



Editing file



# Homeostasis(I)

Color index:

- Main Text
- **IMPORTANT**
- *Girls' slides only*
- *Boys' slides only*
- Extra Info
- Drs Notes



# Objectives

- Understand the concept and importance of Homeostasis
- Understand how the steady state is monitored
- Discuss the physiological control mechanisms that enable maintenance of the normal steady state of the body
- Identify and describe the compensatory responses to any change in the steady state
- Define a feedback mechanism and describe its components
- Differentiate between positive and negative feedback mechanisms and give examples for each in the body





# Homeostasis

- Homeostasis: the ability to maintain a **relatively stable internal environment** (Extracellular fluid) in an ever-changing outside world
- The internal environment of the body (ECF) is in a **dynamic state of equilibrium**
- All different body systems operate in **harmony** to provide homeostasis
- The variable produces a change in the body.

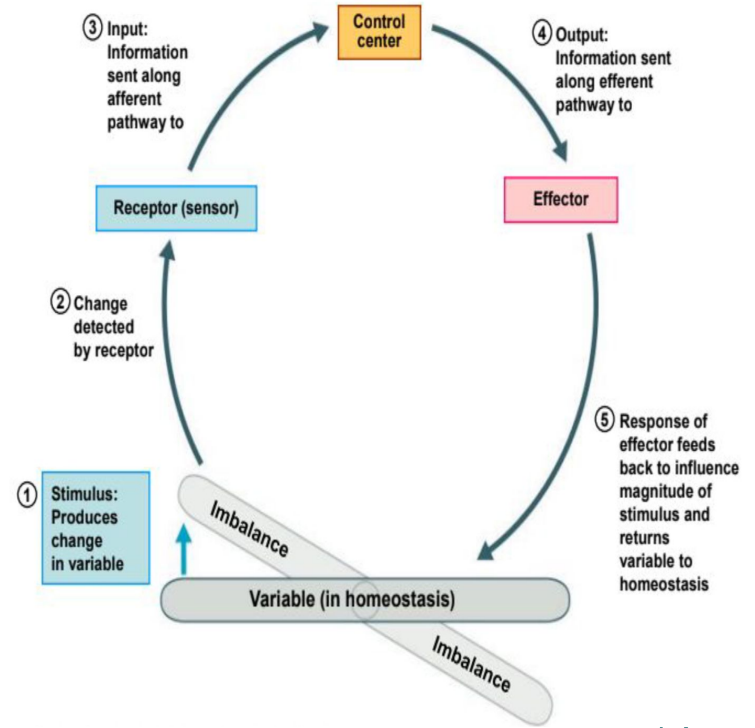
# Homeostatic control mechanisms:

## The Components of control mechanisms

1- **Receptor**: monitors the environment and responds to changes (stimuli)

3- **Effector**: provides the means to respond to the stimulus

2- **Control center**: determines the set point at which the variable is maintained



# Regulation of body functions:

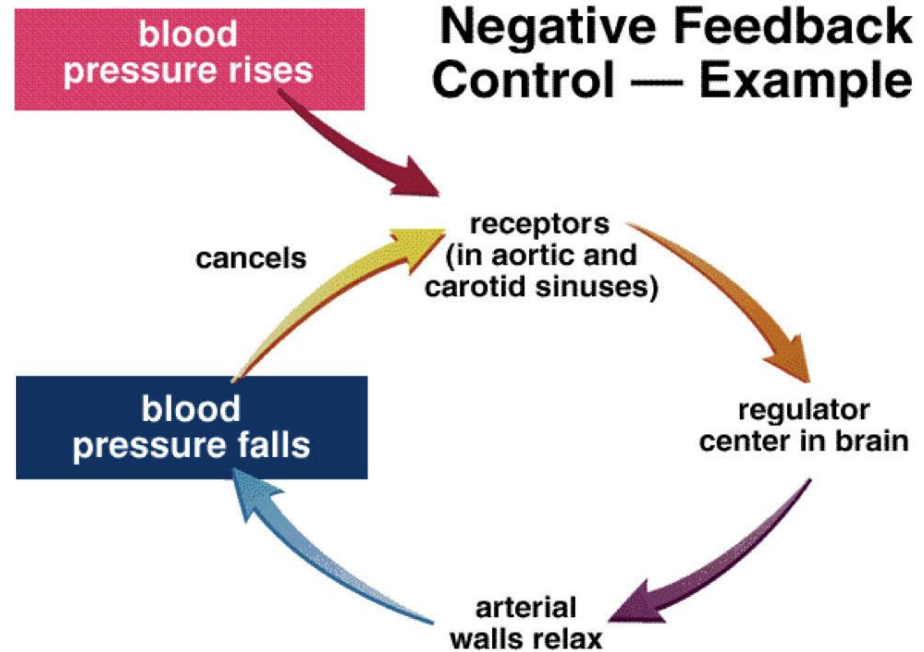
## 1 - Nervous system :

