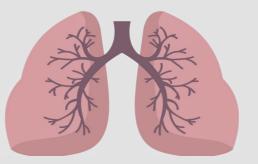


Effects of exercises on the respiratory system



Respiratory Block

Physiology 439 team work

Black: in male / female slides
Red : important
Pink: in female slides only
Blue: in male slides only
Green: notes
Gray: extra information
Textbook: Guyton + Linda



@Physiology_439

Objectives :

Describe the effects of moderate and severe exercise on oxygen consumption, and ventilation volumes.

U2 Interpret the effects of exercise on arterial (PO2, PCO2 and H+) ions.

Define the diffusing capacity of the respiratory membrane, and its typical values at rest, and explain its changes in exercise.

Explain causes of hyperventilation in exercise.

Effect of Exercise on the respiratory system

-The blood gases do not always have to become abnormal for respiration to be stimulated in exercise.

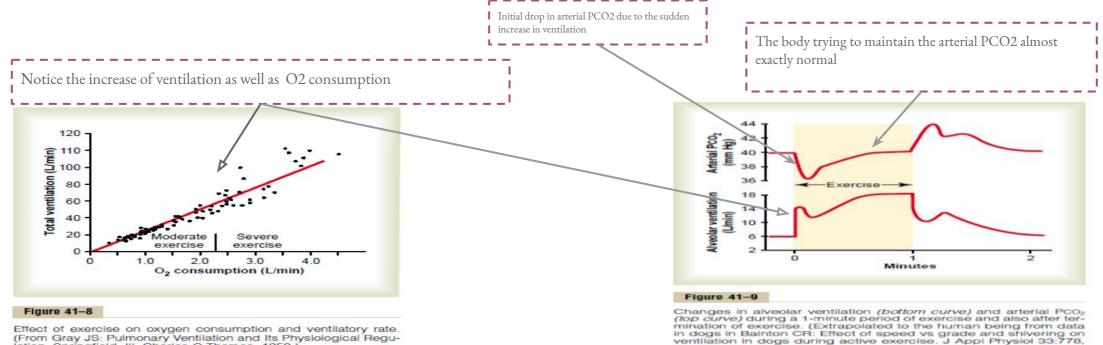
-Instead, respiration is stimulated mainly by neurogenic mechanisms during exercise.

Regulation of respiration during exercise

-In strenuous exercise O2 consumption and CO2 formation may increase 20 folds

-but alveolar ventilation increases almost exactly in step with the increased levels of metabolism.

-Therefore the arterial PO2, PCO2, PH all remain almost exactly normal.



1972.)

lation. Springfield, III: Charles C Thomas, 1950.)

What cause intense ventilation during exercise?

The brain, on transmitting motor impulses to the exercising muscles, transmits at the same time collateral impulses into the brain stem to excite the respiratory center. A large share of the total increase in ventilation begins immediately on initiation of the exercise, before any blood chemicals have had time to change. This is mostly due to neurogenic signals

Neural signals from the motor areas of the brain to the respiratory center (first cause)

Possibility that the neurogenic factor for control of ventilation during exercise is a <u>learned response</u>

Body temperature (hypothalamus)

The joint proprioceptors

Responses of the respiratory system to exercise

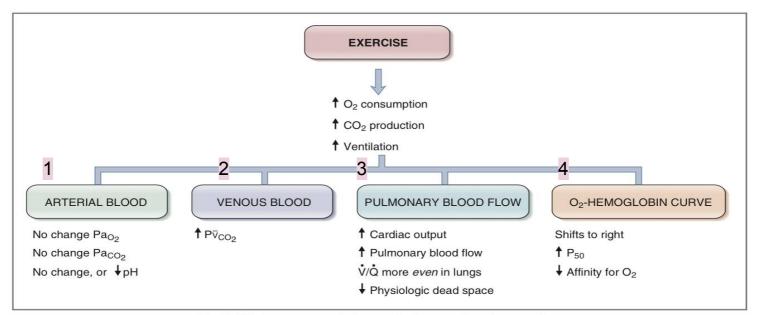


Fig. 5.34 Responses of the respiratory system to exercise.

