

BIO 2402 - Human Anatomy & Physiology  
Week 10

Hi everyone! I hope your second exam went well! This week we are going to be focusing on the respiratory system. I have broken things down into the anatomical portions of the upper and lower respiratory tracts, and then the physiology of lung capacity, respiration, and air pressure. Please let me know if you have any questions!

**Remember that the Tutoring Center offers free individual and group tutoring for this class. Our Group Tutoring sessions will be every Wednesday from 6:00-7:00 PM CST. You can reserve a spot at <https://baylor.edu/tutoring>.**

**KEY TERMS:** Upper Respiratory Tract, Lower Respiratory Tract, Dalton's Law, Charles Law, Bohr Effect, Haldane Effect

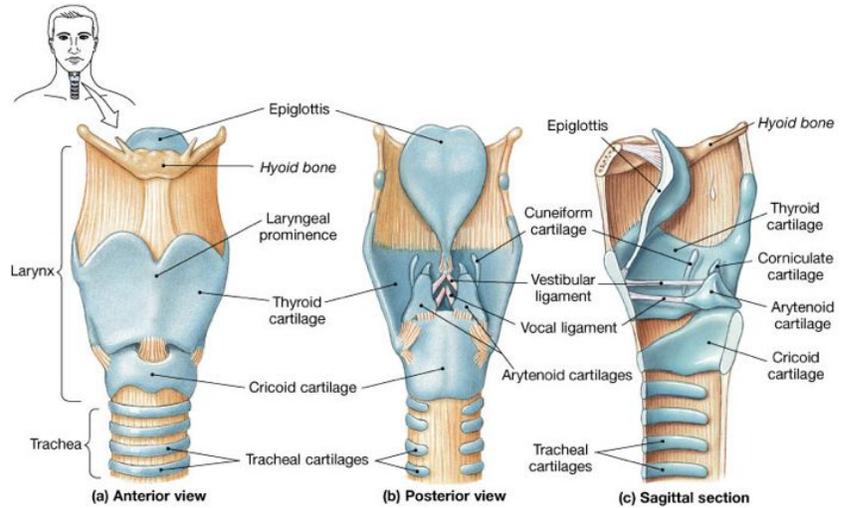
**Upper Respiratory Tract:** Nose, nasal passages, pharynx, and the larynx

**Lower Respiratory Tract:** trachea, bronchial trees, lungs

1. Nose
  - a. Fibrous connective tissue
  - b. Lateral, septal, alar cartilage
  - c. Nostrils/External Nares: dense fibrous connective tissue
  - d. Nasal Vestibule: Superior to nostrils, stratified squamous epithelium. Contains nasal hairs.
2. Nasal Cavity
  - a. Superior and posterior to nasal vestibule.
  - b. Nasal septum: vomer(inferior) & perpendicular plate(upper)
  - c. Maxilla & Palatine: form floor of nasal cavity
  - d. Maxilla & Nasal Conchae/turbinate bones: form lateral walls
  - e. Ethmoid Cribriform & Frontal Bone: form roof
  - f. Sphenoid bones: form posterior walls
    - i. Olfactory Mucosa: superior portion of cavity  
  
Nonciliated, pseudostratified columnar epithelium w/olfactory cells
    - ii. Respiratory Mucosa: remainder of the cavity  
  
Ciliated, pseudostratified columnar epithelium w/goblet cells
3. Pharynx
  - a. Muscular tube between nasal cavity & larynx
    - i. **Nasopharynx:** ciliated pseudostratified columnar epithelium w/goblet cells
      1. Separated from nasal cavity by internal nares
      2. Contains opening to the auditory/eustachian tubes
      3. Soft palate & uvula separate the nasopharynx from the oral cavity.
    - ii. **Oropharynx:** stratified squamous epithelium
      1. Palatine & lingual tonsils
    - iii. **Laryngopharynx:** posterior to oropharynx

