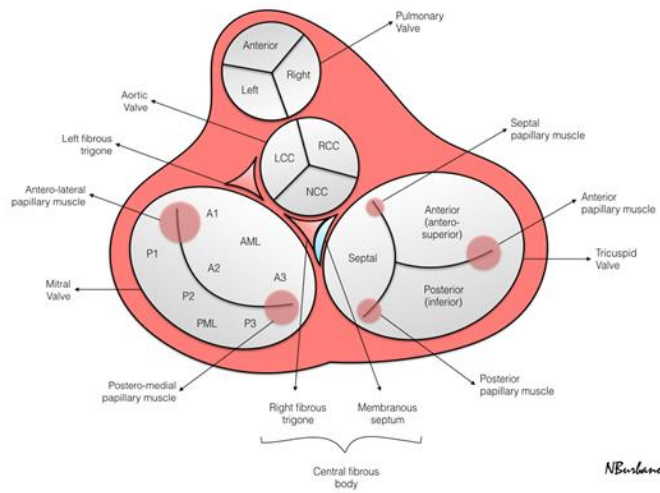


# GSSE Physiology: Cardiovascular

Nick Skladnev + Louise Waterhouse



- a. **Cardiac electrical physiology: generation of pacemaker potentials, anatomical details, conduction speeds, ventricular action potentials**
- b. **Electrocardiography: mechanism of recording, leads**
- c. **Mechanical events in the cardiac cycle, pressure-volume loops, normal pressures in cardiac chambers**
- d. **Fick's principle of diffusion, and its relationship to calculating cardiac output**
- e. **Factors controlling cardiac output (preload, afterload, and contractility), Frank-Starling law**
- f. **Anatomical/histological differences throughout the vasculature (arteries, veins, and in between), including relative contribution to contained blood volume and contribution to peripheral resistance (i.e. resistance and capacitance vessels)**
  
- g. Principles of laminar flow; Poiseuille formula for calculation of flow through a tube; critical closing pressure within capillaries
- h. Bernoulli principle: kinetic and potential energy
- i. Starling forces and movement of fluid across small vessels
- j. Law of Laplace, as it relates to capillaries (and can then be extrapolated to heart failure, caecal perforation in bowel obstruction)
- k. Venous pressures, and changes with position; mechanism of venous return from dependent areas; mechanism of air embolism
- l. Circulating and regional control of vascular resistance/arteriole calibre – including feedback mechanisms (baroreceptors) and autonomic innervation
- m. Haemostasis: formation of platelet plug and coagulation cascade, important anticoagulant/fibrinolytic mechanisms (thrombomodulin, antithrombin III)



**TABLE 29-1** Conduction speeds in cardiac tissue.

Tissue	Conduction Rate (m/s)
SA node	0.05
Atrial pathways	1
AV node	0.05
Bundle of His	1
Purkinje system	4
Ventricular muscle	1

