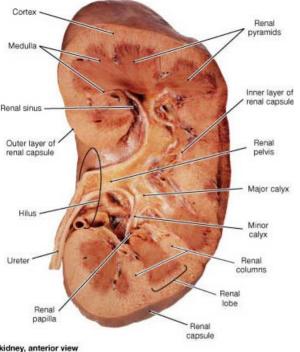
Urinary system





Urea, uric acid, creatine drugs, food additives dissolved in water

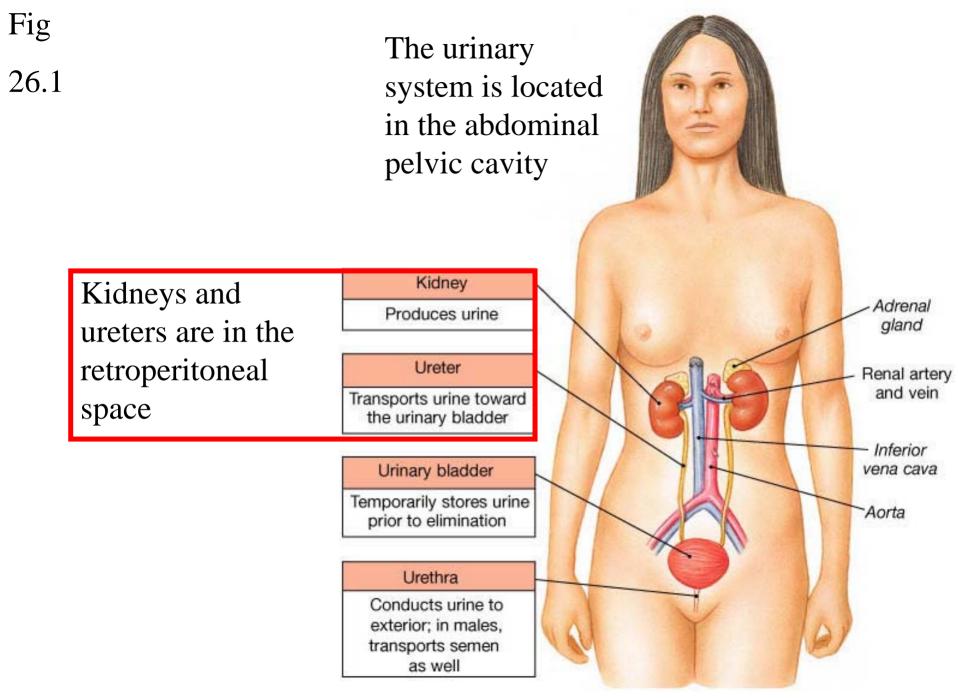
Functions of the urinary system

- Micturition-(removal of metabolic wastes)
- Regulate ionic concentration of plasma by controlling the amount lost in the urine
- pH balance-removal of ammonia for body fluids
- Regulates blood volume/pressure by controlling the amount of urine produced
- Stimulates erythrocyte production

Removal of wastes from the body

• The urinary system maintains homeostasis of the blood concentration, volume, pressure, pH and removes toxins.

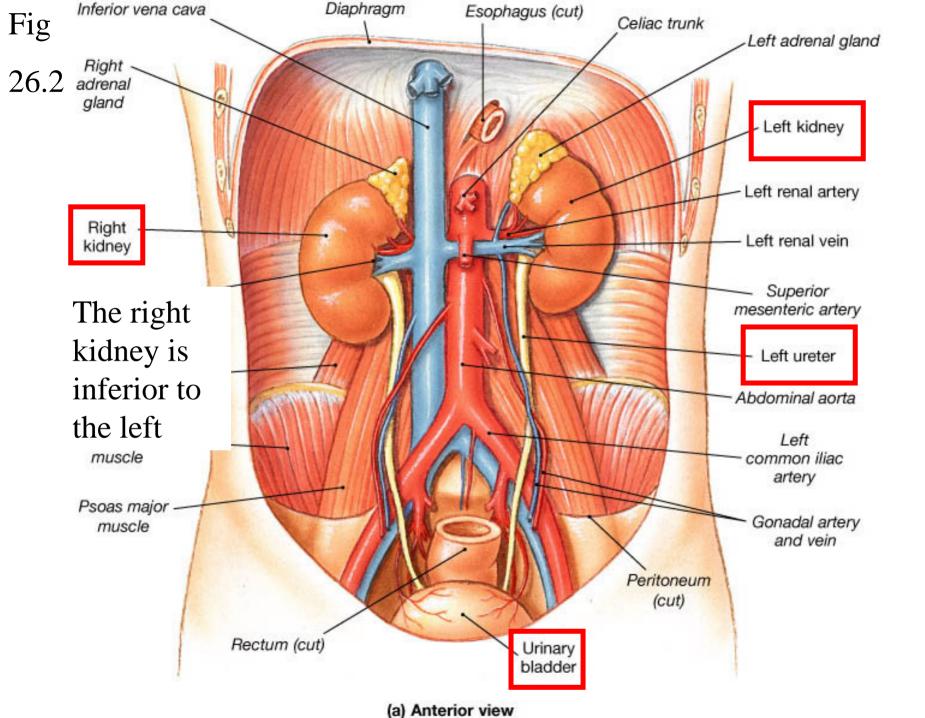
- Functional unit of the kidney is the nephron
- 1.25 million nephrons per kidney

