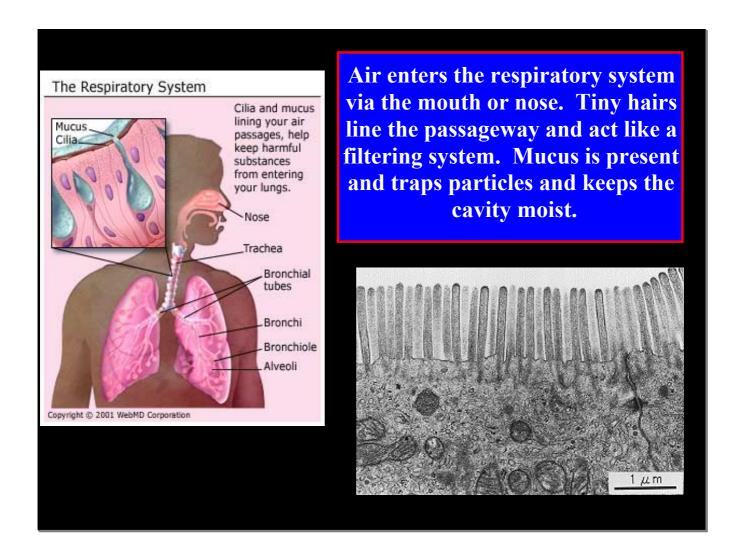
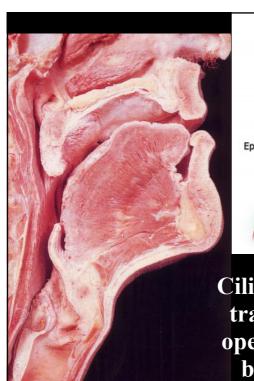


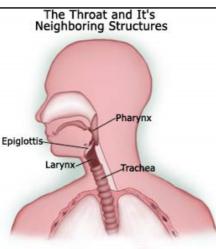


## Respiration

The Earth's atmoshphere is made up of 78% nitrogen, 21% oxygen, and the remaining 1% is made up of trace gases such as carbon dioxide.

