

M U N I
M E D

Energetic metabolism

Physiology of Exercise

Energetic metabolism

= summary of all chemical (and physical) processes included in:

1. **Production of energy from internal and external sources**
2. **Synthesis and degradation** of structural and functional tissue components
3. Excretion of **waste products** and **toxins** from body

Metabolic speed: amount of energy released per unit of time

Calorie (cal) = amount of thermal energy, necessary for warming up 1g of water for 1°C, from 15°C to 16°C

SACCHARIDES

LIPIDS

PROTEINS

ENERGY INPUT = ENERGY CONSUMPTION

MECHANIC WORK

Muscle contraction
Movement of cells (flagella),
organelles

SYNTHESIS

Energetic stores production
Tissue growth
Essential molecules production

MEMBRANE TRANSPORT

Minerals
Organic substances
AA

PRODUCTION AND TRANSMISSION OF SIGNALS

Electrical
Chemical
Mechanical

HEAT PRODUCTION

Body temperature control
Ineffective chemical reactions

DETOXICATION DEGRADATION

Urine production
Conjugation
Oxidation
Reduction

I. thermodynamic law: At steady state, **input** of energy equals to its **expenditure**

Input \longleftrightarrow stores

Expenditure of energy = external work + energy stores + heat

Intermediate stages: various chemical, mechanical and thermal reactions

Energy intake (input)

Saccharides, **lipids**, proteins

Burning releases: 4.1kcal/g, 9.3kcal/g, 5.3kcal/g (4.1 in body)

1kcal=4184J

Conversion of proteins and saccharides to lipids – effective storage of the energy

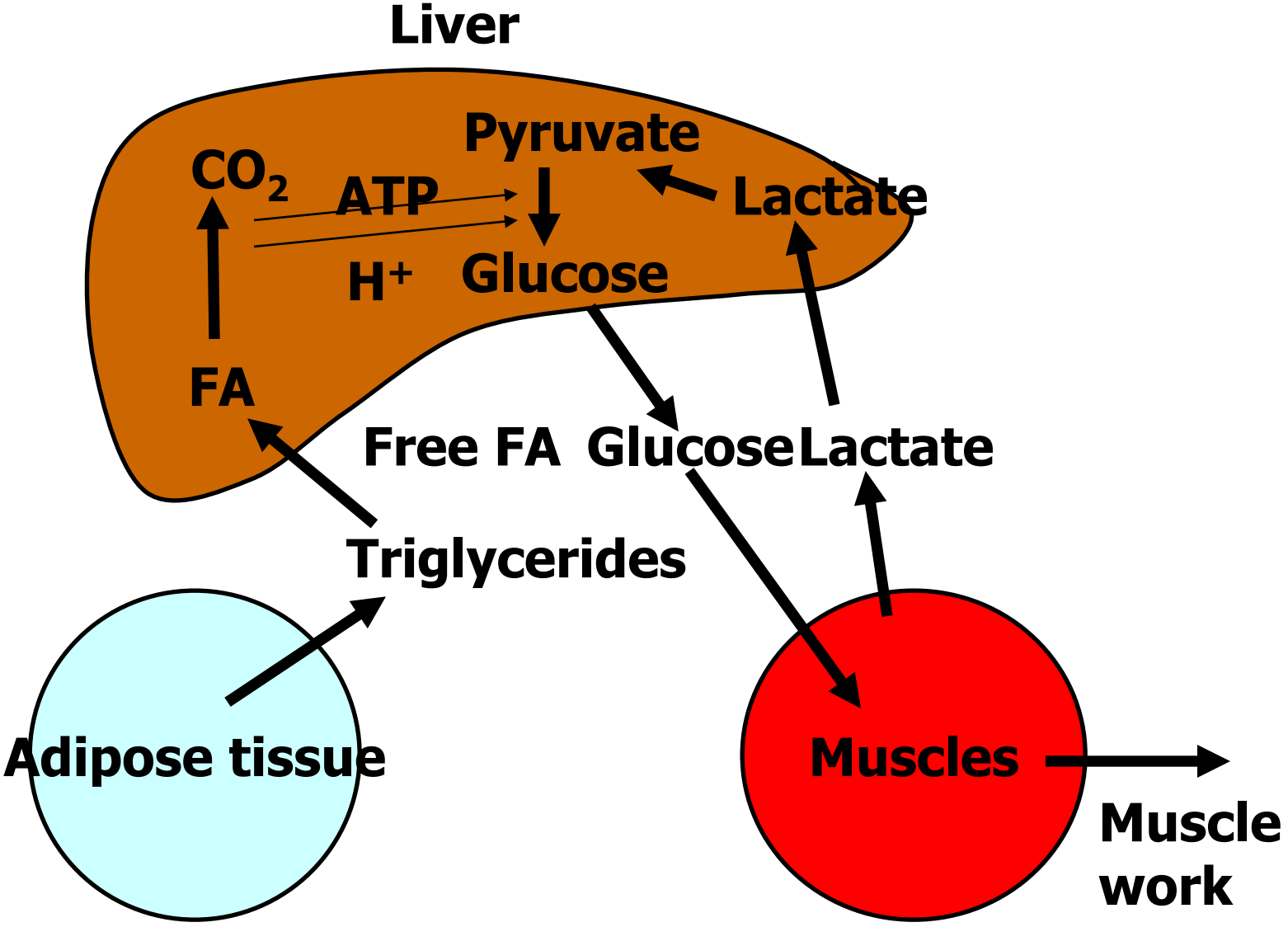
Conversion of proteins to saccharides – need of „fast“ energy

