

Functional morphology of kidneys Clearance

Assoc. Prof. MUDr. Markéta Bébarová, Ph.D.

Department of Physiology

Faculty of Medicine, Masaryk University

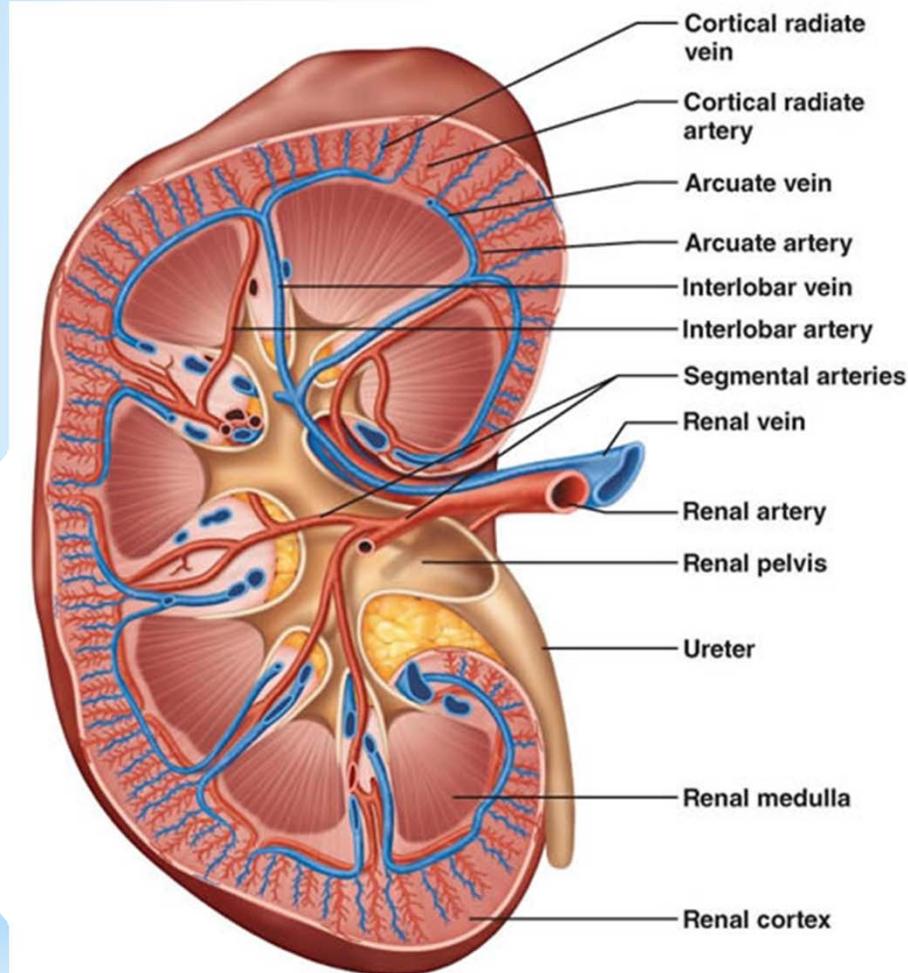


This presentation includes only the most important terms and facts. Its content by itself is not a sufficient source of information required to pass the Physiology exam.

Renal Functions

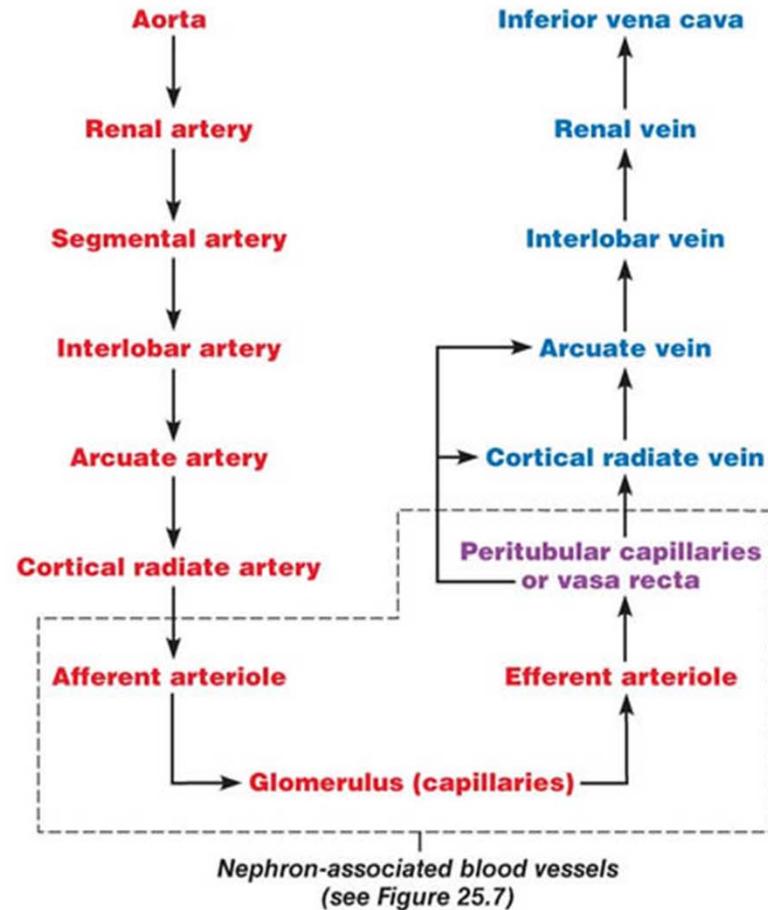
- Excretion of Waste Products and Toxins
- Control of Volume and Composition of Body Fluids, Osmolality
- Regulation of Acid-Base Balance
- Regulation of Blood Pressure
- Secretion, Metabolism and Excretion of Hormones
- Glukoneogenesis

Structure of Kidney



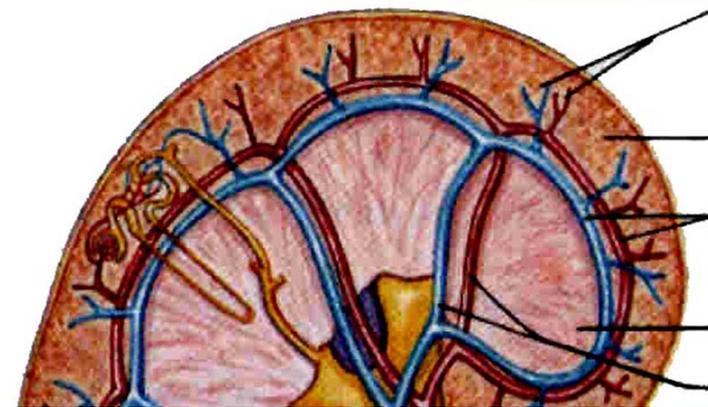
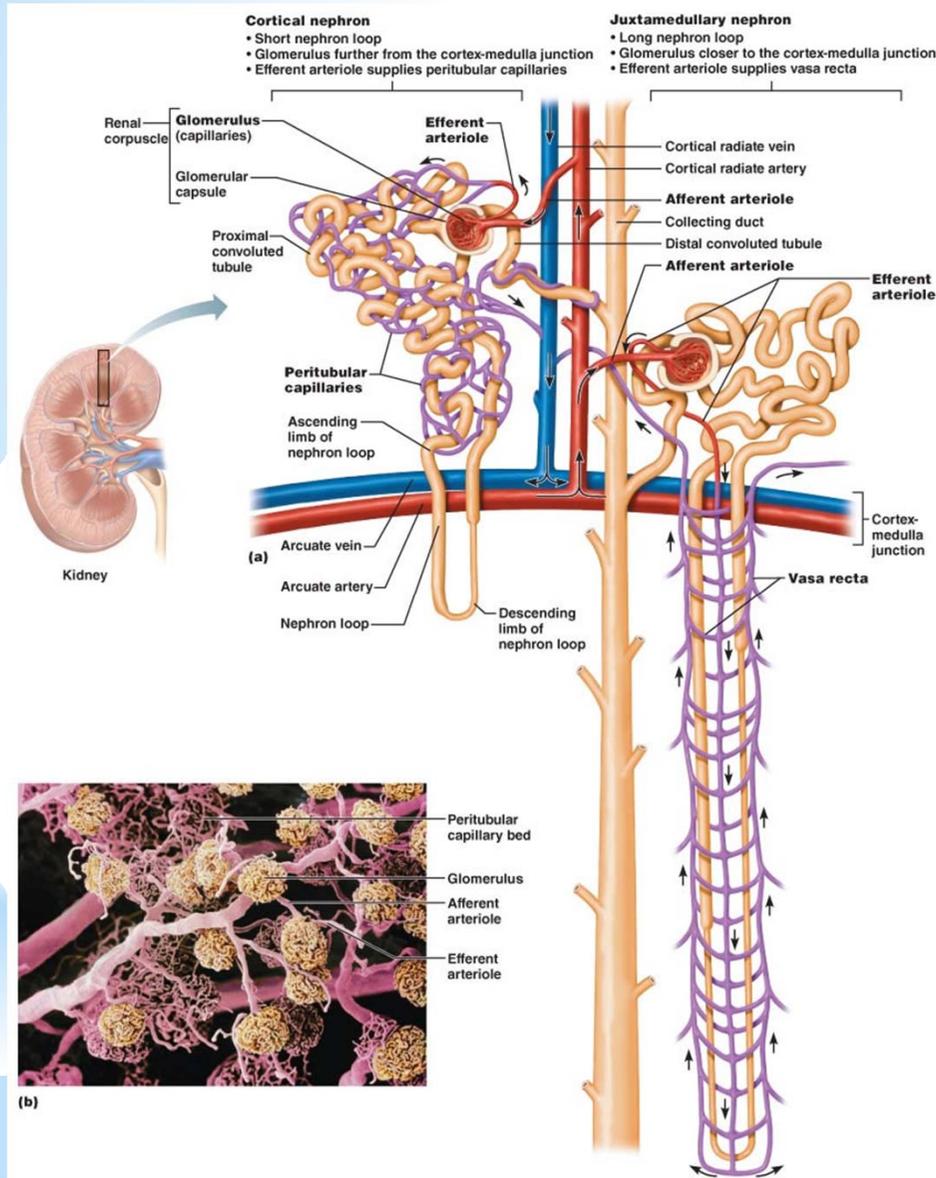
(a) Frontal section illustrating major blood vessels

© 2013 Pearson Education, Inc.



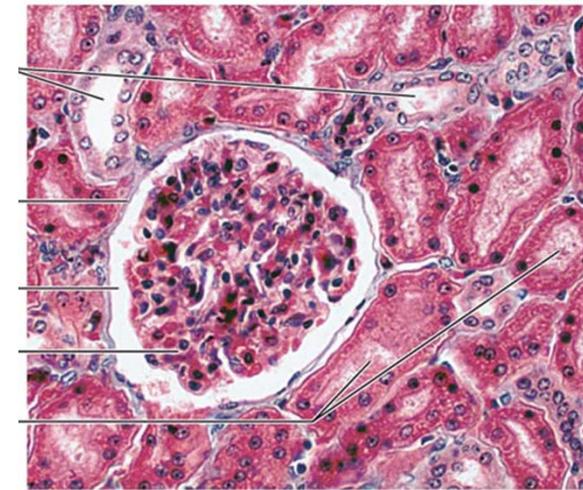
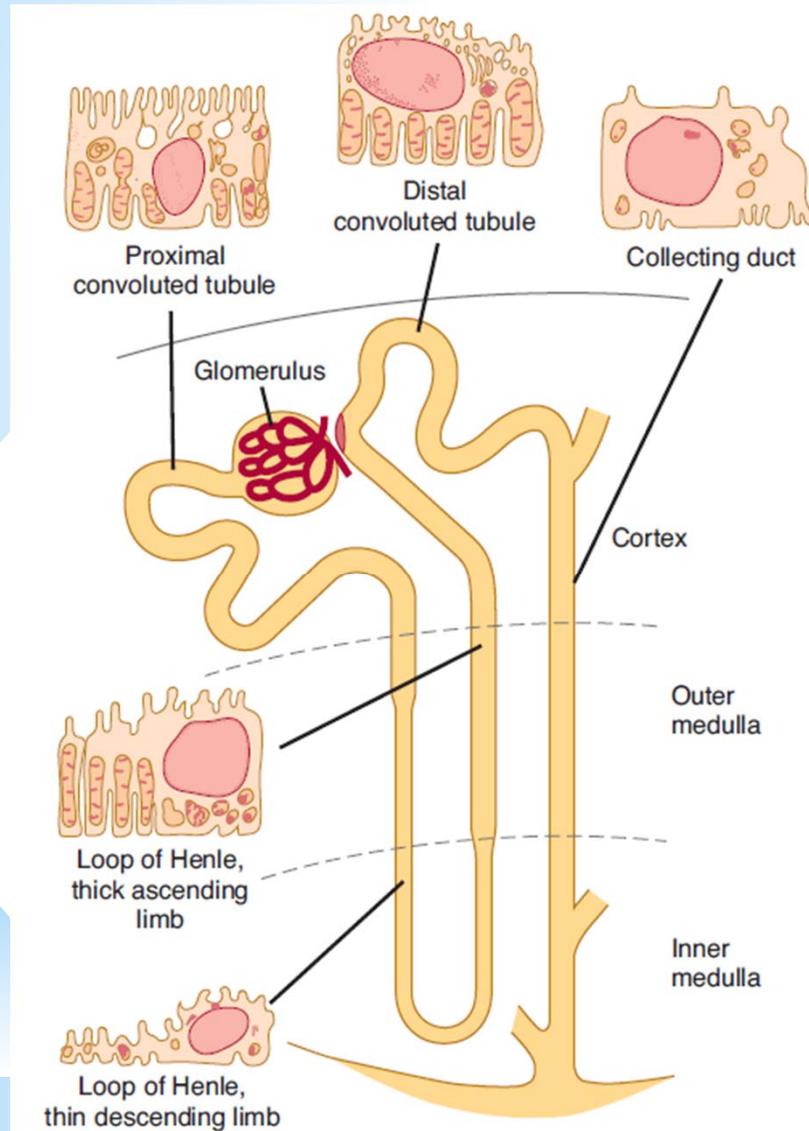
(b) Path of blood flow through renal blood vessels

