

# Special circulations, Coronary, Pulmonary...



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# Objectives

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- Describe the control of blood flow to different circulations (Skeletal muscles, pulmonary and coronary)
- Point out special hemodynamic characteristic pertinent to each circulation discussed

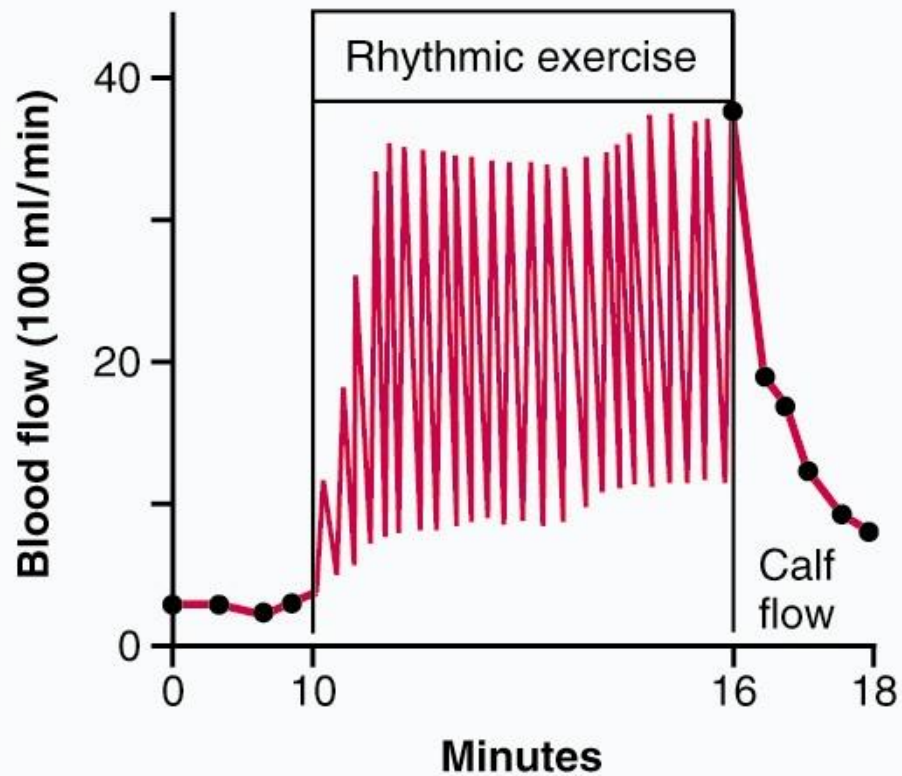
# Blood Flow: Skeletal Muscle Regulation



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- Muscle blood flow can increase tenfold or more during physical activity as vasodilation occurs
  - Low levels of epinephrine bind to  $\beta$  receptors
  - Cholinergic receptors are occupied
- Intense exercise or sympathetic nervous system activation result in high levels of epinephrine
  - High levels of epinephrine bind to  $\alpha$  receptors and cause vasoconstriction
    - This is a protective response to prevent muscle oxygen demands from exceeding cardiac pumping ability

# Exercise and Muscle Blood Flow





## Muscle Blood Flow During Exercise

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- ❖ Can 20 fold during exercise.
- ❖ Muscle makes up a large portion of body mass & has a great effect on Cardiac output.
- ❖ Resting blood flow = 3 to 4 ml/min/100 gm muscle.
- ❖ Oxygen delivery can be increased by increasing the extraction ratio from 25% up to 75%
- ❖ Capillary density is markedly increased.
- ❖ Most blood flow occurs between contractions.

# Local Regulation of Muscle Blood Flow during Exercise



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- $\downarrow$   $O_2$  during exercise affects vascular smooth muscle directly  $\Rightarrow$  vasodilation.
- Vasodilators (which ones?)
  1.  $K^+$
  2. Adenosine
  3. Osmolality
  4. EDRF (nitric oxide)



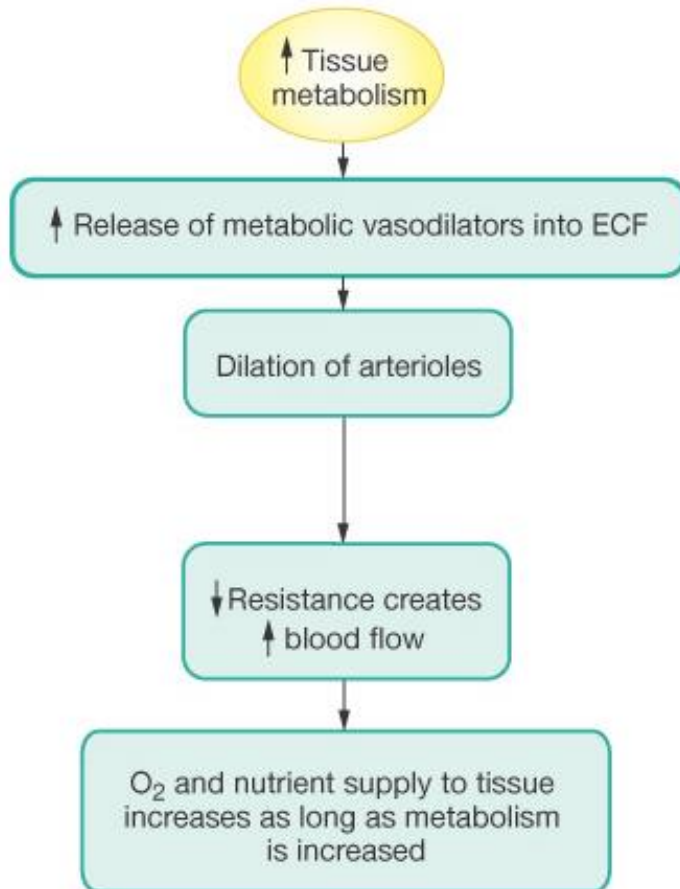
# Nervous Regulation

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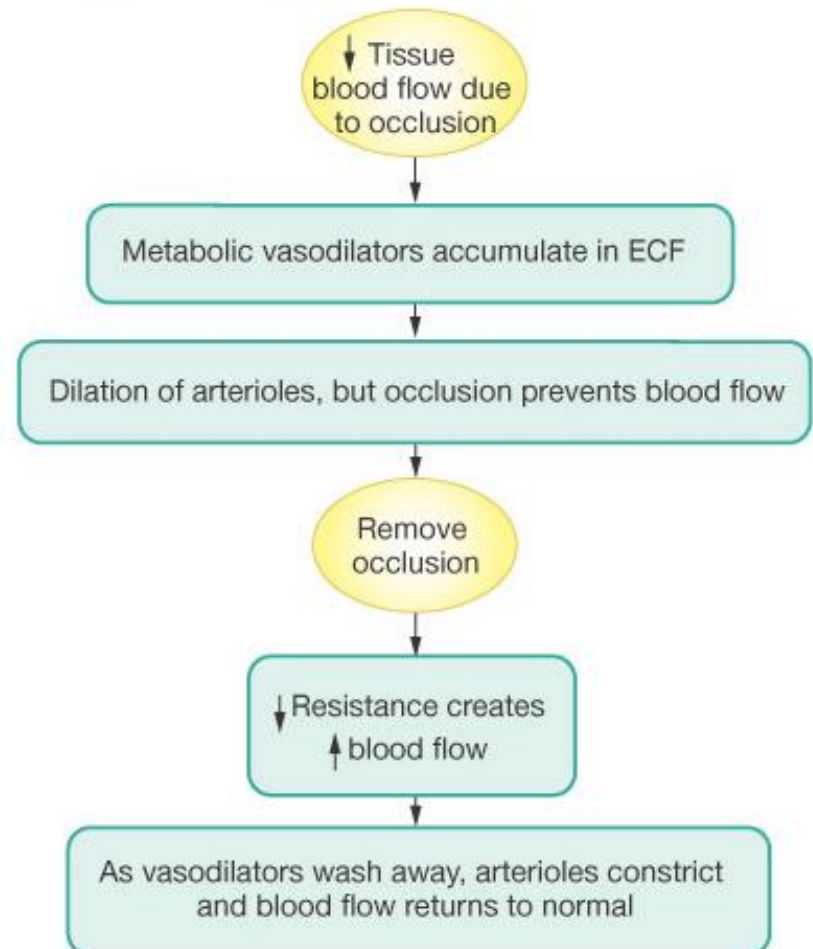
- Sympathetic release of norepinephrine (mainly  $\alpha$ ).
- Adrenals release epinephrine ( $\beta$  and  $\alpha$ ) norepinephrine ( $\alpha$  + a little  $\beta$ ).
- ☞  $\beta$  receptors  $\Rightarrow$  vasodilation mainly in muscle and the liver.
- ☞  $\alpha$  receptors  $\Rightarrow$  vasoconstriction in kidney and gut.

