

SISTEM KARDIOVASKULAR

DENNY AGUSTININGSIH

Tekanan Darah



- PARAMETER YANG MUDAH DIAMATI
- TERMASUK SALAH SATU TANDA VITAL

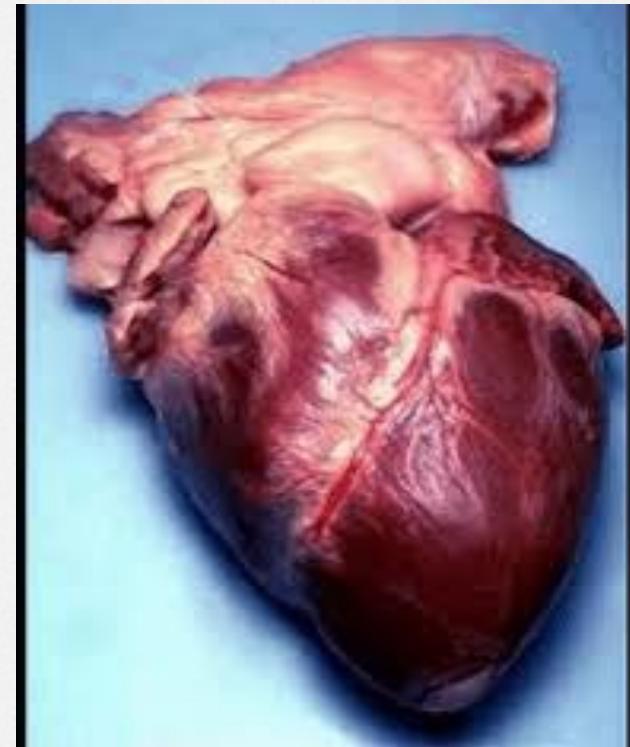
APA YANG DIMAKSUD DENGAN TEKANAN DARAH?

Desakan **darah** terhadap dinding **pembuluh darah** akibat pompa **jantung**

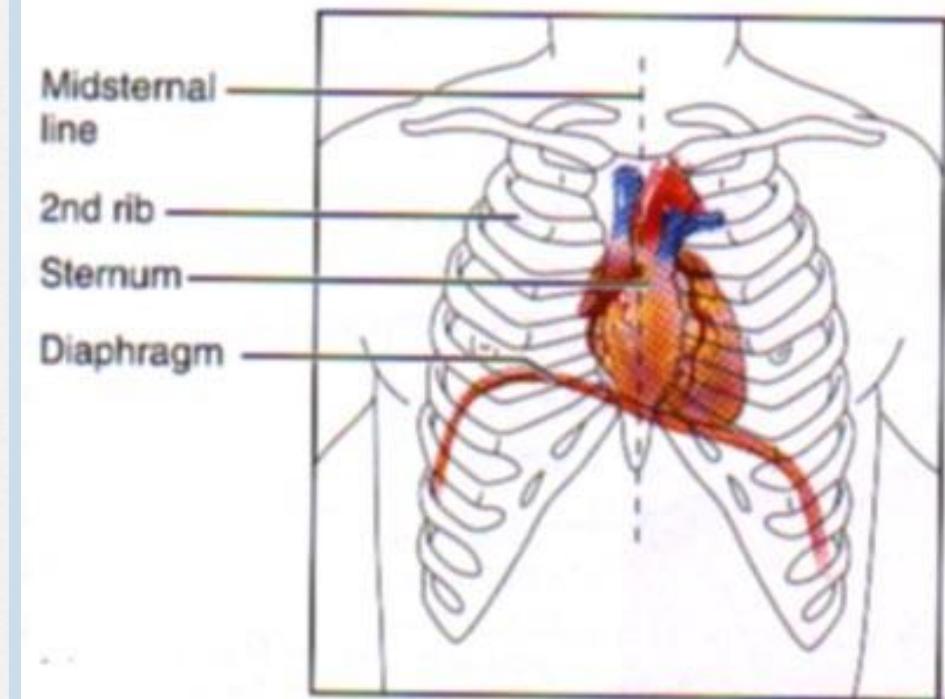
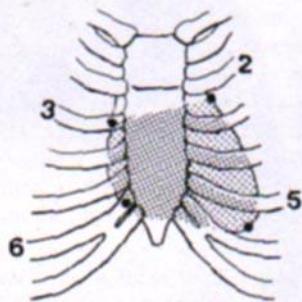
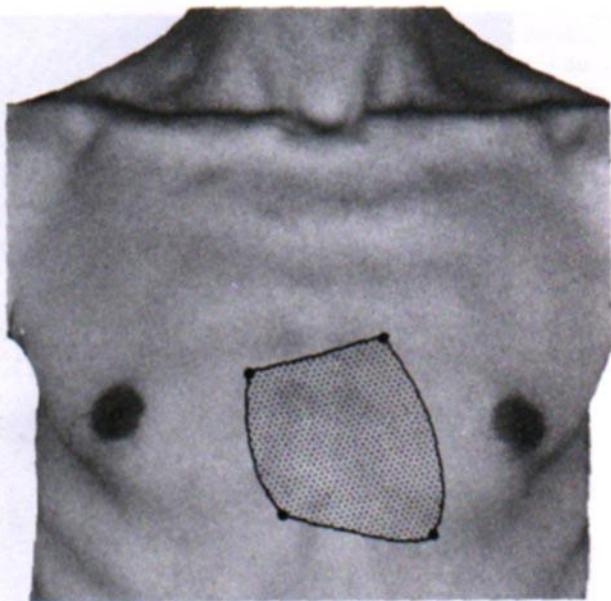
FAKTOR-FAKTOR YG MEMPENGARUHI TEKANAN DARAH

1. POMPA JANTUNG
2. KONDISI PEMBULUH DARAH ARTERI
 - o diameter
 - o kelenturan dinding
3. DARAH (cairan intravaskular)
 - o Volume
 - o viskositas

