COMPARATIVE ANATOMY AND PHYSIOLOGY OF ANIMALS



Glené Mynhardt
Hanover College

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Comparative Anatomy and Physiology of Animals

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Licensing

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CHAPTER OVERVIEW

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1.1: Features Used to Classify Animals

Skills to Develop

- Explain the differences in animal body plans that support basic animal classification
- Compare and contrast the embryonic development of protostomes and deuterostomes

Scientists have developed a classification scheme that categorizes all members of the animal kingdom, although there are exceptions to most "rules" governing animal classification (Figure 1.1.1). Animals are primarily classified according to morphological and developmental characteristics, such as a body plan. One of the most prominent features of the body plan of true animals is that they are morphologically symmetrical. This means that their distribution of body parts is balanced along an axis. Additional characteristics include the number of tissue layers formed during development, the presence or absence of an internal body cavity, and other features of embryological development, such as the origin of the mouth and anus.

Art Connection

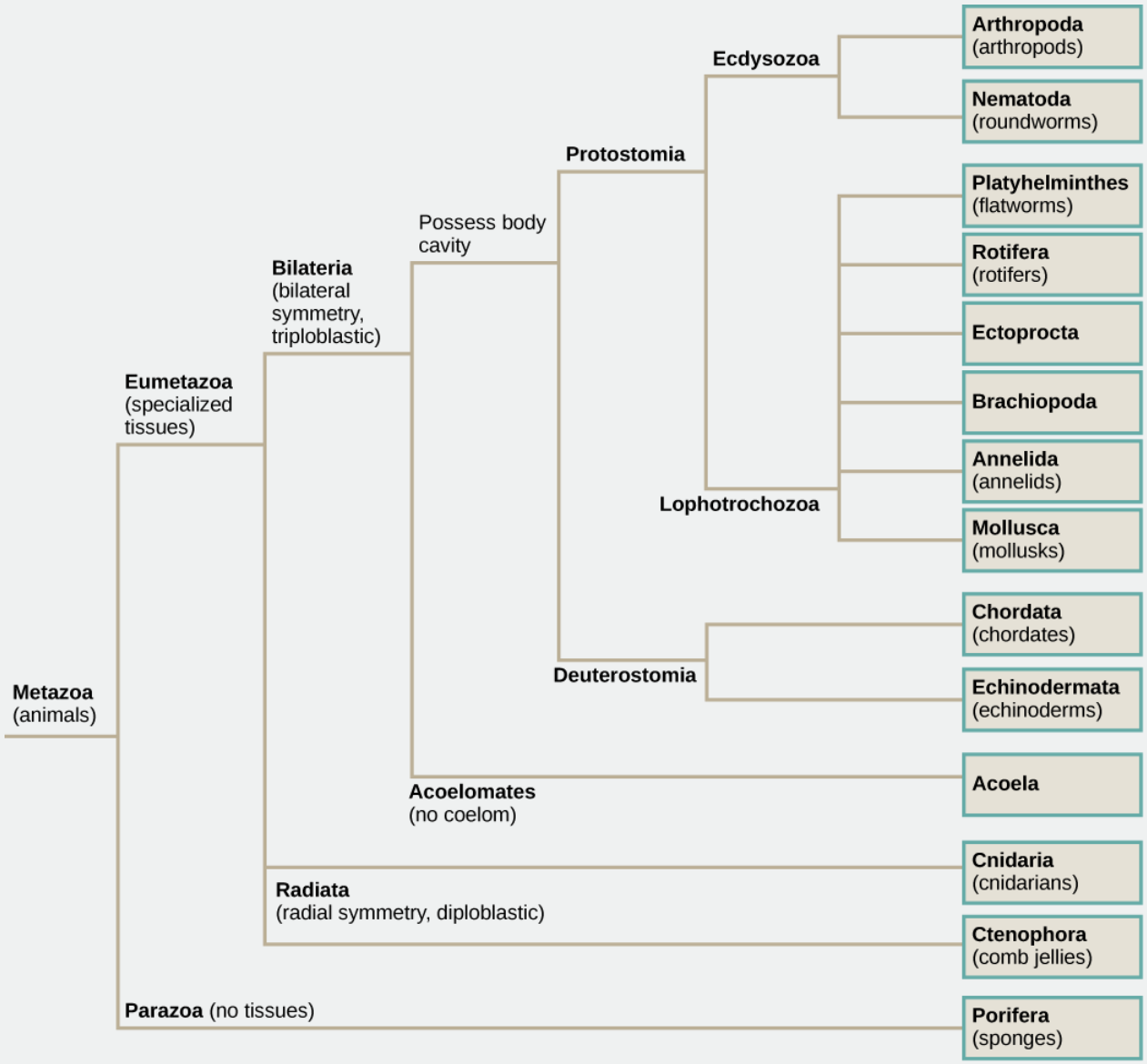


Figure 1.1.1: The phylogenetic tree of animals is based on morphological, fossil, and genetic evidence.

Which of the following statements is false?

A. Eumetazoans have specialized tissues and parazoans don't

A. Eumetazoans have specialized tissues and parazoans don't.
B. Lophotrochozoa and Ecdysozoa are both Bilataria.
C. Acoela and Cnidaria both possess radial symmetry.
D. Arthropods are more closely related to nematodes than they are to annelids.

Animal Characterization Based on Body Symmetry

At a very basic level of classification, true animals can be largely divided into three groups based on the type of symmetry of their body plan: radially symmetrical, bilaterally symmetrical, and asymmetrical. Asymmetry is a unique feature of Parazoa (Figure 1.1.2). Only a few animal groups display radial symmetry. All types of symmetry are well suited to meet the unique demands of a particular animal's lifestyle.

Radial symmetry is the arrangement of body parts around a central axis, as is seen in a drinking glass or pie. It results in animals having top and bottom surfaces but no left and right sides, or front or back. The two halves of a radially symmetrical animal may be described as the side with a mouth or "oral side," and the side without a mouth (the "aboral side"). This form of symmetry marks the body plans of animals in the phyla Ctenophora and Cnidaria, including jellyfish and adult sea anemones (Figure 27.2.2). Radial symmetry equips these sea creatures (which may be sedentary or only capable of slow movement or floating) to experience the environment equally from all directions.



Figure 1.1.2: The (a) sponge is asymmetrical. The (b) jellyfish and (c) anemone are radially symmetrical, and the (d) butterfly is bilaterally symmetrical. (credit a: modification of work by Andrew Turner; credit b: modification of work by Robert Freiburger; credit c: modification of work by Samuel Chow; credit d: modification of work by Cory Zanker)

Bilateral symmetry involves the division of the animal through a sagittal plane, resulting in two mirror image, right and left halves, such as those of a butterfly (Figure 1.1.2), crab, or human body. Animals with bilateral symmetry have a “head” and “tail” (anterior vs. posterior), front and back (dorsal vs. ventral), and right and left sides (Figure 1.1.3). All true animals except those with radial symmetry are bilaterally symmetrical. The evolution of bilateral symmetry that allowed for the formation of anterior and posterior (head and tail) ends promoted a phenomenon called cephalization, which refers to the collection of an organized nervous system at the animal’s anterior end. In contrast to radial symmetry, which is best suited for stationary or limited-motion lifestyles, bilateral symmetry allows for streamlined and directional motion. In evolutionary terms, this simple form of symmetry promoted active mobility and increased sophistication of resource-seeking and predator-prey relationships.

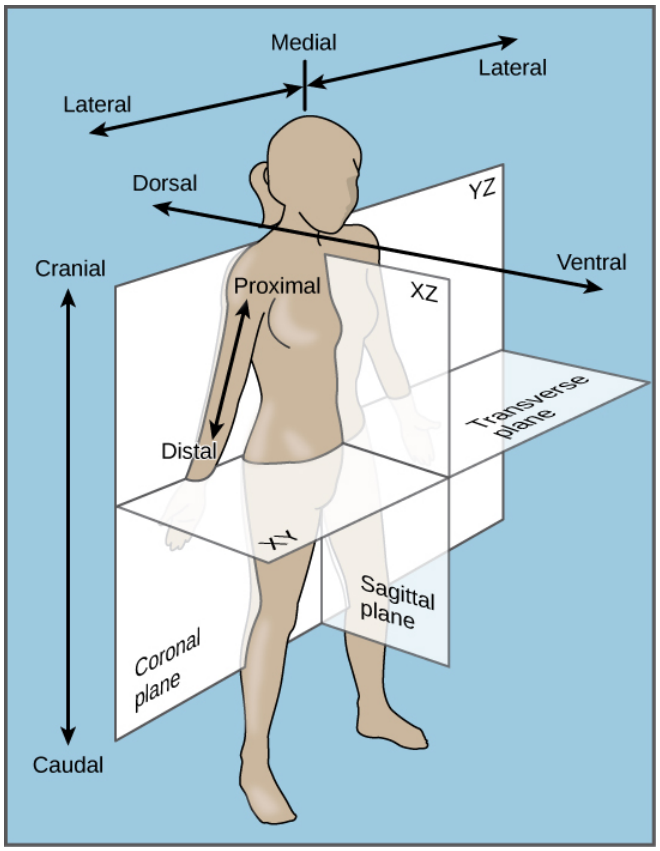
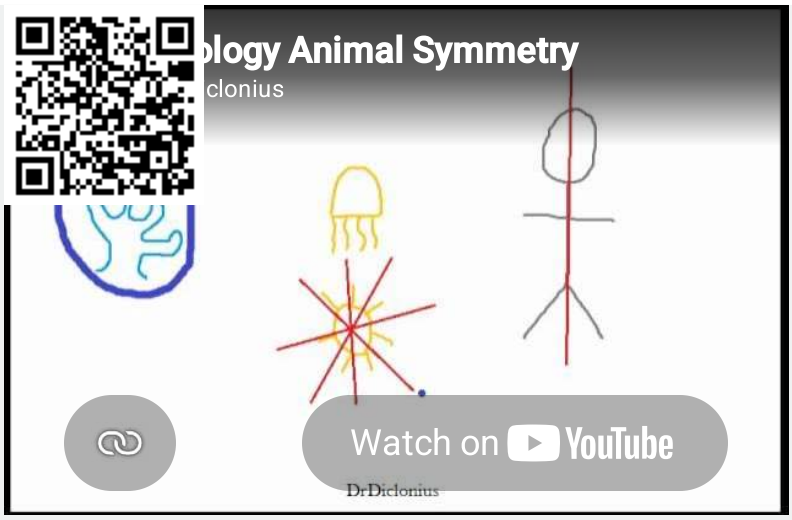


Figure 1.1.3: The bilaterally symmetrical human body can be divided into planes.

Animals in the phylum Echinodermata (such as sea stars, sand dollars, and sea urchins) display radial symmetry as adults, but their larval stages exhibit bilateral symmetry. This is termed secondary radial symmetry. They are believed to have evolved from bilaterally symmetrical animals; thus, they are classified as bilaterally symmetrical.

Link to Learning



Watch this video to see a quick sketch of the different types of body symmetry.

Animal Characterization Based on Features of Embryological Development

Most animal species undergo a separation of tissues into germ layers during embryonic development. Recall that these germ layers are formed during gastrulation, and that they are predetermined to develop into the animal's specialized tissues and organs. Animals develop either two or three embryonic germs layers (Figure 1.1.4). The animals that display radial symmetry develop two germ layers, an inner layer (endoderm) and an outer layer (ectoderm). These animals are called diploblasts. Diploblasts have a non-living layer between the endoderm and ectoderm. More complex animals (those with bilateral symmetry) develop three tissue layers: an inner layer (endoderm), an outer layer (ectoderm), and a middle layer (mesoderm). Animals with three tissue layers are called triploblasts.

Art Connection

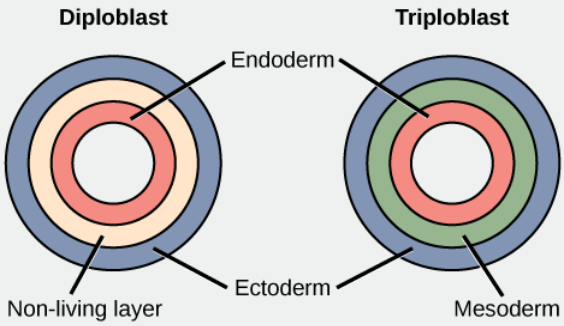


Figure 1.1.4: During embryogenesis, diploblasts develop two embryonic germ layers: an ectoderm and an endoderm. Triploblasts develop a third layer—the mesoderm—between the endoderm and ectoderm.

Which of the following statements about diploblasts and triploblasts is false?

A. Animals that display radial symmetry are diploblasts.
B. Animals that display bilateral symmetry are triploblasts.
C. The endoderm gives rise to the lining of the digestive tract and the respiratory tract.
D. The mesoderm gives rise to the central nervous system.

Each of the three germ layers is programmed to give rise to particular body tissues and organs. The endoderm gives rise to the lining of the digestive tract (including the stomach, intestines, liver, and pancreas), as well as to the lining of the trachea, bronchi, and lungs of the respiratory tract, along with a few other structures. The ectoderm develops into the outer epithelial covering of the body surface, the central nervous system, and a few other structures. The mesoderm is the third germ layer; it forms between the endoderm and ectoderm in triploblasts. This germ layer gives rise to all muscle tissues (including the cardiac tissues and muscles of

the intestines), connective tissues such as the skeleton and blood cells, and most other visceral organs such as the kidneys and the spleen.

Presence or Absence of a Coelom

Further subdivision of animals with three germ layers (triploblasts) results in the separation of animals that may develop an internal body cavity derived from mesoderm, called a coelom, and those that do not. This epithelial cell-lined coelomic cavity represents a space, usually filled with fluid, which lies between the visceral organs and the body wall. It houses many organs such as the digestive system, kidneys, reproductive organs, and heart, and contains the circulatory system. In some animals, such as mammals, the part of the coelom called the pleural cavity provides space for the lungs to expand during breathing. The evolution of the coelom is associated with many functional advantages. Primarily, the coelom provides cushioning and shock absorption for the major organ systems. Organs housed within the coelom can grow and move freely, which promotes optimal organ development and placement. The coelom also provides space for the diffusion of gases and nutrients, as well as body flexibility, promoting improved animal motility.

Triploblasts that do not develop a coelom are called acoelomates, and their mesoderm region is completely filled with tissue, although they do still have a gut cavity. Examples of acoelomates include animals in the phylum Platyhelminthes, also known as flatworms. Animals with a true coelom are called eucoelomates (or coelomates) (Figure 1.1.5). A true coelom arises entirely within the mesoderm germ layer and is lined by an epithelial membrane. This membrane also lines the organs within the coelom, connecting and holding them in position while allowing them some free motion. Annelids, mollusks, arthropods, echinoderms, and chordates are all eucoelomates. A third group of triploblasts has a slightly different coelom derived partly from mesoderm and partly from endoderm, which is found between the two layers. Although still functional, these are considered false coeloms, and those animals are called pseudocoelomates. The phylum Nematoda (roundworms) is an example of a pseudocoelomate. True coelomates can be further characterized based on certain features of their early embryological development.

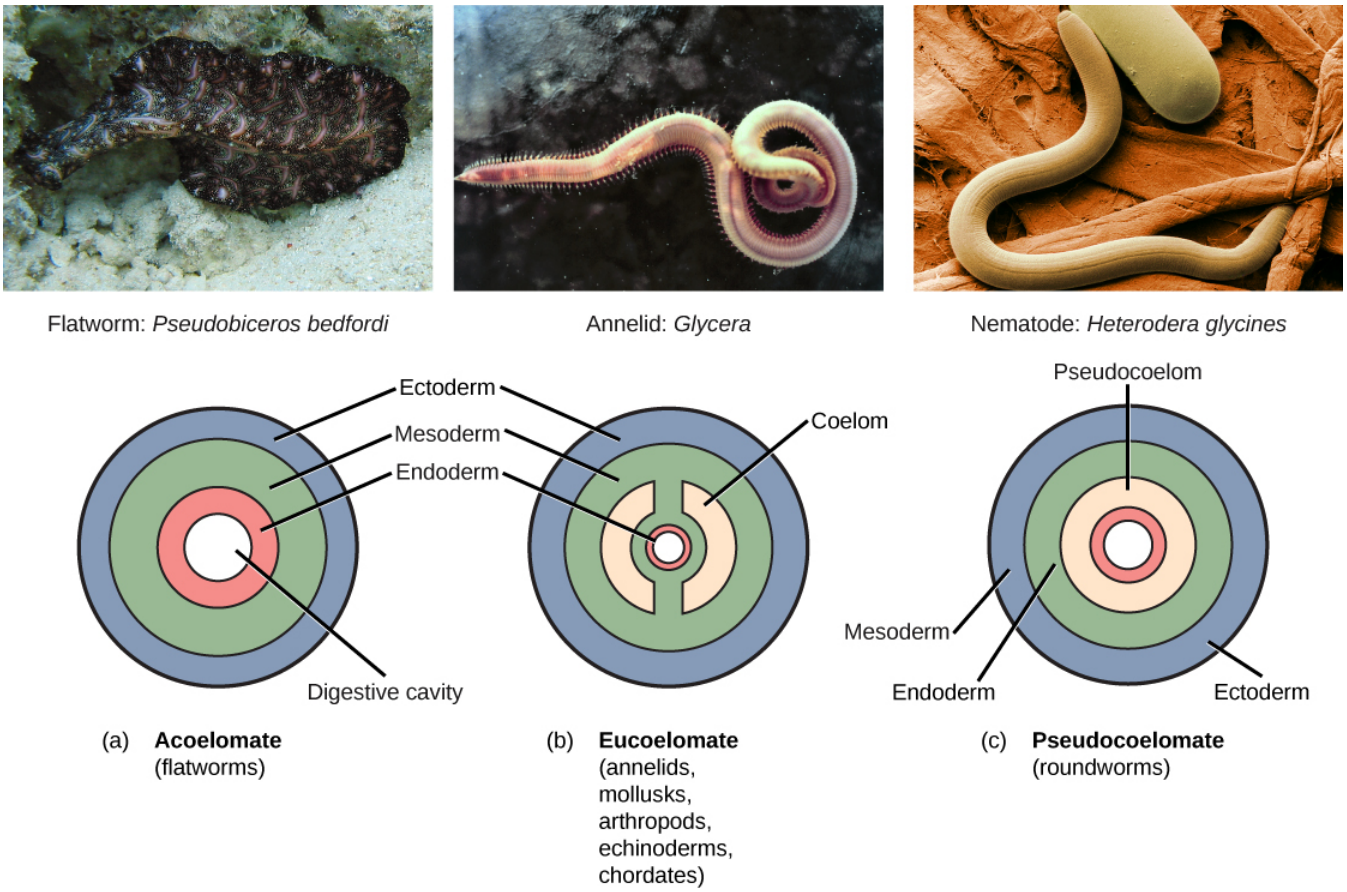


Figure 1.1.5: Triploblasts may be (a) acoelomates, (b) eucoelomates, or (c) pseudocoelomates. Acoelomates have no body cavity. Eucoelomates have a body cavity within the mesoderm, called a coelom, which is lined with mesoderm. Pseudocoelomates also have a body cavity, but it is sandwiched between the endoderm and mesoderm. (credit a: modification of work by Jan Derk; credit b: modification of work by NOAA; credit c: modification of work by USDA, ARS)

Embryonic Development of the Mouth

Bilaterally symmetrical, tribloblastic eucoelomates can be further divided into two groups based on differences in their early embryonic development. Protostomes include arthropods, mollusks, and annelids. Deuterostomes include more complex animals such as chordates but also some simple animals such as echinoderms. These two groups are separated based on which opening of the digestive cavity develops first: mouth or anus. The word protostome comes from the Greek word meaning “mouth first,” and deuterostome originates from the word meaning “mouth second” (in this case, the anus develops first). The mouth or anus develops from a structure called the blastopore (Figure 1.1.6). The blastopore is the indentation formed during the initial stages of gastrulation. In later stages, a second opening forms, and these two openings will eventually give rise to the mouth and anus (Figure 1.1.6). It has long been believed that the blastopore develops into the mouth of protostomes, with the second opening developing into the anus; the opposite is true for deuterostomes. Recent evidence has challenged this view of the development of the blastopore of protostomes, however, and the theory remains under debate.

Another distinction between protostomes and deuterostomes is the method of coelom formation, beginning from the gastrula stage. The coelom of most protostomes is formed through a process called schizocoely, meaning that during development, a solid mass of the mesoderm splits apart and forms the hollow opening of the coelom. Deuterostomes differ in that their coelom forms through a process called enterocoely. Here, the mesoderm develops as pouches that are pinched off from the endoderm tissue. These pouches eventually fuse to form the mesoderm, which then gives rise to the coelom.

The earliest distinction between protostomes and deuterostomes is the type of cleavage undergone by the zygote. Protostomes undergo spiral cleavage, meaning that the cells of one pole of the embryo are rotated, and thus misaligned, with respect to the cells of the opposite pole. This is due to the oblique angle of the cleavage. Deuterostomes undergo radial cleavage, where the cleavage axes are either parallel or perpendicular to the polar axis, resulting in the alignment of the cells between the two poles.

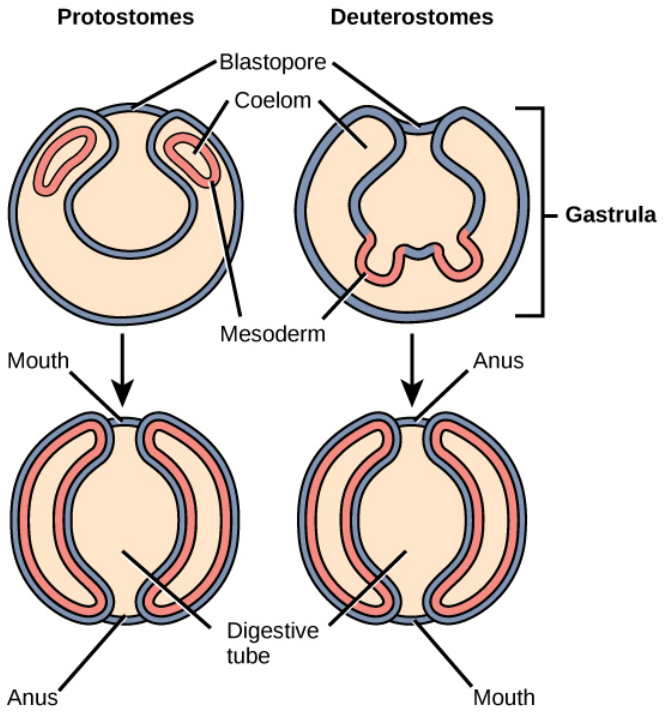


Figure 1.1.6: Eucoelomates can be divided into two groups based on their early embryonic development. In protostomes, part of the mesoderm separates to form the coelom in a process called schizocoely. In deuterostomes, the mesoderm pinches off to form the coelom in a process called enterocoely. It was long believed that the blastopore developed into the mouth in protostomes and into the anus in deuterostomes, but recent evidence challenges this belief.

There is a second distinction between the types of cleavage in protostomes and deuterostomes. In addition to spiral cleavage, protostomes also undergo determinate cleavage. This means that even at this early stage, the developmental fate of each embryonic cell is already determined. A cell does not have the ability to develop into any cell type. In contrast, deuterostomes undergo indeterminate cleavage, in which cells are not yet pre-determined at this early stage to develop into specific cell types. These cells are referred to as undifferentiated cells. This characteristic of deuterostomes is reflected in the existence of familiar embryonic stem cells, which have the ability to develop into any cell type until their fate is programmed at a later developmental stage.

Evolution Connection: The Evolution of the Coelom

One of the first steps in the classification of animals is to examine the animal's body. Studying the body parts tells us not only the roles of the organs in question but also how the species may have evolved. One such structure that is used in classification of animals is the coelom. A coelom is a body cavity that forms during early embryonic development. The coelom allows for compartmentalization of the body parts, so that different organ systems can evolve and nutrient transport is possible. Additionally, because the coelom is a fluid-filled cavity, it protects the organs from shock and compression. Simple animals, such as worms and jellyfish, do not have a coelom. All vertebrates have a coelom that helped them evolve complex organ systems.

Animals that do not have a coelom are called acoelomates. Flatworms and tapeworms are examples of acoelomates. They rely on passive diffusion for nutrient transport across their body. Additionally, the internal organs of acoelomates are not protected from crushing.

Animals that have a true coelom are called eucoelomates; all vertebrates are eucoelomates. The coelom evolves from the mesoderm during embryogenesis. The abdominal cavity contains the stomach, liver, gall bladder, and other digestive organs. Another category of invertebrates animals based on body cavity is pseudocoelomates. These animals have a pseudo-cavity that is not completely lined by mesoderm. Examples include nematode parasites and small worms. These animals are thought to have evolved from coelomates and may have lost their ability to form a coelom through genetic mutations. Thus, this step in early embryogenesis—the formation of the coelom—has had a large evolutionary impact on the various species of the animal kingdom.

Summary

Organisms in the animal kingdom are classified based on their body morphology and development. True animals are divided into those with radial versus bilateral symmetry. Generally, the simpler and often non-motile animals display radial symmetry. Animals with radial symmetry are also generally characterized by the development of two embryological germ layers, the endoderm and ectoderm, whereas animals with bilateral symmetry are generally characterized by the development of a third embryological germ layer, the mesoderm. Animals with three germ layers, called triploblasts, are further characterized by the presence or absence of an internal body cavity called a coelom. The presence of a coelom affords many advantages, and animals with a coelom may be termed true coelomates or pseudocoelomates, depending on which tissue gives rise to the coelom. Coelomates are further divided into one of two groups called protostomes and deuterostomes, based on a number of developmental characteristics, including differences in zygote cleavage and method of coelom formation.

Art Connections

Figure 1.1.1: Which of the following statements is false?

A. Eumetazoans have specialized tissues and parazoans don't.
B. Lophotrochozoa and Ecdysozoa are both Bilataria.
C. Acoela and Cnidaria both possess radial symmetry.
D. Arthropods are more closely related to nematodes than they are to annelids.

Answer

C

Figure 1.1.4: Which of the following statements about diploblasts and triploblasts is false?

A. Animals that display radial symmetry are diploblasts.
B. Animals that display bilateral symmetry are triploblasts.
C. The endoderm gives rise to the lining of the digestive tract and the respiratory tract.
D. The mesoderm gives rise to the central nervous system.

Answer

D

Glossary

acoelomate

animal without a body cavity

bilateral symmetry

type of symmetry in which there is only one plane of symmetry, so the left and right halves of an animal are mirror images

blastopore

indentation formed during gastrulation, evident in the gastrula stage

coelom

lined body cavity

determinate cleavage

developmental tissue fate of each embryonic cell is already determined

deuterostome

blastopore develops into the anus, with the second opening developing into the mouth

diploblast
animal that develops from two germ layers

enterocoely
mesoderm of deuterostomes develops as pouches that are pinched off from endodermal tissue, cavity contained within the pouches becomes coelom

eucoelomate
animal with a body cavity completely lined with mesodermal tissue

indeterminate cleavage
early stage of development when germ cells or “stem cells” are not yet pre-determined to develop into specific cell types

protostome
blastopore develops into the mouth of protostomes, with the second opening developing into the anus

pseudocoelomate
animal with a body cavity located between the mesoderm and endoderm

radial cleavage
cleavage axes are parallel or perpendicular to the polar axis, resulting in the alignment of cells between the two poles

radial symmetry
type of symmetry with multiple planes of symmetry, with body parts (rays) arranged around a central disk

schizocoely
during development of protostomes, a solid mass of mesoderm splits apart and forms the hollow opening of the coelom

spiral cleavage
cells of one pole of the embryo are rotated or misaligned with respect to the cells of the opposite pole

triploblast
animal that develops from three germ layers

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1.2: Prelude to The Animal Body

The arctic fox is an example of a complex animal that has adapted to its environment and illustrates the relationships between an animal's form and function. The structures of animals consist of primary tissues that make up more complex organs and organ systems. Homeostasis allows an animal to maintain a balance between its internal and external environments.



Figure 1.2.1: An arctic fox is a complex animal, well adapted to its environment. It changes coat color with the seasons, and has longer fur in winter to trap heat. (credit: modification of work by Keith Morehouse, USFWS)

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1.3: Animal Form and Function

Skills to Develop

- Describe the various types of body plans that occur in animals
- Describe limits on animal size and shape
- Relate bioenergetics to body size, levels of activity, and the environment

Animals vary in form and function. From a sponge to a worm to a goat, an organism has a distinct body plan that limits its size and shape. Animals' bodies are also designed to interact with their environments, whether in the deep sea, a rainforest canopy, or the desert. Therefore, a large amount of information about the structure of an organism's body (anatomy) and the function of its cells, tissues and organs (physiology) can be learned by studying that organism's environment.

Body Plans

Animal body plans follow set patterns related to symmetry. They are asymmetrical, radial, or bilateral in form as illustrated in Figure 1.3.1. Asymmetrical animals are animals with no pattern or symmetry; an example of an asymmetrical animal is a sponge. Radial symmetry, as illustrated in Figure 1.3.1, describes when an animal has an up-and-down orientation: any plane cut along its longitudinal axis through the organism produces equal halves, but not a definite right or left side. This plan is found mostly in aquatic animals, especially organisms that attach themselves to a base, like a rock or a boat, and extract their food from the surrounding water as it flows around the organism. Bilateral symmetry is illustrated in the same figure by a goat. The goat also has an upper and lower component to it, but a plane cut from front to back separates the animal into definite right and left sides. Additional terms used when describing positions in the body are anterior (front), posterior (rear), dorsal (toward the back), and ventral (toward the stomach). Bilateral symmetry is found in both land-based and aquatic animals; it enables a high level of mobility.

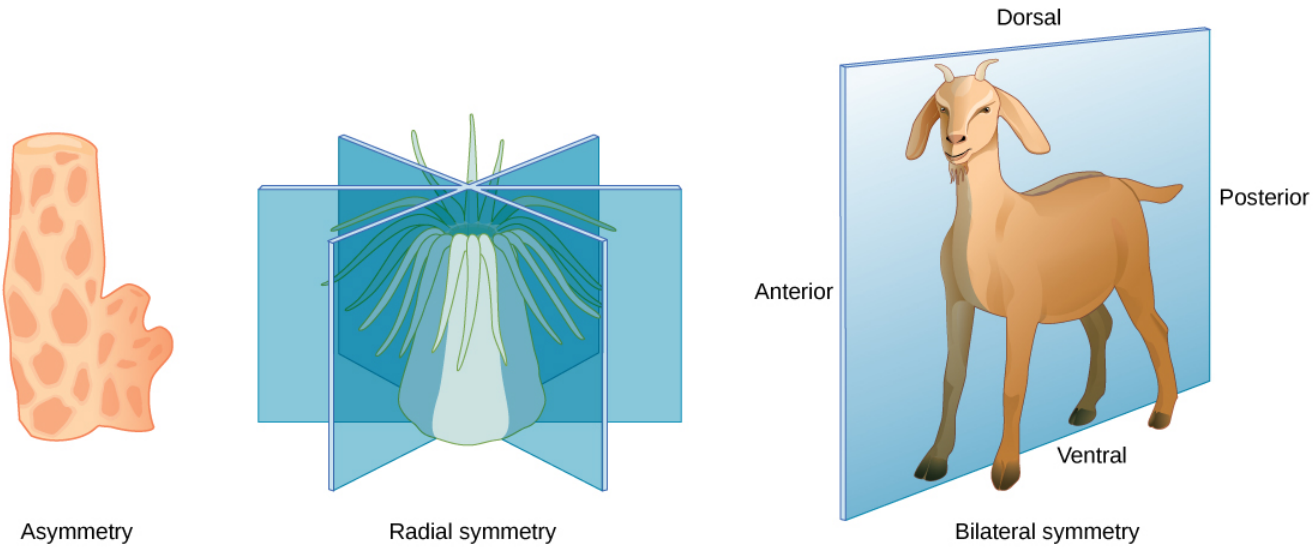


Figure 1.3.1: Animals exhibit different types of body symmetry. The sponge is asymmetrical, the sea anemone has radial symmetry, and the goat has bilateral symmetry.

Limits on Animal Size and Shape

Animals with bilateral symmetry that live in water tend to have a fusiform shape: this is a tubular shaped body that is tapered at both ends. This shape decreases the drag on the body as it moves through water and allows the animal to swim at high speeds. The table below lists the maximum speed of various animals. Certain types of sharks can swim at fifty kilometers an hour and some dolphins at 32 to 40 kilometers per hour. Land animals frequently travel faster, although the tortoise and snail are significantly slower than cheetahs. Another difference in the adaptations of aquatic and land-dwelling organisms is that aquatic organisms are constrained in shape by the forces of drag in the water since water has higher viscosity than air. On the other hand, land-dwelling

organisms are constrained mainly by gravity, and drag is relatively unimportant. For example, most adaptations in birds are for gravity not for drag.

Table 1.3.1**:** Maximum Speed of Assorted Land and Marine Animals

Animal	Speed (kmh)	Speed (mph)
Cheetah	113	70
Quarter horse	77	48
Fox	68	42
Shortfin mako shark	50	31
Domestic house cat	48	30
Human	45	28
Dolphin	32–40	20–25
Mouse	13	8
Snail	0.05	0.03

Most animals have an exoskeleton, including insects, spiders, scorpions, horseshoe crabs, centipedes, and crustaceans. Scientists estimate that, of insects alone, there are over 30 million species on our planet. The exoskeleton is a hard covering or shell that provides benefits to the animal, such as protection against damage from predators and from water loss (for land animals); it also provides for the attachments of muscles.

As the tough and resistant outer cover of an arthropod, the exoskeleton may be constructed of a tough polymer such as chitin and is often biomineralized with materials such as calcium carbonate. This is fused to the animal's epidermis. Ingrowths of the exoskeleton, called apodemes, function as attachment sites for muscles, similar to tendons in more advanced animals (Figure 1.3.2). In order to grow, the animal must first synthesize a new exoskeleton underneath the old one and then shed or molt the original covering. This limits the animal's ability to grow continually, and may limit the individual's ability to mature if molting does not occur at the proper time. The thickness of the exoskeleton must be increased significantly to accommodate any increase in weight. It is estimated that a doubling of body size increases body weight by a factor of eight. The increasing thickness of the chitin necessary to support this weight limits most animals with an exoskeleton to a relatively small size. The same principles apply to endoskeletons, but they are more efficient because muscles are attached on the outside, making it easier to compensate for increased mass.

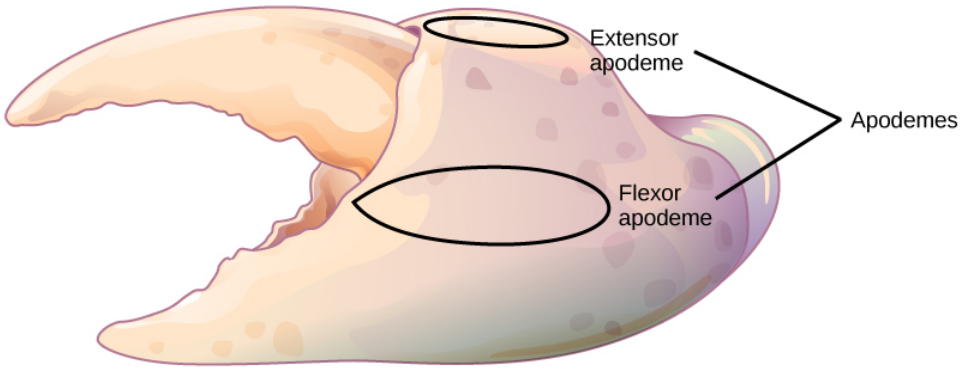


Figure 1.3.2: Apodemes are ingrowths on arthropod exoskeletons to which muscles attach. The apodemes on this crab leg are located above and below the fulcrum of the claw. Contraction of muscles attached to the apodemes pulls the claw closed.

An animal with an endoskeleton has its size determined by the amount of skeletal system it needs in order to support the other tissues and the amount of muscle it needs for movement. As the body size increases, both bone and muscle mass increase. The speed achievable by the animal is a balance between its overall size and the bone and muscle that provide support and movement.

Limiting Effects of Diffusion on Size and Development

The exchange of nutrients and wastes between a cell and its watery environment occurs through the process of diffusion. All living cells are bathed in liquid, whether they are in a single-celled organism or a multicellular one. Diffusion is effective over a specific distance and limits the size that an individual cell can attain. If a cell is a single-celled microorganism, such as an amoeba, it can satisfy all of its nutrient and waste needs through diffusion. If the cell is too large, then diffusion is ineffective and the center of the cell does not receive adequate nutrients nor is it able to effectively dispel its waste.

An important concept in understanding how efficient diffusion is as a means of transport is the surface to volume ratio. Recall that any three-dimensional object has a surface area and volume; the ratio of these two quantities is the surface-to-volume ratio. Consider a cell shaped like a perfect sphere: it has a surface area of $4\pi r^2$, and a volume of $(4/3)\pi r^3$. The surface-to-volume ratio of a sphere is 3/r; as the cell gets bigger, its surface to volume ratio decreases, making diffusion less efficient. The larger the size of the sphere, or animal, the less surface area for diffusion it possesses.

The solution to producing larger organisms is for them to become multicellular. Specialization occurs in complex organisms, allowing cells to become more efficient at doing fewer tasks. For example, circulatory systems bring nutrients and remove waste, while respiratory systems provide oxygen for the cells and remove carbon dioxide from them. Other organ systems have developed further specialization of cells and tissues and efficiently control body functions. Moreover, surface-to-volume ratio applies to other areas of animal development, such as the relationship between muscle mass and cross-sectional surface area in supporting skeletons, and in the relationship between muscle mass and the generation of dissipation of heat.

Animal Bioenergetics

All animals must obtain their energy from food they ingest or absorb. These nutrients are converted to adenosine triphosphate (ATP) for short-term storage and use by all cells. Some animals store energy for slightly longer times as glycogen, and others store energy for much longer times in the form of triglycerides housed in specialized adipose tissues. No energy system is one hundred percent efficient, and an animal's metabolism produces waste energy in the form of heat. If an animal can conserve that heat and maintain a relatively constant body temperature, it is classified as a warm-blooded animal and called an endotherm. The insulation used to conserve the body heat comes in the forms of fur, fat, or feathers. The absence of insulation in ectothermic animals increases their dependence on the environment for body heat.

The amount of energy expended by an animal over a specific time is called its metabolic rate. The rate is measured variously in joules, calories, or kilocalories (1000 calories). Carbohydrates and proteins contain about 4.5 to 5 kcal/g, and fat contains about 9 kcal/g. Metabolic rate is estimated as the basal metabolic rate (BMR) in endothermic animals at rest and as the standard metabolic rate (SMR) in ectotherms. Human males have a BMR of 1600 to 1800 kcal/day, and human females have a BMR of 1300 to 1500 kcal/day. Even with insulation, endothermal animals require extensive amounts of energy to maintain a constant body temperature. An ectotherm such as an alligator has an SMR of 60 kcal/day.

Energy Requirements Related to Body Size

Smaller endothermic animals have a greater surface area for their mass than larger ones (Figure 1.3.3). Therefore, smaller animals lose heat at a faster rate than larger animals and require more energy to maintain a constant internal temperature. This results in a smaller endothermic animal having a higher BMR, per body weight, than a larger endothermic animal.

Species		
Mass	35 g	4,500,000 g
Metabolic rate	890 mm^3 0_2/g body mass/hr	75 mm^3 0_2/g body mass/hr

Figure 1.3.3: The mouse has a much higher metabolic rate than the elephant. (credit “mouse”: modification of work by Magnus Kjaergaard; credit “elephant”: modification of work by “TheLizardQueen”/Flickr)

Energy Requirements Related to Levels of Activity

The more active an animal is, the more energy is needed to maintain that activity, and the higher its BMR or SMR. The average daily rate of energy consumption is about two to four times an animal’s BMR or SMR. Humans are more sedentary than most animals and have an average daily rate of only 1.5 times the BMR. The diet of an endothermic animal is determined by its BMR. For example: the type of grasses, leaves, or shrubs that an herbivore eats affects the number of calories that it takes in. The relative caloric content of herbivore foods, in descending order, is tall grasses > legumes > short grasses > forbs (any broad-leaved plant, not a grass) > subshrubs > annuals/biennials.

Energy Requirements Related to Environment

Animals adapt to extremes of temperature or food availability through torpor. Torpor is a process that leads to a decrease in activity and metabolism and allows animals to survive adverse conditions. Torpor can be used by animals for long periods, such as entering a state of hibernation during the winter months, in which case it enables them to maintain a reduced body temperature. During hibernation, ground squirrels can achieve an abdominal temperature of 0° C (32° F), while a bear’s internal temperature is maintained higher at about 37° C (99° F).

If torpor occurs during the summer months with high temperatures and little water, it is called estivation. Some desert animals use this to survive the harshest months of the year. Torpor can occur on a daily basis; this is seen in bats and hummingbirds. While endothermy is limited in smaller animals by surface to volume ratio, some organisms can be smaller and still be endotherms because they employ daily torpor during the part of the day that is coldest. This allows them to conserve energy during the colder parts of the day, when they consume more energy to maintain their body temperature.

Animal Body Planes and Cavities

A standing vertebrate animal can be divided by several planes. A sagittal plane divides the body into right and left portions. A midsagittal plane divides the body exactly in the middle, making two equal right and left halves. A frontal plane (also called a coronal plane) separates the front from the back. A transverse plane (or, horizontal plane) divides the animal into upper and lower portions. This is sometimes called a cross section, and, if the transverse cut is at an angle, it is called an oblique plane. Figure 1.3.4 illustrates these planes on a goat (a four-legged animal) and a human being.

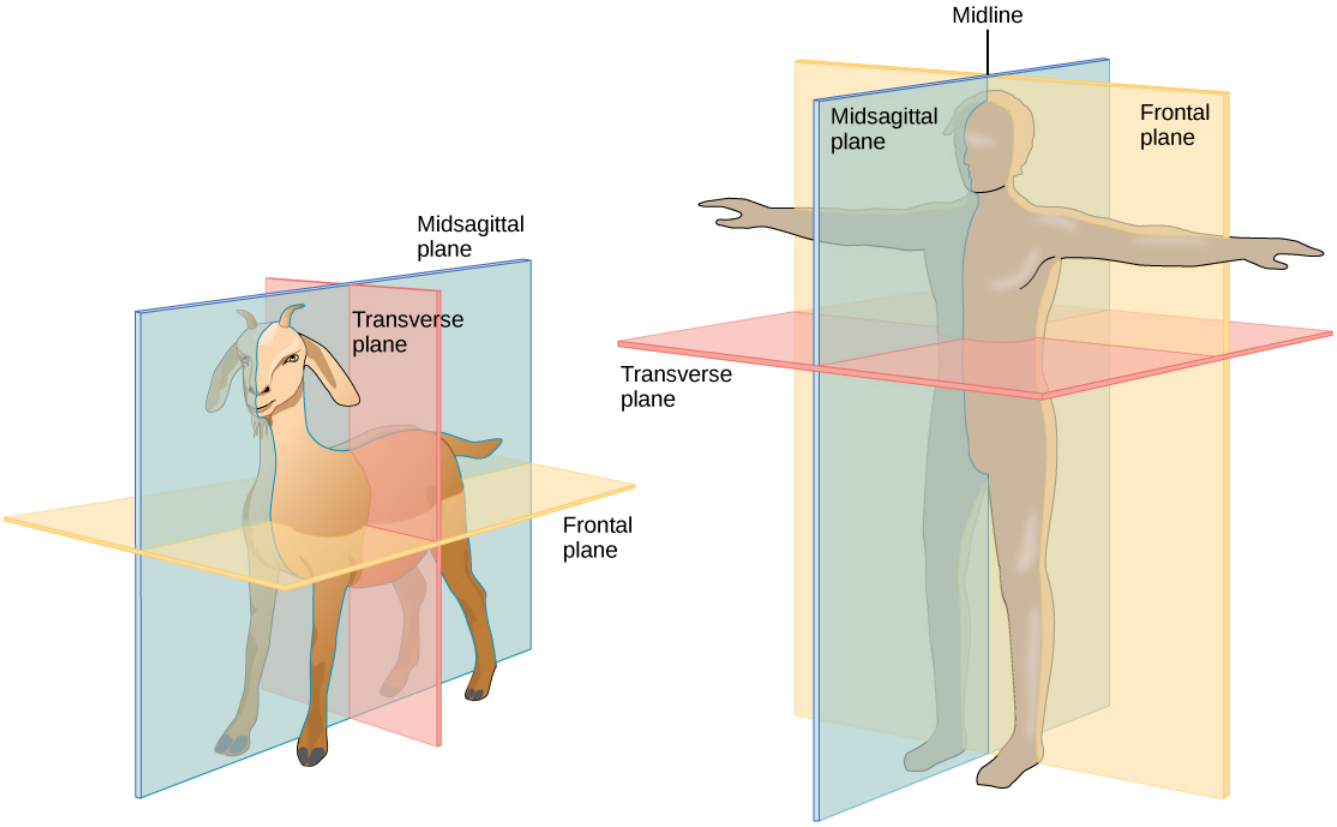


Figure 1.3.4: Shown are the planes of a quadruped goat and a bipedal human. The midsagittal plane divides the body exactly in half, into right and left portions. The frontal plane divides the front and back, and the transverse plane divides the body into upper and lower portions.

Vertebrate animals have a number of defined body cavities, as illustrated in Figure 1.3.5. Two of these are major cavities that contain smaller cavities within them. The dorsal cavity contains the cranial and the vertebral (or spinal) cavities. The ventral cavity contains the thoracic cavity, which in turn contains the pleural cavity around the lungs and the pericardial cavity, which surrounds the heart. The ventral cavity also contains the abdominopelvic cavity, which can be separated into the abdominal and the pelvic cavities.

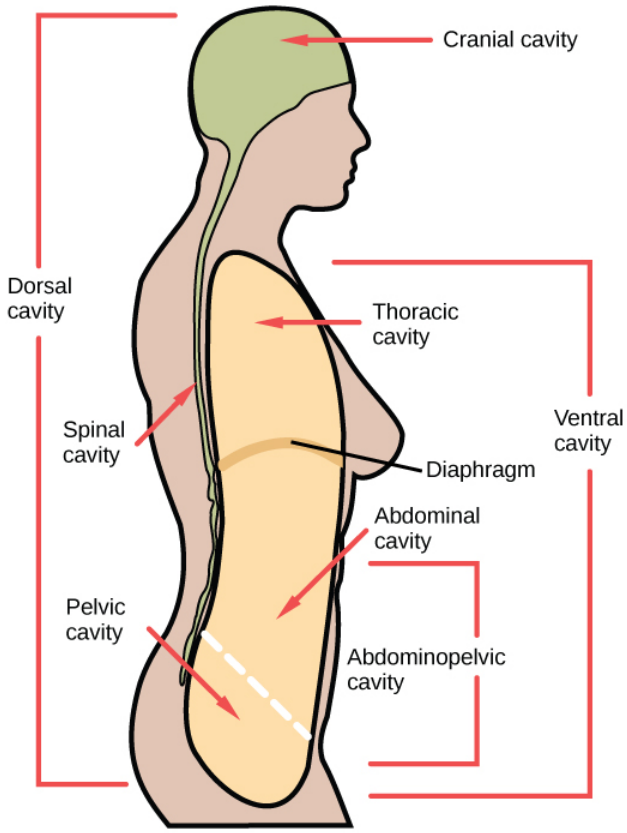


Figure 1.3.5: Vertebrate animals have two major body cavities. The dorsal cavity, indicated in green, contains the cranial and the spinal cavity. The ventral cavity, indicated in yellow, contains the thoracic cavity and the abdominopelvic cavity. The thoracic cavity is separated from the abdominopelvic cavity by the diaphragm. The thoracic cavity is separated into the abdominal cavity and the pelvic cavity by an imaginary line parallel to the pelvis bones. (credit: modification of work by NCI)

Career Connections: Physical Anthropologist

Physical anthropologists study the adaption, variability, and evolution of human beings, plus their living and fossil relatives. They can work in a variety of settings, although most will have an academic appointment at a university, usually in an anthropology department or a biology, genetics, or zoology department.

Non-academic positions are available in the automotive and aerospace industries where the focus is on human size, shape, and anatomy. Research by these professionals might range from studies of how the human body reacts to car crashes to exploring how to make seats more comfortable. Other non-academic positions can be obtained in museums of natural history, anthropology, archaeology, or science and technology. These positions involve educating students from grade school through graduate school. Physical anthropologists serve as education coordinators, collection managers, writers for museum publications, and as administrators. Zoos employ these professionals, especially if they have an expertise in primate biology; they work in collection management and captive breeding programs for endangered species. Forensic science utilizes physical anthropology expertise in identifying human and animal remains, assisting in determining the cause of death, and for expert testimony in trials.

Summary

Animal bodies come in a variety of sizes and shapes. Limits on animal size and shape include impacts to their movement. Diffusion affects their size and development. Bioenergetics describes how animals use and obtain energy in relation to their body size, activity level, and environment.

Glossary

apodeme
ingrowth of an animal’s exoskeleton that functions as an attachment site for muscles

asymmetrical
describes animals with no axis of symmetry in their body pattern

basal metabolic rate (BMR)
metabolic rate at rest in endothermic animals

dorsal cavity
body cavity on the posterior or back portion of an animal; includes the cranial and vertebral cavities

ectotherm
animal incapable of maintaining a relatively constant internal body temperature

endotherm
animal capable of maintaining a relatively constant internal body temperature

estivation
torpor in response to extremely high temperatures and low water availability

frontal (coronal) plane
plane cutting through an animal separating the individual into front and back portions

fusiform
animal body shape that is tubular and tapered at both ends

hibernation
torpor over a long period of time, such as a winter

midsagittal plane
plane cutting through an animal separating the individual into even right and left sides

sagittal plane
plane cutting through an animal separating the individual into right and left sides

standard metabolic rate (SMR)
metabolic rate at rest in ectothermic animals

torpor
decrease in activity and metabolism that allows an animal to survive adverse conditions

transverse (horizontal) plane
plane cutting through an animal separating the individual into upper and lower portions

ventral cavity
body cavity on the anterior or front portion of an animal that includes the thoracic cavities and the abdominopelvic cavities

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1.4: Animal Primary Tissues

Skills to Develop

- Describe epithelial tissues
- Discuss the different types of connective tissues in animals
- Describe three types of muscle tissues
- Describe nervous tissue

The tissues of multicellular, complex animals are four primary types: epithelial, connective, muscle, and nervous. Recall that tissues are groups of similar cells group of similar cells carrying out related functions. These tissues combine to form organs—like the skin or kidney—that have specific, specialized functions within the body. Organs are organized into organ systems to perform functions; examples include the circulatory system, which consists of the heart and blood vessels, and the digestive system, consisting of several organs, including the stomach, intestines, liver, and pancreas. Organ systems come together to create an entire organism.

Epithelial Tissues

Epithelial tissues cover the outside of organs and structures in the body and line the lumens of organs in a single layer or multiple layers of cells. The types of epithelia are classified by the shapes of cells present and the number of layers of cells. Epithelia composed of a single layer of cells is called simple epithelia; epithelial tissue composed of multiple layers is called stratified epithelia. The table summarizes the different types of epithelial tissues.

Table 1.4.1**:** Different Types of Epithelial Tissues

Cell shape	Description	Location
squamous	flat, irregular round shape	simple: lung alveoli, capillaries stratified: skin, mouth, vagina
cuboidal	cube shaped, central nucleus	glands, renal tubules
columnar	tall, narrow, nucleus toward base tall, narrow, nucleus along cell	simple: digestive tract pseudostratified: respiratory tract
transitional	round, simple but appear stratified	urinary bladder

Squamous Epithelia

Squamous epithelial cells are generally round, flat, and have a small, centrally located nucleus. The cell outline is slightly irregular, and cells fit together to form a covering or lining. When the cells are arranged in a single layer (simple epithelia), they facilitate diffusion in tissues, such as the areas of gas exchange in the lungs and the exchange of nutrients and waste at blood capillaries.

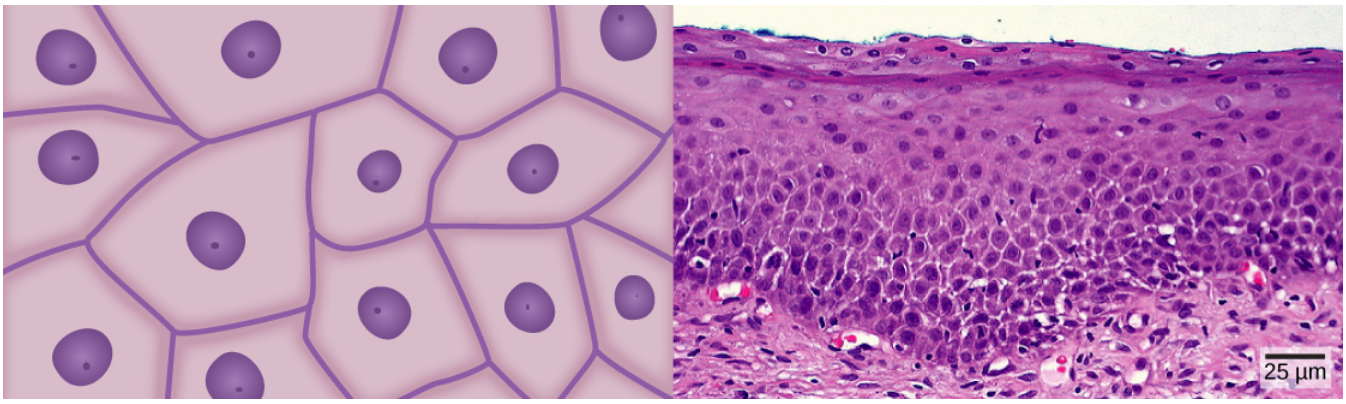


Figure 1.4.1: Squamous epithelia cells (a) have a slightly irregular shape, and a small, centrally located nucleus. These cells can be stratified into layers, as in (b) this human cervix specimen. (credit b: modification of work by Ed Uthman; scale-bar data from Matt Russell)

Figure 1.4.1 illustrates a layer of squamous cells with their membranes joined together to form an epithelium. Image Figure 1.4.1 illustrates squamous epithelial cells arranged in stratified layers, where protection is needed on the body from outside abrasion and damage. This is called a stratified squamous epithelium and occurs in the skin and in tissues lining the mouth and vagina.

Cuboidal Epithelia

Cuboidal epithelial cells, shown in Figure 1.4.2, are cube-shaped with a single, central nucleus. They are most commonly found in a single layer representing a simple epithelia in glandular tissues throughout the body where they prepare and secrete glandular material. They are also found in the walls of tubules and in the ducts of the kidney and liver.

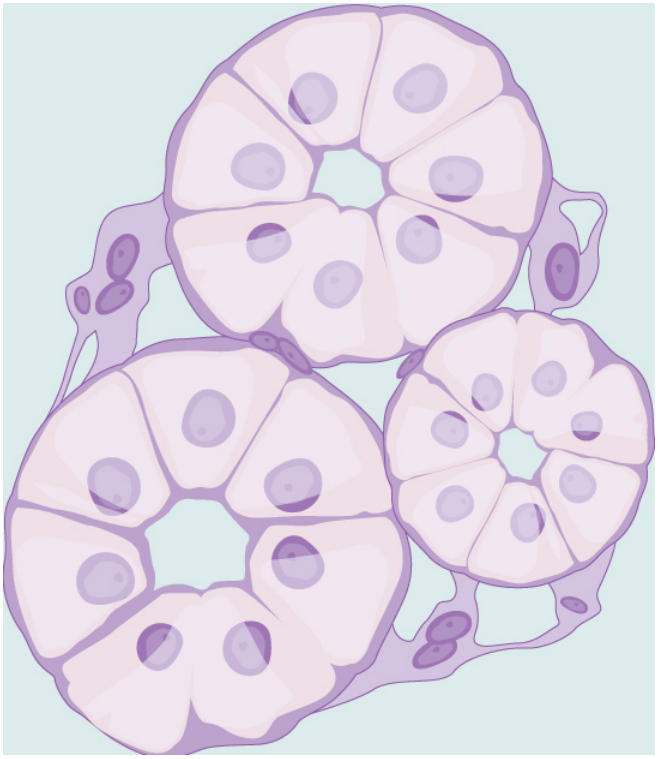


Figure 1.4.2: Simple cuboidal epithelial cells line tubules in the mammalian kidney, where they are involved in filtering the blood.

Columnar Epithelia

Columnar epithelial cells are taller than they are wide: they resemble a stack of columns in an epithelial layer, and are most commonly found in a single-layer arrangement. The nuclei of columnar epithelial cells in the digestive tract appear to be lined up at the base of the cells, as illustrated in Figure 1.4.3. These cells absorb material from the lumen of the digestive tract and prepare it for entry into the body through the circulatory and lymphatic systems.

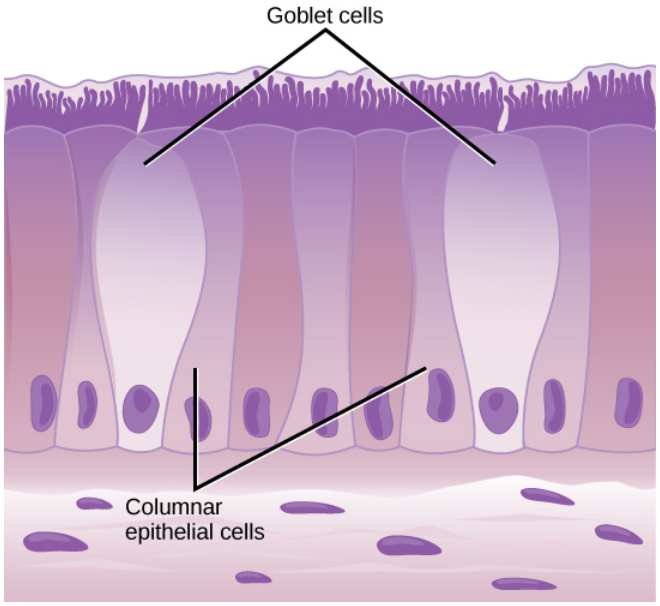


Figure 1.4.3: Simple columnar epithelial cells absorb material from the digestive tract. Goblet cells secret mucous into the digestive tract lumen.

Columnar epithelial cells lining the respiratory tract appear to be stratified. However, each cell is attached to the base membrane of the tissue and, therefore, they are simple tissues. The nuclei are arranged at different levels in the layer of cells, making it appear as though there is more than one layer, as seen in Figure 1.4.4. This is called pseudostratified, columnar epithelia. This cellular covering has cilia at the apical, or free, surface of the cells. The cilia enhance the movement of mucous and trapped particles out of the respiratory tract, helping to protect the system from invasive microorganisms and harmful material that has been breathed into the body. Goblet cells are interspersed in some tissues (such as the lining of the trachea). The goblet cells contain mucous that traps irritants, which in the case of the trachea keep these irritants from getting into the lungs.

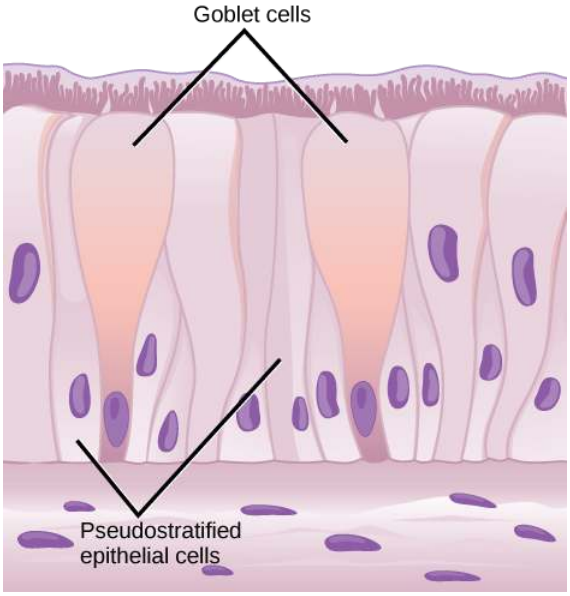


Figure 1.4.4: Pseudostratified columnar epithelia line the respiratory tract. They exist in one layer, but the arrangement of nuclei at different levels makes it appear that there is more than one layer. Goblet cells interspersed between the columnar epithelial cells secrete mucous into the respiratory tract.

Transitional Epithelia

Transitional or uroepithelial cells appear only in the urinary system, primarily in the bladder and ureter. These cells are arranged in a stratified layer, but they have the capability of appearing to pile up on top of each other in a relaxed, empty bladder, as illustrated in Figure 1.4.5. As the urinary bladder fills, the epithelial layer unfolds and expands to hold the volume of urine introduced into it. As the bladder fills, it expands and the lining becomes thinner. In other words, the tissue transitions from thick to thin.

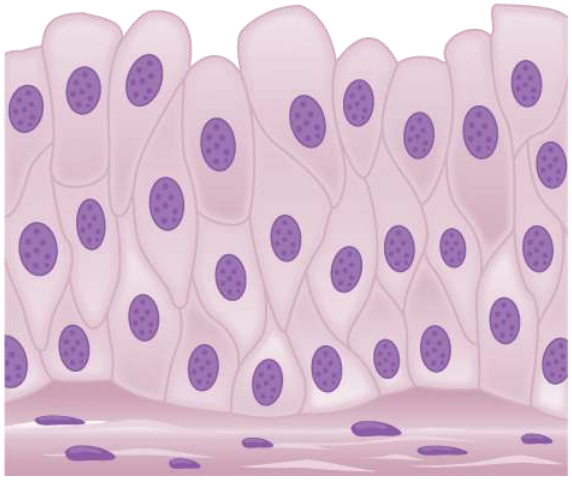


Figure 1.4.5: Transitional epithelia of the urinary bladder undergo changes in thickness depending on how full the bladder is.

Exercise

Which of the following statements about types of epithelial cells is false?

A. Simple columnar epithelial cells line the tissue of the lung.
B. Simple cuboidal epithelial cells are involved in the filtering of blood in the kidney.
C. Pseudostratisfied columnar epithilia occur in a single layer, but the arrangement of nuclei makes it appear that more than one layer is present.
D. Transitional epithelia change in thickness depending on how full the bladder is.

Answer

A

Connective Tissues

Connective tissues are made up of a matrix consisting of living cells and a non-living substance, called the ground substance. The ground substance is made of an organic substance (usually a protein) and an inorganic substance (usually a mineral or water). The principal cell of connective tissues is the fibroblast. This cell makes the fibers found in nearly all of the connective tissues. Fibroblasts are motile, able to carry out mitosis, and can synthesize whichever connective tissue is needed. Macrophages, lymphocytes, and, occasionally, leukocytes can be found in some of the tissues. Some tissues have specialized cells that are not found in the others. The matrix in connective tissues gives the tissue its density. When a connective tissue has a high concentration of cells or fibers, it has proportionally a less dense matrix.

The organic portion or protein fibers found in connective tissues are either collagen, elastic, or reticular fibers. Collagen fibers provide strength to the tissue, preventing it from being torn or separated from the surrounding tissues. Elastic fibers are made of the protein elastin; this fiber can stretch to one and one half of its length and return to its original size and shape. Elastic fibers provide flexibility to the tissues. Reticular fibers are the third type of protein fiber found in connective tissues. This fiber consists of thin strands of collagen that form a network of fibers to support the tissue and other organs to which it is connected. The various types of connective tissues, the types of cells and fibers they are made of, and sample locations of the tissues is summarized in the table.

Table 1.4.2**:** Connective Tissues

Tissue	Cells	Fibers	Location
loose/areolar	fibroblasts, macrophages, some lymphocytes, some neutrophils	few: collagen, elastic, reticular	around blood vessels; anchors epithelia
dense, fibrous connective tissue	fibroblasts, macrophages,	mostly collagen	irregular: skin regular: tendons, ligaments
cartilage	chondrocytes, chondroblasts	hyaline: few collagen fibrocartilage: large amount of collagen	shark skeleton, fetal bones, human ears, intervertebral discs
bone	osteoblasts, osteocytes, osteoclasts	some: collagen, elastic	vertebrate skeletons
adipose	adipocytes	few	adipose (fat)
blood	red blood cells, white blood cells	none	blood

Loose/Areolar Connective Tissue

Loose connective tissue, also called areolar connective tissue, has a sampling of all of the components of a connective tissue. As illustrated in Figure 1.4.6, loose connective tissue has some fibroblasts; macrophages are present as well. Collagen fibers are relatively wide and stain a light pink, while elastic fibers are thin and stain dark blue to black. The space between the formed elements of the tissue is filled with the matrix. The material in the connective tissue gives it a loose consistency similar to a cotton ball that has been pulled apart. Loose connective tissue is found around every blood vessel and helps to keep the vessel in place. The tissue is also found around and between most body organs. In summary, areolar tissue is tough, yet flexible, and comprises membranes.

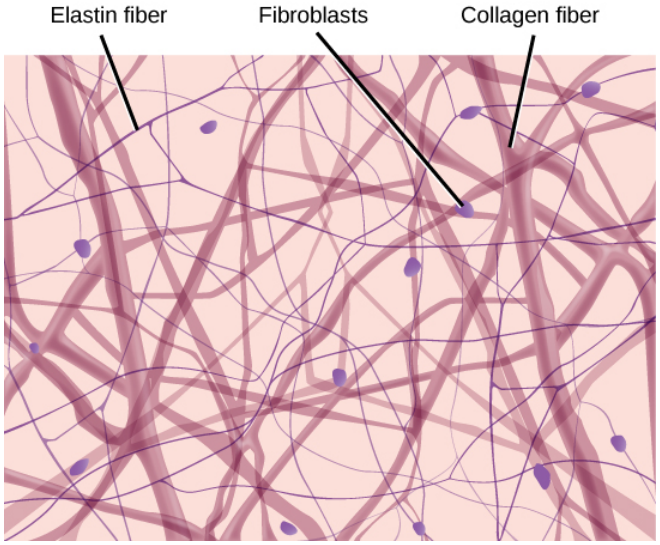


Figure 1.4.6: Loose connective tissue is composed of loosely woven collagen and elastic fibers. The fibers and other components of the connective tissue matrix are secreted by fibroblasts.

Fibrous Connective Tissue

Fibrous connective tissues contain large amounts of collagen fibers and few cells or matrix material. The fibers can be arranged irregularly or regularly with the strands lined up in parallel. Irregularly arranged fibrous connective tissues are found in areas of the body where stress occurs from all directions, such as the dermis of the skin. Regular fibrous connective tissue, shown in Figure 1.4.7, is found in tendons (which connect muscles to bones) and ligaments (which connect bones to bones).

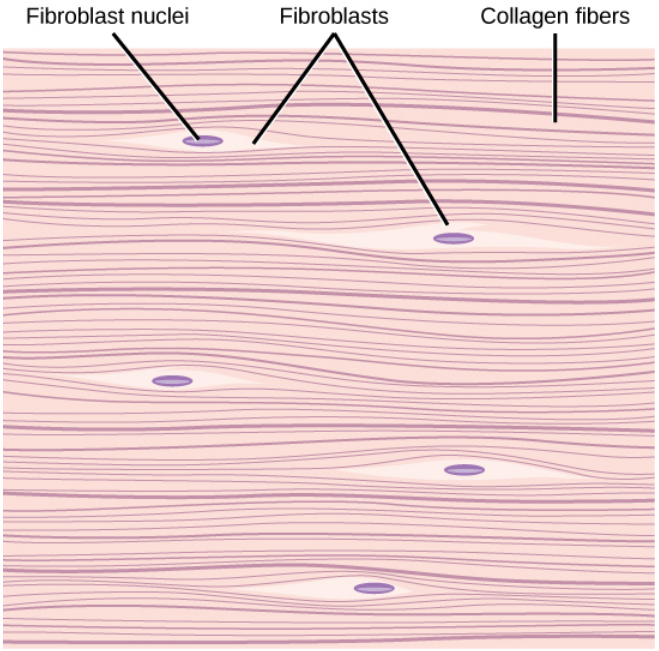


Figure 1.4.7: Fibrous connective tissue from the tendon has strands of collagen fibers lined up in parallel.

Cartilage

Cartilage is a connective tissue with a large amount of the matrix and variable amounts of fibers. The cells, called chondrocytes, make the matrix and fibers of the tissue. Chondrocytes are found in spaces within the tissue called lacunae.

A cartilage with few collagen and elastic fibers is hyaline cartilage, illustrated in Figure 1.4.8. The lacunae are randomly scattered throughout the tissue and the matrix takes on a milky or scrubbed appearance with routine histological stains. Sharks have cartilaginous skeletons, as does nearly the entire human skeleton during a specific pre-birth developmental stage. A remnant of this cartilage persists in the outer portion of the human nose. Hyaline cartilage is also found at the ends of long bones, reducing friction and cushioning the articulations of these bones.

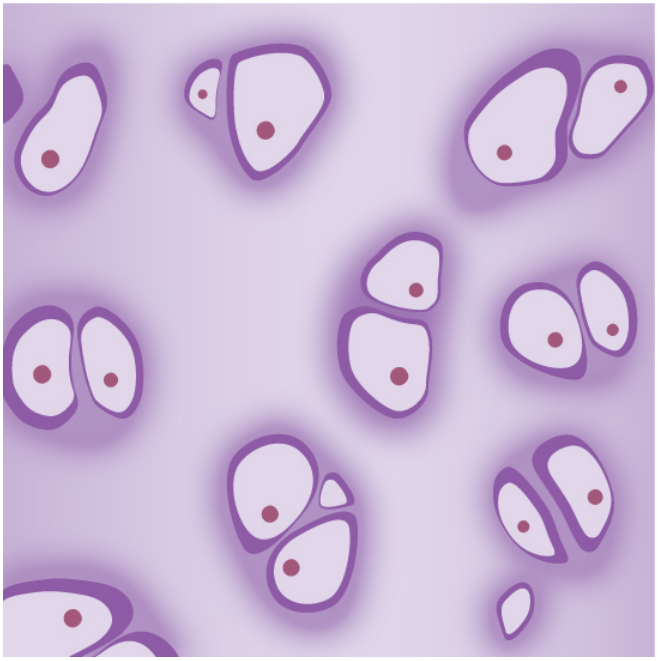


Figure 1.4.8: Hyaline cartilage consists of a matrix with cells called chondrocytes embedded in it. The chondrocytes exist in cavities in the matrix called lacunae.

Elastic cartilage has a large amount of elastic fibers, giving it tremendous flexibility. The ears of most vertebrate animals contain this cartilage as do portions of the larynx, or voice box. Fibrocartilage contains a large amount of collagen fibers, giving the tissue tremendous strength. Fibrocartilage comprises the intervertebral discs in vertebrate animals. Hyaline cartilage found in movable joints such as the knee and shoulder becomes damaged as a result of age or trauma. Damaged hyaline cartilage is replaced by fibrocartilage and results in the joints becoming "stiff."

Bone

Bone, or osseous tissue, is a connective tissue that has a large amount of two different types of matrix material. The organic matrix is similar to the matrix material found in other connective tissues, including some amount of collagen and elastic fibers. This gives strength and flexibility to the tissue. The inorganic matrix consists of mineral salts—mostly calcium salts—that give the tissue hardness. Without adequate organic material in the matrix, the tissue breaks; without adequate inorganic material in the matrix, the tissue bends.

There are three types of cells in bone: osteoblasts, osteocytes, and osteoclasts. Osteoblasts are active in making bone for growth and remodeling. Osteoblasts deposit bone material into the matrix and, after the matrix surrounds them, they continue to live, but in a reduced metabolic state as osteocytes. Osteocytes are found in lacunae of the bone. Osteoclasts are active in breaking down bone for bone remodeling, and they provide access to calcium stored in tissues. Osteoclasts are usually found on the surface of the tissue.

Bone can be divided into two types: compact and spongy. Compact bone is found in the shaft (or diaphysis) of a long bone and the surface of the flat bones, while spongy bone is found in the end (or epiphysis) of a long bone. Compact bone is organized into subunits called osteons, as illustrated in Figure 1.4.9. A blood vessel and a nerve are found in the center of the structure within the Haversian canal, with radiating circles of lacunae around it known as lamellae. The wavy lines seen between the lacunae are microchannels called *canaliculi*; they connect the lacunae to aid diffusion between the cells. Spongy bone is made of tiny plates called trabeculae these plates serve as struts to give the spongy bone strength. Over time, these plates can break causing the bone to become less resilient. Bone tissue forms the internal skeleton of vertebrate animals, providing structure to the animal and points of attachment for tendons.

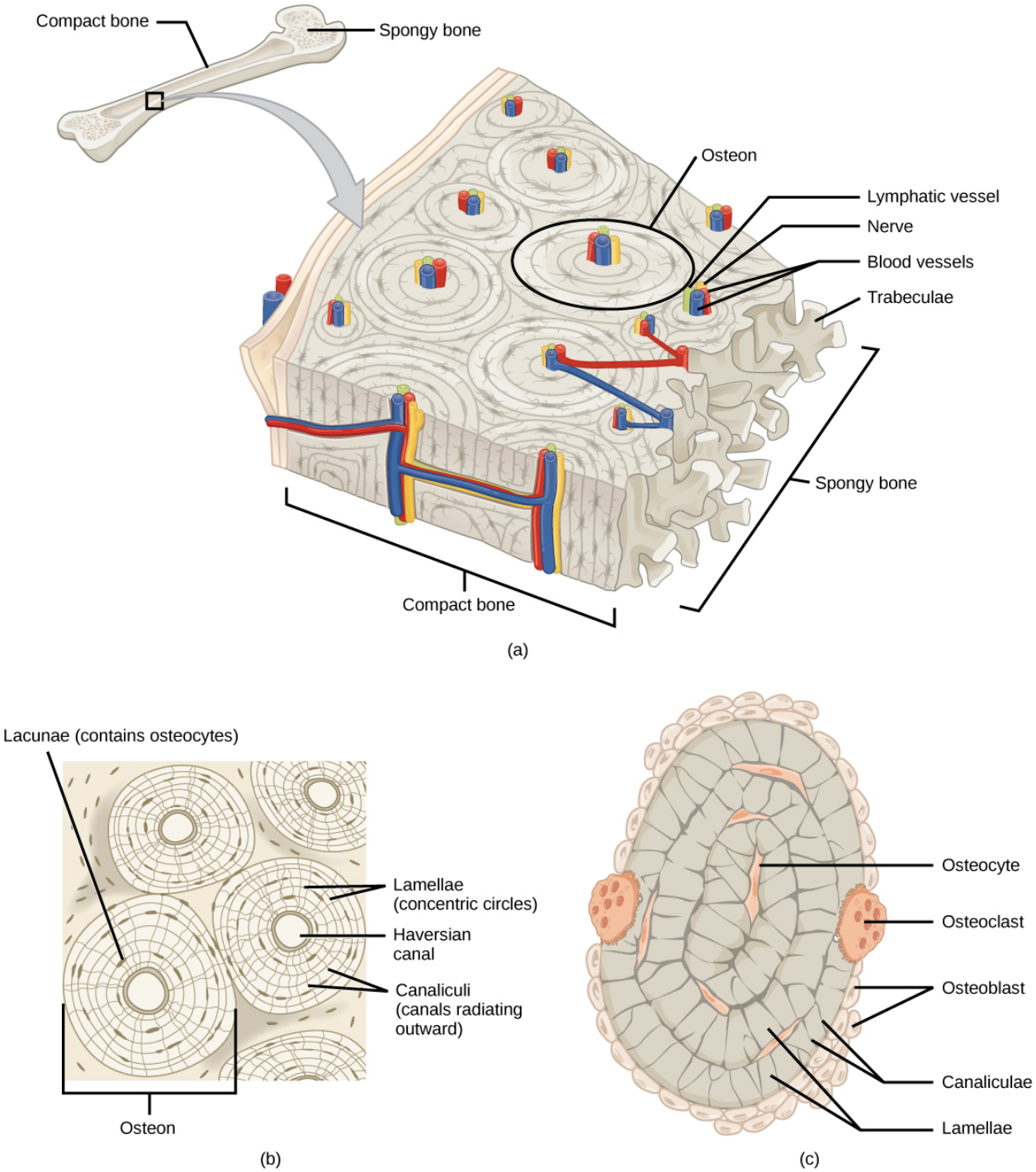


Figure 1.4.9: (a) Compact bone is a dense matrix on the outer surface of bone. Spongy bone, inside the compact bone, is porous with web-like trabeculae. (b) Compact bone is organized into rings called osteons. Blood vessels, nerves, and lymphatic vessels are found in the central Haversian canal. Rings of lamellae surround the Haversian canal. Between the lamellae are cavities called lacunae. Canaliculi are microchannels connecting the lacunae together. (c) Osteoblasts surround the exterior of the bone. Osteoclasts bore tunnels into the bone and osteocytes are found in the lacunae.

Adipose Tissue

Adipose tissue, or fat tissue, is considered a connective tissue even though it does not have fibroblasts or a real matrix and only has a few fibers. Adipose tissue is made up of cells called adipocytes that collect and store fat in the form of triglycerides, for energy metabolism. Adipose tissues additionally serve as insulation to help maintain body temperatures, allowing animals to be endothermic, and they function as cushioning against damage to body organs. Under a microscope, adipose tissue cells appear

empty due to the extraction of fat during the processing of the material for viewing, as seen in Figure 1.4.10. The thin lines in the image are the cell membranes, and the nuclei are the small, black dots at the edges of the cells.

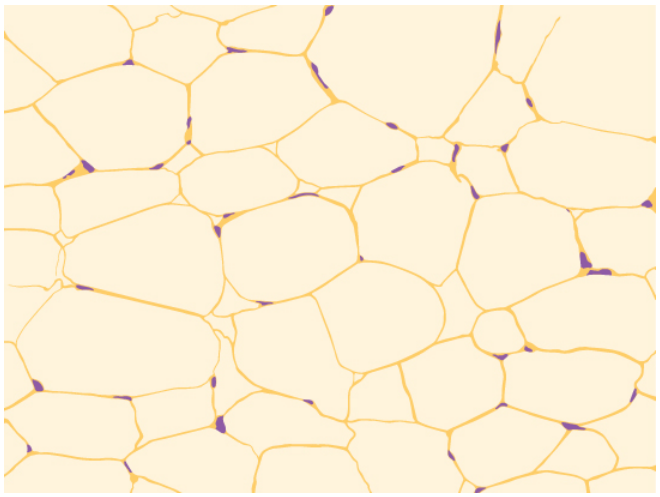


Figure 1.4.10: Adipose is a connective tissue is made up of cells called adipocytes. Adipocytes have small nuclei localized at the cell edge.

Blood

Blood is considered a connective tissue because it has a matrix, as shown in Figure 1.4.11. The living cell types are red blood cells (RBC), also called erythrocytes, and white blood cells (WBC), also called leukocytes. The fluid portion of whole blood, its matrix, is commonly called plasma.

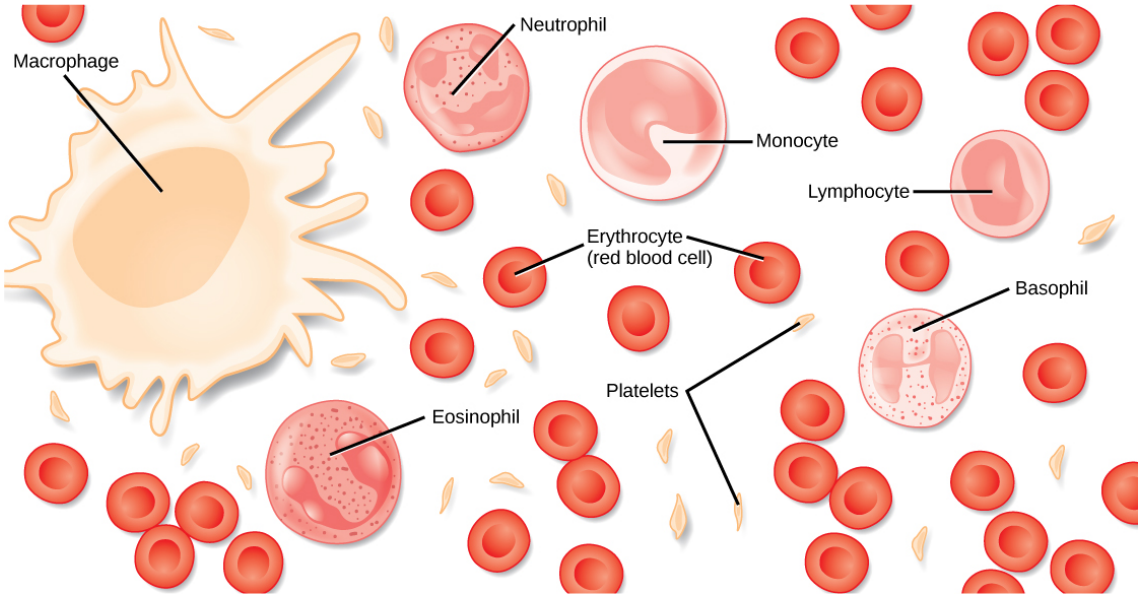


Figure 1.4.11: Blood is a connective tissue that has a fluid matrix, called plasma, and no fibers. Erythrocytes (red blood cells), the predominant cell type, are involved in the transport of oxygen and carbon dioxide. Also present are various leukocytes (white blood cells) involved in immune response.

The cell found in greatest abundance in blood is the erythrocyte. Erythrocytes are counted in millions in a blood sample: the average number of red blood cells in primates is 4.7 to 5.5 million cells per microliter. Erythrocytes are consistently the same size in a species, but vary in size between species. For example, the average diameter of a primate red blood cell is 7.5 µl, a dog is close at 7.0 µl, but a cat's RBC diameter is 5.9 µl. Sheep erythrocytes are even smaller at 4.6 µl. Mammalian erythrocytes lose their nuclei and mitochondria when they are released from the bone marrow where they are made. Fish, amphibian, and avian red blood cells maintain their nuclei and mitochondria throughout the cell's life. The principal job of an erythrocyte is to carry and deliver oxygen to the tissues.

Leukocytes are the predominant white blood cells found in the peripheral blood. Leukocytes are counted in the thousands in the blood with measurements expressed as ranges: primate counts range from 4,800 to 10,800 cells per µl, dogs from 5,600 to 19,200 cells per µl, cats from 8,000 to 25,000 cells per µl, cattle from 4,000 to 12,000 cells per µl, and pigs from 11,000 to 22,000 cells per µl.

Lymphocytes function primarily in the immune response to foreign antigens or material. Different types of lymphocytes make antibodies tailored to the foreign antigens and control the production of those antibodies. Neutrophils are phagocytic cells and they participate in one of the early lines of defense against microbial invaders, aiding in the removal of bacteria that has entered the body. Another leukocyte that is found in the peripheral blood is the monocyte. Monocytes give rise to phagocytic macrophages that clean up dead and damaged cells in the body, whether they are foreign or from the host animal. Two additional leukocytes in the blood are eosinophils and basophils—both help to facilitate the inflammatory response.

The slightly granular material among the cells is a cytoplasmic fragment of a cell in the bone marrow. This is called a platelet or thrombocyte. Platelets participate in the stages leading up to coagulation of the blood to stop bleeding through damaged blood vessels. Blood has a number of functions, but primarily it transports material through the body to bring nutrients to cells and remove waste material from them.

Muscle Tissues

There are three types of muscle in animal bodies: smooth, skeletal, and cardiac. They differ by the presence or absence of striations or bands, the number and location of nuclei, whether they are voluntarily or involuntarily controlled, and their location within the body. The table summarizes these differences.

Table 1.4.3**:** Types of Muscles

Type of Muscle	Striations	Nuclei	Control	Location
smooth	no	single, in center	involuntary	visceral organs
skeletal	yes	many, at periphery	voluntary	skeletal muscles
cardiac	yes	single, in center	involuntary	heart

Smooth Muscle

Smooth muscle does not have striations in its cells. It has a single, centrally located nucleus, as shown in Figure 1.4.12. Constriction of smooth muscle occurs under involuntary, autonomic nervous control and in response to local conditions in the tissues. Smooth muscle tissue is also called non-striated as it lacks the banded appearance of skeletal and cardiac muscle. The walls of blood vessels, the tubes of the digestive system, and the tubes of the reproductive systems are composed of mostly smooth muscle.



Figure 1.4.12: Smooth muscle cells do not have striations, while skeletal muscle cells do. Cardiac muscle cells have striations, but, unlike the multinucleate skeletal cells, they have only one nucleus. Cardiac muscle tissue also has intercalated discs, specialized regions running along the plasma membrane that join adjacent cardiac muscle cells and assist in passing an electrical impulse from cell to cell.

Skeletal Muscle

Skeletal muscle has striations across its cells caused by the arrangement of the contractile proteins actin and myosin. These muscle cells are relatively long and have multiple nuclei along the edge of the cell. Skeletal muscle is under voluntary, somatic nervous system control and is found in the muscles that move bones. Figure 1.4.12illustrates the histology of skeletal muscle.

Cardiac Muscle

Cardiac muscle, shown in Figure 1.4.12, is found only in the heart. Like skeletal muscle, it has cross striations in its cells, but cardiac muscle has a single, centrally located nucleus. Cardiac muscle is not under voluntary control but can be influenced by the autonomic nervous system to speed up or slow down. An added feature to cardiac muscle cells is a line than extends along the end of the cell as it abuts the next cardiac cell in the row. This line is called an intercalated disc: it assists in passing electrical impulse efficiently from one cell to the next and maintains the strong connection between neighboring cardiac cells.

Nervous Tissues

Nervous tissues are made of cells specialized to receive and transmit electrical impulses from specific areas of the body and to send them to specific locations in the body. The main cell of the nervous system is the neuron, illustrated in Figure 1.4.13. The large structure with a central nucleus is the cell body of the neuron. Projections from the cell body are either dendrites specialized in receiving input or a single axon specialized in transmitting impulses. Some glial cells are also shown. Astrocytes regulate the chemical environment of the nerve cell, and oligodendrocytes insulate the axon so the electrical nerve impulse is transferred more efficiently. Other glial cells that are not shown support the nutritional and waste requirements of the neuron. Some of the glial cells are phagocytic and remove debris or damaged cells from the tissue. A nerve consists of neurons and glial cells.

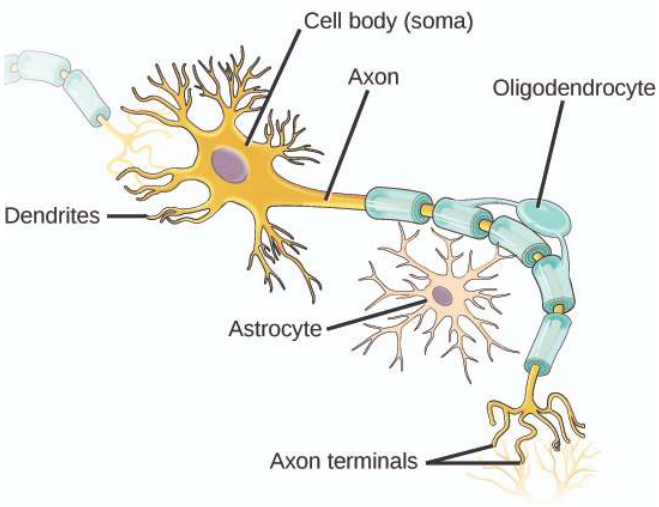


Figure 1.4.13: The neuron has projections called dendrites that receive signals and projections called axons that send signals. Also shown are two types of glial cells: astrocytes regulate the chemical environment of the nerve cell, and oligodendrocytes insulate the axon so the electrical nerve impulse is transferred more efficiently.

Link to Learning

Click through the interactive review to learn more about epithelial tissues.

Career Connections: Pathologist

A pathologist is a medical doctor or veterinarian who has specialized in the laboratory detection of disease in animals, including humans. These professionals complete medical school education and follow it with an extensive post-graduate residency at a medical center. A pathologist may oversee clinical laboratories for the evaluation of body tissue and blood

samples for the detection of disease or infection. They examine tissue specimens through a microscope to identify cancers and other diseases. Some pathologists perform autopsies to determine the cause of death and the progression of disease.

Summary

The basic building blocks of complex animals are four primary tissues. These are combined to form organs, which have a specific, specialized function within the body, such as the skin or kidney. Organs are organized together to perform common functions in the form of systems. The four primary tissues are epithelia, connective tissues, muscle tissues, and nervous tissues.

Glossary

canaliculus
microchannel that connects the lacunae and aids diffusion between cells

cartilage
type of connective tissue with a large amount of ground substance matrix, cells called chondrocytes, and some amount of fibers

chondrocyte
cell found in cartilage

columnar epithelia
epithelia made of cells taller than they are wide, specialized in absorption

connective tissue
type of tissue made of cells, ground substance matrix, and fibers

cuboidal epithelia
epithelia made of cube-shaped cells, specialized in glandular functions

epithelial tissue
tissue that either lines or covers organs or other tissues

fibrous connective tissue
type of connective tissue with a high concentration of fibers

lacuna
space in cartilage and bone that contains living cells

loose (areolar) connective tissue
type of connective tissue with small amounts of cells, matrix, and fibers; found around blood vessels

matrix
component of connective tissue made of both living and non-living (ground substances) cells

osteon
subunit of compact bone

pseudostratified
layer of epithelia that appears multilayered, but is a simple covering

simple epithelia
single layer of epithelial cells

squamous epithelia

type of epithelia made of flat cells, specialized in aiding diffusion or preventing abrasion

stratified epithelia

multiple layers of epithelial cells

trabecula

tiny plate that makes up spongy bone and gives it strength

transitional epithelia

epithelia that can transition for appearing multilayered to simple; also called uroepithelial

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1.5: Homeostasis

Skills to Develop

- Define homeostasis
- Describe the factors affecting homeostasis
- Discuss positive and negative feedback mechanisms used in homeostasis
- Describe thermoregulation of endothermic and ectothermic animals

Animal organs and organ systems constantly adjust to internal and external changes through a process called homeostasis (“steady state”). These changes might be in the level of glucose or calcium in blood or in external temperatures. Homeostasis means to maintain dynamic equilibrium in the body. It is dynamic because it is constantly adjusting to the changes that the body’s systems encounter. It is equilibrium because body functions are kept within specific ranges. Even an animal that is apparently inactive is maintaining this homeostatic equilibrium.

Homeostatic Process

The goal of homeostasis is the maintenance of equilibrium around a point or value called a set point. While there are normal fluctuations from the set point, the body’s systems will usually attempt to go back to this point. A change in the internal or external environment is called a stimulus and is detected by a receptor; the response of the system is to adjust the deviation parameter toward the set point. For instance, if the body becomes too warm, adjustments are made to cool the animal. If the blood’s glucose rises after a meal, adjustments are made to lower the blood glucose level by getting the nutrient into tissues that need it or to store it for later use.

Control of Homeostasis

When a change occurs in an animal’s environment, an adjustment must be made. The receptor senses the change in the environment, then sends a signal to the control center (in most cases, the brain) which in turn generates a response that is signaled to an effector. The effector is a muscle (that contracts or relaxes) or a gland that secretes. Homeostatsis is maintained by negative feedback loops. Positive feedback loops actually push the organism further out of homeostasis, but may be necessary for life to occur. Homeostasis is controlled by the nervous and endocrine system of mammals.

Negative Feedback Mechanisms

Any homeostatic process that changes the direction of the stimulus is a negative feedback loop. It may either increase or decrease the stimulus, but the stimulus is not allowed to continue as it did before the receptor sensed it. In other words, if a level is too high, the body does something to bring it down, and conversely, if a level is too low, the body does something to make it go up. Hence the term negative feedback. An example is animal maintenance of blood glucose levels. When an animal has eaten, blood glucose levels rise. This is sensed by the nervous system. Specialized cells in the pancreas sense this, and the hormone insulin is released by the endocrine system. Insulin causes blood glucose levels to decrease, as would be expected in a negative feedback system, as illustrated in Figure 1.5.1. However, if an animal has not eaten and blood glucose levels decrease, this is sensed in another group of cells in the pancreas, and the hormone glucagon is released causing glucose levels to increase. This is still a negative feedback loop, but not in the direction expected by the use of the term “negative.” Another example of an increase as a result of the feedback loop is the control of blood calcium. If calcium levels decrease, specialized cells in the parathyroid gland sense this and release parathyroid hormone (PTH), causing an increased absorption of calcium through the intestines and kidneys and, possibly, the breakdown of bone in order to liberate calcium. The effects of PTH are to raise blood levels of the element. Negative feedback loops are the predominant mechanism used in homeostasis.

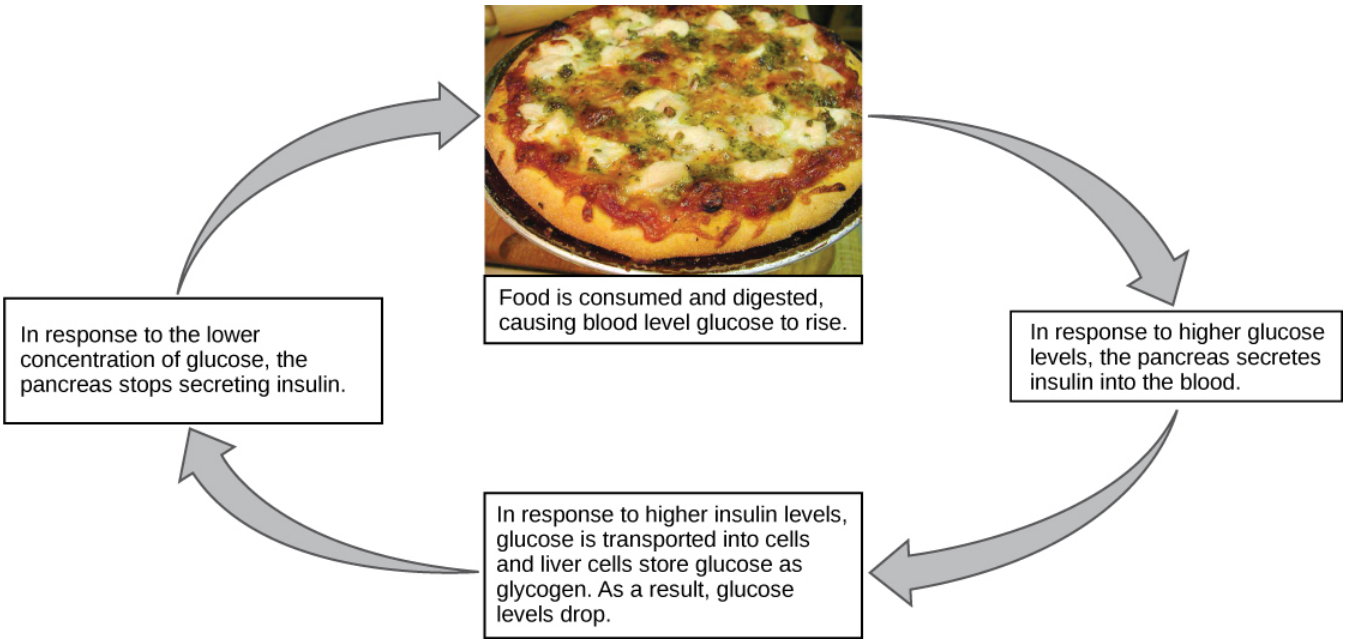


Figure 1.5.1: Blood sugar levels are controlled by a negative feedback loop. (credit: modification of work by Jon Sullivan)

Positive Feedback Loop

A positive feedback loop maintains the direction of the stimulus, possibly accelerating it. Few examples of positive feedback loops exist in animal bodies, but one is found in the cascade of chemical reactions that result in blood clotting, or coagulation. As one clotting factor is activated, it activates the next factor in sequence until a fibrin clot is achieved. The direction is maintained, not changed, so this is positive feedback. Another example of positive feedback is uterine contractions during childbirth, as illustrated in Figure 1.5.2. The hormone oxytocin, made by the endocrine system, stimulates the contraction of the uterus. This produces pain sensed by the nervous system. Instead of lowering the oxytocin and causing the pain to subside, more oxytocin is produced until the contractions are powerful enough to produce childbirth.

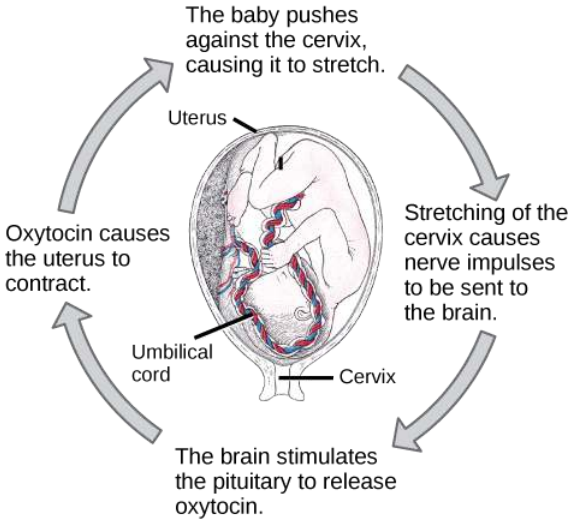


Figure 1.5.2: The birth of a human infant is the result of positive feedback.

Exercise

State whether each of the following processes is regulated by a positive feedback loop or a negative feedback loop.

A. A person feels satiated after eating a large meal.
B. The blood has plenty of red blood cells. As a result, erythropoietin, a hormone that stimulates the production of new red blood cells, is no longer released from the kidney.

Answer

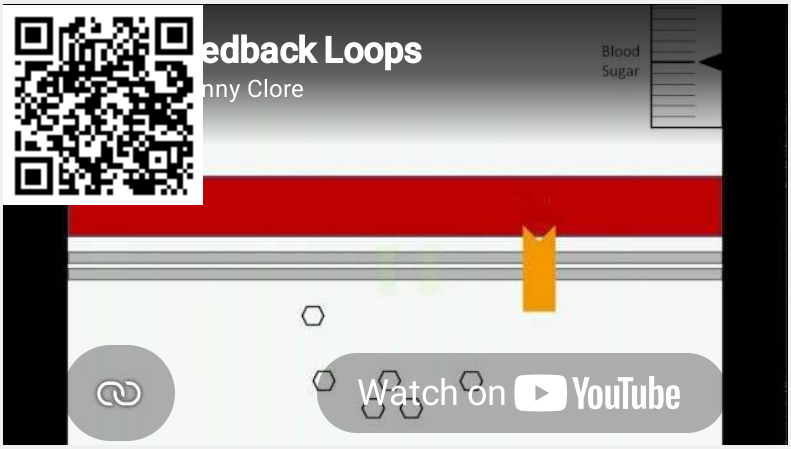
Both processes are the result of negative feedback loops. Negative feedback loops, which tend to keep a system at equilibrium, are more common than positive feedback loops.

Set Point

It is possible to adjust a system's set point. When this happens, the feedback loop works to maintain the new setting. An example of this is blood pressure: over time, the normal or set point for blood pressure can increase as a result of continued increases in blood pressure. The body no longer recognizes the elevation as abnormal and no attempt is made to return to the lower set point. The result is the maintenance of an elevated blood pressure that can have harmful effects on the body. Medication can lower blood pressure and lower the set point in the system to a more healthy level. This is called a process of alteration of the set point in a feedback loop.

Changes can be made in a group of body organ systems in order to maintain a set point in another system. This is called acclimatization. This occurs, for instance, when an animal migrates to a higher altitude than it is accustomed to. In order to adjust to the lower oxygen levels at the new altitude, the body increases the number of red blood cells circulating in the blood to ensure adequate oxygen delivery to the tissues. Another example of acclimatization is animals that have seasonal changes in their coats: a heavier coat in the winter ensures adequate heat retention, and a light coat in summer assists in keeping body temperature from rising to harmful levels.

Link to Learning



Feedback mechanisms can be understood in terms of driving a race car along a track: watch a short video lesson on positive and negative feedback loops.

Homeostasis: Thermoregulation

Body temperature affects body activities. Generally, as body temperature rises, enzyme activity rises as well. For every ten degree centigrade rise in temperature, enzyme activity doubles, up to a point. Body proteins, including enzymes, begin to denature and lose their function with high heat (around 50°C for mammals). Enzyme activity will decrease by half for every ten degree centigrade drop in temperature, to the point of freezing, with a few exceptions. Some fish can withstand freezing solid and return to normal with thawing.

Link to Learning



Watch this Discovery Channel video on thermoregulation to see illustrations of this process in a variety of animals.

Endotherms and Ectotherms

Animals can be divided into two groups: some maintain a constant body temperature in the face of differing environmental temperatures, while others have a body temperature that is the same as their environment and thus varies with the environment. Animals that do not control their body temperature are ectotherms. This group has been called cold-blooded, but the term may not apply to an animal in the desert with a very warm body temperature. In contrast to ectotherms, which rely on external temperatures to set their body temperatures, poikilotherms are animals with constantly varying internal temperatures. An animal that maintains a constant body temperature in the face of environmental changes is called a homeotherm. Endotherms are animals that rely on internal sources for body temperature but which can exhibit extremes in temperature. These animals are able to maintain a level of activity at cooler temperature, which an ectotherm cannot due to differing enzyme levels of activity.

Heat can be exchanged between an animal and its environment through four mechanisms: radiation, evaporation, convection, and conduction (Figure 1.5.3). Radiation is the emission of electromagnetic “heat” waves. Heat comes from the sun in this manner and radiates from dry skin the same way. Heat can be removed with liquid from a surface during evaporation. This occurs when a mammal sweats. Convection currents of air remove heat from the surface of dry skin as the air passes over it. Heat will be conducted from one surface to another during direct contact with the surfaces, such as an animal resting on a warm rock.



(a) Radiation (b) Evaporation



(c) Convection (d) Conduction

Figure 1.5.3: Heat can be exchanged by four mechanisms: (a) radiation, (b) evaporation, (c) convection, or (d) conduction. (credit b: modification of work by “Kullez”/Flickr; credit c: modification of work by Chad Rosenthal; credit d: modification of work by “stacey.d”/Flickr)

Heat Conservation and Dissipation

Animals conserve or dissipate heat in a variety of ways. In certain climates, endothermic animals have some form of insulation, such as fur, fat, feathers, or some combination thereof. Animals with thick fur or feathers create an insulating layer of air between their skin and internal organs. Polar bears and seals live and swim in a subfreezing environment and yet maintain a constant, warm, body temperature. The arctic fox, for example, uses its fluffy tail as extra insulation when it curls up to sleep in cold weather. Mammals have a residual effect from shivering and increased muscle activity: arrector pili muscles cause “goose bumps,” causing small hairs to stand up when the individual is cold; this has the intended effect of increasing body temperature. Mammals use layers of fat to achieve the same end. Loss of significant amounts of body fat will compromise an individual’s ability to conserve heat.

Endotherms use their circulatory systems to help maintain body temperature. Vasodilation brings more blood and heat to the body surface, facilitating radiation and evaporative heat loss, which helps to cool the body. Vasoconstriction reduces blood flow in peripheral blood vessels, forcing blood toward the core and the vital organs found there, and conserving heat. Some animals have adaptions to their circulatory system that enable them to transfer heat from arteries to veins, warming blood returning to the heart. This is called a countercurrent heat exchange; it prevents the cold venous blood from cooling the heart and other internal organs. This adaption can be shut down in some animals to prevent overheating the internal organs. The countercurrent adaption is found in many animals, including dolphins, sharks, bony fish, bees, and hummingbirds. In contrast, similar adaptations can help cool endotherms when needed, such as dolphin flukes and elephant ears.

Some ectothermic animals use changes in their behavior to help regulate body temperature. For example, a desert ectothermic animal may simply seek cooler areas during the hottest part of the day in the desert to keep from getting too warm. The same animals may climb onto rocks to capture heat during a cold desert night. Some animals seek water to aid evaporation in cooling them, as seen with reptiles. Other ectotherms use group activity such as the activity of bees to warm a hive to survive winter.

Many animals, especially mammals, use metabolic waste heat as a heat source. When muscles are contracted, most of the energy from the ATP used in muscle actions is wasted energy that translates into heat. Severe cold elicits a shivering reflex that generates heat for the body. Many species also have a type of adipose tissue called brown fat that specializes in generating heat.

Neural Control of Thermoregulation

The nervous system is important to thermoregulation, as illustrated in Figure 1.5.4. The processes of homeostasis and temperature control are centered in the hypothalamus of the advanced animal brain.

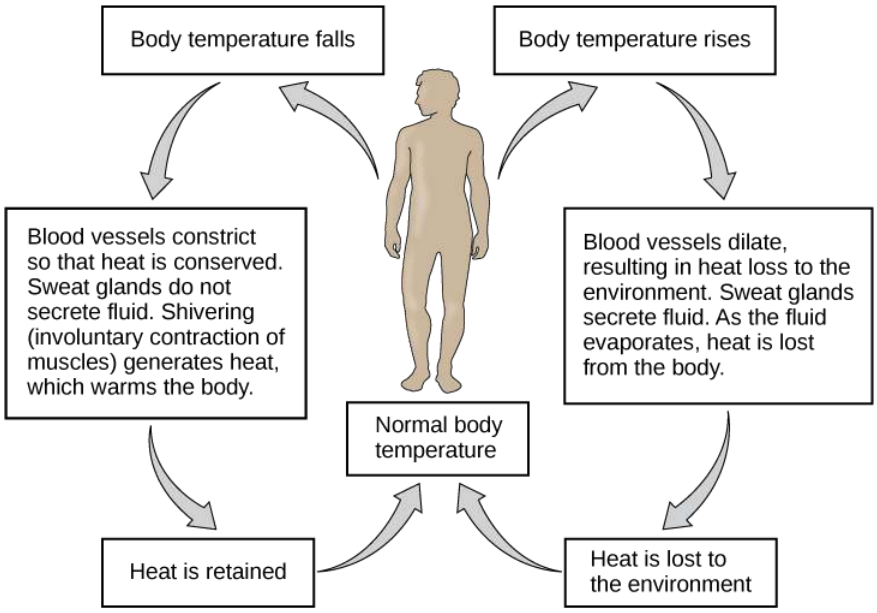


Figure 1.5.4: The body is able to regulate temperature in response to signals from the nervous system.

Exercise

When bacteria are destroyed by leuckocytes, pyrogens are released into the blood. Pyrogens reset the body's thermostat to a higher temperature, resulting in fever. How might pyrogens cause the body temperature to rise?

Answer

Pyrogens increase body temperature by causing the blood vessels to constrict, inducing shivering, and stopping sweat glands from secreting fluid.

The hypothalamus maintains the set point for body temperature through reflexes that cause vasodilation and sweating when the body is too warm, or vasoconstriction and shivering when the body is too cold. It responds to chemicals from the body. When a bacterium is destroyed by phagocytic leukocytes, chemicals called endogenous pyrogens are released into the blood. These pyrogens circulate to the hypothalamus and reset the thermostat. This allows the body's temperature to increase in what is commonly called a fever. An increase in body temperature causes iron to be conserved, which reduces a nutrient needed by bacteria. An increase in body heat also increases the activity of the animal's enzymes and protective cells while inhibiting the enzymes and activity of the invading microorganisms. Finally, heat itself may also kill the pathogen. A fever that was once thought to be a complication of an infection is now understood to be a normal defense mechanism.

Summary

Homeostasis is a dynamic equilibrium that is maintained in body tissues and organs. It is dynamic because it is constantly adjusting to the changes that the systems encounter. It is in equilibrium because body functions are kept within a normal range, with some fluctuations around a set point for the processes.

Glossary

acclimatization
alteration in a body system in response to environmental change

alteration
change of the set point in a homeostatic system

homeostasis
dynamic equilibrium maintaining appropriate body functions

negative feedback loop
feedback to a control mechanism that increases or decreases a stimulus instead of maintaining it

positive feedback loop
feedback to a control mechanism that continues the direction of a stimulus

set point
midpoint or target point in homeostasis

thermoregulation
regulation of body temperature

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1.E: The Animal Body - Basic Form and Function (Exercises)

33.1: Animal Form and Function

Animals vary in form and function. From a sponge to a worm to a goat, an organism has a distinct body plan that limits its size and shape. Animals' bodies are also designed to interact with their environments, whether in the deep sea, a rainforest canopy, or the desert. Therefore, a large amount of information about the structure of an organism's body (anatomy) and the function of its cells, tissues and organs (physiology) can be learned by studying that organism's environment.

Review Questions

Which type of animal maintains a constant internal body temperature?

A. endotherm
B. ectotherm
C. coelomate
D. mesoderm

Answer

A

The symmetry found in animals that move swiftly is _____.

A. radial
B. bilateral
C. sequential
D. interrupted

Answer

B

What term describes the condition of a desert mouse that lowers its metabolic rate and "sleeps" during the hot day?

A. turgid
B. hibernation
C. estivation
D. normal sleep pattern

Answer

C

A plane that divides an animal into equal right and left portions is _____.

A. diagonal
B. midsagittal
C. coronal
D. transverse

Answer

B

A plane that divides an animal into dorsal and ventral portions is _____.

A. sagittal

A. sagittal
B. midsagittal
C. coronal
D. transverse

Answer

D

The pleural cavity is a part of which cavity?

A. dorsal cavity
B. thoracic cavity
C. abdominal cavity
D. pericardial cavity

Answer

B

Free Response

How does diffusion limit the size of an organism? How is this counteracted?

Answer

Diffusion is effective over a very short distance. If a cell exceeds this distance in its size, the center of the cell cannot get adequate nutrients nor can it expel enough waste to survive. To compensate for this, cells can loosely adhere to each other in a liquid medium, or develop into multi-celled organisms that use circulatory and respiratory systems to deliver nutrients and remove wastes.

What is the relationship between BMR and body size? Why?

Answer

Basal Metabolic Rate is an expression of the metabolic processes that occur to maintain an individual's functioning and body temperature. Smaller bodied animals have a relatively large surface area compared to a much larger animal. The large animal's large surface area leads to increased heat loss that the animal must compensate for, resulting in a higher BMR. A small animal, having less relative surface area, does not lose as much heat and has a correspondingly lower BMR.

33.2: Animal Primary Tissues

The tissues of multicellular, complex animals are four primary types: epithelial, connective, muscle, and nervous. Recall that tissues are groups of similar cells group of similar cells carrying out related functions. These tissues combine to form organs—like the skin or kidney—that have specific, specialized functions within the body. Organs are organized into organ systems to perform functions.

Review Questions

Which type of epithelial cell is best adapted to aid diffusion?

A. squamous
B. cuboidal
C. columnar
D. transitional

Answer

C

Which type of epithelial cell is found in glands?

A. squamous
B. cuboidal
C. columnar
D. transitional

Answer

B

Which type of epithelial cell is found in the urinary bladder?

A. squamous
B. cuboidal
C. columnar
D. transitional

Answer

D

Which type of connective tissue has the most fibers?

A. loose connective tissue
B. fibrous connective tissue
C. cartilage
D. bone

Answer

B

Which type of connective tissue has a mineralized different matrix?

A. loose connective tissue
B. fibrous connective tissue
C. cartilage
D. bone

Answer

D

The cell found in bone that breaks it down is called an _____.

A. osteoblast
B. osteocyte
C. osteoclast
D. osteon

Answer

C

The cell found in bone that makes the bone is called an _____.

A. osteoblast
B. osteocyte
C. osteoclast
D. osteon

Answer

A

Plasma is the _____.

A. fibers in blood
B. matrix of blood
C. cell that phagocytizes bacteria
D. cell fragment found in the tissue

Answer

B

The type of muscle cell under voluntary control is the _____.

A. smooth muscle
B. skeletal muscle
C. cardiac muscle
D. visceral muscle

Answer

B

The part of a neuron that contains the nucleus is the

A. cell body
B. dendrite
C. axon
D. glial

Answer

B

Free Response

How can squamous epithelia both facilitate diffusion and prevent damage from abrasion?

Answer

Squamous epithelia can be either simple or stratified. As a single layer of cells, it presents a very thin epithelia that minimally inhibits diffusion. As a stratified epithelia, the surface cells can be sloughed off and the cells in deeper layers protect the underlying tissues from damage.

What are the similarities between cartilage and bone?

Answer

Both contain cells other than the traditional fibroblast. Both have cells that lodge in spaces within the tissue called lacunae. Both collagen and elastic fibers are found in bone and cartilage. Both tissues participate in vertebrate skeletal development and formation.

33.3: Homeostasis

Animal organs and organ systems constantly adjust to internal and external changes through a process called homeostasis (“steady state”). These changes might be in the level of glucose or calcium in blood or in external temperatures. Homeostasis means to maintain dynamic equilibrium in the body. It is dynamic because it is constantly adjusting to the changes that the body’s systems encounter. It is equilibrium because body functions are kept within specific ranges.

Review Questions

When faced with a sudden drop in environmental temperature, an endothermic animal will:

A. experience a drop in its body temperature
B. wait to see if it goes lower
C. increase muscle activity to generate heat
D. add fur or fat to increase insulation

Answer

C

Which is an example of negative feedback?

A. lowering of blood glucose after a meal
B. blood clotting after an injury
C. lactation during nursing
D. uterine contractions during labor

Answer

A

Which method of heat exchange occurs during direct contact between the source and animal?

A. radiation
B. evaporation
C. convection
D. conduction

Answer

D

The body’s thermostat is located in the _____.

A. homeostatic receptor
B. hypothalamus
C. medulla
D. vasodilation center

Answer

B

Free Response

Why are negative feedback loops used to control body homeostasis?

Answer

An adjustment to a change in the internal or external environment requires a change in the direction of the stimulus. A negative feedback loop accomplishes this, while a positive feedback loop would continue the stimulus and result in harm to the animal.

Why is a fever a “good thing” during a bacterial infection?

Answer

Mammalian enzymes increase activity to the point of denaturation, increasing the chemical activity of the cells involved. Bacterial enzymes have a specific temperature for their most efficient activity and are inhibited at either higher or lower temperatures. Fever results in an increase in the destruction of the invading bacteria by increasing the effectiveness of body defenses and an inhibiting bacterial metabolism.

How is a condition such as diabetes a good example of the failure of a set point in humans?

Answer

Diabetes is often associated with a lack in production of insulin. Without insulin, blood glucose levels go up after a meal, but never go back down to normal levels.

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CHAPTER OVERVIEW

2: The Digestive System

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2.E: Animal Nutrition and the Digestive System (Exercises)

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2.1: Prelude to Animal Nutrition and the Digestive System

All living organisms need nutrients to survive. While plants can obtain the molecules required for cellular function through the process of photosynthesis, most animals obtain their nutrients by the consumption of other organisms. At the cellular level, the biological molecules necessary for animal function are amino acids, lipid molecules, nucleotides, and simple sugars. However, the food consumed consists of protein, fat, and complex carbohydrates. Animals must convert these macromolecules into the simple molecules required for maintaining cellular functions, such as assembling new molecules, cells, and tissues. The conversion of the food consumed to the nutrients required is a multi-step process involving digestion and absorption. During digestion, food particles are broken down to smaller components, and later, they are absorbed by the body.



Figure 2.1.1: For humans, fruits and vegetables are important in maintaining a balanced diet. (credit: modification of work by Julie Rybarczyk)

One of the challenges in human nutrition is maintaining a balance between food intake, storage, and energy expenditure. Imbalances can have serious health consequences. For example, eating too much food while not expending much energy leads to obesity, which in turn will increase the risk of developing illnesses such as type-2 diabetes and cardiovascular disease. The recent rise in obesity and related diseases makes understanding the role of diet and nutrition in maintaining good health all the more important.

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2.2: Digestive Systems

Skills to Develop

- Explain the processes of digestion and absorption
- Compare and contrast different types of digestive systems
- Explain the specialized functions of the organs involved in processing food in the body
- Describe the ways in which organs work together to digest food and absorb nutrients

Animals obtain their nutrition from the consumption of other organisms. Depending on their diet, animals can be classified into the following categories: plant eaters (herbivores), meat eaters (carnivores), and those that eat both plants and animals (omnivores). The nutrients and macromolecules present in food are not immediately accessible to the cells. There are a number of processes that modify food within the animal body in order to make the nutrients and organic molecules accessible for cellular function. As animals evolved in complexity of form and function, their digestive systems have also evolved to accommodate their various dietary needs.

Herbivores, Omnivores, and Carnivores

Herbivores are animals whose primary food source is plant-based. Examples of herbivores, as shown in Figure 2.2.1 include vertebrates like deer, koalas, and some bird species, as well as invertebrates such as crickets and caterpillars. These animals have evolved digestive systems capable of handling large amounts of plant material. Herbivores can be further classified into frugivores (fruit-eaters), granivores (seed eaters), nectivores (nectar feeders), and folivores (leaf eaters).



(a) (b)

Figure 2.2.1: Herbivores, like this (a) mule deer and (b) monarch caterpillar, eat primarily plant material. (credit a: modification of work by Bill Ebbesen; credit b: modification of work by Doug Bowman)

Carnivores are animals that eat other animals. The word carnivore is derived from Latin and literally means “meat eater.” Wild cats such as lions, shown in Figure 2.2.2a and tigers are examples of vertebrate carnivores, as are snakes and sharks, while invertebrate carnivores include sea stars, spiders, and ladybugs, shown in Figure 2.2.2b. Obligate carnivores are those that rely entirely on animal flesh to obtain their nutrients; examples of obligate carnivores are members of the cat family, such as lions and cheetahs. Facultative carnivores are those that also eat non-animal food in addition to animal food. Note that there is no clear line that differentiates facultative carnivores from omnivores; dogs would be considered facultative carnivores.



(a)



(b)

Figure 2.2.2: Carnivores like the (a) lion eat primarily meat. The (b) ladybug is also a carnivore that consumes small insects called aphids. (credit a: modification of work by Kevin Pluck; credit b: modification of work by Jon Sullivan)

Omnivores are animals that eat both plant- and animal-derived food. In Latin, omnivore means to eat everything. Humans, bears (shown in Figure 2.2.3a), and chickens are example of vertebrate omnivores; invertebrate omnivores include cockroaches and crayfish (shown in Figure 2.2.3b).



(a)



(b)

Figure 2.2.3: Omnivores like the (a) bear and (b) crayfish eat both plant and animal based food. (credit a: modification of work by Dave Menke; credit b: modification of work by Jon Sullivan)

Invertebrate Digestive Systems

Animals have evolved different types of digestive systems to aid in the digestion of the different foods they consume. The simplest example is that of a gastrovascular cavity and is found in organisms with only one opening for digestion. Platyhelminthes (flatworms), Ctenophora (comb jellies), and Cnidaria (coral, jelly fish, and sea anemones) use this type of digestion. Gastrovascular cavities, as shown in Figure 2.2.4a, are typically a blind tube or cavity with only one opening, the “mouth”, which also serves as an “anus”. Ingested material enters the mouth and passes through a hollow, tubular cavity. Cells within the cavity secrete digestive enzymes that break down the food. The food particles are engulfed by the cells lining the gastrovascular cavity.

The alimentary canal, shown in Figure 2.2.4b, is a more advanced system: it consists of one tube with a mouth at one end and an anus at the other. Earthworms are an example of an animal with an alimentary canal. Once the food is ingested through the mouth, it passes through the esophagus and is stored in an organ called the crop; then it passes into the gizzard where it is churned and

digested. From the gizzard, the food passes through the intestine, the nutrients are absorbed, and the waste is eliminated as feces, called castings, through the anus.

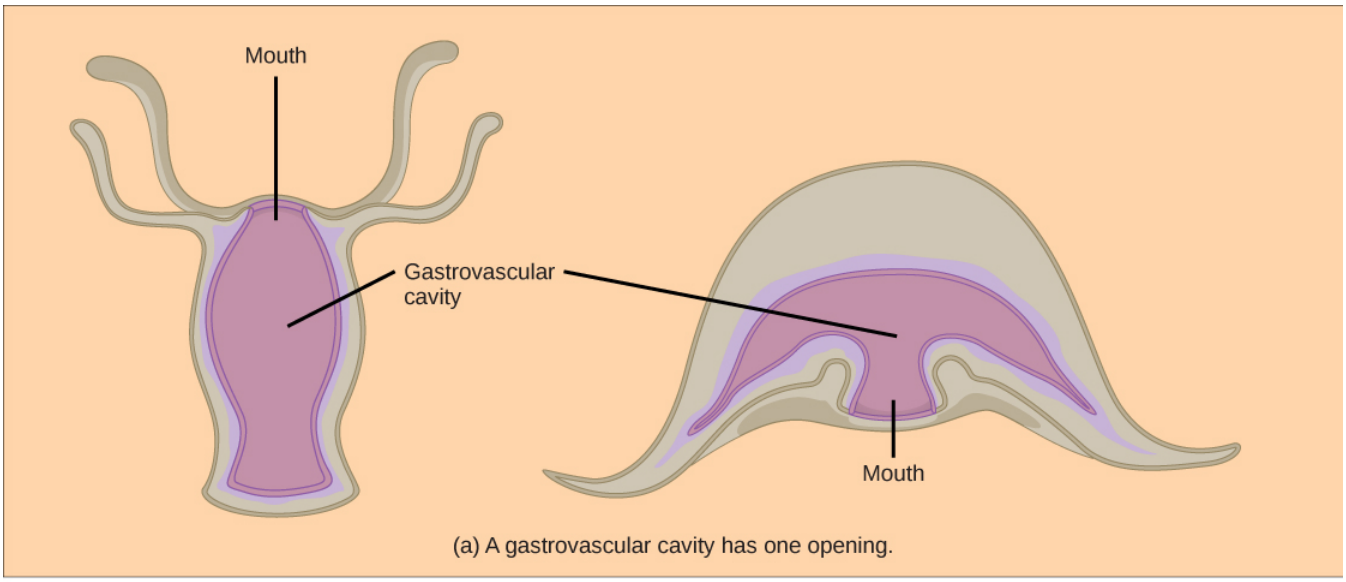


Figure 2.2.4: (a) A gastrovascular cavity has a single opening through which food is ingested and waste is excreted, as shown in this hydra and in this jellyfish medusa. (b) An alimentary canal has two openings: a mouth for ingesting food, and an anus for eliminating waste, as shown in this nematode.

Vertebrate Digestive Systems

Vertebrates have evolved more complex digestive systems to adapt to their dietary needs. Some animals have a single stomach, while others have multi-chambered stomachs. Birds have developed a digestive system adapted to eating unmasticated food.

Monogastric: Single-chambered Stomach

As the word monogastric suggests, this type of digestive system consists of one (“mono”) stomach chamber (“gastric”). Humans and many animals have a monogastric digestive system as illustrated in Figure 2.2.5. The process of digestion begins with the mouth and the intake of food. The teeth play an important role in masticating (chewing) or physically breaking down food into smaller particles. The enzymes present in saliva also begin to chemically break down food. The esophagus is a long tube that connects the mouth to the stomach. Using peristalsis, or wave-like smooth muscle contractions, the muscles of the esophagus push the food towards the stomach. In order to speed up the actions of enzymes in the stomach, the stomach is an extremely acidic environment, with a pH between 1.5 and 2.5. The gastric juices, which include enzymes in the stomach, act on the food particles and continue the process of digestion. Further breakdown of food takes place in the small intestine where enzymes produced by the liver, the small intestine, and the pancreas continue the process of digestion. The nutrients are absorbed into the blood stream across the epithelial cells lining the walls of the small intestines. The waste material travels on to the large intestine where water is absorbed and the drier waste material is compacted into feces; it is stored until it is excreted through the rectum.

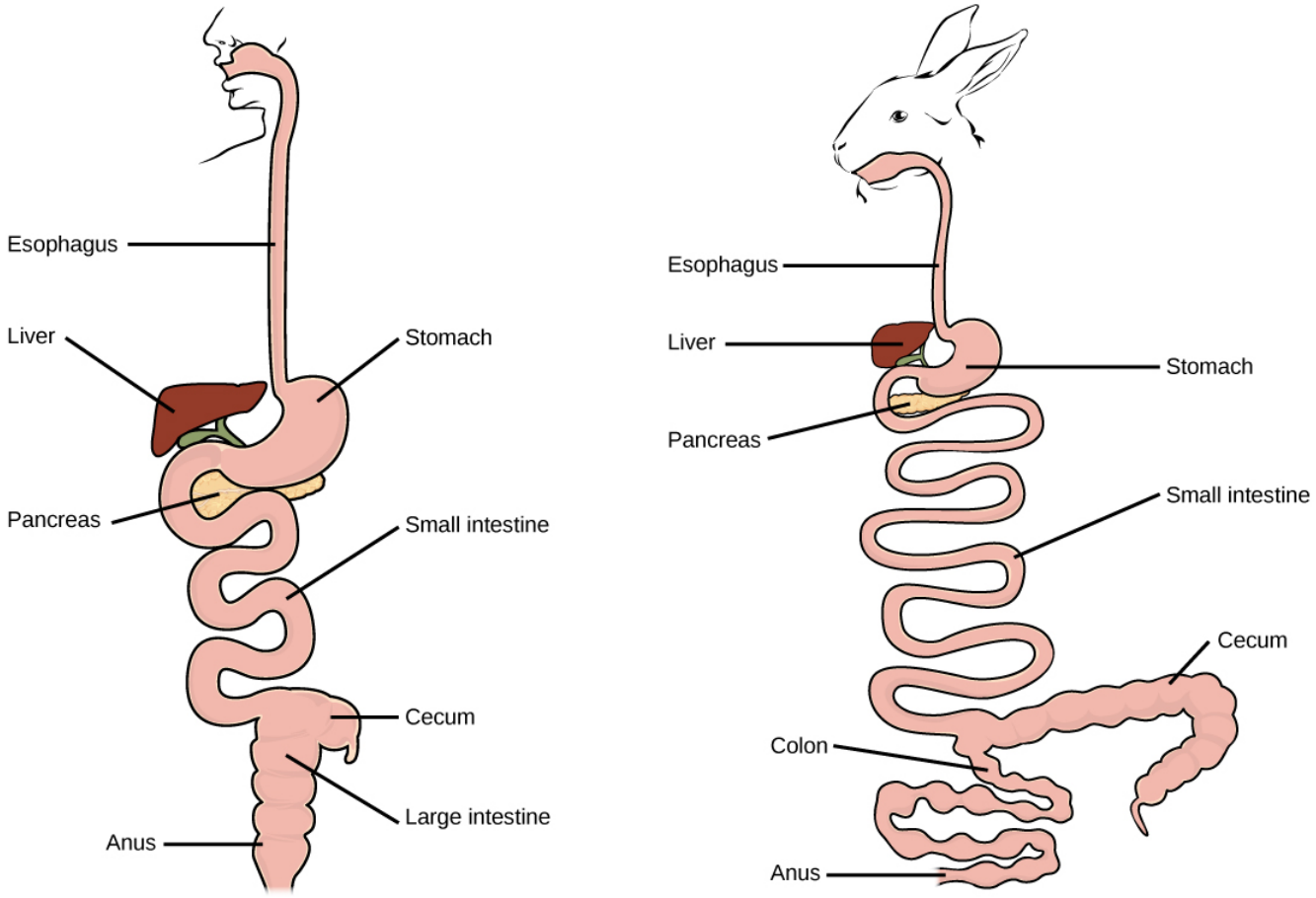


Figure 2.2.5: (a) Humans and herbivores, such as the (b) rabbit, have a monogastric digestive system. However, in the rabbit the small intestine and cecum are enlarged to allow more time to digest plant material. The enlarged organ provides more surface area for absorption of nutrients. Rabbits digest their food twice: the first time food passes through the digestive system, it collects in the cecum, and then it passes as soft feces called cecotrophes. The rabbit re-ingests these cecotrophes to further digest them.

Avian

Birds face special challenges when it comes to obtaining nutrition from food. They do not have teeth and so their digestive system, shown in Figure 2.2.6, must be able to process un-masticated food. Birds have evolved a variety of beak types that reflect the vast variety in their diet, ranging from seeds and insects to fruits and nuts. Because most birds fly, their metabolic rates are high in order to efficiently process food and keep their body weight low. The stomach of birds has two chambers: the proventriculus, where gastric juices are produced to digest the food before it enters the stomach, and the gizzard, where the food is stored, soaked, and mechanically ground. The undigested material forms food pellets that are sometimes regurgitated. Most of the chemical digestion and absorption happens in the intestine and the waste is excreted through the cloaca.

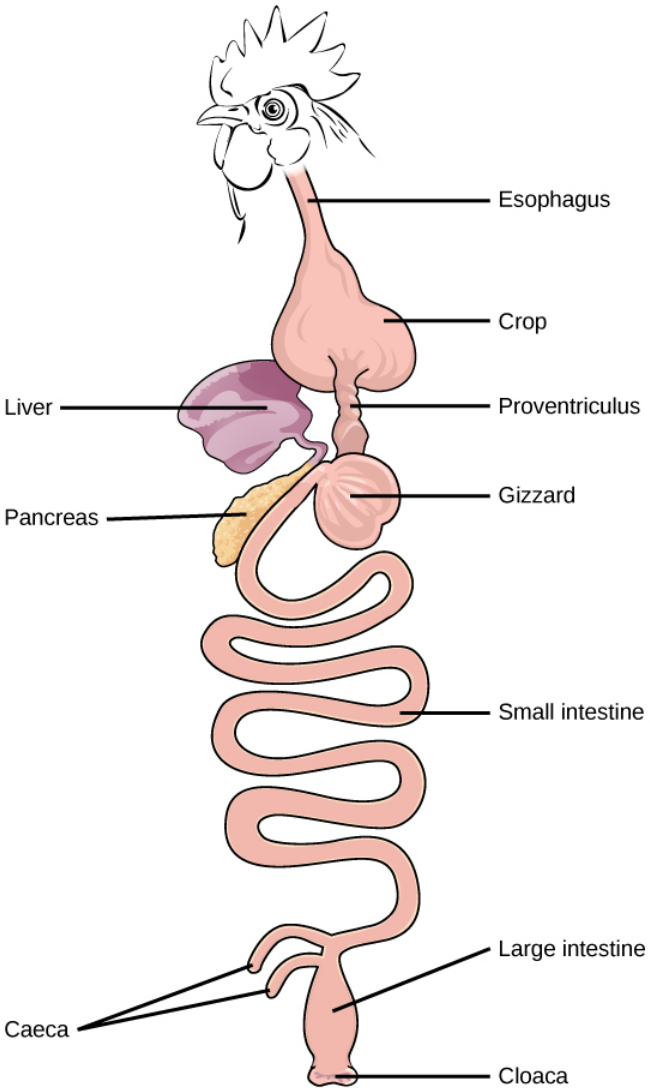


Figure 2.2.6: The avian esophagus has a pouch, called a crop, which stores food. Food passes from the crop to the first of two stomachs, called the proventriculus, which contains digestive juices that break down food. From the proventriculus, the food enters the second stomach, called the gizzard, which grinds food. Some birds swallow stones or grit, which are stored in the gizzard, to aid the grinding process. Birds do not have separate openings to excrete urine and feces. Instead, uric acid from the kidneys is secreted into the large intestine and combined with waste from the digestive process. This waste is excreted through an opening called the cloaca.

Evolution Connection: Avian Adaptations

Birds have a highly efficient, simplified digestive system. Recent fossil evidence has shown that the evolutionary divergence of birds from other land animals was characterized by streamlining and simplifying the digestive system. Unlike many other animals, birds do not have teeth to chew their food. In place of lips, they have sharp pointy beaks. The horny beak, lack of jaws, and the smaller tongue of the birds can be traced back to their dinosaur ancestors. The emergence of these changes seems to coincide with the inclusion of seeds in the bird diet. Seed-eating birds have beaks that are shaped for grabbing seeds and the two-compartment stomach allows for delegation of tasks. Since birds need to remain light in order to fly, their metabolic rates are very high, which means they digest their food very quickly and need to eat often. Contrast this with the ruminants, where the digestion of plant matter takes a very long time.

Ruminants

Ruminants are mainly herbivores like cows, sheep, and goats, whose entire diet consists of eating large amounts of roughage or fiber. They have evolved digestive systems that help them digest vast amounts of cellulose. An interesting feature of the ruminants' mouth is that they do not have upper incisor teeth. They use their lower teeth, tongue and lips to tear and chew their food. From the mouth, the food travels to the esophagus and on to the stomach.

To help digest the large amount of plant material, the stomach of the ruminants is a multi-chambered organ, as illustrated in Figure 2.2.7. The four compartments of the stomach are called the rumen, reticulum, omasum, and abomasum. These chambers contain many microbes that break down cellulose and ferment ingested food. The abomasum is the "true" stomach and is the equivalent of the monogastric stomach chamber where gastric juices are secreted. The four-compartment gastric chamber provides larger space and the microbial support necessary to digest plant material in ruminants. The fermentation process produces large amounts of gas in the stomach chamber, which must be eliminated. As in other animals, the small intestine plays an important role in nutrient absorption, and the large intestine helps in the elimination of waste.

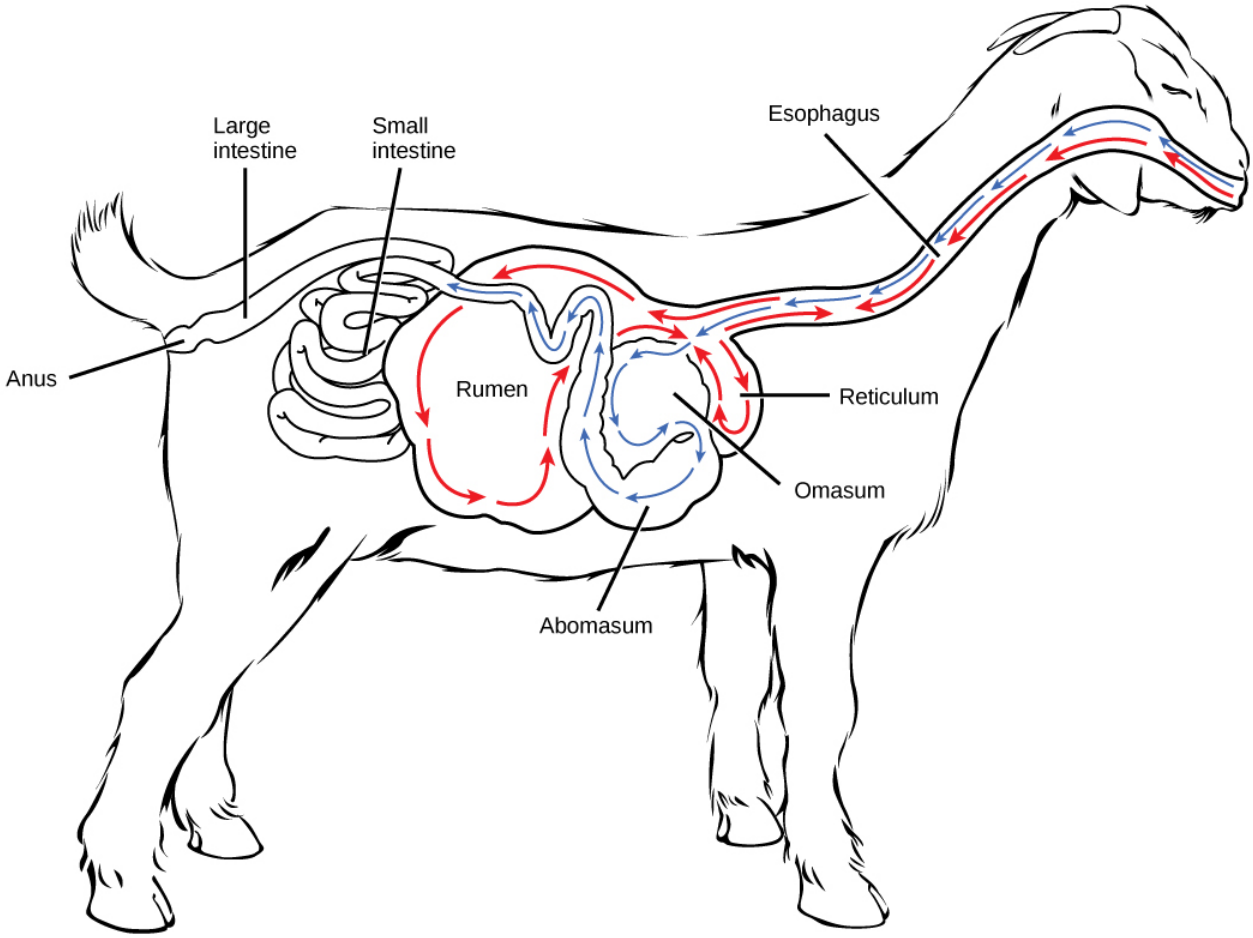


Figure 2.2.7: Ruminant animals, such as goats and cows, have four stomachs. The first two stomachs, the rumen and the reticulum, contain prokaryotes and protists that are able to digest cellulose fiber. The ruminant regurgitates cud from the reticulum, chews it, and swallows it into a third stomach, the omasum, which removes water. The cud then passes onto the fourth stomach, the abomasum, where it is digested by enzymes produced by the ruminant.

Pseudo-ruminants

Some animals, such as camels and alpacas, are pseudo-ruminants. They eat a lot of plant material and roughage. Digesting plant material is not easy because plant cell walls contain the polymeric sugar molecule cellulose. The digestive enzymes of these animals cannot break down cellulose, but microorganisms present in the digestive system can. Therefore, the digestive system must be able to handle large amounts of roughage and break down the cellulose. Pseudo-ruminants have a three-chamber stomach in the digestive system. However, their cecum—a pouched organ at the beginning of the large intestine containing many microorganisms that are necessary for the digestion of plant materials—is large and is the site where the roughage is fermented and digested. These animals do not have a rumen but have an omasum, abomasum, and reticulum.

Parts of the Digestive System

The vertebrate digestive system is designed to facilitate the transformation of food matter into the nutrient components that sustain organisms.

Oral Cavity

The oral cavity, or mouth, is the point of entry of food into the digestive system, illustrated in Figure 2.2.8. The food consumed is broken into smaller particles by mastication, the chewing action of the teeth. All mammals have teeth and can chew their food.

The extensive chemical process of digestion begins in the mouth. As food is being chewed, saliva, produced by the salivary glands, mixes with the food. Saliva is a watery substance produced in the mouths of many animals. There are three major glands that secrete saliva—the parotid, the submandibular, and the sublingual. Saliva contains mucus that moistens food and buffers the pH of the food. Saliva also contains immunoglobulins and lysozymes, which have antibacterial action to reduce tooth decay by inhibiting growth of some bacteria. Saliva also contains an enzyme called salivary amylase that begins the process of converting starches in the food into a disaccharide called maltose. Another enzyme called lipase is produced by the cells in the tongue. Lipases are a class of enzymes that can break down triglycerides. The lingual lipase begins the breakdown of fat components in the food. The chewing and wetting action provided by the teeth and saliva prepare the food into a mass called the bolus for swallowing. The tongue helps in swallowing—moving the bolus from the mouth into the pharynx. The pharynx opens to two passageways: the trachea, which leads to the lungs, and the esophagus, which leads to the stomach. The trachea has an opening called the glottis, which is covered by a cartilaginous flap called the epiglottis. When swallowing, the epiglottis closes the glottis and food passes into the esophagus and not the trachea. This arrangement allows food to be kept out of the trachea.

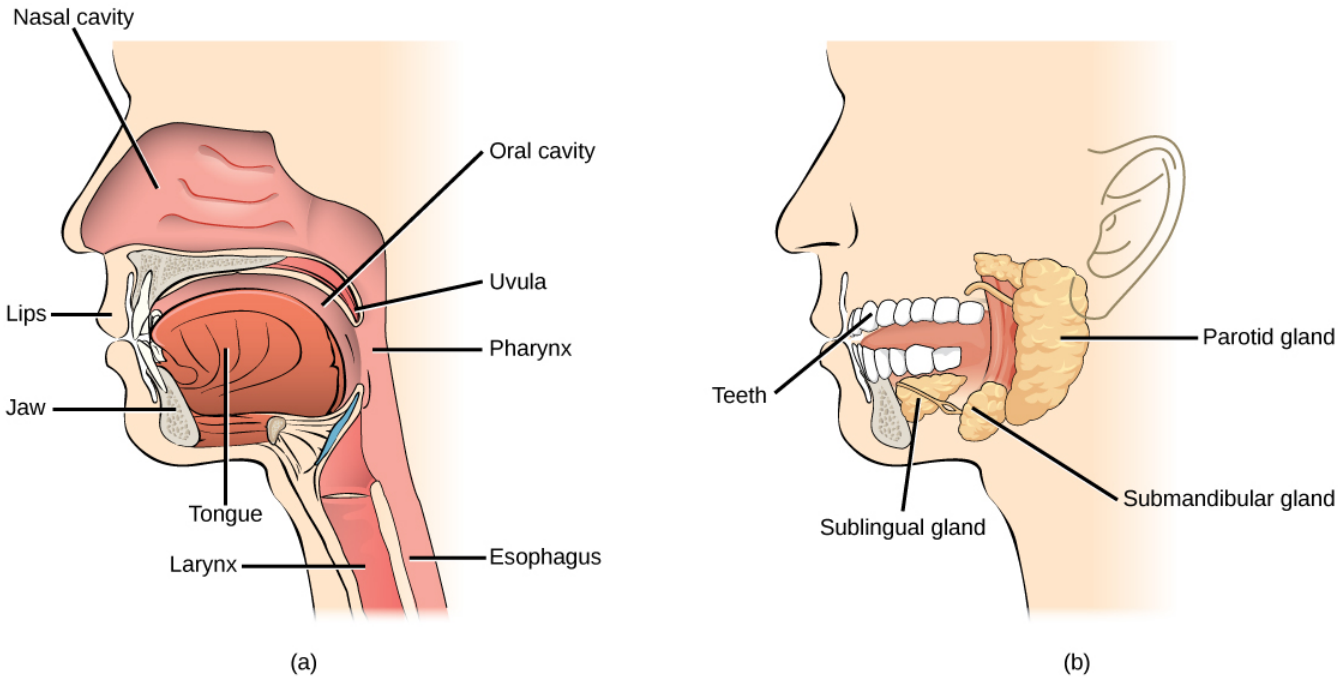


Figure 2.2.8: Digestion of food begins in the (a) oral cavity. Food is masticated by teeth and moistened by saliva secreted from the (b) salivary glands. Enzymes in the saliva begin to digest starches and fats. With the help of the tongue, the resulting bolus is moved into the esophagus by swallowing. (credit: modification of work by the National Cancer Institute)

Esophagus

The esophagus is a tubular organ that connects the mouth to the stomach. The chewed and softened food passes through the esophagus after being swallowed. The smooth muscles of the esophagus undergo a series of wave like movements called peristalsis that push the food toward the stomach, as illustrated in Figure 2.2.9. The peristalsis wave is unidirectional—it moves food from the mouth to the stomach, and reverse movement is not possible. The peristaltic movement of the esophagus is an involuntary reflex; it takes place in response to the act of swallowing.

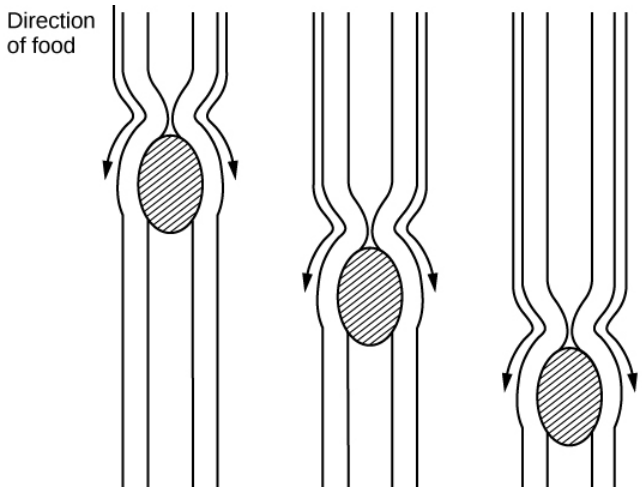


Figure 2.2.9: The esophagus transfers food from the mouth to the stomach through peristaltic movements.

A ring-like muscle called a sphincter forms valves in the digestive system. The gastro-esophageal sphincter is located at the stomach end of the esophagus. In response to swallowing and the pressure exerted by the bolus of food, this sphincter opens, and the bolus enters the stomach. When there is no swallowing action, this sphincter is shut and prevents the contents of the stomach from traveling up the esophagus. Many animals have a true sphincter; however, in humans, there is no true sphincter, but the esophagus remains closed when there is no swallowing action. Acid reflux or "heartburn" occurs when the acidic digestive juices escape into the esophagus.

Stomach

A large part of digestion occurs in the stomach, shown in Figure 2.2.10. The stomach is a saclike organ that secretes gastric digestive juices. The pH in the stomach is between 1.5 and 2.5. This highly acidic environment is required for the chemical breakdown of food and the extraction of nutrients. When empty, the stomach is a rather small organ; however, it can expand to up to 20 times its resting size when filled with food. This characteristic is particularly useful for animals that need to eat when food is available.

Art Connection

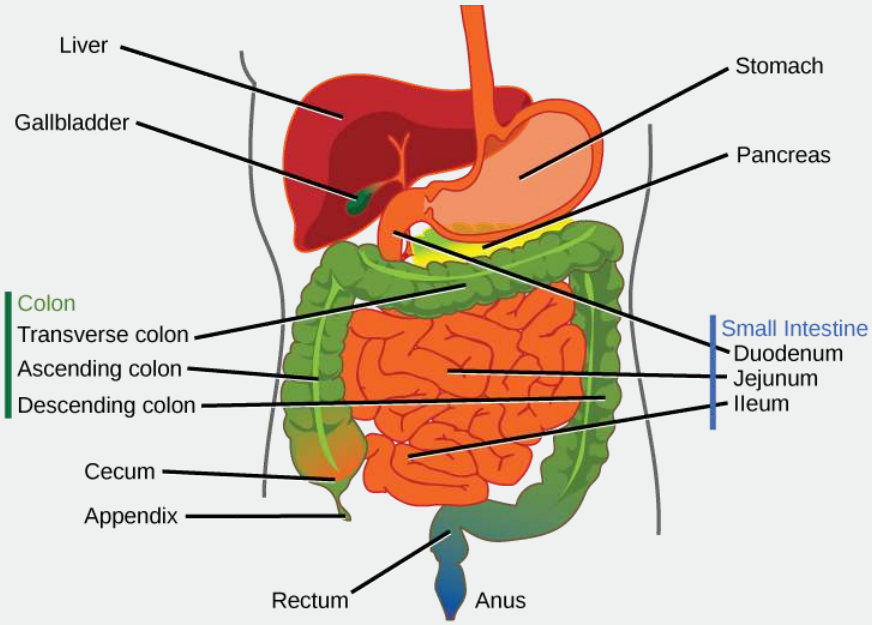


Figure 2.2.10: The human stomach has an extremely acidic environment where most of the protein gets digested. (credit: modification of work by Mariana Ruiz Villareal)

Which of the following statements about the digestive system is false?

A. Chyme is a mixture of food and digestive juices that is produced in the stomach.
B. Food enters the large intestine before the small intestine.
C. In the small intestine, chyme mixes with bile, which emulsifies fats.
D. The stomach is separated from the small intestine by the pyloric sphincter.

The stomach is also the major site for protein digestion in animals other than ruminants. Protein digestion is mediated by an enzyme called pepsin in the stomach chamber. Pepsin is secreted by the chief cells in the stomach in an inactive form called pepsinogen. Pepsin breaks peptide bonds and cleaves proteins into smaller polypeptides; it also helps activate more pepsinogen, starting a positive feedback mechanism that generates more pepsin. Another cell type—parietal cells—secrete hydrogen and chloride ions, which combine in the lumen to form hydrochloric acid, the primary acidic component of the stomach juices. Hydrochloric acid helps to convert the inactive pepsinogen to pepsin. The highly acidic environment also kills many microorganisms in the food and, combined with the action of the enzyme pepsin, results in the hydrolysis of protein in the food. Chemical digestion is facilitated by the churning action of the stomach. Contraction and relaxation of smooth muscles mixes the stomach contents about every 20 minutes. The partially digested food and gastric juice mixture is called chyme. Chyme passes from the stomach to the small intestine. Further protein digestion takes place in the small intestine. Gastric emptying occurs within two to six hours after a meal. Only a small amount of chyme is released into the small intestine at a time. The movement of chyme from the stomach into the small intestine is regulated by the pyloric sphincter.

When digesting protein and some fats, the stomach lining must be protected from getting digested by pepsin. There are two points to consider when describing how the stomach lining is protected. First, as previously mentioned, the enzyme pepsin is synthesized in the inactive form. This protects the chief cells, because pepsinogen does not have the same enzyme functionality of pepsin. Second, the stomach has a thick mucus lining that protects the underlying tissue from the action of the digestive juices. When this mucus lining is ruptured, ulcers can form in the stomach. Ulcers are open wounds in or on an organ caused by bacteria (*Helicobacter pylori*) when the mucus lining is ruptured and fails to reform.

Small Intestine

Chyme moves from the stomach to the small intestine. The small intestine is the organ where the digestion of protein, fats, and carbohydrates is completed. The small intestine is a long tube-like organ with a highly folded surface containing finger-like projections called the villi. The apical surface of each villus has many microscopic projections called microvilli. These structures, illustrated in Figure 2.2.11, are lined with epithelial cells on the luminal side and allow for the nutrients to be absorbed from the digested food and absorbed into the blood stream on the other side. The villi and microvilli, with their many folds, increase the surface area of the intestine and increase absorption efficiency of the nutrients. Absorbed nutrients in the blood are carried into the hepatic portal vein, which leads to the liver. There, the liver regulates the distribution of nutrients to the rest of the body and removes toxic substances, including drugs, alcohol, and some pathogens.

Art Connection

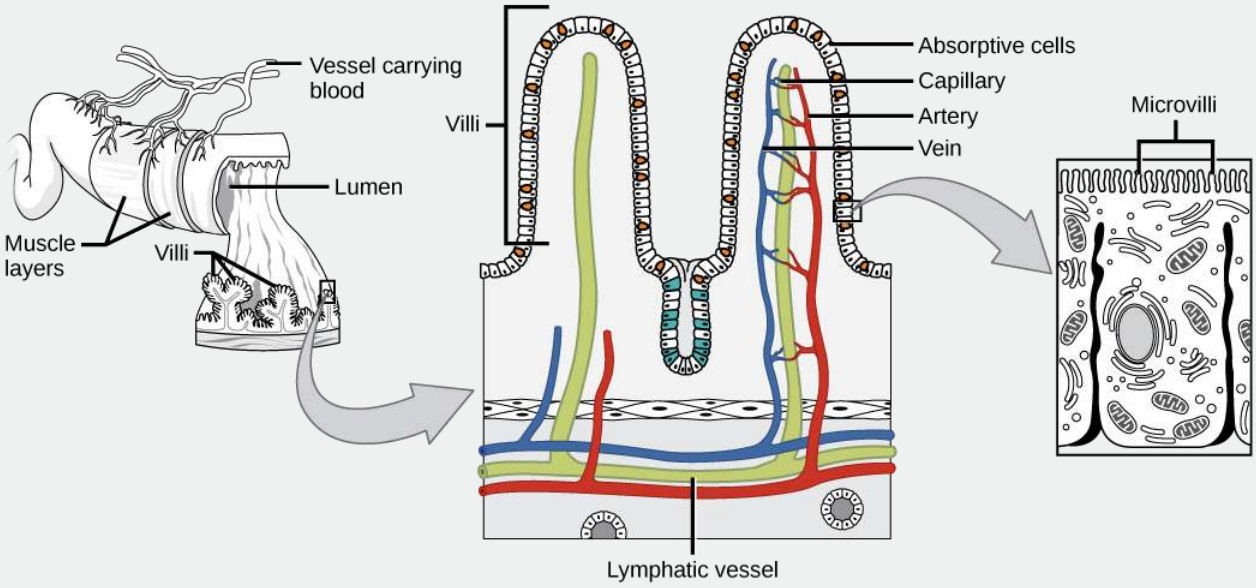


Figure 2.2.11: Villi are folds on the small intestine lining that increase the surface area to facilitate the absorption of nutrients.

Which of the following statements about the small intestine is false?

A. Absorptive cells that line the small intestine have microvilli, small projections that increase surface area and aid in the absorption of food.
B. The inside of the small intestine has many folds, called villi.
C. Microvilli are lined with blood vessels as well as lymphatic vessels.
D. The inside of the small intestine is called the lumen.

The human small intestine is over 6m long and is divided into three parts: the duodenum, the jejunum, and the ileum. The "C-shaped," fixed part of the small intestine is called the duodenum and is shown in Figure 2.2.11. The duodenum is separated from the stomach by the pyloric sphincter which opens to allow chyme to move from the stomach to the duodenum. In the duodenum, chyme is mixed with pancreatic juices in an alkaline solution rich in bicarbonate that neutralizes the acidity of chyme and acts as a buffer. Pancreatic juices also contain several digestive enzymes. Digestive juices from the pancreas, liver, and gallbladder, as well as from gland cells of the intestinal wall itself, enter the duodenum. Bile is produced in the liver and stored and concentrated in the gallbladder. Bile contains bile salts which emulsify lipids while the pancreas produces enzymes that catabolize starches, disaccharides, proteins, and fats. These digestive juices break down the food particles in the chyme into glucose, triglycerides, and amino acids. Some chemical digestion of food takes place in the duodenum. Absorption of fatty acids also takes place in the duodenum.

The second part of the small intestine is called the jejunum, shown in Figure 2.2.11. Here, hydrolysis of nutrients is continued while most of the carbohydrates and amino acids are absorbed through the intestinal lining. The bulk of chemical digestion and nutrient absorption occurs in the jejunum.

The ileum, also illustrated in Figure 2.2.11 is the last part of the small intestine and here the bile salts and vitamins are absorbed into blood stream. The undigested food is sent to the colon from the ileum via peristaltic movements of the muscle. The ileum ends and the large intestine begins at the ileocecal valve. The vermiform, "worm-like," appendix is located at the ileocecal valve. The appendix of humans secretes no enzymes and has an insignificant role in immunity.

Large Intestine

The large intestine, illustrated in Figure 2.2.12, reabsorbs the water from the undigested food material and processes the waste material. The human large intestine is much smaller in length compared to the small intestine but larger in diameter. It has three parts: the cecum, the colon, and the rectum. The cecum joins the ileum to the colon and is the receiving pouch for the waste matter. The colon is home to many bacteria or "intestinal flora" that aid in the digestive processes. The colon can be divided into four regions, the ascending colon, the transverse colon, the descending colon and the sigmoid colon. The main functions of the colon are

to extract the water and mineral salts from undigested food, and to store waste material. Carnivorous mammals have a shorter large intestine compared to herbivorous mammals due to their diet.

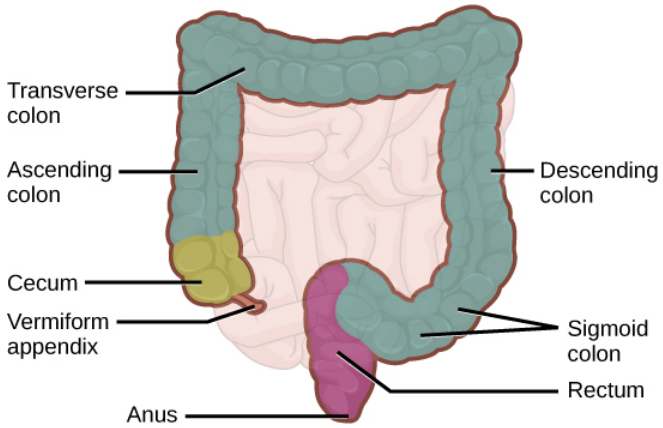


Figure 2.2.12: The large intestine reabsorbs water from undigested food and stores waste material until it is eliminated.

Rectum and Anus

The rectum is the terminal end of the large intestine, as shown in Figure 2.2.12. The primary role of the rectum is to store the feces until defecation. The feces are propelled using peristaltic movements during elimination. The anus is an opening at the far-end of the digestive tract and is the exit point for the waste material. Two sphincters between the rectum and anus control elimination: the inner sphincter is involuntary and the outer sphincter is voluntary.

Accessory Organs

The organs discussed above are the organs of the digestive tract through which food passes. Accessory organs are organs that add secretions (enzymes) that catabolize food into nutrients. Accessory organs include salivary glands, the liver, the pancreas, and the gallbladder. The liver, pancreas, and gallbladder are regulated by hormones in response to the food consumed.

The liver is the largest internal organ in humans and it plays a very important role in digestion of fats and detoxifying blood. The liver produces bile, a digestive juice that is required for the breakdown of fatty components of the food in the duodenum. The liver also processes the vitamins and fats and synthesizes many plasma proteins.

The pancreas is another important gland that secretes digestive juices. The chyme produced from the stomach is highly acidic in nature; the pancreatic juices contain high levels of bicarbonate, an alkali that neutralizes the acidic chyme. Additionally, the pancreatic juices contain a large variety of enzymes that are required for the digestion of protein and carbohydrates.

The gallbladder is a small organ that aids the liver by storing bile and concentrating bile salts. When chyme containing fatty acids enters the duodenum, the bile is secreted from the gallbladder into the duodenum.

Summary

Different animals have evolved different types of digestive systems specialized to meet their dietary needs. Humans and many other animals have monogastric digestive systems with a single-chambered stomach. Birds have evolved a digestive system that includes a gizzard where the food is crushed into smaller pieces. This compensates for their inability to masticate. Ruminants that consume large amounts of plant material have a multi-chambered stomach that digests roughage. Pseudo-ruminants have similar digestive processes as ruminants but do not have the four-compartment stomach. Processing food involves ingestion (eating), digestion (mechanical and enzymatic breakdown of large molecules), absorption (cellular uptake of nutrients), and elimination (removal of undigested waste as feces).

Many organs work together to digest food and absorb nutrients. The mouth is the point of ingestion and the location where both mechanical and chemical breakdown of food begins. Saliva contains an enzyme called amylase that breaks down carbohydrates. The food bolus travels through the esophagus by peristaltic movements to the stomach. The stomach has an extremely acidic environment. An enzyme called pepsin digests protein in the stomach. Further digestion and absorption take place in the small intestine. The large intestine reabsorbs water from the undigested food and stores waste until elimination.

Art Connections

Figure 2.2.10: Which of the following statements about the digestive system is false?

A. Chyme is a mixture of food and digestive juices that is produced in the stomach.
B. Food enters the large intestine before the small intestine.
C. In the small intestine, chyme mixes with bile, which emulsifies fats.
D. The stomach is separated from the small intestine by the pyloric sphincter.

Answer

B

Figure 2.2.11: Which of the following statements about the small intestine is false?

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B. The inside of the small intestine has many folds, called villi.
C. Microvilli are lined with blood vessels as well as lymphatic vessels.
D. The inside of the small intestine is called the lumen.

Answer

C

Glossary

alimentary canal
tubular digestive system with a mouth and anus

anus
exit point for waste material

bile
digestive juice produced by the liver; important for digestion of lipids

bolus
mass of food resulting from chewing action and wetting by saliva

carnivore
animal that consumes animal flesh

chyme
mixture of partially digested food and stomach juices

duodenum
first part of the small intestine where a large part of digestion of carbohydrates and fats occurs

esophagus
tubular organ that connects the mouth to the stomach

gallbladder
organ that stores and concentrates bile

gastrovascular cavity

digestive system consisting of a single opening

gizzard
muscular organ that grinds food

herbivore
animal that consumes strictly plant diet

ileum
last part of the small intestine; connects the small intestine to the large intestine; important for absorption of B-12

jejunum
second part of the small intestine

large intestine
digestive system organ that reabsorbs water from undigested material and processes waste matter

lipase
enzyme that chemically breaks down lipids

liver
organ that produces bile for digestion and processes vitamins and lipids

monogastric
digestive system that consists of a single-chambered stomach

omnivore
animal that consumes both plants and animals

pancreas
gland that secretes digestive juices

pepsin
enzyme found in the stomach whose main role is protein digestion

pepsinogen
inactive form of pepsin

peristalsis
wave-like movements of muscle tissue

proventriculus
glandular part of a bird’s stomach

rectum
area of the body where feces is stored until elimination

roughage
component of food that is low in energy and high in fiber

ruminant
animal with a stomach divided into four compartments

salivary amylase

enzyme found in saliva, which converts carbohydrates to maltose

small intestine
organ where digestion of protein, fats, and carbohydrates is completed

sphincter
band of muscle that controls movement of materials throughout the digestive tract

stomach
saclike organ containing acidic digestive juices

villi
folds on the inner surface of the small intestine whose role is to increase absorption area

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2.3: Nutrition and Energy Production

Skills to Develop

- Explain why an animal's diet should be balanced and meet the needs of the body
- Define the primary components of food
- Describe the essential nutrients required for cellular function that cannot be synthesized by the animal body
- Explain how energy is produced through diet and digestion
- Describe how excess carbohydrates and energy are stored in the body

Given the diversity of animal life on our planet, it is not surprising that the animal diet would also vary substantially. The animal diet is the source of materials needed for building DNA and other complex molecules needed for growth, maintenance, and reproduction; collectively these processes are called biosynthesis. The diet is also the source of materials for ATP production in the cells. The diet must be balanced to provide the minerals and vitamins that are required for cellular function.

Food Requirements

What are the fundamental requirements of the animal diet? The animal diet should be well balanced and provide nutrients required for bodily function and the minerals and vitamins required for maintaining structure and regulation necessary for good health and reproductive capability. These requirements for a human are illustrated graphically in Figure 2.3.1.

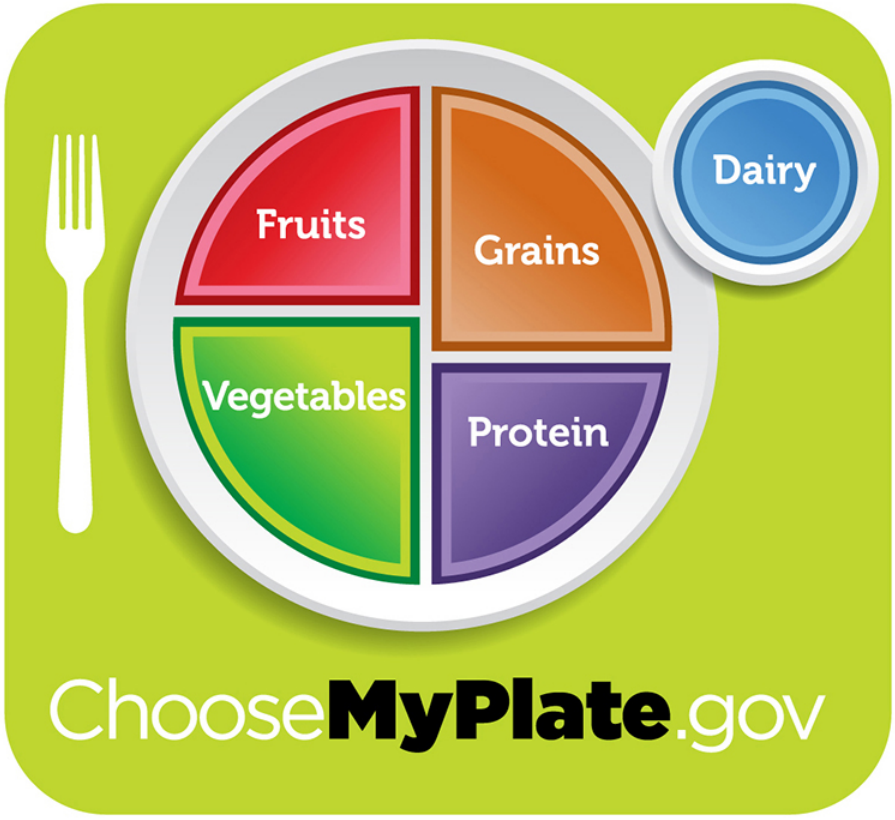


Figure 2.3.1: For humans, a balanced diet includes fruits, vegetables, grains, and protein. (credit: USDA)

Everyday Connection: Let's Move! Campaign

Obesity is a growing epidemic and the rate of obesity among children is rapidly rising in the United States. To combat childhood obesity and ensure that children get a healthy start in life, first lady Michelle Obama has launched the Let's Move! campaign. The goal of this campaign is to educate parents and caregivers on providing healthy nutrition and encouraging

active lifestyles to future generations. This program aims to involve the entire community, including parents, teachers, and healthcare providers to ensure that children have access to healthy foods—more fruits, vegetables, and whole grains—and consume fewer calories from processed foods. Another goal is to ensure that children get physical activity. With the increase in television viewing and stationary pursuits such as video games, sedentary lifestyles have become the norm. Learn more at www.letsmove.gov.

Organic Precursors

The organic molecules required for building cellular material and tissues must come from food. Carbohydrates or sugars are the primary source of organic carbons in the animal body. During digestion, digestible carbohydrates are ultimately broken down into glucose and used to provide energy through metabolic pathways. Complex carbohydrates, including polysaccharides, can be broken down into glucose through biochemical modification; however, humans do not produce the enzyme cellulase and lack the ability to derive glucose from the polysaccharide cellulose. In humans, these molecules provide the fiber required for moving waste through the large intestine and a healthy colon. The intestinal flora in the human gut are able to extract some nutrition from these plant fibers. The excess sugars in the body are converted into glycogen and stored in the liver and muscles for later use. Glycogen stores are used to fuel prolonged exertions, such as long-distance running, and to provide energy during food shortage. Excess glycogen can be converted to fats, which are stored in the lower layer of the skin of mammals for insulation and energy storage. Excess digestible carbohydrates are stored by mammals in order to survive famine and aid in mobility.

Another important requirement is that of nitrogen. Protein catabolism provides a source of organic nitrogen. Amino acids are the building blocks of proteins and protein breakdown provides amino acids that are used for cellular function. The carbon and nitrogen derived from these become the building block for nucleotides, nucleic acids, proteins, cells, and tissues. Excess nitrogen must be excreted as it is toxic. Fats add flavor to food and promote a sense of satiety or fullness. Fatty foods are also significant sources of energy because one gram of fat contains nine calories. Fats are required in the diet to aid the absorption of fat-soluble vitamins and the production of fat-soluble hormones.

Essential Nutrients

While the animal body can synthesize many of the molecules required for function from the organic precursors, there are some nutrients that need to be consumed from food. These nutrients are termed essential nutrients, meaning they must be eaten, and the body cannot produce them.

The omega-3 alpha-linolenic acid and the omega-6 linoleic acid are essential fatty acids needed to make some membrane phospholipids. Vitamins are another class of essential organic molecules that are required in small quantities for many enzymes to function and, for this reason, are considered to be co-enzymes. Absence or low levels of vitamins can have a dramatic effect on health, as outlined in the tables below. Both fat-soluble and water-soluble vitamins must be obtained from food. Minerals, listed in the table below, are inorganic essential nutrients that must be obtained from food. Among their many functions, minerals help in structure and regulation and are considered co-factors. Certain amino acids also must be procured from food and cannot be synthesized by the body. These amino acids are the “essential” amino acids. The human body can synthesize only 11 of the 20 required amino acids; the rest must be obtained from food. The essential amino acids are listed in the table below.

Table 2.3.1**:** Water-soluble Essential Vitamins

Vitamin	Function	Deficiencies Can Lead To	Sources
Vitamin B_1 (Thiamine)	Needed by the body to process lipids, proteins, and carbohydrates Coenzyme removes CO_2 from organic compounds	Muscle weakness, Beriberi: reduced heart function, CNS problems	Milk, meat, dried beans, whole grains
Vitamin B_2 (Riboflavin)	Takes an active role in metabolism, aiding in the conversion of food to energy (FAD and FMN)	Cracks or sores on the outer surface of the lips (cheliosis); inflammation and redness of the tongue; moist, scaly skin inflammation (seborrheic dermatitis)	Meat, eggs, enriched grains, vegetables
Vitamin B_3 (Niacin)	Used by the body to release energy from carbohydrates and to process alcohol; required for the synthesis of sex hormones; component of coenzyme NAD^+ and $NADP^+$	Pellagra, which can result in dermatitis, diarrhea, dementia, and death	Meat, eggs, grains, nuts, potatoes
Vitamin B_5 (Pantothenic acid)	Assists in producing energy from foods (lipids, in particular); component of coenzyme A	Fatigue, poor coordination, retarded growth, numbness, tingling of hands and feet	Meat, whole grains, milk, fruits, vegetables
Vitamin B_6 (Pyridoxine)	The principal vitamin for processing amino acids and lipids; also helps convert nutrients into energy	Irritability, depression, confusion, mouth sores or ulcers, anemia, muscular twitching	Meat, dairy products, whole grains, orange juice
Vitamin B_7 (Biotin)	Used in energy and amino acid metabolism, fat synthesis, and fat breakdown; helps the body use blood sugar	Hair loss, dermatitis, depression, numbness and tingling in the extremities; neuromuscular disorders	Meat, eggs, legumes and other vegetables
Vitamin B_9 (Folic acid)	Assists the normal development of cells, especially during fetal development; helps metabolize nucleic and amino acids	Deficiency during pregnancy is associated with birth defects, such as neural tube defects and anemia	Leafy green vegetables, whole wheat, fruits, nuts, legumes
Vitamin B_{12} (Cobalamin)	Maintains healthy nervous system and assists with blood cell formation; coenzyme in nucleic acid metabolism	Anemia, neurological disorders, numbness, loss of balance	Meat, eggs, animal products
Vitamin C (Ascorbic acid)	Helps maintain connective tissue: bone, cartilage, and dentin; boosts the immune system	Scurvy, which results in bleeding, hair and tooth loss; joint pain and swelling; delayed wound healing	Citrus fruits, broccoli, tomatoes, red sweet bell peppers

Table 2.3.2**:** Fat-soluble Essential Vitamins

Vitamin	Function	Deficiencies Can Lead To	Sources
Vitamin A (Retinol)	Critical to the development of bones, teeth, and skin; helps maintain eyesight, enhances the immune system, fetal development, gene expression	Night-blindness, skin disorders, impaired immunity	Dark green leafy vegetables, yellow-orange vegetables fruits, milk, butter
Vitamin D	Critical for calcium absorption for bone development and strength; maintains a stable nervous system; maintains a normal and strong heartbeat; helps in blood clotting	Rickets, osteomalacia, immunity	Cod liver oil, milk, egg yolk
Vitamin E (Tocopherol)	Lessens oxidative damage of cells,and prevents lung damage from pollutants; vital to the immune system	Deficiency is rare; anemia, nervous system degeneration	Wheat germ oil, unrefined vegetable oils, nuts, seeds, grains
Vitamin K (Phylloquinone)	Essential to blood clotting	Bleeding and easy bruising	Leafy green vegetables, tea



Figure 2.3.2: A healthy diet should include a variety of foods to ensure that needs for essential nutrients are met. (credit: Keith Weller, USDA ARS)

Table 2.3.3: Minerals and Their Function in the Human Body

Mineral	Function	Deficiencies Can Lead To	Sources
*Calcium	Needed for muscle and neuron function; heart health; builds bone and supports synthesis and function of blood cells; nerve function	Osteoporosis, rickets, muscle spasms, impaired growth	Milk, yogurt, fish, green leafy vegetables, legumes
*Chlorine	Needed for production of hydrochloric acid (HCl) in the stomach and nerve function; osmotic balance	Muscle cramps, mood disturbances, reduced appetite	Table salt
Copper (trace amounts)	Required component of many redox enzymes, including cytochrome c oxidase; cofactor for hemoglobin synthesis	Copper deficiency is rare	Liver, oysters, cocoa, chocolate, sesame, nuts
Iodine	Required for the synthesis of thyroid hormones	Goiter	Seafood, iodized salt, dairy products
Iron	Required for many proteins and enzymes, notably hemoglobin, to prevent anemia	Anemia, which causes poor concentration, fatigue, and poor immune function	Red meat, leafy green vegetables, fish (tuna, salmon), eggs, dried fruits, beans, whole grains
*Magnesium	Required co-factor for ATP formation; bone formation; normal membrane functions; muscle function	Mood disturbances, muscle spasms	Whole grains, leafy green vegetables
Manganese (trace amounts)	A cofactor in enzyme functions; trace amounts are required	Manganese deficiency is rare	Common in most foods
Molybdenum (trace amounts)	Acts as a cofactor for three essential enzymes in humans: sulfite oxidase, xanthine oxidase, and aldehyde oxidase	Molybdenum deficiency is rare	
*Phosphorus	A component of bones and teeth; helps regulate acid-base balance; nucleotide synthesis	Weakness, bone abnormalities, calcium loss	Milk, hard cheese, whole grains, meats
*Potassium	Vital for muscles, heart, and nerve function	Cardiac rhythm disturbance, muscle weakness	Legumes, potato skin, tomatoes, bananas
Selenium (trace amounts)	A cofactor essential to activity of antioxidant enzymes like glutathione peroxidase; trace amounts are required	Selenium deficiency is rare	Common in most foods
*Sodium	Systemic electrolyte required for many functions; acid-base balance; water balance; nerve function	Muscle cramps, fatigue, reduced appetite	Table salt
Zinc (trace amounts)	Required for several enzymes such as carboxypeptidase, liver	Anemia, poor wound healing, can lead to short stature	Common in most foods

Mineral	Function	Deficiencies Can Lead To	Sources
	alcohol dehydrogenase, and carbonic anhydrase		
*Greater than 200mg/day required			

Table 2.3.4**:** Essential Amino Acids

Amino acids that must be consumed	Amino acids anabolized by the body
isoleucine	alanine
leucine	selenocysteine
lysine	aspartate
methionine	cysteine
phenylalanine	glutamate
tryptophan	glycine
valine	proline
histidine*	serine
threonine	tyrosine
arginine*	asparagine
*The human body can synthesize histidine and arginine, but not in the quantities required, especially for growing children.	

Food Energy and ATP

Animals need food to obtain energy and maintain homeostasis. Homeostasis is the ability of a system to maintain a stable internal environment even in the face of external changes to the environment. For example, the normal body temperature of humans is 37°C (98.6°F). Humans maintain this temperature even when the external temperature is hot or cold. It takes energy to maintain this body temperature, and animals obtain this energy from food.