# Arteriole Resistance: Control of Local Blood Flow

(a) Active hyperemia

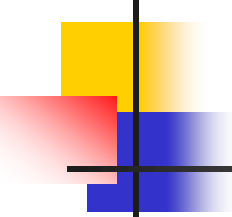


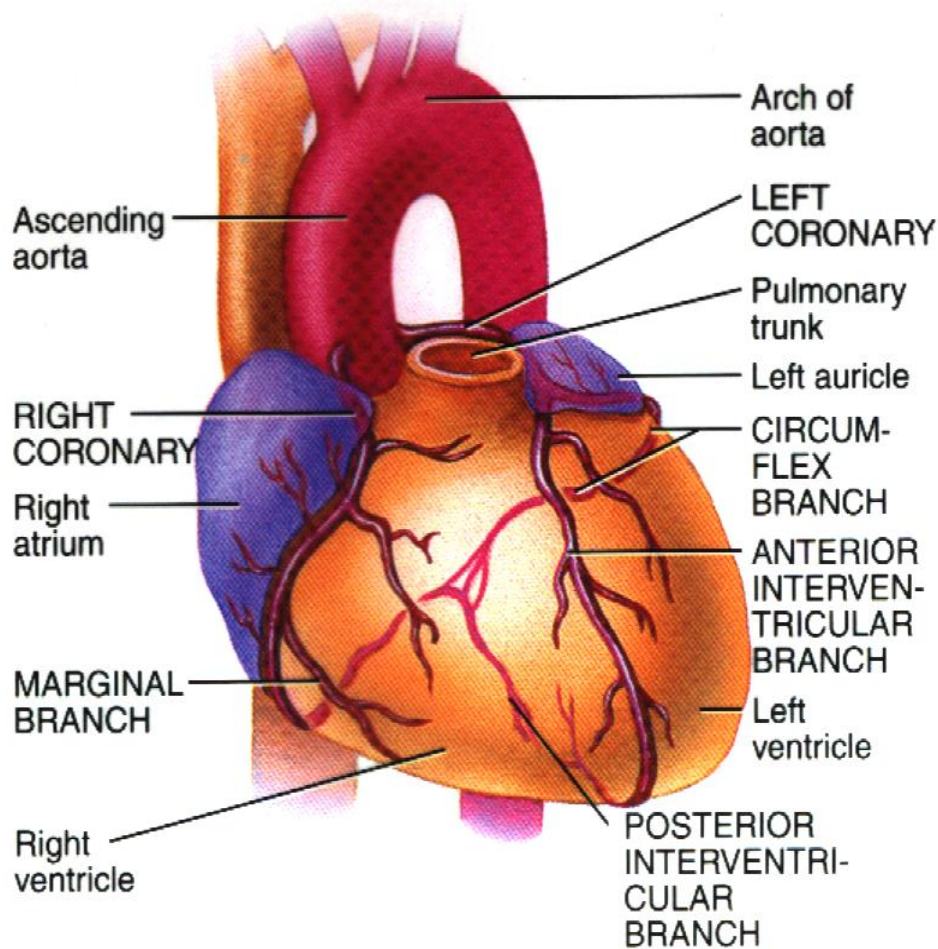
(b) Reactive hyperemia



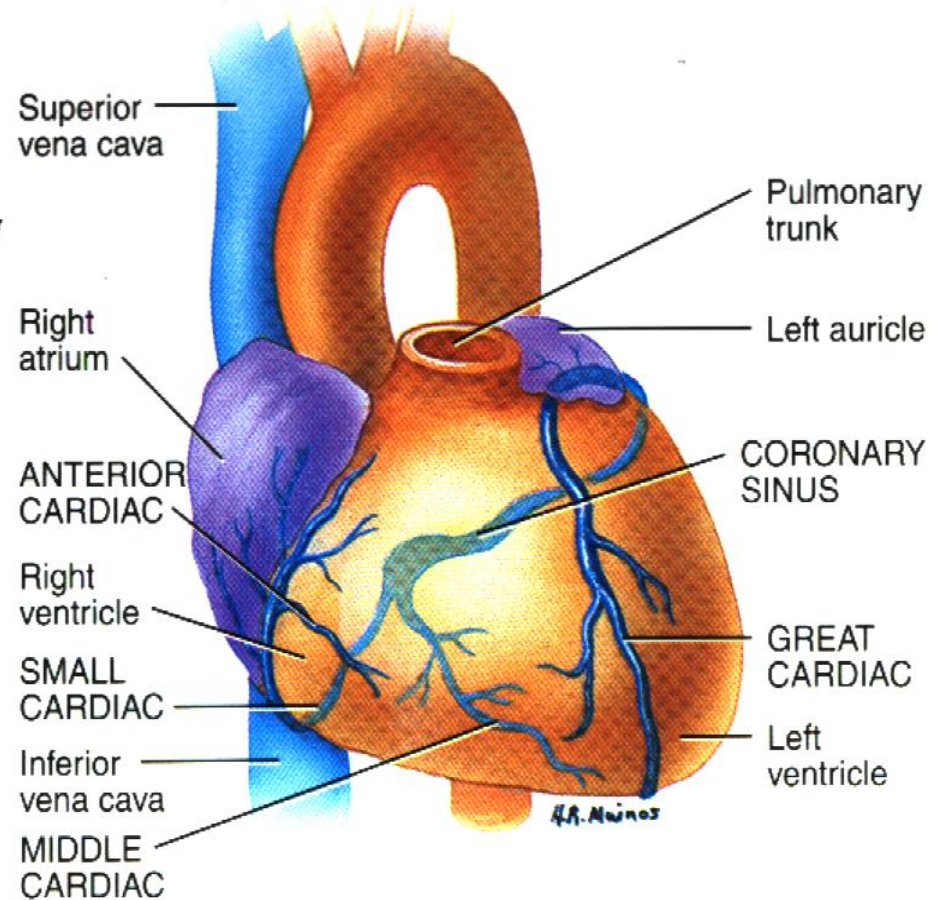


# Blood Flow: Heart

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- Small vessel coronary circulation is influenced by:
    - Aortic pressure
    - The pumping activity of the ventricles
  - During ventricular systole:
    - Coronary vessels compress
    - Myocardial blood flow ceases
    - Stored myoglobin supplies sufficient oxygen
  - During ventricular diastole, oxygen and nutrients are carried to the heart
  - Extraction ratio is maximum (75%) during rest so an increase demand for oxygen means an increase blood flow