BUT: there is no significant conversion of lipids to saccharides

Energy output

1. **At rest:** basal metabolism; 8 000 kJ / day; 200-250 ml O₂/min; directly depends on body mass and surface; decreases with age; increases with ambient temperature; decreases by 10-15% during sleep; genetically determined **75%BM**
 2. **After meal:** slight increase in energetic output – **specific dynamic effect** – e.g. for glycogen formation **7%BM**
 3. **In sitting position:** spontaneous physical activity **18%BM**
 4. **Facultative thermogenesis:** non-shivering
-
5. **During exercise:** energetically most demanding; individual; changes according to season

Transport of energy among organs



- Energy **stores**: ATP, creatinphosphate, GTP, CTP (cytosin), UTP (uridin), ITP (inosin)
- Macroergic bond – 12kcal/mol
- Efficiency is not 100% - 18kcal of substrate needed for 1 bond in ATP
- Daily: 63 kg of ATP (128mol)
- Glycolysis: only short-lasting source of energy (2 pyruvates – only approx. 8% of glucose energy);

supply of glucose is limited, lactate

RESPIRATORY QUOTIENT

$$\mathbf{RQ} = V_{\text{CO}_2} : V_{\text{O}_2}$$

(per unit of time, at steady state)

Saccharides: RQ = 1

Lipids: RQ = 0.7

Proteins: RQ = 0.8

R – ratio of respiratory exchange (no steady state!)

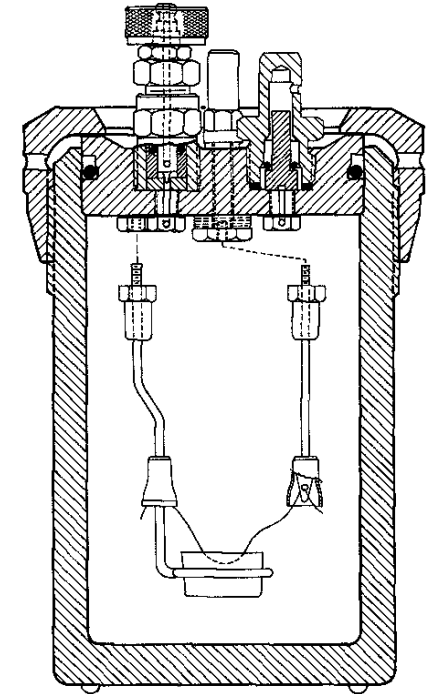
Storage and transport of energy

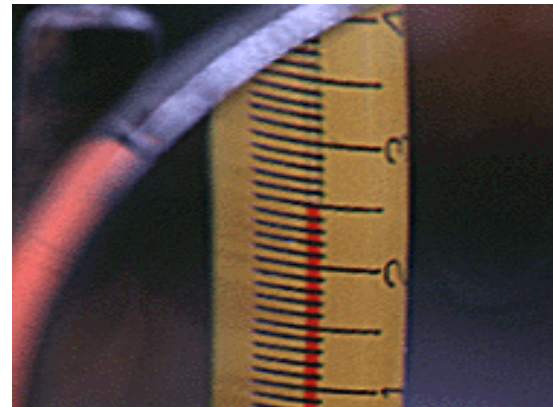
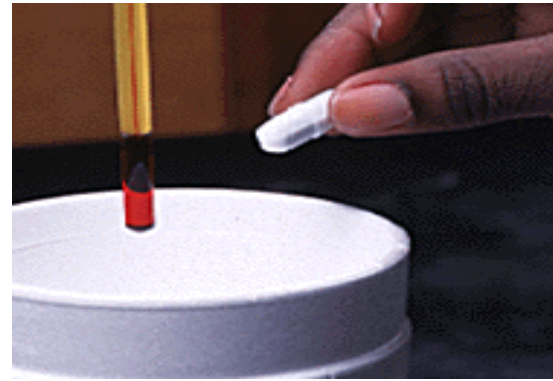
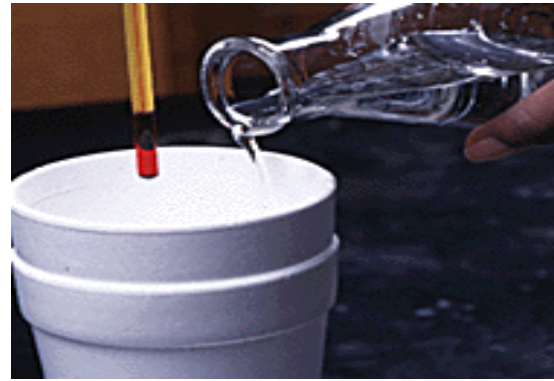
- Both input and output of energy are irregular – **necessity of storage**
- **75%** of stores: triglycerides (9kcal/g) in **adipose tissue** (10-30% of body mass), lasts up to 2 months ; source – dietary FA and esterification with α -glycerolphosphate or synthesis from acetylCoA (from glycolysis) – saccharides are converted to more effective store of energy = lipids
- **25%** of stores: **proteins** (4kcal/g); conversion to saccharides (gluconeogenesis during stress); adverse effects on organism
- Less than **1%** of stores: **saccharides** (4kcal/g) as glycogen; important for CNS!!! and short-term enormous exercise; $\frac{1}{4}$ of glycogen stores in liver (75-100g), rest in muscles (300-400g); liver glycogen – glycogenolysis – release of glucose; muscle glycogen – used only in muscles (no glukoso-6-phosphatase)
- **Gluconeogenesis**: from pyruvate, lactate and glycerol and AA (except of leucin); NO from acetyl-CoA
- **Storage and transport of energy requires input of other energy**: 3% from original energy – lipids (triglycerides to adipose tissue), 7% - glucose (glycogen), 23% - conversion of saccharides to lipids, 23% - conversion of AA to proteins or glucose (glycogen).

