

Oxygen dissociation curve:

The effect of carbon dioxide and acidity favour the formation of Oxyhaemoglobin at low concentration of CO₂ and H⁺ ion and causes the dissociation of Oxyhaemoglobin releasing O₂ at high concentration of CO₂ and H⁺ ion.

This shift in curve of oxyhaemoglobin due to concentration of carbondioxide at given partial pressure of oxygen, is known as Bohr effect.

The amount of Oxygen take up by Haemoglobin at particular time to from Oxyhaemoglobin is called percentage saturation.

The graph of percentage of O₂ saturation of haemoglobin plotted against partial pressure of Oxygen (PO₂) is called Oxygen dissociation curve.

The Oxygen dissociation curve is S-shaped (sigmoidal shape).

The curve indicates that haemoglobin has high affinity to Oxygen.

In human arterial blood have PO₂ of about 95-100 mmHg, at this level percentage of O₂ saturation of Hb is

about 97 %. This indicates the formation of Oxyhaemoglobin is favoured.

Similarly, the venous blood have PO₂ of 40mmHg, at this level percentage of O₂ saturation of Hb is about 70%.

Effect of Carbon-dioxide on Oxygen dissociation curve:

The effect of CO₂ on Oxygen dissociation curve is known as Bohr effect.

It has been found that increase in concentration of CO₂ decreases the amount of oxyhaemoglobin formation.

According to **Bohr effect**, for any particular partial pressure of Oxygen, the affinity of Haemoglobin toward Oxygen decreases and favors dissociation of oxyhaemoglobin when the partial pressure of carbondioxide increases.

It means, higher CO₂ concentration causes the dissociation of HbO₂ releasing free O₂.

Increase in PCO₂ shifts the O₂ dissociation curve downwards. Higher PCO₂ lowers the affinity of haemoglobin for O₂.

PpO₂...23...40%; PPO₂...26..50%; PPO₂..30..60%;
PPO₂.40...75%;PPO₂

45..80%;PPO2..61..90%;PPO2..80..95%...PPO2..100..97
%

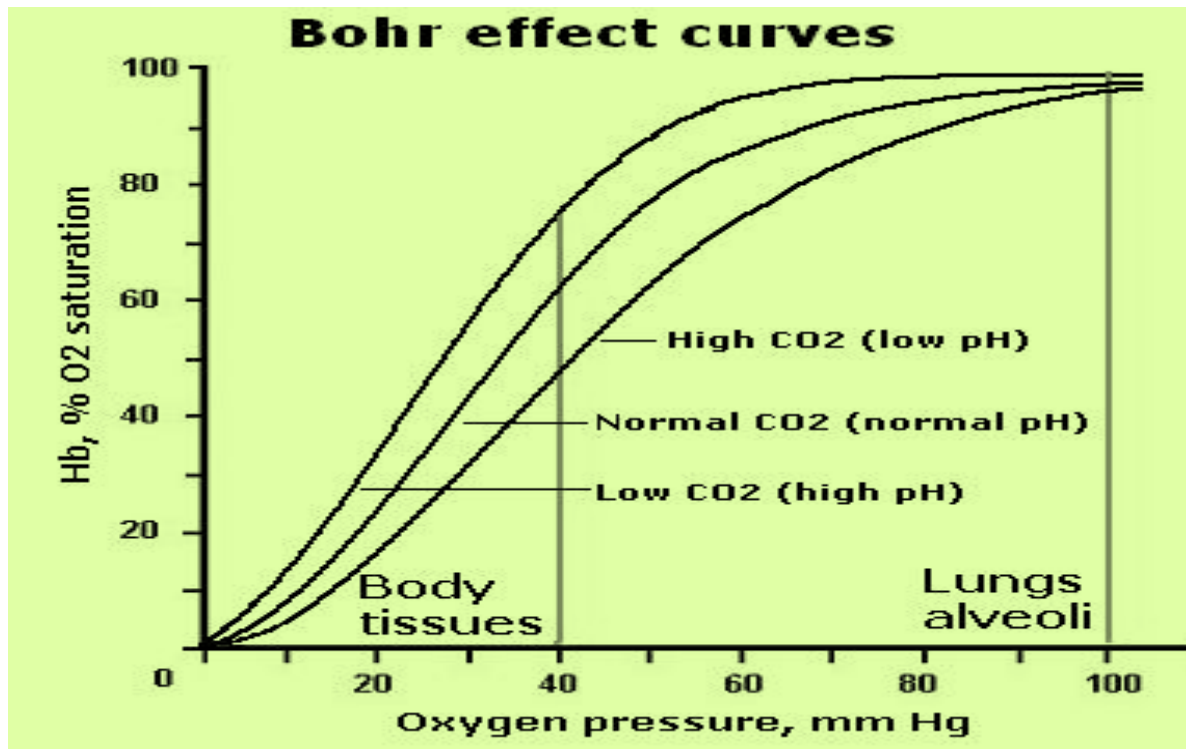


Fig. Oxygen dissociation curve of haemoglobin at different partial pressure of CO₂

Bohr effect is very important physiological phenomenon, because uptake of oxygen in lungs and its releases in the tissue is regulated by the concentration of CO₂ and H⁺ ion as well as the partial pressure of O₂. So, this phenomenon made possible the cellular transport and release of O₂.

PCO₂ is lower in lungs than tissue, so Hb has higher affinity for O₂, therefore it favors HbO₂ formation and

transport of O₂ from lungs to tissue. similarly PCO₂ is higher in tissue, so it favors dissociation of HbO₂ releasing free O₂ and transport of CO₂ from tissue to lungs.

Factors affecting Dissociation of Oxy-hemoglobin:

a. Temperature:

- (i) A rise in temperature decreases hemoglobin saturation.
- (ii) At 25°C, hemoglobin is 88% saturated but at 37°C, it is only 56% saturated. Therefore, hemoglobin gives up oxygen more readily while passing from high to low oxygen tension (as from lungs to tissues) in warm-blooded animals than in coldblooded animals.

b. Electrolytes:

At low oxygen tensions, oxy-hemoglobin gives up oxygen more readily in the presence of electrolytes.

c. Effect of CO₂:

- (i) The influence of CO₂ on the shape of the dissociation curve is actually the effect of carbonic acid formation with the lowering of the pH of the environment.
- (ii) The increase in acidity facilitates the dissociation of oxy-hemoglobin.
- (iii) The ability of CO₂ to shift the slope of the oxy-hemoglobin dissociation curve to the right is known as the Bohr effect. This effect is often described as causing a

shift of the P-50 to the right. P-50 is the partial pressure (mm Hg) at which hemoglobin is 50% saturated. 1, 3-biphosphoglycerate, a compound formed during glycolysis in the red cell, also causes a significant shift of the P-50 to the right.

HSO