

1st year ,Physiology, Humoral control of local blood flow

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Objective

1. Describe physiological role of vasodilators and vasoconstrictors in humoral control of circulation

Tissues and organs within the body are able to intrinsically regulate, to varying degree, their own blood supply in order to meet their metabolic and functional needs. This is termed local or intrinsic regulation of blood flow. Local regulatory mechanisms act independently of *extrinsic* control mechanisms such as sympathetic nerves and circulating hormones. Therefore, they can be demonstrated in isolated, perfused organs having no neural or hormonal influences. Ultimately, the balance between local regulatory mechanisms and extrinsic factors in vivo determines the *vascular tone* and therefore the blood flow within the tissue.

Control of blood flow

Acute control of blood flow

- Auto regulation
- Hyperemia
- Vasoconstriction
- Vasodilation

Long term control

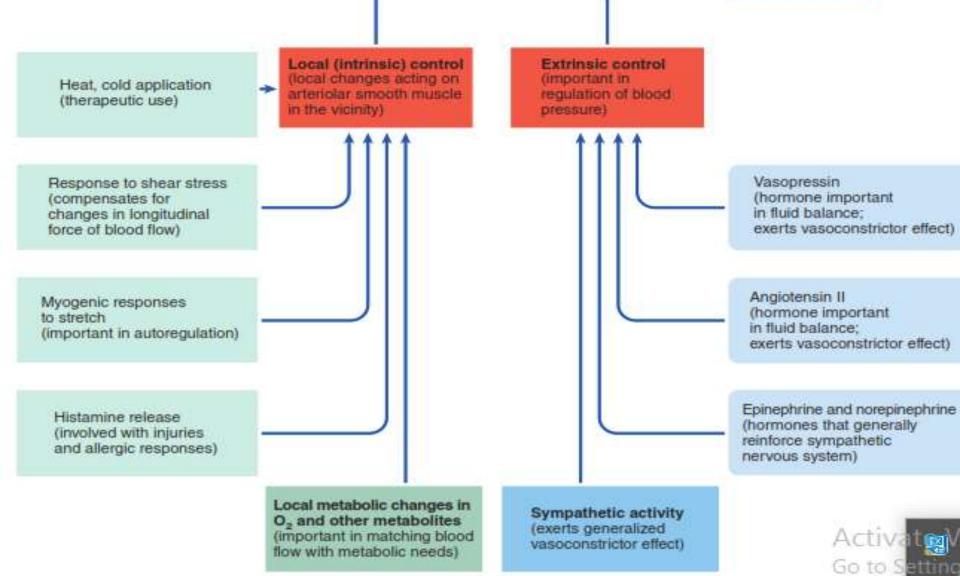
- †tissue vascularity
- Collateral blood vessels
- Humoral control
- Nervous control

Humoral control of the circulation means control by substances Secreted or absorbed into the body fluids, such as

hormones

• and locally produced factors.

Factors controlling arteriolar radius



Humoral factors

vasoconstrictors

- 1. Epinephrine and norepinephrine
- 2. Angiotensin II
- 3. Vasopressin

vasodilators

1. Bradykinin

2. Histamine

1. Epinephrine and norepinephrine

• Site at which released



Influence of Epinephrine and Norepinephrine

norepinephrine

Adrenal medullary norepinephrine combines with the same **a1 receptor** as sympathetically Released norepinephrine to produce generalized **Vasoconstriction**

Epinephrine

abundant of the adrenal medullary hormones,

combines with **both b2 and a1 receptors** but has a much greater affinity for the b2 receptors and cause **vasodilation**