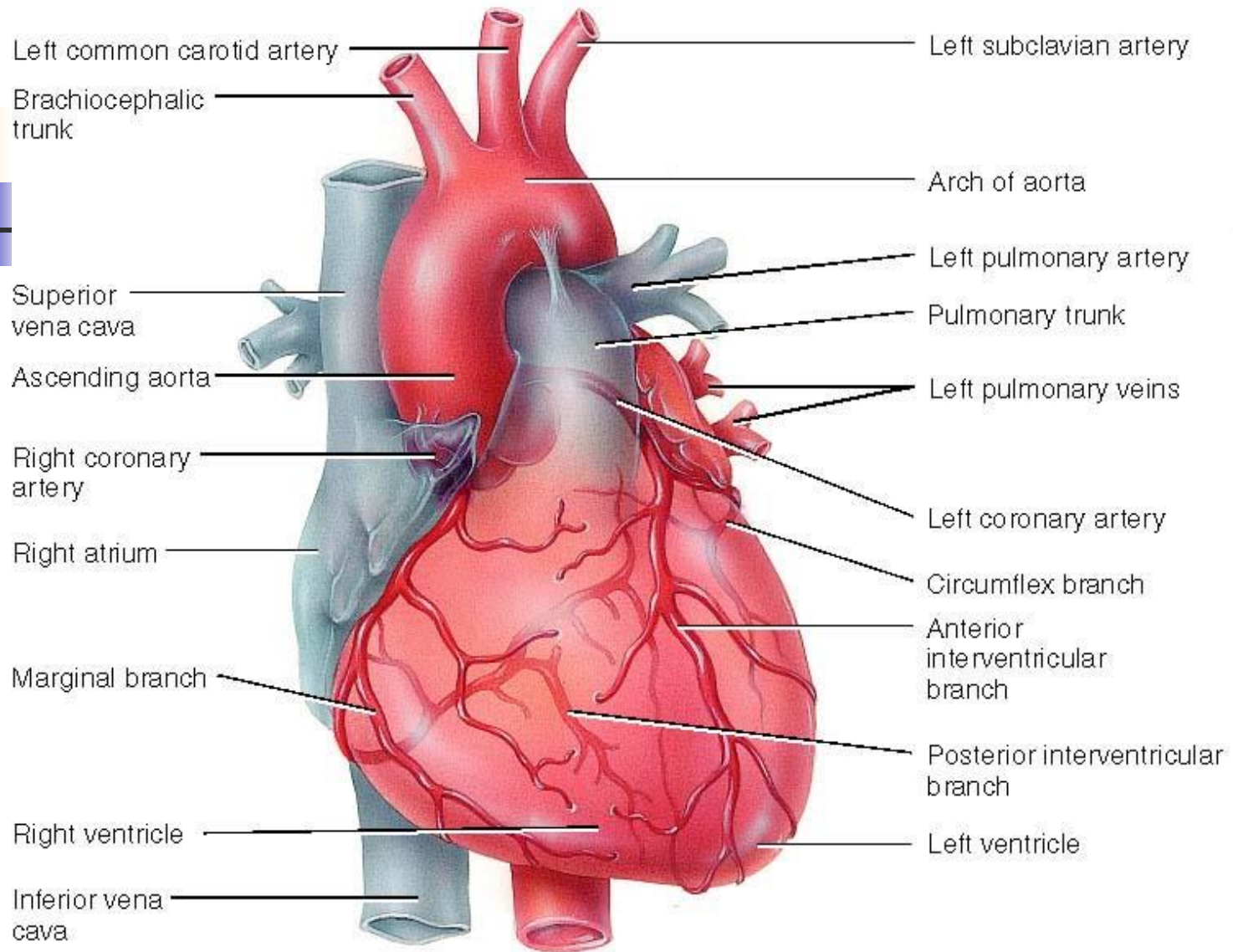
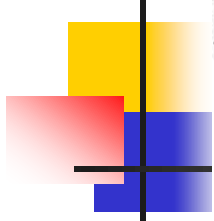


(a) Anterior view of coronary arteries

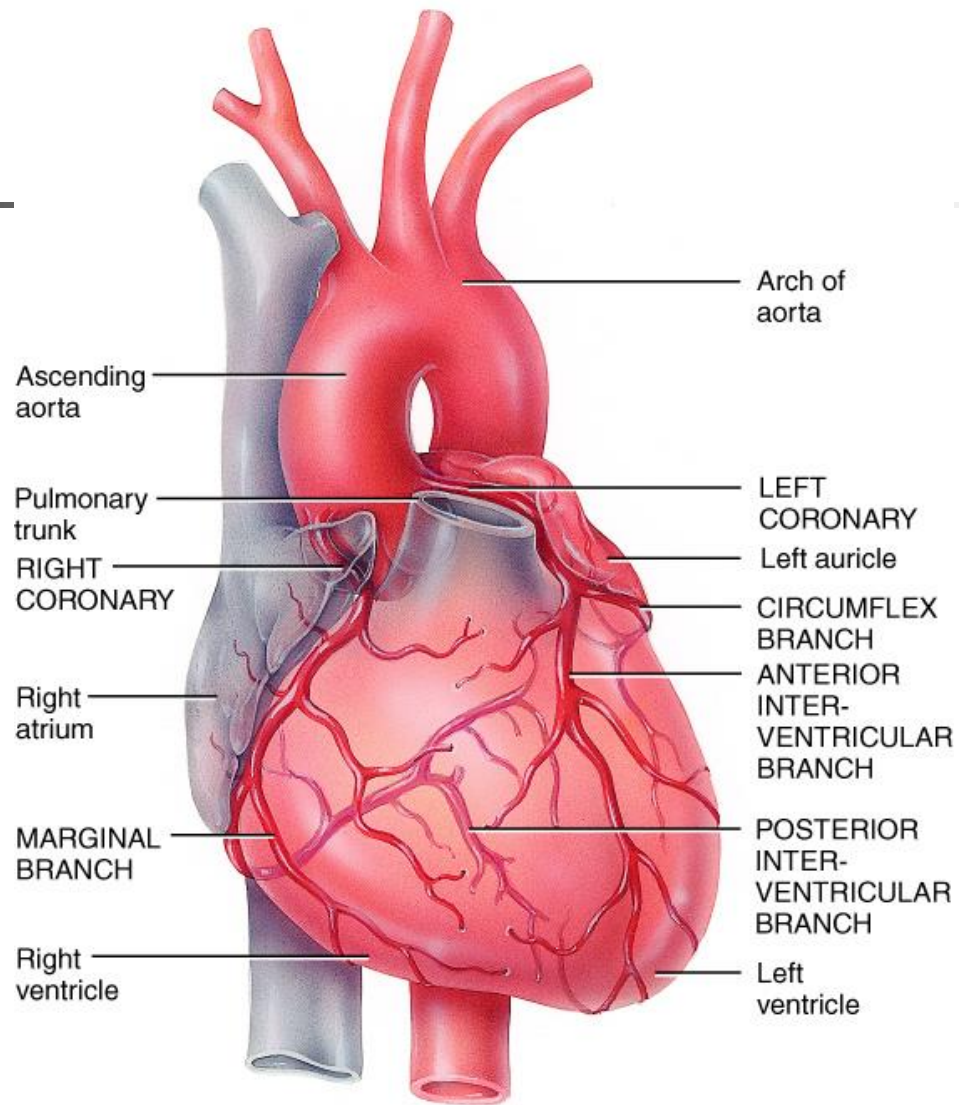
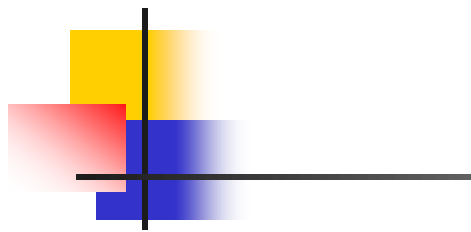