1

Remarkably, mean values for arterial PO2 and PCO2 do not change during exercise. An increased ventilation rate and increased efficiency of gas exchange ensure that there is neither a decrease in arterial PO2 nor an increase in arterial PCO2. (The arterial pH may decrease, however, during strenuous exercise because the exercising muscle produces lactic acid.)

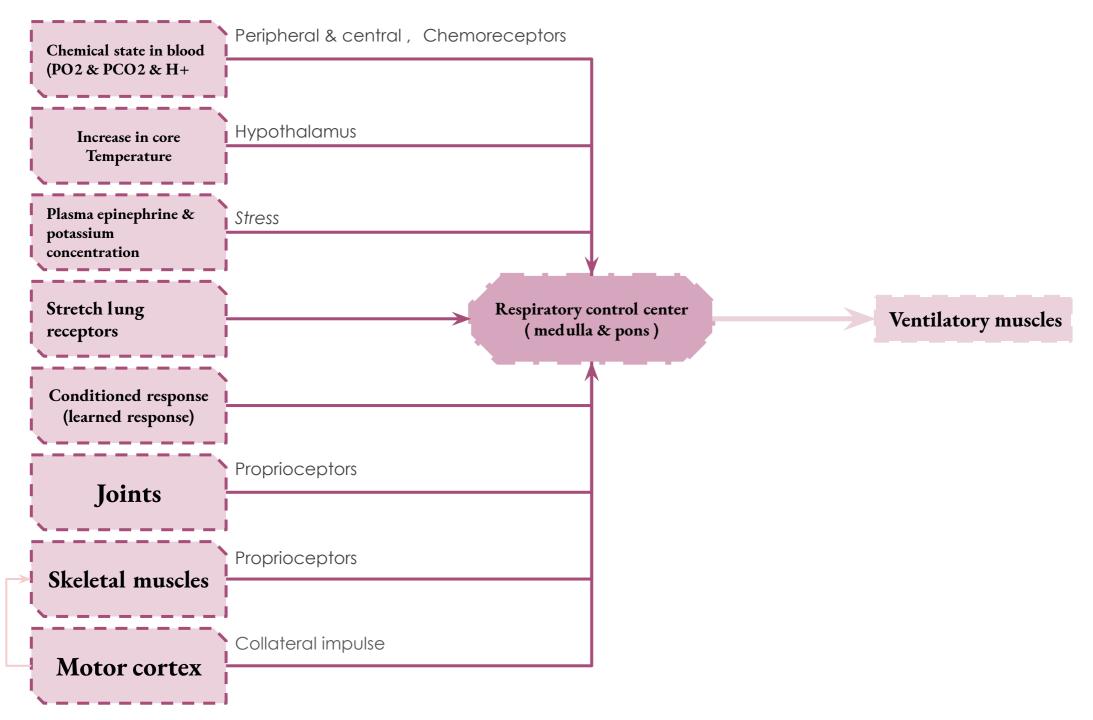
The PCO2 of mixed venous blood must increase during exercise because skeletal muscle is adding more CO2 than usual to venous blood

