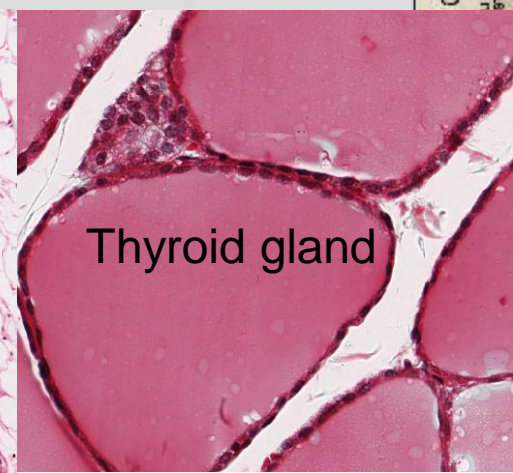
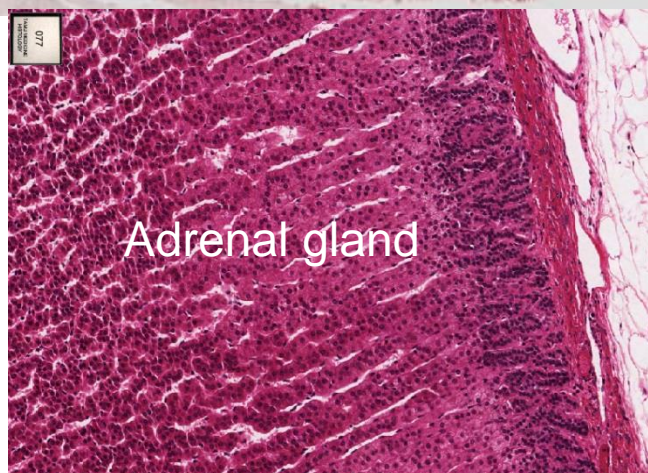
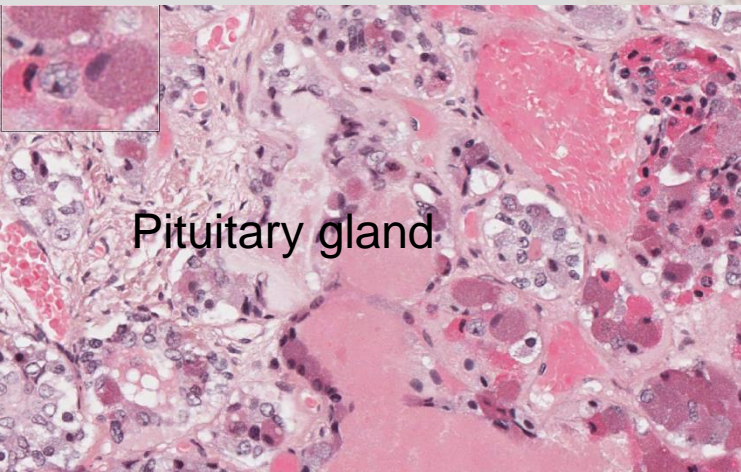


ENDOCRINE SYSTEM **Part 1**

Dr. Larry Johnson



073
ANATOMY
BIOLOGY

Objectives

Part 1

- Distinguish between the neurohypophysis and the adenohypophysis and identify the cell types present in a slide or photomicrograph of the pituitary.
- Identify thyroid follicles, follicular cells, colloid, capillaries and parafollicular cells.
- Identify the capsule, chief cells, and oxyphil cells in the parathyroid gland.

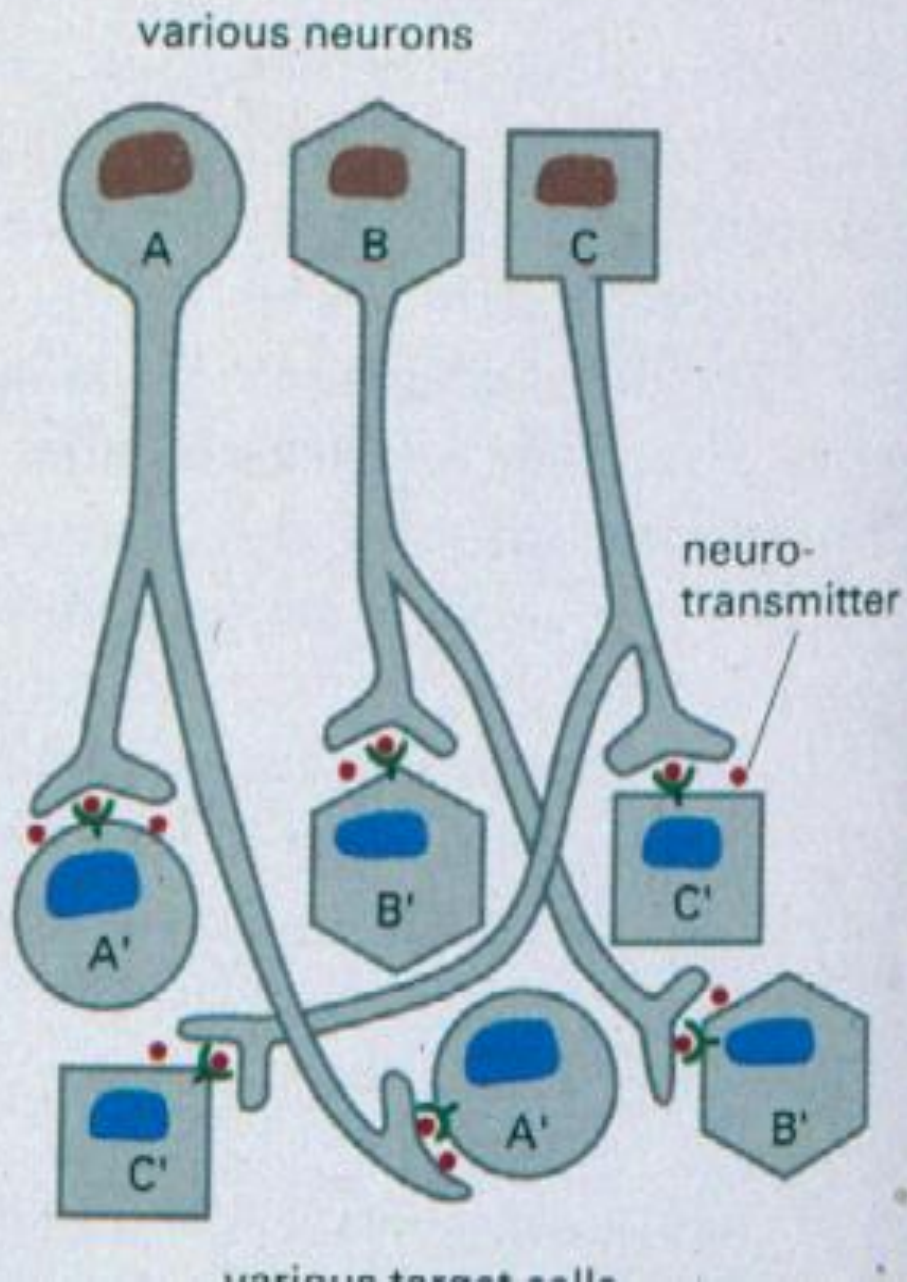
Part 2

- Identify the capsule, cortex, zona glomerulosa, zona fasciculata, zona reticularis, medulla, and chromaffin cells in the adrenal gland.
- Identify the pinealocytes and corpora arenacea in the pineal gland.
- Identify the islets of Langerhans in the pancreas

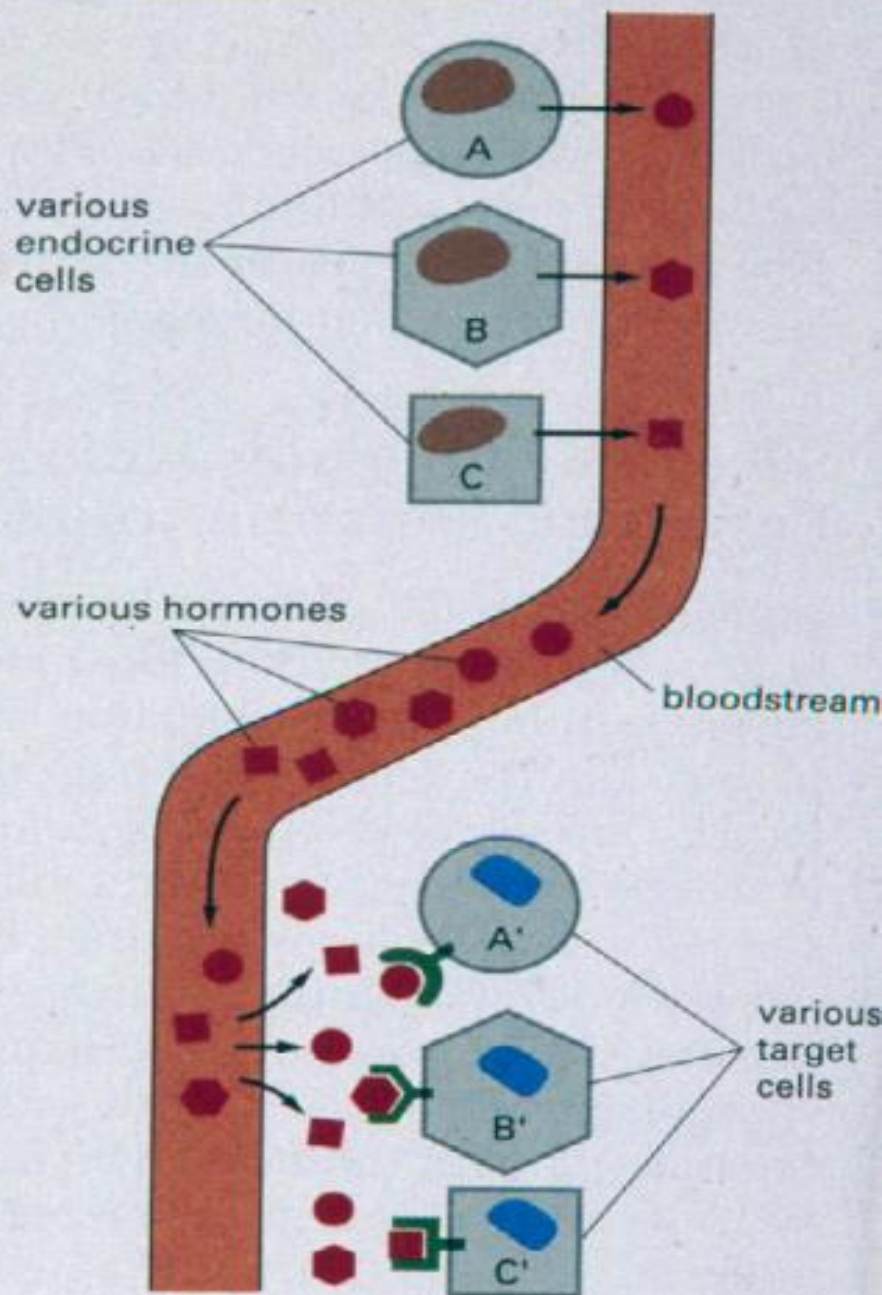
Endocrine System Overview

Endocrine glands	<ul style="list-style-type: none">• No ducts, highly vascularized, rich blood supply<ul style="list-style-type: none">• Secretions (hormones) can be released directly into blood stream• Secretions can be stored in secretory granules• Secretions can be stored <u>extracellularly</u> (e.g., thyroid)
Pituitary gland	<ul style="list-style-type: none">• Anterior pituitary = <i>pars distalis</i> or <i>adenohypophysis</i><ul style="list-style-type: none">• Ectoderm• Posterior pituitary = <i>pars nervosa</i> or <i>neurohypophysis</i><ul style="list-style-type: none">• Midbrain
Thyroid gland	<ul style="list-style-type: none">• Lobules and• Colloid filled follicles (extracellular storage)
Parathyroid gland	<ul style="list-style-type: none">• Capsule with septa• Cords of epithelial cells supported by reticular fibers
Adrenal gland	<ul style="list-style-type: none">• Cortex<ul style="list-style-type: none">• Zona glomerulosa = mineralocorticoids• Zona fasciculata = glucocorticoids• Zona reticularis = androgens• Medulla<ul style="list-style-type: none">• Highly vascular, derived from neural crest
Pineal body	<ul style="list-style-type: none">• <i>Epiphysis cerebri</i>• Capsule of pia mater• Lobules divided by capsule• Corpora arenacea = brain sand, pineal concretions that accumulate with age
Pancreas	<ul style="list-style-type: none">• Both exocrine and endocrine<ul style="list-style-type: none">• Endocrine portion = Islets of Langerhans<ul style="list-style-type: none">• Alpha cells = glucagon• Beta = insulin• Delta = somatostatin

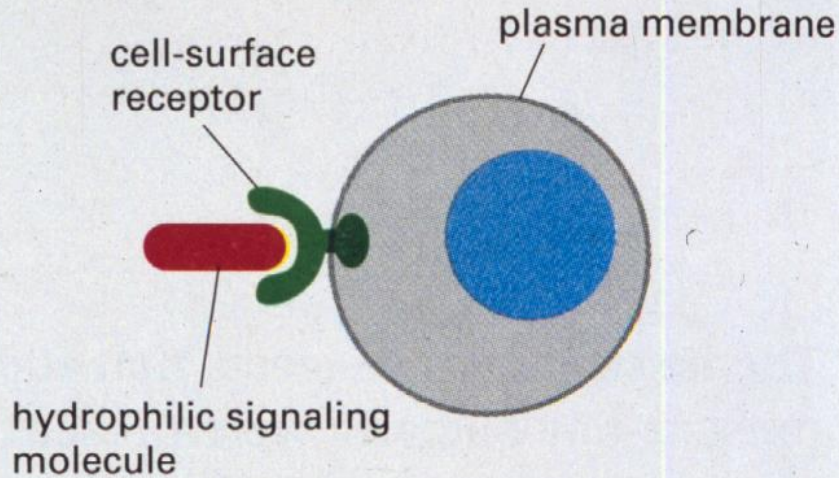
(B) SYNAPTIC SIGNALING



(A) ENDOCRINE SIGNALING



CELL-SURFACE RECEPTORS



INTRACELLULAR RECEPTORS

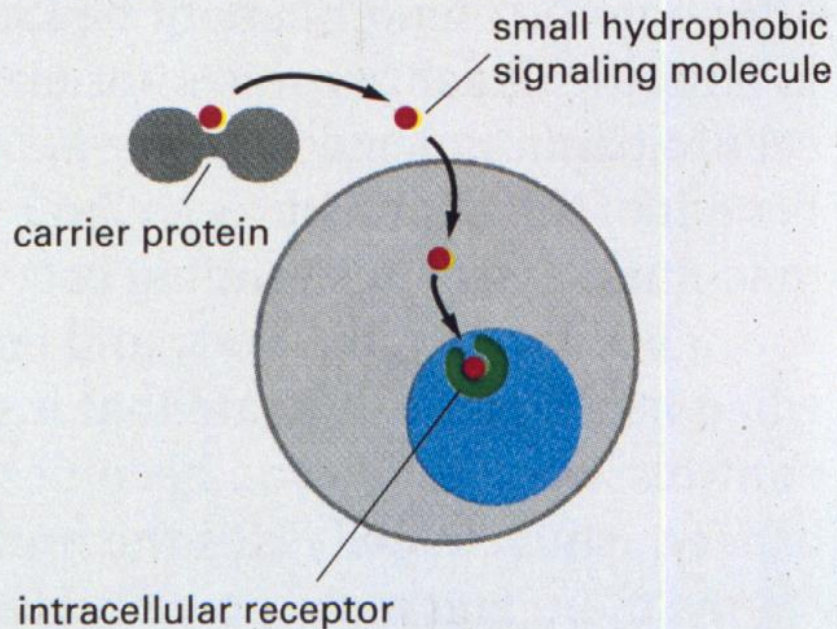
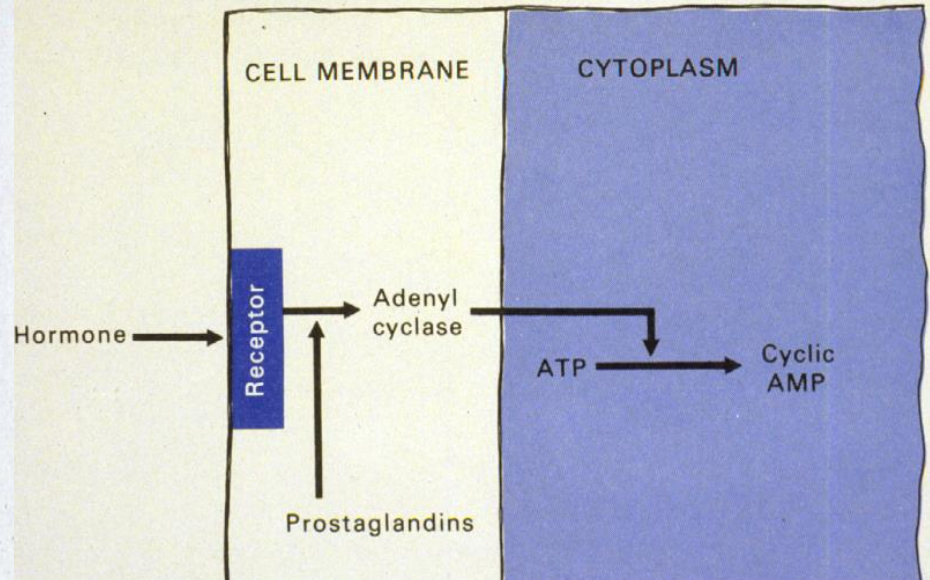


Figure 31-2. The cell membrane contains the enzyme adenylyl cyclase essential for the conversion of ATP to cyclic AMP. The hormone initiating the sequence is the first messenger; cyclic AMP the second.



HORMONE

Thyroid-stimulating hormone (TSH)

Adrenocorticotrophic hormone (ACTH)

Luteinizing hormone (LH)

Epinephrine

Parathyroid hormone

Epinephrine

Vasopressin

Epinephrine, ACTH, glucagon, TSH

ENDOCRINE = INTERNAL SECRETION (WITHOUT DUCTS)

HORMONE = to AROUSE or SET in MOTION

Endocrine glands are from endoderm

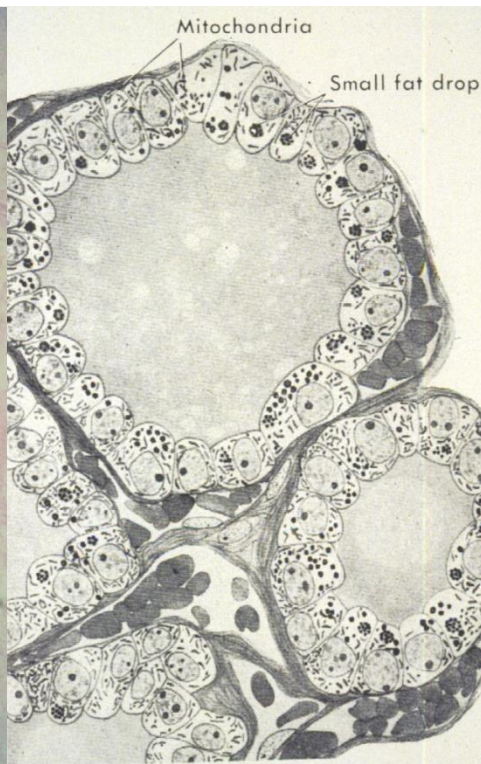
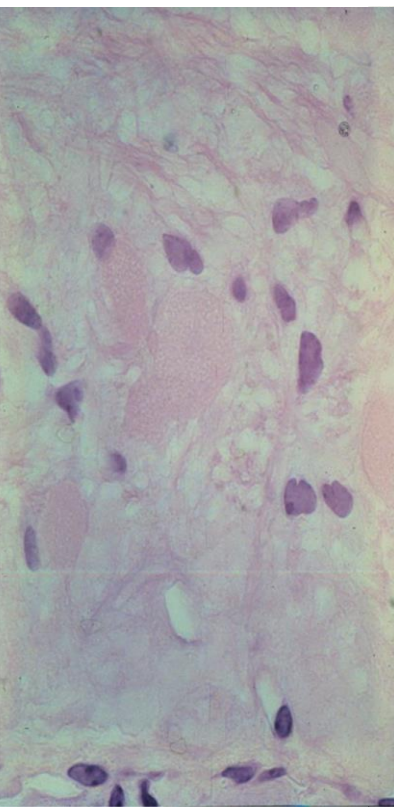
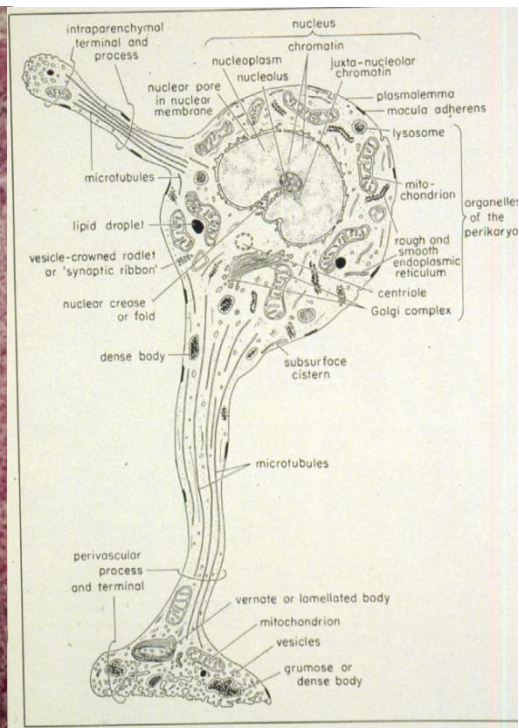
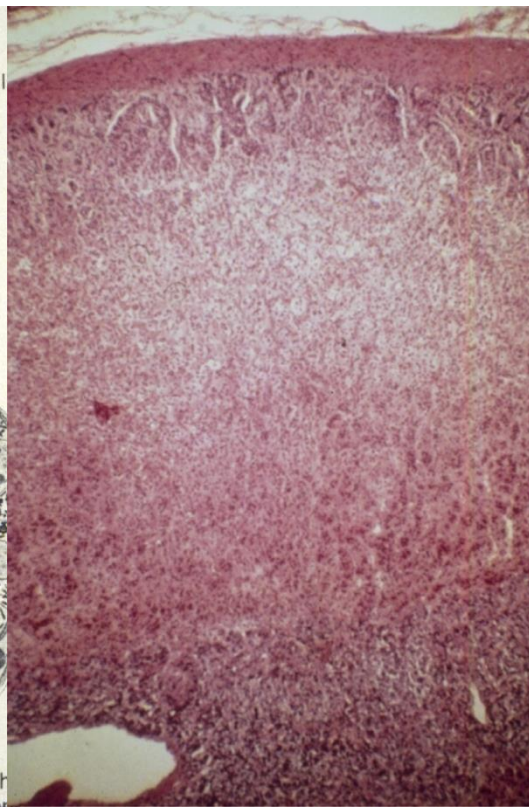


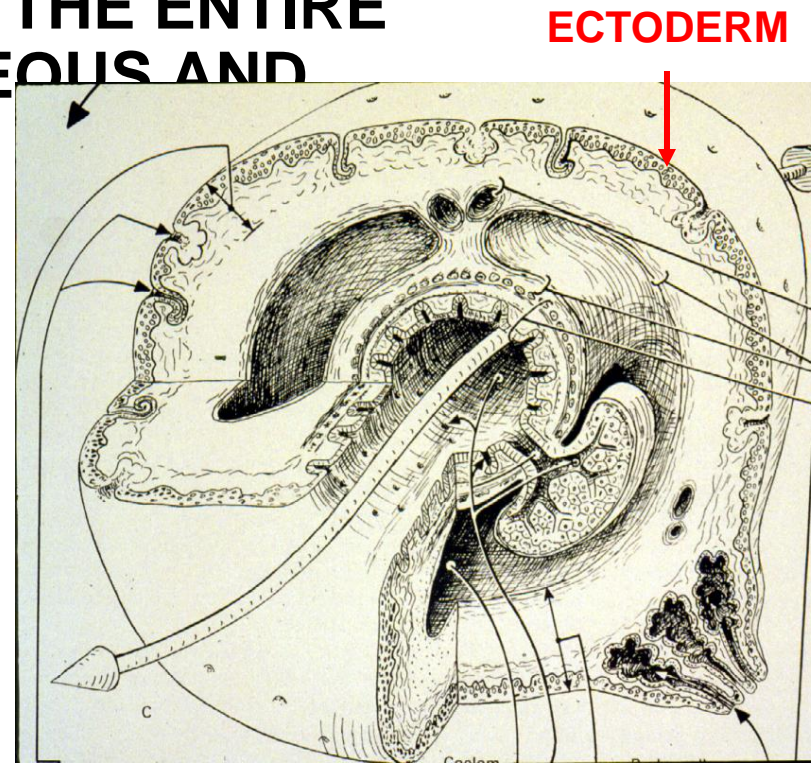
Figure 18-4. Section through several follicles of the thyroid gland. (Courtesy of R. P. Ross)



...drial matrix, dense intracrystal layers, and dense-core microcylinders 270 to 330 Å wide. Many of the organelles and inclusions of the dark phase higher primarily, the

ORIGIN AND DISTRIBUTION OF EPITHELIUM

ECTODERM - EPIDERMIS OF SKIN AND EPITHELIUM OF CORNEA TOGETHER COVERS THE ENTIRE SURFACE OF THE BODY; SEBACEOUS AND MAMMARY GLANDS

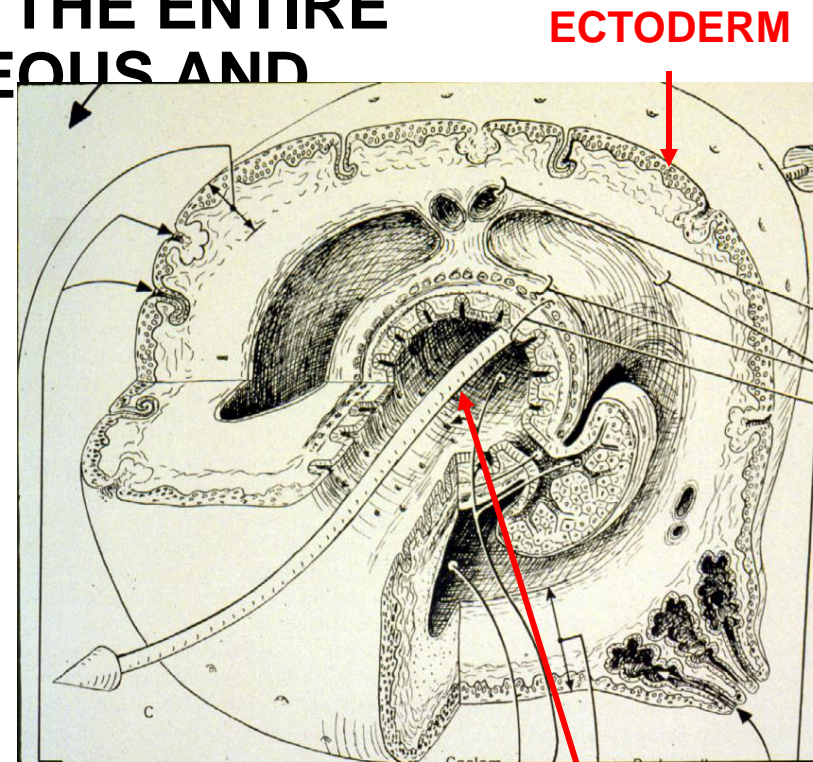


ORIGIN AND DISTRIBUTION OF EPITHELIUM

ECTODERM - EPIDERMIS OF SKIN AND EPITHELIUM OF CORNEA TOGETHER COVERS THE ENTIRE SURFACE OF THE BODY; SEBACEOUS AND MAMMARY GLANDS

ENDODERM - ALIMENTARY TRACT, LIVER, PANCREAS, GASTRIC GLANDS, INTESTINAL GLANDS

ENDOCRINE GLANDS - LOSE CONNECTION WITH SURFACE



ENDODERM

ORIGIN AND DISTRIBUTION OF EPITHELIUM

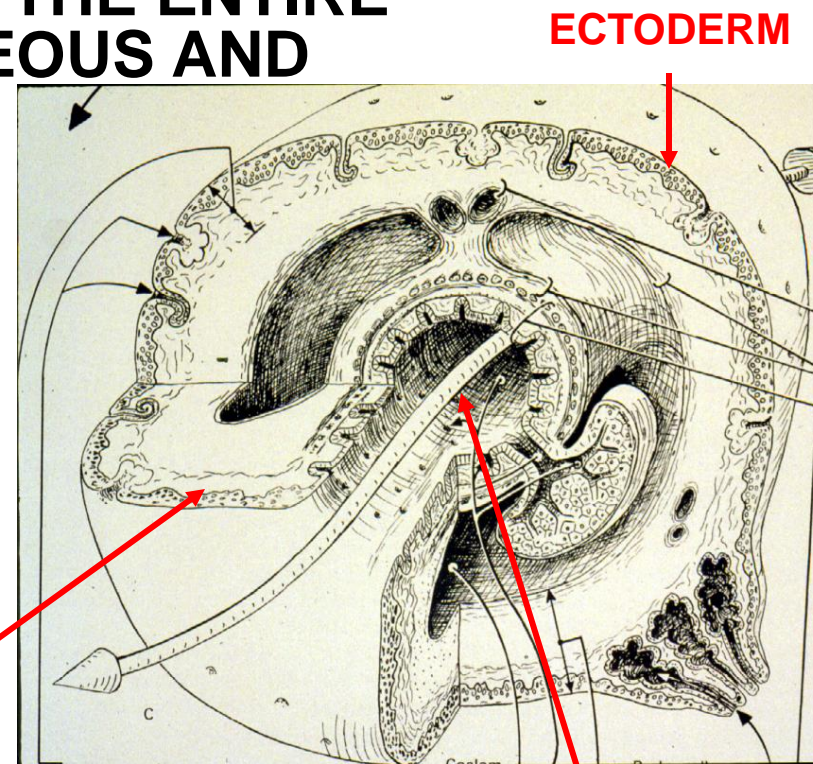
ECTODERM - EPIDERMIS OF SKIN AND EPITHELIUM OF CORNEA TOGETHER COVERS THE ENTIRE SURFACE OF THE BODY; SEBACEOUS AND MAMMARY GLANDS

ENDODERM - ALIMENTARY TRACT, LIVER, PANCREAS, GASTRIC GLANDS, INTESTINAL GLANDS

ENDOCRINE GLANDS - LOSE CONNECTION WITH SURFACE

MESODERM

- ENDOTHELIUM - LINING OF BLOOD VESSELS
- MESOTHELIUM - LINING SEROUS CAVITIES

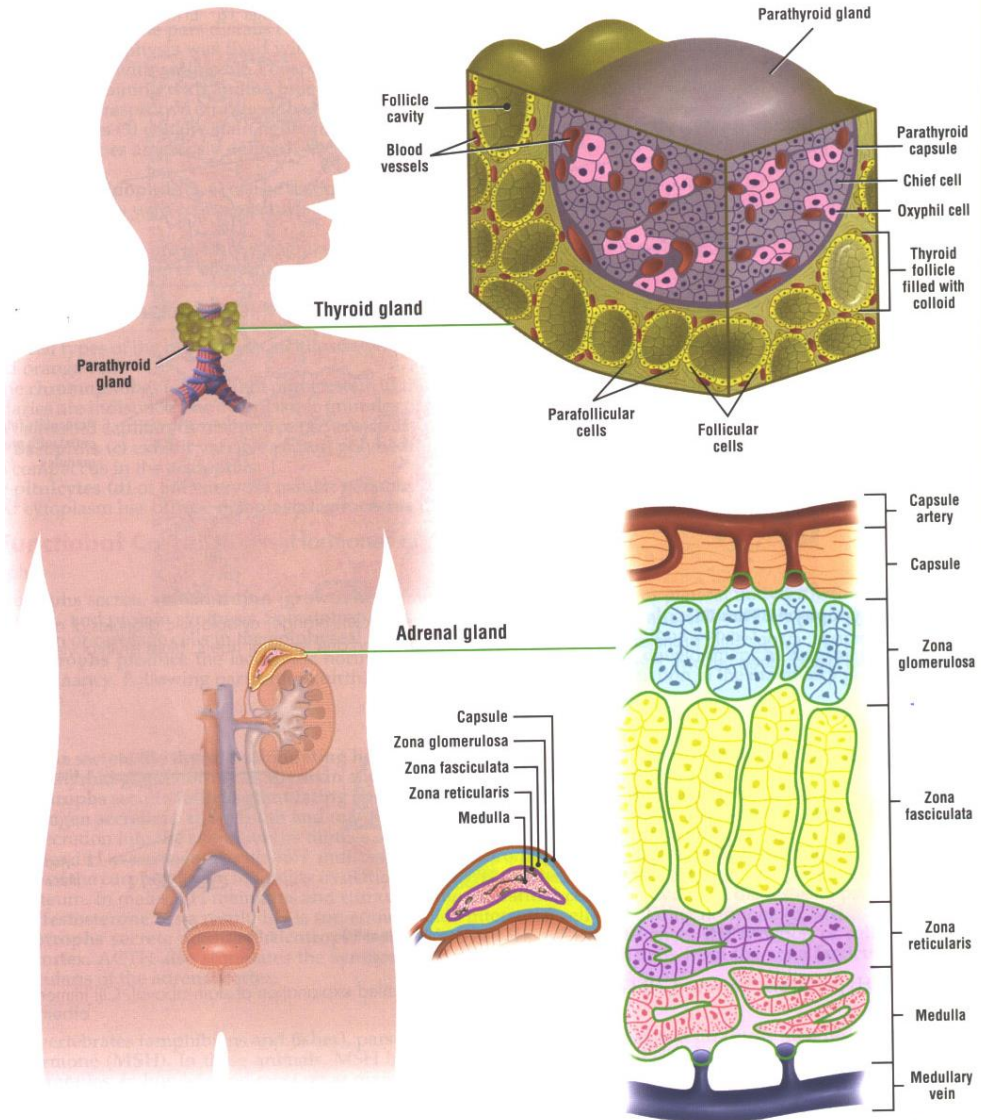


ECTODERM

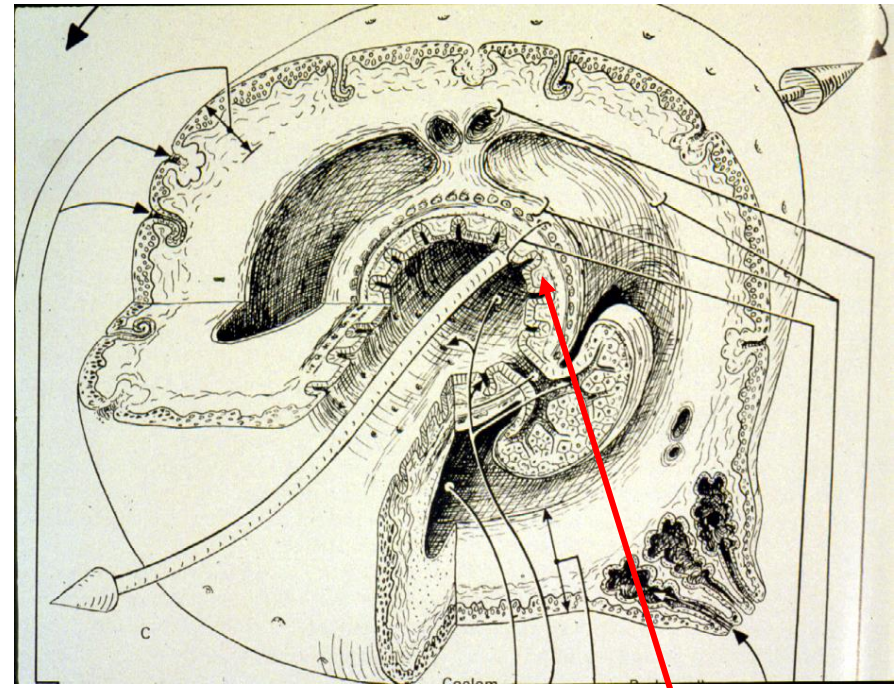
MESODERM

ENDODERM

ORIGIN



ENDODERM – ENDOCRINE GLANDS – LOSE CONNECTION WITH SURFACE



ENDODERM

ADENOHYPOPHYSIS

ORIGIN

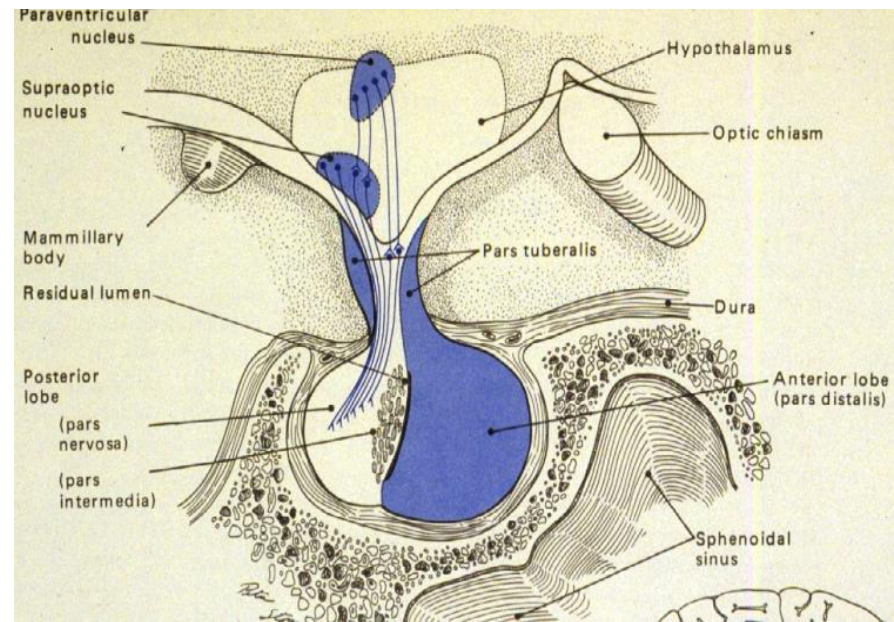
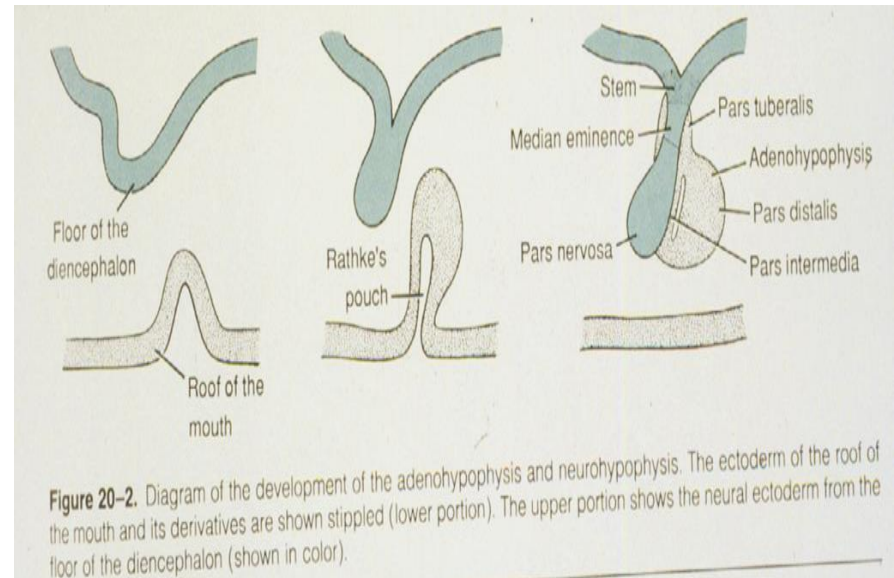
DIVISIONS

- I. PARS DISTALIS
- II. PARS TUBERALIS
- III. PARS INTERMEDIA

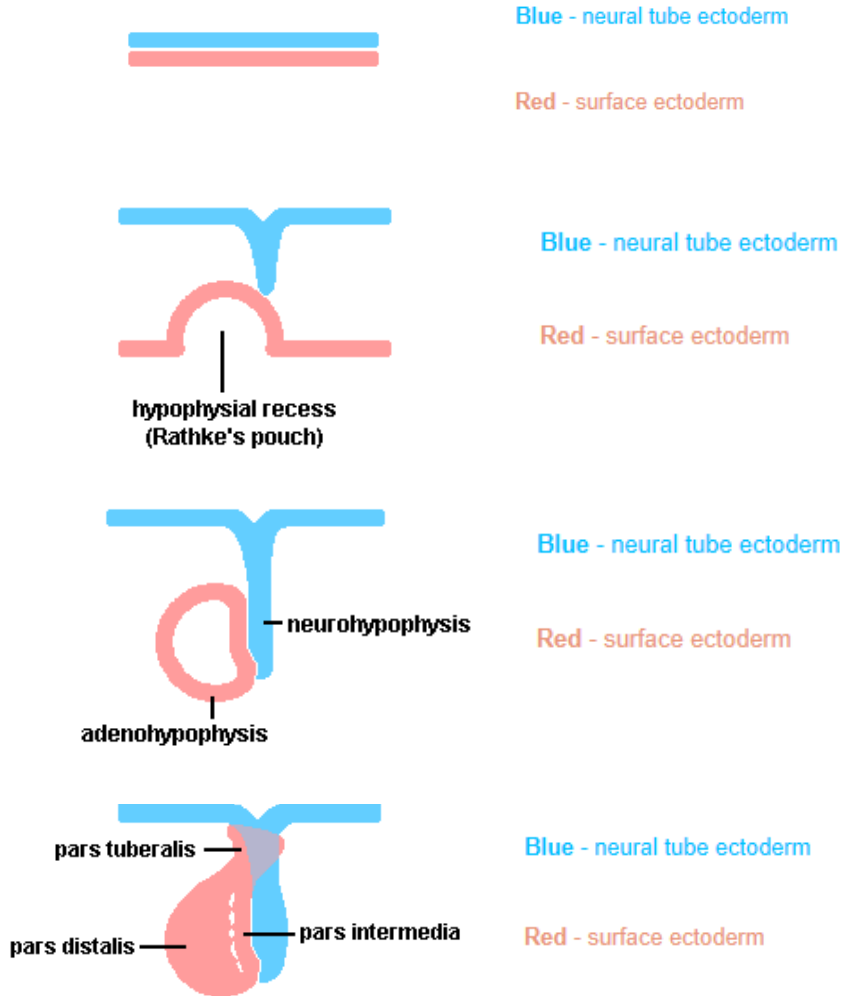
RELATION TO HYPOTHALAMUS

MICROSCOPIC ORGANIZATION

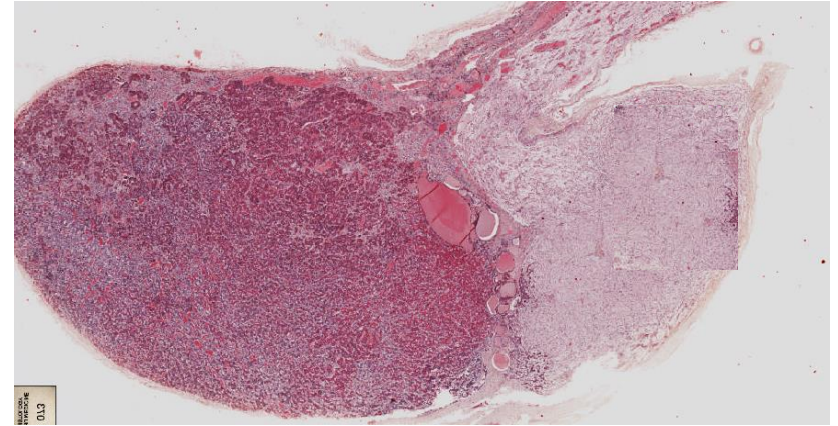
- I. CHROMOPHOBE CELLS
- II. CHROMOPHIL CELLS
 1. ACIDOPHILS
 2. BASOPHILS



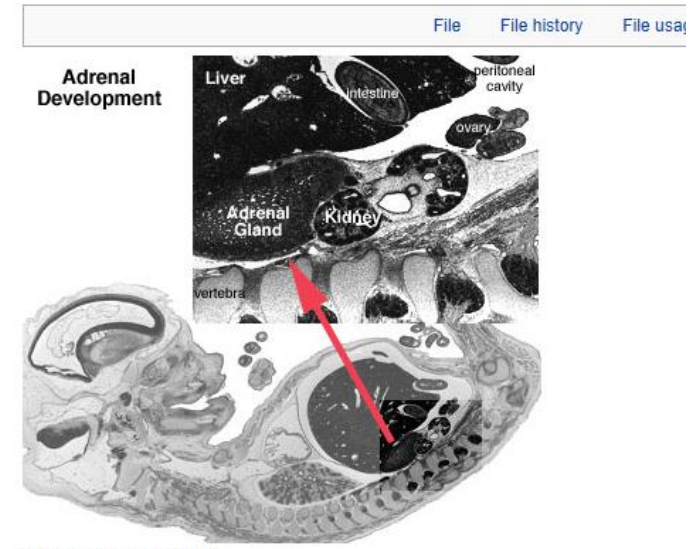
Development of the Hypophysis



Pituitary development



File:Week10 adrenal.jpg



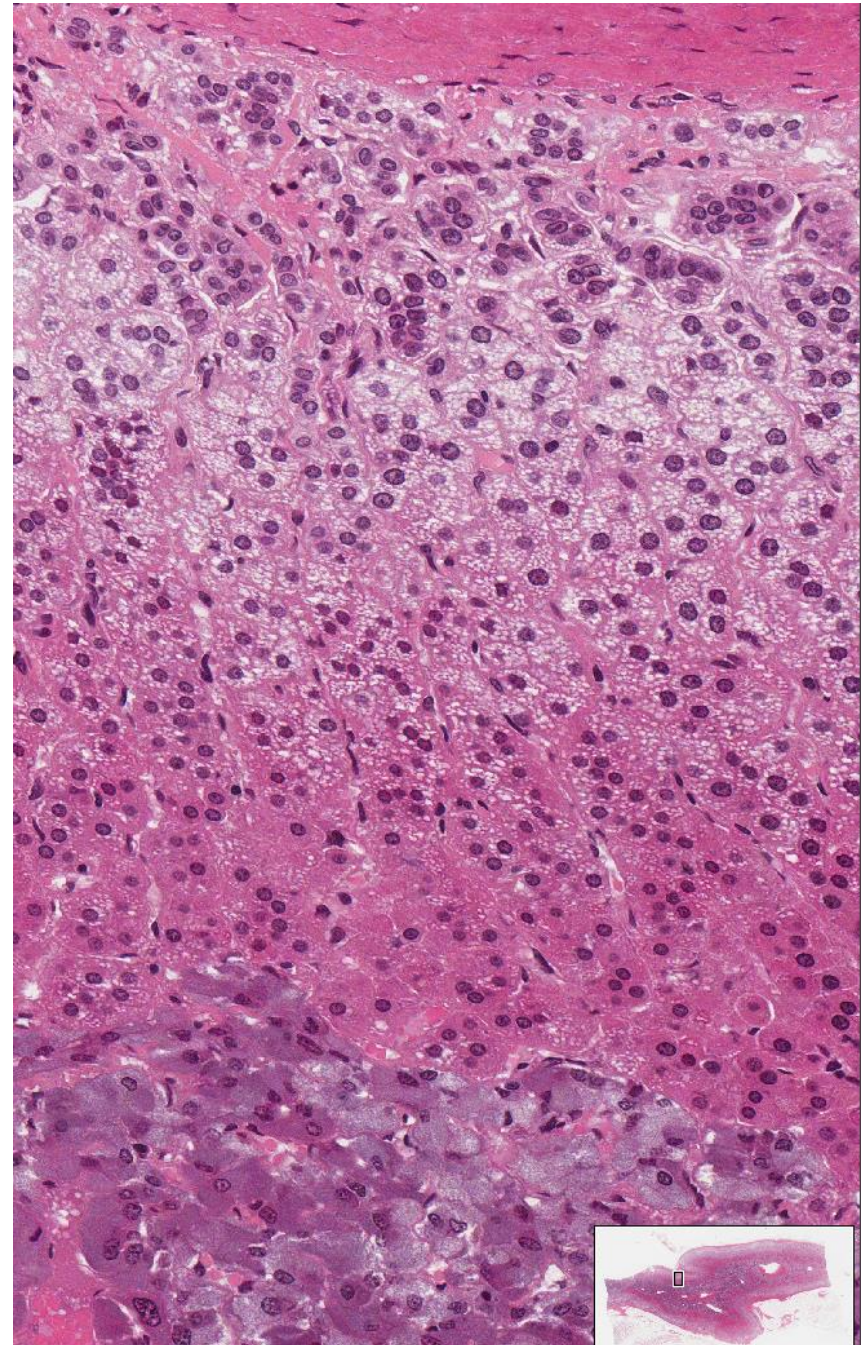
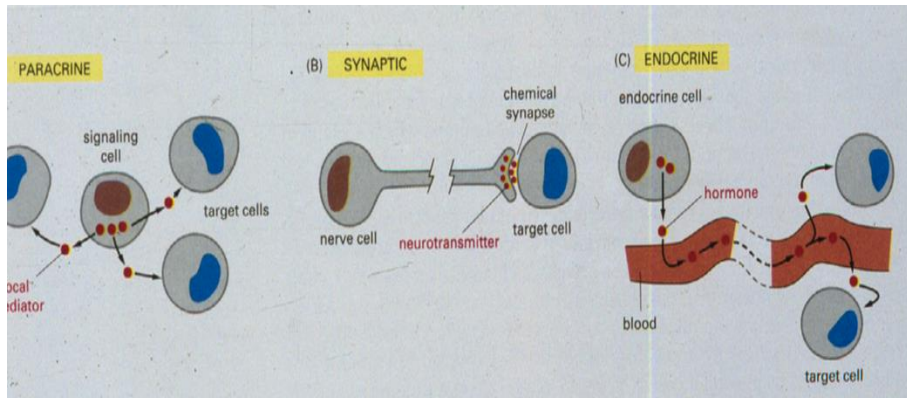
No higher resolution available.

