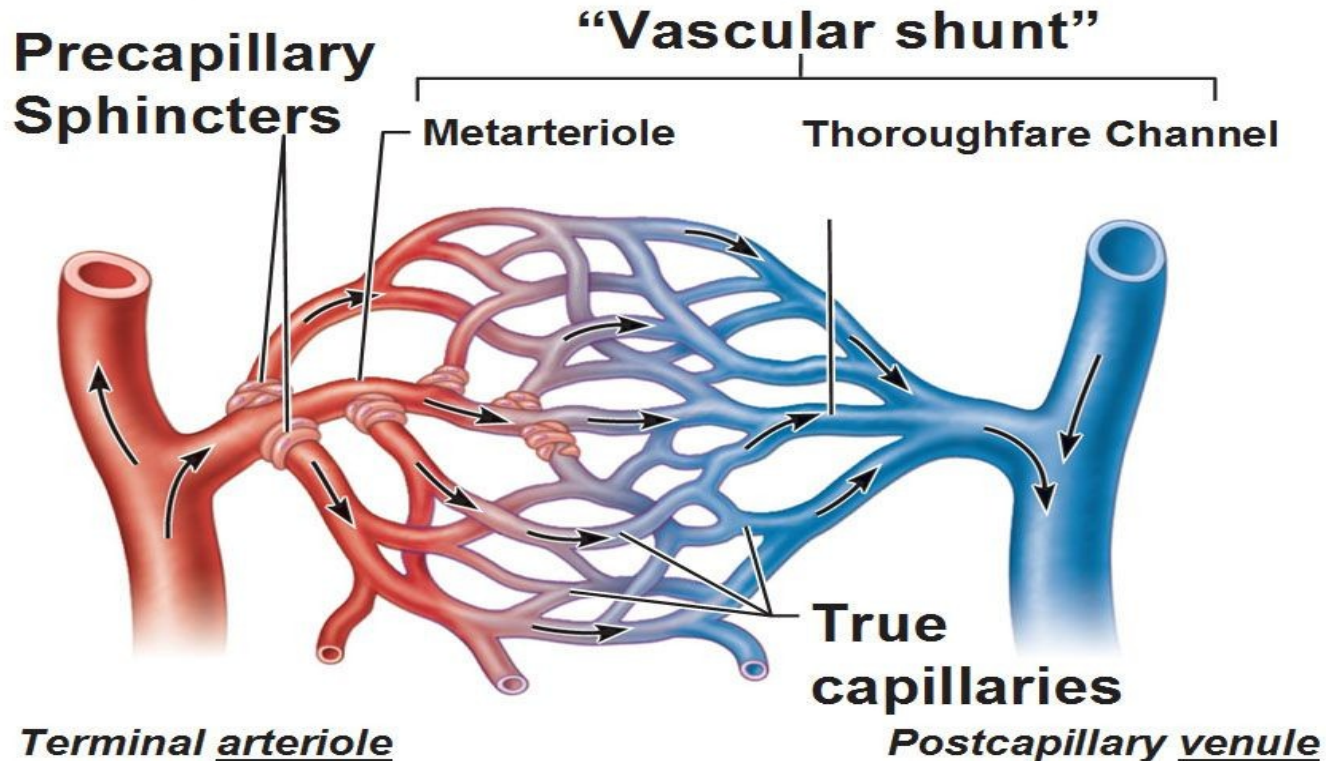


MICROCIRCULATION

FUNCTIONAL ANATOMY

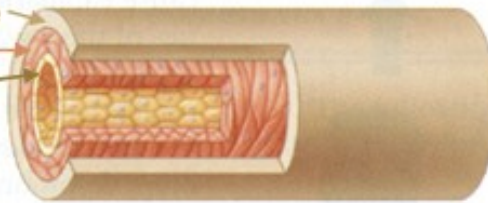
Microcirculation is circulation of the blood through the smallest vessels of the body – arteriols, capillaries and venules.



The principal function of the microcirculation is to permit the transfer of substances (water, solutes, gases) between the vascular system and the tissues.

