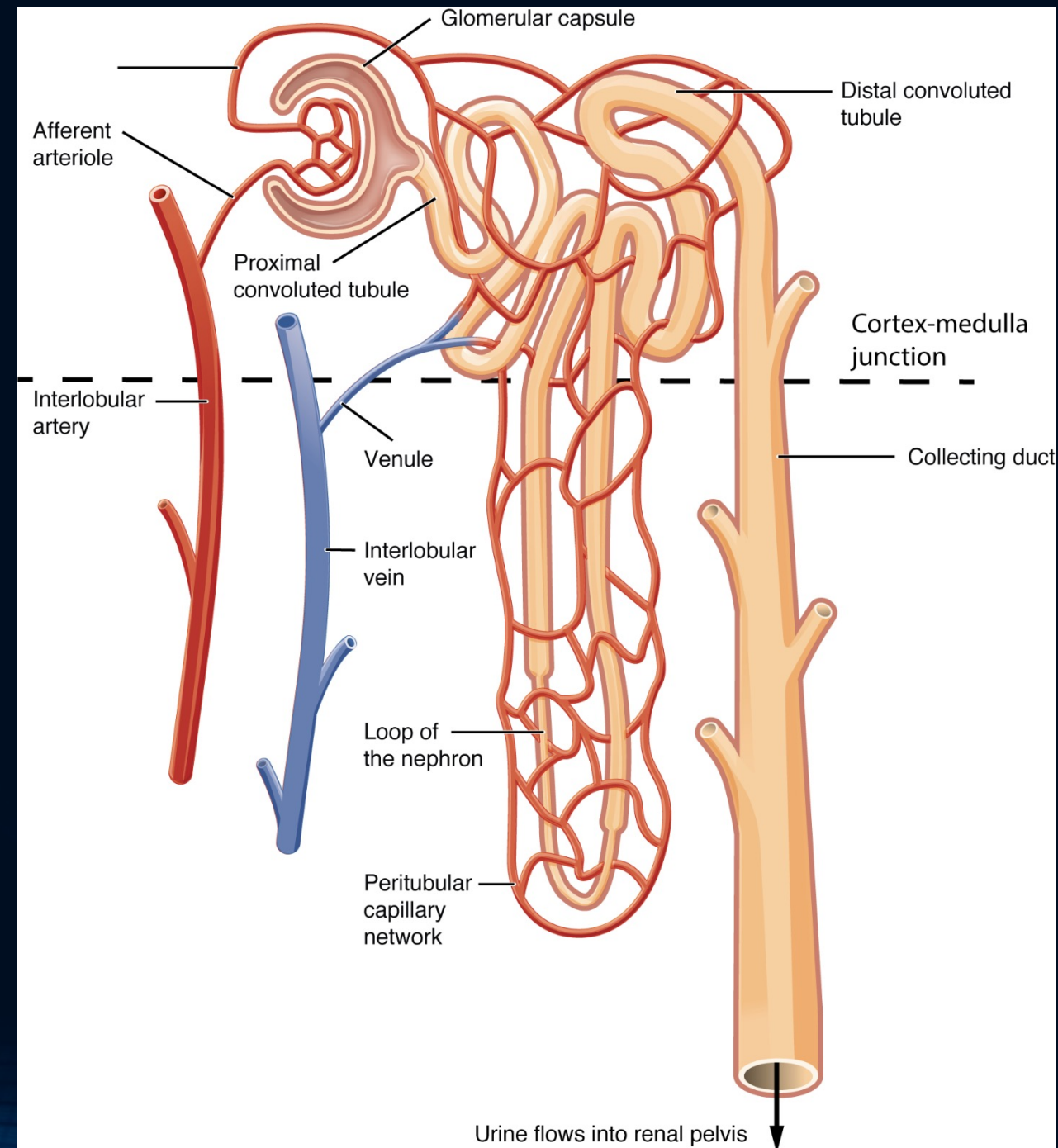


Renal Physiology

RENAL PHYSIOLOGY 4 REABSORPTION LOOP OF HENLE

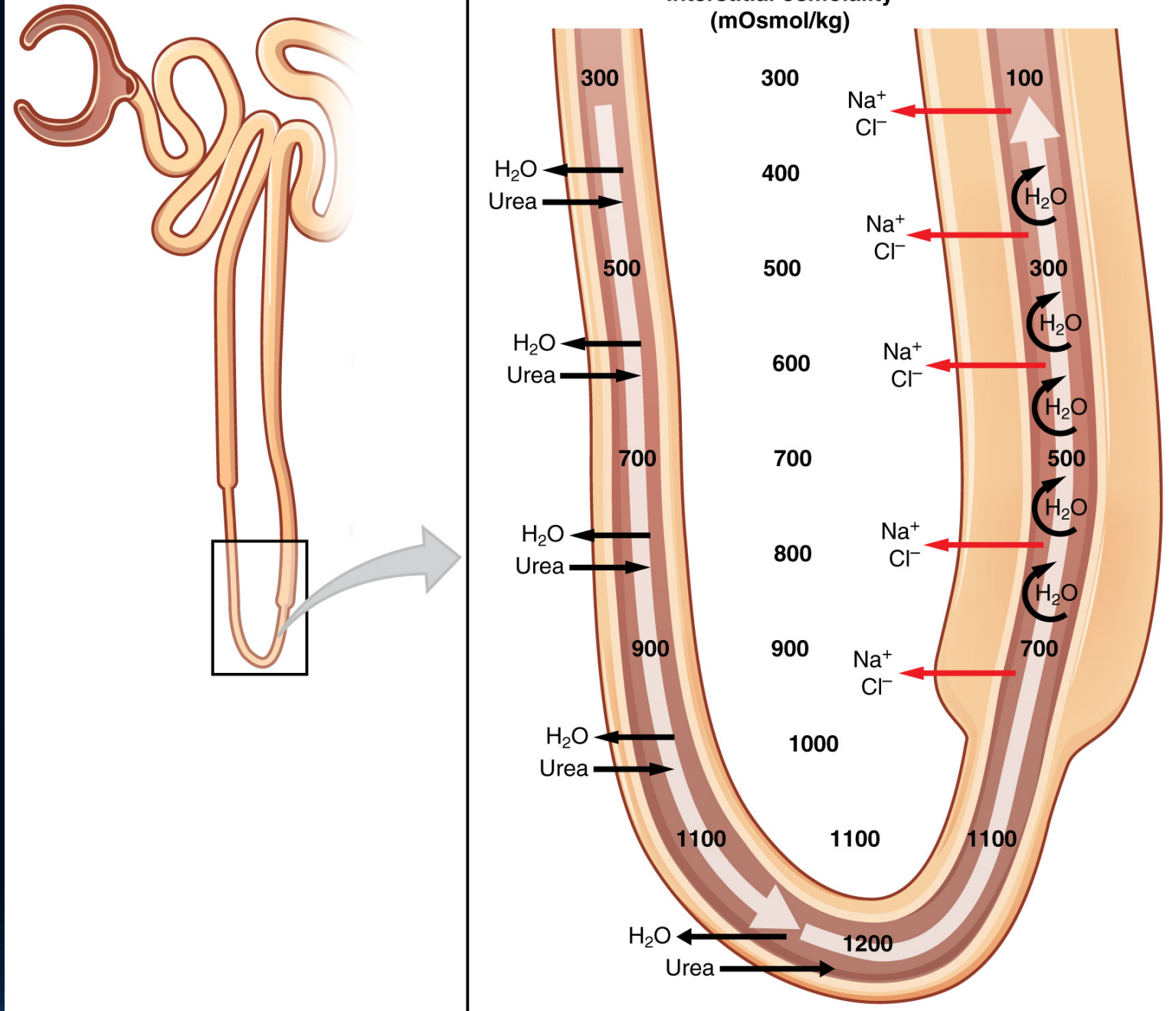
Loop of Henle

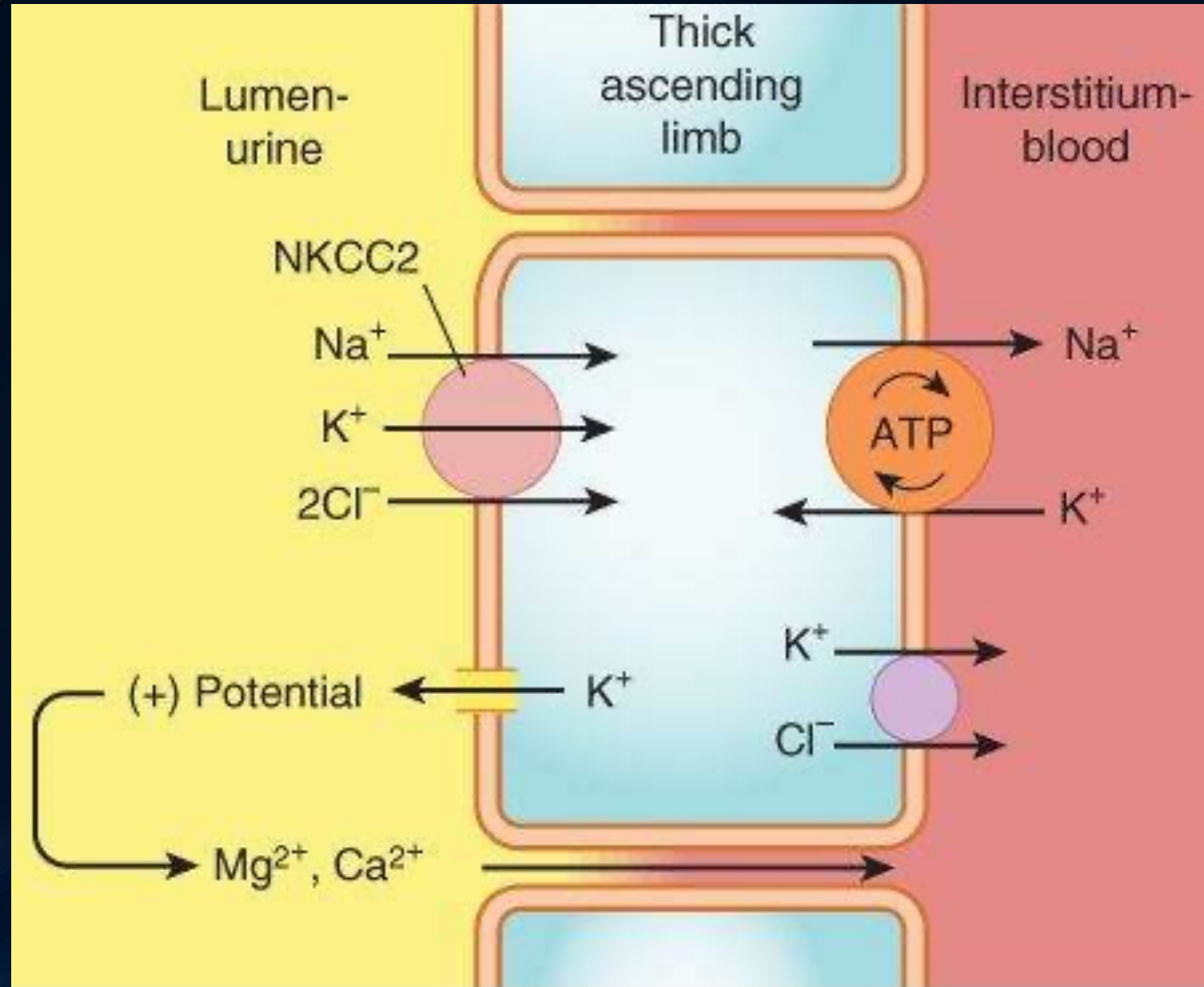
- Site of reabsorption of approximately 20% of solutes like Na^+ and approximately 15% of water
- Descending loop is permeable to water and impermeable to Na^+
- Ascending limb is permeable to Na^+ but not to water
- In approximately 20% of nephrons, loop dips deep into the medulla
- Interstitial fluid becomes more concentrated as loop descends further into medulla
- Capillaries surrounding medullary loop are sometime called “vasa recta”



Loop of Henle