Week10_adrenal.jpg (366 × 344 pixels, file size: 42 KB, MIME type: image/jpeg)

http://php.med.unsw.edu.au/embryology/index.php?title=Endocrine_System_Development

We need to

APPRECIATE THE DIVERSITY OF FUNCTIONS OF THE ENDOCRINE SYSTEM and to RECOGNIZE DIFFERENT ORGANS, UNIQUE FEATURES OF ORGANS, AND CELLS THAT MAKE THE ENDOCRINE SYSTEM



HORMONE = to AROUSE or SET in MOTION

PHYSIOLOGICAL BLOOD LEVELS OF HORMONES compared to that for glucose

GLUCOSE 10^{-2} molar

STEROID 10^{-9} molar

PEPTIDE 10^{-12} molar

GROWTH HORMONE (BLOOD LEVELS)

10^{-13} molar = DWARF

10^{-11} molar = GIANT

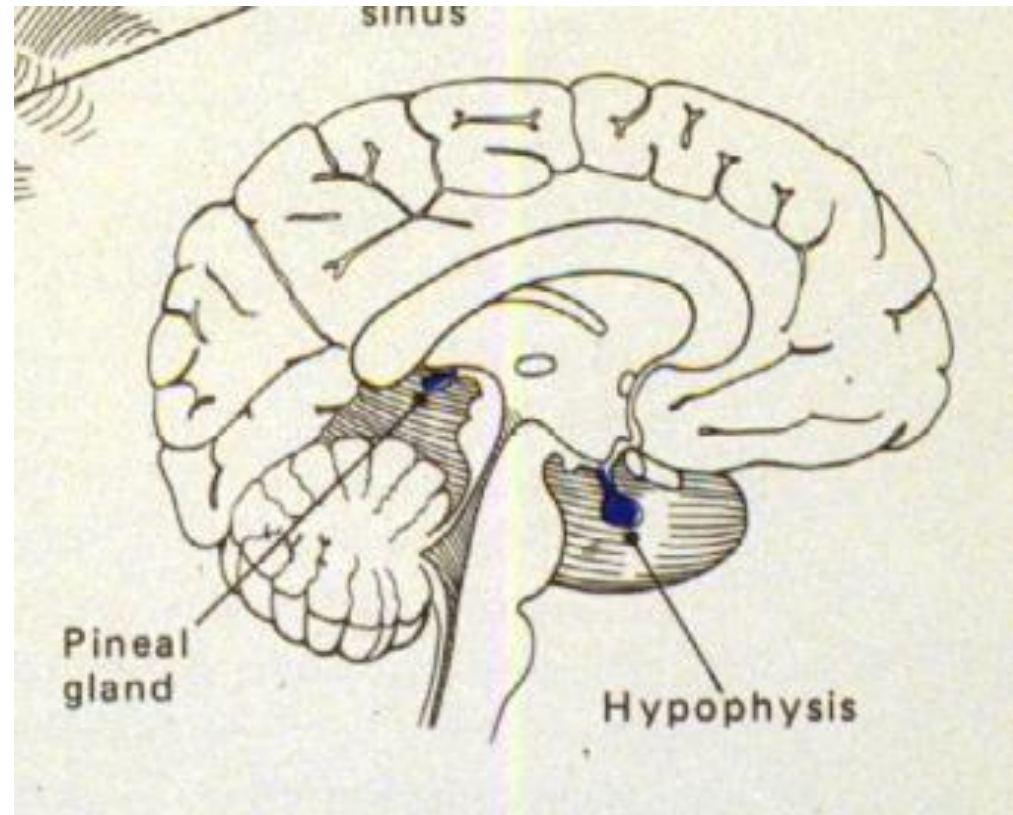


A custom-tailored suit, fitted by a normal-size tailor, was a necessity for the 8-foot-5-inch (2.5-meter) giant Robert Wadlow.

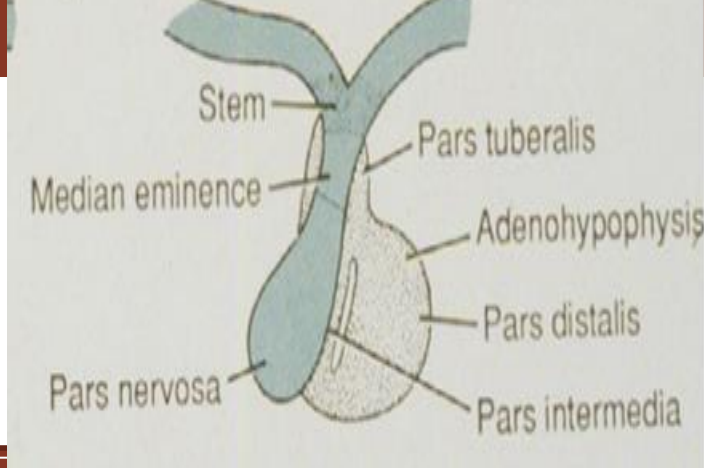


Pituitary gland (hypophysis) involvement in the neuroendocrine system

- Produces 9 hormones
- Reciprocal relations to other endocrine organs
- Neural and vascular connection to brain
- Location in key position for interplay between nervous and endocrine systems and establishment of **neuroendocrine system**



Pituitary gland



ADENOHYPOPHYSIS

**PARS DISTALIS
PARS TUBERALIS
PARS INTERMEDIA**

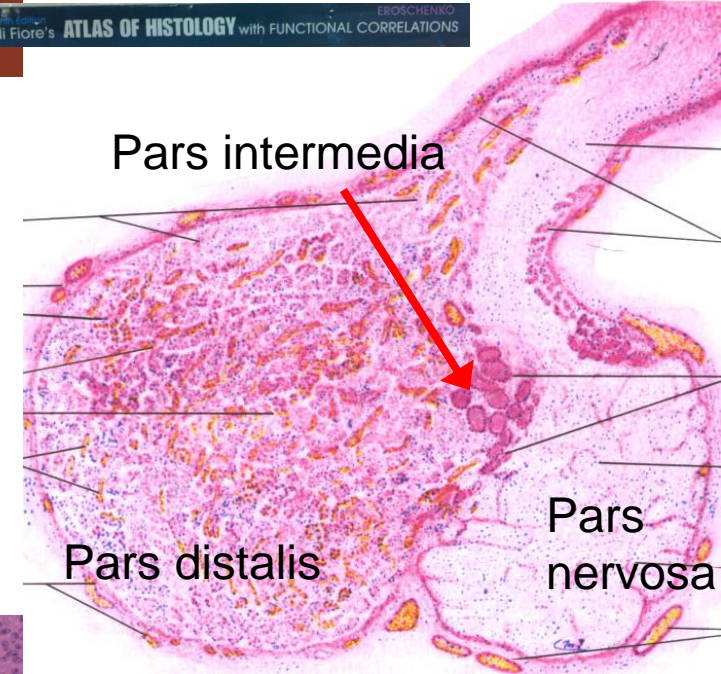
NEUROHYPOPHYSIS

**PARS NERVOSA
(PROCESSUS INFUNDIBULI)
INFUNDIBULUM
INFUNDIBULAR STEM
MEDIAN EMINENCE OF
THE TUBER CINEREUM**

Pars distalis

Pars intermedia

Pars nervosa



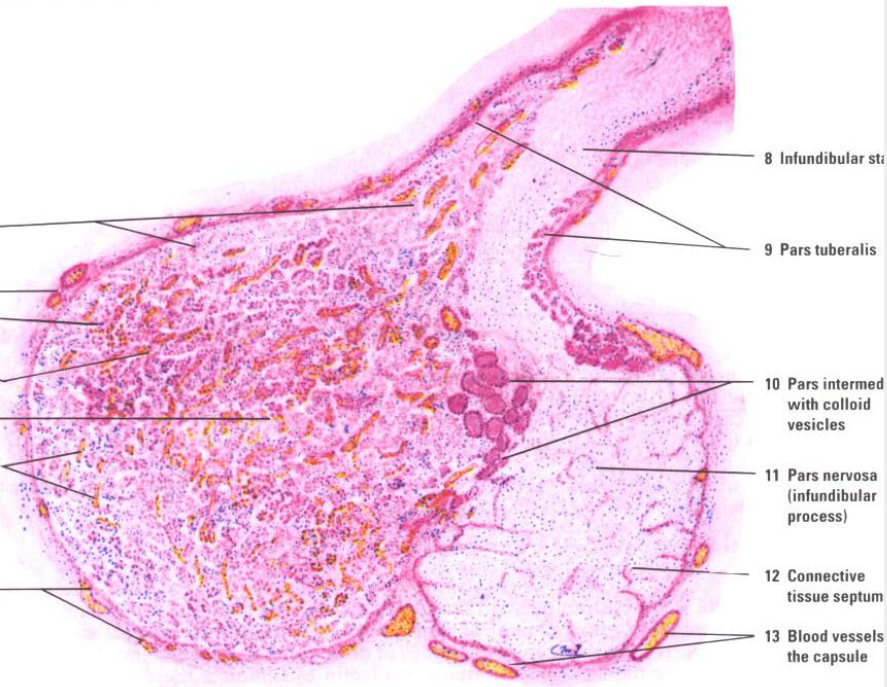
Pars distalis

Pars intermedia

Pars nervosa

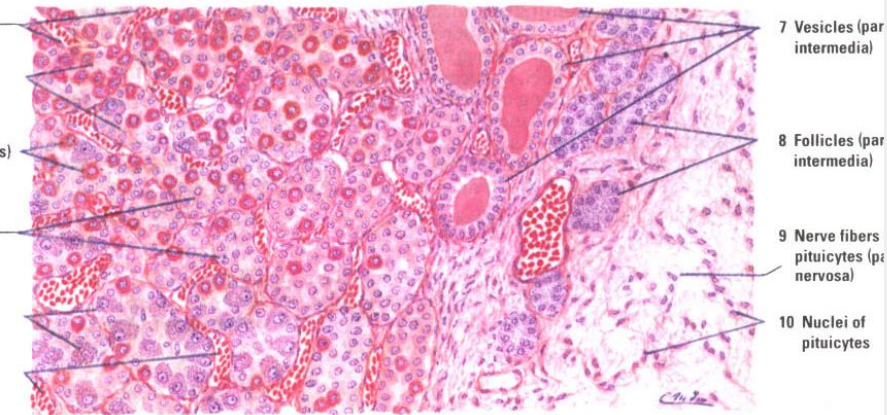
3 divisions of the pituitary gland:

1. Pars distalis
2. Pars intermedia
3. Pars nervosa



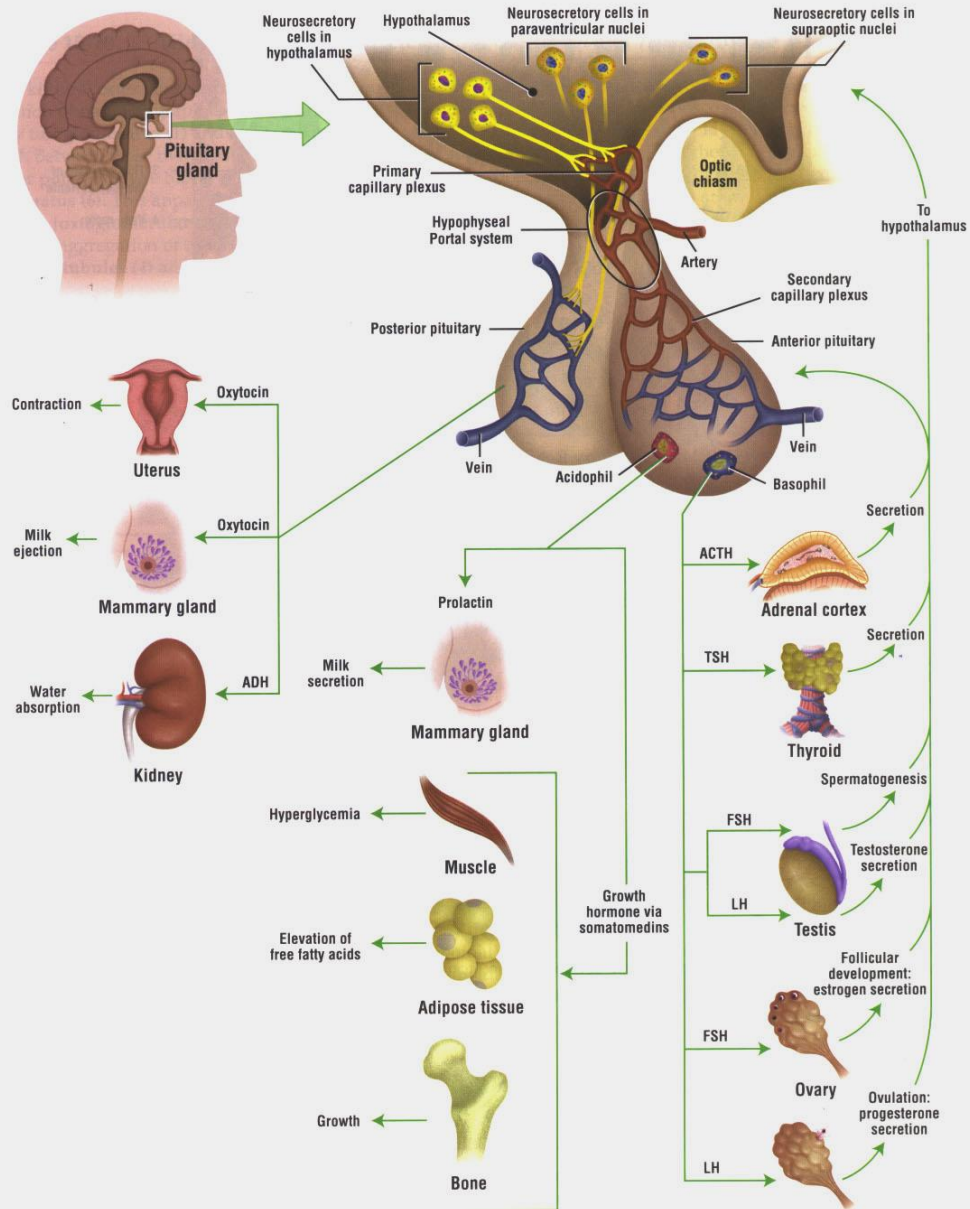
- 8 Infundibular stalk
- 9 Pars tuberalis
- 10 Pars intermedia with colloid vesicles
- 11 Pars nervosa (infundibular process)
- 12 Connective tissue septum
- 13 Blood vessels in the capsule

Hypophysis (panoramic view, sagittal section). Stain: hematoxylin-eosin. Low magnification.

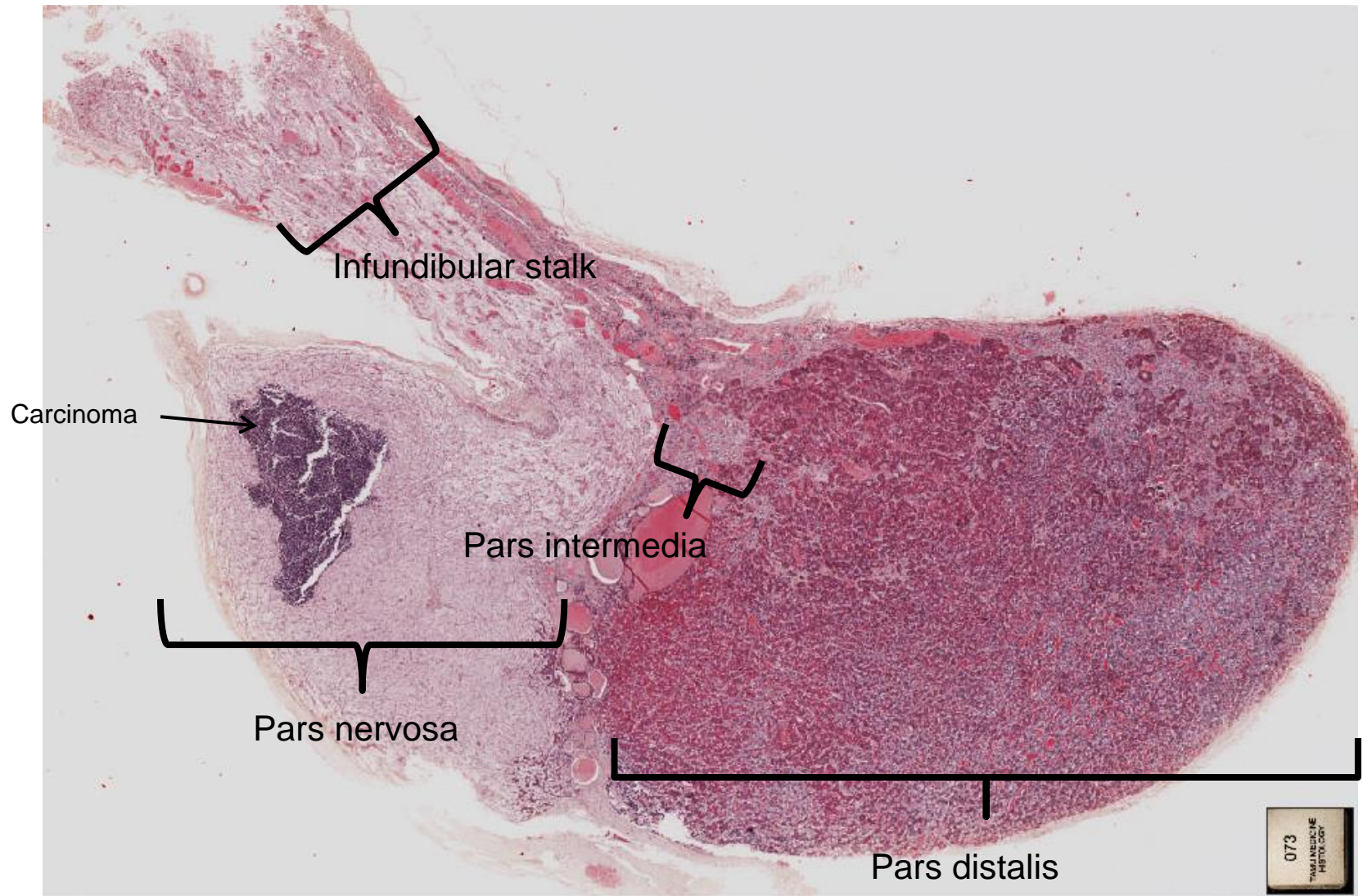


- 7 Vesicles (pars intermedia)
- 8 Follicles (pars intermedia)
- 9 Nerve fibers and pituicytes (pars nervosa)
- 10 Nuclei of pituicytes

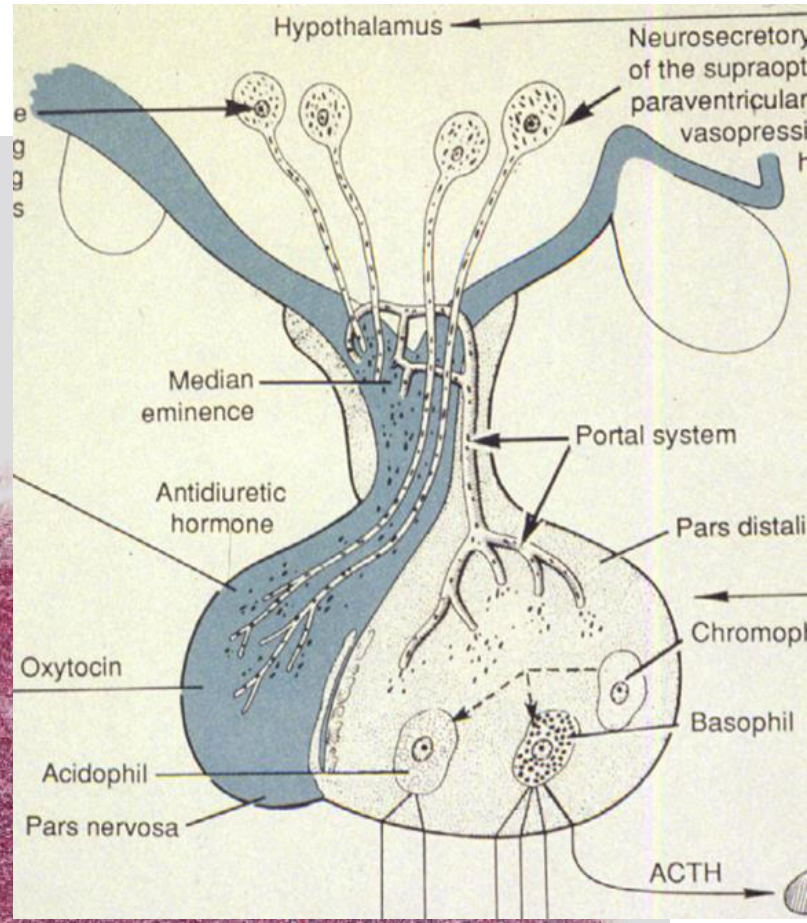
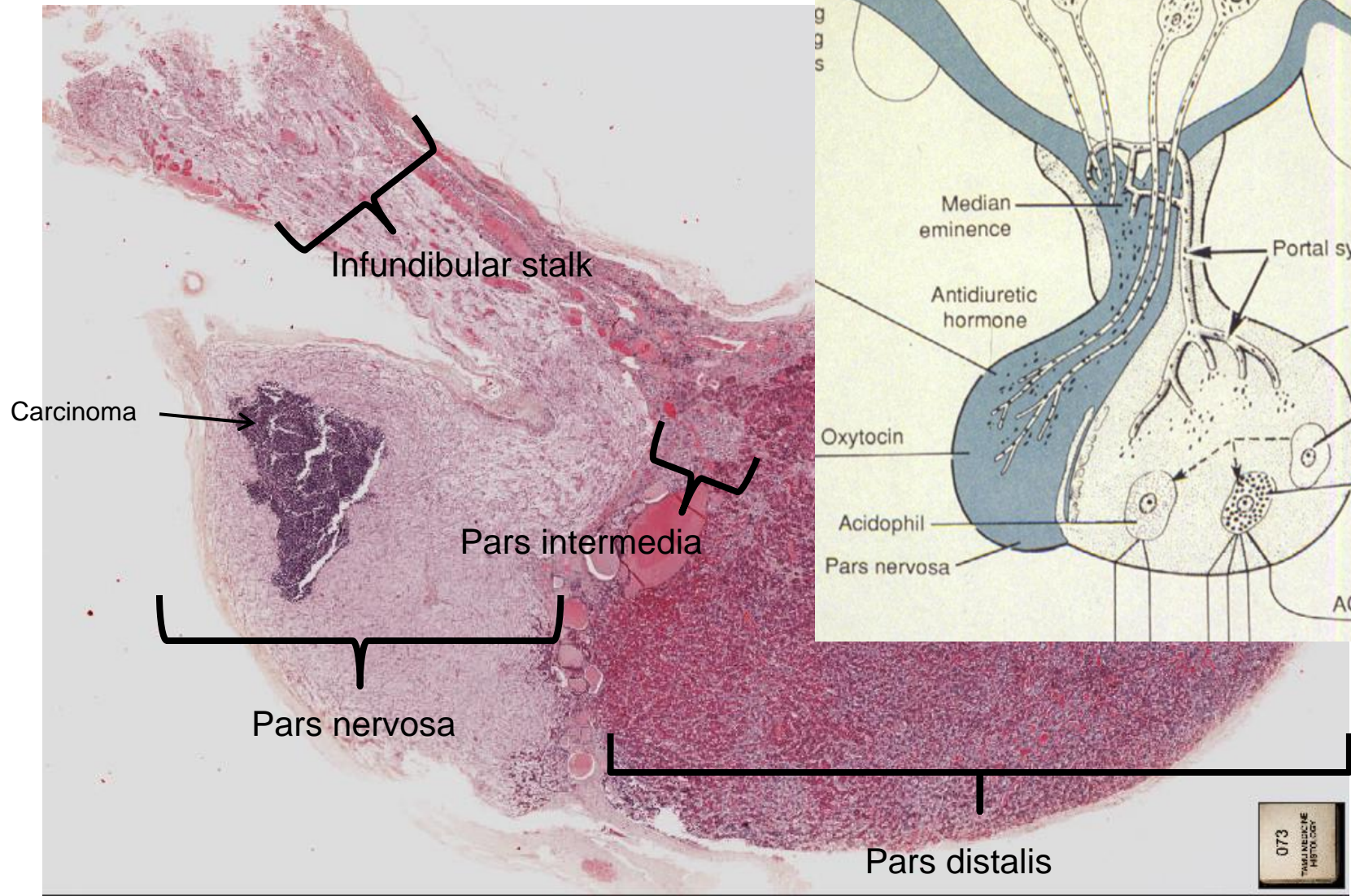
16-2 Hypophysis (sectional view). Stain: hematoxylin-eosin. Medium magnification.



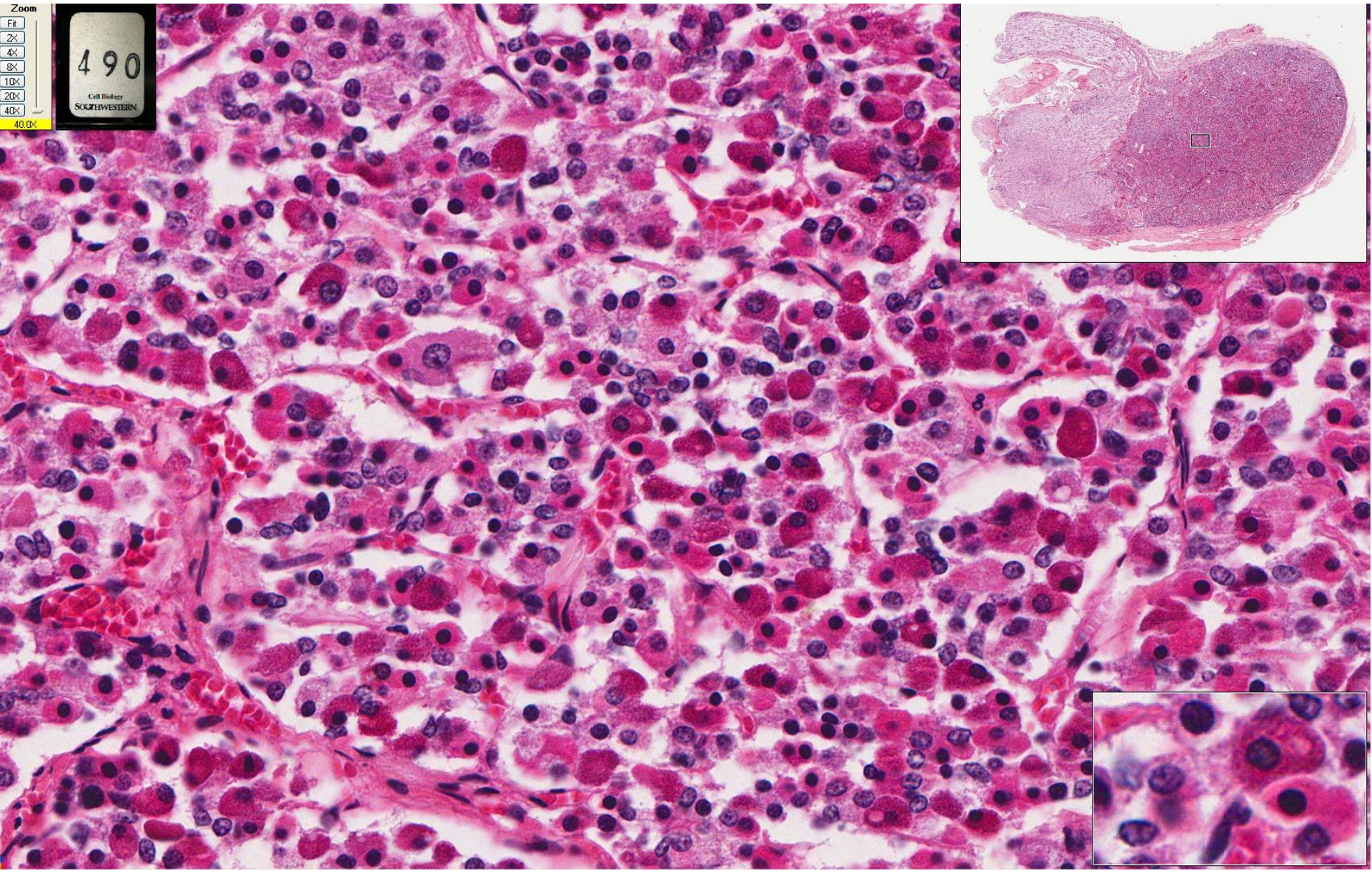
Slide 73: Pituitary (early carcinoma in posterior lobe)



Slide 73: Pituitary (early carcinoma in posterior lobe)

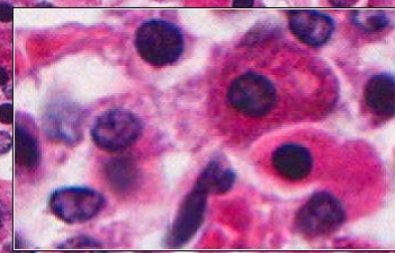
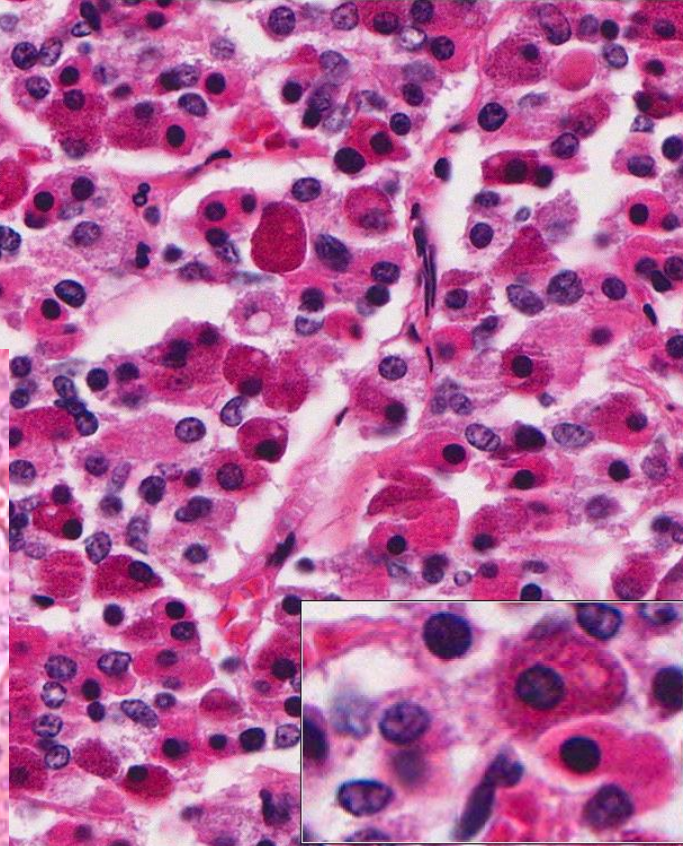
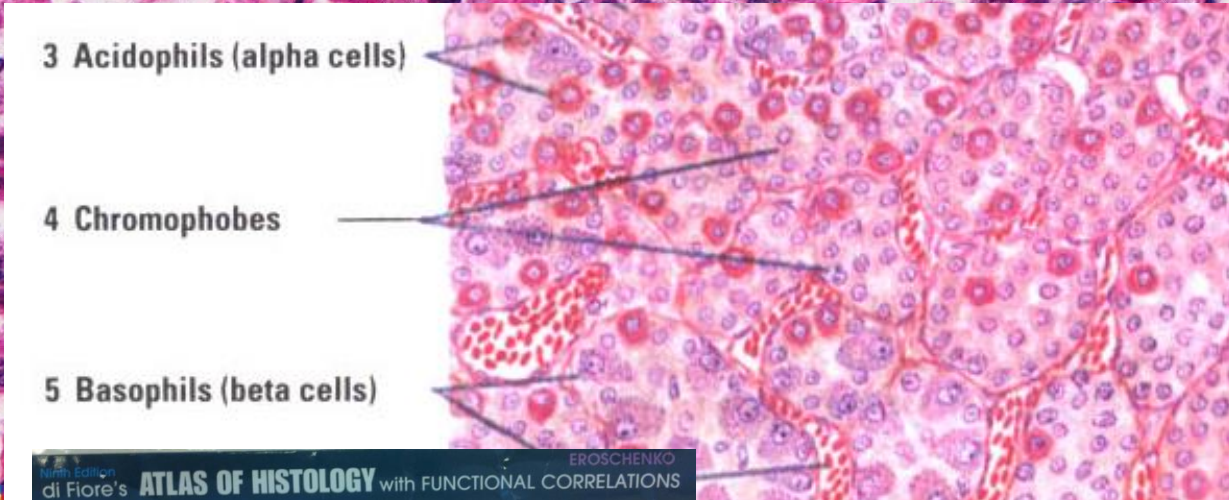
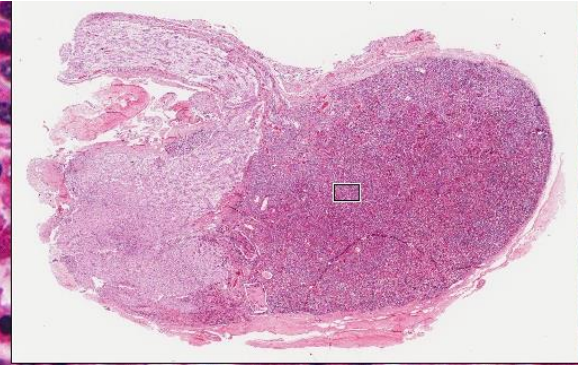
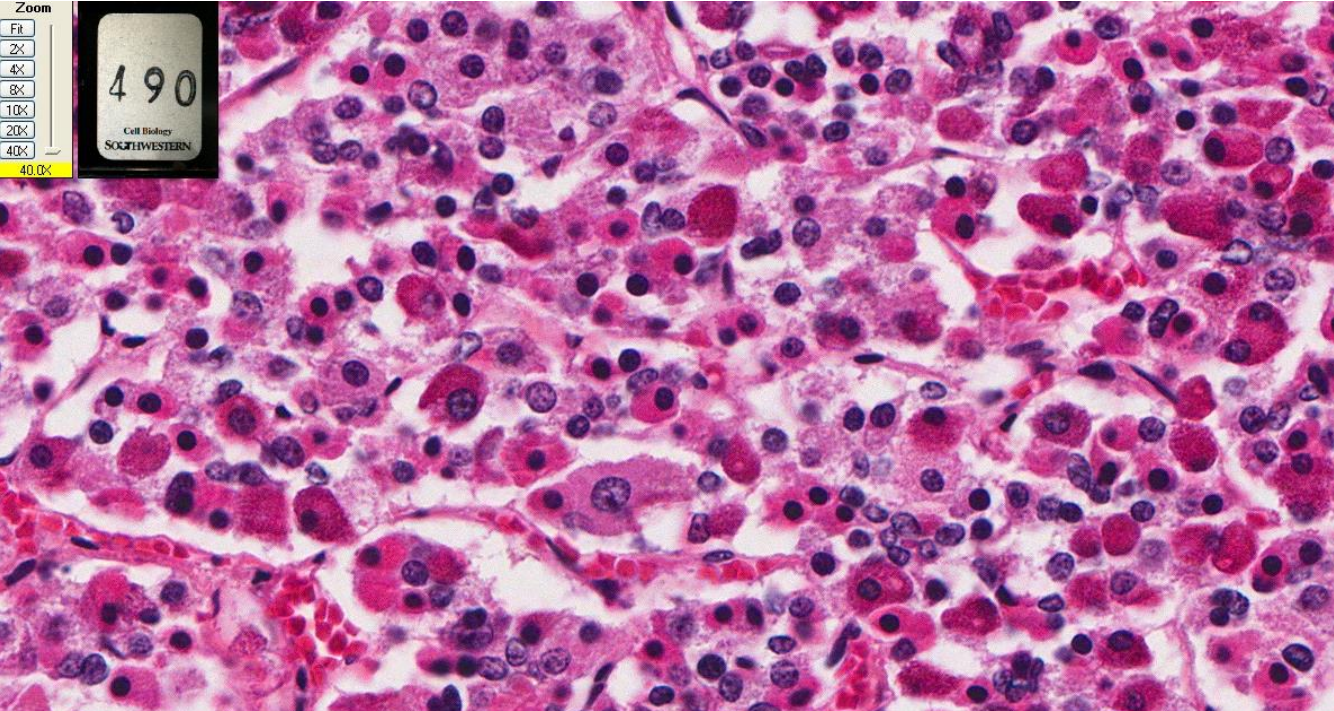


pars distalis of Hypophysis



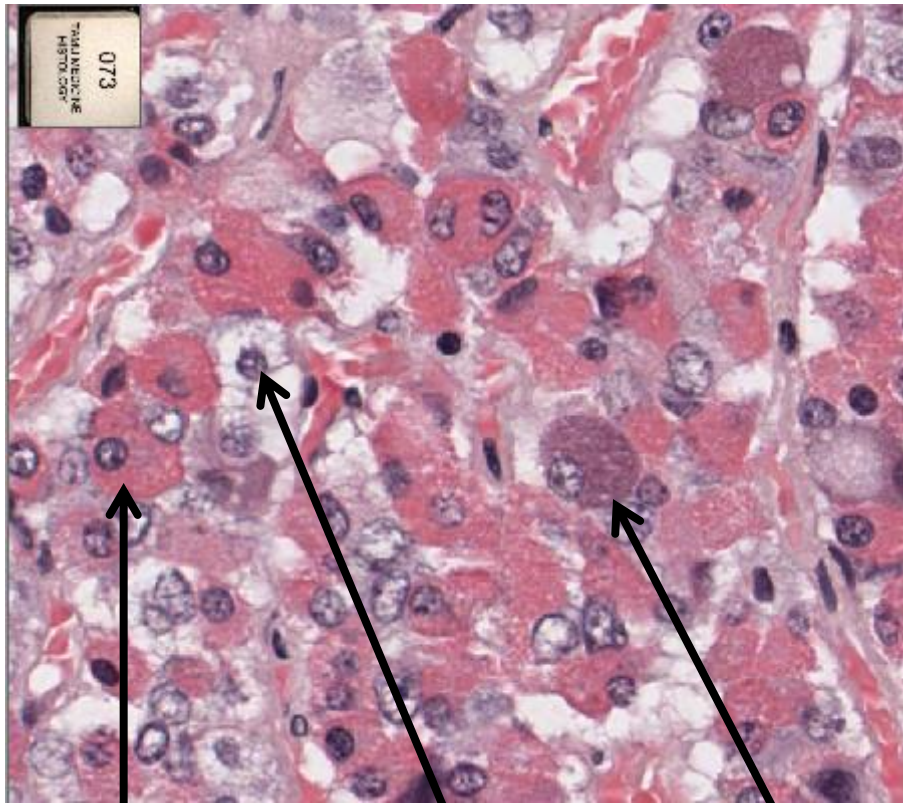
pars distalis of Hypophysis

Zoom
Fit
2x
4x
8x
10x
20x
40x



Slide 73: Pituitary (early carcinoma in posterior lobe)