JANTUNG

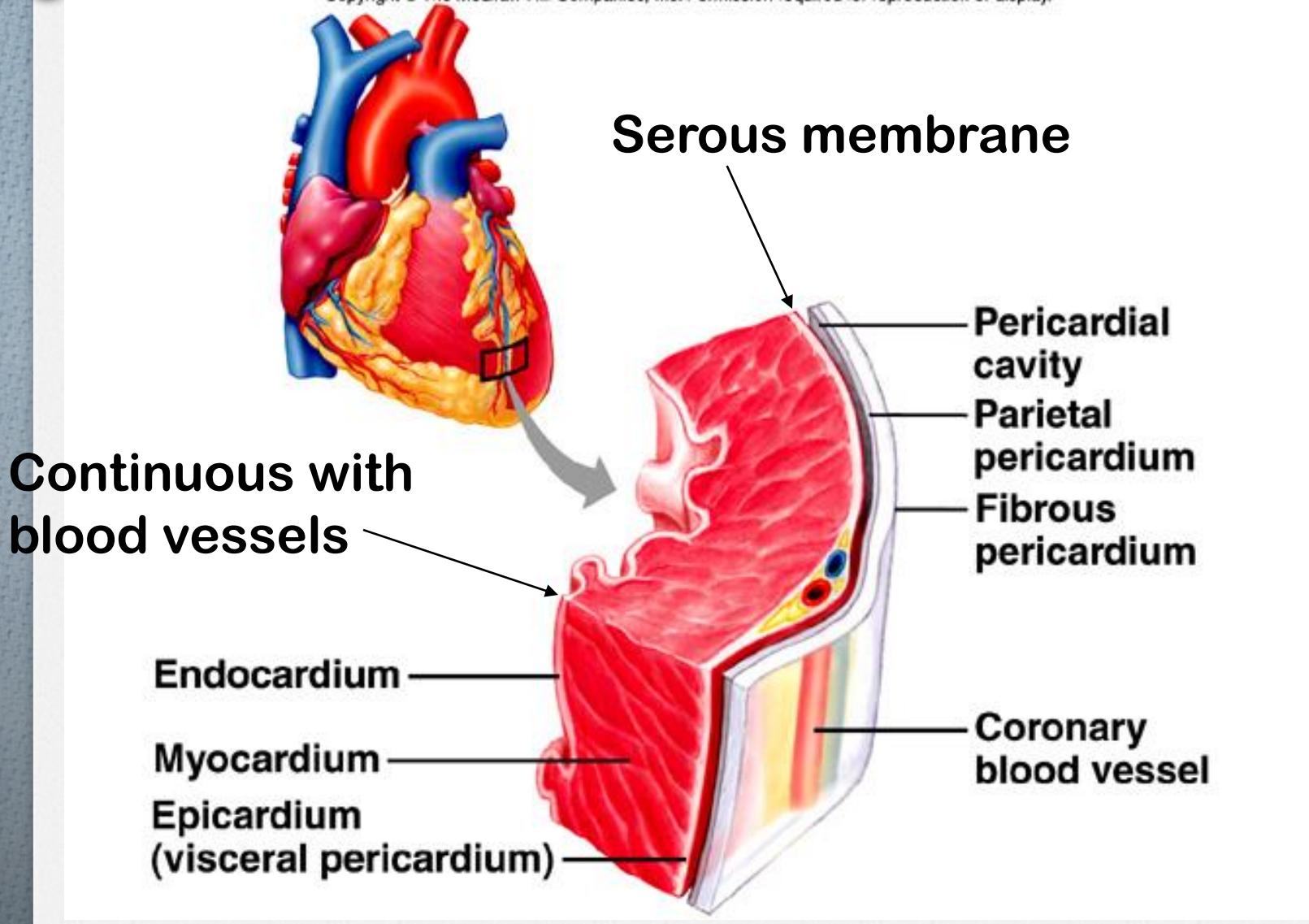


Location of Heart in Thorax



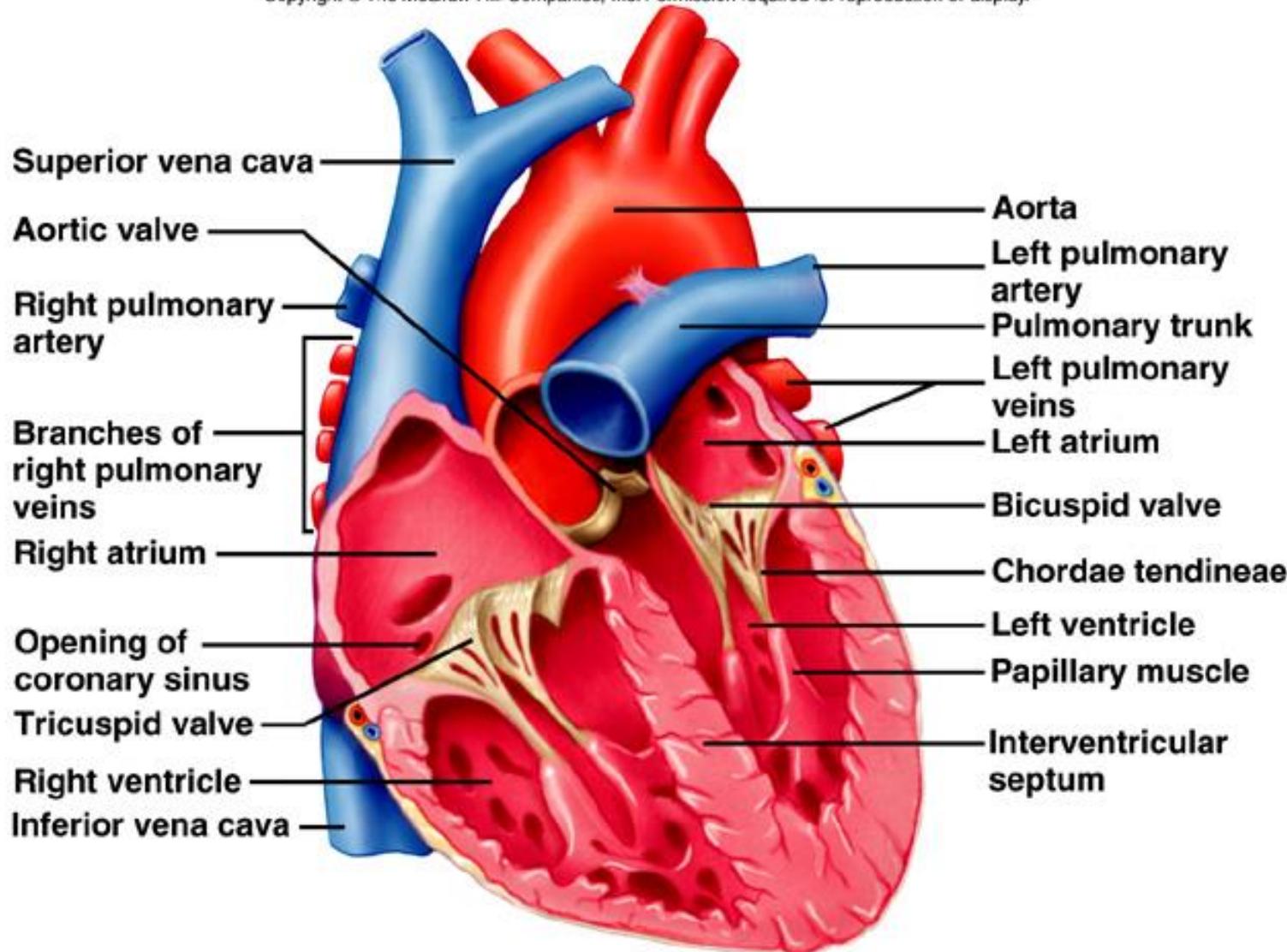
Lapisan-lapisan jantung

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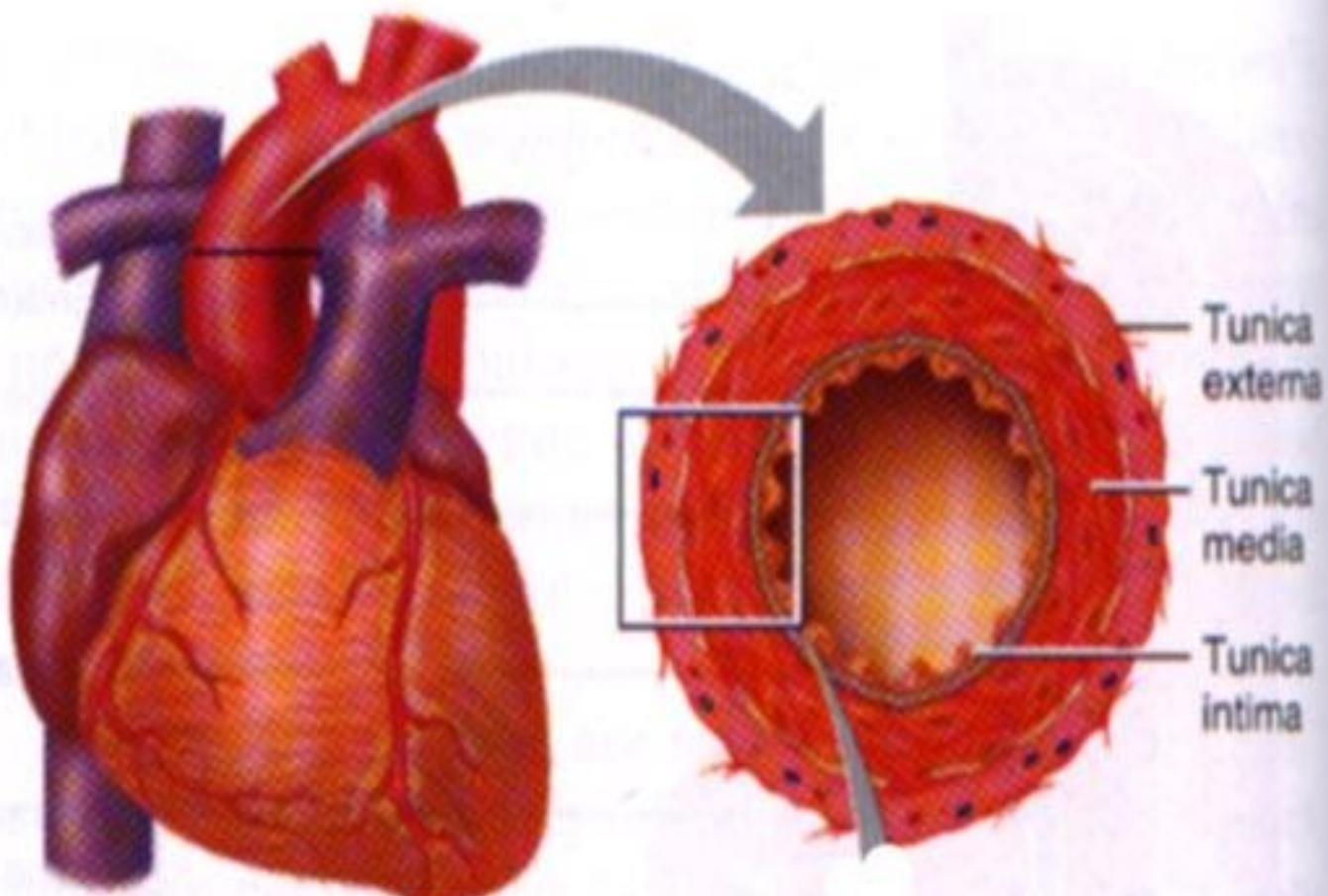


Chambers of the heart; valves

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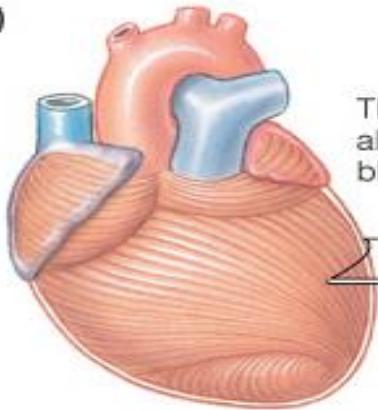


Pembuluh darah



Otot jantung

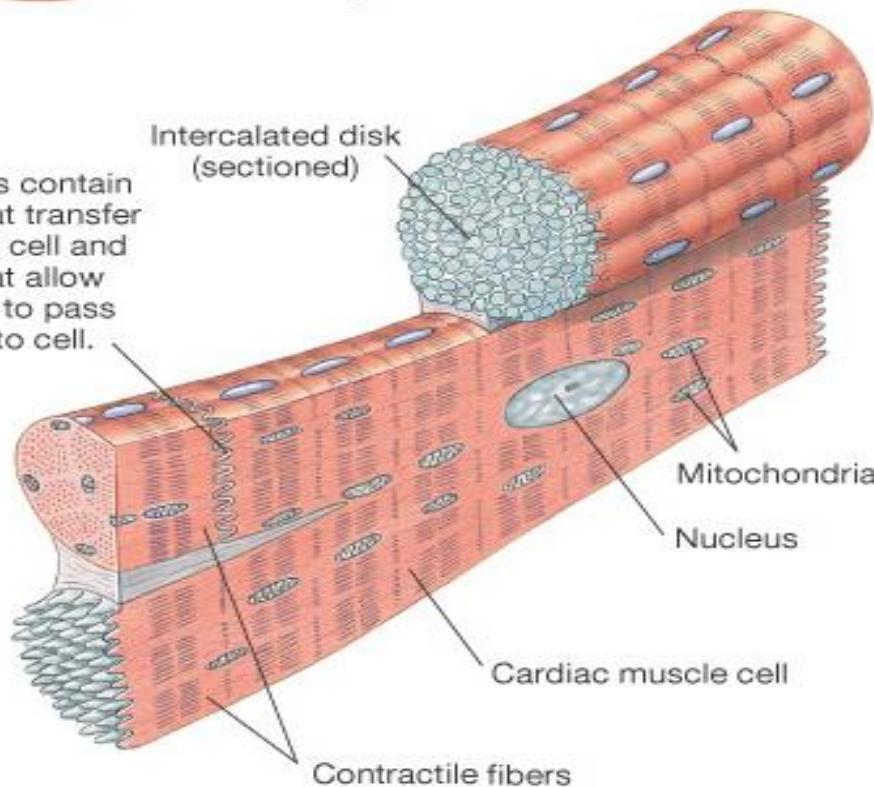
(a)



The spiral arrangement of ventricular muscle allows ventricular contraction to squeeze the blood upward from the apex of the heart.

(b)

Intercalated disks contain desmosomes that transfer force from cell to cell and gap junctions that allow electrical signals to pass rapidly from cell to cell.



BAGAIMANA JANTUNG DAPAT MEMOMPA DARAH ?

1. Faktor kelistrikan

2. Faktor Mekanik

DUA JENIS SEL OTOT JANTUNG

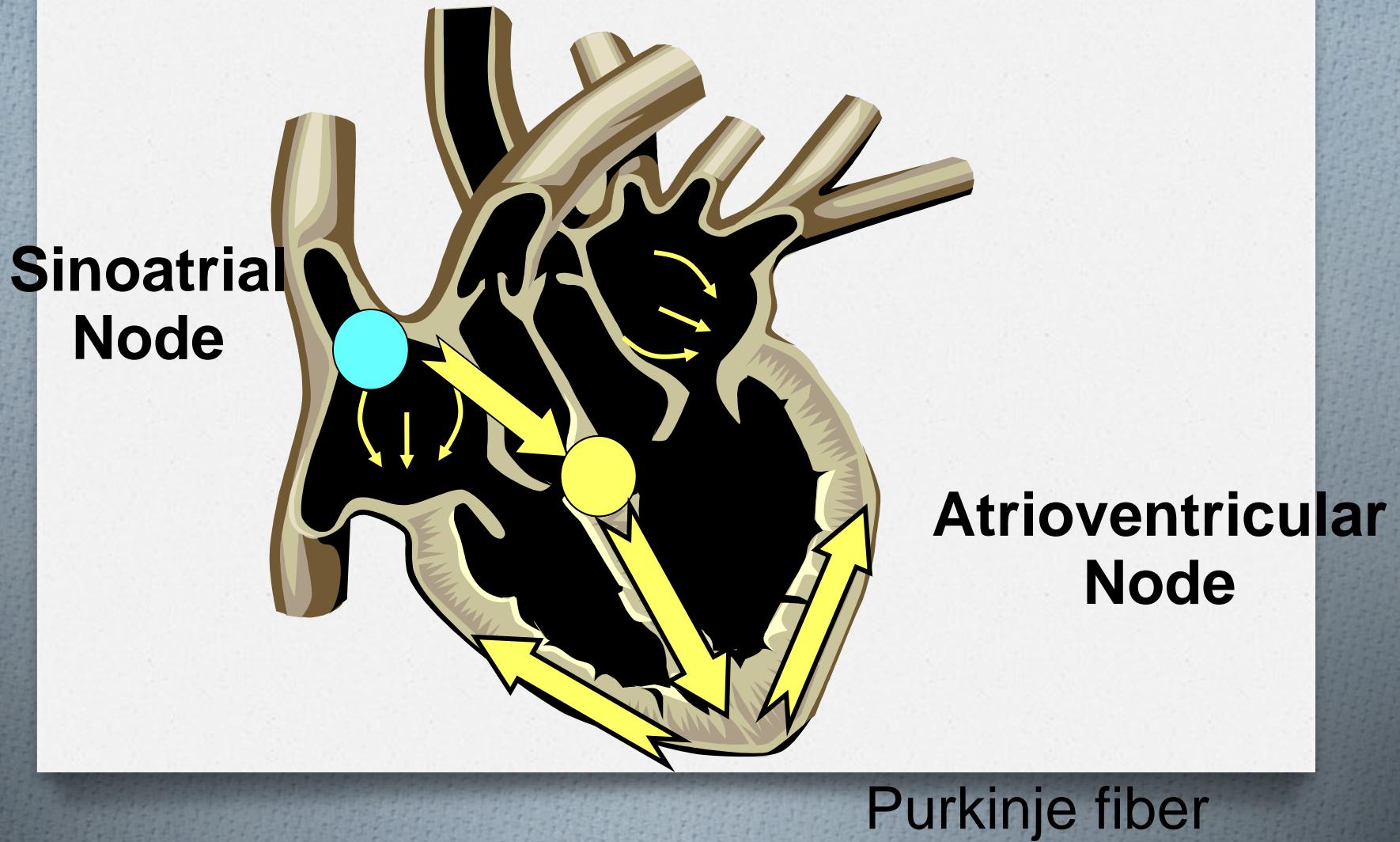
○ SEL KONTRAKTIL: 95%- 99%

- Untuk kekuatan memompa darah
- Tidak mudah lelah

○ SEL AUTORITMIK/AUTOMATIK: 1%-5%

- Bertanggung jawab untuk memulai dan/atau menjalarkan impuls listrik
- pacemaker potential
- Menentukan frekuensi dan irama denyut jantung

SISTEM KONDUKSI OTOT JANTUNG



Kelistrikan jantung menentukan

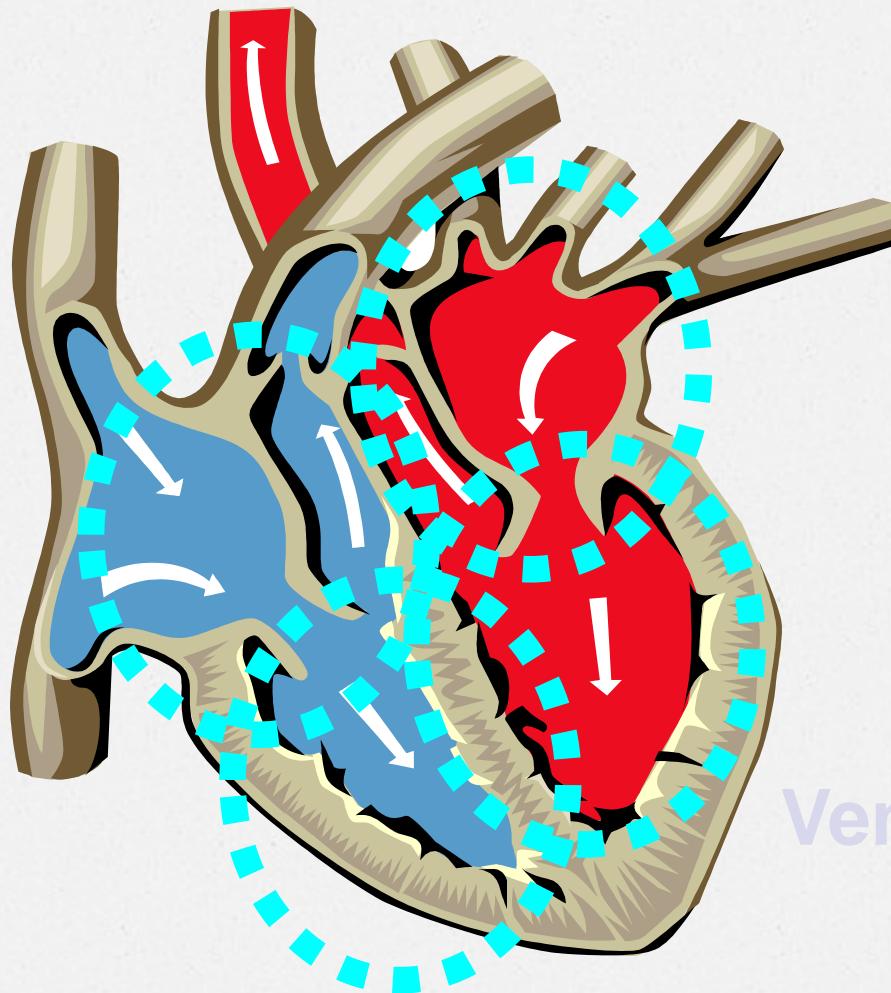
1. Frekuensi denyut jantung
2. Irama denyut jantung
3. Terjadinya kontraksi otot jantung

FAKTOR-FAKTOR YG MEMPENGARUHI FREKUENSI DENYUT JANTUNG

1. saraf simpatis dan parasimpatis
2. Hormon adrenalin, asetilkolin, tiroid, estrogen, testosteron
3. Ion Na, Ca, K
4. Suhu badan