epinephrine

Alpha receptors

Beta receptors

- Arterioles in digestive organs
- kidneys equipped only with a1 receptors

- skeletal muscles and
- heart to reinforce local vasodilator mechanisms

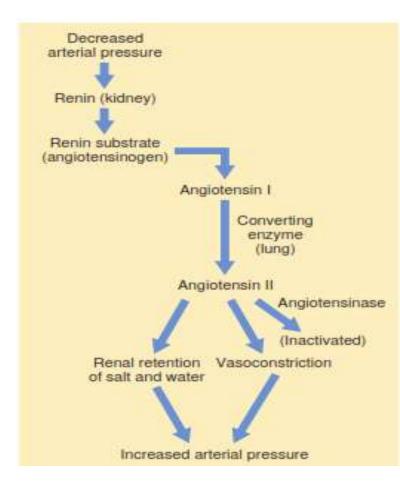
In situation of stress or exercise

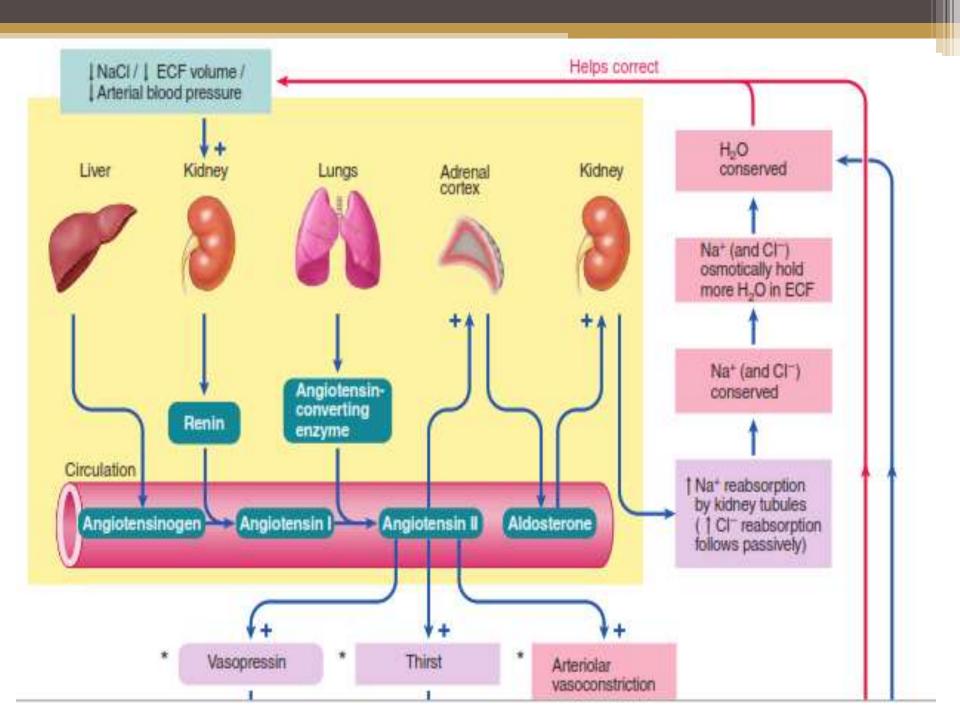
vasoconstriction in renal and GIT circulations (alpha receptors)

Vasodilation in skeletal muscles (beta stimulation)

2. Angiotensin II.

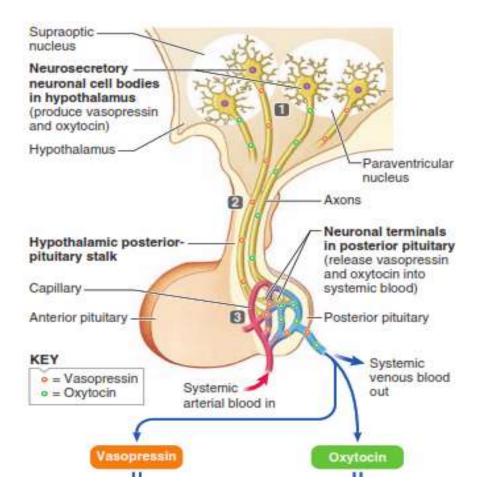
- As little as one millionth of a gram can increase the arterial pressure of a human being 50 mm Hg or more
- acts on many of the arterioles of the body at the same time to
- increase the total peripheral resistance and
- decrease sodium and water excretion by the kidneys, thereby increasing the arterial pressure.





3. Vasopressin (antidiuretic hormone)

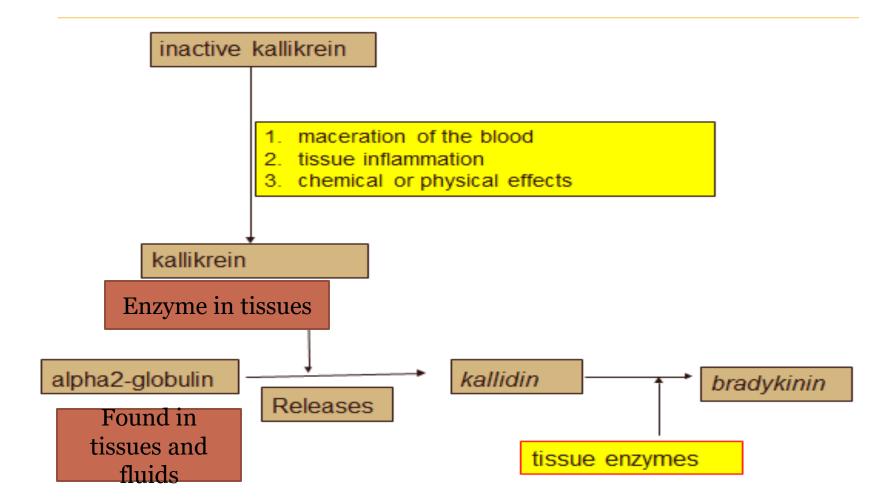
- more powerful than angiotensin II
- formed in nerve cells in the hypothalamus
- transported downward by nerve axons to the posterior pituitary
- Minute amounts of vasopressin are secreted in most physiological conditions, but in sever hemorrhage its concentration increase and can raise BP by 60mmHg



VASODILATOR AGENTS

- 1. Bradykinin
- special role in regulating blood flow and capillary leakage of fluids in inflamed tissues.
- normal role to help regulate blood flow in the skin, as well as in the salivary and gastrointestinal glands.

Formation of Bradykinin



 bradykinin persists for only a few minutes because it is inactivated by the enzyme carboxypeptidase

Actions

- arteriolar dilation
- increased capillary permeability

VASODILATORS

2. Histamine Released in response to

- Damage or inflammation
- in an allergic reaction.

Derived from

- mast cells in the damaged tissues and
- from basophils in the blood

QUIZ TIME

• Injection of 1 microgram of bradykinin into the brachial artery of a person causes

• 1)

• 2).....

STAY BLESSED AND

HEALTHY