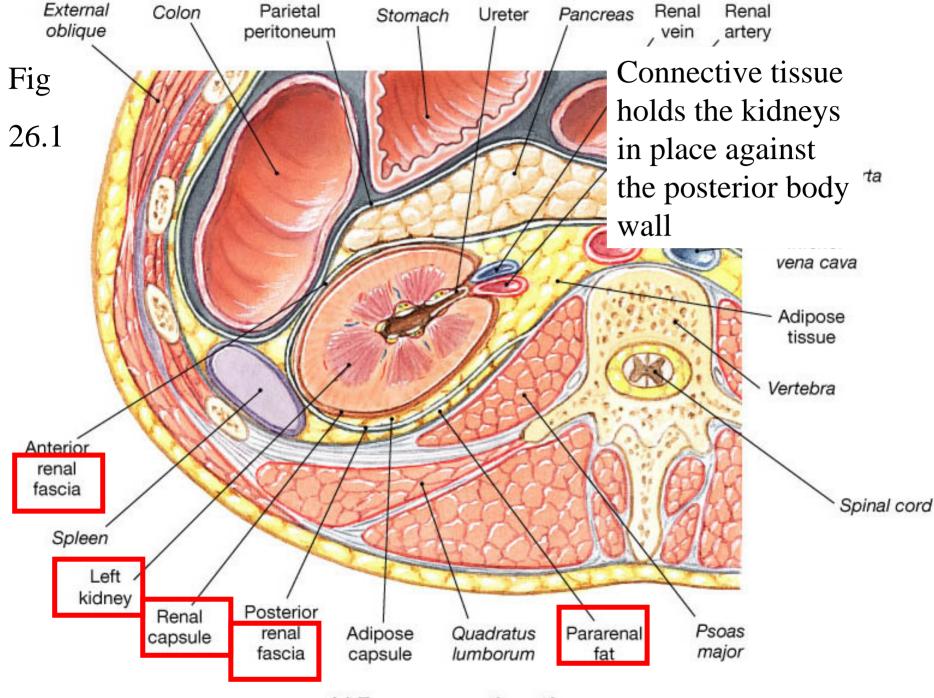


(a) Anterior view

<u>Kidneys</u>

- Located between T12 and L-3
- Right kidney lower than left (liver in the way)
- Located retroperitoneal
- Renal Capsule-collagen fibers on surface of kidney
- Perarenal fat-helps protect kidneys, adipose tissue
- Renal Fascia Anchored to back abdominal wall
 - Runs from capsule through fat to wall





(c) Transverse section at L₁

Anatomy of the kidney

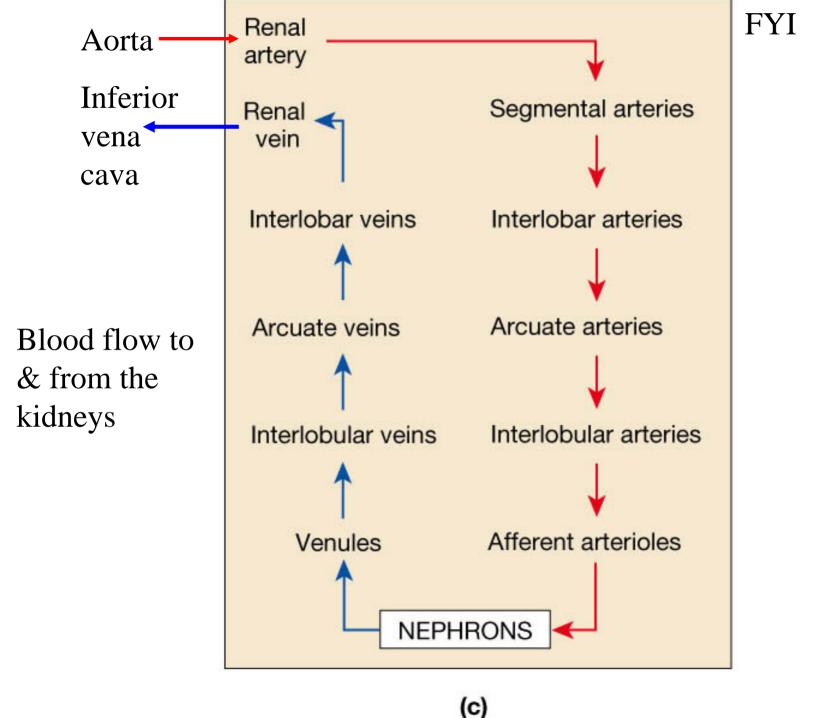
- Renal Cortex-Superficial region
- Renal Medulla-deeper region
 - Similar idea to adrenal cortex and medulla

FYI

• 4900ml of blood leaves the heart per minute

• About 1200ml of blood flows through the kidneys/per minute

• The liver and kidneys receive about half of the blood that leaves the aorta

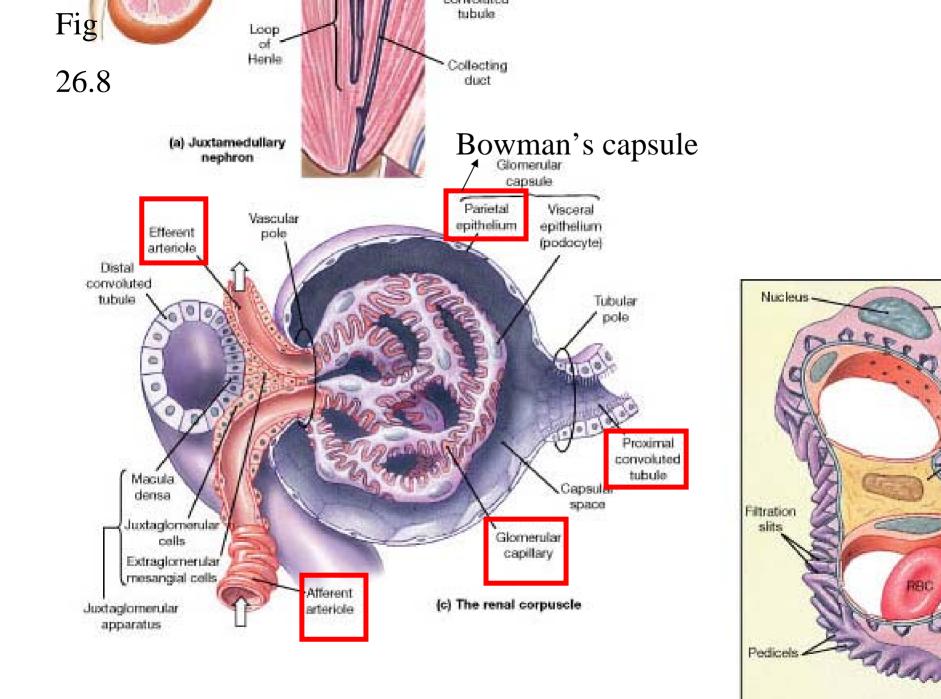


Nephron

- The functional unit of the kidney
- 1.25 million nephrons per kidney
- Urine is formed in the nephrons