TWO SEPARATE PUMPS

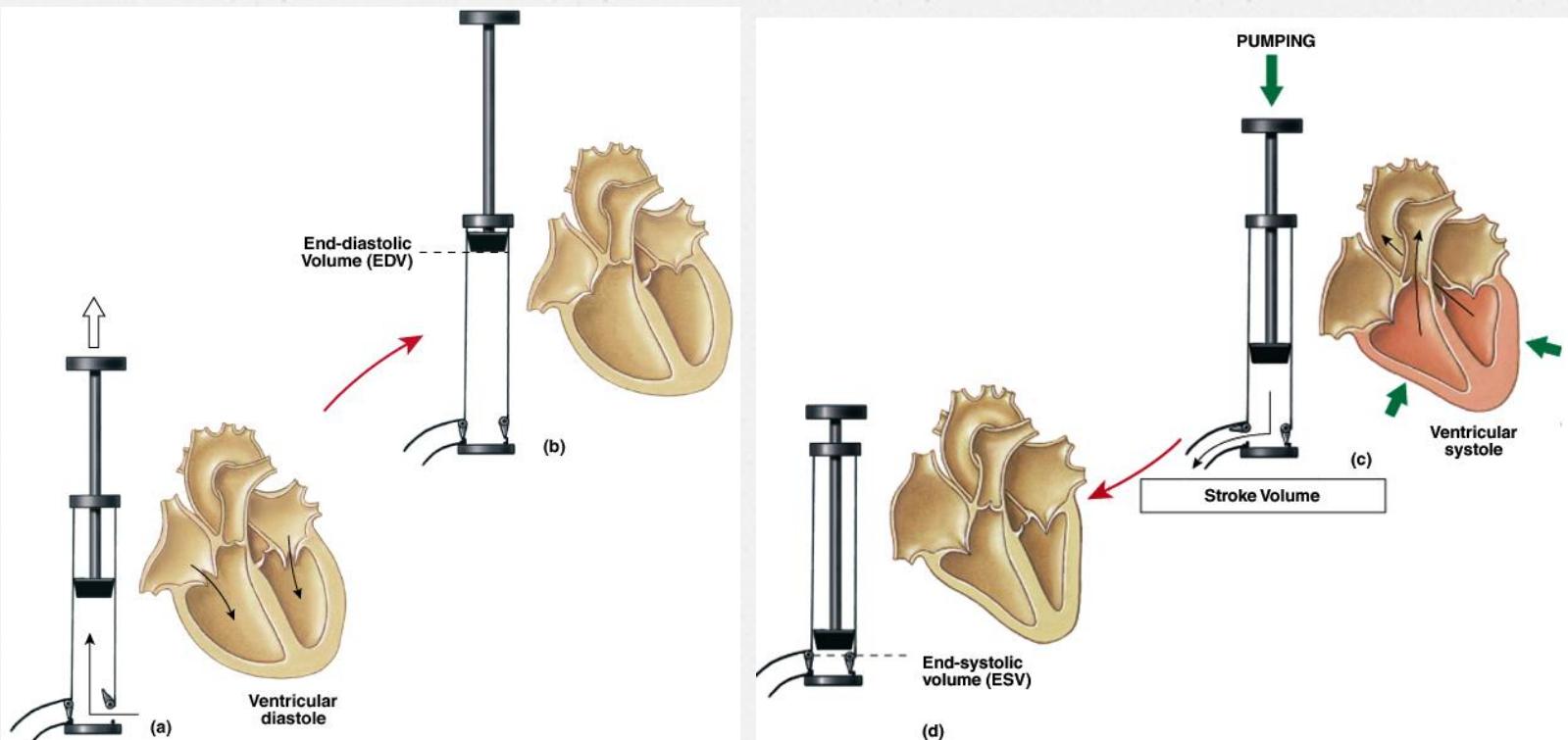
Atria



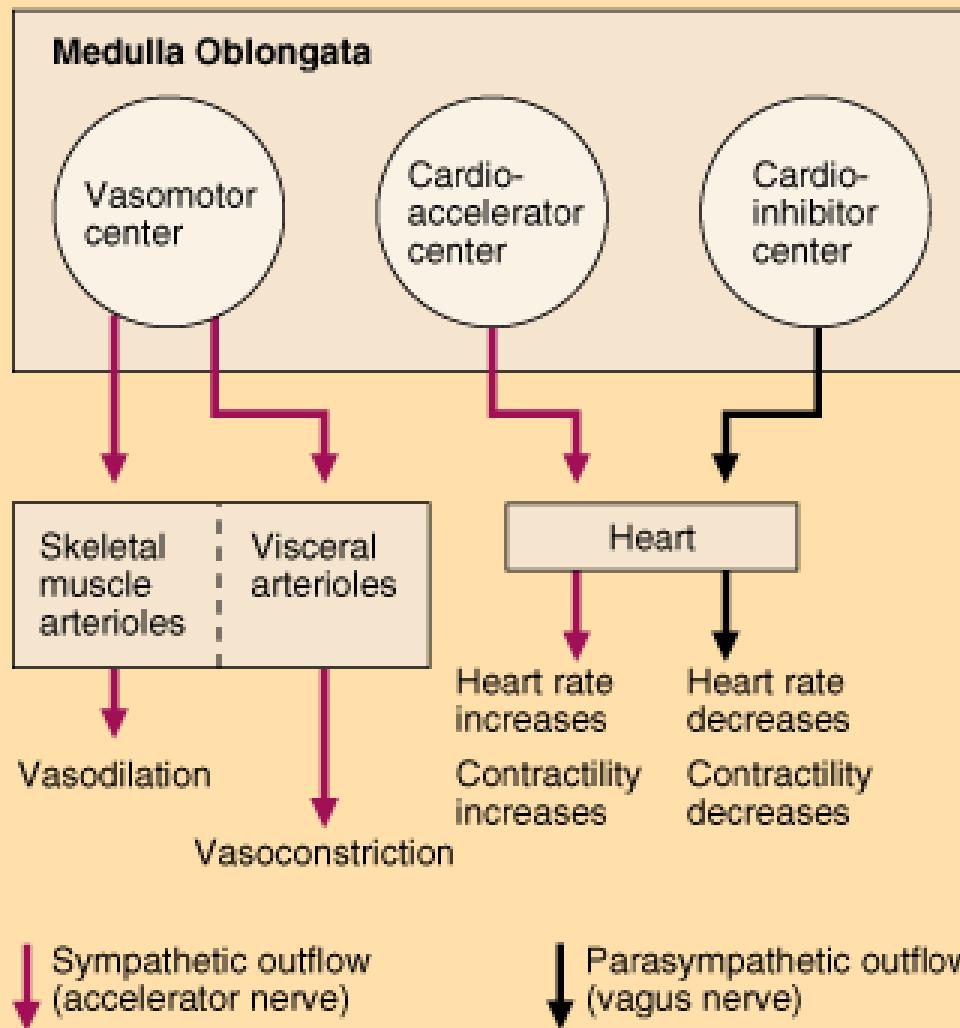
Ventricles



POMPA JANTUNG

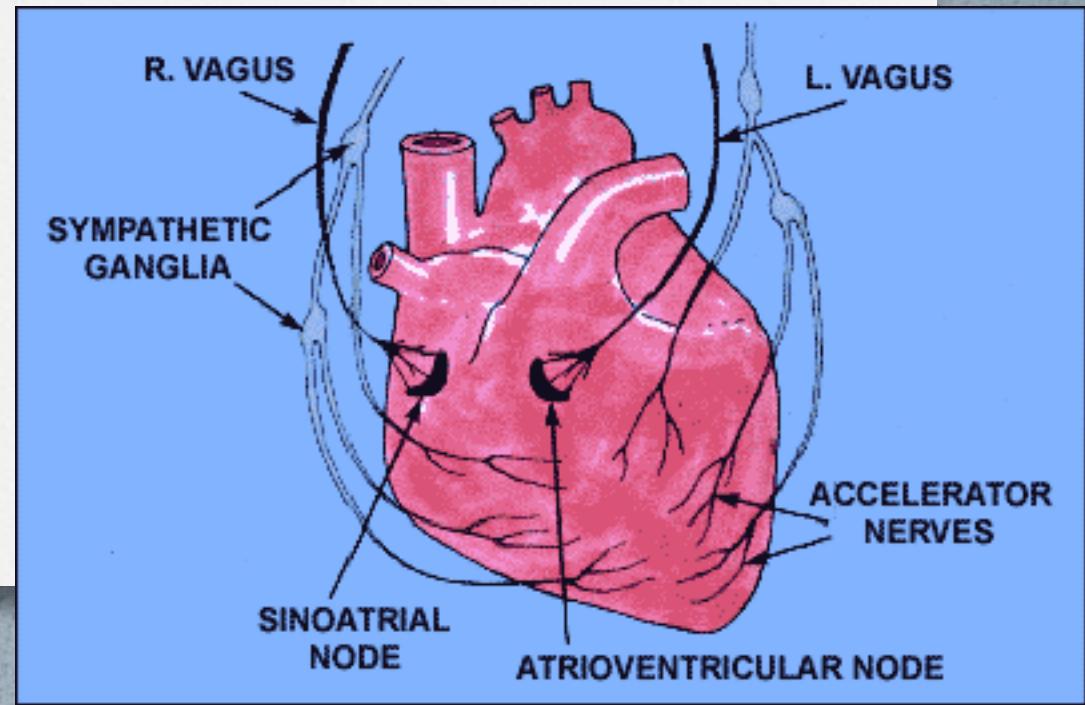
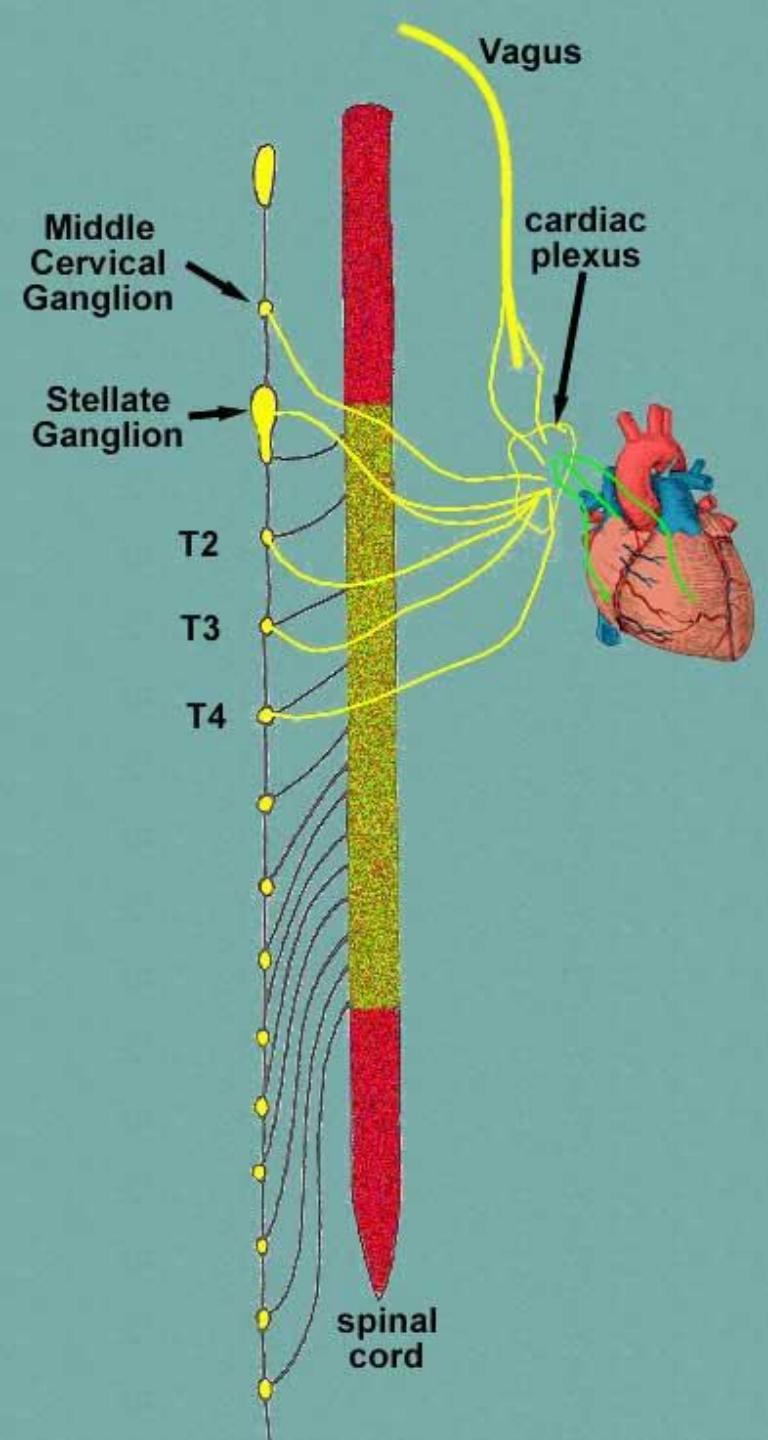


