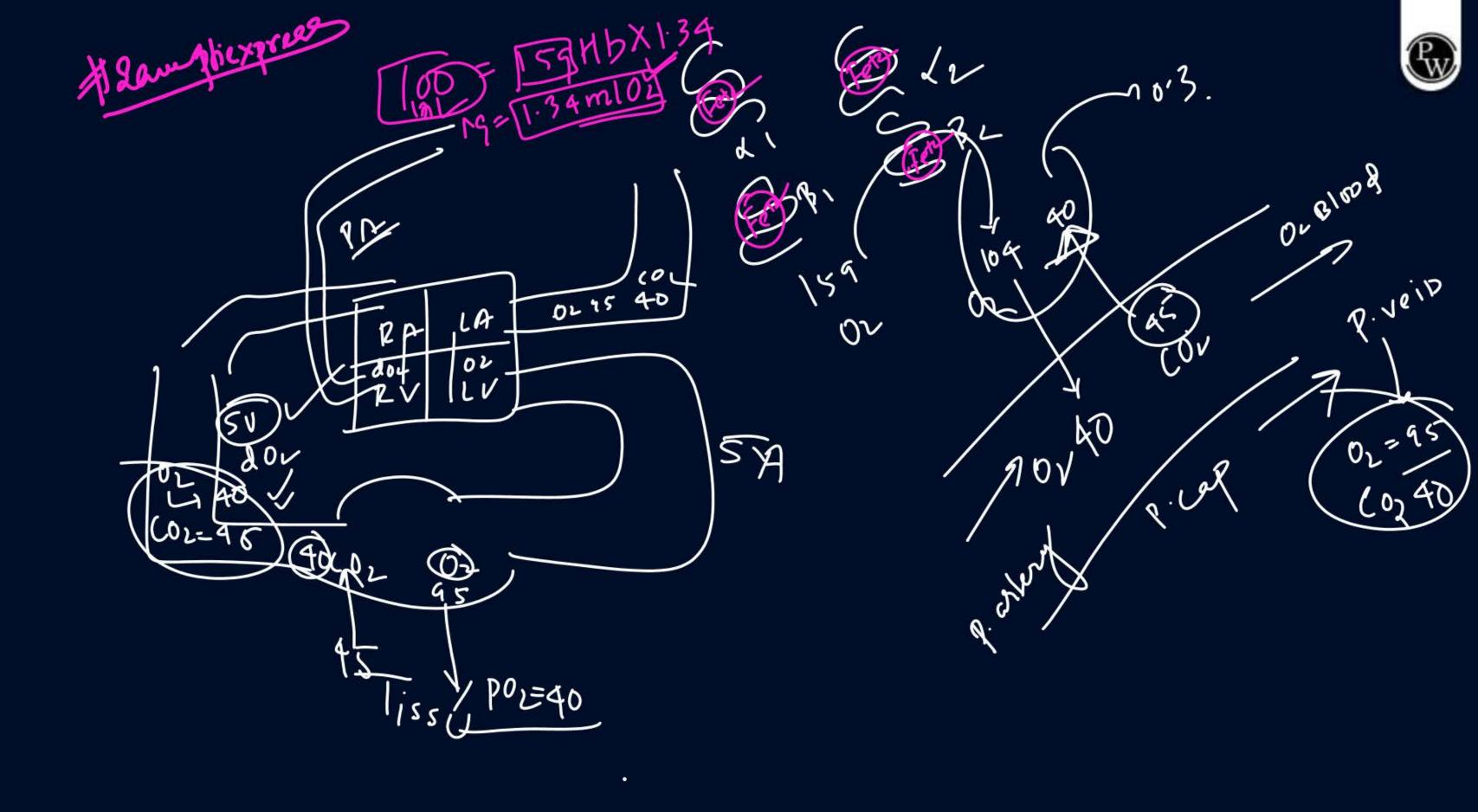


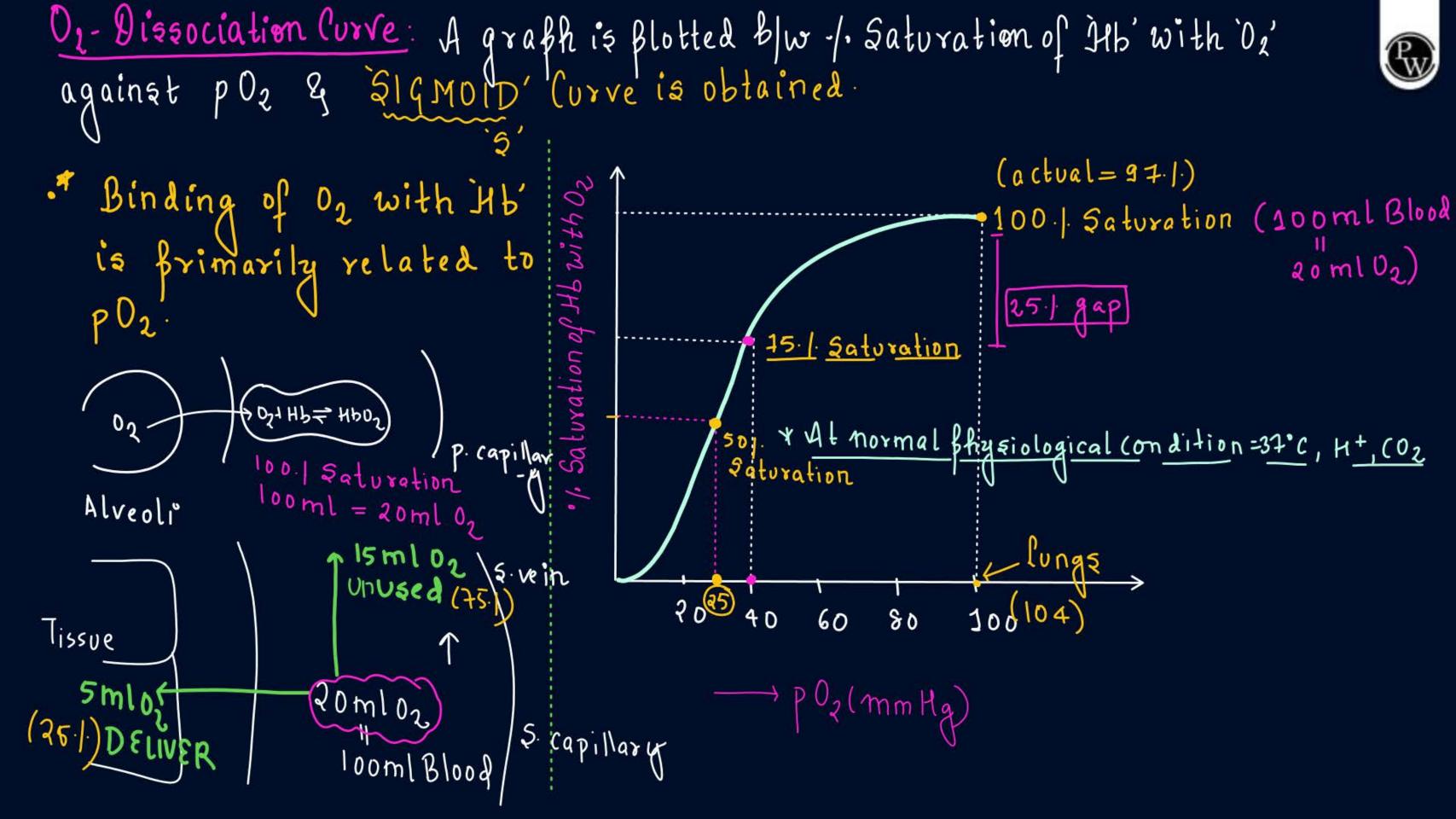
- 1 TRANSPORT OF GASES
- 2
- 3
- 4

MY TELEGRAM









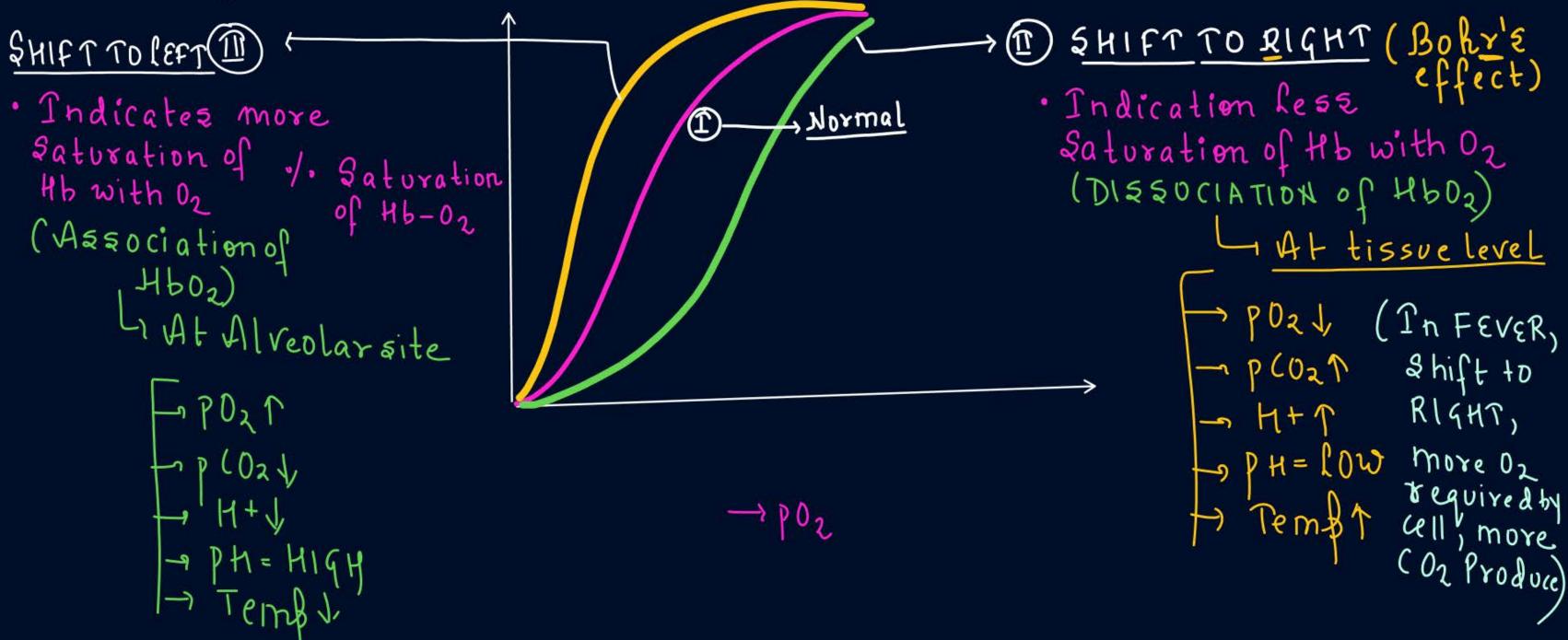
- → At normal physiological condition: 5 ml 02 out of this 20 ml is delivered to