REGULATION OF EXTRACELLULAR FLUID VOLUME

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Objectives

- Identify and describe the role of the sensors and effectors in the renal regulation of body fluid volume.
- Describe the role of the kidney in regulation of body fluid volume.
- Identify the site and describe the influence of aldosterone on reabsorption of Na⁺ in the late distal tubules.



Introduction



Why does the body regulate ECF volume by adjusting body Na⁺ content??

Let's revise a few concepts!

Electrolyte Composition of Body Fluids





- The most abundant cation in ECF is Na⁺
- The most abundant anions in ECF are CI⁻ and HCO3⁻

- The body regulates ECF volume by monitoring and adjusting total body content of Na⁺
- ECF volume is closely linked to Na⁺ balance... How??

Why is Na⁺ Content the Main Determinant of ECF Volume?

Na⁺ and its associated anions are the main osmotic constituents of ECF volume.

When **Na**⁺ salts move, water must follow.



Sodium Balance

Input

- Dietary intake;
 - RDA = 1.5-2.3 g/day
 - Actual content in western diet = 7g/day

Output

- Kidney (most important).
- GI lossSweat
- Minor pathways under normal conditions

(Preston & Wilson. Lippincott's illustrated reviews Physiology)

Sodium Distribution in the Body



(Boron & Boulpaep. Medical Physiology)

ECF VOLUME REGULATION

ECF Volume Regulation

- What does the body sense?
- What are the sensors?
- How does it execute its action? What are the effectors?

What Does the Body Sense?

- The body does not sense ECF volume per se! But it senses *Effective circulating volume (ECV)*.
- Effective circulating volume (ECV) = a functional blood volume that reflects the extent of tissue perfusion in specific regions, as evidenced by the pressure in their blood vessels.
- In short, ECV reflects adequacy of circulation. Fullness and pressure in the vessels.
- Usually changes in ECV parallel those of ECF volume.

Effective Circulating Volume



What are the Sensors?

- Changes in ECV are sensed by baroreceptors.
 - Low-pressure baroreceptors.
 - High-pressure baroreceptors.

Table 40-2 ECF Volume Receptors

"Central" Vascular Sensors *Low-Pressure Sensors (very important)* Cardiac atria Pulmonary vasculature *High-Pressure Sensors (less important)* Carotid sinus Aortic arch Juxtaglomerular apparatus (renal afferent arteriole)

Sensors in the CNS (less important)

Sensors in the Liver (less important)

(Boron & Boulpaep. Medical Physiology)

What are the Effectors?



The Renin-Angiotensin-Aldosterone System (RAAS) ↓↓ ECV **↓↓** stretch of baroreceptors in the afferent arteriole Causes granular cells to release *Renin* Angiotensinogen — Renin → Angiotensin-I ACE Angiotensin-II $\uparrow \uparrow ADH$ **↑↑** Aldosterone Vasoconstrictor

Na⁺ excretion

↑↑ reabsorption of Na⁺ from tubule

(Boron & Boulpaep. Medical Physiology)

The Renin-Angiotensin-Aldosterone System (RAAS)



(Boron & Boulpaep. Medical Physiology)

Sympathetic Nervous System (SNS)

Its role is thought to be especially important during stressful conditions, e.g. hemorrhage.



Atrial Natriuretic Peptide (ANP)

- ANP promotes *natriuresis* (Na⁺ excretion).
- Secreted by atrial myocytes in response to stretch.



Antidiuretic Hormone (ADH)





Summary



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Final Note

- Although, under physiologic conditions, the body regulates plasma volume & plasma osmolarity independently.
- Severe derangements in fluid & electrolyte balance may challenge the system by presenting two conflicting changes in osmolarity and volume.
- In general, the body defends volume at the expense of osmolarity.

THANK YOU