

Muscle tissues

By Krisztina

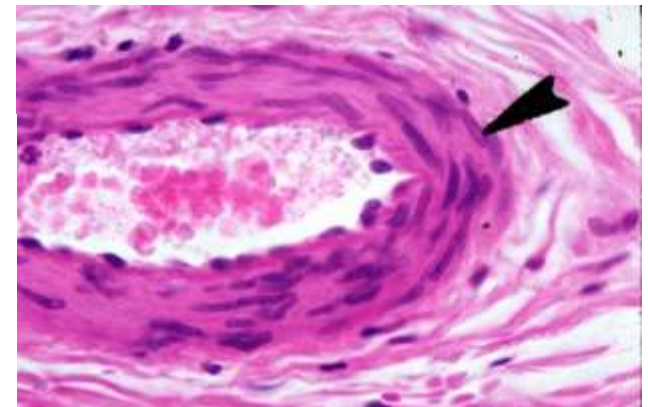
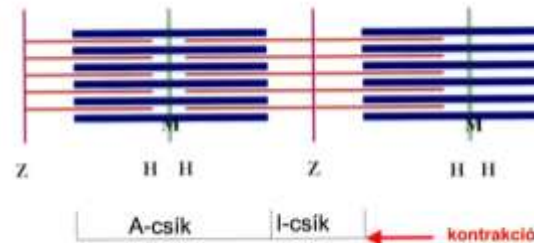
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Introduction

- Function: contraction
- Mainly cellular, small amount of ECM
- Contractile filaments, Actin, Miozin
- Well developed cytoskeleton
- High energy requirement– Mitochondria
- high Ca^{2+} -demand– smooth ER, Ca^{2+} -ion channels, Ca^{2+} -pumps
- Membrana basalis

Types of muscle tissue

- **Striated muscle**

Skeletal: -histological unit: muscle fiber
-origin and insertion on bony structures
-contraction is due to nerve stimulation

Visceral: - histological unit: muscle fiber
- independent of skeletal elements (muscles of tongue, muscles of esophagus upper third)
- contraction is due to nerve stimulation

- **Cardiac muscle** (cellular, shows striation)

- **Smooth muscle** (no striation)

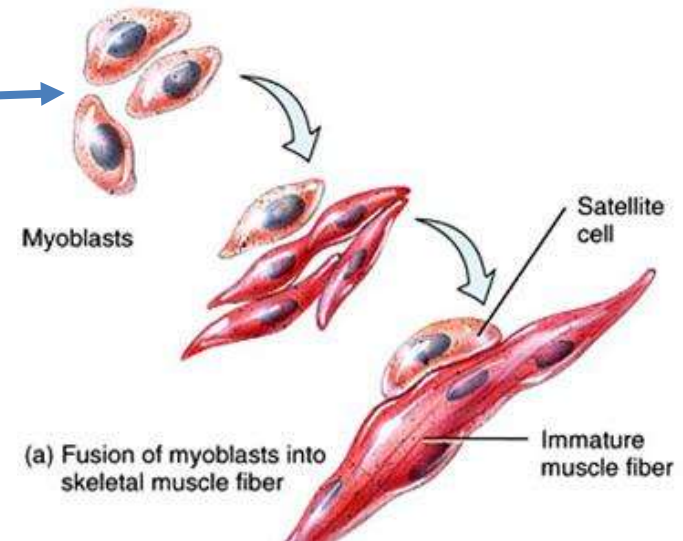
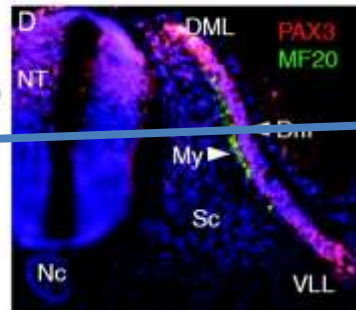
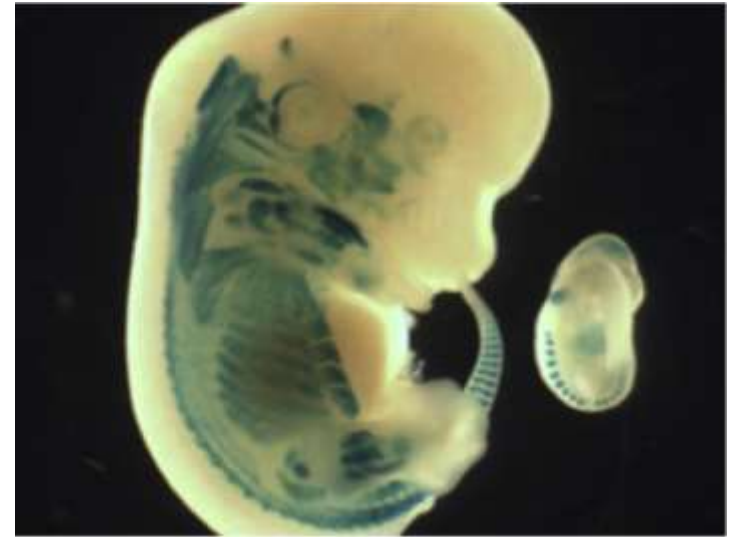
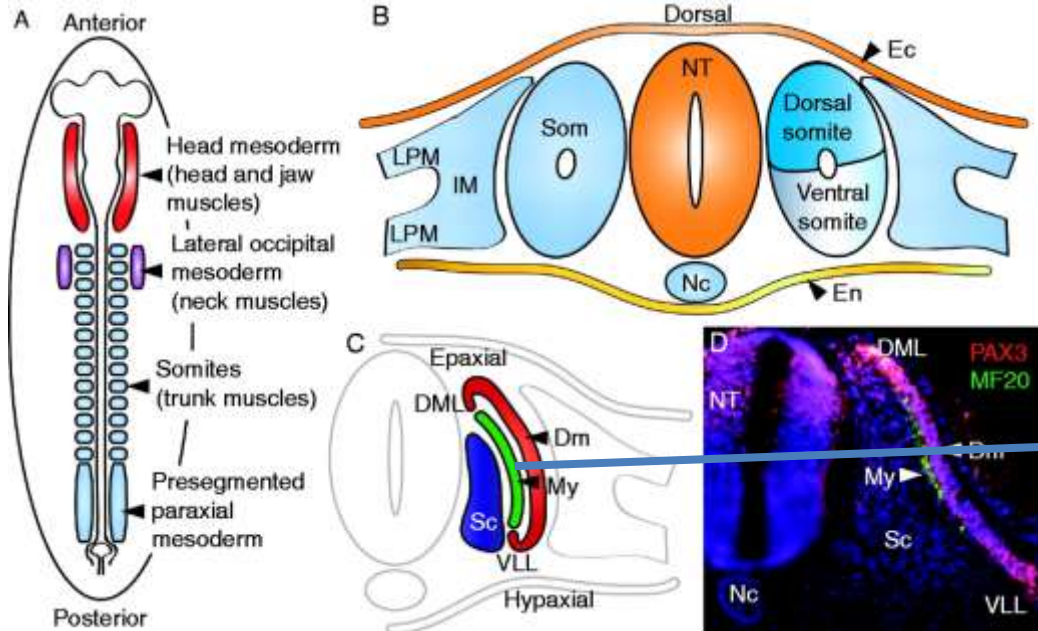
Transitional forms (these are not muscular tissues)

Myoepithel (glands)

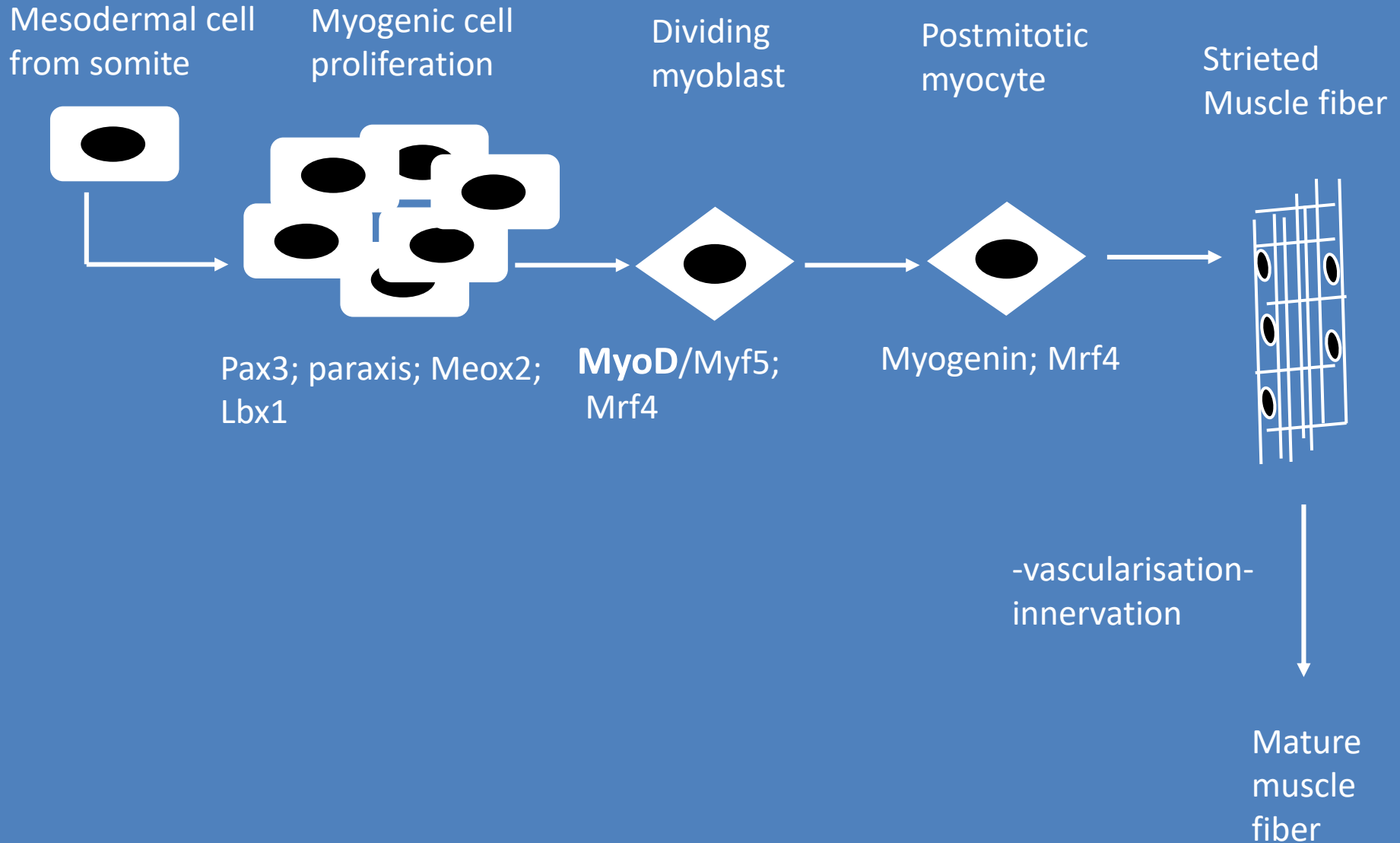
Myofibroblast (pericytes, mesangial cells)

Development of muscle tissue

Mesodermal origin in the body
 Neural crest origin in the head



Order of activation of transcription factors during muscle development

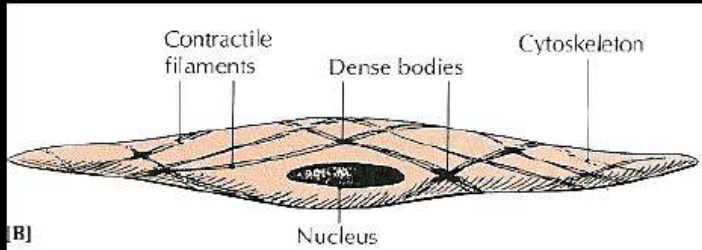


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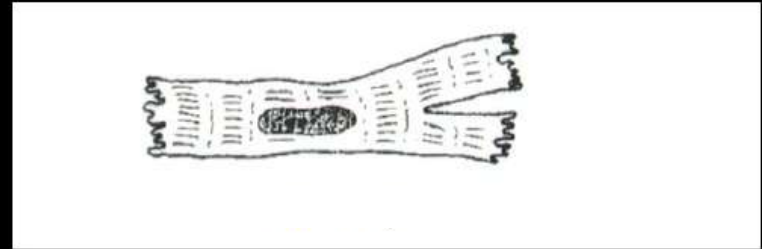
Smooth muscle

Units of different muscle types

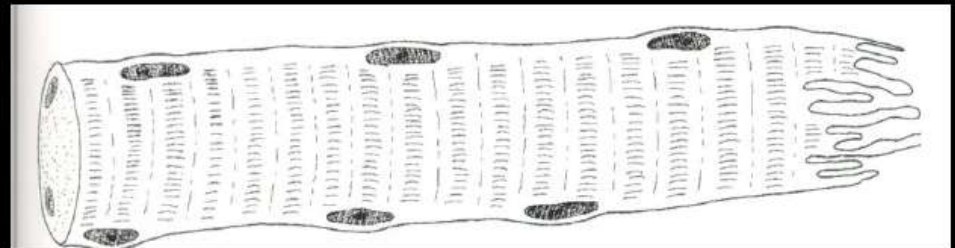
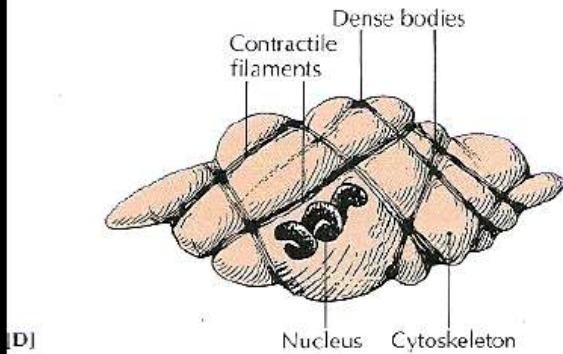
unit of smooth muscle



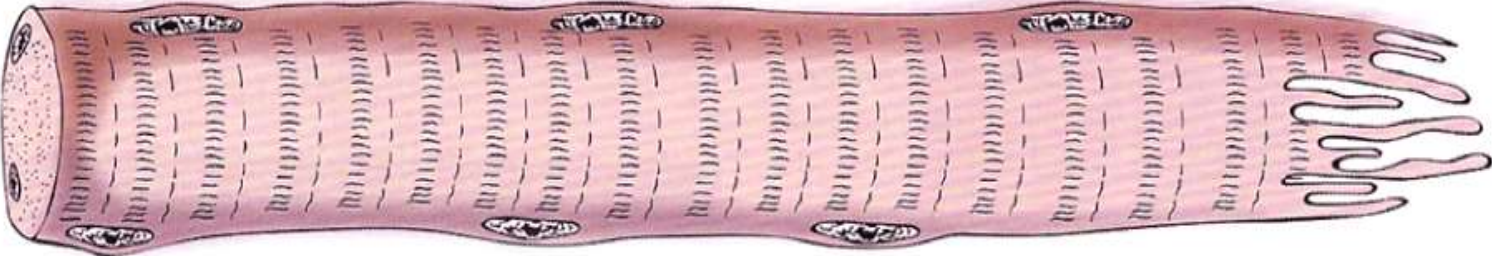
unit of cardiac muscle



unit of skeletal muscle



striated muscle fiber (up to several cms)



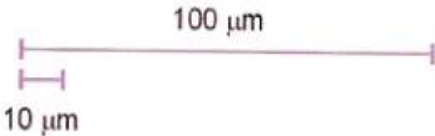
cardiomyocyte

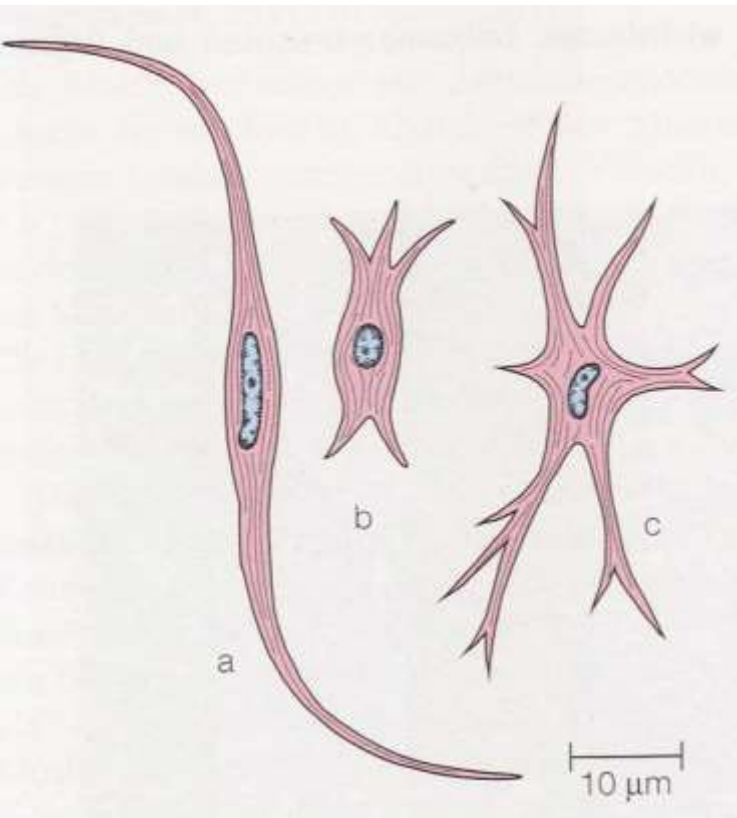


smooth muscle cell from pregnant uterus



normal smooth muscle cell





Cells with spindle like morphology

Cell nucleus is flattened, central, euchromatic with rounded ends

Length: 20-500 μm , diameter: 5-10 μm

Membrana basalis

Forms layers

Spontaneous activity– pacemaker activity

Under control of autonomic nervous system

Under hormonal control

slow but persistent contraction

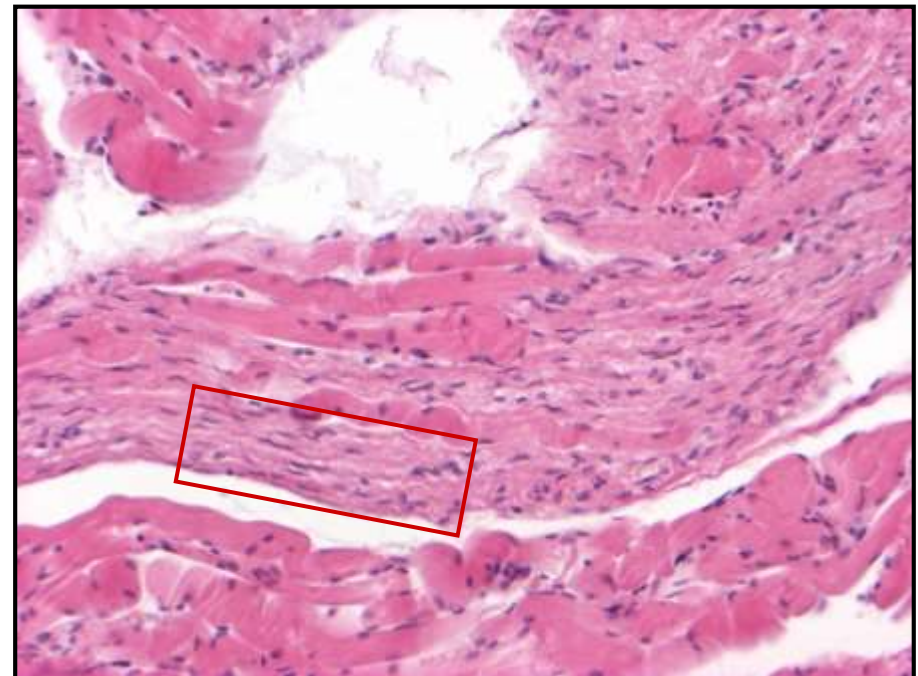
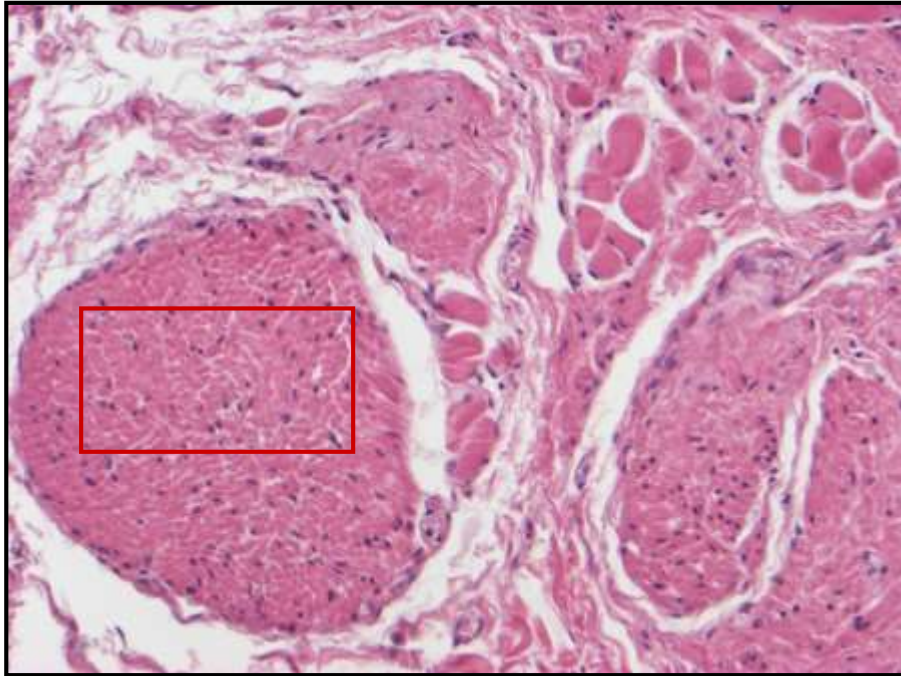
Minimal need of energy