Direct calorimetry

= measurement of energy released by burning of diet out of body (oxidation of compounds in a **calorimeter**)

1. Caloric bomb
2. Whole-body calorimeter (for laboratory animals, for humans)





Indirect calorimetry

- Amount of consumed O_2 .
- Amount of energy released for 1mol of consumed O_2 ; differs according to type of oxidized compound (the effect of diet composition)



Factors affecting (basal) metabolism

- Height, weight, **body surface**
- Gender
- Age
- Body temperature
- Emotional status
- High or low ambient temperature (the dependence is expressed as a **U** curve)
- Thyroidal status
- Plasmatic level of catecholamines
- Muscle work (before and/or during measurement)
- Food intake (before measurement)

Work (physical activity, exercise)

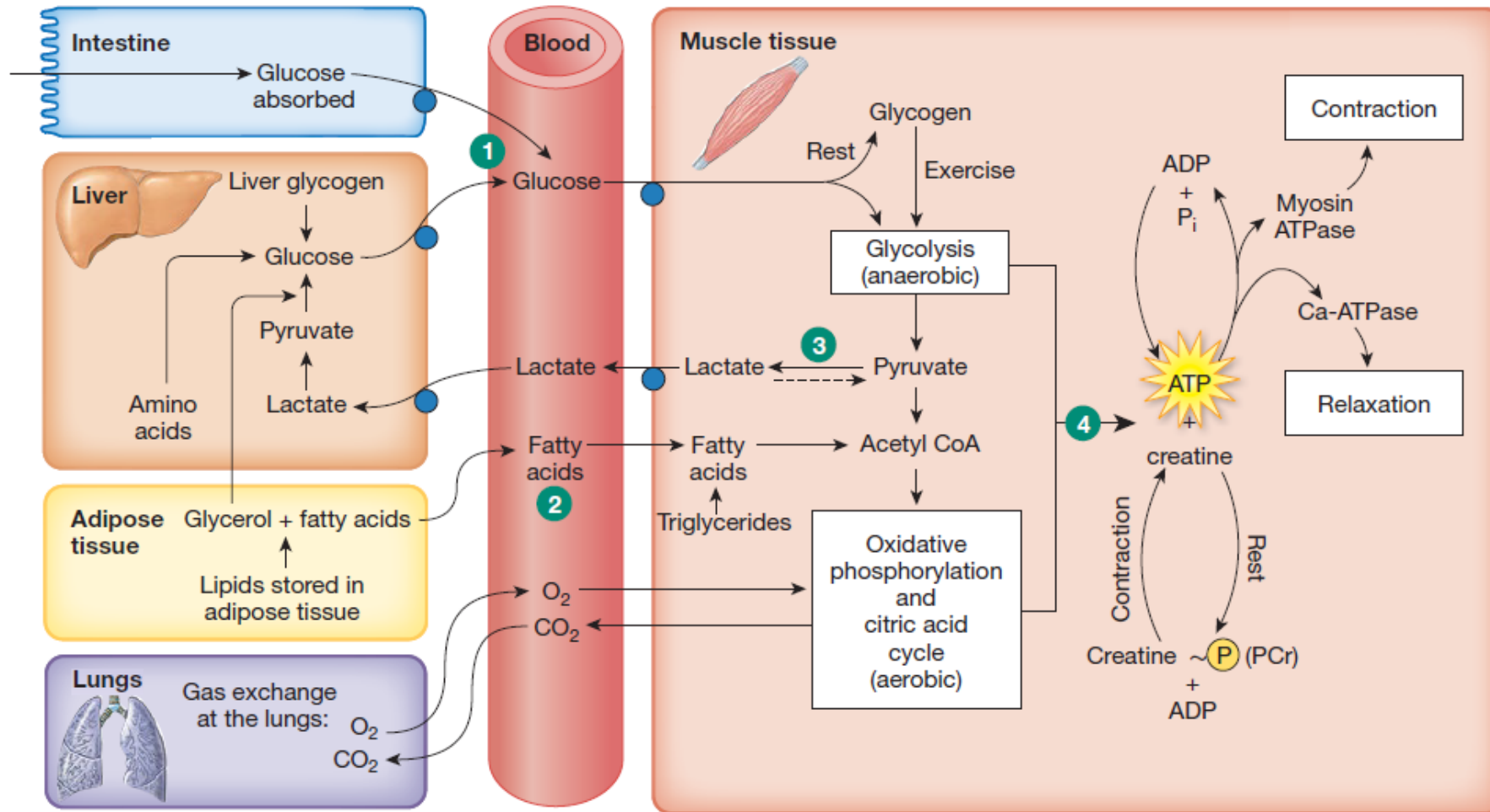


Source: www.freepik.com. Photos created by freepik and standret

Skeletal muscle

- Contraction: isometric (**static** work) vs. isotonic (**dynamic** work)
- Blood flow depends on muscle tension
- **Metabolic autoregulation**: $\downarrow pO_2$; $\uparrow pCO_2$; $\downarrow pH$; $\uparrow K^+$; \uparrow local temperature
- Metabolism: aerobic vs. anaerobic
