

Gastrointestinal Physiology Lecture- 5 Physiology of the Small Intestine: Motility and Secretion

Chapter 64; pages 807-816 Chapter 65; pages 817-832

Dr. Hayam Gad MBBS, MSc, PhD Associate Professor of Physiology College of Medicine, KSU Motility in the small intestine & its control.

Secretions of the small intestine.

OBJECTIVES

Digestion of carbohydrates, proteins and fats.

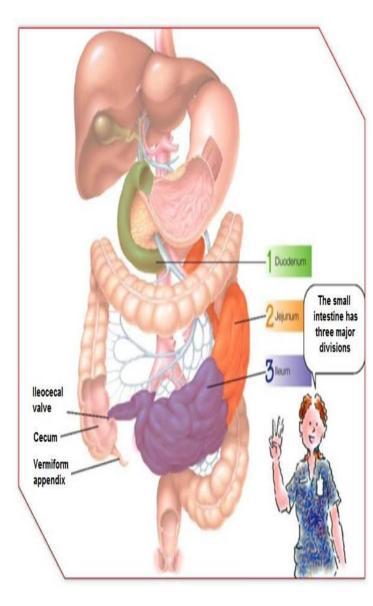
Basic principles of gastrointestinal absorption of carbohydrates, proteins, fats & vitamins.

Absorption and secretion of electrolytes and water.

Motility in the Small Intestine

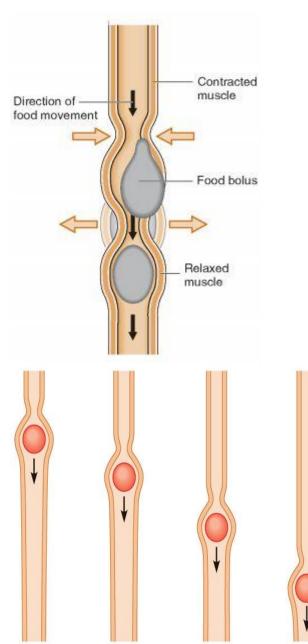
The movements of the small intestine can be divided into:

- Propulsive contractions (Peristalsis)
- Segmenting (Mixing) contractions
- Migrating motor complex
- Antiperistalsis
- Peristaltic rush



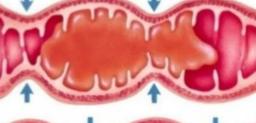
1. Propulsive Movement (Peristalsis)

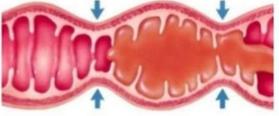
- A contraction ring appears around gut, then moves forward.
- Usual stimulus is distention.
- It organizes propulsion of material over variable distances.
 - It is faster in the proximal intestine and slower in the terminal intestine.
 - Its velocity is 0.5 to 2.0 cm/sec, (3 to 5 hours are required for passage of chyme from the pylorus to the ileocecal valve). Myenteric plexus is important. They can be blocked by atropine.



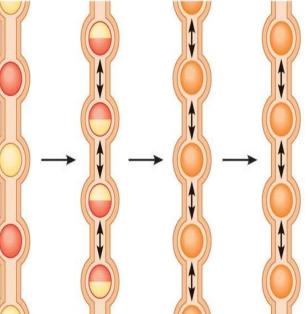
2. Mixing (Segmentation) Contractions

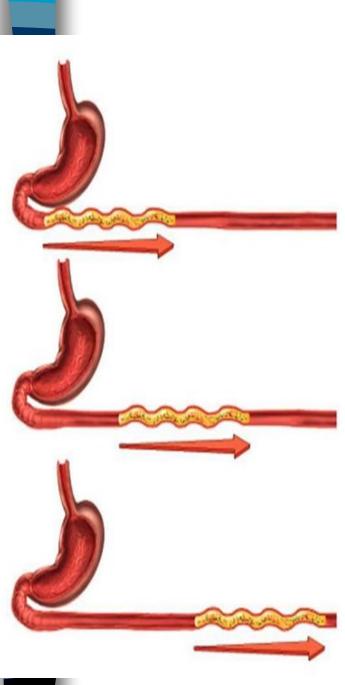
- A localized contraction of circular smooth muscles that constricts the intestine into spaced segments, last for fraction of min.
- As one set of segmentation contraction relaxes, a new set often begins at points between the previous ones.





- Usual stimulus is distention.
- It is activated by enteric nervous system
- So They can be blocked by atropine.
- ∞ <u>The significance:</u>
 - Blend different juices with the chyme
 Bring products of digestion in contact with absorptive surfaces





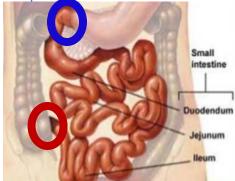
3- Migrating Motor Complex (MMC)

- Bursts of depolarization accompanied by peristaltic contraction that begins in empty stomach during interdigestive period (after absorption occurs)
- Travels a long whole length of small intestine to reach ileocaecal valve after 1.5-2 h. where it disappears. A new wave of MMC starts.
- Activity of MMC terminates as soon as food is ingested.
- Function of MMC is to sweep materials (undigested food residues, dead mucosal cells and bacteria) into colon and keeping the small intestine clean.
- Regulated by autonomic nerves and by release of hormone motilin.