tissue (25.1) & 15 ml 02 still left (can be used in muscular exercise) (75.) Blood still saturated).

$$\frac{1}{100}$$
 20 ml $0_2 \times \frac{15}{15} = \frac{15}{15}$ $\frac{1}{100}$ $\frac{1}{100}$ $\frac{1}{100}$

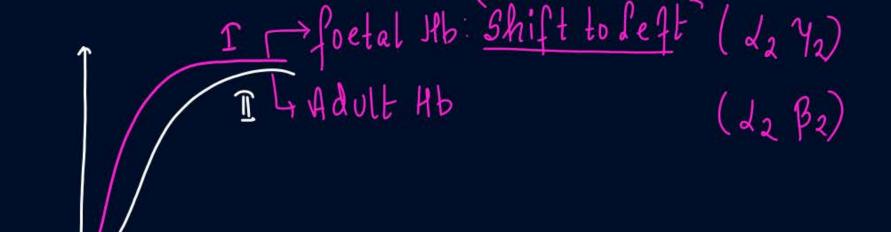
Extra a gyand p50 value: The Bartial pressure at which the Hb'is 50%.

Sqturated.

* The Binding of O2 with Hb frimarily defendent on po2 but other factors can affect this binding: pCD2, H+, pH, temperature. & these can shift the graph either towards RIGHT ox LEFT.









