BODY FLUID AND OSMOLARITY AND OVERVIEW OF RESPIRATORY SYSTEM



Body fluid volume :

Dilution method :

 A known amount of substance is given whose volume of distribution is the body fluid compartment of interest

The substance that is given according to the fluid compartment :

- TBE : isotopic water :means contain other type of H isotopes
- plasma :Evans blue
- ECF : mannitol

Dilution method :

2) Substance is allowed to equilibrate

3) The concentration of substance is measured in the plasma and the volume of distribution is calculated

Volume = amount

concentration Volume : volume of distribution ' Amount : amount of the substance Concentration : concentration of the substance in plasma



Determines volumes of specific body fluid compartments

TBW : through dilution method usually isotopic water

PLASMA : through dilution method usually Evans blue dye

• ECF : through dilution method : usually mannitol



Measurements

Measuring blood volume

> Total blood volume =
$$\frac{\text{plasma volume}}{1-\text{hematocrit}}$$

Example:

```
Plasma volume=3 liters, hematocrit =0.40
\frac{3}{(1-0.4)}= 5 liters
```

Total blood volume Hematocrit (Hct) or Packed cell volume (PCV)

- Blood volume = The blood cells 3% of body weight + blood plasma 5% of body weight =8% of our body weight expressed in kg
- 8% × 70kg = to 5.6L = 5.6 kg
- Total Blood Volume (TBV) = Plasma Volume / 1-Hematocrit (PCV)
- Total Blood Volume (TBV)= 2.8 / 1- 45%= 5.6L
- Blood Plasma =55% × 5.6L
- Blood cell $=45\% \times 5.6L$

Hematocrit : is the percentage of RBCS

There is 2 ways to measure blood volume



1) Move an amount of blood in a test tube contains anticoagulant often heparin

2) Take a sample of the test tube in small capillary



Sample Placed in

Centrifuge

Whole Blood Sample Blood Sample That Has Been Centrifuged 3) But the sample in the centrifugation (which runs around it self 1000/min)

4) The blood is separated into 2 parts Pass the hematocrit paper to measure the percentage

Blood Transfusion

Plasma White cells-Red cells

Whole Blood transfusion increases a patient's hemoglobin and iron levels

A patient suffering from an iron deficiency or anemia. Iron deficiency cause lack of hemoglobin transport which carries the oxygen

Plasma is the liquid part of the body's blood. Plasma transfusions are used for patients with liver failure, severe infections, and serious burns.

Platelets are a component of blood that stops the body from bleeding.

Patients who have illnesses like leukemia and chemotherapy treatment must get regular platelet transfusions to stay healthy. Anemia : reduce the number account of whole RBCs in whole blood volume

Transfusion : transfer of blood from a person to another through IV drip to increase patient hemoglobin and then increase iron level

The normal RBCs percentage according of your blood is 45% more or less of this value refers to problemssuppose that the PCV =15% that refers to reduction of the amount of RBCs in whole blood volume and often called anemia

Sometimes no need for whole blood transfusion (not all blood components are needed) that's depends on pathological cases

Some cases require only plasma transfusion :

- 1. Liver defects The liver function to produce many types of plasma proteins (albumin and globin)
- 2. sever infections due to deficiency of important proteins

Some cases require only platelets transfusion : Platelets : has a very important function in positive feedback (coagulating) 1) Leukemia : cancer of bone marrow or lymphocyte



Blood Donation



One pint (blood unit)= 500ml or half a court (one quart = 2 pints)

UK AND US = PINTS



In this example you got 10pints in your blood .



So, when you donate 1 pint you giving less than 1/10 of your blood body.



If you gave twice that you will lose a liter of blood, half a court of blood then you need a medical attention.