Structure of Kidney



<http://classes.midlandstech.edu/carterp/Courses/bio211/chap25/chap25.htm>

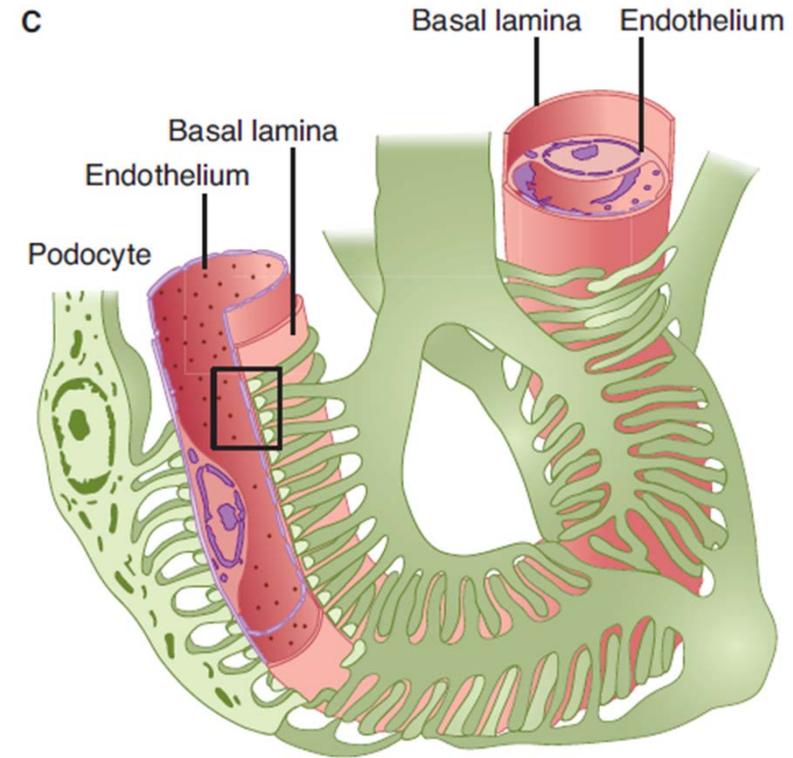
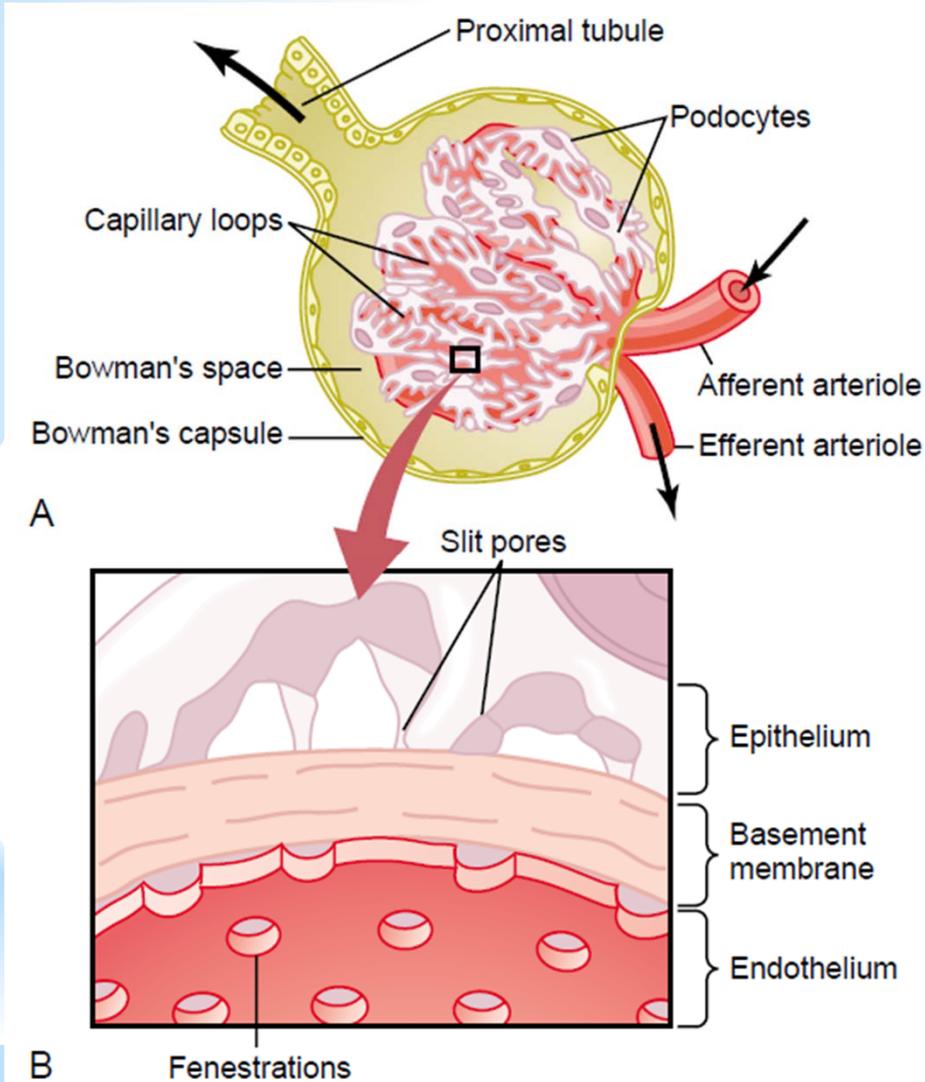
Structure of Nephron



Renal cortical tissue (180×)

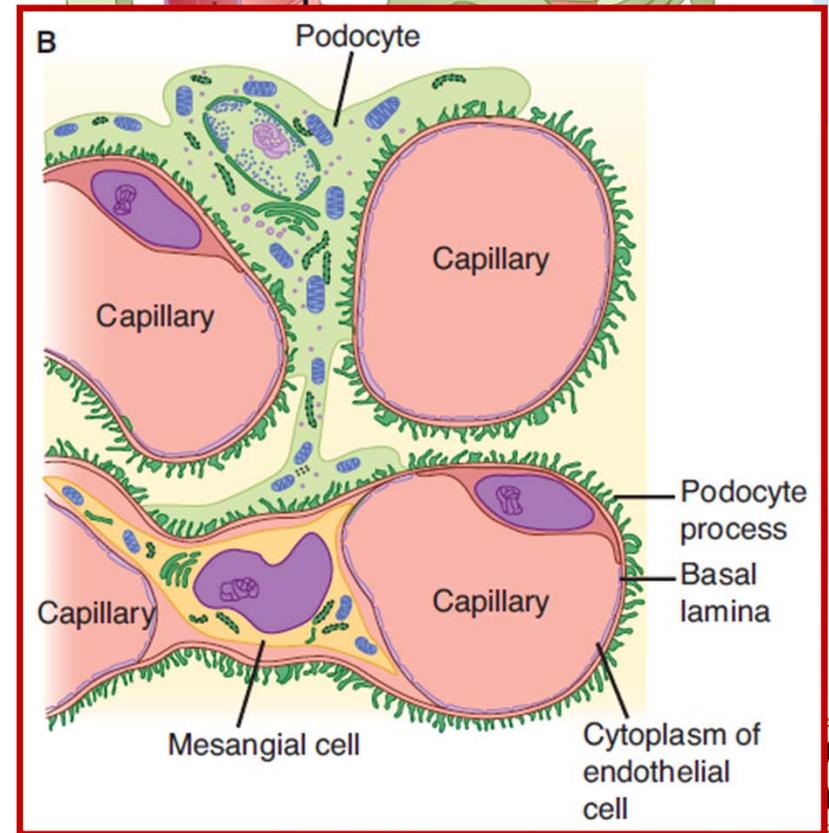
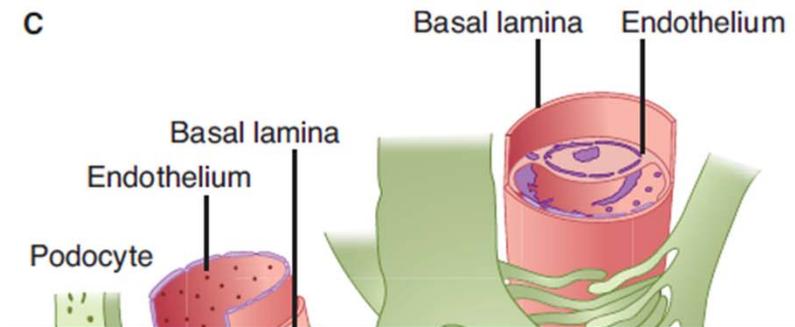
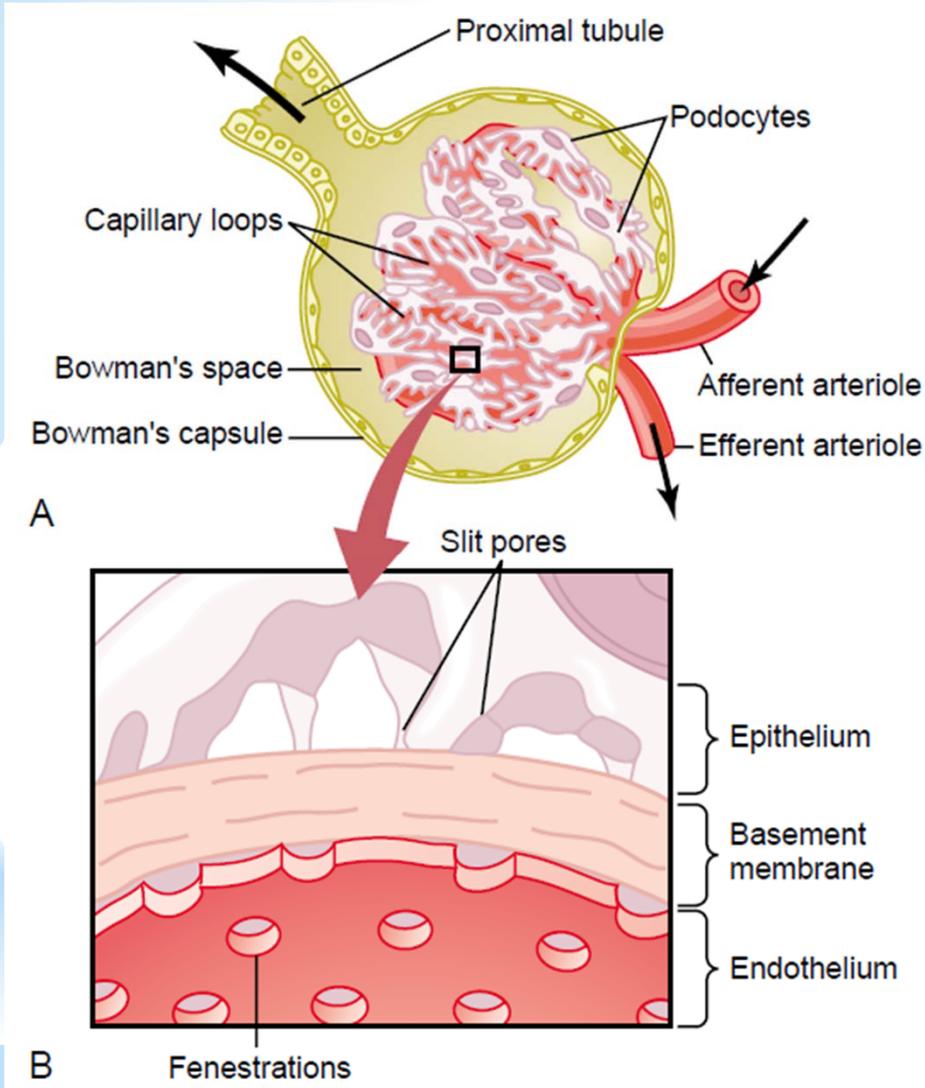
Ganong's Review of Medical Physiology, 23rd edition

Structure of Nephron - Glomerulus



Guyton & Hall. Textbook of Medical Physiology

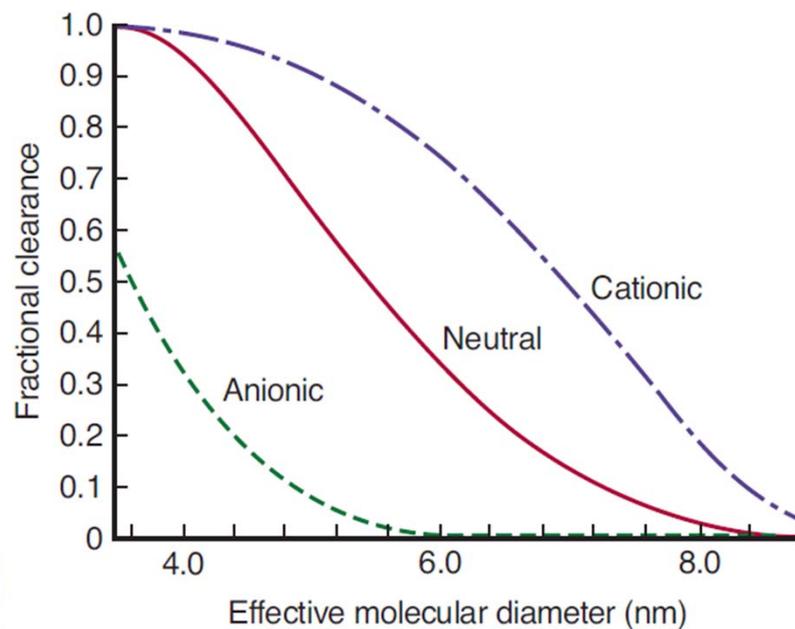
Structure of Nephron - Glomerulus



Guyton & Hall. Textbook of Medical Physiology

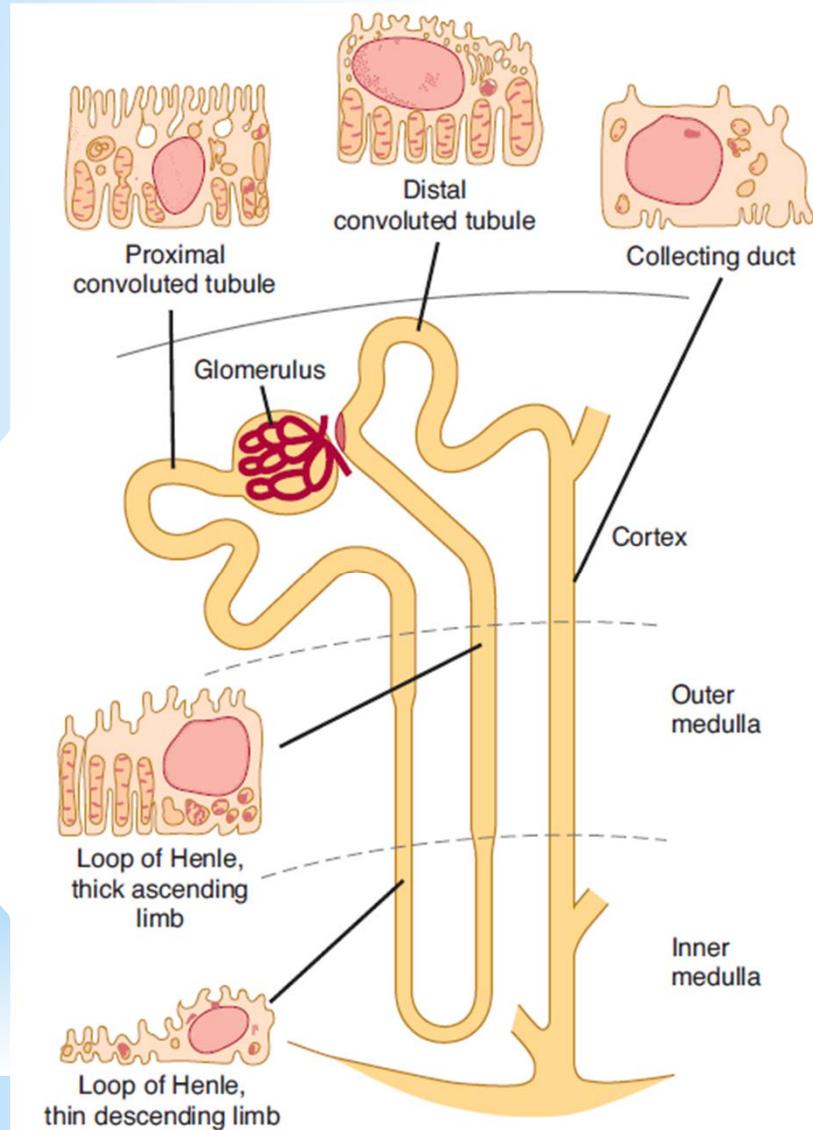
Structure of Nephron - Glomerulus

- High filtration rate in glomeruli provided by high permeability of glomerular membrane
- Protein passage barrier negative charge of all layers of glomerular membrane



