

Physical laws

The flow rate of a liquid through a pipe is directly proportional to the difference between the pressures at the two ends of the pipe, and inversely prop to the pipe's resistance

-flow only stops when levels are equal and pressure gradient no longer exist

-pressure gradient (ΔP) driving blood flow through the systemic circuit equals the mean arterial pressure (average pressure in the aorta throughout the cardiac cycle)

• resistance = $\frac{8L\eta}{\pi r^4}$ (L =length, η =viscosity of the fluid, r =tube internal radius)

• vasoconstriction anywhere in a network of blood vessels increases resistance $\rightarrow$ vasodilation decreases the resistance

• total peripheral resistance (TPR): combined resistances of all the blood vessels within the circuit

• cardiac output = mean arterial pressure / TPR

Arteries

• conduct blood away from the heart to body's tissue

• act as pressure reservoirs to ensure smooth, continual blood flow $\rightarrow$ possible b/c they have a low compliance

Measuring blood pressure

1) physician increases cuff pressure until it is greater than systolic arterial pressure (max pressure heart exerts while beating) $\rightarrow$ causes the brachial artery to collapse $\rightarrow$ stops blood flow

2) physician opens a valve to slowly let air out of the cuff $\rightarrow$ when cuff pressure drops to slightly below systolic arterial pressure, the artery opens w/ each heartbeat to let blood in $\rightarrow$ creates Korotkoff sounds (audible vibrations)

3) physician notes cuff pressure when Korotkoff sounds appear $\rightarrow$ recorded as systolic arterial pressure

4) when cuff pressure falls below diastolic arterial pressure (pressure in arteries inbetween beats), blood flow returns to smooth pattern + Korotkoff sounds disappear

5) physician notes cuff pressure as the diastolic arterial pressure

→ blood pressure = $\frac{\text{Systolic}}{\text{diastolic}}$, average = $110/70$ mm Hg

→ pulse pressure = $SP - DP$, average = 40 mm Hg

→ MMAP = $\frac{SP + (2 \times DP)}{3}$ average = $\frac{110 + (2 \times 70)}{3} = 83.3$ mm Hg

• not the average of SP and DP b/c in a single cardiac cycle, aortic pressure is close to its minimum pressure for about 2x its at its max

Arterioles

• a passageway for blood to enter capillaries

• provide the greatest resistance to blood flow + resistance can be regulated to control blood flow to individual capillary beds + regulate MMAP

~~Intrinsic Control~~ of blood flow distribution to organs

• individual organs or tissues regulate their own blood flow based on their needs through local control

• organ blood flow = $\Delta P / \text{organ resistance}$

↳ accomplished through relaxation or contraction of smooth muscles in arterioles

→ ~~Responses of vascular smooth muscle in response to...~~

• changes in metabolic activity: causes change in extracellular fluid concentration (oxygen, carbon dioxide, etc.)

- metabolic activity $\uparrow$ causes vasodilation (smooth muscle relaxes + radius of arterioles $\uparrow$, resistance $\downarrow$) and vice versa

- active hyperemia: increase in metabolic activity followed by an increase in blood flow

• changes in blood flow

- if blood flow was blocked, oxygen levels would $\downarrow$ and $CO_2 \uparrow$, this would cause vasodilation + a reduction in vascular resistance → increase blood flow

→ reactive hyperemia: this increase in blood flow in response to a previous reduction in blood flow

• Stretch of arteriolar smooth muscle

- myogenic response: a change in vascular resistance that occurs in response to stretch of blood vessels

• Regulation by locally secreted chemical messengers

- nitric acid: released continually by endothelial cells to act on smooth muscle to promote vasodilation
- prostacyclin: an eicosanoid that causes vasodilation to prevent blood clots

~~Extrinsic Control~~ of arteriole radius and MAP

• Flow rule: $F = \Delta P / R = CO = MAP / TPR \implies MAP = CO \times TPR = SV \times HR \times TPR$

• Sympathetic control: high concentrations of epinephrine promote vasoconstriction, $\uparrow TPR$ and $\uparrow MAP$

• Hormonal Control

- vasopressin (ADH): limits urine output + promotes vasoconstriction + $\uparrow MAP$
- Angiotensin II: protein that promotes vasoconstriction + $\uparrow MAP$ + $\uparrow TPR$

Capillaries + Venules

Capillaries: smallest blood vessels + consist of a single layer of endothelial cells w/ a basement membrane

↳ capillary beds: networks of capillaries that facilitate exchange of substances between blood + tissue

- continuous capillaries: tight junctions make intercellular clefts (spaces between cells) narrow to limit some movement. highly permeable to watersoluble substances

- Fenestrated capillaries: large pores that allow rapid diffusion of small water-soluble substances

- discontinuous capillaries: serve as a transition from fenestrated capillaries to sinusoids (blood filled spaces)

• Local control of blood flow

- shunts: allow blood to flow from arterioles to venules, bypassing capillaries

• microcirculation: arterioles, capillaries + venules $\rightarrow$ can only be seen w/ a microscope