

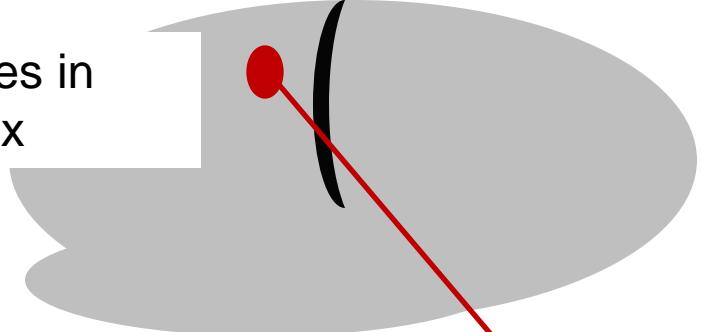
# **Respiratory Physiology**

**Dr. Lwin Aye Thet**

# **Neural control of breathing**

- **Voluntary control system**
- **Automatic control system**

Motor neurones in  
cerebral cortex

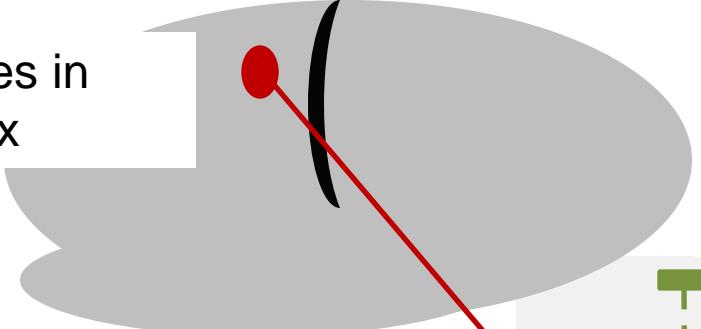


Voluntary Control

RESPIRATORY  
MUSCLES

RMN in spinal cord

Motor neurones in  
cerebral cortex



Respiratory neurones  
in pons

Respiratory neurones  
in medulla oblongata

Voluntary Control

Automatic  
Control

RESPIRATORY  
MUSCLES

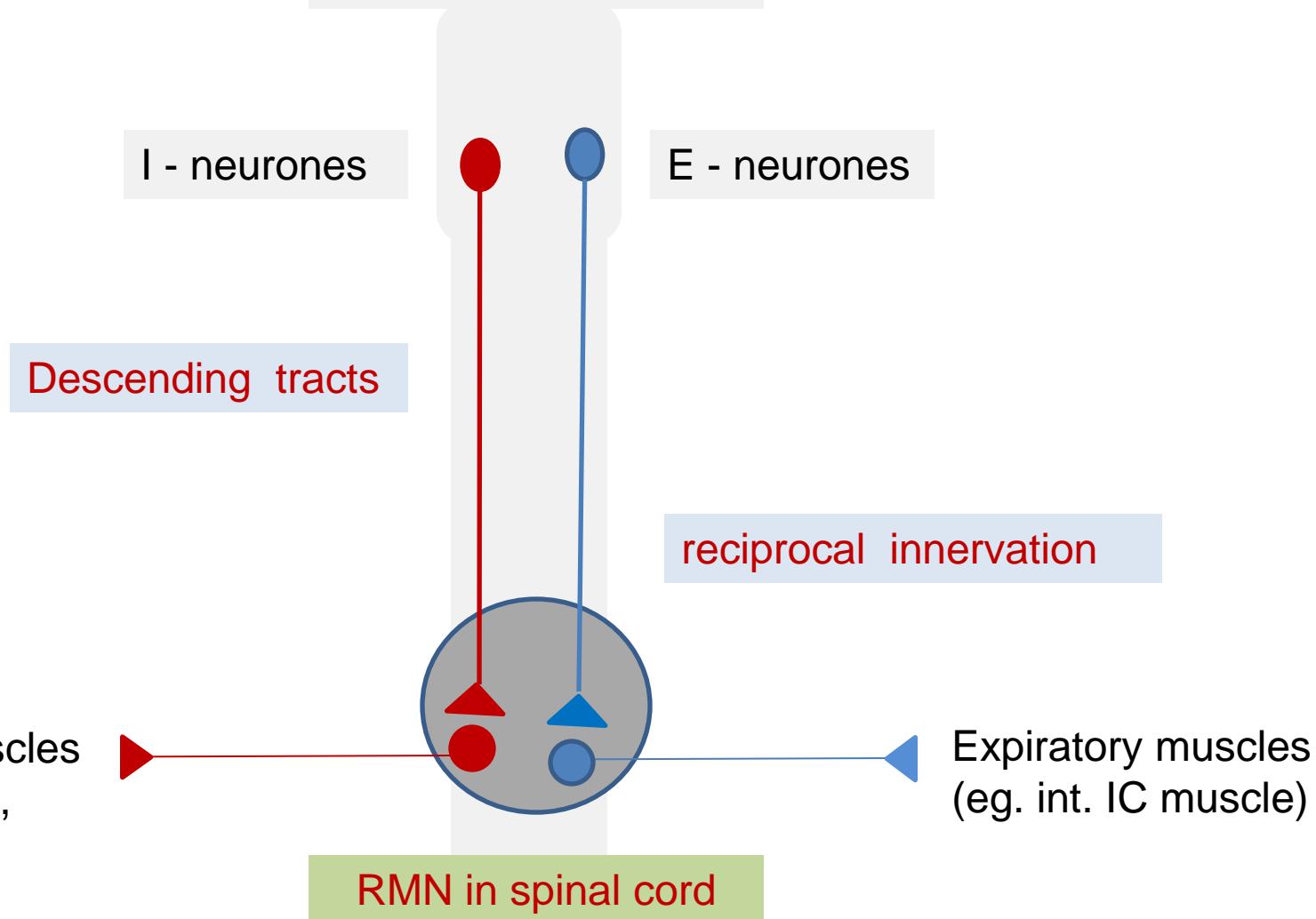
## Neural control of breathing

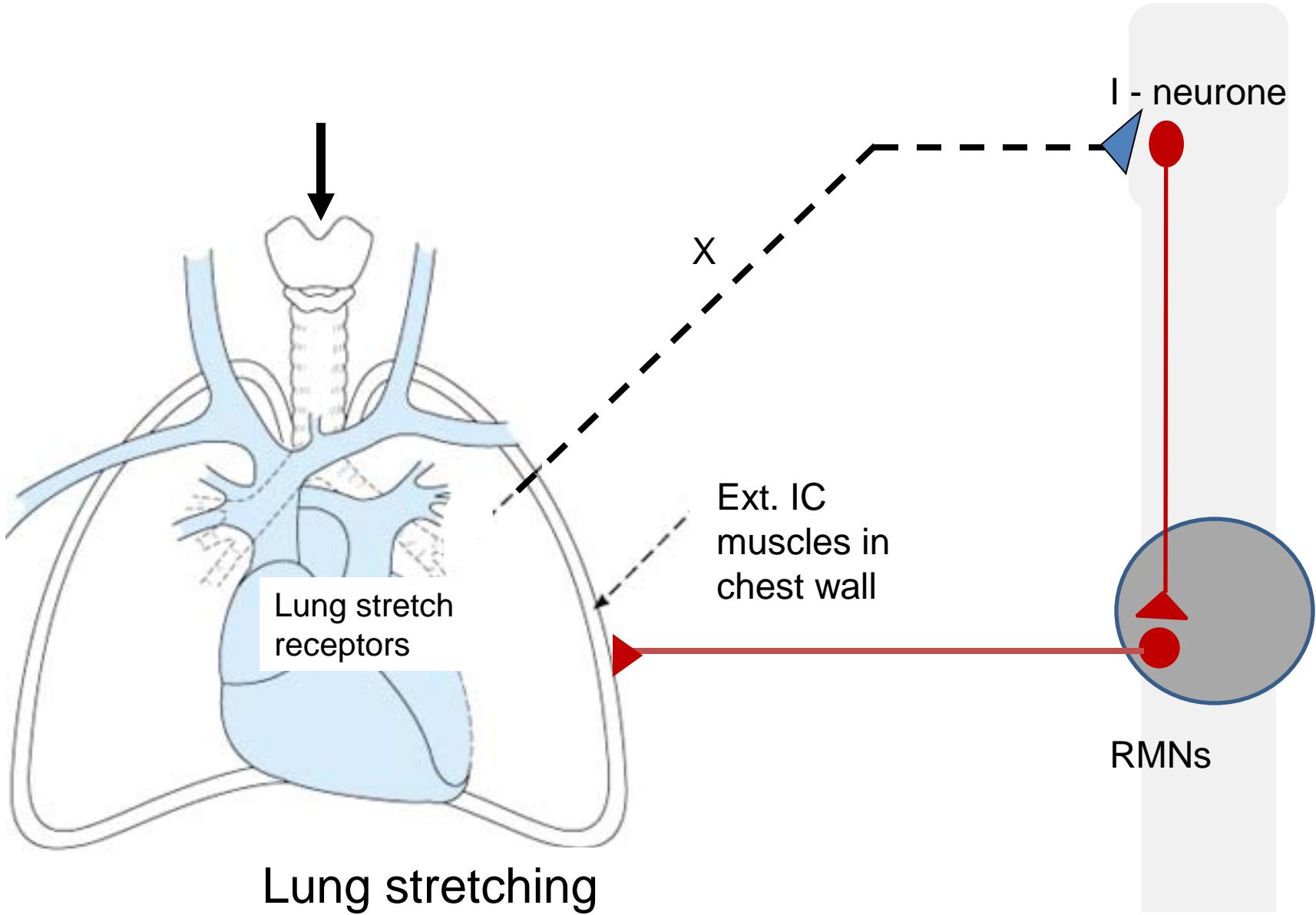
### Automatic control system

- Pons
- Medulla:
  - dorsal group
  - ventral group

# Automatic Control

Respiratory neurones  
in medulla oblongata





# **Neural control of breathing**

## **Medullary system**

### **Dorsal group**

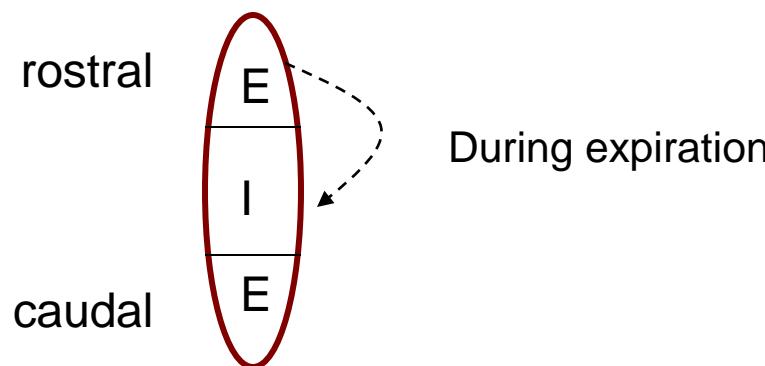
- **Location**
  - In and near the NTS
- **Composition**
  - I - neurones
- **Efferent**
  - To RMNs
- **Afferent**
  - Lung stretch receptors from airway
  - Respiratory chemoreceptors

# Neural control of breathing

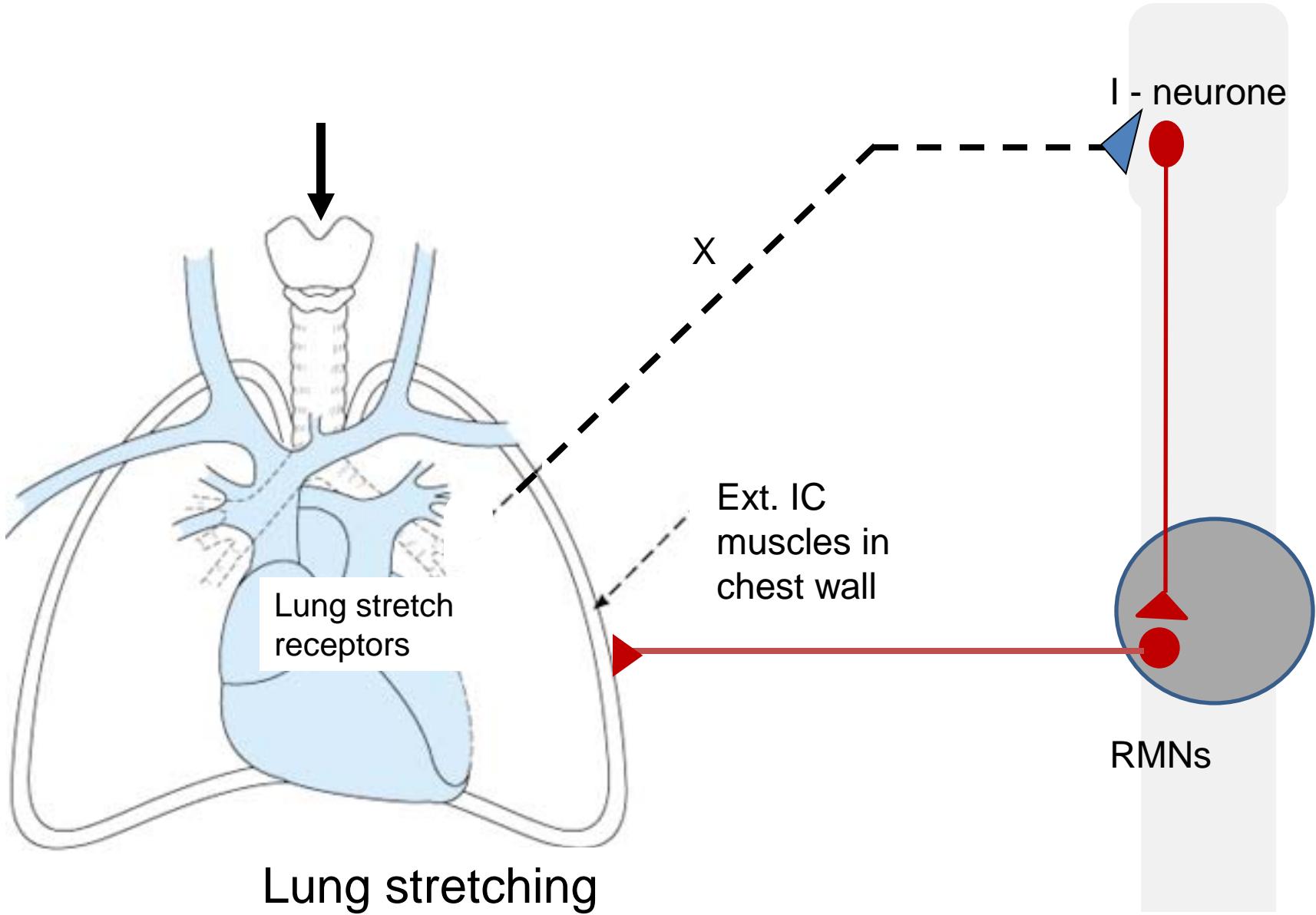
## Medullary system

### Ventral group

- **Location**
- Extend through the NA and NRA
- **Composition**
- Both I and E neurones



- **Efferent**
- Some to RMNs



## **Neural control of breathing**

### **Pontine centre (Pneumotaxic centre)**

- **Location**
  - In the medial parabrachial and K-F nuclei of the DL pons
- **Composition**
  - I and E – neurones
  - Both I/E
- **Efferent**
  - to medullary centre  
**(Inhibitory)**