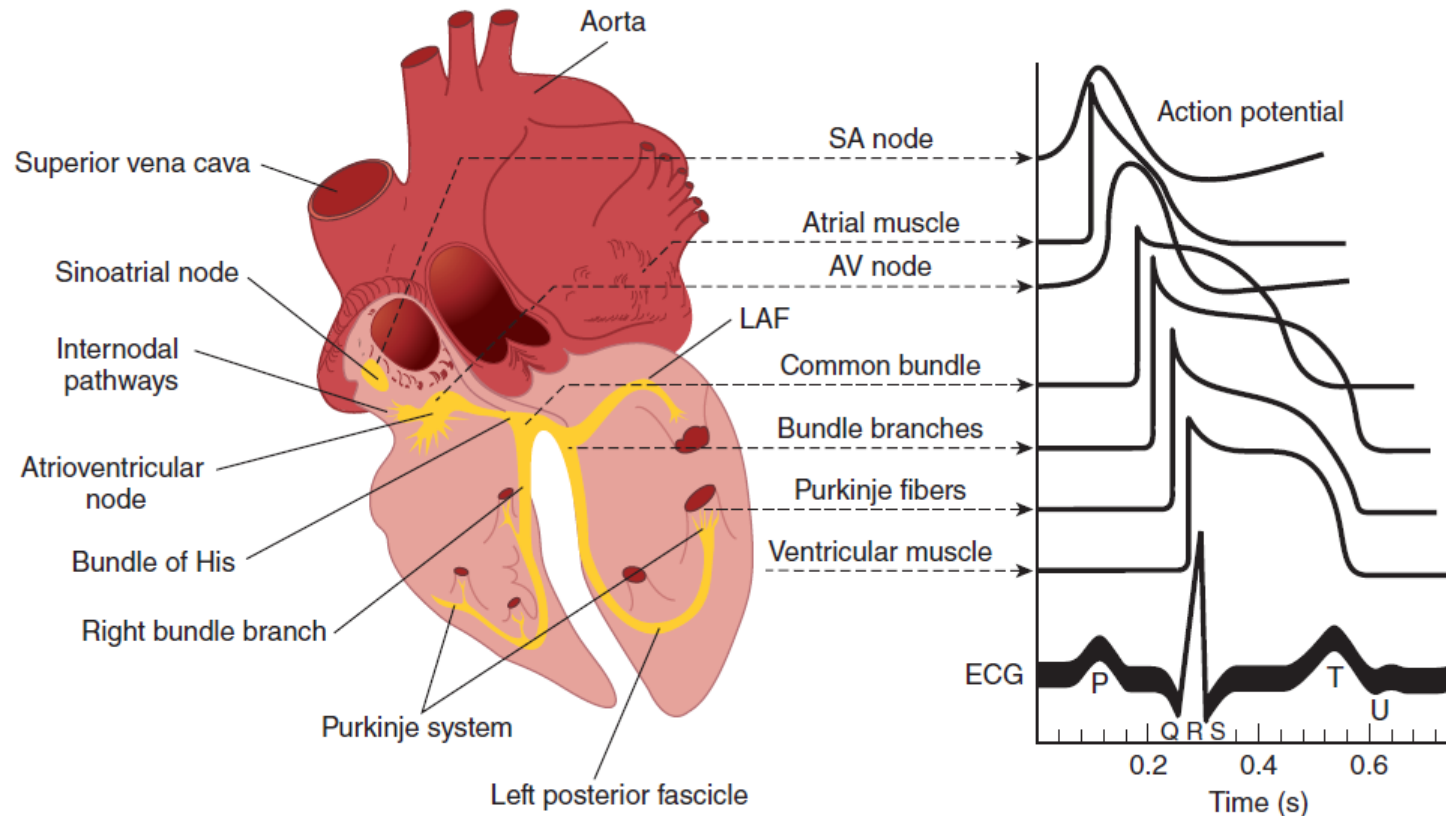
**TABLE 29-2** ECG intervals.

Intervals	Normal Durations		Events in the Heart during Interval
	Average	Range	
PR interval <sup>a</sup>	0.18 <sup>b</sup>	0.12–0.20	Atrioventricular conduction
QRS duration	0.08	to 0.10	Ventricular depolarization
QT interval	0.40 <sup>c</sup>	to 0.43	Ventricular action potential
ST interval (QT minus QRS)	0.32	...	Plateau portion of the ventricular action potential

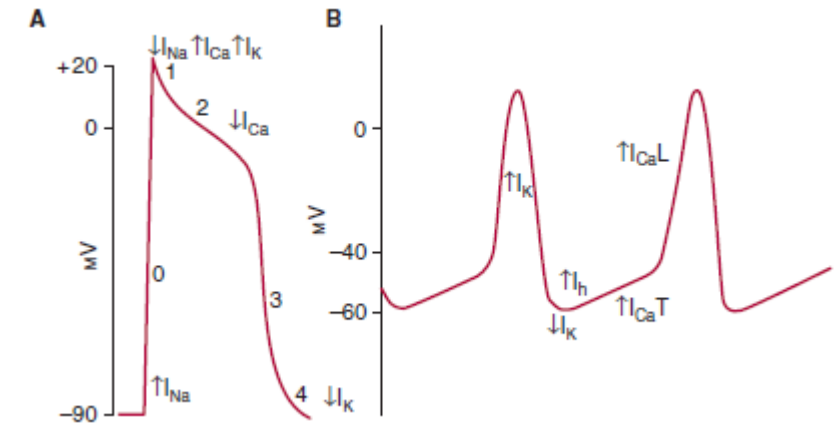
<sup>a</sup>Measured from the beginning of the P wave to the beginning of the QRS complex.

<sup>b</sup>Shortens as heart rate increases from average of 0.18 s at a rate of 70 beats/min to 0.14 s at a rate of 130 beats/min.

