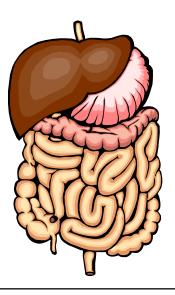
## PTA/OTA 106 Unit 2 Lecture 3



# **Digestive Functions**

Ingestion

intake of food

Digestion

breakdown of molecules

Absorption

uptake nutrients into blood/lymph

Defecation

elimination of undigested material

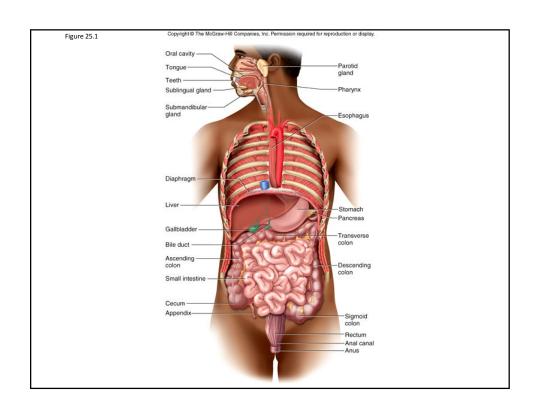
# Stages of Digestion

#### Mechanical digestion

- physical breakdown of food into smaller particles
- teeth and churning action of stomach and intestines

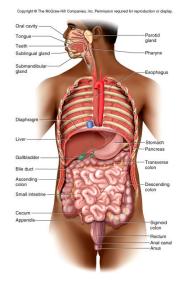
#### Chemical digestion

- series of hydrolysis reactions that break macromolecules into their monomers
- enzymes from saliva, stomach, pancreas and intestines
- results
  - polysaccharides into monosaccharides
  - proteins into amino acids
  - · fats into glycerol and fatty acids



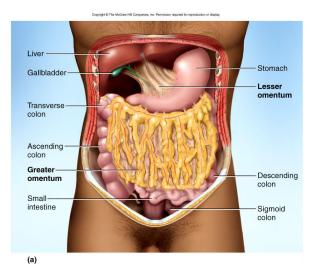
# Subdivisions of Digestive System

- Digestive tract (GI tract)
  - 30 foot long tube extending from mouth to anus
- Accessory organs
  - teeth, tongue, liver, gallbladder, pancreas, salivary glands

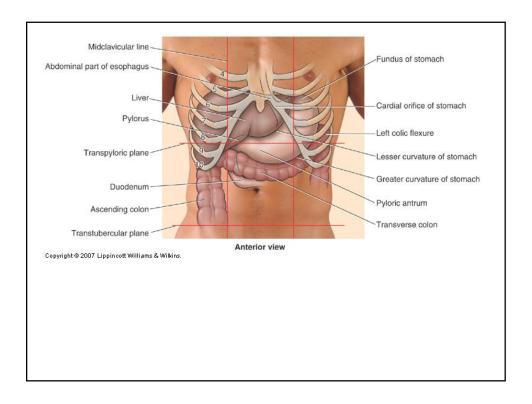


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#### Lesser and Greater Omentum



- · Lesser attaches stomach to liver
- Greater covers small intestines like an apron

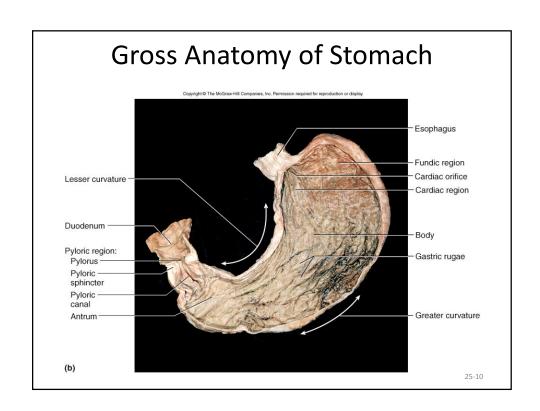


#### Stomach

- Mechanically breaks up food, liquifies food and begins chemical digestion of protein and fat
  - resulting soupy mixture is called chyme
- Does not absorb significant amount of nutrients
  - absorbs aspirin and some lipid-soluble drugs