STRUCTURE OF VESSEL WALL

Connective Tissue
Smooth Muscle
Endothelium
Muscular and Elastic, Thick walled



Artery

Muscular. Little connective tissue



Arteriole

Endothelial layer, no muscle



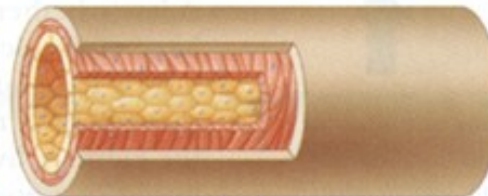
Capillary

Thin walls with some smooth muscle



Venule

Thin walled with smooth muscle, flacid



Vein

1

The capillary wall is about 1 μm thick.

2

The total area of all the capillary walls in the body exceeds 500 m^2 .

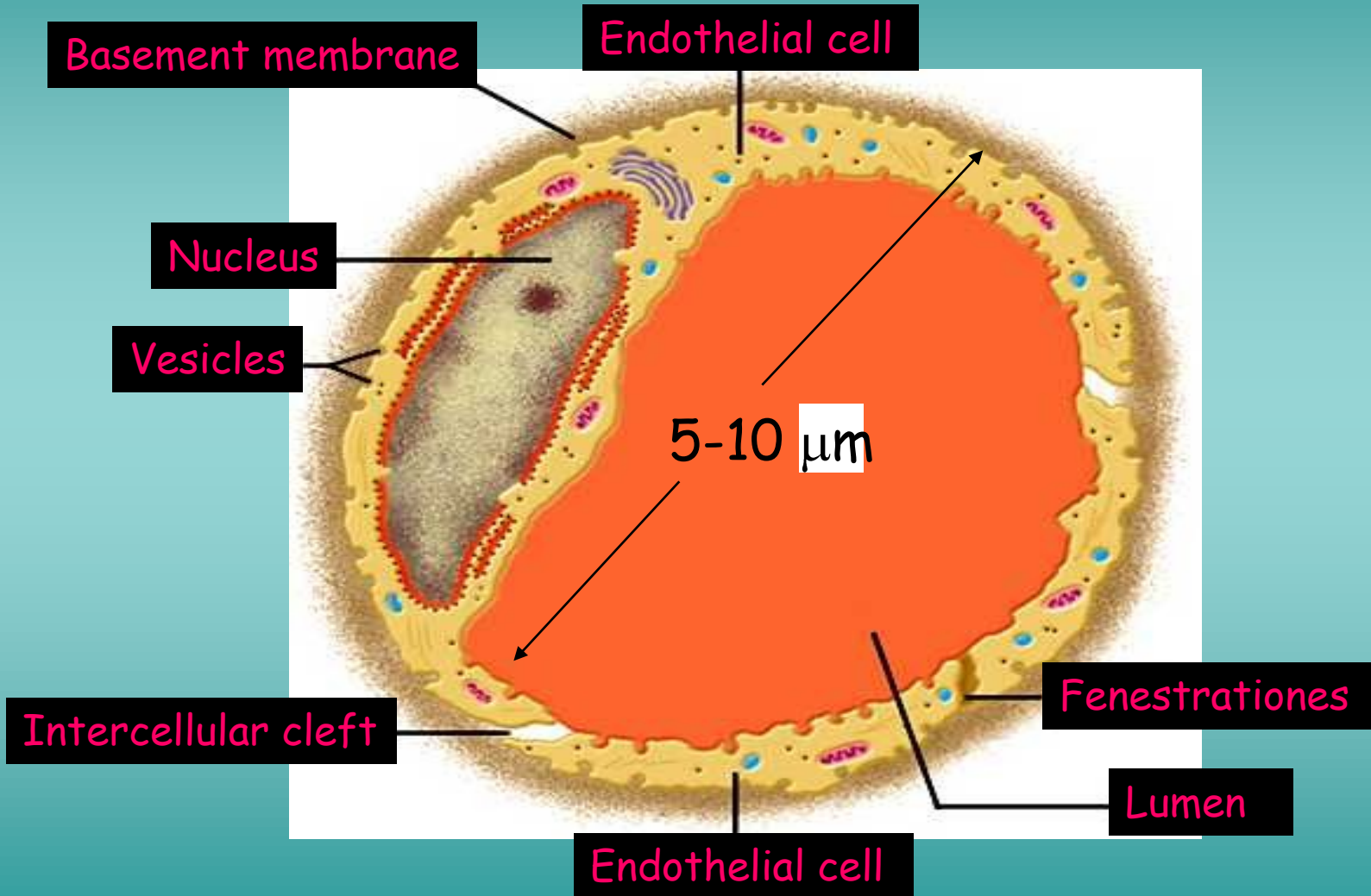
3

The rate of blood flow in capillaries is 0.2 - 1 mm/s.