- Muscle spindles – muscle tension – afferentation of exercise pressor reflex

Skeletal muscle metabolism



Reaction of the body to exercise

- Sympathetic NS (**ergotropic** system)
- Cardiovascular changes
- Respiratory changes
- Metabolic changes

- HOMEOSTASIS

Anticipation of exercise

- Reaction of the body (cardiovascular system)
- Prepares the body for the increased metabolic turnover in the exercising skeletal muscles

- Similar to the early response to exercise
- Resembling fight-or-flight reaction

Cardiovascular response to exercise

- Increased cardiac output

- **Redistribution of blood:**

Vasoconstriction in inactive skeletal muscles, the GIT, **skin**, (kidneys)

Vasodilation in active muscles (**metabolic autoregulation**)

- Increased venous return

- Histamine release

- Epinephrine release (adrenal medulla)

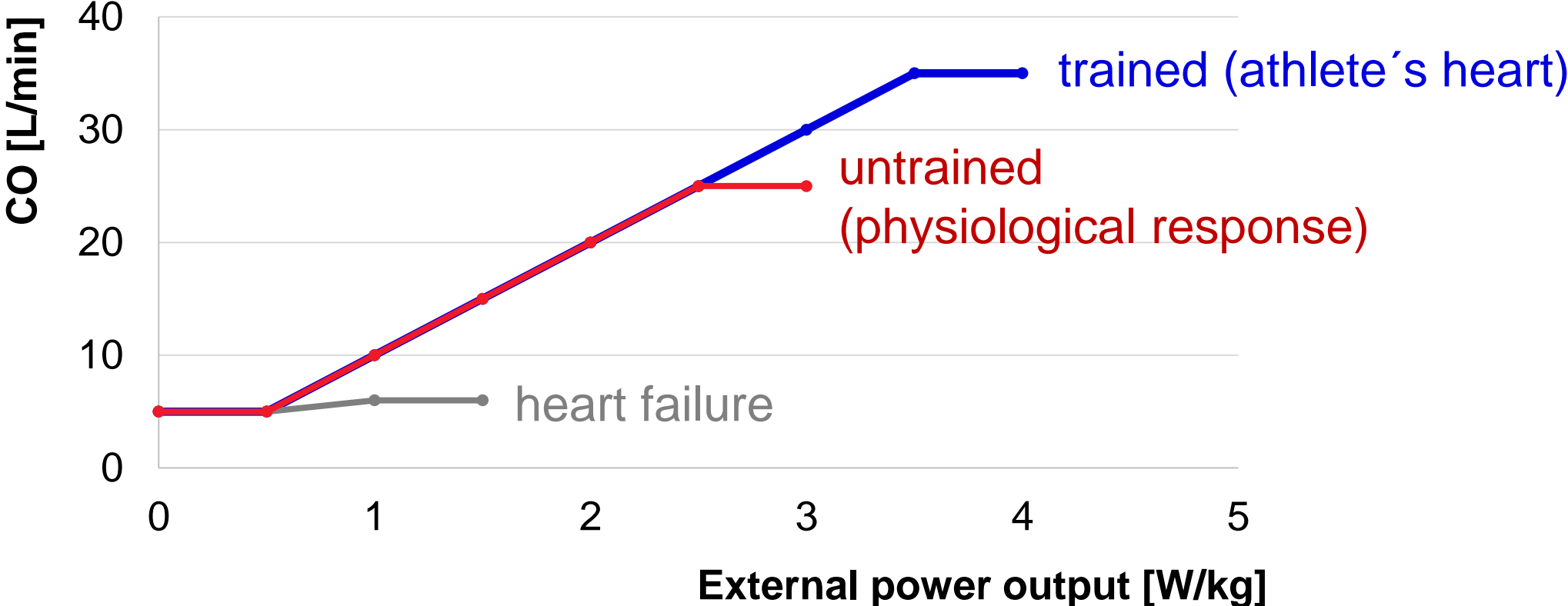
- Thermoregulation

Increase of cardiac output. Cardiac reserve

- $CO = SV \times HR$ (SNS: positive inotropic and chronotropic effects)
- **Cardiac reserve = maximal CO / resting CO** (4 – 7)
- Coronary reserve = maximal CF / resting CF (~3.5)
- Chronotropic reserve = maximal HR / resting HR (3 – 5)
- Volume reserve = maximal SV / resting SV (~1.5)