So, the person who less than 100 pounds doesn't give blood. In other word when you donate blood you given 10% or less Note : a person with 100 pound which almost 50 kg can't give !! Because : 50 * 8% = 4 L And 500ml/4000ml = 12% And that means he donates more than 10% of his blood body



Polycythemia



Primary polycythemia very rare: slow growing blood cancer such as polycythemia vera



Exposure to low oxygen 1. living in high attitudes

2. Pulmonary disease

Marchine Spectrum Provide and all the second strategy and and the

	1 IA																	18 VIIIA
1	1 H 1.00797	2 IIA	_			Peri	iodi	c Ta	ble				13 IIIA	14 IVA	15 VA	16 VIA	17 VIIA	2 He 4.0026
2	3 Li 6.939	4 Be 9.0122											5 B 10.811	6 C 120112	7 N 14.0067	8 15.9994	9 F 18.9984	10 Ne 20.179
3	11 Na 22.9898	12 Mg 24.305	3 IIIB	4 IVB	5 VB	6 VIB	VIIB	8	9 VIIIB	10	11 IB	12 IIB	13 Al 269815	14 Si 28.086	15 P 30.9738	16 S 32.064	17 Cl 35.453	18 Ar 39.948
4	19 K 39.102	20 Ca 40.08	21 Sc 44.956	22 Ti 47.90	23 V 50.942	24 Cr 51996	25 Mn 549380	26 Fe 55.847	27 Co 589332	28 Ni 58.71	29 Cu 63.54	30 Zn 65.37	31 Ga 65.37	32 Ge 72.59	33 As 74.9216	34 Se 78.96	35 Br 79.909	36 Kr 83.80
5	37 Rb 85.47	38 Sr 87.62	39 Y 88.905	40 Zr 91.22	41 Nb 92906	42 Mo 9594	43 Tc [99]	44 Ru 101.07	45 Rh 102.905	46 Pd 106.4	47 Ag 107.870	48 Cd 112.40	49 In 114.82	50 Sn 118.69	51 Sb 121.75	52 Te 127.60	53 I 126.904	54 Xe 131.30
6	55 Cs 132905	56 Ba 137.34	57 La 13891	72 Hf 178.49	73 Ta 180.948	74 W 183.85	75 Re 186.2	76 Os 1902	77 Ir 192.2	78 Pt 195.09	79 Au 196.967	80 Hg 200.59	81 TI 204.37	82 Pb 207.19	83 Bi 208.980	84 Po [210]	85 At [210]	86 Rn [222]
7	87 Fr [223]	88 Ra [226]	89 Ac [227]	104 Ku [260]	105	106	107	108	109									

How much 1 mole of salt molecules weigh?

First, you need to find the molar mass of NaCl. To do that, just add up the masses of Na and Cl:

22.989 g/mol + 35.453 g/mol = 58.442 g/mol. So 1 mole of table salt weights 58.442 grams

Tonicity

- The Mole (Avogadro's Number) = 6.022 x 1023
- 1 dozen cookies = 12 cookies
- 1 mole of cookies = 6.02 X 1023 cookies





The unit we used to quantify the tonicity is osmoles. osmole is a combination of two words osmosis and moles



For each milli osmo of solute particle difference between inside and outside will create an osmotic pressure of 19.3 millimeters of mercury.



282-300mosmol/L times 19.3/mosmol/L



it will create 5443mmHg osmotic pressure which is very high

	Plasma (m0sm/L H ₂ 0)	Interstitial (mOsm/L H ₂ O)	Intracellular (mOsm/L H	20)
Na* K ⁺ Ca ⁺⁺ Mg ⁺	142 4.2 1.3 0.8	139 4.0 1.2 0.7	14 140 0 20	Osmatic pressure :
CI^{-} HCO ₃ ⁻ HPO ₄ ⁻ , H ₂ PO ₄ ⁻ SO ₄ ⁻	108 24 2 0.5	108 28.3 2 0.5	4 10 11 1	the affect of each solute particle which create the
Phosphocreatine Carnosine Amino acids Creatine Lactate	2 0.2 1.2	2 0.2 1.2	45 14 8 9 1.5	movement from one compartment to another (pressure
Hexose monophosphate Glucose Protein Urea Others	5.6 1.2 4 4.8	5.6 0.2 4 3.9	3.7 4 4 10	difference) The values of
Total mOsm/L Corrected osmolar activity (mOsm/L) Total osmotic pressure at 37°C (mm Hg)	301.8 282.0 300 5443	300.8 281.0 5423	301.2 281.0 5423	solutes on each fluid tonicity are almost the same

The affects of these solute concentration results in osmotic pressure (different from one fluid to another)

Total osmatic pressure = tonicity volume x concentration difference(19.3) TOP for plasma = $282 \times 19.3 = 5443$ TOP for Interstitial fluid = $281 \times 19.3 = 5423$ TOP for ICF = $281 \times 19.3 = 5423$

