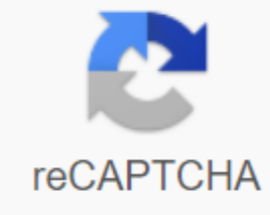




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Photo Courtesy of Garrigan.NetMicroscopic An image of red blood cells during formation, RBC eventually loses its nucleus and leaves the bone marrow as reticulocyte. At this time, reticulocyte contains some remnants of organelles. Eventually these organelles leave the adult Erythrushite cell created. RBC lasts an average of 120 days in the bloodstream. When RBCs age, they are removed by macrophages in the liver and syringe. A hormone called erythropoietin and low oxygen levels regulate the production of RBCs. Any factor that reduces the level of oxygen in the body, such as lung disease or anemia (a low number of RBCs), increases the level of erythropoietin in the body. Erythropoietin then stimulates the production of RBCs by stimulating stem cells to produce more RBCs and increasing how quickly they mature. Ninety percent of erythropoietin is made with kidneys. When both kidneys are removed, or when kidney failure exists, this person becomes anemic due to a lack of erythropoietin. Iron, vitamin B-12 and folic acid are essential in the production of RBCs. Red blood cells (RBCs) are by far the most common cells in the blood. RBCs give blood its characteristic red color. In men, there are an average of 5,200,000 RBCs per cubic millimeter (microliter), and women have an average of 4,600,000 RBCs per cubic millimeter. RBCs make up about 40 to 45 percent of the blood. This percentage of blood made up of RBCs is an often measured number and is called hematocrit. The ratio of cells in normal blood is 600 RBCs for each white blood cell and 40 platelets. There are some things about RBCs that make them unusual: RBC has a strange shape - a biconcave disc that is round and flat, a kind of shallow bowl. The ERB doesn't have a nucleus. The nucleus was embossed from the cell as it matured. RBC can transform to an astonishing extent, without breaking, as it squeezes a single file through the capillaries. (Capillaries are thin blood vessels through which oxygen, nutrients and waste products are replaced throughout the body.) RBC contains hemoglobin, a molecule specifically designed to hold oxygen and carry it to cells that need it. The main function of red blood cells is to transfer oxygen from the lungs to the cells of the body. RBC contains a protein called hemoglobin that actually carries the oxygen. In the frames, oxygen is released to be used by the body's cells. Ninety-seven percent of the oxygen carried by the blood from the lungs is carried by hemoglobin; The remaining 3% is dissolved in plasma. Hemoglobin allows blood to transport 30 to 100 times more oxygen than can be dissolved in plasma alone. Hemoglobin loosely integrates with oxygen in the lungs, where the oxygen level is high, and then releases it easily in the capillaries, where the oxygen level is low. All Hemoglobin contains four iron atoms, and each iron atom can bind with a single molecule of oxygen (containing two oxygen atoms, called O₂) for a total of four oxygen molecules (4*O₂) or eight atoms of oxygen for each molecule of hemoglobin. The iron in hemoglobin gives the blood its red color. Thirty-three percent of RBC is hemoglobin. The normal concentration of hemoglobin in the blood is 15.5 grams per deciliter of blood in men, and 14 grams per deciliter of blood in women. (A deciliter is 100 milliliters, or one-tenth of a liter.) Besides carrying oxygen to the body's cells, RBCs help remove carbon dioxide (CO₂) from the body. Carbon dioxide is created in cells as a byproduct of many chemical reactions. He enters the blood in the capillaries and returns to the lungs and is released there and then exhales as we breathe. RBCs contain an enzyme called carbon anhydrase that helps the reaction of carbon dioxide (CO₂) and water (H₂O) occur 5,000 times faster. Carbonic acid is formed, which then separates into hydrogen ions and bicarbonate ions: carbon dioxide CO₂ + H₂O ==> H⁺ + HCO₃⁻ - carbon dioxide + water ==> carbonic acid + hydrogen ion + hydrogen bicarbonate ion then combine with hemoglobin and bicarbonate ions to enter the plasma. Seventy percent of the two-story note is removed this way. Seven percent of the 2nd-2 is dissolved in plasma. The remaining 23 percent of CO₂ integrates directly with hemoglobin and is then released into the lungs. Next, we'll learn about the different types of white blood cells. Photo Page 2 advertisement courtesy of Garrigan.NetMicroscopic Image of red blood cells during formation, RBC eventually loses its nucleus and leaves the bone marrow as reticulocyte. At this time, reticulocyte contains some remnants of organelles. Eventually these organelles leave the adult Erythrushite cell created. RBC lasts an average of 120 days in the bloodstream. 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Next, we'll learn about the different types of white blood cells. Advertisement image: Anita Bonita/Getty Images take the lowest dose of NSAIDs and stop using them as soon as possible. Blood thinners are usually given to people at risk of developing blood clots from conditions, such as abnormal heart rate. The use of these life-saving drugs requires caution with other medications, especially painkillers called nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (Advil) or naproxen (Aleve). But a lot of people take the risk to relieve aches and pains. Many of the patients who need blood thinners are older and therefore at risk for arthritis, so it's not seldom for a patient to be on a blood thinner and NSAID, says cardiologist Dr. Dyfek L. Bhatt, a professor at Harvard Medical School. Blood thinners and blood thinners come in two ways: anti-platelet drugs such as aspirin that stop platelets from forming blood clots. Anticoagulants such as warfarin (warfarin) and oral anticoagulants (DOACs) are working directly newer (DOACs) to extend the time it takes to form a blood clot. NSAIDs affect the way platelets work and can interfere with normal blood clotting. This can increase the risk of bleeding, especially in the gastrointestinal tract. Taking them along with blood thinners raises the risk of bleeding even more, says Dr. Blatt. What you can do if you take a blood thinner, your options for pain relief are limited. Sometimes physiotherapy can help relieve joint pain by strengthening the muscles that support joints to better absorb stress. But there are times when painkillers are needed, like when arthritis pain doesn't go away. Acetaminophen (Tylenol) can usually be used, but high doses come with the possible risk of liver damage. When painkillers are needed, it is best to use the lowest dose that reduces symptoms and stop taking them if symptoms fade, advises Dr. Bhatt. And make sure you talk to your doctor before you mix any kind of painkiller with a blood thinner. Find the NSAIDs sometimes hidden in NSAIDs and aspirin are obvious ingredients in over-the-counter medications, but not always. Talk to your doctor before taking any of these medications in addition to your blood thinner. Product name used to contain Advil, Motrin, naphrine pain, pain, headache ibuprofen Aleve aches, pains, Naproxen Exdrin Headache, Bayer, Bufferin, Asper Gum Pain, Pain, Aspirin Alka-Zeltzer Upset Stomach Pain Pepto-Bismol, Maalox, Kapopect Upset Stomach, Diarrhea Bismuth Subsalicylate (Linked to Aspirin) Advil PM Sleep Aid, Alka-Zeltzer Ibuprofen Painkiller Plus Common Aspirin Disclaimer: To our readers, Harvard Health Publishing provides access to the content library stored in our archive. Please note the date of the last review or update in all articles. 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