**Cardiovascular system** (Chapters 13 and 14) **Page 1**

Cardiovascular system

 The organ system responsible for transportation of substances within

the body

 • Blood

 • Heart

 • Blood vessels

Heart function

 The heart pumps blood through two blood vessel loops

 • Pulmonary loop = Carries blood from heart to lungs and then back to

 the heart

 √ The smaller loop

 √ In the lungs, the blood picks up O2 and releases CO2

• Systemic loop = Carries blood from heart to all organs in body

 (except the lungs) and then back to heart

 √ The larger loop

 √ Delivers O2 and nutrients to cells; picks up CO2

Figs 13.10, 13.11, and 14.17; table 13.6

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Artery

 A blood vessel that carries blood away from the heart (toward another

organ)

 • The pulmonary arteries are the first arteries of the pulmonary loop

 • The aorta is the first artery of the systemic loop

Vein

 A blood vessel that carries blood away from an organ (back toward

heart)

 • The pulmonary veins are the last veins of the pulmonary loop

 • Superior vena cava and inferior vena cava are the last veins of the

 systemic loop

Fig 13.10

**Cardiovascular system** **Page 3**

Heart anatomy

 Heart is myocardium tissue (cardiac muscle) with four hollow

chambers.

• Left atrium and right atrium = smaller chambers that receive blood

 returning to the heart

 √ In sync with each other, each atrium fills with blood

 and then contracts (expelling blood from atrium into

 ventricle)

– Right atrium receives blood from the superior and

 inferior vena cavae (the end of the systemic

 loop)

 – Left atrium receives blood from the pulmonary

 veins (the end of the pulmonary loop)

 √ AV valves = one-way valve at exit of each atrium to prevent

 backflow of blood into atria

• Left ventricle and right ventricle = larger chambers that expel blood

 out of the heart

 √ After being filled by atrium, ventricles contract in sync to

 expel blood out of heart

 – Right ventricle expels blood into the pulmonary arteries

 (the beginning of the pulmonary loop)

 – Left ventricle expels blood into the aorta (the beginning

 of the systemic loop)

 √ Semilunar valves = one-way valve at exit of each ventricle to

 prevent backflow of blood into ventricles

Figs 13.10 and 13.11

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Cardiac cycle

The repeated series of events in the heart that results in pumping

blood

• Makes “lub-dup” sound of heartbeat

Figs 13.10 and 13.11

## Systole

 The contraction of a heart chamber

 • “Lub” sound = The AV valves shutting at beginning of ventricular

 systole

## Diastole

 The relaxation of a heart chamber

 • “Dup” sound = The semilunar valves shutting at beginning of

 ventricular diastole

• During ventricular diastole, the atria do two things: (1) refill themselves with blood returning to the heart, and then (2) contract to refill the ventricles with blood

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The conducting tissues of the heart

A network of cells in the heart that generate and conduct electrical signals to cause the atriums and ventricles to contact and relax at the proper times

 • Sinoatrial (SA) node = A conducting tissue node in the upper

 right atrium

√ It sends out signals to contract both atria simultaneously

√ The pacemaker for the heart (sets heart rate for entire heart)

 - Sympatheic stimulation increases the rate of the SA

 node and parasympathetic stimulation decreases the

 rate of the SA node

• Atrioventricular (AV) node = A conducting tissue node in the lower

 right atrium

√ It receives SA node signals, delays briefly, then sends a signal

 downward to contract both ventricles simultaneously

Fig 13.20

Ventricular fibrillations (cardiac arrest)

Rapid uncoordinated contractions of the ventricles; no effective pumping occurs so the circulation of blood in the body halts

• Can be caused by damage to the conducting tissues (such as occurs

 during a heart attack)

• Can also be caused if K+, Na+, or Ca2+ is outside its normal

 concentration range in body fluids

 √ The conducting tissues and the cardiac muscle use these three

 ions for depolarization and repolarization

 • Heart can be defibrillated by electric shock (from defibrillator

 device)

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Blood vessels

 The tubes that carry the blood

• Blood vessel types = arteries, veins, and capillaries

 • Lumen = the hollow space inside

 • Tunica interna = The innermost tissue (simple squamous epithelial

 tissue)

 √ Provides smooth surface for blood flow

 • Tunica media = The middle tissue (smooth muscle)

 √ Controls blood flow by changing the lumen size

 • Tunica externa = the outermost tissue (dense connective tissue)

 √ Protects and strengthens the blood vessel

Fig 13.26

 Arteries Veins

Lumen smaller larger

Tunica media thicker thinner

In systemic loop… carry red O2-rich carry blue O2-poor

 Blood to organs blood from organs

Small ones called… arterioles venules

Other features higher blood pressure one-way valves

Fig 13.26

**Cardiovascular system** **Page 7**

Capillaries

The smallest blood vessels

 • Capillaries are only found in organs

 √ They carry blood from arterioles to venules

• The only blood vessel type that exchanges substances with tissues (delivers O2 and nutrients and picks up CO2 and other cellular wastes)

√ The capillaries exchange substances with the tissue fluid (the watery liquid surrounding the cells in tissues)

√ The tissue fluid exchanges substances with the tissue cells

• The capillary wall is only the tunica interna (no tunica media or

tunica externa)

