

Table 14-1 Composition of extracellular fluids of representative animals*

	Habitat*	Osmolarity (mosM)	Na ⁺	K ⁺	Ionic concentrations (mM)					
					Ca ²⁺	Mg ²⁺	Cl ⁻	SO ₄ ²⁻	HPO ₄ ²⁻	Urea
Seawater†		1000	460	10	10	53	540	27		
Coelenterata										
<i>Aurelia</i> (jellyfish)	SW		454	10.2	9.7	51.0	554	14.6		
Echinodermata										
<i>Asterias</i> (starfish)	SW		428	9.5	11.7	49.2	487	26.7		
Annelida										
<i>Arenicola</i> (lugworm)	SW		459	10.1	10.0	52.4	537	24.4		
<i>Lumbricus</i> (earthworm)	Ter.		76	4.0	2.9		43			
Mollusca										
<i>Aplysia</i> (sea slug)	SW		492	9.7	13.3	49	543	28.2		
<i>Liligo</i> (squid)	SW		419	20.6	11.3	51.6	522	6.9		
<i>Anodonta</i> (clam)	FW		15.6	0.49	8.4	0.19	11.7	0.73		
Crustacea										
<i>Cambarus</i> (crayfish)	FW		146	3.9	8.1	4.3	139			
<i>Homarus</i> (lobster)	SW		472	10.0	15.6	6.7	470			
Insecta										
<i>Locusta</i>	Ter.		60	12	17	25				
<i>Periplanta</i> (cockroach)	Ter.		161	7.9	4.0	5.6	144			
Cyclostomata										
<i>Eptatretus</i> (hagfish)	SW	1002	554	6.8	8.8	23.4	532	1.7	2.1	3
<i>Lampetra</i> (lamprey)	FW	248	120	3.2	1.9	2.1	96	2.7		0.4

* The osmolarity and composition of seawater vary, and the values given here are not intended to be absolute. The composition of body fluids of osmoconformers will also vary, depending on the composition of the seawater in which they are tested.

† SW = seawater; FW = freshwater; Ter. = terrestrial.

Sources: Schmidt-Nielsen and Mackay, 1972; Prosser, 1973.

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Seawater†		1000	460	10	10	53	540	27		
Chondrichthyes										
<i>Dogfish shark</i>	SW	1075	269	4.3	3.2	1.1	258	1	1.1	376
<i>Carcharhinus</i>	FW		200	8	3	2	180	0.5	4.0	132
Coelacantha										
<i>Latimeria</i>	SW		181	51.3	6.9	28.7	199			355
Teleostei										
<i>Paralichthys</i> (flounder)	SW	337	180	4	3	1	160	0.2		
<i>Carassius</i> (goldfish)	FW	293	142	2	6	3	107			
Amphibia										
<i>Rana esculenta</i> (frog)	FW	210	92	3	2.3	1.6	70			2
<i>Rana cancrivora</i>	FW	290	125	9			98			40
	80% SW	830	252	14			227			350
Reptilia										
<i>Alligator</i>	FW	278	140	3.6	5.1	3.0	111			
Aves										
<i>Anas</i> (duck)	FW	294	138	3.1	2.4		103		1.6	
Mammalia										
<i>Homo sapiens</i>	Ter.		142	4.0	5.0	2.0	104	1	2	
Lab rat	Ter.		145	6.2	3.1	1.6	116			

* The osmolarity and composition of seawater vary, and the values given here are not intended to be absolute. The composition of body fluids of osmoconformers will also vary, depending on the composition of the seawater in which they are tested.

† SW = seawater; FW = freshwater; Ter. = terrestrial.

Sources: Schmidt-Nielsen and Mackay, 1972; Prosser, 1973.

Table 14-2 Electrolyte composition of the human body fluids

Electrolytes	Serum (meq · kg ⁻¹ H ₂ O)	Interstitial fluid (meq · kg ⁻¹ H ₂ O)	Intracellular fluid (muscle) (meq · kg ⁻¹ H ₂ O)
Cations			
Na ⁺	142	145	10
K ⁺	4	4	156
Ca ²⁺	5		3
Mg ²⁺	2		26
Totals	153	149	195
Anions			
Cl ⁻	104	114	2
HCO ₃ ⁻	27	31	8
HPO ₄ ²⁻	2		95
SO ₄ ²⁻	1		20
Organic acids	6		
Proteins	13		55
Totals	153	145	180

Note: Some of the ions contained within cells are not completely dissolved within the cytosol, but may be partially sequestered within cytoplasmic organelles. Thus, the true free Ca²⁺ concentration in the cytosol is typically below the overall value given in the table for intracellular Ca²⁺. Failure of anion and cation totals to agree reflects incomplete tabulation.

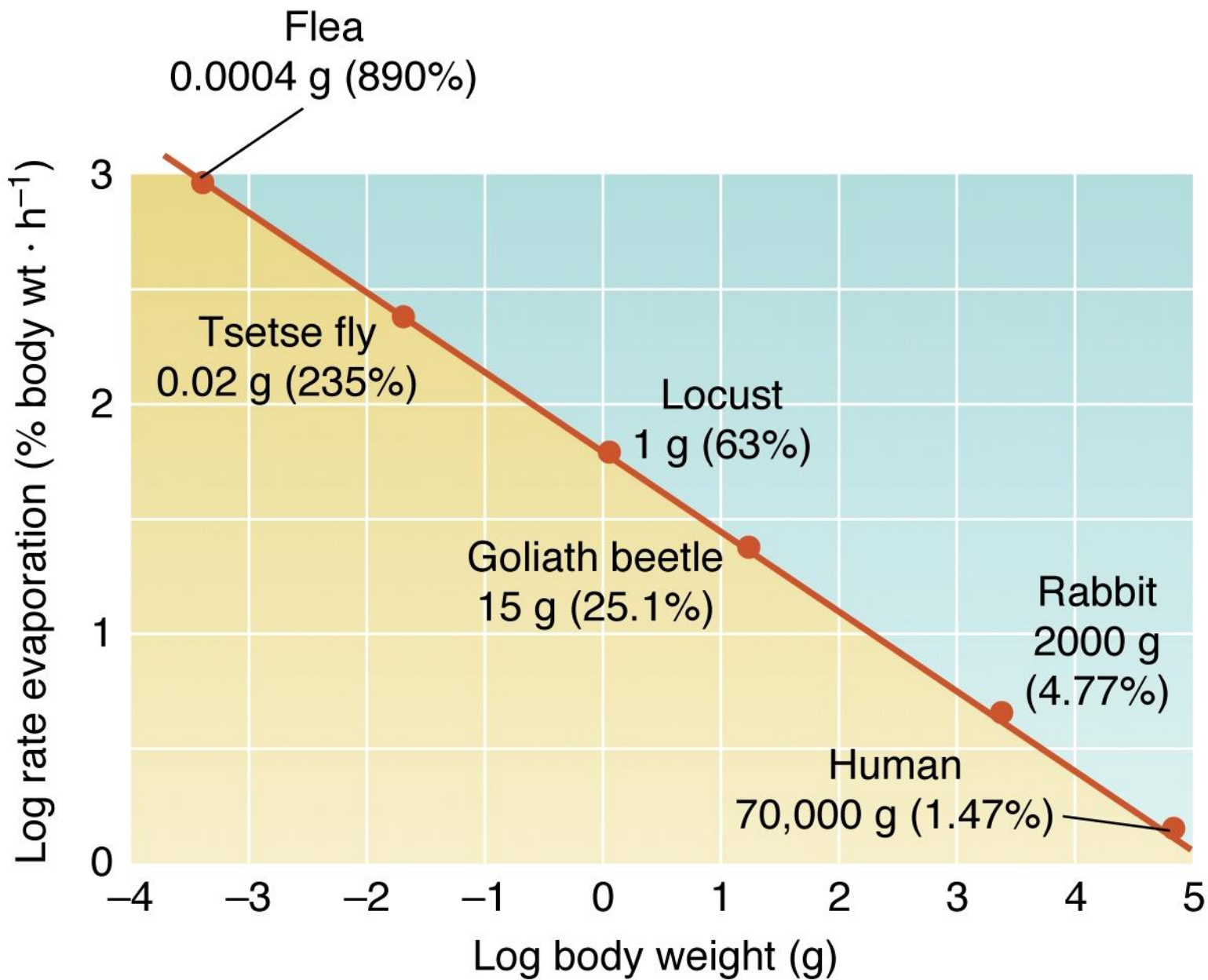


Table 14-3 Evaporative water loss of representative animals under desert conditions

Species	Water loss ($\text{mg} \cdot \text{cm}^{-2} \cdot \text{h}^{-1}$)	Remarks*
Arthropods		
<i>Eleodes armata</i> (beetle)	0.20	30°C; 0% r.h.
<i>Hadrurus arizonensis</i> (scorpion)	0.02	30°C; 0% r.h.
<i>Locusta migratoria</i> (locust)	0.70	30°C; 0% r.h.
Amphibians		
<i>Cyclorana alboguttatus</i> (frog)	4.90	25°C; 100% r.h.
Reptiles		
<i>Gehrydra variegata</i> (gecko)	0.22	30°C; dry air
<i>Uta stansburiana</i> (lizard)	0.10	0°C

* r.h. stands for relative humidity. Where not indicated, relative humidity is not available.

† The cactus mouse and African oryx are desert animals and employ various water-conservation measures. Thus their evaporative water loss is much less than that of humans.

Source: Hadley, 1972.

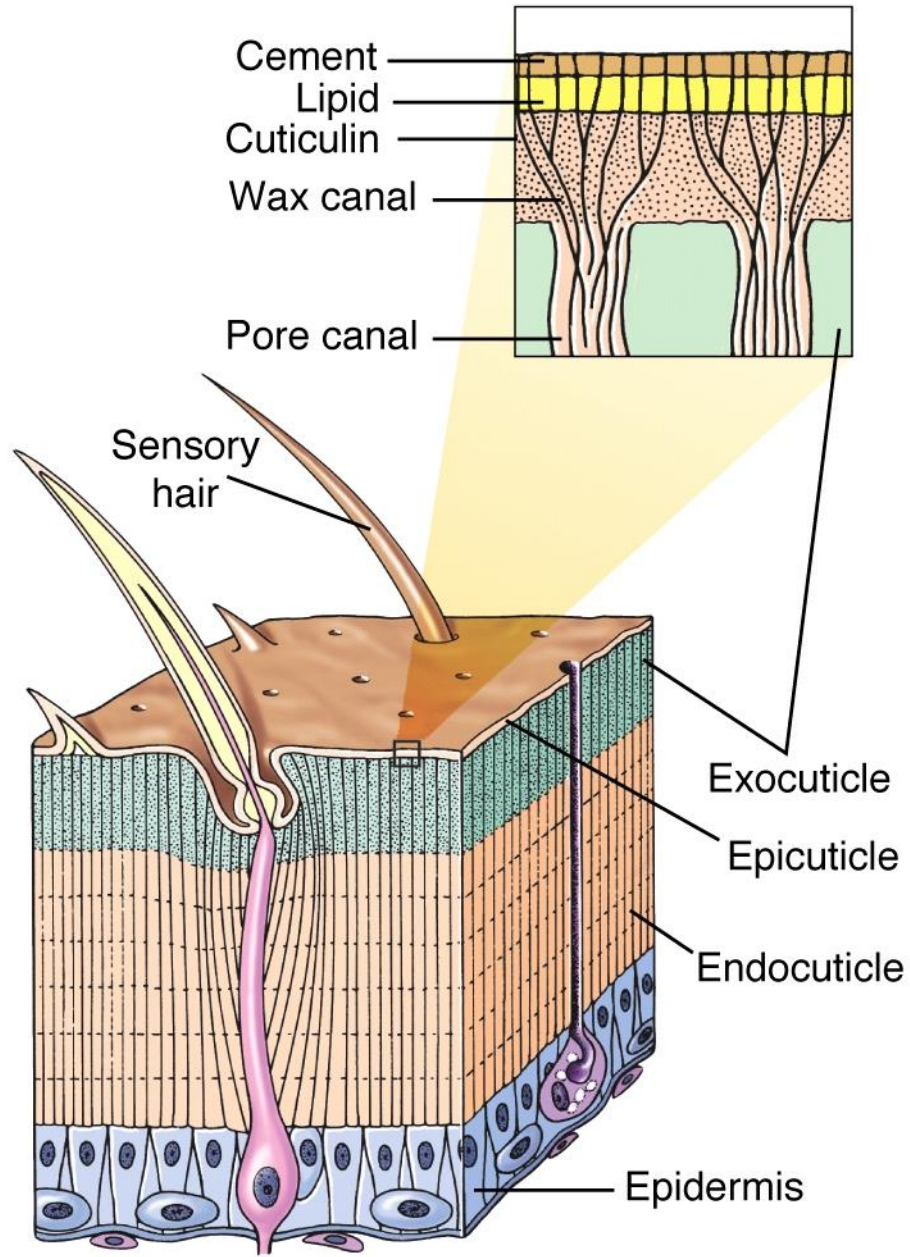
Table 14-3 Evaporative water loss of representative animals under desert conditions

Species	Water loss ($\text{mg} \cdot \text{cm}^{-2} \cdot \text{h}^{-1}$)	Remarks*
Birds		
<i>Amphispiza belli</i> (sparrow)	1.48	30°C
<i>Phalaenpitus nutallii</i> (poorwill)	0.86	30°C
Mammals†		
<i>Peromyscus eremicus</i> (cactus mouse)	0.66	30°C
<i>Oryx beisa</i> (African oryx)	3.24	22°C
<i>Homo sapiens</i>	22.32	70 kg; nude, sitting in sun; 35°C

* r.h. stands for relative humidity. Where not indicated, relative humidity is not available.

† The cactus mouse and African oryx are desert animals and employ various water-conservation measures. Thus their evaporative water loss is much less than that of humans.

Source: Hadley, 1972.



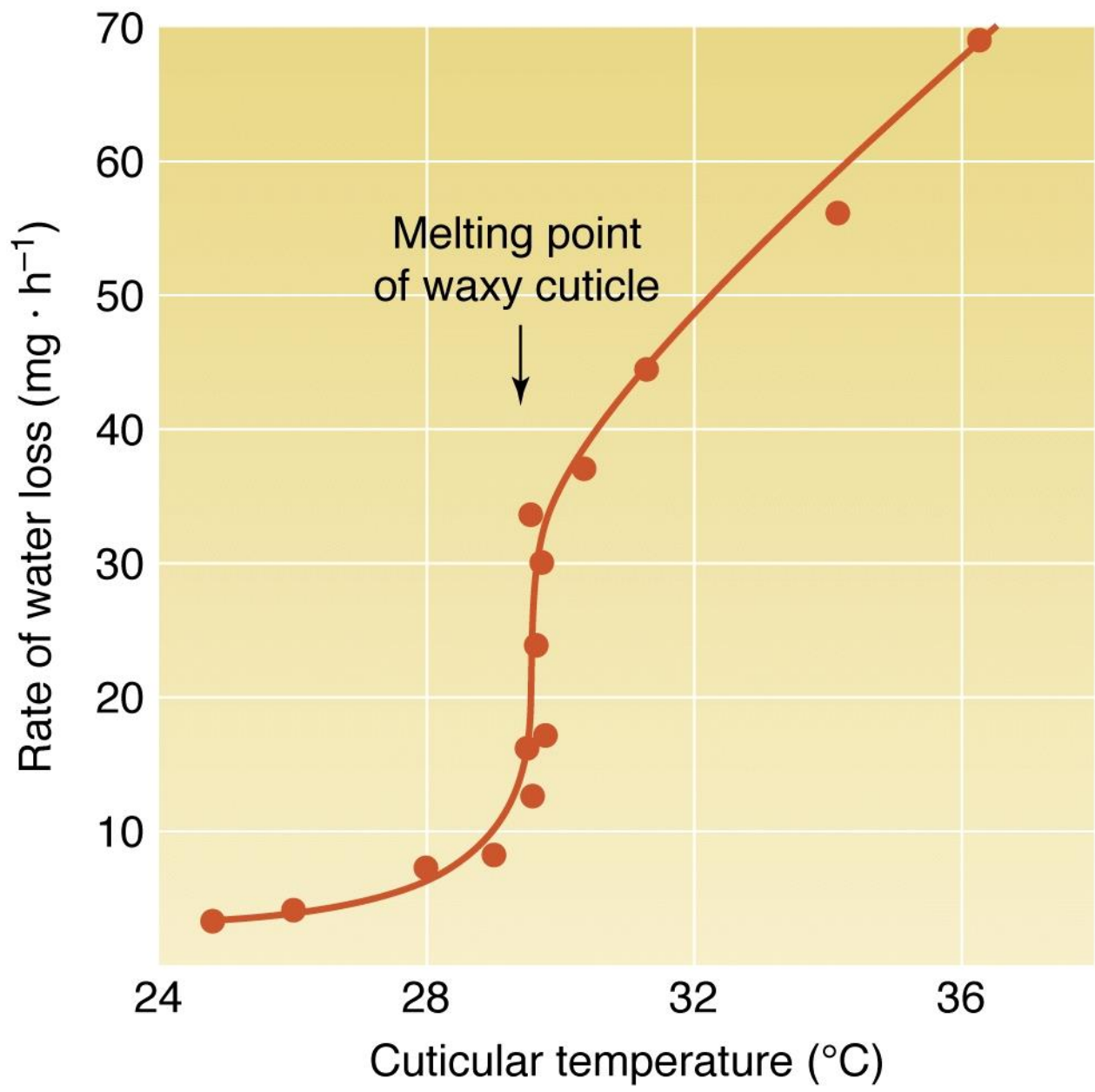
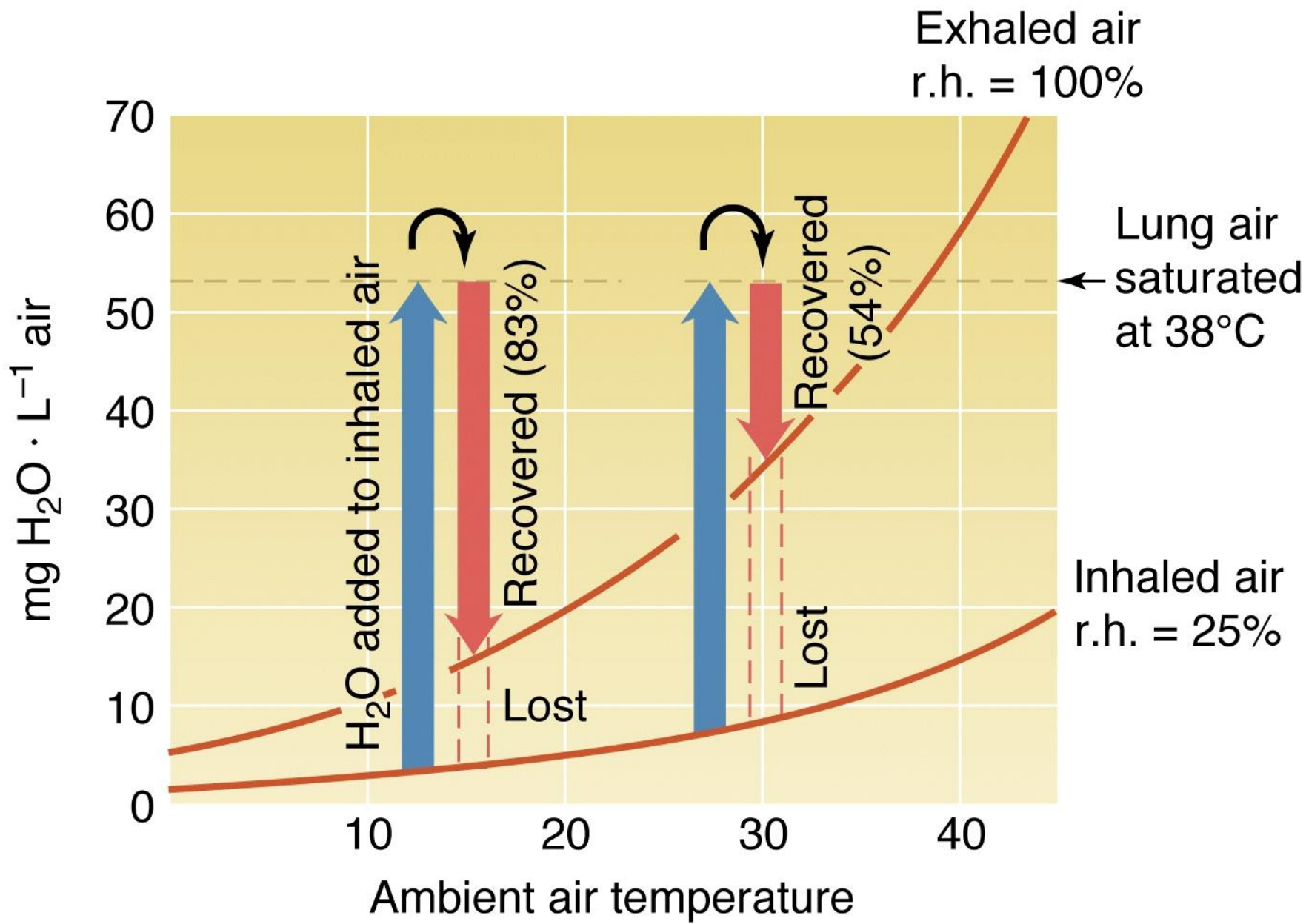


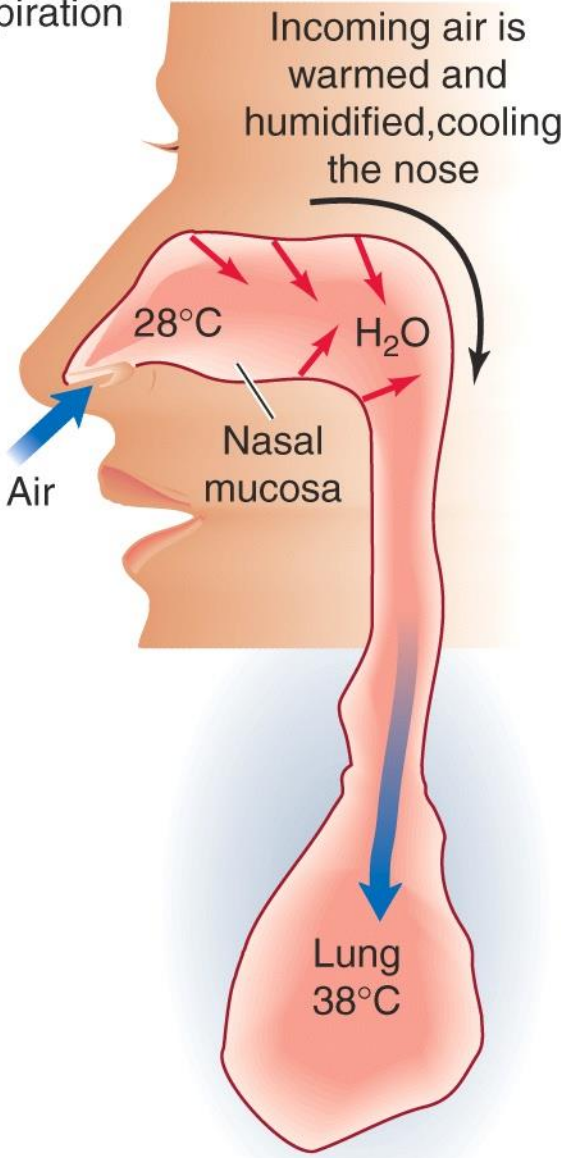
Table 14-4 Production of metabolic water during oxidation of foods

	Food		
	Carbohydrates	Fats	Proteins
Grams of metabolic water per gram of food	0.56	1.07	0.40
Kilojoules expended per gram of food	17.58	39.94	17.54
Grams of metabolic water per kilojoule expended	0.032	0.027	0.023

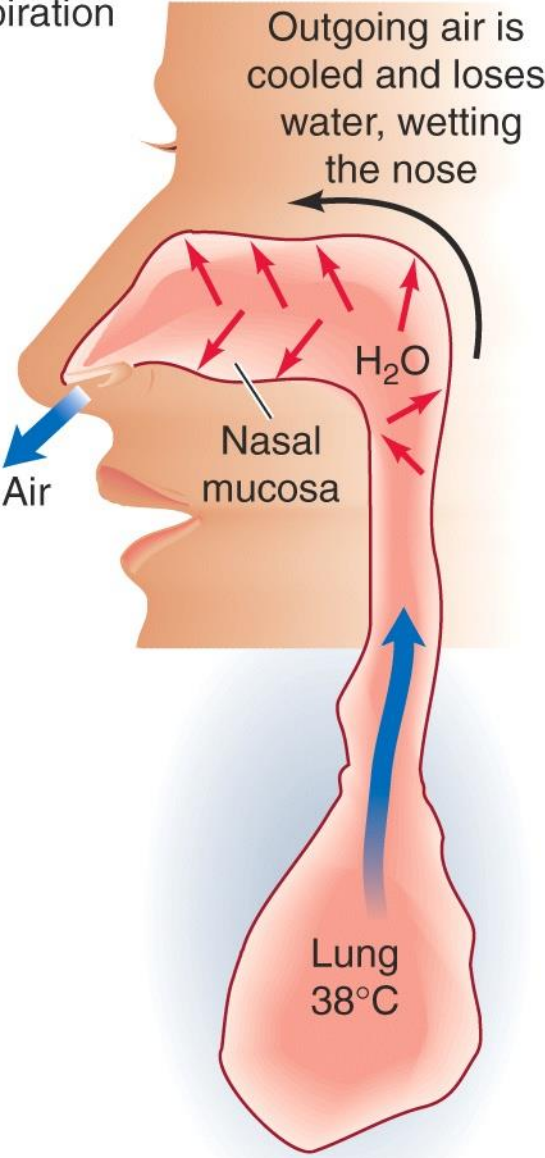
Source: Edney and Nagy, 1976.












(a) Inspiration



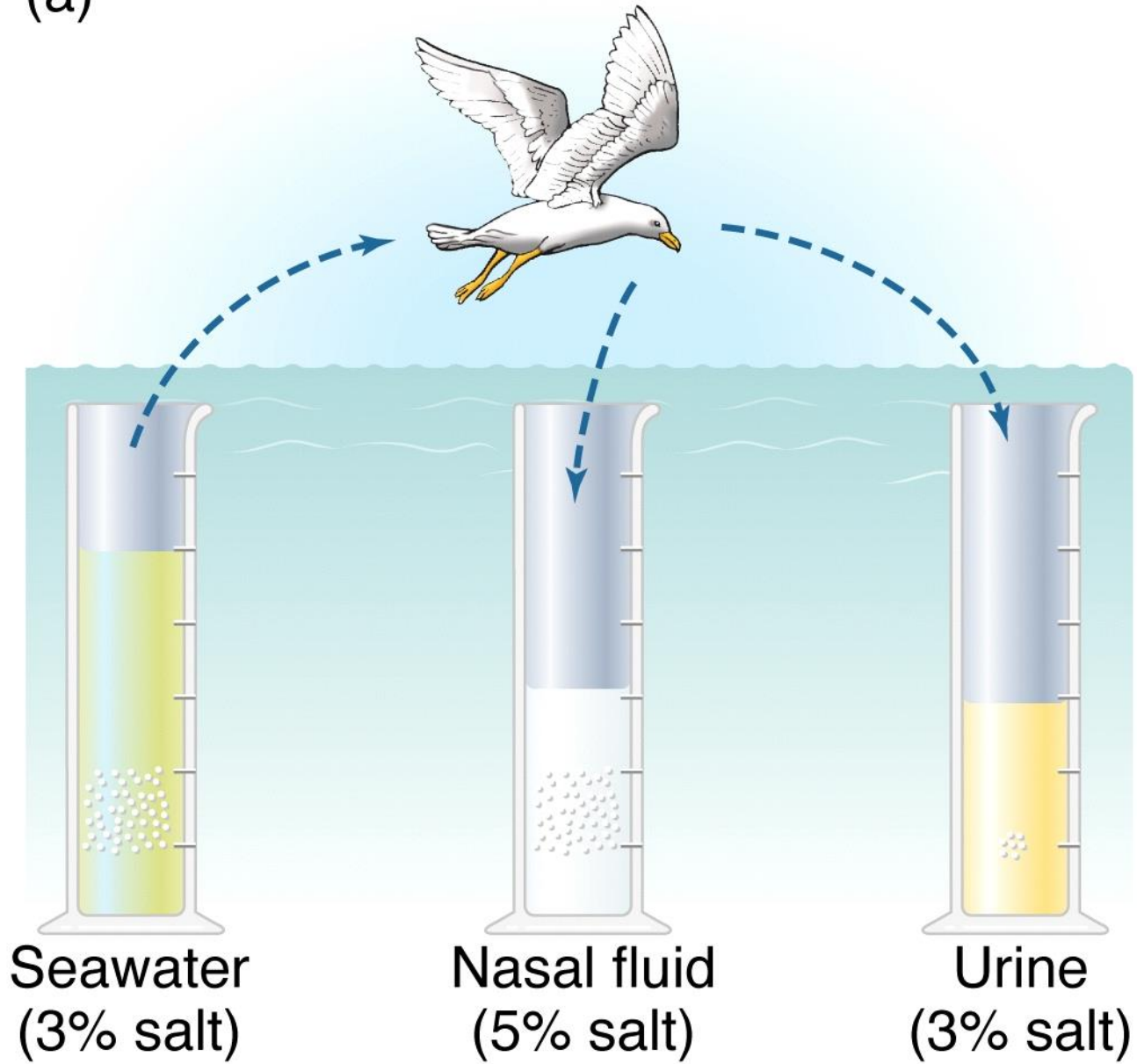
(b) Expiration



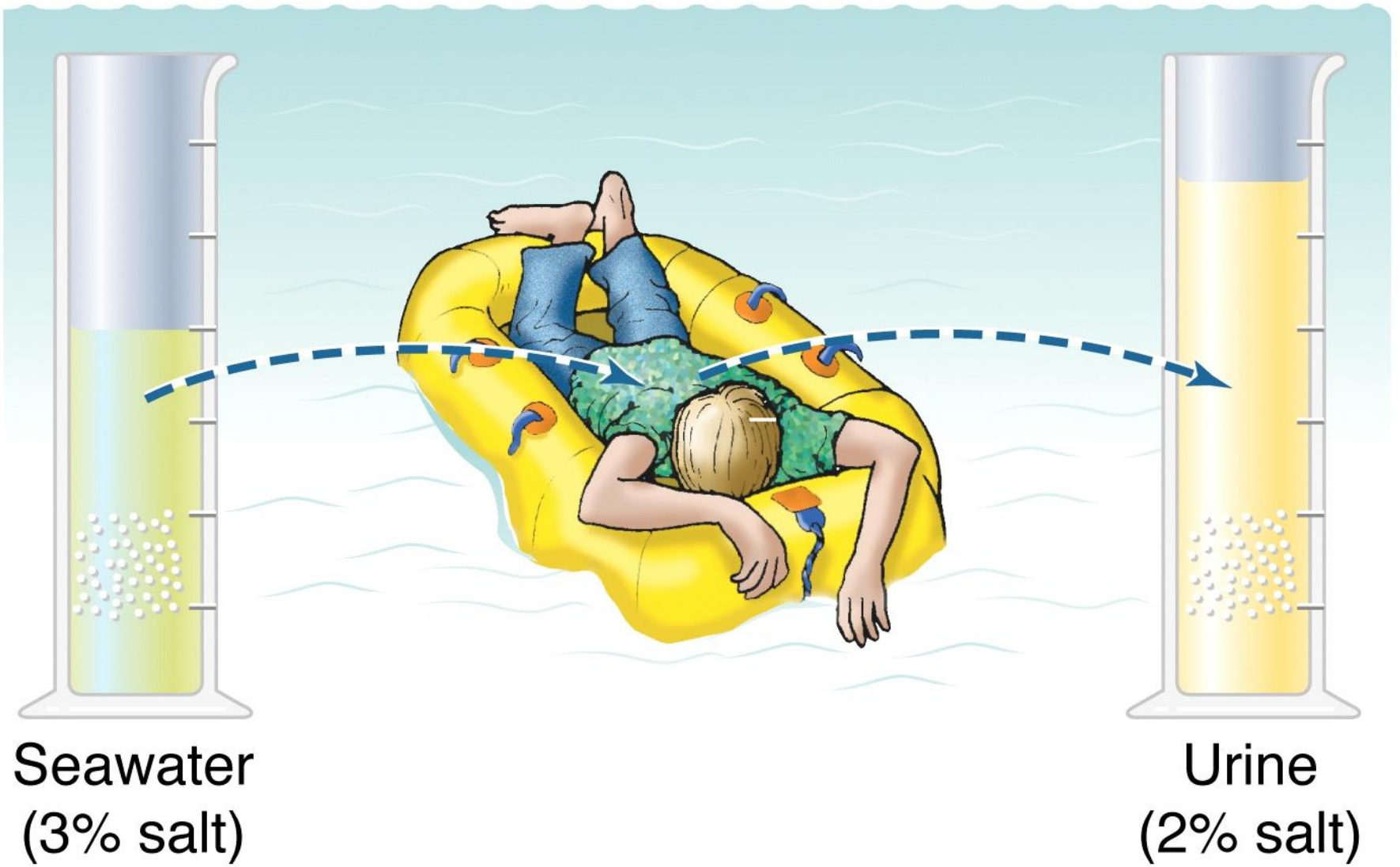
→ = transfer of heat and water

Type of animal	Blood concentration relative to environment	Urine concentration relative to blood	Osmoregulatory mechanisms
Marine elasmobranch	Slightly hyperosmotic	Iso-osmotic	 <p>Does not drink seawater Hyperosmotic NaCl from rectal gland</p>
Marine teleost	Hypo-osmotic	Iso-osmotic	 <p>Drinks seawater Secretes salt from gills</p>
Freshwater teleost	Hyperosmotic	Hypo-osmotic	 <p>Drinks no water Absorbs salt with gills</p>
Amphibian	Hyperosmotic	Hypo-osmotic	 <p>Absorbs salt through skin</p>
Marine reptile	Hypo-osmotic	Iso-osmotic	 <p>Drinks seawater Hyperosmotic salt-gland secretion</p>
Desert mammal	-	Hyperosmotic	 <p>Drinks no water Depends on metabolic water</p>
Marine mammal	Hypo-osmotic	Hyperosmotic	 <p>Does not drink seawater</p>
Marine bird	-	Hyperosmotic	 <p>Drinks seawater Hyperosmotic salt-gland secretion</p>
Terrestrial bird	-	Hyperosmotic	 <p>Drinks freshwater</p>