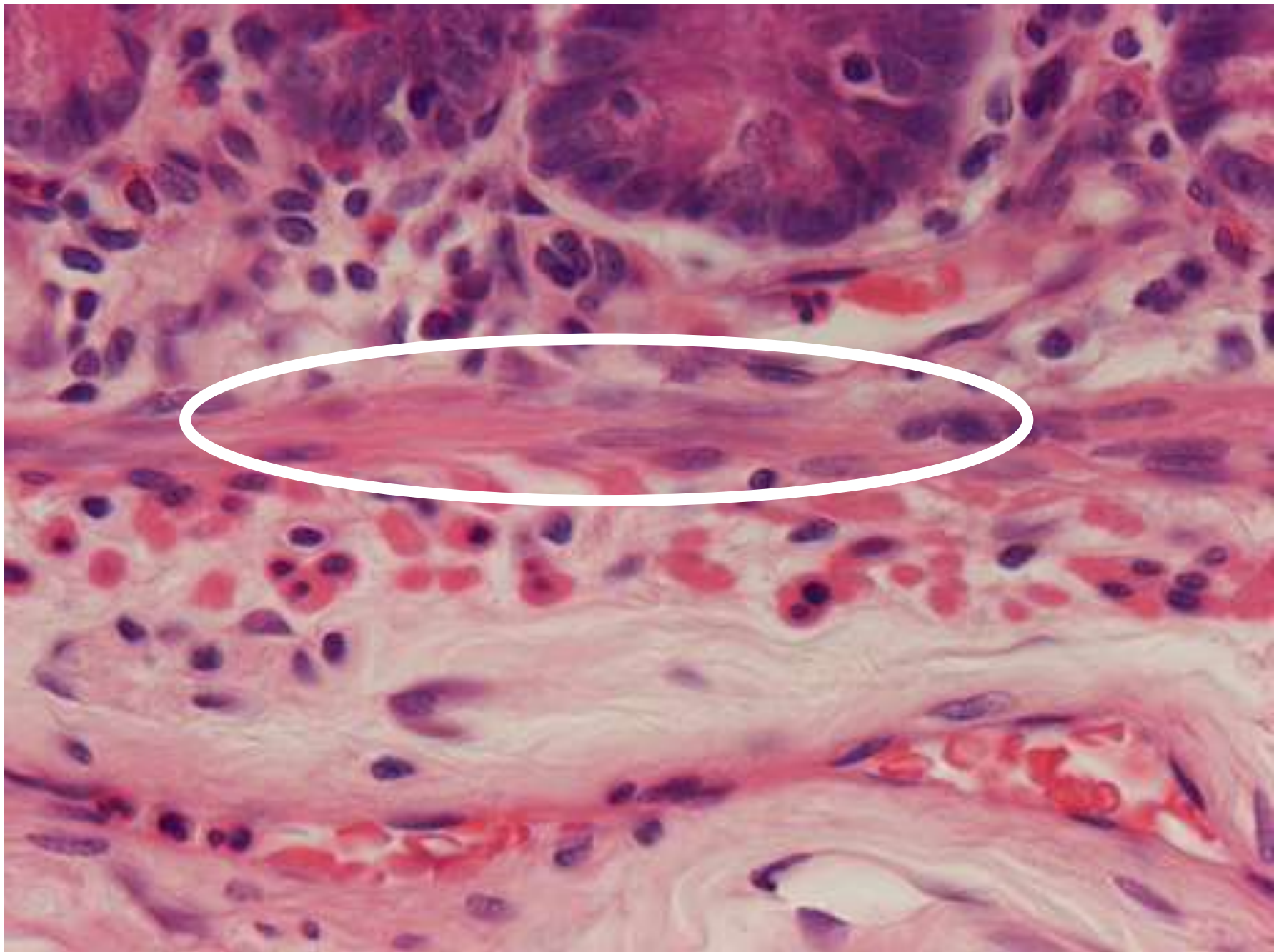
No striation

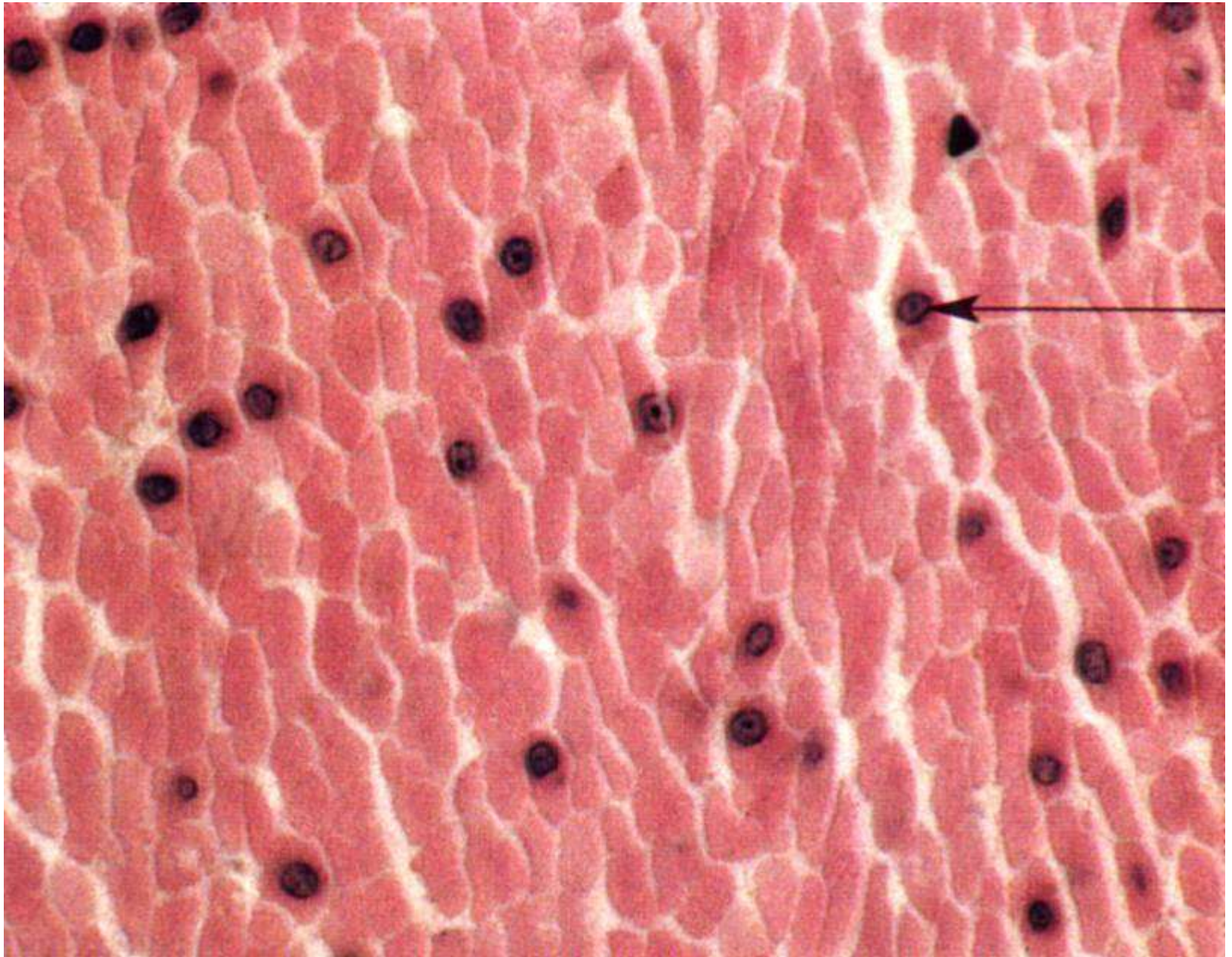
No Troponin

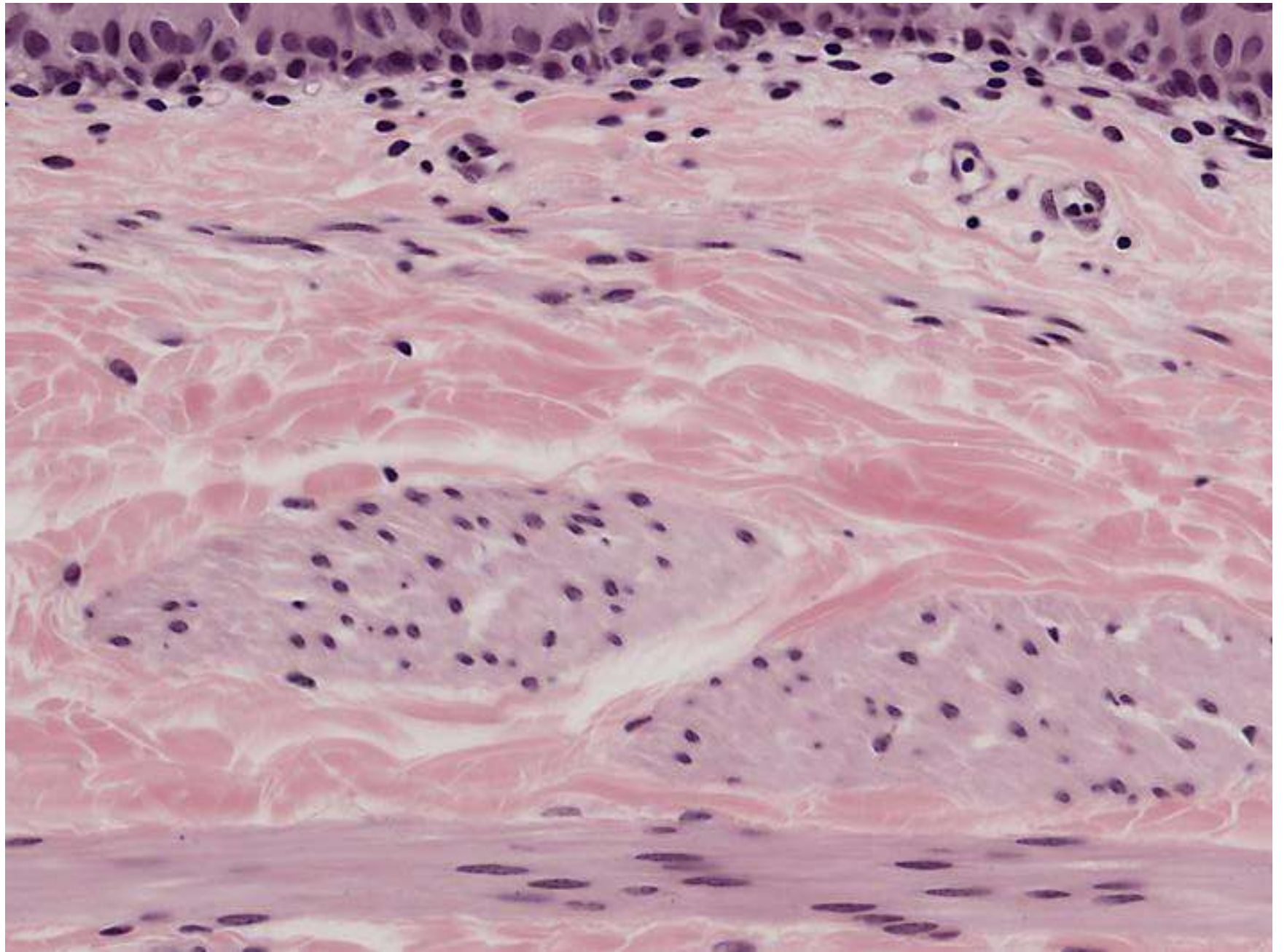
Where? In wall of splanchnic organs (like intestine)

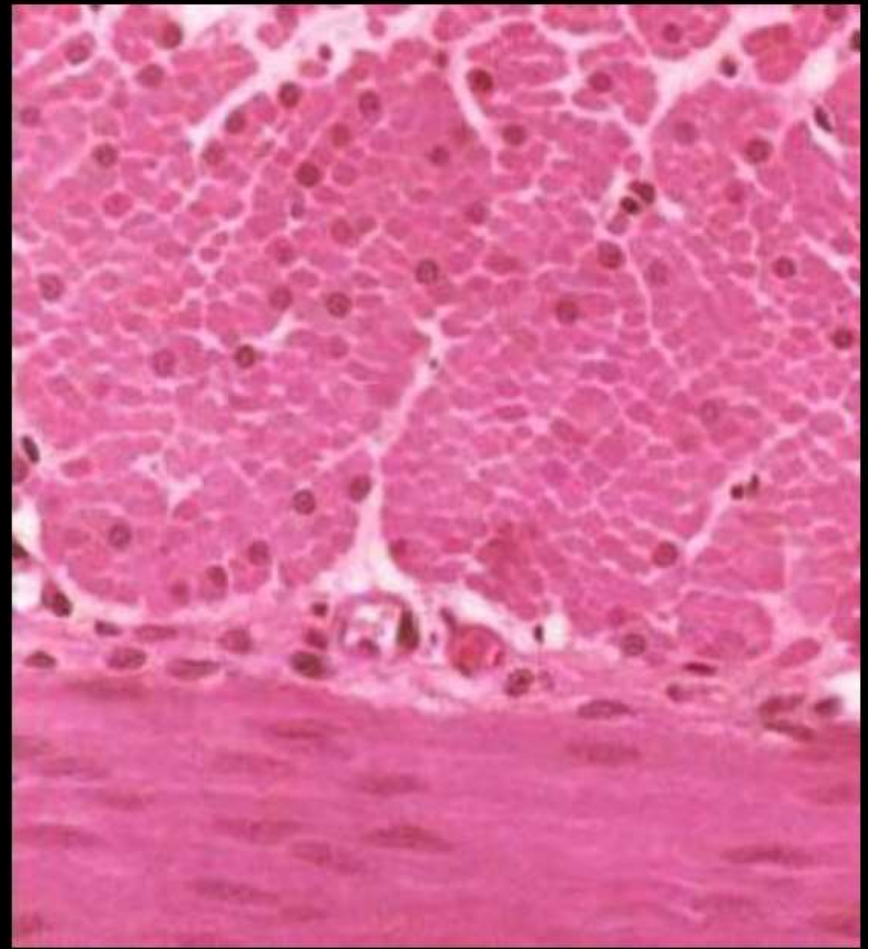
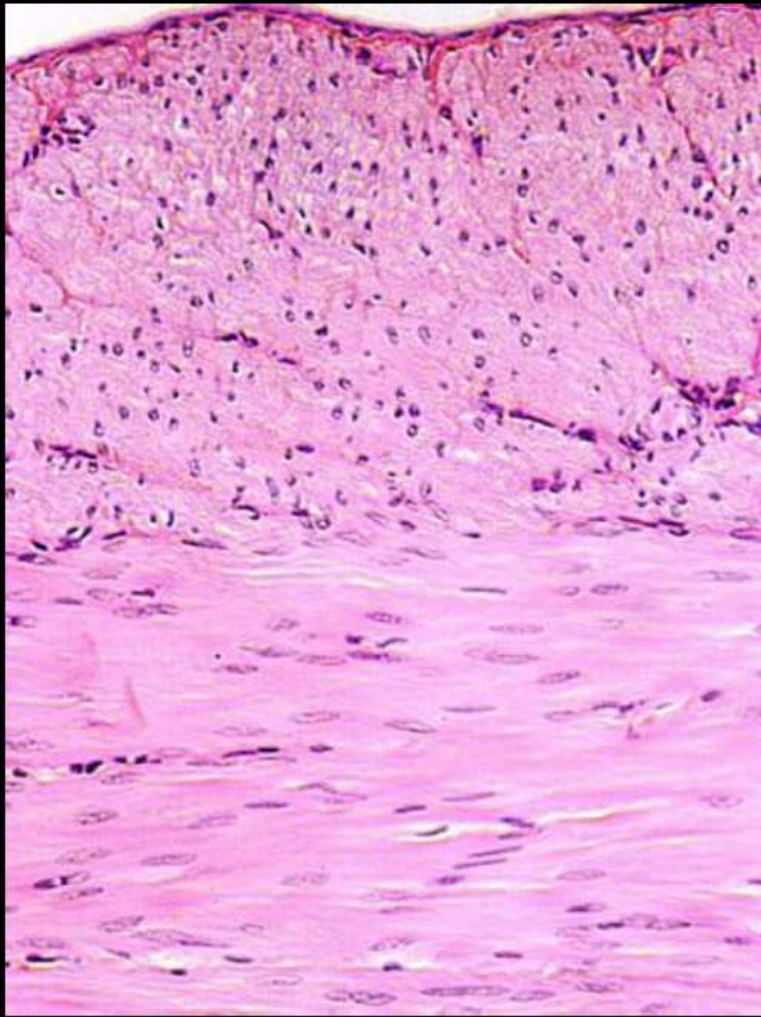
Smooth muscle – light microscopy