14.4 TRANSPORT OF GASES

8

Blood is the medium of transport for O_2 and CO_2 . About 97 per cent of O_2 is transported by RBCs in the blood. The remaining 3 per cent of O_2 is carried in a dissolved state through the plasma. Nearly 20-25 per cent of CO_2 is transported by RBCs whereas 70 per cent of it is carried as bicarbonate. About 7 per cent of CO_2 is carried in a dissolved state through plasma.

14.4.1 Transport of Oxygen

Haemoglobin is a red coloured iron containing pigment present in the RBCs. O_2 can bind with haemoglobin in a reversible manner to form **oxyhaemoglobin**. Each haemoglobin molecule can carry a maximum of four molecules of O_2 . Binding of oxygen with haemoglobin is primarily related to partial pressure of O_2 . Partial pressure of O_2 , hydrogen ion concentration and temperature are the other factors which can interfere with this binding. A sigmoid curve is obtained when percentage saturation of haemoglobin with O_2 is plotted against the

of naemoglobin with O₂ is plotted against the pO, This curve is called the Oxygen dissociation curve (Figure 14.5) and is highly useful in studying the effect of factors like pCO2. H' concentration, etc., on binding of O2 with haemoglobin. In the alveoli, where there is high po, low pCo, lesser H concentration and lower temperature, the factors are favourable for the formation of oxyhaemoglobin, whereas in the tissues, where low po, high pCO, high H concentration and higher temperature exist, the conditions are favourable for dissociation of oxygen from the oxyhaemoglobin. This clearly indicates that O, gets bound to haemoglobin in the lung surface and gets dissociated at the tissues. Every 100 ml of oxygenated blood can deliver around 5 ml of O, to the tissues under normal physiological conditions.

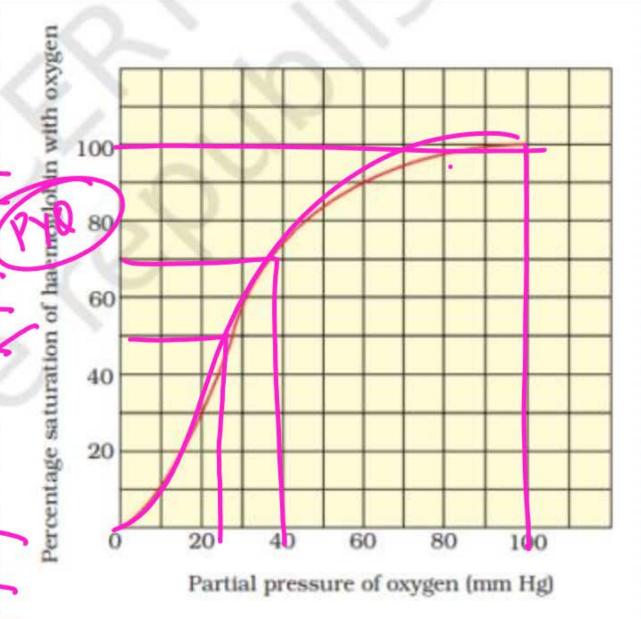


Figure 14.5 Oxygen dissociation curve



i) Pransport of CO2: 3 ways

i) Dissolved in Plasma (7-1)

i) Bound with Hb (20-25-1) = 23-1

Hb + CO2 = HbCO2 > CO2 binds Globin' fart

Carbaminohaemoglobin'