(a)



(b)



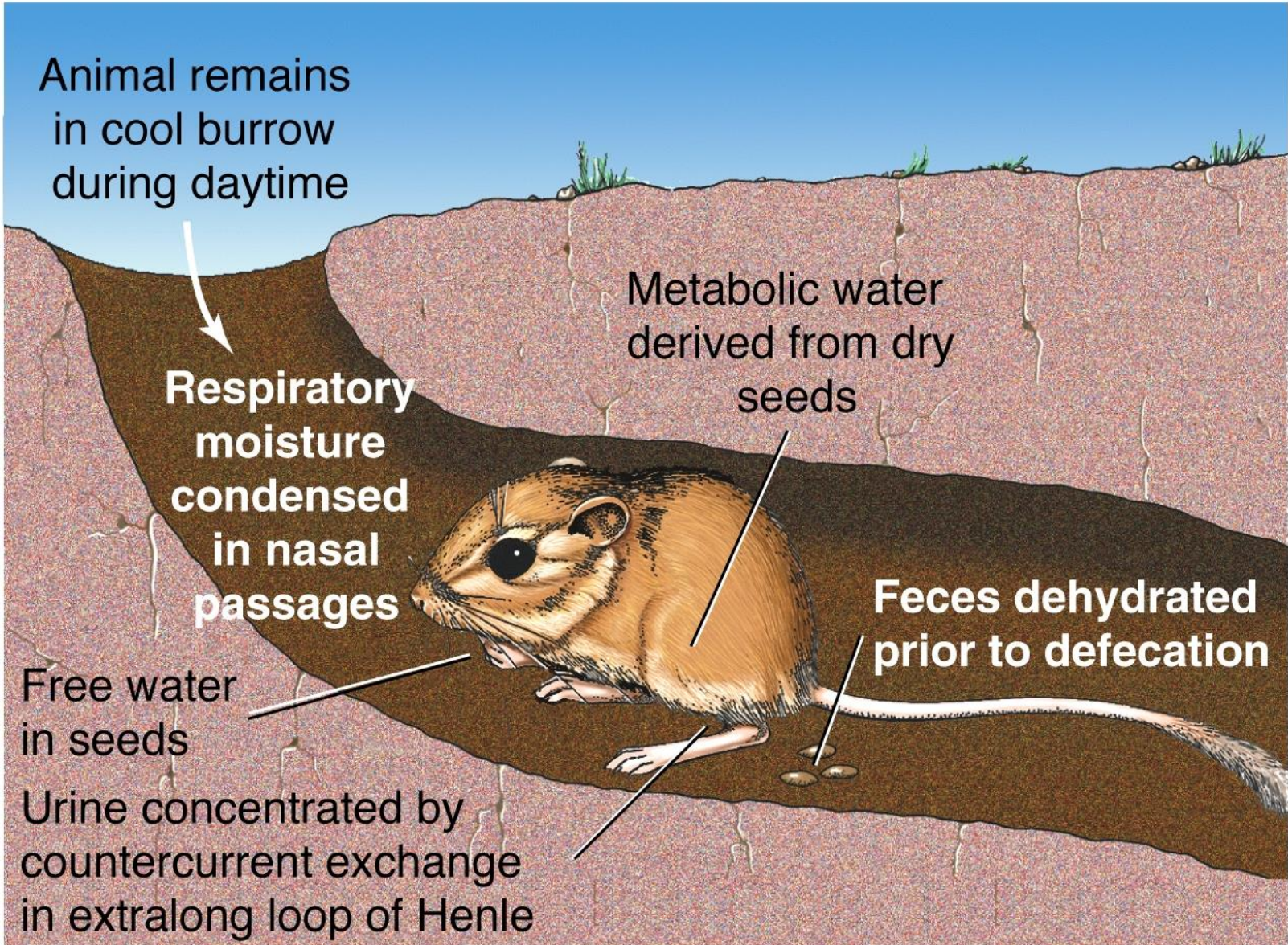
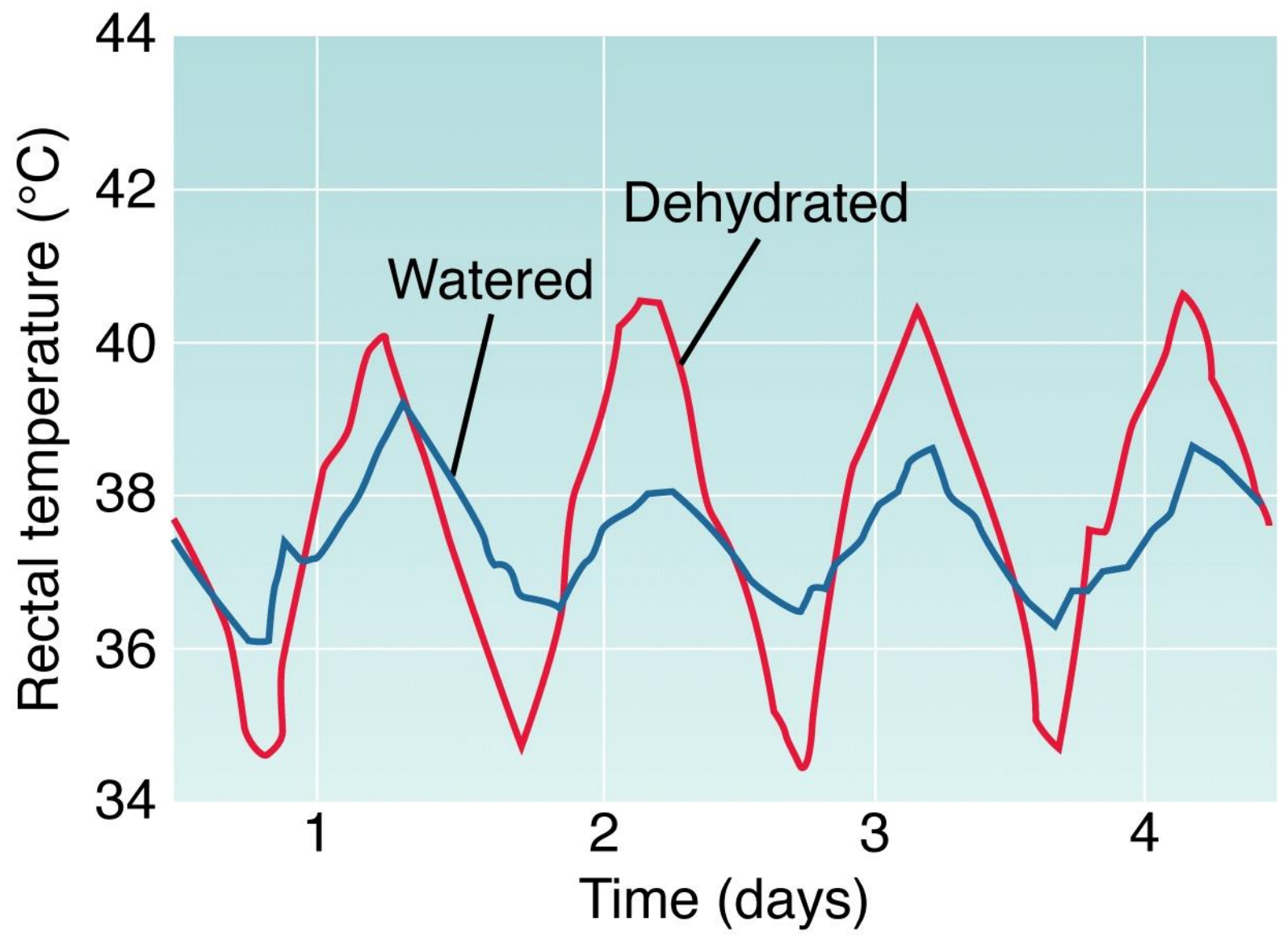


Table 14-5 Sources of water gain and loss by the kangaroo rat

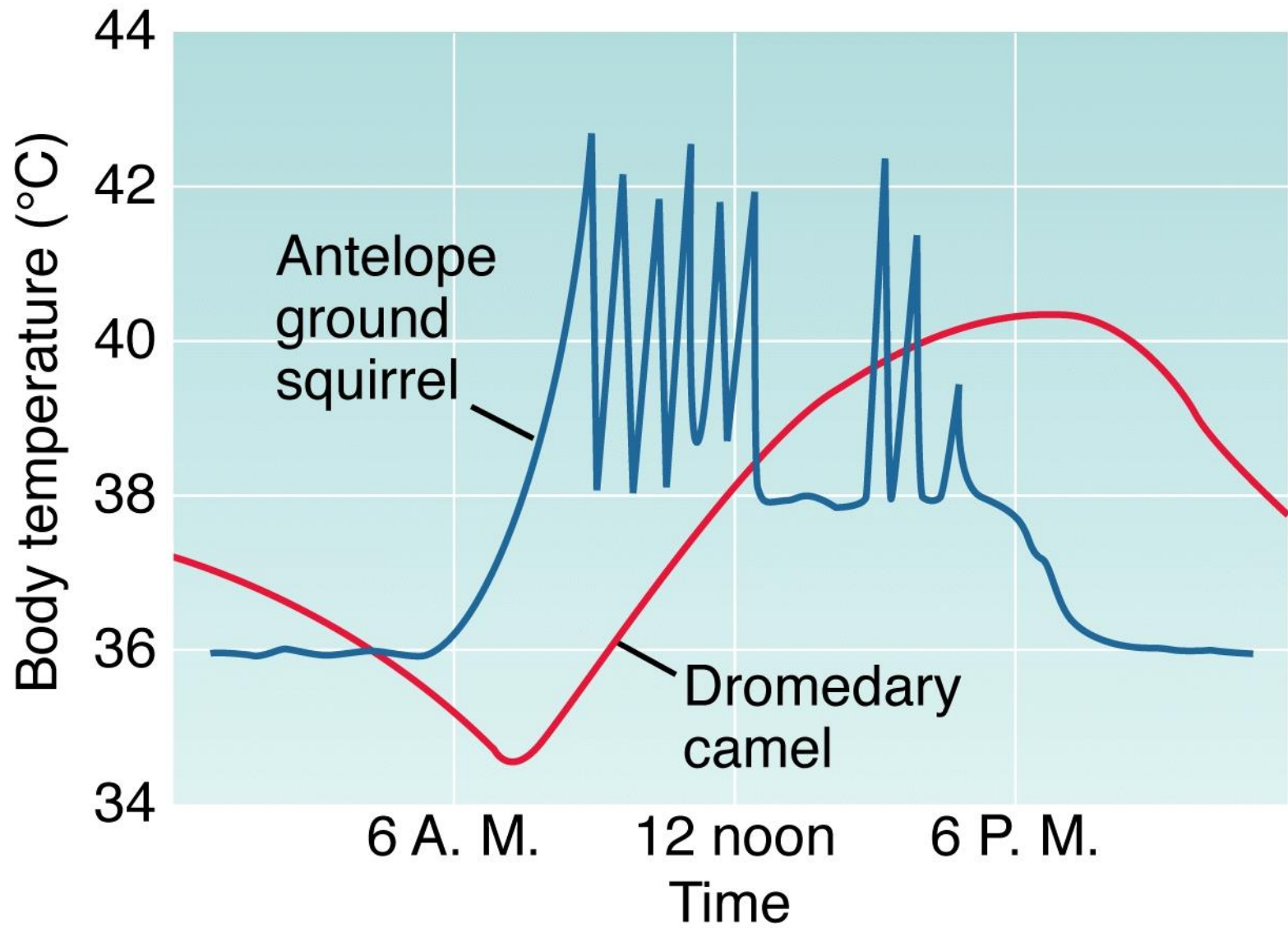
Gains		Losses	
Metabolic water	90%	Evaporation and perspiration	70%
Free water in “dry” food	10%	Urine	25%
Drinking	<u>0%</u>	Feces	<u>5%</u>
	100%		100%

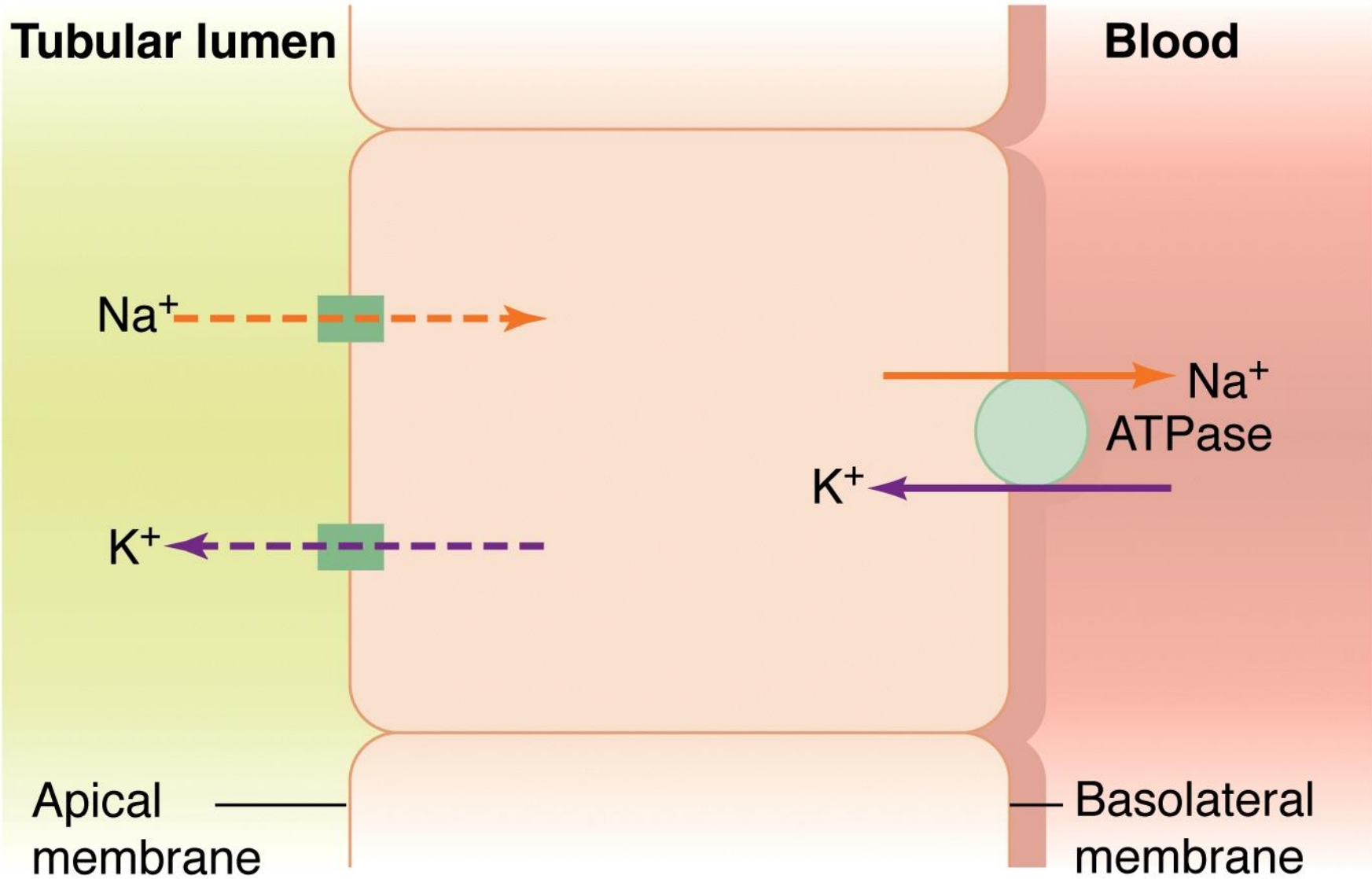
Source: Schmidt-Nielsen, 1972.

(a)

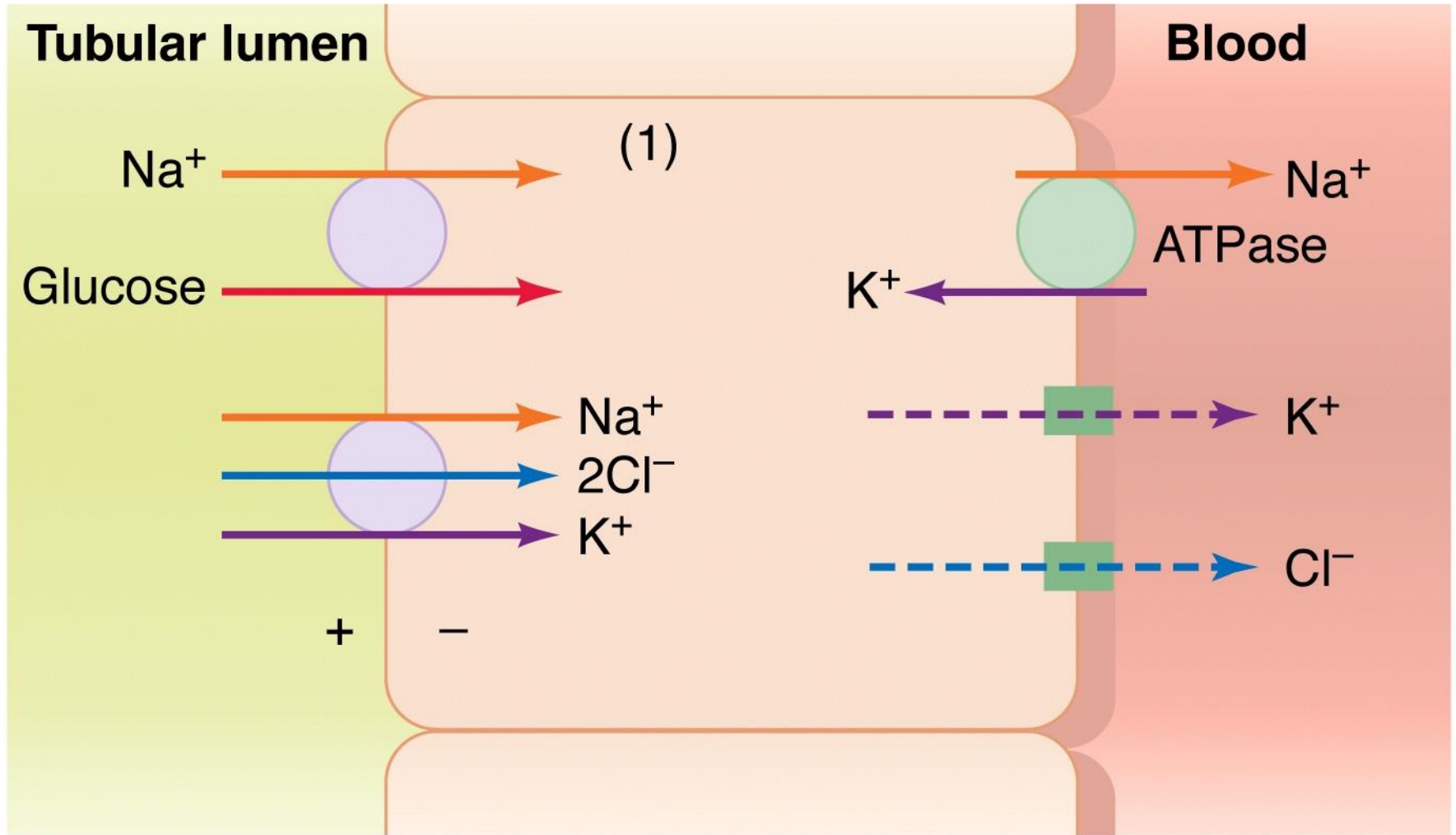


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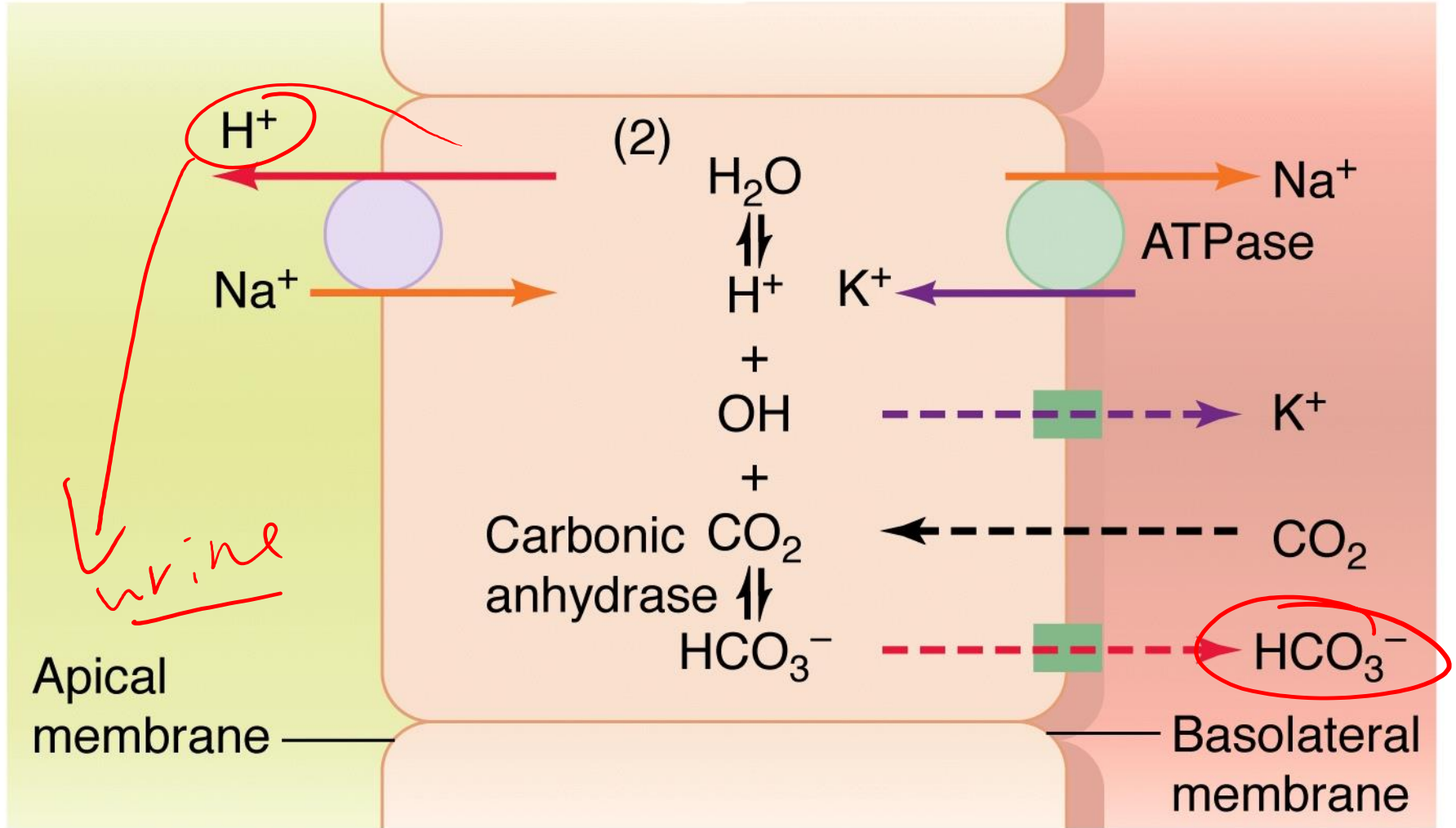


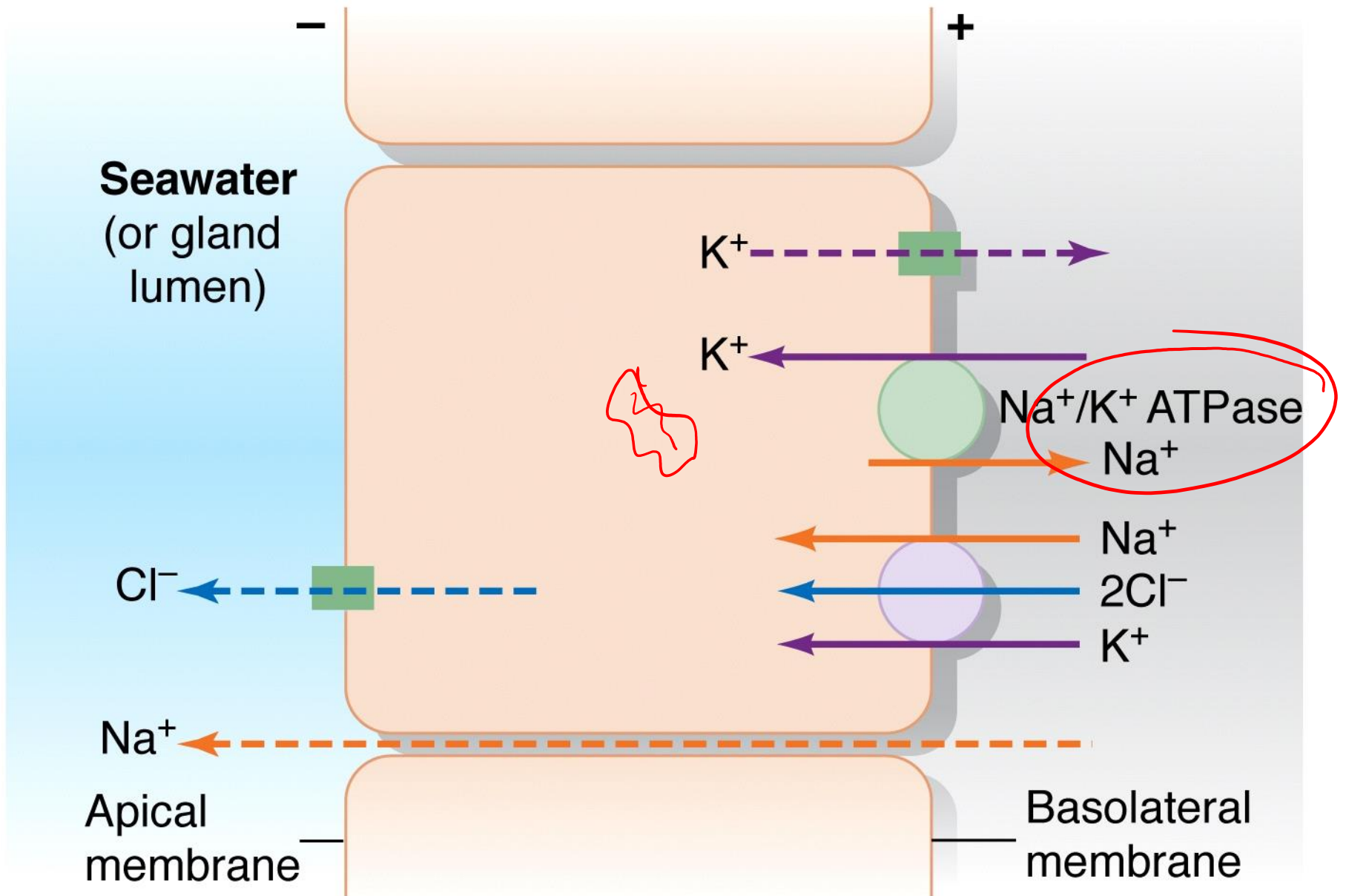


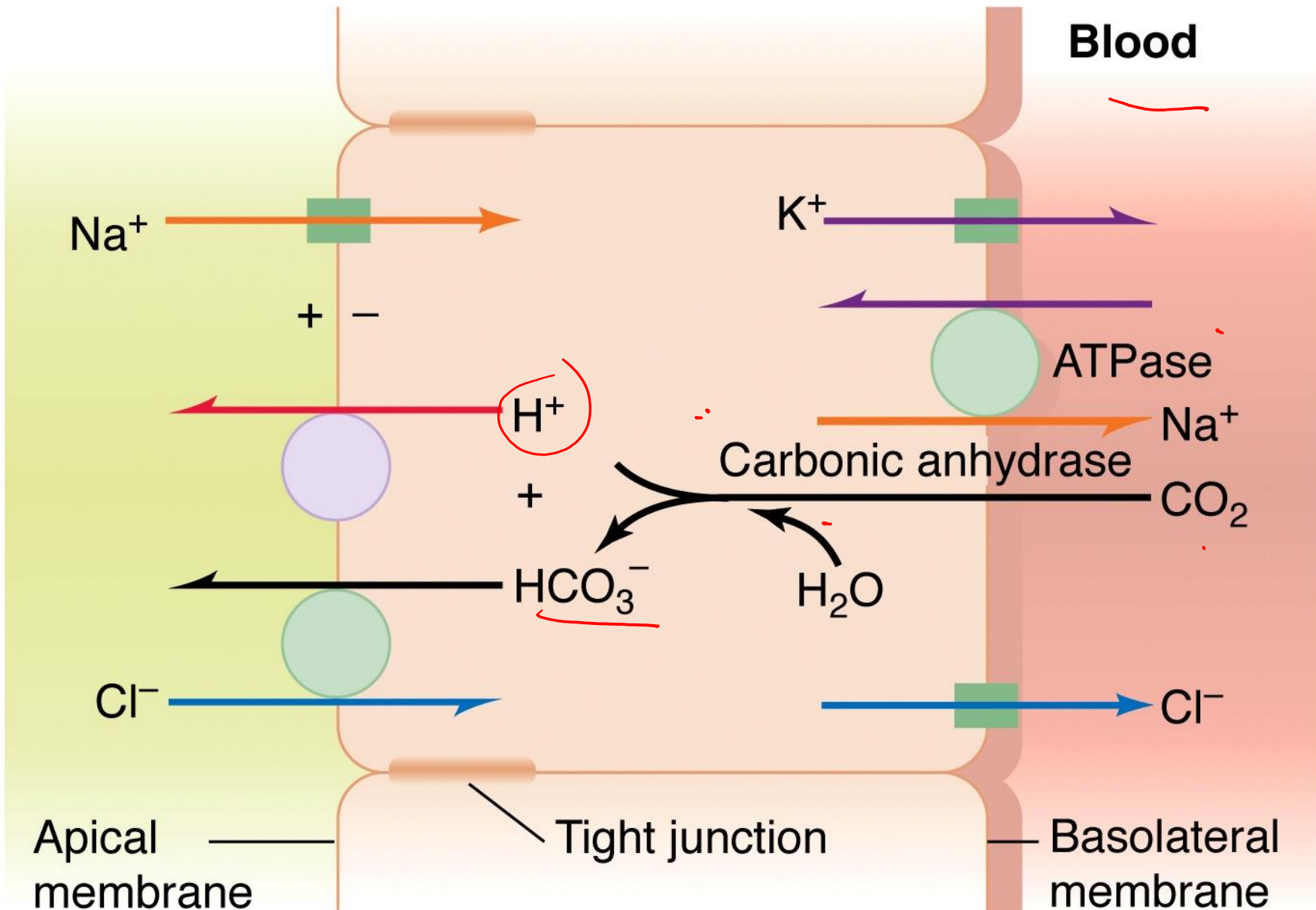
(a)