► Neural Control of Cardiovascular Function

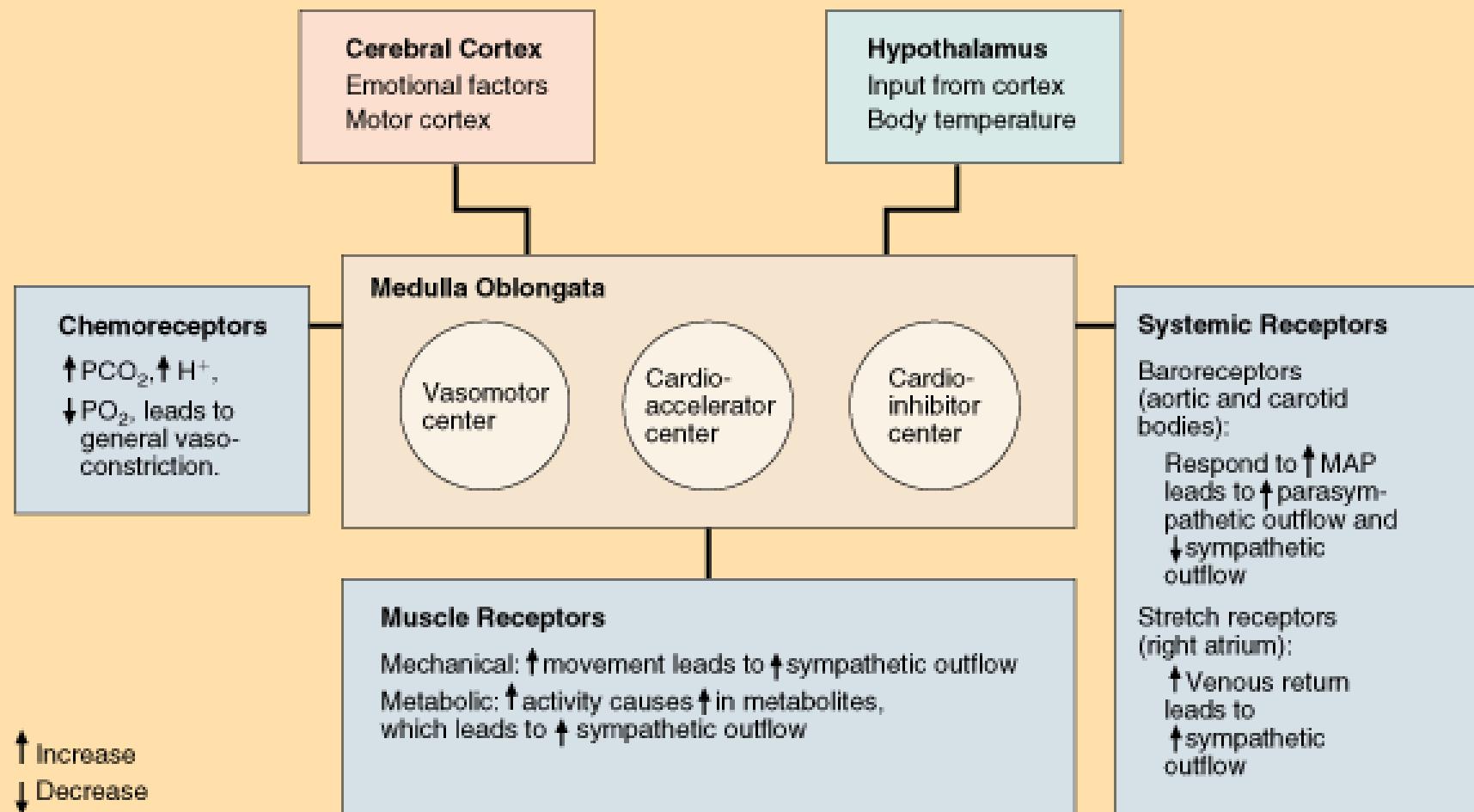


Heart Innervation

- Heart receives visceral motor innervation
 - Sympathetic (speeds up)
 - Parasympathetic (slows down)

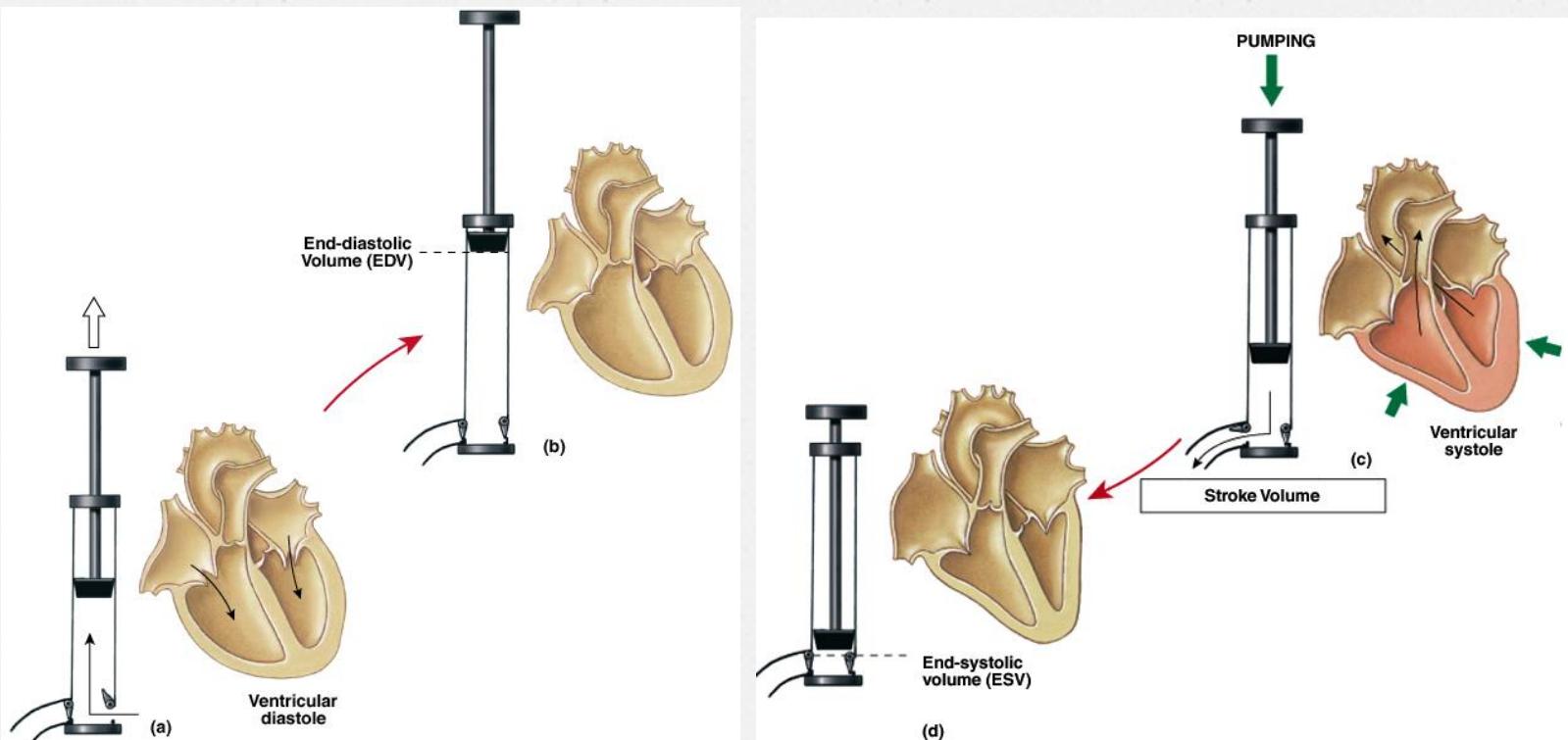


► Factors Affecting Neural Control of Cardiovascular Function



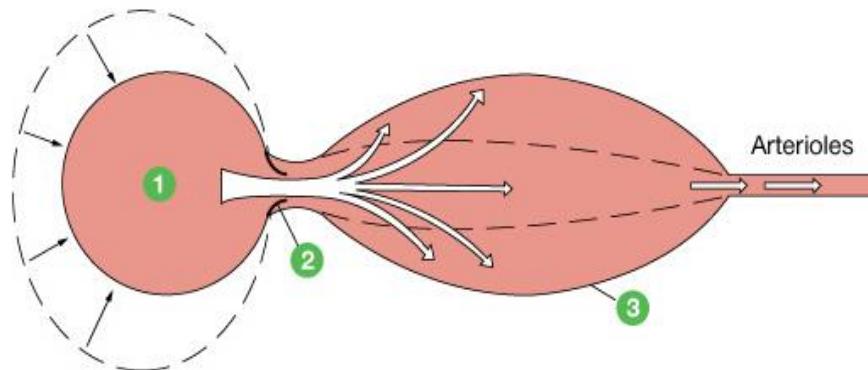
PEMBULUH DARAH

POMPA JANTUNG



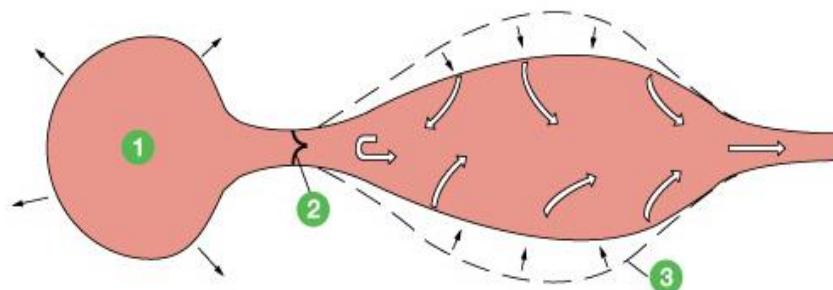
TEKANAN DARAH

(a) Ventricular contraction



- 1 Ventricle contracts.
- 2 Semilunar valve opens.
- 3 Aorta and arteries expand and store pressure in elastic walls.

(b) Ventricular relaxation



- 1 Isovolumic ventricular relaxation
- 2 Semilunar valve shuts.
- 3 Elastic recoil of arteries sends blood forward into rest of circulatory system.

Figure 15-4: Elastic recoil in the arteries

- Arteri dapat dibayangkan seperti balon panjang tanpa lubang terbuka di ujungnya



- Selama masih ada aliran udara, maka balon tetap mengembang

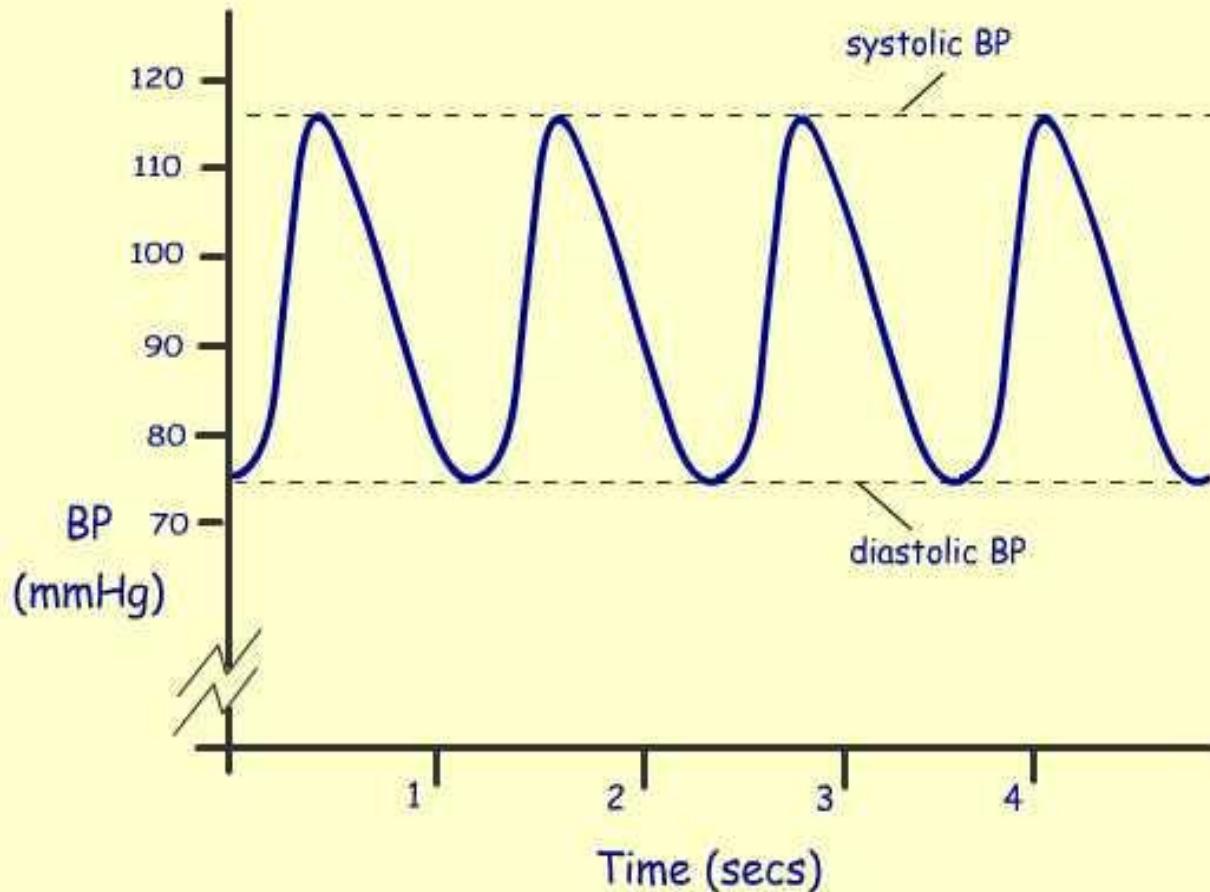
Systole and Diastole

- Kondisi arteri berfluktuasi diantara systole dan diastole
- Saat systole, tekanan di arteri meningkat akibat darah mengalir dari jantung
 - dinding arteri meregang
 - Teraba tegangan di arteri perifer sebagai denyut nadi