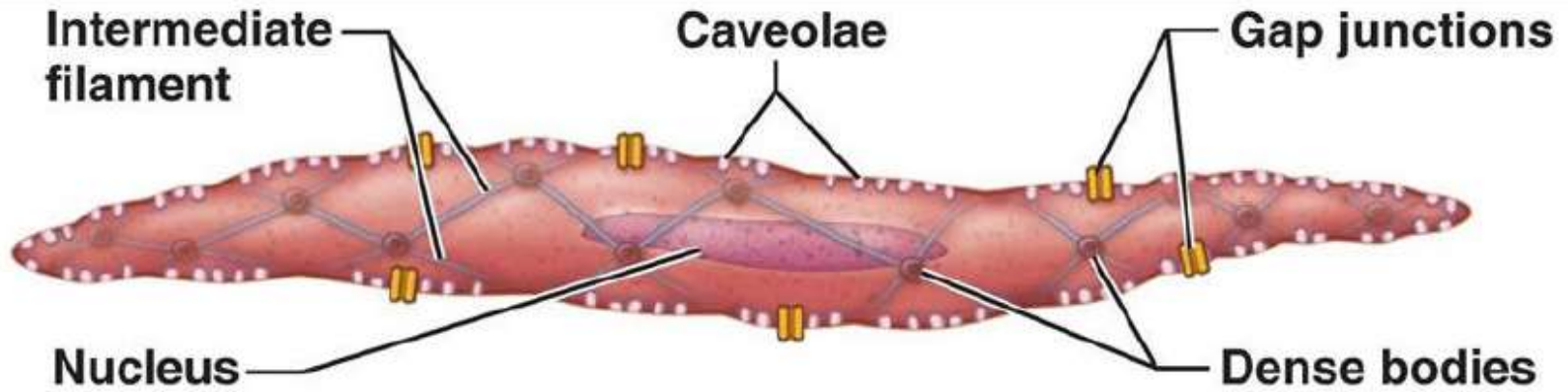




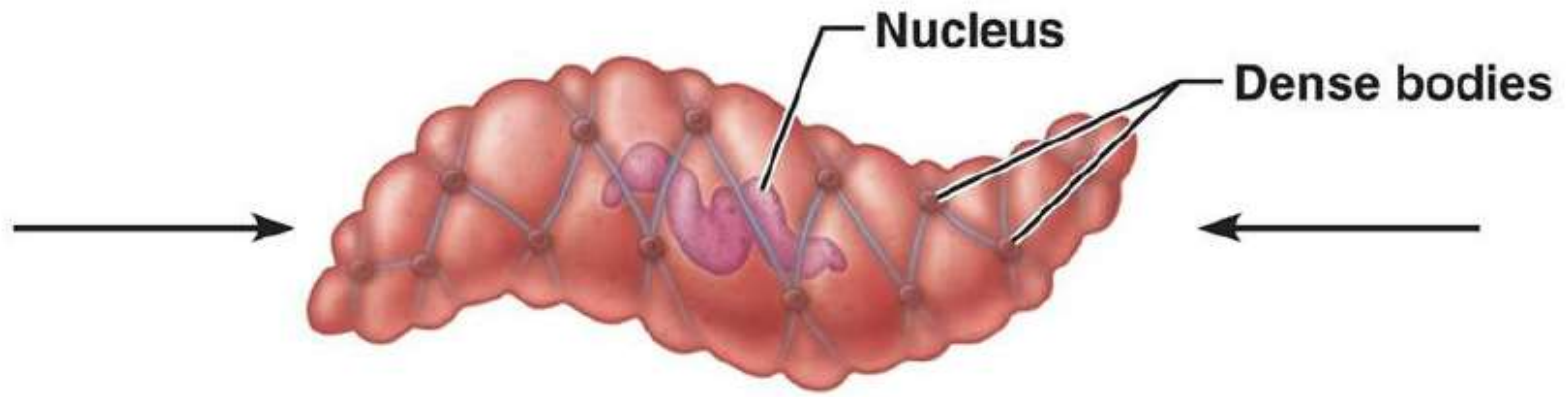






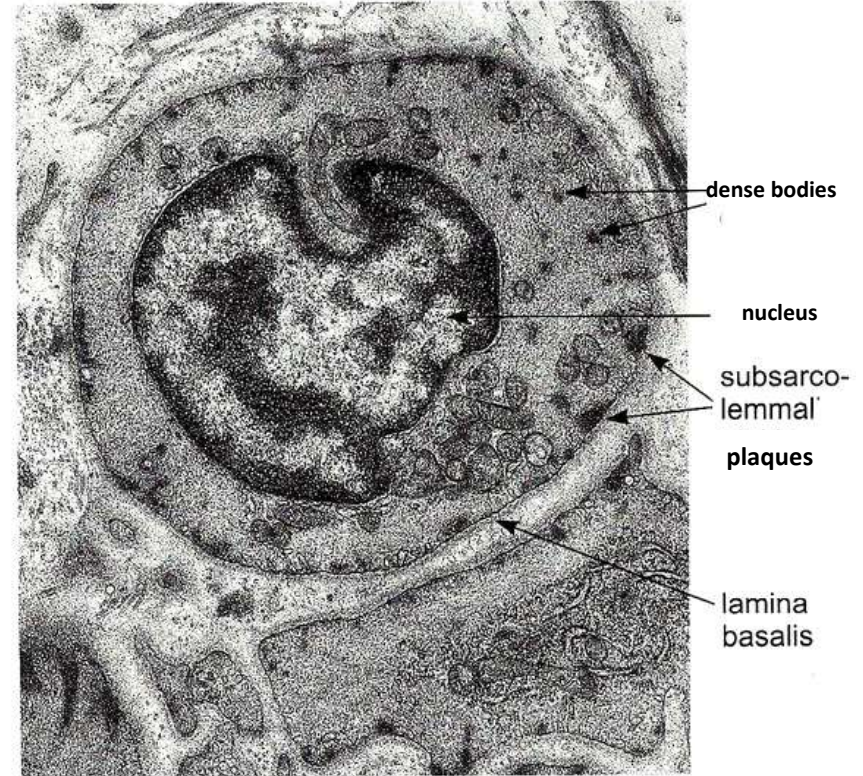
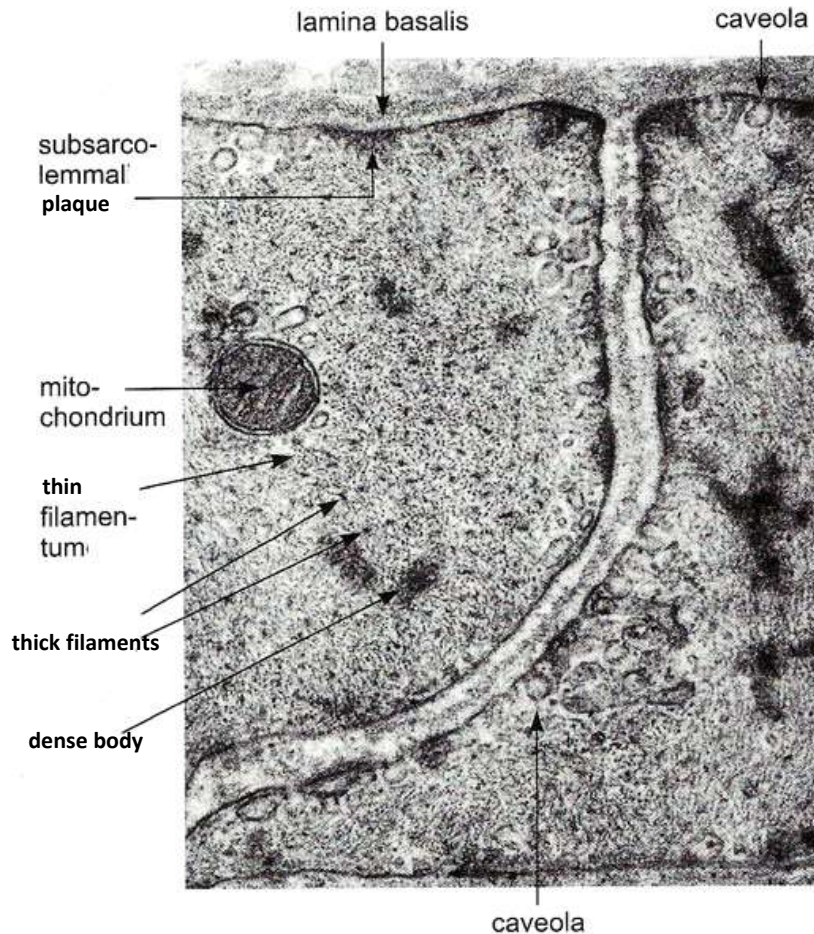


(a) Relaxed smooth muscle cell (note that gap junctions connect adjacent fibers)



(b) Contracted smooth muscle cell

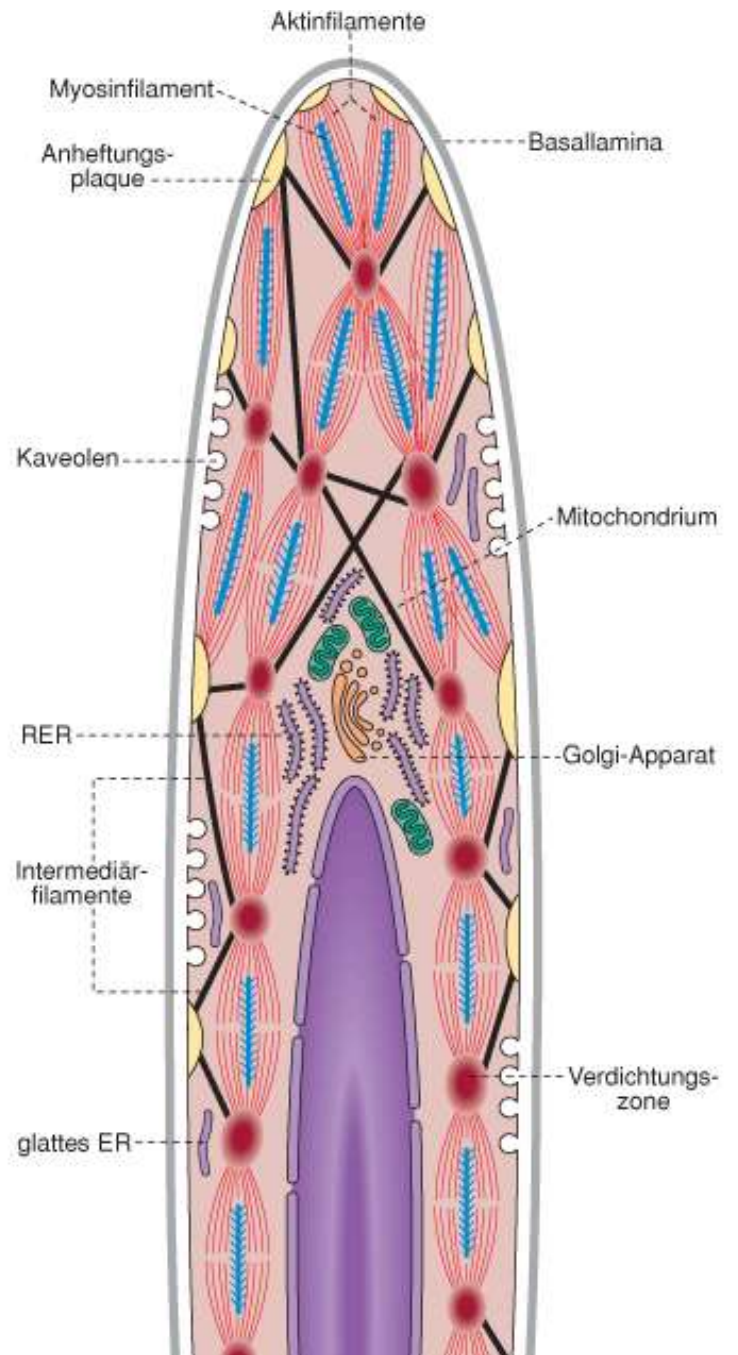
Smooth muscle by TEM



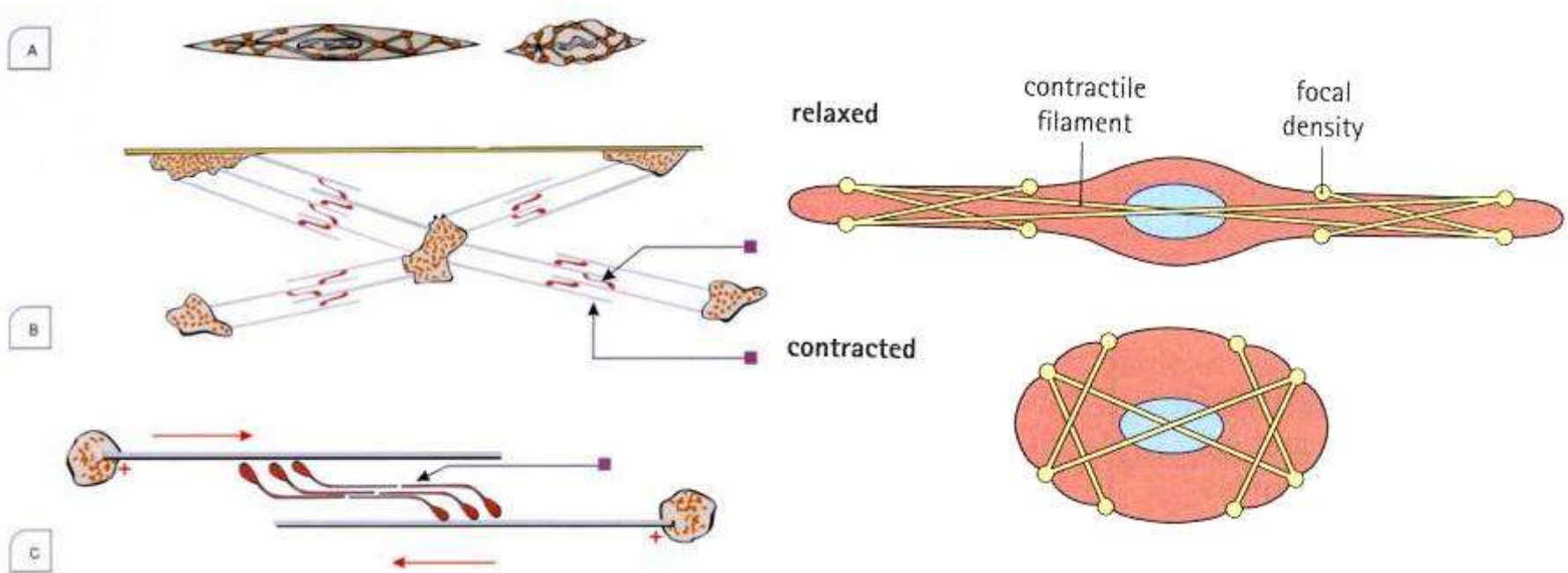
Dense bodies - actin filaments of contractile units are attached to *dense bodies*

Dense bands (or dense subsarcolemmal plaques) - are circumfering the smooth muscle cell in a rib-like pattern

areas alternate with regions of membrane containing numerous caveolae



Mechanism of contraction



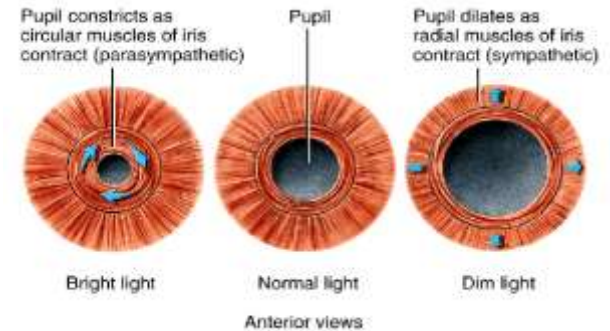
increase of Ca^{2+} concentration \rightarrow Ca^{2+} binds to calmodulin (instead of troponin) \rightarrow calmodulin activates myosin light chain kinase (MLCK) \rightarrow the enzyme phosphorylates myosin \rightarrow activated myosin binds to actin \rightarrow contraction

If myosin is dephosphorylated in the actin-bound state, it remains bound to the actin lasting contraction without additional energy input!

Types of smooth muscle

Multiunit:

- individual cells, each has its own innervation (no electric connection)
 - well regulated
 - contraction due to innervation
- example: m. sphincter pupillae, m. ciliaris



Single unit:

- electrical and mechanical connection (gap junction)
 - functional unit, functional syncytium
 - innervation has secondary importance (*except in yogis* 😊)
 - almost all smooth muscle
- example: wall of organs like intestine

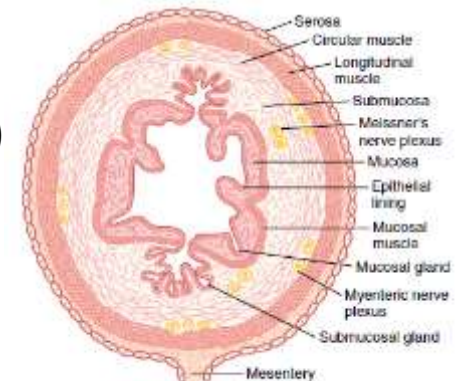
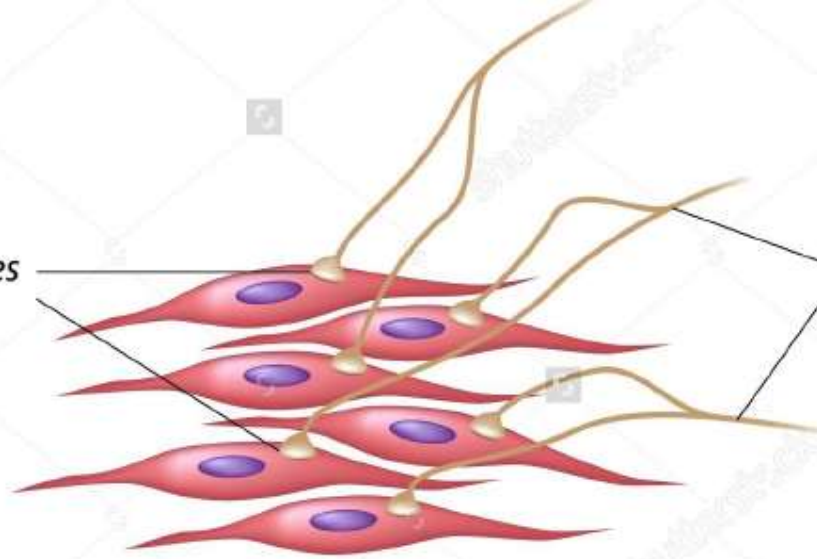


Figure 62-2 Typical cross section of the gut.

Synapses

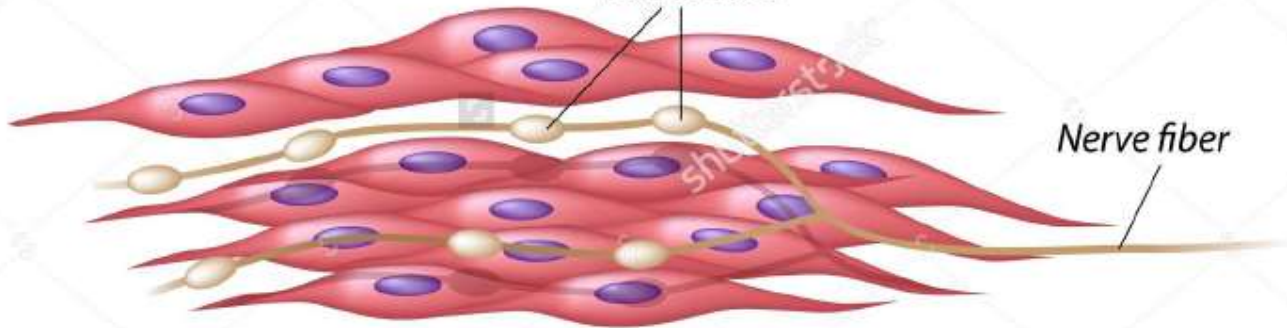
Nerve fibers



Multiunit Smooth Muscle

Varicosities

Nerve fiber



Single-unit Smooth Muscle

Striated muscle

Multi-nucleated giant cells, forming by fusion of myoblasts (syncytium) – **muscle fiber**