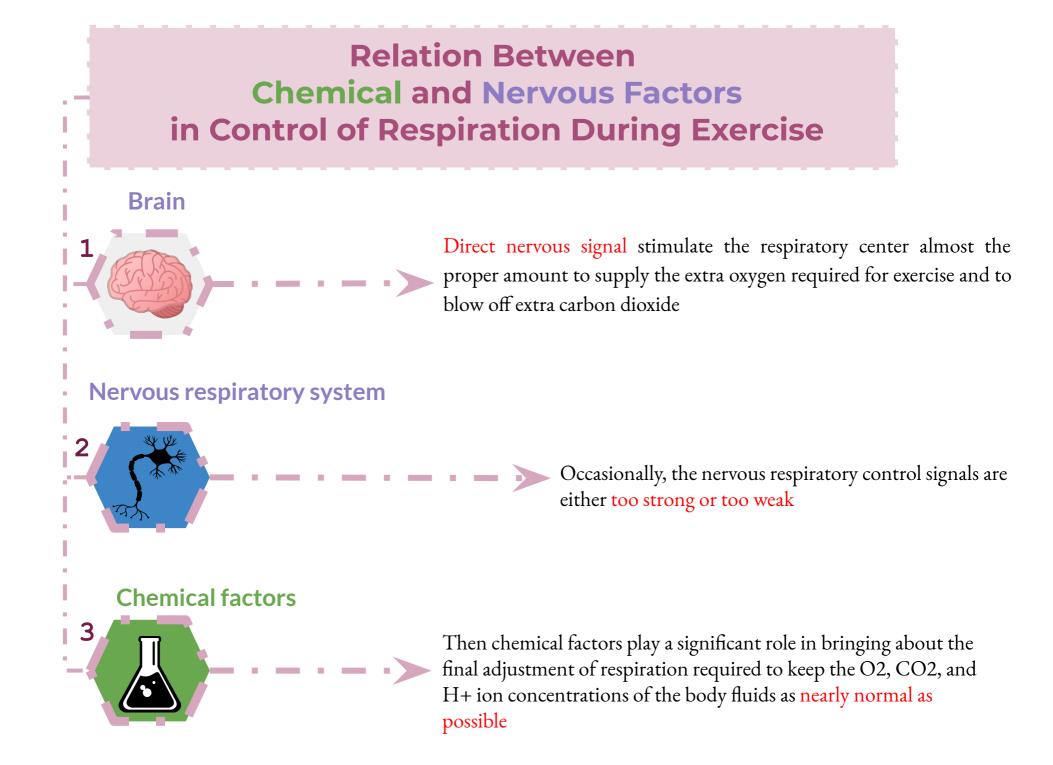
2

Cardiac output increases during exercise to meet the tissues' demand for O2. Because pulmonary blood flow is the cardiac output of the right heart, pulmonary blood flow increases. There is a decrease in pulmonary resistance associated with perfusion of more pulmonary capillary beds, which also improves gas exchange. As a result, pulmonary blood flow becomes more evenly distributed throughout the lungs, and the V/Q ratio becomes more "even," producing a decrease in the physiologic dead space.

During exercise, the O2-hemoglobin dissociation curve shifts to the right). There are multiple reasons for this shift, including increased tissue PCO2, decreased tissue pH, and increased temperature. The shift to the right is advantageous, of course, because it is associated with an increase in P50 and decreased affinity of hemoglobin for O2, making it easier to unload O2 in the exercising skeletal muscle.

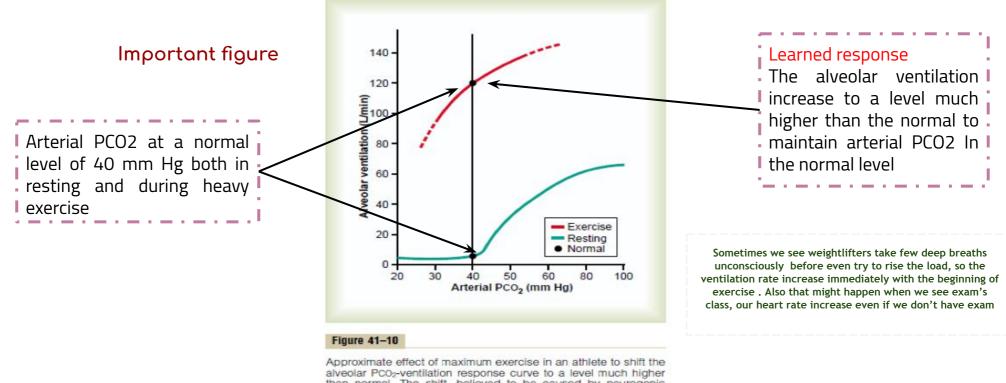
Summary of factors that stimulate ventilation during exercise





The Neurogenic Factor for Control of Ventilation During Exercise Is a Learned Response (trained , skilled , gained etc...)