- Sensory input
- Central nervous system
- Motor output

## 2 - Hormonal system of regulation :

- Endocrine gland
- Pancreas, thyroid  
E.g: insulin control glucose level

Note : Nervous system is faster than hormonal system

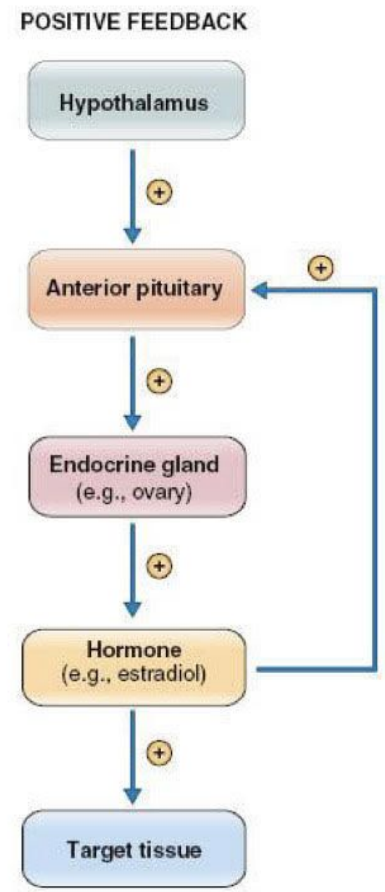
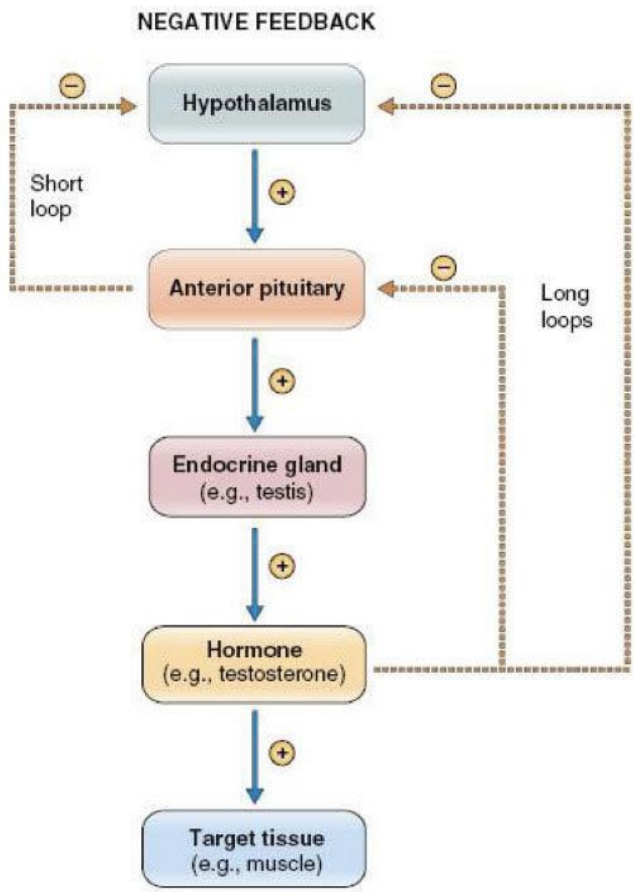


