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Diploma in Pharmacy 1 st Year	
Human Anatomy and Physiology	
Chapter 5 : Haemopoietic System	
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Chapter 5 Haemopoietic System IMPORTANT Questions

Q1. Write a Detailed Note on Blood with Composition.

Ans.

Blood

- Blood is a connective tissue that plays a vital role to carry various life processes and protects the body against diseases
- Haematology is the branch of medical science concerned with the study of blood, bloodforming tissues, and blood disorders.
- The system of organs and tissues, including the bone marrow, spleen, thymus and lymph nodes, involved in the production of cellular blood components is known as haematopoietic system.

Composition of Blood

- Blood is a connective tissue, having a liquid matrix with cells and cell fragments.
- Around 8% of total body weight is blood (adult female 4-5 litres and adult male 5-6 litres).
- More than half of the total blood volume is plasma and less than half is formed elements:
 1) Blood Plasma, a clear extracellular fluid, and
 - 2) Formed elements, composed of blood cells and platelets. These are classified as follows:
 - i) RBCs ii) WB<mark>C</mark>s il) Platelets

Blood Plasma

- Around 55% of blood (2.7-3.0 litres in an average human) constitutes blood plasma, i.e., blood's liquid medium (golden-yellow in colour).
- Solved plasma has 92% water, 8% blood plasma proteins, and other substances in trace amount

Functions of Blood Plasma Proteins

- **4** Essential for Blood Clotting:
- Maintain Colloidal Osmotic Pressure of Blood and Regulate the Distribution of Fluid between Blood and Tissues:
- **4** Maintain Viscosity and Blood Pressure:
- Concerned with Erythrocyte Sedimentation Rate (ESR):
- 4 Act as a Protein Reserve:
- Helps CO₂ Carriage:
- Antibodies:
- **4** Helps to Transport Certain Substances in Blood:



Red Blood Cells (Erythrocytes)

• RBCs are discotic-shaped cells constituting 99% of the blood and carrying haemoglobin molecules.

Function of RBCs

- Oxygen Transporter:
- Release of ATP and Vessel Dilation:
- Immunity:

White Blood Cells (Leukocytes)

- WBCs fight against external organisms. They are described according to their characteristics, morphology, and staining property.
- They are granulocytes and agranulocytes corresponding to the presence or absence of granules (lysosomes)

Types of Leukocytes

Granular Leukocytes or Granulocytes: The granulocyte refers to three types of WBCs.

- 1. Neutrophils,
- 2. Eosinophils,
- 3. Basophils

Functions of WBCs are:

- \rightarrow Phagocytosis
- → Antibody F<mark>ormatio</mark>n
- → Fibroblasts Formation
- \rightarrow Trephones Synthesis
- \rightarrow Heparin Secretion
- \rightarrow Antihistamine Function

Platelets (Thrombocytes)

They are very small, non nucleated dics of diameter 2-4 um, obtained from cytoplasm of megakaryocytes in red bone marrow. Its constituents promote blood clotting leading to haemostasis (Stop bleeding)

Functions of Platelets

- Vasoconstriction
- Platelet plug formation
- Coagulation (Blood Clotting)
- Fibrinolysis



Functions of Blood

Following are some major functions performed by the blood:

- i. Transportation
- ii. Thermoregulation
- iii. Hydraulic Function
- iv. Act as a Vehicle
- v. Maintenance of Ion Balance
- vi. Property of coagulation
- vii. Respiratory Function
- viii. Excretory Function
- ix. Transport of Hormones and Enzymes
- x. Regulation of Water Balance
- xi. Regulation of Acid-Base Balance
- xii. Regulation of Body Temperature (Homeostsis)
- xiii. Storage Function
- xiv. Defensive Function

Q2. Write a short note on blood group and Coagulation of Blood. Ans.

Blood Group

- A blood type or blood group is the classification of blood on the basis of the presence or absence of inherited antigens (proteins, carbohydrates, glycoprotein, or glycolipids) on the surface of RBCs.
- Understanding of blood is significant for the following practices :
- Blood grouping is essential for both donor and receiver for successful blood transfusion
- Blood grouping is important to resolve paternity disputes and medico legal cases
- It is significant in diagnosis of some blood grouping related diseases and conseguences.

Depending on the type of antigens present or absent on the membrane of RBCs, various blood grouping system are follow :

- I. Classical ABO blood grouping system,
- II. Rhesus (Rh) blood grouping system,
- III. MNS blood grouping system, and
- IV. P blood grouping system.

First two are major blood grouping systems and are more prevalent in the population and cause severe transfusion reaction, while the last two are minor blood grouping systems found in small proportion of the population and produce minute transfusion reactions.



ABO Blood Group

ABO blood group is based on A and B antigens on the RBCs surface. This system classifies blood on the basis of antigens located on the surface of RBCs and circulating antibodies in plasma. Combination of proteins and their antibodies form four types of blood:

Type A: It consists of protein A and antibodies for protein B.

Type B: It consists of protein B and antibodies for protein A.

Type AB: It consists of proteins A and B but no antibodies.

Type O: It does not consist of any proteins but have both A and B antibodies.

Thus, type AB blood group is universal receiver and can receive any blood type; whereas type O blood group is universal donor and can donate blood to anyone.

Rh Blood Group

It was first detected in Rhesus monkey. Sometimes Surface antigens of RBCs have the Rh factor. 97% Indian population have Rh positive (i.e. presence of Rh antigens) else have Rh negative blood group.

Importance of Blood Grouping

- 1) In blood transfusion;
- 2) Haemolytic disease of newborn;
- 3) Paternity dispute;
- 4) Medicolegal issues;
- 5) Susceptibility to various diseases (blood group O peptic ulcer blood group A -gastric ulcer);
- 6) Immunology, genetics, anthropology
- 7) To identify criminals.

Blood Clotting

- Blood coagulation (or blood clotting) is the process by which blood from its liquid state changes to a gel-like consistency.
- A host defence mechanism known as haemostasis is a complex process which blocks the bleeding from a damaged vessel.
- Platelet adherence and aggregation to macromolecules in the sub-endothelial tissues forms a primary haemostaticplug.
- Activating plasma coagulation factors by platelets lead to the generation of a fibrin clot that builds up the platelet aggregate.
- Shedding of platelet aggregate and fibrin clots occurs when the wound starts healing.

Factors of Blood Clotting

- Factor I fibrinogen
- Factor II prothrombin
- Factor III tissue thromboplastin (tissue factor)
- Factor IV ionized calcium (Ca++)



- Factor V labile factor or proaccelerin
- Factor VI unassigned
- Factor VII stable factor or proconvertin
- Factor VIII antihemophilic factor
- Factor IX plasma thromboplastin component, Christmas factor
- Factor X Stuart-Prower factor
- Factor XI plasma thromboplastin antecedent
- Factor XII Hageman factor
- Factor XIII fibrin-stabilizing factor

Mechanism of Blood Clotting

The process of coagulation is a cascade of enzyme catalysed reactions wherein the activation of one factor leads to the activation of another factor and so on.

The three main steps of the blood coagulation cascade are as follows:

- i. Formation of prothrombin activator
- ii. Conversion of prothrombin to thrombin
- iii. Conversion of fibrinogen into fibrin

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