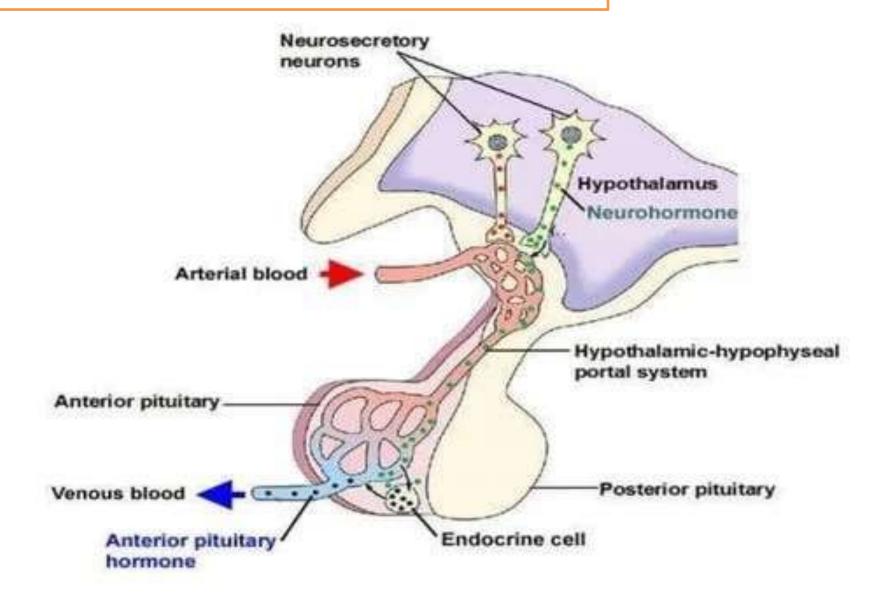
Hormones of Pituitary Gland

Pituitary Gland



HORMONES:

Anterior lobe:

- Growth hormone (GH)
- Prolactin
- Thyroid stimulating hormone (TSH)
- Adrenocorticotrophic hormone (ACTH)
- Follicle stimulating hormone (FSH)
- Luteinizing hormone (LH)

Intermediate lobe:

A and B melanocyte stimulating hormone

Posterior lobe:

- Vasopressin (ADH)
- oxytocin



GROWTH HORMONE (GH):

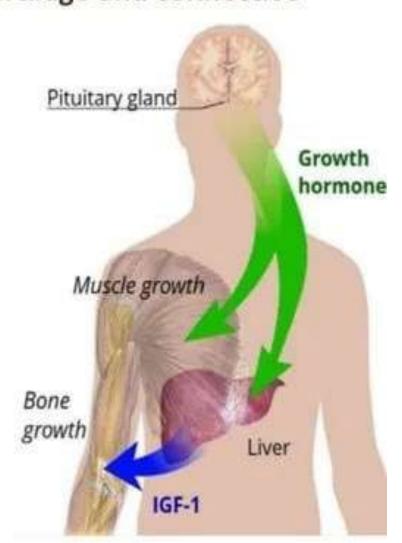
Action of growth hormone

1. Stimulating of growth of bones, cartilage and connective

tissue:

Somatomedins are synthesized in the liver, in response to stimulation by the GH

The effects of GH on skeletal growth are mediated by somatomedins



action of GH continue...

2. Effect on Protein and Mineral Metabolism:

On protein metabolism: GH is protein anabolic

hormone.

On mineral metabolism:

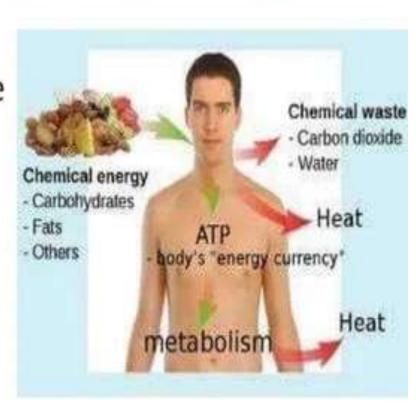
- Increase calcium absorption from GIT
- Decrease sodium, potassium, calcium and phosphorous excretion from kidney



action of GH continue...

3. Effect on carbohydrate and fat metabolism:

- Market Market
- Material Metabolism Confat metabolism C



CONTROL OF GROWTH HORMONE

The release of GH is primary under the control of two

hypothalamic hormones:

- GH releasing hormone
- ▶GH inhibiting hormone

Stimuli increases GH

Secretions by stimulating GHRH release. E.g. during exercise and stress

Stimuli decrease GH secretion by release of GHIH also called Somatostatin

DISEASES RELATED TO GROWTH HORMONE

1. Gigantism: It is due to overproduction of GH

during adolescence.

It is characterized:

× Tall stature

Bilateral gynaecomastia.

Large hand and feet.



diseases continue...

* Acromegaly: It is due excessive secretion of GH

during adulthood

It is characterized by:

Broad, thick nose

- Thickening of the skin
- Prominent brow
- Pronathism: elongation and widening of the mandible



diseases continue...

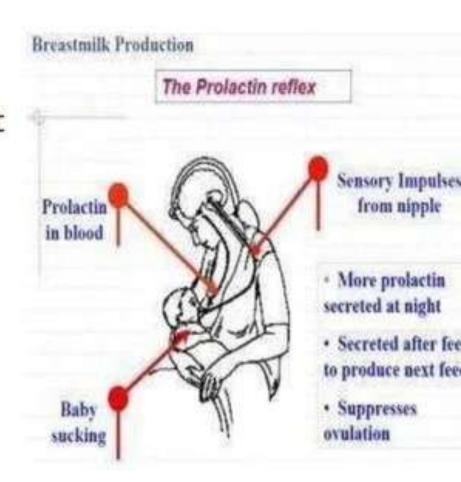
- 3. Dwarfism: Deficiency of GH secretion.
- Shortness of stature
- Small genitalia
- Delicate extremities.