Membrana basalis

Stem cells – **Satellite cells**

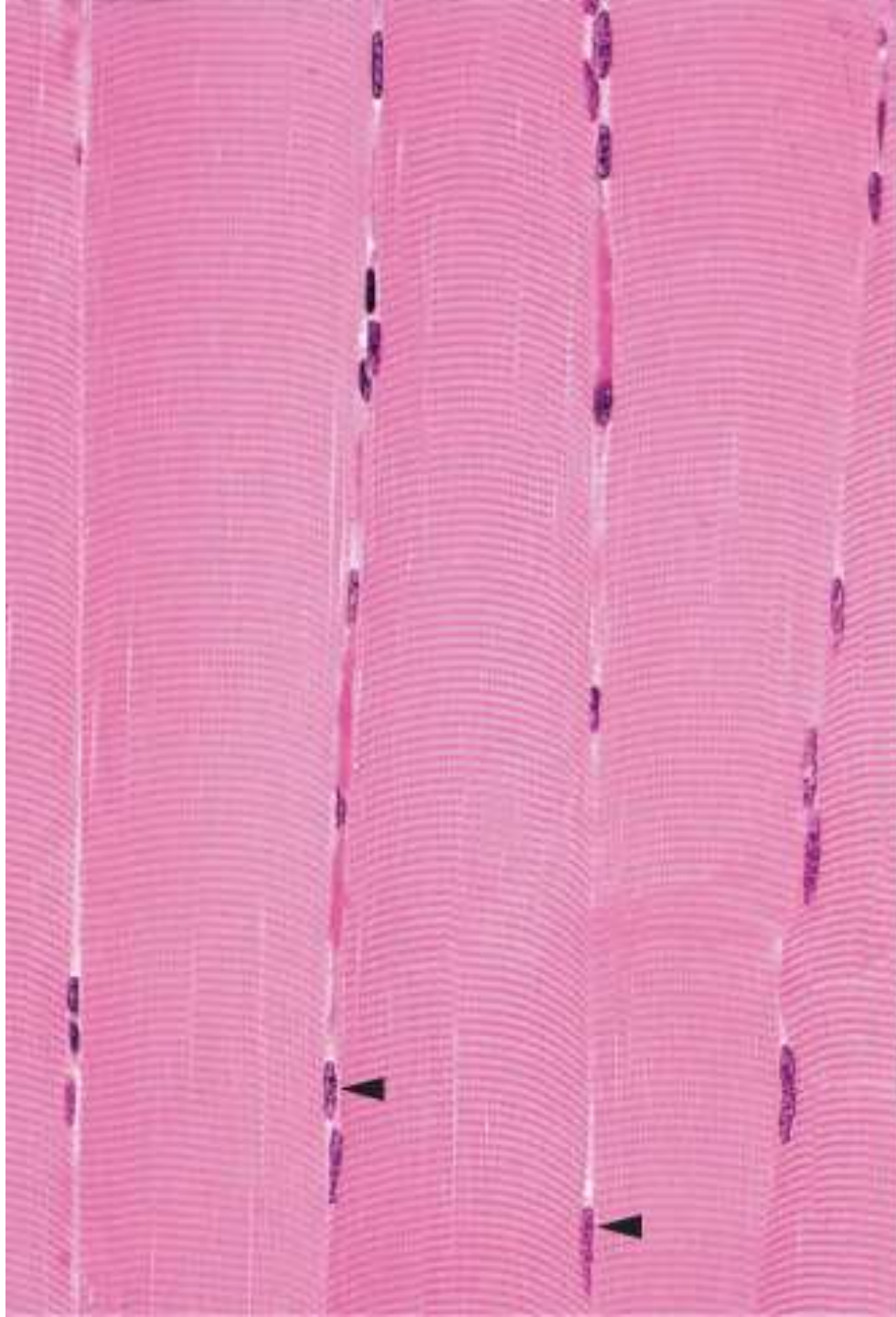
Plasmamembrane - **Sarcolemma**

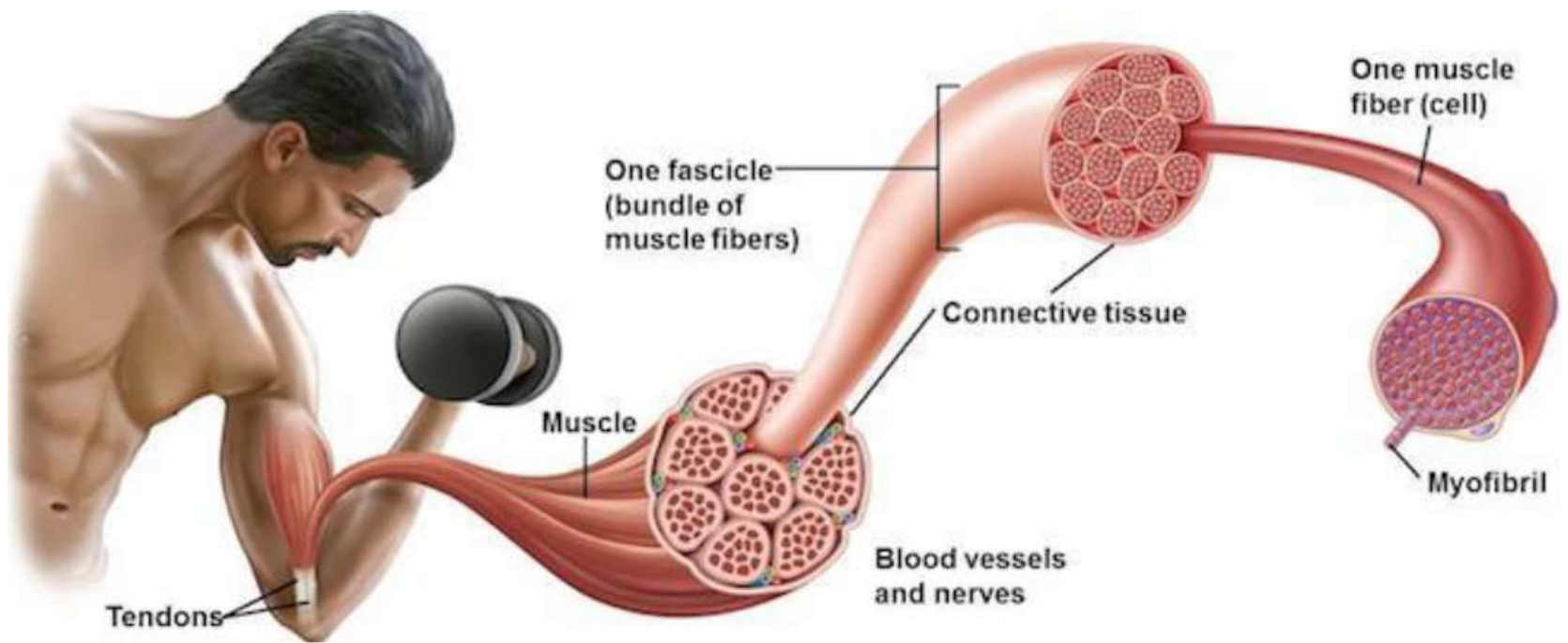
Cytoplasme - **Sarcoplasme**

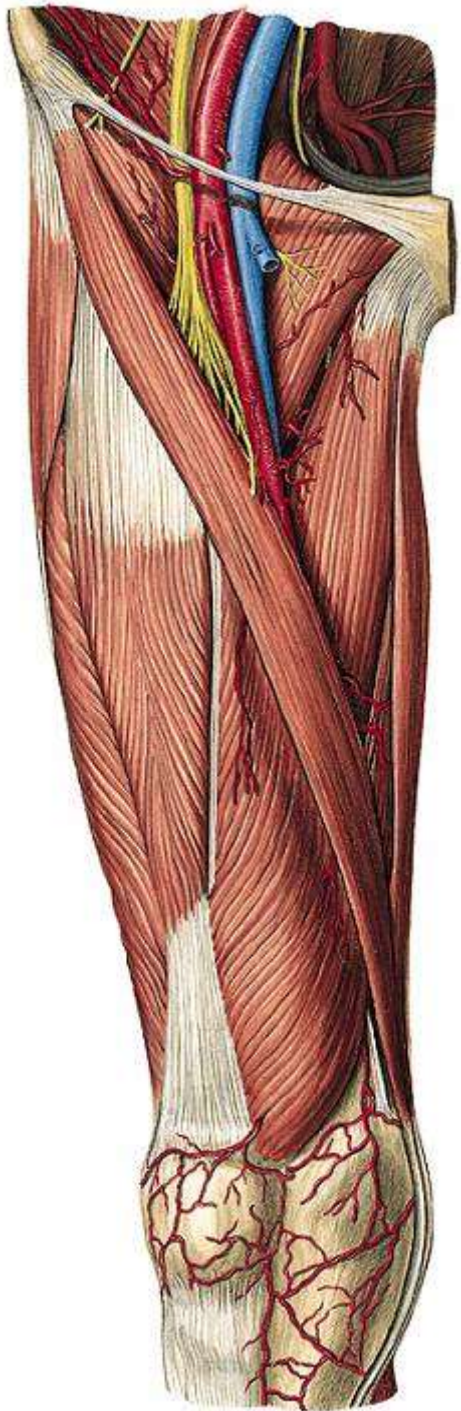
Smooth ER – **Sarcoplasmic reticulum**

Mitochondria - **Sarcosome**

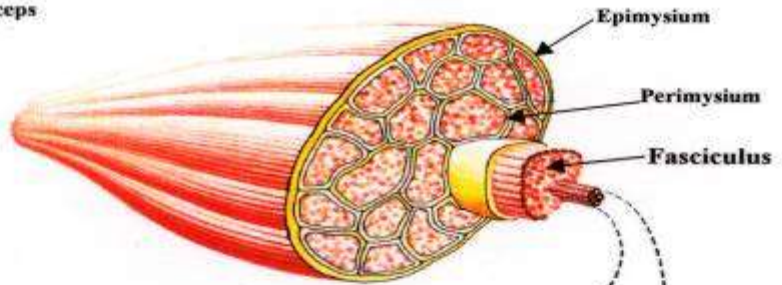
Contractile unit- **Sarcomer**







Muscle (M. biceps brachii)

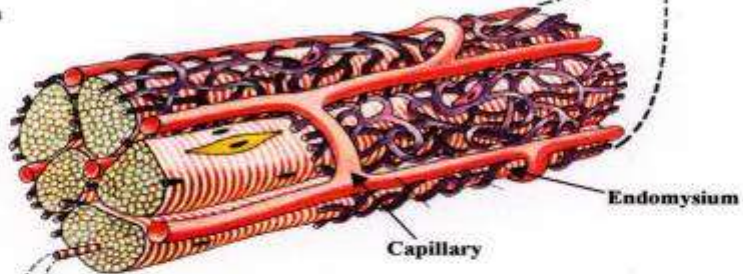


Epimysium

Perimysium

Fasciculus

Muscle fibers



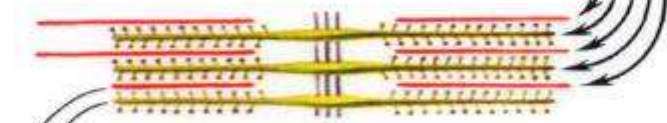
Endomysium

Capillary

Myofibrils

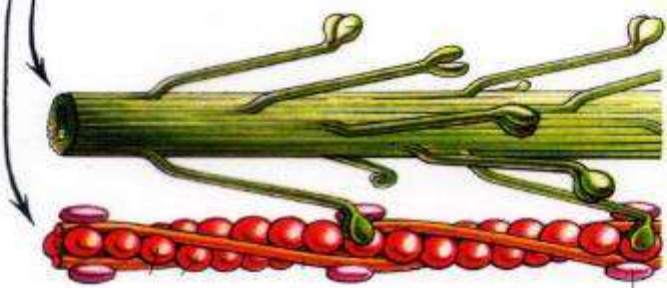


Myofilaments

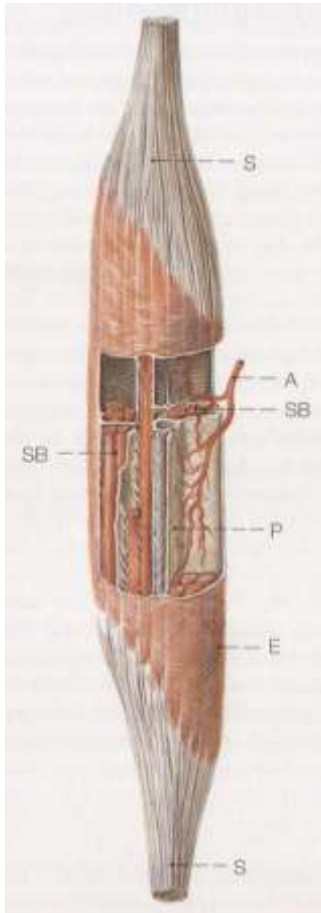


Myosin

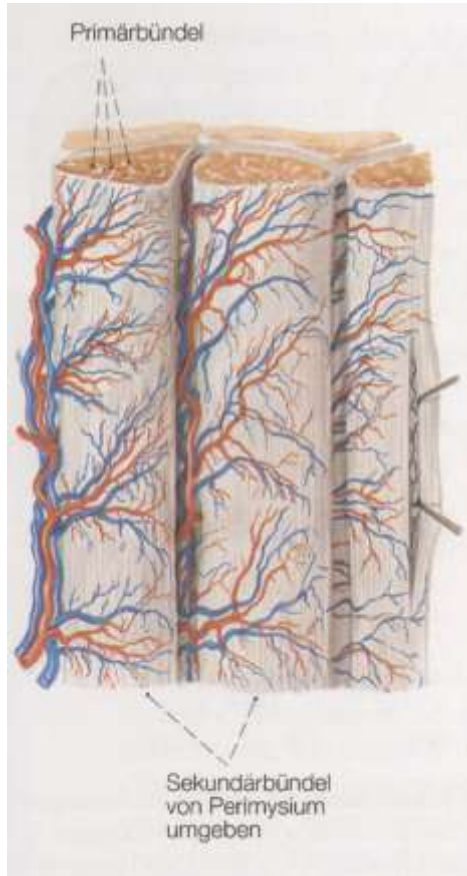
Actin



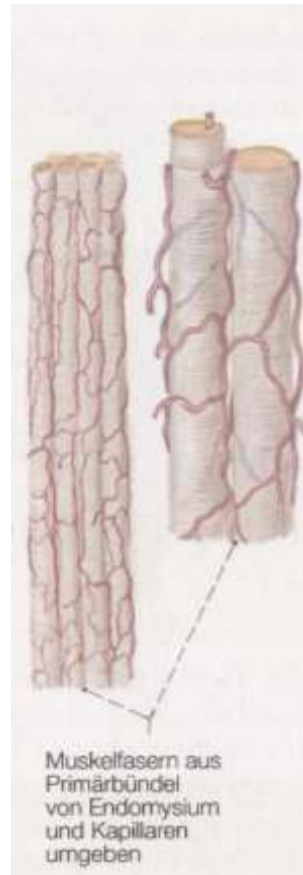
Connective tissue surrounding skeletal muscle



