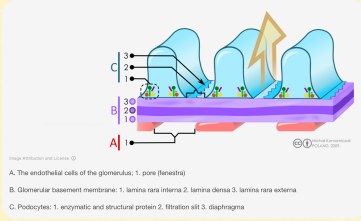
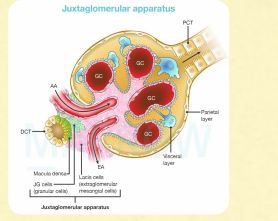


Agents causing Relaxation and Contraction of the Mesangial Cells

Relaxation	Contraction
<ul style="list-style-type: none"> • ANP • Dopamine • PGF2 • cAMP 	<ul style="list-style-type: none"> • Endothelin • Angiotensin II • Vasopressin • Platelet-derived growth factor • Thromboxane A2 • PGF2 • Leukotrienes C4 and D4 • Histamine



Features	Cortical nephron	Juxtamedullary nephron
Location of glomerulus	Upper region of cortex	Near junction of cortex and medulla
% of total nephrons	85%	15%
Size of glomeruli	small	larger
Loop of Henle	Short	long
	extend up to outer layer of medulla	extend deep into the medulla
Efferent arterioles	Large diameter	Small diameter
	break into peritubular capillaries	continue as vasa recta
Rate of filtration	Slow	High
Major function	Excretion of waste products in the urine	Concentration of urine by countercurrent mechanism



Term	Equation
Clearance rate	Us x V / Ps
Glomerular filtration rate	Ulinulin x V / Pinulin
Clearance ratio	Ca/Cinulin
Effective renal plasma flow	ERPF=CPAH=UPAH xV / PPAH
Renal blood flow	RPF / (1 - Hematocrit)
Excretion rate	Us x V
Reabsorption rate	=Filtered load - Excretion rate =(GFR x Ps) - (Us x V)
Secretion rate	Excretion rate - Filtered load

Cs - clearance rate of substance "s"
 EPAH - PAH extraction ratio
 ERPF - effective renal plasma flow
 GFR - glomerular filtration rate
 P - plasma concentration
 PAH - para-aminohippuric acid
 PPAH - renal arterial PAH concentration
 RBF - renal blood flow
 RPF - renal plasma flow
 S - a substance
 U - urine concentration
 V - urine flow rate
 VPAH - renal venous PAH concentration

% of filtered Na reabsorbed	Part of nephron	Main transporter involved
60	PCT	Na ⁺ -H ⁺ exchanger
30	Thick ascending limb of the loop of Henle	Na ⁺ -2Cl ⁻ -K ⁺ cotransporter
7	DCT	Na-Cl cotransporter
3	Collecting ducts	ENaC channels (regulated by aldosterone to permit homeostatic adjustments)

Segment	Mechanism of Water Reabsorption
Proximal tubule(67%)	Osmosis, AQ 1
Loop of Henle (15%)	Descending thin limb only; aquaporin 1 channels
Distal convoluted tubule(9%)	No water reabsorption (Reabsorption + with ADH)
Collecting duct (β-17%)	Passive

Effect	GFR	RPF	FF(GFR/RPF)
Constriction of afferent arteriole (eg. Sympathetic stimulation)	↓ (caused by ↓ P _B)	↓	No change
Constriction of efferent arteriole (eg. angiotensin II)	↑ (caused by ↑ P _B)	↓	↑ (↑ GFR / ↓ RPF)
Increased plasma protein	↓ (caused by ↑ π _d)	No change	↓ (↓ GFR/unchanged RPF)
Decreased plasma protein	↑	-	↑
Ureteral stone / constriction of the ureter	↓ (caused by ↑ P _B)	No change	↓ (↓ GFR/unchanged RPF)

PCT	DCT
Brush border present in the apical membrane	No brush border
Cytoplasmic carbonic anhydrase (type 2 & type 4) present	Cytoplasmic carbonic anhydrase (type 2 only)
Has 'leaky' tight junctions	Has 'tight' tight junctions
Paracellular transport is possible via leaky tight junctions	No paracellular transport