2. Prolactin:

Actions of prolactin:

Prolactin plays an important role in the development of the mammary gland and in milk synthesis.



prolactin continue...

Control of prolactin secretion: A. Stimulating factors:

They act via stimulating Prolactin releasing factor. e.g. Exercise, emotional stress, pregnancy and breast feeding.





continue...

B. Inhibitory factors:

which is released by the

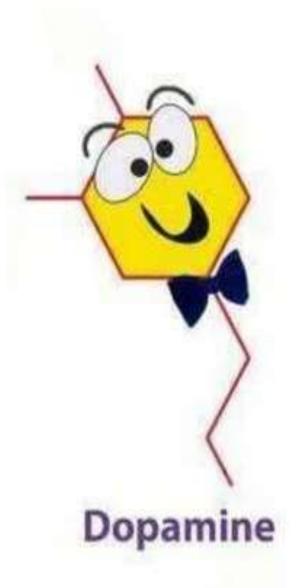
hypothalamus

inhibits prolactin secretion

from the anterior pituitary

Dopamine may be the main

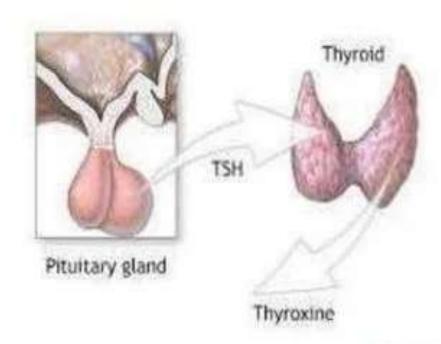
prolactin inhibiting factor.

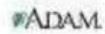


3. Thyroid-stimulating hormone(TSH):

It stimulates the **thyroid** gland to produce:

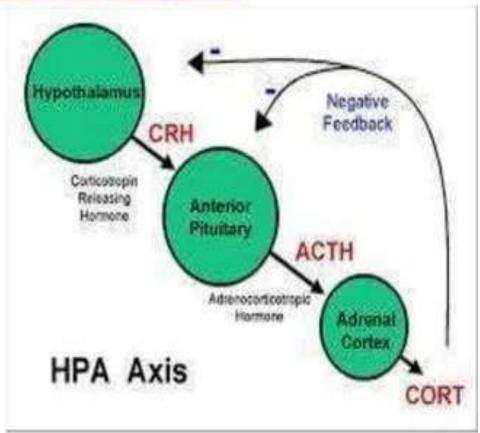
- Thyroxin (T₄), and
- <u>Triiodothyronine</u> (T₃)





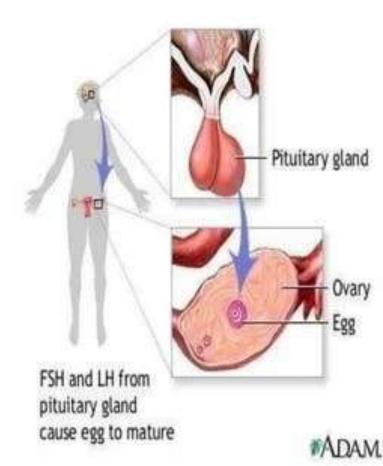
4. ADRENOCORTICOTROPHIC HORMONE(ACTH):

- It is secreted by the <u>anterior pituitary gland</u>.
- It is often produced in response to biological stress.
- Its principal effects are increased production and release of corticosteroids.



5. FOLLICLE STIMULATING HORMONE(FSH):

- It is synthesized and secreted by <u>anterior pituitary gland</u>
- FSH regulates the development, growth, pubertal maturation and reproductive processes of the body



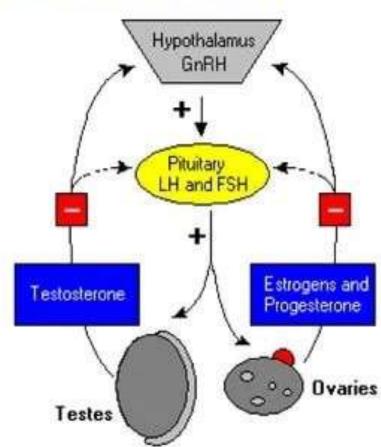
6. LUTEINIZING HORMONE(LH):

It is a hormone produced by the anterior pituitary

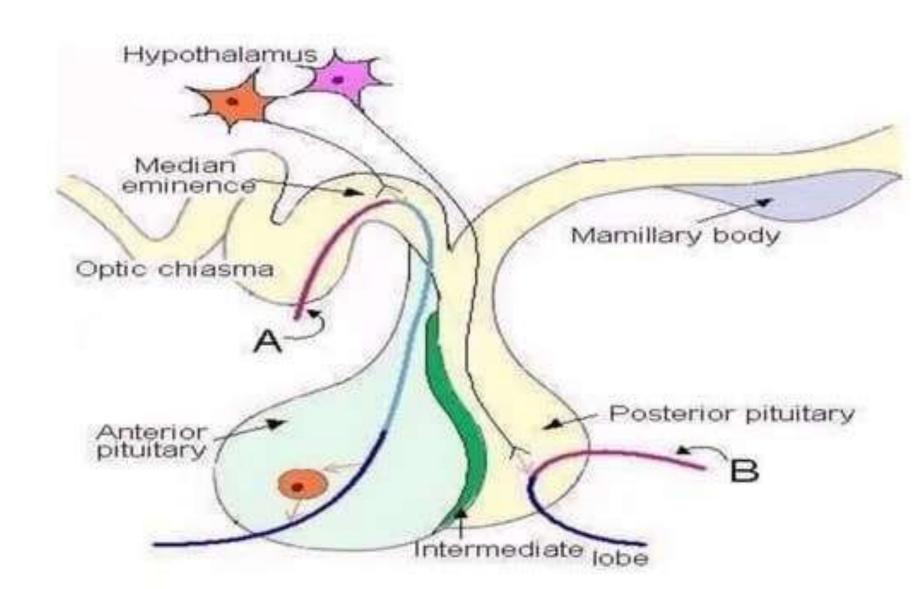
gland.