Systole and Diastole

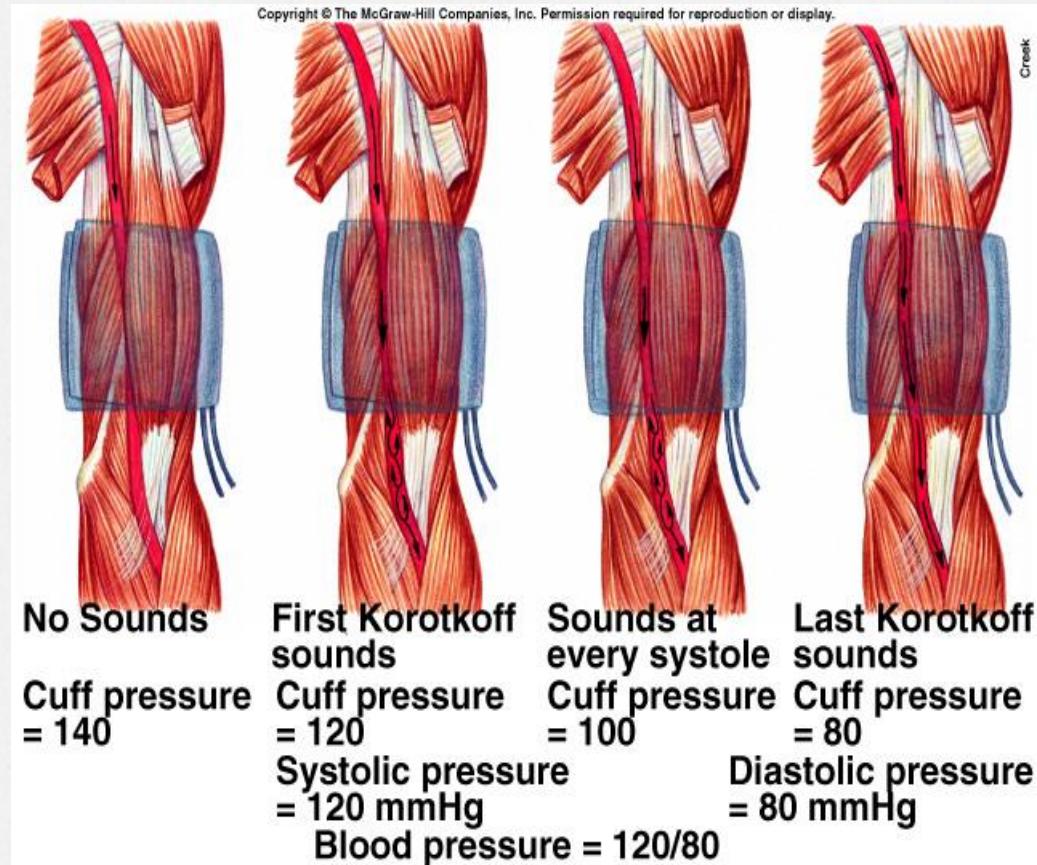
- Saat diastole, elastic recoil arteri mendorong darah masuk kapiler
 - Tekanan di arteri menurun karena darah berpindah
 - Tidak pernah sampai 0 mmHg

Here is a graph of changes in arterial BP



Measurement of Blood Pressure

- o Blood pressure cuff is inflated above systolic pressure, occluding the artery.
- o As cuff pressure is lowered, the blood will flow only when systolic pressure is above cuff pressure, producing the sounds of Korotkoff.
- o Korotkoff sounds will be heard until cuff pressure equals diastolic pressure, causing the sounds to disappear.



Arterial blood pressure

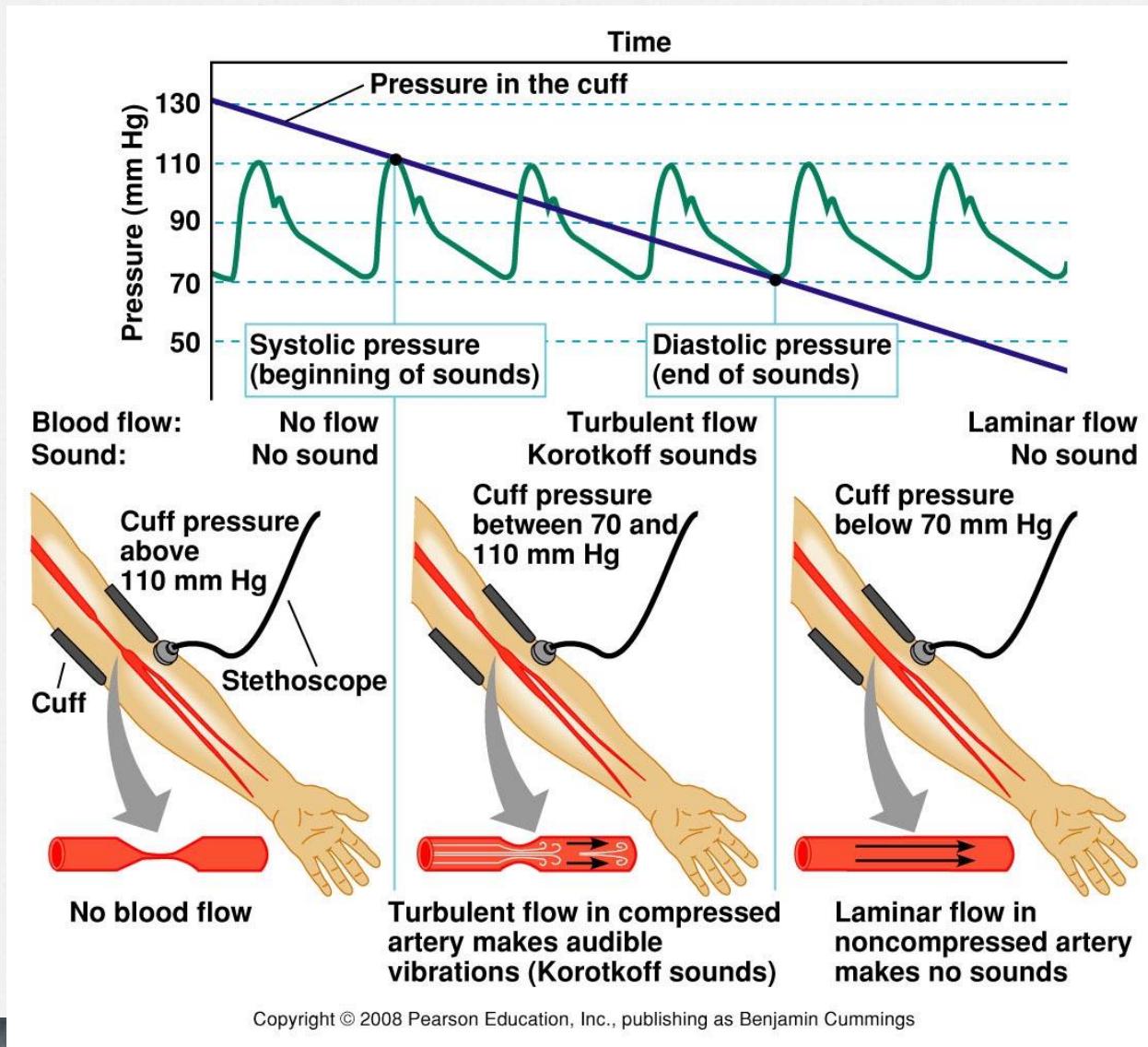
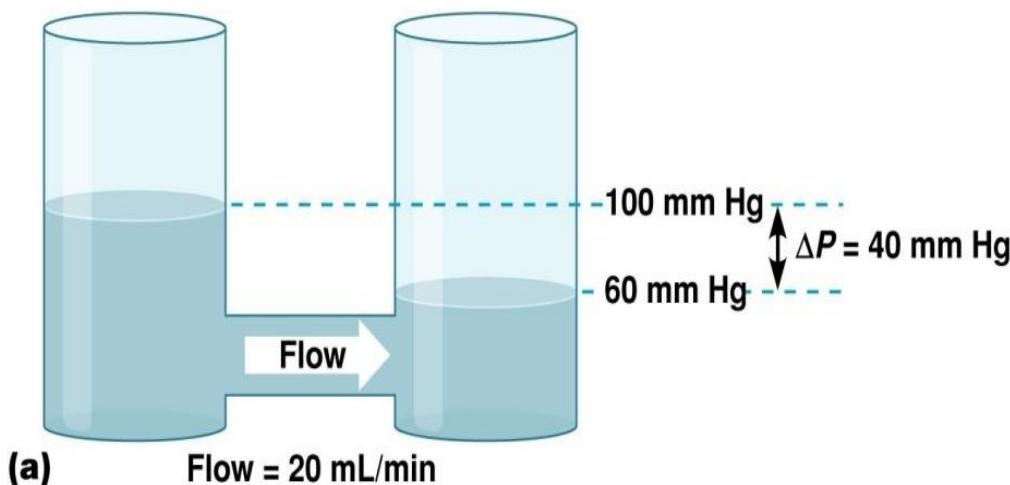
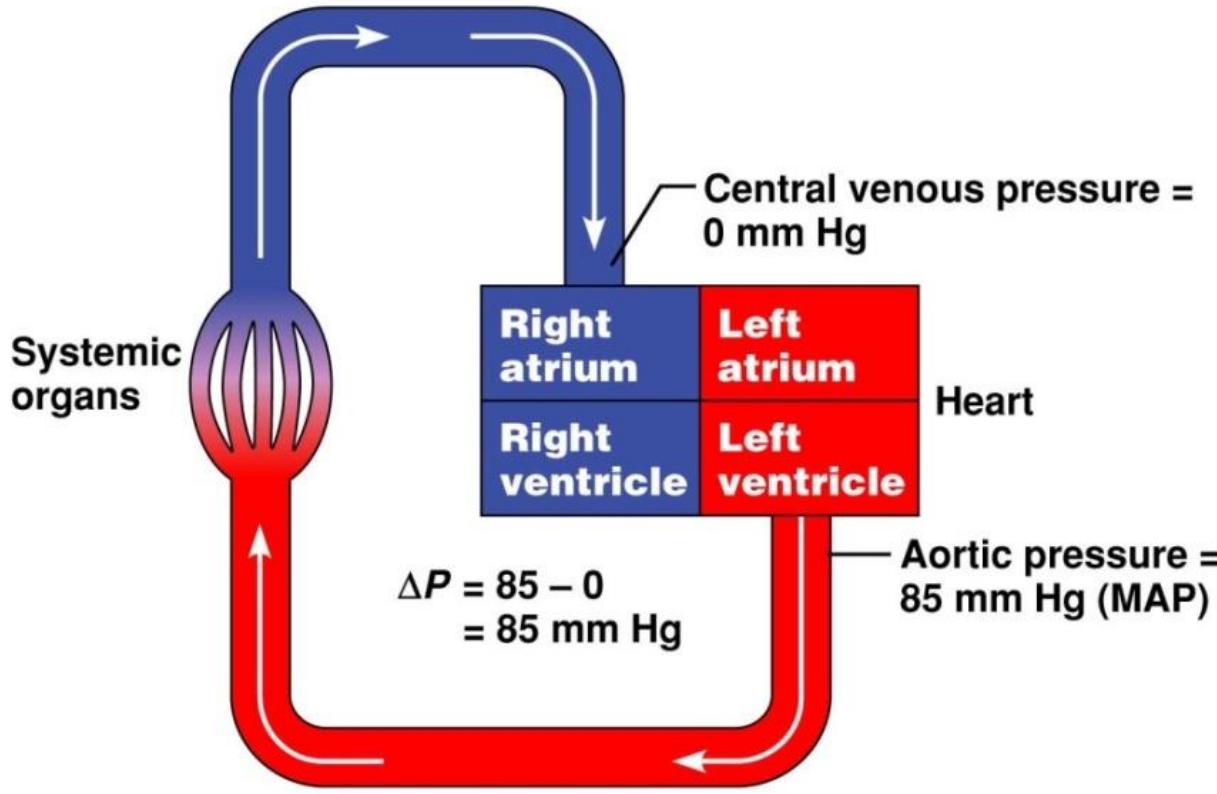


Figure 14.8

Physical laws governing blood flow and blood pressure

Flow of blood through out body =
pressure gradient within vessels X resistance to flow



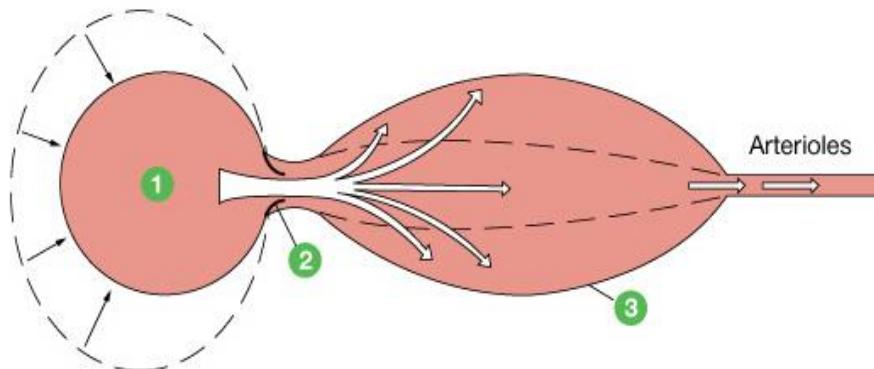


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Pressure gradient:

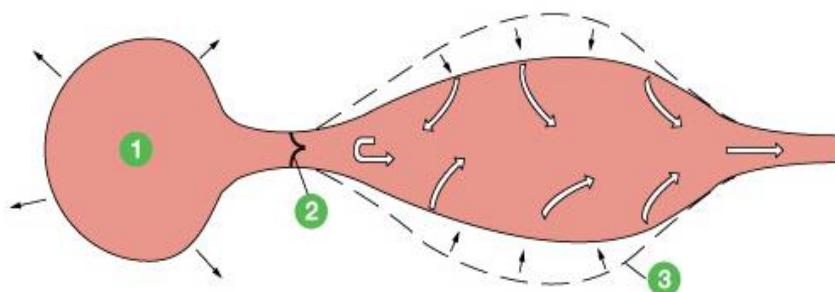
aortic pressure – central venous pressure