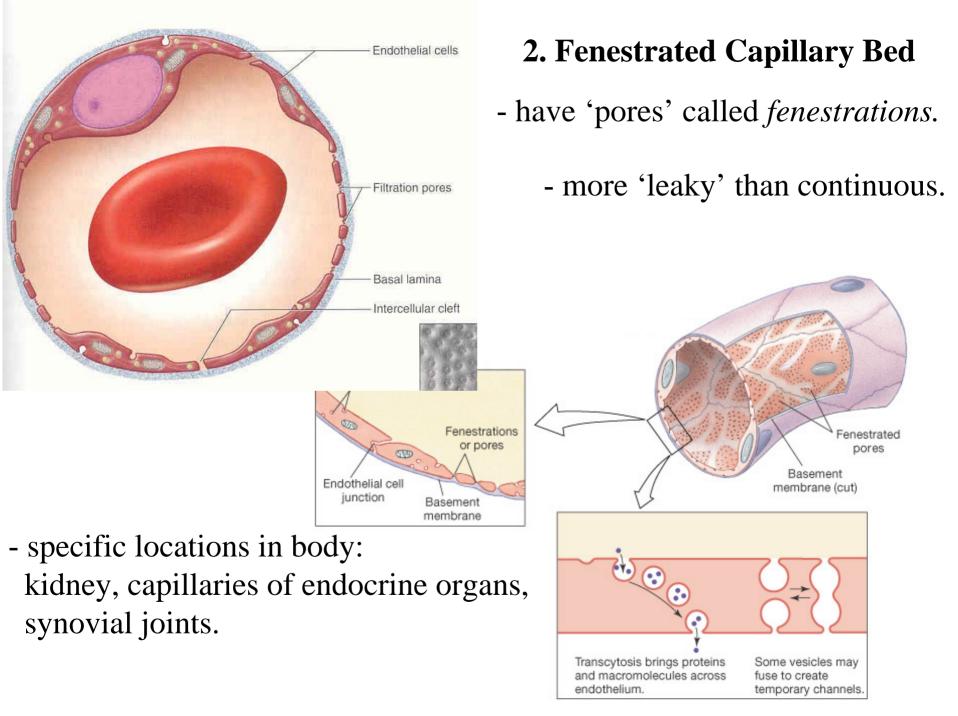
• The blood is filtered to remove wastes, toxins, & ions inside the nephrons

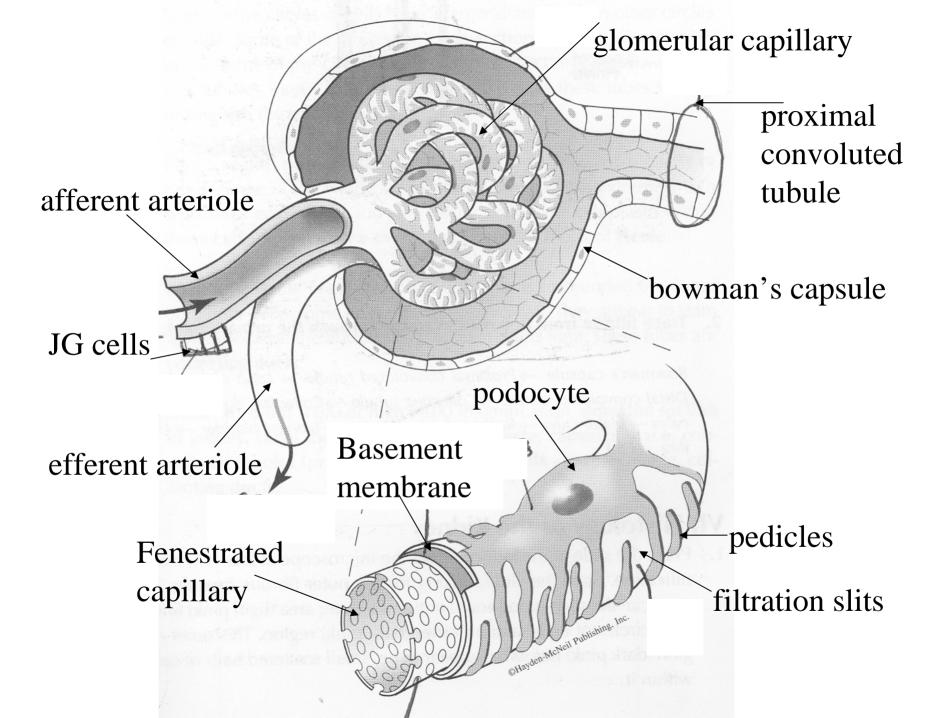
- Glomerulus is a cluster of capillaries inside the nephron
- Blood that exits the glomerulus enters the nephron to start filtration (removal of wastes)