In females, an acute rise of LH triggers ovulation and development of the corpus luteum

In males, it stimulates the production of <u>testosterone</u>



INTERMEDIATE LOBE



intermediate lobe continue...

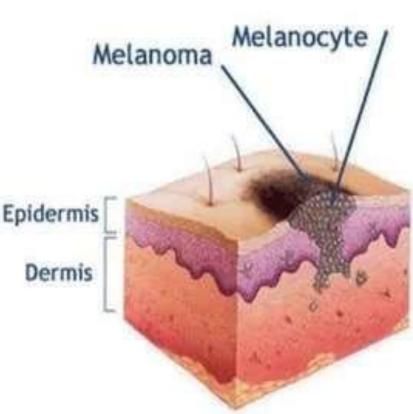
HORMONES OF INTERMEDIATE LOBE:

It secretes:

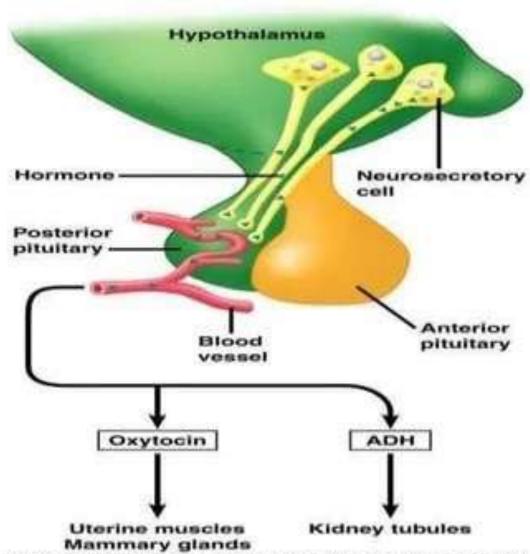
- α melanocyte stimulating hormon
- β melanocyte stimulating hormon

Function:

- They stimulate the production of melanin by melanocytes in skin and hair
- MSH signals to the brain have effects on appetite and sexual arousal.



POSTERIOR PITUITARY:

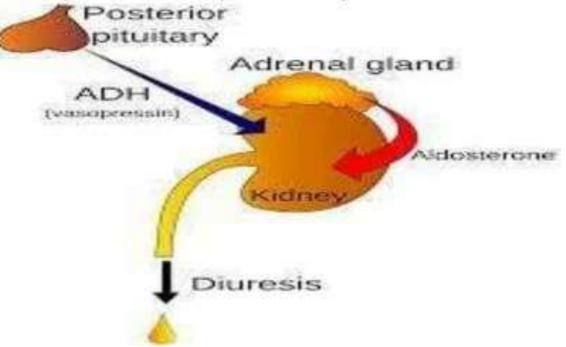


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HORMONES OF POSTERIOR PITUITARY:

A. Anti-diuretic hormone (ADH) /vasopressin:

- It is a hypothalamic hormone synthesized in the cells of the supra optic nucleus
- ADH is stored in the posterior pituitary



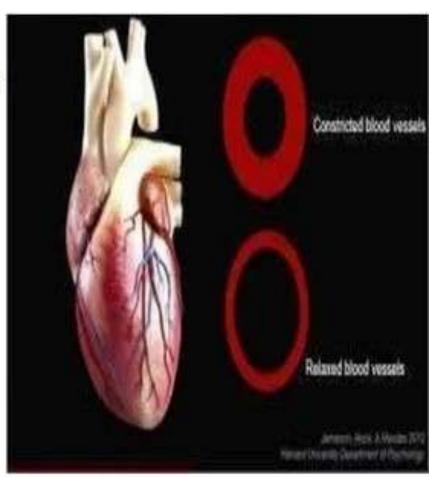
ADH continue...

Functions of ADH:

Its two primary functions-

- To retain water in the body
- To constrict blood vessel.





DISEASES RELATED TO ADH:

Diabetes Insipidus:

It is a condition characterized by-

- Excessive thirst
- Excretion of large amounts of severely diluted <u>urine</u>

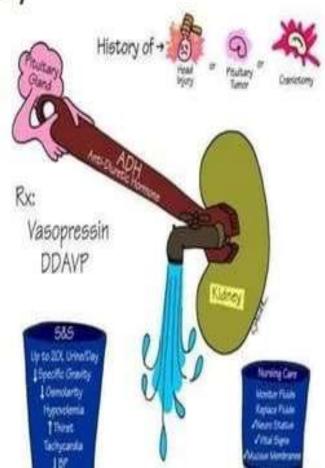


diseases continue...

