

Tissues of the body

A tissue is defined as an organized aggregation of related of similar cells specialized to carry out some particular function (or functions).

All tissues consist of cells and variable amount of extracellular matrix (intracellular substance)

TYPES OF TISSUES

The human body is generally classified into four main types of tissues:

- Preview F.P. A. of 156 epithelium: 1. The epithelial tissues (epithelium)
- 2. The connective tissues
- 3. The muscle tissues
- 4. The nervous tissues

The epithelium is defined as

"A collection of closely apposed cells with very small amount of extracellular matrix"

- The epithelium is avascular (having no vessels), therefore it is supported by a layer of loose connective tissues containing blood vessels
- There is a layer known as **basement membrane or basal** lamina present between epithelium and connective tissues

Groups of epithelia

The epithelium is divided into two major groups

- Is a layer of variable thickness which contains reticular fibers and a variety of glycosaminoglycan and fibrils of collagen type VII
- This layer anchor basement membrane to the underlying connective tissues

Functions of Basement membrane

- A. It serves to bind the epithelial cells to the underlying or surrounding connective tissues
- B. It serves as a molecular sieve or ultrafilter
- C. The basement membrane serves as a scaffolding during epithelial regeneration or wound healing
- D. It also plays an important role in cell growth, proliferation, and

differentiation FUNCTIONS OF CEPTTHELIUM 1. Protection All covering epithelium active underlying connective tissues

Example include the stratified squamous epithelium of epidermis, oral cavity protect against mechanical trauma

2. Secretion:

Epithelial cells synthesize substances and pass them out on to a surface or into the blood

3. Absorption:

Some epithelial cells are selectively permeable to substances in solution

Example, in epithelial lining of small intestine the absorptive epithelial cells take up appropriate material from lumen but leave unwanted substance behind

4. Excretion:

Migrant cells: i.

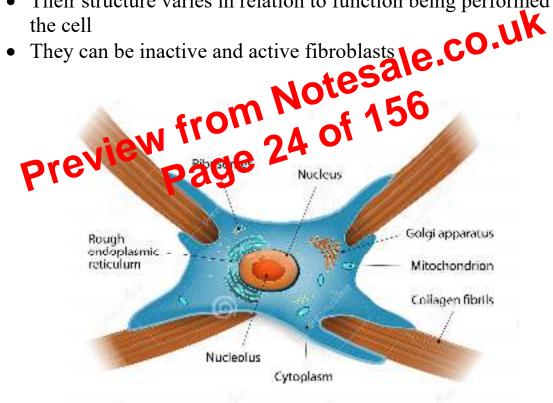
- These include those cells that enter the connective tissues from the bloodstream
- These cells include
- 1) Macrophages
- 2) Mast cells

- 3) Plasma cells
- 4) Various types of WBCs

i. **Resident cells:**

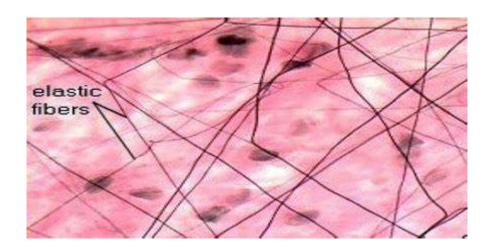
1)Fibroblasts

- Most abundant variety of connective tissue cells
- Their structure varies in relation to function being performed by



Inactive fibroblasts:

• Also known as fibrocytes



Synthesis:

Location:

Found in skin, ligamentum taka & nuchas and large arteries **ICO 34 0 3. Reticular fib: psage** • Fine delicate street

- Immature collagen fibre (type -3)

Synthesis:

• Synthesized by fibroblasts

Functions:

- Provide support and strength
- Framework of lymphoid tissue

Location:

• In organ capsules of liver, kidney & endocrine glands Stained by silver salts (argyrophilic)

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seen. These structures are called **areolae** and loose connective tissue is also known as **LOOSE AREOLAR CONNECTIVE TISSUE**