The primary source of energy for animals is carbohydrates, mainly glucose. Glucose is called the body's fuel. The digestible carbohydrates in an animal's diet are converted to glucose molecules through a series of catabolic chemical reactions.

Adenosine triphosphate, or ATP, is the primary energy currency in cells; ATP stores energy in phosphate ester bonds. ATP releases energy when the phosphodiester bonds are broken and ATP is converted to ADP and a phosphate group. ATP is produced by the oxidative reactions in the cytoplasm and mitochondrion of the cell, where carbohydrates, proteins, and fats undergo a series of metabolic reactions collectively called cellular respiration. For example, glycolysis is a series of reactions in which glucose is converted to pyruvic acid and some of its chemical potential energy is transferred to NADH and ATP.

ATP is required for all cellular functions. It is used to build the organic molecules that are required for cells and tissues; it provides energy for muscle contraction and for the transmission of electrical signals in the nervous system. When the amount of ATP is available in excess of the body's requirements, the liver uses the excess ATP and excess glucose to produce molecules called glycogen. Glycogen is a polymeric form of glucose and is stored in the liver and skeletal muscle cells. When blood sugar drops, the liver releases glucose from stores of glycogen. Skeletal muscle converts glycogen to glucose during intense exercise. The process of converting glucose and excess ATP to glycogen and the storage of excess energy is an evolutionarily important step in helping animals deal with mobility, food shortages, and famine.

Everyday Connection: Obesity

Obesity is a major health concern in the United States, and there is a growing focus on reducing obesity and the diseases it may lead to, such as type-2 diabetes, cancers of the colon and breast, and cardiovascular disease. How does the food consumed contribute to obesity?

Fatty foods are calorie-dense, meaning that they have more calories per unit mass than carbohydrates or proteins. One gram of carbohydrates has four calories, one gram of protein has four calories, and one gram of fat has nine calories. Animals tend to seek lipid-rich food for their higher energy content.

The signals of hunger (“time to eat”) and satiety (“time to stop eating”) are controlled in the hypothalamus region of the brain. Foods that are rich in fatty acids tend to promote satiety more than foods that are rich only in carbohydrates.

Excess carbohydrate and ATP are used by the liver to synthesize glycogen. The pyruvate produced during glycolysis is used to synthesize fatty acids. When there is more glucose in the body than required, the resulting excess pyruvate is converted into molecules that eventually result in the synthesis of fatty acids within the body. These fatty acids are stored in adipose cells—the fat cells in the mammalian body whose primary role is to store fat for later use.

It is important to note that some animals benefit from obesity. Polar bears and seals need body fat for insulation and to keep them from losing body heat during Arctic winters. When food is scarce, stored body fat provides energy for maintaining homeostasis. Fats prevent famine in mammals, allowing them to access energy when food is not available on a daily basis; fats are stored when a large kill is made or lots of food is available.

Summary

Animal diet should be balanced and meet the needs of the body. Carbohydrates, proteins, and fats are the primary components of food. Some essential nutrients are required for cellular function but cannot be produced by the animal body. These include vitamins, minerals, some fatty acids, and some amino acids. Food intake in more than necessary amounts is stored as glycogen in the liver and muscle cells, and in fat cells. Excess adipose storage can lead to obesity and serious health problems. ATP is the energy currency of the cell and is obtained from the metabolic pathways. Excess carbohydrates and energy are stored as glycogen in the body.

Glossary

essential nutrient
: nutrient that cannot be synthesized by the body; it must be obtained from food

mineral
: inorganic, elemental molecule that carries out important roles in the body

vitamin
: organic substance necessary in small amounts to sustain life

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2.4: Digestive System Processes

Skills to Develop

- Describe the process of digestion
- Detail the steps involved in digestion and absorption
- Define elimination
- Explain the role of both the small and large intestines in absorption

Obtaining nutrition and energy from food is a multi-step process. For true animals, the first step is ingestion, the act of taking in food. This is followed by digestion, absorption, and elimination. In the following sections, each of these steps will be discussed in detail.

Ingestion

The large molecules found in intact food cannot pass through the cell membranes. Food needs to be broken into smaller particles so that animals can harness the nutrients and organic molecules. The first step in this process is ingestion. Ingestion is the process of taking in food through the mouth. In vertebrates, the teeth, saliva, and tongue play important roles in mastication (preparing the food into bolus). While the food is being mechanically broken down, the enzymes in saliva begin to chemically process the food as well. The combined action of these processes modifies the food from large particles to a soft mass that can be swallowed and can travel the length of the esophagus.

Digestion and Absorption

Digestion is the mechanical and chemical break down of food into small organic fragments. It is important to break down macromolecules into smaller fragments that are of suitable size for absorption across the digestive epithelium. Large, complex molecules of proteins, polysaccharides, and lipids must be reduced to simpler particles such as simple sugar before they can be absorbed by the digestive epithelial cells. Different organs play specific roles in the digestive process. The animal diet needs carbohydrates, protein, and fat, as well as vitamins and inorganic components for nutritional balance. How each of these components is digested is discussed in the following sections.

Carbohydrates

The digestion of carbohydrates begins in the mouth. The salivary enzyme amylase begins the breakdown of food starches into maltose, a disaccharide. As the bolus of food travels through the esophagus to the stomach, no significant digestion of carbohydrates takes place. The esophagus produces no digestive enzymes but does produce mucous for lubrication. The acidic environment in the stomach stops the action of the amylase enzyme.

The next step of carbohydrate digestion takes place in the duodenum. Recall that the chyme from the stomach enters the duodenum and mixes with the digestive secretion from the pancreas, liver, and gallbladder. Pancreatic juices also contain amylase, which continues the breakdown of starch and glycogen into maltose, a disaccharide. The disaccharides are broken down into monosaccharides by enzymes called maltases, sucrases, and lactases, which are also present in the brush border of the small intestinal wall. Maltase breaks down maltose into glucose. Other disaccharides, such as sucrose and lactose are broken down by sucrase and lactase, respectively. Sucrase breaks down sucrose (or “table sugar”) into glucose and fructose, and lactase breaks down lactose (or “milk sugar”) into glucose and galactose. The monosaccharides (glucose) thus produced are absorbed and then can be used in metabolic pathways to harness energy. The monosaccharides are transported across the intestinal epithelium into the bloodstream to be transported to the different cells in the body. The steps in carbohydrate digestion are summarized in Figure 2.4.1.

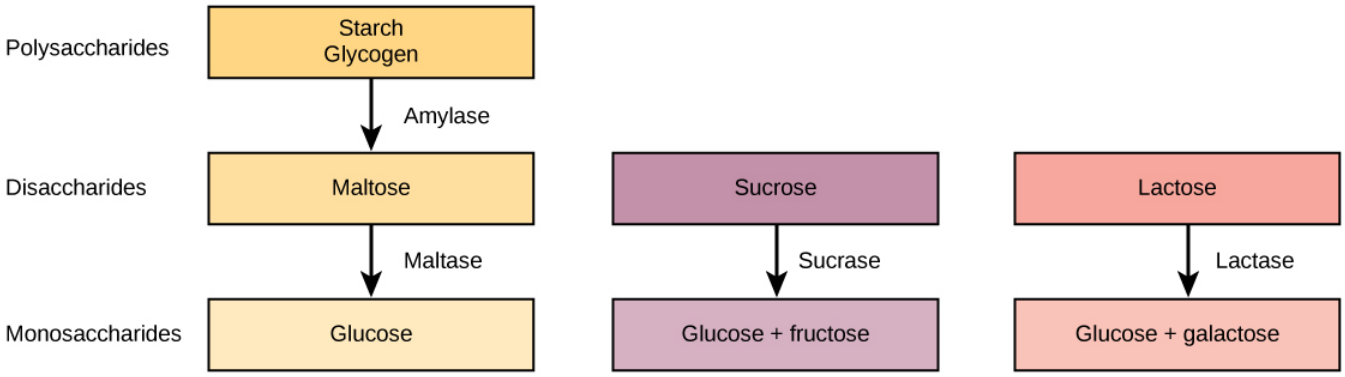


Figure 2.4.1: Digestion of carbohydrates is performed by several enzymes. Starch and glycogen are broken down into glucose by amylase and maltase. Sucrose (table sugar) and lactose (milk sugar) are broken down by sucrase and lactase, respectively.

Table 2.4.1**:** Digestion of Carbohydrates

Enzyme	Produced By	Site of Action	Substrate Acting On	End Products
Salivary amylase	Salivary glands	Mouth	Polysaccharides (Starch)	Disaccharides (maltose), oligosaccharides
Pancreatic amylase	Pancreas	Small intestine	Polysaccharides (starch)	Disaccharides (maltose), monosaccharides
Oligosaccharidases	Lining of the intestine; brush border membrane	Small intestine	Disaccharides	Monosaccharides (e.g., glucose, fructose, galactose)

Protein

A large part of protein digestion takes place in the stomach. The enzyme pepsin plays an important role in the digestion of proteins by breaking down the intact protein to peptides, which are short chains of four to nine amino acids. In the duodenum, other enzymes—trypsin, elastase, and chymotrypsin—act on the peptides reducing them to smaller peptides. Trypsin elastase, carboxypeptidase, and chymotrypsin are produced by the pancreas and released into the duodenum where they act on the chyme. Further breakdown of peptides to single amino acids is aided by enzymes called peptidases (those that break down peptides). Specifically, carboxypeptidase, dipeptidase, and aminopeptidase play important roles in reducing the peptides to free amino acids. The amino acids are absorbed into the bloodstream through the small intestines. The steps in protein digestion are summarized in Figure 2.4.2.

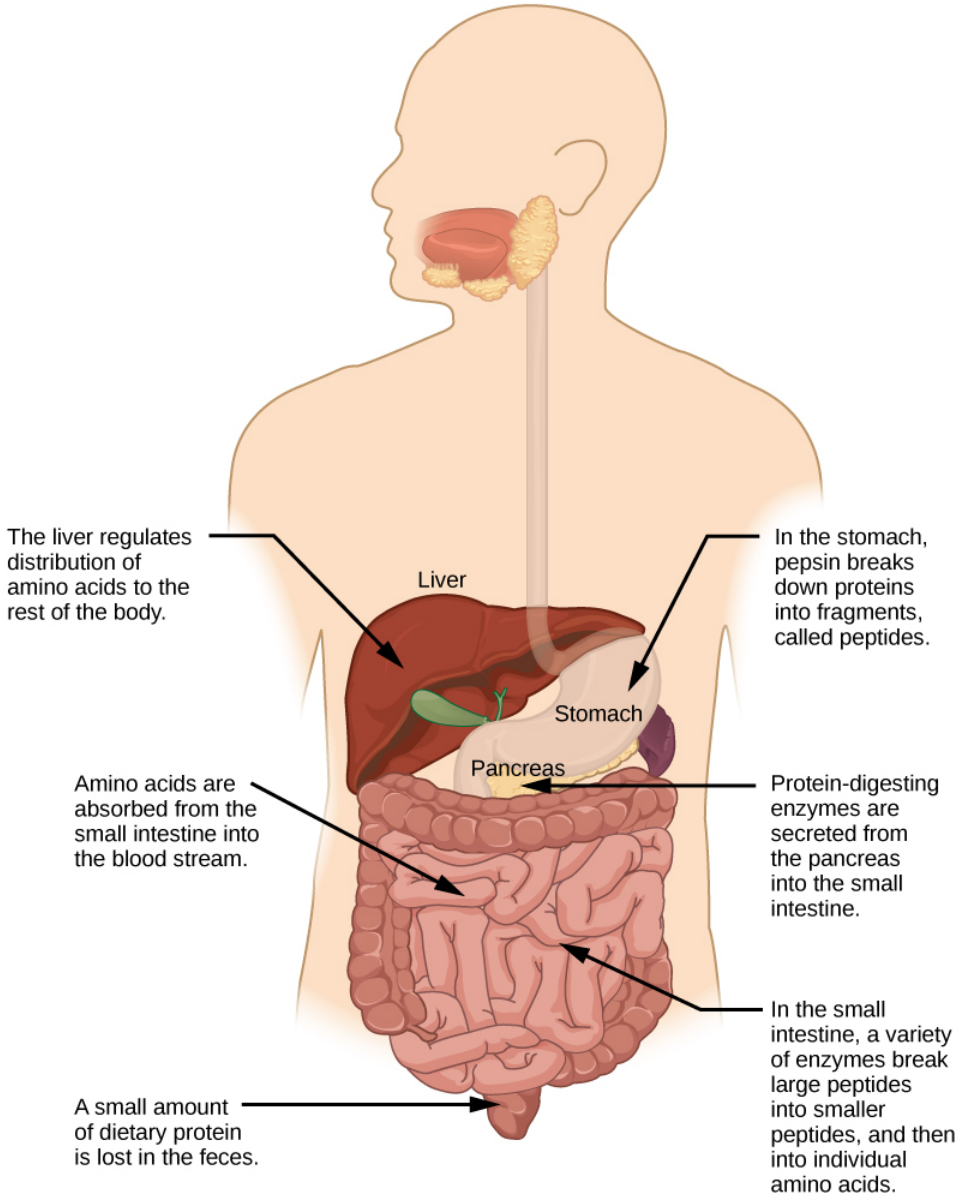


Figure 2.4.2: Protein digestion is a multistep process that begins in the stomach and continues through the intestines.

Table 2.4.2**:** Digestion of Protein

Enzyme	Produced By	Site of Action	Substrate Acting On	End Products
Pepsin	Stomach chief cells	Stomach	Proteins	Peptides
Trypsin Elastase Chymotrypsin	Pancreas	Small intestine	Proteins	Peptides
Carboxypeptidase	Pancreas	Small intestine	Peptides	Amino acids and peptides
Aminopeptidase Dipeptidase	Lining of intestine	Small intestine	Peptides	Amino acids

Lipids

Lipid digestion begins in the stomach with the aid of lingual lipase and gastric lipase. However, the bulk of lipid digestion occurs in the small intestine due to pancreatic lipase. When chyme enters the duodenum, the hormonal responses trigger the release of bile,

which is produced in the liver and stored in the gallbladder. Bile aids in the digestion of lipids, primarily triglycerides by emulsification. Emulsification is a process in which large lipid globules are broken down into several small lipid globules. These small globules are more widely distributed in the chyme rather than forming large aggregates. Lipids are hydrophobic substances: in the presence of water, they will aggregate to form globules to minimize exposure to water. Bile contains bile salts, which are amphipathic, meaning they contain hydrophobic and hydrophilic parts. Thus, the bile salts hydrophilic side can interface with water on one side and the hydrophobic side interfaces with lipids on the other. By doing so, bile salts emulsify large lipid globules into small lipid globules.

Why is emulsification important for digestion of lipids? Pancreatic juices contain enzymes called lipases (enzymes that break down lipids). If the lipid in the chyme aggregates into large globules, very little surface area of the lipids is available for the lipases to act on, leaving lipid digestion incomplete. By forming an emulsion, bile salts increase the available surface area of the lipids many fold. The pancreatic lipases can then act on the lipids more efficiently and digest them, as detailed in Figure 2.4.3. Lipases break down the lipids into fatty acids and glycerides. These molecules can pass through the plasma membrane of the cell and enter the epithelial cells of the intestinal lining. The bile salts surround long-chain fatty acids and monoglycerides forming tiny spheres called micelles. The micelles move into the brush border of the small intestine absorptive cells where the long-chain fatty acids and monoglycerides diffuse out of the micelles into the absorptive cells leaving the micelles behind in the chyme. The long-chain fatty acids and monoglycerides recombine in the absorptive cells to form triglycerides, which aggregate into globules and become coated with proteins. These large spheres are called chylomicrons. Chylomicrons contain triglycerides, cholesterol, and other lipids and have proteins on their surface. The surface is also composed of the hydrophilic phosphate "heads" of phospholipids. Together, they enable the chylomicron to move in an aqueous environment without exposing the lipids to water. Chylomicrons leave the absorptive cells via exocytosis. Chylomicrons enter the lymphatic vessels, and then enter the blood in the subclavian vein.

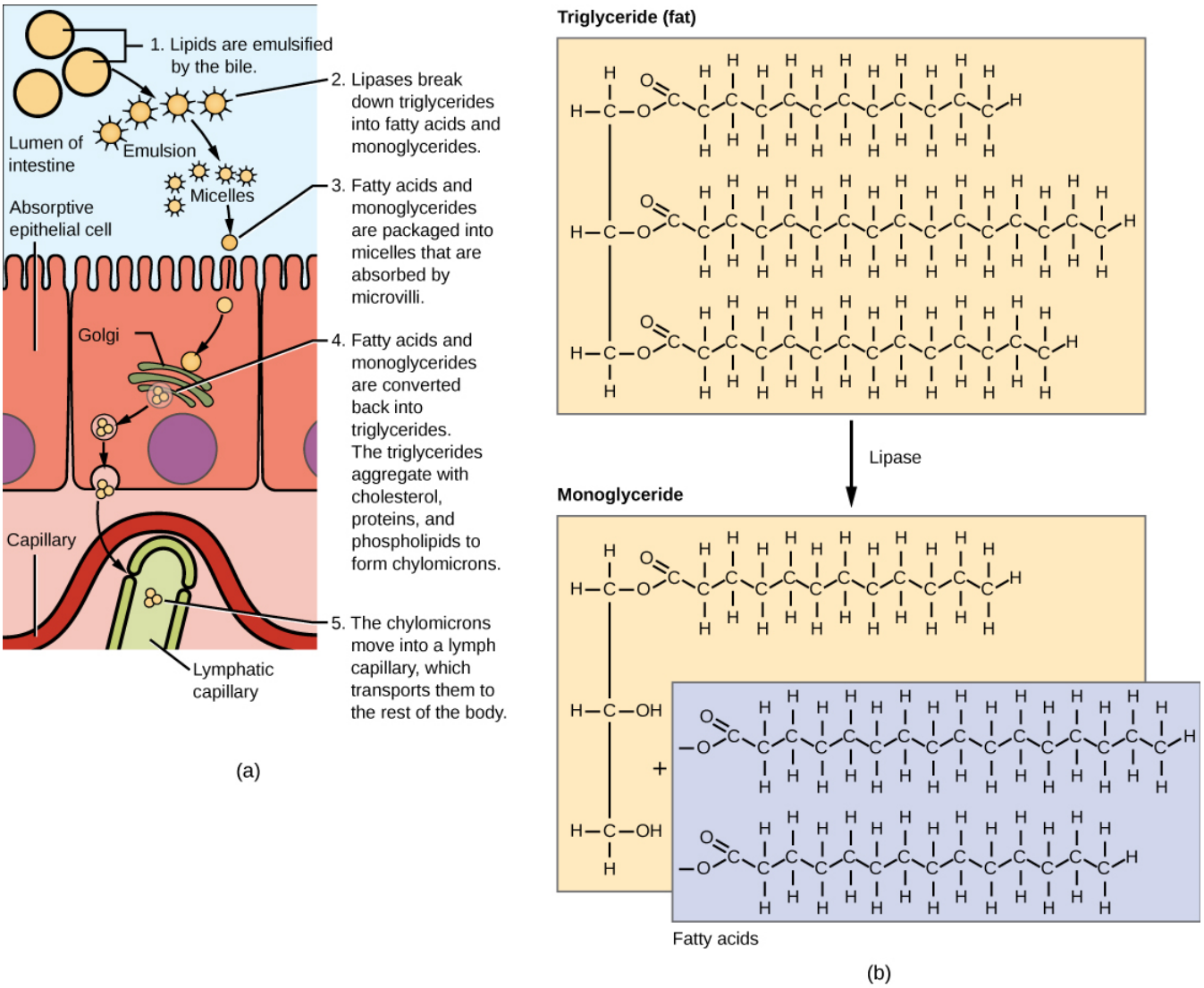


Figure 2.4.3: Lipids are digested and absorbed in the small intestine.

Vitamins

Vitamins can be either water-soluble or lipid-soluble. Fat soluble vitamins are absorbed in the same manner as lipids. It is important to consume some amount of dietary lipid to aid the absorption of lipid-soluble vitamins. Water-soluble vitamins can be directly absorbed into the bloodstream from the intestine.

Art Connection

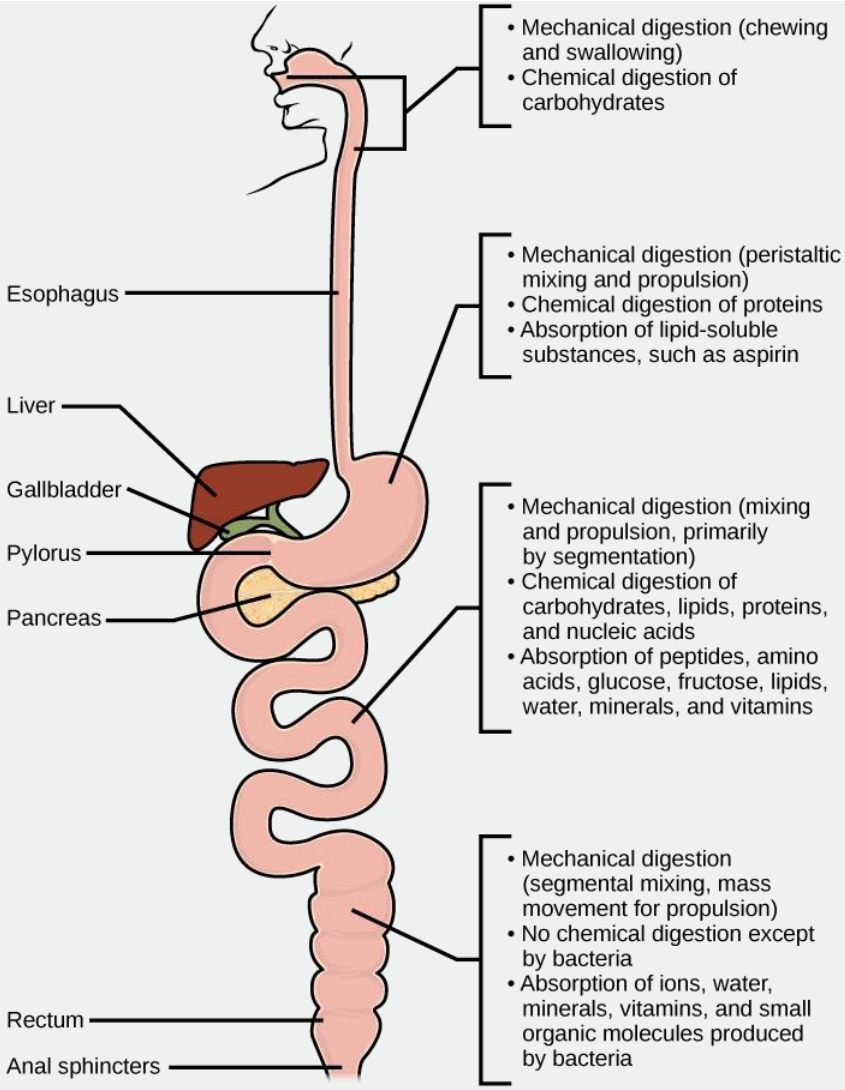


Figure 2.4.4: Mechanical and chemical digestion of food takes place in many steps, beginning in the mouth and ending in the rectum.

Which of the following statements about digestive processes is true?

A. Amylase, maltase, and lactase in the mouth digest carbohydrates.
B. Trypsin and lipase in the stomach digest protein.
C. Bile emulsifies lipids in the small intestine.
D. No food is absorbed until the small intestine.

Elimination

The final step in digestion is the elimination of undigested food content and waste products. The undigested food material enters the colon, where most of the water is reabsorbed. Recall that the colon is also home to the microflora called “intestinal flora” that aid in the digestion process. The semi-solid waste is moved through the colon by peristaltic movements of the muscle and is stored in the rectum. As the rectum expands in response to storage of fecal matter, it triggers the neural signals required to set up the urge to eliminate. The solid waste is eliminated through the anus using peristaltic movements of the rectum.

Common Problems with Elimination

Diarrhea and constipation are some of the most common health concerns that affect digestion. Constipation is a condition where the feces are hardened because of excess water removal in the colon. In contrast, if enough water is not removed from the feces, it

results in diarrhea. Many bacteria, including the ones that cause cholera, affect the proteins involved in water reabsorption in the colon and result in excessive diarrhea.

Emesis

Emesis, or vomiting, is elimination of food by forceful expulsion through the mouth. It is often in response to an irritant that affects the digestive tract, including but not limited to viruses, bacteria, emotions, sights, and food poisoning. This forceful expulsion of the food is due to the strong contractions produced by the stomach muscles. The process of emesis is regulated by the medulla.

Summary

Digestion begins with ingestion, where the food is taken in the mouth. Digestion and absorption take place in a series of steps with special enzymes playing important roles in digesting carbohydrates, proteins, and lipids. Elimination describes removal of undigested food contents and waste products from the body. While most absorption occurs in the small intestines, the large intestine is responsible for the final removal of water that remains after the absorptive process of the small intestines. The cells that line the large intestine absorb some vitamins as well as any leftover salts and water. The large intestine (colon) is also where feces is formed.

Art Connections

Figure 2.4.4: Which of the following statements about digestive processes is true?

A. Amylase, maltase and lactase in the mouth digest carbohydrates.
B. Trypsin and lipase in the stomach digest protein.
C. Bile emulsifies lipids in the small intestine.
D. No food is absorbed until the small intestine.

Answer

C

Glossary

aminopeptidase
protease that breaks down peptides to single amino acids; secreted by the brush border of small intestine

carboxypeptidase
protease that breaks down peptides to single amino acids; secreted by the brush border of the small intestine

chylomicron
small lipid globule

chymotrypsin
pancreatic protease

digestion
mechanical and chemical break down of food into small organic fragments

dipeptidase
protease that breaks down peptides to single amino acids; secreted by the brush border of small intestine

elastase
pancreatic protease

ingestion

act of taking in food

lactase
enzyme that breaks down lactose into glucose and galactose

maltase
enzyme that breaks down maltose into glucose

sucrase
enzyme that breaks down sucrose into glucose and fructose

trypsin
pancreatic protease that breaks down protein

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2.5: Digestive System Regulation

Skills to Develop

- Discuss the role of neural regulation in digestive processes
- Explain how hormones regulate digestion

The brain is the control center for the sensation of hunger and satiety. The functions of the digestive system are regulated through neural and hormonal responses.

Neural Responses to Food

In reaction to the smell, sight, or thought of food, like that shown in Figure 2.5.1, the first hormonal response is that of salivation. The salivary glands secrete more saliva in response to the stimulus presented by food in preparation for digestion. Simultaneously, the stomach begins to produce hydrochloric acid to digest the food. Recall that the peristaltic movements of the esophagus and other organs of the digestive tract are under the control of the brain. The brain prepares these muscles for movement as well. When the stomach is full, the part of the brain that detects satiety signals fullness. There are three overlapping phases of gastric control—the cephalic phase, the gastric phase, and the intestinal phase—each requires many enzymes and is under neural control as well.



Figure 2.5.1: Seeing a plate of food triggers the secretion of saliva in the mouth and the production of HCL in the stomach. (credit: Kelly Bailey)

Digestive Phases

The response to food begins even before food enters the mouth. The first phase of ingestion, called the cephalic phase, is controlled by the neural response to the stimulus provided by food. All aspects—such as sight, sense, and smell—trigger the neural responses resulting in salivation and secretion of gastric juices. The gastric and salivary secretion in the cephalic phase can also take place due to the thought of food. Right now, if you think about a piece of chocolate or a crispy potato chip, the increase in salivation is a cephalic phase response to the thought. The central nervous system prepares the stomach to receive food.

The gastric phase begins once the food arrives in the stomach. It builds on the stimulation provided during the cephalic phase. Gastric acids and enzymes process the ingested materials. The gastric phase is stimulated by (1) distension of the stomach, (2) a decrease in the pH of the gastric contents, and (3) the presence of undigested material. This phase consists of local, hormonal, and neural responses. These responses stimulate secretions and powerful contractions.

The intestinal phase begins when chyme enters the small intestine triggering digestive secretions. This phase controls the rate of gastric emptying. In addition to gastrin emptying, when chyme enters the small intestine, it triggers other hormonal and neural events that coordinate the activities of the intestinal tract, pancreas, liver, and gallbladder.

Hormonal Responses to Food

The endocrine system controls the response of the various glands in the body and the release of hormones at the appropriate times.

One of the important factors under hormonal control is the stomach acid environment. During the gastric phase, the hormone gastrin is secreted by G cells in the stomach in response to the presence of proteins. Gastrin stimulates the release of stomach acid, or hydrochloric acid (HCl) which aids in the digestion of the proteins. However, when the stomach is emptied, the acidic environment need not be maintained and a hormone called somatostatin stops the release of hydrochloric acid. This is controlled by a negative feedback mechanism.

In the duodenum, digestive secretions from the liver, pancreas, and gallbladder play an important role in digesting chyme during the intestinal phase. In order to neutralize the acidic chyme, a hormone called secretin stimulates the pancreas to produce alkaline bicarbonate solution and deliver it to the duodenum. Secretin acts in tandem with another hormone called cholecystokinin (CCK). Not only does CCK stimulate the pancreas to produce the requisite pancreatic juices, it also stimulates the gallbladder to release bile into the duodenum.

Another level of hormonal control occurs in response to the composition of food. Foods high in lipids take a long time to digest. A hormone called gastric inhibitory peptide is secreted by the small intestine to slow down the peristaltic movements of the intestine to allow fatty foods more time to be digested and absorbed.

Understanding the hormonal control of the digestive system is an important area of ongoing research. Scientists are exploring the role of each hormone in the digestive process and developing ways to target these hormones. Advances could lead to knowledge that may help to battle the obesity epidemic.

Summary

The brain and the endocrine system control digestive processes. The brain controls the responses of hunger and satiety. The endocrine system controls the release of hormones and enzymes required for digestion of food in the digestive tract.

Glossary

cephalic phase
first phase of digestion, controlled by the neural response to the stimulus provided by food

cholecystokinin
hormone that stimulates the contraction of the gallbladder to release bile

endocrine system
system that controls the response of the various glands in the body and the release of hormones at the appropriate times

gastric inhibitory peptide

hormone secreted by the small intestine in the presence of fatty acids and sugars; it also inhibits acid production and peristalsis in order to slow down the rate at which food enters the small intestine

gastric phase

digestive phase beginning once food enters the stomach; gastric acids and enzymes process the ingested materials

gastrin

hormone which stimulates hydrochloric acid secretion in the stomach

intestinal phase

third digestive phase; begins when chyme enters the small intestine triggering digestive secretions and controlling the rate of gastric emptying

secretin

hormone which stimulates sodium bicarbonate secretion in the small intestine

somatostatin

hormone released to stop acid secretion when the stomach is empty

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2.E: Animal Nutrition and the Digestive System (Exercises)

34.1: Digestive Systems

Animals obtain their nutrition from the consumption of other organisms. Depending on their diet, animals can be classified into the following categories: plant eaters (herbivores), meat eaters (carnivores), and those that eat both plants and animals (omnivores). The nutrients and macromolecules present in food are not immediately accessible to the cells. There are processes that modify food within the animal body to make the nutrients and organic molecules needed for cellular function.

Review Questions

Which of the following is a pseudo-ruminant?

A. cow
B. pig
C. crow
D. horse

Answer

D

Which of the following statements is untrue?

A. Roughage takes a long time to digest.
B. Birds eat large quantities at one time so that they can fly long distances.
C. Cows do not have upper teeth.
D. In pseudo-ruminants, roughage is digested in the cecum.

Answer

B

The acidic nature of chyme is neutralized by _____.

A. potassium hydroxide
B. sodium hydroxide
C. bicarbonates
D. vinegar

Answer

C

The digestive juices from the liver are delivered to the _____.

A. stomach
B. liver
C. duodenum
D. colon

Answer

C

Free Response

How does the polygastric digestive system aid in digesting roughage?

Answer

Animals with a polygastric digestive system have a multi-chambered stomach. The four compartments of the stomach are called the rumen, reticulum, omasum, and abomasum. These chambers contain many microbes that break down the cellulose and ferment the ingested food. The abomasum is the “true” stomach and is the equivalent of a monogastric stomach chamber where gastric juices are secreted. The four-compartment gastric chamber provides larger space and the microbial support necessary for ruminants to digest plant material.

How do birds digest their food in the absence of teeth?

Answer

Birds have a stomach chamber called a gizzard. Here, the food is stored, soaked, and ground into finer particles, often using pebbles. Once this process is complete, the digestive juices take over in the proventriculus and continue the digestive process.

What is the role of the accessory organs in digestion?

Answer

Accessory organs play an important role in producing and delivering digestive juices to the intestine during digestion and absorption. Specifically, the salivary glands, liver, pancreas, and gallbladder play important roles. Malfunction of any of these organs can lead to disease states.

Explain how the villi and microvilli aid in absorption.

Answer

The villi and microvilli are folds on the surface of the small intestine. These folds increase the surface area of the intestine and provide more area for the absorption of nutrients.

34.2: Nutrition and Energy Production

Given the diversity of animal life on our planet, it is not surprising that the animal diet would also vary substantially. The animal diet is the source of materials needed for building DNA and other complex molecules needed for growth, maintenance, and reproduction; collectively these processes are called biosynthesis. The diet is also the source of materials for ATP production in the cells. The diet must be balanced to provide the minerals and vitamins that are required for cellular function.

Review Questions

Which of the following statements is not true?

A. Essential nutrients can be synthesized by the body.
B. Vitamins are required in small quantities for bodily function.
C. Some amino acids can be synthesized by the body, while others need to be obtained from diet.
D. Vitamins come in two categories: fat-soluble and water-soluble.

Answer

A

Which of the following is a water-soluble vitamin?

A. vitamin A
B. vitamin E
C. vitamin K
D. vitamin C

Answer

D

What is the primary fuel for the body?

A. carbohydrates
B. lipids
C. protein
D. glycogen

Answer

A

Excess glucose is stored as _____.

A. fat
B. glucagon
C. glycogen
D. it is not stored in the body

Answer

C

Free Response

What are essential nutrients?

Answer

Essential nutrients are those nutrients that must be obtained from the diet because they cannot be produced by the body. Vitamins and minerals are examples of essential nutrients.

What is the role of minerals in maintaining good health?

Answer

Minerals—such as potassium, sodium, and calcium—are required for the functioning of many cellular processes, including muscle contraction and nerve conduction. While minerals are required in trace amounts, not having minerals in the diet can be potentially harmful.

Discuss why obesity is a growing epidemic.

Answer

In the United States, obesity, particularly childhood obesity, is a growing concern. Some of the contributors to this situation include sedentary lifestyles and consuming more processed foods and less fruits and vegetables. As a result, even young children who are obese can face health concerns.

There are several nations where malnourishment is a common occurrence. What may be some of the health challenges posed by malnutrition?

Answer

Malnutrition, often in the form of not getting enough calories or not enough of the essential nutrients, can have severe consequences. Many malnourished children have vision and dental problems, and over the years may develop many serious health problems.

34.3: Digestive System Processes

Obtaining nutrition and energy from food is a multi-step process. For true animals, the first step is ingestion, the act of taking in food. This is followed by digestion, absorption, and elimination. In the following sections, each of these steps will be discussed in detail.

Review Questions

Where does the majority of protein digestion take place?

A. stomach
B. duodenum
C. mouth
D. jejunum

Answer

A

Lipases are enzymes that break down _____.

A. disaccharides
B. lipids
C. proteins
D. cellulose

Answer

B

Free Response

Explain why some dietary lipid is a necessary part of a balanced diet.

Answer

Lipids add flavor to food and promote a sense of satiety or fullness. Fatty foods are sources of high energy; one gram of lipid contains nine calories. Lipids are also required in the diet to aid the absorption of lipid-soluble vitamins and for the production of lipid-soluble hormones.

34.4: Digestive System Regulation

The brain is the control center for the sensation of hunger and satiety. The functions of the digestive system are regulated through neural and hormonal responses.

Review Questions

Which hormone controls the release of bile from the gallbladder

A. pepsin
B. amylase
C. CCK
D. gastrin

Answer

C

Which hormone stops acid secretion in the stomach?

A. gastrin
B. somatostatin
C. gastric inhibitory peptide
D. CCK

Answer

B

Free Response

Describe how hormones regulate digestion.

Answer

Hormones control the different digestive enzymes that are secreted in the stomach and the intestine during the process of digestion and absorption. For example, the hormone gastrin stimulates stomach acid secretion in response to food intake. The hormone somatostatin stops the release of stomach acid.

Describe one or more scenarios where loss of hormonal regulation of digestion can lead to diseases.

Answer

There are many cases where loss of hormonal regulation can lead to illnesses. For example, the bilirubin produced by the breakdown of red blood cells is converted to bile by the liver. When there is malfunction of this process, there is excess bilirubin in the blood and bile levels are low. As a result, the body struggles with dealing with fatty food. This is why a patient suffering from jaundice is asked to eat a diet with almost zero fat.

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CHAPTER OVERVIEW

3: The Excretory System

3.1: Prelude to Osmotic Regulation and Excretion
3.2: Osmoregulation and Osmotic Balance
3.3: The Kidneys and Osmoregulatory Organs
3.4: Excretion Systems
3.5: Nitrogenous Wastes
3.6: Hormonal Control of Osmoregulatory Functions

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3.1: Prelude to Osmotic Regulation and Excretion



Figure 3.1.1: Just as humans recycle what we can and dump the remains into landfills, our bodies use and recycle what they can and excrete the remaining waste products. Our bodies' complex systems have developed ways to treat waste and maintain a balanced internal environment. (credit: modification of work by Redwin Law)

The daily intake recommendation for human water consumption is eight to ten glasses of water. In order to achieve a healthy balance, the human body should excrete the eight to ten glasses of water every day. This occurs via the processes of urination, defecation, sweating and, to a small extent, respiration. The organs and tissues of the human body are soaked in fluids that are maintained at constant temperature, pH, and solute concentration, all crucial elements of homeostasis. The solutes in body fluids are mainly mineral salts and sugars, and osmotic regulation is the process by which the mineral salts and water are kept in balance. Osmotic homeostasis is maintained despite the influence of external factors like temperature, diet, and weather conditions.

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3.2: Osmoregulation and Osmotic Balance

Skills to Develop

- Define osmosis and explain its role within molecules
- Explain why osmoregulation and osmotic balance are important body functions
- Describe active transport mechanisms
- Explain osmolarity and the way in which it is measured
- Describe osmoregulators or osmoconformers and how these tools allow animals to adapt to different environments

Osmosis is the diffusion of water across a membrane in response to osmotic pressure caused by an imbalance of molecules on either side of the membrane. Osmoregulation is the process of maintenance of salt and water balance (osmotic balance) across membranes within the body's fluids, which are composed of water, plus electrolytes and non-electrolytes. An electrolyte is a solute that dissociates into ions when dissolved in water. A non-electrolyte, in contrast, doesn't dissociate into ions during water dissolution. Both electrolytes and non-electrolytes contribute to the osmotic balance. The body's fluids include blood plasma, the cytosol within cells, and interstitial fluid, the fluid that exists in the spaces between cells and tissues of the body. The membranes of the body (such as the pleural, serous, and cell membranes) are semi-permeable membranes. Semi-permeable membranes are permeable (or permissive) to certain types of solutes and water. Solutions on two sides of a semi-permeable membrane tend to equalize in solute concentration by movement of solutes and/or water across the membrane. As seen in Figure 3.2.1, a cell placed in water tends to swell due to gain of water from the hypotonic or "low salt" environment. A cell placed in a solution with higher salt concentration, on the other hand, tends to make the membrane shrivel up due to loss of water into the hypertonic or "high salt" environment. Isotonic cells have an equal concentration of solutes inside and outside the cell; this equalizes the osmotic pressure on either side of the cell membrane which is a semi-permeable membrane.

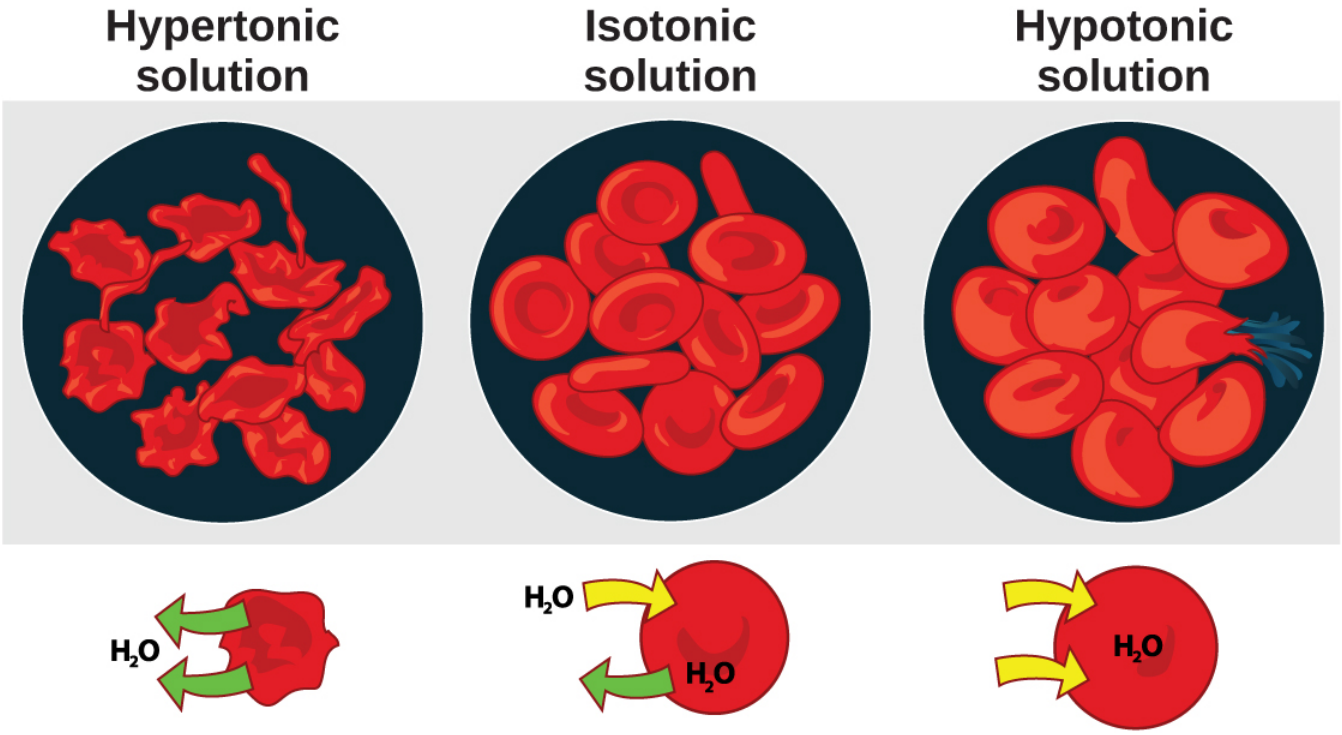


Figure 3.2.1: Cells placed in a hypertonic environment tend to shrink due to loss of water. In a hypotonic environment, cells tend to swell due to intake of water. The blood maintains an isotonic environment so that cells neither shrink nor swell. (credit: Mariana Ruiz Villareal)

The body does not exist in isolation. There is a constant input of water and electrolytes into the system. While osmoregulation is achieved across membranes within the body, excess electrolytes and wastes are transported to the kidneys and excreted, helping to maintain osmotic balance.

Need for Osmoregulation

Biological systems constantly interact and exchange water and nutrients with the environment by way of consumption of food and water and through excretion in the form of sweat, urine, and feces. Without a mechanism to regulate osmotic pressure, or when a disease damages this mechanism, there is a tendency to accumulate toxic waste and water, which can have dire consequences.

Mammalian systems have evolved to regulate not only the overall osmotic pressure across membranes, but also specific concentrations of important electrolytes in the three major fluid compartments: blood plasma, extracellular fluid, and intracellular fluid. Since osmotic pressure is regulated by the movement of water across membranes, the volume of the fluid compartments can also change temporarily. Because blood plasma is one of the fluid components, osmotic pressures have a direct bearing on blood pressure.

Transport of Electrolytes across Cell Membranes

Electrolytes, such as sodium chloride, ionize in water, meaning that they dissociate into their component ions. In water, sodium chloride (NaCl), dissociates into the sodium ion (Na^+) and the chloride ion ($Cl^–$). The most important ions, whose concentrations are very closely regulated in body fluids, are the cations sodium (Na^+), potassium (K^+), calcium (Ca^{+2}), magnesium (Mg^{+2}), and the anions chloride (Cl^-), carbonate (CO_3^{-2}), bicarbonate (HCO_3^-), and phosphate(PO_3^-). Electrolytes are lost from the body during urination and perspiration. For this reason, athletes are encouraged to replace electrolytes and fluids during periods of increased activity and perspiration.

Osmotic pressure is influenced by the concentration of solutes in a solution. It is directly proportional to the number of solute atoms or molecules and not dependent on the size of the solute molecules. Because electrolytes dissociate into their component ions, they, in essence, add more solute particles into the solution and have a greater effect on osmotic pressure, per mass than compounds that do not dissociate in water, such as glucose.

Water can pass through membranes by passive diffusion. If electrolyte ions could passively diffuse across membranes, it would be impossible to maintain specific concentrations of ions in each fluid compartment therefore they require special mechanisms to cross the semi-permeable membranes in the body. This movement can be accomplished by facilitated diffusion and active transport. Facilitated diffusion requires protein-based channels for moving the solute. Active transport requires energy in the form of ATP conversion, carrier proteins, or pumps in order to move ions against the concentration gradient.

Concept of Osmolality and Milliequivalent

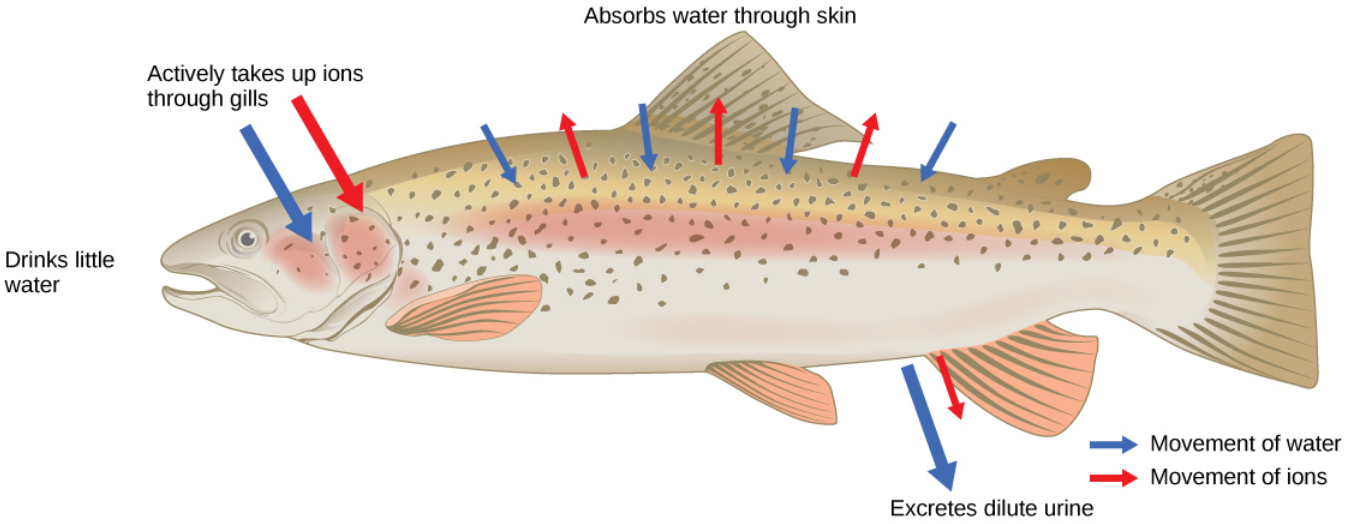
In order to calculate osmotic pressure, it is necessary to understand how solute concentrations are measured. The unit for measuring solutes is the mole. One mole is defined as the gram molecular weight of the solute. For example, the molecular weight of sodium chloride is 58.44. Thus, one mole of sodium chloride weighs 58.44 grams. The molarity of a solution is the number of moles of solute per liter of solution. The molality of a solution is the number of moles of solute per kilogram of solvent. If the solvent is water, one kilogram of water is equal to one liter of water. While molarity and molality are used to express the concentration of solutions, electrolyte concentrations are usually expressed in terms of milliequivalents per liter (mEq/L): the mEq/L is equal to the ion concentration (in millimoles) multiplied by the number of electrical charges on the ion. The unit of milliequivalent takes into consideration the ions present in the solution (since electrolytes form ions in aqueous solutions) and the charge on the ions.

Thus, for ions that have a charge of one, one milliequivalent is equal to one millimole. For ions that have a charge of two (like calcium), one milliequivalent is equal to 0.5 millimoles. Another unit for the expression of electrolyte concentration is the milliosmole (mOsm), which is the number of milliequivalents of solute per kilogram of solvent. Body fluids are usually maintained within the range of 280 to 300 mOsm.

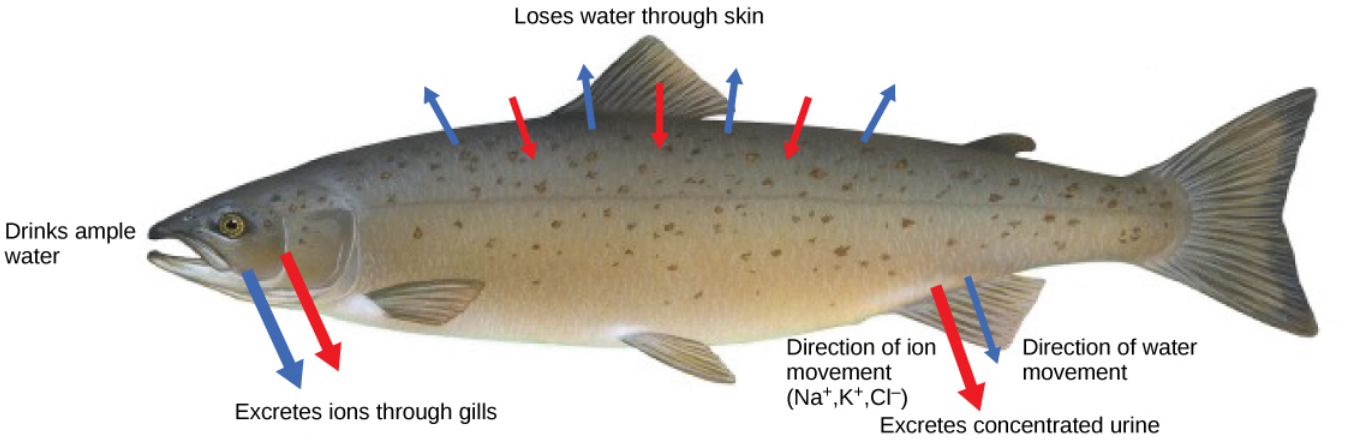
Osmoregulators and Osmoconformers

Persons lost at sea without any fresh water to drink are at risk of severe dehydration because the human body cannot adapt to drinking seawater, which is hypertonic in comparison to body fluids. Organisms such as goldfish that can tolerate only a relatively narrow range of salinity are referred to as stenohaline. About 90 percent of all bony fish are restricted to either freshwater or seawater. They are incapable of osmotic regulation in the opposite environment. It is possible, however, for a few fishes like salmon to spend part of their life in fresh water and part in sea water. Organisms like the salmon and molly that can tolerate a relatively wide range of salinity are referred to as euryhaline organisms. This is possible because some fish have evolved

osmoregulatory mechanisms to survive in all kinds of aquatic environments. When they live in fresh water, their bodies tend to take up water because the environment is relatively hypotonic, as illustrated in Figure 3.2.2a. In such hypotonic environments, these fish do not drink much water. Instead, they pass a lot of very dilute urine, and they achieve electrolyte balance by active transport of salts through the gills. When they move to a hypertonic marine environment, these fish start drinking sea water; they excrete the excess salts through their gills and their urine, as illustrated in Figure 3.2.2b. Most marine invertebrates, on the other hand, may be isotonic with sea water (osmoconformers). Their body fluid concentrations conform to changes in seawater concentration. Cartilaginous fishes' salt composition of the blood is similar to bony fishes; however, the blood of sharks contains the organic compounds urea and trimethylamine oxide (TMAO). This does not mean that their electrolyte composition is similar to that of sea water. They achieve isotonicity with the sea by storing large concentrations of urea. These animals that secrete urea are called ureotelic animals. TMAO stabilizes proteins in the presence of high urea levels, preventing the disruption of peptide bonds that would occur in other animals exposed to similar levels of urea. Sharks are cartilaginous fish with a rectal gland to secrete salt and assist in osmoregulation.



(a) Osmoregulation in a freshwater environment



(b) Osmoregulation in a saltwater environment

Figure 3.2.2: Fish are osmoregulators, but must use different mechanisms to survive in (a) freshwater or (b) saltwater environments. (credit: modification of work by Duane Raver, NOAA)

Career Connection: Dialysis Technician

Dialysis is a medical process of removing wastes and excess water from the blood by diffusion and ultrafiltration. When kidney function fails, dialysis must be done to artificially rid the body of wastes. This is a vital process to keep patients alive.

In some cases, the patients undergo artificial dialysis until they are eligible for a kidney transplant. In others who are not candidates for kidney transplants, dialysis is a life-long necessity.

Dialysis technicians typically work in hospitals and clinics. While some roles in this field include equipment development and maintenance, most dialysis technicians work in direct patient care. Their on-the-job duties, which typically occur under the direct supervision of a registered nurse, focus on providing dialysis treatments. This can include reviewing patient history and current condition, assessing and responding to patient needs before and during treatment, and monitoring the dialysis process. Treatment may include taking and reporting a patient's vital signs and preparing solutions and equipment to ensure accurate and sterile procedures.

Summary

Solute concentrations across a semi-permeable membranes influence the movement of water and solutes across the membrane. It is the number of solute molecules and not the molecular size that is important in osmosis. Osmoregulation and osmotic balance are important bodily functions, resulting in water and salt balance. Not all solutes can pass through a semi-permeable membrane. Osmosis is the movement of water across the membrane. Osmosis occurs to equalize the number of solute molecules across a semi-permeable membrane by the movement of water to the side of higher solute concentration. Facilitated diffusion utilizes protein channels to move solute molecules from areas of higher to lower concentration while active transport mechanisms are required to move solutes against concentration gradients. Osmolarity is measured in units of milliequivalents or milliosmoles, both of which take into consideration the number of solute particles and the charge on them. Fish that live in fresh water or saltwater adapt by being osmoregulators or osmoconformers.

Glossary

electrolyte
: solute that breaks down into ions when dissolved in water

molality
: number of moles of solute per kilogram of solvent

molarity
: number of moles of solute per liter of solution

mole
: gram equivalent of the molecular weight of a substance

non-electrolyte
: solute that does not break down into ions when dissolved in water

osmoconformer
: organism that changes its tonicity based on its environment

osmoregulation
: mechanism by which water and solute concentrations are maintained at desired levels

osmoregulator
: organism that maintains its tonicity irrespective of its environment

osmotic balance
: balance of the amount of water and salt input and output to and from a biological system without disturbing the desired osmotic pressure and solute concentration in every compartment

osmotic pressure
: pressure exerted on a membrane to equalize solute concentration on either side

semi-permeable membrane

membrane that allows only certain solutes to pass through

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3.3: The Kidneys and Osmoregulatory Organs

Skills to Develop

- Explain how the kidneys serve as the main osmoregulatory organs in mammalian systems
- Describe the structure of the kidneys and the functions of the parts of the kidney
- Describe how the nephron is the functional unit of the kidney and explain how it actively filters blood and generates urine
- Detail the three steps in the formation of urine: glomerular filtration, tubular reabsorption, and tubular secretion

Although the kidneys are the major osmoregulatory organ, the skin and lungs also play a role in the process. Water and electrolytes are lost through sweat glands in the skin, which helps moisturize and cool the skin surface, while the lungs expel a small amount of water in the form of mucous secretions and via evaporation of water vapor.

Kidneys: The Main Osmoregulatory Organ

The kidneys, illustrated in Figure 3.3.1, are a pair of bean-shaped structures that are located just below and posterior to the liver in the peritoneal cavity. The adrenal glands sit on top of each kidney and are also called the suprarenal glands. Kidneys filter blood and purify it. All the blood in the human body is filtered many times a day by the kidneys; these organs use up almost 25 percent of the oxygen absorbed through the lungs to perform this function. Oxygen allows the kidney cells to efficiently manufacture chemical energy in the form of ATP through aerobic respiration. The filtrate coming out of the kidneys is called urine.

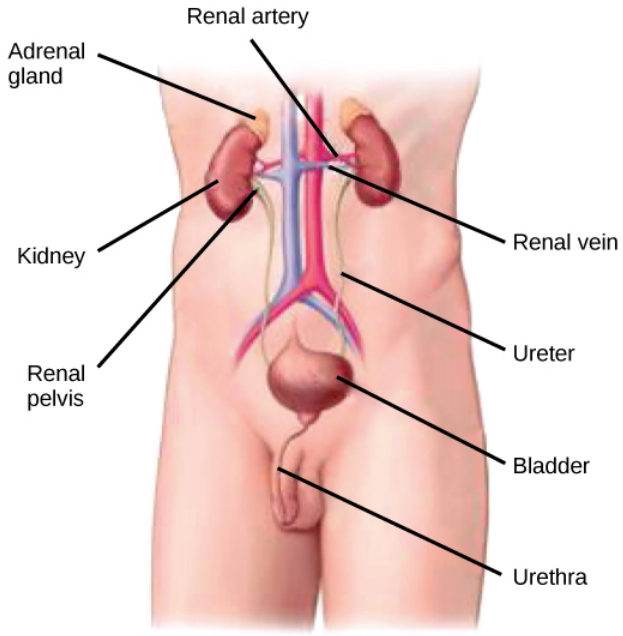


Figure 3.3.1: Kidneys filter the blood, producing urine that is stored in the bladder prior to elimination through the urethra. (credit: modification of work by NCI)

Kidney Structure

Externally, the kidneys are surrounded by three layers, illustrated in Figure 3.3.2. The outermost layer is a tough connective tissue layer called the renal fascia. The second layer is called the perirenal fat capsule, which helps anchor the kidneys in place. The third and innermost layer is the renal capsule. Internally, the kidney has three regions—an outer cortex, a medulla in the middle, and the renal pelvis in the region called the hilum of the kidney. The hilum is the concave part of the bean-shape where blood vessels and nerves enter and exit the kidney; it is also the point of exit for the ureters. The renal cortex is granular due to the presence of nephrons—the functional unit of the kidney. The medulla consists of multiple pyramidal tissue masses, called the renal pyramids. In between the pyramids are spaces called renal columns through which the blood vessels pass. The tips of the pyramids, called renal papillae, point toward the renal pelvis. There are, on average, eight renal pyramids in each kidney. The renal pyramids along with the adjoining cortical region are called the lobes of the kidney. The renal pelvis leads to the ureter on the outside of the kidney.

On the inside of the kidney, the renal pelvis branches out into two or three extensions called the major calyces, which further branch into the minor calyces. The ureters are urine-bearing tubes that exit the kidney and empty into the urinary bladder.

Art Connection

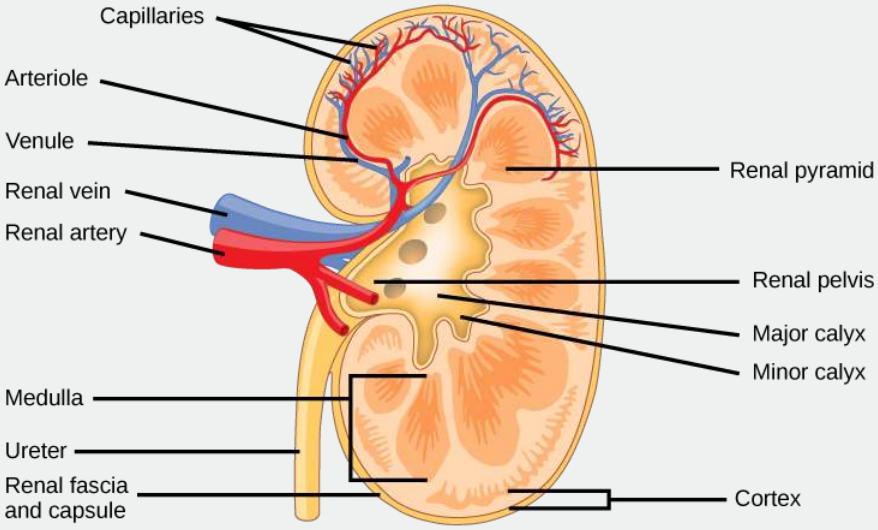


Figure 3.3.2: The internal structure of the kidney is shown. (credit: modification of work by NCI)

Which of the following statements about the kidney is false?

A. The renal pelvis drains into the ureter.
B. The renal pyramids are in the medulla.
C. The cortex covers the capsule.
D. Nephrons are in the renal cortex.

Because the kidney filters blood, its network of blood vessels is an important component of its structure and function. The arteries, veins, and nerves that supply the kidney enter and exit at the renal hilum. Renal blood supply starts with the branching of the aorta into the renal arteries (which are each named based on the region of the kidney they pass through) and ends with the exiting of the renal veins to join the inferior vena cava. The renal arteries split into several segmental arteries upon entering the kidneys. Each segmental artery splits further into several interlobar arteries and enters the renal columns, which supply the renal lobes. The interlobar arteries split at the junction of the renal cortex and medulla to form the arcuate arteries. The arcuate “bow shaped” arteries form arcs along the base of the medullary pyramids. Cortical radiate arteries, as the name suggests, radiate out from the arcuate arteries. The cortical radiate arteries branch into numerous afferent arterioles, and then enter the capillaries supplying the nephrons. Veins trace the path of the arteries and have similar names, except there are no segmental veins.

As mentioned previously, the functional unit of the kidney is the nephron, illustrated in Figure 3.3.3. Each kidney is made up of over one million nephrons that dot the renal cortex, giving it a granular appearance when sectioned sagittally. There are two types of nephrons—cortical nephrons (85 percent), which are deep in the renal cortex, and juxtamedullary nephrons (15 percent), which lie in the renal cortex close to the renal medulla. A nephron consists of three parts—a renal corpuscle, a renal tubule, and the associated capillary network, which originates from the cortical radiate arteries.

Art Connection

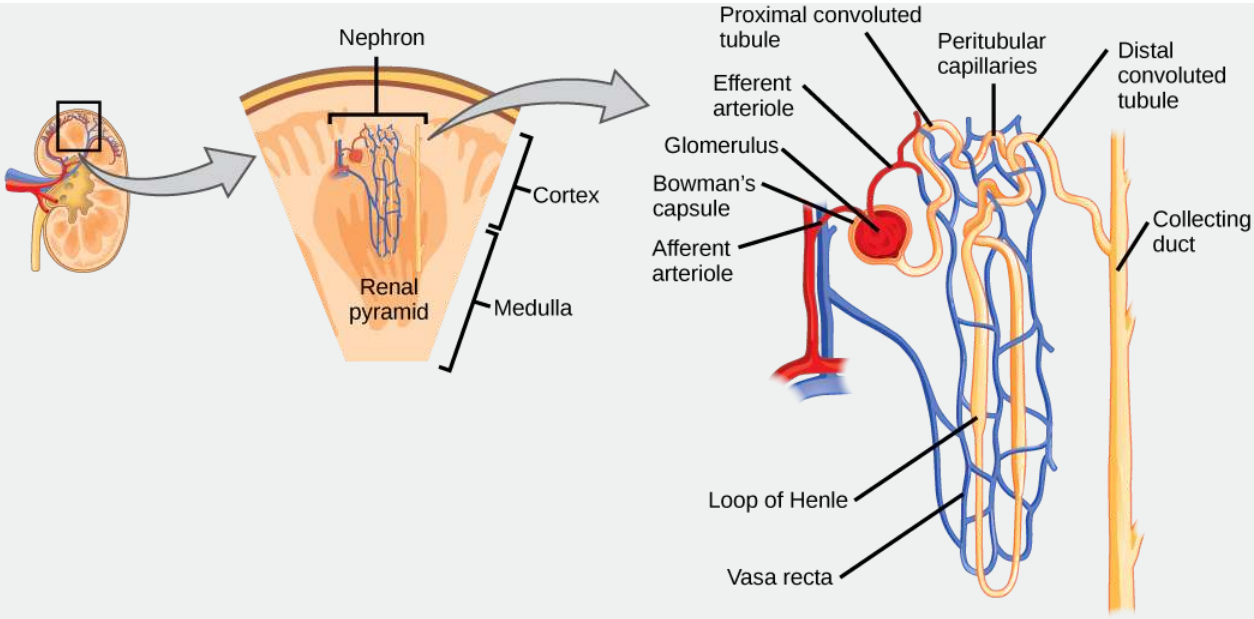


Figure 3.3.3: The nephron is the functional unit of the kidney. The glomerulus and convoluted tubules are located in the kidney cortex, while collecting ducts are located in the pyramids of the medulla. (credit: modification of work by NIDDK)

Which of the following statements about the nephron is false?

A. The collecting duct empties into the distal convoluted tubule.
B. The Bowman's capsule surrounds the glomerulus.
C. The loop of Henle is between the proximal and distal convoluted tubules.
D. The loop of Henle empties into the distal convoluted tubule.

Renal Corpuscle

The renal corpuscle, located in the renal cortex, is made up of a network of capillaries known as the glomerulus and the capsule, a cup-shaped chamber that surrounds it, called the glomerular or Bowman's capsule.

Renal Tubule

The renal tubule is a long and convoluted structure that emerges from the glomerulus and can be divided into three parts based on function. The first part is called the proximal convoluted tubule (PCT) due to its proximity to the glomerulus; it stays in the renal cortex. The second part is called the loop of Henle, or nephritic loop, because it forms a loop (with descending and ascending limbs) that goes through the renal medulla. The third part of the renal tubule is called the distal convoluted tubule (DCT) and this part is also restricted to the renal cortex. The DCT, which is the last part of the nephron, connects and empties its contents into collecting ducts that line the medullary pyramids. The collecting ducts amass contents from multiple nephrons and fuse together as they enter the papillae of the renal medulla.

Capillary Network within the Nephron

The capillary network that originates from the renal arteries supplies the nephron with blood that needs to be filtered. The branch that enters the glomerulus is called the afferent arteriole. The branch that exits the glomerulus is called the efferent arteriole. Within the glomerulus, the network of capillaries is called the glomerular capillary bed. Once the efferent arteriole exits the glomerulus, it forms the peritubular capillary network, which surrounds and interacts with parts of the renal tubule. In cortical nephrons, the peritubular capillary network surrounds the PCT and DCT. In juxtamedullary nephrons, the peritubular capillary network forms a network around the loop of Henle and is called the vasa recta.

Kidney Function and Physiology

Kidneys filter blood in a three-step process. First, the nephrons filter blood that runs through the capillary network in the glomerulus. Almost all solutes, except for proteins, are filtered out into the glomerulus by a process called glomerular filtration.

Second, the filtrate is collected in the renal tubules. Most of the solutes get reabsorbed in the PCT by a process called tubular reabsorption. In the loop of Henle, the filtrate continues to exchange solutes and water with the renal medulla and the peritubular capillary network. Water is also reabsorbed during this step. Then, additional solutes and wastes are secreted into the kidney tubules during tubular secretion, which is, in essence, the opposite process to tubular reabsorption. The collecting ducts collect filtrate coming from the nephrons and fuse in the medullary papillae. From here, the papillae deliver the filtrate, now called urine, into the minor calyces that eventually connect to the ureters through the renal pelvis. This entire process is illustrated in Figure 3.3.4.

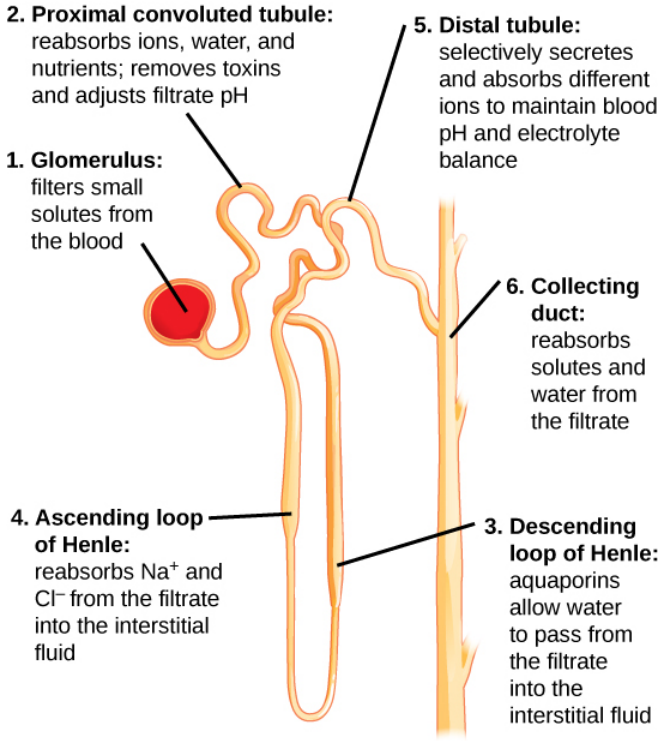


Figure 3.3.4: Each part of the nephron performs a different function in filtering waste and maintaining homeostatic balance. (1) The glomerulus forces small solutes out of the blood by pressure. (2) The proximal convoluted tubule reabsorbs ions, water, and nutrients from the filtrate into the interstitial fluid, and actively transports toxins and drugs from the interstitial fluid into the filtrate. The proximal convoluted tubule also adjusts blood pH by selectively secreting ammonia (NH_3) into the filtrate, where it reacts with H^+ to form NH_4^+. The more acidic the filtrate, the more ammonia is secreted. (3) The descending loop of Henle is lined with cells containing aquaporins that allow water to pass from the filtrate into the interstitial fluid. (4) In the thin part of the ascending loop of Henle, Na^+ and Cl^- ions diffuse into the interstitial fluid. In the thick part, these same ions are actively transported into the interstitial fluid. Because salt but not water is lost, the filtrate becomes more dilute as it travels up the limb. (5) In the distal convoluted tubule, K^+ and H^+ ions are selectively secreted into the filtrate, while Na^+, Cl^-, and HCO_3^- ions are reabsorbed to maintain pH and electrolyte balance in the blood. (6) The collecting duct reabsorbs solutes and water from the filtrate, forming dilute urine. (credit: modification of work by NIDDK)

Glomerular Filtration

Glomerular filtration filters out most of the solutes due to high blood pressure and specialized membranes in the afferent arteriole. The blood pressure in the glomerulus is maintained independent of factors that affect systemic blood pressure. The “leaky” connections between the endothelial cells of the glomerular capillary network allow solutes to pass through easily. All solutes in the glomerular capillaries, except for macromolecules like proteins, pass through by passive diffusion. There is no energy requirement at this stage of the filtration process. Glomerular filtration rate (GFR) is the volume of glomerular filtrate formed per minute by the kidneys. GFR is regulated by multiple mechanisms and is an important indicator of kidney function.

Link to Learning

To learn more about the vascular system of kidneys, click through this review and the steps of blood flow.

Tubular Reabsorption and Secretion

Tubular reabsorption occurs in the PCT part of the renal tubule. Almost all nutrients are reabsorbed, and this occurs either by passive or active transport. Reabsorption of water and some key electrolytes are regulated and can be influenced by hormones. Sodium (Na^+) is the most abundant ion and most of it is reabsorbed by active transport and then transported to the peritubular capillaries. Because Na^+ is actively transported out of the tubule, water follows it to even out the osmotic pressure. Water is also independently reabsorbed into the peritubular capillaries due to the presence of aquaporins, or water channels, in the PCT. This occurs due to the low blood pressure and high osmotic pressure in the peritubular capillaries. However, every solute has a transport maximum and the excess is not reabsorbed.

In the loop of Henle, the permeability of the membrane changes. The descending limb is permeable to water, not solutes; the opposite is true for the ascending limb. Additionally, the loop of Henle invades the renal medulla, which is naturally high in salt concentration and tends to absorb water from the renal tubule and concentrate the filtrate. The osmotic gradient increases as it moves deeper into the medulla. Because two sides of the loop of Henle perform opposing functions, as illustrated in Figure 3.3.5, it acts as a countercurrent multiplier. The vasa recta around it acts as the countercurrent exchanger.

Art Connection

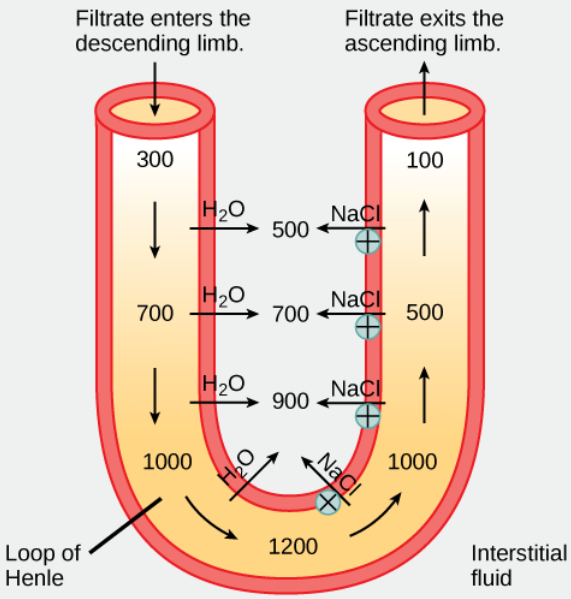


Figure 3.3.5: The loop of Henle acts as a countercurrent multiplier that uses energy to create concentration gradients. The descending limb is water permeable. Water flows from the filtrate to the interstitial fluid, so osmolality inside the limb increases as it descends into the renal medulla. At the bottom, the osmolality is higher inside the loop than in the interstitial fluid. Thus, as filtrate enters the ascending limb, Na^+ and Cl^- ions exit through ion channels present in the cell membrane. Further up, Na^+ is actively transported out of the filtrate and Cl^- follows. Osmolarity is given in units of milliosmoles per liter (mOsm/L).

Loop diuretics are drugs sometimes used to treat hypertension. These drugs inhibit the reabsorption of Na^+ and Cl^- ions by the ascending limb of the loop of Henle. A side effect is that they increase urination. Why do you think this is the case?

By the time the filtrate reaches the DCT, most of the urine and solutes have been reabsorbed. If the body requires additional water, all of it can be reabsorbed at this point. Further reabsorption is controlled by hormones, which will be discussed in a later section. Excretion of wastes occurs due to lack of reabsorption combined with tubular secretion. Undesirable products like metabolic wastes, urea, uric acid, and certain drugs, are excreted by tubular secretion. Most of the tubular secretion happens in the DCT, but some occurs in the early part of the collecting duct. Kidneys also maintain an acid-base balance by secreting excess H^+ ions.

Although parts of the renal tubules are named proximal and distal, in a cross-section of the kidney, the tubules are placed close together and in contact with each other and the glomerulus. This allows for exchange of chemical messengers between the different cell types. For example, the DCT ascending limb of the loop of Henle has masses of cells called macula densa, which are in contact with cells of the afferent arterioles called juxtaglomerular cells. Together, the macula densa and juxtaglomerular cells form the juxtaglomerular complex (JGC). The JGC is an endocrine structure that secretes the enzyme renin and the hormone erythropoietin. When hormones trigger the macula densa cells in the DCT due to variations in blood volume, blood pressure, or electrolyte balance, these cells can immediately communicate the problem to the capillaries in the afferent and efferent arterioles, which can constrict or relax to change the glomerular filtration rate of the kidneys.

Career Connection: Nephrologist

A nephrologist studies and deals with diseases of the kidneys—both those that cause kidney failure (such as diabetes) and the conditions that are produced by kidney disease (such as hypertension). Blood pressure, blood volume, and changes in electrolyte balance come under the purview of a nephrologist.

Nephrologists usually work with other physicians who refer patients to them or consult with them about specific diagnoses and treatment plans. Patients are usually referred to a nephrologist for symptoms such as blood or protein in the urine, very high blood pressure, kidney stones, or renal failure.

Nephrology is a subspecialty of internal medicine. To become a nephrologist, medical school is followed by additional training to become certified in internal medicine. An additional two or more years is spent specifically studying kidney disorders and their accompanying effects on the body.

Summary

The kidneys are the main osmoregulatory organs in mammalian systems; they function to filter blood and maintain the osmolarity of body fluids at 300 mOsm. They are surrounded by three layers and are made up internally of three distinct regions—the cortex, medulla, and pelvis.

The blood vessels that transport blood into and out of the kidneys arise from and merge with the aorta and inferior vena cava, respectively. The renal arteries branch out from the aorta and enter the kidney where they further divide into segmental, interlobar, arcuate, and cortical radiate arteries.

The nephron is the functional unit of the kidney, which actively filters blood and generates urine. The nephron is made up of the renal corpuscle and renal tubule. Cortical nephrons are found in the renal cortex, while juxtamedullary nephrons are found in the renal cortex close to the renal medulla. The nephron filters and exchanges water and solutes with two sets of blood vessels and the tissue fluid in the kidneys.

There are three steps in the formation of urine: glomerular filtration, which occurs in the glomerulus; tubular reabsorption, which occurs in the renal tubules; and tubular secretion, which also occurs in the renal tubules.

Art Connections

Figure 3.3.2: Which of the following statements about the kidney is false?

A. The renal pelvis drains into the ureter.
B. The renal pyramids are in the medulla.
C. The cortex covers the capsule.
D. Nephrons are in the renal cortex.

Answer

C

Figure 3.3.3: Which of the following statements about the nephron is false?

A. The collecting duct empties into the distal convoluted tubule.
B. The Bowman's capsule surrounds the glomerulus.
C. The loop of Henle is between the proximal and distal convoluted tubules.
D. The loop of Henle empties into the distal convoluted tubule.

Answer

A

Figure 3.3.5: Loop diuretics are drugs sometimes used to treat hypertension. These drugs inhibit the reabsorption of Na^+ and Cl^- ions by the ascending limb of the loop of Henle. A side effect is that they increase urination. Why do you think this is the case?

Answer

Loop diuretics decrease the excretion of salt into the renal medulla, thereby reducing its osmolality. As a result, less water is excreted into the medulla by the descending limb, and more water is excreted as urine.

Glossary

afferent arteriole
arteriole that branches from the cortical radiate artery and enters the glomerulus

arcuate artery
artery that branches from the interlobar artery and arches over the base of the renal pyramids

ascending limb
part of the loop of Henle that ascends from the renal medulla to the renal cortex

Bowman's capsule
structure that encloses the glomerulus

calyx
structure that connects the renal pelvis to the renal medulla

cortex (animal)
outer layer of an organ like the kidney or adrenal gland

cortical nephron
nephron that lies in the renal cortex

cortical radiate artery
artery that radiates from the arcuate arteries into the renal cortex

countercurrent exchanger
peritubular capillary network that allows exchange of solutes and water from the renal tubules

countercurrent multiplier
osmotic gradient in the renal medulla that is responsible for concentration of urine

descending limb
part of the loop of Henle that descends from the renal cortex into the renal medulla

distal convoluted tubule (DCT)
part of the renal tubule that is the most distant from the glomerulus

efferent arteriole
arteriole that exits from the glomerulus

glomerular filtration
filtration of blood in the glomerular capillary network into the glomerulus

glomerular filtration rate (GFR)
amount of filtrate formed by the glomerulus per minute

glomerulus (renal)
part of the renal corpuscle that contains the capillary network

hilum
region in the renal pelvis where blood vessels, nerves, and ureters bunch before entering or exiting the kidney

inferior vena cava
one of the main veins in the human body

interlobar artery
artery that branches from the segmental artery and travels in between the renal lobes

juxtaglomerular cell
cell in the afferent and efferent arterioles that responds to stimuli from the macula densa

juxtamedullary nephron
nephron that lies in the cortex but close to the renal medulla

kidney
organ that performs excretory and osmoregulatory functions

lobes of the kidney
renal pyramid along with the adjoining cortical region

loop of Henle
part of the renal tubule that loops into the renal medulla

macula densa
group of cells that senses changes in sodium ion concentration; present in parts of the renal tubule and collecting ducts

medulla
middle layer of an organ like the kidney or adrenal gland

nephron
functional unit of the kidney

perirenal fat capsule
fat layer that suspends the kidneys

peritubular capillary network
capillary network that surrounds the renal tubule after the efferent artery exits the glomerulus

proximal convoluted tubule (PCT)
part of the renal tubule that lies close to the glomerulus

renal artery
branch of the artery that enters the kidney

renal capsule
layer that encapsulates the kidneys

renal column
area of the kidney through which the interlobar arteries travel in the process of supplying blood to the renal lobes

renal corpuscle
glomerulus and the Bowman's capsule together

renal fascia
connective tissue that supports the kidneys

renal pelvis
region in the kidney where the calyces join the ureters

renal pyramid
conical structure in the renal medulla

renal tubule
tubule of the nephron that arises from the glomerulus

renal vein
branch of a vein that exits the kidney and joins the inferior vena cava

segmental artery
artery that branches from the renal artery

transport maximum
maximum amount of solute that can be transported out of the renal tubules during reabsorption

tubular reabsorption
reclamation of water and solutes that got filtered out in the glomerulus

tubular secretion
process of secretion of wastes that do not get reabsorbed

ureter
urine-bearing tube coming out of the kidney; carries urine to the bladder

urinary bladder
structure that the ureters empty the urine into; stores urine

urine
filtrate produced by kidneys that gets excreted out of the body

vasa recta
peritubular network that surrounds the loop of Henle of the juxtamedullary nephrons

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3.4: Excretion Systems

Skills to Develop

- Explain how vacuoles, present in microorganisms, work to excrete waste
- Describe the way in which flame cells and nephridia in worms perform excretory functions and maintain osmotic balance
- Explain how insects use Malpighian tubules to excrete wastes and maintain osmotic balance

Microorganisms and invertebrate animals use more primitive and simple mechanisms to get rid of their metabolic wastes than the mammalian system of kidney and urinary function. Three excretory systems evolved in organisms before complex kidneys: vacuoles, flame cells, and Malpighian tubules.

Contractile Vacuoles in Microorganisms

The most fundamental feature of life is the presence of a cell. In other words, a cell is the simplest functional unit of a life. Bacteria are unicellular, prokaryotic organisms that have some of the least complex life processes in place; however, prokaryotes such as bacteria do not contain membrane-bound vacuoles. The cells of microorganisms like bacteria, protozoa, and fungi are bound by cell membranes and use them to interact with the environment. Some cells, including some leucocytes in humans, are able to engulf food by endocytosis—the formation of vesicles by involution of the cell membrane within the cells. The same vesicles are able to interact and exchange metabolites with the intracellular environment. In some unicellular eukaryotic organisms such as the amoeba, shown in Figure 3.4.1, cellular wastes and excess water are excreted by exocytosis, when the contractile vacuoles merge with the cell membrane and expel wastes into the environment. Contractile vacuoles (CV) should not be confused with vacuoles, which store food or water.

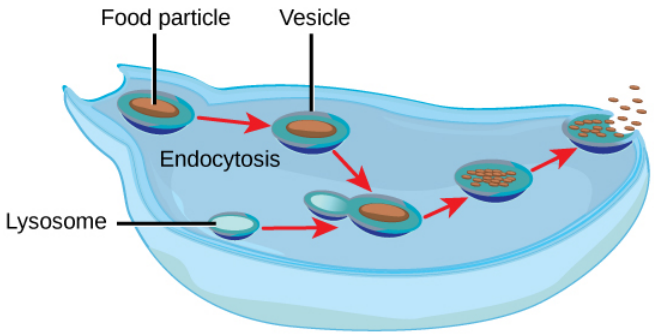


Figure 3.4.1: Some unicellular organisms, such as the amoeba, ingest food by endocytosis. The food vesicle fuses with a lysosome, which digests the food. Waste is excreted by exocytosis.

Flame Cells of Planaria and Nephridia of Worms

As multi-cellular systems evolved to have organ systems that divided the metabolic needs of the body, individual organs evolved to perform the excretory function. Planaria are flatworms that live in fresh water. Their excretory system consists of two tubules connected to a highly branched duct system. The cells in the tubules are called flame cells (or protonephridia) because they have a cluster of cilia that looks like a flickering flame when viewed under the microscope, as illustrated in Figure 3.4.2a. The cilia propel waste matter down the tubules and out of the body through excretory pores that open on the body surface; cilia also draw water from the interstitial fluid, allowing for filtration. Any valuable metabolites are recovered by reabsorption. Flame cells are found in flatworms, including parasitic tapeworms and free-living planaria. They also maintain the organism's osmotic balance.

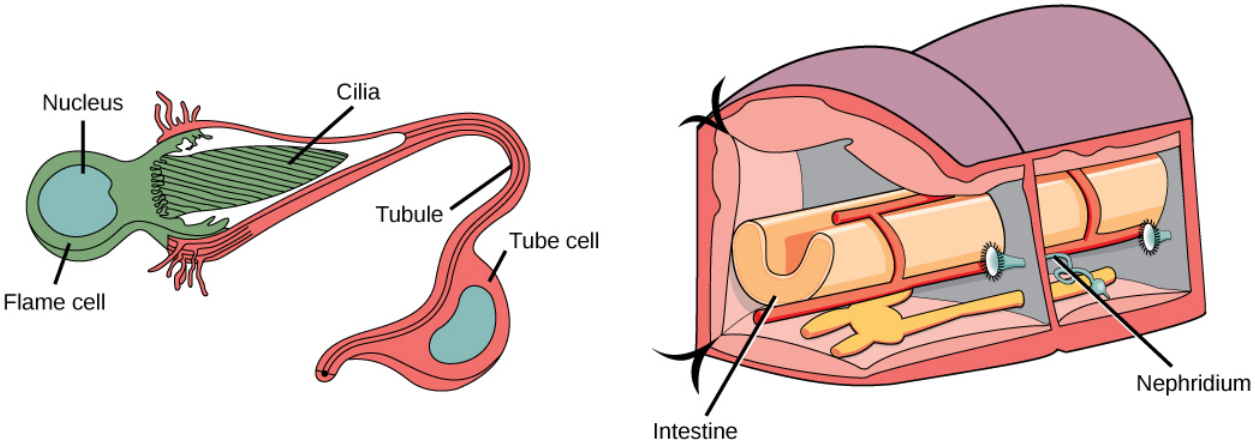


Figure 3.4.2: In the excretory system of the (a) planaria, cilia of flame cells propel waste through a tubule formed by a tube cell. Tubules are connected into branched structures that lead to pores located all along the sides of the body. The filtrate is secreted through these pores. In (b) annelids such as earthworms, nephridia filter fluid from the coelom, or body cavity. Beating cilia at the opening of the nephridium draw water from the coelom into a tubule. As the filtrate passes down the tubules, nutrients and other solutes are reabsorbed by capillaries. Filtered fluid containing nitrogenous and other wastes is stored in a bladder and then secreted through a pore in the side of the body.

Earthworms (annelids) have slightly more evolved excretory structures called nephridia, illustrated in Figure 3.4.2b. A pair of nephridia is present on each segment of the earthworm. They are similar to flame cells in that they have a tubule with cilia. Excretion occurs through a pore called the nephridiopore. They are more evolved than the flame cells in that they have a system for tubular reabsorption by a capillary network before excretion.

Malpighian Tubules of Insects

Malpighian tubules are found lining the gut of some species of arthropods, such as the bee illustrated in Figure 3.4.3. They are usually found in pairs and the number of tubules varies with the species of insect. Malpighian tubules are convoluted, which increases their surface area, and they are lined with microvilli for reabsorption and maintenance of osmotic balance. Malpighian tubules work cooperatively with specialized glands in the wall of the rectum. Body fluids are not filtered as in the case of nephridia; urine is produced by tubular secretion mechanisms by the cells lining the Malpighian tubules that are bathed in hemolymph (a mixture of blood and interstitial fluid that is found in insects and other arthropods as well as most mollusks). Metabolic wastes like uric acid freely diffuse into the tubules. There are exchange pumps lining the tubules, which actively transport H^+ ions into the cell and K^+ or Na^+ ions out; water passively follows to form urine. The secretion of ions alters the osmotic pressure which draws water, electrolytes, and nitrogenous waste (uric acid) into the tubules. Water and electrolytes are reabsorbed when these organisms are faced with low-water environments, and uric acid is excreted as a thick paste or powder. Not dissolving wastes in water helps these organisms to conserve water; this is especially important for life in dry environments.

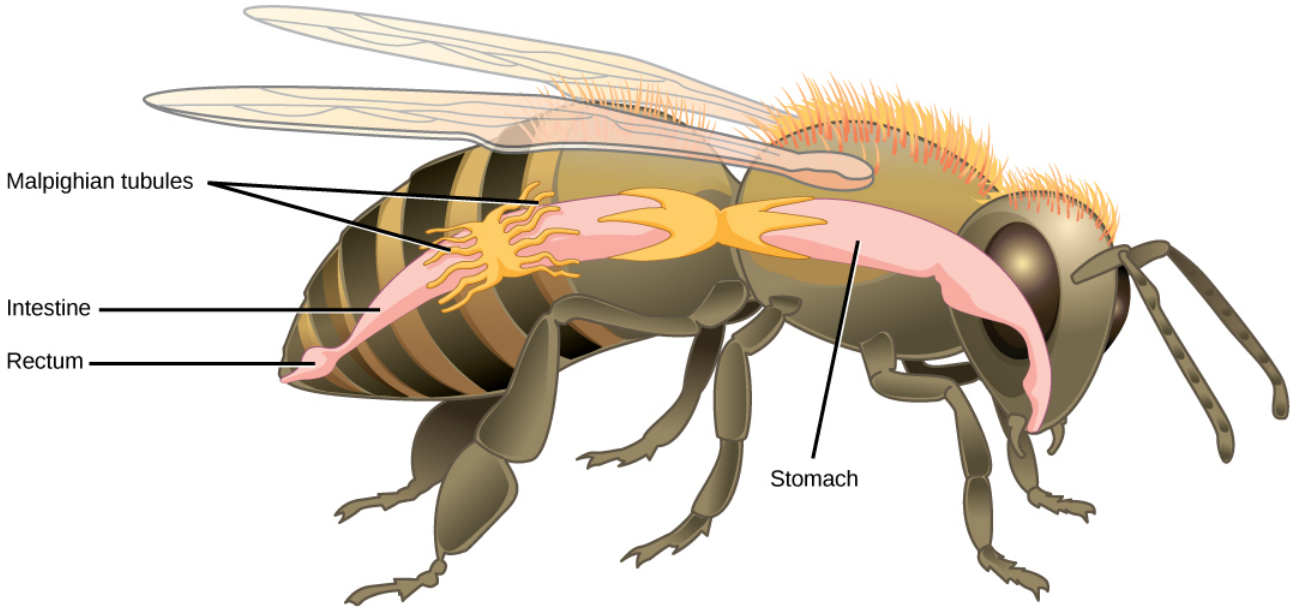


Figure 3.4.3: Malpighian tubules of insects and other terrestrial arthropods remove nitrogenous wastes and other solutes from the hemolymph. Na^+ and/or K^+ ions are actively transported into the lumen of the tubules. Water then enters the tubules via osmosis, forming urine. The urine passes through the intestine, and into the rectum. There, nutrients diffuse back into the hemolymph. Na^+ and/or K^+ ions are pumped into the hemolymph, and water follows. The concentrated waste is then excreted.

Link to Learning

Visit this site to see a dissected cockroach, including a close-up look at its Malpighian tubules.

Summary

Many systems have evolved for excreting wastes that are simpler than the kidney and urinary systems of vertebrate animals. The simplest system is that of contractile vacuoles present in microorganisms. Flame cells and nephridia in worms perform excretory functions and maintain osmotic balance. Some insects have evolved Malpighian tubules to excrete wastes and maintain osmotic balance.

Glossary

flame cell
(also, protonephridia) excretory cell found in flatworms

Malpighian tubule
excretory tubules found in arthropods

microvilli
cellular processes that increase the surface area of cells

nephridia
excretory structures found in annelids

nephridiopore

pore found at the end of nephridia

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3.5: Nitrogenous Wastes

Skills to Develop

- Compare and contrast the way in which aquatic animals and terrestrial animals can eliminate toxic ammonia from their systems
- Compare the major byproduct of ammonia metabolism in vertebrate animals to that of birds, insects, and reptiles

Of the four major macromolecules in biological systems, both proteins and nucleic acids contain nitrogen. During the catabolism, or breakdown, of nitrogen-containing macromolecules, carbon, hydrogen, and oxygen are extracted and stored in the form of carbohydrates and fats. Excess nitrogen is excreted from the body. Nitrogenous wastes tend to form toxic ammonia, which raises the pH of body fluids. The formation of ammonia itself requires energy in the form of ATP and large quantities of water to dilute it out of a biological system. Animals that live in aquatic environments tend to release ammonia into the water. Animals that excrete ammonia are said to be ammonotelic. Terrestrial organisms have evolved other mechanisms to excrete nitrogenous wastes. The animals must detoxify ammonia by converting it into a relatively nontoxic form such as urea or uric acid. Mammals, including humans, produce urea, whereas reptiles and many terrestrial invertebrates produce uric acid. Animals that secrete urea as the primary nitrogenous waste material are called ureotelic animals.

Nitrogenous Waste in Terrestrial Animals: The Urea Cycle

The urea cycle is the primary mechanism by which mammals convert ammonia to urea. Urea is made in the liver and excreted in urine. The overall chemical reaction by which ammonia is converted to urea is 2 NH_3 (ammonia) + CO_2 + 3 ATP + H_2O → H_2N-CO-NH_2 (urea) + 2 ADP + 4 P_i + AMP.

The urea cycle utilizes five intermediate steps, catalyzed by five different enzymes, to convert ammonia to urea, as shown in Figure 3.5.1. The amino acid L-ornithine gets converted into different intermediates before being regenerated at the end of the urea cycle. Hence, the urea cycle is also referred to as the ornithine cycle. The enzyme ornithine transcarbamylase catalyzes a key step in the urea cycle and its deficiency can lead to accumulation of toxic levels of ammonia in the body. The first two reactions occur in the mitochondria and the last three reactions occur in the cytosol. Urea concentration in the blood, called blood urea nitrogen or BUN, is used as an indicator of kidney function.

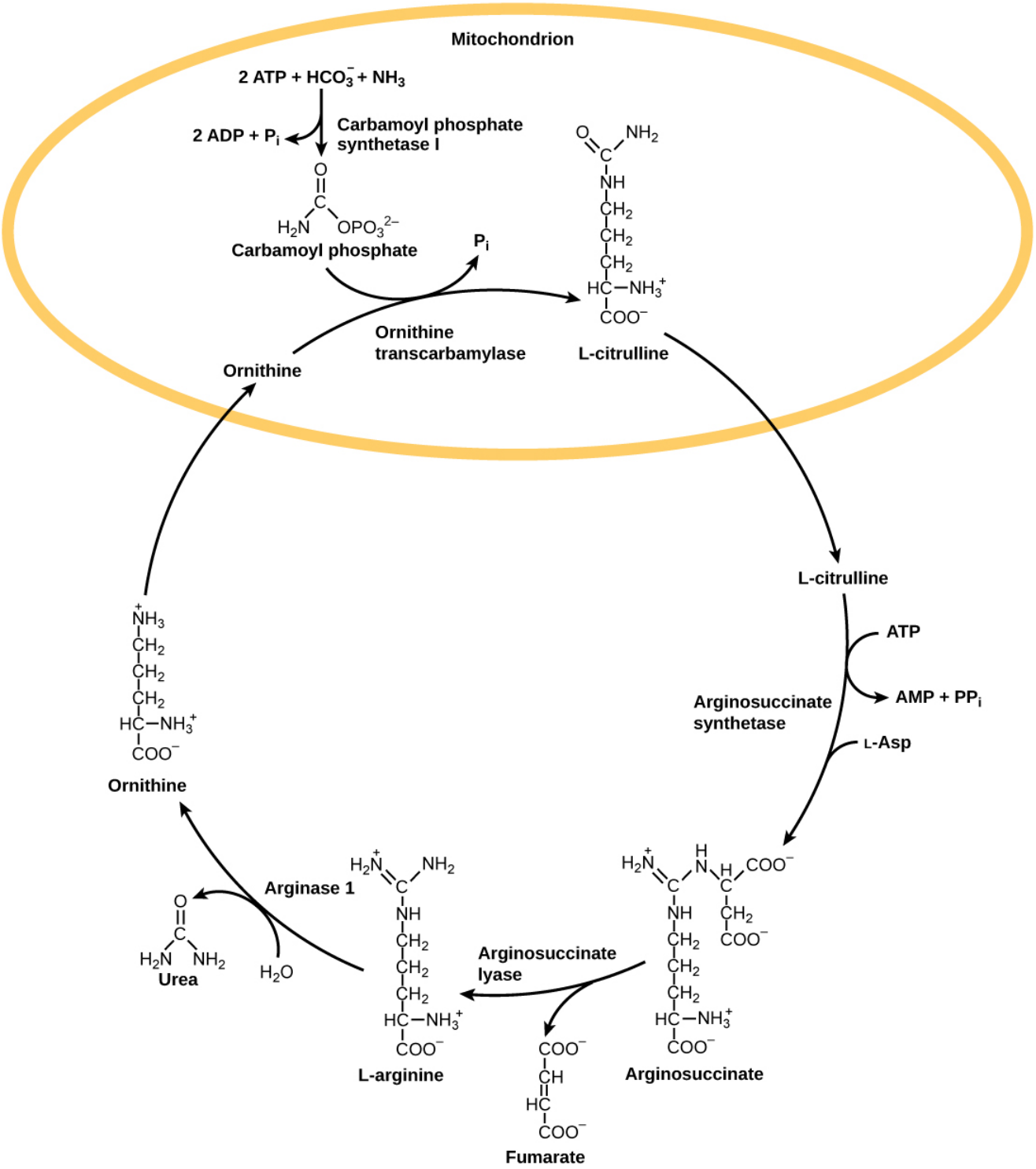


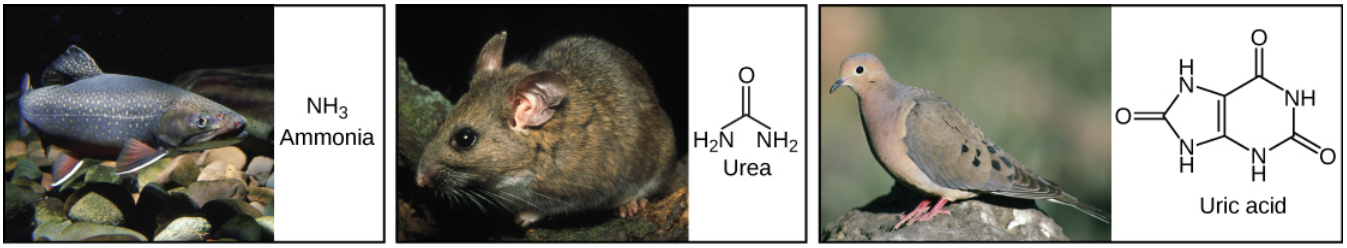
Figure 3.5.1: The urea cycle converts ammonia to urea.

Evolution Connection: Excretion of Nitrogenous Waste

The theory of evolution proposes that life started in an aquatic environment. It is not surprising to see that biochemical pathways like the urea cycle evolved to adapt to a changing environment when terrestrial life forms evolved. Arid conditions probably led to the evolution of the uric acid pathway as a means of conserving water.

Nitrogenous Waste in Birds and Reptiles: Uric Acid

Birds, reptiles, and most terrestrial arthropods convert toxic ammonia to uric acid or the closely related compound guanine (guano) instead of urea. Mammals also form some uric acid during breakdown of nucleic acids. Uric acid is a compound similar to purines found in nucleic acids. It is water insoluble and tends to form a white paste or powder; it is excreted by birds, insects, and reptiles. Conversion of ammonia to uric acid requires more energy and is much more complex than conversion of ammonia to urea Figure 3.5.2.



(a) Many invertebrates and aquatic species excrete ammonia.

(b) Mammals, many adult amphibians, and some marine species excrete urea.

(c) Insects, land snails, birds, and many reptiles excrete uric acid.

Figure 3.5.2: Nitrogenous waste is excreted in different forms by different species. These include (a) ammonia, (b) urea, and (c) uric acid. (credit a: modification of work by Eric Engbretson, USFWS; credit b: modification of work by B. "Moose" Peterson, USFWS; credit c: modification of work by Dave Menke, USFWS)

Everyday Connection: Gout

Mammals use uric acid crystals as an antioxidant in their cells. However, too much uric acid tends to form kidney stones and may also cause a painful condition called gout, where uric acid crystals accumulate in the joints, as illustrated in Figure 3.5.3. Food choices that reduce the amount of nitrogenous bases in the diet help reduce the risk of gout. For example, tea, coffee, and chocolate have purine-like compounds, called xanthines, and should be avoided by people with gout and kidney stones.



Figure 3.5.3: Gout causes the inflammation visible in this person's left big toe joint. (credit: "Gonzosft"/Wikimedia Commons)

Summary

Ammonia is the waste produced by metabolism of nitrogen-containing compounds like proteins and nucleic acids. While aquatic animals can easily excrete ammonia into their watery surroundings, terrestrial animals have evolved special mechanisms to eliminate the toxic ammonia from their systems. Urea is the major byproduct of ammonia metabolism in vertebrate animals. Uric acid is the major byproduct of ammonia metabolism in birds, terrestrial arthropods, and reptiles.

Glossary

ammonia

compound made of one nitrogen atom and three hydrogen atoms

ammonotelic

describes an animal that excretes ammonia as the primary waste material

antioxidant
agent that prevents cell destruction by reactive oxygen species

blood urea nitrogen (BUN)
estimate of urea in the blood and an indicator of kidney function

urea cycle
pathway by which ammonia is converted to urea

ureotelic
describes animals that secrete urea as the primary nitrogenous waste material

uric acid
byproduct of ammonia metabolism in birds, insects, and reptiles

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3.6: Hormonal Control of Osmoregulatory Functions

Skills to Develop

- Explain how hormonal cues help the kidneys synchronize the osmotic needs of the body
- Describe how hormones like epinephrine, norepinephrine, renin-angiotensin, aldosterone, anti-diuretic hormone, and atrial natriuretic peptide help regulate waste elimination, maintain correct osmolarity, and perform other osmoregulatory functions

While the kidneys operate to maintain osmotic balance and blood pressure in the body, they also act in concert with hormones. Hormones are small molecules that act as messengers within the body. Hormones are typically secreted from one cell and travel in the bloodstream to affect a target cell in another portion of the body. Different regions of the nephron bear specialized cells that have receptors to respond to chemical messengers and hormones. Table 3.6.1 summarizes the hormones that control the osmoregulatory functions.

Table 3.6.1**:** Hormones That Affect Osmoregulation

Hormone	Where produced	Function
Epinephrine and Norepinephrine	Adrenal medulla	Can decrease kidney function temporarily by vasoconstriction
Renin	Kidney nephrons	Increases blood pressure by acting on angiotensinogen
Angiotensin	Liver	Angiotensin II affects multiple processes and increases blood pressure
Aldosterone	Adrenal cortex	Prevents loss of sodium and water
Anti-diuretic hormone (vasopressin)	Hypothalamus (stored in the posterior pituitary)	Prevents water loss
Atrial natriuretic peptide	Heart atrium	Decreases blood pressure by acting as a vasodilator and increasing glomerular filtration rate; decreases sodium reabsorption in kidneys

Epinephrine and Norepinephrine

Epinephrine and norepinephrine are released by the adrenal medulla and nervous system respectively. They are the flight/fight hormones that are released when the body is under extreme stress. During stress, much of the body's energy is used to combat imminent danger. Kidney function is halted temporarily by epinephrine and norepinephrine. These hormones function by acting directly on the smooth muscles of blood vessels to constrict them. Once the afferent arterioles are constricted, blood flow into the nephrons stops. These hormones go one step further and trigger the renin-angiotensin-aldosterone system.

Renin-Angiotensin-Aldosterone

The renin-angiotensin-aldosterone system, illustrated in Figure 3.6.1 proceeds through several steps to produce angiotensin II, which acts to stabilize blood pressure and volume. Renin (secreted by a part of the juxtaglomerular complex) is produced by the granular cells of the afferent and efferent arterioles. Thus, the kidneys control blood pressure and volume directly. Renin acts on angiotensinogen, which is made in the liver and converts it to angiotensin I. Angiotensin converting enzyme (ACE) converts angiotensin I to angiotensin II. Angiotensin II raises blood pressure by constricting blood vessels. It also triggers the release of the mineralocorticoid aldosterone from the adrenal cortex, which in turn stimulates the renal tubules to reabsorb more sodium. Angiotensin II also triggers the release of anti-diuretic hormone (ADH) from the hypothalamus, leading to water retention in the kidneys. It acts directly on the nephrons and decreases glomerular filtration rate. Medically, blood pressure can be controlled by drugs that inhibit ACE (called ACE inhibitors).

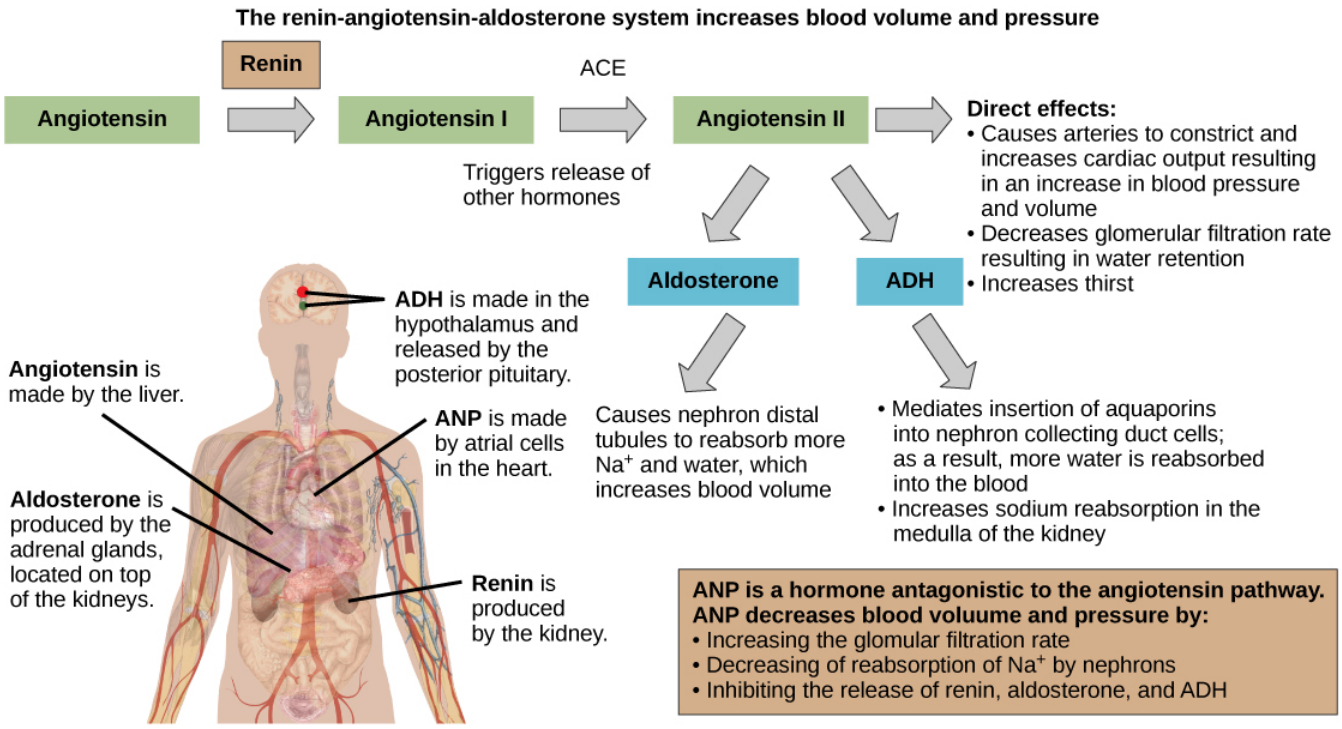


Figure 3.6.1: The renin-angiotensin-aldosterone system increases blood pressure and volume. The hormone ANP has antagonistic effects. (credit: modification of work by Mikael Häggström)

Mineralocorticoids

Mineralocorticoids are hormones synthesized by the adrenal cortex that affect osmotic balance. Aldosterone is a mineralocorticoid that regulates sodium levels in the blood. Almost all of the sodium in the blood is reclaimed by the renal tubules under the influence of aldosterone. Because sodium is always reabsorbed by active transport and water follows sodium to maintain osmotic balance, aldosterone manages not only sodium levels but also the water levels in body fluids. In contrast, the aldosterone also stimulates potassium secretion concurrently with sodium reabsorption. In contrast, absence of aldosterone means that no sodium gets reabsorbed in the renal tubules and all of it gets excreted in the urine. In addition, the daily dietary potassium load is not secreted and the retention of K^+ can cause a dangerous increase in plasma K^+ concentration. Patients who have Addison's disease have a failing adrenal cortex and cannot produce aldosterone. They lose sodium in their urine constantly, and if the supply is not replenished, the consequences can be fatal.

Antidiurectic Hormone

As previously discussed, antidiuretic hormone or ADH (also called vasopressin), as the name suggests, helps the body conserve water when body fluid volume, especially that of blood, is low. It is formed by the hypothalamus and is stored and released from the posterior pituitary. It acts by inserting aquaporins in the collecting ducts and promotes reabsorption of water. ADH also acts as a vasoconstrictor and increases blood pressure during hemorrhaging.

Atrial Natriuretic Peptide Hormone

The atrial natriuretic peptide (ANP) lowers blood pressure by acting as a vasodilator. It is released by cells in the atrium of the heart in response to high blood pressure and in patients with sleep apnea. ANP affects salt release, and because water passively follows salt to maintain osmotic balance, it also has a diuretic effect. ANP also prevents sodium reabsorption by the renal tubules, decreasing water reabsorption (thus acting as a diuretic) and lowering blood pressure. Its actions suppress the actions of aldosterone, ADH, and renin.

Summary

Hormonal cues help the kidneys synchronize the osmotic needs of the body. Hormones like epinephrine, norepinephrine, renin-angiotensin, aldosterone, anti-diuretic hormone, and atrial natriuretic peptide help regulate the needs of the body as well as the

communication between the different organ systems.

Glossary

angiotensin converting enzyme (ACE)
enzyme that converts angiotensin I to angiotensin II

angiotensin I
product in the renin-angiotensin-aldosterone pathway

angiotensin II
molecule that affects different organs to increase blood pressure

anti-diuretic hormone (ADH)
hormone that prevents the loss of water

renin-angiotensin-aldosterone
biochemical pathway that activates angiotensin II, which increases blood pressure

vasodilator
compound that increases the diameter of blood vessels

vasopressin
another name for anti-diuretic hormone

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CHAPTER OVERVIEW

4: Basics of the Nervous System

4.1: Prelude to the Nervous System

4.2: Neurons and Glial Cells

4.3: How Neurons Communicate

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4.1: Prelude to the Nervous System



Figure 4.1.1: An athlete's nervous system is hard at work during the planning and execution of a movement as precise as a high jump. Parts of the nervous system are involved in determining how hard to push off and when to turn, as well as controlling the muscles throughout the body that make this complicated movement possible without knocking the bar down—all in just a few seconds. (credit: modification of work by Shane T. McCoy, U.S. Navy)

When you're reading this book, your nervous system is performing several functions simultaneously. The visual system is processing what is seen on the page; the motor system controls the turn of the pages (or click of the mouse); the prefrontal cortex maintains attention. Even fundamental functions, like breathing and regulation of body temperature, are controlled by the nervous system. A nervous system is an organism's control center: it processes sensory information from outside (and inside) the body and controls all behaviors—from eating to sleeping to finding a mate.

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4.2: Neurons and Glial Cells

Skills to Develop

- List and describe the functions of the structural components of a neuron
- List and describe the four main types of neurons
- Compare the functions of different types of glial cells

Nervous systems throughout the animal kingdom vary in structure and complexity, as illustrated by the variety of animals shown in Figure 4.2.1. Some organisms, like sea sponges, lack a true nervous system. Others, like jellyfish, lack a true brain and instead have a system of separate but connected nerve cells (neurons) called a "nerve net." Echinoderms such as sea stars have nerve cells that are bundled into fibers called nerves. Flatworms of the phylum Platyhelminthes have both a central nervous system (CNS), made up of a small "brain" and two nerve cords, and a peripheral nervous system (PNS) containing a system of nerves that extend throughout the body. The insect nervous system is more complex but also fairly decentralized. It contains a brain, ventral nerve cord, and ganglia (clusters of connected neurons). These ganglia can control movements and behaviors without input from the brain. Octopi may have the most complicated of invertebrate nervous systems—they have neurons that are organized in specialized lobes and eyes that are structurally similar to vertebrate species.

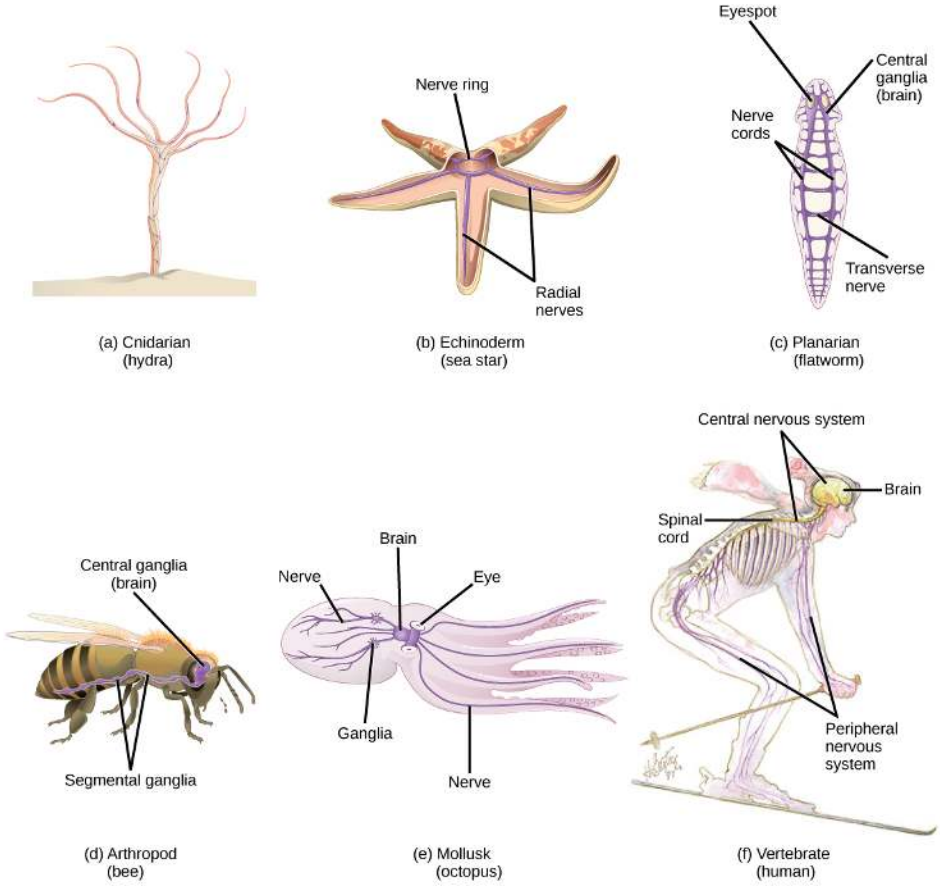
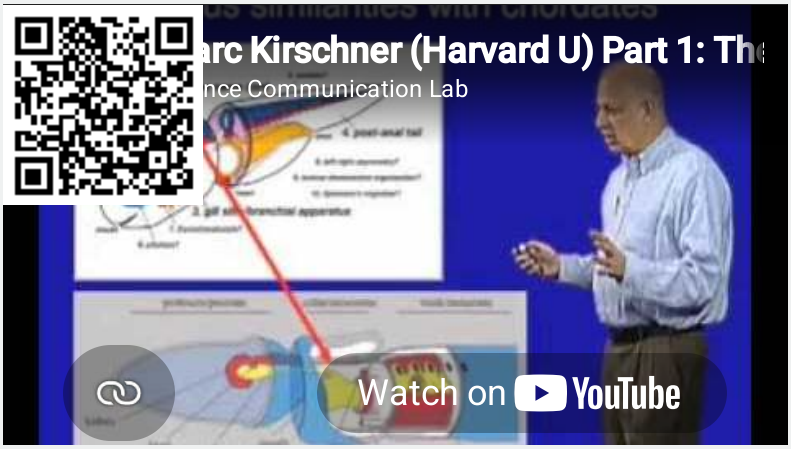


Figure 4.2.1: Nervous systems vary in structure and complexity. In (a) cnidarians, nerve cells form a decentralized nerve net. In (b) echinoderms, nerve cells are bundled into fibers called nerves. In animals exhibiting bilateral symmetry such as (c) planarians, neurons cluster into an anterior brain that processes information. In addition to a brain, (d) arthropods have clusters of nerve cell bodies, called peripheral ganglia, located along the ventral nerve cord. Mollusks such as squid and (e) octopi, which must hunt to survive, have complex brains containing millions of neurons. In (f) vertebrates, the brain and spinal cord comprise the central nervous system, while neurons extending into the rest of the body comprise the peripheral nervous system. (credit e: modification of work by Michael Vecchione, Clyde F.E. Roper, and Michael J. Sweeney, NOAA; credit f: modification of work by NIH).

Compared to invertebrates, vertebrate nervous systems are more complex, centralized, and specialized. While there is great diversity among different vertebrate nervous systems, they all share a basic structure: a CNS that contains a brain and spinal cord

and a PNS made up of peripheral sensory and motor nerves. One interesting difference between the nervous systems of invertebrates and vertebrates is that the nerve cords of many invertebrates are located ventrally whereas the vertebrate spinal cords are located dorsally. There is debate among evolutionary biologists as to whether these different nervous system plans evolved separately or whether the invertebrate body plan arrangement somehow "flipped" during the evolution of vertebrates.

Link to Learning



Watch this video of biologist Mark Kirschner discussing the "flipping" phenomenon of vertebrate evolution.

The nervous system is made up of neurons, specialized cells that can receive and transmit chemical or electrical signals, and glia, cells that provide support functions for the neurons by playing an information processing role that is complementary to neurons. A neuron can be compared to an electrical wire—it transmits a signal from one place to another. Glia can be compared to the workers at the electric company who make sure wires go to the right places, maintain the wires, and take down wires that are broken. Although glia have been compared to workers, recent evidence suggests that also usurp some of the signaling functions of neurons.

There is great diversity in the types of neurons and glia that are present in different parts of the nervous system. There are four major types of neurons, and they share several important cellular components.

Neurons

The nervous system of the common laboratory fly, *Drosophila melanogaster*, contains around 100,000 neurons, the same number as a lobster. This number compares to 75 million in the mouse and 300 million in the octopus. A human brain contains around 86 billion neurons. Despite these very different numbers, the nervous systems of these animals control many of the same behaviors—from basic reflexes to more complicated behaviors like finding food and courting mates. The ability of neurons to communicate with each other as well as with other types of cells underlies all of these behaviors.

Most neurons share the same cellular components. But neurons are also highly specialized—different types of neurons have different sizes and shapes that relate to their functional roles.

Parts of a Neuron

Like other cells, each neuron has a cell body (or soma) that contains a nucleus, smooth and rough endoplasmic reticulum, Golgi apparatus, mitochondria, and other cellular components. Neurons also contain unique structures, illustrated in Figure 4.2.2 for receiving and sending the electrical signals that make neuronal communication possible. Dendrites are tree-like structures that extend away from the cell body to receive messages from other neurons at specialized junctions called synapses. Although some neurons do not have any dendrites, some types of neurons have multiple dendrites. Dendrites can have small protrusions called dendritic spines, which further increase surface area for possible synaptic connections.

Once a signal is received by the dendrite, it then travels passively to the cell body. The cell body contains a specialized structure, the axon hillock that integrates signals from multiple synapses and serves as a junction between the cell body and an axon. An axon is a tube-like structure that propagates the integrated signal to specialized endings called axon terminals. These terminals in turn synapse on other neurons, muscle, or target organs. Chemicals released at axon terminals allow signals to be communicated to

these other cells. Neurons usually have one or two axons, but some neurons, like amacrine cells in the retina, do not contain any axons. Some axons are covered with myelin, which acts as an insulator to minimize dissipation of the electrical signal as it travels down the axon, greatly increasing the speed on conduction. This insulation is important as the axon from a human motor neuron can be as long as a meter—from the base of the spine to the toes. The myelin sheath is not actually part of the neuron. Myelin is produced by glial cells. Along the axon there are periodic gaps in the myelin sheath. These gaps are called nodes of Ranvier and are sites where the signal is “recharged” as it travels along the axon.

It is important to note that a single neuron does not act alone—neuronal communication depends on the connections that neurons make with one another (as well as with other cells, like muscle cells). Dendrites from a single neuron may receive synaptic contact from many other neurons. For example, dendrites from a Purkinje cell in the cerebellum are thought to receive contact from as many as 200,000 other neurons.

Art Connection

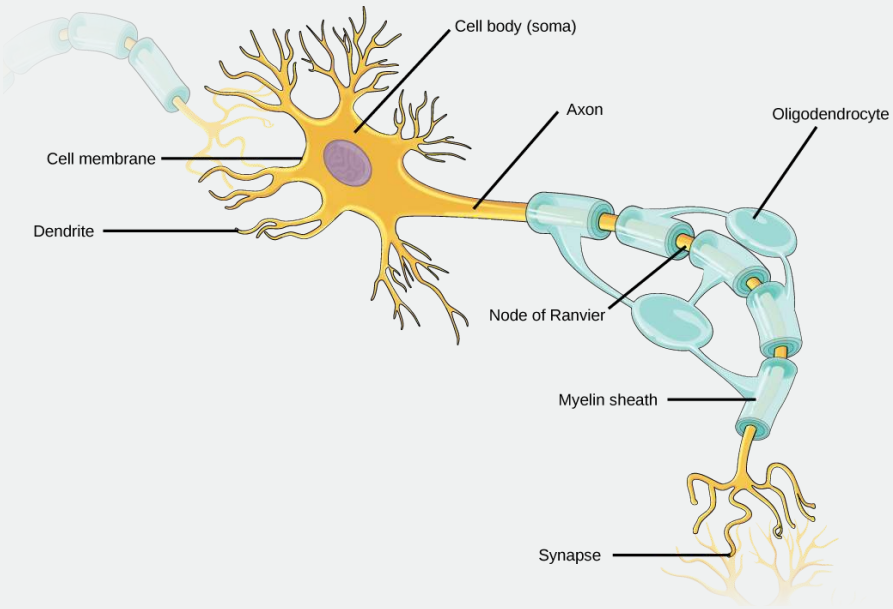


Figure 4.2.2: Neurons contain organelles common to many other cells, such as a nucleus and mitochondria. They also have more specialized structures, including dendrites and axons.

Which of the following statements is false?

A. The soma is the cell body of a nerve cell.
B. Myelin sheath provides an insulating layer to the dendrites.
C. Axons carry the signal from the soma to the target.
D. Dendrites carry the signal to the soma.

Types of Neurons

There are different types of neurons, and the functional role of a given neuron is intimately dependent on its structure. There is an amazing diversity of neuron shapes and sizes found in different parts of the nervous system (and across species), as illustrated by the neurons shown in Figure 4.2.3.

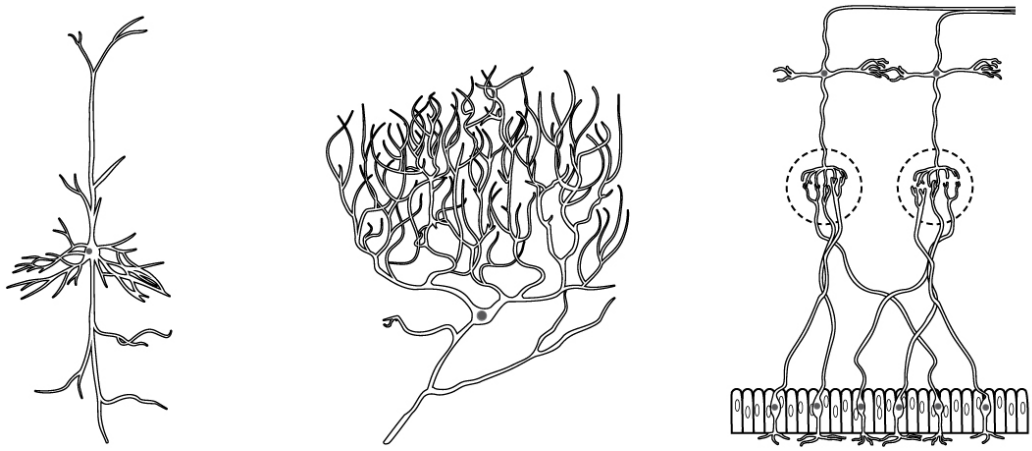


Figure 4.2.3: There is great diversity in the size and shape of neurons throughout the nervous system. Examples include (a) a pyramidal cell from the cerebral cortex, (b) a Purkinje cell from the cerebellar cortex, and (c) olfactory cells from the olfactory epithelium and olfactory bulb.

While there are many defined neuron cell subtypes, neurons are broadly divided into four basic types: unipolar, bipolar, multipolar, and pseudounipolar. Figure 4.2.4 illustrates these four basic neuron types. Unipolar neurons have only one structure that extends away from the soma. These neurons are not found in vertebrates but are found in insects where they stimulate muscles or glands. A bipolar neuron has one axon and one dendrite extending from the soma. An example of a bipolar neuron is a retinal bipolar cell, which receives signals from photoreceptor cells that are sensitive to light and transmits these signals to ganglion cells that carry the signal to the brain. Multipolar neurons are the most common type of neuron. Each multipolar neuron contains one axon and multiple dendrites. Multipolar neurons can be found in the central nervous system (brain and spinal cord). An example of a multipolar neuron is a Purkinje cell in the cerebellum, which has many branching dendrites but only one axon. Pseudounipolar cells share characteristics with both unipolar and bipolar cells. A pseudounipolar cell has a single process that extends from the soma, like a unipolar cell, but this process later branches into two distinct structures, like a bipolar cell. Most sensory neurons are pseudounipolar and have an axon that branches into two extensions: one connected to dendrites that receive sensory information and another that transmits this information to the spinal cord.

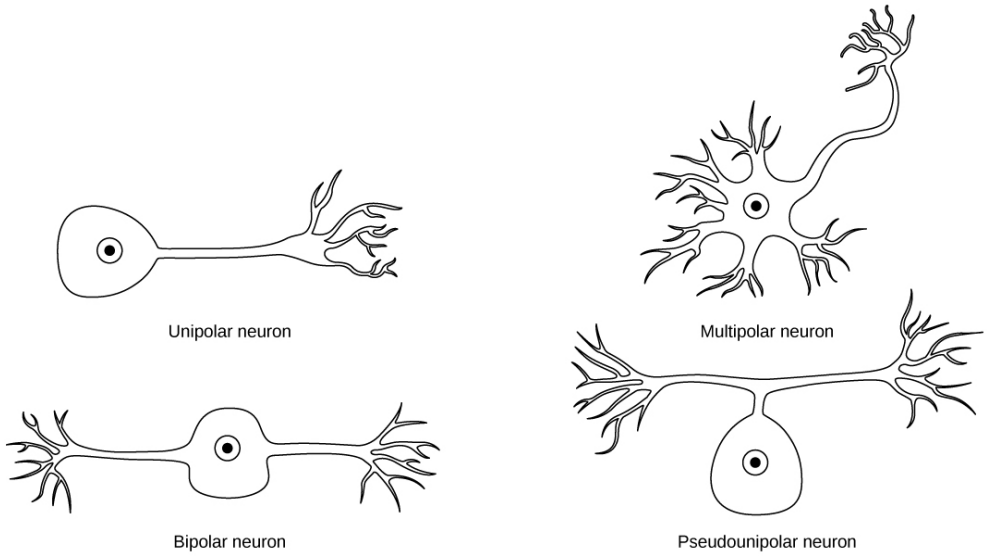


Figure 4.2.4: Neurons are broadly divided into four main types based on the number and placement of axons: (1) unipolar, (2) bipolar, (3) multipolar, and (4) pseudounipolar.

Everyday Connection: Neurogenesis

At one time, scientists believed that people were born with all the neurons they would ever have. Research performed during the last few decades indicates that neurogenesis, the birth of new neurons, continues into adulthood. Neurogenesis was first discovered in songbirds that produce new neurons while learning songs. For mammals, new neurons also play an important role in learning: about 1000 new neurons develop in the hippocampus (a brain structure involved in learning and memory) each day. While most of the new neurons will die, researchers found that an increase in the number of surviving new neurons in the hippocampus correlated with how well rats learned a new task. Interestingly, both exercise and some antidepressant medications also promote neurogenesis in the hippocampus. Stress has the opposite effect. While neurogenesis is quite limited compared to regeneration in other tissues, research in this area may lead to new treatments for disorders such as Alzheimer's, stroke, and epilepsy.

How do scientists identify new neurons? A researcher can inject a compound called bromodeoxyuridine (BrdU) into the brain of an animal. While all cells will be exposed to BrdU, BrdU will only be incorporated into the DNA of newly generated cells that are in S phase. A technique called immunohistochemistry can be used to attach a fluorescent label to the incorporated BrdU, and a researcher can use fluorescent microscopy to visualize the presence of BrdU, and thus new neurons, in brain tissue. Figure 4.2.5 is a micrograph which shows fluorescently labeled neurons in the hippocampus of a rat.

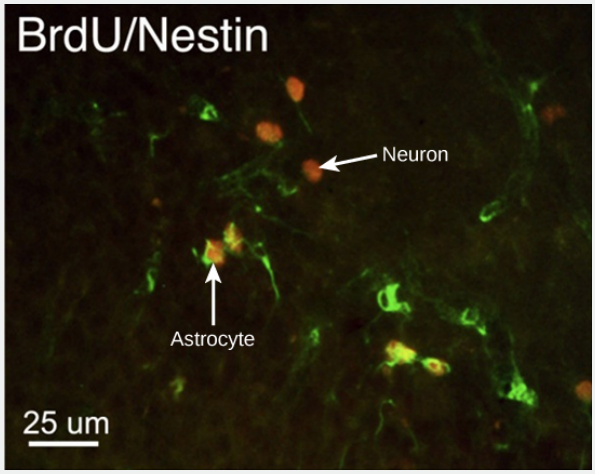


Figure 4.2.5: This micrograph shows fluorescently labeled new neurons in a rat hippocampus. Cells that are actively dividing have bromodoxyuridine (BrdU) incorporated into their DNA and are labeled in red. Cells that express glial fibrillary acidic protein (GFAP) are labeled in green. Astrocytes, but not neurons, express GFAP. Thus, cells that are labeled both red and green are actively dividing astrocytes, whereas cells labeled red only are actively dividing neurons. (credit: modification of work by Dr. Maryam Faiz, et. al., University of Barcelona; scale-bar data from Matt Russell)

Link to Learning

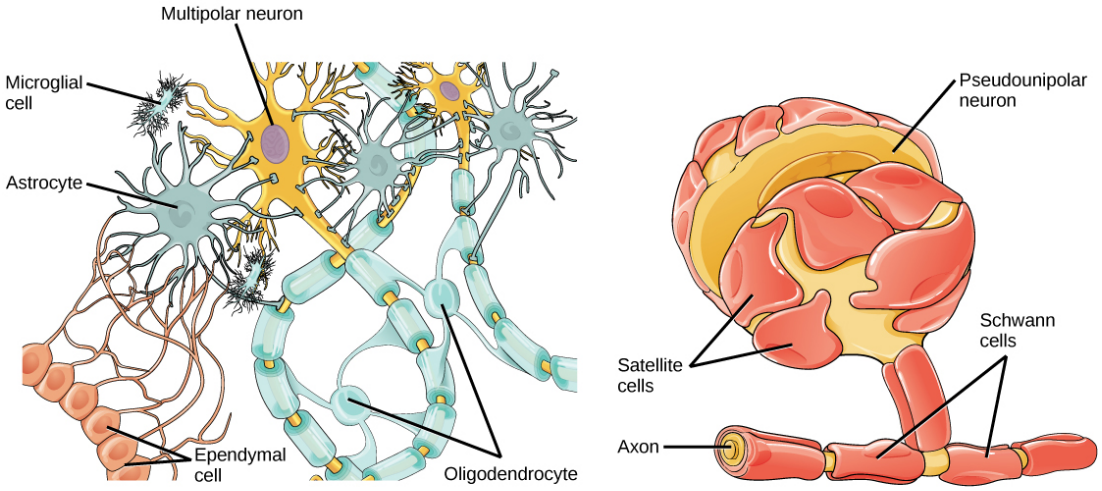
This site contains more information about neurogenesis, including an interactive laboratory simulation and a video that explains how BrdU labels new cells.

Glia

While glia are often thought of as the supporting cast of the nervous system, the number of glial cells in the brain actually outnumbers the number of neurons by a factor of ten. Neurons would be unable to function without the vital roles that are fulfilled by these glial cells. Glia guide developing neurons to their destinations, buffer ions and chemicals that would otherwise harm neurons, and provide myelin sheaths around axons. Scientists have recently discovered that they also play a role in responding to nerve activity and modulating communication between nerve cells. When glia do not function properly, the result can be disastrous—most brain tumors are caused by mutations in glia.

Types of Glia

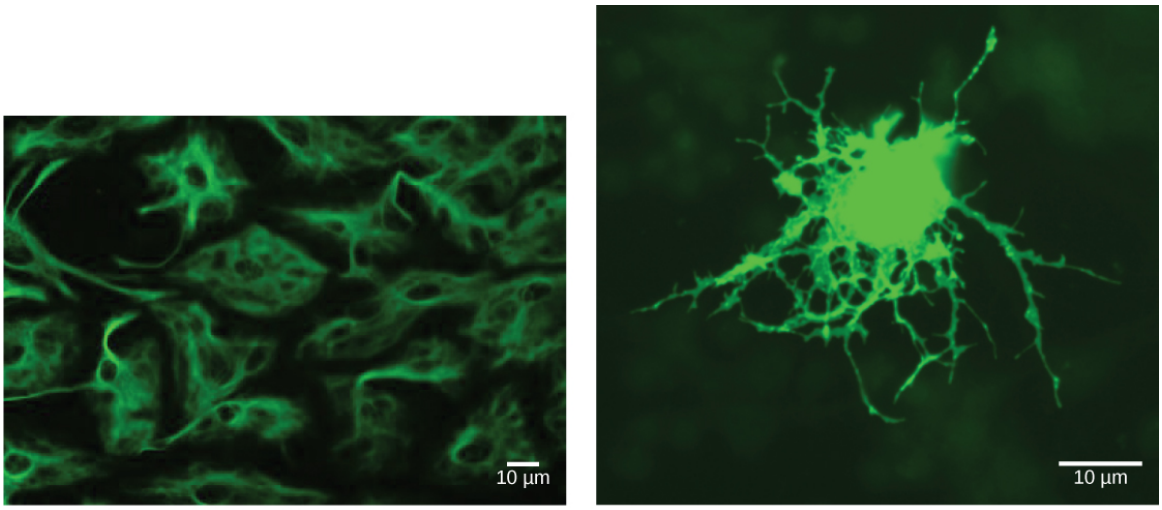
There are several different types of glia with different functions, two of which are shown in Figure 4.2.6. Astrocytes, shown in Figure 4.2.7 make contact with both capillaries and neurons in the CNS. They provide nutrients and other substances to neurons, regulate the concentrations of ions and chemicals in the extracellular fluid, and provide structural support for synapses. Astrocytes also form the blood-brain barrier—a structure that blocks entrance of toxic substances into the brain. Astrocytes, in particular, have been shown through calcium imaging experiments to become active in response to nerve activity, transmit calcium waves between astrocytes, and modulate the activity of surrounding synapses.



(a) Central nervous system (b) Peripheral nervous system

Figure 4.2.6: Glial cells support neurons and maintain their environment. Glial cells of the (a) central nervous system include oligodendrocytes, astrocytes, ependymal cells, and microglial cells. Oligodendrocytes form the myelin sheath around axons. Astrocytes provide nutrients to neurons, maintain their extracellular environment, and provide structural support. Microglia scavenge pathogens and dead cells. Ependymal cells produce cerebrospinal fluid that cushions the neurons. Glial cells of the (b) peripheral nervous system include Schwann cells, which form the myelin sheath, and satellite cells, which provide nutrients and structural support to neurons.

Satellite glia provide nutrients and structural support for neurons in the PNS. Microglia scavenge and degrade dead cells and protect the brain from invading microorganisms. Oligodendrocytes, shown in Figure 4.2.7 form myelin sheaths around axons in the CNS. One axon can be myelinated by several oligodendrocytes, and one oligodendrocyte can provide myelin for multiple neurons. This is distinctive from the PNS where a single Schwann cell provides myelin for only one axon as the entire Schwann cell surrounds the axon. Radial glia serve as scaffolds for developing neurons as they migrate to their end destinations. Ependymal cells line fluid-filled ventricles of the brain and the central canal of the spinal cord. They are involved in the production of cerebrospinal fluid, which serves as a cushion for the brain, moves the fluid between the spinal cord and the brain, and is a component for the choroid plexus.



(a) Astrocyte (b) Oligodendrocyte

Figure 4.2.7: (a) Astrocytes and (b) oligodendrocytes are glial cells of the central nervous system. (credit a: modification of work by Uniformed Services University; credit b: modification of work by Jurjen Broeke; scale-bar data from Matt Russell)

Summary

The nervous system is made up of neurons and glia. Neurons are specialized cells that are capable of sending electrical as well as chemical signals. Most neurons contain dendrites, which receive these signals, and axons that send signals to other neurons or tissues. There are four main types of neurons: unipolar, bipolar, multipolar, and pseudounipolar neurons. Glia are non-neuronal cells in the nervous system that support neuronal development and signaling. There are several types of glia that serve different functions.

Art Connections

Figure 4.2.2: Which of the following statements is false?

A. The soma is the cell body of a nerve cell.
B. Myelin sheath provides an insulating layer to the dendrites.
C. Axons carry the signal from the soma to the target.
D. Dendrites carry the signal to the soma.

Answer

B

Glossary

astrocyte
glial cell in the central nervous system that provide nutrients, extracellular buffering, and structural support for neurons; also makes up the blood-brain barrier

axon
tube-like structure that propagates a signal from a neuron’s cell body to axon terminals

axon hillock
electrically sensitive structure on the cell body of a neuron that integrates signals from multiple neuronal connections

axon terminal
structure on the end of an axon that can form a synapse with another neuron

dendrite
structure that extends away from the cell body to receive messages from other neurons

ependymal
cell that lines fluid-filled ventricles of the brain and the central canal of the spinal cord; involved in production of cerebrospinal fluid

glia
(also, glial cells) cells that provide support functions for neurons

microglia
glia that scavenge and degrade dead cells and protect the brain from invading microorganisms

myelin
fatty substance produced by glia that insulates axons

neuron
specialized cell that can receive and transmit electrical and chemical signals

nodes of Ranvier
gaps in the myelin sheath where the signal is recharged

oligodendrocyte
glial cell that myelinates central nervous system neuron axons

radial glia
glia that serve as scaffolds for developing neurons as they migrate to their final destinations

satellite glia
glial cell that provides nutrients and structural support for neurons in the peripheral nervous system

Schwann cell
glial cell that creates myelin sheath around a peripheral nervous system neuron axon

synapse
junction between two neurons where neuronal signals are communicated

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4.3: How Neurons Communicate

Skills to Develop

- Describe the basis of the resting membrane potential
- Explain the stages of an action potential and how action potentials are propagated
- Explain the similarities and differences between chemical and electrical synapses
- Describe long-term potentiation and long-term depression

All functions performed by the nervous system—from a simple motor reflex to more advanced functions like making a memory or a decision—require neurons to communicate with one another. While humans use words and body language to communicate, neurons use electrical and chemical signals. Just like a person in a committee, one neuron usually receives and synthesizes messages from multiple other neurons before "making the decision" to send the message on to other neurons.

Nerve Impulse Transmission within a Neuron

For the nervous system to function, neurons must be able to send and receive signals. These signals are possible because each neuron has a charged cellular membrane (a voltage difference between the inside and the outside), and the charge of this membrane can change in response to neurotransmitter molecules released from other neurons and environmental stimuli. To understand how neurons communicate, one must first understand the basis of the baseline or 'resting' membrane charge.

Neuronal Charged Membranes

The lipid bilayer membrane that surrounds a neuron is impermeable to charged molecules or ions. To enter or exit the neuron, ions must pass through special proteins called ion channels that span the membrane. Ion channels have different configurations: open, closed, and inactive, as illustrated in Figure 4.3.1. Some ion channels need to be activated in order to open and allow ions to pass into or out of the cell. These ion channels are sensitive to the environment and can change their shape accordingly. Ion channels that change their structure in response to voltage changes are called voltage-gated ion channels. Voltage-gated ion channels regulate the relative concentrations of different ions inside and outside the cell. The difference in total charge between the inside and outside of the cell is called the membrane potential.

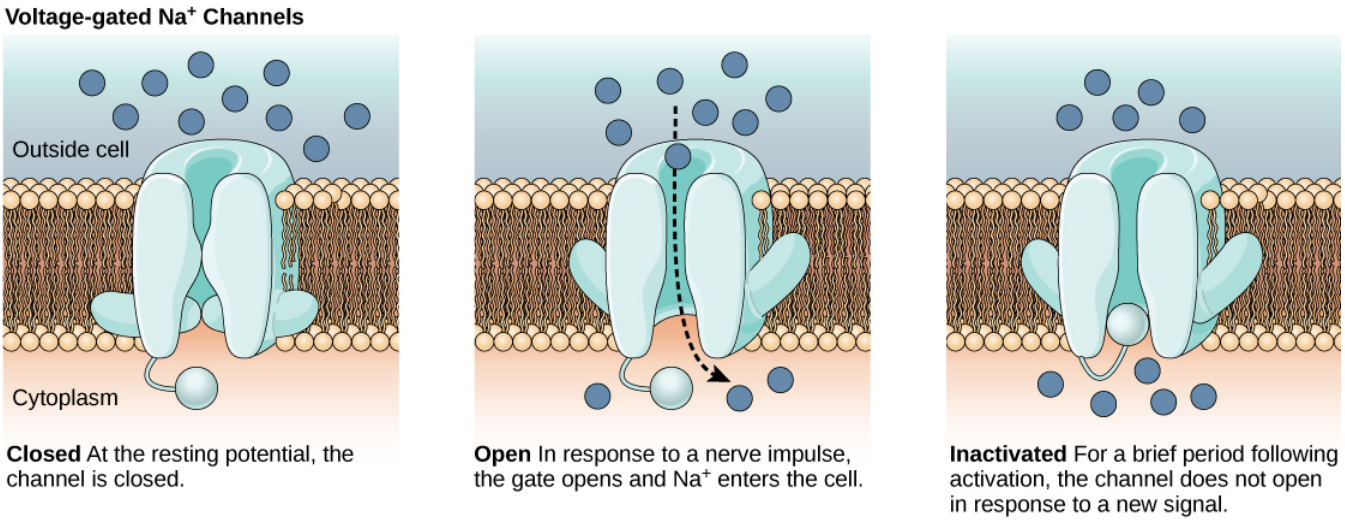


Figure 4.3.1: Voltage-gated ion channels open in response to changes in membrane voltage. After activation, they become inactivated for a brief period and will no longer open in response to a signal.

Link to Learning



This video discusses the basis of the resting membrane potential.

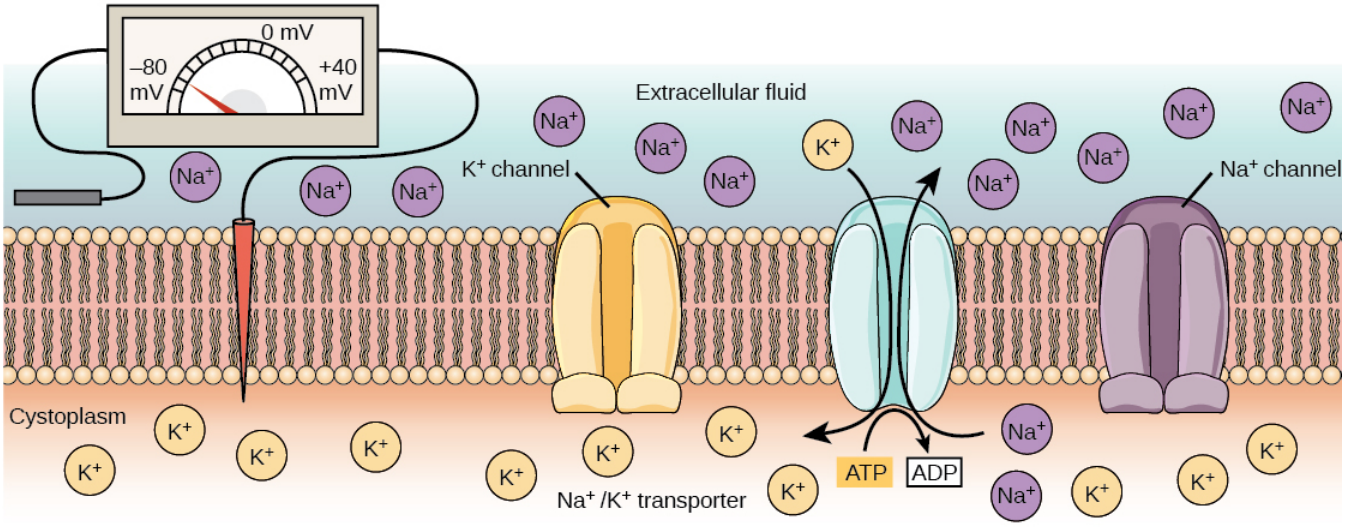
Resting Membrane Potential

A neuron at rest is negatively charged: the inside of a cell is approximately 70 millivolts more negative than the outside (−70 mV, note that this number varies by neuron type and by species). This voltage is called the resting membrane potential; it is caused by differences in the concentrations of ions inside and outside the cell. If the membrane were equally permeable to all ions, each type of ion would flow across the membrane and the system would reach equilibrium. Because ions cannot simply cross the membrane at will, there are different concentrations of several ions inside and outside the cell, as shown in the table below. The difference in the number of positively charged potassium ions (K^+) inside and outside the cell dominates the resting membrane potential (Figure 4.3.2). When the membrane is at rest, K^+ ions accumulate inside the cell due to a net movement with the concentration gradient. The negative resting membrane potential is created and maintained by increasing the concentration of cations outside the cell (in the extracellular fluid) relative to inside the cell (in the cytoplasm). The negative charge within the cell is created by the cell membrane being more permeable to potassium ion movement than sodium ion movement. In neurons, potassium ions are maintained at high concentrations within the cell while sodium ions are maintained at high concentrations outside of the cell. The cell possesses potassium and sodium leakage channels that allow the two cations to diffuse down their concentration gradient. However, the neurons have far more potassium leakage channels than sodium leakage channels. Therefore, potassium diffuses out of the cell at a much faster rate than sodium leaks in. Because more cations are leaving the cell than are entering, this causes the interior of the cell to be negatively charged relative to the outside of the cell. The actions of the sodium potassium pump help to maintain the resting potential, once established. Recall that sodium potassium pumps brings two K^+ ions into the cell while removing three Na^+ ions per ATP consumed. As more cations are expelled from the cell than taken in, the inside of the cell remains negatively charged relative to the extracellular fluid. It should be noted that calcium ions (Cl^-) tend to accumulate outside of the cell because they are repelled by negatively-charged proteins within the cytoplasm.

Table 4.3.1**:** Ion Concentration Inside and Outside Neurons. The resting membrane potential is a result of different concentrations inside and outside the cell.

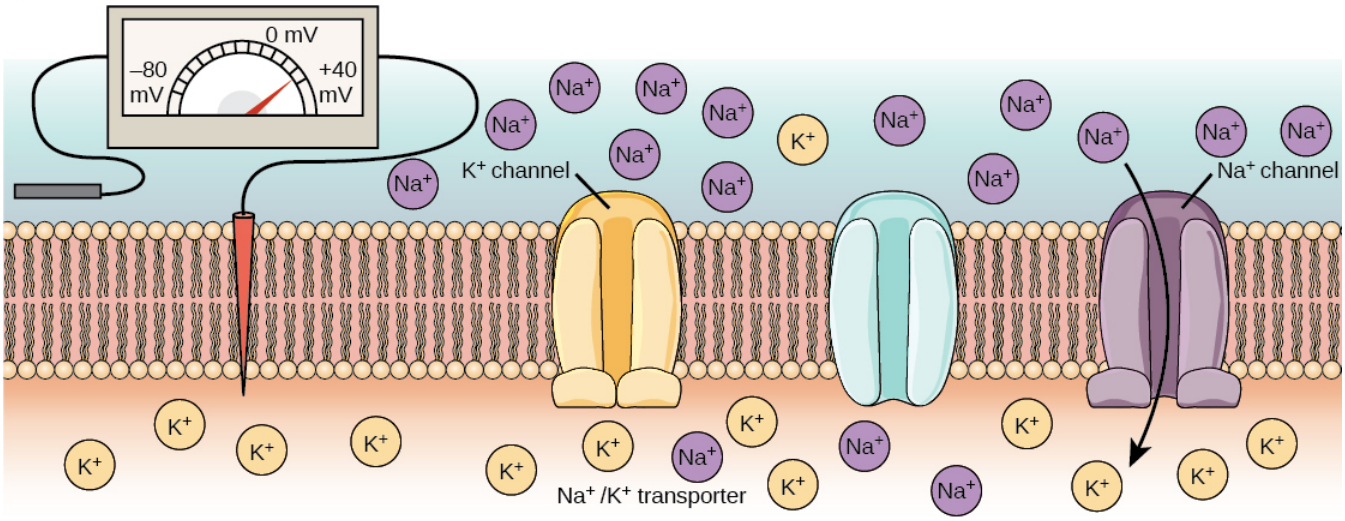
Ion	Extracellular concentration (mM)	Intracellular concentration (mM)	Ratio outside/inside
Na^+	145	12	12
K^+	4	155	0.026
Cl^-	120	4	30
Organic anions (A−)	—	100	

(a) Resting potential



At the resting potential, all voltage-gated Na^+ channels and most voltage-gated K^+ channels are closed. The Na^+/K^+ transporter pumps K^+ ions into the cell and Na^+ ions out.

(b) Depolarization



In response to a depolarization, some Na^+ channels open, allowing Na^+ ions to enter the cell. The membrane starts to depolarize (the charge across the membrane lessens). If the threshold of excitation is reached, all the Na^+ channels open.

(c) Hyperpolarization

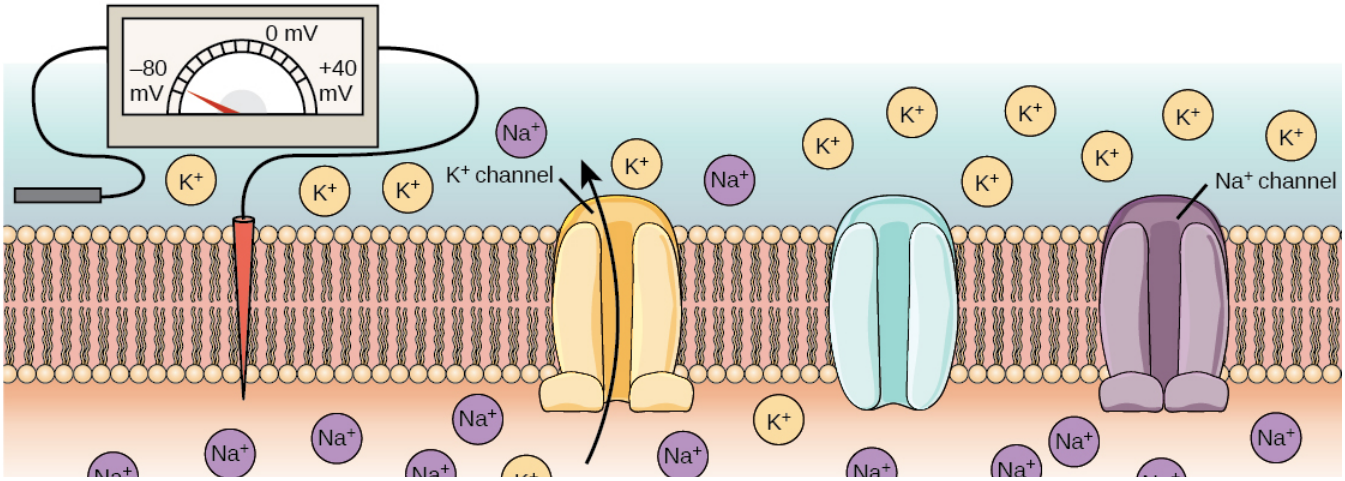


Figure 4.3.2: The (a) resting membrane potential is a result of different concentrations of Na^+ and K^+ ions inside and outside the cell. A nerve impulse causes Na^+ to enter the cell, resulting in (b) depolarization. At the peak action potential, K^+ channels open and the cell becomes (c) hyperpolarized.

At the peak action potential, Na^+ channels close while K^+ channels open. K^+ leaves the cell, and the membrane eventually becomes hyperpolarized.

Action Potential

A neuron can receive input from other neurons and, if this input is strong enough, send the signal to downstream neurons. Transmission of a signal between neurons is generally carried by a chemical called a neurotransmitter. Transmission of a signal within a neuron (from dendrite to axon terminal) is carried by a brief reversal of the resting membrane potential called an action potential. When neurotransmitter molecules bind to receptors located on a neuron's dendrites, ion channels open. At excitatory synapses, this opening allows positive ions to enter the neuron and results in depolarization of the membrane—a decrease in the difference in voltage between the inside and outside of the neuron. A stimulus from a sensory cell or another neuron depolarizes the target neuron to its threshold potential (-55 mV). Na^+ channels in the axon hillock open, allowing positive ions to enter the cell (Figure 4.3.3 and Figure 4.3.4). Once the sodium channels open, the neuron completely depolarizes to a membrane potential of about +40 mV. Action potentials are considered an "all-or nothing" event, in that, once the threshold potential is reached, the neuron always completely depolarizes. Once depolarization is complete, the cell must now "reset" its membrane voltage back to the resting potential. To accomplish this, the Na^+ channels close and cannot be opened. This begins the neuron's refractory period, in which it cannot produce another action potential because its sodium channels will not open. At the same time, voltage-gated K^+ channels open, allowing K^+ to leave the cell. As K^+ ions leave the cell, the membrane potential once again becomes negative. The diffusion of K^+ out of the cell actually hyperpolarizes the cell, in that the membrane potential becomes more negative than the cell's normal resting potential. At this point, the sodium channels will return to their resting state, meaning they are ready to open again if the membrane potential again exceeds the threshold potential. Eventually the extra K^+ ions diffuse out of the cell through the potassium leakage channels, bringing the cell from its hyperpolarized state, back to its resting membrane potential.

Art Connection

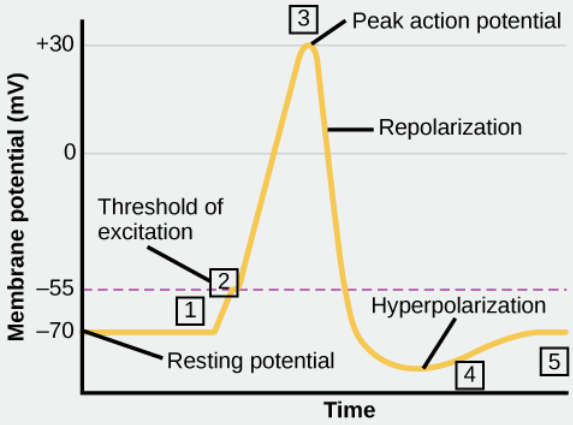


Figure 4.3.3: The formation of an action potential can be divided into five steps: (1) A stimulus from a sensory cell or another neuron causes the target cell to depolarize toward the threshold potential. (2) If the threshold of excitation is reached, all Na^+ channels open and the membrane depolarizes. (3) At the peak action potential, K^+ channels open and K^+ begins to leave the cell. At the same time, Na^+ channels close. (4) The membrane becomes hyperpolarized as K^+ ions continue to leave the cell. The hyperpolarized membrane is in a refractory period and cannot fire. (5) The K^+ channels close and the Na^+/K^+ transporter restores the resting potential.

Potassium channel blockers, such as amiodarone and procainamide, which are used to treat abnormal electrical activity in the heart, called cardiac dysrhythmia, impede the movement of K^+ through voltage-gated K^+ channels. Which part of the action potential would you expect potassium channels to affect?

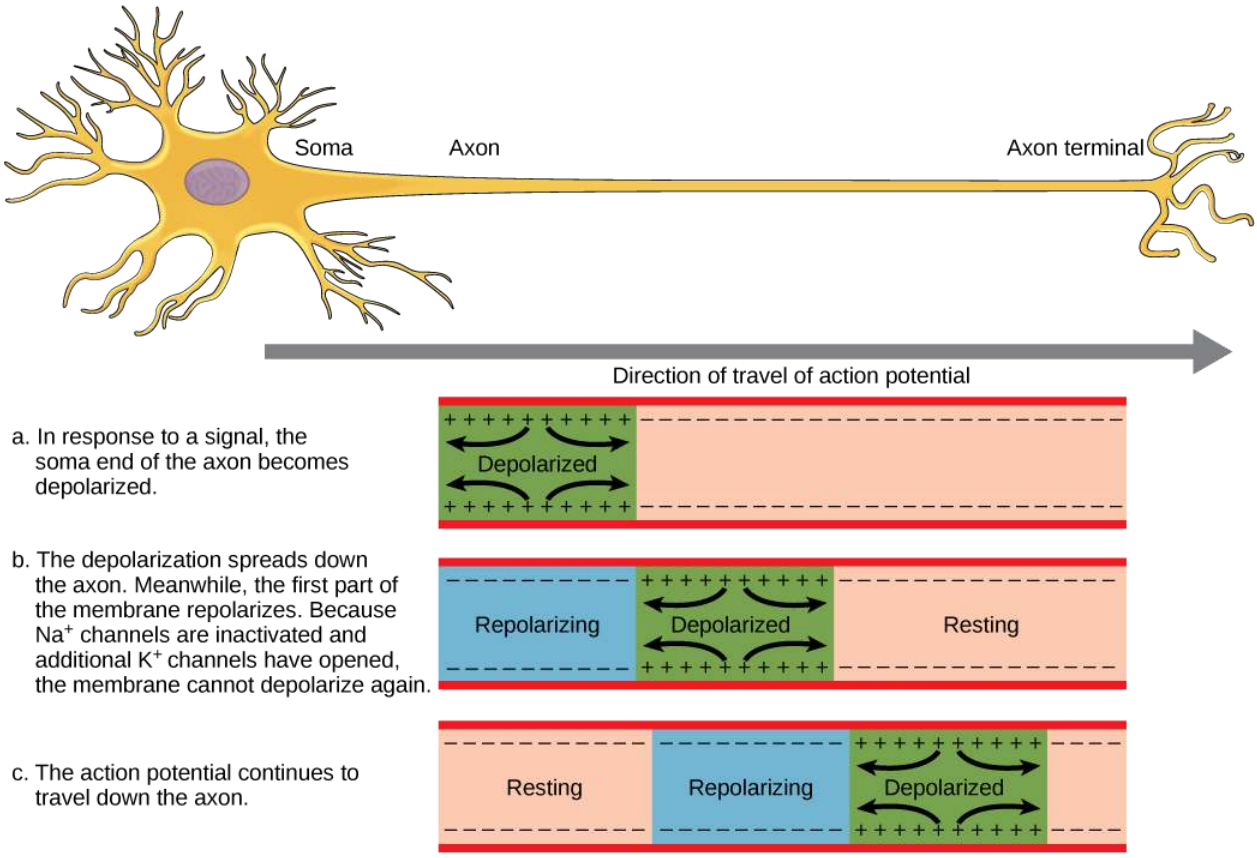
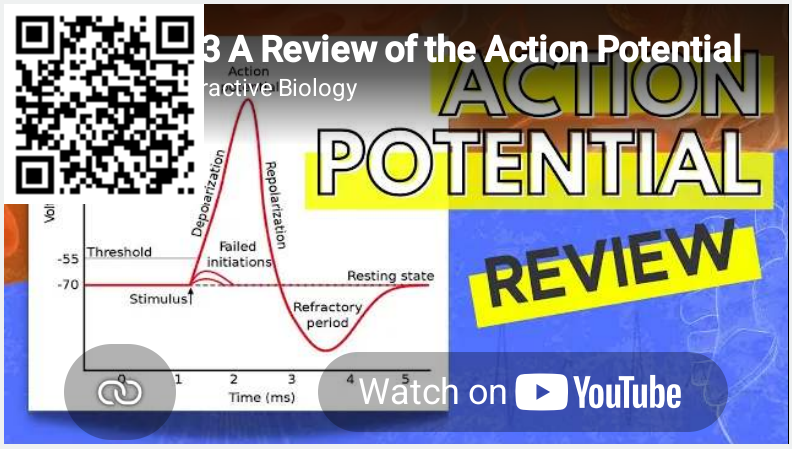


Figure 4.3.4: The action potential is conducted down the axon as the axon membrane depolarizes, then repolarizes.

Link to Learning



This video presents an overview of action potential.

Myelin and the Propagation of the Action Potential

For an action potential to communicate information to another neuron, it must travel along the axon and reach the axon terminals where it can initiate neurotransmitter release. The speed of conduction of an action potential along an axon is influenced by both the diameter of the axon and the axon's resistance to current leak. Myelin acts as an insulator that prevents current from leaving the axon; this increases the speed of action potential conduction. In demyelinating diseases like multiple sclerosis, action potential conduction slows because current leaks from previously insulated axon areas. The nodes of Ranvier, illustrated in Figure 4.3.5 are gaps in the myelin sheath along the axon. These unmyelinated spaces are about one micrometer long and contain voltage gated Na^+

and K^+ channels. Flow of ions through these channels, particularly the Na^+ channels, regenerates the action potential over and over again along the axon. This 'jumping' of the action potential from one node to the next is called saltatory conduction. If nodes of Ranvier were not present along an axon, the action potential would propagate very slowly since Na^+ and K^+ channels would have to continuously regenerate action potentials at every point along the axon instead of at specific points. Nodes of Ranvier also save energy for the neuron since the channels only need to be present at the nodes and not along the entire axon.

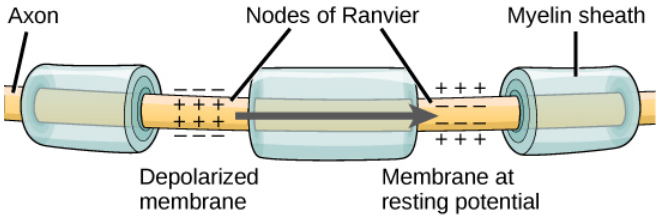


Figure 4.3.5: Nodes of Ranvier are gaps in myelin coverage along axons. Nodes contain voltage-gated K^+ and Na^+ channels. Action potentials travel down the axon by jumping from one node to the next.

Synaptic Transmission

The synapse or "gap" is the place where information is transmitted from one neuron to another. Synapses usually form between axon terminals and dendritic spines, but this is not universally true. There are also axon-to-axon, dendrite-to-dendrite, and axon-to-cell body synapses. The neuron transmitting the signal is called the presynaptic neuron, and the neuron receiving the signal is called the postsynaptic neuron. Note that these designations are relative to a particular synapse—most neurons are both presynaptic and postsynaptic. There are two types of synapses: chemical and electrical.

Chemical Synapse

When an action potential reaches the axon terminal it depolarizes the membrane and opens voltage-gated Na^+ channels. Na^+ ions enter the cell, further depolarizing the presynaptic membrane. This depolarization causes voltage-gated Ca^{2+} channels to open. Calcium ions entering the cell initiate a signaling cascade that causes small membrane-bound vesicles, called synaptic vesicles, containing neurotransmitter molecules to fuse with the presynaptic membrane. Synaptic vesicles are shown in Figure 4.3.6, which is an image from a scanning electron microscope.

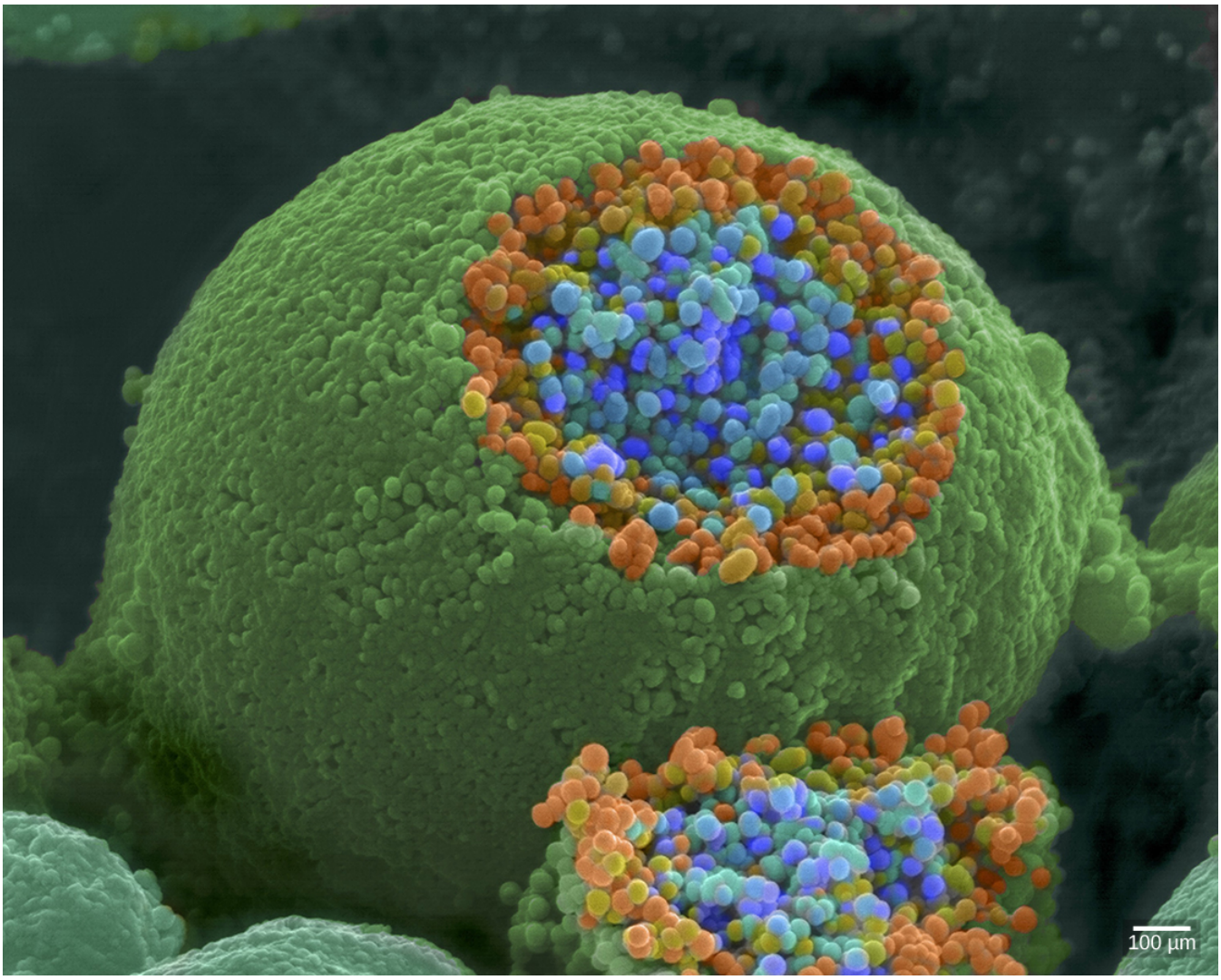
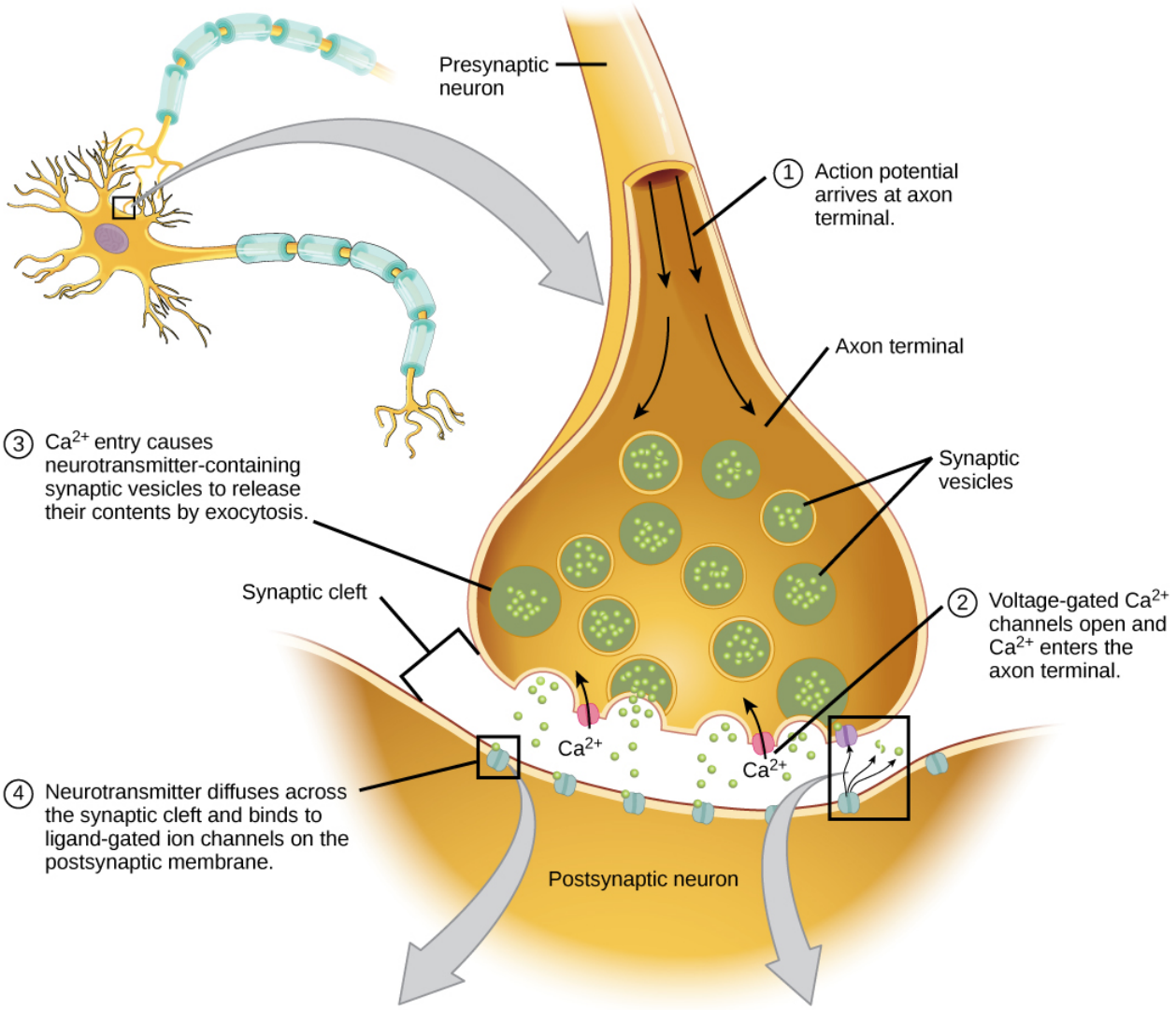
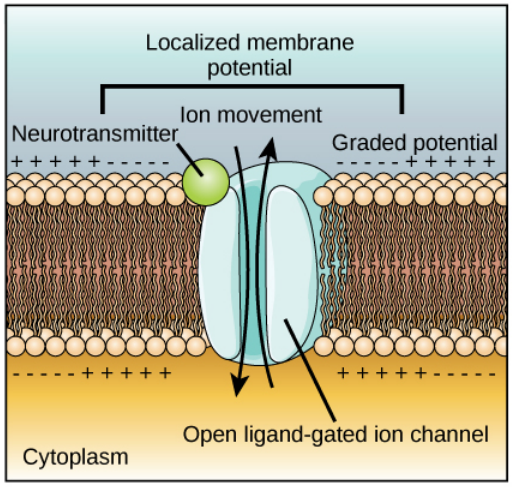


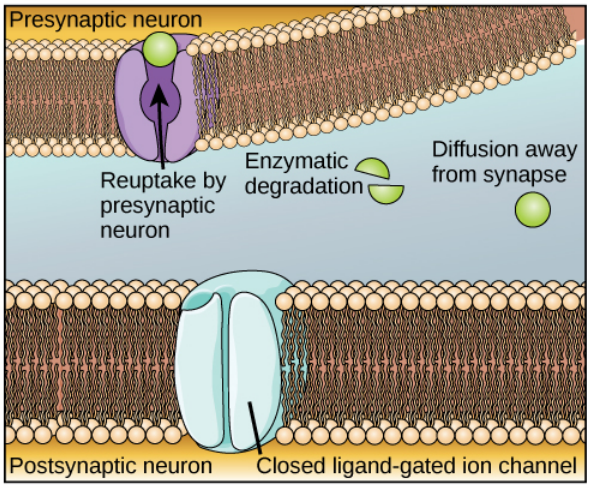
Figure 4.3.6: This pseudocolored image taken with a scanning electron microscope shows an axon terminal that was broken open to reveal synaptic vesicles (blue and orange) inside the neuron. (credit: modification of work by Tina Carvalho, NIH-NIGMS; scale-bar data from Matt Russell)

Fusion of a vesicle with the presynaptic membrane causes neurotransmitter to be released into the synaptic cleft, the extracellular space between the presynaptic and postsynaptic membranes, as illustrated in Figure 4.3.7. The neurotransmitter diffuses across the synaptic cleft and binds to receptor proteins on the postsynaptic membrane.