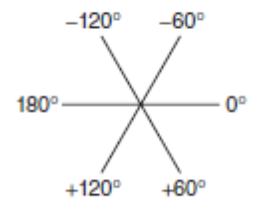
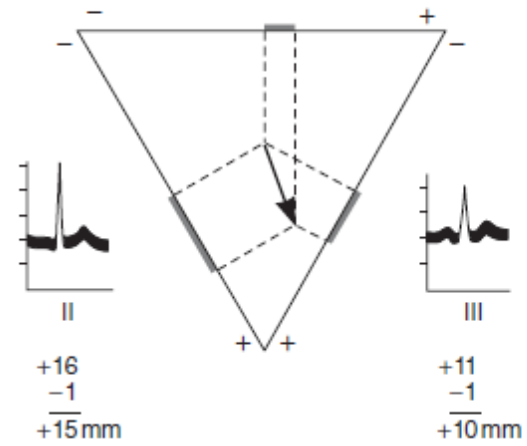
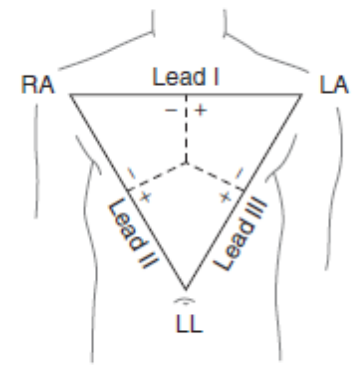
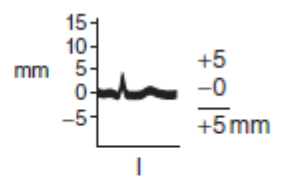
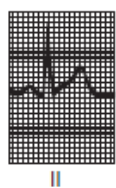