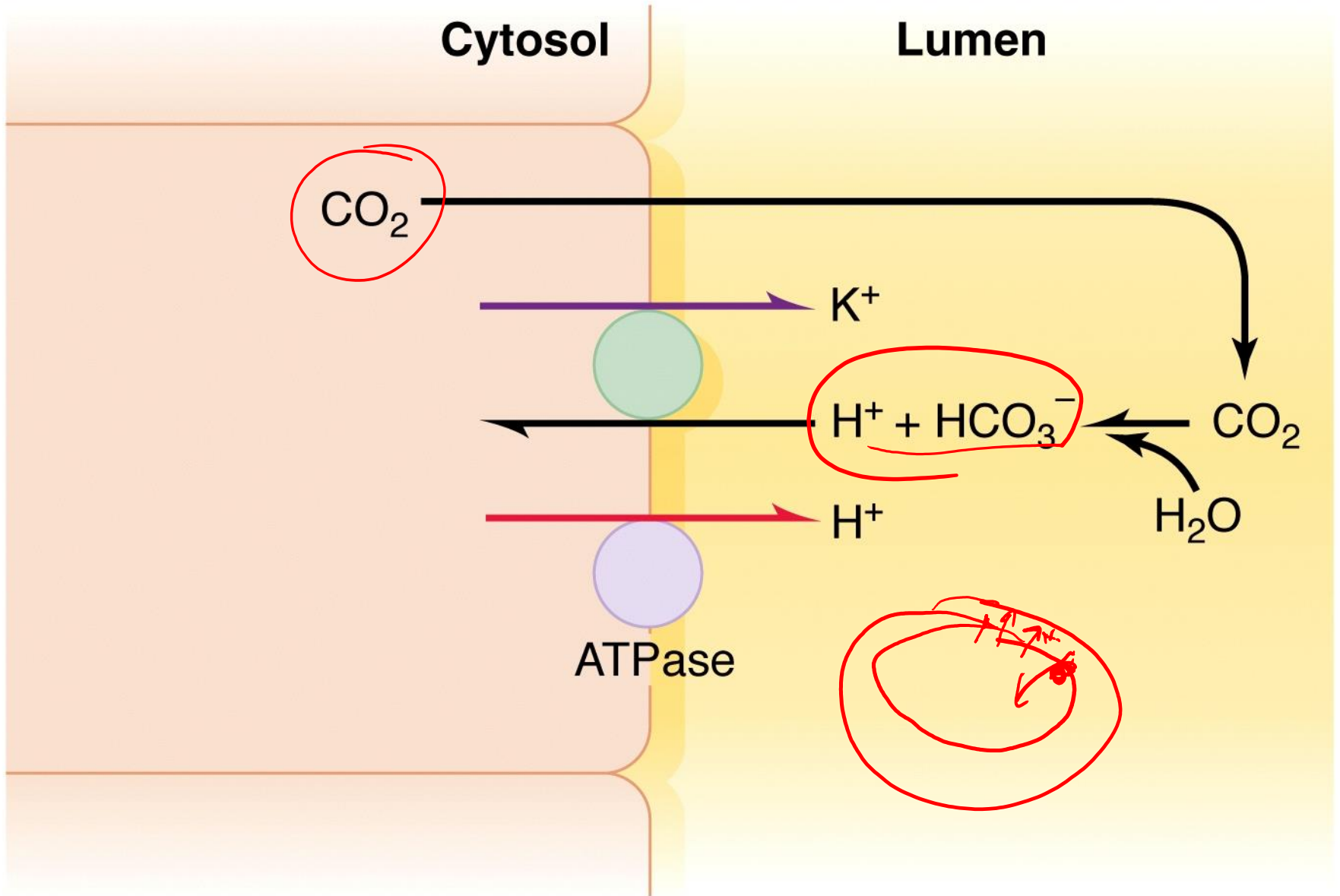


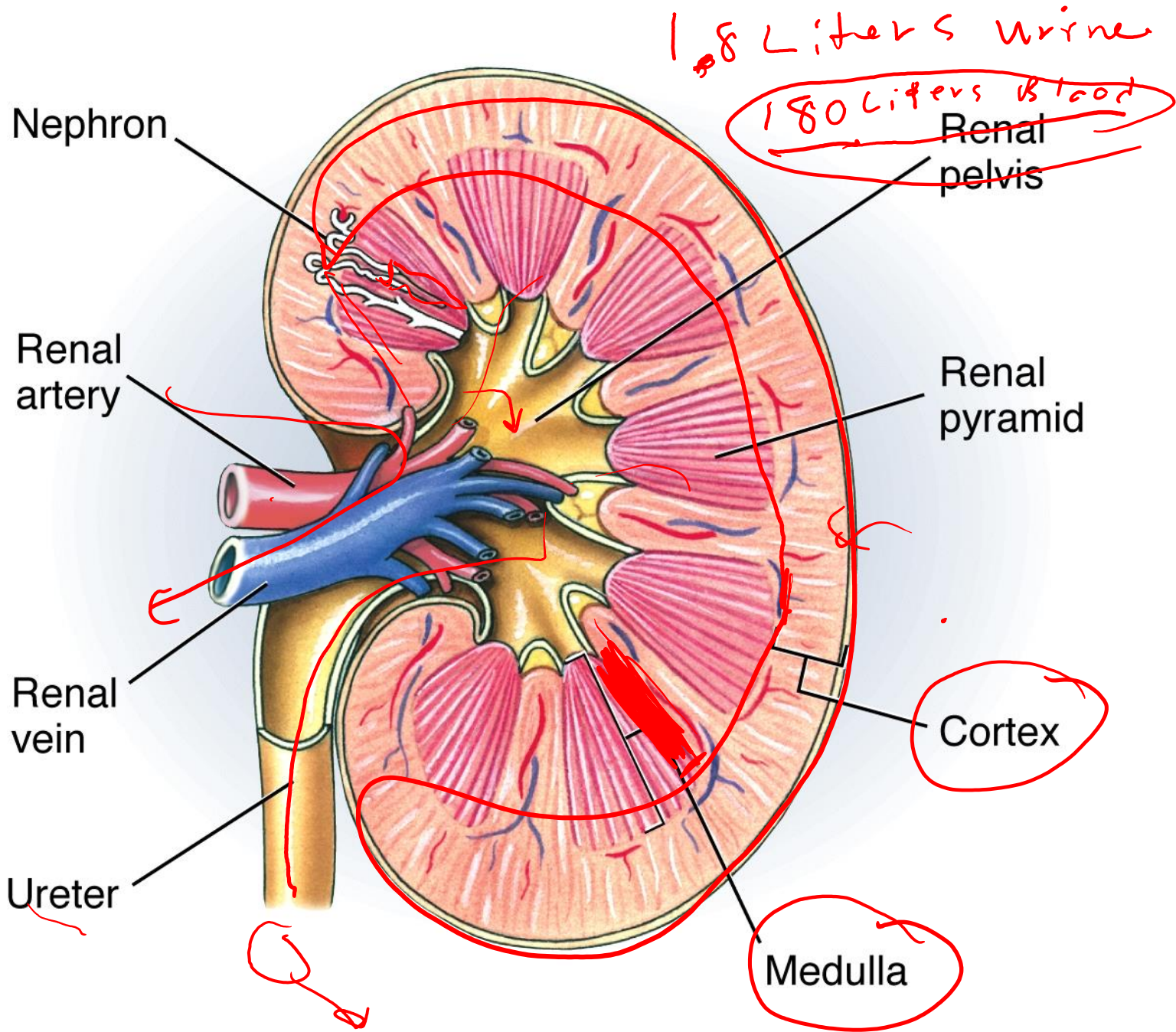
(b)



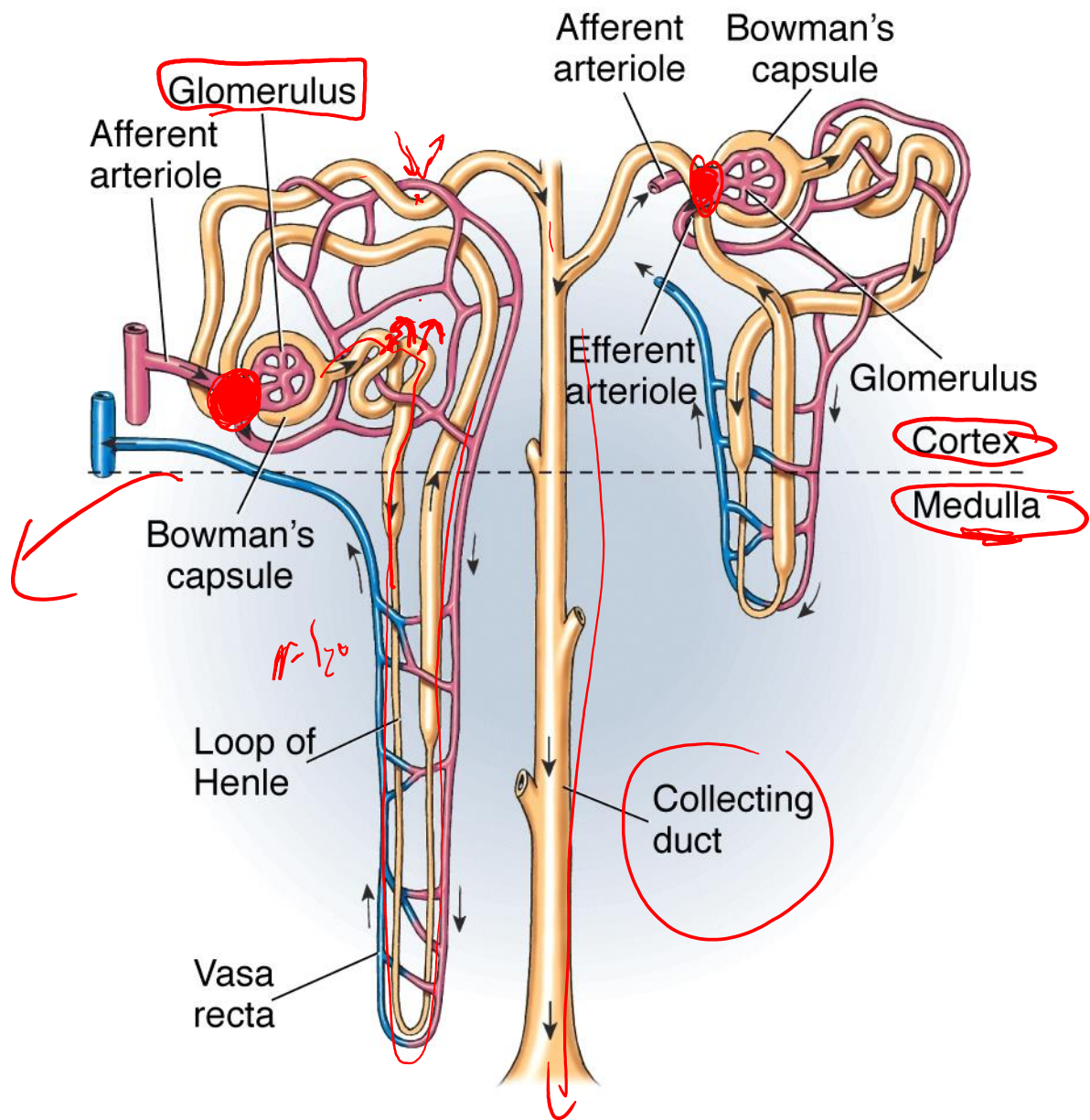


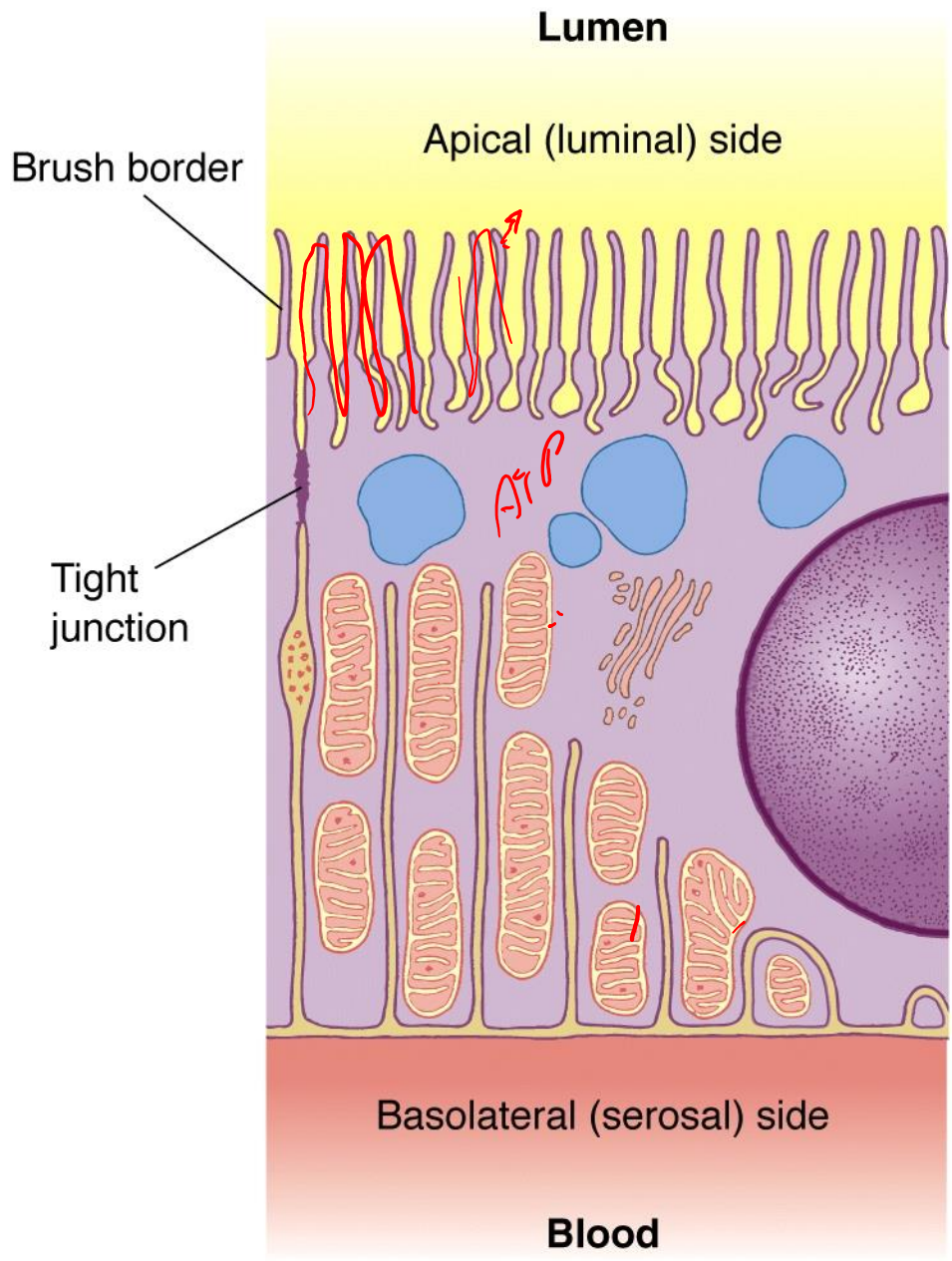




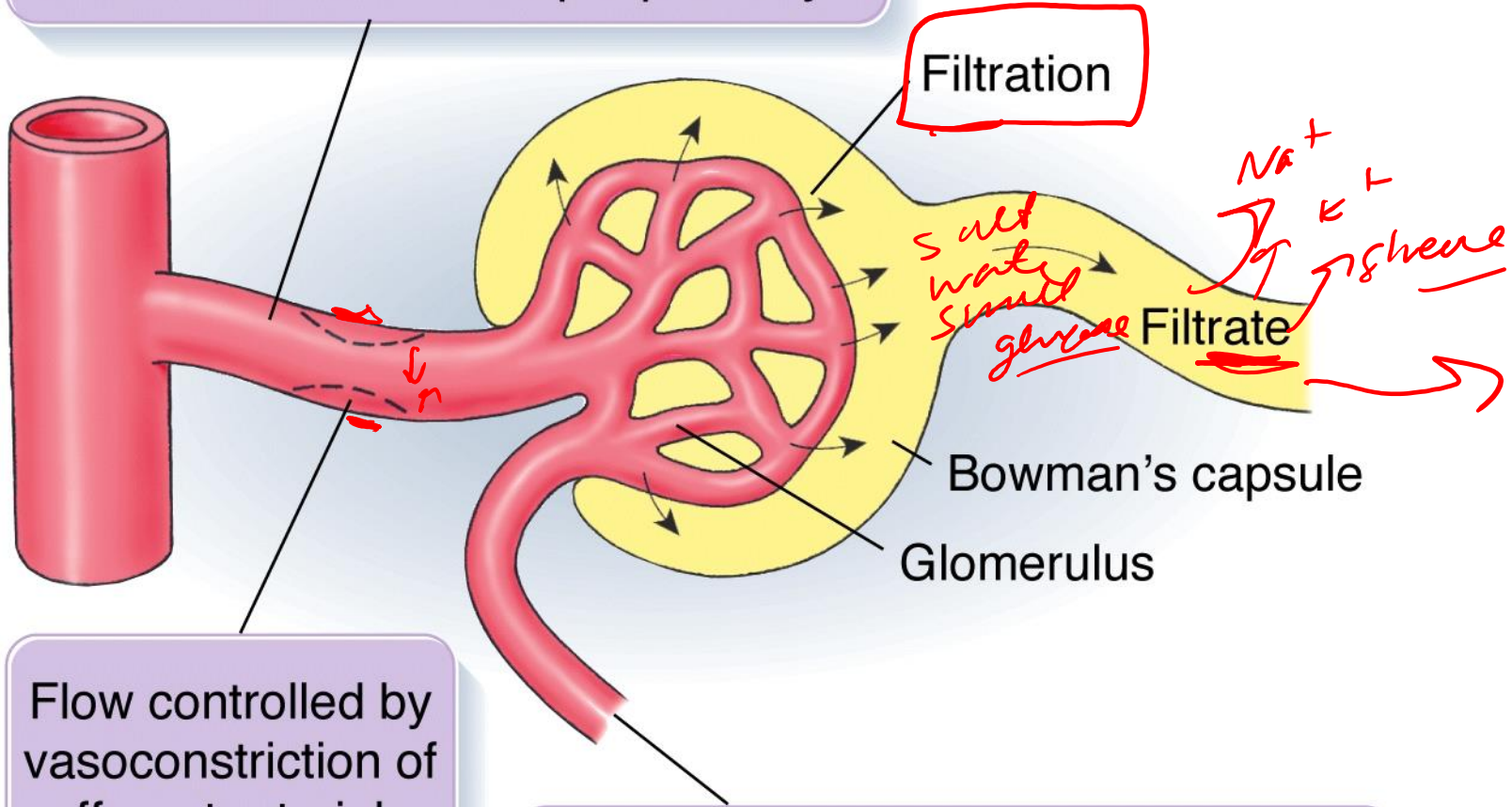


(a) Juxtamedullary nephron (b) Cortical nephron



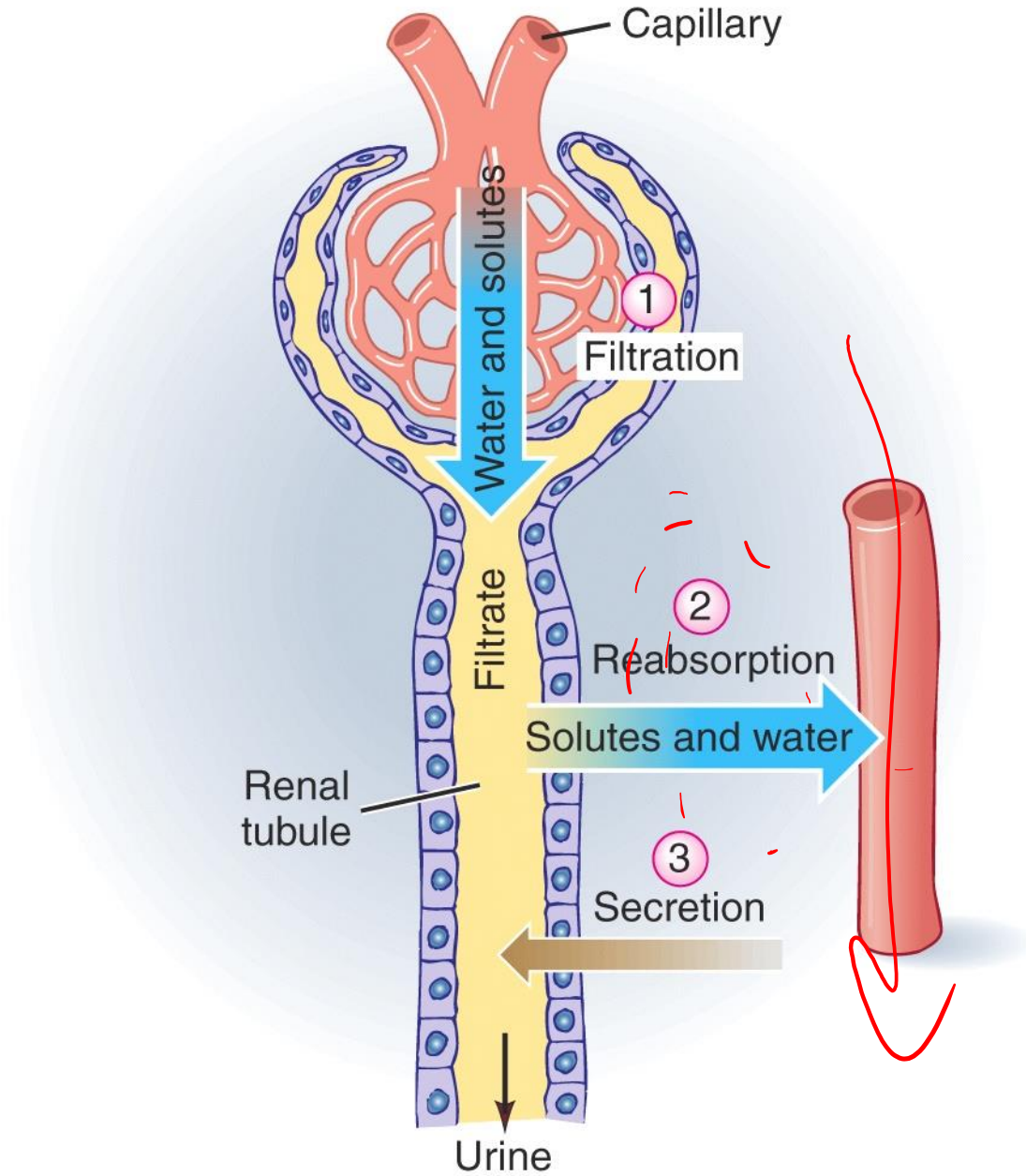


Short, wide afferent arteriole = Low-resistance input pathway



Flow controlled by vasoconstriction of afferent arteriole

Efferent arteriole plus vasa recta = High-resistance outflow pathway



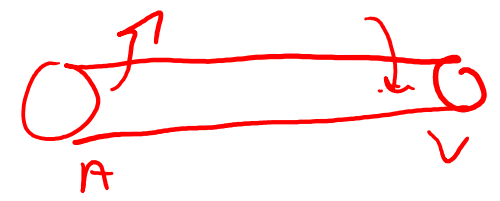
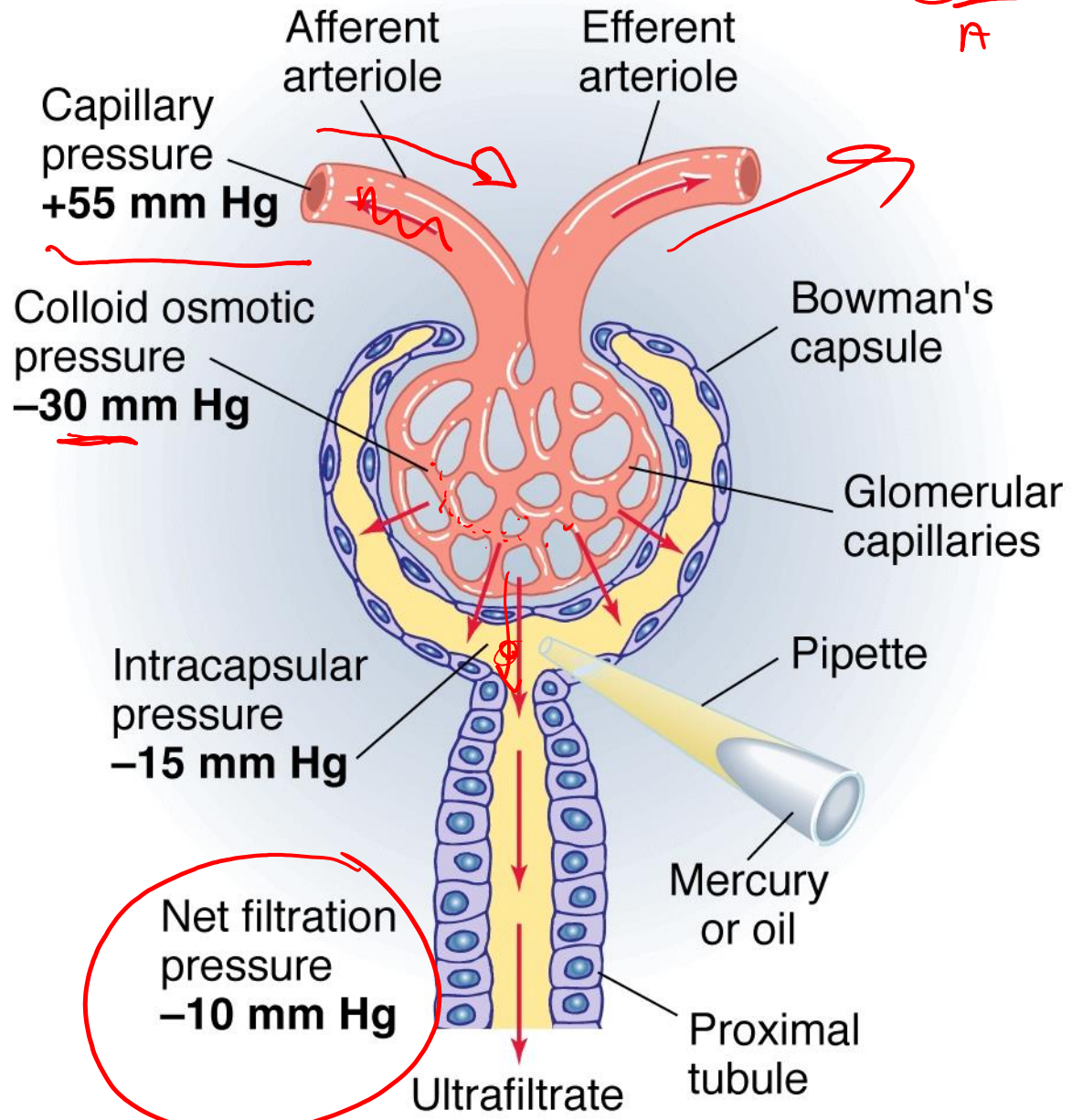


Table 14-7 Balance sheet of pressures
(in mm Hg) involved
in glomerular ultrafiltration

	Salamander	Human
Glomerular capillary pressure	17.7	55
Intracapsular pressure	<u>- 1.5</u>	<u>- 15</u>
Net hydrostatic pressure	16.2	40
Colloid osmotic pressure	<u>- 10.4</u>	<u>- 30</u>
Net filtration pressure	5.8	10

Source: Pitts, 1968; Brenner et al., 1971.