4- Antiperistalsis

A wave of contraction in the alimentary canal that passes in an oral (i.e. upward, backwards) direction and force the contents in the opposite direction.

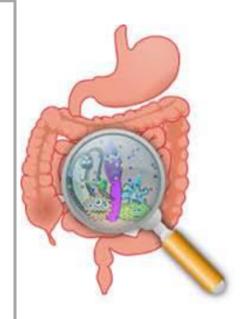
- Occurs between:-
 - Stomach and duodenum to allow more time for neutralization of chyme.
 - Ileum and caecum to allow time for absorption.



5- Peristaltic rush

 Powerful rapid peristalsis due to intense irritation of intestinal mucosa (as in infectious diarrhea).

 Initiated mainly by extrinsic nervous reflexes to brain stem and back to gut.

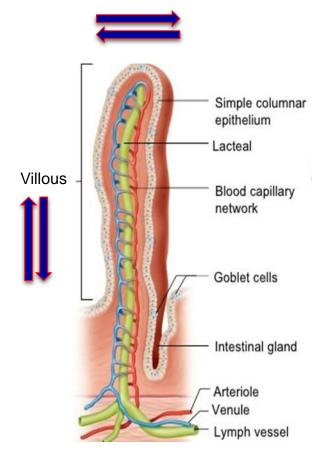


 Sweeps the contents of intestine into the colon without much absorption leading to diarrhea and thereby relieving the small intestine of irritative chyme or excessive distension.



<u>Movement of the Villi</u>

- Initiated by local nervous reflexes in response to chyme in small intestine.
- Consists of fast shortening and slow lengthening as well as side to side movements.
- Stimulated by villikinin hormone released by intestinal mucosa when it comes in contact with digestive products.
- Second Second



Control of Intestinal Motility

1- Neural factors

Vagal excitation increases intestinal and villous movements. Sympathetic excitation decreases intestinal and villous movements. gastrin Gastroileal reflex ↑ motility Initiated by gastric distension. of ileum Food Solution Impulses are conducted through In tone of myenteric plexus to initiate a fast Stomach Vagovagal reflexes ileocaecal peristaltic wave passing to the ileum. sphincter The ileocaecal valve relaxes allowing chyme to pass into cecum. This reflex is mediated by vague nerve.



2- Hormonal factors

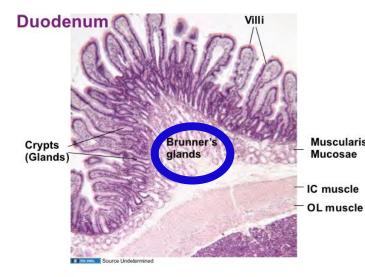
Gastrin, CCK, insulin and serotonin stimulate intestinal motility. **Gastrin and CCK relax ileocaecal sphincter.** Motilin secreted from duodenum stimulates intestinal motility and regulate MMC. Secretin and glucagon inhibits intestinal motility and contract ileocaecal sphincter. Villikinin stimulates movement of the villi.

Secretions of the Small Intestine

Secretion of Mucus by Brunner's Glands in the Duodenum

Brunner's glands secrete large amounts of alkaline mucus, which contains a large amount of bicarbonate ions.

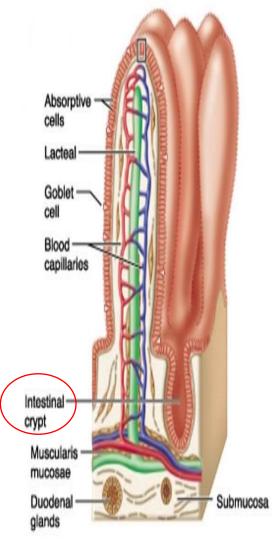
Mucus protects the mucosa



(Brunner's glands are diagnostic for duodenum....)

Intestinal Juice (Succus Entericus)

- It is secreted from intestinal crypts (small pits which lie between intestinal villi).
- s Volume: 1800 ml/day.
- pH: 7.5-8. It participates in the neutralization of acid chyme delivered from stomach.
- Composition: 0.6 % organic, 1 % inorganic substance.
- Most of the enzymes are found either in the brush border or in the cytoplasm of the enterocytes.
- The enzymes that are actually secreted into the lumen are enteropeptidase and amylase



Control of Intestinal Secretion

Brunner's gland secretion is stimulated by secretin, tactile and vagal stimulation.

Intestinal juice secretion is stimulated by:

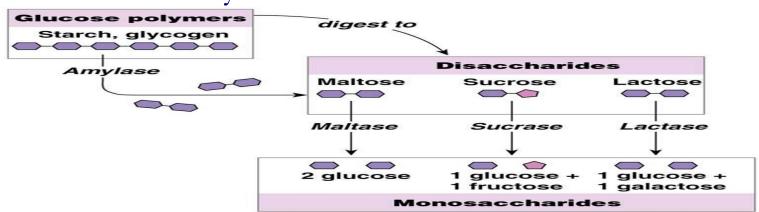
- Distension, tactile and vagal stimulation.
- Hormones as gastrin, secretin, CCK, glucagons, enterocrinin.