CO – cardiac output; CF – coronary flow; SV – stroke volume; HR – heart rate

Cardiac reserve in healthy and failing heart



Changes of arterial blood pressure

PARAMETER	AT REST	DURING EXERCISE	INCREASE (x)
Cardiac output [L/min]	5 – 6	25 (35)	4 – 5 (7) <i>cardiac reserve</i>
Heart rate [1/min]	(45) 60-90	190 – 200 (220) <i>age-dependent</i>	3 – 5 <i>chronotropic reserve</i>
Stroke volume [mL]	75	115	~1.5 <i>volume reserve</i>
Systolic BP [mmHg]	120	<i>static work</i> ↑ <i>dynamic work</i> ↑↑	
Diastolic BP [mmHg]	70	<i>static work</i> ↑↑↑ <i>dynamic work</i> – / ↓	
Mean arterial P (MAP) [mmHg]	~90	<i>static work</i> ↑ <i>dynamic work</i> – / ↑	
Muscle perfusion [mL/min/100g]	2 – 4	60 – 120 (180) <i>static vs. dynamic work</i>	30 (10% CO _{max})

Respiratory response to exercise

- Respiratory centre - \uparrow ventilation
 - chemoreceptors: \uparrow $p\text{CO}_2$ + \downarrow pH
 - proprioceptors in lungs

- Sympathetic stimulation (stress – anticipation)

Respiratory response to exercise

PARAMETER	AT REST	DURING EXERCISE	INCREASE (x)
Ventilation [L/min]	6 – 12	90 – 120	15 – 20 <i>respiratory reserve</i>
Breathing frequency [1/min]	12 – 16	40 – 60	4 – 5
Tidal volume (V_T) [mL]	0.5 – 0.75	~ 2	3 – 4
Pulmonary artery blood flow [mL/min]	5 – 6	25 – 35	4 – 6
O₂ uptake (V_{O_2}) [mL/min]	250 – 300	~ 3000	10 – 12 (25)
CO₂ production [mL/min]	~ 200	~ 8000	~ 40

Oxygen uptake by lungs

– Spiroergometry

– Resting \dot{V}_{O_2} : ~**3.6** mL O₂ / (min x kg)

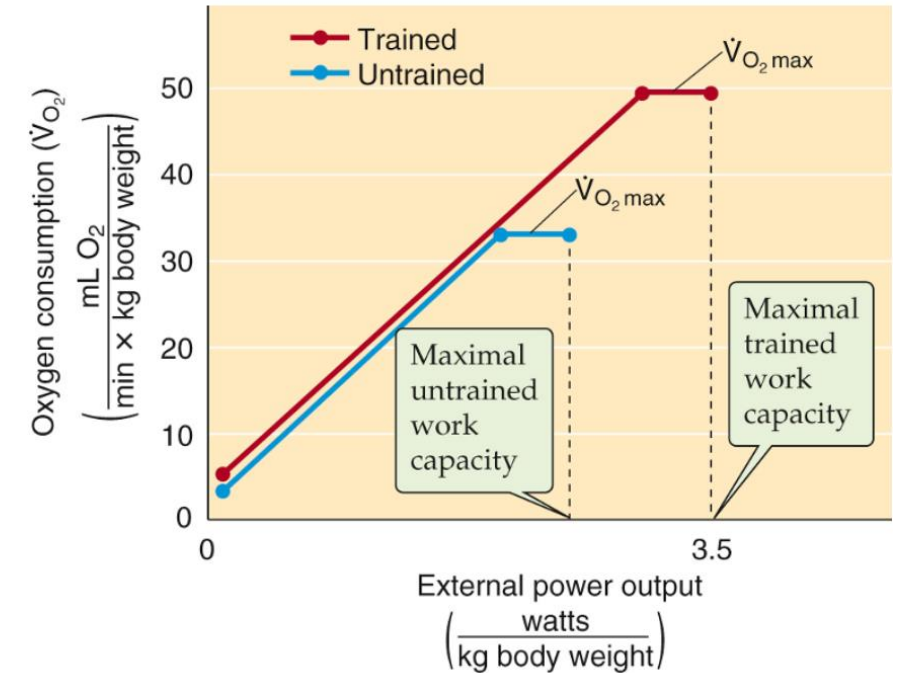
– $\dot{V}_{O_2 \max}$ – objective index for aerobic power

– untrained middle age person: **30 – 40** mL O₂ / (min x kg)

– elite endurance athletes: **80 – 90** mL O₂ / (min x kg)

– HF / COPD patients: **10 – 20** mL O₂ / (min x kg)