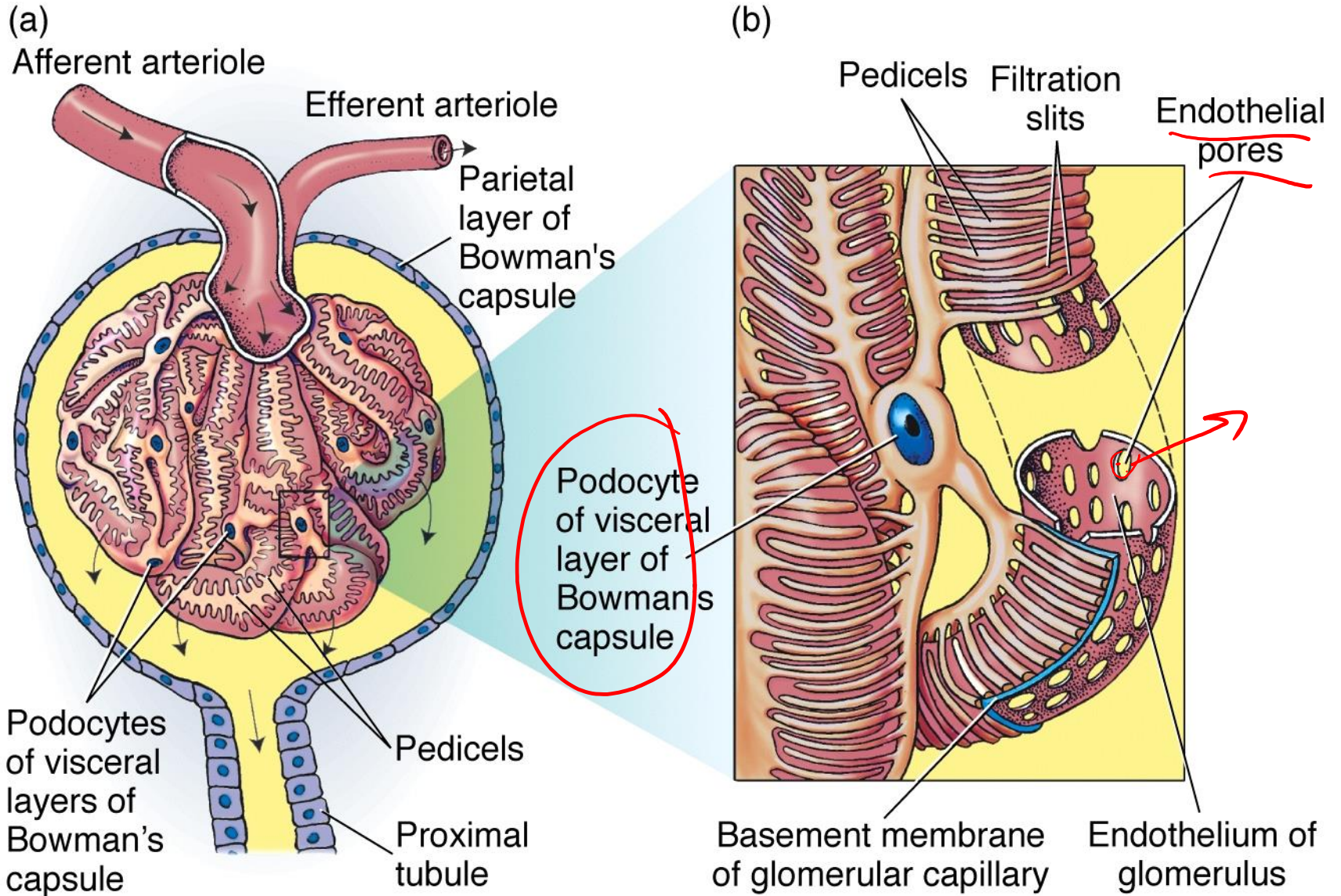




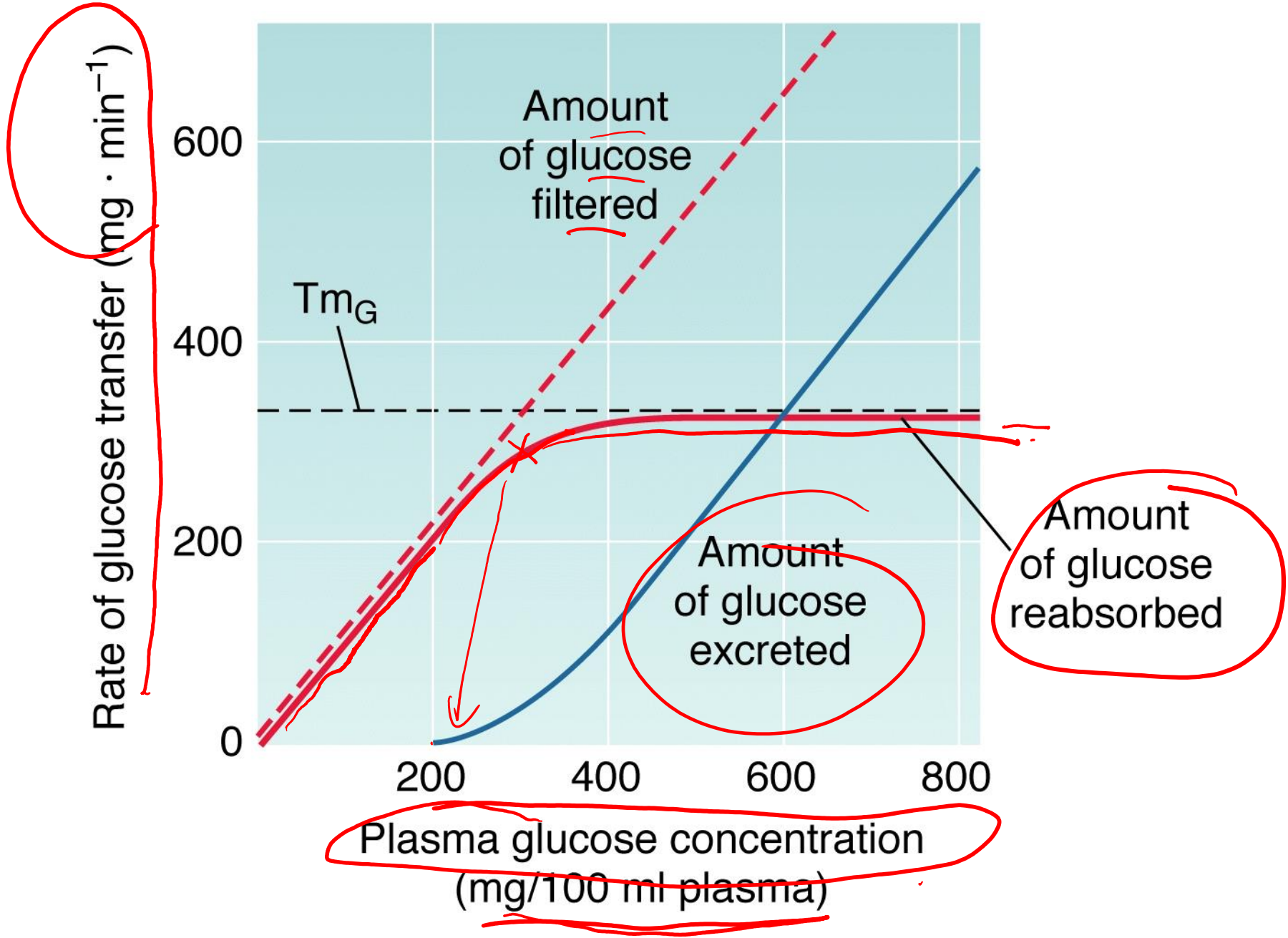


Table 14-8 Relation between the molecular size of a substance and the ratio of its concentration in the filtrate appearing in Bowman's capsule to its concentration in the plasma [filtrate]/[filtrand]

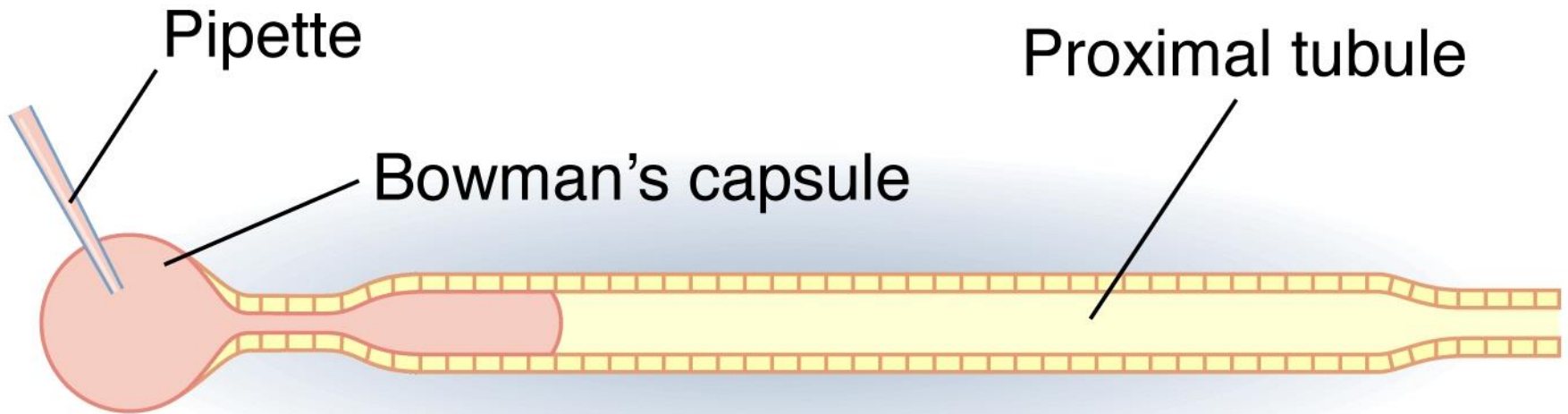
Substance	Mol. wt.	Radius from diffusion coefficient (nm)	Dimensions from X-ray diffraction (nm)	$\frac{[\text{filtrate}]}{[\text{filtrand}]}$
Water	18	0.11		1.0
Urea	62	0.16		1.0
Glucose	180	0.36		1.0
Sucrose	342	0.44		1.0
Insulin	5500	1.48	 ± 8	0.98
Myoglobin	17,000	1.95	 22	0.75
Egg albumin	43,500	2.85	 32	0.22
Hemoglobin	68,000	3.25		0.03
Serum albumin	69,000	3.55	 36	<0.01

Source: Pitts, 1968.



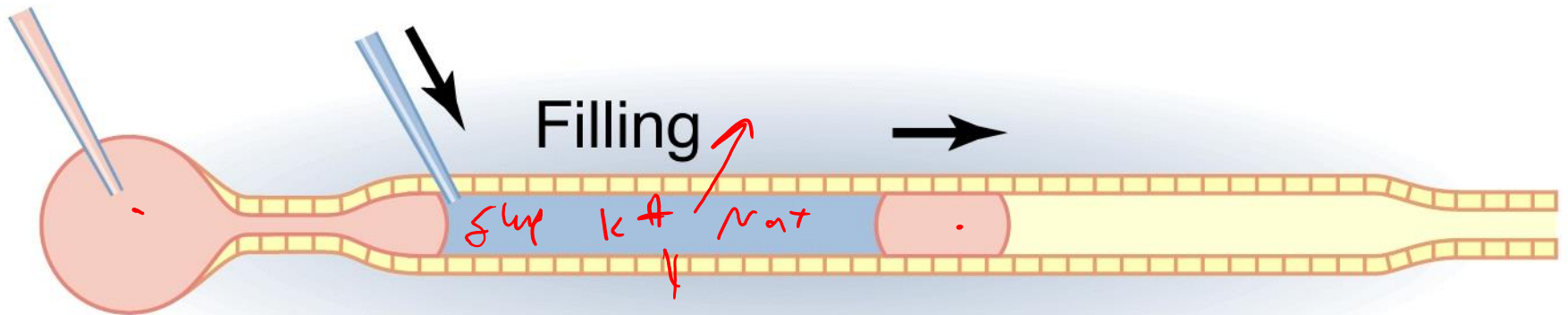
1

Micropipette is inserted and oil is injected until it enters proximal tubule.



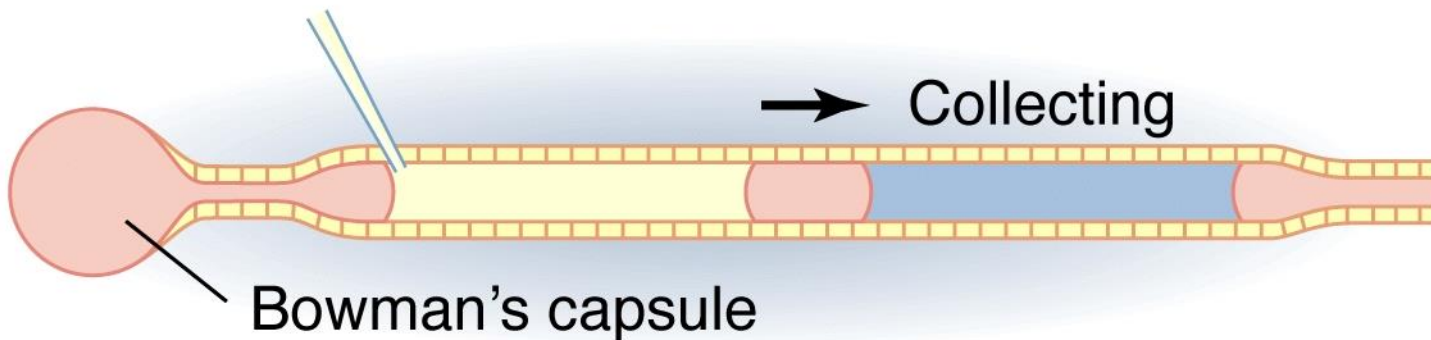
2

Perfusion fluid is injected in oil column, forcing oil droplet forward to end of tubule.

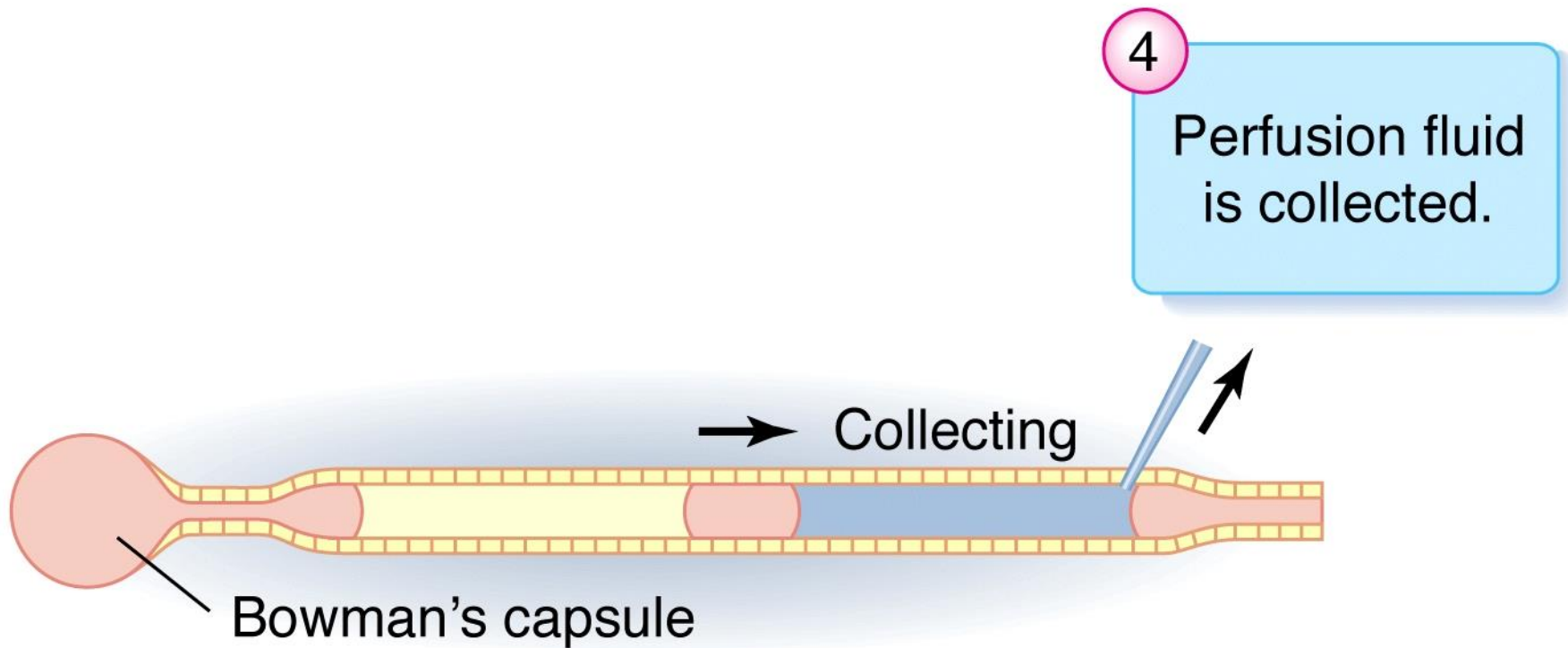


3

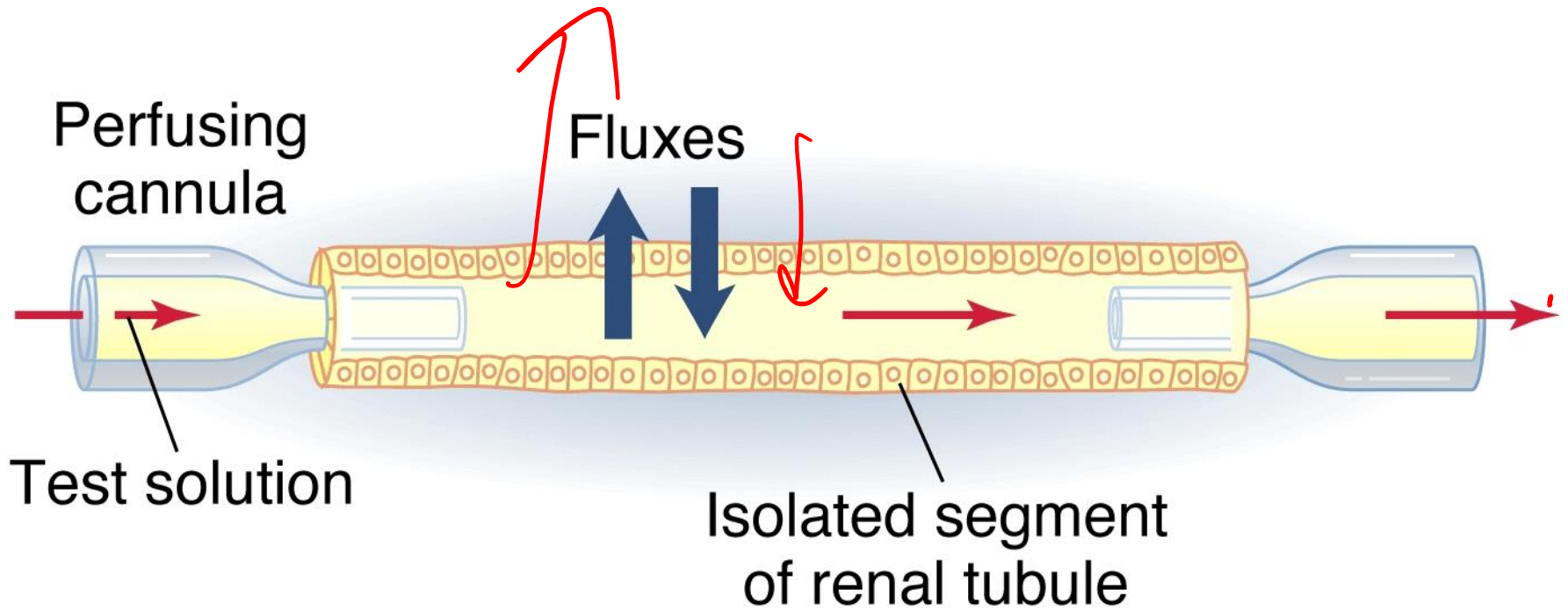
After 20 minutes, second fluid forces a second oil droplet forward, driving perfusion fluid forward.








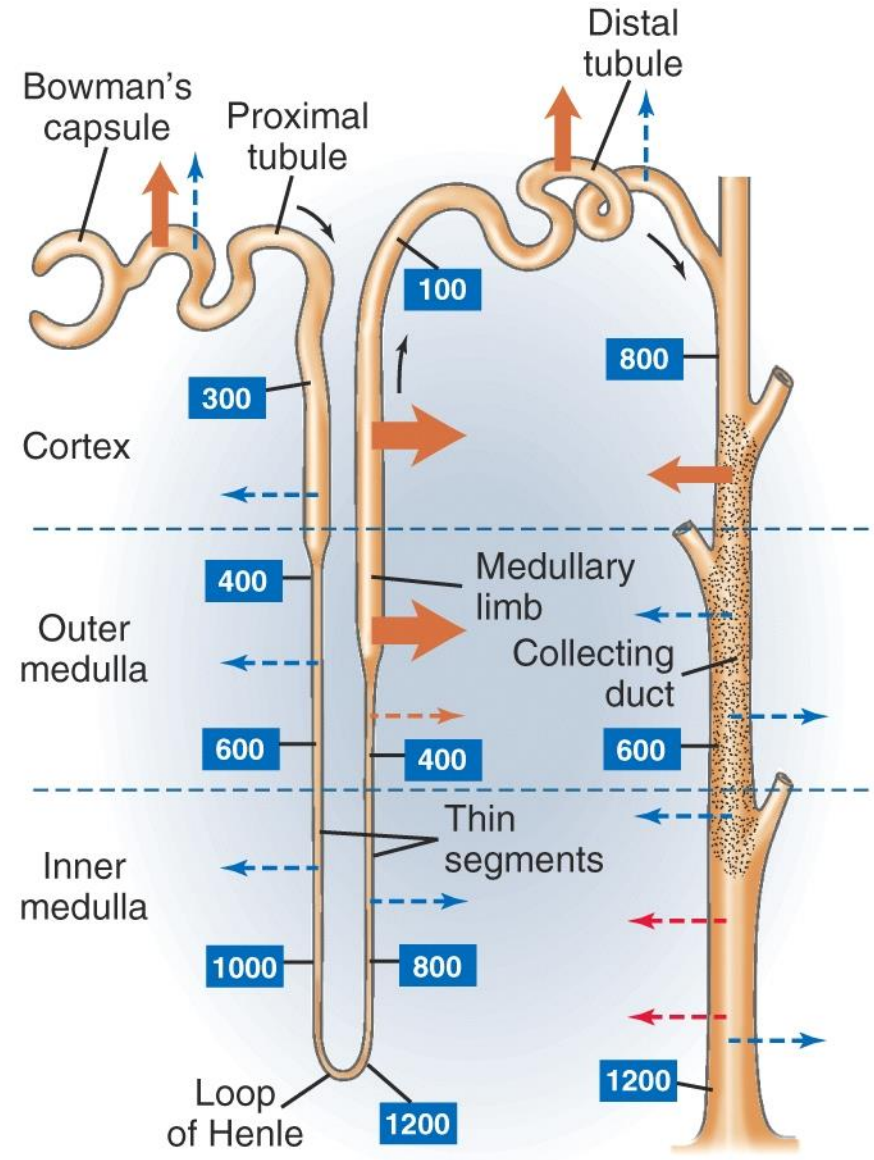
Ability of the tubule segment to reabsorb or secrete substances is determined by comparing composition of perfusate before and after injection.



Ability of the tubule segment to reabsorb or secrete substances is determined by comparing composition of perfusate before and after injection.



-  Active transport of NaCl
-  Filtrate osmolarity in milliosmoles per liter
-  Passive diffusion of urea
-  Passive diffusion of H₂O
-  Passive diffusion of NaCl



GFR

And eGFR - Estimated glomerular filtration rate

Good resource: <https://www.kidney.org/atoz/content/gfr>

Inulin clearance using a constant-infusion urinary clearance approach has long been regarded as the gold standard measure of GFR.

Only filtered and not secreted and without being reabsorbed by the renal tubules.

<http://www.experimentalphysiology.gr/UserFiles/IntCollabor/Sullivan/Renal%20Physiol%20III.pdf>

MEASUREMENT OF FILTRATION

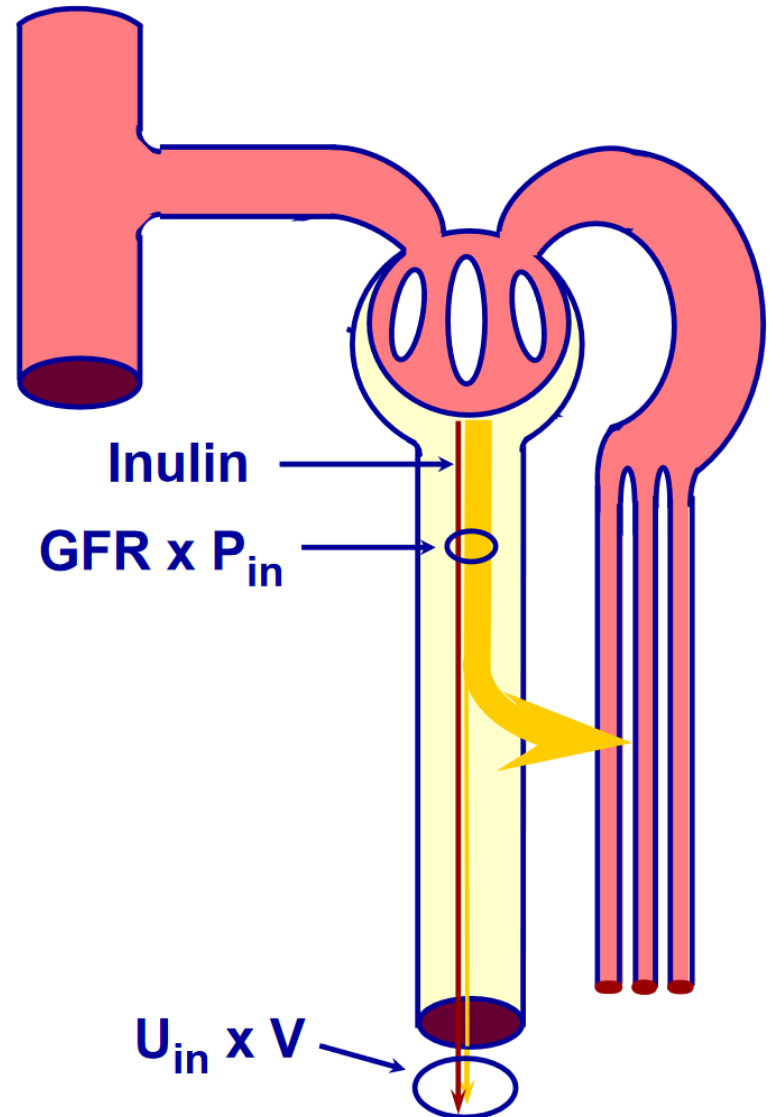
The rate of fluid filtration, GFR, can be measured with the use of inulin.

The rate at which inulin is filtered, $GFR \times P_{in}$, equals the rate it is excreted, $U_{in} \times V$.

$$GFR \times P_{in} = U_{in} \times V$$

$$GFR = U_{in} V / P_{in}$$

Units are volume / time:
ml / min, L / day.

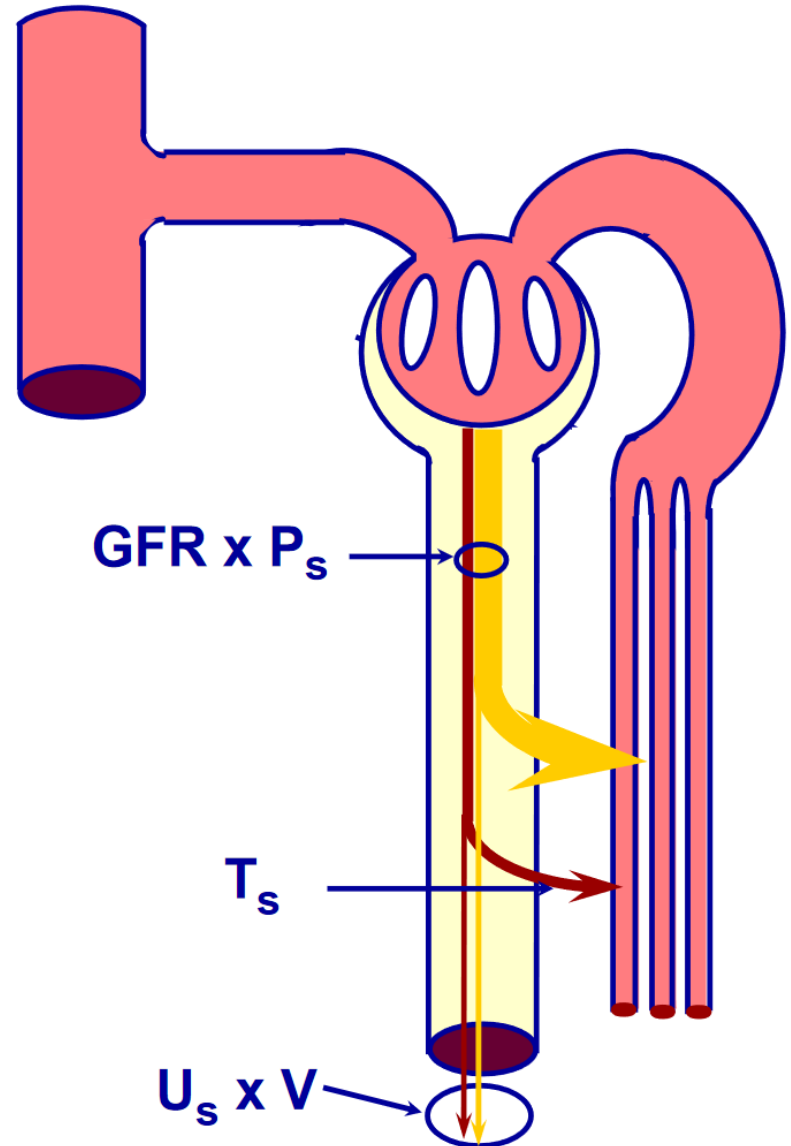


MEASUREMENT OF REABSORPTION

The rate of reabsorption of a solute, T_s , is the difference between the rate of its filtration, $GFR \times P_s$, and the rate of its excretion, $U_s \times V$.

$$T_s = (GFR \times P_s) - (U_s \times V)$$

Units are mass / time:
mg / min, mMoles / min.

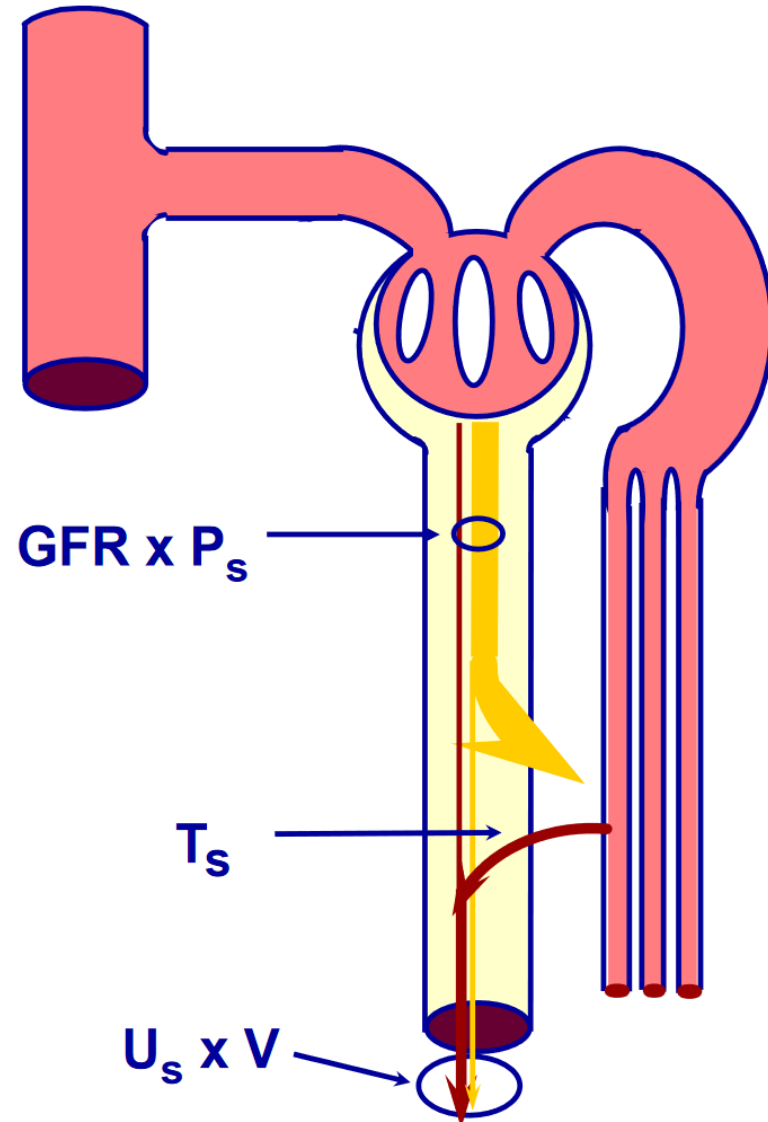


MEASUREMENT OF SECRETION

The rate of secretion of a solute, T_s , is the difference between the rate of excretion, $U_s \times V$, and the rate of filtration, $GFR \times P_s$.

$$T_s = (U_s \times V) - (GFR \times P_s)$$

Units are mass / time:
mg / min, mMoles / min.



MEASUREMENT OF RENAL FUNCTION

- ◆ **CLEARANCE** is a term used to describe the rate of removal or 'clearing' of a substance from the blood. It is often used to measure the efficiency of the kidney in removing a substance from the blood.
- ◆ **DEFINITION:** Volume of plasma cleared of a substance per unit time.
- ◆ **Clearance = excretion rate / plasma concentration.**

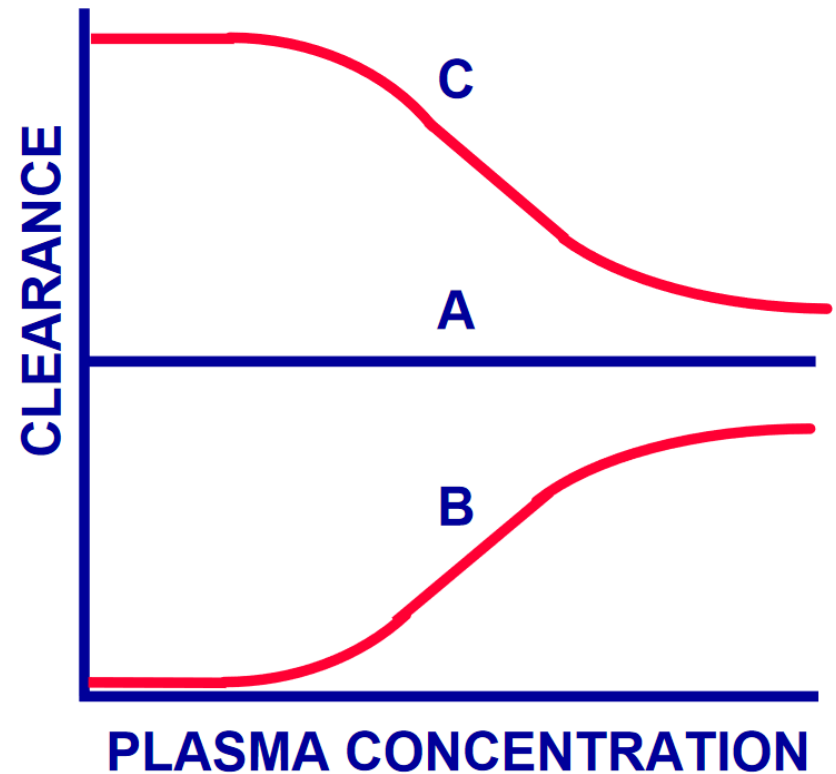
$$C_s = U_s V / P_s$$

- ◆ **UNITS:** ($\mu\text{moles}/\text{min}$) / ($\mu\text{moles}/\text{ml}$) = ml/min

CLEARANCE RATES

Clearance rates of substances may or may not vary with changes in their plasma concentration.

- A.** The clearance of a substance that is neither reabsorbed or secreted does not change when the plasma concentration changes.
- B.** The clearance of a substance that is reabsorbed tends to increase when the plasma concentration rises.
- C.** The clearance of a substance that is secreted tends to fall when the plasma concentration rises.