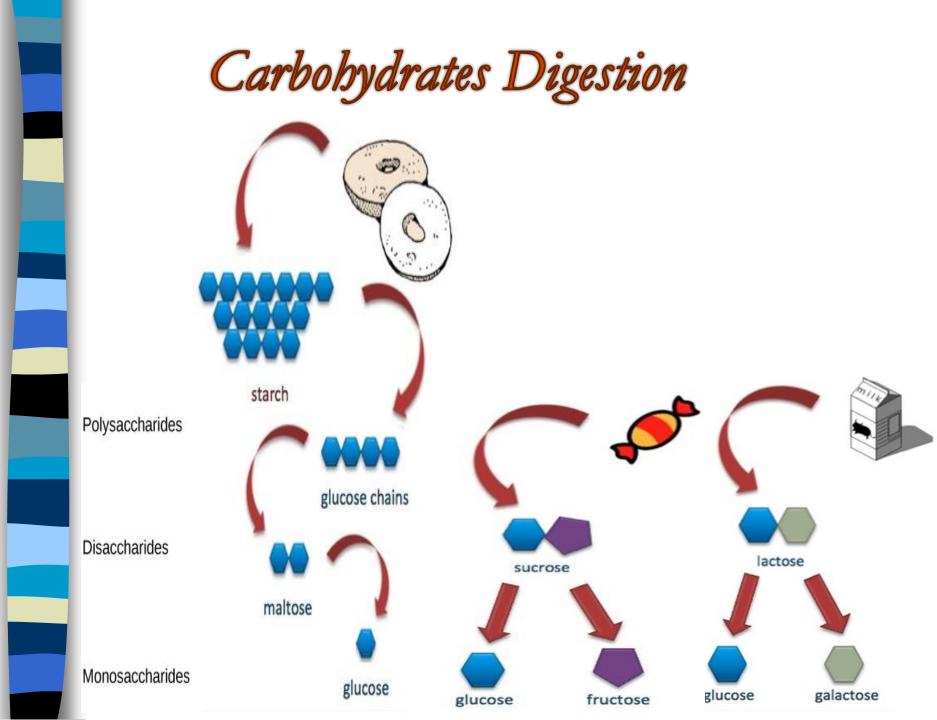
Sympathetic stimulation exerts an inhibitory effect.

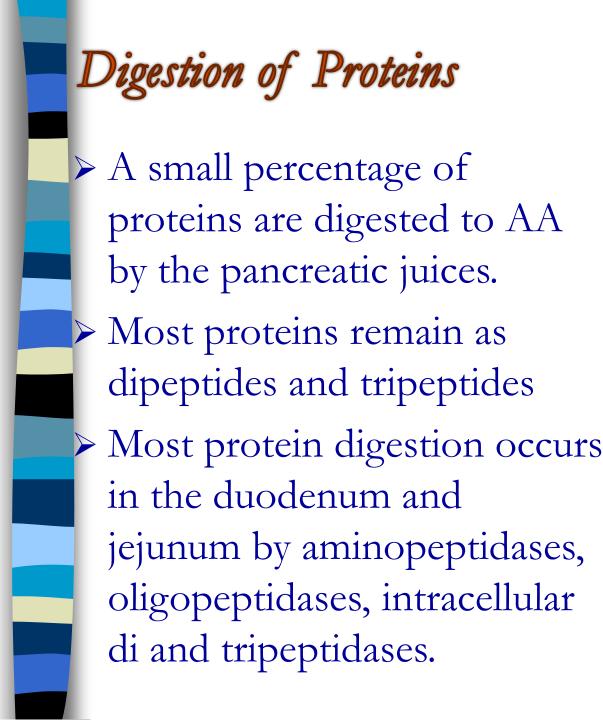
Digestion of Carbohydrates
 The enterocytes contain four enzymes (lactase, sucrase, maltase, and a-dextrinase), which are capable of splitting the disaccharides lactose, sucrose, and maltose, plus other small glucose polymers, into their constituent monosaccharides.

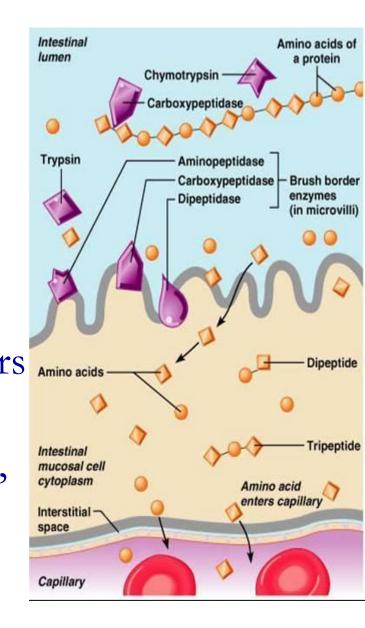
These enzymes are located in the enterocytes covering the intestinal microvilli brush border, so that the disaccharides are digested as they come in contact with

these enterocytes.