(b) Anterior view of coronary veins

# CORONARY CIRCULATION

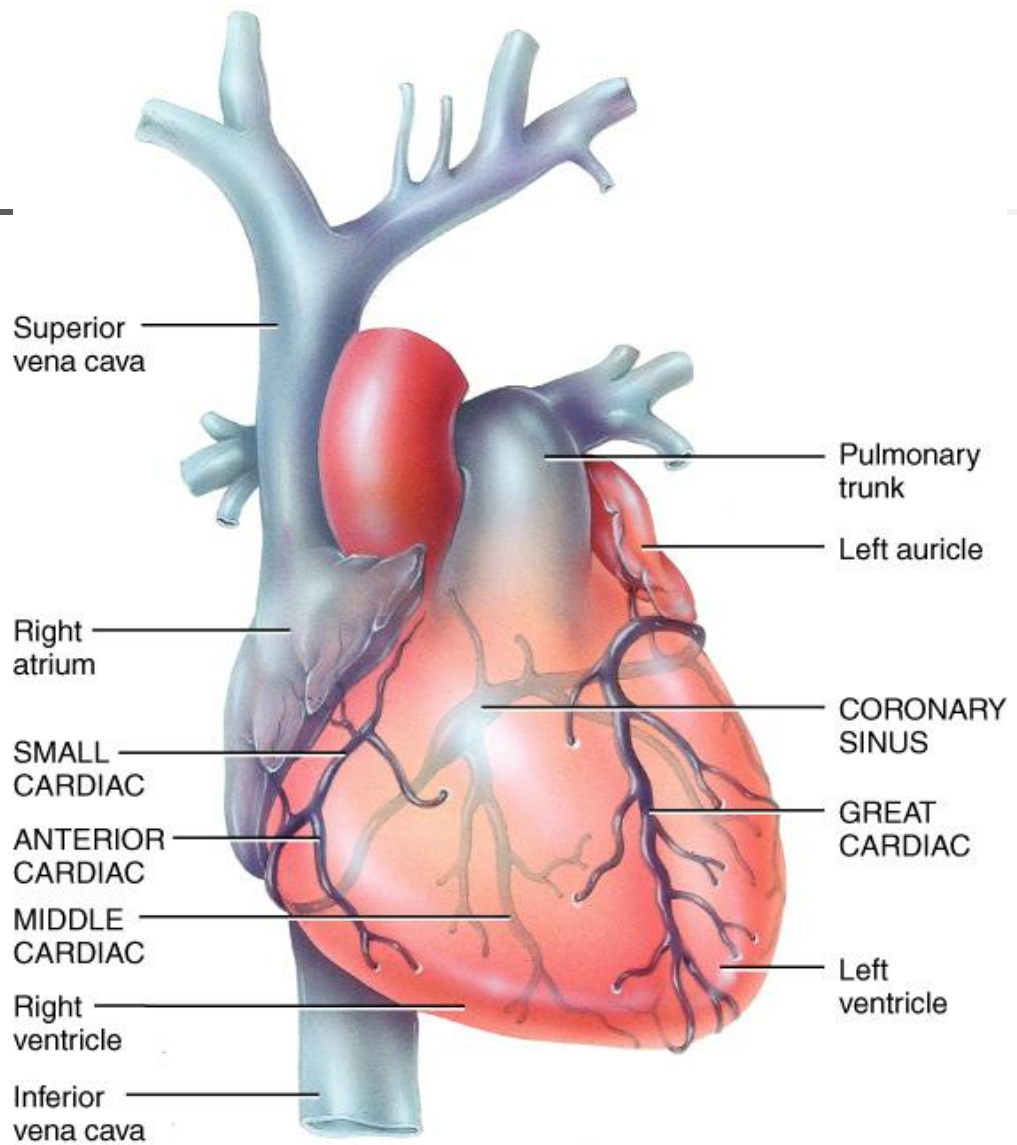
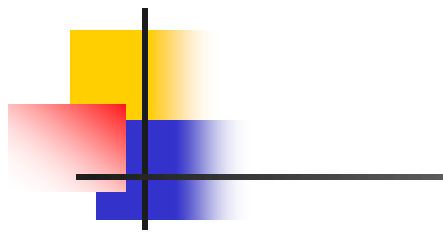