(a) Ventricular contraction



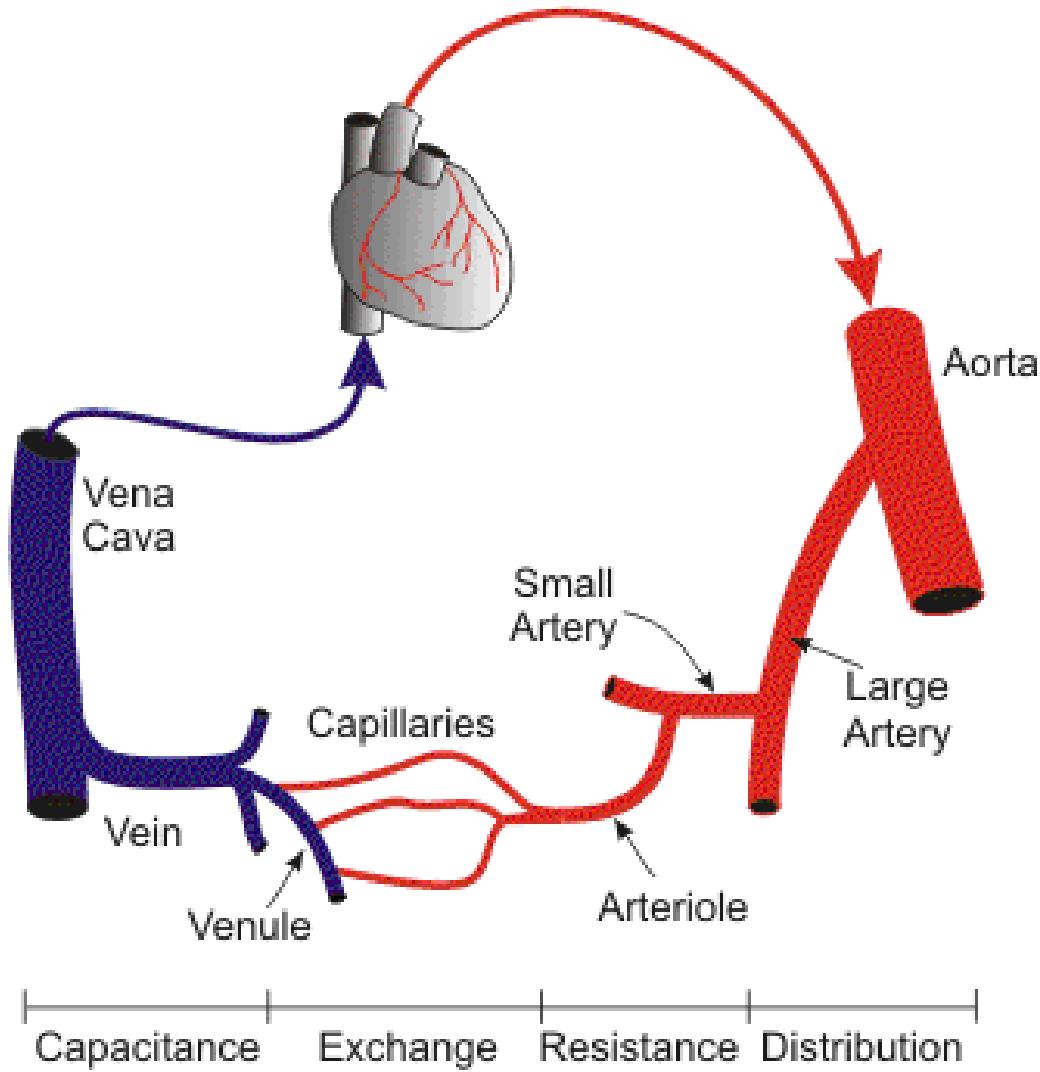
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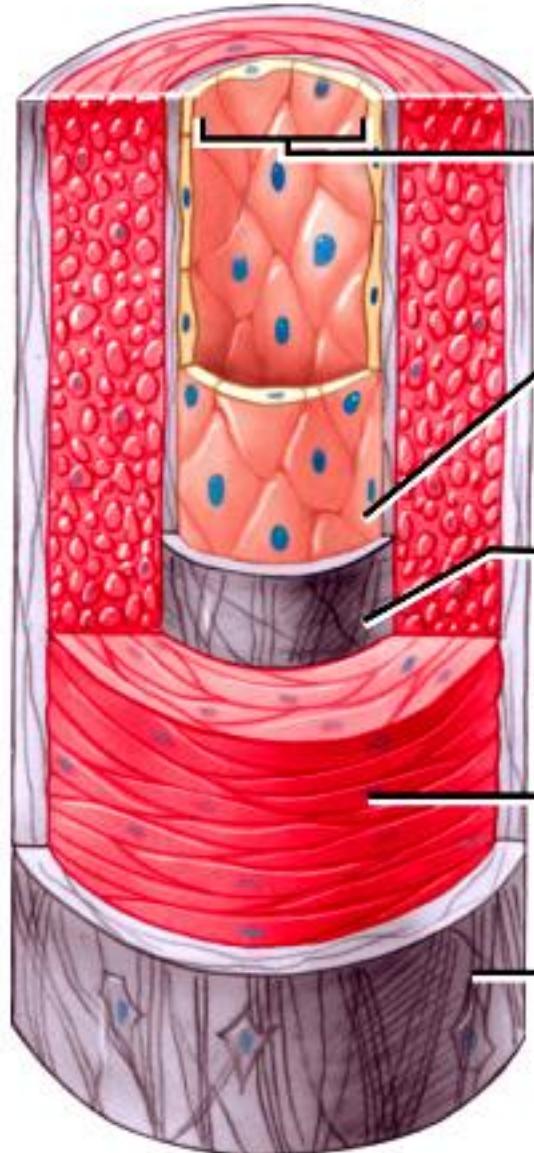
(b) Ventricular relaxation



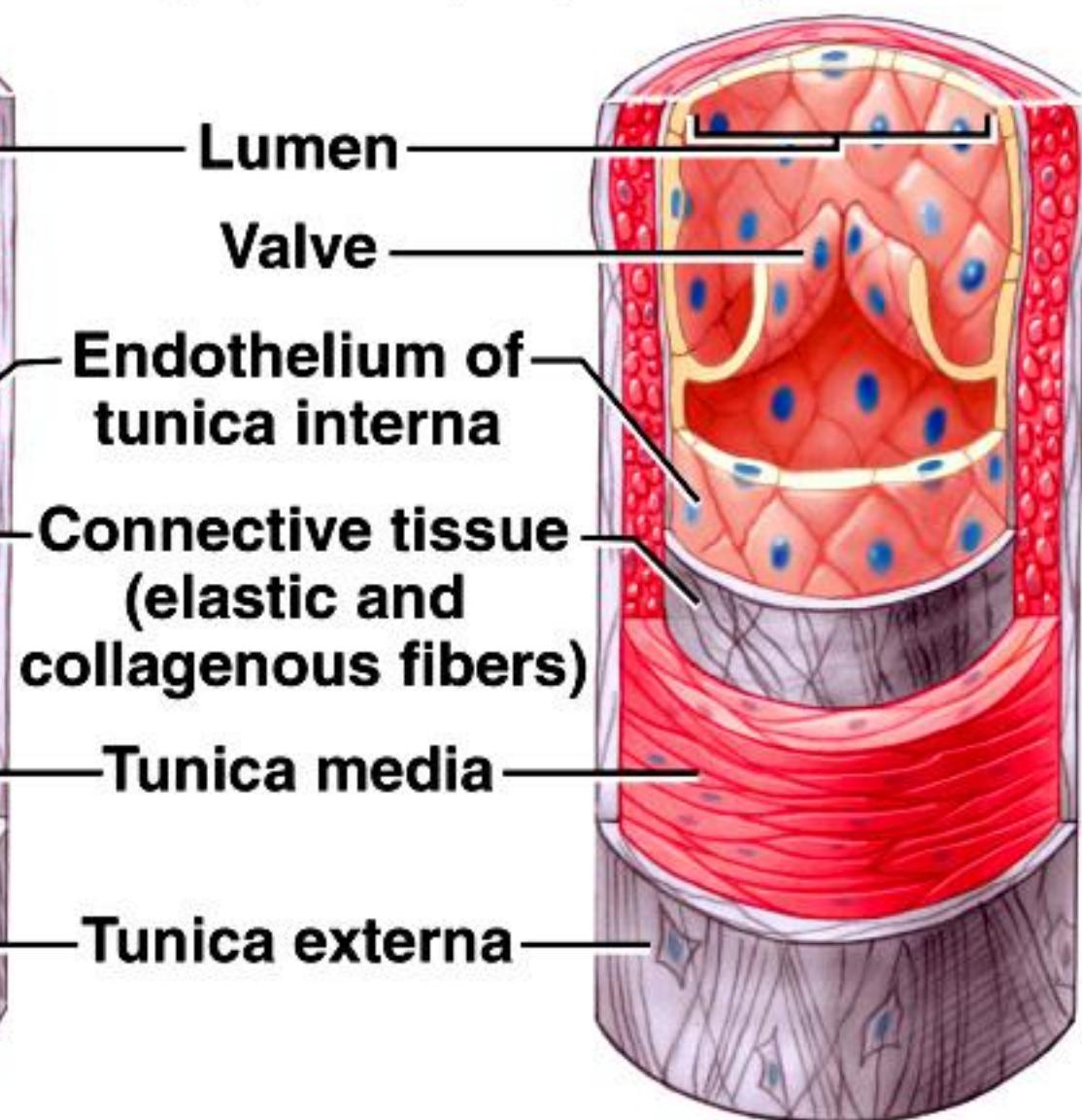
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Figure 15-4: Elastic recoil in the arteries





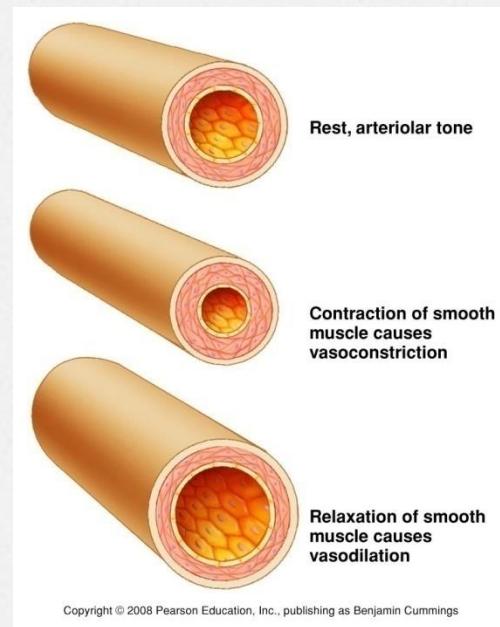
A Artery



B Vein

Regulation of blood flow in arteries

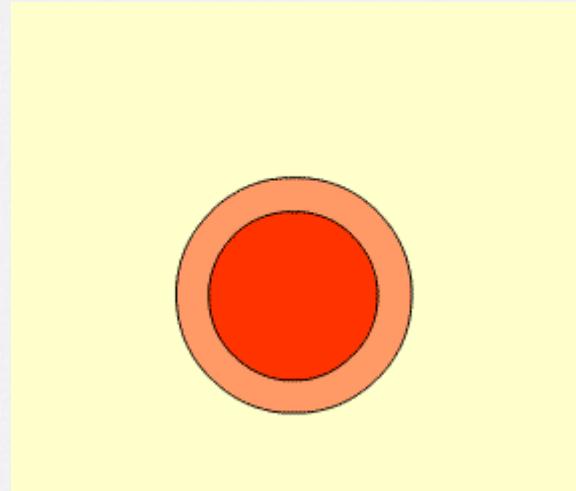
- o It is important to adjust blood flow to organ needs → Flow of blood to particular organ can be regulated by varying resistance to flow (or blood vessel diameter)
- o **Vasoconstriction** of blood vessel smooth muscle is controlled both by the ANS and at the local level.
- o **Four factors** control arterial flow at the organ level:
 - change in metabolic activity
 - changes in blood flow
 - stretch of arterial smooth muscle
 - local chemical messengers



Intrinsic control of local arterial blood flow

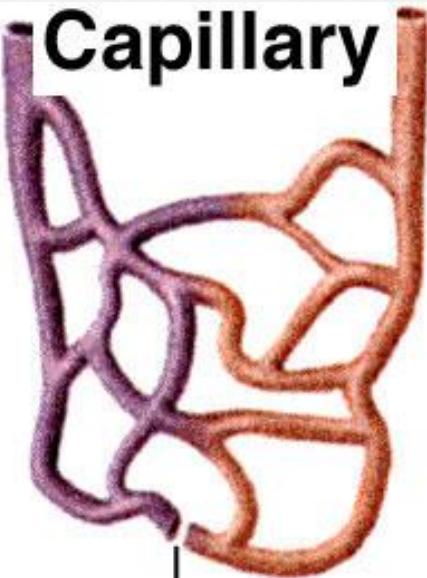
- Change in metabolic activity
 - Usually linked to CO₂ and O₂ levels (↑ CO₂ → vasodilation → ↑ blood flow) intrinsic control
- Changes in blood flow
 - decreased blood flow → increased metabolic wastes → vasodilation
- Stretch of arterial wall = myogenic response
 - Stretch of arterial wall due to increased pressure → reflex constriction
- Locally secreted chemicals can promote vasoconstriction or most commonly vasodilation
 - inflammatory chemicals, (nitric oxide, CO₂)