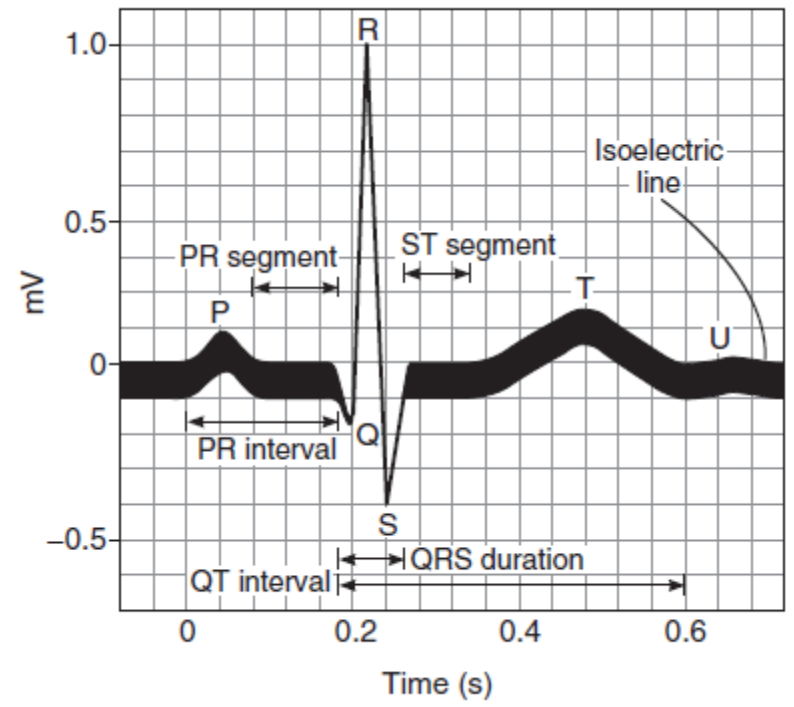
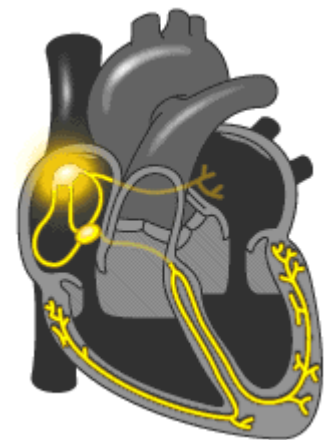
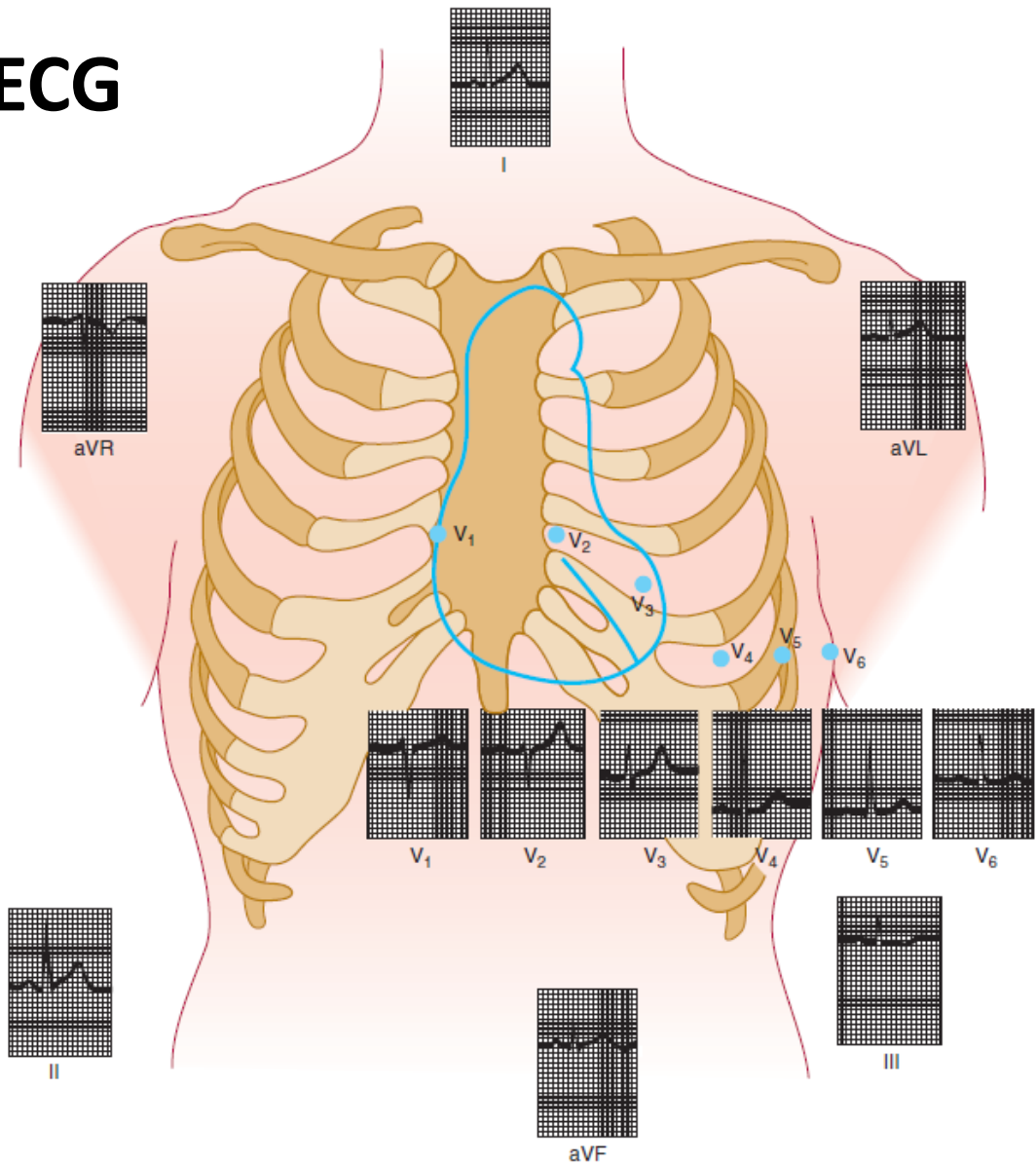
<sup>c</sup>Can be lower (0.35) depending on the heart rate.