(a) Anterior view of coronary arteries

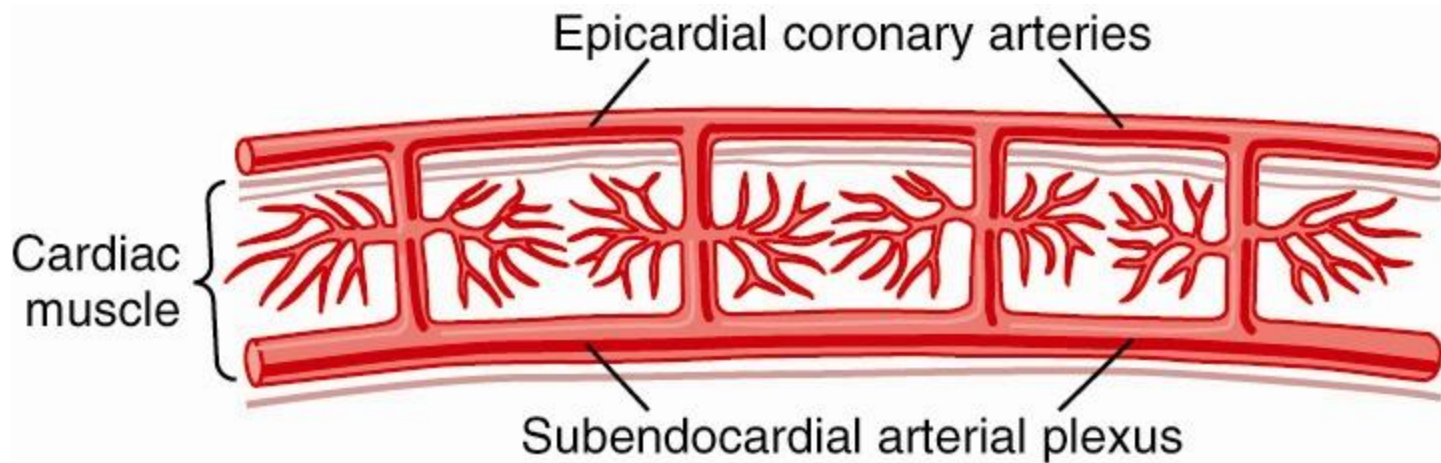
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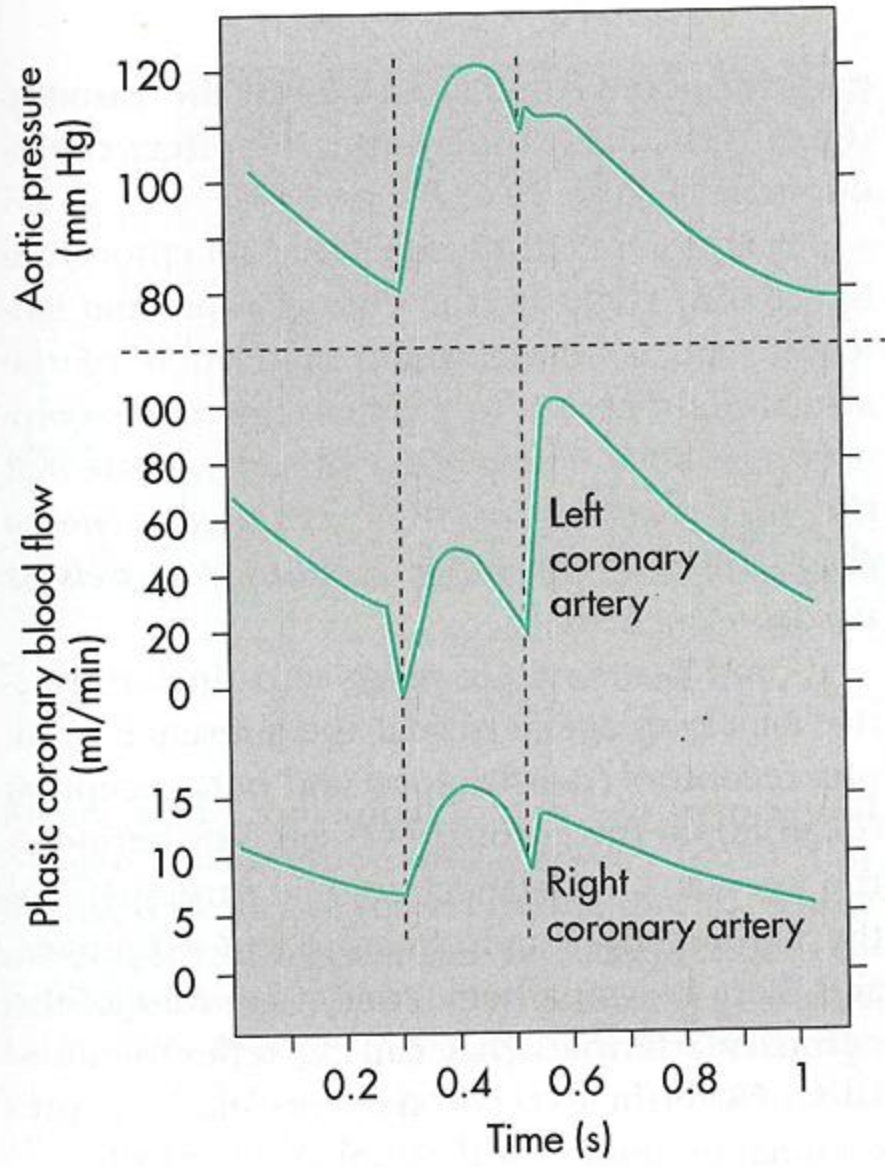


(b) Anterior view of coronary veins

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# Epicardial and Subendocardial Vasculature