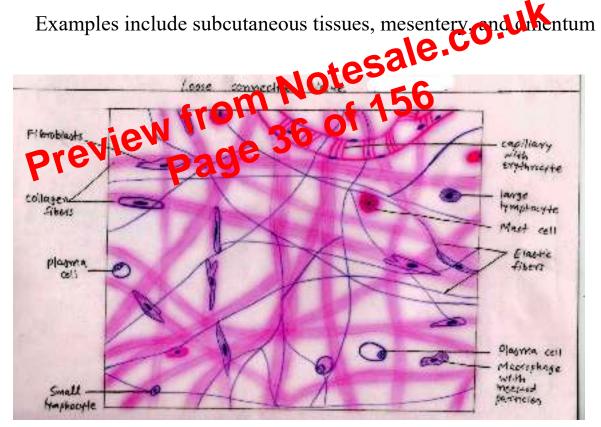
Cells:

- The most common cells is this type are fibroblasts and macrophages
- Mast cells and adipose cells are also present

Fibers:

The fibers commonly present in their ECM is collagen fiber, elastic fiber is also present

Examples



2. Dense connective tissue

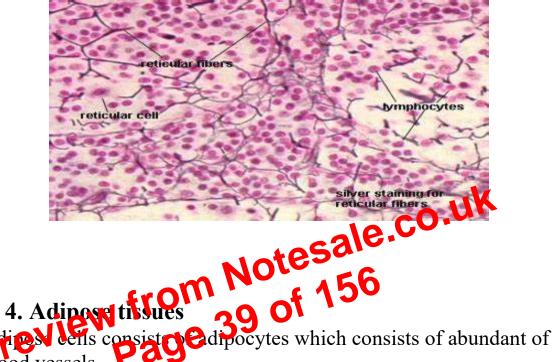
• This type of tissue is characterized by close packing of its fibers

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The reticular cells are considered to be a special variety of fibroblasts

- Most of the protoplasmic processes of reticular cells are wrapped around or extend along the reticular fibers
- This arrangement creates a special trabecular system that forms architectural framework of hemopoietic and lymphoid organs



- blood vessels
- Individual adipocytes and small group of adipocytes are found throughout the loose connective tissues
- Large aggregates of adipocytes are known as ADIPOOSE TISSUE
- The fats present in adipose cells represents nutritional calories and are used when required

Types of adipose tissues

There are two types of adipose tissues differentiated on the basis of the color

White adipose tissues: i.

• The stratum lucidum is a thin, transparent layer of keratinocytes that are becoming less round and have a flatter shape

iii. **Stratum granulosum:**

- It is present between stratum lucidum and spinosum
- Keratinocytes have granules within them, and in this layer they're visible under a microscope.

Stratum spinosum: iv.

- Between the stratum basale layer and the stratum granulosum layer.
- This layer mostly consists of keratinocytes held together by sticky proteins called desmosomes CO.
- The stratum spinosum helps received destinosones
 The stratum spinosum helps received your skin flexible and strong.
 156
 V.P Stratum basa8.9

- It is also known as stratum germinativum
- The deepest layer of epidermis
- New skin cells develop in this layer, and it also contains the keratinocyte (cur-at-in-o-site) stem cells, which produce the protein keratin.
- Keratin helps form hair, nails and your skin's outer layer, which protect you from the harsh environment.
- It also contains **melanocytes**, which are responsible for producing melanin, which provides the pigment of your epidermis.

APPENDAGES OF SKIN

The skin has four appendages

- 1. Hair
- 2. Nails
- 3. Sebaceous glands
- 4. Sweat glands

1. Hair:

- The word hair is taken from Latin word PILUS
- It is a thread like structure composed of dead compfile cells omposition of Hair:

Composition of Hair:

Each hair has a hair shaft, of hair bulb, hair partia, and arrector pili • Shaft: EW 48

It projects above the

• Root:

It is embedded in the skin

• Bulb:

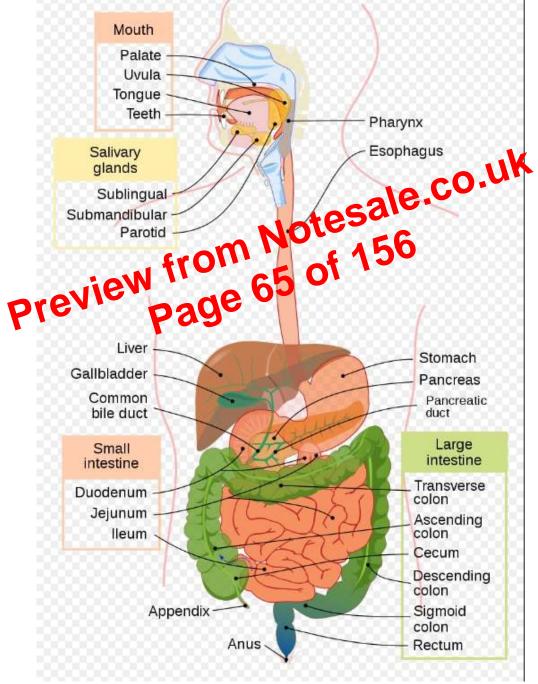
The deep end of hair follicle is dilated to hair bulb

• Papilla:

The connective tissues of dermis indents the base of the hair bulb as hair papilla

• Arrector pili:

Gastrointestinal tract *Alimentary canal*



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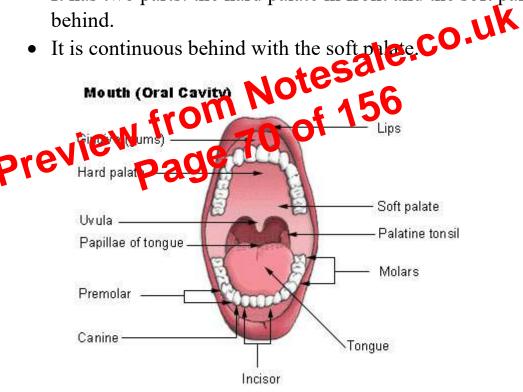
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Blood supply

- The lingual artery, the tonsillar branch of facial artery, and the ascending pharyngeal artery supply blood to the tongue
- The veins drains into the internal jugular vein

5.Palate

- The palate forms the roof of the oral cavity and the floor of the nasal cavity.
- It has two parts: the hard palate in front and the soft palate



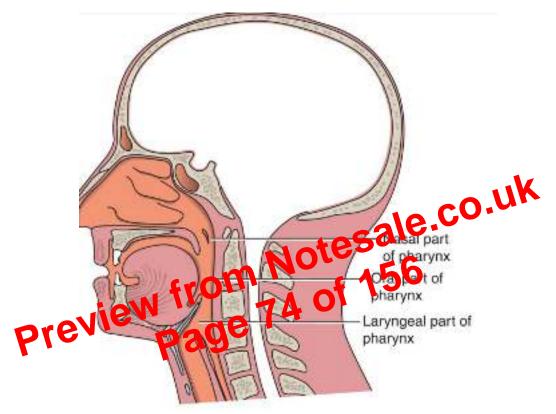
i. Soft palate:

The soft palate is a mobile fold attached to the posterior • border of the hard palate

Muscles of pharynx:

The muscles of pharynx are

Superior, middle and inferior constrictor muscles



Process of Swallowing (Deglutition)

Voluntary Action:

- Masticated food is formed into a ball or bolus on the dorsum of the tongue and voluntarily pushed upward and backward against the undersurface of the hard palate.
- This is brought about by the contraction of the styloglossus muscles on both sides, which pull the root of the tongue upward and backward.

Relation with other organs:

1st part

Anterior: quadrate lobe of liver and gallbladder

Posterior: lesser sac, gastroduodenal artery, and bile duct

2nd part

Anterior: fundus of gallbladder, right lobe of liver, and coils of small intestine

Posterior: hilium of right kidney and ureter

3rd part

Anterior: root of mesentery of small intestine, coils of jejunum

Posterior: right ureter, aorta, right psoas musclale. CO. 4th part Anterior: beginning of from 156

ot of mesentry Ooils of jejunum Anterior: beginning of lo , and medial border of psoas muscle Posterio ft margin of 2

2.Jejunum and Ileum

- Jejunum and Ileum are 6m long, the upper 2/5th of this layer is jejunum
- Each fold have distinctive features but are gradual changes from one another

Blood supply:

Arteries: branches from superior mesenteric artery Veins: branches towards superior mesenteric veins

It is separated from the ileum by the ileocecal valve (ICV) or Bauhin's valve. It is also separated from the colon by the cecocolic junction

Its length is 2.5 inch (6cm)

Function:

It receives chyme from the ileum, and connects to the ascending colon of the large intestine.