- The ventilatory response during exercise, is at least *partly* a learned response
- With repeated periods of exercise, the brain becomes more able to provide the proper signals required to keep the blood PCO2 at its normal level
- The cerebral cortex is involved in this learning, because experiments that block only the cortex also block the learned response



Approximate effect of maximum exercise in an athlete to shift the alveolar PCO₂-ventilation response curve to a level much higher than normal. The shift, believed to be caused by neurogenic factors, is almost exactly the right amount to maintain arterial PCO₂ at the normal level of 40 mm Hg both in the resting state and during heavy exercise.

Diffusion capacity of the respiratory membrane

Is the volume of gas that diffuses through the membrane each minute for a pressure difference of 1 mmHg

	O ₂ diffusing capacity	CO_2 diffusing capacity It diffuses 20 times greater than O_2 due to its diffusion coefficient which is 20 times that of O_2
During rest	21 ml/min/mmHg	
	> Even if the oxygen pressure difference across the respiratory membrane is 11 mmHg $->11x21=230$ ml oxygen diffusing through the membrane each minute.	400 ml/min/mmHg 21*20=400
	يعني حجم الاكسجين الي يدخل من الAlveoli للدم كل دقيقة هو 21ml لكل اختلاف 1 في الضعط. لكن الجسم يحتاج اقل شي 230ml من الاكسجين بالدقيقة؛ فنستنتج ان اختلاف الضغط ب21ml هو اقل ضغط يكفيني عشان اخذ احتياجي من الاكسجين بهالدقيقة لان كل ضغط منهم بيعطيني 21ml من الاكسجين. During rest tissues consume 250 , 230 ml O ₂ /min	الأكسجين قلنا 21 و Diffusion ال CO ₂ اكبر منه الأكسجين ب20 مره يعني تقريبا بيكون 400
During exercise (Increases 3 folds)	 65 ml/min/mmHg This is due to : increased number of open pulmonary capillaries which was dormant, thereby increasing the surface area for gas exchange. In addition to increased alveolar ventilation. 	Increase to 1200-1300 ml/min/mmHg نفس الشئ الأكسجين اثناء التمارين 65 ف يعني 65*1300=1300

How to measure the diffusion capacity of Oxygen and Carbon Dioxide

The diffusing capacity for CO_2 has never been measured because CO_2 diffuses through the respiratory membrane so rapidly that the average PCO_2 in the pulmonary blood is not far different from the PCO_2 in the alveoli—the average difference is less than 1 mm Hg

It is not practical to measure the O_2 -diffusing capacity directly because it is not possible to measure accurately the O_2 tension of the pulmonary capillary blood.

However, the diffusing capacity for CO can be measured accurately because the CO tension in pulmonary capillary blood is zero under normal conditions. So, we measure O_2 capacity using CO

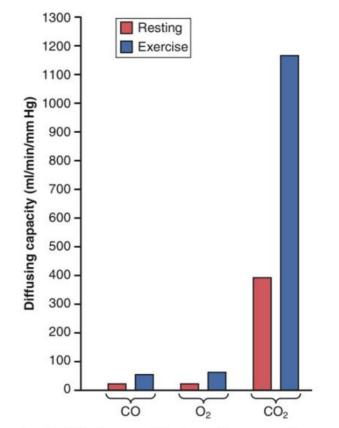
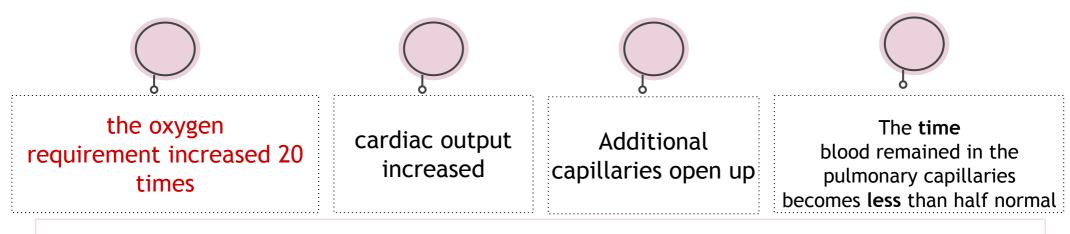