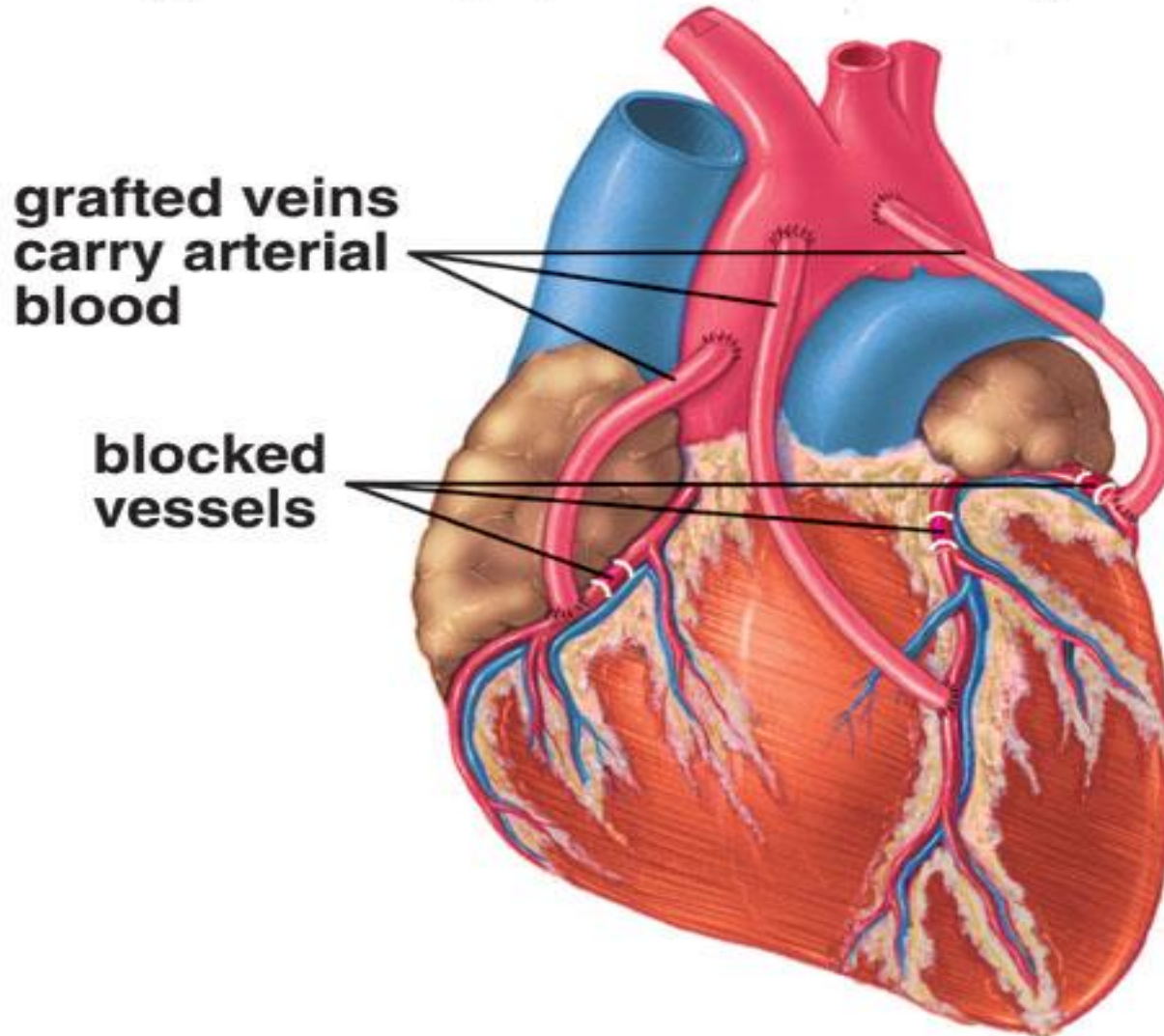


**Figure 10-3** ■ Comparison of phasic coronary blood flow in the left and right coronary arteries.



# Coronary bypass operation

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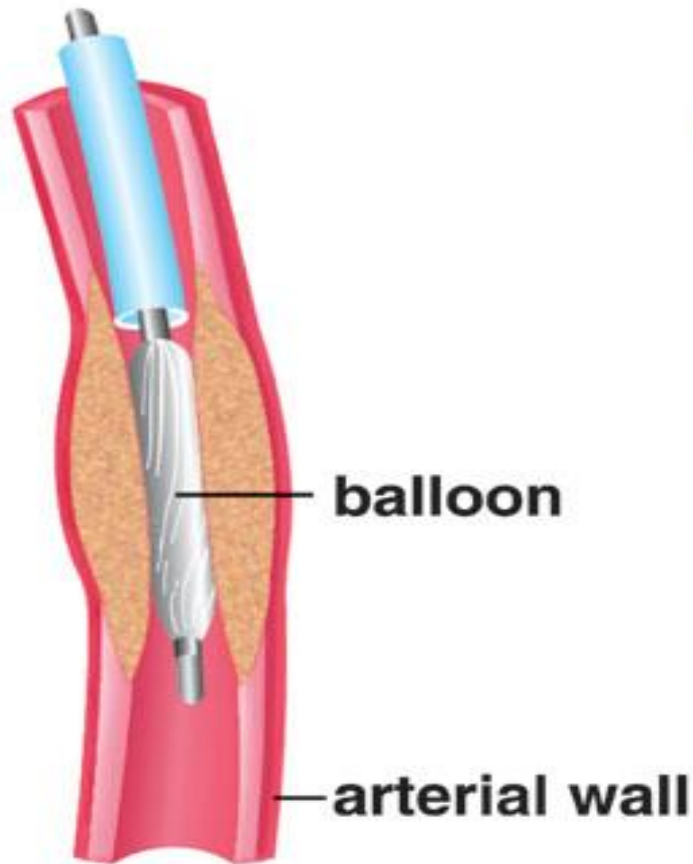


# Angioplasty

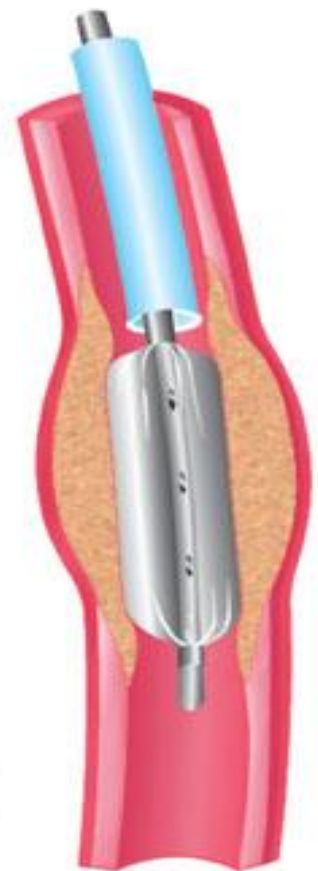
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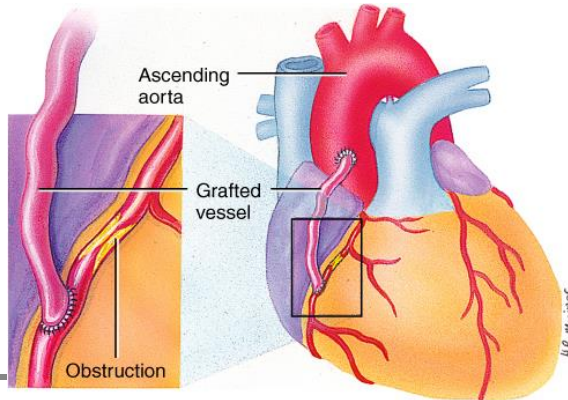
**a. Artery is closed.**



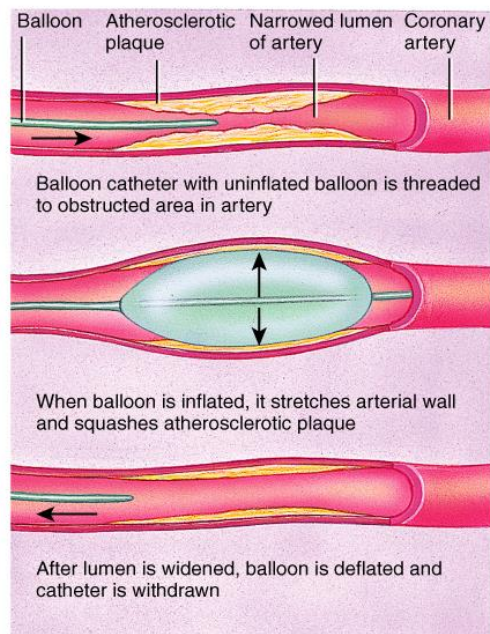
**b. Balloon is released.**



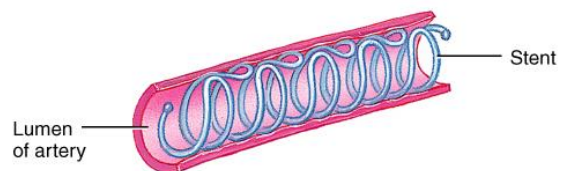
**c. Balloon is inflated.**



(a) Coronary artery bypass grafting (CABG)



(b) Percutaneous transluminal coronary angioplasty (PTCA)



(c) Stent in an artery

# Blood Flow: Brain



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- Blood flow to the brain is constant, as neurons are intolerant of ischemia
- Metabolic controls – brain tissue is extremely sensitive to declines in pH, and increased carbon dioxide causes marked vasodilation
- Myogenic controls protect the brain from damaging changes in blood pressure
  - Decreases in MAP cause cerebral vessels to dilate to insure adequate perfusion
  - Increases in MAP cause cerebral vessels to constrict

# Blood Flow: Brain



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- The brain can regulate its own blood flow in certain circumstances, such as ischemia caused by a tumor
- The brain is vulnerable under extreme systemic pressure changes
  - MAP below 60mm Hg can cause syncope (fainting)
  - MAP above 160 can result in cerebral edema