Adopted from:
<https://studentconsult.inkling.com/read/boron-medical-physiology-3e/chapter-60/figure-60-6>



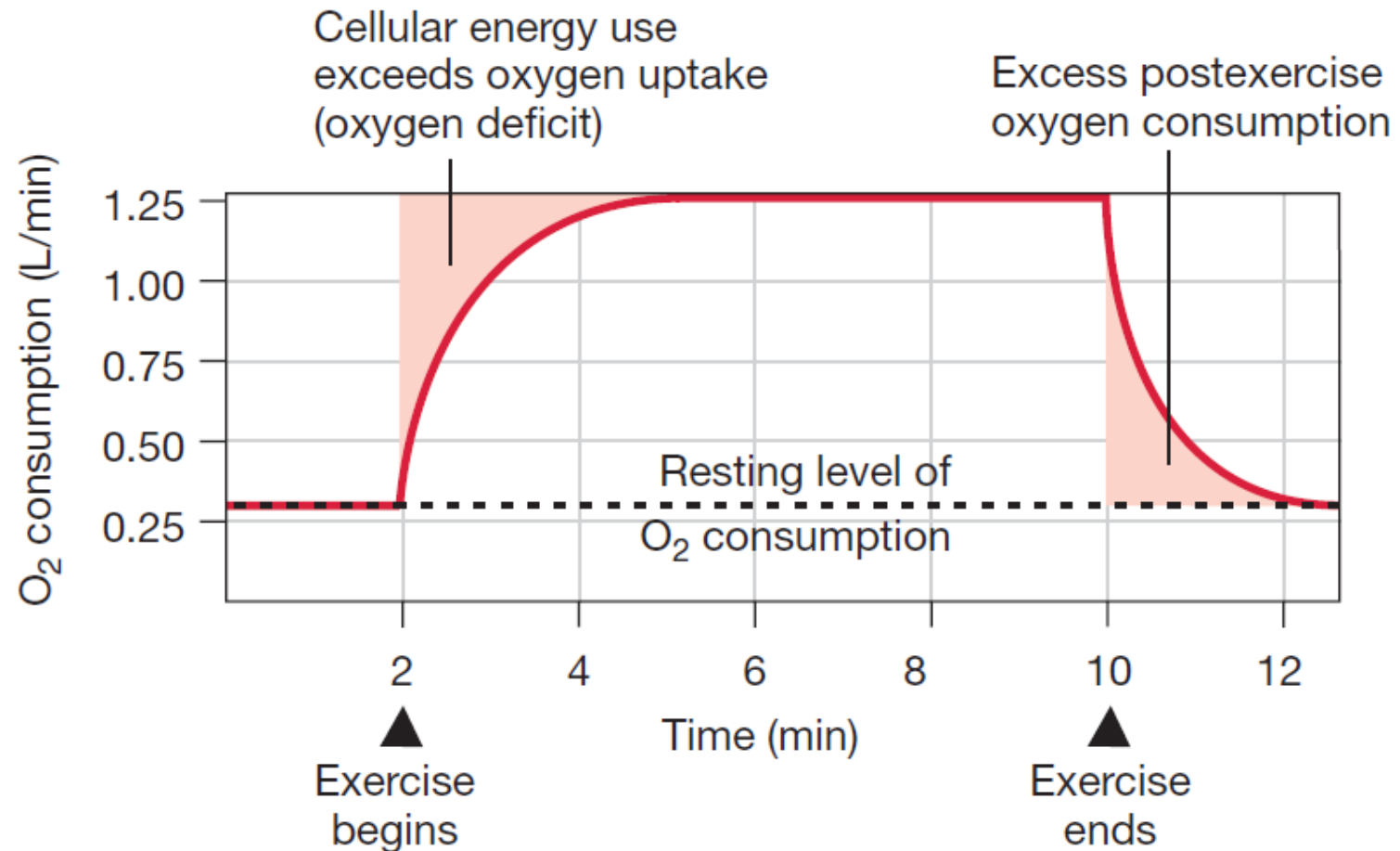
Determinants of $V_{O_2 \max}$

1. Uptake of O_2 by the lungs
 - pulmonary ventilation
2. O_2 delivery to the muscles
 - blood flow (pressure gradient – cardiac output x resistance)
 - hemoglobin concentration
3. Extraction of O_2 from blood by muscle
 - pO_2 gradient: blood - mitochondria