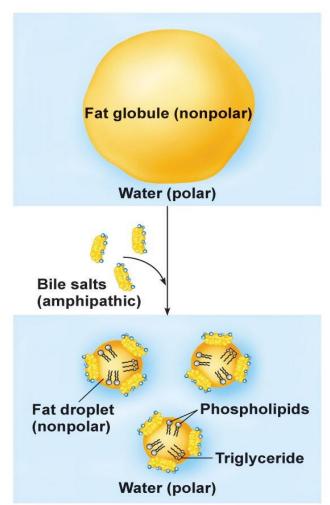








- Bile salts and lecithin in the bile help fat digestion by make the fat globules readily fragmentable with the water in the small intestine (emulsification of fat).
- Bile salts break the fat globules into very small sizes, so that the water-soluble digestive enzymes can act on the globule surfaces.



Basic Principles of Gastrointestinal Absorption

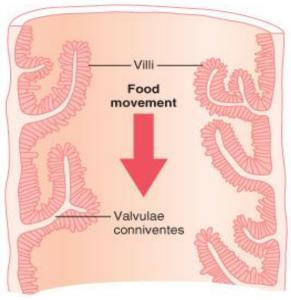
Absorptive Surface of the Small Intestinal

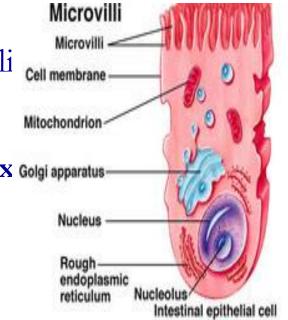
The absorptive surface of the small intestinal mucosa, showing many folds called *valvulae conniventes*, well developed i the duodenum and jejunum. They increase the surface area of the absorptive mucosa about *3-fold*.

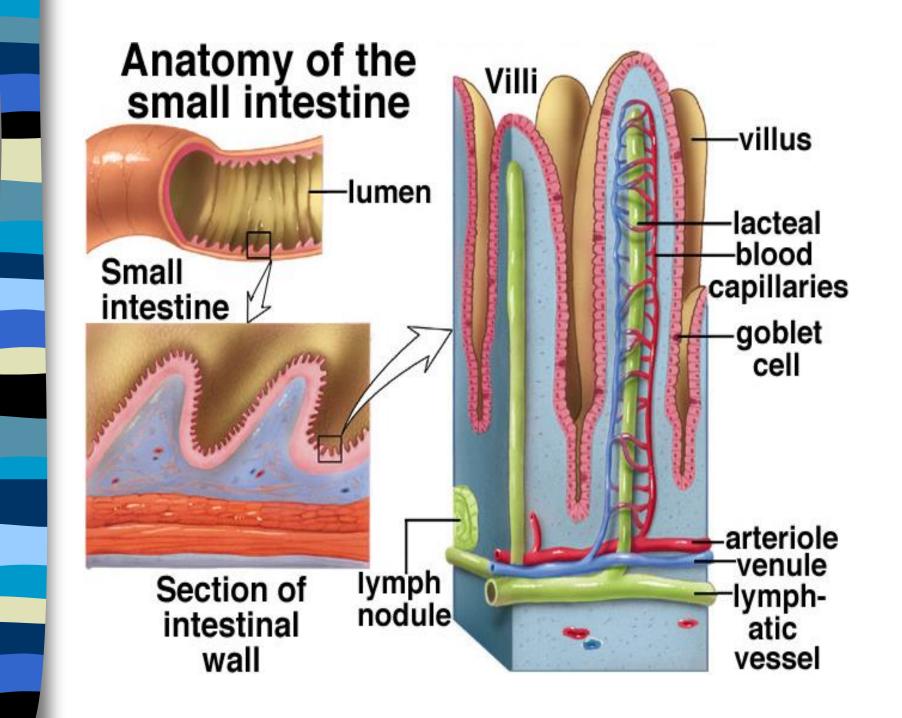
The presence of villi on the mucosal surface enhances the total absorptive are another *10-fold*.

The epithelial cell on each villus is characterized by a brush border, consisting of as many as 1000 microvilli (increases the surface area another *20fold*).

All these increase the intestinal surface 600x Golgi apparatus (Provides the surface area equivalent to a tennis court)