# Feedback mechanisms :



Type	Positive	Negative
Definition	-increases the effect (secretion)	-oppose the effect (secretion) and maintain it
Example	Controls oxytocin secretion (increase it)	-controls Blood pressure & blood glucose & water drink
Note	-only few systems work with positive feedback	-Most systems work with negative feedback





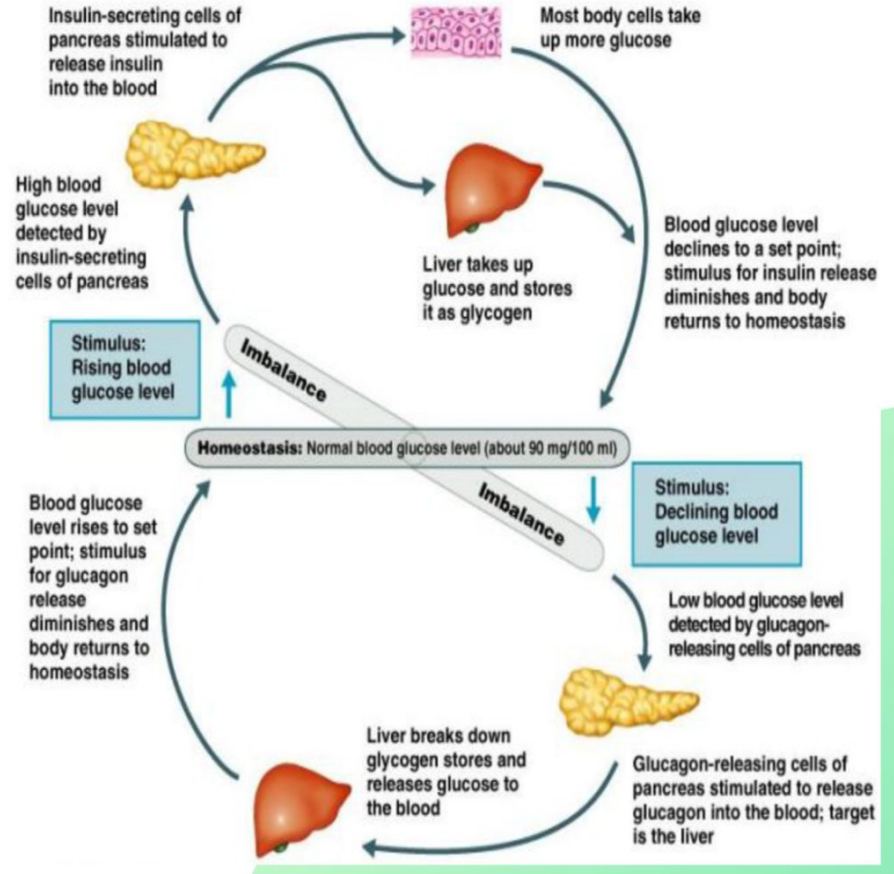
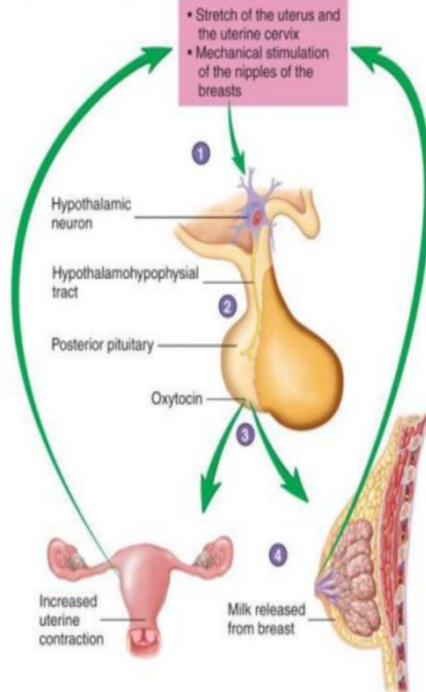
# Positive feedback