Figure 40-10. *Diffusing capacities* for carbon monoxide, oxygen, and carbon dioxide in the normal lungs under resting conditions and during exercise.

During exercise :



But, the blood is almost completely saturated with oxygen when it leaves the pulmonary capillaries!

How?

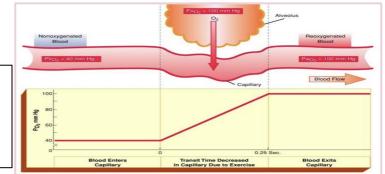
1- <u>The diffusing capacity for oxygen increases almost three fold during exercise</u>, this results mainly from increasing numbers of capillaries participating in the diffusion, and a more even V/Q ratio all over the lung.

2- <u>At rest the blood normally stays in the lung capillaries about three times as long as necessary</u> to cause full oxygenation.

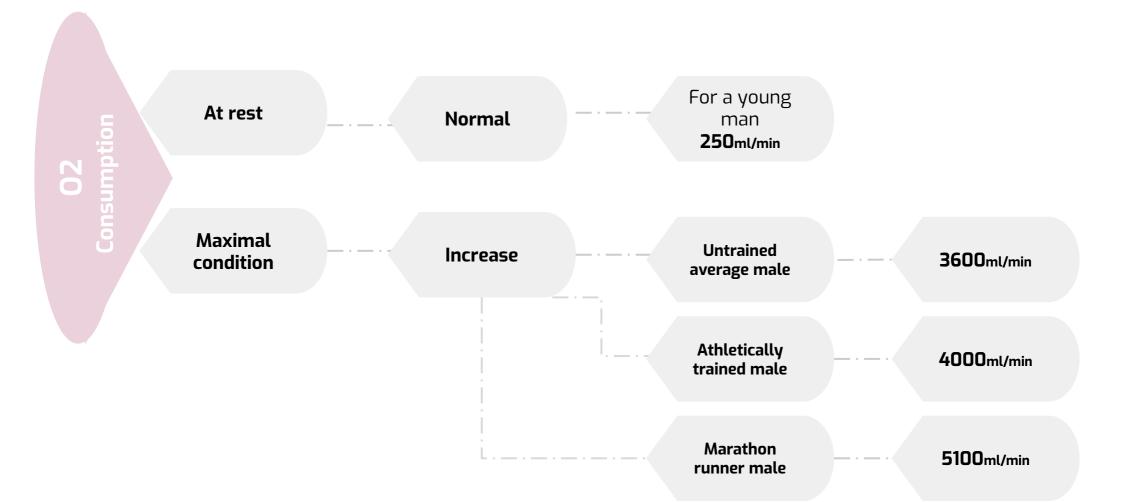
Therefore, even with shortened time of exposure in exercise, the blood is still fully oxygenated or nearly so. 3-Dilatation of the other capillaries.

4-In addition to increased alveolar ventilation.