## Neural control of breathing

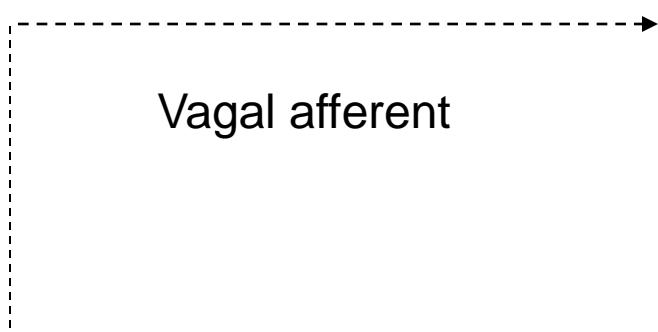
Pontine centre

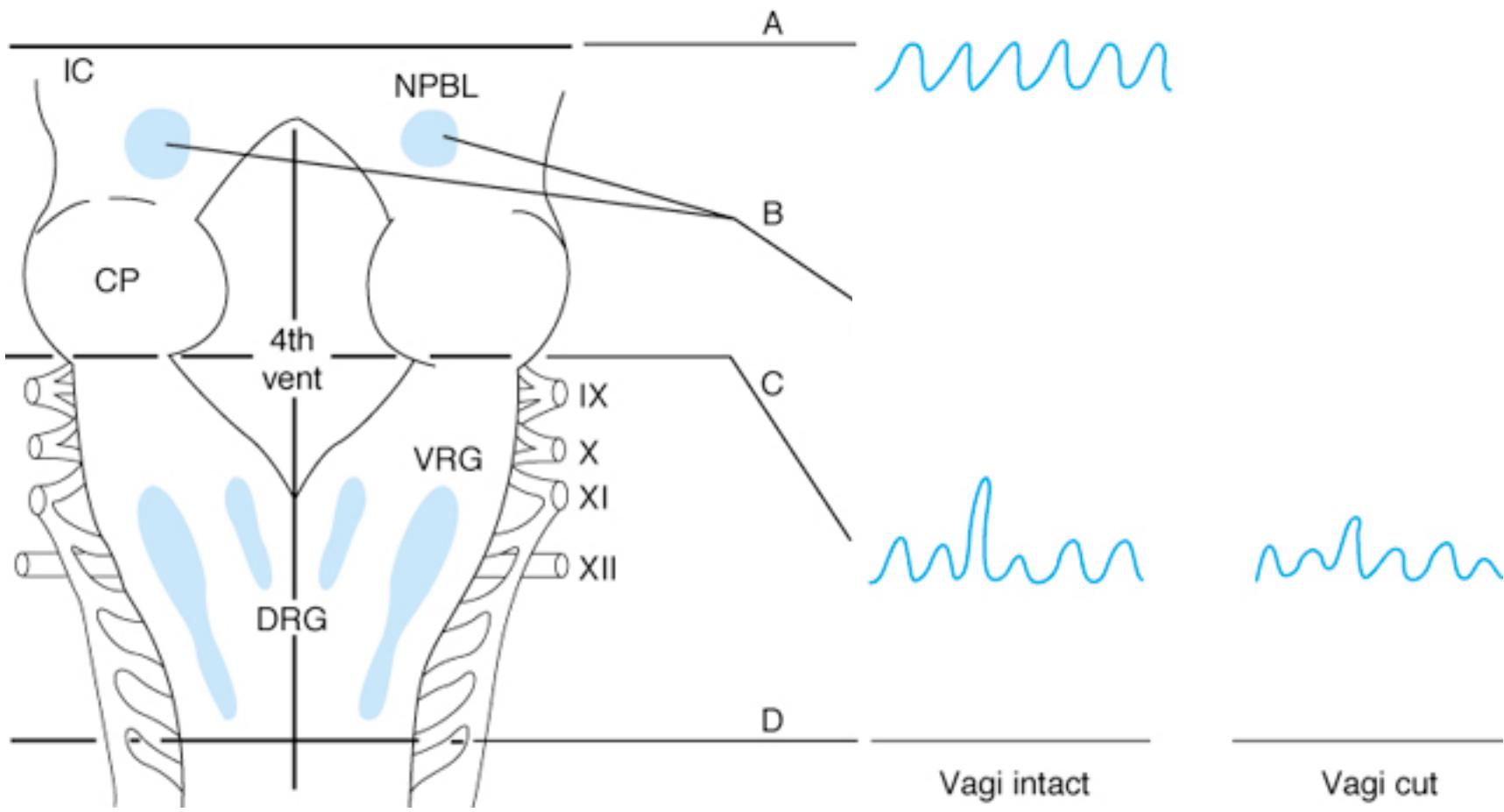
Medullary centre  
(I neurones)

Lung stretch  
receptors

RMNs

Vagal afferent

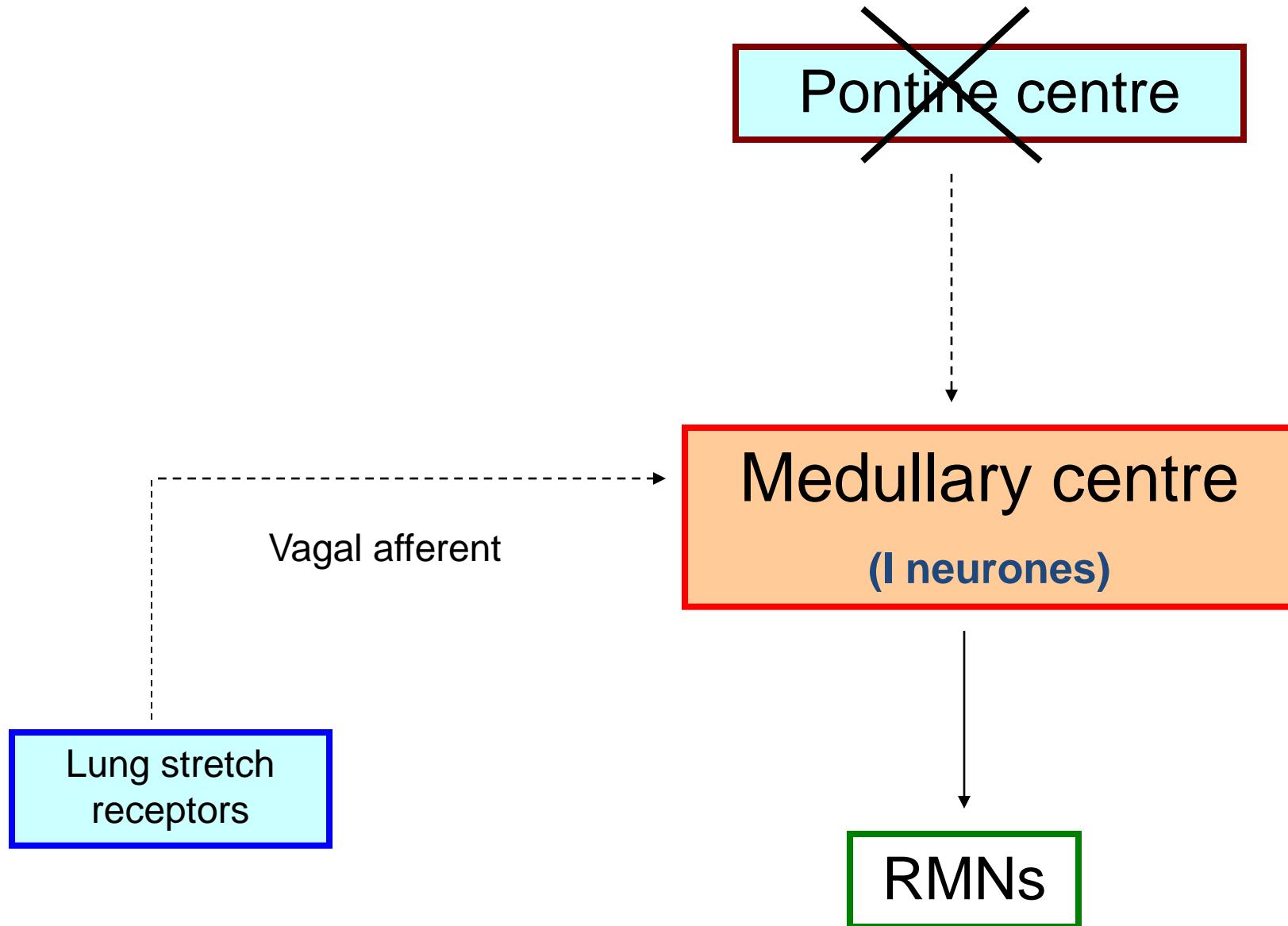


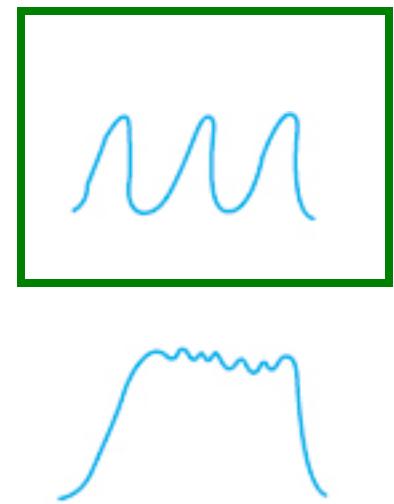
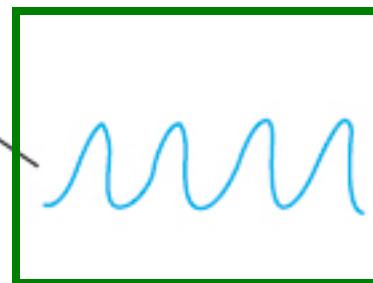
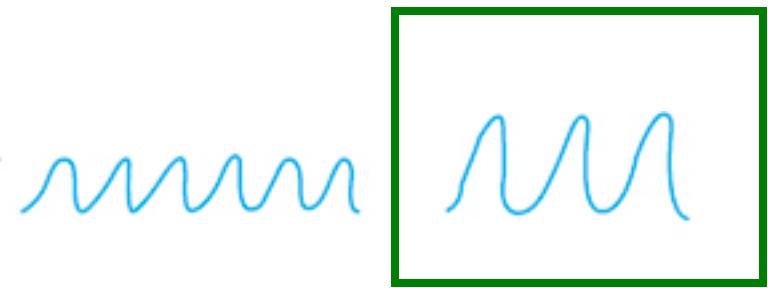
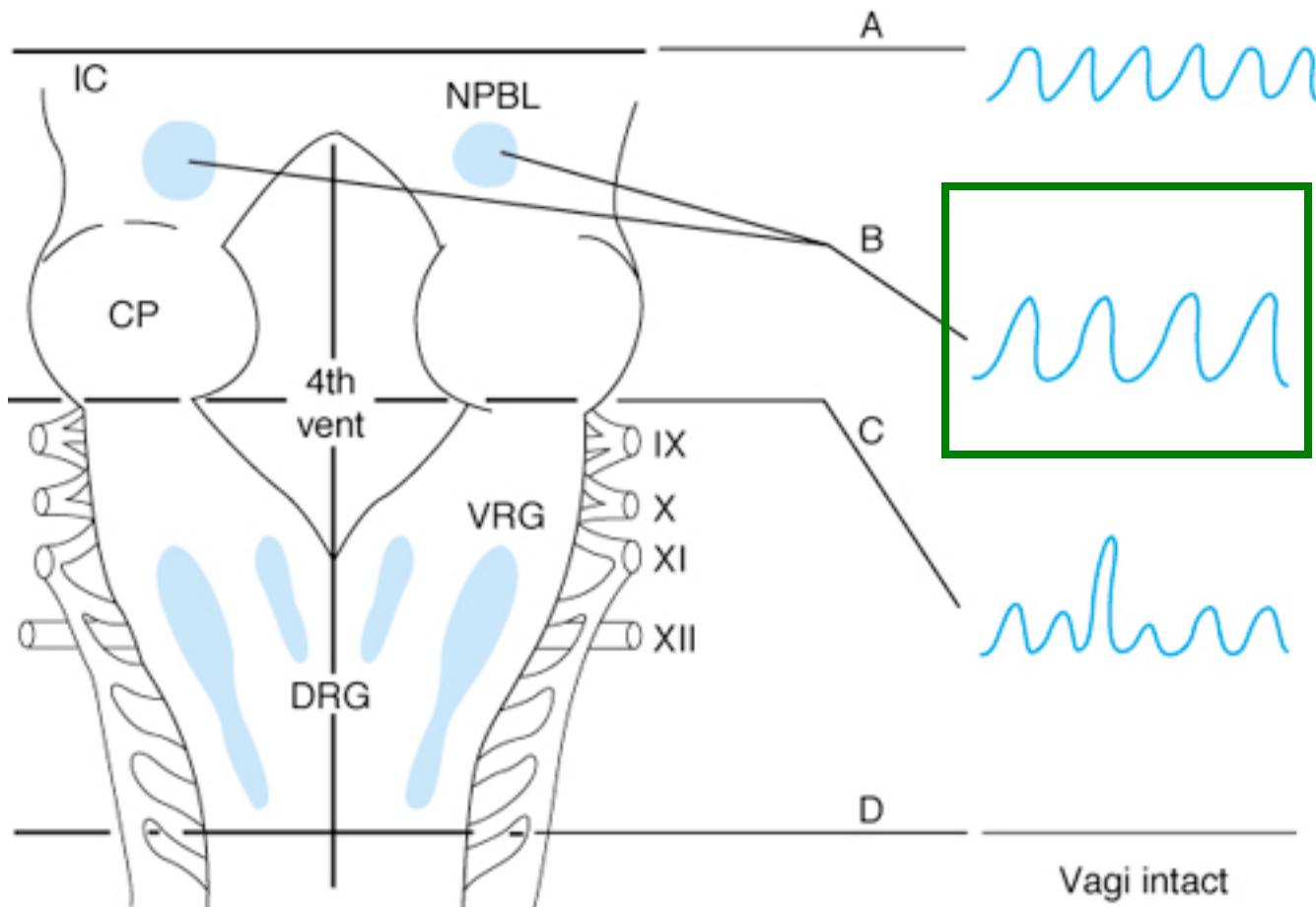


Respiratory pattern generator: Medulla

No pacemakers

Pre-Bottzinger complex: pacemaker





Vagi intact

Vagi cut

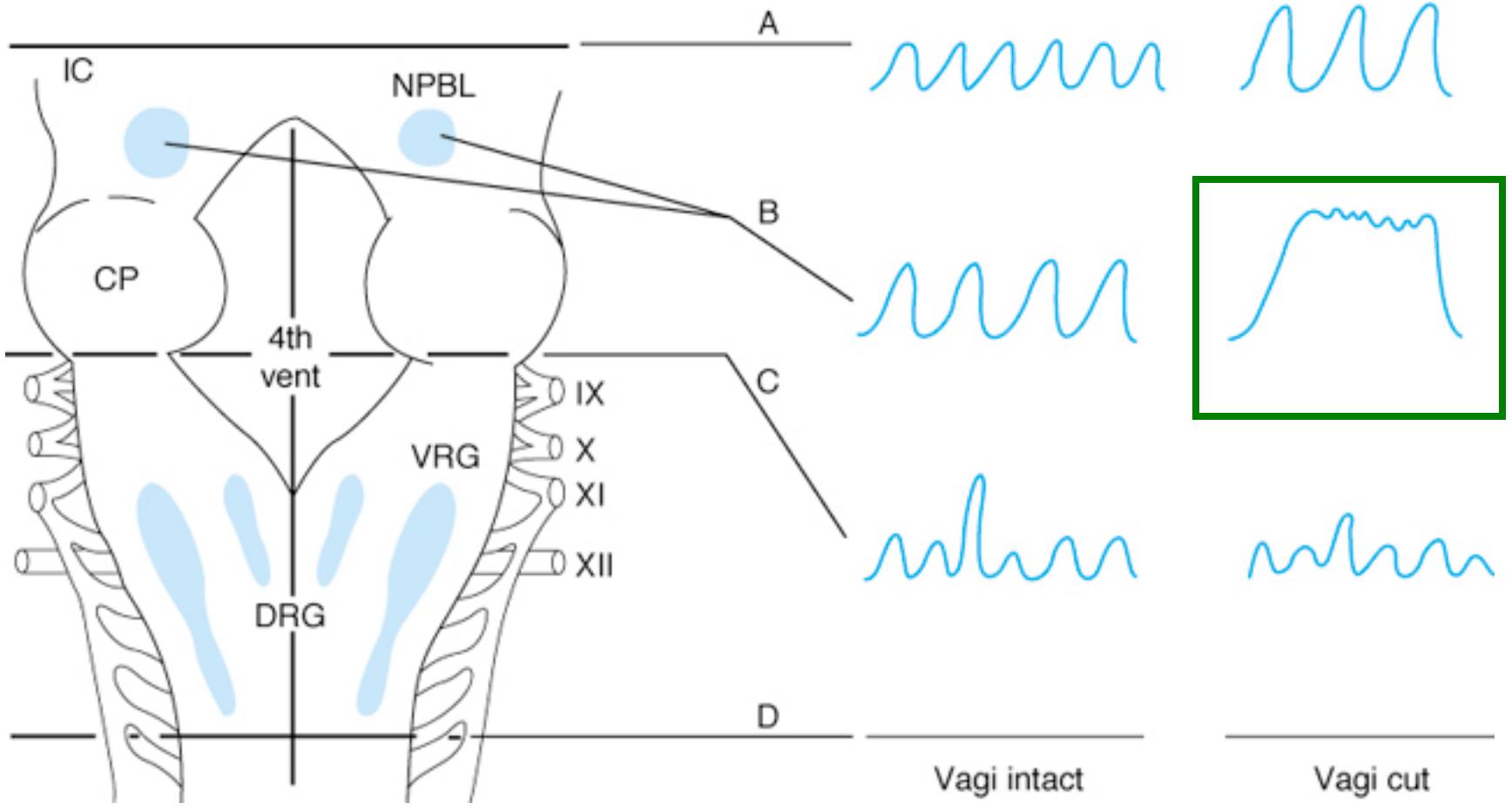
~~Pontine centre~~

Medullary centre  
(I neurones)