 √ The thinness of wall allows efficient passage of substances

 √ Small substances can diffuse directly through the wall

√ Large molecules and WBCs must squeeze through gaps between the wall cells

Figs 13.27, 13.28

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Heart rate

 The number of heart beats per minute

 • Average heart rate = 72 beats per minute

 • The autonomic nervous system is the major heart rate regulator

 √ ANS nerves synapse with SA node

 √ The sympathetic division increases heart rate

 √ The parasympathetic division decreases heart rate

 • Other factors can also affect heart rate:

 √ Women usually have higher heart rates than men

 √ Younger people usually have higher heart rates than older

 people

 √ The concentration of blood ions (Na+, K+, Ca2+) affects the

 heart rate

 - The heart can stop entirely if these ions are extremely

 outside their normal ranges

√ Exercise increases the heart rate while exercising, but being

 physically fit lowers the resting heart rate

Table 14.1

**Cardiovascular system** **Page 9**

Stroke volume

 The amount of blood expelled from each ventricle per beat

 • Average stroke volume = 70 mL per beat

 • Controlled by the heart’s force of contraction

 √ More force = Larger stroke volume

 • Also controlled by the end diastolic volume (the volume of blood that returns to the heart each beat)

 √ Higher end diastolic volume = Larger stroke volume (to expel

 the larger amount of returned blood)

 -"Starlings law of the heart"

Fig 14.2

**Cardiovascular system** **Page 10**

Cardiac output (CO)

 The amount of blood pumped out of each ventricle per minute

 • CO = heart rate x stroke volume

 • CO is about 5000 mL of blood pumped per minute for an average

 adult at rest

• The CO is the meaningful measurement of the body’s tissues being adequately supplied with O2

• The body will adjust the CO to meet the body's current oxygen need

√ The body can change the CO by changing the heart rate and/or the stroke volume

 √ Example: The body increases CO when we exercise by

 increasing HR and SV

√ If the need body’s need for oxygen has not changed but one of the CO factors (heart rate or stroke volume) changes, the heart automatically changes the other factor in the opposite direction so as to maintain a steady CO

Figs 14.5 and 14.21

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Blood pressure (BP)

 The blood’s outward force on the blood vessel walls

 • BP measured in arteries

 √ Units are mm Hg (millimeters of mercury)

 • Systolic pressure (BP during ventricular systole) is always higher

 than diastolic pressure (BP during ventricular diastole)

 √ Average BP = 120 / 80 (systolic over diastolic pressure)

 • BP decreases throughout systemic loop

√ Highest in arteries closest to heart

√ Essentially zero in veins at end of systemic loop

Figs 14.16 and 14.25

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The two factors that determine a person’s BP are their cardiac output and their peripheral resistance

 • The larger the CO the higher the BP

 • The larger the peripheral resistance the higher the BP

Peripheral resistance

The blood vessels’ resistance to blood flow

 • Changes in BP usually due to changes in peripheral resistance (not

 changes in CO)

 • High peripheral resistance = The heart must contract harder on the

 blood to make it flow = Stronger heart contraction causes higher BP

√ *And visa versa*

 • Peripheral resistance is controlled by

 √ Lumen size of arteries

– Smaller lumen = larger peripheral resistance

– Larger lumen = smaller peripheral resistance

 √ Total blood volume

– Larger blood volume = larger peripheral resistance

– Smaller blood volume = smaller peripheral resistance

Figs 14.25

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Kidneys are major regulators of blood pressure

• The kidneys can increase blood pressure by changing the blood

 volume

√ The kidneys increase the blood volume by adding sodium

 to the blood (which adds water by osmosis)

• The kidneys can also increase blood pressure by activating the blood

 protein Angiotensin II

√ Angiotensin II causes vasoconstriction throughout the entire

 cardiovascular system

Figs 14.12; table 14.4

Other factors affecting blood pressure:

• Sympathetic nervous system decreases lumen size in response to

 danger or drop in blood pressure

 • Salts in diet or atherosclerosis increase blood pressure

Table 14.4

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Disorders of the cardiovascular system:

Atherosclerosis (heart disease)

Arteries are partially clogged with plaque (cholesterol and fat deposits), especially in the coronary arteries (the arteries that supply heart muscle with O2)

• Increases peripheral resistance, which increases BP

• Treatments: Lifestyle changes (low fat diet, exercise), Cholesterol-

 lowering drugs, bypass surgery, surgical placement of a stent in

 clogged artery

Figs 13.31, 14.10

Chronic hypertension

 Long term blood pressure above 140/90

 • Usually caused by atherosclerosis

 • After several years, hypertension weakens the heart and arteries

Table 14.8

Congestive heart failure

The heart is too weak for adequate blood circulation

 • Symptoms: Fatigue, edema in legs, and fluid in lungs

 • Usual cause: Years of chronic hypertension

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Myocardial infarction (heart attack or coronary)

 Damage to heart muscle due to sudden blockage of coronary arteries

 • Usually the block is plaque and a thrombus together

 • Major symptom = angina pectoris (chest pain)

 • Requires immediate medical attention

Figs 13.31 and 14.18

Shock

 Hypoperfusion (inadequate flow) of blood to the organs due to too

little blood volume in the cardiovascular system

• The major symptoms include low BP, rapid heat rate, cold/pale skin,

 confusion and unconsciousness

• There are several causes of shock

 √ Hemorrhage (bleeding), burns, dehydration, and other loss of

 fluid from body

√ Anaphylatic shock = A severe allergic reaction to substances

 such as peanuts, bee stings, or penicillin

• Shock can be a fatal if not treated

√ Treatments involve restoring the blood volume by blood

 transfusion or by hypertonic IV solutions (“plasma

 expanders”)

Table 14.11