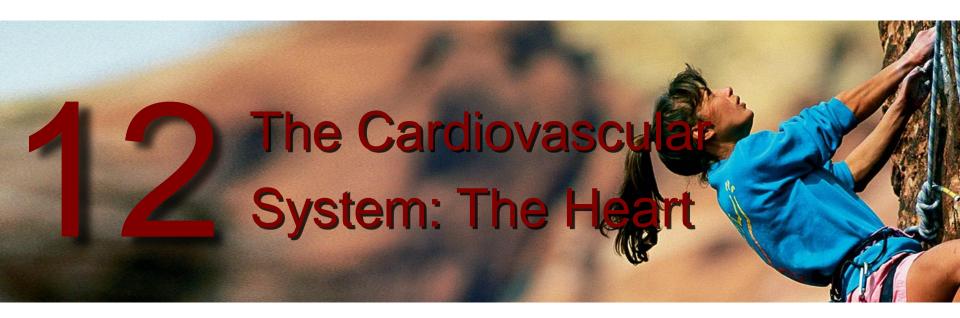
Essentials of Anatomy & Physiology, 4th Edition Martini/Bartholomew



PowerPoint® Lecture Outlines prepared by Alan Magid, Duke University

Slides 1 to 65

Heart Pumps Blood into Two Circuits in Sequence

- Pulmonary circuit
 - To and from the lungs
- Systemic circuit
 - To and from the rest of the body

Three Kinds of Blood Vessels

- Arteries
 - Carry blood away from heart and carry it to the capillaries
- Capillaries
 - Microscopic vessels where exchange between cells and blood takes place
- Veins
 - Receive blood from capillaries and carry it back to the heart

Two Sets of Pumping Chambers in Heart

- Right atrium
 - Receives systemic blood
- Right ventricle
 - Pumps blood to lungs (pulmonary)
- Left atrium
 - Receives blood from lungs
- Left ventricle
 - Pumps blood to organ systems (systemic)

Overview of the Cardiovascular System

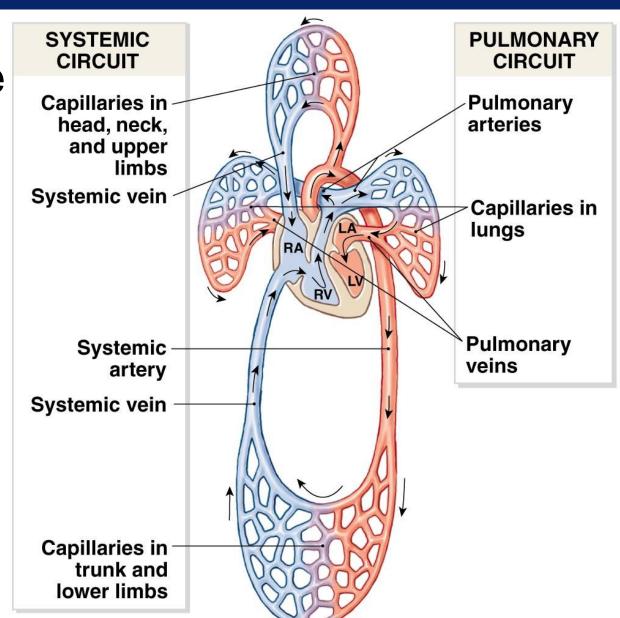


Figure 12-1

Pericardial Cavity

- Surrounds the heart
- Lined by pericardium
 - Two layers
 - Visceral pericardium (epicardium)
 - Covers heart surface
 - Parietal pericardium
 - Lines pericardial sac that surrounds heart

The Location of the Heart in the Thoracic Cavity

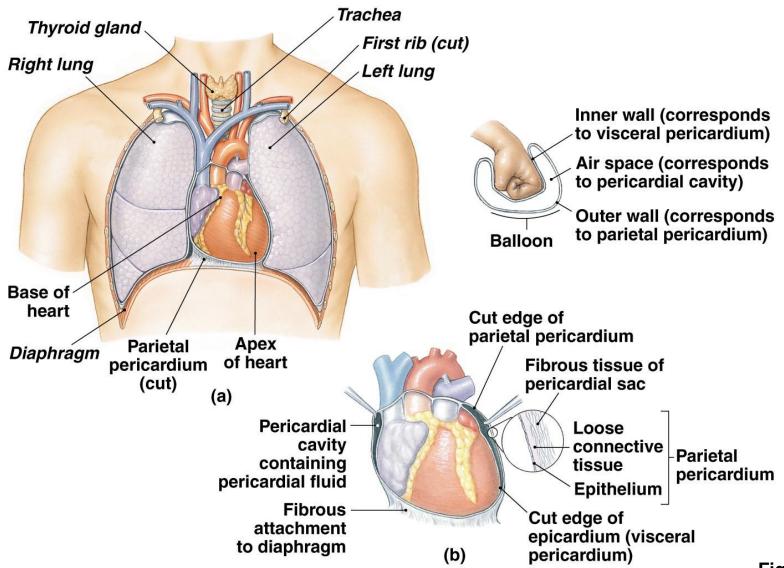


Figure 12-2

Surface Features of the Heart

- Auricle—Outer portion of atrium
- Coronary sulcus—Deep groove that marks boundary of atria and ventricles
- Anterior interventricular sulcus
- Posterior interventricular sulcus
 - Mark boundary between left and right ventricles
 - Sulci contain major cardiac blood vessels
 - Filled with protective fat

The Surface Anatomy of the Heart

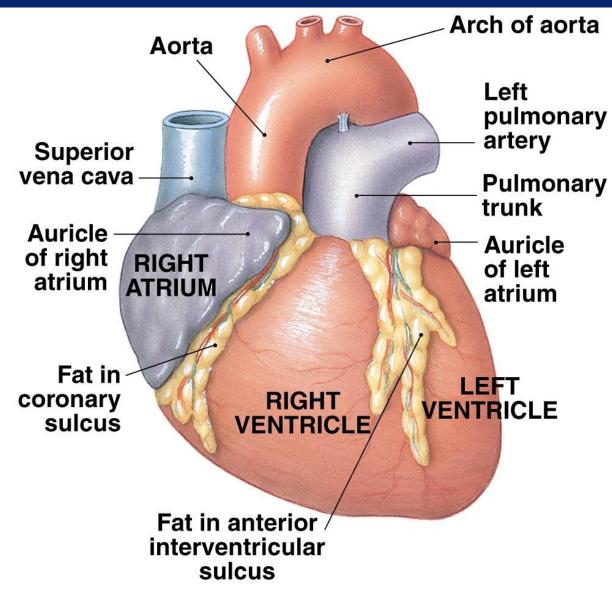


Figure 12-3(a) 1 of 2

(a) Anterior surface (1 of 2)

