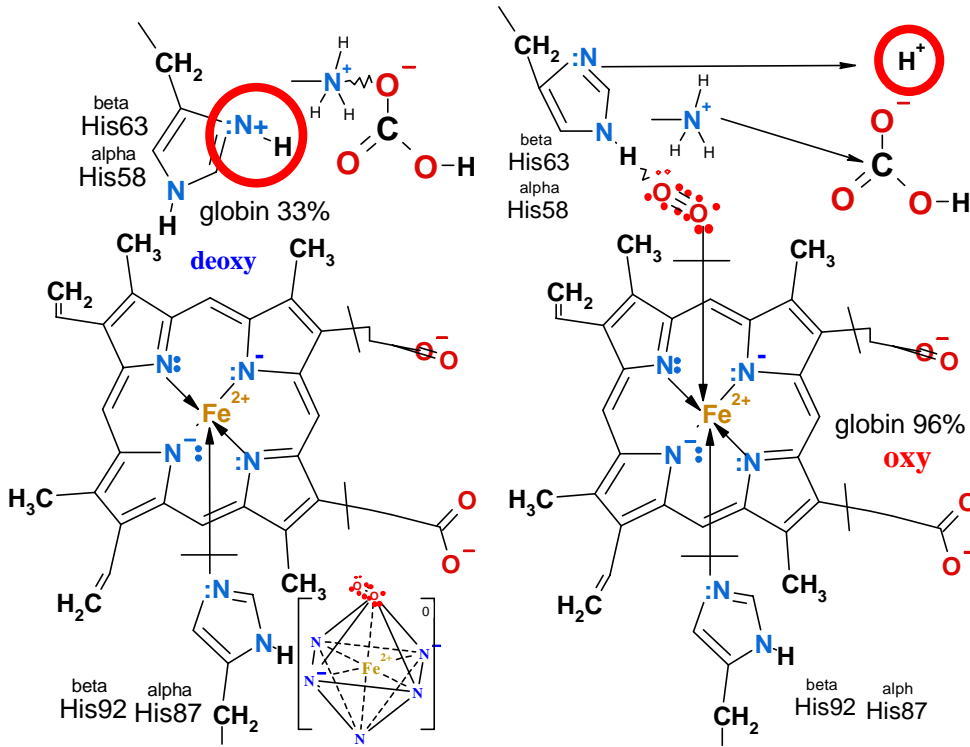


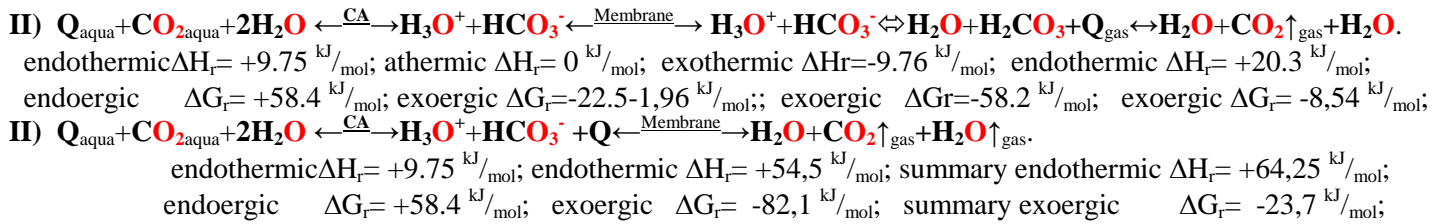
Shuttle deoxy - oxy hemoglobin with Carbonic Anhydrase enzyme in **O₂** , **CO₂** metabolism stabilize physiologic pH=7.36 and oxygen arterial concentration [**O₂blood**]=6·10⁻⁵ M

I) Oxygen **O₂** from **AIR** 20.95% **O₂**↑gas assimilation reaction dissolution in water to form **O₂aqua** exothermic $\Delta H_r = -55.7 \text{ kJ/mol}$ and exoergic $\Delta G_r = -27.7 \text{ kJ/mol}$ as water soluble **1) O₂AIR+H₂O ⇌ H₂O+O₂aqua +Q+ΔG**. Penetrate in Human body through aquaporins osmosis by concentration gradient [**O₂**]=9,768·10⁻⁵ M to **venous** blood [**O₂**]=1,85·10⁻⁵ M $\Delta G_{O_2} = RT \ln([\text{O}_{2\text{Blood}}]/[\text{O}_{2\text{aqua}}]) = -4,29 \text{ kJ/mol}$ exoergic movement: 2) **O₂aqua + H₂O** ^{Aquaporins} → **H₂O+O₂aqua +ΔG** $\Delta G_{H_2O} = RT \ln([\text{H}_2\text{O}]_{\text{right}}/[\text{H}_2\text{O}]_{\text{left}}) = -8,3144 \cdot 310,15 \cdot \ln(0,305/0,2) = -1.088 \text{ kJ/mol}$ exoergic $\Delta G_{O_2+} = -5,379 \text{ kJ/mol}$. **4O₂aqua** from blood plasma adsorbs **deoxy** hemoglobin **Hb_T** of inspired fresh **AIR** releases four protons **4H⁺**, **4HCO₃⁻**: **4O₂aqua+(H⁺His63,58)₄Hb_T·salt bridges(HCO₃⁻)₄ ⇌ Hb_R(O₂)₄+4H⁺+4HCO₃⁻** stabilizing arterial concentration [**O₂**]=6·10⁻⁵ M. [**O₂Blood**]=6·10⁻⁵ M concentration sensitive equilibrium **(H⁺His63,58)₄Hb_T ⇌ Hb_R(O₂)₄** shift to right regulates erythrocytes glycolysis metabolite **BPG⁵⁻** as two **phosphate 2,3-esters G⁻ H₂COPO₃²⁻-HCOPO₃²⁻-COO⁻** glycerate dihydroxy acid salt with homeostasis concentration [**BPG⁵⁻**]=5 mM, so **BPG⁵⁻** pushed out of **cavity** to stabilize and store reserves 459 times higher as arterial blood concentration [**O₂Blood**]=6·10⁻⁵ M amount [**O₂amount**]=459·6·10⁻⁵ M=0,02754 M. [O2Solutions.pdf](#). Oxygen adsorbs by donor-acceptor bond on iron(II) **Fe²⁺** in coordination center of heme and releases four protons **H⁺** **Hb_R(O₂)₄+4H⁺**. Proton water sticks **H⁺+H₂O→H₃O⁺** forms hydroxonium ion. *In tissues* desorbed oxygen [**O₂desorbed**] restore oxygen concentration [**O₂**]=6·10⁻⁵ M in blood plasma 459 times and **deoxy**-hemoglobin capture four protons **H⁺** **(H⁺His63,58)₄Hb_T** so keeps continuously pH=7,36±0,01.



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Oxygen desorbed Krebs cycle converts to mitochondrial oxidative phosphorylation product **CO₂aqua· II** pathway with carbonic anhydrase (CA) shift to right concentration gradient **CO₂** produces amount 0,0339 M **HCO₃⁻**. Shuttle **deoxy** hemoglobin **Hb_T** capture [**H⁺**]=0,0275 M. So is stabilized constant pH=7,36±0,01 value.



Shuttle is venous **deoxy Hb_T**, adsorbs four molecules **4O₂** from fresh **AIR**, acidify water medium with **4H⁺**, promoting **CO₂** breathe out: Each **H⁺** and **HCO₃⁻** ion amount [**H⁺**]=459·6·10⁻⁵ M=0,0275 M=[**HCO₃⁻**] shifts equilibrium to right **H⁺+HCO₃⁻+Q⇌H₂O+CO₂↑_{gas}** via membrane channels. So pH=7,36 remains constant, as one bicarbonate ion and one hydrogen ion produce one **CO₂** right side.

