

# Humoral Control and Respiration during Exercise

- ▶ **Humoral Control**
  - ▶ **Respiration during Exercise**
    - Respiratory Changes
    - Cardiac Changes
    - Circulatory Changes
- Non-respiratory functions of lungs**

# VENTILATION AND CARDIAC RESPONSE DURING EXERCISE

## (Physiological Adjustment to Exercise)

- ▶ Exercise requires the coordination of most of the body's organ systems
  - Working muscle can increase its O<sub>2</sub> consumption by an enormous factor (up to 100 times for individual muscles)
  - Requires rapid O<sub>2</sub> delivery and fast removal of waste and heat.
- ▶ Any exercise for more than a few seconds duration
  - Requires aerobic respiration to provide enough energy
  - Anaerobic glycolysis gives only 2 ATPs/glucose while aerobic respiration gives 36 ATPs/glucose
  - O<sub>2</sub> consumption goes up with intensity of exercise because aerobic metabolism must be used to generate ATP
  - Glycogen is the main initial fuel source
- ▶ **Sympathetic nervous system causes glycogen breakdown to glucose**
- ▶ Liver releases glucose into the blood to supply muscles and brain

# Respiratory changes during Exercise

- ▶ *Tidal volume and respiratory frequency*
- ▶ In heavy exercise respiratory frequency in horses increases from about **15–45 breathes/min at rest to about 130–140 breathes/min**
- ▶ The tidal volume can increase from about **7 L/min to about 12–15 L/breath**
- ▶ These 2 factors together increase the pulmonary ventilation from about **210 L/min to over 1560 L/min**
- ▶ The stimuli for increased respiration in exercise are
  - Stimuli from motor cortex, from proprioceptors of joint and muscles
  - Elevated pulmonary blood flow with elevated venous CO<sub>2</sub>

S.N.	Criteria	Normal Respiration	Respiration during Exercise
	<b>O<sub>2</sub> Consumption</b>	C	40C (80L/Min.)
	<b>Minute ventilation</b>	MV	23 MV
	<b>cardiac output</b>	CO 30L/Min.	5-8 CO 150-300L/Min.
	<b>O<sub>2</sub> carrying capacity</b>		60% increase
	<b>Heart Beat</b>	30/ Minute	240-250/Minute

# *Oxygen consumption*

- ▶ O<sub>2</sub> consumption is augmented in horses by more than 40 fold between rest and exercise
- ▶ Maximal O<sub>2</sub> consumption can reach up to 80 L/min for a 440 kg horse
  - To provide this increase in O<sub>2</sub> consumption, minute ventilation, cardiac output and Hb level (by release of stored erythrocytes from spleen) increases
- ▶ 40-fold increase in O<sub>2</sub> consumption is provided by **23 fold increase** in minute ventilation and **5-8 fold increase in cardiac output**.
- ▶ This is due to the ability to augment O<sub>2</sub> consumption by 40 fold, cardiac output by 8 fold, O<sub>2</sub> extraction by 5 fold, 60% increase in O<sub>2</sub> carrying capacity.

# *Blood gases*

- ▶ During strenuous exercise horses develop metabolic acidosis
- ▶ PaCO<sub>2</sub> increases in horses (in many species, PaCO<sub>2</sub> falls due to higher respiratory frequency)
- ▶ Arterial PO<sub>2</sub> decreases (reason not known) in horses and human athletes
- ▶ Arterial pH declines
- ▶ Combined effect of low PO<sub>2</sub>, pH and high temperature delivers more O<sub>2</sub> to tissues (decreased affinity of Hb to O<sub>2</sub>)
- ▶ *Respiration is usually not the limiting factor in endurance exercise*
- ▶ In older horses and during prolonged intense exercise, bleeding from nose (*epistaxis*) may be observed which is called as ***exercise-induced pulmonary haemorrhage***.

# Cardiac Changes during Exercise

- ▶ *Stroke Volume and Heart Rate Go Up, Increasing Cardiac Output*
- ▶ In exercise the heart rate of horses rises from about 30 beats/min to 240–250 beats/min; in dogs it is raised from about 100 to 300 beats/min
- ▶ The stroke volume is increased in dogs and horses which are due to increased sympathetic nerve activity, increased venous return and increase in EDV.
- ▶ Myocardial contractility is increased
  - Due to increase in preload and afterload, increase in myocardial O<sub>2</sub> consumption
- ▶ Combined, these adjustments can increase cardiac output (CO) of horses from approximately **30 L/min to nearly 150–300 L/min (5–8 fold increase)**
- ▶ Cardiac output is controlled by the ANS and by hormones like epinephrine

- ▶ The increased CO in exercise will cause the **pressure to rise from 130/80 to 230/100 mmHg**
- ▶ **The cardiovascular system may be the limiting factor in endurance exercise**
- ▶ Blood flow increases in pulmonary circulation, coronary vessels and skeletal muscles and in skin but blood flow is decreased in nonworking muscles and splanchnic organs.

# Circulatory Response to Exercise

- ▶ Skeletal muscle blood flow increases during exercise and this increase is caused by local metabolic control mechanisms.
- ▶ From initiation of exercise, metabolic products accumulate in the muscles and  $O_2$  concentration decreases. Both factors produce vasodilatation of the skeletal muscle arterioles and this vasodilatation is a local response not dependent on nerves or hormones.
- ▶ Blood flow increase to the skeletal muscles which delivers more  $O_2$  and removes the metabolic end products, thus maintaining balance between metabolic activity and blood flow.
- ▶ In exercise more blood is shifted to muscle and heart tissue; less blood goes to the viscera and tissues not needed at the moment:
- ▶ Flow to skin is initially reduced but is later increased to get rid of excess heat

Tissue	Rest L/min	Exercise L/min
Viscera	1.2	0.6
Muscle & Heart	1.0	26.0
Other	2.8	3.4
Total	5.0	30.0

- ▶ **However, there are three *compensatory neural mechanisms* –**
- ▶ central command
- ▶ Exercise reflex and
- ▶ Arterial baroreceptor reflex available to the body to maintain sufficient arterial B.P. and skeletal muscle blood flow.
- ▶ ***Non-neural Mechanisms:*** Two non-neural mechanisms help to increase cardiac output during exercise.
- ▶ ***Muscle Pump:***
- ▶ ***Respiratory Pump:***

# NON-RESPIRATORY FUNCTIONS OF LUNGS

- ▶ THERMAL REGULATION – PANTING
- ▶ Defense Function
- ▶ Metabolic Function
- ▶ *Metabolic acidosis*
- ▶ *Metabolic alkalosis*
- ▶ *Respiratory Acidosis*
- ▶ *Respiratory Alkalosis*