Oncotic or colloid osmotic pressure

- blood plasma likes to any other extracellular fluid except protein. The total amount of solute particles is small higher than intra and extra which make it hypertonic. (high solute concentration)
- The difference will be around 20 millimeter of mercury (albumin)
 5443 5423 = 20 mmHg
- Which means that the blood plasma is about 20 mmHg higher than anywhere else and this is called osmotic pressure or colloid pressure

Hydrostatic pressure :

- 1) More water molecules inside and less solutes
- 2) Causing movement of water to out side

Oncotic pressure :

- 1) More solute inside the capillary than out side
- 2) Causing movement of water t the inside



Classified according the normal Mosm/L values

Osmolarity of the solutions

If the extracellular fluid becomes hypertonic the water will be drawn out and it will cause crenation (burst) (unhappy cell)

if the extracellular fluid is hypotonic the water will be drawn in and it will cause lysis (unhappy cell)

Here in the picture as shown a red blood cell surrounded by isotonic solution which means the same proportion of water inside and outside cells; (this is called a happy cell)

The question now. Is how to express quantitatively how hypo or hyper ?

If it is hyper; it will be adjusted by hypo solutions and if it is hypo it will be adjusted by salt.

Hypotonic : solution has high water concentration according to the solutes Hypertonic : solution has high solutes concentration according to th water



(hypertonic)

is (hypotonic)



AWESOME!

ISOTONIC VS HYPOTONIC VS HYPERTONIC

Isotonic solutions are solutions having equal osmotic pressures

Have equal solute concentrations

Isotonic environments

show no effect on

cells

Isotonic solutions are

not helpful in food

preservation

Hypotonic solutions are solutions having lower osmotic pressures

> Have a low concentration

Hypotonic environments cause cells to swell

Hypotonic solutions are not helpful in food preservation

Hypertonic solutions are solutions having comparatively higher osmotic pressures

> Have a high concentration

Hypertonic environments cause cells to shrink

Hypertonic solutions are helpful in food preservation

Visit www.pediaa.com





Electrophoresis

Composition of blood plasma





- The tonicity of the isotonic solution
 282-300
- Our bodies are isotonic

plasma has more proteins than other fluids in the body which create a slightly difference in osmatic pressure

Each difference in mmole of solutes from out side to the inside create an osmatic pressure =19.3 mmHg

Total osmatic pressure in plasma = 19.3 x 282 = 5443 Which differs from other fluids about 20 and this difference because of plasma proteins

The difference between 2 osmatic pressure such as plasma and other fluids = 20 which equal to oncotic pressure

- The ECF is a little hypertonic more than ICF because of plasma proteins so always there is a tendency to move from inside ICF to outside
- The total osmatic pressure of plasma is higher than other fluids because the amount of proteins





The albumin protein is the mainly cause of oncotic pressure 70%-90% because of its law weight Also, globulins but not as albumin Electrophoresis : is device has a gel layer which attached to 2 poles (+,-)

- When running this device, the components of plasma with + charge will move toward the poles and the one with charges like plasma proteins will move toward the + poles
- This device also separates articles according to their weight the one with the least weight will be separated first and in plasma proteins albumin is the smallest weight of them

В

This diagram showing the speed of protein separation from plasma through electrophoresis

electrophoresis

According to the charge and weight





		STORE CALL COLOR PORT PROVIDE					
	Tonicit	y vs Osmolarity					
	More Information Online WWW.DIFFERENCEBETWEEN.COM						
	Tonicity	Osmolarity					
DEFINITION	Tonicity is the measure of the osmotic pressure gradient by means of water potential of two solutions separated by a seminermeable	Osmolarity or osmotic concentration is the measure of solute concentration given by the unit osmoles of					
	membrane.	solutes per litre of solution.					
TYPE OF SOLUTE	Measures only the concentration of non- penetrating solutes through a semipermeable	Measures the total concentration of penetrating and non- penetrating solutes.					
CLASSIFICATION	Hypertonic solutions,	lsosmotic, hyperosmoti					
OF SOLUTIONS	isotonic solutions and isotonic solutions.	and hypoosmotic.					

