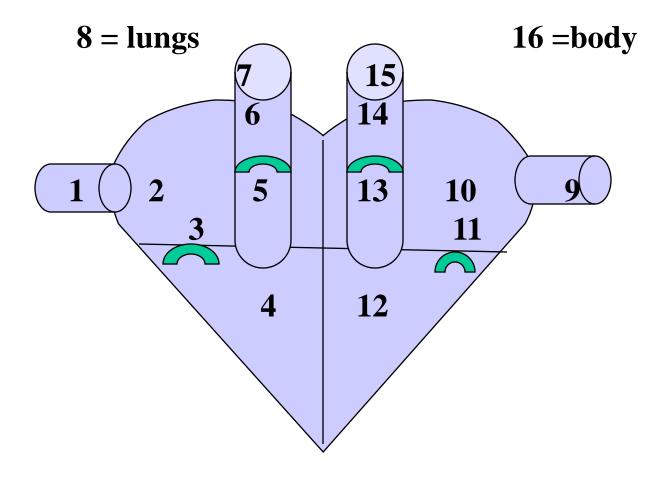
CV Topics

- 1) heart
- 2) blood vessels
- 4) heart tests
- 5) blood
- 6) blood tests
- 7) diseases

"Engineer's Heart"



Blood Flow thru Heart

| Oxygen-poor | Mixed | Oxygen-rich . |
|---------------------|----------------|--------------------------|
| | 8. Pul. Circ. | |
| 1. vena cava (2) | | 9. pul. <u>veins</u> (4) |
| 2. RA | | 10. LA |
| 3. tricuspid valve | | 11. bicuspid valve |
| 4. RV | | 12. LV |
| 5. pul. semi. valve | | 13. aortic semi. v. |
| 6. pulmonary trunk | C | 14. aorta |
| 7. pulmonary arter | <u>ies</u> (2) | 15. aortic art. (4) |

16. Sys. Circ.

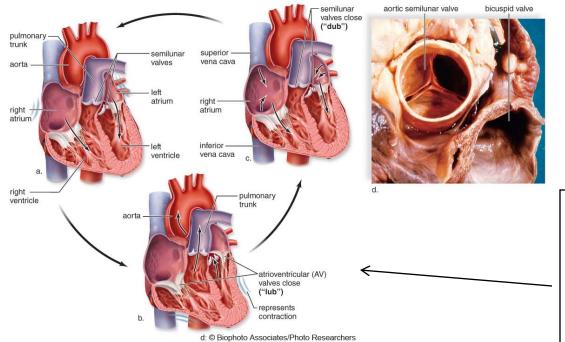
Cardiac Cycle

3 phases; 2 valves

#1 Diastole

#2 Atrial Systole

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semilunar valves: aortic bicuspid

#3 Ventricular Systole

Cardiac Phases

- 1) **Diastole:** (.4 / .8 sec)
 - ventricle relax (vent. fill-up) atria relax (vent. fill-up
- 2) Atrial Systole (.1/.8 sec)
 - ventricle relax (vent. fill-up)atria contract (eject to vent.)
- 3) Ventricular Systole: (.3 / .8 sec)
 - ventricle contract (eject to circuits) atria relax (accept from circuits)
- *1 cycle = 1 heart beat = .8 sec per beat based on HR = 75 bpm

Control of Heartbeat (2)

Atrial Systole

SA node: initiate elec. signal

- atrial muscles contract
- atria eject blood to 2 ventricles

Ventricular Systole

AV node, AV bundle, Bundle Branches, Purkinje fibers: conduct elec. signal

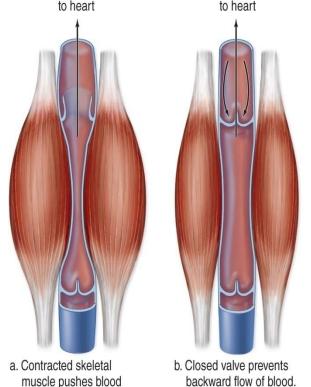
- ventricular muscles contract
- ventricles eject blood to 2 circuits

Diastole: no elec. signal

- atrial & ventricle muscles relax
- 4 chambers fill with blood

How does blood return to heart?





backward flow of blood.

- 1) heart pumps blood
- 2) lymph vessels return excess fluids
- 3) veins return blood to heart
 - a) skeletal muscle pump
 - b) one-way valves in veins
 - c) breathing
 - chest pressure changes

past open valve.