Ileocecal valve:

- It consists of two horizontal folds of mucous membrane that projects around ileum
- Prevents the reflux of cocal content into ileum

Prevents the flow of content from ileum to color le.co.uk Blood supply Arteries: crit Arteries: anterice and posterior ceraBirteries from ileocolic artery (part of supploemesenterio rate)

Veins: anterior and posterior cecal veins from ileocolic vein (part of superior mesenteric vein)

Relation with other organs

Anterior: coils of small intestine, interior abdominal wall in right iliac region

Posterior: psoas muscle, femoral nerve, appendix

2. Appendix

- The descending colon extends from the left colic flexure to the pelvis below.
- It occupies the left upper and lower quadrants.
- Its length is 10 inch (25cm)

Relation with other organ:

Anterior: Coils of small intestine, greater omentum, anterior abdominal wall

Posterior: lateral border of left kidney, iliacus muscle, iliac crest, Notesale.co.uk femoral nerve

Blood supply:

Arteries: left colic and sigmoid ranches from inferior mesenteric artery

Veins: left colice in sigmoid brace from inferior mesenteric vein

4) Signoid colon:

- The sigmoid colon begins at the pelvic inlet, where it is a continuation of the descending colon
- It hangs down into the pelvic cavity in the form of an Sshaped loop.
- It joins the rectum in front of the sacrum.

Rectum:

- The rectum occupies the posterior part of the pelvic cavity. It continuous above with the sigmoid colon and descends in front of the sacrum to leave the pelvis by piercing the pelvic floor.
- Here, it becomes continuous with the anal canal in the perineum.

2. Gallbladder

Introduction

- The gallbladder is a pear-shaped sac lying on the undersurface of the liver
- It has a capacity of approximately 30 mL, and it both stores and concentrates bile by absorbing water



Parts

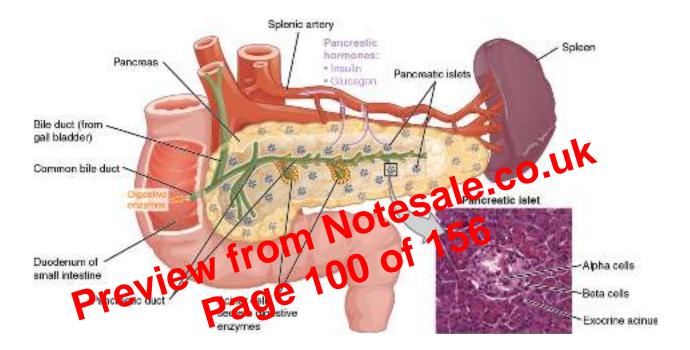
It is divided into

- a fundus,
- a body,
- and a neck.

The neck is continue with cystic duct.

4. Pancreas

The pancreas is both an exocrine and an endocrine gland.



Structure

It is an elongated structure

Secretions

- Exocrine portion of the gland produces a secretion that contains enzymes capable of hydrolyzing protein fats and carbs
- Endocrine portion of gland islets of Langerhans produces hormones like insulin and glucagon.

Location

Posterior: Diaphragm, pleura, 11th and 12th rib adrenal gland minor calyx renal pyramid (layer la renal medulla) renal artery renal vein fibrous renal pelvis BLOOD SUENLY DAG The renal artery, which ' Vein· capsule

The renal artery, which is a branch of the aorta, supplies the kidneys.

Vein:

The renal vein drains into the inferior vena cava.

LYMPH DRAINAGE

The lymph drains into the lateral aortic lymph nodes around the origin of the renal artery.

NERVE SUPPLY

The renal sympathetic plexus supplies the kidneys.