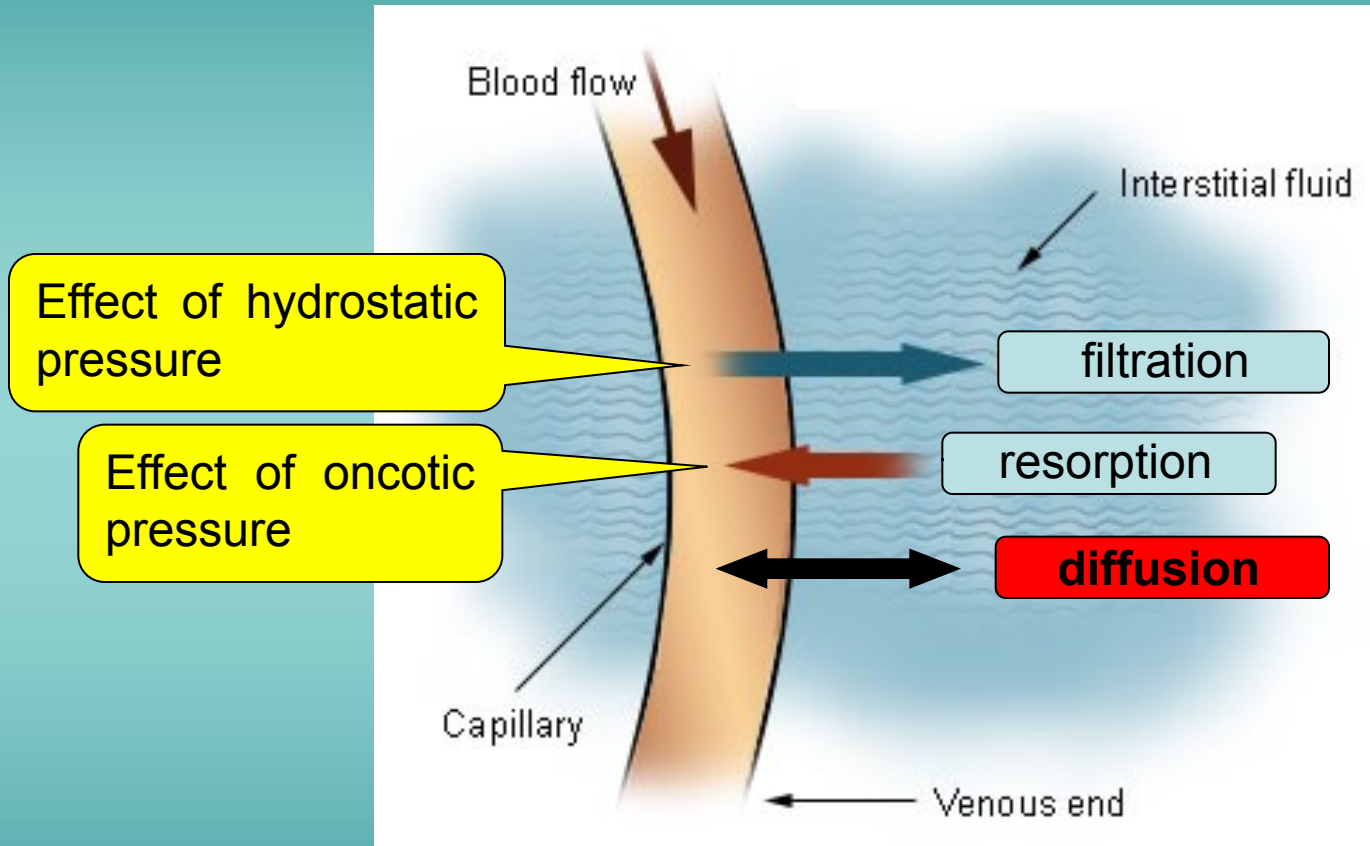
4

Transit time from arterial to venular end of a capillary is 1 - 2 seconds.