5 Binding of neurotransmitter opens ligand-gated ion channels, resulting in graded potentials.



6 Reuptake by the presynapic neuron, enzymatic degradation, and diffusion reduce neurotransmitter levels, terminating the signal.

Figure 4.3.7: Communication at chemical synapses requires release of neurotransmitters. When the presynaptic membrane is depolarized, voltage-gated Ca^{2+} channels open and allow Ca^{2+} to enter the cell. The calcium entry causes synaptic vesicles to fuse with the membrane and release neurotransmitter molecules into the synaptic cleft. The neurotransmitter diffuses across the synaptic cleft and binds to ligand-gated ion channels in the postsynaptic membrane, resulting in a localized depolarization or hyperpolarization of the postsynaptic neuron.

The binding of a specific neurotransmitter causes particular ion channels, in this case ligand-gated channels, on the postsynaptic membrane to open. Neurotransmitters can either have excitatory or inhibitory effects on the postsynaptic membrane, as detailed in the table below. For example, when acetylcholine is released at the synapse between a nerve and muscle (called the neuromuscular junction) by a presynaptic neuron, it causes postsynaptic Na^+ channels to open. Na^+ enters the postsynaptic cell and causes the postsynaptic membrane to depolarize. This depolarization is called an excitatory postsynaptic potential (EPSP) and makes the postsynaptic neuron more likely to fire an action potential. Release of neurotransmitter at inhibitory synapses causes inhibitory postsynaptic potentials (IPSPs), a hyperpolarization of the presynaptic membrane. For example, when the neurotransmitter GABA (gamma-aminobutyric acid) is released from a presynaptic neuron, it binds to and opens Cl^- channels. Cl^- ions enter the cell and hyperpolarizes the membrane, making the neuron less likely to fire an action potential.

Once neurotransmission has occurred, the neurotransmitter must be removed from the synaptic cleft so the postsynaptic membrane can “reset” and be ready to receive another signal. This can be accomplished in three ways: the neurotransmitter can diffuse away from the synaptic cleft, it can be degraded by enzymes in the synaptic cleft, or it can be recycled (sometimes called reuptake) by the presynaptic neuron. Several drugs act at this step of neurotransmission. For example, some drugs that are given to Alzheimer’s patients work by inhibiting acetylcholinesterase, the enzyme that degrades acetylcholine. This inhibition of the enzyme essentially increases neurotransmission at synapses that release acetylcholine. Once released, the acetylcholine stays in the cleft and can continually bind and unbind to postsynaptic receptors.

Table 4.3.2: Neurotransmitter Function and Location

Neurotransmitter	Example	Location
Acetylcholine	—	CNS and/or PNS
Biogenic amine	Dopamine, serotonin, norepinephrine	CNS and/or PNS
Amino acid	Glycine, glutamate, aspartate, gamma aminobutyric acid	CNS
Neuropeptide	Substance P, endorphins	CNS and/or PNS

Electrical Synapse

While electrical synapses are fewer in number than chemical synapses, they are found in all nervous systems and play important and unique roles. The mode of neurotransmission in electrical synapses is quite different from that in chemical synapses. In an electrical synapse, the presynaptic and postsynaptic membranes are very close together and are actually physically connected by channel proteins forming gap junctions. Gap junctions allow current to pass directly from one cell to the next. In addition to the ions that carry this current, other molecules, such as ATP, can diffuse through the large gap junction pores.

There are key differences between chemical and electrical synapses. Because chemical synapses depend on the release of neurotransmitter molecules from synaptic vesicles to pass on their signal, there is an approximately one millisecond delay between when the axon potential reaches the presynaptic terminal and when the neurotransmitter leads to opening of postsynaptic ion channels. Additionally, this signaling is unidirectional. Signaling in electrical synapses, in contrast, is virtually instantaneous (which is important for synapses involved in key reflexes), and some electrical synapses are bidirectional. Electrical synapses are also more reliable as they are less likely to be blocked, and they are important for synchronizing the electrical activity of a group of neurons. For example, electrical synapses in the thalamus are thought to regulate slow-wave sleep, and disruption of these synapses can cause seizures.

Signal Summation

Sometimes a single EPSP is strong enough to induce an action potential in the postsynaptic neuron, but often multiple presynaptic inputs must create EPSPs around the same time for the postsynaptic neuron to be sufficiently depolarized to fire an action potential.

This process is called summation and occurs at the axon hillock, as illustrated in Figure 4.3.8. Additionally, one neuron often has inputs from many presynaptic neurons—some excitatory and some inhibitory—so IPSPs can cancel out EPSPs and vice versa. It is the net change in postsynaptic membrane voltage that determines whether the postsynaptic cell has reached its threshold of excitation needed to fire an action potential. Together, synaptic summation and the threshold for excitation act as a filter so that random "noise" in the system is not transmitted as important information.

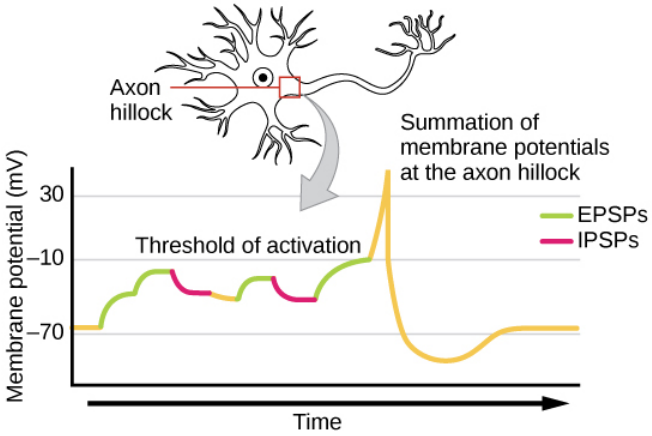


Figure 4.3.8: A single neuron can receive both excitatory and inhibitory inputs from multiple neurons, resulting in local membrane depolarization (EPSP input) and hyperpolarization (IPSP input). All these inputs are added together at the axon hillock. If the EPSPs are strong enough to overcome the IPSPs and reach the threshold of excitation, the neuron will fire.

Everyday Connection: Brain-computer interface

Amyotrophic lateral sclerosis (ALS, also called Lou Gehrig's Disease) is a neurological disease characterized by the degeneration of the motor neurons that control voluntary movements. The disease begins with muscle weakening and lack of coordination and eventually destroys the neurons that control speech, breathing, and swallowing; in the end, the disease can lead to paralysis. At that point, patients require assistance from machines to be able to breathe and to communicate. Several special technologies have been developed to allow "locked-in" patients to communicate with the rest of the world. One technology, for example, allows patients to type out sentences by twitching their cheek. These sentences can then be read aloud by a computer.

A relatively new line of research for helping paralyzed patients, including those with ALS, to communicate and retain a degree of self-sufficiency is called brain-computer interface (BCI) technology and is illustrated in Figure 4.3.9. This technology sounds like something out of science fiction: it allows paralyzed patients to control a computer using only their thoughts. There are several forms of BCI. Some forms use EEG recordings from electrodes taped onto the skull. These recordings contain information from large populations of neurons that can be decoded by a computer. Other forms of BCI require the implantation of an array of electrodes smaller than a postage stamp in the arm and hand area of the motor cortex. This form of BCI, while more invasive, is very powerful as each electrode can record actual action potentials from one or more neurons. These signals are then sent to a computer, which has been trained to decode the signal and feed it to a tool—such as a cursor on a computer screen. This means that a patient with ALS can use e-mail, read the Internet, and communicate with others by thinking of moving his or her hand or arm (even though the paralyzed patient cannot make that bodily movement). Recent advances have allowed a paralyzed locked-in patient who suffered a stroke 15 years ago to control a robotic arm and even to feed herself coffee using BCI technology.

Despite the amazing advancements in BCI technology, it also has limitations. The technology can require many hours of training and long periods of intense concentration for the patient; it can also require brain surgery to implant the devices.

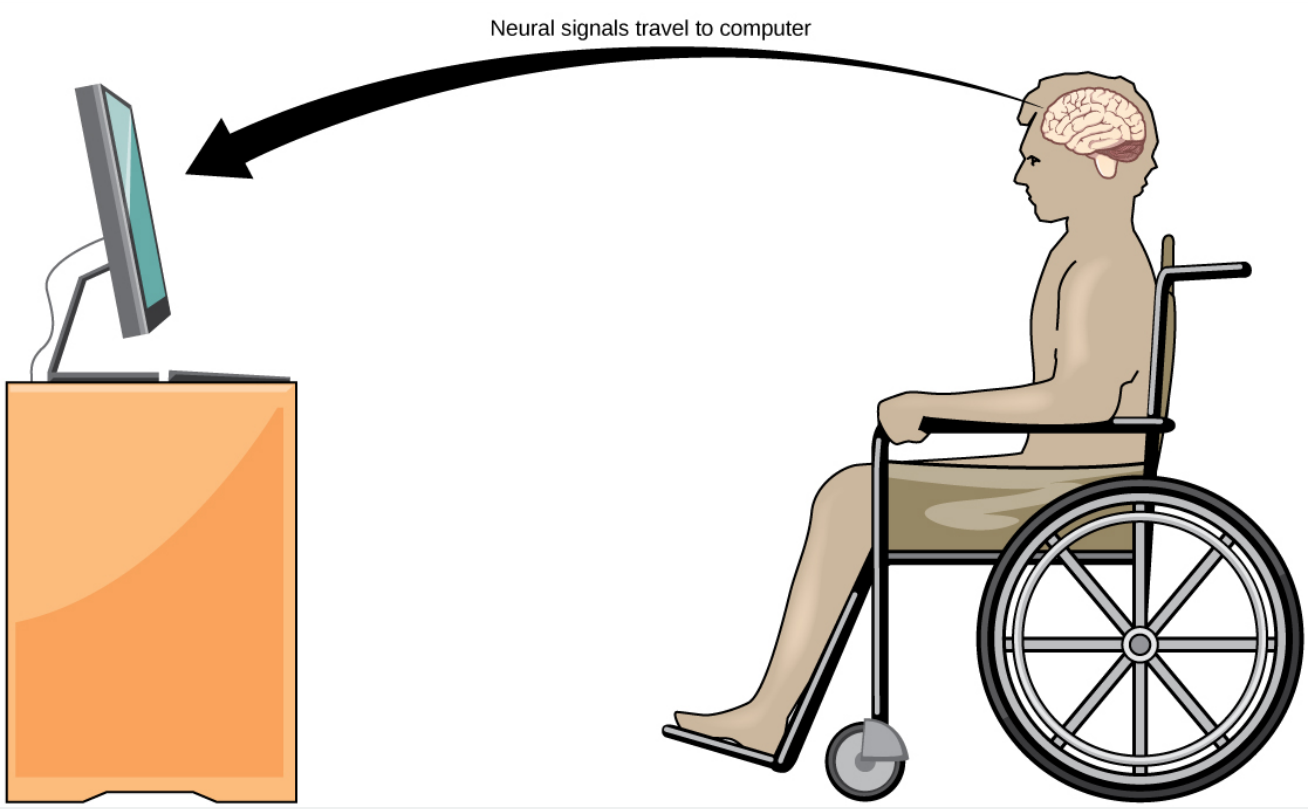
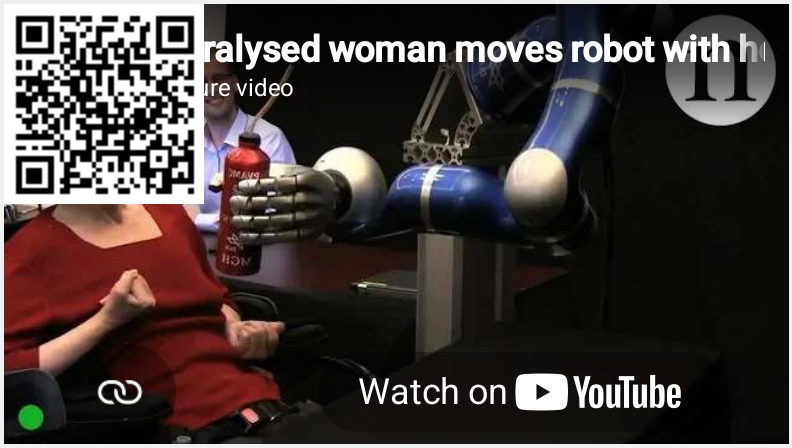


Figure 4.3.9: With brain-computer interface technology, neural signals from a paralyzed patient are collected, decoded, and then fed to a tool, such as a computer, a wheelchair, or a robotic arm.

Link to Learning



Watch this video in which a paralyzed woman use a brain-controlled robotic arm to bring a drink to her mouth, among other images of brain-computer interface technology in action.

Synaptic Plasticity

Synapses are not static structures. They can be weakened or strengthened. They can be broken, and new synapses can be made. Synaptic plasticity allows for these changes, which are all needed for a functioning nervous system. In fact, synaptic plasticity is the basis of learning and memory. Two processes in particular, long-term potentiation (LTP) and long-term depression (LTD) are

important forms of synaptic plasticity that occur in synapses in the hippocampus, a brain region that is involved in storing memories.

Long-term Potentiation (LTP)

Long-term potentiation (LTP) is a persistent strengthening of a synaptic connection. LTP is based on the Hebbian principle: cells that fire together wire together. There are various mechanisms, none fully understood, behind the synaptic strengthening seen with LTP. One known mechanism involves a type of postsynaptic glutamate receptor, called NMDA (N-Methyl-D-aspartate) receptors, shown in Figure 4.3.10. These receptors are normally blocked by magnesium ions; however, when the postsynaptic neuron is depolarized by multiple presynaptic inputs in quick succession (either from one neuron or multiple neurons), the magnesium ions are forced out allowing Ca ions to pass into the postsynaptic cell. Next, Ca^{2+} ions entering the cell initiate a signaling cascade that causes a different type of glutamate receptor, called AMPA (α-amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid) receptors, to be inserted into the postsynaptic membrane, since activated AMPA receptors allow positive ions to enter the cell. So, the next time glutamate is released from the presynaptic membrane, it will have a larger excitatory effect (EPSP) on the postsynaptic cell because the binding of glutamate to these AMPA receptors will allow more positive ions into the cell. The insertion of additional AMPA receptors strengthens the synapse and means that the postsynaptic neuron is more likely to fire in response to presynaptic neurotransmitter release. Some drugs of abuse co-opt the LTP pathway, and this synaptic strengthening can lead to addiction.

Long-term Depression (LTD)

Long-term depression (LTD) is essentially the reverse of LTP: it is a long-term weakening of a synaptic connection. One mechanism known to cause LTD also involves AMPA receptors. In this situation, calcium that enters through NMDA receptors initiates a different signaling cascade, which results in the removal of AMPA receptors from the postsynaptic membrane, as illustrated in Figure 4.3.10. The decrease in AMPA receptors in the membrane makes the postsynaptic neuron less responsive to glutamate released from the presynaptic neuron. While it may seem counterintuitive, LTD may be just as important for learning and memory as LTP. The weakening and pruning of unused synapses allows for unimportant connections to be lost and makes the synapses that have undergone LTP that much stronger by comparison.

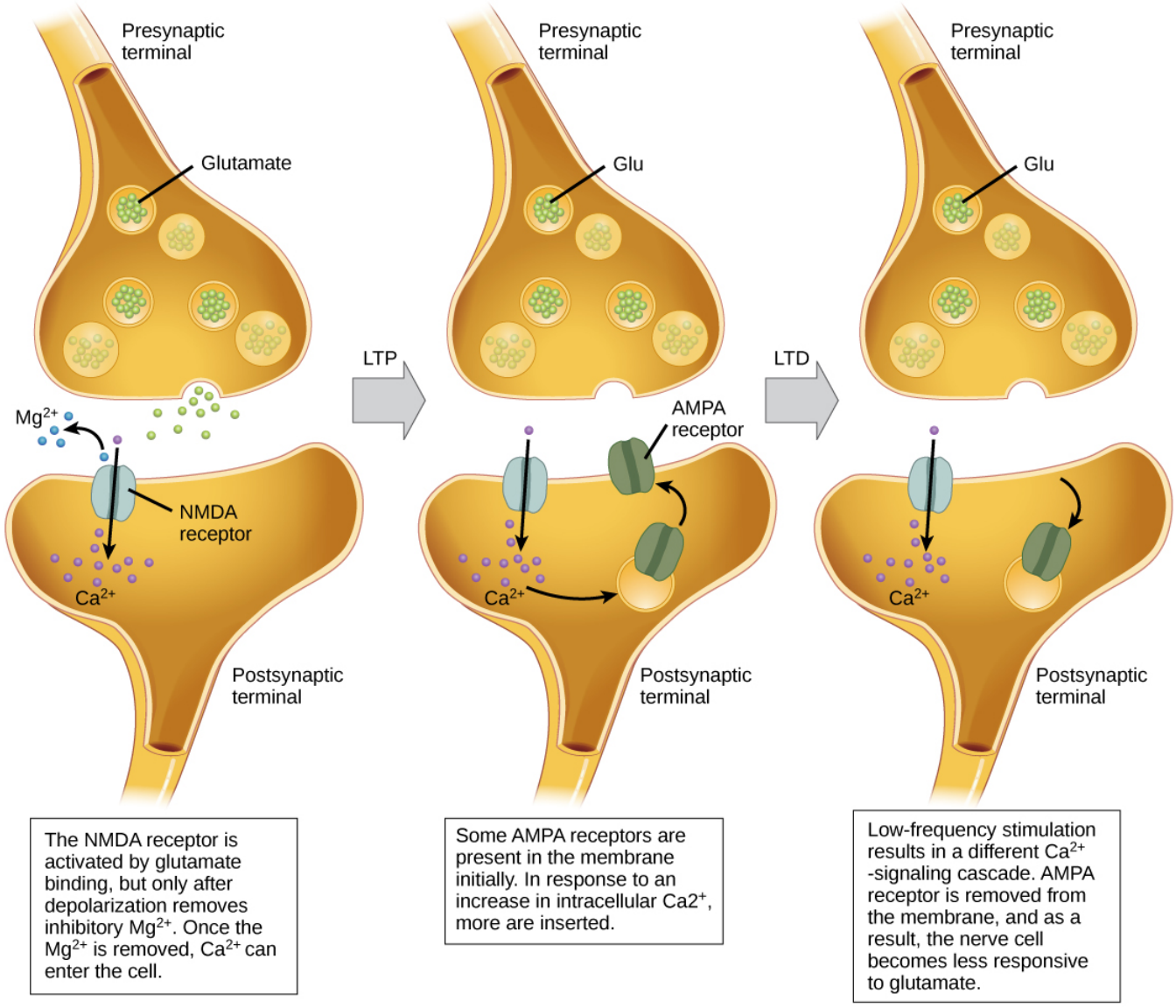


Figure 4.3.10: Calcium entry through postsynaptic NMDA receptors can initiate two different forms of synaptic plasticity: long-term potentiation (LTP) and long-term depression (LTD). LTP arises when a single synapse is repeatedly stimulated. This stimulation causes a calcium- and CaMKII-dependent cellular cascade, which results in the insertion of more AMPA receptors into the postsynaptic membrane. The next time glutamate is released from the presynaptic cell, it will bind to both NMDA and the newly inserted AMPA receptors, thus depolarizing the membrane more efficiently. LTD occurs when few glutamate molecules bind to NMDA receptors at a synapse (due to a low firing rate of the presynaptic neuron). The calcium that does flow through NMDA receptors initiates a different calcineurin and protein phosphatase 1-dependent cascade, which results in the endocytosis of AMPA receptors. This makes the postsynaptic neuron less responsive to glutamate released from the presynaptic neuron.

Summary

Neurons have charged membranes because there are different concentrations of ions inside and outside of the cell. Voltage-gated ion channels control the movement of ions into and out of a neuron. When a neuronal membrane is depolarized to at least the threshold of excitation, an action potential is fired. The action potential is then propagated along a myelinated axon to the axon terminals. In a chemical synapse, the action potential causes release of neurotransmitter molecules into the synaptic cleft. Through binding to postsynaptic receptors, the neurotransmitter can cause excitatory or inhibitory postsynaptic potentials by depolarizing or hyperpolarizing, respectively, the postsynaptic membrane. In electrical synapses, the action potential is directly communicated to the postsynaptic cell through gap junctions—large channel proteins that connect the pre-and postsynaptic membranes. Synapses are not static structures and can be strengthened and weakened. Two mechanisms of synaptic plasticity are long-term potentiation and long-term depression.

Art Connections

Figure 4.3.3: Potassium channel blockers, such as amiodarone and procainamide, which are used to treat abnormal electrical activity in the heart, called cardiac dysrhythmia, impede the movement of K^+ through voltage-gated K^+ channels. Which part of the action potential would you expect potassium channels to affect?

Answer

Potassium channel blockers slow the repolarization phase, but have no effect on depolarization.

Glossary

action potential
self-propagating momentary change in the electrical potential of a neuron (or muscle) membrane

depolarization
change in the membrane potential to a less negative value

excitatory postsynaptic potential (EPSP)
depolarization of a postsynaptic membrane caused by neurotransmitter molecules released from a presynaptic cell

hyperpolarization
change in the membrane potential to a more negative value

inhibitory postsynaptic potential (IPSP)
hyperpolarization of a postsynaptic membrane caused by neurotransmitter molecules released from a presynaptic cell

long-term depression (LTD)
prolonged decrease in synaptic coupling between a pre- and postsynaptic cell

long-term potentiation (LTP)
prolonged increase in synaptic coupling between a pre-and postsynaptic cell

membrane potential
difference in electrical potential between the inside and outside of a cell

refractory period
period after an action potential when it is more difficult or impossible for an action potential to be fired; caused by inactivation of sodium channels and activation of additional potassium channels of the membrane

saltatory conduction
“jumping” of an action potential along an axon from one node of Ranvier to the next

summation
process of multiple presynaptic inputs creating EPSPs around the same time for the postsynaptic neuron to be sufficiently depolarized to fire an action potential

synaptic cleft
space between the presynaptic and postsynaptic membranes

synaptic vesicle
spherical structure that contains a neurotransmitter

threshold of excitation

level of depolarization needed for an action potential to fire

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CHAPTER OVERVIEW

5: The Central and Peripheral Nervous Systems

5.1: The Central Nervous System

5.2: The Peripheral Nervous System

5.3: Nervous System Disorders

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5.1: The Central Nervous System

Skills to Develop

- Identify the spinal cord, cerebral lobes, and other brain areas on a diagram of the brain
- Describe the basic functions of the spinal cord, cerebral lobes, and other brain areas

The central nervous system (CNS) is made up of the brain, a part of which is shown in Figure 5.1.1 and spinal cord and is covered with three layers of protective coverings called meninges (from the Greek word for membrane). The outermost layer is the dura mater (Latin for “hard mother”). As the Latin suggests, the primary function for this thick layer is to protect the brain and spinal cord. The dura mater also contains vein-like structures that carry blood from the brain back to the heart. The middle layer is the web-like arachnoid mater. The last layer is the pia mater (Latin for “soft mother”), which directly contacts and covers the brain and spinal cord like plastic wrap. The space between the arachnoid and pia maters is filled with cerebrospinal fluid (CSF). CSF is produced by a tissue called choroid plexus in fluid-filled compartments in the CNS called ventricles. The brain floats in CSF, which acts as a cushion and shock absorber and makes the brain neutrally buoyant. CSF also functions to circulate chemical substances throughout the brain and into the spinal cord.

The entire brain contains only about 8.5 tablespoons of CSF, but CSF is constantly produced in the ventricles. This creates a problem when a ventricle is blocked—the CSF builds up and creates swelling and the brain is pushed against the skull. This swelling condition is called hydrocephalus (“water head”) and can cause seizures, cognitive problems, and even death if a shunt is not inserted to remove the fluid and pressure.

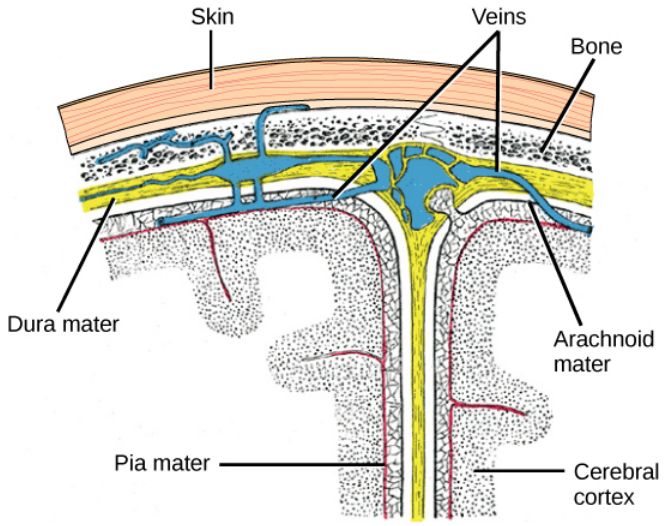


Figure 5.1.1: The cerebral cortex is covered by three layers of meninges: the dura, arachnoid, and pia maters. (credit: modification of work by Gray’s Anatomy)

Brain

The brain is the part of the central nervous system that is contained in the cranial cavity of the skull. It includes the cerebral cortex, limbic system, basal ganglia, thalamus, hypothalamus, and cerebellum. There are three different ways that a brain can be sectioned in order to view internal structures: a sagittal section cuts the brain left to right, as shown in Figure 5.1.2**b**, a coronal section cuts the brain front to back, as shown in Figure 5.1.2**a**, and a horizontal section cuts the brain top to bottom.

Cerebral Cortex

The outermost part of the brain is a thick piece of nervous system tissue called the cerebral cortex, which is folded into hills called gyri (singular: gyrus) and valleys called sulci (singular: sulcus). The cortex is made up of two hemispheres—right and left—which are separated by a large sulcus. A thick fiber bundle called the corpus callosum (Latin: “tough body”) connects the two hemispheres and allows information to be passed from one side to the other. Although there are some brain functions that are localized more to one hemisphere than the other, the functions of the two hemispheres are largely redundant. In fact, sometimes (very rarely) an

entire hemisphere is removed to treat severe epilepsy. While patients do suffer some deficits following the surgery, they can have surprisingly few problems, especially when the surgery is performed on children who have very immature nervous systems.

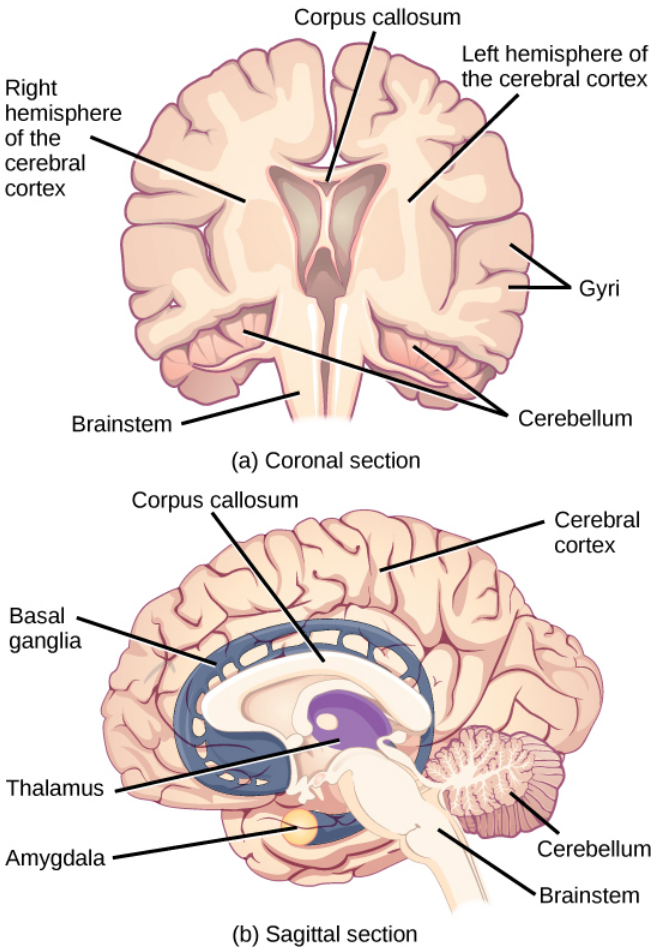


Figure 5.1.2: These illustrations show the (a) coronal and (b) sagittal sections of the human brain.

In other surgeries to treat severe epilepsy, the corpus callosum is cut instead of removing an entire hemisphere. This causes a condition called split-brain, which gives insights into unique functions of the two hemispheres. For example, when an object is presented to patients' left visual field, they may be unable to verbally name the object (and may claim to not have seen an object at all). This is because the visual input from the left visual field crosses and enters the right hemisphere and cannot then signal to the speech center, which generally is found in the left side of the brain. Remarkably, if a split-brain patient is asked to pick up a specific object out of a group of objects with the left hand, the patient will be able to do so but will still be unable to vocally identify it.

Link to Learning

See this website to learn more about split-brain patients and to play a game where you can model the split-brain experiments yourself.

Each cortical hemisphere contains regions called lobes that are involved in different functions. Scientists use various techniques to determine what brain areas are involved in different functions: they examine patients who have had injuries or diseases that affect specific areas and see how those areas are related to functional deficits. They also conduct animal studies where they stimulate brain areas and see if there are any behavioral changes. They use a technique called transmagnetic stimulation (TMS) to temporarily deactivate specific parts of the cortex using strong magnets placed outside the head; and they use functional magnetic resonance imaging (fMRI) to look at changes in oxygenated blood flow in particular brain regions that correlate with specific behavioral tasks. These techniques, and others, have given great insight into the functions of different brain regions but have also showed that any given brain area can be involved in more than one behavior or process, and any given behavior or process generally involves neurons in multiple brain areas. That being said, each hemisphere of the mammalian cerebral cortex can be broken down into four functionally and spatially defined lobes: frontal, parietal, temporal, and occipital. Figure 5.1.3 illustrates these four lobes of the human cerebral cortex.

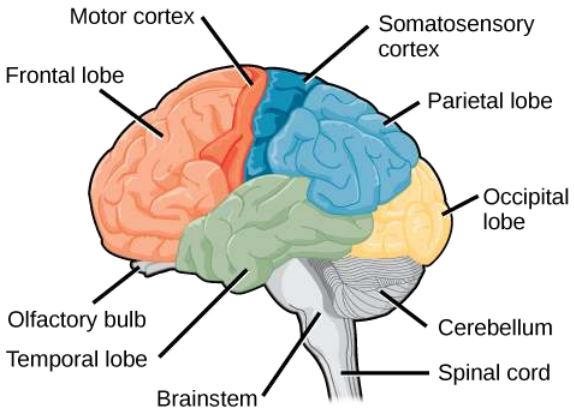


Figure 5.1.3: The human cerebral cortex includes the frontal, parietal, temporal, and occipital lobes.

The frontal lobe is located at the front of the brain, over the eyes. This lobe contains the olfactory bulb, which processes smells. The frontal lobe also contains the motor cortex, which is important for planning and implementing movement. Areas within the motor cortex map to different muscle groups, and there is some organization to this map, as shown in Figure 5.1.4. For example, the neurons that control movement of the fingers are next to the neurons that control movement of the hand. Neurons in the frontal lobe also control cognitive functions like maintaining attention, speech, and decision-making. Studies of humans who have damaged their frontal lobes show that parts of this area are involved in personality, socialization, and assessing risk.

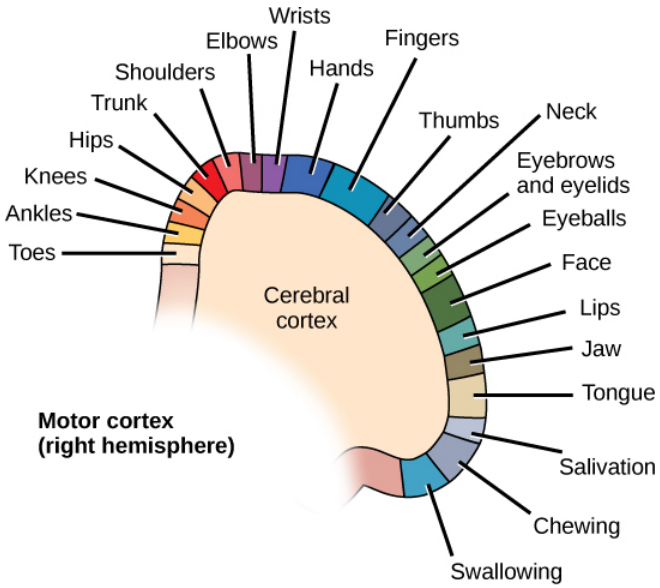


Figure 5.1.4: Different parts of the motor cortex control different muscle groups. Muscle groups that are neighbors in the body are generally controlled by neighboring regions of the motor cortex as well. For example, the neurons that control finger movement are near the neurons that control hand movement.

The parietal lobe is located at the top of the brain. Neurons in the parietal lobe are involved in speech and also reading. Two of the parietal lobe's main functions are processing somatosensation—touch sensations like pressure, pain, heat, cold—and processing proprioception—the sense of how parts of the body are oriented in space. The parietal lobe contains a somatosensory map of the body similar to the motor cortex.

The occipital lobe is located at the back of the brain. It is primarily involved in vision—seeing, recognizing, and identifying the visual world.

The temporal lobe is located at the base of the brain by your ears and is primarily involved in processing and interpreting sounds. It also contains the hippocampus (Greek for "seahorse")—a structure that processes memory formation. The hippocampus is illustrated in Figure 5.1.6. The role of the hippocampus in memory was partially determined by studying one famous epileptic patient, HM, who had both sides of his hippocampus removed in an attempt to cure his epilepsy. His seizures went away, but he could no longer form new memories (although he could remember some facts from before his surgery and could learn new motor tasks).

Evolution Connection: Cerebral Cortex

Compared to other vertebrates, mammals have exceptionally large brains for their body size. An entire alligator's brain, for example, would fill about one and a half teaspoons. This increase in brain to body size ratio is especially pronounced in apes, whales, and dolphins. While this increase in overall brain size doubtlessly played a role in the evolution of complex behaviors unique to mammals, it does not tell the whole story. Scientists have found a relationship between the relatively high surface area of the cortex and the intelligence and complex social behaviors exhibited by some mammals. This increased surface area is due, in part, to increased folding of the cortical sheet (more sulci and gyri). For example, a rat cortex is very smooth with very few sulci and gyri. Cat and sheep cortices have more sulci and gyri. Chimps, humans, and dolphins have even more.

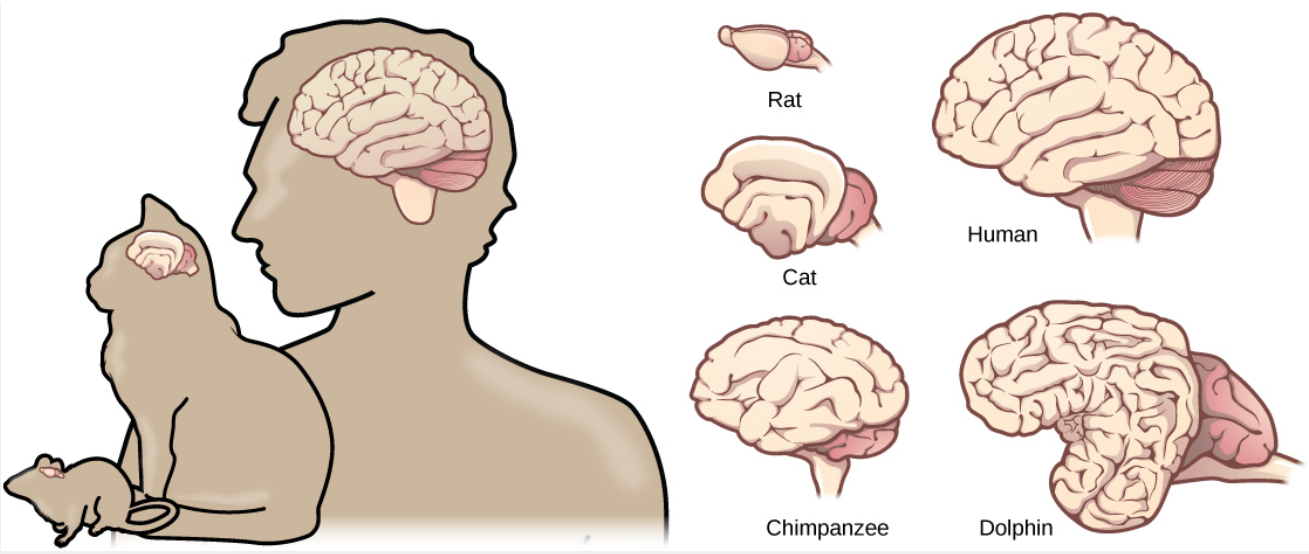


Figure 5.1.5: Mammals have larger brain-to-body ratios than other vertebrates. Within mammals, increased cortical folding and surface area is correlated with complex behavior.

Basal Ganglia

Interconnected brain areas called the basal ganglia (or basal nuclei) play important roles in movement control and posture. Damage to the basal ganglia, as in Parkinson's disease, leads to motor impairments like a shuffling gait when walking. The basal ganglia also regulate motivation. For example, when a wasp sting led to bilateral basal ganglia damage in a 25-year-old businessman, he began to spend all his days in bed and showed no interest in anything or anybody. But when he was externally stimulated—as when someone asked to play a card game with him—he was able to function normally. Interestingly, he and other similar patients do not report feeling bored or frustrated by their state.

Thalamus

The thalamus (Greek for "inner chamber"), illustrated in Figure 5.1.6, acts as a gateway to and from the cortex. It receives sensory and motor inputs from the body and also receives feedback from the cortex. This feedback mechanism can modulate conscious awareness of sensory and motor inputs depending on the attention and arousal state of the animal. The thalamus helps regulate consciousness, arousal, and sleep states. A rare genetic disorder called fatal familial insomnia causes the degeneration of thalamic neurons and glia. This disorder prevents affected patients from being able to sleep, among other symptoms, and is eventually fatal.

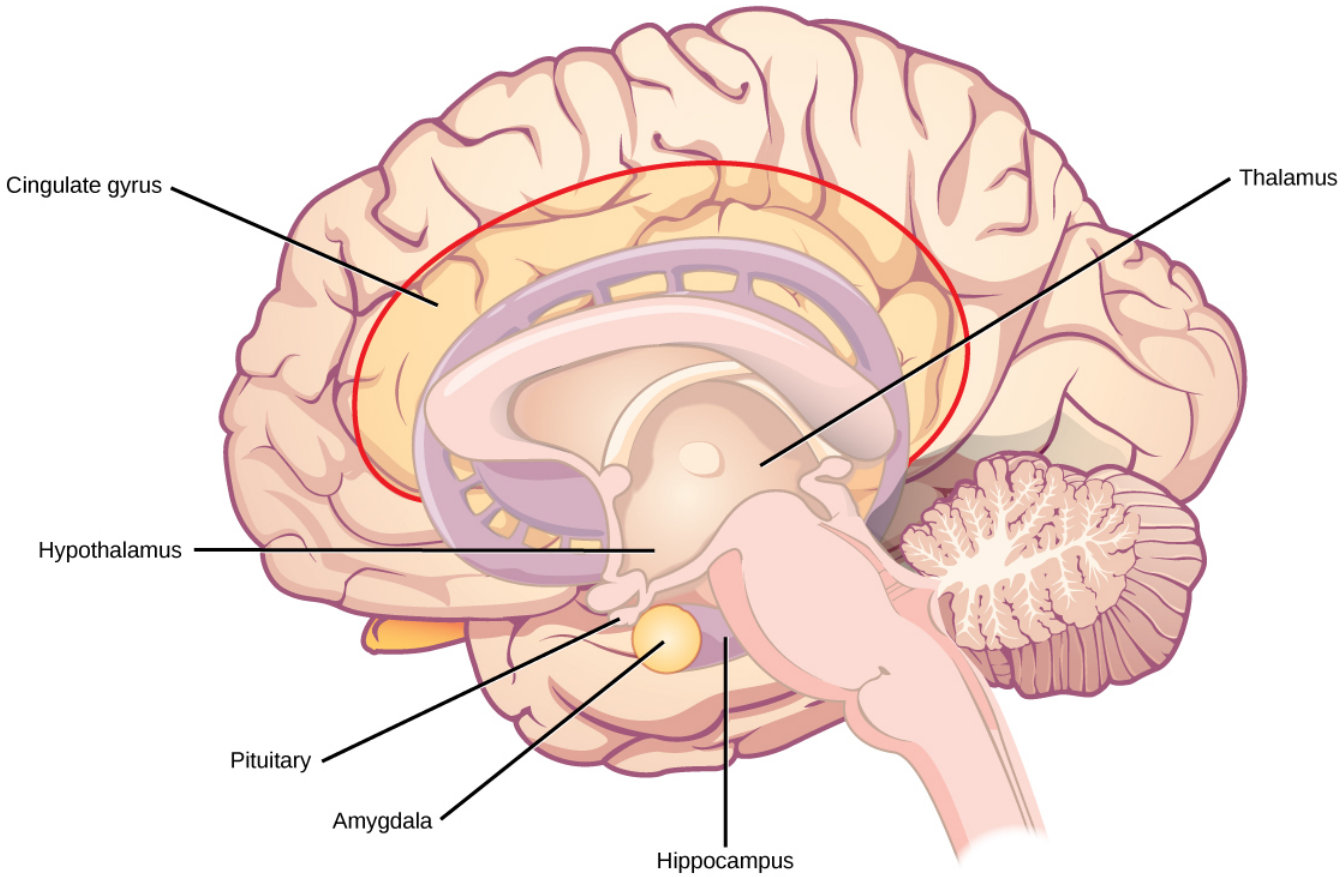


Figure 5.1.6: The limbic system regulates emotion and other behaviors. It includes parts of the cerebral cortex located near the center of the brain, including the cingulate gyrus and the hippocampus as well as the thalamus, hypothalamus and amygdala.

Hypothalamus

Below the thalamus is the hypothalamus, shown in Figure 5.1.6. The hypothalamus controls the endocrine system by sending signals to the pituitary gland, a pea-sized endocrine gland that releases several different hormones that affect other glands as well as other cells. This relationship means that the hypothalamus regulates important behaviors that are controlled by these hormones. The hypothalamus is the body's thermostat—it makes sure key functions like food and water intake, energy expenditure, and body temperature are kept at appropriate levels. Neurons within the hypothalamus also regulate circadian rhythms, sometimes called sleep cycles.

Limbic System

The limbic system is a connected set of structures that regulates emotion, as well as behaviors related to fear and motivation. It plays a role in memory formation and includes parts of the thalamus and hypothalamus as well as the hippocampus. One important structure within the limbic system is a temporal lobe structure called the amygdala (Greek for "almond"), illustrated in Figure 5.1.6. The two amygdala are important both for the sensation of fear and for recognizing fearful faces. The cingulate gyrus helps regulate emotions and pain.

Cerebellum

The cerebellum (Latin for "little brain"), shown in Figure 5.1.3, sits at the base of the brain on top of the brainstem. The cerebellum controls balance and aids in coordinating movement and learning new motor tasks.

Brainstem

The brainstem, illustrated in Figure 5.1.3, connects the rest of the brain with the spinal cord. It consists of the midbrain, medulla oblongata, and the pons. Motor and sensory neurons extend through the brainstem allowing for the relay of signals between the brain and spinal cord. Ascending neural pathways cross in this section of the brain allowing the left hemisphere of the cerebrum to

control the right side of the body and vice versa. The brainstem coordinates motor control signals sent from the brain to the body. The brainstem controls several important functions of the body including alertness, arousal, breathing, blood pressure, digestion, heart rate, swallowing, walking, and sensory and motor information integration.

Spinal Cord

Connecting to the brainstem and extending down the body through the spinal column is the spinal cord, shown in Figure 5.1.3. The spinal cord is a thick bundle of nerve tissue that carries information about the body to the brain and from the brain to the body. The spinal cord is contained within the bones of the vertebrate column but is able to communicate signals to and from the body through its connections with spinal nerves (part of the peripheral nervous system). A cross-section of the spinal cord looks like a white oval containing a gray butterfly-shape, as illustrated in Figure 5.1.7. Myelinated axons make up the "white matter" and neuron and glial cell bodies make up the "gray matter." Gray matter is also composed of interneurons, which connect two neurons each located in different parts of the body. Axons and cell bodies in the dorsal (facing the back of the animal) spinal cord convey mostly sensory information from the body to the brain. Axons and cell bodies in the ventral (facing the front of the animal) spinal cord primarily transmit signals controlling movement from the brain to the body.

The spinal cord also controls motor reflexes. These reflexes are quick, unconscious movements—like automatically removing a hand from a hot object. Reflexes are so fast because they involve local synaptic connections. For example, the knee reflex that a doctor tests during a routine physical is controlled by a single synapse between a sensory neuron and a motor neuron. While a reflex may only require the involvement of one or two synapses, synapses with interneurons in the spinal column transmit information to the brain to convey what happened (the knee jerked, or the hand was hot).

In the United States, there around 10,000 spinal cord injuries each year. Because the spinal cord is the information superhighway connecting the brain with the body, damage to the spinal cord can lead to paralysis. The extent of the paralysis depends on the location of the injury along the spinal cord and whether the spinal cord was completely severed. For example, if the spinal cord is damaged at the level of the neck, it can cause paralysis from the neck down, whereas damage to the spinal column further down may limit paralysis to the legs. Spinal cord injuries are notoriously difficult to treat because spinal nerves do not regenerate, although ongoing research suggests that stem cell transplants may be able to act as a bridge to reconnect severed nerves. Researchers are also looking at ways to prevent the inflammation that worsens nerve damage after injury. One such treatment is to pump the body with cold saline to induce hypothermia. This cooling can prevent swelling and other processes that are thought to worsen spinal cord injuries.

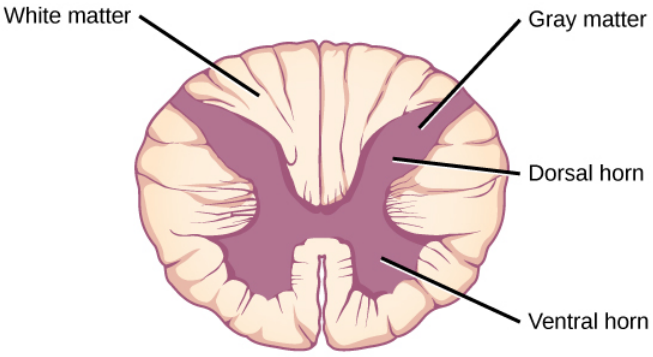


Figure 5.1.7: A cross-section of the spinal cord shows gray matter (containing cell bodies and interneurons) and white matter (containing axons).

Summary

The vertebrate central nervous system contains the brain and the spinal cord, which are covered and protected by three meninges. The brain contains structurally and functionally defined regions. In mammals, these include the cortex (which can be broken down into four primary functional lobes: frontal, temporal, occipital, and parietal), basal ganglia, thalamus, hypothalamus, limbic system, cerebellum, and brainstem—although structures in some of these designations overlap. While functions may be primarily localized to one structure in the brain, most complex functions, like language and sleep, involve neurons in multiple brain regions. The spinal cord is the information superhighway that connects the brain with the rest of the body through its connections with peripheral nerves. It transmits sensory and motor input and also controls motor reflexes.

Glossary

amygdala
structure within the limbic system that processes fear

arachnoid mater
spiderweb-like middle layer of the meninges that cover the central nervous system

basal ganglia
interconnected collections of cells in the brain that are involved in movement and motivation; also known as basal nuclei

basal nuclei
see basal ganglia

brainstem
portion of the brain that connects with the spinal cord; controls basic nervous system functions like breathing, heart rate, and swallowing

cerebellum
brain structure involved in posture, motor coordination, and learning new motor actions

cerebral cortex
outermost sheet of brain tissue; involved in many higher-order functions

choroid plexus
spongy tissue within ventricles that produces cerebrospinal fluid

cingulate gyrus
helps regulate emotions and pain; thought to directly drive the body's conscious response to unpleasant experiences

corpus callosum
thick fiber bundle that connects the cerebral hemispheres

cerebrospinal fluid (CSF)
clear liquid that surrounds the brain and spinal cord and fills the ventricles and central canal; acts as a shock absorber and circulates material throughout the brain and spinal cord.

dura mater
tough outermost layer that covers the central nervous system

frontal lobe
part of the cerebral cortex that contains the motor cortex and areas involved in planning, attention, and language

gyrus
(plural: gyri) ridged protrusions in the cortex

hippocampus
brain structure in the temporal lobe involved in processing memories

hypothalamus
brain structure that controls hormone release and body homeostasis

limbic system

connected brain areas that process emotion and motivation

meninge
membrane that covers and protects the central nervous system

occipital lobe
part of the cerebral cortex that contains visual cortex and processes visual stimuli

parietal lobe
part of the cerebral cortex involved in processing touch and the sense of the body in space

pia mater
thin membrane layer directly covering the brain and spinal cord

proprioception
sense about how parts of the body are oriented in space

somatosensation
sense of touch

spinal cord
thick fiber bundle that connects the brain with peripheral nerves; transmits sensory and motor information; contains neurons that control motor reflexes

sulcus
(plural: sulci) indents or “valleys” in the cortex

temporal lobe
part of the cerebral cortex that processes auditory input; parts of the temporal lobe are involved in speech, memory, and emotion processing

thalamus
brain area that relays sensory information to the cortex

ventricle
cavity within brain that contains cerebrospinal fluid

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5.2: The Peripheral Nervous System

Skills to Develop

- Describe the organization and functions of the sympathetic and parasympathetic nervous systems
- Describe the organization and function of the sensory-somatic nervous system

The peripheral nervous system (PNS) is the connection between the central nervous system and the rest of the body. The CNS is like the power plant of the nervous system. It creates the signals that control the functions of the body. The PNS is like the wires that go to individual houses. Without those “wires,” the signals produced by the CNS could not control the body (and the CNS would not be able to receive sensory information from the body either).

The PNS can be broken down into the autonomic nervous system, which controls bodily functions without conscious control, and the sensory-somatic nervous system, which transmits sensory information from the skin, muscles, and sensory organs to the CNS and sends motor commands from the CNS to the muscles.

Autonomic Nervous System

Art Connection

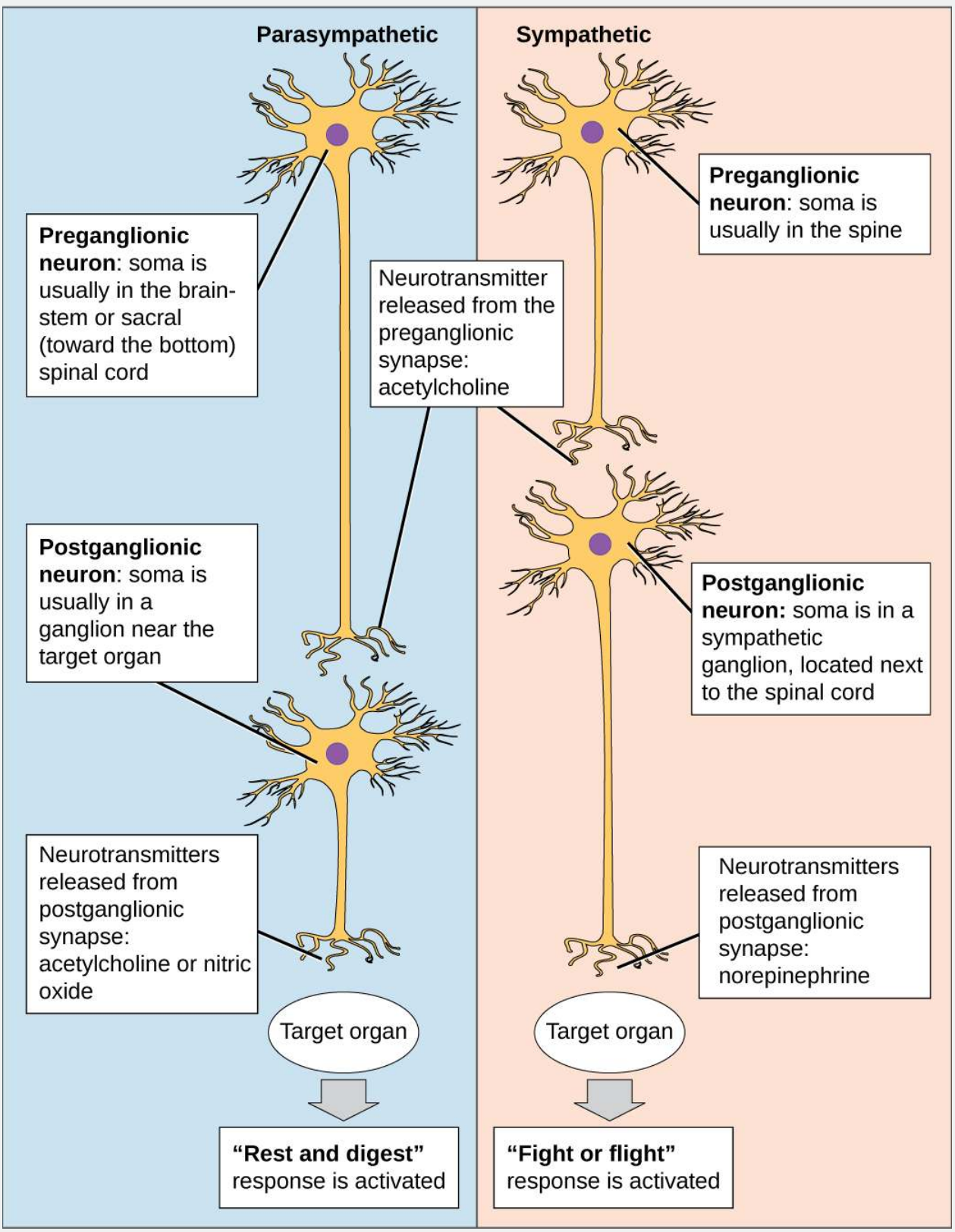


Figure 5.2.1: In the autonomic nervous system, a preganglionic neuron of the CNS synapses with a postganglionic neuron of the PNS. The postganglionic neuron, in turn, acts on a target organ. Autonomic responses are mediated by the sympathetic and the parasympathetic systems, which are antagonistic to one another. The sympathetic system activates the "fight or flight" response, while the parasympathetic system activates the "rest and digest" response.

Which of the following statements is false?

A. The parasympathetic pathway is responsible for resting the body, while the sympathetic pathway is responsible for preparing for an emergency.
B. Most preganglionic neurons in the sympathetic pathway originate in the spinal cord.
C. Slowing of the heartbeat is a parasympathetic response.
D. Parasympathetic neurons are responsible for releasing norepinephrine on the target organ, while sympathetic neurons are responsible for releasing acetylcholine.

The autonomic nervous system serves as the relay between the CNS and the internal organs. It controls the lungs, the heart, smooth muscle, and exocrine and endocrine glands. The autonomic nervous system controls these organs largely without conscious control; it can continuously monitor the conditions of these different systems and implement changes as needed. Signaling to the target tissue usually involves two synapses: a preganglionic neuron (originating in the CNS) synapses to a neuron in a ganglion that, in turn, synapses on the target organ, as illustrated in Figure 5.2.1. There are two divisions of the autonomic nervous system that often have opposing effects: the sympathetic nervous system and the parasympathetic nervous system.

Sympathetic Nervous System

The sympathetic nervous system is responsible for the “fight or flight” response that occurs when an animal encounters a dangerous situation. One way to remember this is to think of the surprise a person feels when encountering a snake (“snake” and “sympathetic” both begin with “s”). Examples of functions controlled by the sympathetic nervous system include an accelerated heart rate and inhibited digestion. These functions help prepare an organism’s body for the physical strain required to escape a potentially dangerous situation or to fend off a predator.

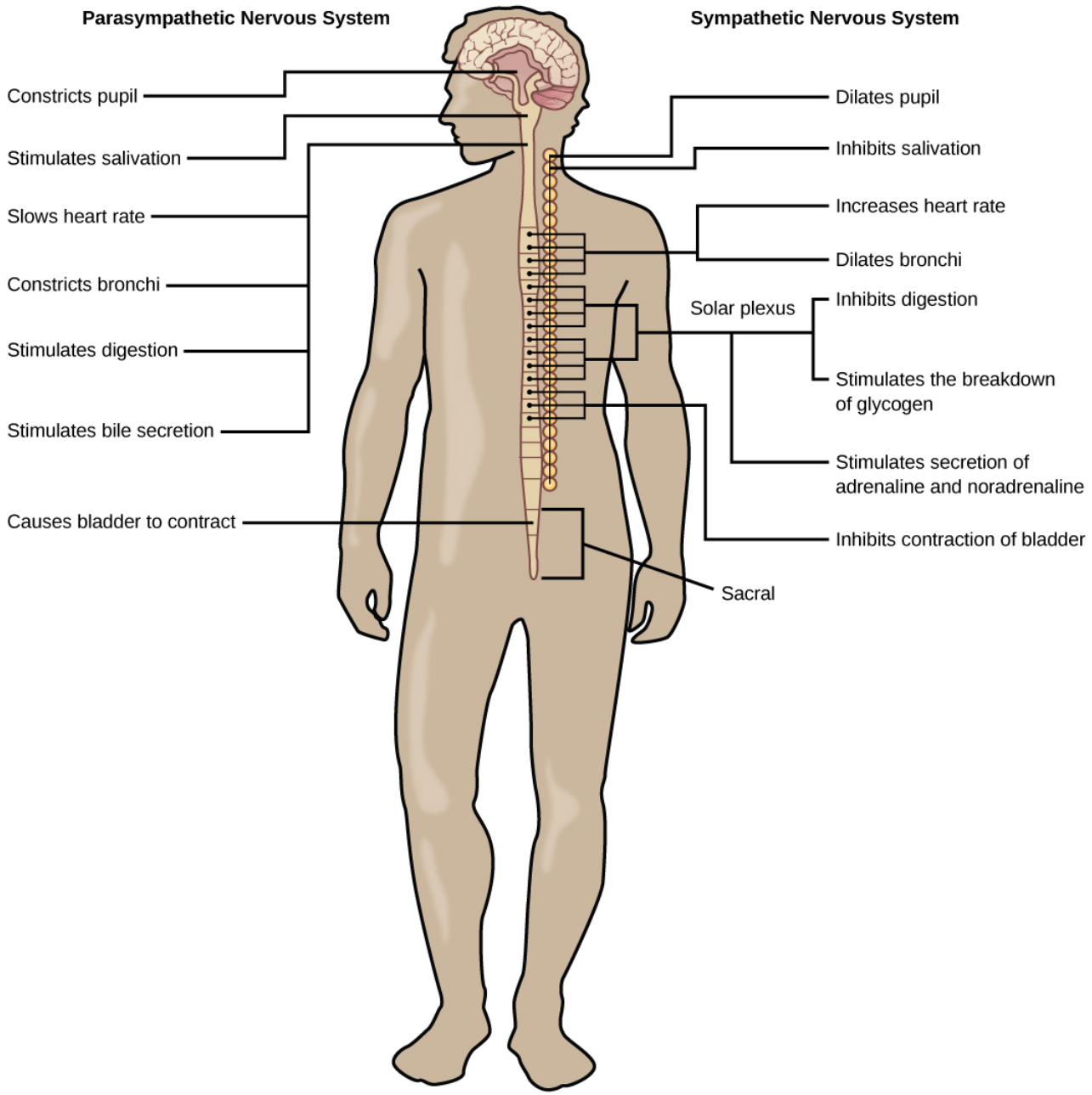


Figure 5.2.2: The sympathetic and parasympathetic nervous systems often have opposing effects on target organs.

Most preganglionic neurons in the sympathetic nervous system originate in the spinal cord, as illustrated in Figure 5.2.2. The axons of these neurons release acetylcholine on postganglionic neurons within sympathetic ganglia (the sympathetic ganglia form a chain that extends alongside the spinal cord). The acetylcholine activates the postganglionic neurons. Postganglionic neurons then release norepinephrine onto target organs. As anyone who has ever felt a rush before a big test, speech, or athletic event can attest, the effects of the sympathetic nervous system are quite pervasive. This is both because one preganglionic neuron synapses on multiple postganglionic neurons, amplifying the effect of the original synapse, and because the adrenal gland also releases norepinephrine (and the closely related hormone epinephrine) into the blood stream. The physiological effects of this norepinephrine release include dilating the trachea and bronchi (making it easier for the animal to breathe), increasing heart rate, and moving blood from the skin to the heart, muscles, and brain (so the animal can think and run). The strength and speed of the sympathetic response helps an organism avoid danger, and scientists have found evidence that it may also increase LTP—allowing the animal to remember the dangerous situation and avoid it in the future.

Parasympathetic Nervous System

While the sympathetic nervous system is activated in stressful situations, the parasympathetic nervous system allows an animal to "rest and digest." One way to remember this is to think that during a restful situation like a picnic, the parasympathetic nervous system is in control ("picnic" and "parasympathetic" both start with "p"). Parasympathetic preganglionic neurons have cell bodies located in the brainstem and in the sacral (toward the bottom) spinal cord, as shown in Figure 5.2.2. The axons of the preganglionic neurons release acetylcholine on the postganglionic neurons, which are generally located very near the target organs. Most postganglionic neurons release acetylcholine onto target organs, although some release nitric oxide.

The parasympathetic nervous system resets organ function after the sympathetic nervous system is activated (the common adrenaline dump you feel after a 'fight-or-flight' event). Effects of acetylcholine release on target organs include slowing of heart rate, lowered blood pressure, and stimulation of digestion.

Sensory-Somatic Nervous System

The sensory-somatic nervous system is made up of cranial and spinal nerves and contains both sensory and motor neurons. Sensory neurons transmit sensory information from the skin, skeletal muscle, and sensory organs to the CNS. Motor neurons transmit messages about desired movement from the CNS to the muscles to make them contract. Without its sensory-somatic nervous system, an animal would be unable to process any information about its environment (what it sees, feels, hears, and so on) and could not control motor movements. Unlike the autonomic nervous system, which has two synapses between the CNS and the target organ, sensory and motor neurons have only one synapse—one ending of the neuron is at the organ and the other directly contacts a CNS neuron. Acetylcholine is the main neurotransmitter released at these synapses.

Humans have 12 cranial nerves, nerves that emerge from or enter the skull (cranium), as opposed to the spinal nerves, which emerge from the vertebral column. Each cranial nerve is accorded a name, which are detailed in Figure 5.2.3. Some cranial nerves transmit only sensory information. For example, the olfactory nerve transmits information about smells from the nose to the brainstem. Other cranial nerves transmit almost solely motor information. For example, the oculomotor nerve controls the opening and closing of the eyelid and some eye movements. Other cranial nerves contain a mix of sensory and motor fibers. For example, the glossopharyngeal nerve has a role in both taste (sensory) and swallowing (motor).

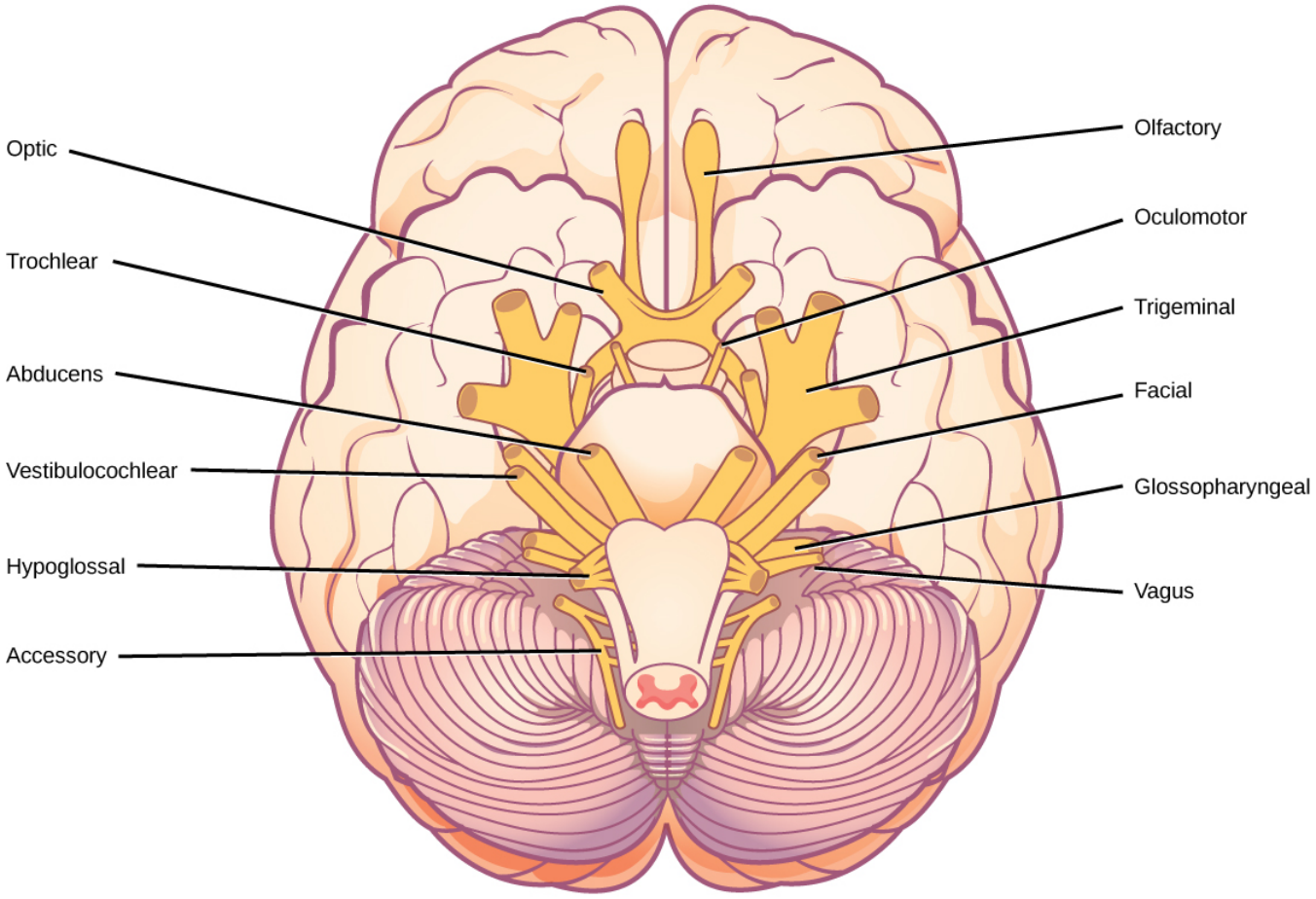


Figure 5.2.3: The human brain contains 12 cranial nerves that receive sensory input and control motor output for the head and neck.

Spinal nerves transmit sensory and motor information between the spinal cord and the rest of the body. Each of the 31 spinal nerves (in humans) contains both sensory and motor axons. The sensory neuron cell bodies are grouped in structures called dorsal root ganglia and are shown in Figure 5.2.4. Each sensory neuron has one projection—with a sensory receptor ending in skin, muscle, or sensory organs—and another that synapses with a neuron in the dorsal spinal cord. Motor neurons have cell bodies in the ventral gray matter of the spinal cord that project to muscle through the ventral root. These neurons are usually stimulated by interneurons within the spinal cord but are sometimes directly stimulated by sensory neurons.

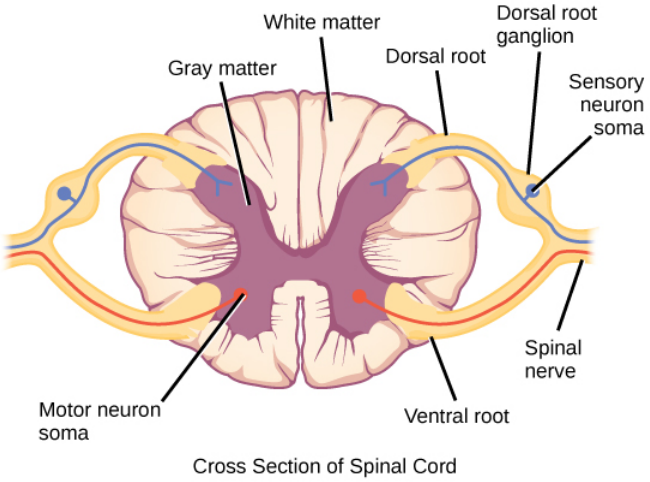


Figure 5.2.4: Spinal nerves contain both sensory and motor axons. The somas of sensory neurons are located in dorsal root ganglia. The somas of motor neurons are found in the ventral portion of the gray matter of the spinal cord.

Summary

The peripheral nervous system contains both the autonomic and sensory-somatic nervous systems. The autonomic nervous system provides unconscious control over visceral functions and has two divisions: the sympathetic and parasympathetic nervous systems. The sympathetic nervous system is activated in stressful situations to prepare the animal for a “fight or flight” response. The parasympathetic nervous system is active during restful periods. The sensory-somatic nervous system is made of cranial and spinal nerves that transmit sensory information from skin and muscle to the CNS and motor commands from the CNS to the muscles.

Art Connections

Figure 5.2.1: Which of the following statements is false?

A. The parasympathetic pathway is responsible for relaxing the body, while the sympathetic pathway is responsible for preparing for an emergency.
B. Most preganglionic neurons in the sympathetic pathway originate in the spinal cord.
C. Slowing of the heartbeat is a parasympathetic response.
D. Parasympathetic neurons are responsible for releasing norepinephrine on the target organ, while sympathetic neurons are responsible for releasing acetylcholine.

Answer

D

Glossary

acetylcholine
neurotransmitter released by neurons in the central nervous system and peripheral nervous system

autonomic nervous system
part of the peripheral nervous system that controls bodily functions

cranial nerve
sensory and/or motor nerve that emanates from the brain

norepinephrine
neurotransmitter and hormone released by activation of the sympathetic nervous system

parasympathetic nervous system
division of autonomic nervous system that regulates visceral functions during rest and digestion

sensory-somatic nervous system
system of sensory and motor nerves

spinal nerve
nerve projecting between skin or muscle and spinal cord

sympathetic nervous system
division of autonomic nervous system activated during stressful “fight or flight” situations

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5.3: Nervous System Disorders

Skills to Develop

- Describe the symptoms, potential causes, and treatment of several examples of nervous system disorders

A nervous system that functions correctly is a fantastically complex, well-oiled machine—synapses fire appropriately, muscles move when needed, memories are formed and stored, and emotions are well regulated. Unfortunately, each year millions of people in the United States deal with some sort of nervous system disorder. While scientists have discovered potential causes of many of these diseases, and viable treatments for some, ongoing research seeks to find ways to better prevent and treat all of these disorders.

Neurodegenerative Disorders

Neurodegenerative disorders are illnesses characterized by a loss of nervous system functioning that are usually caused by neuronal death. These diseases generally worsen over time as more and more neurons die. The symptoms of a particular neurodegenerative disease are related to where in the nervous system the death of neurons occurs. Spinocerebellar ataxia, for example, leads to neuronal death in the cerebellum. The death of these neurons causes problems in balance and walking. Neurodegenerative disorders include Huntington's disease, amyotrophic lateral sclerosis, Alzheimer's disease and other types of dementia disorders, and Parkinson's disease. Here, Alzheimer's and Parkinson's disease will be discussed in more depth.

Alzheimer's Disease

Alzheimer's disease is the most common cause of dementia in the elderly. In 2012, an estimated 5.4 million Americans suffered from Alzheimer's disease, and payments for their care are estimated at $200 billion. Roughly one in every eight people age 65 or older has the disease. Due to the aging of the baby-boomer generation, there are projected to be as many as 13 million Alzheimer's patients in the United States in the year 2050.

Symptoms of Alzheimer's disease include disruptive memory loss, confusion about time or place, difficulty planning or executing tasks, poor judgment, and personality changes. Problems smelling certain scents can also be indicative of Alzheimer's disease and may serve as an early warning sign. Many of these symptoms are also common in people who are aging normally, so it is the severity and longevity of the symptoms that determine whether a person is suffering from Alzheimer's.

Alzheimer's disease was named for Alois Alzheimer, a German psychiatrist who published a report in 1911 about a woman who showed severe dementia symptoms. Along with his colleagues, he examined the woman's brain following her death and reported the presence of abnormal clumps, which are now called amyloid plaques, along with tangled brain fibers called neurofibrillary tangles. Amyloid plaques, neurofibrillary tangles, and an overall shrinking of brain volume are commonly seen in the brains of Alzheimer's patients. Loss of neurons in the hippocampus is especially severe in advanced Alzheimer's patients. Figure 5.3.1 compares a normal brain to the brain of an Alzheimer's patient. Many research groups are examining the causes of these hallmarks of the disease.

One form of the disease is usually caused by mutations in one of three known genes. This rare form of early onset Alzheimer's disease affects fewer than five percent of patients with the disease and causes dementia beginning between the ages of 30 and 60. The more prevalent, late-onset form of the disease likely also has a genetic component. One particular gene, apolipoprotein E (APOE) has a variant (E4) that increases a carrier's likelihood of getting the disease. Many other genes have been identified that might be involved in the pathology.

Link to Learning

Visit this website for video links discussing genetics and Alzheimer's disease.

Unfortunately, there is no cure for Alzheimer's disease. Current treatments focus on managing the symptoms of the disease. Because decrease in the activity of cholinergic neurons (neurons that use the neurotransmitter acetylcholine) is common in Alzheimer's disease, several drugs used to treat the disease work by increasing acetylcholine neurotransmission, often by inhibiting the enzyme that breaks down acetylcholine in the synaptic cleft. Other clinical interventions focus on behavioral therapies like psychotherapy, sensory therapy, and cognitive exercises. Since Alzheimer's disease appears to hijack the normal aging process,

research into prevention is prevalent. Smoking, obesity, and cardiovascular problems may be risk factors for the disease, so treatments for those may also help to prevent Alzheimer's disease. Some studies have shown that people who remain intellectually active by playing games, reading, playing musical instruments, and being socially active in later life have a reduced risk of developing the disease.

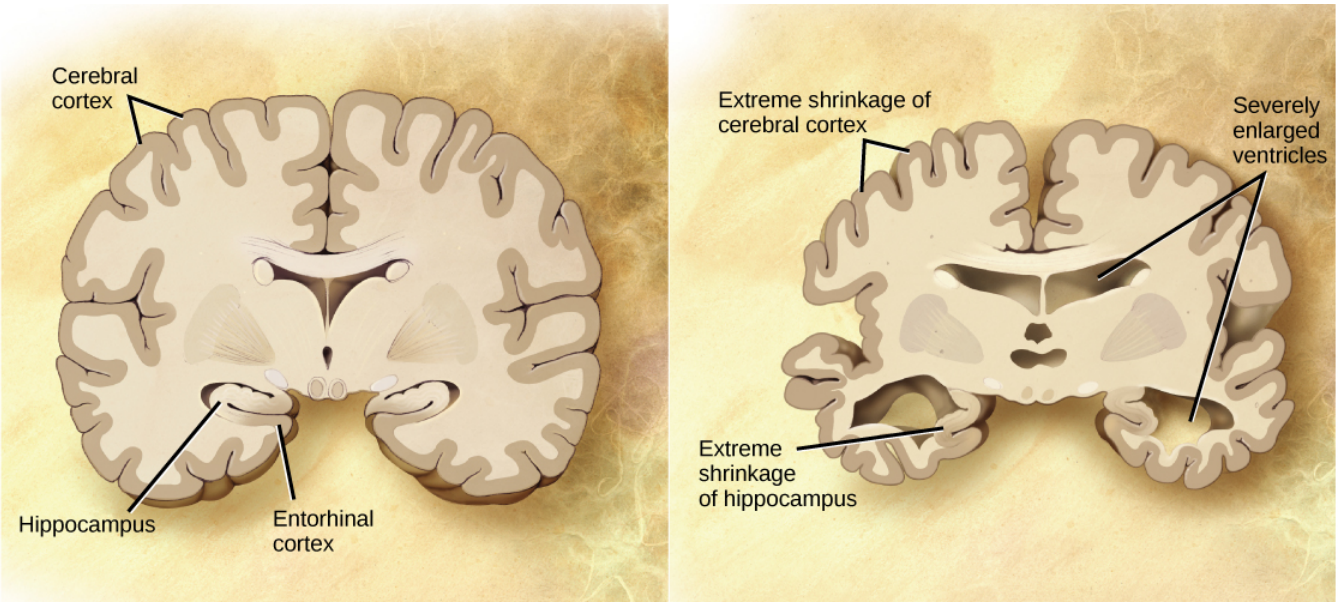


Figure 5.3.1: Compared to a normal brain (left), the brain from a patient with Alzheimer's disease (right) shows a dramatic neurodegeneration, particularly within the ventricles and hippocampus. (credit: modification of work by "Garrando"/Wikimedia Commons based on original images by ADEAR: "Alzheimer's Disease Education and Referral Center, a service of the National Institute on Aging")

Parkinson's Disease

Like Alzheimer's disease, Parkinson's disease is a neurodegenerative disease. It was first characterized by James Parkinson in 1817. Each year, 50,000-60,000 people in the United States are diagnosed with the disease. Parkinson's disease causes the loss of dopamine neurons in the substantia nigra, a midbrain structure that regulates movement. Loss of these neurons causes many symptoms including tremor (shaking of fingers or a limb), slowed movement, speech changes, balance and posture problems, and rigid muscles. The combination of these symptoms often causes a characteristic slow hunched shuffling walk, illustrated in Figure 5.3.2. Patients with Parkinson's disease can also exhibit psychological symptoms, such as dementia or emotional problems.

Although some patients have a form of the disease known to be caused by a single mutation, for most patients the exact causes of Parkinson's disease remain unknown: the disease likely results from a combination of genetic and environmental factors (similar to Alzheimer's disease). Post-mortem analysis of brains from Parkinson's patients shows the presence of Lewy bodies—abnormal protein clumps—in dopaminergic neurons. The prevalence of these Lewy bodies often correlates with the severity of the disease.

There is no cure for Parkinson's disease, and treatment is focused on easing symptoms. One of the most commonly prescribed drugs for Parkinson's is L-DOPA, which is a chemical that is converted into dopamine by neurons in the brain. This conversion increases the overall level of dopamine neurotransmission and can help compensate for the loss of dopaminergic neurons in the substantia nigra. Other drugs work by inhibiting the enzyme that breaks down dopamine.



Figure 5.3.2: Parkinson's patients often have a characteristic hunched walk.

Neurodevelopmental Disorders

Neurodevelopmental disorders occur when the development of the nervous system is disturbed. There are several different classes of neurodevelopmental disorders. Some, like Down Syndrome, cause intellectual deficits. Others specifically affect communication, learning, or the motor system. Some disorders like autism spectrum disorder and attention deficit/hyperactivity disorder have complex symptoms.

Autism

Autism spectrum disorder (ASD) is a neurodevelopmental disorder. Its severity differs from person to person. Estimates for the prevalence of the disorder have changed rapidly in the past few decades. Current estimates suggest that one in 88 children will develop the disorder. ASD is four times more prevalent in males than females.

A characteristic symptom of ASD is impaired social skills. Children with autism may have difficulty making and maintaining eye contact and reading social cues. They also may have problems feeling empathy for others. Other symptoms of ASD include repetitive motor behaviors (such as rocking back and forth), preoccupation with specific subjects, strict adherence to certain rituals, and unusual language use. Up to 30 percent of patients with ASD develop epilepsy, and patients with some forms of the disorder (like Fragile X) also have intellectual disability. Because it is a spectrum disorder, other ASD patients are very functional and have good-to-excellent language skills. Many of these patients do not feel that they suffer from a disorder and instead think that their brains just process information differently.

Except for some well-characterized, clearly genetic forms of autism (like Fragile X and Rett's Syndrome), the causes of ASD are largely unknown. Variants of several genes correlate with the presence of ASD, but for any given patient, many different mutations in different genes may be required for the disease to develop. At a general level, ASD is thought to be a disease of "incorrect" wiring. Accordingly, brains of some ASD patients lack the same level of synaptic pruning that occurs in non-affected people. In the 1990s, a research paper linked autism to a common vaccine given to children. This paper was retracted when it was discovered that the author falsified data, and follow-up studies showed no connection between vaccines and autism.

Treatment for autism usually combines behavioral therapies and interventions, along with medications to treat other disorders common to people with autism (depression, anxiety, obsessive compulsive disorder). Although early interventions can help mitigate the effects of the disease, there is currently no cure for ASD.

Attention Deficit Hyperactivity Disorder (ADHD)

Approximately three to five percent of children and adults are affected by attention deficit/hyperactivity disorder (ADHD). Like ASD, ADHD is more prevalent in males than females. Symptoms of the disorder include inattention (lack of focus), executive functioning difficulties, impulsivity, and hyperactivity beyond what is characteristic of the normal developmental stage. Some patients do not have the hyperactive component of symptoms and are diagnosed with a subtype of ADHD: attention deficit disorder (ADD). Many people with ADHD also show comorbitity, in that they develop secondary disorders in addition to ADHD. Examples include depression or obsessive compulsive disorder (OCD). Figure 5.3.3 provides some statistics concerning comorbidity with ADHD.

The cause of ADHD is unknown, although research points to a delay and dysfunction in the development of the prefrontal cortex and disturbances in neurotransmission. According to studies of twins, the disorder has a strong genetic component. There are several candidate genes that may contribute to the disorder, but no definitive links have been discovered. Environmental factors, including exposure to certain pesticides, may also contribute to the development of ADHD in some patients. Treatment for ADHD often involves behavioral therapies and the prescription of stimulant medications, which paradoxically cause a calming effect in these patients.



Figure 5.3.3: Many people with ADHD have one or more other neurological disorders. (credit “chart design and illustration”: modification of work by Leigh Coriale; credit “data”: Drs. Biederman and Faraone, Massachusetts General Hospital).

Career Connection: Neurologist

Neurologists are physicians who specialize in disorders of the nervous system. They diagnose and treat disorders such as epilepsy, stroke, dementia, nervous system injuries, Parkinson’s disease, sleep disorders, and multiple sclerosis. Neurologists are medical doctors who have attended college, medical school, and completed three to four years of neurology residency.

When examining a new patient, a neurologist takes a full medical history and performs a complete physical exam. The physical exam contains specific tasks that are used to determine what areas of the brain, spinal cord, or peripheral nervous system may be damaged. For example, to check whether the hypoglossal nerve is functioning correctly, the neurologist will ask the patient to move his or her tongue in different ways. If the patient does not have full control over tongue movements, then the hypoglossal nerve may be damaged or there may be a lesion in the brainstem where the cell bodies of these neurons reside (or there could be damage to the tongue muscle itself).

Neurologists have other tools besides a physical exam they can use to diagnose particular problems in the nervous system. If the patient has had a seizure, for example, the neurologist can use electroencephalography (EEG), which involves taping electrodes to the scalp to record brain activity, to try to determine which brain regions are involved in the seizure. In suspected stroke patients, a neurologist can use a computerized tomography (CT) scan, which is a type of X-ray, to look for bleeding in the brain or a possible brain tumor. To treat patients with neurological problems, neurologists can prescribe medications or refer the patient to a neurosurgeon for surgery.

Link to Learning

This website allows you to see the different tests a neurologist might use to see what regions of the nervous system may be damaged in a patient.

Mental Illnesses

Mental illnesses are nervous system disorders that result in problems with thinking, mood, or relating with other people. These disorders are severe enough to affect a person's quality of life and often make it difficult for people to perform the routine tasks of daily living. Debilitating mental disorders plague approximately 12.5 million Americans (about 1 in 17 people) at an annual cost of more than $300 billion. There are several types of mental disorders including schizophrenia, major depression, bipolar disorder, anxiety disorders and phobias, post-traumatic stress disorders, and obsessive-compulsive disorder (OCD), among others. The American Psychiatric Association publishes the Diagnostic and Statistical Manual of Mental Disorders (or DSM), which describes the symptoms required for a patient to be diagnosed with a particular mental disorder. Each newly released version of the DSM contains different symptoms and classifications as scientists learn more about these disorders, their causes, and how they relate to each other. A more detailed discussion of two mental illnesses—schizophrenia and major depression—is given below.

Schizophrenia

Schizophrenia is a serious and often debilitating mental illness affecting one percent of people in the United States. Symptoms of the disease include the inability to differentiate between reality and imagination, inappropriate and unregulated emotional responses, difficulty thinking, and problems with social situations. People with schizophrenia can suffer from hallucinations and hear voices; they may also suffer from delusions. Patients also have so-called "negative" symptoms like a flattened emotional state, loss of pleasure, and loss of basic drives. Many schizophrenic patients are diagnosed in their late adolescence or early 20s. The development of schizophrenia is thought to involve malfunctioning dopaminergic neurons and may also involve problems with glutamate signaling. Treatment for the disease usually requires antipsychotic medications that work by blocking dopamine receptors and decreasing dopamine neurotransmission in the brain. This decrease in dopamine can cause Parkinson's disease-like symptoms in some patients. While some classes of antipsychotics can be quite effective at treating the disease, they are not a cure, and most patients must remain medicated for the rest of their lives.

Depression

Major depression affects approximately 6.7 percent of the adults in the United States each year and is one of the most common mental disorders. To be diagnosed with major depressive disorder, a person must have experienced a severely depressed mood lasting longer than two weeks along with other symptoms including a loss of enjoyment in activities that were previously enjoyed, changes in appetite and sleep schedules, difficulty concentrating, feelings of worthlessness, and suicidal thoughts. The exact causes of major depression are unknown and likely include both genetic and environmental risk factors. Some research supports the "classic monoamine hypothesis," which suggests that depression is caused by a decrease in norepinephrine and serotonin neurotransmission. One argument against this hypothesis is the fact that some antidepressant medications cause an increase in norepinephrine and serotonin release within a few hours of beginning treatment—but clinical results of these medications are not seen until weeks later. This has led to alternative hypotheses: for example, dopamine may also be decreased in depressed patients, or it may actually be an increase in norepinephrine and serotonin that causes the disease, and antidepressants force a feedback loop that decreases this release. Treatments for depression include psychotherapy, electroconvulsive therapy, deep-brain stimulation, and prescription medications. There are several classes of antidepressant medications that work through different mechanisms. For example, monoamine oxidase inhibitors (MAO inhibitors) block the enzyme that degrades many neurotransmitters (including dopamine, serotonin, norepinephrine), resulting in increased neurotransmitter in the synaptic cleft. Selective serotonin reuptake inhibitors (SSRIs) block the reuptake of serotonin into the presynaptic neuron. This blockage results in an increase in serotonin in the synaptic cleft. Other types of drugs such as norepinephrine-dopamine reuptake inhibitors and norepinephrine-serotonin reuptake inhibitors are also used to treat depression.

Other Neurological Disorders

There are several other neurological disorders that cannot be easily placed in the above categories. These include chronic pain conditions, cancers of the nervous system, epilepsy disorders, and stroke. Epilepsy and stroke are discussed below.

Epilepsy

Estimates suggest that up to three percent of people in the United States will be diagnosed with epilepsy in their lifetime. While there are several different types of epilepsy, all are characterized by recurrent seizures. Epilepsy itself can be a symptom of a brain injury, disease, or other illness. For example, people who have intellectual disability or ASD can experience seizures, presumably because the developmental wiring malfunctions that caused their disorders also put them at risk for epilepsy. For many patients, however, the cause of their epilepsy is never identified and is likely to be a combination of genetic and environmental factors. Often, seizures can be controlled with anticonvulsant medications. However, for very severe cases, patients may undergo brain surgery to remove the brain area where seizures originate.

Stroke

A stroke results when blood fails to reach a portion of the brain for a long enough time to cause damage. Without the oxygen supplied by blood flow, neurons in this brain region die. This neuronal death can cause many different symptoms—depending on the brain area affected— including headache, muscle weakness or paralysis, speech disturbances, sensory problems, memory loss, and confusion. Stroke is often caused by blood clots and can also be caused by the bursting of a weak blood vessel. Strokes are extremely common and are the third most common cause of death in the United States. On average one person experiences a stroke every 40 seconds in the United States. Approximately 75 percent of strokes occur in people older than 65. Risk factors for stroke include high blood pressure, diabetes, high cholesterol, and a family history of stroke. Smoking doubles the risk of stroke. Because a stroke is a medical emergency, patients with symptoms of a stroke should immediately go to the emergency room, where they can receive drugs that will dissolve any clot that may have formed. These drugs will not work if the stroke was caused by a burst blood vessel or if the stroke occurred more than three hours before arriving at the hospital. Treatment following a stroke can include blood pressure medication (to prevent future strokes) and (sometimes intense) physical therapy.

Summary

Some general themes emerge from the sampling of nervous system disorders presented above. The causes for most disorders are not fully understood—at least not for all patients—and likely involve a combination of nature (genetic mutations that become risk factors) and nurture (emotional trauma, stress, hazardous chemical exposure). Because the causes have yet to be fully determined, treatment options are often lacking and only address symptoms.

Glossary

Alzheimer's disease
: neurodegenerative disorder characterized by problems with memory and thinking

attention deficit hyperactivity disorder (ADHD)
: neurodevelopmental disorder characterized by difficulty maintaining attention and controlling impulses

autism spectrum disorder (ASD)
: neurodevelopmental disorder characterized by impaired social interaction and communication abilities

epilepsy
: neurological disorder characterized by recurrent seizures

major depression
: mental illness characterized by prolonged periods of sadness

neurodegenerative disorder
: nervous system disorder characterized by the progressive loss of neurological functioning, usually caused by neuron death

Parkinson’s disease

neurodegenerative disorder that affects the control of movement

schizophrenia

mental disorder characterized by the inability to accurately perceive reality; patients often have difficulty thinking clearly and can suffer from delusions

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CHAPTER OVERVIEW

6: Sensory Physiology

6.1: Introduction
6.2: Sensory Processes
6.3: Somatosensation
6.4: Taste and Smell
6.5: Hearing and Vestibular Sensation
6.6: Vision
6.E: Sensory Systems (Exercises)

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6.1: Introduction

In more advanced animals, the senses are constantly at work, making the animal aware of stimuli—such as light, or sound, or the presence of a chemical substance in the external environment—and monitoring information about the organism's internal environment. All bilaterally symmetric animals have a sensory system, and the development of any species' sensory system has been driven by natural selection; thus, sensory systems differ among species according to the demands of their environments. The shark, unlike most fish predators, is electrosensitive—that is, sensitive to electrical fields produced by other animals in its environment. While it is helpful to this underwater predator, electrosensitivity is a sense not found in most land animals.



Figure 6.1.1: This shark uses its senses of sight, vibration (lateral-line system), and smell to hunt, but it also relies on its ability to sense the electric fields of prey, a sense not present in most land animals. (credit: modification of work by Hermanus Backpackers Hostel, South Africa)

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6.2: Sensory Processes

Skills to Develop

- Identify the general and special senses in humans
- Describe three important steps in sensory perception
- Explain the concept of just-noticeable difference in sensory perception

Senses provide information about the body and its environment. Humans have five special senses: olfaction (smell), gustation (taste), equilibrium (balance and body position), vision, and hearing. Additionally, we possess general senses, also called somatosensation, which respond to stimuli like temperature, pain, pressure, and vibration. Vestibular sensation, which is an organism's sense of spatial orientation and balance, proprioception (position of bones, joints, and muscles), and the sense of limb position that is used to track kinesthesia (limb movement) are part of somatosensation. Although the sensory systems associated with these senses are very different, all share a common function: to convert a stimulus (such as light, or sound, or the position of the body) into an electrical signal in the nervous system. This process is called sensory transduction.

There are two broad types of cellular systems that perform sensory transduction. In one, a neuron works with a sensory receptor, a cell, or cell process that is specialized to engage with and detect a specific stimulus. Stimulation of the sensory receptor activates the associated afferent neuron, which carries information about the stimulus to the central nervous system. In the second type of sensory transduction, a sensory nerve ending responds to a stimulus in the internal or external environment: this neuron constitutes the sensory receptor. Free nerve endings can be stimulated by several different stimuli, thus showing little receptor specificity. For example, pain receptors in your gums and teeth may be stimulated by temperature changes, chemical stimulation, or pressure.

Reception

The first step in sensation is reception, which is the activation of sensory receptors by stimuli such as mechanical stimuli (being bent or squished, for example), chemicals, or temperature. The receptor can then respond to the stimuli. The region in space in which a given sensory receptor can respond to a stimulus, be it far away or in contact with the body, is that receptor's receptive field. Think for a moment about the differences in receptive fields for the different senses. For the sense of touch, a stimulus must come into contact with body. For the sense of hearing, a stimulus can be a moderate distance away (some baleen whale sounds can propagate for many kilometers). For vision, a stimulus can be very far away; for example, the visual system perceives light from stars at enormous distances.

Transduction

The most fundamental function of a sensory system is the translation of a sensory signal to an electrical signal in the nervous system. This takes place at the sensory receptor, and the change in electrical potential that is produced is called the receptor potential. How is sensory input, such as pressure on the skin, changed to a receptor potential? In this example, a type of receptor called a mechanoreceptor (as shown in Figure 6.2.1) possesses specialized membranes that respond to pressure. Disturbance of these dendrites by compressing them or bending them opens gated ion channels in the plasma membrane of the sensory neuron, changing its electrical potential. Recall that in the nervous system, a positive change of a neuron's electrical potential (also called the membrane potential), depolarizes the neuron. Receptor potentials are graded potentials: the magnitude of these graded (receptor) potentials varies with the strength of the stimulus. If the magnitude of depolarization is sufficient (that is, if membrane potential reaches a threshold), the neuron will fire an action potential. In most cases, the correct stimulus impinging on a sensory receptor will drive membrane potential in a positive direction, although for some receptors, such as those in the visual system, this is not always the case.

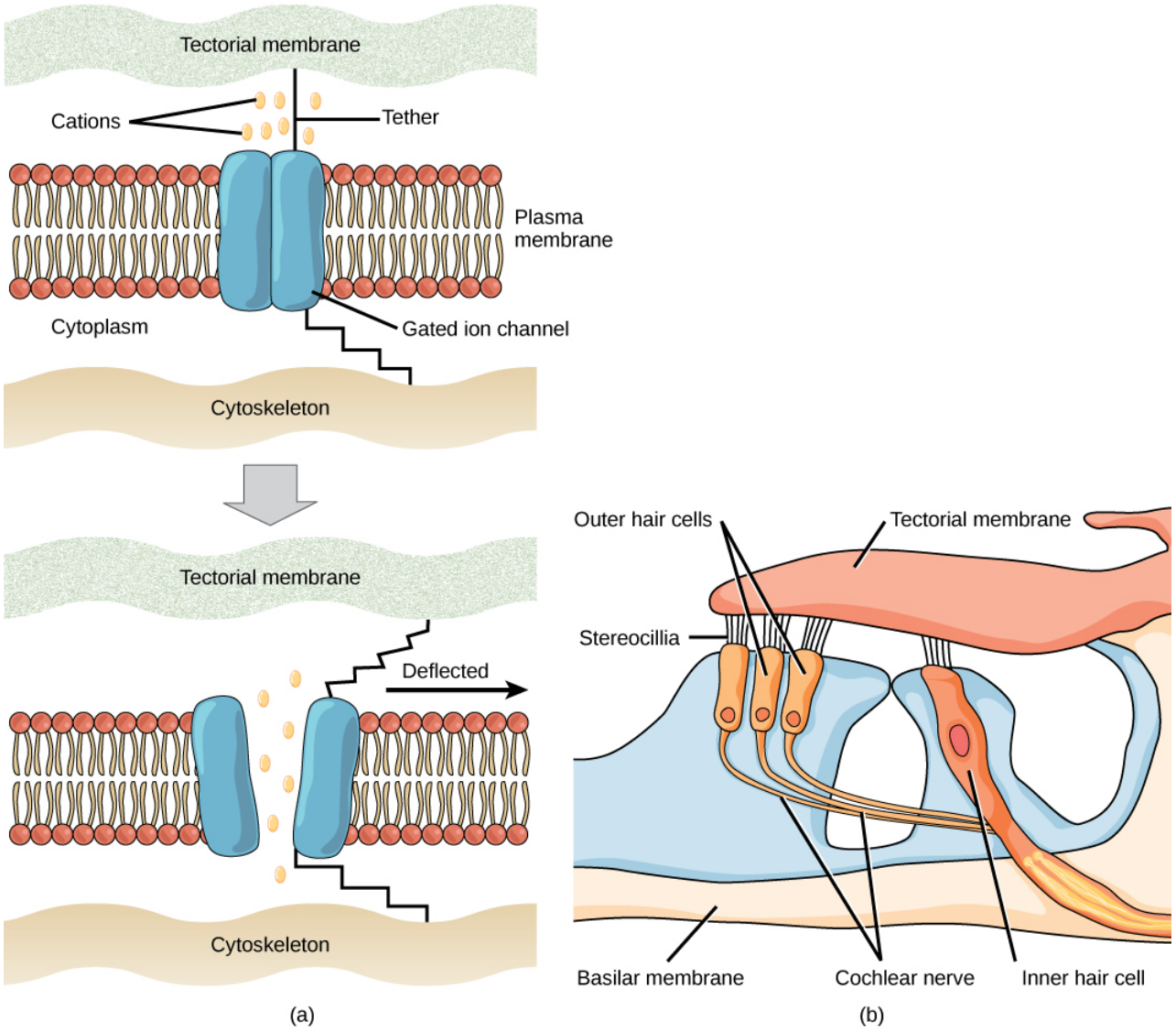


Figure 6.2.1: (a) Mechanosensitive ion channels are gated ion channels that respond to mechanical deformation of the plasma membrane. A mechanosensitive channel is connected to the plasma membrane and the cytoskeleton by hair-like tethers. When pressure causes the extracellular matrix to move, the channel opens, allowing ions to enter or exit the cell. (b) Stereocilia in the human ear are connected to mechanosensitive ion channels. When a sound causes the stereocilia to move, mechanosensitive ion channels transduce the signal to the cochlear nerve.

Sensory receptors for different senses are very different from each other, and they are specialized according to the type of stimulus they sense: they have receptor specificity. For example, touch receptors, light receptors, and sound receptors are each activated by different stimuli. Touch receptors are not sensitive to light or sound; they are sensitive only to touch or pressure. However, stimuli may be combined at higher levels in the brain, as happens with olfaction, contributing to our sense of taste.

Encoding and Transmission of Sensory Information

Four aspects of sensory information are encoded by sensory systems: the type of stimulus, the location of the stimulus in the receptive field, the duration of the stimulus, and the relative intensity of the stimulus. Thus, action potentials transmitted over a sensory receptor's afferent axons encode one type of stimulus, and this segregation of the senses is preserved in other sensory circuits. For example, auditory receptors transmit signals over their own dedicated system, and electrical activity in the axons of the auditory receptors will be interpreted by the brain as an auditory stimulus—a sound.

The intensity of a stimulus is often encoded in the rate of action potentials produced by the sensory receptor. Thus, an intense stimulus will produce a more rapid train of action potentials, and reducing the stimulus will likewise slow the rate of production of

action potentials. A second way in which intensity is encoded is by the number of receptors activated. An intense stimulus might initiate action potentials in a large number of adjacent receptors, while a less intense stimulus might stimulate fewer receptors. Integration of sensory information begins as soon as the information is received in the CNS, and the brain will further process incoming signals.

Perception

Perception is an individual's interpretation of a sensation. Although perception relies on the activation of sensory receptors, perception happens not at the level of the sensory receptor, but at higher levels in the nervous system, in the brain. The brain distinguishes sensory stimuli through a sensory pathway: action potentials from sensory receptors travel along neurons that are dedicated to a particular stimulus. These neurons are dedicated to that particular stimulus and synapse with particular neurons in the brain or spinal cord.

All sensory signals, except those from the olfactory system, are transmitted though the central nervous system and are routed to the thalamus and to the appropriate region of the cortex. Recall that the thalamus is a structure in the forebrain that serves as a clearinghouse and relay station for sensory (as well as motor) signals. When the sensory signal exits the thalamus, it is conducted to the specific area of the cortex (Figure 6.2.2) dedicated to processing that particular sense.

How are neural signals interpreted? Interpretation of sensory signals between individuals of the same species is largely similar, owing to the inherited similarity of their nervous systems; however, there are some individual differences. A good example of this is individual tolerances to a painful stimulus, such as dental pain, which certainly differ.

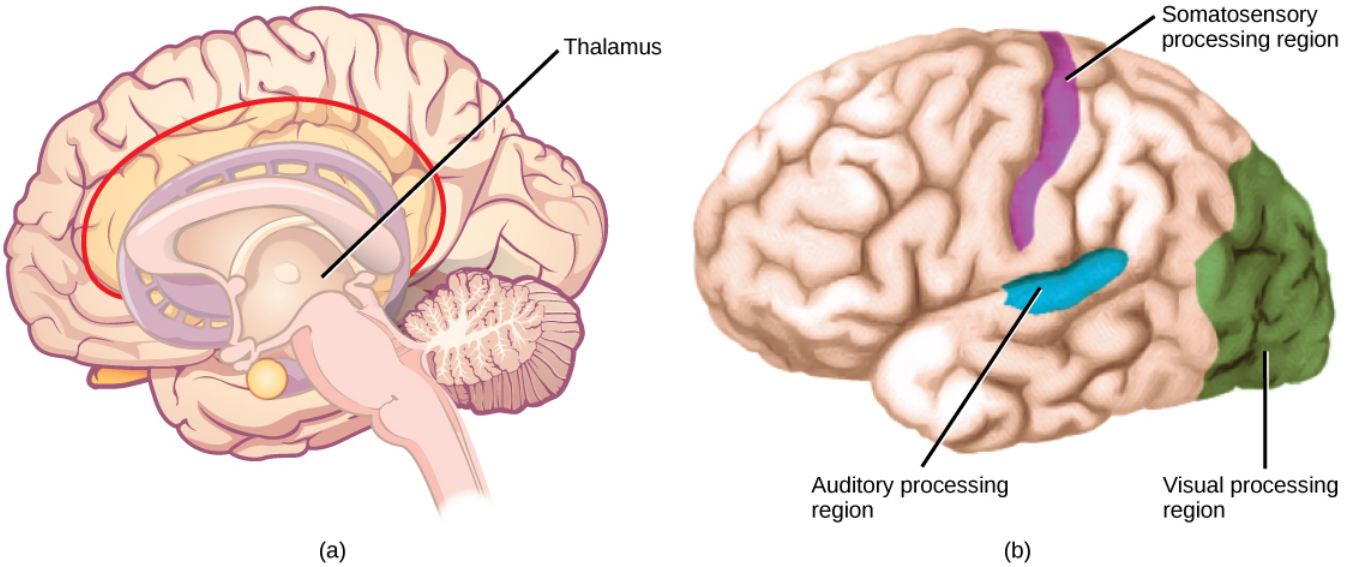


Figure 6.2.2: In humans, with the exception of olfaction, all sensory signals are routed from the (a) thalamus to (b) final processing regions in the cortex of the brain. (credit b: modification of work by Polina Tishina)

Scientific Method Connection: Just-Noticeable Difference

It is easy to differentiate between a one-pound bag of rice and a two-pound bag of rice. There is a one-pound difference, and one bag is twice as heavy as the other. However, would it be as easy to differentiate between a 20- and a 21-pound bag?

Question: What is the smallest detectible weight difference between a one-pound bag of rice and a larger bag? What is the smallest detectible difference between a 20-pound bag and a larger bag? In both cases, at what weights are the differences detected? This smallest detectible difference in stimuli is known as the just-noticeable difference (JND).

Background: Research background literature on JND and on Weber's Law, a description of a proposed mathematical relationship between the overall magnitude of the stimulus and the JND. You will be testing JND of different weights of rice in bags. Choose a convenient increment that is to be stepped through while testing. For example, you could choose 10 percent increments between one and two pounds (1.1, 1.2, 1.3, 1.4, and so on) or 20 percent increments (1.2, 1.4, 1.6, and 1.8).

Hypothesis: Develop a hypothesis about JND in terms of percentage of the whole weight being tested (such as "the JND between the two small bags and between the two large bags is proportionally the same," or ". . . is not proportionally the same.") So, for the first hypothesis, if the JND between the one-pound bag and a larger bag is 0.2 pounds (that is, 20 percent; 1.0 pound feels the same as 1.1 pounds, but 1.0 pound feels less than 1.2 pounds), then the JND between the 20-pound bag and a larger bag will also be 20 percent. (So, 20 pounds feels the same as 22 pounds or 23 pounds, but 20 pounds feels less than 24 pounds.)

Test the hypothesis: Enlist 24 participants, and split them into two groups of 12. To set up the demonstration, assuming a 10 percent increment was selected, have the first group be the one-pound group. As a counter-balancing measure against a systematic error, however, six of the first group will compare one pound to two pounds, and step down in weight (1.0 to 2.0, 1.0 to 1.9, and so on.), while the other six will step up (1.0 to 1.1, 1.0 to 1.2, and so on). Apply the same principle to the 20-pound group (20 to 40, 20 to 38, and so on, and 20 to 22, 20 to 24, and so on). Given the large difference between 20 and 40 pounds, you may wish to use 30 pounds as your larger weight. In any case, use two weights that are easily detectable as different.

Record the observations: Record the data in a table similar to the table below. For the one-pound and 20-pound groups (base weights) record a plus sign (+) for each participant that detects a difference between the base weight and the step weight. Record a minus sign (-) for each participant that finds no difference. If one-tenth steps were not used, then replace the steps in the "Step Weight" columns with the step you are using.

Table 6.2.1**:** Results of JND Testing (+ = difference; – = no difference)

Step Weight	One pound	20 pounds	Step Weight
1.1			22
1.2			24
1.3			26
1.4			28
1.5			30
1.6			32
1.7			34
1.8			36
1.9			38
2.0			40

Analyze the data/report the results: What step weight did all participants find to be equal with one-pound base weight? What about the 20-pound group?

Draw a conclusion: Did the data support the hypothesis? Are the final weights proportionally the same? If not, why not? Do the findings adhere to Weber's Law? Weber's Law states that the concept that a just-noticeable difference in a stimulus is proportional to the magnitude of the original stimulus.

Summary

A sensory activation occurs when a physical or chemical stimulus is processed into a neural signal (sensory transduction) by a sensory receptor. Perception is an individual interpretation of a sensation and is a brain function. Humans have special senses: olfaction, gustation, equilibrium, and hearing, plus the general senses of somatosensation.

Sensory receptors are either specialized cells associated with sensory neurons or the specialized ends of sensory neurons that are a part of the peripheral nervous system, and they are used to receive information about the environment (internal or external). Each sensory receptor is modified for the type of stimulus it detects. For example, neither gustatory receptors nor auditory receptors are sensitive to light. Each sensory receptor is responsive to stimuli within a specific region in space, which is known as that receptor's receptive field. The most fundamental function of a sensory system is the translation of a sensory signal to an electrical signal in the nervous system.

All sensory signals, except those from the olfactory system, enter the central nervous system and are routed to the thalamus. When the sensory signal exits the thalamus, it is conducted to the specific area of the cortex dedicated to processing that particular sense.

Glossary

kinesthesia
sense of body movement

mechanoreceptor
sensory receptor modified to respond to mechanical disturbance such as being bent, touch, pressure, motion, and sound

perception
individual interpretation of a sensation; a brain function

proprioception
sense of limb position; used to track kinesthesia

reception
receipt of a signal (such as light or sound) by sensory receptors

receptive field
region in space in which a stimulus can activate a given sensory receptor

receptor potential
membrane potential in a sensory receptor in response to detection of a stimulus

sensory receptor
specialized neuron or other cells associated with a neuron that is modified to receive specific sensory input

sensory transduction
conversion of a sensory stimulus into electrical energy in the nervous system by a change in the membrane potential

vestibular sense
sense of spatial orientation and balance

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6.3: Somatosensation

Skills to Develop

- Describe four important mechanoreceptors in human skin
- Describe the topographical distribution of somatosensory receptors between glabrous and hairy skin
- Explain why the perception of pain is subjective

Somatosensation is a mixed sensory category and includes all sensation received from the skin and mucous membranes, as well from as the limbs and joints. Somatosensation is also known as tactile sense, or more familiarly, as the sense of touch. Somatosensation occurs all over the exterior of the body and at some interior locations as well. A variety of receptor types—embedded in the skin, mucous membranes, muscles, joints, internal organs, and cardiovascular system—play a role.

Recall that the epidermis is the outermost layer of skin in mammals. It is relatively thin, is composed of keratin-filled cells, and has no blood supply. The epidermis serves as a barrier to water and to invasion by pathogens. Below this, the much thicker dermis contains blood vessels, sweat glands, hair follicles, lymph vessels, and lipid-secreting sebaceous glands (Figure 6.3.1). Below the epidermis and dermis is the subcutaneous tissue, or hypodermis, the fatty layer that contains blood vessels, connective tissue, and the axons of sensory neurons. The hypodermis, which holds about 50 percent of the body's fat, attaches the dermis to the bone and muscle, and supplies nerves and blood vessels to the dermis.

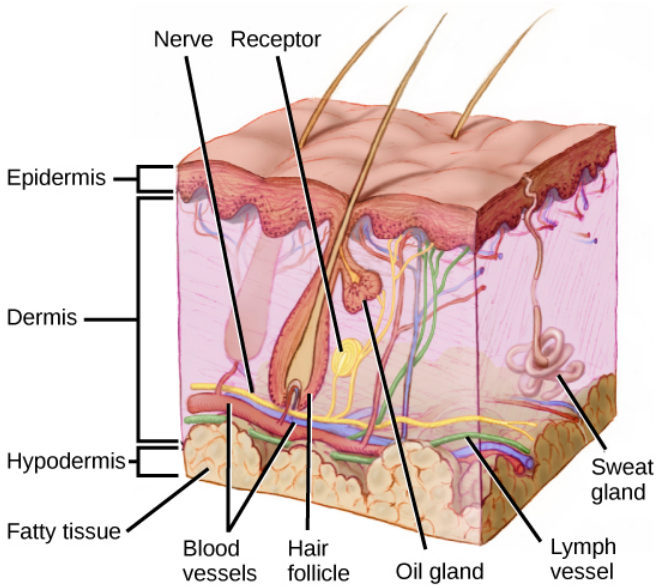


Figure 6.3.1: Mammalian skin has three layers: an epidermis, a dermis, and a hypodermis. (credit: modification of work by Don Bliss, National Cancer Institute)

Somatosensory Receptors

Sensory receptors are classified into five categories: mechanoreceptors, thermoreceptors, proprioceptors, pain receptors, and chemoreceptors. These categories are based on the nature of stimuli each receptor class transduces. What is commonly referred to as "touch" involves more than one kind of stimulus and more than one kind of receptor. Mechanoreceptors in the skin are described as encapsulated (that is, surrounded by a capsule) or unencapsulated (a group that includes free nerve endings). A free nerve ending, as its name implies, is an unencapsulated dendrite of a sensory neuron. Free nerve endings are the most common nerve endings in skin, and they extend into the middle of the epidermis. Free nerve endings are sensitive to painful stimuli, to hot and cold, and to light touch. They are slow to adjust to a stimulus and so are less sensitive to abrupt changes in stimulation.

There are three classes of mechanoreceptors: tactile, proprioceptors, and baroreceptors. Mechanoreceptors sense stimuli due to physical deformation of their plasma membranes. They contain mechanically gated ion channels whose gates open or close in response to pressure, touch, stretching, and sound." There are four primary tactile mechanoreceptors in human skin: Merkel's disks, Meissner's corpuscles, Ruffini endings, and Pacinian corpuscle; two are located toward the surface of the skin and two are located

deeper. A fifth type of mechanoreceptor, Krause end bulbs, are found only in specialized regions. Merkel's disks (shown in Figure 6.3.2) are found in the upper layers of skin near the base of the epidermis, both in skin that has hair and on glabrous skin, that is, the hairless skin found on the palms and fingers, the soles of the feet, and the lips of humans and other primates. Merkel's disks are densely distributed in the fingertips and lips. They are slow-adapting, unencapsulated nerve endings, and they respond to light touch. Light touch, also known as discriminative touch, is a light pressure that allows the location of a stimulus to be pinpointed. The receptive fields of Merkel's disks are small with well-defined borders. That makes them finely sensitive to edges and they come into use in tasks such as typing on a keyboard.

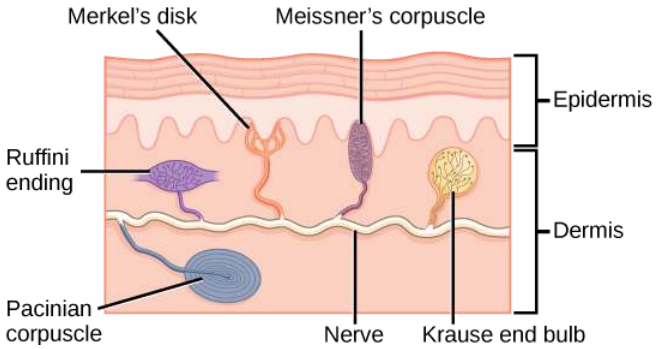


Figure 6.3.2: Four of the primary mechanoreceptors in human skin are shown. Merkel's disks, which are unencapsulated, respond to light touch. Meissner's corpuscles, Ruffini endings, Pacinian corpuscles, and Krause end bulbs are all encapsulated. Meissner's corpuscles respond to touch and low-frequency vibration. Ruffini endings detect stretch, deformation within joints, and warmth. Pacinian corpuscles detect transient pressure and high-frequency vibration. Krause end bulbs detect cold.

Exercise

Which of the following statements about mechanoreceptors is false?

A. Pacini corpuscles are found in both glabrous and hairy skin.
B. Merkel's disks are abundant on the fingertips and lips.
C. Ruffini endings are encapsulated mechanoreceptors.
D. Meissner's corpuscles extend into the lower dermis.

Answer

D

Meissner's corpuscles, (shown in Figure 6.3.3) also known as tactile corpuscles, are found in the upper dermis, but they project into the epidermis. They, too, are found primarily in the glabrous skin on the fingertips and eyelids. They respond to fine touch and pressure, but they also respond to low-frequency vibration or flutter. They are rapidly adapting, fluid-filled, encapsulated neurons with small, well-defined borders and are responsive to fine details. Like Merkel's disks, Meissner's corpuscles are not as plentiful in the palms as they are in the fingertips.

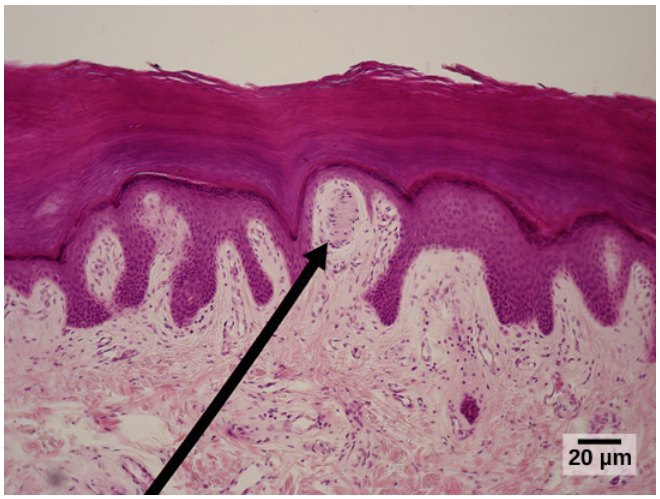


Figure 6.3.3: Meissner corpuscles in the fingertips, such as the one viewed here using bright field light microscopy, allow for touch discrimination of fine detail. (credit: modification of work by "Wbensmith"/Wikimedia Commons; scale-bar data from Matt Russell)

Deeper in the epidermis, near the base, are Ruffini endings, which are also known as bulbous corpuscles. They are found in both glabrous and hairy skin. These are slow-adapting, encapsulated mechanoreceptors that detect skin stretch and deformations within joints, so they provide valuable feedback for gripping objects and controlling finger position and movement. Thus, they also contribute to proprioception and kinesthesia. Ruffini endings also detect warmth. Note that these warmth detectors are situated deeper in the skin than are the cold detectors. It is not surprising, then, that humans detect cold stimuli before they detect warm stimuli.

Pacinian corpuscles (seen in Figure 6.3.4) are located deep in the dermis of both glabrous and hairy skin and are structurally similar to Meissner's corpuscles; they are found in the bone periosteum, joint capsules, pancreas and other viscera, breast, and genitals. They are rapidly adapting mechanoreceptors that sense deep transient (but not prolonged) pressure and high-frequency vibration. Pacinian receptors detect pressure and vibration by being compressed, stimulating their internal dendrites. There are fewer Pacinian corpuscles and Ruffini endings in skin than there are Merkel's disks and Meissner's corpuscles.

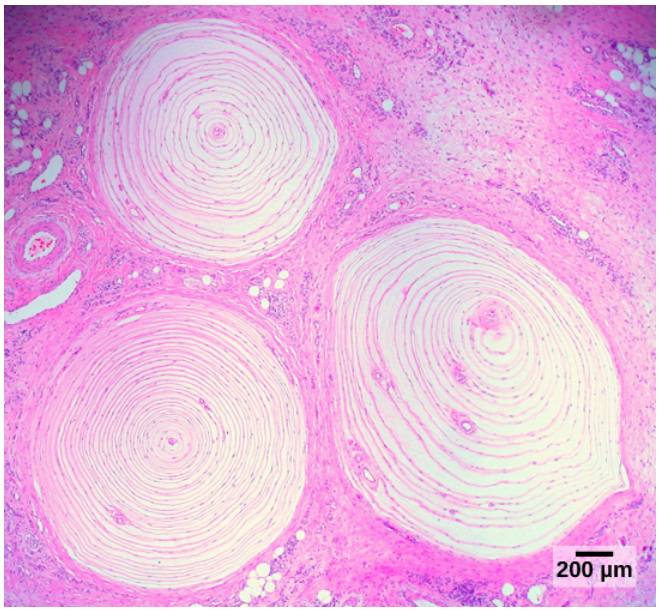


Figure 6.3.4: Pacinian corpuscles, such as these visualized using bright field light microscopy, detect pressure (touch) and high-frequency vibration. (credit: modification of work by Ed Uthman; scale-bar data from Matt Russell)

In proprioception, proprioceptive and kinesthetic signals travel through myelinated afferent neurons running from the spinal cord to the medulla. Neurons are not physically connected, but communicate via neurotransmitters secreted into synapses or "gaps"

between communicating neurons. Once in the medulla, the neurons continue carrying the signals to the thalamus.

Muscle spindles are stretch receptors that detect the amount of stretch, or lengthening of muscles. Related to these are Golgi tendon organs, which are tension receptors that detect the force of muscle contraction. Proprioceptive and kinesthetic signals come from limbs. Unconscious proprioceptive signals run from the spinal cord to the cerebellum, the brain region that coordinates muscle contraction, rather than to the thalamus, like most other sensory information.

Barorecptors detect pressure changes in an organ. They are found in the walls of the carotid artery and the aorta where they monitor blood pressure, and in the lungs where they detect the degree of lung expansion. Stretch receptors are found at various sites in the digestive and urinary systems.

In addition to these two types of deeper receptors, there are also rapidly adapting hair receptors, which are found on nerve endings that wrap around the base of hair follicles. There are a few types of hair receptors that detect slow and rapid hair movement, and they differ in their sensitivity to movement. Some hair receptors also detect skin deflection, and certain rapidly adapting hair receptors allow detection of stimuli that have not yet touched the skin.

Integration of Signals from Mechanoreceptors

The configuration of the different types of receptors working in concert in human skin results in a very refined sense of touch. The nociceptive receptors—those that detect pain—are located near the surface. Small, finely calibrated mechanoreceptors—Merkel's disks and Meissner's corpuscles—are located in the upper layers and can precisely localize even gentle touch. The large mechanoreceptors—Pacinian corpuscles and Ruffini endings—are located in the lower layers and respond to deeper touch. (Consider that the deep pressure that reaches those deeper receptors would not need to be finely localized.) Both the upper and lower layers of the skin hold rapidly and slowly adapting receptors. Both primary somatosensory cortex and secondary cortical areas are responsible for processing the complex picture of stimuli transmitted from the interplay of mechanoreceptors.

Density of Mechanoreceptors

The distribution of touch receptors in human skin is not consistent over the body. In humans, touch receptors are less dense in skin covered with any type of hair, such as the arms, legs, torso, and face. Touch receptors are denser in glabrous skin (the type found on human fingertips and lips, for example), which is typically more sensitive and is thicker than hairy skin (4 to 5 mm versus 2 to 3 mm).

How is receptor density estimated in a human subject? The relative density of pressure receptors in different locations on the body can be demonstrated experimentally using a two-point discrimination test. In this demonstration, two sharp points, such as two thumbtacks, are brought into contact with the subject's skin (though not hard enough to cause pain or break the skin). The subject reports if he or she feels one point or two points. If the two points are felt as one point, it can be inferred that the two points are both in the receptive field of a single sensory receptor. If two points are felt as two separate points, each is in the receptive field of two separate sensory receptors. The points could then be moved closer and re-tested until the subject reports feeling only one point, and the size of the receptive field of a single receptor could be estimated from that distance.

Thermoreception

In addition to Krause end bulbs that detect cold and Ruffini endings that detect warmth, there are different types of cold receptors on some free nerve endings: thermoreceptors, located in the dermis, skeletal muscles, liver, and hypothalamus, that are activated by different temperatures. Their pathways into the brain run from the spinal cord through the thalamus to the primary somatosensory cortex. Warmth and cold information from the face travels through one of the cranial nerves to the brain. You know from experience that a tolerably cold or hot stimulus can quickly progress to a much more intense stimulus that is no longer tolerable. Any stimulus that is too intense can be perceived as pain because temperature sensations are conducted along the same pathways that carry pain sensations

Pain

Pain is the name given to nociception, which is the neural processing of injurious stimuli in response to tissue damage. Pain is caused by true sources of injury, such as contact with a heat source that causes a thermal burn or contact with a corrosive chemical. But pain also can be caused by harmless stimuli that mimic the action of damaging stimuli, such as contact with capsaicins, the

compounds that cause peppers to taste hot and which are used in self-defense pepper sprays and certain topical medications. Peppers taste “hot” because the protein receptors that bind capsaicin open the same calcium channels that are activated by warm receptors.

Nociception starts at the sensory receptors, but pain, inasmuch as it is the perception of nociception, does not start until it is communicated to the brain. There are several nociceptive pathways to and through the brain. Most axons carrying nociceptive information into the brain from the spinal cord project to the thalamus (as do other sensory neurons) and the neural signal undergoes final processing in the primary somatosensory cortex. Interestingly, one nociceptive pathway projects not to the thalamus but directly to the hypothalamus in the forebrain, which modulates the cardiovascular and neuroendocrine functions of the autonomic nervous system. Recall that threatening—or painful—stimuli stimulate the sympathetic branch of the visceral sensory system, readying a fight-or-flight response.

Link to Learning



View this video that animates the five phases of nociceptive pain.

Summary

Somatosensation includes all sensation received from the skin and mucous membranes, as well as from the limbs and joints. Somatosensation occurs all over the exterior of the body and at some interior locations as well, and a variety of receptor types, embedded in the skin and mucous membranes, play a role.

There are several types of specialized sensory receptors. Rapidly adapting free nerve endings detect nociception, hot and cold, and light touch. Slowly adapting, encapsulated Merkel’s disks are found in fingertips and lips, and respond to light touch. Meissner’s corpuscles, found in glabrous skin, are rapidly adapting, encapsulated receptors that detect touch, low-frequency vibration, and flutter. Ruffini endings are slowly adapting, encapsulated receptors that detect skin stretch, joint activity, and warmth. Hair receptors are rapidly adapting nerve endings wrapped around the base of hair follicles that detect hair movement and skin deflection. Finally, Pacinian corpuscles are encapsulated, rapidly adapting receptors that detect transient pressure and high-frequency vibration.

Glossary

free nerve ending
: ending of an afferent neuron that lacks a specialized structure for detection of sensory stimuli; some respond to touch, pain, or temperature

glabrous
: describes the non-hairy skin found on palms and fingers, soles of feet, and lips of humans and other primates

Golgi tendon organ
: muscular proprioceptive tension receptor that provides the sensory component of the Golgi tendon reflex

Meissner’s corpuscle

(also, tactile corpuscle) encapsulated, rapidly-adapting mechanoreceptor in the skin that responds to light touch

Merkel's disc

unencapsulated, slowly-adapting mechanoreceptor in the skin that responds to touch

muscle spindle

proprioceptive stretch receptor that lies within a muscle and that shortens the muscle to an optimal length for efficient contraction

nociception

neural processing of noxious (such as damaging) stimuli

Pacinian corpuscle

encapsulated mechanoreceptor in the skin that responds to deep pressure and vibration

Ruffini ending

(also, bulbous corpuscle) slowly-adapting mechanoreceptor in the skin that responds to skin stretch and joint position

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6.4: Taste and Smell

Skills to Develop

- Explain in what way smell and taste stimuli differ from other sensory stimuli
- Identify the five primary tastes that can be distinguished by humans
- Explain in anatomical terms why a dog's sense of smell is more acute than a human's

Taste, also called gustation, and smell, also called olfaction, are the most interconnected senses in that both involve molecules of the stimulus entering the body and bonding to receptors. Smell lets an animal sense the presence of food or other animals—whether potential mates, predators, or prey—or other chemicals in the environment that can impact their survival. Similarly, the sense of taste allows animals to discriminate between types of foods. While the value of a sense of smell is obvious, what is the value of a sense of taste? Different tasting foods have different attributes, both helpful and harmful. For example, sweet-tasting substances tend to be highly caloric, which could be necessary for survival in lean times. Bitterness is associated with toxicity, and sourness is associated with spoiled food. Salty foods are valuable in maintaining homeostasis by helping the body retain water and by providing ions necessary for cells to function.

Tastes and Odors

Both taste and odor stimuli are molecules taken in from the environment. The primary tastes detected by humans are sweet, sour, bitter, salty and umami. The first four tastes need little explanation. The identification of umami as a fundamental taste occurred fairly recently—it was identified in 1908 by Japanese scientist Kikunae Ikeda while he worked with seaweed broth, but it was not widely accepted as a taste that could be physiologically distinguished until many years later. The taste of umami, also known as savoriness, is attributable to the taste of the amino acid L-glutamate. In fact, monosodium glutamate, or MSG, is often used in cooking to enhance the savory taste of certain foods. What is the adaptive value of being able to distinguish umami? Savory substances tend to be high in protein.

All odors that we perceive are molecules in the air we breathe. If a substance does not release molecules into the air from its surface, it has no smell. And if a human or other animal does not have a receptor that recognizes a specific molecule, then that molecule has no smell. Humans have about 350 olfactory receptor subtypes that work in various combinations to allow us to sense about 10,000 different odors. Compare that to mice, for example, which have about 1,300 olfactory receptor types, and therefore probably sense more odors. Both odors and tastes involve molecules that stimulate specific chemoreceptors. Although humans commonly distinguish taste as one sense and smell as another, they work together to create the perception of flavor. A person's perception of flavor is reduced if he or she has congested nasal passages.

Reception and Transduction

Odorants (odor molecules) enter the nose and dissolve in the olfactory epithelium, the mucosa at the back of the nasal cavity (as illustrated in Figure 6.4.1). The olfactory epithelium is a collection of specialized olfactory receptors in the back of the nasal cavity that spans an area about 5 cm^2 in humans. Recall that sensory cells are neurons. An olfactory receptor, which is a dendrite of a specialized neuron, responds when it binds certain molecules inhaled from the environment by sending impulses directly to the olfactory bulb of the brain. Humans have about 12 million olfactory receptors, distributed among hundreds of different receptor types that respond to different odors. Twelve million seems like a large number of receptors, but compare that to other animals: rabbits have about 100 million, most dogs have about 1 billion, and bloodhounds—dogs selectively bred for their sense of smell—have about 4 billion. The overall size of the olfactory epithelium also differs between species, with that of bloodhounds, for example, being many times larger than that of humans.

Olfactory neurons are bipolar neurons (neurons with two processes from the cell body). Each neuron has a single dendrite buried in the olfactory epithelium, and extending from this dendrite are 5 to 20 receptor-laden, hair-like cilia that trap odorant molecules. The sensory receptors on the cilia are proteins, and it is the variations in their amino acid chains that make the receptors sensitive to different odorants. Each olfactory sensory neuron has only one type of receptor on its cilia, and the receptors are specialized to detect specific odorants, so the bipolar neurons themselves are specialized. When an odorant binds with a receptor that recognizes

it, the sensory neuron associated with the receptor is stimulated. Olfactory stimulation is the only sensory information that directly reaches the cerebral cortex, whereas other sensations are relayed through the thalamus.

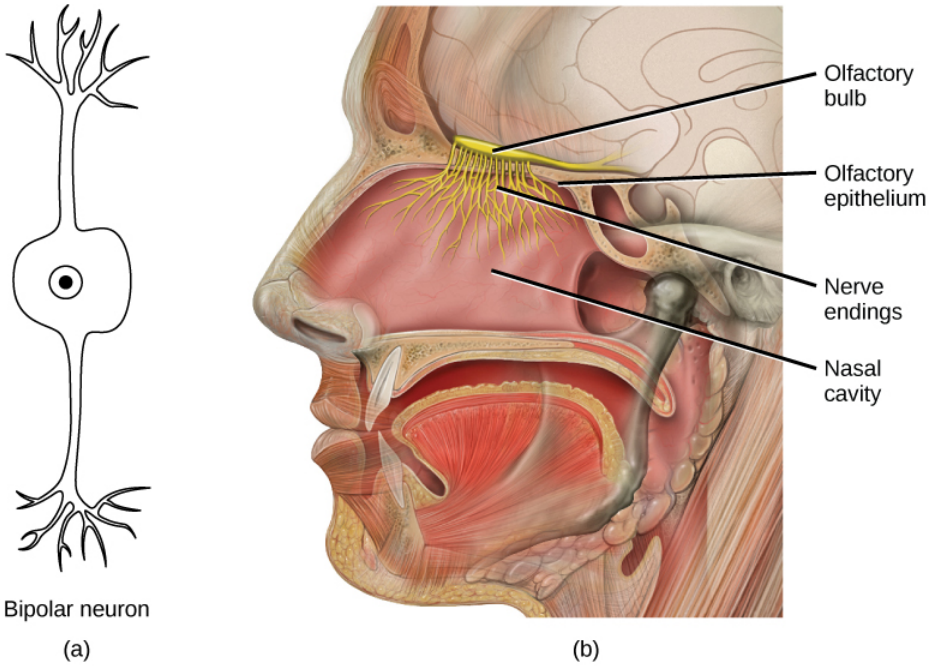


Figure 6.4.1: In the human olfactory system, (a) bipolar olfactory neurons extend from (b) the olfactory epithelium, where olfactory receptors are located, to the olfactory bulb. (credit: modification of work by Patrick J. Lynch, medical illustrator; C. Carl Jaffe, MD, cardiologist)

Evolution Connection: Pheromones

A pheromone is a chemical released by an animal that affects the behavior or physiology of animals of the same species. Pheromonal signals can have profound effects on animals that inhale them, but pheromones apparently are not consciously perceived in the same way as other odors. There are several different types of pheromones, which are released in urine or as glandular secretions. Certain pheromones are attractants to potential mates, others are repellants to potential competitors of the same sex, and still others play roles in mother-infant attachment. Some pheromones can also influence the timing of puberty, modify reproductive cycles, and even prevent embryonic implantation. While the roles of pheromones in many nonhuman species are important, pheromones have become less important in human behavior over evolutionary time compared to their importance to organisms with more limited behavioral repertoires.

The vomeronasal organ (VNO, or Jacobson's organ) is a tubular, fluid-filled, olfactory organ present in many vertebrate animals that sits adjacent to the nasal cavity. It is very sensitive to pheromones and is connected to the nasal cavity by a duct. When molecules dissolve in the mucosa of the nasal cavity, they then enter the VNO where the pheromone molecules among them bind with specialized pheromone receptors. Upon exposure to pheromones from their own species or others, many animals, including cats, may display the flehmen response (Figure 6.4.2), a curling of the upper lip that helps pheromone molecules enter the VNO.



Figure 6.4.2: The flehmen response in this tiger results in the curling of the upper lip and helps airborne pheromone molecules enter the vomeronasal organ. (credit: modification of work by "chadh"/Flickr)

Pheromonal signals are sent, not to the main olfactory bulb, but to a different neural structure that projects directly to the amygdala (recall that the amygdala is a brain center important in emotional reactions, such as fear). The pheromonal signal then continues to areas of the hypothalamus that are key to reproductive physiology and behavior. While some scientists assert that the VNO is apparently functionally vestigial in humans, even though there is a similar structure located near human nasal cavities, others are researching it as a possible functional system that may, for example, contribute to synchronization of menstrual cycles in women living in close proximity.

Taste

Detecting a taste (gustation) is fairly similar to detecting an odor (olfaction), given that both taste and smell rely on chemical receptors being stimulated by certain molecules. The primary organ of taste is the taste bud. A taste bud is a cluster of gustatory receptors (taste cells) that are located within the bumps on the tongue called papillae (singular: papilla) (illustrated in Figure 6.4.3). There are several structurally distinct papillae. Filiform papillae, which are located across the tongue, are tactile, providing friction that helps the tongue move substances, and contain no taste cells. In contrast, fungiform papillae, which are located mainly on the anterior two-thirds of the tongue, each contain one to eight taste buds and also have receptors for pressure and temperature. The large circumvallate papillae contain up to 100 taste buds and form a V near the posterior margin of the tongue.

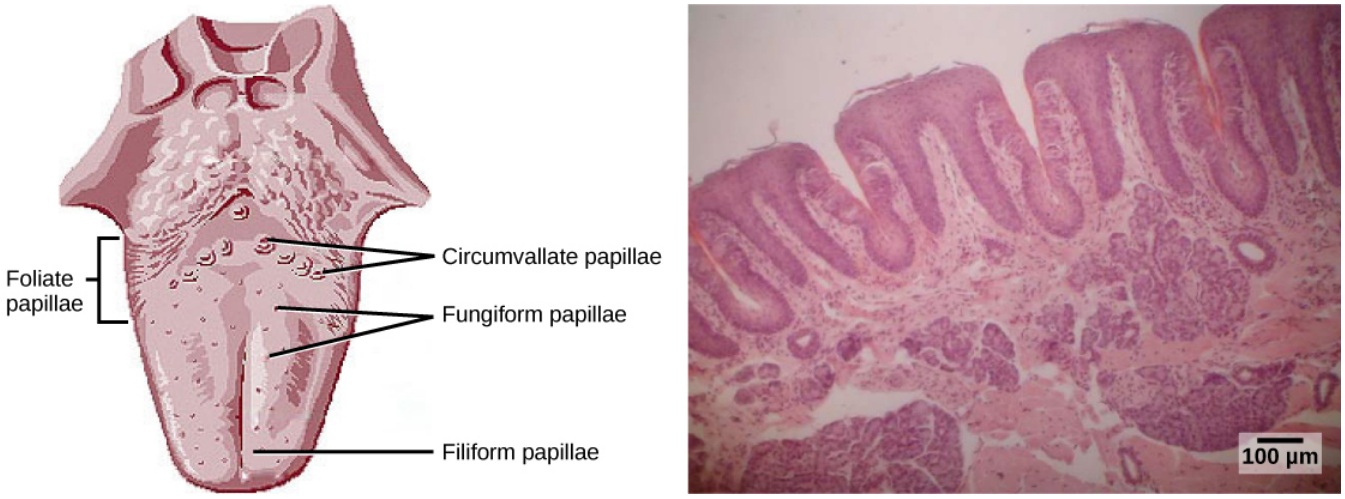


Figure 6.4.3: (a) Foliate, circumvallate, and fungiform papillae are located on different regions of the tongue. (b) Foliate papillae are prominent protrusions on this light micrograph. (credit a: modification of work by NCI; scale-bar data from Matt Russell)

In addition to those two types of chemically and mechanically sensitive papillae are foliate papillae—leaf-like papillae located in parallel folds along the edges and toward the back of the tongue, as seen in the micrograph. Foliate papillae contain about 1,300

taste buds within their folds. Finally, there are circumvallate papillae, which are wall-like papillae in the shape of an inverted “V” at the back of the tongue. Each of these papillae is surrounded by a groove and contains about 250 taste buds.

Each taste bud’s taste cells are replaced every 10 to 14 days. These are elongated cells with hair-like processes called microvilli at the tips that extend into the taste bud pore (illustrated in Figure 6.4.4). Food molecules (tastants) are dissolved in saliva, and they bind with and stimulate the receptors on the microvilli. The receptors for tastants are located across the outer portion and front of the tongue, outside of the middle area where the filiform papillae are most prominent.

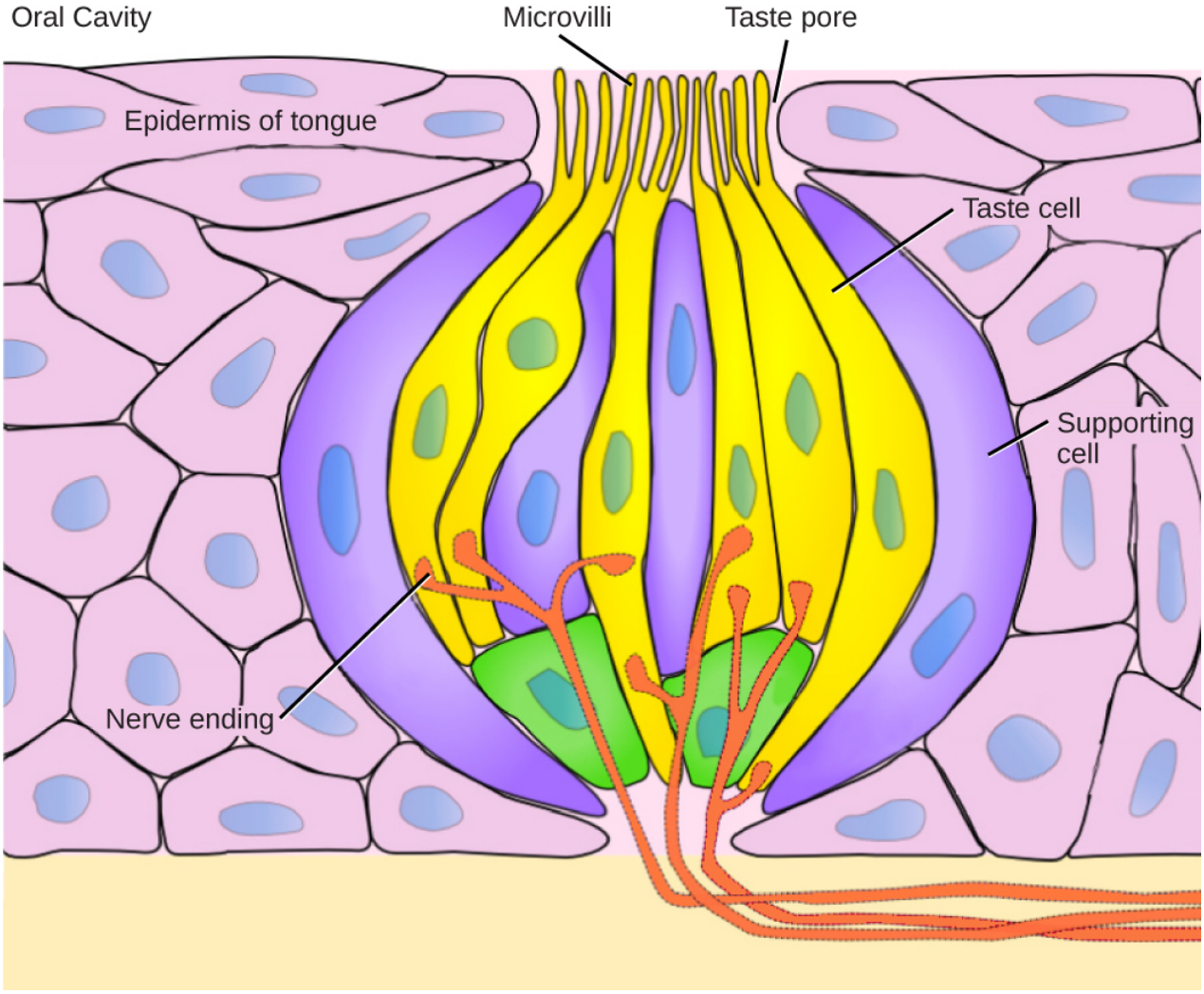


Figure 6.4.4: Pores in the tongue allow tastants to enter taste pores in the tongue. (credit: modification of work by Vincenzo Rizzo)

In humans, there are five primary tastes, and each taste has only one corresponding type of receptor. Thus, like olfaction, each receptor is specific to its stimulus (tastant). Transduction of the five tastes happens through different mechanisms that reflect the molecular composition of the tastant. A salty tastant (containing NaCl) provides the sodium ions (Na^+) that enter the taste neurons and excite them directly. Sour tastants are acids and belong to the thermoreceptor protein family. Binding of an acid or other sour-tasting molecule triggers a change in the ion channel and these increase hydrogen ion (H^+) concentrations in the taste neurons, thus depolarizing them. Sweet, bitter, and umami tastants require a G-protein coupled receptor. These tastants bind to their respective receptors, thereby exciting the specialized neurons associated with them.

Both tasting abilities and sense of smell change with age. In humans, the senses decline dramatically by age 50 and continue to decline. A child may find a food to be too spicy, whereas an elderly person may find the same food to be bland and unappetizing.

Link to Learning



View this animation that shows how the sense of taste works.

Smell and Taste in the Brain

Olfactory neurons project from the olfactory epithelium to the olfactory bulb as thin, unmyelinated axons. The olfactory bulb is composed of neural clusters called glomeruli, and each glomerulus receives signals from one type of olfactory receptor, so each glomerulus is specific to one odorant. From glomeruli, olfactory signals travel directly to the olfactory cortex and then to the frontal cortex and the thalamus. Recall that this is a different path from most other sensory information, which is sent directly to the thalamus before ending up in the cortex. Olfactory signals also travel directly to the amygdala, thereafter reaching the hypothalamus, thalamus, and frontal cortex. The last structure that olfactory signals directly travel to is a cortical center in the temporal lobe structure important in spatial, autobiographical, declarative, and episodic memories. Olfaction is finally processed by areas of the brain that deal with memory, emotions, reproduction, and thought.

Taste neurons project from taste cells in the tongue, esophagus, and palate to the medulla, in the brainstem. From the medulla, taste signals travel to the thalamus and then to the primary gustatory cortex. Information from different regions of the tongue is segregated in the medulla, thalamus, and cortex.

Summary

There are five primary tastes in humans: sweet, sour, bitter, salty, and umami. Each taste has its own receptor type that responds only to that taste. Tastants enter the body and are dissolved in saliva. Taste cells are located within taste buds, which are found on three of the four types of papillae in the mouth.

Regarding olfaction, there are many thousands of odorants, but humans detect only about 10,000. Like taste receptors, olfactory receptors are each responsive to only one odorant. Odorants dissolve in nasal mucosa, where they excite their corresponding olfactory sensory cells. When these cells detect an odorant, they send their signals to the main olfactory bulb and then to other locations in the brain, including the olfactory cortex.

Glossary

bipolar neuron

neuron with two processes from the cell body, typically in opposite directions

glomerulus

in the olfactory bulb, one of the two neural clusters that receives signals from one type of olfactory receptor

gustation

sense of taste

odorant
airborne molecule that stimulates an olfactory receptor

olfaction
sense of smell

olfactory bulb
neural structure in the vertebrate brain that receives signals from olfactory receptors

olfactory epithelium
specialized tissue in the nasal cavity where olfactory receptors are located

olfactory receptor
dendrite of a specialized neuron

papilla
one of the small bump-like projections from the tongue

pheromone
substance released by an animal that can affect the physiology or behavior of other animals

tastant
food molecule that stimulates gustatory receptors

taste bud
clusters of taste cells

umami
one of the five basic tastes, which is described as “savory” and which may be largely the taste of L-glutamate

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6.5: Hearing and Vestibular Sensation

Skills to Develop

- Describe the relationship of amplitude and frequency of a sound wave to attributes of sound
- Trace the path of sound through the auditory system to the site of transduction of sound
- Identify the structures of the vestibular system that respond to gravity

Audition, or hearing, is important to humans and to other animals for many different interactions. It enables an organism to detect and receive information about danger, such as an approaching predator, and to participate in communal exchanges like those concerning territories or mating. On the other hand, although it is physically linked to the auditory system, the vestibular system is not involved in hearing. Instead, an animal's vestibular system detects its own movement, both linear and angular acceleration and deceleration, and balance.

Sound

Auditory stimuli are sound waves, which are mechanical, pressure waves that move through a medium, such as air or water. There are no sound waves in a vacuum since there are no air molecules to move in waves. The speed of sound waves differs, based on altitude, temperature, and medium, but at sea level and a temperature of 20º C (68º F), sound waves travel in the air at about 343 meters per second.

As is true for all waves, there are four main characteristics of a sound wave: frequency, wavelength, period, and amplitude. Frequency is the number of waves per unit of time, and in sound is heard as pitch. High-frequency (≥15.000Hz) sounds are higher-pitched (short wavelength) than low-frequency (long wavelengths; ≤100Hz) sounds. Frequency is measured in cycles per second, and for sound, the most commonly used unit is hertz (Hz), or cycles per second. Most humans can perceive sounds with frequencies between 30 and 20,000 Hz. Women are typically better at hearing high frequencies, but everyone's ability to hear high frequencies decreases with age. Dogs detect up to about 40,000 Hz; cats, 60,000 Hz; bats, 100,000 Hz; and dolphins 150,000 Hz, and American shad (*Alosa sapidissima*), a fish, can hear 180,000 Hz. Those frequencies above the human range are called ultrasound.

Amplitude, or the dimension of a wave from peak to trough, in sound is heard as volume and is illustrated in Figure 6.5.1. The sound waves of louder sounds have greater amplitude than those of softer sounds. For sound, volume is measured in decibels (dB). The softest sound that a human can hear is the zero point. Humans speak normally at 60 decibels.

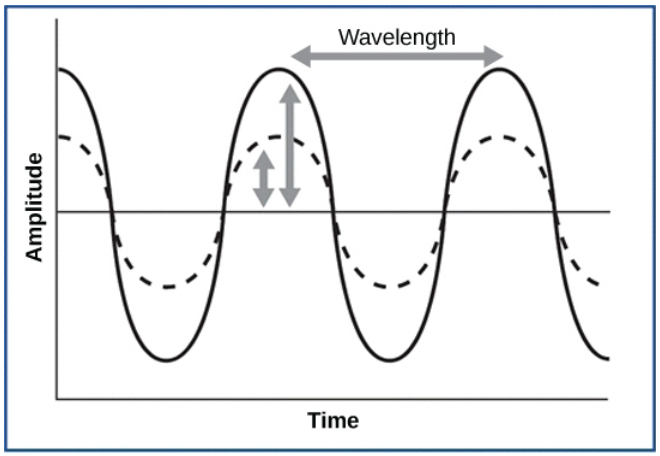


Figure 6.5.1: For sound waves, wavelength corresponds to pitch. Amplitude of the wave corresponds to volume. The sound wave shown with a dashed line is softer in volume than the sound wave shown with a solid line. (credit: NIH)

Reception of Sound

In mammals, sound waves are collected by the external, cartilaginous part of the ear called the pinna, then travel through the auditory canal and cause vibration of the thin diaphragm called the tympanum or ear drum, the innermost part of the outer ear (illustrated in Figure 6.5.2). Interior to the tympanum is the middle ear. The middle ear holds three small bones called the ossicles,

which transfer energy from the moving tympanum to the inner ear. The three ossicles are the malleus (also known as the hammer), the incus (the anvil), and stapes (the stirrup). The aptly named stapes looks very much like a stirrup. The three ossicles are unique to mammals, and each plays a role in hearing. The malleus attaches at three points to the interior surface of the tympanic membrane. The incus attaches the malleus to the stapes. In humans, the stapes is not long enough to reach the tympanum. If we did not have the malleus and the incus, then the vibrations of the tympanum would never reach the inner ear. These bones also function to collect force and amplify sounds. The ear ossicles are homologous to bones in a fish mouth: the bones that support gills in fish are thought to be adapted for use in the vertebrate ear over evolutionary time. Many animals (frogs, reptiles, and birds, for example) use the stapes of the middle ear to transmit vibrations to the middle ear.

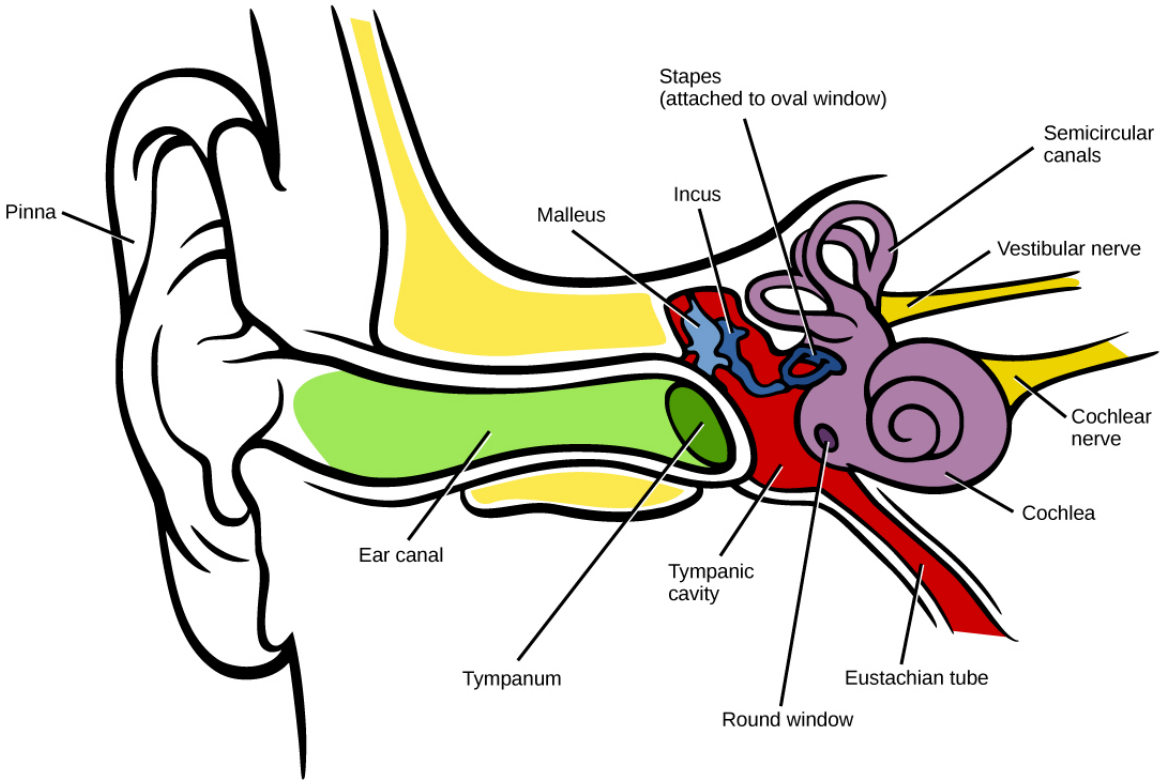


Figure 6.5.2: Sound travels through the outer ear to the middle ear, which is bounded on its exterior by the tympanic membrane. The middle ear contains three bones called ossicles that transfer the sound wave to the oval window, the exterior boundary of the inner ear. The organ of Corti, which is the organ of sound transduction, lies inside the cochlea. (credit: modification of work by Lars Chittka, Axel Brockmann)

Transduction of Sound

Vibrating objects, such as vocal cords, create sound waves or pressure waves in the air. When these pressure waves reach the ear, the ear transduces this mechanical stimulus (pressure wave) into a nerve impulse (electrical signal) that the brain perceives as sound. The pressure waves strike the tympanum, causing it to vibrate. The mechanical energy from the moving tympanum transmits the vibrations to the three bones of the middle ear. The stapes transmits the vibrations to a thin diaphragm called the oval window, which is the outermost structure of the inner ear. The structures of the inner ear are found in the labyrinth, a bony, hollow structure that is the most interior portion of the ear. Here, the energy from the sound wave is transferred from the stapes through the flexible oval window and to the fluid of the cochlea. The vibrations of the oval window create pressure waves in the fluid (perilymph) inside the cochlea. The cochlea is a whorled structure, like the shell of a snail, and it contains receptors for transduction of the mechanical wave into an electrical signal (as illustrated in Figure 6.5.3). Inside the cochlea, the basilar membrane is a mechanical analyzer that runs the length of the cochlea, curling toward the cochlea's center.

The mechanical properties of the basilar membrane change along its length, such that it is thicker, tauter, and narrower at the outside of the whorl (where the cochlea is largest), and thinner, floppier, and broader toward the apex, or center, of the whorl (where the cochlea is smallest). Different regions of the basilar membrane vibrate according to the frequency of the sound wave conducted through the fluid in the cochlea. For these reasons, the fluid-filled cochlea detects different wave frequencies (pitches) at

different regions of the membrane. When the sound waves in the cochlear fluid contact the basilar membrane, it flexes back and forth in a wave-like fashion. Above the basilar membrane is the tectorial membrane.

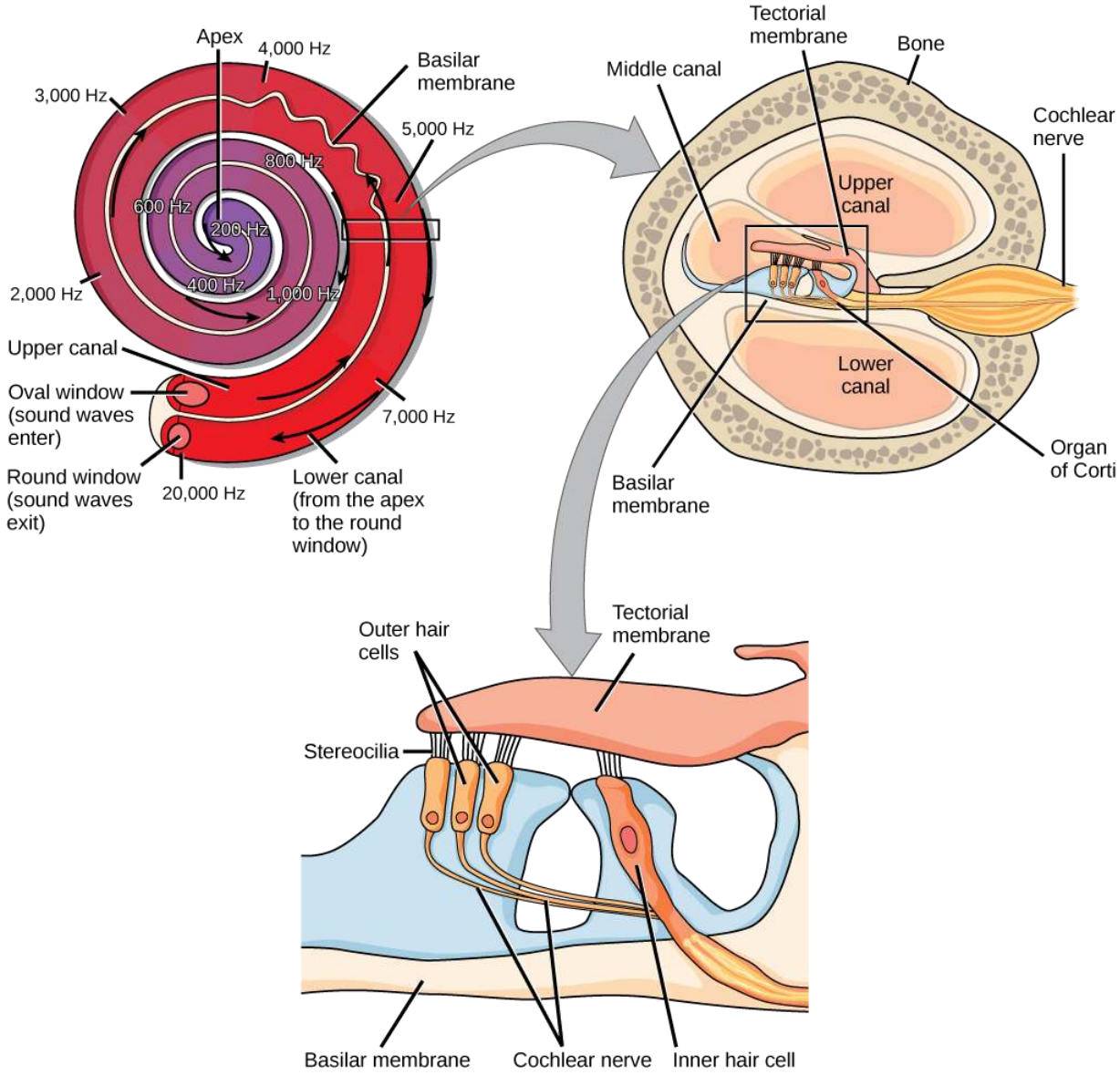


Figure 6.5.3: In the human ear, sound waves cause the stapes to press against the oval window. Vibrations travel up the fluid-filled interior of the cochlea. The basilar membrane that lines the cochlea gets continuously thinner toward the apex of the cochlea. Different thicknesses of membrane vibrate in response to different frequencies of sound. Sound waves then exit through the round window. In the cross section of the cochlea (top right figure), note that in addition to the upper canal and lower canal, the cochlea also has a middle canal. The organ of Corti (bottom image) is the site of sound transduction. Movement of stereocilia on hair cells results in an action potential that travels along the auditory nerve.

Exercise

Cochlear implants can restore hearing in people who have a nonfunctional cochlear. The implant consists of a microphone that picks up sound. A speech processor selects sounds in the range of human speech, and a transmitter converts these sounds to electrical impulses, which are then sent to the auditory nerve. Which of the following types of hearing loss would not be restored by a cochlear implant?

A. Hearing loss resulting from absence or loss of hair cells in the organ of Corti.
B. Hearing loss resulting from an abnormal auditory nerve.
C. Hearing loss resulting from fracture of the cochlea.

D. Hearing loss resulting from damage to bones of the middle ear.

Answer

B

The site of transduction is in the organ of Corti (spiral organ). It is composed of hair cells held in place above the basilar membrane like flowers projecting up from soil, with their exposed short, hair-like stereocilia contacting or embedded in the tectorial membrane above them. The inner hair cells are the primary auditory receptors and exist in a single row, numbering approximately 3,500. The stereocilia from inner hair cells extend into small dimples on the tectorial membrane's lower surface. The outer hair cells are arranged in three or four rows. They number approximately 12,000, and they function to fine tune incoming sound waves. The longer stereocilia that project from the outer hair cells actually attach to the tectorial membrane. All of the stereocilia are mechanoreceptors, and when bent by vibrations they respond by opening a gated ion channel. As a result, the hair cell membrane is depolarized, and a signal is transmitted to the chochlear nerve. Intensity (volume) of sound is determined by how many hair cells at a particular location are stimulated.

The hair cells are arranged on the basilar membrane in an orderly way. The basilar membrane vibrates in different regions, according to the frequency of the sound waves impinging on it. Likewise, the hair cells that lay above it are most sensitive to a specific frequency of sound waves. Hair cells can respond to a small range of similar frequencies, but they require stimulation of greater intensity to fire at frequencies outside of their optimal range. The difference in response frequency between adjacent inner hair cells is about 0.2 percent. Compare that to adjacent piano strings, which are about six percent different. Place theory, which is the model for how biologists think pitch detection works in the human ear, states that high frequency sounds selectively vibrate the basilar membrane of the inner ear near the entrance port (the oval window). Lower frequencies travel farther along the membrane before causing appreciable excitation of the membrane. The basic pitch-determining mechanism is based on the location along the membrane where the hair cells are stimulated. The place theory is the first step toward an understanding of pitch perception. Considering the extreme pitch sensitivity of the human ear, it is thought that there must be some auditory "sharpening" mechanism to enhance the pitch resolution.

When sound waves produce fluid waves inside the cochlea, the basilar membrane flexes, bending the stereocilia that attach to the tectorial membrane. Their bending results in action potentials in the hair cells, and auditory information travels along the neural endings of the bipolar neurons of the hair cells (collectively, the auditory nerve) to the brain. When the hairs bend, they release an excitatory neurotransmitter at a synapse with a sensory neuron, which then conducts action potentials to the central nervous system. The cochlear branch of the vestibulocochlear cranial nerve sends information on hearing. The auditory system is very refined, and there is some modulation or "sharpening" built in. The brain can send signals back to the cochlea, resulting in a change of length in the outer hair cells, sharpening or dampening the hair cells' response to certain frequencies.

Higher Processing

The inner hair cells are most important for conveying auditory information to the brain. About 90 percent of the afferent neurons carry information from inner hair cells, with each hair cell synapsing with 10 or so neurons. Outer hair cells connect to only 10 percent of the afferent neurons, and each afferent neuron innervates many hair cells. The afferent, bipolar neurons that convey auditory information travel from the cochlea to the medulla, through the pons and midbrain in the brainstem, finally reaching the primary auditory cortex in the temporal lobe.

Vestibular Information

The stimuli associated with the vestibular system are linear acceleration (gravity) and angular acceleration and deceleration. Gravity, acceleration, and deceleration are detected by evaluating the inertia on receptive cells in the vestibular system. Gravity is detected through head position. Angular acceleration and deceleration are expressed through turning or tilting of the head.

The vestibular system has some similarities with the auditory system. It utilizes hair cells just like the auditory system, but it excites them in different ways. There are five vestibular receptor organs in the inner ear: the utricle, the saccule, and three semicircular canals. Together, they make up what's known as the vestibular labyrinth that is shown in Figure 6.5.4. The utricle and saccule respond to acceleration in a straight line, such as gravity. The roughly 30,000 hair cells in the utricle and 16,000 hair cells

in the saccule lie below a gelatinous layer, with their stereocilia projecting into the gelatin. Embedded in this gelatin are calcium carbonate crystals—like tiny rocks. When the head is tilted, the crystals continue to be pulled straight down by gravity, but the new angle of the head causes the gelatin to shift, thereby bending the stereocilia. The bending of the stereocilia stimulates the neurons, and they signal to the brain that the head is tilted, allowing the maintenance of balance. It is the vestibular branch of the vestibulocochlear cranial nerve that deals with balance.

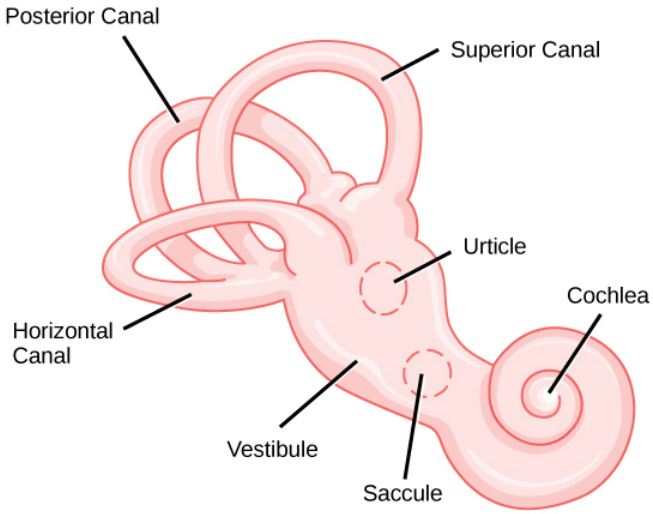


Figure 6.5.4: The structure of the vestibular labyrinth is shown. (credit: modification of work by NIH)

The fluid-filled semicircular canals are tubular loops set at oblique angles. They are arranged in three spatial planes. The base of each canal has a swelling that contains a cluster of hair cells. The hairs project into a gelatinous cap called the cupula and monitor angular acceleration and deceleration from rotation. They would be stimulated by driving your car around a corner, turning your head, or falling forward. One canal lies horizontally, while the other two lie at about 45 degree angles to the horizontal axis. When the brain processes input from all three canals together, it can detect angular acceleration or deceleration in three dimensions. When the head turns, the fluid in the canals shifts, thereby bending stereocilia and sending signals to the brain. Upon cessation accelerating or decelerating—or just moving—the movement of the fluid within the canals slows or stops. For example, imagine holding a glass of water. When moving forward, water may splash backwards onto the hand, and when motion has stopped, water may splash forward onto the fingers. While in motion, the water settles in the glass and does not splash. Note that the canals are not sensitive to velocity itself, but to changes in velocity, so moving forward at 60mph with your eyes closed would not give the sensation of movement, but suddenly accelerating or braking would stimulate the receptors.

Higher Processing

Hair cells from the utricle, saccule, and semicircular canals also communicate through bipolar neurons to the cochlear nucleus in the medulla. Cochlear neurons send descending projections to the spinal cord and ascending projections to the pons, thalamus, and cerebellum. Connections to the cerebellum are important for coordinated movements. There are also projections to the temporal cortex, which account for feelings of dizziness; projections to autonomic nervous system areas in the brainstem, which account for motion sickness; and projections to the primary somatosensory cortex, which monitors subjective measurements of the external world and self-movement. People with lesions in the vestibular area of the somatosensory cortex see vertical objects in the world as being tilted. Finally, the vestibular signals project to certain optic muscles to coordinate eye and head movements.

Link to Learning

Click through this interactive tutorial to review the parts of the ear and how they function to process sound.

Summary

Audition is important for territory defense, predation, predator defense, and communal exchanges. The vestibular system, which is not auditory, detects linear acceleration and angular acceleration and deceleration. Both the auditory system and vestibular system use hair cells as their receptors.

Auditory stimuli are sound waves. The sound wave energy reaches the outer ear (pinna, canal, tympanum), and vibrations of the tympanum send the energy to the middle ear. The middle ear bones shift and the stapes transfers mechanical energy to the oval window of the fluid-filled inner ear cochlea. Once in the cochlea, the energy causes the basilar membrane to flex, thereby bending the stereocilia on receptor hair cells. This activates the receptors, which send their auditory neural signals to the brain.

The vestibular system has five parts that work together to provide the sense of direction, thus helping to maintain balance. The utricle and saccule measure head orientation: their calcium carbonate crystals shift when the head is tilted, thereby activating hair cells. The semicircular canals work similarly, such that when the head is turned, the fluid in the canals bends stereocilia on hair cells. The vestibular hair cells also send signals to the thalamus and to somatosensory cortex, but also to the cerebellum, the structure above the brainstem that plays a large role in timing and coordination of movement.

Glossary

audition
sense of hearing

basilar membrane
stiff structure in the cochlea that indirectly anchors auditory receptors

cochlea
whorled structure that contains receptors for transduction of the mechanical wave into an electrical signal

incus
(also, anvil) second of the three bones of the middle ear

inner ear
innermost part of the ear; consists of the cochlea and the vestibular system

labyrinth
bony, hollow structure that is the most internal part of the ear; contains the sites of transduction of auditory and vestibular information

malleus
(also, hammer) first of the three bones of the middle ear

middle ear
part of the hearing apparatus that functions to transfer energy from the tympanum to the oval window of the inner ear

organ of Corti

in the basilar membrane, the site of the transduction of sound, a mechanical wave, to a neural signal

ossicle
one of the three bones of the middle ear

outer ear
part of the ear that consists of the pinna, ear canal, and tympanum and which conducts sound waves into the middle ear

oval window
thin diaphragm between the middle and inner ears that receives sound waves from contact with the stapes bone of the middle ear

pinna
cartilaginous outer ear

semicircular canal
one of three half-circular, fluid-filled tubes in the vestibular labyrinth that monitors angular acceleration and deceleration

stapes
(also, stirrup) third of the three bones of the middle ear

stereocilia
in the auditory system, hair-like projections from hair cells that help detect sound waves

tectorial membrane
cochlear structure that lies above the hair cells and participates in the transduction of sound at the hair cells

tympanum
(also, tympanic membrane or ear drum) thin diaphragm between the outer and middle ears

ultrasound
sound frequencies above the human detectable ceiling of approximately 20,000 Hz

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6.6: Vision

Skills to Develop

- Explain how electromagnetic waves differs from sound waves
- Trace the path of light through the eye to the point of the optic nerve
- Explain tonic activity as it is manifested in photoreceptors in the retina

Vision is the ability to detect light patterns from the outside environment and interpret them into images. Animals are bombarded with sensory information, and the sheer volume of visual information can be problematic. Fortunately, the visual systems of species have evolved to attend to the most-important stimuli. The importance of vision to humans is further substantiated by the fact that about one-third of the human cerebral cortex is dedicated to analyzing and perceiving visual information.

Light

As with auditory stimuli, light travels in waves. The compression waves that compose sound must travel in a medium—a gas, a liquid, or a solid. In contrast, light is composed of electromagnetic waves and needs no medium; light can travel in a vacuum (Figure 6.6.1). The behavior of light can be discussed in terms of the behavior of waves and also in terms of the behavior of the fundamental unit of light—a packet of electromagnetic radiation called a photon. A glance at the electromagnetic spectrum shows that visible light for humans is just a small slice of the entire spectrum, which includes radiation that we cannot see as light because it is below the frequency of visible red light and above the frequency of visible violet light.

Certain variables are important when discussing perception of light. Wavelength (which varies inversely with frequency) manifests itself as hue. Light at the red end of the visible spectrum has longer wavelengths (and is lower frequency), while light at the violet end has shorter wavelengths (and is higher frequency). The wavelength of light is expressed in nanometers (nm); one nanometer is one billionth of a meter. Humans perceive light that ranges between approximately 380 nm and 740 nm. Some other animals, though, can detect wavelengths outside of the human range. For example, bees see near-ultraviolet light in order to locate nectar guides on flowers, and some non-avian reptiles sense infrared light (heat that prey gives off).

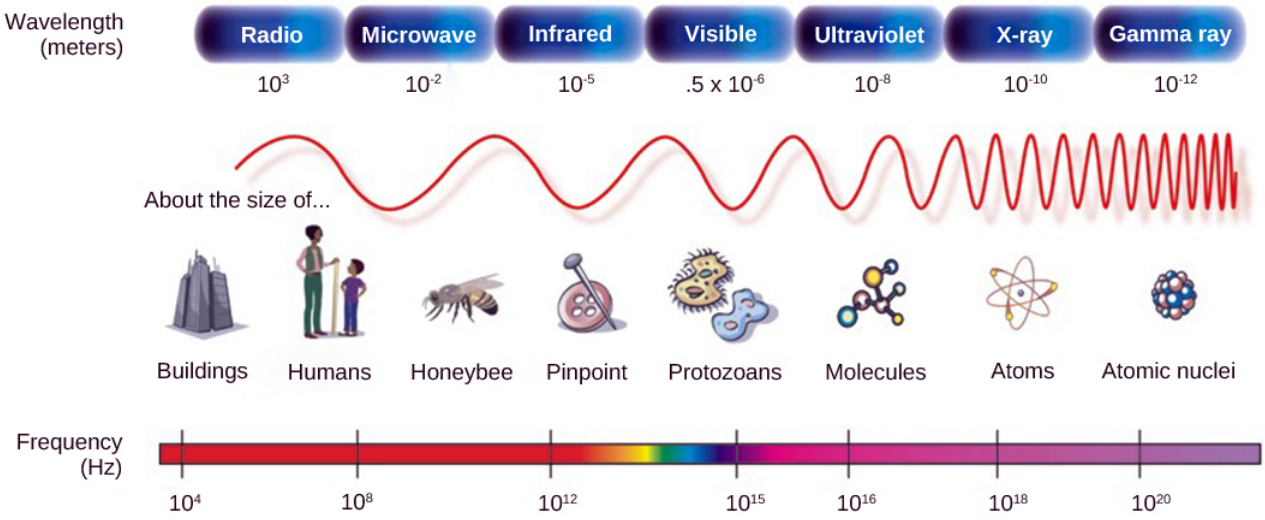


Figure 6.6.1: In the electromagnetic spectrum, visible light lies between 380 nm and 740 nm. (credit: modification of work by NASA)

Wave amplitude is perceived as luminous intensity, or brightness. The standard unit of intensity of light is the candela, which is approximately the luminous intensity of a one common candle.

Light waves travel 299,792 km per second in a vacuum, (and somewhat slower in various media such as air and water), and those waves arrive at the eye as long (red), medium (green), and short (blue) waves. What is termed “white light” is light that is perceived as white by the human eye. This effect is produced by light that stimulates equally the color receptors in the human eye.

The apparent color of an object is the color (or colors) that the object reflects. Thus a red object reflects the red wavelengths in mixed (white) light and absorbs all other wavelengths of light.

Anatomy of the Eye

The photoreceptive cells of the eye, where transduction of light to nervous impulses occurs, are located in the retina (shown in Figure 6.6.2) on the inner surface of the back of the eye. But light does not impinge on the retina unaltered. It passes through other layers that process it so that it can be interpreted by the retina (Figure 6.6.2**b**). The cornea, the front transparent layer of the eye, and the crystalline lens, a transparent convex structure behind the cornea, both refract (bend) light to focus the image on the retina. The iris, which is conspicuous as the colored part of the eye, is a circular muscular ring lying between the lens and cornea that regulates the amount of light entering the eye. In conditions of high ambient light, the iris contracts, reducing the size of the pupil at its center. In conditions of low light, the iris relaxes and the pupil enlarges.