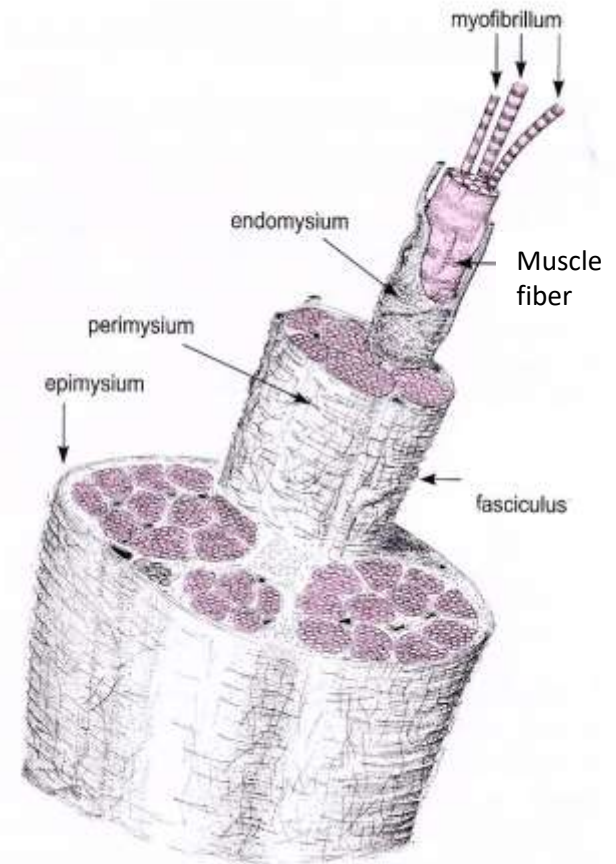
Epimysium
Dense CT

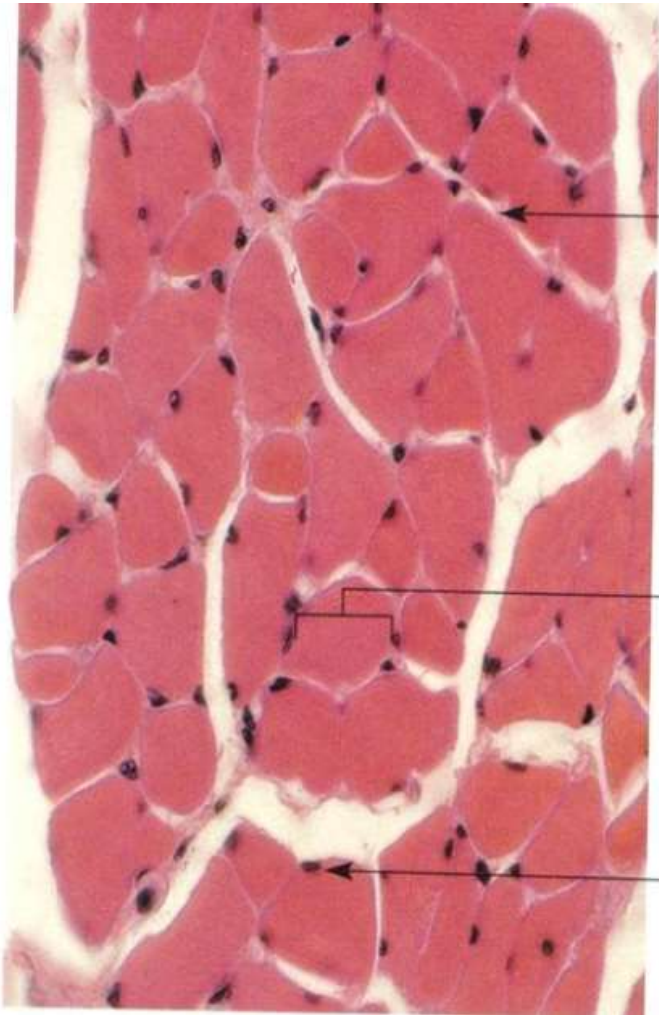


Perimysium
derives from
epimysium



Endomysium
Reticular fibers
and ECM



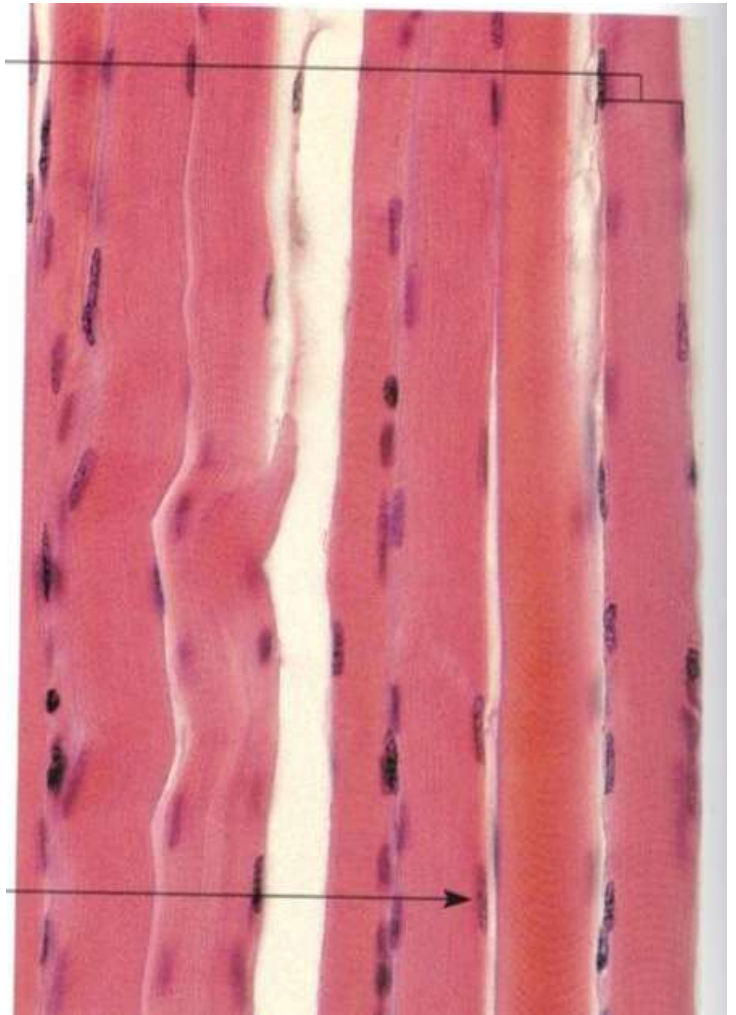


Muscle fiber

endomysium

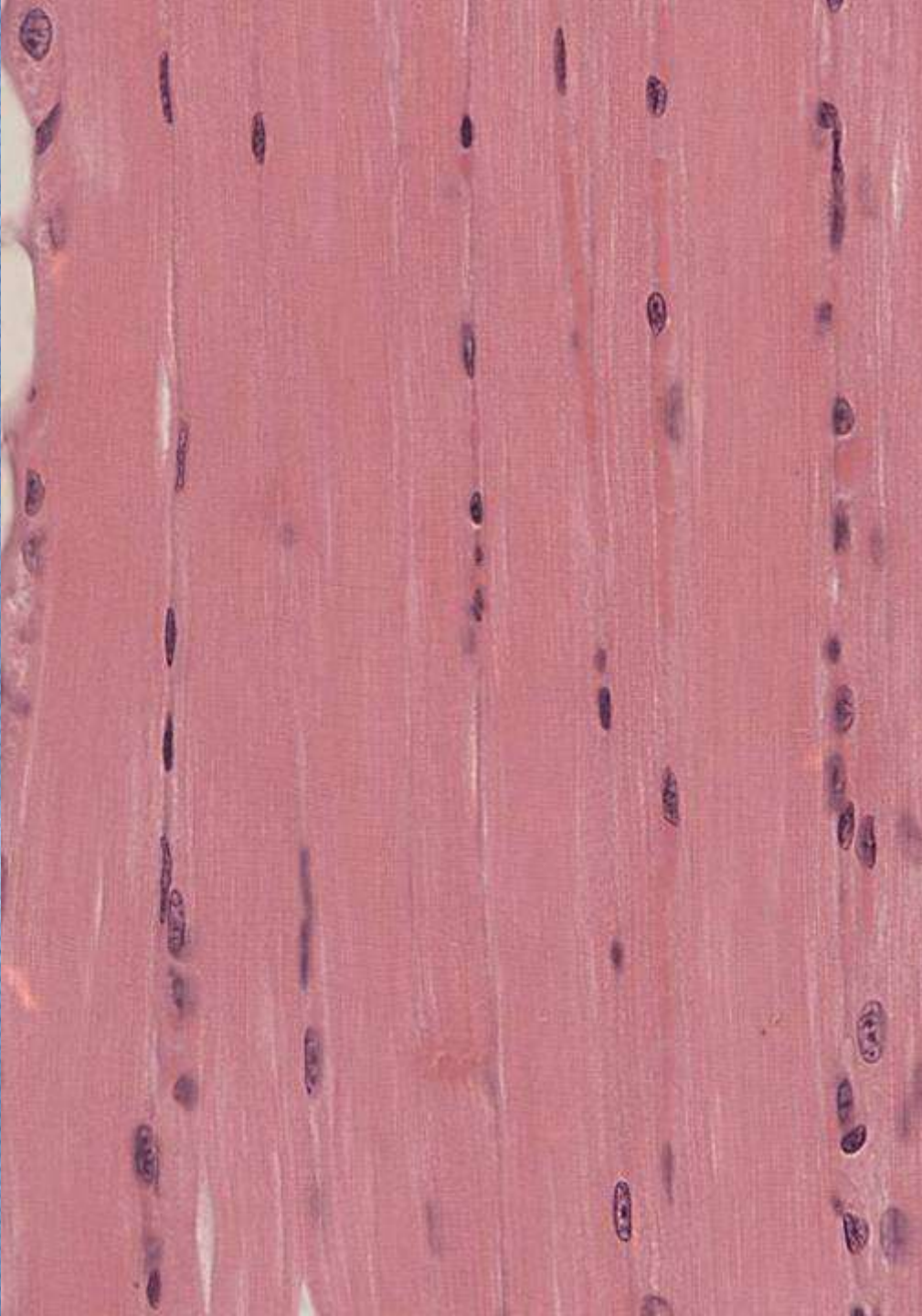
Muscle fiber

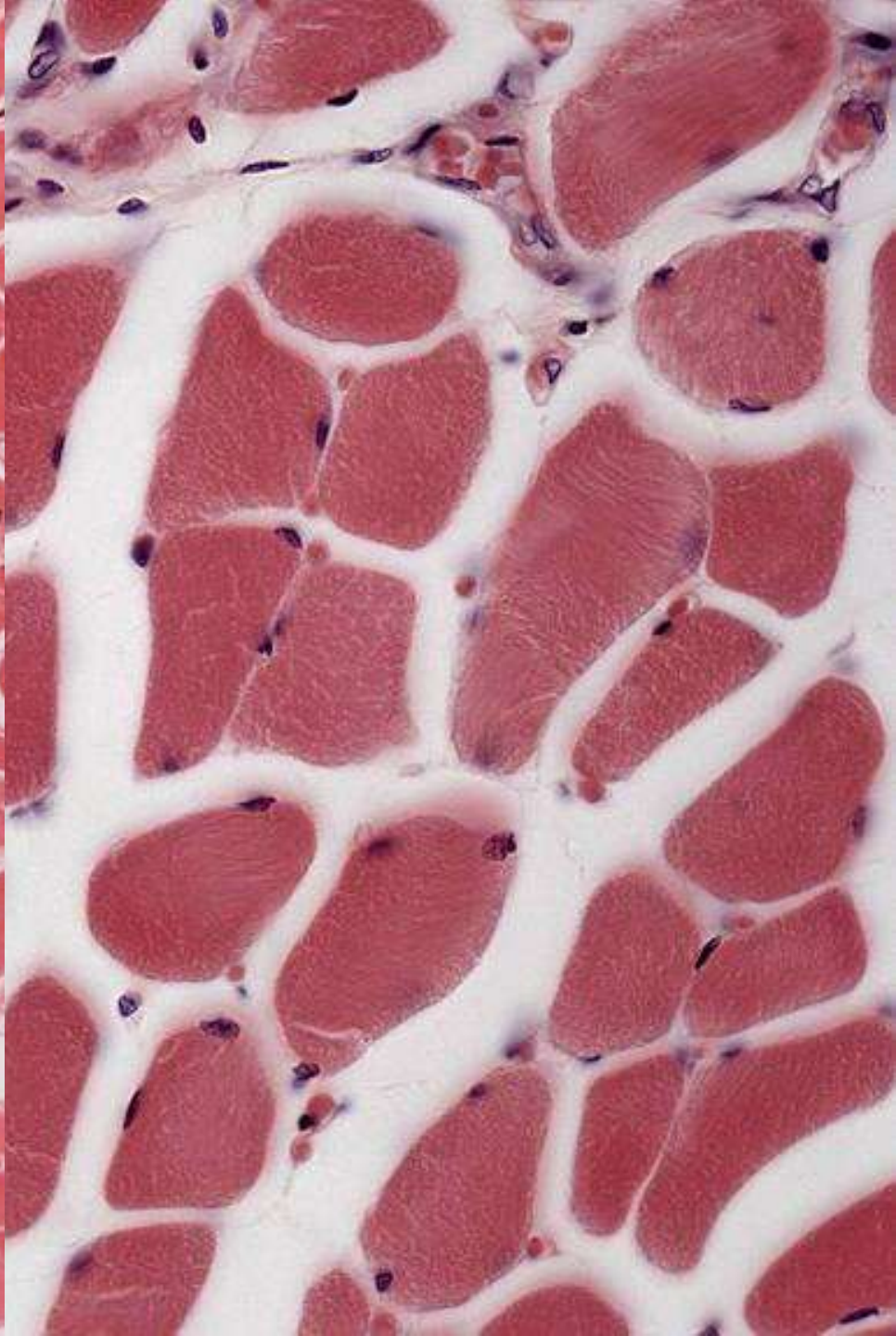
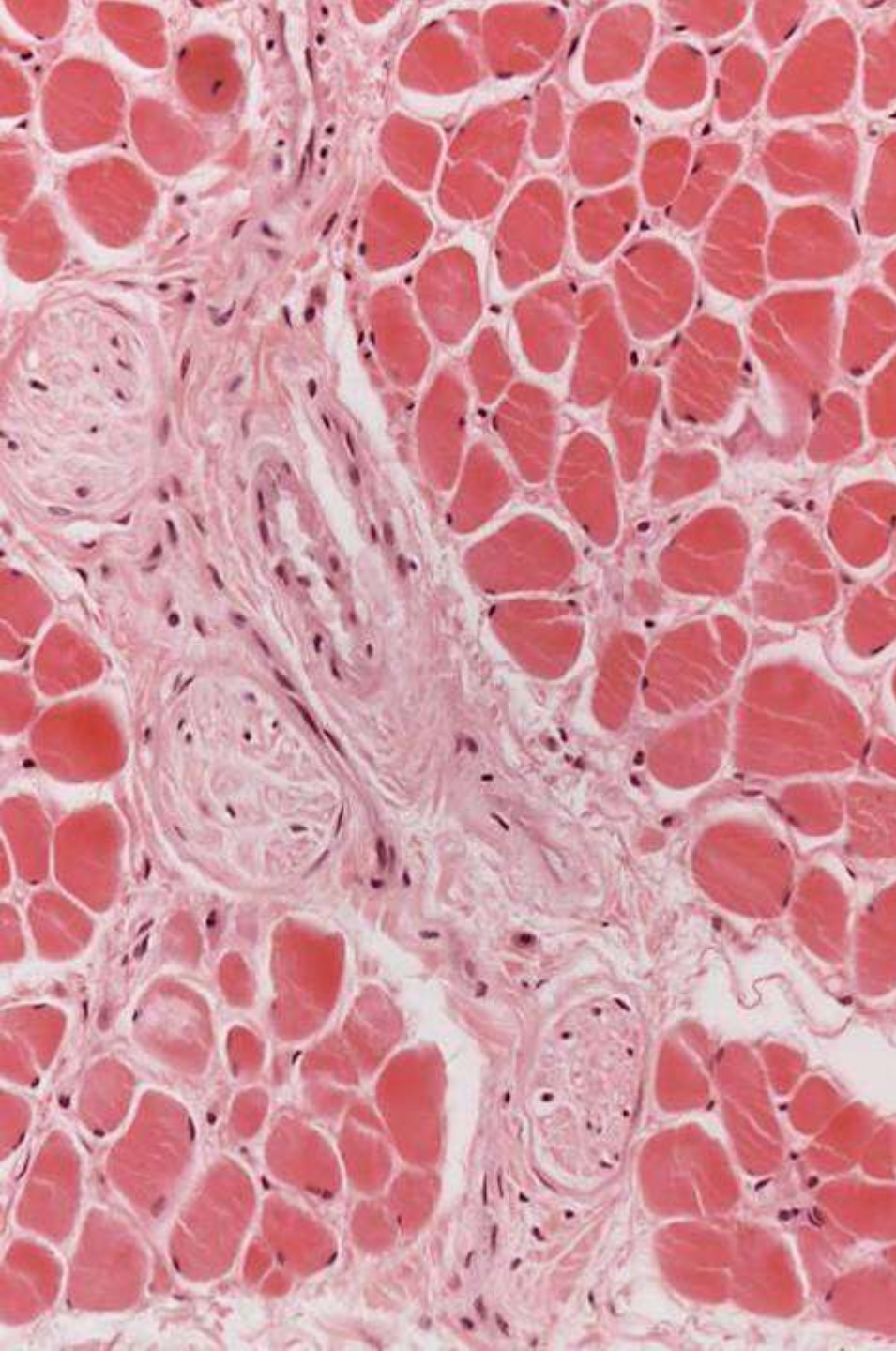
Cell nucleus



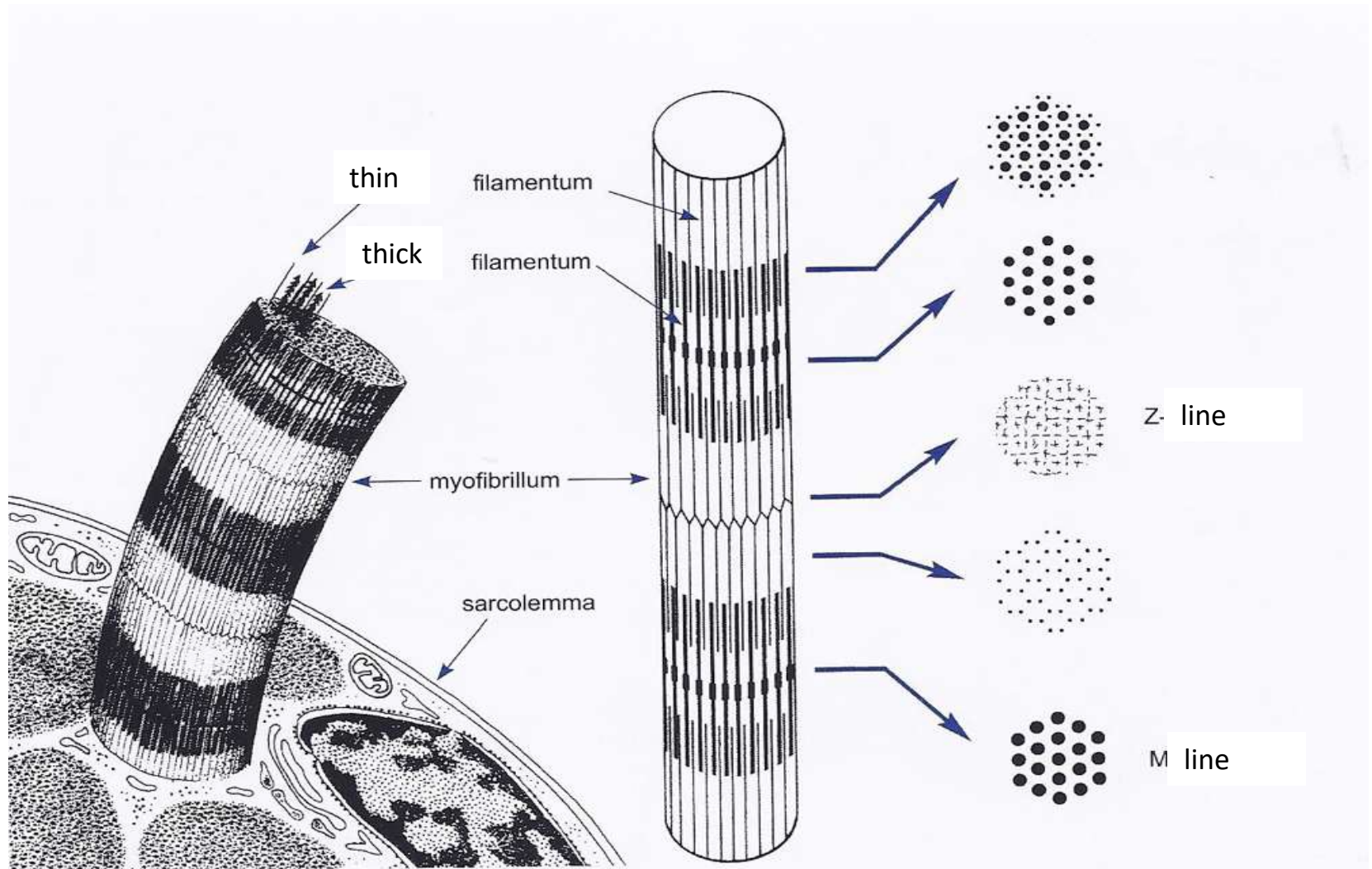
Muscle fiber

Cell nucleus



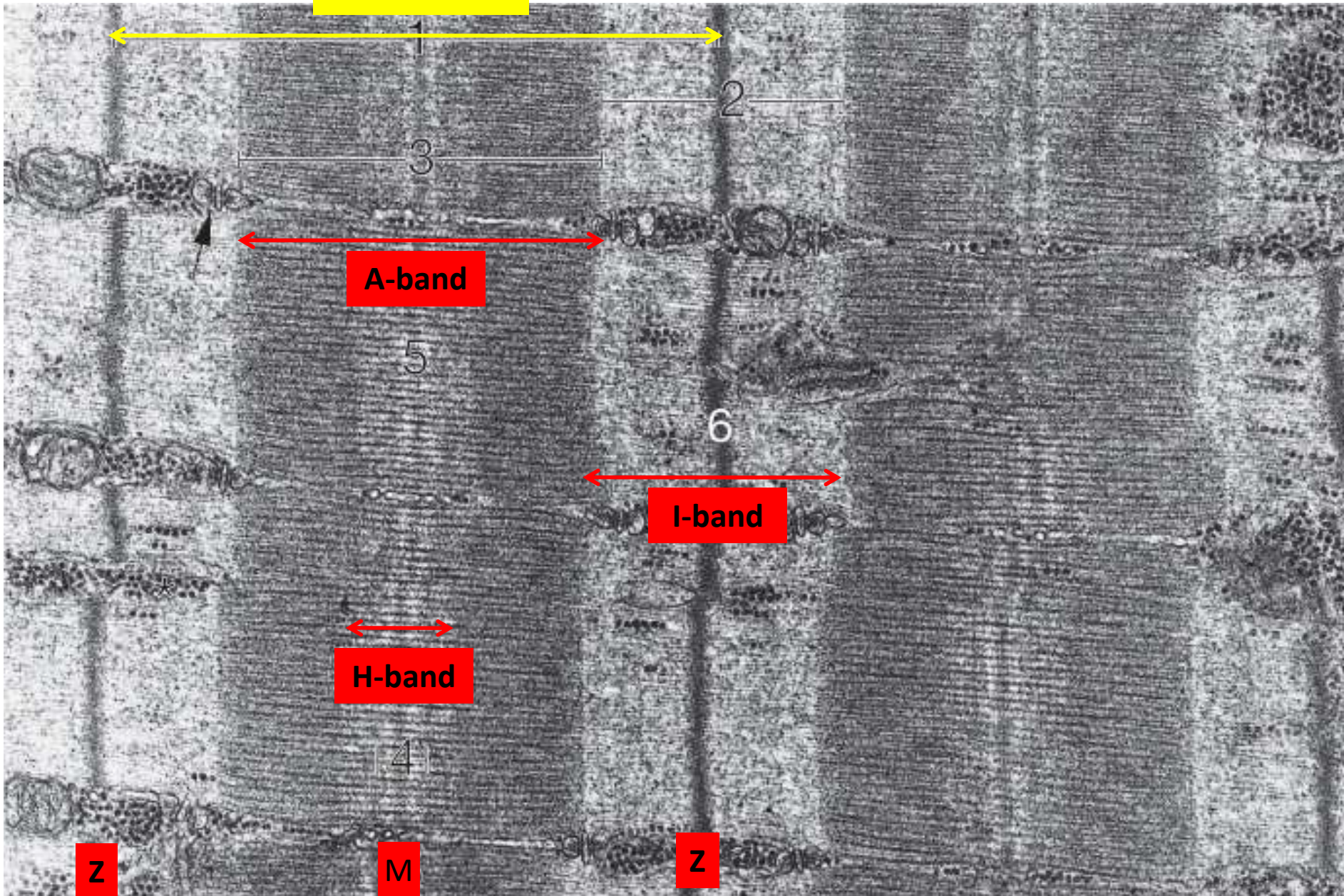


Structure of myofibrillum



A

SARCOMER



Sarcomer: (2-3 μm) between Z lines

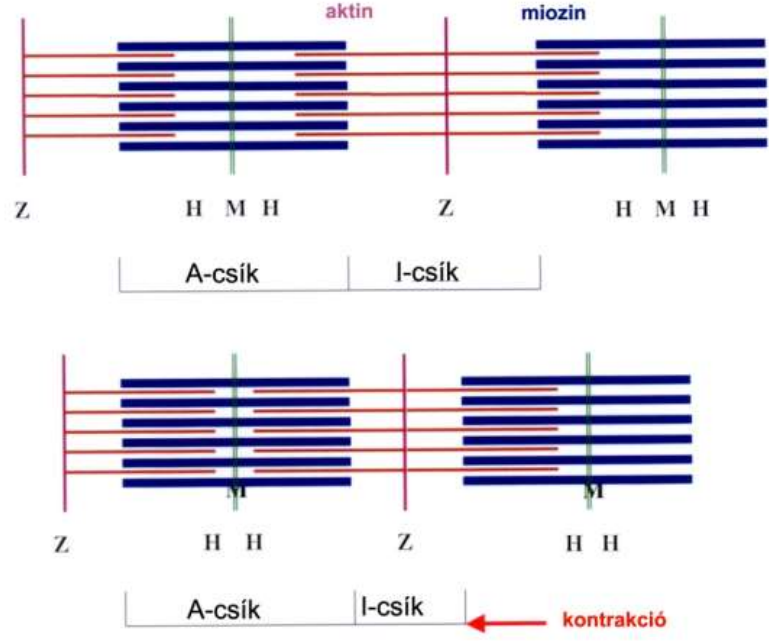
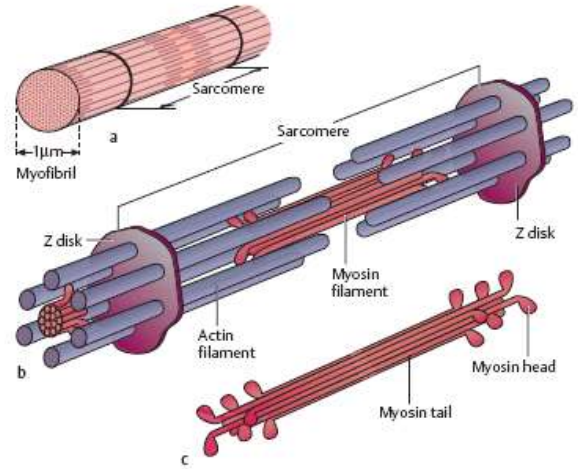
A-band: anisotrop, double refractive, thick, dense
 (1,5 μm long, 15 nm thick)
 mainly myosin + overlapping actin filaments
 its length remains unchanged during contraction

I-band: isotrop, simple refractive, thinner, lighter
 (1 μm long, 7 nm thick)
 mainly actin
 shortens during contraction

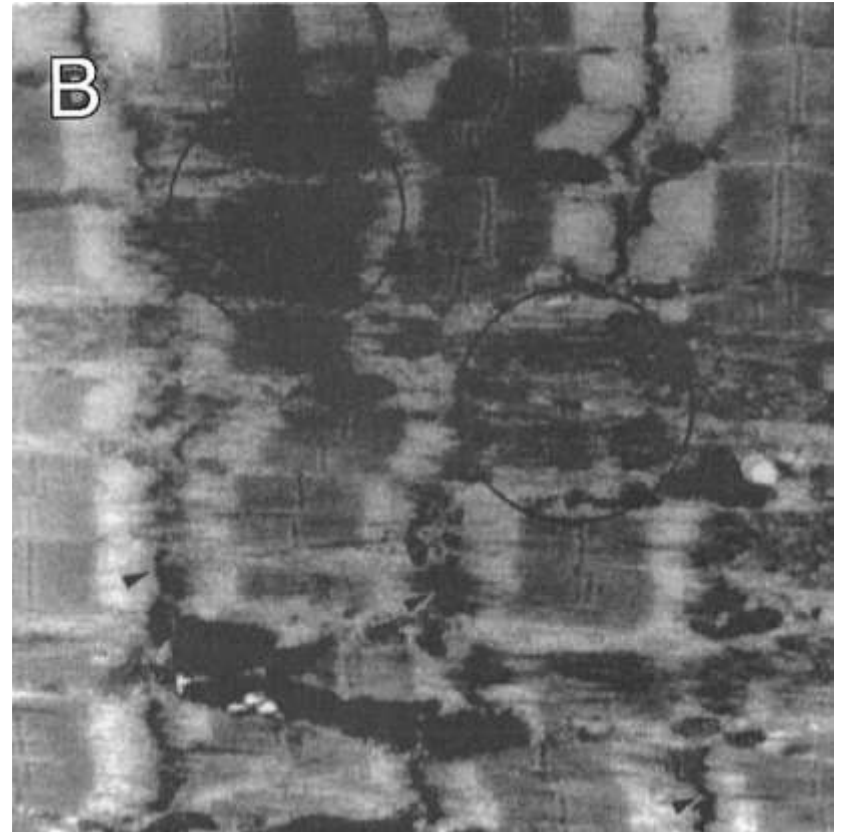
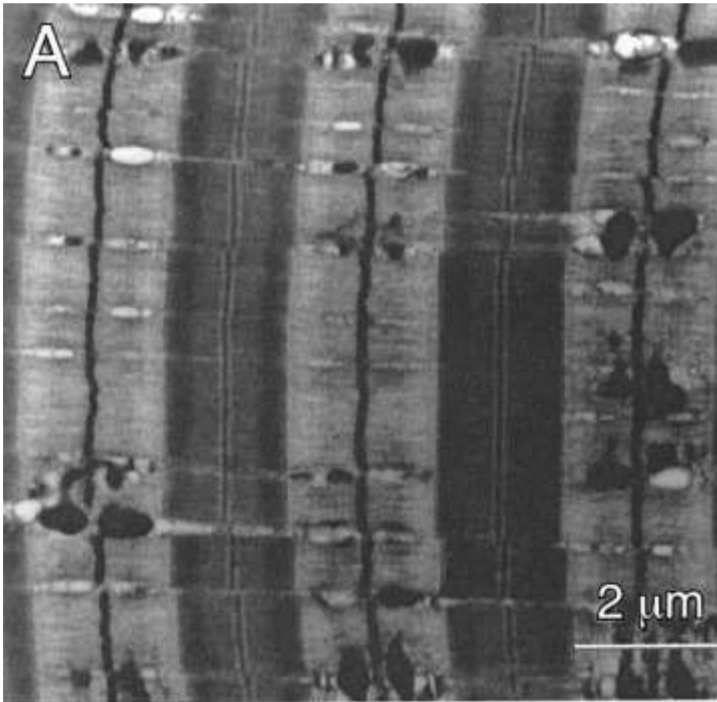
Z-line: (Zwischenstreifen, intermediate tapes)
 border of sarcomer
 α -Actinin, Desmin molecules

H-band: (Hensen-Streifen)
 lighter area in A-band
 only Myosin

M-line: (Mittenmembran) middle membrane
 in the middle of A-band
 attachment of myosin bundles

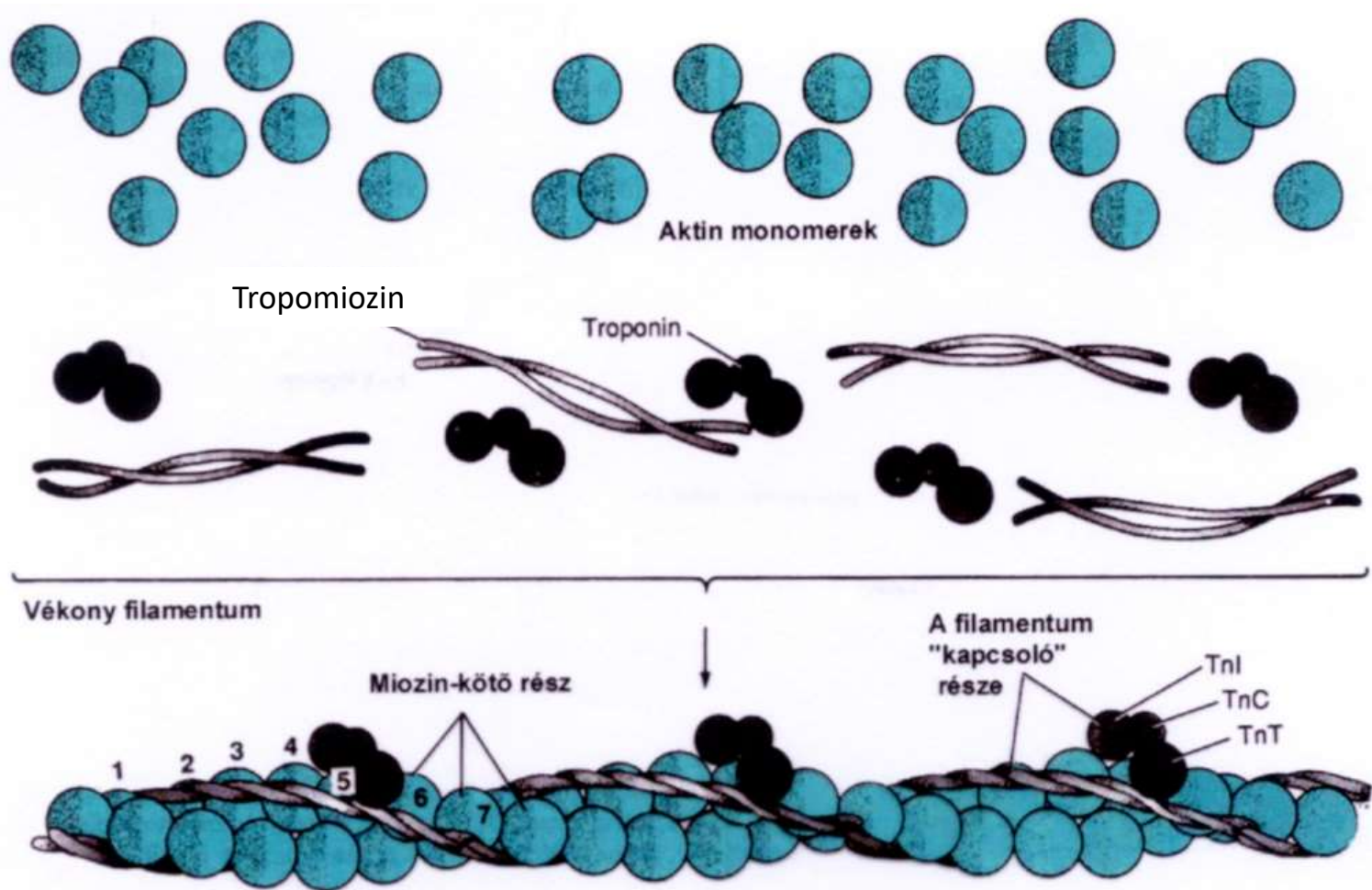


Muscle fever



- **micro tears**
- **Inflammation – leukocytes, monocytes**
- **cytokins – directly activate**
- **nociceptive receptors**