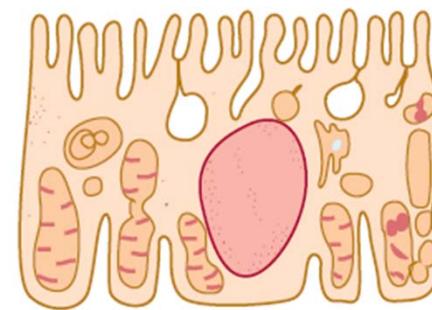
Ganong's Review of Medical Physiology

Structure of Nephron - Tubulus



➤ glomerulus

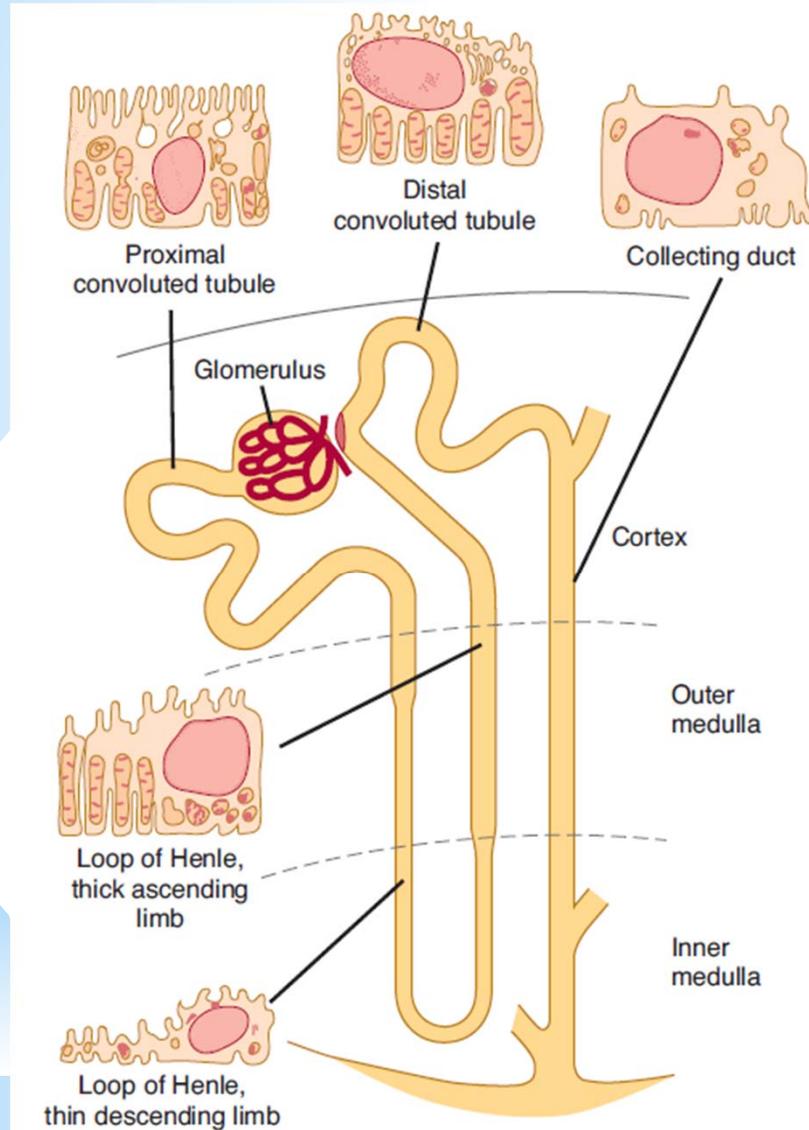
➤ proximal convoluted tubule



Proximal convoluted tubule

Ganong's Review of Medical Physiology, 23rd edition

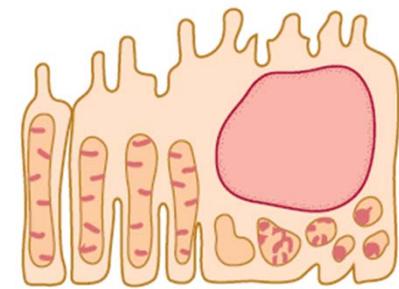
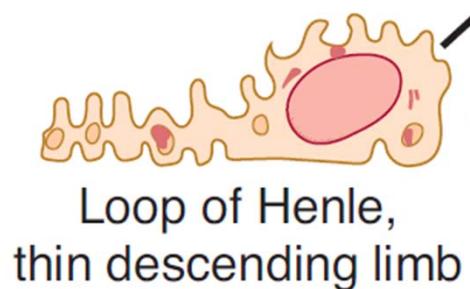
Structure of Nephron - Tubulus



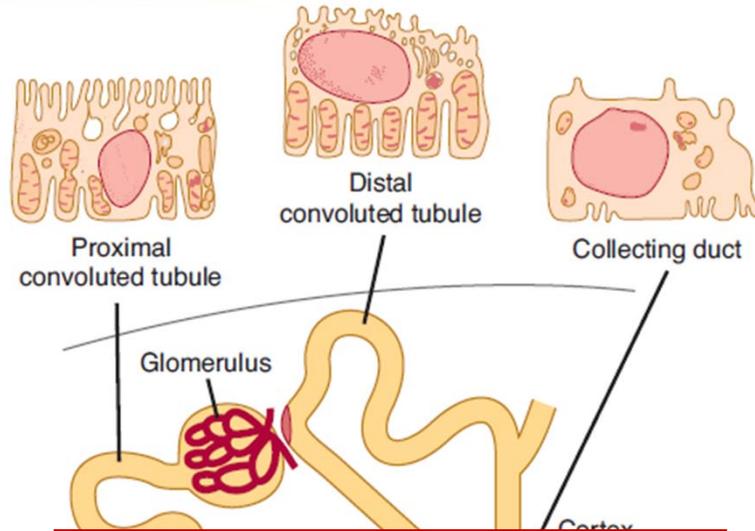
➤ glomerulus

➤ proximal convoluted tubule

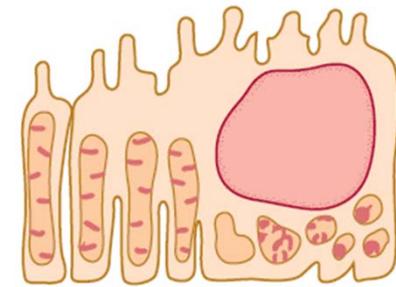
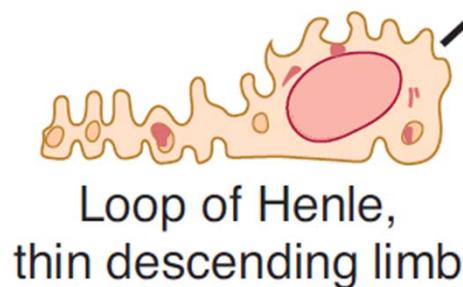
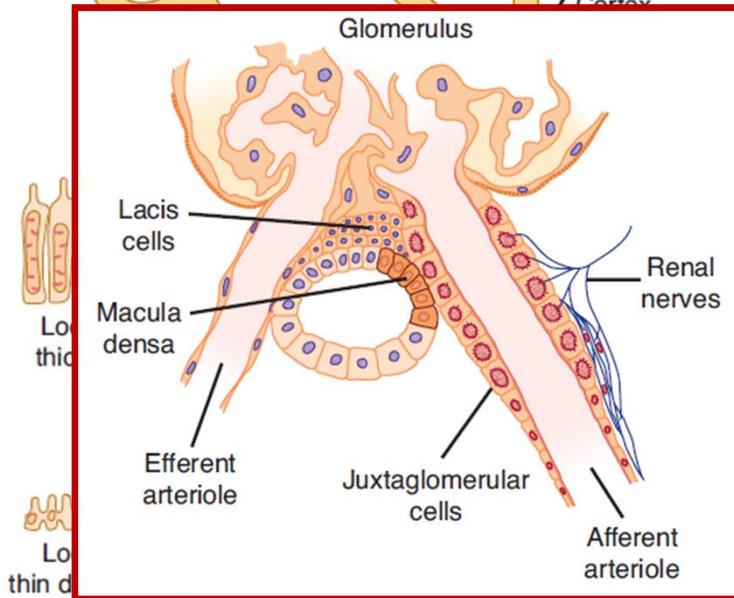
➤ loop of Henle



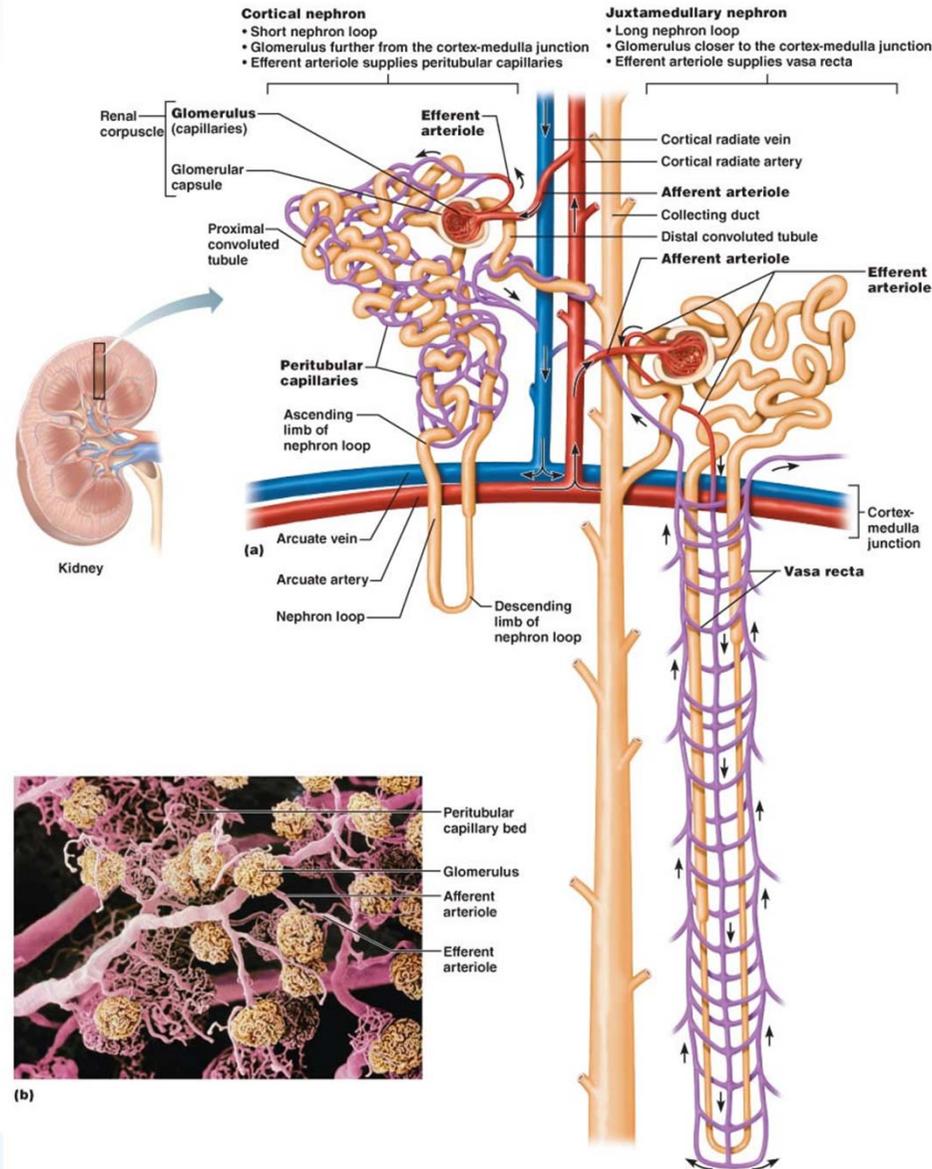
Structure of Nephron - Tubulus



- glomerulus
- proximal convoluted tubule
- loop of Henle

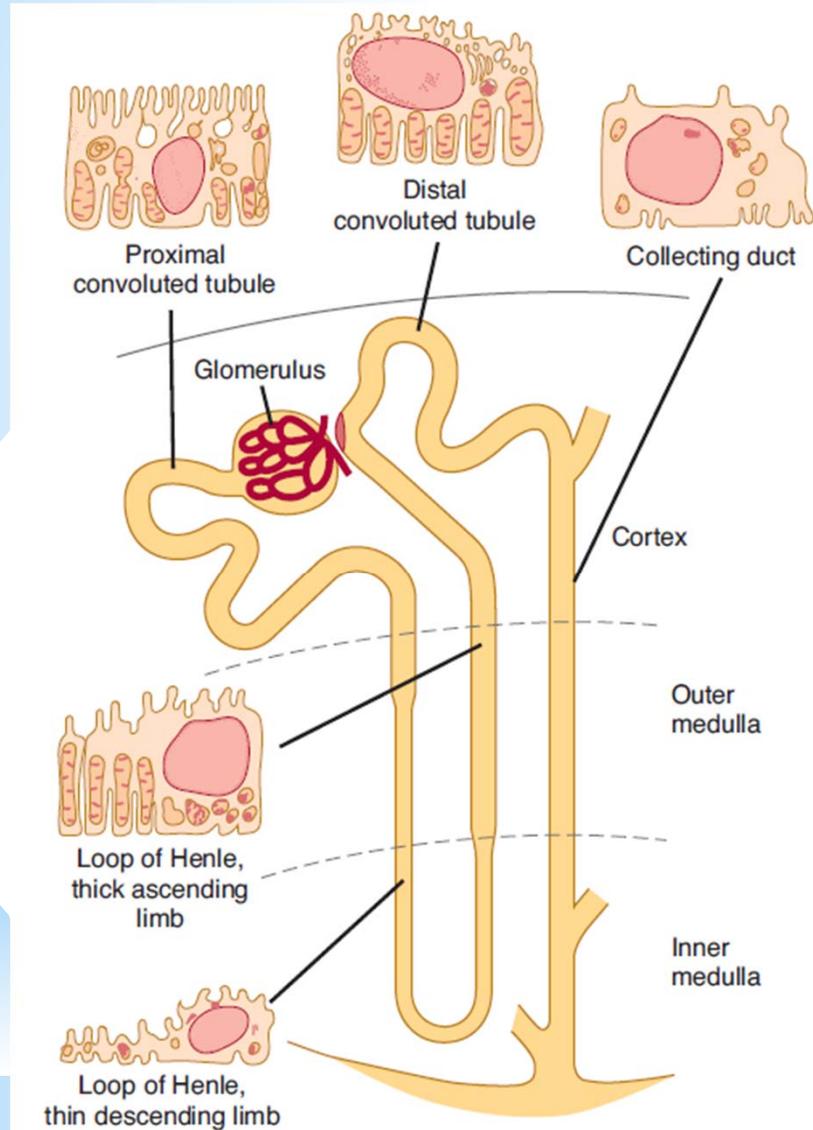


Structure of Nephron - Tubulus

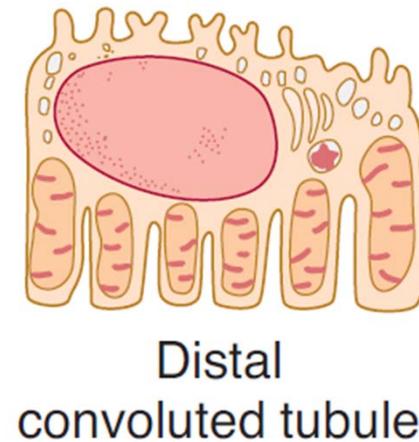


<http://classes.midlandstech.edu/carterp/Courses/bio211/chap25/chap25.htm>

Structure of Nephron - Tubulus

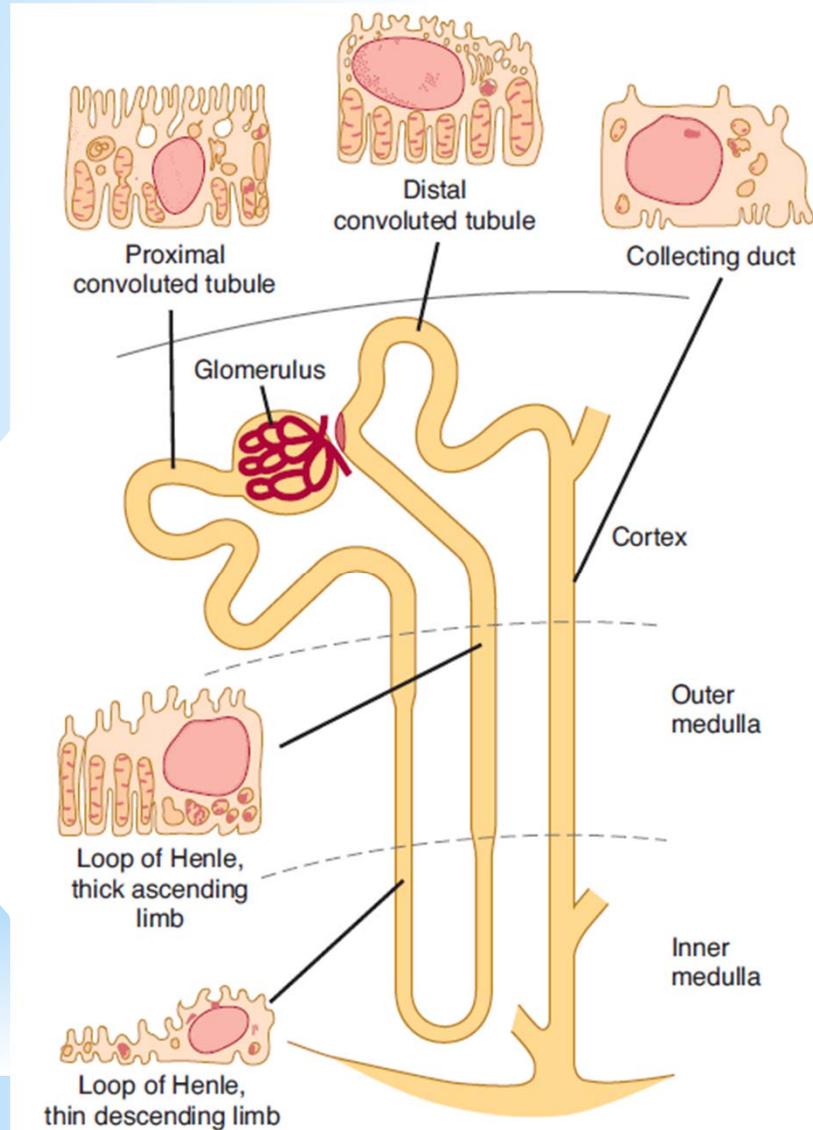


- glomerulus
- proximal convoluted tubule
- loop of Henle
- distal convoluted tubule