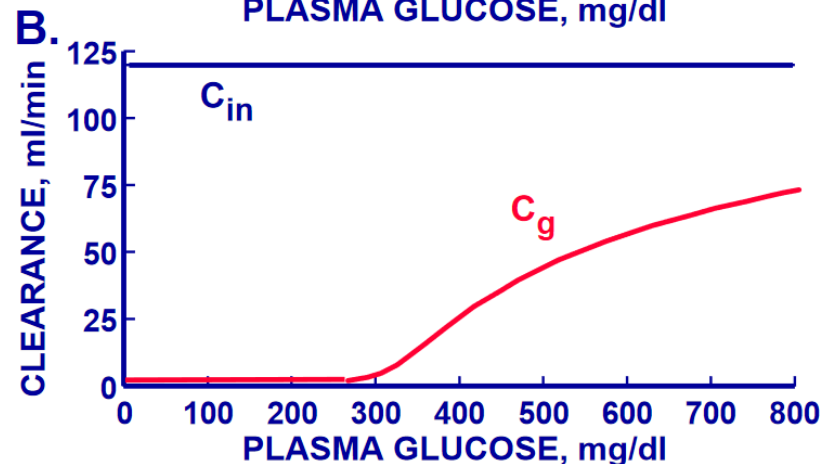
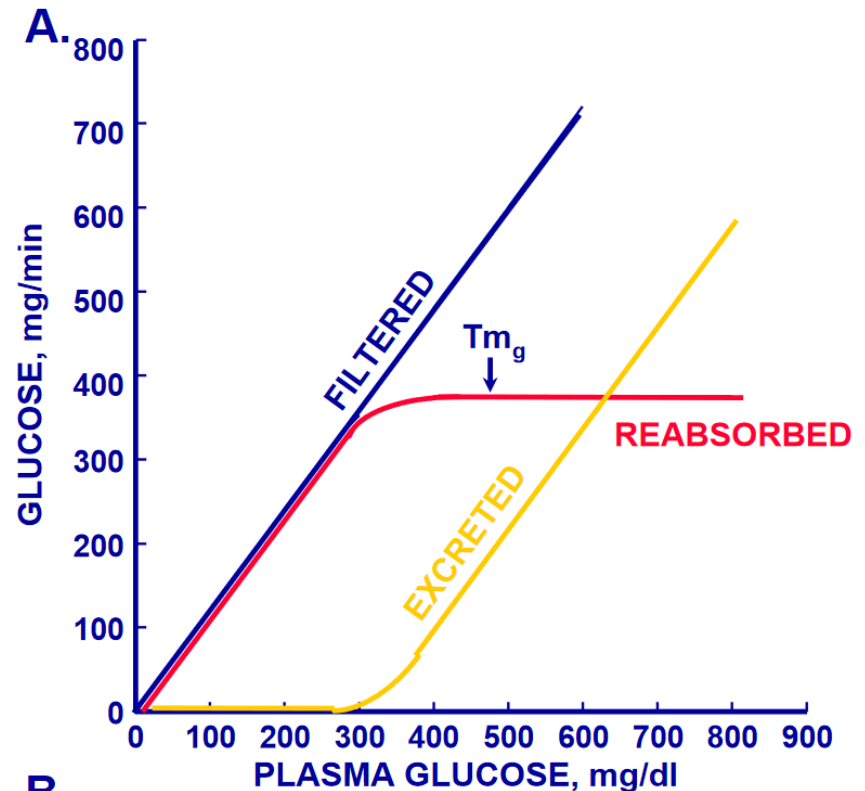
GLUCOSE CLEARANCE

A. All filtered glucose is reabsorbed at plasma concentrations below 250 mg/dl.

The reabsorptive mechanism becomes saturated at plasma concentrations above 350 mg/dl. The maximum transport rate (T_{m_g}) is about 375 mg/min. Glucose begins to appear in the urine at about 250 mg/min.

B. The clearance of glucose (C_g) is 0 when the plasma concentration is below 250mg/dl because no glucose is excreted.

Above that concentration C_g rises and begins to approach the clearance of inulin (C_{in}).



USE OF CREATININE TO MEASURE GFR

Major Advantage: An endogenous substance present in body fluids at concentrations that normally vary little. Thus does not require an IV infusion as inulin does.

Most of the excreted creatinine has been filtered and none is reabsorbed.

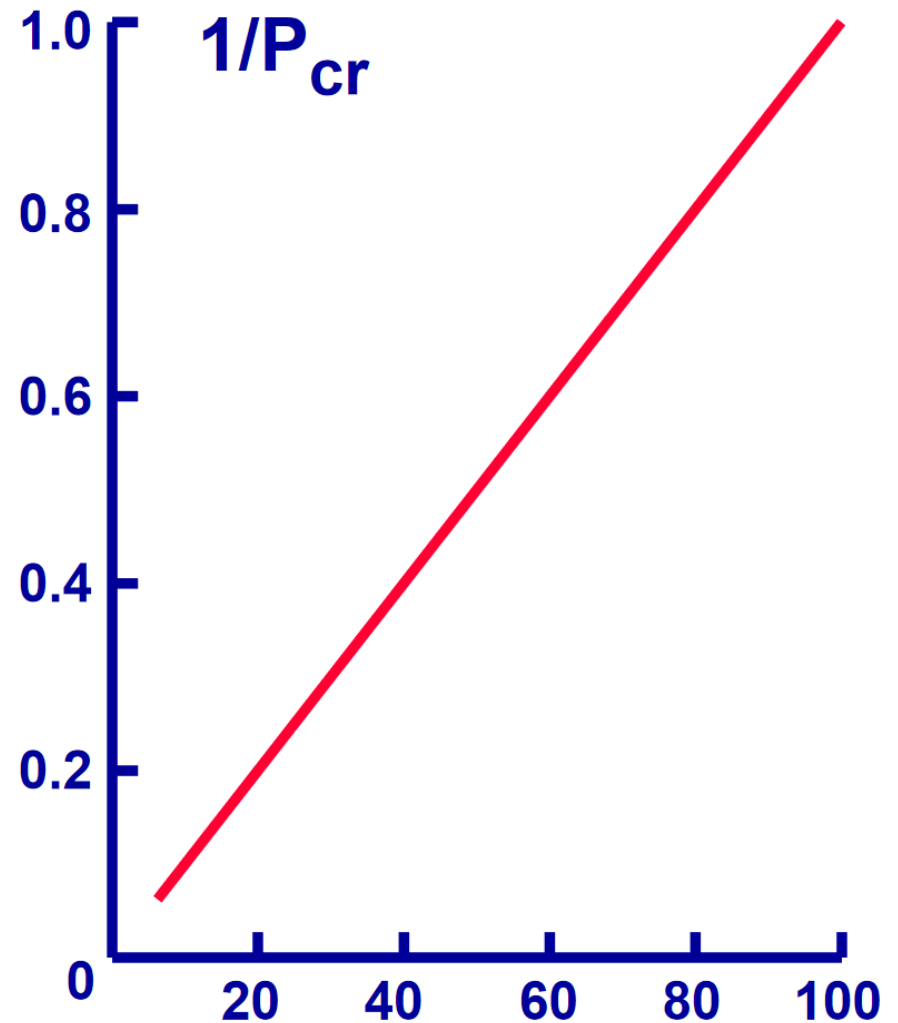
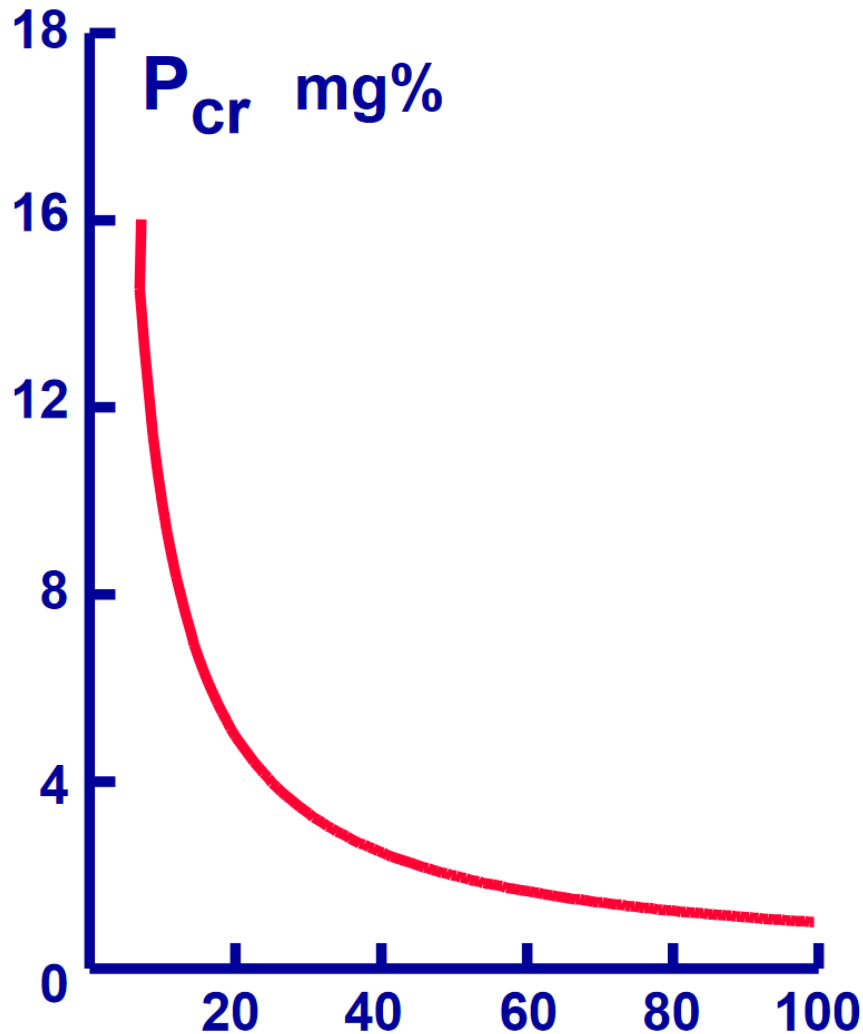
Major Disadvantage: Creatinine is secreted by the proximal tubule to a slight extent. Thus the creatinine clearance may exceed the GFR.

When glomerular function is reduced, the fraction of the creatinine clearance due to secretion increases, raising the error in GFR determination.

Certain drugs affect the secretion of creatinine.

Problems in quantitative collection of all urine produced during a clearance period complicate determination of clearance.

UTILITY OF PLASMA CREATININE MEASUREMENT



PERCENT OF NORMAL GFR

CLINICAL METHODS FOR ESTIMATING GFR

MDRD Formula:

Measurements needed: S_{cr} , BUN, Alb.

$$\text{GFR (ml/min/1.73 m}^2\text{)} = 170 \text{ Scr}^{-0.999} \times \text{Age}^{-0.176} \times \text{BUN}^{-0.17} \times \text{Alb}^{0.318}$$

Multiply by 0.762 if female; 1.18 if African-American

If BUN and Alb are not available:

$$\text{GFR (ml/min)} = 186 \text{ Scr}^{-1.154} \times \text{Age}^{-0.203}$$

Multiply by 0.742 if female; 1.21 if African-American

Cockroft-Gault formula:

Measurements needed: S_{cr}

$$C_{cr} \text{ (ml/min)} = ((140 - \text{Age}) \times \text{kg bw}) / (72 S_{cr} \text{ (mg/dl)})$$

blood urea nitrogen (BUN) test measures the amount of nitrogen in your blood that comes from the waste product urea.

The Cockcroft and Gault formula (1973)

$$C_{Cr} = \{((140 - \text{age}) \times \text{weight}) / (72 \times S_{Cr})\} \times 0.85 \text{ (if female)}$$

Abbreviations/ Units

C_{Cr} (creatinine clearance) = mL/minute

Age = years

Weight = kg

S_{Cr} (serum creatinine) = mg/dL

Why isn't the Cockcroft-Gault formula recommended for clinical use?

- The Cockcroft-Gault (CG) formula has not been expressed using **standardized creatinine values**. This means it will give inaccurate results. It is not recommended for clinical use.

<https://www.niddk.nih.gov/health-information/professionals/clinical-tools-patient-management/kidney-disease/laboratory-evaluation/glomerular-filtration-rate/creatinine-standardization/recommendations>

isotope dilution mass spectrometry (IDMS)

chromium-51–labeled ethylenediaminetetraacetic acid

IDMS-traceable MDRD Study Equation

Conventional Units (creatinine as mg/dL; age in years):

$\text{GFR (mL/min/1.73 m}^2) = 175 \times (S_{\text{cr}})^{-1.154} \times (\text{Age})^{-0.203} \times (0.742 \text{ if female}) \times (1.212 \text{ if African American})$

SI Units (creatinine as $\mu\text{mol/L}$; age in years):

$\text{GFR (mL/min/1.73 m}^2) = 175 \times (S_{\text{cr}}/88.4)^{-1.154} \times (\text{Age})^{-0.203} \times (0.742 \text{ if female}) \times (1.212 \text{ if African American})$

Modification of Diet in Renal Disease (MDRD)

<https://academic.oup.com/ndt/article/24/10/3055/1815967>

See the reasons not good to use BSA

Chronic Kidney Disease Epidemiology Collaboration (CKD-EPI)

CKD-EPI Equation

Note: the CKD-EPI equation can also be expressed as a series of equations applicable to specific creatinine and race combinations. [View the CKD-EPI equation as a series of equations.](#)

Conventional Units (creatinine as mg/dL; age in years):

$$\text{GFR} = 141 \times \min(S_{\text{cr}}/\kappa, 1)^\alpha \times \max(S_{\text{cr}}/\kappa, 1)^{-1.209} \times 0.993^{\text{Age}} \times 1.018 \text{ [if female]} \times 1.159 \text{ [if black]}$$

where:

S_{cr} is serum creatinine in mg/dL,

κ is 0.7 for females and 0.9 for males,

α is -0.329 for females and -0.411 for males,

min indicates the minimum of S_{cr}/κ or 1, and

max indicates the maximum of S_{cr}/κ or 1.

SI Units (creatinine as $\mu\text{mol/L}$; age in years):

$$\text{GFR} = 141 \times \min(S_{\text{cr}}/\kappa, 1)^\alpha \times \max(S_{\text{cr}}/\kappa, 1)^{-1.209} \times 0.993^{\text{Age}} \times 1.018 \text{ [if female]} \times 1.159 \text{ [if black]}$$

where:

S_{cr} is serum creatinine in $\mu\text{mol/L}$,

κ is 61.9 for females and 79.6 for males,

α is -0.329 for females and -0.411 for males,

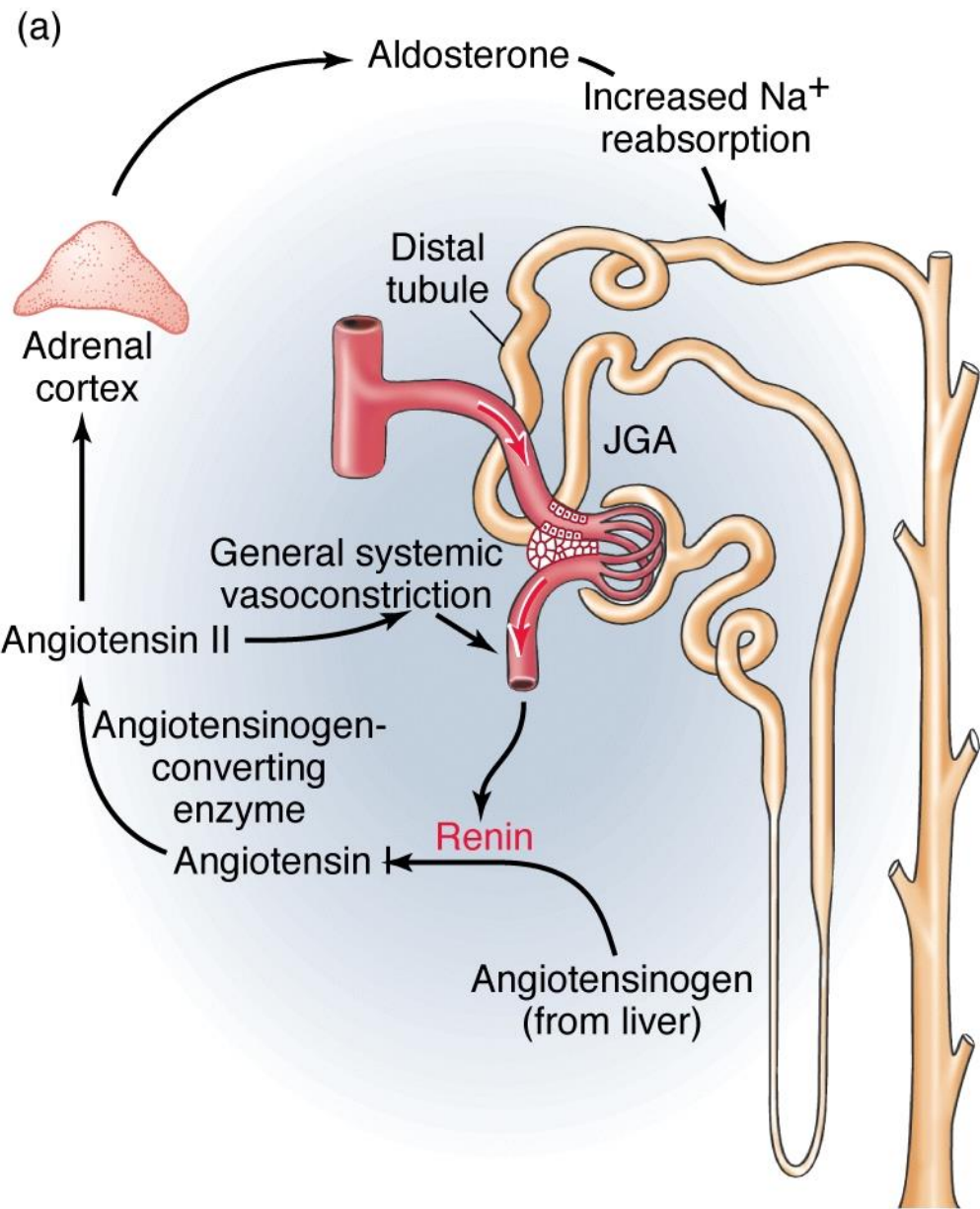
min indicates the minimum of S_{cr}/κ or 1,

and max indicates the maximum of S_{cr}/κ or 1.

Para-aminohippurate (*PAH*) clearance.
Only secreted not filtered. Has to be injected iv.
Can examine if kidney is not secreting well.

We conclude that postischemic injury to the renal allograft results in profound impairment of E_{PAH} that persists for at least 7 days, even after the onset of recovery. An ensuing reduction in urinary PAH clearance results in a gross underestimate of renal plasma flow, which is close to the normal range in the initiation, maintenance, and recovery stages of this injury.....

https://journals.physiology.org/doi/full/10.1152/ajprenal.1999.277.2.F312?rfr_dat=cr_pub++0pubmed&url_ver=Z39.88-2003&rfr_id=ori%3Arid%3Acrsref.org



(b)

Angiotensinogen (Renin substrate)

Asp-Arg-Val-Tyr-Ile-His-Pro-Phe-His-Leu-Leu-Val-Tyr-Ser-Protein

Angiotensin I

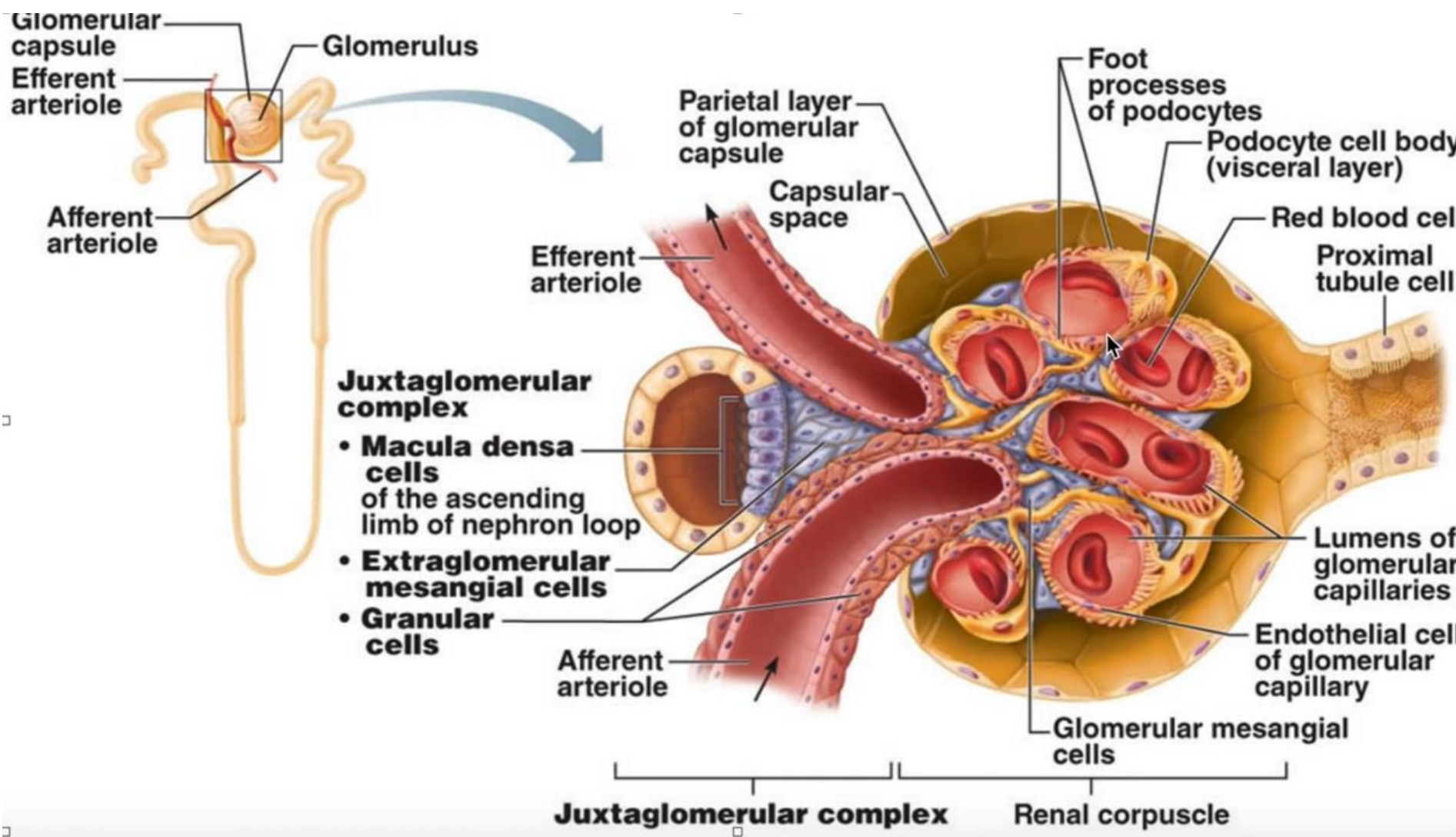
Asp-Arg-Val-Tyr-Ile-His-Pro-Phe-His-Leu

Angiotensin II

Asp-Arg-Val-Tyr-Ile-His-Pro-Phe

Renin

Angiotensinogen-
converting enzyme



<https://www.khanacademy.org/test-prep/mcat/organ-systems/renal-regulation-of-blood-pressure/v/renin-production-in-the-kidneys>

Need to watch.... 3 triggers to increase Renin. How is the negative feedback accomplished with renin?

Juxtaglomerular Apparatus:

Triggers:

1. ↓ Blood pressure
2. Sympathetic nerves
3. ↓ Na⁺ (Macula Densa)

Distal Convoluted Tubule (Na⁺)

Macula Densa Cells (3)

Prostaglandin (Paracrine hormone)

Sympathetic Nerves (2)

Afferent Arteriole

Endothelial Cells

Smooth Muscle Cells

Juxta Glomerular cells (Granular cells) (1)

Renin

Efferent Arteriole

Glomerulus

These are the three triggers that

Copy link

13:21 / 14:08

CC

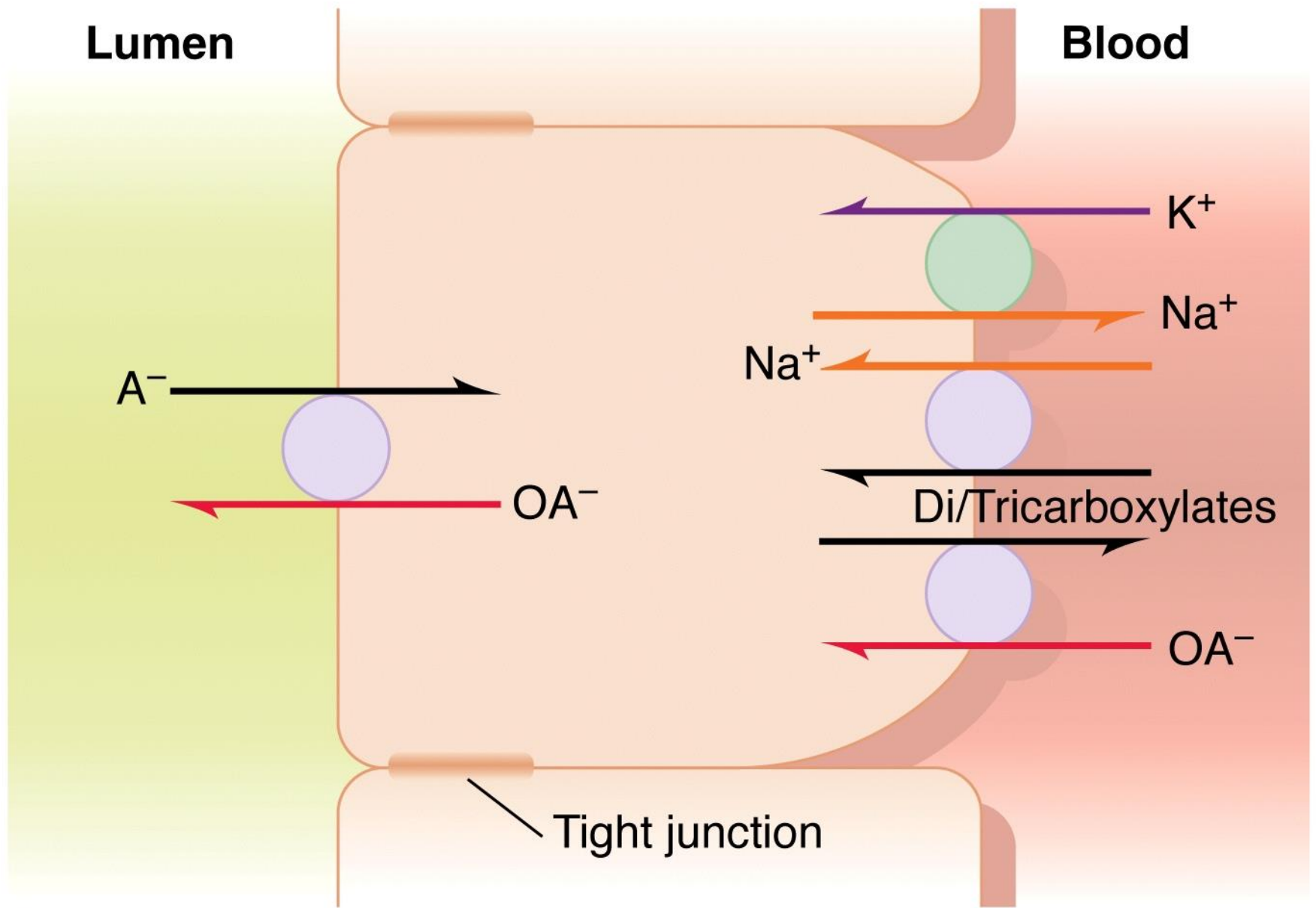


Table 14-9 Some organic ions secreted by the proximal tubule

Anions	Cations
<i>Endogenous</i>	<i>Endogenous</i>
Urates	Dopamine
Hippurates	Epinephrine
Oxalate	Norepinephrine
Prostaglandins	Creatinine
cAMP	
<i>Exogenous</i>	<i>Exogenous</i>
Furosemide	Morphine
Bumetanide	Amiloride
Penicillin	Quinine
Aspirin	Atropine
Chlorothiazides	Isoproterenol

Probenecid was developed in the 1940s and used during World War II to prolong the life of penicillin and is now used to treat gout.

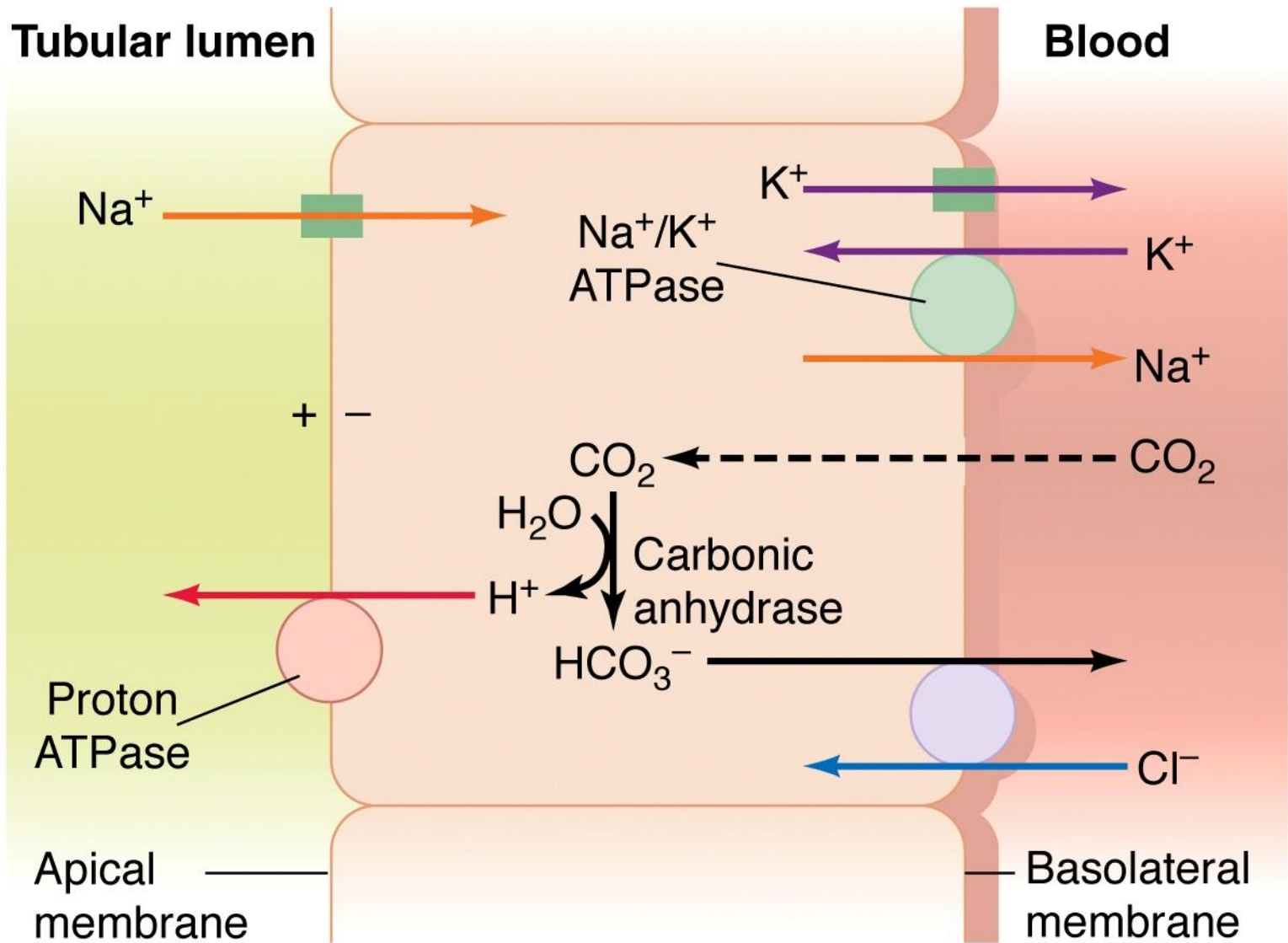
<https://www.acs.org/content/acs/en/education/whatischemistry/landmarks/flemingpenicillin.html>

.....the War Production Board (WPB) in 1943 to take responsibility for increased production of the drug (Penicillin).