The epithelial cell surface of **lungs** has the specific building surface as square area is: S=950 nm x 950 nm= 0.9 μm² on super thin 0.6 nm layer within water small volume: 0.5415·10⁻³ μm³ = 0.5415·10⁻¹⁸ L. Created acidity in thin water layer volume increases up to pH=5.5 if one proton **H⁺** crosses the membrane channels reaching the surface so hydrogen ion concentration is: [**H₃O⁺**]=10^{-pH}=10^{-5.5} M. Respiration of fresh **AIR** in lungs Hemoglobin released protons **H⁺** during oxygen adsorbtion for total amount concentration:

[**O₂adsorbed**]=[**H₃O⁺**]=459·6·10⁻⁵ M= 0,02754 M forms hydrogen ion [**H₃O⁺**]_{right}/[**H₃O⁺**]_{left}=10^{-5.5}/0,0275 concentration gradient, which drives exoergic $\Delta G = -22,5 \text{ kJ/mol}$ proton movement through epithelial cell membrane proton channels: **H₃O⁺** _{left} $\xleftarrow{\text{proton channel}}$ **H₃O⁺** _{right} +ΔG. General process **H₂O+CO₂↑_{gas}+H₂O↑_{gas}** require heat supply endothermic $\Delta H = 54,5 \text{ kJ/mol}$ to drive spontaneous $\Delta G = -82,0679 \text{ kJ/mol}$ products evaporation **CO₂↑_{gas}** and **H₂O↑_{gas}** keeping moisture **H₂O** on surface of membrane. Hydrogen ions water acidity shift endothermic $\Delta H_r = +54,5 \text{ kJ/mol}$ and exoergic $\Delta G_r = -82,1 \text{ kJ/mol}$ decomposition **H₃O⁺+HCO₃⁻** breath out to **AIR CO₂↑_{gas}** with **H₂O↑_{gas}**:
 endothermic $\Delta H_r = +54,5 \text{ kJ/mol}$; **H₃O⁺+HCO₃⁻+Q** $\xleftarrow{Membrane}$ **H₂O+CO₂↑_{gas}+H₂O↑_{gas}** + ΔG_r = -82,1 kJ/mol. exoergic .

Brønsted Acid/Base CA and hemoglobin shuttle enzymes of O_2 , $CO_{2\text{aqua}}/HCO_3^- + H^+$

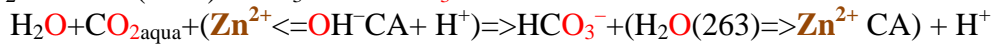
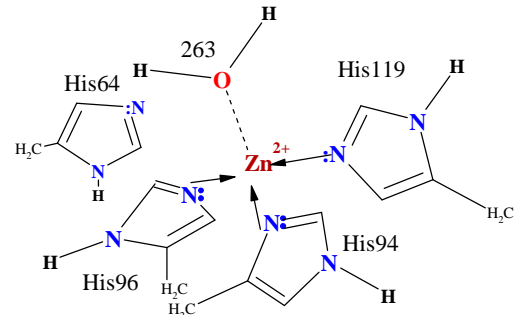
Enzyme **Carbonic anhydrase (CA)** made acid/base equilibrium $H_2O-CA-CO_2/HCO_3^- + H_3O^+$

There are **shuttle** buffer systems, that act in the human organism and allow **pH** of the organism to be stabilized constant in narrow interval allowed changes ($pH = 7.36_{-0,01}^{+0,02}$) despite the fact, that organism

produces great amount of metabolic $[CO_{2\text{Krebs}}] = 0,0275$ M. The CA made amount of acidic products is $[H_3O^+] = [HCO_3^-] = 0,01695$ M compensated by buffer solution. CA buffer of blood are connected to **shuttle** hemoglobin captured proton H^+ by oxygen $O_{2\text{aqua}}$ desorbition due to Krebs product $CO_{2\text{aqua}}$ target cells *in tissues*:

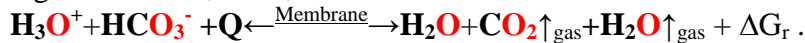
Hydrogen carbonate buffer system carbonic anhydrase equilibrium keeps weak acid $CO_{2\text{aqua}}$ and bicarbonate ions at homeostasis normal amounts $[HCO_3^-] = 0,0154$ M, $[CO_{2\text{aqua}}] = 0,0076$ M, referring to 56,23 mL (50-60 mL) released volume CO_2 from 100 mL blood as *alkaline reserve* 2,036 / 1 in clinic evaluation.

Carbon dioxide forms by oxidation of carbohydrates, of fats and of proteins. Bicarbonate is created as product in hydration $2H_2O$ of $CO_{2\text{aqua}}$ by CA enzyme Zn^{2+} ion active coordination center. It's location in enzyme carbonic anhydrase Zn^{2+} ion coordination pocket:

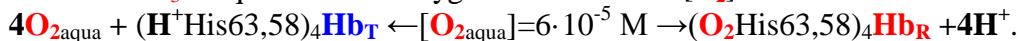


$Hb_R(O_2)_4 + 4H^+ \rightleftharpoons 4O_{2\text{aqua}} + (H^+His63,58)_4Hb_T$ stabilizing arterial concentration $[O_2] = 6 \cdot 10^{-5}$ M in blood. **Deoxy** hemoglobin $(H^+His63,58)_4Hb_T$ capture four protons $4H^+$ at histidine residues and $4HCO_3^-$ in venous hemoglobin form of erythrocytes **deoxy** $(H^+His63,58)_4Hb_T$ (**Tense** state). In **lungs shuttle** absorbs oxygen in arterial **oxy** hemoglobin $(O_2His63,58)_4Hb_R$ (**Relax** state) releasing $4H^+$ and $4HCO_3^-$.

1) First of four human buffer systems is enzyme CA made Brønsted Acid/Base endothermic equilibrium: $Q + CO_{2\text{aqua}} + 2H_2O \xleftarrow{CA} H_3O^+ + HCO_3^-$ which consume heat Q of Krebs cycle complexes exothermic reactions. Shift to right supported by high water $2H_2O$ concentration $[H_2O]^2 = (993,36/18,0153)^2 = 55,139^2 = 3040,4$ and by low stabilized $pH = 7,36 \pm 0,01$ of hydrogen ions H_3O^+ concentration $[H_3O^+] = 10^{-7,36}$ M in products. $CO_{2\text{Krebs}}$ as bicarbonate salt bridge linked $HCO_3^- \dots H_3^+N$ — and equal produced protons $[H^+] = [CO_{2\text{Krebs}}] = 0,0275 = [HCO_3^-]$ captures **deoxy** $(H^+His63,58)_4Hb_T$ **shuttle** and brings to **lungs**. **Lungs** evaporates $CO_2 \uparrow_{\text{gas}} + H_2O \uparrow_{\text{gas}}$ endothermic $\Delta H_r = +54,5$ kJ/mol, but exoergic $\Delta G_r = -82,1$ kJ/mol:



Symbol $(H^+His63,58)_4Hb_T$ to a **Shuttle** molecule of **deoxy** hemoglobin is inconvenient to write every time the complicated structure of hemoglobin. **Deoxy** hemoglobin is capturing and **oxy** hemoglobin completely deprotonated $4H^+$ and $4HCO_3^-$. Equilibrium is oxygen concentration $[O_2] = 6 \cdot 10^{-5}$ M sensitive:



Lungs venous blood hemoglobin saturation with oxygen 459 times restore circulated arterial blood $[O_2] = 6 \cdot 10^{-5}$ M amount in one liter [O2Solutions.doc](#) Adsorbed four $4O_{2\text{aqua}}$ $(O_2His63,58)_4Hb_R + 4H^+ + 4HCO_3^-$ in products release four protons $4H^+$ and bicarbonate ions $4HCO_3^-$, promoting evaporation $CO_2 \uparrow_{\text{gas}} + H_2O \uparrow_{\text{gas}}$ on **lungs** epithelia surface, and removing out of organism $[H^+] = 459 \cdot 6 \cdot 10^{-5} = 0,0275$ M amount $H^+ + H_2O \Rightarrow H_3O^+$, that is equal to total by respiration evaporated $[CO_2 \uparrow_{\text{gas}}] = 0,0275$ M amount.