ULTRASTRUCTURE OF CAPILLARY

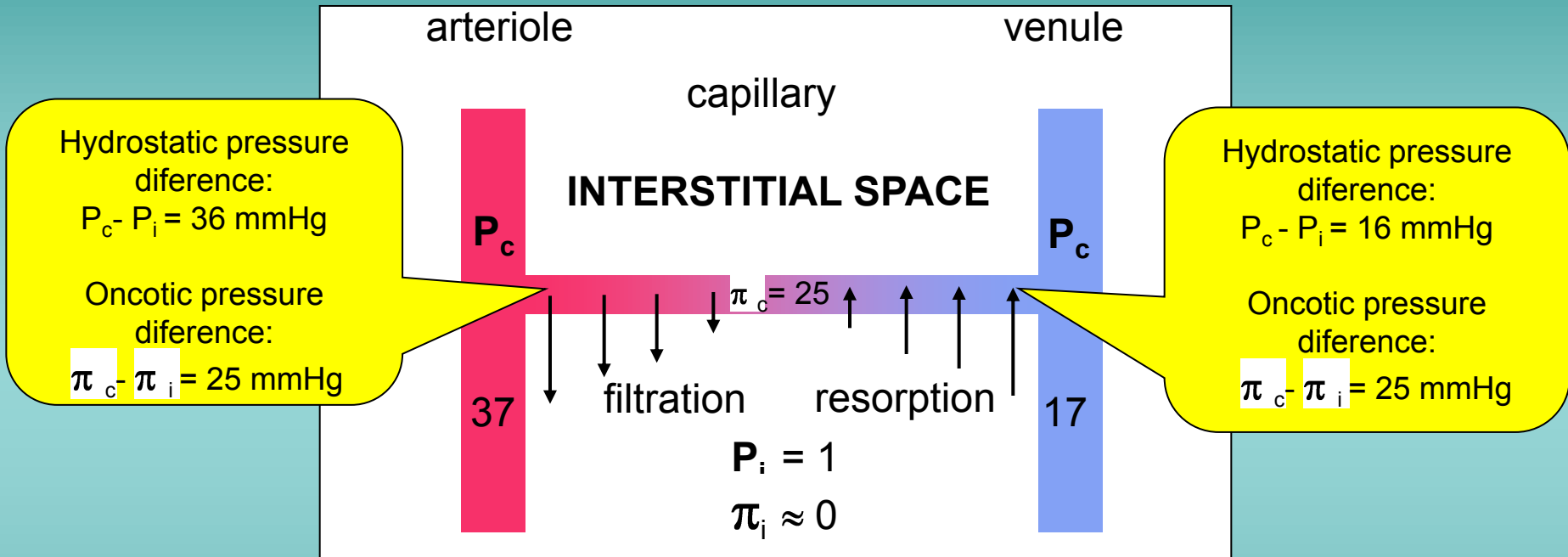


MOVEMENT OF FLUID ACROSS CAPILLARY WALL



The diffusion, filtration and resorption of water across capillary wall occur through Intercellular clefts, pores and fenestrations.

