## 6.4 Gas Exchange

### **Ventilation**

Distinguish between ventilation, gas exchange a	nd cell respiration
Ventilation: The exchange of air between atmosp	here and lungs - achieved by the physical act of breathing
Gas Exchange: The exchange of oxygen and carbo	on dioxide between alveoli and bloodstream (via diffusion)
	rom organic molecules e of oxygen (aerobic respiration)
Because gas exchange is a passive process, a venti	aintain a concentration gradient within the alveoli lation system is needed to maintain a concentration gradient eoli from the atmosphere s to increase the overall rate of gas exchange
Laber a diagram of the numan lung	<ol> <li>Larynx</li> <li>Trachea</li> <li>Intercostal muscles</li> <li>Bronchus</li> <li>Bronchiole</li> <li>Alveolus</li> <li>Lung</li> <li>Diaphragm</li> <li>Rib</li> </ol>
State the purpose of the alveoli	

Alveoli are the small air-filled sacs within lungs that greatly increase surface area and are responsible for

GAS EXCHANGE

#### Compare type I and type II pneumocytes

Type I Pneumocyte	Type II Pneumocyte
Mediate gas exchange with capillaries	Secrete pulmonary surfactant
Are long and thin (  diffusion distance)	Reduces surface tension within alveoli
Comprise most of the alveolar surface	(easier to inflate alveoli, prevents collapsing)

#### Outline the function of pulmonary surfactant

Type II pneumocytes secrete pulmonary surfactant which reduces the surface tension in alveoli

As alveoli expand with gas intake, the surfactant becomes more spread out across the moist alveolar lining

This increases surface tension and slows the rate of expansion, ensuring all alveoli inflate at the same rate

Explain how Boyle's Law relates to the mechanism of breathing

Boyle's Law: Pressure is inversely proportional to volume (i.e. more volume = less pressure)

Breathing utilises antagonistic sets of respiratory muscles in order to facilitate the passage of air

The muscles change lung volume in order to create a negative pressure vacuum

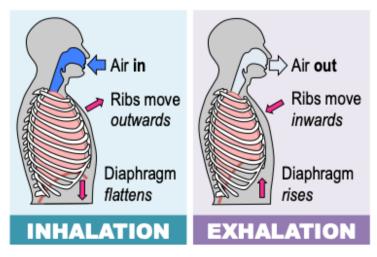
When pressure in the lung is less than atmospheric pressure, air flows in to equalise (and vice versa)

Explain, with the aid of the diagram, the actions of respiratory muscles in the mechanism of breathing

INHALATION: Diaphragm & external intercostal muscles contract, increasing volume of thorax

Pressure in the lungs is decreased, so air flows in

EXHALATION: Diaphragm relaxes and internal intercostals contract, decreasing thoracic volume Pressure in the lungs is increased, so air flows out



# **Lung Activity** Explain how ventilation rates change with exercise Cellular respiration produces carbon dioxide as a waste product Rising levels of carbon dioxide in the bloodstream alters the blood pH $(\clubsuit)$ This triggers an increase in ventilation rate Define spirometry Spirometry measures the speed (flow) or amount (volume) of inhalation or exhalation This data can be recorded with a spirometer Outline the causes and consequences of lung cancer Causes: Cancer is the uncontrolled proliferation of cells, leading to abnormal growth (tumors) Factors that can contribute to the development of lung cancer include genetics, age, some diseases, smoking, asbestos, radiation Consequences: Lungs are vital to normal body function and thus the abrogation of their function is detrimental to health Abnormal growth can impact normal tissue function, with symptoms varying according to size and location Lungs possess a rich blood supply, increasing the likelihood of the cancer spreading (metastasis) Outline the causes and consequences of emphysema Causes: Emphysema is the abnormal enlargement of alveoli (forms huge air spaces - 'bullae') Emphysema is often caused by smoking, as chemicals in cigarettes damage alveoli The recruited phagocytes release elastase and the elastase destroys fibres in alveolar walls Consequences: Common symptoms of emphysema include shortness of breath, phlegm production, expansion of the ribcage, cyanosis and an increased susceptibility to chest infections