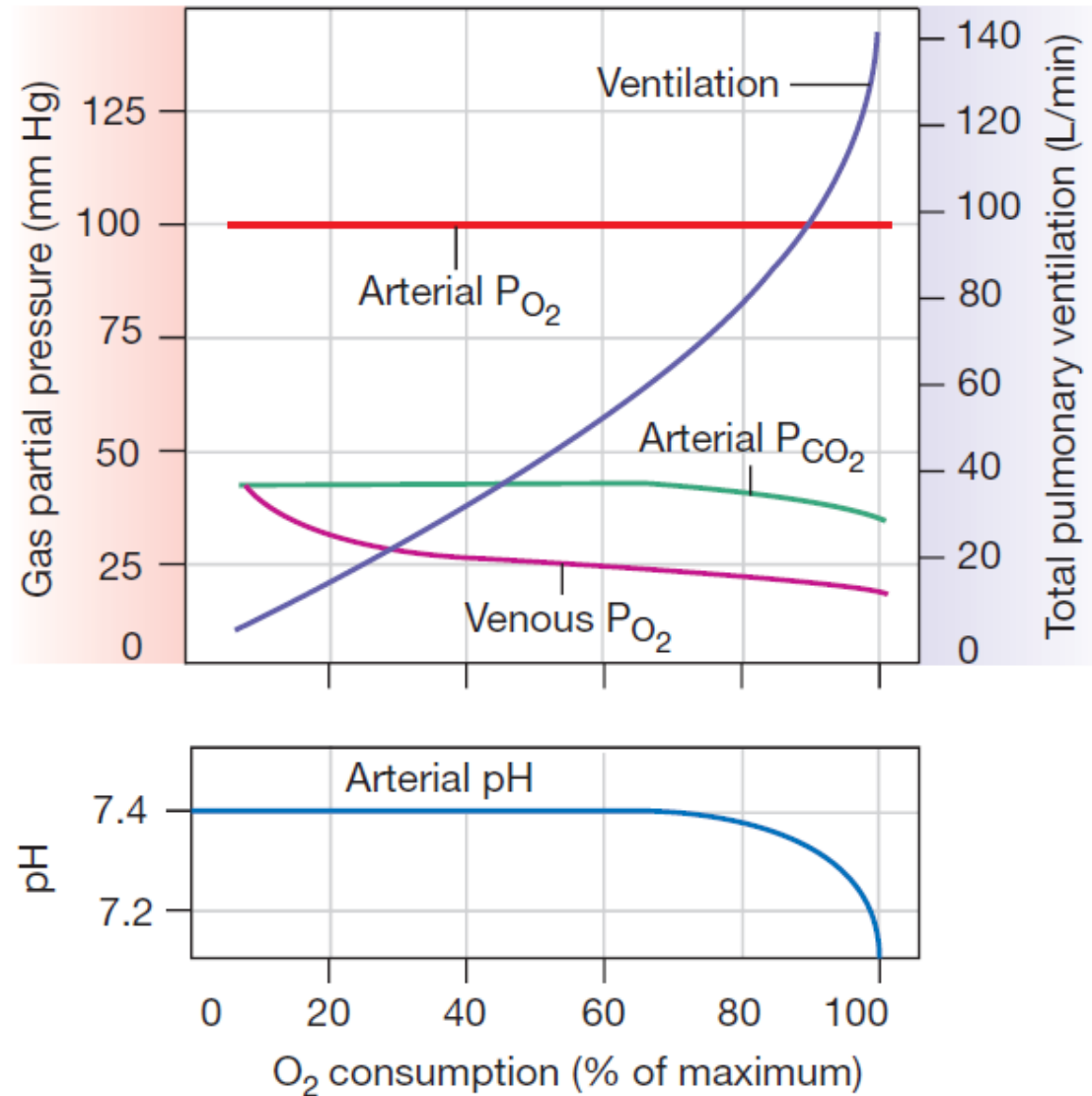
Oxygen consumption during exercise

Adopted from: D.U.Silverthorn:
Human Physiology (An Integrated
Approach)

