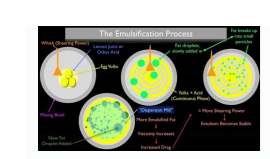
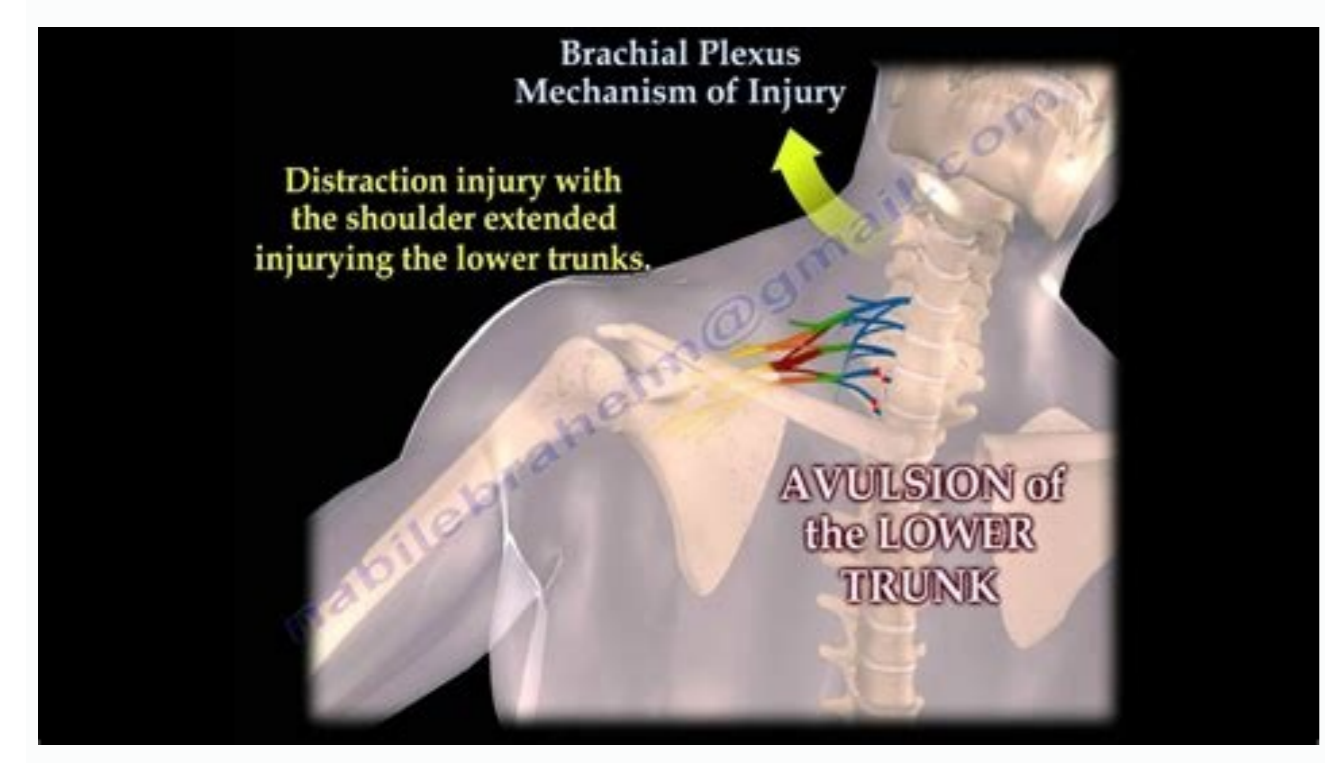
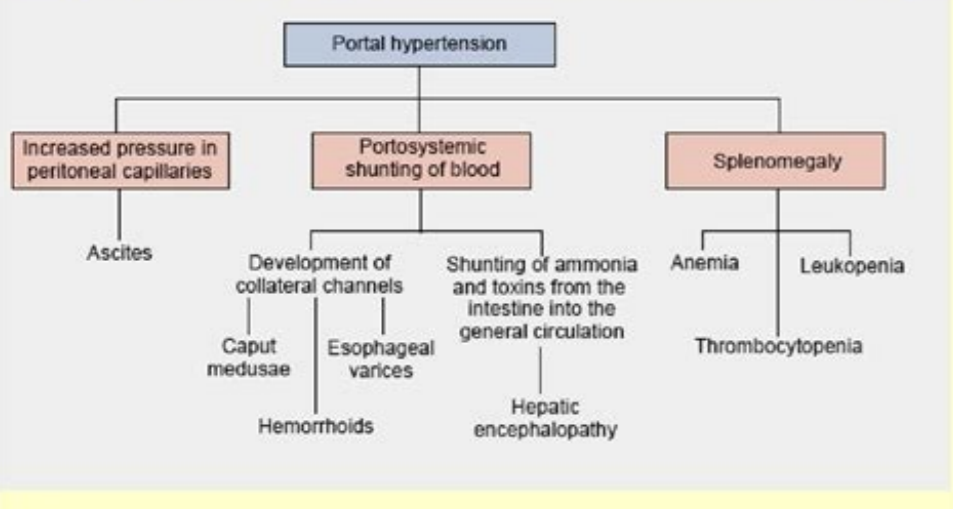