Lung stretch  
receptors

RMNs

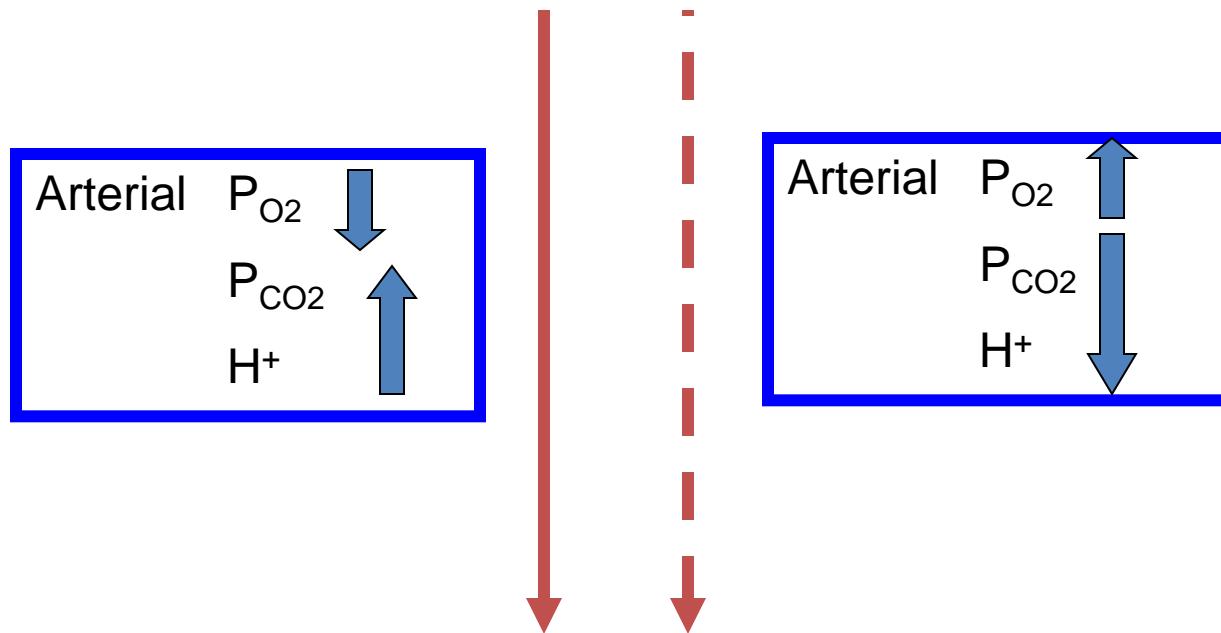
Vagal afferent



## Function of the Pneumotaxic centre

- switching inspiration and expiration

# Blood chemistry changes



Medullary centre

(I neurones)

# Chemical control of breathing

## Respiratory chemoreceptors

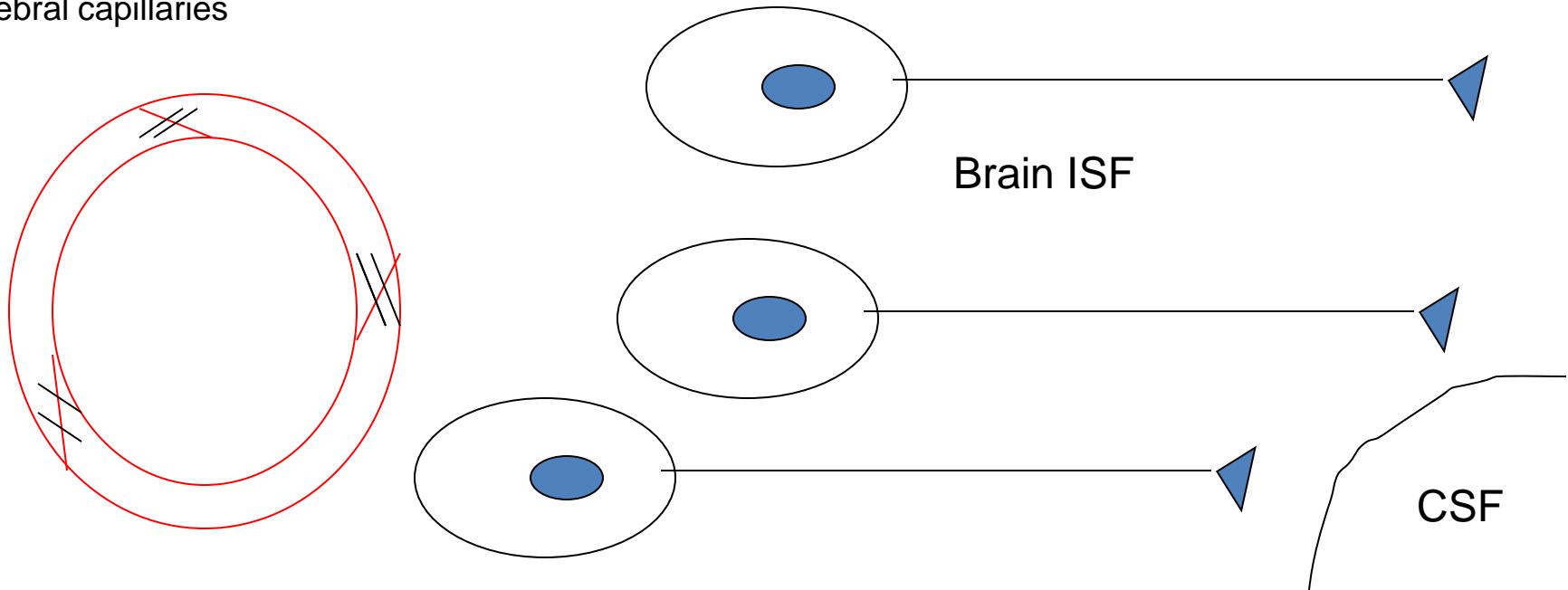
- Central chemoreceptors  
(medullary chemoreceptors)
- Peripheral chemoreceptors  
(carotid body and aortic bodies)

## Chemical control of breathing

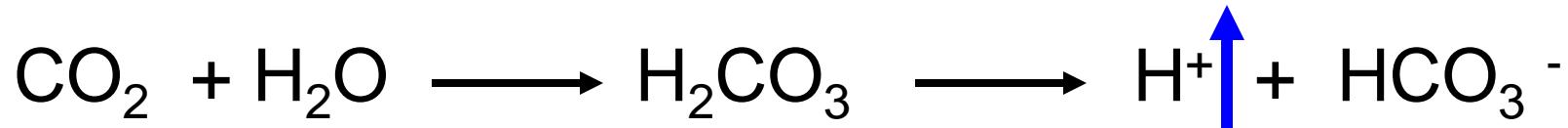
### Central chemoreceptors (medullary chemoreceptors)

- in the ventral surface to medulla
- sensitive to  $[H^+]$  of brain ISF and CSF

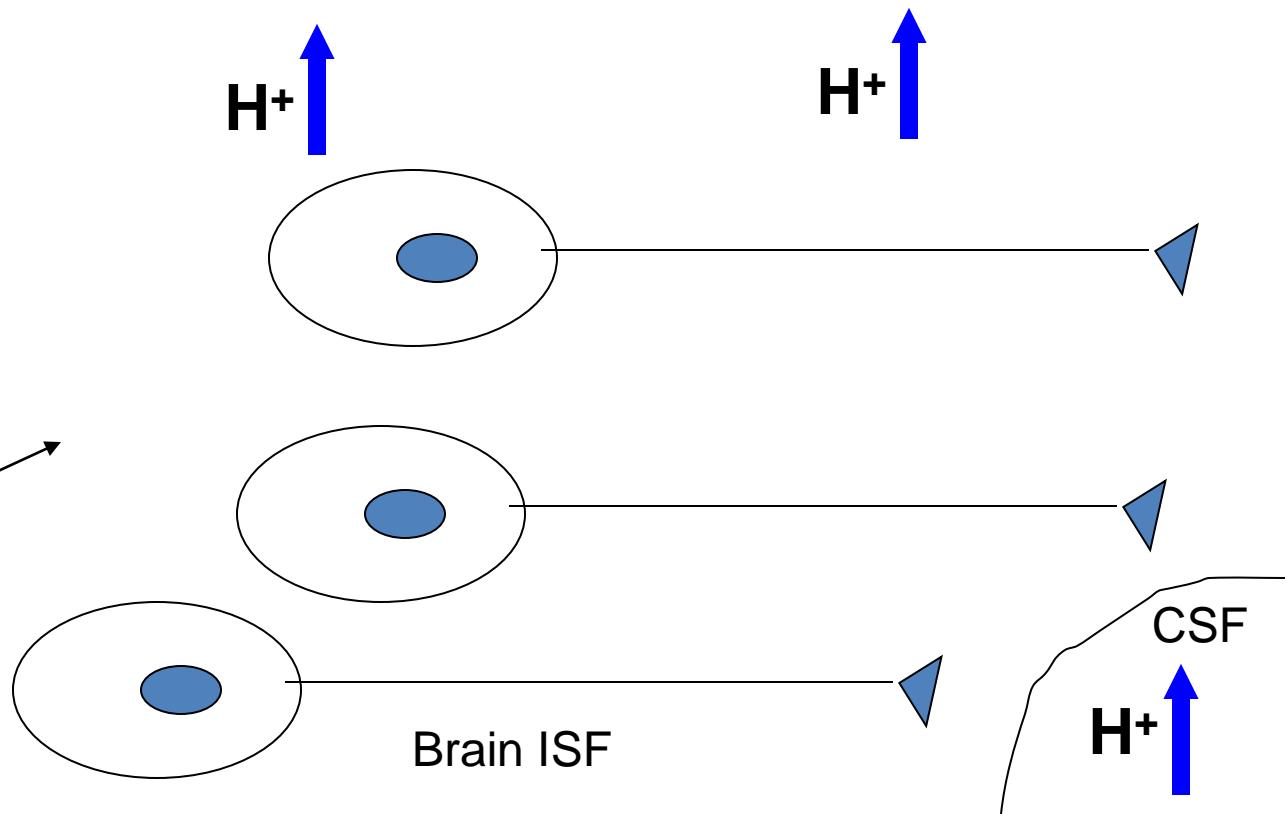
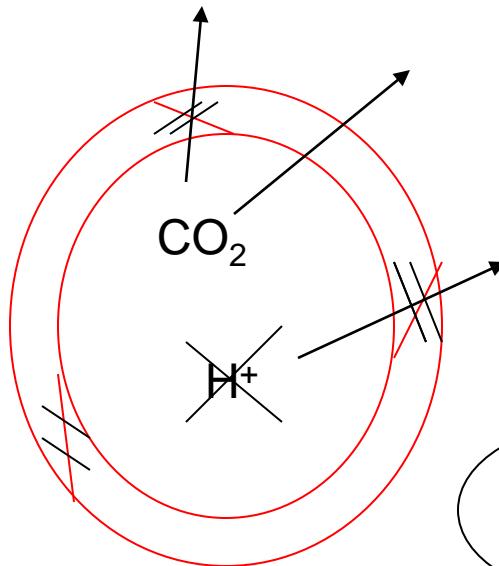
Cerebral capillaries