Shift to the left $(O_2His63,58)_4Hb_R + 4H^+ + 4HCO_3^-$ from **deoxy** captured **shuttle** $(H^+His63,58)_4Hb_T$ oxygen depending concentration $[O_2] = 6 \cdot 10^{-5}$ M adsorbition-desorbition equilibrium explain pH stabilization at 7.36.

That explain, why pH is not changed, despite Krebs cycle acid $CO_{2\text{aqua}}$ product which involved in CA equilibrium. Henderson-Haselbalh homeostasis pH value expression leave the ratio $[HCO_3^-]/[CO_{2\text{aqua}}] = 2,0263$ practically unchanged as intact both concentrations bicarbonate $[HCO_3^-]$ and carbon dioxide $[CO_{2\text{aqua}}]$:

$7.36 = pH = pK + \log([HCO_3^-]/[CO_{2\text{aqua}}]) = 7.0512 + \log([HCO_3^-]/[CO_2])$ and anti logarithm is being alkaline reserve $[HCO_3^-]/[CO_{2\text{aqua}}] = 10^{(pH-pK)} = 10^{(7,36-7,0512)} = 10^{0,3088} = 2,0361/1$. **Lungs** when in venous blood erythrocytes **deoxy** $(H^+His63,58)_4Hb_T$ (**Tense**) **Shuttle** hemoglobin by oxygen $O_{2\text{aqua}}$ adsorbition release of protons H^+ and HCO_3^- so in **Lungs** evaporates carbon dioxide $CO_2 \uparrow_{\text{gas}}$ as breathed out in AIR.

In such a way two equilibria stabilize arterial oxygen concentration $[O_{2\text{aqua}}] = 6 \cdot 10^{-5}$ M with **shuttle** hemoglobin by oxygen adsorbition-desorbition and CA buffer system made value $pH = 7,36$ with Krebs cycle drive the exchange metabolism of O_2 and CO_2 respiration to interface human body / environment.

2) Second buffer system, that is present in blood, is the protein buffer system. This one has to be explained a little more, as it differs from the usual buffer systems that are composed from weak acid/salt or weak base/salt. Like hemoglobin **Hb** proteins are long chain polypeptides of amino acids with four type protolytic acid groups:

Amino Acid	pK _{aCOOH}	pK _{aNH3+}	pK _{aRgroup}
Isoleucine	2.36	9.68	
Valine	2.32	9.62	
Leucine	2.36	9.60	
Phenylalanine	1.83	9.13	
Cysteine	1.96	10.28	8.18
Methionine	2.28	9.21	
Alanine	2.34	9.69	
Proline	1.99	10.96	
Glycine	2.34	9.60	
Threonine	2.11	9.62	
Serine	2.21	9.15	
Tryptophan	2.38	9.39	
Tyrosine	2.20	9.11	10.07
Histidine	1.82	9.17	6.00
Aspartate	1.88	9.60	3.65
Glutamate	2.19	9.67	4.25
Asparagine	2.02	8.80	
Glutamine	2.17	9.13	
Lysine	2.18	8.95	10.53
Arginine	2.17	9.04	12.48

-**COO⁻** deprotonated carboxyl negative anion salt groups,
 protonated positive charged ammonium groups -**NH₃⁺**,
 neutral phenolic acid -**OH** and -**SH** neutral sulfhydryl groups.

In physiologic medium pH=7,36 ±0.01

Carbonic acid groups deprotonated negative charged -**COO⁻** and amino groups **R-NH₃⁺** protonated positive charged.

Table given maximal pK_{a-COOH⁻} value smaller about 7,36:

$$pK_{a-COOH^-} = 4.25 < 7,36 \text{ and}$$

given smallest pK_{a-NH3+} value greater about 7,36 < 9,04 = pK_{a-NH3+}
 20 amino acids have four protolytic pK_a equilibria in 47 groups:

1. **R-COOH** ⇌ **R-COO⁻** + **H⁺**, 22 groups of 47
2. **R-NH₃⁺** ⇌ **R-NH₂** + **H⁺** 22+1 group of 47
3. **Tyrosine-phenol-OH** ⇌ **Tyrosine-phenolate-O⁻** + **H⁺** one group,
4. **Cysteine-SH** ⇌ **Cysteine-S⁻** + **H⁺** one group .

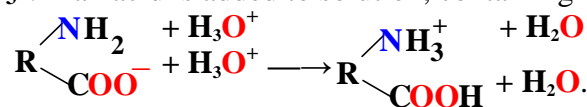
NpK_a number of parallel protolytic equilibria average pK_a value is calculated as pK_a=(Σ pK_{a R group}+ pK_{a-NH3+}+ pK_{a-COOH})/NpK_a

In *Ostwald's dilution law* calculates one the pH of solution at

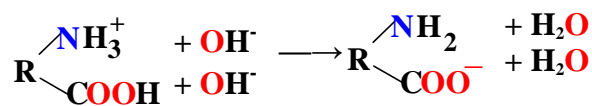
$$\text{concentration } C \text{ logarithm: } pH = \frac{pK_a - \log C}{2} = \dots$$

14th page: http://aris.gusc.lv/BioThermodynamics/Data_bookSpring2015CT.pdf

properties and acidic properties protonated ammonium groups -**NH₃⁺**. If an acid is added to solution, containing protein like hemoglobin Hb, the **H₃O⁺** ions will react with basic amino group and basic carboxylate group The strong acid **H₃O⁺** will be transformed into water the weak base **H₂O** .

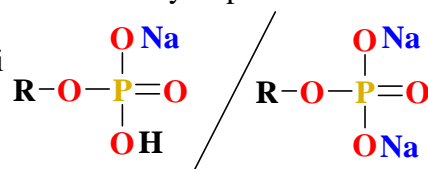


If a strong base is added to protein-containing solution, the **OH⁻** ions react with the carboxylic groups and the strong base **OH⁻** will be transformed into water the weak acid **H₂O**.

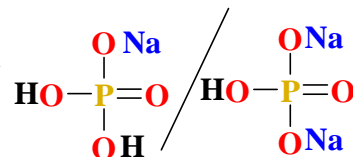


3) Biological important phosphate buffer system **NaH₂PO₄/Na₂HPO₄** pK=7,199 we will study as practical work.

4) Biological ubiquities exist besides the inorganic phosphate buffer system, buffer systems of the organic esters of phosphoric acid so as ATP (adenosine tri phosphate), ADP (adenosine di phosphate), CTP, CDP, GTP, GDP, TTP, TDP, UTP, UDP, NADH B₃ vitamin, FADH₂ B₂ vitamin, phospho proteins, glucose phosphate, fructose phosphate, etc. :



If there are any difficulties to understand the structure of last two groups of compounds , remember, that phosphoric acid can be shown in structure as in the ester of phosphoric acid one of the hydrogen atoms is replaced by an organic radical. Practically the buffer system consists of a mono substituted and bi substituted salts of the ester. Likely as for phosphates **NaH₂PO₄/Na₂HPO₄**.