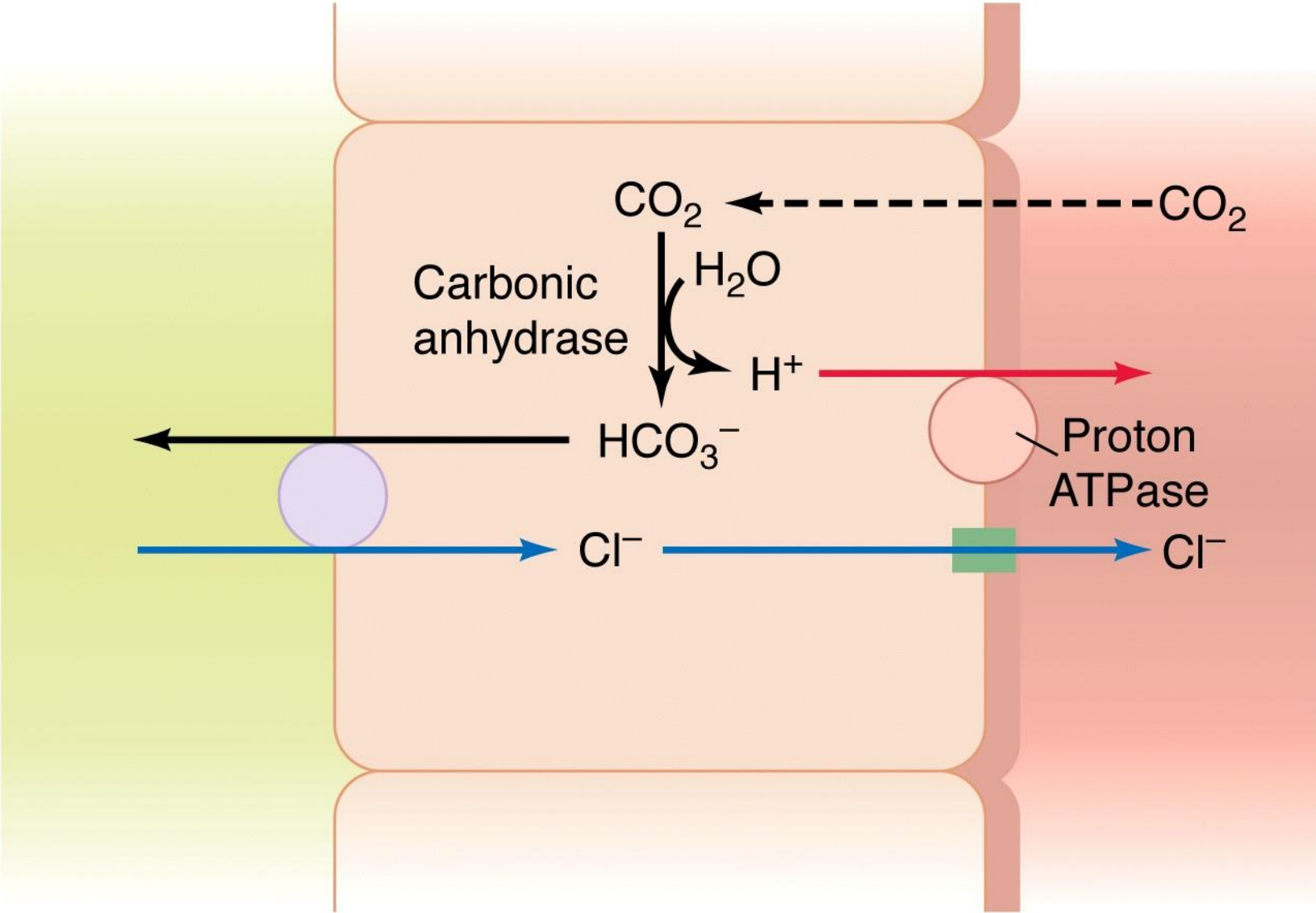
Similarities with the war production act to produce COVID vaccine

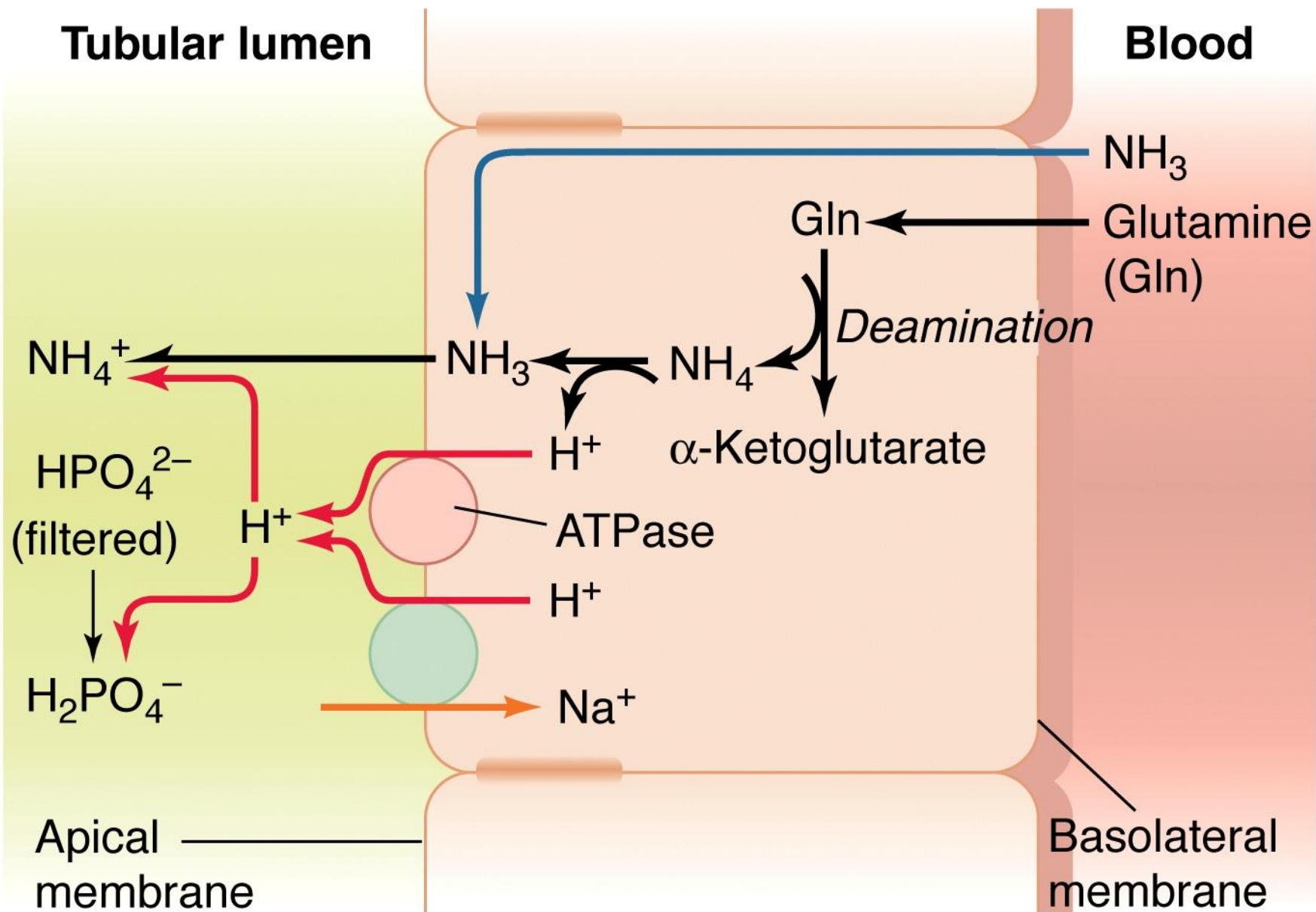
<https://www.npr.org/sections/health-shots/2021/03/13/976531488/defense-production-act-speeds-up-vaccine-production>

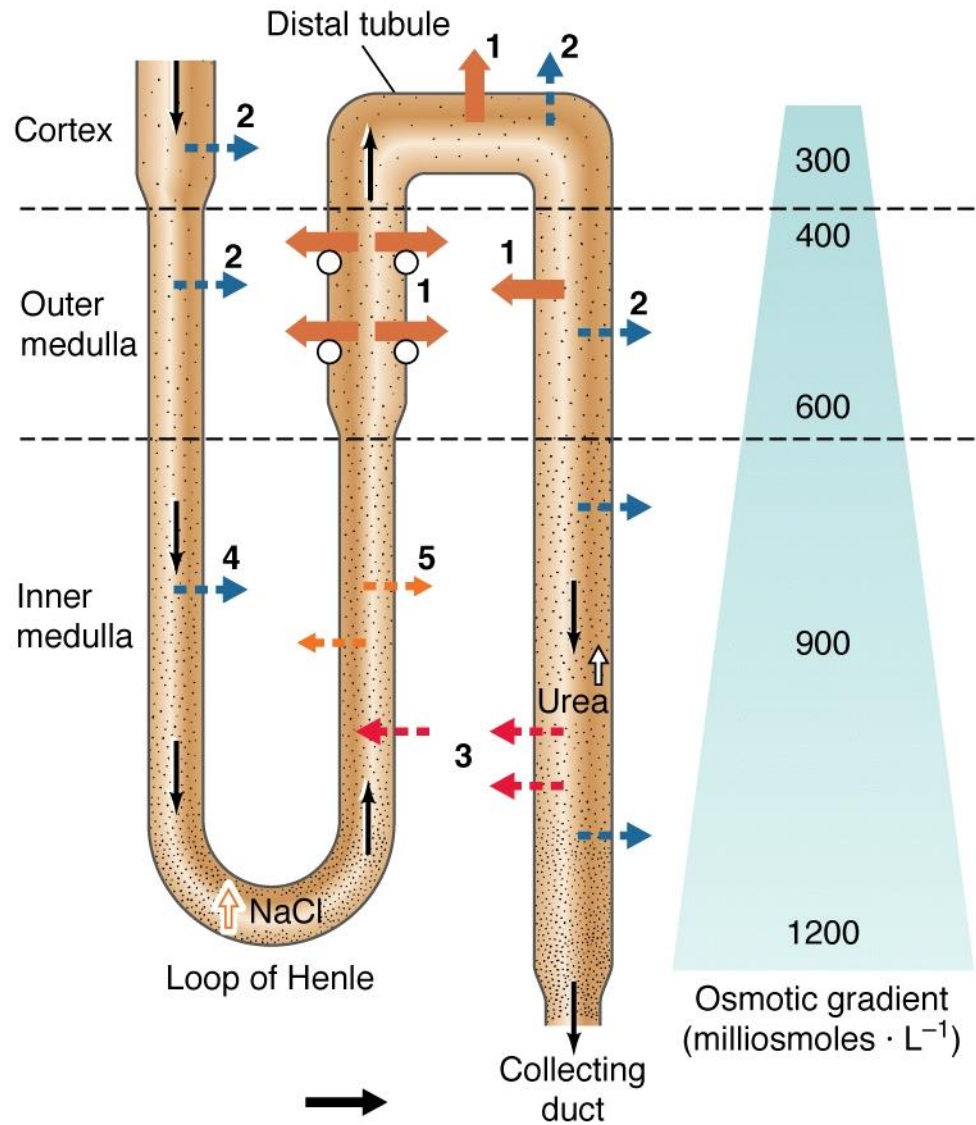
(a) A-type cells of kidney



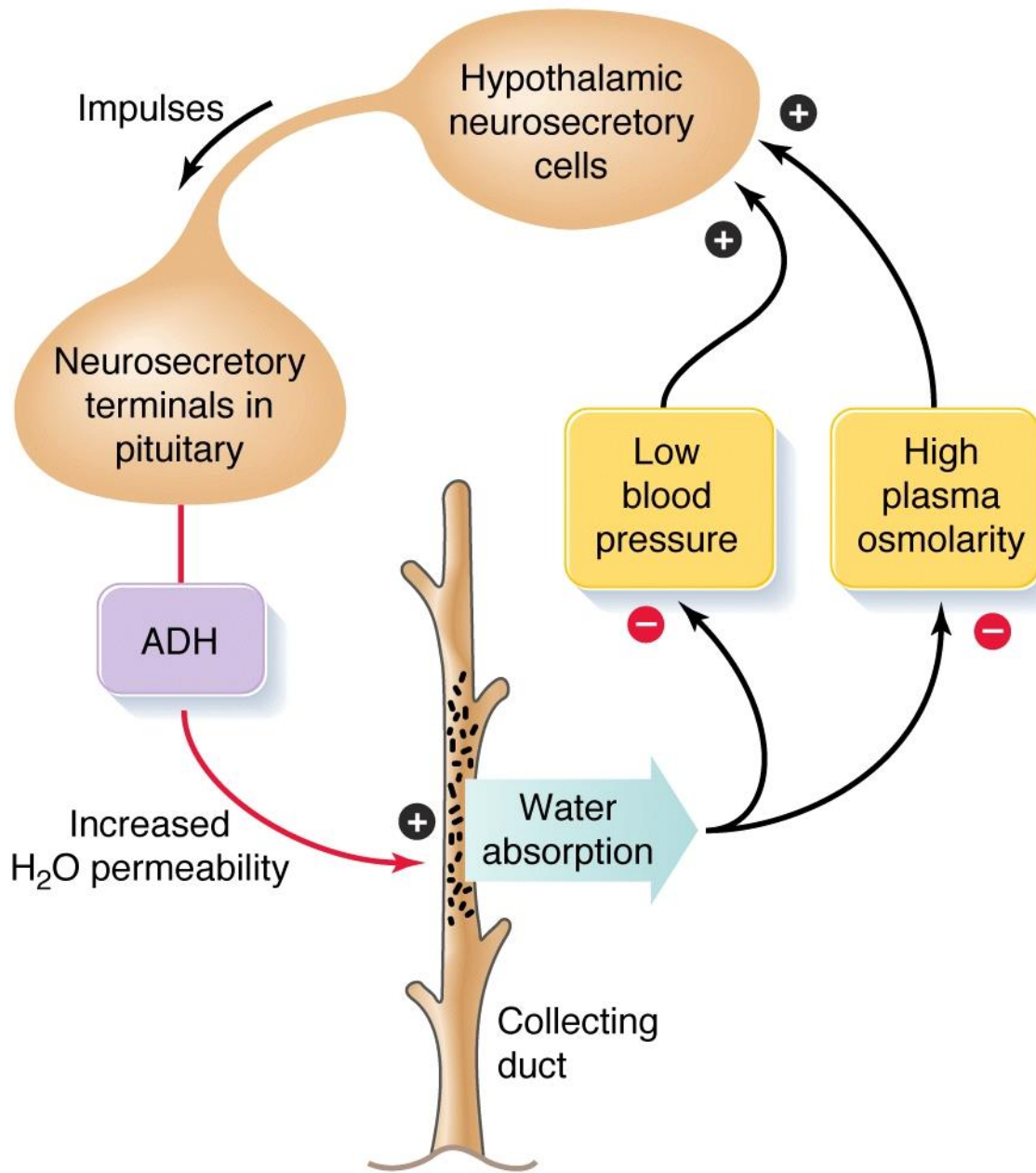
(b) B-type cells of kidney



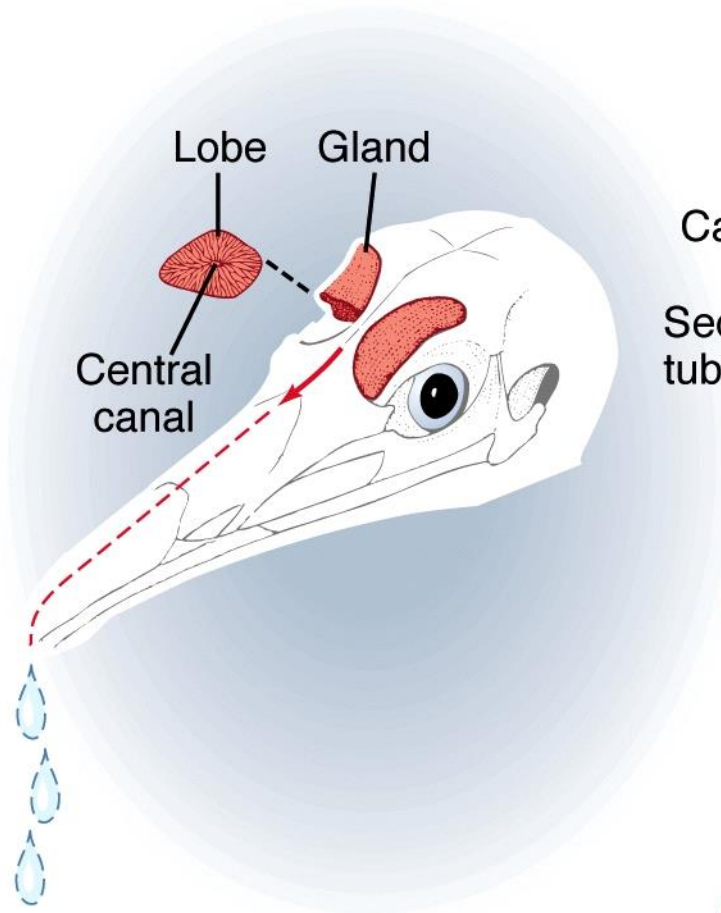




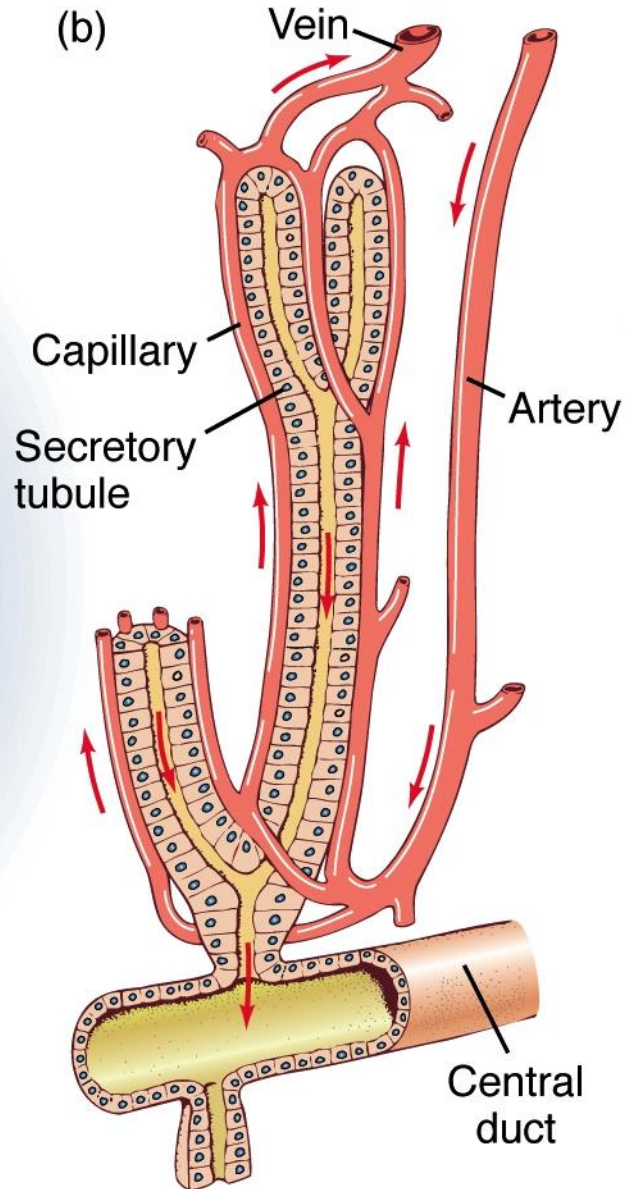
- ➔ Active transport of NaCl
- - ➔ Passive diffusion of H₂O
- - ➔ Passive diffusion of urea
- - ➔ Passive diffusion of NaCl



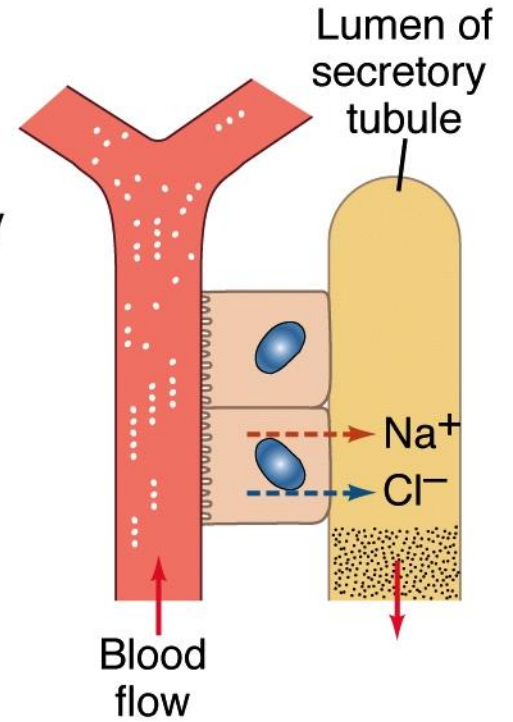
(a)



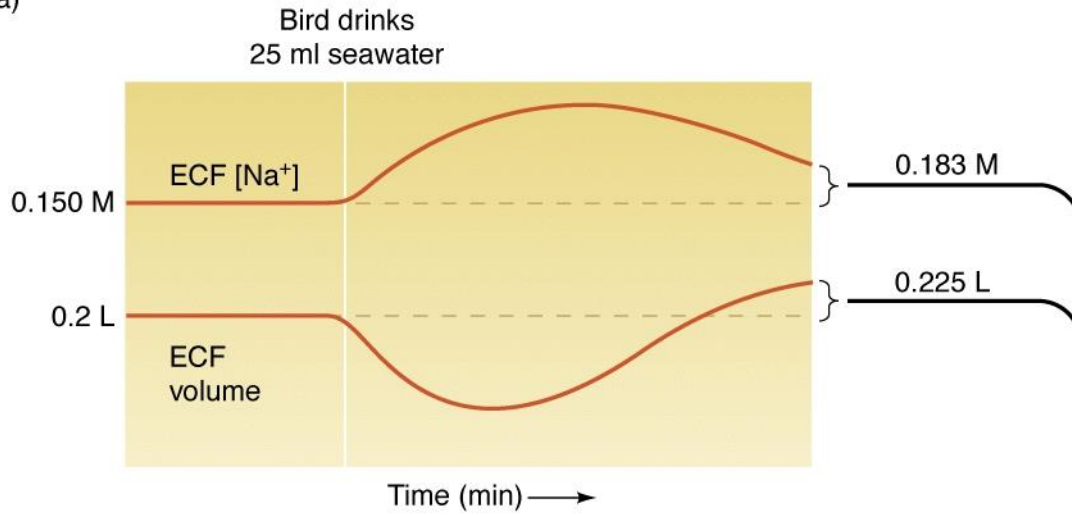
(b)



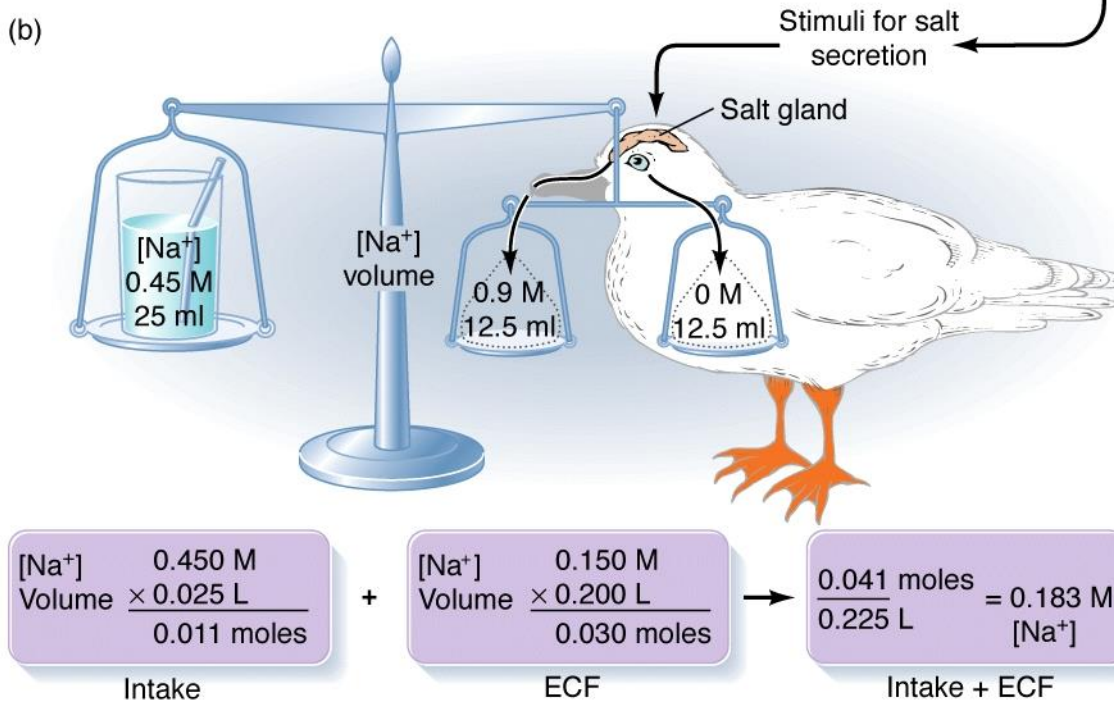
(c)



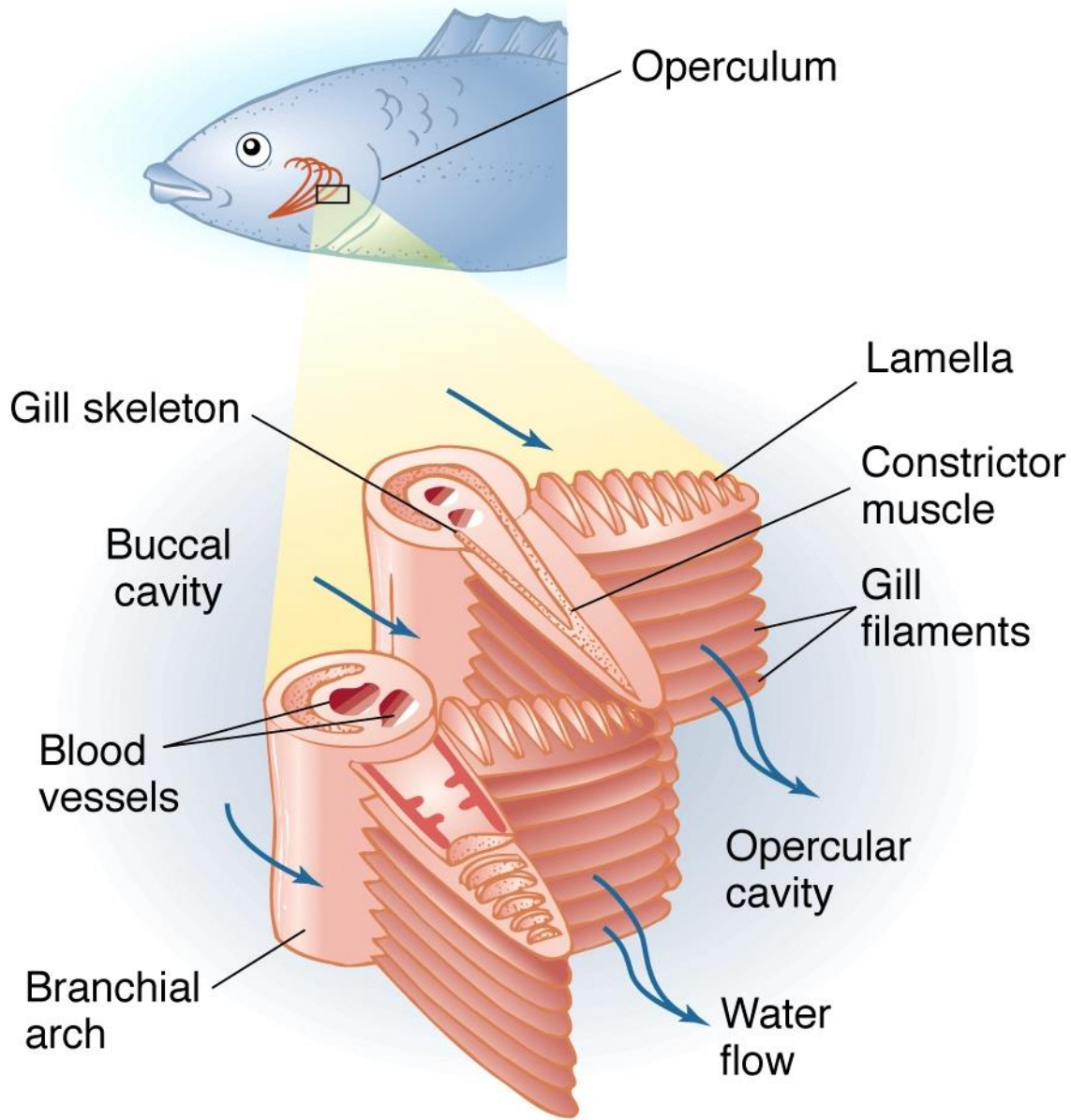
(a)



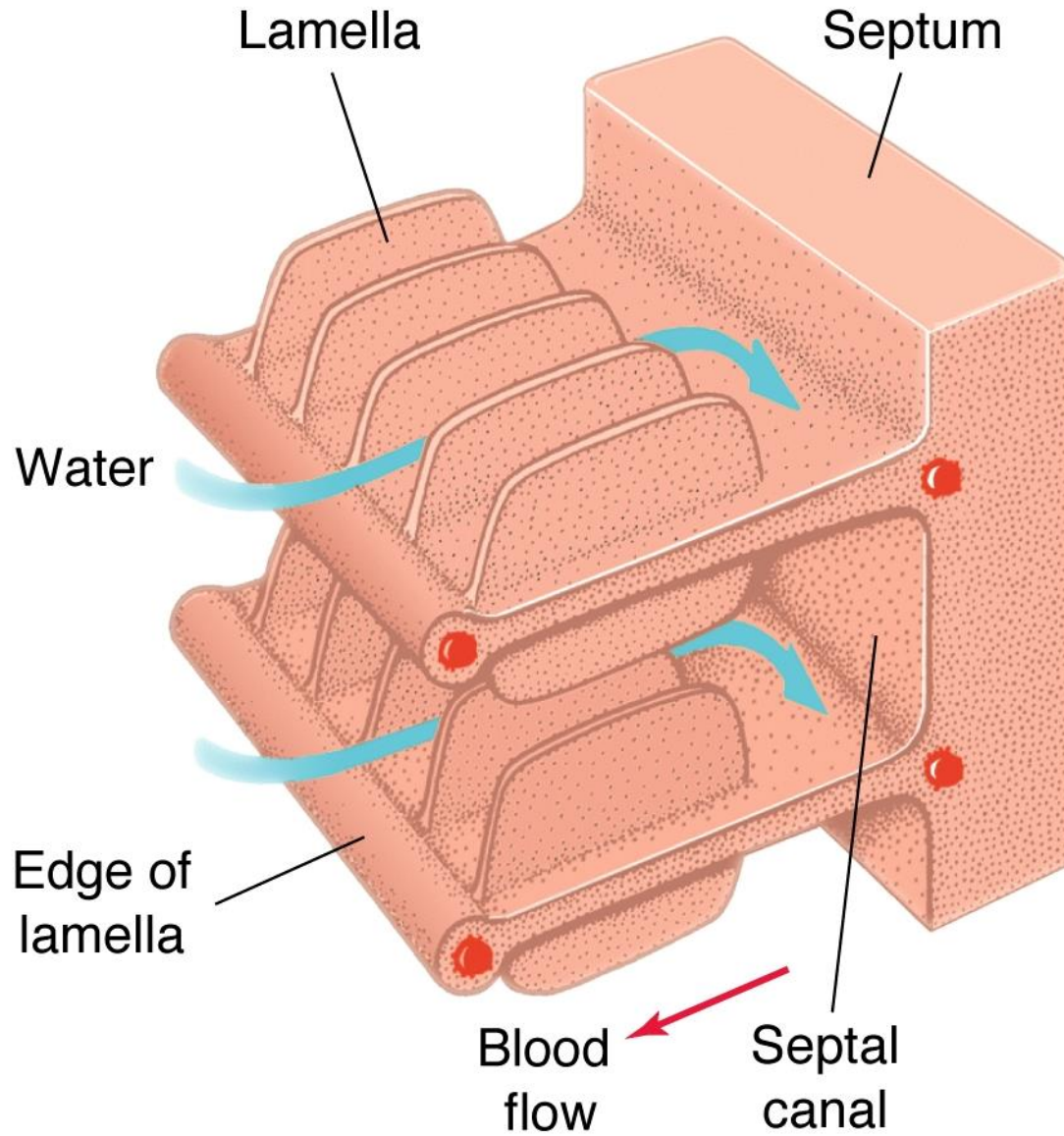
(b)