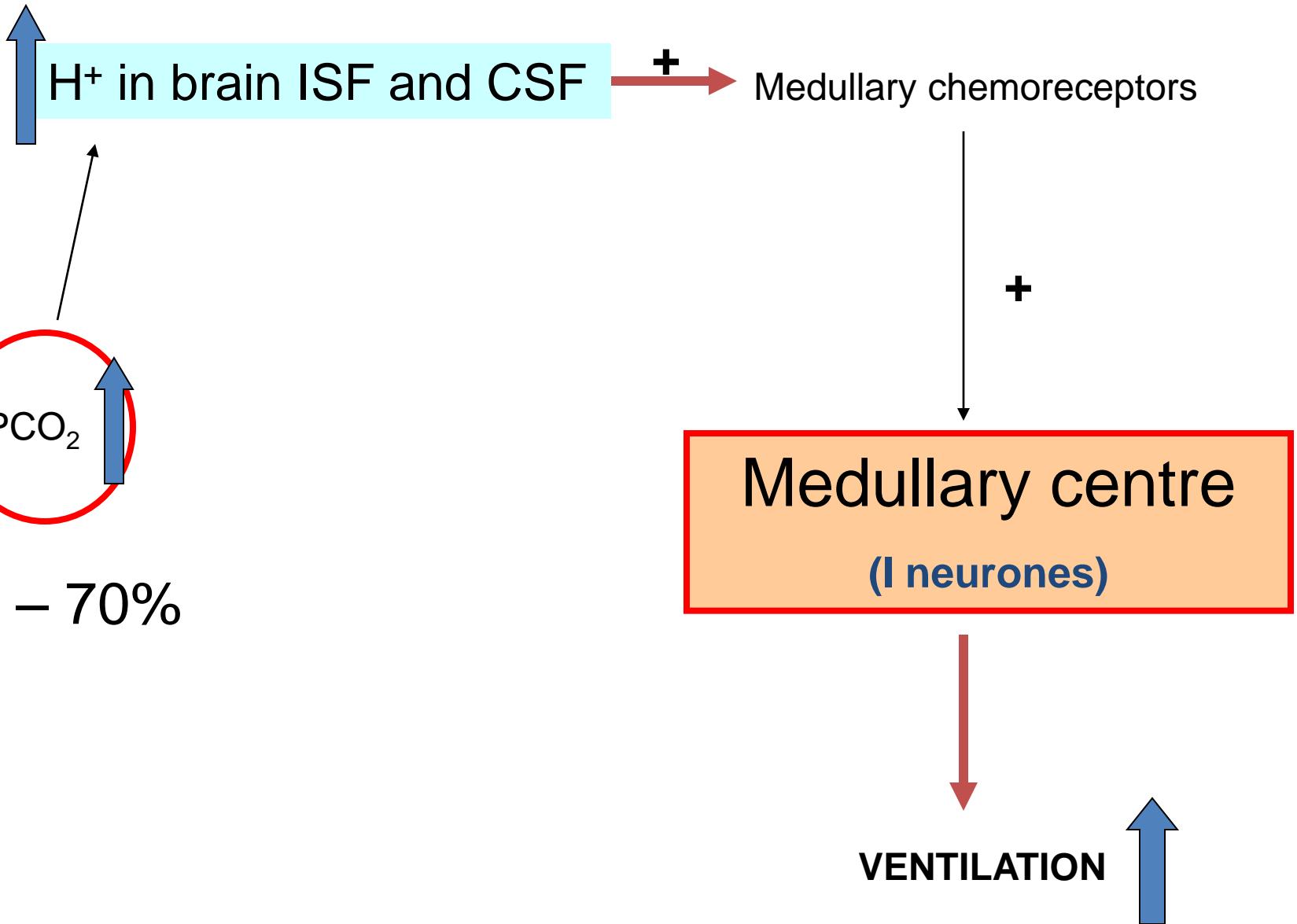


## Chemical control of breathing



Cerebral capillaries



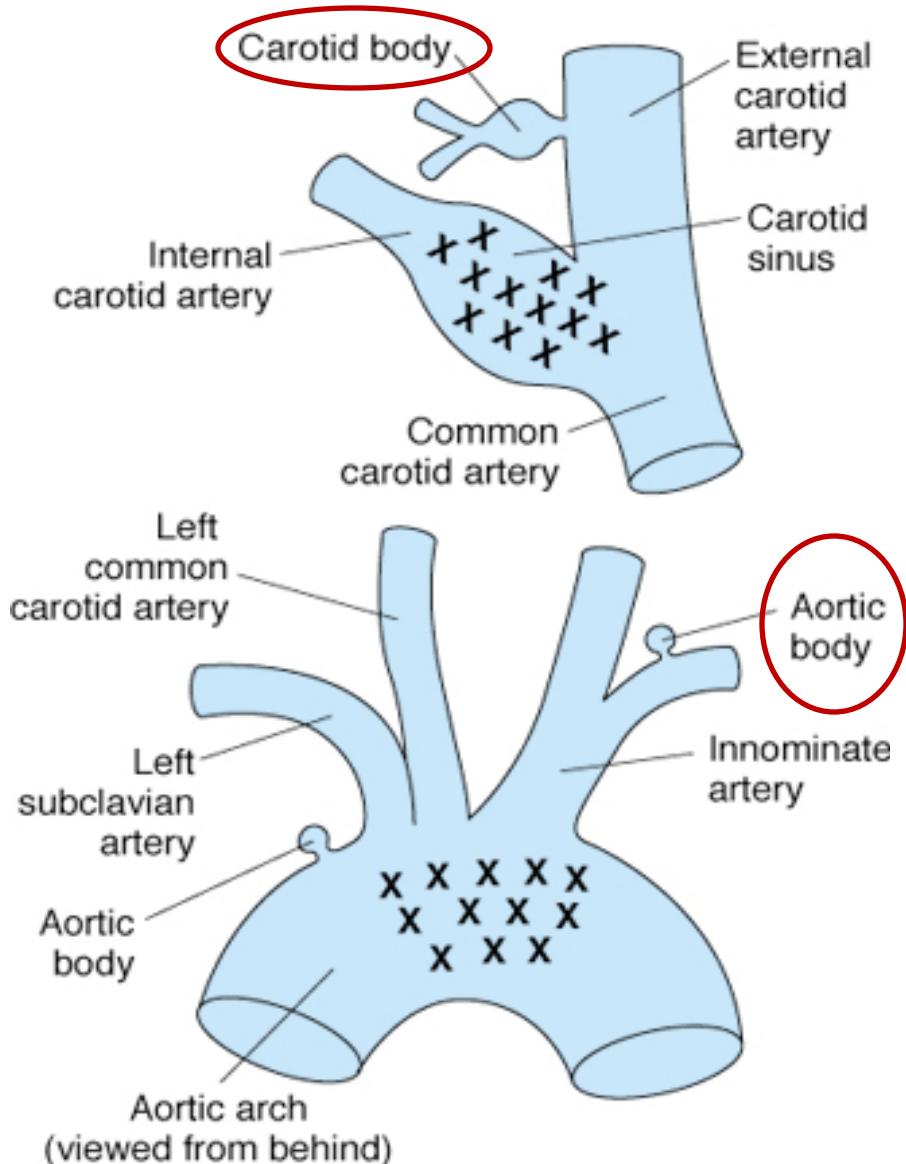


# Chemical control of breathing

## Respiratory

### chemoreceptors

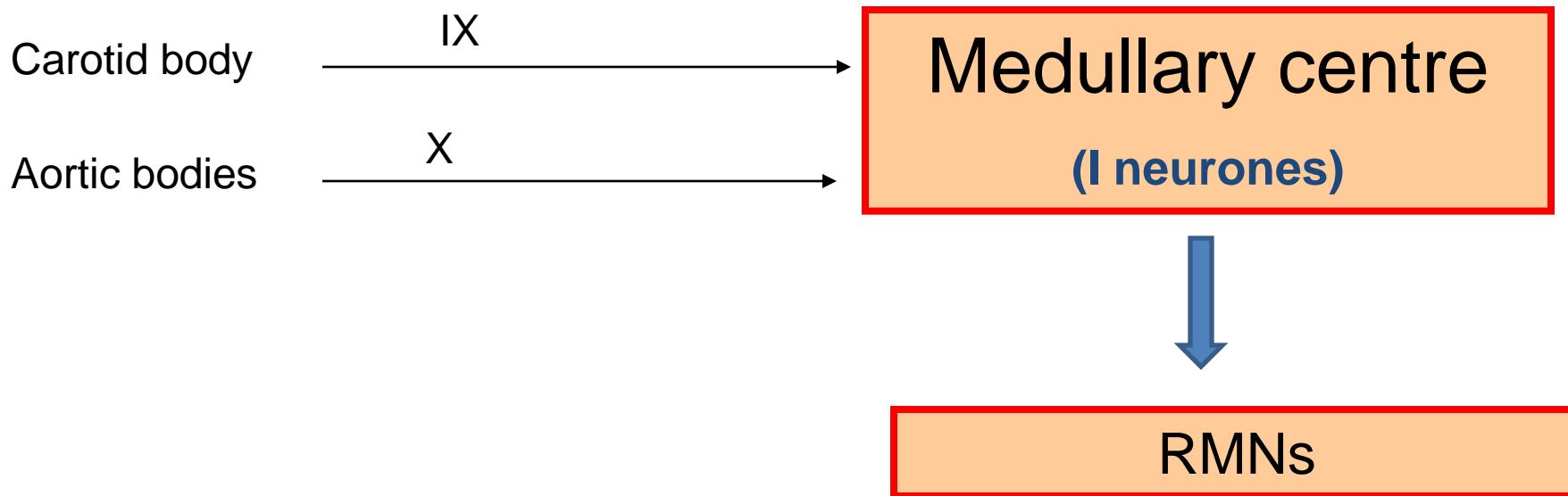
- Peripheral chemoreceptors
  - carotid body
  - aortic bodies



# Chemical control of breathing

## Respiratory chemoreceptors

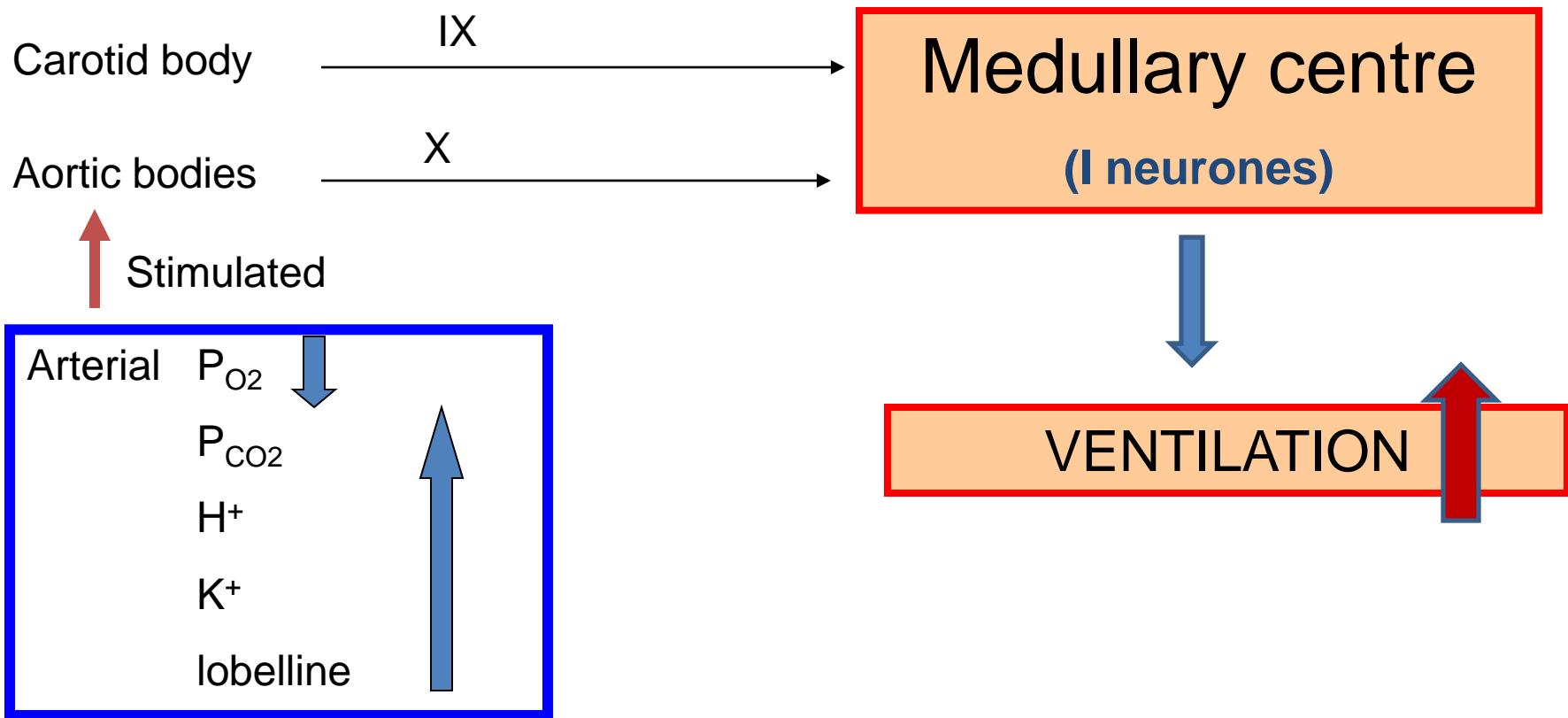
- Peripheral chemoreceptors (carotid body and aortic bodies)

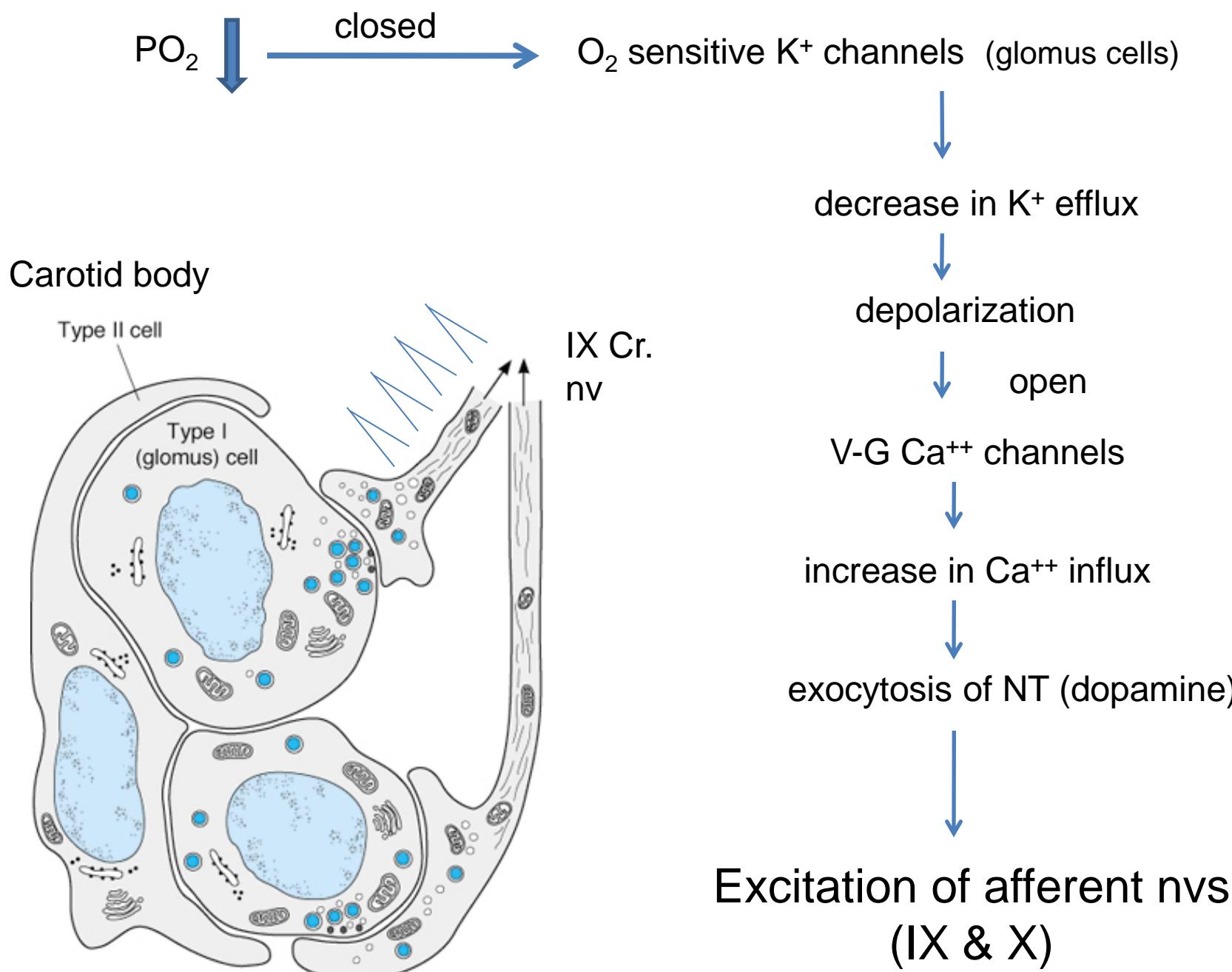


# Chemical control of breathing

## Respiratory chemoreceptors

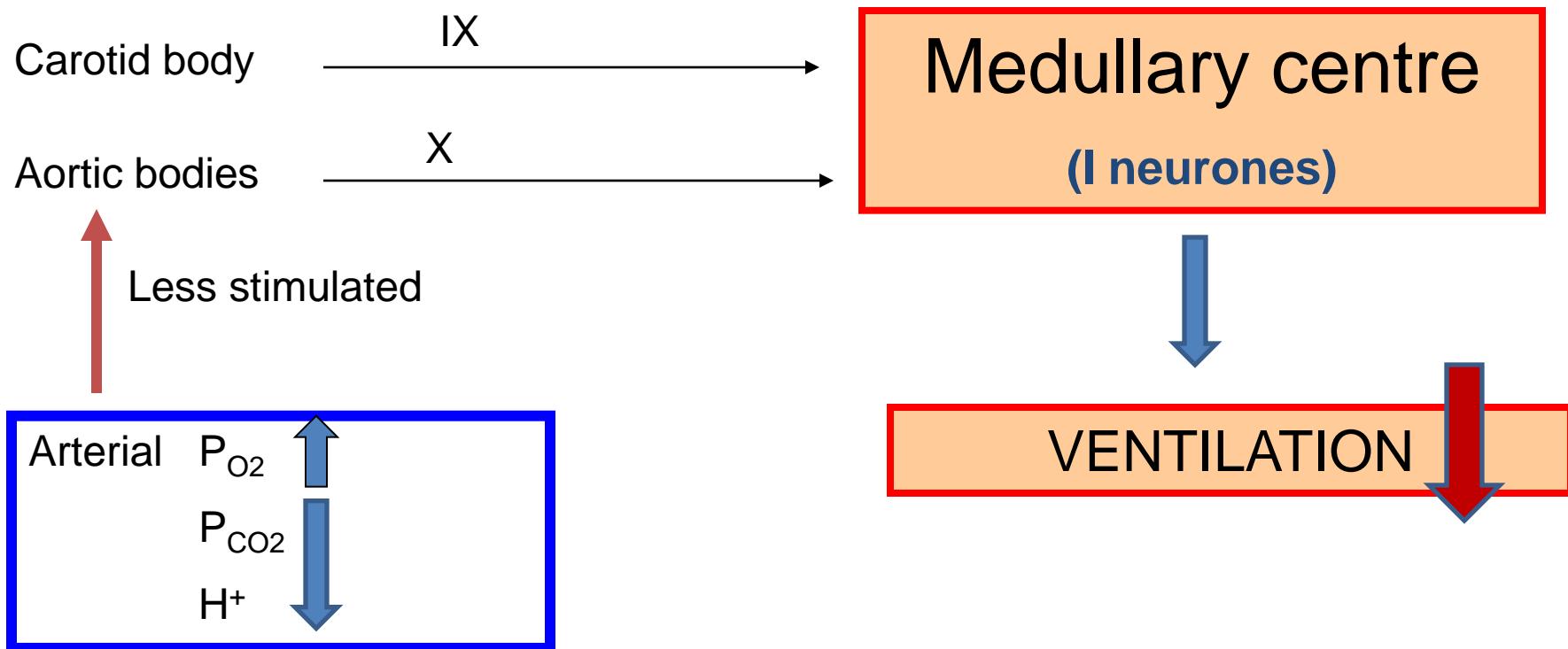
- Peripheral chemoreceptors (carotid body and aortic bodies)