# Negative feedback

## Control of Oxytocin Secretion

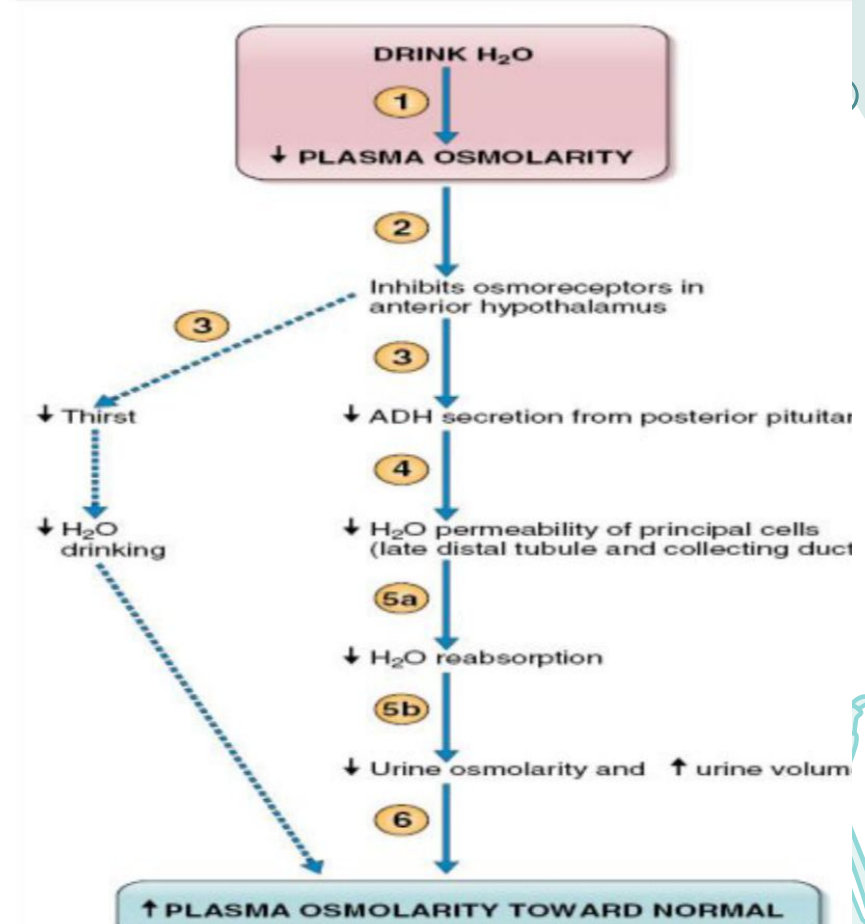
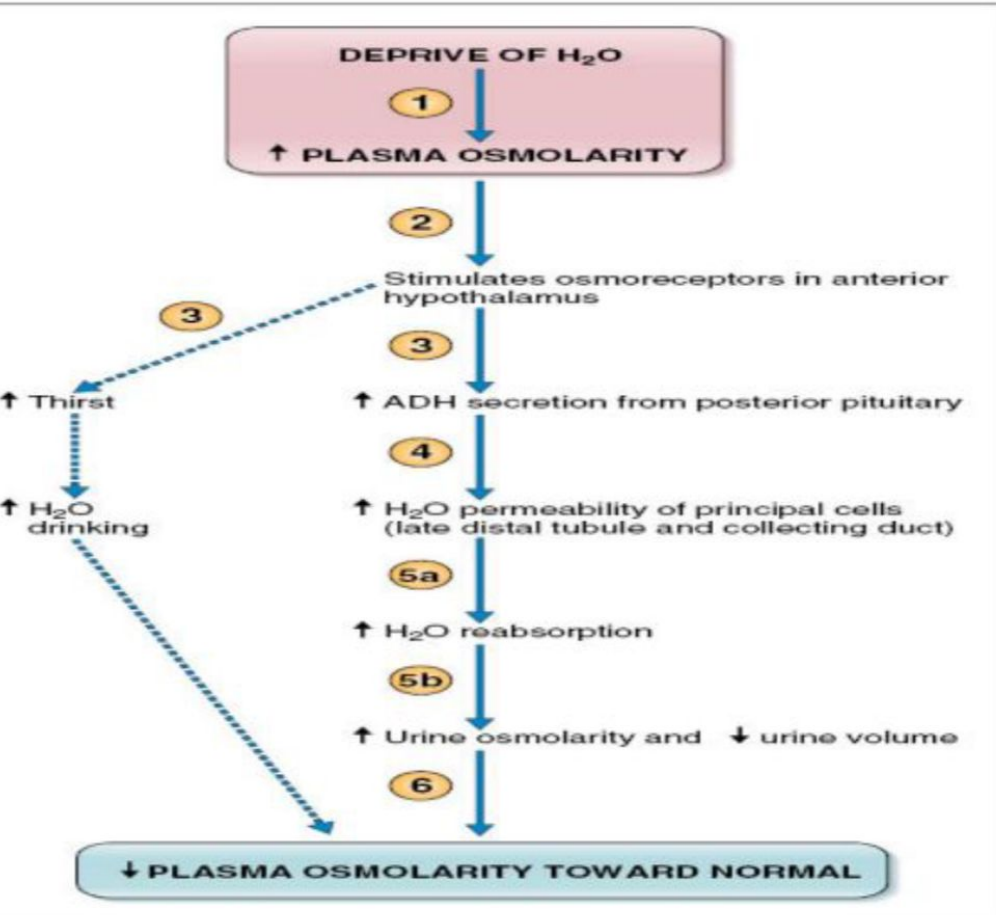
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- 1 Stretch of the uterus and the uterine cervix or stimulation of the breasts' nipples increases action potentials in axons of oxytocin-secreting neurons.
- 2 Action potentials are conducted by sensory neurons from the uterus and breast to the spinal cord and up ascending tracts to the hypothalamus.
- 3 Action potentials are conducted by axons of oxytocin-secreting neurons in the hypothalamohypophysial tract to the posterior pituitary, where they increase oxytocin secretion.
- 4 Oxytocin enters the circulation, increasing contractions of the uterus and milk ejection from the lactating breast.