# Electrophys



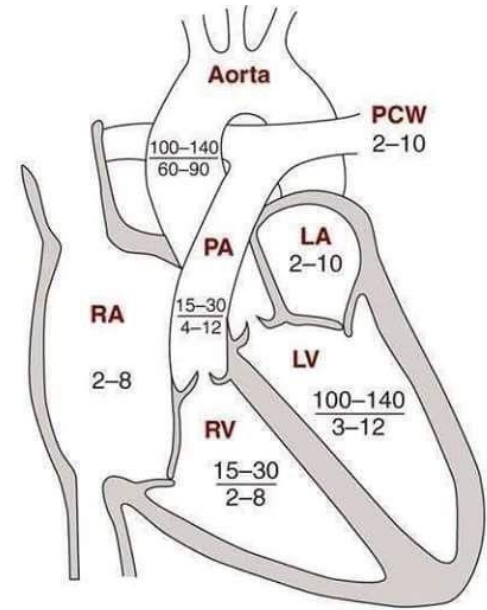
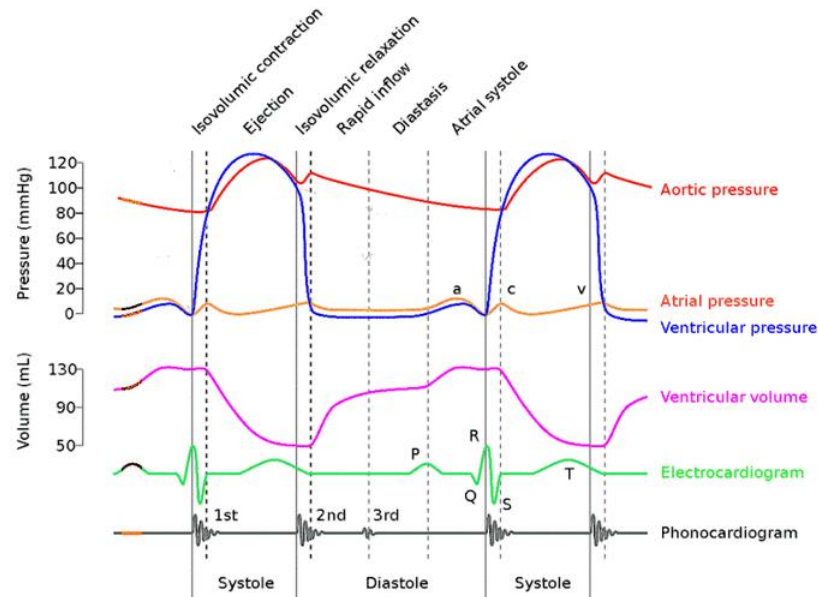
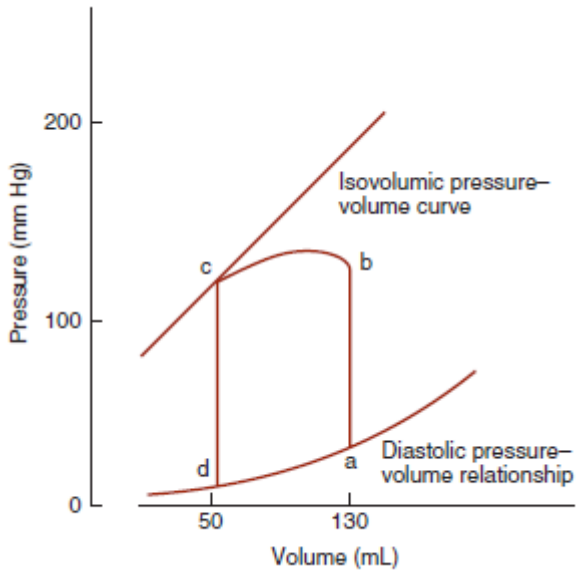
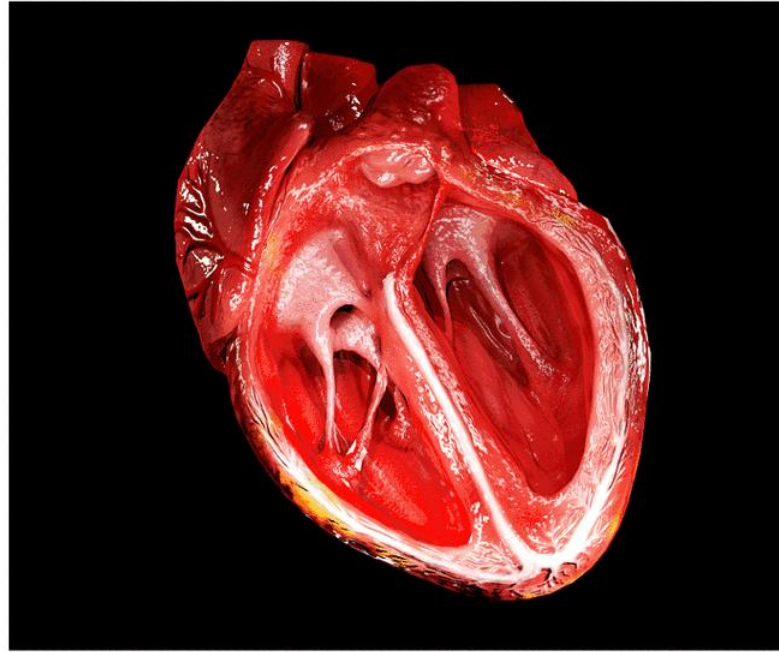
# ECG



Q: Concerning the conducting system of the heart

- F** 1: stimulation of cholinergic vagal fibres to nodal tissue decreases potassium ion conductance
- F** 2: depolarization of the ventricular muscle starts on the right side of the interventricular system
- F** 3: the last part of the heart depolarized is the epicardial surface of the left ventricular apex
- T** 4: stimulation of sympathetic cardiac nerves results in increased intracellular cyclic AMP

# CARDIAC CYCLE



Q – Isometric contraction of the left ventricle

- A. occurs during the first third of systole
- B. involves the most rapid change in pressure per unit time in the cardiac cycle
- C. occurs after closure of the aortic valve
- D. is terminated at the T wave of the ECG
- E. is responsible for ejection of a majority of the stroke volume