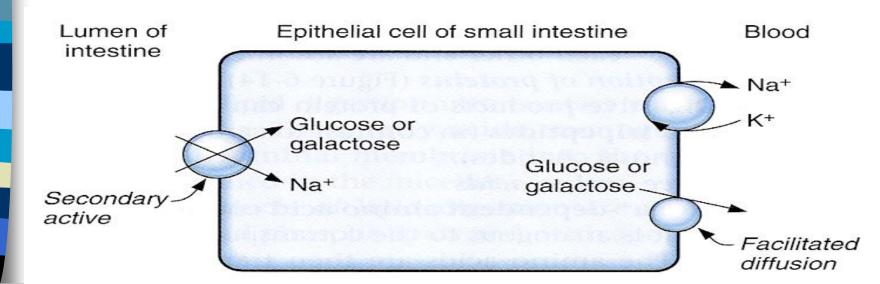




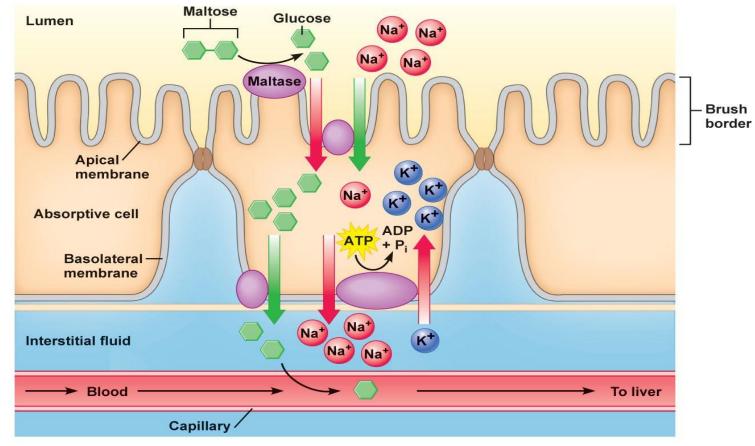


Absorption of Carbobydrates

- All the carbohydrates in the food are absorbed in the form of monosaccharides; only a small fraction are absorbed as disaccharides.
- Glucose and galactose absorption occurs in a cotransport mode with active transport of Na^+ (2ry active transport).
- Fructose is independent on Na⁺ but it transports in lumenal membrane via facilitated diffusion.
- Pentose is transported by passive diffusion