- As filtrate goes through descending loop, H₂O leaves nephron down its concentration gradient
- Filtrate becomes more concentrated as H₂O but not solute leaves the loop
- Vasa recta have high osmotic pressure of capillary so water is drawn into capillaries
- Enters loop at 300 mosm/L; at bottom of loop, filtrate can be 1200 mosm/L
- As filtrate goes through ascending loop, Na⁺ and Cl⁻ are reabsorbed through secondary active transport mechanisms similar to PCT
- With solute leaving, but H₂O remaining, filtrate becomes diluted to ~100 mosm/L





Renal Physiology

RENAL PHYSIOLOGY 5 REABSORPTION DCT AND CD

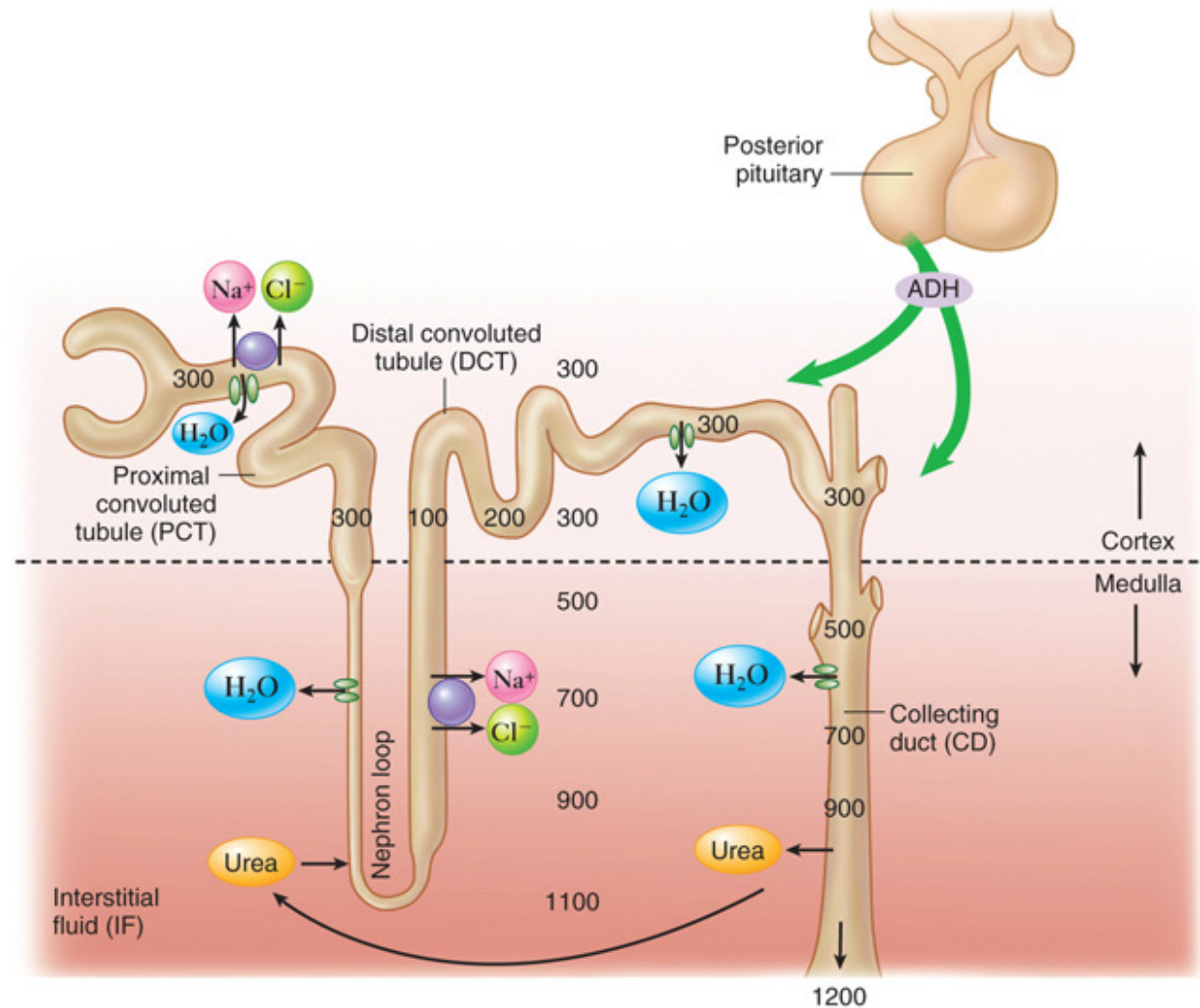
Distal Convoluted Tubule and Collecting Duct