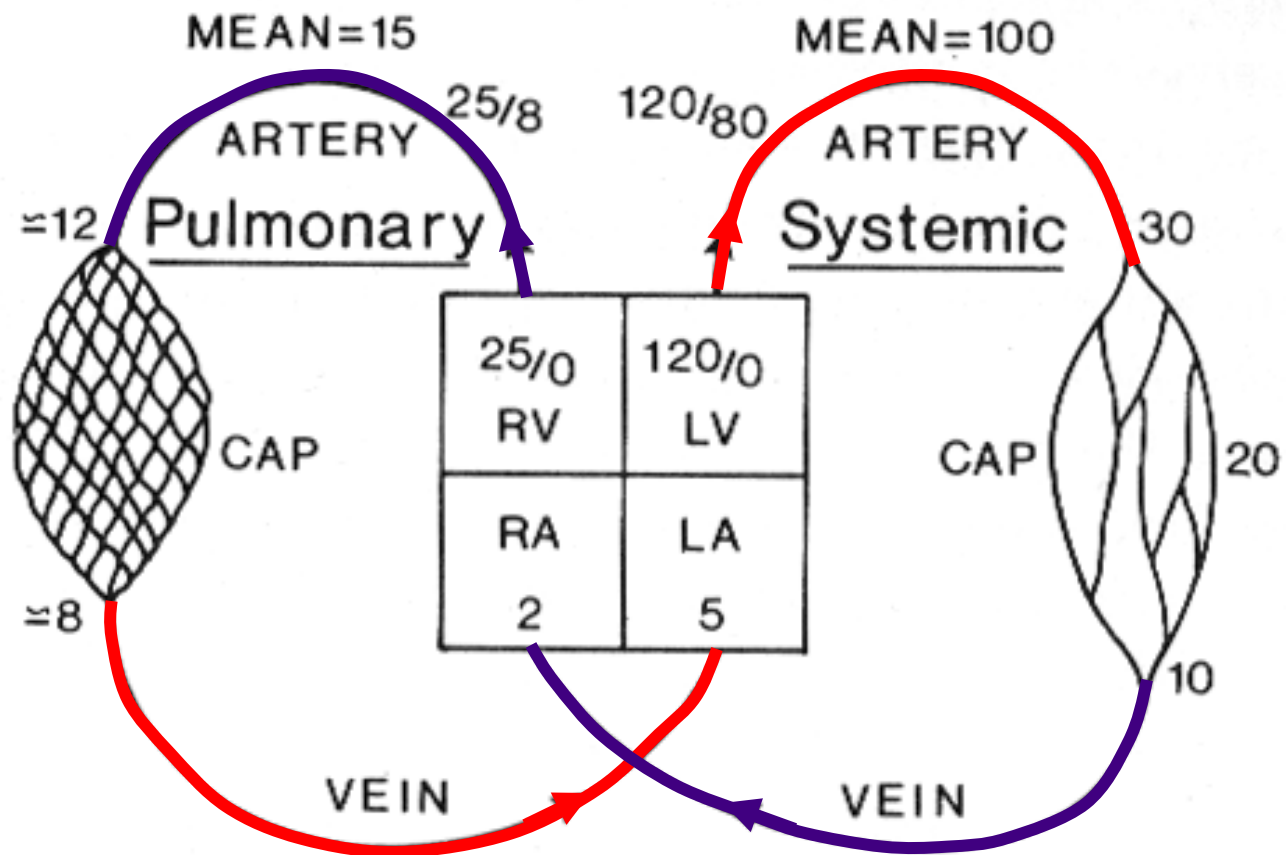
# Blood Flow: Skin



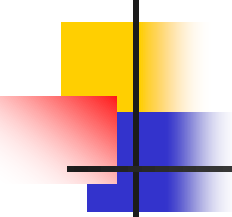
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- Blood flow through the skin:
  - Supplies nutrients to cells in response to oxygen need
  - Aids in body temperature regulation and provides a blood reservoir
- Blood flow to venous plexuses below the skin surface:
  - Varies from 50 ml/min to 2500 ml/min, depending upon body temperature
  - Is controlled by sympathetic nervous system reflexes initiated by temperature receptors and the central nervous system

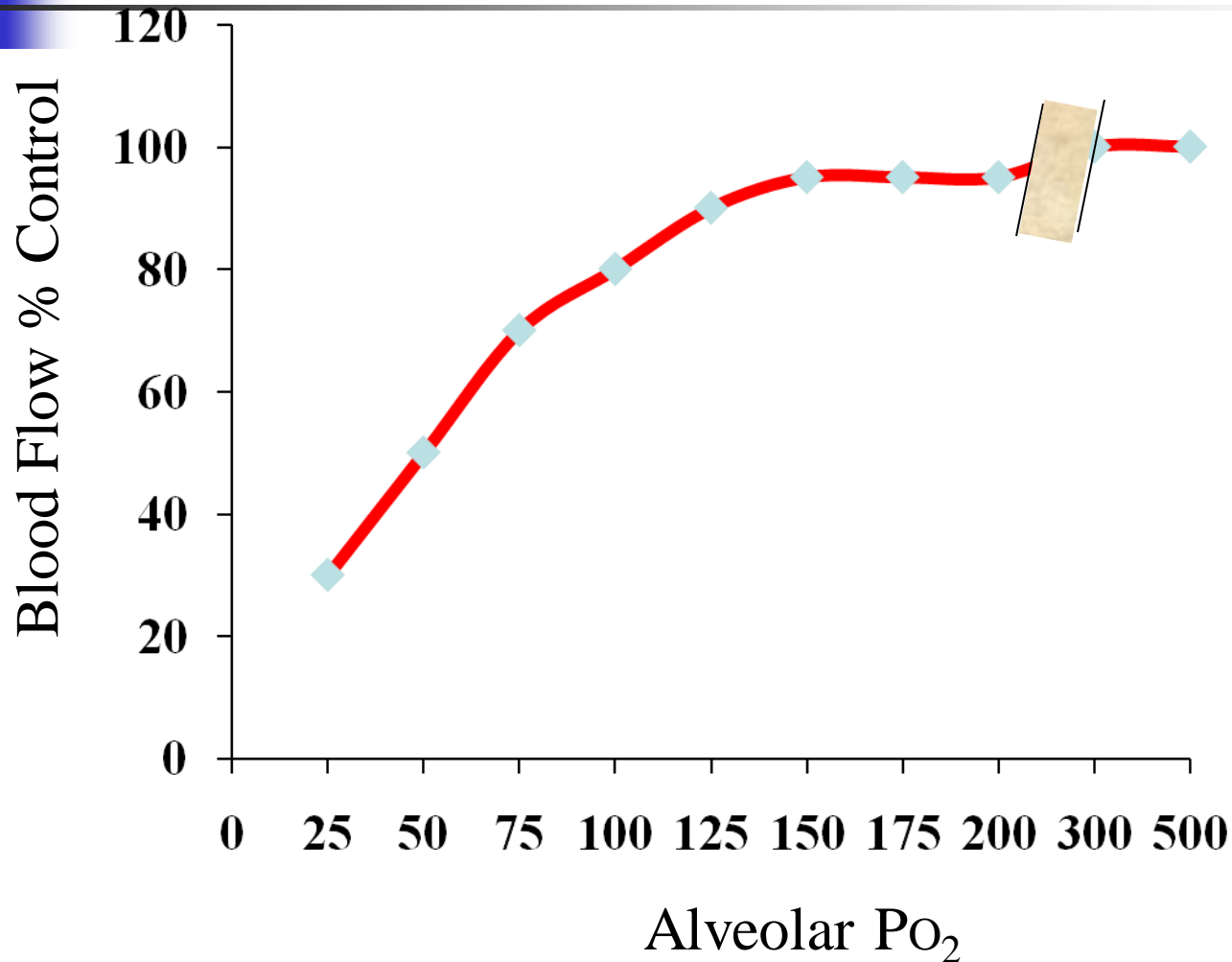
# Characteristics of the Pulmonary Circulation