Not all of these 4 buffer systems act in the same organism body water solutions.

In *erythrocytes* main are bicarbonate buffer with **shuttle** hemoglobin-based proton oxygen **O₂aq** sensitive exchange: (**O₂His63,58**)₄**Hb_R** + **4H⁺** ← [**O₂aq**]=6·10⁻⁵ M → **4O₂aq** + (**H⁺His63,58**)₄**Hb_T** . Krebs cycle product **CO₂aq** exchanged to bicarbonate buffer solution: **Q**+**CO₂aq**+**2H₂O** ←^{CA}→**H₃O⁺**+**HCO₃⁻**.

In blood *plasma* dominate enzyme **CA** bicarbonate **pH=7.36±0,01**, protein and phosphate buffer solutions.

In sweat, urine and digestive apparatus dominates bicarbonate system and phosphate system is too present.

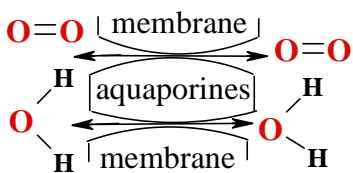
Besides the normal "chemical" mechanisms of buffer action in maintaining constant **pH=7.36±0,01**, with **deoxy** hemoglobin (**H⁺His63,58**)₄**Hb_T** (**Tense** state), **oxy** hemoglobin (**O₂His63,58**)₄**Hb_R** (**Relax** state) and with carbonic anhydrase **CA** driven bicarbonate buffer systems are a joint physiological mechanism of action, which carries out the exchange of breathed in **O₂** and breathed out **CO₂** between AIR in *lungs* and tissues on interface human body / environment.

Human **shuttle hemoglobin-bicarbonate** buffer system and Krebs cycle driven respiration from AIR **O₂** and breathed out **CO₂** action **physiologic** mechanism

Before we have to order three molecules involved in the buffer systems. The **shuttle oxy** hemoglobin, second is **carbonic anhydrase CA** with constant value $pK=7.0512$ and **shuttle deoxy** hemoglobin:

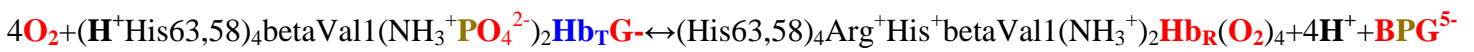
oxy Hb_R(O₂)₄ + 4H⁺ <=> deoxy (H⁺_{His63,58})₄Hb_T + 4O_{2aqua}, where completely deprotonated 4 H⁺ **oxy Hb_R** but **deoxy** hemoglobin **Hb_T** capturing four protons 4 H⁺ and 4 HCO₃⁻ as desorbing four oxygen 4O_{2aqua} molecules. **Shuttle** and **carbonic anhydrase CA** stabilize exchange process from AIR **O₂** to breathed out in to AIR **CO₂**.

Two **I** and **II** pathways are happen of gradual reactions: **I) O₂AIR + H₂O $\xrightleftharpoons{\text{aquaporin}}$ H₂O + O_{2aqua}**



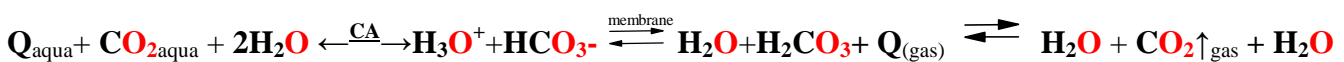
Process in lungs **I) Pathway first reaction** on cell wall membrane aquaporins penetrating water **H₂O** with oxygen **O_{2aqua}** by rate 10⁹ sec⁻¹ reach erythrocyte cells and oxygen concentration in blood plasma significant changes from **venous** blood [O₂]=1,85•10⁻⁵ M to arterial blood plasma in water becomes [O₂]=6•10⁻⁵ M.

Bisphospho glycerate **BPG⁵⁻** drive hemoglobin **O₂** adsorbtion <=> desorbtion equilibrium sensitive to concentration. It saturates arterial **shuttle oxy** hemoglobin with oxygen 459 times over [O₂]=6•10⁻⁵ M stored reserve 0,0275 M and pushed out of **shuttle deoxy** hemoglobin bisphospho glycerate **BPG⁵⁻** releases 4H⁺ and 4 HCO₃⁻.

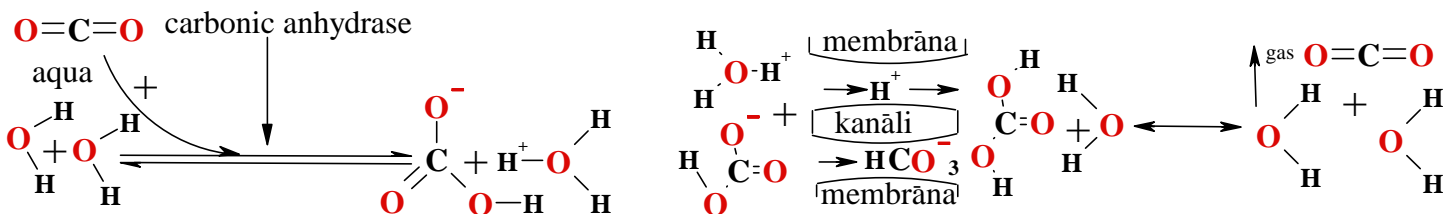


Each adsorbed oxygen molecules **O_{2aqua}** on hemoglobin releases proton **H⁺** which increases acidity on epithelial cell surface of **lungs**. The epithelial cell surface of **lungs** has the specific building: super thin 0.6 nm water layer on surface $S=950 \text{ nm} \times 950 \text{ nm} = 0.9 \mu\text{m}^2$ as square within small volume $0.5415 \cdot 10^{-3} \mu\text{m}^3 = 0.5415 \cdot 10^{-18} \text{ L}$ in liters created acidity increases up to $pH=5.5$ if one proton crosses the membrane channel reaching the surface and that cause fast decomposition of carbonic acid **H₂CO₃** to evolving **CO₂↑** gas is breathed out to AIR.

II) pathway start from metabolic Krebs cycle oxidation with oxygen **O_{2aqua}** produces **CO_{2aqua}** *in tissues* cells:



Enzyme Carbonic Anhydrase (**CA**) drive to right equilibrium mixture in three gradual reactions first is endothermic: $Q + 2H_2O + CO_{2\text{aqua}} \xleftarrow{CA} H_3O^{+} + HCO_3^{-}$.



Second gradual exothermic reaction forms Carbonic acid $H^{+} + HCO_3^{-} \xrightarrow{\text{membrane}} H_2CO_3 + Q$. Proton **H⁺** and bicarbonate **HCO₃⁻** through channels drive concentration gradients for $[H_3O^{+}]_{\text{right}}/[H_3O^{+}]_{\text{left}} = 10^{-7,36} \text{ right}/0,0339$ and for bicarbonate ions $[HCO_3^{-}]_{\text{right}}/[HCO_3^{-}]_{\text{left}} = 0,0154 \text{ M}_{\text{right}}/0,0339 \text{ M}_{\text{left}}$ breathing out of organism to AIR gas **CO₂↑_{gas}**.

Third gradual reaction on **lung** epithelial cell surface (outside organism) with absence CA decomposes carbonic acid **H₂CO₃** to gas **CO₂↑_{gas}** in endothermic reaction: $H_2CO_3 + Q_{\text{(gas)}} \rightarrow H_2O + CO_2\uparrow_{\text{gas}}$. Heat supply is important for support the breathing out of organism.