- Filtrate that reaches DCT from ascending loop of Henle is hypo-osmotic (~100 mosm/L)
- DCT and CD are locations where urine can remain dilute or can be concentrated depending on the fluid needs of the body
 - If we are dehydrated, more water is reabsorbed, urine is more concentrated
 - If we are overhydrated, less water is reabsorbed, urine is more dilute
- Hormones influence these actions
 - Antidiuretic hormone (ADH)
 - Aldosterone (ALDO)
 - Atrial natriuretic factor / peptide / hormone

Producing concentrated urine ADH

Associated with increased action of ADH and aldosterone

- ADH increases the expression of aquaporin channels on DCT and CD



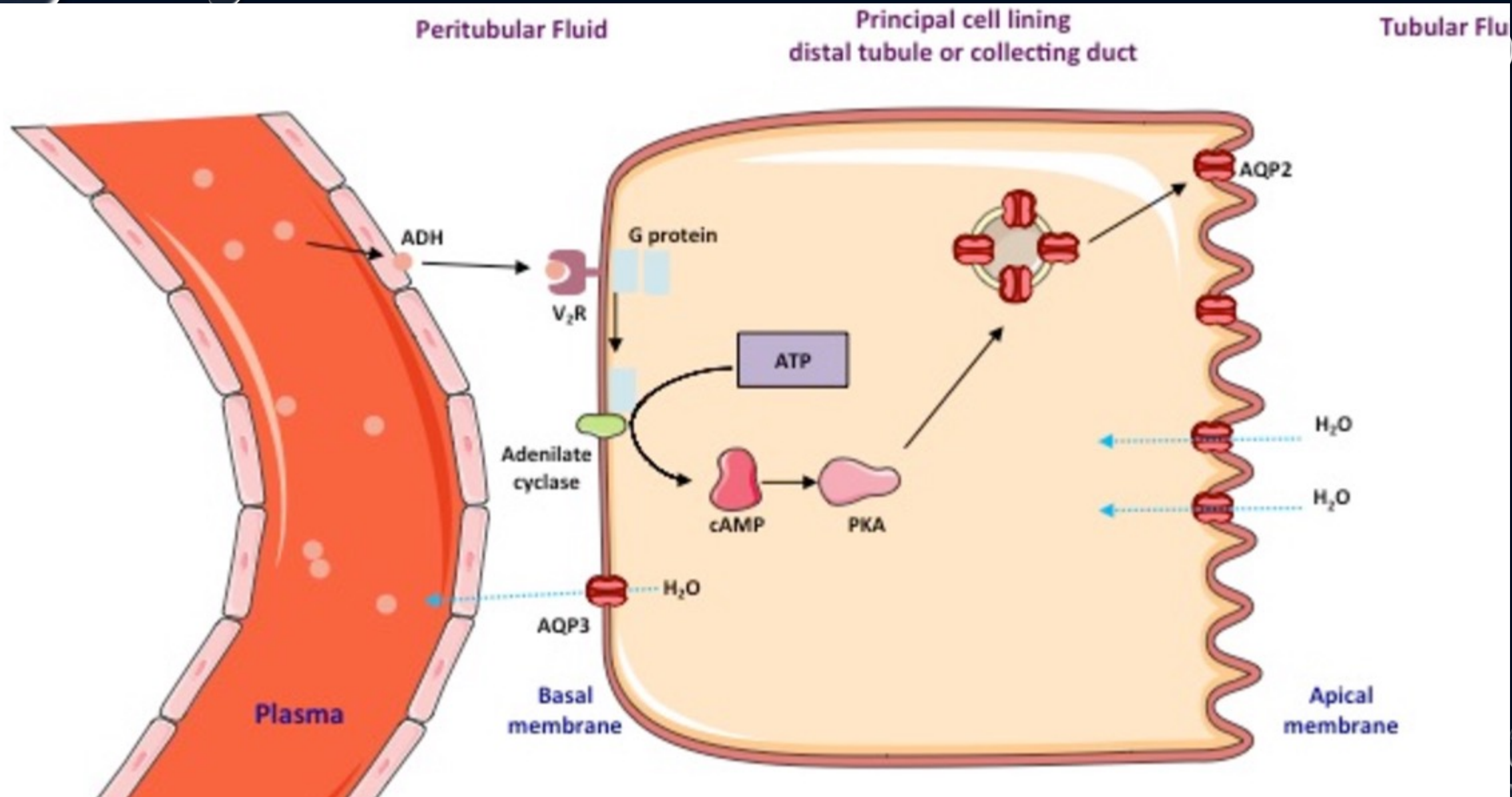
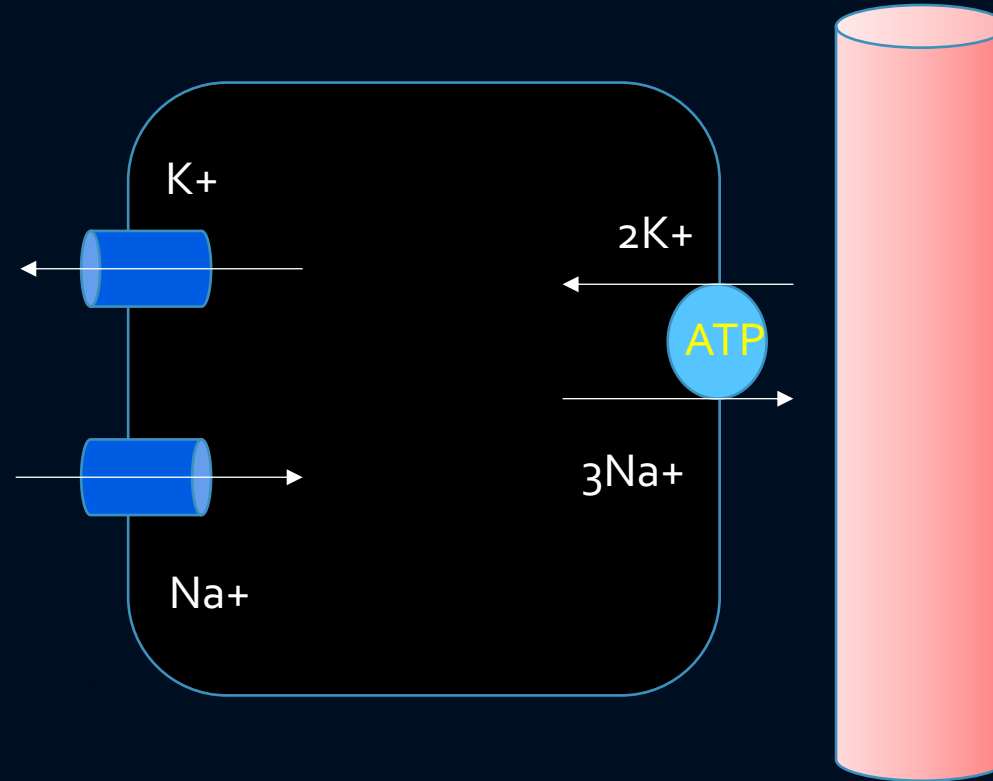


Figure 4 Mechanism of action of antidiuretic hormone (ADH) in the distal convoluted tubule and collecting duct