EKG Waves

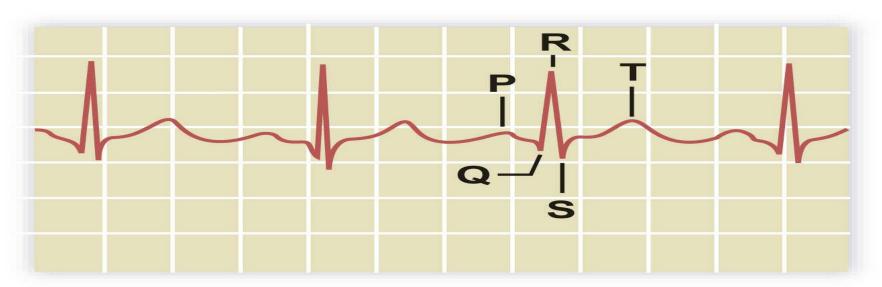
waves = electrical activities in the heart

3 types:

1) P wave: atrial activity

2) QRS wave: ventr. activity

3) T wave: ventricular end phase



b) A normal ECG recording

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BP Values

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| Table 5.1 | Normal Values for Adult Blood Pressure* |
|-----------|--|
| Ianie 2.1 | Notifial values for Addit blood Flessure |

| | Top Number (Systolic) | Bottom Number (Diastolic) |
|---|--------------------------|------------------------------|
| Hypotension | Less than 95 | Less than 50 |
| Normal | Below 120 | Below 80 |
| Prehypertension | 120-139 | 80-89 |
| Stage 1 hypertension | 140-159 | 90-99 |
| Stage 2 hypertension | 160 or more | 100 or more |
| Hypertensive crisis (emergency care needed) | Higher than 180 | Higher than 110 |

normal BP: 120/80

high BP (hypertension): 140/90

- normal: exercise

- abnormal: irreg. heart beat, red face

low BP (hypotension): 100/60

- normal: stand up suddenly
- abnormal: heavy blood loss, dizzy, faint, sluggish

What is blood?

Looks red; feels sticky.

5 liters of:

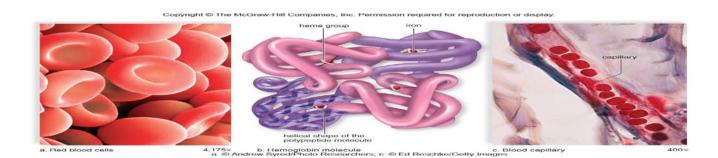
- 1) cells (formed elements) RBC, WBC, platelets
- 2) plasma (liquid) water, salts, plasma proteins

functions:

- 1) transport oxygen & nutrients to cells; carbon dioxide & waste from cells
- 2) defense against microscopic organisms, and blood loss (hemorrhage)
- 3) regulation body temperature, water-salt balance, and acid-base balance (pH 7.4)

RBC

- 1) hemoglobin (Hb):
- iron gives red color
- carry oxygen & carbon dioxide
- cannot release carbon monoxide->suffocate
- 2) no nucleus or mitochondria: not use oxygen
- 3) disc shape: more surface for gas diffusion easier to slip thru capillary





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Function

White Blood Cells Granular leukocytes



Phagocytize pathogens and cellular debris.

function: fight infection

- phagocytosis
- immune response

Eosinophils



Use granule contents to digest large pathogens, such as worms, and reduce inflammation.

Basophils



Promote blood flow to injured tissues and the inflammatory response.

compared to RBC: larger, have nucleus, no Hb, less numerous

Agranular leukocytes

Lymphocytes



Responsible for specific immunity; B cells produce antibodies: T cells destroy cancer and virus-infected cells.

Become macrophages that phagocytize pathogens and cellular debris.

Monocytes

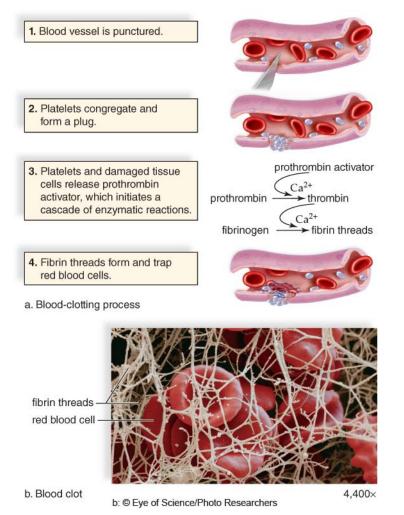


assignment:

Draw and describe the functions of each WBC

Platelets

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blood clot function: prevent blood loss

steps:

- 1) BV puncture
- 2) platelets form plug
- 3) calcium + plasma prothrombin -> thrombin
- 4) fibrin threads -> trap prevent RBC loss



Aspirin

wounds→ damaged tissues prod. thromboxane

→ ↑blood clots to reduce blood loss

unknown reasons, less healthy indiv., no wounds prod. thromboxane $\rightarrow \uparrow$ blood clots heart & brain BV (atherosclerosis) $\rightarrow \uparrow$ heart attack & strokes

aspirin inhibits thromboxane $\rightarrow \downarrow$ blood clots

- +: "blood thinner" to prevent atherosclerosis
- -: dosage? $\downarrow \rightarrow$ no effect; $\uparrow \rightarrow$ abdominal bleeding

