

Cardiovascular System Block Cardiac Cycle- 1 (Physiology)

Dr. Hayam Gad MBBS, MSc, PhD Associate Professor Of Physiology College of Medicine, KSU







Function of the Heart



The Heart is a double pump



## Intracardiac Blood circulation



Valves of the heart

#### Atrioventricular valves:

- 1. <u>Tricuspid valve</u>: between right atrium & right ventricle.
- 2. <u>Mitral valve</u>: between left atrium & left ventricle.

#### Semilunar valves:

- Pulmonary valve: between right ventricle & pulmonary artery.
- 2. Aortic valve: between left ventricle & aorta.



## Functions of the Valves

- Valves allow blood to flow in only <u>ONE</u> direction.
- Opening & closure of valves occur as a result of pressure gradient across the valve.
- When A-V valves open, semilunar valves close & vice versa.
- A-V cusps are held by chordae tendinea to muscular projections called "Papillary muscles".







- Contraction of the heart generates pressure changes & results in orderly blood movement.
- Blood flows from an area of high pressure to an area of low pressure.
- Events are the same in the right & left sides of the heart, but with lower pressures in the right side.
- Atrial & ventricular systole do not occur at same time, but their relaxation occurs at same time during diastole of whole heart which lasts for 0.4 sec.



The Cardiac Cycle

- Sequence of events that take place in the heart in each beat (from the beginning of one heart beat to beginning of the next one).
- Each cycle is initiated by depolarization of S-A node, followed by contraction of the atria.
- The signal is transmitted to ventricles through A-V node & A-V bundle to cause ventricular contraction.





- This is time required for one complete cardiac cycle.
- When heart rate (HR) is 75 beats/min, the time will be 0.8 Sec

Cardiac cycle time= 
$$60/HR = 60/75 = 0.8$$
 Sec.

- The time is inversely proportional to HR.
- Cardiac cycle starts by systole of both atria (0.1 sec), then systole of both ventricles (0.3 sec), then diastole of whole heart (0.4 sec).

## Cardiac Cycle Duration

#### **Cardiac cycle duration = 0.8 sec (w**hen HR 75 beats/min).

- •Ventricular systole = 0.3 sec
- •Ventricular diastole = 0.5 sec
- •Atrial systole = 0.1 sec
- •Atrial diastole = 0.7 sec
- Normally, diastole is longer > systole

Importance of long ventricular diastole?

- Coronary blood flow
- Ventricular filling





Definitions

#### End-diastolic volume (EDV):

Volume of blood in ventricles at the end of diastole = 110-130 mL.

#### Stroke volume (SV):

Amount of blood ejected from ventricles during systole = 70 mL/beat.

**End-systolic volume (ESV):** 

Amount of blood left in ventricles at the end of systole = 40-60 mL.

#### **Description Example**:

Fraction of end-diastolic volume that is ejected = 60-65 %.





### Phases of cardiac cycle

- Atrial systole (0.1 sec.)
- Ventricular systole (0.3 sec.)
  - Isovolumic (isovolumetric) contraction phase (0.05 sec.)
  - Maximum ejection phase (0.15 sec.)
  - Reduced ejection phase (0.1 sec)
- Ventricular diastole (0.4)
  - Protodiastolic phase (0.04 sec.)....????
  - Isovolumic (isovolumetric) relaxation phase (0.06 sec.)
  - Rapid filling phase (0.1 sec.)
  - Reduced filling phase (0.2 sec.)



N.B. ? Considered '8' phases if including 1st phase of diastole



1- Atrial Systole:

- It is a phase of atrial contraction, occurs at end of ventricular diastole
  It lasts for ≈ 0.1 sec.
- ⇒It is preceded by atrial depolarization.
- ⇒Valves: A-V valves open (semilunar valves closed). blood goes from atria to ventricles.
- ⇒Ventricular volume: ↑ due to blood passage into ventricle. It reaches the end diastolic volume (EDV) 130 ml.
- ⇒Ventricular pressure: First slightly ↑ due to entry of blood from atria. Then ↓ due to dilatation of ventricles. In both cases, it is less than atrial P.
- ⇒Atrial pressure: First ↑ due to systole of atria. Then ↓ due to blood passage into ventricles.
- ⇒4<sup>th</sup> Heart sound heard.