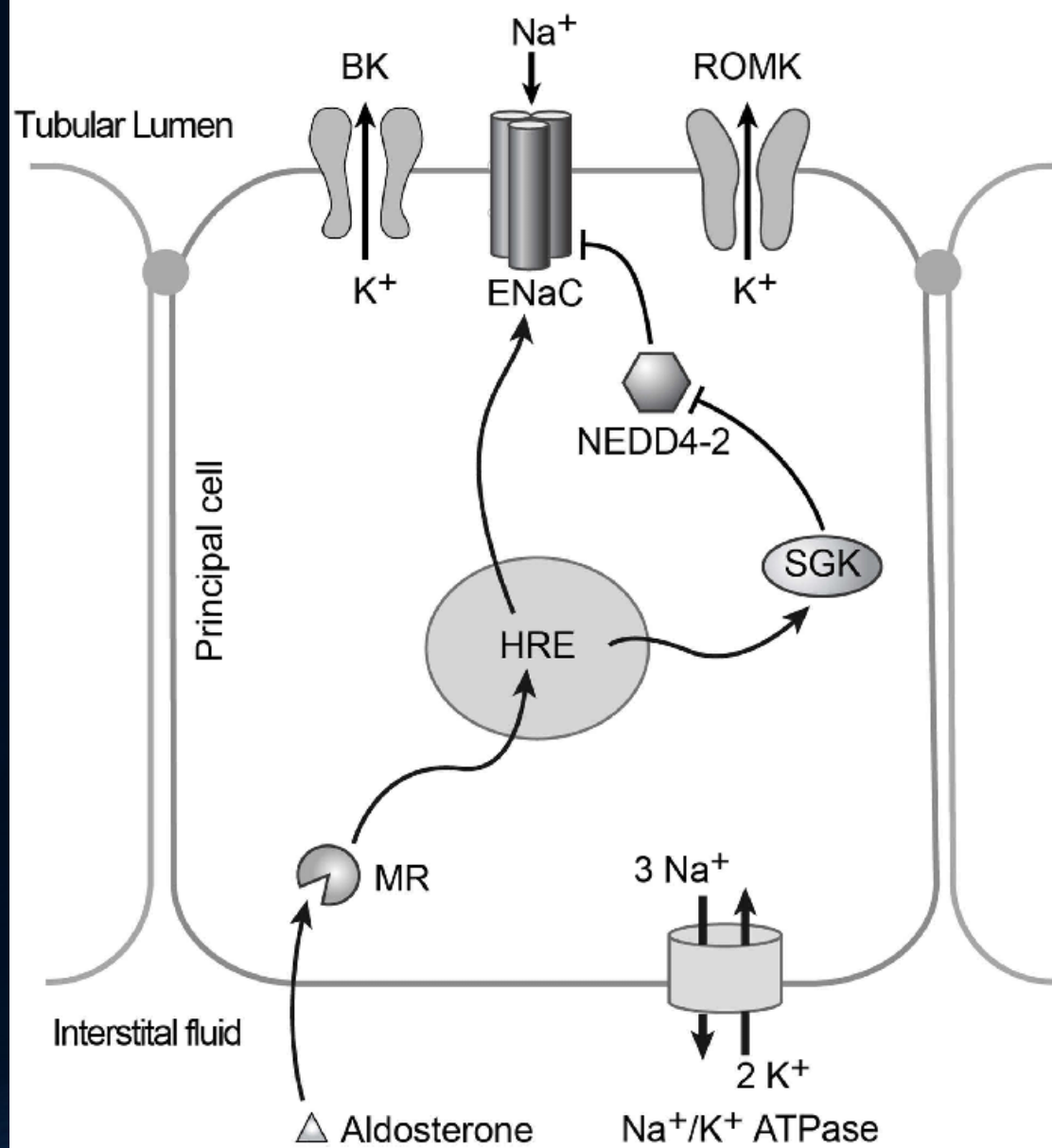
Producing concentrated urine Aldosterone & ADH

Associated with increased action of ADH and aldosterone

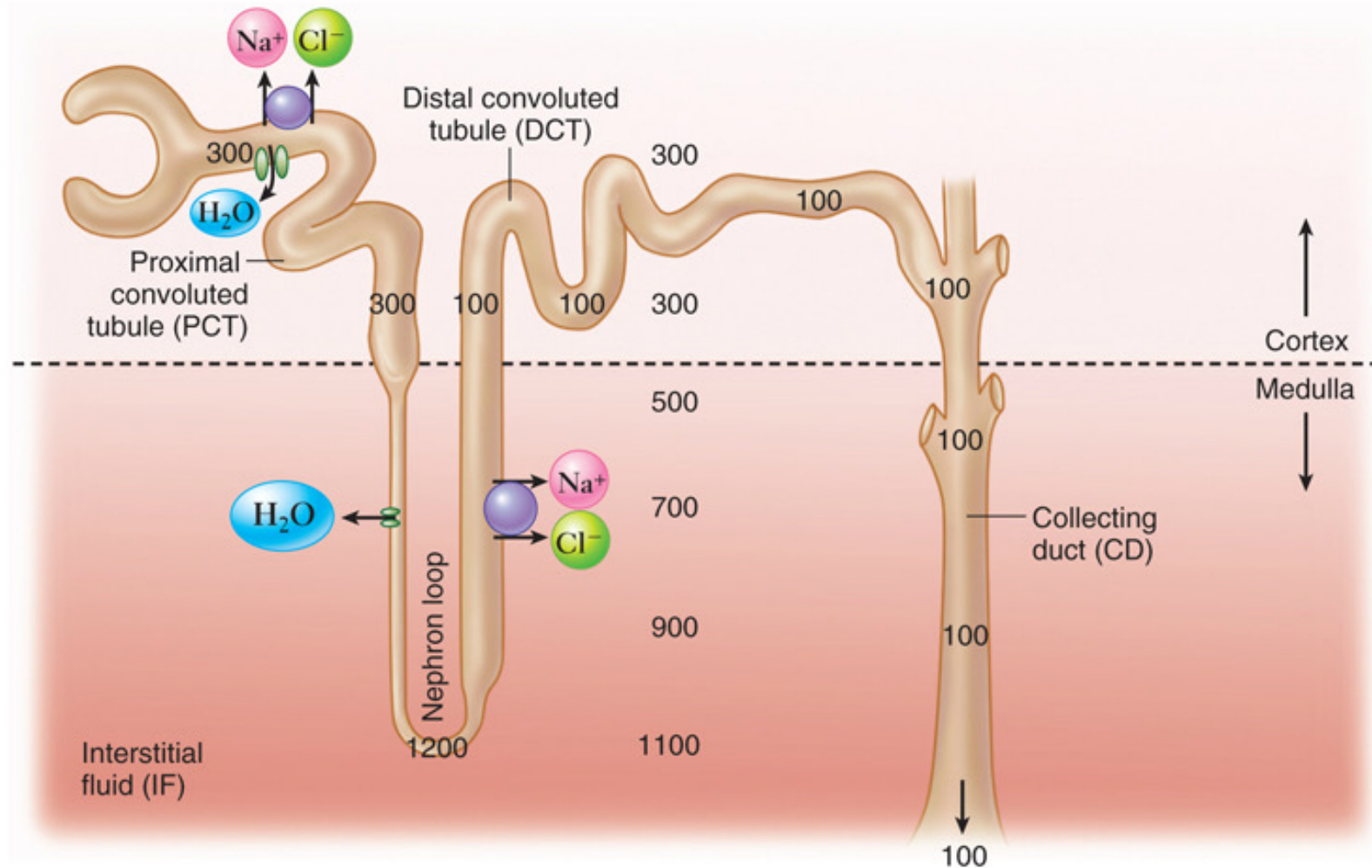
- Aldosterone increases expression of the following:
 - Apical Na^+ channels
 - Apical K^+ channels
 - Basal Na^+ / K^+ pump
- Aldosterone also increases the probability that Na^+ and K^+ channels will be open
- Aldosterone also increase the rate of activity of the Na^+/K^+ pump