The Surface Anatomy of the Heart

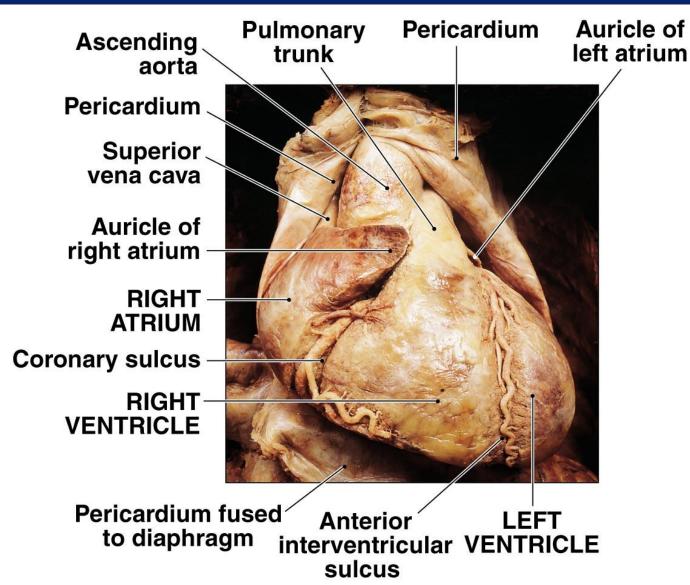
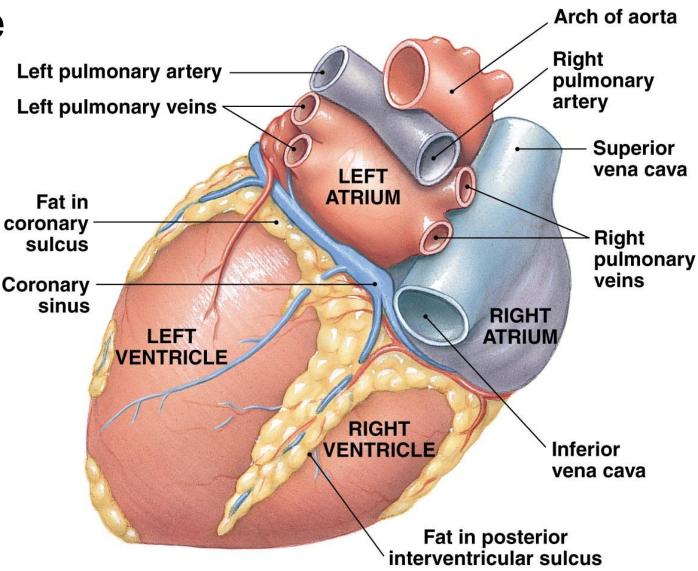


Figure 12-3(a) 2 of 2

(a) Anterior surface (2 of 2)

The Surface Anatomy of the Heart



(b) Posterior surface

The Heart Wall

- Epicardium (visceral pericardium)
 - Outermost layer
 - Serous membrane
- Myocardium
 - Middle layer
 - Thick muscle layer
- Endocardium
 - Inner lining of pumping chambers
 - Continuous with endothelium

The Heart Wall and Cardiac Muscle Tissue

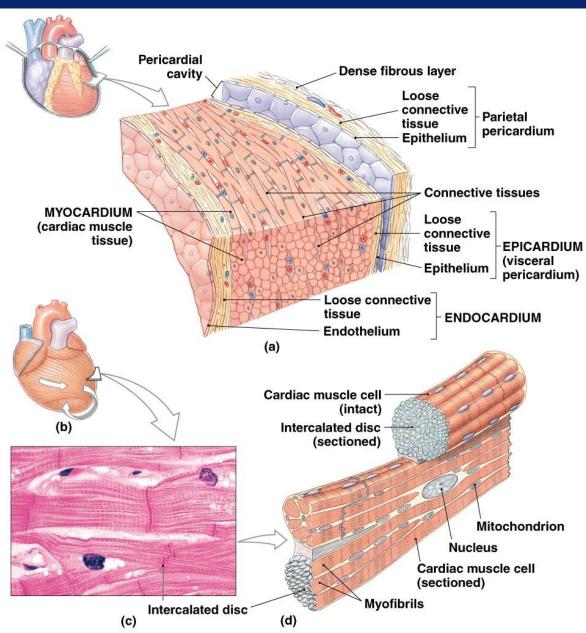
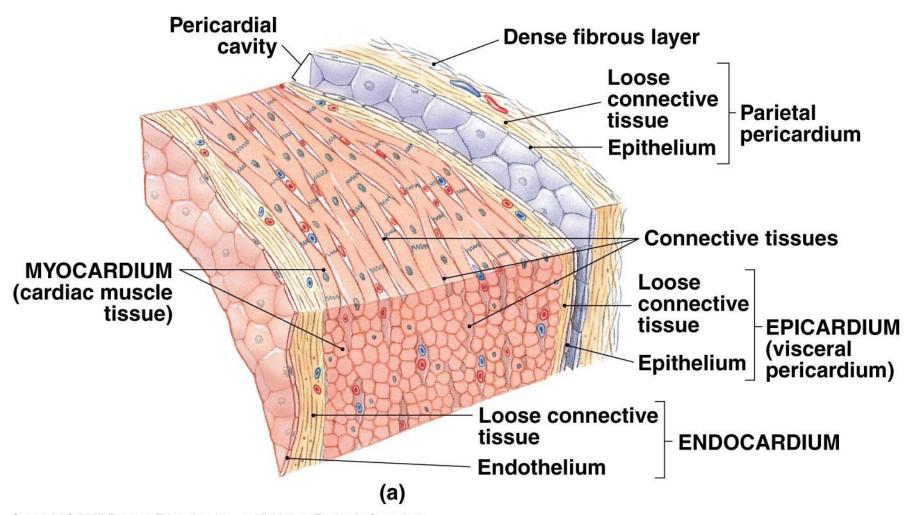