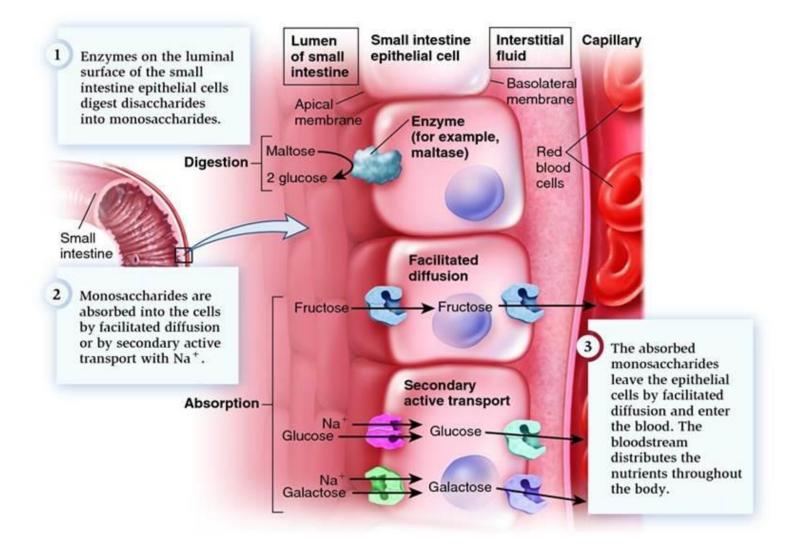


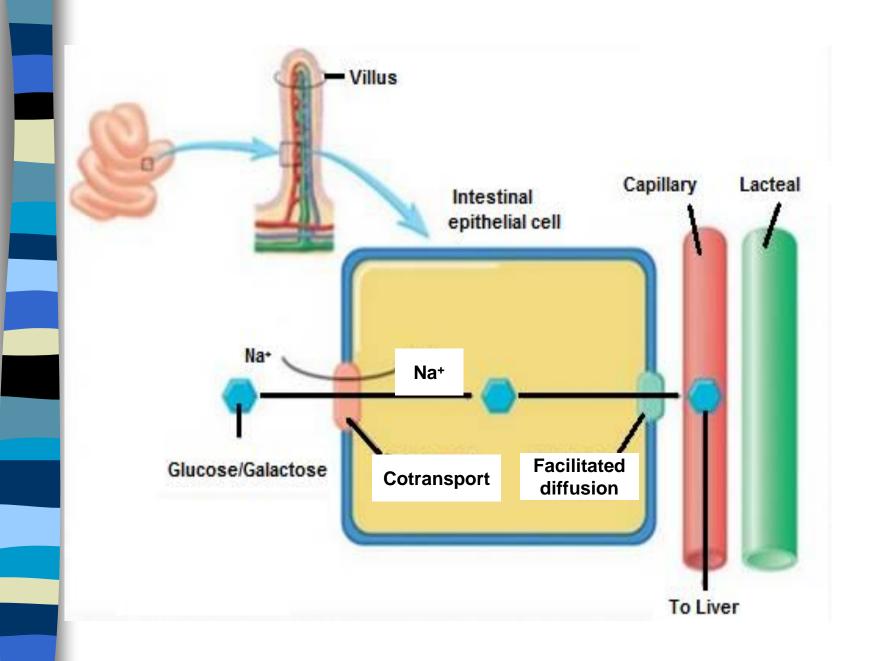
Absorption of Glucose

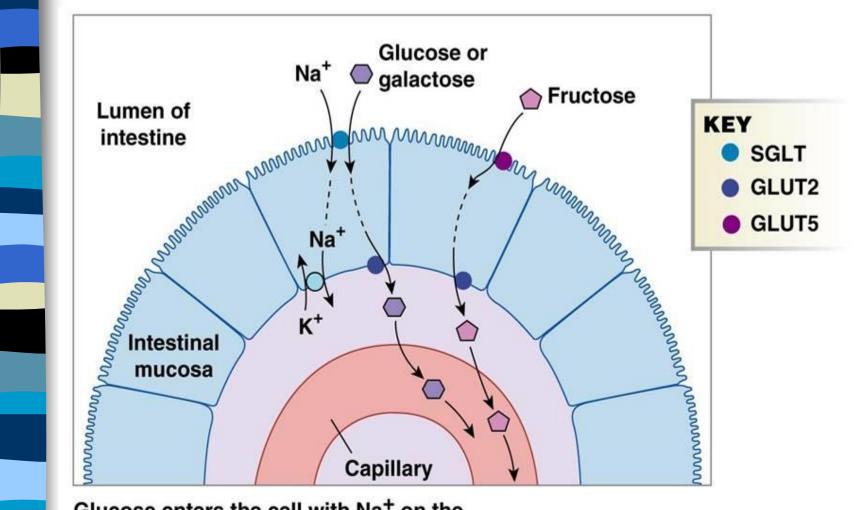


© 2011 Pearson Education, Inc.

Absorption of Monosaccharides



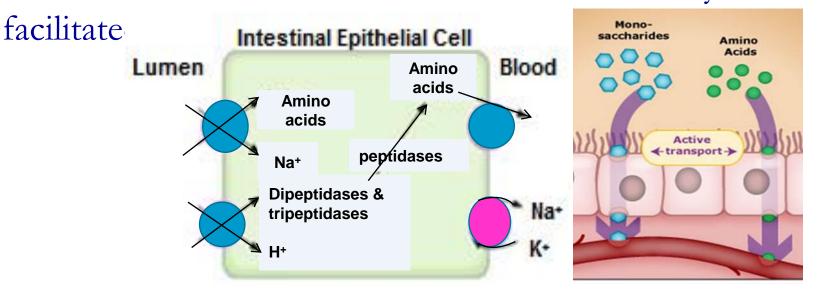




Glucose enters the cell with Na⁺ on the SGLT symporter and exits on GLUT2. Fructose enters on GLUT5 and exits on GLUT 2.

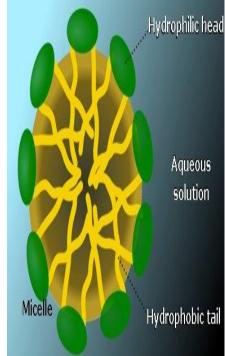
Absorption of Proteins

Proteins are absorbed in the form of dipeptides,
tripeptides, and a few free amino acids.
O D- AA are transported by passive diffusion.
O L- AA are transported by 2ry active transport.
O Di and tripeptides cross the brush border by active transport protein carrier. They are hydrolyzed by brush border and cytoplasmic oligopeptidases.
AA leaves the cell at the basolateral membrane by

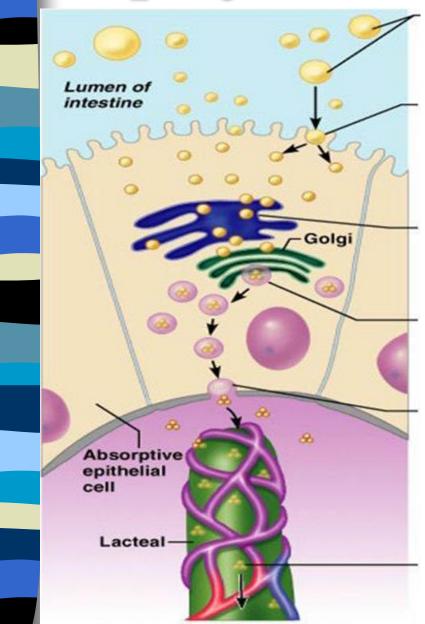


Absorption of Fats (Role of Micelles)

- Bile salt are amphipathic molecules, each composed of a sterol nucleus (fat-soluble) and a polar group (water-soluble).
- The polar parts are (-) charged, they allow the entire micelle globule to dissolve in the water of the digestive fluids.
- Micelles are small spherical, cylindrical globules composed of 20 to 40 molecules of bile salts.
- Long chain FA, MG, cholesterol and fat soluble vitamins are incorporated into the interior of the micelle.
- In the presence of micelles, about 97 % of the fat is absorbed in the small intestine.
- The micelles carry FA & MG to the luminal borders of the intestinal epithelial cells.



Steps of Fat Absorption



Fatty acids (FA) & monoglycerides (MG) associated with the micelles in lumen of intestine.

1) FA & MG leave micelles and enter epithelial cell by *diffusion*.