Pars distalis

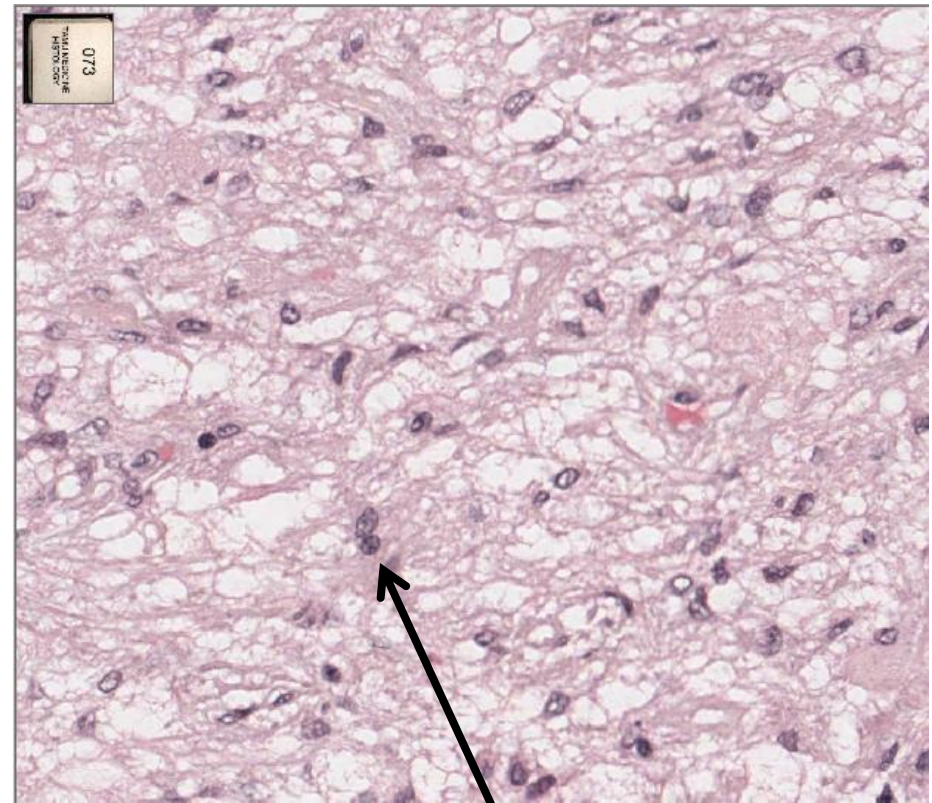


Acidophils

Chromophobes

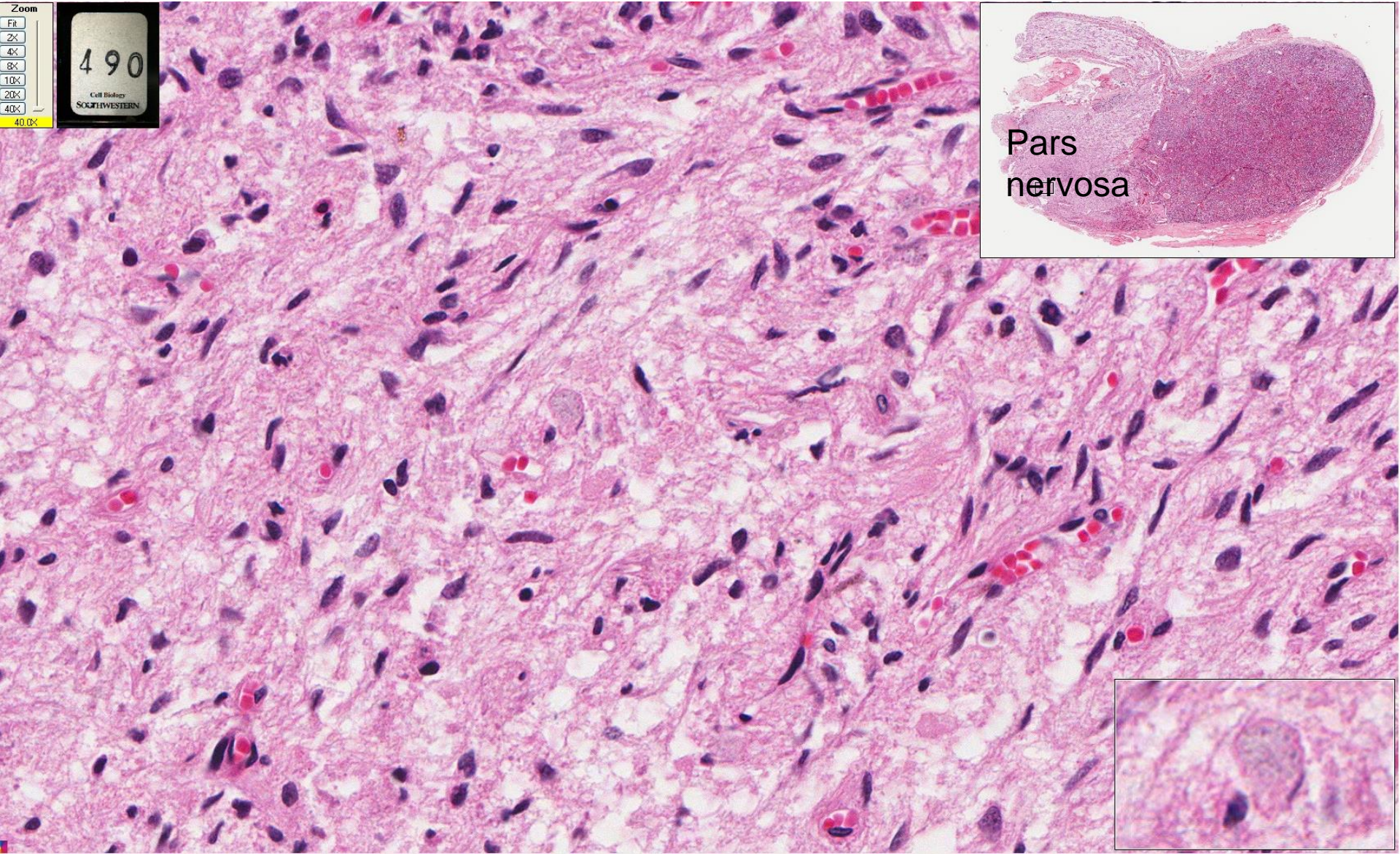
Basophils

Pars nervosa

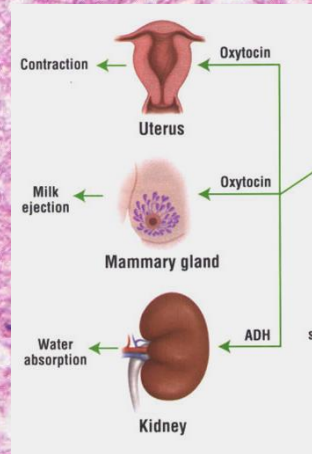
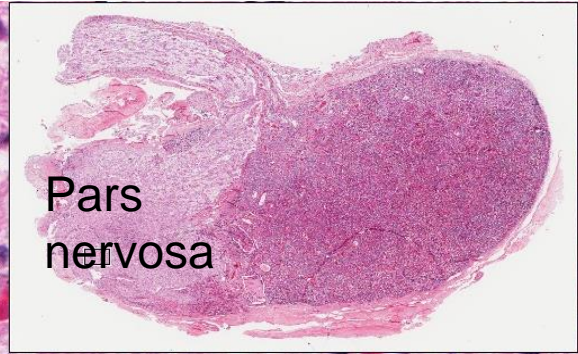
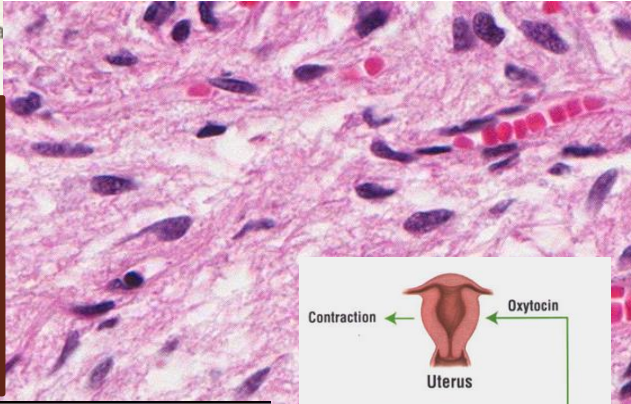
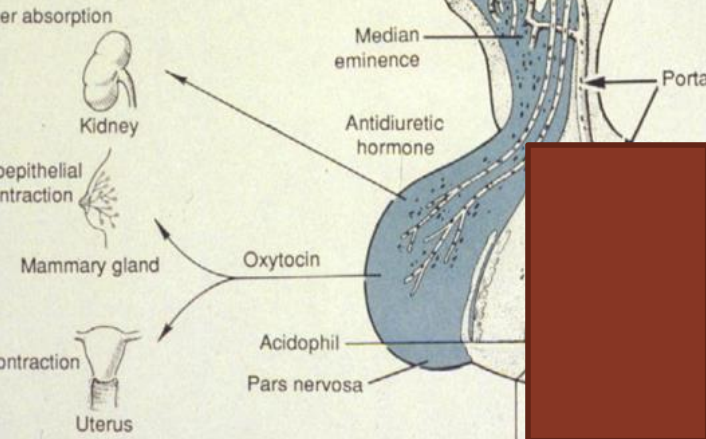


Pituicyte nuclei

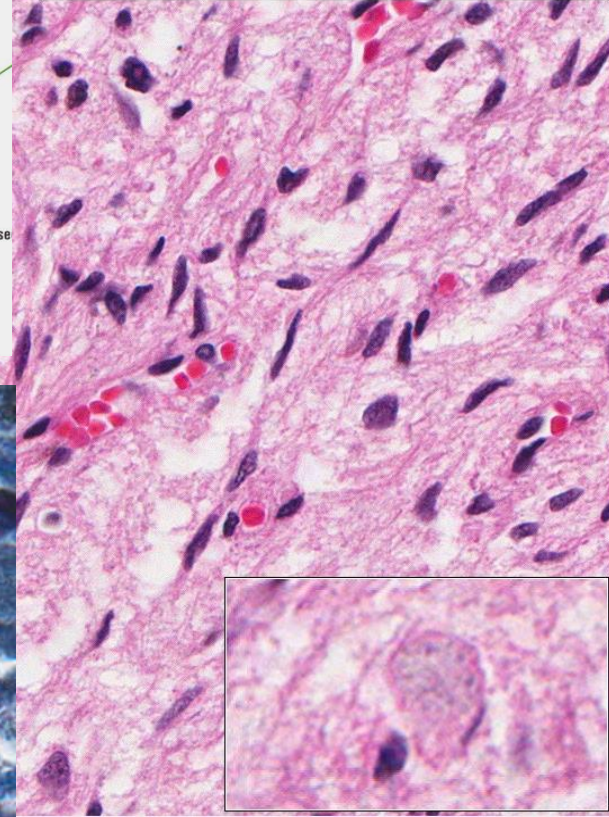
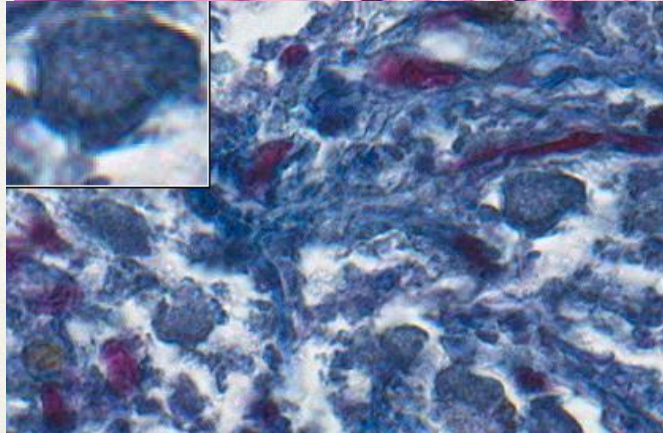
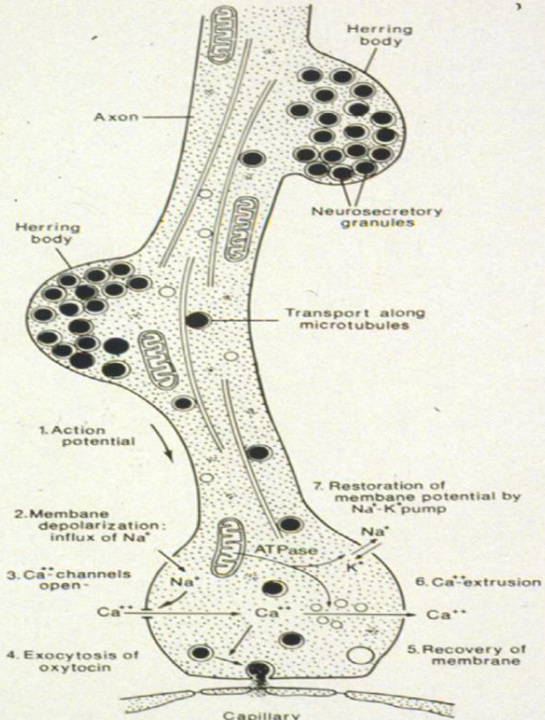
Herring bodies in pars nervosa of Hypophysis



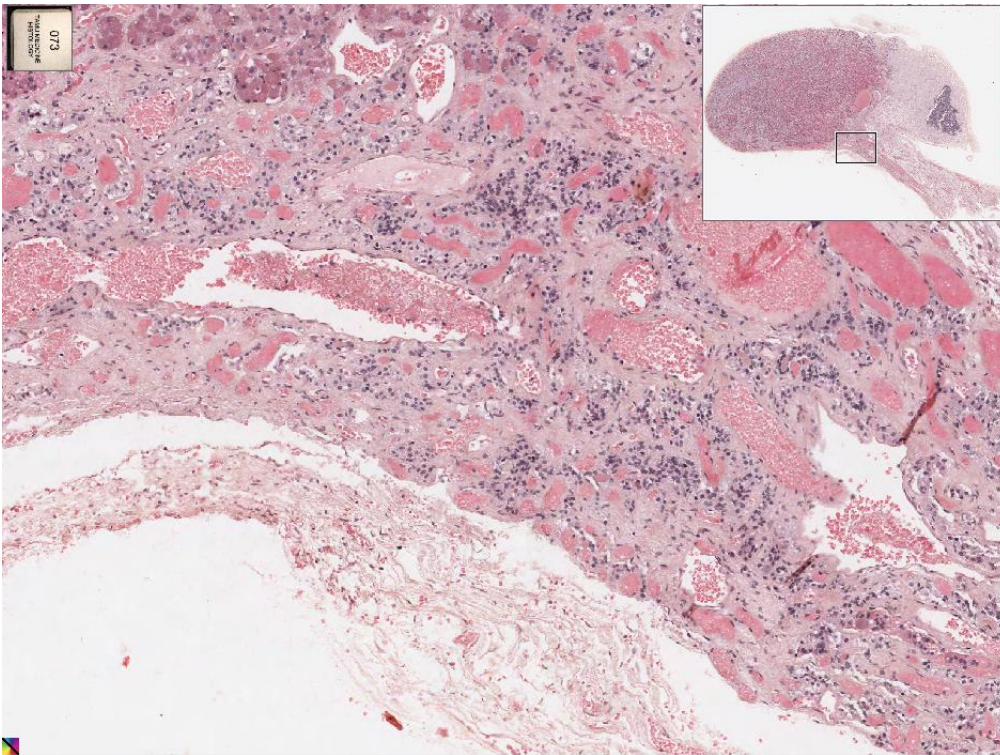
Herring bodies in pars nervosa of Hypophysis



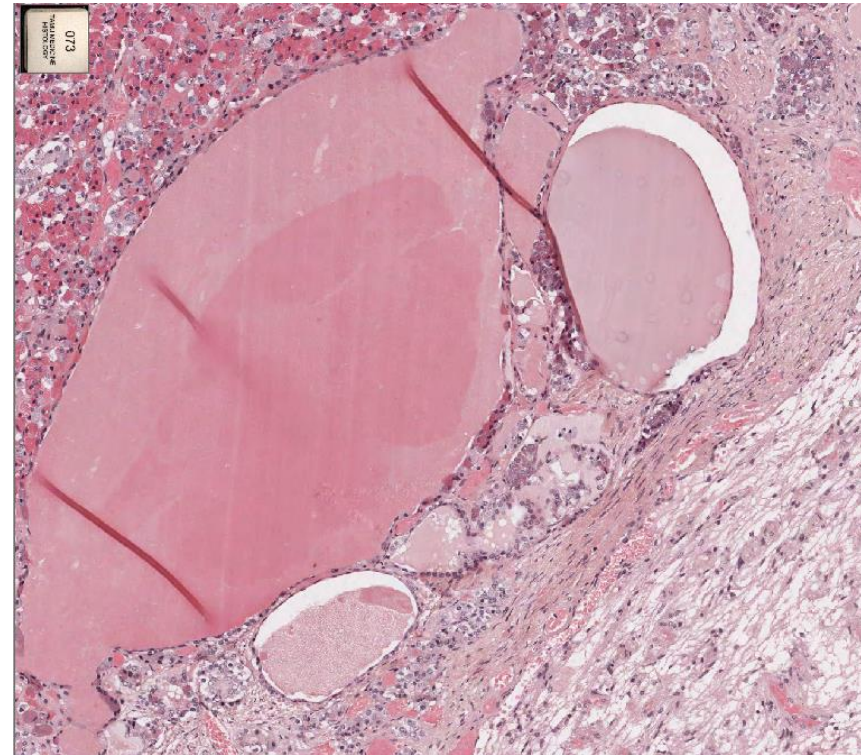
486 • HYPOPHYSIS



Slide 74: Pituitary (early carcinoma in posterior lobe)

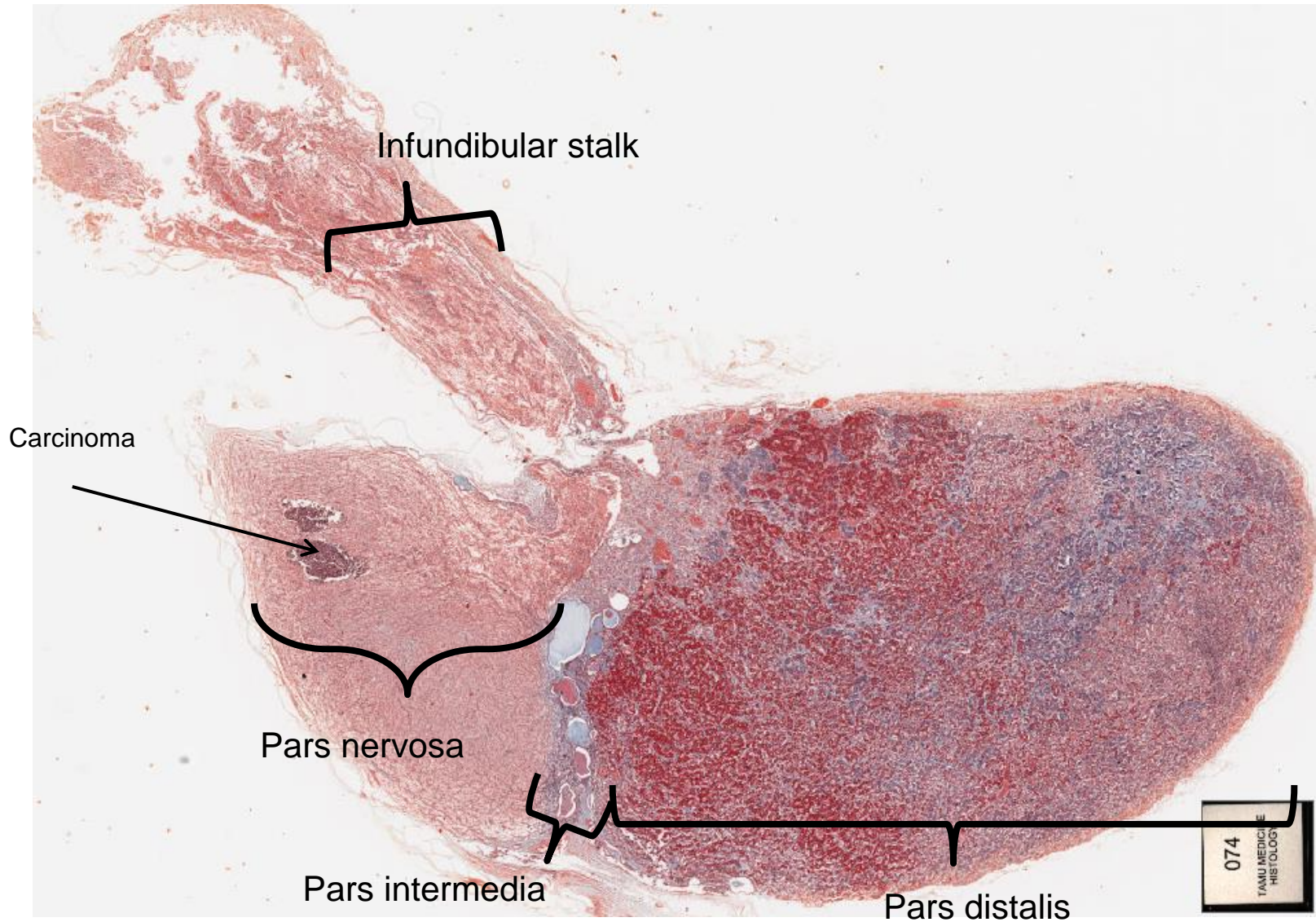


Pars tuberalis



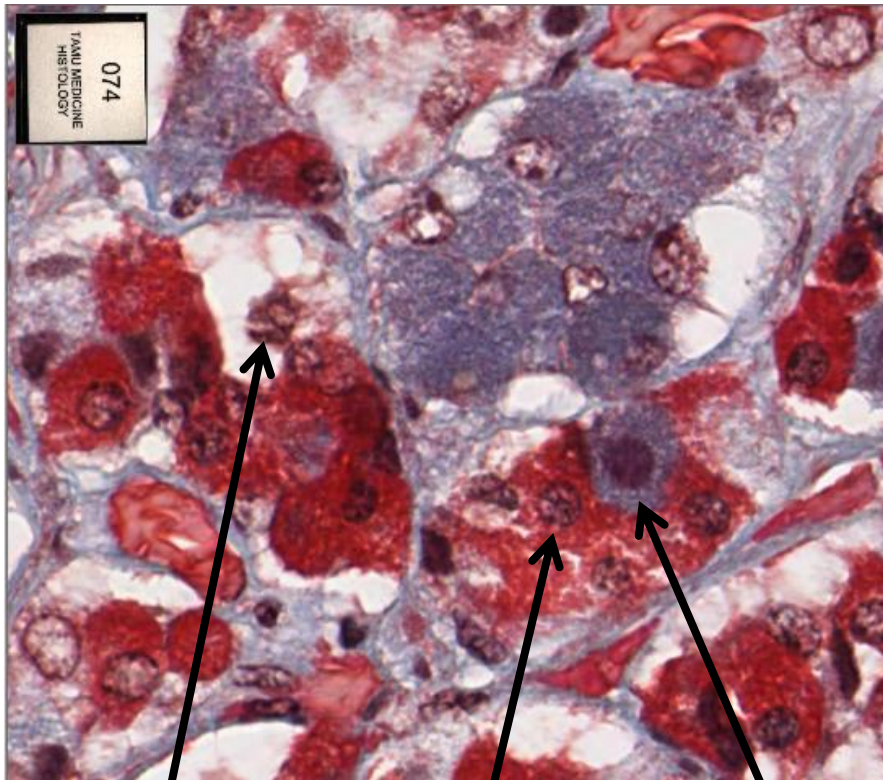
Pars intermedia with
Rathke's cysts

Slide 74: Pituitary (Masson's trichrome)



Slide 74: Pituitary (early carcinoma in posterior lobe)

Pars distalis

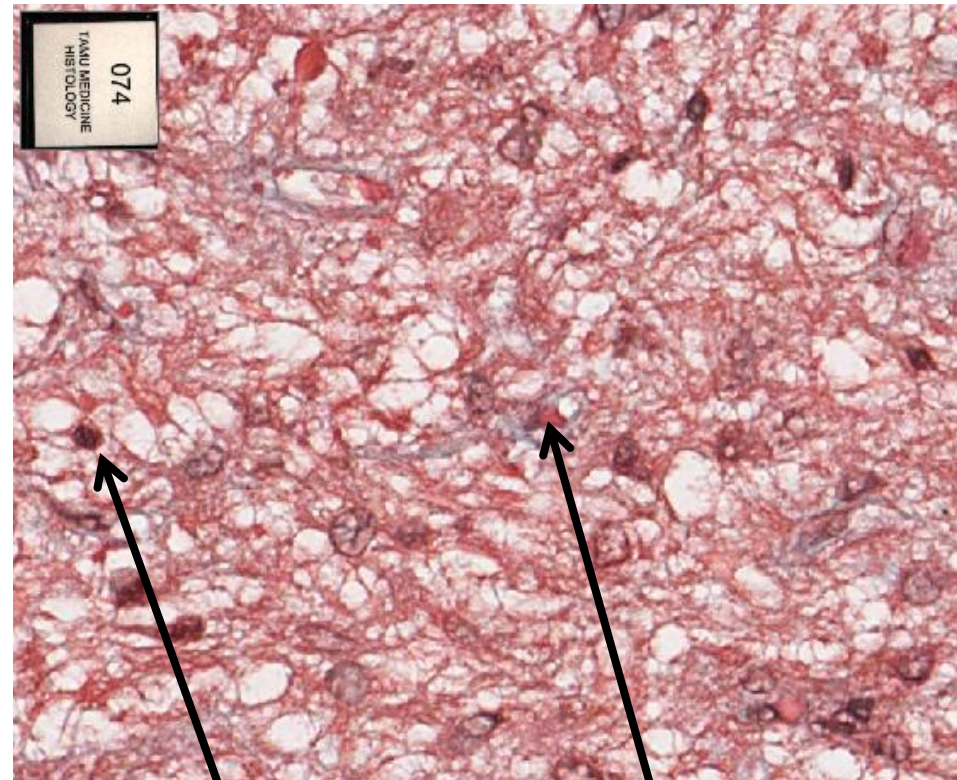


Chromophobes

Acidophils

Basophil

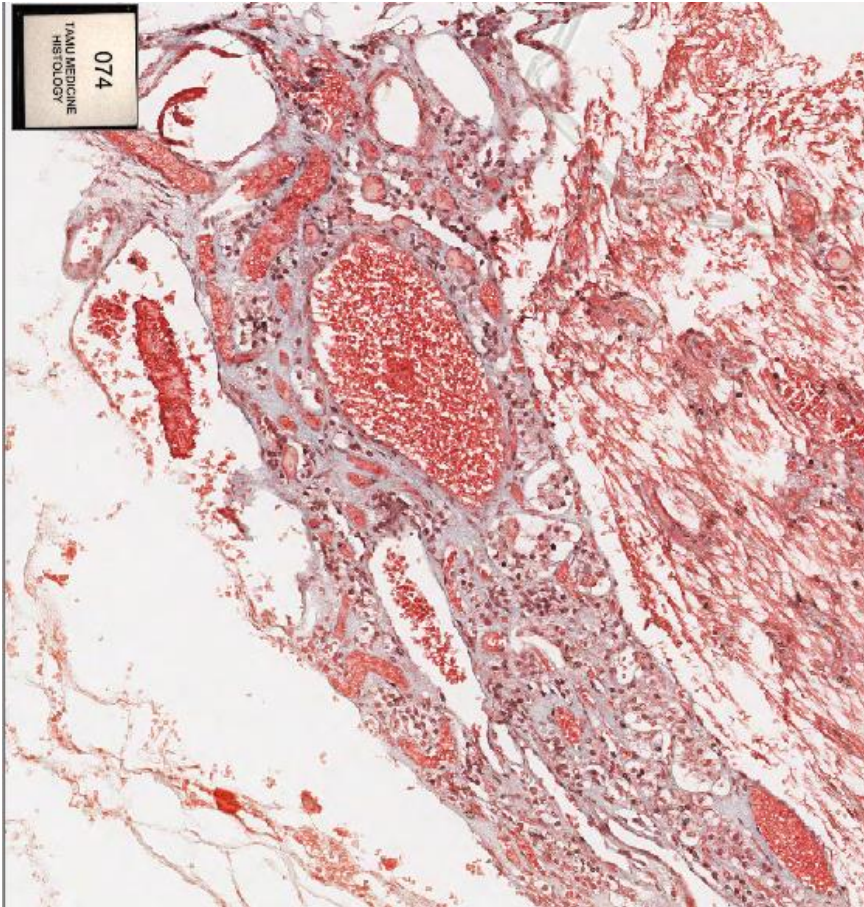
Pars nervosa



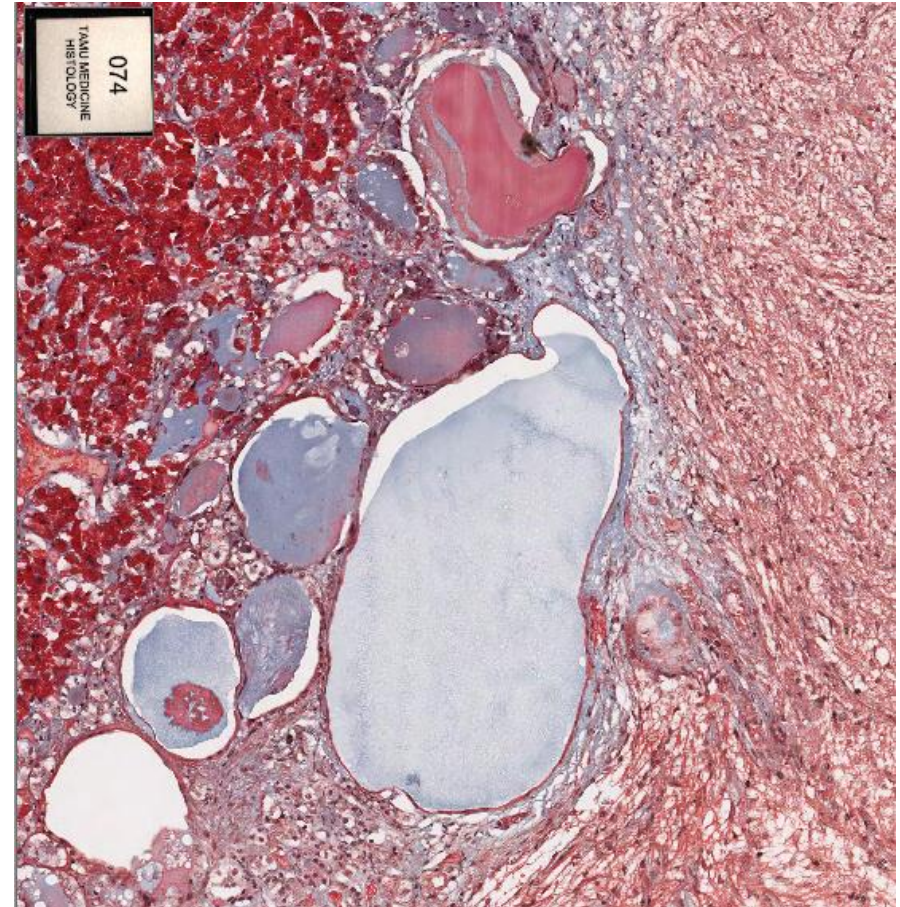
Pituicyte nuclei

Herring body

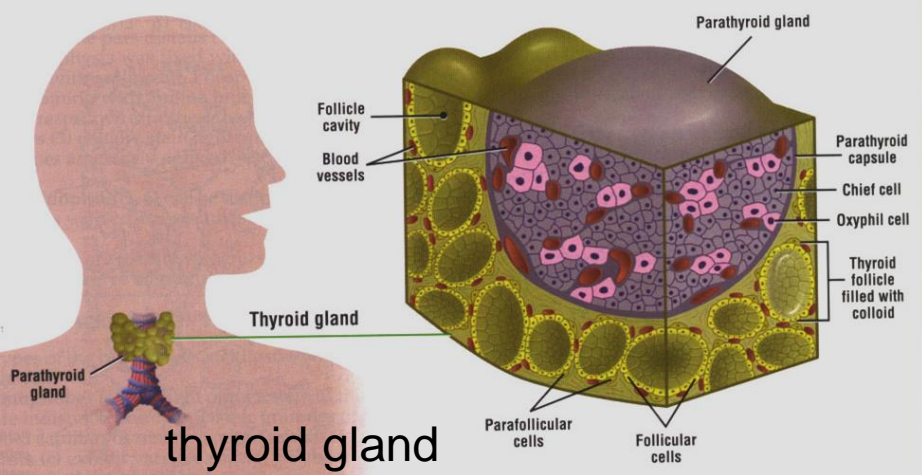
Slide 74: Pituitary (early carcinoma in posterior lobe)



Pars tuberalis



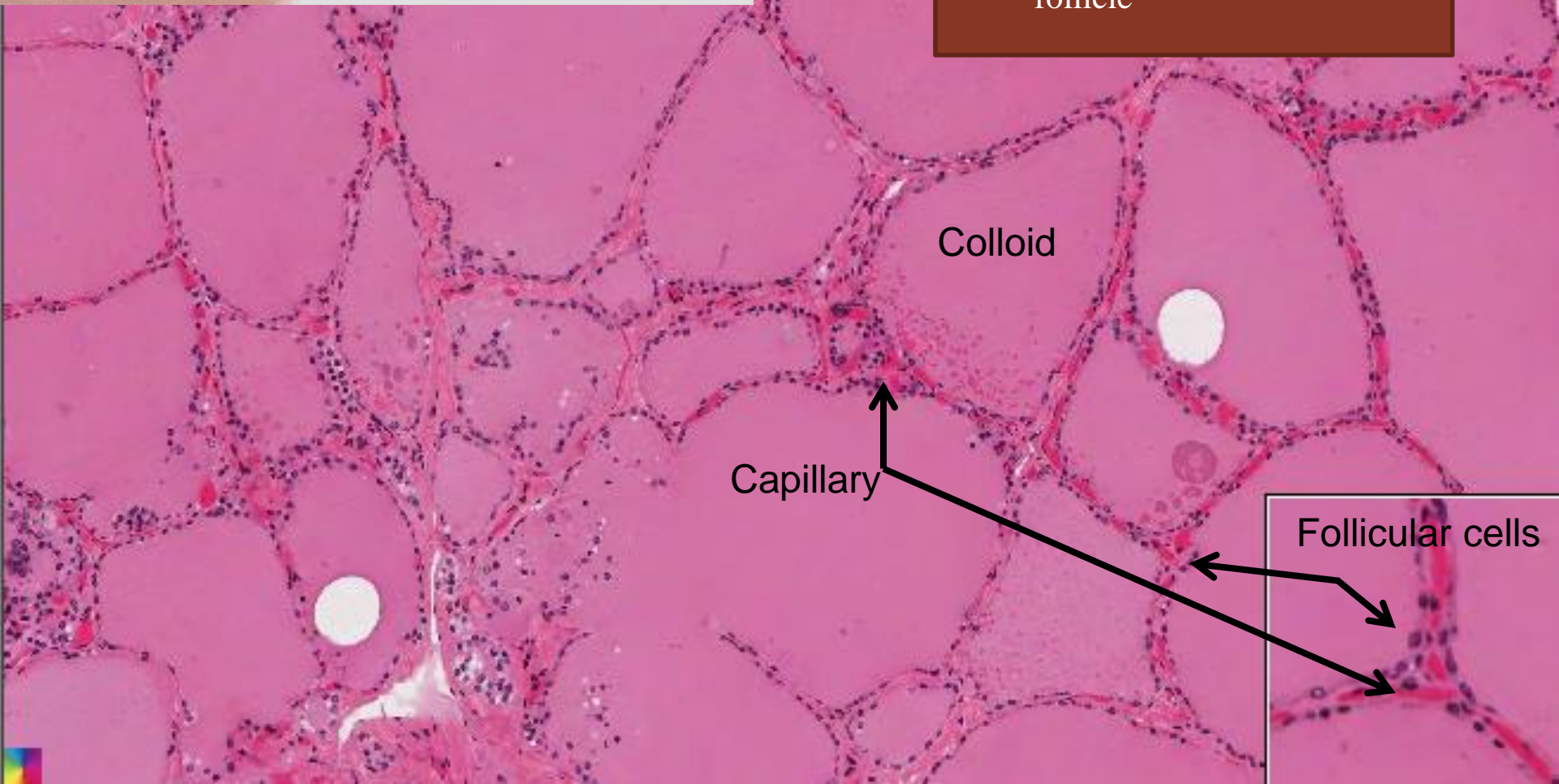
Pars intermedia with
Rathke's cysts

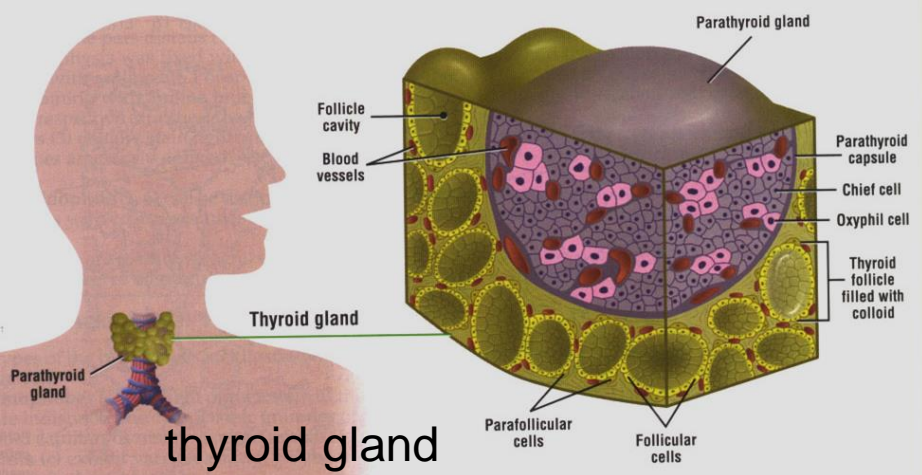


Thyroid gland

Follicle – no outlet

1. Colloid
2. Follicular cells
3. Capillaries in CT around follicle





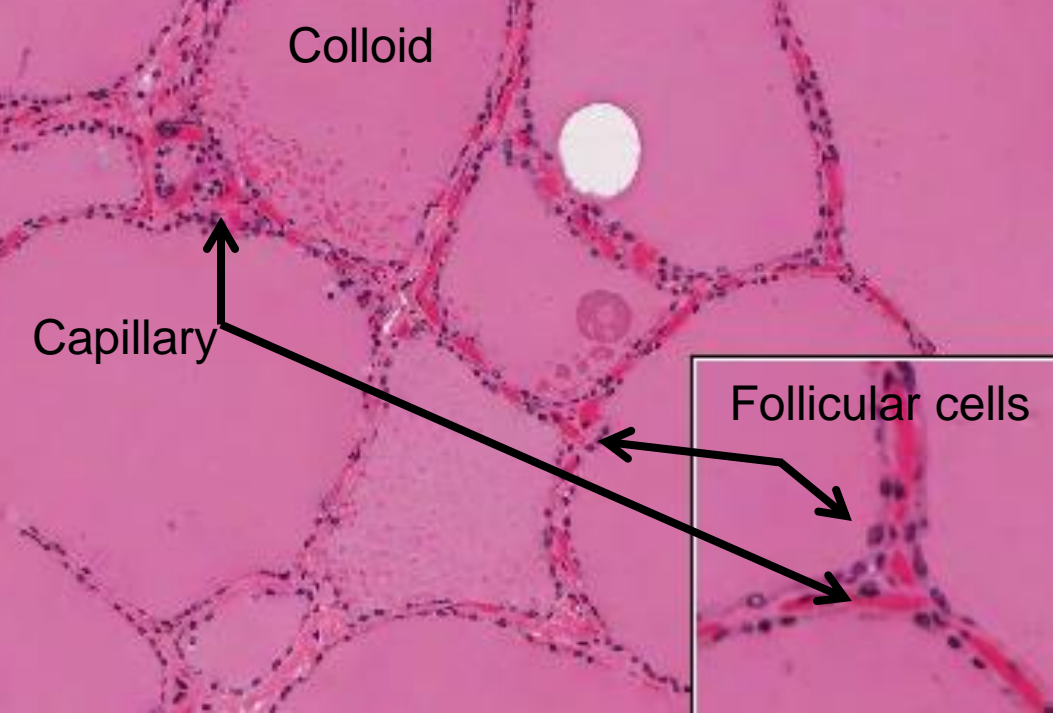
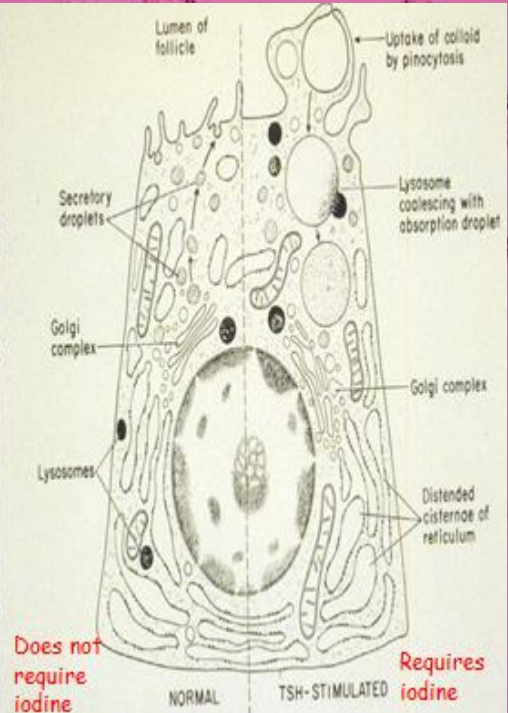
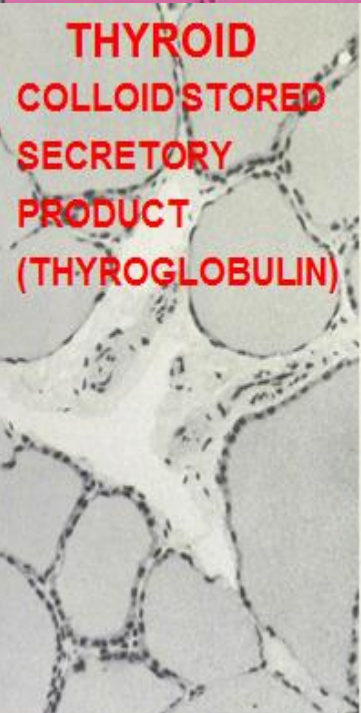
Thyroid gland