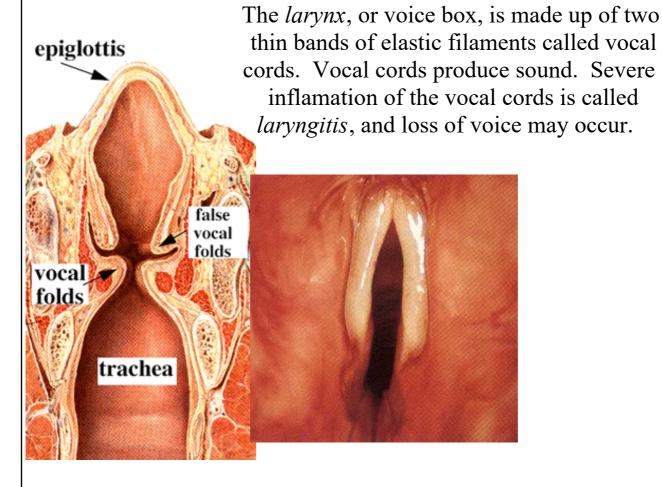


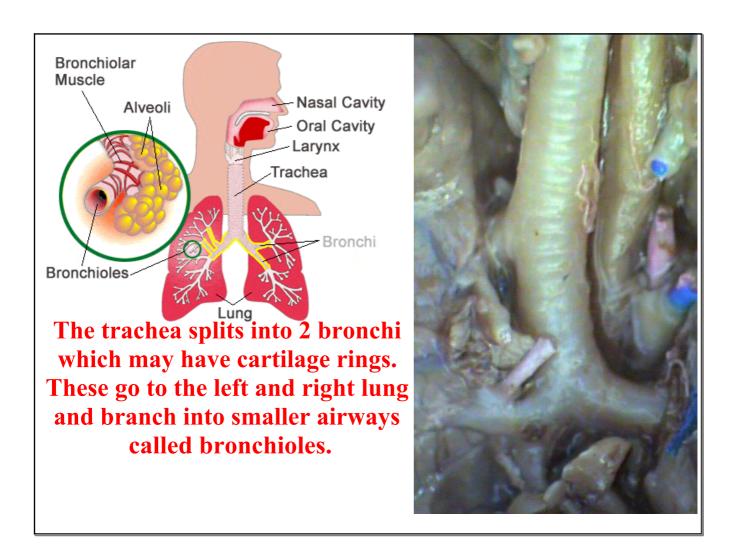


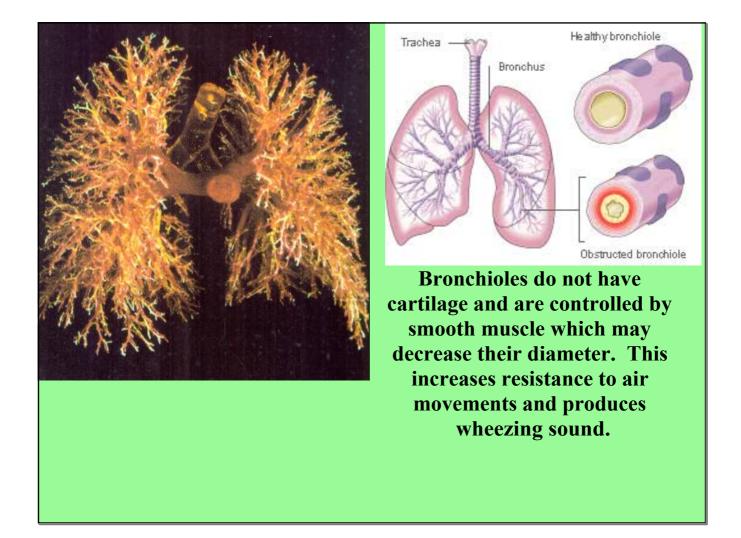


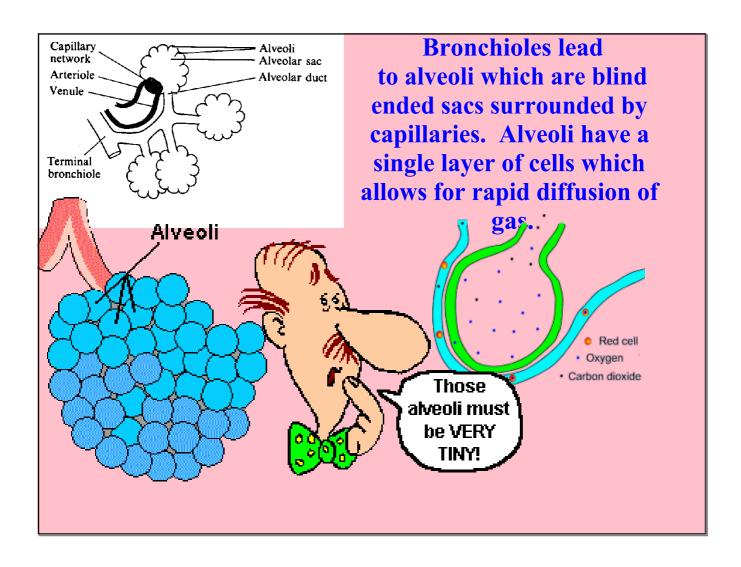
The pharynx is a passageway for both food and air. The pharynx branches into the trachea (windpipe) and esophagus, the passageway for food.

