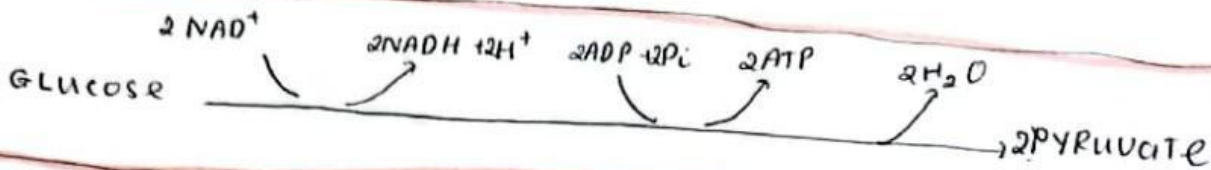


ĐƯỜNG PHÂN

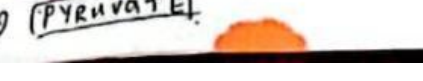
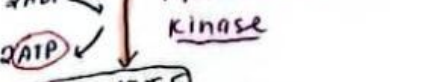
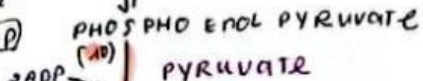
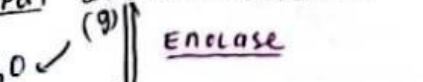
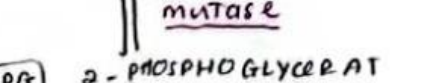
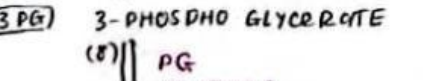
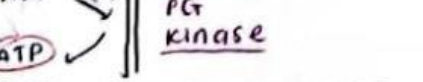
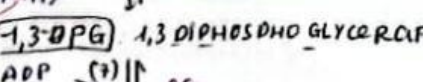
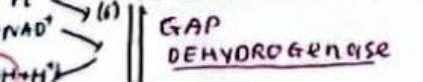
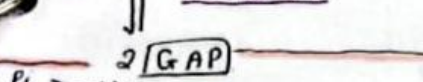
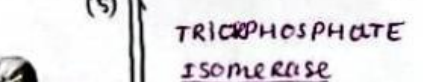
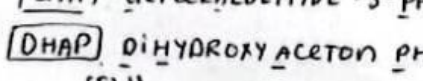
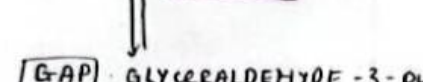
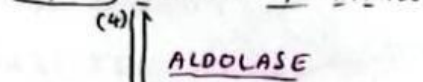
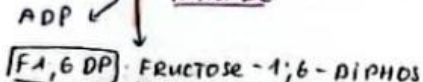
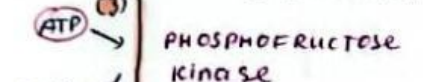
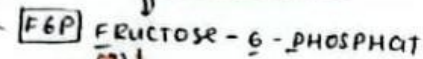
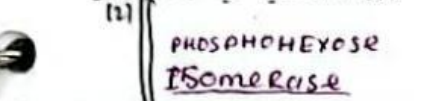
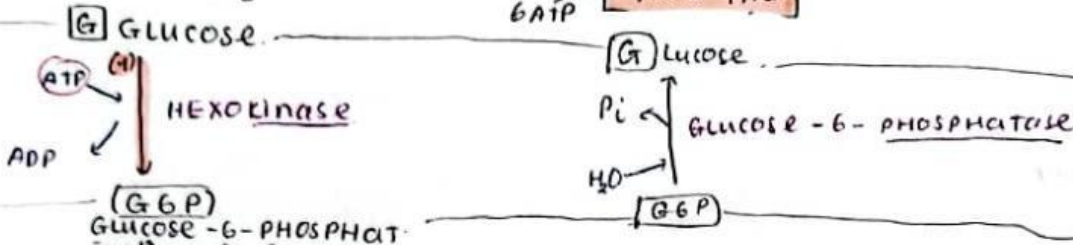
(Bào tương).