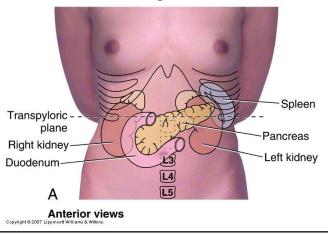
#### **Gross Anatomy of Stomach**

- Muscular sac (internal volume from 50ml to 4L)
  - J shaped organ with lesser and greater curvatures
  - regional differences
    - cardiac region just inside cardiac orifice
    - fundus domed portion superior to esophageal opening
    - · body main portion of organ
    - · pyloric region narrow inferior end
      - antrum and pyloric canal
- Pylorus opening to duodenum
  - thick ring of smooth muscle forms a sphincter



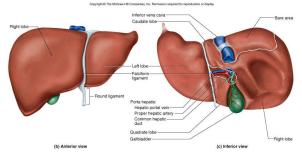
## Liver, Gallbladder and Pancreas

All release important secretions into small intestine to continue digestion



## **Gross Anatomy of Liver**

- 3 lb. organ located inferior to the diaphragm
- 4 lobes right, left, quadrate and caudate
  - $\boldsymbol{-}$  falciform ligament separates left and right
  - round ligament, remnant of umbilical vein
- Gallbladder adheres to ventral surface between right and quadrate lobes



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#### Ducts of Gallbladder, Liver, Pancreas

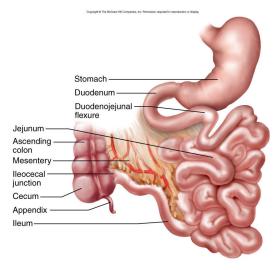
- Bile passes from bile canaliculi between cells to bile ductules to right and left hepatic ducts
- Right and left ducts join outside liver to form common hepatic duct
- Cystic duct from gallbladder joins common hepatic duct to form bile duct
- Duct of pancreas and bile duct combine to form hepatopancreatic ampulla emptying into duodenum at major duodenal papilla
  - sphincter of Oddi (hepatopancreatic sphincter) regulates release of bile and pancreatic juice

25-13

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Nearly all chemical digestion and nutrient absorption occurs in small intestine

Small Intestine

- Duodenum curves around head of pancreas (10 in.)
  - retroperitoneal along with pancreas
  - receives stomach contents, pancreatic juice and bile
  - neutralizes stomach acids, emulsifies fats, pepsin inactivated by pH increase, pancreatic enzymes
- Jejunum next 8 ft. (in upper abdomen)
  - has large tall circular folds; walls are thick, muscular
  - most digestion and nutrient absorption occur here
- Ileum last 12 ft. (in lower abdomen)
  - has peyer's patches clusters of lymphatic nodules
  - ends at ileocecal junction with large intestine

#### Water Balance

- Digestive tract receives about 9 L of water/day
  - .7 L in food, 1.6 L in drink, 6.7 L in secretions
  - 8 L is absorbed by small intestine and 0.8 L by large intestine
- Water is absorbed by osmosis following the absorption of salts and organic nutrients
- Diarrhea occurs when too little water is absorbed
  - feces pass through too quickly if irritated
  - feces contains high concentrations of a solute (lactose)

25-17

# Anatomy of Large Intestine Copyright of the Modrach Hi Compares No. Permission regarded for repoduction or deplay. Right colic flexure Transeverse-colon Resource Haustrum Ascending colon Rectum Anal canal (a) Cecum Anal canal External anal ophrincter

#### **Gross Anatomy of Large Intestine**

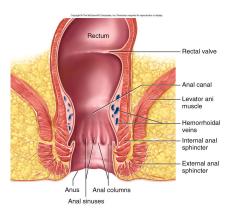
- 5 feet long and 2.5 inches in diameter in cadaver
- Begins as cecum and appendix in lower right corner
- Ascending, transverse and descending colon frame the small intestine
- Sigmoid colon is S-shaped portion leading down into pelvis
- Rectum straight portion ending at anal canal

25-19

## **Absorption and Motility**

- Transit time is 12 to 24 hours
  - reabsorbs water and electrolytes
- Feces consist of water and solids (bacteria, mucus, undigested fiber, fat and sloughed epithelial cells
- Haustral contractions occur every 30 minutes
  - distension of a haustrum stimulates it to contract
- Mass movements occur 1 to 3 times a day
  - triggered by gastrocolic and duodenocolic reflexes
    - · filling of the stomach and duodenum stimulates motility
    - moves residue for several centimeters with each contraction

# **Anatomy of Anal Canal**



- Anal canal is 3 cm total length
- Anal columns are longitudinal ridges separated by mucus secreting anal sinuses
- Hemorrhoids are permanently distended veins