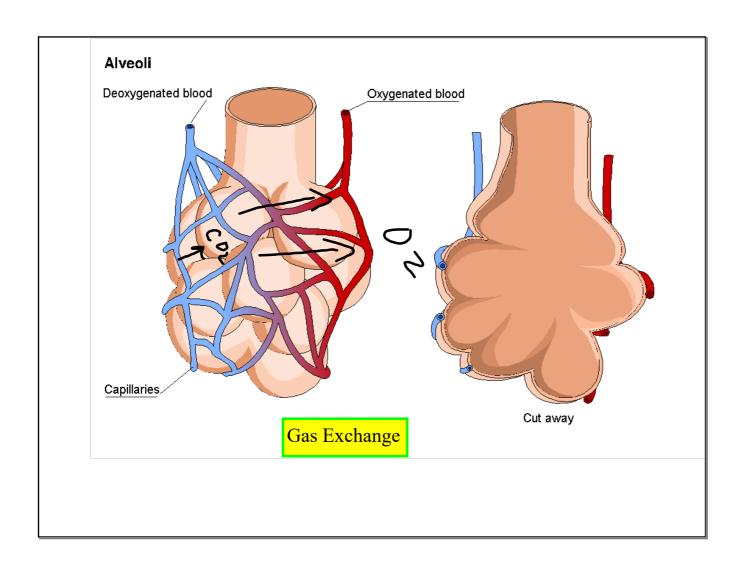
Cilia and mucus line and protect the trachea. The epiglottis covers the opening of the trachea when food is being swallowed. This prevents food or drink from entering the trachea.

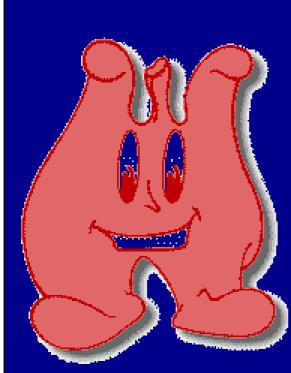












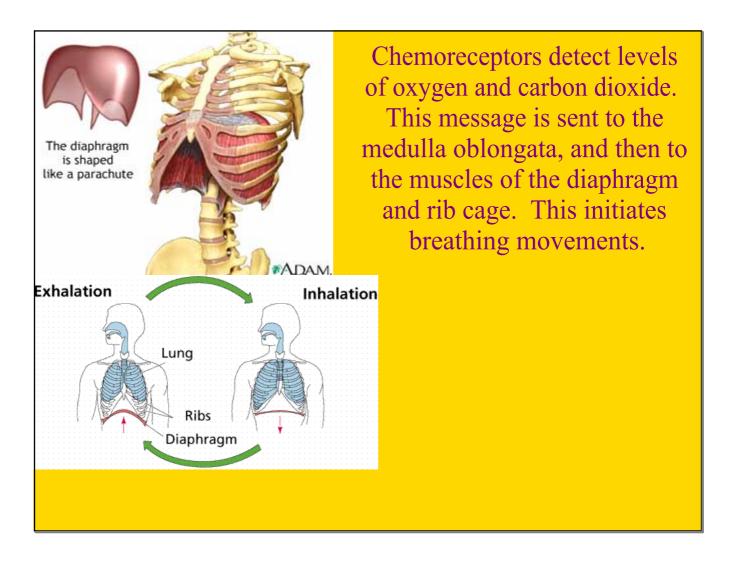
Lungs are surrounded by a thin membrane called the plural membrane. It prevents friction between the lungs and the chest cavity. Build up of fluid in the chest cavity and inflamation of the plural cavity called pleurisy. It is caused by 2 membranes rubbing together. Expiration is easier but inspiration is much more difficult.

#### Regulation of Breathing Movements



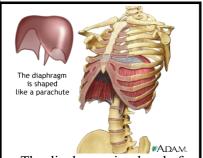
Breathing movements are controlled by a part of the brain called the *medulla oblongata*.



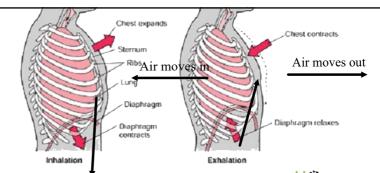


### Breathing movements

Gas moves from an area of high pressure to an area of low pressure



The diaphragm is a band of muscles that seperate the chest cavity from the abdominal cavity. It regulates the pressure in the chest.



