## Pulmonary Volumes \& Capacities

Dr. Farhan Ullah Afridi
Department of Physiology, KGMC

## Relationship b/W Pleural, Alveolar, and Transpulmonary Pressure

- Pleural Pressure:
pressure of the fluid in the thin space between the lung pleura and chest wall pleura.
- The normal pleural pressure at the beginning of inspiration is about -5 centimeters of water ( cm H 2 O )
- During normal inspiration, expansion of the chest cage pulls outward on the lungs $\rightarrow$ creates more negative pressure of about -7.5 cm H 2 O .
- This increasingly negative pressure from -5 to - 7.5 $\rightarrow$ an increases of 500 ml in lung volume (Tidal volume)
- During, expiration, this is essentially reversed



## Alveolar Pressure—Air Pressure Inside the Lung Alveoli

- When there is no air is flowing into or out of the lungs $\rightarrow$ pressures in all parts of the respiratory tree, all the way to the alveoli, are equal to atmospheric pressure, which is considered to be zero reference pressure in the airways-that is, 0 cm H 2 O pressure.

To cause inward flow of air into the alveoli during inspiration, alveolar pressure falls from 0 cm H 20 to $-1 \mathrm{~cm} \mathrm{H} 2 \mathrm{O} \rightarrow$ pulls 500 ml of air into alveoli during inspiration.

- During expiration, alveolar pressure rises to about +1 cm H2O, which forces the 0.5 liter of inspired air out of the lungs



## Transpulmonary Pressure—Difference between Alveolar and Pleural Pressures

- Pressure difference between that in the alveoli and that on the outer surfaces of the lungs (pleural pressure);
- It is a measure of the elastic forces in the lungs that tend to collapse the lungs at each instant of respiration, called the recoil pressure



## Lung Compliance

Change in lung volume for a change in pressure $(\Delta V / \Delta P)$. i,.e. Transpulmonary pressure

- Increased compliance = lung easier to fill (eg, emphysema, aging)
- Decreased compliance = lung harder to fill (eg, pulmonary fibrosis, pneumonia, ARDS, pulmonary edema)
- The total compliance of both lungs together in the normal adult averages about 200 ml of air/cm H2O transpulmonary pressure.

That is, every time the transpulmonary pressure increases by 1 cm H 2 O , the lung volume will expand 200 ml .

## Lung compliance diagram



- Fig. showing relating lung volume changes to changes in pleural pressure, which, in turn, alters transpulmonary pressure.
- Note that the relationship is different for inspiration and expiration.
- Lung inflation follows a different pressure-volume curve than lung deflation due to need to overcome surface tension forces in inflation. This phenomenon is called hysteresis.



## Combined lung and chest wall compliance

## Changes in Chest Wall Compliance



Functional Residual Capacity = Volume of air in lungs after tidal expiration ( $R V+E R V$ ). At this volume, the pulmonary system is in equilibrium because the collapsing force of the lungs is equal to the expanding force of the chest wall.

- Physiologically, there is a Tendency for lungs to collapse inward and chest wall to spring outward (expand outward).
- At FRC, airway and alveolar pressures equal atmospheric pressure (called zero), and intrapleural pressure (pleural pressure) is negative.
- The inward pull of the lung is balanced by the outward pull of the chest wall


## Spirometry

- Method of assessing lung function by measuring the volume of air that can be expelled from the lungs after a maximal inspiration
- 4 volumes and 4 capacities
- A capacity is a sum of two or more volumes
- Tidal volume: that volume of air moved into or out of the lungs during quiet breathing
- Inspiratory reserve volume: the maximal volume that can be inhaled after normal inspiration
- Inspiratory capacity: the sum of IRV and TV
- Expiratory reserve volume: the maximal volume of air that can be exhaled after normal exhalation
- Vital capacity: the volume of air breathed out after the deepest inhalation.
- Total lung capacity: the volume in the lungs at maximal inflation, the sum of VC and RV.
- Residual volume: the volume of air remaining in the lungs after a maximal exhalation


| Table 38-1 Average Pulmonary Volumes and |  |  |
| :--- | :--- | :--- |
| Capacities for Healthy, Young Adult Men and Women |  |  |
| Pulmonary Volumes and Capacities Men Women <br> Volume (ml) <br> Tidal volume 500 400 <br> Inspiratory reserve volume 3000 1900 <br> Expiratory volume 1100 700 <br> Residual volume 1200 1100 <br> Capacities (ml) <br> Inspiratory capacity   <br> Functional residual capacity 3500 2400 <br> Vital capacity 2300 1800 <br> Total lung capacity 4600 3100 | 5800 | 4200 |

## Thank You