The curve show how the blood speed increase when it enter the pulmonary capillaries But that doesn't affect the saturation of O_2 and the blood maintain normal PO_2

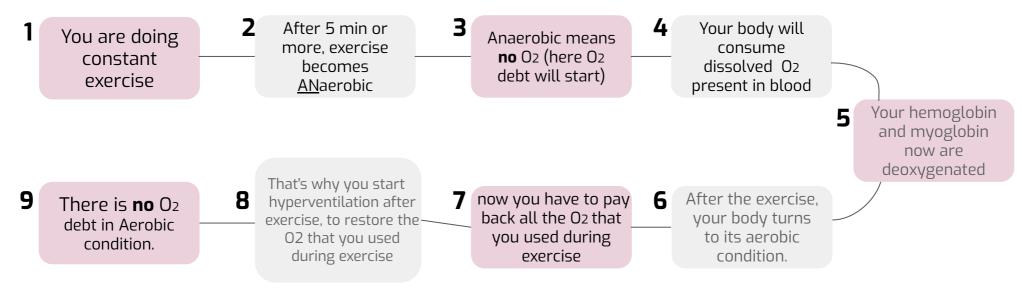


Oxygen consumption and pulmonary ventilation in exercise



Oxygen Debt

It's the extra consumption of oxygen after completion of strenuous exercise. And its amount= about **11.5** liters of **O**₂.



Excess post O2 debt

required to convert;

consumption is

ADP to ATP

Lactic acid to glucose

Creatine phosphate to its origin state

Body temperature to its normal

After you finish the exercise, and paid back oxygen debt, you will still hyperventilated and consuming oxygen after exercise .. WHY? because When you were in anaerobic condition, you have used:

- 1. ATP, so you convert it to ADP.
- 2. Glucose, so you convert it to lactic acid.
- 3. Creatine phosphate.
- 4. High body temperature.

Oxygen deficit:

Cellular energy use exceeds O₂ uptake.

متى تحصل هذه الحالة؟ اذا كان استهلاك الانسجة لـO2 اكبر من الكمية اللي يقدر الشخص انه يحصل عليها.

Quiz

1- What happens during exercise?

- A. Blood flow is uniform throughout the lung
- B. Lung-diffusing capacity increases because blood flow is continuous in all pulmonary capillaries
- C. Pulmonary blood volume decreases
- D. The transit time of blood in the pulmonary capillaries does not change from rest

2-what is the main cause of intense ventilation during exercise ?

- A. Changes in PO_2 and PCO_2
- B. Changes in PCO₂ only
- C. Brain cortex
- D. Who said there is intense ventilation during exercise ?

3- During strenuous exercise, O_2 consumption and CO_2 formation can increase as much as 20-fold. Va increases almost exactly in step with the increase in O_2 consumption. Which option best describes what happens to the mean arterial O_2 tension (Po₂), CO_2 tension (Pco₂), and pH in a healthy athlete during strenuous exercise?

	Arterial Po ₂	Arterial Pco ₂	Arterial pH
A)	Decreases	Decreases	Decreases
B)	Decreases	Increases	Decreases
C)	Increases	Decreases	Increases
D)	Increases	Increases	Increases
E)	No change	No change	No change

4-Which of the following describes diffusing capacity of O_2 in the lung?

- A. Does not change during exercise
- B. Is greater than diffusing capacity for CO₂
- C. Is greater in residents at sea level than in residents At 300 meter altitude
- D. Is directly related to alveolar capillary surface area

Key Answers : 4: D 3: E 2: C 1: B



- 1- which part of brain is involved in the ventilatory learned response during exercise ?
- 2- why the blood leaving the pulmonary capillaries is fully saturated even that O_2 consumption increase 20 folds during exercise ?
- Answers: 1- cerebral cortex
- 2-
- 1- The diffusing capacity for oxygen increases almost three fold during exercise
- 2- at rest the blood in lung capillaries is 3 times as long as necessary

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- Ahmad Al Khayat
- Mohammod alghedan
- Nawaf alghamdi
- ▷ Raed alntaifi
- ▷ Homoud alghadeb
- Mishal alhamed
- Musab alamri
- ▷ Fayez altbaa
- ▷ Khalid altowijeri
- Mohammed alsalman

- Renad Alhomaidi
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- ▷ Sarah alobaid
- ▷ Farrah alsaid
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