

Chapter 14: Breathing and Exchange of Gases

Comprehensive Study Notes

Class 11 Biology - NCERT Based

EXAM SPRINT - Complete Coverage for NEET and Board Examinations

Introduction

Respiration is a vital life process where organisms exchange oxygen (O_2) from the atmosphere with carbon dioxide (CO_2) produced by cells. This process is essential for cellular metabolism and energy production.

Why is Breathing Essential?

- **Energy Production:** O_2 helps break down glucose, amino acids, and fatty acids
- **Waste Removal:** CO_2 (harmful byproduct) must be eliminated
- **Continuous Process:** Cells need constant O_2 supply and CO_2 removal

Definition:

Breathing/Respiration: Process of exchange of O_2 from atmosphere with CO_2 produced by cells.

14.1 RESPIRATORY ORGANS

Respiratory Mechanisms in Different Animals:

Simple Organisms:

- **Lower Invertebrates** (sponges, coelenterates, flatworms): Simple diffusion over entire body surface

- **Earthworms:** Moist cuticle for gas exchange
- **Insects:** Tracheal tubes network for air transport

Complex Organisms:

- **Aquatic Forms:** Gills (branchial respiration) - arthropods, molluscs, fishes
- **Terrestrial Forms:** Lungs (pulmonary respiration) - amphibians, reptiles, birds, mammals
- **Amphibians:** Additional cutaneous respiration through moist skin

14.1.1 Human Respiratory System

Structure and Components:

Conducting Part (Air Transport):

1. **External Nostrils:** Opening above upper lips
2. **Nasal Chamber:** Through nasal passage
3. **Pharynx:** Common passage for food and air
4. **Larynx:** Cartilaginous voice box (sound production)
5. **Epiglottis:** Elastic flap preventing food entry into larynx
6. **Trachea:** Straight tube to mid-thoracic cavity
7. **Bronchi:** Primary → Secondary → Tertiary divisions
8. **Bronchioles:** Terminal bronchioles (very thin)

Respiratory/Exchange Part:

- **Alveoli:** Thin-walled, vascularized sac-like structures
- **Function:** Actual gas diffusion between blood and air

Support Structures:

- **Cartilaginous Rings:** Support trachea, bronchi, and initial bronchioles (incomplete rings)
- **Pleura:** Double-layered membrane covering lungs
- **Pleural Fluid:** Reduces friction between lung surfaces

Thoracic Chamber:

Boundaries:

- **Dorsal:** Vertebral column
- **Ventral:** Sternum
- **Lateral:** Ribs
- **Lower:** Dome-shaped diaphragm

Important Feature: Air-tight chamber where thoracic volume changes reflect in lung volume.

Functions:

Conducting Part:

- Transports atmospheric air to alveoli
- Clears foreign particles
- Humidifies air
- Brings air to body temperature

Exchange Part:

- Site of O₂ and CO₂ diffusion between blood and air

Steps in Respiration Process:

1. **Pulmonary Ventilation:** Breathing (air in/out)
2. **Gas Diffusion:** Across alveolar membrane

3. **Gas Transport:** By blood circulation
4. **Tissue Gas Exchange:** Between blood and tissues
5. **Cellular Respiration:** O₂ utilization and CO₂ production

14.2 MECHANISM OF BREATHING

Two Stages of Breathing:

Inspiration (Inhalation):

Mechanism: Atmospheric air drawn into lungs **Pressure Requirement:** Intra-pulmonary pressure < Atmospheric pressure

Process:

1. **Diaphragm Contraction:** Increases thoracic volume (antero-posterior axis)
2. **External Intercostal Muscle Contraction:** Lifts ribs and sternum (dorso-ventral axis)
3. **Increased Thoracic Volume:** Causes increased pulmonary volume
4. **Decreased Intra-pulmonary Pressure:** Forces air into lungs

Expiration (Exhalation):

Mechanism: Alveolar air released out **Pressure Requirement:** Intra-pulmonary pressure > Atmospheric pressure

Process:

1. **Muscle Relaxation:** Diaphragm and intercostals return to normal
2. **Decreased Thoracic Volume:** Reduces pulmonary volume
3. **Increased Intra-pulmonary Pressure:** Forces air out of lungs

Additional Features:

- **Additional Muscles:** Abdominal muscles can increase breathing strength
- **Normal Rate:** 12-16 breaths per minute (healthy human)
- **Assessment Tool:** Spirometer for measuring air volumes

14.2.1 Respiratory Volumes and Capacities

Primary Volumes:

1. Tidal Volume (TV):

- **Definition:** Air inspired/expired during normal respiration
- **Value:** ~500 mL
- **Per Minute:** 6000-8000 mL

2. Inspiratory Reserve Volume (IRV):

- **Definition:** Maximum air inspired after normal inspiration
- **Value:** 2500-3000 mL

3. Expiratory Reserve Volume (ERV):

- **Definition:** Maximum air expired after normal expiration
- **Value:** 1000-1100 mL

4. Residual Volume (RV):

- **Definition:** Air remaining after forcible expiration
- **Value:** 1100-1200 mL

Pulmonary Capacities:

1. Inspiratory Capacity (IC):

- **Formula:** $TV + IRV$
- **Definition:** Total air inspired after normal expiration

2. Expiratory Capacity (EC):

- **Formula:** $TV + ERV$
- **Definition:** Total air expired after normal inspiration

3. Functional Residual Capacity (FRC):

- **Formula:** $ERV + RV$
- **Definition:** Air remaining after normal expiration

4. Vital Capacity (VC):

- **Formula:** $TV + IRV + ERV$
- **Definition:** Maximum air breathed in after forced expiration

5. Total Lung Capacity (TLC):

- **Formula:** $VC + RV = TV + IRV + ERV + RV$
- **Definition:** Total air accommodated after forced inspiration

14.3 EXCHANGE OF GASES

Sites of Gas Exchange:

1. **Primary Site:** Alveoli (blood ↔ atmospheric air)
2. **Secondary Site:** Tissues (blood ↔ tissue cells)

Mechanism: Simple Diffusion

Driving Force: Pressure/concentration gradients

Factors Affecting Diffusion Rate:

1. **Pressure Gradients:** Difference in partial pressures
2. **Gas Solubility:** CO₂ is 20-25 times more soluble than O₂
3. **Membrane Thickness:** Thinner membranes favor diffusion

Partial Pressures:

Definition: Pressure contributed by individual gas in mixture

- **Oxygen:** pO₂
- **Carbon Dioxide:** pCO₂

Partial Pressure Values (mm Hg):

Location	pO ₂	pCO ₂
Atmospheric Air	159	0.3
Alveoli	104	40
Deoxygenated Blood	40	45
Oxygenated Blood	95	40
Tissues	40	45

Gradients for Diffusion:

- **Oxygen:** Alveoli → Blood → Tissues (159 → 104 → 40)
- **Carbon Dioxide:** Tissues → Blood → Alveoli (45 → 40 → 0.3)

Diffusion Membrane Structure:

Three Layers:

1. **Thin Squamous Epithelium:** Alveolar lining
2. **Endothelium:** Alveolar capillaries
3. **Basement Substance:** Between epithelium and endothelium

Total Thickness: Less than 1 millimeter (optimal for diffusion)

14.4 TRANSPORT OF GASES

14.4.1 Transport of Oxygen

Transport Methods:

- **97%:** By RBCs (as oxyhaemoglobin)
- **3%:** Dissolved in plasma

Haemoglobin Characteristics:

- **Color:** Red
- **Component:** Iron-containing pigment
- **Location:** RBCs
- **Binding Capacity:** 4 oxygen molecules per haemoglobin

Oxygen-Haemoglobin Binding:

Reversible Reaction: $\text{Hb} + 4\text{O}_2 \rightleftharpoons \text{HbO}_8$ (Oxyhaemoglobin)

Factors Affecting Binding:

Primary Factor: Partial pressure of O_2 ($p\text{O}_2$) **Secondary Factors:**

- Partial pressure of CO_2 ($p\text{CO}_2$)
- Hydrogen ion concentration (pH)

- Temperature

Oxygen Dissociation Curve:

Shape: Sigmoid (S-shaped) **Plot:** % Hb saturation vs pO_2 **Significance:** Shows binding/release patterns

Binding Conditions:

Favorable for Binding (Alveoli):