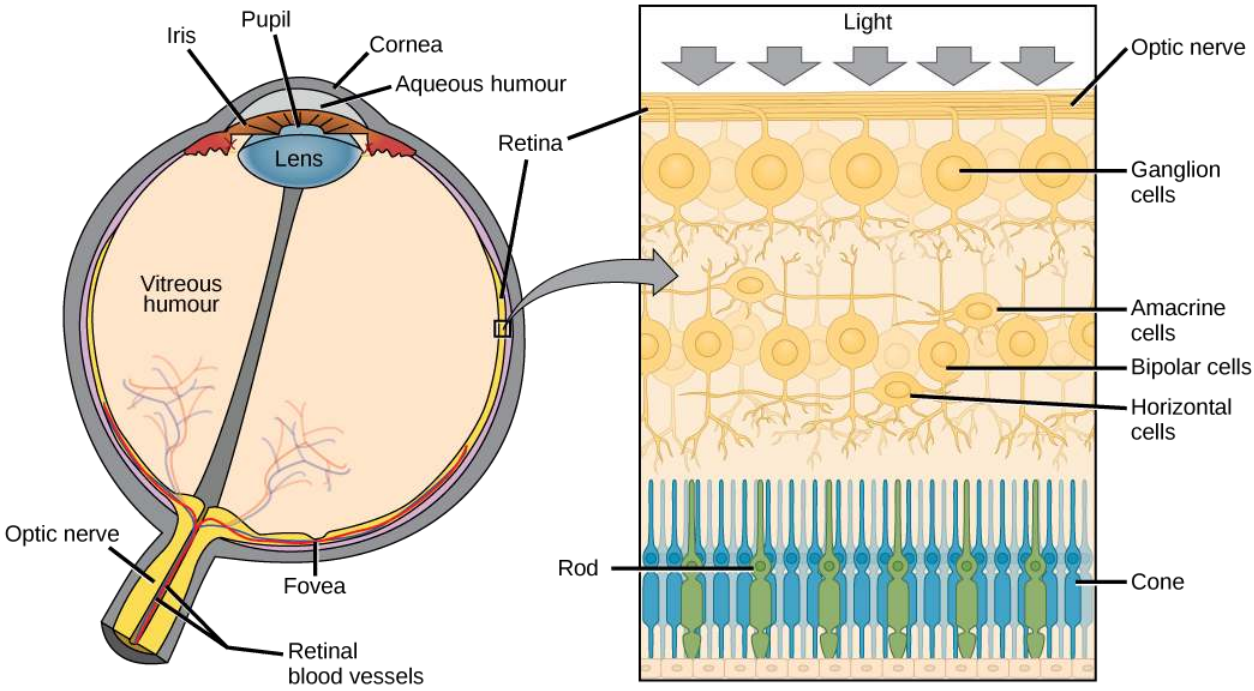


Figure 6.6.2: (a) The human eye is shown in cross section. (b) A blowup shows the layers of the retina.

Exercise

Which of the following statements about the human eye is false?

A. Rods detect color, while cones detect only shades of gray.
B. When light enters the retina, it passes the ganglion cells and bipolar cells before reaching photoreceptors at the rear of the eye.
C. The iris adjusts the amount of light coming into the eye.
D. The cornea is a protective layer on the front of the eye.

Answer

A

The main function of the lens is to focus light on the retina and fovea centralis. The lens is dynamic, focusing and re-focusing light as the eye rests on near and far objects in the visual field. The lens is operated by muscles that stretch it flat or allow it to thicken, changing the focal length of light coming through it to focus it sharply on the retina. With age comes the loss of the flexibility of the lens, and a form of farsightedness called presbyopia results. Presbyopia occurs because the image focuses behind the retina. Presbyopia is a deficit similar to a different type of farsightedness called hyperopia caused by an eyeball that is too short. For both

defects, images in the distance are clear but images nearby are blurry. Myopia (nearsightedness) occurs when an eyeball is elongated and the image focus falls in front of the retina. In this case, images in the distance are blurry but images nearby are clear.

There are two types of photoreceptors in the retina: rods and cones, named for their general appearance as illustrated in Figure 6.6.3. Rods are strongly photosensitive and are located in the outer edges of the retina. They detect dim light and are used primarily for peripheral and nighttime vision. Cones are weakly photosensitive and are located near the center of the retina. They respond to bright light, and their primary role is in daytime, color vision.

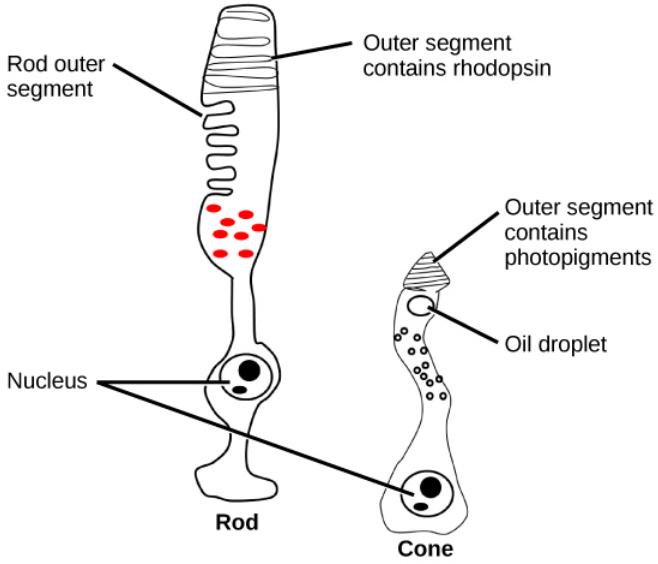


Figure 6.6.3: Rods and cones are photoreceptors in the retina. Rods respond in low light and can detect only shades of gray. Cones respond in intense light and are responsible for color vision. (credit: modification of work by Piotr Sliwa)

The fovea is the region in the center back of the eye that is responsible for acute vision. The fovea has a high density of cones. When you bring your gaze to an object to examine it intently in bright light, the eyes orient so that the object's image falls on the fovea. However, when looking at a star in the night sky or other object in dim light, the object can be better viewed by the peripheral vision because it is the rods at the edges of the retina, rather than the cones at the center, that operate better in low light. In humans, cones far outnumber rods in the fovea.

Link to Learning

Review the anatomical structure of the eye, clicking on each part to practice identification.

Transduction of Light

The rods and cones are the site of transduction of light to a neural signal. Both rods and cones contain photopigments. In vertebrates, the main photopigment, rhodopsin, has two main parts Figure 6.6.4): an opsin, which is a membrane protein (in the form of a cluster of α-helices that span the membrane), and retinal—a molecule that absorbs light.

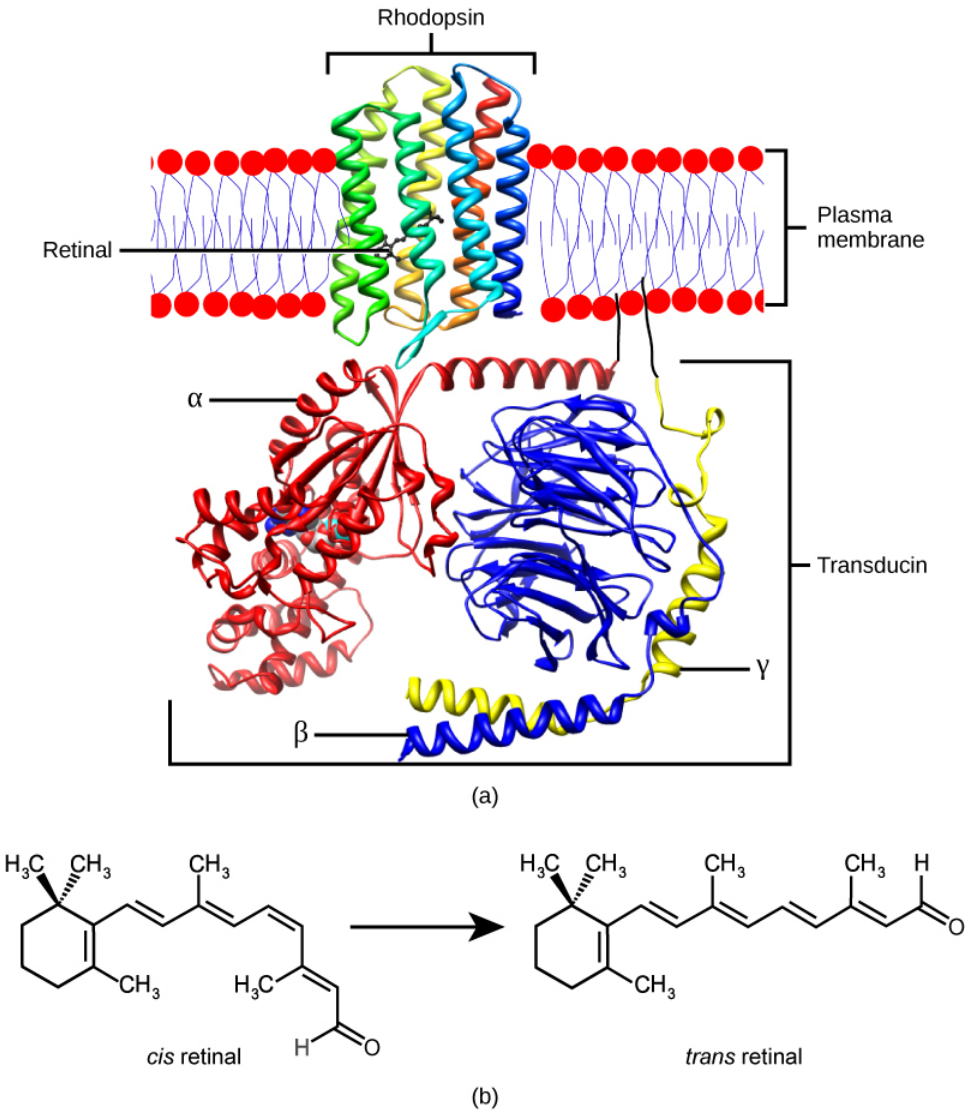


Figure 6.6.4: (a) Rhodopsin, the photoreceptor in vertebrates, has two parts: the trans-membrane protein opsin, and retinal. When light strikes retinal, it changes shape from (b) a *cis* to a *trans* form. The signal is passed to a G-protein called transducin, triggering a series of downstream events.

When light hits a photoreceptor, it causes a shape change in the retinal, altering its structure from a bent (*cis*) form of the molecule to its linear (*trans*) isomer. This isomerization of retinal activates the rhodopsin, starting a cascade of events that ends with the closing of Na^+ channels in the membrane of the photoreceptor. Thus, unlike most other sensory neurons (which become depolarized by exposure to a stimulus) visual receptors become hyperpolarized and thus driven away from threshold (Figure 6.6.5).

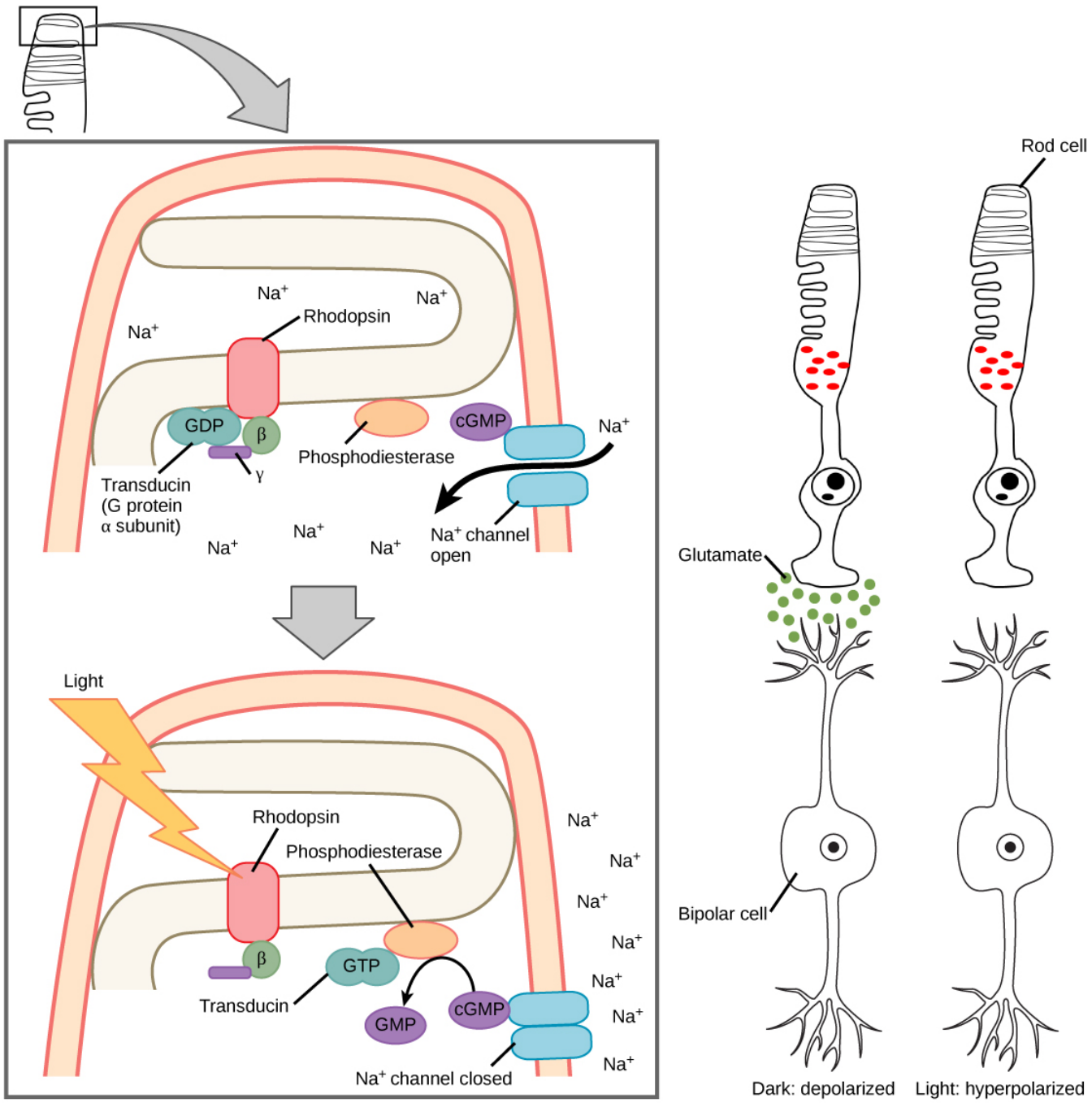


Figure 6.6.5: When light strikes rhodopsin, the G-protein transducin is activated, which in turn activates phosphodiesterase. Phosphodiesterase converts cGMP to GMP, thereby closing sodium channels. As a result, the membrane becomes hyperpolarized. The hyperpolarized membrane does not release glutamate to the bipolar cell.

Trichromatic Coding

There are three types of cones (with different photopsins), and they differ in the wavelength to which they are most responsive, as shown in Figure 6.6.6. Some cones are maximally responsive to short light waves of 420 nm, so they are called S cones ("S" for "short"); others respond maximally to waves of 530 nm (M cones, for "medium"); a third group responds maximally to light of longer wavelengths, at 560 nm (L, or "long" cones). With only one type of cone, color vision would not be possible, and a two-cone (dichromatic) system has limitations. Primates use a three-cone (trichromatic) system, resulting in full color vision.

The color we perceive is a result of the ratio of activity of our three types of cones. The colors of the visual spectrum, running from long-wavelength light to short, are red (700 nm), orange (600 nm), yellow (565 nm), green (497 nm), blue (470 nm), indigo (450

nm), and violet (425 nm). Humans have very sensitive perception of color and can distinguish about 500 levels of brightness, 200 different hues, and 20 steps of saturation, or about 2 million distinct colors.

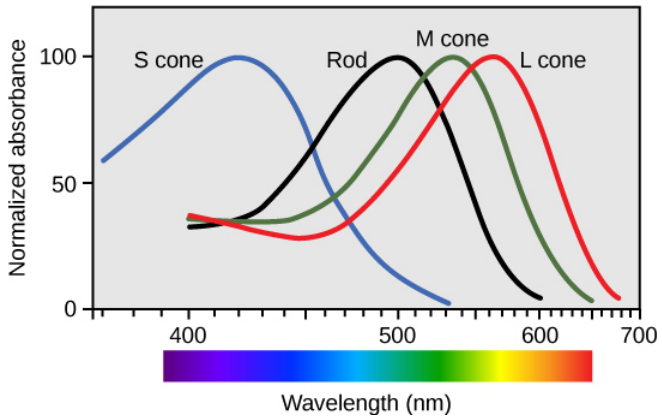


Figure 6.6.6: Human rod cells and the different types of cone cells each have an optimal wavelength. However, there is considerable overlap in the wavelengths of light detected.

Retinal Processing

Visual signals leave the cones and rods, travel to the bipolar cells, and then to ganglion cells. A large degree of processing of visual information occurs in the retina itself, before visual information is sent to the brain.

Photoreceptors in the retina continuously undergo tonic activity. That is, they are always slightly active even when not stimulated by light. In neurons that exhibit tonic activity, the absence of stimuli maintains a firing rate at a baseline; while some stimuli increase firing rate from the baseline, and other stimuli decrease firing rate. In the absence of light, the bipolar neurons that connect rods and cones to ganglion cells are continuously and actively inhibited by the rods and cones. Exposure of the retina to light hyperpolarizes the rods and cones and removes their inhibition of bipolar cells. The now active bipolar cells in turn stimulate the ganglion cells, which send action potentials along their axons (which leave the eye as the optic nerve). Thus, the visual system relies on change in retinal activity, rather than the absence or presence of activity, to encode visual signals for the brain. Sometimes horizontal cells carry signals from one rod or cone to other photoreceptors and to several bipolar cells. When a rod or cone stimulates a horizontal cell, the horizontal cell inhibits more distant photoreceptors and bipolar cells, creating lateral inhibition. This inhibition sharpens edges and enhances contrast in the images by making regions receiving light appear lighter and dark surroundings appear darker. Amacrine cells can distribute information from one bipolar cell to many ganglion cells.

You can demonstrate this using an easy demonstration to “trick” your retina and brain about the colors you are observing in your visual field. Look fixedly at Figure 6.6.7 for about 45 seconds. Then quickly shift your gaze to a sheet of blank white paper or a white wall. You should see an afterimage of the Norwegian flag in its correct colors. At this point, close your eyes for a moment, then reopen them, looking again at the white paper or wall; the afterimage of the flag should continue to appear as red, white, and blue. What causes this? According to an explanation called opponent process theory, as you gazed fixedly at the green, black, and yellow flag, your retinal ganglion cells that respond positively to green, black, and yellow increased their firing dramatically. When you shifted your gaze to the neutral white ground, these ganglion cells abruptly decreased their activity and the brain interpreted this abrupt downshift as if the ganglion cells were responding now to their “opponent” colors: red, white, and blue, respectively, in the visual field. Once the ganglion cells return to their baseline activity state, the false perception of color will disappear.

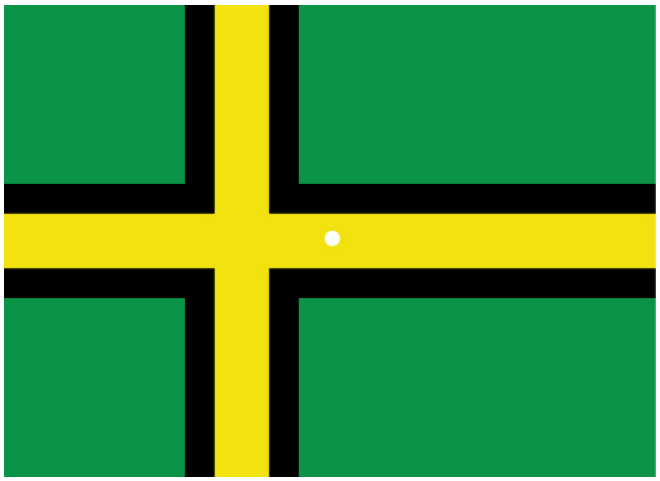


Figure 6.6.7: View this flag to understand how retinal processing works. Stare at the center of the flag (indicated by the white dot) for 45 seconds, and then quickly look at a white background, noticing how colors appear.

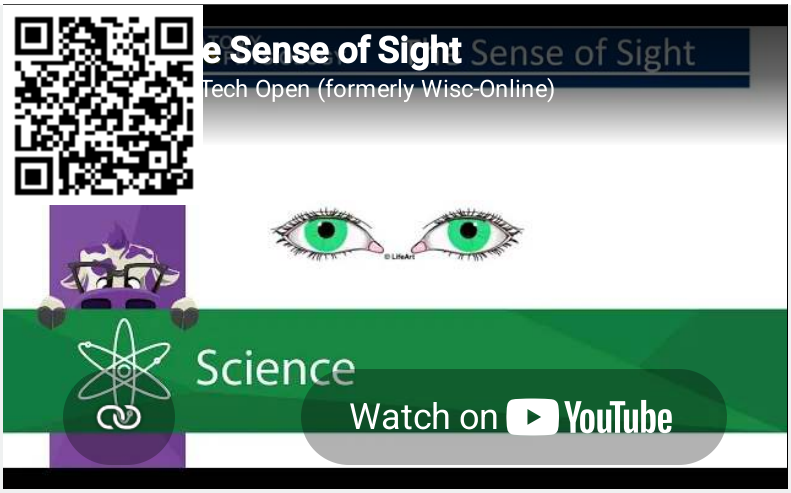
Higher Processing

The myelinated axons of ganglion cells make up the optic nerves. Within the nerves, different axons carry different qualities of the visual signal. Some axons constitute the magnocellular (big cell) pathway, which carries information about form, movement, depth, and differences in brightness. Other axons constitute the parvocellular (small cell) pathway, which carries information on color and fine detail. Some visual information projects directly back into the brain, while other information crosses to the opposite side of the brain. This crossing of optical pathways produces the distinctive optic chiasma (Greek, for “crossing”) found at the base of the brain and allows us to coordinate information from both eyes.

Once in the brain, visual information is processed in several places, and its routes reflect the complexity and importance of visual information to humans and other animals. One route takes the signals to the thalamus, which serves as the routing station for all incoming sensory impulses except olfaction. In the thalamus, the magnocellular and parvocellular distinctions remain intact, and there are different layers of the thalamus dedicated to each. When visual signals leave the thalamus, they travel to the primary visual cortex at the rear of the brain. From the visual cortex, the visual signals travel in two directions. One stream that projects to the parietal lobe, in the side of the brain, carries magnocellular (“where”) information. A second stream projects to the temporal lobe and carries both magnocellular (“where”) and parvocellular (“what”) information.

Another important visual route is a pathway from the retina to the superior colliculus in the midbrain, where eye movements are coordinated and integrated with auditory information. Finally, there is the pathway from the retina to the suprachiasmatic nucleus (SCN) of the hypothalamus. The SCN is a cluster of cells that is considered to be the body’s internal clock, which controls our circadian (day-long) cycle. The SCN sends information to the pineal gland, which is important in sleep/wake patterns and annual cycles.

Link to Learning



View this interactive presentation to review what you have learned about how vision functions.

Summary

Vision is the only photo responsive sense. Visible light travels in waves and is a very small slice of the electromagnetic radiation spectrum. Light waves differ based on their frequency (wavelength = hue) and amplitude (intensity = brightness).

In the vertebrate retina, there are two types of light receptors (photoreceptors): cones and rods. Cones, which are the source of color vision, exist in three forms—L, M, and S—and they are differentially sensitive to different wavelengths. Cones are located in the retina, along with the dim-light, achromatic receptors (rods). Cones are found in the fovea, the central region of the retina, whereas rods are found in the peripheral regions of the retina.

Visual signals travel from the eye over the axons of retinal ganglion cells, which make up the optic nerves. Ganglion cells come in several versions. Some ganglion cell axons carry information on form, movement, depth, and brightness, while other axons carry information on color and fine detail. Visual information is sent to the superior colliculi in the midbrain, where coordination of eye movements and integration of auditory information takes place. Visual information is also sent to the suprachiasmatic nucleus (SCN) of the hypothalamus, which plays a role in the circadian cycle.

Glossary

candela
(cd) unit of measurement of luminous intensity (brightness)

circadian
describes a time cycle about one day in length

cone
weakly photosensitive, chromatic, cone-shaped neuron in the fovea of the retina that detects bright light and is used in daytime color vision

cornea
transparent layer over the front of the eye that helps focus light waves

fovea
region in the center of the retina with a high density of photoreceptors and which is responsible for acute vision

hyperopia
(also, farsightedness) visual defect in which the image focus falls behind the retina, thereby making images in the distance clear, but close-up images blurry

iris
: pigmented, circular muscle at the front of the eye that regulates the amount of light entering the eye

lens
: transparent, convex structure behind the cornea that helps focus light waves on the retina

myopia
: (also, nearsightedness) visual defect in which the image focus falls in front of the retina, thereby making images in the distance blurry, but close-up images clear

presbyopia
: visual defect in which the image focus falls behind the retina, thereby making images in the distance clear, but close-up images blurry; caused by age-based changes in the lens

pupil
: small opening though which light enters

retina
: layer of photoreceptive and supporting cells on the inner surface of the back of the eye

rhodopsin
: main photopigment in vertebrates

rod
: strongly photosensitive, achromatic, cylindrical neuron in the outer edges of the retina that detects dim light and is used in peripheral and nighttime vision

superior colliculus
: paired structure in the top of the midbrain, which manages eye movements and auditory integration

suprachiasmatic nucleus
: cluster of cells in the hypothalamus that plays a role in the circadian cycle

tonic activity
: in a neuron, slight continuous activity while at rest

vision
: sense of sight

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6.E: Sensory Systems (Exercises)

36.1: Sensory Processes

Senses provide information about the body and its environment. Humans have five special senses: olfaction (smell), gustation (taste), equilibrium (balance and body position), vision, and hearing. Additionally, we possess general senses, also called somatosensation, which respond to stimuli like temperature, pain, pressure, and vibration.

Review Questions

Where does perception occur?

A. spinal cord
B. cerebral cortex
C. receptors
D. thalamus

Answer

B

If a person's cold receptors no longer convert cold stimuli into sensory signals, that person has a problem with the process of _____.

A. reception
B. transmission
C. perception
D. transduction

Answer

D

After somatosensory transduction, the sensory signal travels through the brain as a(n) _____ signal.

A. electrical
B. pressure
C. optical
D. thermal

Answer

A

Free Response

If a person sustains damage to axons leading from sensory receptors to the central nervous system, which step or steps of sensory perception will be affected?

Answer

Transmission of sensory information from the receptor to the central nervous system will be impaired, and thus, perception of stimuli, which occurs in the brain, will be halted.

In what way does the overall magnitude of a stimulus affect the just-noticeable difference in the perception of that stimulus?

Answer

The just-noticeable difference is a fraction of the overall magnitude of the stimulus and seems to be a relatively fixed proportion (such as 10 percent) whether the stimulus is large (such as a very heavy object) or small (such as a very light object).

36.2: Somatosensation

Somatosensation is a mixed sensory category and includes all sensation received from the skin and mucous membranes, as well from as the limbs and joints. Somatosensation is also known as tactile sense, or more familiarly, as the sense of touch. Somatosensation occurs all over the exterior of the body and at some interior locations as well. A variety of receptor types—embedded in the skin, mucous membranes, muscles, joints, internal organs, and cardiovascular system—play a role.

Review Questions

_____ are found only in _____ skin, and detect skin deflection.

A. Meissner's corpuscles: hairy
B. Merkel's disks: glabrous
C. hair receptors: hairy
D. Krause end bulbs: hairy

Answer

B

If you were to burn your epidermis, what receptor type would you most likely burn?

A. free nerve endings
B. Ruffini endings
C. Pacinian corpuscle
D. hair receptors

Answer

A

Free Response

What can be inferred about the relative sizes of the areas of cortex that process signals from skin not densely innervated with sensory receptors and skin that is densely innervated with sensory receptors?

Answer

The cortical areas serving skin that is densely innervated likely are larger than those serving skin that is less densely innervated.

36.3: Taste and Smell

Taste, also called gustation, and smell, also called olfaction, are the most interconnected senses in that both involve molecules of the stimulus entering the body and bonding to receptors. Smell lets an animal sense the presence of food or other animals—whether potential mates, predators, or prey—or other chemicals in the environment that can impact their survival. Similarly, the sense of taste allows animals to discriminate between types of foods.

Review Questions

Which of the following has the fewest taste receptors?

A. fungiform papillae
B. circumvallate papillae

C. foliate papillae
D. filiform papillae

Answer

D

How many different taste molecules do taste cells each detect?

A. one
B. five
C. ten
D. It depends on the spot on the tongue

Answer

A

Salty foods activate the taste cells by _____.

A. exciting the taste cell directly
B. causing hydrogen ions to enter the cell
C. causing sodium channels to close
D. binding directly to the receptors

Answer

A

All sensory signals except _____ travel to the _____ in the brain before the cerebral cortex.

A. vision; thalamus
B. olfaction; thalamus
C. vision; cranial nerves
D. olfaction; cranial nerves

Answer

B

Free Response

From the perspective of the recipient of the signal, in what ways do pheromones differ from other odorants?

Answer

Pheromones may not be consciously perceived, and pheromones can have direct physiological and behavioral effects on their recipients.

What might be the effect on an animal of not being able to perceive taste?

Answer

The animal might not be able to recognize the differences in food sources and thus might not be able to discriminate between spoiled food and safe food or between foods that contain necessary nutrients, such as proteins, and foods that do not.

36.4: Hearing and Vestibular Sensation

Audition, or hearing, is important to humans and to other animals for many different interactions. It enables an organism to detect and receive information about danger, such as an approaching predator, and to participate in communal exchanges like those concerning territories or mating. On the other hand, although it is physically linked to the auditory system, the vestibular system is not involved in hearing. Instead, an animal's vestibular system detects its own movement.

Review Questions

In sound, pitch is measured in _____, and volume is measured in _____.

A. nanometers (nm); decibels (dB)
B. decibels (dB); nanometers (nm)
C. decibels (dB); hertz (Hz)
D. hertz (Hz); decibels (dB)

Answer

D

Auditory hair cells are indirectly anchored to the _____.

A. basilar membrane
B. oval window
C. tectorial membrane
D. ossicles

Answer

A

Which of the following are found both in the auditory system and the vestibular system?

A. basilar membrane
B. hair cells
C. semicircular canals
D. ossicles

Answer

B

Free Response

How would a rise in altitude likely affect the speed of a sound transmitted through air? Why?

Answer

The sound would slow down, because it is transmitted through the particles (gas) and there are fewer particles (lower density) at higher altitudes.

How might being in a place with less gravity than Earth has (such as Earth's moon) affect vestibular sensation, and why?

Answer

Because vestibular sensation relies on gravity's effects on tiny crystals in the inner ear, a situation of reduced gravity would likely impair vestibular sensation.

36.5: Vision

Vision is the ability to detect light patterns from the outside environment and interpret them into images. Animals are bombarded with sensory information, and the sheer volume of visual information can be problematic. Fortunately, the visual systems of species have evolved to attend to the most-important stimuli. The importance of vision to humans is further substantiated by the fact that about one-third of the human cerebral cortex is dedicated to analyzing and perceiving visual information.

Review Questions

Why do people over 55 often need reading glasses?

A. Their cornea no longer focuses correctly.
B. Their lens no longer focuses correctly.
C. Their eyeball has elongated with age, causing images to focus in front of their retina.
D. Their retina has thinned with age, making vision more difficult.

Answer

B

Why is it easier to see images at night using peripheral, rather than the central, vision?

A. Cones are denser in the periphery of the retina.
B. Bipolar cells are denser in the periphery of the retina.
C. Rods are denser in the periphery of the retina.
D. The optic nerve exits at the periphery of the retina.

Answer

C

A person catching a ball must coordinate her head and eyes. What part of the brain is helping to do this?

A. hypothalamus
B. pineal gland
C. thalamus
D. superior colliculus

Answer

D

Free Response

How could the pineal gland, the brain structure that plays a role in annual cycles, use visual information from the suprachiasmatic nucleus of the hypothalamus?

Answer

The pineal gland could use length-of-day information to determine the time of year, for example. Day length is shorter in the winter than it is in the summer. For many animals and plants, photoperiod cues them to reproduce at a certain time of year.

How is the relationship between photoreceptors and bipolar cells different from other sensory receptors and adjacent cells?

Answer

> The photoreceptors tonically inhibit the bipolar cells, and stimulation of the receptors turns this inhibition off, activating the bipolar cells.

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CHAPTER OVERVIEW

7: The Muscular System

7.1: Prelude to the Musculoskeletal System

7.2: Types of Skeletal Systems

7.3: Muscle Contraction and Locomotion

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7.1: Prelude to the Musculoskeletal System



Figure 7.1.1: Improvements in the design of prostheses have allowed for a wider range of activities in recipients. (credit: modification of work by Stuart Grout)

The muscular and skeletal systems provide support to the body and allow for a wide range of movement. The bones of the skeletal system protect the body's internal organs and support the weight of the body. The muscles of the muscular system contract and pull on the bones, allowing for movements as diverse as standing, walking, running, and grasping items.

Injury or disease affecting the musculoskeletal system can be very debilitating. In humans, the most common musculoskeletal diseases worldwide are caused by malnutrition. Ailments that affect the joints are also widespread, such as arthritis, which can make movement difficult and—in advanced cases—completely impair mobility. In severe cases in which the joint has suffered extensive damage, joint replacement surgery may be needed.

Progress in the science of prosthesis design has resulted in the development of artificial joints, with joint replacement surgery in the hips and knees being the most common. Replacement joints for shoulders, elbows, and fingers are also available. Even with this progress, there is still room for improvement in the design of prostheses. The state-of-the-art prostheses have limited durability and therefore wear out quickly, particularly in young or active individuals. Current research is focused on the use of new materials, such as carbon fiber, that may make prostheses more durable.

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7.2: Types of Skeletal Systems

Skills to Develop

- Discuss the different types of skeletal systems
- Explain the role of the human skeletal system
- Compare and contrast different skeletal systems

A skeletal system is necessary to support the body, protect internal organs, and allow for the movement of an organism. There are three different skeleton designs that fulfill these functions: hydrostatic skeleton, exoskeleton, and endoskeleton.

Hydrostatic Skeleton

A hydrostatic skeleton is a skeleton formed by a fluid-filled compartment within the body, called the coelom. The organs of the coelom are supported by the aqueous fluid, which also resists external compression. This compartment is under hydrostatic pressure because of the fluid and supports the other organs of the organism. This type of skeletal system is found in soft-bodied animals such as sea anemones, earthworms, Cnidaria, and other invertebrates (Figure 7.2.1).



Figure 7.2.1: The skeleton of the red-knobbed sea star (*Protoreaster linckii*) is an example of a hydrostatic skeleton. (credit: "Amada44"/Wikimedia Commons)

Movement in a hydrostatic skeleton is provided by muscles that surround the coelom. The muscles in a hydrostatic skeleton contract to change the shape of the coelom; the pressure of the fluid in the coelom produces movement. For example, earthworms move by waves of muscular contractions of the skeletal muscle of the body wall hydrostatic skeleton, called peristalsis, which alternately shorten and lengthen the body. Lengthening the body extends the anterior end of the organism. Most organisms have a mechanism to fix themselves in the substrate. Shortening the muscles then draws the posterior portion of the body forward. Although a hydrostatic skeleton is well-suited to invertebrate organisms such as earthworms and some aquatic organisms, it is not an efficient skeleton for terrestrial animals.

Exoskeleton

An exoskeleton is an external skeleton that consists of a hard encasement on the surface of an organism. For example, the shells of crabs and insects are exoskeletons (Figure 7.2.2). This skeleton type provides defence against predators, supports the body, and allows for movement through the contraction of attached muscles. As with vertebrates, muscles must cross a joint inside the exoskeleton. Shortening of the muscle changes the relationship of the two segments of the exoskeleton. Arthropods such as crabs and lobsters have exoskeletons that consist of 30–50 percent chitin, a polysaccharide derivative of glucose that is a strong but flexible material. Chitin is secreted by the epidermal cells. The exoskeleton is further strengthened by the addition of calcium carbonate in organisms such as the lobster. Because the exoskeleton is acellular, arthropods must periodically shed their exoskeletons because the exoskeleton does not grow as the organism grows.



Figure 7.2.2: Muscles attached to the exoskeleton of the Halloween crab (*Gecarcinus quadratus*) allow it to move.

Endoskeleton

An endoskeleton is a skeleton that consists of hard, mineralized structures located within the soft tissue of organisms. An example of a primitive endoskeletal structure is the spicules of sponges. The bones of vertebrates are composed of tissues, whereas sponges have no true tissues (Figure 7.2.1). Endoskeletons provide support for the body, protect internal organs, and allow for movement through contraction of muscles attached to the skeleton.



Figure 7.2.3: The skeletons of humans and horses are examples of endoskeletons. (credit: Ross Murphy)

The human skeleton is an endoskeleton that consists of 206 bones in the adult. It has five main functions: providing support to the body, storing minerals and lipids, producing blood cells, protecting internal organs, and allowing for movement. The skeletal

system in vertebrates is divided into the axial skeleton (which consists of the skull, vertebral column, and rib cage), and the appendicular skeleton (which consists of the shoulders, limb bones, the pectoral girdle, and the pelvic girdle).

Human Axial Skeleton

The axial skeleton forms the central axis of the body and includes the bones of the skull, ossicles of the middle ear, hyoid bone of the throat, vertebral column, and the thoracic cage (ribcage) (Figure 7.2.1). The function of the axial skeleton is to provide support and protection for the brain, the spinal cord, and the organs in the ventral body cavity. It provides a surface for the attachment of muscles that move the head, neck, and trunk, performs respiratory movements, and stabilizes parts of the appendicular skeleton.

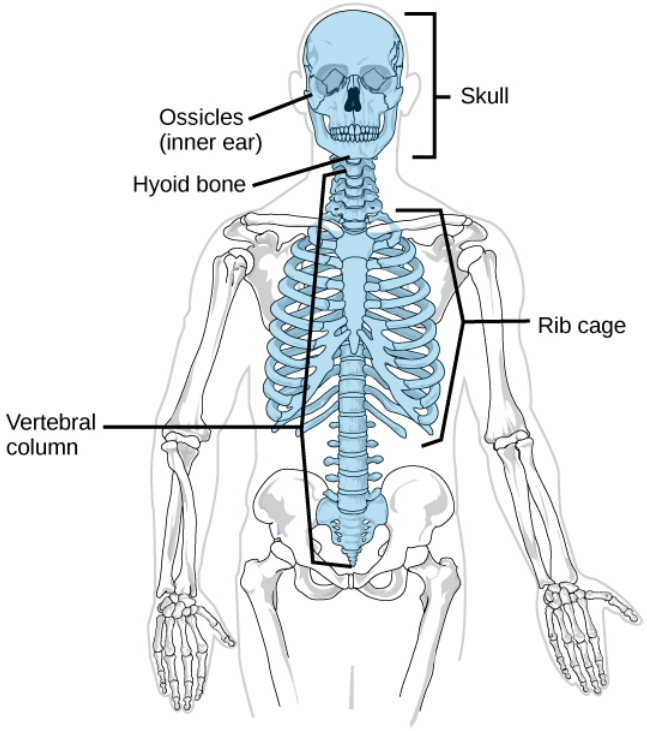


Figure 7.2.4: The axial skeleton consists of the bones of the skull, ossicles of the middle ear, hyoid bone, vertebral column, and rib cage. (credit: modification of work by Mariana Ruiz Villareal)

The Skull

The bones of the skull support the structures of the face and protect the brain. The skull consists of 22 bones, which are divided into two categories: cranial bones and facial bones. The cranial bones are eight bones that form the cranial cavity, which encloses the brain and serves as an attachment site for the muscles of the head and neck. The eight cranial bones are the frontal bone, two parietal bones, two temporal bones, occipital bone, sphenoid bone, and the ethmoid bone. Although the bones developed separately in the embryo and fetus, in the adult, they are tightly fused with connective tissue and adjoining bones do not move (Figure 7.2.5).

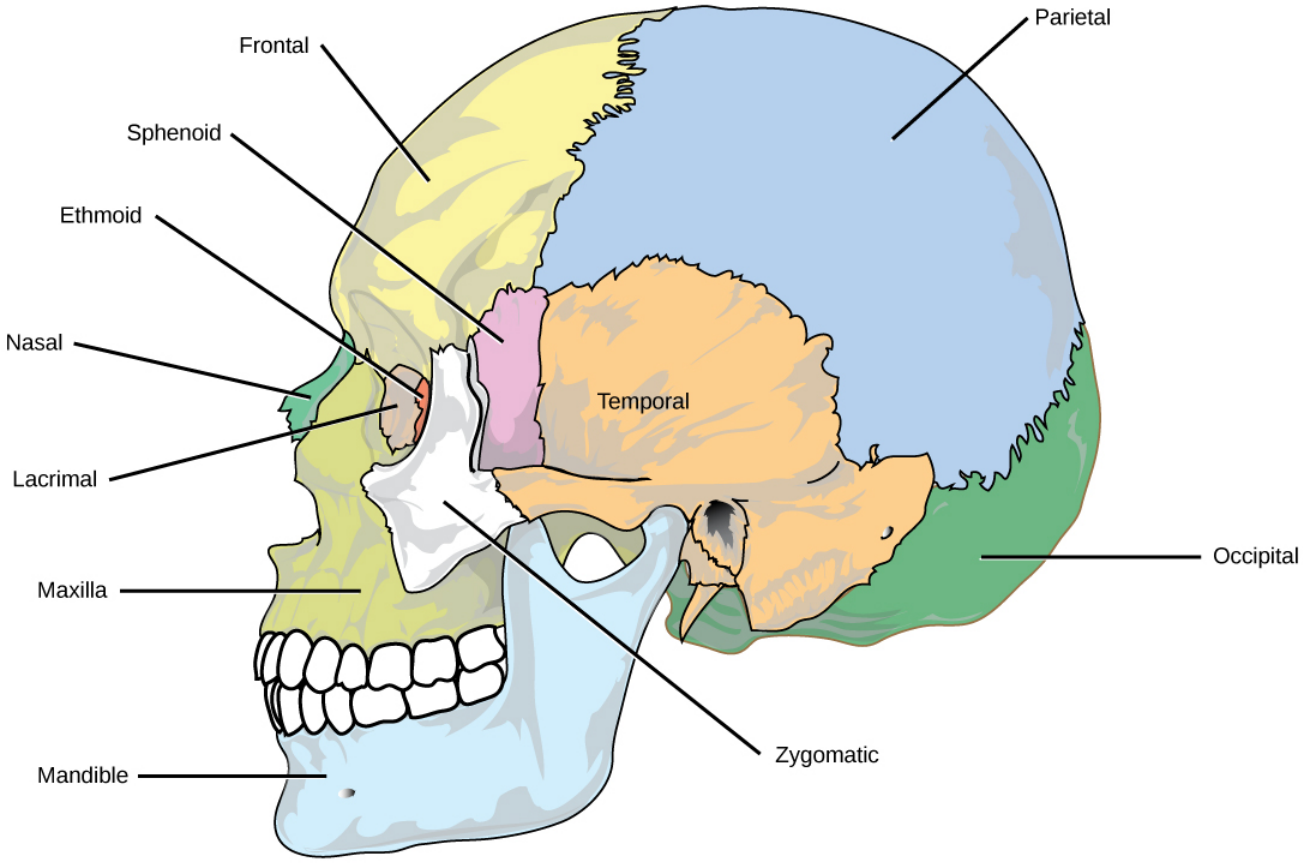


Figure 7.2.5: The bones of the skull support the structures of the face and protect the brain. (credit: modification of work by Mariana Ruiz Villareal)

The auditory ossicles of the middle ear transmit sounds from the air as vibrations to the fluid-filled cochlea. The auditory ossicles consist of six bones: two malleus bones, two incus bones, and two stapes on each side. These are the smallest bones in the body and are unique to mammals.

Fourteen facial bones form the face, provide cavities for the sense organs (eyes, mouth, and nose), protect the entrances to the digestive and respiratory tracts, and serve as attachment points for facial muscles. The 14 facial bones are the nasal bones, the maxillary bones, zygomatic bones, palatine, vomer, lacrimal bones, the inferior nasal conchae, and the mandible. All of these bones occur in pairs except for the mandible and the vomer (Figure 7.2.6).

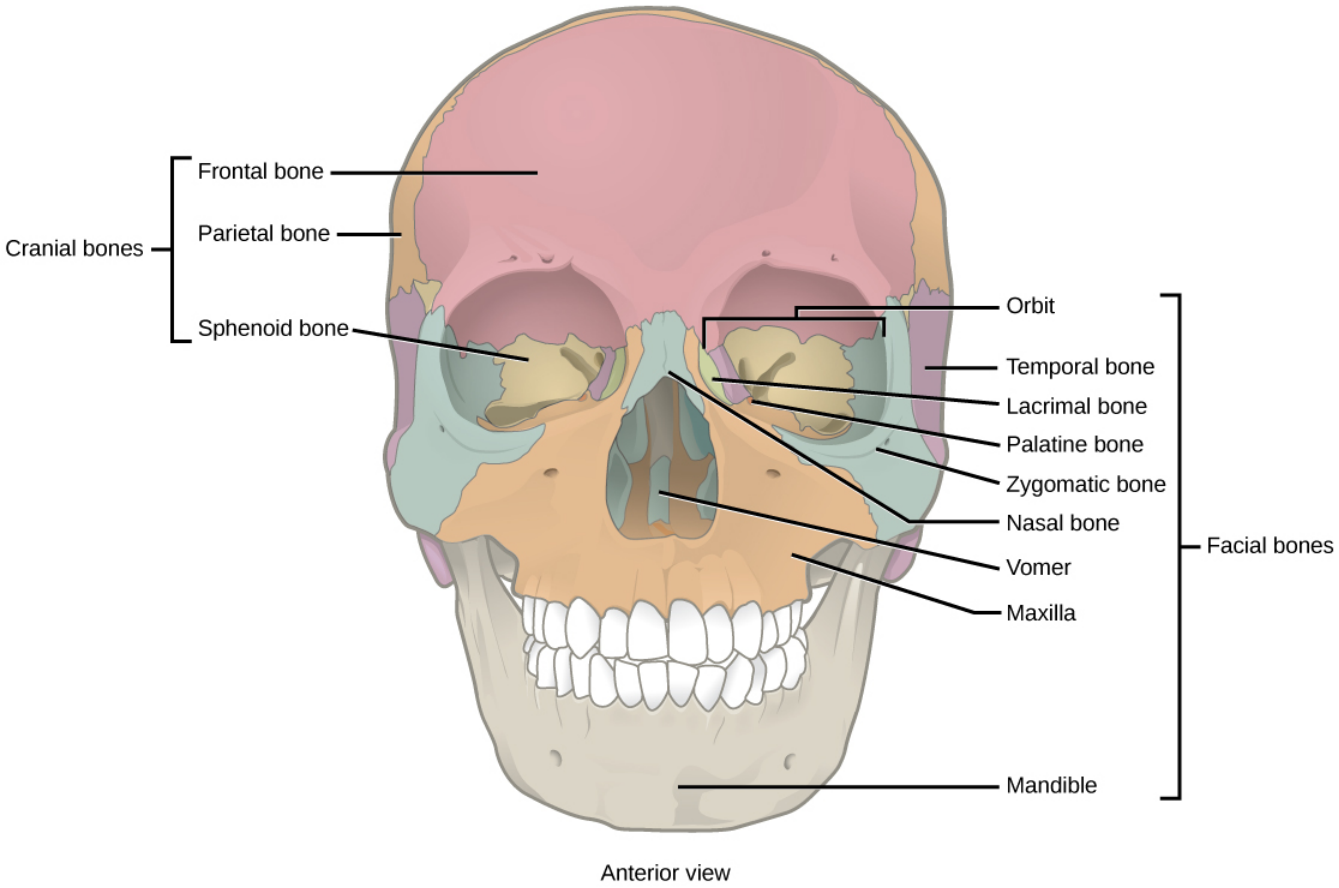


Figure 7.2.6: The cranial bones, including the frontal, parietal, and sphenoid bones, cover the top of the head. The facial bones of the skull form the face and provide cavities for the eyes, nose, and mouth.

Although it is not found in the skull, the hyoid bone is considered a component of the axial skeleton. The hyoid bone lies below the mandible in the front of the neck. It acts as a movable base for the tongue and is connected to muscles of the jaw, larynx, and tongue. The mandible articulates with the base of the skull. The mandible controls the opening to the airway and gut. In animals with teeth, the mandible brings the surfaces of the teeth in contact with the maxillary teeth.

The Vertebral Column

The vertebral column, or spinal column, surrounds and protects the spinal cord, supports the head, and acts as an attachment point for the ribs and muscles of the back and neck. The adult vertebral column comprises 26 bones: the 24 vertebrae, the sacrum, and the coccyx bones. In the adult, the sacrum is typically composed of five vertebrae that fuse into one. The coccyx is typically 3–4 vertebrae that fuse into one. Around the age of 70, the sacrum and the coccyx may fuse together. We begin life with approximately 33 vertebrae, but as we grow, several vertebrae fuse together. The adult vertebrae are further divided into the 7 cervical vertebrae, 12 thoracic vertebrae, and 5 lumbar vertebrae (Figure 7.2.7).

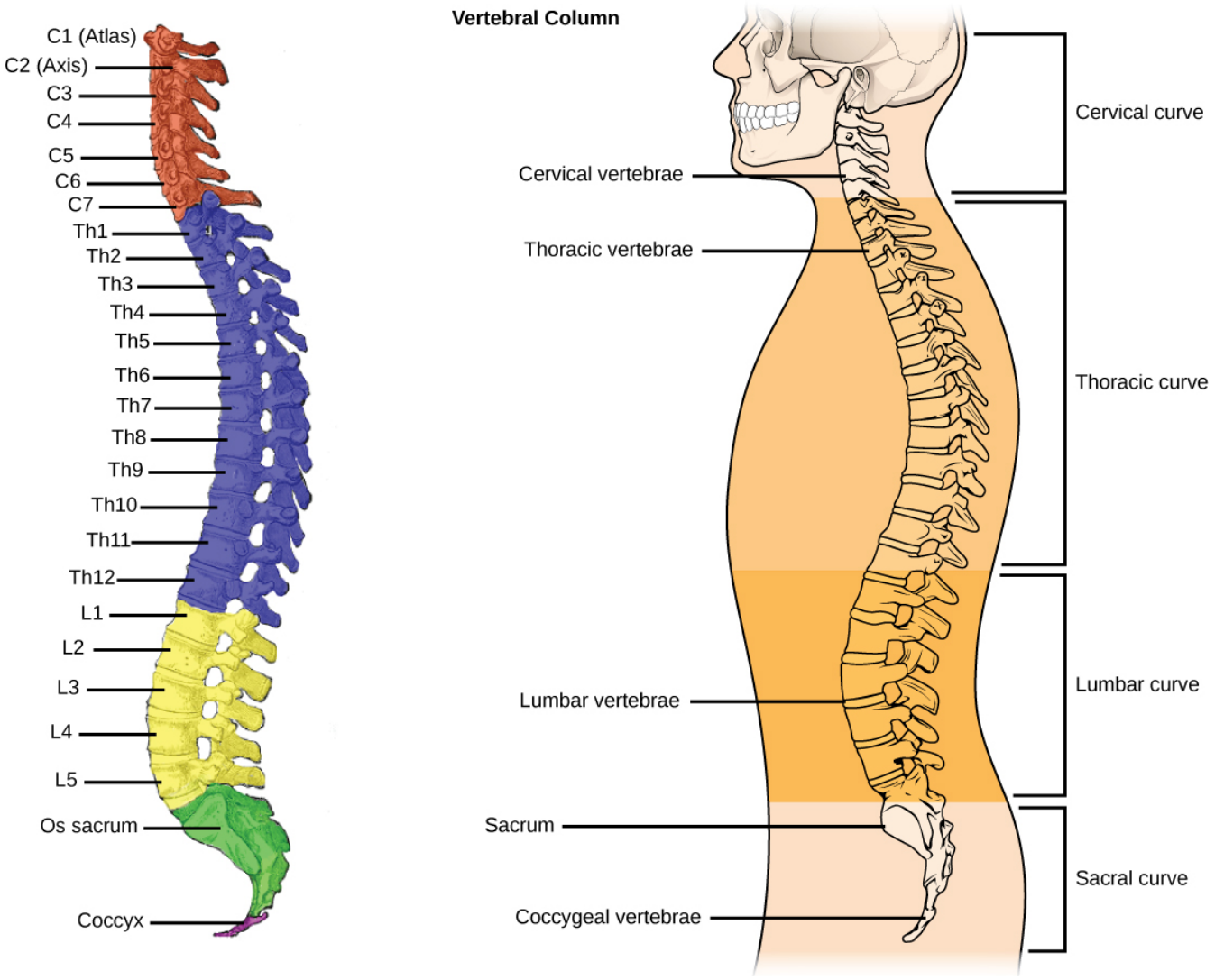


Figure 7.2.7: (a) The vertebral column consists of seven cervical vertebrae (C1–7) twelve thoracic vertebrae (Th1–12), five lumbar vertebrae (L1–5), the os sacrum, and the coccyx. (b) Spinal curves increase the strength and flexibility of the spine. (credit a: modification of work by Uwe Gille based on original work by Gray's Anatomy; credit b: modification of work by NCI, NIH)

Each vertebral body has a large hole in the center through which the nerves of the spinal cord pass. There is also a notch on each side through which the spinal nerves, which serve the body at that level, can exit from the spinal cord. The vertebral column is approximately 71 cm (28 inches) in adult male humans and is curved, which can be seen from a side view. The names of the spinal curves correspond to the region of the spine in which they occur. The thoracic and sacral curves are concave (curve inwards relative to the front of the body) and the cervical and lumbar curves are convex (curve outwards relative to the front of the body). The arched curvature of the vertebral column increases its strength and flexibility, allowing it to absorb shocks like a spring (Figure 7.2.7).

Intervertebral discs composed of fibrous cartilage lie between adjacent vertebral bodies from the second cervical vertebra to the sacrum. Each disc is part of a joint that allows for some movement of the spine and acts as a cushion to absorb shocks from movements such as walking and running. Intervertebral discs also act as ligaments to bind vertebrae together. The inner part of discs, the nucleus pulposus, hardens as people age and becomes less elastic. This loss of elasticity diminishes its ability to absorb shocks.

The Thoracic Cage

The thoracic cage, also known as the ribcage, is the skeleton of the chest, and consists of the ribs, sternum, thoracic vertebrae, and costal cartilages (Figure 7.2.8.8). The thoracic cage encloses and protects the organs of the thoracic cavity, including the heart and

lungs. It also provides support for the shoulder girdles and upper limbs, and serves as the attachment point for the diaphragm, muscles of the back, chest, neck, and shoulders. Changes in the volume of the thorax enable breathing.

The sternum, or breastbone, is a long, flat bone located at the anterior of the chest. It is formed from three bones that fuse in the adult. The ribs are 12 pairs of long, curved bones that attach to the thoracic vertebrae and curve toward the front of the body, forming the ribcage. Costal cartilages connect the anterior ends of the ribs to the sternum, with the exception of rib pairs 11 and 12, which are free-floating ribs.

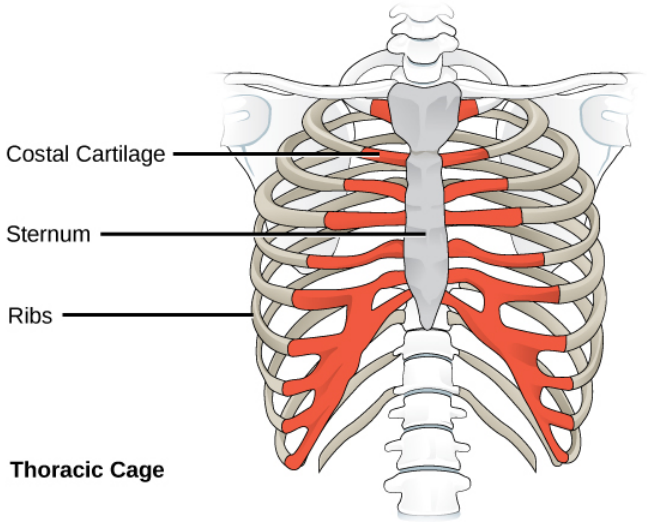


Figure 7.2.8: The thoracic cage, or rib cage, protects the heart and the lungs. (credit: modification of work by NCI, NIH)

Human Appendicular Skeleton

The appendicular skeleton is composed of the bones of the upper limbs (which function to grasp and manipulate objects) and the lower limbs (which permit locomotion). It also includes the pectoral girdle, or shoulder girdle, that attaches the upper limbs to the body, and the pelvic girdle that attaches the lower limbs to the body (Figure 7.2.9).

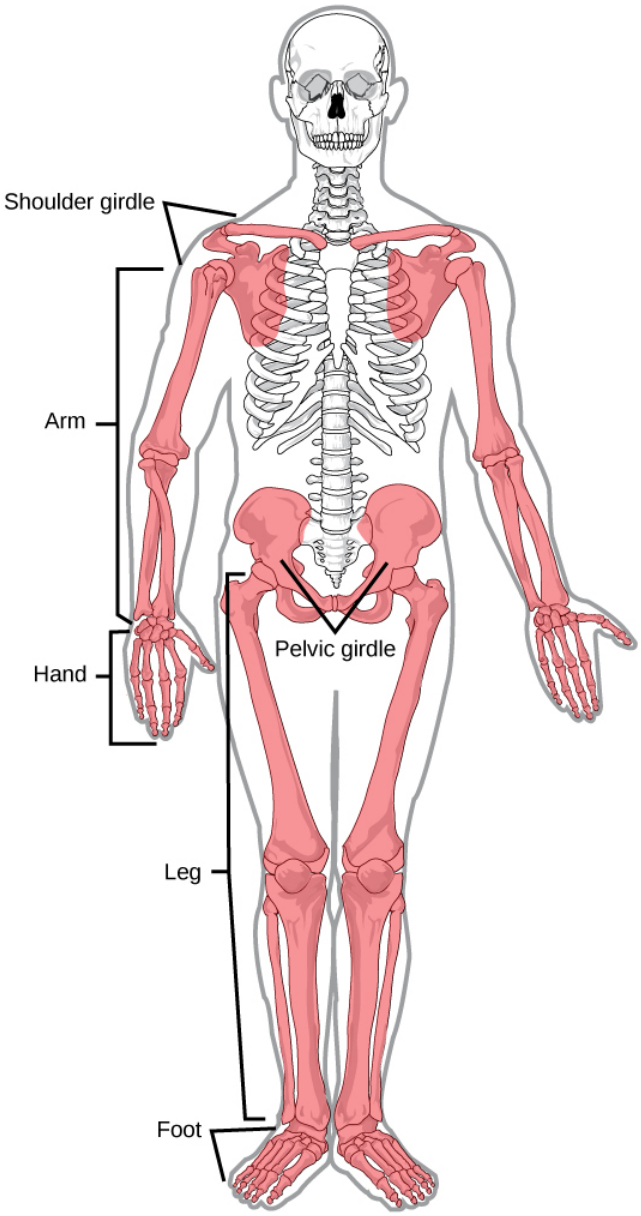


Figure 7.2.9: The appendicular skeleton is composed of the bones of the pectoral limbs (arm, forearm, hand), the pelvic limbs (thigh, leg, foot), the pectoral girdle, and the pelvic girdle. (credit: modification of work by Mariana Ruiz Villareal)

The Pectoral Girdle

The pectoral girdle bones provide the points of attachment of the upper limbs to the axial skeleton. The human pectoral girdle consists of the clavicle (or collarbone) in the anterior, and the scapula (or shoulder blades) in the posterior (Figure 7.2.10).

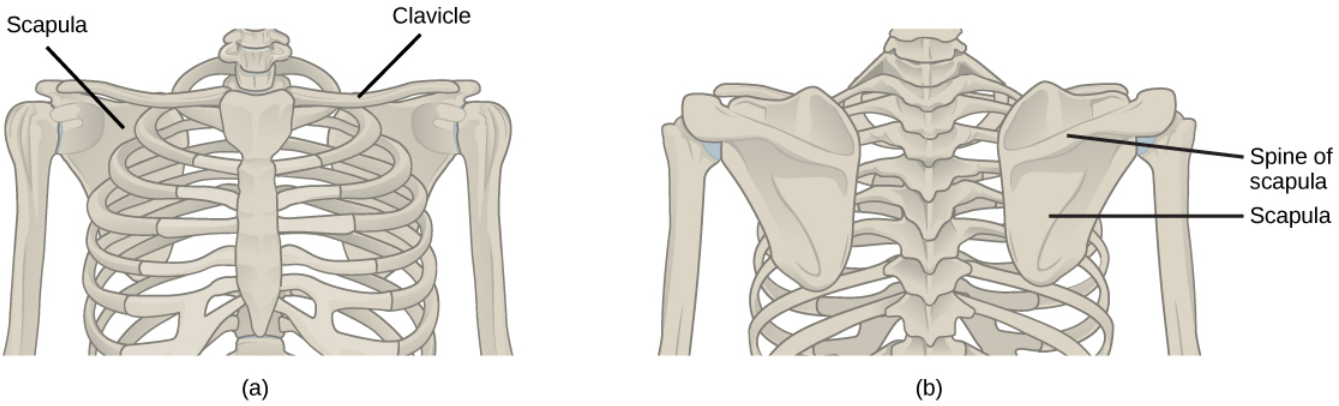


Figure 7.2.10: (a) The pectoral girdle in primates consists of the clavicles and scapulae. (b) The posterior view reveals the spine of the scapula to which muscle attaches.

The clavicles are S-shaped bones that position the arms on the body. The clavicles lie horizontally across the front of the thorax (chest) just above the first rib. These bones are fairly fragile and are susceptible to fractures. For example, a fall with the arms outstretched causes the force to be transmitted to the clavicles, which can break if the force is excessive. The clavicle articulates with the sternum and the scapula.

The scapulae are flat, triangular bones that are located at the back of the pectoral girdle. They support the muscles crossing the shoulder joint. A ridge, called the spine, runs across the back of the scapula and can easily be felt through the skin (Figure 7.2.10). The spine of the scapula is a good example of a bony protrusion that facilitates a broad area of attachment for muscles to bone.

The Upper Limb

The upper limb contains 30 bones in three regions: the arm (shoulder to elbow), the forearm (ulna and radius), and the wrist and hand (Figure 7.2.11).

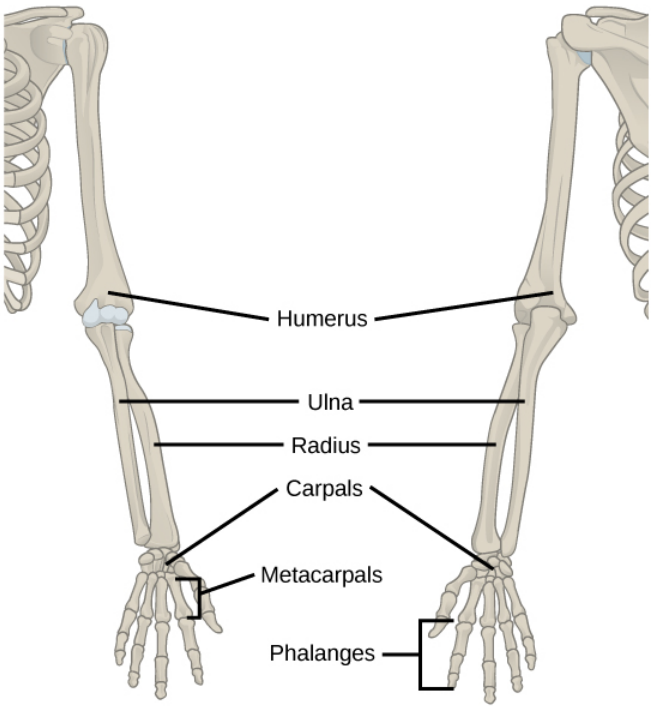


Figure 7.2.11: The upper limb consists of the humerus of the upper arm, the radius and ulna of the forearm, eight bones of the carpus, five bones of the metacarpus, and 14 bones of the phalanges.

An articulation is any place at which two bones are joined. The humerus is the largest and longest bone of the upper limb and the only bone of the arm. It articulates with the scapula at the shoulder and with the forearm at the elbow. The forearm extends from

the elbow to the wrist and consists of two bones: the ulna and the radius. The radius is located along the lateral (thumb) side of the forearm and articulates with the humerus at the elbow. The ulna is located on the medial aspect (pinky-finger side) of the forearm. It is longer than the radius. The ulna articulates with the humerus at the elbow. The radius and ulna also articulate with the carpal bones and with each other, which in vertebrates enables a variable degree of rotation of the carpus with respect to the long axis of the limb. The hand includes the eight bones of the carpus (wrist), the five bones of the metacarpus (palm), and the 14 bones of the phalanges (digits). Each digit consists of three phalanges, except for the thumb, when present, which has only two.

The Pelvic Girdle

The pelvic girdle attaches to the lower limbs of the axial skeleton. Because it is responsible for bearing the weight of the body and for locomotion, the pelvic girdle is securely attached to the axial skeleton by strong ligaments. It also has deep sockets with robust ligaments to securely attach the femur to the body. The pelvic girdle is further strengthened by two large hip bones. In adults, the hip bones, or coxal bones, are formed by the fusion of three pairs of bones: the ilium, ischium, and pubis. The pelvis joins together in the anterior of the body at a joint called the pubic symphysis and with the bones of the sacrum at the posterior of the body.

The female pelvis is slightly different from the male pelvis. Over generations of evolution, females with a wider pubic angle and larger diameter pelvic canal reproduced more successfully. Therefore, their offspring also had pelvic anatomy that enabled successful childbirth (Figure 7.2.12).

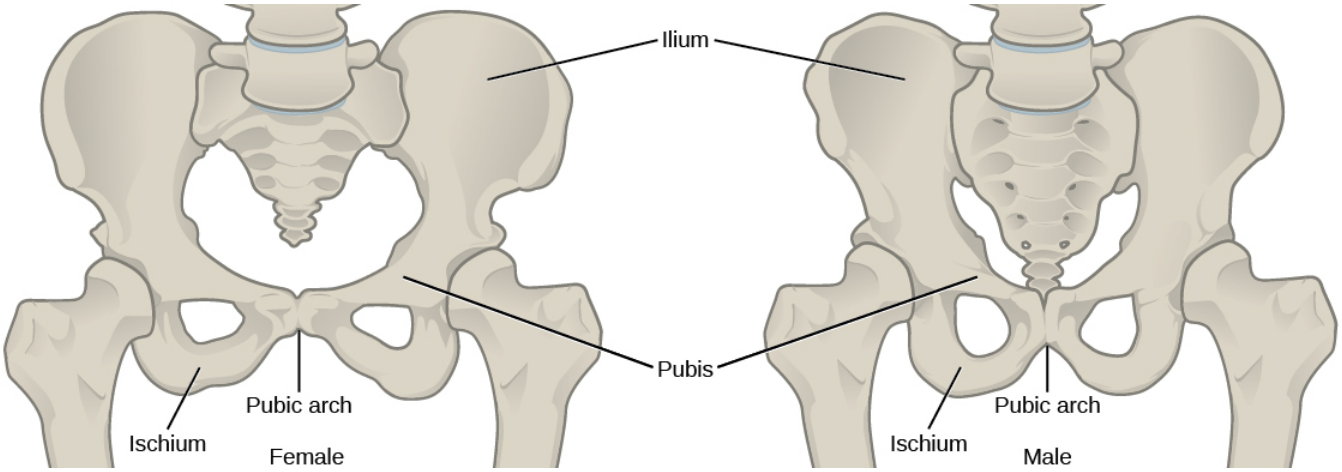


Figure 7.2.12: To adapt to reproductive fitness, the (a) female pelvis is lighter, wider, shallower, and has a broader angle between the pubic bones than (b) the male pelvis.

The Lower Limb

The lower limb consists of the thigh, the leg, and the foot. The bones of the lower limb are the femur (thigh bone), patella (kneecap), tibia and fibula (bones of the leg), tarsals (bones of the ankle), and metatarsals and phalanges (bones of the foot) (Figure 7.2.13). The bones of the lower limbs are thicker and stronger than the bones of the upper limbs because of the need to support the entire weight of the body and the resulting forces from locomotion. In addition to evolutionary fitness, the bones of an individual will respond to forces exerted upon them.

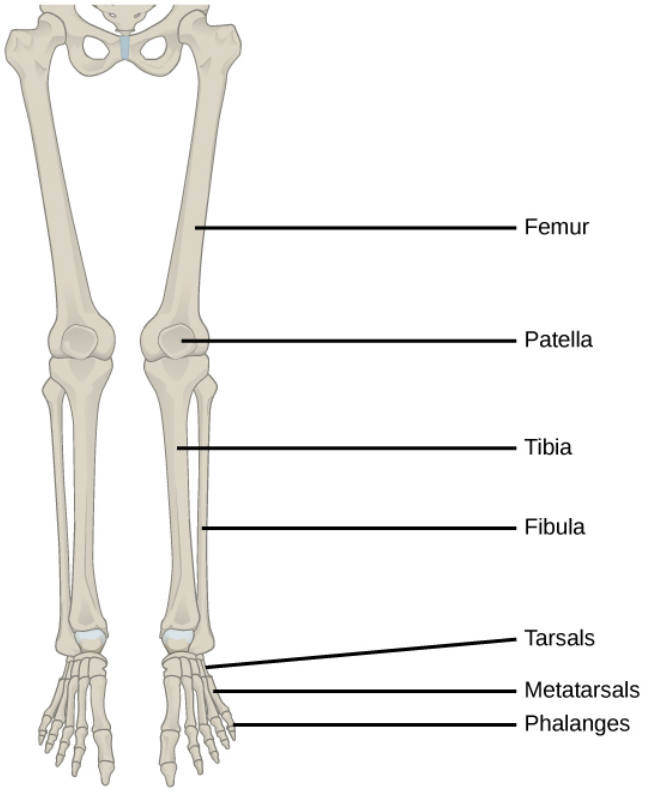


Figure 7.2.13: The lower limb consists of the thigh (femur), kneecap (patella), leg (tibia and fibula), ankle (tarsals), and foot (metatarsals and phalanges) bones.

The femur, or thighbone, is the longest, heaviest, and strongest bone in the body. The femur and pelvis form the hip joint at the proximal end. At the distal end, the femur, tibia, and patella form the knee joint. The patella, or kneecap, is a triangular bone that lies anterior to the knee joint. The patella is embedded in the tendon of the femoral extensors (quadriceps). It improves knee extension by reducing friction. The tibia, or shinbone, is a large bone of the leg that is located directly below the knee. The tibia articulates with the femur at its proximal end, with the fibula and the tarsal bones at its distal end. It is the second largest bone in the human body and is responsible for transmitting the weight of the body from the femur to the foot. The fibula, or calf bone, parallels and articulates with the tibia. It does not articulate with the femur and does not bear weight. The fibula acts as a site for muscle attachment and forms the lateral part of the ankle joint.

The tarsals are the seven bones of the ankle. The ankle transmits the weight of the body from the tibia and the fibula to the foot. The metatarsals are the five bones of the foot. The phalanges are the 14 bones of the toes. Each toe consists of three phalanges, except for the big toe that has only two (Figure 7.2.14). Variations exist in other species; for example, the horse's metacarpals and metatarsals are oriented vertically and do not make contact with the substrate.

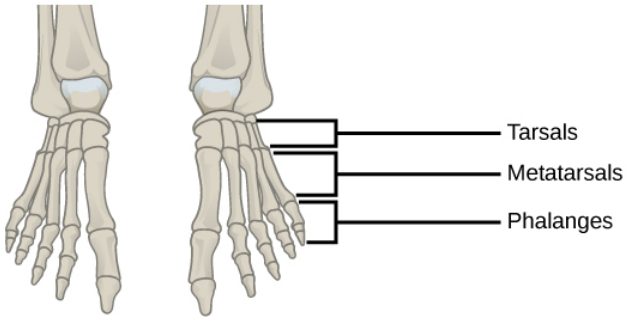


Figure 7.2.14: This drawing shows the bones of the human foot and ankle, including the metatarsals and the phalanges.

Evolution Connection: Evolution of Body Design for Locomotion on Land

The transition of vertebrates onto land required a number of changes in body design, as movement on land presents a number of challenges for animals that are adapted to movement in water. The buoyancy of water provides a certain amount of lift, and a common form of movement by fish is lateral undulations of the entire body. This back and forth movement pushes the body against the water, creating forward movement. In most fish, the muscles of paired fins attach to girdles within the body, allowing for some control of locomotion. As certain fish began moving onto land, they retained their lateral undulation form of locomotion (anguilliform). However, instead of pushing against water, their fins or flippers became points of contact with the ground, around which they rotated their bodies.

The effect of gravity and the lack of buoyancy on land meant that body weight was suspended on the limbs, leading to increased strengthening and ossification of the limbs. The effect of gravity also required changes to the axial skeleton. Lateral undulations of land animal vertebral columns cause torsional strain. A firmer, more ossified vertebral column became common in terrestrial tetrapods because it reduces strain while providing the strength needed to support the body's weight. In later tetrapods, the vertebrae began allowing for vertical motion rather than lateral flexion. Another change in the axial skeleton was the loss of a direct attachment between the pectoral girdle and the head. This reduced the jarring to the head caused by the impact of the limbs on the ground. The vertebrae of the neck also evolved to allow movement of the head independently of the body.

The appendicular skeleton of land animals is also different from aquatic animals. The shoulders attach to the pectoral girdle through muscles and connective tissue, thus reducing the jarring of the skull. Because of a lateral undulating vertebral column, in early tetrapods, the limbs were splayed out to the side and movement occurred by performing "push-ups." The vertebrae of these animals had to move side-to-side in a similar manner to fish and reptiles. This type of motion requires large muscles to move the limbs toward the midline; it was almost like walking while doing push-ups, and it is not an efficient use of energy. Later tetrapods have their limbs placed under their bodies, so that each stride requires less force to move forward. This resulted in decreased adductor muscle size and an increased range of motion of the scapulae. This also restricts movement primarily to one plane, creating forward motion rather than moving the limbs upward as well as forward. The femur and humerus were also rotated, so that the ends of the limbs and digits were pointed forward, in the direction of motion, rather than out to the side. By placement underneath the body, limbs can swing forward like a pendulum to produce a stride that is more efficient for moving over land.

Summary

The three types of skeleton designs are hydrostatic skeletons, exoskeletons, and endoskeletons. A hydrostatic skeleton is formed by a fluid-filled compartment held under hydrostatic pressure; movement is created by the muscles producing pressure on the fluid. An exoskeleton is a hard external skeleton that protects the outer surface of an organism and enables movement through muscles attached on the inside. An endoskeleton is an internal skeleton composed of hard, mineralized tissue that also enables movement by attachment to muscles. The human skeleton is an endoskeleton that is composed of the axial and appendicular skeleton. The axial skeleton is composed of the bones of the skull, ossicles of the ear, hyoid bone, vertebral column, and ribcage. The skull consists of eight cranial bones and 14 facial bones. Six bones make up the ossicles of the middle ear, while the hyoid bone is located in the neck under the mandible. The vertebral column contains 26 bones, and it surrounds and protects the spinal cord. The thoracic cage consists of the sternum, ribs, thoracic vertebrae, and costal cartilages. The appendicular skeleton is made up of the limbs of the upper and lower limbs. The pectoral girdle is composed of the clavicles and the scapulae. The upper limb contains 30 bones in the arm, the forearm, and the hand. The pelvic girdle attaches the lower limbs to the axial skeleton. The lower limb includes the bones of the thigh, the leg, and the foot.

Glossary

appendicular skeleton
composed of the bones of the upper limbs, which function to grasp and manipulate objects, and the lower limbs, which permit locomotion

articulation

any place where two bones are joined

auditory ossicle
(also, middle ear) transduces sounds from the air into vibrations in the fluid-filled cochlea

axial skeleton
forms the central axis of the body and includes the bones of the skull, the ossicles of the middle ear, the hyoid bone of the throat, the vertebral column, and the thoracic cage (ribcage)

carpus
eight bones that comprise the wrist

clavicle
S-shaped bone that positions the arms laterally

coxal bone
hip bone

cranial bone
one of eight bones that form the cranial cavity that encloses the brain and serves as an attachment site for the muscles of the head and neck

endoskeleton
skeleton of living cells that produce a hard, mineralized tissue located within the soft tissue of organisms

exoskeleton
a secreted cellular product external skeleton that consists of a hard encasement on the surface of an organism

facial bone
one of the 14 bones that form the face; provides cavities for the sense organs (eyes, mouth, and nose) and attachment points for facial muscles

femur
(also, thighbone) longest, heaviest, and strongest bone in the body

fibula
(also, calf bone) parallels and articulates with the tibia

forearm
extends from the elbow to the wrist and consists of two bones: the ulna and the radius

humerus
only bone of the arm

hydrostatic skeleton
skeleton that consists of aqueous fluid held under pressure in a closed body compartment

hyoid bone
lies below the mandible in the front of the neck

intervertebral disc
composed of fibrous cartilage; lies between adjacent vertebrae from the second cervical vertebra to the sacrum

lower limb

consists of the thigh, the leg, and the foot

metacarpus
five bones that comprise the palm

metatarsal
one of the five bones of the foot

patella
(also, kneecap) triangular bone that lies anterior to the knee joint

pectoral girdle
bones that transmit the force generated by the upper limbs to the axial skeleton

phalange
one of the bones of the fingers or toes

pelvic girdle
bones that transmit the force generated by the lower limbs to the axial skeleton

radius
bone located along the lateral (thumb) side of the forearm; articulates with the humerus at the elbow

rib
one of 12 pairs of long, curved bones that attach to the thoracic vertebrae and curve toward the front of the body to form the ribcage

scapula
flat, triangular bone located at the posterior pectoral girdle

skull
bone that supports the structures of the face and protects the brain

sternum
(also, breastbone) long, flat bone located at the front of the chest

tarsal
one of the seven bones of the ankle

thoracic cage
(also, ribcage) skeleton of the chest, which consists of the ribs, thoracic vertebrae, sternum, and costal cartilages

tibia
(also, shinbone) large bone of the leg that is located directly below the knee

ulna
bone located on the medial aspect (pinky-finger side) of the forearm

vertebral column
(also, spine) surrounds and protects the spinal cord, supports the head, and acts as an attachment point for ribs and muscles of the back and neck

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7.3: Muscle Contraction and Locomotion

Skills to Develop

- Classify the different types of muscle tissue
- Explain the role of muscles in locomotion

Muscle cells are specialized for contraction. Muscles allow for motions such as walking, and they also facilitate bodily processes such as respiration and digestion. The body contains three types of muscle tissue: skeletal muscle, cardiac muscle, and smooth muscle (Figure 7.3.1).

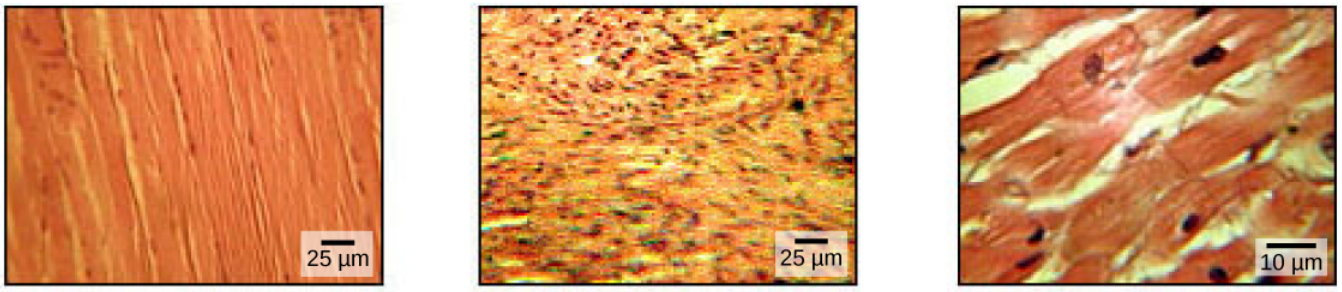


Figure 7.3.1: The body contains three types of muscle tissue: skeletal muscle, smooth muscle, and cardiac muscle, visualized here using light microscopy. Smooth muscle cells are short, tapered at each end, and have only one plump nucleus in each. Cardiac muscle cells are branched and striated, but short. The cytoplasm may branch, and they have one nucleus in the center of the cell. (credit: modification of work by NCI, NIH; scale-bar data from Matt Russell)

Skeletal muscle tissue forms skeletal muscles, which attach to bones or skin and control locomotion and any movement that can be consciously controlled. Because it can be controlled by thought, skeletal muscle is also called voluntary muscle. Skeletal muscles are long and cylindrical in appearance; when viewed under a microscope, skeletal muscle tissue has a striped or striated appearance. The striations are caused by the regular arrangement of contractile proteins (actin and myosin). Actin is a globular contractile protein that interacts with myosin for muscle contraction. Skeletal muscle also has multiple nuclei present in a single cell.

Smooth muscle tissue occurs in the walls of hollow organs such as the intestines, stomach, and urinary bladder, and around passages such as the respiratory tract and blood vessels. Smooth muscle has no striations, is not under voluntary control, has only one nucleus per cell, is tapered at both ends, and is called involuntary muscle.

Cardiac muscle tissue is only found in the heart, and cardiac contractions pump blood throughout the body and maintain blood pressure. Like skeletal muscle, cardiac muscle is striated, but unlike skeletal muscle, cardiac muscle cannot be consciously controlled and is called involuntary muscle. It has one nucleus per cell, is branched, and is distinguished by the presence of intercalated disks.

Skeletal Muscle Fiber Structure

Each skeletal muscle fiber is a skeletal muscle cell. These cells are incredibly large, with diameters of up to 100 µm and lengths of up to 30 cm. The plasma membrane of a skeletal muscle fiber is called the sarcolemma. The sarcolemma is the site of action potential conduction, which triggers muscle contraction. Within each muscle fiber are myofibrils—long cylindrical structures that lie parallel to the muscle fiber. Myofibrils run the entire length of the muscle fiber, and because they are only approximately 1.2 µm in diameter, hundreds to thousands can be found inside one muscle fiber. They attach to the sarcolemma at their ends, so that as myofibrils shorten, the entire muscle cell contracts (Figure 7.3.2).

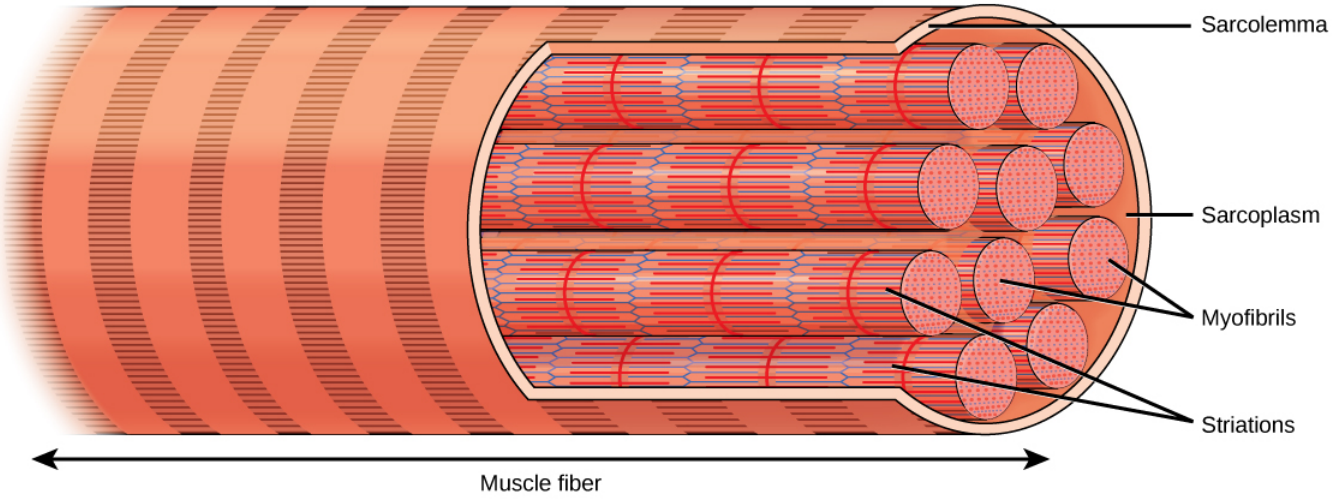


Figure 7.3.2: A skeletal muscle cell is surrounded by a plasma membrane called the sarcolemma with a cytoplasm called the sarcoplasm. A muscle fiber is composed of many fibrils, packaged into orderly units.

The striated appearance of skeletal muscle tissue is a result of repeating bands of the proteins actin and myosin that are present along the length of myofibrils. Dark A bands and light I bands repeat along myofibrils, and the alignment of myofibrils in the cell causes the entire cell to appear striated or banded.

Each I band has a dense line running vertically through the middle called a Z disc or Z line. The Z discs mark the border of units called sarcomeres, which are the functional units of skeletal muscle. One sarcomere is the space between two consecutive Z discs and contains one entire A band and two halves of an I band, one on either side of the A band. A myofibril is composed of many sarcomeres running along its length, and as the sarcomeres individually contract, the myofibrils and muscle cells shorten (Figure 7.3.3).

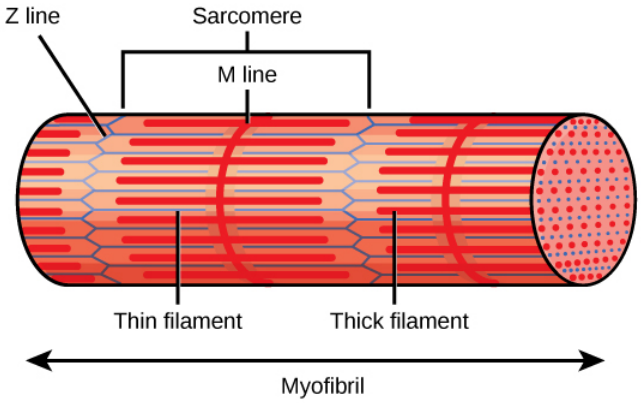
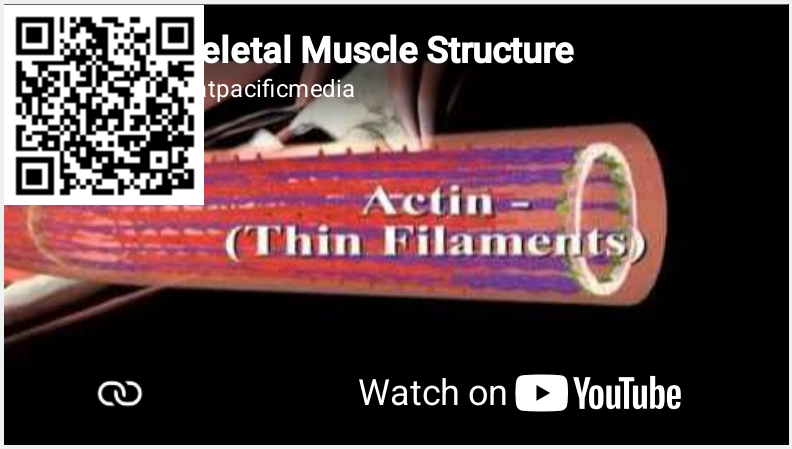


Figure 7.3.3: A sarcomere is the region from one Z line to the next Z line. Many sarcomeres are present in a myofibril, resulting in the striation pattern characteristic of skeletal muscle.

Myofibrils are composed of smaller structures called myofilaments. There are two main types of filaments: thick filaments and thin filaments; each has different compositions and locations. Thick filaments occur only in the A band of a myofibril. Thin filaments attach to a protein in the Z disc called alpha-actinin and occur across the entire length of the I band and partway into the A band. The region at which thick and thin filaments overlap has a dense appearance, as there is little space between the filaments. Thin filaments do not extend all the way into the A bands, leaving a central region of the A band that only contains thick filaments. This central region of the A band looks slightly lighter than the rest of the A band and is called the H zone. The middle of the H zone has a vertical line called the M line, at which accessory proteins hold together thick filaments. Both the Z disc and the M line hold myofilaments in place to maintain the structural arrangement and layering of the myofibril. Myofibrils are connected to each other by intermediate, or desmin, filaments that attach to the Z disc.

Thick and thin filaments are themselves composed of proteins. Thick filaments are composed of the protein myosin. The tail of a myosin molecule connects with other myosin molecules to form the central region of a thick filament near the M line, whereas the heads align on either side of the thick filament where the thin filaments overlap. The primary component of thin filaments is the actin protein. Two other components of the thin filament are tropomyosin and troponin. Actin has binding sites for myosin attachment. Strands of tropomyosin block the binding sites and prevent actin–myosin interactions when the muscles are at rest. Troponin consists of three globular subunits. One subunit binds to tropomyosin, one subunit binds to actin, and one subunit binds Ca^{2+} ions.

Link to Learning



View this animation showing the organization of muscle fibers.

Sliding Filament Model of Contraction

For a muscle cell to contract, the sarcomere must shorten. However, thick and thin filaments—the components of sarcomeres—do not shorten. Instead, they slide by one another, causing the sarcomere to shorten while the filaments remain the same length. The sliding filament theory of muscle contraction was developed to fit the differences observed in the named bands on the sarcomere at different degrees of muscle contraction and relaxation. The mechanism of contraction is the binding of myosin to actin, forming cross-bridges that generate filament movement (Figure 7.3.4).

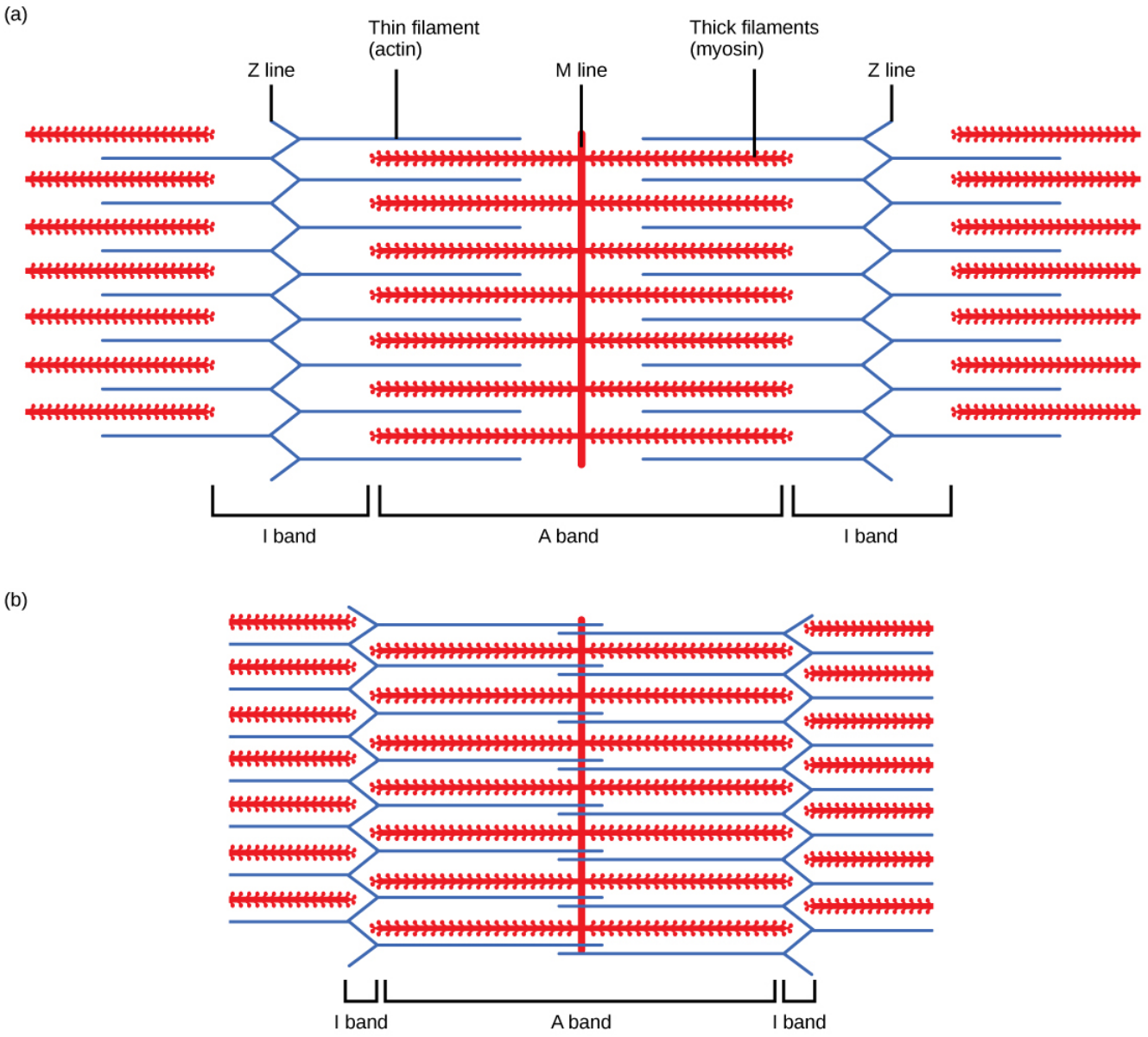


Figure 7.3.4: When (a) a sarcomere (b) contracts, the Z lines move closer together and the I band gets smaller. The A band stays the same width and, at full contraction, the thin filaments overlap.

When a sarcomere shortens, some regions shorten whereas others stay the same length. A sarcomere is defined as the distance between two consecutive Z discs or Z lines; when a muscle contracts, the distance between the Z discs is reduced. The H zone—the central region of the A zone—contains only thick filaments and is shortened during contraction. The I band contains only thin filaments and also shortens. The A band does not shorten—it remains the same length—but A bands of different sarcomeres move closer together during contraction, eventually disappearing. Thin filaments are pulled by the thick filaments toward the center of the sarcomere until the Z discs approach the thick filaments. The zone of overlap, in which thin filaments and thick filaments occupy the same area, increases as the thin filaments move inward.

ATP and Muscle Contraction

The motion of muscle shortening occurs as myosin heads bind to actin and pull the actin inwards. This action requires energy, which is provided by ATP. Myosin binds to actin at a binding site on the globular actin protein. Myosin has another binding site for ATP at which enzymatic activity hydrolyzes ATP to ADP, releasing an inorganic phosphate molecule and energy.

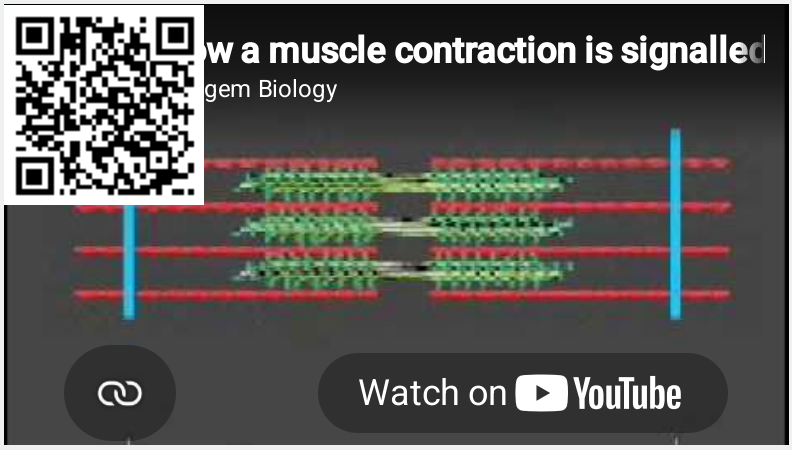
ATP binding causes myosin to release actin, allowing actin and myosin to detach from each other. After this happens, the newly bound ATP is converted to ADP and inorganic phosphate, P_i. The enzyme at the binding site on myosin is called ATPase. The

energy released during ATP hydrolysis changes the angle of the myosin head into a “cocked” position. The myosin head is then in a position for further movement, possessing potential energy, but ADP and P_i are still attached. If actin binding sites are covered and unavailable, the myosin will remain in the high energy configuration with ATP hydrolyzed, but still attached.

If the actin binding sites are uncovered, a cross-bridge will form; that is, the myosin head spans the distance between the actin and myosin molecules. P_i is then released, allowing myosin to expend the stored energy as a conformational change. The myosin head moves toward the M line, pulling the actin along with it. As the actin is pulled, the filaments move approximately 10 nm toward the M line. This movement is called the power stroke, as it is the step at which force is produced. As the actin is pulled toward the M line, the sarcomere shortens and the muscle contracts.

When the myosin head is “cocked,” it contains energy and is in a high-energy configuration. This energy is expended as the myosin head moves through the power stroke; at the end of the power stroke, the myosin head is in a low-energy position. After the power stroke, ADP is released; however, the cross-bridge formed is still in place, and actin and myosin are bound together. ATP can then attach to myosin, which allows the cross-bridge cycle to start again and further muscle contraction can occur (Figure 7.3.5).

Link to Learning



Watch this video explaining how a muscle contraction is signaled.

Art Connection

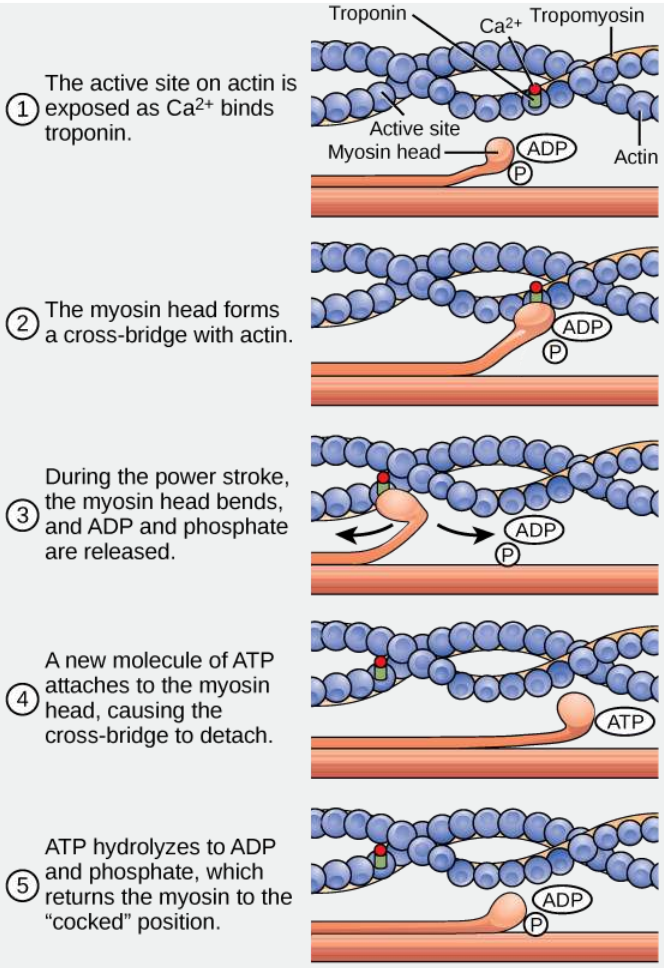


Figure 7.3.5: The cross-bridge muscle contraction cycle, which is triggered by Ca^{2+} binding to the actin active site, is shown. With each contraction cycle, actin moves relative to myosin.

Which of the following statements about muscle contraction is true?

A. The power stroke occurs when ATP is hydrolyzed to ADP and phosphate.
B. The power stroke occurs when ADP and phosphate dissociate from the myosin head.
C. The power stroke occurs when ADP and phosphate dissociate from the actin active site.
D. The power stroke occurs when Ca^{2+} binds the calcium head.

Link to Learning



View this animation of the cross-bridge muscle contraction.

Regulatory Proteins

When a muscle is in a resting state, actin and myosin are separated. To keep actin from binding to the active site on myosin, regulatory proteins block the molecular binding sites. Tropomyosin blocks myosin binding sites on actin molecules, preventing cross-bridge formation and preventing contraction in a muscle without nervous input. Troponin binds to tropomyosin and helps to position it on the actin molecule; it also binds calcium ions.

To enable a muscle contraction, tropomyosin must change conformation, uncovering the myosin-binding site on an actin molecule and allowing cross-bridge formation. This can only happen in the presence of calcium, which is kept at extremely low concentrations in the sarcoplasm. If present, calcium ions bind to troponin, causing conformational changes in troponin that allow tropomyosin to move away from the myosin binding sites on actin. Once the tropomyosin is removed, a cross-bridge can form between actin and myosin, triggering contraction. Cross-bridge cycling continues until Ca^{2+} ions and ATP are no longer available and tropomyosin again covers the binding sites on actin.

Excitation–Contraction Coupling

Excitation–contraction coupling is the link (transduction) between the action potential generated in the sarcolemma and the start of a muscle contraction. The trigger for calcium release from the sarcoplasmic reticulum into the sarcoplasm is a neural signal. Each skeletal muscle fiber is controlled by a motor neuron, which conducts signals from the brain or spinal cord to the muscle. The area of the sarcolemma on the muscle fiber that interacts with the neuron is called the motor end plate. The end of the neuron's axon is called the synaptic terminal, and it does not actually contact the motor end plate. A small space called the synaptic cleft separates the synaptic terminal from the motor end plate. Electrical signals travel along the neuron's axon, which branches through the muscle and connects to individual muscle fibers at a neuromuscular junction.

The ability of cells to communicate electrically requires that the cells expend energy to create an electrical gradient across their cell membranes. This charge gradient is carried by ions, which are differentially distributed across the membrane. Each ion exerts an electrical influence and a concentration influence. Just as milk will eventually mix with coffee without the need to stir, ions also distribute themselves evenly, if they are permitted to do so. In this case, they are not permitted to return to an evenly mixed state.

The sodium–potassium ATPase uses cellular energy to move K^+ ions inside the cell and Na^+ ions outside. This alone accumulates a small electrical charge, but a big concentration gradient. There is lots of K^+ in the cell and lots of Na^+ outside the cell. Potassium is able to leave the cell through K^+ channels that are open 90% of the time, and it does. However, Na^+ channels are rarely open, so Na^+ remains outside the cell. When K^+ leaves the cell, obeying its concentration gradient, that effectively leaves a negative charge behind. So at rest, there is a large concentration gradient for Na^+ to enter the cell, and there is an accumulation of negative charges left behind in the cell. This is the resting membrane potential. Potential in this context means a separation of electrical charge that is capable of doing work. It is measured in volts, just like a battery. However, the transmembrane potential is considerably smaller (0.07 V); therefore, the small value is expressed as millivolts (mV) or 70 mV. Because the inside of a cell is negative compared with the outside, a minus sign signifies the excess of negative charges inside the cell, −70 mV.

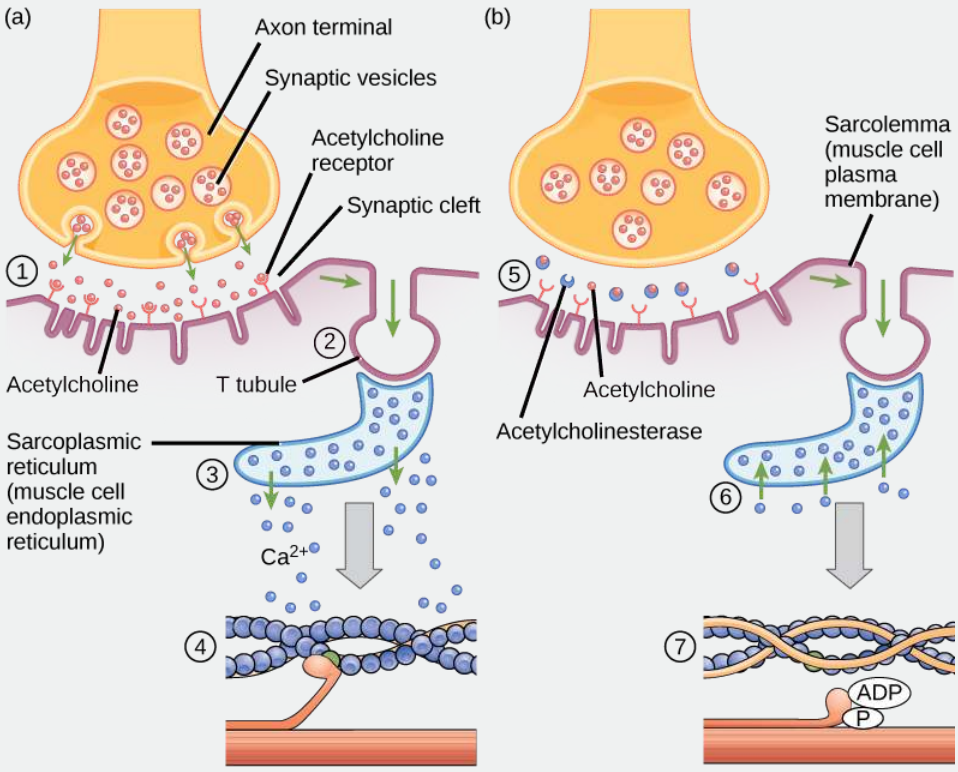
If an event changes the permeability of the membrane to Na^+ ions, they will enter the cell. That will change the voltage. This is an electrical event, called an action potential, that can be used as a cellular signal. Communication occurs between nerves and muscles through neurotransmitters. Neuron action potentials cause the release of neurotransmitters from the synaptic terminal into the synaptic cleft, where they can then diffuse across the synaptic cleft and bind to a receptor molecule on the motor end plate. The motor end plate possesses junctional folds—folds in the sarcolemma that create a large surface area for the neurotransmitter to bind to receptors. The receptors are actually sodium channels that open to allow the passage of Na^+ into the cell when they receive neurotransmitter signal.

Acetylcholine (ACh) is a neurotransmitter released by motor neurons that binds to receptors in the motor end plate. Neurotransmitter release occurs when an action potential travels down the motor neuron's axon, resulting in altered permeability of the synaptic terminal membrane and an influx of calcium. The Ca^{2+} ions allow synaptic vesicles to move to and bind with the presynaptic membrane (on the neuron), and release neurotransmitter from the vesicles into the synaptic cleft. Once released by the synaptic terminal, ACh diffuses across the synaptic cleft to the motor end plate, where it binds with ACh receptors. As a

neurotransmitter binds, these ion channels open, and Na^+ ions cross the membrane into the muscle cell. This reduces the voltage difference between the inside and outside of the cell, which is called depolarization. As ACh binds at the motor end plate, this depolarization is called an end-plate potential. The depolarization then spreads along the sarcolemma, creating an action potential as sodium channels adjacent to the initial depolarization site sense the change in voltage and open. The action potential moves across the entire cell, creating a wave of depolarization.

ACh is broken down by the enzyme acetylcholinesterase (AChE) into acetyl and choline. AChE resides in the synaptic cleft, breaking down ACh so that it does not remain bound to ACh receptors, which would cause unwanted extended muscle contraction (Figure 7.3.6).

Art Connection



1. Acetylcholine released from the axon terminal binds to receptors on the sarcolemma.
2. An action potential is generated and travels down the T tubule.
3. Ca^{2+} is released from the sarcoplasmic reticulum in response to the change in voltage.
4. Ca^{2+} binds troponin; Cross-bridges form between actin and myosin.
5. Acetylcholinesterase removes acetylcholine from the synaptic cleft.
6. Ca^{2+} is transported back into the sarcoplasmic reticulum.
7. Tropomyosin binds active sites on actin causing the cross-bridge to detach.

Figure 7.3.6: This diagram shows excitation-contraction coupling in a skeletal muscle contraction. The sarcoplasmic reticulum is a specialized endoplasmic reticulum found in muscle cells.

The deadly nerve gas Sarin irreversibly inhibits acetycholinesterase. What effect would Sarin have on muscle contraction?

After depolarization, the membrane returns to its resting state. This is called repolarization, during which voltage-gated sodium channels close. Potassium channels continue at 90% conductance. Because the plasma membrane sodium–potassium ATPase always transports ions, the resting state (negatively charged inside relative to the outside) is restored. The period immediately following the transmission of an impulse in a nerve or muscle, in which a neuron or muscle cell regains its ability to transmit another impulse, is called the refractory period. During the refractory period, the membrane cannot generate another action potential. . The refractory period allows the voltage-sensitive ion channels to return to their resting configurations. The sodium

potassium ATPase continually moves Na^+ back out of the cell and K^+ back into the cell, and the K^+ leaks out leaving negative charge behind. Very quickly, the membrane repolarizes, so that it can again be depolarized.

Control of Muscle Tension

Neural control initiates the formation of actin–myosin cross-bridges, leading to the sarcomere shortening involved in muscle contraction. These contractions extend from the muscle fiber through connective tissue to pull on bones, causing skeletal movement. The pull exerted by a muscle is called tension, and the amount of force created by this tension can vary. This enables the same muscles to move very light objects and very heavy objects. In individual muscle fibers, the amount of tension produced depends on the cross-sectional area of the muscle fiber and the frequency of neural stimulation.

The number of cross-bridges formed between actin and myosin determine the amount of tension that a muscle fiber can produce. Cross-bridges can only form where thick and thin filaments overlap, allowing myosin to bind to actin. If more cross-bridges are formed, more myosin will pull on actin, and more tension will be produced.

The ideal length of a sarcomere during production of maximal tension occurs when thick and thin filaments overlap to the greatest degree. If a sarcomere at rest is stretched past an ideal resting length, thick and thin filaments do not overlap to the greatest degree, and fewer cross-bridges can form. This results in fewer myosin heads pulling on actin, and less tension is produced. As a sarcomere is shortened, the zone of overlap is reduced as the thin filaments reach the H zone, which is composed of myosin tails. Because it is myosin heads that form cross-bridges, actin will not bind to myosin in this zone, reducing the tension produced by this myofiber. If the sarcomere is shortened even more, thin filaments begin to overlap with each other—reducing cross-bridge formation even further, and producing even less tension. Conversely, if the sarcomere is stretched to the point at which thick and thin filaments do not overlap at all, no cross-bridges are formed and no tension is produced. This amount of stretching does not usually occur because accessory proteins, internal sensory nerves, and connective tissue oppose extreme stretching.

The primary variable determining force production is the number of myofibers within the muscle that receive an action potential from the neuron that controls that fiber. When using the biceps to pick up a pencil, the motor cortex of the brain only signals a few neurons of the biceps, and only a few myofibers respond. In vertebrates, each myofiber responds fully if stimulated. When picking up a piano, the motor cortex signals all of the neurons in the biceps and every myofiber participates. This is close to the maximum force the muscle can produce. As mentioned above, increasing the frequency of action potentials (the number of signals per second) can increase the force a bit more, because the tropomyosin is flooded with calcium.

Summary

The body contains three types of muscle tissue: skeletal muscle, cardiac muscle, and smooth muscle. Skeleton muscle tissue is composed of sarcomeres, the functional units of muscle tissue. Muscle contraction occurs when sarcomeres shorten, as thick and thin filaments slide past each other, which is called the sliding filament model of muscle contraction. ATP provides the energy for cross-bridge formation and filament sliding. Regulatory proteins, such as troponin and tropomyosin, control cross-bridge formation. Excitation–contraction coupling transduces the electrical signal of the neuron, via acetylcholine, to an electrical signal on the muscle membrane, which initiates force production. The number of muscle fibers contracting determines how much force the whole muscle produces.

Art Connections

Figure 7.3.5: Which of the following statements about muscle contraction is true?

A. The power stroke occurs when ATP is hydrolyzed to ADP and phosphate.
B. The power stroke occurs when ADP and phosphate dissociate from the myosin head.
C. The power stroke occurs when ADP and phosphate dissociate from the actin active site.
D. The power stroke occurs when Ca^{2+} binds the calcium head.

Answer

B

Figure 7.3.6: The deadly nerve gas Sarin irreversibly inhibits acetycholinesterase. What effect would Sarin have on muscle contraction?

Answer

In the presence of Sarin, acetycholine is not removed from the synapse, resulting in continuous stimulation of the muscle plasma membrane. At first, muscle activity is intense and uncontrolled, but the ion gradients dissipate, so electrical signals in the T-tubules are no longer possible. The result is paralysis, leading to death by asphyxiation.

Glossary

actin
globular contractile protein that interacts with myosin for muscle contraction

acetylcholinesterase
(AChE) enzyme that breaks down ACh into acetyl and choline

cardiac muscle
tissue muscle tissue found only in the heart; cardiac contractions pump blood throughout the body and maintain blood pressure

motor end plate
sarcolemma of the muscle fiber that interacts with the neuron

myofibril
long cylindrical structures that lie parallel to the muscle fiber

myofilament
small structures that make up myofibrils

myosin
contractile protein that interacts with actin for muscle contraction

sarcolemma
plasma membrane of a skeletal muscle fiber

sarcomere
functional unit of skeletal muscle

skeletal muscle tissue
forms skeletal muscles, which attach to bones and control locomotion and any movement that can be consciously controlled

smooth muscle
tissue occurs in the walls of hollow organs such as the intestines, stomach, and urinary bladder, and around passages such as the respiratory tract and blood vessels

thick filament
a group of myosin molecules

thin filament
two polymers of actin wound together along with tropomyosin and troponin

tropomyosin

acts to block myosin binding sites on actin molecules, preventing cross-bridge formation and preventing contraction until a muscle receives a neuron signal

troponin

binds to tropomyosin and helps to position it on the actin molecule, and also binds calcium ions

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CHAPTER OVERVIEW

8: The Endocrine System

8.1: Introduction
8.2: Types of Hormones
8.3: How Hormones Work
8.4: Regulation of Body Processes
8.5: Regulation of Hormone Production
8.6: Endocrine Glands
8.E: The Endocrine System (Exercises)

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8.1: Introduction

An animal's endocrine system controls body processes through the production, secretion, and regulation of hormones, which serve as chemical "messengers" functioning in cellular and organ activity and, ultimately, maintaining the body's homeostasis. The endocrine system plays a role in growth, metabolism, and sexual development. In humans, common endocrine system diseases include thyroid disease and diabetes mellitus. In organisms that undergo metamorphosis, the process is controlled by the endocrine system. The transformation from tadpole to frog, for example, is complex and nuanced to adapt to specific environments and ecological circumstances.



Figure 8.1.1: The process of amphibian metamorphosis, as seen in the tadpole-to-frog stages shown here, is driven by hormones. (credit "tadpole": modification of work by Brian Gratwicke)

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8.2: Types of Hormones

Skills to Develop

- List the different types of hormones
- Explain their role in maintaining homeostasis

Maintaining homeostasis within the body requires the coordination of many different systems and organs. Communication between neighboring cells, and between cells and tissues in distant parts of the body, occurs through the release of chemicals called hormones. Hormones are released into body fluids (usually blood) that carry these chemicals to their target cells. At the target cells, which are cells that have a receptor for a signal or ligand from a signal cell, the hormones elicit a response. The cells, tissues, and organs that secrete hormones make up the endocrine system. Examples of glands of the endocrine system include the adrenal glands, which produce hormones such as epinephrine and norepinephrine that regulate responses to stress, and the thyroid gland, which produces thyroid hormones that regulate metabolic rates.

Although there are many different hormones in the human body, they can be divided into three classes based on their chemical structure: lipid-derived, amino acid-derived, and peptide (peptide and proteins) hormones. One of the key distinguishing features of lipid-derived hormones is that they can diffuse across plasma membranes whereas the amino acid-derived and peptide hormones cannot.

Lipid-Derived Hormones (or Lipid-soluble Hormones)

Most lipid hormones are derived from cholesterol and thus are structurally similar to it, as illustrated in Figure 8.2.1. The primary class of lipid hormones in humans is the steroid hormones. Chemically, these hormones are usually ketones or alcohols; their chemical names will end in “-ol” for alcohols or “-one” for ketones. Examples of steroid hormones include estradiol, which is an estrogen, or female sex hormone, and testosterone, which is an androgen, or male sex hormone. These two hormones are released by the female and male reproductive organs, respectively. Other steroid hormones include aldosterone and cortisol, which are released by the adrenal glands along with some other types of androgens. Steroid hormones are insoluble in water, and they are transported by transport proteins in blood. As a result, they remain in circulation longer than peptide hormones. For example, cortisol has a half-life of 60 to 90 minutes, while epinephrine, an amino acid derived-hormone, has a half-life of approximately one minute.

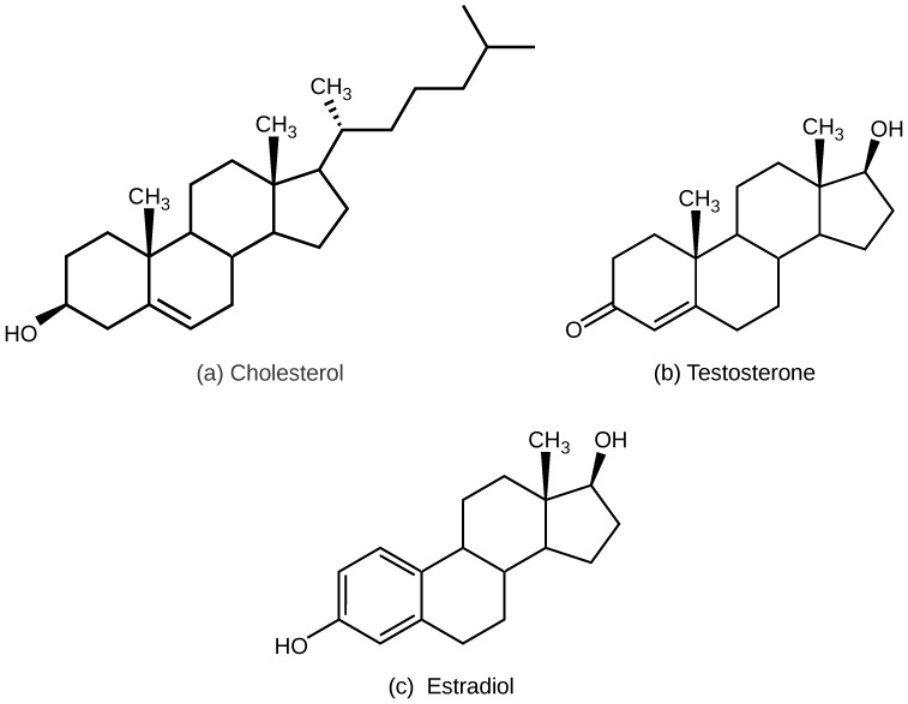


Figure 8.2.1: The structures shown here represent (a) cholesterol, plus the steroid hormones (b) testosterone and (c) estradiol.

Amino Acid-Derived Hormones

The amino acid-derived hormones are relatively small molecules that are derived from the amino acids tyrosine and tryptophan, shown in Figure 8.2.2. If a hormone is amino acid-derived, its chemical name will end in "-ine". Examples of amino acid-derived hormones include epinephrine and norepinephrine, which are synthesized in the medulla of the adrenal glands, and thyroxine, which is produced by the thyroid gland. The pineal gland in the brain makes and secretes melatonin which regulates sleep cycles.

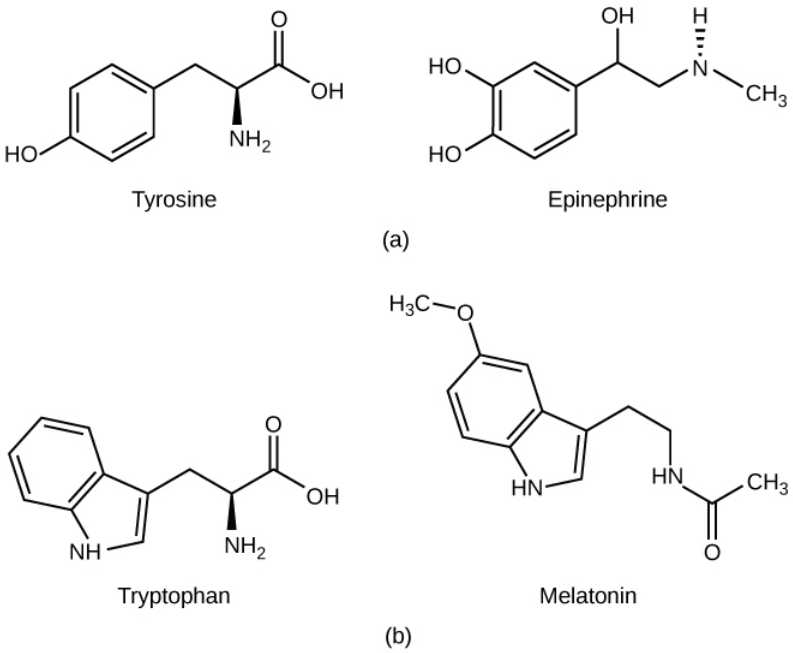


Figure 8.2.2: (a) The hormone epinephrine, which triggers the fight-or-flight response, is derived from the amino acid tyrosine. (b) The hormone melatonin, which regulates circadian rhythms, is derived from the amino acid tryptophan.

Peptide Hormones

The structure of peptide hormones is that of a polypeptide chain (chain of amino acids). The peptide hormones include molecules that are short polypeptide chains, such as antidiuretic hormone and oxytocin produced in the brain and released into the blood in the posterior pituitary gland. This class also includes small proteins, like growth hormones produced by the pituitary, and large glycoproteins such as follicle-stimulating hormone produced by the pituitary. Figure 8.2.3 illustrates these peptide hormones.

Secreted peptides like insulin are stored within vesicles in the cells that synthesize them. They are then released in response to stimuli such as high blood glucose levels in the case of insulin. Amino acid-derived and polypeptide hormones are water-soluble and insoluble in lipids. These hormones cannot pass through plasma membranes of cells; therefore, their receptors are found on the surface of the target cells.

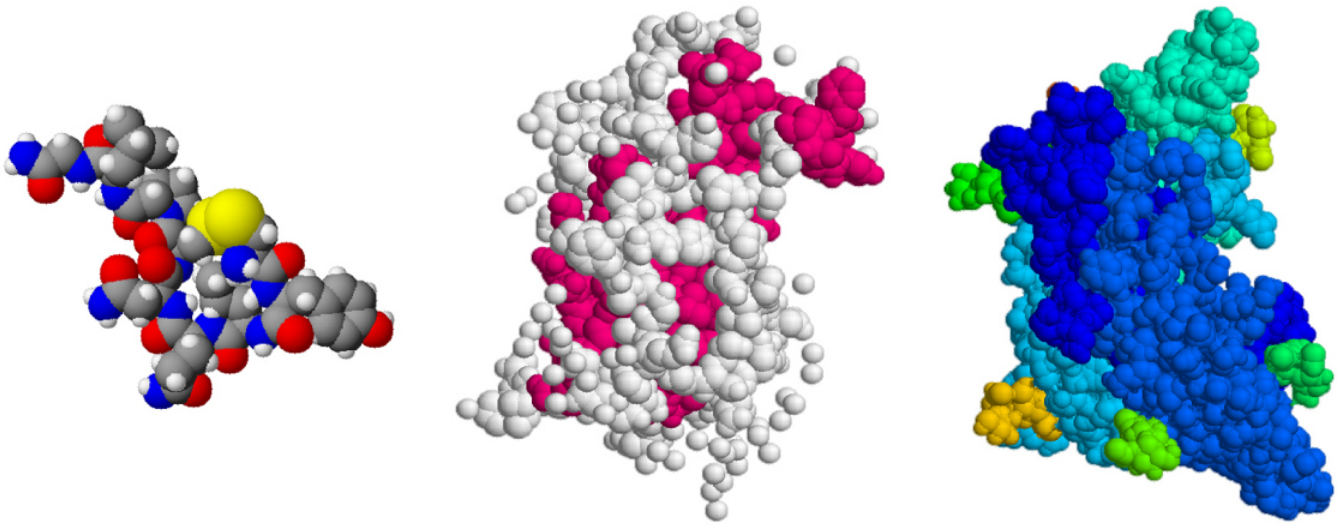


Figure 8.2.3: The structures of peptide hormones (a) oxytocin, (b) growth hormone, and (c) follicle-stimulating hormone are shown. These peptide hormones are much larger than those derived from cholesterol or amino acids.

Career Connection: Endocrinologist

An endocrinologist is a medical doctor who specializes in treating disorders of the endocrine glands, hormone systems, and glucose and lipid metabolic pathways. An endocrine surgeon specializes in the surgical treatment of endocrine diseases and glands. Some of the diseases that are managed by endocrinologists: disorders of the pancreas (diabetes mellitus), disorders of the pituitary (gigantism, acromegaly, and pituitary dwarfism), disorders of the thyroid gland (goiter and Graves' disease), and disorders of the adrenal glands (Cushing's disease and Addison's disease).

Endocrinologists are required to assess patients and diagnose endocrine disorders through extensive use of laboratory tests. Many endocrine diseases are diagnosed using tests that stimulate or suppress endocrine organ functioning. Blood samples are then drawn to determine the effect of stimulating or suppressing an endocrine organ on the production of hormones. For example, to diagnose diabetes mellitus, patients are required to fast for 12 to 24 hours. They are then given a sugary drink, which stimulates the pancreas to produce insulin to decrease blood glucose levels. A blood sample is taken one to two hours after the sugar drink is consumed. If the pancreas is functioning properly, the blood glucose level will be within a normal range. Another example is the A1C test, which can be performed during blood screening. The A1C test measures average blood glucose levels over the past two to three months by examining how well the blood glucose is being managed over a long time.

Once a disease has been diagnosed, endocrinologists can prescribe lifestyle changes and/or medications to treat the disease. Some cases of diabetes mellitus can be managed by exercise, weight loss, and a healthy diet; in other cases, medications may be required to enhance insulin release. If the disease cannot be controlled by these means, the endocrinologist may prescribe insulin injections.

In addition to clinical practice, endocrinologists may also be involved in primary research and development activities. For example, ongoing islet transplant research is investigating how healthy pancreas islet cells may be transplanted into diabetic patients. Successful islet transplants may allow patients to stop taking insulin injections.

Summary

There are three basic types of hormones: lipid-derived, amino acid-derived, and peptide. Lipid-derived hormones are structurally similar to cholesterol and include steroid hormones such as estradiol and testosterone. Amino acid-derived hormones are relatively small molecules and include the adrenal hormones epinephrine and norepinephrine. Peptide hormones are polypeptide chains or proteins and include the pituitary hormones, antidiuretic hormone (vasopressin), and oxytocin.

Glossary

amino acid-derived hormone
hormone derived from amino acids

lipid-derived hormone
hormone derived mostly from cholesterol

peptide hormone
hormone composed of a polypeptide chain

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8.3: How Hormones Work

Skills to Develop

- Explain how hormones work
- Discuss the role of different types of hormone receptors

Hormones mediate changes in target cells by binding to specific hormone receptors. In this way, even though hormones circulate throughout the body and come into contact with many different cell types, they only affect cells that possess the necessary receptors. Receptors for a specific hormone may be found on many different cells or may be limited to a small number of specialized cells. For example, thyroid hormones act on many different tissue types, stimulating metabolic activity throughout the body. Cells can have many receptors for the same hormone but often also possess receptors for different types of hormones. The number of receptors that respond to a hormone determines the cell's sensitivity to that hormone, and the resulting cellular response. Additionally, the number of receptors that respond to a hormone can change over time, resulting in increased or decreased cell sensitivity. In up-regulation, the number of receptors increases in response to rising hormone levels, making the cell more sensitive to the hormone and allowing for more cellular activity. When the number of receptors decreases in response to rising hormone levels, called down-regulation, cellular activity is reduced.

Receptor binding alters cellular activity and results in an increase or decrease in normal body processes. Depending on the location of the protein receptor on the target cell and the chemical structure of the hormone, hormones can mediate changes directly by binding to intracellular hormone receptors and modulating gene transcription, or indirectly by binding to cell surface receptors and stimulating signaling pathways.

Intracellular Hormone Receptors

Lipid-derived (soluble) hormones such as steroid hormones diffuse across the membranes of the endocrine cell. Once outside the cell, they bind to transport proteins that keep them soluble in the bloodstream. At the target cell, the hormones are released from the carrier protein and diffuse across the lipid bilayer of the plasma membrane of cells. The steroid hormones pass through the plasma membrane of a target cell and adhere to intracellular receptors residing in the cytoplasm or in the nucleus. The cell signaling pathways induced by the steroid hormones regulate specific genes on the cell's DNA. The hormones and receptor complex act as transcription regulators by increasing or decreasing the synthesis of mRNA molecules of specific genes. This, in turn, determines the amount of corresponding protein that is synthesized by altering gene expression. This protein can be used either to change the structure of the cell or to produce enzymes that catalyze chemical reactions. In this way, the steroid hormone regulates specific cell processes as illustrated in Figure 8.3.1.

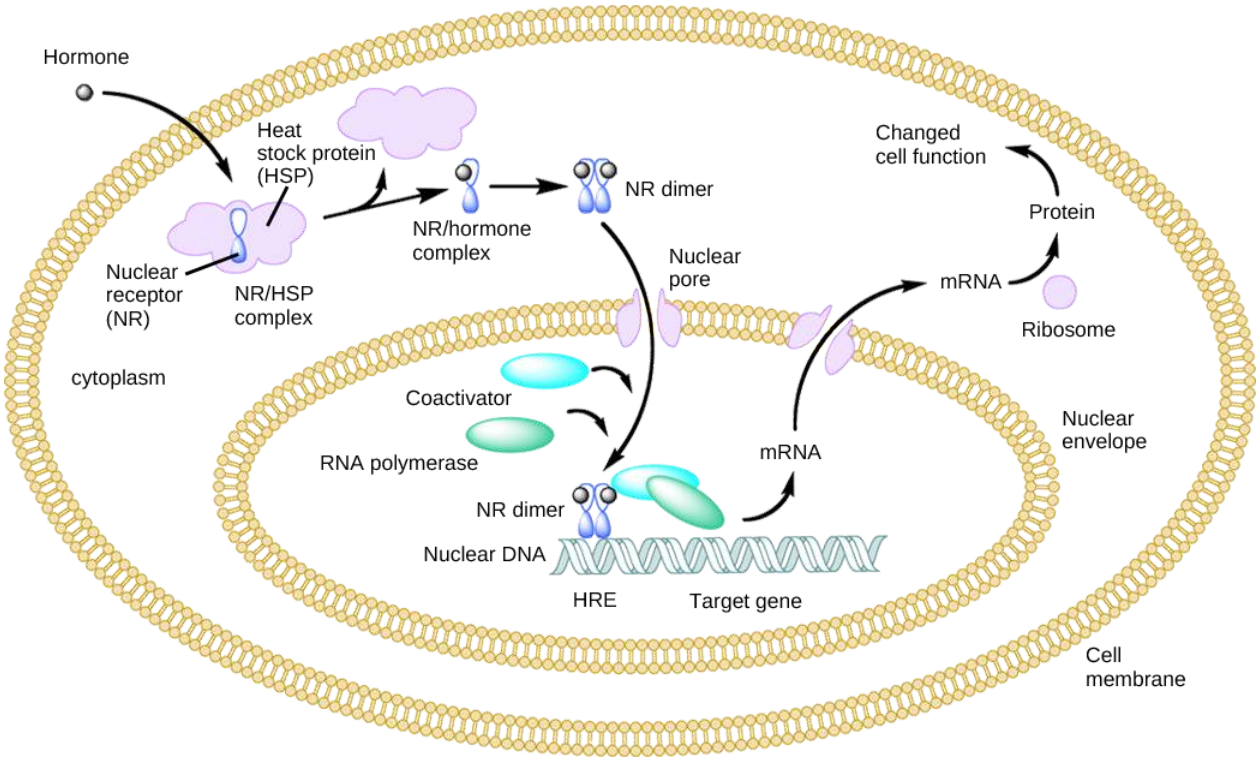


Figure 8.3.1: An intracellular nuclear receptor (NR) is located in the cytoplasm bound to a heat shock protein (HSP). Upon hormone binding, the receptor dissociates from the heat shock protein and translocates to the nucleus. In the nucleus, the hormone-receptor complex binds to a DNA sequence called a hormone response element (HRE), which triggers gene transcription and translation. The corresponding protein product can then mediate changes in cell function.

Exercise 8.3.1

Heat shock proteins (HSP) are so named because they help refold misfolded proteins. In response to increased temperature (a "heat shock"), heat shock proteins are activated by release from the NR/HSP complex. At the same time, transcription of HSP genes is activated. Why do you think the cell responds to a heat shock by increasing the activity of proteins that help refold misfolded proteins?

Answer

Proteins unfold, or denature, at higher temperatures.

Other lipid-soluble hormones that are not steroid hormones, such as vitamin D and thyroxine, have receptors located in the nucleus. The hormones diffuse across both the plasma membrane and the nuclear envelope, then bind to receptors in the nucleus. The hormone-receptor complex stimulates transcription of specific genes.

Plasma Membrane Hormone Receptors

Amino acid derived hormones and polypeptide hormones are not lipid-derived (lipid-soluble) and therefore cannot diffuse through the plasma membrane of cells. Lipid insoluble hormones bind to receptors on the outer surface of the plasma membrane, via plasma membrane hormone receptors. Unlike steroid hormones, lipid insoluble hormones do not directly affect the target cell because they cannot enter the cell and act directly on DNA. Binding of these hormones to a cell surface receptor results in activation of a signaling pathway; this triggers intracellular activity and carries out the specific effects associated with the hormone. In this way, nothing passes through the cell membrane; the hormone that binds at the surface remains at the surface of the cell while the intracellular product remains inside the cell. The hormone that initiates the signaling pathway is called a first messenger, which activates a second messenger in the cytoplasm, as illustrated in Figure 8.3.2.

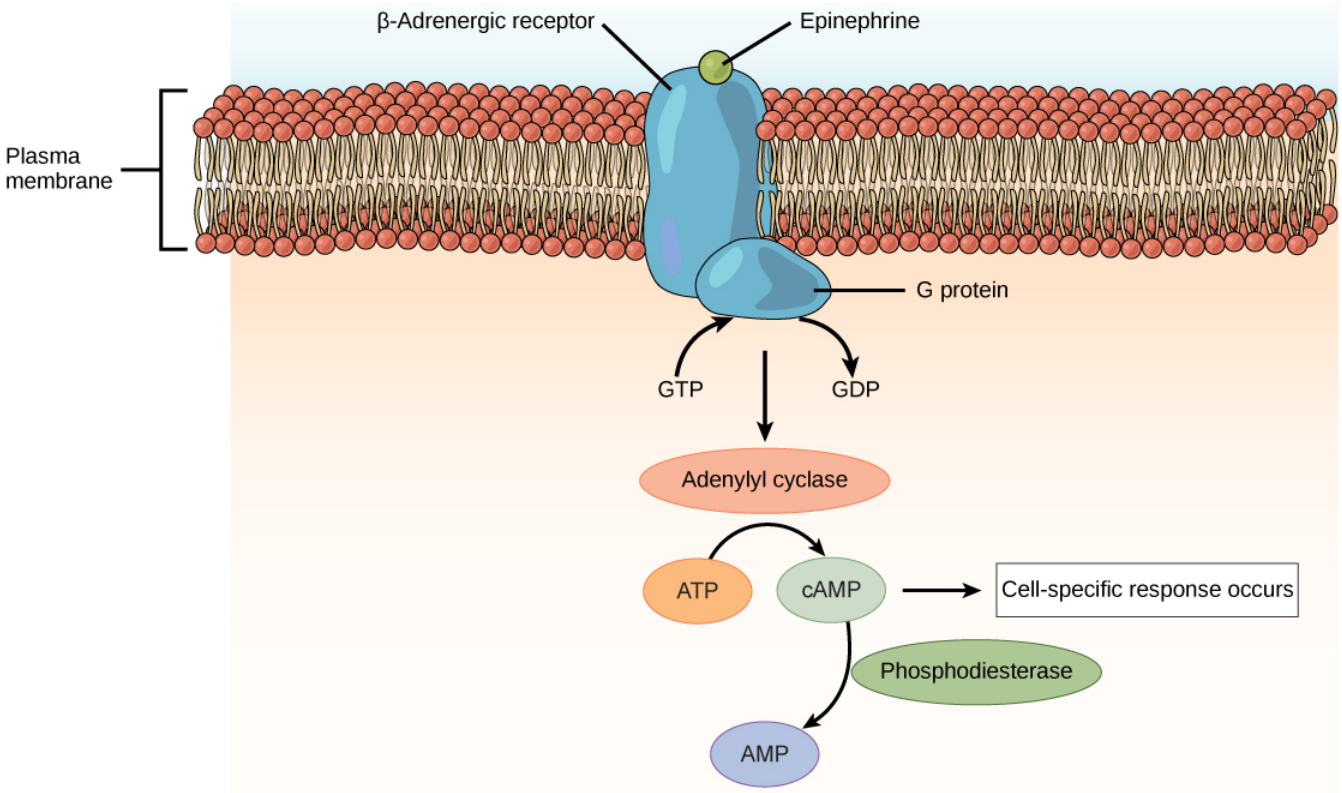


Figure 8.3.2: The amino acid-derived hormones epinephrine and norepinephrine bind to beta-adrenergic receptors on the plasma membrane of cells. Hormone binding to receptor activates a G-protein, which in turn activates adenylyl cyclase, converting ATP to cAMP. cAMP is a second messenger that mediates a cell-specific response. An enzyme called phosphodiesterase breaks down cAMP, terminating the signal.

One very important second messenger is cyclic AMP (cAMP). When a hormone binds to its membrane receptor, a G-protein that is associated with the receptor is activated; G-proteins are proteins separate from receptors that are found in the cell membrane. When a hormone is not bound to the receptor, the G-protein is inactive and is bound to guanosine diphosphate, or GDP. When a hormone binds to the receptor, the G-protein is activated by binding guanosine triphosphate, or GTP, in place of GDP. After binding, GTP is hydrolysed by the G-protein into GDP and becomes inactive.

The activated G-protein in turn activates a membrane-bound enzyme called adenylyl cyclase. Adenylyl cyclase catalyzes the conversion of ATP to cAMP. cAMP, in turn, activates a group of proteins called protein kinases, which transfer a phosphate group from ATP to a substrate molecule in a process called phosphorylation. The phosphorylation of a substrate molecule changes its structural orientation, thereby activating it. These activated molecules can then mediate changes in cellular processes.

The effect of a hormone is amplified as the signaling pathway progresses. The binding of a hormone at a single receptor causes the activation of many G-proteins, which activates adenylyl cyclase. Each molecule of adenylyl cyclase then triggers the formation of many molecules of cAMP. Further amplification occurs as protein kinases, once activated by cAMP, can catalyze many reactions. In this way, a small amount of hormone can trigger the formation of a large amount of cellular product. To stop hormone activity, cAMP is deactivated by the cytoplasmic enzyme phosphodiesterase, or PDE. PDE is always present in the cell and breaks down cAMP to control hormone activity, preventing overproduction of cellular products.

The specific response of a cell to a lipid insoluble hormone depends on the type of receptors that are present on the cell membrane and the substrate molecules present in the cell cytoplasm. Cellular responses to hormone binding of a receptor include altering membrane permeability and metabolic pathways, stimulating synthesis of proteins and enzymes, and activating hormone release.

Summary

Hormones cause cellular changes by binding to receptors on target cells. The number of receptors on a target cell can increase or decrease in response to hormone activity. Hormones can affect cells directly through intracellular hormone receptors or indirectly

through plasma membrane hormone receptors.

Lipid-derived (soluble) hormones can enter the cell by diffusing across the plasma membrane and binding to DNA to regulate gene transcription and to change the cell's activities by inducing production of proteins that affect, in general, the long-term structure and function of the cell. Lipid insoluble hormones bind to receptors on the plasma membrane surface and trigger a signaling pathway to change the cell's activities by inducing production of various cell products that affect the cell in the short-term. The hormone is called a first messenger and the cellular component is called a second messenger. G-proteins activate the second messenger (cyclic AMP), triggering the cellular response. Response to hormone binding is amplified as the signaling pathway progresses. Cellular responses to hormones include the production of proteins and enzymes and altered membrane permeability.

Glossary

adenylate cyclase
an enzyme that catalyzes the conversion of ATP to cyclic AMP

down-regulation
a decrease in the number of hormone receptors in response to increased hormone levels

first messenger
the hormone that binds to a plasma membrane hormone receptor to trigger a signal transduction pathway

G-protein
a membrane protein activated by the hormone first messenger to activate formation of cyclic AMP

hormone receptor
the cellular protein that binds to a hormone

intracellular hormone receptor
a hormone receptor in the cytoplasm or nucleus of a cell

phosphodiesterase (PDE)
enzyme that deactivates cAMP, stopping hormone activity

plasma membrane hormone receptor
a hormone receptor on the surface of the plasma membrane of a cell

up-regulation
an increase in the number of hormone receptors in response to increased hormone levels

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8.4: Regulation of Body Processes

Skills to Develop

- Explain how hormones regulate the excretory system
- Discuss the role of hormones in the reproductive system
- Describe how hormones regulate metabolism
- Explain the role of hormones in different diseases

Hormones have a wide range of effects and modulate many different body processes. The key regulatory processes that will be examined here are those affecting the excretory system, the reproductive system, metabolism, blood calcium concentrations, growth, and the stress response.

Hormonal Regulation of the Excretory System

Maintaining a proper water balance in the body is important to avoid dehydration or over-hydration (hyponatremia). The water concentration of the body is monitored by osmoreceptors in the hypothalamus, which detect the concentration of electrolytes in the extracellular fluid. The concentration of electrolytes in the blood rises when there is water loss caused by excessive perspiration, inadequate water intake, or low blood volume due to blood loss. An increase in blood electrolyte levels results in a neuronal signal being sent from the osmoreceptors in hypothalamic nuclei. The pituitary gland has two components: anterior and posterior. The anterior pituitary is composed of glandular cells that secrete protein hormones. The posterior pituitary is an extension of the hypothalamus. It is composed largely of neurons that are continuous with the hypothalamus.

The hypothalamus produces a polypeptide hormone known as antidiuretic hormone (ADH), which is transported to and released from the posterior pituitary gland. The principal action of ADH is to regulate the amount of water excreted by the kidneys. As ADH (which is also known as vasopressin) causes direct water reabsorption from the kidney tubules, salts and wastes are concentrated in what will eventually be excreted as urine. The hypothalamus controls the mechanisms of ADH secretion, either by regulating blood volume or the concentration of water in the blood. Dehydration or physiological stress can cause an increase of osmolarity above 300 mOsm/L, which in turn, raises ADH secretion and water will be retained, causing an increase in blood pressure. ADH travels in the bloodstream to the kidneys. Once at the kidneys, ADH changes the kidneys to become more permeable to water by temporarily inserting water channels, aquaporins, into the kidney tubules. Water moves out of the kidney tubules through the aquaporins, reducing urine volume. The water is reabsorbed into the capillaries lowering blood osmolarity back toward normal. As blood osmolarity decreases, a negative feedback mechanism reduces osmoreceptor activity in the hypothalamus, and ADH secretion is reduced. ADH release can be reduced by certain substances, including alcohol, which can cause increased urine production and dehydration.

Chronic underproduction of ADH or a mutation in the ADH receptor results in diabetes insipidus. If the posterior pituitary does not release enough ADH, water cannot be retained by the kidneys and is lost as urine. This causes increased thirst, but water taken in is lost again and must be continually consumed. If the condition is not severe, dehydration may not occur, but severe cases can lead to electrolyte imbalances due to dehydration.

Another hormone responsible for maintaining electrolyte concentrations in extracellular fluids is aldosterone, a steroid hormone that is produced by the adrenal cortex. In contrast to ADH, which promotes the reabsorption of water to maintain proper water balance, aldosterone maintains proper water balance by enhancing Na^+ reabsorption and K^+ secretion from extracellular fluid of the cells in kidney tubules. Because it is produced in the cortex of the adrenal gland and affects the concentrations of minerals Na^+ and K^+, aldosterone is referred to as a mineralocorticoid, a corticosteroid that affects ion and water balance. Aldosterone release is stimulated by a decrease in blood sodium levels, blood volume, or blood pressure, or an increase in blood potassium levels. It also prevents the loss of Na^+ from sweat, saliva, and gastric juice. The reabsorption of Na^+ also results in the osmotic reabsorption of water, which alters blood volume and blood pressure.

Aldosterone production can be stimulated by low blood pressure, which triggers a sequence of chemical release, as illustrated in Figure 8.4.1. When blood pressure drops, the renin-angiotensin-aldosterone system (RAAS) is activated. Cells in the juxtaglomerular apparatus, which regulates the functions of the nephrons of the kidney, detect this and release renin. Renin, an

enzyme, circulates in the blood and reacts with a plasma protein produced by the liver called angiotensinogen. When angiotensinogen is cleaved by renin, it produces angiotensin I, which is then converted into angiotensin II in the lungs. Angiotensin II functions as a hormone and then causes the release of the hormone aldosterone by the adrenal cortex, resulting in increased Na^+ reabsorption, water retention, and an increase in blood pressure. Angiotensin II in addition to being a potent vasoconstrictor also causes an increase in ADH and increased thirst, both of which help to raise blood pressure.

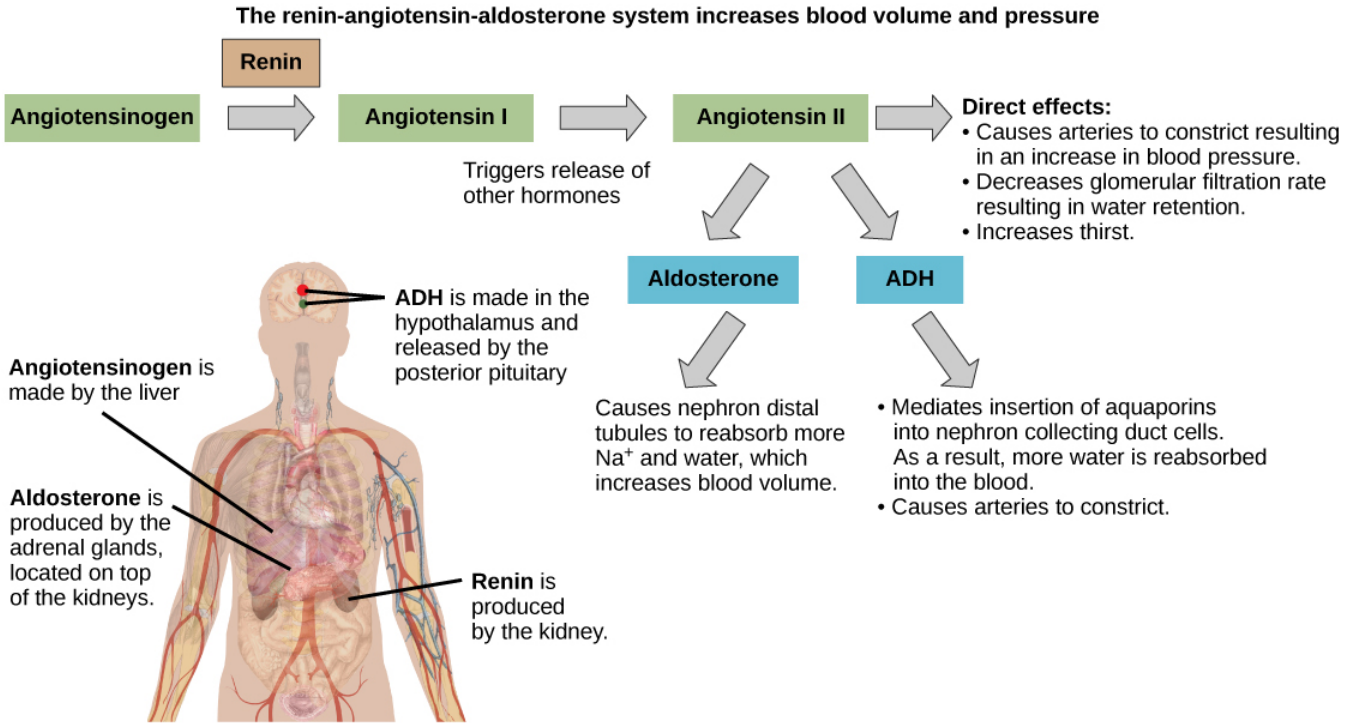


Figure 8.4.1: ADH and aldosterone increase blood pressure and volume. Angiotensin II stimulates release of these hormones. Angiotensin II, in turn, is formed when renin cleaves angiotensinogen. (credit: modification of work by Mikael Häggström).

Hormonal Regulation of the Reproductive System

Regulation of the reproductive system is a process that requires the action of hormones from the pituitary gland, the adrenal cortex, and the gonads. During puberty in both males and females, the hypothalamus produces gonadotropin-releasing hormone (GnRH), which stimulates the production and release of *follicle-stimulating hormone (FSH)* and *luteinizing hormone (LH)* from the anterior pituitary gland. These hormones regulate the gonads (testes in males and ovaries in females) and therefore are called gonadotropins. In both males and females, FSH stimulates gamete production and LH stimulates production of hormones by the gonads. An increase in gonad hormone levels inhibits GnRH production through a negative feedback loop.

Regulation of the Male Reproductive System

In males, FSH stimulates the maturation of sperm cells. FSH production is inhibited by the hormone inhibin, which is released by the testes. LH stimulates production of the sex hormones (androgens) by the interstitial cells of the testes and therefore is also called interstitial cell-stimulating hormone. The most widely known androgen in males is *testosterone*. Testosterone promotes the production of sperm and masculine characteristics. The adrenal cortex also produces small amounts of testosterone precursor, although the role of this additional hormone production is not fully understood.

Everyday Connection: The Dangers of Synthetic Hormones

Some athletes attempt to boost their performance by using artificial hormones that enhance muscle performance. Anabolic steroids, a form of the male sex hormone testosterone, are one of the most widely known performance-enhancing drugs. Steroids are used to help build muscle mass. Other hormones that are used to enhance athletic performance include *erythropoietin*, which triggers the production of red blood cells, and human growth hormone, which can help in building muscle mass. Most performance enhancing drugs are illegal for non-medical purposes. They are also banned by national and

international governing bodies including the International Olympic Committee, the U.S. Olympic Committee, the National Collegiate Athletic Association, the Major League Baseball, and the National Football League.



Figure 8.4.2: Professional baseball player Jason Giambi publically admitted to, and apologized for, his use of anabolic steroids supplied by a trainer. (credit: Bryce Edwards)

The side effects of synthetic hormones are often significant and non-reversible, and in some cases, fatal. Androgens produce several complications such as liver dysfunctions and liver tumors, prostate gland enlargement, difficulty urinating, premature closure of epiphyseal cartilages, testicular atrophy, infertility, and immune system depression. The physiological strain caused by these substances is often greater than what the body can handle, leading to unpredictable and dangerous effects and linking their use to heart attacks, strokes, and impaired cardiac function.

Regulation of the Female Reproductive System

In females, FSH stimulates development of egg cells, called ova, which develop in structures called follicles. Follicle cells produce the hormone inhibin, which inhibits FSH production. LH also plays a role in the development of ova, induction of ovulation, and stimulation of estradiol and progesterone production by the ovaries, as illustrated in Figure 8.4.3. Estradiol and progesterone are steroid hormones that prepare the body for pregnancy. Estradiol produces secondary sex characteristics in females, while both estradiol and progesterone regulate the menstrual cycle.

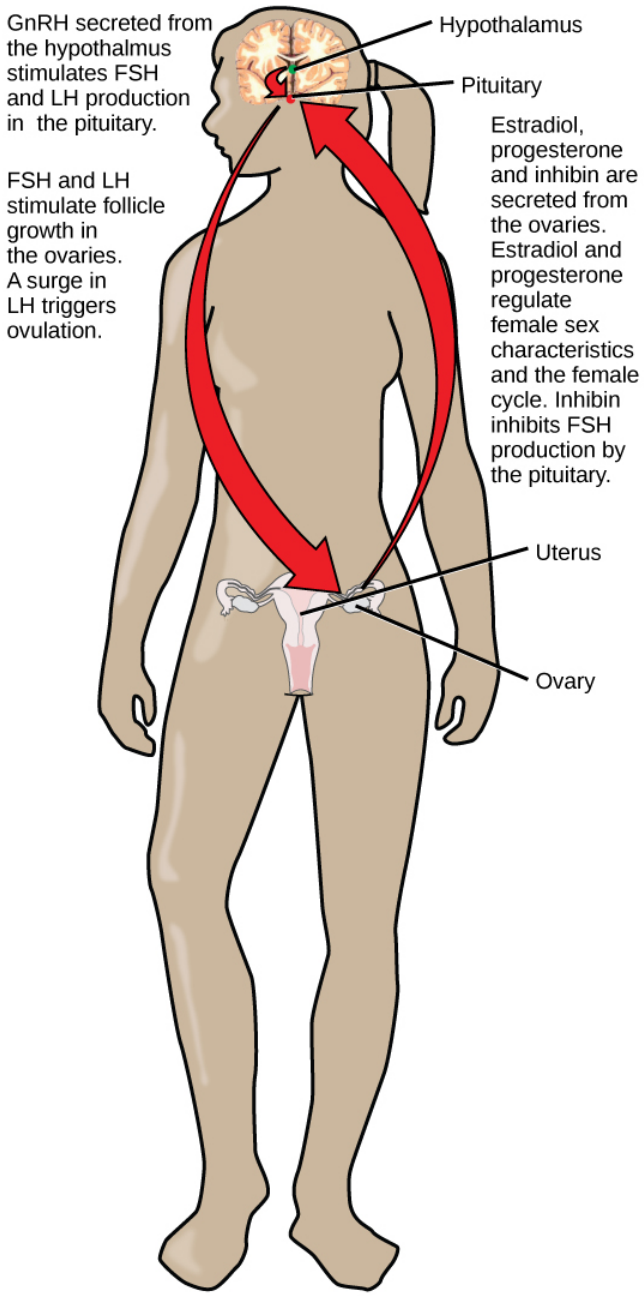


Figure 8.4.3: Hormonal regulation of the female reproductive system involves hormones from the hypothalamus, pituitary, and ovaries.

In addition to producing FSH and LH, the anterior portion of the pituitary gland also produces the hormone prolactin (PRL) in females. Prolactin stimulates the production of milk by the mammary glands following childbirth. Prolactin levels are regulated by the hypothalamic hormones prolactin-releasing hormone (PRH) and prolactin-inhibiting hormone (PIH), which is now known to be dopamine. PRH stimulates the release of prolactin and PIH inhibits it.

The posterior pituitary releases the hormone oxytocin, which stimulates uterine contractions during childbirth. The uterine smooth muscles are not very sensitive to oxytocin until late in pregnancy when the number of oxytocin receptors in the uterus peaks. Stretching of tissues in the uterus and cervix stimulates oxytocin release during childbirth. Contractions increase in intensity as blood levels of oxytocin rise via a positive feedback mechanism until the birth is complete. Oxytocin also stimulates the contraction of myoepithelial cells around the milk-producing mammary glands. As these cells contract, milk is forced from the secretory alveoli into milk ducts and is ejected from the breasts in milk ejection (“let-down”) reflex. Oxytocin release is stimulated by the

suckling of an infant, which triggers the synthesis of oxytocin in the hypothalamus and its release into circulation at the posterior pituitary.

Hormonal Regulation of Metabolism

Blood glucose levels vary widely over the course of a day as periods of food consumption alternate with periods of fasting. Insulin and glucagon are the two hormones primarily responsible for maintaining homeostasis of blood glucose levels. Additional regulation is mediated by the thyroid hormones.

Regulation of Blood Glucose Levels by Insulin and Glucagon

Cells of the body require nutrients in order to function, and these nutrients are obtained through feeding. In order to manage nutrient intake, storing excess intake and utilizing reserves when necessary, the body uses hormones to moderate energy stores. Insulin is produced by the beta cells of the pancreas, which are stimulated to release insulin as blood glucose levels rise (for example, after a meal is consumed). Insulin lowers blood glucose levels by enhancing the rate of glucose uptake and utilization by target cells, which use glucose for ATP production. It also stimulates the liver to convert glucose to glycogen, which is then stored by cells for later use. Insulin also increases glucose transport into certain cells, such as muscle cells and the liver. This results from an insulin-mediated increase in the number of glucose transporter proteins in cell membranes, which remove glucose from circulation by facilitated diffusion. As insulin binds to its target cell via insulin receptors and signal transduction, it triggers the cell to incorporate glucose transport proteins into its membrane. This allows glucose to enter the cell, where it can be used as an energy source. However, this does not occur in all cells: some cells, including those in the kidneys and brain, can access glucose without the use of insulin. Insulin also stimulates the conversion of glucose to fat in adipocytes and the synthesis of proteins. These actions mediated by insulin cause blood glucose concentrations to fall, called a hypoglycemic “low sugar” effect, which inhibits further insulin release from beta cells through a negative feedback loop.

Link to Learning



This animation describes the role of insulin and the pancreas in diabetes.

Impaired insulin function can lead to a condition called diabetes mellitus, the main symptoms of which are illustrated in Figure 8.4.4. This can be caused by low levels of insulin production by the beta cells of the pancreas, or by reduced sensitivity of tissue cells to insulin. This prevents glucose from being absorbed by cells, causing high levels of blood glucose, or hyperglycemia (high sugar). High blood glucose levels make it difficult for the kidneys to recover all the glucose from nascent urine, resulting in glucose being lost in urine. High glucose levels also result in less water being reabsorbed by the kidneys, causing high amounts of urine to be produced; this may result in dehydration. Over time, high blood glucose levels can cause nerve damage to the eyes and peripheral body tissues, as well as damage to the kidneys and cardiovascular system. Oversecretion of insulin can cause hypoglycemia, low blood glucose levels. This causes insufficient glucose availability to cells, often leading to muscle weakness, and can sometimes cause unconsciousness or death if left untreated.

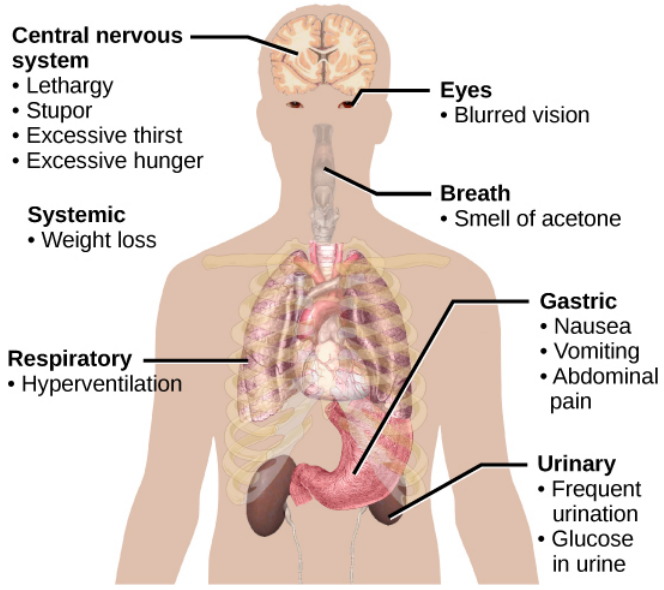


Figure 8.4.4: The main symptoms of diabetes are shown. (credit: modification of work by Mikael Häggström)

When blood glucose levels decline below normal levels, for example between meals or when glucose is utilized rapidly during exercise, the hormone glucagon is released from the alpha cells of the pancreas. Glucagon raises blood glucose levels, eliciting what is called a hyperglycemic effect, by stimulating the breakdown of glycogen to glucose in skeletal muscle cells and liver cells in a process called glycogenolysis. Glucose can then be utilized as energy by muscle cells and released into circulation by the liver cells. Glucagon also stimulates absorption of amino acids from the blood by the liver, which then converts them to glucose. This process of glucose synthesis is called gluconeogenesis. Glucagon also stimulates adipose cells to release fatty acids into the blood. These actions mediated by glucagon result in an increase in blood glucose levels to normal homeostatic levels. Rising blood glucose levels inhibit further glucagon release by the pancreas via a negative feedback mechanism. In this way, insulin and glucagon work together to maintain homeostatic glucose levels, as shown in Figure 8.4.5.

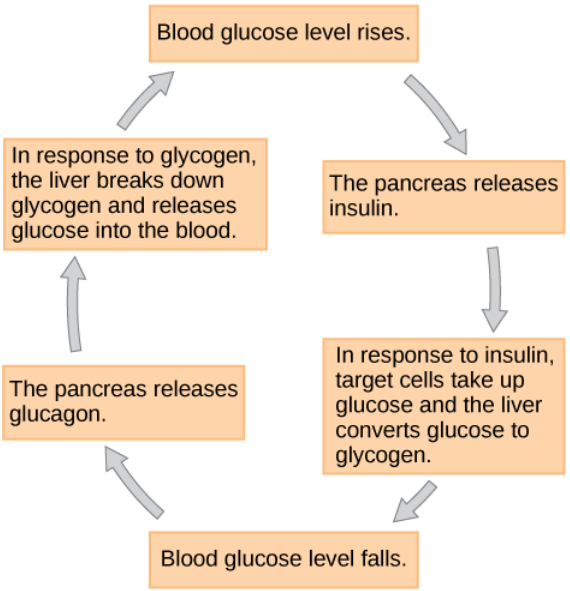


Figure 8.4.5: Insulin and glucagon regulate blood glucose levels.

Exercise

Pancreatic tumors may cause excess secretion of glucagon. Type I diabetes results from the failure of the pancreas to produce insulin. Which of the following statement about these two conditions is true?

A. A pancreatic tumor and type I diabetes will have the opposite effects on blood sugar levels.

B. A pancreatic tumor and type I diabetes will both cause hyperglycemia.
C. A pancreatic tumor and type I diabetes will both cause hypoglycemia.
D. Both pancreatic tumors and type I diabetes result in the inability of cells to take up glucose.

Answer

B

Regulation of Blood Glucose Levels by Thyroid Hormones

The basal metabolic rate, which is the amount of calories required by the body at rest, is determined by two hormones produced by the thyroid gland: thyroxine, also known as tetraiodothyronine or T_4, and triiodothyronine, also known as T_3. These hormones affect nearly every cell in the body except for the adult brain, uterus, testes, blood cells, and spleen. They are transported across the plasma membrane of target cells and bind to receptors on the mitochondria resulting in increased ATP production. In the nucleus, T_3 and T_4 activate genes involved in energy production and glucose oxidation. This results in increased rates of metabolism and body heat production, which is known as the hormone's calorigenic effect.

T_3 and T_4 release from the thyroid gland is stimulated by thyroid-stimulating hormone (TSH), which is produced by the anterior pituitary. TSH binding at the receptors of the follicle of the thyroid triggers the production of T_3 and T_4 from a glycoprotein called thyroglobulin. Thyroglobulin is present in the follicles of the thyroid, and is converted into thyroid hormones with the addition of iodine. Iodine is formed from iodide ions that are actively transported into the thyroid follicle from the bloodstream. A peroxidase enzyme then attaches the iodine to the tyrosine amino acid found in thyroglobulin. T_3 has three iodine ions attached, while T_4 has four iodine ions attached. T_3 and T_4 are then released into the bloodstream, with T_4 being released in much greater amounts than T_3. As T_3 is more active than T_4 and is responsible for most of the effects of thyroid hormones, tissues of the body convert T_4 to T_3 by the removal of an iodine ion. Most of the released T_3 and T_4 becomes attached to transport proteins in the bloodstream and is unable to cross the plasma membrane of cells. These protein-bound molecules are only released when blood levels of the unattached hormone begin to decline. In this way, a week's worth of reserve hormone is maintained in the blood. Increased T_3 and T_4 levels in the blood inhibit the release of TSH, which results in lower T_3 and T_4 release from the thyroid.

The follicular cells of the thyroid require iodides (anions of iodine) in order to synthesize T_3 and T_4. Iodides obtained from the diet are actively transported into follicle cells resulting in a concentration that is approximately 30 times higher than in blood. The typical diet in North America provides more iodine than required due to the addition of iodide to table salt. Inadequate iodine intake, which occurs in many developing countries, results in an inability to synthesize T_3 and T_4 hormones. The thyroid gland enlarges in a condition called goiter, which is caused by overproduction of TSH without the formation of thyroid hormone. Thyroglobulin is contained in a fluid called colloid, and TSH stimulation results in higher levels of colloid accumulation in the thyroid. In the absence of iodine, this is not converted to thyroid hormone, and colloid begins to accumulate more and more in the thyroid gland, leading to goiter.

Disorders can arise from both the underproduction and overproduction of thyroid hormones. Hypothyroidism, underproduction of the thyroid hormones, can cause a low metabolic rate leading to weight gain, sensitivity to cold, and reduced mental activity, among other symptoms. In children, hypothyroidism can cause cretinism, which can lead to mental retardation and growth defects. Hyperthyroidism, the overproduction of thyroid hormones, can lead to an increased metabolic rate and its effects: weight loss, excess heat production, sweating, and an increased heart rate. Graves' disease is one example of a hyperthyroid condition.

Hormonal Control of Blood Calcium Levels

Regulation of blood calcium concentrations is important for generation of muscle contractions and nerve impulses, which are electrically stimulated. If calcium levels get too high, membrane permeability to sodium decreases and membranes become less responsive. If calcium levels get too low, membrane permeability to sodium increases and convulsions or muscle spasms can result.

Blood calcium levels are regulated by parathyroid hormone (PTH), which is produced by the parathyroid glands, as illustrated in Figure 8.4.6. PTH is released in response to low blood Ca^{2+} levels. PTH increases Ca^{2+} levels by targeting the skeleton, the kidneys, and the intestine. In the skeleton, PTH stimulates osteoclasts, which causes bone to be reabsorbed, releasing Ca^{2+} from bone into the blood. PTH also inhibits osteoblasts, reducing Ca^{2+} deposition in bone. In the intestines, PTH increases dietary Ca^{2+} absorption, and in the kidneys, PTH stimulates reabsorption of the CA^{2+}. While PTH acts directly on the kidneys to increase Ca^{2+} reabsorption,

its effects on the intestine are indirect. PTH triggers the formation of calcitriol, an active form of vitamin D, which acts on the intestines to increase absorption of dietary calcium. PTH release is inhibited by rising blood calcium levels.

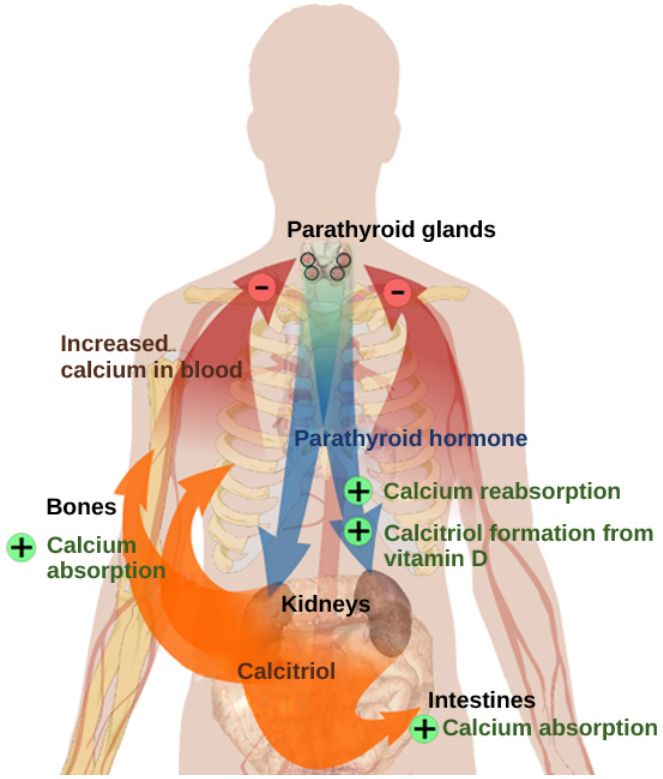


Figure 8.4.6: Parathyroid hormone (PTH) is released in response to low blood calcium levels. It increases blood calcium levels by targeting the skeleton, the kidneys, and the intestine. (credit: modification of work by Mikael Häggström)

Hyperparathyroidism results from an overproduction of parathyroid hormone. This results in excessive calcium being removed from bones and introduced into blood circulation, producing structural weakness of the bones, which can lead to deformation and fractures, plus nervous system impairment due to high blood calcium levels. Hypoparathyroidism, the underproduction of PTH, results in extremely low levels of blood calcium, which causes impaired muscle function and may result in tetany (severe sustained muscle contraction).

The hormone calcitonin, which is produced by the parafollicular or C cells of the thyroid, has the opposite effect on blood calcium levels as does PTH. Calcitonin decreases blood calcium levels by inhibiting osteoclasts, stimulating osteoblasts, and stimulating calcium excretion by the kidneys. This results in calcium being added to the bones to promote structural integrity. Calcitonin is most important in children (when it stimulates bone growth), during pregnancy (when it reduces maternal bone loss), and during prolonged starvation (because it reduces bone mass loss). In healthy nonpregnant, unstarved adults, the role of calcitonin is unclear.

Hormonal Regulation of Growth

Hormonal regulation is required for the growth and replication of most cells in the body. Growth hormone (GH), produced by the anterior portion of the pituitary gland, accelerates the rate of protein synthesis, particularly in skeletal muscle and bones. Growth hormone has direct and indirect mechanisms of action. The first direct action of GH is stimulation of triglyceride breakdown (lipolysis) and release into the blood by adipocytes. This results in a switch by most tissues from utilizing glucose as an energy source to utilizing fatty acids. This process is called a glucose-sparing effect. In another direct mechanism, GH stimulates glycogen breakdown in the liver; the glycogen is then released into the blood as glucose. Blood glucose levels increase as most tissues are utilizing fatty acids instead of glucose for their energy needs. The GH mediated increase in blood glucose levels is called a diabetogenic effect because it is similar to the high blood glucose levels seen in diabetes mellitus.

The indirect mechanism of GH action is mediated by insulin-like growth factors (IGFs) or somatomedins, which are a family of growth-promoting proteins produced by the liver, which stimulates tissue growth. IGFs stimulate the uptake of amino acids from the blood, allowing the formation of new proteins, particularly in skeletal muscle cells, cartilage cells, and other target cells, as

shown in Figure 8.4.7. This is especially important after a meal, when glucose and amino acid concentration levels are high in the blood. GH levels are regulated by two hormones produced by the hypothalamus. GH release is stimulated by growth hormone-releasing hormone (GHRH) and is inhibited by growth hormone-inhibiting hormone (GHIH), also called somatostatin.

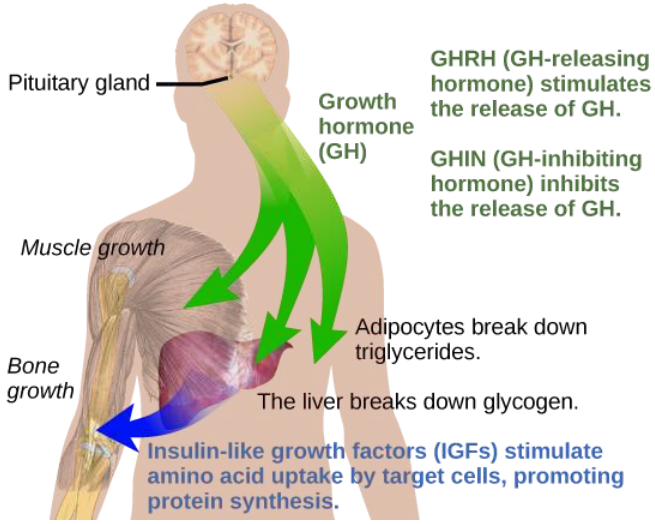


Figure 8.4.7: Growth hormone directly accelerates the rate of protein synthesis in skeletal muscle and bones. Insulin-like growth factor 1 (IGF-1) is activated by growth hormone and also allows formation of new proteins in muscle cells and bone. (credit: modification of work by Mikael Häggström)

A balanced production of growth hormone is critical for proper development. Underproduction of GH in adults does not appear to cause any abnormalities, but in children it can result in pituitary dwarfism, in which growth is reduced. Pituitary dwarfism is characterized by symmetric body formation. In some cases, individuals are under 30 inches in height. Oversecretion of growth hormone can lead to gigantism in children, causing excessive growth. In some documented cases, individuals can reach heights of over eight feet. In adults, excessive GH can lead to acromegaly, a condition in which there is enlargement of bones in the face, hands, and feet that are still capable of growth.

Hormonal Regulation of Stress

When a threat or danger is perceived, the body responds by releasing hormones that will ready it for the “fight-or-flight” response. The effects of this response are familiar to anyone who has been in a stressful situation: increased heart rate, dry mouth, and hair standing up.

Evolution Connection: Fight-or-Flight Response

Interactions of the endocrine hormones have evolved to ensure the body’s internal environment remains stable. Stressors are stimuli that disrupt homeostasis. The sympathetic division of the vertebrate autonomic nervous system has evolved the fight-or-flight response to counter stress-induced disruptions of homeostasis. In the initial alarm phase, the sympathetic nervous system stimulates an increase in energy levels through increased blood glucose levels. This prepares the body for physical activity that may be required to respond to stress: to either fight for survival or to flee from danger.

However, some stresses, such as illness or injury, can last for a long time. Glycogen reserves, which provide energy in the short-term response to stress, are exhausted after several hours and cannot meet long-term energy needs. If glycogen reserves were the only energy source available, neural functioning could not be maintained once the reserves became depleted due to the nervous system’s high requirement for glucose. In this situation, the body has evolved a response to counter long-term stress through the actions of the glucocorticoids, which ensure that long-term energy requirements can be met. The glucocorticoids mobilize lipid and protein reserves, stimulate gluconeogenesis, conserve glucose for use by neural tissue, and stimulate the conservation of salts and water. The mechanisms to maintain homeostasis that are described here are those observed in the human body. However, the fight-or-flight response exists in some form in all vertebrates.

The sympathetic nervous system regulates the stress response via the hypothalamus. Stressful stimuli cause the hypothalamus to signal the adrenal medulla (which mediates short-term stress responses) via nerve impulses, and the adrenal cortex, which

mediates long-term stress responses, via the hormone adrenocorticotropic hormone (ACTH), which is produced by the anterior pituitary.

Short-term Stress Response

When presented with a stressful situation, the body responds by calling for the release of hormones that provide a burst of energy. The hormones epinephrine (also known as adrenaline) and norepinephrine (also known as noradrenaline) are released by the adrenal medulla. How do these hormones provide a burst of energy? Epinephrine and norepinephrine increase blood glucose levels by stimulating the liver and skeletal muscles to break down glycogen and by stimulating glucose release by liver cells. Additionally, these hormones increase oxygen availability to cells by increasing the heart rate and dilating the bronchioles. The hormones also prioritize body function by increasing blood supply to essential organs such as the heart, brain, and skeletal muscles, while restricting blood flow to organs not in immediate need, such as the skin, digestive system, and kidneys. Epinephrine and norepinephrine are collectively called catecholamines.