Route of Blood supply to kidneys:

Heart \rightarrow abdominal aorta \rightarrow renal artery

Interior of Bladder

Trigone:

- The internal surface of the base of the bladder is called the • trigone.
- Here, the mucous membrane firmly adheres to the underlying muscle and is always smooth.
- The trigone has small, slitlike openings of the ureters at its lateral angles and below the crescentic opening of the urethra.
- The interureteric ridge runs from one ureteric orifice to the other.
- It is caused by the underlying muscle, and it forms the upper limit of the trigone.
- In males, the median lobe of the prostate bulges fight upward into the bladder, behind the urethral origine to form a swelling (the uvula vesicae).

- Pine muscle 22 Gisists of three interlacing layers of smooth muscle fibers
- At the neck of the bladder, the circular muscle forms the sphincter vesicae.

Ligaments

- The neck of the bladder is held in position by the puboprostatic ligaments in males and by the pubovesical ligaments in females.
- These ligaments are formed from pelvic fascia

Blood Supply Arteries

Blood Supply of the Testis and Epididymis

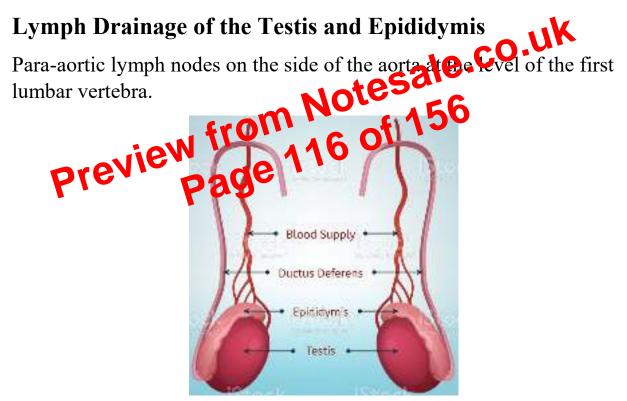
Arteries:

The **testicular artery** is a branch of the abdominal aorta.

The testicular vein emerges from the testis and the epididymis as a venous network (the pampiniform plexus), which becomes reduced to a single vein as it ascends through the inguinal canal.

Veins:

The right **testicular vein** drains into the inferior vena cava, and the left vein joins the left renal vein.



2.Penis

The penis has a fixed root and a body that hangs free

• The bulb continues forward into the body of the penis and forms the corpus spongiosum

Crus:

- Each crus attaches to the side of the pubic arch, and the ischiocavernosus muscle covers its outer surface.
- The two crura converge anteriorly and come to lie side by side in the dorsal part of the body of the penis, forming the corpora cavernosa

Penile body: ii.

The essential components of the body of the penis are three dylinders of erectile tissue enclosed in a tubular sheath of deep taking (Buck's fascia).

Erectile tissues:

tissues are the we dorsally placed corpora The me? cavernosa an accingle corpus spongiosum that is applied to their ventral surface

Glans penis:

- The corpus spongiosum expands at its distal extremity to form the glans penis, which covers the distal ends of the corpora cavernosa.
- The pronounced posterior edge of the glans is the **corona**.
- The slitlike orifice of the urethra, the external urethral meatus, is at the tip of the glans penis.

Prepuce:

• The prepuce (foreskin) is a hoodlike fold of skin that covers the glans.

4. Bulbourethral gland:

- The bulbourethral glands are two small glands that lie in the deep perineal space, embedded in the sphincter urethrae muscle
- Their ducts pierce the perineal membrane and enter the penile portion of the urethra.
- They pour their secretion into the urethra in response to erotic stimulation

5. Prostate gland:

The prostate is a fibromuscular glandular organ that surrounds the

prostatic urethra Location: It is about 125 for (3 cm) long and res between the neck of the bladder above and the uncertain of the bladder above and the urogentracophragm below

- The two ejaculatory ducts pierce the upper part of the posterior surface of the prostate to open into the prostatic urethra at the lateral margins of the prostatic utricle.
- The numerous glands of the prostate are embedded in a mixture of smooth muscle and connective tissue, and their ducts open into the prostatic urethra
- The prostate is incompletely divided into five lobes:
- Anterior lobe 1.
- ii. Median lobe
- iii. Posterior lobe
- iv. Left lateral lobe
- Right lateral lobe v.

