NAME: JOSEPH JESSICA NNEOMA

DEPARTMENT: MEDICINE AND SURGERY

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PHYSIOLOGY ASSIGNMENT

ASSIGNMENT

1. **Discuss the long term regulation of mean arterial blood pressure**

Mean arterial pressure (MAP) is a critical hemodynamic factor. The absence of proper regulation of MAP can have important pathophysiological consequences. Low MAP can cause inadequate blood flow to organs, syncope, and shock. On the other hand, elevated MAP contributes to increased oxygen demand by the heart, ventricular remodeling, vascular injury, end organ damage, and stroke. The arterial baroreflex system is a key controller of MAP and is a complex system. It can be considered in its entirety as an integrative physiological system or in terms of its regulated component parts.

Mean arterial pressure is regulated by changes in cardiac output and systemic vascular resistance.

2. **Write short notes on the following**

a) **Pulmonary circulation**

The pulmonary circulation is the portion of the circulatory system which carries deoxygenated blood away from the right ventricle, to the lungs, and returns oxygenated blood to the left atrium and ventricle of the heart. The term pulmonary circulation is readily paired and contrasted with the systemic circulation. The vessels of the pulmonary circulation are the pulmonary arteries and the pulmonary veins. A separate system known as the bronchial circulation supplies oxygenated blood to the tissue of the larger airways of the lungs.

b) **Circle of Willis**

The circle of Willis also called Willis' circle, loop of Willis, cerebral arterial circle, and Willis polygon is a circulatory anastomosis that supplies blood to the brain and surrounding structures. It is named after Thomas Willis, an English physician. The circle of Willis is a part of the cerebral circulation and is composed of the following arteries:

Anterior cerebral artery (left and right)

Anterior communicating artery

Internal carotid artery (left and right)

Posterior cerebral artery (left and right)

Posterior communicating artery (left and right)

The middle cerebral arteries, supplying the brain, are not considered part of the circle of Willis.

c) **Splanchnic circulation**

The splanchnic circulation is composed of the blood flow originating from the celiac, superior mesenteric, and inferior mesenteric arteries and is distributed to all abdominal viscera. The splanchnic circulation receives over 25% of the cardiac output and contains a similar percentage of the total blood volume under normal conditions. Thus, the splanchnic circulation can act as a site of regulation of distribution of cardiac output and also as a blood reservoir.

d) **Coronary circulation**

Coronary circulation is the circulation of blood in the blood vessels that supply the heart muscle. Coronary arteries supply oxygenated blood to the heart muscle, and cardiac veins drain away the blood once it has been deoxygenated. Because the rest of the body, and most especially the brain, needs a steady supply of oxygenated blood that is free of all but the slightest interruptions, the heart is required to function continuously. Therefore its circulation is of major importance not only to its own tissues but to the entire body and even the level of consciousness of the brain from moment to moment. Interruptions of coronary circulation quickly cause heart attacks, in which the heart muscle is damaged by oxygen starvation.

e) **Cutaneous circulation**

The cutaneous circulation is the circulation and blood supply of the skin. The skin is not a very metabolically active tissue and has relatively small energy requirements, so its blood supply is different to that of other tissues. Some of the circulating blood volume in the skin will flow through will flow through arteriovenous anastomoses instead of capillaries. Arteriovenous anastomoses serve a role in temperature regulation.

3. **Discuss the cardiovascular adjustment that occurs during exercise.**

The integrated response to severe exercise involves fourfold to fivefold increases in cardiac output, which are due primarily to increases in cardiac rate and to a lesser extent to augmentation of stroke volume. The increase in stroke volume is partly due to an increase in end-diastolic cardiac size (Frank-Starling mechanism) and secondarily due to a reduction in end-systolic cardiac size. The full role of the Frank-Starling mechanism is masked by the concomitant tachycardia. The reduction in end-systolic dimensions can be related to increased contractility, mediated by beta adrenergic stimulation. Beta adrenergic blockade prevents the inotropic response, the decrease in end-systolic dimensions, and approximately 50% of the tachycardia of exercise. The enhanced cardiac output is distributed preferentially to the exercising muscles including the heart. Blood flow to the heart increases fourfold to fivefold as well, mainly reflecting the augmented metabolic requirements of the myocardium due to near maximal increases in cardiac rate and contractility. Blood flow to the inactive viscera (e.g., kidney and gastrointestinal tract) is maintained during severe exercise in the normal dog. It is suggested that local autoregulatory mechanisms are responsible for maintained visceral flow in the face of neural and hormonal autonomic drive, which acts to constrict renal and mesenteric vessels and to reduce blood flow. However, in the presence of circulatory impairment, where oxygen delivery to the exercising muscles is impaired as occurs to complete heart block where normal heart rate increases during exercise are prevented, or in congestive right heart failure, where normal stroke volume increases during exercise are impaired, or in the presence of severe anaemia, where oxygen-carrying capacity of the blood is limited, visceral blood flows are reduced drastically and blood is diverted to the exercising musculature. Thus, visceral flow is normally maintained during severe exercise as long as all other compensatory mechanisms remain intact. However, when any other compensatory mechanism is disrupted (even the elimination of splenic reserve in the dog), reduction and diversion of visceral flow occur.