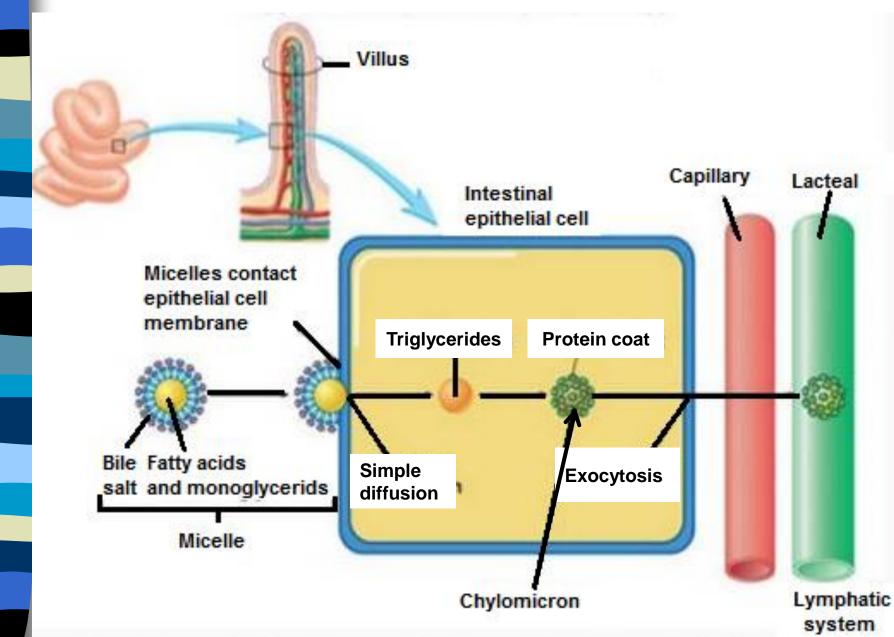
2) FA are used to synthesis triglycerides in agranular endoplasmic reticulum.

3) Fatty globules are combined with proteins to form *<u>chylomicrons</u>* within Golgi apparatus.

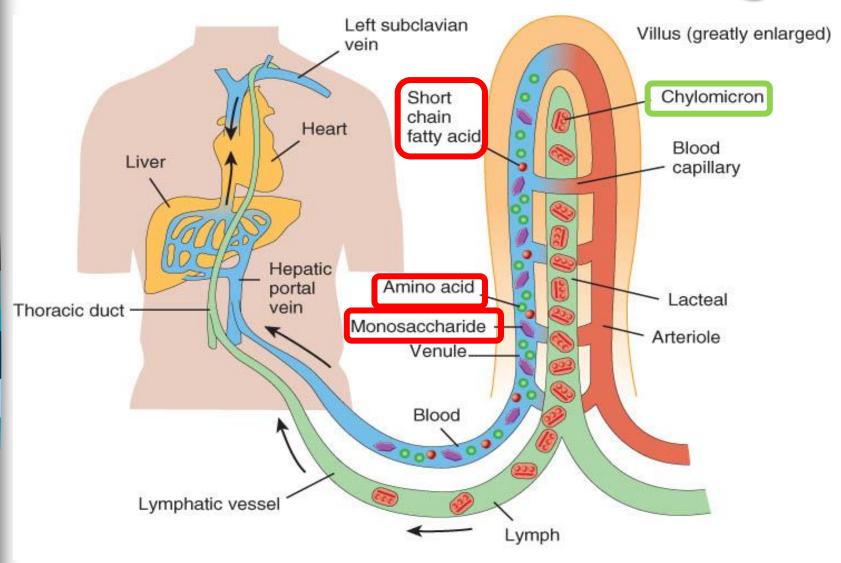
4) Vesicles containing chylomicrons leave epithelial cells by <u>*exocytosis*</u> and enter <u>*a lacteal*</u> (lymph capillary).

5) Lymph in the lacteal transport chylomicrons away from the intestine.

How Fat are Absorbed

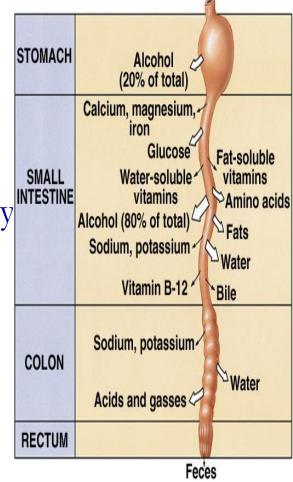


Where will the absorbed nutrients go?



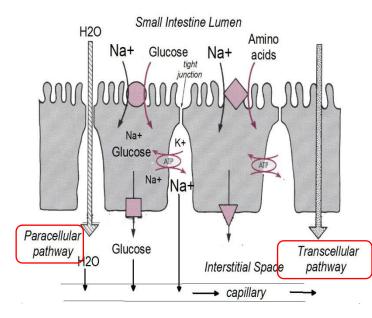
Absorption of Vitamins

- Fat-soluble vitamins (A, D, E, & K)are incorporated into micelles andabsorbed along with other lipids
- Most water-soluble vitamins (C, B₁, B₂, B₆, and folic acid) are absorbed by Na⁺-dependent cotransport mechanisms
- Vitamin B₁₂ is absorbed in the terminal part of ileum and requires intrinsic factor
 - Ileal resection \implies vitamin B_{12} deficiency.
 - Gastrectomy > loss of intrinsic factor
 pernicious anemia