(GLYCOLYSIS)



[Đường phân] → 2 ATP

6 ATP → [TAN TẠO]



RIỆNG HỒNG CẦU

HEXOKINASE $\Rightarrow$ 2,3DPG $\downarrow \Rightarrow$ ái lực $\uparrow \Rightarrow$ nhả $\text{Hb} \text{O}_2$

Thiếu

PYRUVATE KINASE $\Rightarrow$ 2,3DPG $\uparrow \Rightarrow$ ái lực $\downarrow \Rightarrow$ nhả $\text{Hb} \text{O}_2$

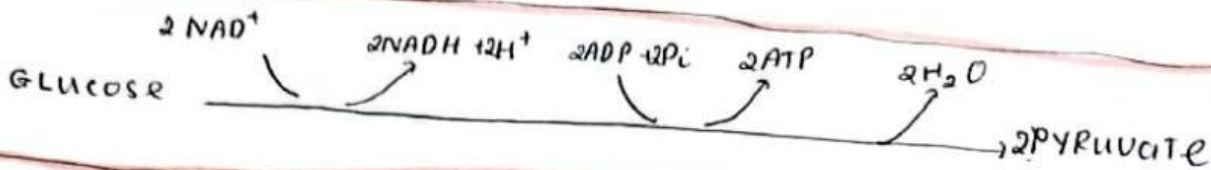
2,3DPG

2,3DPG giúp giảm ái lực $\text{Hb} \text{O}_2 \Rightarrow$ nhả O_2 cho TB

ĐƯỜNG PHÂN

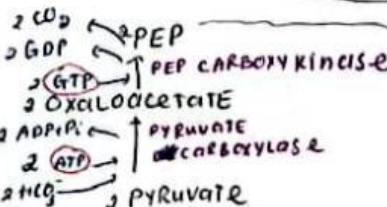
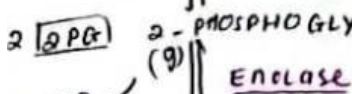
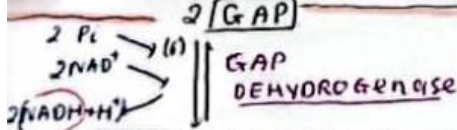
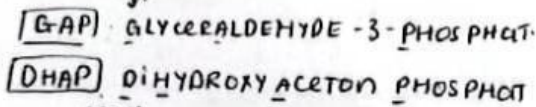
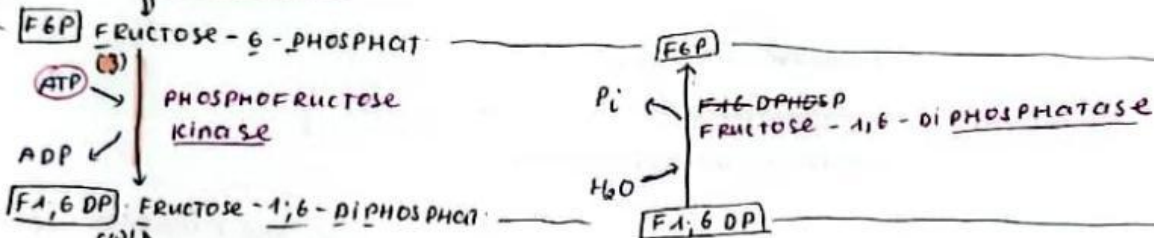
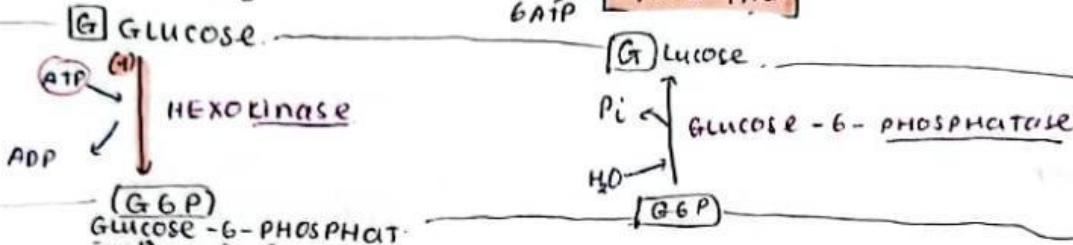
(Bào tương).

(GLYCOLYSIS)



[Đường phân] → 2ATP

6ATP [TAN TẠO]



RIÊNG HỒNG CẦU

HEXOKINASE ⇒ 2,3DPG ↓ ⇒ ái lực Hb O₂ ↑ ⇒ nhả

Thiếu

PYRUVATE KINASE ⇒ 2,3DPG ↑ ⇒ ái lực Hb O₂ ↓ ⇒ nhả

2,3DPG

2,3DPG giúp giảm ái lực Hb ♥ Oxi
→ Hb nhả Oxi cho TB