Follicle – no outlet

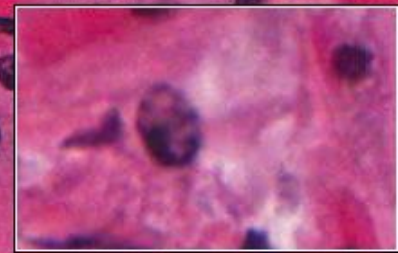
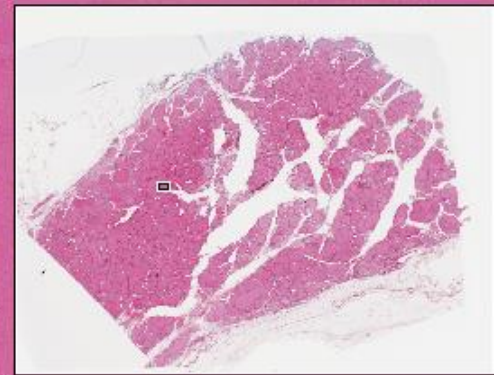
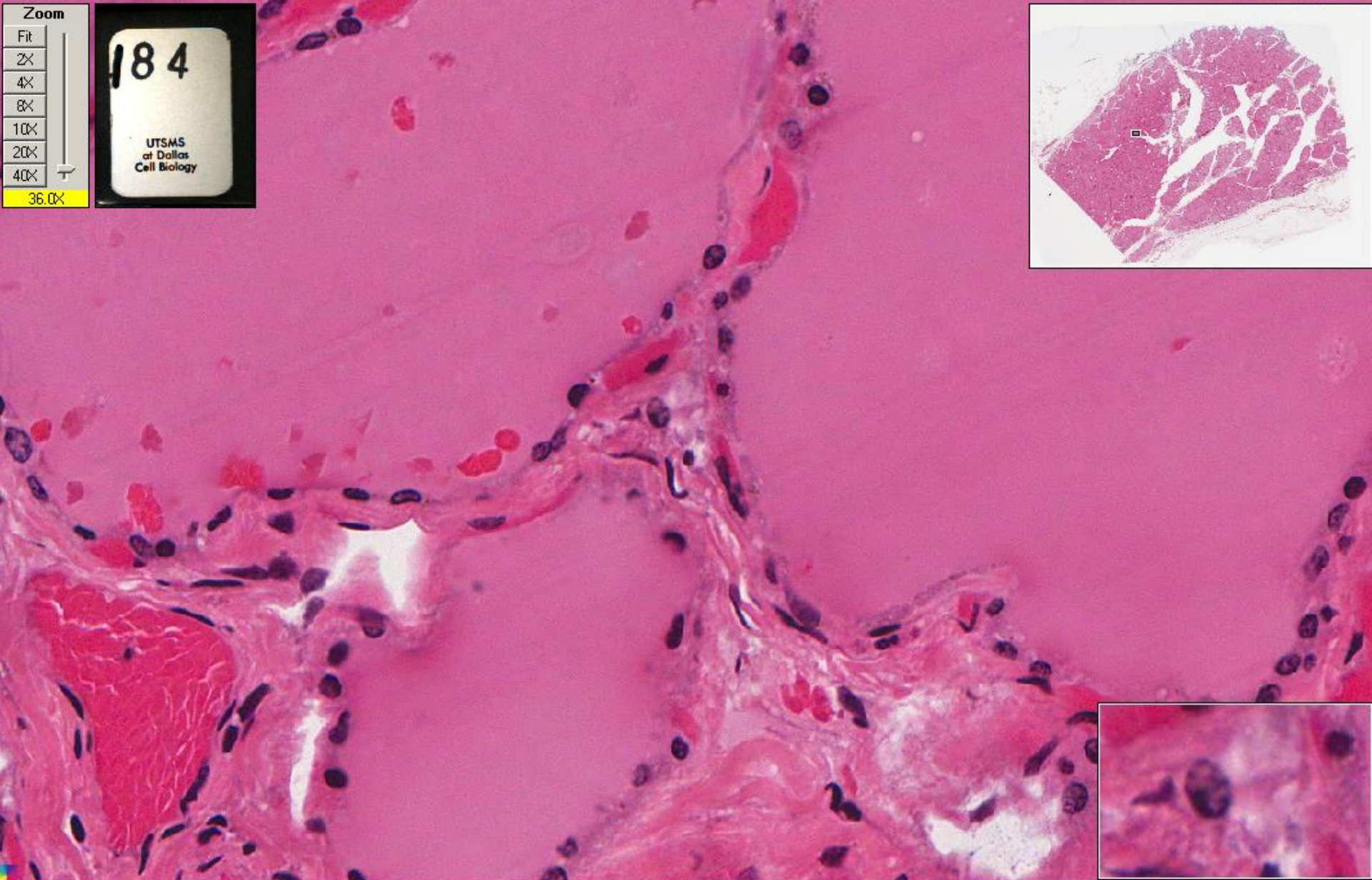
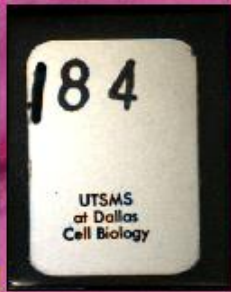
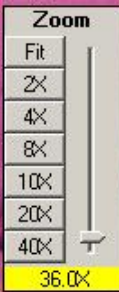
1. Colloid
2. Follicular cells
3. Capillaries in CT around follicle



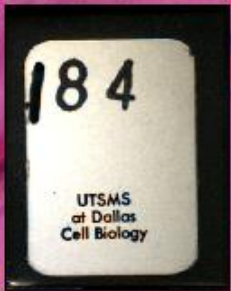
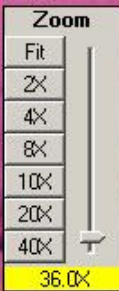
THYROID COLLOID STORED SECRETORY PRODUCT (THYROGLOBULIN)



Thyroid –parafollicular cells



Thyroid –parafollicular cells

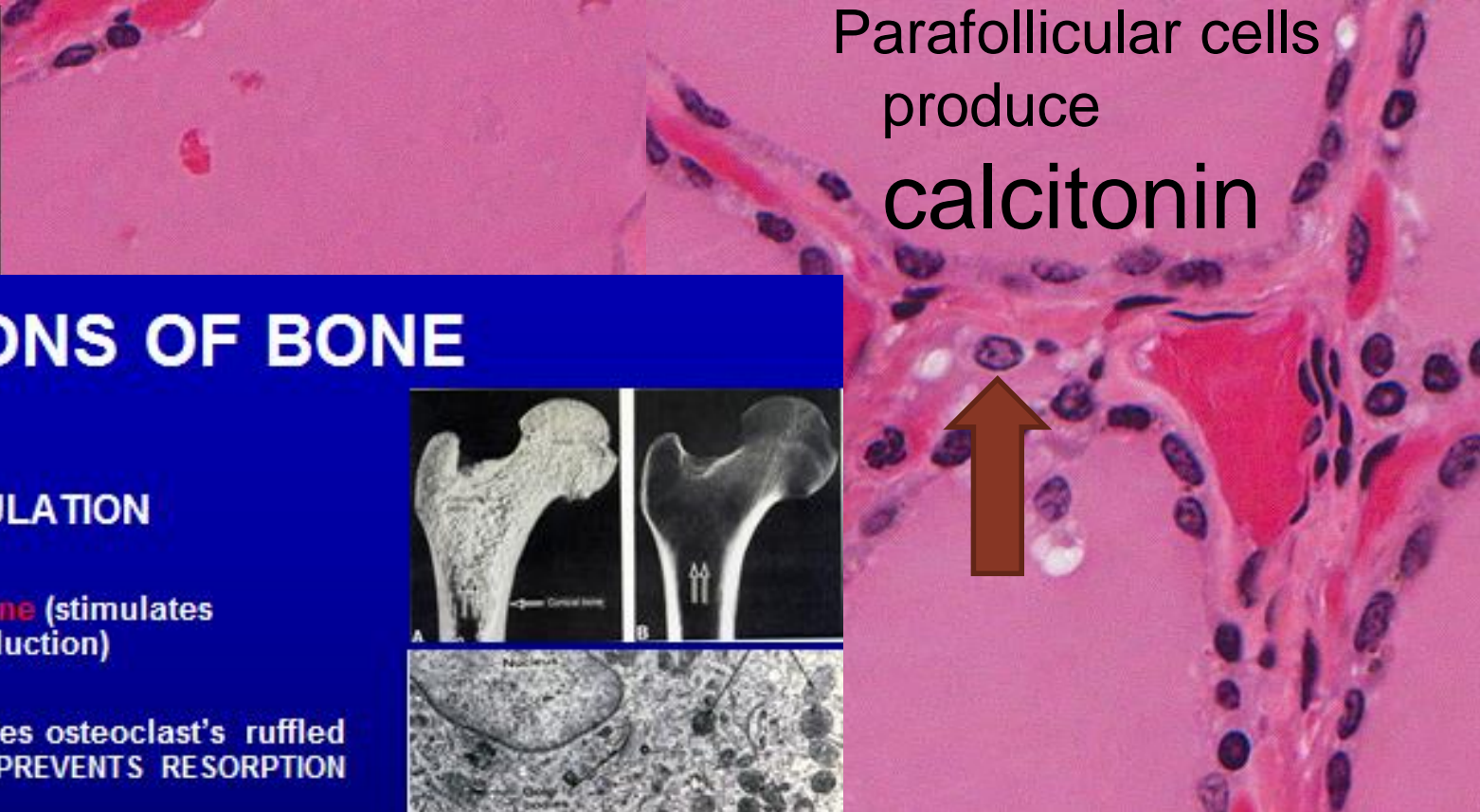
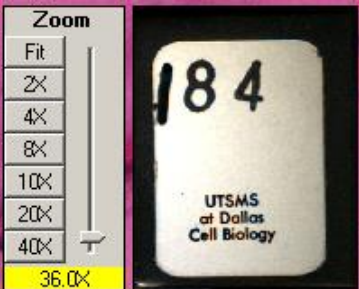


Parafollicular cells
produce
calcitonin



Thyroid –parafollicular cells

Parafollicular cells
produce
calcitonin



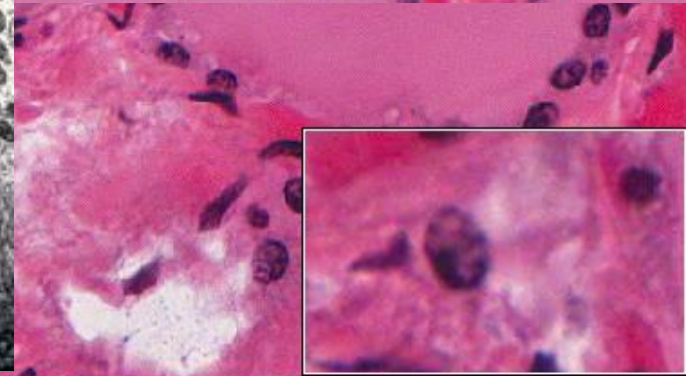
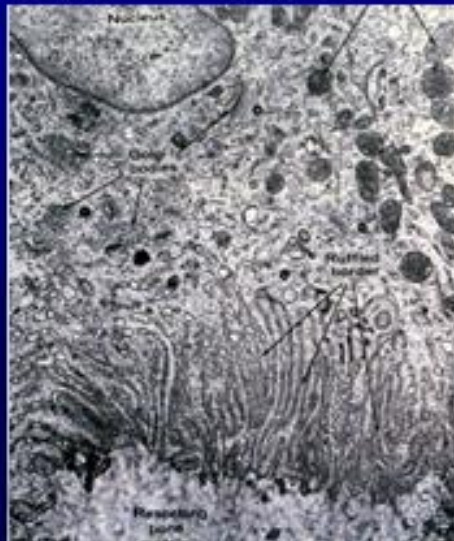
FUNCTIONS OF BONE

CALCIUM REGULATION

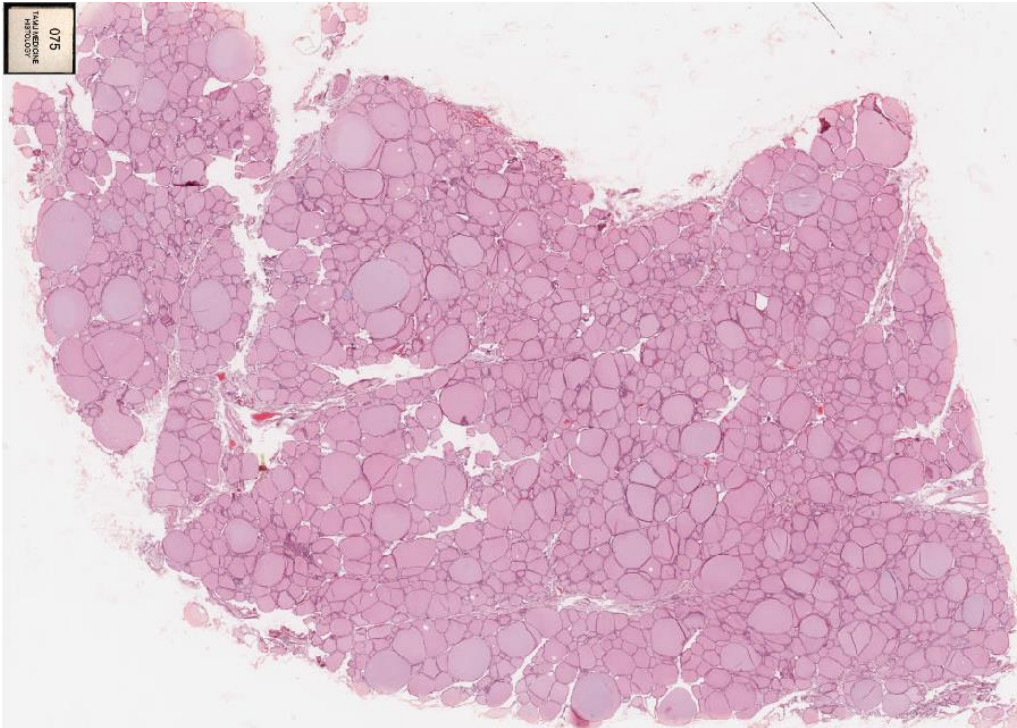
Parathroid hormone (stimulates osteoclast production)

Calcitonin (removes osteoclast's ruffled border which PREVENTS RESORPTION)

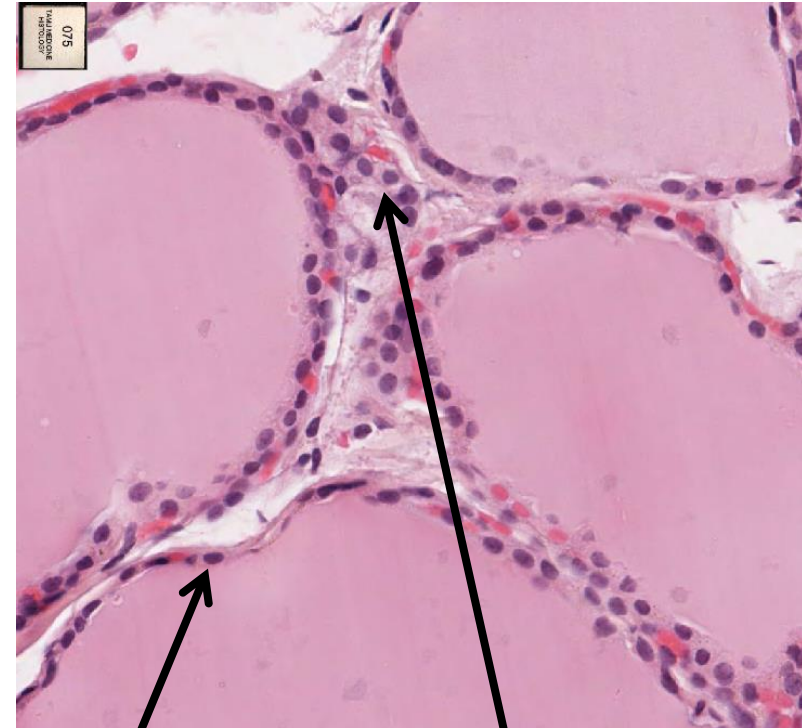
Remember that these HORMONES are INVOLVED IN TIGHT REGULATION of free Ca^{++} as 1/4 OF FREE Ca^{++} IN BLOOD IS EXCHANGED EACH MINUTE.



Slide 75: Thyroid gland



Thyroid gland has many colloid-filled follicles. Thyroid hormones increase the number and size of mitochondria and stimulate mitochondrial protein synthesis, helping to enhance carbohydrate metabolism in cells.



Follicular cells

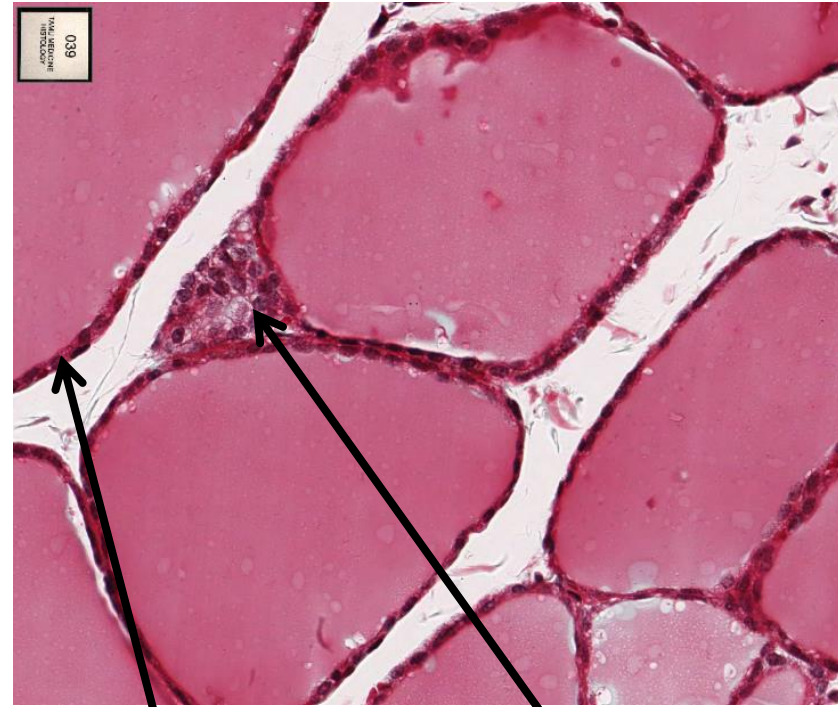
Parafollicular cells

Secrete calcitonin –
reduced blood calcium
concentrations

Slide 39: Thyroid gland

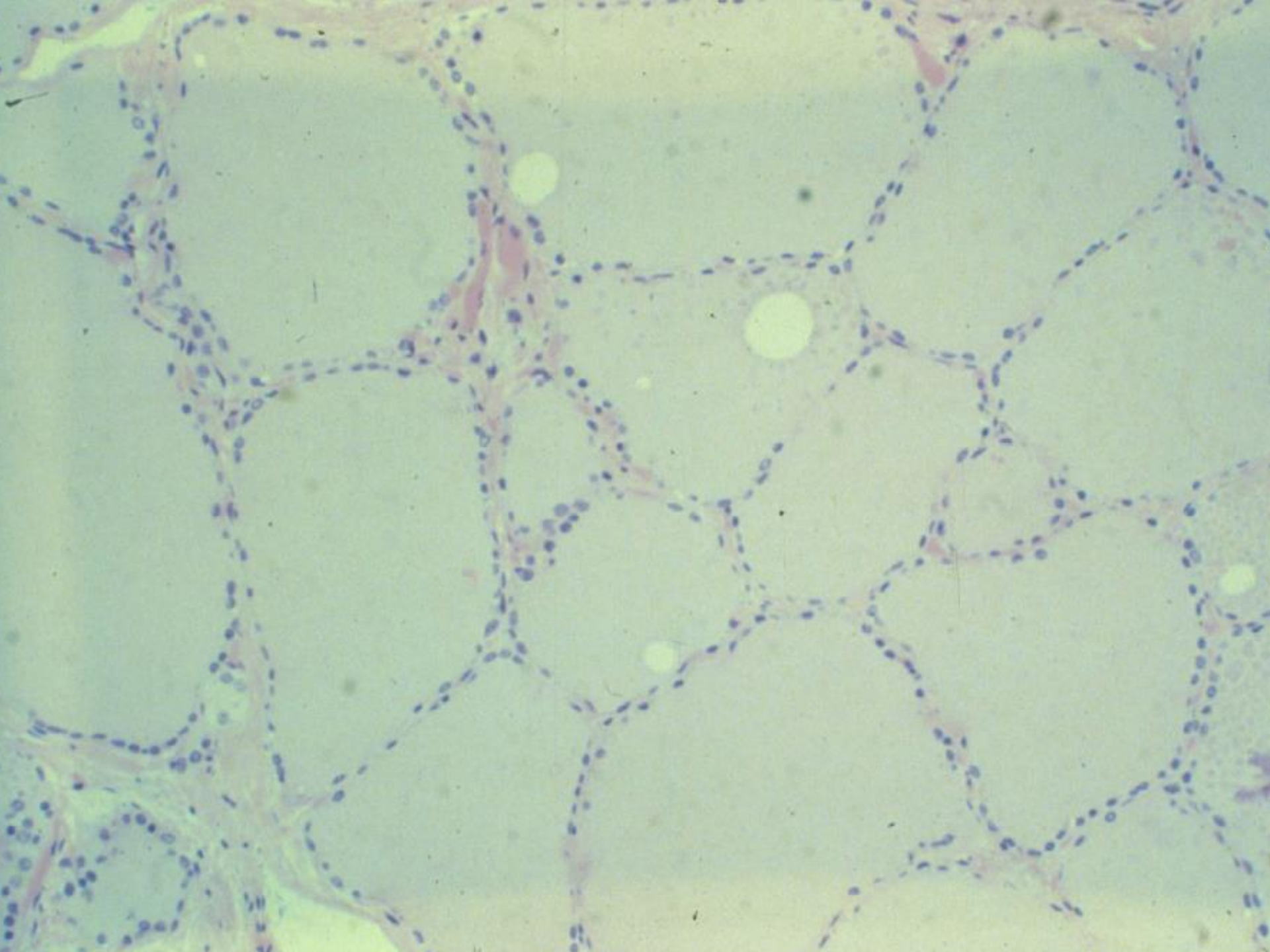


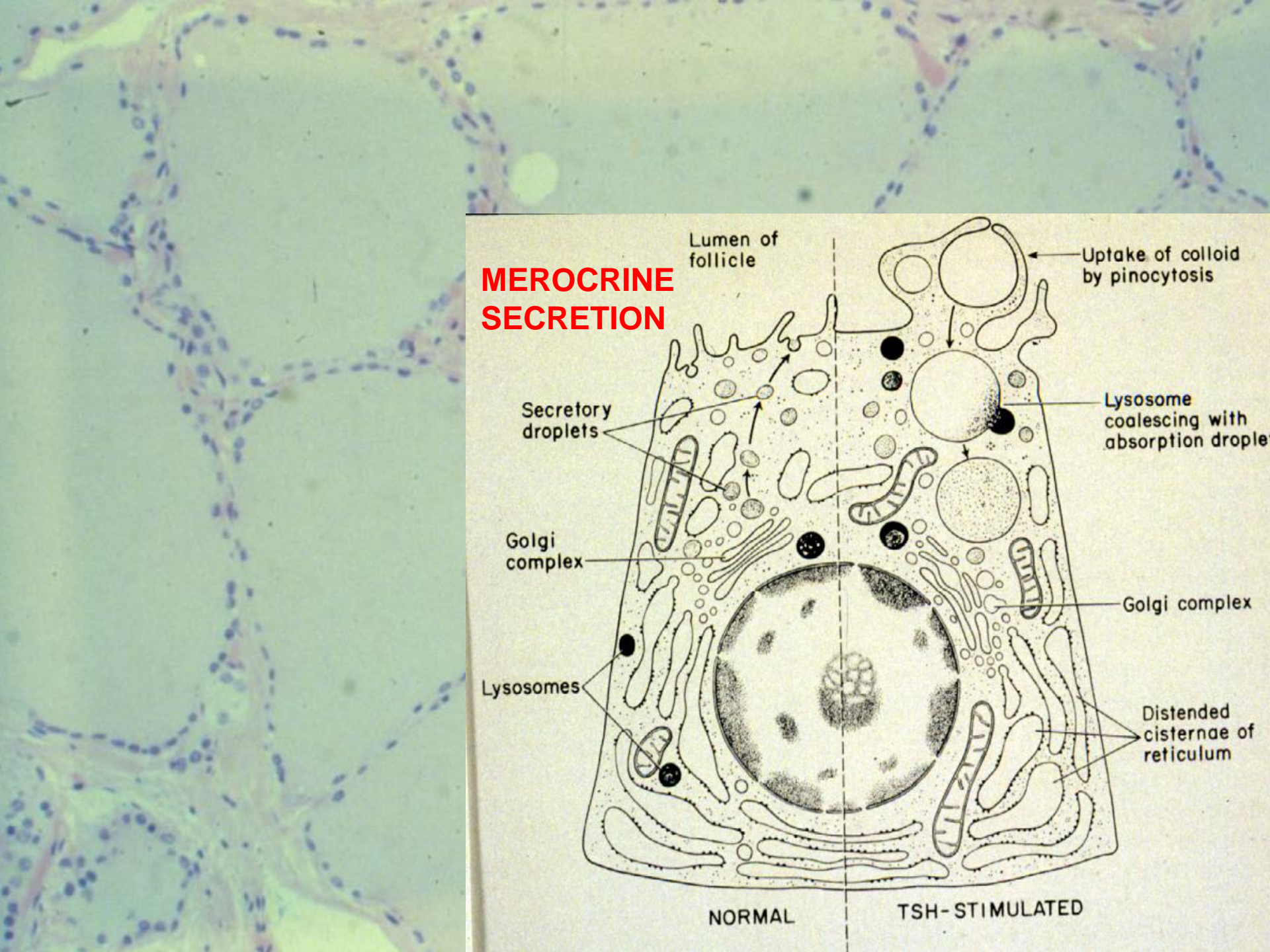
Thyroid gland with many colloid filled follicles



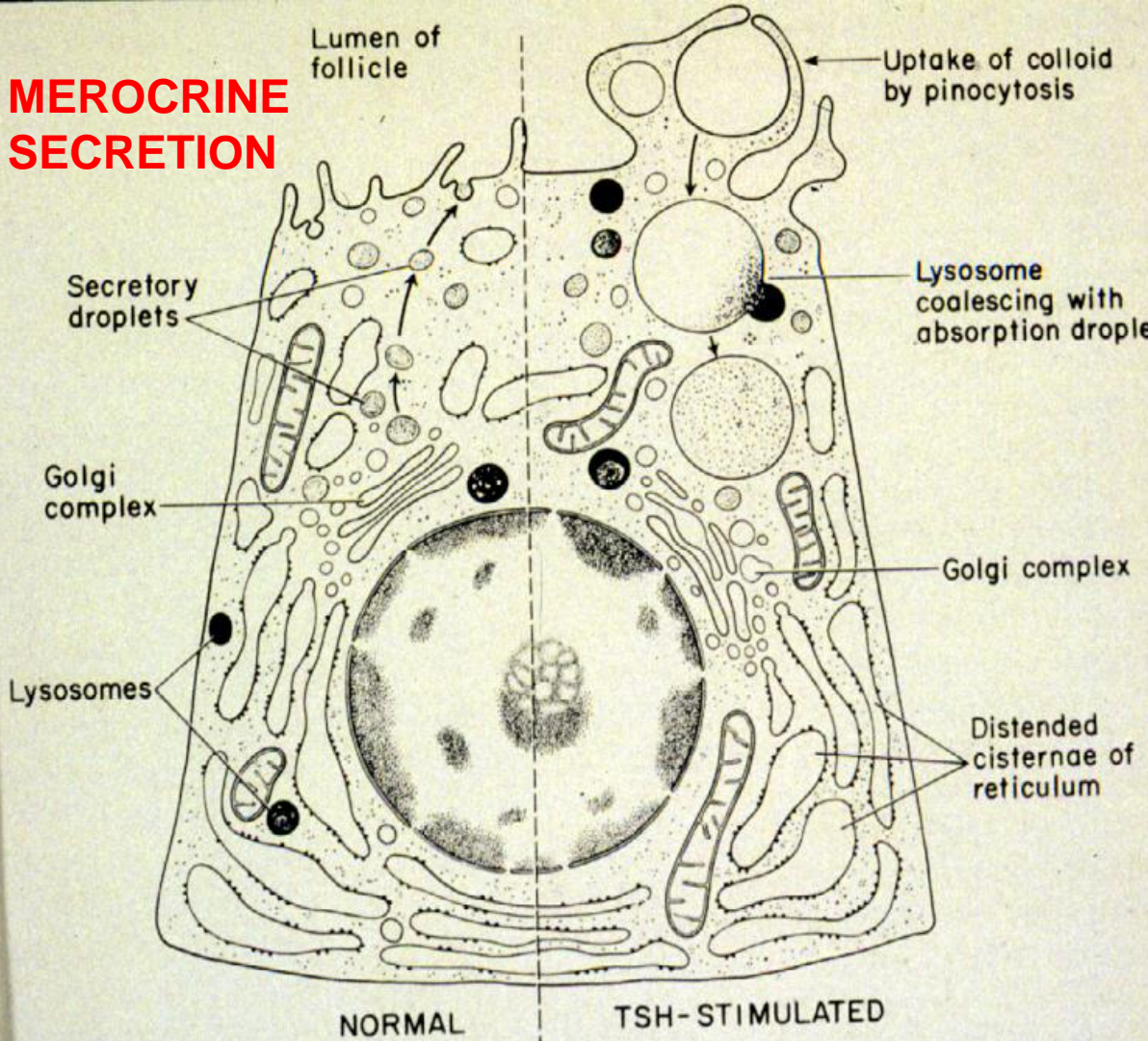
Follicular cells

Parafollicular cells





MEROCRINE SECRETION



Thyroid gland diseases

Goiter - accumulation of thyroglobulin with iodine deficiency

Graves disease -
hyperthyroidism
IgG immunoglobulin
with long-acting thyroid

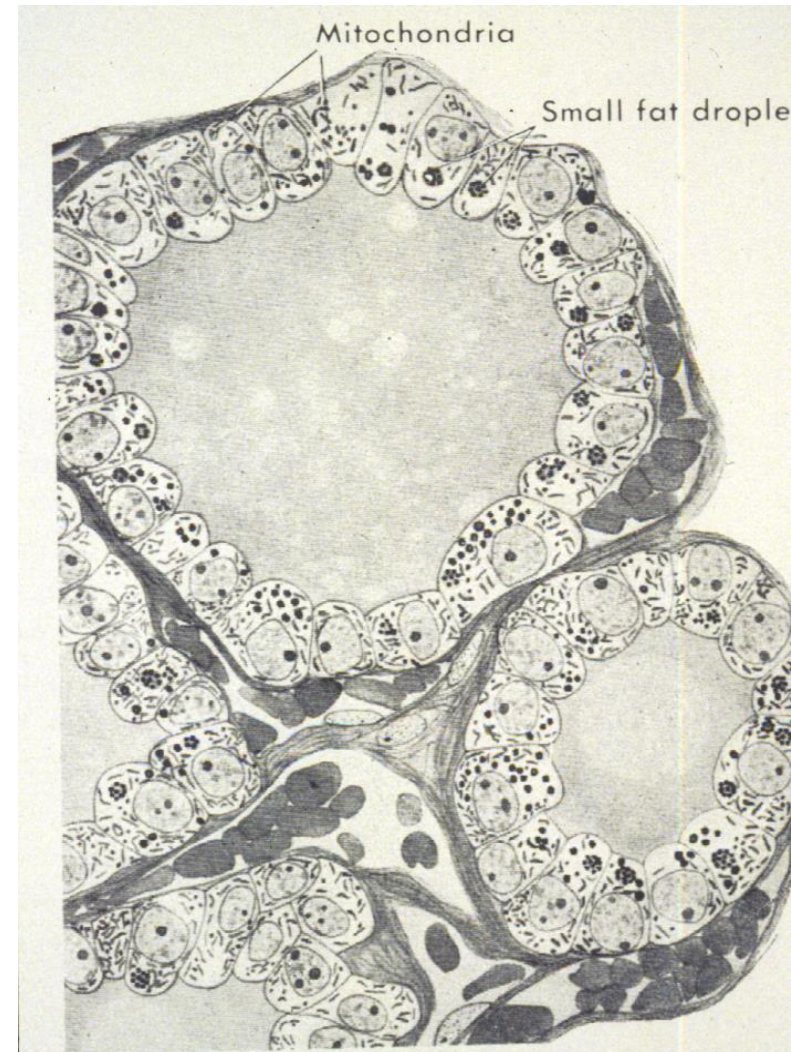


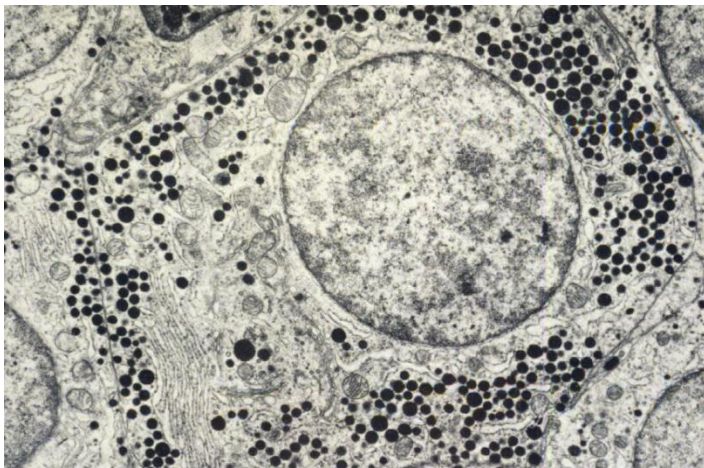
Figure 18-4. Section through several follicles of human thyroid gland. (Courtesy of R. P. Benson)

Endocrine secretions

Stored in granules

Stored extracellularly

Immediate release with no storage



pituitary

Protein in cell

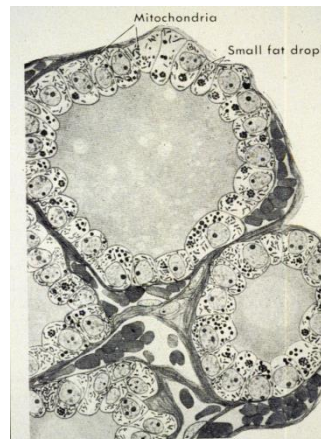
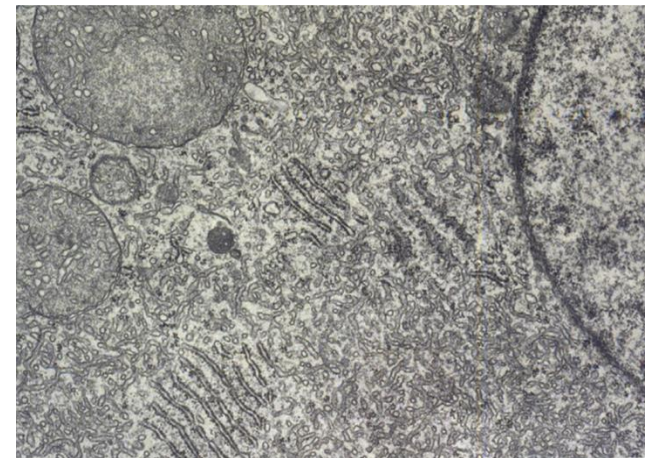


Figure 18-4. Section through several follicles of hu

thyroid

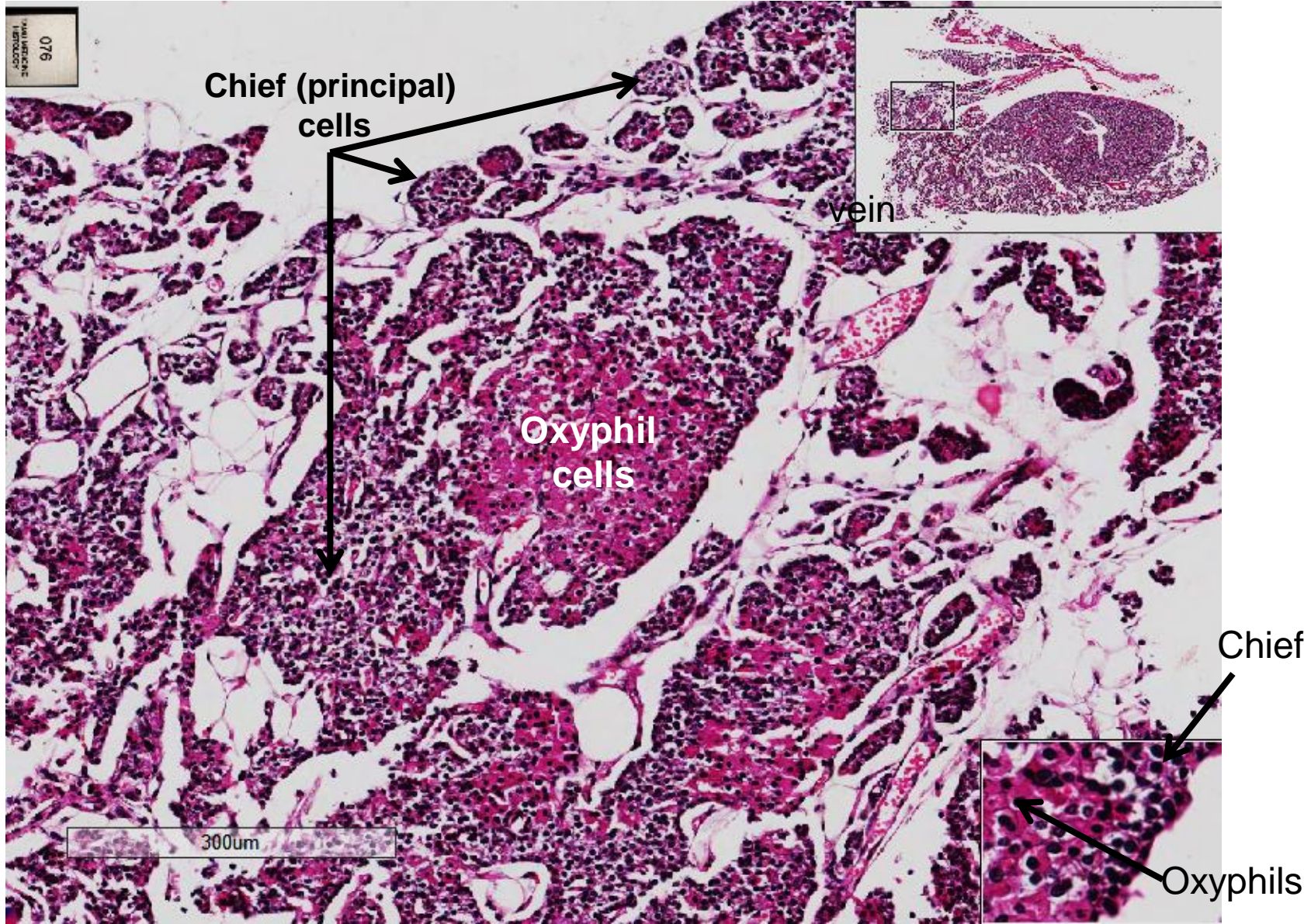
Thyroglobulin outside cell
in colloid of follicle