- High pO_2
- Low pCO_2
- Low H^+ concentration
- Lower temperature

Favorable for Release (Tissues):

- Low pO_2
- High pCO_2
- High H^+ concentration
- Higher temperature

Oxygen Delivery:

Normal Conditions: 100 mL oxygenated blood delivers ~5 mL O_2 to tissues

14.4.2 Transport of Carbon Dioxide

Transport Methods:

- **70%:** As bicarbonate (HCO_3^-)

- **20-25%:** By haemoglobin (carbamino-haemoglobin)
- **7%:** Dissolved in plasma

Carbamino-Haemoglobin Formation:

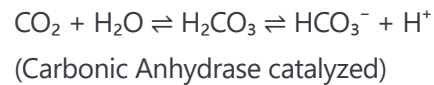
Binding: $\text{CO}_2 + \text{Hb} \rightleftharpoons \text{HbCO}_2$ (Carbamino-haemoglobin) **Factors:**

- **High pCO₂, Low pO₂:** Promotes binding (tissues)
- **Low pCO₂, High pO₂:** Promotes release (alveoli)

Bicarbonate Transport:

Key Enzyme: Carbonic Anhydrase (high concentration in RBCs)

Chemical Reactions:



At Tissues (High pCO₂):

- $\text{CO}_2 \rightarrow \text{HCO}_3^- + \text{H}^+$ (forward reaction)
- CO₂ trapped as bicarbonate

At Alveoli (Low pCO₂):

- $\text{HCO}_3^- + \text{H}^+ \rightarrow \text{CO}_2 + \text{H}_2\text{O}$ (reverse reaction)
- CO₂ released for exhalation

CO₂ Delivery:

Normal Conditions: 100 mL deoxygenated blood delivers ~4 mL CO₂ to alveoli

14.5 REGULATION OF RESPIRATION

Neural Control System:

Primary Center:

Respiratory Rhythm Centre:

- **Location:** Medulla region of brain
- **Function:** Primary regulation of breathing rhythm
- **Control:** Maintains basic respiratory pattern

Modulating Center:

Pneumotaxic Centre:

- **Location:** Pons region of brain
- **Function:** Modulates respiratory rhythm centre
- **Effect:** Reduces inspiration duration, alters respiratory rate

Chemosensitive Control:

Chemosensitive Area:

- **Location:** Adjacent to rhythm centre
- **Sensitivity:** Highly sensitive to CO₂ and H⁺ ions
- **Response:** Activates rhythm centre when CO₂/H⁺ increases
- **Result:** Adjustments in respiration to eliminate excess substances

Peripheral Receptors:

Location: Aortic arch and carotid artery **Function:** Detect CO₂ and H⁺ changes **Action:** Send signals to rhythm centre for corrections

Role of Oxygen:

Significance: Quite insignificant in respiratory rhythm regulation **Note:** CO₂ and H⁺ are primary regulatory factors

14.6 DISORDERS OF RESPIRATORY SYSTEM

Common Respiratory Disorders:

1. Asthma:

Symptoms: Difficulty breathing, wheezing **Cause:** Inflammation of bronchi and bronchioles **Effect:** Narrowed airways, breathing difficulty

2. Emphysema:

Type: Chronic disorder **Pathology:** Alveolar wall damage **Consequence:** Decreased respiratory surface area **Major Cause:** Cigarette smoking

3. Occupational Respiratory Disorders:

Industries Affected: Grinding, stone-breaking **Problem:** Excessive dust exposure **Consequence:** Inflammation → Fibrosis → Lung damage **Prevention:** Protective masks for workers

Health Impacts:

- **Reduced Gas Exchange:** Damaged alveolar surfaces
- **Breathing Difficulties:** Narrowed or blocked airways
- **Long-term Damage:** Progressive tissue damage

NEET-Specific Important Points

High-Yield Topics for NEET:

1. Respiratory System Anatomy:

- Conducting vs respiratory parts
- Pleural membranes and function
- Thoracic chamber boundaries

2. Breathing Mechanism:

- Inspiration/expiration process
- Role of diaphragm and intercostal muscles
- Pressure gradients

3. Respiratory Volumes:

- Definitions and values
- Pulmonary capacity calculations
- Clinical significance