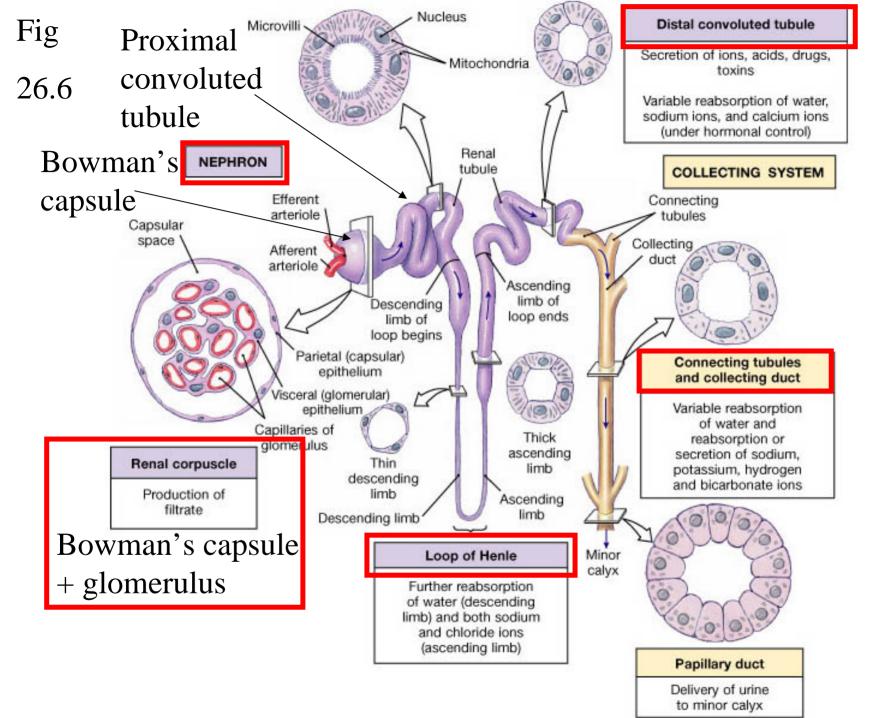


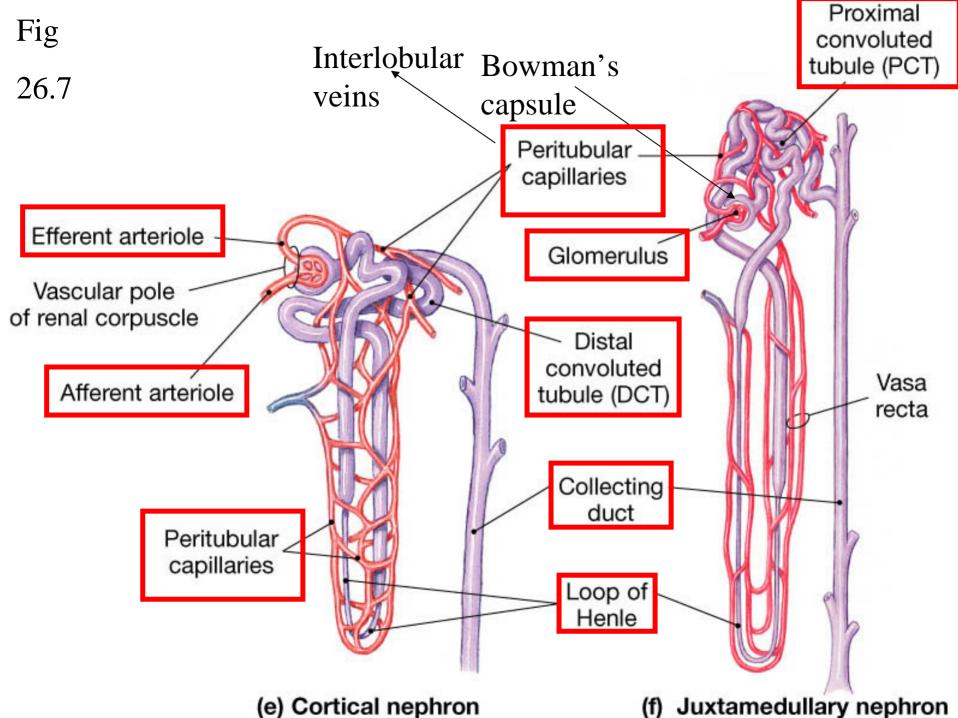
filtration

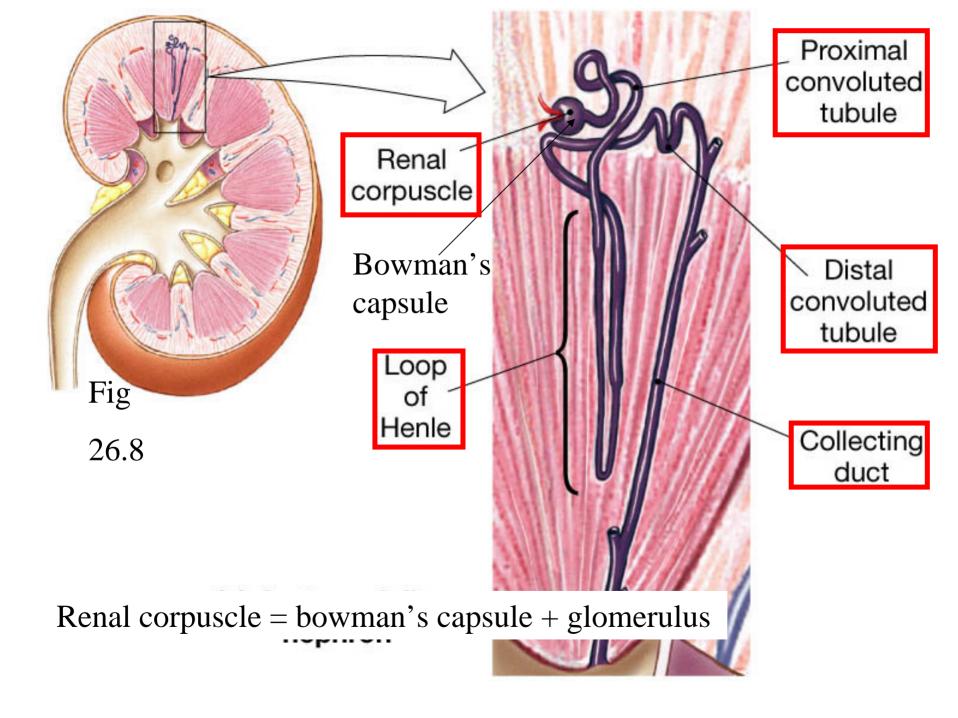
- Filtering of plasma across three layers:
- Capillary endothelium-fenestrated capilaries capillaries with pores
- Basement membrane-blocks filtering of large proteins
- Glomerular epithelium-podocytes cover most of the BM. Gaps –filtration slits











Fig

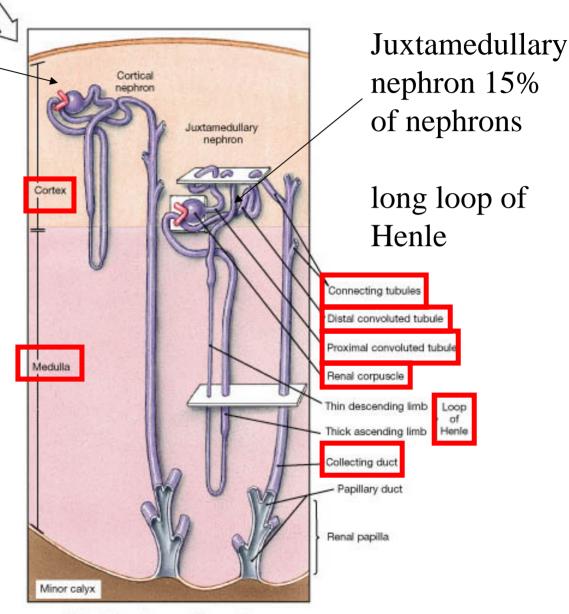
26.7

Cortical nephron

85% of nephrons

short loop of Henele

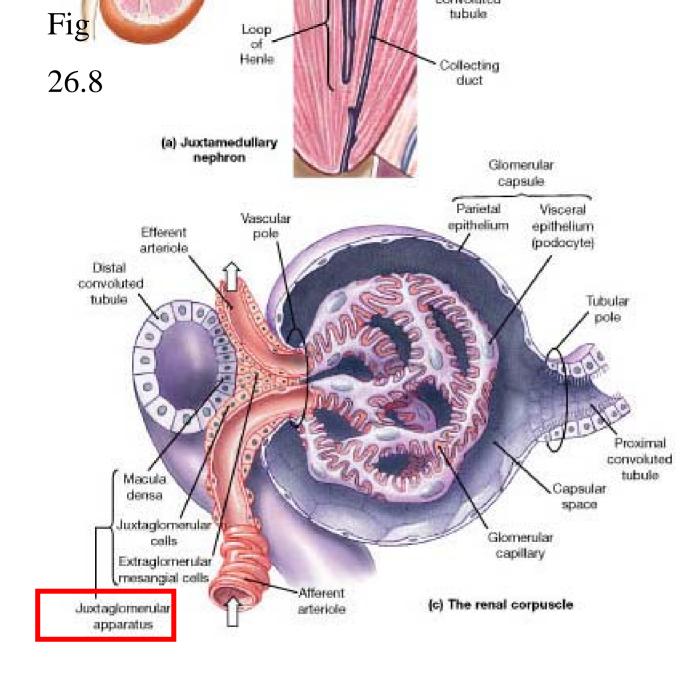
Majority of reabsorption occurs at the proximal convoluted tubule have microvilli