Distal Nephron



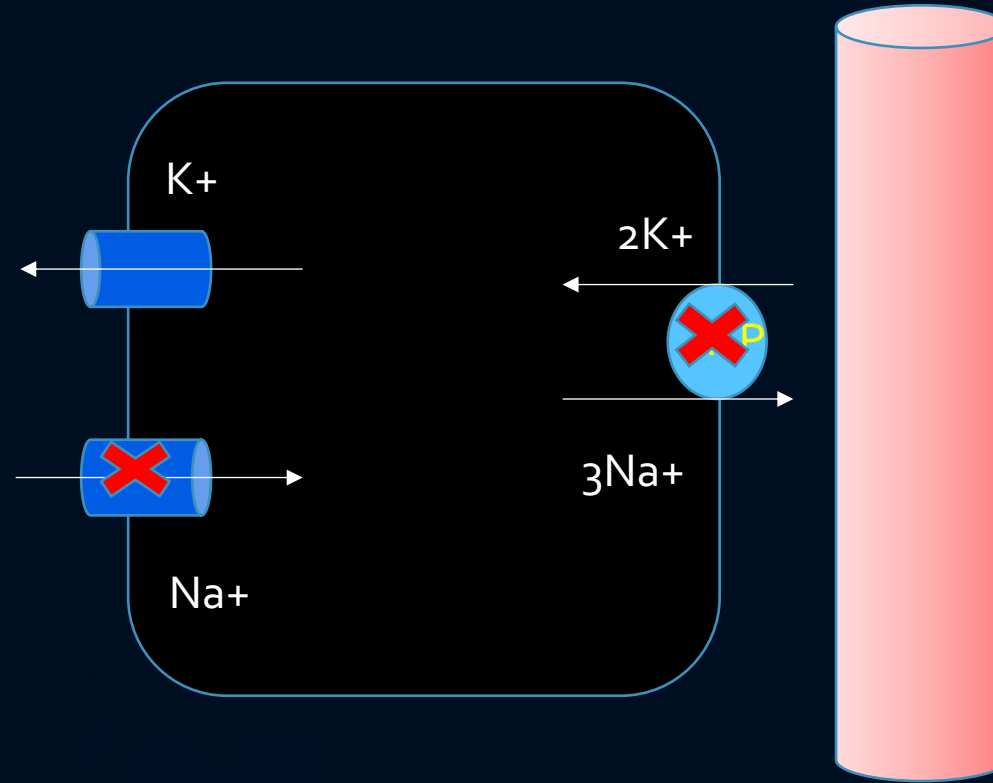
Producing dilute urine



Producing a dilute urine ANH

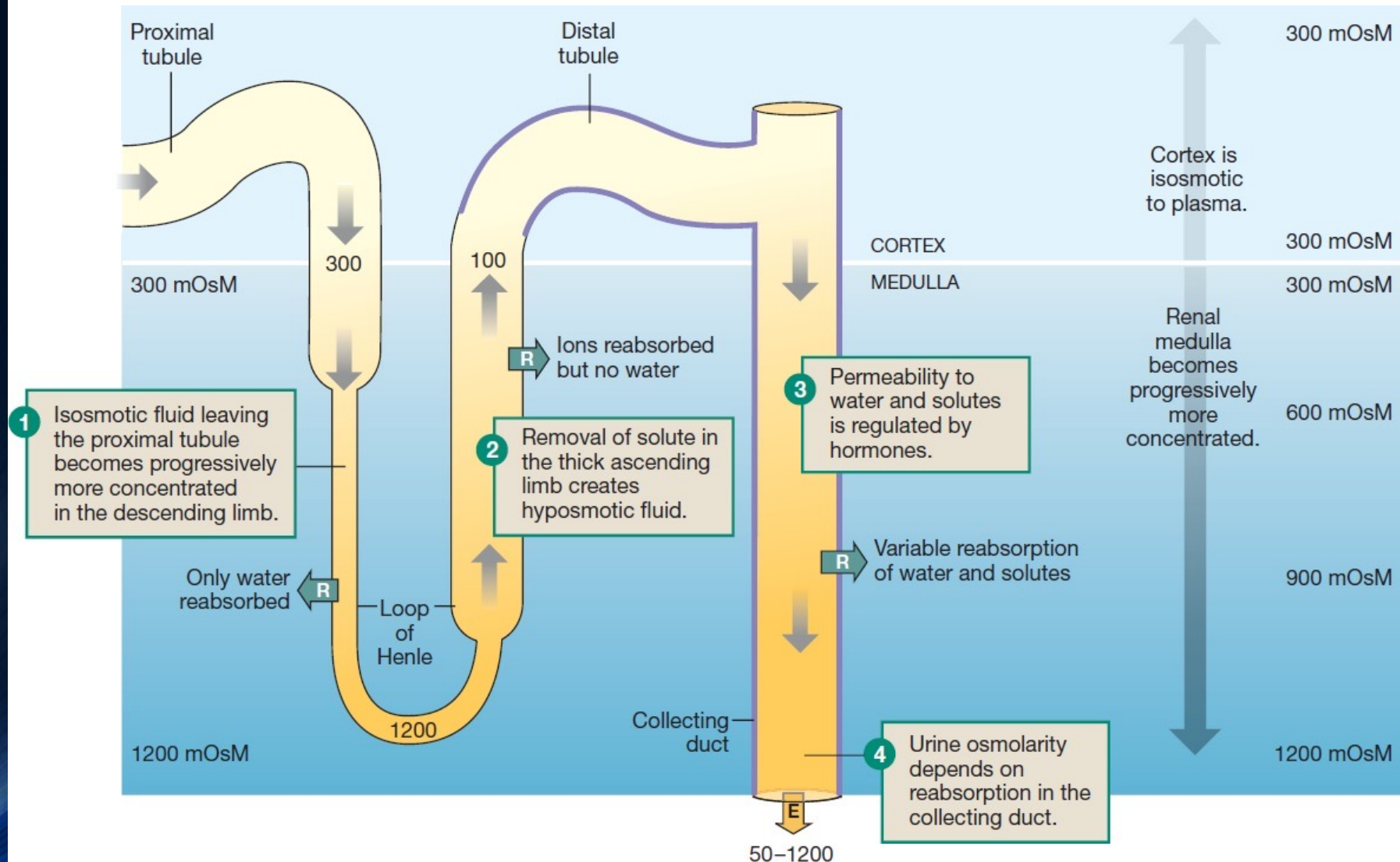
ANH inhibits the actions of aldosterone thus

- Decreased probability of opening of apical Na^+ channels
- Decreased activity of basal Na^+ / K^+ pump