Link to Learning



Watch this Discovery Channel animation describing the flight-or-flight response.

Long-term Stress Response

Long-term stress response differs from short-term stress response. The body cannot sustain the bursts of energy mediated by epinephrine and norepinephrine for long times. Instead, other hormones come into play. In a long-term stress response, the hypothalamus triggers the release of ACTH from the anterior pituitary gland. The adrenal cortex is stimulated by ACTH to release steroid hormones called corticosteroids. Corticosteroids turn on transcription of certain genes in the nuclei of target cells. They change enzyme concentrations in the cytoplasm and affect cellular metabolism. There are two main corticosteroids: glucocorticoids such as cortisol, and mineralocorticoids such as aldosterone. These hormones target the breakdown of fat into fatty acids in the adipose tissue. The fatty acids are released into the bloodstream for other tissues to use for ATP production. The glucocorticoids primarily affect glucose metabolism by stimulating glucose synthesis. Glucocorticoids also have anti-inflammatory properties through inhibition of the immune system. For example, cortisone is used as an anti-inflammatory medication; however, it cannot be used long term as it increases susceptibility to disease due to its immune-suppressing effects.

Mineralocorticoids function to regulate ion and water balance of the body. The hormone aldosterone stimulates the reabsorption of water and sodium ions in the kidney, which results in increased blood pressure and volume.

Hypersecretion of glucocorticoids can cause a condition known as Cushing's disease, characterized by a shifting of fat storage areas of the body. This can cause the accumulation of adipose tissue in the face and neck, and excessive glucose in the blood.

Hyposecretion of the corticosteroids can cause Addison's disease, which may result in bronzing of the skin, hypoglycemia, and low electrolyte levels in the blood.

Summary

Water levels in the body are controlled by antidiuretic hormone (ADH), which is produced in the hypothalamus and triggers the reabsorption of water by the kidneys. Underproduction of ADH can cause diabetes insipidus. Aldosterone, a hormone produced by the adrenal cortex of the kidneys, enhances Na^+ reabsorption from the extracellular fluids and subsequent water reabsorption by diffusion. The renin-angiotensin-aldosterone system is one way that aldosterone release is controlled.

The reproductive system is controlled by the gonadotropins follicle-stimulating hormone (FSH) and luteinizing hormone (LH), which are produced by the pituitary gland. Gonadotropin release is controlled by the hypothalamic hormone gonadotropin-releasing hormone (GnRH). FSH stimulates the maturation of sperm cells in males and is inhibited by the hormone inhibin, while LH stimulates the production of the androgen testosterone. FSH stimulates egg maturation in females, while LH stimulates the production of estrogens and progesterone. Estrogens are a group of steroid hormones produced by the ovaries that trigger the development of secondary sex characteristics in females as well as control the maturation of the ova. In females, the pituitary also produces prolactin, which stimulates milk production after childbirth, and oxytocin, which stimulates uterine contraction during childbirth and milk let-down during suckling.

Insulin is produced by the pancreas in response to rising blood glucose levels and allows cells to utilize blood glucose and store excess glucose for later use. Diabetes mellitus is caused by reduced insulin activity and causes high blood glucose levels, or hyperglycemia. Glucagon is released by the pancreas in response to low blood glucose levels and stimulates the breakdown of glycogen into glucose, which can be used by the body. The body's basal metabolic rate is controlled by the thyroid hormones thyroxine (T_4) and triiodothyronine (T_3). The anterior pituitary produces thyroid stimulating hormone (TSH), which controls the release of T_3 and T_4 from the thyroid gland. Iodine is necessary in the production of thyroid hormone, and the lack of iodine can lead to a condition called goiter.

Parathyroid hormone (PTH) is produced by the parathyroid glands in response to low blood Ca^{2+} levels. The parafollicular cells of the thyroid produce calcitonin, which reduces blood Ca^{2+} levels. Growth hormone (GH) is produced by the anterior pituitary and controls the growth rate of muscle and bone. GH action is indirectly mediated by insulin-like growth factors (IGFs). Short-term stress causes the hypothalamus to trigger the adrenal medulla to release epinephrine and norepinephrine, which trigger the fight or flight response. Long-term stress causes the hypothalamus to trigger the anterior pituitary to release adrenocorticotropic hormone (ACTH), which causes the release of corticosteroids, glucocorticoids, and mineralocorticoids, from the adrenal cortex.

Glossary

acromegaly
: condition caused by overproduction of GH in adults

Addison's disease
: disorder caused by the hyposecretion of corticosteroids

adrenocorticotropic hormone (ACTH)
: hormone released by the anterior pituitary, which stimulates the adrenal cortex to release corticosteroids during the long-term stress response

aldosterone
: steroid hormone produced by the adrenal cortex that stimulates the reabsorption of Na^+ from extracellular fluids and secretion of K^+.

androgen
: male sex hormone such as testosterone

antidiuretic hormone (ADH)

hormone produced by the hypothalamus and released by the posterior pituitary that increases water reabsorption by the kidneys

calcitonin
hormone produced by the parafollicular cells of the thyroid gland that functions to lower blood Ca^{2+} levels and promote bone growth

corticosteroid
hormone released by the adrenal cortex in response to long-term stress

cortisol
glucocorticoid produced in response to stress

Cushing's disease
disorder caused by the hypersecretion of glucocorticoids

diabetes insipidus
disorder caused by underproduction of ADH

diabetes mellitus
disorder caused by low levels of insulin activity

diabetogenic effect
effect of GH that causes blood glucose levels to rise similar to diabetes mellitus

epinephrine
hormone released by the adrenal medulla in response to a short term stress

estrogens
- a group of steroid hormones, including estradiol and several others, that are produced by the ovaries and elicit secondary sex characteristics in females as well as control the maturation of the ova

follicle-stimulating hormone (FSH)
hormone produced by the anterior pituitary that stimulates gamete production

gigantism
condition caused by overproduction of GH in children

glucagon
hormone produced by the alpha cells of the pancreas in response to low blood sugar; functions to raise blood sugar levels

glucocorticoid
corticosteroid that affects glucose metabolism

gluconeogenesis
synthesis of glucose from amino acids

glucose-sparing effect
effect of GH that causes tissues to use fatty acids instead of glucose as an energy source

glycogenolysis
breakdown of glycogen into glucose

goiter
enlargement of the thyroid gland caused by insufficient dietary iodine levels

gonadotropin
hormone that regulates the gonads, including FSH and LH

growth hormone (GH)
hormone produced by the anterior pituitary that promotes protein synthesis and body growth

growth hormone-inhibiting hormone (GHIH)
hormone produced by the hypothalamus that inhibits growth hormone production, also called somatostatin

growth hormone-releasing hormone (GHRH)
hormone released by the hypothalamus that triggers the release of GH

hyperglycemia
high blood sugar level

hyperthyroidism
overactivity of the thyroid gland

hypoglycemia
low blood sugar level

hypothyroidism
underactivity of the thyroid gland

insulin
hormone produced by the beta cells of the pancreas in response to high blood glucose levels; functions to lower blood glucose levels

insulin-like growth factor (IGF)
growth-promoting protein produced by the liver

mineralocorticoid
corticosteroid that affects ion and water balance

norepinephrine
hormone released by the adrenal medulla in response to a short-term stress hormone production by the gonads

osmoreceptor
receptor in the hypothalamus that monitors the concentration of electrolytes in the blood

oxytocin
hormone released by the posterior pituitary to stimulate uterine contractions during childbirth and milk let-down in the mammary glands

parathyroid hormone (PTH)
hormone produced by the parathyroid glands in response to low blood Ca^{2+} levels; functions to raise blood Ca^{2+} levels

pituitary dwarfism
condition caused by underproduction of GH in children

prolactin (PRL)
hormone produced by the anterior pituitary that stimulates milk production

prolactin-inhibiting hormone

hormone produced by the hypothalamus that inhibits the release of prolactin

prolactin-releasing hormone
hormone produced by the hypothalamus that stimulates the release of prolactin

renin
enzyme produced by the juxtaglomerular apparatus of the kidneys that reacts with angiotensinogen to cause the release of aldosterone

thyroglobulin
glycoprotein found in the thyroid that is converted into thyroid hormone

thyroid-stimulating hormone (TSH)
hormone produced by the anterior pituitary that controls the release of T_3 and T_4 from the thyroid gland

thyroxine (tetraiodothyronine, T_4)
thyroid hormone that controls the basal metabolic rate

triiodothyronine (T_3)
thyroid hormone that controls the basal metabolic rate

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8.5: Regulation of Hormone Production

Skills to Develop

- Explain how hormone production is regulated
- Discuss the different stimuli that control hormone levels in the body

Hormone production and release are primarily controlled by negative feedback. In negative feedback systems, a stimulus elicits the release of a substance; once the substance reaches a certain level, it sends a signal that stops further release of the substance. In this way, the concentration of hormones in blood is maintained within a narrow range. For example, the anterior pituitary signals the thyroid to release thyroid hormones. Increasing levels of these hormones in the blood then give feedback to the hypothalamus and anterior pituitary to inhibit further signaling to the thyroid gland, as illustrated in Figure 8.5.1. There are three mechanisms by which endocrine glands are stimulated to synthesize and release hormones: humoral stimuli, hormonal stimuli, and neural stimuli.

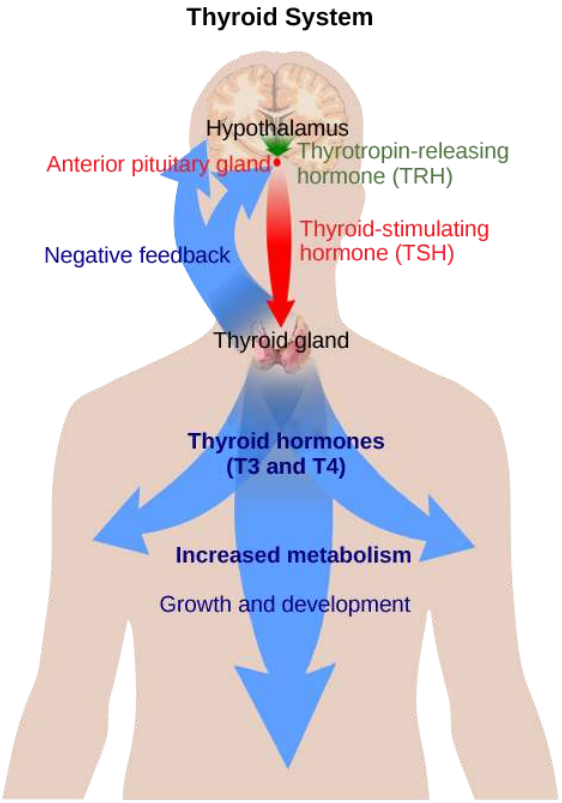


Figure 8.5.1: The anterior pituitary stimulates the thyroid gland to release thyroid hormones T_3 and T_4. Increasing levels of these hormones in the blood results in feedback to the hypothalamus and anterior pituitary to inhibit further signaling to the thyroid gland. (credit: modification of work by Mikael Häggström).

Exercise

Hyperthyroidism is a condition in which the thyroid gland is overactive. Hypothyroidism is a condition in which the thyroid gland is underactive. Which of the conditions are the following two patients most likely to have?

- Patient A has symptoms including weight gain, cold sensitivity, low heart rate and fatigue.
- Patient B has symptoms including weight loss, profuse sweating, increased heart rate and difficulty sleeping.

Answer

Patient A has symptoms associated with decreased metabolism, and may be suffering from hypothyroidism. Patient B has symptoms associated with increased metabolism, and may be suffering from hyperthyroidism.

Humoral Stimuli

The term “humoral” is derived from the term “humor,” which refers to bodily fluids such as blood. A humoral stimulus refers to the control of hormone release in response to changes in extracellular fluids such as blood or the ion concentration in the blood. For example, a rise in blood glucose levels triggers the pancreatic release of insulin. Insulin causes blood glucose levels to drop, which signals the pancreas to stop producing insulin in a negative feedback loop.

Hormonal Stimuli

Hormonal stimuli refers to the release of a hormone in response to another hormone. A number of endocrine glands release hormones when stimulated by hormones released by other endocrine glands. For example, the hypothalamus produces hormones that stimulate the anterior portion of the pituitary gland. The anterior pituitary in turn releases hormones that regulate hormone production by other endocrine glands. The anterior pituitary releases the thyroid-stimulating hormone, which then stimulates the thyroid gland to produce the hormones T_3 and T_4. As blood concentrations of T_3 and T_4 rise, they inhibit both the pituitary and the hypothalamus in a negative feedback loop.

Neural Stimuli

In some cases, the nervous system directly stimulates endocrine glands to release hormones, which is referred to as neural stimuli. Recall that in a short-term stress response, the hormones epinephrine and norepinephrine are important for providing the bursts of energy required for the body to respond. Here, neuronal signaling from the sympathetic nervous system directly stimulates the adrenal medulla to release the hormones epinephrine and norepinephrine in response to stress.

Summary

Hormone levels are primarily controlled through negative feedback, in which rising levels of a hormone inhibit its further release. The three mechanisms of hormonal release are humoral stimuli, hormonal stimuli, and neural stimuli. Humoral stimuli refers to the control of hormonal release in response to changes in extracellular fluid levels or ion levels. Hormonal stimuli refers to the release of hormones in response to hormones released by other endocrine glands. Neural stimuli refers to the release of hormones in response to neural stimulation.

Glossary

hormonal stimuli
: release of a hormone in response to another hormone

humoral stimuli
: control of hormone release in response to changes in extracellular fluids such as blood or the ion concentration in the blood

neural stimuli
: stimulation of endocrine glands by the nervous system

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8.6: Endocrine Glands

Skills to Develop

- Describe the role of different glands in the endocrine system
- Explain how the different glands work together to maintain homeostasis

Both the endocrine and nervous systems use chemical signals to communicate and regulate the body's physiology. The endocrine system releases hormones that act on target cells to regulate development, growth, energy metabolism, reproduction, and many behaviors. The nervous system releases neurotransmitters or neurohormones that regulate neurons, muscle cells, and endocrine cells. Because the neurons can regulate the release of hormones, the nervous and endocrine systems work in a coordinated manner to regulate the body's physiology.

Hypothalamic-Pituitary Axis

The hypothalamus in vertebrates integrates the endocrine and nervous systems. The hypothalamus is an endocrine organ located in the diencephalon of the brain. It receives input from the body and other brain areas and initiates endocrine responses to environmental changes. The hypothalamus acts as an endocrine organ, synthesizing hormones and transporting them along axons to the posterior pituitary gland. It synthesizes and secretes regulatory hormones that control the endocrine cells in the anterior pituitary gland. The hypothalamus contains autonomic centers that control endocrine cells in the adrenal medulla via neuronal control.

The pituitary gland, sometimes called the hypophysis or “master gland” is located at the base of the brain in the sella turcica, a groove of the sphenoid bone of the skull, illustrated in Figure 8.6.1. It is attached to the hypothalamus via a stalk called the pituitary stalk (or infundibulum). The anterior portion of the pituitary gland is regulated by releasing or release-inhibiting hormones produced by the hypothalamus, and the posterior pituitary receives signals via neurosecretory cells to release hormones produced by the hypothalamus. The pituitary has two distinct regions—the anterior pituitary and the posterior pituitary—which between them secrete nine different peptide or protein hormones. The posterior lobe of the pituitary gland contains axons of the hypothalamic neurons.

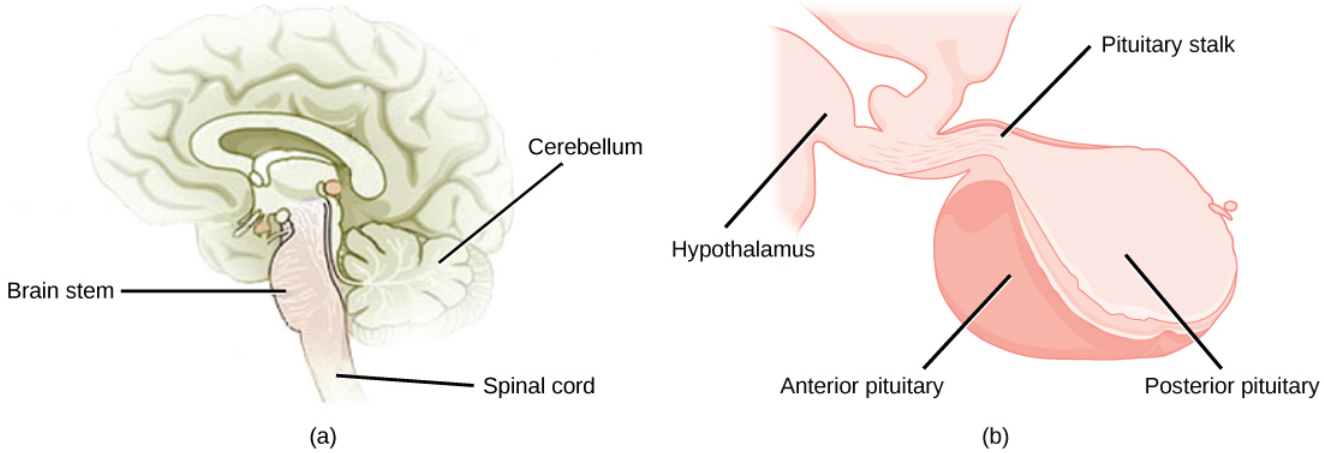


Figure 8.6.1: The pituitary gland is located at (a) the base of the brain and (b) connected to the hypothalamus by the pituitary stalk. (credit a: modification of work by NCI; credit b: modification of work by Gray’s Anatomy)

Anterior Pituitary

The anterior pituitary gland, or adenohypophysis, is surrounded by a capillary network that extends from the hypothalamus, down along the infundibulum, and to the anterior pituitary. This capillary network is a part of the hypophyseal portal system that carries substances from the hypothalamus to the anterior pituitary and hormones from the anterior pituitary into the circulatory system. A portal system carries blood from one capillary network to another; therefore, the hypophyseal portal system allows hormones produced by the hypothalamus to be carried directly to the anterior pituitary without first entering the circulatory system.

The anterior pituitary produces seven hormones: growth hormone (GH), prolactin (PRL), thyroid-stimulating hormone (TSH), melanin-stimulating hormone (MSH), adrenocorticotropic hormone (ACTH), follicle-stimulating hormone (FSH), and luteinizing hormone (LH). Anterior pituitary hormones are sometimes referred to as tropic hormones, because they control the functioning of other organs. While these hormones are produced by the anterior pituitary, their production is controlled by regulatory hormones produced by the hypothalamus. These regulatory hormones can be releasing hormones or inhibiting hormones, causing more or less of the anterior pituitary hormones to be secreted. These travel from the hypothalamus through the hypophyseal portal system to the anterior pituitary where they exert their effect. Negative feedback then regulates how much of these regulatory hormones are released and how much anterior pituitary hormone is secreted.

Posterior Pituitary

The posterior pituitary is significantly different in structure from the anterior pituitary. It is a part of the brain, extending down from the hypothalamus, and contains mostly nerve fibers and neuroglial cells, which support axons that extend from the hypothalamus to the posterior pituitary. The posterior pituitary and the infundibulum together are referred to as the neurohypophysis.

The hormones antidiuretic hormone (ADH), also known as vasopressin, and oxytocin are produced by neurons in the hypothalamus and transported within these axons along the infundibulum to the posterior pituitary. They are released into the circulatory system via neural signaling from the hypothalamus. These hormones are considered to be posterior pituitary hormones, even though they are produced by the hypothalamus, because that is where they are released into the circulatory system. The posterior pituitary itself does not produce hormones, but instead stores hormones produced by the hypothalamus and releases them into the blood stream.

Thyroid Gland

The thyroid gland is located in the neck, just below the larynx and in front of the trachea, as shown in Figure 8.6.2. It is a butterfly-shaped gland with two lobes that are connected by the isthmus. It has a dark red color due to its extensive vascular system. When the thyroid swells due to dysfunction, it can be felt under the skin of the neck.

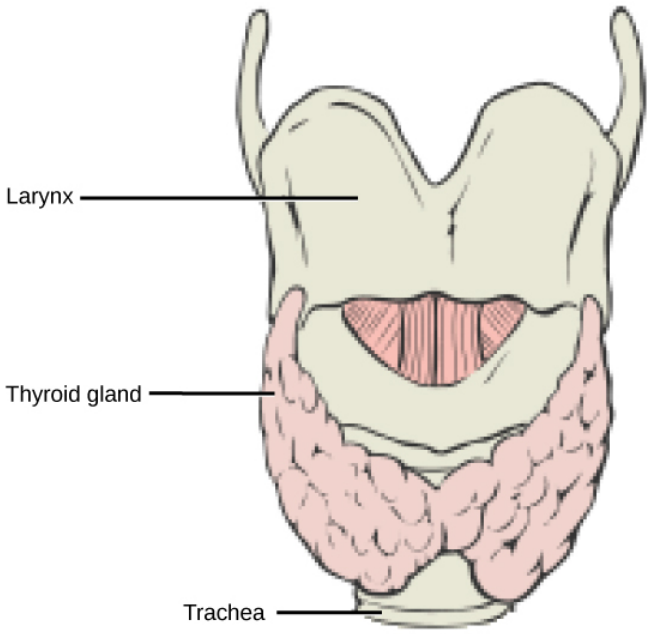


Figure 8.6.2: This illustration shows the location of the thyroid gland.

The thyroid gland is made up of many spherical thyroid follicles, which are lined with a simple cuboidal epithelium. These follicles contain a viscous fluid, called colloid, which stores the glycoprotein thyroglobulin, the precursor to the thyroid hormones. The follicles produce hormones that can be stored in the colloid or released into the surrounding capillary network for transport to the rest of the body via the circulatory system.

Thyroid follicle cells synthesize the hormone thyroxine, which is also known as T_4 because it contains four atoms of iodine, and triiodothyronine, also known as T_3 because it contains three atoms of iodine. Follicle cells are stimulated to release stored T_3 and T_4

by thyroid stimulating hormone (TSH), which is produced by the anterior pituitary. These thyroid hormones increase the rates of mitochondrial ATP production.

A third hormone, calcitonin, is produced by parafollicular cells of the thyroid either releasing hormones or inhibiting hormones. Calcitonin release is not controlled by TSH, but instead is released when calcium ion concentrations in the blood rise. Calcitonin functions to help regulate calcium concentrations in body fluids. It acts in the bones to inhibit osteoclast activity and in the kidneys to stimulate excretion of calcium. The combination of these two events lowers body fluid levels of calcium.

Parathyroid Glands

Most people have four parathyroid glands; however, the number can vary from two to six. These glands are located on the posterior surface of the thyroid gland, as shown in Figure 8.6.3. Normally, there is a superior gland and an inferior gland associated with each of the thyroid's two lobes. Each parathyroid gland is covered by connective tissue and contains many secretory cells that are associated with a capillary network.

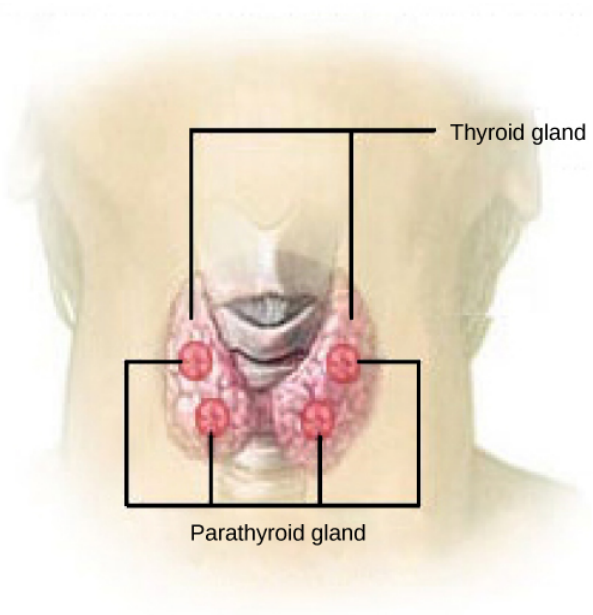


Figure 8.6.3: The parathyroid glands are located on the posterior of the thyroid gland. (credit: modification of work by NCI)

The parathyroid glands produce parathyroid hormone (PTH). PTH increases blood calcium concentrations when calcium ion levels fall below normal. PTH (1) enhances reabsorption of Ca^{2+} by the kidneys, (2) stimulates osteoclast activity and inhibits osteoblast activity, and (3) it stimulates synthesis and secretion of calcitriol by the kidneys, which enhances Ca^{2+} absorption by the digestive system. PTH is produced by chief cells of the parathyroid. PTH and calcitonin work in opposition to one another to maintain homeostatic Ca^{2+} levels in body fluids. Another type of cells, oxyphil cells, exist in the parathyroid but their function is not known. These hormones encourage bone growth, muscle mass, and blood cell formation in children and women.

Adrenal Glands

The adrenal glands are associated with the kidneys; one gland is located on top of each kidney as illustrated in Figure 8.6.4. The adrenal glands consist of an outer adrenal cortex and an inner adrenal medulla. These regions secrete different hormones.

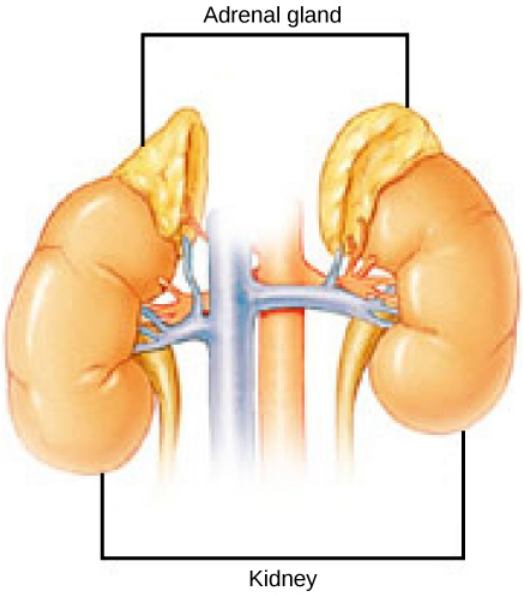


Figure 8.6.4: The location of the adrenal glands on top of the kidneys is shown. (credit: modification of work by NCI)

Adrenal Cortex

The adrenal cortex is made up of layers of epithelial cells and associated capillary networks. These layers form three distinct regions: an outer zona glomerulosa that produces mineralocorticoids, a middle zona fasciculata that produces glucocorticoids, and an inner zona reticularis that produces androgens.

The main mineralocorticoid is aldosterone, which regulates the concentration of Na^+ ions in urine, sweat, pancreas, and saliva. Aldosterone release from the adrenal cortex is stimulated by a decrease in blood concentrations of sodium ions, blood volume, or blood pressure, or by an increase in blood potassium levels.

The three main glucocorticoids are cortisol, corticosterone, and cortisone. The glucocorticoids stimulate the synthesis of glucose and gluconeogenesis (converting a non-carbohydrate to glucose) by liver cells and they promote the release of fatty acids from adipose tissue. These hormones increase blood glucose levels to maintain levels within a normal range between meals. These hormones are secreted in response to ACTH and levels are regulated by negative feedback.

Androgens are sex hormones that promote masculinity. They are produced in small amounts by the adrenal cortex in both males and females. They do not affect sexual characteristics and may supplement sex hormones released from the gonads.

Adrenal Medulla

The adrenal medulla contains large, irregularly shaped cells that are closely associated with blood vessels. These cells are innervated by preganglionic autonomic nerve fibers from the central nervous system.

The adrenal medulla contains two types of secretory cells: one that produces epinephrine (adrenaline) and another that produces norepinephrine (noradrenaline). Epinephrine is the primary adrenal medulla hormone accounting for 75 to 80 percent of its secretions. Epinephrine and norepinephrine increase heart rate, breathing rate, cardiac muscle contractions, blood pressure, and blood glucose levels. They also accelerate the breakdown of glucose in skeletal muscles and stored fats in adipose tissue.

The release of epinephrine and norepinephrine is stimulated by neural impulses from the sympathetic nervous system. Secretion of these hormones is stimulated by acetylcholine release from preganglionic sympathetic fibers innervating the adrenal medulla. These neural impulses originate from the hypothalamus in response to stress to prepare the body for the fight-or-flight response.

Pancreas

The pancreas, illustrated in Figure 8.6.5, is an elongated organ that is located between the stomach and the proximal portion of the small intestine. It contains both exocrine cells that excrete digestive enzymes and endocrine cells that release hormones. It is sometimes referred to as a heterocrine gland because it has both endocrine and exocrine functions.

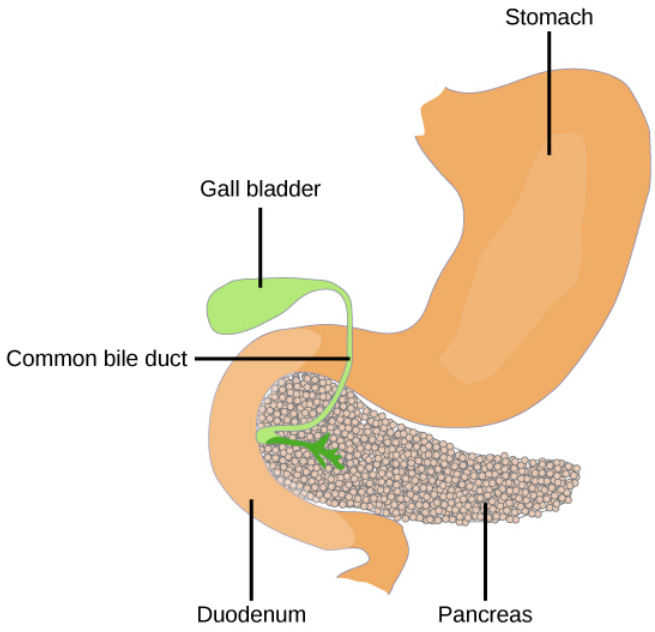


Figure 8.6.5: The pancreas is found underneath the stomach and points toward the spleen. (credit: modification of work by NCI)

The endocrine cells of the pancreas form clusters called pancreatic islets or the islets of Langerhans, as visible in the micrograph shown in Figure 8.6.6. The pancreatic islets contain two primary cell types: alpha cells, which produce the hormone glucagon, and beta cells, which produce the hormone insulin. These hormones regulate blood glucose levels. As blood glucose levels decline, alpha cells release glucagon to raise the blood glucose levels by increasing rates of glycogen breakdown and glucose release by the liver. When blood glucose levels rise, such as after a meal, beta cells release insulin to lower blood glucose levels by increasing the rate of glucose uptake in most body cells, and by increasing glycogen synthesis in skeletal muscles and the liver. Together, glucagon and insulin regulate blood glucose levels.

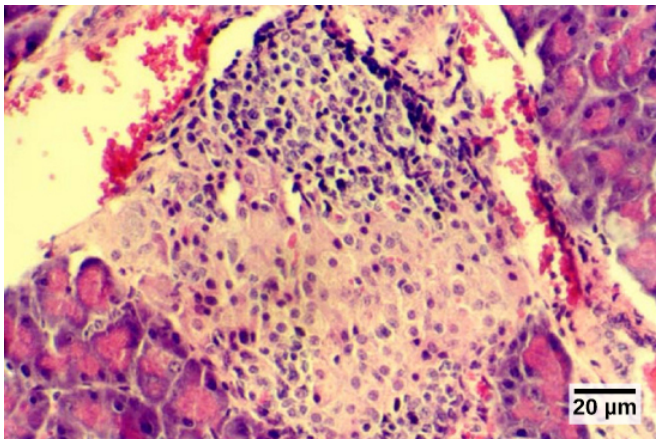


Figure 8.6.6: The islets of Langerhans are clusters of endocrine cells found in the pancreas; they stain lighter than surrounding cells. (credit: modification of work by Muhammad T. Tabiin, Christopher P. White, Grant Morahan, and Bernard E. Tuch; scale-bar data from Matt Russell)

Pineal Gland

The pineal gland produces melatonin. The rate of melatonin production is affected by the photoperiod. Collaterals from the visual pathways innervate the pineal gland. During the day photoperiod, little melatonin is produced; however, melatonin production increases during the dark photoperiod (night). In some mammals, melatonin has an inhibitory affect on reproductive functions by decreasing production and maturation of sperm, oocytes, and reproductive organs. Melatonin is an effective antioxidant, protecting the CNS from free radicals such as nitric oxide and hydrogen peroxide. Lastly, melatonin is involved in biological rhythms, particularly circadian rhythms such as the sleep-wake cycle and eating habits.

Gonads

The gonads—the male testes and female ovaries—produce steroid hormones. The testes produce androgens, testosterone being the most prominent, which allow for the development of secondary sex characteristics and the production of sperm cells. The ovaries produce estradiol and progesterone, which cause secondary sex characteristics and prepare the body for childbirth.

Table 8.6.1**:** Endocrine Glands and their Associated Hormones

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Endocrine Gland	Associated Hormones	Effect
Hypothalamus	releasing and inhibiting hormones	regulate hormone release from pituitary gland; produce oxytocin; produce uterine contractions and milk secretion in females
	antidiuretic hormone (ADH)	water reabsorption from kidneys; vasoconstriction to increase blood pressure
Pituitary (Anterior)	growth hormone (GH)	promotes growth of body tissues, protein synthesis; metabolic functions
	prolactin (PRL)	promotes milk production
	thyroid stimulating hormone (TSH)	stimulates thyroid hormone release
	adrenocorticotropic hormone (ACTH)	stimulates hormone release by adrenal cortex, glucocorticoids
	follicle-stimulating hormone (FSH)	stimulates gamete production (both ova and sperm); secretion of estradiol
	luteinizing hormone (LH)	stimulates androgen production by gonads; ovulation, secretion of progesterone
	melanocyte-stimulating hormone (MSH)	stimulates melanocytes of the skin increasing melanin pigment production.
Pituitary (Posterior)	antidiuretic hormone (ADH)	stimulates water reabsorption by kidneys
	oxytocin	stimulates uterine contractions during childbirth; milk ejection; stimulates ductus deferens and prostate gland contraction during emission
Thyroid	thyroxine, triiodothyronine	stimulate and maintain metabolism; growth and development
	calcitonin	reduces blood Ca^{2+} levels
Parathyroid	parathyroid hormone (PTH)	increases blood Ca^{2+} levels
Adrenal (Cortex)	aldosterone	increases blood Na^{+} levels; increase K^{+} secretion
	cortisol, corticosterone, cortisone	increase blood glucose levels; anti-inflammatory effects
Adrenal (Medulla)	epinephrine, norepinephrine	stimulate fight-or-flight response; increase blood gluclose levels; increase metabolic activities
Pancreas	insulin	reduces blood glucose levels
	glucagon	increases blood glucose levels
Pineal gland	melatonin	regulates some biological rhythms and protects CNS from free radicals
Testes	androgens	regulate, promote, increase or maintain sperm production; male secondary sexual characteristics
Ovaries	estrogen	promotes uterine lining growth; female

Endocrine Gland	Associated Hormones	Effect
		secondary sexual characteristics
	progestins	promote and maintain uterine lining growth

Organs with Secondary Endocrine Functions

There are several organs whose primary functions are non-endocrine but that also possess endocrine functions. These include the heart, kidneys, intestines, thymus, gonads, and adipose tissue.

The heart possesses endocrine cells in the walls of the atria that are specialized cardiac muscle cells. These cells release the hormone atrial natriuretic peptide (ANP) in response to increased blood volume. High blood volume causes the cells to be stretched, resulting in hormone release. ANP acts on the kidneys to reduce the reabsorption of Na^+, causing Na^+ and water to be excreted in the urine. ANP also reduces the amounts of renin released by the kidneys and aldosterone released by the adrenal cortex, further preventing the retention of water. In this way, ANP causes a reduction in blood volume and blood pressure, and reduces the concentration of Na^+ in the blood.

The gastrointestinal tract produces several hormones that aid in digestion. The endocrine cells are located in the mucosa of the GI tract throughout the stomach and small intestine. Some of the hormones produced include gastrin, secretin, and cholecystokinin, which are secreted in the presence of food, and some of which act on other organs such as the pancreas, gallbladder, and liver. They trigger the release of gastric juices, which help to break down and digest food in the GI tract.

While the adrenal glands associated with the kidneys are major endocrine glands, the kidneys themselves also possess endocrine function. Renin is released in response to decreased blood volume or pressure and is part of the renin-angiotensin-aldosterone system that leads to the release of aldosterone. Aldosterone then causes the retention of Na^+ and water, raising blood volume. The kidneys also release calcitriol, which aids in the absorption of Ca^{2+} and phosphate ions. Erythropoietin (EPO) is a protein hormone that triggers the formation of red blood cells in the bone marrow. EPO is released in response to low oxygen levels. Because red blood cells are oxygen carriers, increased production results in greater oxygen delivery throughout the body. EPO has been used by athletes to improve performance, as greater oxygen delivery to muscle cells allows for greater endurance. Because red blood cells increase the viscosity of blood, artificially high levels of EPO can cause severe health risks.

The thymus is found behind the sternum; it is most prominent in infants, becoming smaller in size through adulthood. The thymus produces hormones referred to as thymosins, which contribute to the development of the immune response.

Adipose tissue is a connective tissue found throughout the body. It produces the hormone leptin in response to food intake. Leptin increases the activity of anorexigenic neurons and decreases that of orexigenic neurons, producing a feeling of satiety after eating, thus affecting appetite and reducing the urge for further eating. Leptin is also associated with reproduction. It must be present for GnRH and gonadotropin synthesis to occur. Extremely thin females may enter puberty late; however, if adipose levels increase, more leptin will be produced, improving fertility.

Summary

The pituitary gland is located at the base of the brain and is attached to the hypothalamus by the infundibulum. The anterior pituitary receives products from the hypothalamus by the hypophyseal portal system and produces six hormones. The posterior pituitary is an extension of the brain and releases hormones (antidiuretic hormone and oxytocin) produced by the hypothalamus.

The thyroid gland is located in the neck and is composed of two lobes connected by the isthmus. The thyroid is made up of follicle cells that produce the hormones thyroxine and triiodothyronine. Parafollicular cells of the thyroid produce calcitonin. The parathyroid glands lie on the posterior surface of the thyroid gland and produce parathyroid hormone.

The adrenal glands are located on top of the kidneys and consist of the renal cortex and renal medulla. The adrenal cortex is the outer part of the adrenal gland and produces the corticosteroids, glucocorticoids, and mineralocorticoids. The adrenal medulla is the inner part of the adrenal gland and produces the catecholamines epinephrine and norepinephrine.

The pancreas lies in the abdomen between the stomach and the small intestine. Clusters of endocrine cells in the pancreas form the islets of Langerhans, which are composed of alpha cells that release glucagon and beta cells that release insulin.

Some organs possess endocrine activity as a secondary function but have another primary function. The heart produces the hormone atrial natriuretic peptide, which functions to reduce blood volume, pressure, and Na^+ concentration. The gastrointestinal tract produces various hormones that aid in digestion. The kidneys produce renin, calcitriol, and erythropoietin. Adipose tissue produces leptin, which promotes satiety signals in the brain.

Glossary

adrenal cortex
outer portion of adrenal glands that produces corticosteroids

adrenal gland
endocrine glands associated with the kidneys

adrenal medulla
inner portion of adrenal glands that produces epinephrine and norepinephrine

alpha cell
endocrine cell of the pancreatic islets that produces the hormone glucagon

anterior pituitary
portion of the pituitary gland that produces six hormones; also called adenohypophysis

atrial natriuretic peptide (ANP)
hormone produced by the heart to reduce blood volume, pressure, and Na^+ concentration

beta cell
endocrine cell of the pancreatic islets that produces the hormone insulin

colloid
fluid inside the thyroid gland that contains the glycoprotein thyroglobulin

endocrine gland
gland that secretes hormones into the surrounding interstitial fluid, which then diffuse into blood and are carried to various organs and tissues within the body

erythropoietin (EPO)
hormone produced by the kidneys to stimulate red blood cell production in the bone marrow

hypophyseal portal system
system of blood vessels that carries hormones from the hypothalamus to the anterior pituitary

islets of Langerhans (pancreatic islets)
endocrine cells of the pancreas

isthmus
tissue mass that connects the two lobes of the thyroid gland

leptin
hormone produced by adipose tissue that promotes feelings of satiety and reduces hunger

pancreas
organ located between the stomach and the small intestine that contains exocrine and endocrine cells

parafollicular cell

thyroid cell that produces the hormone calcitonin

parathyroid gland
gland located on the surface of the thyroid that produces parathyroid hormone

pituitary gland
endocrine gland located at the base of the brain composed of an anterior and posterior region; also called hypophysis

pituitary stalk
(also, infundibulum) stalk that connects the pituitary gland to the hypothalamus

posterior pituitary
extension of the brain that releases hormones produced by the hypothalamus; along with the infundibulum, it is also referred to as the neurohypophysis

thymus
gland located behind the sternum that produces thymosin hormones that contribute to the development of the immune system

thyroid gland
endocrine gland located in the neck that produces thyroid hormones thyroxine and triiodothyronine

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8.E: The Endocrine System (Exercises)

37.1: Types of Hormones

There are three basic types of hormones: lipid-derived, amino acid-derived, and peptide. Lipid-derived hormones are structurally similar to cholesterol and include steroid hormones such as estradiol and testosterone. Amino acid-derived hormones are relatively small molecules and include the adrenal hormones epinephrine and norepinephrine. Peptide hormones are polypeptide chains or proteins and include the pituitary hormones, antidiuretic hormone (vasopressin), and oxytocin.

Review Questions

A newly discovered hormone contains four amino acids linked together. Under which chemical class would this hormone be classified?

A. lipid-derived hormone
B. amino acid-derived hormone
C. peptide hormone
D. glycoprotein

Answer

C

Which class of hormones can diffuse through plasma membranes?

A. lipid-derived hormones
B. amino acid-derived hormones
C. peptide hormones
D. glycoprotein hormones

Answer

A

Free Response

Although there are many different hormones in the human body, they can be divided into three classes based on their chemical structure. What are these classes and what is one factor that distinguishes them?

Answer

Although there are many different hormones in the human body, they can be divided into three classes based on their chemical structure: lipid-derived, amino acid-derived, and peptide hormones. One of the key distinguishing features of the lipid-derived hormones is that they can diffuse across plasma membranes whereas the amino acid-derived and peptide hormones cannot.

Where is insulin stored, and why would it be released?

Answer

Secreted peptides such as insulin are stored within vesicles in the cells that synthesize them. They are then released in response to stimuli such as high blood glucose levels in the case of insulin.

37.2: How Hormones Work

Hormones cause cellular changes by binding to receptors on target cells. The number of receptors on a target cell can increase or decrease in response to hormone activity. Hormones can affect cells directly through intracellular hormone receptors or indirectly through plasma membrane hormone receptors. Lipid-derived (soluble) hormones can enter the cell by diffusing across the plasma membrane and binding to DNA to regulate gene transcription.

Review Questions

A new antagonist molecule has been discovered that binds to and blocks plasma membrane receptors. What effect will this antagonist have on testosterone, a steroid hormone?

A. It will block testosterone from binding to its receptor.
B. It will block testosterone from activating cAMP signaling.
C. It will increase testosterone-mediated signaling.
D. It will not affect testosterone-mediated signaling.

Answer

D

What effect will a cAMP inhibitor have on a peptide hormone-mediated signaling pathway?

A. It will prevent the hormone from binding its receptor.
B. It will prevent activation of a G-protein.
C. It will prevent activation of adenylate cyclase.
D. It will prevent activation of protein kinases.

Answer

D

Free Response

Name two important functions of hormone receptors.

Answer

The number of receptors that respond to a hormone can change, resulting in increased or decreased cell sensitivity. The number of receptors can increase in response to rising hormone levels, called up-regulation, making the cell more sensitive to the hormone and allowing for more cellular activity. The number of receptors can also decrease in response to rising hormone levels, called down-regulation, leading to reduced cellular activity.

How can hormones mediate changes?

Answer

Depending on the location of the protein receptor on the target cell and the chemical structure of the hormone, hormones can mediate changes directly by binding to intracellular receptors and modulating gene transcription, or indirectly by binding to cell surface receptors and stimulating signaling pathways.

37.3: Regulation of Body Processes

Hormones have a wide range of effects and modulate many different body processes. The key regulatory processes that will be examined here are those affecting the excretory system, the reproductive system, metabolism, blood calcium concentrations, growth, and the stress response.

Review Questions

Drinking alcoholic beverages causes an increase in urine output. This most likely occurs because alcohol:

A. inhibits ADH release
B. stimulates ADH release
C. inhibits TSH release
D. stimulates TSH release

Answer

A

FSH and LH release from the anterior pituitary is stimulated by _____.

A. TSH
B. GnRH
C. T_3
D. PTH

Answer

B

What hormone is produced by beta cells of the pancreas?

A. T_3
B. glucagon
C. insulin
D. T_4

Answer

C

When blood calcium levels are low, PTH stimulates:

A. excretion of calcium from the kidneys
B. excretion of calcium from the intestines
C. osteoblasts
D. osteoclasts

Answer

D

Free Response

Name and describe a function of one hormone produced by the anterior pituitary and one hormone produced by the posterior pituitary.

Answer

In addition to producing FSH and LH, the anterior pituitary also produces the hormone prolactin (PRL) in females. Prolactin stimulates the production of milk by the mammary glands following childbirth. Prolactin levels are regulated by the hypothalamic hormones prolactin-releasing hormone (PRH) and prolactin-inhibiting hormone (PIH) which is now known to be dopamine. PRH stimulates the release of prolactin and PIH inhibits it. The posterior pituitary releases the

hormone oxytocin, which stimulates contractions during childbirth. The uterine smooth muscles are not very sensitive to oxytocin until late in pregnancy when the number of oxytocin receptors in the uterus peaks. Stretching of tissues in the uterus and vagina stimulates oxytocin release in childbirth. Contractions increase in intensity as blood levels of oxytocin rise until the birth is complete.

Describe one direct action of growth hormone (GH).

Answer

Hormonal regulation is required for the growth and replication of most cells in the body. Growth hormone (GH), produced by the anterior pituitary, accelerates the rate of protein synthesis, particularly in skeletal muscles and bones. Growth hormone has direct and indirect mechanisms of action. The direct actions of GH include: 1) stimulation of fat breakdown (lipolysis) and release into the blood by adipocytes. This results in a switch by most tissues from utilizing glucose as an energy source to utilizing fatty acids. This process is called a glucose-sparing effect. 2) In the liver, GH stimulates glycogen breakdown, which is then released into the blood as glucose. Blood glucose levels increase as most tissues are utilizing fatty acids instead of glucose for their energy needs. The GH mediated increase in blood glucose levels is called a diabetogenic effect because it is similar to the high blood glucose levels seen in diabetes mellitus.

37.4: Regulation of Hormone Production

Hormone production and release are primarily controlled by negative feedback. In negative feedback systems, a stimulus elicits the release of a substance; once the substance reaches a certain level, it sends a signal that stops further release of the substance. In this way, the concentration of hormones in blood is maintained within a narrow range.

Review Questions

A rise in blood glucose levels triggers release of insulin from the pancreas. This mechanism of hormone production is stimulated by:

A. humoral stimuli
B. hormonal stimuli
C. neural stimuli
D. negative stimuli

Answer

A

Which mechanism of hormonal stimulation would be affected if signaling and hormone release from the hypothalamus was blocked?

A. humoral and hormonal stimuli
B. hormonal and neural stimuli
C. neural and humoral stimuli
D. hormonal and negative stimuli

Answer

B

Free Response

How is hormone production and release primarily controlled?

Answer

Hormone production and release are primarily controlled by negative feedback. In negative feedback systems, a stimulus causes the release of a substance whose effects then inhibit further release. In this way, the concentration of hormones in blood is maintained within a narrow range. For example, the anterior pituitary signals the thyroid to release thyroid hormones. Increasing levels of these hormones in the blood then feed back to the hypothalamus and anterior pituitary to inhibit further signaling to the thyroid gland.

Compare and contrast hormonal and humoral stimuli.

Answer

The term humoral is derived from the term humor, which refers to bodily fluids such as blood. Humoral stimuli refer to the control of hormone release in response to changes in extracellular fluids such as blood or the ion concentration in the blood. For example, a rise in blood glucose levels triggers the pancreatic release of insulin. Insulin causes blood glucose levels to drop, which signals the pancreas to stop producing insulin in a negative feedback loop.

Hormonal stimuli refer to the release of a hormone in response to another hormone. A number of endocrine glands release hormones when stimulated by hormones released by other endocrine organs. For example, the hypothalamus produces hormones that stimulate the anterior pituitary. The anterior pituitary in turn releases hormones that regulate hormone production by other endocrine glands. For example, the anterior pituitary releases thyroid-stimulating hormone, which stimulates the thyroid gland to produce the hormones T_3 and T_4. As blood concentrations of T_3 and T_4 rise they inhibit both the pituitary and the hypothalamus in a negative feedback loop.

37.5: Endocrine Glands

Both the endocrine and nervous systems use chemical signals to communicate and regulate the body's physiology. The endocrine system releases hormones that act on target cells to regulate development, growth, energy metabolism, reproduction, and many behaviors. The nervous system releases neurotransmitters or neurohormones that regulate neurons, muscle cells, and endocrine cells.

Review Questions

Which endocrine glands are associated with the kidneys?

A. thyroid glands
B. pituitary glands
C. adrenal glands
D. gonads

Answer

C

Which of the following hormones is not produced by the anterior pituitary?

A. oxytocin
B. growth hormone
C. prolactin
D. thyroid-stimulating hormone

Answer

A

Free Response

What does aldosterone regulate, and how is it stimulated?

Answer

The main mineralocorticoid is aldosterone, which regulates the concentration of ions in urine, sweat, and saliva. Aldosterone release from the adrenal cortex is stimulated by a decrease in blood concentrations of sodium ions, blood volume, or blood pressure, or an increase in blood potassium levels.

The adrenal medulla contains two types of secretory cells, what are they and what are their functions?

Answer

The adrenal medulla contains two types of secretory cells, one that produces epinephrine (adrenaline) and another that produces norepinephrine (noradrenaline). Epinephrine is the primary adrenal medulla hormone accounting for 75–80 percent of its secretions. Epinephrine and norepinephrine increase heart rate, breathing rate, cardiac muscle contractions, and blood glucose levels. They also accelerate the breakdown of glucose in skeletal muscles and stored fats in adipose tissue. The release of epinephrine and norepinephrine is stimulated by neural impulses from the sympathetic nervous system. These neural impulses originate from the hypothalamus in response to stress to prepare the body for the fight-or-flight response.

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CHAPTER OVERVIEW

9: The Respiratory System

9.1: Prelude to the Respiratory System
9.2: Systems of Gas Exchange
9.3: Gas Exchange across Respiratory Surfaces
9.4: Breathing
9.5: Transport of Gases in Human Bodily Fluids

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9.1: Prelude to the Respiratory System

Breathing is an involuntary event. How often a breath is taken and how much air is inhaled or exhaled are tightly regulated by the respiratory center in the brain. Humans, when they aren't exerting themselves, breathe approximately 15 times per minute on average. Canines have a respiratory rate of about 15–30 breaths per minute. With every inhalation, air fills the lungs, and with every exhalation, air rushes back out. That air is doing more than just inflating and deflating the lungs in the chest cavity. The air contains oxygen that crosses the lung tissue, enters the bloodstream, and travels to organs and tissues. Oxygen (O_2) enters the cells where it is used for metabolic reactions that produce ATP, a high-energy compound. At the same time, these reactions release carbon dioxide (CO_2) as a by-product. CO_2 is toxic and must be eliminated. Carbon dioxide exits the cells, enters the bloodstream, travels back to the lungs, and is expired out of the body during exhalation.



Figure 9.1.1: Lungs, which appear as nearly transparent tissue surrounding the heart in this X-ray of a dog (left), are the central organs of the respiratory system. The left lung is smaller than the right lung to accommodate space for the heart. A dog's nose (right) has a slit on the side of each nostril. When tracking a scent, the slits open, blocking the front of the nostrils. This allows the dog to exhale though the now-open area on the side of the nostrils without losing the scent that is being followed. (credit a: modification of work by Geoff Stearns; credit b: modification of work by Cory Zanker)

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9.2: Systems of Gas Exchange

Skills to Develop

- Describe the passage of air from the outside environment to the lungs
- Explain how the lungs are protected from particulate matter

The primary function of the respiratory system is to deliver oxygen to the cells of the body's tissues and remove carbon dioxide, a cell waste product. The main structures of the human respiratory system are the nasal cavity, the trachea, and lungs.

All aerobic organisms require oxygen to carry out their metabolic functions. Along the evolutionary tree, different organisms have devised different means of obtaining oxygen from the surrounding atmosphere. The environment in which the animal lives greatly determines how an animal respires. The complexity of the respiratory system is correlated with the size of the organism. As animal size increases, diffusion distances increase and the ratio of surface area to volume drops. In unicellular organisms, diffusion across the cell membrane is sufficient for supplying oxygen to the cell (Figure 9.2.1). Diffusion is a slow, passive transport process. In order for diffusion to be a feasible means of providing oxygen to the cell, the rate of oxygen uptake must match the rate of diffusion across the membrane. In other words, if the cell were very large or thick, diffusion would not be able to provide oxygen quickly enough to the inside of the cell. Therefore, dependence on diffusion as a means of obtaining oxygen and removing carbon dioxide remains feasible only for small organisms or those with highly-flattened bodies, such as many flatworms (Platyhelminthes). Larger organisms had to evolve specialized respiratory tissues, such as gills, lungs, and respiratory passages accompanied by complex circulatory systems, to transport oxygen throughout their entire body.



Figure 9.2.1: The cell of the unicellular algae *Ventricaria ventricosa* is one of the largest known, reaching one to five centimeters in diameter. Like all single-celled organisms, *V. ventricosa* exchanges gases across the cell membrane.

Direct Diffusion

For small multicellular organisms, diffusion across the outer membrane is sufficient to meet their oxygen needs. Gas exchange by direct diffusion across surface membranes is efficient for organisms less than 1 mm in diameter. In simple organisms, such as cnidarians and flatworms, every cell in the body is close to the external environment. Their cells are kept moist and gases diffuse quickly via direct diffusion. Flatworms are small, literally flat worms, which 'breathe' through diffusion across the outer membrane (Figure 9.2.2). The flat shape of these organisms increases the surface area for diffusion, ensuring that each cell within the body is close to the outer membrane surface and has access to oxygen. If the flatworm had a cylindrical body, then the cells in the center would not be able to get oxygen.



Figure 9.2.2: This flatworm's process of respiration works by diffusion across the outer membrane. (credit: Stephen Childs)

Skin and Gills

Earthworms and amphibians use their skin (integument) as a respiratory organ. A dense network of capillaries lies just below the skin and facilitates gas exchange between the external environment and the circulatory system. The respiratory surface must be kept moist in order for the gases to dissolve and diffuse across cell membranes.

Organisms that live in water need to obtain oxygen from the water. Oxygen dissolves in water but at a lower concentration than in the atmosphere. The atmosphere has roughly 21 percent oxygen. In water, the oxygen concentration is much smaller than that. Fish and many other aquatic organisms have evolved gills to take up the dissolved oxygen from water (Figure 9.2.3). Gills are thin tissue filaments that are highly branched and folded. When water passes over the gills, the dissolved oxygen in water rapidly diffuses across the gills into the bloodstream. The circulatory system can then carry the oxygenated blood to the other parts of the body. In animals that contain coelomic fluid instead of blood, oxygen diffuses across the gill surfaces into the coelomic fluid. Gills are found in mollusks, annelids, and crustaceans.



Figure 9.2.3: This common carp, like many other aquatic organisms, has gills that allow it to obtain oxygen from water. (credit: "Guitardude012"/Wikimedia Commons)

The folded surfaces of the gills provide a large surface area to ensure that the fish gets sufficient oxygen. Diffusion is a process in which material travels from regions of high concentration to low concentration until equilibrium is reached. In this case, blood with a low concentration of oxygen molecules circulates through the gills. The concentration of oxygen molecules in water is higher than the concentration of oxygen molecules in gills. As a result, oxygen molecules diffuse from water (high concentration) to blood (low concentration), as shown in Figure 9.2.4. Similarly, carbon dioxide molecules in the blood diffuse from the blood (high concentration) to water (low concentration).

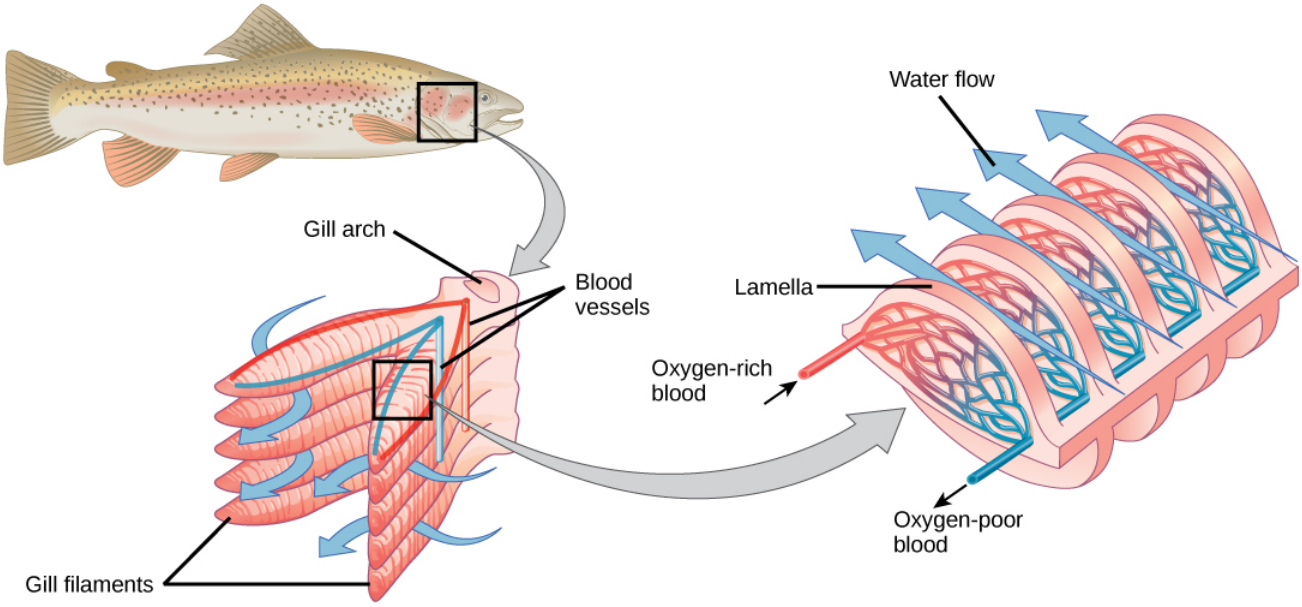


Figure 9.2.4: As water flows over the gills, oxygen is transferred to blood via the veins. (credit "fish": modification of work by Duane Raver, NOAA)

Tracheal Systems

Insect respiration is independent of its circulatory system; therefore, the blood does not play a direct role in oxygen transport. Insects have a highly specialized type of respiratory system called the tracheal system, which consists of a network of small tubes that carries oxygen to the entire body. The tracheal system is the most direct and efficient respiratory system in active animals. The tubes in the tracheal system are made of a polymeric material called chitin.

Insect bodies have openings, called spiracles, along the thorax and abdomen. These openings connect to the tubular network, allowing oxygen to pass into the body (Figure 9.2.5) and regulating the diffusion of CO_2 and water vapor. Air enters and leaves the tracheal system through the spiracles. Some insects can ventilate the tracheal system with body movements.

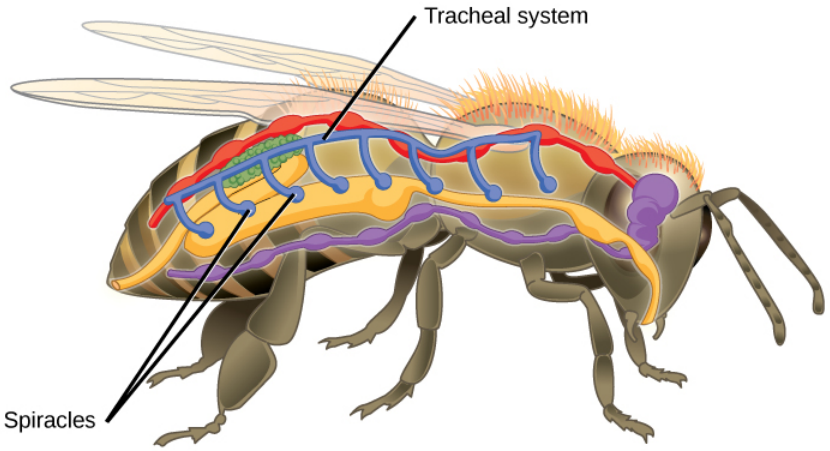


Figure 9.2.5: Insects perform respiration via a tracheal system.

Mammalian Systems

In mammals, pulmonary ventilation occurs via inhalation (breathing). During inhalation, air enters the body through the nasal cavity located just inside the nose (Figure 9.2.6). As air passes through the nasal cavity, the air is warmed to body temperature and humidified. The respiratory tract is coated with mucus to seal the tissues from direct contact with air. Mucus is high in water. As air crosses these surfaces of the mucous membranes, it picks up water. These processes help equilibrate the air to the body conditions, reducing any damage that cold, dry air can cause. Particulate matter that is floating in the air is removed in the nasal passages via mucus and cilia. The processes of warming, humidifying, and removing particles are important protective mechanisms that prevent

damage to the trachea and lungs. Thus, inhalation serves several purposes in addition to bringing oxygen into the respiratory system.

Art Connection

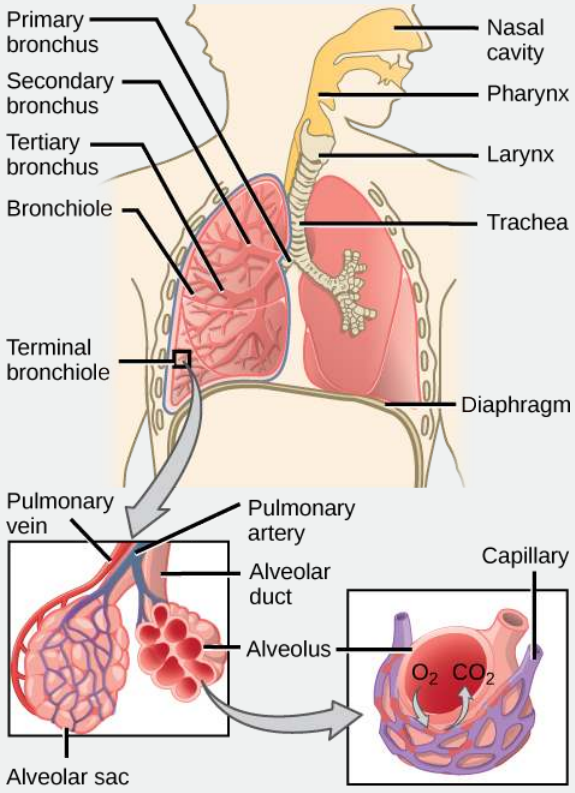


Figure 9.2.6: Air enters the respiratory system through the nasal cavity and pharynx, and then passes through the trachea and into the bronchi, which bring air into the lungs. (credit: modification of work by NCI)

Which of the following statements about the mammalian respiratory system is false?

A. When we breathe in, air travels from the pharynx to the trachea.
B. The bronchioles branch into bronchi.
C. Alveolar ducts connect to alveolar sacs.
D. Gas exchange between the lung and blood takes place in the alveolus.

From the nasal cavity, air passes through the pharynx (throat) and the larynx (voice box), as it makes its way to the trachea (Figure 9.2.6). The main function of the trachea is to funnel the inhaled air to the lungs and the exhaled air back out of the body. The human trachea is a cylinder about 10 to 12 cm long and 2 cm in diameter that sits in front of the esophagus and extends from the larynx into the chest cavity where it divides into the two primary bronchi at the midthorax. It is made of incomplete rings of hyaline cartilage and smooth muscle (Figure 9.2.7). The trachea is lined with mucus-producing goblet cells and ciliated epithelia. The cilia propel foreign particles trapped in the mucus toward the pharynx. The cartilage provides strength and support to the trachea to keep the passage open. The smooth muscle can contract, decreasing the trachea's diameter, which causes expired air to rush upwards from the lungs at a great force. The forced exhalation helps expel mucus when we cough. Smooth muscle can contract or relax, depending on stimuli from the external environment or the body's nervous system.

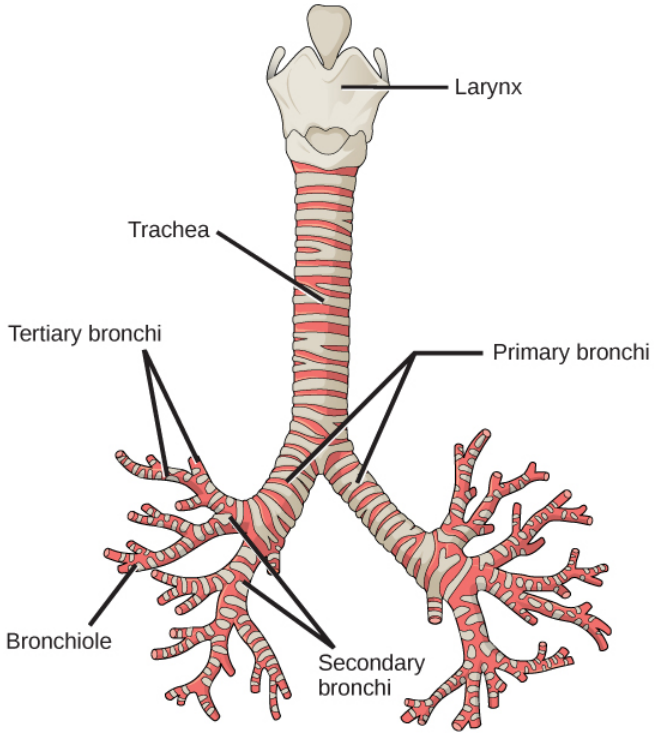


Figure 9.2.7: The trachea and bronchi are made of incomplete rings of cartilage. (credit: modification of work by Gray's Anatomy)

Lungs: Bronchi and Alveoli

The end of the trachea bifurcates (divides) to the right and left lungs. The lungs are not identical. The right lung is larger and contains three lobes, whereas the smaller left lung contains two lobes (Figure 9.2.8). The muscular diaphragm, which facilitates breathing, is inferior to (below) the lungs and marks the end of the thoracic cavity.

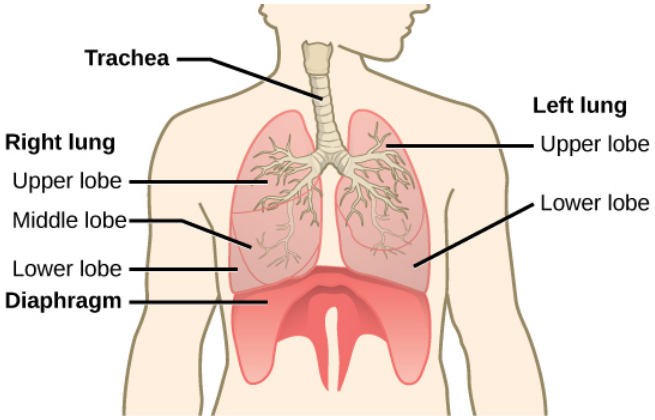


Figure 9.2.8: The trachea bifurcates into the right and left bronchi in the lungs. The right lung is made of three lobes and is larger. To accommodate the heart, the left lung is smaller and has only two lobes.

In the lungs, air is diverted into smaller and smaller passages, or bronchi. Air enters the lungs through the two primary (main) bronchi (singular: bronchus). Each bronchus divides into secondary bronchi, then into tertiary bronchi, which in turn divide, creating smaller and smaller diameter bronchioles as they split and spread through the lung. Like the trachea, the bronchi are made of cartilage and smooth muscle. At the bronchioles, the cartilage is replaced with elastic fibers. Bronchi are innervated by nerves of both the parasympathetic and sympathetic nervous systems that control muscle contraction (parasympathetic) or relaxation (sympathetic) in the bronchi and bronchioles, depending on the nervous system's cues. In humans, bronchioles with a diameter smaller than 0.5 mm are the respiratory bronchioles. They lack cartilage and therefore rely on inhaled air to support their shape. As the passageways decrease in diameter, the relative amount of smooth muscle increases.

The terminal bronchioles subdivide into microscopic branches called respiratory bronchioles. The respiratory bronchioles subdivide into several alveolar ducts. Numerous alveoli and alveolar sacs surround the alveolar ducts. The alveolar sacs resemble bunches of grapes tethered to the end of the bronchioles (Figure 9.2.9). In the acinar region, the alveolar ducts are attached to the end of each bronchiole. At the end of each duct are approximately 100 alveolar sacs, each containing 20 to 30 alveoli that are 200 to 300 microns in diameter. Gas exchange occurs only in alveoli. Alveoli are made of thin-walled parenchymal cells, typically one-cell thick, that look like tiny bubbles within the sacs. Alveoli are in direct contact with capillaries (one-cell thick) of the circulatory system. Such intimate contact ensures that oxygen will diffuse from alveoli into the blood and be distributed to the cells of the body. In addition, the carbon dioxide that was produced by cells as a waste product will diffuse from the blood into alveoli to be exhaled. The anatomical arrangement of capillaries and alveoli emphasizes the structural and functional relationship of the respiratory and circulatory systems. Because there are so many alveoli (~300 million per lung) within each alveolar sac and so many sacs at the end of each alveolar duct, the lungs have a sponge-like consistency. This organization produces a very large surface area that is available for gas exchange. The surface area of alveoli in the lungs is approximately 75 m^2. This large surface area, combined with the thin-walled nature of the alveolar parenchymal cells, allows gases to easily diffuse across the cells.

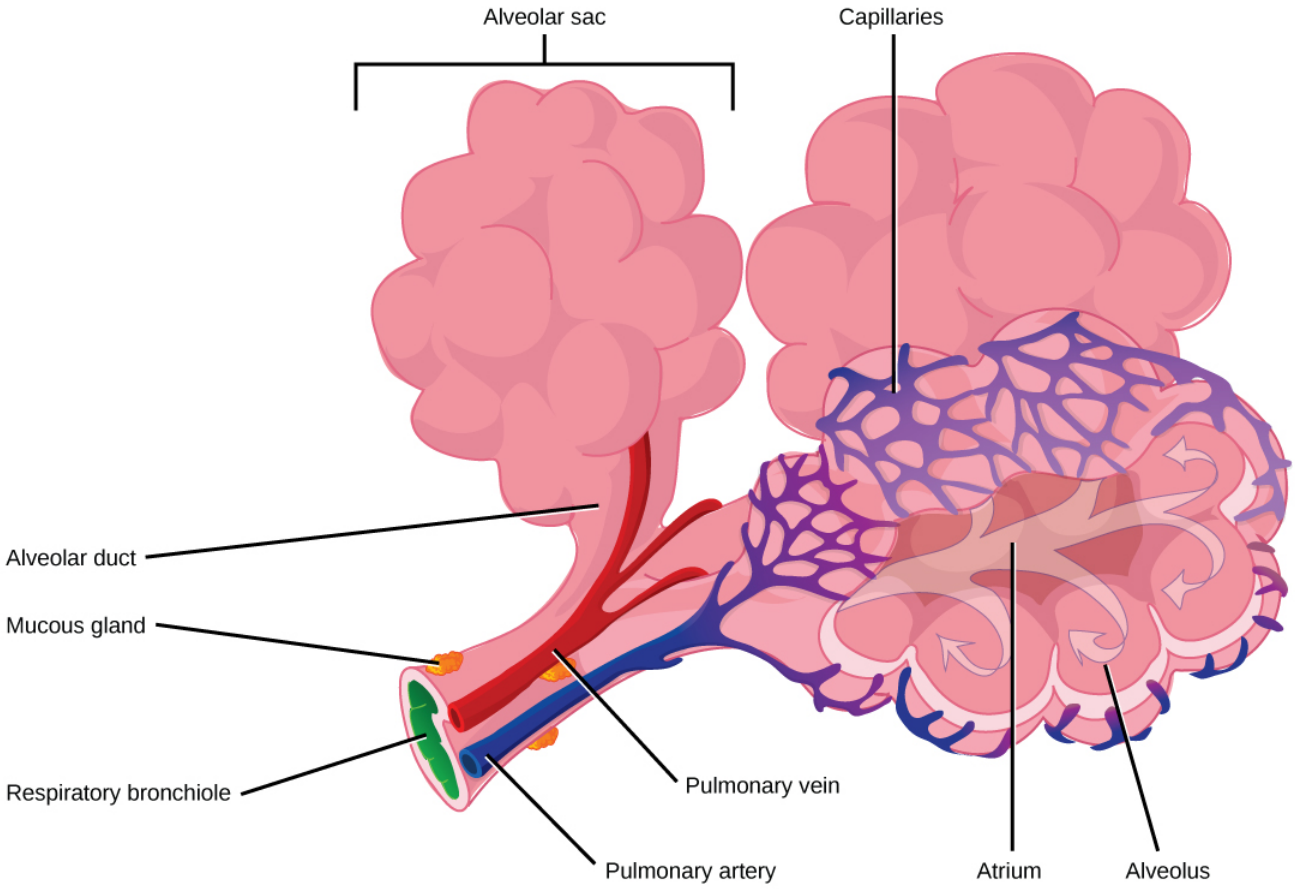
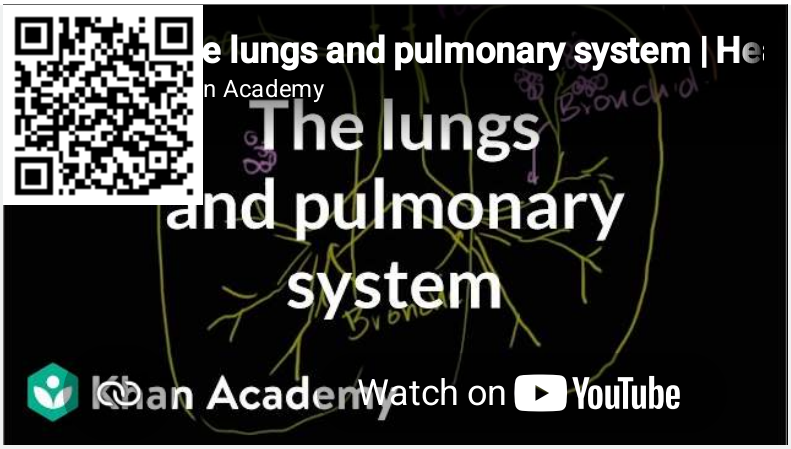


Figure 9.2.9: Terminal bronchioles are connected by respiratory bronchioles to alveolar ducts and alveolar sacs. Each alveolar sac contains 20 to 30 spherical alveoli and has the appearance of a bunch of grapes. Air flows into the atrium of the alveolar sac, then circulates into alveoli where gas exchange occurs with the capillaries. Mucous glands secrete mucous into the airways, keeping them moist and flexible. (credit: modification of work by Mariana Ruiz Villareal)

Link to Learning



Watch the following video to review the respiratory system.

Protective Mechanisms

The air that organisms breathe contains particulate matter such as dust, dirt, viral particles, and bacteria that can damage the lungs or trigger allergic immune responses. The respiratory system contains several protective mechanisms to avoid problems or tissue damage. In the nasal cavity, hairs and mucus trap small particles, viruses, bacteria, dust, and dirt to prevent their entry.

If particulates do make it beyond the nose, or enter through the mouth, the bronchi and bronchioles of the lungs also contain several protective devices. The lungs produce mucus—a sticky substance made of mucin, a complex glycoprotein, as well as salts and water—that traps particulates. The bronchi and bronchioles contain cilia, small hair-like projections that line the walls of the bronchi and bronchioles (Figure 9.2.10). These cilia beat in unison and move mucus and particles out of the bronchi and bronchioles back up to the throat where it is swallowed and eliminated via the esophagus.

In humans, for example, tar and other substances in cigarette smoke destroy or paralyze the cilia, making the removal of particles more difficult. In addition, smoking causes the lungs to produce more mucus, which the damaged cilia are not able to move. This causes a persistent cough, as the lungs try to rid themselves of particulate matter, and makes smokers more susceptible to respiratory ailments.

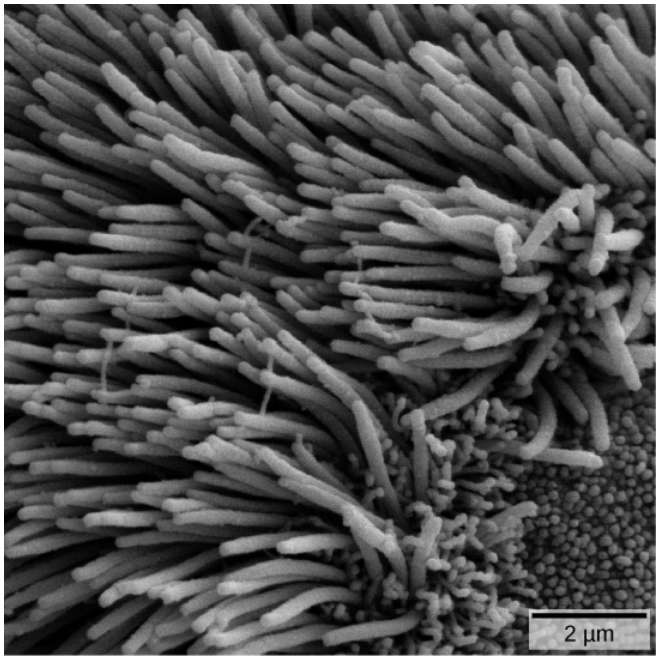


Figure 9.2.10: The bronchi and bronchioles contain cilia that help move mucus and other particles out of the lungs. (credit: Louisa Howard, modification of work by Dartmouth Electron Microscope Facility)

Summary

Animal respiratory systems are designed to facilitate gas exchange. In mammals, air is warmed and humidified in the nasal cavity. Air then travels down the pharynx, through the trachea, and into the lungs. In the lungs, air passes through the branching bronchi, reaching the respiratory bronchioles, which house the first site of gas exchange. The respiratory bronchioles open into the alveolar ducts, alveolar sacs, and alveoli. Because there are so many alveoli and alveolar sacs in the lung, the surface area for gas exchange is very large. Several protective mechanisms are in place to prevent damage or infection. These include the hair and mucus in the nasal cavity that trap dust, dirt, and other particulate matter before they can enter the system. In the lungs, particles are trapped in a mucus layer and transported via cilia up to the esophageal opening at the top of the trachea to be swallowed.

Art Connections

Figure 9.2.6: Which of the following statements about the mammalian respiratory system is false?

A. When we breathe in, air travels from the pharynx to the trachea.
B. The bronchioles branch into bronchi.
C. Alveolar ducts connect to alveolar sacs.
D. Gas exchange between the lung and blood takes place in the alveolus.

Answer

B

Glossary

alveolar duct
duct that extends from the terminal bronchiole to the alveolar sac

alveolar sac
structure consisting of two or more alveoli that share a common opening

alveolus
(plural: alveoli) (also, air sac) terminal region of the lung where gas exchange occurs

bronchus
(plural: bronchi) smaller branch of cartilaginous tissue that stems off of the trachea; air is funneled through the bronchi to the region where gas exchange occurs in alveoli

bronchiole
airway that extends from the main tertiary bronchi to the alveolar sac

diaphragm
domed-shaped skeletal muscle located under lungs that separates the thoracic cavity from the abdominal cavity

larynx
voice box, a short passageway connecting the pharynx and the trachea

mucin
complex glycoprotein found in mucus

mucus
sticky protein-containing fluid secretion in the lung that traps particulate matter to be expelled from the body

nasal cavity
opening of the respiratory system to the outside environment

particulate matter

small particle such as dust, dirt, viral particles, and bacteria that are in the air

pharynx

throat; a tube that starts in the internal nares and runs partway down the neck, where it opens into the esophagus and the larynx

primary bronchus

(also, main bronchus) region of the airway within the lung that attaches to the trachea and bifurcates to each lung where it branches into secondary bronchi

respiratory bronchiole

terminal portion of the bronchiole tree that is attached to the terminal bronchioles and alveoli ducts, alveolar sacs, and alveoli

terminal bronchiole

region of bronchiole that attaches to the respiratory bronchioles

trachea

cartilaginous tube that transports air from the larynx to the primary bronchi

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9.3: Gas Exchange across Respiratory Surfaces

Skills to Develop

- Name and describe lung volumes and capacities
- Understand how gas pressure influences how gases move into and out of the body

The structure of the lung maximizes its surface area to increase gas diffusion. Because of the enormous number of alveoli (approximately 300 million in each human lung), the surface area of the lung is very large (75 m^2). Having such a large surface area increases the amount of gas that can diffuse into and out of the lungs.

Basic Principles of Gas Exchange

Gas exchange during respiration occurs primarily through diffusion. Diffusion is a process in which transport is driven by a concentration gradient. Gas molecules move from a region of high concentration to a region of low concentration. Blood that is low in oxygen concentration and high in carbon dioxide concentration undergoes gas exchange with air in the lungs. The air in the lungs has a higher concentration of oxygen than that of oxygen-depleted blood and a lower concentration of carbon dioxide. This concentration gradient allows for gas exchange during respiration.

Partial pressure is a measure of the concentration of the individual components in a mixture of gases. The total pressure exerted by the mixture is the sum of the partial pressures of the components in the mixture. The rate of diffusion of a gas is proportional to its partial pressure within the total gas mixture. This concept is discussed further in detail below.

Lung Volumes and Capacities

Different animals have different lung capacities based on their activities. Cheetahs have evolved a much higher lung capacity than humans; it helps provide oxygen to all the muscles in the body and allows them to run very fast. Elephants also have a high lung capacity. In this case, it is not because they run fast but because they have a large body and must be able to take up oxygen in accordance with their body size.

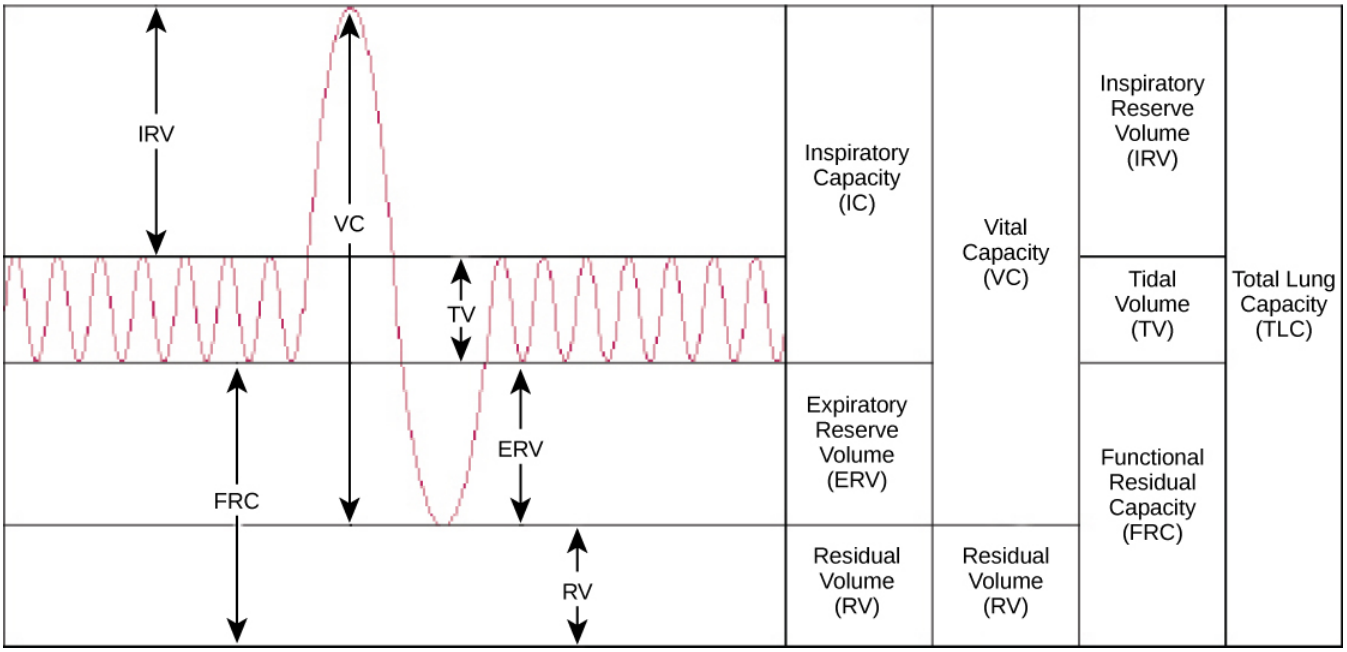


Figure 9.3.1: Human lung volumes and capacities are shown. The total lung capacity of the adult male is six liters. Tidal volume is the volume of air inhaled in a single, normal breath. Inspiratory capacity is the amount of air taken in during a deep breath, and residual volume is the amount of air left in the lungs after forceful respiration.

Human lung size is determined by genetics, gender, and height. At maximal capacity, an average lung can hold almost six liters of air, but lungs do not usually operate at maximal capacity. Air in the lungs is measured in terms of lung volumes and lung capacities

(Figure 9.3.1 and Table 9.3.1). Volume measures the amount of air for one function (such as inhalation or exhalation). Capacity is any two or more volumes (for example, how much can be inhaled from the end of a maximal exhalation).

Table 9.3.1**:** Lung Volumes and Capacities (Avg Adult Male)

Volume/Capacity	Definition	Volume (liters)	Equations
Tidal volume (TV)	Amount of air inhaled during a normal breath	0.5	-
Expiratory reserve volume (ERV)	Amount of air that can be exhaled after a normal exhalation	1.2	-
Inspiratory reserve volume (IRV)	Amount of air that can be further inhaled after a normal inhalation	3.1	-
Residual volume (RV)	Air left in the lungs after a forced exhalation	1.2	-
Vital capacity (VC)	Maximum amount of air that can be moved in or out of the lungs in a single respiratory cycle	4.8	ERV+TV+IRV
Inspiratory capacity (IC)	Volume of air that can be inhaled in addition to a normal exhalation	3.6	TV+IRV
Functional residual capacity (FRC)	Volume of air remaining after a normal exhalation	2.4	ERV+RV
Total lung capacity (TLC)	Total volume of air in the lungs after a maximal inspiration	6.0	RV+ERV+TV+IRV
Forced expiratory volume (FEV1)	How much air can be forced out of the lungs over a specific time period, usually one second	~4.1 to 5.5	-

The volume in the lung can be divided into four units: tidal volume, expiratory reserve volume, inspiratory reserve volume, and residual volume. Tidal volume (TV) measures the amount of air that is inspired and expired during a normal breath. On average, this volume is around one-half liter, which is a little less than the capacity of a 20-ounce drink bottle. The expiratory reserve volume (ERV) is the additional amount of air that can be exhaled after a normal exhalation. It is the reserve amount that can be exhaled beyond what is normal. Conversely, the inspiratory reserve volume (IRV) is the additional amount of air that can be inhaled after a normal inhalation. The residual volume (RV) is the amount of air that is left after expiratory reserve volume is exhaled. The lungs are never completely empty: There is always some air left in the lungs after a maximal exhalation. If this residual volume did not exist and the lungs emptied completely, the lung tissues would stick together and the energy necessary to re-inflate the lung could be too great to overcome. Therefore, there is always some air remaining in the lungs. Residual volume is also important for preventing large fluctuations in respiratory gases (O_2 and CO_2). The residual volume is the only lung volume that cannot be measured directly because it is impossible to completely empty the lung of air. This volume can only be calculated rather than measured.

Capacities are measurements of two or more volumes. The vital capacity (VC) measures the maximum amount of air that can be inhaled or exhaled during a respiratory cycle. It is the sum of the expiratory reserve volume, tidal volume, and inspiratory reserve volume. The inspiratory capacity (IC) is the amount of air that can be inhaled after the end of a normal expiration. It is, therefore, the sum of the tidal volume and inspiratory reserve volume. The functional residual capacity (FRC) includes the expiratory reserve

volume and the residual volume. The FRC measures the amount of additional air that can be exhaled after a normal exhalation. Lastly, the total lung capacity (TLC) is a measurement of the total amount of air that the lung can hold. It is the sum of the residual volume, expiratory reserve volume, tidal volume, and inspiratory reserve volume.

Lung volumes are measured by a technique called spirometry. An important measurement taken during spirometry is the forced expiratory volume (FEV), which measures how much air can be forced out of the lung over a specific period, usually one second (FEV1). In addition, the forced vital capacity (FVC), which is the total amount of air that can be forcibly exhaled, is measured. The ratio of these values (FEV1/FVC ratio) is used to diagnose lung diseases including asthma, emphysema, and fibrosis. If the FEV1/FVC ratio is high, the lungs are not compliant (meaning they are stiff and unable to bend properly), and the patient most likely has lung fibrosis. Patients exhale most of the lung volume very quickly. Conversely, when the FEV1/FVC ratio is low, there is resistance in the lung that is characteristic of asthma. In this instance, it is hard for the patient to get the air out of his or her lungs, and it takes a long time to reach the maximal exhalation volume. In either case, breathing is difficult and complications arise.

Career Connection: Respiratory Therapist

Respiratory therapists or respiratory practitioners evaluate and treat patients with lung and cardiovascular diseases. They work as part of a medical team to develop treatment plans for patients. Respiratory therapists may treat premature babies with underdeveloped lungs, patients with chronic conditions such as asthma, or older patients suffering from lung disease such as emphysema and chronic obstructive pulmonary disease (COPD). They may operate advanced equipment such as compressed gas delivery systems, ventilators, blood gas analyzers, and resuscitators. Specialized programs to become a respiratory therapist generally lead to a bachelor's degree with a respiratory therapist specialty. Because of a growing aging population, career opportunities as a respiratory therapist are expected to remain strong.

Gas Pressure and Respiration

The respiratory process can be better understood by examining the properties of gases. Gases move freely, but gas particles are constantly hitting the walls of their vessel, thereby producing gas pressure.

Air is a mixture of gases, primarily nitrogen (N_2; 78.6 percent), oxygen (O_2; 20.9 percent), water vapor (H_2O; 0.5 percent), and carbon dioxide (CO_2; 0.04 percent). Each gas component of that mixture exerts a pressure. The pressure for an individual gas in the mixture is the partial pressure of that gas. Approximately 21 percent of atmospheric gas is oxygen. Carbon dioxide, however, is found in relatively small amounts, 0.04 percent. The partial pressure for oxygen is much greater than that of carbon dioxide. The partial pressure of any gas can be calculated by:

$$\mathrm{P} = (\mathrm{P}_{\mathrm{atm}}) * (\text{percent content in mixture})$$

P_{atm}, the atmospheric pressure, is the sum of all of the partial pressures of the atmospheric gases added together,

$$\mathrm{P}_{\mathrm{atm}} = \mathrm{P}_{\mathrm{N}_2} + \mathrm{P}_{\mathrm{O}_2} + \mathrm{P}_{\mathrm{H}_2\mathrm{O}} + \mathrm{P}_{\mathrm{CO}_2} = 760 \text{ mm Hg}$$

× (percent content in mixture).

The pressure of the atmosphere at sea level is 760 mm Hg. Therefore, the partial pressure of oxygen is:

$$\mathrm{P}_{\mathrm{O}_2} = (760 \text{ mm Hg})(0.21) = 160 \text{ mm Hg}$$

and for carbon dioxide:

$$\mathrm{P}_{\mathrm{CO}_2} = (760 \text{ mm Hg})(0.0004) = 0.3 \text{ mm Hg}$$

At high altitudes, P_{atm} decreases but concentration does not change; the partial pressure decrease is due to the reduction in P_{atm}.

When the air mixture reaches the lung, it has been humidified. The pressure of the water vapor in the lung does not change the pressure of the air, but it must be included in the partial pressure equation. For this calculation, the water pressure (47 mm Hg) is subtracted from the atmospheric pressure:

$$760 \text{ mm Hg} - 47 \text{ mm Hg} = 713 \text{ mm Hg}$$

and the partial pressure of oxygen is:

$$(760 \text{ mm Hg} - 47 \text{ mm Hg})(0.21) = 150 \text{ mm Hg}$$

These pressures determine the gas exchange, or the flow of gas, in the system. Oxygen and carbon dioxide will flow according to their pressure gradient from high to low. Therefore, understanding the partial pressure of each gas will aid in understanding how gases move in the respiratory system.

Gas Exchange across the Alveoli

In the body, oxygen is used by cells of the body's tissues and carbon dioxide is produced as a waste product. The ratio of carbon dioxide production to oxygen consumption is the respiratory quotient (RQ). RQ varies between 0.7 and 1.0. If just glucose were used to fuel the body, the RQ would equal one. One mole of carbon dioxide would be produced for every mole of oxygen consumed. Glucose, however, is not the only fuel for the body. Protein and fat are also used as fuels for the body. Because of this, less carbon dioxide is produced than oxygen is consumed and the RQ is, on average, about 0.7 for fat and about 0.8 for protein.

The RQ is used to calculate the partial pressure of oxygen in the alveolar spaces within the lung, the alveolar P_{O_2}. Above, the partial pressure of oxygen in the lungs was calculated to be 150 mm Hg. However, lungs never fully deflate with an exhalation; therefore, the inspired air mixes with this residual air and lowers the partial pressure of oxygen within the alveoli. This means that there is a lower concentration of oxygen in the lungs than is found in the air outside the body. Knowing the RQ, the partial pressure of oxygen in the alveoli can be calculated:

$$\text{alveolar } P_{O_2} = \text{inspired } P_{O_2} - \frac{\text{alveolar } P_{O_2}}{\text{RQ}}$$

With an RQ of 0.8 and a P_{CO_2} in the alveoli of 40 mm Hg, the alveolar P_{O_2} is equal to:

$$\text{alveolar } P_{O_2} = 150 \text{ mm Hg} - \frac{40 \text{ mm Hg}}{0.8} = \text{mm Hg}$$

Notice that this pressure is less than the external air. Therefore, the oxygen will flow from the inspired air in the lung (P_{O_2} = 150 mm Hg) into the bloodstream (P_{O_2} = 100 mm Hg) (Figure 9.3.2).

In the lungs, oxygen diffuses out of the alveoli and into the capillaries surrounding the alveoli. Oxygen (about 98 percent) binds reversibly to the respiratory pigment hemoglobin found in red blood cells (RBCs). RBCs carry oxygen to the tissues where oxygen dissociates from the hemoglobin and diffuses into the cells of the tissues. More specifically, alveolar P_{O_2} is higher in the alveoli P_{ALVO_2} = 100 mm Hg) than blood P_{O_2} (40 mm Hg) in the capillaries. Because this pressure gradient exists, oxygen diffuses down its pressure gradient, moving out of the alveoli and entering the blood of the capillaries where O_2 binds to hemoglobin. At the same time, alveolar P_{CO_2} is lower P_{ALVO_2} = 40 mm Hg than blood P_{CO_2} = (45 mm Hg). CO_2 diffuses down its pressure gradient, moving out of the capillaries and entering the alveoli.

Oxygen and carbon dioxide move independently of each other; they diffuse down their own pressure gradients. As blood leaves the lungs through the pulmonary veins, the venous P_{O_2}= 100 mm Hg, whereas the venous P_{CO_2}= 40 mm Hg. As blood enters the systemic capillaries, the blood will lose oxygen and gain carbon dioxide because of the pressure difference of the tissues and blood. In systemic capillaries, P_{O_2}= 100 mm Hg, but in the tissue cells, P_{O_2}= 40 mm Hg. This pressure gradient drives the diffusion of oxygen out of the capillaries and into the tissue cells. At the same time, blood P_{CO_2}= 40 mm Hg and systemic tissue P_{CO_2}= 45 mm Hg. The pressure gradient drives CO_2 out of tissue cells and into the capillaries. The blood returning to the lungs through the pulmonary arteries has a venous P_{O_2}= 40 mm Hg and a P_{CO_2}= 45 mm Hg. The blood enters the lung capillaries where the process of exchanging gases between the capillaries and alveoli begins again (Figure 9.3.2).

Art Connection

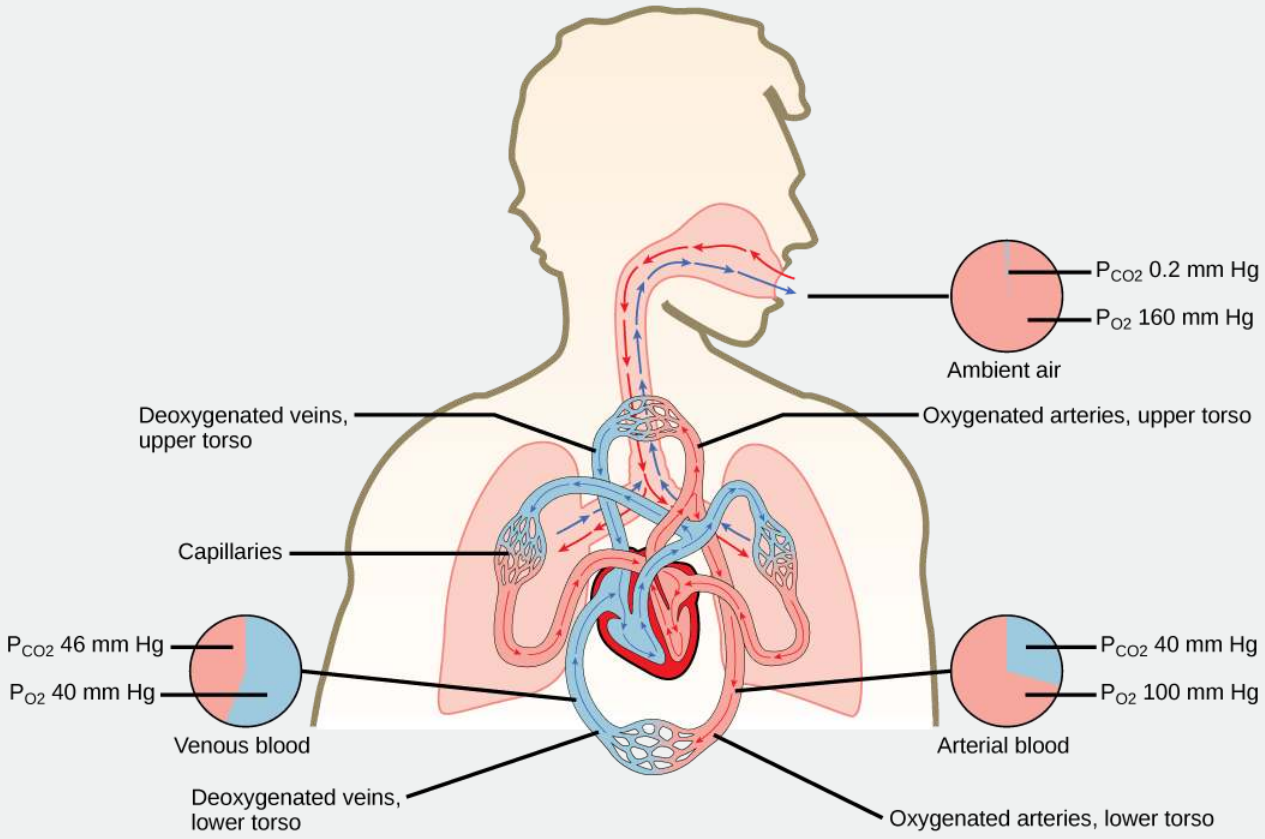


Figure 9.3.2: The partial pressures of oxygen and carbon dioxide change as blood moves through the body.

Which of the following statements is false?

A. In the tissues, P_{O_2} drops as blood passes from the arteries to the veins, while P_{CO_2} increases.
B. Blood travels from the lungs to the heart to body tissues, then back to the heart, then the lungs.
C. Blood travels from the lungs to the heart to body tissues, then back to the lungs, then the heart.
D. P_{O_2} is higher in air than in the lungs.

In short, the change in partial pressure from the alveoli to the capillaries drives the oxygen into the tissues and the carbon dioxide into the blood from the tissues. The blood is then transported to the lungs where differences in pressure in the alveoli result in the movement of carbon dioxide out of the blood into the lungs, and oxygen into the blood.

Link to Learning



Watch this video to learn how to carry out spirometry.

Summary

The lungs can hold a large volume of air, but they are not usually filled to maximal capacity. Lung volume measurements include tidal volume, expiratory reserve volume, inspiratory reserve volume, and residual volume. The sum of these equals the total lung capacity. Gas movement into or out of the lungs is dependent on the pressure of the gas. Air is a mixture of gases; therefore, the partial pressure of each gas can be calculated to determine how the gas will flow in the lung. The difference between the partial pressure of the gas in the air drives oxygen into the tissues and carbon dioxide out of the body.

Art Connections

Figure 9.3.2: Which of the following statements is false?

A. In the tissues, P_{O_2} drops as blood passes from the arteries to the veins, while P_{CO_2} increases.
B. Blood travels from the lungs to the heart to body tissues, then back to the heart, then the lungs.
C. Blood travels from the lungs to the heart to body tissues, then back to the lungs, then the heart.
D. P_{O_2} is higher in air than in the lungs.

Answer

C

Glossary

alveolar P_{O_2}
partial pressure of oxygen in the alveoli (usually around 100 mmHg)

expiratory reserve volume (ERV)
amount of additional air that can be exhaled after a normal exhalation

FEV1/FVC ratio
ratio of how much air can be forced out of the lung in one second to the total amount that is forced out of the lung; a measurement of lung function that can be used to detect disease states

forced expiratory volume (FEV)

(also, forced vital capacity) measure of how much air can be forced out of the lung from maximal inspiration over a specific amount of time

functional residual capacity (FRC)
expiratory reserve volume plus residual volume

inspiratory capacity (IC)
tidal volume plus inspiratory reserve volume

inspiratory reserve volume (IRV)
amount of additional air that can be inspired after a normal inhalation

lung capacity
measurement of two or more lung volumes (how much air can be inhaled from the end of an expiration to maximal capacity)

lung volume
measurement of air for one lung function (normal inhalation or exhalation)

partial pressure
amount of pressure exerted by one gas within a mixture of gases

residual volume (RV)
amount of air remaining in the lung after a maximal expiration

respiratory quotient (RQ)
ratio of carbon dioxide production to each oxygen molecule consumed

spirometry
method to measure lung volumes and to diagnose lung diseases

tidal volume (TV)
amount of air that is inspired and expired during normal breathing

total lung capacity (TLC)
sum of the residual volume, expiratory reserve volume, tidal volume, and inspiratory reserve volume

venous P_{CO_2}
partial pressure of carbon dioxide in the veins (40 mm Hg in the pulmonary veins)

venous P_{O_2}
partial pressure of oxygen in the veins (100 mm Hg in the pulmonary veins)

vital capacity (VC)
sum of the expiratory reserve volume, tidal volume, and inspiratory reserve volume

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9.4: Breathing

Skills to Develop

- Describe how the structures of the lungs and thoracic cavity control the mechanics of breathing
- Explain the importance of compliance and resistance in the lungs
- Discuss problems that may arise due to a V/Q mismatch

Mammalian lungs are located in the thoracic cavity where they are surrounded and protected by the rib cage, intercostal muscles, and bound by the chest wall. The bottom of the lungs is contained by the diaphragm, a skeletal muscle that facilitates breathing. Breathing requires the coordination of the lungs, the chest wall, and most importantly, the diaphragm.

Types of Breathing

Amphibians have evolved multiple ways of breathing. Young amphibians, like tadpoles, use gills to breathe, and they don't leave the water. Some amphibians retain gills for life. As the tadpole grows, the gills disappear and lungs grow. These lungs are primitive and not as evolved as mammalian lungs. Adult amphibians are lacking or have a reduced diaphragm, so breathing via lungs is forced. The other means of breathing for amphibians is diffusion across the skin. To aid this diffusion, amphibian skin must remain moist.

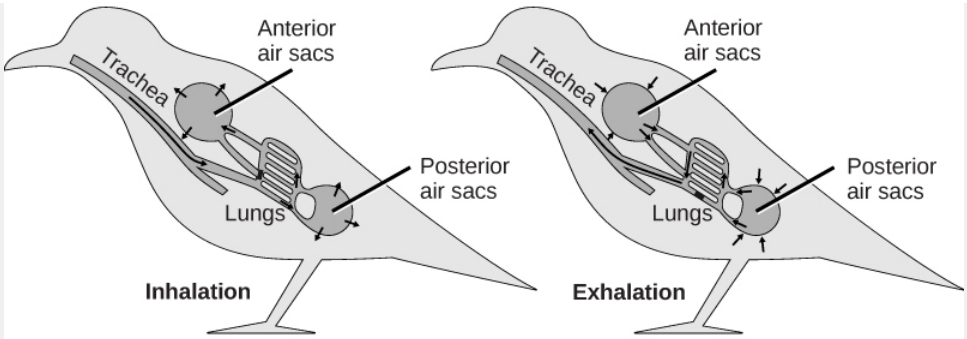
Birds face a unique challenge with respect to breathing: They fly. Flying consumes a great amount of energy; therefore, birds require a lot of oxygen to aid their metabolic processes. Birds have evolved a respiratory system that supplies them with the oxygen needed to enable flying. Similar to mammals, birds have lungs, which are organs specialized for gas exchange. Oxygenated air, taken in during inhalation, diffuses across the surface of the lungs into the bloodstream, and carbon dioxide diffuses from the blood into the lungs and expelled during exhalation. The details of breathing between birds and mammals differ substantially.

In addition to lungs, birds have air sacs inside their body. Air flows in one direction from the posterior air sacs to the lungs and out of the anterior air sacs. The flow of air is in the opposite direction from blood flow, and gas exchange takes place much more efficiently. This type of breathing enables birds to obtain the requisite oxygen, even at higher altitudes where the oxygen concentration is low. This directionality of airflow requires two cycles of air intake and exhalation to completely get the air out of the lungs.

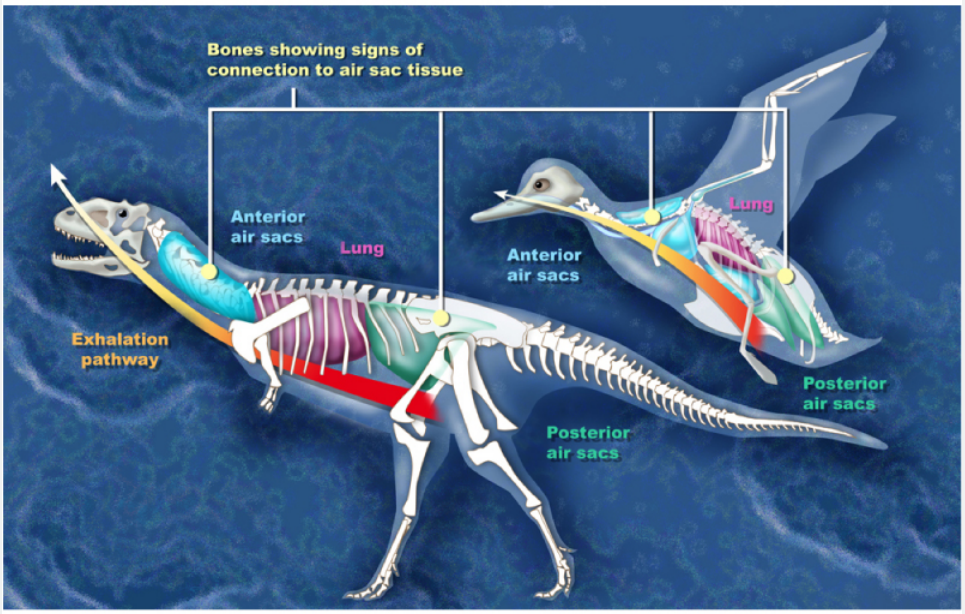
Evolution Connection: Avian Respiration

Birds have evolved a respiratory system that enables them to fly. Flying is a high-energy process and requires a lot of oxygen. Furthermore, many birds fly in high altitudes where the concentration of oxygen in low. How did birds evolve a respiratory system that is so unique?

Decades of research by paleontologists have shown that birds evolved from therapods, meat-eating dinosaurs (Figure 9.4.1). In fact, fossil evidence shows that meat-eating dinosaurs that lived more than 100 million years ago had a similar flow-through respiratory system with lungs and air sacs. *Archaeopteryx* and *Xiaotingia*, for example, were flying dinosaurs and are believed to be early precursors of birds.



(a)



(b)

Figure 9.4.1: (a) Birds have a flow-through respiratory system in which air flows unidirectionally from the posterior sacs into the lungs, then into the anterior air sacs. The air sacs connect to openings in hollow bones. (b) Dinosaurs, from which birds descended, have similar hollow bones and are believed to have had a similar respiratory system. (credit b: modification of work by Zina Deretsky, National Science Foundation)

Most of us consider that dinosaurs are extinct. However, modern birds are descendants of avian dinosaurs. The respiratory system of modern birds has been evolving for hundreds of millions of years.

All mammals have lungs that are the main organs for breathing. Lung capacity has evolved to support the animal's activities. During inhalation, the lungs expand with air, and oxygen diffuses across the lung's surface and enters the bloodstream. During exhalation, the lungs expel air and lung volume decreases. In the next few sections, the process of human breathing will be explained.

The Mechanics of Human Breathing

Boyle's Law is the gas law that states that in a closed space, pressure and volume are inversely related. As volume decreases, pressure increases and vice versa (Figure 9.4.2). The relationship between gas pressure and volume helps to explain the mechanics of breathing.

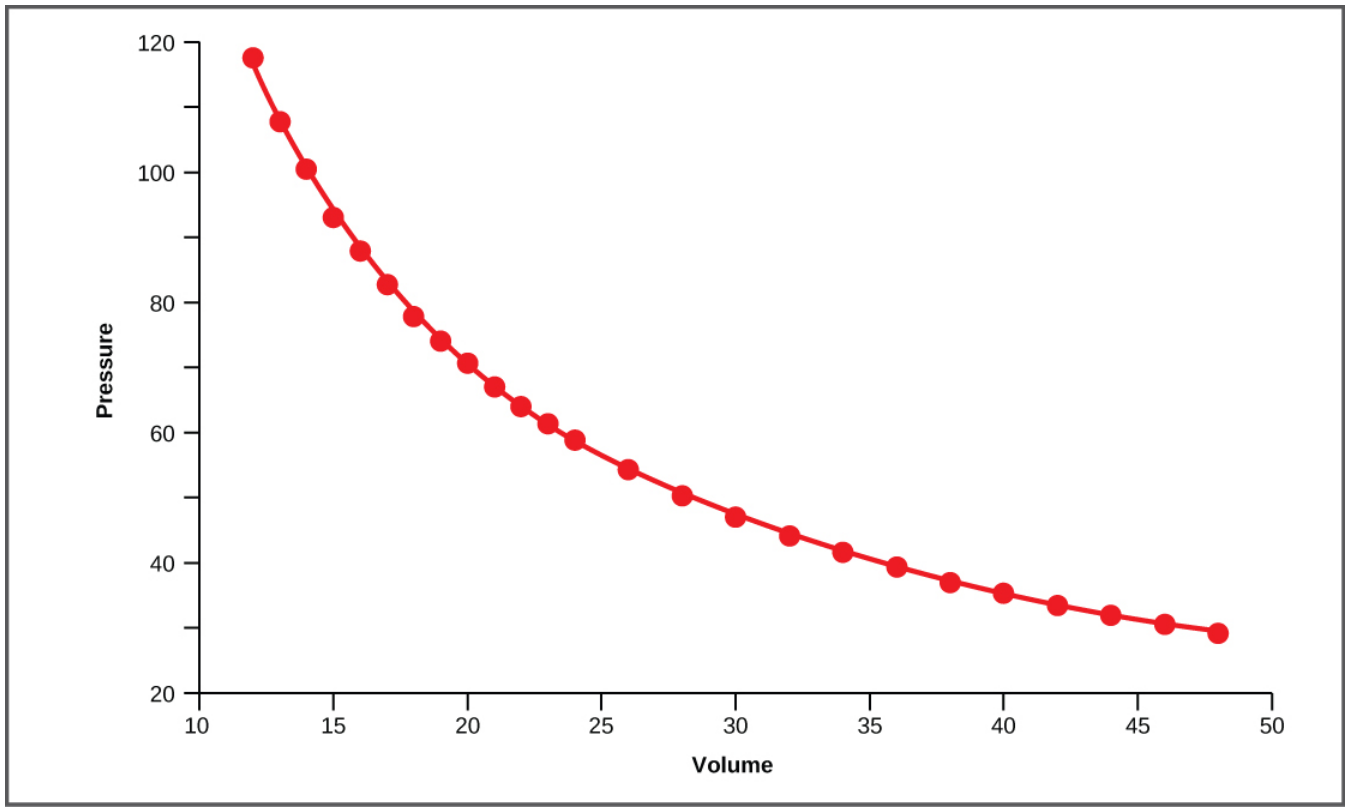


Figure 9.4.2: This graph shows data from Boyle's original 1662 experiment, which shows that pressure and volume are inversely related. No units are given as Boyle used arbitrary units in his experiments.

There is always a slightly negative pressure within the thoracic cavity, which aids in keeping the airways of the lungs open. During inhalation, volume increases as a result of contraction of the diaphragm, and pressure decreases (according to Boyle's Law). This decrease of pressure in the thoracic cavity relative to the environment makes the cavity less than the atmosphere (Figure 9.4.3a). Because of this drop in pressure, air rushes into the respiratory passages. To increase the volume of the lungs, the chest wall expands. This results from the contraction of the intercostal muscles, the muscles that are connected to the rib cage. Lung volume expands because the diaphragm contracts and the intercostals muscles contract, thus expanding the thoracic cavity. This increase in the volume of the thoracic cavity lowers pressure compared to the atmosphere, so air rushes into the lungs, thus increasing its volume. The resulting increase in volume is largely attributed to an increase in alveolar space, because the bronchioles and bronchi are stiff structures that do not change in size.

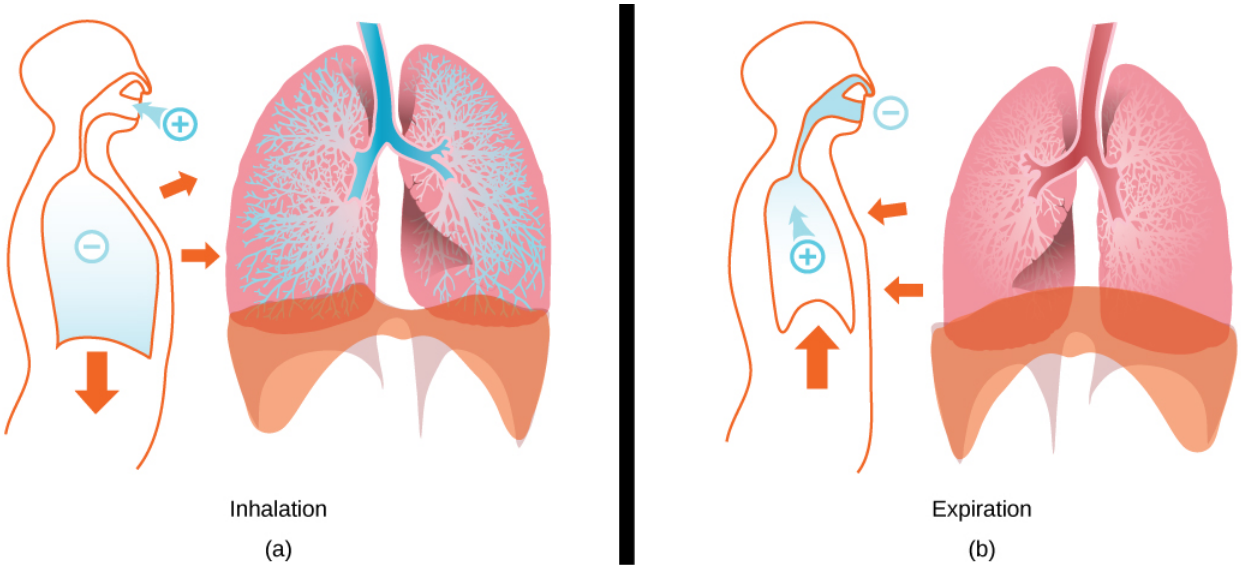


Figure 9.4.3: The lungs, chest wall, and diaphragm are all involved in respiration, both (a) inhalation and (b) expiration. (credit: modification of work by Mariana Ruiz Villareal)

The chest wall expands out and away from the lungs. The lungs are elastic; therefore, when air fills the lungs, the elastic recoil within the tissues of the lung exerts pressure back toward the interior of the lungs. These outward and inward forces compete to inflate and deflate the lung with every breath. Upon exhalation, the lungs recoil to force the air out of the lungs, and the intercostal muscles relax, returning the chest wall back to its original position (Figure 9.4.3b). The diaphragm also relaxes and moves higher into the thoracic cavity. This increases the pressure within the thoracic cavity relative to the environment, and air rushes out of the lungs. The movement of air out of the lungs is a passive event. No muscles are contracting to expel the air.

Each lung is surrounded by an invaginated sac. The layer of tissue that covers the lung and dips into spaces is called the visceral pleura. A second layer of parietal pleura lines the interior of the thorax (Figure 9.4.4). The space between these layers, the intrapleural space, contains a small amount of fluid that protects the tissue and reduces the friction generated from rubbing the tissue layers together as the lungs contract and relax. Pleurisy results when these layers of tissue become inflamed; it is painful because the inflammation increases the pressure within the thoracic cavity and reduces the volume of the lung.

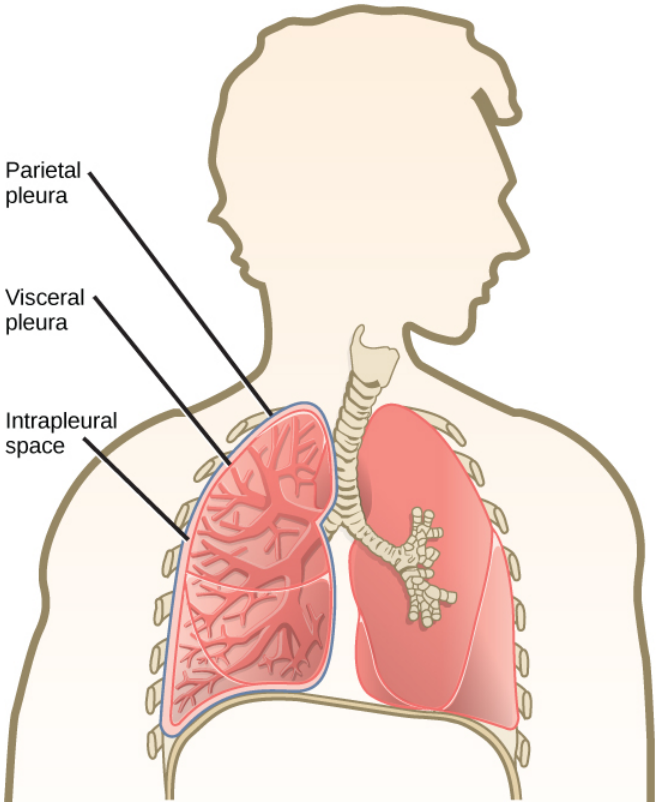


Figure 9.4.4: A tissue layer called pleura surrounds the lung and interior of the thoracic cavity. (credit: modification of work by NCI)

Link to Learning



View how Boyle's Law is related to breathing and watch this video on Boyle's Law.

The Work of Breathing

The number of breaths per minute is the respiratory rate. On average, under non-exertion conditions, the human respiratory rate is 12–15 breaths/minute. The respiratory rate contributes to the alveolar ventilation, or how much air moves into and out of the alveoli. Alveolar ventilation prevents carbon dioxide buildup in the alveoli. There are two ways to keep the alveolar ventilation

constant: increase the respiratory rate while decreasing the tidal volume of air per breath (shallow breathing), or decrease the respiratory rate while increasing the tidal volume per breath. In either case, the ventilation remains the same, but the work done and type of work needed are quite different. Both tidal volume and respiratory rate are closely regulated when oxygen demand increases.

There are two types of work conducted during respiration, flow-resistive and elastic work. Flow-resistive refers to the work of the alveoli and tissues in the lung, whereas elastic work refers to the work of the intercostal muscles, chest wall, and diaphragm. Increasing the respiration rate increases the flow-resistive work of the airways and decreases the elastic work of the muscles. Decreasing the respiratory rate reverses the type of work required.

Surfactant

The air-tissue/water interface of the alveoli has a high surface tension. This surface tension is similar to the surface tension of water at the liquid-air interface of a water droplet that results in the bonding of the water molecules together. Surfactant is a complex mixture of phospholipids and lipoproteins that works to reduce the surface tension that exists between the alveoli tissue and the air found within the alveoli. By lowering the surface tension of the alveolar fluid, it reduces the tendency of alveoli to collapse.

Surfactant works like a detergent to reduce the surface tension and allows for easier inflation of the airways. When a balloon is first inflated, it takes a large amount of effort to stretch the plastic and start to inflate the balloon. If a little bit of detergent was applied to the interior of the balloon, then the amount of effort or work needed to begin to inflate the balloon would decrease, and it would become much easier to start blowing up the balloon. This same principle applies to the airways. A small amount of surfactant to the airway tissues reduces the effort or work needed to inflate those airways. Babies born prematurely sometimes do not produce enough surfactant. As a result, they suffer from respiratory distress syndrome, because it requires more effort to inflate their lungs. Surfactant is also important for preventing collapse of small alveoli relative to large alveoli.

Lung Resistance and Compliance

Pulmonary diseases reduce the rate of gas exchange into and out of the lungs. Two main causes of decreased gas exchange are compliance (how elastic the lung is) and resistance (how much obstruction exists in the airways). A change in either can dramatically alter breathing and the ability to take in oxygen and release carbon dioxide.

Examples of restrictive diseases are respiratory distress syndrome and pulmonary fibrosis. In both diseases, the airways are less compliant and they are stiff or fibrotic. There is a decrease in compliance because the lung tissue cannot bend and move. In these types of restrictive diseases, the intrapleural pressure is more positive and the airways collapse upon exhalation, which traps air in the lungs. Forced or functional vital capacity (FVC), which is the amount of air that can be forcibly exhaled after taking the deepest breath possible, is much lower than in normal patients, and the time it takes to exhale most of the air is greatly prolonged (Figure 9.4.5). A patient suffering from these diseases cannot exhale the normal amount of air.

Obstructive diseases and conditions include emphysema, asthma, and pulmonary edema. In emphysema, which mostly arises from smoking tobacco, the walls of the alveoli are destroyed, decreasing the surface area for gas exchange. The overall compliance of the lungs is increased, because as the alveolar walls are damaged, lung elastic recoil decreases due to a loss of elastic fibers, and more air is trapped in the lungs at the end of exhalation. Asthma is a disease in which inflammation is triggered by environmental factors. Inflammation obstructs the airways. The obstruction may be due to edema (fluid accumulation), smooth muscle spasms in the walls of the bronchioles, increased mucus secretion, damage to the epithelia of the airways, or a combination of these events. Those with asthma or edema experience increased occlusion from increased inflammation of the airways. This tends to block the airways, preventing the proper movement of gases (Figure 9.4.5). Those with obstructive diseases have large volumes of air trapped after exhalation and breathe at a very high lung volume to compensate for the lack of airway recruitment.

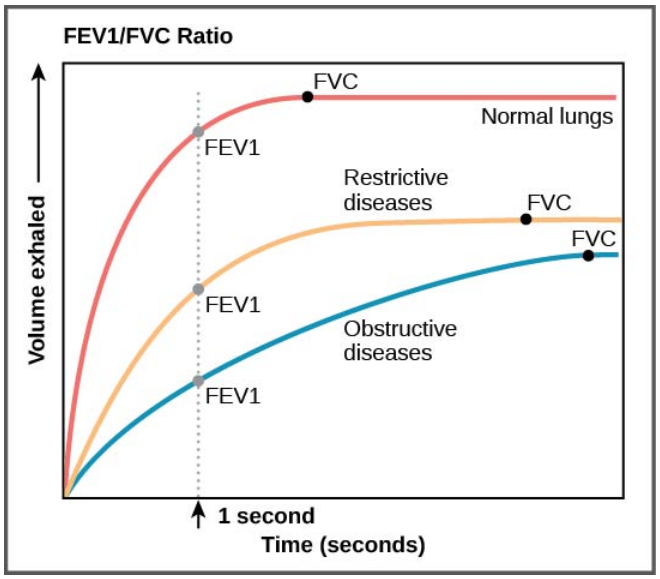


Figure 9.4.5: The ratio of FEV1 (the amount of air that can be forcibly exhaled in one second after taking a deep breath) to FVC (the total amount of air that can be forcibly exhaled) can be used to diagnose whether a person has restrictive or obstructive lung disease. In restrictive lung disease, FVC is reduced but airways are not obstructed, so the person is able to expel air reasonably fast. In obstructive lung disease, airway obstruction results in slow exhalation as well as reduced FVC. Thus, the FEV1/FVC ratio is lower in persons with obstructive lung disease (less than 69 percent) than in persons with restrictive disease (88 to 90 percent).

Dead Space: V/Q Mismatch

Pulmonary circulation pressure is very low compared to that of the systemic circulation. It is also independent of cardiac output. This is because of a phenomenon called recruitment, which is the process of opening airways that normally remain closed when cardiac output increases. As cardiac output increases, the number of capillaries and arteries that are perfused (filled with blood) increases. These capillaries and arteries are not always in use but are ready if needed. At times, however, there is a mismatch between the amount of air (ventilation, V) and the amount of blood (perfusion, Q) in the lungs. This is referred to as ventilation/perfusion (V/Q) mismatch.

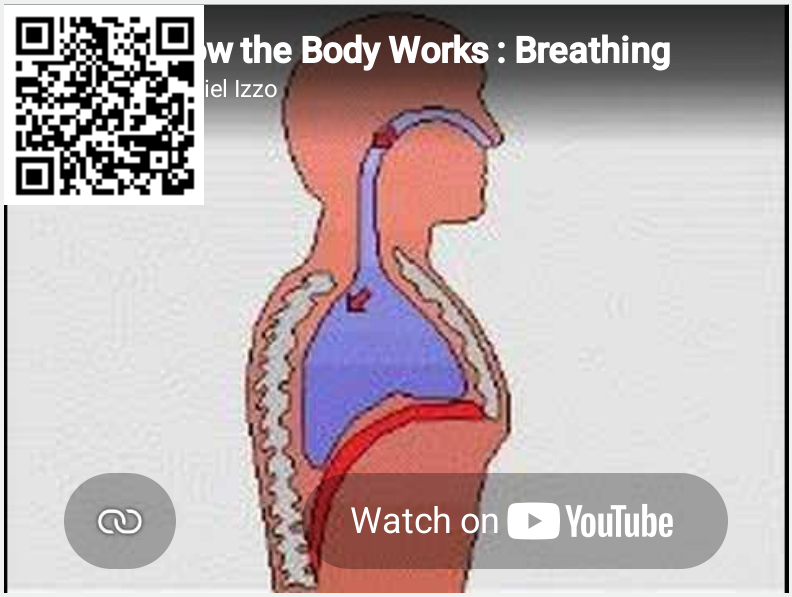
There are two types of V/Q mismatch. Both produce dead space, regions of broken down or blocked lung tissue. Dead spaces can severely impact breathing, because they reduce the surface area available for gas diffusion. As a result, the amount of oxygen in the blood decreases, whereas the carbon dioxide level increases. Dead space is created when no ventilation and/or perfusion takes place. Anatomical dead space or anatomical shunt, arises from an anatomical failure, while physiological dead space or physiological shunt, arises from a functional impairment of the lung or arteries.

An example of an anatomical shunt is the effect of gravity on the lungs. The lung is particularly susceptible to changes in the magnitude and direction of gravitational forces. When someone is standing or sitting upright, the pleural pressure gradient leads to increased ventilation further down in the lung. As a result, the intrapleural pressure is more negative at the base of the lung than at the top, and more air fills the bottom of the lung than the top. Likewise, it takes less energy to pump blood to the bottom of the lung than to the top when in a prone position. Perfusion of the lung is not uniform while standing or sitting. This is a result of hydrostatic forces combined with the effect of airway pressure. An anatomical shunt develops because the ventilation of the airways does not match the perfusion of the arteries surrounding those airways. As a result, the rate of gas exchange is reduced. Note that this does not occur when lying down, because in this position, gravity does not preferentially pull the bottom of the lung down.

A physiological shunt can develop if there is infection or edema in the lung that obstructs an area. This will decrease ventilation but not affect perfusion; therefore, the V/Q ratio changes and gas exchange is affected.

The lung can compensate for these mismatches in ventilation and perfusion. If ventilation is greater than perfusion, the arterioles dilate and the bronchioles constrict. This increases perfusion and reduces ventilation. Likewise, if ventilation is less than perfusion, the arterioles constrict and the bronchioles dilate to correct the imbalance.

Link to Learning



Visit this site to view the mechanics of breathing.

Summary

The structure of the lungs and thoracic cavity control the mechanics of breathing. Upon inspiration, the diaphragm contracts and lowers. The intercostal muscles contract and expand the chest wall outward. The intrapleural pressure drops, the lungs expand, and air is drawn into the airways. When exhaling, the intercostal muscles and diaphragm relax, returning the intrapleural pressure back to the resting state. The lungs recoil and airways close. The air passively exits the lung. There is high surface tension at the air-airway interface in the lung. Surfactant, a mixture of phospholipids and lipoproteins, acts like a detergent in the airways to reduce surface tension and allow for opening of the alveoli.

Breathing and gas exchange are both altered by changes in the compliance and resistance of the lung. If the compliance of the lung decreases, as occurs in restrictive diseases like fibrosis, the airways stiffen and collapse upon exhalation. Air becomes trapped in the lungs, making breathing more difficult. If resistance increases, as happens with asthma or emphysema, the airways become obstructed, trapping air in the lungs and causing breathing to become difficult. Alterations in the ventilation of the airways or perfusion of the arteries can affect gas exchange. These changes in ventilation and perfusion, called V/Q mismatch, can arise from anatomical or physiological changes.

Glossary

alveolar ventilation
: how much air is in the alveoli

anatomical dead space
: (also, anatomical shunt) region of the lung that lacks proper ventilation/perfusion due to an anatomical block

compliance
: measurement of the elasticity of the lung

dead space
: area in the lung that lacks proper ventilation or perfusion

elastic recoil
: property of the lung that drives the lung tissue inward

elastic work
work conducted by the intercostal muscles, chest wall, and diaphragm

flow-resistive
work of breathing performed by the alveoli and tissues in the lung

functional vital capacity (FVC)
amount of air that can be forcibly exhaled after taking the deepest breath possible

intercostal muscle
muscle connected to the rib cage that contracts upon inspiration

intrapleural space
space between the layers of pleura

obstructive disease
disease (such as emphysema and asthma) that arises from obstruction of the airways; compliance increases in these diseases

physiological dead space
(also, physiological shunt) region of the lung that lacks proper ventilation/perfusion due to a physiological change in the lung (like inflammation or edema)

pleura
tissue layer that surrounds the lungs and lines the interior of the thoracic cavity

pleurisy
painful inflammation of the pleural tissue layers

recruitment
process of opening airways that normally remain closed when the cardiac output increases

resistance
measurement of lung obstruction

respiratory distress syndrome
disease that arises from a deficient amount of surfactant

respiratory rate
number of breaths per minute

restrictive disease
disease that results from a restriction and decreased compliance of the alveoli; respiratory distress syndrome and pulmonary fibrosis are examples

surfactant
detergent-like liquid in the airways that lowers the surface tension of the alveoli to allow for expansion

ventilation/perfusion (V/Q) mismatch
region of the lung that lacks proper alveolar ventilation (V) and/or arterial perfusion (Q)

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9.5: Transport of Gases in Human Bodily Fluids

Skills to Develop

- Describe how oxygen is bound to hemoglobin and transported to body tissues
- Explain how carbon dioxide is transported from body tissues to the lungs

Once the oxygen diffuses across the alveoli, it enters the bloodstream and is transported to the tissues where it is unloaded, and carbon dioxide diffuses out of the blood and into the alveoli to be expelled from the body. Although gas exchange is a continuous process, the oxygen and carbon dioxide are transported by different mechanisms.

Transport of Oxygen in the Blood

Although oxygen dissolves in blood, only a small amount of oxygen is transported this way. Only 1.5 percent of oxygen in the blood is dissolved directly into the blood itself. Most oxygen—98.5 percent—is bound to a protein called hemoglobin and carried to the tissues.

Hemoglobin

Hemoglobin, or Hb, is a protein molecule found in red blood cells (erythrocytes) made of four subunits: two alpha subunits and two beta subunits (Figure 9.5.1). Each subunit surrounds a central heme group that contains iron and binds one oxygen molecule, allowing each hemoglobin molecule to bind four oxygen molecules. Molecules with more oxygen bound to the heme groups are brighter red. As a result, oxygenated arterial blood where the Hb is carrying four oxygen molecules is bright red, while venous blood that is deoxygenated is darker red.

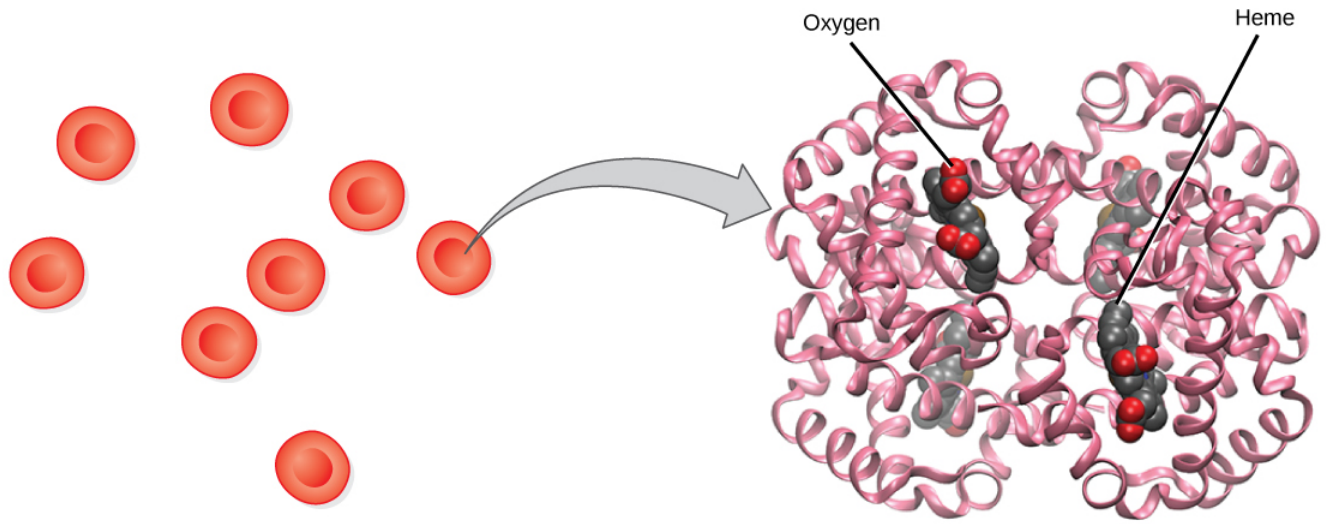


Figure 9.5.1: The protein inside (a) red blood cells that carries oxygen to cells and carbon dioxide to the lungs is (b) hemoglobin. Hemoglobin is made up of four symmetrical subunits and four heme groups. Iron associated with the heme binds oxygen. It is the iron in hemoglobin that gives blood its red color.

It is easier to bind a second and third oxygen molecule to Hb than the first molecule. This is because the hemoglobin molecule changes its shape, or conformation, as oxygen binds. The fourth oxygen is then more difficult to bind. The binding of oxygen to hemoglobin can be plotted as a function of the partial pressure of oxygen in the blood (x-axis) versus the relative Hb-oxygen saturation (y-axis). The resulting graph—an oxygen dissociation curve—is sigmoidal, or S-shaped (Figure 9.5.2). As the partial pressure of oxygen increases, the hemoglobin becomes increasingly saturated with oxygen.

Art Connection

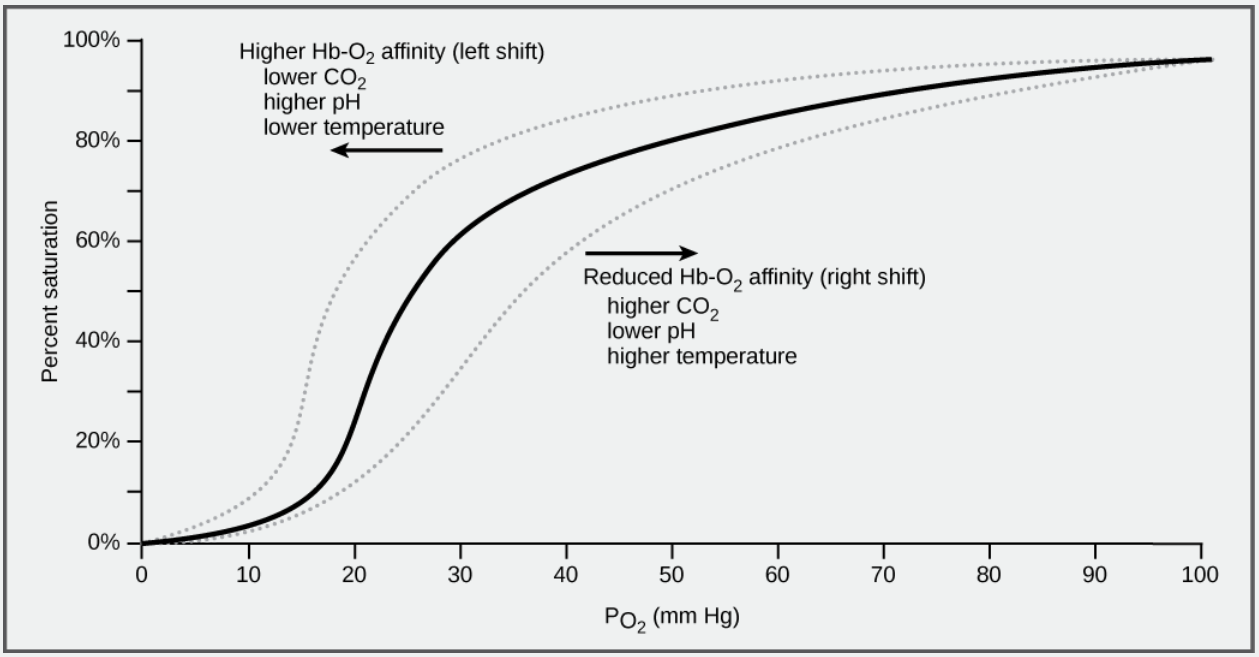


Figure 9.5.2: The oxygen dissociation curve demonstrates that, as the partial pressure of oxygen increases, more oxygen binds hemoglobin. However, the affinity of hemoglobin for oxygen may shift to the left or the right depending on environmental conditions.

The kidneys are responsible for removing excess H^+ ions from the blood. If the kidneys fail, what would happen to blood pH and to hemoglobin affinity for oxygen?

Factors That Affect Oxygen Binding

The oxygen-carrying capacity of hemoglobin determines how much oxygen is carried in the blood. In addition to P_{O_2}, other environmental factors and diseases can affect oxygen carrying capacity and delivery.

Carbon dioxide levels, blood pH, and body temperature affect oxygen-carrying capacity (Figure 9.5.2). When carbon dioxide is in the blood, it reacts with water to form bicarbonate (HCO_3^-) and hydrogen ions (H^+). As the level of carbon dioxide in the blood increases, more H^+ is produced and the pH decreases. This increase in carbon dioxide and subsequent decrease in pH reduce the affinity of hemoglobin for oxygen. The oxygen dissociates from the Hb molecule, shifting the oxygen dissociation curve to the right. Therefore, more oxygen is needed to reach the same hemoglobin saturation level as when the pH was higher. A similar shift in the curve also results from an increase in body temperature. Increased temperature, such as from increased activity of skeletal muscle, causes the affinity of hemoglobin for oxygen to be reduced.

Diseases like sickle cell anemia and thalassemia decrease the blood's ability to deliver oxygen to tissues and its oxygen-carrying capacity. In sickle cell anemia, the shape of the red blood cell is crescent-shaped, elongated, and stiffened, reducing its ability to deliver oxygen (Figure 9.5.3). In this form, red blood cells cannot pass through the capillaries. This is painful when it occurs. Thalassemia is a rare genetic disease caused by a defect in either the alpha or the beta subunit of Hb. Patients with thalassemia produce a high number of red blood cells, but these cells have lower-than-normal levels of hemoglobin. Therefore, the oxygen-carrying capacity is diminished.

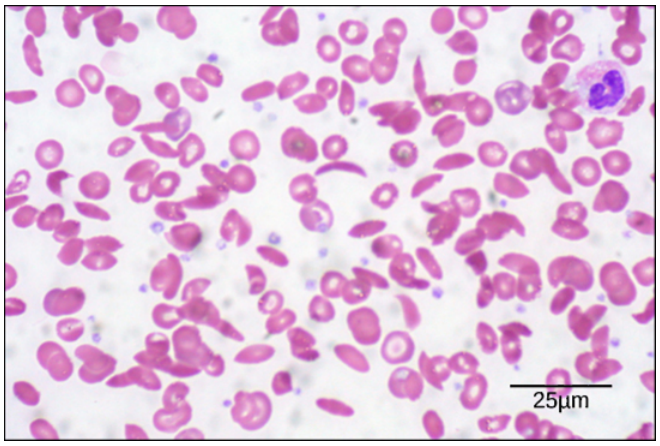


Figure 9.5.3: Individuals with sickle cell anemia have crescent-shaped red blood cells. (credit: modification of work by Ed Uthman; scale-bar data from Matt Russell)

Transport of Carbon Dioxide in the Blood

Carbon dioxide molecules are transported in the blood from body tissues to the lungs by one of three methods: dissolution directly into the blood, binding to hemoglobin, or carried as a bicarbonate ion. Several properties of carbon dioxide in the blood affect its transport. First, carbon dioxide is more soluble in blood than oxygen. About 5 to 7 percent of all carbon dioxide is dissolved in the plasma. Second, carbon dioxide can bind to plasma proteins or can enter red blood cells and bind to hemoglobin. This form transports about 10 percent of the carbon dioxide. When carbon dioxide binds to hemoglobin, a molecule called carbaminohemoglobin is formed. Binding of carbon dioxide to hemoglobin is reversible. Therefore, when it reaches the lungs, the carbon dioxide can freely dissociate from the hemoglobin and be expelled from the body.

Third, the majority of carbon dioxide molecules (85 percent) are carried as part of the bicarbonate buffer system. In this system, carbon dioxide diffuses into the red blood cells. Carbonic anhydrase (CA) within the red blood cells quickly converts the carbon dioxide into carbonic acid (H_2CO_3). Carbonic acid is an unstable intermediate molecule that immediately dissociates into bicarbonate ions (HCO_3^-) and hydrogen (H^+) ions. Since carbon dioxide is quickly converted into bicarbonate ions, this reaction allows for the continued uptake of carbon dioxide into the blood down its concentration gradient. It also results in the production of H^+ ions. If too much H^+ is produced, it can alter blood pH. However, hemoglobin binds to the free H^+ ions and thus limits shifts in pH. The newly synthesized bicarbonate ion is transported out of the red blood cell into the liquid component of the blood in exchange for a chloride ion (Cl^-); this is called the chloride shift. When the blood reaches the lungs, the bicarbonate ion is transported back into the red blood cell in exchange for the chloride ion. The H^+ ion dissociates from the hemoglobin and binds to the bicarbonate ion. This produces the carbonic acid intermediate, which is converted back into carbon dioxide through the enzymatic action of CA. The carbon dioxide produced is expelled through the lungs during exhalation.

$$CO_2 + H_2O \leftrightharpoons \underset{\text{(carbonic acid)}}{H_2CO_3} \leftrightarrow \underset{\text{(bicarbonate)}}{HCO_3} + H^+$$

The benefit of the bicarbonate buffer system is that carbon dioxide is “soaked up” into the blood with little change to the pH of the system. This is important because it takes only a small change in the overall pH of the body for severe injury or death to result. The presence of this bicarbonate buffer system also allows for people to travel and live at high altitudes: When the partial pressure of oxygen and carbon dioxide change at high altitudes, the bicarbonate buffer system adjusts to regulate carbon dioxide while maintaining the correct pH in the body.

Carbon Monoxide Poisoning

While carbon dioxide can readily associate and dissociate from hemoglobin, other molecules such as carbon monoxide (CO) cannot. Carbon monoxide has a greater affinity for hemoglobin than oxygen. Therefore, when carbon monoxide is present, it binds to hemoglobin preferentially over oxygen. As a result, oxygen cannot bind to hemoglobin, so very little oxygen is transported through the body (Figure 9.5.4). Carbon monoxide is a colorless, odorless gas and is therefore difficult to detect. It is produced by gas-powered vehicles and tools. Carbon monoxide can cause headaches, confusion, and nausea; long-term exposure can cause

brain damage or death. Administering 100 percent (pure) oxygen is the usual treatment for carbon monoxide poisoning. Administration of pure oxygen speeds up the separation of carbon monoxide from hemoglobin.

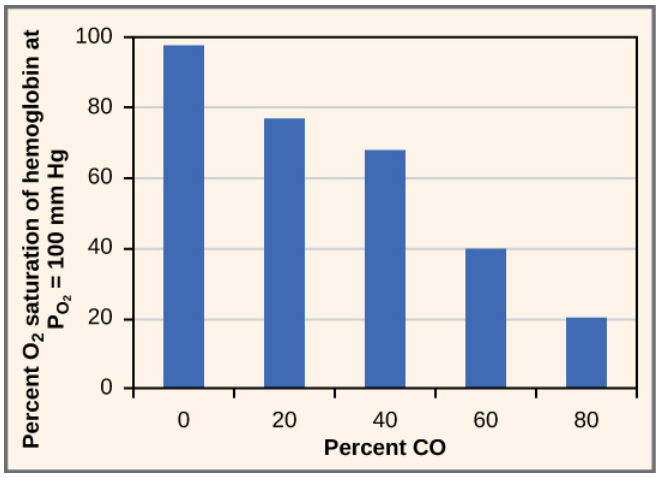


Figure 9.5.4: As percent CO increases, the oxygen saturation of hemoglobin decreases.

Summary

Hemoglobin is a protein found in red blood cells that is comprised of two alpha and two beta subunits that surround an iron-containing heme group. Oxygen readily binds this heme group. The ability of oxygen to bind increases as more oxygen molecules are bound to heme. Disease states and altered conditions in the body can affect the binding ability of oxygen, and increase or decrease its ability to dissociate from hemoglobin.

Carbon dioxide can be transported through the blood via three methods. It is dissolved directly in the blood, bound to plasma proteins or hemoglobin, or converted into bicarbonate. The majority of carbon dioxide is transported as part of the bicarbonate system. Carbon dioxide diffuses into red blood cells. Inside, carbonic anhydrase converts carbon dioxide into carbonic acid (H_2CO_3), which is subsequently hydrolyzed into bicarbonate (HCO_3^-) and H^+. The H^+ ion binds to hemoglobin in red blood cells, and bicarbonate is transported out of the red blood cells in exchange for a chloride ion. This is called the chloride shift. Bicarbonate leaves the red blood cells and enters the blood plasma. In the lungs, bicarbonate is transported back into the red blood cells in exchange for chloride. The H^+ dissociates from hemoglobin and combines with bicarbonate to form carbonic acid with the help of carbonic anhydrase, which further catalyzes the reaction to convert carbonic acid back into carbon dioxide and water. The carbon dioxide is then expelled from the lungs.

Art Connections

Figure 9.5.2: The kidneys are responsible for removing excess H^+ ions from the blood. If the kidneys fail, what would happen to blood pH and to hemoglobin affinity for oxygen?

Answer

The blood pH will drop and hemoglobin affinity for oxygen will decrease.

Glossary

bicarbonate buffer system

system in the blood that absorbs carbon dioxide and regulates pH levels

bicarbonate (HCO_3^-) ion

ion created when carbonic acid dissociates into H^+ and (HCO_3^-)

carbaminohemoglobin

molecule that forms when carbon dioxide binds to hemoglobin

carbonic anhydrase (CA)
enzyme that catalyzes carbon dioxide and water into carbonic acid

chloride shift
chloride shift exchange of chloride for bicarbonate into or out of the red blood cell

heme group
centralized iron-containing group that is surrounded by the alpha and beta subunits of hemoglobin

hemoglobin
molecule in red blood cells that can bind oxygen, carbon dioxide, and carbon monoxide

oxygen-carrying capacity
amount of oxygen that can be transported in the blood

oxygen dissociation curve
curve depicting the affinity of oxygen for hemoglobin

sickle cell anemia
genetic disorder that affects the shape of red blood cells, and their ability to transport oxygen and move through capillaries

thalassemia
rare genetic disorder that results in mutation of the alpha or beta subunits of hemoglobin, creating smaller red blood cells with less hemoglobin

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CHAPTER OVERVIEW

10: The Circulatory System

10.1: Prelude to the Circulatory System
10.2: Overview of the Circulatory System
10.3: Components of the Blood
10.4: Mammalian Heart and Blood Vessels
10.5: Blood Flow and Blood Pressure Regulation
10.E: The Circulatory System (Exercises)

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10.1: Prelude to the Circulatory System

Most animals are complex multicellular organisms that require a mechanism for transporting nutrients throughout their bodies and removing waste products. The circulatory system has evolved over time from simple diffusion through cells in the early evolution of animals to a complex network of blood vessels that reach all parts of the human body. This extensive network supplies the cells, tissues, and organs with oxygen and nutrients, and removes carbon dioxide and waste, which are byproducts of respiration.



Figure 10.1.1: Just as highway systems transport people and goods through a complex network, the circulatory system transports nutrients, gases, and wastes throughout the animal body. (credit: modification of work by Andrey Belenko)

At the core of the human circulatory system is the heart. The size of a clenched fist, the human heart is protected beneath the rib cage. Made of specialized and unique cardiac muscle, it pumps blood throughout the body and to the heart itself. Heart contractions are driven by intrinsic electrical impulses that the brain and endocrine hormones help to regulate. Understanding the heart's basic anatomy and function is important to understanding the body's circulatory and respiratory systems.

Gas exchange is one essential function of the circulatory system. A circulatory system is not needed in organisms with no specialized respiratory organs because oxygen and carbon dioxide diffuse directly between their body tissues and the external environment. However, in organisms that possess lungs and gills, oxygen must be transported from these specialized respiratory organs to the body tissues via a circulatory system. Therefore, circulatory systems have had to evolve to accommodate the great diversity of body sizes and body types present among animals.

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10.2: Overview of the Circulatory System

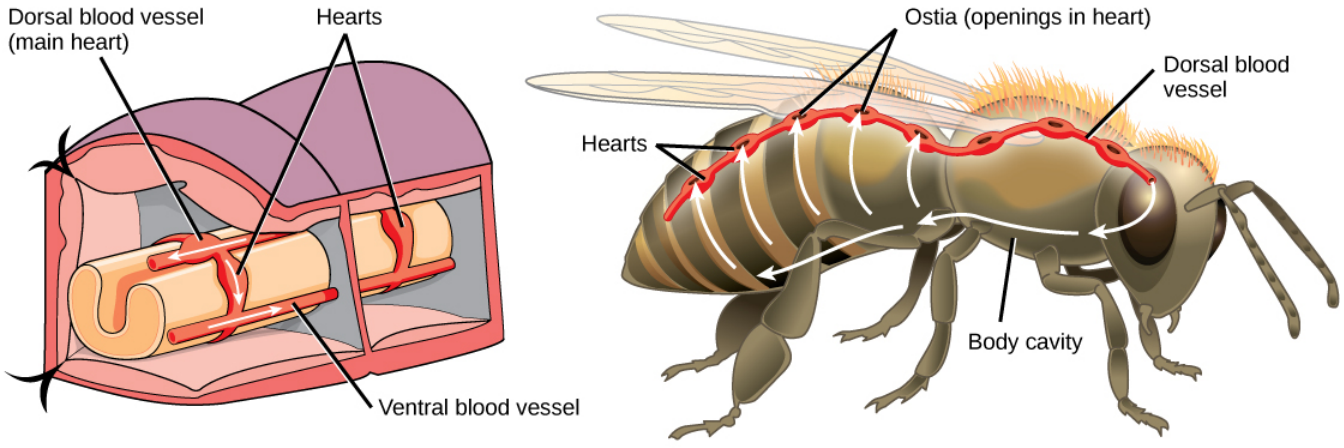
Skills to Develop

- Describe an open and closed circulatory system
- Describe interstitial fluid and hemolymph
- Compare and contrast the organization and evolution of the vertebrate circulatory system.

In all animals, except a few simple types, the circulatory system is used to transport nutrients and gases through the body. Simple diffusion allows some water, nutrient, waste, and gas exchange into primitive animals that are only a few cell layers thick; however, bulk flow is the only method by which the entire body of larger more complex organisms is accessed.

Circulatory System Architecture

The circulatory system is effectively a network of cylindrical vessels: the arteries, veins, and capillaries that emanate from a pump, the heart. In all vertebrate organisms, as well as some invertebrates, this is a closed-loop system, in which the blood is not free in a cavity. In a closed circulatory system, blood is contained inside blood vessels and circulates unidirectionally from the heart around the systemic circulatory route, then returns to the heart again, as illustrated in Figure 10.2.1a. As opposed to a closed system, arthropods—including insects, crustaceans, and most mollusks—have an open circulatory system, as illustrated in Figure 10.2.1b. In an open circulatory system, the blood is not enclosed in the blood vessels but is pumped into a cavity called a hemocoel and is called hemolymph because the blood mixes with the interstitial fluid. As the heart beats and the animal moves, the hemolymph circulates around the organs within the body cavity and then reenters the hearts through openings called ostia. This movement allows for gas and nutrient exchange. An open circulatory system does not use as much energy as a closed system to operate or to maintain; however, there is a trade-off with the amount of blood that can be moved to metabolically active organs and tissues that require high levels of oxygen. In fact, one reason that insects with wing spans of up to two feet wide (70 cm) are not around today is probably because they were outcompeted by the arrival of birds 150 million years ago. Birds, having a closed circulatory system, are thought to have moved more agilely, allowing them to get food faster and possibly to prey on the insects.



(a) Closed circulatory system (b) Open circulatory system

Figure 10.2.1: In (a) closed circulatory systems, the heart pumps blood through vessels that are separate from the interstitial fluid of the body. Most vertebrates and some invertebrates, like this annelid earthworm, have a closed circulatory system. In (b) open circulatory systems, a fluid called hemolymph is pumped through a blood vessel that empties into the body cavity. Hemolymph returns to the blood vessel through openings called ostia. Arthropods like this bee and most mollusks have open circulatory systems.

Circulatory System Variation in Animals

The circulatory system varies from simple systems in invertebrates to more complex systems in vertebrates. The simplest animals, such as the sponges (Porifera) and rotifers (Rotifera), do not need a circulatory system because diffusion allows adequate exchange of water, nutrients, and waste, as well as dissolved gases, as shown in Figure 10.2.2a. Organisms that are more complex but still only have two layers of cells in their body plan, such as jellies (Cnidaria) and comb jellies (Ctenophora) also use diffusion through

their epidermis and internally through the gastrovascular compartment. Both their internal and external tissues are bathed in an aqueous environment and exchange fluids by diffusion on both sides, as illustrated in Figure 10.2.2b. Exchange of fluids is assisted by the pulsing of the jellyfish body.

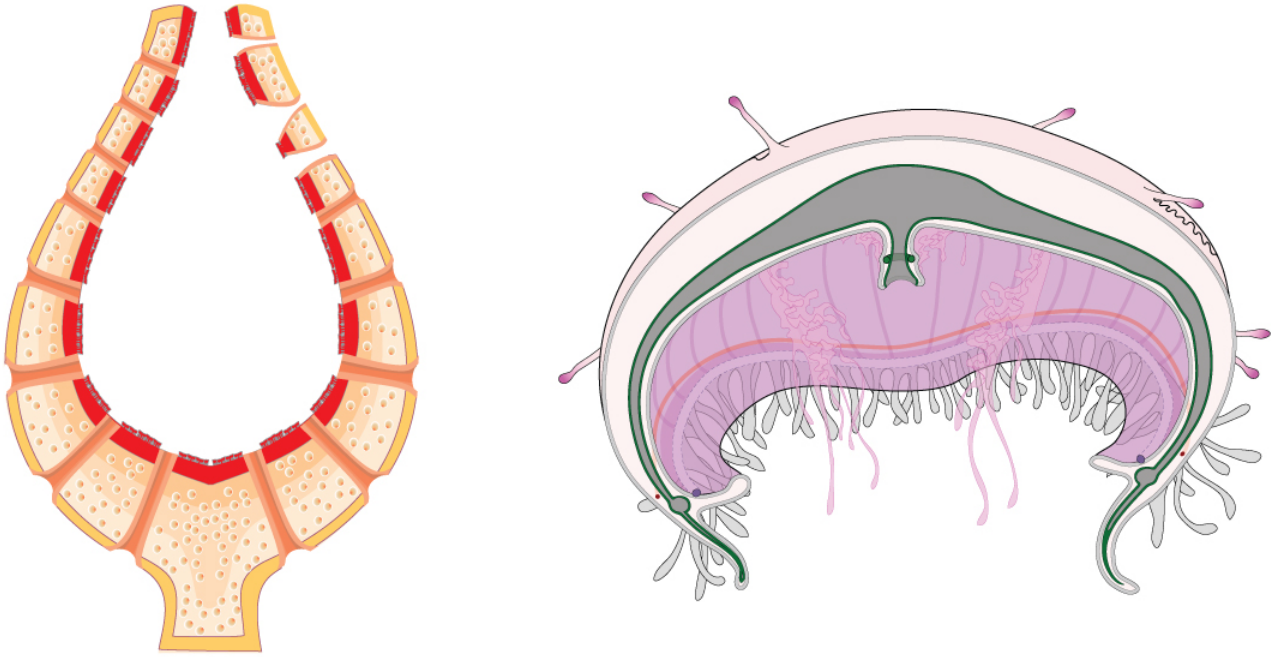
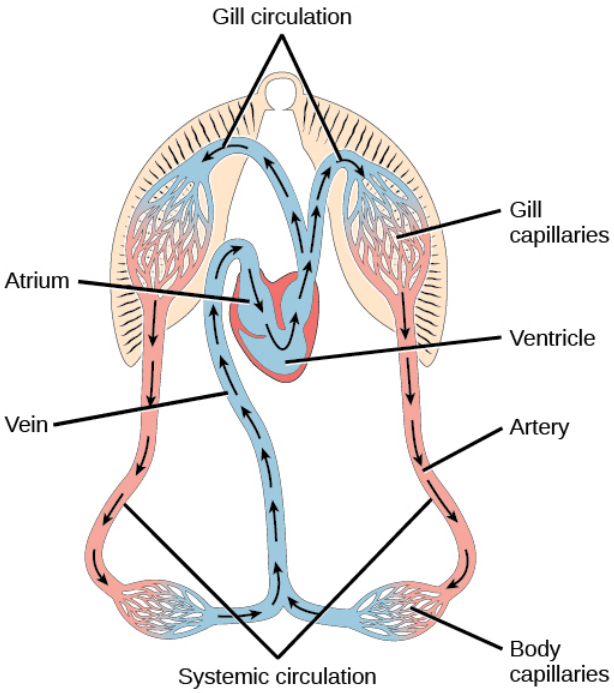
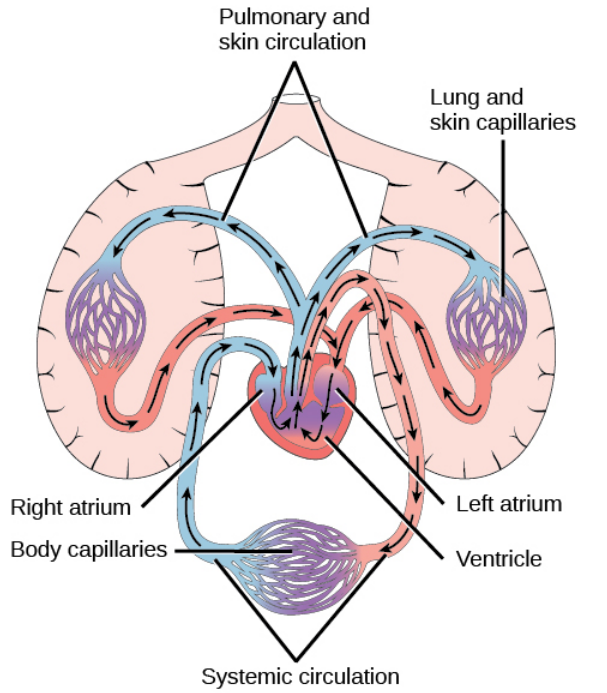


Figure 10.2.2: Simple animals consisting of a single cell layer such as the (a) sponge or only a few cell layers such as the (b) jellyfish do not have a circulatory system. Instead, gases, nutrients, and wastes are exchanged by diffusion.

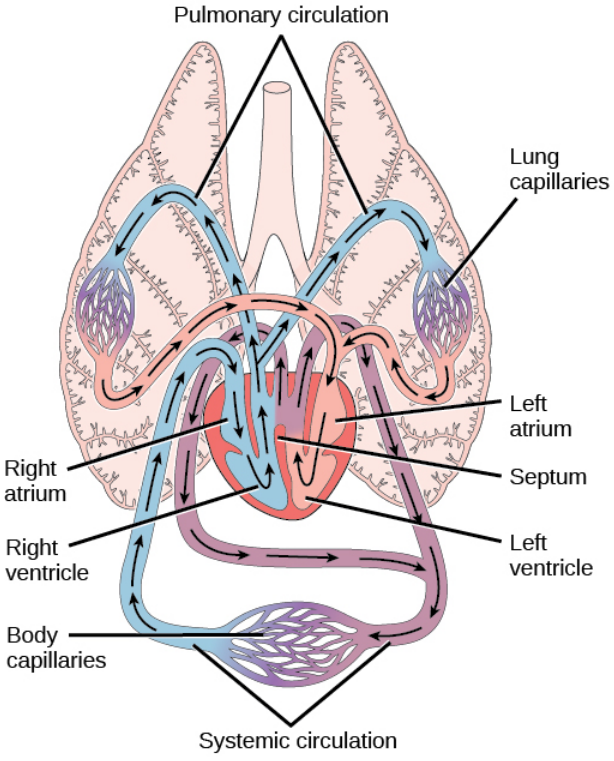
For more complex organisms, diffusion is not efficient for cycling gases, nutrients, and waste effectively through the body; therefore, more complex circulatory systems evolved. Most arthropods and many mollusks have open circulatory systems. In an open system, an elongated beating heart pushes the hemolymph through the body and muscle contractions help to move fluids. The larger more complex crustaceans, including lobsters, have developed arterial-like vessels to push blood through their bodies, and the most active mollusks, such as squids, have evolved a closed circulatory system and are able to move rapidly to catch prey. Closed circulatory systems are a characteristic of vertebrates; however, there are significant differences in the structure of the heart and the circulation of blood between the different vertebrate groups due to adaptation during evolution and associated differences in anatomy. Figure 10.2.3 illustrates the basic circulatory systems of some vertebrates: fish, amphibians, reptiles, and mammals.



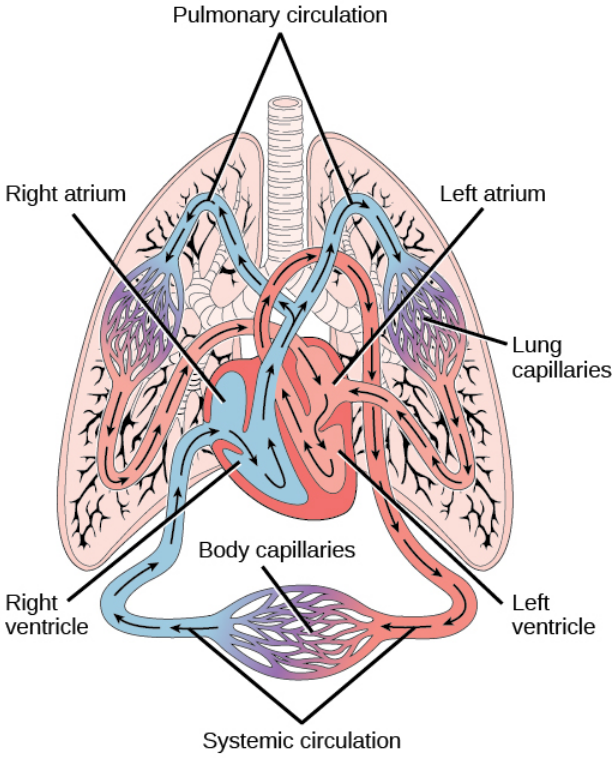
(a) Fish



(b) Amphibians



(c) Reptile



(d) Mammals

Figure 10.2.3: (a) Fish have the simplest circulatory systems of the vertebrates: blood flows unidirectionally from the two-chambered heart through the gills and then the rest of the body. (b) Amphibians have two circulatory routes: one for oxygenation of the blood through the lungs and skin, and the other to take oxygen to the rest of the body. The blood is pumped from a three-chambered heart with two atria and a single ventricle. (c) Reptiles also have two circulatory routes; however, blood is only oxygenated through the lungs. The heart is three chambered, but the ventricles are partially separated so some mixing of oxygenated and deoxygenated blood occurs except in crocodilians and birds. (d) Mammals and birds have the most efficient heart with four chambers that completely separate the oxygenated and deoxygenated blood; it pumps only oxygenated blood through the body and deoxygenated blood to the lungs.

As illustrated in Figure 10.2.3a Fish have a single circuit for blood flow and a two-chambered heart that has only a single atrium and a single ventricle. The atrium collects blood that has returned from the body and the ventricle pumps the blood to the gills where gas exchange occurs and the blood is re-oxygenated; this is called gill circulation. The blood then continues through the rest of the body before arriving back at the atrium; this is called systemic circulation. This unidirectional flow of blood produces a gradient of oxygenated to deoxygenated blood around the fish's systemic circuit. The result is a limit in the amount of oxygen that can reach some of the organs and tissues of the body, reducing the overall metabolic capacity of fish.

In amphibians, reptiles, birds, and mammals, blood flow is directed in two circuits: one through the lungs and back to the heart, which is called pulmonary circulation, and the other throughout the rest of the body and its organs including the brain (systemic circulation). In amphibians, gas exchange also occurs through the skin during pulmonary circulation and is referred to as pulmocutaneous circulation.

As shown in Figure 10.2.3b, amphibians have a three-chambered heart that has two atria and one ventricle rather than the two-chambered heart of fish. The two atria (superior heart chambers) receive blood from the two different circuits (the lungs and the systems), and then there is some mixing of the blood in the heart's ventricle (inferior heart chamber), which reduces the efficiency of oxygenation. The advantage to this arrangement is that high pressure in the vessels pushes blood to the lungs and body. The mixing is mitigated by a ridge within the ventricle that diverts oxygen-rich blood through the systemic circulatory system and deoxygenated blood to the pulmocutaneous circuit. For this reason, amphibians are often described as having double circulation.

Most reptiles also have a three-chambered heart similar to the amphibian heart that directs blood to the pulmonary and systemic circuits, as shown in Figure 10.2.3c. The ventricle is divided more effectively by a partial septum, which results in less mixing of oxygenated and deoxygenated blood. Some reptiles (alligators and crocodiles) are the most primitive animals to exhibit a four-chambered heart. Crocodilians have a unique circulatory mechanism where the heart shunts blood from the lungs toward the stomach and other organs during long periods of submergence, for instance, while the animal waits for prey or stays underwater waiting for prey to rot. One adaptation includes two main arteries that leave the same part of the heart: one takes blood to the lungs and the other provides an alternate route to the stomach and other parts of the body. Two other adaptations include a hole in the heart between the two ventricles, called the foramen of Panizza, which allows blood to move from one side of the heart to the other, and specialized connective tissue that slows the blood flow to the lungs. Together these adaptations have made crocodiles and alligators one of the most evolutionarily successful animal groups on earth.

In mammals and birds, the heart is also divided into four chambers: two atria and two ventricles, as illustrated in Figure 40.1.3d. The oxygenated blood is separated from the deoxygenated blood, which improves the efficiency of double circulation and is probably required for the warm-blooded lifestyle of mammals and birds. The four-chambered heart of birds and mammals evolved independently from a three-chambered heart. The independent evolution of the same or a similar biological trait is referred to as convergent evolution.

Summary

In most animals, the circulatory system is used to transport blood through the body. Some primitive animals use diffusion for the exchange of water, nutrients, and gases. However, complex organisms use the circulatory system to carry gases, nutrients, and waste through the body. Circulatory systems may be open (mixed with the interstitial fluid) or closed (separated from the interstitial fluid). Closed circulatory systems are a characteristic of vertebrates; however, there are significant differences in the structure of the heart and the circulation of blood between the different vertebrate groups due to adaptions during evolution and associated differences in anatomy. Fish have a two-chambered heart with unidirectional circulation. Amphibians have a three-chambered heart, which has some mixing of the blood, and they have double circulation. Most non-avian reptiles have a three-chambered heart, but have little mixing of the blood; they have double circulation. Mammals and birds have a four-chambered heart with no mixing of the blood and double circulation.

Glossary

atrium
(plural: atria) chamber of the heart that receives blood from the veins and sends blood to the ventricles

closed circulatory system
system in which the blood is separated from the bodily interstitial fluid and contained in blood vessels

double circulation
flow of blood in two circuits: the pulmonary circuit through the lungs and the systemic circuit through the organs and body

gill circulation
circulatory system that is specific to animals with gills for gas exchange; the blood flows through the gills for oxygenation

hemocoel
cavity into which blood is pumped in an open circulatory system

hemolymph
mixture of blood and interstitial fluid that is found in insects and other arthropods as well as most mollusks

interstitial fluid
fluid between cells

open circulatory system
system in which the blood is mixed with interstitial fluid and directly covers the organs

ostium
(plural: ostia) holes between blood vessels that allow the movement of hemolymph through the body of insects, arthropods, and mollusks with open circulatory systems

pulmocutaneous circulation
circulatory system in amphibians; the flow of blood to the lungs and the moist skin for gas exchange

pulmonary circulation
flow of blood away from the heart through the lungs where oxygenation occurs and then returns to the heart again

systemic circulation
flow of blood away from the heart to the brain, liver, kidneys, stomach, and other organs, the limbs, and the muscles of the body, and then the return of this blood to the heart

unidirectional circulation
flow of blood in a single circuit; occurs in fish where the blood flows through the gills, then past the organs and the rest of the body, before returning to the heart

ventricle
(heart) large inferior chamber of the heart that pumps blood into arteries

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10.3: Components of the Blood

Skills to Develop

- List the basic components of the blood
- Compare red and white blood cells
- Describe blood plasma and serum

Hemoglobin is responsible for distributing oxygen, and to a lesser extent, carbon dioxide, throughout the circulatory systems of humans, vertebrates, and many invertebrates. The blood is more than the proteins, though. Blood is actually a term used to describe the liquid that moves through the vessels and includes plasma (the liquid portion, which contains water, proteins, salts, lipids, and glucose) and the cells (red and white cells) and cell fragments called platelets. Blood plasma is actually the dominant component of blood and contains the water, proteins, electrolytes, lipids, and glucose. The cells are responsible for carrying the gases (red cells) and immune the response (white). The platelets are responsible for blood clotting. Interstitial fluid that surrounds cells is separate from the blood, but in hemolymph, they are combined. In humans, cellular components make up approximately 45 percent of the blood and the liquid plasma 55 percent. Blood is 20 percent of a person's extracellular fluid and eight percent of weight.

The Role of Blood in the Body

Blood, like the human blood illustrated in Figure 10.3.1 is important for regulation of the body's systems and homeostasis. Blood helps maintain homeostasis by stabilizing pH, temperature, osmotic pressure, and by eliminating excess heat. Blood supports growth by distributing nutrients and hormones, and by removing waste. Blood plays a protective role by transporting clotting factors and platelets to prevent blood loss and transporting the disease-fighting agents or white blood cells to sites of infection.

