

## **CIE Biology A-level**

Topic 9: Gas exchange and smoking

Notes

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The need for specialised exchange surfaces arises as the size of the organism, and its surface area to volume ratio, increases. In the case of single celled organisms, the substances can easily enter the cell as the distance that needs to be crossed over is short. However, in multicellular organisms that distance is much larger due to a higher surface area to volume ratio. As a result of this, multicellular organisms require specialised exchange surfaces for efficient gas exchange of carbon dioxide and oxygen.

Features of an efficient exchange surface include large surface area, for instance the root hair cells or folded membranes, such as those of the mitochondria. An efficient exchange surface should also be thin to ensure that the distance that needs to be crossed by the substance is short. The exchange surface also requires a good blood supply/ventilation to maintain a steep gradient, for example that of the alveoli.

## Mammalian gaseous exchange system

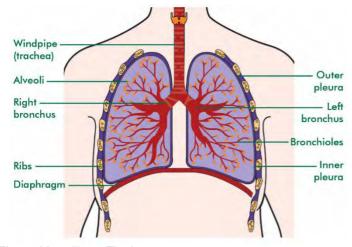


Figure Macmillan - The Lungs

The lungs are a pair of structures with a large surface area located in the chest cavity with the ability to inflate. The lungs are surrounded by the rib cage which serves to protect them. A lubricating substance is secreted to prevent the friction between rib cage and lungs during inflation and deflation. External and internal intercostal muscles between the ribs work antagonistically to raise and lower the ribcage. A structure called the diaphragm separates the lungs from abdomen area.

The air enters through the nose and passes along the trachea, bronchi and bronchioles, which are structures well adapted to their role in enabling passage of air into the lungs. The airways are held open with the help of a rings of cartilage, incomplete in the trachea to allow passage of food down the oesophagus behind the trachea. The gaseous exchange takes plans in the walls of alveoli, which are tiny sacs filled with air and surrounded by capillaries. Capillaries have a constant flow of blood which moves oxygenated blood away from the area of diffusion to maintain the concentration gradient.

Trachea and bronchi are similar in structure, with the exception of size (bronchi are narrower). They are composed of several layers which together make up a thick wall. The wall is mostly composed of cartilage, in the form of incomplete C rings. Inside surface of the cartilage is a layer of glandular and connective tissue, elastic fibres, smooth muscle and blood vessels. This is referred to as the 'loose tissue'. The inner lining is an epithelial layers composed of ciliated epithelium and goblet cells.

The **bronchioles** are narrower than the bronchi. Only the larger bronchioles contain cartilage. Their wall is made out of smooth muscle and elastic fibres. The smallest of bronchioles have alveoli clusters at the ends.

## Structures and functions of mammalian gaseous exchange system include:

- Cartilage involved in supporting the trachea and bronchi, plays an important role
  in preventing the lungs from collapsing in the event of pressure drop during
  exhalation
- Ciliated epithelium present in bronchi, bronchioles and trachea, involved in moving mucus along to prevent lung infection by moving it towards the throat
- Squamous epithelium Line the alveoli and allow gas exchange to take place between the capillaries and the air in the lungs. They are thin with a large surface area for quick diffusion.
- Goblet cells cells present in the trachea, bronchi and bronchioles involved in mucus secretion to trap bacteria and dust to reduce the risk of infection with the help of lysozyme which digests bacteria
- Smooth muscle their ability to contract enables them to play a role in constricting the airway, thus controlling its diameter as a result and thus controlling the flow of air to and from alveoli
- Elastic fibres stretch when we exhale and recoil when we inhale thus controlling the flow of air

## **Smoking**

Smoking is one of the major avoidable risk factors of chronic, life-threatening diseases of the gas exchange and circulatory systems.

The components of tobacco smoke include tar, carbon dioxide and nicotine.

As tar settles on the epithelium lining, it leads to inflammation and therefore causes the amount of mucus secreted by Goblet cells to increase, as a result causing the accumulation of phagocytes. This can lead to obstructive pulmonary disease where the airways are obstructed by the excess of mucus. Other potential effects include emphysema where the surface area available for gas exchange is significantly reduced due to the damage to alveoli. Moreover, tar can also cause cancer as it contains carcinogens which can cause mutations of epithelial cells lining the bronchi and bronchioles.

**Carbon monoxide** can irreversibly **bind to haemoglobin**, therefore reducing the amount of oxygen that can be carried by the blood.



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Nicotine is a highly addictive substance in tobacco which stimulates the nervous system, causing the arterioles to constrict. At the same time, adrenaline is released. These two factors in combination cause the heart rate and blood pressure to increase, whilst reducing the supply of blood to extremities of the body.