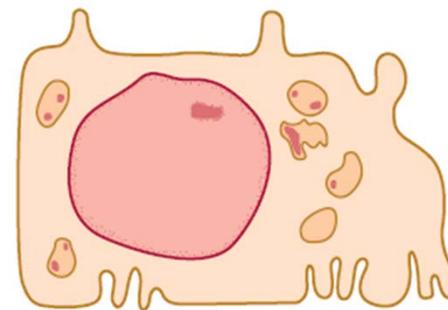


Ganong's Review of Medical Physiology, 23rd edition

Structure of Nephron - Tubulus



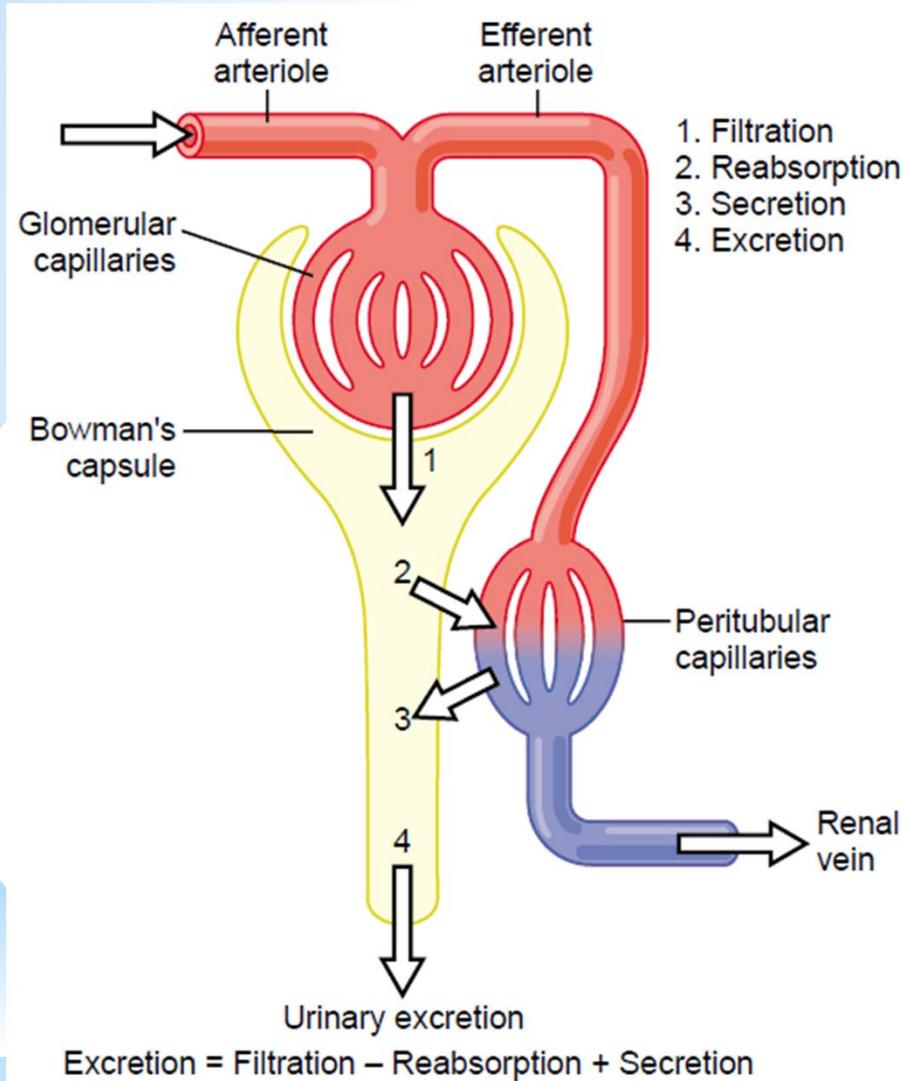
- glomerulus
- proximal convoluted tubule
- loop of Henle
- distal convoluted tubule
- collecting duct



Collecting duct

Ganong's Review of Medical Physiology, 23rd edition

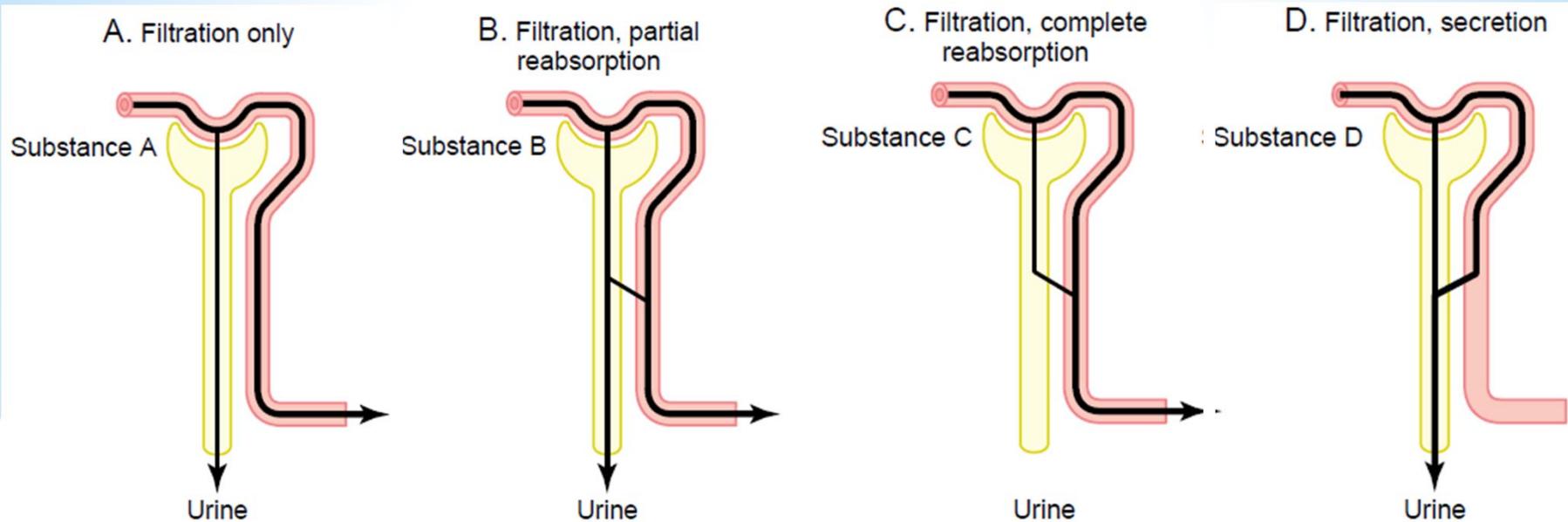
Urine Formation



- 1) Glomerular filtration
- 2) Tubular reabsorption
- 3) Tubular secretion
- 4) Urine excretion

Guyton & Hall. Textbook of Medical Physiology

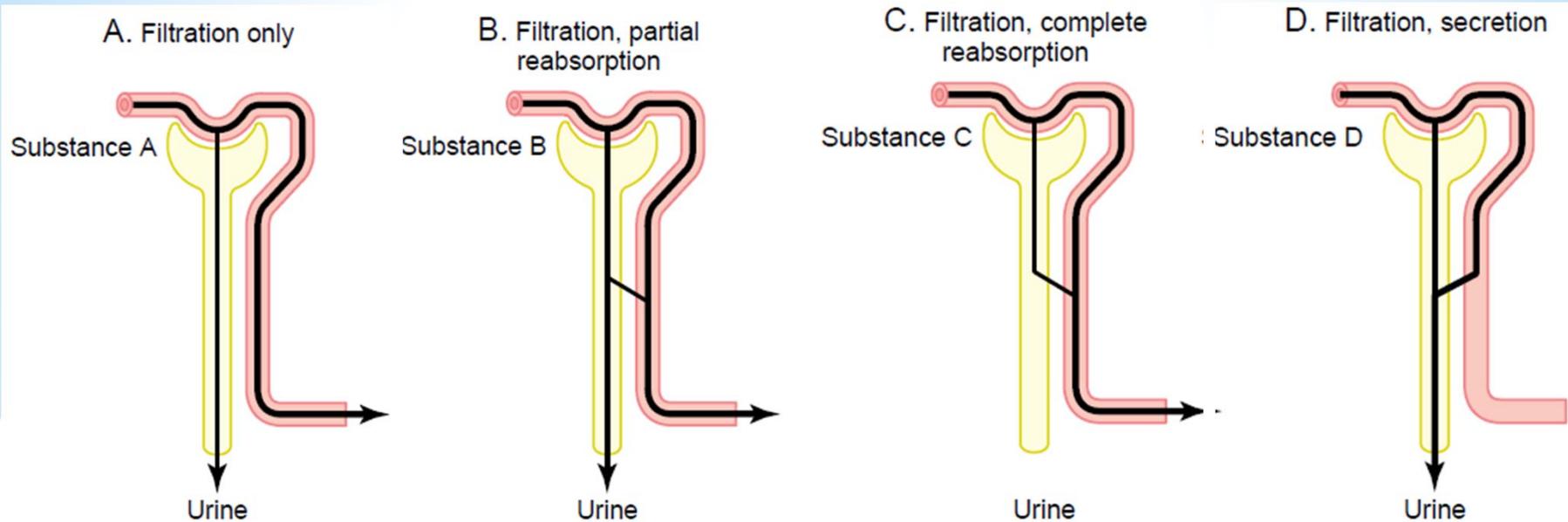
Urine Formation



Guyton & Hall. Textbook of Medical Physiology

- creatinine
- other waste products
- electrolytes
- amino acids
- glucose
- PAH
- toxins
- organic base and acids

Urine Formation



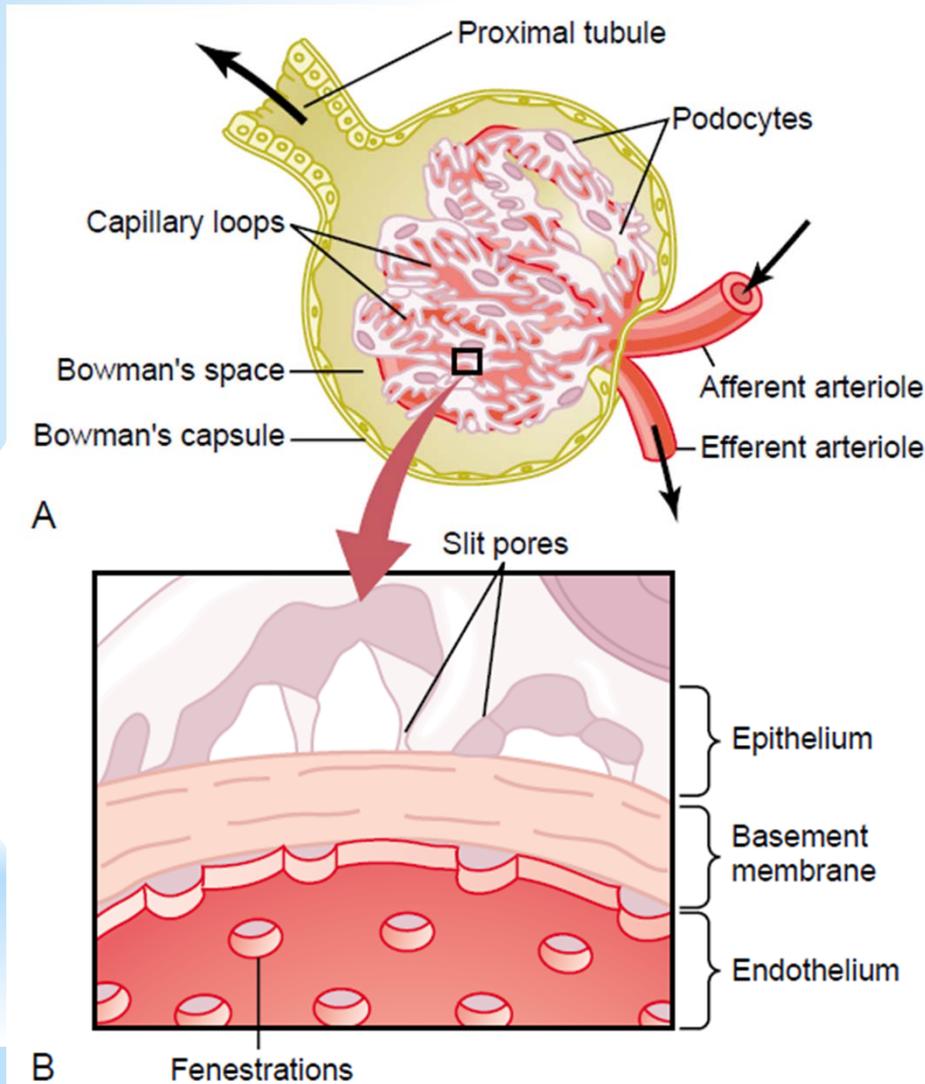
Guyton & Hall. Textbook of Medical Physiology

- creatinine
- other waste products

Substance	Concentration in		
	Urine (U)	Plasma (P)	U/P Ratio
Glucose (mg/dL)	0	100	0
Na ⁺ (mEq/L)	90	140	0.6
Urea (mg/dL)	900	15	60
Creatinine (mg/dL)	150	1	150

- PAH
- toxins
- organic base and acids

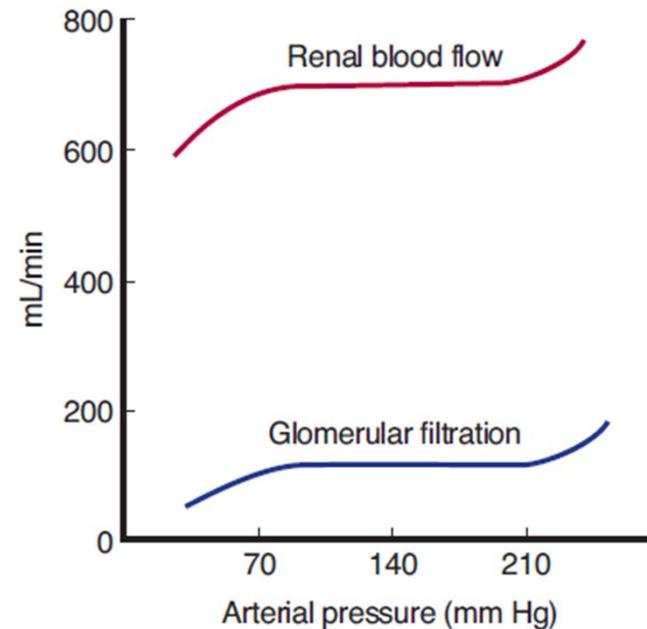
Urine Formation - Glomerular Filtration



$GFR = 125 \text{ ml/min} = 180 \text{ l/day}$

$FF = 0.2$

20% of plasma filtered!