4. Gas Exchange:

- Partial pressure gradients
- Diffusion factors
- Membrane structure

5. Gas Transport:

- Oxygen transport mechanisms
- CO₂ transport pathways
- Haemoglobin binding factors

6. Regulation:

- Neural control centers

- Chemical regulation
- Feedback mechanisms

Common NEET Question Patterns:

1. Numerical Problems:

- Respiratory volume calculations
- Partial pressure comparisons
- Gas transport percentages

2. Mechanism Questions:

- Breathing process steps
- Gas exchange mechanisms
- Transport pathways

3. Comparison Questions:

- Different respiratory volumes
- Gas transport methods
- Control mechanisms

4. Disorder-Related Questions:

- Symptoms and causes
- Effects on gas exchange
- Preventive measures

Memory Aids and Mnemonics

Respiratory Volumes:

"Tigers In Every Room"

- Tidal Volume
- Inspiratory Reserve Volume
- Expiratory Reserve Volume
- Residual Volume

Pulmonary Capacities:

"I Eat Five Vegetables To Live"

- Inspiratory Capacity
- Expiratory Capacity
- Functional Residual Capacity
- Vital Capacity
- Total Lung Capacity

Gas Transport:

"Please Deliver Bicarbonate"

- Plasma (dissolved)
- Direct binding (carbamino-Hb)
- Bicarbonate (major CO₂ transport)

Breathing Control Centers:

"Respiratory Pneumonia Chemo"

- Respiratory rhythm centre (medulla)
- Pneumotaxic centre (pons)
- Chemosensitive area (medulla)

Practice Questions for NEET

Multiple Choice Questions:

1. What percentage of CO₂ is transported as bicarbonate? a) 20-25% b) 70% c) 7% d) 97%
2. The respiratory rhythm centre is located in: a) Pons b) Cerebrum c) Medulla d) Cerebellum
3. Vital capacity includes: a) TV + IRV + ERV b) TV + IRV c) ERV + RV d) All lung volumes

Numerical Problems:

1. If tidal volume is 500 mL and breathing rate is 15/min, calculate air moved per minute.
2. Calculate vital capacity if TV = 500 mL, IRV = 3000 mL, ERV = 1100 mL.

Short Answer Questions:

1. Explain the mechanism of inspiration.
2. Why is CO₂ more efficiently transported than O₂?
3. What is the significance of the oxygen dissociation curve?

Long Answer Questions:

1. Describe the complete pathway of oxygen from atmosphere to tissues.
2. Explain the neural regulation of respiration.
3. Compare the transport mechanisms of oxygen and carbon dioxide.

Application-Based Questions:

Scenario-Based Problems:

Q1: A person climbs to high altitude. What changes occur in:

- Partial pressure of gases

- Breathing rate
- Oxygen transport

Q2: During exercise, how does the body adjust:

- Breathing pattern
- Gas exchange
- Transport mechanisms

Q3: In emphysema patients:

- What structural changes occur
- How is gas exchange affected
- What compensatory mechanisms operate

Summary Table: Gas Transport Overview

Gas	Transport Method	Percentage	Location	Mechanism
O ₂	Oxyhaemoglobin	97%	RBCs	Hb-O ₂ binding
O ₂	Dissolved	3%	Plasma	Simple solution
CO ₂	Bicarbonate	70%	Plasma/RBCs	Carbonic anhydrase
CO ₂	Carbamino-Hb	20-25%	RBCs	Hb-CO ₂ binding
CO ₂	Dissolved	7%	Plasma	Simple solution

Key Values to Remember:

Respiratory Volumes (mL):

- **TV:** 500
- **IRV:** 2500-3000

- **ERV:** 1000-1100
- **RV:** 1100-1200

Partial Pressures (mm Hg):

- **Atmospheric pO₂:** 159
- **Alveolar pO₂:** 104
- **Tissue pO₂:** 40

Gas Delivery (per 100 mL blood):

- **O₂ delivery:** ~5 mL
- **CO₂ pickup:** ~4 mL

EXAM SPRINT - Master Breathing and Gas Exchange with focused study on mechanisms, transport pathways, and regulatory systems. Understanding numerical values and their significance is crucial for NEET success.

Source: NCERT Biology Class 11, Chapter 14 - Comprehensive coverage for NEET preparation