**Water Purification and Hemodialysis**

 Semipermeable membranes play important roles in the normal functioning of many living systems. In addition, they are used in a wide variety of industrial and medical applications. Membranes with different permeability characteristics have been developed for many different purposes. One of these is the purification of water by reverse osmosis.

 Suppose we place a semipermeable membrane between a saline (salt) solution and pure water. If the saline solution is pressurized under a greater pressure than its osmotic pressure, the direction of flow can be reversed. That is, the net flow of water molecules will be from the saline solution through the membrane into the pure water. This process is called **reverse osmosis**. The membrane usually consists of cellulose acetate or hollow fibers of a material structurally similar to nylon. This method has been used for the purification of brackish (mildly saline) water. It has the economic advantages of low cost, ease of apparatus construction, and simplicity of operation. Because this method of water purification requires no heat, it has a great advantage over distillation.

 The city of Sarasota, Florida, has built a large reverse osmosis plant to purify drinking water. It processes more than 4 million gallons of water per day from local wells. Total dissolved solids (mostly salts) are reduced in concentration from 1744 parts per million (ppm) to 90 ppm. This water is mixed with additional well water purified by an ion exchange system. The final product is more than 10 million gallons of water per day containing less than 500 ppm of total dissolved solids, the standard for drinking water set by the World Health Organization. The Kuwaiti and Saudi water purification plants that were of strategic concern in the Persian Gulf War use reverse osmosis in one of their primary stages.

 Human kidneys carry out many important functions. One of the most crucial is the removal of metabolic waste products (e.g., creatinine, urea, and uric acid) from the blood without removal of substances needed by the body (e.g., glucose, electrolytes, and amino acids). The process by which this is accomplished in the kidney involves *dialysis,* a phenomenon in which the membrane allows transfer of both solvent molecules *and* certain solute molecules and ions, usually small ones. Many patients whose kidneys have failed can have this dialysis performed by an artificial kidney machine. In this mechanical procedure, called *hemodialysis,* the blood is withdrawn from the body and passed in contact with a semipermeable membrane.

 The membrane separates the blood from a dialyzing solution, or *dialysate,* that is similar to blood plasma in its concentration of needed substances (e.g., electrolytes and amino acids) but contains none of the waste products. Because the concentrations of undesirable substances are thus higher in the blood than in the dialysate, they flow preferentially out of the blood and are washed away. The concentrations of *needed* substances are the same on both sides of the membrane, so these substances are maintained at the proper concentrations in the blood. The small pore size of the membrane prevents passage of blood cells. However, Na+ and Cl– ions and some small molecules do pass through the membrane. A patient with total kidney failure may require up to four hemodialysis sessions per week, at 3 to 4 hours per session. To help hold down the cost of such treatment, the dialysate solution is later purified by a combination of filtration, distillation, and reverse osmosis and is then reused.