Guyton & Hall. Textbook of Medical Physiology

Ganong's Review of Medical Physiology, 23rd edition



Urine Formation - Glomerular Filtration

Glomerular filtration rate (GFR) depends on:

- 1) Capillary filtration coefficient K_f
(permeability and area of glomerular membrane; mesangial cells)
- 2) Balance of hydrostatic and colloid osmotic forces

$$\text{GFR} = K_f \cdot \text{net filtration pressure}$$

Urine Formation - Glomerular Filtration

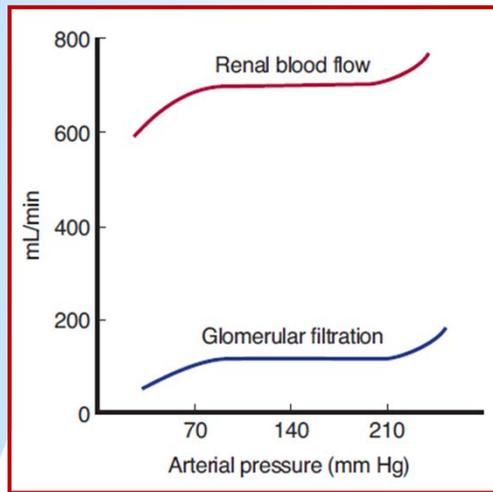
Glomerular filtration rate (GFR) depends on:

- 1) Capillary filtration coefficient K_f
(permeability and area of glomerular membrane; mesangial cells)
- 2) Balance of hydrostatic and colloid osmotic forces

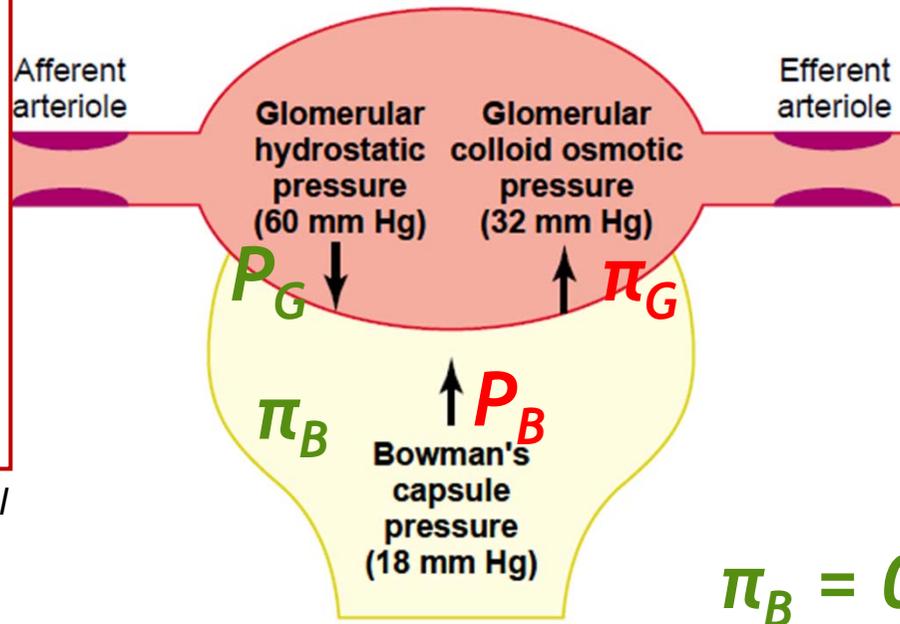
$$\text{GFR} = K_f \cdot \text{net filtration pressure}$$

Urine Formation - Glomerular Filtration

$$\text{GFR} = K_f \cdot \text{net filtration pressure}$$



Ganong's Review of Medical Physiology, 23rd edition



Guyton & Hall. Textbook of Medical Physiology

Under physiological conditions:

$$\text{net filtration pressure} = P_G + \pi_B - P_B - \pi_G = 60 + 0 - 18 - 32 = 10 \text{ mmHg}$$

$$\text{GFR} = K_f \cdot (P_G + \pi_B - P_B - \pi_G)$$

Urine Formation - Glomerular Filtration

Vas afferens, vas efferens

- input and output of high-pressure glomerular capillary net

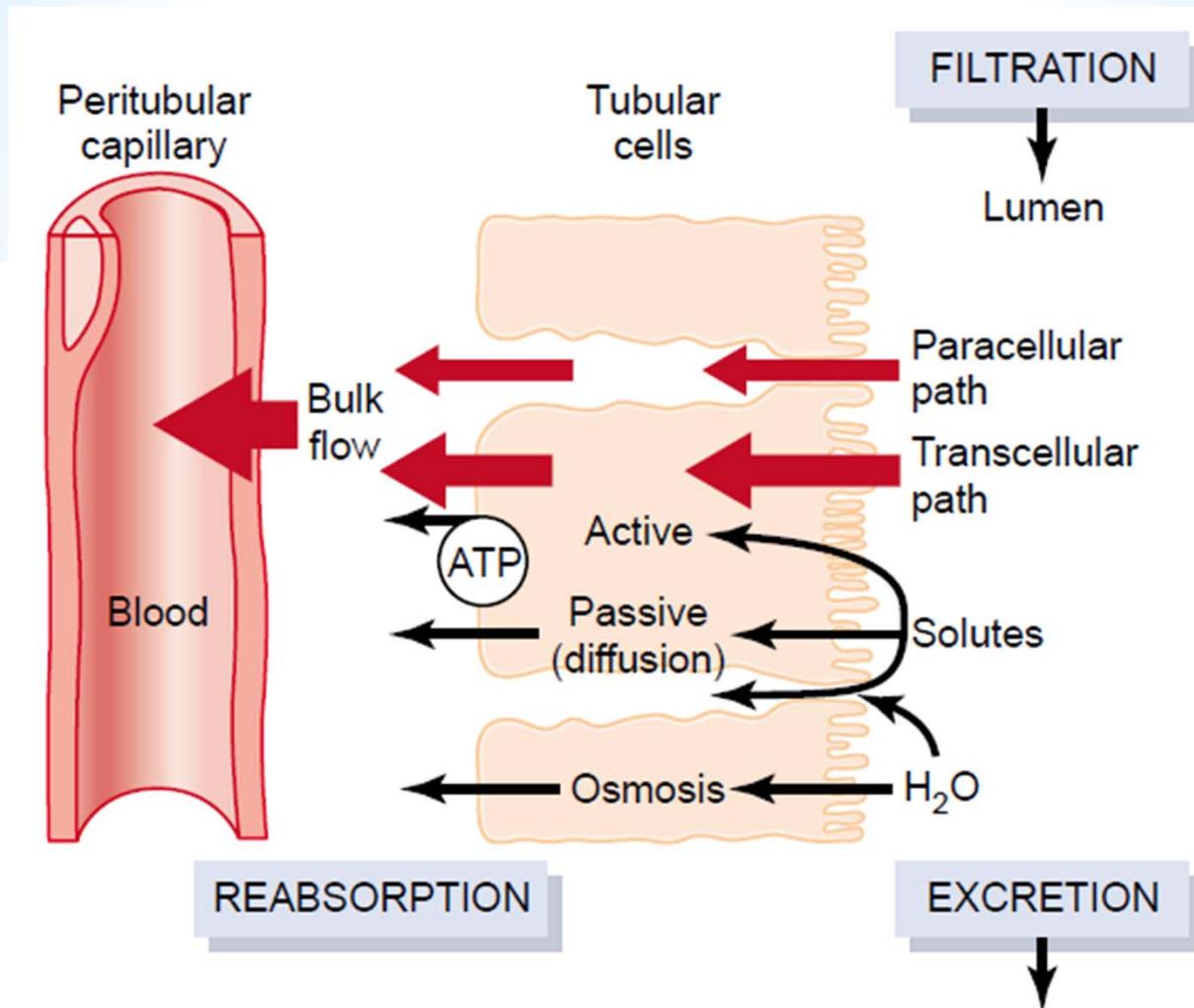
- glomerular blood flow =
$$\frac{P_{v.a.} - P_{v.e.}}{R_{v.a.} + R_{v.e.} + \cancel{R_{g.k.}}}$$

- \uparrow **resistance** of *vas aff.* or *vas eff.* \rightarrow \downarrow **renal blood flow** (if the arterial pressure is stable)
- **control the glomerular filtration pressure:**

constriction of *vas aff.* \rightarrow \downarrow glomerular pressure \rightarrow \downarrow filtration

constriction of *vas eff.* \rightarrow \uparrow glomerular pressure \rightarrow \uparrow filtration

Urine Formation – Tubular Processes



Guyton & Hall. Textbook of Medical Physiology

Urine Formation – Tubular Processes

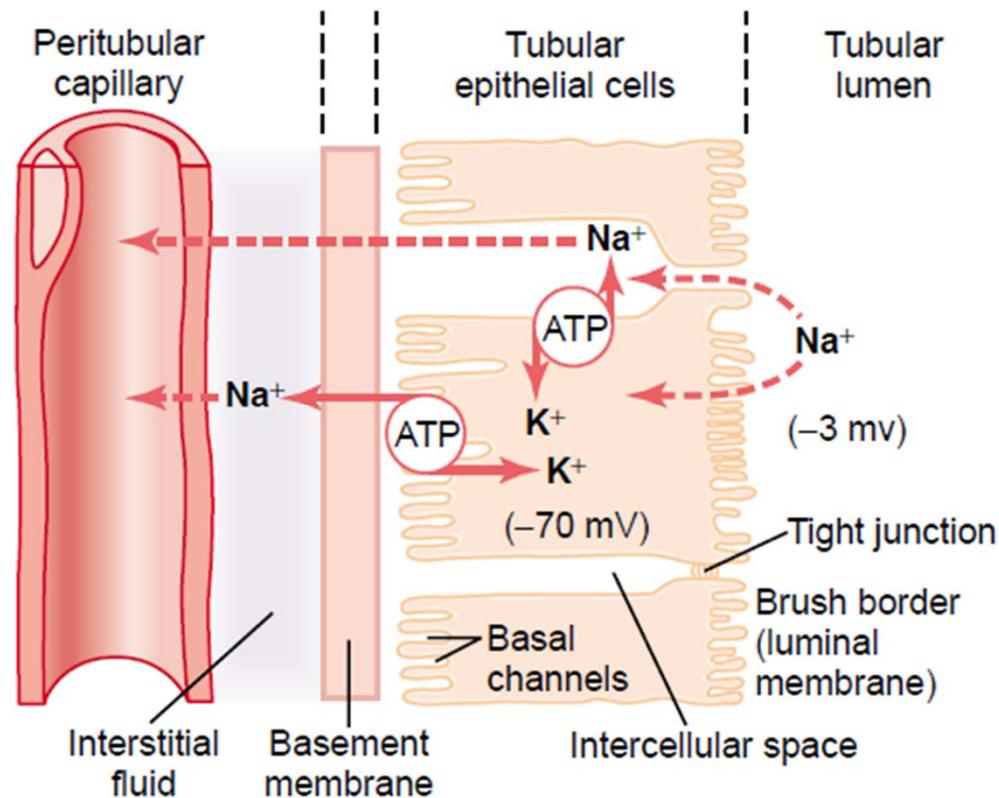
Active Transport Mechanisms

- 1) Primary active transport
- 2) Secondary active transport
- 3) Pinocytosis
(big molecules, e.g. proteins, namely in the proximal tubule)

Urine Formation – Tubular Processes

Active Transport Mechanisms

1) Primary active transport



Guyton & Hall. Textbook of Medical Physiology

Urine Formation – Tubular Processes

Active Transport Mechanisms

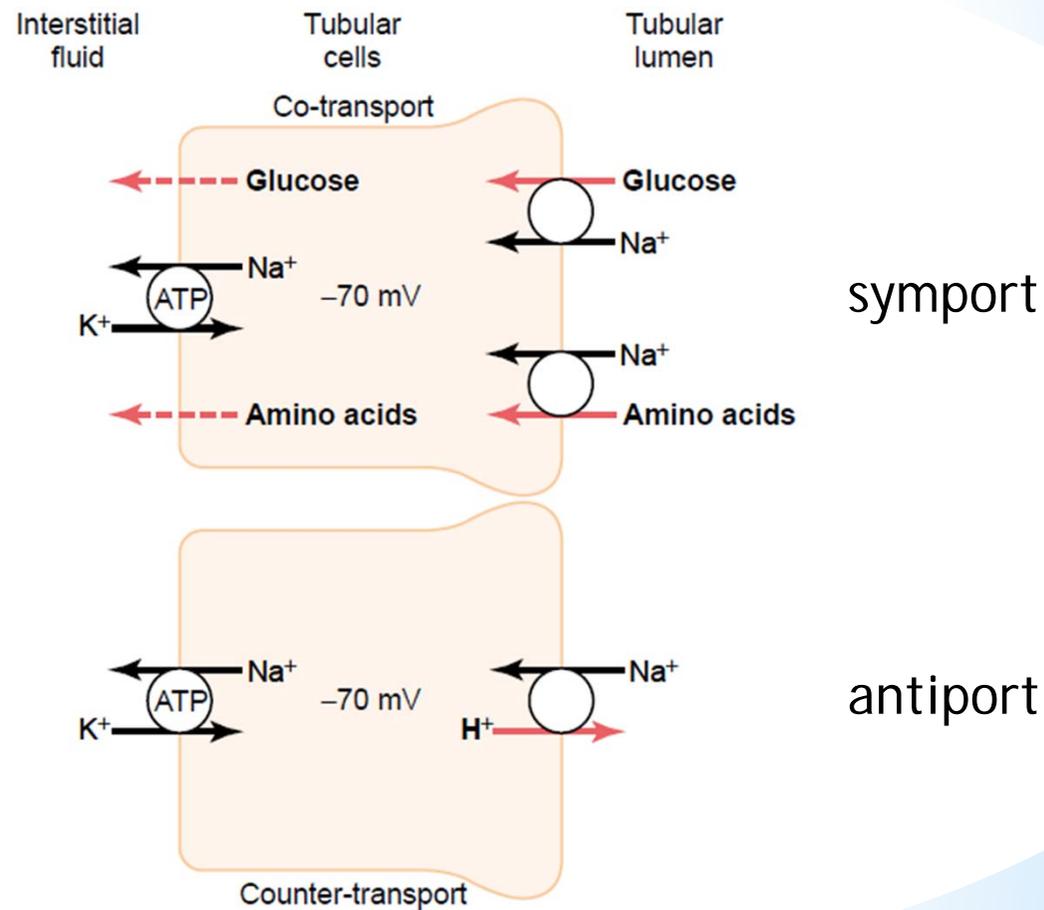
1) Primary active transport

- Na^+/K^+ ATPase
- H^+ ATPase
- H^+/K^+ ATPase
- Ca^{2+} ATPase

Urine Formation – Tubular Processes

Active Transport Mechanisms

2) Secondary active transport



Guyton & Hall. Textbook of Medical Physiology

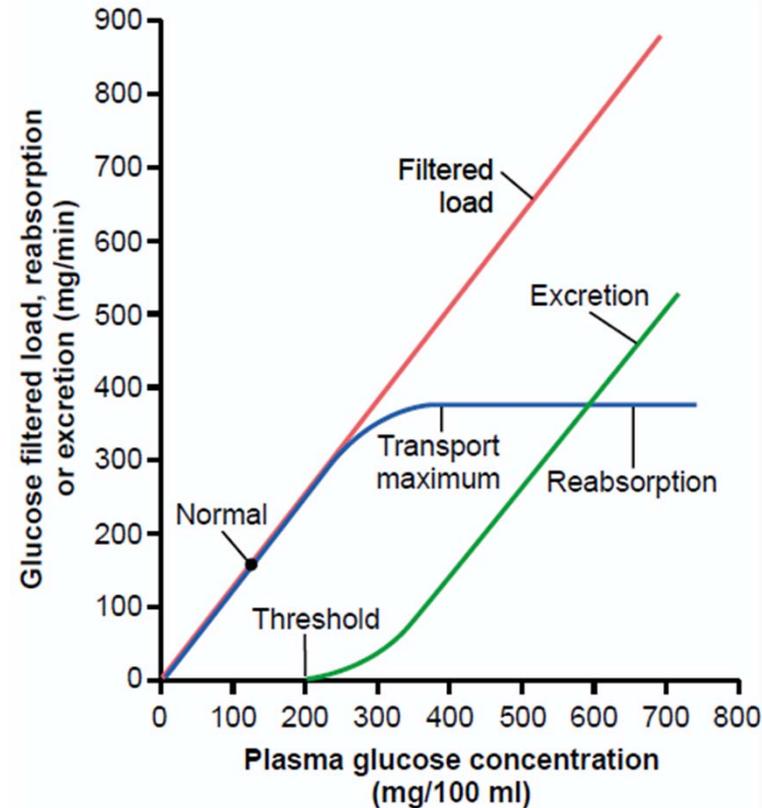
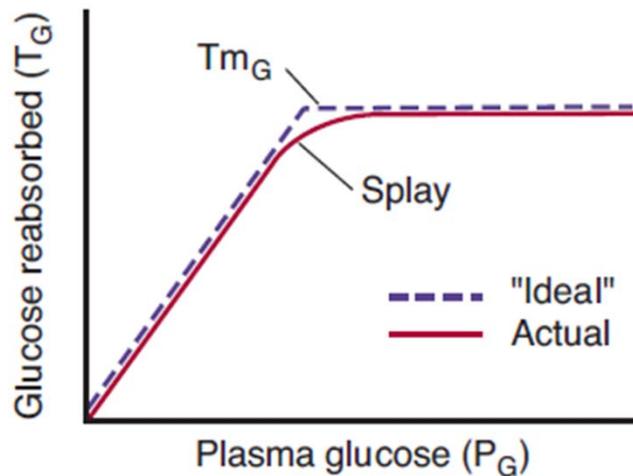