Miofilament: Actin

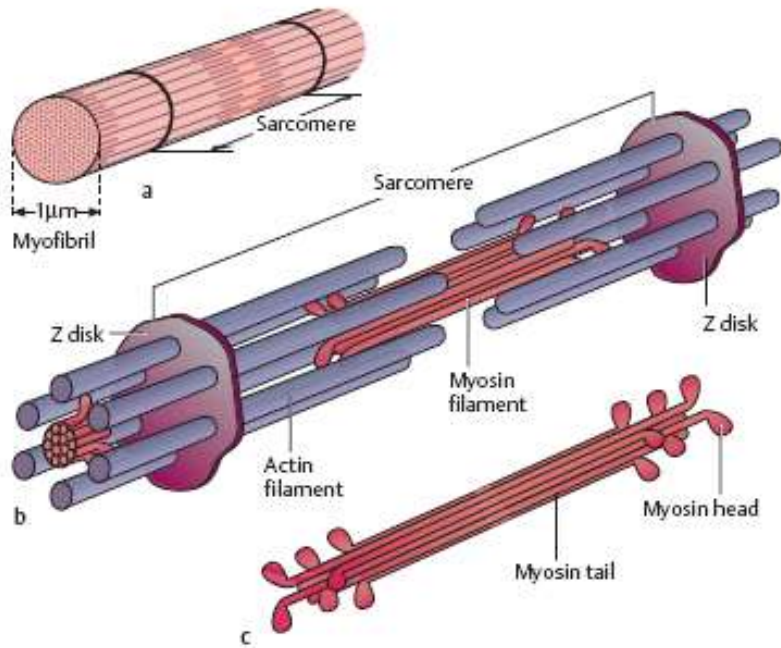


Troponin, Tropomyosin, Nebulin: needed for structural identity

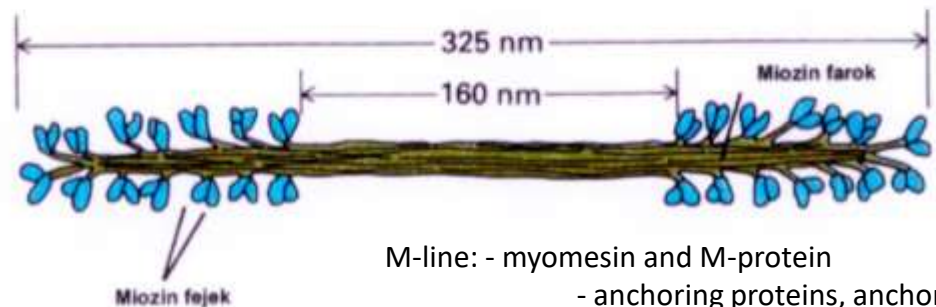
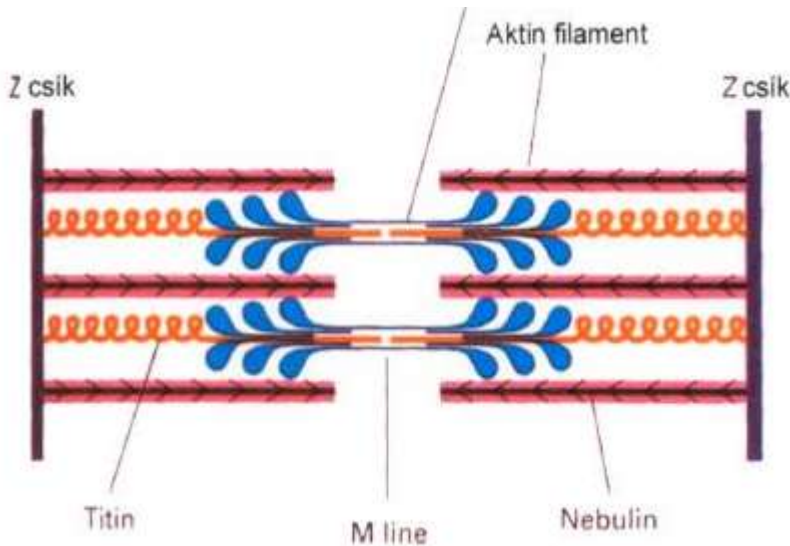
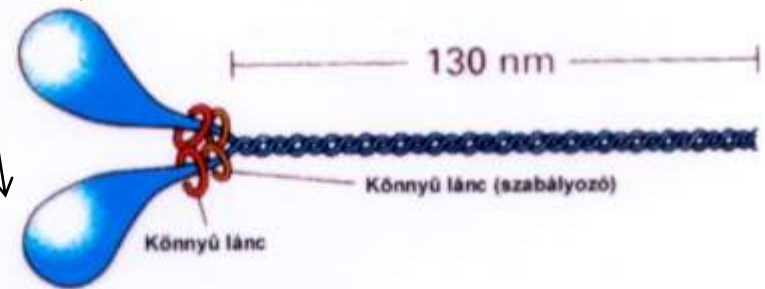
Miofilament: type II. myosin

Thick filament:

- main components are bands of myosin filaments
- ATP dependent motor protein
 - myosin molecule is composed of 4 chains
 - 2 heavy chains forming a curled tail and a globular head
 - 2 light chain – neck region compose angle between the neck and head
 - neck region is mobile



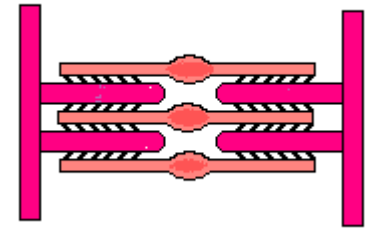
nehéz lánc



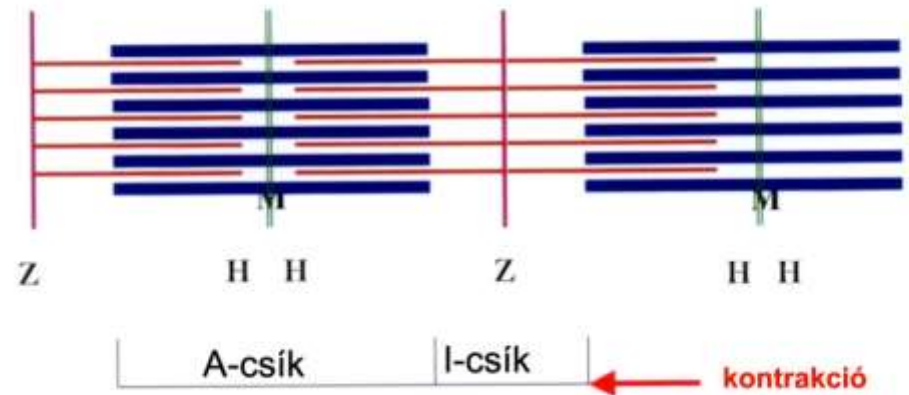
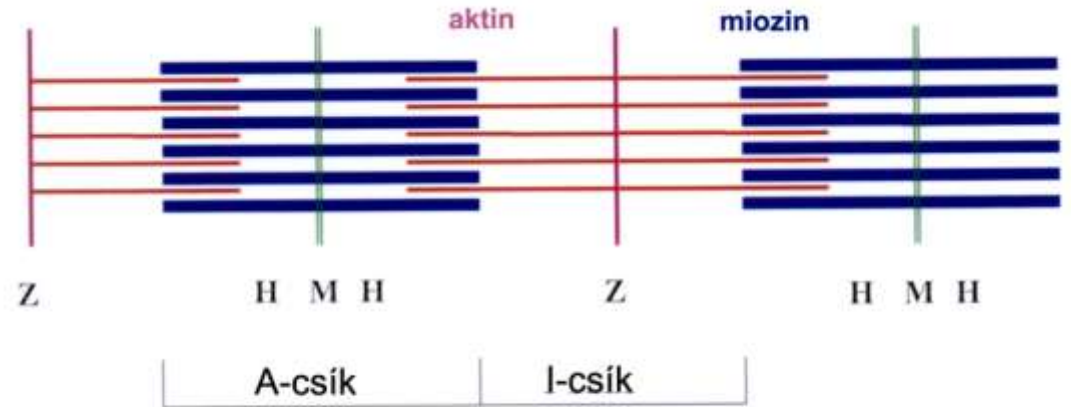
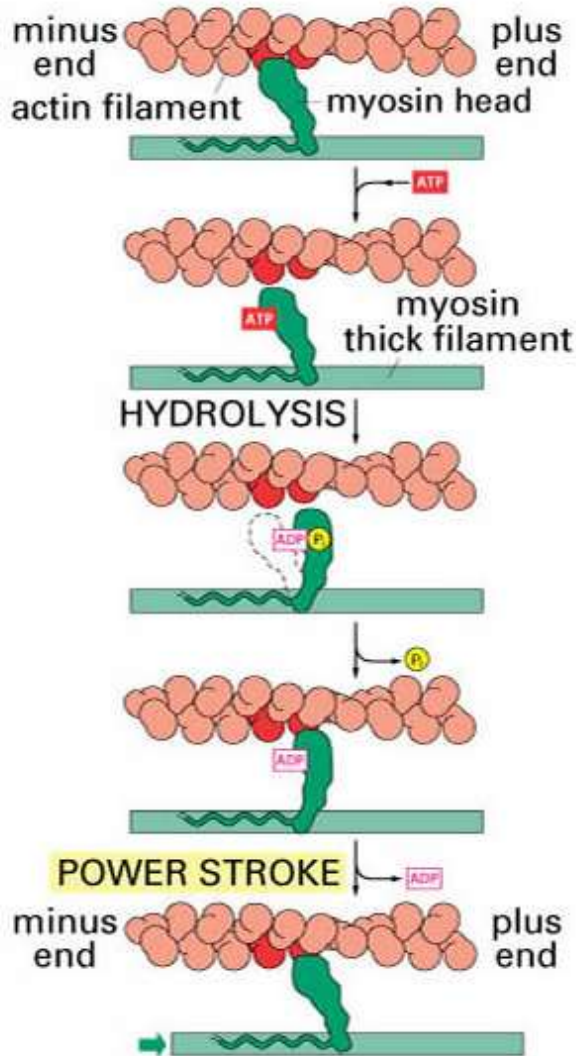
M-line: - myomesin and M-protein
- anchoring proteins, anchors to titin

Mechanism of contraction

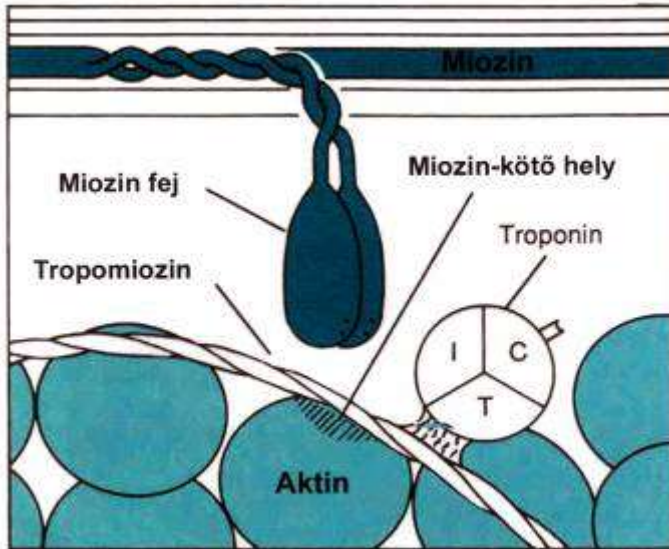
Sliding filament theory



Chemical energy transforms into mechanical energy during ATP hydrolysis



Regulation of contraction



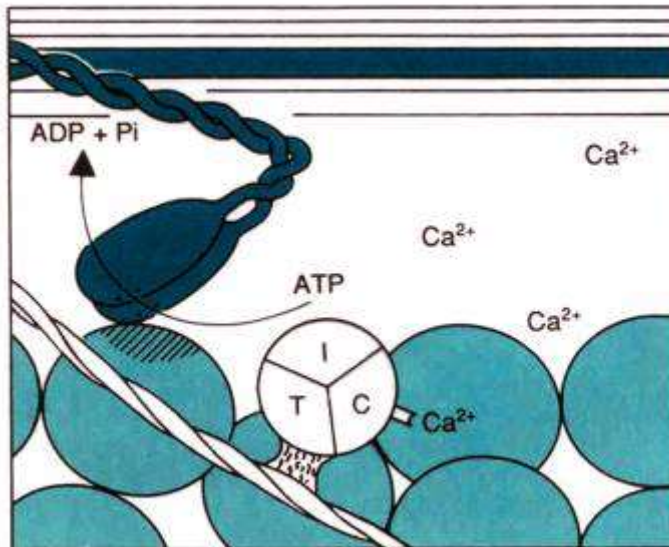
Tropomyosin – blocks myosin binding sites

Troponin – 3 subunit

Troponin T – binds to Tropomyosin

Troponin I – inhibitory

Troponin C – can bind Ca^{2+}



Ca^{2+} binds to troponin → conformation changes
→ tropomyosin moves out from actin myosin-binding sites → myosin can bind to az actin

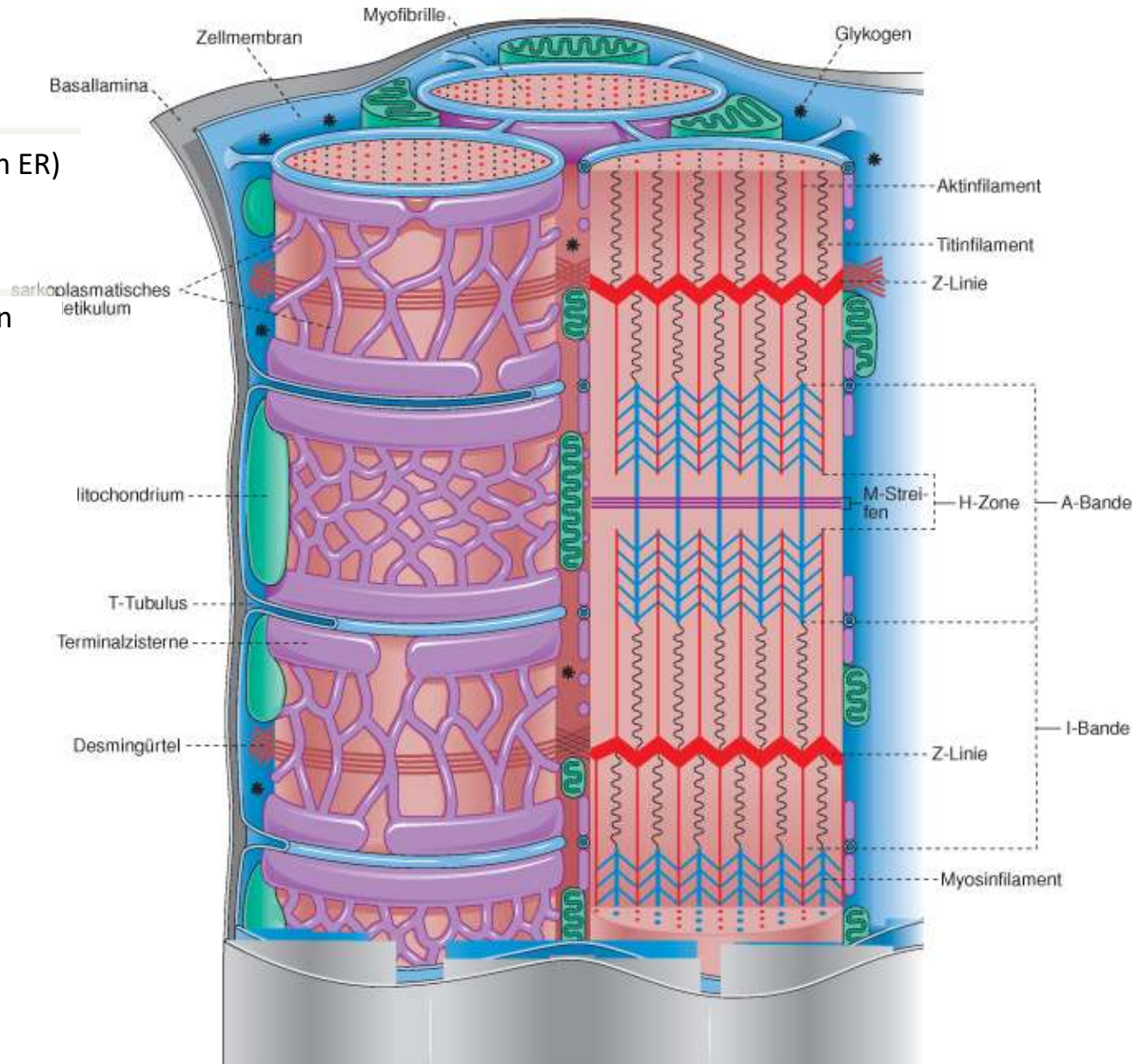
Transversal (T)-Tubule, Triad

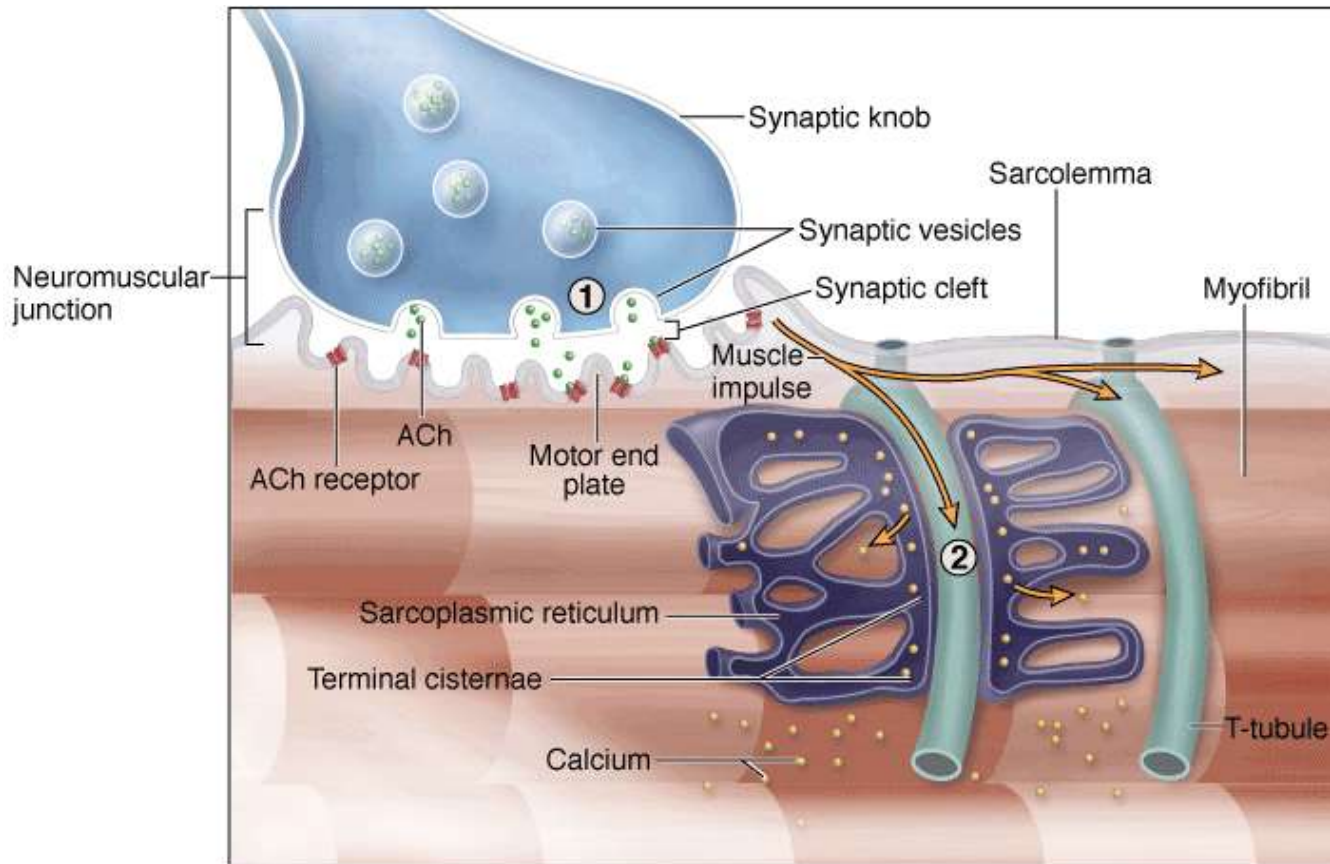
excitation-contraction connection

- sarcoplasmic reticulum (smooth ER)
- store Ca^{++} and pump them

Releases Ca^{++} during contraction and absorb it during relaxation

T-tubule
-deep invagination of plasmamembrane of the muscle fiber





- ① A nerve impulse triggers release of ACh from the synaptic knob into the synaptic cleft. ACh binds to ACh receptors in the motor end plate of the neuromuscular junction, initiating a muscle impulse in the sarcolemma of the muscle fiber.
- ② As the muscle impulse spreads quickly from the sarcolemma along T-tubules, calcium ions are released from terminal cisternae into the sarcoplasm.