Polyuria:

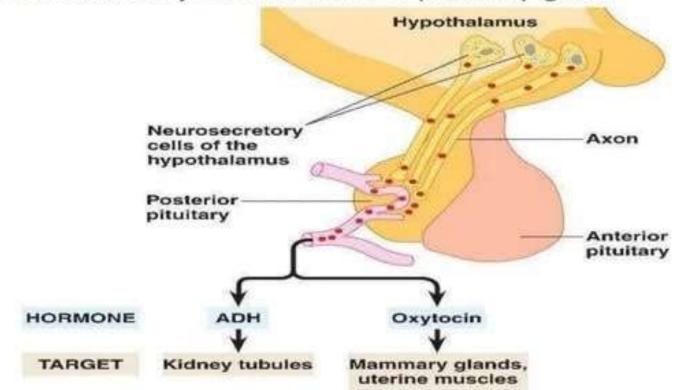
It is the excessive or abnormally

large production of <u>urine</u>
(at least 2.5 or 3L /in adults)



B. OXYTOCIN: -

- Oxytocin is synthesized in the hypothalamus
- Stored in the posterior lobe of pituitary gland



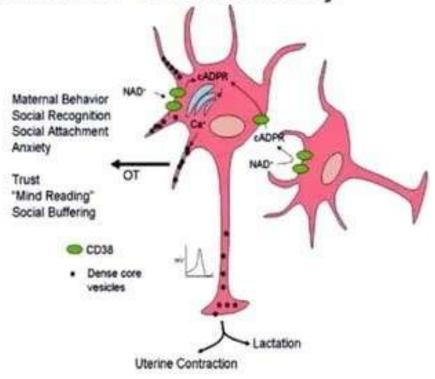
oxytocin continue...

Action of oxytocin:

Oxytocin stimulates contraction of mammary

gland to produce milk.

Stimulate contraction of the smooth muscles of the uterus



Thyroid gland continue...

ANATOMY OF THE THYROID GLAND: -

The thyroid gland is situated in the neck in front

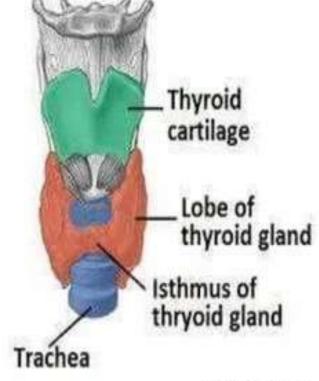
of the larynx and trachea

It weighs about 25g

It looks like butterfly in shape

Consisting of two lobes

The lobes are joined by a narrow isthmus





THYROID HORMONES

Triiodothyronine (T₃):

It affects almost every physiological process in the body:

- Growth and development,
- Metabolism,
- Body temperature, and
- Heart rate
- Thyroxin (T₄):
- Controls development and maturation
- Excess thyroxin results rapid development
- Deficiency of thyroxin results in delayed development

hormones continue...

Calcitonin: It is a hormone secreted by the C cells of the thyroid gland

Its main actions are:

- to increase bone calcium
- to decrease blood calcium levels

Calcitonin opposes the effects of parathyroid hormone, which acts to increase the blood level of calcium.

Thyroid gland continue...

Thyroid is not absolutely essential for life,

but its removal in adults leads to:

- Poor resistance to cold
- Mental and physical slowing.

and in children's:

- Mental retardation
- Dwarfism



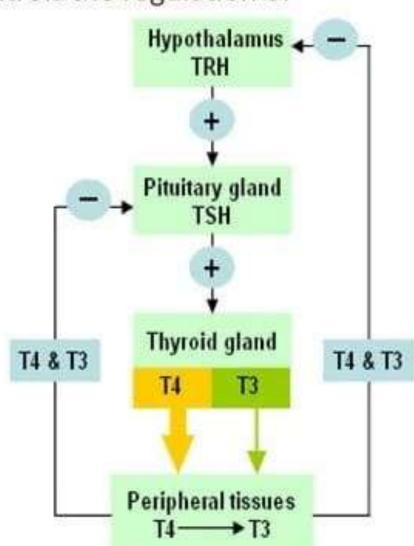
REGULATION OF THYROID SECRETION

Thyroid stimulating hormone (TSH) controls the regulation of

thyroid hormones.

The release of **TSH** by the anterior lobe of the pituitary, is regulated by the hypothalamus via negative feedback mechanism.

It is a reaction that causes a decrease in function. It occurs in response to some kind of stimulus.



DISEASES RELATED TO THYROID GLAND

1. **GOITER**: -

Any enlargement of the thyroid gland is called goiter

Caused by iodine deficiency.

Characteristic features: -

- Swelling in the neck
- Breathing difficulties
- Cough
- Hoarseness
- Swallowing difficulties



diseases continue...

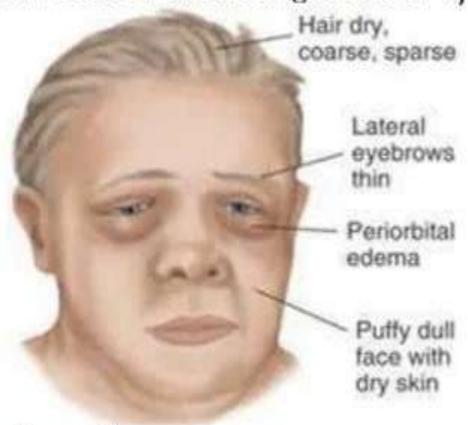
2. HYPOTHYROIDISM: -

It is the condition resulting from reduced circulating levels of T₃

and T_{4.}

Characteristic features: -

- Goiter
- Puffiness of face with
- Periorbital swelling
- Loss of scalp hairs
- Ptosis, i.e., drooping of upper eyelid.
- Dry, thickened, rough and yellow skin



diseases continue...