# ADH : الهرمون المانع لإدرار البول



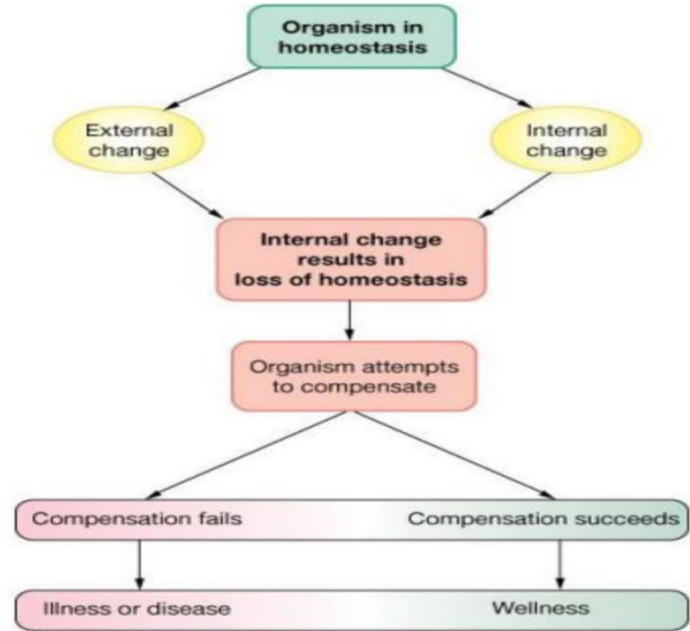
## Homeostatic imbalance:

**Disturbance** of homeostasis or the body's normal equilibrium.

**as a reaction of imbalance, it will lead to either:**

1- **Successful compensation:** Homeostasis reestablished

2- **Failure to compensate:** Pathophysiology which lead to Illness and Death



# Osmotic equilibrium and Mechanisms for Movement



## Osmotic equilibrium

- **Small** changes in concentration of **solutes** in the extracellular fluid can cause **tremendous** change in cell volume.
- Intracellular osmolarity = extracellular osmolarity
- 285 mosm/L

## 3 General mechanisms for Movement:

- Simple diffusion (passive)
- Facilitated transport (passive)
- Active transport