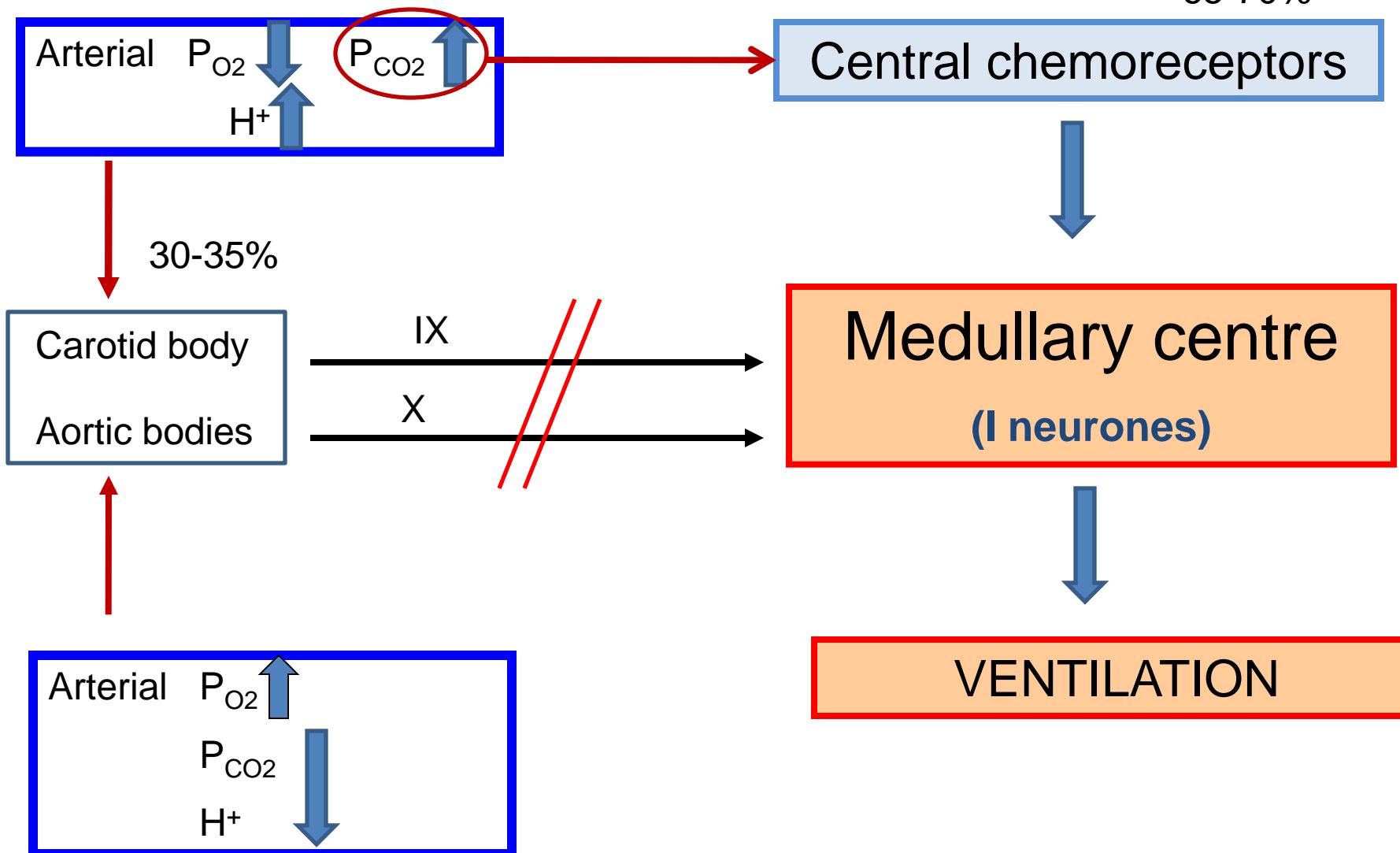


# Respiratory chemoreceptors

- Peripheral chemoreceptors (carotid body and aortic bodies)



# Denervation of afferent nerves from peripheral chemoreceptors (carotid body and aortic bodies)



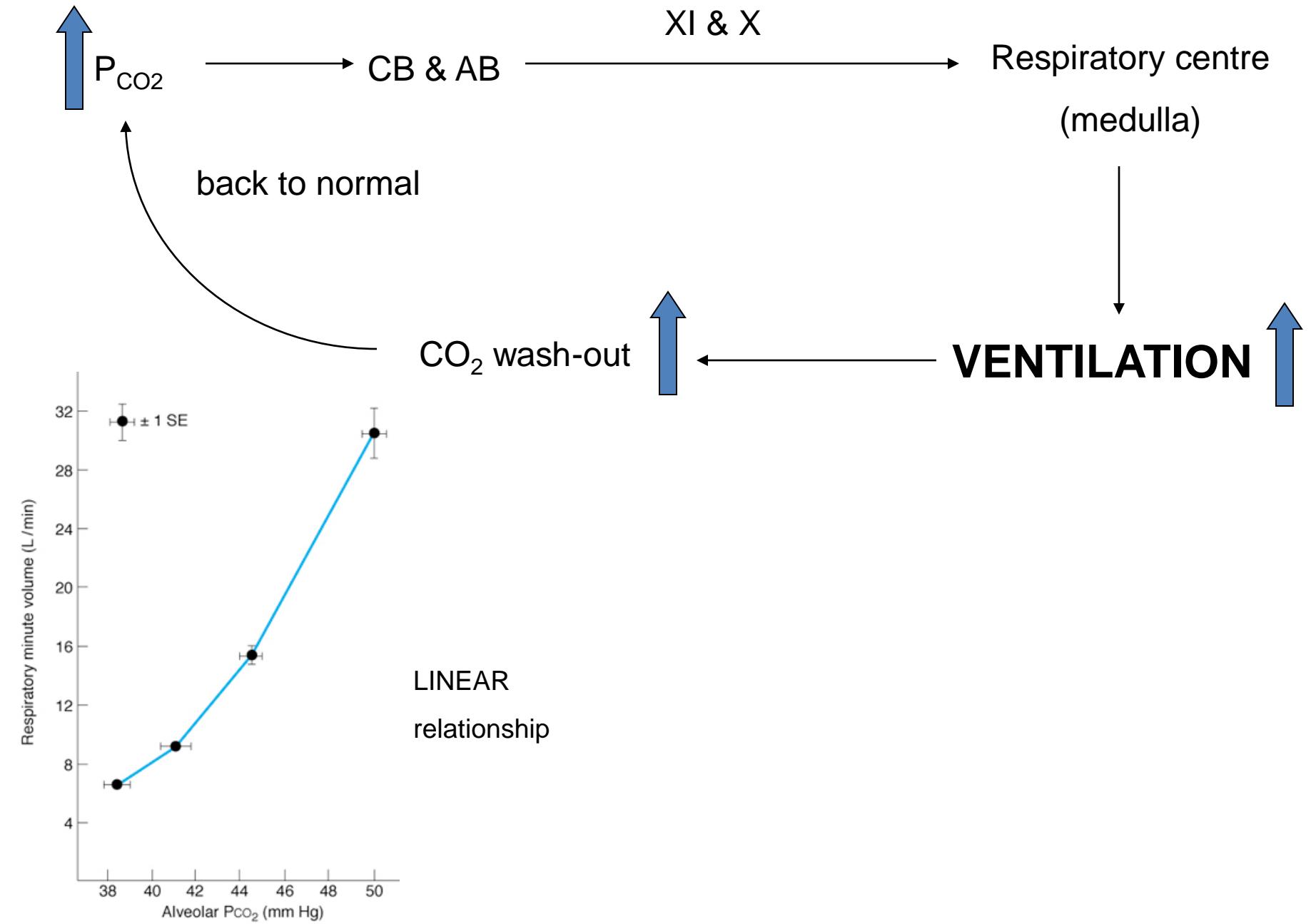
# Ventilatory response to $P_{CO_2}$ changes

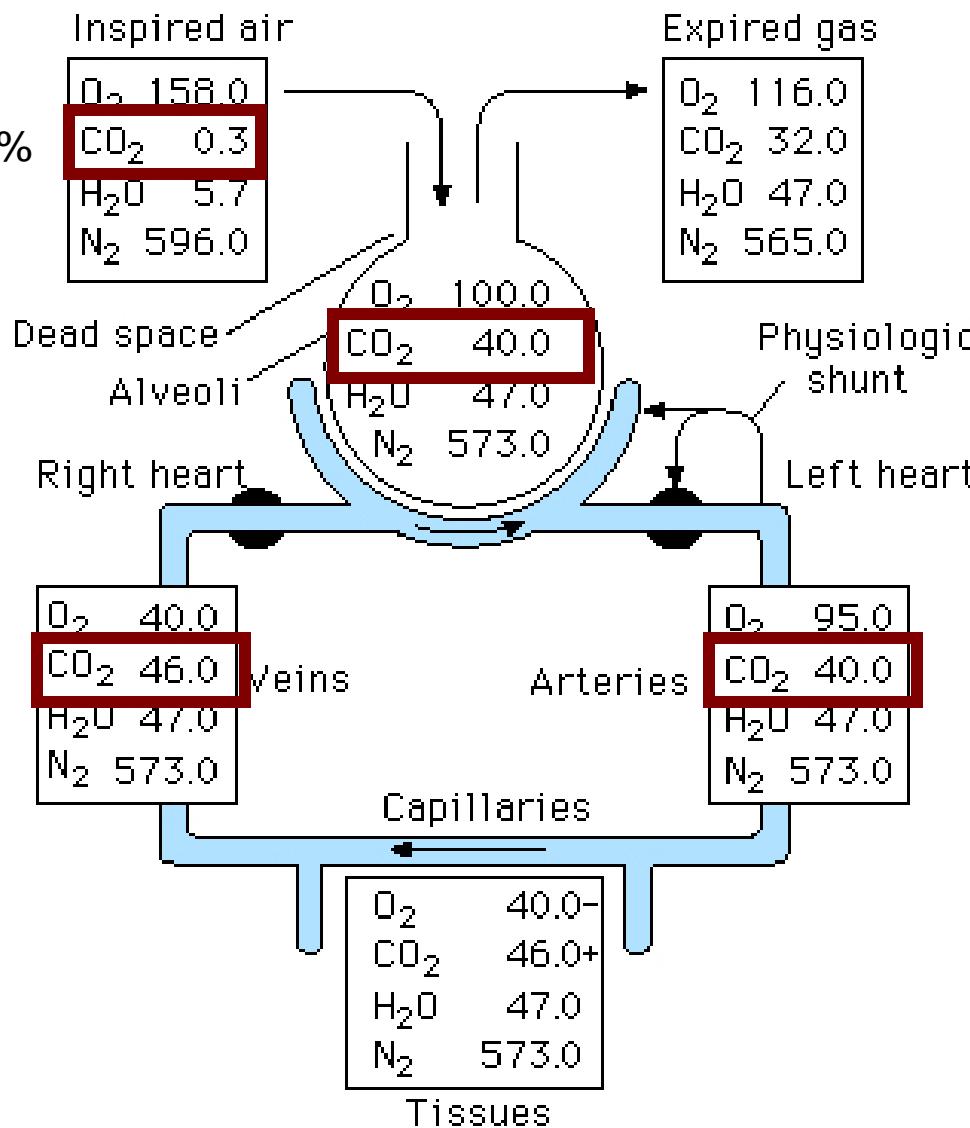
Normal  $Pa_{CO_2} = 40$  mmHg

- Increased
- Decreased

through respiratory chemoreceptors  
(both central and peripheral)

changes in VENTILATION





If inspired air P<sub>CO<sub>2</sub></sub>

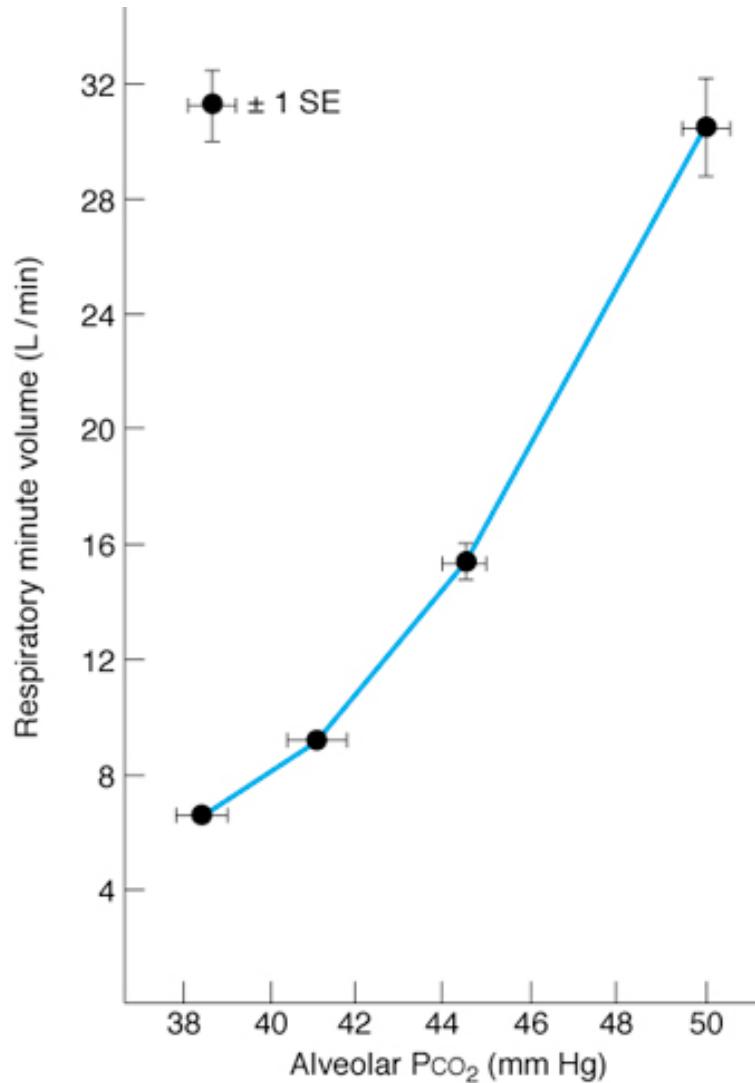
> 7%

P<sub>A</sub><sub>CO<sub>2</sub></sub> ↑

> 46 mmHg

P<sub>a</sub><sub>CO<sub>2</sub></sub> ↑

**CO<sub>2</sub> narcosis**

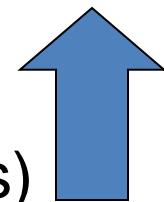


$\text{Pa}_{\text{CO}_2}$



HYPERVENTILATION

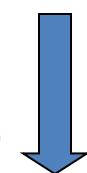
$\text{Pa}_{\text{CO}_2}$



(e.g.  $\text{CO}_2$  narcosis)