Artery in systole and diastole



Kapiler

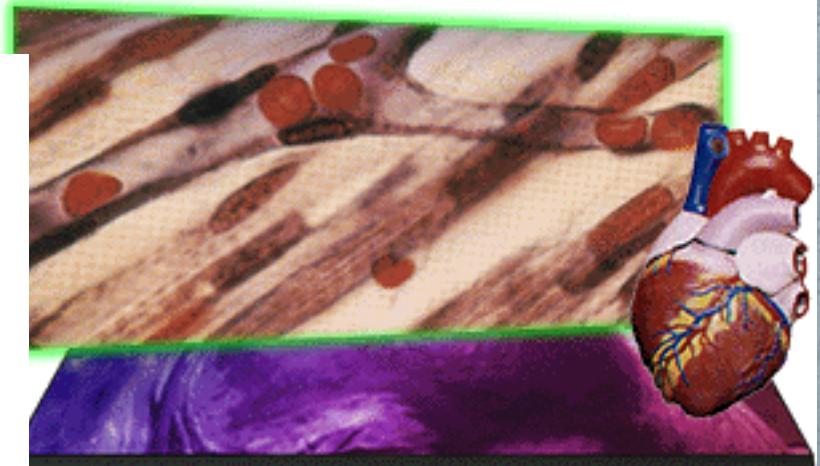
Capillary

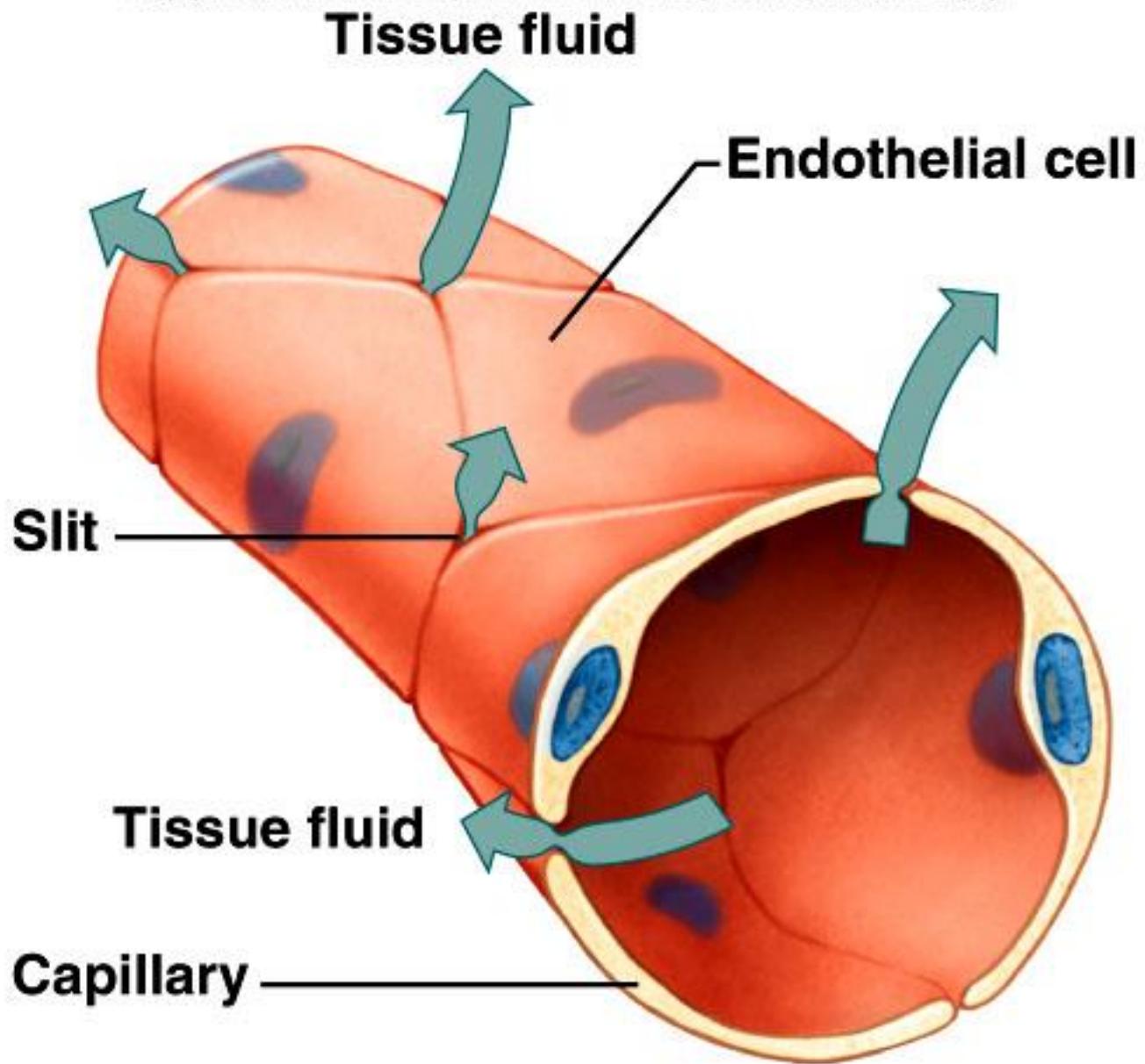


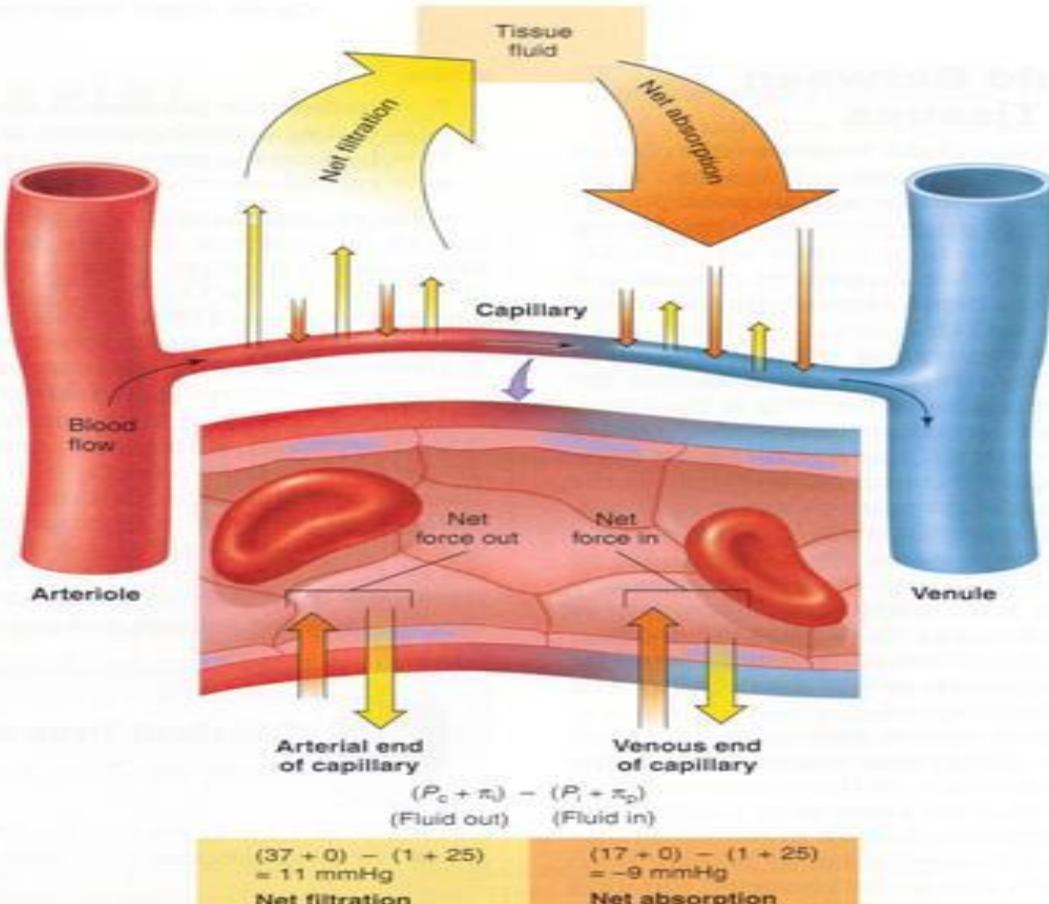
Larry

Endothelium

Basement membrane





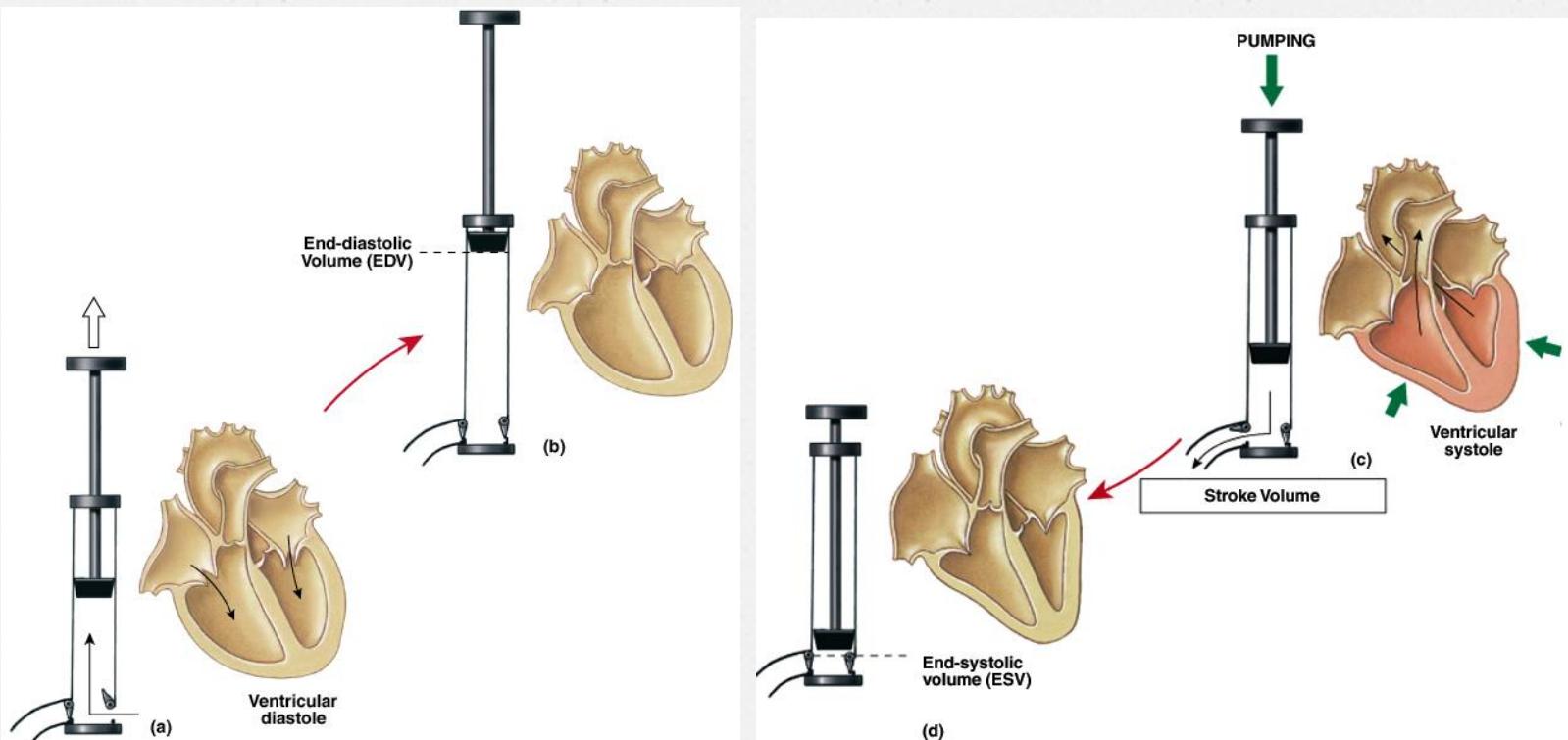


Where P_c = hydrostatic pressure in the capillary
 π_i = colloid osmotic pressure of interstitial fluid
 P_i = hydrostatic pressure of interstitial fluid
 π_p = colloid osmotic pressure of blood plasma

VOLUME DARAH

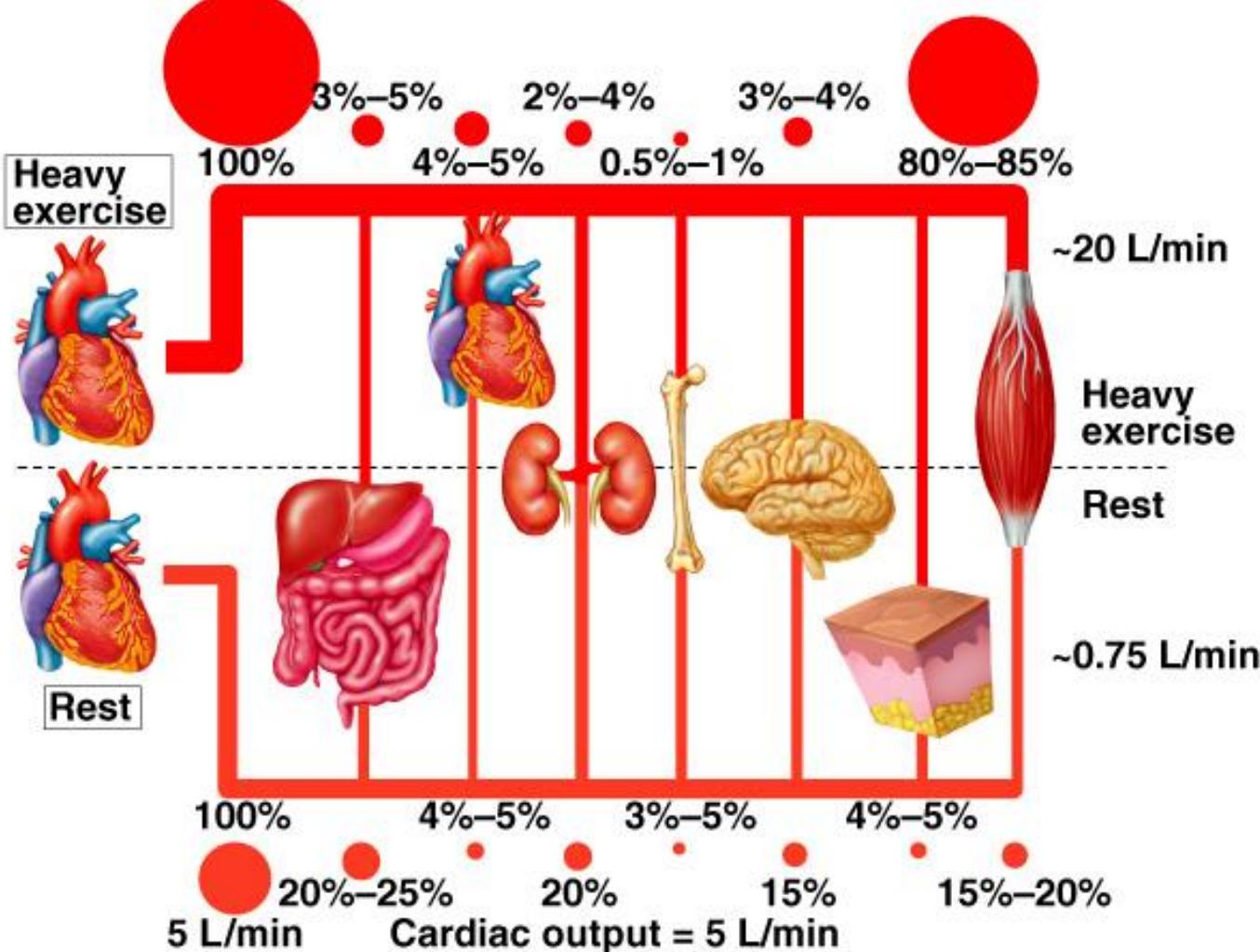
Stroke volume
End-diastolik volume
End-sistolik volume
Cardiac output
Ejection fraction