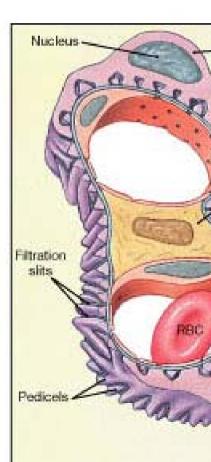


(a) Cortical and juxtamedullary nephrons

Juxtaglomerular apparatus

- Releases factors that effect blood:
- Rennin-enzyme-leads to reduced urine volume
- Erythropoietin-hormone-stimulates production of erythrocytes





Not a tracing to memorize! Aorta ۲ Renal artery ulletSegmental artery Lobar artery ۲ Wastes dissolved in Interlobar artery ulletwater form the urine in Arcurate artery ۲ at the minor calyces Interlobular artery • Afferent arteriole ٠ Glomerulus- nephron • "Cleansed" blood Efferent arteriole ۲ Peritubular capillary network ٠ Remember there are Interlobular vein ۲ about 2.5 million Arcurate vein • Interlobar vein nephrons doing this ۲ Lobar vein ۲ simultaneously Renal vein ۲ Inferior vena cava Nutrients, hormones • etc. return to the

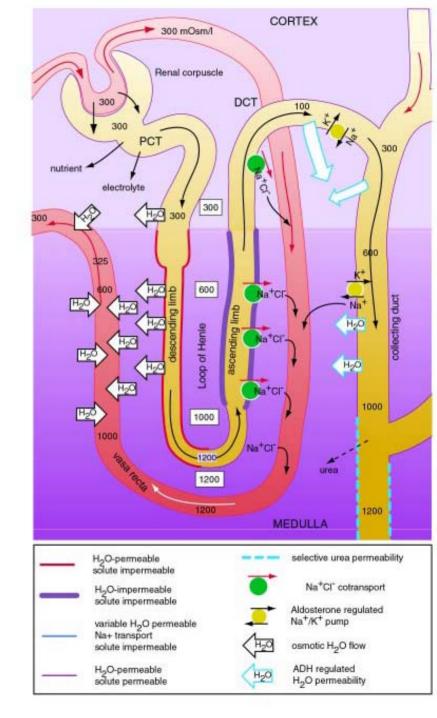
cardiovascular system

Blood doping-FYI

- Taking erythropoietin to increase erythrocyte levels
 - Increase oxygen levels in the blood
- There is a another very clever way to do this.

Kidney physiology-FYI

- •Filtration-glomerulus to bowmans capsule
- •Secretion-capillaries to nephron
- •Reabsorbtion-nephron to blood
- •Excretion-nephron to minor calyx

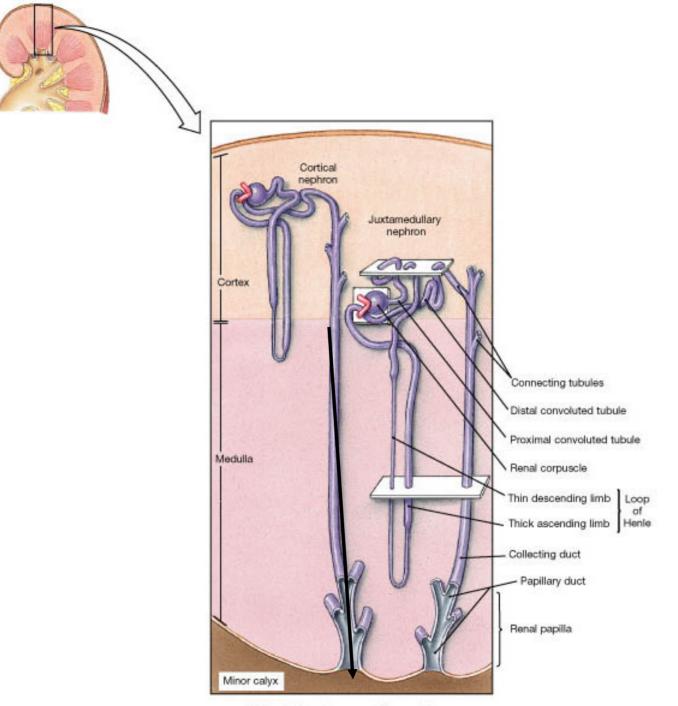


FYI

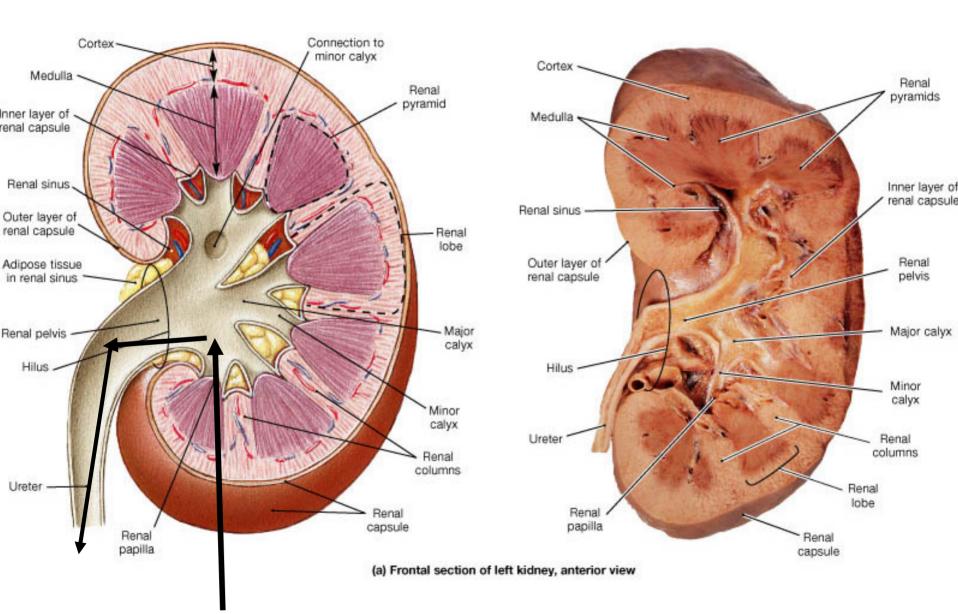
- Kidney failure-kidney no loner function to remove toxins from the blood
 - Uremia-toxicity of the blood
- Dialysis- a machine that does the function of the kidneys
- The peritoneal membrane can be used for dialysis
- Having only one kidney is good enough but two kidneys are better than one!