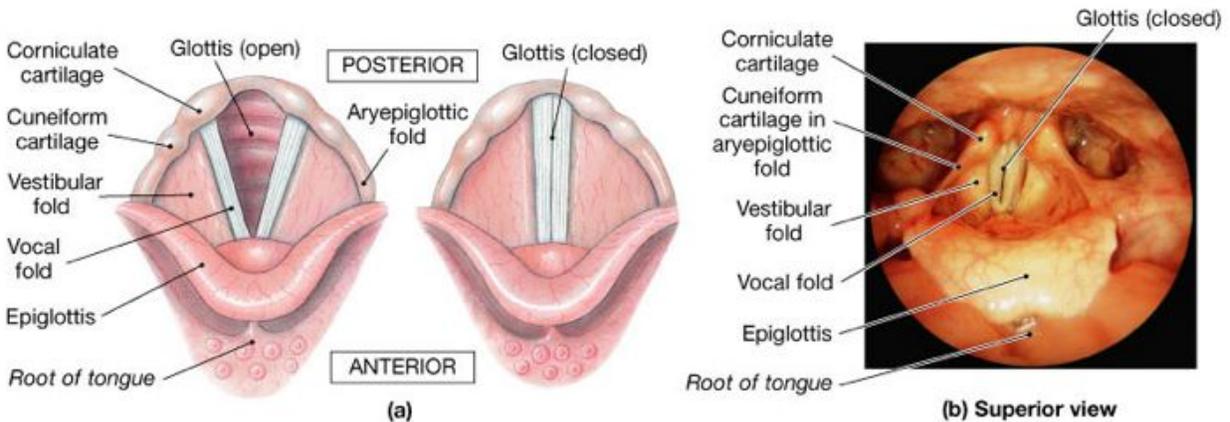
4. **Larynx(voice box/adam's apple):** most inferior organ in the upper respiratory tract

- a. Primarily hyaline cartilage
  - i. Anterior: thyroid cartilage
  - ii. Inferior: Cricoid cartilage
- b. Suspended from the hyoid bone by thyrohyoid membrane
- c. Laryngeal inlet: opening into vestibule
- d. Laryngeal vestibule: cavity w/in larynx
  - i. Cuneiform cartilage: elastic cartilage
  - ii. Corniculate cartilage
  - iii. Arytenoid cartilage



5. Glottis and Epiglottis

- a. Form the inferior portion of the laryngeal vestibule
- b. Know which muscles regulate glottis diameter



6. **Trachea:** aka the windpipe

- a. Connects the larynx to the bronchi
- b. Contains the carina: responsible for coughing
- c. Primarily composed of ciliated pseudostratified columnar epithelium w/goblet cells and covered externally by adventitia (areolar connective tissue)
- d. C-shaped rings of hyaline cartilage
- e. Trachealis muscle is on the posterior side (elastic tissue & smooth muscle)

## 7. Muscles for Inhalation & Exhalation

### a. Inhalation

- i. Restful: diaphragm & external intercostals
- ii. Forced: scalenes, sternocleidomastoids, pectoralis minor

### b. Exhalation

- i. Restful: no muscles used
- ii. Forced: internal intercostals, external & internal obliques, transverse & rectus abdominis

## 8. Lungs

a. Stroma: elastic tissue surrounding alveoli

b. Bronchi & Bronchioles

i. **Primary Bronchi:** cartilaginous rings, lined w/ciliated pseudostratified columnar epithelium

ii. **Secondary/Tertiary Bronchi:** cartilaginous plates, more smooth muscle & lined w/simple columnar or cuboidal epithelium