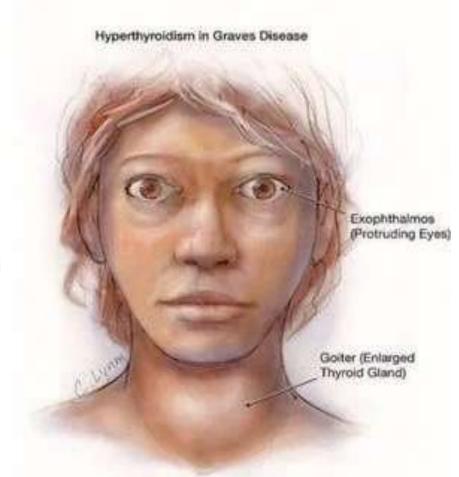
3. HYPERTHYROIDISM/GRAVES DISEASE: -

It is the condition resulting from increased circulating level

of T₃ and T₄

Characteristic features: -

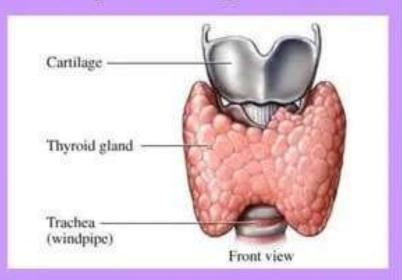
- Moderate enlargement of thyroid gland
- Exophthalmos(Lid retraction)

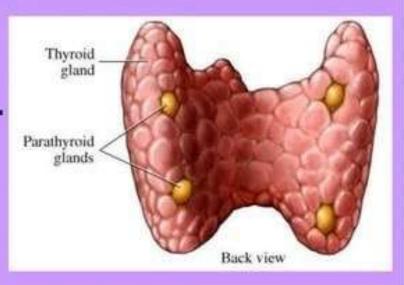


D.Parathyroid Gland

Secretions of the parathyroid gland...

The two pairs of parathyroid glands are located on the dorsal or back side of the thyroid gland. They secrete parathyroid (PTH) which plays a role in the metabolism of phosphorus. Too little results in cramping; too much results in osteoporosis or kidney stones.





Function

The parathyroid glands secrete parathyroid hormone (PTH, parathormone). Secretion is regulated by blood calcium levels. When they fall, secretion of PTH is increased and vice versa.

The main function of PTH is to increase the blood calcium level when it is low.

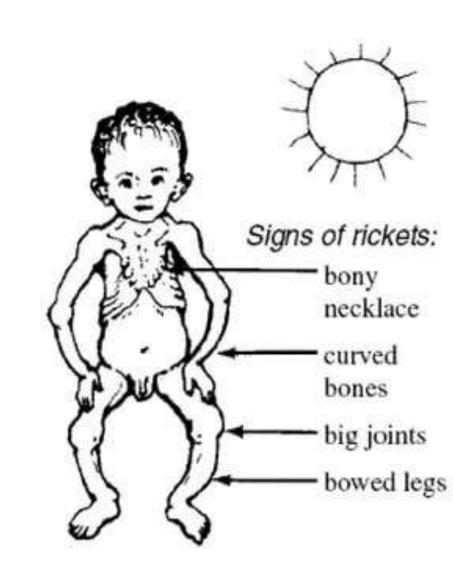
DISEASES RELATED TO PARATHYROID GLAND

1.RICKETS:

- It is a disease characterized mainly by bone deformities in young children's
- The disease of children sets in about 6th month of life

Characteristic features: -

- Deformed bones
- Thick wrist and ankles
- Retarded growth



diseases continue...

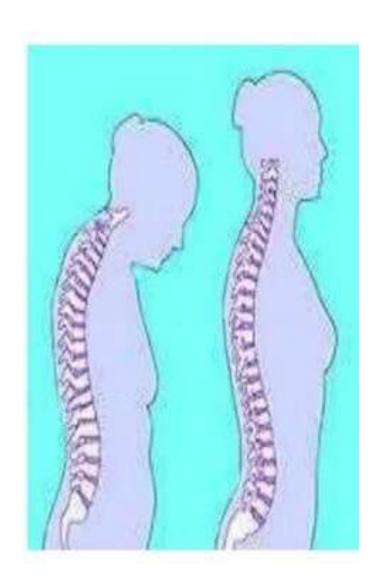
2. OSTEOMALACIA: -

- This is due to inadequate

 absorption of calcium

 due to deficiency of Vitamin D

 and Calcium in the diet
- The disease is limited to females, usually appears after multiple pregnancies and lactation.



diseases continue...

3. HYPOPARATHYROIDISM:

It is an abnormally low level of calcium in the blood

- Characteristic features: -
- Psychiatric disturbance
- Par aesthesia
- Development of cataract



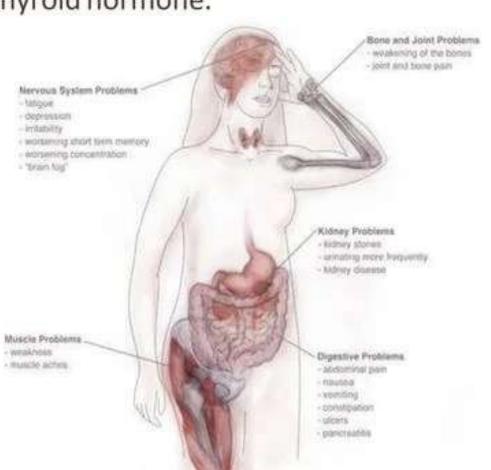
diseases continue...

4. HYPERPARATHYROIDISM: -

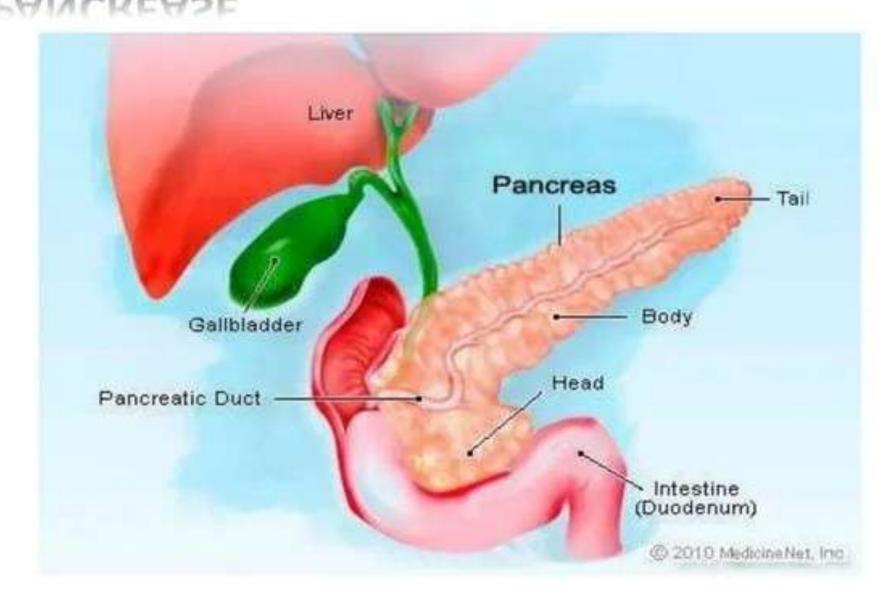
Excessive secretion of parathyroid hormone.