Muscle Contraction Process Molecular Mechanism

<https://www.youtube.com/watch?v=S5uFaqpEPMI>

Desmin, Distrofin

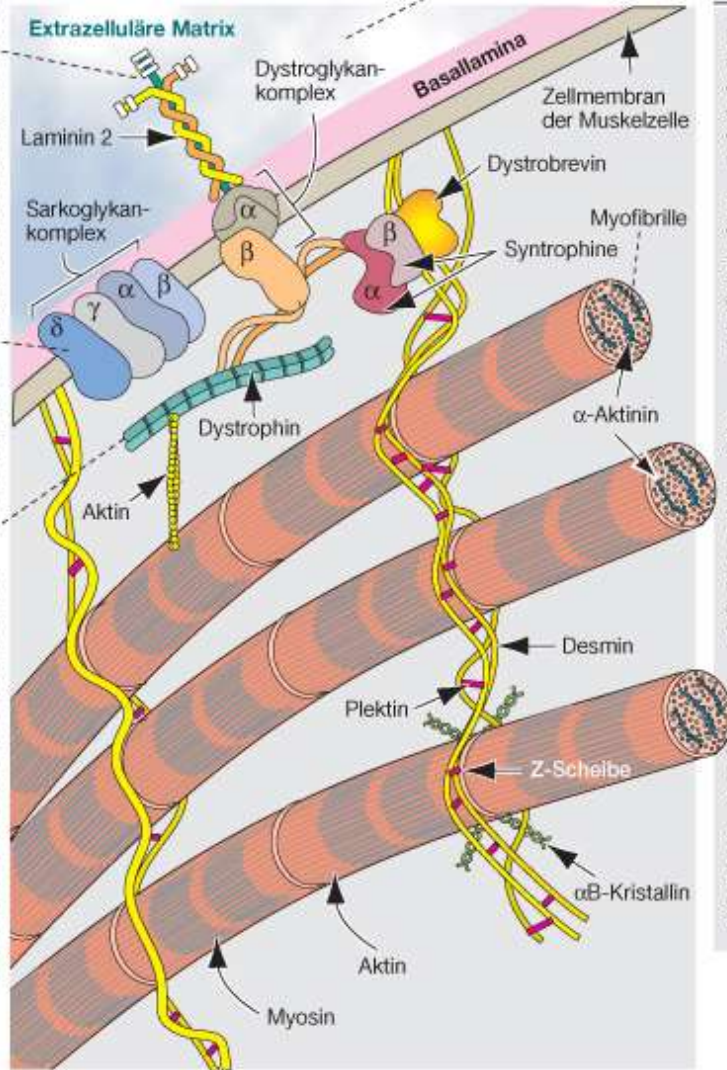
Der Dystroglykankomplex verbindet Dystrophin mit Laminin 2. Dystroglykan- α bindet an Laminin 2 und Dystroglykan- β bindet an Dystrophin. Bisher sind beim Menschen keine primären Defekte im Bereich der Dystroglykane bekannt.

Eine Mutation des Laminins 2 verursacht angeborene Muskeldystrophie.

Die Komponenten des Sarkoglykankomplexes sind spezifisch für Herz- und Skelettmuskulatur. Defekte der Komponenten dieses Komplexes verursachen autosomal-rezessive Muskeldystrophien der Extremitätengürtel und der proximalen Extremitäten, die auch Sarkoglykanopathien genannt werden.

Dystrophin verstärkt und stabilisiert das Sarkolemm (die Membran der Skelettmuskelzelle), eine Funktion, die in Beziehung zum mechanischen Stress steht, der während der Muskelkontraktion erzeugt wird. Dystrophin bildet ein Verbindungselement zwischen Zytoskelett und der extrazellulären Matrix. Wenn Dystrophin fehlt, entstehen Risse in der Zellmembran, die somit fragmentiert wird. Dadurch strömt unkontrolliert Kalzium in die Muskelzelle, was zum Zelluntergang führt. Ein Mangel an Dystrophin ist typisch für die Duchenne-Muskeldystrophie, eine rezessive X-chromosomale Krankheit.

Sarkoglykane sind Membranproteine, die mit Matrixproteinen und anderen Membranproteinen interagieren. Syntrophine und Dystrobrevine sind Proteine der Zellperipherie.



Strukturproteine der Muskelzellen, die von Mutationen betroffen sein können, welche Myopathien verursachen

Die Z-Scheibe ist die Verankerungsregion der Aktinfilamente des Sarkomers und spielt eine mechanische Rolle bei der Kraftübertragung, die die Myofibrille entwickelt.

Desminfilamente gehören zu den Intermediärfilamenten. Sie umgeben die Z-Scheibe und sind mit ihr und untereinander durch Plektin verknüpft. Dadurch ist Desmin in der Lage, 1) mechanisch die kontraktiven Aktionen benachbarter Myofibrillen zu integrieren und 2) die Z-Scheiben mit der Zellmembran zu verbinden. Das Hitzeschockprotein alpha-B-Kristallin schützt Desmin vor mechanischer Schädigung, wie sie durch ständige Kontraktion und Entspannung der Myofibrillen verursacht werden könnte.

Desmin, Plektin und alpha-B-Kristallin bilden also ein Netzwerk aus Proteinen um die Z-Scheibe und schützen die Integrität der Myofibrillen vor mechanischem Stress.

Mutationen dieser Proteine verursachen Brüchigkeit der Myofibrillen und ihre Zerstörung bei anhaltender Belastung.

Desmin (Intermediate fil.)

connects myofibrills to sarcolemma at the level of the Z-lines

Connects sarcomer to ECM across desmosomes
anchors mitochondria in sarcomers

Distrofin

stabilising protein between ECM and cytoskeleton
If mutated sarcolemma disintegrates and muscle fiber die

Titin molecule – from Z-disk to M-line

- big protein
- binds to the surface of thick filament in A band
- **spring-like part** of titin in I band
- stabilise thick filaments position in the center

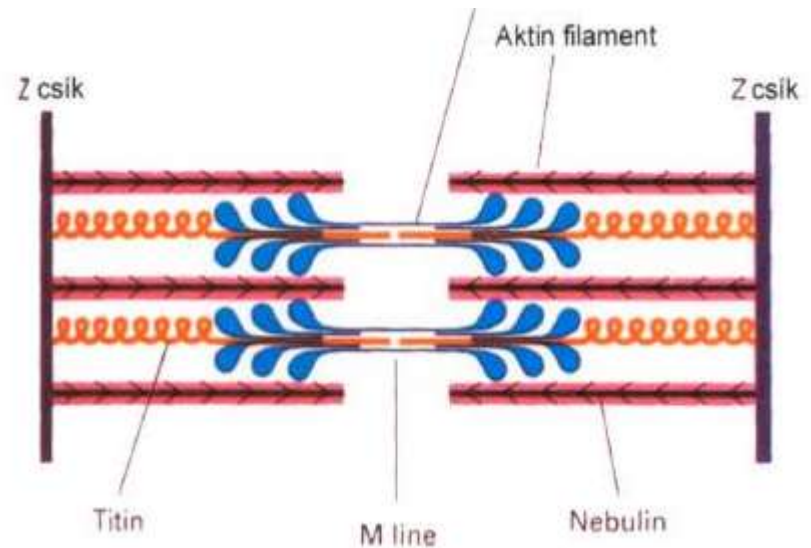
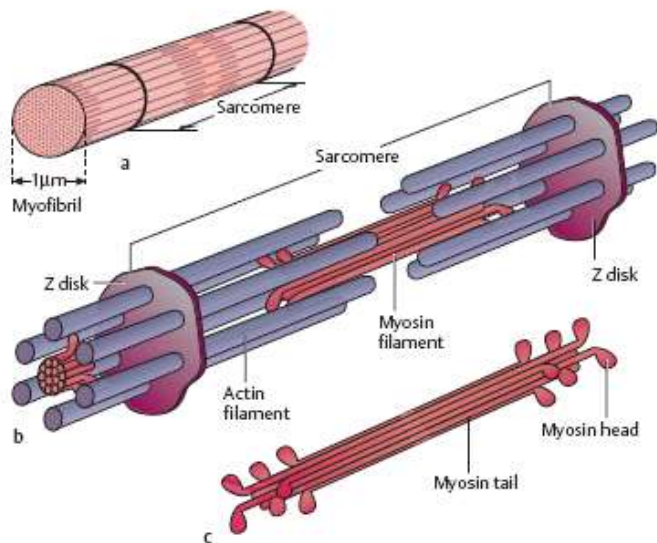
Nebulin – from Z-line along the actin molecules

- regulates length of thin filaments

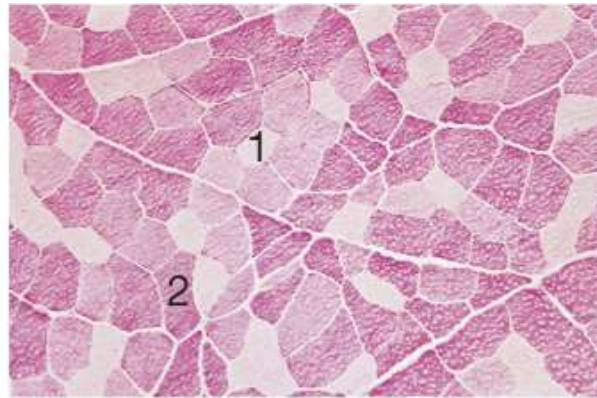
α -actinin – Z-filaments in Z-lines

- fix + ends of actin filaments (barbed end) to Z-discs
- **very strong binding**

Myomesin and M-protein – anchor thick filament to other filaments (titin)



Types of striated muscle



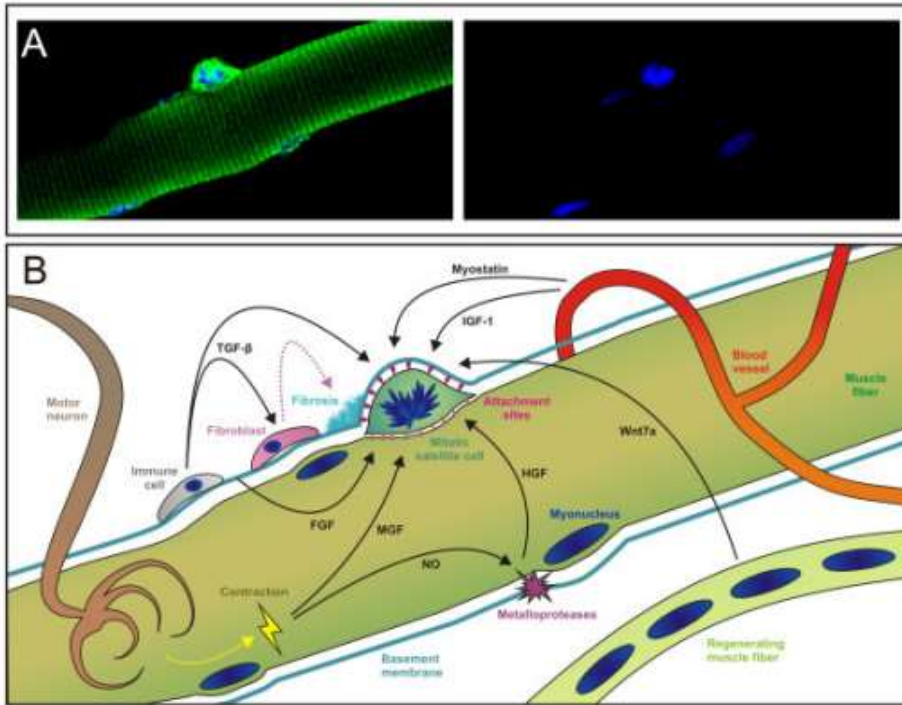
RED MUSCLE FIBRE

- High content of myoglobin & cytochrome
- Many mitochondria
- Rich blood supply
- Slow & continuous contraction
- Smaller in diameter
- E.g: postural muscles

WHITE MUSCLE FIBRE

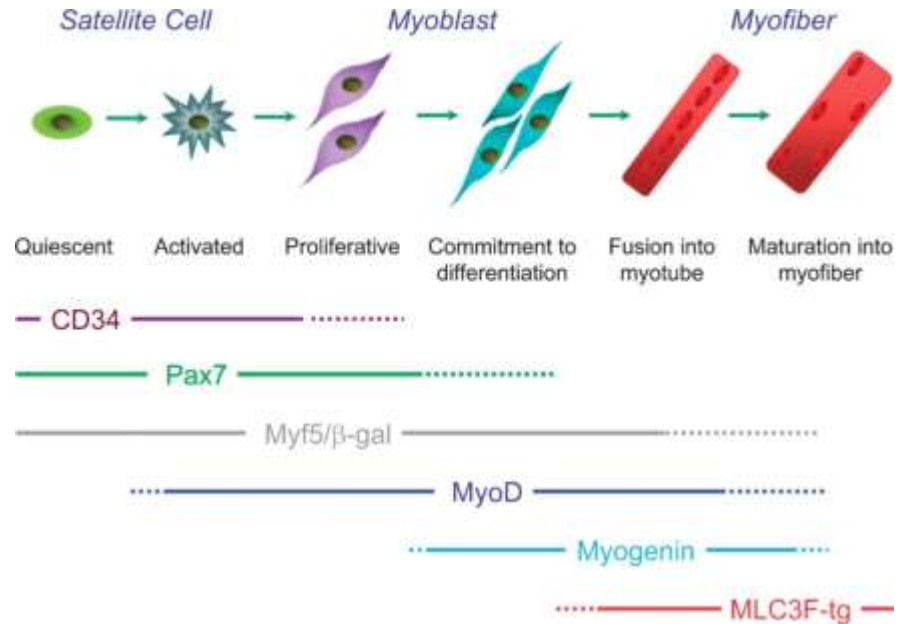
- Low content of myoglobin & cytochrome
- Few mitochondria
- Poor blood supply
- Rapid contractions
- Larger in diameter
- E.g: extra ocular muscles

Metaphase satellite cell on mouse muscle fiber fluorescent labelling



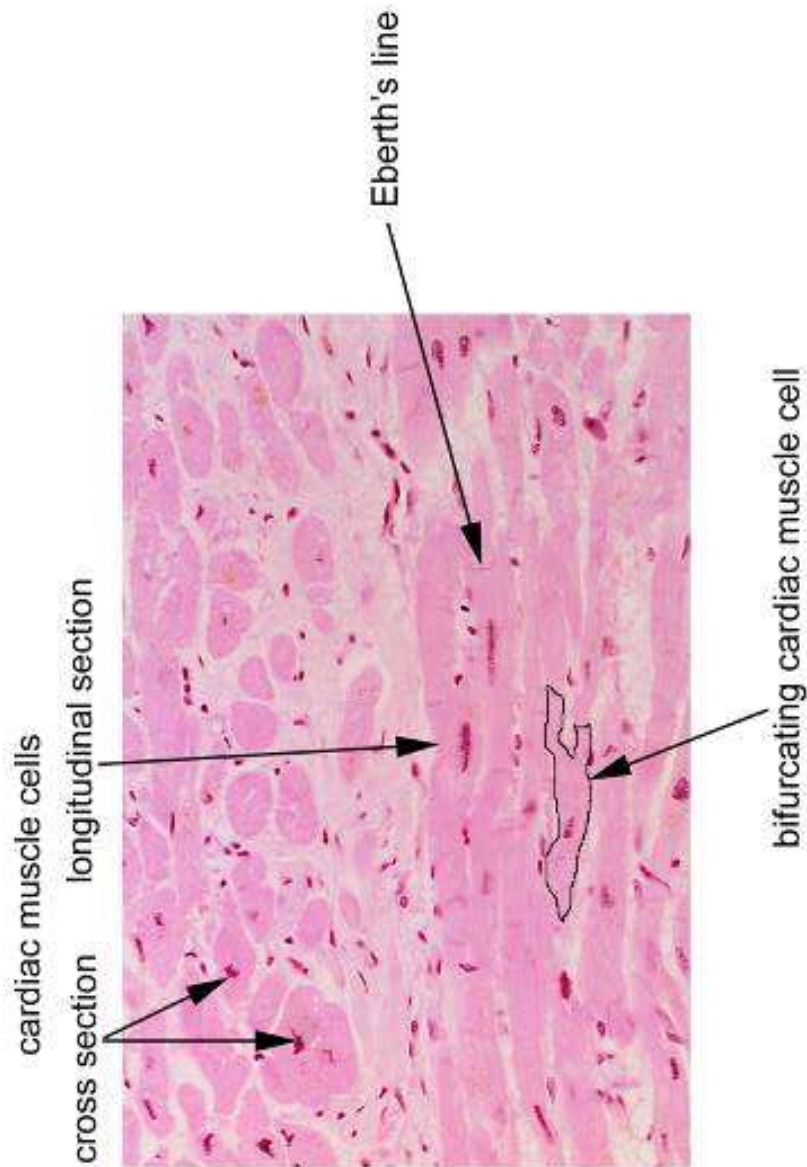
The satellite cell niche and regulatory factors. (a) Fluorescence microscopic image of a mitotic satellite cell (metaphase) on a mouse muscle fiber. The satellite cell is labeled by the expression of a yellow fluorescent protein and DNA is stained in blue. (b) Schematic of the different environmental cues influencing a satellite cell in its niche. FGF, fibroblast growth factor, HGF, hepatocyte growth factor, IGF, insulin-like growth factor, MGF, mechano-growth factor, NO, nitric oxide, TGF, transforming growth factor.

Myogenesis from satellite cells



Schematic of satellite cell myogenesis and markers typical of each stage. Satellite cells are quiescent in normal adult muscle and can be activated by, for example, muscle damage. Once activated, satellite cells divide to produce satellite cell-derived myoblasts that further proliferate, before committing to differentiation and fusing to form myotubes, which then mature into myofibers (for clarity, satellite cell self-renewal is not included). CD34, Pax7, and Myf5/β-gal are expressed in quiescent satellite cells. Satellite cell activation is marked by the rapid onset of MyoD expression, whereas myogenin later marks the commitment to differentiation. The temporal expression pattern of MLC3F-tg is typical of many structural muscle genes such as skeletal muscle actin and MyHC, which mark sarcomeric assembly in the later stages of differentiation. Myf5/β-gal denotes the fusion protein product of the targeted allele of the *Myf5^{nlacZ/+}* mouse (Tajbakhsh et al. 1997), whereas MLC3F-tg is the product of the *3F-nlacZ-E* transgene (Kelly et al. 1995). (Adapted from Miller et al. 1999 with modifications by J. Beauchamp and the authors.)

