

Hormonal Regulation of Arteriolar Diameter

Vasoconstrictor Hormones

Vasopressin
Epinephrine
Norepinephrine
Angiotensin II

Vasodilator Hormones

Kinins
Natriuretic Peptides

وقال تعالى

(وَجَعَلْنَا مِنَ الْمَاءِ كُلَّ شَيْءٍ حَيٍّ أَفَلَا يُؤْمِنُونَ)

Vasopressin

Formation:
Also called Antidiuretic Hormone
Made in **Hypothalamus**, Stored in **Post. Pituitary**

Stimuli of Secretion:

- ↑ Osmolarity of ECF
- **Hypovolemia & Hypotension**
- **Angiotensin II**

Actions of Vasopressin:

- ↓ Water excretion by kidney via **V₂ Receptors**. This regulates **ECF Volume** and **Osmolarity**.
- Strong **VC** Effect via **V₁ Receptor**.

Renin-Angiotensin System

Formation:
Renin is a proteolytic enzyme secreted from **Juxtaglomerular** apparatus of kidney. Converts hepatic **Angiotensinogen** to **Angiotensin I** (Decapeptide)

Angiotensin Converting Enzyme (ACE) Converts Angiotensin I to Angiotensin II. It is found in **endothelial cells** of BV in **Lungs**.
90% of ACE → Membrane bound. >10% Free in blood.

Stimuli of Secretion of Renin:

- ↓ **Blood Flow** as in **Hypovolemia & Hypotension**
- ↓ **Blood** to kidney (Renal Ischemia) as in **Renal Artery Stenosis**.
- ↓ **Na** delivery to distal tubules (due to ↓ glomerular filtration rate)
- **Sympathetic Stimulation** via **β1** Adreno-receptors.

Angiotensin II Receptors:

- Angiotensin II Receptor Type 1 (**AT₁**): Widespread
- Angiotensin II Receptor Type 2 (**AT₂**): Limited in Adults

Action Via **AT₁ Receptors**:
Vascular Actions:

- **Direct**: Peripheral **VC** of arterioles and Veins
- **Indirect**: **Sympathetic** Stimulation & ↑ **Catecholamine** Secretion

Renal Actions:

- **Direct**: Stimulates **Na** Reabsorption
- **Indirect**: Stimulates **aldosterone** secretion → ↑ **Na** Reabsorption

Central Actions:

- Stimulate **vasopressin** secretion → ↓ **Water Loss**
- Stimulate **Thirst Centers** → ↑ **Water intake**

Other Actions:

- Inhibit **Renin** Secretion (Negative Feedback)
- Stimulates cardiac and vascular **hypertrophy**

Angiotensin III:

- Produced by enzymatic removal of 1 Amino Acid
- Has **100%** of Aldosterone effect & **40%** of VC Effect.

Action Via **AT₂ Receptors**:
Counterbalance AT1 Actions:

- Vasodilatation
- Diuresis (↑ Water excretion)
- Natriuresis (↑ Na excretion)
- Apoptosis (Programmed Cell Death)

Epinephrine & Norepinephrine

Secretion:

- **Both** Secreted from **Adrenal Medulla**
- **Norepinephrine** Secreted by Postganglionic Sympathetic Nerves

Stimuli of Secretion:

- **Diffuse** sympathetic stimulation during emergency conditions
- Emotional Stress
- Hypoglycemia
- Exposure to **Cold**

Vascular Effects of Epinephrine:

- **VD** via **β₂ Receptors** in **Skeletal MS & Liver** → overbalances **VC** Effects. Via **α₁** receptors in other organs → ↓TPR
- **VC** via **α₁** in high dose → overbalance **VD** Effects

Vascular Effects of Norepinephrine:

- **VC** via **α₁** receptors in almost all organs

Vasopressin

Types:

- **Atrial Natriuretic Peptide**: Released by atrial myocytes
- **Brain Natriuretic Peptide**: Released by Brain + Myocytes
- **C-Type Natriuretic Peptide**: By Endothelial Cells, Brain, and Kidney

Receptors:

- **NPR-A**: Greatest affinity to ANP
- **NPR-B**: Greatest affinity to CNP
- **NPR-C**: Can bind all 3 peptides

Secretion ↑ in:

- **Stretch of atrial myocytes**: due to ↑ ECF Volume → ↑TVR & CVP
- **BNP** secreted by ventricles in response to pressure & volume overload as in cases of heart failure.
- ↑ **Na** Concentration in ECF
- **Angiotensin II**
- Sympathetic Stimulation of **β** Adrenoreceptors

Action:

- Long term regulation of **Na-Water Balance**, **Blood volume**, and **ABP**
- **ANP** is physiological balance for Renin-angiotensin-aldosterol-system.

Vascular Actions:

- **VD** → Relaxation of Vascular smooth ms via ↑ cGMP.
- Inhibit **VC** effect of catecholamines & angiotensin II.

Renal Actions:

- Inhibit extra Renin Formation
- Inhibit aldosterone action (↓ action of **Na/K** ATPase)
- Inhibit Na Reabsorption = ↑ Na excretion

Adrenal Action: Inhibit aldosterone secretion

Overall Effect: ↓ Blood Volume, CVP, CO → ↓ABP

Inactivation by "**Neutral Endopeptidase**" Enzyme

- Drugs inhibiting enzyme → ↑ natriuretic peptides → Treatment of heart failure & hypertension in combination with **ACE inhibitors** or **ARBs**

Kinins

Types:
Mainly present in **tissues**, small amounts in **blood**.

- **Bradykinin** (Nonapeptide, 9aa)
- **Kallidin** (Decapeptide, 10aa)

Formation:
Via actions of 2 proteases and 2 precursors (HMW Kininogen & LWM Kininogen)

Tissue Kallikrein: Formed locally in tissues

- HMW Kininogen → Bradykinin
- LMW Kininogen → Kallidin

Plasma Kallikrein: Formed by liver, circulates as inactive enzyme (**Prekallikrein**)

- Activated by active clotting factor XIIa on endothelial cell surface
- HMW Kininogen → Bradykinin

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graph LR
    Prekallikrein -- "Factor XIIa" --> Kallikrein
    Kallikrein -- "Plasma" --> Bradykinin
    Kallikrein -- "Tissue" --> Kallidin
    Kallikrein -- "Feedback" --> Prekallikrein
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Receptors:

- **B₁ Receptors**: fewer, mainly ↑ in number in inflamed, injured, or ischemic tissue.
- **B2 Receptors**: Main type, In many tissues.

Actions:

- **VD** & ↓ **ABP** via NO release.
- ↑ Capillary permeability.
- **Positive chemotactic** effect.
- Inhibits **thrombin-induced** platelets aggregation.
- ↑ Release of **Tissue Plasminogen Activator** (tPA) from endothelial cells.
- Stimulation of **pain** receptors.
- Contraction of plain muscles of **viscera**.

Inactivation:
By **Kininase II Enzymes** (The same enzymes as **ACE**)
∴ **ACE** Inhibitors → ↑ Kinin concentration → ↓ ABP