Q – Isometric contraction of the left ventricle

A. occurs during the first third of systole

**B. involves the most rapid change in pressure per unit time in the cardiac cycle**

C. occurs after closure of the aortic valve

D. is terminated at the T wave of the ECG

E. is responsible for ejection of a majority of the stroke volume



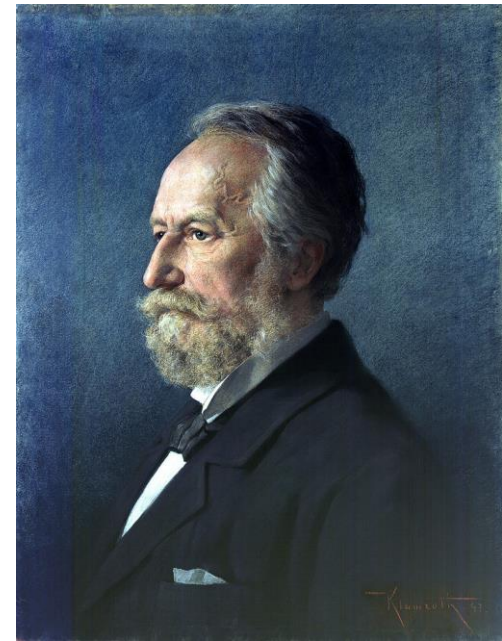
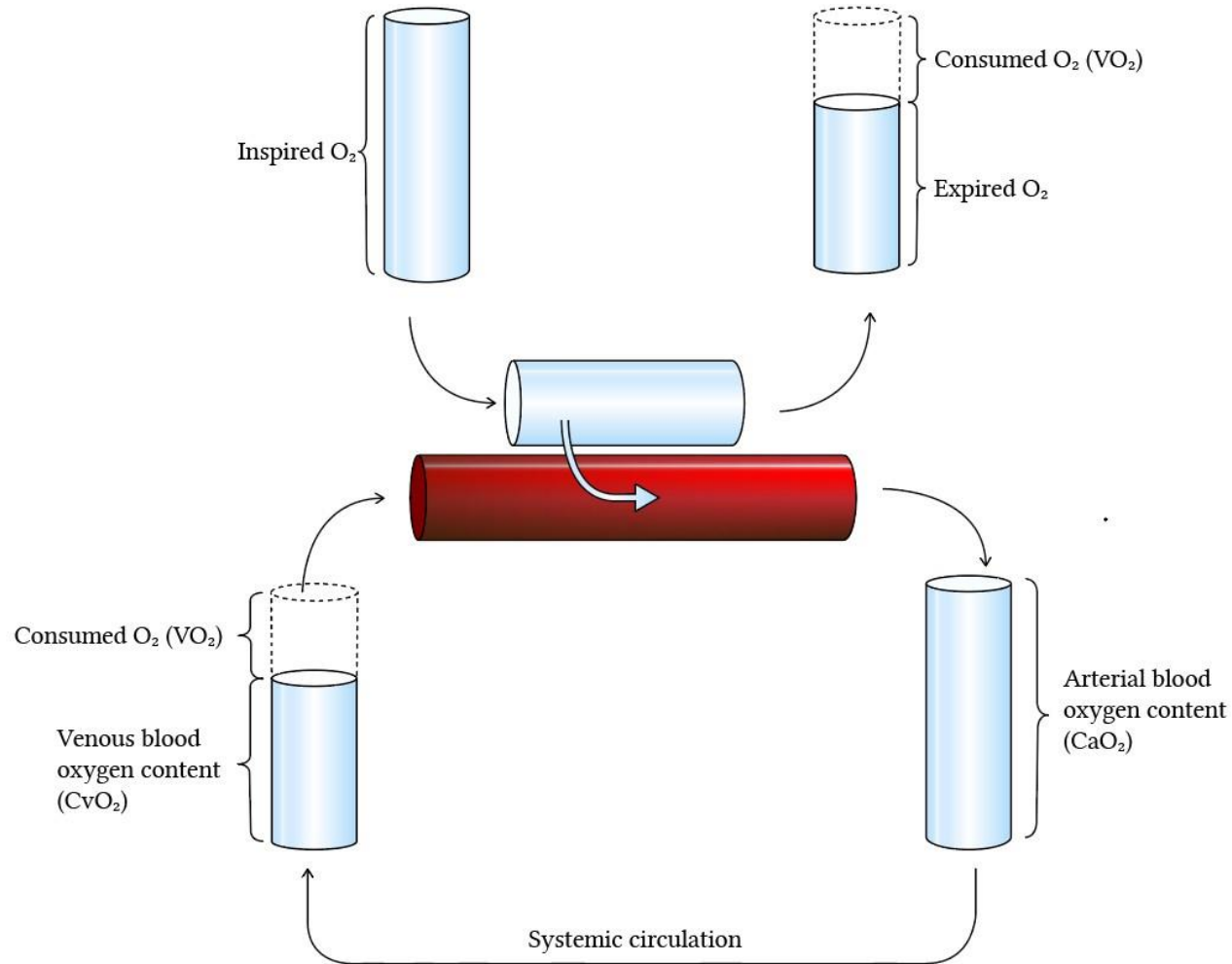
# FICK'S PRINCIPLE OF DIFFUSION

Direct (blood) vs Indirect (EtCO2/SpO2)