Figure 12-4

The Heart Wall and Cardiac Muscle Tissue



The Heart Wall and Cardiac Muscle Tissue

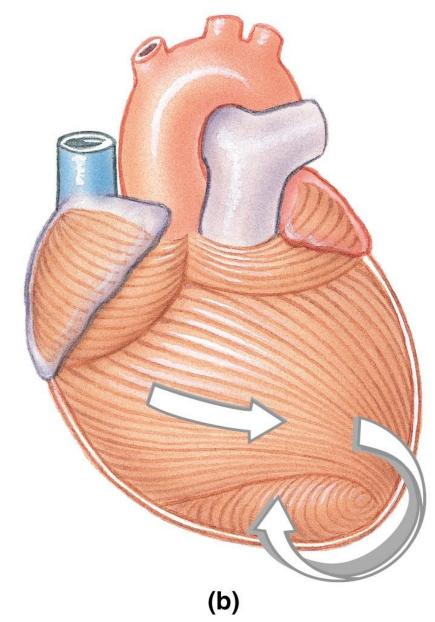
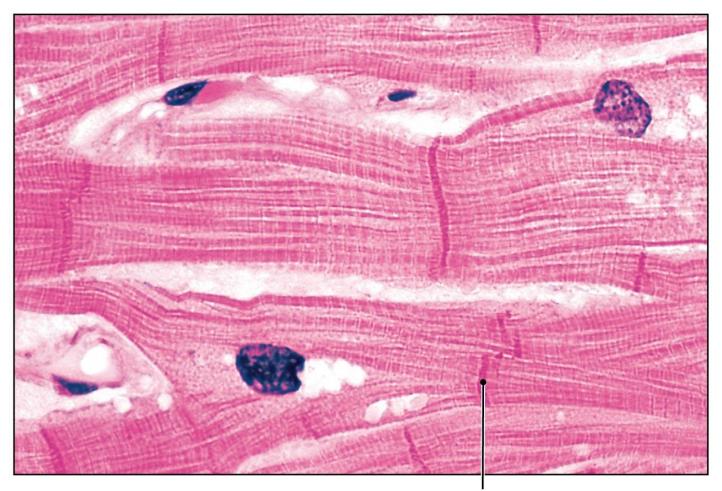
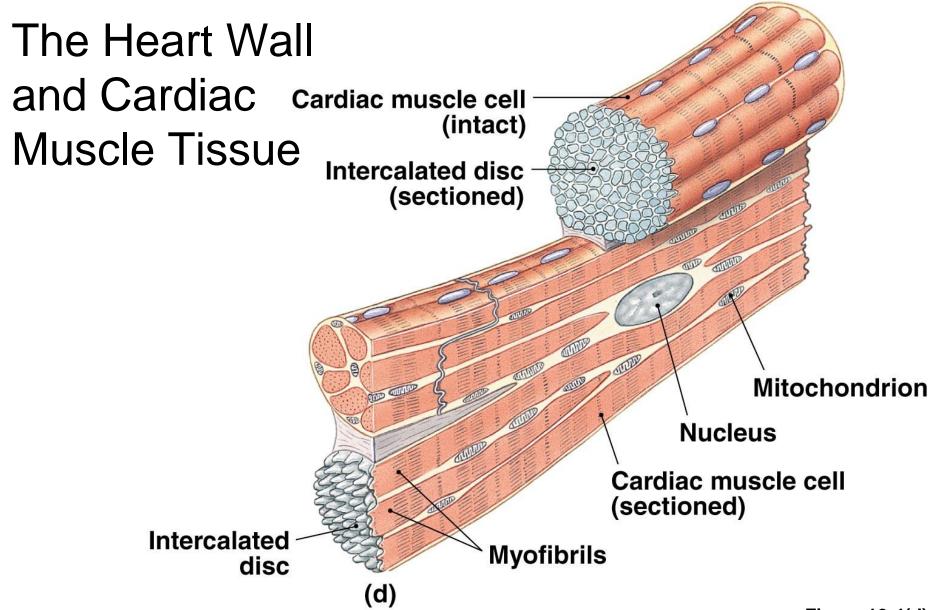


Figure 12-4(b)

The Heart Wall and Cardiac Muscle Tissue



Intercalated disc



Cardiac Muscle Cells

- Shorter than skeletal muscle fibers
- Have single nucleus
- Have striations (sarcomere organization)
- Depend on aerobic metabolism
- Connected by intercalated discs
 - Desmosomes transmit tension
 - Gap junctions transmit action potential

Internal Anatomy and Organization

- Interatrial septum
 - Separates atria
- Interventricular septum
 - Separates ventricles
- Atrioventricular valves
 - Located between atrium and ventricle
 - Ensure one-way flow from atrium to ventricle

Blood Flow in the Heart

- Superior and inferior venae cavae
 - Large veins carry systemic blood to right atrium
- Right atrium sends blood to right ventricle
 - Flows through right AV valve
 - Bounded by three cusps (tricuspid valve)
 - Cusps anchored by chordae tendinae
 - Chordae attached to papillary muscles

Blood Flow in the Heart (cont'd)

- Right ventricle pumps blood through pulmonary semilunar valve
 - Enters *pulmonary trunk*
 - Flows to lungs through right, left pulmonary arteries where it picks up oxygen
- Pulmonary veins carry blood to left atrium
- Left atrium sends blood to left ventricle
 - Enters through left AV valve (bicuspid or mitral)
- Left ventricle pumps blood to aorta
 - Through aortic semilunar valve to systems