If you add 4millimole of KCL to 1 L of water you will end up with 8 mosm/L

KCl is an ionic compound Ionic compound dissociate in water so

Tonicity :

- 1) Calculate the moles of each ion :
- Moles of the compound x atoms number
- K+ = 1 atom x 4 mmole =4
- Cl-= 1 atom x 4 mmole =4

2) Gather the number of mole for each ions :

• 4 + 4 = 8 mosm/L = tonicity

If we add 2 millimole cacl2 into 1 L of water, you will end up with 6 mosm/L

CaCl2 is an ionic compound lonic compound dissociate in water so Tonicity :

- 1) Calculate the moles of each ion :
- Moles of the compound x atoms number
- Ca2+ = 1 atom x 2 mmole=2
- Cl-= 2 atom x 2 mmole = 4

2) Gather the number of mole for each ions :

• 2 + 4 = 6 mosm/L = tonicity

If you add 5 millimole of glucose into water, it will stay as one particle so it will end up with 5 mosm/L

The covalent compound wont dissociated in water so the tonicity = 5 mosm/L in glucose

How to quantify numerically the tonicity of solution?

How to compute the total osmolarity of 150 mM Nacl solution?

150 mM solution is equal to 0.15 M solution .

First of all, what we mean by this question is the total of solute particle in a Liter of solution.

If you take 150 mmole of Nacl molecule in each salt particle you will multiply times two since it will break up into 150moml Na and 150mmol cl for the total of 300 mosmol/L

mole/L of solution or M: Molarity - it is the # molecules of EACH solute found in a solution per unit of volume of solution. It is expressed in mole/ liter of solution

mole/kg of solvent or m: Molality - it is the # molecules of EACH solute found in a solution per unit of weight of solvent. It is expressed in mole / 1000g of solvent



Physiological saline is 0.9% NaCl. This means that 100 ml's of physiological saline contains 0.9 g of NaCl. One liter of physiological saline must contain 9 g of NaCl. We can determine the molarity of a physiological saline solution by dividing 9 g by 58 g... since we have 9 g of NaCl in a liter of physiological saline, but we have 58 grams of NaCl in a mole of NaCl. When we divide 9 g by 58 g, we find that physiological saline contains 0.154 moles of NaCl per liter. That means that physiological saline (0.9% NaCl) has a molarity of 0.154 molar. We might express this as 0.154 M... or 154 millimolar (154 mM).



A 0.9% NaCl and a 0.154 M NaCl solution are the same thing. They are physiologic isotonic solution

How to quantify numerically the tonicity of solution?

• A 3% sodium chloride (NaCl) solution is hypertonic and when infused intravenously would increase extracellular fluid volume and osmolarity, thereby causing water to flow out of the cell. This would decrease intracellular fluid volume and further increase extracellular fluid volume.

• The 0.9% NaCl solution and 5% dextrose solution are isotonic, and therefore would not reduce intracellular fluid volume.

• Pure water and the 0.45% NaCl solution are hypotonic, and when infused would increase both intracellular and extracellular fluid volumes



Questions :

1. What would happen to a cell placed in a hypertonic solution

- A) The cell would shrink
- B) The cell would expand and possibly burst
- C) The cell would remain the same
- D) The cell would dance and do the HEY HEY!

(A)

2. What is an isotonic solution?

- A) When solutions are in equilibrium
- B) When the solution has more solute
- C) When the solution has less solute
- D) Has a greater pressure
- (A)

3. Which plasma protein is responsible for oncotic pressure ? A)alpha globulins B) collagen

- C) fibrinogen
- D) albumin
- (D)

4. A person should never drink salty water because their cells would

- A) shrink
- B) expand
- C) DYE
- B) EQUILIBRIUM
- (B)

5. Calculate the osmolarity (i.e. numerical value) of the following Molar solutions :

1) 0.30 M NaCl solution = _____ Osm/L ANW = 0.60 osm/L (hypertonic) (hyposmatic)

2) 0.15 M glucose solution = _____ Osm/L ANW = 0.15 osm/L (hypotonic) (hyperosmotic)

3) 0.20 M urea solution = _____ Osm/L ANW= .20 osm /L (hypotonic) (hyperosmotic)

6) A 0.30 M penetrating propanol solution which does not dissociates is ? ANW : iso-osmotic and hypo-tonic 7) .What is the Movement of WATER IN and OUT of the cell membrane?



- A) Diffusion
- B) Osmosis
- C) Hypertonic
- D) My 4g is slowww
- (B)

8) Why do your fingers Prune when in the water for a long time?



A) Carbon goes out
B) Diffusion
C) Osmosis
D)Magic
(C)