When the diaphragm contracts, it flattens and pulls downward. As chest volume increases, pressure decreases.

Atmospheric Pleural pressure

When the diaphragm relaxes, it returns to dome shape. As chest volume decreases, pressure increases.

Atmospheric Pleural pressure

Differences in pressure between the atmosphere and chest (pleural) determines the movement of gases in and out.

Inspiration, or inhalation-diaphragm contracts and pulls downward, intercostal muscles pull the ribs outward, chest volume is increased which decreases air pressure, air moves into the lungs.

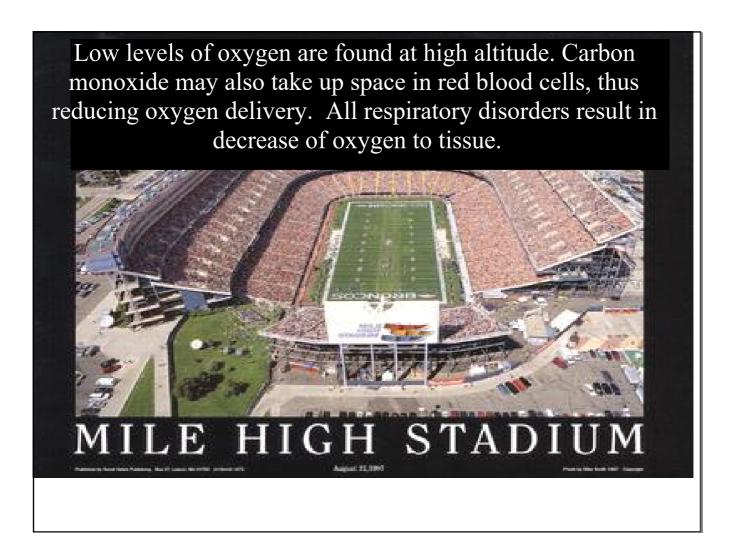
Expiration, or exhalation-diaphragm relaxes and returns to its dome shape, intercostal muscles allow the ribs to move inward, chest volume decreases, air pressure increases, air moves out of the lungs.

A person may control their breathing to some extent, but as carbon dioxide levels build up, the medulla oblongata takes over and forces breathing.

Carotid and aortic bodies are receptors that monitor levels of carbon dioxide. These receptors help keep a person breathing normally.



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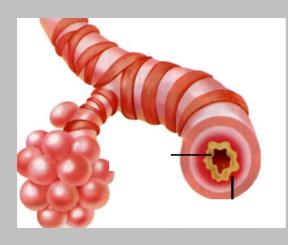


# Carbon monoxide

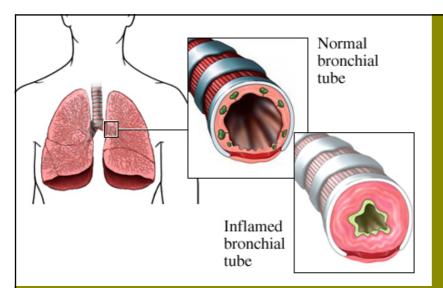
Results from combustion with an inadequate supply of oxygen.

Carbon monoxide (CO)
competes with oxygen for the
active site on the hemoglobin
molecule. CO gains faster
access. As CO binds, less
oxygen is delivered to the
tissues. Carbon dioxide levels
tend not to increase, so
chemoreceptors are late to react
to the low oxygen levels.

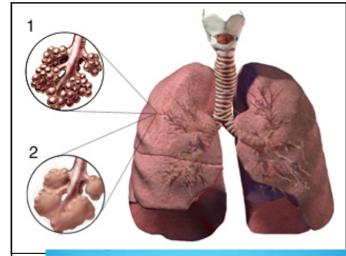
Bronchitis is caused by a bacterial or viral infection, which causes mucus secretions to increase. As a result, the airways become narrow, which limits breathing. Mostly occurs in the bronchioles.