Urine Formation – Tubular Processes

Active Transport Mechanisms

Substances using active transport show the so called **transport maximum** (given by saturation of the transporter).

for example **glucose transport maximum**:
~320 mg/min



Guyton & Hall. Textbook of Medical Physiology

Urine Formation – Tubular Processes

Active Transport Mechanisms

Substances using active transport show the so called **transport maximum** (given by saturation of the transporter).

reabsorption

Substance	Transport Maximum
Glucose	375 mg/min
Phosphate	0.10 mM/min
Sulfate	0.06 mM/min
Amino acids	1.5 mM/min
Urate	15 mg/min
Lactate	75 mg/min
Plasma protein	30 mg/min

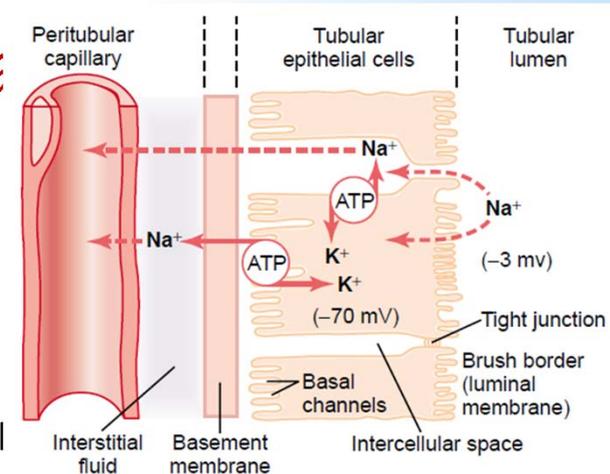
secretion

Substance	Transport Maximum
Creatinine	16 mg/min
Para-aminohippuric acid	80 mg/min

Urine Formation – Tubular Processes

Active Transport Mechanisms

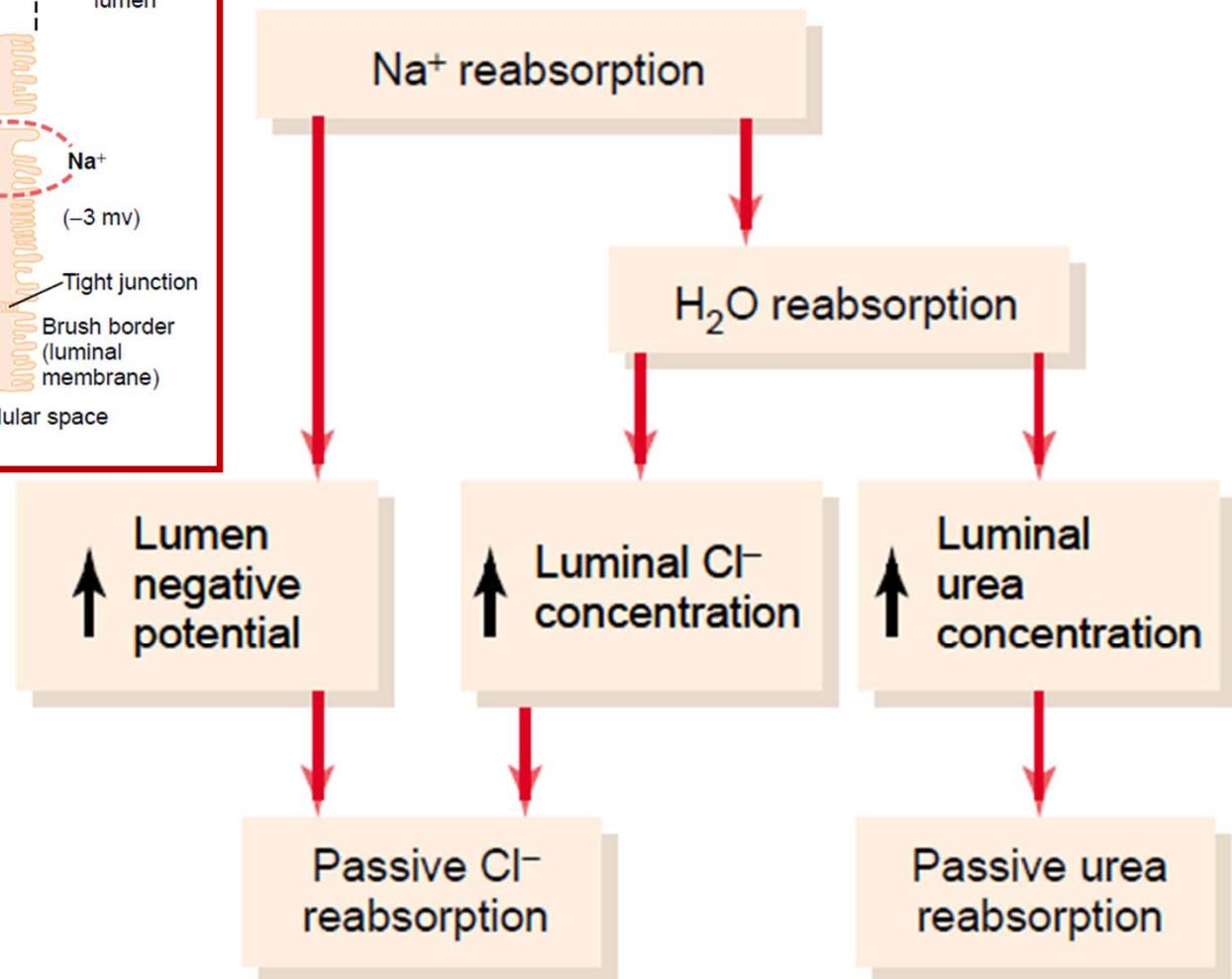
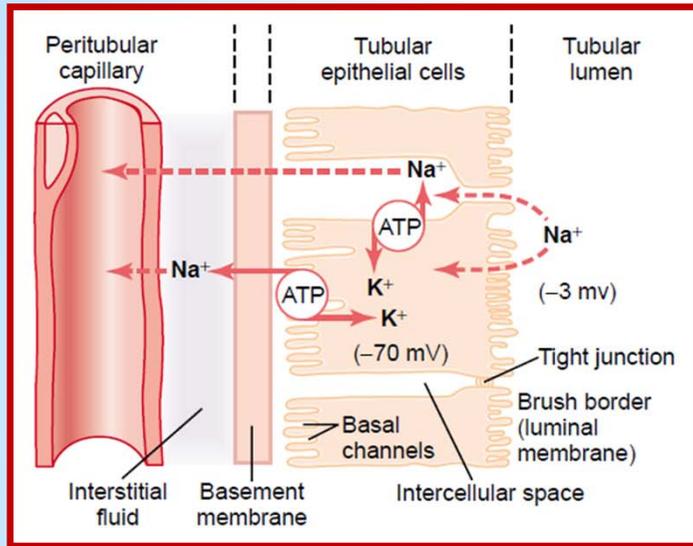
- 1) Primary active transport
- 2) Secondary active transport
- 3) Pinocytosis
(big molecules, e.g. proteins, namely in the proximal tubule)



Passive Transport Mechanisms

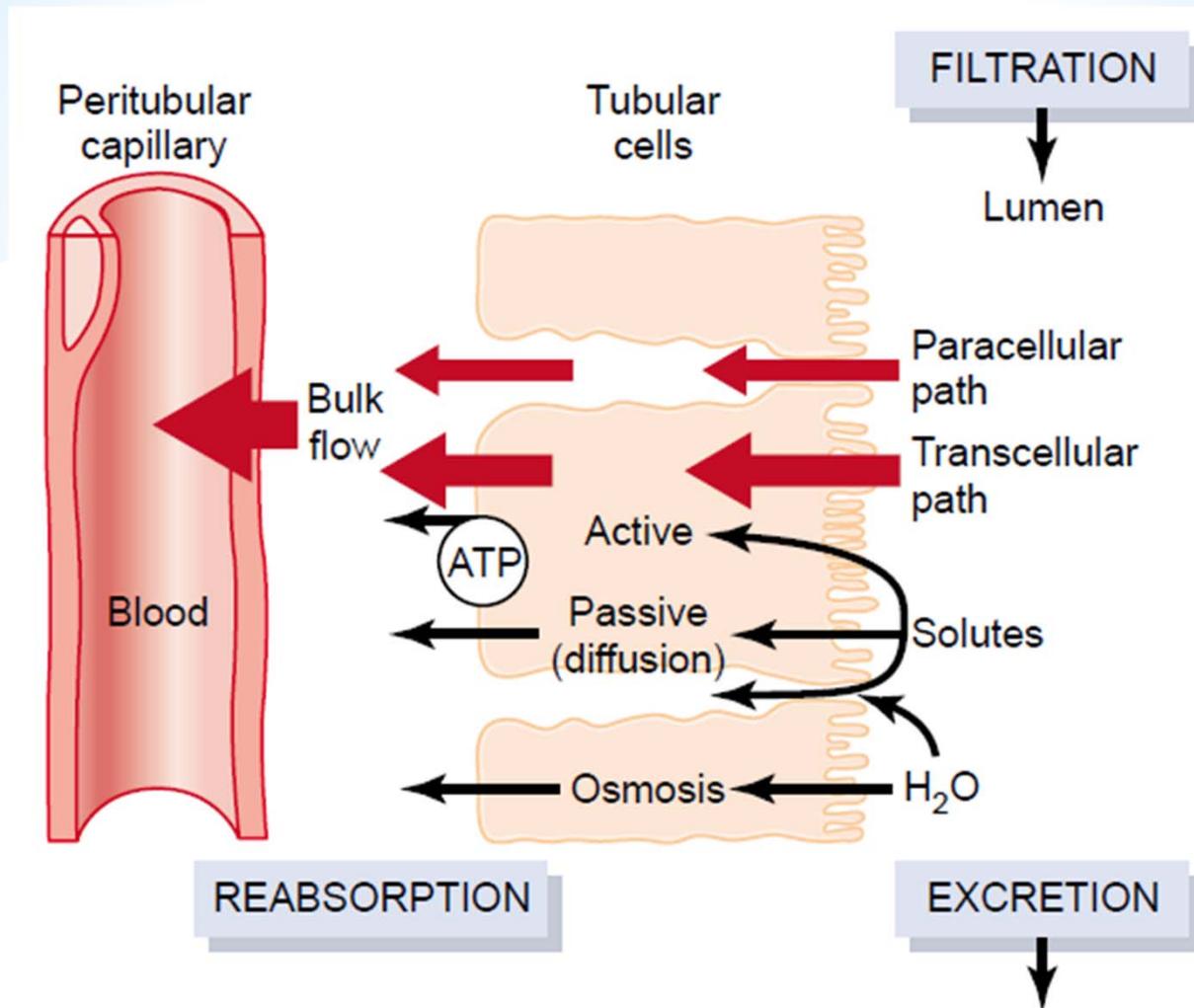
- 1) Reabsorption of H_2O by osmosis
 - in the proximal tubule (highly permeable for H_2O)
 - active reabsorption of solutes \rightarrow lumen-intersticium concentration gradient \rightarrow H_2O osmosis into intersticium
- 2) Reabsorption of solutes by diffusion
 - Cl^- (Na^+ into intersticium, reabsorption of H_2O by osmosis)
 - urea (reabsorption of H_2O by osmosis)

Urine Formation – Tubular Processes



Guyton & Hall. Textbook of Medical Physiology

Urine Formation – Tubular Processes



Guyton & Hall. Textbook of Medical Physiology

Urine Formation – Tubular Processes

Physical Forces in Peritubular Capillaries and in Renal Interstitium

- tubular reabsorption is controlled by hydrostatic and colloid osmotic forces (similarly to GFR)

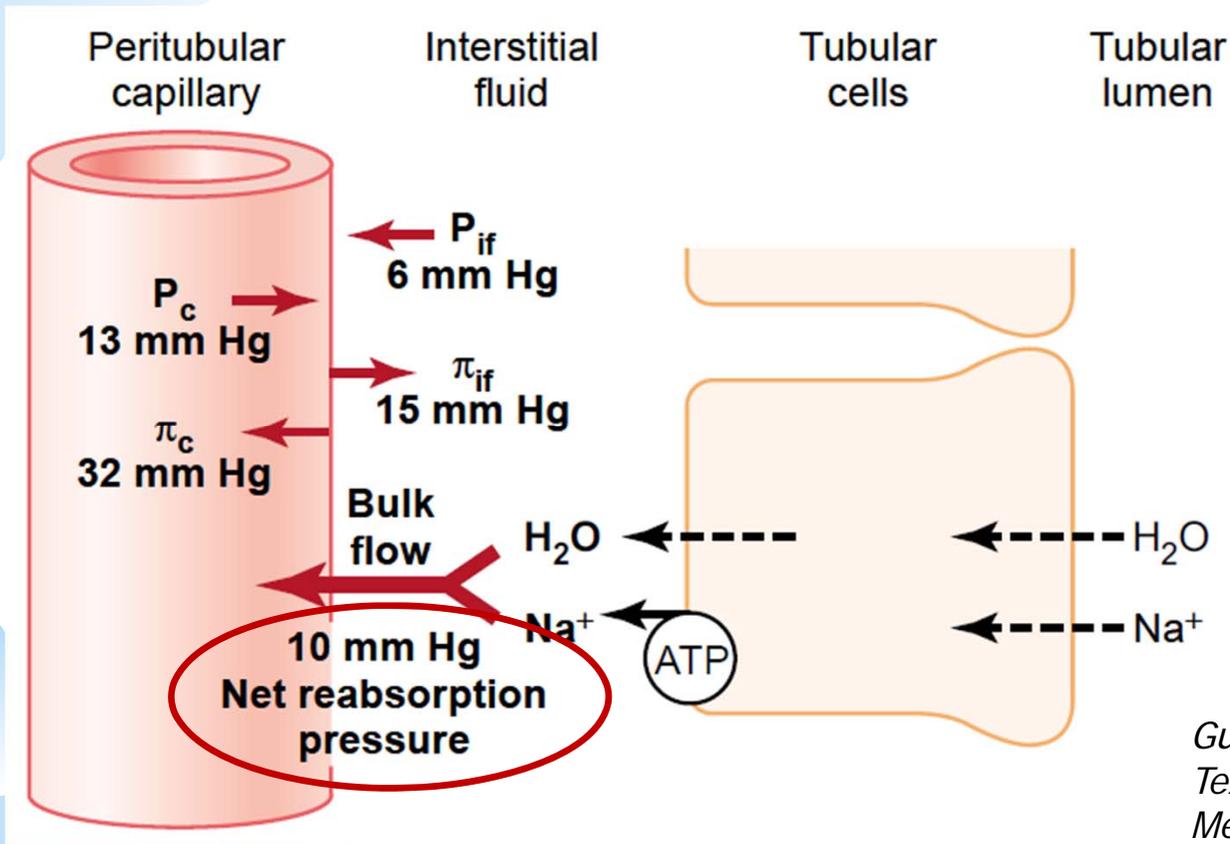
$$\text{GFR} = K_f \cdot \text{net filtration pressure}$$