Characteristic features: -

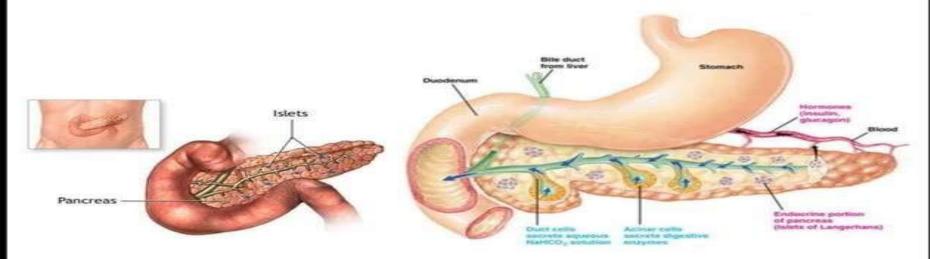
- Formation of renal calculi
- Polyuria
- Polydipsia
- Anorexia
- Muscle weakness
- General fatigue
- Calcification of soft tissue



PANCREASE



The islets of Langerhans...



The islets of Langerhans are small clusters of cells located in the pancreas.

throughout the body.

There are three main types of cells in the pancreatic islets:

α (alpha) cells, which secrete glucagon

β (beta) cells, which are the most numerous, secrete insulin

δ (delta) cells, which secrete somatostatin (GHRIH)

Secretions from the islets of Langerhans... Beta cells

Alpha cells facilitate the breakdown of glycogen to glucose. This elevates the blood sugar.

Delta cells suppress the release of glucagon and insulin.

Beta cells secrete the hormone insulin, which is essential for the maintenance of normal blood sugar levels. Inadequate levels result in diabetes mellitus.

Your goal is to maintain normal blood glucose levels



PANCREATIC HORMONES

1. INSULIN:

Actions:

- On carbohydrate metabolism:
- Insulin increases the glucose entry into most of body cells
- Insulin produce hypoglycemia
- On protein metabolism:
- Modified iron Clinical Buchemistry, A. Gawerlai, Churchill Urbustone, Libraryk, 1995.
- Insulin promotes amino-acid uptake
- It decrease protein breakdown
- It promotes protein synthesis especially in muscles

Actions of Insulin



DISEASES RELATED TO INSULIN: -

DIABETES MELLITUS

- It is a group of metabolic diseases in which there are high blood sugar over a prolonged period.
- This high blood sugar produces the symptoms of
- frequent urination,
- increased thirst, and
- increased hunger.

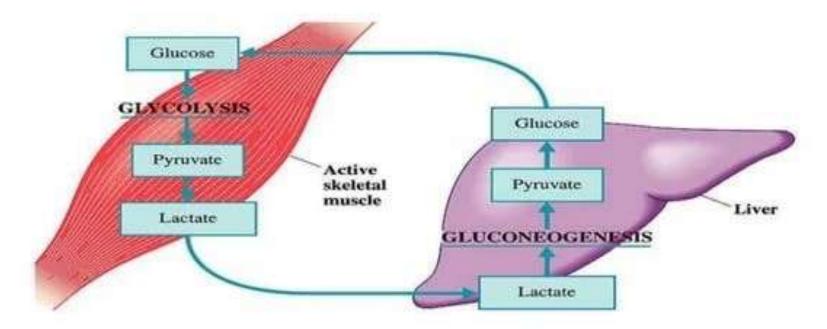


hormones continue...

2. GLUCAGON: -

Glucagon act mostly on the *liver and adipose tissues* where it antagonizes the actions of insulin

- Stimulate glycogenolysis
- Promotes gluconeogenesis



- The normal blood glucose level is between 3.5 & 8 mmol/litre (63 to 144 mg/100 mL).
- Blood glucose levels are controlled mainly by the opposing actions of insulin & glucagon:

· glucagon increases blood glucose levels



insulin reduces blood glucose levels.



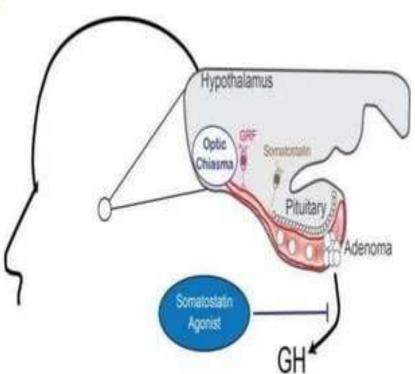
hormones continue...