Before puberty, the ovary is smooth, but after puberty, it becomes progressively scarred as successive corpora lutea degenerate.

After menopause, the ovary becomes shrunken and its surface is pitted with scars.

Functions:

These are responsible for the production of female germ calls called **Ova** and female sex hormones called Estrogen and Progesterone in sexually mature females

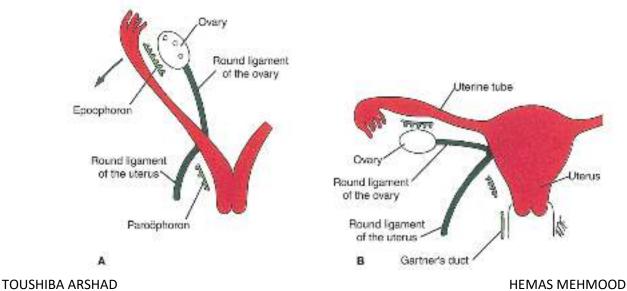
Blood supply:

Arteries:

The ovarian artery arises from the abdominal aorta at the by Uor the first lumbar vertebra. Veins:

nto the inferior The ovarian vein drain a cava on the right side and Ceft side. into t nar vein on th

This is the same relationship as the testicular veins in males.



- Also known as PARS INFUNDIBULUM, surrounds the infundibulum in the form of collar
- It consists of mainly of groups or cords of faintly basophilic cuboidal cells containing lipid droplets and glycogen granules
- It contains sparse population of gonadotrophins which secrete LH and FSH

ii. Neurohypophysis

The neurohypophysis consists of infundibulum and pars nervosa

Infundibulum:

- It is also known as Infundibelassfalk
 It is the short stalk by hypothalami

contains hypothalamo-hypophyseal tract which consists of axous of the supraoptic and paraventicular nuclei of the hypothalamus

Pars nervosa:

- Pituicytes:
- Pars nervosa consists of unmyelinated nerve fibers, fenestrated capillaries, and specialized glial cells called Pituicytes
- The pitiucytes are specialized glial cells which resemble the astrocytes
- They are abundant in pars nervosa and plays an important supportive role for the axons present in this part of the pituicytes
- The unmyelinated nerve fibers are about 10,000 in number

i. Zona glomerulosa:

- Is the outermost zone and lies just beneath capsule
- It consists of 15% of the cortical volume
- It is composed of columnar or pyramidal cells consisting of darkly stained, spherical nuclei

Secretion:

The zona glomerulosa cells secrete mineralocorticoids chiefly **ALDOSTERONE**

ii. Zona Fasciculata:

- is the thickest zone and covers 70-80% of cortical volume
- it consists of large polyhedral cells arranged in long straight cords that are one of two cells thick are one at right angles to the surface of the gland **ote**
- the cells in this the is larger than that of zona glomerulosa

The zona data is lata produce glucocorticoids such as CORTISOL

iii. Zona Reticularis:

- Is adjacent to medulla
- Makes up to 10% of the cortcal volume
- This zone consists of polyhedral or rounded cells arranged in a branching and anastomosing cords **Secretion:**

The cells in this zone secrete weak androgens such as **ESTROGENS**, **PROGESTRONE**, and **CORTISOL**

2. The Adrenal Medulla

- The adrenal medulla contains anastomosing cords of large polyhedral cells called **MEDULLARY CELLS**
- The cells are supported by the meshwork of reticular fibers
- Due to their affinity for chromium salt, the medullary cells are also known as **CHROMAFFIN CELLS**
- These cells have neurons that lack axons and dendrites

Secretion:

The secretions consists of two catecholamine

 i. Epinephrine: Epinephrine is chief hormone produced by the network cells and accounts for 80% of the total cate column e output of the adrenal medulla
 ii. Norecie phrine

Depending on the basis of secretory granules, the medullary cells can be divided into two types

- i. Norepinephrine producing cells
- ii. Epinephrine producing cells