Metabolic $\text{CO}_{2\text{aqua}}$ product enzyme Carbonic Anhydrase (CA) converts to HCO_3^- bicarbonate and hydroxonium H_3O^+ ions according $\text{pH}=7.36$ *alkaline reserve* $2.036/1=[\text{HCO}_3^-]/[\text{CO}_2]=0,0339\text{ M}/0,01665\text{ M}$.
 1) Tissues blood oxygen concentration little decreases below $[\text{O}_{2\text{aqua}}]=6\cdot 10^{-5}\text{ M}$ arterial concentration. Oxygen concentration sensitive *shuttle* equilibrium $(\text{O}_2^{\text{His63,58}})_4\text{Hb}_R+4\text{H}^+\rightleftharpoons 4\text{O}_{2\text{aqua}}+(\text{H}^{\text{His63,58}})_4\text{Hb}_T$ shifts right restoring 459 times arterial concentration $[\text{O}_{2\text{aqua}}]=6\cdot 10^{-5}\text{ M}$ level amount from reserves of *oxy* hemoglobin $(\text{O}_2^{\text{His63,58}})_4\text{Hb}_R$. Hemoglobin desorbing oxygen reach decreased *venous* blood level $[\text{O}_2]=1,85\cdot 10^{-5}\text{ M}$ *in lungs*. Each desorbed oxygen replaces proton H^+ at distal histidine His63,58 in hemoglobin $(\text{H}^{\text{His63,58}})_4\text{Hb}_T$ (*Tense* state) and bind produced metabolic product HCO_3^- prevent acidity effect stabilizing $\text{pH}=7.36$ constant.

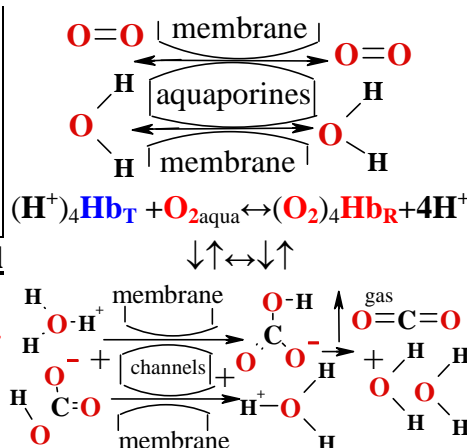
2) Krebs cycle metabolite $\text{CO}_{2\text{aqua}}$ endothermic reaction with water in *tissues* drive carbonic anhydrase shift equilibrium to right $\text{Q} + \text{CO}_{2\text{aqua}} + 2\text{H}_2\text{O} \xleftarrow{\text{CA}} \text{H}_3\text{O}^+ + \text{HCO}_3^-$ forming ratio $1/2,0361 = [\text{CO}_{2\text{aqua}}]/[\text{HCO}_3^-]$. Enzyme Carbonic Anhydrase (CA) equilibrium shifts reaction towards bicarbonate anion to prevent of carbonic dioxide accumulation, according Le Chatelier's due to high water $[\text{H}_2\text{O}]$ concentration 55.3 M, low hydrogen cation concentration $[\text{H}_3\text{O}^+]=10^{-7.36}\text{ M}$, enzyme CA constant $\text{pK}=7.0512$ value as friendly for physiologic $\text{pH}=7,36$ value. CA absence out side human organism as isolated with cell membranes shifts to some fold more acidic as enough at $\text{pH}=5,5$ on the surface for spontaneous carbonic acid bubbling $\text{Q} + \text{H}_2\text{CO}_3 \rightarrow \text{H}_2\text{O} + \text{CO}_2\uparrow_{\text{gas}}$.

We follow full cycle of the process, going back the content of *venous* blood, that to know what mechanism of enzymes: carbonic anhydrase (CA) and *shuttle* molecules hemoglobin work in living organisms.

First, hemoglobin are *shuttles* molecules of oxygen $[\text{O}_{2\text{aqua}}]=6\cdot 10^{-5}\text{ M}$ concentration sensitive equilibrium *in lungs* $(\text{O}_2^{\text{His63,58}})_4\text{Hb}_R+4\text{H}^+\rightarrow 4\text{O}_{2\text{aqua}}+(\text{H}^{\text{His63,58}})_4\text{Hb}_T$ stabilize arterial blood concentration to prevent deficiency (hypoxia) and avoid oxidative stress limiting oxygen concentration. *Shuttle in tissues* desorbs oxygen by proton replaces prevent acidose and stabilize $\text{pH}=7,36$. *Shuttle in lungs* adsorbs oxygen releasing protons on epithelial cell surface so keeping acidity $\text{pH}=5,5$ promote decomposition of carbonic acid out in AIR.

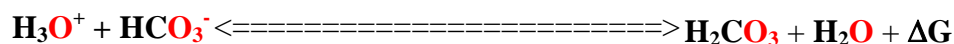
Second, enzyme CA equilibrium $\text{H}_2\text{O}/\text{CA}/\text{CO}_{2\text{aqua}}$ stabilize at $\text{pH}=7,36$ so prevent acidose. Evaporation: endothermic $\Delta H_f = +54,5\text{ kJ/mol}$; $\text{H}_3\text{O}^+ + \text{HCO}_3^- + \text{Q} \xleftarrow{\text{Membrane}} \text{H}_2\text{O} + \text{CO}_2\uparrow_{\text{gas}} + \text{H}_2\text{O}\uparrow_{\text{gas}} + \Delta G_f = -82,1\text{ kJ/mol}$. exoergic. Equilibrium keep surface moisture H_2O be side breath out to AIR carbon dioxide $\text{CO}_2\uparrow_{\text{gas}}$ and water vapor $\text{H}_2\text{O}\uparrow_{\text{gas}}$. For moisture membrane proton channels are permeable H^+ , unless *proton* H^+ impermeable for *dray channels*. Therefore membrane is equipped by aquaporins, which are water and solute oxygen $\text{O}=\text{O}$ permeable in both directions: $\text{O}=\text{O} + \text{H}_2\text{O}$ aquaporin channels $\rightleftharpoons \text{H}_2\text{O} + \text{O}=\text{O}$. AQP1 transfer rate is $3\cdot 10^9$ per second.

For protons crossing the membrane through proton channels, necessary water molecules locate both side of the membrane and aquaporins are supplier of water H_2O molecules to moisture *alveolar lungs* surface.



Free energy change $\Delta G = -60\text{ kJ/mol}$ for Reaction of H_2CO_3 formation is *exoergic* $\Delta G < 0$ negative therefore promotes spontaneous neutralization reaction $\text{H}_3\text{O}^+ + \text{HCO}_3^- \rightleftharpoons \text{H}_2\text{CO}_3 + \text{H}_2\text{O} + \Delta G$ *alveolar surface* in *lungs* consuming $+Q$ heat and evolving water $+ \text{H}_2\text{O}$ supporting surface moisture $\text{H}_2\text{CO}_3 + \text{Q} \rightleftharpoons \text{CO}_2\uparrow_{\text{gas}} + \text{H}_2\text{O}$ endothermic reaction

Inside the cell-cytosol
 CA with water consumes heat $+Q$
 $\text{CO}_2 + 2\text{H}_2\text{O} + \text{Q} \xleftarrow{\text{CA}} \text{H}_3\text{O}^+ + \text{HCO}_3^-$
 aqua exothermic



Human pH=7,36 of blood Henderson Haselbalh CA equation homeostasis

Main buffer system CA using hemoglobin shuttle stabilizes pH=7,36 and arterial level $[O_{2\text{aqua}}] = 6 \cdot 10^{-5} \text{ M}$:
deoxy hemoglobin $(H^+ \text{His63,58})_4 \text{Hb}_T$ (Tense state) \rightleftharpoons **oxy hemoglobin** $(O_2 \text{His63,58})_4 \text{Hb}_R$ (Relax state) $+ 4H^+$