Cardiac muscle



Branching cells

length: 85-100 μm

Big nucleus in the middle of the cells, euchromatic

Membrana basalis

striated

Eberth's line— cells connected electrically and mechanically functional syntitium

Pacemaker activity

Conduction system in heart

Under regulation of autonomic NS

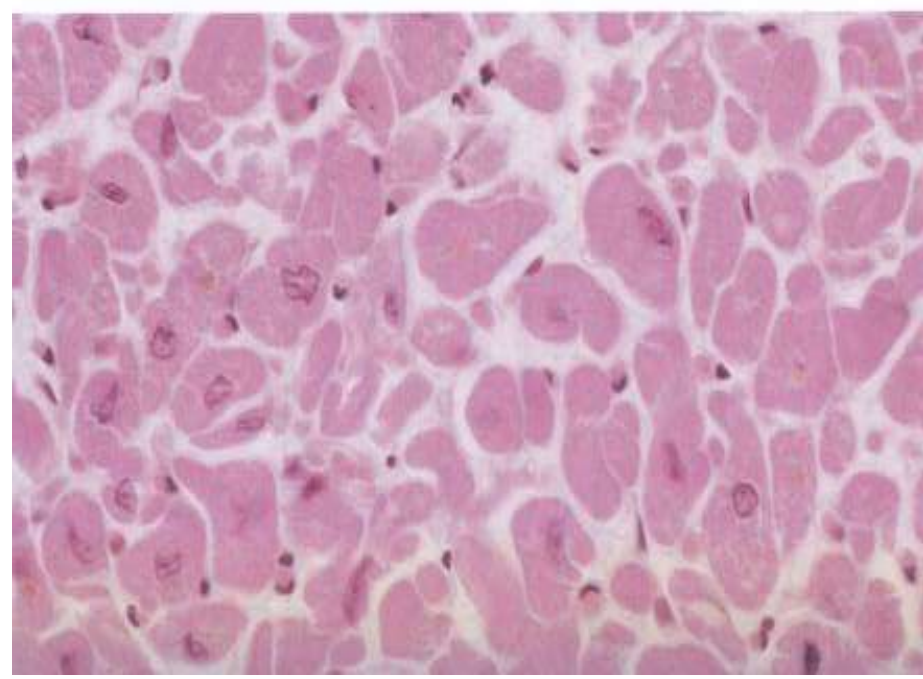
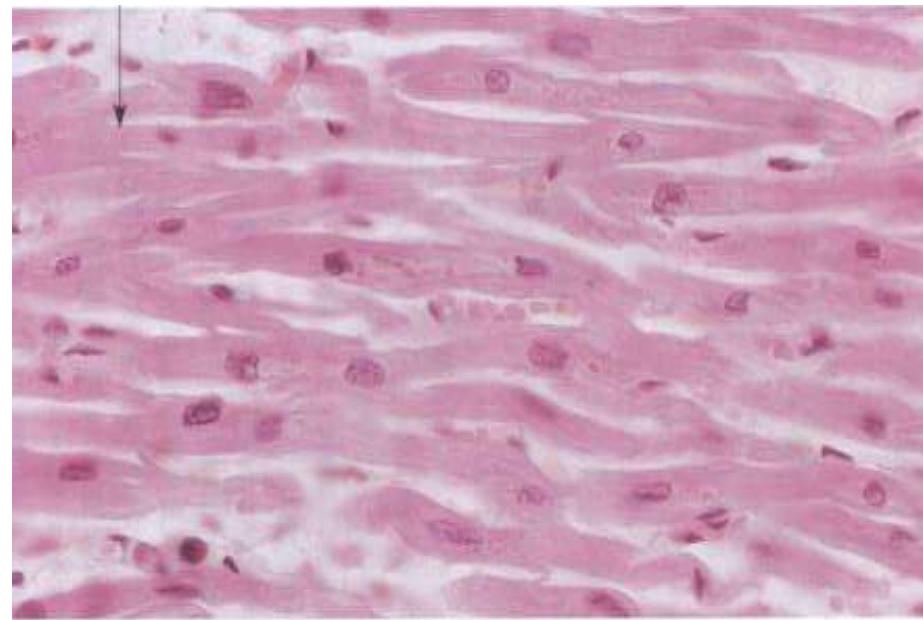
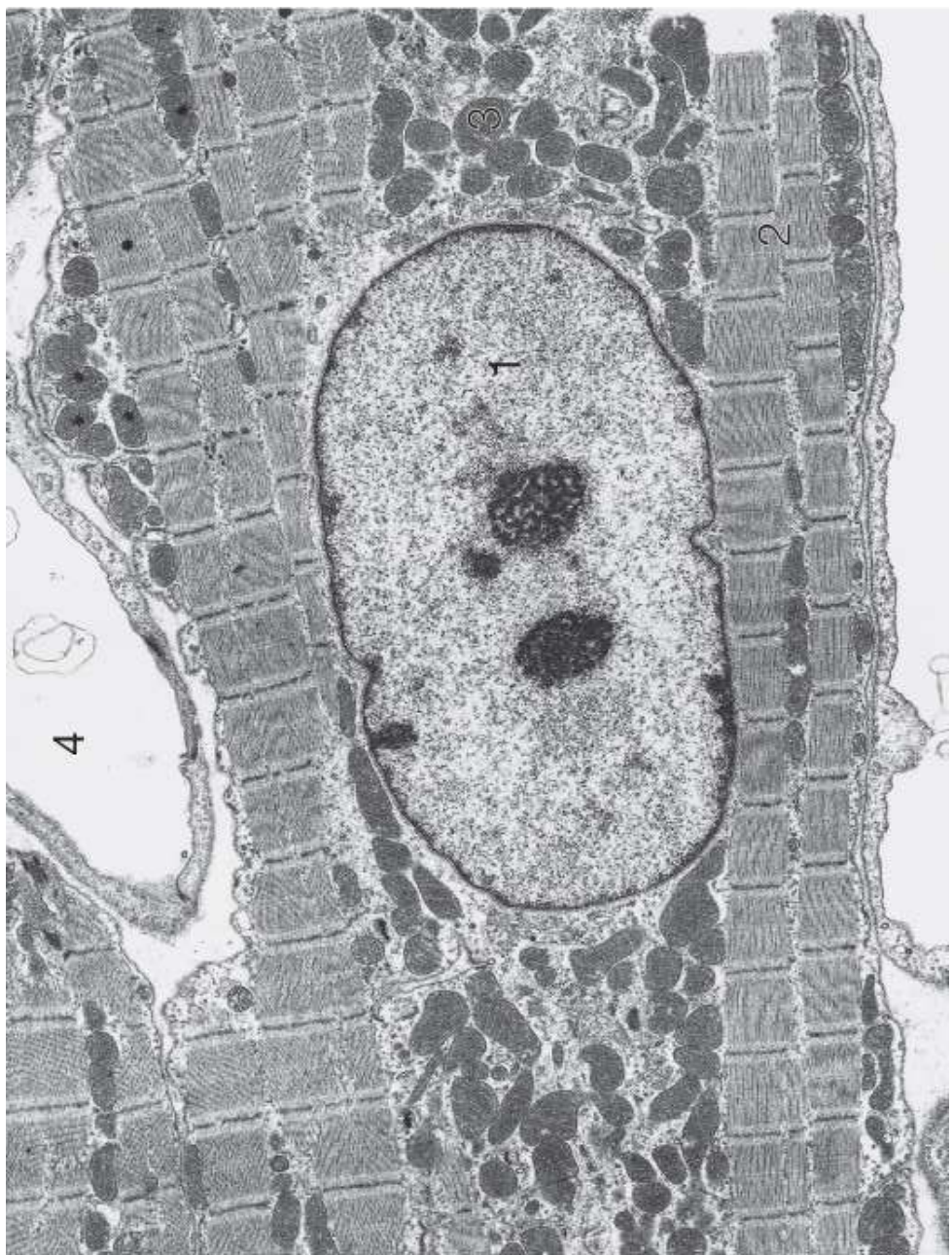
Persistent work

Needs lot of energy

Lipofuscin granules

No (?) Regeneration

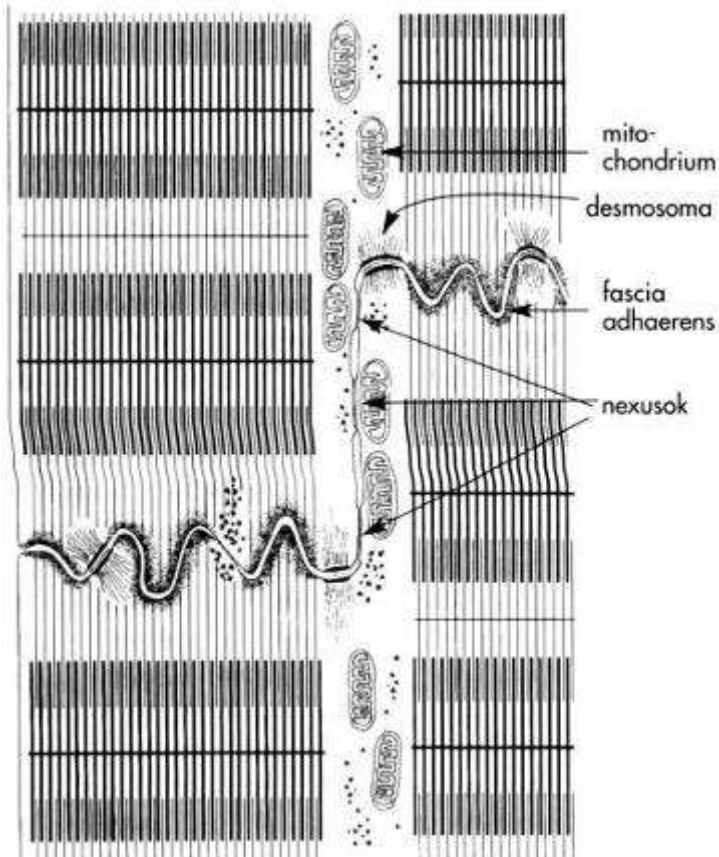
Heart tissue



Eberth's line (Discus intercalaris)



Karl Joseph Eberth
1835 - 1926



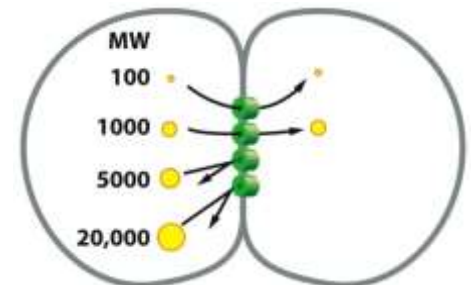
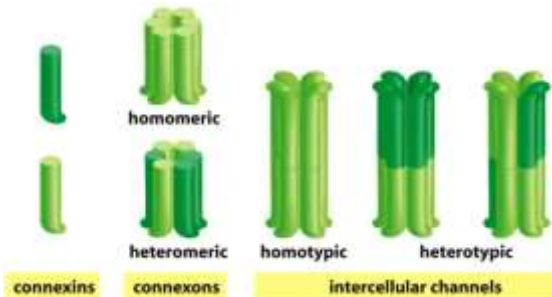
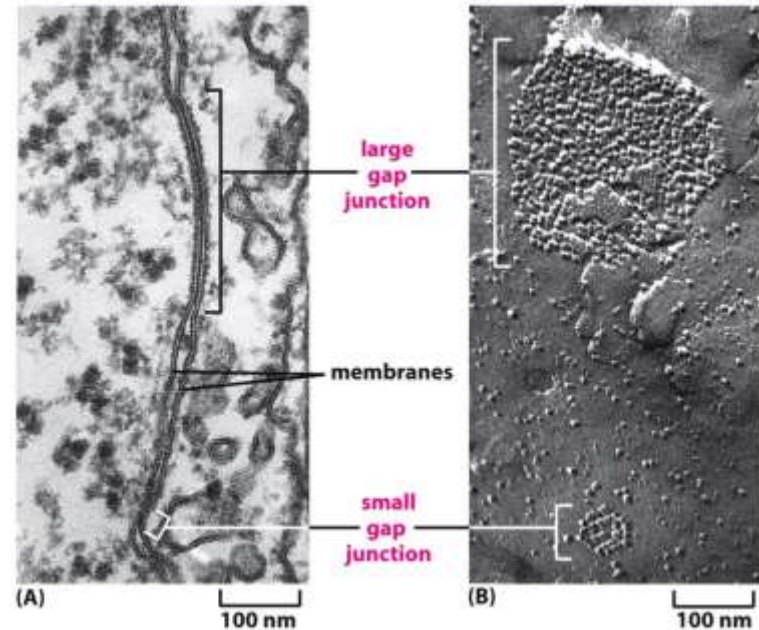
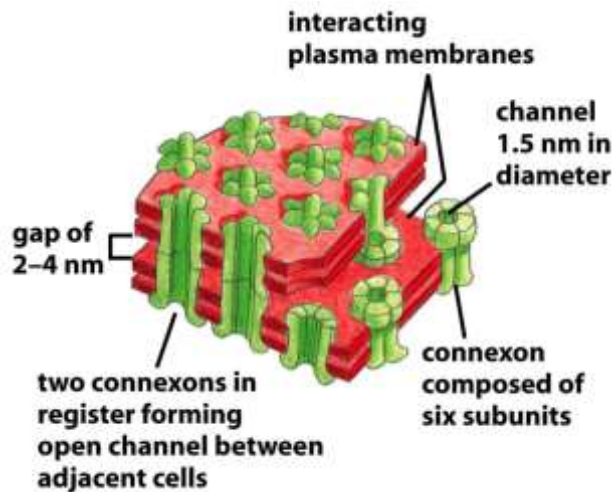
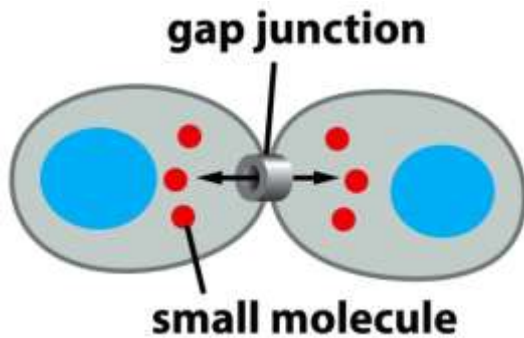
Cell adhesion structures along Eberth's line: fascia adherens (actin), desmosoma (IF), gap junction=nexus (electric synapse)

Gap junction=nexus

Place of cellular exchange (small molecules, ions, glucose, intracellular mediators: IP_3 , cAMP)

Electric synapse,

Enable ionic communication between cells leading to synchronous muscle contraction.

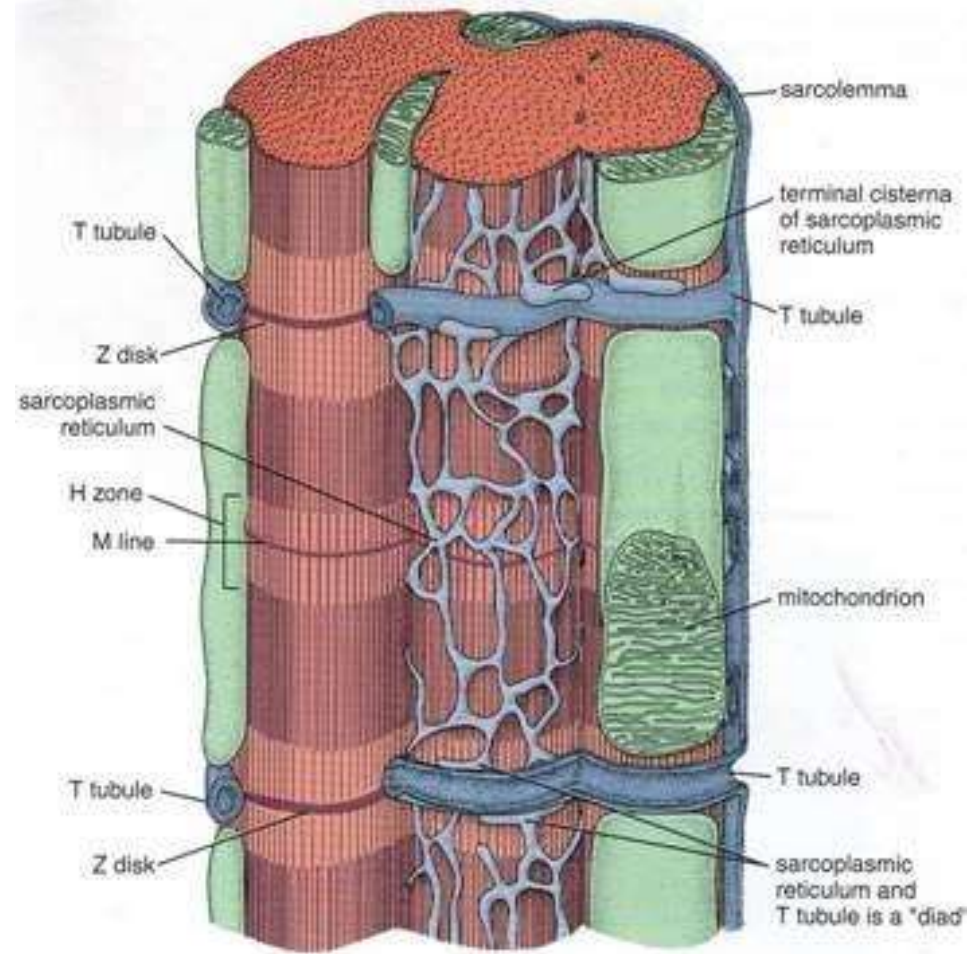
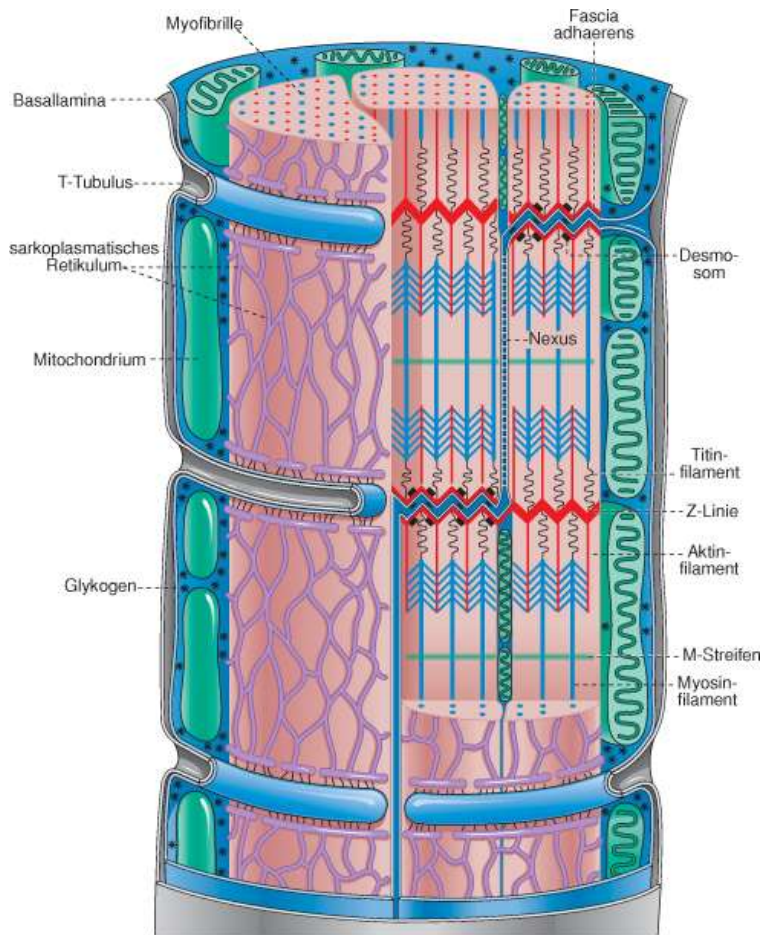


Transversal (T)-Tubule in cardiac muscle, Diad

DIAD

-at Z line

- Terminal cistern of sarcoplasmic reticulum on T tubule



Lipofuscin granules



yellow-brown pigment granules

lipid containing residues of lysosomal digestion

„aging” pigments

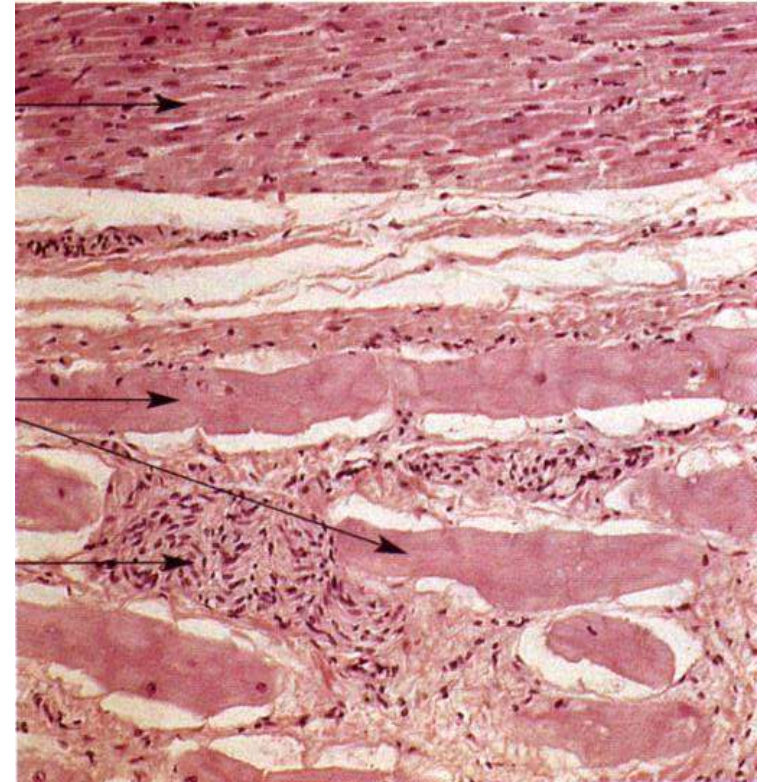
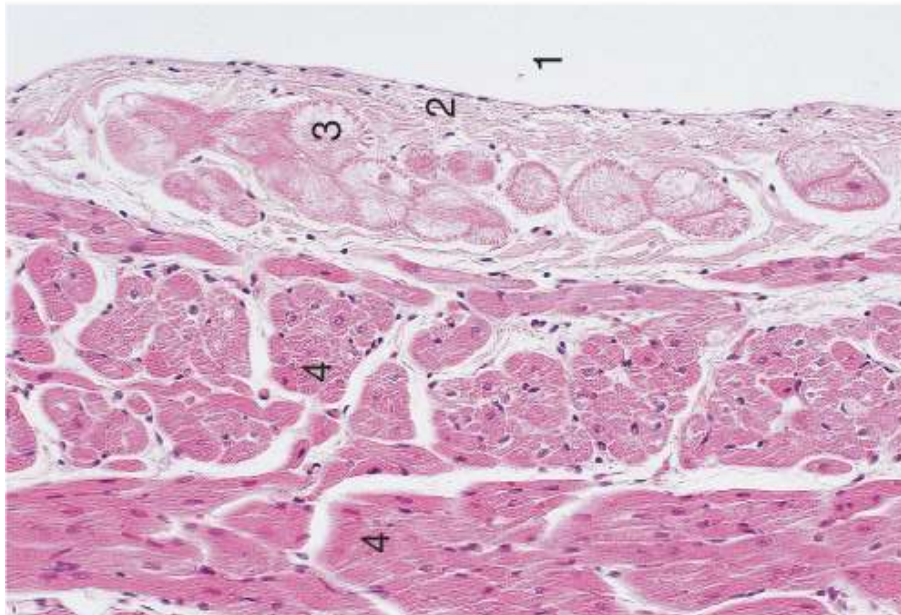
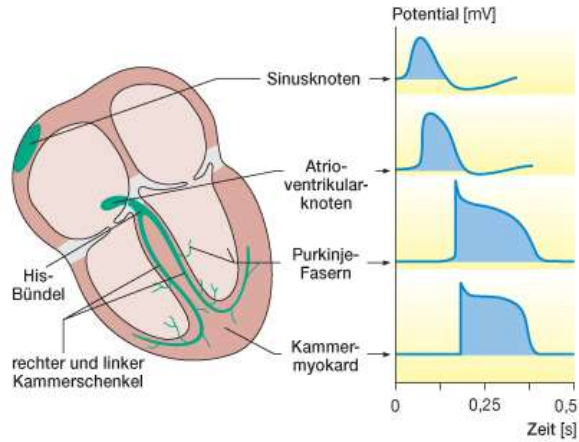
arranged around the nucleus

Myocardocytes with lipofuscin granules (HE stain, $\times 400$).

Pacemaker activity, Purkinje fibers



Jan Evangelista Purkyně
1787 - 1869





Thank you for your attention!



References

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