# Output

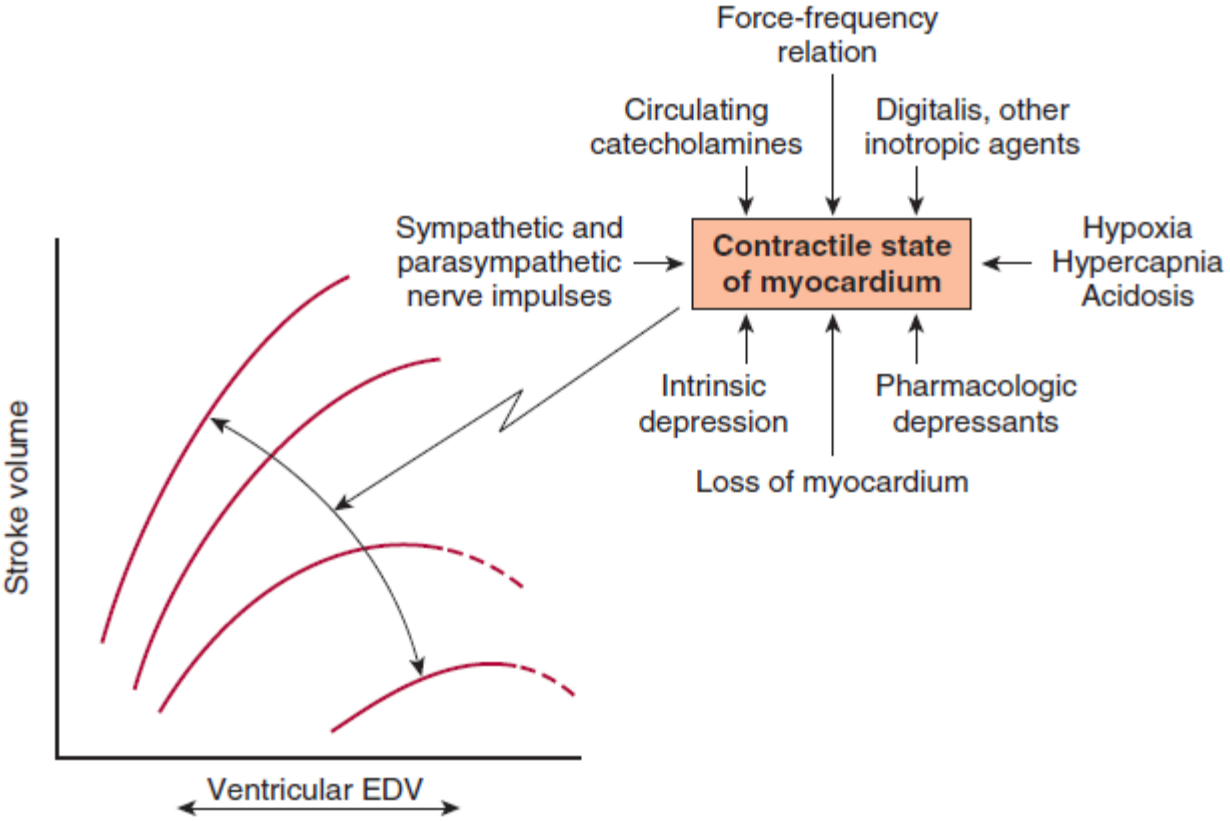
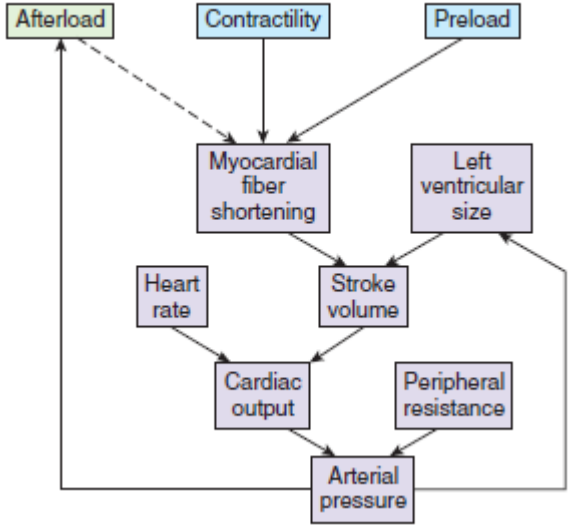
$$\dot{V}O_2 = CO \times (C_aO_2 - C_vO_2)$$