Carbonic Anhydrase (CA) driven – bicarbonate $2H_2O \xrightarrow{CA} CO_{2\text{aqua}} + H_3O^+ + HCO_3^-$ buffer system

Organism store H^+ and HCO_3^- as Krebs cycle metabolic product carbonic dioxide, if CA produced buffer system acidic form $CO_{2\text{aqua}}$ and H_3O^+ . For this reason, the acid form have to be transported out of organism in two metabolites through proton channels H^+ across membranes and through bicarbonate channels HCO_3^- with **deoxy hemoglobin shuttle** $4O_{2\text{aqua}} + (H^+ \text{His63,58})_4 \text{Hb}_T \rightleftharpoons (O_2 \text{His63,58})_4 \text{Hb}_R + 4H^+$ capturing proton in distal histidine and salt bridge linked $HCO_3^- \dots H_3^+ N$ - bicarbonate. Effective of controlled acid form's is breathing out $CO_2 \uparrow_{\text{gas}}$, that stabilize pH of blood pH=7.36 by metabolites exchange via AIR with oxygen O_2 respiration in and carbon dioxide CO_2 breathing out.

Carbonic anhydrase CA make conversion of $CO_{2\text{aqua}}$ to bicarbonate anion HCO_3^- in to water medium fast and establish acid-base $Q + CO_{2\text{aqua}} + 2H_2O \xleftarrow{CA} H_3O^+ + HCO_3^-$ **endothermic** equilibrium at pH=7,36 as producing right side reaction products $H_3O^+ + HCO_3^-$ demanding to heat. So Heating +Q shifts equilibrium right side and as soon as H^+ concentration increase as three Krebs cycle product $CO_{2\text{aqua}}$ forms two H_3O^+ and HCO_3^- . Instantly carbonic anhydrase CA equilibrium is by respiration shifted to left as CO_2 evaporated out consuming H^+ and HCO_3^- in **lungs** and acid concentration $[H^+]$ **remains** stabilized at homeostasis level pH=7.36. If concentration H^+ decreases, so increases **pH>7.36**, carbonic anhydrase equilibrium is shifted to the right and the extra amount of HCO_3^- through **kidneys** passes into urine and is transported out and pH stabilizes to homeostasis **pH=7.36** level according Le Chatelier's theorem.

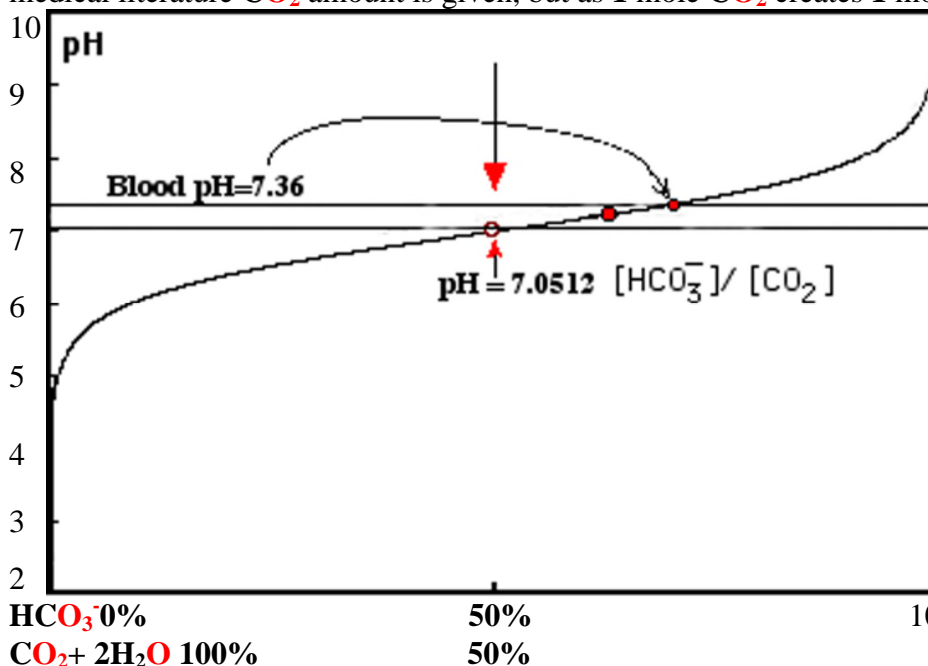
The Brønsted acid is blood-water solution $CO_{2\text{aqua}}$, which in. The dissolved into water H_2O (into blood) carbonic dioxide $CO_{2\text{aqua}}$ occurring in cell converted with carbonic anhydrase CA to $H^+ + HCO_3^-$. The water H_2O and carbonic dioxide $CO_{2\text{aqua}}$, finally, is acid in direct equilibrium with HCO_3^- base plus ions H^+ .

Carbonic anhydrase equilibrium constant $pK=7.0512$ decreases concentration acid form $CO_{2\text{aqua}}$ into water avoid accumulation therefore hydrogen carbonate HCO_3^- and hydrogen ions H^+ are involved into blood pH formation according buffer solution

Henderson-Haselbalh equation: $7.36 = \text{pH} = \text{pK} + \log \left(\frac{[HCO_3^-]}{[CO_{2\text{aqua}}]} \right) = 7.0512 + \log \left(\frac{[HCO_3^-]}{[CO_{2\text{aqua}}]} \right);$

$\frac{[HCO_3^-]}{[CO_{2\text{aqua}}]} = 10^{(\text{pH}-\text{pK})} = 10^{(7.36-7.0512)} = 10^{0.3088} = \frac{2.0361}{1}$ the ratio $[HCO_3^-]/[CO_{2\text{aqua}}]$ being approximately 2/1. In

medical literature CO_2 amount is given, but as 1 mole CO_2 creates 1 mole $H_2O \xrightarrow{CA} CO_{2\text{aqua}}$, it is the same.

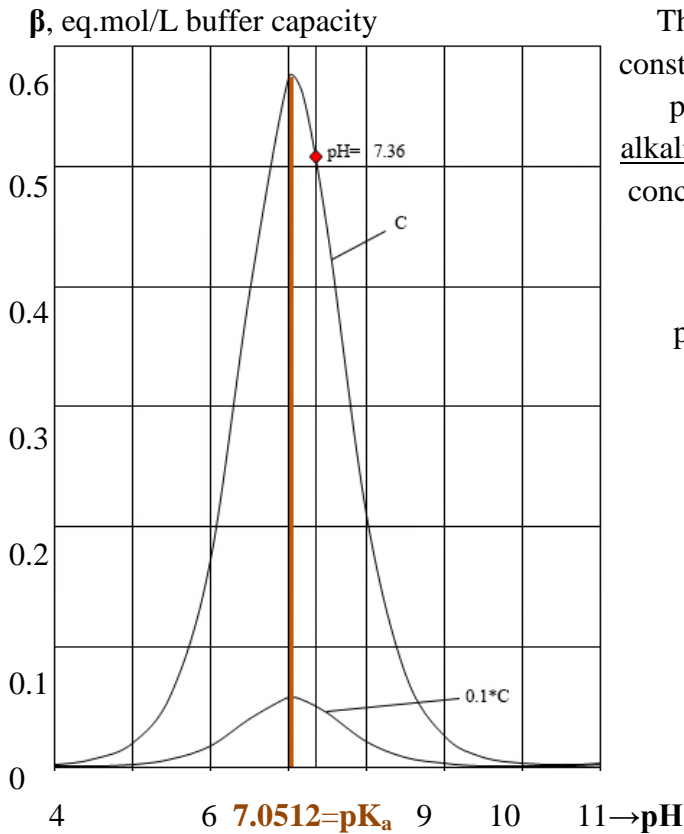


Buffer region middle point is the over inflection point in graph ○:
 $\text{pH} = \text{pK}_a = 7.0512; [HCO_3^-]/[CO_2] = 1$
 is one as well buffer component concentrations are equal $[HCO_3^-] = [CO_2]$ as well as bicarbonate salt $[HCO_3^-]$ concentration is equal to Brønsted weak acid dissolved in blood CO_2 concentration $[CO_2]$.
 Alkaline reserve at $7.36 = \text{pH}$ is **normal** as $\frac{[HCO_3^-]}{[CO_{2\text{aqua}}]} = \frac{2.0361}{1}$.