Osmolarity Changes

OSMOLARITY CHANGES THROUGH THE NEPHRON



Renal Physiology

RENAL PHYSIOLOGY 6 SECRETION & EXCRETION

Nephron Key Functions

Filtration

- Glom → BC

Reabsorption

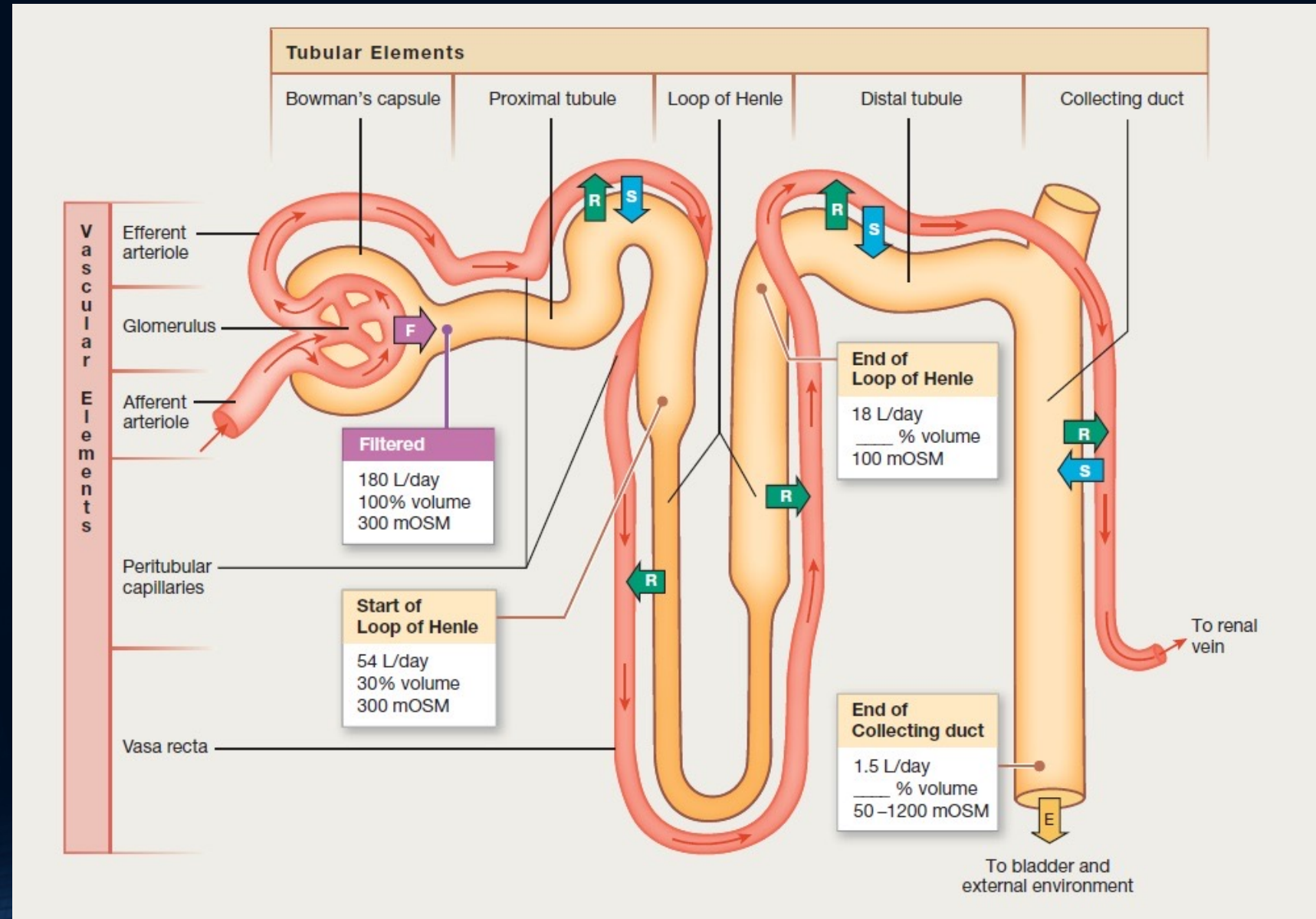
- Tubule → PTC

Secretion

- PTC → Tubule

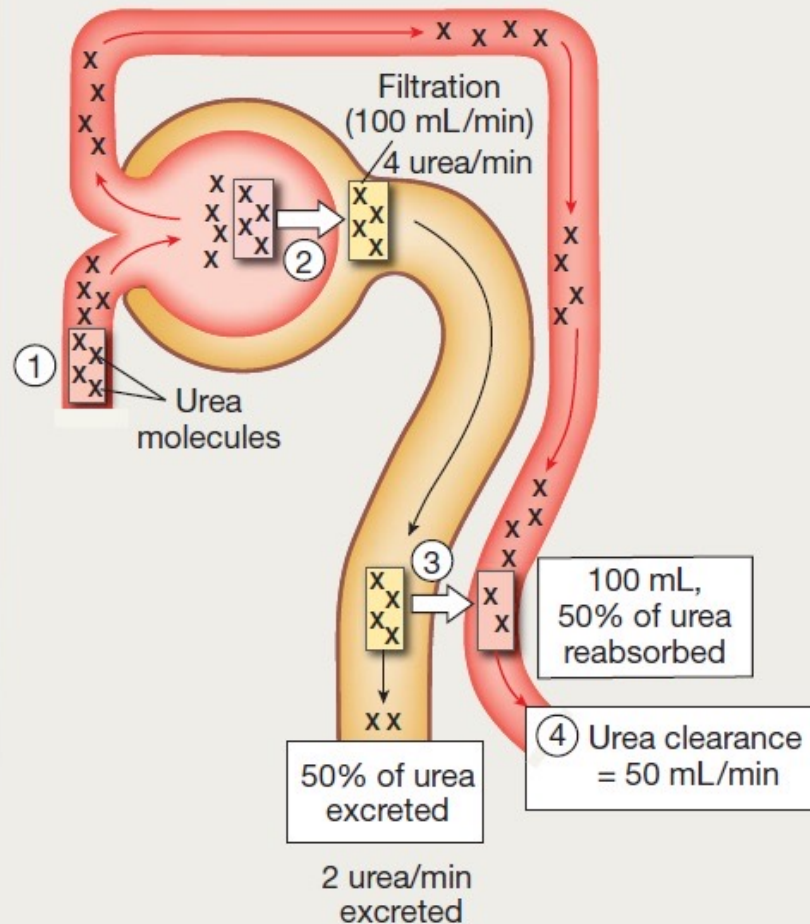
Excretion

- $E = F - R + S$



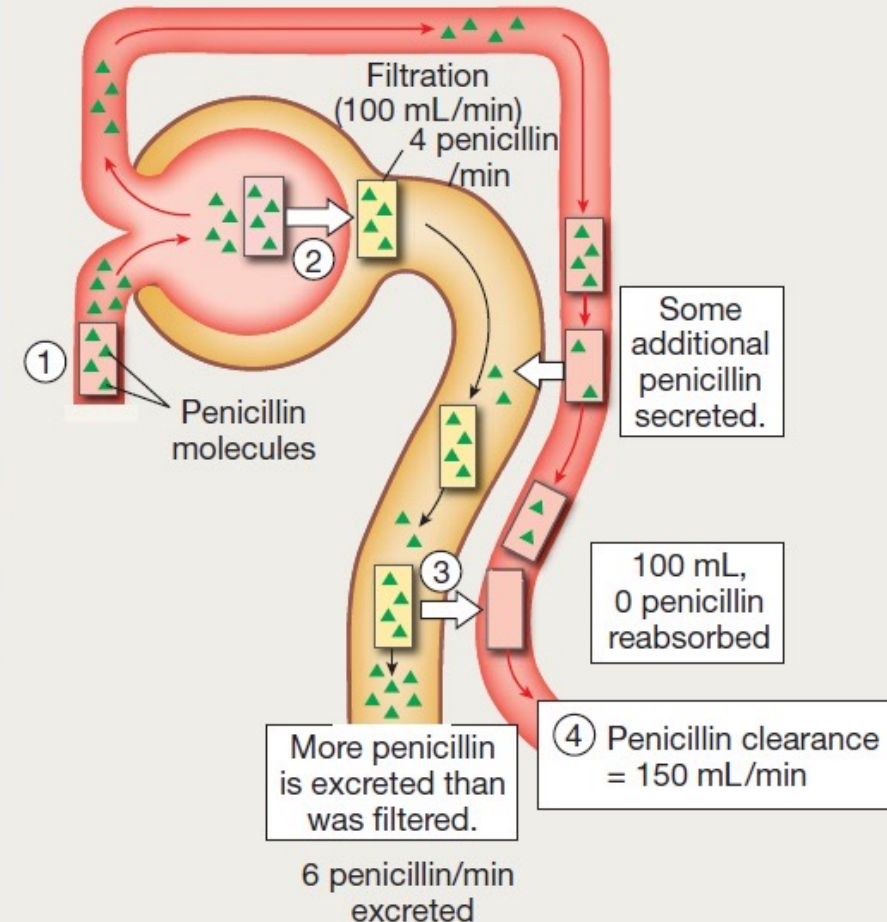
Reabsorption vs Secretion

(c) **Urea clearance** is an example of net reabsorption. If filtration is greater than excretion, there is net reabsorption.