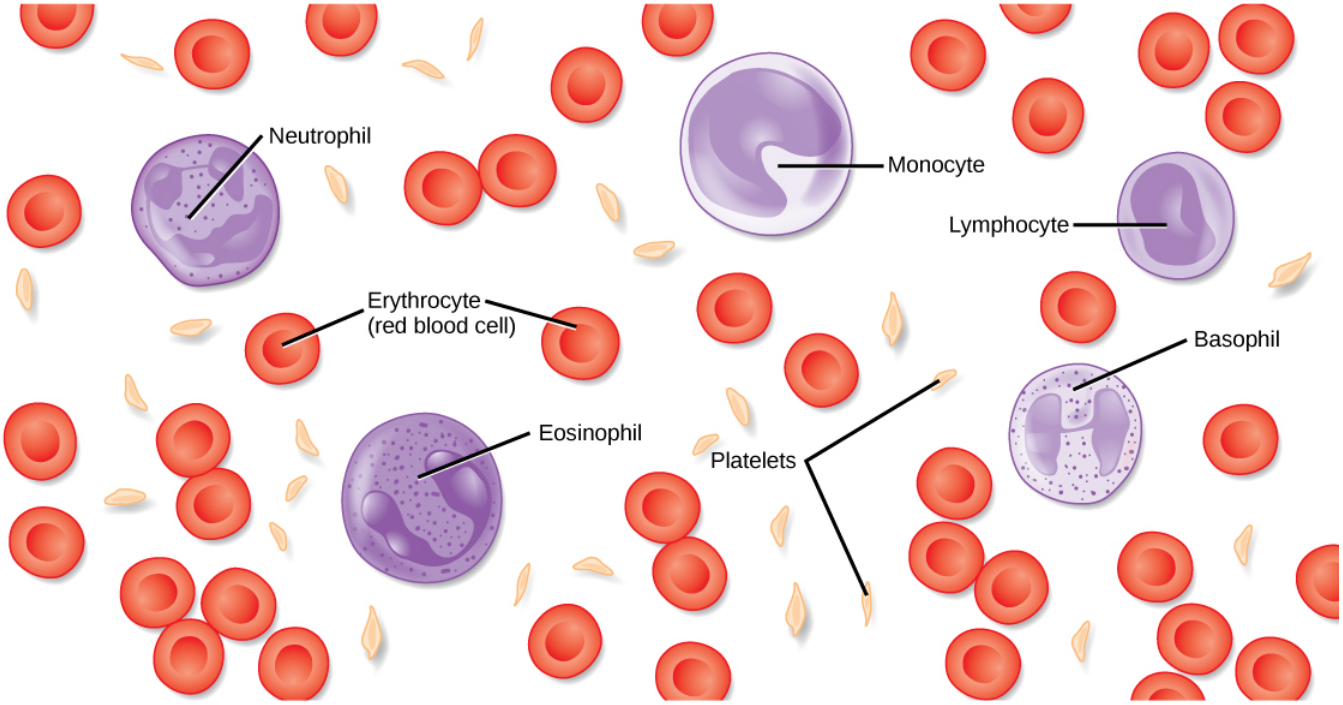


Figure 10.3.1: The cells and cellular components of human blood are shown. Red blood cells deliver oxygen to the cells and remove carbon dioxide. White blood cells—including neutrophils, monocytes, lymphocytes, eosinophils, and basophils—are involved in the immune response. Platelets form clots that prevent blood loss after injury.

Red Blood Cells

Red blood cells, or erythrocytes (erythro- = "red"; -cyte = "cell"), are specialized cells that circulate through the body delivering oxygen to cells; they are formed from stem cells in the bone marrow. In mammals, red blood cells are small biconcave cells that at maturity do not contain a nucleus or mitochondria and are only 7–8 µm in size. In birds and non-avian reptiles, a nucleus is still maintained in red blood cells.

The red coloring of blood comes from the iron-containing protein hemoglobin, illustrated in Figure 10.3.2a. The principal job of this protein is to carry oxygen, but it also transports carbon dioxide as well. Hemoglobin is packed into red blood cells at a rate of about 250 million molecules of hemoglobin per cell. Each hemoglobin molecule binds four oxygen molecules so that each red blood cell carries one billion molecules of oxygen. There are approximately 25 trillion red blood cells in the five liters of blood in the human body, which could carry up to 25 sextillion (25×10^{21}) molecules of oxygen in the body at any time. In mammals, the lack of organelles in erythrocytes leaves more room for the hemoglobin molecules, and the lack of mitochondria also prevents use of the oxygen for metabolic respiration. Only mammals have anucleated red blood cells, and some mammals (camels, for instance) even have nucleated red blood cells. The advantage of nucleated red blood cells is that these cells can undergo mitosis. Anucleated red blood cells metabolize anaerobically (without oxygen), making use of a primitive metabolic pathway to produce ATP and increase the efficiency of oxygen transport.

Not all organisms use hemoglobin as the method of oxygen transport. Invertebrates that utilize hemolymph rather than blood use different pigments to bind to the oxygen. These pigments use copper or iron to the oxygen. Invertebrates have a variety of other respiratory pigments. Hemocyanin, a blue-green, copper-containing protein, illustrated in Figure 10.3.2b is found in mollusks, crustaceans, and some of the arthropods. Chlorocruorin, a green-colored, iron-containing pigment is found in four families of polychaete tubeworms. Hemerythrin, a red, iron-containing protein is found in some polychaete worms and annelids and is illustrated in Figure 10.3.2c. Despite the name, hemerythrin does not contain a heme group and its oxygen-carrying capacity is poor compared to hemoglobin.

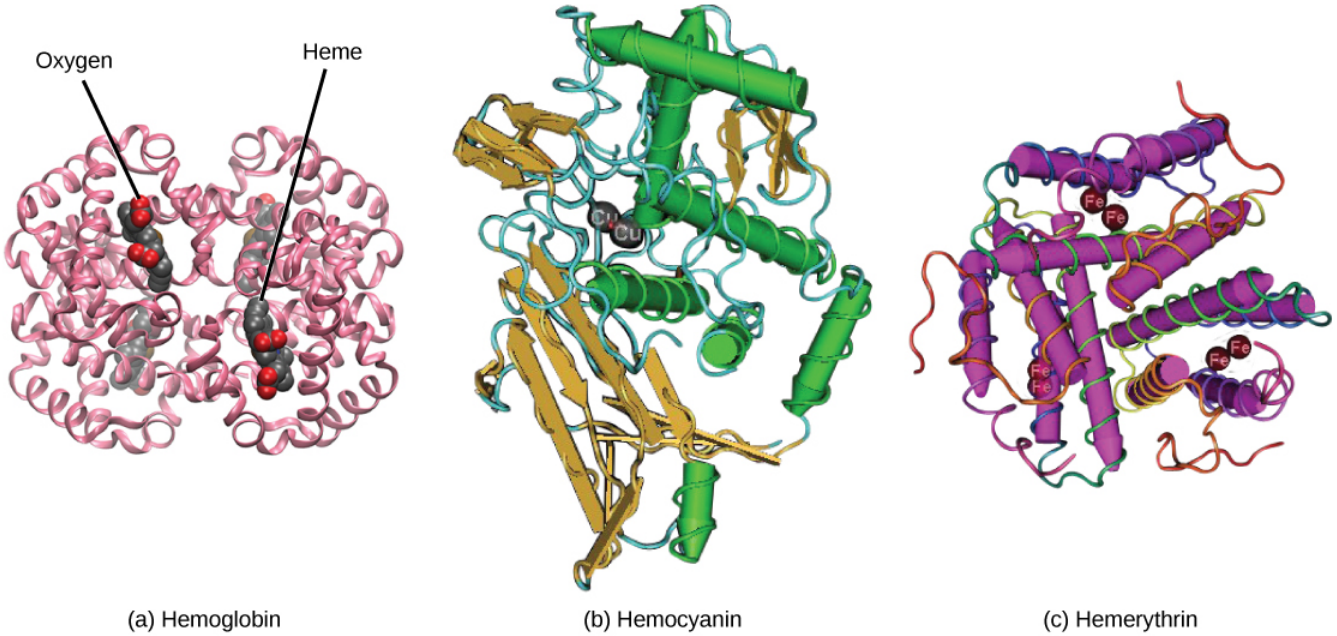


Figure 10.3.2: In most vertebrates, (a) hemoglobin delivers oxygen to the body and removes some carbon dioxide. Hemoglobin is composed of four protein subunits, two alpha chains and two beta chains, and a heme group that has iron associated with it. The iron reversibly associates with oxygen, and in so doing is oxidized from Fe^{2+} to Fe^{3+}. In most mollusks and some arthropods, (b) hemocyanin delivers oxygen. Unlike hemoglobin, hemolymph is not carried in blood cells, but floats free in the hemolymph. Copper instead of iron binds the oxygen, giving the hemolymph a blue-green color. In annelids, such as the earthworm, and some other invertebrates, (c) hemerythrin carries oxygen. Like hemoglobin, hemerythrin is carried in blood cells and has iron associated with it, but despite its name, hemerythrin does not contain heme.

The small size and large surface area of red blood cells allows for rapid diffusion of oxygen and carbon dioxide across the plasma membrane. In the lungs, carbon dioxide is released and oxygen is taken in by the blood. In the tissues, oxygen is released from the blood and carbon dioxide is bound for transport back to the lungs. Studies have found that hemoglobin also binds nitrous oxide (NO). NO is a vasodilator that relaxes the blood vessels and capillaries and may help with gas exchange and the passage of red blood cells through narrow vessels. Nitroglycerin, a heart medication for angina and heart attacks, is converted to NO to help relax the blood vessels and increase oxygen flow through the body.

A characteristic of red blood cells is their glycolipid and glycoprotein coating; these are lipids and proteins that have carbohydrate molecules attached. In humans, the surface glycoproteins and glycolipids on red blood cells vary between individuals, producing

the different blood types, such as A, B, and O. Red blood cells have an average life span of 120 days, at which time they are broken down and recycled in the liver and spleen by phagocytic macrophages, a type of white blood cell.

White Blood Cells

White blood cells, also called leukocytes (leuko = white), make up approximately one percent by volume of the cells in blood. The role of white blood cells is very different than that of red blood cells: they are primarily involved in the immune response to identify and target pathogens, such as invading bacteria, viruses, and other foreign organisms. White blood cells are formed continually; some only live for hours or days, but some live for years.

The morphology of white blood cells differs significantly from red blood cells. They have nuclei and do not contain hemoglobin. The different types of white blood cells are identified by their microscopic appearance after histologic staining, and each has a different specialized function. The two main groups, both illustrated in Figure 10.3.3 are the granulocytes, which include the neutrophils, eosinophils, and basophils, and the agranulocytes, which include the monocytes and lymphocytes.

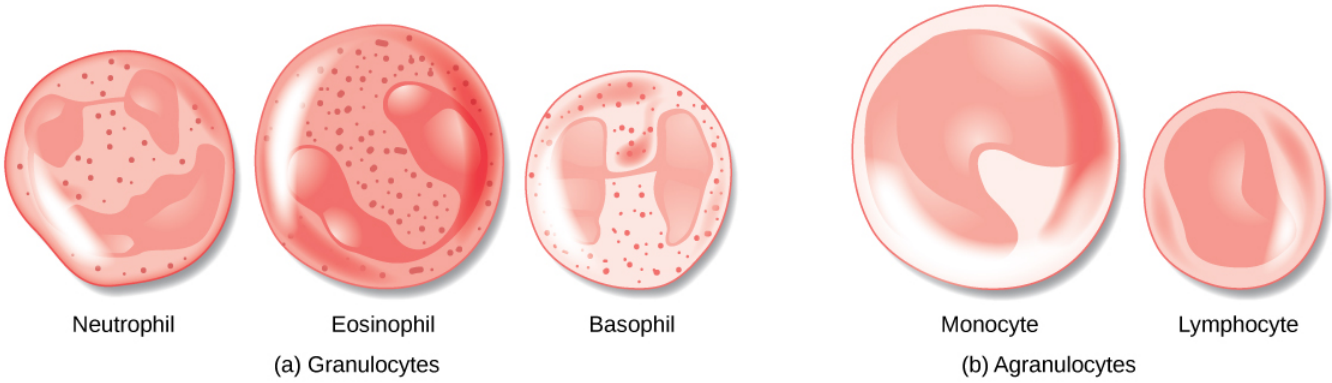


Figure 10.3.3: (a) Granulocytes—including neutrophils, eosinophils and basophils—are characterized by a lobed nucleus and granular inclusions in the cytoplasm. Granulocytes are typically first-responders during injury or infection. (b) Agranulocytes include lymphocytes and monocytes. Lymphocytes, including B and T cells, are responsible for adaptive immune response. Monocytes differentiate into macrophages and dendritic cells, which in turn respond to infection or injury.

Granulocytes contain granules in their cytoplasm; the agranulocytes are so named because of the lack of granules in their cytoplasm. Some leukocytes become macrophages that either stay at the same site or move through the blood stream and gather at sites of infection or inflammation where they are attracted by chemical signals from foreign particles and damaged cells. Lymphocytes are the primary cells of the immune system and include B cells, T cells, and natural killer cells. B cells destroy bacteria and inactivate their toxins. They also produce antibodies. T cells attack viruses, fungi, some bacteria, transplanted cells, and cancer cells. T cells attack viruses by releasing toxins that kill the viruses. Natural killer cells attack a variety of infectious microbes and certain tumor cells.

One reason that HIV poses significant management challenges is because the virus directly targets T cells by gaining entry through a receptor. Once inside the cell, HIV then multiplies using the T cell's own genetic machinery. After the HIV virus replicates, it is transmitted directly from the infected T cell to macrophages. The presence of HIV can remain unrecognized for an extensive period of time before full disease symptoms develop.

Platelets and Coagulation Factors

Blood must clot to heal wounds and prevent excess blood loss. Small cell fragments called platelets (thrombocytes) are attracted to the wound site where they adhere by extending many projections and releasing their contents. These contents activate other platelets and also interact with other coagulation factors, which convert fibrinogen, a water-soluble protein present in blood serum into fibrin (a non-water soluble protein), causing the blood to clot. Many of the clotting factors require vitamin K to work, and vitamin K deficiency can lead to problems with blood clotting. Many platelets converge and stick together at the wound site forming a platelet plug (also called a fibrin clot), as illustrated in Figure 10.3.4b. The plug or clot lasts for a number of days and stops the loss of blood. Platelets are formed from the disintegration of larger cells called megakaryocytes, like that shown in Figure 10.3.4a. For each megakaryocyte, 2000–3000 platelets are formed with 150,000 to 400,000 platelets present in each cubic millimeter of blood. Each platelet is disc shaped and 2–4 μm in diameter. They contain many small vesicles but do not contain a nucleus.

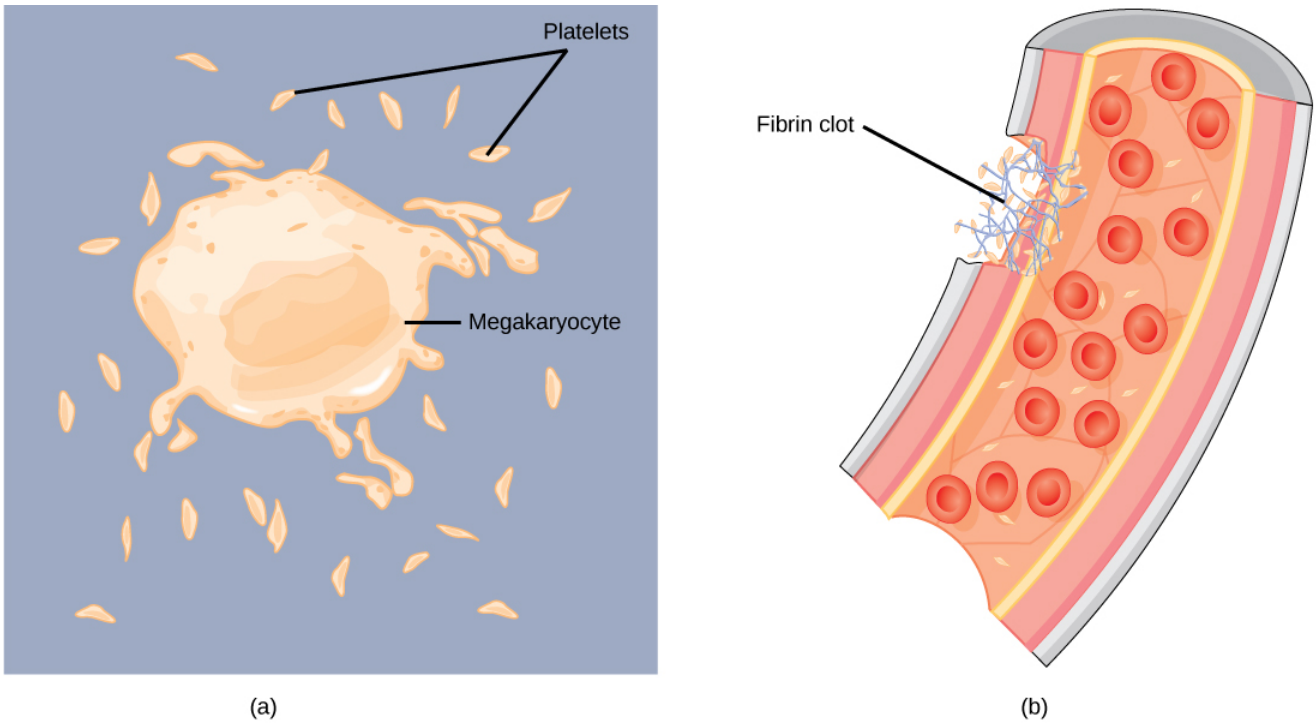


Figure 10.3.4: (a) Platelets are formed from large cells called megakaryocytes. The megakaryocyte breaks up into thousands of fragments that become platelets. (b) Platelets are required for clotting of the blood. The platelets collect at a wound site in conjunction with other clotting factors, such as fibrinogen, to form a fibrin clot that prevents blood loss and allows the wound to heal.

Plasma and Serum

The liquid component of blood is called plasma, and it is separated by spinning or centrifuging the blood at high rotations (3000 rpm or higher). The blood cells and platelets are separated by centrifugal forces to the bottom of a specimen tube. The upper liquid layer, the plasma, consists of 90 percent water along with various substances required for maintaining the body's pH, osmotic load, and for protecting the body. The plasma also contains the coagulation factors and antibodies.

The plasma component of blood without the coagulation factors is called the serum. Serum is similar to interstitial fluid in which the correct composition of key ions acting as electrolytes is essential for normal functioning of muscles and nerves. Other components in the serum include proteins that assist with maintaining pH and osmotic balance while giving viscosity to the blood. The serum also contains antibodies, specialized proteins that are important for defense against viruses and bacteria. Lipids, including cholesterol, are also transported in the serum, along with various other substances including nutrients, hormones, metabolic waste, plus external substances, such as, drugs, viruses, and bacteria.

Human serum albumin is the most abundant protein in human blood plasma and is synthesized in the liver. Albumin, which constitutes about half of the blood serum protein, transports hormones and fatty acids, buffers pH, and maintains osmotic pressures. Immunoglobin is a protein antibody produced in the mucosal lining and plays an important role in antibody mediated immunity.

Evolution Connection: Blood Types

Related to Proteins on the Surface of the Red Blood Cells Red blood cells are coated in antigens made of glycolipids and glycoproteins. The composition of these molecules is determined by genetics, which have evolved over time. In humans, the different surface antigens are grouped into 24 different blood groups with more than 100 different antigens on each red blood cell. The two most well known blood groups are the ABO, shown in Figure 10.3.5, and Rh systems. The surface antigens in the ABO blood group are glycolipids, called antigen A and antigen B. People with blood type A have antigen A, those with blood type B have antigen B, those with blood type AB have both antigens, and people with blood type O have neither antigen. Antibodies called agglutinougens are found in the blood plasma and react with the A or B antigens, if the two are mixed. When type A and type B blood are combined, agglutination (clumping) of the blood occurs because of antibodies in the plasma that bind with the opposing antigen; this causes clots that coagulate in the kidney causing kidney failure. Type O blood has neither

A or B antigens, and therefore, type O blood can be given to all blood types. Type O negative blood is the universal donor. Type AB positive blood is the universal acceptor because it has both A and B antigen. The ABO blood groups were discovered in 1900 and 1901 by Karl Landsteiner at the University of Vienna.

The Rh blood group was first discovered in Rhesus monkeys. Most people have the Rh antigen (Rh+) and do not have anti-Rh antibodies in their blood. The few people who do not have the Rh antigen and are Rh– can develop anti-Rh antibodies if exposed to Rh+ blood. This can happen after a blood transfusion or after an Rh– woman has an Rh+ baby. The first exposure does not usually cause a reaction; however, at the second exposure, enough antibodies have built up in the blood to produce a reaction that causes agglutination and breakdown of red blood cells. An injection can prevent this reaction.

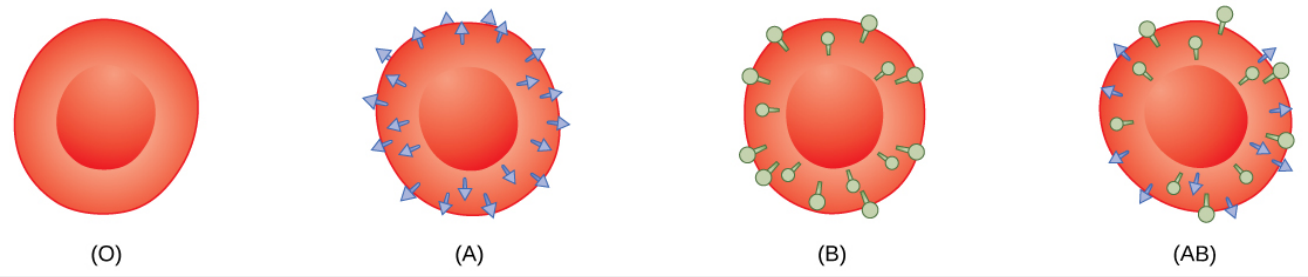


Figure 10.3.5: Human red blood cells may have either type A or B glycoproteins on their surface, both glycoproteins combined (AB), or neither (O). The glycoproteins serve as antigens and can elicit an immune response in a person who receives a transfusion containing unfamiliar antigens. Type O blood, which has no A or B antigens, does not elicit an immune response when injected into a person of any blood type. Thus, O is considered the universal donor. Persons with type AB blood can accept blood from any blood type, and type AB is considered the universal acceptor.

Summary

Specific components of the blood include red blood cells, white blood cells, platelets, and the plasma, which contains coagulation factors and serum. Blood is important for regulation of the body's pH, temperature, osmotic pressure, the circulation of nutrients and removal of waste, the distribution of hormones from endocrine glands, and the elimination of excess heat; it also contains components for blood clotting. Red blood cells are specialized cells that contain hemoglobin and circulate through the body delivering oxygen to cells. White blood cells are involved in the immune response to identify and target invading bacteria, viruses, and other foreign organisms; they also recycle waste components, such as old red blood cells. Platelets and blood clotting factors cause the change of the soluble protein fibrinogen to the insoluble protein fibrin at a wound site forming a plug. Plasma consists of 90 percent water along with various substances, such as coagulation factors and antibodies. The serum is the plasma component of the blood without the coagulation factors.

Glossary

plasma
liquid component of blood that is left after the cells are removed

platelet
(also, thrombocyte) small cellular fragment that collects at wounds, cross-reacts with clotting factors, and forms a plug to prevent blood loss

red blood cell
small (7–8 µm) biconcave cell without mitochondria (and in mammals without nuclei) that is packed with hemoglobin, giving the cell its red color; transports oxygen through the body

serum
plasma without the coagulation factors

white blood cell

large (30 μm) cell with nuclei of which there are many types with different roles including the protection of the body from viruses and bacteria, and cleaning up dead cells and other waste

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10.4: Mammalian Heart and Blood Vessels

Skills to Develop

- Describe the structure of the heart and explain how cardiac muscle is different from other muscles
- Describe the cardiac cycle
- Explain the structure of arteries, veins, and capillaries, and how blood flows through the body

The heart is a complex muscle that pumps blood through the three divisions of the circulatory system: the coronary (vessels that serve the heart), pulmonary (heart and lungs), and systemic (systems of the body), as shown in Figure 10.4.1. Coronary circulation intrinsic to the heart takes blood directly from the main artery (aorta) coming from the heart. For pulmonary and systemic circulation, the heart has to pump blood to the lungs or the rest of the body, respectively. In vertebrates, the lungs are relatively close to the heart in the thoracic cavity. The shorter distance to pump means that the muscle wall on the right side of the heart is not as thick as the left side which must have enough pressure to pump blood all the way to your big toe.

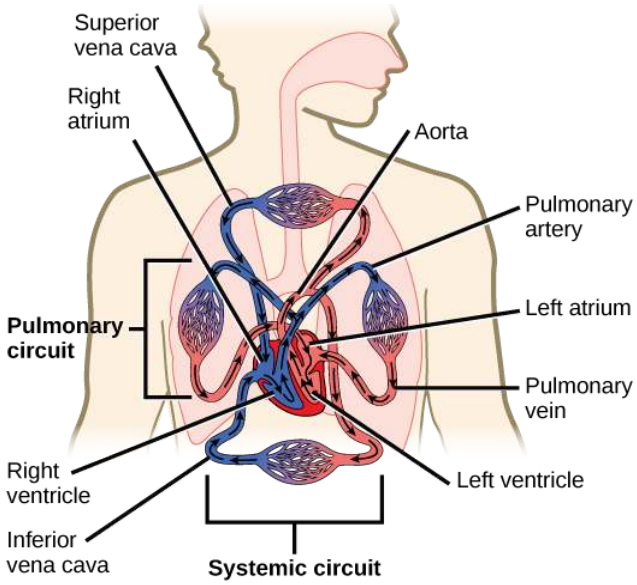


Figure 10.4.1: The mammalian circulatory system is divided into three circuits: the systemic circuit, the pulmonary circuit, and the coronary circuit. Blood is pumped from veins of the systemic circuit into the right atrium of the heart, then into the right ventricle. Blood then enters the pulmonary circuit, and is oxygenated by the lungs. From the pulmonary circuit, blood re-enters the heart through the left atrium. From the left ventricle, blood re-enters the systemic circuit through the aorta and is distributed to the rest of the body. The coronary circuit, which provides blood to the heart, is not shown.

Exercise

Which of the following statements about the circulatory system is false?

A. Blood in the pulmonary vein is deoxygenated.
B. Blood in the inferior vena cava is deoxygenated.
C. Blood in the pulmonary artery is deoxygenated.
D. Blood in the aorta is oxygenated.

Answer

C

Structure of the Heart

The heart muscle is asymmetrical as a result of the distance blood must travel in the pulmonary and systemic circuits. Since the right side of the heart sends blood to the pulmonary circuit it is smaller than the left side which must send blood out to the whole

body in the systemic circuit, as shown in Figure 10.4.2. In humans, the heart is about the size of a clenched fist; it is divided into four chambers: two atria and two ventricles. There is one atrium and one ventricle on the right side and one atrium and one ventricle on the left side. The atria are the chambers that receive blood, and the ventricles are the chambers that pump blood. The right atrium receives deoxygenated blood from the superior vena cava, which drains blood from the jugular vein that comes from the brain and from the veins that come from the arms, as well as from the inferior vena cava which drains blood from the veins that come from the lower organs and the legs. In addition, the right atrium receives blood from the coronary sinus which drains deoxygenated blood from the heart itself. This deoxygenated blood then passes to the right ventricle through the atrioventricular valve or the tricuspid valve, a flap of connective tissue that opens in only one direction to prevent the backflow of blood.

The valve separating the chambers on the left side of the heart valve is called the biscuspid or mitral valve. After it is filled, the right ventricle pumps the blood through the pulmonary arteries, by-passing the semilunar valve (or pulmonic valve) to the lungs for re-oxygenation. After blood passes through the pulmonary arteries, the right semilunar valves close preventing the blood from flowing backwards into the right ventricle. The left atrium then receives the oxygen-rich blood from the lungs via the pulmonary veins. This blood passes through the bicuspid valve or mitral valve (the atrioventricular valve on the left side of the heart) to the left ventricle where the blood is pumped out through aorta, the major artery of the body, taking oxygenated blood to the organs and muscles of the body. Once blood is pumped out of the left ventricle and into the aorta, the aortic semilunar valve (or aortic valve) closes preventing blood from flowing backward into the left ventricle. This pattern of pumping is referred to as double circulation and is found in all mammals.

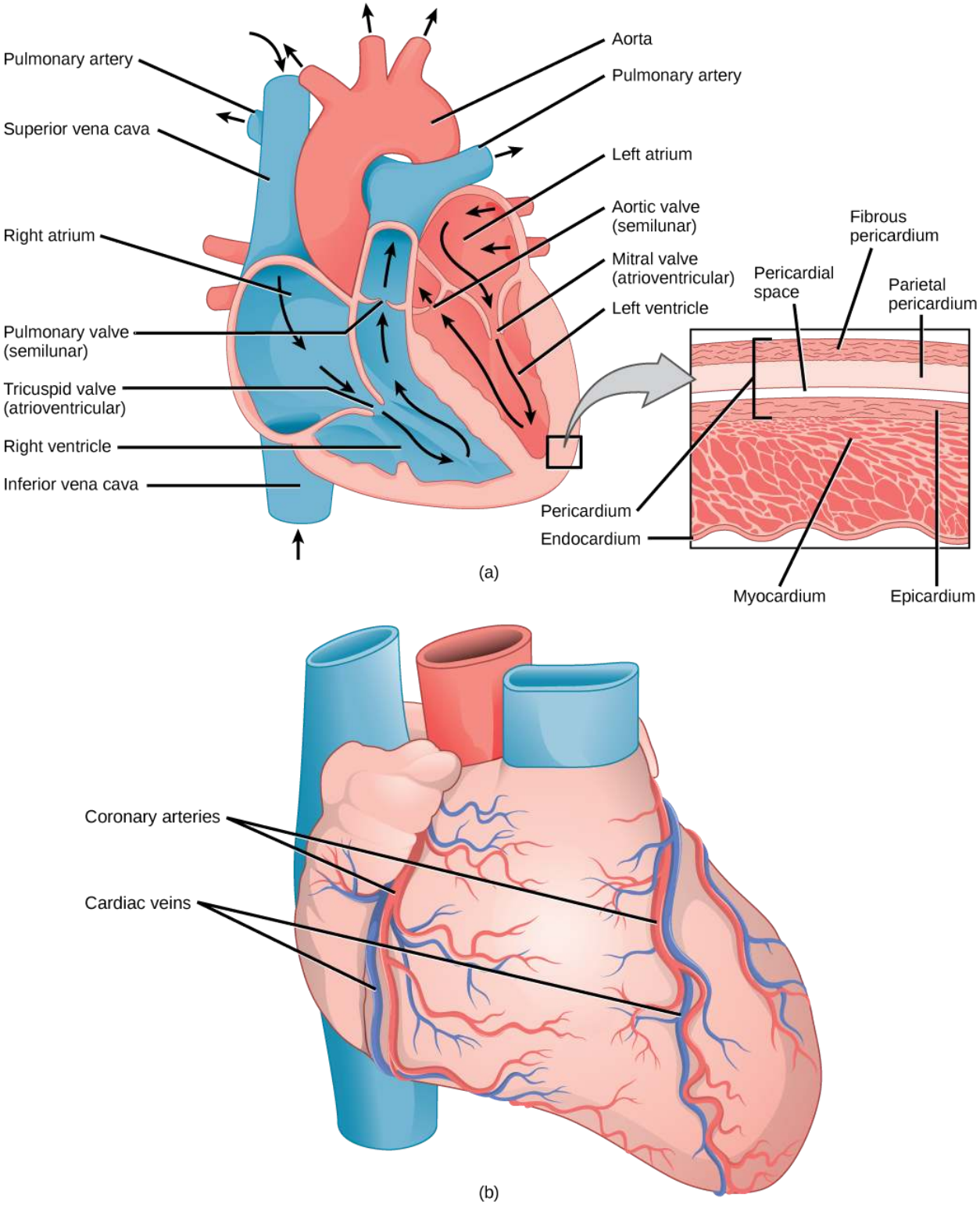


Figure 10.4.2: (a) The heart is primarily made of a thick muscle layer, called the myocardium, surrounded by membranes. One-way valves separate the four chambers. (b) Blood vessels of the coronary system, including the coronary arteries and veins, keep the heart musculature oxygenated.

Exercise

Which of the following statements about the heart is false?

A. The mitral valve separates the left ventricle from the left atrium.
B. Blood travels through the bicuspid valve to the left atrium.
C. Both the aortic and the pulmonary valves are semilunar valves.
D. The mitral valve is an atrioventricular valve.

Answer

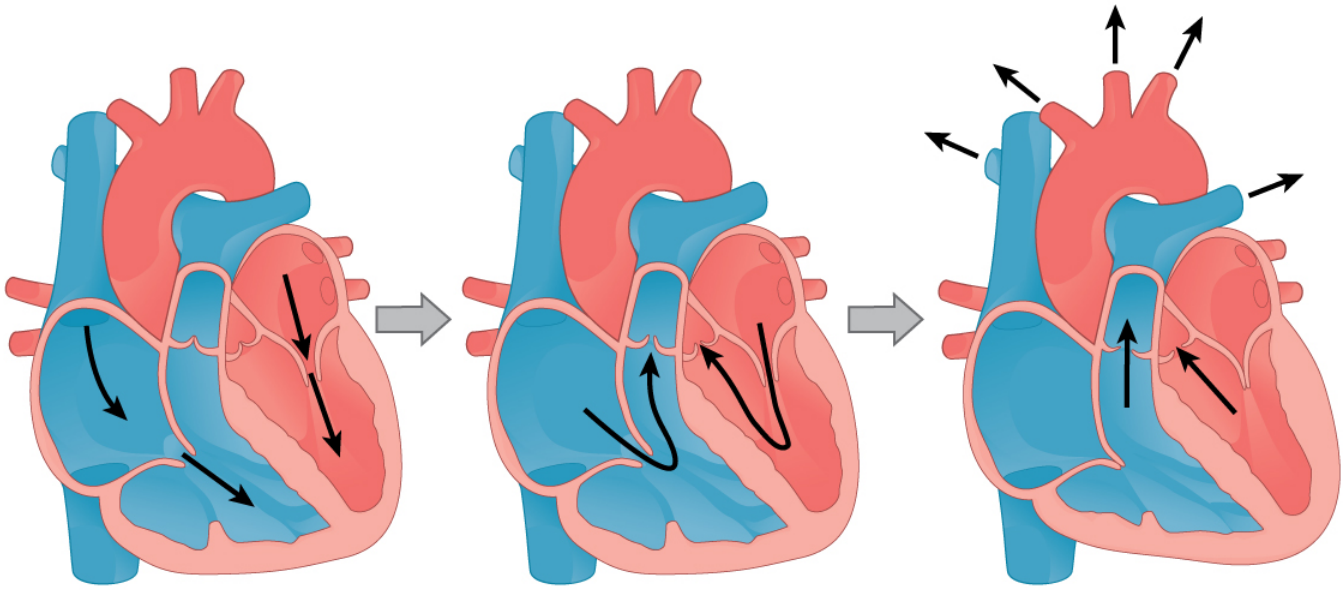
B

The heart is composed of three layers; the epicardium, the myocardium, and the endocardium, illustrated in Figure 10.4.2. The inner wall of the heart has a lining called the endocardium. The myocardium consists of the heart muscle cells that make up the middle layer and the bulk of the heart wall. The outer layer of cells is called the epicardium, of which the second layer is a membranous layered structure called the pericardium that surrounds and protects the heart; it allows enough room for vigorous pumping but also keeps the heart in place to reduce friction between the heart and other structures.

The heart has its own blood vessels that supply the heart muscle with blood. The coronary arteries branch from the aorta and surround the outer surface of the heart like a crown. They diverge into capillaries where the heart muscle is supplied with oxygen before converging again into the coronary veins to take the deoxygenated blood back to the right atrium where the blood will be re-oxygenated through the pulmonary circuit. The heart muscle will die without a steady supply of blood. Atherosclerosis is the blockage of an artery by the buildup of fatty plaques. Because of the size (narrow) of the coronary arteries and their function in serving the heart itself, atherosclerosis can be deadly in these arteries. The slowdown of blood flow and subsequent oxygen deprivation that results from atherosclerosis causes severe pain, known as angina, and complete blockage of the arteries will cause myocardial infarction: the death of cardiac muscle tissue, commonly known as a heart attack.

The Cardiac Cycle

The main purpose of the heart is to pump blood through the body; it does so in a repeating sequence called the cardiac cycle. The cardiac cycle is the coordination of the filling and emptying of the heart of blood by electrical signals that cause the heart muscles to contract and relax. The human heart beats over 100,000 times per day. In each cardiac cycle, the heart contracts (systole), pushing out the blood and pumping it through the body; this is followed by a relaxation phase (diastole), where the heart fills with blood, as illustrated in Figure 10.4.3. The atria contract at the same time, forcing blood through the atrioventricular valves into the ventricles. Closing of the atrioventricular valves produces a monosyllabic “lup” sound. Following a brief delay, the ventricles contract at the same time forcing blood through the semilunar valves into the aorta and the artery transporting blood to the lungs (via the pulmonary artery). Closing of the semilunar valves produces a monosyllabic “dup” sound.



(a) Cardiac diastole: all chambers are relaxed, and blood flows into the heart.

(b) Atrial systole, ventricular diastole: atria contract, pushing blood into the ventricles.

(c) Atrial diastole, ventricular systole: after the atria relax, the ventricles contract, pushing blood out of the heart.

Figure 10.4.3: During (a) cardiac diastole, the heart muscle is relaxed and blood flows into the heart. During (b) atrial systole, the atria contract, pushing blood into the ventricles. During (c) atrial diastole, the ventricles contract, forcing blood out of the heart.

The pumping of the heart is a function of the cardiac muscle cells, or cardiomyocytes, that make up the heart muscle. Cardiomyocytes, shown in Figure 10.4.4, are distinctive muscle cells that are striated like skeletal muscle but pump rhythmically and involuntarily like smooth muscle; they are connected by intercalated disks exclusive to cardiac muscle. They are self-stimulated for a period of time and isolated cardiomyocytes will beat if given the correct balance of nutrients and electrolytes.

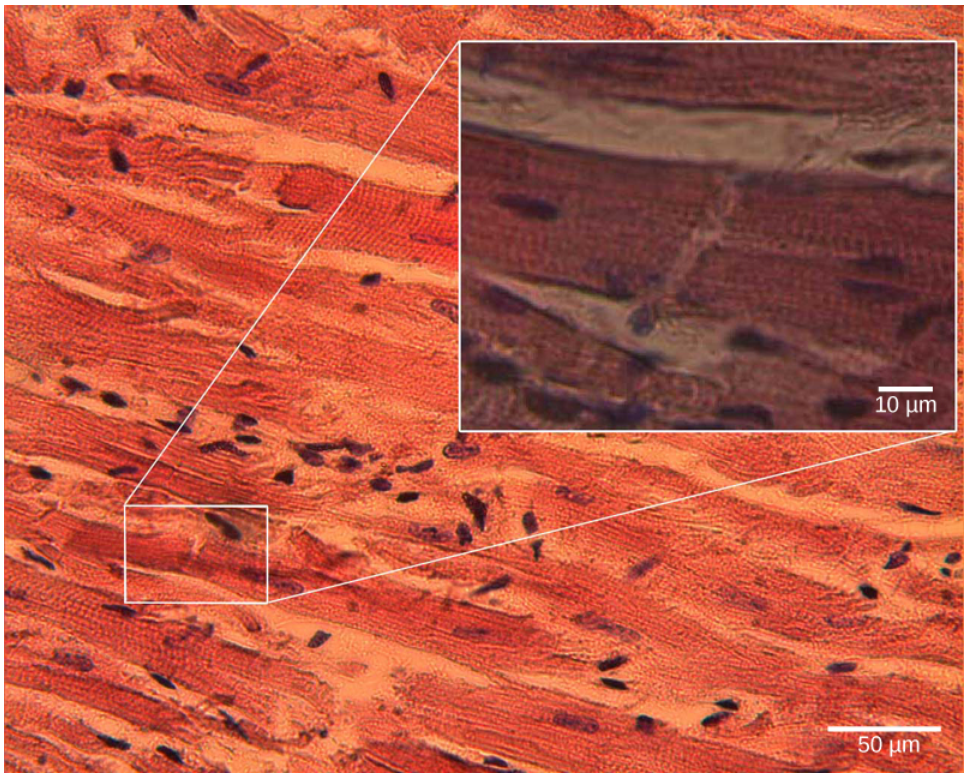


Figure 10.4.4: Cardiomyocytes are striated muscle cells found in cardiac tissue. (credit: modification of work by Dr. S. Girod, Anton Becker; scale-bar data from Matt Russell)

The autonomous beating of cardiac muscle cells is regulated by the heart's internal pacemaker that uses electrical signals to time the beating of the heart. The electrical signals and mechanical actions, illustrated in Figure 10.4.5, are intimately intertwined. The internal pacemaker starts at the sinoatrial (SA) node, which is located near the wall of the right atrium. Electrical charges spontaneously pulse from the SA node causing the two atria to contract in unison. The pulse reaches a second node, called the atrioventricular (AV) node, between the right atrium and right ventricle where it pauses for approximately 0.1 second before spreading to the walls of the ventricles. From the AV node, the electrical impulse enters the bundle of His, then to the left and right bundle branches extending through the interventricular septum. Finally, the Purkinje fibers conduct the impulse from the apex of the heart up the ventricular myocardium, and then the ventricles contract. This pause allows the atria to empty completely into the ventricles before the ventricles pump out the blood. The electrical impulses in the heart produce electrical currents that flow through the body and can be measured on the skin using electrodes. This information can be observed as an electrocardiogram (ECG)—a recording of the electrical impulses of the cardiac muscle.

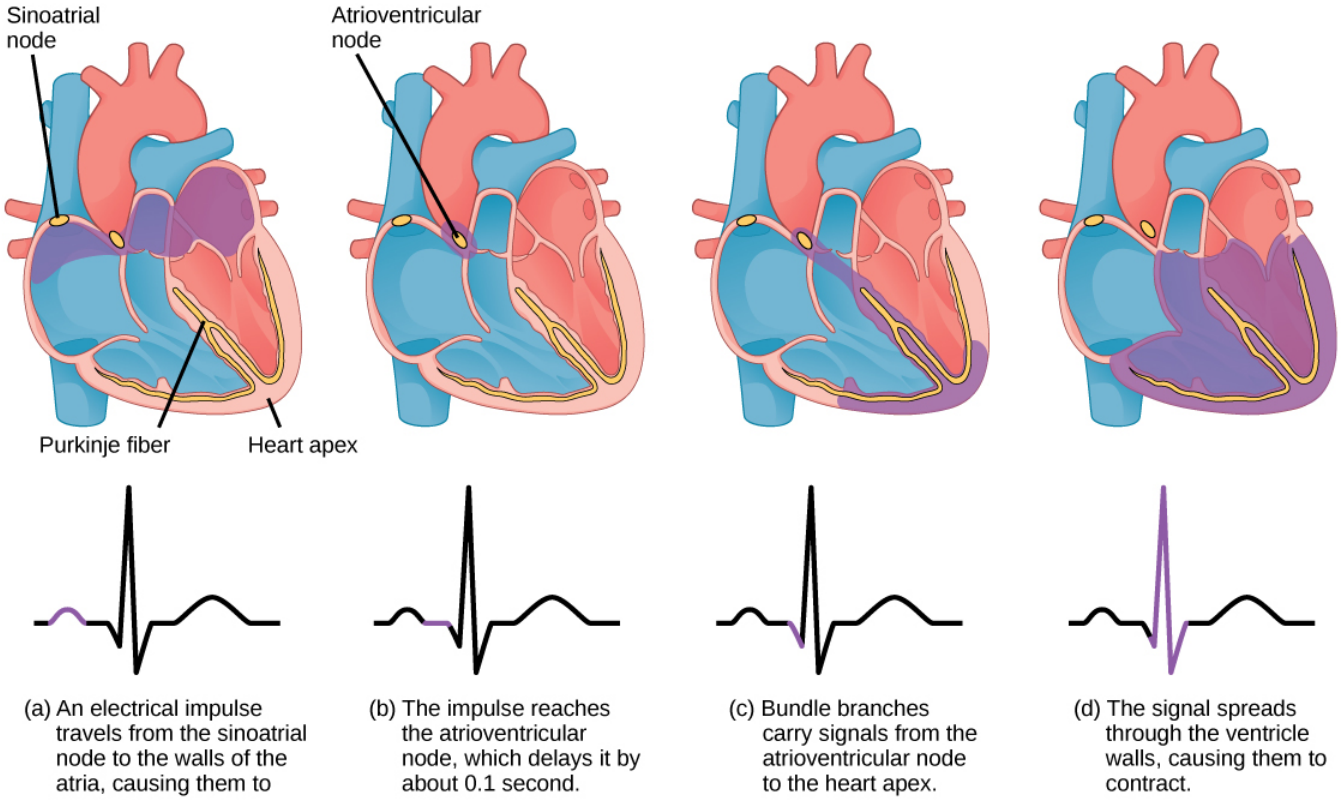
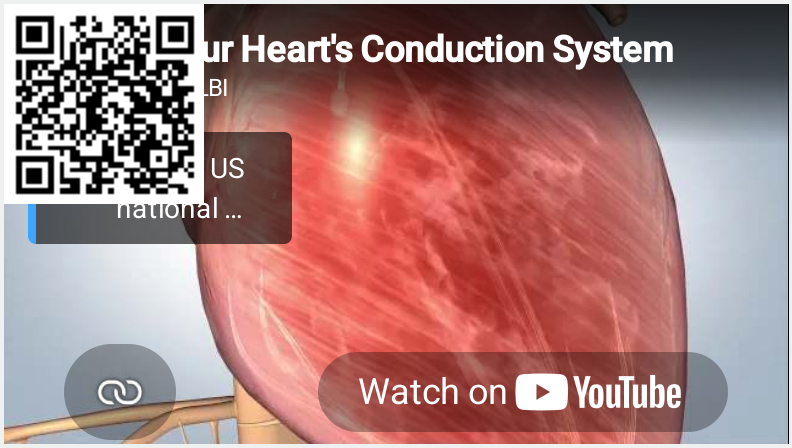


Figure 10.4.5: The beating of the heart is regulated by an electrical impulse that causes the characteristic reading of an ECG. The signal is initiated at the sinoatrial valve. The signal then (a) spreads to the atria, causing them to contract. The signal is (b) delayed at the atrioventricular node before it is passed on to the (c) heart apex. The delay allows the atria to relax before the (d) ventricles contract. The final part of the ECG cycle prepares the heart for the next beat.

Link to Learning



Visit this site and select the dropdown "Your Heart's Electrical System" to see the heart's "pacemaker" in action.

Arteries, Veins, and Capillaries

The blood from the heart is carried through the body by a complex network of blood vessels (Figure 10.4.6). Arteries take blood away from the heart. The main artery is the aorta that branches into major arteries that take blood to different limbs and organs. These major arteries include the carotid artery that takes blood to the brain, the brachial arteries that take blood to the arms, and the thoracic artery that takes blood to the thorax and then into the hepatic, renal, and gastric arteries for the liver, kidney, and stomach, respectively. The iliac artery takes blood to the lower limbs. The major arteries diverge into minor arteries, and then smaller vessels called arterioles, to reach more deeply into the muscles and organs of the body.

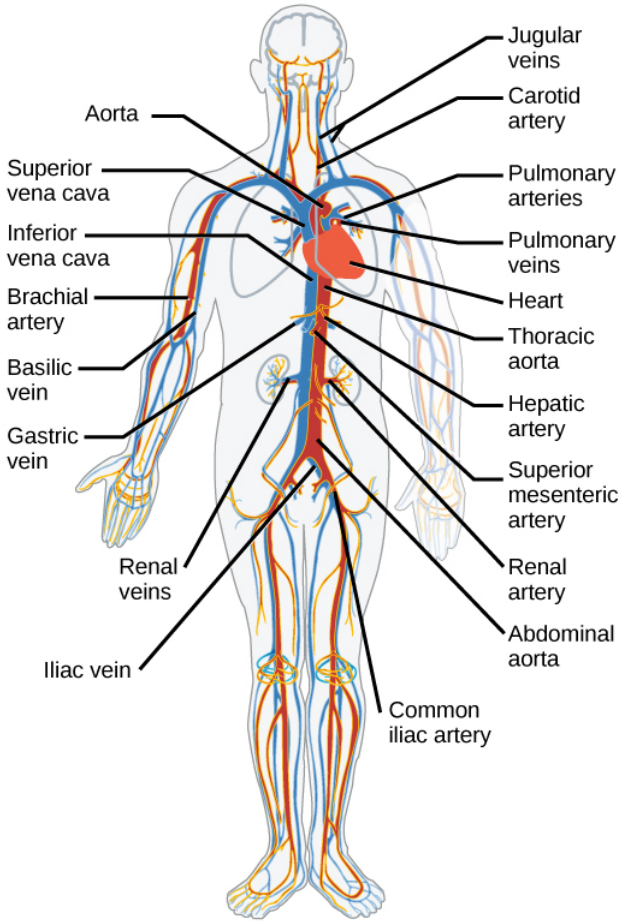


Figure 10.4.6: The major human arteries and veins are shown. (credit: modification of work by Mariana Ruiz Villareal)

Arterioles diverge into capillary beds. Capillary beds contain a large number (10 to 100) of capillaries that branch among the cells and tissues of the body. Capillaries are narrow-diameter tubes that can fit red blood cells through in single file and are the sites for the exchange of nutrients, waste, and oxygen with tissues at the cellular level. Fluid also crosses into the interstitial space from the capillaries. The capillaries converge again into venules that connect to minor veins that finally connect to major veins that take blood high in carbon dioxide back to the heart. Veins are blood vessels that bring blood back to the heart. The major veins drain blood from the same organs and limbs that the major arteries supply. Fluid is also brought back to the heart via the lymphatic system.

The structure of the different types of blood vessels reflects their function or layers. There are three distinct layers, or tunics, that form the walls of blood vessels (Figure 10.4.7). The first tunic is a smooth, inner lining of endothelial cells that are in contact with the red blood cells. The endothelial tunic is continuous with the endocardium of the heart. In capillaries, this single layer of cells is the location of diffusion of oxygen and carbon dioxide between the endothelial cells and red blood cells, as well as the exchange site via endocytosis and exocytosis. The movement of materials at the site of capillaries is regulated by vasoconstriction, narrowing of the blood vessels, and vasodilation, widening of the blood vessels; this is important in the overall regulation of blood pressure.

Veins and arteries both have two further tunics that surround the endothelium: the middle tunic is composed of smooth muscle and the outermost layer is connective tissue (collagen and elastic fibers). The elastic connective tissue stretches and supports the blood vessels, and the smooth muscle layer helps regulate blood flow by altering vascular resistance through vasoconstriction and vasodilation. The arteries have thicker smooth muscle and connective tissue than the veins to accommodate the higher pressure and speed of freshly pumped blood. The veins are thinner walled as the pressure and rate of flow are much lower. In addition, veins are structurally different than arteries in that veins have valves to prevent the backflow of blood. Because veins have to work against gravity to get blood back to the heart, contraction of skeletal muscle assists with the flow of blood back to the heart.

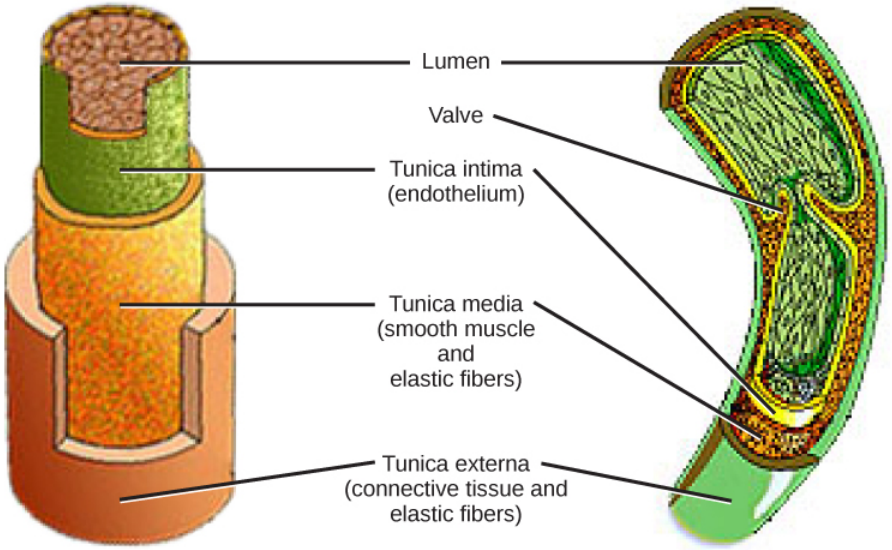


Figure 10.4.7: Arteries and veins consist of three layers: an outer tunica externa, a middle tunica media, and an inner tunica intima. Capillaries consist of a single layer of epithelial cells, the tunica intima. (credit: modification of work by NCI, NIH)

Summary

The heart muscle pumps blood through three divisions of the circulatory system: coronary, pulmonary, and systemic. There is one atrium and one ventricle on the right side and one atrium and one ventricle on the left side. The pumping of the heart is a function of cardiomyocytes, distinctive muscle cells that are striated like skeletal muscle but pump rhythmically and involuntarily like smooth muscle. The internal pacemaker starts at the sinoatrial node, which is located near the wall of the right atrium. Electrical charges pulse from the SA node causing the two atria to contract in unison; then the pulse reaches the atrioventricular node between the right atrium and right ventricle. A pause in the electric signal allows the atria to empty completely into the ventricles before the ventricles pump out the blood. The blood from the heart is carried through the body by a complex network of blood vessels; arteries take blood away from the heart, and veins bring blood back to the heart.

Glossary

angina
pain caused by partial blockage of the coronary arteries by the buildup of plaque and lack of oxygen to the heart muscle

aorta
major artery of the body that takes blood away from the heart

arteriole
small vessel that connects an artery to a capillary bed

artery
blood vessel that takes blood away from the heart

atherosclerosis
buildup of fatty plaques in the coronary arteries in the heart

atrioventricular valve
one-way membranous flap of connective tissue between the atrium and the ventricle in the right side of the heart; also known as tricuspid valve

bicuspid valve

(also, mitral valve; left atrioventricular valve) one-way membranous flap between the atrium and the ventricle in the left side of the heart

capillary
smallest blood vessel that allows the passage of individual blood cells and the site of diffusion of oxygen and nutrient exchange

capillary bed
large number of capillaries that converge to take blood to a particular organ or tissue

cardiac cycle
filling and emptying the heart of blood by electrical signals that cause the heart muscles to contract and relax

cardiomyocyte
specialized heart muscle cell that is striated but contracts involuntarily like smooth muscle

coronary artery
vessel that supplies the heart tissue with blood

coronary vein
vessel that takes blood away from the heart tissue back to the chambers in the heart

diastole
relaxation phase of the cardiac cycle when the heart is relaxed and the ventricles are filling with blood

electrocardiogram (ECG)
recording of the electrical impulses of the cardiac muscle

endocardium
innermost layer of tissue in the heart

epicardium
outermost tissue layer of the heart

inferior vena cava
drains blood from the veins that come from the lower organs and the legs

myocardial infarction
(also, heart attack) complete blockage of the coronary arteries and death of the cardiac muscle tissue

myocardium
heart muscle cells that make up the middle layer and the bulk of the heart wall

pericardium
membrane layer protecting the heart; also part of the epicardium

semilunar valve
membranous flap of connective tissue between the aorta and a ventricle of the heart (the aortic or pulmonary semilunar valves)

sinoatrial (SA) node
the heart’s internal pacemaker; located near the wall of the right atrium

superior vena cava
drains blood from the jugular vein that comes from the brain and from the veins that come from the arms

systole

contraction phase of cardiac cycle when the ventricles are pumping blood into the arteries

tricuspid valve

one-way membranous flap of connective tissue between the atrium and the ventricle in the right side of the heart; also known as atrioventricular valve

vasoconstriction

narrowing of a blood vessel

vasodilation

widening of a blood vessel

vein

blood vessel that brings blood back to the heart

vena cava

major vein of the body returning blood from the upper and lower parts of the body; see the superior vena cava and inferior vena cava

venule

blood vessel that connects a capillary bed to a vein

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10.5: Blood Flow and Blood Pressure Regulation

Skills to Develop

- Describe the system of blood flow through the body
- Describe how blood pressure is regulated

Blood pressure (BP) is the pressure exerted by blood on the walls of a blood vessel that helps to push blood through the body. Systolic blood pressure measures the amount of pressure that blood exerts on vessels while the heart is beating. The optimal systolic blood pressure is 120 mmHg. Diastolic blood pressure measures the pressure in the vessels between heartbeats. The optimal diastolic blood pressure is 80 mmHg. Many factors can affect blood pressure, such as hormones, stress, exercise, eating, sitting, and standing. Blood flow through the body is regulated by the size of blood vessels, by the action of smooth muscle, by one-way valves, and by the fluid pressure of the blood itself.

How Blood Flows Through the Body

Blood is pushed through the body by the action of the pumping heart. With each rhythmic pump, blood is pushed under high pressure and velocity away from the heart, initially along the main artery, the aorta. In the aorta, the blood travels at 30 cm/sec. As blood moves into the arteries, arterioles, and ultimately to the capillary beds, the rate of movement slows dramatically to about 0.026 cm/sec, one-thousand times slower than the rate of movement in the aorta. While the diameter of each individual arteriole and capillary is far narrower than the diameter of the aorta, and according to the law of continuity, fluid should travel faster through a narrower diameter tube, the rate is actually slower due to the overall diameter of all the combined capillaries being far greater than the diameter of the individual aorta.

The slow rate of travel through the capillary beds, which reach almost every cell in the body, assists with gas and nutrient exchange and also promotes the diffusion of fluid into the interstitial space. After the blood has passed through the capillary beds to the venules, veins, and finally to the main venae cavae, the rate of flow increases again but is still much slower than the initial rate in the aorta. Blood primarily moves in the veins by the rhythmic movement of smooth muscle in the vessel wall and by the action of the skeletal muscle as the body moves. Because most veins must move blood against the pull of gravity, blood is prevented from flowing backward in the veins by one-way valves. Because skeletal muscle contraction aids in venous blood flow, it is important to get up and move frequently after long periods of sitting so that blood will not pool in the extremities.

Blood flow through the capillary beds is regulated depending on the body's needs and is directed by nerve and hormone signals. For example, after a large meal, most of the blood is diverted to the stomach by vasodilation of vessels of the digestive system and vasoconstriction of other vessels. During exercise, blood is diverted to the skeletal muscles through vasodilation while blood to the digestive system would be lessened through vasoconstriction. The blood entering some capillary beds is controlled by small muscles, called precapillary sphincters, illustrated in Figure 10.5.1. If the sphincters are open, the blood will flow into the associated branches of the capillary blood. If all of the sphincters are closed, then the blood will flow directly from the arteriole to the venule through the thoroughfare channel (see Figure 10.5.1). These muscles allow the body to precisely control when capillary beds receive blood flow. At any given moment only about 5-10% of our capillary beds actually have blood flowing through them.

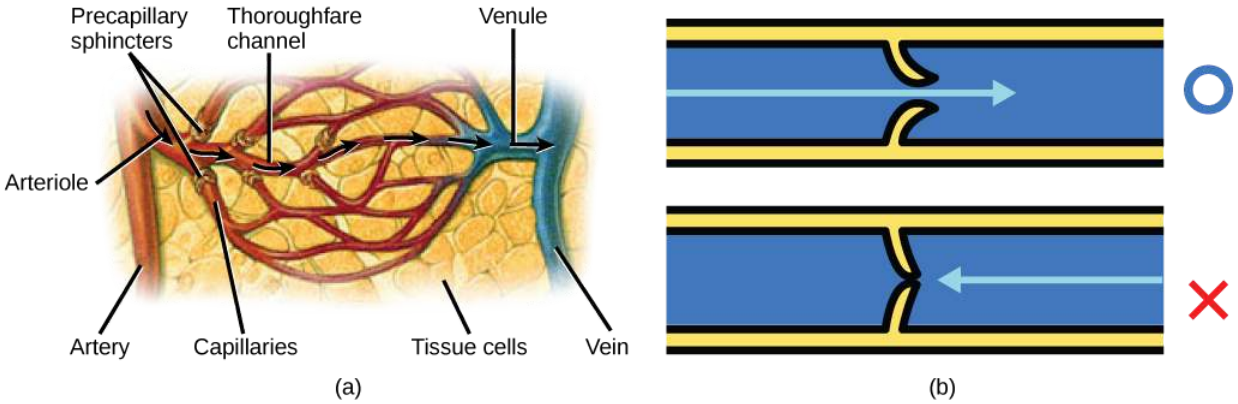


Figure 10.5.1: (a) Precapillary sphincters are rings of smooth muscle that regulate the flow of blood through capillaries; they help control the location of blood flow to where it is needed. (b) Valves in the veins prevent blood from moving backward. (credit a: modification of work by NCI)

Exercise

Varicose veins are veins that become enlarged because the valves no longer close properly, allowing blood to flow backward. Varicose veins are often most prominent on the legs. Why do you think this is the case?

Answer

Blood in the legs is farthest away from the heart and has to flow up to reach it.

Link to Learning



The circulatory system consisting of the heart, arteries, capillaries, and veins, is the pumping mechanism that transports blood throughout the body. Watch this video to see the circulatory system's blood flow.

Proteins and other large solutes cannot leave the capillaries. The loss of the watery plasma creates a hyperosmotic solution within the capillaries, especially near the venules. This causes about 85% of the plasma that leaves the capillaries to eventually diffuses back into the capillaries near the venules. The remaining 15% of blood plasma drains out from the interstitial fluid into nearby lymphatic vessels (Figure 10.5.2). The fluid in the lymph is similar in composition to the interstitial fluid. The lymph fluid passes through lymph nodes before it returns to the heart via the vena cava. Lymph nodes are specialized organs that filter the lymph by percolation through a maze of connective tissue filled with white blood cells. The white blood cells remove infectious agents, such as bacteria and viruses, to clean the lymph before it returns to the bloodstream. After it is cleaned, the lymph returns to the heart by the action of smooth muscle pumping, skeletal muscle action, and one-way valves joining the returning blood near the junction of the venae cavae entering the right atrium of the heart.

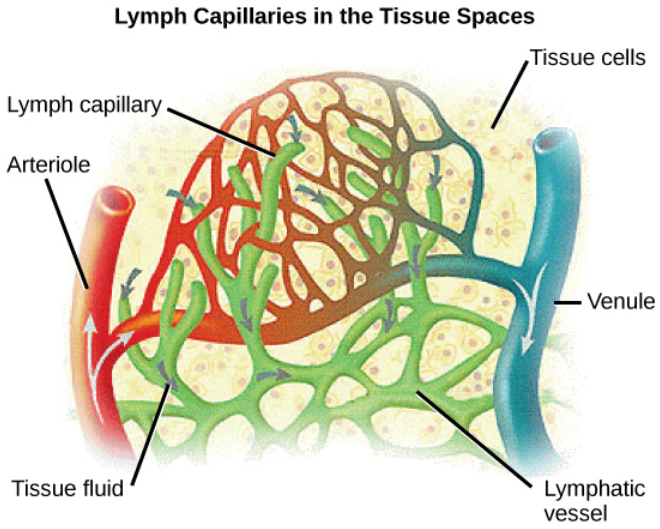


Figure 10.5.2: Fluid from the capillaries moves into the interstitial space and lymph capillaries by diffusion down a pressure gradient and also by osmosis. Out of 7,200 liters of fluid pumped by the average heart in a day, over 1,500 liters is filtered. (credit: modification of work by NCI, NIH)

Evolution Connection: Vertebrate Diversity in Blood Circulation

Blood circulation has evolved differently in vertebrates and may show variation in different animals for the required amount of pressure, organ and vessel location, and organ size. Animals with longs necks and those that live in cold environments have distinct blood pressure adaptations.

Long necked animals, such as giraffes, need to pump blood upward from the heart against gravity. The blood pressure required from the pumping of the left ventricle would be equivalent to 250 mm Hg (mm Hg = millimeters of mercury, a unit of pressure) to reach the height of a giraffe's head, which is 2.5 meters higher than the heart. However, if checks and balances were not in place, this blood pressure would damage the giraffe's brain, particularly if it was bending down to drink. These checks and balances include valves and feedback mechanisms that reduce the rate of cardiac output. Long-necked dinosaurs such as the sauropods had to pump blood even higher, up to ten meters above the heart. This would have required a blood pressure of more than 600 mm Hg, which could only have been achieved by an enormous heart. Evidence for such an enormous heart does not exist and mechanisms to reduce the blood pressure required include the slowing of metabolism as these animals grew larger. It is likely that they did not routinely feed on tree tops but grazed on the ground.

Living in cold water, whales need to maintain the temperature in their blood. This is achieved by the veins and arteries being close together so that heat exchange can occur. This mechanism is called a countercurrent heat exchanger. The blood vessels and the whole body are also protected by thick layers of blubber to prevent heat loss. In land animals that live in cold environments, thick fur and hibernation are used to retain heat and slow metabolism.

Blood Pressure

The pressure of the blood flow in the body is produced by the hydrostatic pressure of the fluid (blood) against the walls of the blood vessels. Fluid will move from areas of high to low hydrostatic pressures. In the arteries, the hydrostatic pressure near the heart is very high and blood flows to the arterioles where the rate of flow is slowed by the narrow openings of the arterioles. During systole, when new blood is entering the arteries, the artery walls stretch to accommodate the increase of pressure of the extra blood; during diastole, the walls return to normal because of their elastic properties. The blood pressure of the systole phase and the diastole phase, graphed in Figure 10.5.3, gives the two pressure readings for blood pressure. For example, 120/80 indicates a reading of 120 mm Hg during the systole and 80 mm Hg during diastole. Throughout the cardiac cycle, the blood continues to empty into the arterioles at a relatively even rate. This resistance to blood flow is called peripheral resistance.

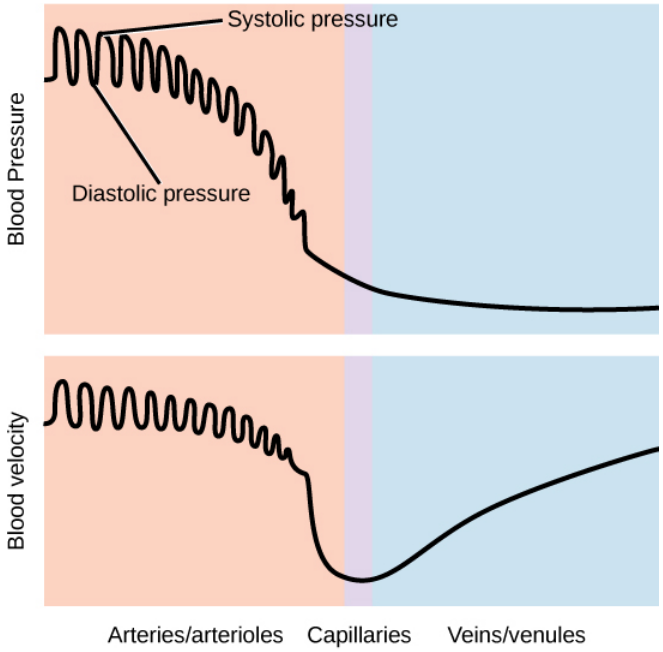


Figure 10.5.3: Blood pressure is related to the blood velocity in the arteries and arterioles. In the capillaries and veins, the blood pressure continues to decease but velocity increases.

Blood Pressure Regulation

Cardiac output is the volume of blood pumped by the heart in one minute. It is calculated by multiplying the number of heart contractions that occur per minute (heart rate) times the stroke volume (the volume of blood pumped into the aorta per contraction of the left ventricle). Therefore, cardiac output can be increased by increasing heart rate, as when exercising. However, cardiac output can also be increased by increasing stroke volume, such as if the heart contracts with greater strength. Stroke volume can also be increased by speeding blood circulation through the body so that more blood enters the heart between contractions. During heavy exertion, the blood vessels relax and increase in diameter, offsetting the increased heart rate and ensuring adequate oxygenated blood gets to the muscles. Stress triggers a decrease in the diameter of the blood vessels, consequently increasing blood pressure. These changes can also be caused by nerve signals or hormones, and even standing up or lying down can have a great effect on blood pressure.

Summary

Blood primarily moves through the body by the rhythmic movement of smooth muscle in the vessel wall and by the action of the skeletal muscle as the body moves. Blood is prevented from flowing backward in the veins by one-way valves. Blood flow through the capillary beds is controlled by precapillary sphincters to increase and decrease flow depending on the body's needs and is directed by nerve and hormone signals. Lymph vessels take fluid that has leaked out of the blood to the lymph nodes where it is cleaned before returning to the heart. During systole, blood enters the arteries, and the artery walls stretch to accommodate the extra blood. During diastole, the artery walls return to normal. The blood pressure of the systole phase and the diastole phase gives the two pressure readings for blood pressure.

Glossary

blood pressure (BP)
pressure of blood in the arteries that helps to push blood through the body

cardiac output
the volume of blood pumped by the heart in one minute as a product of heart rate multiplied by stroke volume

lymph node
specialized organ that contains a large number of macrophages that clean the lymph before the fluid is returned to the heart

peripheral resistance

resistance of the artery and blood vessel walls to the pressure placed on them by the force of the heart pumping

precapillary sphincter

small muscle that controls blood circulation in the capillary beds

stroke volume

the volume of blood pumped into the aorta per contraction of the left ventricle

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10.E: The Circulatory System (Exercises)

40.1: Overview of the Circulatory System

In all animals, except a few simple types, the circulatory system is used to transport nutrients and gases through the body. Simple diffusion allows some water, nutrient, waste, and gas exchange into primitive animals that are only a few cell layers thick; however, bulk flow is the only method by which the entire body of larger more complex organisms is accessed.

Review Questions

Why are open circulatory systems advantageous to some animals?

A. They use less metabolic energy.
B. They help the animal move faster.
C. They do not need a heart.
D. They help large insects develop.

Answer

A

Some animals use diffusion instead of a circulatory system. Examples include:

A. birds and jellyfish
B. flatworms and arthropods
C. mollusks and jellyfish
D. None of the above

Answer

D

Blood flow that is directed through the lungs and back to the heart is called _____.

A. unidirectional circulation
B. gill circulation
C. pulmonary circulation
D. pulmocutaneous circulation

Answer

C

Free Response

Describe a closed circulatory system.

Answer

A closed circulatory system is a closed-loop system, in which blood is not free in a cavity. Blood is separate from the bodily interstitial fluid and contained within blood vessels. In this type of system, blood circulates unidirectionally from the heart around the systemic circulatory route, and then returns to the heart.

Describe systemic circulation.

Answer

Systemic circulation flows through the systems of the body. The blood flows away from the heart to the brain, liver, kidneys, stomach, and other organs, the limbs, and the muscles of the body; it then returns to the heart.

40.2: Components of the Blood

Blood is the liquid that moves through the vessels and includes plasma (the liquid portion, which contains water, proteins, salts, lipids, and glucose) and the cells (red and white cells) and cell fragments called platelets. Blood plasma is actually the dominant component of blood and contains the water, proteins, electrolytes, lipids, and glucose. The cells are responsible for carrying the gases (red cells) and immune the response (white). The platelets are responsible for blood clotting.

Review Questions

White blood cells:

A. can be classified as granulocytes or agranulocytes
B. defend the body against bacteria and viruses
C. are also called leucocytes
D. All of the above

Answer

D

Platelet plug formation occurs at which point?

A. when large megakaryocytes break up into thousands of smaller fragments
B. when platelets are dispersed through the blood stream
C. when platelets are attracted to a site of blood vessel damage
D. none of the above

Answer

C

In humans, the plasma comprises what percentage of the blood?

A. 45 percent
B. 55 percent
C. 25 percent
D. 90 percent

Answer

B

The red blood cells of birds differ from mammalian red blood cells because:

A. they are white and have nuclei
B. they do not have nuclei
C. they have nuclei
D. they fight disease

Answer

C

Free Response

Describe the cause of different blood type groups.

Answer

Red blood cells are coated with proteins called antigens made of glycolipids and glycoproteins. When type A and type B blood are mixed, the blood agglutinates because of antibodies in the plasma that bind with the opposing antigen. Type O blood has no antigens. The Rh blood group has either the Rh antigen (Rh+) or no Rh antigen (Rh–).

List some of the functions of blood in the body.

Answer

Blood is important for regulation of the body's pH, temperature, and osmotic pressure, the circulation of nutrients and removal of wastes, the distribution of hormones from endocrine glands, the elimination of excess heat; it also contains components for the clotting of blood to prevent blood loss. Blood also transports clotting factors and disease-fighting agents.

How does the lymphatic system work with blood flow?

Answer

Lymph capillaries take fluid from the blood to the lymph nodes. The lymph nodes filter the lymph by percolation through connective tissue filled with white blood cells. The white blood cells remove infectious agents, such as bacteria and viruses, to clean the lymph before it returns to the bloodstream.

40.3: Mammalian Heart and Blood Vessels

The heart is a complex muscle that pumps blood through the three divisions of the circulatory system: the coronary (vessels that serve the heart), pulmonary (heart and lungs), and systemic (systems of the body). Coronary circulation intrinsic to the heart takes blood directly from the main artery (aorta) coming from the heart.

Review Questions

The heart's internal pacemaker beats by:

A. an internal implant that sends an electrical impulse through the heart
B. the excitation of cardiac muscle cells at the sinoatrial node followed by the atrioventricular node
C. the excitation of cardiac muscle cells at the atrioventricular node followed by the sinoatrial node
D. the action of the sinus

Answer

B

During the systolic phase of the cardiac cycle, the heart is _____.

A. contracting
B. relaxing
C. contracting and relaxing
D. filling with blood

Answer

A

Cardiomyocytes are similar to skeletal muscle because:

A. they beat involuntarily
B. they are used for weight lifting
C. they pulse rhythmically
D. they are striated

Answer

D

How do arteries differ from veins?

A. Arteries have thicker smooth muscle layers to accommodate the changes in pressure from the heart.
B. Arteries carry blood.
C. Arteries have thinner smooth muscle layers and valves and move blood by the action of skeletal muscle.
D. Arteries are thin walled and are used for gas exchange.

Answer

A

Free Response

Describe the cardiac cycle.

Answer

The heart receives an electrical signal from the sinoatrial node triggering the cardiac muscle cells in the atria to contract. The signal pauses at the atrioventricular node before spreading to the walls of the ventricles so the blood is pumped through the body. This is the systolic phase. The heart then relaxes in the diastole and fills again with blood.

What happens in capillaries?

Answer

The capillaries basically exchange materials with their surroundings. Their walls are very thin and are made of one or two layers of cells, where gases, nutrients, and waste are diffused. They are distributed as beds, complex networks that link arteries as well as veins.

40.4: Blood Flow and Blood Pressure Regulation

Blood pressure is the pressure exerted by blood on the walls of a blood vessel that helps to push blood through the body. Systolic blood pressure measures the amount of pressure that blood exerts on vessels while the heart is beating. The optimal systolic blood pressure is 120 mmHg. Diastolic blood pressure measures the pressure in the vessels between heartbeats. The optimal diastolic blood pressure is 80 mmHg.

Review Questions

High blood pressure would be a result of _____.

A. a high cardiac output and high peripheral resistance
B. a high cardiac output and low peripheral resistance
C. a low cardiac output and high peripheral resistance
D. a low cardiac output and low peripheral resistance

Answer

A

Free Response

How does blood pressure change during heavy exercise?

Answer

The heart rate increases, which increases the hydrostatic pressure against the artery walls. At the same time, the arterioles dilate in response to the increased exercise, which reduces peripheral resistance.

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CHAPTER OVERVIEW

11: Thermoregulation

11.1: Homeostasis

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11.1: Homeostasis

Skills to Develop

- Define homeostasis
- Describe the factors affecting homeostasis
- Discuss positive and negative feedback mechanisms used in homeostasis
- Describe thermoregulation of endothermic and ectothermic animals

Animal organs and organ systems constantly adjust to internal and external changes through a process called homeostasis (“steady state”). These changes might be in the level of glucose or calcium in blood or in external temperatures. Homeostasis means to maintain dynamic equilibrium in the body. It is dynamic because it is constantly adjusting to the changes that the body’s systems encounter. It is equilibrium because body functions are kept within specific ranges. Even an animal that is apparently inactive is maintaining this homeostatic equilibrium.

Homeostatic Process

The goal of homeostasis is the maintenance of equilibrium around a point or value called a set point. While there are normal fluctuations from the set point, the body’s systems will usually attempt to go back to this point. A change in the internal or external environment is called a stimulus and is detected by a receptor; the response of the system is to adjust the deviation parameter toward the set point. For instance, if the body becomes too warm, adjustments are made to cool the animal. If the blood’s glucose rises after a meal, adjustments are made to lower the blood glucose level by getting the nutrient into tissues that need it or to store it for later use.

Control of Homeostasis

When a change occurs in an animal’s environment, an adjustment must be made. The receptor senses the change in the environment, then sends a signal to the control center (in most cases, the brain) which in turn generates a response that is signaled to an effector. The effector is a muscle (that contracts or relaxes) or a gland that secretes. Homeostatsis is maintained by negative feedback loops. Positive feedback loops actually push the organism further out of homeostasis, but may be necessary for life to occur. Homeostasis is controlled by the nervous and endocrine system of mammals.

Negative Feedback Mechanisms

Any homeostatic process that changes the direction of the stimulus is a negative feedback loop. It may either increase or decrease the stimulus, but the stimulus is not allowed to continue as it did before the receptor sensed it. In other words, if a level is too high, the body does something to bring it down, and conversely, if a level is too low, the body does something to make it go up. Hence the term negative feedback. An example is animal maintenance of blood glucose levels. When an animal has eaten, blood glucose levels rise. This is sensed by the nervous system. Specialized cells in the pancreas sense this, and the hormone insulin is released by the endocrine system. Insulin causes blood glucose levels to decrease, as would be expected in a negative feedback system, as illustrated in Figure 11.1.1. However, if an animal has not eaten and blood glucose levels decrease, this is sensed in another group of cells in the pancreas, and the hormone glucagon is released causing glucose levels to increase. This is still a negative feedback loop, but not in the direction expected by the use of the term “negative.” Another example of an increase as a result of the feedback loop is the control of blood calcium. If calcium levels decrease, specialized cells in the parathyroid gland sense this and release parathyroid hormone (PTH), causing an increased absorption of calcium through the intestines and kidneys and, possibly, the breakdown of bone in order to liberate calcium. The effects of PTH are to raise blood levels of the element. Negative feedback loops are the predominant mechanism used in homeostasis.

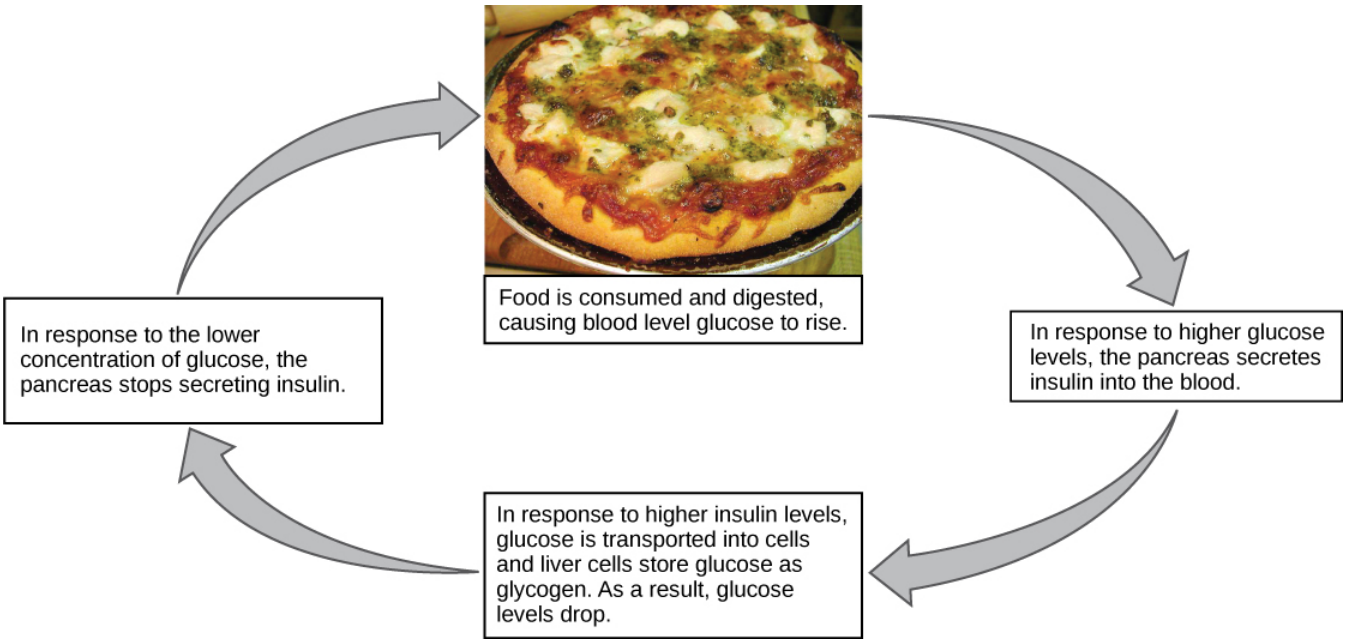


Figure 11.1.1: Blood sugar levels are controlled by a negative feedback loop. (credit: modification of work by Jon Sullivan)

Positive Feedback Loop

A positive feedback loop maintains the direction of the stimulus, possibly accelerating it. Few examples of positive feedback loops exist in animal bodies, but one is found in the cascade of chemical reactions that result in blood clotting, or coagulation. As one clotting factor is activated, it activates the next factor in sequence until a fibrin clot is achieved. The direction is maintained, not changed, so this is positive feedback. Another example of positive feedback is uterine contractions during childbirth, as illustrated in Figure 11.1.2. The hormone oxytocin, made by the endocrine system, stimulates the contraction of the uterus. This produces pain sensed by the nervous system. Instead of lowering the oxytocin and causing the pain to subside, more oxytocin is produced until the contractions are powerful enough to produce childbirth.

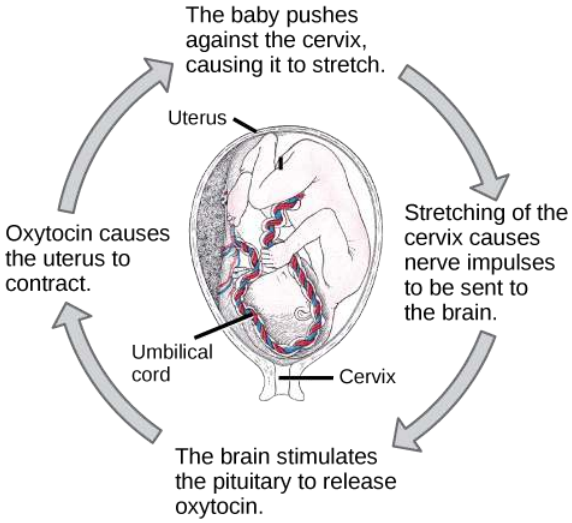


Figure 11.1.2: The birth of a human infant is the result of positive feedback.

Exercise

State whether each of the following processes is regulated by a positive feedback loop or a negative feedback loop.

A. A person feels satiated after eating a large meal.
B. The blood has plenty of red blood cells. As a result, erythropoietin, a hormone that stimulates the production of new red blood cells, is no longer released from the kidney.

Answer

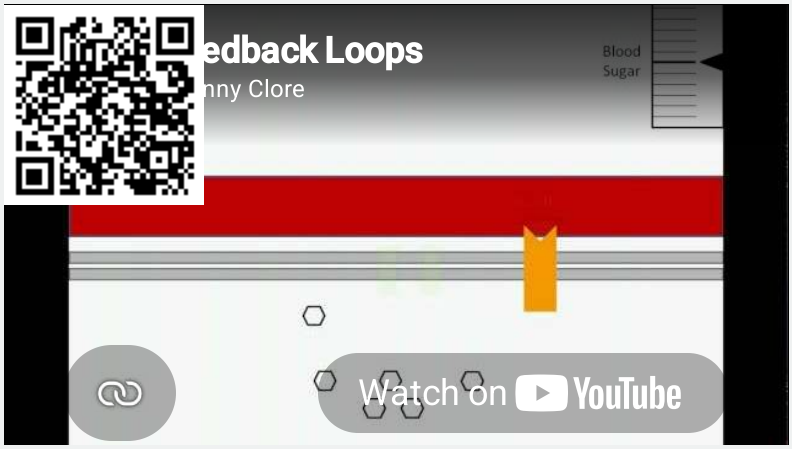
Both processes are the result of negative feedback loops. Negative feedback loops, which tend to keep a system at equilibrium, are more common than positive feedback loops.

Set Point

It is possible to adjust a system's set point. When this happens, the feedback loop works to maintain the new setting. An example of this is blood pressure: over time, the normal or set point for blood pressure can increase as a result of continued increases in blood pressure. The body no longer recognizes the elevation as abnormal and no attempt is made to return to the lower set point. The result is the maintenance of an elevated blood pressure that can have harmful effects on the body. Medication can lower blood pressure and lower the set point in the system to a more healthy level. This is called a process of alteration of the set point in a feedback loop.

Changes can be made in a group of body organ systems in order to maintain a set point in another system. This is called acclimatization. This occurs, for instance, when an animal migrates to a higher altitude than it is accustomed to. In order to adjust to the lower oxygen levels at the new altitude, the body increases the number of red blood cells circulating in the blood to ensure adequate oxygen delivery to the tissues. Another example of acclimatization is animals that have seasonal changes in their coats: a heavier coat in the winter ensures adequate heat retention, and a light coat in summer assists in keeping body temperature from rising to harmful levels.

Link to Learning



Feedback mechanisms can be understood in terms of driving a race car along a track: watch a short video lesson on positive and negative feedback loops.

Homeostasis: Thermoregulation

Body temperature affects body activities. Generally, as body temperature rises, enzyme activity rises as well. For every ten degree centigrade rise in temperature, enzyme activity doubles, up to a point. Body proteins, including enzymes, begin to denature and lose their function with high heat (around 50°C for mammals). Enzyme activity will decrease by half for every ten degree centigrade drop in temperature, to the point of freezing, with a few exceptions. Some fish can withstand freezing solid and return to normal with thawing.

Link to Learning



Watch this Discovery Channel video on thermoregulation to see illustrations of this process in a variety of animals.

Endotherms and Ectotherms

Animals can be divided into two groups: some maintain a constant body temperature in the face of differing environmental temperatures, while others have a body temperature that is the same as their environment and thus varies with the environment. Animals that do not control their body temperature are ectotherms. This group has been called cold-blooded, but the term may not apply to an animal in the desert with a very warm body temperature. In contrast to ectotherms, which rely on external temperatures to set their body temperatures, poikilotherms are animals with constantly varying internal temperatures. An animal that maintains a constant body temperature in the face of environmental changes is called a homeotherm. Endotherms are animals that rely on internal sources for body temperature but which can exhibit extremes in temperature. These animals are able to maintain a level of activity at cooler temperature, which an ectotherm cannot due to differing enzyme levels of activity.

Heat can be exchanged between an animal and its environment through four mechanisms: radiation, evaporation, convection, and conduction (Figure 11.1.3). Radiation is the emission of electromagnetic “heat” waves. Heat comes from the sun in this manner and radiates from dry skin the same way. Heat can be removed with liquid from a surface during evaporation. This occurs when a mammal sweats. Convection currents of air remove heat from the surface of dry skin as the air passes over it. Heat will be conducted from one surface to another during direct contact with the surfaces, such as an animal resting on a warm rock.



(a) Radiation (b) Evaporation



(c) Convection (d) Conduction

Figure 11.1.3: Heat can be exchanged by four mechanisms: (a) radiation, (b) evaporation, (c) convection, or (d) conduction. (credit b: modification of work by “Kullez”/Flickr; credit c: modification of work by Chad Rosenthal; credit d: modification of work by “stacey.d”/Flickr)

Heat Conservation and Dissipation

Animals conserve or dissipate heat in a variety of ways. In certain climates, endothermic animals have some form of insulation, such as fur, fat, feathers, or some combination thereof. Animals with thick fur or feathers create an insulating layer of air between their skin and internal organs. Polar bears and seals live and swim in a subfreezing environment and yet maintain a constant, warm, body temperature. The arctic fox, for example, uses its fluffy tail as extra insulation when it curls up to sleep in cold weather. Mammals have a residual effect from shivering and increased muscle activity: arrector pili muscles cause “goose bumps,” causing small hairs to stand up when the individual is cold; this has the intended effect of increasing body temperature. Mammals use layers of fat to achieve the same end. Loss of significant amounts of body fat will compromise an individual’s ability to conserve heat.

Endotherms use their circulatory systems to help maintain body temperature. Vasodilation brings more blood and heat to the body surface, facilitating radiation and evaporative heat loss, which helps to cool the body. Vasoconstriction reduces blood flow in peripheral blood vessels, forcing blood toward the core and the vital organs found there, and conserving heat. Some animals have adaptions to their circulatory system that enable them to transfer heat from arteries to veins, warming blood returning to the heart. This is called a countercurrent heat exchange; it prevents the cold venous blood from cooling the heart and other internal organs. This adaption can be shut down in some animals to prevent overheating the internal organs. The countercurrent adaption is found in many animals, including dolphins, sharks, bony fish, bees, and hummingbirds. In contrast, similar adaptations can help cool endotherms when needed, such as dolphin flukes and elephant ears.

Some ectothermic animals use changes in their behavior to help regulate body temperature. For example, a desert ectothermic animal may simply seek cooler areas during the hottest part of the day in the desert to keep from getting too warm. The same animals may climb onto rocks to capture heat during a cold desert night. Some animals seek water to aid evaporation in cooling them, as seen with reptiles. Other ectotherms use group activity such as the activity of bees to warm a hive to survive winter.

Many animals, especially mammals, use metabolic waste heat as a heat source. When muscles are contracted, most of the energy from the ATP used in muscle actions is wasted energy that translates into heat. Severe cold elicits a shivering reflex that generates heat for the body. Many species also have a type of adipose tissue called brown fat that specializes in generating heat.

Neural Control of Thermoregulation

The nervous system is important to thermoregulation, as illustrated in Figure 11.1.4. The processes of homeostasis and temperature control are centered in the hypothalamus of the advanced animal brain.

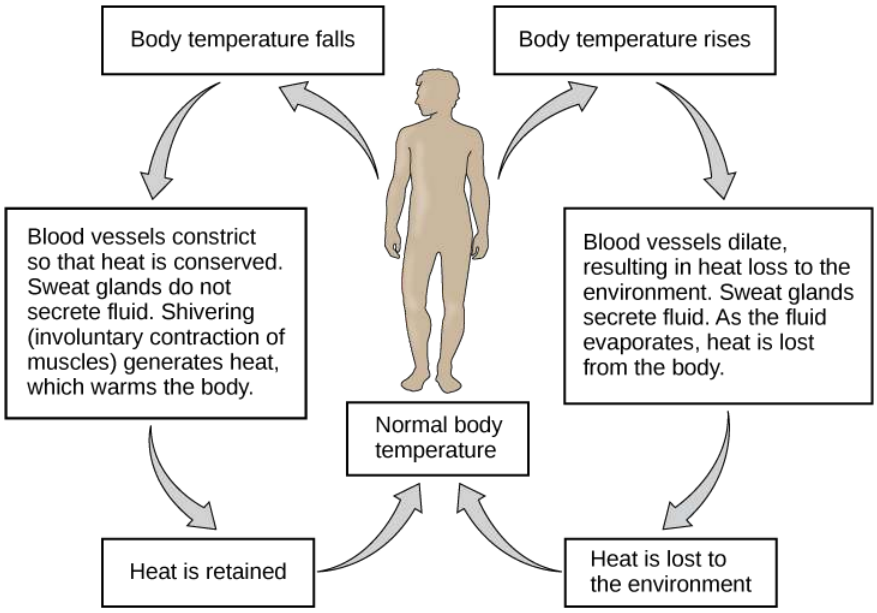


Figure 11.1.4: The body is able to regulate temperature in response to signals from the nervous system.

Exercise

When bacteria are destroyed by leuckocytes, pyrogens are released into the blood. Pyrogens reset the body's thermostat to a higher temperature, resulting in fever. How might pyrogens cause the body temperature to rise?

Answer

Pyrogens increase body temperature by causing the blood vessels to constrict, inducing shivering, and stopping sweat glands from secreting fluid.

The hypothalamus maintains the set point for body temperature through reflexes that cause vasodilation and sweating when the body is too warm, or vasoconstriction and shivering when the body is too cold. It responds to chemicals from the body. When a bacterium is destroyed by phagocytic leukocytes, chemicals called endogenous pyrogens are released into the blood. These pyrogens circulate to the hypothalamus and reset the thermostat. This allows the body's temperature to increase in what is commonly called a fever. An increase in body temperature causes iron to be conserved, which reduces a nutrient needed by bacteria. An increase in body heat also increases the activity of the animal's enzymes and protective cells while inhibiting the enzymes and activity of the invading microorganisms. Finally, heat itself may also kill the pathogen. A fever that was once thought to be a complication of an infection is now understood to be a normal defense mechanism.

Summary

Homeostasis is a dynamic equilibrium that is maintained in body tissues and organs. It is dynamic because it is constantly adjusting to the changes that the systems encounter. It is in equilibrium because body functions are kept within a normal range, with some fluctuations around a set point for the processes.

Glossary

acclimatization
alteration in a body system in response to environmental change

alteration
change of the set point in a homeostatic system

homeostasis
dynamic equilibrium maintaining appropriate body functions

negative feedback loop
feedback to a control mechanism that increases or decreases a stimulus instead of maintaining it

positive feedback loop
feedback to a control mechanism that continues the direction of a stimulus

set point
midpoint or target point in homeostasis

thermoregulation
regulation of body temperature

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CHAPTER OVERVIEW

12.1: Biological Macromolecules

Food provides the body with the nutrients it needs to survive. Many of these critical nutrients are biological macromolecules, or large molecules, necessary for life. These macromolecules (polymers) are built from different combinations of smaller organic molecules (monomers). What specific types of biological macromolecules do living things require? How are these molecules formed? What functions do they serve? In this chapter, these questions will be explored.

12.1.1: Prelude to Biological Macromolecules

12.1.2: Synthesis of Biological Macromolecules

12.1.3: Carbohydrates

12.1.4: Lipids

12.1.5: Proteins

12.1.6: Nucleic Acids

Thumbnail: 1K6F_Crystal Structure Of The Collagen Triple Helix Model Pro- Pro-Gly103. Image used with permission (CC-SA-BY-3.0; Nevit Dilmen)

Contributors

- Connie Rye (East Mississippi Community College), Robert Wise (University of Wisconsin, Oshkosh), Vladimir Jurukovski (Suffolk County Community College), Jean DeSaix (University of North Carolina at Chapel Hill), Jung Choi (Georgia Institute of Technology), Yael Avissar (Rhode Island College) among other contributing authors. Original content by OpenStax (CC BY 4.0; Download for free at http://cnx.org/contents/185cbf87-c72...f21b5eabd@9.87).

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12.1.1: Prelude to Biological Macromolecules



Figure 12.1.1.1: Foods such as bread, fruit, and cheese are rich sources of biological macromolecules. (credit: modification of work by Bengt Nyman)

Food provides the body with the nutrients it needs to survive. Many of these critical nutrients are biological macromolecules, or large molecules, necessary for life. These macromolecules (polymers) are built from different combinations of smaller organic molecules (monomers). What specific types of biological macromolecules do living things require? How are these molecules formed? What functions do they serve? In this chapter, these questions will be explored.

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12.1.2: Synthesis of Biological Macromolecules

Skills to Develop

- Understand the synthesis of macromolecules
- Explain dehydration (or condensation) and hydrolysis reactions

As you've learned, biological macromolecules are large molecules, necessary for life, that are built from smaller organic molecules. There are four major classes of biological macromolecules (carbohydrates, lipids, proteins, and nucleic acids); each is an important cell component and performs a wide array of functions. Combined, these molecules make up the majority of a cell's dry mass (recall that water makes up the majority of its complete mass). Biological macromolecules are organic, meaning they contain carbon. In addition, they may contain hydrogen, oxygen, nitrogen, and additional minor elements.

Dehydration Synthesis

Most macromolecules are made from single subunits, or building blocks, called monomers. The monomers combine with each other using covalent bonds to form larger molecules known as polymers. In doing so, monomers release water molecules as byproducts. This type of reaction is known as dehydration synthesis, which means "to put together while losing water."

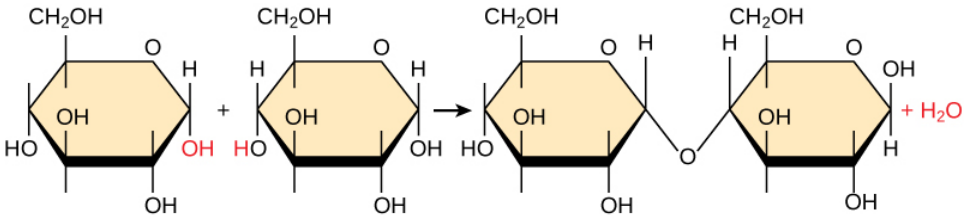


Figure 12.1.2.1: In the dehydration synthesis reaction depicted above, two molecules of glucose are linked together to form the disaccharide maltose. In the process, a water molecule is formed.

In a dehydration synthesis reaction (Figure 12.1.2.1), the hydrogen of one monomer combines with the hydroxyl group of another monomer, releasing a molecule of water. At the same time, the monomers share electrons and form covalent bonds. As additional monomers join, this chain of repeating monomers forms a polymer. Different types of monomers can combine in many configurations, giving rise to a diverse group of macromolecules. Even one kind of monomer can combine in a variety of ways to form several different polymers: for example, glucose monomers are the constituents of starch, glycogen, and cellulose.

Hydrolysis

Polymers are broken down into monomers in a process known as hydrolysis, which means "to split water," a reaction in which a water molecule is used during the breakdown (Figure 12.1.2.2). During these reactions, the polymer is broken into two components: one part gains a hydrogen atom (H+) and the other gains a hydroxyl molecule (OH–) from a split water molecule.

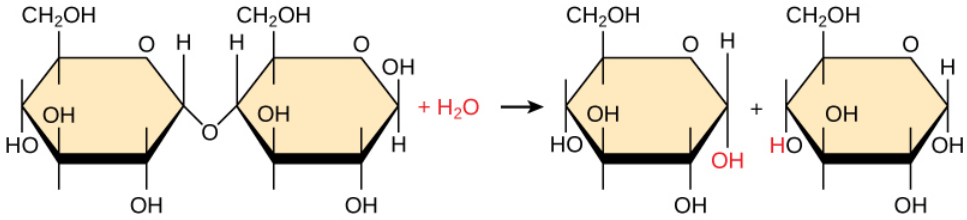
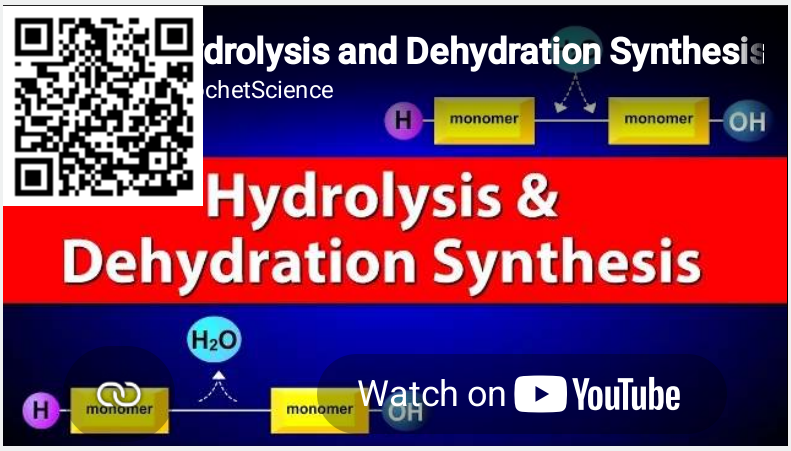


Figure 12.1.2.2: In the hydrolysis reaction shown here, the disaccharide maltose is broken down to form two glucose monomers with the addition of a water molecule. Note that this reaction is the reverse of the synthesis reaction shown in Figure 12.1.2.1.

Dehydration and hydrolysis reactions are catalyzed, or "sped up," by specific enzymes; dehydration reactions involve the formation of new bonds, requiring energy, while hydrolysis reactions break bonds and release energy. These reactions are similar for most macromolecules, but each monomer and polymer reaction is specific for its class. For example, in our bodies, food is hydrolyzed, or broken down, into smaller molecules by catalytic enzymes in the digestive system. This allows for easy absorption of nutrients by cells in the intestine. Each macromolecule is broken down by a specific enzyme. For instance, carbohydrates are broken down

by amylase, sucrase, lactase, or maltase. Proteins are broken down by the enzymes pepsin and peptidase, and by hydrochloric acid. Lipids are broken down by lipases. Breakdown of these macromolecules provides energy for cellular activities.

Link to Learning



Visit this site to see visual representations of dehydration synthesis and hydrolysis.

Summary

Proteins, carbohydrates, nucleic acids, and lipids are the four major classes of biological macromolecules—large molecules necessary for life that are built from smaller organic molecules. Macromolecules are made up of single units known as monomers that are joined by covalent bonds to form larger polymers. The polymer is more than the sum of its parts: it acquires new characteristics, and leads to an osmotic pressure that is much lower than that formed by its ingredients; this is an important advantage in the maintenance of cellular osmotic conditions. A monomer joins with another monomer with the release of a water molecule, leading to the formation of a covalent bond. These types of reactions are known as dehydration or condensation reactions. When polymers are broken down into smaller units (monomers), a molecule of water is used for each bond broken by these reactions; such reactions are known as hydrolysis reactions. Dehydration and hydrolysis reactions are similar for all macromolecules, but each monomer and polymer reaction is specific to its class. Dehydration reactions typically require an investment of energy for new bond formation, while hydrolysis reactions typically release energy by breaking bonds.

Glossary

biological macromolecule
large molecule necessary for life that is built from smaller organic molecules

dehydration synthesis
(also, condensation) reaction that links monomer molecules together, releasing a molecule of water for each bond formed

hydrolysis
reaction causes breakdown of larger molecules into smaller molecules with the utilization of water

monomer
smallest unit of larger molecules called polymers

polymer
chain of monomer residues that is linked by covalent bonds; polymerization is the process of polymer formation from monomers by condensation

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12.1.3: Carbohydrates

Skills to Develop

- Discuss the role of carbohydrates in cells and in the extracellular materials of animals and plants
- Explain the classifications of carbohydrates
- List common monosaccharides, disaccharides, and polysaccharides

Most people are familiar with carbohydrates, one type of macromolecule, especially when it comes to what we eat. To lose weight, some individuals adhere to “low-carb” diets. Athletes, in contrast, often “carb-load” before important competitions to ensure that they have enough energy to compete at a high level. Carbohydrates are, in fact, an essential part of our diet; grains, fruits, and vegetables are all natural sources of carbohydrates. Carbohydrates provide energy to the body, particularly through glucose, a simple sugar that is a component of starch and an ingredient in many staple foods. Carbohydrates also have other important functions in humans, animals, and plants.

Molecular Structures

Carbohydrates can be represented by the stoichiometric formula $(CH_2O)_n$, where n is the number of carbons in the molecule. In other words, the ratio of carbon to hydrogen to oxygen is 1:2:1 in carbohydrate molecules. This formula also explains the origin of the term “carbohydrate”: the components are carbon (“carbo”) and the components of water (hence, “hydrate”). Carbohydrates are classified into three subtypes: monosaccharides, disaccharides, and polysaccharides.

Monosaccharides

Monosaccharides (mono- = “one”; sacchar- = “sweet”) are simple sugars, the most common of which is glucose. In monosaccharides, the number of carbons usually ranges from three to seven. Most monosaccharide names end with the suffix -ose. If the sugar has an aldehyde group (the functional group with the structure R-CHO), it is known as an aldose, and if it has a ketone group (the functional group with the structure RC(=O)R'), it is known as a ketose. Depending on the number of carbons in the sugar, they also may be known as trioses (three carbons), pentoses (five carbons), and or hexoses (six carbons). See Figure 12.1.3.1 for an illustration of the monosaccharides.

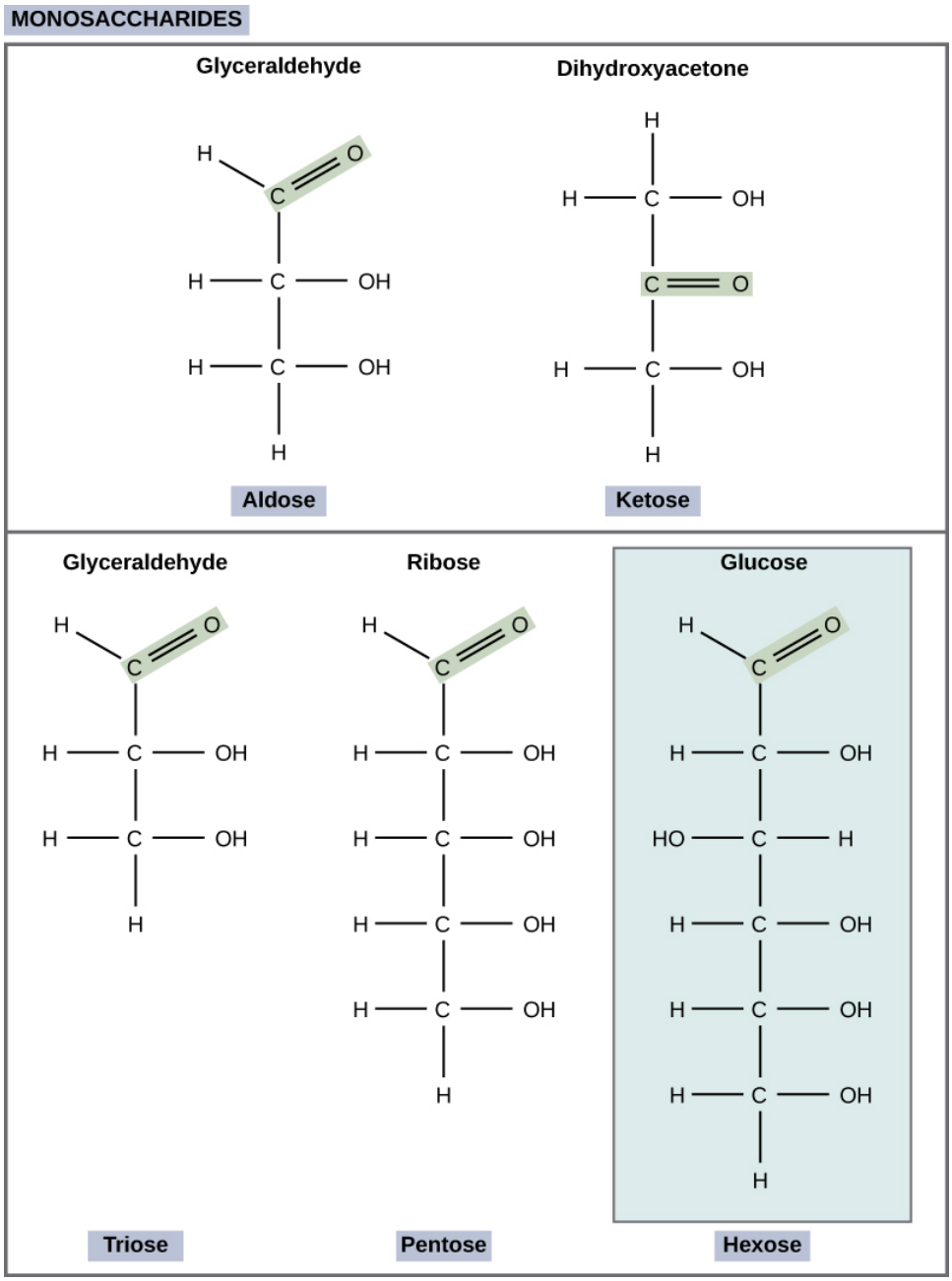


Figure 12.1.3.1: Monosaccharides are classified based on the position of their carbonyl group and the number of carbons in the backbone. Aldoses have a carbonyl group (indicated in green) at the end of the carbon chain, and ketoses have a carbonyl group in the middle of the carbon chain. Trioses, pentoses, and hexoses have three, five, and six carbon backbones, respectively.

The chemical formula for glucose is $C_6H_{12}O_6$. In humans, glucose is an important source of energy. During cellular respiration, energy is released from glucose, and that energy is used to help make adenosine triphosphate (ATP). Plants synthesize glucose using carbon dioxide and water, and glucose in turn is used for energy requirements for the plant. Excess glucose is often stored as starch that is catabolized (the breakdown of larger molecules by cells) by humans and other animals that feed on plants.

Galactose (part of lactose, or milk sugar) and fructose (found in sucrose, in fruit) are other common monosaccharides. Although glucose, galactose, and fructose all have the same chemical formula ($C_6H_{12}O_6$), they differ structurally and chemically (and are known as isomers) because of the different arrangement of functional groups around the asymmetric carbon; all of these monosaccharides have more than one asymmetric carbon (Figure12.1.3.2).

Art Connection

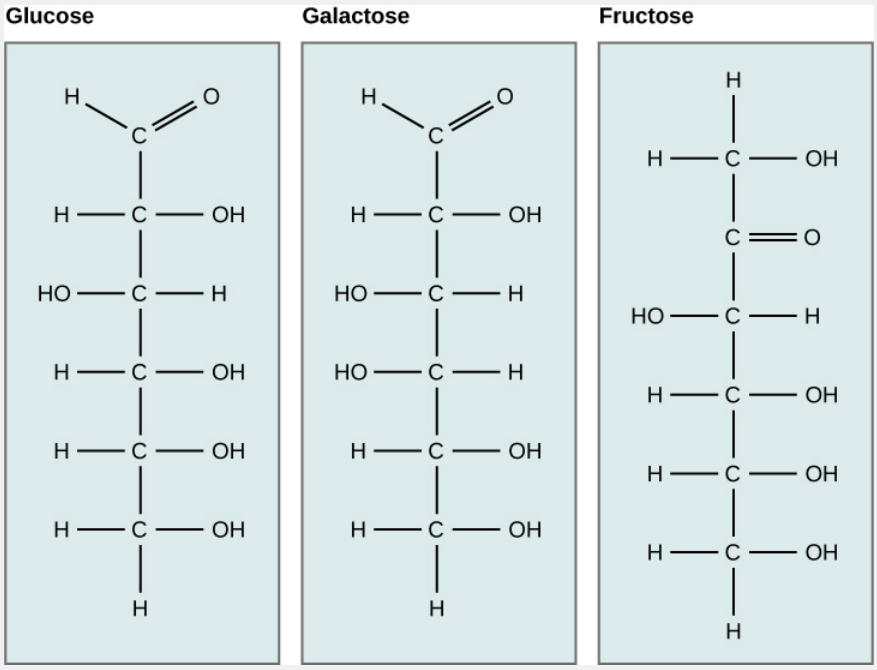


Figure 12.1.3.2: Glucose, galactose, and fructose are all hexoses. They are structural isomers, meaning they have the same chemical formula ($C_6H_{12}O_6$) but a different arrangement of atoms.

What kind of sugars are these, aldose or ketose?

Glucose, galactose, and fructose are isomeric monosaccharides (hexoses), meaning they have the same chemical formula but have slightly different structures. Glucose and galactose are aldoses, and fructose is a ketose.

Monosaccharides can exist as a linear chain or as ring-shaped molecules; in aqueous solutions they are usually found in ring forms (Figure 12.1.3.3). Glucose in a ring form can have two different arrangements of the hydroxyl group (OH) around the anomeric carbon (carbon 1 that becomes asymmetric in the process of ring formation). If the hydroxyl group is below carbon number 1 in the sugar, it is said to be in the alpha (α) position, and if it is above the plane, it is said to be in the beta (β) position.

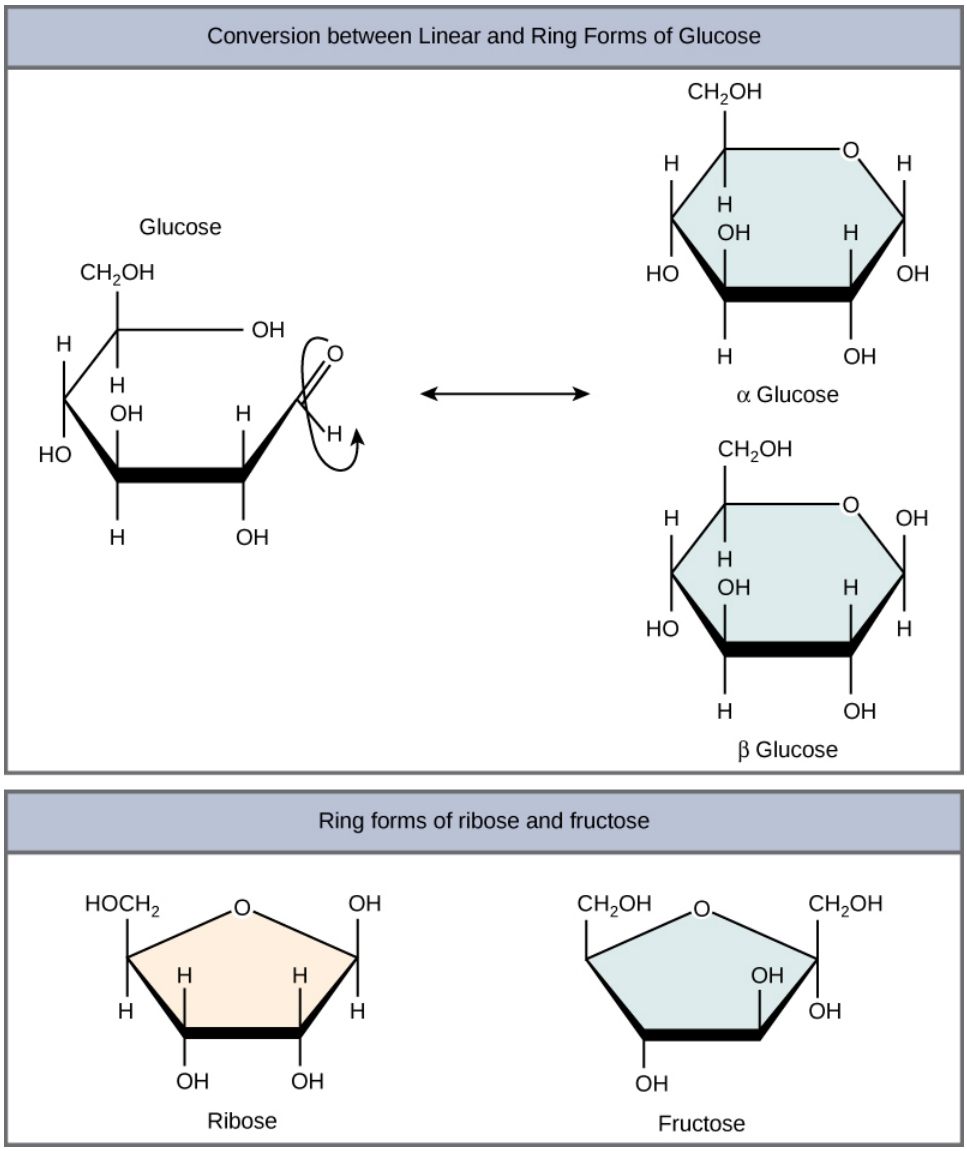


Figure 12.1.3.3: Five and six carbon monosaccharides exist in equilibrium between linear and ring forms. When the ring forms, the side chain it closes on is locked into an α or β position. Fructose and ribose also form rings, although they form five-membered rings as opposed to the six-membered ring of glucose.

Disaccharides

Disaccharides (di- = "two") form when two monosaccharides undergo a dehydration reaction (also known as a condensation reaction or dehydration synthesis). During this process, the hydroxyl group of one monosaccharide combines with the hydrogen of another monosaccharide, releasing a molecule of water and forming a covalent bond. A covalent bond formed between a carbohydrate molecule and another molecule (in this case, between two monosaccharides) is known as a glycosidic bond (Figure 12.1.3.4). Glycosidic bonds (also called glycosidic linkages) can be of the alpha or the beta type.

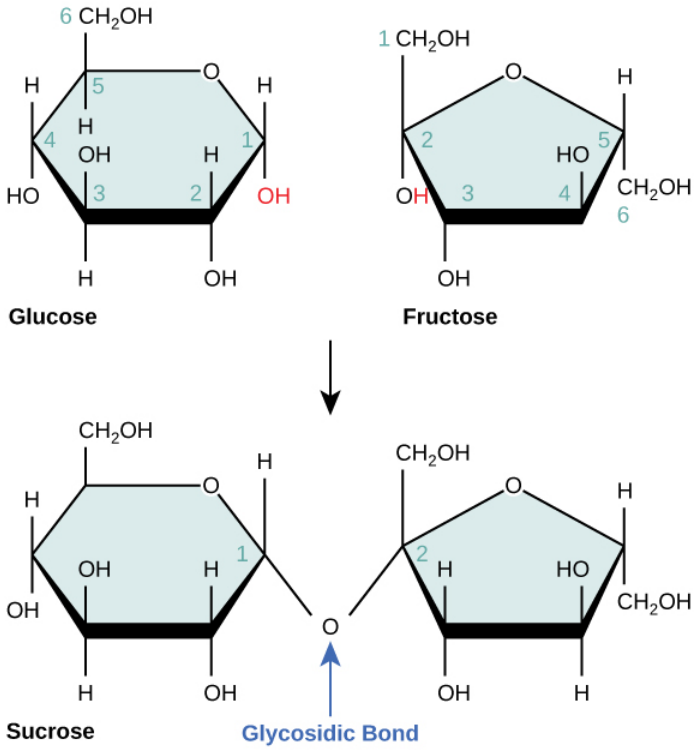


Figure 12.1.3.4: Sucrose is formed when a monomer of glucose and a monomer of fructose are joined in a dehydration reaction to form a glycosidic bond. In the process, a water molecule is lost. By convention, the carbon atoms in a monosaccharide are numbered from the terminal carbon closest to the carbonyl group. In sucrose, a glycosidic linkage is formed between carbon 1 in glucose and carbon 2 in fructose.

Common disaccharides include lactose, maltose, and sucrose (Figure 12.1.3.5). Lactose is a disaccharide consisting of the monomers glucose and galactose. It is found naturally in milk. Maltose, or malt sugar, is a disaccharide formed by a dehydration reaction between two glucose molecules. The most common disaccharide is sucrose, or table sugar, which is composed of the monomers glucose and fructose.

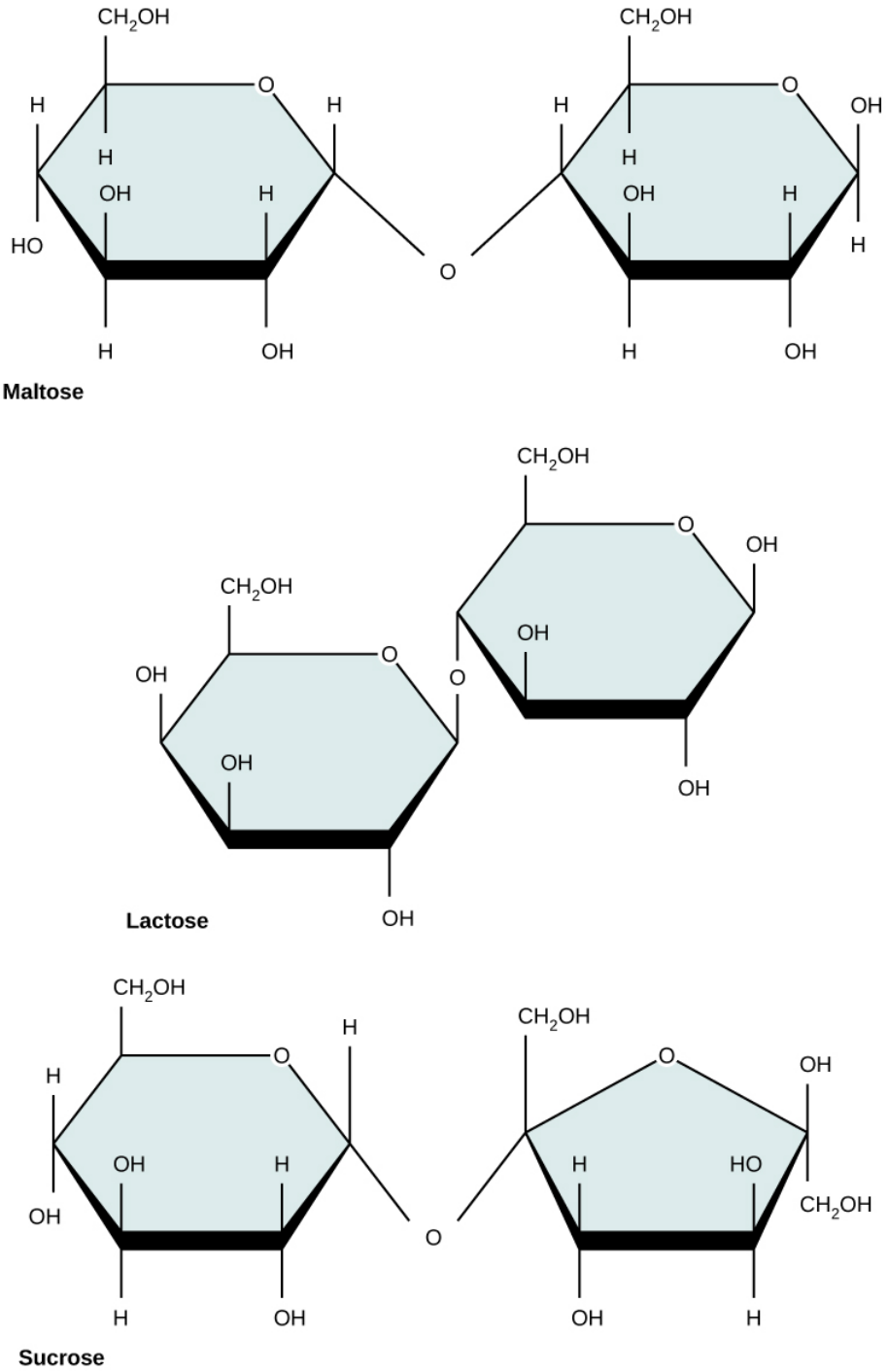


Figure 12.1.3.5: Common disaccharides include maltose (grain sugar), lactose (milk sugar), and sucrose (table sugar).

Polysaccharides

A long chain of monosaccharides linked by glycosidic bonds is known as a polysaccharide (poly- = “many”). The chain may be branched or unbranched, and it may contain different types of monosaccharides. The molecular weight may be 100,000 daltons or more depending on the number of monomers joined. Starch, glycogen, cellulose, and chitin are primary examples of polysaccharides.

Starch is the stored form of sugars in plants and is made up of a mixture of amylose and amylopectin (both polymers of glucose). Plants are able to synthesize glucose, and the excess glucose, beyond the plant’s immediate energy needs, is stored as starch in different plant parts, including roots and seeds. The starch in the seeds provides food for the embryo as it germinates and can also

act as a source of food for humans and animals. The starch that is consumed by humans is broken down by enzymes, such as salivary amylases, into smaller molecules, such as maltose and glucose. The cells can then absorb the glucose.

Starch is made up of glucose monomers that are joined by α 1-4 or α 1-6 glycosidic bonds. The numbers 1-4 and 1-6 refer to the carbon number of the two residues that have joined to form the bond. As illustrated in Figure 12.1.3.6, amylose is starch formed by unbranched chains of glucose monomers (only α 1-4 linkages), whereas amylopectin is a branched polysaccharide (α 1-6 linkages at the branch points).

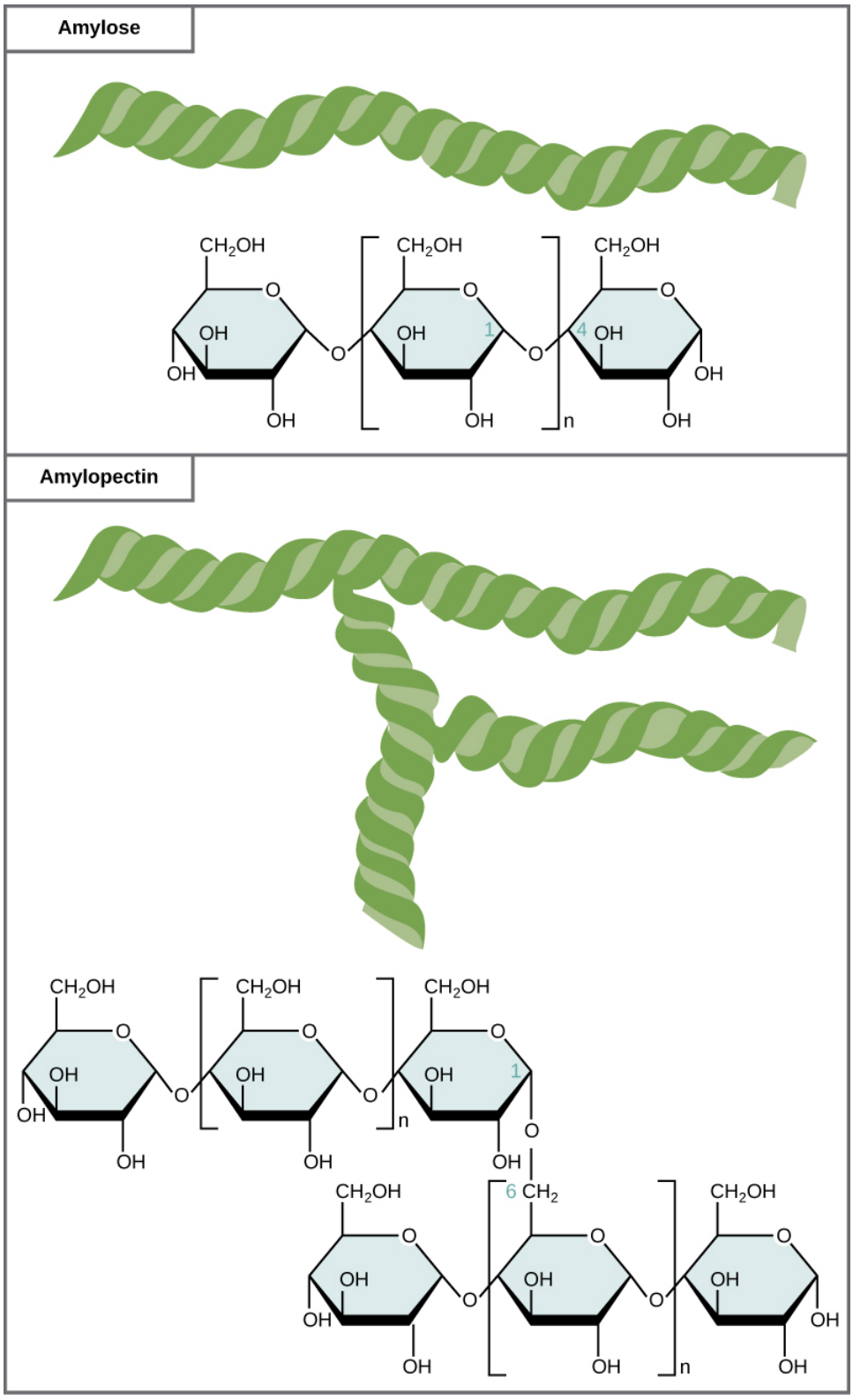


Figure 12.1.3.6: Amylose and amylopectin are two different forms of starch. Amylose is composed of unbranched chains of glucose monomers connected by α 1,4 glycosidic linkages. Amylopectin is composed of branched chains of glucose monomers connected by α 1,4 and α 1,6 glycosidic linkages. Because of the way the subunits are joined, the glucose chains have a helical structure. Glycogen (not shown) is similar in structure to amylopectin but more highly branched.

Glycogen is the storage form of glucose in humans and other vertebrates and is made up of monomers of glucose. Glycogen is the animal equivalent of starch and is a highly branched molecule usually stored in liver and muscle cells. Whenever blood glucose

levels decrease, glycogen is broken down to release glucose in a process known as glycogenolysis.

Cellulose is the most abundant natural biopolymer. The cell wall of plants is mostly made of cellulose; this provides structural support to the cell. Wood and paper are mostly cellulosic in nature. Cellulose is made up of glucose monomers that are linked by β 1-4 glycosidic bonds (Figure 12.1.3.7).

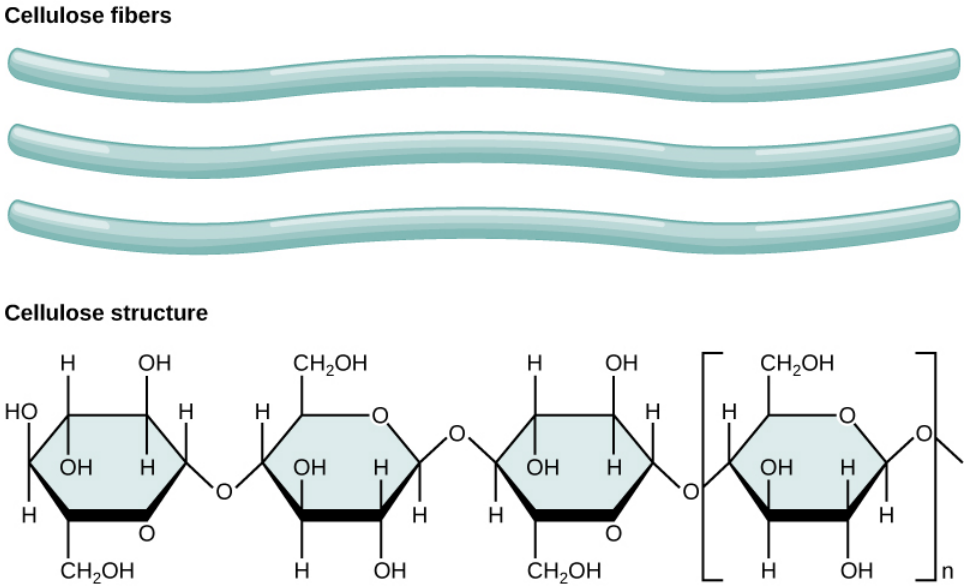


Figure 12.1.3.7: In cellulose, glucose monomers are linked in unbranched chains by β 1-4 glycosidic linkages. Because of the way the glucose subunits are joined, every glucose monomer is flipped relative to the next one resulting in a linear, fibrous structure.

As shown in Figure 12.1.3.7, every other glucose monomer in cellulose is flipped over, and the monomers are packed tightly as extended long chains. This gives cellulose its rigidity and high tensile strength—which is so important to plant cells. While the β 1-4 linkage cannot be broken down by human digestive enzymes, herbivores such as cows, koalas, buffalos, and horses are able, with the help of the specialized flora in their stomach, to digest plant material that is rich in cellulose and use it as a food source. In these animals, certain species of bacteria and protists reside in the rumen (part of the digestive system of herbivores) and secrete the enzyme cellulase. The appendix of grazing animals also contains bacteria that digest cellulose, giving it an important role in the digestive systems of ruminants. Cellulases can break down cellulose into glucose monomers that can be used as an energy source by the animal. Termites are also able to break down cellulose because of the presence of other organisms in their bodies that secrete cellulases.

Carbohydrates serve various functions in different animals. Arthropods (insects, crustaceans, and others) have an outer skeleton, called the exoskeleton, which protects their internal body parts (as seen in the bee in Figure 12.1.3.8). This exoskeleton is made of the biological macromolecule chitin, which is a polysaccharide-containing nitrogen. It is made of repeating units of N-acetyl-β-d-glucosamine, a modified sugar. Chitin is also a major component of fungal cell walls; fungi are neither animals nor plants and form a kingdom of their own in the domain Eukarya.



Figure 12.1.3.8: Insects have a hard outer exoskeleton made of chitin, a type of polysaccharide. (credit: Louise Docker)

Career Connections: Registered Dietitian

Obesity is a worldwide health concern, and many diseases such as diabetes and heart disease are becoming more prevalent because of obesity. This is one of the reasons why registered dietitians are increasingly sought after for advice. Registered dietitians help plan nutrition programs for individuals in various settings. They often work with patients in health care facilities, designing nutrition plans to treat and prevent diseases. For example, dietitians may teach a patient with diabetes how to manage blood sugar levels by eating the correct types and amounts of carbohydrates. Dietitians may also work in nursing homes, schools, and private practices.

To become a registered dietitian, one needs to earn at least a bachelor's degree in dietetics, nutrition, food technology, or a related field. In addition, registered dietitians must complete a supervised internship program and pass a national exam. Those who pursue careers in dietetics take courses in nutrition, chemistry, biochemistry, biology, microbiology, and human physiology. Dietitians must become experts in the chemistry and physiology (biological functions) of food (proteins, carbohydrates, and fats).

Benefits of Carbohydrates

Are carbohydrates good for you? People who wish to lose weight are often told that carbohydrates are bad for them and should be avoided. Some diets completely forbid carbohydrate consumption, claiming that a low-carbohydrate diet helps people to lose weight faster. However, carbohydrates have been an important part of the human diet for thousands of years; artifacts from ancient civilizations show the presence of wheat, rice, and corn in our ancestors' storage areas.

Carbohydrates should be supplemented with proteins, vitamins, and fats to be parts of a well-balanced diet. Calorie-wise, a gram of carbohydrate provides 4.3 Kcal. For comparison, fats provide 9 Kcal/g, a less desirable ratio. Carbohydrates contain soluble and insoluble elements; the insoluble part is known as fiber, which is mostly cellulose. Fiber has many uses; it promotes regular bowel movement by adding bulk, and it regulates the rate of consumption of blood glucose. Fiber also helps to remove excess cholesterol from the body: fiber binds to the cholesterol in the small intestine, then attaches to the cholesterol and prevents the cholesterol particles from entering the bloodstream, and then cholesterol exits the body via the feces. Fiber-rich diets also have a protective role in reducing the occurrence of colon cancer. In addition, a meal containing whole grains and vegetables gives a feeling of fullness. As an immediate source of energy, glucose is broken down during the process of cellular respiration, which produces ATP, the energy currency of the cell. Without the consumption of carbohydrates, the availability of "instant energy" would be reduced. Eliminating carbohydrates from the diet is not the best way to lose weight. A low-calorie diet that is rich in whole grains, fruits, vegetables, and lean meat, together with plenty of exercise and plenty of water, is the more sensible way to lose weight.

Link to Learning

For an additional perspective on carbohydrates, explore “Biomolecules: the Carbohydrates” through this interactive animation.

Summary

Carbohydrates are a group of macromolecules that are a vital energy source for the cell and provide structural support to plant cells, fungi, and all of the arthropods that include lobsters, crabs, shrimp, insects, and spiders. Carbohydrates are classified as monosaccharides, disaccharides, and polysaccharides depending on the number of monomers in the molecule. Monosaccharides are linked by glycosidic bonds that are formed as a result of dehydration reactions, forming disaccharides and polysaccharides with the elimination of a water molecule for each bond formed. Glucose, galactose, and fructose are common monosaccharides, whereas common disaccharides include lactose, maltose, and sucrose. Starch and glycogen, examples of polysaccharides, are the storage forms of glucose in plants and animals, respectively. The long polysaccharide chains may be branched or unbranched. Cellulose is an example of an unbranched polysaccharide, whereas amylopectin, a constituent of starch, is a highly branched molecule. Storage of glucose, in the form of polymers like starch of glycogen, makes it slightly less accessible for metabolism; however, this prevents it from leaking out of the cell or creating a high osmotic pressure that could cause excessive water uptake by the cell.

Art Connections

Figure 12.1.3.2: What kind of sugars are these, aldose or ketose?

Answer

Glucose and galactose are aldoses. Fructose is a ketose.

Glossary

carbohydrate
biological macromolecule in which the ratio of carbon to hydrogen and to oxygen is 1:2:1; carbohydrates serve as energy sources and structural support in cells and form the a cellular exoskeleton of arthropods

cellulose
polysaccharide that makes up the cell wall of plants; provides structural support to the cell

chitin
type of carbohydrate that forms the outer skeleton of all arthropods that include crustaceans and insects; it also forms the cell walls of fungi

disaccharide
two sugar monomers that are linked together by a glycosidic bond

glycogen
storage carbohydrate in animals

glycosidic bond
bond formed by a dehydration reaction between two monosaccharides with the elimination of a water molecule

monosaccharide

single unit or monomer of carbohydrates

polysaccharide

long chain of monosaccharides; may be branched or unbranched

starch

storage carbohydrate in plants

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12.1.4: Lipids

Skills to Develop

- Describe the four major types of lipids
- Explain the role of fats in storing energy
- Differentiate between saturated and unsaturated fatty acids
- Describe phospholipids and their role in cells
- Define the basic structure of a steroid and some functions of steroids
- Explain the how cholesterol helps to maintain the fluid nature of the plasma membrane

Lipids include a diverse group of compounds that are largely nonpolar in nature. This is because they are hydrocarbons that include mostly nonpolar carbon–carbon or carbon–hydrogen bonds. Non-polar molecules are hydrophobic ("water fearing"), or insoluble in water. Lipids perform many different functions in a cell. Cells store energy for long-term use in the form of fats. Lipids also provide insulation from the environment for plants and animals (Figure 12.1.4.1). For example, they help keep aquatic birds and mammals dry when forming a protective layer over fur or feathers because of their water-repellant hydrophobic nature. Lipids are also the building blocks of many hormones and are an important constituent of all cellular membranes. Lipids include fats, oils, waxes, phospholipids, and steroids.



Figure 12.1.4.1: Hydrophobic lipids in the fur of aquatic mammals, such as this river otter, protect them from the elements. (credit: Ken Bosma)

Fats and Oils

A fat molecule consists of two main components—glycerol and fatty acids. Glycerol is an organic compound (alcohol) with three carbons, five hydrogens, and three hydroxyl (OH) groups. Fatty acids have a long chain of hydrocarbons to which a carboxyl group is attached, hence the name "fatty acid." The number of carbons in the fatty acid may range from 4 to 36; most common are those containing 12–18 carbons. In a fat molecule, the fatty acids are attached to each of the three carbons of the glycerol molecule with an ester bond through an oxygen atom (Figure 12.1.4.2).

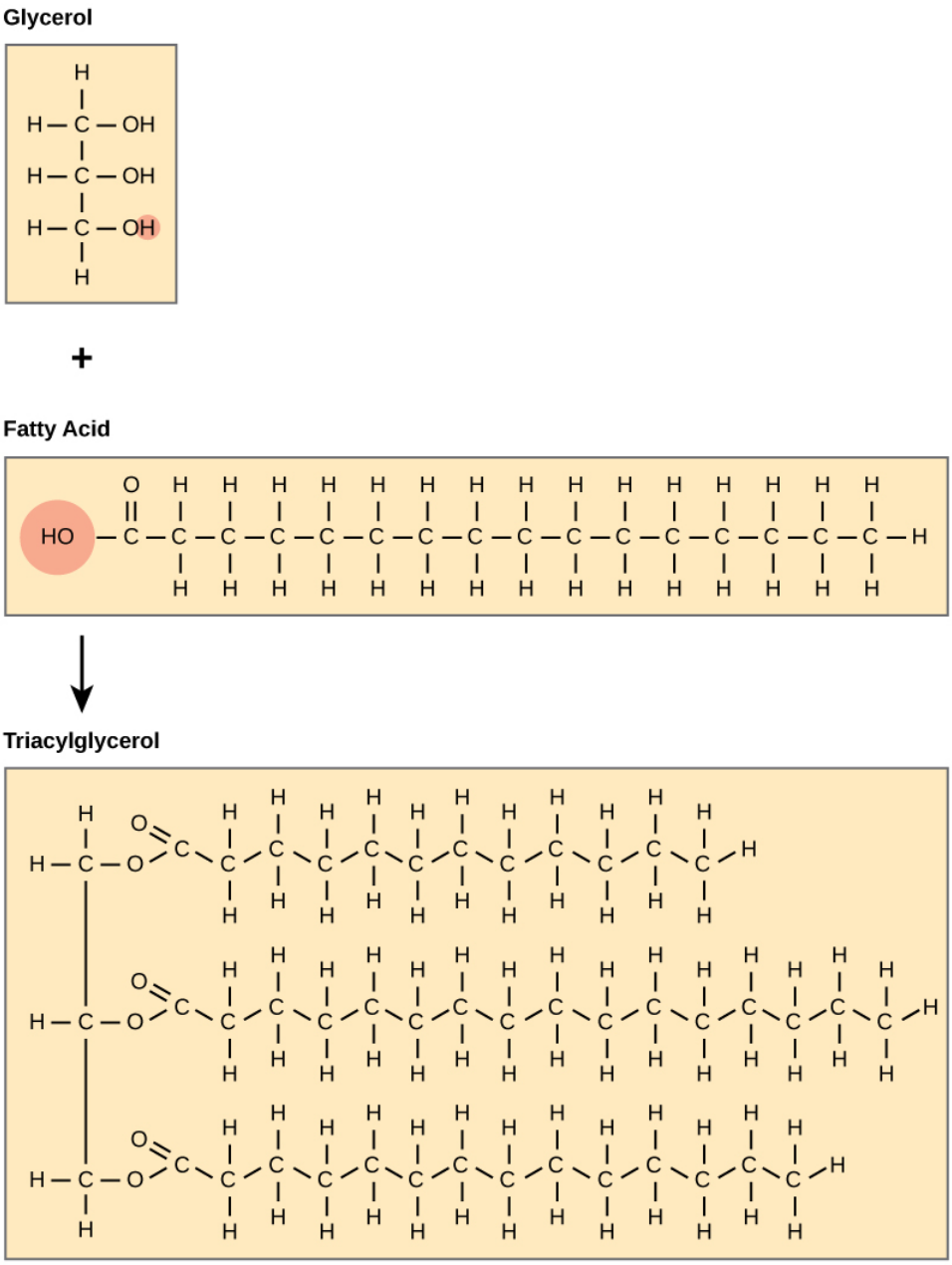


Figure 12.1.4.2: Triacylglycerol is formed by the joining of three fatty acids to a glycerol backbone in a dehydration reaction. Three molecules of water are released in the process.

During this ester bond formation, three water molecules are released. The three fatty acids in the triacylglycerol may be similar or dissimilar. Fats are also called triacylglycerols or triglycerides because of their chemical structure. Some fatty acids have common names that specify their origin. For example, palmitic acid, a saturated fatty acid, is derived from the palm tree. Arachidic acid is derived from *Arachis hypogea*, the scientific name for groundnuts or peanuts.

Fatty acids may be saturated or unsaturated. In a fatty acid chain, if there are only single bonds between neighboring carbons in the hydrocarbon chain, the fatty acid is said to be saturated. Saturated fatty acids are saturated with hydrogen; in other words, the number of hydrogen atoms attached to the carbon skeleton is maximized. Stearic acid is an example of a saturated fatty acid (Figure 12.1.4.3)

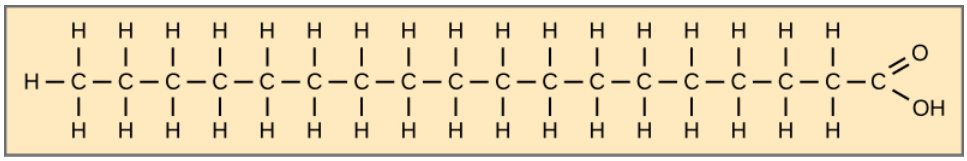


Figure 12.1.4.3: Stearic acid is a common saturated fatty acid.

When the hydrocarbon chain contains a double bond, the fatty acid is said to be unsaturated. Oleic acid is an example of an unsaturated fatty acid (Figure 12.1.4.4).

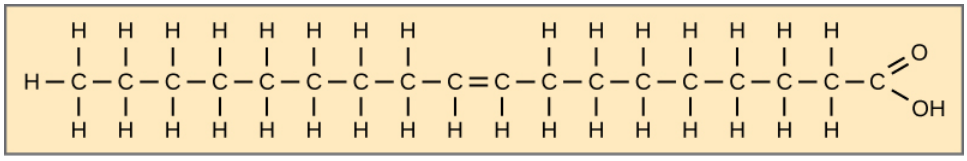


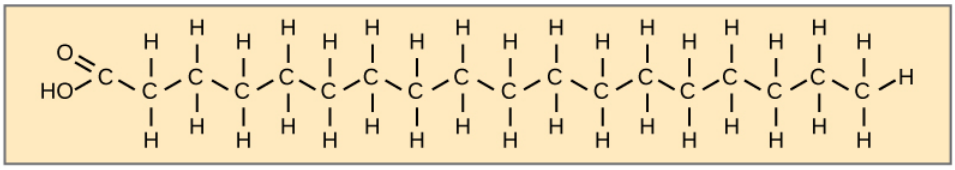
Figure 12.1.4.4: Oleic acid is a common unsaturated fatty acid.

Most unsaturated fats are liquid at room temperature and are called oils. If there is one double bond in the molecule, then it is known as a monounsaturated fat (e.g., olive oil), and if there is more than one double bond, then it is known as a polyunsaturated fat (e.g., canola oil).

When a fatty acid has no double bonds, it is known as a saturated fatty acid because no more hydrogen may be added to the carbon atoms of the chain. A fat may contain similar or different fatty acids attached to glycerol. Long straight fatty acids with single bonds tend to get packed tightly and are solid at room temperature. Animal fats with stearic acid and palmitic acid (common in meat) and the fat with butyric acid (common in butter) are examples of saturated fats. Mammals store fats in specialized cells called adipocytes, where globules of fat occupy most of the cell's volume. In plants, fat or oil is stored in many seeds and is used as a source of energy during seedling development. Unsaturated fats or oils are usually of plant origin and contain *cis* unsaturated fatty acids. *Cis* and *trans* indicate the configuration of the molecule around the double bond. If hydrogens are present in the same plane, it is referred to as a cis fat; if the hydrogen atoms are on two different planes, it is referred to as a trans fat. The *cis* double bond causes a bend or a "kink" that prevents the fatty acids from packing tightly, keeping them liquid at room temperature (Figure 12.1.4.5). Olive oil, corn oil, canola oil, and cod liver oil are examples of unsaturated fats. Unsaturated fats help to lower blood cholesterol levels whereas saturated fats contribute to plaque formation in the arteries.

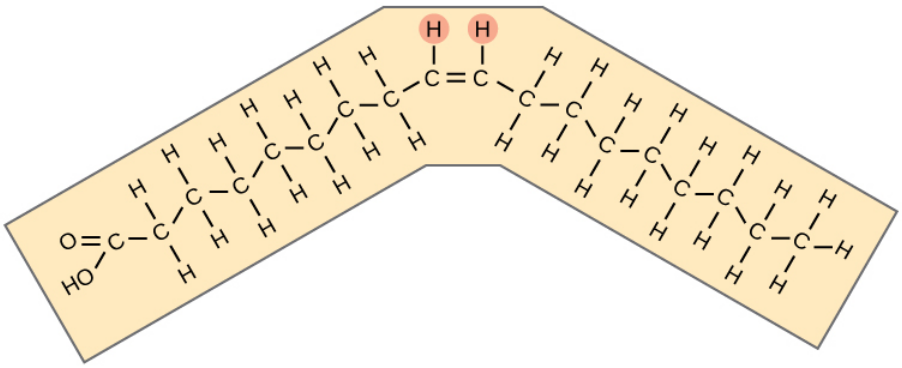
Saturated fatty acid

Stearic acid



Unsaturated fatty acids

Cis oleic acid



Trans oleic acid

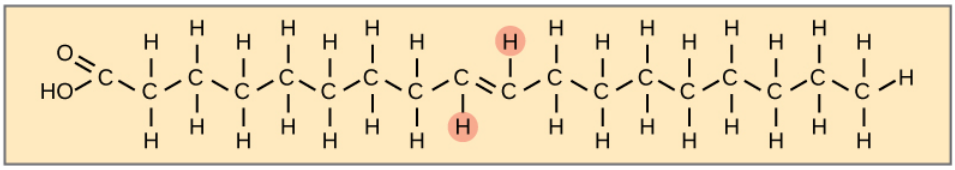


Figure 12.1.4.5: Saturated fatty acids have hydrocarbon chains connected by single bonds only. Unsaturated fatty acids have one or more double bonds. Each double bond may be in a *cis* or *trans* configuration. In the *cis* configuration, both hydrogens are on the same side of the hydrocarbon chain. In the *trans* configuration, the hydrogens are on opposite sides. A *cis* double bond causes a kink in the chain.

Trans Fats

In the food industry, oils are artificially hydrogenated to make them semi-solid and of a consistency desirable for many processed food products. Simply speaking, hydrogen gas is bubbled through oils to solidify them. During this hydrogenation process, double bonds of the *cis*- conformation in the hydrocarbon chain may be converted to double bonds in the trans- conformation.

Margarine, some types of peanut butter, and shortening are examples of artificially hydrogenated trans fats. Recent studies have shown that an increase in trans fats in the human diet may lead to an increase in levels of low-density lipoproteins (LDL), or “bad” cholesterol, which in turn may lead to plaque deposition in the arteries, resulting in heart disease. Many fast food restaurants have recently banned the use of trans fats, and food labels are required to display the trans fat content.

Omega Fatty Acids

Essential fatty acids are fatty acids required but not synthesized by the human body. Consequently, they have to be supplemented through ingestion via the diet. Omega-3 fatty acids (like that shown in Figure 12.1.4.6) fall into this category and are one of only two known for humans (the other being omega-6 fatty acid). These are polyunsaturated fatty acids and are called omega-3 because the third carbon from the end of the hydrocarbon chain is connected to its neighboring carbon by a double bond.

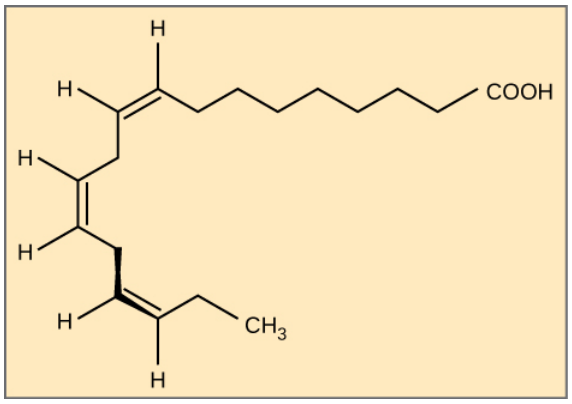


Figure 12.1.4.6: Alpha-linolenic acid is an example of an omega-3 fatty acid. It has three *cis* double bonds and, as a result, a curved shape. For clarity, the carbons are not shown. Each singly bonded carbon has two hydrogens associated with it, also not shown.

The farthest carbon away from the carboxyl group is numbered as the omega (ω) carbon, and if the double bond is between the third and fourth carbon from that end, it is known as an omega-3 fatty acid. Nutritionally important because the body does not make them, omega-3 fatty acids include alpha-linoleic acid (ALA), eicosapentaenoic acid (EPA), and docosahexaenoic acid (DHA), all of which are polyunsaturated. Salmon, trout, and tuna are good sources of omega-3 fatty acids. Research indicates that omega-3 fatty acids reduce the risk of sudden death from heart attacks, reduce triglycerides in the blood, lower blood pressure, and prevent thrombosis by inhibiting blood clotting. They also reduce inflammation, and may help reduce the risk of some cancers in animals.

Like carbohydrates, fats have received a lot of bad publicity. It is true that eating an excess of fried foods and other “fatty” foods leads to weight gain. However, fats do have important functions. Many vitamins are fat soluble, and fats serve as a long-term storage form of fatty acids: a source of energy. They also provide insulation for the body. Therefore, “healthy” fats in moderate amounts should be consumed on a regular basis.

Waxes

Wax covers the feathers of some aquatic birds and the leaf surfaces of some plants. Because of the hydrophobic nature of waxes, they prevent water from sticking on the surface (Figure 12.1.4.7). Waxes are made up of long fatty acid chains esterified to long-chain alcohols.



Figure 12.1.4.7: Waxy coverings on some leaves are made of lipids. (credit: Roger Griffith)

Phospholipids

Phospholipids are major constituents of the plasma membrane, the outermost layer of animal cells. Like fats, they are composed of fatty acid chains attached to a glycerol or sphingosine backbone. Instead of three fatty acids attached as in triglycerides, however, there are two fatty acids forming diacylglycerol, and the third carbon of the glycerol backbone is occupied by a modified phosphate group (Figure 12.1.4.8). A phosphate group alone attached to a diaglycerol does not qualify as a phospholipid; it is phosphatidate

(diacylglycerol 3-phosphate), the precursor of phospholipids. The phosphate group is modified by an alcohol. Phosphatidylcholine and phosphatidylserine are two important phospholipids that are found in plasma membranes.

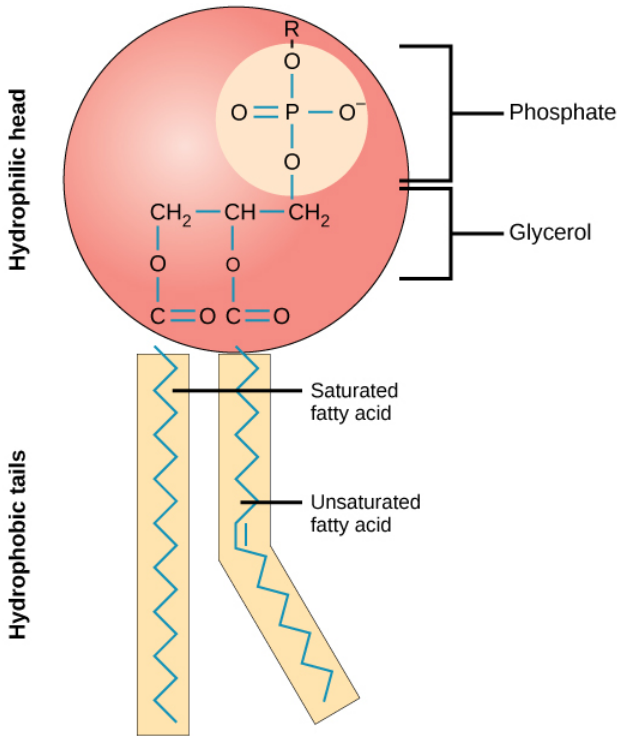


Figure 12.1.4.8: A phospholipid is a molecule with two fatty acids and a modified phosphate group attached to a glycerol backbone. The phosphate may be modified by the addition of charged or polar chemical groups. Two chemical groups that may modify the phosphate, choline and serine, are shown here. Both choline and serine attach to the phosphate group at the position labeled R via the hydroxyl group indicated in green.

A phospholipid is an amphipathic molecule, meaning it has a hydrophobic and a hydrophilic part. The fatty acid chains are hydrophobic and cannot interact with water, whereas the phosphate-containing group is hydrophilic and interacts with water (Figure 12.1.4.9).

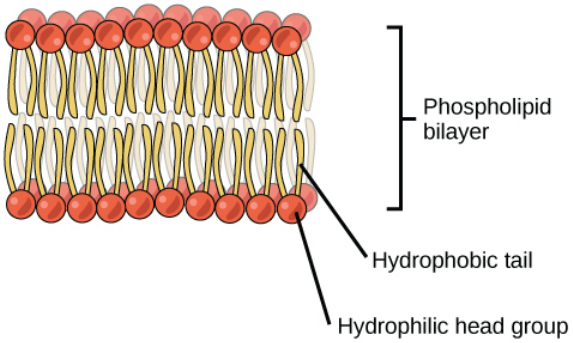


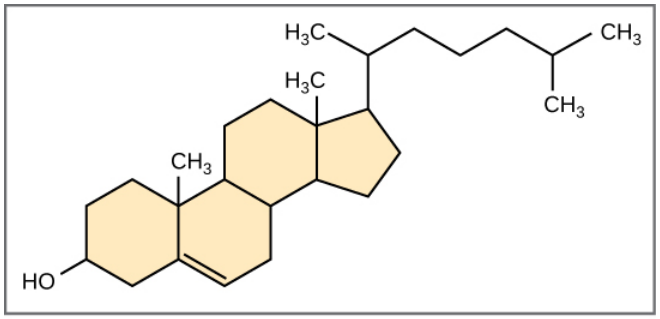
Figure 12.1.4.9: The phospholipid bilayer is the major component of all cellular membranes. The hydrophilic head groups of the phospholipids face the aqueous solution. The hydrophobic tails are sequestered in the middle of the bilayer.

The head is the hydrophilic part, and the tail contains the hydrophobic fatty acids. In a membrane, a bilayer of phospholipids forms the matrix of the structure, the fatty acid tails of phospholipids face inside, away from water, whereas the phosphate group faces the outside, aqueous side (Figure 12.1.4.9).

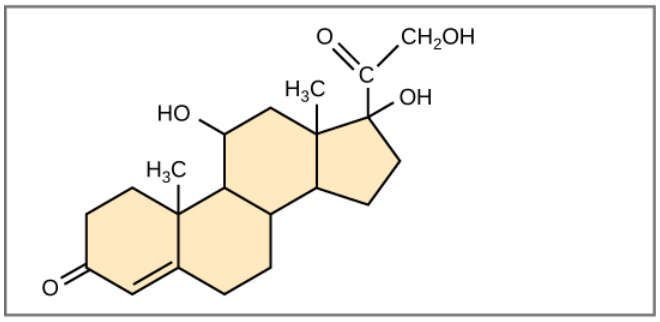
Phospholipids are responsible for the dynamic nature of the plasma membrane. If a drop of phospholipids is placed in water, it spontaneously forms a structure known as a micelle, where the hydrophilic phosphate heads face the outside and the fatty acids face the interior of this structure.

Steroids

Unlike the phospholipids and fats discussed earlier, steroids have a fused ring structure. Although they do not resemble the other lipids, they are grouped with them because they are also hydrophobicand insoluble in water. All steroids have four linked carbon rings and several of them, like cholesterol, have a short tail (Figure 12.1.4.10). Many steroids also have the –OH functional group, which puts them in the alcohol classification (sterols).



Cholesterol



Cortisol

Figure 12.1.4.10: Steroids such as cholesterol and cortisol are composed of four fused hydrocarbon rings.

Cholesterol is the most common steroid. Cholesterol is mainly synthesized in the liver and is the precursor to many steroid hormones such as testosterone and estradiol, which are secreted by the gonads and endocrine glands. It is also the precursor to Vitamin D. Cholesterol is also the precursor of bile salts, which help in the emulsification of fats and their subsequent absorption by cells. Although cholesterol is often spoken of in negative terms by lay people, it is necessary for proper functioning of the body. It is a component of the plasma membrane of animal cells and is found within the phospholipid bilayer. Being the outermost structure in animal cells, the plasma membrane is responsible for the transport of materials and cellular recognition and it is involved in cell-to-cell communication.

Link to Learning

For an additional perspective on lipids, explore the interactive animation "Biomolecules: The Lipids".

Summary

Lipids are a class of macromolecules that are nonpolar and hydrophobic in nature. Major types include fats and oils, waxes, phospholipids, and steroids. Fats are a stored form of energy and are also known as triacylglycerols or triglycerides. Fats are made up of fatty acids and either glycerol or sphingosine. Fatty acids may be unsaturated or saturated, depending on the presence or absence of double bonds in the hydrocarbon chain. If only single bonds are present, they are known as saturated fatty acids. Unsaturated fatty acids may have one or more double bonds in the hydrocarbon chain. Phospholipids make up the matrix of membranes. They have a glycerol or sphingosine backbone to which two fatty acid chains and a phosphate-containing group are attached. Steroids are another class of lipids. Their basic structure has four fused carbon rings. Cholesterol is a type of steroid and is an important constituent of the plasma membrane, where it helps to maintain the fluid nature of the membrane. It is also the precursor of steroid hormones such as testosterone.

Glossary

lipid
: macromolecule that is nonpolar and insoluble in water

omega fat
: type of polyunsaturated fat that is required by the body; the numbering of the carbon omega starts from the methyl end or the end that is farthest from the carboxylic end

phospholipid
: major constituent of the membranes; composed of two fatty acids and a phosphate-containing group attached to a glycerol backbone

saturated fatty acid
: long-chain of hydrocarbon with single covalent bonds in the carbon chain; the number of hydrogen atoms attached to the carbon skeleton is maximized

steroid
: type of lipid composed of four fused hydrocarbon rings forming a planar structure

trans fat
: fat formed artificially by hydrogenating oils, leading to a different arrangement of double bond(s) than those found in naturally occurring lipids

triacylglycerol (also, triglyceride)
: fat molecule; consists of three fatty acids linked to a glycerol molecule

unsaturated fatty acid
: long-chain hydrocarbon that has one or more double bonds in the hydrocarbon chain

wax
: lipid made of a long-chain fatty acid that is esterified to a long-chain alcohol; serves as a protective coating on some feathers, aquatic mammal fur, and leaves

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12.1.5: Proteins

Skills to Develop

- Describe the functions proteins perform in the cell and in tissues
- Discuss the relationship between amino acids and proteins
- Explain the four levels of protein organization
- Describe the ways in which protein shape and function are linked

Proteins are one of the most abundant organic molecules in living systems and have the most diverse range of functions of all macromolecules. Proteins may be structural, regulatory, contractile, or protective; they may serve in transport, storage, or membranes; or they may be toxins or enzymes. Each cell in a living system may contain thousands of proteins, each with a unique function. Their structures, like their functions, vary greatly. They are all, however, polymers of amino acids, arranged in a linear sequence.

Types and Functions of Proteins

Enzymes, which are produced by living cells, are catalysts in biochemical reactions (like digestion) and are usually complex or conjugated proteins. Each enzyme is specific for the substrate (a reactant that binds to an enzyme) it acts on. The enzyme may help in breakdown, rearrangement, or synthesis reactions. Enzymes that break down their substrates are called catabolic enzymes, enzymes that build more complex molecules from their substrates are called anabolic enzymes, and enzymes that affect the rate of reaction are called catalytic enzymes. It should be noted that all enzymes increase the rate of reaction and, therefore, are considered to be organic catalysts. An example of an enzyme is salivary amylase, which hydrolyzes its substrate amylose, a component of starch.

Hormones are chemical-signaling molecules, usually small proteins or steroids, secreted by endocrine cells that act to control or regulate specific physiological processes, including growth, development, metabolism, and reproduction. For example, insulin is a protein hormone that helps to regulate the blood glucose level. The primary types and functions of proteins are listed in Table 12.1.5.1.

Table 12.1.5.1: Protein Types and Functions

Type	Examples	Functions
Digestive Enzymes	Amylase, lipase, pepsin, trypsin	Help in digestion of food by catabolizing nutrients into monomeric units
Transport	Hemoglobin, albumin	Carry substances in the blood or lymph throughout the body
Structural	Actin, tubulin, keratin	Construct different structures, like the cytoskeleton
Hormones	Insulin, thyroxine	Coordinate the activity of different body systems
Defense	Immunoglobulins	Protect the body from foreign pathogens
Contractile	Actin, myosin	Effect muscle contraction
Storage	Legume storage proteins, egg white (albumin)	Provide nourishment in early development of the embryo and the seedling

Proteins have different shapes and molecular weights; some proteins are globular in shape whereas others are fibrous in nature. For example, hemoglobin is a globular protein, but collagen, found in our skin, is a fibrous protein. Protein shape is critical to its function, and this shape is maintained by many different types of chemical bonds. Changes in temperature, pH, and exposure to

chemicals may lead to permanent changes in the shape of the protein, leading to loss of function, known as denaturation. All proteins are made up of different arrangements of the same 20 types of amino acids.

Amino Acids

Amino acids are the monomers that make up proteins. Each amino acid has the same fundamental structure, which consists of a central carbon atom, also known as the alpha (α) carbon, bonded to an amino group (NH_2), a carboxyl group (COOH), and to a hydrogen atom. Every amino acid also has another atom or group of atoms bonded to the central atom known as the R group (Figure 12.1.5.1).

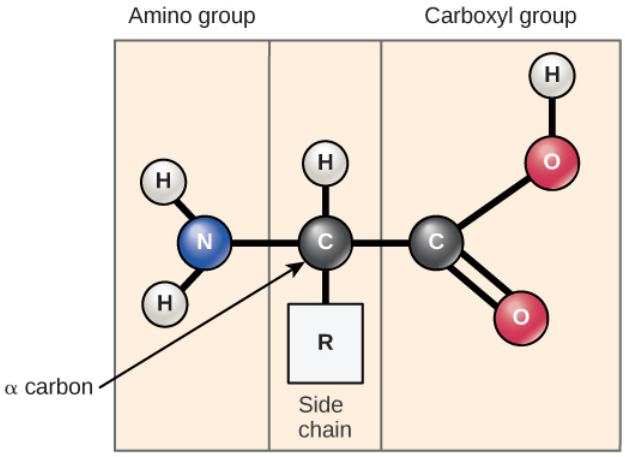


Figure 12.1.5.1: Amino acids have a central asymmetric carbon to which an amino group, a carboxyl group, a hydrogen atom, and a side chain (R group) are attached.

The name "amino acid" is derived from the fact that they contain both amino group and carboxyl-acid-group in their basic structure. As mentioned, there are 20 amino acids present in proteins. Ten of these are considered essential amino acids in humans because the human body cannot produce them and they are obtained from the diet. For each amino acid, the R group (or side chain) is different (Figure 12.1.5.2).

Art Connection

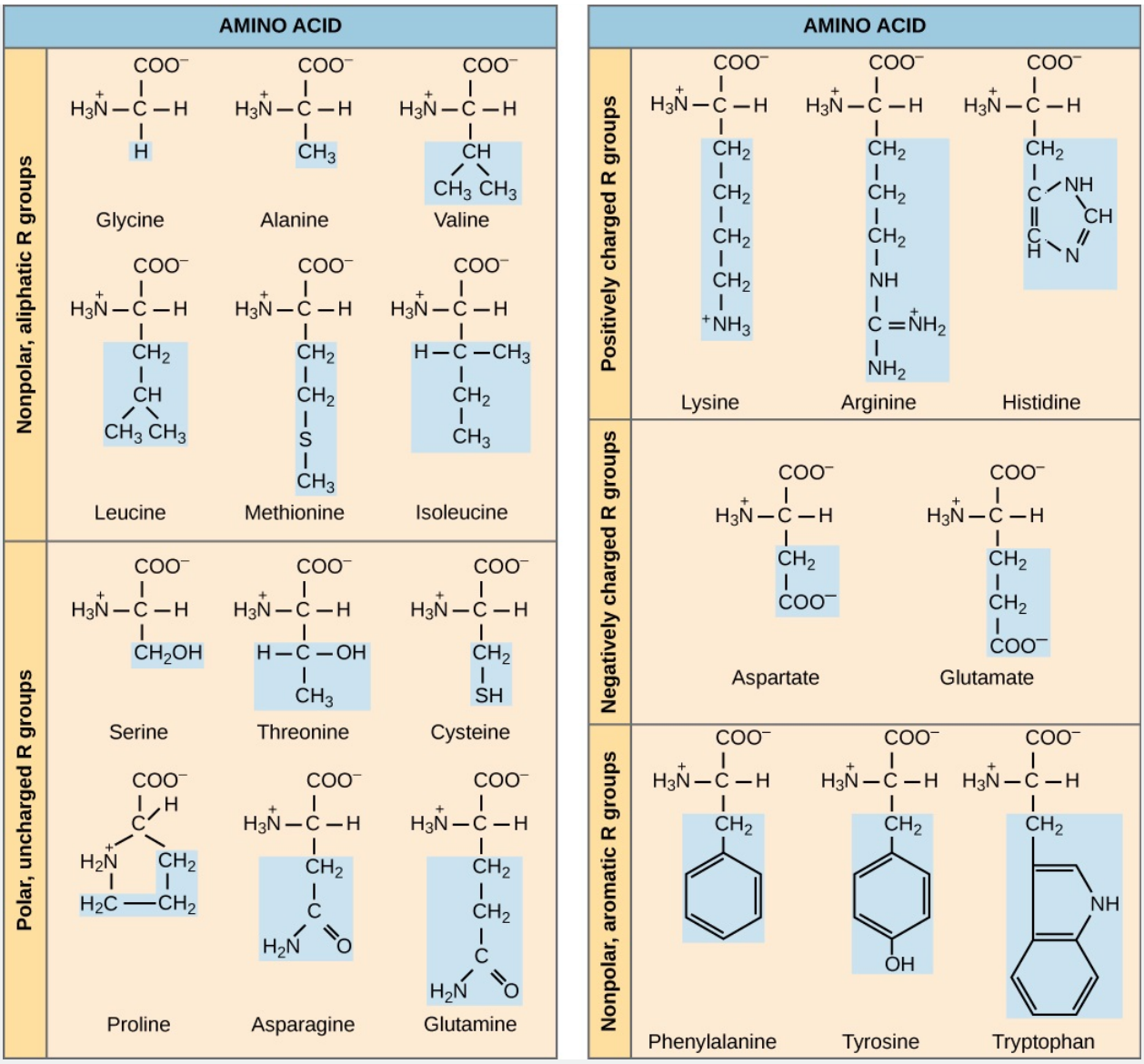


Figure 12.1.5.2: There are 20 common amino acids commonly found in proteins, each with a different R group (variant group) that determines its chemical nature.

Which categories of amino acid would you expect to find on the surface of a soluble protein, and which would you expect to find in the interior? What distribution of amino acids would you expect to find in a protein embedded in a lipid bilayer?

The chemical nature of the side chain determines the nature of the amino acid (that is, whether it is acidic, basic, polar, or nonpolar). For example, the amino acid glycine has a hydrogen atom as the R group. Amino acids such as valine, methionine, and alanine are nonpolar or hydrophobic in nature, while amino acids such as serine, threonine, and cysteine are polar and have hydrophilic side chains. The side chains of lysine and arginine are positively charged, and therefore these amino acids are also known as basic amino acids. Proline has an R group that is linked to the amino group, forming a ring-like structure. Proline is an exception to the standard structure of an animo acid since its amino group is not separate from the side chain (Figure 12.1.5.2).

Amino acids are represented by a single upper case letter or a three-letter abbreviation. For example, valine is known by the letter V or the three-letter symbol val. Just as some fatty acids are essential to a diet, some amino acids are necessary as well. They are known as essential amino acids, and in humans they include isoleucine, leucine, and cysteine. Essential amino acids refer to those necessary for construction of proteins in the body, although not produced by the body; which amino acids are essential varies from organism to organism.

The sequence and the number of amino acids ultimately determine the protein's shape, size, and function. Each amino acid is attached to another amino acid by a covalent bond, known as a peptide bond, which is formed by a dehydration reaction. The carboxyl group of one amino acid and the amino group of the incoming amino acid combine, releasing a molecule of water. The resulting bond is the peptide bond (Figure 12.1.5.3).

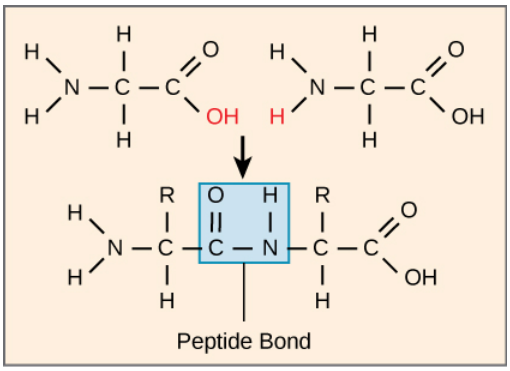


Figure 12.1.5.3: Peptide bond formation is a dehydration synthesis reaction. The carboxyl group of one amino acid is linked to the amino group of the incoming amino acid. In the process, a molecule of water is released.

The products formed by such linkages are called peptides. As more amino acids join to this growing chain, the resulting chain is known as a polypeptide. Each polypeptide has a free amino group at one end. This end is called the N terminal, or the amino terminal, and the other end has a free carboxyl group, also known as the C or carboxyl terminal. While the terms polypeptide and protein are sometimes used interchangeably, a polypeptide is technically a polymer of amino acids, whereas the term protein is used for a polypeptide or polypeptides that have combined together, often have bound non-peptide prosthetic groups, have a distinct shape, and have a unique function. After protein synthesis (translation), most proteins are modified. These are known as post-translational modifications. They may undergo cleavage, phosphorylation, or may require the addition of other chemical groups. Only after these modifications is the protein completely functional.

Evolution Connection

The Evolutionary Significance of Cytochrome cCytochrome c is an important component of the electron transport chain, a part of cellular respiration, and it is normally found in the cellular organelle, the mitochondrion. This protein has a heme prosthetic group, and the central ion of the heme gets alternately reduced and oxidized during electron transfer. Because this essential protein's role in producing cellular energy is crucial, it has changed very little over millions of years. Protein sequencing has shown that there is a considerable amount of cytochrome c amino acid sequence homology among different species; in other words, evolutionary kinship can be assessed by measuring the similarities or differences among various species' DNA or protein sequences.

Scientists have determined that human cytochrome c contains 104 amino acids. For each cytochrome c molecule from different organisms that has been sequenced to date, 37 of these amino acids appear in the same position in all samples of cytochrome c. This indicates that there may have been a common ancestor. On comparing the human and chimpanzee protein sequences, no sequence difference was found. When human and rhesus monkey sequences were compared, the single difference found was in one amino acid. In another comparison, human to yeast sequencing shows a difference in the 44th position.

Protein Structure

As discussed earlier, the shape of a protein is critical to its function. For example, an enzyme can bind to a specific substrate at a site known as the active site. If this active site is altered because of local changes or changes in overall protein structure, the enzyme may be unable to bind to the substrate. To understand how the protein gets its final shape or conformation, we need to understand the four levels of protein structure: primary, secondary, tertiary, and quaternary.

Primary Structure

The unique sequence of amino acids in a polypeptide chain is its primary structure. For example, the pancreatic hormone insulin has two polypeptide chains, A and B, and they are linked together by disulfide bonds. The N terminal amino acid of the A chain is

glycine, whereas the C terminal amino acid is asparagine (Figure 12.1.5.4). The sequences of amino acids in the A and B chains are unique to insulin.