Summary of Transport Across Proximal and Distal Portions of the Nephron

Proximal Tubule	Distal Tubule and Collecting Duct
<p>67% of filtered Na⁺ actively reabsorbed; not subject to control; Cl⁻ follows passively</p> <p>All filtered glucose and amino acids reabsorbed by secondary active transport; not subject to control</p> <p>Variable amounts of filtered PO₄³⁻ and other electrolytes reabsorbed; subject to control</p> <p>65% of filtered H₂O osmotically reabsorbed; not subject to control</p> <p>50% of filtered urea passively reabsorbed; not subject to control</p> <p>Almost all filtered K⁺ reabsorbed; not subject to control</p>	<p>Variable H⁺ secretion, depending on acid-base status of body</p> <p>Organic ion secretion; not subject to control</p>
<p>Variable Na⁺ reabsorption, controlled by aldosterone; Cl⁻ follows passively</p> <p>Variable H₂O reabsorption, controlled by vasopressin</p>	<p>Variable H⁺ secretion, depending on acid-base status of body</p> <p>Variable K⁺ secretion, controlled by aldosterone</p>

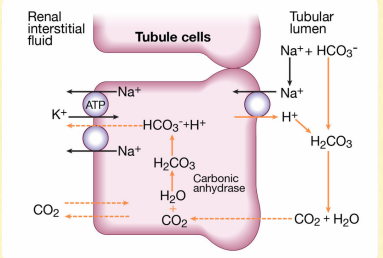
Inherited Causes of Nephrotic Syndrome

Gene involved	Protein	Disease Phenotype	Inheritance Pattern
NPHS1 (CA 19q)	Nephrin	Congenital Nephrotic syndrome (Finnish Type)	Autosomal recessive
NPHS2 (CA 1q)	Podocin	Steroid resistant nephrotic syndrome	Autosomal recessive
TRPC6	Transient receptor potential cation channel 6	Adult onset FSGS	Autosomal dominant
ACTN4	Alpha-actinin 4	FSGS	Autosomal dominant

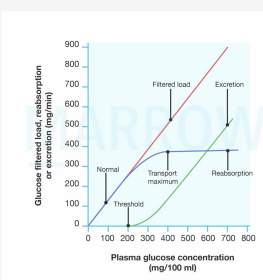
Tubule Characteristics

Segments	Active NaCl Transport	Permeability		
		H ₂ O	NaCl	Urea
Proximal tubule	++	++	+	+
Thin descending limb	0	++	+	-
Thin ascending limb	0	0	+	+
Thick ascending limb	++	0	0	0
Distal tubule	+	+ADH	0	0
Cortical collecting duct	+	+ADH	0	0
Inner medullary collecting duct	+	+ADH	0	+ADH

KEY: ADH, antidiuretic hormone; NaCl, sodium chloride; 0, minimal level of active transport or permeability; +, moderate level of active transport or permeability; ++, high level of active transport or permeability; +ADH, permeability to water or urea is increased by ADH.



Splay is due to separation between filtered load and excretion. It occurs due to different transport maximums of different nephrons.



Formulae in renal physiology

Term	Equation
Clearance rate	Us x V / Ps
Glomerular filtration rate	Ulinulin x V / Pinulin
Clearance ratio	Ca/Cinulin
Effective renal plasma flow	ERPF=CPAH=UPAH xV / PPAH
Renal blood flow	RPF / (1 - Hematocrit)
Excretion rate	Us x V
Reabsorption rate	=Filtered load - Excretion rate =(GFR x Ps) - (Us x V)
Secretion rate	Excretion rate - Filtered load