# Blood Flow: Lungs

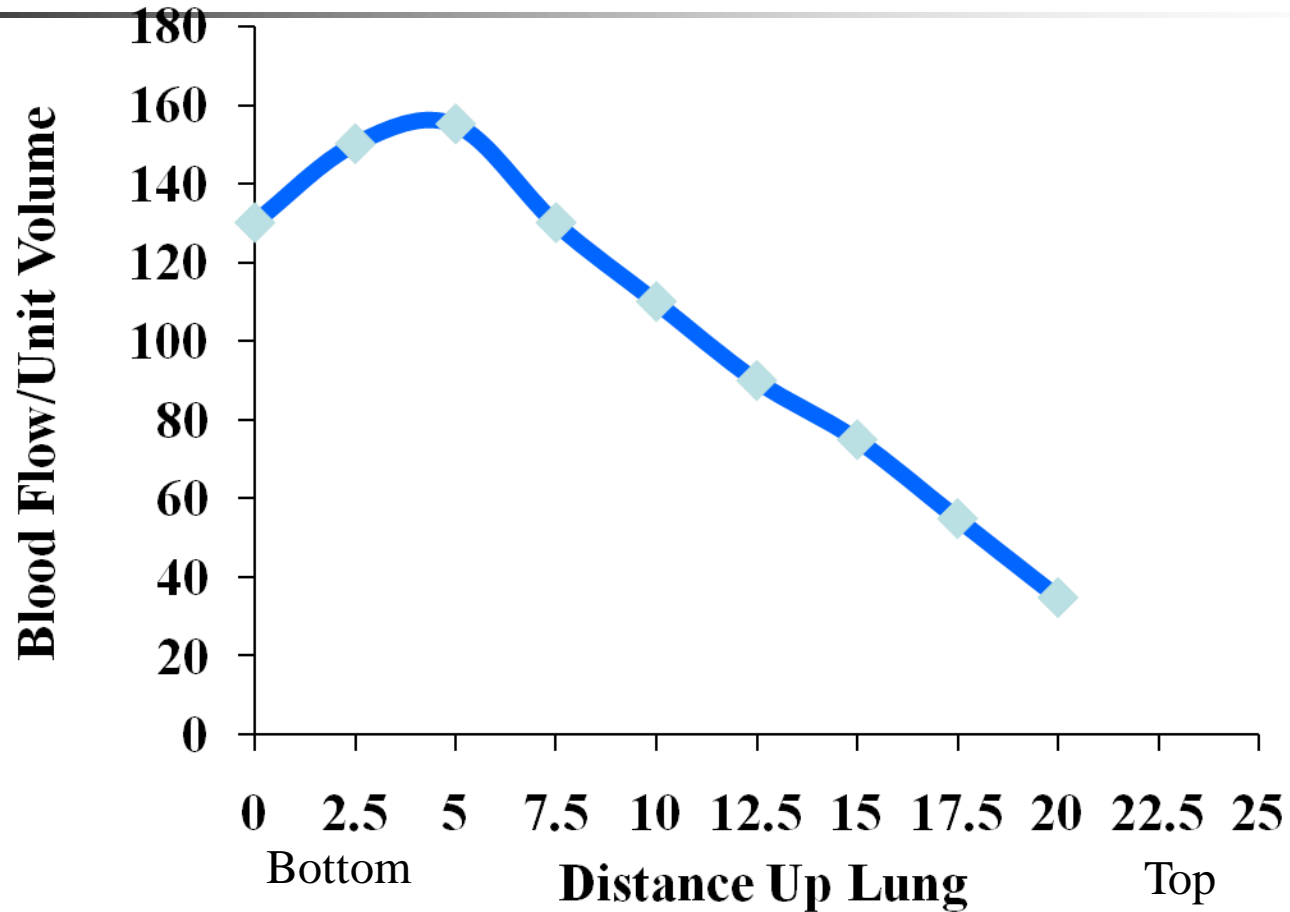
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- Blood flow in the pulmonary circulation is unusual in that:
    - The pathway is short
    - Arteries/arterioles are more like veins/venules (thin-walled, with large lumens)
      - They have a much lower arterial pressure (24/8 mm Hg versus 120/80 mm Hg)
    - The autoregulatory mechanism is exactly opposite of that in most tissues
      - Low oxygen levels cause vasoconstriction; high levels promote vasodilation
      - This allows for proper oxygen loading in the lungs

# Effect of $P_{O_2}$ on Blood Flow



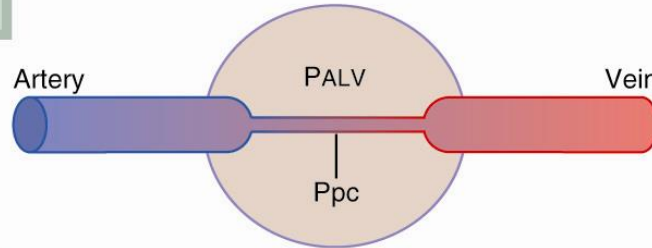


# Distribution of Blood Flow

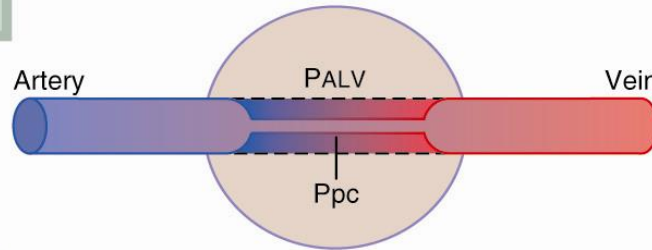


# Hydrostatic Effects on Blood Flow

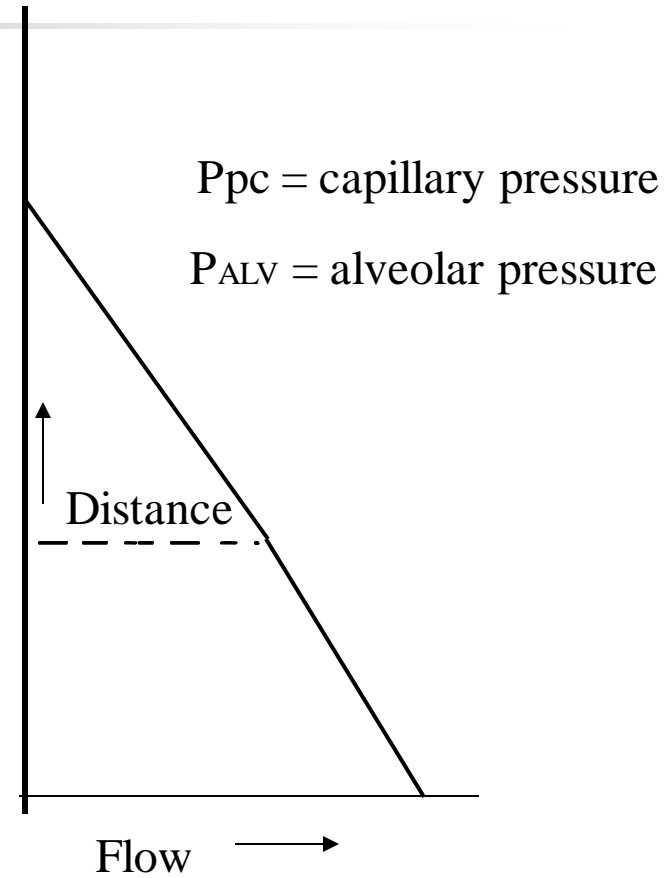
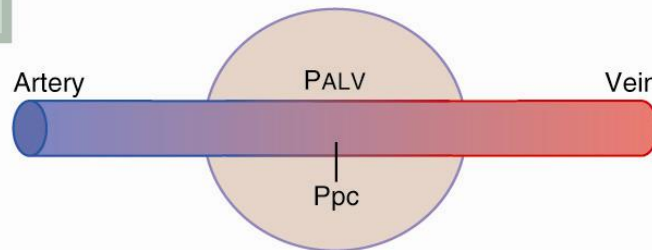
ZONE 1



ZONE 2



ZONE 3



# Thank You