3. SOMATOSTATIN:

A hormone that is widely distributed throughout the body, especially in the *hypothalamus and pancreas*

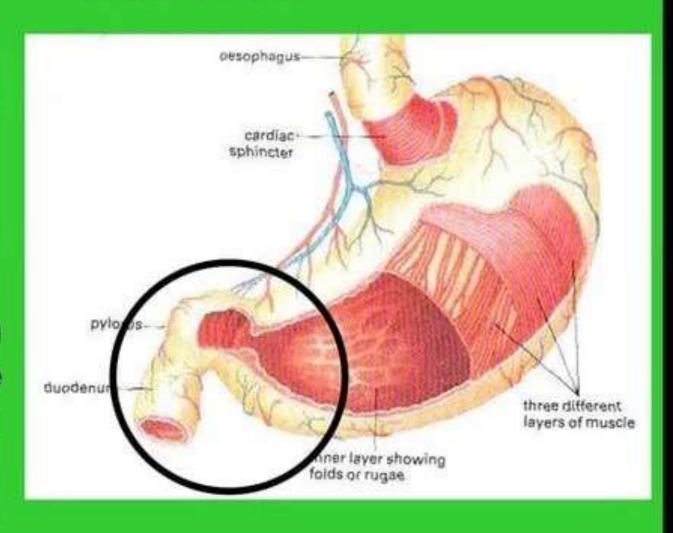
Action:

It regulates the endocrine and Nervous system functions



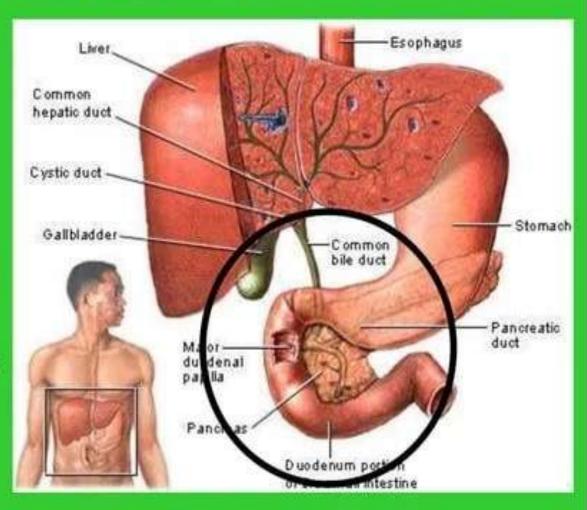
Secretions of the gastrointestinal mucosa...

The mucosa of the pyloric area of the stomach secretes the hormone gastrin, which stimulates the production of gastric acid for digestion.



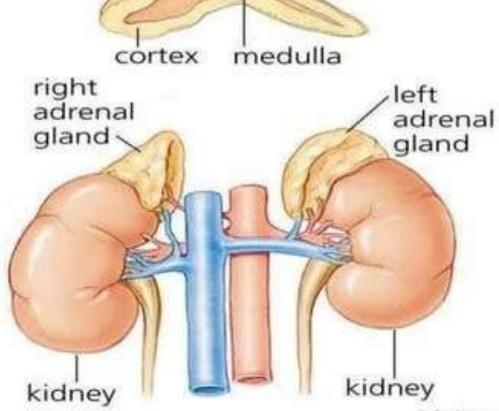
Secretions of the gastrointestinal mucosa...

The mucosa of the duodenum and jejunum secretes the hormone secretin, which stimulates pancreatic juice, bile, and intestinal secretion.



ADRENAL GLANDS

- There are two adrenal glands,
- About 4 cm long and 3 cm thick
- It has two parts:
- outer part is cortex and
- the inner part is medulla.



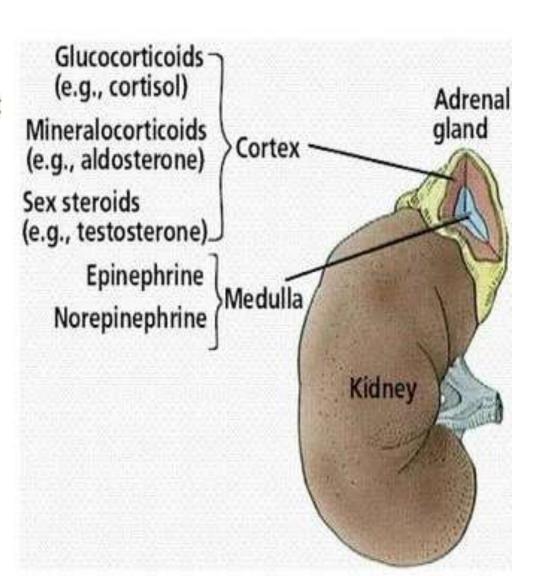
adrenal glands continue...

1. ADRENAL CORTEX: -

- It produces three hormones:
- Glucocorticoids
- Mineralocorticoids
- Sex hormones (androgens)

These are collectively called

as adrenocorticoids

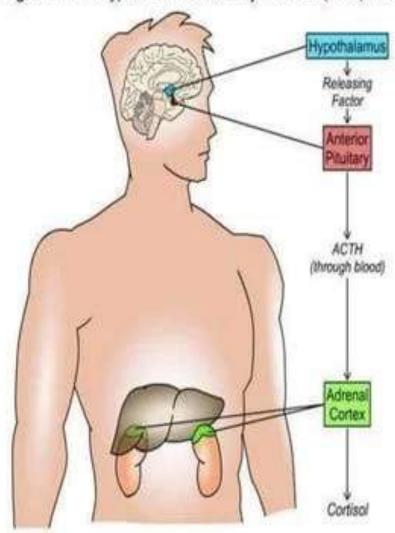


adrenal cortex continue...

A. Glucocorticoids: -

- Cortisol, corticosterone and cortisone are the main Glucocorticoids
- They are essential for life, regulating metabolism and stress
- They are high in between 4 to 8 am
- Lowest between midnight and 3 am

Figure AN-1: Hypothalamic-Pituitary-Adrenal (HPA) Axis



glucocorticoids continue...

Effects:

- Gluconeogenesis (formation of new sugar)
- Lipolysis (breakdown of triglycerides into fatty acids and glycerol for energy production).

In pathology and pharmacology:

- Have an anti-inflammatory action.
- Suppress the immune response.
- Suppress the response of tissue to injury.
- Delay wound healing.