HYPVENTILATION

$\text{Pa}_{\text{CO}_2}$



HYPVENTILATION

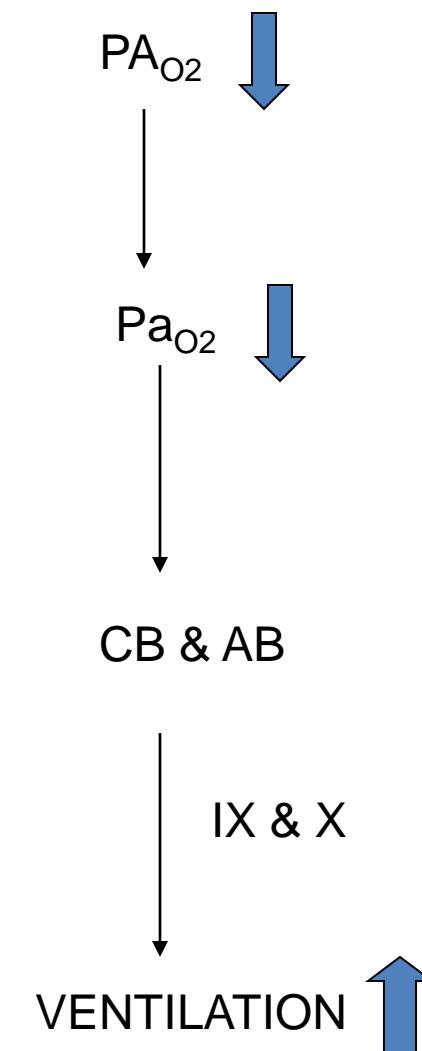
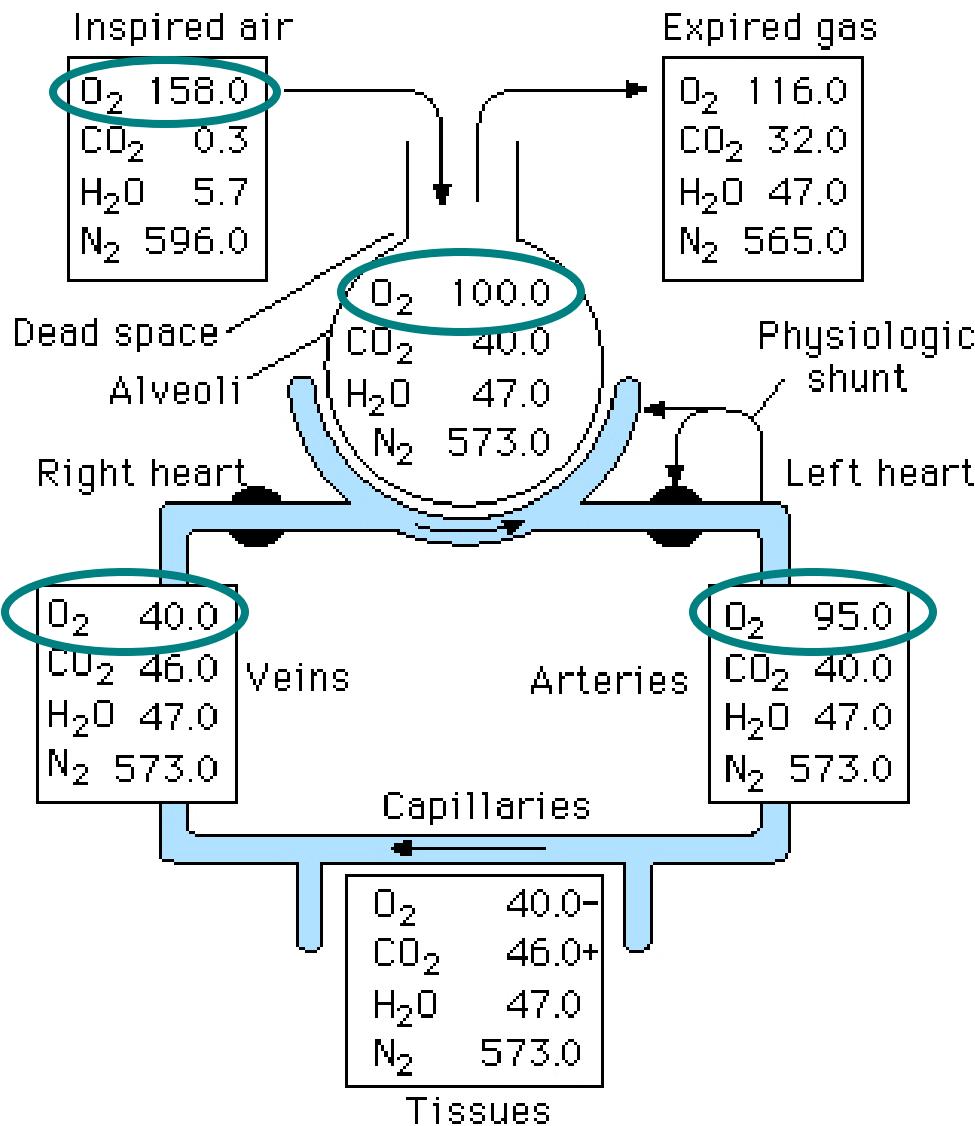
# Ventilatory response to $P_{O_2}$ changes

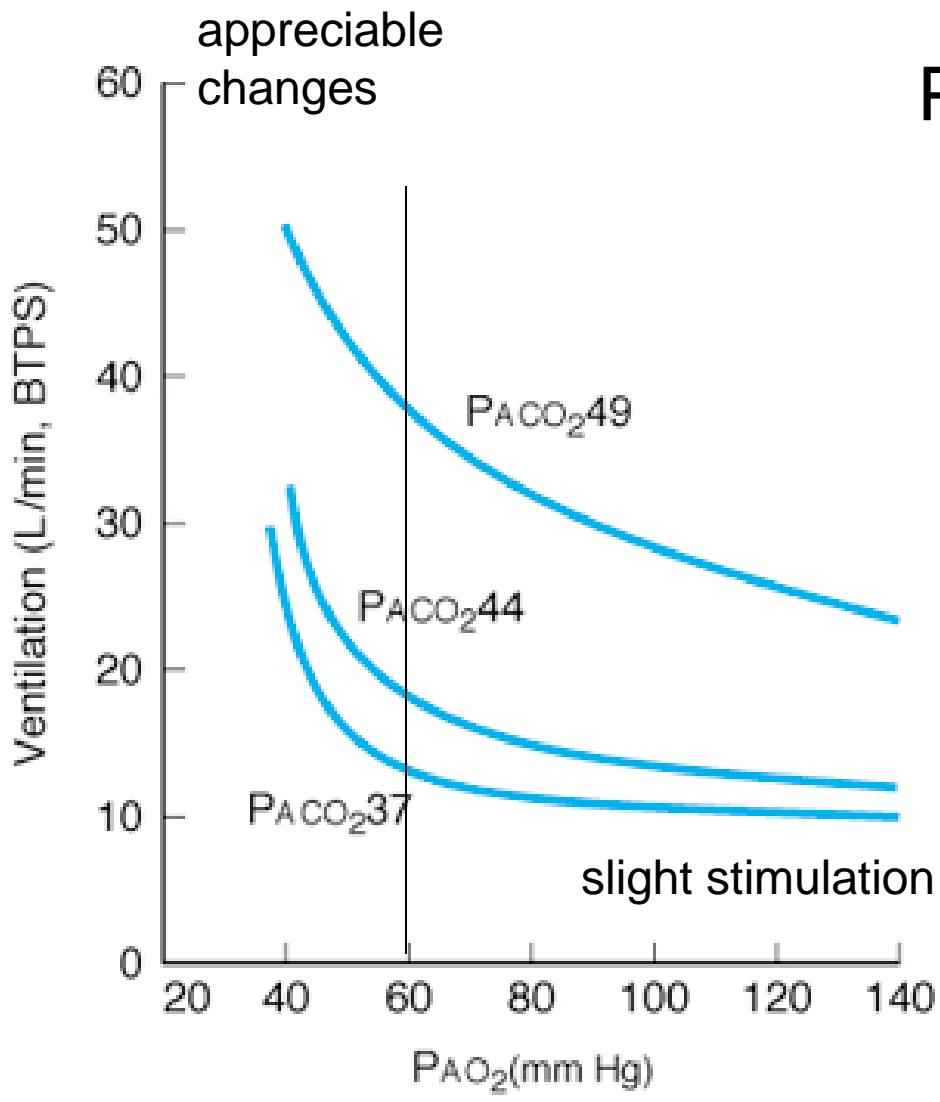
Normal  $Pa_{O_2} = 95 \text{ mmHg}$

- Increased
- Decreased

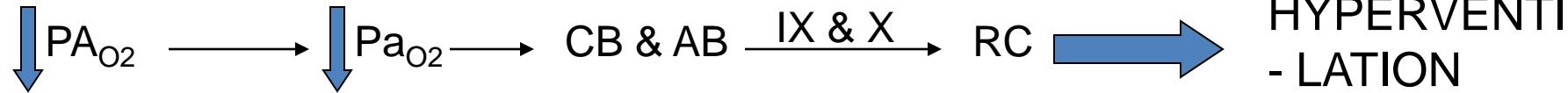
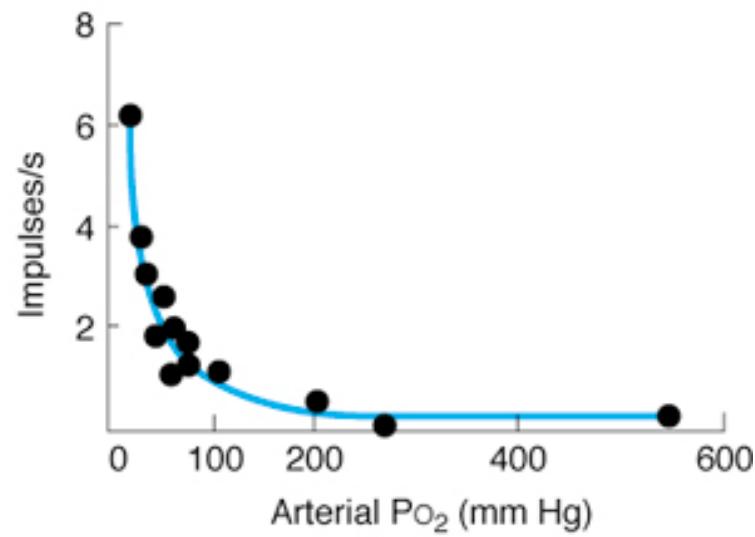
through respiratory chemoreceptors

changes in VENTILATION

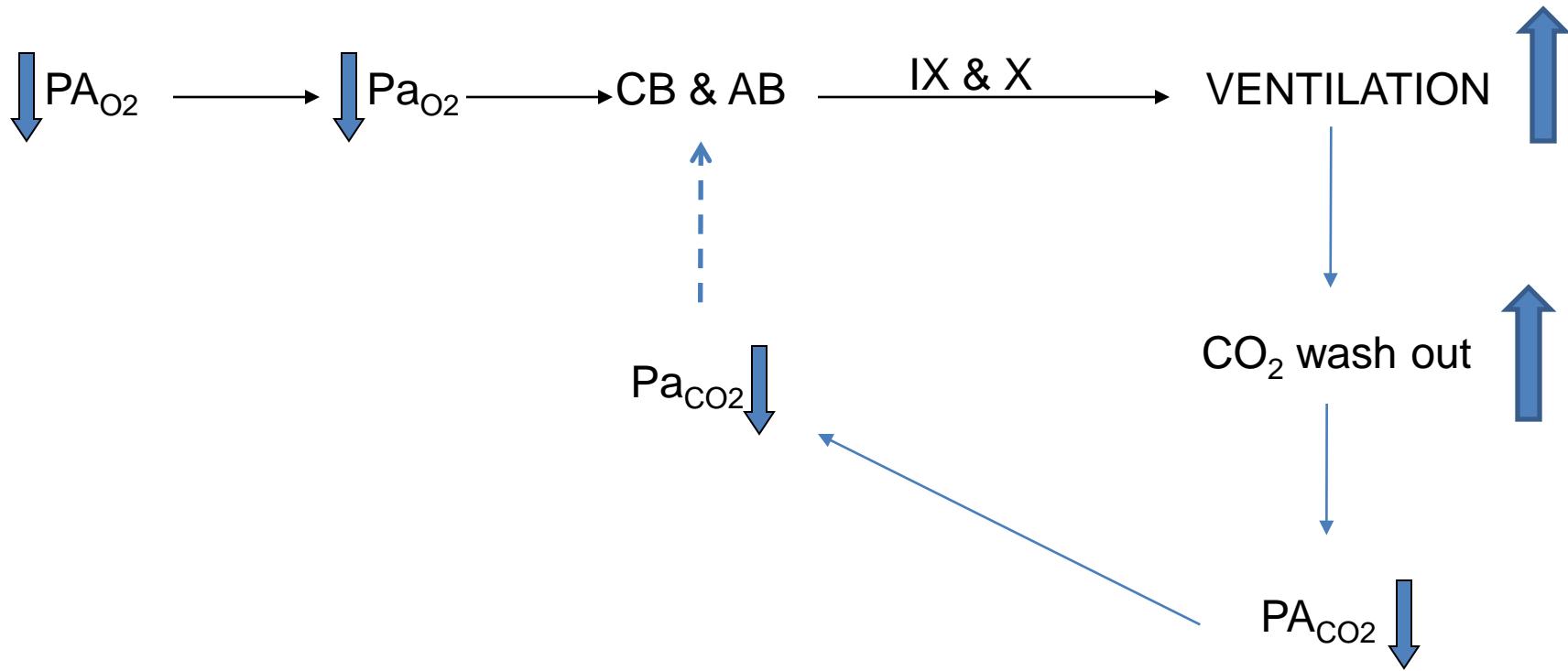




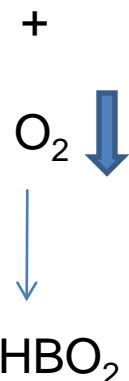
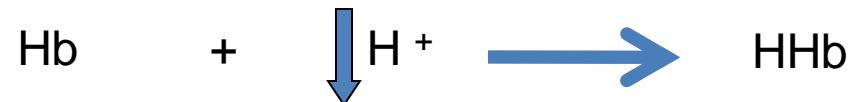
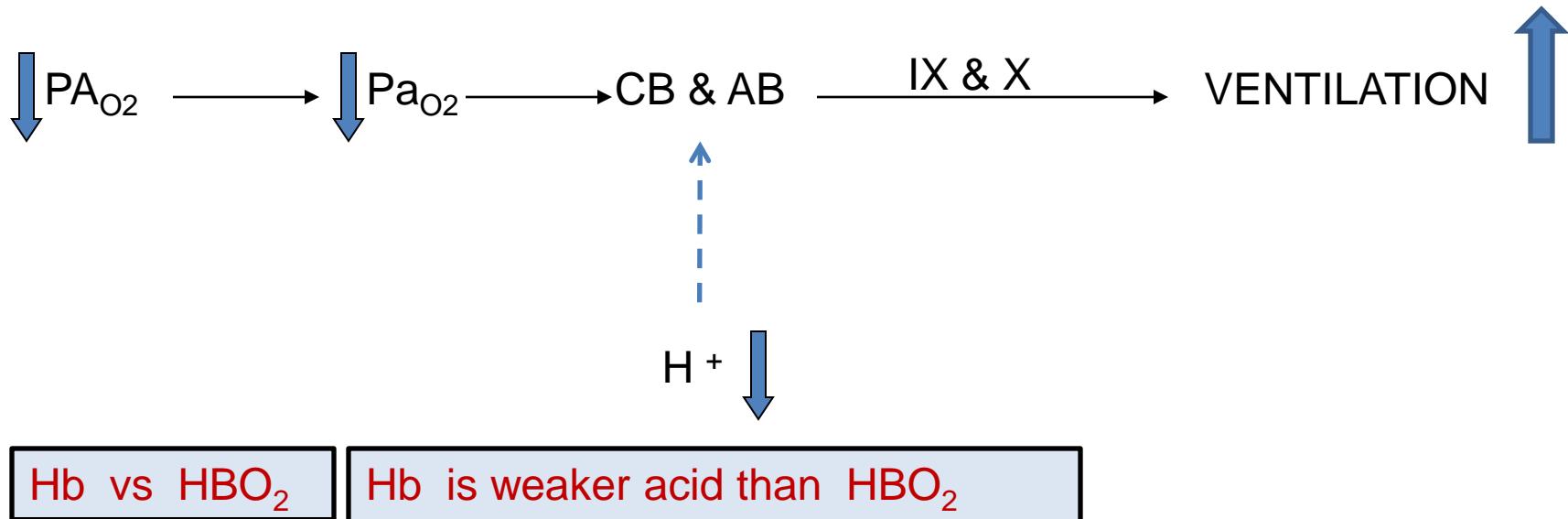
$\text{PAO}_2 < 60 \text{ mmHg}$