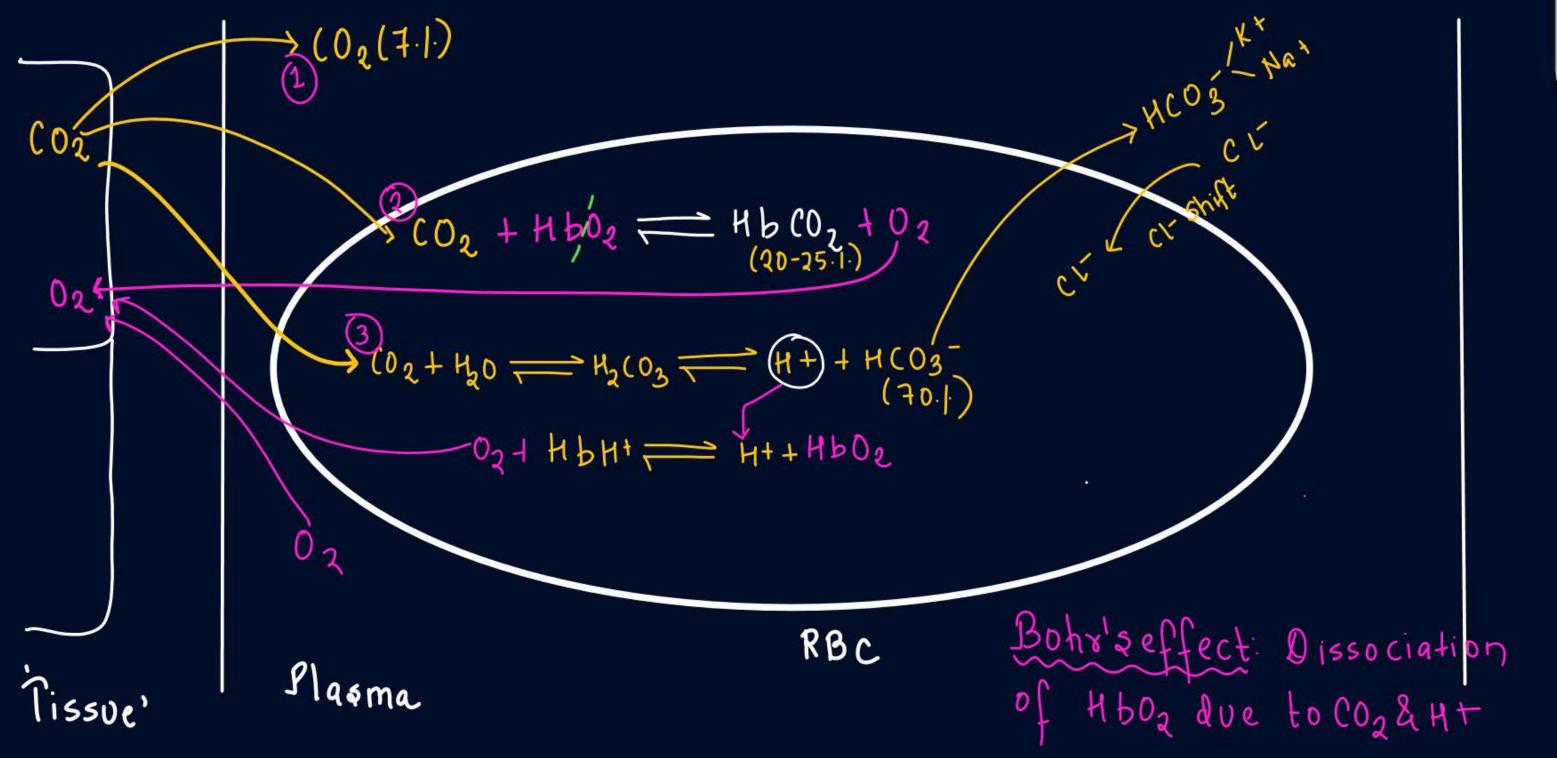
iii) Az HCO3- (Bicarbonate) = 70-1

· C.A: Carbonic anhydrase HCO3- (Bicarbonate) = 701 Present mainly in RBC but (02 Nat HCO3 some amount also inflasma CA 70. J4 C 03 · Cl- Shift hamburger's To travel (3thttan Gyean) to Lungsit is dissolved in Plasma RBC Ct into RBC from Chloride shift Plasma to Balance movement of 4003-

®

→ Every 100 ml doz Blood BELIVERS' [4ml Coz to Alveoli]







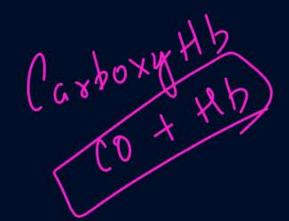
14.4.2 Transport of Carbon dioxide

 CO_2 is carried by haemoglobin as **carbamino-haemoglobin** (about 20-25 per cent). This binding is related to the partial pressure of CO_2 . pO_2 is a major factor which could affect this binding. When pCO_2 is high and pO_2 is low as in the tissues, more binding of carbon dioxide occurs whereas, when the pCO_2 is low and pO_2 is high as in the alveoli, dissociation