The Sectional Anatomy of the Heart

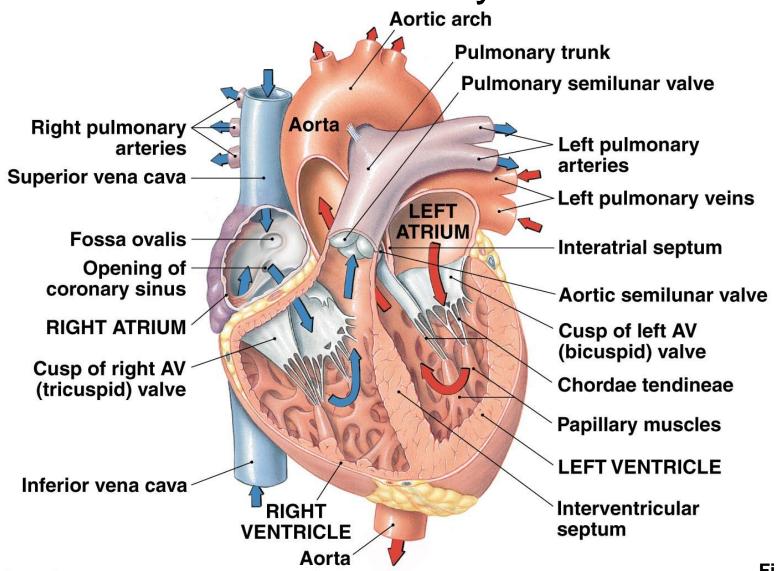
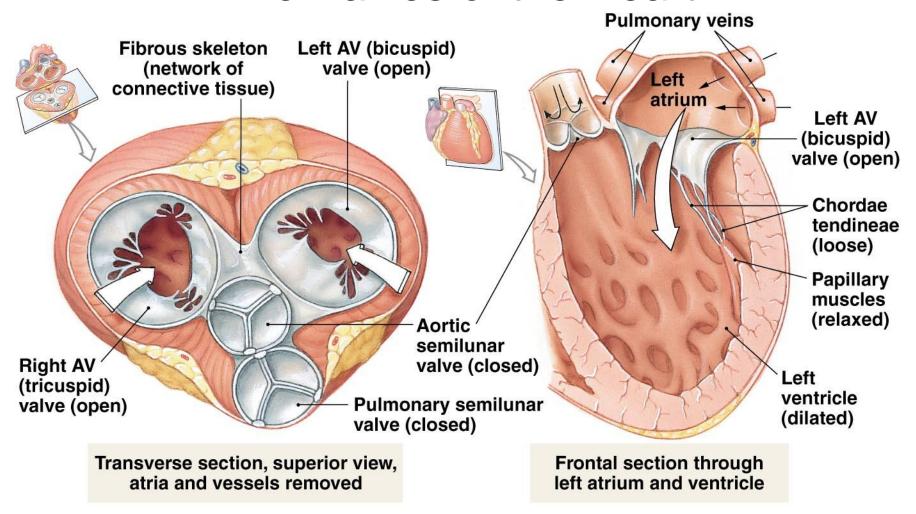


Figure 12-5

Functional Anatomy of the Heart

- Left ventricular myocardium much thicker than right
 - Reflects functional difference in load
- Valves ensure one-way flow of blood
 - Prevent backward flow (regurgitation)
- Fibrous skeleton supports valves and muscle cells

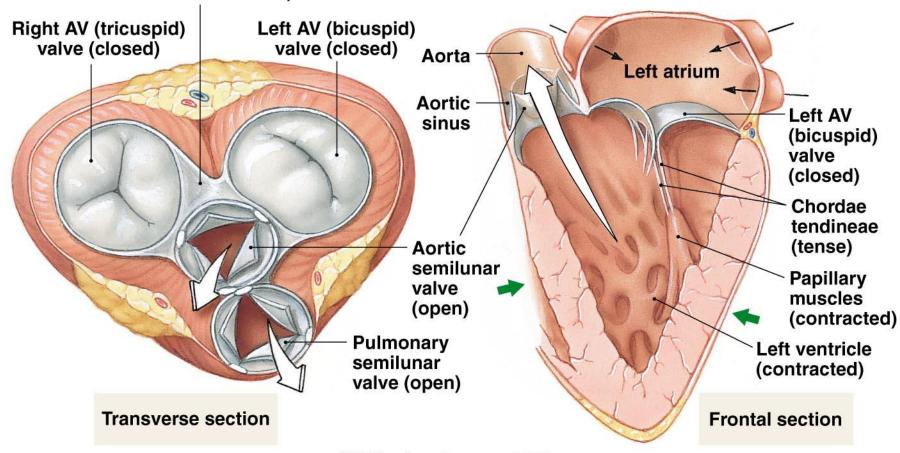
The Valves of the Heart



(a) Relaxed ventricles

The Valves of the Heart

Fibrous skeleton (network of connective tissue)



(b) Contracting ventricles

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The Heart: Anatomy

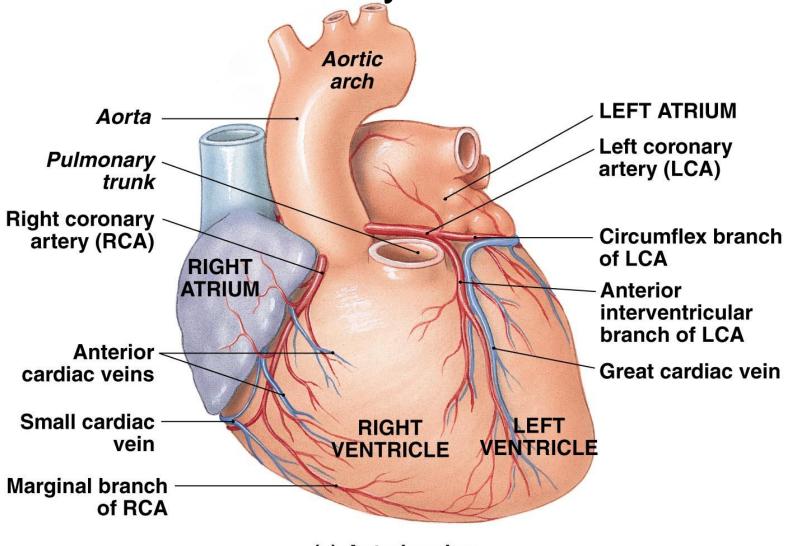
Key Note

The heart has four chambers, the right atrium and ventricle with the pulmonary circuit and left atrium and ventricle with the systemic circuit. The left ventricle's greater workload makes it more massive than the right, but the two pump equal amounts of blood. AV valves prevent backflow from the ventricles into the atria, and semilunar valves prevent backflow from the outflow vessels into the ventricles.

