

# LAB

## CONTRACTIONS in the GIT

Tonic contractions  
(at the sites of sphincters)

Rhythmic/phasic contraction.

→ slow waves → Not true action potentials, they are only undulating changes of membrane potential (Don't cause contraction by themselves), it is slow.

↳ these waves are maintained by ICC (cells of Cajal) → the electrical pacemaker for smooth muscle cells.

↳ they set the frequency at which contraction can happen

↳ they are different depending on 1. The part of GIT. 2. The species. تختلف بين الأنواع

↳ slow waves frequency → Duodenum = 12/minute, terminal ileum = 8-9/minute

↳ in rats it can reach up to 25-30/minute.

→ rhythmic contractions occur by having the always happening changes of resting potential without reaching the threshold.

→ spike potentials → true action potential that happen on top of a slow wave causing a contraction, it is initiated by 1. stretch 2. chemicals (ACh, hormones like motilin)

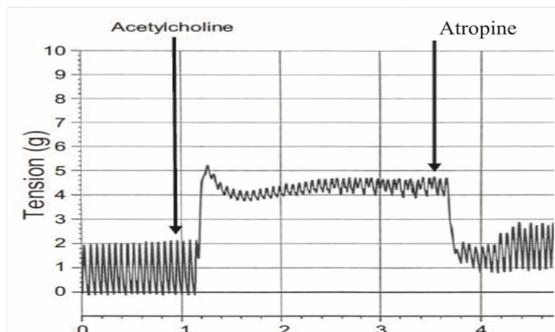
## The experiment

\* Investigate the contraction of smooth muscle in small intestine by observing the occurrence of rhythmical contractions and by the modification of these contractions by ACh and atropin.

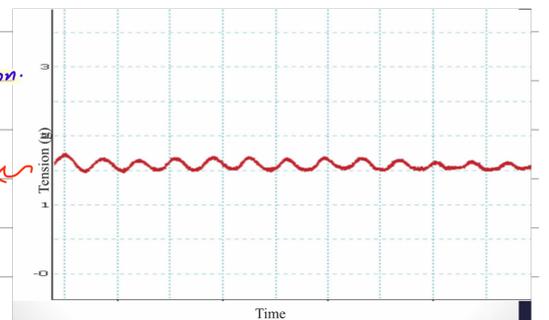
→ Method: Small pieces (2-3cm) of rat's small intestine are hanged vertically by a thread to a glass hook in an organ bath that contains warm oxygenated buffer (37°C), After hanging the tissue it is allowed to rest for 15-20 minutes to allow the muscle to recover normal function, The SI connected by a thread to a tension transducer which will convert the mechanical signal generated by the contraction to an electric signal and converts it into special software, the software is capable of displaying a simple graph of tension versus time → The tension created by the SI is recorded → ACh is added → Atropin is added.

→ Organ bath: a solution that contains certain nutrients and salts, used to maintain the viability of the tissue for a time.

→ Certain amount of stretch is applied on the piece to start the contraction.



The contractile force.



↳ ACh is secreted by enteric and parasympathetic neurons.

↳ its effect on intestinal smooth muscle cells is mediated by  $M_3$  receptors.

↳ ACh → ↑ the tension (ACh is the major excitatory neurotransmitter in the SI)

↳ Any competitive antagonist of ACh → ↓ the tension.

↳ competitive antagonist of ACh

↳ epinephrine and nor epinephrine will have the same effect of Atropin → ↓ the tension.

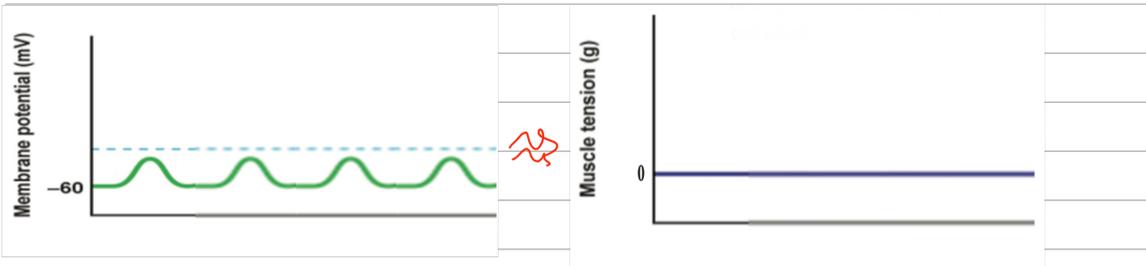
↳ No effect on rats, but in other species (rabbit) it did the same of atropin.