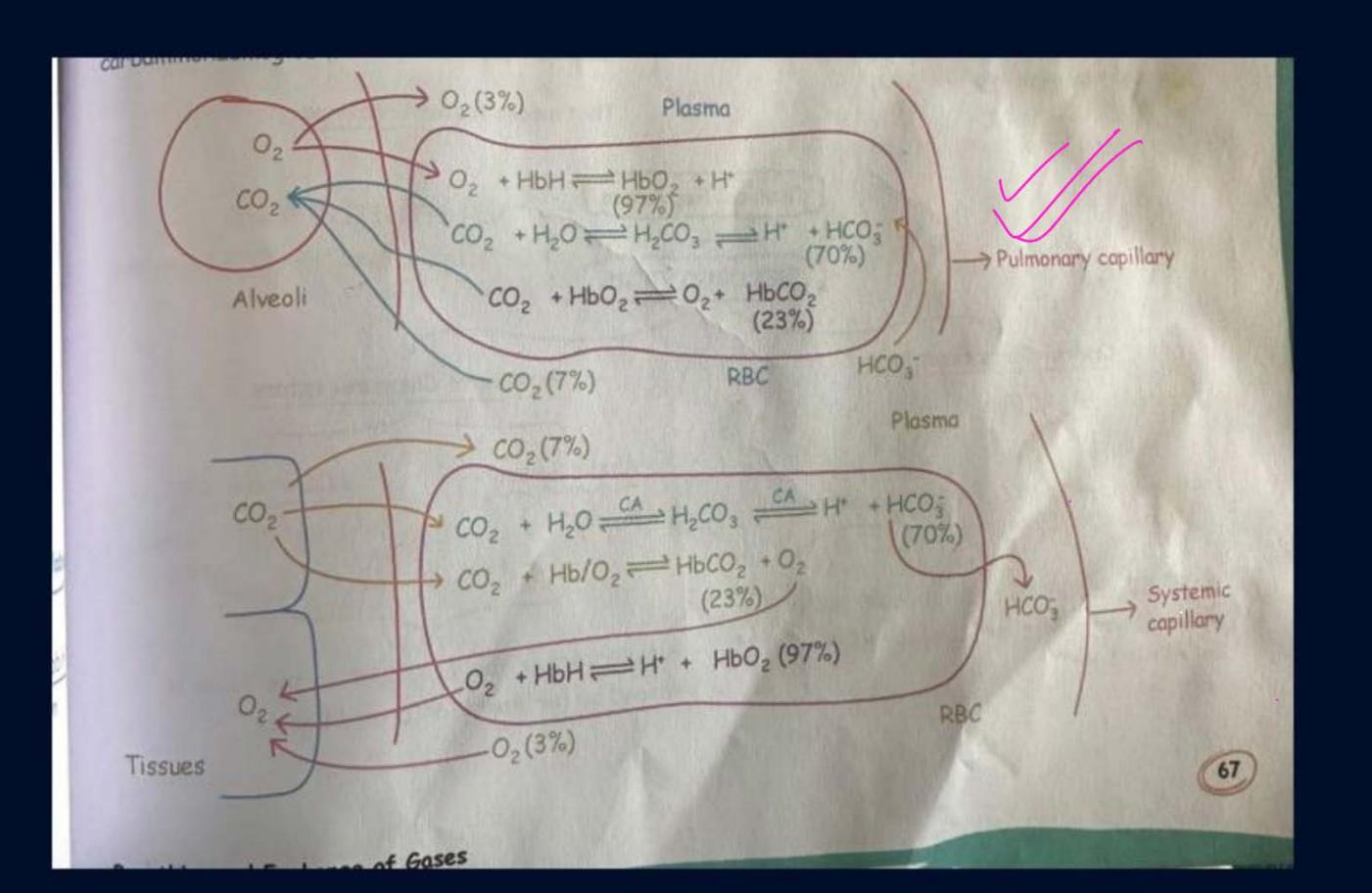
of CO₂ from carbamino-haemoglobin takes place, i.e., CO₂ which is bound to haemoglobin from the tissues is delivered at the alveoli. RBCs contain a very high concentration of the enzyme, carbonic anhydrase and minute quantities of the same is present in the plasma too. This enzyme facilitates the following reaction in both directions.