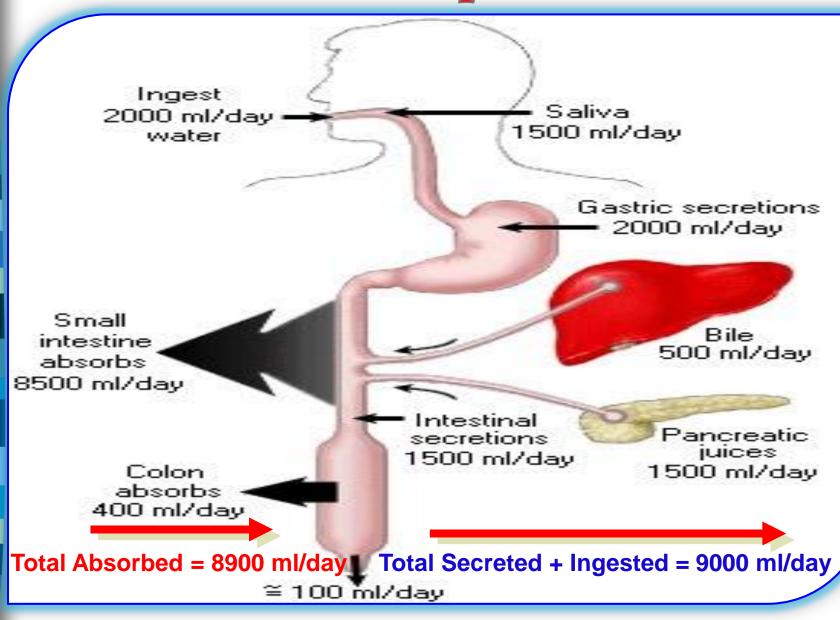


Absorption and secretion of electrolytes and water

- Electrolytes and H₂O cross intestinal epithelial cells by either transcellular or paracellular route
- The permeability of the tight junctions varies with the type of epithelium
 - Leaky epithelia are in the small intestine and gallbladder
 - A tight epithelium is in the colon



Water Absorption

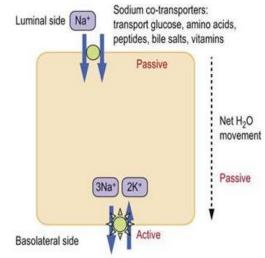


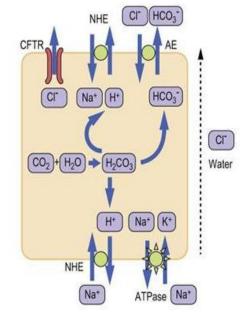
Absorption of Na⁺

- Na⁺ moves into the intestinal cells by the following mechanisms:
- 1) Passive diffusion.
- 2) Na⁺-glucose or Na⁺-amino acid co-transport.
- 3) Na⁺-Cl⁻ exchange.
- 4) Na⁺-H⁺ exchange.

The next step is osmosis of water into the paracellular spaces.

Aldosterone Greatly Enhances Na⁺ Absorption. This effect is especially important in the colon because it allows virtually no loss of NaCl and water.



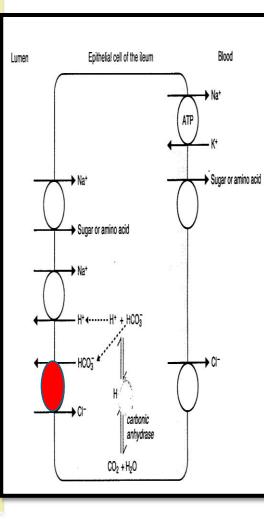


Absorption of Cl -

- Cl⁻ absorption accompanies Na⁺ absorption by the following mechanisms:
- Passive diffusion
- Na⁺-Cl⁻ cotransport
- Cl⁻-HCO₃⁻ exchange Absorption and secretion of K⁺
- K⁺ is absorbed in the small intestine by passive diffusion
- K⁺ secretion in the colon is stimulated by aldosterone
- Excessive loss of K⁺ in diarrheal fluids causes hypokalemia

Secretion of HCO₃⁻ in the lleum

- The epithelial cells on the surfaces of the villi in the ileum and large intestine have a special capability of secreting HCO₃⁻ in exchange for absorption of Cl⁻.
- This provides alkaline HCO₃that neutralize acid products formed by bacteria in the large intestine.



Ca ++ Absorption by Enterocytes

Plasma Ca⁺⁺→ ↑Parathyroid hormone 25-hydroxy-vitamin D3 ↓ 1,25 dihydroxy-vitamin D3

1,25 dihydroxy-vitamin D3 stimulates synthesis of Ca⁺⁺binding protein and Ca⁺⁺-ATPase in enterocytes

Hormonal control of absorption & secretion

Glucocorticoid = 1 absorption of H₂O & ions (small & large intestine)
 Somatostatin = 1 H₂O & ions absorption (ileum & colon)

Epinephrine = 1 NaCl absorption (ileum)

Aldosterone = 1 synthesis of Na⁺ channels (colon)