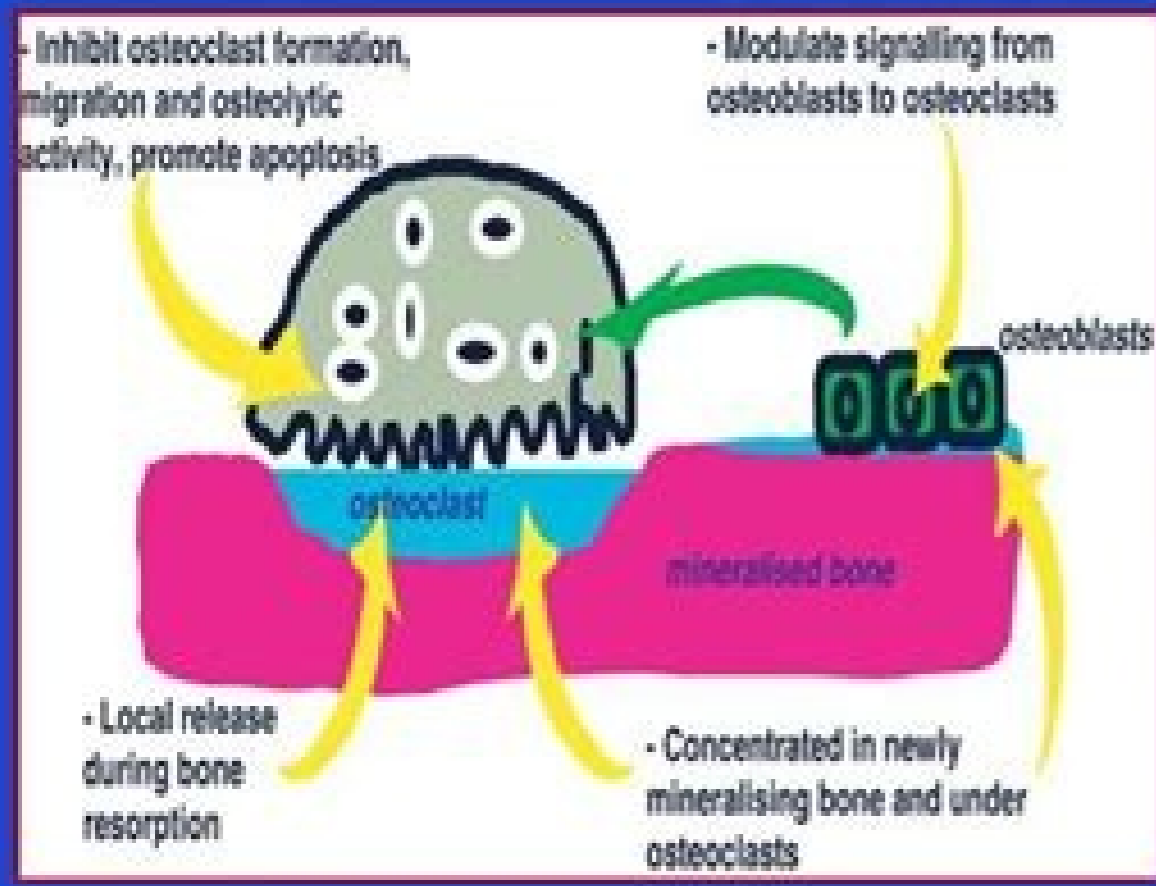
I'm not robot!