PRESSURE GRADIENTS ACROSS THE WALL OF CAPILLARY



CAPILLARY HYDROSTATIC PRESSURE $P_c = 37 - 17$ mmHg

INTERSTITIAL HYDROSTATIC PRESSURE $P_i = 1$ mmHg

CAPILLARY ONCOTIC PRESSURE $\pi_c = 25$ mmHg

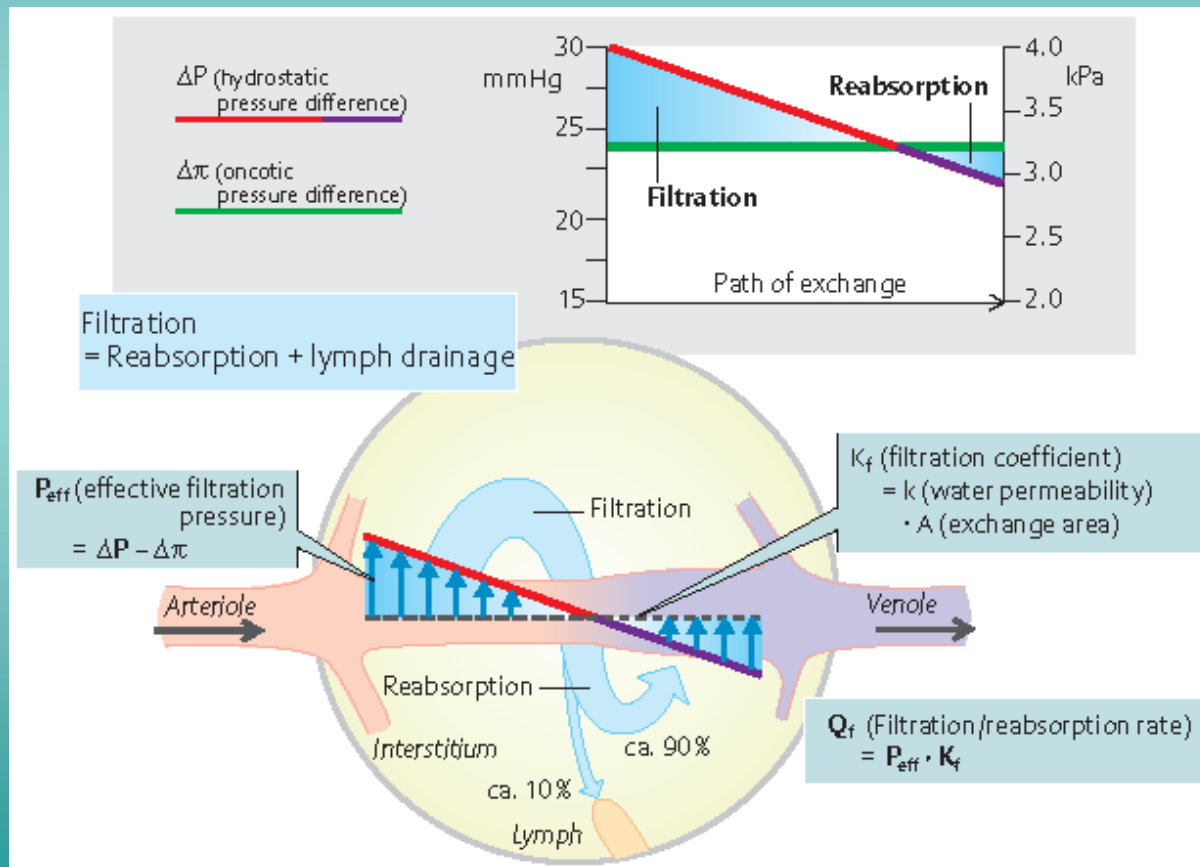
INTERSTITIAL ONCOTIC PRESSURE $\pi_i \approx 0$ mmHg

EXCHANGE OF FLUID VIA CAPILLARIES

Hydrostatic pressure difference

Oncotic pressure difference

$$([P_c - P_i] - \sigma [\pi_c - \pi_i]) - \text{effective (net) filtration pressure}$$