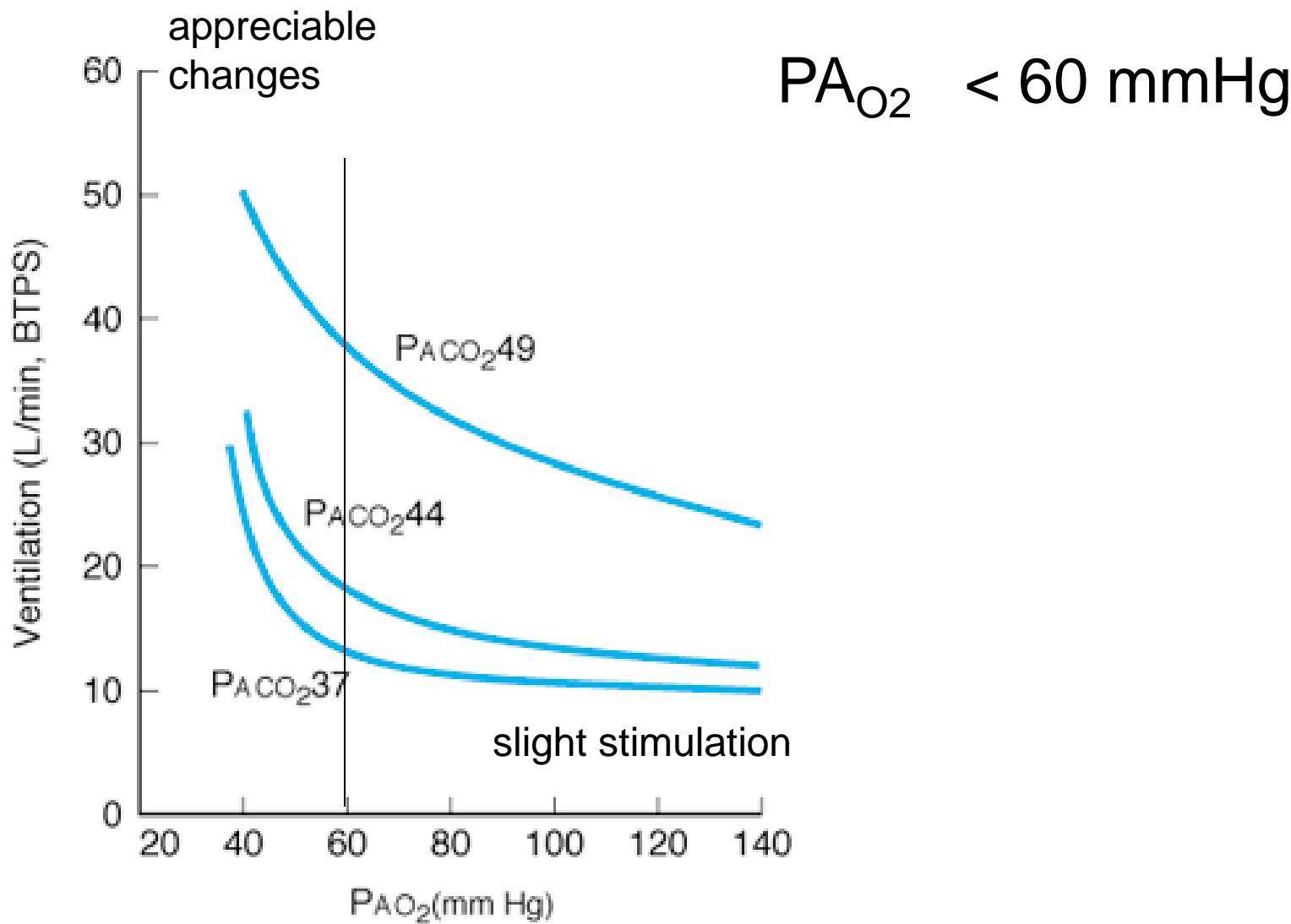


## Two counterbalancing mechanisms



## Two counterbalancing mechanisms



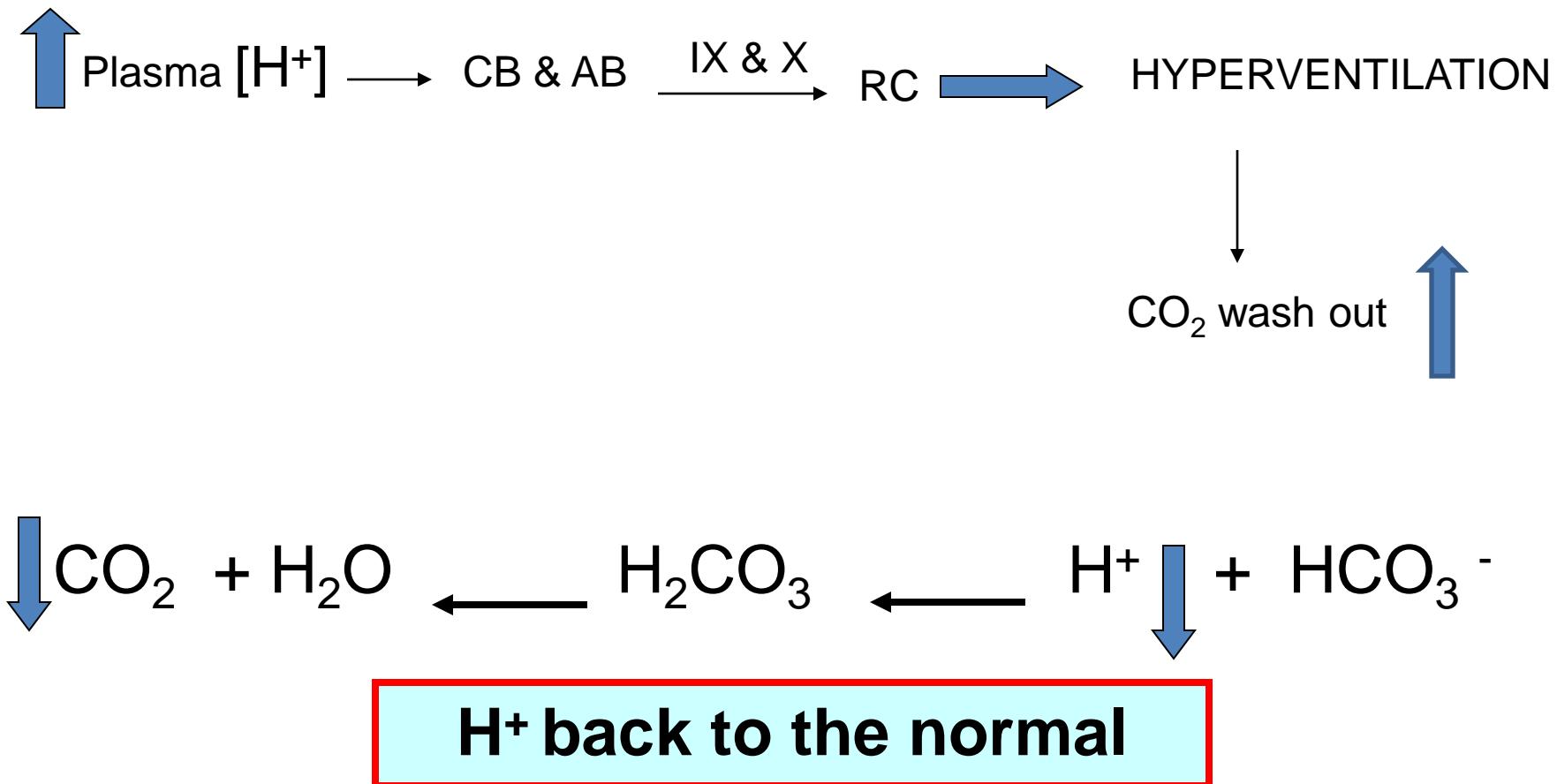


## Ventilatory responses to change in acid base balance



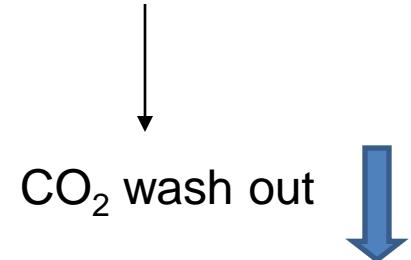
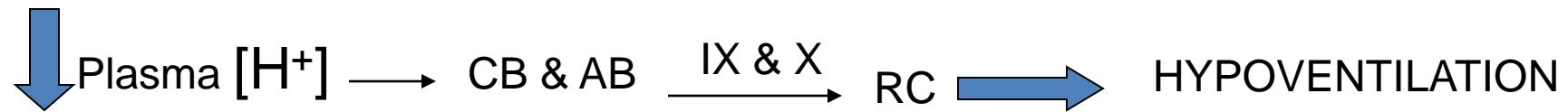
# Metabolic acidosis: respiratory stimulation

Metabolic acidosis (e.g. ketoacidosis in DM)

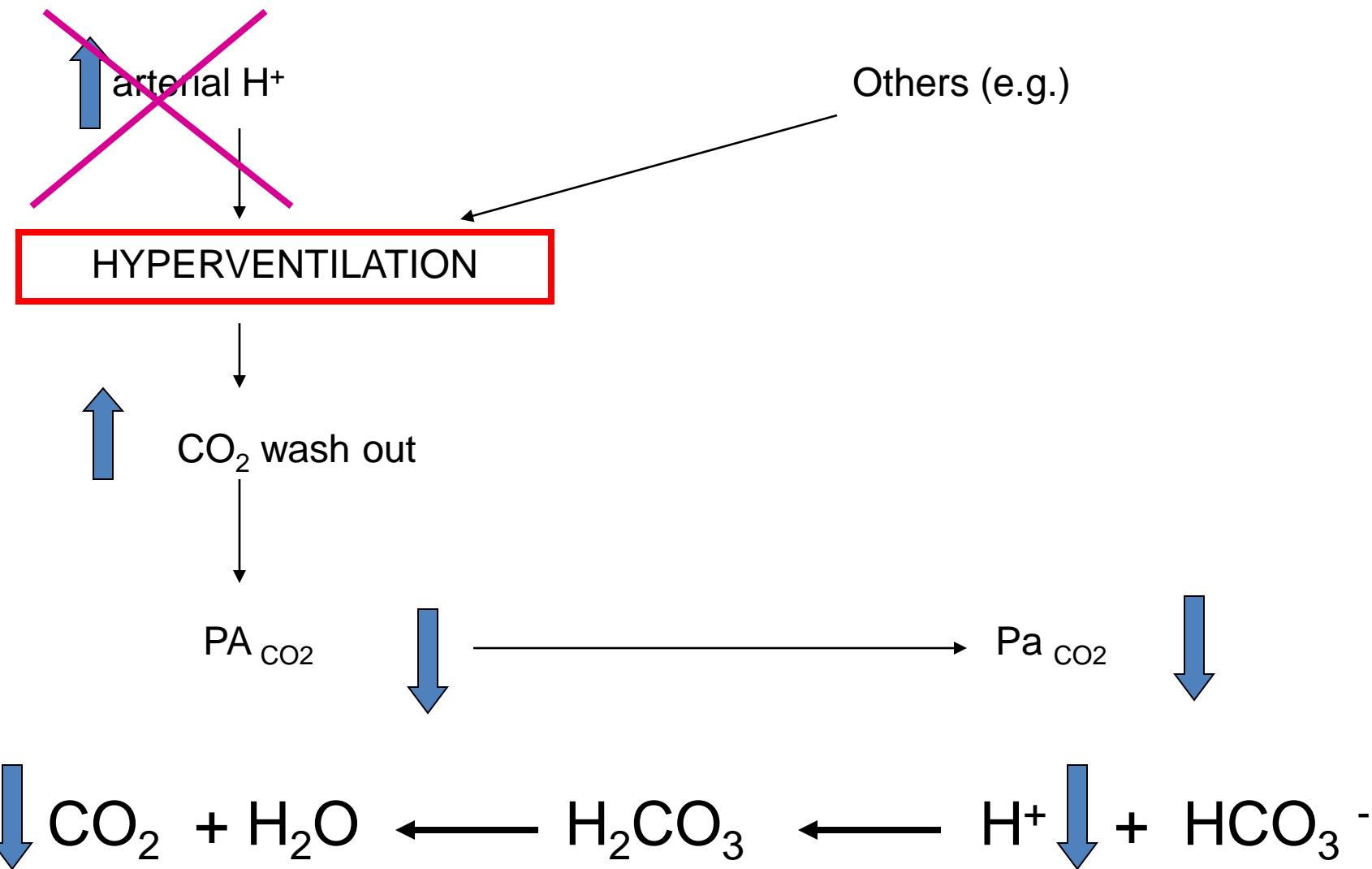


# Metabolic alkalosis: respiratory depression

Metabolic alkalosis (e.g. loss of  $\text{H}^+$  in vomiting)



H<sup>+</sup> back to the normal



**RESPIRATORY ALKALOSIS**

~~arterial H<sup>+</sup>~~

Others (e.g.)