100% salt – buffer system base
 0% weak acid buffer component

As soon as H^+ concentration grows for some reason, Carbonic anhydrase CA equilibrium is shifted to left and channeling H^+ and HCO_3^- transported CO_2 out by respiration in **lungs** so acid concentration $[H^+]$ stabilizes. If concentration H^+ decreases, carbonic anhydrase CA equilibrium is shifted to the right and the extra amount of HCO_3^- through **kidneys** passes into urine. Bicarbonate channels in **kidney** cells are open at higher values of $pH > 7.36$ from side of blood circulation, but **lungs** channel transport are opened for H^+ and HCO_3^- at lower values $pH < 7.36$.

$$\text{assuming } C=1M = [HCO_3^-] + [CO_{2\text{aqua}}]$$



This value $pK=7.0512$ is carbonic anhydrase made equilibrium constant very friendly to blood $pH=7.36$. As most of metabolism products are acidic, the organism has to have a reserve of alkalinity. For this reason the ratio between HCO_3^- and $CO_{2\text{aqua}}$ concentrations is **2/1**. The pH value of physiological conditions blood homeostasis is **7.36**.

The *alkaline reserve* $2.036/1 = [HCO_3^-]/[CO_{2\text{aqua}}]$ at blood $pH=7.36$ can be controlled by adding H_2SO_4 to a sample of

100 mL blood reacts with included in salt HCO_3^- and the $CO_{2\text{aqua}}$ is liberated. If **56.23 mL (50-60 mL)** of gaseous CO_2 are liberated from **100 mL** of blood, the controlled *alkaline reserve* in homeostasis is normal and total *alkaline reserve* amount concentration

0.023M = $[HCO_3^-] + [CO_{2\text{aqua}}]$ is in homeostasis normal as sum of $[HCO_3^-] = 0.0154 M$ and $[CO_{2\text{aqua}}] = 0.0076M$.

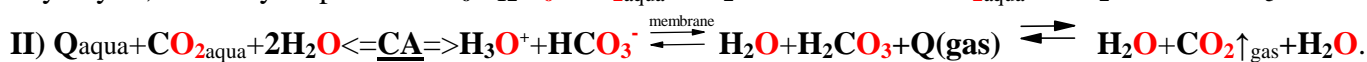
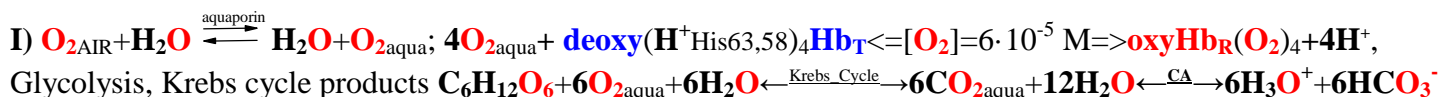
Two types of diseases occur, if the acid-base balance is distorted in the organism alkalosis and acidosis.

1) *Respiratory alkalosis* occurs, if **lungs** are hyperventilated, for example, during anesthesia. If $CO_{2\text{aqua}}$ concentration decreases $pH > 7.36$ **alkalosis** due to hyperventilation, the blood vessels are broadened and their tonus is lowered as a result of it, therefore O_2 supply to brain is shortened.

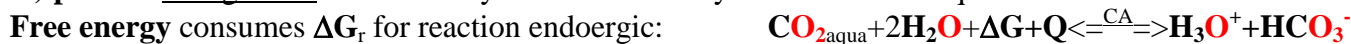
For this reason it is necessary to use AIR mixtures of O_2 and CO_2 during anesthesia instead of pure oxygen. If respiratory alkalosis occurs for other reasons than hyperventilation of **lungs**, the ratio **2/1** of the buffer components can be re-established in a longer period of breathing normal, CO_2 -containing AIR 350 ppm.

2) *Respiratory acidosis* occurs in the cases, when the concentration of CO_2 in the AIR is increased. The result of this is that the action of breathing muscles becomes more difficult. Again, this can be canceled, if the patient starts breathing normal AIR. However, if increased CO_2 content in the AIR lasts long, metabolic acidosis occurs $pH < 7.36$. Metabolic acidosis hemoglobin reserves depleted oxygen concentration below **venous** $[O_2] = 1,85 \cdot 10^{-5} M$. For this reason only the concentrations of carbonic dioxide $CO_{2\text{aqua}}$ into water H_2O (avoid carbonic acid H_2CO_3 formation) and bicarbonate HCO_3^- and hydrogen ions H^+ are included into equation for blood pH .

There are two sequences, which drive enzymes **CA** and **shuttle** hemoglobin governed gradual reactions



II) process first gradual reaction enzyme Carbonic anhydrase CA made equilibrium:



Enthalpy heat consumed ΔH_r for reaction endothermic: $\Delta H_r = \Delta H^\circ_{H_3O} - \Delta H^\circ_{HCO_3} - 2\Delta H^\circ_{H_2O} - \Delta H^\circ_{CO_2} = 9,7576 \text{ kJ/mol}$
 $= -285,81 - 689,93 - (2 \cdot -285,85 - 413,7076) = -975,74 + 985,3276 = 9,7576 \text{ kJ/mol}$ endothermic

Endothermic as needed heat supply to drive reaction forwards.

Entropy decrease $\Delta S_r < 0$ negative as enzyme Carbonic Anhydrase CA governed reaction:

$\Delta S_r = \Delta S^\circ_{H_3O} + \Delta S^\circ_{HCO_3} - 2\Delta S^\circ_{H_2O} - \Delta S^\circ_{CO_2} = -3,854 + 98,324 - (2 \cdot 69,956 + 117,57) = 94,47 - 257,482 = -163,0134 \text{ J/mol/K}$.

$\Delta G_r = \Delta H_r - T \cdot \Delta S_r = 9,7576 - (298,15 \cdot -0,1630134) = 58,36 \text{ kJ/mol}$ endoergic free energy accumulated in products

by CA governed reaction. $\Delta S_{\text{dispersed}} = -\Delta H_r / T = -9,5876 / 298,15 = -32,727 \text{ J/K/mol}$.

$\Delta S_{\text{total}} = \Delta S_r + \Delta S_{\text{dispersed}} = -163,0134 - 32,7271 = -195,7405 \text{ J/K/mol}$. $T \cdot \Delta S_{\text{total}} = -0,1957405 \cdot 298,15 = -58,36 \text{ kJ/mol}$

$\Delta G_r = \Delta G^\circ_{H_3O} + \Delta G^\circ_{HCO_3} - 2\Delta G^\circ_{H_2O} - \Delta G^\circ_{CO_2} = -213,275 - 586,94 - (2 \cdot -237,19 - 385,98) = +60,145 \text{ kJ/mol}$ endoergic.