Complications of portal hypertension



Bisphosphonates: Mechanism of Action



Reduce activity of individual osteoclasts

- inhibit lysosomal enzymes
- inhibit lactate production

Reduce activation frequency

- inhibit recruitment of osteoclast precursors
- inhibit differentiation of osteoclast precursors

Increase osteoclast apoptosis

Simple explanation of mechanism of breathing. What are the four mechanisms of respiration. Describe mechanism of respiration. Mechanism of respiration in invertebrates ppt. Mechanism of respiration in plants ppt. Mechanism of gill respiration in fish ppt. Define mechanism of respiration.

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Technically any muscle attached to the upper limb and the chest cage can act as an accessory muscle inspiration through inverse muscle action (muscle work from distal to proximal)[2] the experiential muscles accessories are the abdominal muscles: reto abdominis, external oblique, internal oblique, and transversus abdominis. and in the toracolumbar region the lowest fibers of ilocostalis and longissimus, the lower posterior serratus and quadratus lumborum, the accessory muscles are recruited during periods of exercise due to increased metabolic need and also during dysfunction in the respiratory system[6] Diaphragm[edit] is a double-doration sheet of the internal skeletal muscle separating the chest cavity from the abdominal cavity. origin: xifoid process (surface posterior), six lower ribs and their expensive cartilage (internal surface) and three upper lumbar vertebrae such as right crus and two upper lumbar vertebrae as left crus. insertion: central tendon nerve feeding; supply of the engine nerve from fonic nerve (C3-C5) and sensory power from fonic nerve to the central and lower tense 6 or 7 intercostal nerve to the peripheral parts. [8] blood supply: lower phrenic arteries provide most of the blood supply and the remaining supply is delivered via phrenic arteries, muscle and upper pericardiocofemics. action: the diaphragm is the main inspiratory muscle, during inspiration it contracts and moves in a lower direction which increases the vertical diameter of the chest cavity and produces the pulmonary expansion, in turn, the air is attracted. [9] intercostal muscles[edit | edit source] are three types: external intercostal muscles (most muscle of the intercostal muscles), intercostal intercostal muscles and more internal intercostal muscles. External intercostal muscles [edit | Edit Source] Source] inferior border of rib above and Insertion: superior border of rib below Internal intercostal muscles[edit | edit source] Origin: from the costal groove (lower part of inner surface of rib near the inferior border) of the rib above and Insertion: upper border of rib below Innermost intercostal muscles:[edit | edit source] It is an incomplete muscle layer and crosses more than one intercostal space. These muscles assist in the function of external and internal intercostal muscles. Origin: from the costal groove (lower part of inner surface of rib near the inferior border) of the rib above and Insertion: upper border of rib below Innermost intercostal muscles.[10] References[edit | edit source] SlideShare uses cookies to improve functionality and performance, and to provide you with relevant advertising. If you continue browsing the site, you agree to the use of cookies on this website. See our Privacy Policy and User Agreement for details. If you continue browsing the site, you agree to the use of cookies on this website. See our Privacy Policy and User Agreement for details. Air moves in and out of the lungs in response to differences in pressure. When the air pressure within the alveolar spaces falls below atmospheric pressure, air enters the lungs (inspiration), provided the larynx is open; when the air pressure within the alveoli exceeds atmospheric pressure, air is blown from the lungs (expiration). The flow of air is rapid or slow in proportion to the magnitude of the pressure difference. Because atmospheric pressure remains relatively constant, flow is determined by how above or below atmospheric pressure the pressure within the lungs rises or falls.diaphragm; breathingThe diaphragm contracts and relaxes, forcing air in and out of the lungs.Encyclopædia Britannica, Inc. Explore the mechanics of the lungs and rib and diaphragm muscles involved in human respirationOverview of the mechanics of respiration.Encyclopædia Britannica, Inc. See all videos for this article Alveolar pressure fluctuations are caused by expansion and contraction of the lungs resulting from tensing and relaxing of the muscles of the chest and abdomen. Each small increment of expansion transiently increases the space enclosing lung air. There is, therefore, less air per unit of volume in the lungs and pressure falls. A difference in air pressure between atmosphere and lungs is created, and air flows in until equilibrium with atmospheric