$$\text{TRR} = K_f \cdot \text{net reabsorptive force}$$

Urine Formation – Tubular Processes

Physical Forces in Peritubular Capillaries and in Renal Intersticium

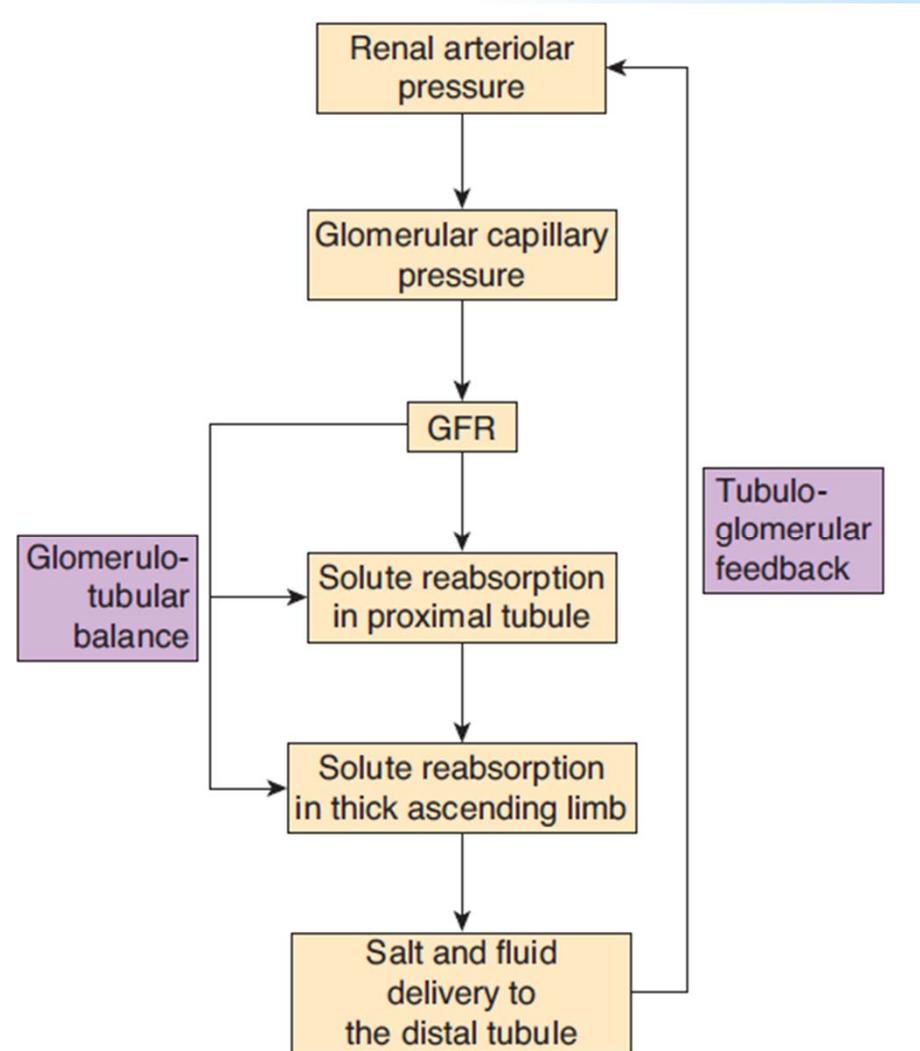


Guyton & Hall.
Textbook of
Medical Physiology

Urine Formation – Tubular Processes

Tubuloglomerular feedback

Glomerulotubular balance



Ganong's Review of Medical Physiology, 23rd edition



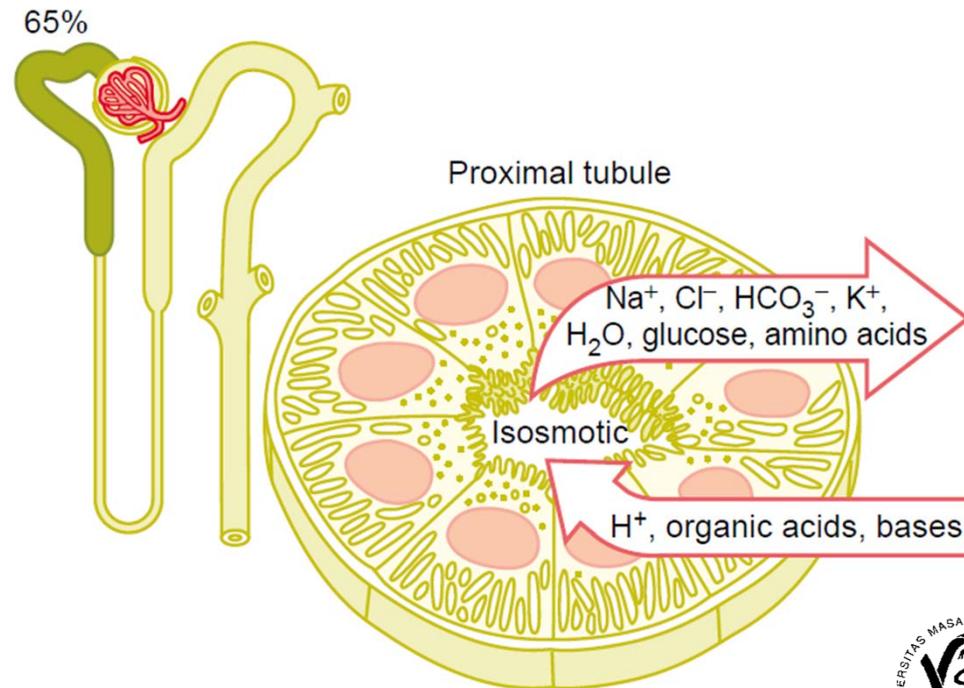
Urine Formation – Tubular Processes

Proximal Tubule

- 1) complete reabsorption of substances playing key roles for the organism (glucose, amino acids)
- 2) partial reabsorption of substances important for the organism (ions – Na^+ , K^+ , Cl^- , *etc.*)
- 3) reabsorption of water
- 4) secretion of H^+
- 5) reabsorption of HCO_3^-

Result:

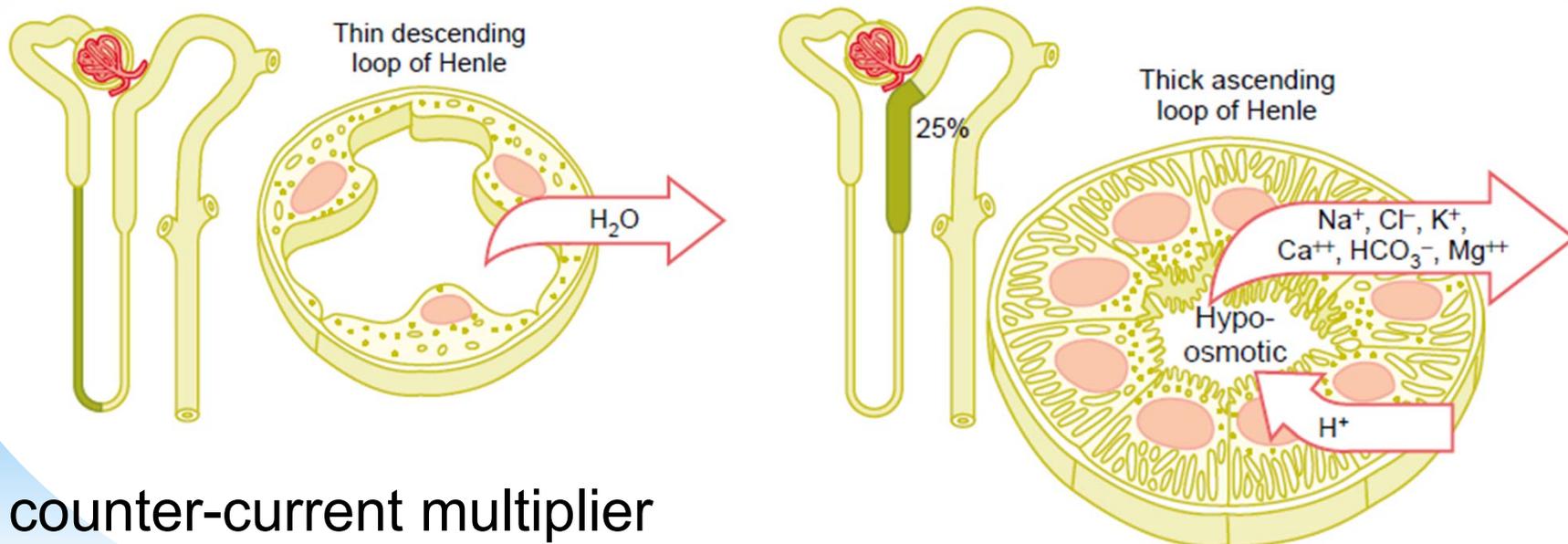
isoosmotic fluid,
notably decreased
volume



Urine Formation – Tubular Processes

Loop of Henle

- 1) **thin descending part** - passive reabsorption of water (osmosis)
- 2) **thick ascending part** - active reabsorption of ions ($\text{Na}^+/\text{K}^+/\text{2Cl}^-$ symport), secretion of H^+ , reabsorption of HCO_3^-



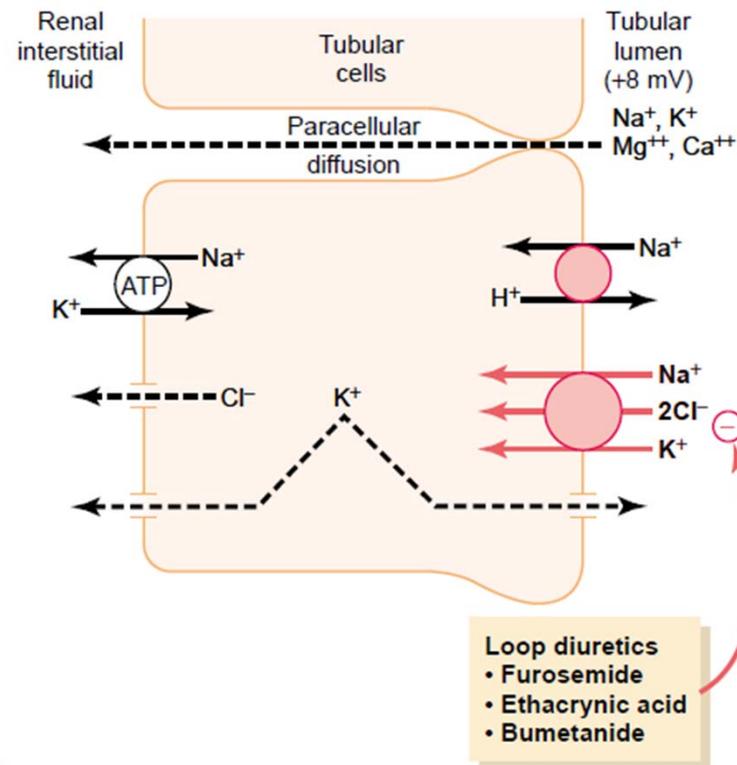
counter-current multiplier

Result: hypotonic fluid, volume further decreased

Urine Formation – Tubular Processes

Loop of Henle

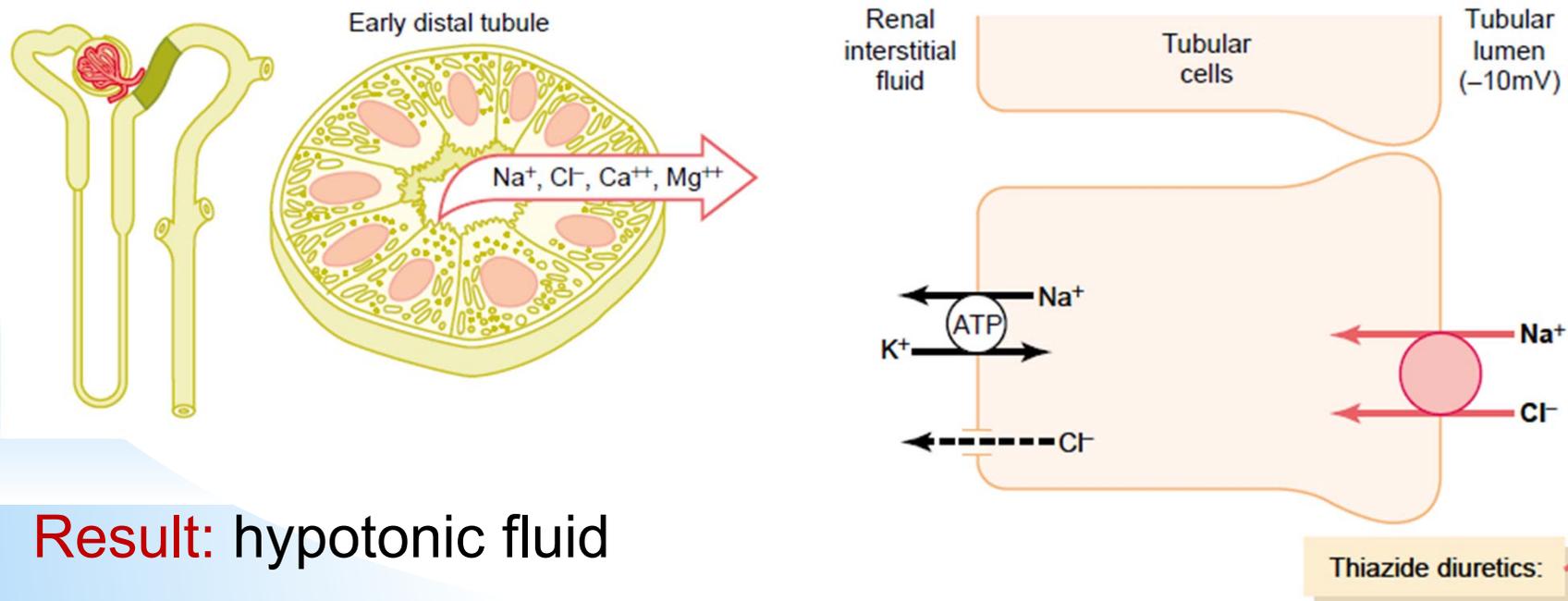
- 1) **thin descending part** - passive reabsorption of water (osmosis)
- 2) **thick ascending part** - active reabsorption of ions ($\text{Na}^+/\text{K}^+/\text{2Cl}^-$ symport), secretion of H^+ , reabsorption of HCO_3^-



Urine Formation – Tubular Processes

Distal tubule

- 1) juxtaglomerular apparatus
- 2) active reabsorption of solutes **similar to the thick ascending loop of Henle**, also no permeability for urea and water – the so called dilution segment (dilutes the tubular fluid)

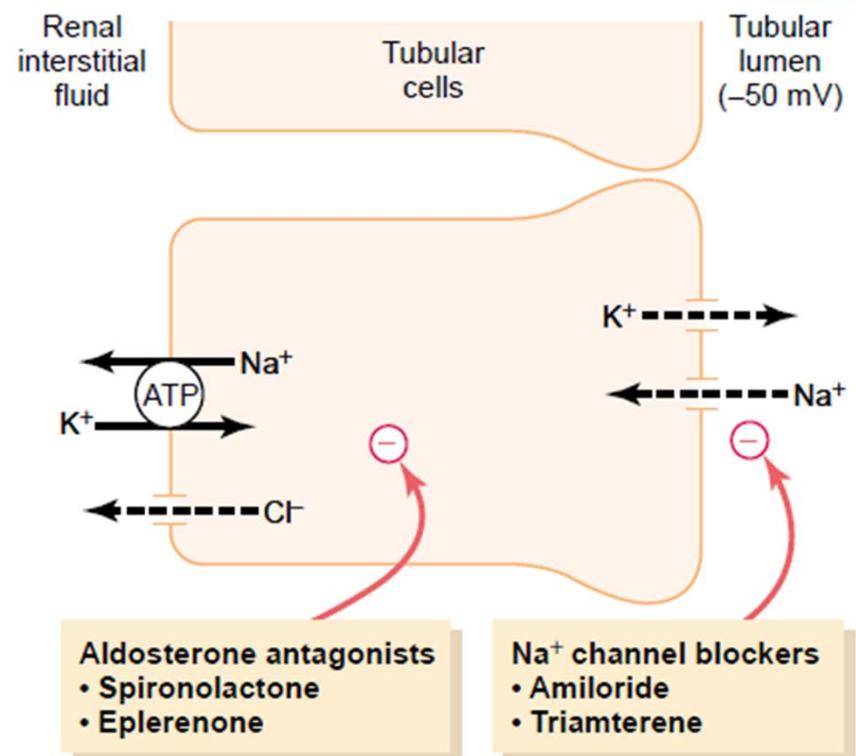
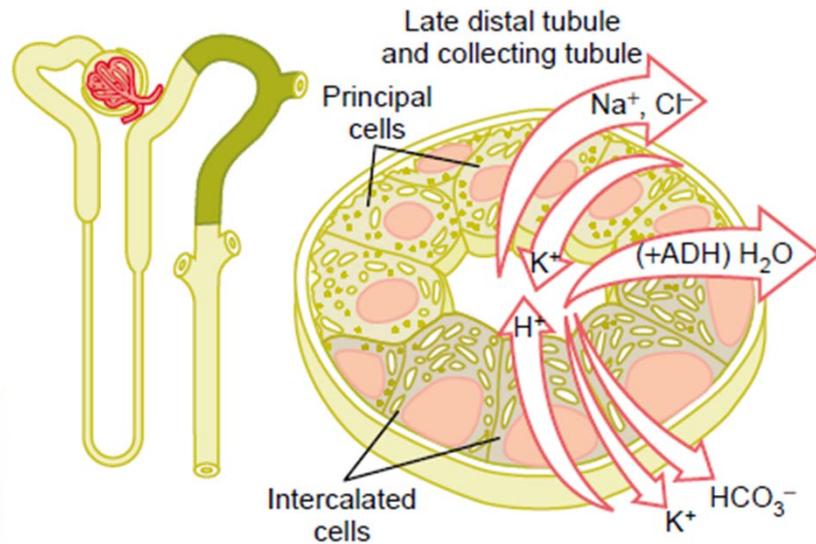