# Serum Values of Electrolytes

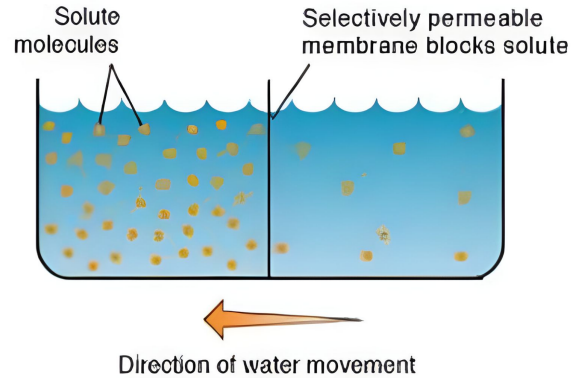
Cations	Concentration
mEq/L	
Sodium	135 - 145
Potassium	3.5 - 4.5
Calcium	4.0 - 5.5
Magnesium	1.5 - 2.5
Anions	Concentration
Chloride	95 - 105
Phosphate	2.5 - 4.5



# osmosis

## Definition

net diffusion of water from a region of **high** water concentration to a region of **low** water concentration.



# Tonicity:

## Definition

Tonicity: means effective osmolality in relation to plasma (=285milliosmol/L).

Therefore **isotonic solutions** [e.g. 0.9% saline solution] have almost **equal tonicity of the plasma**,

hypotonic solutions [e.g. 0.45% saline solution] **have < tonicity Than plasma**,

hypertonic [e.g. 3% saline solution] solutions **have > tonicity Than plasma**.



# Osmosis and tonicity:



Type of environment	Hypertonic:	Isotonic:	Hypotonic:
<p>Notes:</p> <p>Look at page 21 for a picture</p>	<ul style="list-style-type: none"><li>• MORE SOLUTES outside cell</li><li>• MORE WATER IN CELL</li><li>• over time, cell loses water</li><li>• (shrink)</li><li>• solution of sodium chloride 0.9% ↑</li><li>• out is higher than in</li></ul>	<ul style="list-style-type: none"><li>• same solutes</li><li>• No change in cell volume</li><li>• (no swells or shrink)</li><li>• 0.9% solution of sodium chloride stays the same</li><li>• same in and out</li></ul>	<ul style="list-style-type: none"><li>• LESS SOLUTES outside cell</li><li>• LESS WATER IN CELL, more solutes in cell.</li><li>• over time, cell gains water</li><li>• (swelling)</li><li>• solution of sodium chloride 0.9% ↓</li><li>• in is higher than out .</li></ul>

# Composition of common parenteral fluids (Electrolytes Content mEq/L)

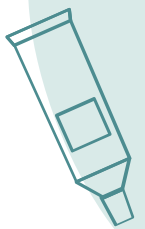
<b><i>Solutions</i></b>	<b><i>Na+</i></b>	<b><i>K+</i></b>	<b><i>Ca<sup>++</sup></i></b>	<b><i>Mg+</i></b>	<b><i>Cl-</i></b>	<b><i>HCO<sub>3</sub><sup>-</sup></i></b>	<b><i>Osmolality</i></b>
<b>Extracellular fluid</b>	<b>142</b>	<b>4</b>	<b>5</b>	<b>3</b>	<b>103</b>	<b>27</b>	<b>280-310 mOsm/L</b>
<b>Ringer's lactate</b>	<b>130</b>	<b>4</b>	<b>3</b>	<b>-</b>	<b>109</b>	<b>28*</b>	<b>Isotonic</b>
<b>0.9% NaCl</b>	<b>154</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>154</b>	<b>-</b>	<b>Isotonic</b>
<b>0.45 NaCl</b>	<b>77</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>77</b>	<b>-</b>	<b>Hypotonic</b>
<b>D5% Water</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>Hypotonic</b>
<b>(Glucose 5 grams/dl)</b>							
<b>3% NaCl</b>	<b>513</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>513</b>	<b>-</b>	<b>Hypertonic</b>