POMPA JANTUNG



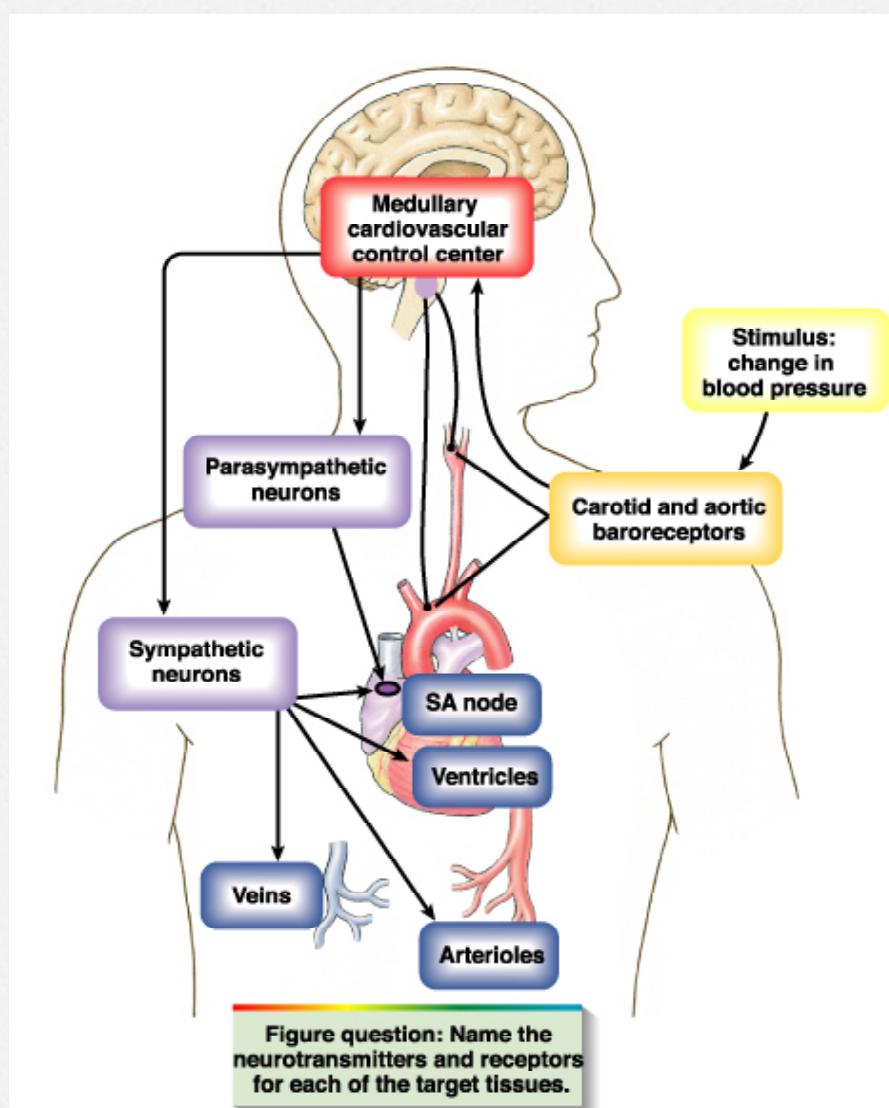
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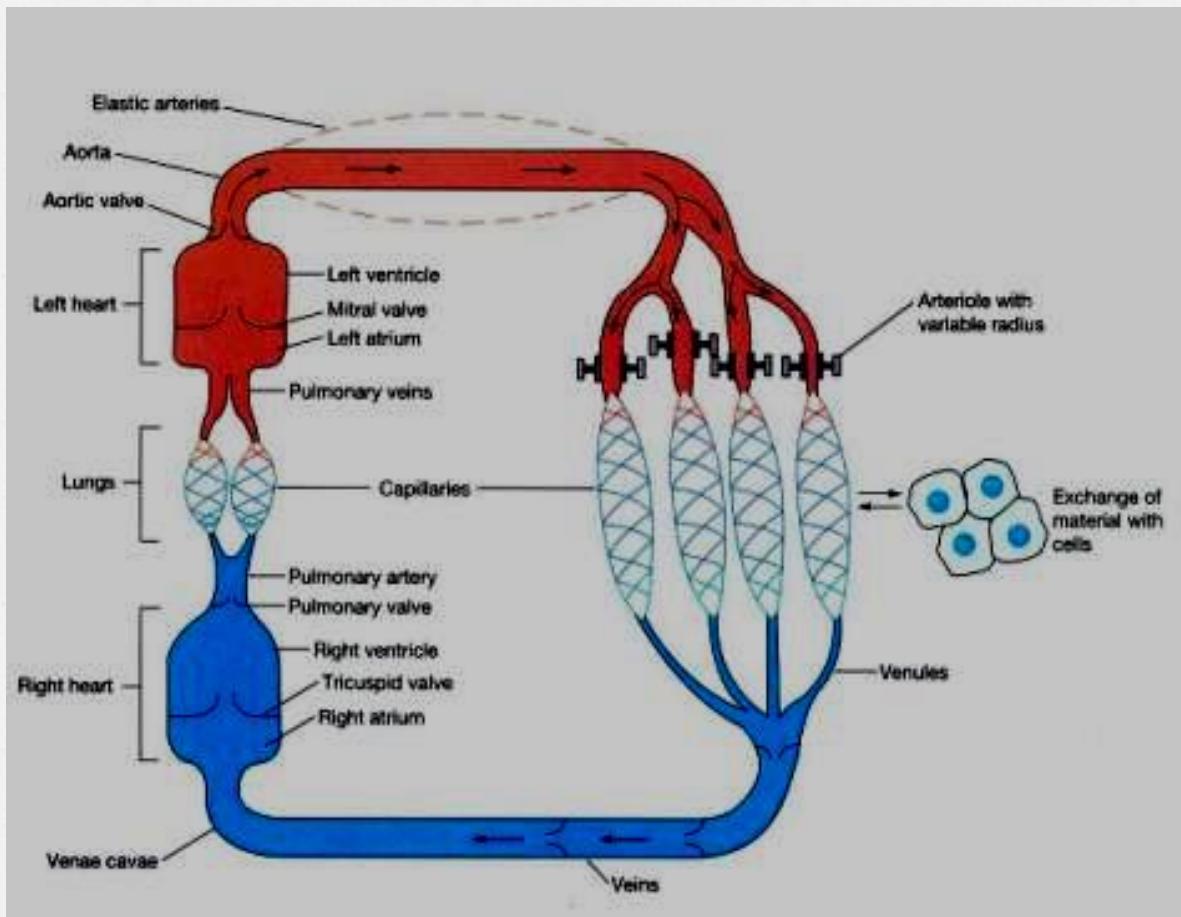
25 L/min Cardiac output = 25 L/min



Regulation of Blood Pressure

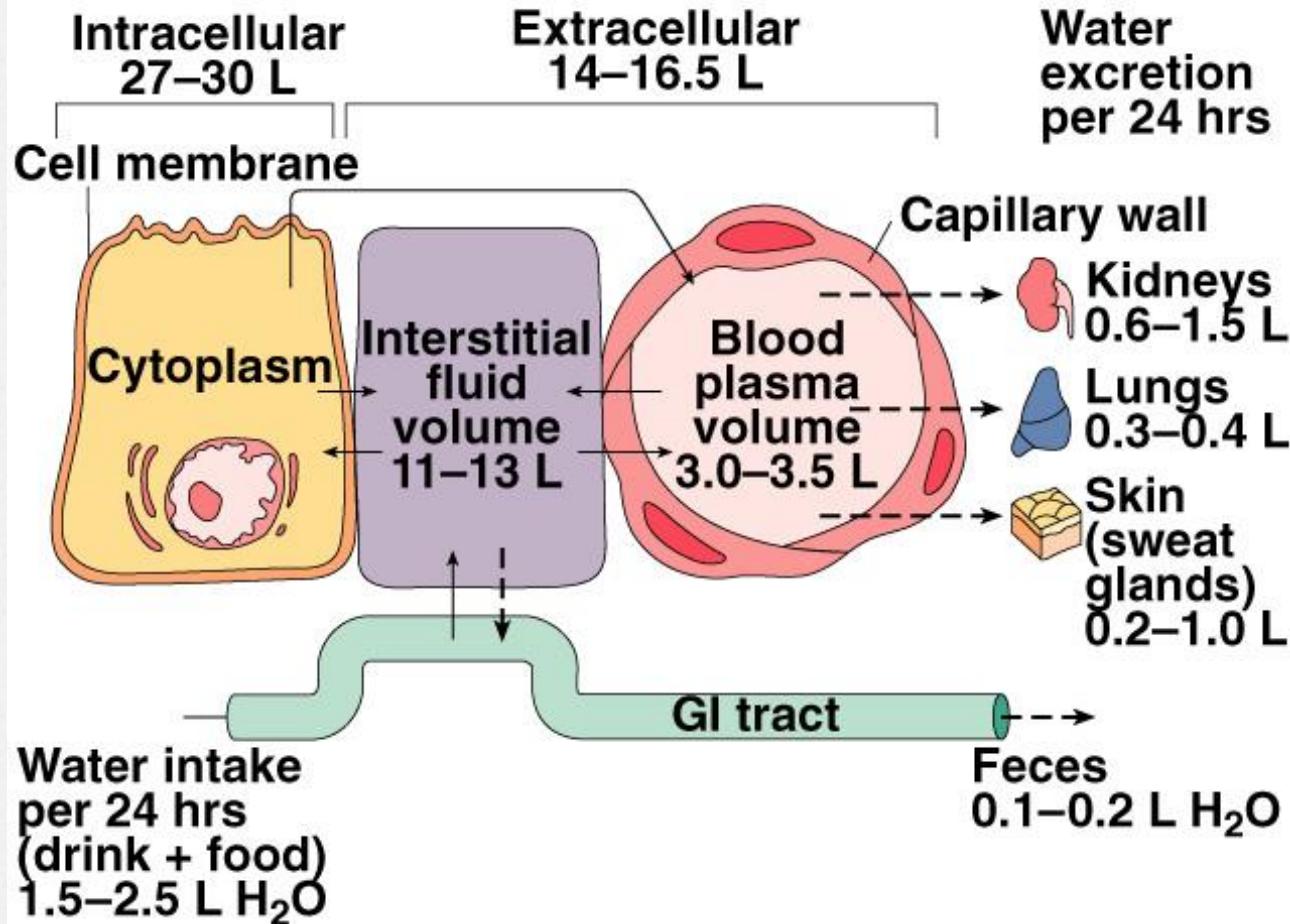
- Main coordinating center is in the medulla oblongata of the brain; medullary cardiovascular control center
- Reflex control of blood pressure
 - Baroreceptor reflex



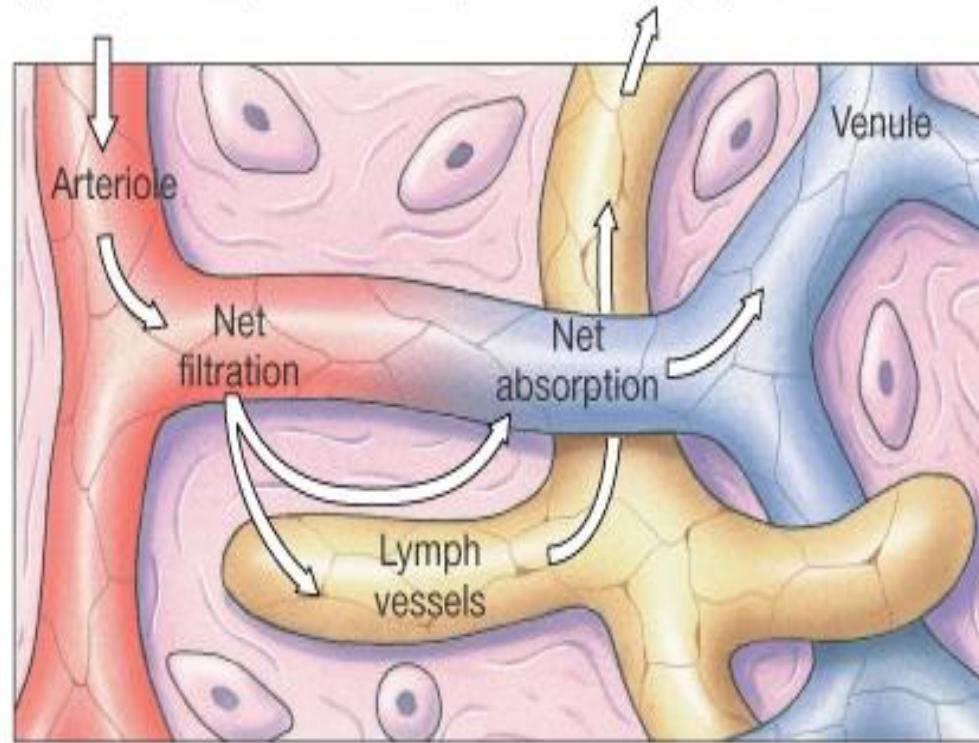


Blood Volume

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(b) Relationship between capillaries and lymph vessels



The excess water and solutes that filter out of the capillary are picked up by the lymph vessels and returned to the circulation.