Result: hypotonic fluid

Urine Formation – Tubular Processes

Collecting duct (+ end of distal tubule)

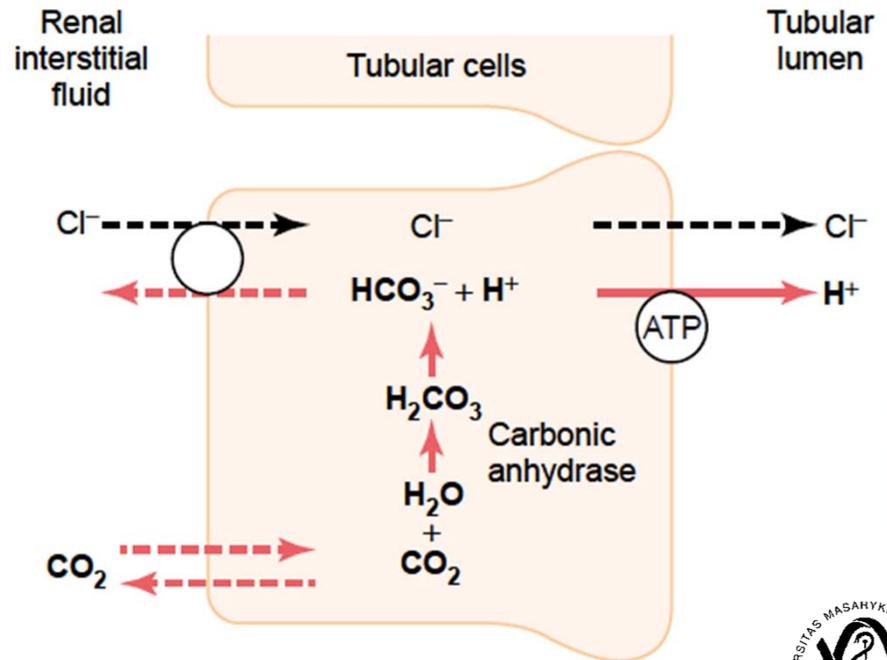
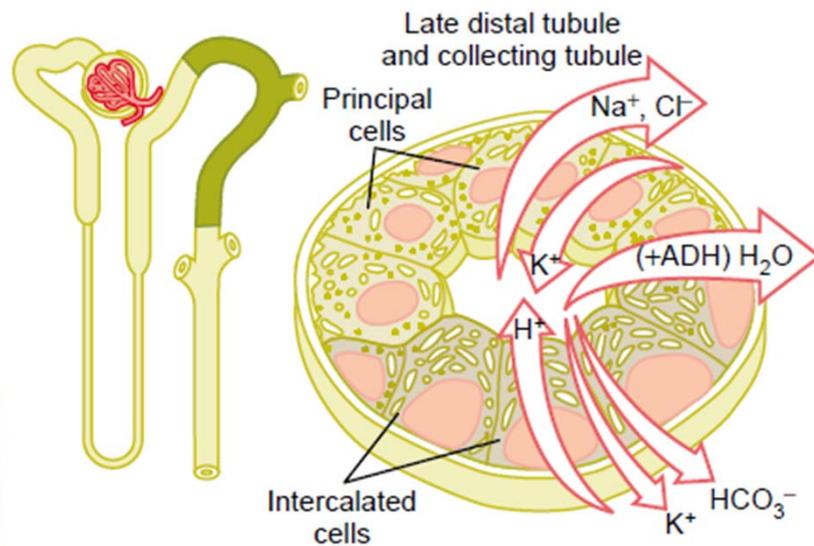
- 1) **principal cells** – reabsorption of Na^+ and water (ADH), secretion of K^+



Urine Formation – Tubular Processes

Collecting duct (+ end of distal tubule)

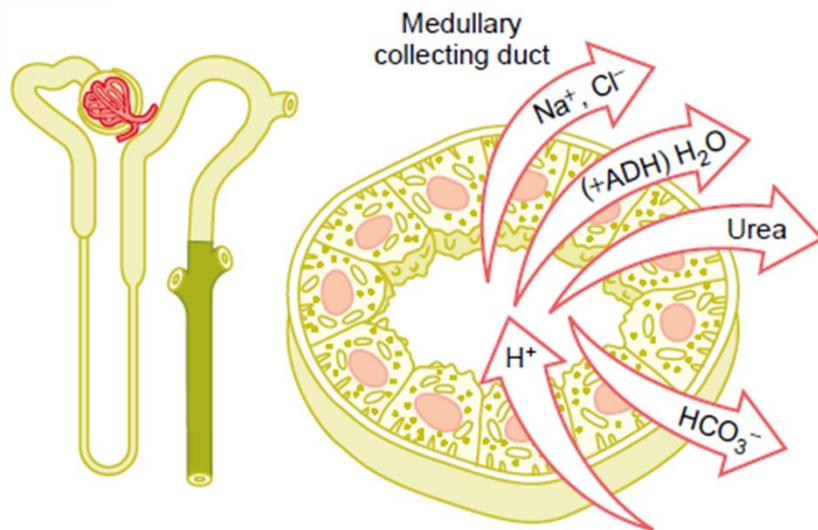
- 1) **principal cells** – reabsorption of Na^+ and water (ADH), secretion of K^+
- 2) **intercalated cells** – secretion of H^+ , reabsorption of HCO_3^- and K^+



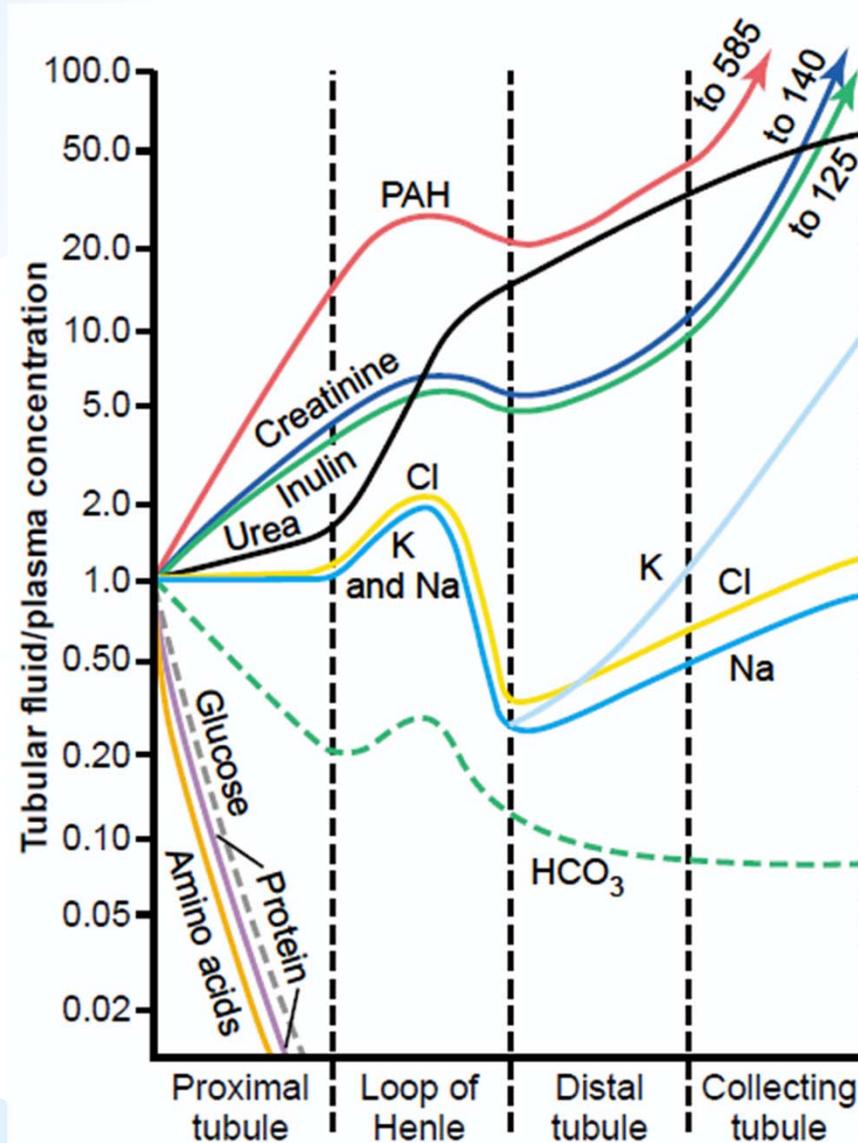
Urine Formation – Tubular Processes

Collecting duct – medullar part

- 1) reabsorption of Na^+ and Cl^- , water (ADH), urea
- 2) secretion of H^+ , reabsorption of HCO_3^-



Urine Formation – Tubular Processes



pronounced secretion in comparison with H₂O

pronounced reabsorption in comparison with H₂O

Guyton & Hall. Textbook of Medical Physiology



Examination of renal function

- Renal clearance
- Examination of function of renal tubules
 - a) Examination of concentration ability of kidneys
 - Concentration test using thirstiness
(very unpleasant; 12 hours of thirstiness, urine sample every 4 hours – urine density and osmolality; also a blood sample)
 - Adiuretin test
(more pleasant for patient; no drinks and food during night, ADH application in the morning through the nasal mucosa – urine density and osmolality)
 - a) Examination of dilution ability of kidneys
(test of reaction on increased water intake – decreased ADH production + increased diuresis in healthy people)

Renal Clearance

= the volume of plasma that is cleared of the substance by kidneys per unit time

Using *clearance*, we can quantify the excretion ability of kidneys, the velocity of renal blood flow and even basic functions of kidneys (GFR, tubular reabsorption and secretion).

$$C_S \cdot P_S = V \cdot U_S \longrightarrow C_S = \frac{V \cdot U_S}{P_S}$$

[ml/min]

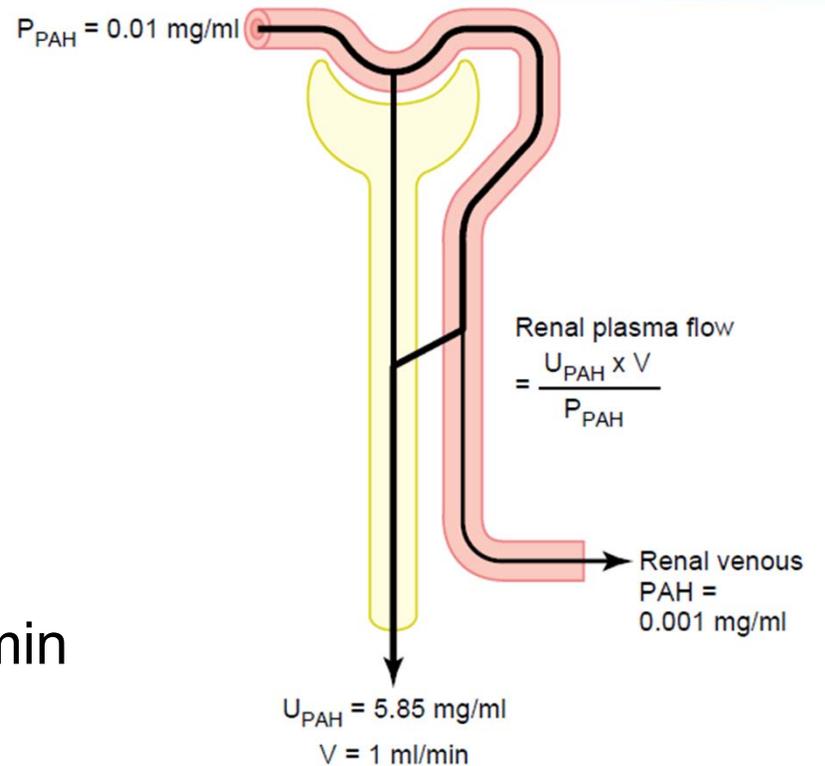
Renal Clearance

Determination of renal plasma flow velocity (RPF)

Clearance of a substance that is fully cleared from plasma in glomerulotubular apparatus.

PAH (paraaminohippuric acid) cleared by 90%

$$RPF = \frac{5.85 \times 1 \text{ mg/min}}{0.01 \text{ mg/ml}} = 585 \text{ ml/min}$$



Guyton & Hall. Textbook of Medical Physiology

Correction to the extraction ratio of PAH (E_{PAH}):

$$E_{PAH} = \frac{P_{PAH} - V_{PAH}}{P_{PAH}} = 0.9 \longrightarrow RPF = \frac{585 \text{ ml/min}}{0.9} = 650 \text{ ml/min}$$

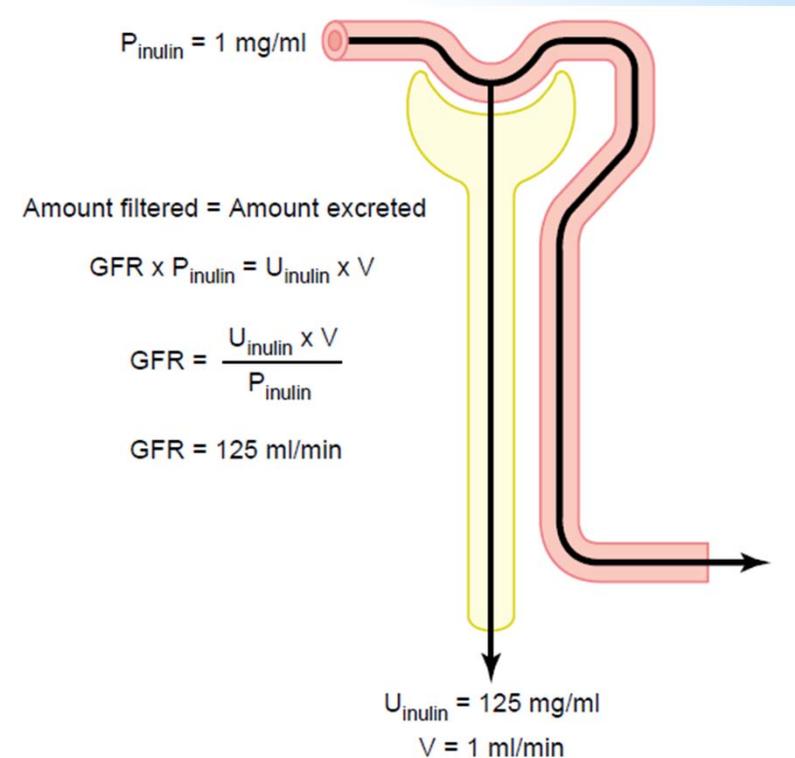
Renal Clearance

Determination of glomerular filtration rate (GFR)

Clearance of a substance that is fully filtered in the glomerulus and is not reabsorbed/secreted in tubules.

Inulin

Creatinine



Guyton & Hall. Textbook of Medical Physiology

Renal Clearance

Calculation of Filtration Fraction (FF)

FF is the fraction of plasma filtered through the glomerular membrane.

$$FF = \frac{GFR}{RPF} = \frac{125 \text{ ml/min}}{650 \text{ ml/min}} = 0.19 \rightarrow \sim 20\% \text{ of plasma is filtered in the glomerulus}$$

Calculation of Tubular Reabsorption/Secretion

A. $GFR \cdot P_s > V \cdot U_s$ substance reabsorbed

B. $GFR \cdot P_s < V \cdot U_s$ substance secreted