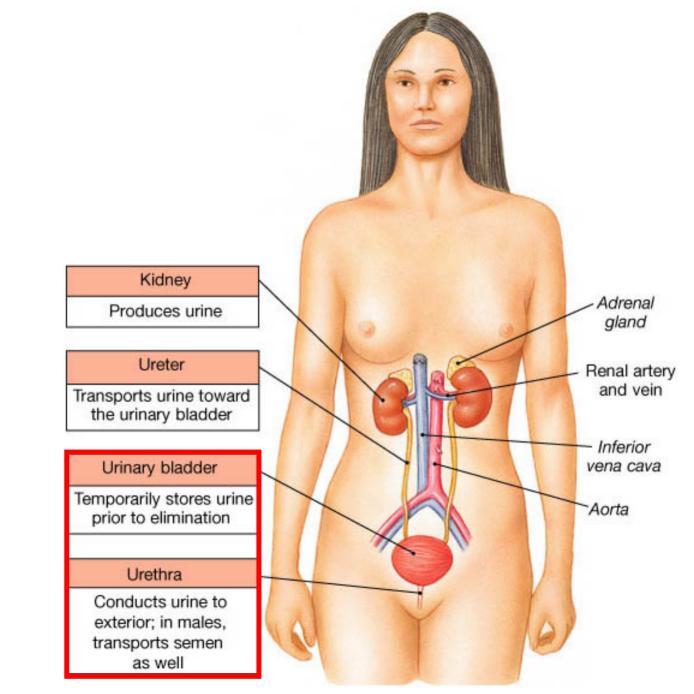
ADH-antidieuretic hormone

- ADH produced in the hypothalamus
- Released by the neurohypophysis (posterior)
- Effects cells of the collecting ducts
- ADH signal these cells to reabsorb (transfer from nephron to blood) water
- Alcohol inhibits the release of ADH from the neurohypophysis causing increased urine volume



(a) Cortical and juxtamedullary nephrons





Fig

26.1

(a) Anterior view



- 12 inches long
- descend from Renal Pelvis to bladder
- opens to bladder in a posterior-lateral side
- enter bladder through slit-like orifice (membrane covered)
 - open when relaxed
 - closed when bladder muscles contract
- <u>Transitional epithelium</u> in musoca- found in areas of stretching
- strong muscular tunic actively moves urine to bladder→peristaltic contractions

Urinary Bladder-

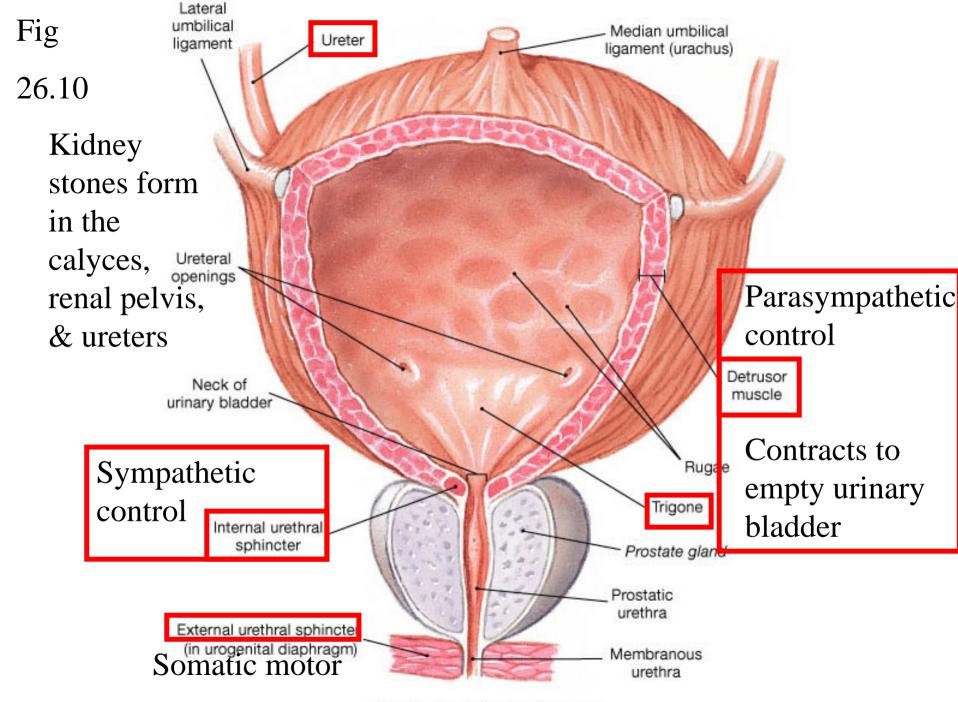
- Hollow muscular, temporary storage organ
- Trigone- funnel-shaped region formed between 3 openings
 - Infection more common in females
- Detrusor muscles- 3 smooth muscles layers of bladder

– 1 circular musc. Between 2 longitudinal musc.

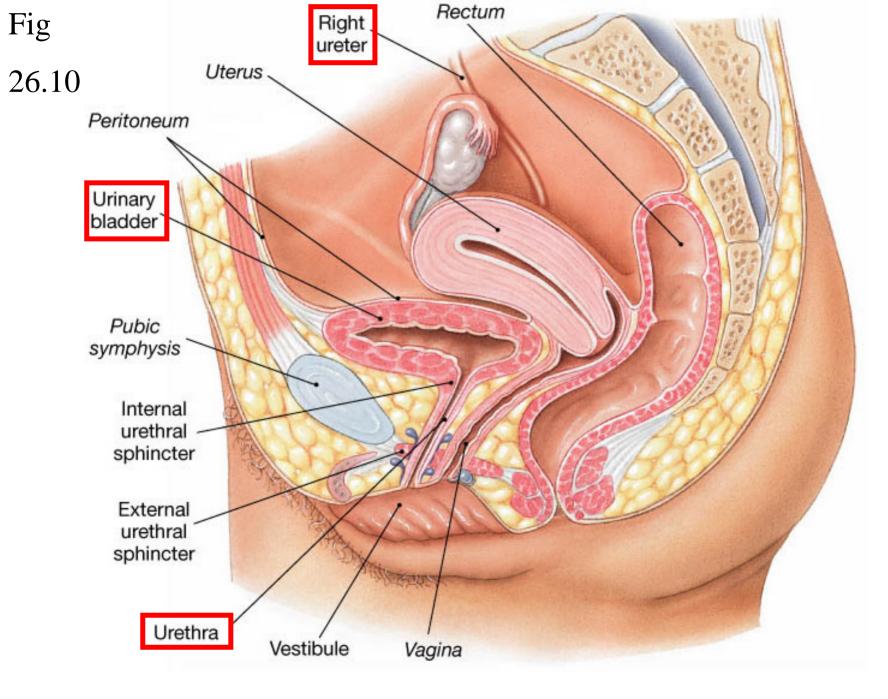
• Micturition controlled through spinal reflex. But can override with somatic motor!