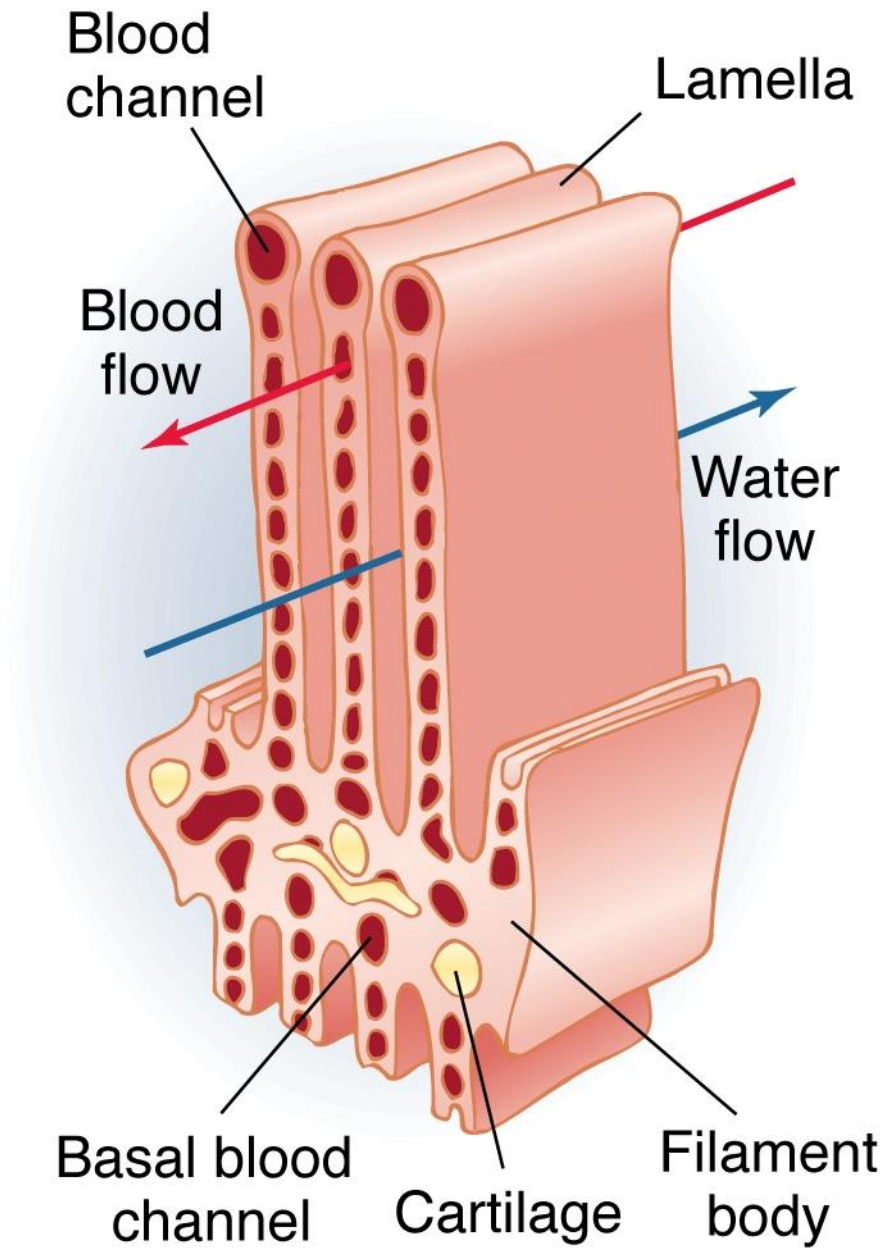
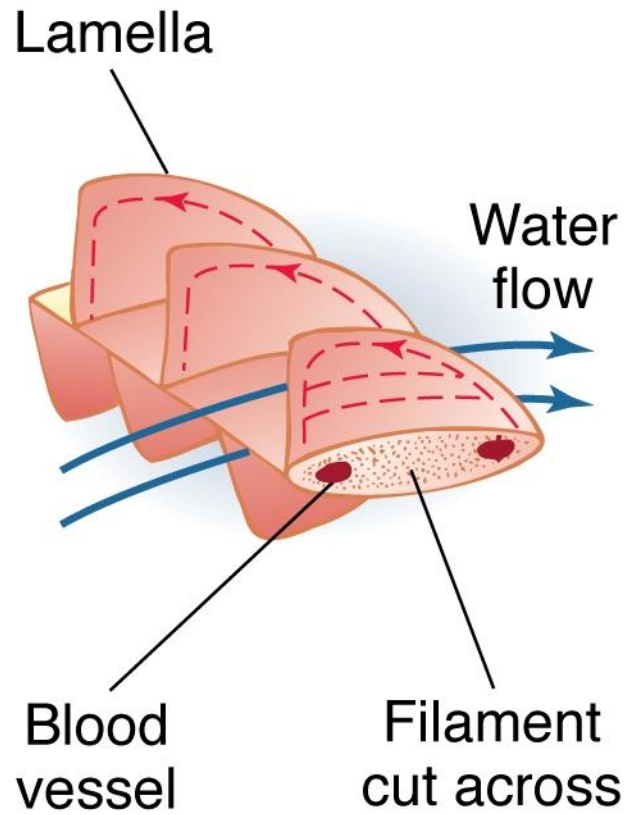
(a) Teleost gill



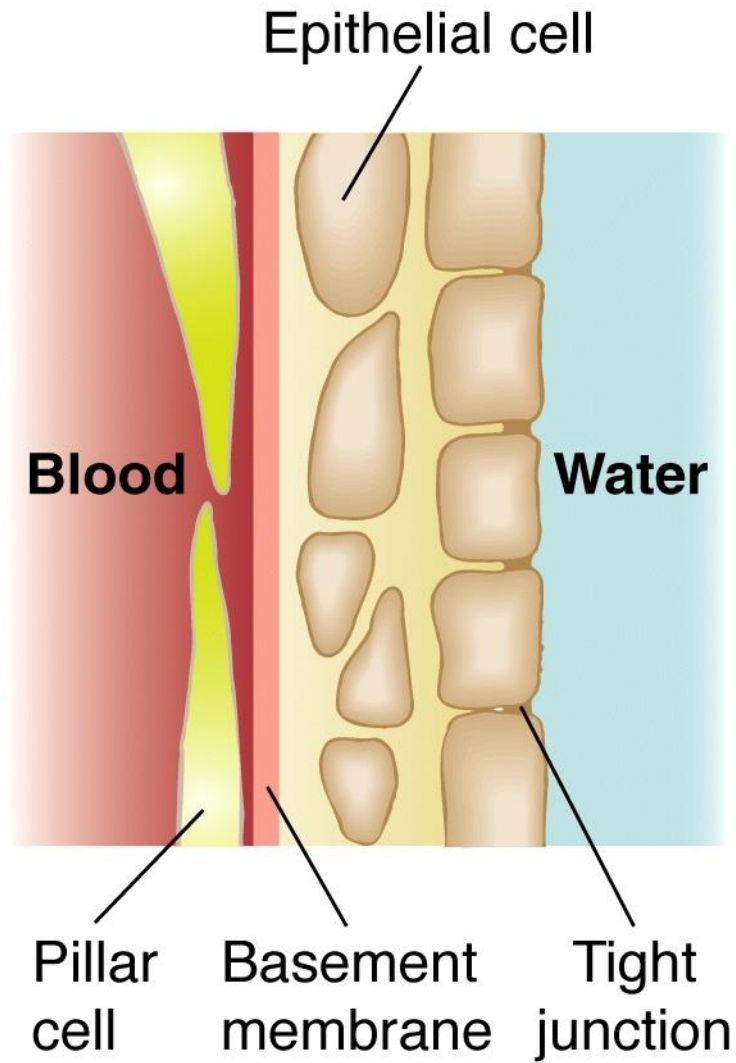
(b) Elasmobranch gill, detail (dogfish)



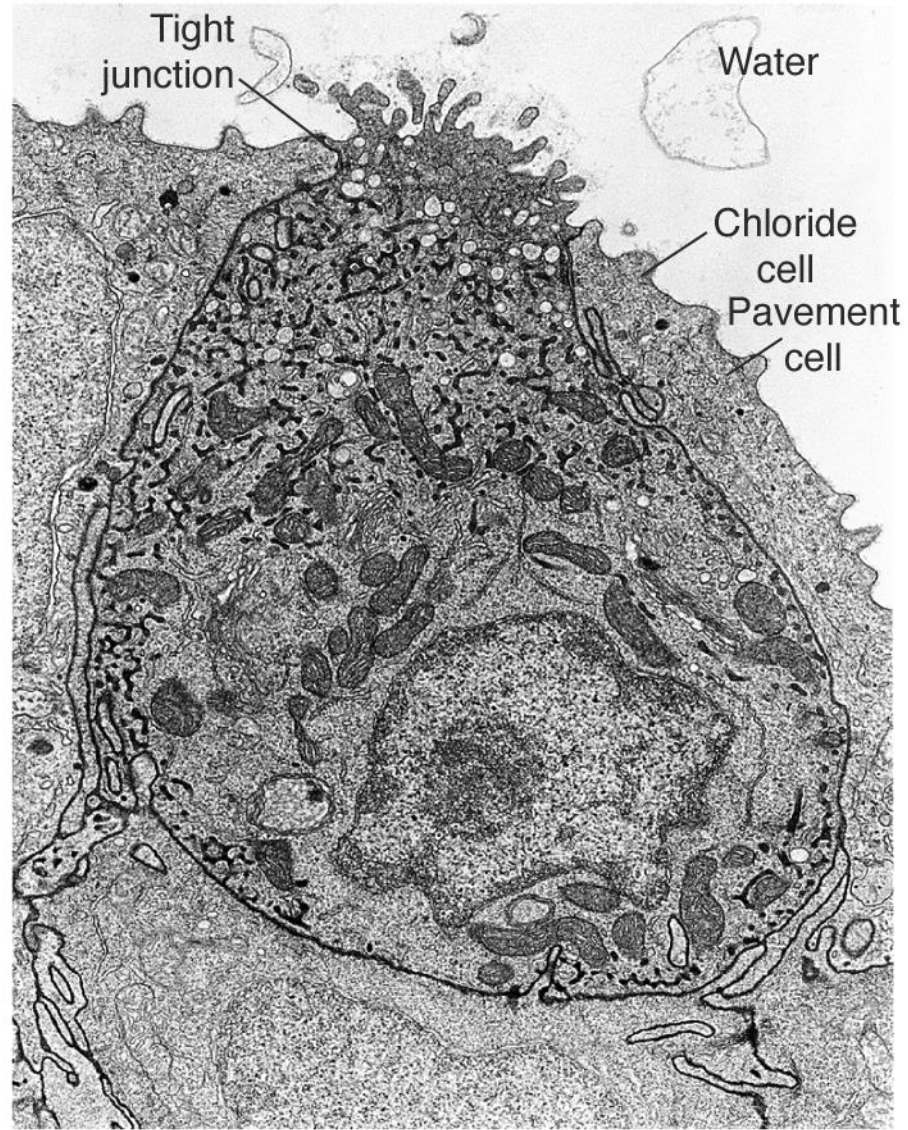
(c) Teleost gill, detail



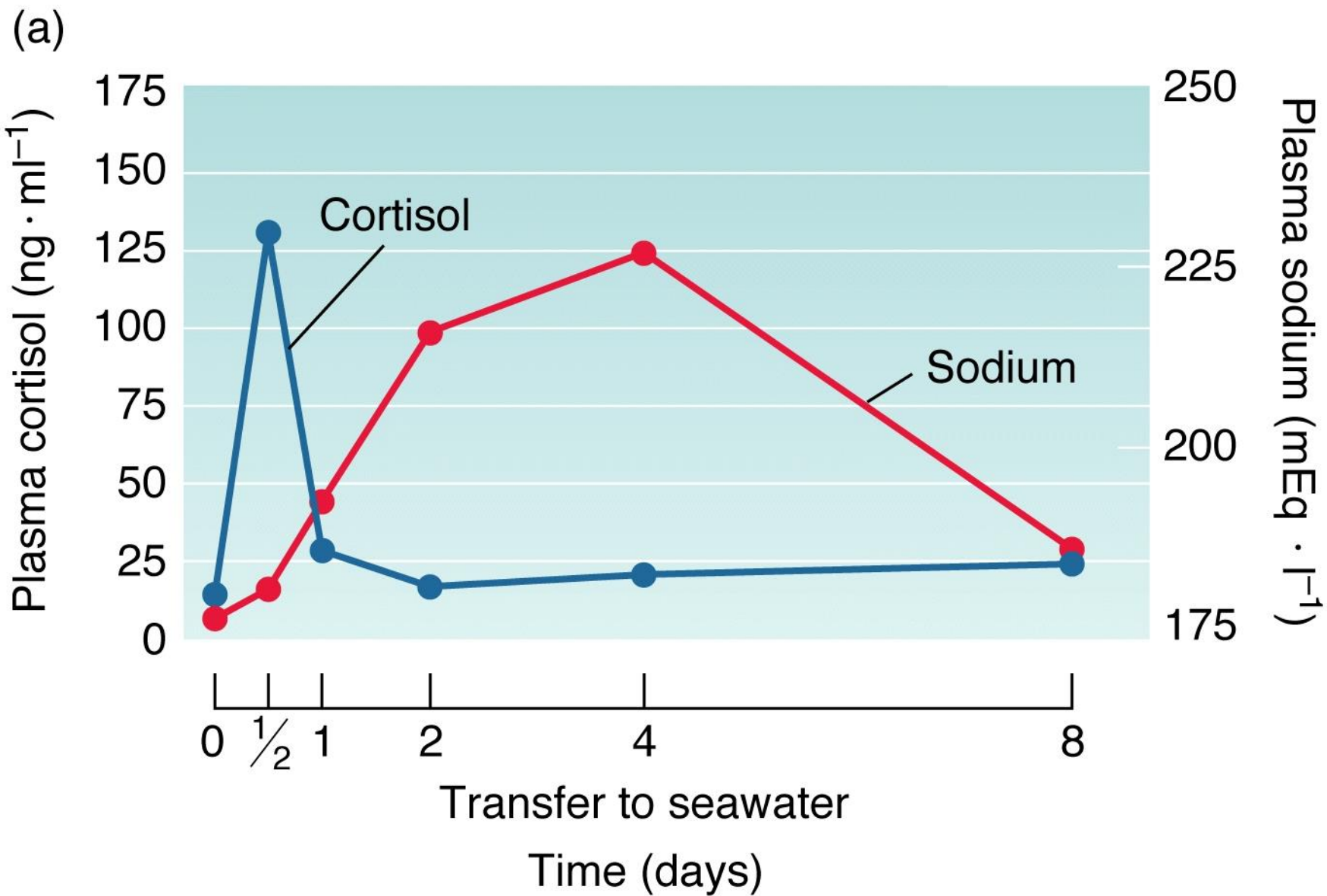
(e) Section across gill lamellar epithelium



(a)



2.5 μm



(b)

Gill Na^+/K^+ - ATPase activity
($\mu\text{mol ADP} \cdot \text{mg}^{-1} \text{ protein} \cdot \text{h}^{-1}$)

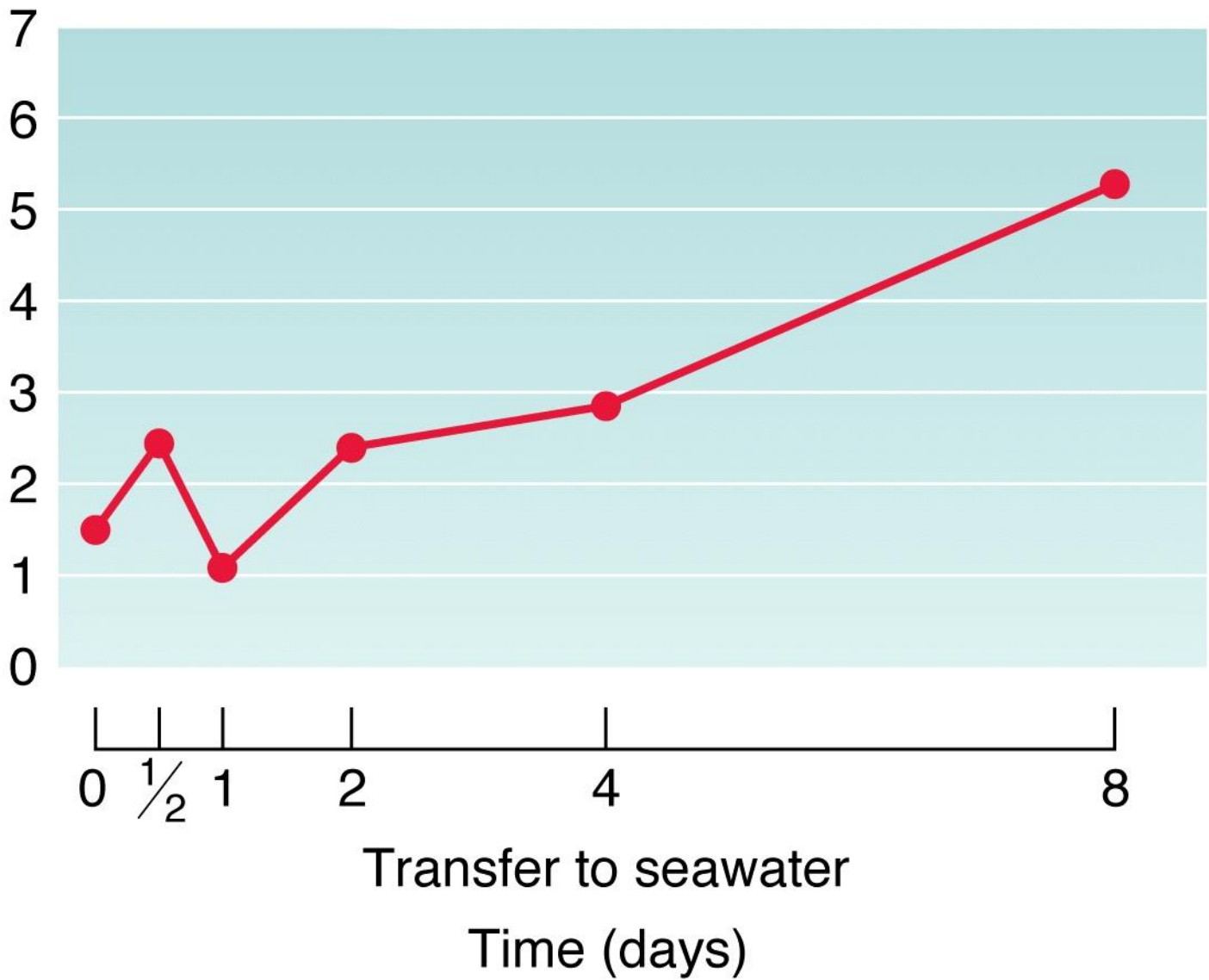


Table 14-10 Physiological acclimatizations that accompany the movement of fish to water of differing salinity

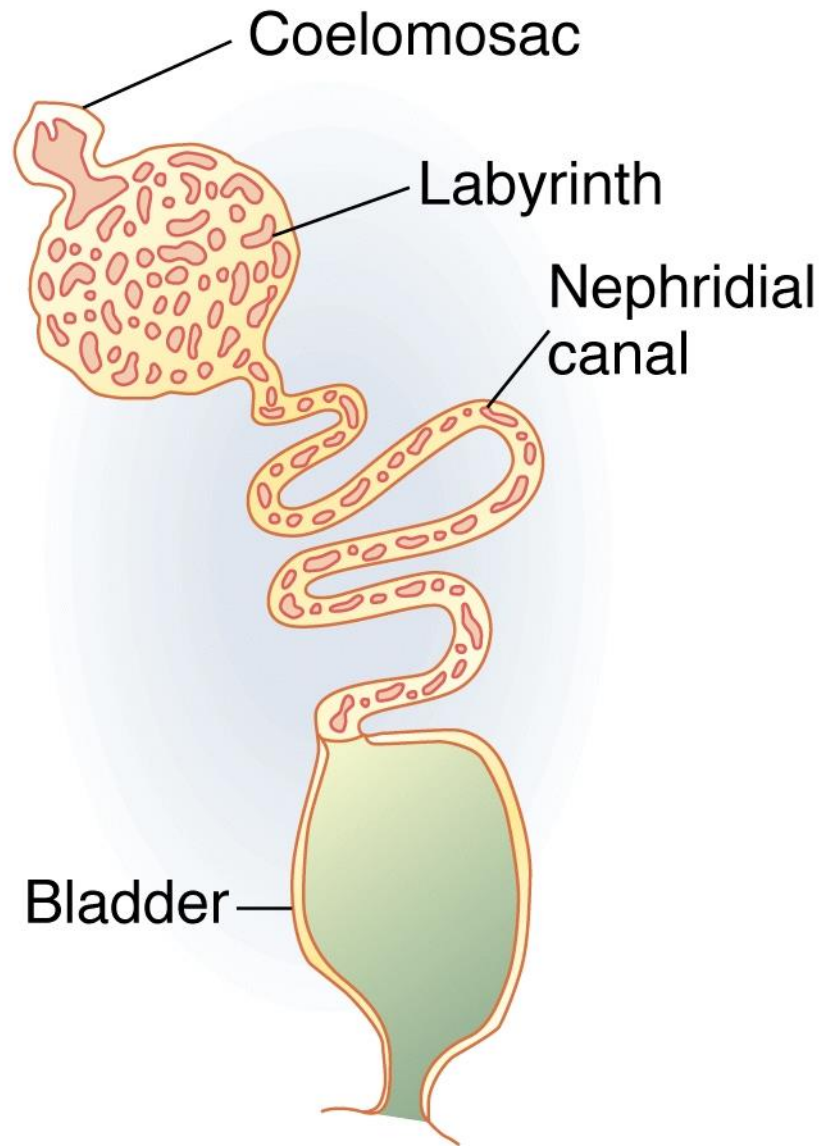
(A) From freshwater to seawater

1. The proton pump that powers active uptake of NaCl is down-regulated.
 2. The rise in the flux of Na⁺ into the body raises plasma Na⁺, stimulating an increase in plasma cortisol and growth hormone levels.
 3. Hormones induce the proliferation of chloride cells and an increase in the infolding of their basolateral membranes.
 4. The changes above cause an increase in the activity of the Na⁺/K⁺ pump and the secretion of NaCl.
 5. Plasma Na⁺ levels return to normal.
-

Table 14-10 Physiological acclimatizations that accompany the movement of fish to water of differing salinity

(B) From seawater to freshwater

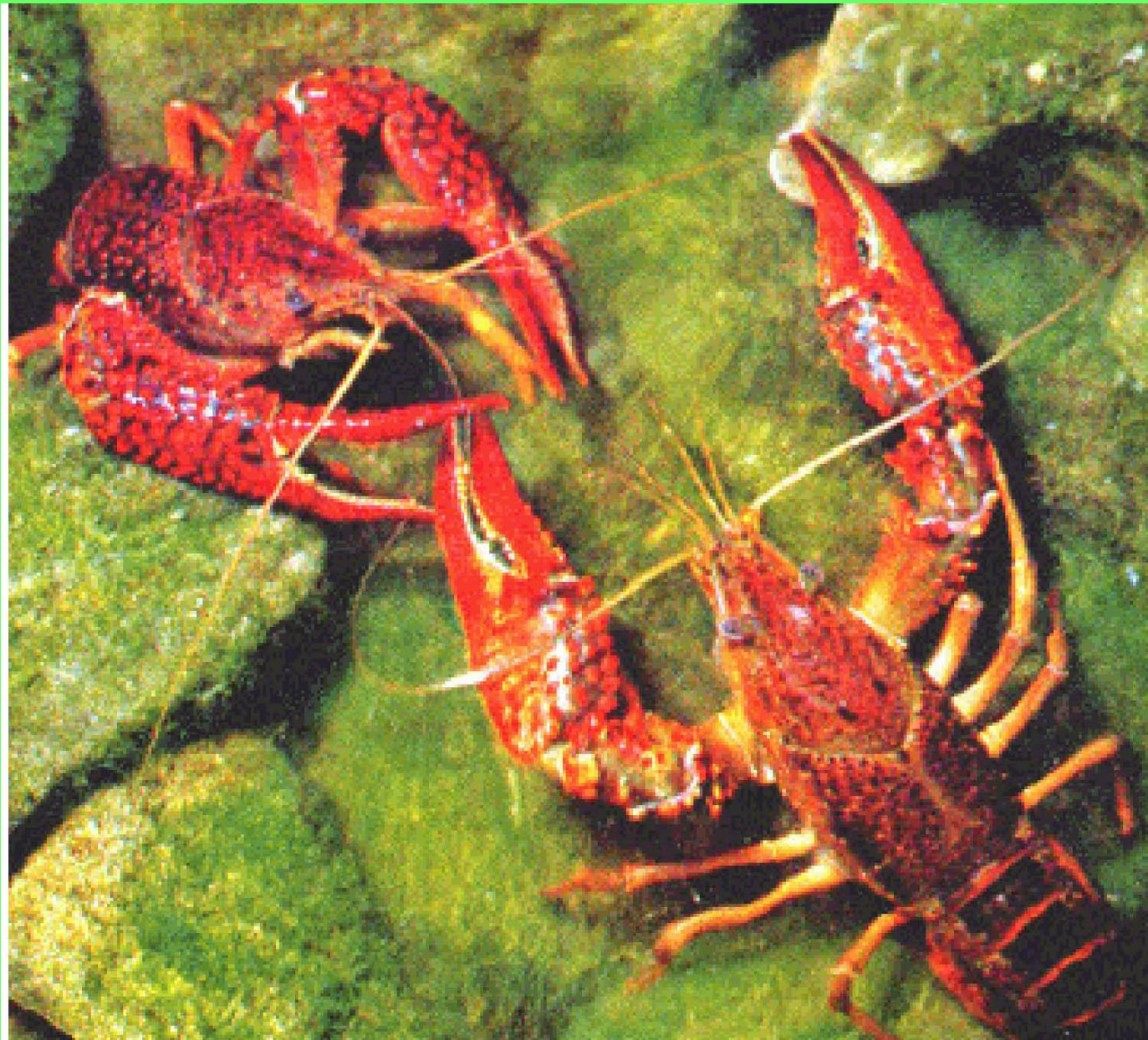
1. The paracellular gaps between chloride and accessory cells close in response to low external Na^+ levels, causing NaCl efflux to fall rapidly.
 2. Plasma prolactin levels increase.
 3. Prolactin causes the number of chloride cells to decrease and the apical pits to disappear.
 4. As a result, the activity of the Na^+/K^+ pump falls.
 5. Up-regulation of the proton pump returns the fish to the freshwater condition.
-



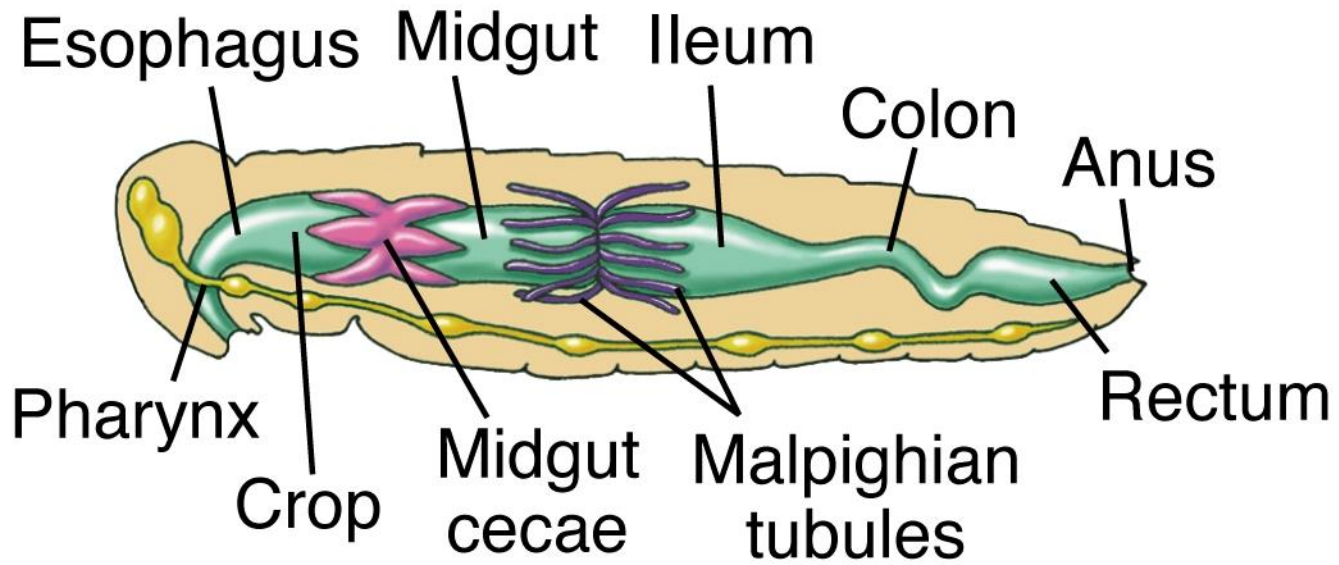
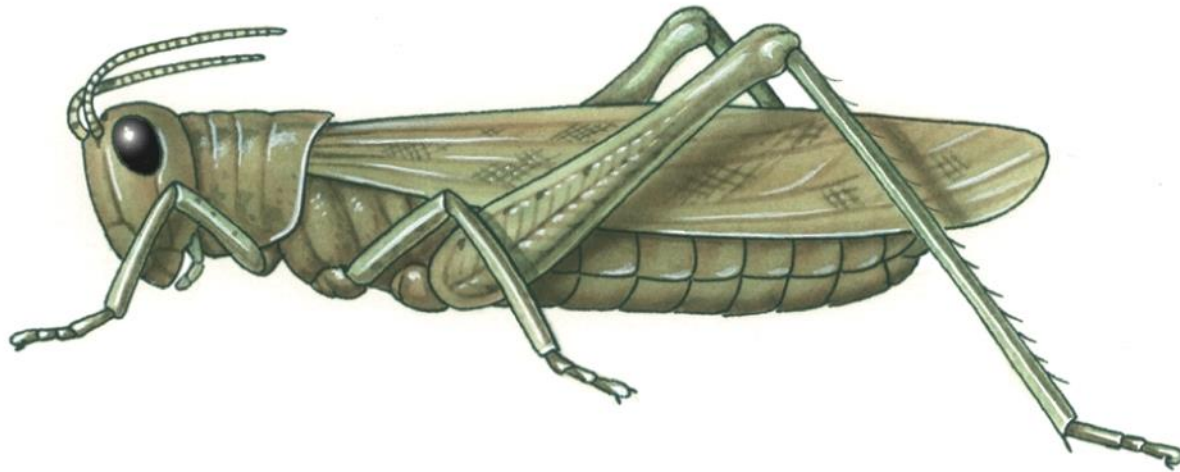
Crayfish antennal gland