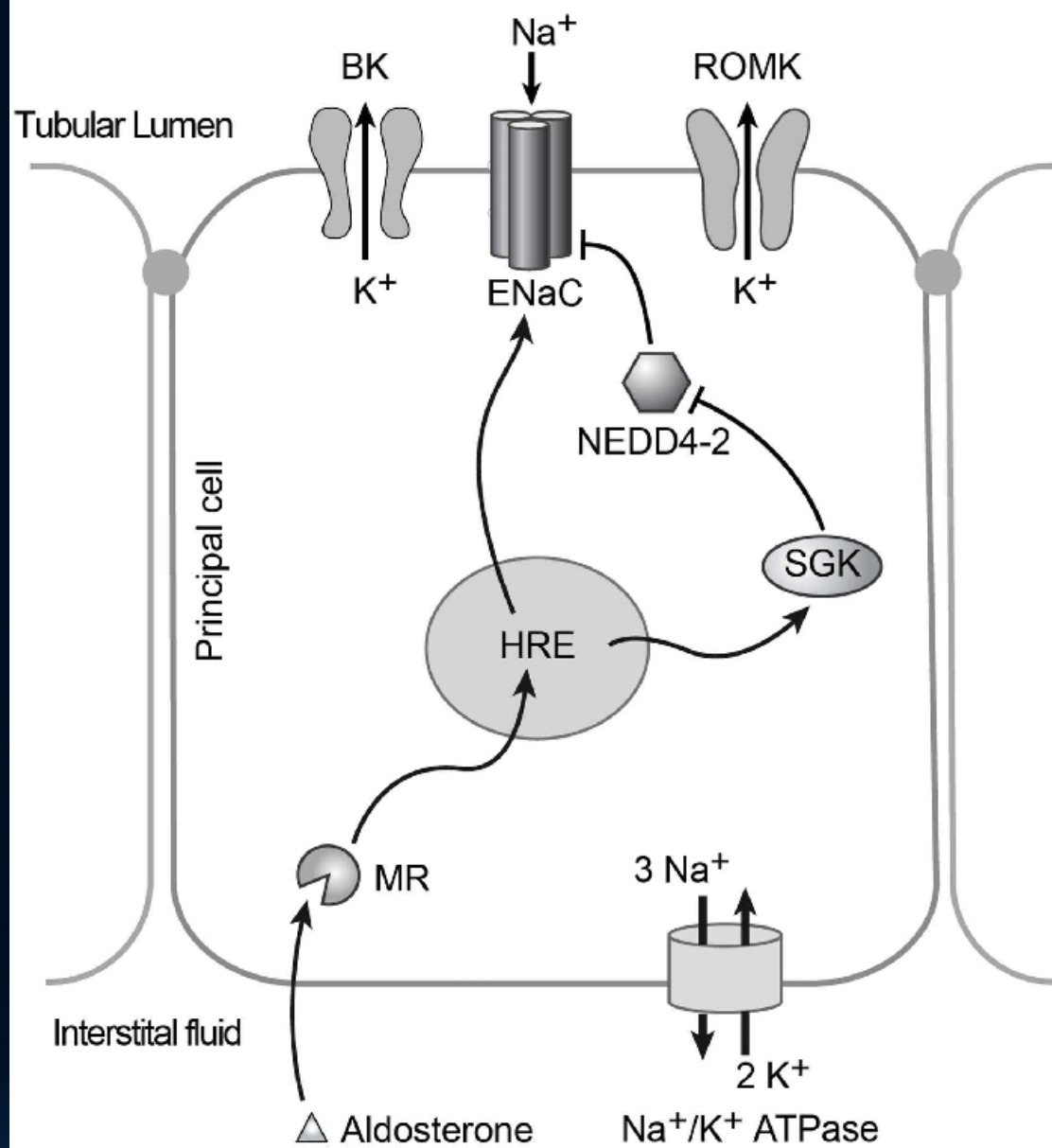
If clearance of a substance is less than GFR, there is net reabsorption.

(d) **Penicillin clearance** is an example of net secretion. If excretion is greater than filtration, there is net secretion.



If clearance of a substance is greater than GFR, there is net secretion.

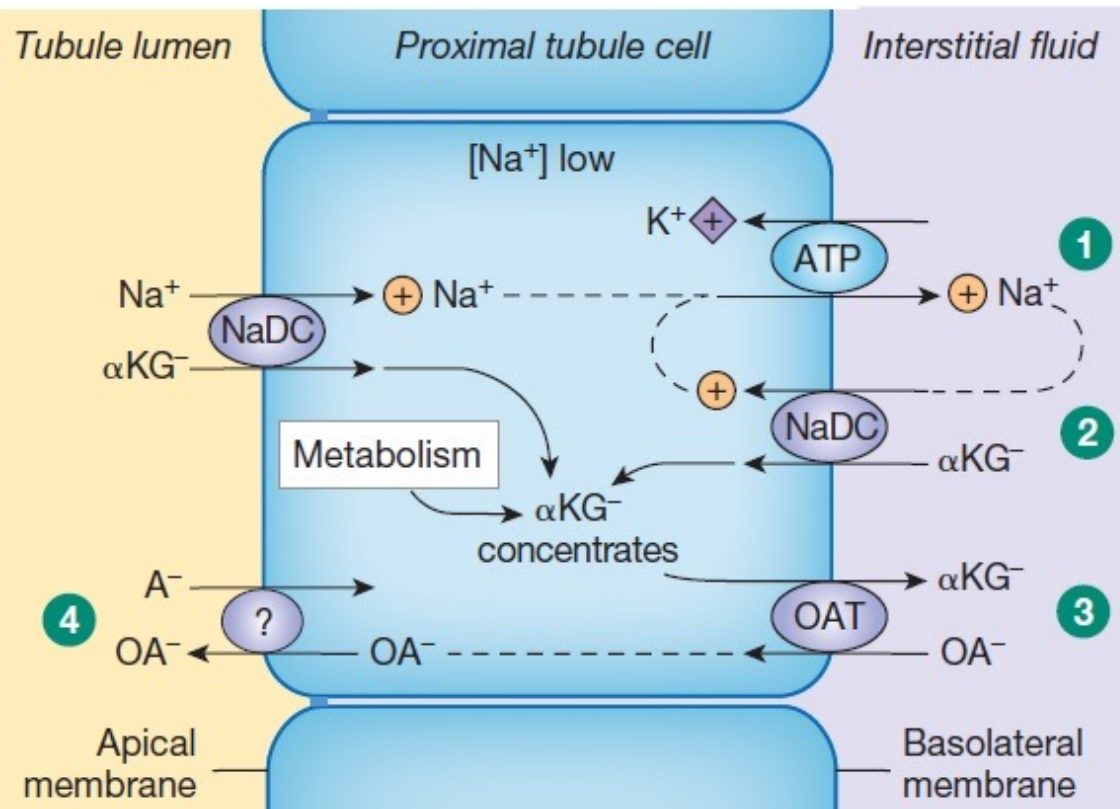
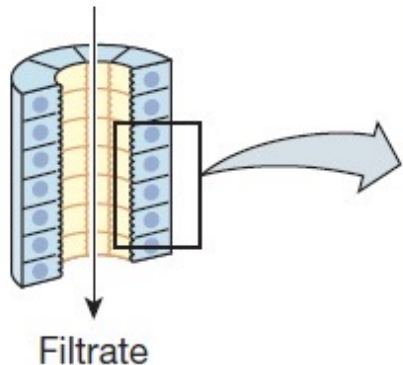
Distal Nephron



Secretion of Organic Anions (many drugs)

ORGANIC ANION SECRETION

Proximal tubule secretion of organic anions by the organic anion transporter (OAT) is an example of tertiary active transport.



1 Direct active transport. The Na⁺-K⁺-ATPase keeps intracellular [Na⁺] low.

2 Secondary indirect active transport. The Na⁺-dicarboxylate cotransporter (NaDC) concentrates a dicarboxylate inside the cell using energy stored in the [Na⁺] gradient.

3 Tertiary indirect active transport. The basolateral organic anion transporter (OAT) concentrates organic anions (OA⁻) inside the cell, using the energy stored in the dicarboxylate gradient.