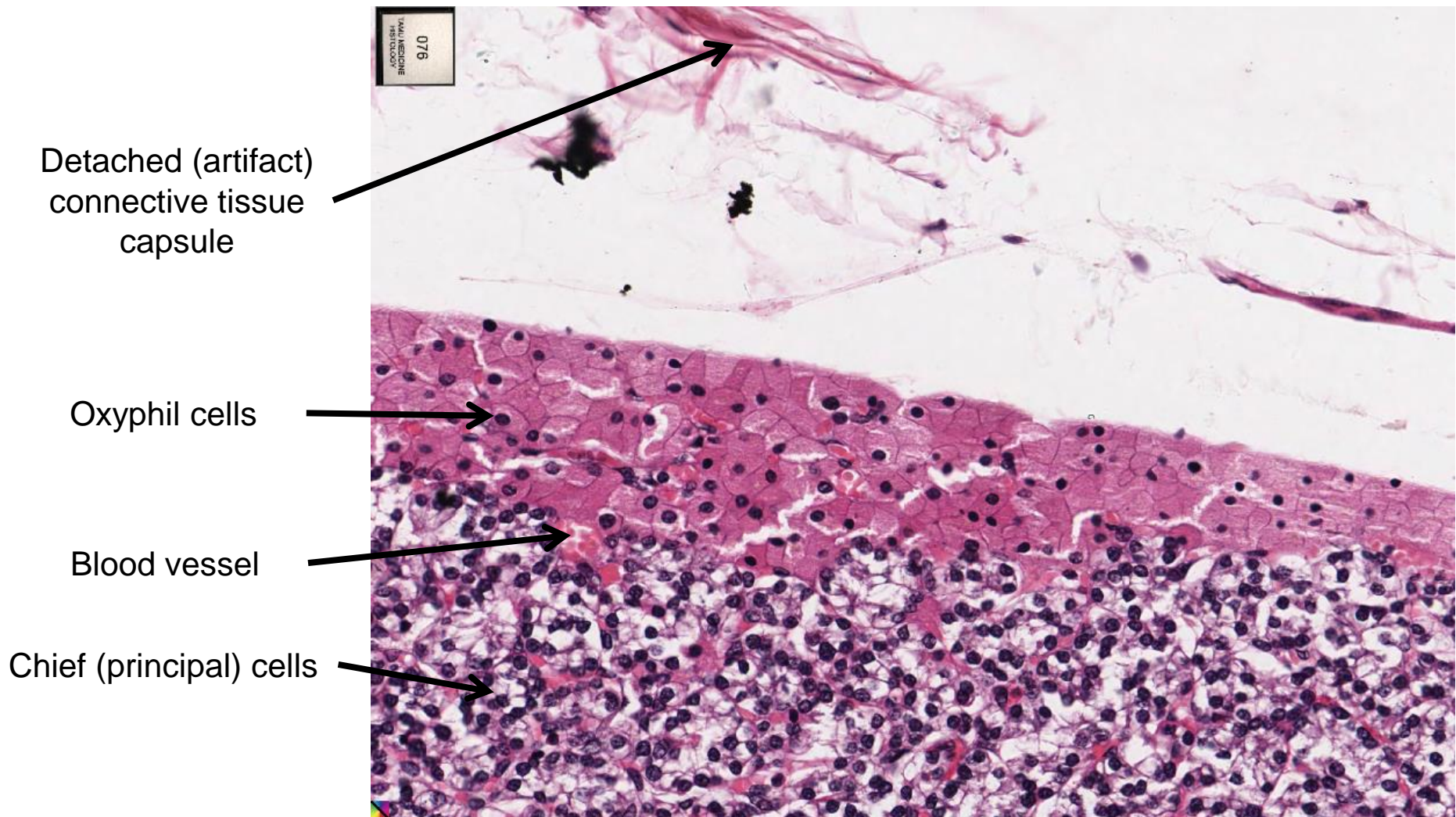
adrenal

Steroid pass through cell

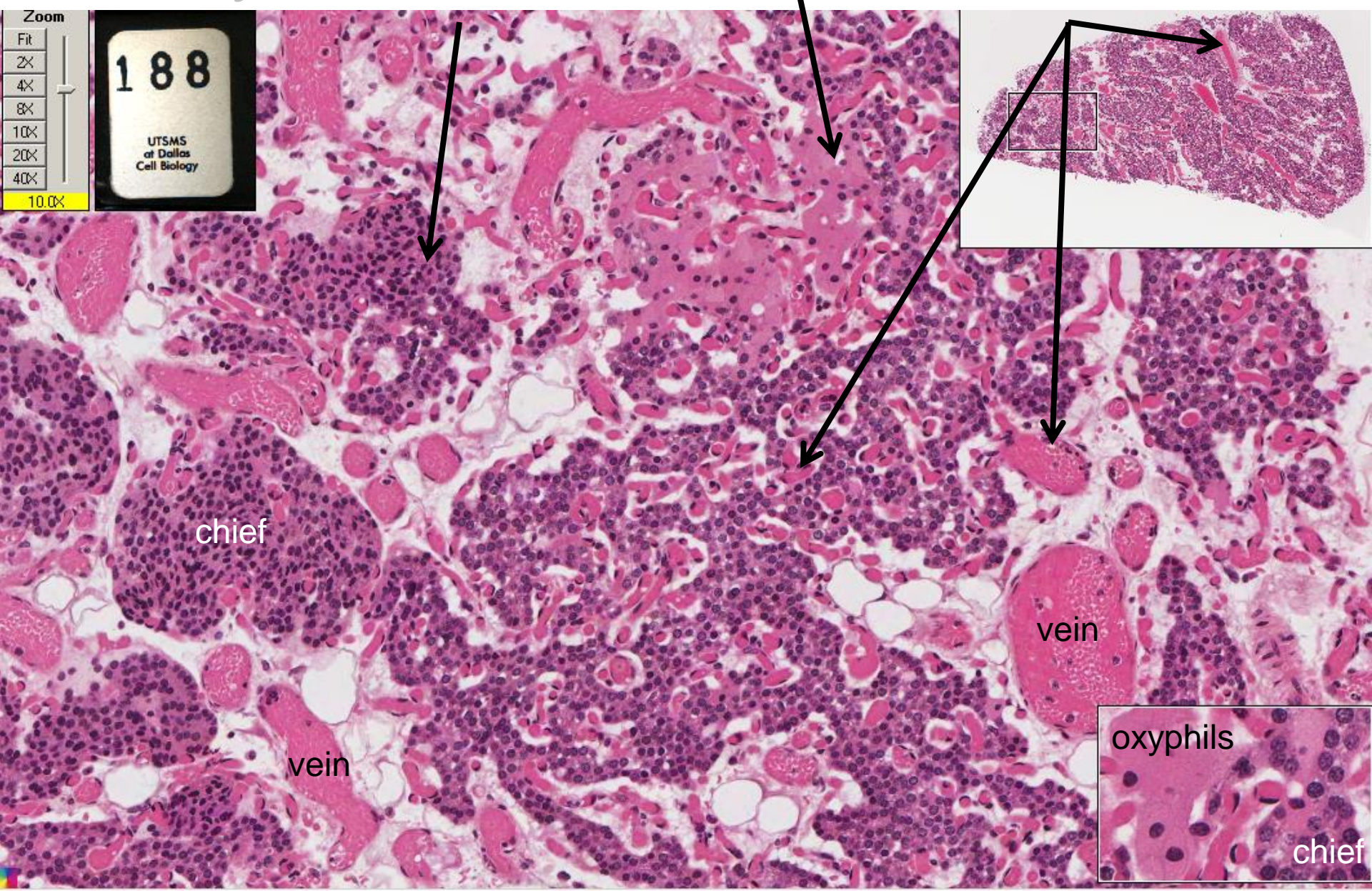
Slide 76: Parathyroid gland



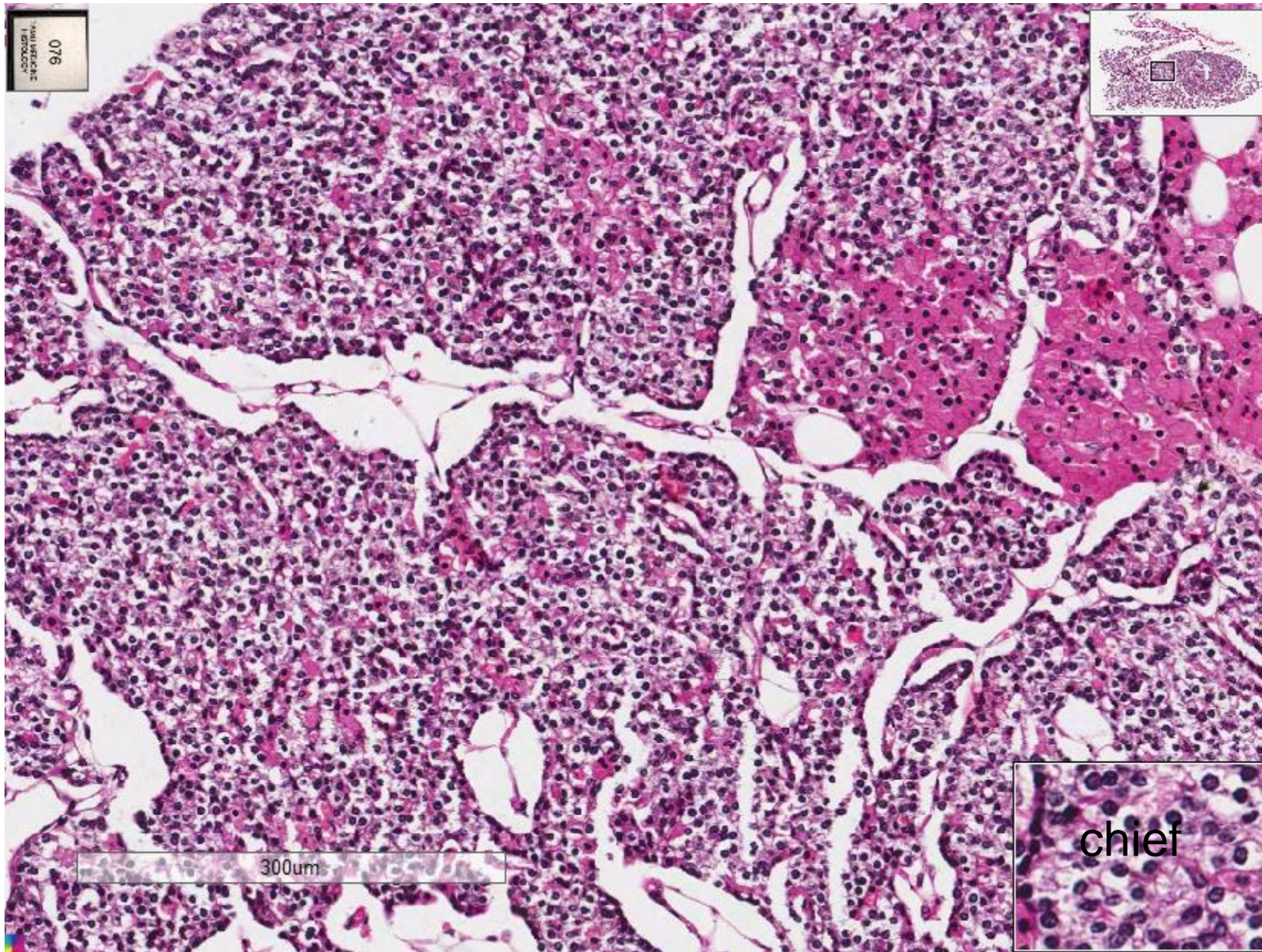
Slide 76: Parathyroid gland



Parathyroid — chief cells and oxyphils and rich vascular supply

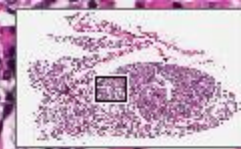


Parathyroid – chief cells



Parathyroid – chief cells

076
LABORATORY
1. HISTOLOGY



FUNCTIONS OF BONE

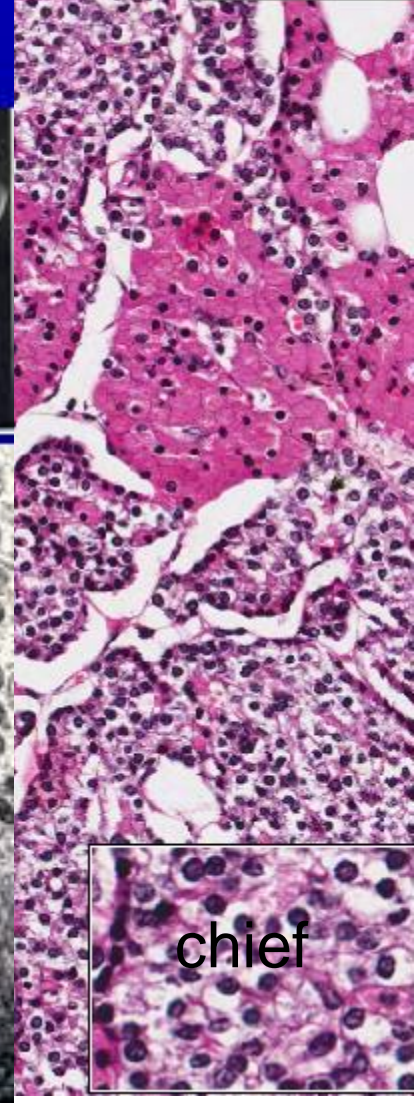
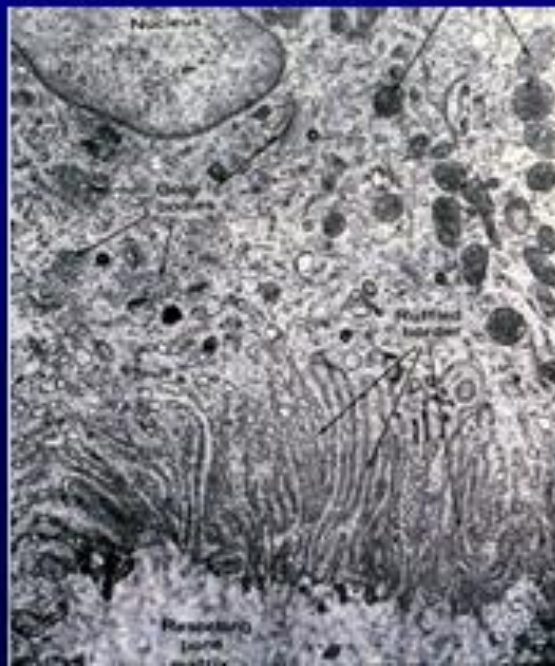
CALCIUM REGULATION

Parathyroid hormone (stimulates osteoclast production)

Calcitonin (removes osteoclast's ruffled border which PREVENTS RESORPTION)

Remember that these HORMONES are INVOLVED IN TIGHT REGULATION of free Ca^{++} as 1/4 OF FREE Ca^{++} IN BLOOD IS EXCHANGED EACH MINUTE.

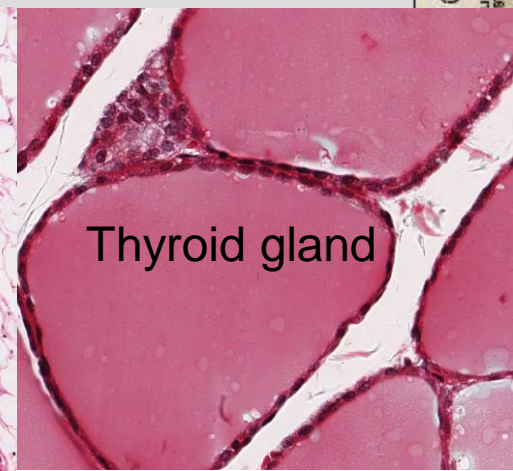
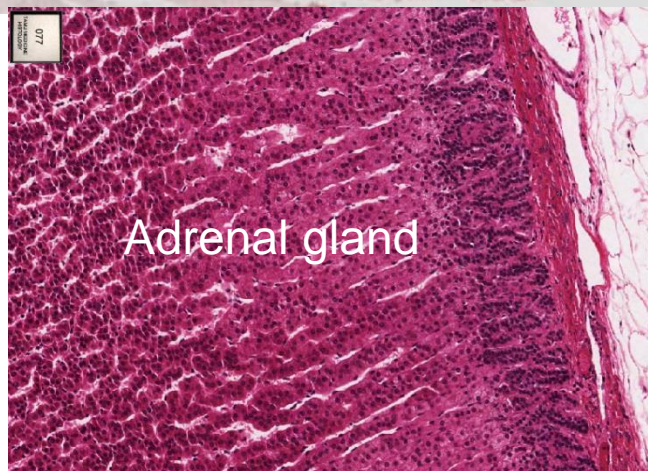
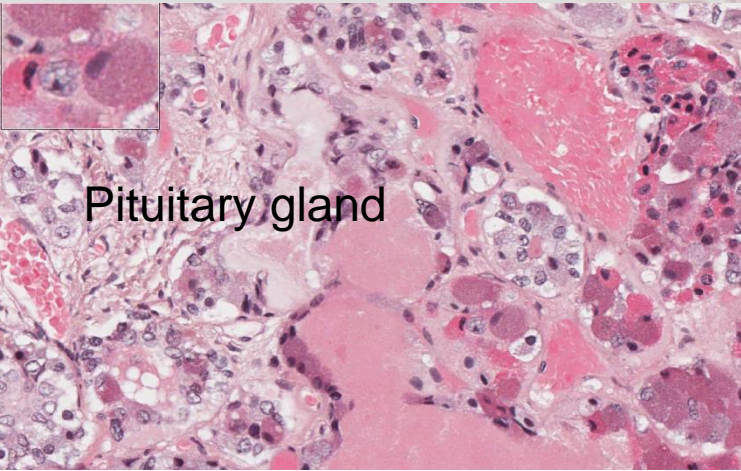
Osteoporosis due to hyperparathyroidism



End of part 1

ENDOCRINE SYSTEM **Part 2**

Dr. Larry Johnson



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MEDICINE
BIOLOGY

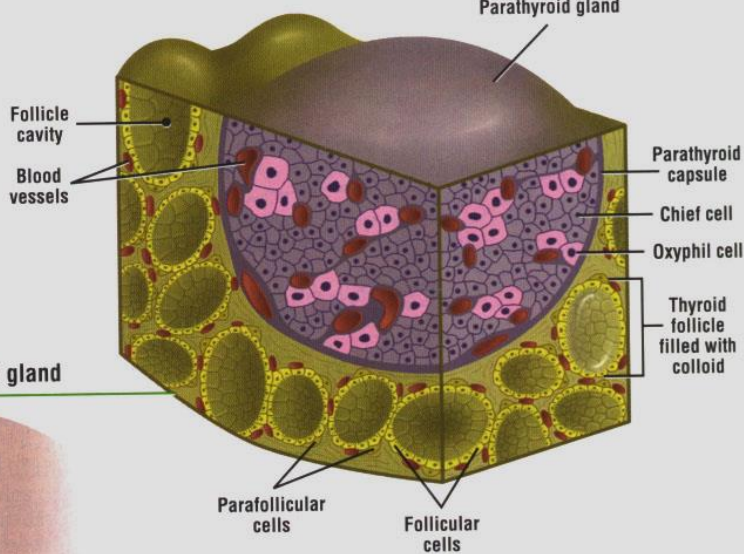
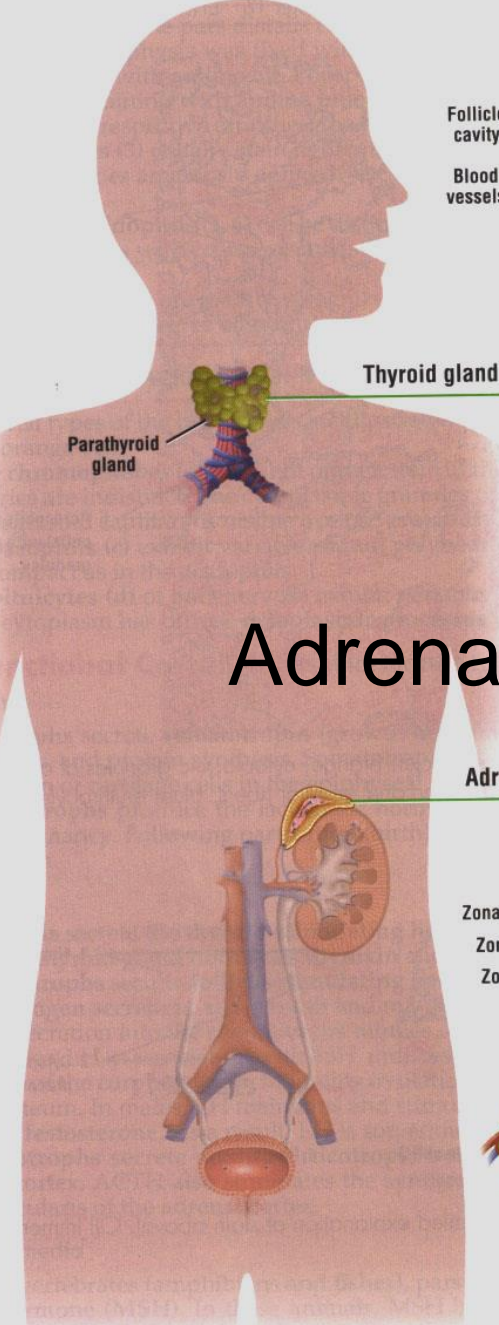
Objectives

Part 1

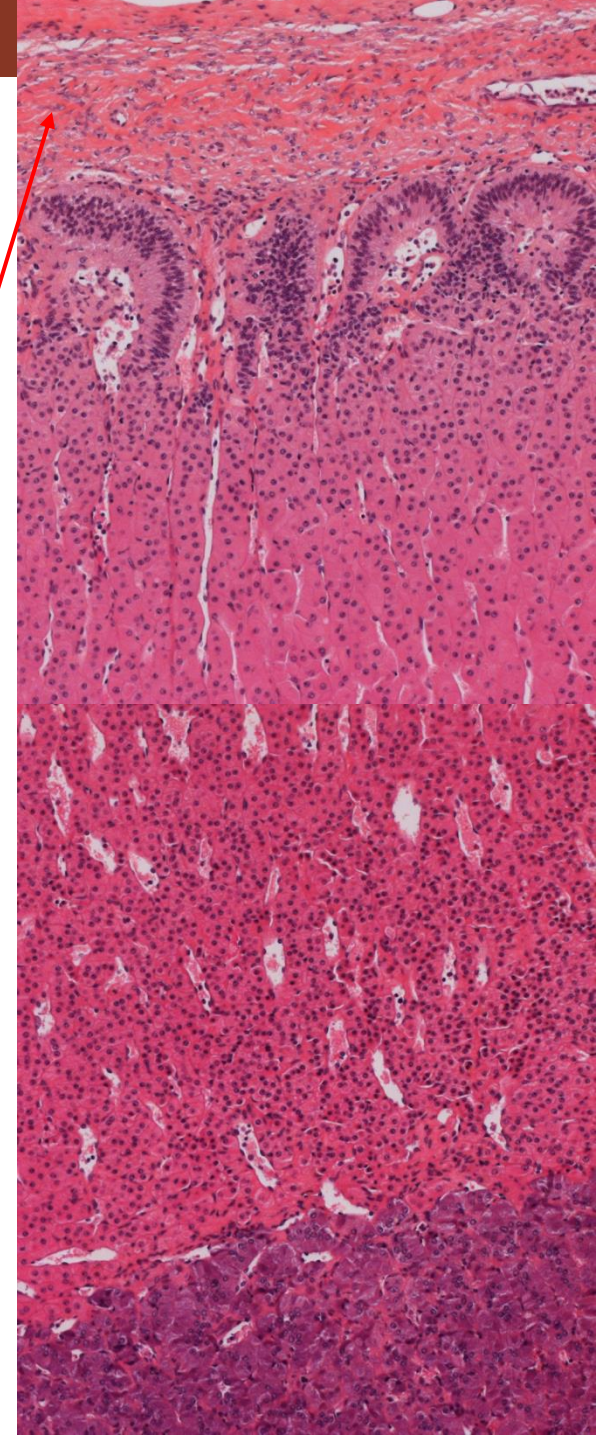
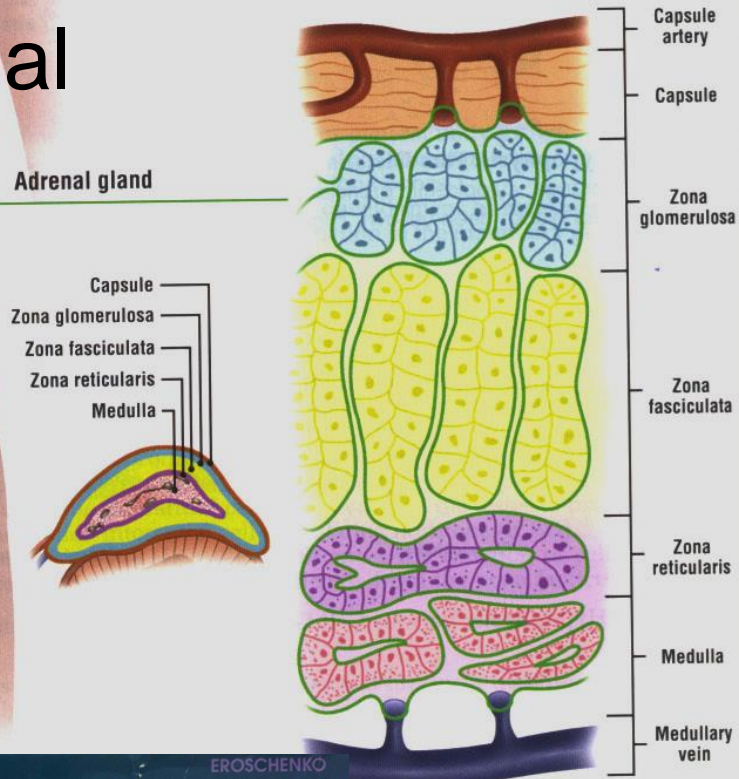
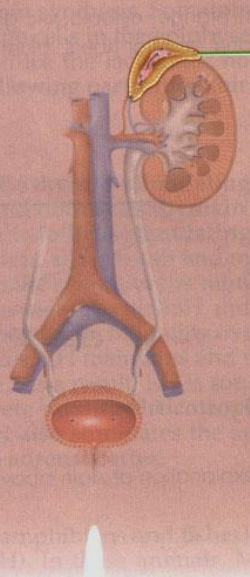
- Distinguish between the neurohypophysis and the adenohypophysis and identify the cell types present in a slide or photomicrograph of the pituitary.
- Identify thyroid follicles, follicular cells, colloid, capillaries and parafollicular cells.
- Identify the capsule, chief cells, and oxyphil cells in the parathyroid gland.

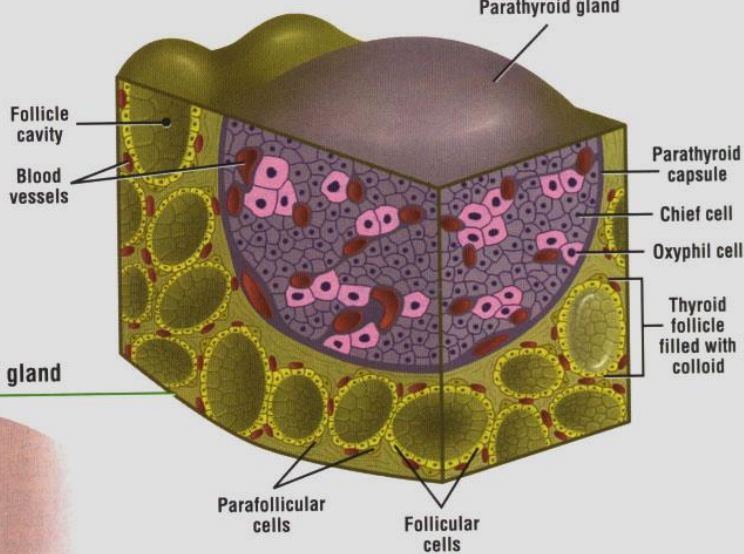
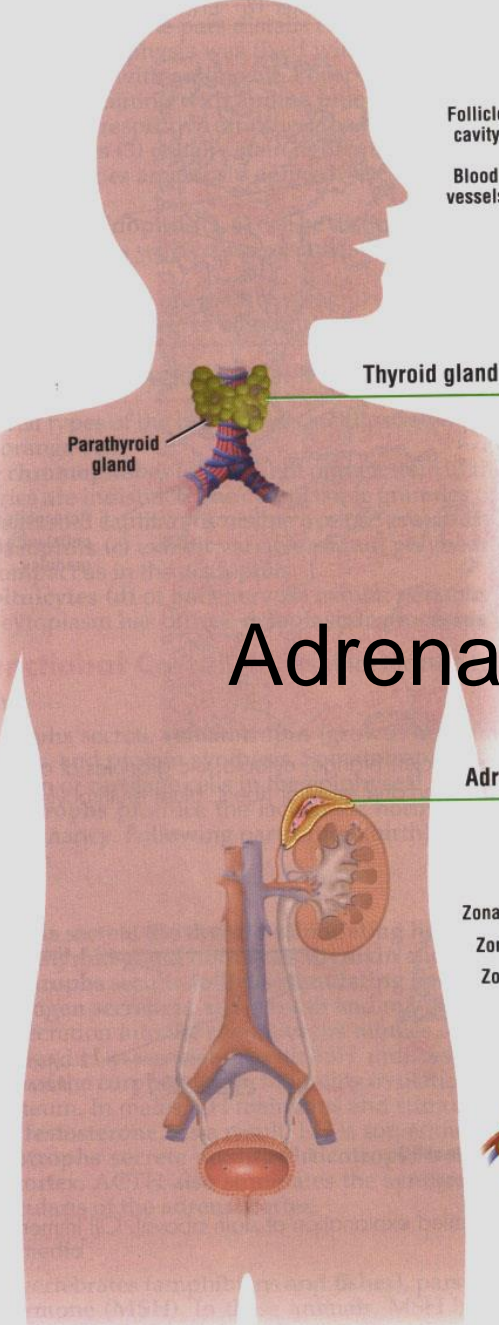
Part 2

- Identify the capsule, cortex, zona glomerulosa, zona fasciculata, zona reticularis, medulla, and chromaffin cells in the adrenal gland.
- Identify the pinealocytes and corpora arenacea in the pineal gland.
- Identify the islets of Langerhans in the pancreas

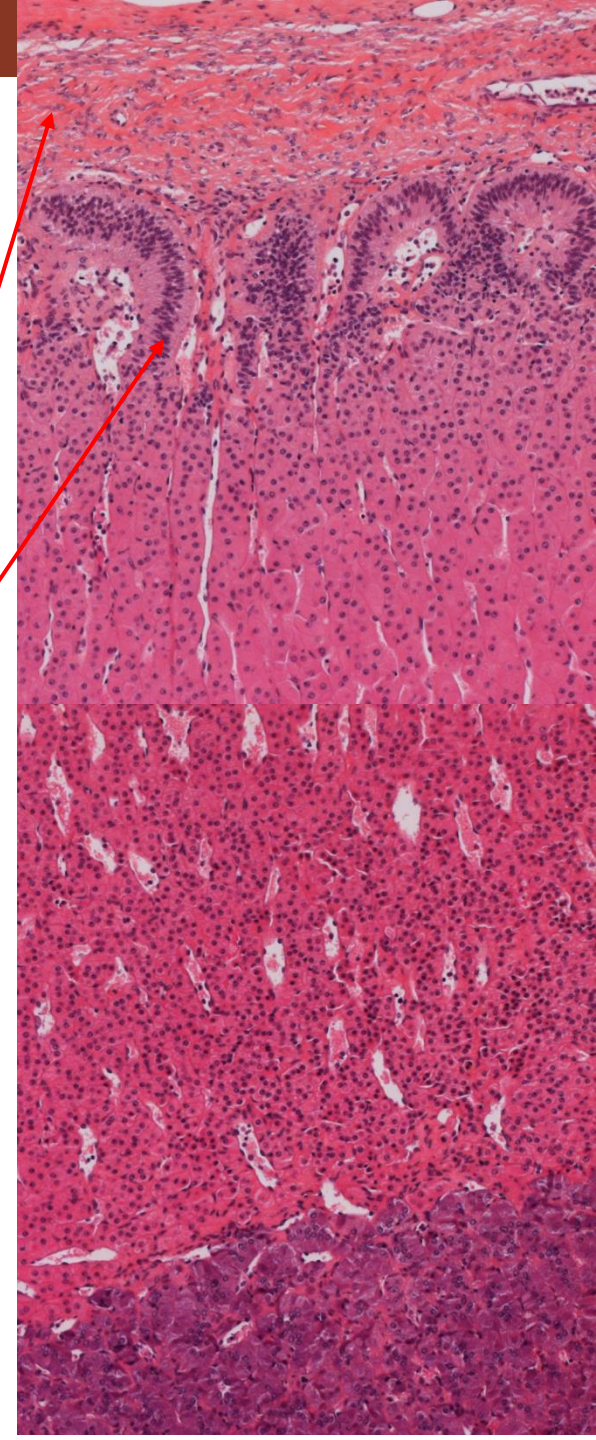
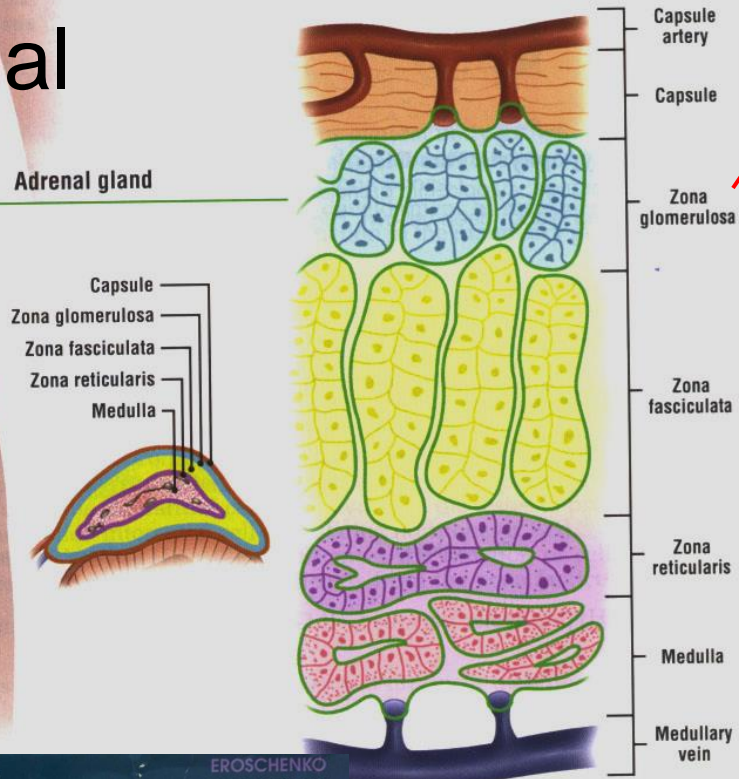
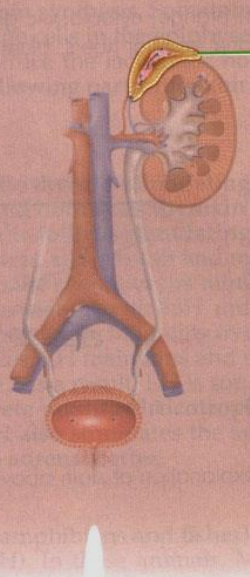


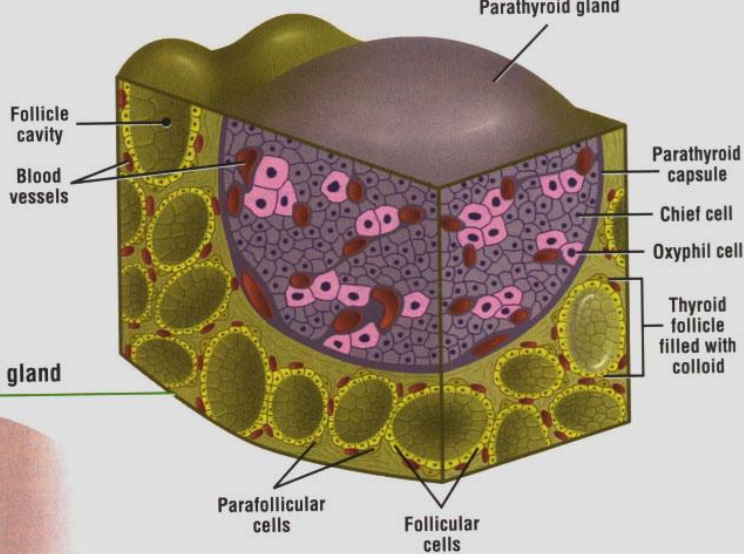
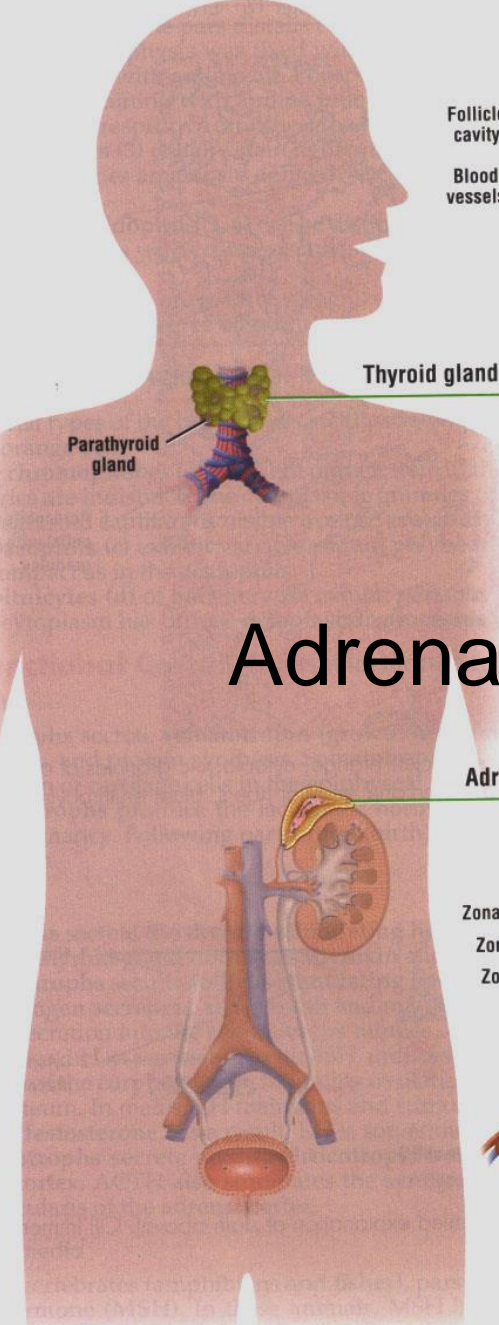
Adrenal





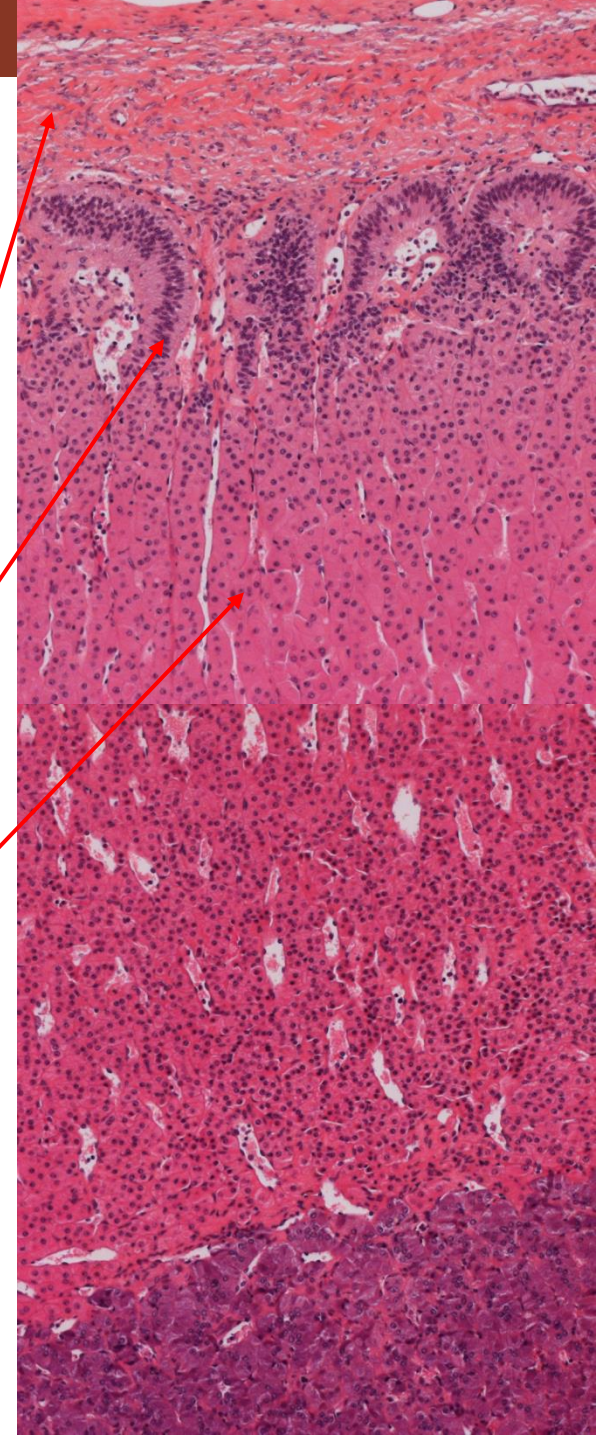
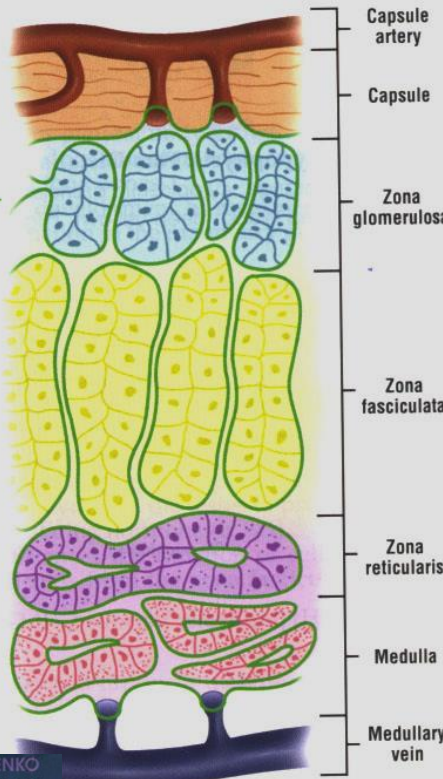
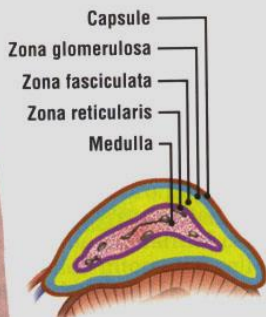
Adrenal

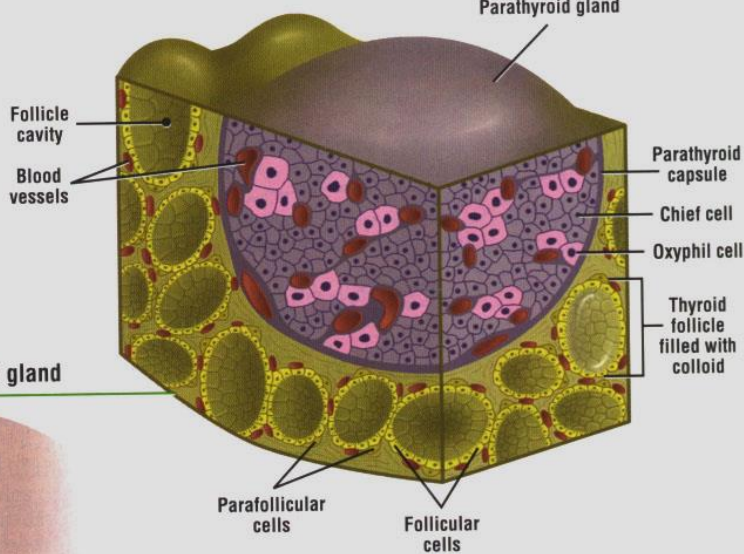
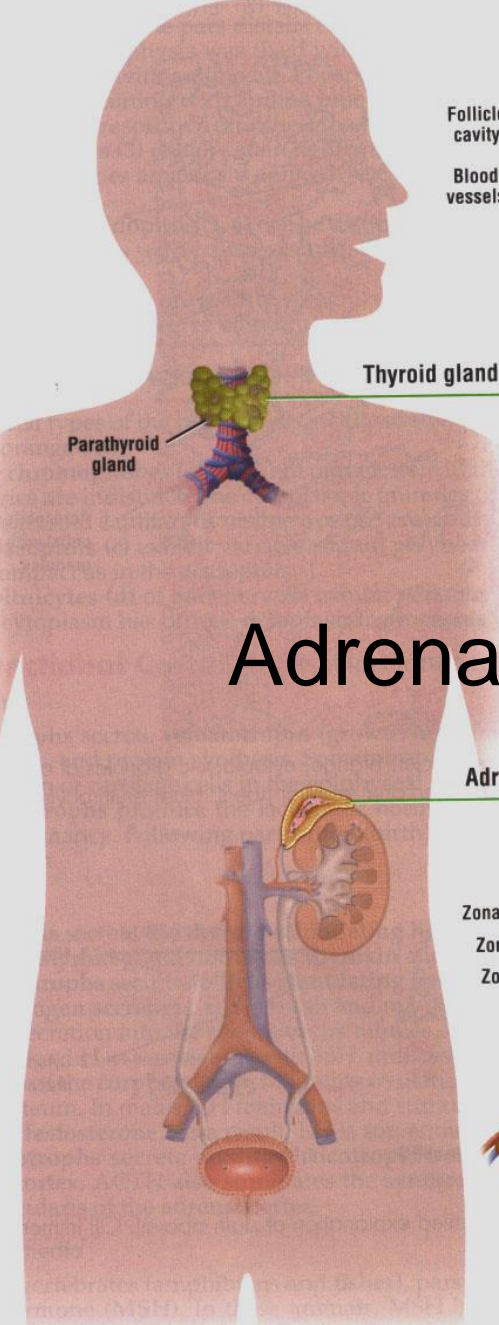