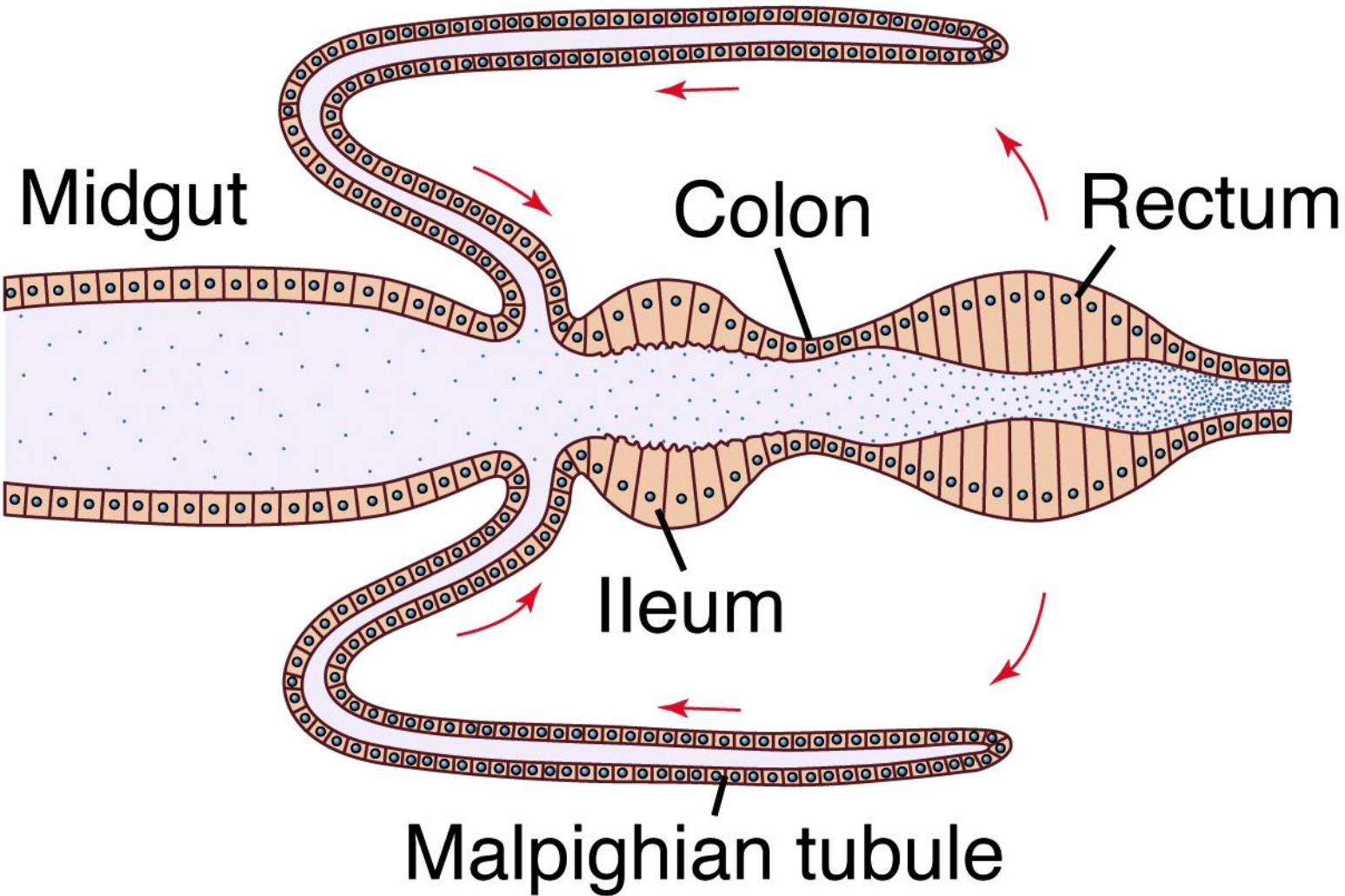
Urine Release

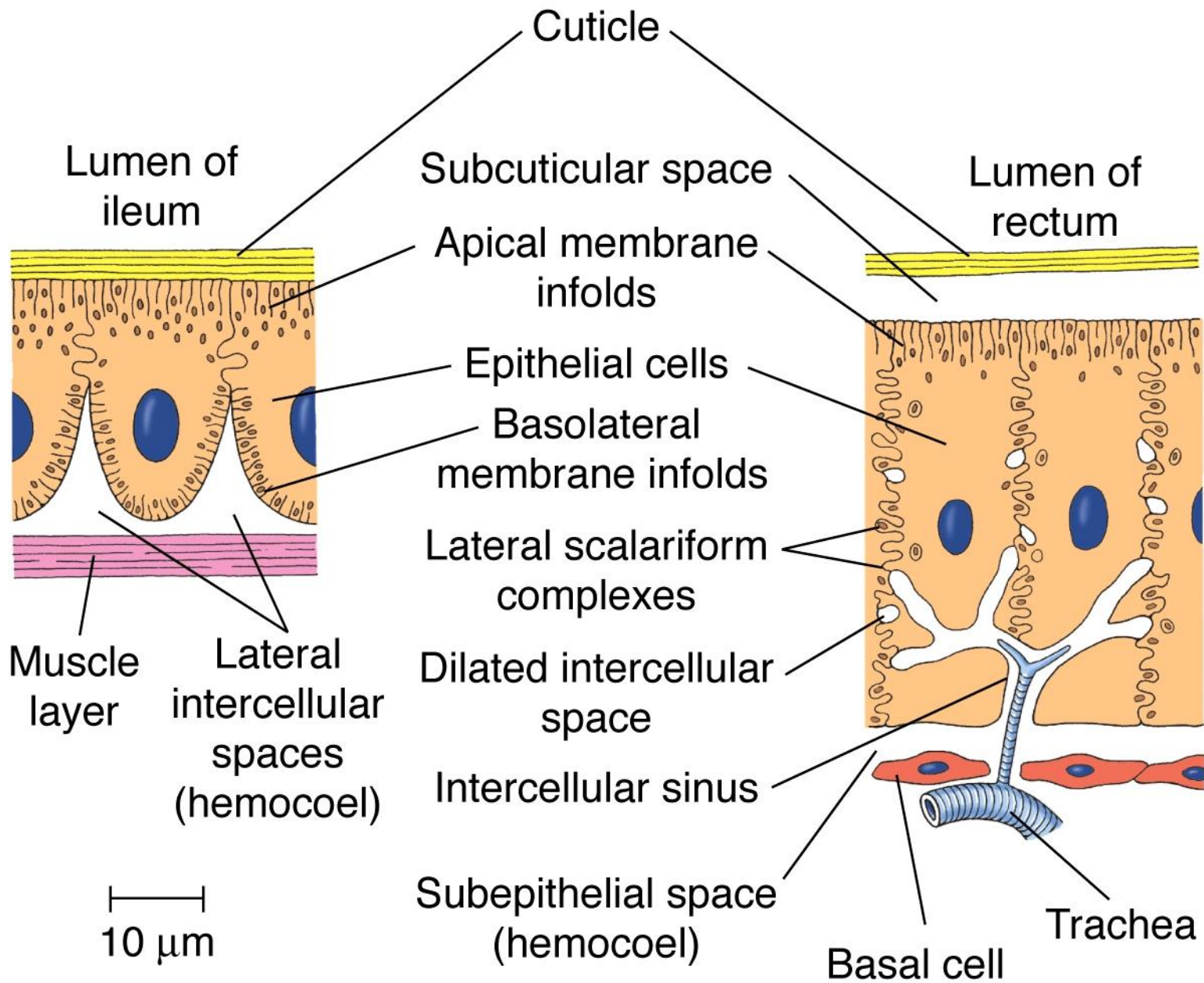


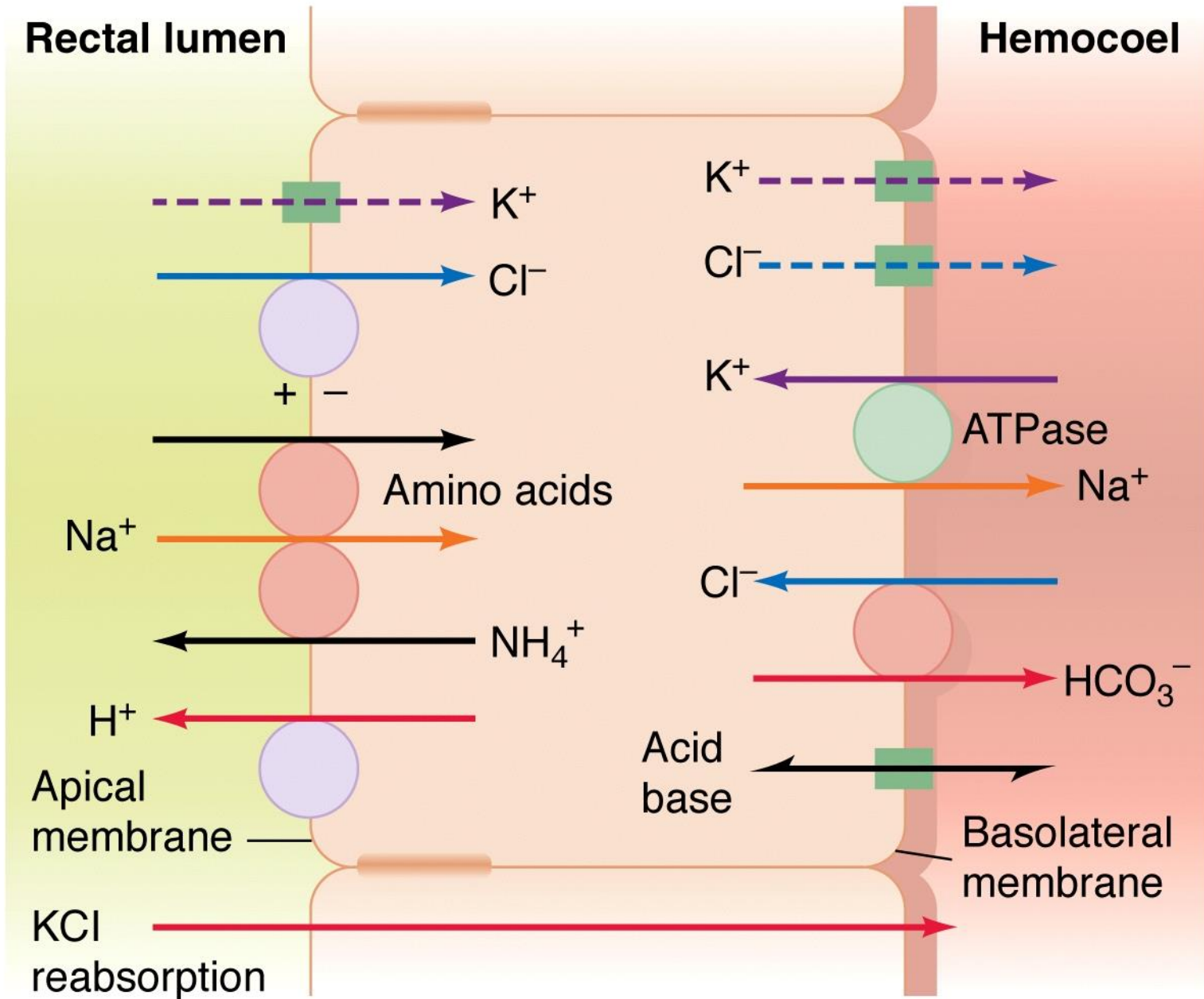
(a)

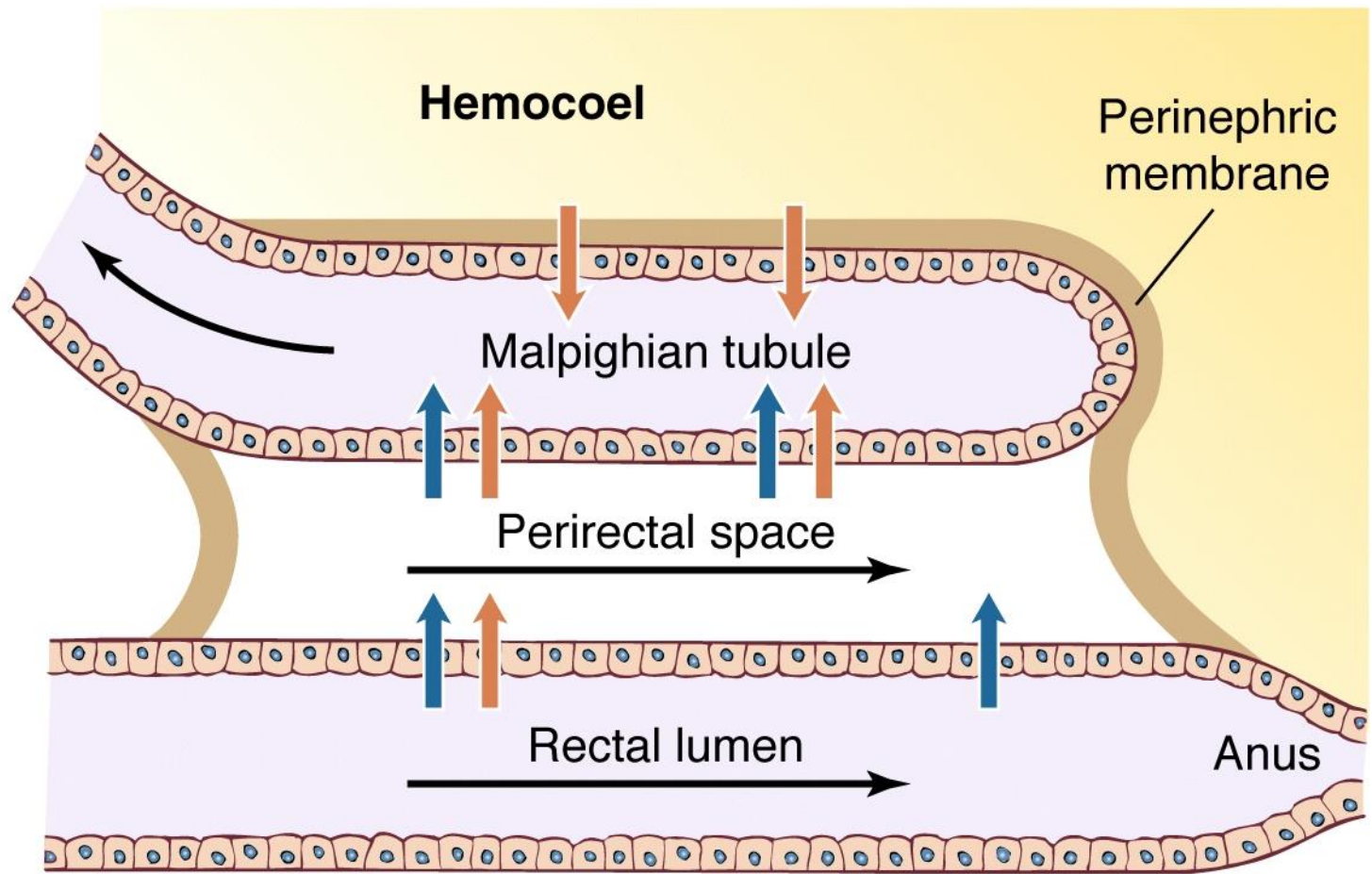


(b)

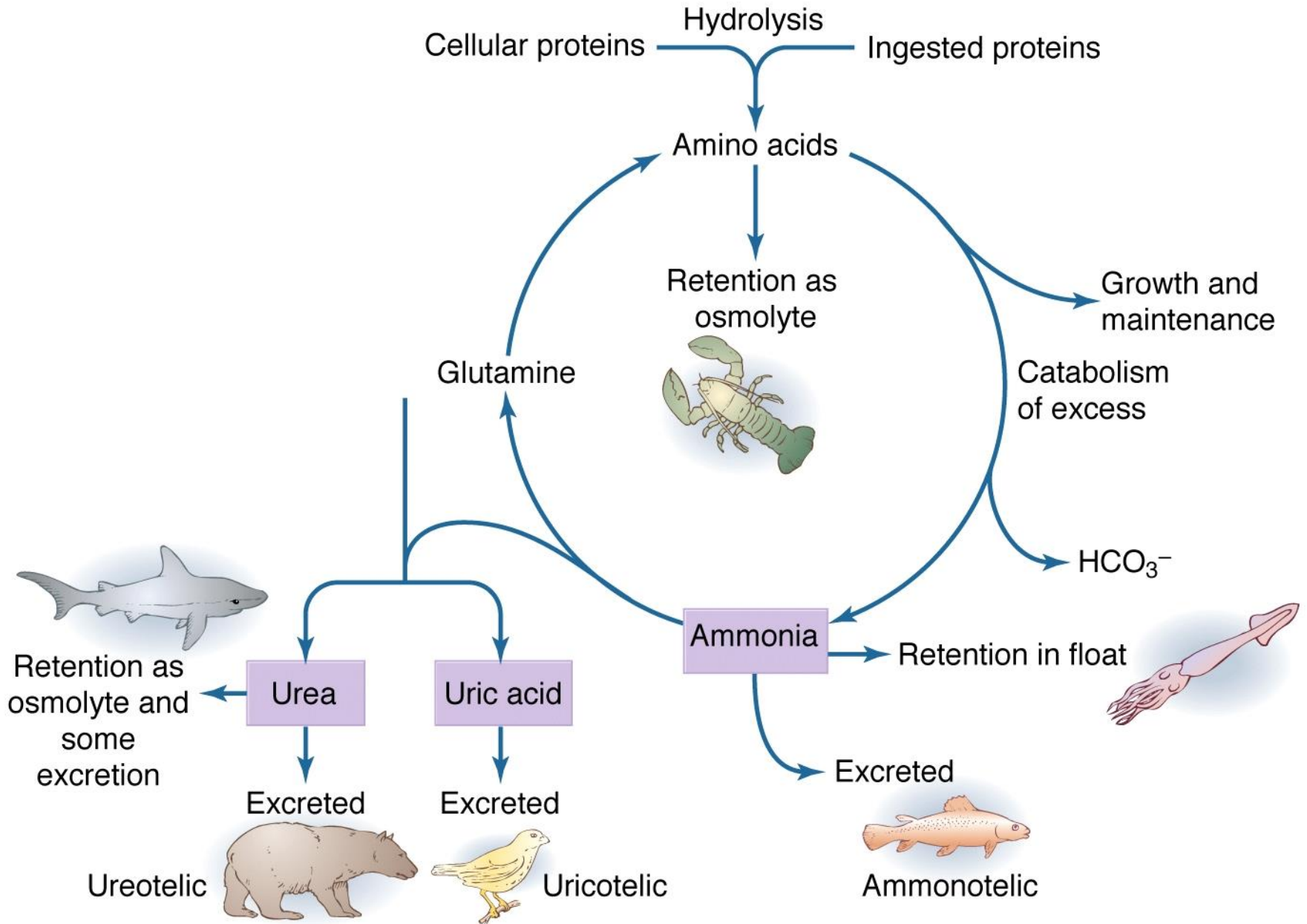


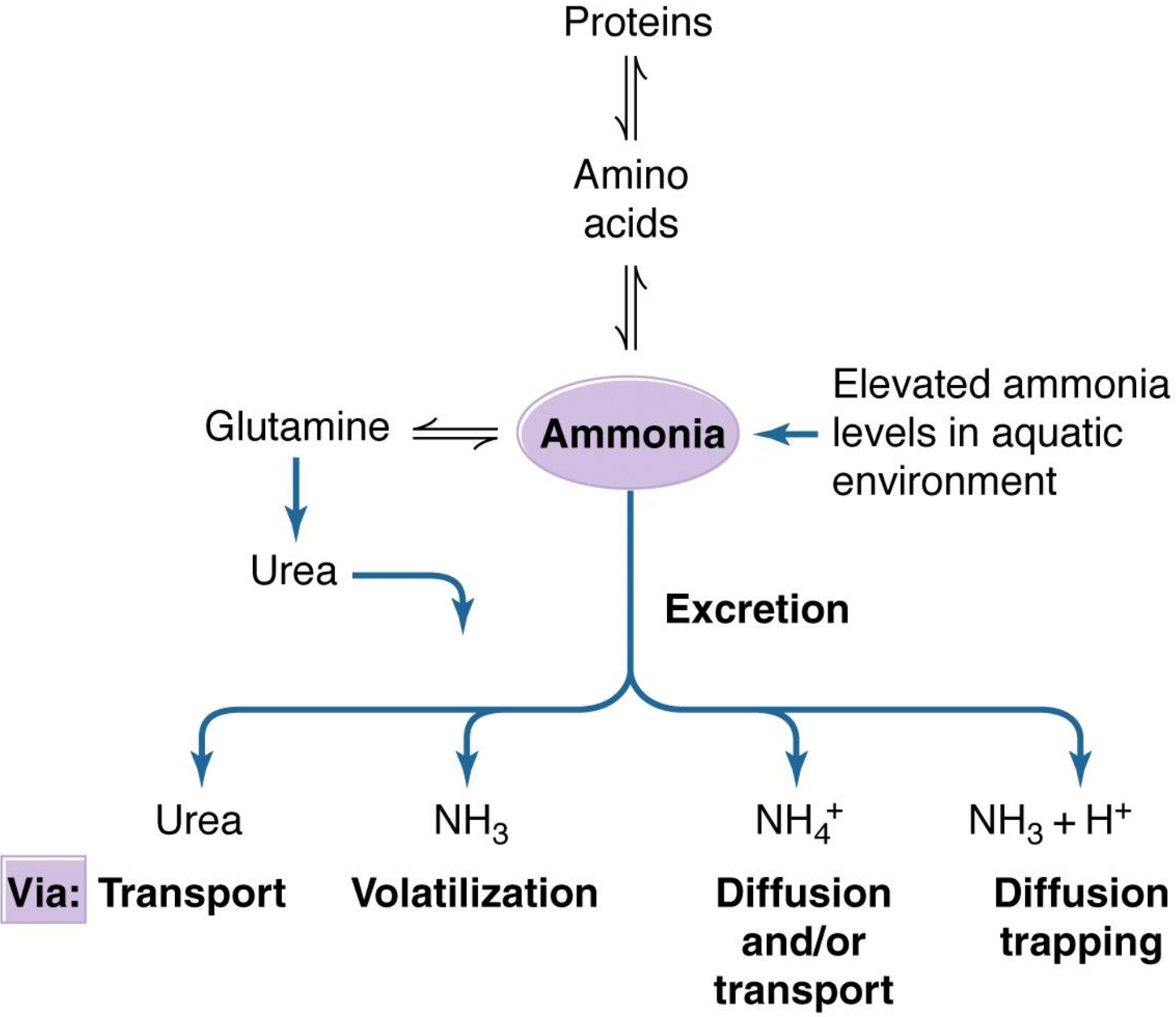


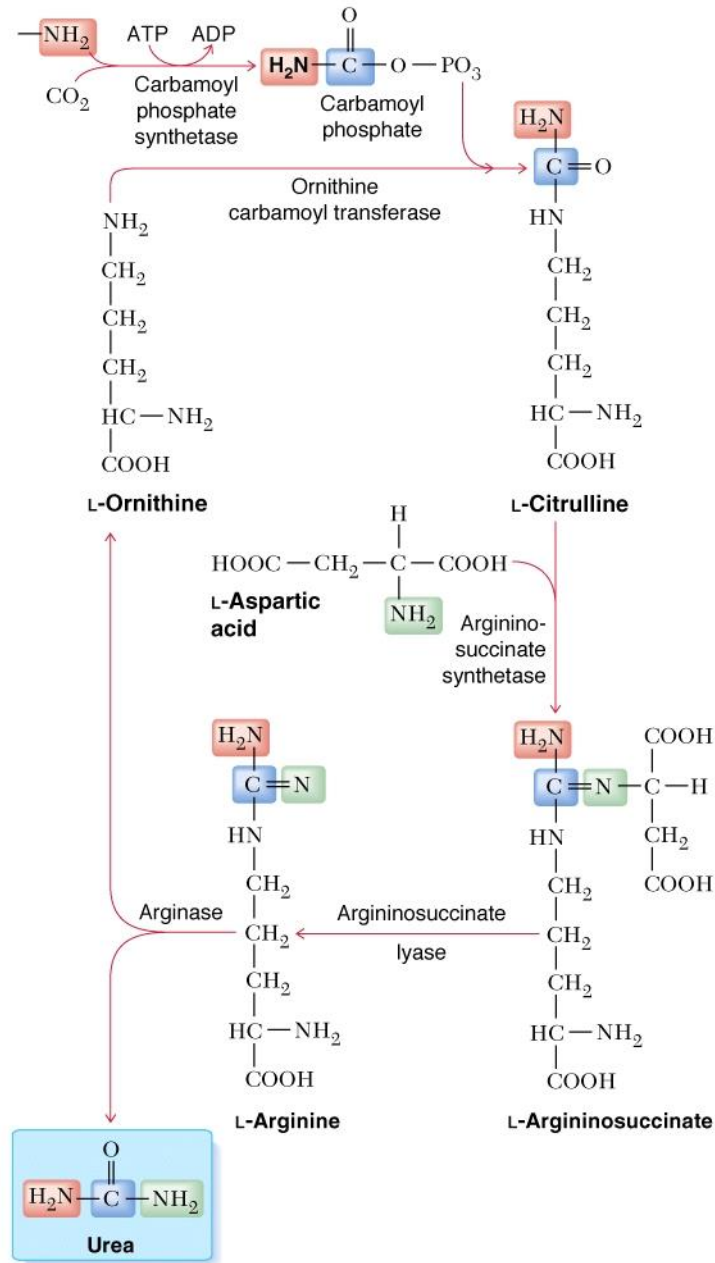


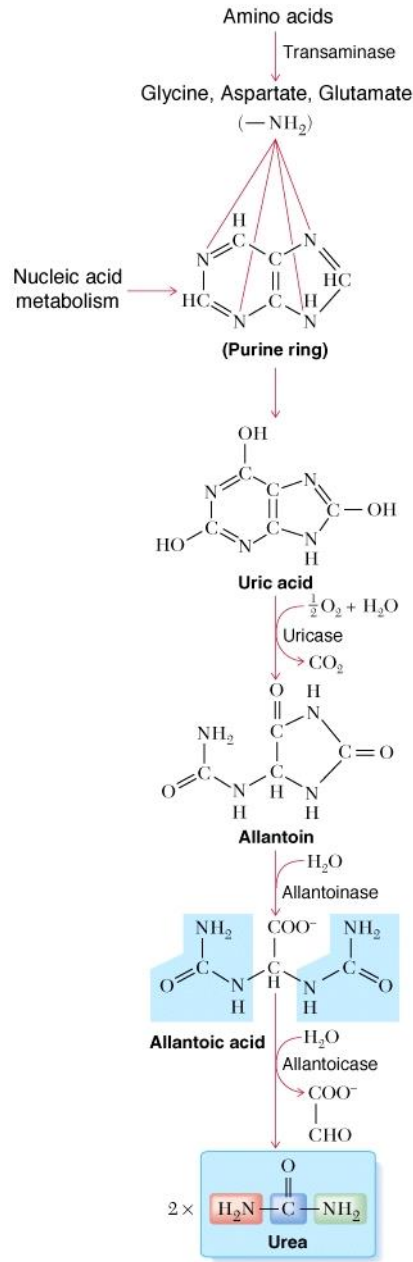


- Direction of bulk water flow
- Net water transfer
- Net KCl transfer









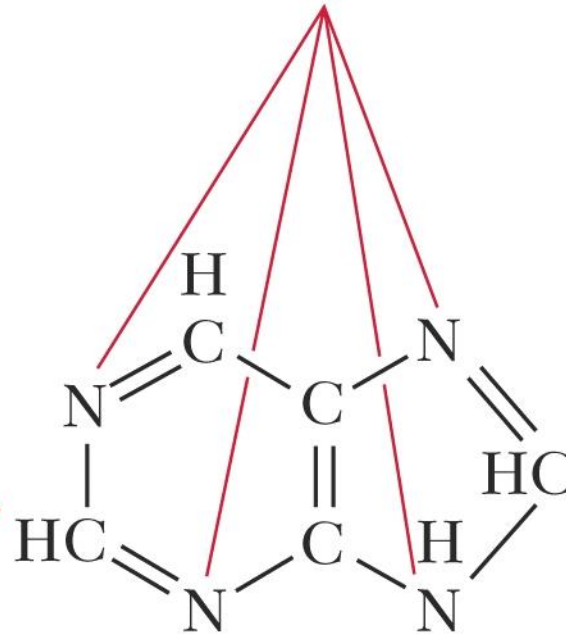
Amino acids

↓ Transaminase

Glycine, Aspartate, Glutamate

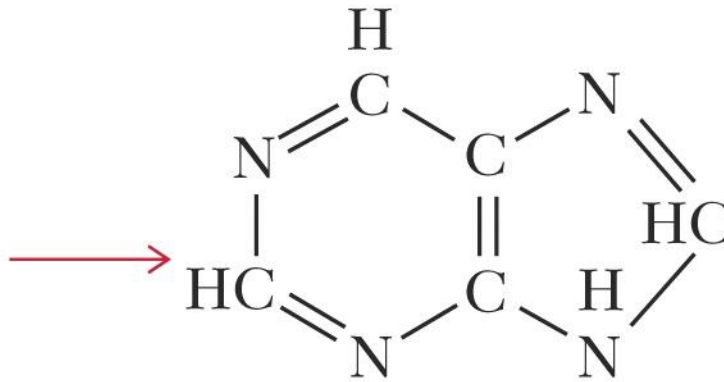
(—NH₂)

Nucleic acid
metabolism →

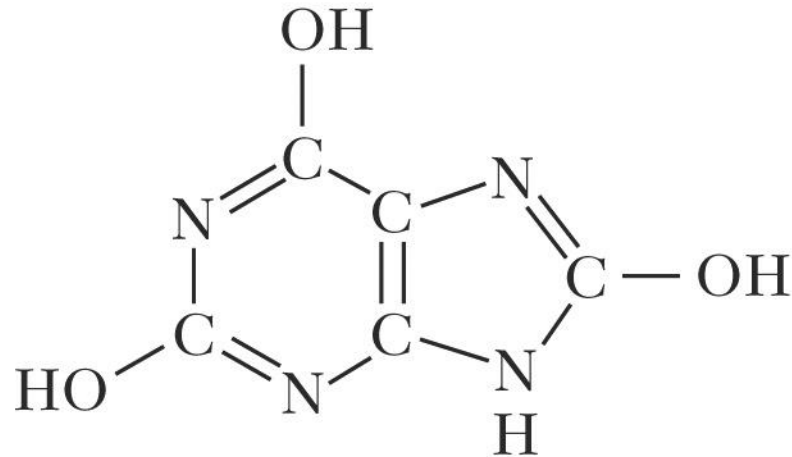


(Purine ring)

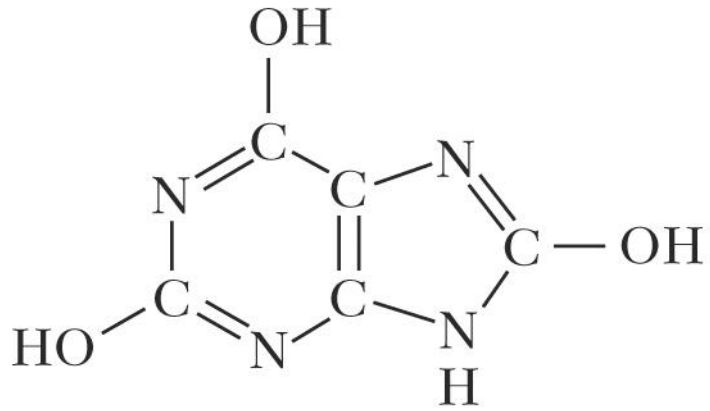
Nucleic acid
metabolism



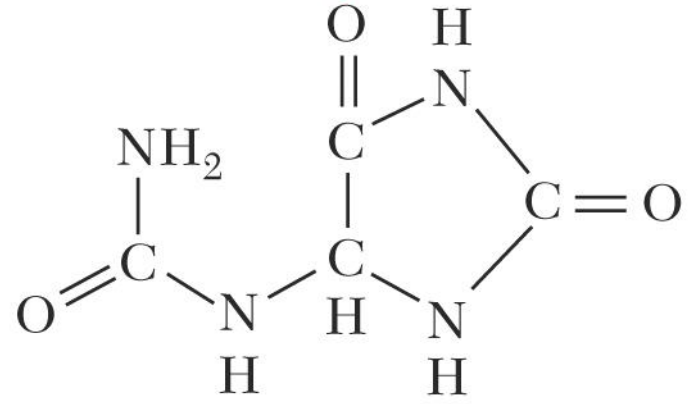
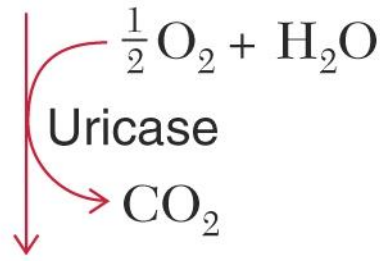
(Purine ring)



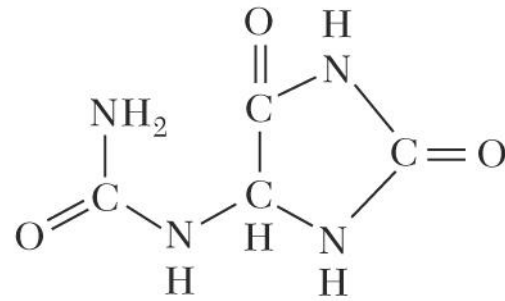
Uric acid



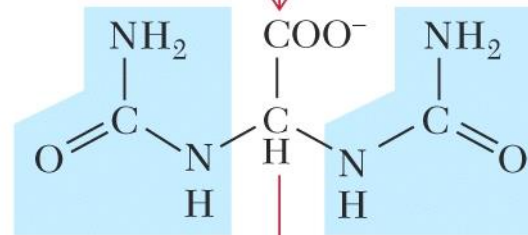
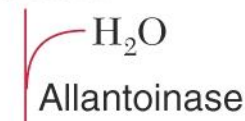
Uric acid



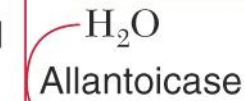
Allantoin



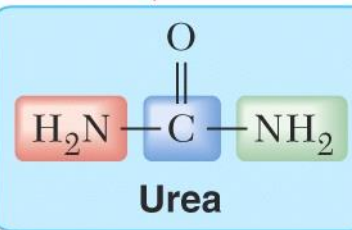
Allantoin



Allantoic acid



2 ×



Urea