STARLING'S EQUATION

$$J_v = K_f([P_c - P_i] - \sigma[\pi_c - \pi_i])$$

J_v - NET FLUID MOVEMENT ACROSS CAPILLARY WALL

K_f - Filtration coefficient

P_c - capillary hydrostatic pressure

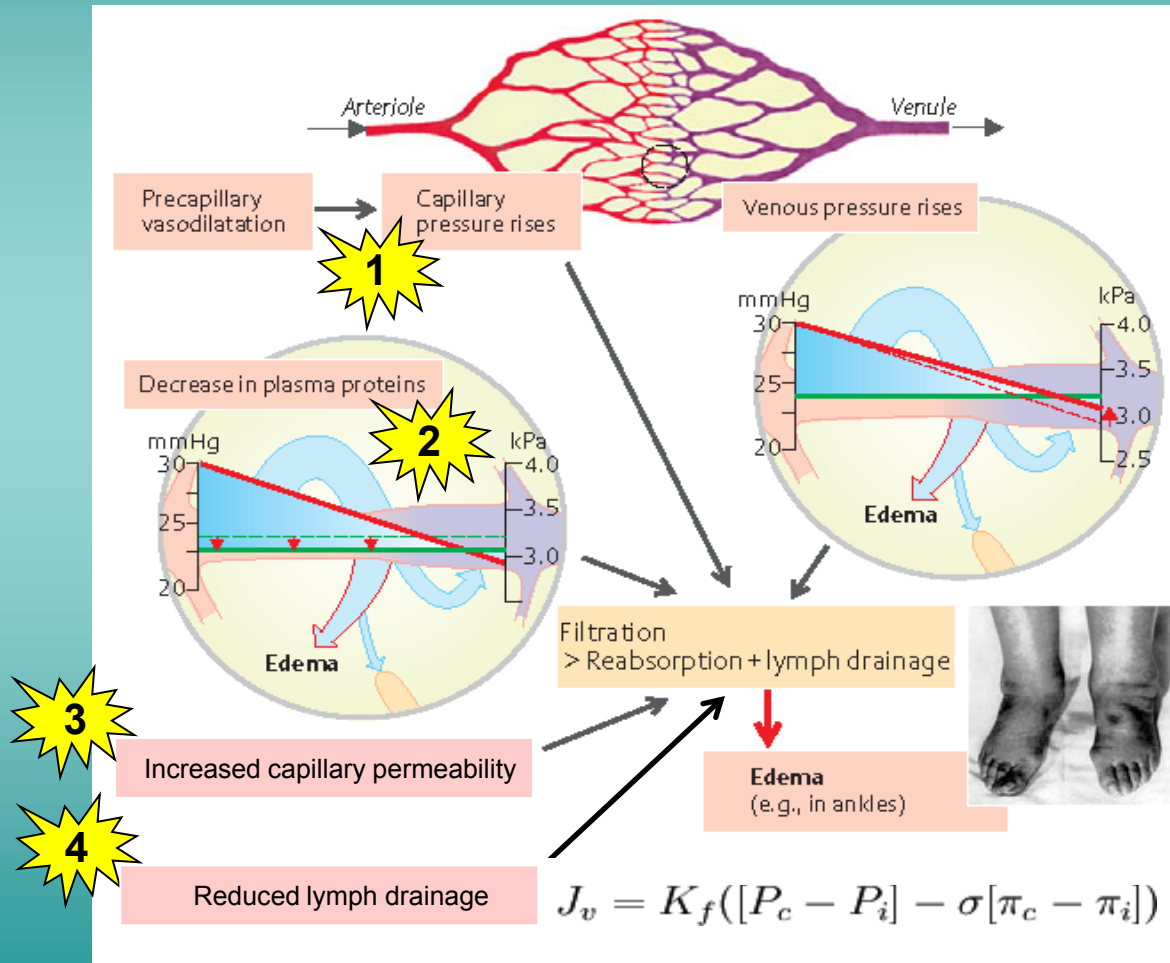
P_i - interstitial hydrostatic pressure

π_c - capillary oncotic pressure

π_i - interstitial oncotic pressure

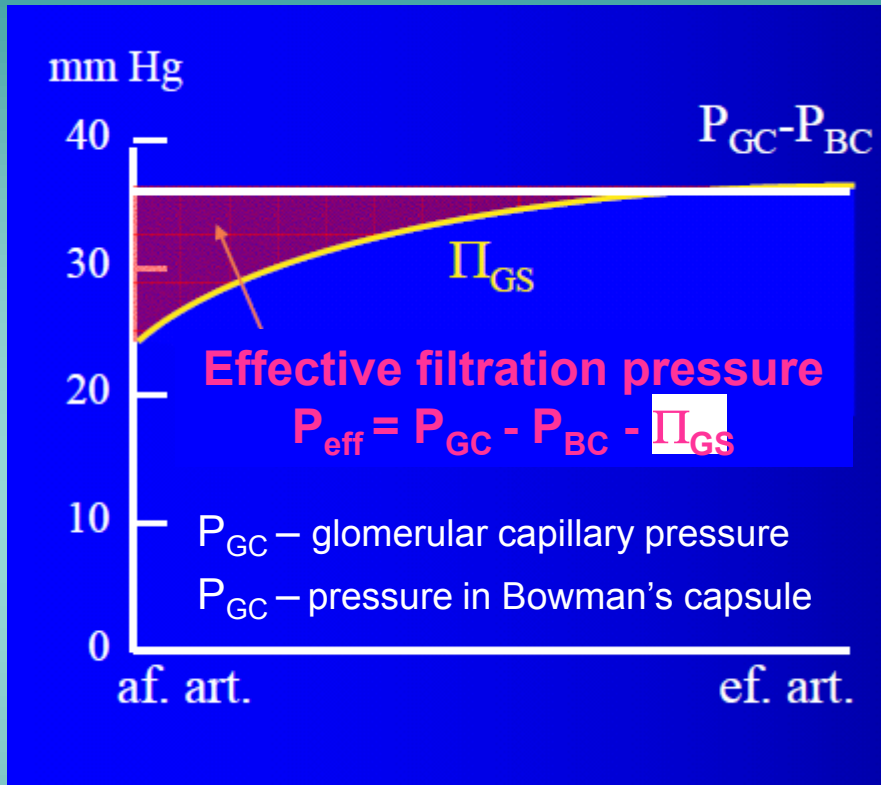
σ - coefficient permeabilty

CAUSES OF INCREASED INTERSTITIAL FLUID VOLUME (EDEMA)



SPECIAL CASES

● Glomerular microcirculation



P_{GC} and P_{BC} are ~45 and 10 mmHg, respectively.

Effective filtration pressure (P_{eff}) at the arterial end of the capillaries equals 10 mmHg (red coloured area). Because of the high filtration fraction, the plasma protein concentration and, thus, glomerular oncotic pressure (Π_{GS}) along the glomerular capillaries increase and P_{eff} decreases. Thus, filtration ceases (near distal end of capillary) when Π_{GS} rises to about 35 mmHg, decreasing P_{eff} to zero.

● Pulmonary microcirculation

The hydrostatic and osmotic pressure gradients in the lung capillaries are small (~10 mmHg) and nearly balanced under physiological conditions ensuring equilibrium between filtration and reabsorption. Any excess of filtration over reabsorption is drained via pulmonary lymphatic.

MOVEMENT OF SOLUTES ACCROSS CAPILLARY WALL