\*Transformed from lactate to bicarbonate by the liver

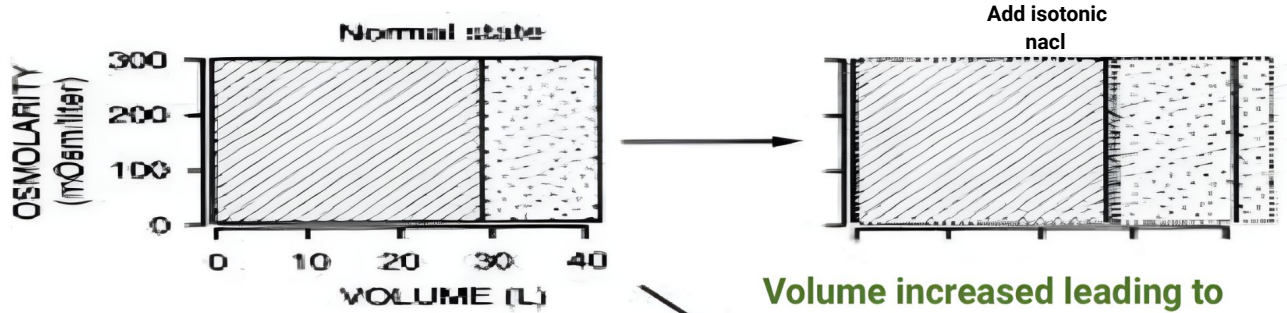




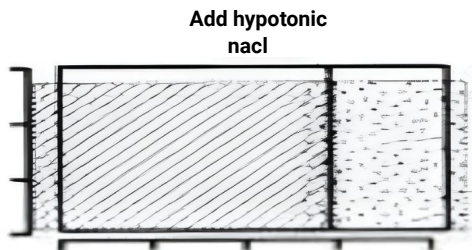
# Effects of adding saline solution to the EFC:



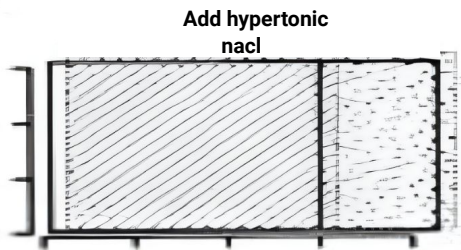
INTRACELLULAR FLUID  
EXTRACELLULAR FLUID



Volume increased leading to increase in blood pressure



Osmolarity decrease, volume in ECF transfer to ICF



Osmolarity increase, volume in ICF transfer to ECF





# Glucose and other solutions administered for nutritive purposes



## Who needs it?

People who can not take adequate (enough) amount of food.

## How to give it for them?

Drip Slowly.

## In order to maintain volume Where to prepare it?

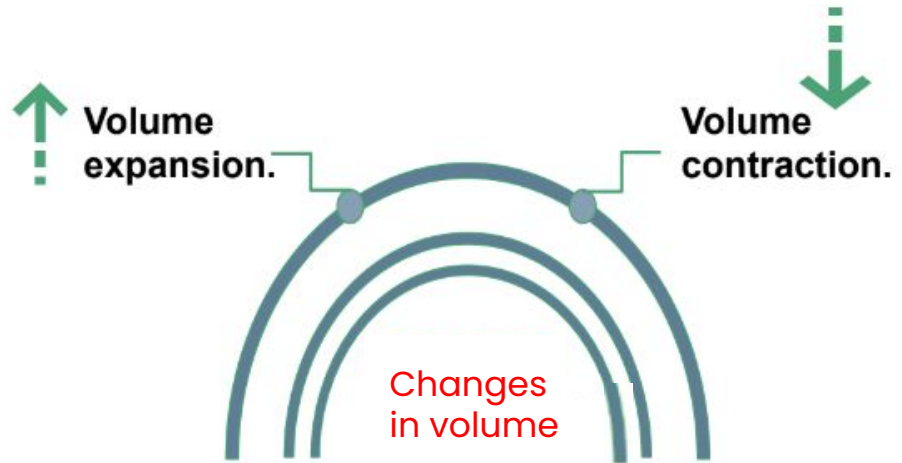
Prepared in isotonic solution.