Carbonic anhydrase make the equilibrium constant $K_{eq} = 10^{-7,0512}$ or exponent $pK_{eq} = 7,0512$ is constant and very close to pH value 7,36. Water concentration $[H_2O] = 55,3 \text{ M}$ is constant so included in value

$K_{eq} = K \cdot [H_2O]^2 = 10^{-10,224} \cdot (997,07/18,0153)^2 = 10^{-7,0512} \text{ M} = 10^{-pK_{eq}}$ exponent value $pK_{eq} = 7,0512$.



$10^{-7,0512} = K_{eq} = [H_3O^+] \cdot [HCO_3^-] / [CO_{2aqua}]$ as $K = [H_3O^+] \cdot [HCO_3^-] / ([CO_{2aqua}] \cdot [H_2O]^2) = 10^{-10,224}$

$\Delta G = -RT \ln(K) = -8,3144 \cdot 298,15 \cdot \ln(1 \cdot 10^{-10,224}) = 60,145 \text{ kJ/mol}$ where $R = 8,3144 \text{ J/mol/K}$ and $T = 310,15 \text{ K}$ ($25^\circ C$).

$K_{eq} = \text{EXP}(-\Delta G_r / R/T) \cdot [H_2O]^2 = (10^{-10,5372}) \cdot [H_2O]^2 = (10^{-10,5372}) \cdot (997,07/18,0153)^2 = 10^{-7,0512} = 10^{-pK_{eq}}$

II) process second gradual reaction concentration gradient and electrochemical membrane potential

bicarbonate ion HCO_3^- and proton H^+ 1. $E_H = P \cdot \lg([10^{-pH_{\text{extraMit}}}] / [10^{-pH_{\text{Mitochon}}}] = 0,06154 \cdot \lg(10^2,36) = 0,14523 \text{ V}$

2. $E_{HCO_3^- \text{ Mitochon}} = -P \cdot \log([HCO_3^-]_{\text{cytosol}} / [HCO_3^-]_{\text{Mitochon}}) = -0,06154 \cdot \log(0,0154 / 0,0338919) = 0,0210821 \text{ V}$

$E_{\text{sum}} = 0,14523 + 0,0210821 = 0,1663168 \text{ V} = E_{\text{membrane}}$; $\Delta G_F = nFE = -1 \cdot 96485 \cdot 0,1663168 = -16,0471 \text{ kJ/mol}$

3. $\Delta G_{HCO_3^-} = -RT \ln([HCO_3^-]_{\text{cytosol}} / [HCO_3^-]_{\text{Mitoch}}) = 8,3144 \cdot 310,15 \cdot \log(0,0154 / 0,0338919) = -2,0341094 \text{ kJ/mol}$

4. $\Delta G_{H^+} = -RT \ln([H_3O^+]_{\text{extraMit}} / [H_3O^+]_{\text{Mitochon}}) = -RT \ln(10^{-7,36} / 10^{-5}) = -8,3144 \cdot 310,15 \cdot \ln(10^{2,36}) = -23,3943 \text{ kJ/mol}$

Total $\Delta G_{\text{total}} = \Delta G_F + (\Delta G_{HCO_3^-} + \Delta G_{H^+}) = -16,0471 + (-2,0341094) + (-23,3943) = -41,4755 \text{ kJ/mol}$ exoergic transfer.

II) process third gradual Carbonic acid formation: $H_3O^+ + HCO_3^- \rightarrow H_2O + H_2CO_3 + Q$ exothermic.

$\Delta H_r = \Delta H^\circ_{H_2O} + \Delta H^\circ_{H_2CO_3} - \Delta H^\circ_{H_3O} - \Delta H^\circ_{HCO_3} = -285,85 - 699,65 - (-285,81 - 689,93) = -985,5 + 975,74 = -9,76 \text{ kJ/mol}$

$\Delta S_r = \Delta S^\circ_{H_2O} + \Delta S^\circ_{H_2CO_3} - \Delta S^\circ_{H_3O} - \Delta S^\circ_{HCO_3} = 69,956 + 187 - (-3,854 + 98,324) = 256,956 - 94,47 = 162,486 \text{ J/mol/K} \dots$

$\Delta S_{\text{dispersed}} = -\Delta H_r / T = 9,76 / 298,15 = +32,735 \text{ J/K/mol} \dots$

$\Delta G_r = \Delta H_r - T \cdot \Delta S_r = -9,76 - 298,15 \cdot 0,129751 = -38,695 \text{ kJ/mol}$ exoergic reaction is driven by concentration gradients through proton and bicarbonate channels of membrane.

$\Delta G = \Delta G^\circ_{H_2O} + \Delta G^\circ_{H_2CO_3} - \Delta G^\circ_{H_3O} - \Delta G^\circ_{HCO_3} = -237,19 - 623,17 - (-213,275 - 586,94) = -860,36 + 800,215 = -60,145 \text{ kJ/mol}$.

$\Delta S_{\text{total}} = \Delta S_r + \Delta S_{\text{dispersed}} = 32,735 + 162,486 = 129,751 \text{ J/K/mol} \dots$

II) process fourth gradual reaction is non-enzymatic decomposition $H_2CO_3 \rightleftharpoons CO_2 \uparrow_{\text{gas}} + H_2O$;

$\Delta G = \Delta G^\circ_{H_2O} + \Delta G^\circ_{CO_2} - \Delta G^\circ_{H_2CO_3} = -237,19 - 385,98 - 623,17 = -623,17 + 623,17 = 0,0 \text{ kJ/mol}$ is anenergetic or neutral.

Enthalpy change decomposition reaction of carbonic acid $Q + H_2CO_3 \rightleftharpoons CO_2 \uparrow_{\text{gas}} + H_2O$ endothermic

Substance	$\Delta H^\circ_r, \text{ kJ/mol}$	$\Delta S^\circ_r, \text{ J/mol/K}$	$\Delta G^\circ_r, \text{ kJ/mol}$	$\Delta H = \Delta H^\circ_{H_2O} + \Delta H^\circ_{CO_2} - \Delta H^\circ_{H_2CO_3} = +20,291 \text{ kJ/mol}$
H_3O^+	-285,81	-3,854	-213,275	$= -286 - 393,509 - (-699,65) = -679,509 + 699,65 = +20,291 \text{ kJ/mol}$
HCO_3^-	-689,93	98,324	-586,94	is endothermic exactly with the cooling effects....
$H_2O \uparrow_{\text{gas}}$	-241,8352	188,7402		$\Delta S_{\text{dispersed}} = -\Delta H_r / T = -20,291 / 298,15 = -68,056 \text{ J/K/mol} \dots$
H_2O	-285,85	69,9565	-237,191	$\Delta S_r = \Delta S^\circ_{H_2O} + \Delta S^\circ_{CO_2} - \Delta S^\circ_{H_2CO_3} = +96,696 \text{ J/mol/K} \dots$
$CO_2 \uparrow_{\text{gas}}$	-393,509	213,74	-394,359	$= 69,956 + 213,74 - (187) = 257,482 - 94,47 = +96,696 \text{ J/mol/K} \dots$
CO_{2aqua}	-413,7976	117,5704	-385,98	$T \cdot \Delta S_{\text{total}} = 28,64 \text{ J/K/mol} \cdot 298,15 \text{ K} = +8,539 \text{ kJ/mol}$
H_2CO_3	-699,65	187,00	-623,17	bound $T \Delta S_n \leftarrow$ lost free energy $\Delta G_{\text{reverse reaction}} \leftarrow \dots$

endothermic $\Delta H^\circ_{\text{reaction}} = +20,291 \text{ kJ/mol}$; cooling $Q = -20,291 \text{ kJ/mol}$ spontaneous $\Delta G^\circ_{\text{reaction}} = -8,539 \text{ kJ/mol}$.