### 2- Isovolumetric Contraction Phase:

- ⇒It occurs at beginning of ventricular systole. It lasts for  $\approx 0.04$  sec.
- Starts with closure of A-V valves.
- Ist Heart sound heard.
- Semilunar valves: Still closed.
- Ventricle is a closed chamber. It contracts with no changes in volume ( isometrically, no shortening)
- ⇒Volume in ventricle = EDV
- ⇒Ventricular pressure ↑ suddenly
- ⇒Aortic valve opens at the end of this phase, when LV exceeds 80mmHg.
- ⇒Atrial pressure: ↑ due to doming of cusps of closed A-V valves into atria.

## 3- Maximum (Rapid) Ejection Phase:

- The ventricles contract isotonically (with shortening) pushing most of blood (75% of ventricular blood) into aorta & pulmonary artery.
- **Duration:** 0.15 sec.
- Semilunar valves open at beginning of this phase when LV pressure exceeds 80 mmHg.
- ⇒AV valves: Still closed.
- ⇒Ventricular pressure reaches 120 mmHg in left V .
- Ventricular volume: \$\propto sharply due to shortening of ventricular wall and ejection of blood.
- ⇒Atrial pressure: First ↓ because when ventricles contract, they pull fibrous AV ring with AV valves downward thus ↓ atrial P.

## 4-Reduced Ejection Phase:

- The ventricles contract with less shortening than the previous phase and less blood is ejected (end of systole).
- Characteria Almost 25% of ventricular blood is ejected, i.e. 25% of SV.
- **Duration:** 0.1 sec.
- ⊃AV valves: Still closed.
- Semilunar valves: Still opened.
- ⇒Atrial pressure: Still ↑ gradually due to accumulation of venous blood.
- ⇒Ventricular volume: Continue ↓ gradually till it reaches the end systolic volume (60 ml).
- Ventricular pressure: \$\u00e4 gradually, as volume of blood leaving ventricles > the decrease in ventricular volume.

### 5- Isovolumetric Relaxation Phase:

- The ventricles relax without changing their volume. It occurs at the beginning of diastole.
- ⇒It lasts for  $\approx 0.04$  sec.
- ⇒Ventricular volume is constant at the ESV (60 ml).
- Semilunar valves: close at the beginning of the phase.
- ⇒2<sup>nd</sup> Heart sound is heard.
- ⊃A-V valves: Still closed.
- ⇒Ventricular pressure: ↓ rapidly, because the valves are closed & the relaxation is isometric.
- ⇒Atrial pressure: Still ↑ gradually due to accumulation of venous blood.

6- Rapid Filling Phase:

- Atrial pressure > ventricular pressure. A-V valves open.
- ⇒ ≈ 60-70% of blood passes passively to the ventricles along pressure gradient.
- **Duration**  $\approx 0.1$  sec.
- ⇒3<sup>rd</sup> Heart sound heard due to rush of blood into ventricles and vibration in ventricular wall.
- Semilunar valves: Still closed.
- ⇒Atrial pressure: First sudden ↓ due to rush of blood from atria to ventricles. Then gradually ↑ due to entry of venous blood.
- ⇒Ventricular volume: ↑ because it is being filled with blood.
- ⇒Ventricular pressure: Slightly ↑ but < atrial pressure</p>

## 7-Reduced Filling Phase (Diastasis):

- ⇒Remaining atrial blood flows slowly into ventricles by pressure gradient. ⇒Duration  $\approx 0.2$  sec.
- ⊃A-V valves still open.
- Semilunar valves: Still closed.
- ⇒Atrial pressure: Still ↑ gradually due to continuous venous return.
- ⇒Ventricular volume: Still ↑ due to entry of blood into ventricles.
- ⇒Ventricular pressure: Slightly ↑ gradually because the increase in volume is less than the entering blood.





# 6- Ventricular Volume Changes

Phases	Ventricular Volume
1- Atrial systole	
2- Isometric contraction	Constant
3- Rapid Ejection	<pre>rapidly</pre>
4- Reduced Ejection	slowly
? Protodiastolic	Constant
5- Isometric Relaxation	Constant
6- Rapid Filling	1 rapidly
7- Reduced Filling	slowly

![](_page_28_Picture_0.jpeg)