Urethra-

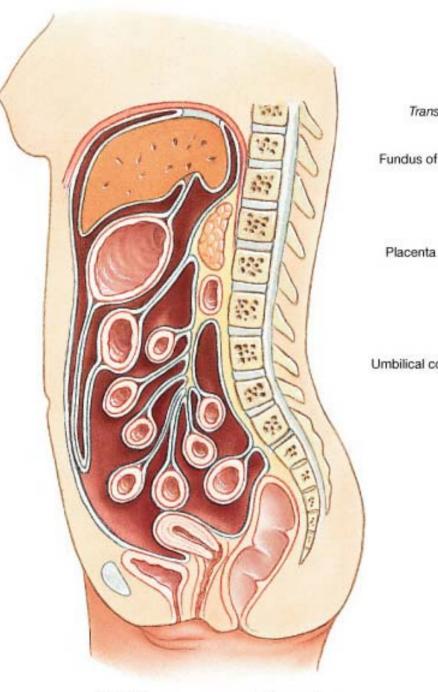
- Controlled by sphincter muscles
- Involuntary → Internal urethral sphincter (smooth muscle)
- Voluntary → External urethral sphincter (skeletal muscle)
- Female 1-1 ¹/₂ inches-urinary organ
- male 7-8 inches (three regions)reproductive and urinary organ