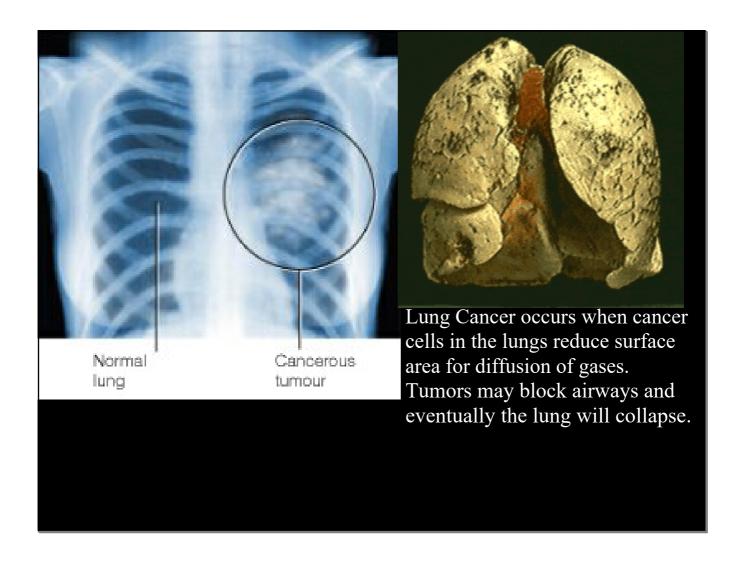


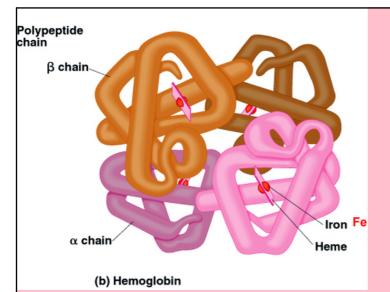
Inflammation of the bronchioles makes it more difficult to exhale than inhale. Allergic reactions cause asthma attacks because they cause inflammation of tissue.





Emphysema is associated with chronic, or recurring bronchitis. Air pressure builds up in the lungs and stretches the alveoli. If they rupture, there is less surface area for gas exchange. As a result, there is less oxygen in the body, and a person breathes faster to make up for low levels of oxygen. As the alveoli rupture, capillaries are destroyed and scar tissue forms. This makes the lungs less elastic and breathing more difficult. Heart rate may also increase to accommodate low oxygen levels.





Oxygen Transport
Oxygen moves from the atmosphere to the alveoli.
With the help of hemoglobin, oxygen can be carried in large amounts.
Hemoglobin does not give up much oxygen until it reaches tissues where the level is low. This is when diffusion takes place.

#### Carbon Dioxide Transport

9 % of carbon dioxide is carried in the plasma. 27% of the body's carbon dioxide combines with hemoglobin to form carboninohemoglobin. The remaining 64% combines with water in the plasma to form Carbonic acid.

Hemoglobin is essential to ensure low levels of CO2 in the blood. As it binds with CO2, and some CO2 binds with water, partial pressure of CO2 remains low. This allows diffusion to continue into the blood. If this mechanism did not work properly, there would be an overaccumulation of CO2 in the blood and diffusion of CO2 would occur back into body cells.

The second function of hemoglobin is to act as a buffer. When CO2 and water form carbonic acid the Ph level of the blood lowers. This can be dangerous to blood vessels and tissues and therefore must be buffered. Carbonic acid is unstable and dissociates into bicarbonate ions and hydrogen ions. Once oxygen is dislodged from hemoglobin, the hydrogen ions attach to form reduced hemoglobin. This ensures Ph levels remain stable as the bicarbonate ions and hydrogen ions do not recombine until they reach the lungs. After reaching the lungs, oxygen dislodges the hydrogen ions which bind with bicarbonate ions to reform CO2. CO2 can now be safely exhaled from the body.