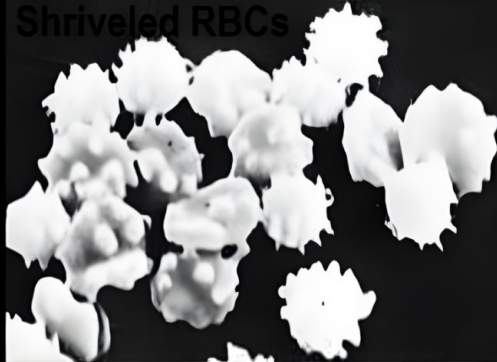
Water is excreted.

# Volumes and Osmolarities of ECF and ICF in Abnormal states

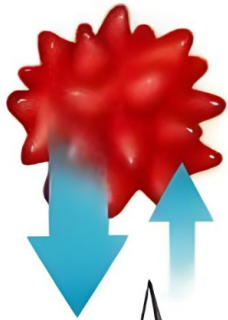
some factors can **Cause the change** :

1. Dehydration.
2. Intravenous infusion (IV).
3. Abnormal sweating .

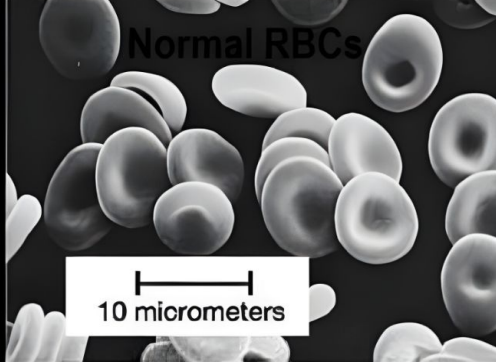




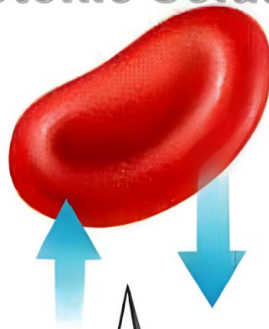
**Hypertonic Solution**



Net movement of water out of cells



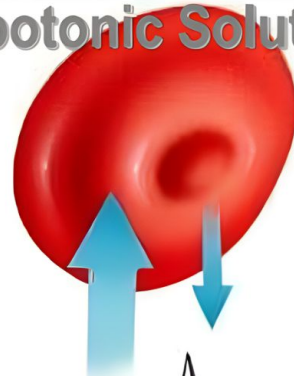
**Isotonic Solution**



Equal movement of water into and out of cells



**Hypotonic Solution**



Net movement of water into cells



# MCQs



1- Which of the following is an isotonic solution?

A- 0.45% sodium chloride

B- 0.9% sodium chloride

C- 5% sodium chloride

D- 19% sodium chloride

2- Which of the following represent a positive feedback mechanism

A- Uterus contraction

B- Blood pressure

C- Decrease Body temperature

D- Increase Body temperature

3- Which of the following is considered as a "positive" feedback mechanism

A- Thermoregulation

B- Co regulation

C- Blood coagulation

D- Blood pressure



3-C

2-A

1-B



## SAQs

### 1- What is homeostasis?

Answer: the ability to maintain a relatively stable internal environment in an ever-changing outside world

### 2- What are The Components of control mechanisms?

Answer: A control mechanism consists of three main components: a sensor (receptor), a control center, and an effector.

### 3- what is the difference between negative and positive feedback?

Answer: negative:opposes the effect and maintains it  
positive: increases the effect



3-C

2-A

1-B



## Team Leaders:



Lulwah Ali Alwabel



Basmah Ali Alghamdi



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## Team members:



Yara Mohammed



Rimaz Ahammad



Abdulaziz Alanazi



Abdulaziz Sahhari



Rassel Aldajany



Bassmah fahad



Turki alaskar



Abdulaziz Nasser



Ritaj Alsubaie



Lama Alahmari



Meshari Alharbi



Ziyad Bukhari



Hessah Alyousef



Samiyah Sulaiman



abdulmohsen alrahaimi



Khaled Aldukhyel



Elaaf Albadi



Roaa Alhajeri



Khalid Alkanhal



Manar saad



Shahad Alshehri



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