- **DIFFUSION** - if there is, for a certain solute, a concentration difference between the plasma and interstitial space the solute diffuses across the capillary wall. Lipid-soluble molecules (e.g. O_2 , CO_2) move across the capillary wall directly while lipid insoluble molecules (e.g. ions, urea) move across the capillary wall by Intercellular clefts, pores or fenestrations.
- **SOLVENT DRAG** - The dissolved particles are dragged through the capillary wall along with filtered and reabsorbed water.

!!! TO REMEMBER !!!

Four forces known as Starling forces determine net fluid movement across the capillary membranes.

P_c = Capillary Pressure → Tends to push fluid out of the capillary.

P_i = Interstitial Fluid Pressure → Tends to push fluid into the capillary.

π_c = Plasma Colloid Osmotic Pressure → Tends to cause osmosis of fluid into capillary.

π_i = Interstitial fluid colloid osmotic pressure → Tends to cause osmosis of fluid out of the capillary

$$\text{Effective filtration pressure} = ((P_c - P_i) - (\pi_c - \pi_i))$$

The diffusion is the key factor in providing exchange of gases, substrates and waste products between the capillaries and the tissue cells.

CAUSES OF EDEMA DEVELOPMENT:

- ↑ **Capillary Pressure** - P_c (↑ hydrostatic pressure, heart failure)
- ↓ **Plasma Proteins** (nephrotic syndrome, liver cirrhosis)
- ↑ **Capillary Permeability** - K_f (infections, inflammations)
- ↓ **Lymph drainage** - π_i (lymphatic blockage)