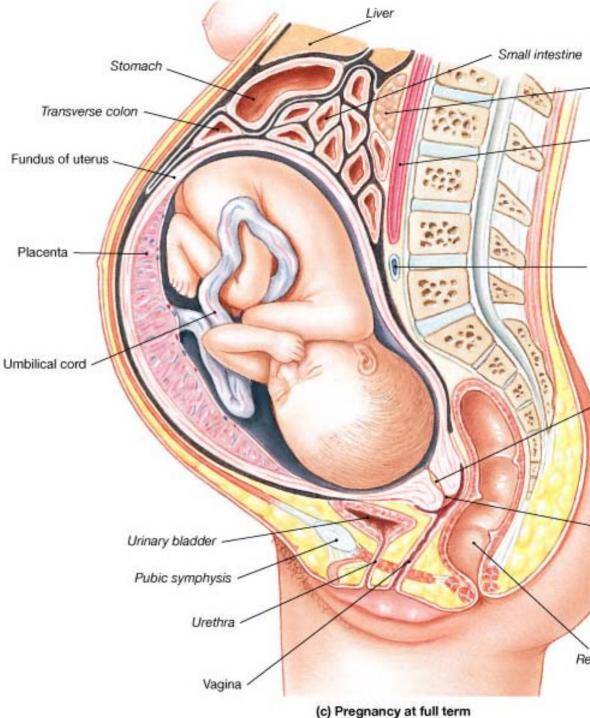


(c) Male bladder, anterior view

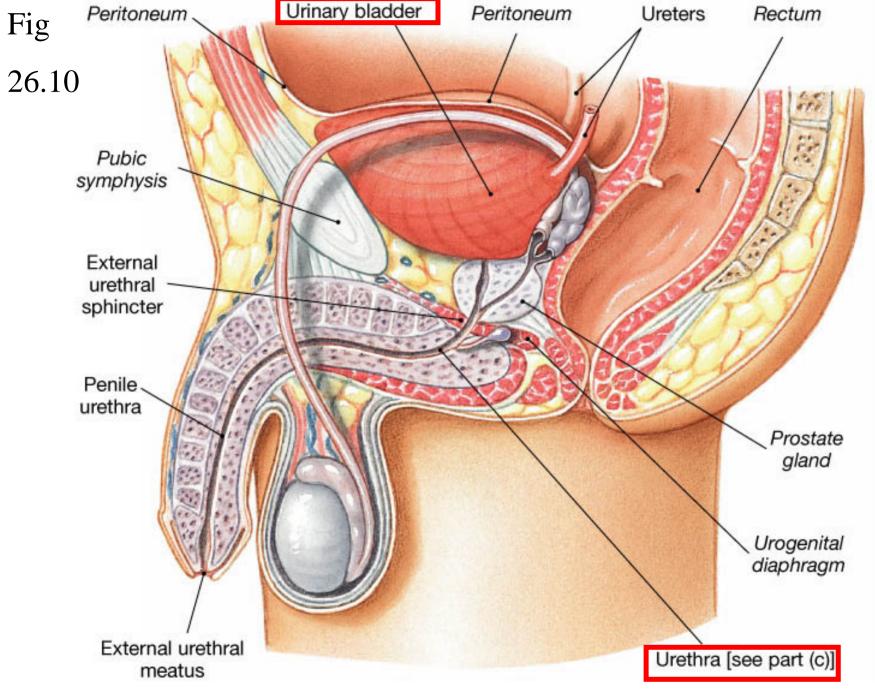


(b) Female pelvis, sagittal section





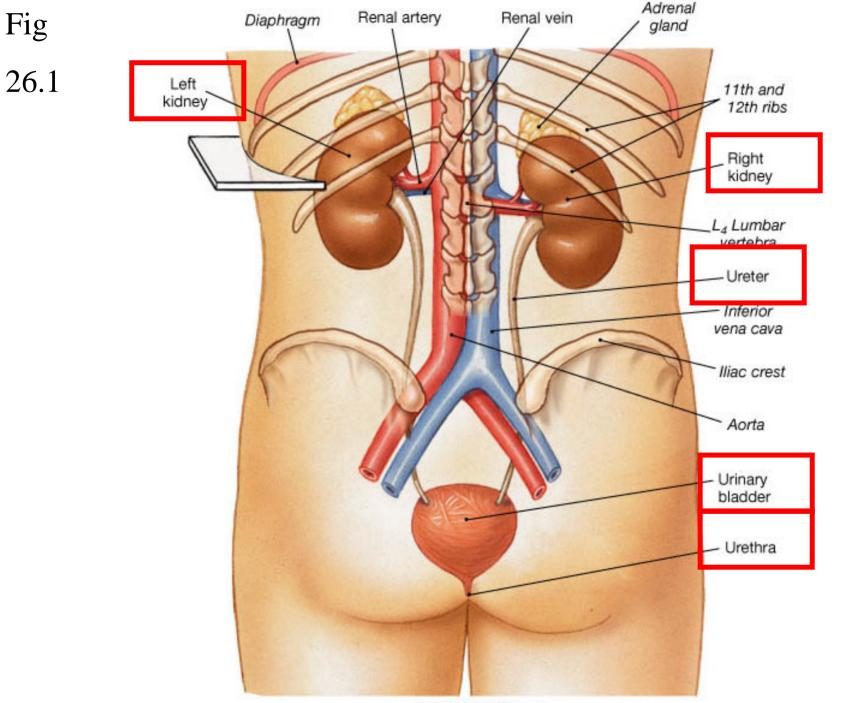
(d) Nonpregnant female



(a) Male pelvis, sagittal section

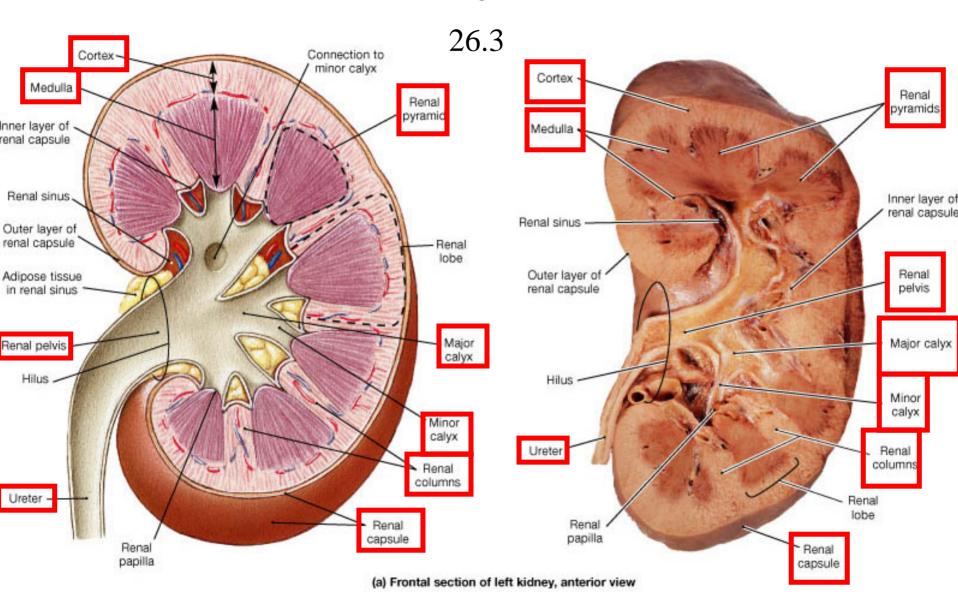
Substance	Amount filtered per day	Amount excreted per day	Percent reabsorbed
Water	180L	1.8L Without ADH 6X	99
Sodium-ion	630g	3.2g	99.5
Glucose- nutrient	180g	0g	100
Urea-cellular waste product	54g	30g	44 can be used to synthesize amino acids

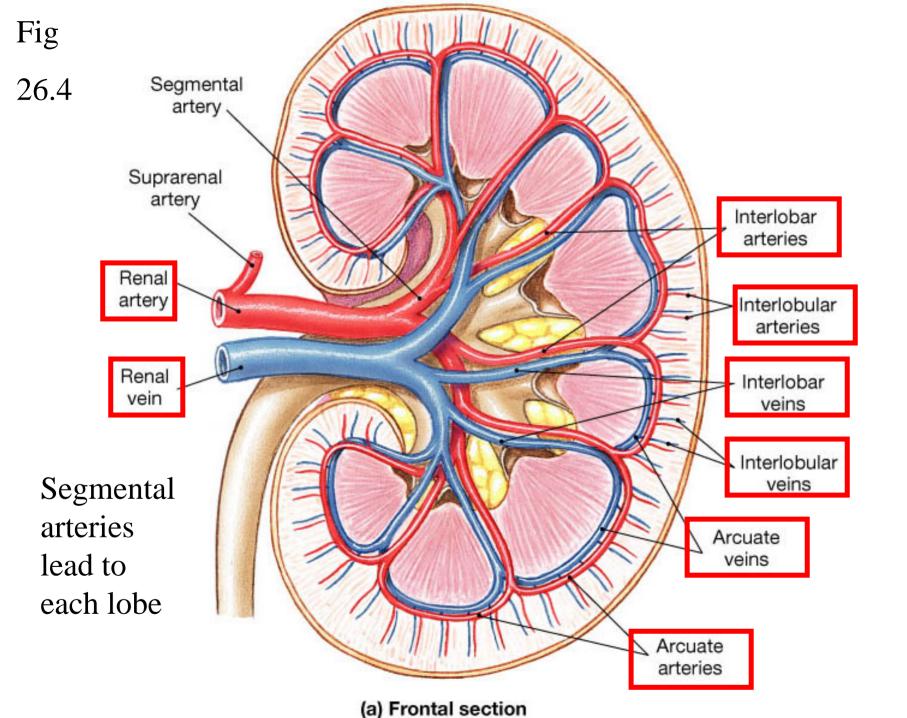
- Break
- Histology

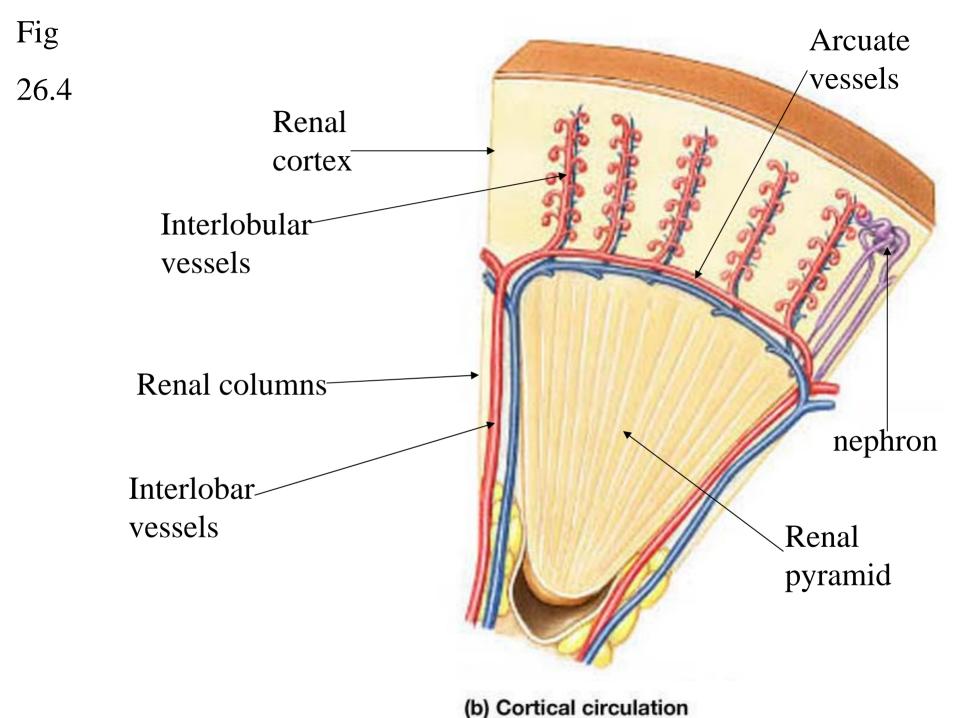


(b) Posterior view

Fig







• Kidney slide