The Blood Supply to the Heart

- Coronary circulation meets heavy demands of myocardium for oxygen, nutrients
- Coronary arteries (right, left) branch from aorta base
- Anastomoses (arterial interconnections) ensure constant blood supply
- Drainage is to right atrium
 - Great, middle cardiac veins drain capillaries
 - Empty into coronary sinus

The Coronary Circulation



(a) Anterior view

The Coronary Circulation

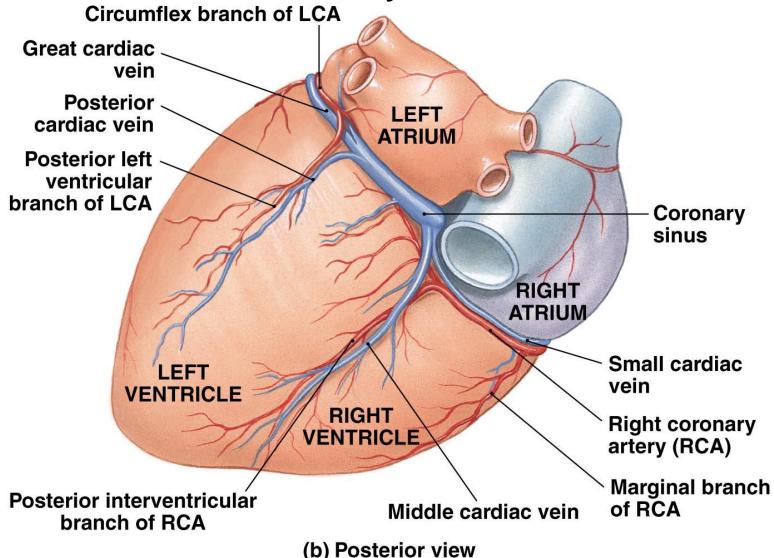


Figure 12-7(b)

The Heartbeat

Heartbeat Needs two Types of Cardiac Cells

- Contractile cells
 - Provide the pumping action
- Cells of the conducting system
 - Generate and spread the action potential

The Heartbeat

Differences between Cardiac and Skeletal Muscle Cells

- Cardiac action potential has long plateau phase
- Cardiac muscle has long, slow twitch
- Cardiac muscle has long refractory period
 - Can't be tetanized

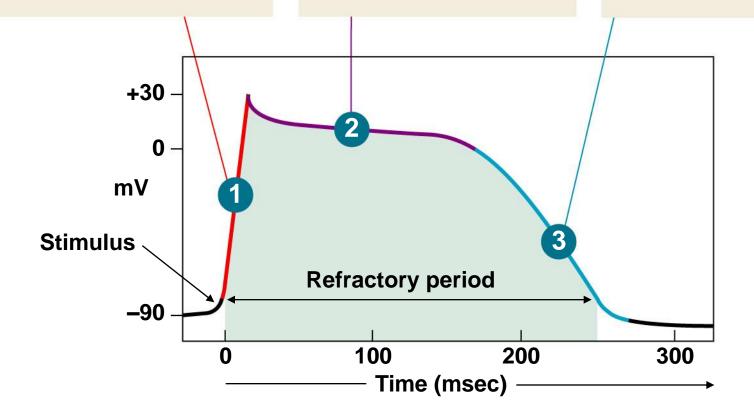
Cause: Na⁺ entry Duration: 3-5 msec Ends with: Closure of voltage-regulated sodium channels

2 The Plateau

Cause: Ca²⁺ entry Duration: ~175 msec Ends with: Closure of calcium channels

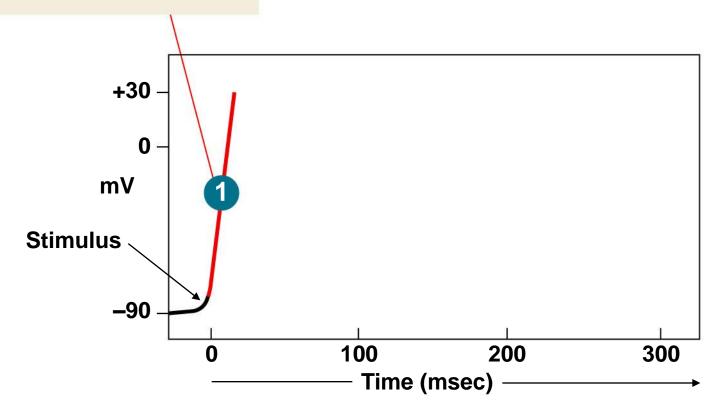
3 Repolarization

Cause: K+ loss
Duration: 75 msec
Ends with: Closure of
potassium channels



Cause: Na+ entry
Duration: 3-5 msec
Ends with: Closure of

voltage-regulated sodium channels

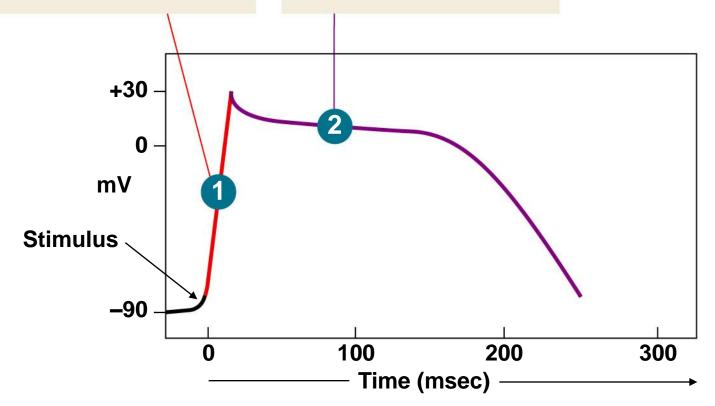


Cause: Na+ entry
Duration: 3-5 msec
Ends with: Closure of
voltage-regulated

voltage-regulated sodium channels

2 The Plateau

Cause: Ca²⁺ entry Duration: ~175 msec Ends with: Closure of calcium channels



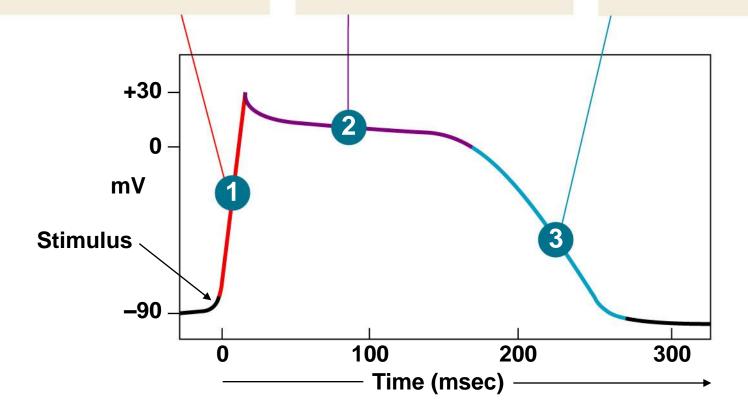
Cause: Na⁺ entry Duration: 3-5 msec Ends with: Closure of voltage-regulated sodium channels

