

### Acid-base balance



#### Dr.Duha Mahdi ----Msc.Sarah Kamil

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\* Acids are electrolytes that release hydrogen ions (H+) when they are dissolved in water.

\* Bases are electrolytes are release hydroxide ions (OH-) when they are dissolved in water

\* Acid-base balance is primarily regulated by the concentration of H+ (or the pH level) in body fluids, especially ECF

\* Normal pH range of ECF is from  $\forall$ .  $\mathfrak{r}\circ$  to  $\forall$ .  $\mathfrak{t}\circ$ .

\* Most H+ comes from metabolism -- glycolysis, oxidation of fatty acids and amino acids, and hydrolysis of proteins.

\* Homeostasis of pH in body fluids is regulated by acid-base buffer systems (primary control), respiratory centers in brain stem, and by kidney tubule secretion of H+

Acid-base buffer systems are chemical reactions that consist of a weak acid and a weak base, to prevent rapid, drastic changes in body fluid pH . one of the most carefully regulated conc. in the body is that of H+ ion.

\* one of the most carefully regulated conc. in the body is that of H+ ion. When acid (H+) is added to the blood, the pH decreases. Then increased acidity decreased pH) is minimized by buffers which bind some of the added H+



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\* The pair bicarbonate / carbonic acid forms an important buffer system. H $^{\gamma}CO^{\gamma}$  carbonic acid) is the acid member of the pair because it can release H+. HCO $^{\gamma}$ )

- is the base member of the pair because H . it can accept H+. This system is important because two of its components are rigorously controlled by the body: the lungs control  $CO^{\gamma}$  and the kidney control HCO<sup> $\gamma$ </sup>

Chemical Acid-Base buffer systems

# **\. Bicarbonate buffer system:**

\* Bicarbonate ion (HCO $\gamma$ -) – converts a strong acid into a weak acid.

\* Carbonic acid  $(H^{\gamma}CO^{\gamma})$  – converts a strong base into a weak base.

\* Bicarbonate buffer system produces carbonic acid  $(H^{\gamma}CO^{\gamma})$  and sodium bicarbonate (NaHCO<sup>{\gamma}</sup>) to minimize H+ increase, mainly in the blood

۲. Phosphate buffer system: produces sodium hydrogen phosphates (NaH۲PO٤) to regulate H+ levels, mainly in kidney tubules and erythrocytes:



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 Protein buffer system: relies on the carboxylic acid group of amino acids to release H+, and the amino group to accept H+, mainly inside body cells and in blood plasma

**Respiratory centers** in medulla oblongata regulate the rate and depth of breathing, which controls the amount of carbon dioxide gas (CO<sup> $\gamma$ </sup>) remained in the blood and body fluid -- e.g. slower berating rate an increase in blood CO<sup> $\gamma$ </sup> level an increase in carbonic acid (H<sup> $\gamma$ </sup>CO<sup> $\pi$ </sup>) in blood or more H+ is released into body fluids pH of blood and body fluids drops.

Nephrons react to the pH of body fluids and regulate the secretion of H+ into urine -- e.g. a diet high in proteins causes more H+ to be produced in body fluids (which lowers body fluid pH), as a result the nephrons will secrete more H+ into the urine

### Compensation

Compensation is a series of physiological responses that react to acidbase imbalances, by returning blood pH to the normal range ( $^{V, \mathfrak{ro}} - ^{V, \mathfrak{so}}$ ).



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**Respiratory acidosis**: (due to deficiency of CO<sup> $\gamma$ </sup> expiration) and respiratory alkalosis (due to abnormally high CO<sup> $\gamma$ </sup> expiration) are primary disorders of CO<sup> $\gamma$ </sup> pressure in the lungs. These may be compensated by renal mechanisms where nephrons will secrete more H+ to correct acidosis and secrete less H+ to correct alkalosis.

- It is due to increased  $CO^{\gamma}$  retention (due to hypoventilation), which can result in the accumulation of carbonic acid and thus a fall in blood pH to below normal.

Metabolic Acidosis: increased production of acids such as lactic acid, fatty acids, and ketone bodies, or loss of blood bicarbonate (such as by diarrhea), resulting in a fall in blood pH to below normal.

#### Respiratory Alkalosis:

A rise in blood pH due loss of CO $\gamma$  and carbonic acid (through hyperventilation).

#### Metabolic Alkalosis:

A rise in blood pH produced by loss of acids (such as excessive vomiting) or by excessive accumulation of bicarbonate base.



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### Respiratory Excretion of CO<sup>Y</sup>

- \* The respiratory center is located in the brain stem.
- \* It helps control pH by regulating the rate and depth of breathing.

\* Increasing CO<sup>Y</sup> and H+ ions conc. stimulate chemo receptors associated with the respiratory center; breathing rate and depth increase, and CO<sup>Y</sup> conc. decreases.

\* If the CO $\gamma$  and H+ ion concentrations are low, the respiratory center inhibits breathing

### Renal excretion of H+

- Nephrons secrete hydrogen ions to regulate pH.
- phosphate buffer hydrogen ions in urine.
- Ammonia produced by renal cells help transport H+ to the outside of the body:
- chemical buffer system (Bicarbonate buffer system, phosphate buffer, and protein buffer system) act rapidly and are the first line of defense against pH shift.

#### Factors Associated with Edema

1. Low plasma protein concentration: cause is liver disease, kidney disease, loss of protein in urine, lack of protein in diet due to starvation.



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Effect: plasma osmotic pressure decreases, less fluid enters venular end of capillaries by osmosis.

<sup>7</sup>. Obstruction of lymph vessels: causes are surgical removal of portions of lymphatic pathways and parasitic infections.

Effect: back pressure in lymph vessels, interferes with movement of fluid from interstitial spaces into lymph capillaries.

<sup> $\gamma$ </sup>. Increased venous pressure: venous obstruction or faulty valves.

Effect: back pressure in veins increases capillary filtration and interferes with return of fluid from interstitial spaces into venular end of capillaries.

<sup>£</sup>. Inflammation: cause is tissue damage.

Effect: capillaries become abnormally permeable and fluid leaks from plasma into the interstitial spaces