$$CO_2 + H_2O \xleftarrow{Carbonic \\ anhydrase} H_2CO_3 \xleftarrow{Carbonic \\ anhydrase} HCO_3^* + H^*$$

At the tissue site where partial pressure of CO₂ is high due to catabolism, CO₂ diffuses into blood (RBCs and plasma) and forms HCO₃ and H*. At the alveolar site where pCO₂ is low, the reaction proceeds in the opposite direction leading to the formation of CO₂ and H₂O. Thus, CO₂ trapped as bicarbonate at the tissue level and transported to the alveoli is released out as CO₂ (Figure 14.4). Every 100 ml of deoxygenated blood delivers approximately 4 ml of CO₂ to the alveoli.







Assertion (A): At the tissue site, partial pressure of CO2 is high Reason (R): Catabolism causes increase in partial pressure of CO2 at tissues

- Both Assertion (A) and Reason (R) are the true, and Reason (R) is a correct explanation of Assertion (A).
- Both Assertion (A) and Reason (R) are the true, but Reason (R) is not a correct explanation of Assertion (A).
- Assertion (A) is true, and Reason (R) is false.
- Assertion (A) is false, and Reason (R) is true.

Statement-I: O2 gets bound to haemoglobin in the lung surface due to high pCO2 Statement-II: Every 1000 ml of oxygenated blood can deliver around 5 ml of O2 to the tissues under normal physiological conditions.

- Statement I and Statement II both are correct.
- Statement I is correct, but Statement II is incorrect.
- 3 Statement I is incorrect, but Statement II is correct.
- Statement I and Statement II both are incorrect.

A large proportion of oxygen remains unused in the human blood even after its uptake by the body tissue. This $\rm O_2$:

- A. helps in releasing more O₂ to the epithelial tissues
- B. is enough to keep oxyhemoglobin saturation at 96%
- C. raises the pCO₂ of blood to 75mm of Hg
- D. acts as a reserve during muscular exercise

In lungs there is definite exchange of ions between RBC and plasma. Removal of CO2 from blood involves

- (1) Influx of Cl' into RBC
- (2) Efflux of Cl' from plasma
- (3) Influx of HCO3' ions in RBC
- (4) Efflux of HCO3 ions from RBC

The oxygen - haemoglobin dissociation curve will show a right shift in case of

- (A) High Pco2
- (B) High pO2
- (C) Low pCO2
- (D) Less H+ concentration

Which statements are true/false"

- (i) Blood transports CO2 comparatively easily because of its high solubility
- (ii) Approximately 8.9% of CO2 is transported dissolved in plasma
- (iii) CO2 diffuses into blood, passes into RBCs and reacts with water to form H2CO3
- (iv) Oxyhaemoglobin of erythrocytes is basic
- (v) Chloride ions diffuse from plasma into erythrocytes to maintain ionic balance

- (1) (i), (iii) and (v) are true, (ii) and (iv) are false
- (2) (i), (iii) and (v) are false, (ii) and (iv) are true
- (3) (i), (ii) and (iv) are true, (iii) and (v) are false
- (4) (i), (ii) and (iv) are false, (iii) and (v) are true

What is the approximate partial pressure of oxygen (pO₂) in systemic arteries?

- 1 40 mmHg
- 2 45 mmHg
- 3 80 mmHg
- 4 95 mmHg

In the alveoli, which of the following factors is/are favourable for the formation of oxyhaemoglobin?

I. High pO₂

II. Low pCO₂

III. Lesser H+ concentration

IV. Lower temperature

V. Low pH

Choose the correct option.

- 1 Only (I)
- (I), (II), (III) and (IV)
- (I), (II) and (III)
- 4 All of these



- REVISE CLAASNOTES / ZOOLOGY MED EASY

MODULE HW
Module -1
Prarambh exercise 1- 7-26

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