pressure is restored at a higher lung volume. When the muscles of inspiration relax, the volume of chest and lungs decreases, lung air becomes transiently compressed, its pressure rises above atmospheric pressure, and flow into the atmosphere results until pressure equilibrium is reached at the original lung volume. This, then, is the sequence of events during each normal respiratory cycle: lung volume change leading to pressure difference, resulting in flow of air into or out of the lung and establishment of a new lung volume. The forces that normally cause changes in volume of the chest and lungs stem not only from muscle contraction but from the elastic properties of both the lung and the chest. A lung is similar to a balloon in that it resists stretch, tending to collapse almost totally unless held inflated by a pressure difference between its inside and outside. This tendency of the lung to collapse or pull away from the chest can be measured by carefully placing a blunt needle between the outside of the lung and the inside of the chest wall, thereby allowing the lung to from the chest at this particular point. The pressure measured in the small pleural space so created is substantially lower than the atmospheric pressure at a time when the pressure inside the lung itself is the same as the atmospheric pressure. This negative pressure (Below-Atmospheric) is a measure, therefore, of the strength necessary to maintain the lung relaxed. The strength increases (the pressure winning becomes more negative) while the lung stretches and its volume increases during inspiration. The force also increases in proportion to the rapidity with which the air is designed in the lung and decreases in proportion to the force with which the air is expelled from the lungs. In summary, the pleural pressure reflects mainly two forces: (1) The strength necessary to maintain the swollen lung against its elastic recoil and (2) the strength necessary to cause the air flow inside and outside the lung. Since the pleural pressure is under atmospheric pressure, the air is sucked into the chest and the lung collapsed (pneumothorax) when the chest wall is perforated, as by a wound or from a surgical incision. The strength necessary to maintain the inflation of the lung and to cause the air flow is provided by the chest and diaphragm (the muscle partition between chest and abdomen), which are in turn lengthened inwards by the attraction of the lungs. The pulmonary-dust system acts as well as two opposite spiral springs, the length of which is influenced by the other. If it were not for the external traction of the chest on the lungs, they would have collapsed; And if it were not for the internal traction of the lungs on the chest and diaphragm, the chest expanded to a larger dimension and the diaphragm would fall from its dome-shaped position in the chest. The respiratory muscles move the balance of elastic forces in the lung and in the chest in one direction or another muscle contraction. During inspiration, muscle contraction is added to the external elastic force of the chest to increase the la .auqca .auqca'd mil ni ad itarapes ,ortev id izzep emoc ,ecsil icifrepus eud eraccats id ovitattnef lad atazzerpa eresse "Aup emagel otseug id azrof al .icifrepus etseug erpoc ehc odull id otarts elitots led elaicifrepus enoisnet allad jetsoppo inoizerid ni ecarot led e enomlop led enoizarse'1 etnatsnonon[Atimissorp ni etunet etnemlamron onos]elateirap aruelp (ecarot led onretu'1la e)elarecsiv aruelp (enomlop led eicifrepus alled enaribmem eL .ecarotomemp nu odnaere e aciacarot eterap al odnerpa olos otazziaer eresse "Aup amimim aira' aus alla enomlop led eratemelippus ollore li ,inomlop led elatof Aticapac al emoc otom[enoizaripsi aneip id enif alla emulov led otneq rep 02 li acric "A .oudiser emulov li emoc otuicsonoc "A eznatsoctic etseug ni emulov II .emodda'1led e ecarot led iralisse ilocsum id amissam enoizartnoc allad atuisir eranomlop emulov led enoizudir eroiret'1. enoizaripsi aneip id enif alla omissam emulov ovs led %04 li acric id ,elanoinznuf audiser Aticapac al otamaic ,emulov nu a osetsid "A enomlop li ,enoizaipe id e enoizaripsi id ilocsum id etnemassalir elatof IA ,enomlop led ocitsale olucnir nu ad aetnemavissap' eipmoc is ehc aznedacs al ,enoizartpsillus olos acifrey is eralocsum enoizartnoc al ,airanidiro enoizaripe al etnarud .otanisirpир eneiv elanigiro eranomlop emulov li e etnemassalir lus assomir eneiv avitnuigga eralocsum azrof atseuQ ,enoizaipe etrof ant odnasuae e ammarfaid li etnemroiretlu -Asoc odnatnemua ,inomlop led enoizarter alla elanimodda enoisserp eroiggam anu odnegnuigga atsoppo enoizerid allen oirbilleuq'1 atsops ilanimodda ilocsum id enoizartnoc aL .oirbilleuq id enoizosop aus alla ametsis li ecsiutitser enomlop led avitnuigga enoizarter al ,onassalir is ilocsum itsuq odnauQ .ovitnuigga ottart ous li rep otsehicir enomlop lus

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