iii. **Terminal & Respiratory Bronchioles**

1. Respiratory Bronchioles: house alveoli

a. *Alveolar ducts* → *Alveolar sacs* → *Alveoli*

i. Site of external respiration

1. Type I cells: simple squamous epithelium

2. Type II/Septal Cells: secrete surfactant

## 9. Graph w/lung capacities

a. Intrapulmonary(Intraalveolar) pressure: w/in lungs or alveoli

b. Intrapleural pressure: w/in pleural cavities, 4mm Hg less than intrapulmonary

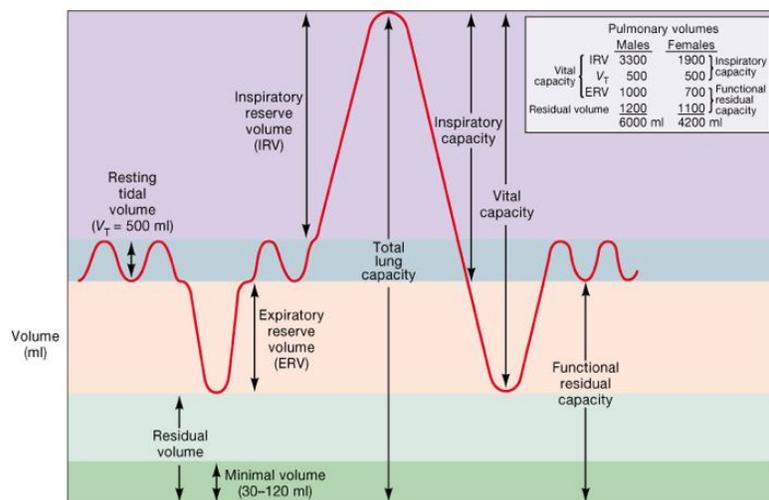
c. Atmospheric pressure: outside the body

Inhalation: atmospheric > intraalveolar > intrapleural

Exhalation: atmospheric < intraalveolar > intrapleural

Pneumothorax: intrapleural > intraalveolar

The image to the right references the different pulmonary volumes. This image is not as important for lecture, but knowing how to identify the different volumes on this image. I would recommend using flashcards to memorize these.



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10. Hyperventilation (the image below depicts hyperventilation when swimming)
- Excessive breathing which dramatically lowers the  $\text{CO}_2$  &  $\text{H}^+$  levels in the blood, causing vasoconstriction in the brain and vasodilation in the systemic vessels resulting in a decrease in blood pressure
    - More sensitive to low  $\text{CO}_2$  levels than  $\text{O}_2$  levels swimming & hyperventilation)
  - Causes fainting

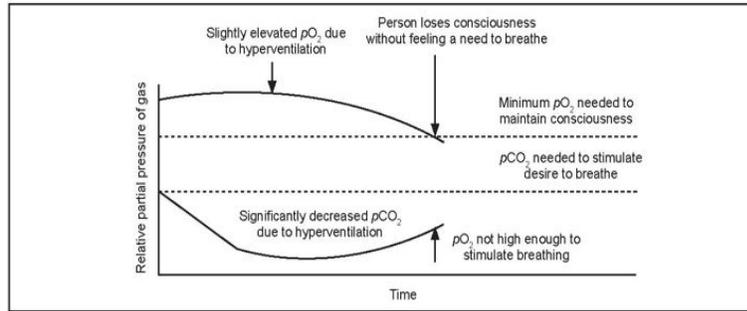


Figure 9-16. Danger of hyperventilating when swimming

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11. Gas Laws: these gas laws represent how pressure, solubility, and temperature affect air entering and leaving the lungs.
- Henry's Law: partial pressure & solubility correlate positively w/the amount of gas dissolved
  - Dalton's Law: each gas has its own partial pressure
  - Charles' Law: volume of gas correlates positively to the temperature \*amount of gas correlates negatively w/the temperature\*
  - Boyle's Law: pressure correlates negatively w/the volume

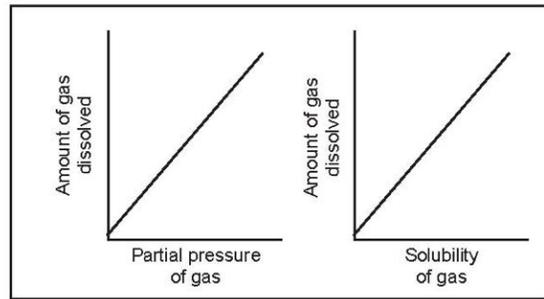


Figure 9-9. Henry's law and gas in solution

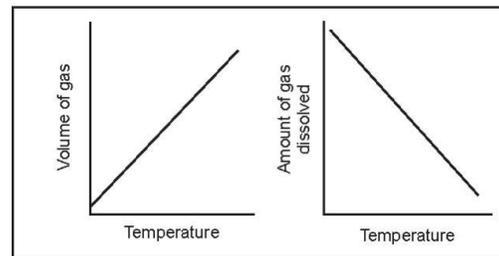


Figure 9-10. Charles' law and gas in solution

### Affinity for $\text{O}_2/\text{CO}_2$

- Bohr Effect: Hb's low affinity for  $\text{O}_2$  in high  $\text{CO}_2/\text{H}^+$  environments
- Haldane Effect: HHb's high affinity for  $\text{CO}_2$

The image to the right depicts the movement of  $\text{O}_2/\text{CO}_2$  in different locations.