$$CO = SV \times HR$$



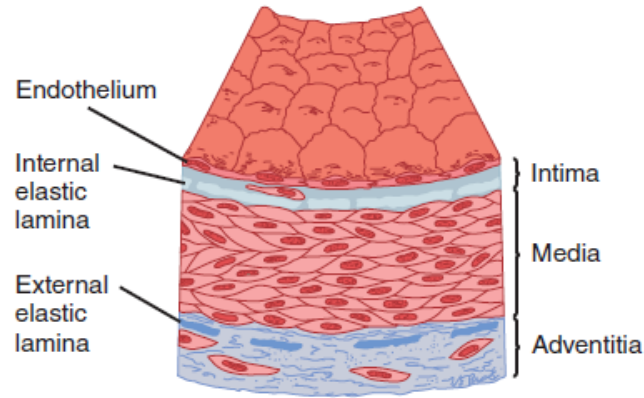
Nephew = contact lenses

# Output modifiers

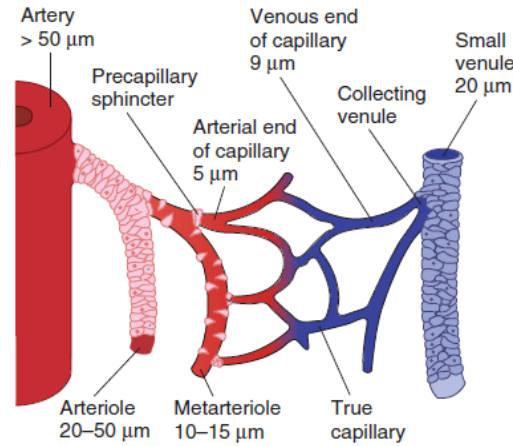
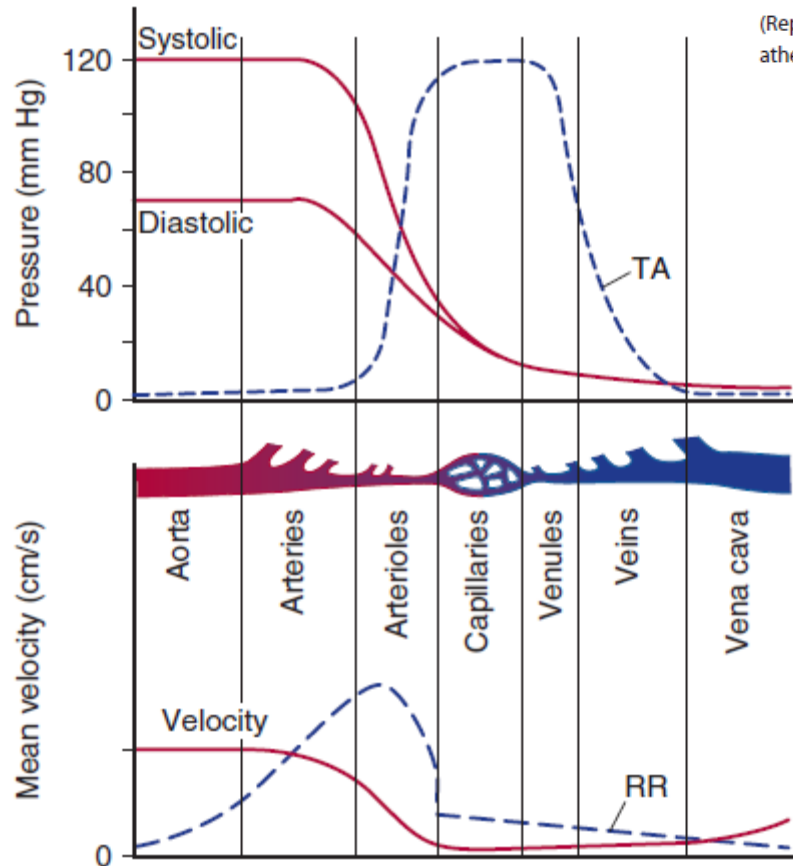


$$CO = SV \times HR$$

# Plumbing



**FIGURE 31-15** Structure of a normal muscle artery.  
 (Reproduced with permission from Ross R, Glomset JA: The pathogenesis of atherosclerosis. N Engl J Med 1976; Aug 12; 295(7):369-377.)



## Capacitance vs resistance

**TABLE 31-9** Characteristics of various types of blood vessels in humans.

Vessel	Lumen Diameter	Wall Thickness	All Vessels of Each Type	
			Approximate Total Cross-Sectional Area (cm <sup>2</sup> )	Percentage of Blood Volume Contained <sup>a</sup>
Aorta	2.5 cm	2 mm	4.5	2
Artery	0.4 cm	1 mm	20	8
Arteriole	30 μm	20 μm	400	1
Capillary	5 μm	1 μm	4500	5
Venule	20 μm	2 μm	4000	54
Vein	0.5 cm	0.5 mm	40	
Vena cava	3 cm	1.5 mm	18	

<sup>a</sup>In systemic vessels; there is an additional 12% in the heart and 18% in the pulmonary circulation.