– Oxygen debt



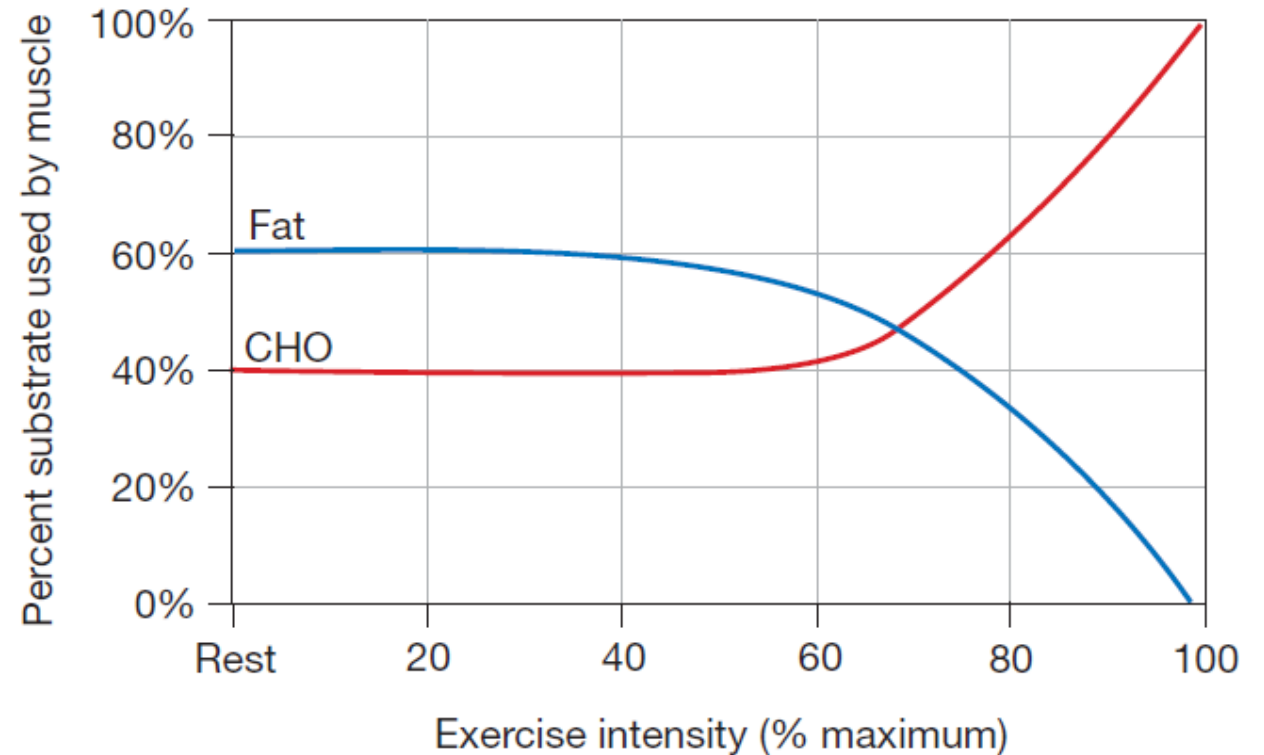
Blood gases during exercise



Adopted from: D.U.Silverthorn:
Human Physiology (An Integrated
Approach)

Energy substrates used by skeletal muscle during exercise

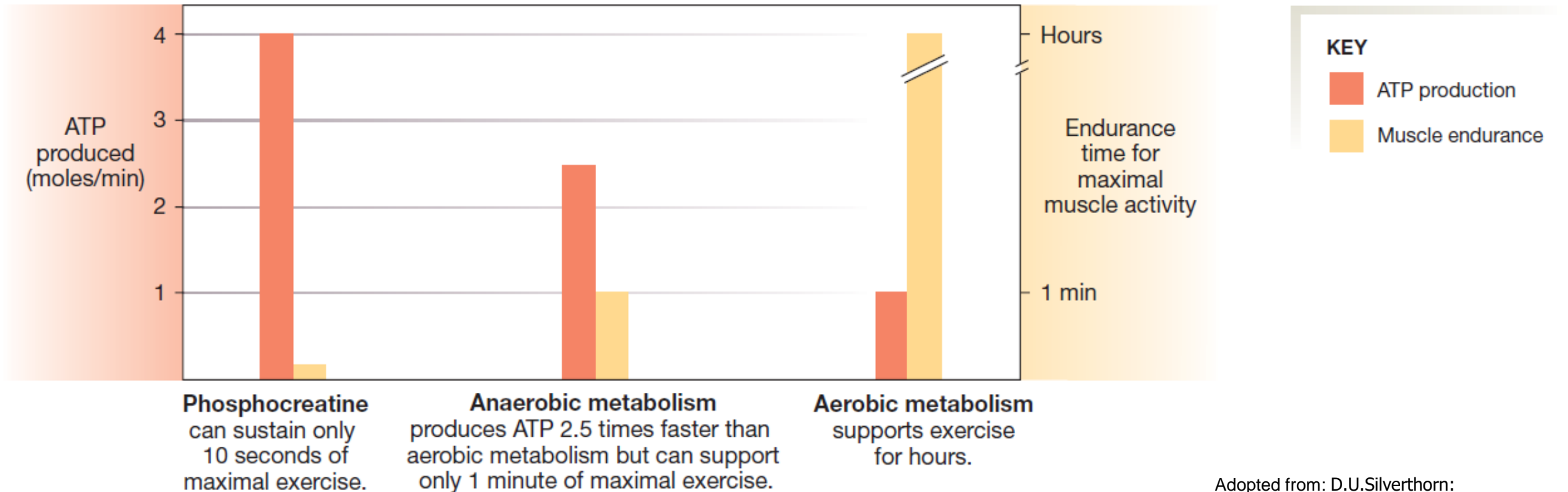
- Low-intensity e.: fats
- High-intensity e.: glucose



Data from G. A. Brooks and J. Mercier, *J App Physiol* 76: 2253–2261, 1994

Adopted from: D.U.Silverthorn:
Human Physiology (An Integrated
Approach)

Energy substrate use – aerobic vs. anaerobic



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Testing of fitness

- Spiroergometry
- Standardised workload
 - exactly: in W/kg
 - comparative (simple, inaccurate): in MET
 - metabolic equivalent (actual MR / resting MR)
 - 1 MET = uptake of 3.5 ml O₂/kg.min ≈ 4.31 kJ/kg.h
 - sleeping ≈ 0.9 MET; slow walking ≈ 3-4 MET; fast running ≈ 16 MET

Indexes of fitness

- W_{170} [W/kg]
- $V_{O_2 \max}$ [mL O_2 / (min x kg)]
- Aerobic / anaerobic threshold

- Fatigue
- Training
- Adaptation to exercise