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3 Repolarization

Cause: K+ loss
Duration: 75 msec
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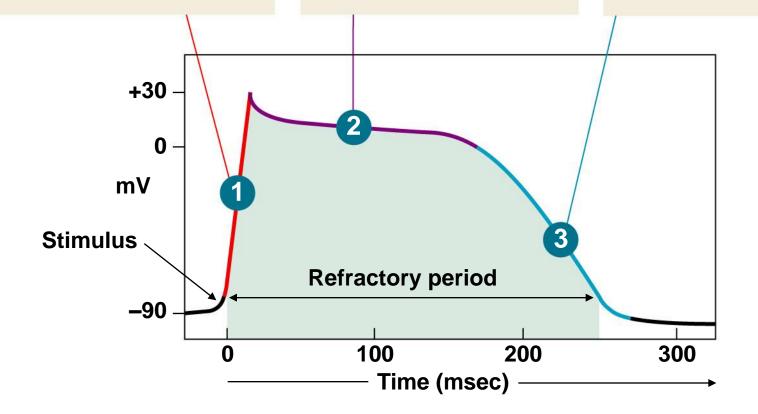
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Action Potentials and Muscle Cell Contraction in Skeletal and Cardiac Muscle

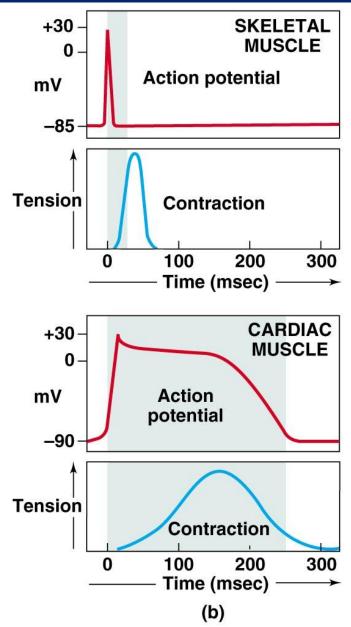


Figure 12-8(b)

The Conducting System

- Initiates and spreads electrical impulses in heart
- Two types of cells
 - Nodal cells
 - Pacemaker cells

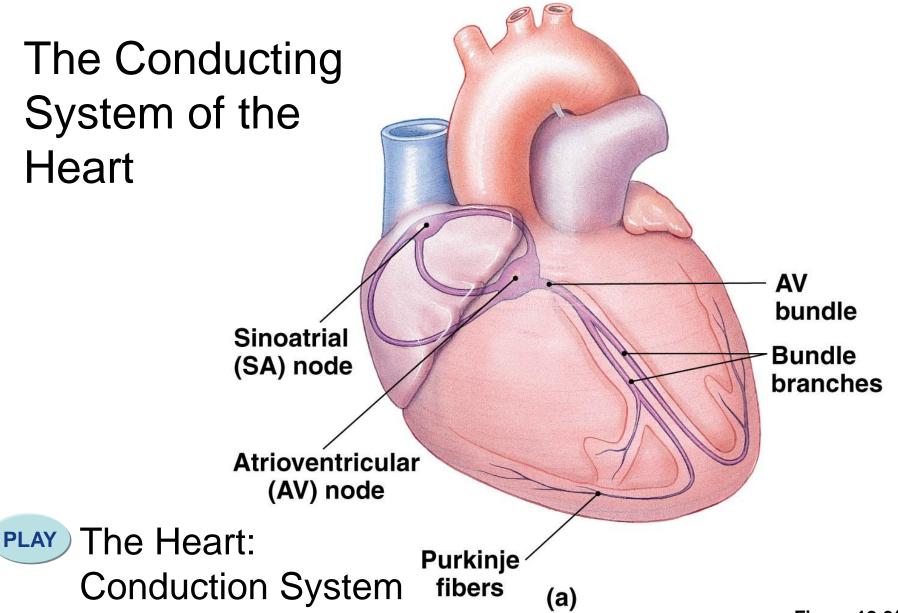
Reach threshold first

Set heart rate

- Conducting cells
 - Distributes stimuli to myocardium

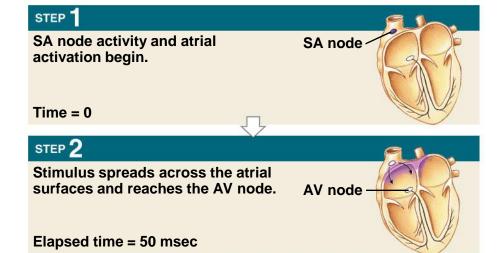
The Conducting System (cont'd)

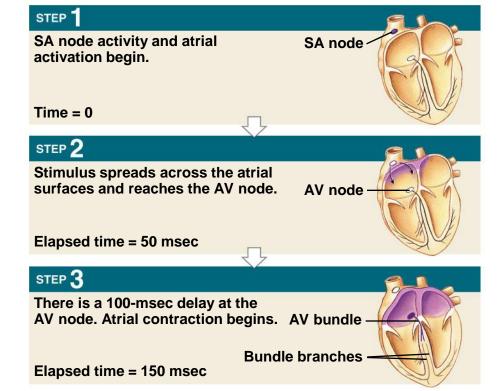
- Heart is self-exciting
 - Pacemaker cells establish heart rate
 - Normal pacemaker is sinoatrial (SA) node
 - Impulse spreads from SA node:
 - Across atria
 - To atrioventricular (AV) node
 - To AV bundle and bundle branches
 - Via Purkinje fibers to ventricles



STEP SA node activity and atrial SA node activation begin. Time = 0STEP 2 Stimulus spreads across the atrial surfaces and reaches the AV node. **AV** node Elapsed time = 50 msec STEP 3 There is a 100-msec delay at the AV node. Atrial contraction begins. AV bundle **Bundle branches** Elapsed time = 150 msec STEP 4 The impulse travels along the interventricular septum within the AV bundle and the bundle branches to the Purkinje fibers. Elapsed time = 175 msec STEP 5 The impulse is distributed by Purkinje fibers and relayed throughout the ventricular myocardium. Atrial contraction is completed, and ventricular contraction begins. Purkinje fibers Elapsed time = 225 msec