↳ the increase in contractile force is due to an increase in the number of spikes not the frequency of slow waves.

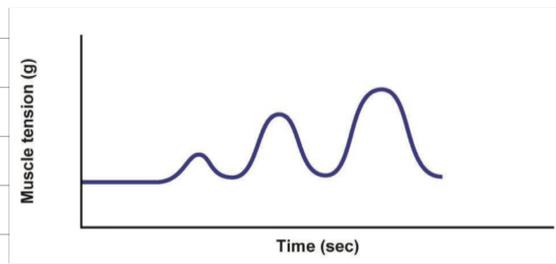
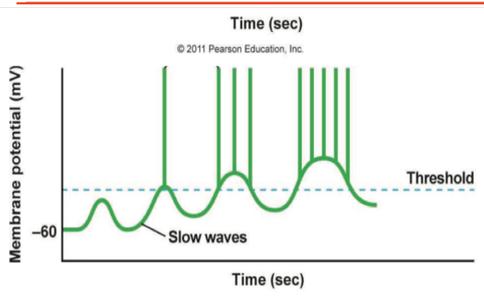
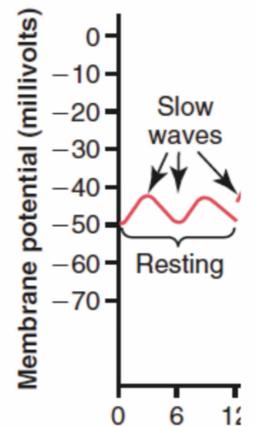
↳ Most GI contractions occur rhythmically.

↳ Phasic (Rhythmic) contractions → periodic contractions and relaxation, it is determined mainly by the frequency of the slow waves in the absence of neural or hormonal stimulation.

↳ Slow waves set the maximum frequency at which contraction can occur at a particular site.



↳ NO tension by slow waves.



↳ when spike potential is generated → contraction occurs.

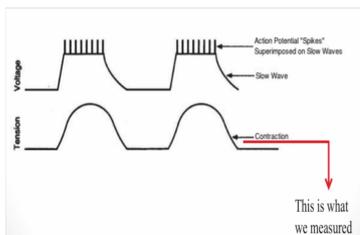
↳ the spike potential is seen as a transient membrane depolarization superimposed on the peak of slow wave.

↳ stimulated by stretch, Ach and some GI hormones.

↳ slow waves are always fixed.

↳ slow waves determine the rate of contraction.

↳ number of spike potential determine the strength of the contraction.



↳ our experiment is to measure the actual contraction not the slow waves.

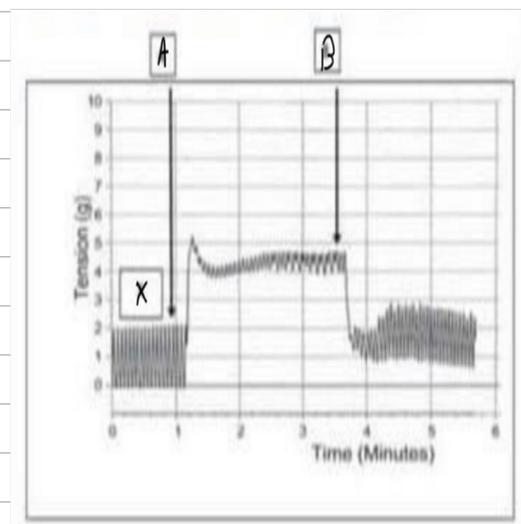
↳ contractions

A → same effect of Ach.

B → competitive antagonist to A.

↳ A → Muscarinic receptor → ↑ tonic contraction.

↳ B → M receptor → ↓ tonic contraction.



## Mid lecture 8

→ ATP → Energy → Body works (Chemical, mechanical, Electrical) → heat.  
 Building component, secretions. ↙ Muscle contraction ↘ Na<sup>+</sup>/K<sup>+</sup> pumps.