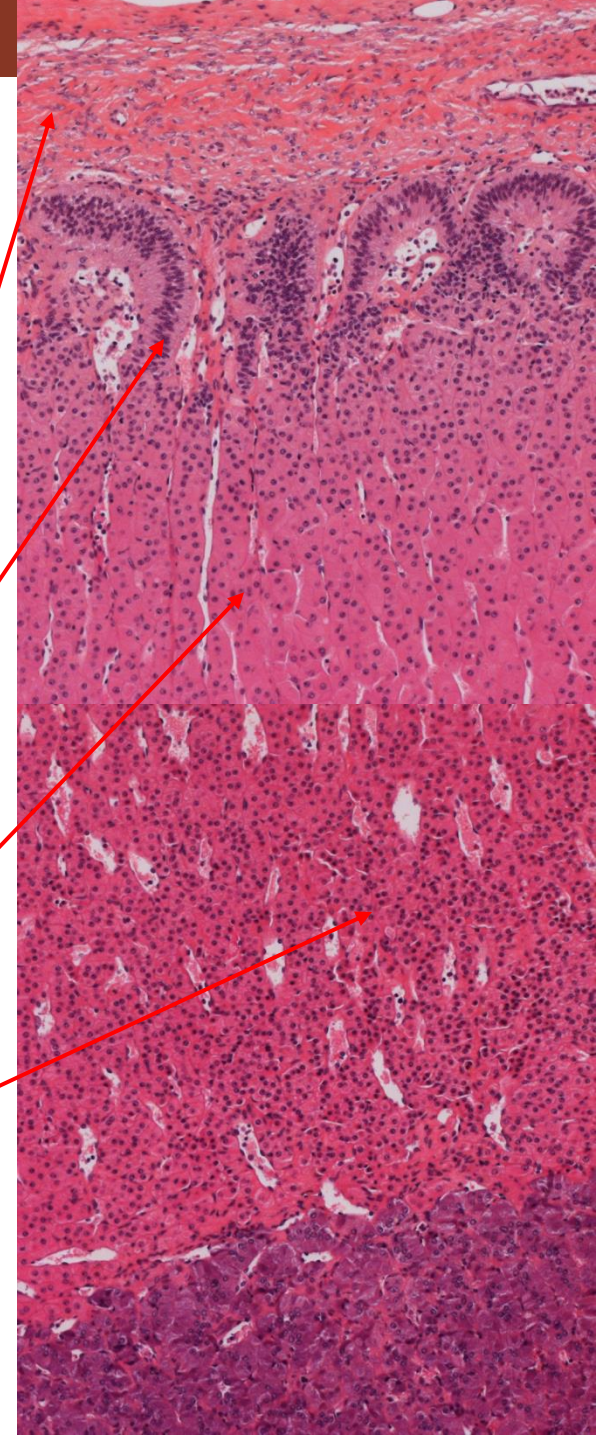
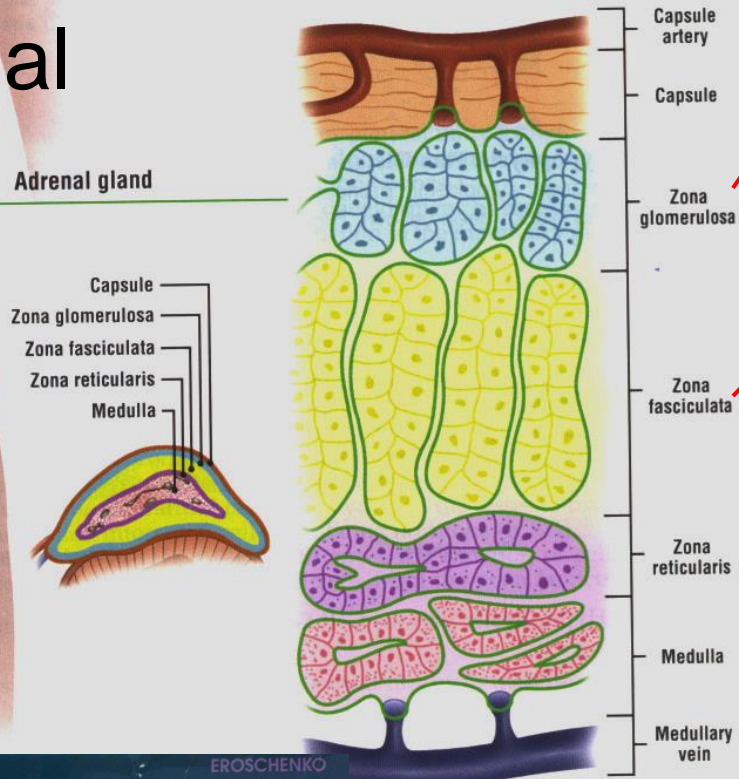
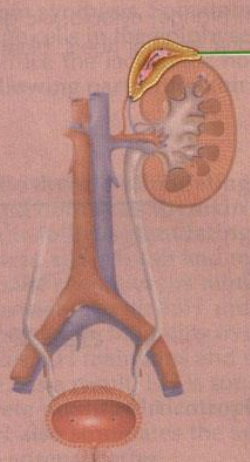
Adrenal

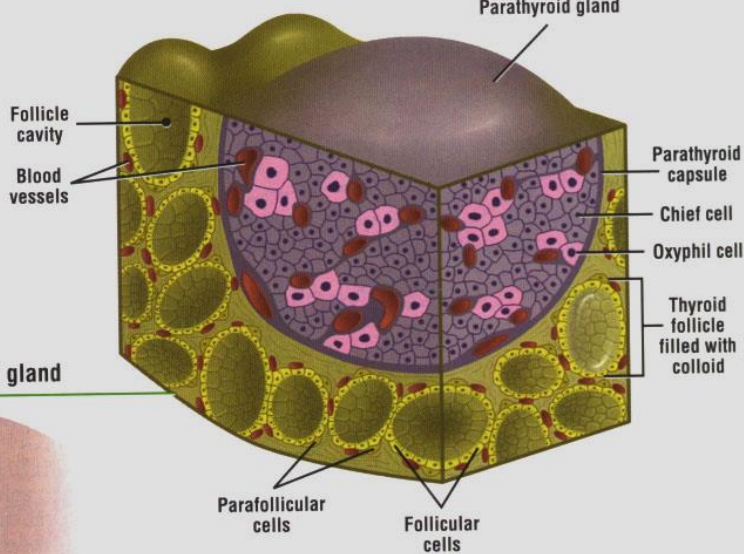
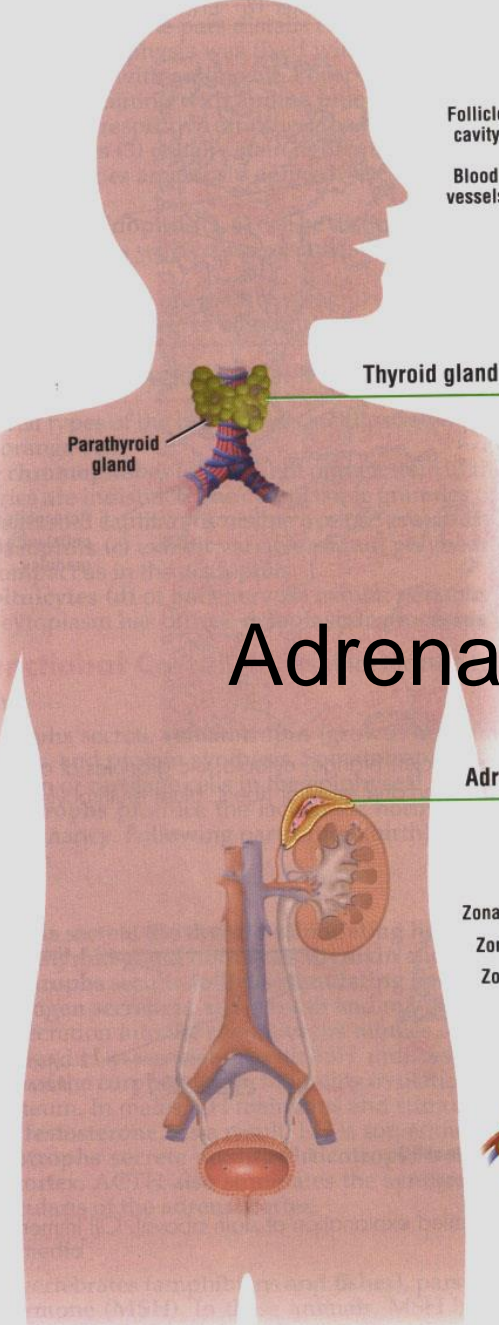
Adrenal gland



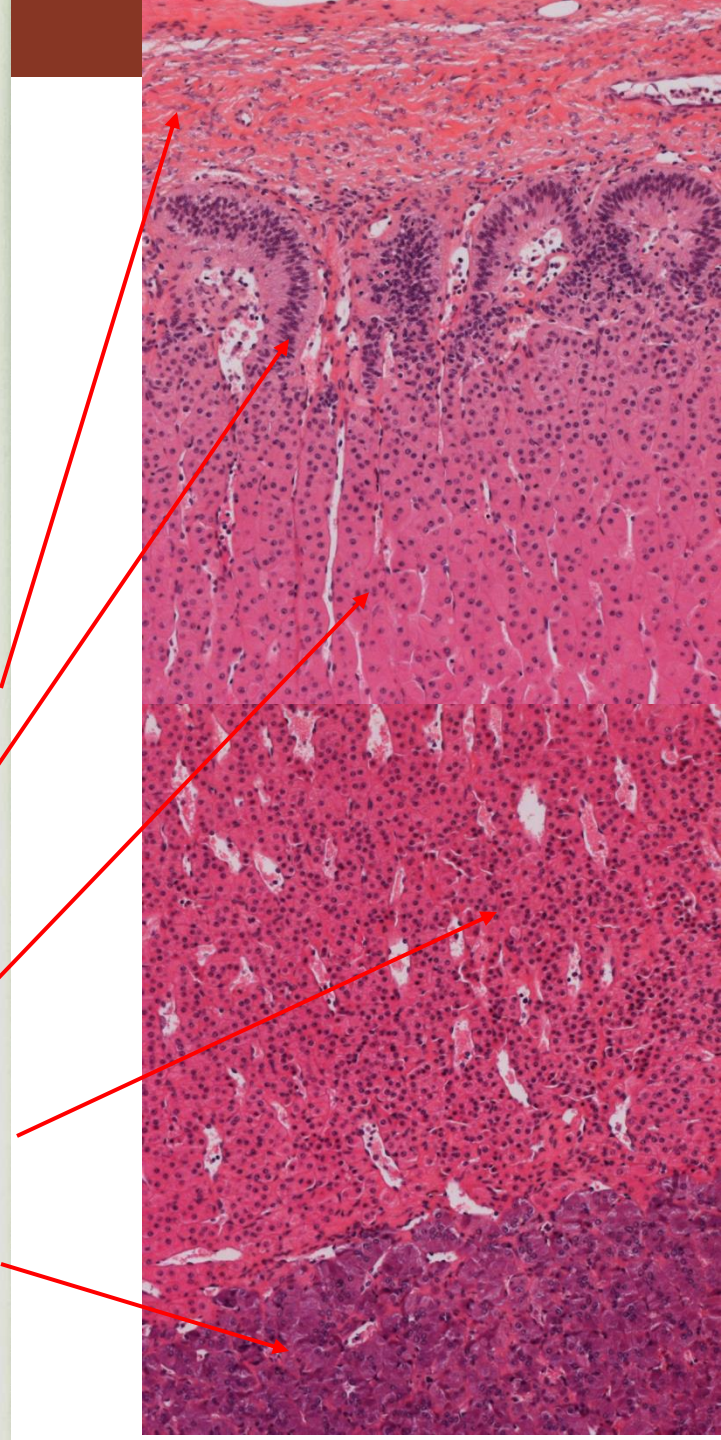
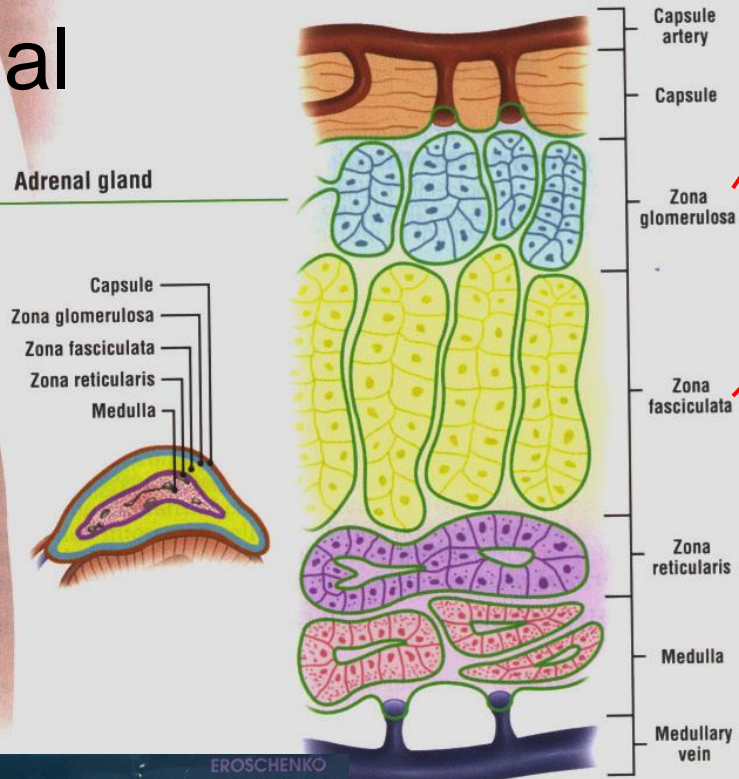


Adrenal

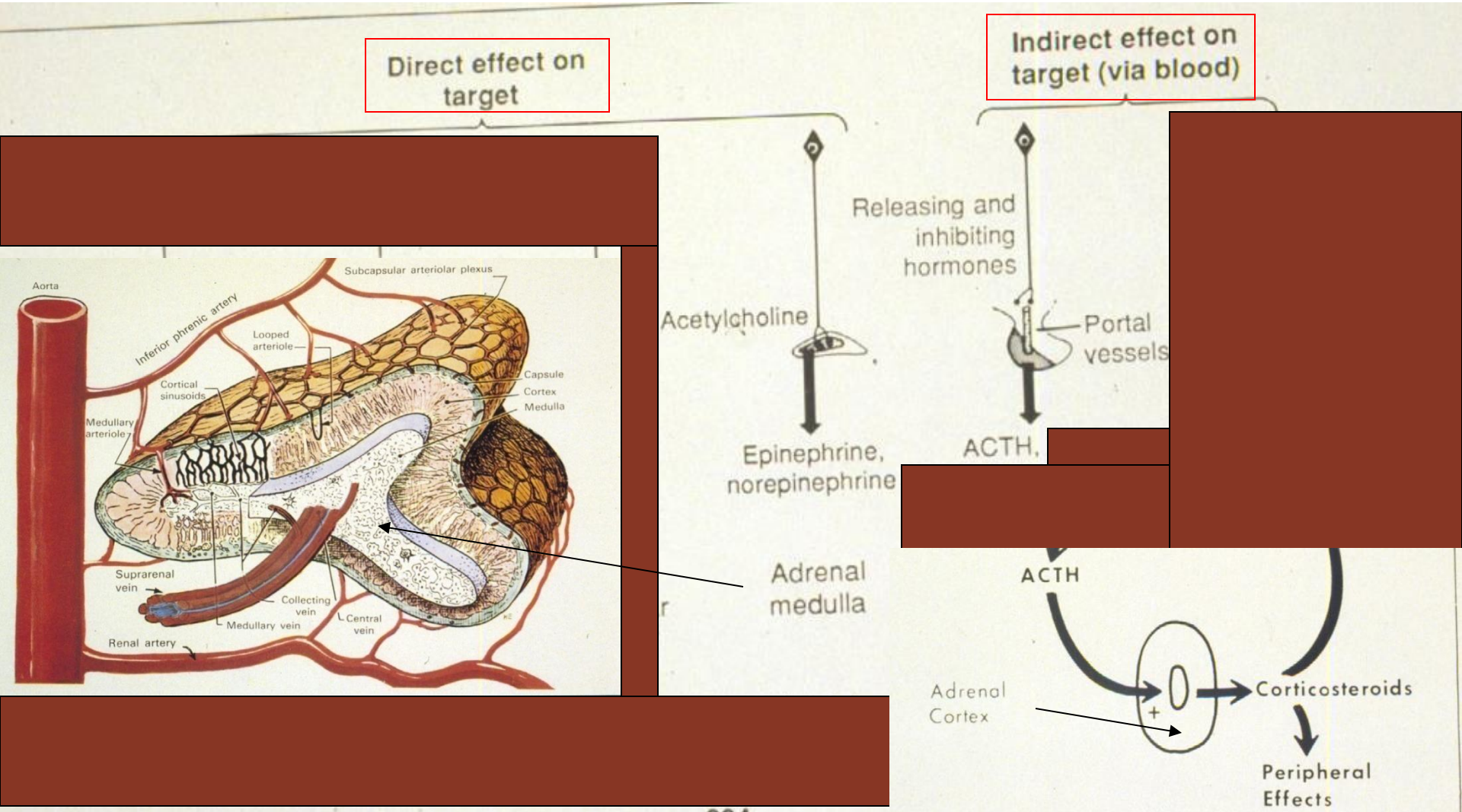




Adrenal

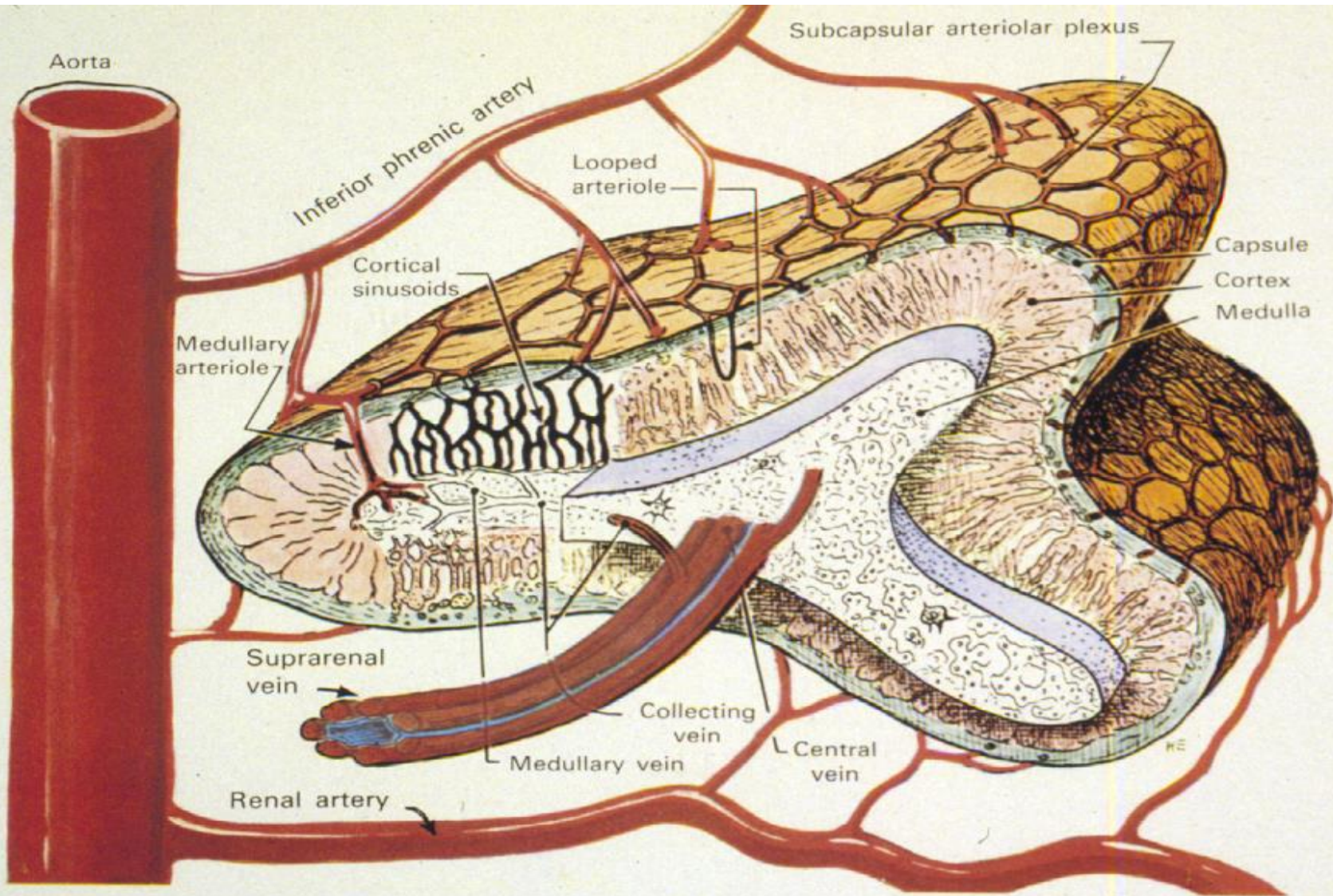


Releases of neurons associated with the adrenals (both direct and indirect)



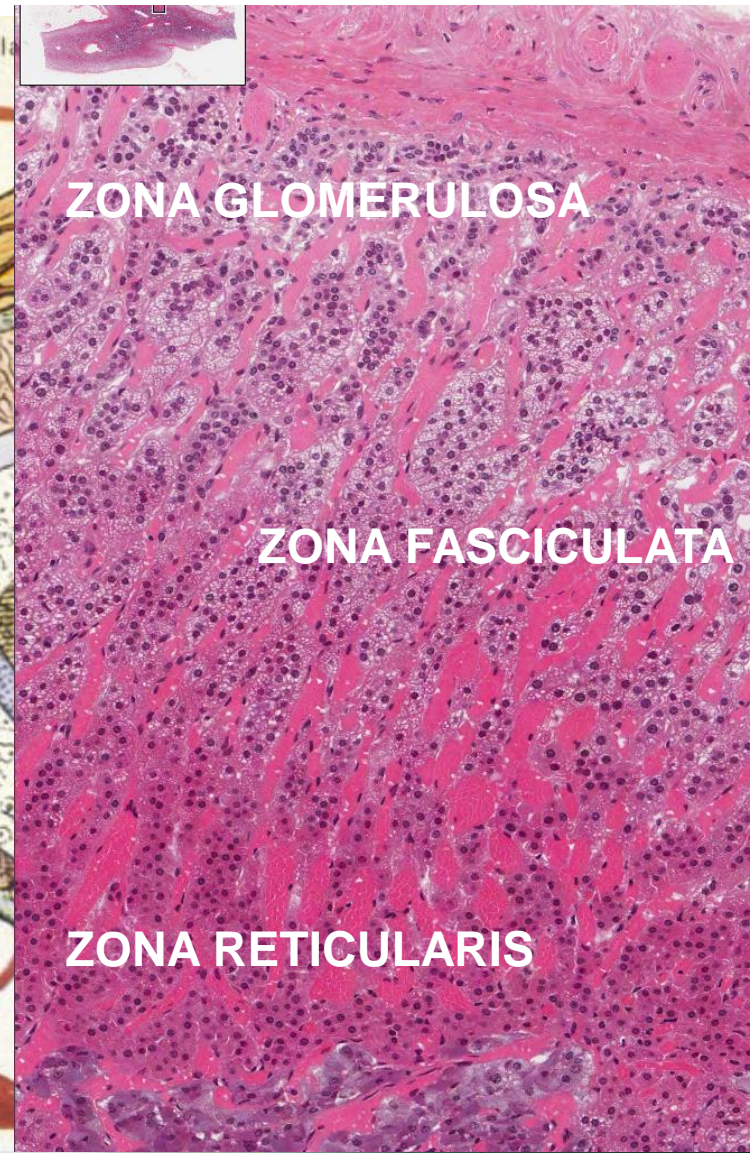
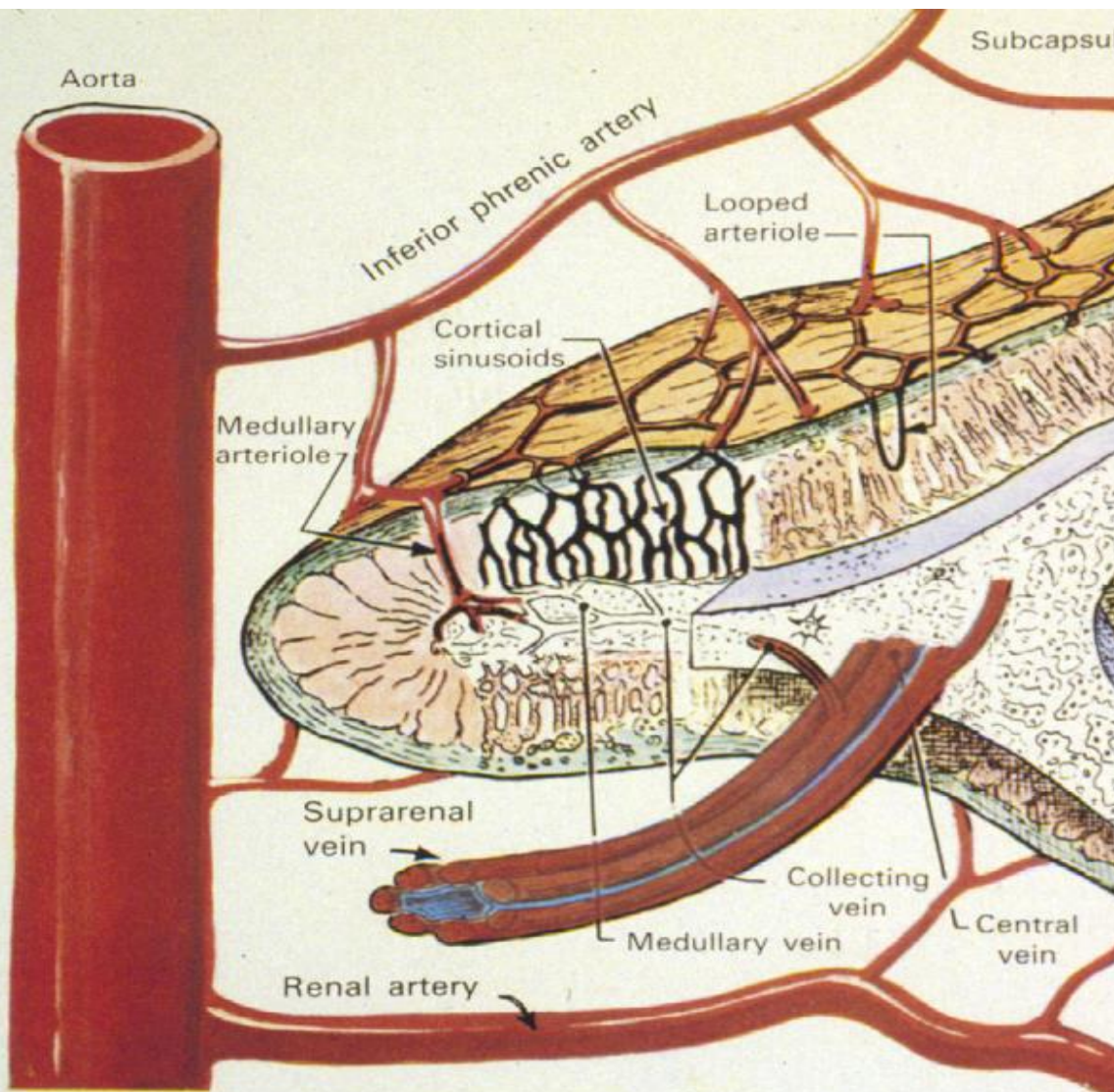
BLOOD SUPPLY

SINUSOIDS, MEDULLARY ARTERIES, ADRENAL VEIN



BLOOD SUPPLY

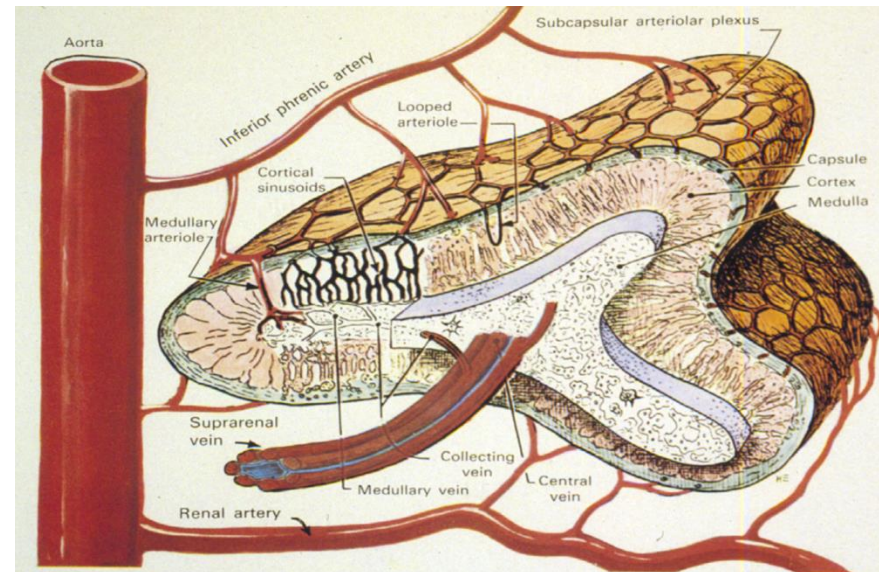
SINUSOIDS, MEDULLARY ARTERIES, ADRENAL VEIN



Adrenal

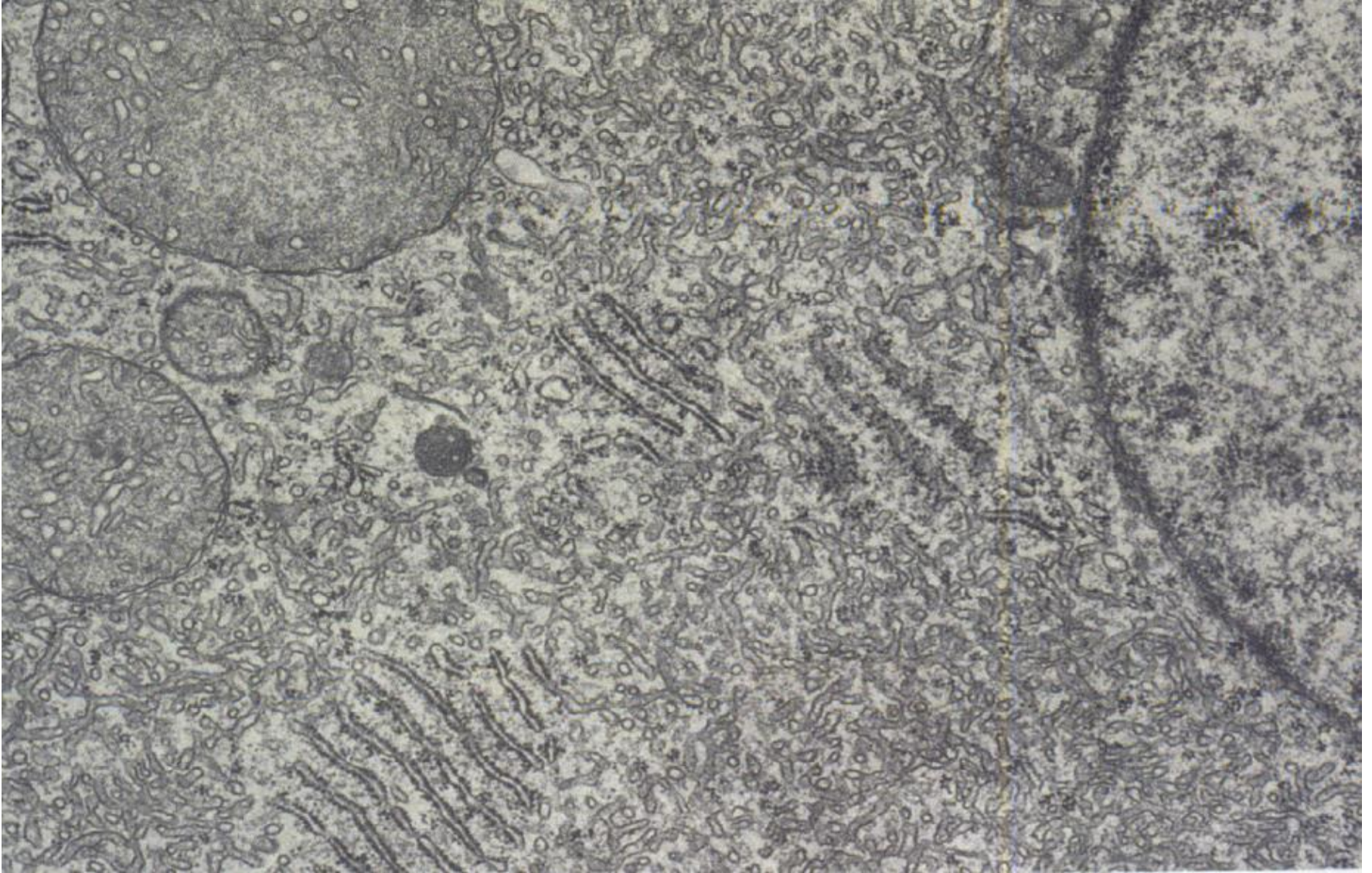
Arterial and venous blood flow to the adrenal gland.

- Peripheral arteries > cortical arteries > capillaries & sinusoids irrigating cortex > join medullary capillaries and arterioles > medullary fenestrated sinusoids with dual blood supply (arterial medullary blood and venous cortex blood) > medullary veins > suprarenal vein.

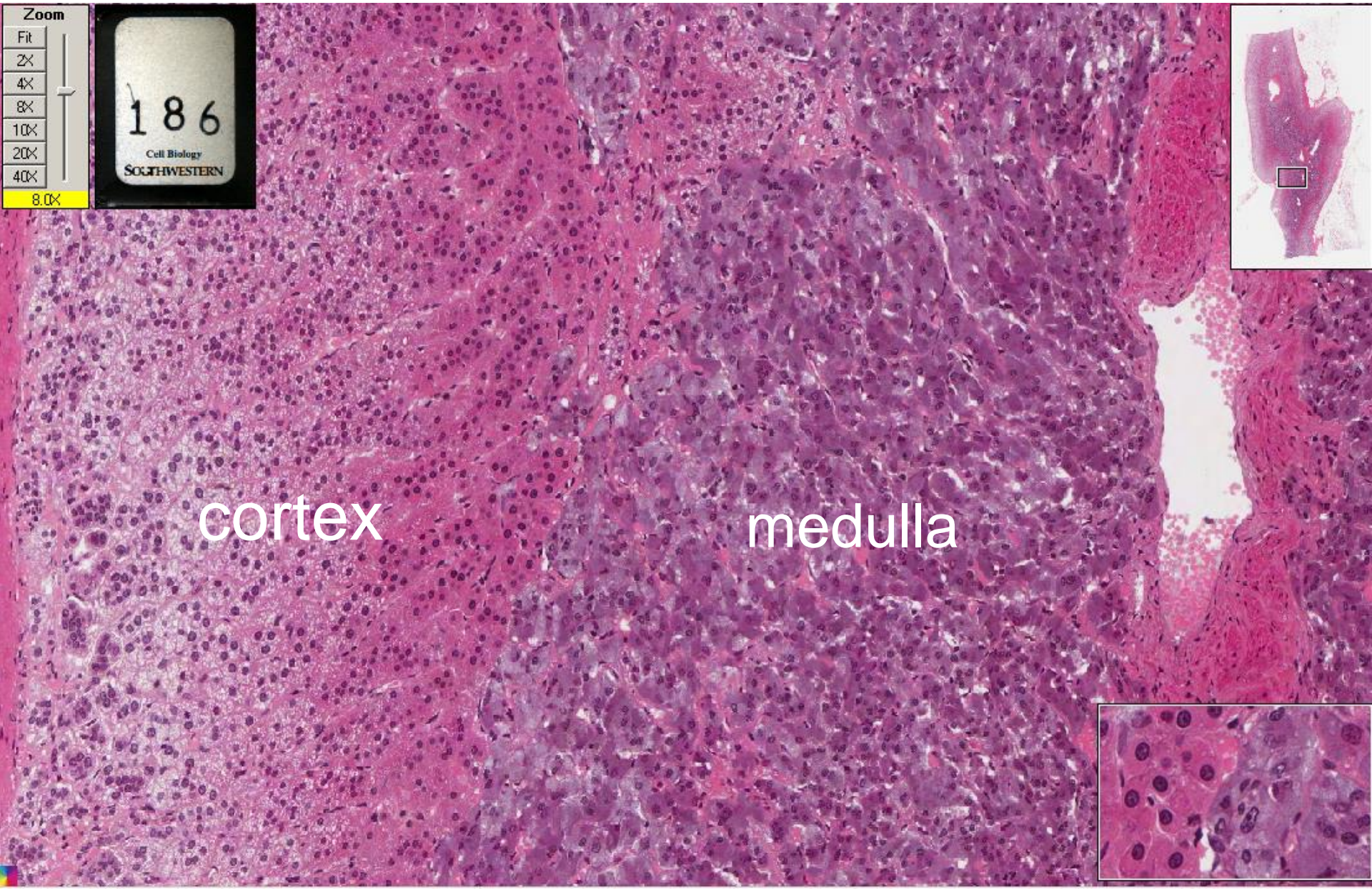


Human fetal adrenal cortical cell

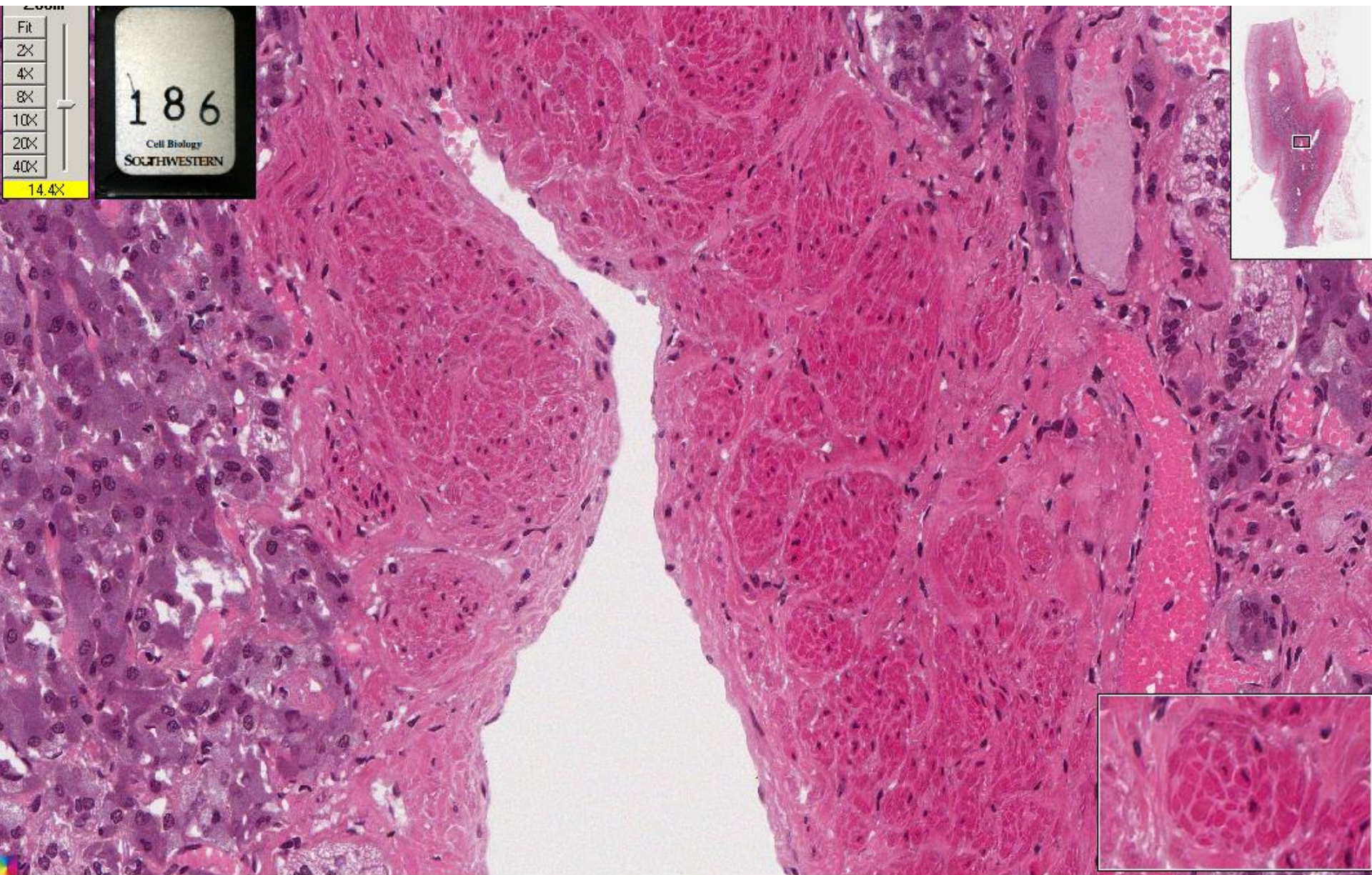
with lots of SER and large spherical mitochondria with tubular cristae



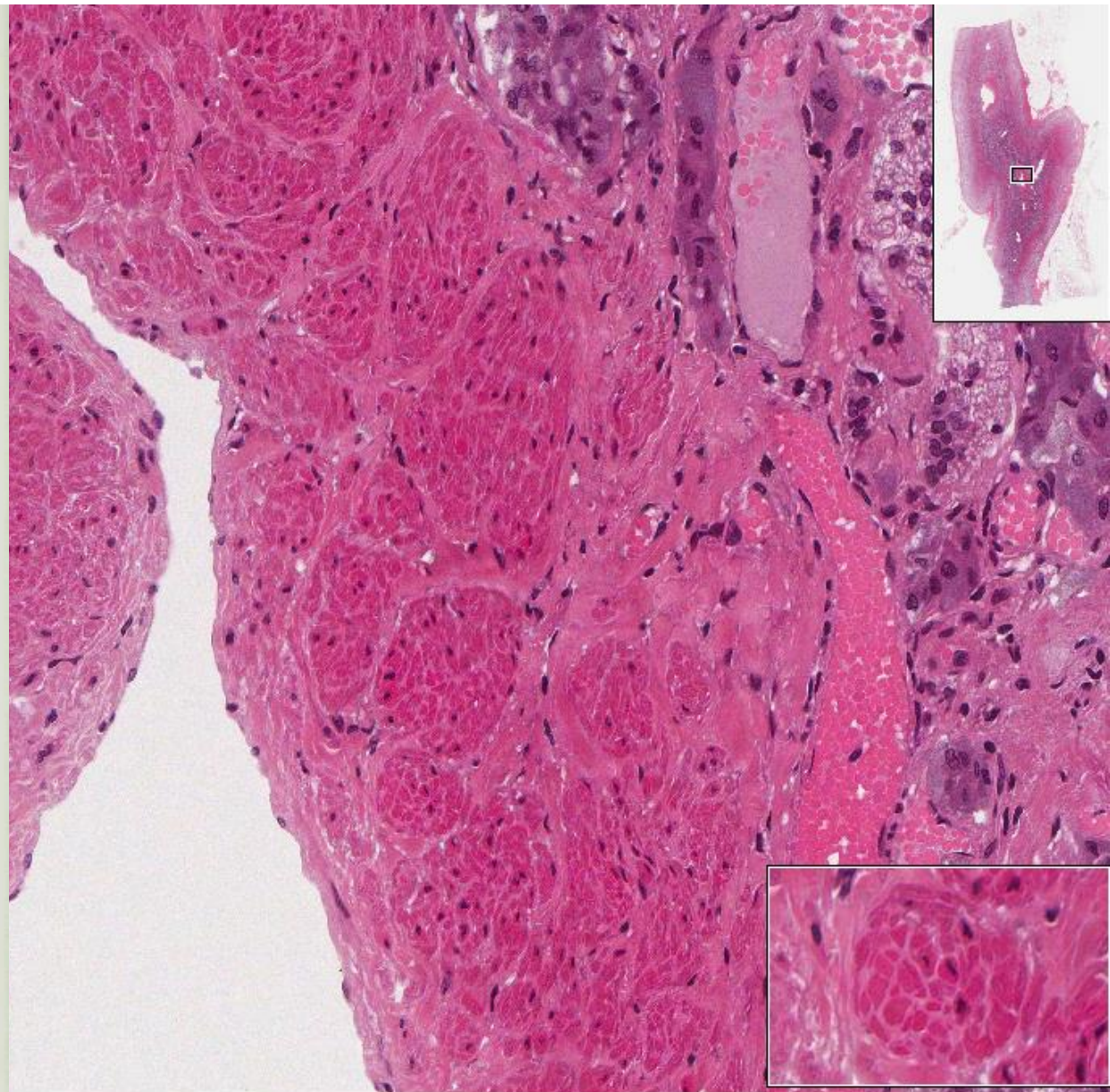
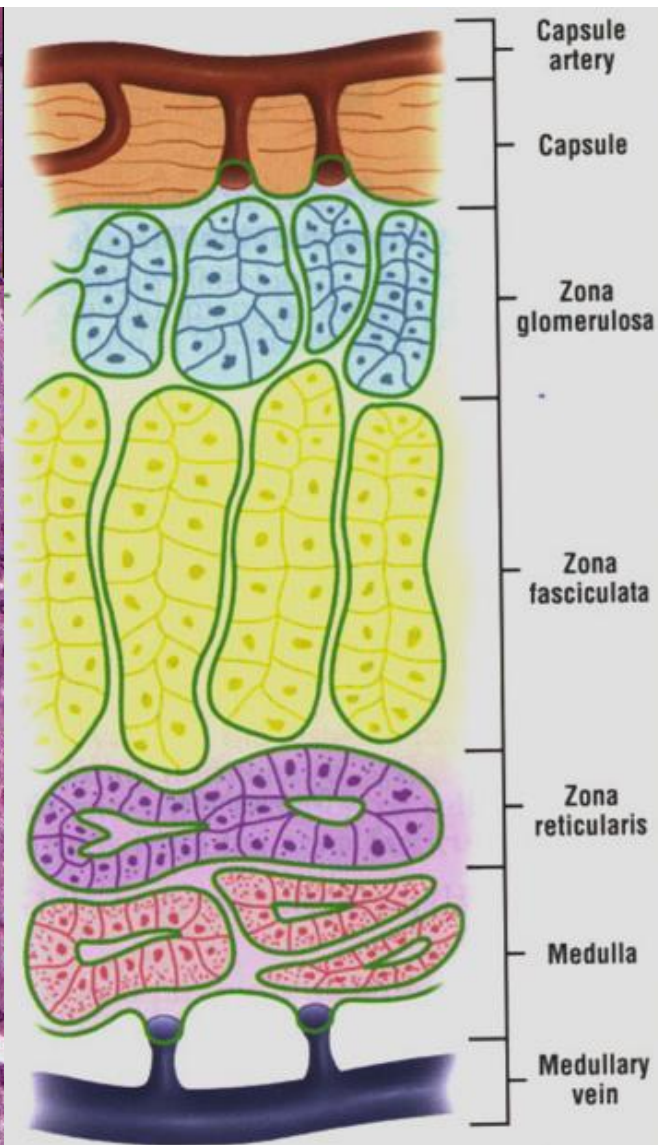
Adrenal -cortex and medulla