Warfarin

surgery \rightarrow damaged tissues prod. thromboxane

→ ↑blood clots to reduce blood loss

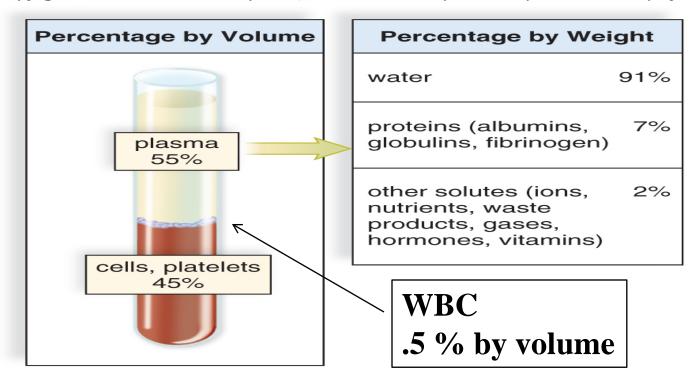
after surgery: warfarin prescribed for blood thinning

- +: "blood thinner" to prevent atherosclerosis effect canceled by Vitamin D
- -: \tag{dosage, long period (weeks, months)} problems:
 - 1) easier bleeding & bruises, longer recovery
 - 2) eventually ulcers & abdominal bleeding
 - 3) restricted foods high in Vit D, eg broccoli
 - 4) CV patients lifelong on warfarin

Blood Test - Hematocrit

- 1) blood is drawn, placed in tube, spun
- 2) 3 volume % calculated
 - WBC not shown, usu. .5%

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Hematocrit Usage

normal values:

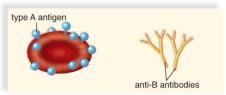
- 1) plasma (55%) transports materials
- 2) RBC (44%) transports $O_2 \& CO_2$
- 3) WBC (1%) defence

abnormal values:

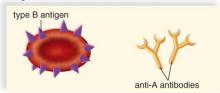
- 1) plasma > 55% & RBC < 44%
- "thin blood", anemia
- usu. tired, low energy, less alert
- 2) WBC >1%
- fighting infection; leukemia
- usu. tired, low energy, less alert

ABO Blood Types

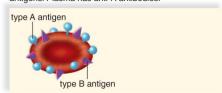
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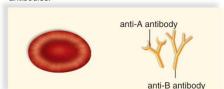
Type A blood. Red blood cells have type A surface antigens. Plasma has anti-B antibodies.



Type B blood. Red blood cells have type B surface antigens. Plasma has anti-A antibodies.



Type AB blood. Red blood cells have type A and type B surface antigens. Plasma has neither anti-A nor anti-B antibodies.



Type O blood. Red blood cells have neither type A nor type B surface antigens. Plasma has both anti-A and anti-B antibodies.

4 blood types: A, B, AB, O

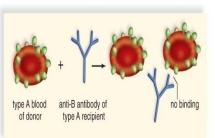
2 antigens: A, B

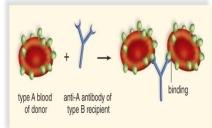
2 antibodies: anti-A, anti-B

transfusion: <u>compatible</u> no binding

not compatible binding (agglutinates)

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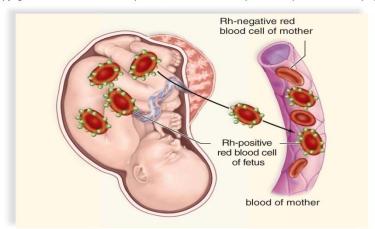


a. No agglutination

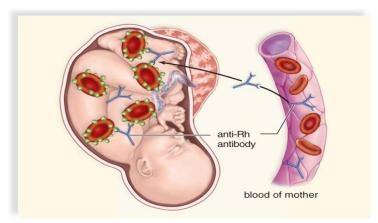
b. Agglutination

Rh Blood Type

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 Fetal Rh-positive red blood cells leak across placenta into mother's bloodstream.



 Mother forms anti-Rh antibodies that cross the placenta and attack fetal Rh-positive red blood cells.

antigen: Rh Rh+ father Rh- mother Rh+ child

anti-Rh
antibody
attacks Rh
antigen in
fetus ->
fetal anemia

CV Diseases

Describe the cause & effects of:

Heart & BV

- 1) angina pectoris (chest pain)
- 2) heart attack
- 3) atherosclerosis (plaque)
- 4) embolism (thrombo-embolism)
- 5) stroke

Blood

- 1) anemia
- 2) sickle cell anemia
- 3) leukemia
- 4) mononucleosis
- 5) hemophilia