## **Electric properties of cardiac muscles**

Myocardium has got 2 types of cells

- Contractile tissue (muscles)
- Non- Contractile tissue (auto-rhythmic cells) or conductive tissue.

The Contractile muscles are:

- 1. Ventricles
- 2. Atria

Both similar graph shape

Non- Contractile tissue (conductive tissue):

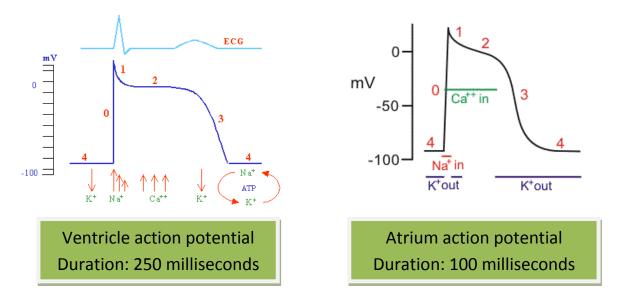
- 1. SA Node
- 2. AV Node
- 3. Bundle of His
- 4. Bundle of branches
- 5. Purkinje fibers

They are responsible for rhythmicity (Independent of nerve supply)

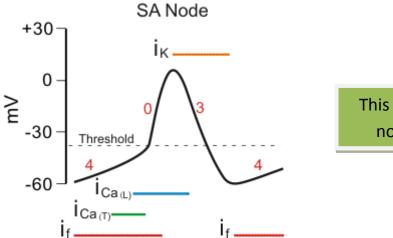
Action potential means depolarization followed by repolarization

The shape of action **potential** in all nerves is spike-shape but cardiac muscles have got different shape from different parts of heart.

Duration of action potential is from 200 - 250 ms (ventricles)



Cardiac muscle has the longest duration of action potential in purkinje fibers.

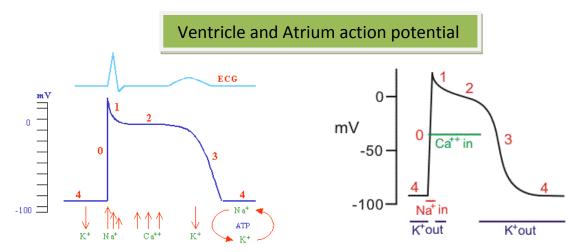


This graph indicates SA, AV nodes action potential

All conductive tissue (non-contractile) have prepotential period (slow depolarization period).

Purkinje fibers has similar graph to the Ventricle (Not atrium) except 2 things which are:

1. Duration of action potential (longer in Purkinje fibers- up to 400 ms).



2. Prepotential period.

Have 5 phases:

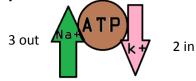
Phase 0: depolarization due to rapid entering of Na+ ions through fast sodium channels till reach to +30 mv which is the peak of depolarization

Phase 1: early repolarization phase because of transit outflux of K+ ions (it is very short phase and for very short time too)

Phase 2: called plateau phase (flat phase) because of Ca++ entry to the cell (there is No potassium entering)

Phase 3: outflux of K+ ions the cell (K+ out)

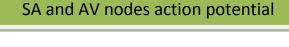
Phase 4: Resting Membrane Potential (RMP) phase because of helping of Na+,K+ ATP in pump

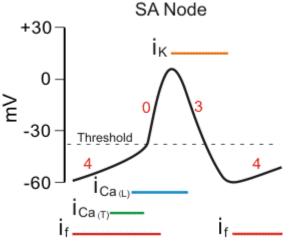


Difference between Ventricle and Atrium action potential	
Atrium	Ventricle
Small duration	Big duration
Short plateau phase	Long plateau phase

- SA node present at the root of SVC.
- AV node present at the mouth of coronary sinus.

Both are located in right atrium





Have 3 phases (no phase 1 & 2).

Phase 0: Ca++ entering through Long-action channel (slow not fast as sodium and for that reason you note that it is not vertical line in this phase like Phase 0 in Ventricle and Atrium action potential).

Phase 3: K+ ions leaving out the cell (K+ out) and it continues to cause hyperpolarization up to -80 (below the RMP which is -60)

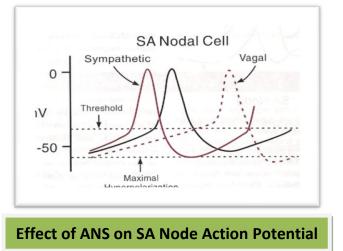
Phase 4: entering Na+ through funny channels (no K+ go out) and last third part of this phase sodium will stop and Ca++ begins to enter the myocyte thought transit channels (T- channels).

Why it is called funny channel?

Because sodium enter during hyperpolarization

Function of phase 4:

Sympathetic and parasympathetic nerves systems mediate this phase. If SNS activates the heart rate will increase (Tachycardia) then the phase 4 will be more vertical. However If PNS (vagal nerve) activates the heart rate will decrease (Bradycardia) then the phase 4 become more horizontal.



N.B:

- 1. In SNS, the phase 4 is shorter than PNS.
- 2. All autorhythmic tissue are not horizontal in phase 4 like Ventricle and Atrium action potential and
- 3. Phase 4 autorhythmic tissue is known as Prepotential phase, Pace maker potential phase, Initiator phase or Slow depolarizing potential phase.



## **Refractory period consist of:**

- 1. Absolute refractory period: second stimulus is not effective in this period (nothing will happen).
- Relative refractory period: Stronger stimulus can affect and stimulate heart muscles.ARP is very short in skeletal muscle and nerves in contrast with heart muscles which is longer (phase 2). In RRP, Na+ channels start to close but when we give 2<sup>nd</sup> strong stimulus it opens.
- 3. Supra normal period (SNP) is a very sensitive period and if you give a shock in this period, the heart will fibrillate and may die.