4 Organic anions enter the lumen by facilitated diffusion.

Nephron Key Functions

Filtration

- Glom → BC

Reabsorption

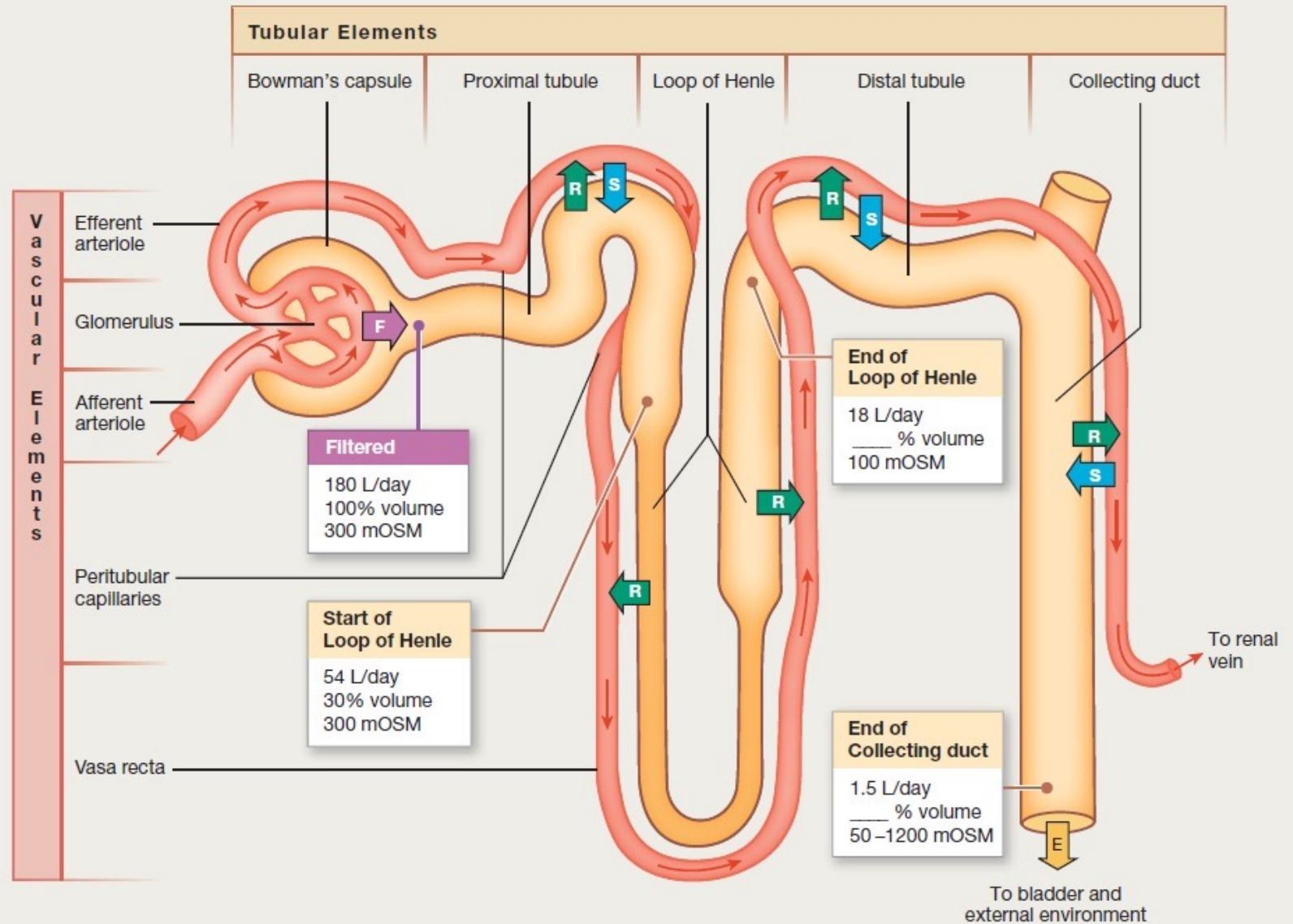
- Tubule → PTC

Secretion

- PTC → Tubule

Excretion

- $E = F - R + S$

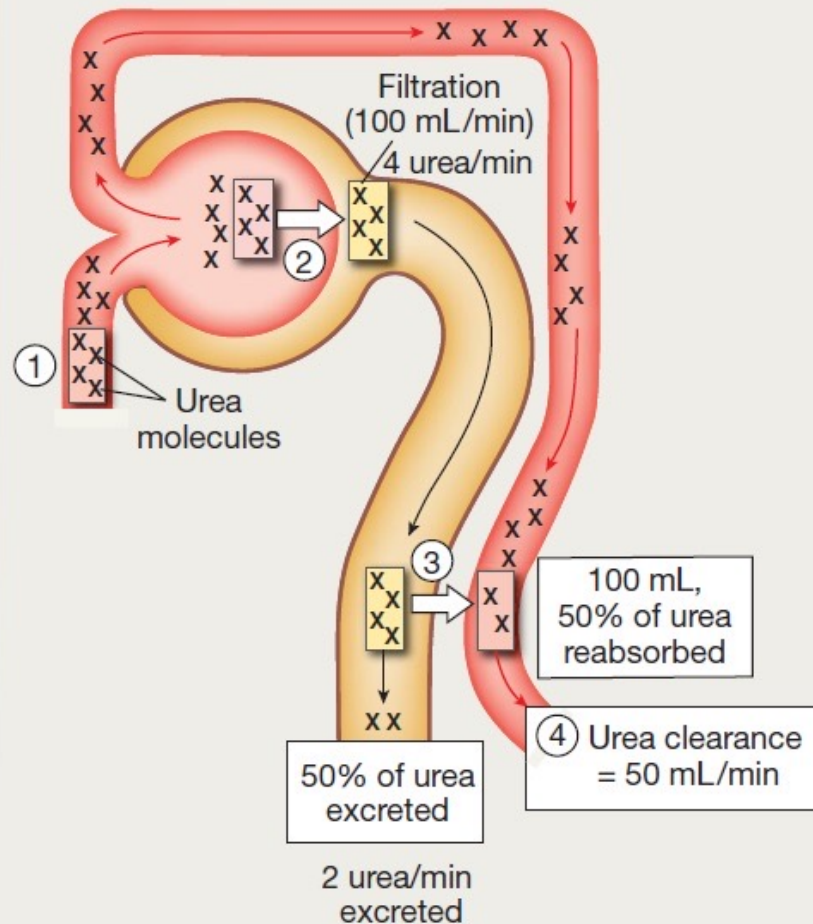


Excretion

- Quantified in two ways
 - Clearance
 - Rate at which a substance is removed from the plasma (mL / min) through excretion and / or metabolism
 - $clearance \text{ (mL/min)} = \frac{\text{excretion rate of A (mg/min)}}{\text{concentration of A in plasma mg/mL}}$
 - Experimentally measured using inulin
 - Freely filtered, not reabsorbed, not secreted
 - Clearance of inulin is used to measure GFR
 - Clinically measured using creatinine
 - Freely filtered, not reabsorbed, slightly secreted
 - Creatinine clearance is estimate of GFR
 - Excretion rate
 - Amount of a substance excreted per min (mg / min)

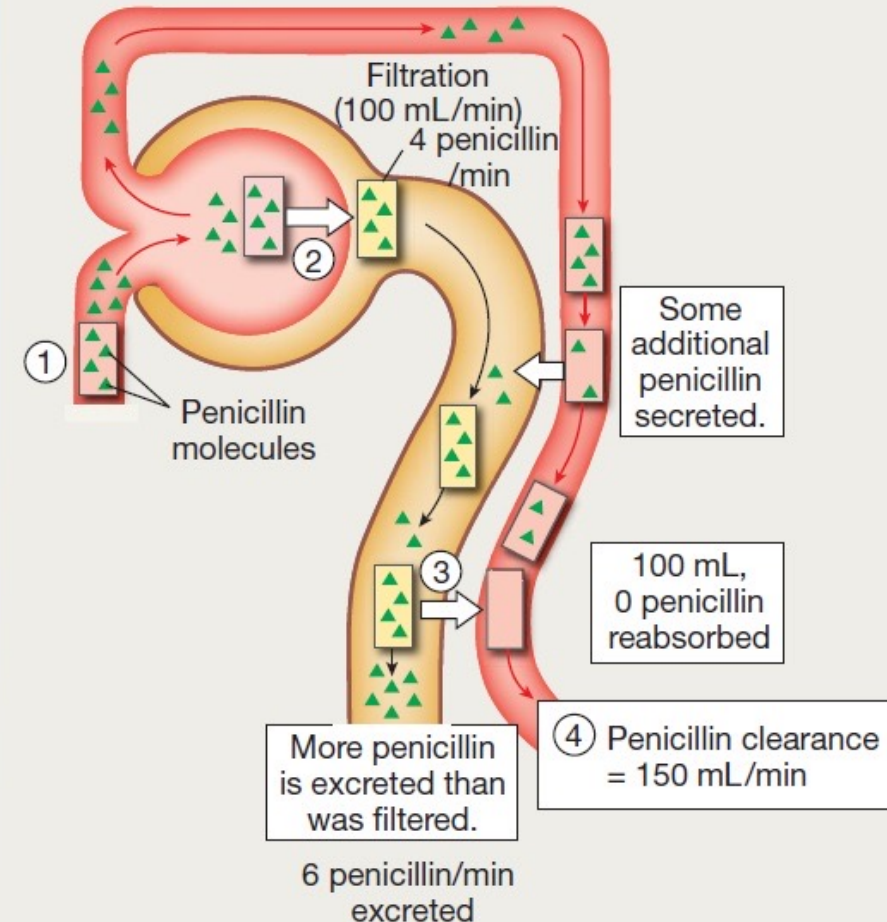
Reabsorption vs Secretion

(c) **Urea clearance** is an example of net reabsorption. If filtration is greater than excretion, there is net reabsorption.



If clearance of a substance is less than GFR, there is net reabsorption.

(d) **Penicillin clearance** is an example of net secretion. If excretion is greater than filtration, there is net secretion.



If clearance of a substance is greater than GFR, there is net secretion.