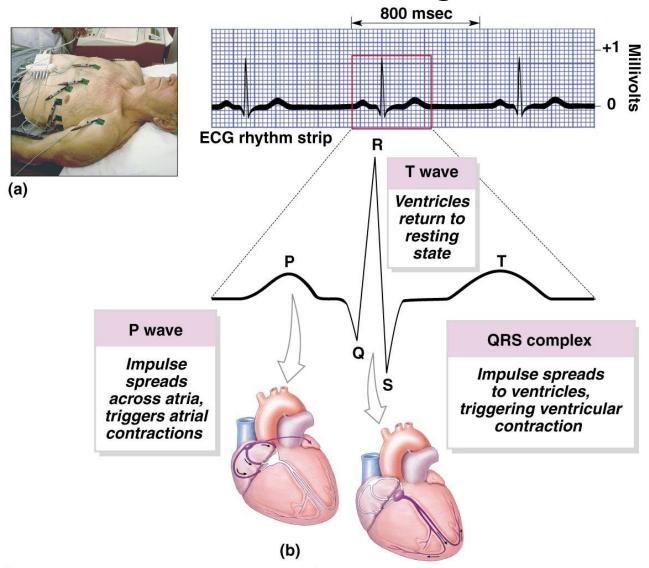
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The Electrocardiogram (ECG or EKG)

- A recording of the electrical activity of the heart
- Three main components
 - P wave
 - Atrial depolarization
 - QRS complex
 - Ventricular depolarization
 - T wave
 - Ventricular repolarization

An Electrocardiogram

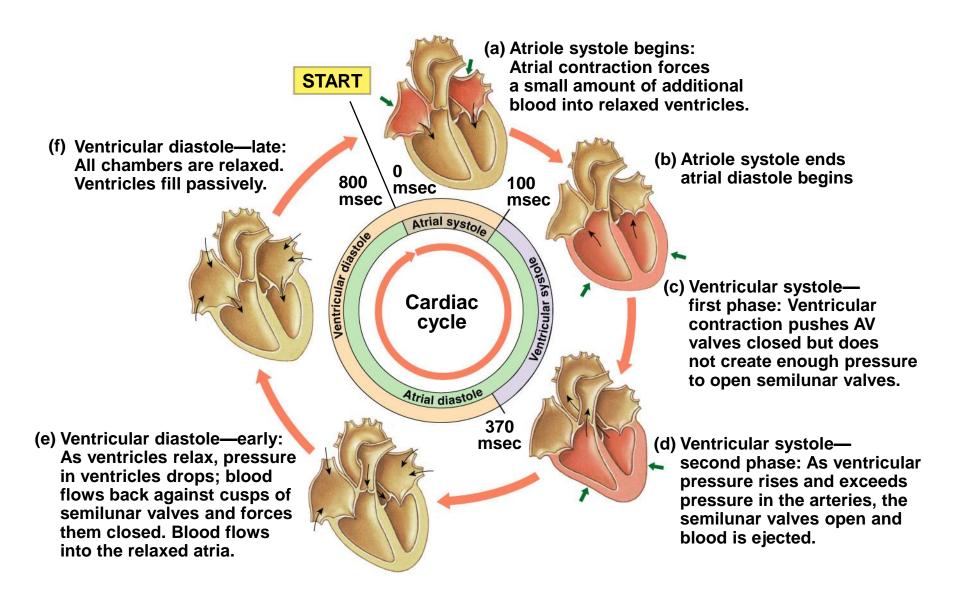


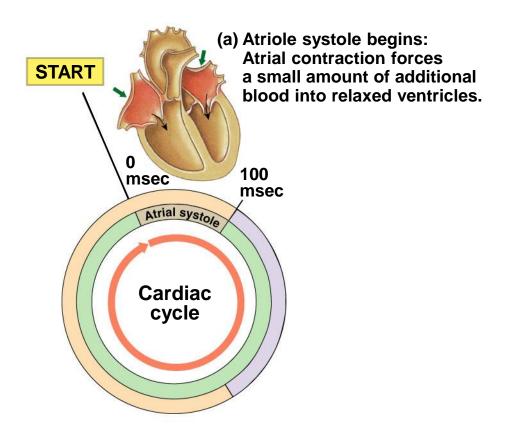
Key Note

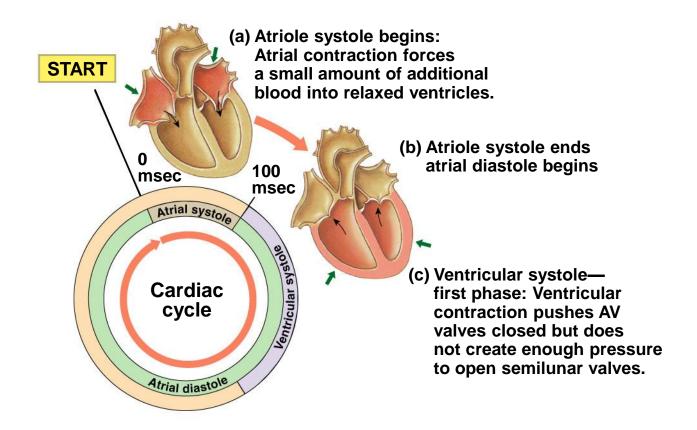
The heart rate is established by the SA node, as modified by autonomic activity, hormones, ions, etc. From there, the stimulus is conducted through the atrium to the AV node, the AV bundle, the bundle branches, and Purkinje fibers to the ventricular myocardium. The ECG shows the electrical events associated with the heartbeat.