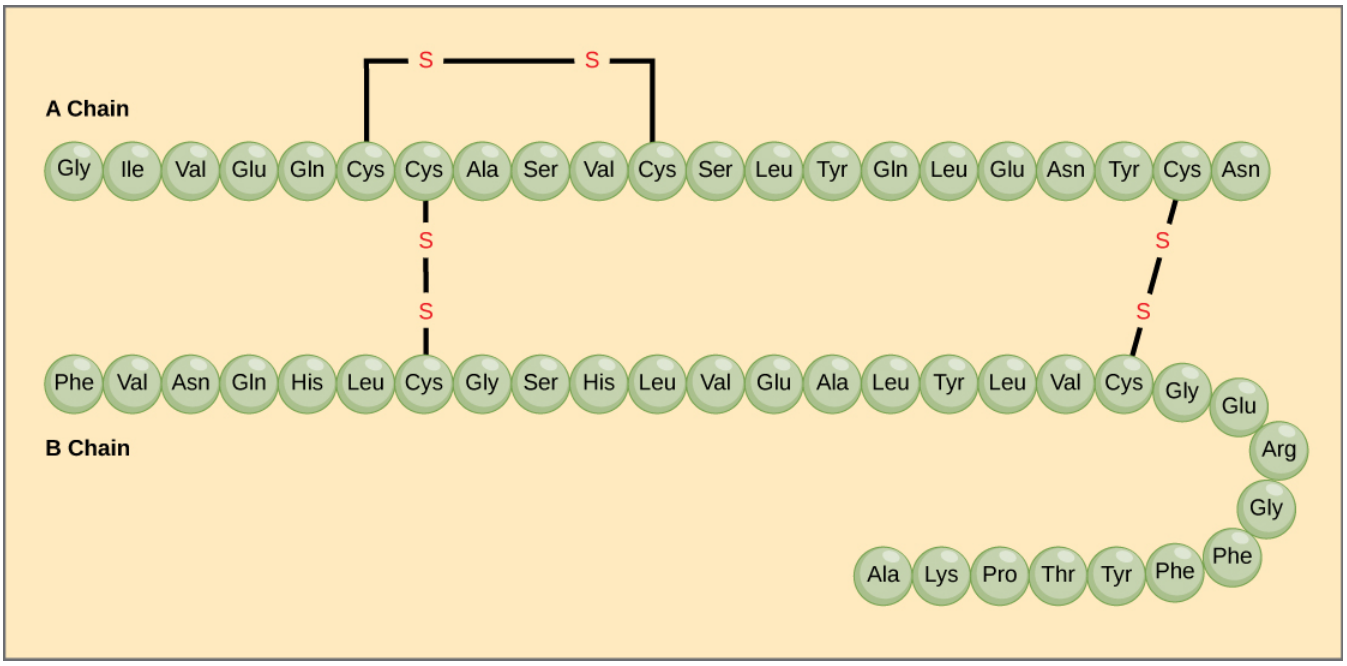


Figure 12.1.5.4: Bovine serum insulin is a protein hormone made of two peptide chains, A (21 amino acids long) and B (30 amino acids long). In each chain, primary structure is indicated by three-letter abbreviations that represent the names of the amino acids in the order they are present. The amino acid cysteine (cys) has a sulfhydryl (SH) group as a side chain. Two sulfhydryl groups can react in the presence of oxygen to form a disulfide (S-S) bond. Two disulfide bonds connect the A and B chains together, and a third helps the A chain fold into the correct shape. Note that all disulfide bonds are the same length, but are drawn different sizes for clarity.

The unique sequence for every protein is ultimately determined by the gene encoding the protein. A change in nucleotide sequence of the gene's coding region may lead to a different amino acid being added to the growing polypeptide chain, causing a change in protein structure and function. In sickle cell anemia, the hemoglobin β chain (a small portion of which is shown in Figure 12.1.5.5) has a single amino acid substitution, causing a change in protein structure and function. Specifically, the amino acid glutamic acid is substituted by valine in the β chain. What is most remarkable to consider is that a hemoglobin molecule is made up of two alpha chains and two beta chains that each consist of about 150 amino acids. The molecule, therefore, has about 600 amino acids. The structural difference between a normal hemoglobin molecule and a sickle cell molecule—which dramatically decreases life expectancy—is a single amino acid of the 600. What is even more remarkable is that those 600 amino acids are encoded by three nucleotides each, and the mutation is caused by a single base change (point mutation), 1 in 1800 bases.

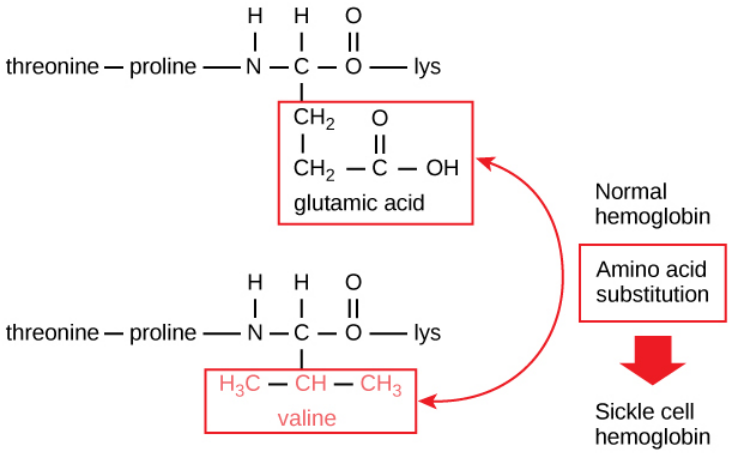


Figure 12.1.5.5: The beta chain of hemoglobin is 147 residues in length, yet a single amino acid substitution leads to sickle cell anemia. In normal hemoglobin, the amino acid at position seven is glutamate. In sickle cell hemoglobin, this glutamate is replaced by a valine.

Because of this change of one amino acid in the chain, hemoglobin molecules form long fibers that distort the biconcave, or disc-shaped, red blood cells and assume a crescent or "sickle" shape, which clogs arteries (Figure 12.1.5.6). This can lead to myriad serious health problems such as breathlessness, dizziness, headaches, and abdominal pain for those affected by this disease.

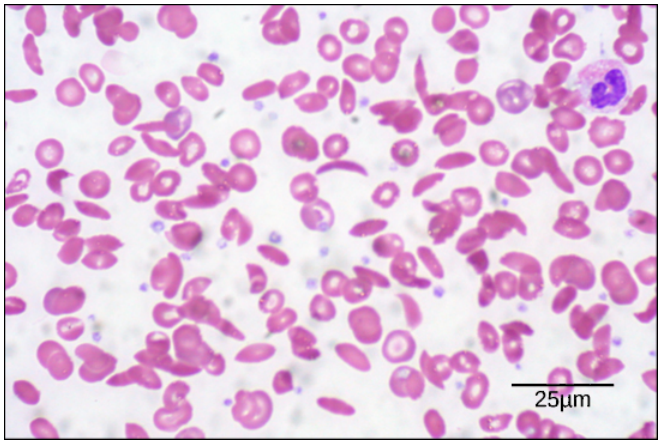


Figure 12.1.5.6: In this blood smear, visualized at 535x magnification using bright field microscopy, sickle cells are crescent shaped, while normal cells are disc-shaped. (credit: modification of work by Ed Uthman; scale-bar data from Matt Russell)

Secondary Structure

The local folding of the polypeptide in some regions gives rise to the secondary structure of the protein. The most common are the α-helix and β-pleated sheet structures (Figure 12.1.5.7). Both structures are the α-helix structure—the helix held in shape by hydrogen bonds. The hydrogen bonds form between the oxygen atom in the carbonyl group in one amino acid and another amino acid that is four amino acids farther along the chain.

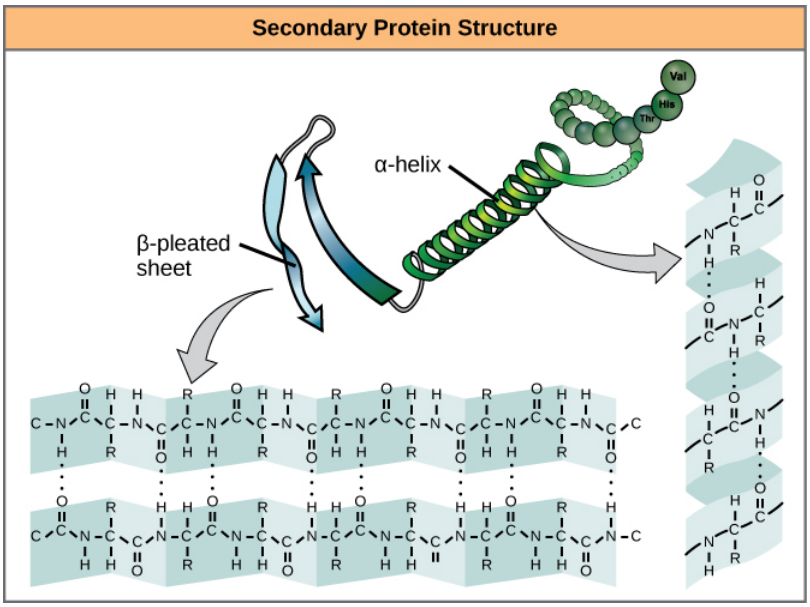


Figure 12.1.5.7: The α-helix and β-pleated sheet are secondary structures of proteins that form because of hydrogen bonding between carbonyl and amino groups in the peptide backbone. Certain amino acids have a propensity to form an α-helix, while others have a propensity to form a β-pleated sheet.

Every helical turn in an alpha helix has 3.6 amino acid residues. The R groups (the variant groups) of the polypeptide protrude out from the α-helix chain. In the β-pleated sheet, the "pleats" are formed by hydrogen bonding between atoms on the backbone of the polypeptide chain. The R groups are attached to the carbons and extend above and below the folds of the pleat. The pleated segments align parallel or antiparallel to each other, and hydrogen bonds form between the partially positive nitrogen atom in the amino group and the partially negative oxygen atom in the carbonyl group of the peptide backbone. The α-helix and β-pleated sheet structures are found in most globular and fibrous proteins and they play an important structural role.

Tertiary Structure

The unique three-dimensional structure of a polypeptide is its tertiary structure (Figure 12.1.5.8). This structure is in part due to chemical interactions at work on the polypeptide chain. Primarily, the interactions among R groups creates the complex three-dimensional tertiary structure of a protein. The nature of the R groups found in the amino acids involved can counteract the formation of the hydrogen bonds described for standard secondary structures. For example, R groups with like charges are repelled by each other and those with unlike charges are attracted to each other (ionic bonds). When protein folding takes place, the hydrophobic R groups of nonpolar amino acids lay in the interior of the protein, whereas the hydrophilic R groups lay on the outside. The former types of interactions are also known as hydrophobic interactions. Interaction between cysteine side chains forms disulfide linkages in the presence of oxygen, the only covalent bond forming during protein folding.

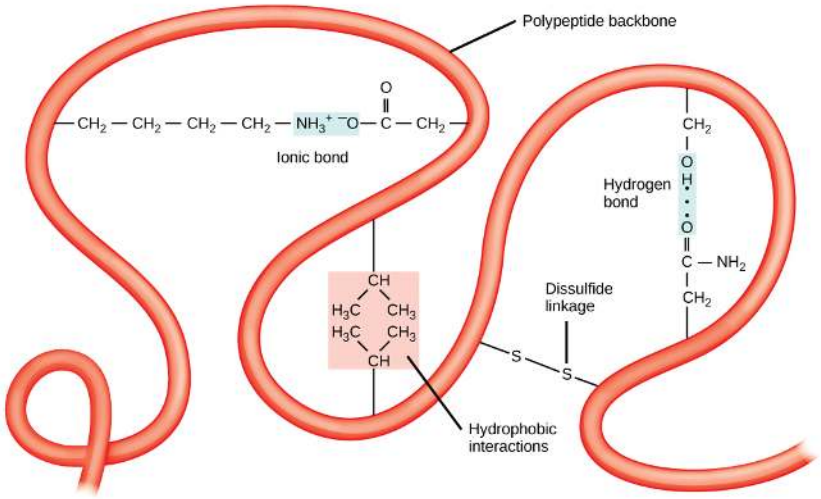


Figure 12.1.5.8: The tertiary structure of proteins is determined by a variety of chemical interactions. These include hydrophobic interactions, ionic bonding, hydrogen bonding and disulfide linkages.

All of these interactions, weak and strong, determine the final three-dimensional shape of the protein. When a protein loses its three-dimensional shape, it may no longer be functional.

Quaternary Structure

In nature, some proteins are formed from several polypeptides, also known as subunits, and the interaction of these subunits forms the quaternary structure. Weak interactions between the subunits help to stabilize the overall structure. For example, insulin (a globular protein) has a combination of hydrogen bonds and disulfide bonds that cause it to be mostly clumped into a ball shape. Insulin starts out as a single polypeptide and loses some internal sequences in the presence of post-translational modification after the formation of the disulfide linkages that hold the remaining chains together. Silk (a fibrous protein), however, has a β-pleated sheet structure that is the result of hydrogen bonding between different chains.

The four levels of protein structure (primary, secondary, tertiary, and quaternary) are illustrated in Figure 12.1.5.9.

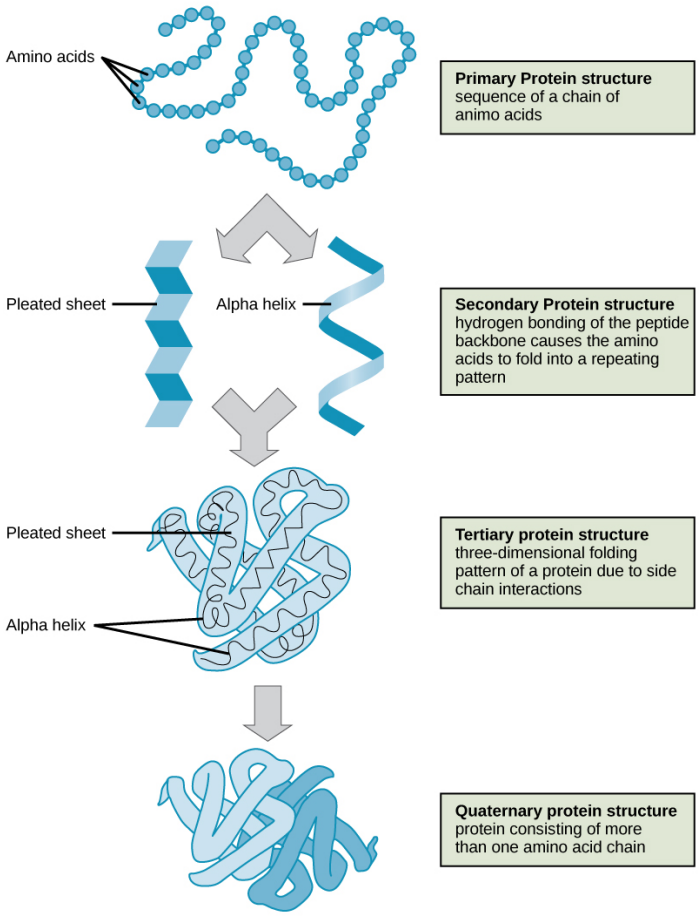


Figure 12.1.5.9: The four levels of protein structure can be observed in these illustrations. (credit: modification of work by National Human Genome Research Institute)

Denaturation and Protein Folding

Each protein has its own unique sequence and shape that are held together by chemical interactions. If the protein is subject to changes in temperature, pH, or exposure to chemicals, the protein structure may change, losing its shape without losing its primary sequence in what is known as denaturation. Denaturation is often reversible because the primary structure of the polypeptide is conserved in the process if the denaturing agent is removed, allowing the protein to resume its function. Sometimes denaturation is irreversible, leading to loss of function. One example of irreversible protein denaturation is when an egg is fried. The albumin protein in the liquid egg white is denatured when placed in a hot pan. Not all proteins are denatured at high temperatures; for instance, bacteria that survive in hot springs have proteins that function at temperatures close to boiling. The stomach is also very acidic, has a low pH, and denatures proteins as part of the digestion process; however, the digestive enzymes of the stomach retain their activity under these conditions.

Protein folding is critical to its function. It was originally thought that the proteins themselves were responsible for the folding process. Only recently was it found that often they receive assistance in the folding process from protein helpers known as chaperones (or chaperonins) that associate with the target protein during the folding process. They act by preventing aggregation of polypeptides that make up the complete protein structure, and they disassociate from the protein once the target protein is folded.

Summary

Proteins are a class of macromolecules that perform a diverse range of functions for the cell. They help in metabolism by providing structural support and by acting as enzymes, carriers, or hormones. The building blocks of proteins (monomers) are amino acids. Each amino acid has a central carbon that is linked to an amino group, a carboxyl group, a hydrogen atom, and an R group or side chain. There are 20 commonly occurring amino acids, each of which differs in the R group. Each amino acid is linked to its neighbors by a peptide bond. A long chain of amino acids is known as a polypeptide.

Proteins are organized at four levels: primary, secondary, tertiary, and (optional) quaternary. The primary structure is the unique sequence of amino acids. The local folding of the polypeptide to form structures such as the α helix and β-pleated sheet constitutes the secondary structure. The overall three-dimensional structure is the tertiary structure. When two or more polypeptides combine to form the complete protein structure, the configuration is known as the quaternary structure of a protein. Protein shape and function are intricately linked; any change in shape caused by changes in temperature or pH may lead to protein denaturation and a loss in function.

Art Connections

Figure 12.1.5.2: Which categories of amino acid would you expect to find on the surface of a soluble protein, and which would you expect to find in the interior? What distribution of amino acids would you expect to find in a protein embedded in a lipid bilayer?

Answer

Polar and charged amino acid residues (the remainder after peptide bond formation) are more likely to be found on the surface of soluble proteins where they can interact with water, and nonpolar (e.g., amino acid side chains) are more likely to be found in the interior where they are sequestered from water. In membrane proteins, nonpolar and hydrophobic amino acid side chains associate with the hydrophobic tails of phospholipids, while polar and charged amino acid side chains interact with the polar head groups or with the aqueous solution. However, there are exceptions. Sometimes, positively and negatively charged amino acid side chains interact with one another in the interior of a protein, and polar or charged amino acid side chains that interact with a ligand can be found in the ligand binding pocket.

Glossary

alpha-helix structure (α-helix)
type of secondary structure of proteins formed by folding of the polypeptide into a helix shape with hydrogen bonds stabilizing the structure

amino acid
monomer of a protein; has a central carbon or alpha carbon to which an amino group, a carboxyl group, a hydrogen, and an R group or side chain is attached; the R group is different for all 20 amino acids

beta-pleated sheet (β-pleated)
secondary structure found in proteins in which “pleats” are formed by hydrogen bonding between atoms on the backbone of the polypeptide chain

chaperone
(also, chaperonin) protein that helps nascent protein in the folding process

denaturation
loss of shape in a protein as a result of changes in temperature, pH, or exposure to chemicals

enzyme
catalyst in a biochemical reaction that is usually a complex or conjugated protein

hormone
chemical signaling molecule, usually protein or steroid, secreted by endocrine cells that act to control or regulate specific physiological processes

peptide bond
bond formed between two amino acids by a dehydration reaction

polypeptide

long chain of amino acids linked by peptide bonds

primary structure

linear sequence of amino acids in a protein

protein

biological macromolecule composed of one or more chains of amino acids

quaternary structure

association of discrete polypeptide subunits in a protein

secondary structure

regular structure formed by proteins by intramolecular hydrogen bonding between the oxygen atom of one amino acid residue and the hydrogen attached to the nitrogen atom of another amino acid residue

tertiary structure

three-dimensional conformation of a protein, including interactions between secondary structural elements; formed from interactions between amino acid side chains

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12.1.6: Nucleic Acids

Skills to Develop

- Describe the structure of nucleic acids and define the two types of nucleic acids
- Explain the structure and role of DNA
- Explain the structure and roles of RNA

Nucleic acids are the most important macromolecules for the continuity of life. They carry the genetic blueprint of a cell and carry instructions for the functioning of the cell.

DNA and RNA

The two main types of nucleic acids are deoxyribonucleic acid (DNA) and ribonucleic acid (RNA). DNA is the genetic material found in all living organisms, ranging from single-celled bacteria to multicellular mammals. It is found in the nucleus of eukaryotes and in the organelles, chloroplasts, and mitochondria. In prokaryotes, the DNA is not enclosed in a membranous envelope.

The entire genetic content of a cell is known as its genome, and the study of genomes is genomics. In eukaryotic cells but not in prokaryotes, DNA forms a complex with histone proteins to form chromatin, the substance of eukaryotic chromosomes. A chromosome may contain tens of thousands of genes. Many genes contain the information to make protein products; other genes code for RNA products. DNA controls all of the cellular activities by turning the genes “on” or “off.”

The other type of nucleic acid, RNA, is mostly involved in protein synthesis. The DNA molecules never leave the nucleus but instead use an intermediary to communicate with the rest of the cell. This intermediary is the messenger RNA (mRNA). Other types of RNA—like rRNA, tRNA, and microRNA—are involved in protein synthesis and its regulation.

DNA and RNA are made up of monomers known as nucleotides. The nucleotides combine with each other to form a polynucleotide, DNA or RNA. Each nucleotide is made up of three components: a nitrogenous base, a pentose (five-carbon) sugar, and a phosphate group (Figure 12.1.6.1). Each nitrogenous base in a nucleotide is attached to a sugar molecule, which is attached to one or more phosphate groups.

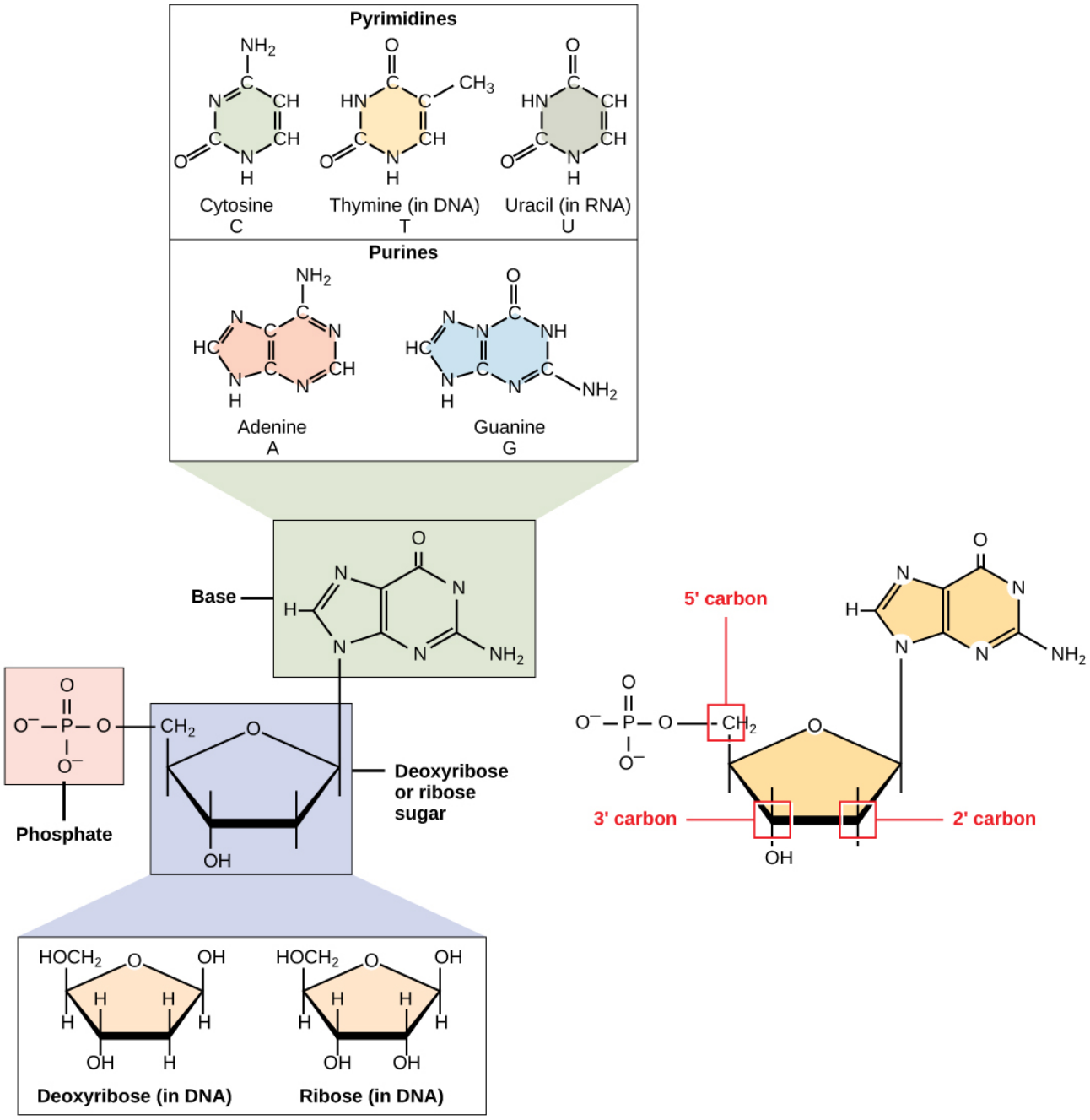


Figure 12.1.6.1: A nucleotide is made up of three components: a nitrogenous base, a pentose sugar, and one or more phosphate groups. Carbon residues in the pentose are numbered 1′ through 5′ (the prime distinguishes these residues from those in the base, which are numbered without using a prime notation). The base is attached to the 1′ position of the ribose, and the phosphate is attached to the 5′ position. When a polynucleotide is formed, the 5′ phosphate of the incoming nucleotide attaches to the 3′ hydroxyl group at the end of the growing chain. Two types of pentose are found in nucleotides, deoxyribose (found in DNA) and ribose (found in RNA). Deoxyribose is similar in structure to ribose, but it has an H instead of an OH at the 2′ position. Bases can be divided into two categories: purines and pyrimidines. Purines have a double ring structure, and pyrimidines have a single ring.

The nitrogenous bases, important components of nucleotides, are organic molecules and are so named because they contain carbon and nitrogen. They are bases because they contain an amino group that has the potential of binding an extra hydrogen, and thus, decreases the hydrogen ion concentration in its environment, making it more basic. Each nucleotide in DNA contains one of four possible nitrogenous bases: adenine (A), guanine (G) cytosine (C), and thymine (T).

Adenine and guanine are classified as purines. The primary structure of a purine is two carbon-nitrogen rings. Cytosine, thymine, and uracil are classified as pyrimidines which have a single carbon-nitrogen ring as their primary structure (Figure 12.1.6.1). Each

of these basic carbon-nitrogen rings has different functional groups attached to it. In molecular biology shorthand, the nitrogenous bases are simply known by their symbols A, T, G, C, and U. DNA contains A, T, G, and C whereas RNA contains A, U, G, and C.

The pentose sugar in DNA is deoxyribose, and in RNA, the sugar is ribose (Figure 12.1.6.1). The difference between the sugars is the presence of the hydroxyl group on the second carbon of the ribose and hydrogen on the second carbon of the deoxyribose. The carbon atoms of the sugar molecule are numbered as 1′, 2′, 3′, 4′, and 5′ (1′ is read as “one prime”). The phosphate residue is attached to the hydroxyl group of the 5′ carbon of one sugar and the hydroxyl group of the 3′ carbon of the sugar of the next nucleotide, which forms a 5′–3′ phosphodiester linkage. The phosphodiester linkage is not formed by simple dehydration reaction like the other linkages connecting monomers in macromolecules: its formation involves the removal of two phosphate groups. A polynucleotide may have thousands of such phosphodiester linkages.

DNA Double-Helix Structure

DNA has a double-helix structure (Figure 12.1.6.2). The sugar and phosphate lie on the outside of the helix, forming the backbone of the DNA. The nitrogenous bases are stacked in the interior, like the steps of a staircase, in pairs; the pairs are bound to each other by hydrogen bonds. Every base pair in the double helivx is separated from the next base pair by 0.34 nm. The two strands of the helix run in opposite directions, meaning that the 5′ carbon end of one strand will face the 3′ carbon end of its matching strand. (This is referred to as antiparallel orientation and is important to DNA replication and in many nucleic acid interactions.)

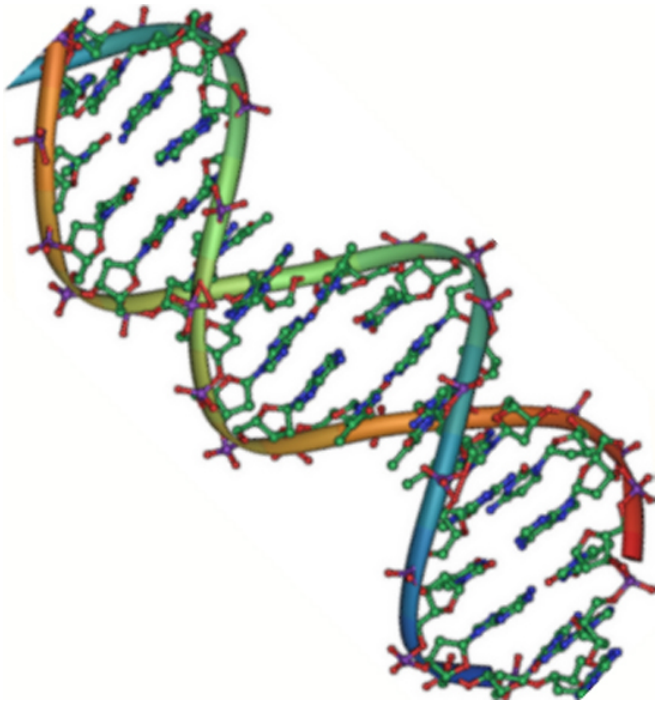


Figure 12.1.6.2: Native DNA is an antiparallel double helix. The phosphate backbone (indicated by the curvy lines) is on the outside, and the bases are on the inside. Each base from one strand interacts via hydrogen bonding with a base from the opposing strand. (credit: Jerome Walker/Dennis Myts)

Only certain types of base pairing are allowed. For example, a certain purine can only pair with a certain pyrimidine. This means A can pair with T, and G can pair with C, as shown in Figure 12.1.6.3. This is known as the base complementary rule. In other words, the DNA strands are complementary to each other. If the sequence of one strand is AATTGGCC, the complementary strand would have the sequence TTAACCGG. During DNA replication, each strand is copied, resulting in a daughter DNA double helix containing one parental DNA strand and a newly synthesized strand.

Art Connection

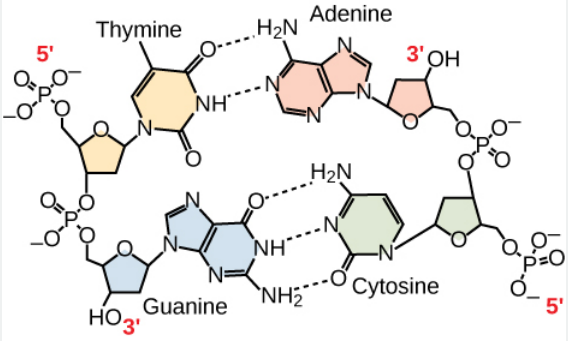


Figure 12.1.6.3: In a double stranded DNA molecule, the two strands run antiparallel to one another so that one strand runs 5′ to 3′ and the other 3′ to 5′. The phosphate backbone is located on the outside, and the bases are in the middle. Adenine forms hydrogen bonds (or base pairs) with thymine, and guanine base pairs with cytosine.

A mutation occurs, and cytosine is replaced with adenine. What impact do you think this will have on the DNA structure?

RNA

Ribonucleic acid, or RNA, is mainly involved in the process of protein synthesis under the direction of DNA. RNA is usually single-stranded and is made of ribonucleotides that are linked by phosphodiester bonds. A ribonucleotide in the RNA chain contains ribose (the pentose sugar), one of the four nitrogenous bases (A, U, G, and C), and the phosphate group.

There are four major types of RNA: messenger RNA (mRNA), ribosomal RNA (rRNA), transfer RNA (tRNA), and microRNA (miRNA). The first, mRNA, carries the message from DNA, which controls all of the cellular activities in a cell. If a cell requires a certain protein to be synthesized, the gene for this product is turned “on” and the messenger RNA is synthesized in the nucleus. The RNA base sequence is complementary to the coding sequence of the DNA from which it has been copied. However, in RNA, the base T is absent and U is present instead. If the DNA strand has a sequence AATTGCGC, the sequence of the complementary RNA is UUAACGCG. In the cytoplasm, the mRNA interacts with ribosomes and other cellular machinery (Figure 12.1.6.4).

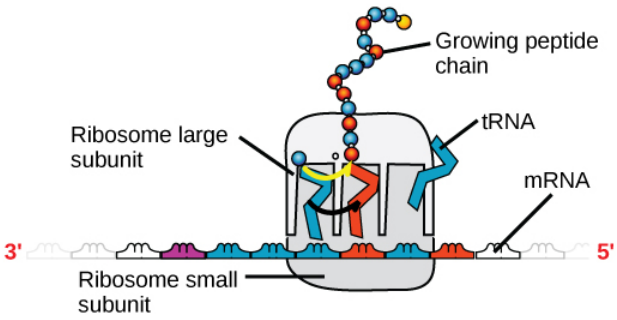


Figure 12.1.6.4: A ribosome has two parts: a large subunit and a small subunit. The mRNA sits in between the two subunits. A tRNA molecule recognizes a codon on the mRNA, binds to it by complementary base pairing, and adds the correct amino acid to the growing peptide chain.

The mRNA is read in sets of three bases known as codons. Each codon codes for a single amino acid. In this way, the mRNA is read and the protein product is made. Ribosomal RNA (rRNA) is a major constituent of ribosomes on which the mRNA binds. The rRNA ensures the proper alignment of the mRNA and the ribosomes; the rRNA of the ribosome also has an enzymatic activity (peptidyl transferase) and catalyzes the formation of the peptide bonds between two aligned amino acids. Transfer RNA (tRNA) is one of the smallest of the four types of RNA, usually 70–90 nucleotides long. It carries the correct amino acid to the site of protein synthesis. It is the base pairing between the tRNA and mRNA that allows for the correct amino acid to be inserted in the polypeptide chain. microRNAs are the smallest RNA molecules and their role involves the regulation of gene expression by interfering with the expression of certain mRNA messages. Table 12.1.6.1 below summarizes features of DNA and RNA.

Table 12.1.6.1: Features of DNA and RNA.

	DNA	RNA
Function	Carries genetic information	Involved in protein synthesis
Location	Remains in the nucleus	Leaves the nucleus
Structure	Double helix	Usually single-stranded
Sugar	Deoxyribose	Ribose
Pyrimidines	Cytosine, thymine	Cytosine, uracil
Purines	Adenine, guanine	Adenine, guanine

Even though the RNA is single stranded, most RNA types show extensive intramolecular base pairing between complementary sequences, creating a predictable three-dimensional structure essential for their function.

As you have learned, information flow in an organism takes place from DNA to RNA to protein. DNA dictates the structure of mRNA in a process known as transcription, and RNA dictates the structure of protein in a process known as translation. This is known as the Central Dogma of Life, which holds true for all organisms; however, exceptions to the rule occur in connection with viral infections.

Link to Learning

To learn more about DNA, explore the Howard Hughes Medical Institute BioInteractive animations on the topic of DNA.

Summary

Nucleic acids are molecules made up of nucleotides that direct cellular activities such as cell division and protein synthesis. Each nucleotide is made up of a pentose sugar, a nitrogenous base, and a phosphate group. There are two types of nucleic acids: DNA and RNA. DNA carries the genetic blueprint of the cell and is passed on from parents to offspring (in the form of chromosomes). It has a double-helical structure with the two strands running in opposite directions, connected by hydrogen bonds, and complementary to each other. RNA is single-stranded and is made of a pentose sugar (ribose), a nitrogenous base, and a phosphate group. RNA is involved in protein synthesis and its regulation. Messenger RNA (mRNA) is copied from the DNA, is exported from the nucleus to the cytoplasm, and contains information for the construction of proteins. Ribosomal RNA (rRNA) is a part of the ribosomes at the site of protein synthesis, whereas transfer RNA (tRNA) carries the amino acid to the site of protein synthesis. microRNA regulates the use of mRNA for protein synthesis.

Art Connections

Figure 12.1.6.3: A mutation occurs, and cytosine is replaced with adenine. What impact do you think this will have on the DNA structure?

Answer

Adenine is larger than cytosine and will not be able to base pair properly with the guanine on the opposing strand. This will cause the DNA to bulge. DNA repair enzymes may recognize the bulge and replace the incorrect nucleotide.

Glossary

deoxyribonucleic acid (DNA)
double-helical molecule that carries the hereditary information of the cell

messenger RNA (mRNA)
RNA that carries information from DNA to ribosomes during protein synthesis

nucleic acid
biological macromolecule that carries the genetic blueprint of a cell and carries instructions for the functioning of the cell

nucleotide
monomer of nucleic acids; contains a pentose sugar, one or more phosphate groups, and a nitrogenous base

phosphodiester
linkage covalent chemical bond that holds together the polynucleotide chains with a phosphate group linking two pentose sugars of neighboring nucleotides

polynucleotide
long chain of nucleotides

purine
type of nitrogenous base in DNA and RNA; adenine and guanine are purines

pyrimidine
type of nitrogenous base in DNA and RNA; cytosine, thymine, and uracil are pyrimidines

ribonucleic acid (RNA)
single-stranded, often internally base paired, molecule that is involved in protein synthesis

ribosomal RNA (rRNA)
RNA that ensures the proper alignment of the mRNA and the ribosomes during protein synthesis and catalyzes the formation of the peptide linkage

transcription
process through which messenger RNA forms on a template of DNA

transfer RNA (tRNA)
RNA that carries activated amino acids to the site of protein synthesis on the ribosome

translation
process through which RNA directs the formation of protein

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CHAPTER OVERVIEW

12.2: Cell Structure

Your body has many kinds of cells, each specialized for a specific purpose. Just as a home is made from a variety of building materials, the human body is constructed from many cell types. For example, epithelial cells protect the surface of the body and cover the organs and body cavities within. Bone cells help to support and protect the body. Cells of the immune system fight invading bacteria. Additionally, blood and blood cells carry nutrients and oxygen throughout the body while removing carbon dioxide. Each of these cell types plays a vital role during the growth, development, and day-to-day maintenance of the body. In spite of their enormous variety, however, cells from all organisms—even ones as diverse as bacteria, onion, and human—share certain fundamental characteristics.

12.2.1: Prelude to Cell Structure
12.2.2: Studying Cells
12.2.3: Prokaryotic Cells
12.2.4: Eukaryotic Cells
12.2.5: The Endomembrane System and Proteins
12.2.6: The Cytoskeleton
12.2.7: Connections between Cells and Cellular Activities
12.2.E: Cell Structure (Exercises)

Contributors

- Connie Rye (East Mississippi Community College), Robert Wise (University of Wisconsin, Oshkosh), Vladimir Jurukovski (Suffolk County Community College), Jean DeSaix (University of North Carolina at Chapel Hill), Jung Choi (Georgia Institute of Technology), Yael Avissar (Rhode Island College) among other contributing authors. Original content by OpenStax (CC BY 4.0; Download for free at http://cnx.org/contents/185cbf87-c72...f21b5eabd@9.87).

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12.2.1: Prelude to Cell Structure

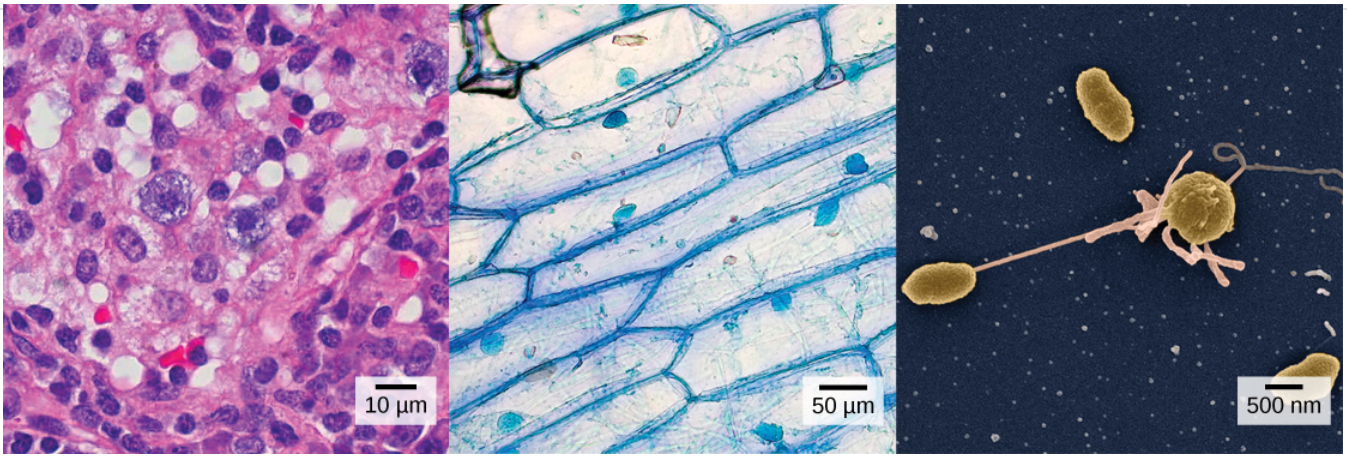


Figure 12.2.1.1: (a) Nasal sinus cells (viewed with a light microscope), (b) onion cells (viewed with a light microscope), and (c) *Vibrio tasmaniensis* bacterial cells (seen through a scanning electron microscope) are from very different organisms, yet all share certain characteristics of basic cell structure. (credit a: modification of work by Ed Uthman, MD; credit b: modification of work by Umberto Salvagnin; credit c: modification of work by Anthony D'Onofrio, William H. Fowle, Eric J. Stewart, and Kim Lewis of the Lewis Lab at Northeastern University; scale-bar data from Matt Russell)

Close your eyes and picture a brick wall. What is the basic building block of that wall? A single brick, of course. Like a brick wall, your body is composed of basic building blocks, and the building blocks of your body are cells.

Your body has many kinds of cells, each specialized for a specific purpose. Just as a home is made from a variety of building materials, the human body is constructed from many cell types. For example, epithelial cells protect the surface of the body and cover the organs and body cavities within. Bone cells help to support and protect the body. Cells of the immune system fight invading bacteria. Additionally, blood and blood cells carry nutrients and oxygen throughout the body while removing carbon dioxide. Each of these cell types plays a vital role during the growth, development, and day-to-day maintenance of the body. In spite of their enormous variety, however, cells from all organisms—even ones as diverse as bacteria, onion, and human—share certain fundamental characteristics.

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12.2.2: Studying Cells

Skills to Develop

- Describe the role of cells in organisms
- Compare and contrast light microscopy and electron microscopy
- Summarize cell theory

A cell is the smallest unit of a living thing. A living thing, whether made of one cell (like bacteria) or many cells (like a human), is called an organism. Thus, cells are the basic building blocks of all organisms.

Several cells of one kind that interconnect with each other and perform a shared function form tissues, several tissues combine to form an organ (your stomach, heart, or brain), and several organs make up an organ system (such as the digestive system, circulatory system, or nervous system). Several systems that function together form an organism (like a human being). Here, we will examine the structure and function of cells.

There are many types of cells, all grouped into one of two broad categories: prokaryotic and eukaryotic. For example, both animal and plant cells are classified as eukaryotic cells, whereas bacterial cells are classified as prokaryotic. Before discussing the criteria for determining whether a cell is prokaryotic or eukaryotic, let's first examine how biologists study cells.

Microscopy

Cells vary in size. With few exceptions, individual cells cannot be seen with the naked eye, so scientists use microscopes (micro- = "small"; -scope = "to look at") to study them. A microscope is an instrument that magnifies an object. Most photographs of cells are taken with a microscope, and these images can also be called micrographs.

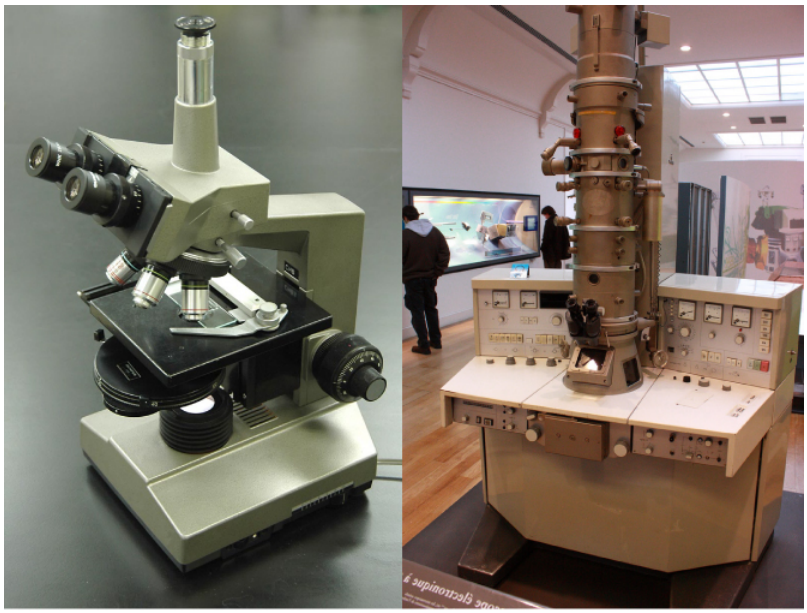
The optics of a microscope's lenses change the orientation of the image that the user sees. A specimen that is right-side up and facing right on the microscope slide will appear upside-down and facing left when viewed through a microscope, and vice versa. Similarly, if the slide is moved left while looking through the microscope, it will appear to move right, and if moved down, it will seem to move up. This occurs because microscopes use two sets of lenses to magnify the image. Because of the manner by which light travels through the lenses, this system of two lenses produces an inverted image (binocular, or dissecting microscopes, work in a similar manner, but include an additional magnification system that makes the final image appear to be upright).

Light Microscopes

To give you a sense of cell size, a typical human red blood cell is about eight millionths of a meter or eight micrometers (abbreviated as eight µm) in diameter; the head of a pin of is about two thousandths of a meter (two mm) in diameter. That means about 250 red blood cells could fit on the head of a pin.

Most student microscopes are classified as light microscopes (Figure 12.2.2.1a). Visible light passes and is bent through the lens system to enable the user to see the specimen. Light microscopes are advantageous for viewing living organisms, but since individual cells are generally transparent, their components are not distinguishable unless they are colored with special stains. Staining, however, usually kills the cells.

Light microscopes commonly used in the undergraduate college laboratory magnify up to approximately 400 times. Two parameters that are important in microscopy are magnification and resolving power. Magnification is the process of enlarging an object in appearance. Resolving power is the ability of a microscope to distinguish two adjacent structures as separate: the higher the resolution, the better the clarity and detail of the image. When oil immersion lenses are used for the study of small objects, magnification is usually increased to 1,000 times. In order to gain a better understanding of cellular structure and function, scientists typically use electron microscopes.



(a) (b)

Figure 12.2.2.1: (a) Most light microscopes used in a college biology lab can magnify cells up to approximately 400 times and have a resolution of about 200 nanometers. (b) Electron microscopes provide a much higher magnification, 100,000x, and a have a resolution of 50 picometers. (credit a: modification of work by "GcG"/Wikimedia Commons; credit b: modification of work by Evan Bench)

Electron Microscopes

In contrast to light microscopes, electron microscopes (Figure 12.2.2.1b) use a beam of electrons instead of a beam of light. Not only does this allow for higher magnification and, thus, more detail (Figure 12.2.2.2), it also provides higher resolving power. The method used to prepare the specimen for viewing with an electron microscope kills the specimen. Electrons have short wavelengths (shorter than photons) that move best in a vacuum, so living cells cannot be viewed with an electron microscope.

In a scanning electron microscope, a beam of electrons moves back and forth across a cell's surface, creating details of cell surface characteristics. In a transmission electron microscope, the electron beam penetrates the cell and provides details of a cell's internal structures. As you might imagine, electron microscopes are significantly more bulky and expensive than light microscopes.



(a) (b)

Figure 12.2.2.2: (a) These *Salmonella* bacteria appear as tiny purple dots when viewed with a light microscope. (b) This scanning electron microscope micrograph shows *Salmonella* bacteria (in red) invading human cells (yellow). Even though subfigure (b) shows a different *Salmonella* specimen than subfigure (a), you can still observe the comparative increase in magnification and detail. (credit a: modification of work by CDC/Armed Forces Institute of Pathology, Charles N. Farmer, Rocky Mountain Laboratories; credit b: modification of work by NIAID, NIH; scale-bar data from Matt Russell)

Link to Learning

For another perspective on cell size, try the HowBig interactive at this site.

Cell Theory

The microscopes we use today are far more complex than those used in the 1600s by Antony van Leeuwenhoek, a Dutch shopkeeper who had great skill in crafting lenses. Despite the limitations of his now-ancient lenses, van Leeuwenhoek observed the movements of protista (a type of single-celled organism) and sperm, which he collectively termed “animalcules.”

In a 1665 publication called *Micrographia*, experimental scientist Robert Hooke coined the term “cell” for the box-like structures he observed when viewing cork tissue through a lens. In the 1670s, van Leeuwenhoek discovered bacteria and protozoa. Later advances in lenses, microscope construction, and staining techniques enabled other scientists to see some components inside cells.

By the late 1830s, botanist Matthias Schleiden and zoologist Theodor Schwann were studying tissues and proposed the unified cell theory, which states that all living things are composed of one or more cells, the cell is the basic unit of life, and new cells arise from existing cells. Rudolf Virchow later made important contributions to this theory.

Career Connection: Cytotechnologist

Have you ever heard of a medical test called a Pap smear (Figure 12.2.2.3)? In this test, a doctor takes a small sample of cells from the uterine cervix of a patient and sends it to a medical lab where a cytotechnologist stains the cells and examines them for any changes that could indicate cervical cancer or a microbial infection.

Cytotechnologists (cyto- = “cell”) are professionals who study cells via microscopic examinations and other laboratory tests. They are trained to determine which cellular changes are within normal limits and which are abnormal. Their focus is not limited to cervical cells; they study cellular specimens that come from all organs. When they notice abnormalities, they consult a pathologist, who is a medical doctor who can make a clinical diagnosis.

Cytotechnologists play a vital role in saving people’s lives. When abnormalities are discovered early, a patient’s treatment can begin sooner, which usually increases the chances of a successful outcome.

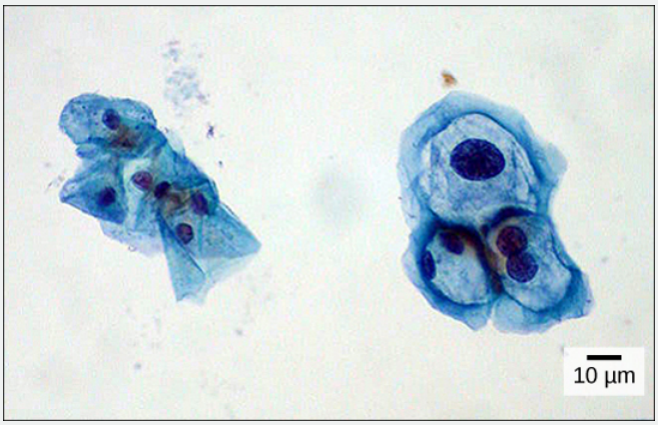


Figure 12.2.2.3: These uterine cervix cells, viewed through a light microscope, were obtained from a Pap smear. Normal cells are on the left. The cells on the right are infected with human papillomavirus (HPV). Notice that the infected cells are larger; also, two of these cells each have two nuclei instead of one, the normal number. (credit: modification of work by Ed Uthman, MD; scale-bar data from Matt Russell)

Summary

A cell is the smallest unit of life. Most cells are so tiny that they cannot be seen with the naked eye. Therefore, scientists use microscopes to study cells. Electron microscopes provide higher magnification, higher resolution, and more detail than light microscopes. The unified cell theory states that all organisms are composed of one or more cells, the cell is the basic unit of life, and new cells arise from existing cells.

Glossary

cell theory
see unified cell theory

electron microscope
an instrument that magnifies an object using a beam of electrons passed and bent through a lens system to visualize a specimen

light microscope
an instrument that magnifies an object using a beam visible light passed and bent through a lens system to visualize a specimen

microscope
an instrument that magnifies an object

unified cell theory
a biological concept that states that all organisms are composed of one or more cells; the cell is the basic unit of life; and new cells arise from existing cells

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12.2.3: Prokaryotic Cells

Skills to Develop

- Name examples of prokaryotic and eukaryotic organisms
- Compare and contrast prokaryotic cells and eukaryotic cells
- Describe the relative sizes of different kinds of cells
- Explain why cells must be small

Cells fall into one of two broad categories: prokaryotic and eukaryotic. Only the predominantly single-celled organisms of the domains Bacteria and Archaea are classified as prokaryotes (pro- = “before”; -kary- = “nucleus”). Cells of animals, plants, fungi, and protists are all eukaryotes (eu- = “true”) and are made up of eukaryotic cells.

Components of Prokaryotic Cells

All cells share four common components: 1) a plasma membrane, an outer covering that separates the cell’s interior from its surrounding environment; 2) cytoplasm, consisting of a jelly-like cytosol within the cell in which other cellular components are found; 3) DNA, the genetic material of the cell; and 4) ribosomes, which synthesize proteins. However, prokaryotes differ from eukaryotic cells in several ways.

A prokaryote is a simple, mostly single-celled (unicellular) organism that lacks a nucleus, or any other membrane-bound organelle. We will shortly come to see that this is significantly different in eukaryotes. Prokaryotic DNA is found in a central part of the cell: the nucleoid (Figure 12.2.3.1).

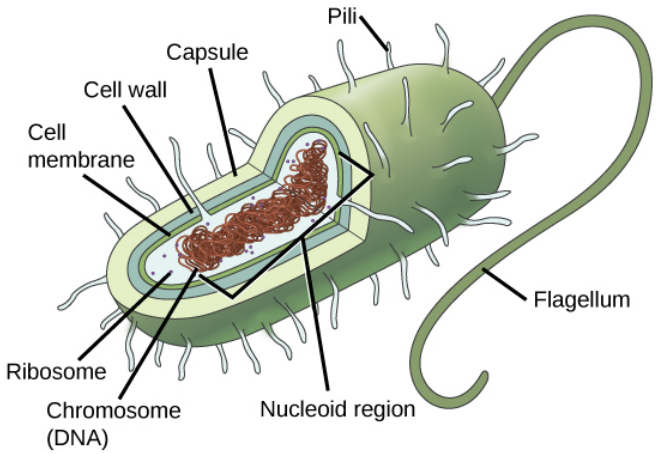


Figure 12.2.3.1: This figure shows the generalized structure of a prokaryotic cell. All prokaryotes have chromosomal DNA localized in a nucleoid, ribosomes, a cell membrane, and a cell wall. The other structures shown are present in some, but not all, bacteria.

Most prokaryotes have a peptidoglycan cell wall and many have a polysaccharide capsule (Figure 12.2.3.1). The cell wall acts as an extra layer of protection, helps the cell maintain its shape, and prevents dehydration. The capsule enables the cell to attach to surfaces in its environment. Some prokaryotes have flagella, pili, or fimbriae. Flagella are used for locomotion. Pili are used to exchange genetic material during a type of reproduction called conjugation. Fimbriae are used by bacteria to attach to a host cell.

Career Connection: Microbiologist

The most effective action anyone can take to prevent the spread of contagious illnesses is to wash his or her hands. Why? Because microbes (organisms so tiny that they can only be seen with microscopes) are ubiquitous. They live on doorknobs, money, your hands, and many other surfaces. If someone sneezes into his hand and touches a doorknob, and afterwards you touch that same doorknob, the microbes from the sneezer’s mucus are now on your hands. If you touch your hands to your mouth, nose, or eyes, those microbes can enter your body and could make you sick.

However, not all microbes (also called microorganisms) cause disease; most are actually beneficial. You have microbes in your gut that make vitamin K. Other microorganisms are used to ferment beer and wine.

Microbiologists are scientists who study microbes. Microbiologists can pursue a number of careers. Not only do they work in the food industry, they are also employed in the veterinary and medical fields. They can work in the pharmaceutical sector, serving key roles in research and development by identifying new sources of antibiotics that could be used to treat bacterial infections.

Environmental microbiologists may look for new ways to use specially selected or genetically engineered microbes for the removal of pollutants from soil or groundwater, as well as hazardous elements from contaminated sites. These uses of microbes are called bioremediation technologies. Microbiologists can also work in the field of bioinformatics, providing specialized knowledge and insight for the design, development, and specificity of computer models of, for example, bacterial epidemics.

Cell Size

At 0.1 to 5.0 µm in diameter, prokaryotic cells are significantly smaller than eukaryotic cells, which have diameters ranging from 10 to 100 µm (Figure 12.2.3.2). The small size of prokaryotes allows ions and organic molecules that enter them to quickly diffuse to other parts of the cell. Similarly, any wastes produced within a prokaryotic cell can quickly diffuse out. This is not the case in eukaryotic cells, which have developed different structural adaptations to enhance intracellular transport.

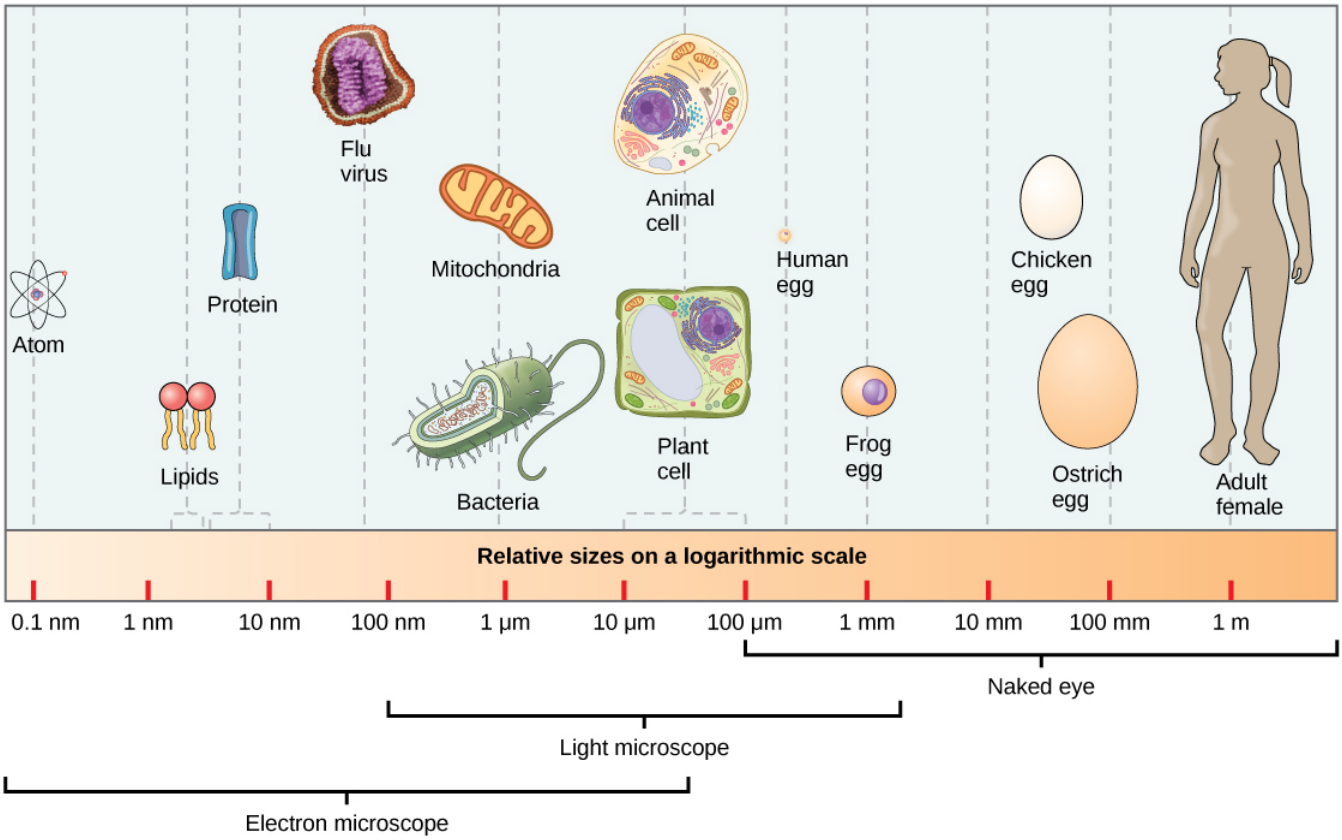


Figure 12.2.3.2: This figure shows relative sizes of microbes on a logarithmic scale (recall that each unit of increase in a logarithmic scale represents a 10-fold increase in the quantity being measured).

Small size, in general, is necessary for all cells, whether prokaryotic or eukaryotic. Let's examine why that is so. First, we'll consider the area and volume of a typical cell. Not all cells are spherical in shape, but most tend to approximate a sphere. You may remember from your high school geometry course that the formula for the surface area of a sphere is $4\pi r^2$, while the formula for its volume is $4\pi r^2/3$. Thus, as the radius of a cell increases, its surface area increases as the square of its radius, but its volume increases as the cube of its radius (much more rapidly). Therefore, as a cell increases in size, its surface area-to-volume ratio decreases. This same principle would apply if the cell had the shape of a cube (Figure 12.2.3.3). If the cell grows too large, the plasma membrane will not have sufficient surface area to support the rate of diffusion required for the increased volume. In other words, as a cell grows, it becomes less efficient. One way to become more efficient is to divide; another way is to develop

organelles that perform specific tasks. These adaptations lead to the development of more sophisticated cells called eukaryotic cells.

Art Connection

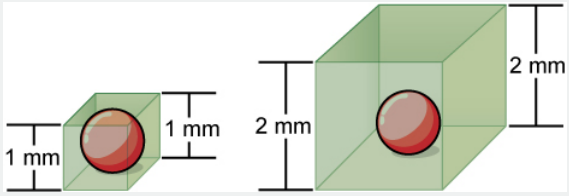


Figure 12.2.3.3: Notice that as a cell increases in size, its surface area-to-volume ratio decreases. When there is insufficient surface area to support a cell's increasing volume, a cell will either divide or die. The cell on the left has a volume of $1\ \text{mm}^3$ and a surface area of $6\ \text{mm}^2$, with a surface area-to-volume ratio of 6 to 1, whereas the cell on the right has a volume of $8\ \text{mm}^3$ and a surface area of $24\ \text{mm}^2$, with a surface area-to-volume ratio of 3 to 1.

Prokaryotic cells are much smaller than eukaryotic cells. What advantages might small cell size confer on a cell? What advantages might large cell size have?

Summary

Prokaryotes are predominantly single-celled organisms of the domains Bacteria and Archaea. All prokaryotes have plasma membranes, cytoplasm, ribosomes, and DNA that is not membrane-bound. Most have peptidoglycan cell walls and many have polysaccharide capsules. Prokaryotic cells range in diameter from 0.1 to 5.0 µm.

As a cell increases in size, its surface area-to-volume ratio decreases. If the cell grows too large, the plasma membrane will not have sufficient surface area to support the rate of diffusion required for the increased volume.

Art Connections

Figure 12.2.3.3: Prokaryotic cells are much smaller than eukaryotic cells. What advantages might small cell size confer on a cell? What advantages might large cell size have?

Answer

Substances can diffuse more quickly through small cells. Small cells have no need for organelles and therefore do not need to expend energy getting substances across organelle membranes. Large cells have organelles that can separate cellular processes, enabling them to build molecules that are more complex.

Glossary

nucleoid

central part of a prokaryotic cell in which the chromosome is found

prokaryote

unicellular organism that lacks a nucleus or any other membrane-bound organelle

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12.2.4: Eukaryotic Cells

Skills to Develop

- Describe the structure of eukaryotic cells
- Compare animal cells with plant cells
- State the role of the plasma membrane
- Summarize the functions of the major cell organelles

Have you ever heard the phrase “form follows function?” It’s a philosophy practiced in many industries. In architecture, this means that buildings should be constructed to support the activities that will be carried out inside them. For example, a skyscraper should be built with several elevator banks; a hospital should be built so that its emergency room is easily accessible.

Our natural world also utilizes the principle of form following function, especially in cell biology, and this will become clear as we explore eukaryotic cells (Figure 12.2.4.1). Unlike prokaryotic cells, eukaryotic cells have: 1) a membrane-bound nucleus; 2) numerous membrane-bound organelles such as the endoplasmic reticulum, Golgi apparatus, chloroplasts, mitochondria, and others; and 3) several, rod-shaped chromosomes. Because a eukaryotic cell’s nucleus is surrounded by a membrane, it is often said to have a “true nucleus.” The word “organelle” means “little organ,” and, as already mentioned, organelles have specialized cellular functions, just as the organs of your body have specialized functions.

At this point, it should be clear to you that eukaryotic cells have a more complex structure than prokaryotic cells. Organelles allow different functions to be compartmentalized in different areas of the cell. Before turning to organelles, let’s first examine two important components of the cell: the plasma membrane and the cytoplasm.

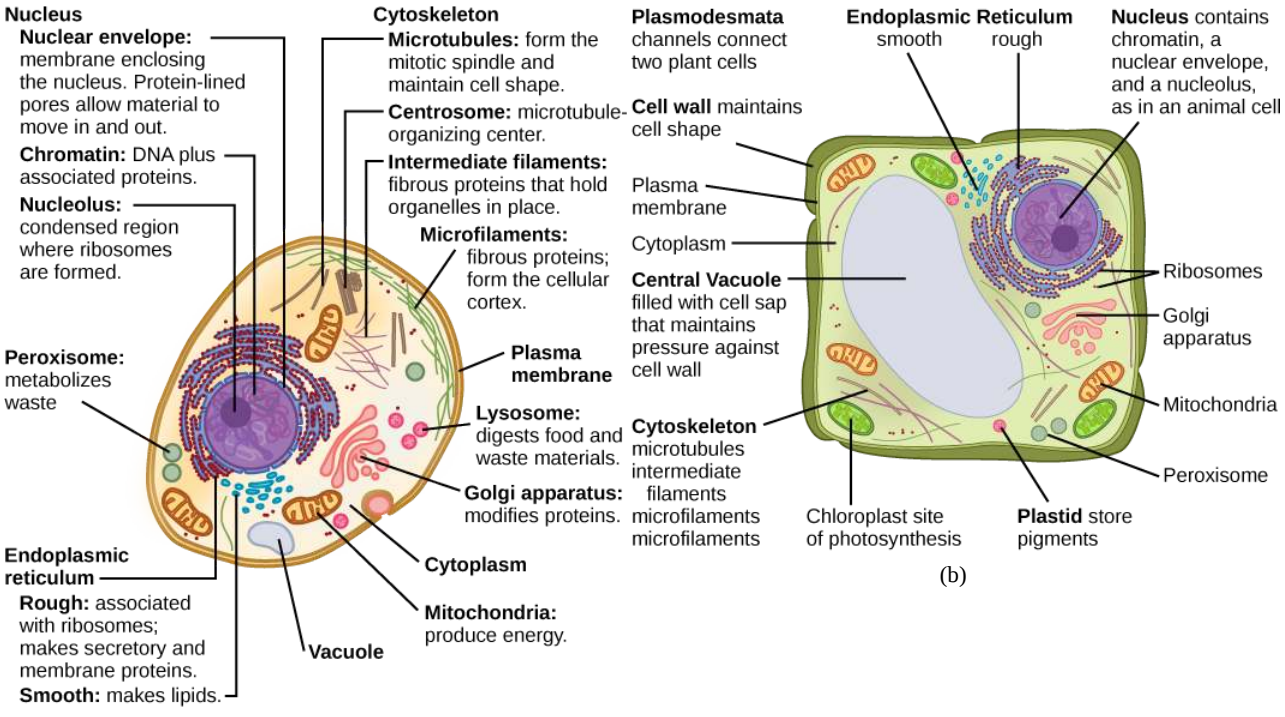


Figure 12.2.4.1: These figures show the major organelles and other cell components of (a) a typical animal cell and (b) a typical eukaryotic plant cell. The plant cell has a cell wall, chloroplasts, plastids, and a central vacuole—structures not found in animal cells. Plant cells do not have lysosomes or centrosomes.

Exercise 12.2.4.1

If the nucleolus were not able to carry out its function, what other cellular organelles would be affected?

The Plasma Membrane

Like prokaryotes, eukaryotic cells have a plasma membrane (Figure 12.2.4.2), a phospholipid bilayer with embedded proteins that separates the internal contents of the cell from its surrounding environment. A phospholipid is a lipid molecule with two fatty acid chains and a phosphate-containing group. The plasma membrane controls the passage of organic molecules, ions, water, and oxygen into and out of the cell. Wastes (such as carbon dioxide and ammonia) also leave the cell by passing through the plasma membrane.

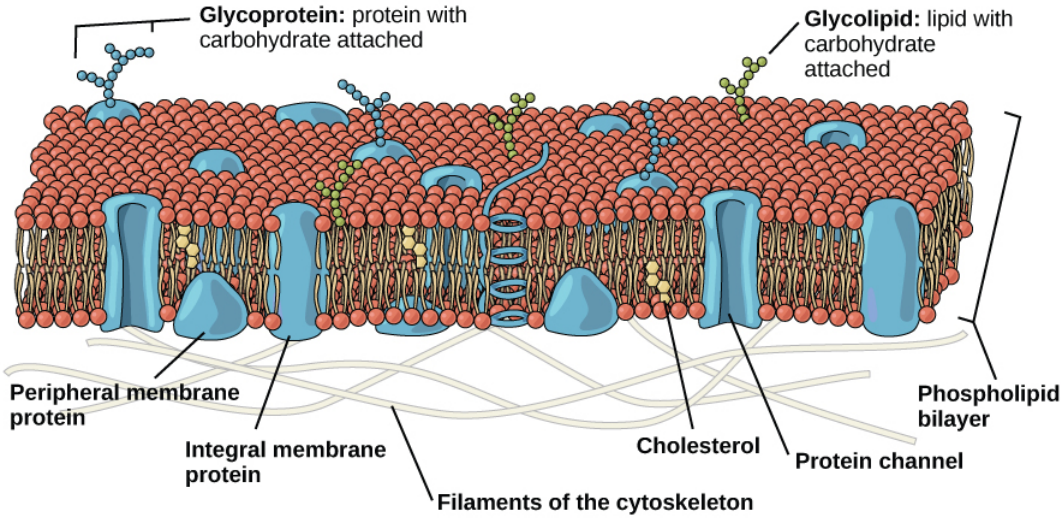


Figure 12.2.4.2: The eukaryotic plasma membrane is a phospholipid bilayer with proteins and cholesterol embedded in it.

The plasma membranes of cells that specialize in absorption are folded into fingerlike projections called microvilli (singular = microvillus); (Figure 12.2.4.3). Such cells are typically found lining the small intestine, the organ that absorbs nutrients from digested food. This is an excellent example of form following function. People with celiac disease have an immune response to gluten, which is a protein found in wheat, barley, and rye. The immune response damages microvilli, and thus, afflicted individuals cannot absorb nutrients. This leads to malnutrition, cramping, and diarrhea. Patients suffering from celiac disease must follow a gluten-free diet.

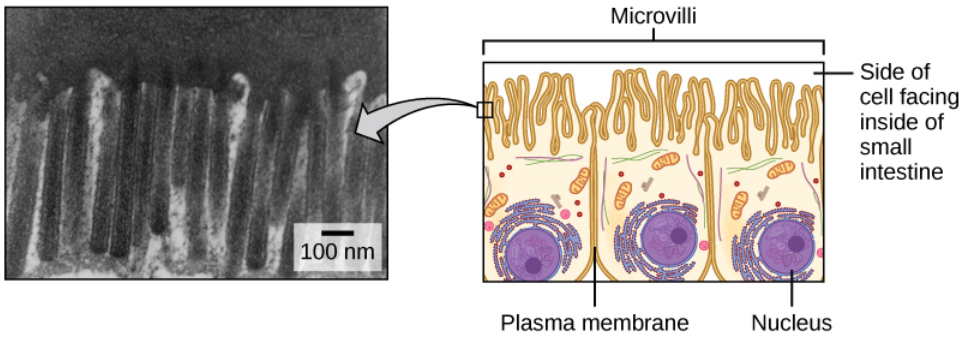


Figure 12.2.4.3: Microvilli, shown here as they appear on cells lining the small intestine, increase the surface area available for absorption. These microvilli are only found on the area of the plasma membrane that faces the cavity from which substances will be absorbed. (credit "micrograph": modification of work by Louisa Howard)

The Cytoplasm

The cytoplasm is the entire region of a cell between the plasma membrane and the nuclear envelope (a structure to be discussed shortly). It is made up of organelles suspended in the gel-like cytosol, the cytoskeleton, and various chemicals (Figure 12.2.4.1). Even though the cytoplasm consists of 70 to 80 percent water, it has a semi-solid consistency, which comes from the proteins

within it. However, proteins are not the only organic molecules found in the cytoplasm. Glucose and other simple sugars, polysaccharides, amino acids, nucleic acids, fatty acids, and derivatives of glycerol are found there, too. Ions of sodium, potassium, calcium, and many other elements are also dissolved in the cytoplasm. Many metabolic reactions, including protein synthesis, take place in the cytoplasm.

The Nucleus

Typically, the nucleus is the most prominent organelle in a cell (Figure 12.2.4.1). The nucleus (plural = nuclei) houses the cell's DNA and directs the synthesis of ribosomes and proteins. Let's look at it in more detail (Figure 12.2.4.4).

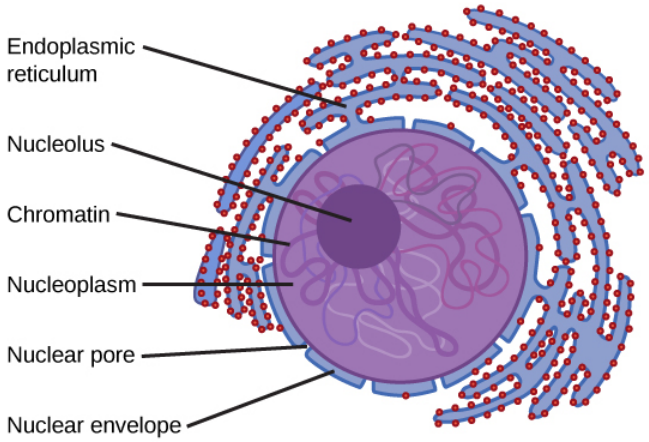


Figure 12.2.4.4: The nucleus stores chromatin (DNA plus proteins) in a gel-like substance called the nucleoplasm. The nucleolus is a condensed region of chromatin where ribosome synthesis occurs. The boundary of the nucleus is called the nuclear envelope. It consists of two phospholipid bilayers: an outer membrane and an inner membrane. The nuclear membrane is continuous with the endoplasmic reticulum. Nuclear pores allow substances to enter and exit the nucleus.

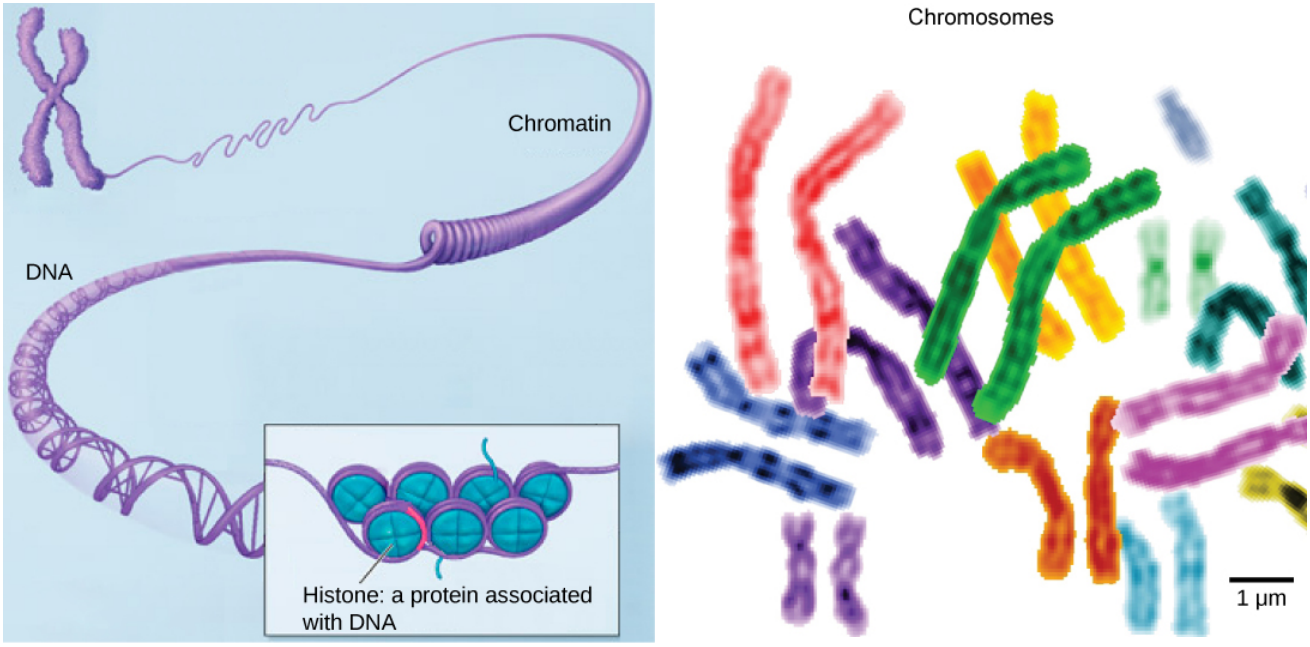
The Nuclear Envelope

The nuclear envelope is a double-membrane structure that constitutes the outermost portion of the nucleus (Figure 12.2.4.4). Both the inner and outer membranes of the nuclear envelope are phospholipid bilayers.

The nuclear envelope is punctuated with pores that control the passage of ions, molecules, and RNA between the nucleoplasm and cytoplasm. The nucleoplasm is the semi-solid fluid inside the nucleus, where we find the chromatin and the nucleolus.

Chromatin and Chromosomes

To understand chromatin, it is helpful to first consider chromosomes. Chromosomes are structures within the nucleus that are made up of DNA, the hereditary material. You may remember that in prokaryotes, DNA is organized into a single circular chromosome. In eukaryotes, chromosomes are linear structures. Every eukaryotic species has a specific number of chromosomes in the nuclei of its body's cells. For example, in humans, the chromosome number is 46, while in fruit flies, it is eight. Chromosomes are only visible and distinguishable from one another when the cell is getting ready to divide. When the cell is in the growth and maintenance phases of its life cycle, proteins are attached to chromosomes, and they resemble an unwound, jumbled bunch of threads. These unwound protein-chromosome complexes are called chromatin (Figure 12.2.4.5); chromatin describes the material that makes up the chromosomes both when condensed and decondensed.



(a) (b)

Figure 12.2.4.5: (a) This image shows various levels of the organization of chromatin (DNA and protein). (b) This image shows paired chromosomes. (credit b: modification of work by NIH; scale-bar data from Matt Russell)

The Nucleolus

We already know that the nucleus directs the synthesis of ribosomes, but how does it do this? Some chromosomes have sections of DNA that encode ribosomal RNA. A darkly staining area within the nucleus called the nucleolus (plural = nucleoli) aggregates the ribosomal RNA with associated proteins to assemble the ribosomal subunits that are then transported out through the pores in the nuclear envelope to the cytoplasm.

Ribosomes

Ribosomes are the cellular structures responsible for protein synthesis. When viewed through an electron microscope, ribosomes appear either as clusters (polyribosomes) or single, tiny dots that float freely in the cytoplasm. They may be attached to the cytoplasmic side of the plasma membrane or the cytoplasmic side of the endoplasmic reticulum and the outer membrane of the nuclear envelope (Figure 12.2.4.1). Electron microscopy has shown us that ribosomes, which are large complexes of protein and RNA, consist of two subunits, aptly called large and small (Figure 12.2.4.6). Ribosomes receive their “orders” for protein synthesis from the nucleus where the DNA is transcribed into messenger RNA (mRNA). The mRNA travels to the ribosomes, which translate the code provided by the sequence of the nitrogenous bases in the mRNA into a specific order of amino acids in a protein. Amino acids are the building blocks of proteins.

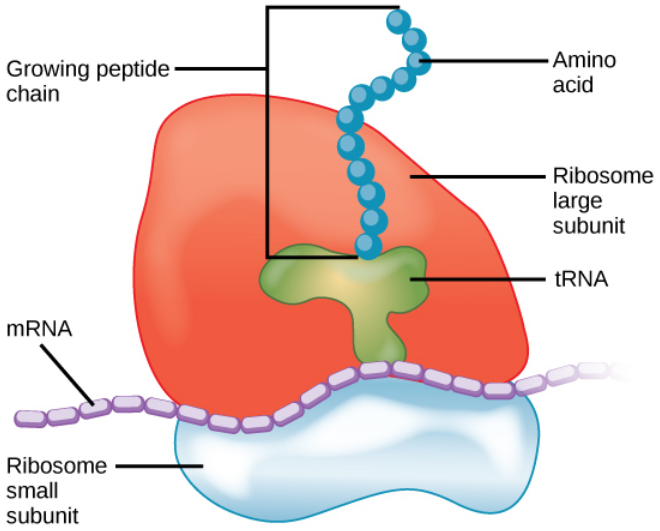


Figure 12.2.4.6: Ribosomes are made up of a large subunit (top) and a small subunit (bottom). During protein synthesis, ribosomes assemble amino acids into proteins.

Because proteins synthesis is an essential function of all cells (including enzymes, hormones, antibodies, pigments, structural components, and surface receptors), ribosomes are found in practically every cell. Ribosomes are particularly abundant in cells that synthesize large amounts of protein. For example, the pancreas is responsible for creating several digestive enzymes and the cells that produce these enzymes contain many ribosomes. Thus, we see another example of form following function.

Mitochondria

Mitochondria (singular = mitochondrion) are often called the “powerhouses” or “energy factories” of a cell because they are responsible for making adenosine triphosphate (ATP), the cell’s main energy-carrying molecule. ATP represents the short-term stored energy of the cell. Cellular respiration is the process of making ATP using the chemical energy found in glucose and other nutrients. In mitochondria, this process uses oxygen and produces carbon dioxide as a waste product. In fact, the carbon dioxide that you exhale with every breath comes from the cellular reactions that produce carbon dioxide as a byproduct.

In keeping with our theme of form following function, it is important to point out that muscle cells have a very high concentration of mitochondria that produce ATP. Your muscle cells need a lot of energy to keep your body moving. When your cells don’t get enough oxygen, they do not make a lot of ATP. Instead, the small amount of ATP they make in the absence of oxygen is accompanied by the production of lactic acid.

Mitochondria are oval-shaped, double membrane organelles (Figure 12.2.4.7) that have their own ribosomes and DNA. Each membrane is a phospholipid bilayer embedded with proteins. The inner layer has folds called cristae. The area surrounded by the folds is called the mitochondrial matrix. The cristae and the matrix have different roles in cellular respiration.

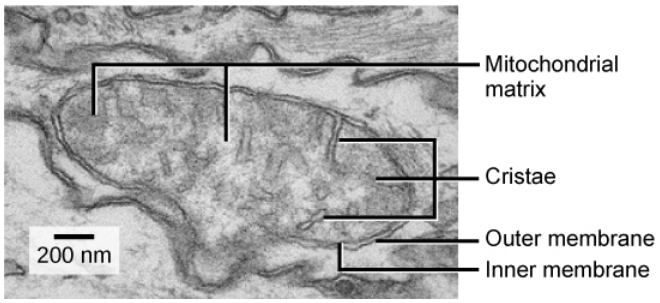


Figure 12.2.4.7: This electron micrograph shows a mitochondrion as viewed with a transmission electron microscope. This organelle has an outer membrane and an inner membrane. The inner membrane contains folds, called cristae, which increase its surface area. The space between the two membranes is called the intermembrane space, and the space inside the inner membrane is called the mitochondrial matrix. ATP synthesis takes place on the inner membrane. (credit: modification of work by Matthew Britton; scale-bar data from Matt Russell)

Peroxisomes

Peroxisomes are small, round organelles enclosed by single membranes. They carry out oxidation reactions that break down fatty acids and amino acids. They also detoxify many poisons that may enter the body. (Many of these oxidation reactions release hydrogen peroxide, H_2O_2, which would be damaging to cells; however, when these reactions are confined to peroxisomes, enzymes safely break down the H_2O_2 into oxygen and water.) For example, alcohol is detoxified by peroxisomes in liver cells. Glyoxysomes, which are specialized peroxisomes in plants, are responsible for converting stored fats into sugars.

Vesicles and Vacuoles

Vesicles and vacuoles are membrane-bound sacs that function in storage and transport. Other than the fact that vacuoles are somewhat larger than vesicles, there is a very subtle distinction between them: The membranes of vesicles can fuse with either the plasma membrane or other membrane systems within the cell. Additionally, some agents such as enzymes within plant vacuoles break down macromolecules. The membrane of a vacuole does not fuse with the membranes of other cellular components.

Animal Cells versus Plant Cells

At this point, you know that each eukaryotic cell has a plasma membrane, cytoplasm, a nucleus, ribosomes, mitochondria, peroxisomes, and in some, vacuoles, but there are some striking differences between animal and plant cells. While both animal and plant cells have microtubule organizing centers (MTOCs), animal cells also have centrioles associated with the MTOC: a complex called the centrosome. Animal cells each have a centrosome and lysosomes, whereas plant cells do not. Plant cells have a cell wall, chloroplasts and other specialized plastids, and a large central vacuole, whereas animal cells do not.

The Centrosome

The centrosome is a microtubule-organizing center found near the nuclei of animal cells. It contains a pair of centrioles, two structures that lie perpendicular to each other (Figure 12.2.4.8). Each centriole is a cylinder of nine triplets of microtubules.

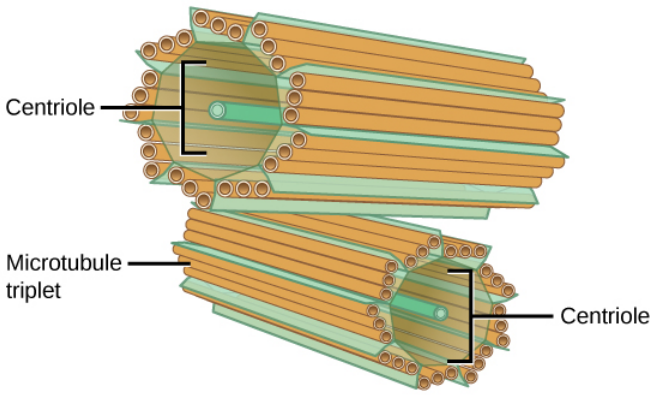


Figure 12.2.4.8: The centrosome consists of two centrioles that lie at right angles to each other. Each centriole is a cylinder made up of nine triplets of microtubules. Nontubulin proteins (indicated by the green lines) hold the microtubule triplets together.

The centrosome (the organelle where all microtubules originate) replicates itself before a cell divides, and the centrioles appear to have some role in pulling the duplicated chromosomes to opposite ends of the dividing cell. However, the exact function of the centrioles in cell division isn't clear, because cells that have had the centrosome removed can still divide, and plant cells, which lack centrosomes, are capable of cell division.

Lysosomes

Animal cells have another set of organelles not found in plant cells: lysosomes. The lysosomes are the cell's "garbage disposal." In plant cells, the digestive processes take place in vacuoles. Enzymes within the lysosomes aid the breakdown of proteins, polysaccharides, lipids, nucleic acids, and even worn-out organelles. These enzymes are active at a much lower pH than that of the cytoplasm. Therefore, the pH within lysosomes is more acidic than the pH of the cytoplasm. Many reactions that take place in the cytoplasm could not occur at a low pH, so again, the advantage of compartmentalizing the eukaryotic cell into organelles is apparent.

The Cell Wall

If you examine Figure 12.2.4.1b, the diagram of a plant cell, you will see a structure external to the plasma membrane called the cell wall. The cell wall is a rigid covering that protects the cell, provides structural support, and gives shape to the cell. Fungal and protistan cells also have cell walls. While the chief component of prokaryotic cell walls is peptidoglycan, the major organic molecule in the plant cell wall is cellulose (Figure 12.2.4.9), a polysaccharide made up of glucose units. Have you ever noticed that when you bite into a raw vegetable, like celery, it crunches? That's because you are tearing the rigid cell walls of the celery cells with your teeth.

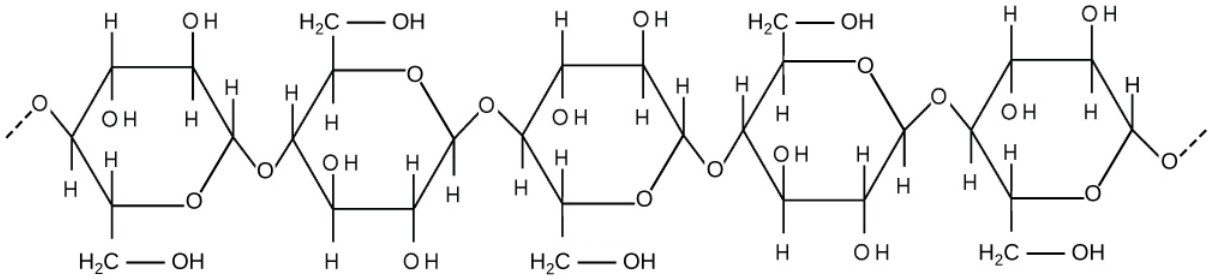


Figure 12.2.4.9: Cellulose is a long chain of β-glucose molecules connected by a 1-4 linkage. The dashed lines at each end of the figure indicate a series of many more glucose units. The size of the page makes it impossible to portray an entire cellulose molecule.

Chloroplasts

Like the mitochondria, chloroplasts have their own DNA and ribosomes, but chloroplasts have an entirely different function. Chloroplasts are plant cell organelles that carry out photosynthesis. Photosynthesis is the series of reactions that use carbon dioxide, water, and light energy to make glucose and oxygen. This is a major difference between plants and animals; plants (autotrophs) are able to make their own food, like sugars, while animals (heterotrophs) must ingest their food.

Like mitochondria, chloroplasts have outer and inner membranes, but within the space enclosed by a chloroplast's inner membrane is a set of interconnected and stacked fluid-filled membrane sacs called thylakoids (Figure 12.2.4.10). Each stack of thylakoids is called a granum (plural = grana). The fluid enclosed by the inner membrane that surrounds the grana is called the stroma.

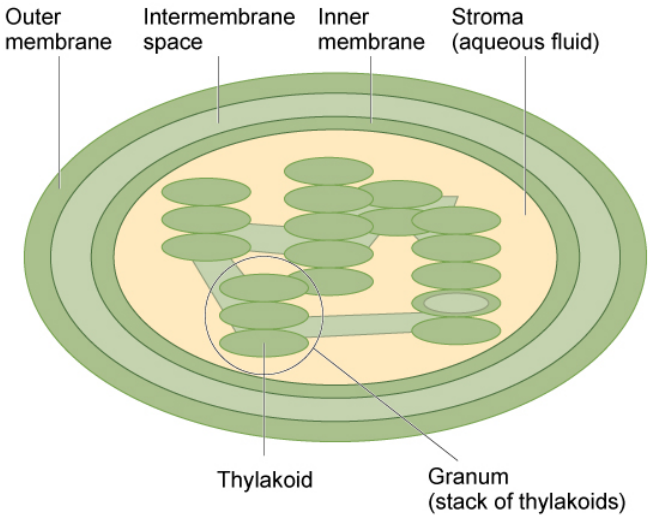


Figure 12.2.4.10: The chloroplast has an outer membrane, an inner membrane, and membrane structures called thylakoids that are stacked into grana. The space inside the thylakoid membranes is called the thylakoid space. The light harvesting reactions take place in the thylakoid membranes, and the synthesis of sugar takes place in the fluid inside the inner membrane, which is called the stroma. Chloroplasts also have their own genome, which is contained on a single circular chromosome.

The chloroplasts contain a green pigment called chlorophyll, which captures the light energy that drives the reactions of photosynthesis. Like plant cells, photosynthetic protists also have chloroplasts. Some bacteria perform photosynthesis, but their chlorophyll is not relegated to an organelle.

Evolution Connection: Endosymbiosis

We have mentioned that both mitochondria and chloroplasts contain DNA and ribosomes. Have you wondered why? Strong evidence points to endosymbiosis as the explanation.

Symbiosis is a relationship in which organisms from two separate species depend on each other for their survival. Endosymbiosis (endo- = "within") is a mutually beneficial relationship in which one organism lives inside the other. Endosymbiotic relationships abound in nature. We have already mentioned that microbes that produce vitamin K live inside the human gut. This relationship is beneficial for us because we are unable to synthesize vitamin K. It is also beneficial for the microbes because they are protected from other organisms and from drying out, and they receive abundant food from the environment of the large intestine.

Scientists have long noticed that bacteria, mitochondria, and chloroplasts are similar in size. We also know that bacteria have DNA and ribosomes, just as mitochondria and chloroplasts do. Scientists believe that host cells and bacteria formed an endosymbiotic relationship when the host cells ingested both aerobic and autotrophic bacteria (cyanobacteria) but did not destroy them. Through many millions of years of evolution, these ingested bacteria became more specialized in their functions, with the aerobic bacteria becoming mitochondria and the autotrophic bacteria becoming chloroplasts.

The Central Vacuole

Previously, we mentioned vacuoles as essential components of plant cells. If you look at Figure 12.2.4.1b, you will see that plant cells each have a large central vacuole that occupies most of the area of the cell. The central vacuole plays a key role in regulating the cell's concentration of water in changing environmental conditions. Have you ever noticed that if you forget to water a plant for a few days, it wilts? That's because as the water concentration in the soil becomes lower than the water concentration in the plant, water moves out of the central vacuoles and cytoplasm. As the central vacuole shrinks, it leaves the cell wall unsupported. This loss of support to the cell walls of plant cells results in the wilted appearance of the plant.

The central vacuole also supports the expansion of the cell. When the central vacuole holds more water, the cell gets larger without having to invest a lot of energy in synthesizing new cytoplasm.

Summary

Like a prokaryotic cell, a eukaryotic cell has a plasma membrane, cytoplasm, and ribosomes, but a eukaryotic cell is typically larger than a prokaryotic cell, has a true nucleus (meaning its DNA is surrounded by a membrane), and has other membrane-bound organelles that allow for compartmentalization of functions. The plasma membrane is a phospholipid bilayer embedded with proteins. The nucleus's nucleolus is the site of ribosome assembly. Ribosomes are either found in the cytoplasm or attached to the cytoplasmic side of the plasma membrane or endoplasmic reticulum. They perform protein synthesis. Mitochondria participate in cellular respiration; they are responsible for the majority of ATP produced in the cell. Peroxisomes hydrolyze fatty acids, amino acids, and some toxins. Vesicles and vacuoles are storage and transport compartments. In plant cells, vacuoles also help break down macromolecules.

Animal cells also have a centrosome and lysosomes. The centrosome has two bodies perpendicular to each other, the centrioles, and has an unknown purpose in cell division. Lysosomes are the digestive organelles of animal cells.

Plant cells and plant-like cells each have a cell wall, chloroplasts, and a central vacuole. The plant cell wall, whose primary component is cellulose, protects the cell, provides structural support, and gives shape to the cell. Photosynthesis takes place in chloroplasts. The central vacuole can expand without having to produce more cytoplasm.

Art Connections

Figure 12.2.4.1: If the nucleolus were not able to carry out its function, what other cellular organelles would be affected?

Answer

Free ribosomes and rough endoplasmic reticulum (which contains ribosomes) would not be able to form.

cell wall
rigid cell covering made of cellulose that protects the cell, provides structural support, and gives shape to the cell

central vacuole
large plant cell organelle that regulates the cell's storage compartment, holds water, and plays a significant role in cell growth as the site of macromolecule degradation

centrosome
region in animal cells made of two centrioles

chlorophyll
green pigment that captures the light energy that drives the light reactions of photosynthesis

chloroplast
plant cell organelle that carries out photosynthesis

chromatin
protein-DNA complex that serves as the building material of chromosomes

chromosome
structure within the nucleus that is made up of chromatin that contains DNA, the hereditary material

cytoplasm
entire region between the plasma membrane and the nuclear envelope, consisting of organelles suspended in the gel-like cytosol, the cytoskeleton, and various chemicals

cytosol
gel-like material of the cytoplasm in which cell structures are suspended

eukaryotic cell
cell that has a membrane-bound nucleus and several other membrane-bound compartments or sacs

lysosome
organelle in an animal cell that functions as the cell's digestive component; it breaks down proteins, polysaccharides, lipids, nucleic acids, and even worn-out organelles

mitochondria
(singular = mitochondrion) cellular organelles responsible for carrying out cellular respiration, resulting in the production of ATP, the cell's main energy-carrying molecule

nuclear envelope
double-membrane structure that constitutes the outermost portion of the nucleus

nucleolus
darkly staining body within the nucleus that is responsible for assembling the subunits of the ribosomes

nucleoplasm
semi-solid fluid inside the nucleus that contains the chromatin and nucleolus

nucleus

cell organelle that houses the cell’s DNA and directs the synthesis of ribosomes and proteins

organelle
compartment or sac within a cell

peroxisome
small, round organelle that contains hydrogen peroxide, oxidizes fatty acids and amino acids, and detoxifies many poisons

plasma membrane
phospholipid bilayer with embedded (integral) or attached (peripheral) proteins, and separates the internal content of the cell from its surrounding environment

ribosome
cellular structure that carries out protein synthesis

vacuole
membrane-bound sac, somewhat larger than a vesicle, which functions in cellular storage and transport

vesicle
small, membrane-bound sac that functions in cellular storage and transport; its membrane is capable of fusing with the plasma membrane and the membranes of the endoplasmic reticulum and Golgi apparatus

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12.2.5: The Endomembrane System and Proteins

Skills to Develop

- List the components of the endomembrane system
- Recognize the relationship between the endomembrane system and its functions

The endomembrane system (endo = “within”) is a group of membranes and organelles (Figure 12.2.5.1) in eukaryotic cells that works together to modify, package, and transport lipids and proteins. It includes the nuclear envelope, lysosomes, and vesicles, which we’ve already mentioned, and the endoplasmic reticulum and Golgi apparatus, which we will cover shortly. Although not technically *within* the cell, the plasma membrane is included in the endomembrane system because, as you will see, it interacts with the other endomembranous organelles. The endomembrane system does not include the membranes of either mitochondria or chloroplasts.

Art Connection

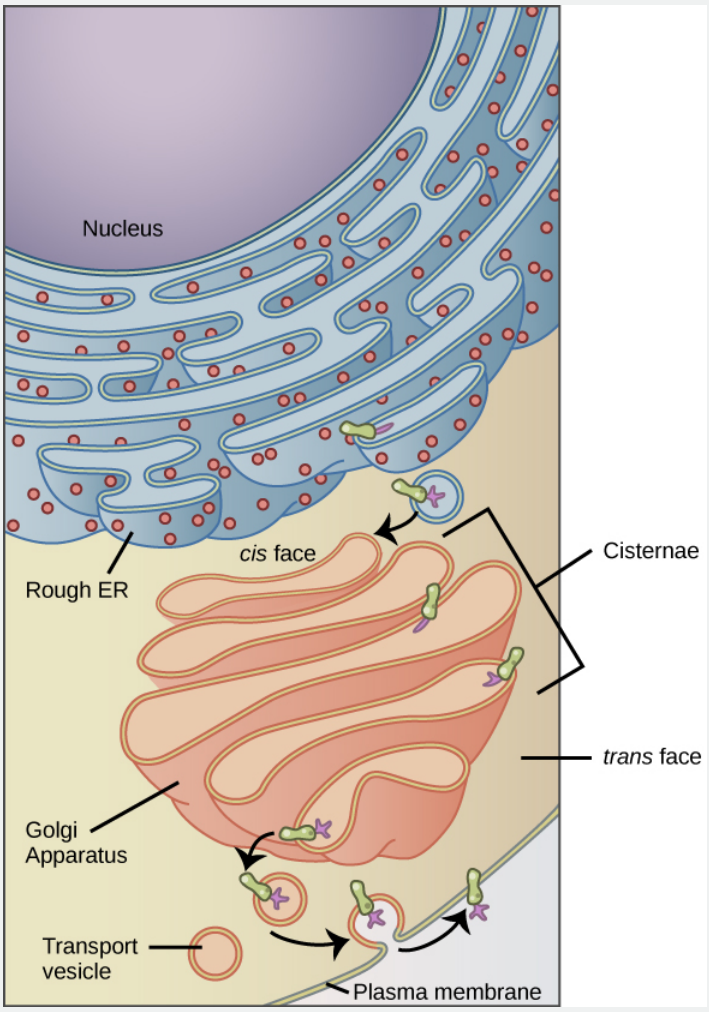


Figure 12.2.5.1: Membrane and secretory proteins are synthesized in the rough endoplasmic reticulum (RER). The RER also sometimes modifies proteins. In this illustration, a (green) integral membrane protein in the ER is modified by attachment of a (purple) carbohydrate. Vesicles with the integral protein bud from the ER and fuse with the cis face of the Golgi apparatus. As the protein passes along the Golgi’s cisternae, it is further modified by the addition of more carbohydrates. After its synthesis is complete, it exits as integral membrane protein of the vesicle that bud from the Golgi’s trans face and when the vesicle fuses with the cell membrane the protein becomes integral portion of that cell membrane. (credit: modification of work by Magnus Manske)

If a peripheral membrane protein were synthesized in the lumen (inside) of the ER, would it end up on the inside or outside of the plasma membrane?

The Endoplasmic Reticulum

The endoplasmic reticulum (ER) (Figure 12.2.5.1) is a series of interconnected membranous sacs and tubules that collectively modifies proteins and synthesizes lipids. However, these two functions are performed in separate areas of the ER: the rough ER and the smooth ER, respectively.

The hollow portion of the ER tubules is called the lumen or cisternal space. The membrane of the ER, which is a phospholipid bilayer embedded with proteins, is continuous with the nuclear envelope.

Rough ER

The rough endoplasmic reticulum (RER) is so named because the ribosomes attached to its cytoplasmic surface give it a studded appearance when viewed through an electron microscope (Figure 12.2.5.2).

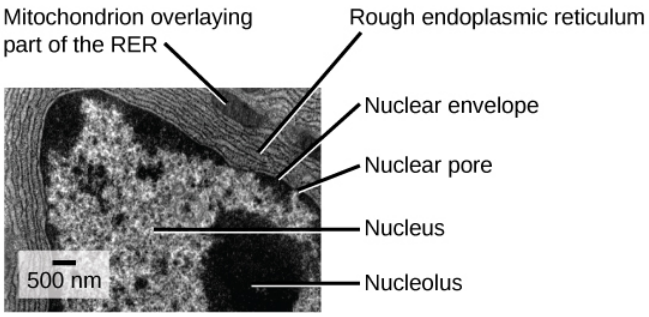


Figure 12.2.5.2: This transmission electron micrograph shows the rough endoplasmic reticulum and other organelles in a pancreatic cell. (credit: modification of work by Louisa Howard)

Ribosomes transfer their newly synthesized proteins into the lumen of the RER where they undergo structural modifications, such as folding or the acquisition of side chains. These modified proteins will be incorporated into cellular membranes—the membrane of the ER or those of other organelles—or secreted from the cell (such as protein hormones, enzymes). The RER also makes phospholipids for cellular membranes.

If the phospholipids or modified proteins are not destined to stay in the RER, they will reach their destinations via transport vesicles that bud from the RER's membrane (Figure 12.2.5.1).

Since the RER is engaged in modifying proteins (such as enzymes, for example) that will be secreted from the cell, you would be correct in assuming that the RER is abundant in cells that secrete proteins. This is the case with cells of the liver, for example.

Smooth ER

The smooth endoplasmic reticulum (SER) is continuous with the RER but has few or no ribosomes on its cytoplasmic surface (Figure 12.2.5.1). Functions of the SER include synthesis of carbohydrates, lipids, and steroid hormones; detoxification of medications and poisons; and storage of calcium ions.

In muscle cells, a specialized SER called the sarcoplasmic reticulum is responsible for storage of the calcium ions that are needed to trigger the coordinated contractions of the muscle cells.

Link to Learning



Video 12.2.5.1: You can watch an excellent animation of the endomembrane system here.

Career Connection: Cardiologist

Heart disease is the leading cause of death in the United States. This is primarily due to our sedentary lifestyle and our high trans-fat diets.

Heart failure is just one of many disabling heart conditions. Heart failure does not mean that the heart has stopped working. Rather, it means that the heart can't pump with sufficient force to transport oxygenated blood to all the vital organs. Left untreated, heart failure can lead to kidney failure and failure of other organs.

The wall of the heart is composed of cardiac muscle tissue. Heart failure occurs when the endoplasmic reticula of cardiac muscle cells do not function properly. As a result, an insufficient number of calcium ions are available to trigger a sufficient contractile force.

Cardiologists (cardi- = "heart"; -ologist = "one who studies") are doctors who specialize in treating heart diseases, including heart failure. Cardiologists can make a diagnosis of heart failure via physical examination, results from an electrocardiogram (ECG, a test that measures the electrical activity of the heart), a chest X-ray to see whether the heart is enlarged, and other tests. If heart failure is diagnosed, the cardiologist will typically prescribe appropriate medications and recommend a reduction in table salt intake and a supervised exercise program.

The Golgi Apparatus

We have already mentioned that vesicles can bud from the ER and transport their contents elsewhere, but where do the vesicles go? Before reaching their final destination, the lipids or proteins within the transport vesicles still need to be sorted, packaged, and tagged so that they wind up in the right place. Sorting, tagging, packaging, and distribution of lipids and proteins takes place in the Golgi apparatus (also called the Golgi body), a series of flattened membranes (Figure 12.2.5.3).

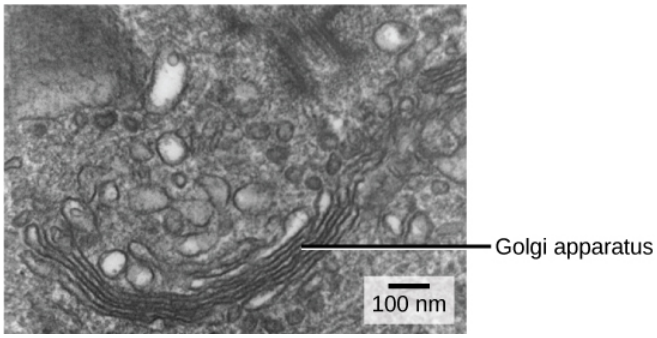


Figure 12.2.5.3: The Golgi apparatus in this white blood cell is visible as a stack of semicircular, flattened rings in the lower portion of the image. Several vesicles can be seen near the Golgi apparatus. (credit: modification of work by Louisa Howard)

The receiving side of the Golgi apparatus is called the *cis* face. The opposite side is called the *trans* face. The transport vesicles that formed from the ER travel to the *cis* face, fuse with it, and empty their contents into the lumen of the Golgi apparatus. As the proteins and lipids travel through the Golgi, they undergo further modifications that allow them to be sorted. The most frequent modification is the addition of short chains of sugar molecules. These newly modified proteins and lipids are then tagged with phosphate groups or other small molecules so that they can be routed to their proper destinations.

Finally, the modified and tagged proteins are packaged into secretory vesicles that bud from the *trans* face of the Golgi. While some of these vesicles deposit their contents into other parts of the cell where they will be used, other secretory vesicles fuse with the plasma membrane and release their contents outside the cell.

In another example of form following function, cells that engage in a great deal of secretory activity (such as cells of the salivary glands that secrete digestive enzymes or cells of the immune system that secrete antibodies) have an abundance of Golgi.

In plant cells, the Golgi apparatus has the additional role of synthesizing polysaccharides, some of which are incorporated into the cell wall and some of which are used in other parts of the cell.

Career Connection: Geneticist

Many diseases arise from genetic mutations that prevent the synthesis of critical proteins. One such disease is Lowe disease (also called oculocerebrorenal syndrome, because it affects the eyes, brain, and kidneys). In Lowe disease, there is a deficiency in an enzyme localized to the Golgi apparatus. Children with Lowe disease are born with cataracts, typically develop kidney disease after the first year of life, and may have impaired mental abilities.

Lowe disease is a genetic disease caused by a mutation on the X chromosome. The X chromosome is one of the two human sex chromosome, as these chromosomes determine a person's sex. Females possess two X chromosomes while males possess one X and one Y chromosome. In females, the genes on only one of the two X chromosomes are expressed. Therefore, females who carry the Lowe disease gene on one of their X chromosomes have a 50/50 chance of having the disease. However, males only have one X chromosome and the genes on this chromosome are always expressed. Therefore, males will always have Lowe disease if their X chromosome carries the Lowe disease gene. The location of the mutated gene, as well as the locations of many other mutations that cause genetic diseases, has now been identified. Through prenatal testing, a woman can find out if the fetus she is carrying may be afflicted with one of several genetic diseases.

Geneticists analyze the results of prenatal genetic tests and may counsel pregnant women on available options. They may also conduct genetic research that leads to new drugs or foods, or perform DNA analyses that are used in forensic investigations.

Lysosomes

In addition to their role as the digestive component and organelle-recycling facility of animal cells, lysosomes are considered to be parts of the endomembrane system. Lysosomes also use their hydrolytic enzymes to destroy pathogens (disease-causing organisms) that might enter the cell. A good example of this occurs in a group of white blood cells called macrophages, which are part of your body’s immune system. In a process known as phagocytosis or endocytosis, a section of the plasma membrane of the macrophage invaginates (folds in) and engulfs a pathogen. The invaginated section, with the pathogen inside, then pinches itself off from the plasma membrane and becomes a vesicle. The vesicle fuses with a lysosome. The lysosome’s hydrolytic enzymes then destroy the pathogen (Figure 12.2.5.4).

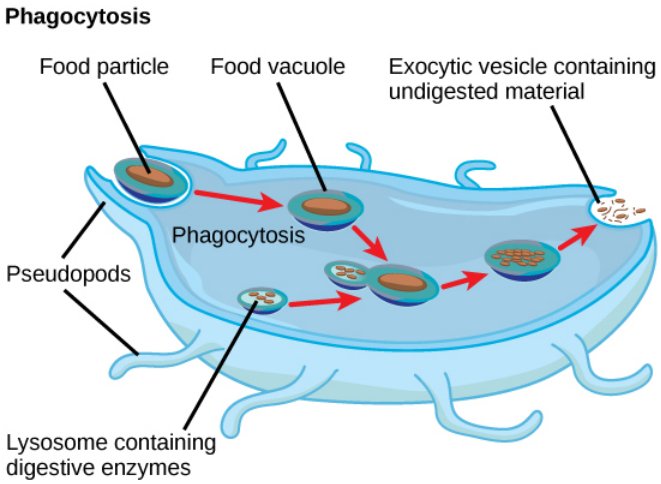


Figure 12.2.5.4: A macrophage has engulfed (phagocytized) a potentially pathogenic bacterium and then fuses with a lysosomes within the cell to destroy the pathogen. Other organelles are present in the cell but for simplicity are not shown.

Summary

The endomembrane system includes the nuclear envelope, lysosomes, vesicles, the ER, and Golgi apparatus, as well as the plasma membrane. These cellular components work together to modify, package, tag, and transport proteins and lipids that form the membranes.

The RER modifies proteins and synthesizes phospholipids used in cell membranes. The SER synthesizes carbohydrates, lipids, and steroid hormones; engages in the detoxification of medications and poisons; and stores calcium ions. Sorting, tagging, packaging, and distribution of lipids and proteins take place in the Golgi apparatus. Lysosomes are created by the budding of the membranes of the RER and Golgi. Lysosomes digest macromolecules, recycle worn-out organelles, and destroy pathogens.

Art Connections

Figure 12.2.5.1: If a peripheral membrane protein were synthesized in the lumen (inside) of the ER, would it end up on the inside or outside of the plasma membrane?

Answer

It would end up on the outside. After the vesicle passes through the Golgi apparatus and fuses with the plasma membrane, it turns inside out.

Glossary

endomembrane system
group of organelles and membranes in eukaryotic cells that work together modifying, packaging, and transporting lipids and proteins

endoplasmic reticulum (ER)
series of interconnected membranous structures within eukaryotic cells that collectively modify proteins and synthesize lipids

Golgi apparatus
eukaryotic organelle made up of a series of stacked membranes that sorts, tags, and packages lipids and proteins for distribution

rough endoplasmic reticulum (RER)
region of the endoplasmic reticulum that is studded with ribosomes and engages in protein modification and phospholipid synthesis

smooth endoplasmic reticulum (SER)

region of the endoplasmic reticulum that has few or no ribosomes on its cytoplasmic surface and synthesizes carbohydrates, lipids, and steroid hormones; detoxifies certain chemicals (like pesticides, preservatives, medications, and environmental pollutants), and stores calcium ions

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12.2.6: The Cytoskeleton

Skills to Develop

- Describe the cytoskeleton
- Compare the roles of microfilaments, intermediate filaments, and microtubules
- Compare and contrast cilia and flagella
- Summarize the differences among the components of prokaryotic cells, animal cells, and plant cells

If you were to remove all the organelles from a cell, would the plasma membrane and the cytoplasm be the only components left? No. Within the cytoplasm, there would still be ions and organic molecules, plus a network of protein fibers that help maintain the shape of the cell, secure some organelles in specific positions, allow cytoplasm and vesicles to move within the cell, and enable cells within multicellular organisms to move. Collectively, this network of protein fibers is known as the cytoskeleton. There are three types of fibers within the cytoskeleton: microfilaments, intermediate filaments, and microtubules (Figure 12.2.6.1). Here, we will examine each.

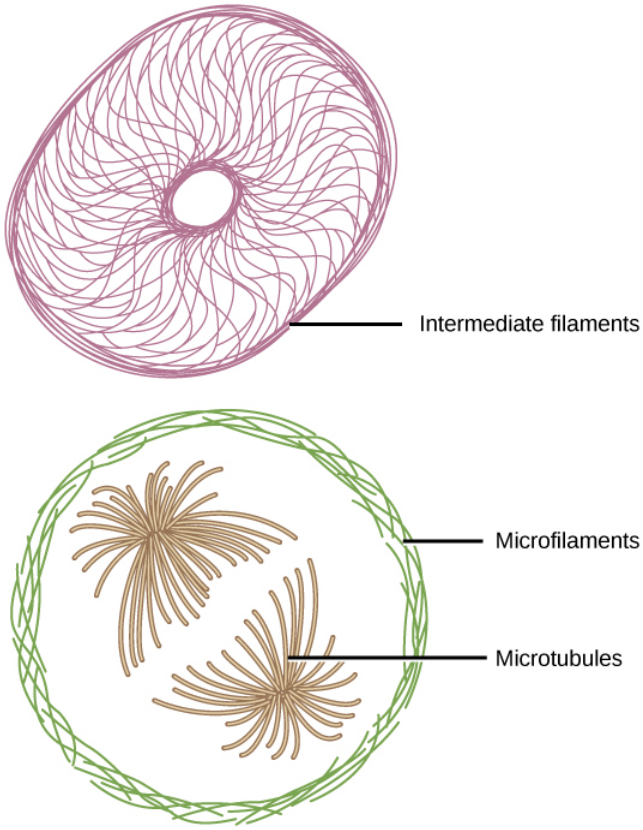


Figure 12.2.6.1: Microfilaments thicken the cortex around the inner edge of a cell; like rubber bands, they resist tension. Microtubules are found in the interior of the cell where they maintain cell shape by resisting compressive forces. Intermediate filaments are found throughout the cell and hold organelles in place.

Microfilaments

Of the three types of protein fibers in the cytoskeleton, microfilaments are the narrowest. They function in cellular movement, have a diameter of about 7 nm, and are made of two intertwined strands of a globular protein called actin (Figure 12.2.6.2). For this reason, microfilaments are also known as actin filaments.

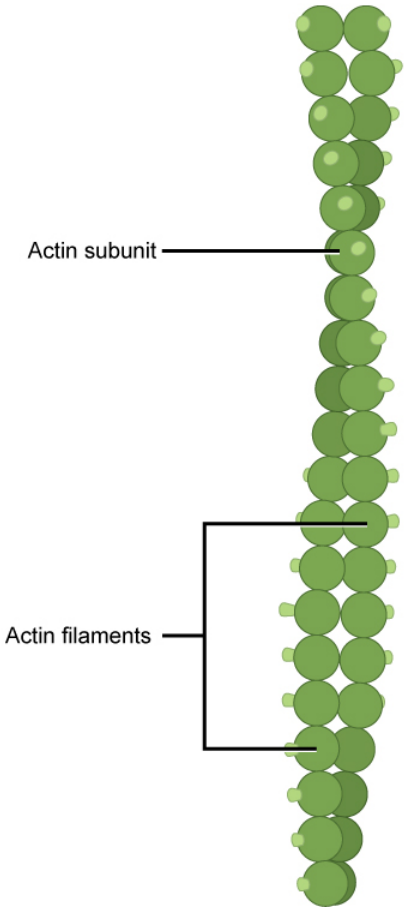


Figure 12.2.6.2: Microfilaments are made of two intertwined strands of actin.

Actin is powered by ATP to assemble its filamentous form, which serves as a track for the movement of a motor protein called myosin. This enables actin to engage in cellular events requiring motion, such as cell division in animal cells and cytoplasmic streaming, which is the circular movement of the cell cytoplasm in plant cells. Actin and myosin are plentiful in muscle cells. When your actin and myosin filaments slide past each other, your muscles contract.

Microfilaments also provide some rigidity and shape to the cell. They can depolymerize (disassemble) and reform quickly, thus enabling a cell to change its shape and move. White blood cells (your body's infection-fighting cells) make good use of this ability. They can move to the site of an infection and phagocytize the pathogen.

Link to Learning



Video 12.2.6.1: To see an example of a white blood cell in action, watch a short time-lapse video of the cell capturing two bacteria. It engulfs one and then moves on to the other.

Intermediate Filaments

Intermediate filaments are made of several strands of fibrous proteins that are wound together (Figure 12.2.6.3). These elements of the cytoskeleton get their name from the fact that their diameter, 8 to 10 nm, is between those of microfilaments and microtubules.



Figure 12.2.6.3: Intermediate filaments consist of several intertwined strands of fibrous proteins.

Intermediate filaments have no role in cell movement. Their function is purely structural. They bear tension, thus maintaining the shape of the cell, and anchor the nucleus and other organelles in place. Figure 12.2.6.1 shows how intermediate filaments create a supportive scaffolding inside the cell.

The intermediate filaments are the most diverse group of cytoskeletal elements. Several types of fibrous proteins are found in the intermediate filaments. You are probably most familiar with keratin, the fibrous protein that strengthens your hair, nails, and the epidermis of the skin.

Microtubules

As their name implies, microtubules are small hollow tubes. The walls of the microtubule are made of polymerized dimers of α-tubulin and β-tubulin, two globular proteins (Figure 12.2.6.4). With a diameter of about 25 nm, microtubules are the widest components of the cytoskeleton. They help the cell resist compression, provide a track along which vesicles move through the cell, and pull replicated chromosomes to opposite ends of a dividing cell. Like microfilaments, microtubules can dissolve and reform quickly.

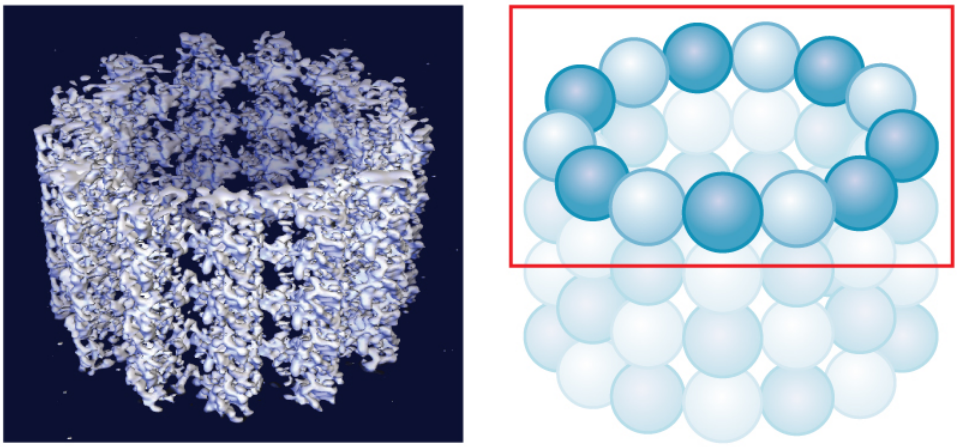


Figure 12.2.6.4: Microtubules are hollow. Their walls consist of 13 polymerized dimers of α-tubulin and β-tubulin (right image). The left image shows the molecular structure of the tube.

Microtubules are also the structural elements of flagella, cilia, and centrioles (the latter are the two perpendicular bodies of the centrosome). In fact, in animal cells, the centrosome is the microtubule-organizing center. In eukaryotic cells, flagella and cilia are quite different structurally from their counterparts in prokaryotes, as discussed below.

Flagella and Cilia

To refresh your memory, flagella (singular = flagellum) are long, hair-like structures that extend from the plasma membrane and are used to move an entire cell (for example, sperm, *Euglena*). When present, the cell has just one flagellum or a few flagella. When cilia (singular = cilium) are present, however, many of them extend along the entire surface of the plasma membrane. They are

short, hair-like structures that are used to move entire cells (such as paramecia) or substances along the outer surface of the cell (for example, the cilia of cells lining the Fallopian tubes that move the ovum toward the uterus, or cilia lining the cells of the respiratory tract that trap particulate matter and move it toward your nostrils.)

Despite their differences in length and number, flagella and cilia share a common structural arrangement of microtubules called a "9 + 2 array." This is an appropriate name because a single flagellum or cilium is made of a ring of nine microtubule doublets, surrounding a single microtubule doublet in the center (Figure 12.2.6.5).

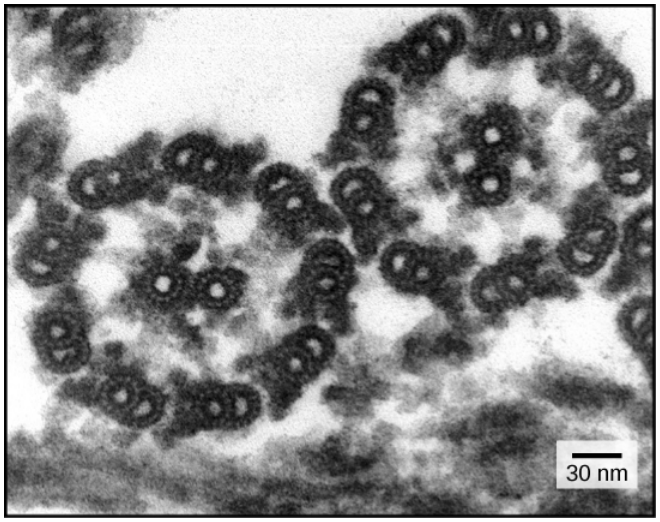


Figure 12.2.6.5: This transmission electron micrograph of two flagella shows the 9 + 2 array of microtubules: nine microtubule doublets surround a single microtubule doublet. (credit: modification of work by Dartmouth Electron Microscope Facility, Dartmouth College; scale-bar data from Matt Russell)

You have now completed a broad survey of the components of prokaryotic and eukaryotic cells. For a summary of cellular components in prokaryotic and eukaryotic cells, see Table 12.2.6.1.

Table 12.2.6.1: Cellular components in prokaryotic and eukaryotic cells.

Cell Component	Function	Present in Prokaryotes?	Present in Animal Cells?	Present in Plant Cells?
Plasma membrane	Separates cell from external environment; controls passage of organic molecules, ions, water, oxygen, and wastes into and out of cell	Yes	Yes	Yes
Cytoplasm	Provides turgor pressure to plant cells as fluid inside the central vacuole; site of many metabolic reactions; medium in which organelles are found	Yes	Yes	Yes
Nucleolus	Darkened area within the nucleus where ribosomal subunits are synthesized.	No	Yes	Yes
Nucleus	Cell organelle that houses DNA and directs synthesis of ribosomes and proteins	No	Yes	Yes
Ribosomes	Protein synthesis	Yes	Yes	Yes
Mitochondria	ATP production/cellular respiration	No	Yes	Yes
Peroxisomes	Oxidizes and thus breaks down fatty acids and amino acids, and detoxifies poisons	No	Yes	Yes
Vesicles and vacuoles	Storage and transport; digestive function in plant cells	No	Yes	Yes
Centrosome	Unspecified role in cell division in animal cells; source of microtubules in animal cells	No	Yes	No
Lysosomes	Digestion of macromolecules; recycling of worn-out organelles	No	Yes	No
Cell wall	Protection, structural support and maintenance of cell shape	Yes, primarily peptidoglycan	No	Yes, primarily cellulose
Chloroplasts	Photosynthesis	No	No	Yes
Endoplasmic reticulum	Modifies proteins and	No	Yes	Yes

Cell Component	Function	Present in Prokaryotes?	Present in Animal Cells?	Present in Plant Cells?
	synthesizes lipids			
Golgi apparatus	Modifies, sorts, tags, packages, and distributes lipids and proteins	No	Yes	Yes
Cytoskeleton	Maintains cell's shape, secures organelles in specific positions, allows cytoplasm and vesicles to move within cell, and enables unicellular organisms to move independently	Yes	Yes	Yes
Flagella	Cellular locomotion	Some	Some	No, except for some plant sperm cells.
Cilia	Cellular locomotion, movement of particles along extracellular surface of plasma membrane, and filtration	Some	Some	No

Summary

The cytoskeleton has three different types of protein elements. From narrowest to widest, they are the microfilaments (actin filaments), intermediate filaments, and microtubules. Microfilaments are often associated with myosin. They provide rigidity and shape to the cell and facilitate cellular movements. Intermediate filaments bear tension and anchor the nucleus and other organelles in place. Microtubules help the cell resist compression, serve as tracks for motor proteins that move vesicles through the cell, and pull replicated chromosomes to opposite ends of a dividing cell. They are also the structural element of centrioles, flagella, and cilia.

Glossary

cilium

(plural = cilia) short, hair-like structure that extends from the plasma membrane in large numbers and is used to move an entire cell or move substances along the outer surface of the cell

cytoskeleton

network of protein fibers that collectively maintain the shape of the cell, secure some organelles in specific positions, allow cytoplasm and vesicles to move within the cell, and enable unicellular organisms to move independently

flagellum

(plural = flagella) long, hair-like structure that extends from the plasma membrane and is used to move the cell

intermediate filament

cytoskeletal component, composed of several intertwined strands of fibrous protein, that bears tension, supports cell-cell junctions, and anchors cells to extracellular structures

microfilament

narrowest element of the cytoskeleton system; it provides rigidity and shape to the cell and enables cellular movements

microtubule

widest element of the cytoskeleton system; it helps the cell resist compression, provides a track along which vesicles move through the cell, pulls replicated chromosomes to opposite ends of a dividing cell, and is the structural element of centrioles, flagella, and cilia

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12.2.7: Connections between Cells and Cellular Activities

Skills to Develop

- Describe the extracellular matrix
- List examples of the ways that plant cells and animal cells communicate with adjacent cells
- Summarize the roles of tight junctions, desmosomes, gap junctions, and plasmodesmata

You already know that a group of similar cells working together is called a tissue. As you might expect, if cells are to work together, they must communicate with each other, just as you need to communicate with others if you work on a group project. Let's take a look at how cells communicate with each other.

Extracellular Matrix of Animal Cells

Most animal cells release materials into the extracellular space. The primary components of these materials are proteins, and the most abundant protein is collagen. Collagen fibers are interwoven with carbohydrate-containing protein molecules called proteoglycans. Collectively, these materials are called the extracellular matrix (Figure 12.2.7.1). Not only does the extracellular matrix hold the cells together to form a tissue, but it also allows the cells within the tissue to communicate with each other. How can this happen?

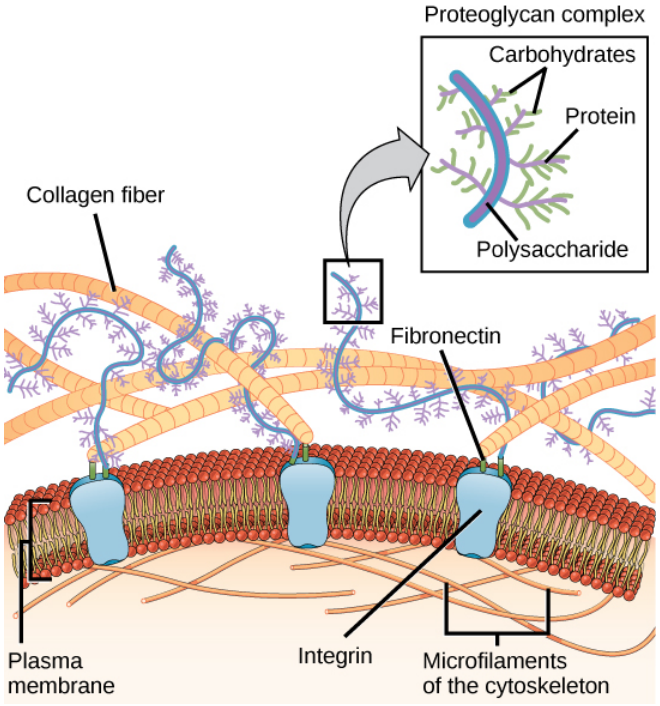


Figure 12.2.7.1: The extracellular matrix consists of a network of proteins and carbohydrates.

Cells have protein receptors on the extracellular surfaces of their plasma membranes. When a molecule within the matrix binds to the receptor, it changes the molecular structure of the receptor. The receptor, in turn, changes the conformation of the microfilaments positioned just inside the plasma membrane. These conformational changes induce chemical signals inside the cell that reach the nucleus and turn "on" or "off" the transcription of specific sections of DNA, which affects the production of associated proteins, thus changing the activities within the cell.

Blood clotting provides an example of the role of the extracellular matrix in cell communication. When the cells lining a blood vessel are damaged, they display a protein receptor called tissue factor. When tissue factor binds with another factor in the extracellular matrix, it causes platelets to adhere to the wall of the damaged blood vessel, stimulates the adjacent smooth muscle cells in the blood vessel to contract (thus constricting the blood vessel), and initiates a series of steps that stimulate the platelets to produce clotting factors.

Intercellular Junctions

Cells can also communicate with each other via direct contact, referred to as intercellular junctions. There are some differences in the ways that plant and animal cells do this. Plasmodesmata are junctions between plant cells, whereas animal cell contacts include tight junctions, gap junctions, and desmosomes.

Plasmodesmata

In general, long stretches of the plasma membranes of neighboring plant cells cannot touch one another because they are separated by the cell wall that surrounds each cell. How then, can a plant transfer water and other soil nutrients from its roots, through its stems, and to its leaves? Such transport uses the vascular tissues (xylem and phloem) primarily. There also exist structural modifications called plasmodesmata (singular = plasmodesma), numerous channels that pass between cell walls of adjacent plant cells, connect their cytoplasm, and enable materials to be transported from cell to cell, and thus throughout the plant (Figure 12.2.7.2).

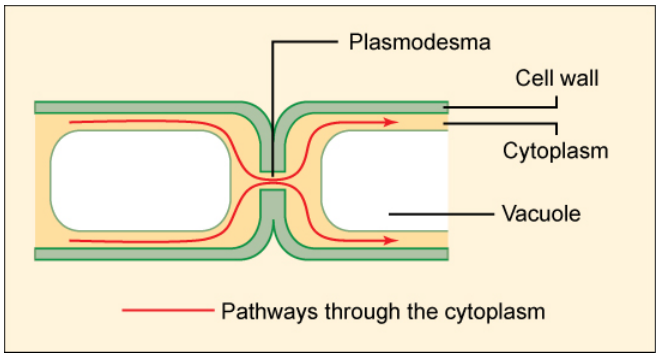


Figure 12.2.7.2: A plasmodesma is a channel between the cell walls of two adjacent plant cells. Plasmodesmata allow materials to pass from the cytoplasm of one plant cell to the cytoplasm of an adjacent cell.

Tight Junctions

A tight junction is a watertight seal between two adjacent animal cells (Figure 12.2.7.3). The cells are held tightly against each other by proteins (predominantly two proteins called claudins and occludins).

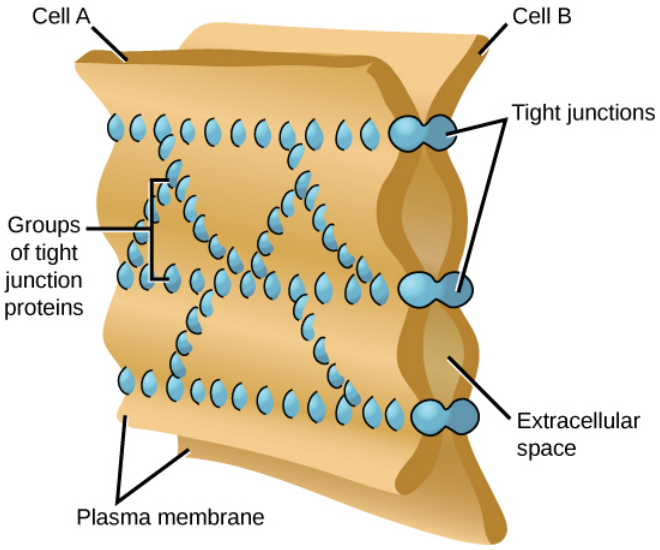


Figure 12.2.7.3: Tight junctions form watertight connections between adjacent animal cells. Proteins create tight junction adherence. (credit: modification of work by Mariana Ruiz Villareal)

This tight adherence prevents materials from leaking between the cells; tight junctions are typically found in epithelial tissues that line internal organs and cavities, and comprise most of the skin. For example, the tight junctions of the epithelial cells lining your urinary bladder prevent urine from leaking out into the extracellular space.

Desmosomes

Also found only in animal cells are desmosomes, which act like spot welds between adjacent epithelial cells (Figure 12.2.7.4). Short proteins called cadherins in the plasma membrane connect to intermediate filaments to create desmosomes. The cadherins join two adjacent cells together and maintain the cells in a sheet-like formation in organs and tissues that stretch, like the skin, heart, and muscles.

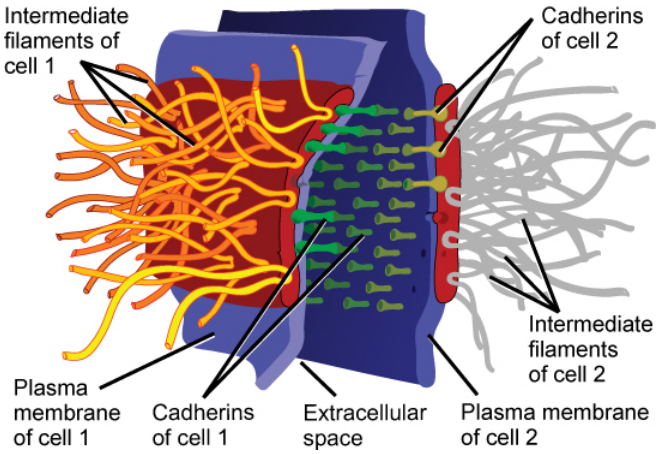


Figure 12.2.7.4: A desmosome forms a very strong spot weld between cells. It is created by the linkage of cadherins and intermediate filaments. (credit: modification of work by Mariana Ruiz Villareal)

Gap Junctions

Gap junctions in animal cells are like plasmodesmata in plant cells in that they are channels between adjacent cells that allow for the transport of ions, nutrients, and other substances that enable cells to communicate (Figure 12.2.7.5). Structurally, however, gap junctions and plasmodesmata differ.

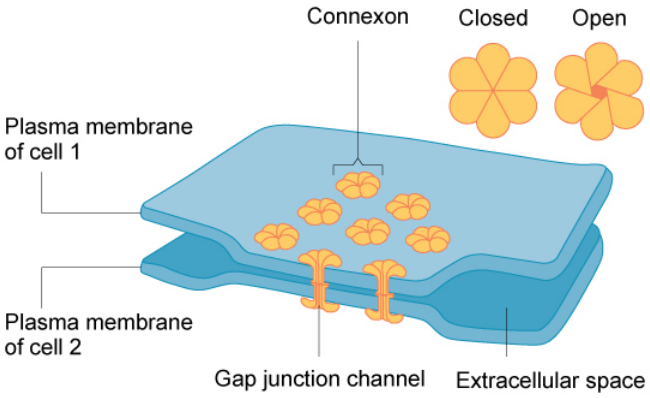


Figure 12.2.7.5: A gap junction is a protein-lined pore that allows water and small molecules to pass between adjacent animal cells. (credit: modification of work by Mariana Ruiz Villareal)

Gap junctions develop when a set of six proteins (called connexins) in the plasma membrane arrange themselves in an elongated donut-like configuration called a connexon. When the pores (“doughnut holes”) of connexons in adjacent animal cells align, a channel between the two cells forms. Gap junctions are particularly important in cardiac muscle: The electrical signal for the muscle to contract is passed efficiently through gap junctions, allowing the heart muscle cells to contract in tandem.

Summary

Animal cells communicate via their extracellular matrices and are connected to each other via tight junctions, desmosomes, and gap junctions. Plant cells are connected and communicate with each other via plasmodesmata.

When protein receptors on the surface of the plasma membrane of an animal cell bind to a substance in the extracellular matrix, a chain of reactions begins that changes activities taking place within the cell. Plasmodesmata are channels between adjacent plant cells, while gap junctions are channels between adjacent animal cells. However, their structures are quite different. A tight junction is a watertight seal between two adjacent cells, while a desmosome acts like a spot weld.

Glossary

desmosome
: linkages between adjacent epithelial cells that form when cadherins in the plasma membrane attach to intermediate filaments

extracellular matrix
: material (primarily collagen, glycoproteins, and proteoglycans) secreted from animal cells that provides mechanical protection and anchoring for the cells in the tissue

gap junction
: channel between two adjacent animal cells that allows ions, nutrients, and low molecular weight substances to pass between cells, enabling the cells to communicate

plasmodesma
: (plural = plasmodesmata) channel that passes between the cell walls of adjacent plant cells, connects their cytoplasm, and allows materials to be transported from cell to cell

tight junction
: firm seal between two adjacent animal cells created by protein adherence

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12.2.E: Cell Structure (Exercises)

4.1: Studying Cells

A cell is the smallest unit of a living thing. A living thing, whether made of one cell (like bacteria) or many cells (like a human), is called an organism. Thus, cells are the basic building blocks of all organisms. There are many types of cells, all grouped into one of two broad categories: prokaryotic and eukaryotic. For example, both animal and plant cells are classified as eukaryotic cells, whereas bacterial cells are classified as prokaryotic.

Review Questions

When viewing a specimen through a light microscope, scientists use _____ to distinguish the individual components of cells.

A. a beam of electrons
B. radioactive isotopes
C. special stains
D. high temperatures

Answer

C

The _____ is the basic unit of life.

A. organism
B. cell
C. tissue
D. organ

Answer

B

Free Response

In your everyday life, you have probably noticed that certain instruments are ideal for certain situations. For example, you would use a spoon rather than a fork to eat soup because a spoon is shaped for scooping, while soup would slip between the tines of a fork. The use of ideal instruments also applies in science. In what situation(s) would the use of a light microscope be ideal, and why?

Answer

A light microscope would be ideal when viewing a small living organism, especially when the cell has been stained to reveal details.

In what situation(s) would the use of a scanning electron microscope be ideal, and why?

Answer

A scanning electron microscope would be ideal when you want to view the minute details of a cell's surface, because its beam of electrons moves back and forth over the surface to convey the image.

In what situation(s) would a transmission electron microscope be ideal, and why?

Answer

A transmission electron microscope would be ideal for viewing the cell's internal structures, because many of the internal structures have membranes that are not visible by the light microscope.

What are the advantages and disadvantages of each of these types of microscopes?

Answer

The advantages of light microscopes are that they are easily obtained, and the light beam does not kill the cells. However, typical light microscopes are somewhat limited in the amount of detail they can reveal. Electron microscopes are ideal because you can view intricate details, but they are bulky and costly, and preparation for the microscopic examination kills the specimen.

4.2: Prokaryotic Cells

Cells fall into one of two broad categories: prokaryotic and eukaryotic. Only the predominantly single-celled organisms of the domains Bacteria and Archaea are classified as prokaryotes (pro- = "before"; -kary- = "nucleus"). Cells of animals, plants, fungi, and protists are all eukaryotes (ceu- = "true") and are made up of eukaryotic cells.

Review Questions

Prokaryotes depend on _____ to obtain some materials and to get rid of wastes.

A. ribosomes
B. flagella
C. cell division
D. diffusion

Answer

D

Bacteria that lack fimbriae are less likely to _____.

A. adhere to cell surfaces
B. swim through bodily fluids
C. synthesize proteins
D. retain the ability to divide

Answer

A

Free Response

Antibiotics are medicines that are used to fight bacterial infections. These medicines kill prokaryotic cells without harming human cells. What part or parts of the bacterial cell do you think antibiotics target? Why?

Answer

The cell wall would be targeted by antibiotics as well as the bacteria's ability to replicate. This would inhibit the bacteria's ability to reproduce, and it would compromise its defense mechanisms.

Explain why not all microbes are harmful.

Answer

Some microbes are beneficial. For instance, *E. coli* bacteria populate the human gut and help break down fiber in the diet. Some foods such as yogurt are formed by bacteria.

4.3: Eukaryotic Cells

Our natural world also utilizes the principle of form following function, especially in cell biology, and this will become clear as we explore eukaryotic cells. Unlike prokaryotic cells, eukaryotic cells have: 1) a membrane-bound nucleus; 2) numerous membrane-bound organelles such as the endoplasmic reticulum, Golgi apparatus, chloroplasts, mitochondria, and others; and 3) several, rod-shaped chromosomes. Because a eukaryotic cell's nucleus is surrounded by a membrane, it is has "true nucleus."

Review Questions

Which of the following is surrounded by two phospholipid bilayers?

A. the ribosomes
B. the vesicles
C. the cytoplasm
D. the nucleoplasm

Answer

D

Peroxisomes got their name because hydrogen peroxide is:

A. used in their detoxification reactions
B. produced during their oxidation reactions
C. incorporated into their membranes
D. a cofactor for the organelles' enzymes

Answer

B

In plant cells, the function of the lysosomes is carried out by _____.

A. vacuoles
B. peroxisomes
C. ribosomes
D. nuclei

Answer

A

Which of the following is found both in eukaryotic and prokaryotic cells?

A. nucleus
B. mitochondrion
C. vacuole
D. ribosomes

Answer

D

Free Response

You already know that ribosomes are abundant in red blood cells. In what other cells of the body would you find them in great abundance? Why?

Answer

Ribosomes are abundant in muscle cells as well because muscle cells are constructed of the proteins made by the ribosomes.

What are the structural and functional similarities and differences between mitochondria and chloroplasts?

Answer

Both are similar in that they are enveloped in a double membrane, both have an intermembrane space, and both make ATP. Both mitochondria and chloroplasts have DNA, and mitochondria have inner folds called cristae and a matrix, while chloroplasts have chlorophyll and accessory pigments in the thylakoids that form stacks (grana) and a stroma.

4.4: The Endomembrane System and Proteins

The endomembrane system is a group of membranes and organelles in eukaryotic cells that works together to modify, package, and transport lipids and proteins. It includes the nuclear envelope, lysosomes, and vesicles, which we've already mentioned, and the endoplasmic reticulum and Golgi apparatus. Although not technically within the cell, the plasma membrane is included in the endomembrane system because, as you will see, it interacts with the other endomembranous organelles.

Review Questions

Which of the following is not a component of the endomembrane system?

A. mitochondrion
B. Golgi apparatus
C. endoplasmic reticulum
D. lysosome

Answer

A

The process by which a cell engulfs a foreign particle is known as:

A. endosymbiosis
B. phagocytosis
C. hydrolysis
D. membrane synthesis

Answer

B

Which of the following is most likely to have the greatest concentration of smooth endoplasmic reticulum?

A. a cell that secretes enzymes
B. a cell that destroys pathogens
C. a cell that makes steroid hormones
D. a cell that engages in photosynthesis

Answer

C

Which of the following sequences correctly lists in order the steps involved in the incorporation of a proteinaceous molecule within a cell?

A. synthesis of the protein on the ribosome; modification in the Golgi apparatus; packaging in the endoplasmic reticulum; tagging in the vesicle
B. synthesis of the protein on the lysosome; tagging in the Golgi; packaging in the vesicle; distribution in the endoplasmic reticulum
C. synthesis of the protein on the ribosome; modification in the endoplasmic reticulum; tagging in the Golgi; distribution via the vesicle
D. synthesis of the protein on the lysosome; packaging in the vesicle; distribution via the Golgi; tagging in the endoplasmic reticulum

Answer

C

Free Response

In the context of cell biology, what do we mean by form follows function? What are at least two examples of this concept?

Answer

"Form follows function" refers to the idea that the function of a body part dictates the form of that body part. As an example, compare your arm to a bat's wing. While the bones of the two correspond, the parts serve different functions in each organism and their forms have adapted to follow that function.

In your opinion, is the nuclear membrane part of the endomembrane system? Why or why not? Defend your answer.

Answer

Since the external surface of the nuclear membrane is continuous with the rough endoplasmic reticulum, which is part of the endomembrane system, then it is correct to say that it is part of the system.

4.5: The Cytoskeleton

Within the cytoplasm, there are ions and organic molecules, plus a network of protein fibers that help maintain the shape of the cell, secure some organelles in specific positions, allow cytoplasm and vesicles to move within the cell, and enable cells within multicellular organisms to move. Collectively, this network of protein fibers is known as the cytoskeleton. There are three types of fibers within the cytoskeleton: microfilaments, intermediate filaments, and microtubules.

Review Questions

Which of the following have the ability to disassemble and reform quickly?

A. microfilaments and intermediate filaments
B. microfilaments and microtubules
C. intermediate filaments and microtubules
D. only intermediate filaments

Answer

B

Which of the following do not play a role in intracellular movement?

A. microfilaments and intermediate filaments
B. microfilaments and microtubules
C. intermediate filaments and microtubules
D. only intermediate filaments

Answer

D

Free Response

What are the similarities and differences between the structures of centrioles and flagella?

Answer

Centrioles and flagella are alike in that they are made up of microtubules. In centrioles, two rings of nine microtubule "triplets" are arranged at right angles to one another. This arrangement does not occur in flagella.

How do cilia and flagella differ?

Answer

Cilia and flagella are alike in that they are made up of microtubules. Cilia are short, hair-like structures that exist in large numbers and usually cover the entire surface of the plasma membrane. Flagella, in contrast, are long, hair-like structures; when flagella are present, a cell has just one or two.

4.6: Connections between Cells and Cellular Activities

You already know that a group of similar cells working together is called a tissue. As you might expect, if cells are to work together, they must communicate with each other, just as you need to communicate with others if you work on a group project. Let's take a look at how cells communicate with each other.

Review Questions

Which of the following are found only in plant cells?

A. gap junctions
B. desmosomes
C. plasmodesmata
D. tight junctions

Answer

C

The key components of desmosomes are cadherins and _____.

A. actin
B. microfilaments
C. intermediate filaments
D. microtubules

Answer

C

Free Response

How does the structure of a plasmodesma differ from that of a gap junction?

Answer

They differ because plant cell walls are rigid. Plasmodesmata, which a plant cell needs for transportation and communication, are able to allow movement of really large molecules. Gap junctions are necessary in animal cells for transportation and communication.

Explain how the extracellular matrix functions.

Answer

The extracellular matrix functions in support and attachment for animal tissues. It also functions in the healing and growth of the tissue.

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CHAPTER OVERVIEW

12.3: Structure and Function of Plasma Membranes

The plasma membrane, which is also called the cell membrane, has many functions, but the most basic one is to define the borders of the cell and keep the cell functional. The plasma membrane is selectively permeable. This means that the membrane allows some materials to freely enter or leave the cell, while other materials cannot move freely, but require the use of a specialized structure, and occasionally, even energy investment for crossing.

12.3.1: Prelude to Structure and Function of Plasma Membranes

12.3.2: Components and Structure

12.3.3: Passive Transport

12.3.4: Active Transport

12.3.5: Bulk Transport

12.3.E: Structure and Function of Plasma Membranes (Exercises)

Contributors

- Connie Rye (East Mississippi Community College), Robert Wise (University of Wisconsin, Oshkosh), Vladimir Jurukovski (Suffolk County Community College), Jean DeSaix (University of North Carolina at Chapel Hill), Jung Choi (Georgia Institute of Technology), Yael Avissar (Rhode Island College) among other contributing authors. Original content by OpenStax (CC BY 4.0; Download for free at http://cnx.org/contents/185cbf87-c72...f21b5eabd@9.87).

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12.3.1: Prelude to Structure and Function of Plasma Membranes

The plasma membrane, which is also called the cell membrane, has many functions, but the most basic one is to define the borders of the cell and keep the cell functional. The plasma membrane is selectively permeable. This means that the membrane allows some materials to freely enter or leave the cell, while other materials cannot move freely, but require the use of a specialized structure, and occasionally, even energy investment for crossing.



Figure 12.3.1.1: Despite its seeming hustle and bustle, Grand Central Station functions with a high level of organization: People and objects move from one location to another, they cross or are contained within certain boundaries, and they provide a constant flow as part of larger activity. Analogously, a plasma membrane's functions involve movement within the cell and across boundaries in the process of intracellular and intercellular activities. (credit: modification of work by Randy Le'Moine).

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12.3.2: Components and Structure

Skills to Develop

- Understand the fluid mosaic model of cell membranes
- Describe the functions of phospholipids, proteins, and carbohydrates in membranes
- Discuss membrane fluidity

A cell's plasma membrane defines the cell, outlines its borders, and determines the nature of its interaction with its environment (see Table 12.3.2.1 for a summary). Cells exclude some substances, take in others, and excrete still others, all in controlled quantities. The plasma membrane must be very flexible to allow certain cells, such as red blood cells and white blood cells, to change shape as they pass through narrow capillaries. These are the more obvious functions of a plasma membrane. In addition, the surface of the plasma membrane carries markers that allow cells to recognize one another, which is vital for tissue and organ formation during early development, and which later plays a role in the "self" versus "non-self" distinction of the immune response.

Among the most sophisticated functions of the plasma membrane is the ability to transmit signals by means of complex, integral proteins known as receptors. These proteins act both as receivers of extracellular inputs and as activators of intracellular processes. These membrane receptors provide extracellular attachment sites for effectors like hormones and growth factors, and they activate intracellular response cascades when their effectors are bound. Occasionally, receptors are hijacked by viruses (HIV, human immunodeficiency virus, is one example) that use them to gain entry into cells, and at times, the genes encoding receptors become mutated, causing the process of signal transduction to malfunction with disastrous consequences.

Fluid Mosaic Model

The existence of the plasma membrane was identified in the 1890s, and its chemical components were identified in 1915. The principal components identified at that time were lipids and proteins. The first widely accepted model of the plasma membrane's structure was proposed in 1935 by Hugh Davson and James Danielli; it was based on the "railroad track" appearance of the plasma membrane in early electron micrographs. They theorized that the structure of the plasma membrane resembles a sandwich, with protein being analogous to the bread, and lipids being analogous to the filling. In the 1950s, advances in microscopy, notably transmission electron microscopy (TEM), allowed researchers to see that the core of the plasma membrane consisted of a double, rather than a single, layer. A new model that better explains both the microscopic observations and the function of that plasma membrane was proposed by S.J. Singer and Garth L. Nicolson in 1972.

The explanation proposed by Singer and Nicolson is called the fluid mosaic model. The model has evolved somewhat over time, but it still best accounts for the structure and functions of the plasma membrane as we now understand them. The fluid mosaic model describes the structure of the plasma membrane as a mosaic of components—including phospholipids, cholesterol, proteins, and carbohydrates—that gives the membrane a fluid character. Plasma membranes range from 5 to 10 nm in thickness. For comparison, human red blood cells, visible via light microscopy, are approximately 8 µm wide, or approximately 1,000 times wider than a plasma membrane. The membrane does look a bit like a sandwich (Figure 12.3.2.1).

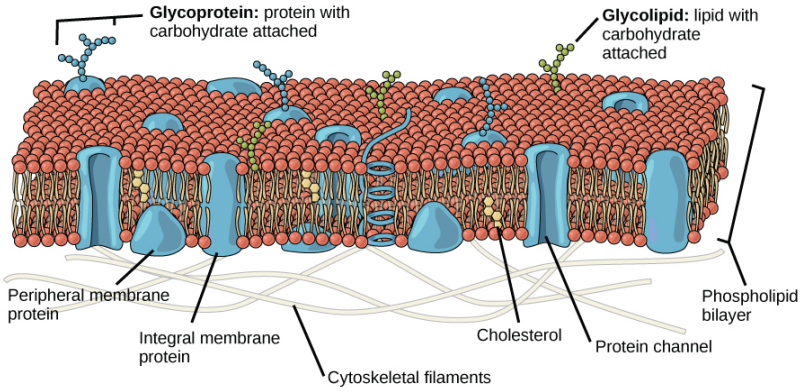


Figure 12.3.2.1: The fluid mosaic model of the plasma membrane describes the plasma membrane as a fluid combination of phospholipids, cholesterol, and proteins. Carbohydrates attached to lipids (glycolipids) and to proteins (glycoproteins) extend from the outward-facing surface of the membrane.

The principal components of a plasma membrane are lipids (phospholipids and cholesterol), proteins, and carbohydrates attached to some of the lipids and some of the proteins. A phospholipid is a molecule consisting of glycerol, two fatty acids, and a phosphate-linked head group. Cholesterol, another lipid composed of four fused carbon rings, is found alongside the phospholipids in the core of the membrane. The proportions of proteins, lipids, and carbohydrates in the plasma membrane vary with cell type, but for a typical human cell, protein accounts for about 50 percent of the composition by mass, lipids (of all types) account for about 40 percent of the composition by mass, with the remaining 10 percent of the composition by mass being carbohydrates. However, the concentration of proteins and lipids varies with different cell membranes. For example, myelin, an outgrowth of the membrane of specialized cells that insulates the axons of the peripheral nerves, contains only 18 percent protein and 76 percent lipid. The mitochondrial inner membrane contains 76 percent protein and only 24 percent lipid. The plasma membrane of human red blood cells is 30 percent lipid. Carbohydrates are present only on the exterior surface of the plasma membrane and are attached to proteins, forming glycoproteins, or attached to lipids, forming glycolipids.

Phospholipids

The main fabric of the membrane is composed of amphiphilic, phospholipid molecules. The hydrophilic or “water-loving” areas of these molecules (which look like a collection of balls in an artist’s rendition of the model) (Figure 12.3.2.1) are in contact with the aqueous fluid both inside and outside the cell. Hydrophobic, or water-hating molecules, tend to be non-polar. They interact with other non-polar molecules in chemical reactions, but generally do not interact with polar molecules. When placed in water, hydrophobic molecules tend to form a ball or cluster. The hydrophilic regions of the phospholipids tend to form hydrogen bonds with water and other polar molecules on both the exterior and interior of the cell. Thus, the membrane surfaces that face the interior and exterior of the cell are hydrophilic. In contrast, the interior of the cell membrane is hydrophobic and will not interact with water. Therefore, phospholipids form an excellent two-layer cell membrane that separates fluid within the cell from the fluid outside of the cell.

A phospholipid molecule (Figure 12.3.2.2) consists of a three-carbon glycerol backbone with two fatty acid molecules attached to carbons 1 and 2, and a phosphate-containing group attached to the third carbon. This arrangement gives the overall molecule an area described as its head (the phosphate-containing group), which has a polar character or negative charge, and an area called the tail (the fatty acids), which has no charge. The head can form hydrogen bonds, but the tail cannot. A molecule with this arrangement of a positively or negatively charged area and an uncharged, or non-polar, area is referred to as amphiphilic or “dual-loving.”

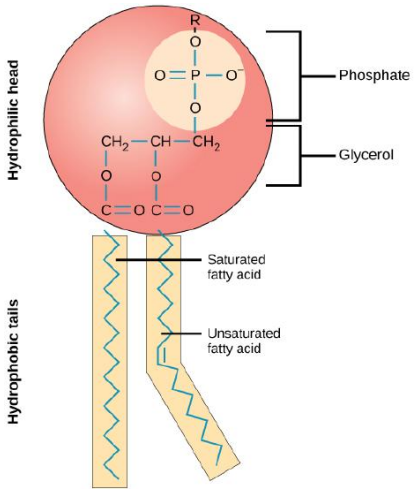


Figure 12.3.2.2: This phospholipid molecule is composed of a hydrophilic head and two hydrophobic tails. The hydrophilic head group consists of a phosphate-containing group attached to a glycerol molecule. The hydrophobic tails, each containing either a saturated or an unsaturated fatty acid, are long hydrocarbon chains.

This characteristic is vital to the structure of a plasma membrane because, in water, phospholipids tend to become arranged with their hydrophobic tails facing each other and their hydrophilic heads facing out. In this way, they form a lipid bilayer—a barrier composed of a double layer of phospholipids that separates the water and other materials on one side of the barrier from the water and other materials on the other side. In fact, phospholipids heated in an aqueous solution tend to spontaneously form small spheres or droplets (called micelles or liposomes), with their hydrophilic heads forming the exterior and their hydrophobic tails on the inside (Figure 12.3.2.3).

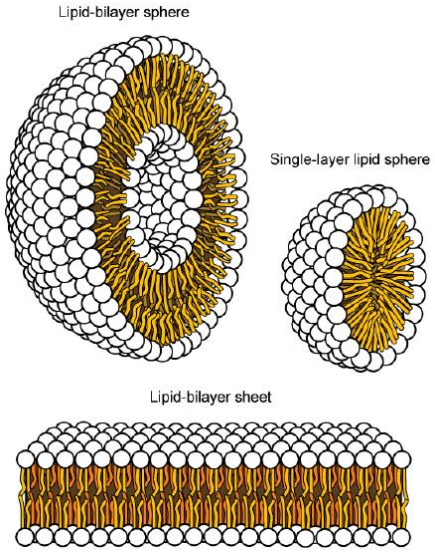


Figure 12.3.2.3: In an aqueous solution, phospholipids tend to arrange themselves with their polar heads facing outward and their hydrophobic tails facing inward. (credit: modification of work by Mariana Ruiz Villareal)

Proteins

Proteins make up the second major component of plasma membranes. Integral proteins (some specialized types are called integrins) are, as their name suggests, integrated completely into the membrane structure, and their hydrophobic membrane-spanning regions interact with the hydrophobic region of the the phospholipid bilayer (Figure 12.3.2.1). Single-pass integral membrane proteins usually have a hydrophobic transmembrane segment that consists of 20–25 amino acids. Some span only part of the membrane—associating with a single layer—while others stretch from one side of the membrane to the other, and are exposed on either side. Some complex proteins are composed of up to 12 segments of a single protein, which are extensively folded and embedded in the membrane (Figure 12.3.2.4). This type of protein has a hydrophilic region or regions, and one or several mildly hydrophobic regions. This arrangement of regions of the protein tends to orient the protein alongside the phospholipids, with the hydrophobic

region of the protein adjacent to the tails of the phospholipids and the hydrophilic region or regions of the protein protruding from the membrane and in contact with the cytosol or extracellular fluid.

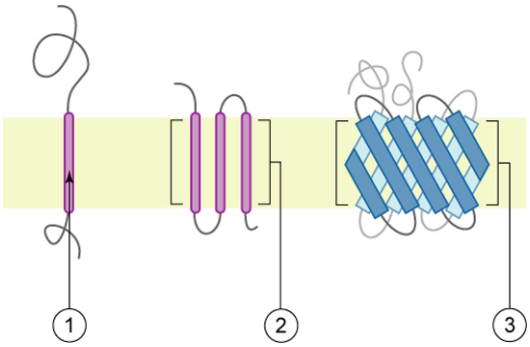


Figure 12.3.2.4: Integral membranes proteins may have one or more alpha-helices that span the membrane (examples 1 and 2), or they may have beta-sheets that span the membrane (example 3). (credit: "Foobar"/Wikimedia Commons)

Peripheral proteins are found on the exterior and interior surfaces of membranes, attached either to integral proteins or to phospholipids. Peripheral proteins, along with integral proteins, may serve as enzymes, as structural attachments for the fibers of the cytoskeleton, or as part of the cell's recognition sites. These are sometimes referred to as "cell-specific" proteins. The body recognizes its own proteins and attacks foreign proteins associated with invasive pathogens.

Carbohydrates

Carbohydrates are the third major component of plasma membranes. They are always found on the exterior surface of cells and are bound either to proteins (forming glycoproteins) or to lipids (forming glycolipids) (Figure 12.3.2.1). These carbohydrate chains may consist of 2–60 monosaccharide units and can be either straight or branched. Along with peripheral proteins, carbohydrates form specialized sites on the cell surface that allow cells to recognize each other. These sites have unique patterns that allow the cell to be recognized, much the way that the facial features unique to each person allow him or her to be recognized. This recognition function is very important to cells, as it allows the immune system to differentiate between body cells (called "self") and foreign cells or tissues (called "non-self"). Similar types of glycoproteins and glycolipids are found on the surfaces of viruses and may change frequently, preventing immune cells from recognizing and attacking them.

These carbohydrates on the exterior surface of the cell—the carbohydrate components of both glycoproteins and glycolipids—are collectively referred to as the glycocalyx (meaning "sugar coating"). The glycocalyx is highly hydrophilic and attracts large amounts of water to the surface of the cell. This aids in the interaction of the cell with its watery environment and in the cell's ability to obtain substances dissolved in the water. As discussed above, the glycocalyx is also important for cell identification, self/non-self determination, and embryonic development, and is used in cell-cell attachments to form tissues.

Evolution Connection: How Viruses Infect Specific Organs

Glycoprotein and glycolipid patterns on the surfaces of cells give many viruses an opportunity for infection. HIV and hepatitis viruses infect only specific organs or cells in the human body. HIV is able to penetrate the plasma membranes of a subtype of lymphocytes called T-helper cells, as well as some monocytes and central nervous system cells. The hepatitis virus attacks liver cells.

These viruses are able to invade these cells, because the cells have binding sites on their surfaces that are specific to and compatible with certain viruses (Figure 12.3.2.5). Other recognition sites on the virus's surface interact with the human immune system, prompting the body to produce antibodies. Antibodies are made in response to the antigens or proteins associated with invasive pathogens, or in response to foreign cells, such as might occur with an organ transplant. These same sites serve as places for antibodies to attach and either destroy or inhibit the activity of the virus. Unfortunately, these recognition sites on HIV change at a rapid rate because of mutations, making the production of an effective vaccine against the virus very difficult, as the virus evolves and adapts. A person infected with HIV will quickly develop different populations, or variants, of the virus that are distinguished by differences in these recognition sites. This rapid change of surface markers decreases the effectiveness of the person's immune system in attacking the virus, because the antibodies will not recognize the new variations of the

surface patterns. In the case of HIV, the problem is compounded by the fact that the virus specifically infects and destroys cells involved in the immune response, further incapacitating the host.

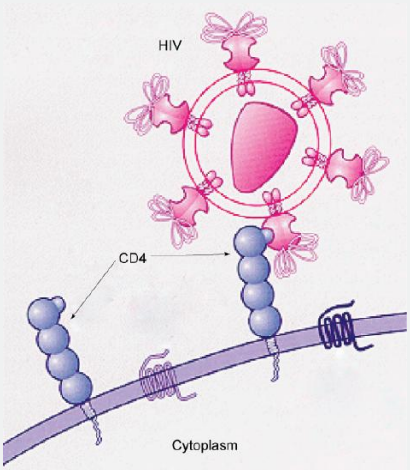


Figure 12.3.2.5: HIV binds to the CD4 receptor, a glycoprotein on the surfaces of T cells. (credit: modification of work by NIH, NIAID)

Membrane Fluidity

The mosaic characteristic of the membrane, described in the fluid mosaic model, helps to illustrate its nature. The integral proteins and lipids exist in the membrane as separate but loosely attached molecules. These resemble the separate, multicolored tiles of a mosaic picture, and they float, moving somewhat with respect to one another. The membrane is not like a balloon, however, that can expand and contract; rather, it is fairly rigid and can burst if penetrated or if a cell takes in too much water. However, because of its mosaic nature, a very fine needle can easily penetrate a plasma membrane without causing it to burst, and the membrane will flow and self-seal when the needle is extracted.

The mosaic characteristics of the membrane explain some but not all of its fluidity. There are two other factors that help maintain this fluid characteristic. One factor is the nature of the phospholipids themselves. In their saturated form, the fatty acids in phospholipid tails are saturated with bound hydrogen atoms. There are no double bonds between adjacent carbon atoms. This results in tails that are relatively straight. In contrast, unsaturated fatty acids do not contain a maximal number of hydrogen atoms, but they do contain some double bonds between adjacent carbon atoms; a double bond results in a bend in the string of carbons of approximately 30 degrees (Figure 12.3.2.2).

Thus, if saturated fatty acids, with their straight tails, are compressed by decreasing temperatures, they press in on each other, making a dense and fairly rigid membrane. If unsaturated fatty acids are compressed, the “kinks” in their tails elbow adjacent phospholipid molecules away, maintaining some space between the phospholipid molecules. This “elbow room” helps to maintain fluidity in the membrane at temperatures at which membranes with saturated fatty acid tails in their phospholipids would “freeze” or solidify. The relative fluidity of the membrane is particularly important in a cold environment. A cold environment tends to compress membranes composed largely of saturated fatty acids, making them less fluid and more susceptible to rupturing. Many organisms (fish are one example) are capable of adapting to cold environments by changing the proportion of unsaturated fatty acids in their membranes in response to the lowering of the temperature.

Link to Learning



Visit this site to see animations of the fluidity and mosaic quality of membranes.

Animals have an additional membrane constituent that assists in maintaining fluidity. Cholesterol, which lies alongside the phospholipids in the membrane, tends to dampen the effects of temperature on the membrane. Thus, this lipid functions as a buffer, preventing lower temperatures from inhibiting fluidity and preventing increased temperatures from increasing fluidity too much. Thus, cholesterol extends, in both directions, the range of temperature in which the membrane is appropriately fluid and consequently functional. Cholesterol also serves other functions, such as organizing clusters of transmembrane proteins into lipid rafts.

Table 12.3.2.1: The Components and Functions of the Plasma Membrane.

Component	Location
Phospholipid	Main fabric of the membrane
Cholesterol	Attached between phospholipids and between the two phospholipid layers
Integral proteins (for example, integrins)	Embedded within the phospholipid layer(s). May or may not penetrate through both layers
Peripheral proteins	On the inner or outer surface of the phospholipid bilayer; not embedded within the phospholipids
Carbohydrates (components of glycoproteins and glycolipids)	Generally attached to proteins on the outside membrane layer

Career Connection: Immunologist

The variations in peripheral proteins and carbohydrates that affect a cell's recognition sites are of prime interest in immunology. These changes are taken into consideration in vaccine development. Many infectious diseases, such as smallpox, polio, diphtheria, and tetanus, were conquered by the use of vaccines.

Immunologists are the physicians and scientists who research and develop vaccines, as well as treat and study allergies or other immune problems. Some immunologists study and treat autoimmune problems (diseases in which a person's immune system attacks his or her own cells or tissues, such as lupus) and immunodeficiencies, whether acquired (such as acquired immunodeficiency syndrome, or AIDS) or hereditary (such as severe combined immunodeficiency, or SCID). Immunologists are called in to help treat organ transplantation patients, who must have their immune systems suppressed so that their bodies will not reject a transplanted organ. Some immunologists work to understand natural immunity and the effects of a person's

environment on it. Others work on questions about how the immune system affects diseases such as cancer. In the past, the importance of having a healthy immune system in preventing cancer was not at all understood.

To work as an immunologist, a PhD or MD is required. In addition, immunologists undertake at least 2–3 years of training in an accredited program and must pass an examination given by the American Board of Allergy and Immunology. Immunologists must possess knowledge of the functions of the human body as they relate to issues beyond immunization, and knowledge of pharmacology and medical technology, such as medications, therapies, test materials, and surgical procedures.

Summary

The modern understanding of the plasma membrane is referred to as the fluid mosaic model. The plasma membrane is composed of a bilayer of phospholipids, with their hydrophobic, fatty acid tails in contact with each other. The landscape of the membrane is studded with proteins, some of which span the membrane. Some of these proteins serve to transport materials into or out of the cell. Carbohydrates are attached to some of the proteins and lipids on the outward-facing surface of the membrane, forming complexes that function to identify the cell to other cells. The fluid nature of the membrane is due to temperature, the configuration of the fatty acid tails (some kinked by double bonds), the presence of cholesterol embedded in the membrane, and the mosaic nature of the proteins and protein-carbohydrate combinations, which are not firmly fixed in place. Plasma membranes enclose and define the borders of cells, but rather than being a static bag, they are dynamic and constantly in flux.

Glossary

amphiphilic
: molecule possessing a polar or charged area and a nonpolar or uncharged area capable of interacting with both hydrophilic and hydrophobic environments

fluid mosaic model
: describes the structure of the plasma membrane as a mosaic of components including phospholipids, cholesterol, proteins, glycoproteins, and glycolipids (sugar chains attached to proteins or lipids, respectively), resulting in a fluid character (fluidity)

glycolipid
: combination of carbohydrates and lipids

glycoprotein
: combination of carbohydrates and proteins

hydrophilic
: molecule with the ability to bond with water; “water-loving”

hydrophobic
: molecule that does not have the ability to bond with water; “water-hating”

integral protein
: protein integrated into the membrane structure that interacts extensively with the hydrocarbon chains of membrane lipids and often spans the membrane; these proteins can be removed only by the disruption of the membrane by detergents

peripheral protein
: protein found at the surface of a plasma membrane either on its exterior or interior side; these proteins can be removed (washed off of the membrane) by a high-salt wash

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12.3.3: Passive Transport

Skills to Develop

- Explain why and how passive transport occurs
- Understand the processes of osmosis and diffusion
- Define tonicity and describe its relevance to passive transport

Plasma membranes must allow certain substances to enter and leave a cell, and prevent some harmful materials from entering and some essential materials from leaving. In other words, plasma membranes are selectively permeable—they allow some substances to pass through, but not others. If they were to lose this selectivity, the cell would no longer be able to sustain itself, and it would be destroyed. Some cells require larger amounts of specific substances than do other cells; they must have a way of obtaining these materials from extracellular fluids. This may happen passively, as certain materials move back and forth, or the cell may have special mechanisms that facilitate transport. Some materials are so important to a cell that it spends some of its energy, hydrolyzing adenosine triphosphate (ATP), to obtain these materials. Red blood cells use some of their energy doing just that. All cells spend the majority of their energy to maintain an imbalance of sodium and potassium ions between the interior and exterior of the cell.

The most direct forms of membrane transport are passive. Passive transport is a naturally occurring phenomenon and does not require the cell to exert any of its energy to accomplish the movement. In passive transport, substances move from an area of higher concentration to an area of lower concentration. A physical space in which there is a range of concentrations of a single substance is said to have a concentration gradient.

Selective Permeability

Plasma membranes are asymmetric: the interior of the membrane is not identical to the exterior of the membrane. In fact, there is a considerable difference between the array of phospholipids and proteins between the two leaflets that form a membrane. On the interior of the membrane, some proteins serve to anchor the membrane to fibers of the cytoskeleton. There are peripheral proteins on the exterior of the membrane that bind elements of the extracellular matrix. Carbohydrates, attached to lipids or proteins, are also found on the exterior surface of the plasma membrane. These carbohydrate complexes help the cell bind substances that the cell needs in the extracellular fluid. This adds considerably to the selective nature of plasma membranes (Figure 12.3.3.1).

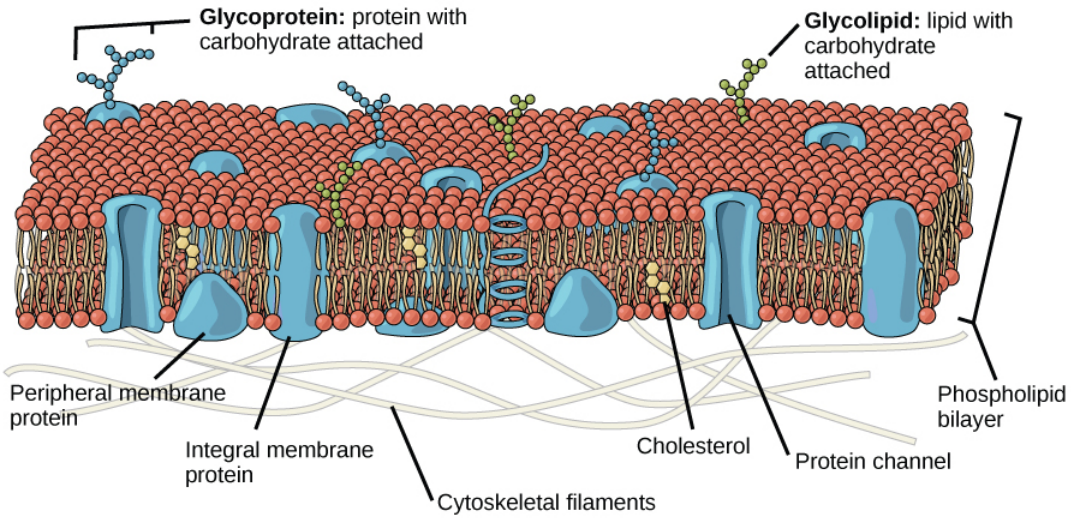


Figure 12.3.3.1: The exterior surface of the plasma membrane is not identical to the interior surface of the same membrane.

Recall that plasma membranes are amphiphilic: They have hydrophilic and hydrophobic regions. This characteristic helps the movement of some materials through the membrane and hinders the movement of others. Lipid-soluble material with a low molecular weight can easily slip through the hydrophobic lipid core of the membrane. Substances such as the fat-soluble vitamins A, D, E, and K readily pass through the plasma membranes in the digestive tract and other tissues. Fat-soluble drugs and hormones

also gain easy entry into cells and are readily transported into the body's tissues and organs. Molecules of oxygen and carbon dioxide have no charge and so pass through membranes by simple diffusion.

Polar substances present problems for the membrane. While some polar molecules connect easily with the outside of a cell, they cannot readily pass through the lipid core of the plasma membrane. Additionally, while small ions could easily slip through the spaces in the mosaic of the membrane, their charge prevents them from doing so. Ions such as sodium, potassium, calcium, and chloride must have special means of penetrating plasma membranes. Simple sugars and amino acids also need help with transport across plasma membranes, achieved by various transmembrane proteins (channels).