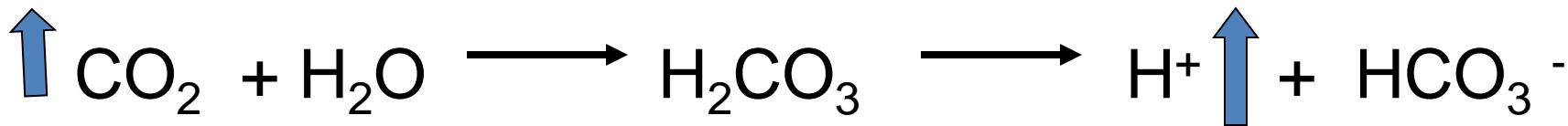
**Hypoventilation**

↓ CO<sub>2</sub> wash out

PA<sub>CO<sub>2</sub></sub>

Pa<sub>CO<sub>2</sub></sub>

↑



**RESPIRATORY ACIDOSIS**

Metabolic acidosis

**HYPERVENTILATION**

**HYPERVENTILATION**

Respiratory alkalosis

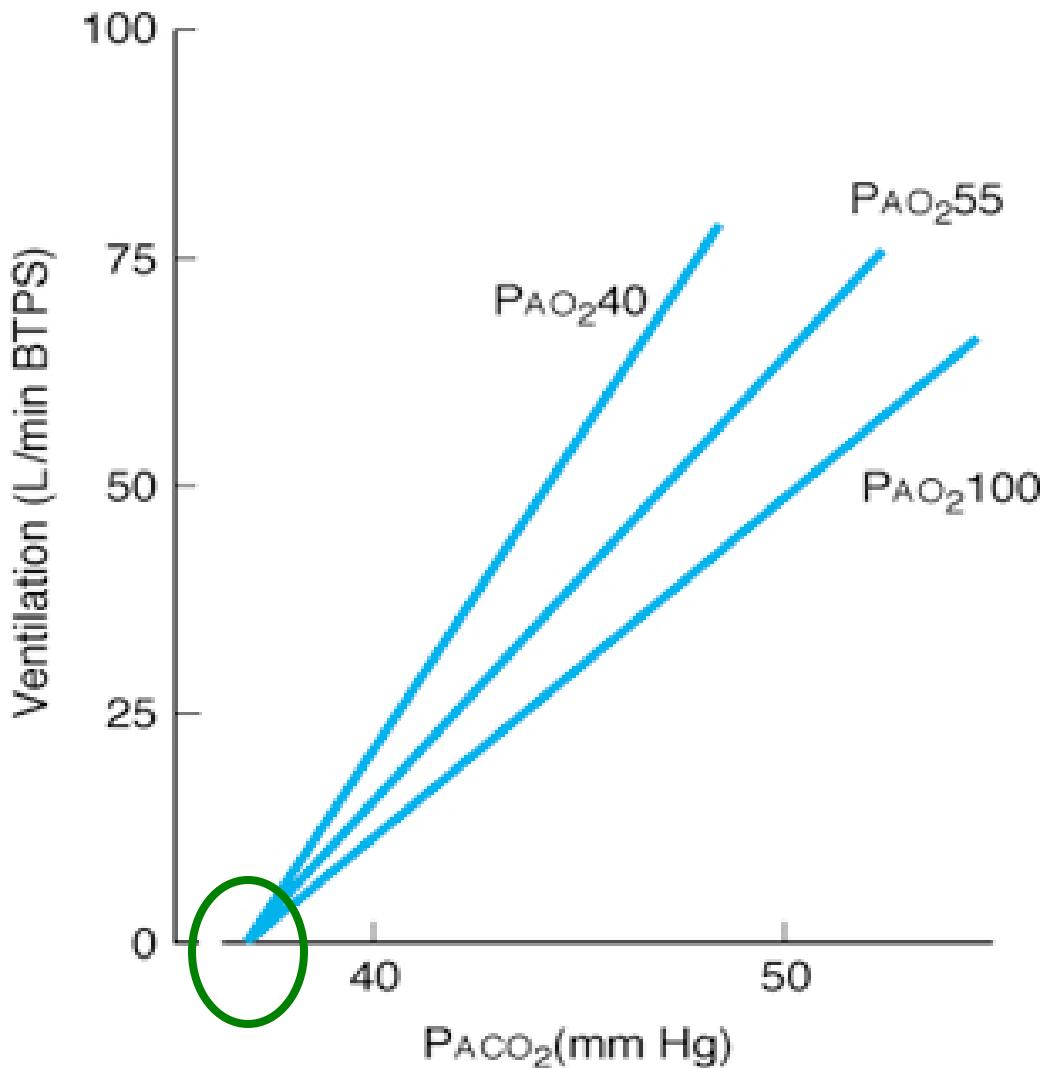
Metabolic alkalosis

**HYPOVENTILATION**

**HYPOVENTILATION**

Respiratory acidosis

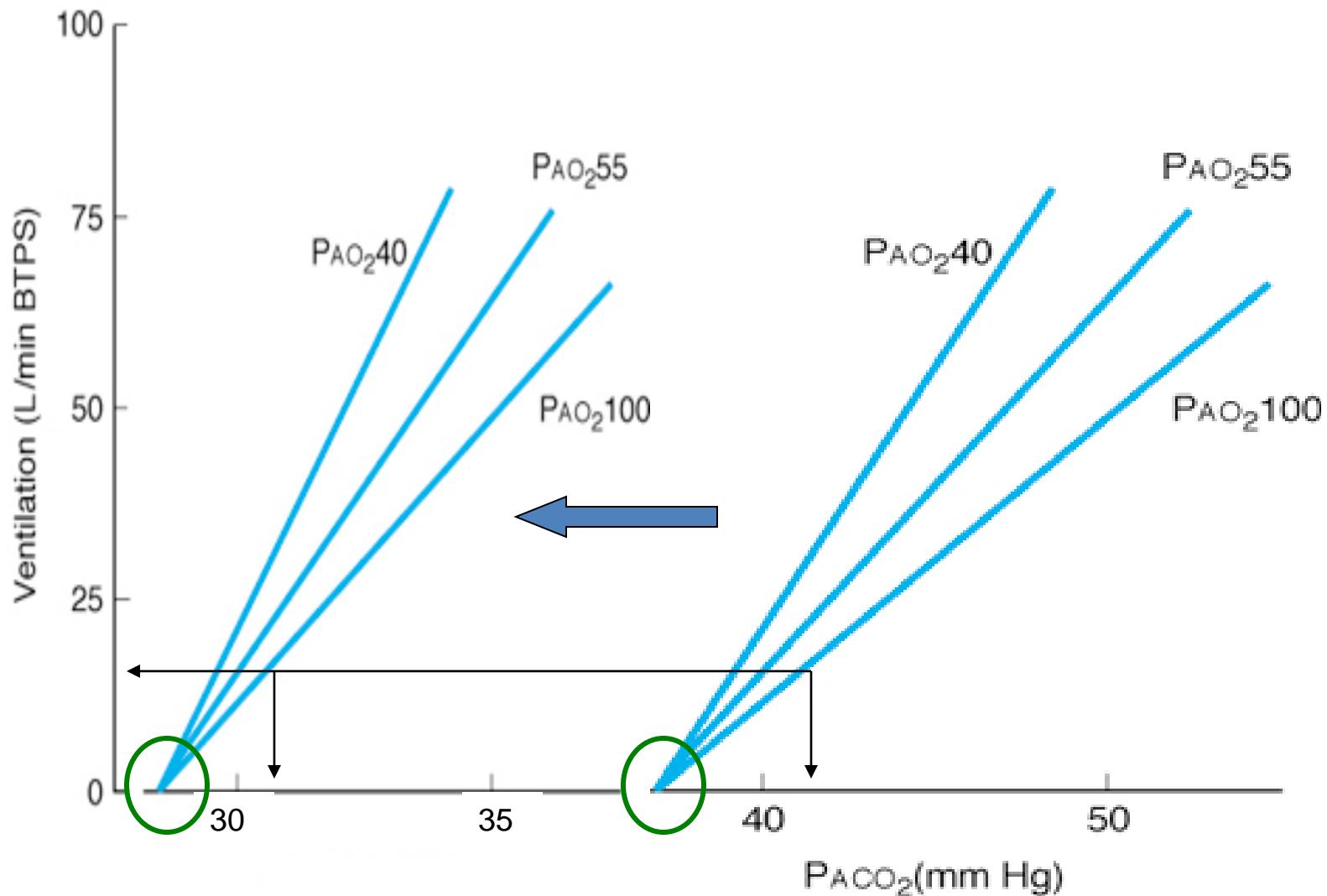
# Effect of hypoxia on the CO<sub>2</sub> response



- **Slope**  
*increased*
- **Intersect**  
*no change*
- *makes more sensitive to an increase in  $\text{P}_{\text{CO}_2}$*
- *Normally, slight but definite  $\text{CO}_2$  drive*

# Effect of H<sup>+</sup> on the CO<sub>2</sub> response

Metabolic acidosis



# Effect of H<sup>+</sup> on the CO<sub>2</sub> response

- ADDITIVE
- Slope  
*no change*
- Intersect  
*shift to left*
- *Same amount of respiratory stimulation is produced by lower arterial P<sub>CO<sub>2</sub></sub> level*

# Neural control of breathing

Pontine centre

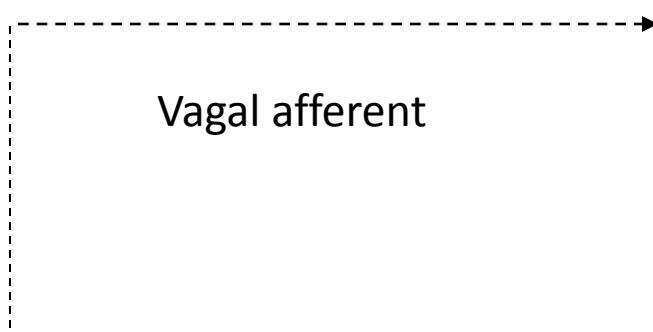
Medullary centre

(I neurones)

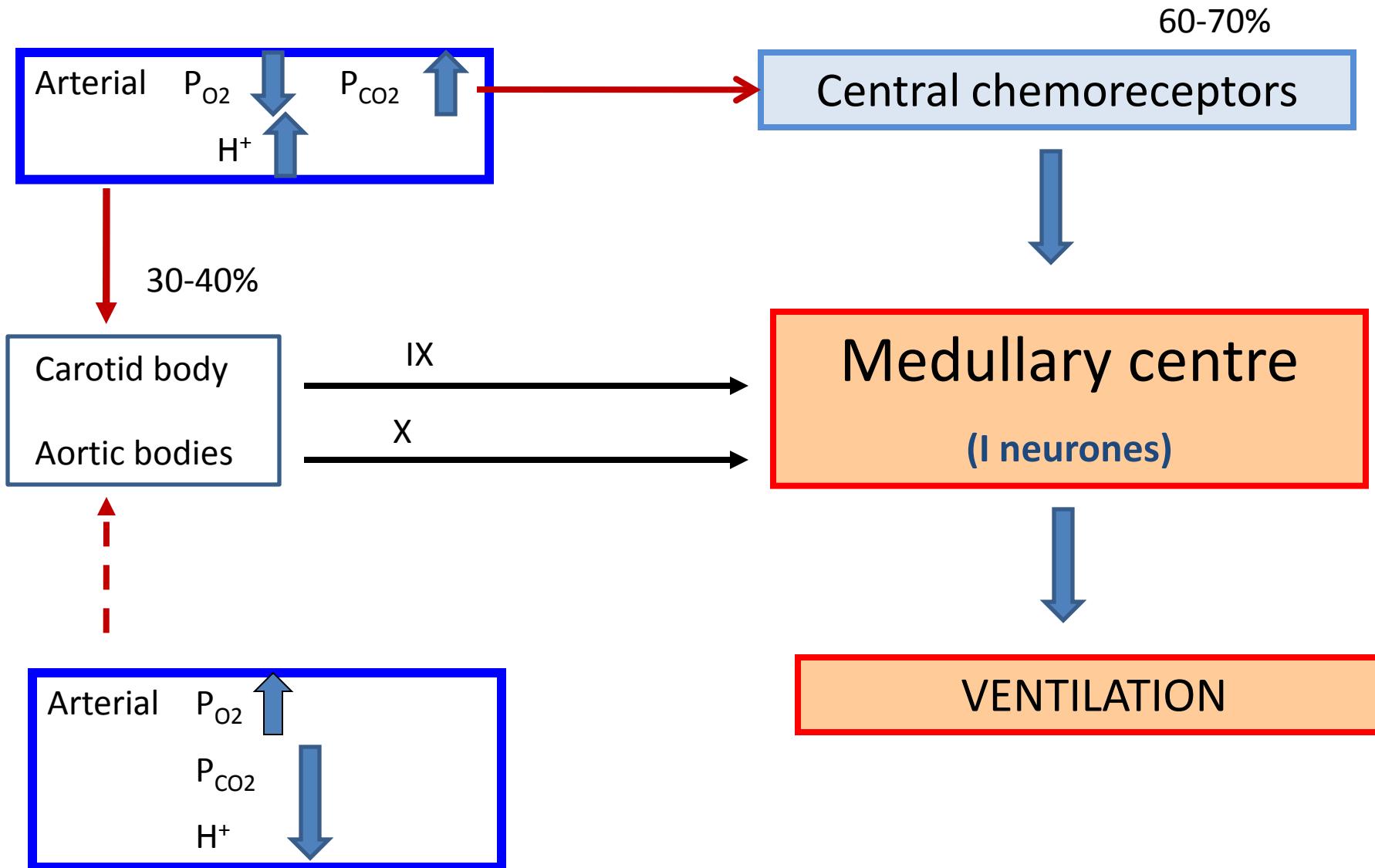
Lung stretch  
receptors

Vagal afferent

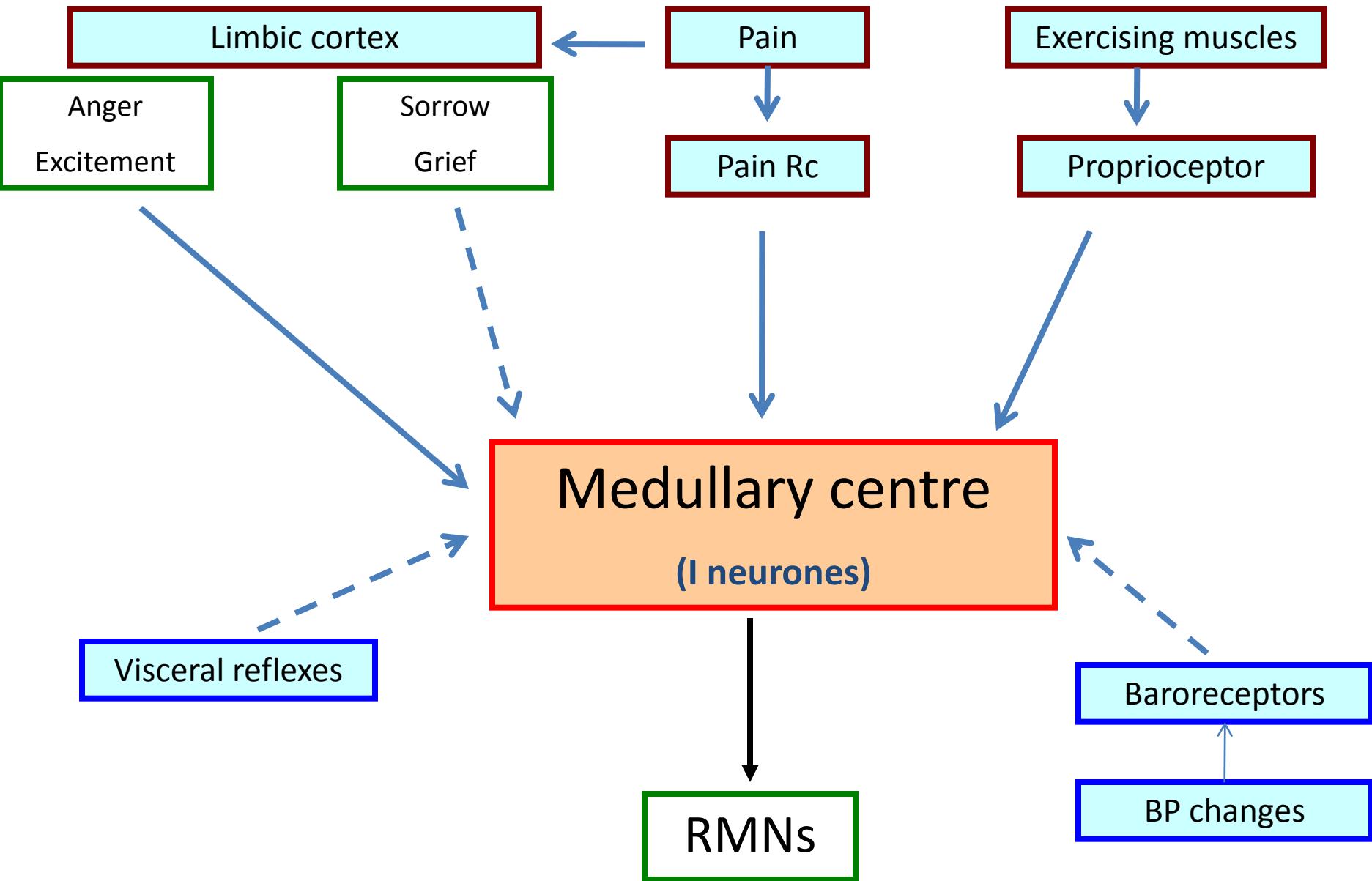
RMNs



# Chemical control of breathing



# Non-chemical influence of breathing



# Reflexes from airways and lungs

- Receptors from airways and lungs
  - Unmyelinated vagal fibres
    - Pulmonary subgroup
    - Bronchial subgroup
  - Myelinated vagal fibres
  - Receptors from airways and lungs
    - Slowly adapting
    - Rapidly adapting

# Hering-Breuer reflex

- Hering-Breuer inflation reflex
  - Stimulus : steady lung inflation
  - Response : an increase in duration of expiration
- Hering-Breuer deflation reflex
  - Stimulus : marked deflation of the lungs
  - Response : a decrease in duration of expiration

Irritant receptors (rapidly adapting receptors)  
- by histamine

Irritant receptors  
(in trachea)

- Coughing
- BC
- Mucus secretion

Irritant receptors  
(in lungs)

- hyperpnoea

Coughing and sneezing: protective reflexes

## J - receptors (Juxtagapillary receptors)

- C fibre endings lying close to pulmonary vessels

Stimulus

- Hyperinflation
- IV or Icardiac administration of chemicals  
(eg. Capsaicin)

Responses

- Apnoea followed by rapid breathing
- Bradycardia
- hypotension