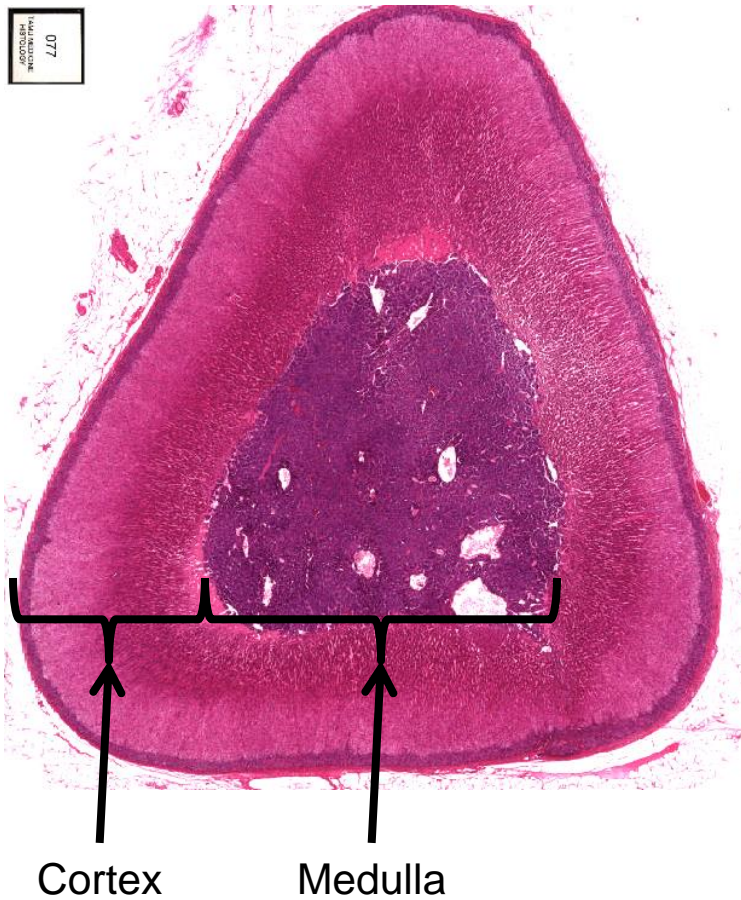
Adrenal - central vein



Adrenal - central vein

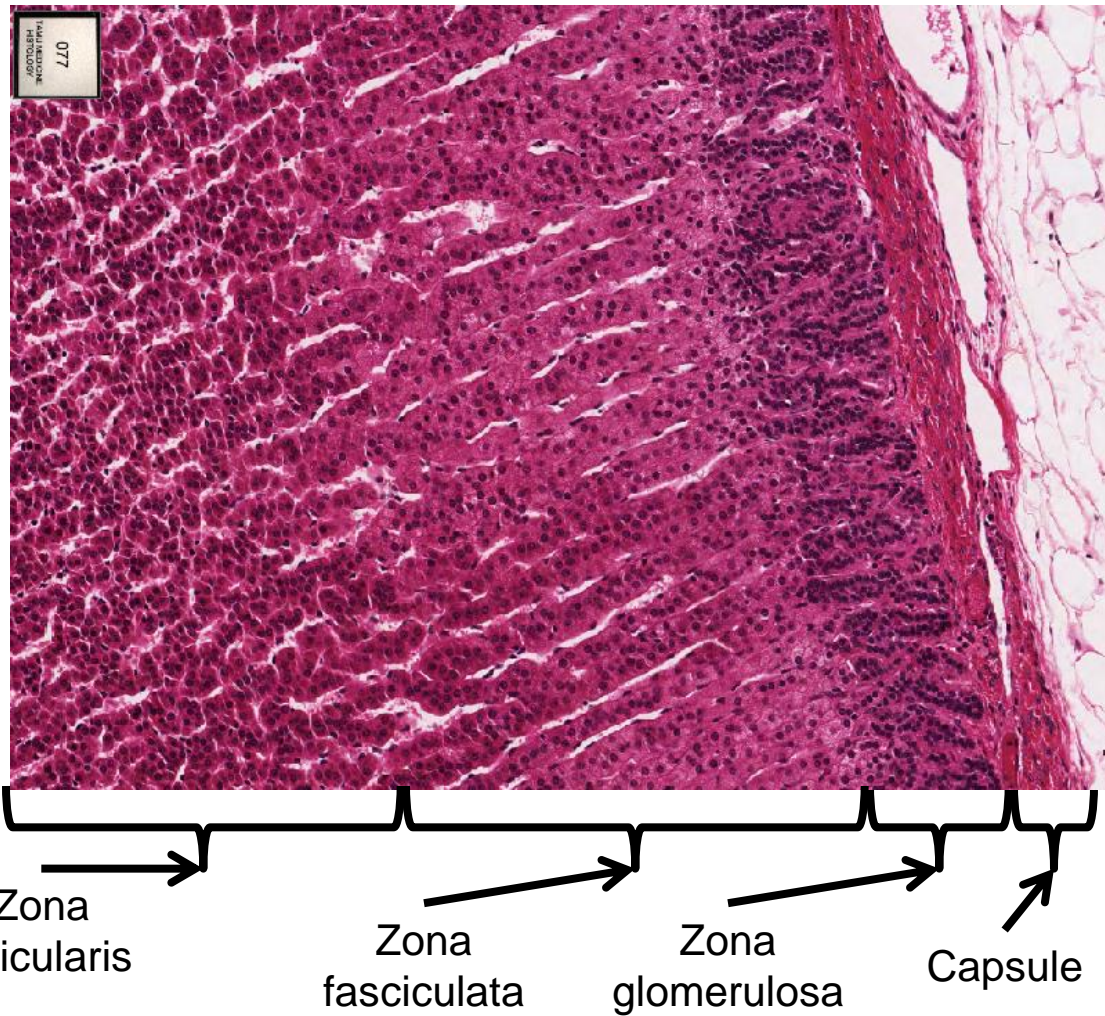


Slide 77: Adrenal gland



Cortex

Medulla



Zona
reticularis

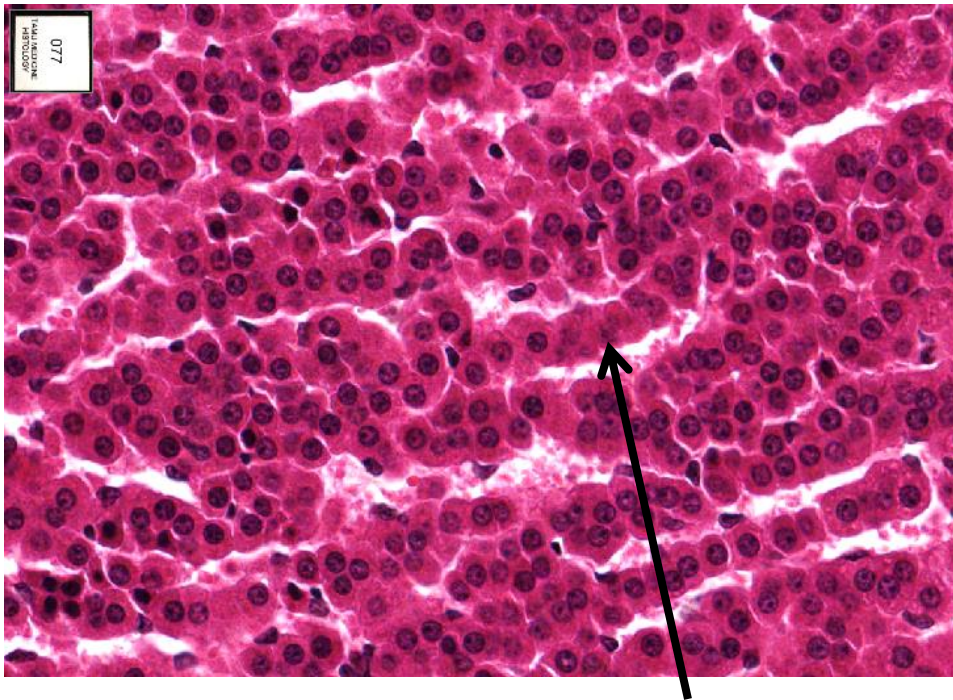
Zona
fasciculata

Zona
glomerulosa

Capsule

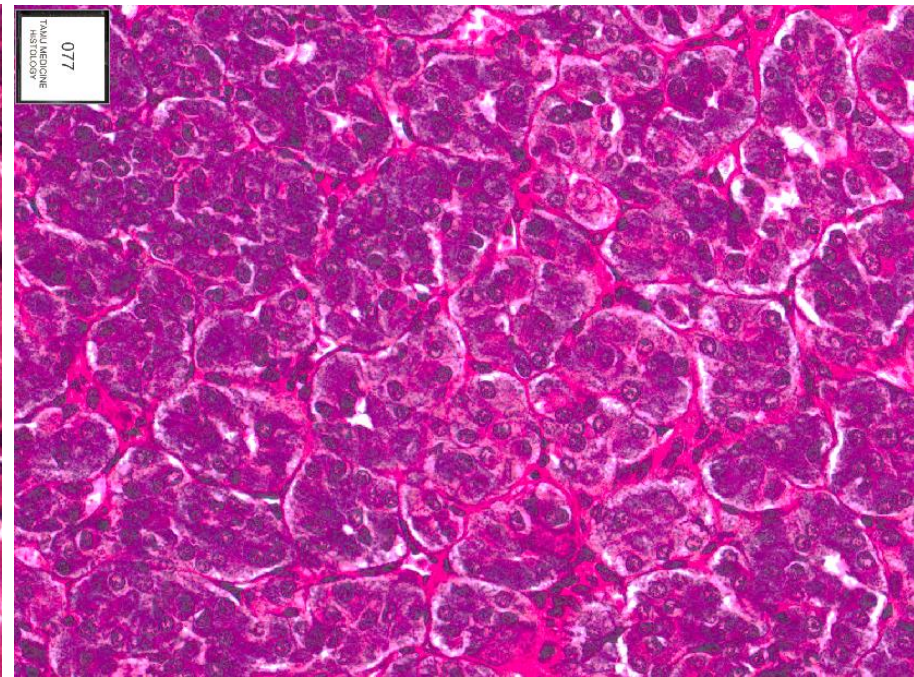
The zona glomerulosa layer is regulated by pituitary adrenocorticotrophin hormone (ACTH).

Slide 77: Adrenal gland



Trabeculae of cortex

Sinusoidal blood channels



Chromaffin cells of medulla

Lipid droplets are abundant in these steroid-secreting cells. Cholesterol precursors for steroid hormones are stored in lipid droplets. Also SER would be abundant in these cells to provide the enzymes for steroid production.

The zona reticularis has a rich vascularization with wide capillaries.

Adrenal function

Aldosterone stimulates Na^+ resorption in:

distal tubule of kidney

gastric mucosa

salivary glands

sweat glands

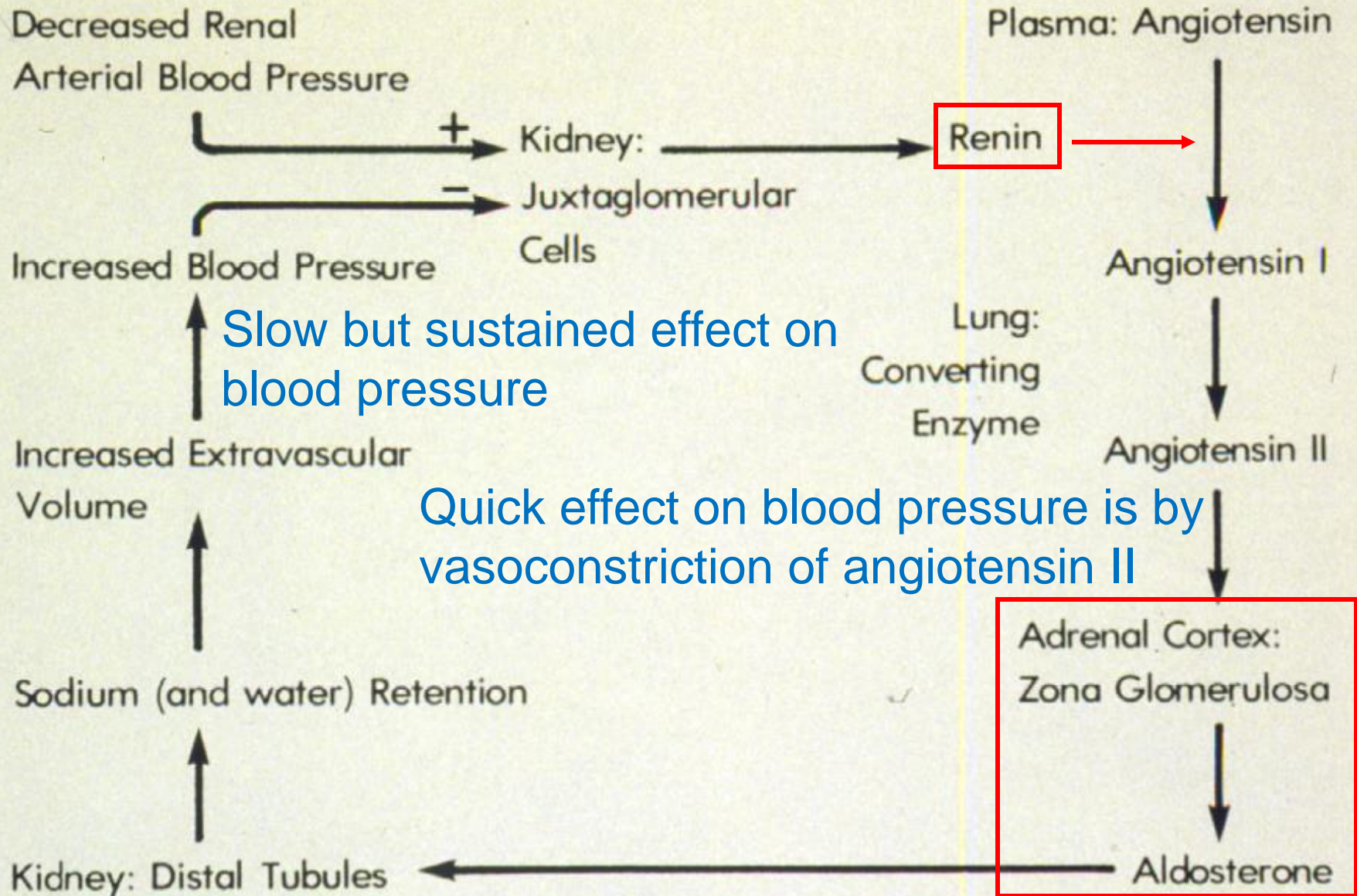
Cortisol - anti-inflammatory effects

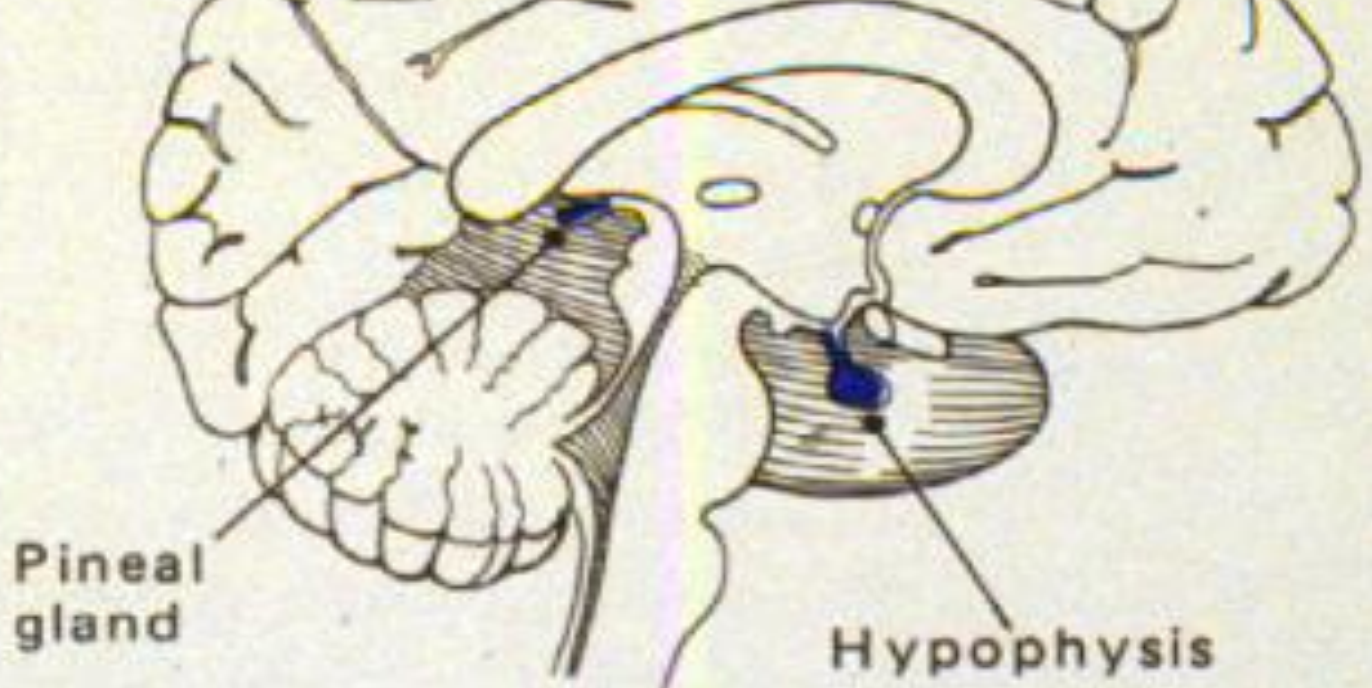
stabilizes lysosomal membranes

causes atrophy of lymphoid tissues throughout body

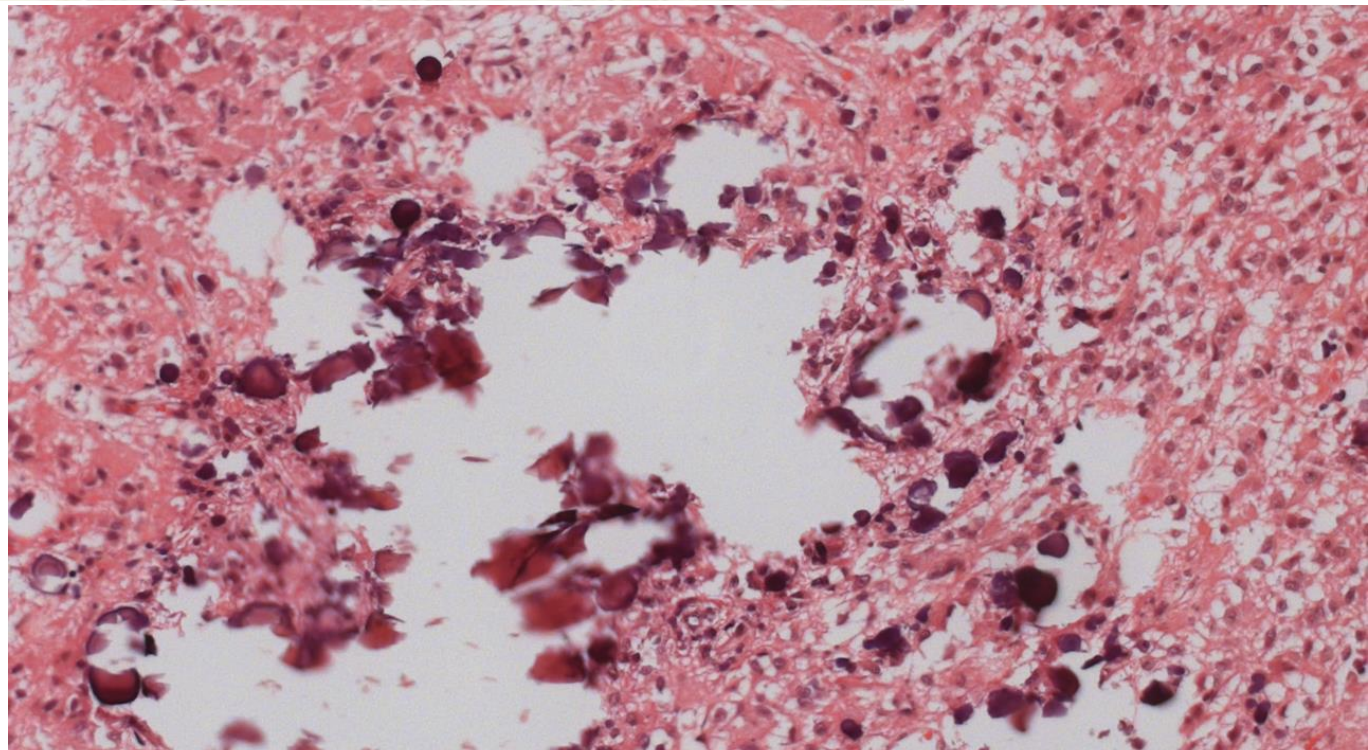
decreases # of circulating lymphocytes

Adrenal function: blood pressure

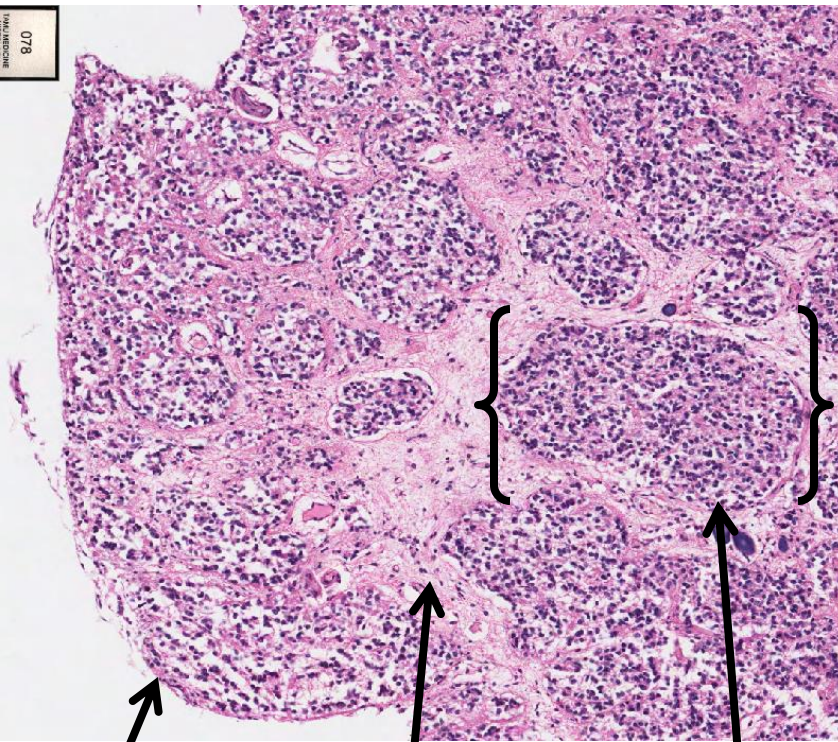




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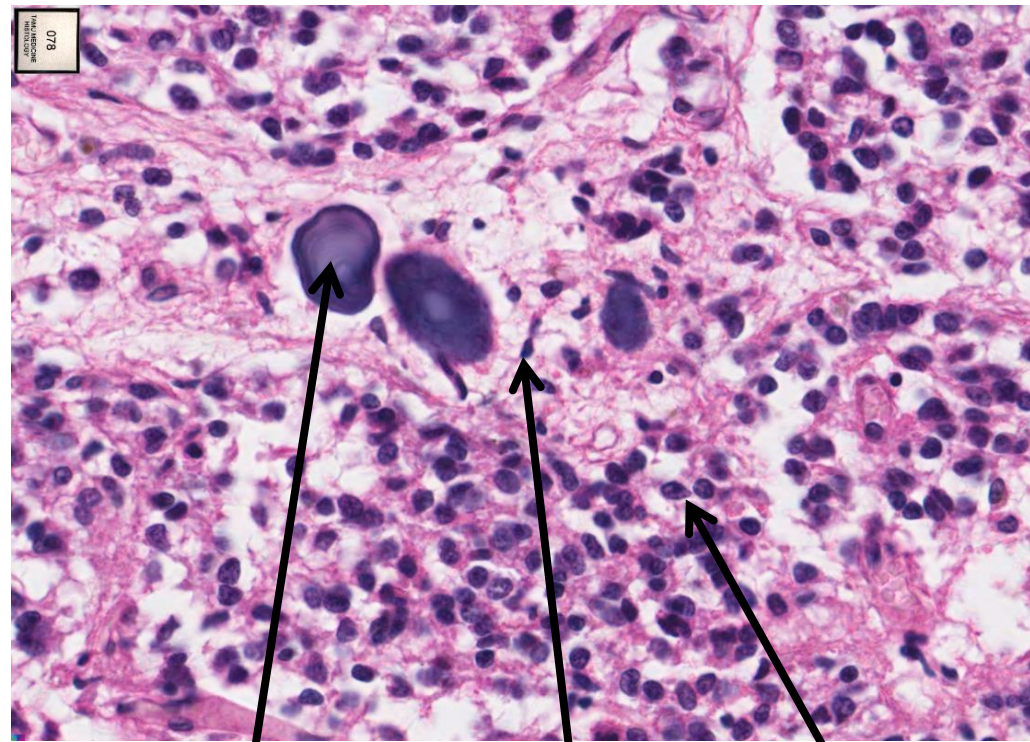
Slide 78: Pineal gland



Capsule

Trabeculae

Lobule



Corpora arenacea
(brain sand)

Neuroglia

Pinealocytes

. Melatonin release highest in the dark period.

Pineal gland: melatonin effect on hamster testis

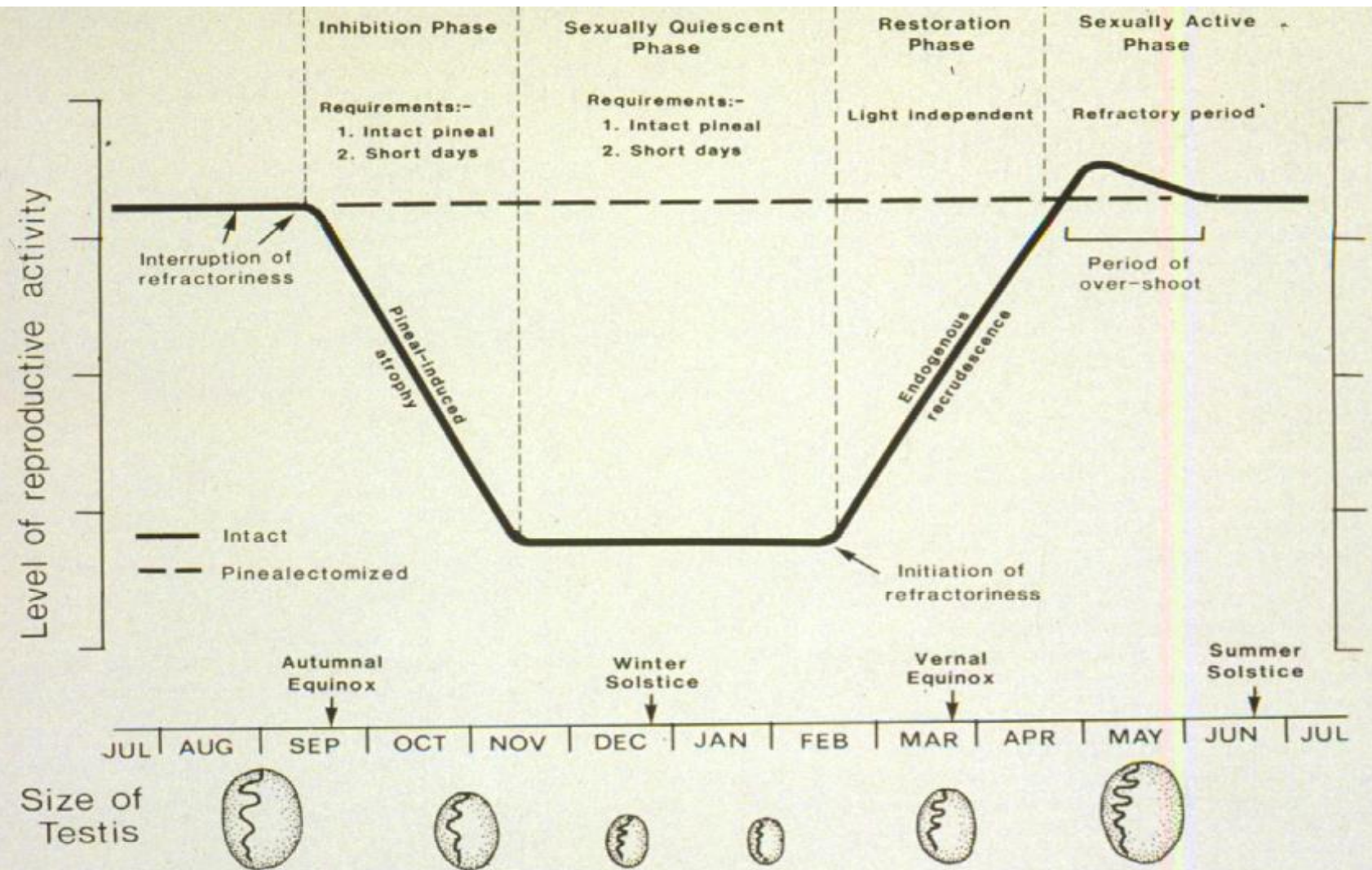


Figure 21-7. Schematic depiction of the relationships between the pineal gland and the annual reproductive cycle of a seasonal breeding species such as the hamster. (From Reiter, R. J. *Endocr. Rev.* 1:109, 1980.)

Pineal gland

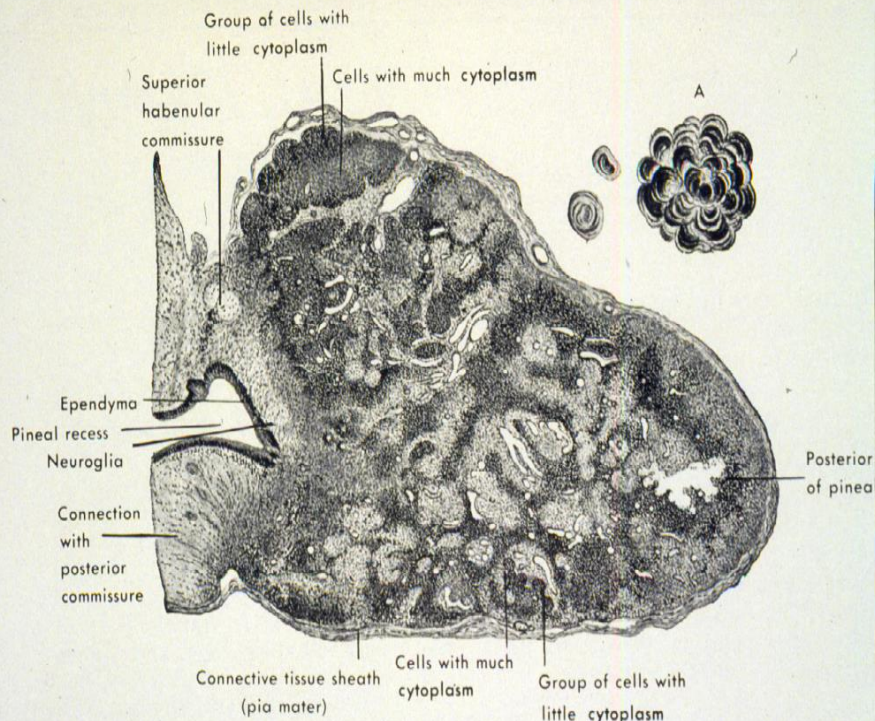
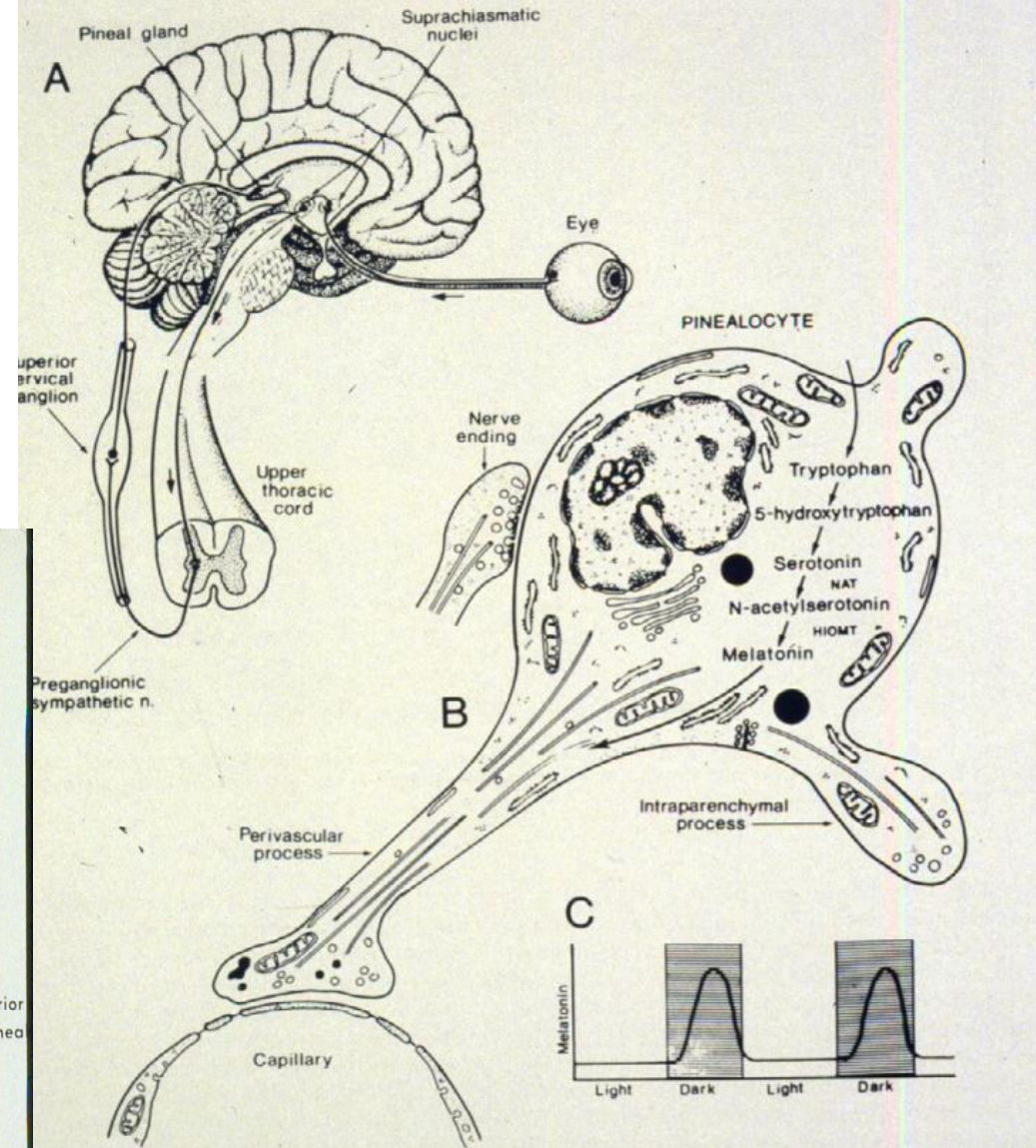
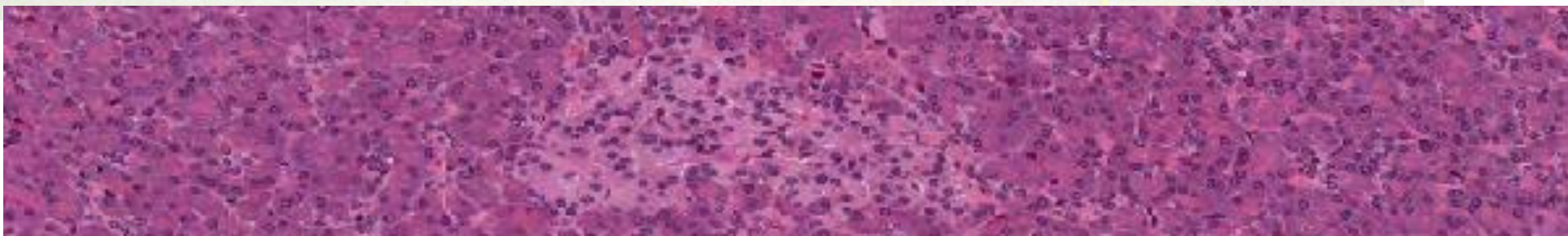
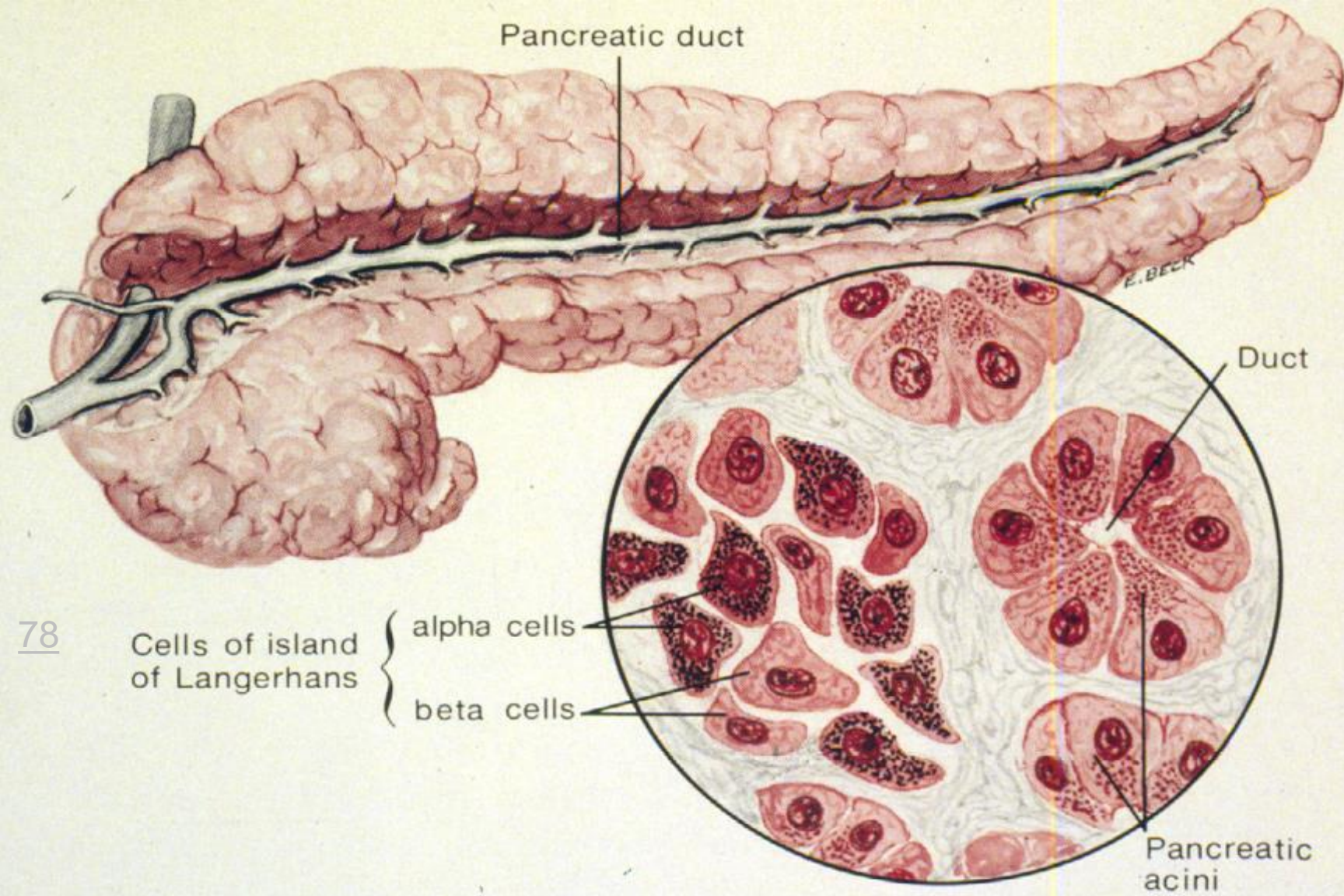


Figure 21-1. Median section through pineal body of a newborn child. Blood vessels empty. $\times 32$. A, Corpora arenacea (sand granules) from the pineal body of a 69-year-old woman. $\times 160$. (After Schaffer.)

PINEAL GLAND



11-6. (A) Path of information transfer from eyes to pineal: via retinohypothalamic tracts to supraoptic nuclei; to intermediolateral column of spinal cord; then via preganglionic sympathetic fibers to superior cervical ganglion; then via postganglionic sympathetic fibers to the pineal. (B) On sympathetic stimulation of the pinealocytes, tryptophan is taken up from the blood and converted to melatonin, which is transported to the ends of perivascular processes for release into the blood. (C) Graph of the light-dark cycle of melatonin concentration in the blood. (After R. J. Reiter, *Endocrinology*, Vol. 1 pp. 240-253, W. B. Saunders, Philadelphia, 1989.)