Diffusion

Diffusion is a passive process of transport. A single substance tends to move from an area of high concentration to an area of low concentration until the concentration is equal across a space. You are familiar with diffusion of substances through the air. For example, think about someone opening a bottle of ammonia in a room filled with people. The ammonia gas is at its highest concentration in the bottle; its lowest concentration is at the edges of the room. The ammonia vapor will diffuse, or spread away, from the bottle, and gradually, more and more people will smell the ammonia as it spreads. Materials move within the cell's cytosol by diffusion, and certain materials move through the plasma membrane by diffusion (Figure 12.3.3.2). Diffusion expends no energy. On the contrary, concentration gradients are a form of potential energy, dissipated as the gradient is eliminated.

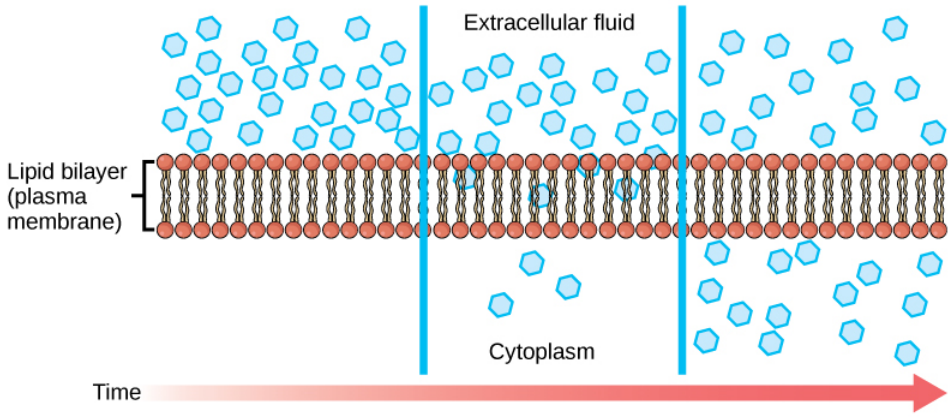


Figure 12.3.3.2: Diffusion through a permeable membrane moves a substance from an area of high concentration (extracellular fluid, in this case) down its concentration gradient (into the cytoplasm). (credit: modification of work by Mariana Ruiz Villareal)

Each separate substance in a medium, such as the extracellular fluid, has its own concentration gradient, independent of the concentration gradients of other materials. In addition, each substance will diffuse according to that gradient. Within a system, there will be different rates of diffusion of the different substances in the medium.

Factors That Affect Diffusion

Molecules move constantly in a random manner, at a rate that depends on their mass, their environment, and the amount of thermal energy they possess, which in turn is a function of temperature. This movement accounts for the diffusion of molecules through whatever medium in which they are localized. A substance will tend to move into any space available to it until it is evenly distributed throughout it. After a substance has diffused completely through a space, removing its concentration gradient, molecules will still move around in the space, but there will be no *net* movement of the number of molecules from one area to another. This lack of a concentration gradient in which there is no net movement of a substance is known as dynamic equilibrium. While diffusion will go forward in the presence of a concentration gradient of a substance, several factors affect the rate of diffusion.

- Extent of the concentration gradient: The greater the difference in concentration, the more rapid the diffusion. The closer the distribution of the material gets to equilibrium, the slower the rate of diffusion becomes.
- Mass of the molecules diffusing: Heavier molecules move more slowly; therefore, they diffuse more slowly. The reverse is true for lighter molecules.
- Temperature: Higher temperatures increase the energy and therefore the movement of the molecules, increasing the rate of diffusion. Lower temperatures decrease the energy of the molecules, thus decreasing the rate of diffusion.

- Solvent density: As the density of a solvent increases, the rate of diffusion decreases. The molecules slow down because they have a more difficult time getting through the denser medium. If the medium is less dense, diffusion increases. Because cells primarily use diffusion to move materials within the cytoplasm, any increase in the cytoplasm's density will inhibit the movement of the materials. An example of this is a person experiencing dehydration. As the body's cells lose water, the rate of diffusion decreases in the cytoplasm, and the cells' functions deteriorate. Neurons tend to be very sensitive to this effect. Dehydration frequently leads to unconsciousness and possibly coma because of the decrease in diffusion rate within the cells.
- Solubility: As discussed earlier, nonpolar or lipid-soluble materials pass through plasma membranes more easily than polar materials, allowing a faster rate of diffusion.
- Surface area and thickness of the plasma membrane: Increased surface area increases the rate of diffusion, whereas a thicker membrane reduces it.
- Distance travelled: The greater the distance that a substance must travel, the slower the rate of diffusion. This places an upper limitation on cell size. A large, spherical cell will die because nutrients or waste cannot reach or leave the center of the cell, respectively. Therefore, cells must either be small in size, as in the case of many prokaryotes, or be flattened, as with many single-celled eukaryotes.

A variation of diffusion is the process of filtration. In filtration, material moves according to its concentration gradient through a membrane; sometimes the rate of diffusion is enhanced by pressure, causing the substances to filter more rapidly. This occurs in the kidney, where blood pressure forces large amounts of water and accompanying dissolved substances, or solutes, out of the blood and into the renal tubules. The rate of diffusion in this instance is almost totally dependent on pressure. One of the effects of high blood pressure is the appearance of protein in the urine, which is "squeezed through" by the abnormally high pressure.

Facilitated transport

In facilitated transport, also called facilitated diffusion, materials diffuse across the plasma membrane with the help of membrane proteins. A concentration gradient exists that would allow these materials to diffuse into the cell without expending cellular energy. However, these materials are ions are polar molecules that are repelled by the hydrophobic parts of the cell membrane. Facilitated transport proteins shield these materials from the repulsive force of the membrane, allowing them to diffuse into the cell.

The material being transported is first attached to protein or glycoprotein receptors on the exterior surface of the plasma membrane. This allows the material that is needed by the cell to be removed from the extracellular fluid. The substances are then passed to specific integral proteins that facilitate their passage. Some of these integral proteins are collections of beta pleated sheets that form a pore or channel through the phospholipid bilayer. Others are carrier proteins which bind with the substance and aid its diffusion through the membrane.

Channels

The integral proteins involved in facilitated transport are collectively referred to as transport proteins, and they function as either channels for the material or carriers. In both cases, they are transmembrane proteins. Channels are specific for the substance that is being transported. Channel proteins have hydrophilic domains exposed to the intracellular and extracellular fluids; they additionally have a hydrophilic channel through their core that provides a hydrated opening through the membrane layers (Figure 12.3.3.3). Passage through the channel allows polar compounds to avoid the nonpolar central layer of the plasma membrane that would otherwise slow or prevent their entry into the cell. Aquaporins are channel proteins that allow water to pass through the membrane at a very high rate.

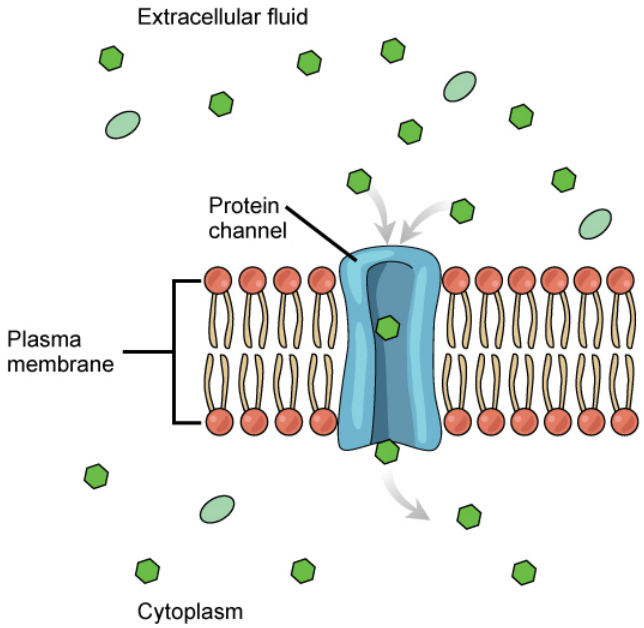


Figure 12.3.3.3: Facilitated transport moves substances down their concentration gradients. They may cross the plasma membrane with the aid of channel proteins. (credit: modification of work by Mariana Ruiz Villareal)

Channel proteins are either open at all times or they are “gated,” which controls the opening of the channel. The attachment of a particular ion to the channel protein may control the opening, or other mechanisms or substances may be involved. In some tissues, sodium and chloride ions pass freely through open channels, whereas in other tissues a gate must be opened to allow passage. An example of this occurs in the kidney, where both forms of channels are found in different parts of the renal tubules. Cells involved in the transmission of electrical impulses, such as nerve and muscle cells, have gated channels for sodium, potassium, and calcium in their membranes. Opening and closing of these channels changes the relative concentrations on opposing sides of the membrane of these ions, resulting in the facilitation of electrical transmission along membranes (in the case of nerve cells) or in muscle contraction (in the case of muscle cells).

Carrier Proteins

Another type of protein embedded in the plasma membrane is a carrier protein. This aptly named protein binds a substance and, in doing so, triggers a change of its own shape, moving the bound molecule from the outside of the cell to its interior (Figure 12.3.3.4); depending on the gradient, the material may move in the opposite direction. Carrier proteins are typically specific for a single substance. This selectivity adds to the overall selectivity of the plasma membrane. The exact mechanism for the change of shape is poorly understood. Proteins can change shape when their hydrogen bonds are affected, but this may not fully explain this mechanism. Each carrier protein is specific to one substance, and there are a finite number of these proteins in any membrane. This can cause problems in transporting enough of the material for the cell to function properly. When all of the proteins are bound to their ligands, they are saturated and the rate of transport is at its maximum. Increasing the concentration gradient at this point will not result in an increased rate of transport.

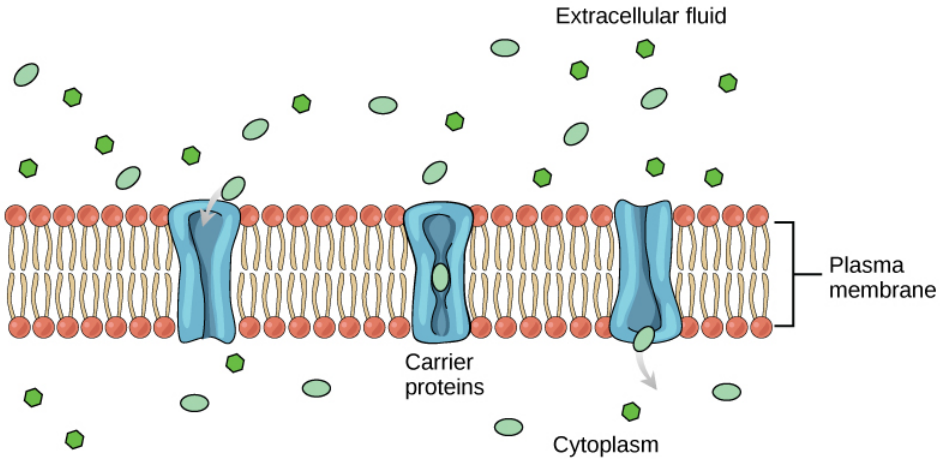


Figure 12.3.3.4: Some substances are able to move down their concentration gradient across the plasma membrane with the aid of carrier proteins. Carrier proteins change shape as they move molecules across the membrane. (credit: modification of work by Mariana Ruiz Villareal)

An example of this process occurs in the kidney. Glucose, water, salts, ions, and amino acids needed by the body are filtered in one part of the kidney. This filtrate, which includes glucose, is then reabsorbed in another part of the kidney. Because there are only a finite number of carrier proteins for glucose, if more glucose is present than the proteins can handle, the excess is not transported and it is excreted from the body in the urine. In a diabetic individual, this is described as “spilling glucose into the urine.” A different group of carrier proteins called glucose transport proteins, or GLUTs, are involved in transporting glucose and other hexose sugars through plasma membranes within the body.

Channel and carrier proteins transport material at different rates. Channel proteins transport much more quickly than do carrier proteins. Channel proteins facilitate diffusion at a rate of tens of millions of molecules per second, whereas carrier proteins work at a rate of a thousand to a million molecules per second.

Osmosis

Osmosis is the movement of water through a semipermeable membrane according to the concentration gradient of water across the membrane, which is inversely proportional to the concentration of solutes. While diffusion transports material across membranes and within cells, osmosis transports *only water* across a membrane and the membrane limits the diffusion of solutes in the water. Not surprisingly, the aquaporins that facilitate water movement play a large role in osmosis, most prominently in red blood cells and the membranes of kidney tubules.

Mechanism

Osmosis is a special case of diffusion. Water, like other substances, moves from an area of high concentration to one of low concentration. An obvious question is what makes water move at all? Imagine a beaker with a semipermeable membrane separating the two sides or halves (Figure 12.3.3.5). On both sides of the membrane the water level is the same, but there are different concentrations of a dissolved substance, or solute, that cannot cross the membrane (otherwise the concentrations on each side would be balanced by the solute crossing the membrane). If the volume of the solution on both sides of the membrane is the same, but the concentrations of solute are different, then there are different amounts of water, the solvent, on either side of the membrane.

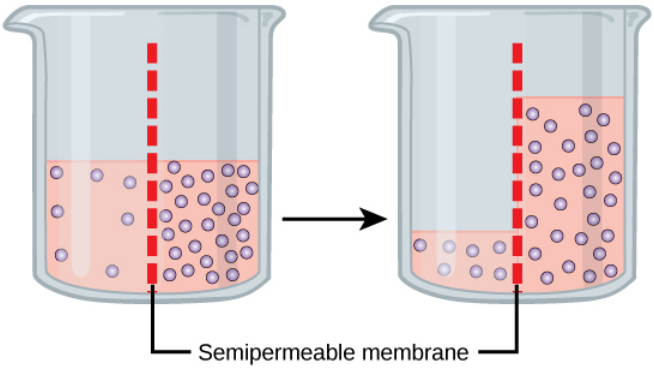


Figure 12.3.3.5: In osmosis, water always moves from an area of higher water concentration to one of lower concentration. In the diagram shown, the solute cannot pass through the selectively permeable membrane, but the water can.

To illustrate this, imagine two full glasses of water. One has a single teaspoon of sugar in it, whereas the second one contains one-quarter cup of sugar. If the total volume of the solutions in both cups is the same, which cup contains more water? Because the large amount of sugar in the second cup takes up much more space than the teaspoon of sugar in the first cup, the first cup has more water in it.

Returning to the beaker example, recall that it has a mixture of solutes on either side of the membrane. A principle of diffusion is that the molecules move around and will spread evenly throughout the medium if they can. However, only the material capable of getting through the membrane will diffuse through it. In this example, the solute cannot diffuse through the membrane, but the water can. Water has a concentration gradient in this system. Thus, water will diffuse down its concentration gradient, crossing the membrane to the side where it is less concentrated. This diffusion of water through the membrane—osmosis—will continue until the concentration gradient of water goes to zero or until the hydrostatic pressure of the water balances the osmotic pressure. Osmosis proceeds constantly in living systems.

Tonicity

Tonicity describes how an extracellular solution can change the volume of a cell by affecting osmosis. A solution's tonicity often directly correlates with the osmolarity of the solution. Osmolarity describes the total solute concentration of the solution. A solution with low osmolarity has a greater number of water molecules relative to the number of solute particles; a solution with high osmolarity has fewer water molecules with respect to solute particles. In a situation in which solutions of two different osmolarities are separated by a membrane permeable to water, though not to the solute, water will move from the side of the membrane with lower osmolarity (and more water) to the side with higher osmolarity (and less water). This effect makes sense if you remember that the solute cannot move across the membrane, and thus the only component in the system that can move—the water—moves along its own concentration gradient. An important distinction that concerns living systems is that osmolarity measures the number of particles (which may be molecules) in a solution. Therefore, a solution that is cloudy with cells may have a lower osmolarity than a solution that is clear, if the second solution contains more dissolved molecules than there are cells.

Hypotonic Solutions

Three terms—hypotonic, isotonic, and hypertonic—are used to relate the osmolarity of a cell to the osmolarity of the extracellular fluid that contains the cells. In a hypotonic situation, the extracellular fluid has lower osmolarity than the fluid inside the cell, and water enters the cell. (In living systems, the point of reference is always the cytoplasm, so the prefix *hypo-* means that the extracellular fluid has a lower concentration of solutes, or a lower osmolarity, than the cell cytoplasm.) It also means that the extracellular fluid has a higher concentration of water in the solution than does the cell. In this situation, water will follow its concentration gradient and enter the cell.

Hypertonic Solutions

As for a hypertonic solution, the prefix *hyper-* refers to the extracellular fluid having a higher osmolarity than the cell's cytoplasm; therefore, the fluid contains less water than the cell does. Because the cell has a relatively higher concentration of water, water will leave the cell.

Isotonic Solutions

In an isotonic solution, the extracellular fluid has the same osmolarity as the cell. If the osmolarity of the cell matches that of the extracellular fluid, there will be no net movement of water into or out of the cell, although water will still move in and out. Blood cells and plant cells in hypertonic, isotonic, and hypotonic solutions take on characteristic appearances (Figure 12.3.3.6).

Art Connection

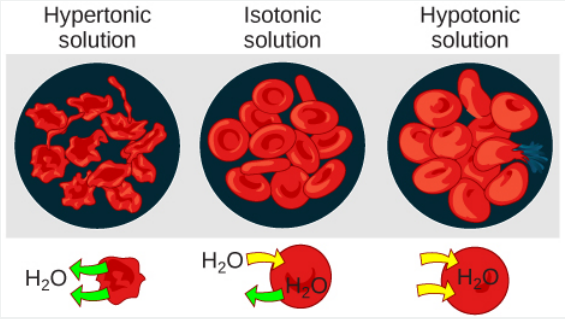


Figure 12.3.3.6: Osmotic pressure changes the shape of red blood cells in hypertonic, isotonic, and hypotonic solutions. (credit: Mariana Ruiz Villareal)

A doctor injects a patient with what the doctor thinks is an isotonic saline solution. The patient dies, and an autopsy reveals that many red blood cells have been destroyed. Do you think the solution the doctor injected was really isotonic?

Link to Learning



For a video illustrating the process of diffusion in solutions, visit this site.

Tonicity in Living Systems

In a hypotonic environment, water enters a cell, and the cell swells. In an isotonic condition, the relative concentrations of solute and solvent are equal on both sides of the membrane. There is no net water movement; therefore, there is no change in the size of the cell. In a hypertonic solution, water leaves a cell and the cell shrinks. If either the hypo- or hyper- condition goes to excess, the cell's functions become compromised, and the cell may be destroyed.

A red blood cell will burst, or lyse, when it swells beyond the plasma membrane's capability to expand. Remember, the membrane resembles a mosaic, with discrete spaces between the molecules composing it. If the cell swells, and the spaces between the lipids and proteins become too large, the cell will break apart.

In contrast, when excessive amounts of water leave a red blood cell, the cell shrinks, or crenates. This has the effect of concentrating the solutes left in the cell, making the cytosol denser and interfering with diffusion within the cell. The cell's ability to function will be compromised and may also result in the death of the cell.

Various living things have ways of controlling the effects of osmosis—a mechanism called osmoregulation. Some organisms, such as plants, fungi, bacteria, and some protists, have cell walls that surround the plasma membrane and prevent cell lysis in a hypotonic solution. The plasma membrane can only expand to the limit of the cell wall, so the cell will not lyse. In fact, the cytoplasm in plants is always slightly hypertonic to the cellular environment, and water will always enter a cell if water is available. This inflow of water produces turgor pressure, which stiffens the cell walls of the plant (Figure 12.3.3.8). In nonwoody plants, turgor pressure supports the plant. Conversly, if the plant is not watered, the extracellular fluid will become hypertonic, causing water to leave the cell. In this condition, the cell does not shrink because the cell wall is not flexible. However, the cell membrane detaches from the wall and constricts the cytoplasm. This is called plasmolysis. Plants lose turgor pressure in this condition and wilt (Figure 12.3.3.9).

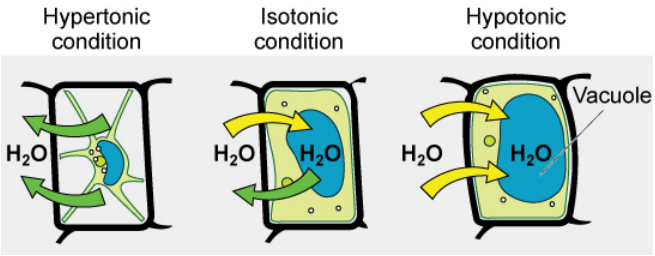


Figure 12.3.3.7: The turgor pressure within a plant cell depends on the tonicity of the solution that it is bathed in. (credit: modification of work by Mariana Ruiz Villareal)



Figure 12.3.3.8: Without adequate water, the plant on the left has lost turgor pressure, visible in its wilting; the turgor pressure is restored by watering it (right). (credit: Victor M. Vicente Selvas)

Tonicity is a concern for all living things. For example, paramecia and amoebas, which are protists that lack cell walls, have contractile vacuoles. This vesicle collects excess water from the cell and pumps it out, keeping the cell from lysing as it takes on water from its environment.

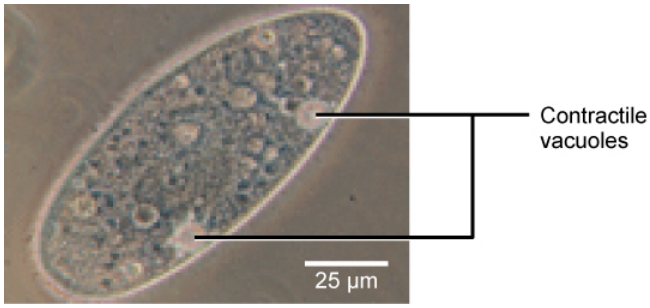


Figure 12.3.3.9: A paramecium's contractile vacuole, here visualized using bright field light microscopy at 480x magnification, continuously pumps water out of the organism's body to keep it from bursting in a hypotonic medium. (credit: modification of work by NIH; scale-bar data from Matt Russell)

Many marine invertebrates have internal salt levels matched to their environments, making them isotonic with the water in which they live. Fish, however, must spend approximately five percent of their metabolic energy maintaining osmotic homeostasis. Freshwater fish live in an environment that is hypotonic to their cells. These fish actively take in salt through their gills and excrete diluted urine to rid themselves of excess water. Saltwater fish live in the reverse environment, which is hypertonic to their cells, and they secrete salt through their gills and excrete highly concentrated urine.

In vertebrates, the kidneys regulate the amount of water in the body. Osmoreceptors are specialized cells in the brain that monitor the concentration of solutes in the blood. If the levels of solutes increase beyond a certain range, a hormone is released that retards water loss through the kidney and dilutes the blood to safer levels. Animals also have high concentrations of albumin, which is produced by the liver, in their blood. This protein is too large to pass easily through plasma membranes and is a major factor in controlling the osmotic pressures applied to tissues.

Summary

The passive forms of transport, diffusion and osmosis, move materials of small molecular weight across membranes. Substances diffuse from areas of high concentration to areas of lower concentration, and this process continues until the substance is evenly distributed in a system. In solutions containing more than one substance, each type of molecule diffuses according to its own concentration gradient, independent of the diffusion of other substances. Many factors can affect the rate of diffusion, including concentration gradient, size of the particles that are diffusing, temperature of the system, and so on.

In living systems, diffusion of substances into and out of cells is mediated by the plasma membrane. Some materials diffuse readily through the membrane, but others are hindered, and their passage is made possible by specialized proteins, such as channels and transporters. The chemistry of living things occurs in aqueous solutions, and balancing the concentrations of those solutions is an ongoing problem. In living systems, diffusion of some substances would be slow or difficult without membrane proteins that facilitate transport.

Art Connections

Figure 12.3.3.6: A doctor injects a patient with what the doctor thinks is an isotonic saline solution. The patient dies, and an autopsy reveals that many red blood cells have been destroyed. Do you think the solution the doctor injected was really isotonic?

Answer

No, it must have been hypotonic as a hypotonic solution would cause water to enter the cells, thereby making them burst.

Glossary

aquaporin
channel protein that allows water through the membrane at a very high rate

carrier protein
membrane protein that moves a substance across the plasma membrane by changing its own shape

channel protein
membrane protein that allows a substance to pass through its hollow core across the plasma membrane

concentration gradient
area of high concentration adjacent to an area of low concentration

diffusion
passive process of transport of low-molecular weight material according to its concentration gradient

facilitated transport
process by which material moves down a concentration gradient (from high to low concentration) using integral membrane proteins

hypertonic
situation in which extracellular fluid has a higher osmolarity than the fluid inside the cell, resulting in water moving out of the cell

hypotonic
situation in which extracellular fluid has a lower osmolarity than the fluid inside the cell, resulting in water moving into the cell

isotonic

situation in which the extracellular fluid has the same osmolarity as the fluid inside the cell, resulting in no net movement of water into or out of the cell

osmolarity

total amount of substances dissolved in a specific amount of solution

osmosis

transport of water through a semipermeable membrane according to the concentration gradient of water across the membrane that results from the presence of solute that cannot pass through the membrane

passive transport

method of transporting material through a membrane that does not require energy

plasmolysis

detaching of the cell membrane from the cell wall and constriction of the cell membrane when a plant cell is in a hypertonic solution

selectively permeable

characteristic of a membrane that allows some substances through but not others

solute

substance dissolved in a liquid to form a solution

tonicity

amount of solute in a solution

transport protein

membrane protein that facilitates passage of a substance across a membrane by binding it

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12.3.4: Active Transport

Skills to Develop

- Understand how electrochemical gradients affect ions
- Distinguish between primary active transport and secondary active transport

Active transport mechanisms require the use of the cell's energy, usually in the form of adenosine triphosphate (ATP). If a substance must move into the cell against its concentration gradient—that is, if the concentration of the substance inside the cell is greater than its concentration in the extracellular fluid (and vice versa)—the cell must use energy to move the substance. Some active transport mechanisms move small-molecular weight materials, such as ions, through the membrane. Other mechanisms transport much larger molecules.

Electrochemical Gradient

We have discussed simple concentration gradients—differential concentrations of a substance across a space or a membrane—but in living systems, gradients are more complex. Because ions move into and out of cells and because cells contain proteins that do not move across the membrane and are mostly negatively charged, there is also an electrical gradient, a difference of charge, across the plasma membrane. The interior of living cells is electrically negative with respect to the extracellular fluid in which they are bathed, and at the same time, cells have higher concentrations of potassium (K^+) and lower concentrations of sodium (Na^+) than does the extracellular fluid. So in a living cell, the concentration gradient of Na^+ tends to drive it into the cell, and the electrical gradient of Na^+ (a positive ion) also tends to drive it inward to the negatively charged interior. The situation is more complex, however, for other elements such as potassium. The electrical gradient of K^+, a positive ion, also tends to drive it into the cell, but the concentration gradient of K^+ tends to drive K^+ *out* of the cell (Figure 12.3.4.1). The combined gradient of concentration and electrical charge that affects an ion is called its electrochemical gradient.

Art Connection

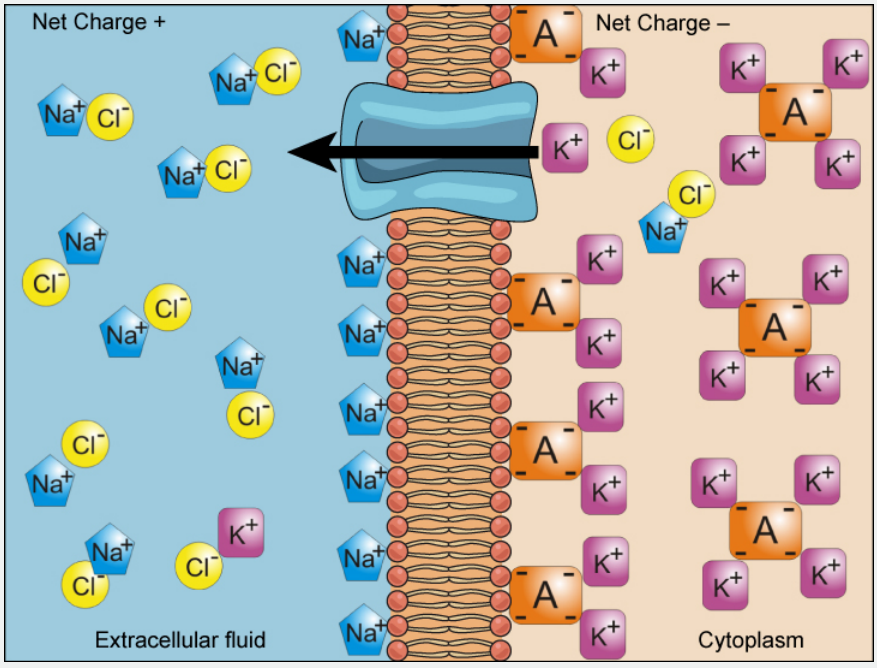


Figure 12.3.4.1: Electrochemical gradients arise from the combined effects of concentration gradients and electrical gradients. (credit: "Synaptitude"/Wikimedia Commons)

Injection of a potassium solution into a person's blood is lethal; this is used in capital punishment and euthanasia. Why do you think a potassium solution injection is lethal?

Moving Against a Gradient

To move substances against a concentration or electrochemical gradient, the cell must use energy. This energy is harvested from ATP generated through the cell's metabolism. Active transport mechanisms, collectively called pumps, work against electrochemical gradients. Small substances constantly pass through plasma membranes. Active transport maintains concentrations of ions and other substances needed by living cells in the face of these passive movements. Much of a cell's supply of metabolic energy may be spent maintaining these processes. (Most of a red blood cell's metabolic energy is used to maintain the imbalance between exterior and interior sodium and potassium levels required by the cell.) Because active transport mechanisms depend on a cell's metabolism for energy, they are sensitive to many metabolic poisons that interfere with the supply of ATP.

Two mechanisms exist for the transport of small-molecular weight material and small molecules. Primary active transport moves ions across a membrane and creates a difference in charge across that membrane, which is directly dependent on ATP. Secondary active transport describes the movement of material that is due to the electrochemical gradient established by primary active transport that does not directly require ATP.

Carrier Proteins for Active Transport

An important membrane adaption for active transport is the presence of specific carrier proteins or pumps to facilitate movement: there are three types of these proteins or transporters (Figure 12.3.4.2). A uniporter carries one specific ion or molecule. A symporter carries two different ions or molecules, both in the same direction. An antiporter also carries two different ions or molecules, but in different directions. All of these transporters can also transport small, uncharged organic molecules like glucose. These three types of carrier proteins are also found in facilitated diffusion, but they do not require ATP to work in that process. Some examples of pumps for active transport are Na^+-K^+ ATPase, which carries sodium and potassium ions, and H^+-K^+ ATPase, which carries hydrogen and potassium ions. Both of these are antiporter carrier proteins. Two other carrier proteins are Ca^{2+} ATPase and H^+ ATPase, which carry only calcium and only hydrogen ions, respectively. Both are pumps.

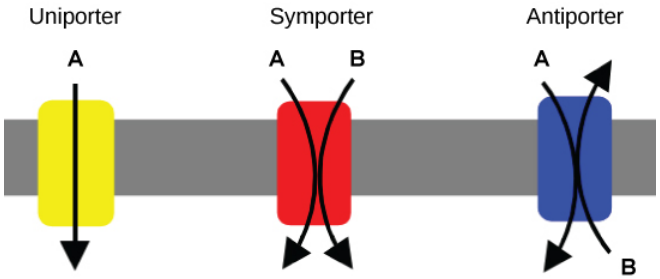


Figure 12.3.4.2: A uniporter carries one molecule or ion. A symporter carries two different molecules or ions, both in the same direction. An antiporter also carries two different molecules or ions, but in different directions. (credit: modification of work by "Lupask"/Wikimedia Commons)

Primary Active Transport

The primary active transport that functions with the active transport of sodium and potassium allows secondary active transport to occur. The second transport method is still considered active because it depends on the use of energy as does primary transport (Figure 12.3.4.3).

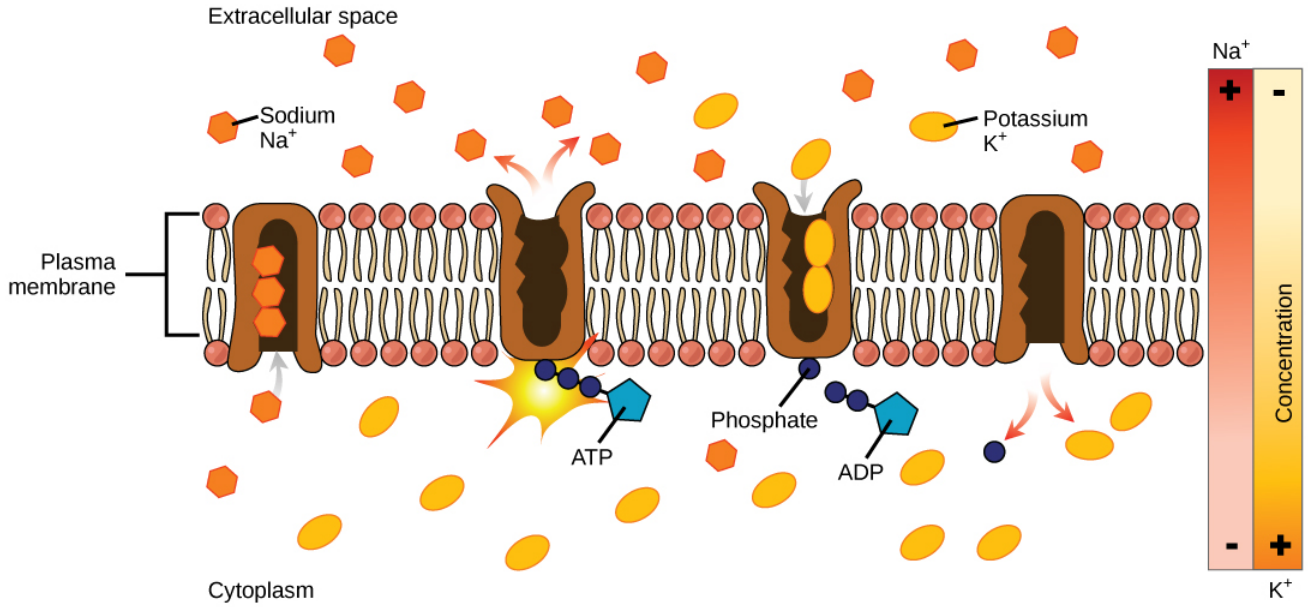


Figure 12.3.4.3: Primary active transport moves ions across a membrane, creating an electrochemical gradient (electrogenic transport). (credit: modification of work by Mariana Ruiz Villareal)

One of the most important pumps in animals cells is the sodium-potassium pump (Na^+-K^+ ATPase), which maintains the electrochemical gradient (and the correct concentrations of Na^+ and K^+) in living cells. The sodium-potassium pump moves K^+ into the cell while moving Na^+ out at the same time, at a ratio of three Na^+ for every two K^+ ions moved in. The Na^+-K^+ ATPase exists in two forms, depending on its orientation to the interior or exterior of the cell and its affinity for either sodium or potassium ions. The process consists of the following six steps.

1. With the enzyme oriented towards the interior of the cell, the carrier has a high affinity for sodium ions. Three ions bind to the protein.
2. ATP is hydrolyzed by the protein carrier and a low-energy phosphate group attaches to it.
3. As a result, the carrier changes shape and re-orients itself towards the exterior of the membrane. The protein's affinity for sodium decreases and the three sodium ions leave the carrier.
4. The shape change increases the carrier's affinity for potassium ions, and two such ions attach to the protein. Subsequently, the low-energy phosphate group detaches from the carrier.
5. With the phosphate group removed and potassium ions attached, the carrier protein repositions itself towards the interior of the cell.
6. The carrier protein, in its new configuration, has a decreased affinity for potassium, and the two ions are released into the cytoplasm. The protein now has a higher affinity for sodium ions, and the process starts again.

Several things have happened as a result of this process. At this point, there are more sodium ions outside of the cell than inside and more potassium ions inside than out. For every three ions of sodium that move out, two ions of potassium move in. This results in the interior being slightly more negative relative to the exterior. This difference in charge is important in creating the conditions necessary for the secondary process. The sodium-potassium pump is, therefore, an electrogenic pump (a pump that creates a charge imbalance), creating an electrical imbalance across the membrane and contributing to the membrane potential.

Link to Learning



Visit the site to see a simulation of active transport in a sodium-potassium ATPase.

Secondary Active Transport (Co-transport)

Secondary active transport brings sodium ions, and possibly other compounds, into the cell. As sodium ion concentrations build outside of the plasma membrane because of the action of the primary active transport process, an electrochemical gradient is created. If a channel protein exists and is open, the sodium ions will be pulled through the membrane. This movement is used to transport other substances that can attach themselves to the transport protein through the membrane (Figure 12.3.4.4). Many amino acids, as well as glucose, enter a cell this way. This secondary process is also used to store high-energy hydrogen ions in the mitochondria of plant and animal cells for the production of ATP. The potential energy that accumulates in the stored hydrogen ions is translated into kinetic energy as the ions surge through the channel protein ATP synthase, and that energy is used to convert ADP into ATP.

Art Connection

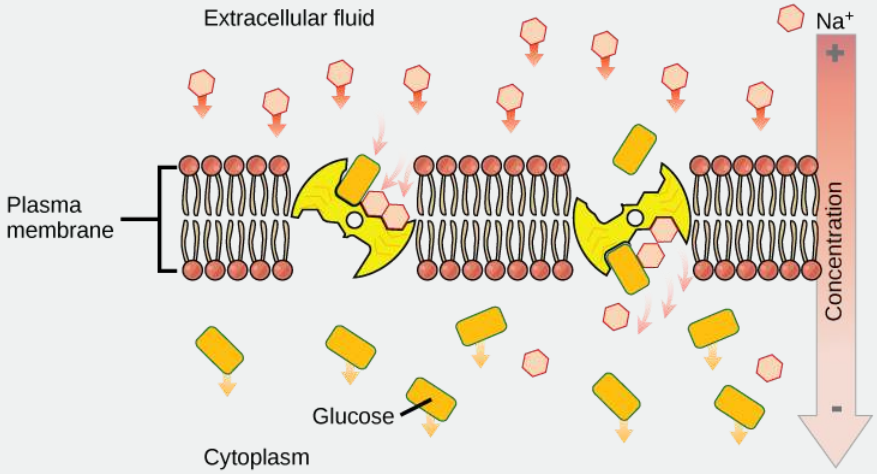


Figure 12.3.4.4: An electrochemical gradient, created by primary active transport, can move other substances against their concentration gradients, a process called co-transport or secondary active transport. (credit: modification of work by Mariana Ruiz Villareal)

If the pH outside the cell decreases, would you expect the amount of amino acids transported into the cell to increase or decrease?

Summary

The combined gradient that affects an ion includes its concentration gradient and its electrical gradient. A positive ion, for example, might tend to diffuse into a new area, down its concentration gradient, but if it is diffusing into an area of net positive charge, its diffusion will be hampered by its electrical gradient. When dealing with ions in aqueous solutions, a combination of the

electrochemical and concentration gradients, rather than just the concentration gradient alone, must be considered. Living cells need certain substances that exist inside the cell in concentrations greater than they exist in the extracellular space. Moving substances up their electrochemical gradients requires energy from the cell. Active transport uses energy stored in ATP to fuel this transport. Active transport of small molecular-sized materials uses integral proteins in the cell membrane to move the materials: These proteins are analogous to pumps. Some pumps, which carry out primary active transport, couple directly with ATP to drive their action. In co-transport (or secondary active transport), energy from primary transport can be used to move another substance into the cell and up its concentration gradient.

Art Connections

Figure 12.3.4.1: Injection of a potassium solution into a person's blood is lethal; this is used in capital punishment and euthanasia. Why do you think a potassium solution injection is lethal?

Answer

Cells typically have a high concentration of potassium in the cytoplasm and are bathed in a high concentration of sodium. Injection of potassium dissipates this electrochemical gradient. In heart muscle, the sodium/potassium potential is responsible for transmitting the signal that causes the muscle to contract. When this potential is dissipated, the signal can't be transmitted, and the heart stops beating. Potassium injections are also used to stop the heart from beating during surgery.

Figure 12.3.4.4: If the pH outside the cell decreases, would you expect the amount of amino acids transported into the cell to increase or decrease?

Answer

A decrease in pH means an increase in positively charged H^+ ions, and an increase in the electrical gradient across the membrane. The transport of amino acids into the cell will increase.

Glossary

active transport
method of transporting material that requires energy

antiporter
transporter that carries two ions or small molecules in different directions

electrochemical gradient
gradient produced by the combined forces of an electrical gradient and a chemical gradient

electrogenic pump
pump that creates a charge imbalance

primary active transport
active transport that moves ions or small molecules across a membrane and may create a difference in charge across that membrane

pump
active transport mechanism that works against electrochemical gradients

secondary active transport
movement of material that is due to the electrochemical gradient established by primary active transport

symporter
transporter that carries two different ions or small molecules, both in the same direction

transporter

specific carrier proteins or pumps that facilitate movement

uniporter

transporter that carries one specific ion or molecule

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12.3.5: Bulk Transport

Skills to Develop

- Describe endocytosis, including phagocytosis, pinocytosis, and receptor-mediated endocytosis
- Understand the process of exocytosis

In addition to moving small ions and molecules through the membrane, cells also need to remove and take in larger molecules and particles (see Table 12.3.5.1 for examples). Some cells are even capable of engulfing entire unicellular microorganisms. You might have correctly hypothesized that the uptake and release of large particles by the cell requires energy. A large particle, however, cannot pass through the membrane, even with energy supplied by the cell.

Endocytosis

Endocytosis is a type of active transport that moves particles, such as large molecules, parts of cells, and even whole cells, into a cell. There are different variations of endocytosis, but all share a common characteristic: The plasma membrane of the cell invaginates, forming a pocket around the target particle. The pocket pinches off, resulting in the particle being contained in a newly created intracellular vesicle formed from the plasma membrane.

Phagocytosis

Phagocytosis (the condition of "cell eating") is the process by which large particles, such as cells or relatively large particles, are taken in by a cell. For example, when microorganisms invade the human body, a type of white blood cell called a neutrophil will remove the invaders through this process, surrounding and engulfing the microorganism, which is then destroyed by the neutrophil (Figure 12.3.5.1).

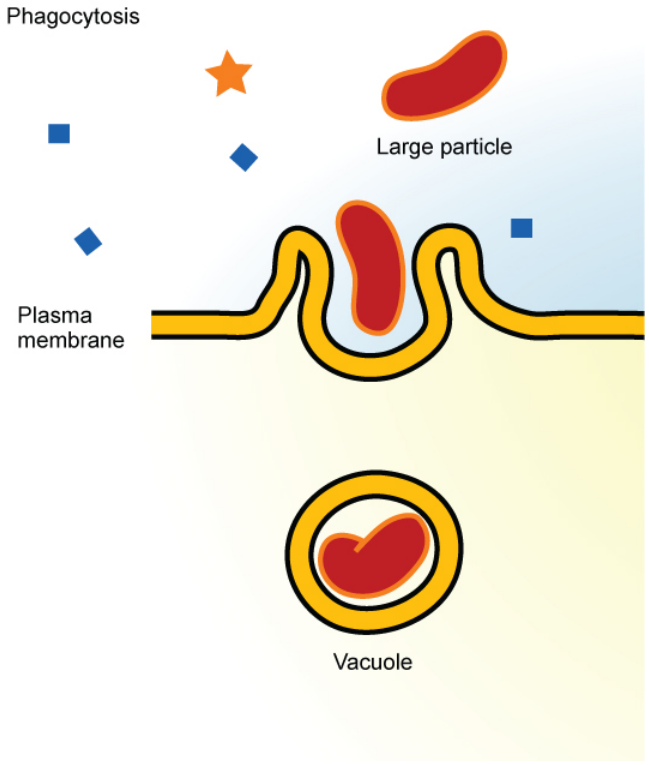


Figure 12.3.5.1: In phagocytosis, the cell membrane surrounds the particle and engulfs it. (credit: Mariana Ruiz Villareal)

In preparation for phagocytosis, a portion of the inward-facing surface of the plasma membrane becomes coated with a protein called clathrin, which stabilizes this section of the membrane. The coated portion of the membrane then extends from the body of the cell and surrounds the particle, eventually enclosing it. Once the vesicle containing the particle is enclosed within the cell, the clathrin disengages from the membrane and the vesicle merges with a lysosome for the breakdown of the material in the newly

formed compartment (endosome). When accessible nutrients from the degradation of the vesicular contents have been extracted, the newly formed endosome merges with the plasma membrane and releases its contents into the extracellular fluid. The endosomal membrane again becomes part of the plasma membrane.

Pinocytosis

A variation of endocytosis is called pinocytosis. This literally means “cell drinking” and was named at a time when the assumption was that the cell was purposefully taking in extracellular fluid. In reality, this is a process that takes in molecules, including water, which the cell needs from the extracellular fluid. Pinocytosis results in a much smaller vesicle than does phagocytosis, and the vesicle does not need to merge with a lysosome (Figure 12.3.5.2).

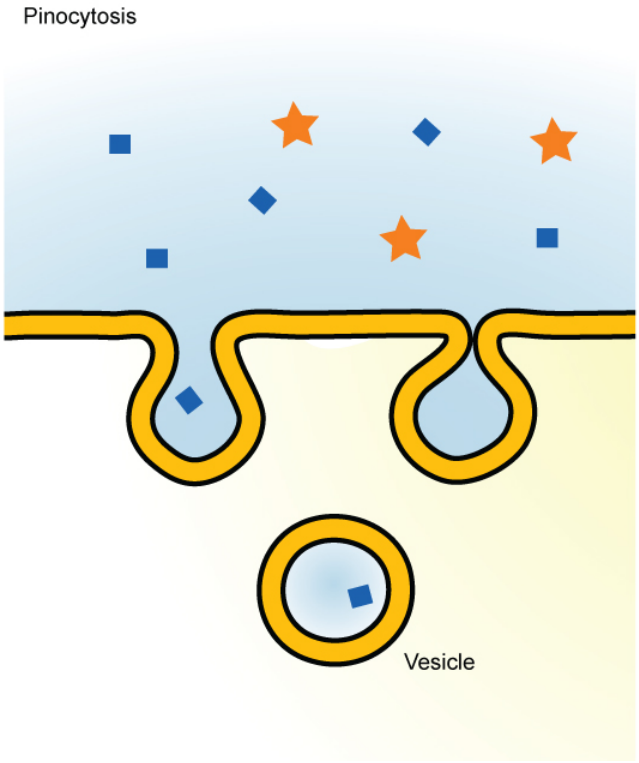


Figure 12.3.5.2: In pinocytosis, the cell membrane invaginates, surrounds a small volume of fluid, and pinches off. (credit: Mariana Ruiz Villareal)

A variation of pinocytosis is called potocytosis. This process uses a coating protein, called caveolin, on the cytoplasmic side of the plasma membrane, which performs a similar function to clathrin. The cavities in the plasma membrane that form the vacuoles have membrane receptors and lipid rafts in addition to caveolin. The vacuoles or vesicles formed in caveolae (singular caveola) are smaller than those in pinocytosis. Potocytosis is used to bring small molecules into the cell and to transport these molecules through the cell for their release on the other side of the cell, a process called transcytosis.

Receptor-mediated Endocytosis

A targeted variation of endocytosis employs receptor proteins in the plasma membrane that have a specific binding affinity for certain substances (Figure 12.3.5.3).

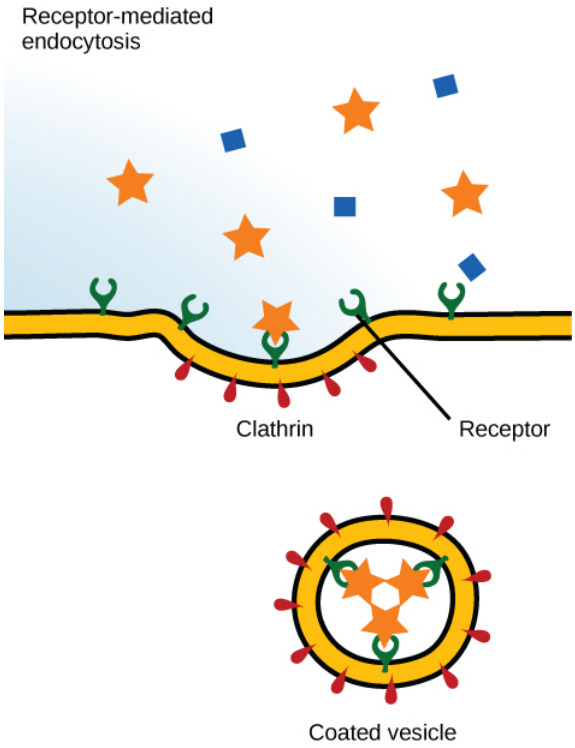
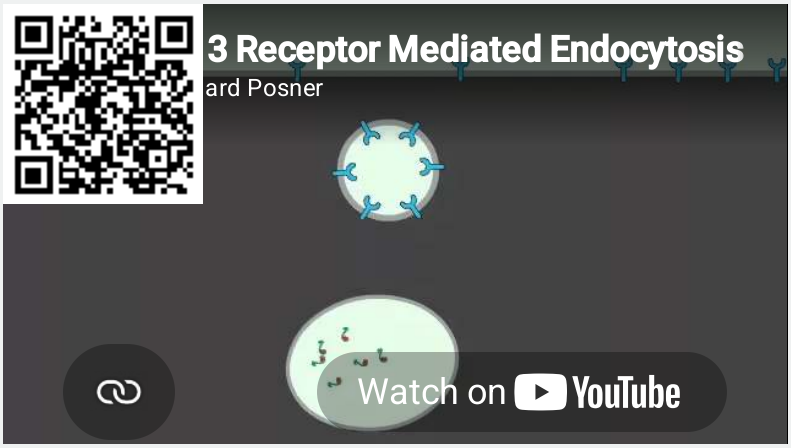


Figure 12.3.5.3: In receptor-mediated endocytosis, uptake of substances by the cell is targeted to a single type of substance that binds to the receptor on the external surface of the cell membrane. (credit: modification of work by Mariana Ruiz Villareal)

In receptor-mediated endocytosis, as in phagocytosis, clathrin is attached to the cytoplasmic side of the plasma membrane. If uptake of a compound is dependent on receptor-mediated endocytosis and the process is ineffective, the material will not be removed from the tissue fluids or blood. Instead, it will stay in those fluids and increase in concentration. Some human diseases are caused by the failure of receptor-mediated endocytosis. For example, the form of cholesterol termed low-density lipoprotein or LDL (also referred to as “bad” cholesterol) is removed from the blood by receptor-mediated endocytosis. In the human genetic disease familial hypercholesterolemia, the LDL receptors are defective or missing entirely. People with this condition have life-threatening levels of cholesterol in their blood, because their cells cannot clear LDL particles from their blood.

Although receptor-mediated endocytosis is designed to bring specific substances that are normally found in the extracellular fluid into the cell, other substances may gain entry into the cell at the same site. Flu viruses, diphtheria, and cholera toxin all have sites that cross-react with normal receptor-binding sites and gain entry into cells.

Link to Learning



Video 12.3.5.1: See receptor-mediated endocytosis in action, and click on different parts for a focused animation.

Exocytosis

The reverse process of moving material into a cell is the process of exocytosis. Exocytosis is the opposite of the processes discussed above in that its purpose is to expel material from the cell into the extracellular fluid. Waste material is enveloped in a membrane and fuses with the interior of the plasma membrane. This fusion opens the membranous envelope on the exterior of the cell, and the waste material is expelled into the extracellular space (Figure 12.3.5.4). Other examples of cells releasing molecules via exocytosis include the secretion of proteins of the extracellular matrix and secretion of neurotransmitters into the synaptic cleft by synaptic vesicles.

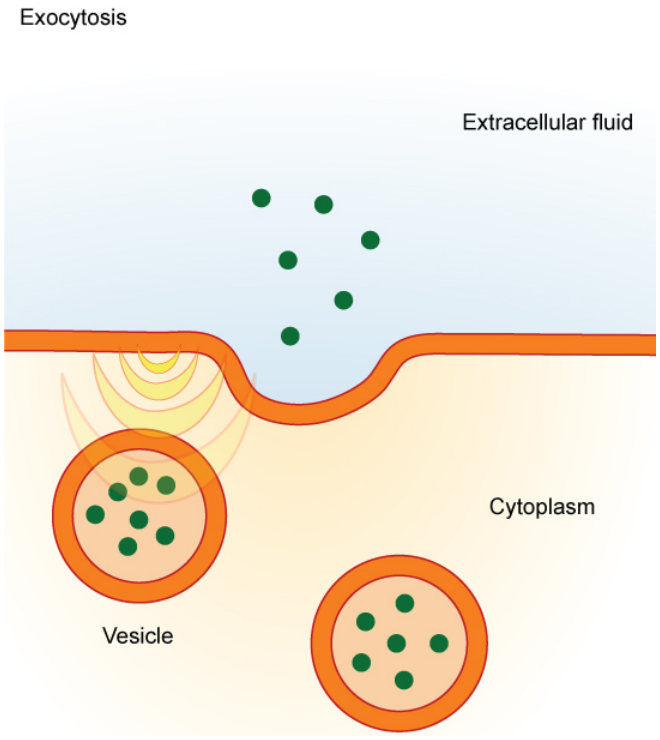


Figure 12.3.5.4: In exocytosis, vesicles containing substances fuse with the plasma membrane. The contents are then released to the exterior of the cell. (credit: modification of work by Mariana Ruiz Villareal)

Table 12.3.5.1: Methods of transport, Energy requirements and types of Material transported.

Transport Method	Active/Passive	Material Transported
Diffusion	Passive	Small-molecular weight material
Osmosis	Passive	Water
Facilitated transport/diffusion	Passive	Sodium, potassium, calcium, glucose
Primary active transport	Active	Sodium, potassium, calcium
Secondary active transport	Active	Amino acids, lactose
Phagocytosis	Active	Large macromolecules, whole cells, or cellular structures
Pinocytosis and potocytosis	Active	Small molecules (liquids/water)
Receptor-mediated endocytosis	Active	Large quantities of macromolecules

Summary

Active transport methods require the direct use of ATP to fuel the transport. Large particles, such as macromolecules, parts of cells, or whole cells, can be engulfed by other cells in a process called phagocytosis. In phagocytosis, a portion of the membrane

invaginates and flows around the particle, eventually pinching off and leaving the particle entirely enclosed by an envelope of plasma membrane. Vesicle contents are broken down by the cell, with the particles either used as food or dispatched. Pinocytosis is a similar process on a smaller scale. The plasma membrane invaginates and pinches off, producing a small envelope of fluid from outside the cell. Pinocytosis imports substances that the cell needs from the extracellular fluid. The cell expels waste in a similar but reverse manner: it pushes a membranous vacuole to the plasma membrane, allowing the vacuole to fuse with the membrane and incorporate itself into the membrane structure, releasing its contents to the exterior.

Glossary

caveolin
: protein that coats the cytoplasmic side of the plasma membrane and participates in the process of liquid update by potocytosis

clathrin
: protein that coats the inward-facing surface of the plasma membrane and assists in the formation of specialized structures, like coated pits, for phagocytosis

endocytosis
: type of active transport that moves substances, including fluids and particles, into a cell

exocytosis
: process of passing bulk material out of a cell

pinocytosis
: a variation of endocytosis that imports macromolecules that the cell needs from the extracellular fluid

potocytosis
: variation of pinocytosis that uses a different coating protein (caveolin) on the cytoplasmic side of the plasma membrane

receptor-mediated endocytosis
: variation of endocytosis that involves the use of specific binding proteins in the plasma membrane for specific molecules or particles, and clathrin-coated pits that become clathrin-coated vesicles

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12.3.E: Structure and Function of Plasma Membranes (Exercises)

5.1: Components and Structure

Among the most sophisticated functions of the plasma membrane is the ability to transmit signals by means of complex, integral proteins known as receptors. These proteins act both as receivers of extracellular inputs and as activators of intracellular processes. These membrane receptors provide extracellular attachment sites for effectors like hormones and growth factors, and they activate intracellular response cascades when their effectors are bound.

Review Questions

Which plasma membrane component can be either found on its surface or embedded in the membrane structure?

A. protein
B. cholesterol
C. carbohydrate
D. phospholipid

Answer

A

Which characteristic of a phospholipid contributes to the fluidity of the membrane?

A. its head
B. cholesterol
C. a saturated fatty acid tail
D. double bonds in the fatty acid tail

Answer

D

What is the primary function of carbohydrates attached to the exterior of cell membranes?

A. identification of the cell
B. flexibility of the membrane
C. strengthening the membrane
D. channels through membrane

Answer

A

Free Response

Why is it advantageous for the cell membrane to be fluid in nature?

Answer

The fluid characteristic of the cell membrane allows greater flexibility to the cell than it would if the membrane were rigid. It also allows the motion of membrane components, required for some types of membrane transport.

Why do phospholipids tend to spontaneously orient themselves into something resembling a membrane?

Answer

The hydrophobic, nonpolar regions must align with each other in order for the structure to have minimal potential energy and, consequently, higher stability. The fatty acid tails of the phospholipids cannot mix with water, but the phosphate “head” of the molecule can. Thus, the head orients to water, and the tail to other lipids.

5.2: Passive Transport

Plasma membranes must allow certain substances to enter and leave a cell, and prevent some harmful materials from entering and some essential materials from leaving. In other words, plasma membranes are selectively permeable—they allow some substances to pass through, but not others. If they were to lose this selectivity, the cell would no longer be able to sustain itself, and it would be destroyed. Some cells require larger amounts of specific substances than do other cells.

Review Questions

Water moves via osmosis _____.

A. throughout the cytoplasm
B. from an area with a high concentration of other solutes to a lower one
C. from an area with a high concentration of water to one of lower concentration
D. from an area with a low concentration of water to one of higher concentration

Answer

C

The principal force driving movement in diffusion is the _____.

A. temperature
B. particle size
C. concentration gradient
D. membrane surface area

Answer

C

What problem is faced by organisms that live in fresh water?

A. Their bodies tend to take in too much water.
B. They have no way of controlling their tonicity.
C. Only salt water poses problems for animals that live in it.
D. Their bodies tend to lose too much water to their environment.

Answer

A

Free Response

Discuss why the following affect the rate of diffusion: molecular size, temperature, solution density, and the distance that must be traveled.

Answer

Heavy molecules move more slowly than lighter ones. It takes more energy in the medium to move them along. Increasing or decreasing temperature increases or decreases the energy in the medium, affecting molecular movement. The denser a solution is, the harder it is for molecules to move through it, causing diffusion to slow down due to friction. Living cells

require a steady supply of nutrients and a steady rate of waste removal. If the distance these substances need to travel is too great, diffusion cannot move nutrients and waste materials efficiently to sustain life.

Why does water move through a membrane?

Answer

Water moves through a membrane in osmosis because there is a concentration gradient across the membrane of solute and solvent. The solute cannot effectively move to balance the concentration on both sides of the membrane, so water moves to achieve this balance.

Both of the regular intravenous solutions administered in medicine, normal saline and lactated Ringer's solution, are isotonic. Why is this important?

Answer

Injection of isotonic solutions ensures that there will be no perturbation of the osmotic balance, and no water taken from tissues or added to them from the blood.

5.3: Active Transport

Active transport mechanisms require the use of the cell's energy, usually in the form of adenosine triphosphate (ATP). If a substance must move into the cell against its concentration gradient—that is, if the concentration of the substance inside the cell is greater than its concentration in the extracellular fluid (and vice versa)—the cell must use energy to move the substance. Some active transport mechanisms move small-molecular weight materials, such as ions, through the membrane.

Review Questions

Active transport must function continuously because _____.

A. plasma membranes wear out
B. not all membranes are amphiphilic
C. facilitated transport opposes active transport
D. diffusion is constantly moving solutes in opposite directions

Answer

D

How does the sodium-potassium pump make the interior of the cell negatively charged?

A. by expelling anions
B. by pulling in anions
C. by expelling more cations than are taken in
D. by taking in and expelling an equal number of cations

Answer

C

What is the combination of an electrical gradient and a concentration gradient called?

A. potential gradient
B. electrical potential
C. concentration potential
D. electrochemical gradient

Answer

D

Free Response

Where does the cell get energy for active transport processes?

Answer

The cell harvests energy from ATP produced by its own metabolism to power active transport processes, such as the activity of pumps.

How does the sodium-potassium pump contribute to the net negative charge of the interior of the cell?

Answer

The sodium-potassium pump forces out three (positive) Na^+ ions for every two (positive) K^+ ions it pumps in, thus the cell loses a positive charge at every cycle of the pump.

5.4: Bulk Transport

In addition to moving small ions and molecules through the membrane, cells also need to remove and take in larger molecules and particles (see Table 5.4.1 for examples). Some cells are even capable of engulfing entire unicellular microorganisms. You might have correctly hypothesized that the uptake and release of large particles by the cell requires energy. A large particle, however, cannot pass through the membrane, even with energy supplied by the cell.

Review Questions

What happens to the membrane of a vesicle after exocytosis?

A. It leaves the cell.
B. It is disassembled by the cell.
C. It fuses with and becomes part of the plasma membrane.
D. It is used again in another exocytosis event.

Answer

C

Which transport mechanism can bring whole cells into a cell?

A. pinocytosis
B. phagocytosis
C. facilitated transport
D. primary active transport

Answer

B

In what important way does receptor-mediated endocytosis differ from phagocytosis?

A. It transports only small amounts of fluid.
B. It does not involve the pinching off of membrane.
C. It brings in only a specifically targeted substance.
D. It brings substances into the cell, while phagocytosis removes substances.

Answer

C

Free Response

Why is it important that there are different types of proteins in plasma membranes for the transport of materials into and out of a cell?

Answer

The proteins allow a cell to select what compound will be transported, meeting the needs of the cell and not bringing in anything else.

Why do ions have a difficult time getting through plasma membranes despite their small size?

Answer

Ions are charged, and consequently, they are hydrophilic and cannot associate with the lipid portion of the membrane. Ions must be transported by carrier proteins or ion channels.

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CHAPTER OVERVIEW

12.4: Cell Communication

While the necessity for cellular communication in larger organisms seems obvious, even single-celled organisms communicate with each other. Yeast cells signal each other to aid mating. Some forms of bacteria coordinate their actions in order to form large complexes called biofilms or to organize the production of toxins to remove competing organisms. The ability of cells to communicate through chemical signals originated in single cells and was essential for the evolution of multicellular organisms. The efficient and error-free function of communication systems is vital for all life as we know it.

12.4.1: Prelude to Cell Communication
12.4.2: Signaling Molecules and Cellular Receptors
12.4.3: Propagation of the Signal
12.4.4: Response to the Signal
12.4.5: Signaling in Single-Celled Organisms
12.4.E: Cell Communication (Exercises)

Contributors

- Connie Rye (East Mississippi Community College), Robert Wise (University of Wisconsin, Oshkosh), Vladimir Jurukovski (Suffolk County Community College), Jean DeSaix (University of North Carolina at Chapel Hill), Jung Choi (Georgia Institute of Technology), Yael Avissar (Rhode Island College) among other contributing authors. Original content by OpenStax (CC BY 4.0; Download for free at http://cnx.org/contents/185cbf87-c72...f21b5eabd@9.87).

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12.4.1: Prelude to Cell Communication



Figure 12.4.1.1: Have you ever become separated from a friend while in a crowd? If so, you know the challenge of searching for someone when surrounded by thousands of other people. If you and your friend have cell phones, your chances of finding each other are good. A cell phone's ability to send and receive messages makes it an ideal communication device. (credit: modification of work by Vincent and Bella Productions)

Imagine what life would be like if you and the people around you could not communicate. You would not be able to express your wishes to others, nor could you ask questions to find out more about your environment. Social organization is dependent on communication between the individuals that comprise that society; without communication, society would fall apart.

As with people, it is vital for individual cells to be able to interact with their environment. This is true whether a cell is growing by itself in a pond or is one of many cells that form a larger organism. In order to properly respond to external stimuli, cells have developed complex mechanisms of communication that can receive a message, transfer the information across the plasma membrane, and then produce changes within the cell in response to the message.

In multicellular organisms, cells send and receive chemical messages constantly to coordinate the actions of distant organs, tissues, and cells. The ability to send messages quickly and efficiently enables cells to coordinate and fine-tune their functions.

While the necessity for cellular communication in larger organisms seems obvious, even single-celled organisms communicate with each other. Yeast cells signal each other to aid mating. Some forms of bacteria coordinate their actions in order to form large complexes called biofilms or to organize the production of toxins to remove competing organisms. The ability of cells to communicate through chemical signals originated in single cells and was essential for the evolution of multicellular organisms. The efficient and error-free function of communication systems is vital for all life as we know it.

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12.4.2: Signaling Molecules and Cellular Receptors

Skills to Develop

- Describe four types of signaling found in multicellular organisms
- Compare internal receptors with cell-surface receptors
- Recognize the relationship between a ligand’s structure and its mechanism of action

There are two kinds of communication in the world of living cells. Communication between cells is called intercellular signaling, and communication within a cell is called intracellular signaling. An easy way to remember the distinction is by understanding the Latin origin of the prefixes: inter- means "between" (for example, intersecting lines are those that cross each other) and intra- means "inside" (like intravenous).

Chemical signals are released by signaling cells in the form of small, usually volatile or soluble molecules called ligands. A ligand is a molecule that binds another specific molecule, in some cases, delivering a signal in the process. Ligands can thus be thought of as signaling molecules. Ligands interact with proteins in target cells, which are cells that are affected by chemical signals; these proteins are also called receptors. Ligands and receptors exist in several varieties; however, a specific ligand will have a specific receptor that typically binds only that ligand.

Forms of Signaling

There are four categories of chemical signaling found in multicellular organisms: paracrine signaling, endocrine signaling, autocrine signaling, and direct signaling across gap junctions (Figure 12.4.2.1). The main difference between the different categories of signaling is the distance that the signal travels through the organism to reach the target cell. Not all cells are affected by the same signals.

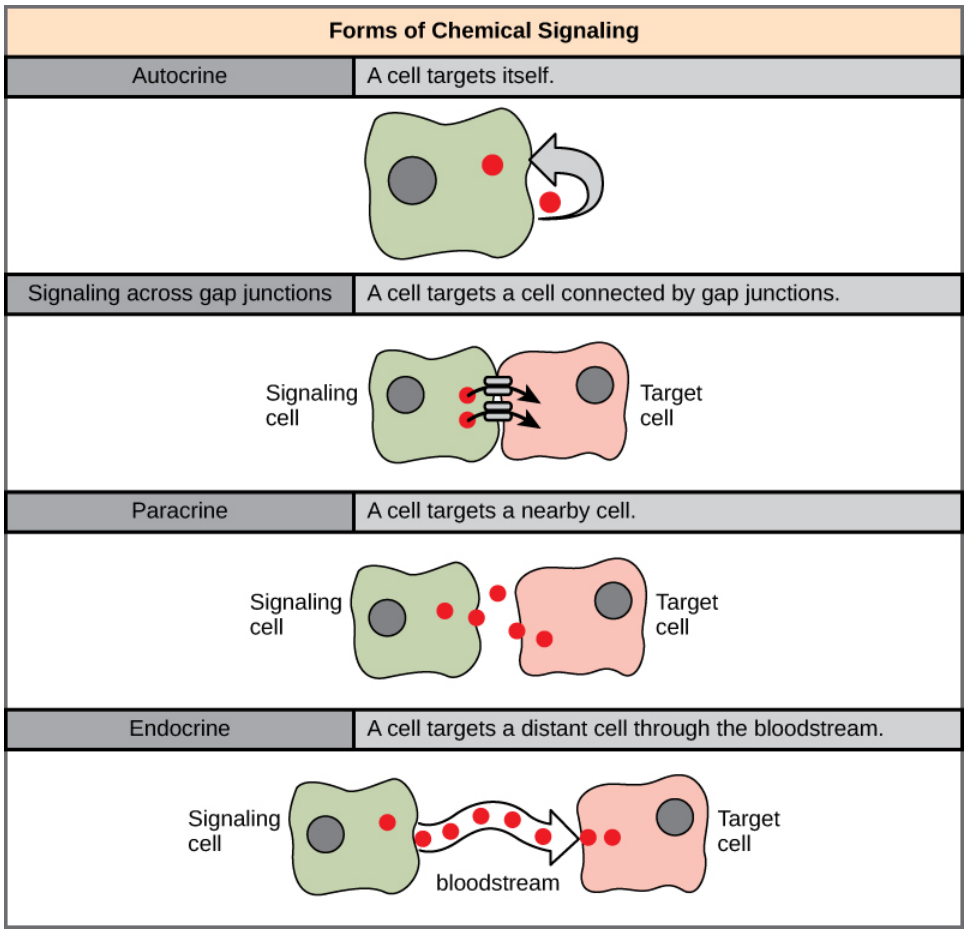


Figure 12.4.2.1: In chemical signaling, a cell may target itself (autocrine signaling), a cell connected by gap junctions, a nearby cell (paracrine signaling), or a distant cell (endocrine signaling). Paracrine signaling acts on nearby cells, endocrine signaling uses the circulatory system to transport ligands, and autocrine signaling acts on the signaling cell. Signaling via gap junctions involves signaling molecules moving directly between adjacent cells.

Paracrine Signaling

Signals that act locally between cells that are close together are called *paracrine signals*. Paracrine signals move by diffusion through the extracellular matrix. These types of signals usually elicit quick responses that last only a short amount of time. In order to keep the response localized, paracrine ligand molecules are normally quickly degraded by enzymes or removed by neighboring cells. Removing the signals will reestablish the concentration gradient for the signal, allowing them to quickly diffuse through the intracellular space if released again.

One example of paracrine signaling is the transfer of signals across synapses between nerve cells. A nerve cell consists of a cell body, several short, branched extensions called dendrites that receive stimuli, and a long extension called an axon, which transmits signals to other nerve cells or muscle cells. The junction between nerve cells where signal transmission occurs is called a synapse. A synaptic signal is a chemical signal that travels between nerve cells. Signals within the nerve cells are propagated by fast-moving electrical impulses. When these impulses reach the end of the axon, the signal continues on to a dendrite of the next cell by the release of chemical ligands called neurotransmitters by the presynaptic cell (the cell emitting the signal). The neurotransmitters are transported across the very small distances between nerve cells, which are called chemical synapses (Figure 12.4.2.2). The small distance between nerve cells allows the signal to travel quickly; this enables an immediate response, such as, Take your hand off the stove!

When the neurotransmitter binds the receptor on the surface of the postsynaptic cell, the electrochemical potential of the target cell changes, and the next electrical impulse is launched. The neurotransmitters that are released into the chemical synapse are degraded quickly or get reabsorbed by the presynaptic cell so that the recipient nerve cell can recover quickly and be prepared to respond rapidly to the next synaptic signal.

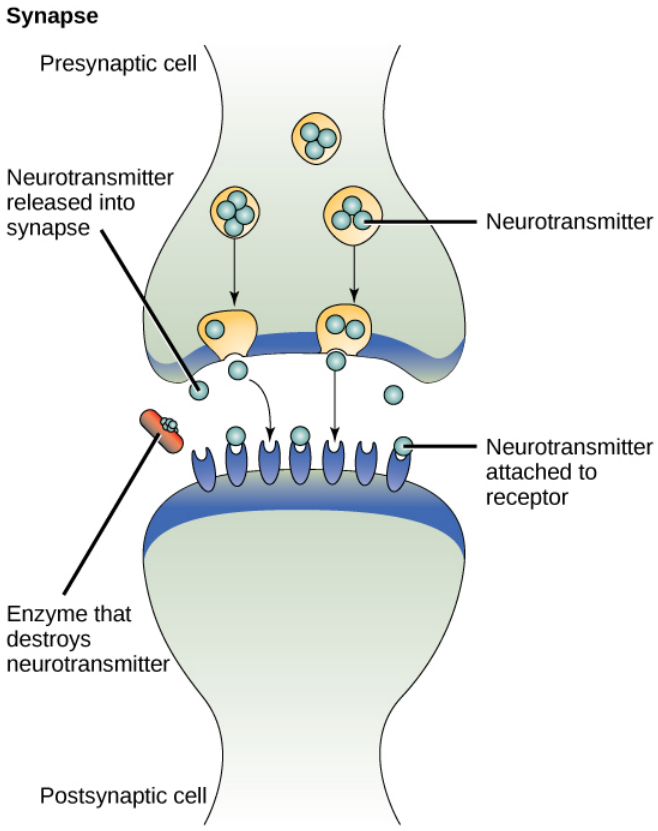


Figure 12.4.2.2: The distance between the presynaptic cell and the postsynaptic cell—called the synaptic gap—is very small and allows for rapid diffusion of the neurotransmitter. Enzymes in the synapatic cleft degrade some types of neurotransmitters to terminate the signal.

Endocrine Signaling

Signals from distant cells are called endocrine signals, and they originate from endocrine cells. (In the body, many endocrine cells are located in endocrine glands, such as the thyroid gland, the hypothalamus, and the pituitary gland.) These types of signals usually produce a slower response but have a longer-lasting effect. The ligands released in endocrine signaling are called hormones, signaling molecules that are produced in one part of the body but affect other body regions some distance away.

Hormones travel the large distances between endocrine cells and their target cells via the bloodstream, which is a relatively slow way to move throughout the body. Because of their form of transport, hormones get diluted and are present in low concentrations when they act on their target cells. This is different from paracrine signaling, in which local concentrations of ligands can be very high.

Autocrine Signaling

Autocrine signals are produced by signaling cells that can also bind to the ligand that is released. This means the signaling cell and the target cell can be the same or a similar cell (the prefix *auto-* means self, a reminder that the signaling cell sends a signal to itself). This type of signaling often occurs during the early development of an organism to ensure that cells develop into the correct tissues and take on the proper function. Autocrine signaling also regulates pain sensation and inflammatory responses. Further, if a cell is infected with a virus, the cell can signal itself to undergo programmed cell death, killing the virus in the process. In some cases, neighboring cells of the same type are also influenced by the released ligand. In embryological development, this process of stimulating a group of neighboring cells may help to direct the differentiation of identical cells into the same cell type, thus ensuring the proper developmental outcome.

Direct Signaling Across Gap Junctions

Gap junctions in animals and plasmodesmata in plants are connections between the plasma membranes of neighboring cells. These water-filled channels allow small signaling molecules, called intracellular mediators, to diffuse between the two cells. Small

molecules, such as calcium ions (Ca^{2+}), are able to move between cells, but large molecules like proteins and DNA cannot fit through the channels. The specificity of the channels ensures that the cells remain independent but can quickly and easily transmit signals. The transfer of signaling molecules communicates the current state of the cell that is directly next to the target cell; this allows a group of cells to coordinate their response to a signal that only one of them may have received. In plants, plasmodesmata are ubiquitous, making the entire plant into a giant, communication network.

Types of Receptors

Receptors are protein molecules in the target cell or on its surface that bind ligand. There are two types of receptors, internal receptors and cell-surface receptors.

Internal receptors

Internal receptors, also known as intracellular or cytoplasmic receptors, are found in the cytoplasm of the cell and respond to hydrophobic ligand molecules that are able to travel across the plasma membrane. Once inside the cell, many of these molecules bind to proteins that act as regulators of mRNA synthesis (transcription) to mediate gene expression. Gene expression is the cellular process of transforming the information in a cell's DNA into a sequence of amino acids, which ultimately forms a protein. When the ligand binds to the internal receptor, a conformational change is triggered that exposes a DNA-binding site on the protein. The ligand-receptor complex moves into the nucleus, then binds to specific regulatory regions of the chromosomal DNA and promotes the initiation of transcription (Figure 12.4.2.3). Transcription is the process of copying the information in a cells DNA into a special form of RNA called messenger RNA (mRNA); the cell uses information in the mRNA (which moves out into the cytoplasm and associates with ribosomes) to link specific amino acids in the correct order, producing a protein. Internal receptors can directly influence gene expression without having to pass the signal on to other receptors or messengers.

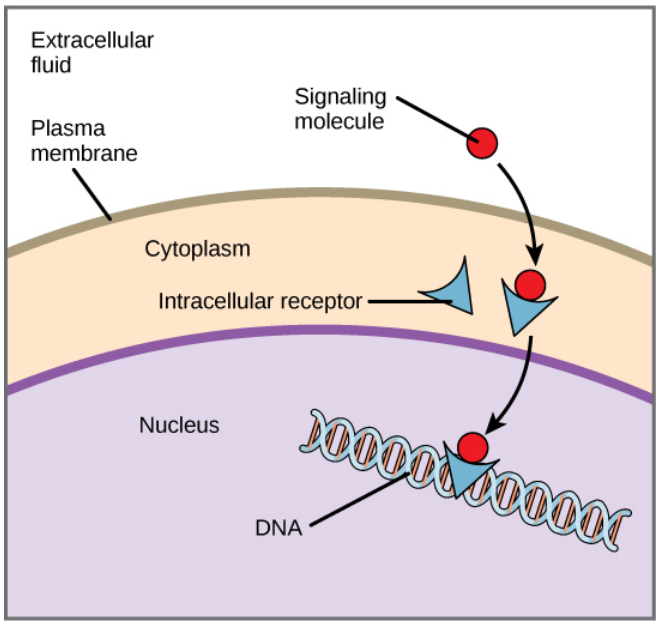


Figure 12.4.2.3: Hydrophobic signaling molecules typically diffuse across the plasma membrane and interact with intracellular receptors in the cytoplasm. Many intracellular receptors are transcription factors that interact with DNA in the nucleus and regulate gene expression.

Cell-Surface Receptors

Cell-surface receptors, also known as transmembrane receptors, are cell surface, membrane-anchored (integral) proteins that bind to external ligand molecules. This type of receptor spans the plasma membrane and performs signal transduction, in which an extracellular signal is converted into an intercellular signal. Ligands that interact with cell-surface receptors do not have to enter the cell that they affect. Cell-surface receptors are also called cell-specific proteins or markers because they are specific to individual cell types.

Because cell-surface receptor proteins are fundamental to normal cell functioning, it should come as no surprise that a malfunction in any one of these proteins could have severe consequences. Errors in the protein structures of certain receptor molecules have

been shown to play a role in hypertension (high blood pressure), asthma, heart disease, and cancer.

Each cell-surface receptor has three main components: an external ligand-binding domain, a hydrophobic membrane-spanning region, and an intracellular domain inside the cell. The ligand-binding domain is also called the extracellular domain. The size and extent of each of these domains vary widely, depending on the type of receptor.

Evolution Connection: How Viruses Recognize a Host

Unlike living cells, many viruses do not have a plasma membrane or any of the structures necessary to sustain life. Some viruses are simply composed of an inert protein shell containing DNA or RNA. To reproduce, viruses must invade a living cell, which serves as a host, and then take over the hosts cellular apparatus. But how does a virus recognize its host?

Viruses often bind to cell-surface receptors on the host cell. For example, the virus that causes human influenza (flu) binds specifically to receptors on membranes of cells of the respiratory system. Chemical differences in the cell-surface receptors among hosts mean that a virus that infects a specific species (for example, humans) cannot infect another species (for example, chickens).

However, viruses have very small amounts of DNA or RNA compared to humans, and, as a result, viral reproduction can occur rapidly. Viral reproduction invariably produces errors that can lead to changes in newly produced viruses; these changes mean that the viral proteins that interact with cell-surface receptors may evolve in such a way that they can bind to receptors in a new host. Such changes happen randomly and quite often in the reproductive cycle of a virus, but the changes only matter if a virus with new binding properties comes into contact with a suitable host. In the case of influenza, this situation can occur in settings where animals and people are in close contact, such as poultry and swine farms.[1] Once a virus jumps to a new host, it can spread quickly. Scientists watch newly appearing viruses (called emerging viruses) closely in the hope that such monitoring can reduce the likelihood of global viral epidemics.

Cell-surface receptors are involved in most of the signaling in multicellular organisms. There are three general categories of cell-surface receptors: ion channel-linked receptors, G-protein-linked receptors, and enzyme-linked receptors.

Ion channel-linked receptors bind a ligand and open a channel through the membrane that allows specific ions to pass through. To form a channel, this type of cell-surface receptor has an extensive membrane-spanning region. In order to interact with the phospholipid fatty acid tails that form the center of the plasma membrane, many of the amino acids in the membrane-spanning region are hydrophobic in nature. Conversely, the amino acids that line the inside of the channel are hydrophilic to allow for the passage of water or ions. When a ligand binds to the extracellular region of the channel, there is a conformational change in the proteins structure that allows ions such as sodium, calcium, magnesium, and hydrogen to pass through (Figure 12.4.2.4).

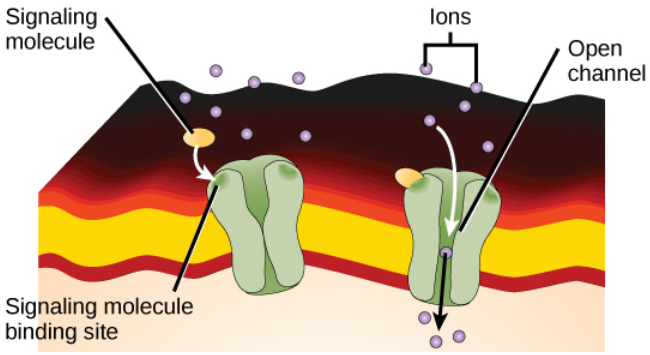


Figure 12.4.2.4: Gated ion channels form a pore through the plasma membrane that opens when the signaling molecule binds. The open pore then allows ions to flow into or out of the cell.

G-protein-linked receptors bind a ligand and activate a membrane protein called a G-protein. The activated G-protein then interacts with either an ion channel or an enzyme in the membrane (Figure 12.4.2.5). All G-protein-linked receptors have seven transmembrane domains, but each receptor has its own specific extracellular domain and G-protein-binding site.

Cell signaling using G-protein-linked receptors occurs as a cyclic series of events. Before the ligand binds, the inactive G-protein can bind to a newly revealed site on the receptor specific for its binding. Once the G-protein binds to the receptor, the resultant shape change activates the G-protein, which releases GDP and picks up GTP. The subunits of the G-protein then split into the α

subunit and the $\beta\gamma$ subunit. One or both of these G-protein fragments may be able to activate other proteins as a result. After awhile, the GTP on the active α subunit of the G-protein is hydrolyzed to GDP and the $\beta\gamma$ subunit is deactivated. The subunits reassociate to form the inactive G-protein and the cycle begins anew.

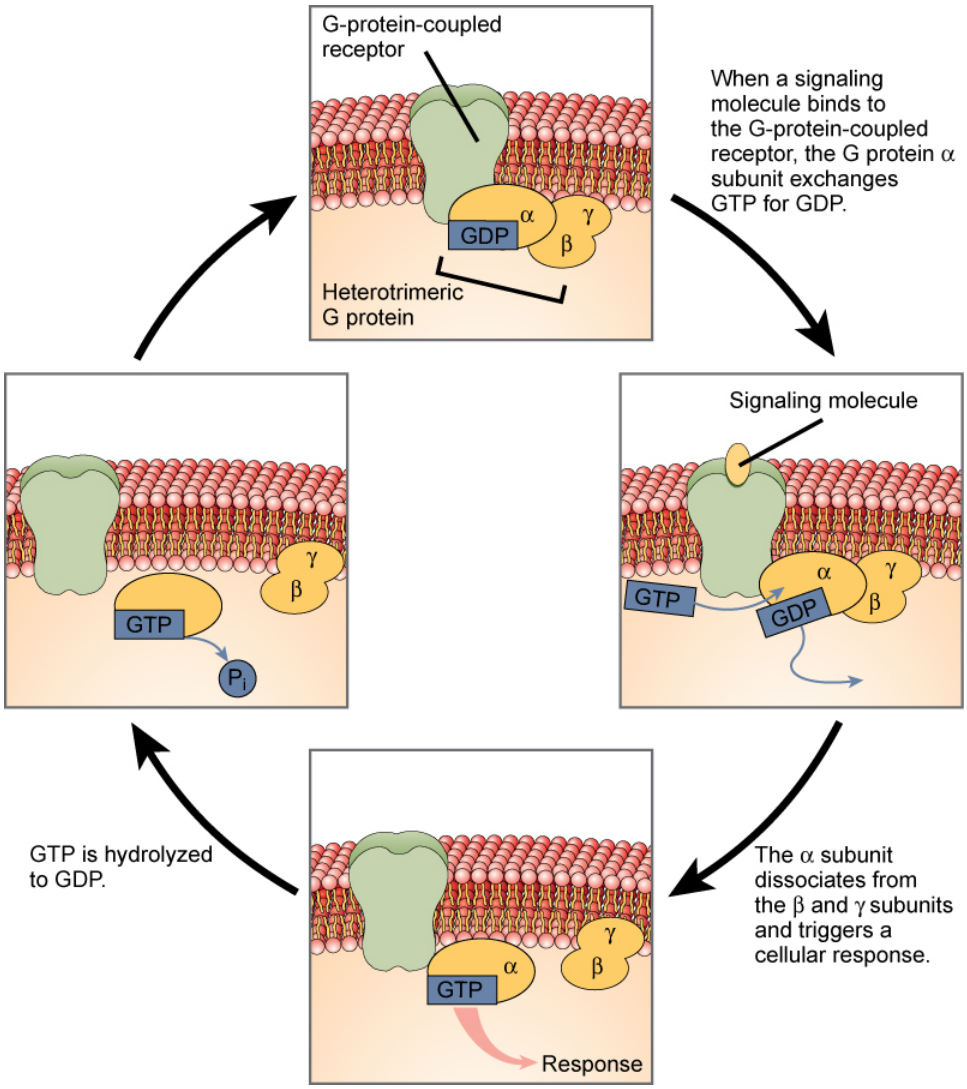
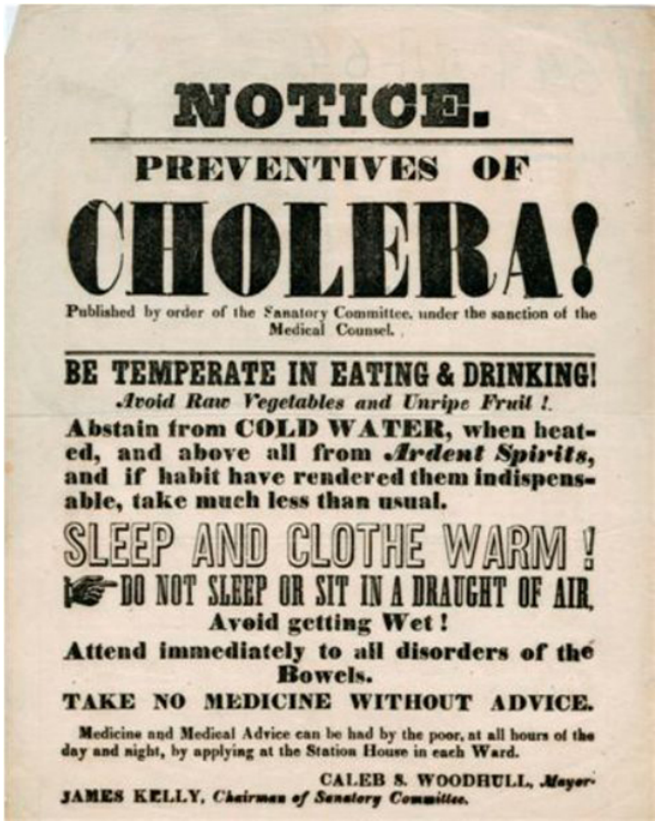


Figure 12.4.2.5: Heterotrimeric G proteins have three subunits: α, β, and γ. When a signaling molecule binds to a G-protein-coupled receptor in the plasma membrane, a GDP molecule associated with the α subunit is exchanged for GTP. The β and γ subunits dissociate from the α subunit, and a cellular response is triggered either by the α subunit or the dissociated $\beta\gamma$ pair. Hydrolysis of GTP to GDP terminates the signal.

G-protein-linked receptors have been extensively studied and much has been learned about their roles in maintaining health. Bacteria that are pathogenic to humans can release poisons that interrupt specific G-protein-linked receptor function, leading to illnesses such as pertussis, botulism, and cholera. In cholera (Figure 12.4.2.6), for example, the water-borne bacterium *Vibrio cholerae* produces a toxin, choleragen, that binds to cells lining the small intestine. The toxin then enters these intestinal cells, where it modifies a G-protein that controls the opening of a chloride channel and causes it to remain continuously active, resulting in large losses of fluids from the body and potentially fatal dehydration as a result.



NOTICE.

PREVENTIVES OF

CHOLERA!

Published by order of the Sanatory Committee, under the sanction of the Medical Counsel.

BE TEMPERATE IN EATING & DRINKING!

Avoid Raw Vegetables and Unripe Fruit !.

Abstain from COLD WATER, when heated, and above all from *Ardent Spirits*, and if habit have rendered them indispensable, take much less than usual.

SLEEP AND CLOTHE WARM !

DO NOT SLEEP OR SIT IN A DRAUGHT OF AIR.

Avoid getting Wet !

Attend immediately to all disorders of the Bowels.

TAKE NO MEDICINE WITHOUT ADVICE.

Medicine and Medical Advice can be had by the poor, at all hours of the day and night, by applying at the Station House in each Ward.

CALEB S. WOODHULL, *Mayor.*

JAMES KELLY, *Chairman of Sanatory Committee.*

Figure 12.4.2.6: Transmitted primarily through contaminated drinking water, cholera is a major cause of death in the developing world and in areas where natural disasters interrupt the availability of clean water. The cholera bacterium, *Vibrio cholerae*, creates a toxin that modifies G-protein-mediated cell signaling pathways in the intestines. Modern sanitation eliminates the threat of cholera outbreaks, such as the one that swept through New York City in 1866. This poster from that era shows how, at that time, the way that the disease was transmitted was not understood. (credit: New York City Sanitary Commission)

Enzyme-linked receptors are cell-surface receptors with intracellular domains that are associated with an enzyme. In some cases, the intracellular domain of the receptor itself is an enzyme. Other enzyme-linked receptors have a small intracellular domain that interacts directly with an enzyme. The enzyme-linked receptors normally have large extracellular and intracellular domains, but the membrane-spanning region consists of a single alpha-helical region of the peptide strand. When a ligand binds to the extracellular domain, a signal is transferred through the membrane, activating the enzyme. Activation of the enzyme sets off a chain of events within the cell that eventually leads to a response. One example of this type of enzyme-linked receptor is the tyrosine kinase receptor (Figure 12.4.2.7). A kinase is an enzyme that transfers phosphate groups from ATP to another protein. The tyrosine kinase receptor transfers phosphate groups to tyrosine molecules (tyrosine residues). First, signaling molecules bind to the extracellular domain of two nearby tyrosine kinase receptors. The two neighboring receptors then bond together, or dimerize. Phosphates are then added to tyrosine residues on the intracellular domain of the receptors (phosphorylation). The phosphorylated residues can then transmit the signal to the next messenger within the cytoplasm.

Art Connection

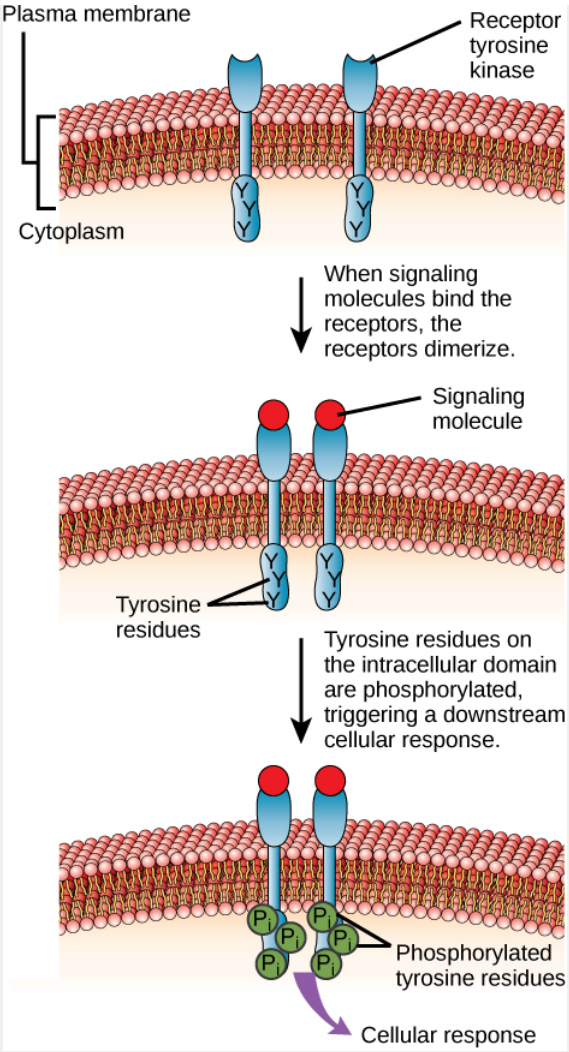


Figure 12.4.2.7: A receptor tyrosine kinase is an enzyme-linked receptor with a single transmembrane region, and extracellular and intracellular domains. Binding of a signaling molecule to the extracellular domain causes the receptor to dimerize. Tyrosine residues on the intracellular domain are then autophosphorylated, triggering a downstream cellular response. The signal is terminated by a phosphatase that removes the phosphates from the phosphotyrosine residues.

HER2 is a receptor tyrosine kinase. In 30 percent of human breast cancers, HER2 is permanently activated, resulting in unregulated cell division. Lapatinib, a drug used to treat breast cancer, inhibits HER2 receptor tyrosine kinase autophosphorylation (the process by which the receptor adds phosphates onto itself), thus reducing tumor growth by 50 percent. Besides autophosphorylation, which of the following steps would be inhibited by Lapatinib?

A. Signaling molecule binding, dimerization, and the downstream cellular response
B. Dimerization, and the downstream cellular response
C. The downstream cellular response
D. Phosphatase activity, dimerization, and the downsteam cellular response

Signaling Molecules

Produced by signaling cells and the subsequent binding to receptors in target cells, ligands act as chemical signals that travel to the target cells to coordinate responses. The types of molecules that serve as ligands are incredibly varied and range from small proteins to small ions like calcium (Ca^{2+}).

Small Hydrophobic Ligands

Small hydrophobic ligands can directly diffuse through the plasma membrane and interact with internal receptors. Important members of this class of ligands are the steroid hormones. Steroids are lipids that have a hydrocarbon skeleton with four fused rings; different steroids have different functional groups attached to the carbon skeleton. Steroid hormones include the female sex hormone, estradiol, which is a type of estrogen; the male sex hormone, testosterone; and cholesterol, which is an important structural component of biological membranes and a precursor of steroid hormones (Figure 12.4.2.8). Other hydrophobic hormones include thyroid hormones and vitamin D. In order to be soluble in blood, hydrophobic ligands must bind to carrier proteins while they are being transported through the bloodstream.

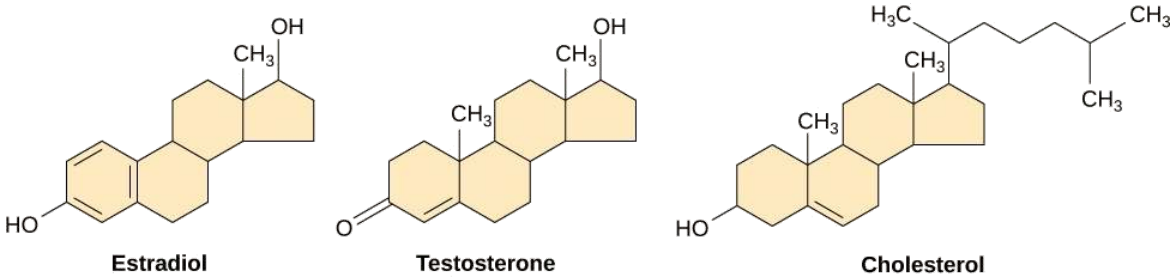


Figure 12.4.2.8: Steroid hormones have similar chemical structures to their precursor, cholesterol. Because these molecules are small and hydrophobic, they can diffuse directly across the plasma membrane into the cell, where they interact with internal receptors.

Water-Soluble Ligands

Water-soluble ligands are polar and therefore cannot pass through the plasma membrane unaided; sometimes, they are too large to pass through the membrane at all. Instead, most water-soluble ligands bind to the extracellular domain of cell-surface receptors. This group of ligands is quite diverse and includes small molecules, peptides, and proteins.

Other Ligands

Nitric oxide (NO) is a gas that also acts as a ligand. It is able to diffuse directly across the plasma membrane, and one of its roles is to interact with receptors in smooth muscle and induce relaxation of the tissue. NO has a very short half-life and therefore only functions over short distances. Nitroglycerin, a treatment for heart disease, acts by triggering the release of NO, which causes blood vessels to dilate (expand), thus restoring blood flow to the heart. NO has become better known recently because the pathway that it affects is targeted by prescription medications for erectile dysfunction, such as Viagra (erection involves dilated blood vessels).

Summary

Cells communicate by both inter- and intracellular signaling. Signaling cells secrete ligands that bind to target cells and initiate a chain of events within the target cell. The four categories of signaling in multicellular organisms are paracrine signaling, endocrine signaling, autocrine signaling, and direct signaling across gap junctions. Paracrine signaling takes place over short distances. Endocrine signals are carried long distances through the bloodstream by hormones, and autocrine signals are received by the same cell that sent the signal or other nearby cells of the same kind. Gap junctions allow small molecules, including signaling molecules, to flow between neighboring cells.

Internal receptors are found in the cell cytoplasm. Here, they bind ligand molecules that cross the plasma membrane; these receptor-ligand complexes move to the nucleus and interact directly with cellular DNA. Cell-surface receptors transmit a signal from outside the cell to the cytoplasm. Ion channel-linked receptors, when bound to their ligands, form a pore through the plasma membrane through which certain ions can pass. G-protein-linked receptors interact with a G-protein on the cytoplasmic side of the plasma membrane, promoting the exchange of bound GDP for GTP and interacting with other enzymes or ion channels to transmit a signal. Enzyme-linked receptors transmit a signal from outside the cell to an intracellular domain of a membrane-bound enzyme. Ligand binding causes activation of the enzyme. Small hydrophobic ligands (like steroids) are able to penetrate the plasma membrane and bind to internal receptors. Water-soluble hydrophilic ligands are unable to pass through the membrane; instead, they bind to cell-surface receptors, which transmit the signal to the inside of the cell.

Art Connections

Figure 12.4.2.7: HER2 is a receptor tyrosine kinase. In 30 percent of human breast cancers, HER2 is permanently activated, resulting in unregulated cell division. Lapatinib, a drug used to treat breast cancer, inhibits HER2 receptor tyrosine kinase autophosphorylation (the process by which the receptor adds phosphates onto itself), thus reducing tumor growth by 50 percent. Besides autophosphorylation, which of the following steps would be inhibited by Lapatinib?

A. Signaling molecule binding, dimerization, and the downstream cellular response.
B. Dimerization, and the downstream cellular response.
C. The downstream cellular response.
D. Phosphatase activity, dimerization, and the downsteam cellular response.

Answer

C. The downstream cellular response would be inhibited.

Footnotes

1. 1 A. B. Sigalov, The School of Nature. IV. Learning from Viruses, *Self/Nonself* 1, no. 4 (2010): 282-298. Y. Cao, X. Koh, L. Dong, X. Du, A. Wu, X. Ding, H. Deng, Y. Shu, J. Chen, T. Jiang, Rapid Estimation of Binding Activity of Influenza Virus Hemagglutinin to Human and Avian Receptors, *PLoS One* 6, no. 4 (2011): e18664.

Glossary

autocrine signal
signal that is sent and received by the same or similar nearby cells

cell-surface receptor
cell-surface protein that transmits a signal from the exterior of the cell to the interior, even though the ligand does not enter the cell

chemical synapse
small space between axon terminals and dendrites of nerve cells where neurotransmitters function

endocrine cell
cell that releases ligands involved in endocrine signaling (hormones)

endocrine signal
long-distance signal that is delivered by ligands (hormones) traveling through an organisms circulatory system from the signaling cell to the target cell

enzyme-linked receptor
cell-surface receptor with intracellular domains that are associated with membrane-bound enzymes

extracellular domain
region of a cell-surface receptor that is located on the cell surface

G-protein-linked receptor
cell-surface receptor that activates membrane-bound G-proteins to transmit a signal from the receptor to nearby membrane components

intercellular signaling
communication between cells

internal receptor

(also, intracellular receptor) receptor protein that is located in the cytosol of a cell and binds to ligands that pass through the plasma membrane

intracellular mediator

(also, second messenger) small molecule that transmits signals within a cell

intracellular signaling

communication within cells

ion channel-linked receptor

cell-surface receptor that forms a plasma membrane channel, which opens when a ligand binds to the extracellular domain (ligand-gated channels)

ligand

molecule produced by a signaling cell that binds with a specific receptor, delivering a signal in the process

neurotransmitter

chemical ligand that carries a signal from one nerve cell to the next

paracrine signal

signal between nearby cells that is delivered by ligands traveling in the liquid medium in the space between the cells

receptor

protein in or on a target cell that bind to ligands

signaling cell

cell that releases signal molecules that allow communication with another cell

synaptic signal

chemical signal (neurotransmitter) that travels between nerve cells

target cell

cell that has a receptor for a signal or ligand from a signaling cell

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12.4.3: Propagation of the Signal

Skills to Develop

- Explain how the binding of a ligand initiates signal transduction throughout a cell
- Recognize the role of phosphorylation in the transmission of intracellular signals
- Evaluate the role of second messengers in signal transmission

Once a ligand binds to a receptor, the signal is transmitted through the membrane and into the cytoplasm. Continuation of a signal in this manner is called signal transduction. Signal transduction only occurs with cell-surface receptors because internal receptors are able to interact directly with DNA in the nucleus to initiate protein synthesis.

When a ligand binds to its receptor, conformational changes occur that affect the receptor's intracellular domain. Conformational changes of the extracellular domain upon ligand binding can propagate through the membrane region of the receptor and lead to activation of the intracellular domain or its associated proteins. In some cases, binding of the ligand causes dimerization of the receptor, which means that two receptors bind to each other to form a stable complex called a dimer. A dimer is a chemical compound formed when two molecules (often identical) join together. The binding of the receptors in this manner enables their intracellular domains to come into close contact and activate each other.

Binding Initiates a Signaling Pathway

After the ligand binds to the cell-surface receptor, the activation of the receptor's intracellular components sets off a chain of events that is called a signaling pathway or a signaling cascade. In a signaling pathway, second messengers, enzymes, and activated proteins interact with specific proteins, which are in turn activated in a chain reaction that eventually leads to a change in the cell's environment (Figure 12.4.3.1). The events in the cascade occur in a series, much like a current flows in a river. Interactions that occur before a certain point are defined as upstream events, and events after that point are called downstream events.

Art Connection

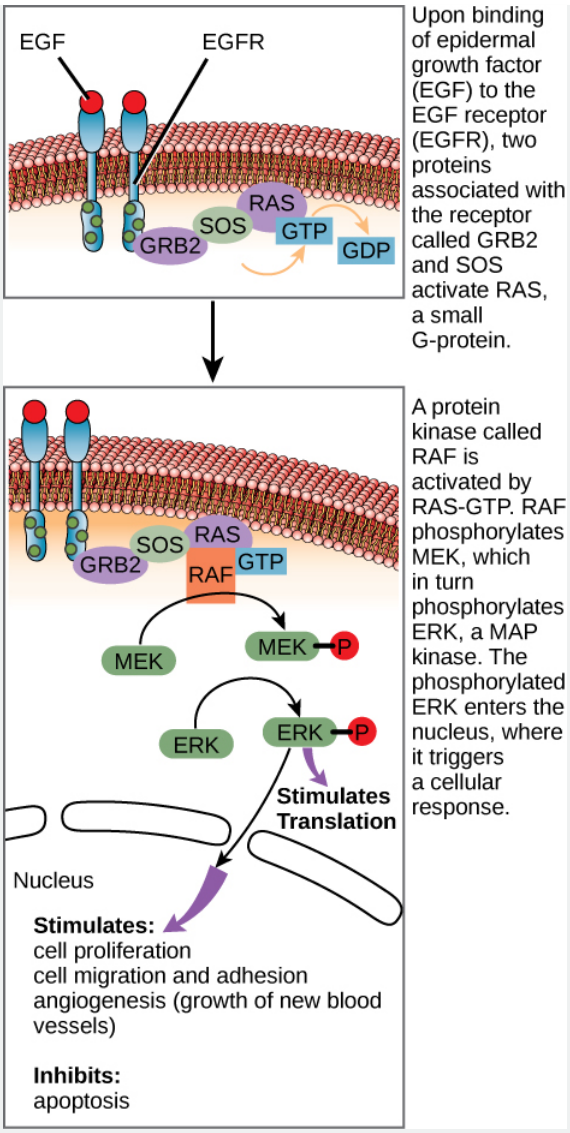


Figure 12.4.3.1: The epidermal growth factor (EGF) receptor (EGFR) is a receptor tyrosine kinase involved in the regulation of cell growth, wound healing, and tissue repair. When EGF binds to the EGFR, a cascade of downstream events causes the cell to grow and divide. If EGFR is activated at inappropriate times, uncontrolled cell growth (cancer) may occur.

In certain cancers, the GTPase activity of the RAS G-protein is inhibited. This means that the RAS protein can no longer hydrolyze GTP into GDP. What effect would this have on downstream cellular events?

Signaling pathways can get very complicated very quickly because most cellular proteins can affect different downstream events, depending on the conditions within the cell. A single pathway can branch off toward different endpoints based on the interplay between two or more signaling pathways, and the same ligands are often used to initiate different signals in different cell types. This variation in response is due to differences in protein expression in different cell types. Another complicating element is signal integration of the pathways, in which signals from two or more different cell-surface receptors merge to activate the same response in the cell. This process can ensure that multiple external requirements are met before a cell commits to a specific response.

The effects of extracellular signals can also be amplified by enzymatic cascades. At the initiation of the signal, a single ligand binds to a single receptor. However, activation of a receptor-linked enzyme can activate many copies of a component of the signaling cascade, which amplifies the signal.

Methods of Intracellular Signaling

The induction of a signaling pathway depends on the modification of a cellular component by an enzyme. There are numerous enzymatic modifications that can occur, and they are recognized in turn by the next component downstream. The following are some of the more common events in intracellular signaling.

Phosphorylation

One of the most common chemical modifications that occurs in signaling pathways is the addition of a phosphate group (PO_4^{-3}) to a molecule such as a protein in a process called phosphorylation. The phosphate can be added to a nucleotide such as GMP to form GDP or GTP. Phosphates are also often added to serine, threonine, and tyrosine residues of proteins, where they replace the hydroxyl group of the amino acid (Figure 12.4.3.2). The transfer of the phosphate is catalyzed by an enzyme called a kinase. Various kinases are named for the substrate they phosphorylate. Phosphorylation of serine and threonine residues often activates enzymes. Phosphorylation of tyrosine residues can either affect the activity of an enzyme or create a binding site that interacts with downstream components in the signaling cascade. Phosphorylation may activate or inactivate enzymes, and the reversal of phosphorylation, dephosphorylation by a phosphatase, will reverse the effect.

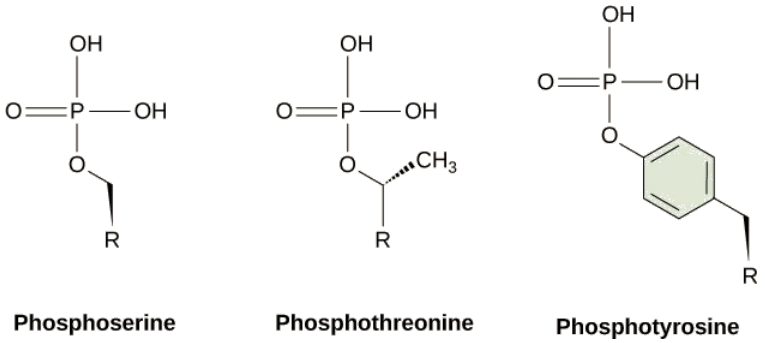


Figure 12.4.3.2: In protein phosphorylation, a phosphate group (PO_4^{-3}) is added to residues of the amino acids serine, threonine, and tyrosine.

Second Messengers

Second messengers are small molecules that propagate a signal after it has been initiated by the binding of the signaling molecule to the receptor. These molecules help to spread a signal through the cytoplasm by altering the behavior of certain cellular proteins.

Calcium ion is a widely used second messenger. The free concentration of calcium ions (Ca^{2+}) within a cell is very low because ion pumps in the plasma membrane continuously use adenosine-5'-triphosphate (ATP) to remove it. For signaling purposes, Ca^{2+} is stored in cytoplasmic vesicles, such as the endoplasmic reticulum, or accessed from outside the cell. When signaling occurs, ligand-gated calcium ion channels allow the higher levels of Ca^{2+} that are present outside the cell (or in intracellular storage compartments) to flow into the cytoplasm, which raises the concentration of cytoplasmic Ca^{2+}. The response to the increase in Ca^{2+} varies, depending on the cell type involved. For example, in the β-cells of the pancreas, Ca^{2+} signaling leads to the release of insulin, and in muscle cells, an increase in Ca^{2+} leads to muscle contractions.

Another second messenger utilized in many different cell types is cyclic AMP (cAMP). Cyclic AMP is synthesized by the enzyme adenylyl cyclase from ATP (Figure 12.4.3.3). The main role of cAMP in cells is to bind to and activate an enzyme called cAMP-dependent kinase (A-kinase). A-kinase regulates many vital metabolic pathways: It phosphorylates serine and threonine residues of its target proteins, activating them in the process. A-kinase is found in many different types of cells, and the target proteins in each kind of cell are different. Differences give rise to the variation of the responses to cAMP in different cells.

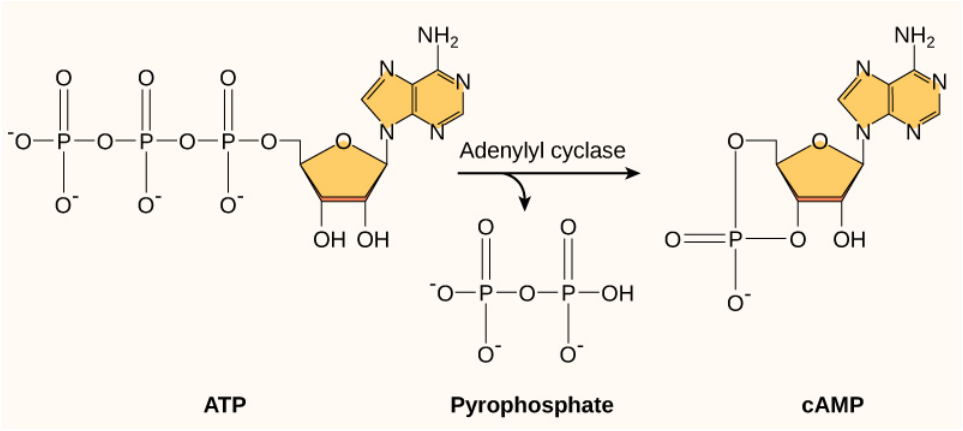


Figure 12.4.3.3: This diagram shows the mechanism for the formation of cyclic AMP (cAMP). cAMP serves as a second messenger to activate or inactivate proteins within the cell. Termination of the signal occurs when an enzyme called phosphodiesterase converts cAMP into AMP.

Present in small concentrations in the plasma membrane, inositol phospholipids are lipids that can also be converted into second messengers. Because these molecules are membrane components, they are located near membrane-bound receptors and can easily interact with them. Phosphatidylinositol (PI) is the main phospholipid that plays a role in cellular signaling. Enzymes known as kinases phosphorylate PI to form PI-phosphate (PIP) and PI-bisphosphate (PIP_2).

The enzyme phospholipase C cleaves PIP_2 to form diacylglycerol (DAG) and inositol triphosphate (IP_3) (Figure 12.4.3.4). These products of the cleavage of PIP_2 serve as second messengers. Diacylglycerol (DAG) remains in the plasma membrane and activates protein kinase C (PKC), which then phosphorylates serine and threonine residues in its target proteins. IP_3 diffuses into the cytoplasm and binds to ligand-gated calcium channels in the endoplasmic reticulum to release Ca^{2+} that continues the signal cascade.

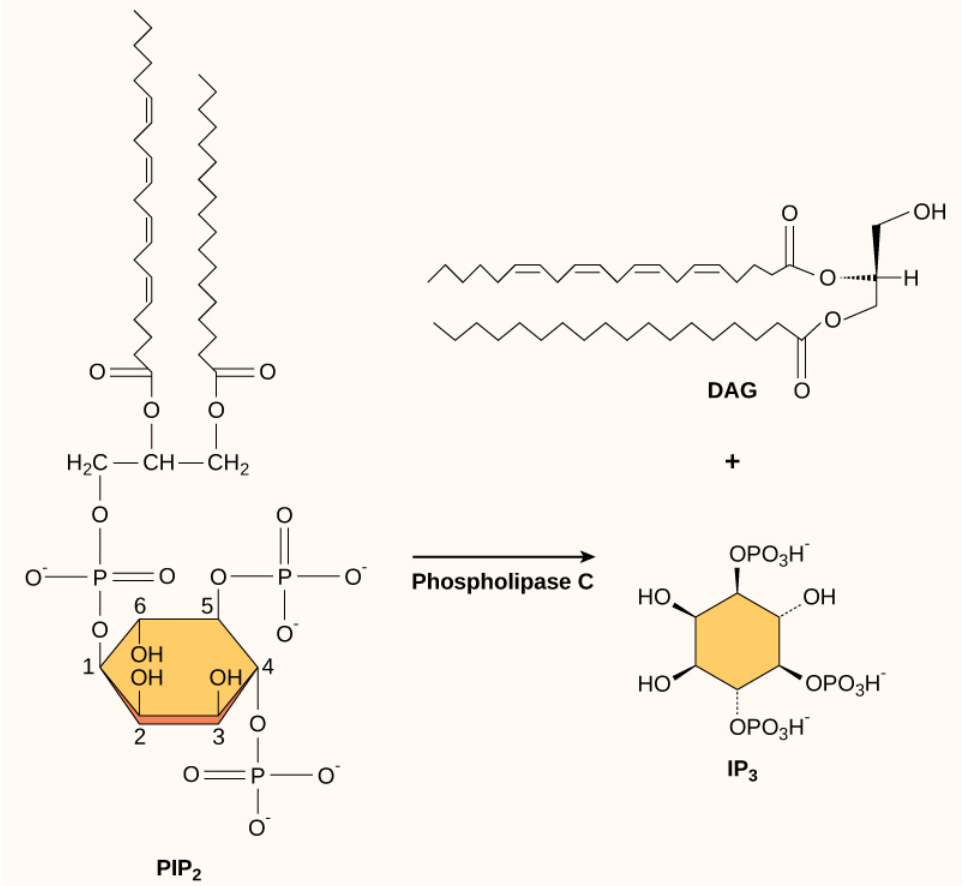


Figure 12.4.3.4: The enzyme phospholipase C breaks down PIP_2 into IP_3 and DAG, both of which serve as second messengers.

Summary

Ligand binding to the receptor allows for signal transduction through the cell. The chain of events that conveys the signal through the cell is called a signaling pathway or cascade. Signaling pathways are often very complex because of the interplay between different proteins. A major component of cell signaling cascades is the phosphorylation of molecules by enzymes known as kinases. Phosphorylation adds a phosphate group to serine, threonine, and tyrosine residues in a protein, changing their shapes, and activating or inactivating the protein. Small molecules like nucleotides can also be phosphorylated. Second messengers are small, non-protein molecules that are used to transmit a signal within a cell. Some examples of second messengers are calcium ions (Ca^{2+}), cyclic AMP (cAMP), diacylglycerol (DAG), and inositol triphosphate (IP_3).

Art Connections

Figure 12.4.3.1: In certain cancers, the GTPase activity of the RAS G-protein is inhibited. This means that the RAS protein can no longer hydrolyze GTP into GDP. What effect would this have on downstream cellular events?

Answer

ERK would become permanently activated, resulting in cell proliferation, migration, adhesion, and the growth of new blood vessels. Apoptosis would be inhibited.

Glossary

cyclic AMP (cAMP)

second messenger that is derived from ATP

cyclic AMP-dependent kinase

(also, protein kinase A, or PKA) kinase that is activated by binding to cAMP

diacylglycerol (DAG)
cleavage product of PIP_2 that is used for signaling within the plasma membrane

dimer
chemical compound formed when two molecules join together

dimerization
(of receptor proteins) interaction of two receptor proteins to form a functional complex called a dimer

inositol phospholipid
lipid present at small concentrations in the plasma membrane that is converted into a second messenger; it has inositol (a carbohydrate) as its hydrophilic head group

inositol triphosphate (IP_3)
cleavage product of PIP_2 that is used for signaling within the cell

kinase
enzyme that catalyzes the transfer of a phosphate group from ATP to another molecule

second messenger
small, non-protein molecule that propagates a signal within the cell after activation of a receptor causes its release

signal integration
interaction of signals from two or more different cell-surface receptors that merge to activate the same response in the cell

signal transduction
propagation of the signal through the cytoplasm (and sometimes also the nucleus) of the cell

signaling pathway
(also signaling cascade) chain of events that occurs in the cytoplasm of the cell to propagate the signal from the plasma membrane to produce a response

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12.4.4: Response to the Signal

Skills to Develop

- Describe how signaling pathways direct protein expression, cellular metabolism, and cell growth
- Identify the function of PKC in signal transduction pathways
- Recognize the role of apoptosis in the development and maintenance of a healthy organism

Inside the cell, ligands bind to their internal receptors, allowing them to directly affect the cell's DNA and protein-producing machinery. Using signal transduction pathways, receptors in the plasma membrane produce a variety of effects on the cell. The results of signaling pathways are extremely varied and depend on the type of cell involved as well as the external and internal conditions. A small sampling of responses is described below.

Gene Expression

Some signal transduction pathways regulate the transcription of RNA. Others regulate the translation of proteins from mRNA. An example of a protein that regulates translation in the nucleus is the MAP kinase ERK. ERK is activated in a phosphorylation cascade when epidermal growth factor (EGF) binds the EGF receptor (see Figure 9.2.1). Upon phosphorylation, ERK enters the nucleus and activates a protein kinase that, in turn, regulates protein translation (Figure 12.4.4.1).

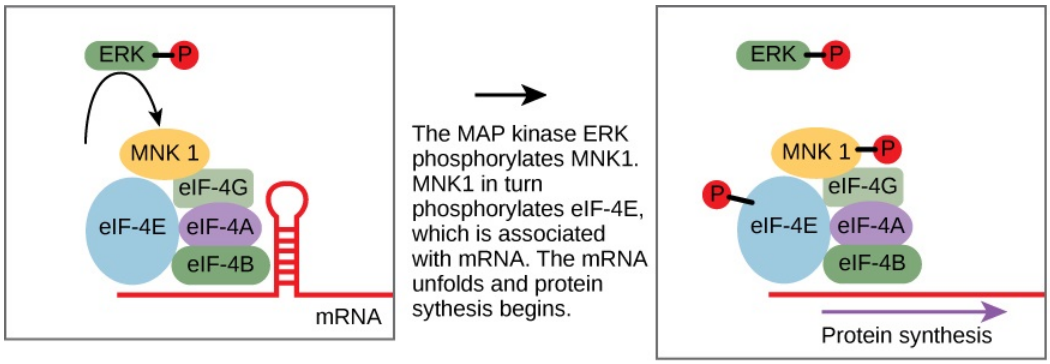


Figure 12.4.4.1: ERK is a MAP kinase that activates translation when it is phosphorylated. ERK phosphorylates MNK1, which in turn phosphorylates eIF-4E, an elongation initiation factor that, with other initiation factors, is associated with mRNA. When eIF-4E becomes phosphorylated, the mRNA unfolds, allowing protein synthesis in the nucleus to begin. (See Figure 9.2.1 for the phosphorylation pathway that activates ERK.)

The second kind of protein with which PKC can interact is a protein that acts as an inhibitor. An inhibitor is a molecule that binds to a protein and prevents it from functioning or reduces its function. In this case, the inhibitor is a protein called Iκ-B, which binds to the regulatory protein NF-κB. (The symbol κ represents the Greek letter kappa.) When Iκ-B is bound to NF-κB, the complex cannot enter the nucleus of the cell, but when Iκ-B is phosphorylated by PKC, it can no longer bind NF-κB, and NF-κB (a transcription factor) can enter the nucleus and initiate RNA transcription. In this case, the effect of phosphorylation is to inactivate an inhibitor and thereby activate the process of transcription.

Increase in Cellular Metabolism

The result of another signaling pathway affects muscle cells. The activation of β-adrenergic receptors in muscle cells by adrenaline leads to an increase in cyclic AMP (cAMP) inside the cell. Also known as epinephrine, adrenaline is a hormone (produced by the adrenal gland attached to the kidney) that readies the body for short-term emergencies. Cyclic AMP activates PKA (protein kinase A), which in turn phosphorylates two enzymes. The first enzyme promotes the degradation of glycogen by activating intermediate glycogen phosphorylase kinase (GPK) that in turn activates glycogen phosphorylase (GP) that catabolizes glycogen into glucose. (Recall that your body converts excess glucose to glycogen for short-term storage. When energy is needed, glycogen is quickly reconverted to glucose.) Phosphorylation of the second enzyme, glycogen synthase (GS), inhibits its ability to form glycogen from glucose. In this manner, a muscle cell obtains a ready pool of glucose by activating its formation via glycogen degradation and by inhibiting the use of glucose to form glycogen, thus preventing a futile cycle of glycogen degradation and synthesis. The glucose is then available for use by the muscle cell in response to a sudden surge of adrenaline—the "fight or flight" reflex.

Cell Growth

Cell signaling pathways also play a major role in cell division. Cells do not normally divide unless they are stimulated by signals from other cells. The ligands that promote cell growth are called growth factors. Most growth factors bind to cell-surface receptors that are linked to tyrosine kinases. These cell-surface receptors are called receptor tyrosine kinases (RTKs). Activation of RTKs initiates a signaling pathway that includes a G-protein called RAS, which activates the MAP kinase pathway described earlier. The enzyme MAP kinase then stimulates the expression of proteins that interact with other cellular components to initiate cell division.

Career Connection: Cancer Biologist

Cancer biologists study the molecular origins of cancer with the goal of developing new prevention methods and treatment strategies that will inhibit the growth of tumors without harming the normal cells of the body. As mentioned earlier, signaling pathways control cell growth. These signaling pathways are controlled by signaling proteins, which are, in turn, expressed by genes. Mutations in these genes can result in malfunctioning signaling proteins. This prevents the cell from regulating its cell cycle, triggering unrestricted cell division and cancer. The genes that regulate the signaling proteins are one type of oncogene which is a gene that has the potential to cause cancer. The gene encoding RAS is an oncogene that was originally discovered when mutations in the RAS protein were linked to cancer. Further studies have indicated that 30 percent of cancer cells have a mutation in the RAS gene that leads to uncontrolled growth. If left unchecked, uncontrolled cell division can lead tumor formation and metastasis, the growth of cancer cells in new locations in the body.

Cancer biologists have been able to identify many other oncogenes that contribute to the development of cancer. For example, HER2 is a cell-surface receptor that is present in excessive amounts in 20 percent of human breast cancers. Cancer biologists realized that gene duplication led to HER2 overexpression in 25 percent of breast cancer patients and developed a drug called Herceptin (trastuzumab). Herceptin is a monoclonal antibody that targets HER2 for removal by the immune system. Herceptin therapy helps to control signaling through HER2. The use of Herceptin in combination with chemotherapy has helped to increase the overall survival rate of patients with metastatic breast cancer.

Cell Death

When a cell is damaged, superfluous, or potentially dangerous to an organism, a cell can initiate a mechanism to trigger programmed cell death, or apoptosis. Apoptosis allows a cell to die in a controlled manner that prevents the release of potentially damaging molecules from inside the cell. There are many internal checkpoints that monitor a cell's health; if abnormalities are observed, a cell can spontaneously initiate the process of apoptosis. However, in some cases, such as a viral infection or uncontrolled cell division due to cancer, the cell's normal checks and balances fail. External signaling can also initiate apoptosis. For example, most normal animal cells have receptors that interact with the extracellular matrix, a network of glycoproteins that provides structural support for cells in an organism. The binding of cellular receptors to the extracellular matrix initiates a signaling cascade within the cell. However, if the cell moves away from the extracellular matrix, the signaling ceases, and the cell undergoes apoptosis. This system keeps cells from traveling through the body and proliferating out of control, as happens with tumor cells that metastasize.

Another example of external signaling that leads to apoptosis occurs in T-cell development. T-cells are immune cells that bind to foreign macromolecules and particles, and target them for destruction by the immune system. Normally, T-cells do not target "self" proteins (those of their own organism), a process that can lead to autoimmune diseases. In order to develop the ability to discriminate between self and non-self, immature T-cells undergo screening to determine whether they bind to so-called self proteins. If the T-cell receptor binds to self proteins, the cell initiates apoptosis to remove the potentially dangerous cell.

Apoptosis is also essential for normal embryological development. In vertebrates, for example, early stages of development include the formation of web-like tissue between individual fingers and toes (Figure 12.4.4.2). During the course of normal development, these unneeded cells must be eliminated, enabling fully separated fingers and toes to form. A cell signaling mechanism triggers apoptosis, which destroys the cells between the developing digits.



Figure 12.4.4.2: The histological section of a foot of a 15-day-old mouse embryo, visualized using light microscopy, reveals areas of tissue between the toes, which apoptosis will eliminate before the mouse reaches its full gestational age at 27 days. (credit: modification of work by Michal Mañas)

Termination of the Signal Cascade

The aberrant signaling often seen in tumor cells is proof that the termination of a signal at the appropriate time can be just as important as the initiation of a signal. One method of stopping a specific signal is to degrade the ligand or remove it so that it can no longer access its receptor. One reason that hydrophobic hormones like estrogen and testosterone trigger long-lasting events is because they bind carrier proteins. These proteins allow the insoluble molecules to be soluble in blood, but they also protect the hormones from degradation by circulating enzymes.

Inside the cell, many different enzymes reverse the cellular modifications that result from signaling cascades. For example, phosphatases are enzymes that remove the phosphate group attached to proteins by kinases in a process called dephosphorylation. Cyclic AMP (cAMP) is degraded into AMP by phosphodiesterase, and the release of calcium stores is reversed by the Ca^{2+} pumps that are located in the external and internal membranes of the cell.

Summary

The initiation of a signaling pathway is a response to external stimuli. This response can take many different forms, including protein synthesis, a change in the cell's metabolism, cell growth, or even cell death. Many pathways influence the cell by initiating gene expression, and the methods utilized are quite numerous. Some pathways activate enzymes that interact with DNA transcription factors. Others modify proteins and induce them to change their location in the cell. Depending on the status of the organism, cells can respond by storing energy as glycogen or fat, or making it available in the form of glucose. A signal transduction pathway allows muscle cells to respond to immediate requirements for energy in the form of glucose. Cell growth is

almost always stimulated by external signals called growth factors. Uncontrolled cell growth leads to cancer, and mutations in the genes encoding protein components of signaling pathways are often found in tumor cells. Programmed cell death, or apoptosis, is important for removing damaged or unnecessary cells. The use of cellular signaling to organize the dismantling of a cell ensures that harmful molecules from the cytoplasm are not released into the spaces between cells, as they are in uncontrolled death, necrosis. Apoptosis also ensures the efficient recycling of the components of the dead cell. Termination of the cellular signaling cascade is very important so that the response to a signal is appropriate in both timing and intensity. Degradation of signaling molecules and dephosphorylation of phosphorylated intermediates of the pathway by phosphatases are two ways to terminate signals within the cell.

Glossary

apoptosis
: programmed cell death

growth factor
: ligand that binds to cell-surface receptors and stimulates cell growth

inhibitor
: molecule that binds to a protein (usually an enzyme) and keeps it from functioning

phosphatase
: enzyme that removes the phosphate group from a molecule that has been previously phosphorylated

phosphodiesterase
: enzyme that degrades cAMP, producing AMP, to terminate signaling

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12.4.5: Signaling in Single-Celled Organisms

Skills to Develop

- Describe how single-celled yeasts use cell signaling to communicate with one another
- Relate the role of quorum sensing to the ability of some bacteria to form biofilms

Within-cell signaling allows bacteria to respond to environmental cues, such as nutrient levels, some single-celled organisms also release molecules to signal to each other.

Signaling in Yeast

Yeasts are eukaryotes (fungi), and the components and processes found in yeast signals are similar to those of cell-surface receptor signals in multicellular organisms. Budding yeasts (Figure 12.4.5.1) are able to participate in a process that is similar to sexual reproduction that entails two haploid cells (cells with one-half the normal number of chromosomes) combining to form a diploid cell (a cell with two sets of each chromosome, which is what normal body cells contain). In order to find another haploid yeast cell that is prepared to mate, budding yeasts secrete a signaling molecule called mating factor. When mating factor binds to cell-surface receptors in other yeast cells that are nearby, they stop their normal growth cycles and initiate a cell signaling cascade that includes protein kinases and GTP-binding proteins that are similar to G-proteins.

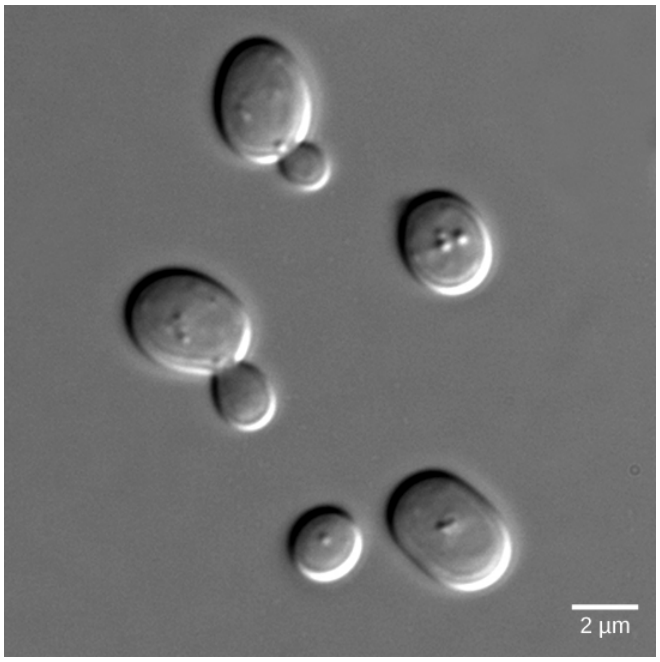


Figure 12.4.5.1: Budding *Saccharomyces cerevisiae* yeast cells can communicate by releasing a signaling molecule called mating factor. In this micrograph, they are visualized using differential interference contrast microscopy, a light microscopy technique that enhances the contrast of the sample.

Signaling in Bacteria

Signaling in bacteria enables bacteria to monitor extracellular conditions, ensure that there are sufficient amounts of nutrients, and ensure that hazardous situations are avoided. There are circumstances, however, when bacteria communicate with each other.

The first evidence of bacterial communication was observed in a bacterium that has a symbiotic relationship with Hawaiian bobtail squid. When the population density of the bacteria reaches a certain level, specific gene expression is initiated, and the bacteria produce bioluminescent proteins that emit light. Because the number of cells present in the environment (cell density) is the determining factor for signaling, bacterial signaling was named quorum sensing. In politics and business, a quorum is the minimum number of members required to be present to vote on an issue.

Quorum sensing uses autoinducers as signaling molecules. Autoinducers are signaling molecules secreted by bacteria to communicate with other bacteria of the same kind. The secreted autoinducers can be small, hydrophobic molecules such as acyl-homoserine lactone, (AHL) or larger peptide-based molecules; each type of molecule has a different mode of action. When AHL enters target bacteria, it binds to transcription factors, which then switch gene expression on or off (Figure 12.4.5.2). The peptide autoinducers stimulate more complicated signaling pathways that include bacterial kinases. The changes in bacteria following exposure to autoinducers can be quite extensive. The pathogenic bacterium *Pseudomonas aeruginosa* has 616 different genes that respond to autoinducers.

Art Connection

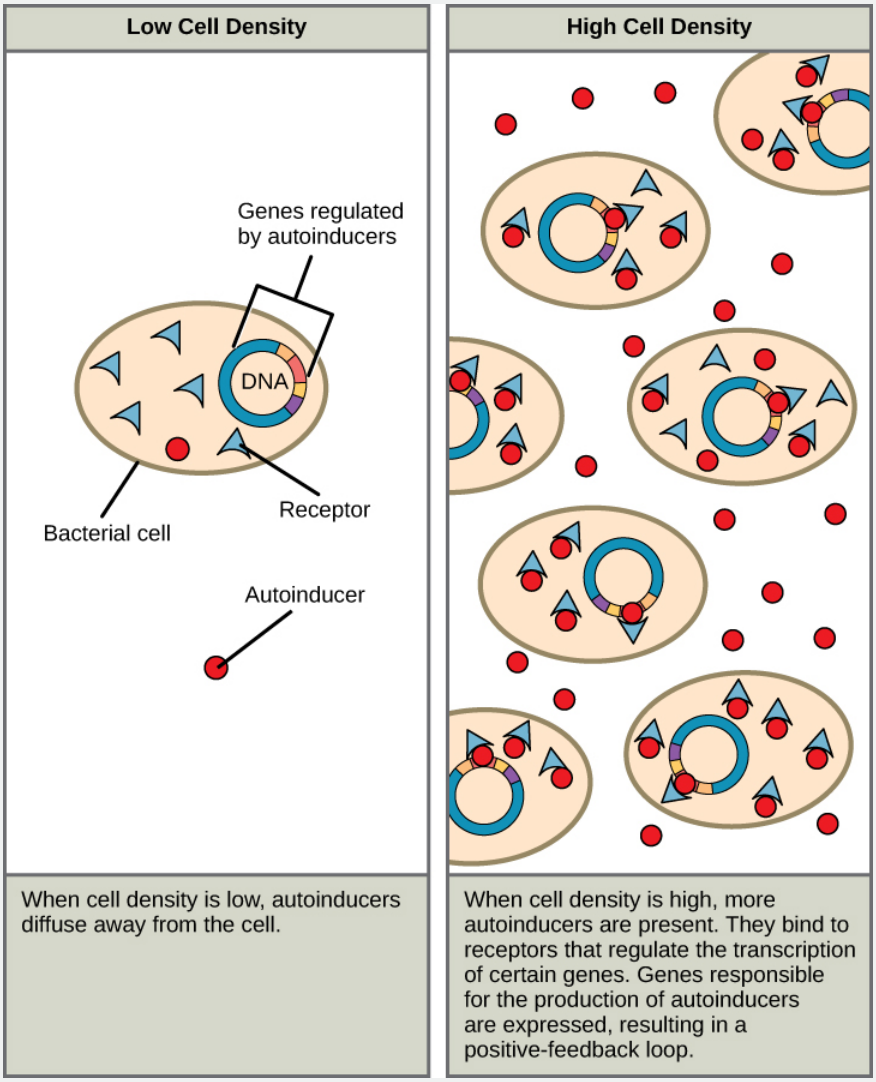


Figure 12.4.5.2: Autoinducers are small molecules or proteins produced by bacteria that regulate gene expression.

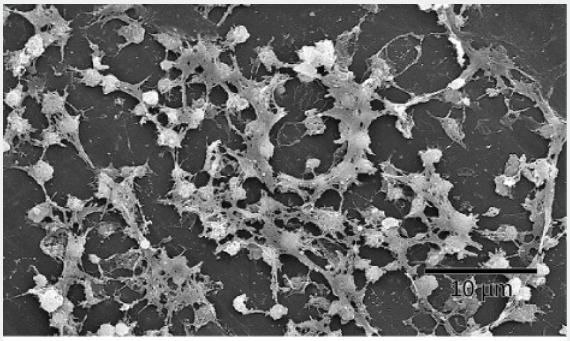
Which of the following statements about quorum sensing is false?

A. Autoinducer must bind to receptor to turn on transcription of genes responsible for the production of more autoinducer.
B. The receptor stays in the bacterial cell, but the autoinducer diffuses out.
C. Autoinducer can only act on a different cell: it cannot act on the cell in which it is made.
D. Autoinducer turns on genes that enable the bacteria to form a biofilm.

Some species of bacteria that use quorum sensing form biofilms, complex colonies of bacteria (often containing several species) that exchange chemical signals to coordinate the release of toxins that will attack the host. Bacterial biofilms (Figure 12.4.5.3) can

sometimes be found on medical equipment; when biofilms invade implants such as hip or knee replacements or heart pacemakers, they can cause life-threatening infections.

Art Connection



(a)



(b)

Figure 12.4.5.3: Cell-cell communication enables these (a) *Staphylococcus aureus* bacteria to work together to form a biofilm inside a hospital patient's catheter, seen here via scanning electron microscopy. *S. aureus* is the main cause of hospital-acquired infections. (b) Hawaiian bobtail squid have a symbiotic relationship with the bioluminescent bacteria *Vibrio fischeri*. The luminescence makes it difficult to see the squid from below because it effectively eliminates its shadow. In return for camouflage, the squid provides food for the bacteria. Free-living *V. fischeri* do not produce luciferase, the enzyme responsible for luminescence, but *V. fischeri* living in a symbiotic relationship with the squid do. Quorum sensing determines whether the bacteria should produce the luciferase enzyme. (credit a: modifications of work by CDC/Janice Carr; credit b: modifications of work by Cliff1066/Flickr)

What advantage might biofilm production confer on the *S. aureus* inside the catheter?

Research on the details of quorum sensing has led to advances in growing bacteria for industrial purposes. Recent discoveries suggest that it may be possible to exploit bacterial signaling pathways to control bacterial growth; this process could replace or supplement antibiotics that are no longer effective in certain situations.

Link to Learning

Watch geneticist Bonnie Bassler discuss her discovery of quorum sensing in biofilm bacteria in squid.

Evolution Connection: Cellular Communication in Yeasts

The first life on our planet consisted of single-celled prokaryotic organisms that had limited interaction with each other. While some external signaling occurs between different species of single-celled organisms, the majority of signaling within bacteria and yeasts concerns only other members of the same species. The evolution of cellular communication is an absolute necessity for the development of multicellular organisms, and this innovation is thought to have required approximately 2.5 billion years to appear in early life forms.

Yeasts are single-celled eukaryotes, and therefore have a nucleus and organelles characteristic of more complex life forms. Comparisons of the genomes of yeasts, nematode worms, fruit flies, and humans illustrate the evolution of increasingly complex signaling systems that allow for the efficient inner workings that keep humans and other complex life forms functioning correctly.

Kinases are a major component of cellular communication, and studies of these enzymes illustrate the evolutionary connectivity of different species. Yeasts have 130 types of kinases. More complex organisms such as nematode worms and fruit flies have 454 and 239 kinases, respectively. Of the 130 kinase types in yeast, 97 belong to the 55 subfamilies of kinases that are found in other eukaryotic organisms. The only obvious deficiency seen in yeasts is the complete absence of tyrosine kinases. It is hypothesized that phosphorylation of tyrosine residues is needed to control the more sophisticated functions of development, differentiation, and cellular communication used in multicellular organisms.

Because yeasts contain many of the same classes of signaling proteins as humans, these organisms are ideal for studying signaling cascades. Yeasts multiply quickly and are much simpler organisms than humans or other multicellular animals. Therefore, the signaling cascades are also simpler and easier to study, although they contain similar counterparts to human signaling.[1]

Link to Learning



Watch this collection of interview clips with biofilm researchers in “What Are Bacterial Biofilms?”

Summary

Yeasts and multicellular organisms have similar signaling mechanisms. Yeasts use cell-surface receptors and signaling cascades to communicate information on mating with other yeast cells. The signaling molecule secreted by yeasts is called mating factor.

Bacterial signaling is called quorum sensing. Bacteria secrete signaling molecules called autoinducers that are either small, hydrophobic molecules or peptide-based signals. The hydrophobic autoinducers, such as AHL, bind transcription factors and directly affect gene expression. The peptide-based molecules bind kinases and initiate signaling cascades in the cells.

Art Connections

Figure 12.4.5.2: Which of the following statements about quorum sensing is false?

A. Autoinducer must bind to receptor to turn on transcription of genes responsible for the production of more autoinducer.
B. The receptor stays in the bacterial cell, but the autoinducer diffuses out.
C. Autoinducer can only act on a different cell: it cannot act on the cell in which it is made.
D. Autoinducer turns on genes that enable the bacteria to form a biofilm.

Answer

C.

Figure 12.4.5.3: What advantage might biofilm production confer on the *S. aureus* inside the catheter?

Answer

S. aureus produces a biofilm because the higher cell density in the biofilm permits the formation of a dense surface that helps protect the bacteria from antibiotics.

Footnotes

1. 1 G. Manning, G.D. Plowman, T. Hunter, S. Sudarsanam, “Evolution of Protein Kinase Signaling from Yeast to Man,” *Trends in Biochemical Sciences* 27, no. 10 (2002): 514–520.

Glossary

autoinducer

signaling molecule secreted by bacteria to communicate with other bacteria of its kind and others

mating factor

signaling molecule secreted by yeast cells to communicate to nearby yeast cells that they are available to mate and communicating their mating orientation

quorum sensing

method of cellular communication used by bacteria that informs them of the abundance of similar (or different) bacteria in the environment

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12.4.E: Cell Communication (Exercises)

In multicellular organisms, cells send and receive chemical messages constantly to coordinate the actions of distant organs, tissues, and cells. The ability to send messages quickly and efficiently enables cells to coordinate and fine-tune their functions.

9.1: Signaling Molecules and Cellular Receptors

Chemical signals are released by signaling cells in the form of small, usually volatile or soluble molecules called ligands. A ligand is a molecule that binds another specific molecule, in some cases, delivering a signal in the process. Ligands can thus be thought of as signaling molecules. Ligands interact with proteins in target cells, which are cells that are affected by chemical signals; these proteins are also called receptors.

Review Questions

What property prevents the ligands of cell-surface receptors from entering the cell?

A. The molecules bind to the extracellular domain.
B. The molecules are hydrophilic and cannot penetrate the hydrophobic interior of the plasma membrane.
C. The molecules are attached to transport proteins that deliver them through the bloodstream to target cells.
D. The ligands are able to penetrate the membrane and directly influence gene expression upon receptor binding.

Answer

B

The secretion of hormones by the pituitary gland is an example of _____.

A. autocrine signaling
B. paracrine signaling
C. endocrine signaling
D. direct signaling across gap junctions

Answer

C

Why are ion channels necessary to transport ions into or out of a cell?

A. Ions are too large to diffuse through the membrane.
B. Ions are charged particles and cannot diffuse through the hydrophobic interior of the membrane.
C. Ions do not need ion channels to move through the membrane.
D. Ions bind to carrier proteins in the bloodstream, which must be removed before transport into the cell.

Answer

B

Endocrine signals are transmitted more slowly than paracrine signals because _____.

A. the ligands are transported through the bloodstream and travel greater distances
B. the target and signaling cells are close together
C. the ligands are degraded rapidly
D. the ligands don't bind to carrier proteins during transport

Answer

A

Free Response

What is the difference between intracellular signaling and intercellular signaling?

Answer

Intracellular signaling occurs within a cell, and intercellular signaling occurs between cells.

How are the effects of paracrine signaling limited to an area near the signaling cells?

Answer

The secreted ligands are quickly removed by degradation or reabsorption into the cell so that they cannot travel far.

What are the differences between internal receptors and cell-surface receptors?

Answer

Internal receptors are located inside the cell, and their ligands enter the cell to bind the receptor. The complex formed by the internal receptor and the ligand then enters the nucleus and directly affects protein production by binding to the chromosomal DNA and initiating the making of mRNA that codes for proteins. Cell-surface receptors, however, are embedded in the plasma membrane, and their ligands do not enter the cell. Binding of the ligand to the cell-surface receptor initiates a cell signaling cascade and does not directly influence the making of proteins; however, it may involve the activation of intracellular proteins.

Cells grown in the laboratory are mixed with a dye molecule that is unable to pass through the plasma membrane. If a ligand is added to the cells, observations show that the dye enters the cells. What type of receptor did the ligand bind to on the cell surface?

Answer

An ion channel receptor opened up a pore in the membrane, which allowed the ionic dye to move into the cell.

9.2: Propagation of the Signal

Once a ligand binds to a receptor, the signal is transmitted through the membrane and into the cytoplasm. Continuation of a signal in this manner is called signal transduction. Signal transduction only occurs with cell-surface receptors because internal receptors are able to interact directly with DNA in the nucleus to initiate protein synthesis. When a ligand binds to its receptor, conformational changes occur that affect the receptor's intracellular domain.

Review Questions

Where do DAG and IP_3 originate?

A. They are formed by phosphorylation of cAMP.
B. They are ligands expressed by signaling cells.
C. They are hormones that diffuse through the plasma membrane to stimulate protein production.
D. They are the cleavage products of the inositol phospholipid, PIP_2.

Answer

D

What property enables the residues of the amino acids serine, threonine, and tyrosine to be phosphorylated?

A. They are polar.

B. They are non-polar.
C. They contain a hydroxyl group.
D. They occur more frequently in the amino acid sequence of signaling proteins.

Answer

C

Free Response

The same second messengers are used in many different cells, but the response to second messengers is different in each cell. How is this possible?

Answer

Different cells produce different proteins, including cell-surface receptors and signaling pathway components. Therefore, they respond to different ligands, and the second messengers activate different pathways. Signal integration can also change the end result of signaling.

What would happen if the intracellular domain of a cell-surface receptor was switched with the domain from another receptor?

Answer

The binding of the ligand to the extracellular domain would activate the pathway normally activated by the receptor donating the intracellular domain.

9.3: Response to the Signal

Inside the cell, ligands bind to their internal receptors, allowing them to directly affect the cell's DNA and protein-producing machinery. Using signal transduction pathways, receptors in the plasma membrane produce a variety of effects on the cell. The results of signaling pathways are extremely varied and depend on the type of cell involved as well as the external and internal conditions. A small sampling of responses is described below.

Review Questions

What is the function of a phosphatase?

A. A phosphatase removes phosphorylated amino acids from proteins.
B. A phosphatase removes the phosphate group from phosphorylated amino acid residues in a protein.
C. A phosphatase phosphorylates serine, threonine, and tyrosine residues.
D. A phosphatase degrades second messengers in the cell.

Answer

B

How does NF-κB induce gene expression?

A. A small, hydrophobic ligand binds to NF-κB, activating it.
B. Phosphorylation of the inhibitor Iκ-B dissociates the complex between it and NF-κB, and allows NF-κB to enter the nucleus and stimulate transcription.
C. NF-κB is phosphorylated and is then free to enter the nucleus and bind DNA.
D. NF-κB is a kinase that phosphorylates a transcription factor that binds DNA and promotes protein production.

Answer

B

Apoptosis can occur in a cell when the cell is _____.

A. damaged
B. no longer needed
C. infected by a virus
D. all of the above

Answer

D

What is the effect of an inhibitor binding an enzyme?

A. The enzyme is degraded.
B. The enzyme is activated.
C. The enzyme is inactivated.
D. The complex is transported out of the cell.

Answer

C

Free Response

What is a possible result of a mutation in a kinase that controls a pathway that stimulates cell growth?

Answer

If a kinase is mutated so that it is always activated, it will continuously signal through the pathway and lead to uncontrolled growth and possibly cancer. If a kinase is mutated so that it cannot function, the cell will not respond to ligand binding.

How does the extracellular matrix control the growth of cells?

Answer

Receptors on the cell surface must be in contact with the extracellular matrix in order to receive positive signals that allow the cell to live. If the receptors are not activated by binding, the cell will undergo apoptosis. This ensures that cells are in the correct place in the body and helps to prevent invasive cell growth as occurs in metastasis in cancer.

9.4: Signaling in Single-Celled Organisms

Within-cell signaling allows bacteria to respond to environmental cues, such as nutrient levels, some single-celled organisms also release molecules to signal to each other.

Review Questions

Which type of molecule acts as a signaling molecule in yeasts?

A. steroid
B. autoinducer
C. mating factor
D. second messenger

Answer

C

Quorum sensing is triggered to begin when _____.

A. treatment with antibiotics occurs
B. bacteria release growth hormones
C. bacterial protein expression is switched on
D. a sufficient number of bacteria are present

Answer

D

Free Response

What characteristics make yeasts a good model for learning about signaling in humans?

Answer

Yeasts are eukaryotes and have many of the same systems that humans do; however, they are single-celled, so they are easy to grow, grow rapidly, have a short generation time, and are much simpler than humans.

Why is signaling in multicellular organisms more complicated than signaling in single-celled organisms?

Answer

Multicellular organisms must coordinate many different events in different cell types that may be very distant from each other. Single-celled organisms are only concerned with their immediate environment and the presence of other cells in the area.

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10.4: Mammalian Heart and Blood Vessels
ectotherm
1.3: Animal Form and Function
efferent arteriole
3.3: The Kidneys and Osmoregulatory Organs
elastase
2.4: Digestive System Processes
elastic recoil
9.4: Breathing
elastic work
9.4: Breathing
electrocardiogram
10.4: Mammalian Heart and Blood Vessels
electrochemical gradient
12.3.4: Active Transport
electrogenic pump
12.3.4: Active Transport
electrolyte
3.2: Osmoregulation and Osmotic Balance
electron microscope
12.2.2: Studying Cells
endocardium
10.4: Mammalian Heart and Blood Vessels
endocrine cell
12.4.2: Signaling Molecules and Cellular Receptors
endocrine gland
8.6: Endocrine Glands
endocrine signal
12.4.2: Signaling Molecules and Cellular Receptors
endocrine system
2.5: Digestive System Regulation
endocytosis
12.3.5: Bulk Transport
endomembrane system
12.2.5: The Endomembrane System and Proteins
endoplasmic reticulum
12.2.5: The Endomembrane System and Proteins
endoskeleton
7.2: Types of Skeletal Systems
endotherm
1.3: Animal Form and Function
enterocoely
1.1: Features Used to Classify Animals
enzyme
12.1.5: Proteins
ependymal
4.2: Neurons and Glial Cells
epicardium
10.4: Mammalian Heart and Blood Vessels
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5.3: Nervous System Disorders
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8.4: Regulation of Body Processes
epithelial tissue
1.4: Animal Primary Tissues
EPSP
4.3: How Neurons Communicate
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8.6: Endocrine Glands
esophagus
2.2: Digestive Systems
essential nutrient
2.3: Nutrition and Energy Production
estivation
1.3: Animal Form and Function
estrogens
8.4: Regulation of Body Processes
eucoelomate
1.1: Features Used to Classify Animals
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12.2.4: Eukaryotic Cells
excitatory postsynaptic potential
4.3: How Neurons Communicate
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12.3.5: Bulk Transport
exoskeleton
7.2: Types of Skeletal Systems
expiratory reserve volume
9.3: Gas Exchange across Respiratory Surfaces
extracellular domain
12.4.2: Signaling Molecules and Cellular Receptors
extracellular matrix
12.2.7: Connections between Cells and Cellular Activities

F

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7.2: Types of Skeletal Systems
facilitated transport
12.3.3: Passive Transport
femur
7.2: Types of Skeletal Systems
FEV1/FVC ratio
9.3: Gas Exchange across Respiratory Surfaces
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1.4: Animal Primary Tissues
fibula
7.2: Types of Skeletal Systems
first messenger
8.3: How Hormones Work
flagellum
12.2.6: The Cytoskeleton
flame cell
3.4: Excretion Systems
Fluid Mosaic Model
12.3.2: Components and Structure
forced expiratory volume
9.3: Gas Exchange across Respiratory Surfaces
forearm
7.2: Types of Skeletal Systems
fovea
6.6: Vision
free nerve ending
6.3: Somatosensation

frontal plane
1.3: Animal Form and Function
frontal lobe
5.1: The Central Nervous System
functional residual capacity
9.3: Gas Exchange across Respiratory Surfaces
functional vital capacity
9.4: Breathing
fusiform
1.3: Animal Form and Function

G

gallbladder
2.2: Digestive Systems
gap junction
12.2.7: Connections between Cells and Cellular Activities
gastric inhibitory peptide
2.5: Digestive System Regulation
gastric phase
2.5: Digestive System Regulation
gastrin
2.5: Digestive System Regulation
gastrovascular cavity
2.2: Digestive Systems
gigantism
8.4: Regulation of Body Processes
gill circulation
10.2: Overview of the Circulatory System
gizzard
2.2: Digestive Systems
glabrous
6.3: Somatosensation
glia
4.2: Neurons and Glial Cells
glomerular filtration
3.3: The Kidneys and Osmoregulatory Organs
glomerular filtration rate
3.3: The Kidneys and Osmoregulatory Organs
Glomerulus
3.3: The Kidneys and Osmoregulatory Organs
6.4: Taste and Smell
glucagon
8.4: Regulation of Body Processes
glucocorticoid
8.4: Regulation of Body Processes
gluconeogenesis
8.4: Regulation of Body Processes
glycogen
12.1.3: Carbohydrates
glycogenolysis
8.4: Regulation of Body Processes
glycolipid
12.3.2: Components and Structure
glycoprotein
12.3.2: Components and Structure
glycosidic bond
12.1.3: Carbohydrates
goiter
8.4: Regulation of Body Processes
Golgi apparatus
12.2.5: The Endomembrane System and Proteins
Golgi tendon organ
6.3: Somatosensation
gonadotropin
8.4: Regulation of Body Processes
growth factor
12.4.4: Response to the Signal
growth hormone
8.4: Regulation of Body Processes
gustation
6.4: Taste and Smell
gyrus
5.1: The Central Nervous System

H

heme group
9.5: Transport of Gases in Human Bodily Fluids
hemocoel
10.2: Overview of the Circulatory System
hemoglobin
9.5: Transport of Gases in Human Bodily Fluids
hemolymph
10.2: Overview of the Circulatory System
herbivore
2.2: Digestive Systems
hibernation
1.3: Animal Form and Function
hilum
3.3: The Kidneys and Osmoregulatory Organs
hippocampus
5.1: The Central Nervous System
homeostasis
1.5: Homeostasis
11.1: Homeostasis
horizontal plane
1.3: Animal Form and Function
hormonal regulation
8.4: Regulation of Body Processes
Hormonal Stimuli
8.5: Regulation of Hormone Production
hormone
12.1.5: Proteins
hormone receptor
8.3: How Hormones Work
humerus
7.2: Types of Skeletal Systems
Humoral Stimuli
8.5: Regulation of Hormone Production
hydrolysis
12.1.2: Synthesis of Biological Macromolecules
hydrophilic
12.3.2: Components and Structure
hydrophobic
12.3.2: Components and Structure
hydrostatic skeleton
7.2: Types of Skeletal Systems
hyoid bone
7.2: Types of Skeletal Systems
hyperglycemia
8.4: Regulation of Body Processes
hyperopia
6.6: Vision
hyperpolarization
4.3: How Neurons Communicate
hyperthyroidism
8.4: Regulation of Body Processes
hypertonic
12.3.3: Passive Transport
hypoglycemia
8.4: Regulation of Body Processes
hypophyseal portal system
8.6: Endocrine Glands
hypothalamus
5.1: The Central Nervous System
hypothyroidism
8.4: Regulation of Body Processes
hypotonic
12.3.3: Passive Transport

I

Ileum
2.2: Digestive Systems
incus
6.5: Hearing and Vestibular Sensation
indeterminate cleavage
1.1: Features Used to Classify Animals
inferior vena cava
3.3: The Kidneys and Osmoregulatory Organs
10.4: Mammalian Heart and Blood Vessels
ingestion
2.4: Digestive System Processes
inhibitor
12.4.4: Response to the Signal
inhibitory postsynaptic potential
4.3: How Neurons Communicate
inner ear
6.5: Hearing and Vestibular Sensation
inositol phospholipid
12.4.3: Propagation of the Signal
inositol triphosphate
12.4.3: Propagation of the Signal
inspiratory capacity
9.3: Gas Exchange across Respiratory Surfaces
inspiratory reserve volume
9.3: Gas Exchange across Respiratory Surfaces
insulin
8.4: Regulation of Body Processes
integral protein
12.3.2: Components and Structure
intercellular signaling
12.4.2: Signaling Molecules and Cellular Receptors
intercostal muscle
9.4: Breathing
interlobar artery
3.3: The Kidneys and Osmoregulatory Organs
intermediate filament
12.2.6: The Cytoskeleton
internal receptor
12.4.2: Signaling Molecules and Cellular Receptors
interstitial fluid
10.2: Overview of the Circulatory System

intervertebral disc
7.2: Types of Skeletal Systems
intestinal phase
2.5: Digestive System Regulation
intracellular hormone receptor
8.3: How Hormones Work
intracellular mediator
12.4.2: Signaling Molecules and Cellular Receptors
intracellular signaling
12.4.2: Signaling Molecules and Cellular Receptors
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9.4: Breathing
IPSP
4.3: How Neurons Communicate
iris
6.6: Vision
Islets of Langerhans
8.6: Endocrine Glands
isotonic
12.3.3: Passive Transport
isthmus
8.6: Endocrine Glands

J

jejunum
2.2: Digestive Systems
juxtaglomerular cell
3.3: The Kidneys and Osmoregulatory Organs
juxtamedullary nephron
3.3: The Kidneys and Osmoregulatory Organs

K

kidney
3.3: The Kidneys and Osmoregulatory Organs
kinase
12.4.3: Propagation of the Signal
kinesthesia
6.2: Sensory Processes

L

labyrinth
6.5: Hearing and Vestibular Sensation
lactase
2.4: Digestive System Processes
lacuna
1.4: Animal Primary Tissues
large intestine
2.2: Digestive Systems
larynx
9.2: Systems of Gas Exchange
lens
6.6: Vision
leptin
8.6: Endocrine Glands
ligand
12.4.2: Signaling Molecules and Cellular Receptors
light microscope
12.2.2: Studying Cells
limbic system
5.1: The Central Nervous System
lipase
2.2: Digestive Systems
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12.1.4: Lipids
liver
2.2: Digestive Systems
lobes of the kidney
3.3: The Kidneys and Osmoregulatory Organs
Loop of Henle
3.3: The Kidneys and Osmoregulatory Organs
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1.4: Animal Primary Tissues
lower limb
7.2: Types of Skeletal Systems
LTD
4.3: How Neurons Communicate
LTP
4.3: How Neurons Communicate
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9.3: Gas Exchange across Respiratory Surfaces
lung volume
9.3: Gas Exchange across Respiratory Surfaces
luteinizing hormone (LH)
8.4: Regulation of Body Processes
lymph node
10.5: Blood Flow and Blood Pressure Regulation
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12.2.4: Eukaryotic Cells

M

macula densa
3.3: The Kidneys and Osmoregulatory Organs
major depression
5.3: Nervous System Disorders
malleus
6.5: Hearing and Vestibular Sensation
Malpighian tubule
3.4: Excretion Systems
Maltase
2.4: Digestive System Processes
mating factor
12.4.5: Signaling in Single-Celled Organisms
matrix
1.4: Animal Primary Tissues
mechanoreceptor
6.2: Sensory Processes
medulla
3.3: The Kidneys and Osmoregulatory Organs
Meissner’s corpuscle
6.3: Somatosensation
membrane potential
4.3: How Neurons Communicate
meninge
5.1: The Central Nervous System
Merkel's disc
6.3: Somatosensation
messenger RNA
12.1.6: Nucleic Acids
metacarpus
7.2: Types of Skeletal Systems
metatarsal
7.2: Types of Skeletal Systems
microfilament
12.2.6: The Cytoskeleton
microglia
4.2: Neurons and Glial Cells
microscope
12.2.2: Studying Cells
microtubule
12.2.6: The Cytoskeleton
microvilli
3.4: Excretion Systems
middle ear
6.5: Hearing and Vestibular Sensation
midsagittal plane
1.3: Animal Form and Function
mineral
2.3: Nutrition and Energy Production
mineralocorticoid
8.4: Regulation of Body Processes
mitochondria
12.2.4: Eukaryotic Cells
molality
3.2: Osmoregulation and Osmotic Balance
molarity
3.2: Osmoregulation and Osmotic Balance
mole
3.2: Osmoregulation and Osmotic Balance
monogastric
2.2: Digestive Systems
monomer
12.1.2: Synthesis of Biological Macromolecules
Monosaccharide
12.1.3: Carbohydrates
motor end plate
7.3: Muscle Contraction and Locomotion
mucin
9.2: Systems of Gas Exchange
mucus
9.2: Systems of Gas Exchange
muscle contraction
7.3: Muscle Contraction and Locomotion
muscle spindle
6.3: Somatosensation
myelin
4.2: Neurons and Glial Cells
myocardial infarction
10.4: Mammalian Heart and Blood Vessels
myocardium
10.4: Mammalian Heart and Blood Vessels
myofibril
7.3: Muscle Contraction and Locomotion
myofilament
7.3: Muscle Contraction and Locomotion
myopia
6.6: Vision
myosin
7.3: Muscle Contraction and Locomotion

N

nasal cavity
9.2: Systems of Gas Exchange
negative feedback loop
1.5: Homeostasis
11.1: Homeostasis
Nephridia
3.4: Excretion Systems
nephridiopore
3.4: Excretion Systems
nephron
3.3: The Kidneys and Osmoregulatory Organs
Neural Stimuli
8.5: Regulation of Hormone Production
neurodegenerative disorder
5.3: Nervous System Disorders
neurons
4.2: Neurons and Glial Cells
neurotransmitter
12.4.2: Signaling Molecules and Cellular Receptors
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6.3: Somatosensation
nodes of Ranvier
4.2: Neurons and Glial Cells
norepinephrine
5.2: The Peripheral Nervous System
8.4: Regulation of Body Processes
nuclear envelope
12.2.4: Eukaryotic Cells
nucleic acid
12.1.6: Nucleic Acids
nucleoid
12.2.3: Prokaryotic Cells
nucleolus
12.2.4: Eukaryotic Cells
nucleoplasm
12.2.4: Eukaryotic Cells
nucleotide
12.1.6: Nucleic Acids
nucleus
12.2.4: Eukaryotic Cells

O

obstructive disease
9.4: Breathing
occipital lobe
5.1: The Central Nervous System
odorant
6.4: Taste and Smell
olfaction
6.4: Taste and Smell
olfactory bulb
6.4: Taste and Smell
olfactory epithelium
6.4: Taste and Smell
olfactory receptor
6.4: Taste and Smell
oligodendrocyte
4.2: Neurons and Glial Cells
omega fat
12.1.4: Lipids
omnivore
2.2: Digestive Systems
open circulatory system
10.2: Overview of the Circulatory System
organ of corti
6.5: Hearing and Vestibular Sensation
organelle
12.2.4: Eukaryotic Cells
osmoconformer
3.2: Osmoregulation and Osmotic Balance
osmolarity
12.3.3: Passive Transport
osmoreceptor
8.4: Regulation of Body Processes
osmoregulation
3.2: Osmoregulation and Osmotic Balance
osmoregulator
3.2: Osmoregulation and Osmotic Balance
osmosis
3.2: Osmoregulation and Osmotic Balance
12.3.3: Passive Transport
osmotic balance
3.2: Osmoregulation and Osmotic Balance
osmotic pressure
3.2: Osmoregulation and Osmotic Balance
ossicle
6.5: Hearing and Vestibular Sensation
osteon
1.4: Animal Primary Tissues
ostium
10.2: Overview of the Circulatory System
outer ear
6.5: Hearing and Vestibular Sensation
oval window
6.5: Hearing and Vestibular Sensation
oxygen dissociation curve
9.5: Transport of Gases in Human Bodily Fluids
oxytocin
8.4: Regulation of Body Processes

P

Pacinian corpuscle
6.3: Somatosensation
pancreas
2.2: Digestive Systems
8.6: Endocrine Glands
pancreatic islet
8.6: Endocrine Glands
papilla
6.4: Taste and Smell
paracrine signal
12.4.2: Signaling Molecules and Cellular Receptors
parafollicular cell
8.6: Endocrine Glands
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5.2: The Peripheral Nervous System
parathyroid gland
8.6: Endocrine Glands
parathyroid hormone
8.4: Regulation of Body Processes
parietal lobe
5.1: The Central Nervous System
Parkinson's disease
5.3: Nervous System Disorders
partial pressure
9.3: Gas Exchange across Respiratory Surfaces
particulate matter
9.2: Systems of Gas Exchange
passive transport
12.3.3: Passive Transport
patella
7.2: Types of Skeletal Systems
pectoral girdle
7.2: Types of Skeletal Systems
pelvic girdle
7.2: Types of Skeletal Systems
pepsin
2.2: Digestive Systems
pepsinogen
2.2: Digestive Systems
peptide bond
12.1.5: Proteins
peptide hormone
8.2: Types of Hormones
perception
6.2: Sensory Processes
pericardium
10.4: Mammalian Heart and Blood Vessels
peripheral protein
12.3.2: Components and Structure
peripheral resistance
10.5: Blood Flow and Blood Pressure Regulation
perirenal fat capsule
3.3: The Kidneys and Osmoregulatory Organs
peristalsis
2.2: Digestive Systems
peritubular capillary network
3.3: The Kidneys and Osmoregulatory Organs
peroxisome
12.2.4: Eukaryotic Cells
phalange
7.2: Types of Skeletal Systems
pharynx
9.2: Systems of Gas Exchange
pheromone
6.4: Taste and Smell
Phosphatase
12.4.4: Response to the Signal
phosphodiester
12.1.6: Nucleic Acids
phosphodiesterase
8.3: How Hormones Work
12.4.4: Response to the Signal
phospholipid
12.1.4: Lipids
physiological dead space
9.4: Breathing
pia mater
5.1: The Central Nervous System
pinna
6.5: Hearing and Vestibular Sensation

pinocytosis
12.3.5: Bulk Transport
pituitary
8.6: Endocrine Glands
pituitary dwarfism
8.4: Regulation of Body Processes
pituitary gland
8.6: Endocrine Glands
pKa
12.4.3: Propagation of the Signal
plasma
10.3: Components of the Blood
plasma membrane
12.2.4: Eukaryotic Cells
plasma membrane hormone receptor
8.3: How Hormones Work
plasmodesma
12.2.7: Connections between Cells and Cellular Activities
plasmolysis
12.3.3: Passive Transport
platelet
10.3: Components of the Blood
pleura
9.4: Breathing
pleurisy
9.4: Breathing
polymer
12.1.2: Synthesis of Biological Macromolecules
polynucleotide
12.1.6: Nucleic Acids
polypeptide
12.1.5: Proteins
polysaccharide
12.1.3: Carbohydrates
positive feedback loop
1.5: Homeostasis
11.1: Homeostasis
posterior pituitary
8.6: Endocrine Glands
potocytosis
12.3.5: Bulk Transport
precapillary sphincter
10.5: Blood Flow and Blood Pressure Regulation
presbyopia
6.6: Vision
primary active transport
12.3.4: Active Transport
primary bronchus
9.2: Systems of Gas Exchange
primary structure
12.1.5: Proteins
prokaryote
12.2.3: Prokaryotic Cells
prolactin
8.4: Regulation of Body Processes
Proprioception
5.1: The Central Nervous System
6.2: Sensory Processes
protein
12.1.5: Proteins
protein kinase A
12.4.3: Propagation of the Signal
protostome
1.1: Features Used to Classify Animals
proventriculus
2.2: Digestive Systems
proximal convoluted tubule
3.3: The Kidneys and Osmoregulatory Organs
pseudocoelomate
1.1: Features Used to Classify Animals
pseudostratified
1.4: Animal Primary Tissues
pulmocutaneous circulation
10.2: Overview of the Circulatory System
pulmonary circulation
10.2: Overview of the Circulatory System
pump
12.3.4: Active Transport
pupil
6.6: Vision
Purkinje cell
4.2: Neurons and Glial Cells
pyramid
3.3: The Kidneys and Osmoregulatory Organs
pyrimidine
12.1.6: Nucleic Acids

Q

quaternary structure
12.1.5: Proteins
quorum sensing
12.4.5: Signaling in Single-Celled Organisms

R

radial cleavage
1.1: Features Used to Classify Animals
radial glia
4.2: Neurons and Glial Cells
radial symmetry
1.1: Features Used to Classify Animals
radius
7.2: Types of Skeletal Systems
reception
6.2: Sensory Processes
receptive field
6.2: Sensory Processes
receptor
12.4.2: Signaling Molecules and Cellular Receptors
receptor potential
6.2: Sensory Processes
recruitment
9.4: Breathing
rectum
2.2: Digestive Systems
red blood cell
10.3: Components of the Blood
refractory period
4.3: How Neurons Communicate
renal
3.3: The Kidneys and Osmoregulatory Organs
renal artery
3.3: The Kidneys and Osmoregulatory Organs
renal capsule
3.3: The Kidneys and Osmoregulatory Organs
renal column
3.3: The Kidneys and Osmoregulatory Organs
renal corpuscle
3.3: The Kidneys and Osmoregulatory Organs
renal fascia
3.3: The Kidneys and Osmoregulatory Organs
renal pelvis
3.3: The Kidneys and Osmoregulatory Organs
renal pyramid
3.3: The Kidneys and Osmoregulatory Organs
renal tubule
3.3: The Kidneys and Osmoregulatory Organs
renal vein
3.3: The Kidneys and Osmoregulatory Organs
renin
8.4: Regulation of Body Processes
residual volume
9.3: Gas Exchange across Respiratory Surfaces
resistance
9.4: Breathing
respiratory bronchiole
9.2: Systems of Gas Exchange
respiratory distress syndrome
9.4: Breathing
respiratory quotient
9.3: Gas Exchange across Respiratory Surfaces
respiratory rate
9.4: Breathing
restrictive disease
9.4: Breathing
retina
6.6: Vision
rhodopsin
6.6: Vision
rib
7.2: Types of Skeletal Systems
ribonucleic acid
12.1.6: Nucleic Acids
ribosomal RNA
12.1.6: Nucleic Acids
ribosome
12.2.4: Eukaryotic Cells
RNA
12.1.6: Nucleic Acids
rod
6.6: Vision
rough endoplasmic reticulum
12.2.5: The Endomembrane System and Proteins
roughage
2.2: Digestive Systems
Ruffini ending
6.3: Somatosensation
ruminant
2.2: Digestive Systems

S

sagittal plane
1.3: Animal Form and Function
salivary amylase
2.2: Digestive Systems
saltatory conduction
4.3: How Neurons Communicate
sarcolemma
7.3: Muscle Contraction and Locomotion
sarcomere
7.3: Muscle Contraction and Locomotion
satellite glia
4.2: Neurons and Glial Cells
Saturated fatty acid
12.1.4: Lipids
scapula
7.2: Types of Skeletal Systems
schizocoely
1.1: Features Used to Classify Animals
schizophrenia
5.3: Nervous System Disorders
Schwann cell
4.2: Neurons and Glial Cells
second messenger
12.4.3: Propagation of the Signal
secondary active transport
12.3.4: Active Transport
secondary messenger
12.4.3: Propagation of the Signal
secondary structure
12.1.5: Proteins
secretin
2.5: Digestive System Regulation
segmental artery
3.3: The Kidneys and Osmoregulatory Organs
selectively permeable
12.3.3: Passive Transport
semicircular canal
6.5: Hearing and Vestibular Sensation
semilunar valve
10.4: Mammalian Heart and Blood Vessels
sensory receptor
6.2: Sensory Processes
sensory transduction
6.2: Sensory Processes
serum
10.3: Components of the Blood
Set Point
1.5: Homeostasis
11.1: Homeostasis
sickle cell anemia
9.5: Transport of Gases in Human Bodily Fluids
signal integration
12.4.3: Propagation of the Signal
signal transduction
12.4.3: Propagation of the Signal
signaling cell
12.4.2: Signaling Molecules and Cellular Receptors
signaling pathway
12.4.3: Propagation of the Signal
simple epithelia
1.4: Animal Primary Tissues
sinoatrial node
10.4: Mammalian Heart and Blood Vessels
skeletal muscle tissue
7.3: Muscle Contraction and Locomotion
skull
7.2: Types of Skeletal Systems
small intestine
2.2: Digestive Systems
smooth endoplasmic reticulum
12.2.5: The Endomembrane System and Proteins
smooth muscle
7.3: Muscle Contraction and Locomotion
SMR
1.3: Animal Form and Function
solute
12.3.3: Passive Transport
somatosensation
5.1: The Central Nervous System
somatostatin
2.5: Digestive System Regulation
sphincter
2.2: Digestive Systems
spinal cord
5.1: The Central Nervous System
spinal nerve
5.2: The Peripheral Nervous System
spiral cleavage
1.1: Features Used to Classify Animals
spirometry
9.3: Gas Exchange across Respiratory Surfaces
squamous epithelia
1.4: Animal Primary Tissues
standard metabolic rate
1.3: Animal Form and Function
stapes
6.5: Hearing and Vestibular Sensation
starch
12.1.3: Carbohydrates
stereocilia
6.5: Hearing and Vestibular Sensation
sternum
7.2: Types of Skeletal Systems
steroid
12.1.4: Lipids
stomach
2.2: Digestive Systems
stratified epithelia
1.4: Animal Primary Tissues
stroke volume
10.5: Blood Flow and Blood Pressure Regulation
Sucrase
2.4: Digestive System Processes
sulcus
5.1: The Central Nervous System
summation
4.3: How Neurons Communicate
superior colliculus
6.6: Vision
superior vena cava
10.4: Mammalian Heart and Blood Vessels
suprachiasmatic nucleus
6.6: Vision
surfactant
9.4: Breathing
sympathetic nervous system
5.2: The Peripheral Nervous System
symporter
12.3.4: Active Transport
synapse
4.2: Neurons and Glial Cells
synaptic cleft
4.3: How Neurons Communicate
synaptic signal
12.4.2: Signaling Molecules and Cellular Receptors
synaptic vesicle
4.3: How Neurons Communicate
systemic circulation
10.2: Overview of the Circulatory System
systole
10.4: Mammalian Heart and Blood Vessels

T

target cell
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