→ Phosphocreatine + ADP ↔ ATP + Creatinine. (↑ creatinine = ↑ storage of energy)  
 ↳ transfer energy to ATP.

→ Most of our body energy is produced in the form of aerobic energy.

→ Glycolysis (Glucose → Pyruvic acid) is a form of anaerobic energy

→ anaerobic reactions → in case of lack of oxygen (Hypoxia) or high activity (Muscles...) → leads to accumulation of lactic acid.

→ Aerobic energy → by enzymatic reaction, it is very well controlled, final product → CO<sub>2</sub> and H<sub>2</sub>O.

↳ C<sub>6</sub>H<sub>12</sub>O<sub>6</sub> (glucose) + 6O<sub>2</sub> → 6H<sub>2</sub>O + 6CO<sub>2</sub> → Glucose burning.

→ Respiratory Quotient (RQ) = CO<sub>2</sub> Produced / O<sub>2</sub> Consumed (نسبة إنتاج O<sub>2</sub> إلى استهلاك CO<sub>2</sub>)

↳ RQ in case of: Glucose = 1, Fat = 0.7, Protein = 0.8, Mixed Food = 0.82.

→ We can estimate the respiratory quotient for all the body from the respiratory exchange ratio by the lung → indicate the main type of food stuffs used for metabolism.

## Metabolic rate

→ Metabolic rate = The rate of heat production.

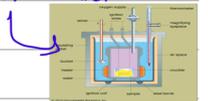
→ Metabolic rate under basal conditions → Basal metabolic rate (The minimal energy expenditure by body to exist)

not in sleep, 12 hours without food, After a night of restful sleep, No exercise for one hour (and during the rest), No excitement and comfortable temperature.

→ Measurements of metabolic rate: The unit is Calorie C.

1. Direct calorimetry: using direct methods by calorimeter which measure the heat taken by the flow of water.

2. Indirect calorimetry:



A. Closed circuit method →

↳ From the amount of oxygen consumed (95% of energy)

↳ 4.825 Calorie / liter of oxygen consumption (Energy equivalent of oxygen)

↳ We use Piranometer as a metabolator by filling it with pure oxygen and adding in the way of expired air a substance to adsorb the CO<sub>2</sub> produced → measure O<sub>2</sub> consumption.

↳ Heat produced = Amount of heat / m<sup>2</sup> surface body / hour (Cal · hour<sup>-1</sup> / m<sup>2</sup>)

EXAMPLE: Oxygen consumption of 100ml of oxygen / 15 minutes.

1. Calculate oxygen consumed / 1 hour ⇒  $\frac{1 \text{ liter (100 ml)}}{15 \text{ minutes}} \times \frac{60 \text{ minutes}}{1 \text{ hour}} = 1.2 \text{ liters / hour}$

2. Calculate the energy produced (heat) ⇒  $1.2 \text{ liter} \times \frac{4.825 \text{ cal}}{1 \text{ liter}} = 5.79 \text{ cal} \Rightarrow \text{Heat} = 5.79 \text{ C / hour}$

3. Know the surface area of the body ⇒ 1.7 m<sup>2</sup> in our question

4. Heat produced =  $\frac{5.79 \text{ cal / hour}}{1.7 \text{ m}^2} = 3.4 \text{ cal} \cdot \text{hour}^{-1} / \text{m}^2$

↳ The metabolic rate can be related to the ideal basal metabolic rate (% increased or decreased)

A. Opened circuit method:

↳ A bag is used for collection of expired air during the physical activity.

↳ By knowing the concentration of O<sub>2</sub> in the atmosphere and in collected air → know O<sub>2</sub> that was consumed → calculate the metabolic rate.

→ Factors effect metabolic rate:

Exercise (↑), Daily activities (lie in bed all day → 1600 Cal/day, Eating process → ↑ the rate by 200 Cal.)

Age (↓), sleep (↓), Fever (↑), Malnutrition (↓), Thyroid hormones (↑), Male sex hormones (↑ the basal metabolic rate by 10-15%)

GH (↑ by 15-20%), Sympathetic stimulation (↑), Climate → The metabolic rate of people living in tropical regions is less.