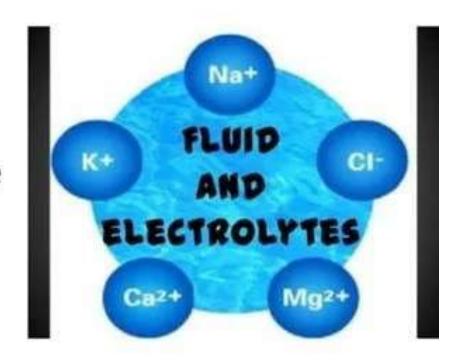


adrenal glands continue...

B. Mineralocorticoids (aldosterone): -

- Aldosterone is the main mineralocorticoids
- It maintains

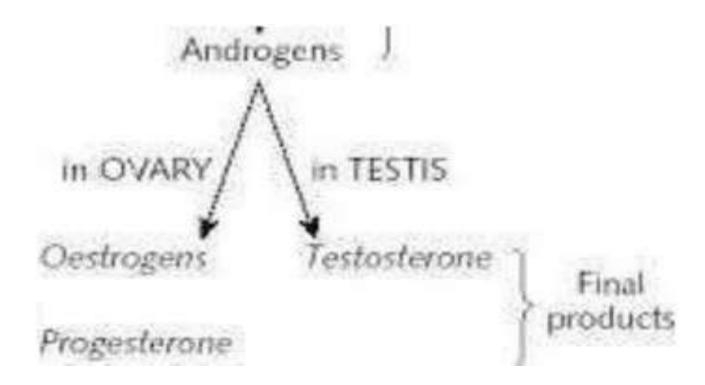
Water and electrolyte balance



adrenal glands continue...

C. Sex hormones: -

- Androgens are the main sex hormones
- They contribute to the onset of puberty



DISORDERS OF ADRENAL CORTEX

1. Cushing's syndrome: -

It is caused due to hyper secretion of glucocorticoids

Characteristic features:

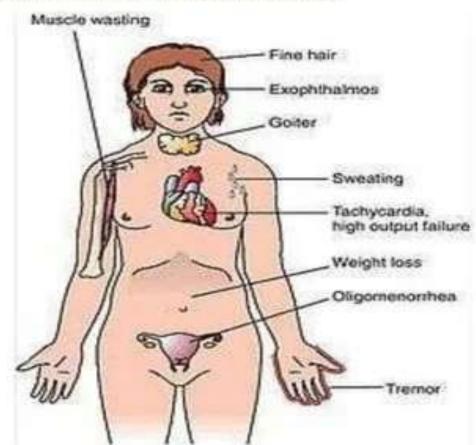
- Pain in face, neck and abdomen
- Pathological fractures
- Diminished protein synthesis
- Suppression of growth
- Hypertension
- Menstrual disturbance
- Peptic ulcers



disorders of adrenal cortex

2. Conn's syndrome: -

- This is due to excessive secretion of mineralocorticoids.
- It is usually caused by tumor affecting only one adrenal gland



disorders of adrenal cortex

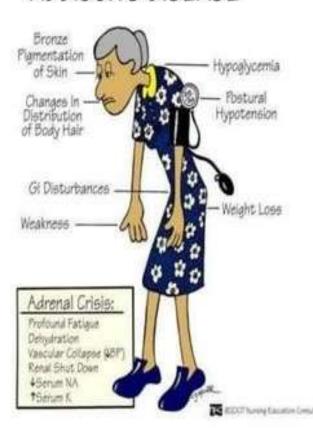
3. Addison's disease:

- It is due to hypo secretion of glucocorticoids and mineralocorticoids
- Caused by autoimmune disease

Effects:

- Muscle weakness.
- Vomiting and diarrhea.
- Tiredness.
- Mental confusion.
- Low blood volume.
- Hypotension.
- Loss of body hairs in women.

ADDISON'S DISEASE

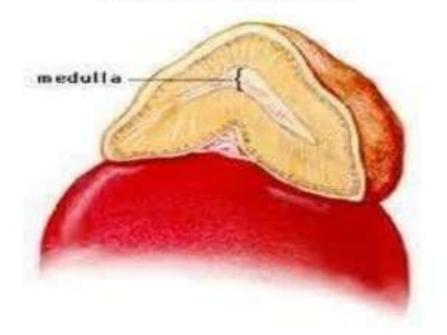


adrenal glands continue...

2. ADRENAL MEDULLA: -

- It is surrounded by the cortex
- It produces two hormones
- adrenaline and
- noradrenaline.

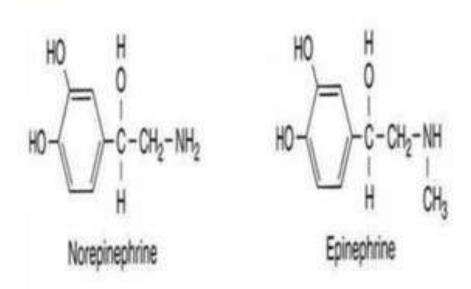
The Adrenal Gland



adrenal medulla continue...

Adrenaline and noradrenaline:

- Noradrenaline and adrenaline are released into the blood
- They are structurally very similar and have similar effects
- Together they potentiate by:
- Increasing heart rate
- Increasing blood pressure
- Increasing metabolic rate
- Dilating the pupils



DISORDERS OF ADRENAL MEDULLA: -

The effects of excess adrenaline and

noradrenaline are: -

- Hypertension
- Hyperglycemia
- Raised metabolic rate
- Nervousness
- > Headache





SUMMARY

So we discussed about the endocrine system and why it is important to us

In which we also studied about various gland:

- Pituitary gland
- Thyroid gland
- Parathyroid
- Adrenal glands
- Pancreas
- Thymus gland

Their location, function and disorders