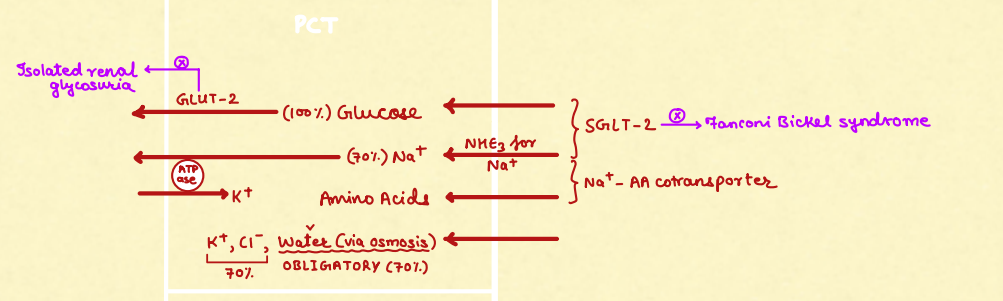
Cs - clearance rate of substance "s"

Transport Proteins involved in the Movement of Na+ and CL- across the Apical Membranes of Renal Tubular Cells

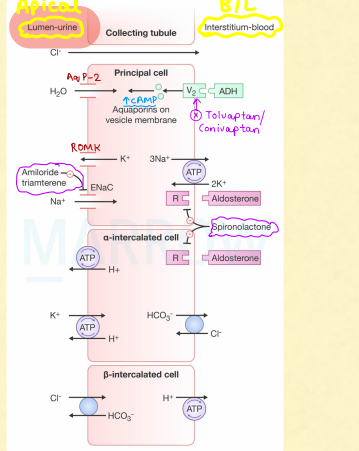
Site	Apical transport	Function
Proximal tubule(60%)	Na ⁺ /glucose co transport	Na ⁺ uptake, glucose uptake
	Na ⁺ /inorganic phosphate Cotransporter	Na ⁺ uptake, phosphate uptake
	Na ⁺ amino acid Cotransporter	Na ⁺ uptake, amino acid uptake
	Na ⁺ /lactate Cotransporter	Na ⁺ uptake, lactate uptake
	Na ⁺ /H ⁺ exchanger	Na ⁺ uptake, H ⁺ extrusion
Thick ascending limb(30%)	Cl ⁻ / base exchanger	Cl ⁻ uptake
	Na ⁺ -K ⁺ -2Cl ⁻ Cotransporter	Na ⁺ uptake, Cl ⁻ uptake, K ⁺ uptake
Distal convoluted tubule(7%)	Na ⁺ /H ⁺ exchanger	Na ⁺ uptake, H ⁺ extrusion
Collecting duct(3%)	NaCl Cotransporter	Na ⁺ uptake, Cl ⁻ uptake
	Na ⁺ channel (ENaC)	Na ⁺ uptake

Basolateral

Apical (urine)



COLLECTING DUCT



Descending limb of LOH 300mOsm
 H₂O ← Aquaporin - 1

Ascending limb of LOH 1200 mOsm
 Na⁺-K⁺-2Cl⁻ ← N⁺ K⁺ 2Cl⁻ cotransporter ⊕ Loop Diuretics



* SGLT-2 defect :- Fanconi-Baker syndrome

GLUT-2 defect :- Isolated Renal Glycosuria

* Cl^- exists in Basolateral $\text{Cl}^- \text{NKR}$ (Chloride channel KR) & Baxtin a protein in the cell membrane is essential for Normal functioning of $\text{Cl}^- \text{NKR}$

Bartter's syn :- Loss of function mutation of any of the following :-

i) $\text{Cl}^- \text{NKR}$, ii) ROMK , iii) $\text{Na} - \text{K} - 2\text{Cl}^-$ & iv) Baxtin

Characterised by \rightarrow Hypovolemia (Chronic Na^+ loss), Hypokalemia & Alkalosis

\rightarrow overacting ENa^+ channels \rightarrow Liddle's Syndrome

* Defect in NCC ($\text{Na}^+ \text{Cl}^-$ symporter) \rightarrow Gitelman Syndrome