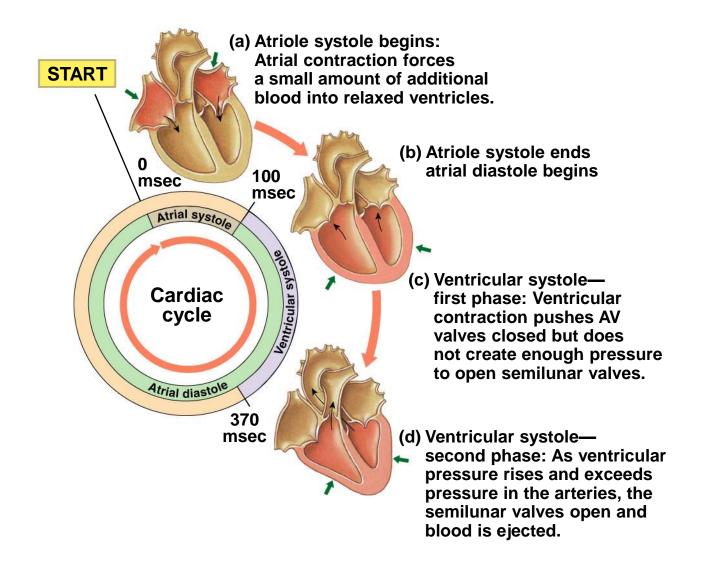
The Cardiac Cycle

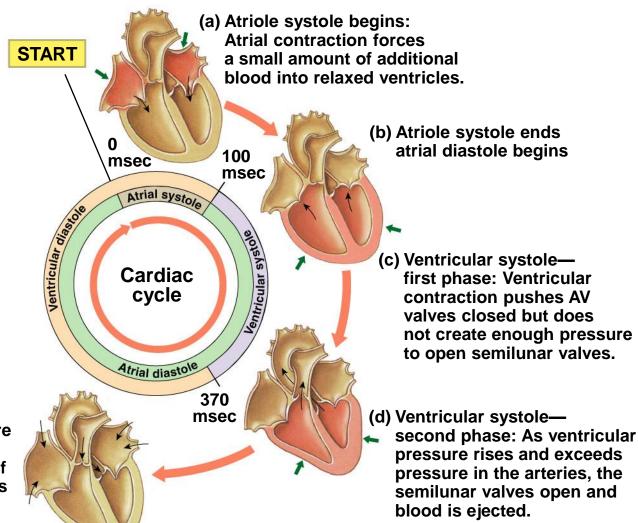
- Two phases in cardiac cycle
 - Systole
 - Contraction phase
 - Both ventricles simultaneously
 - Diastole
 - Relaxation phase



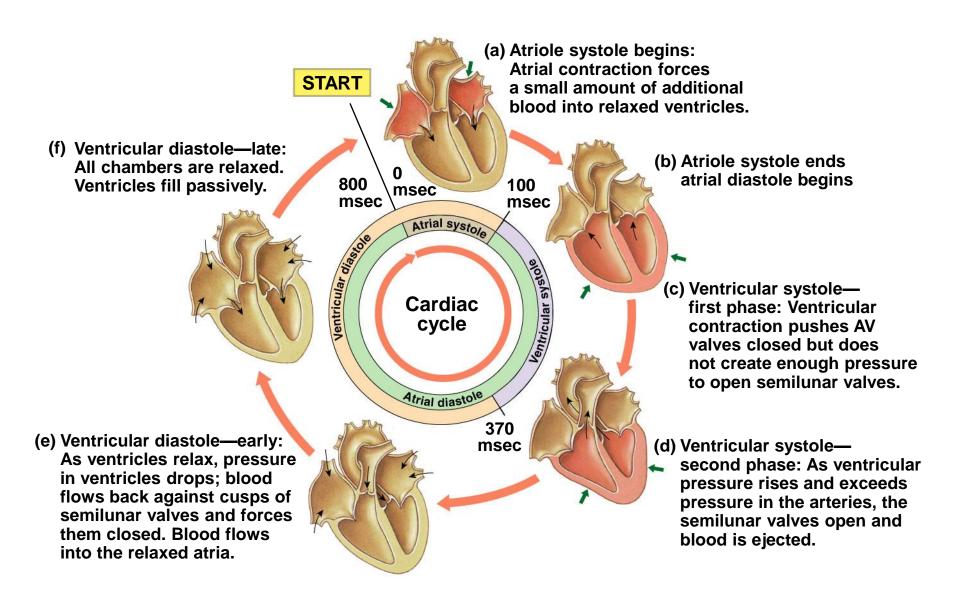








(e) Ventricular diastole—early:
As ventricles relax, pressure
in ventricles drops; blood
flows back against cusps of
semilunar valves and forces
them closed. Blood flows
into the relaxed atria.



Heart Sounds

- Generated by closing of valves
- Two main heart sounds
 - First sound (*lubb*)
 - Closing of AV valve
 - Second sound (dupp)
 - Closing of aortic valve
- Indicate start/stop of systole
- Heard with stethoscope

Some Essential Definitions

- Heart dynamics—Movements and forces generated during cardiac contraction
- Stroke volume—Amount of blood pumped in a single beat
- Cardiac output—Amount of blood pumped each minute

Factors Controlling Cardiac Output

- Blood volume reflexes
- Autonomic innervation
 - Heart rate effects
 - Stroke volume effects
- Hormones

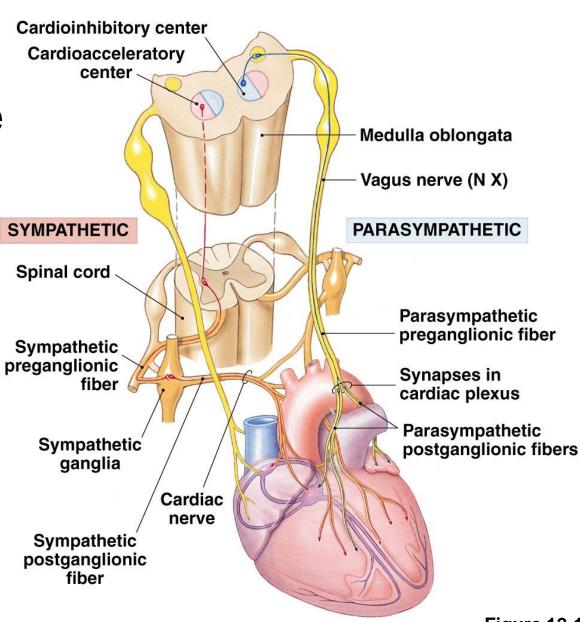
Blood Volume Reflexes

- Stimulated by changes in venous return
 - VR is amount of blood entering heart
- Atrial reflex
 - Speeds up heart rate
 - Triggered by stretching wall of right atrium
- Frank-Starling principle
 - Increases ventricular output
 - Triggered by stretching wall of ventricles

Autonomic Control of the Heart

- Parasympathetic innervation
 - Releases acetylcholine (ACh)
 - Lowers heart rate and stroke volume
- Sympathetic innervation
 - Releases norepinephrine (NE)
 - Raises heart rate and stroke volume

Autonomic Innervation of the Heart



Hormone Effects on Cardiac Output

- Adrenal medulla hormones
 - Epinephrine, norepinephrine released
 - Heart rate and stroke volume increased
- Other hormones that increase output
 - Thyroid hormones
 - Glucagon

CNS Control of the Heart

- Basic control in medulla oblongata
 - Cardioacceleratory center
 - Activation of sympathetic neurons
 - Cardioinhibitory center
 - Governing of parasympathetic neurons
 - Other inputs
 - Higher centers
 - Blood pressure sensors
 - Oxygen, carbon dioxide sensors

Key Note

Cardiac output is the amount of blood pumped by the left ventricle each minute. It is adjusted moment-to-moment by the ANS, and by circulating hormones, changes in blood volume and in venous return. A healthy person can increase cardiac output by three-fold to five-fold.