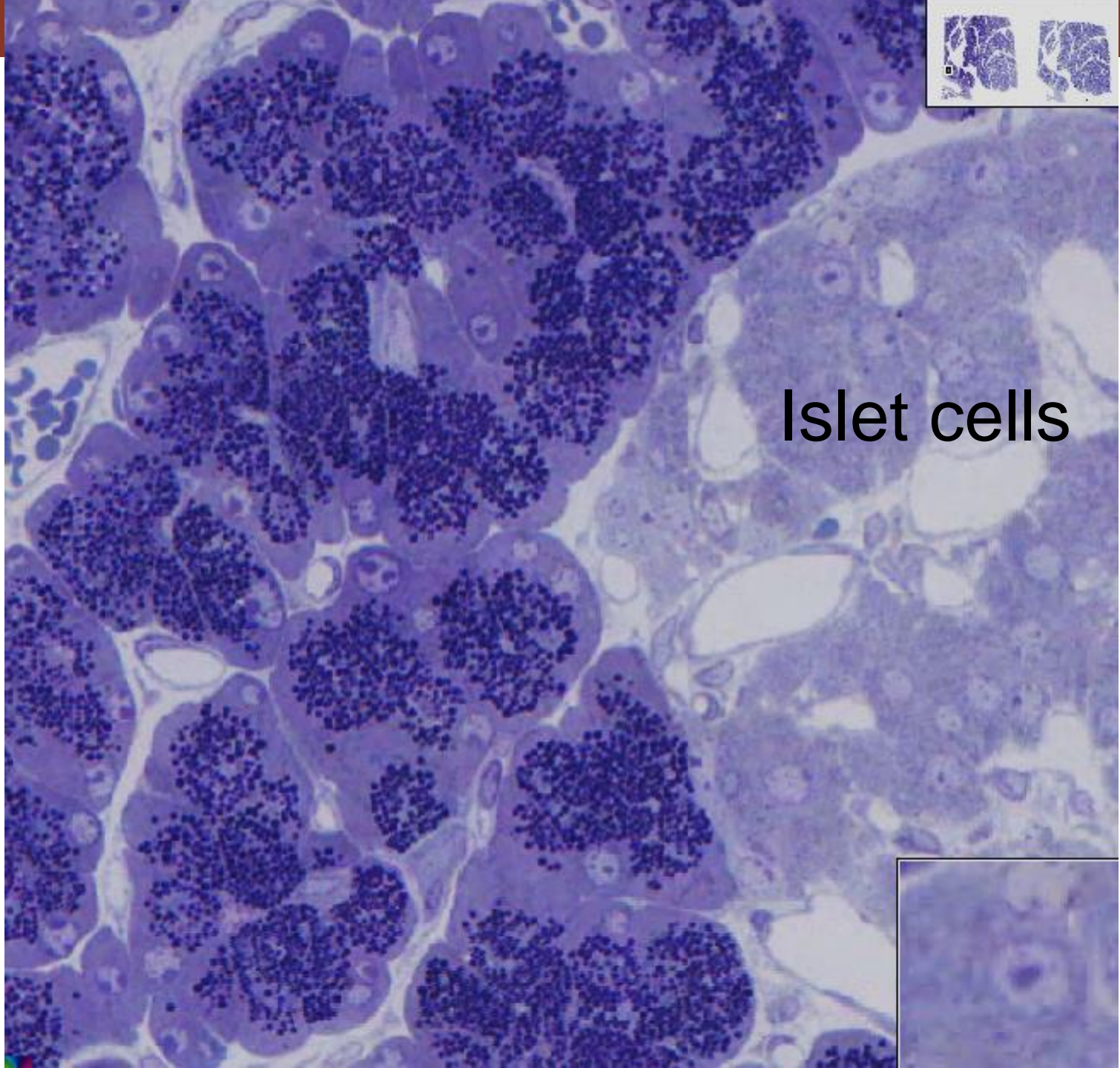


34218

Rat

pancreas

Alpha cells are generally on the border of islets of Langerhans and Beta cells are located more centrally in the islets.



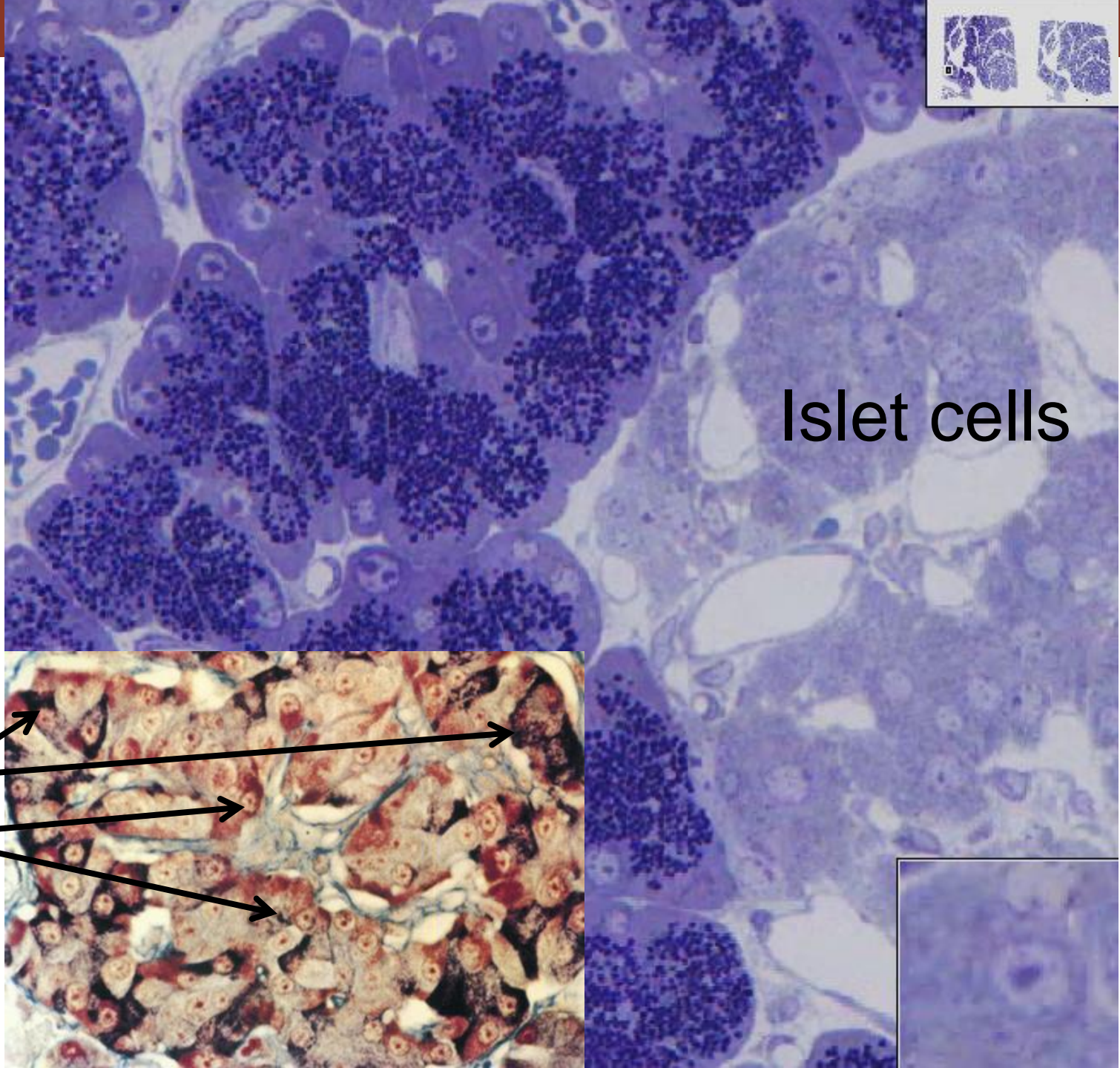
Islet cells

34218

Rat

pancreas

Alpha cells are generally on the border of islets of Langerhans and Beta cells are located more centrally in the islets.



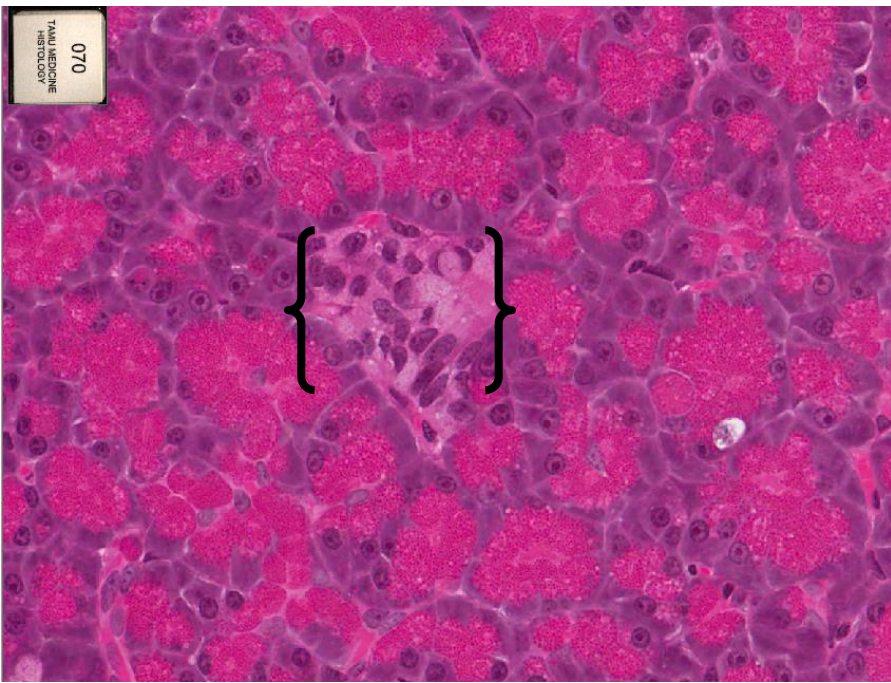
Islet cells

Alpha cells

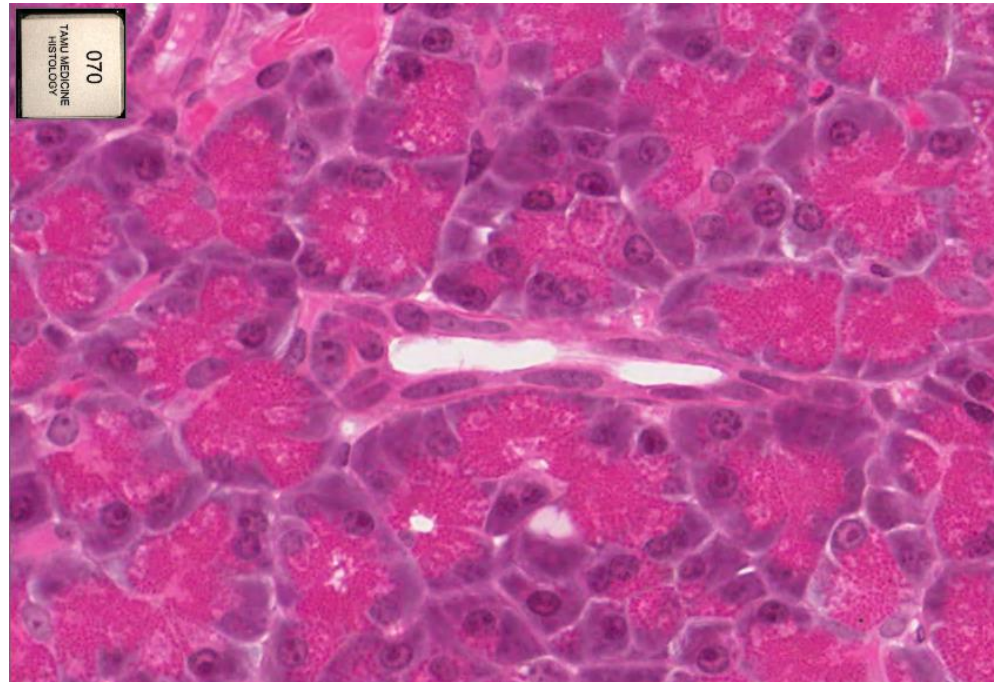
Beta cells

Immunocytochemistry with antibodies against hormones of the alpha and beta cells.

Slide 70: Pancreas (Islets of Langerhans)



Endocrine Islets of
Langerhans



Exocrine pancreatic acini and
exocrine duct

Clinical Correlation

There are numerous diseases that affect the endocrine system. For example, Hashimoto's thyroiditis is an auto-immune disease resulting in hypothyroidism while Grave's disease is the most common form of hyperthyroidism.

Cushing syndrome results from excessive production of glucocorticoids.

However, the most common cause of Cushing syndrome use of oral corticosteroid medication.



Marty Feldman in *Young Frankenstein* (1974) suffered from Grave's disease.



Left untreated, Cushing syndrome can result in exaggerated facial roundness, weight gain around the midsection and upper back, thinning of your arms and legs, and stretch marks

Endocrine System Worksheet

Hormone	Source	Target(s)	Action(s)
GnRH (Gonadotropin-releasing hormone)	Hypothalamus	Adenohypophysis (anterior pituitary)	Stimulates the release of both follicle-stimulating hormone (FSH) and luteinizing hormone (LH)
TRH (Thyrotropin-releasing hormone)	Hypothalamus	Adenohypophysis (anterior pituitary)	Stimulates the release of thyrotropin (TSH)
CRH (Corticotropin-releasing hormone)	Hypothalamus	Adenohypophysis (anterior pituitary)	<ul style="list-style-type: none"> Stimulates synthesis of pro-opiomelanocortin (POMC) Stimulates release of both b-lipotropin (b-LPH) and corticotropin (ACTH)
GH (Growth hormone)	Adenohypophysis (anterior pituitary; acidophils)	Muscle, adipose tissue, bone (whole body effects)	<ul style="list-style-type: none"> Stimulates cellular metabolism, uptake of AA, and protein synthesis. Stimulates growth in epiphyseal plates of long bones via insulin-like growth factors (IGFs) produced in liver. Increases growth of skeletal muscle and increases release of FA from adipose cells for energy production by body cells

Endocrine System Worksheet

Hormone	Source	Target(s)	Action(s)
PRL (Prolactin)	Adenohypophysis (anterior pituitary; acidophils)	Mammary glands	Promotes milk secretion
ACTH (Adrenal corticotropin)	Adenohypophysis (anterior pituitary; basophils)	Adrenal cortex	Stimulates secretion of adrenal cortex hormones
TSH (Thyrotropin)	Adenohypophysis (anterior pituitary; basophils)	Thyroid	Stimulates thyroid hormone synthesis, storage, and liberation
FSH (Follicle-stimulating hormone)	Adenohypophysis (anterior pituitary; basophils)	Testis / Ovaries	<ul style="list-style-type: none"> Promotes spermatogenesis in men Promotes ovarian follicle development and estrogen secretion in women
MSH (Melanocyte-stimulating hormone)	Intermediate lobe of pituitary (pars intermedia)	Melanocytes of skin	Promotes production of melanin resulting in darkening of the skin
ADH (Vasopressin/antidiuretic hormone)	Neurohypophysis (posterior pituitary)	Kidney	Increases water permeability of renal collecting ducts

Endocrine System Worksheet

Hormone	Source	Target(s)	Action(s)
Melatonin	Pineal gland	Hypothalamus, pituitary gland, and other endocrine tissues	Maintains circadian rhythm of physiological functions and behaviors.
Aldosterone	Adrenal cortex (zona glomerulosa)	Kidney	<ul style="list-style-type: none"> Stimulates Na⁺ reabsorption in the distal convoluted tubules. Major regulator of salt balance
Cortisol	Adrenal cortex (zona fasciculata)	Liver, immune system, lipids, muscle, cells of body	<ul style="list-style-type: none"> Involved in stress response Increases circulating blood glucose levels by stimulating gluconeogenesis in many cells and glycogen synthesis in the liver Induces fat mobilization and muscle proteolysis Suppresses many immune functions
Catecholamines (Norepinephrine, Epinephrine)	Adrenal medulla	Nervous system and circulatory system	<ul style="list-style-type: none"> Released during intense emotional reactions (such as fright) 80% catecholamines released from adrenal is epinephrine Increased blood pressure Vasoconstriction Changes in heart rate Elevated blood glucose levels
Thyroglobulin	Thyroid	Cells of body	<ul style="list-style-type: none"> Precursor for active thyroid hormones (T₄ and T₃) Controls basal metabolic rate in cells throughout the body

Endocrine System Worksheet

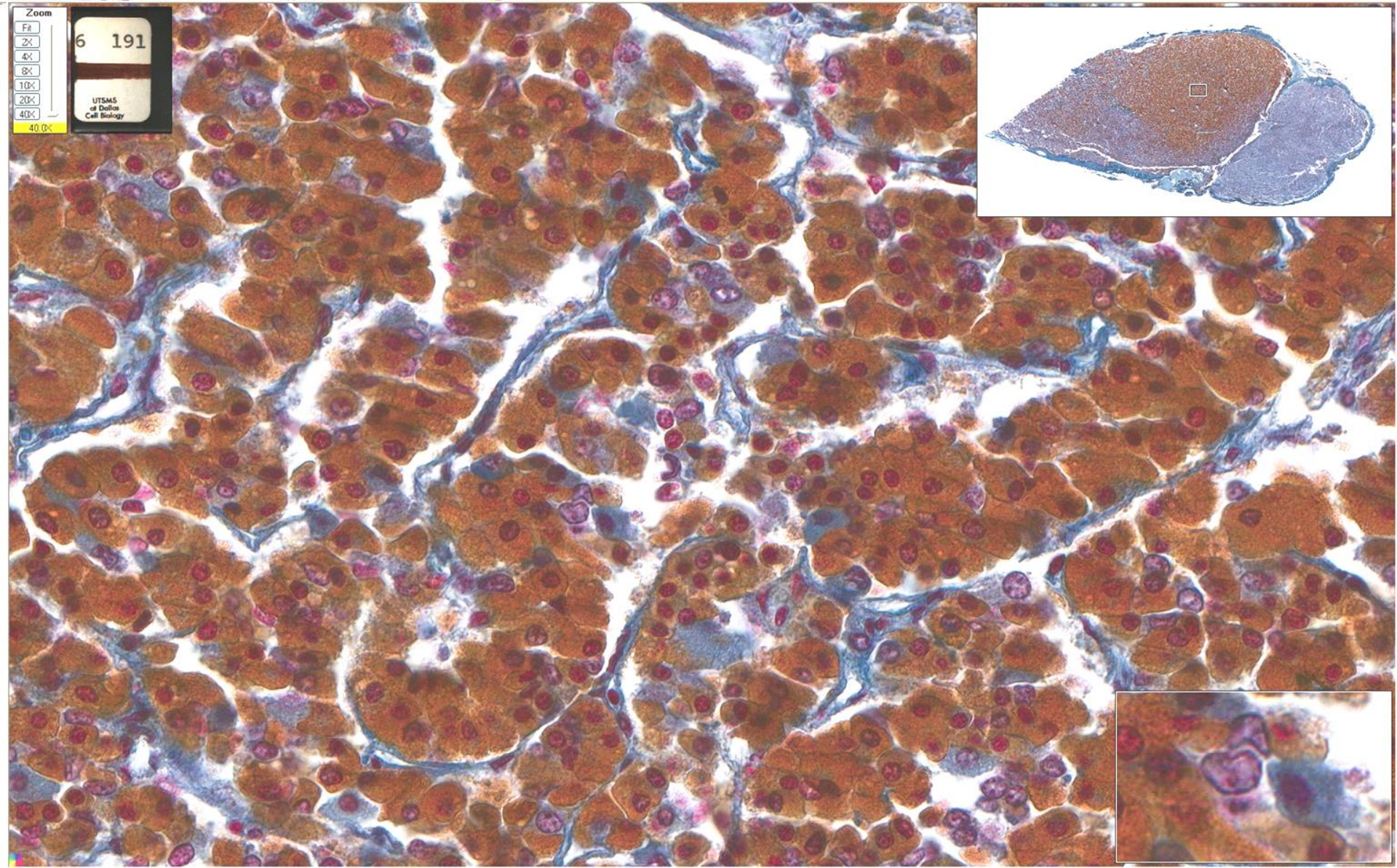
Hormone	Source	Target(s)	Action(s)
Calcitonin	Thyroid (Parafollicular cells)	Osteoclasts in bone	<ul style="list-style-type: none"> • Triggered by elevated blood Ca²⁺ • Inhibits osteoclast activity
PTH (Parathyroid hormone)	Parathyroid	<ul style="list-style-type: none"> • Osteoblasts • Distal convoluted tubules of renal cortex • Small intestine 	<ul style="list-style-type: none"> • Stimulates osteoblasts to produce osteoclast-stimulating factor that increases the number and activity of osteoclasts • Stimulates Ca²⁺ reabsorption in the distal convoluted tubules of renal cortex • Increases Ca²⁺ absorption in the small intestine by stimulating vitamin D activation
Glucagon	Pancreatic islets (alpha cells)	Liver, muscle, and adipose cells	<ul style="list-style-type: none"> • Elevates blood glucose levels • Accelerates conversion of glycogen, AA, and FA in the liver cells into glucose, which is then released into bloodstream
Insulin	Pancreatic islets (beta cells)	Liver, muscle, and adipose cells	<ul style="list-style-type: none"> • Lowers blood glucose levels • Accelerates membrane transport of glucose into liver cells, muscle cells, and adipose cells • Accelerates conversion of glucose into glycogen in liver cells

Many illustrations in these VIBS Histology YouTube videos were modified from the following books and sources: Many thanks to original sources!

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- Nature (<http://www.nature.com>), Vol. 414:88,2001.
- A.L. Mescher 2013 *Junqueira's Basis Histology text and atlas, 13th ed.* McGraw
- Douglas P. Dohrman and TAMHSC Faculty 2012 *Structure and Function of Human Organ Systems, Histology Laboratory Manual* - Slide selections were largely based on this manual for first year medical students at TAMHSC



pars distalis of Pituitary (Herlant's stain) with chromophobe cells, acidophils, and basophils



VARIATIONS IN THE MICROVASCULATURE

COMMON

ARTERIOLE ⇒ **CAPILLARY** ⇒
VENULE

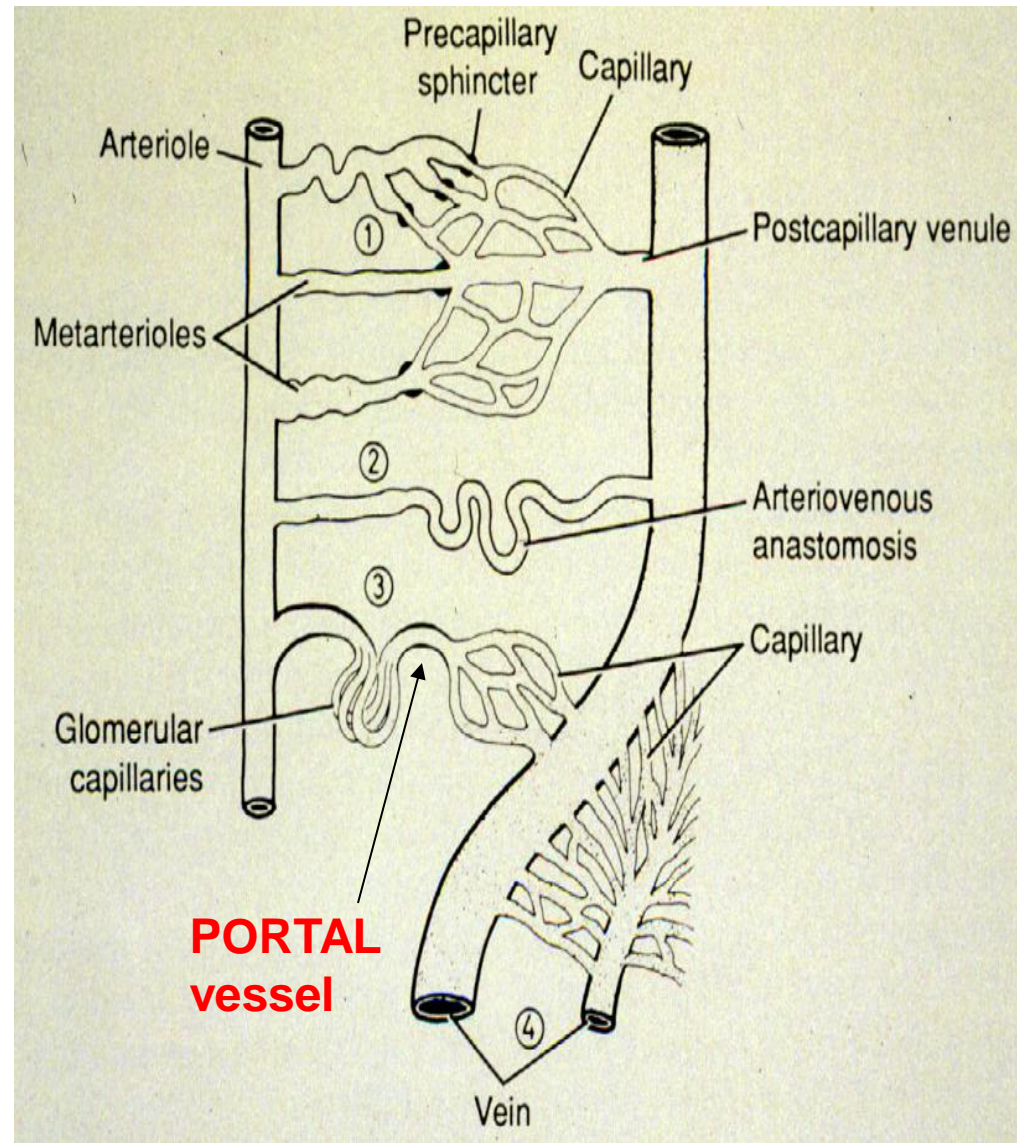
VENOUS PORTAL SYSTEM

CAPILLARY ⇒ **PORTAL VEIN**
⇒ CAPILLARY

ARTERIAL PORTAL SYSTEM

CAPILLARY ⇒ **PORTAL**
ARTERIOLE ⇒ CAPILLARY

Portal system
create a local change in
blood composition



VARIATIONS IN THE MICROVASCULATURE

COMMON

ARTERIOLE ⇒ **CAPILLARY** ⇒
VENULE

VENOUS PORTAL SYSTEM

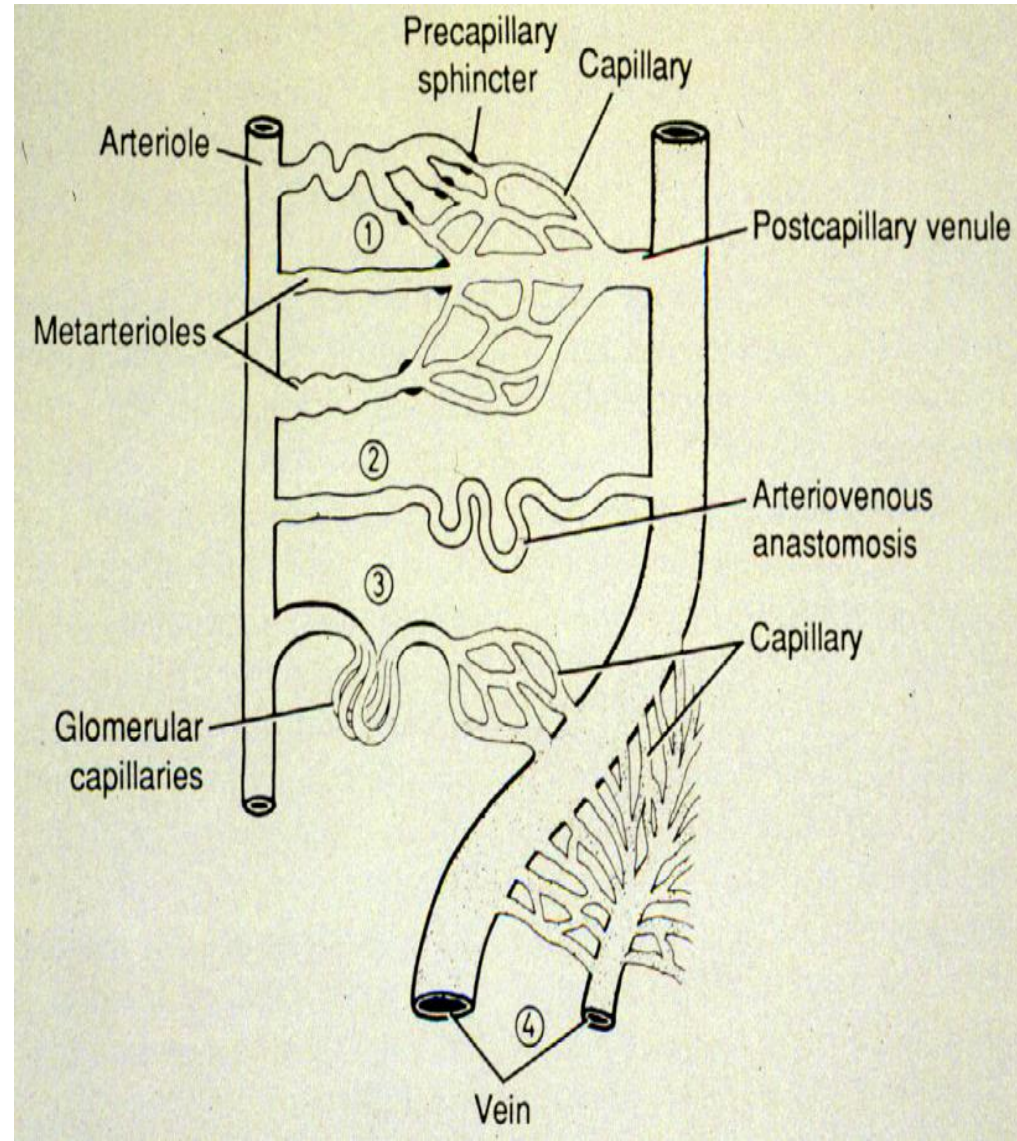
CAPILLARY ⇒ **PORTAL VEIN**
⇒ CAPILLARY

(ENDOCRINE EXAMPLE ?)

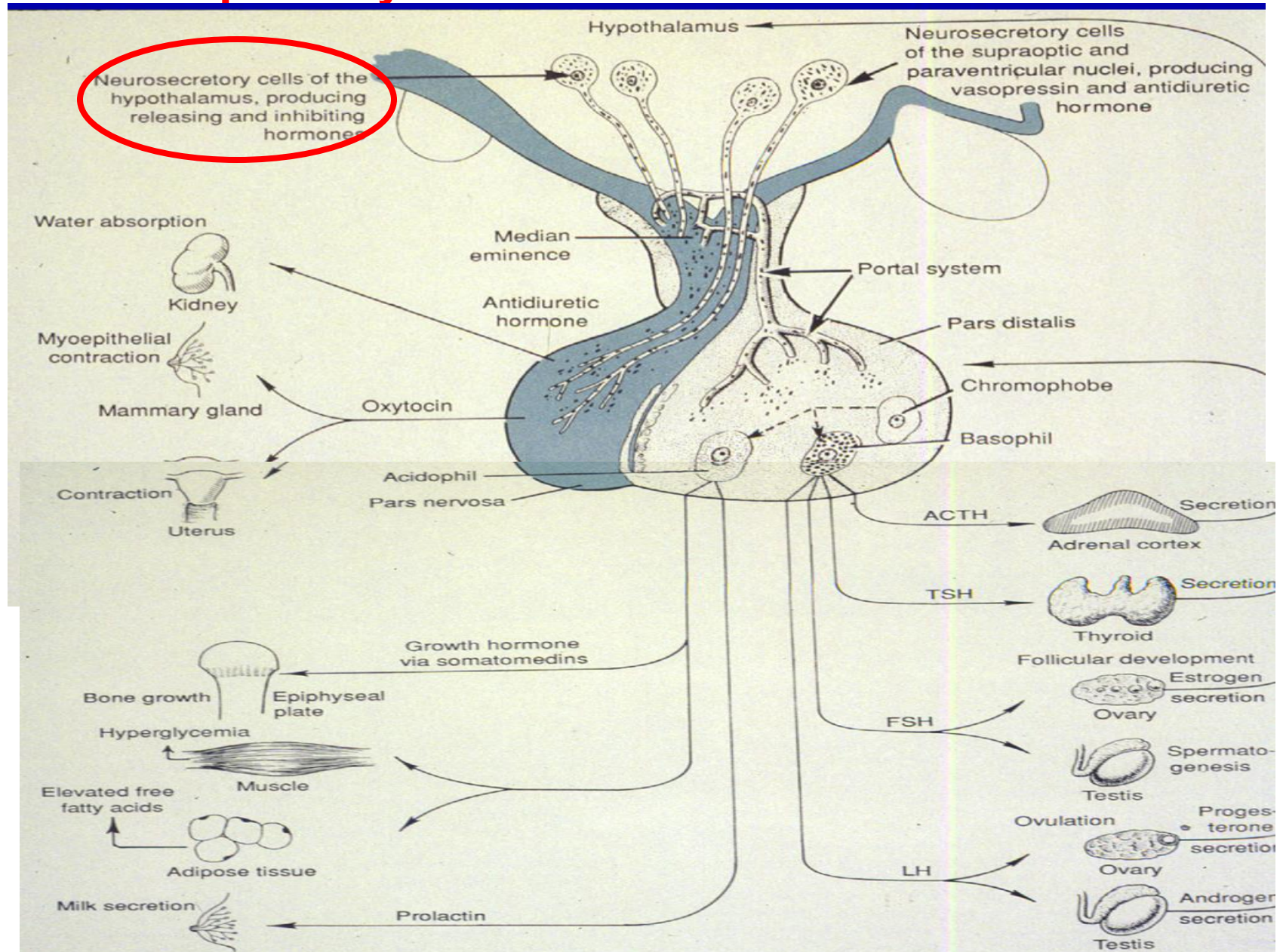
ARTERIAL PORTAL SYSTEM

CAPILLARY ⇒ **PORTAL**
ARTERIOLE ⇒ CAPILLARY

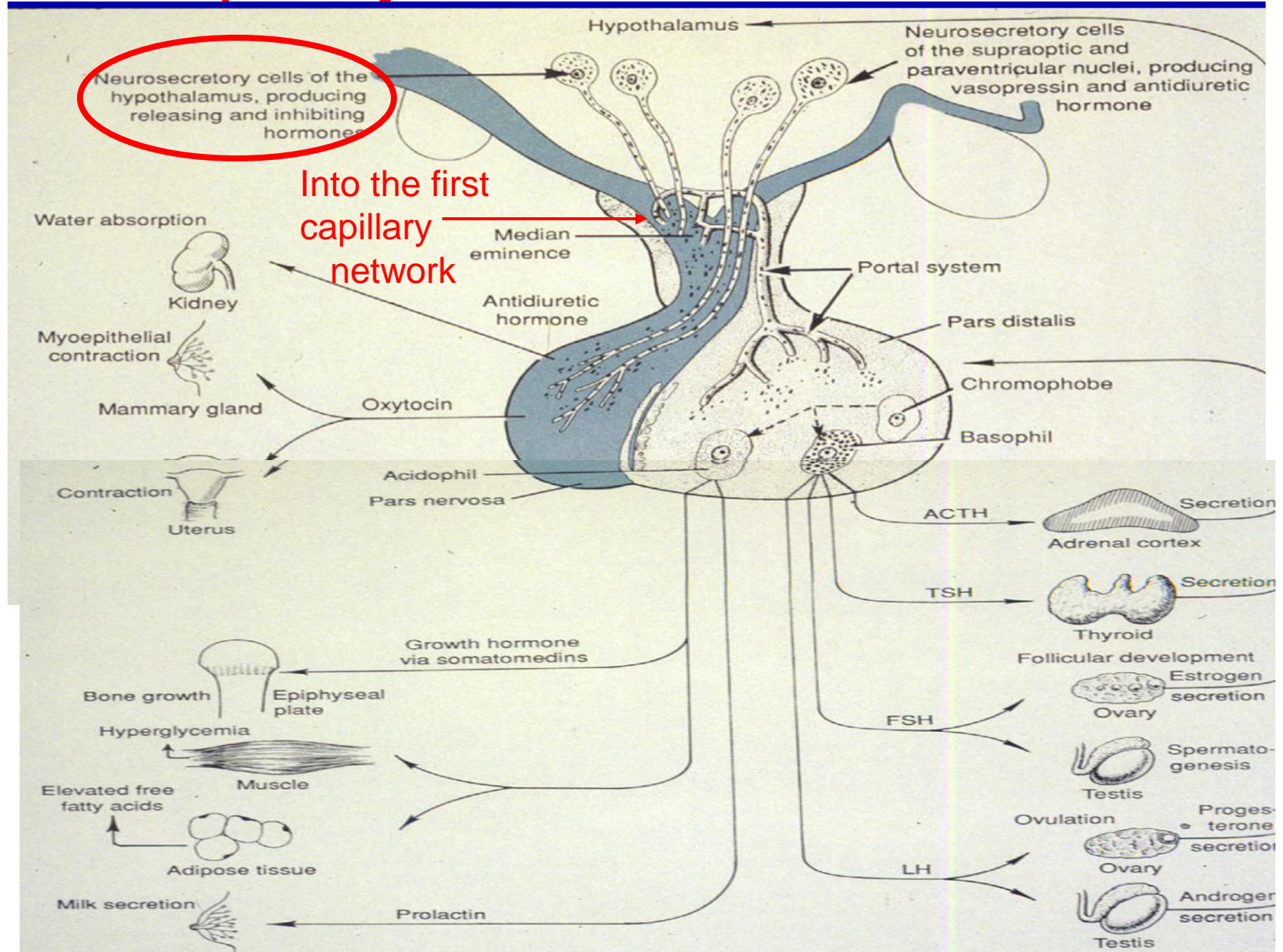
(ENDOCRINE EXAMPLE ?)



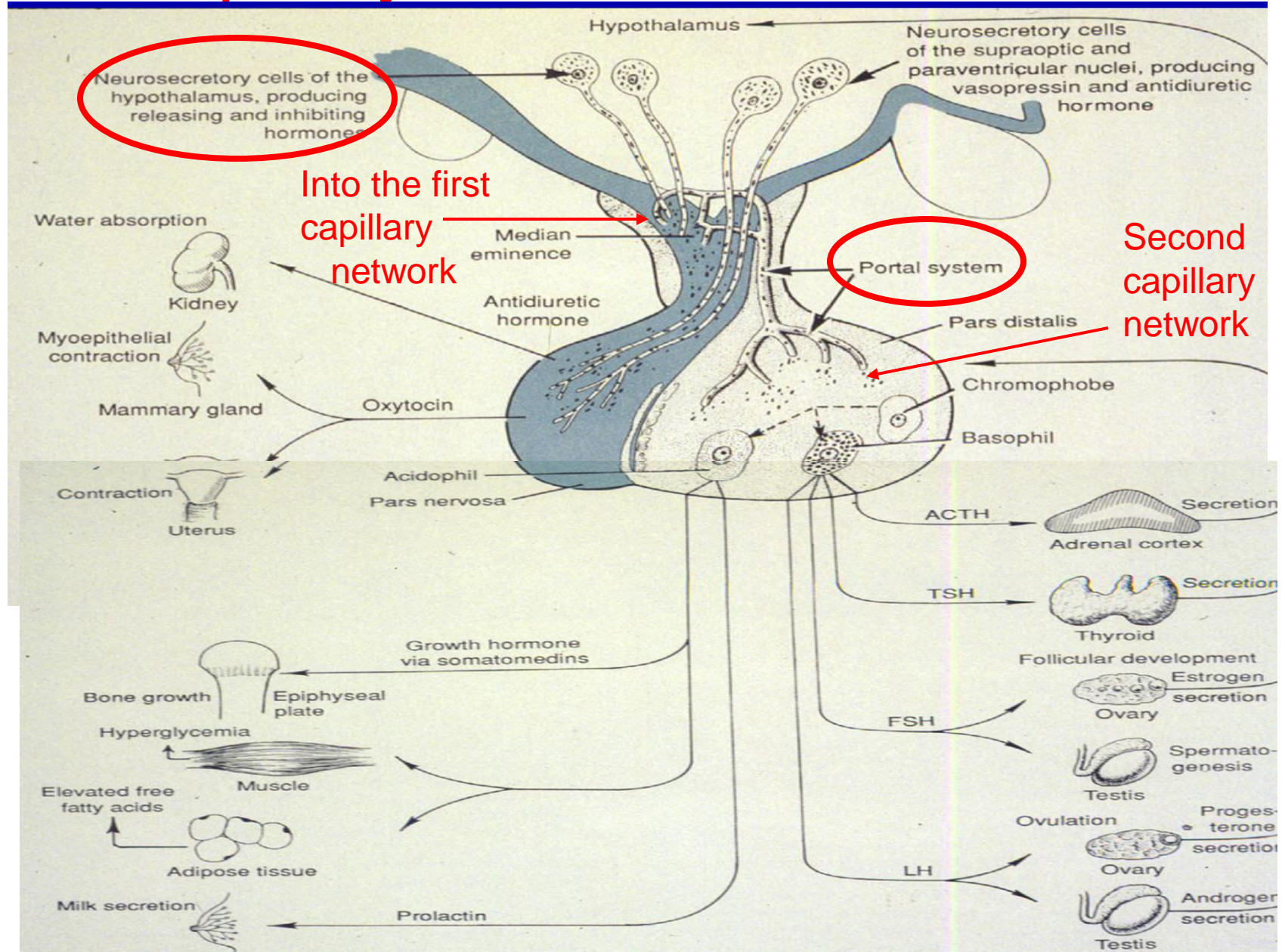
Releasing hormones are distributed in second capillary bed of **venous portal system**

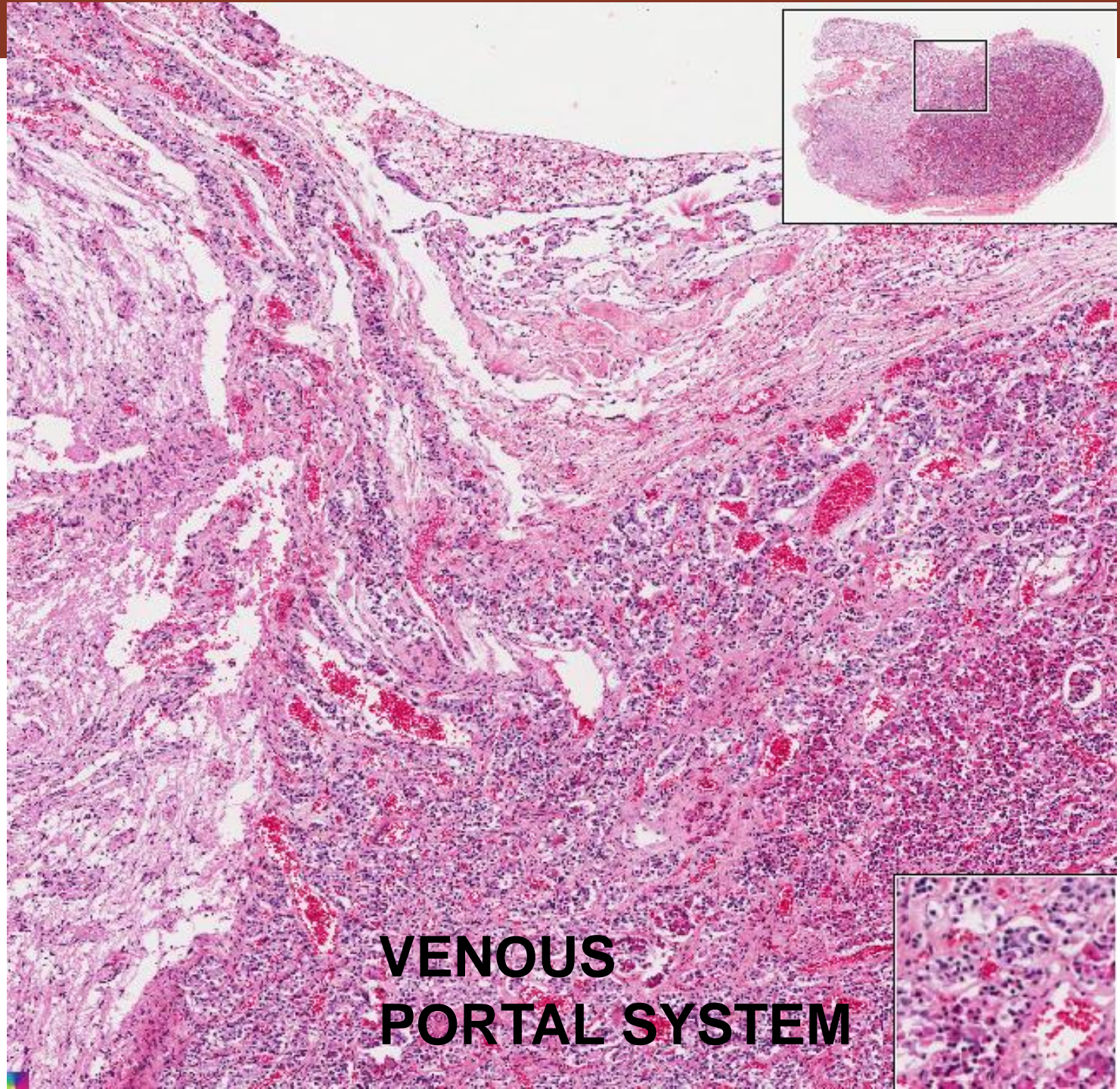


Releasing hormones are distributed in second capillary bed of **venous portal system**

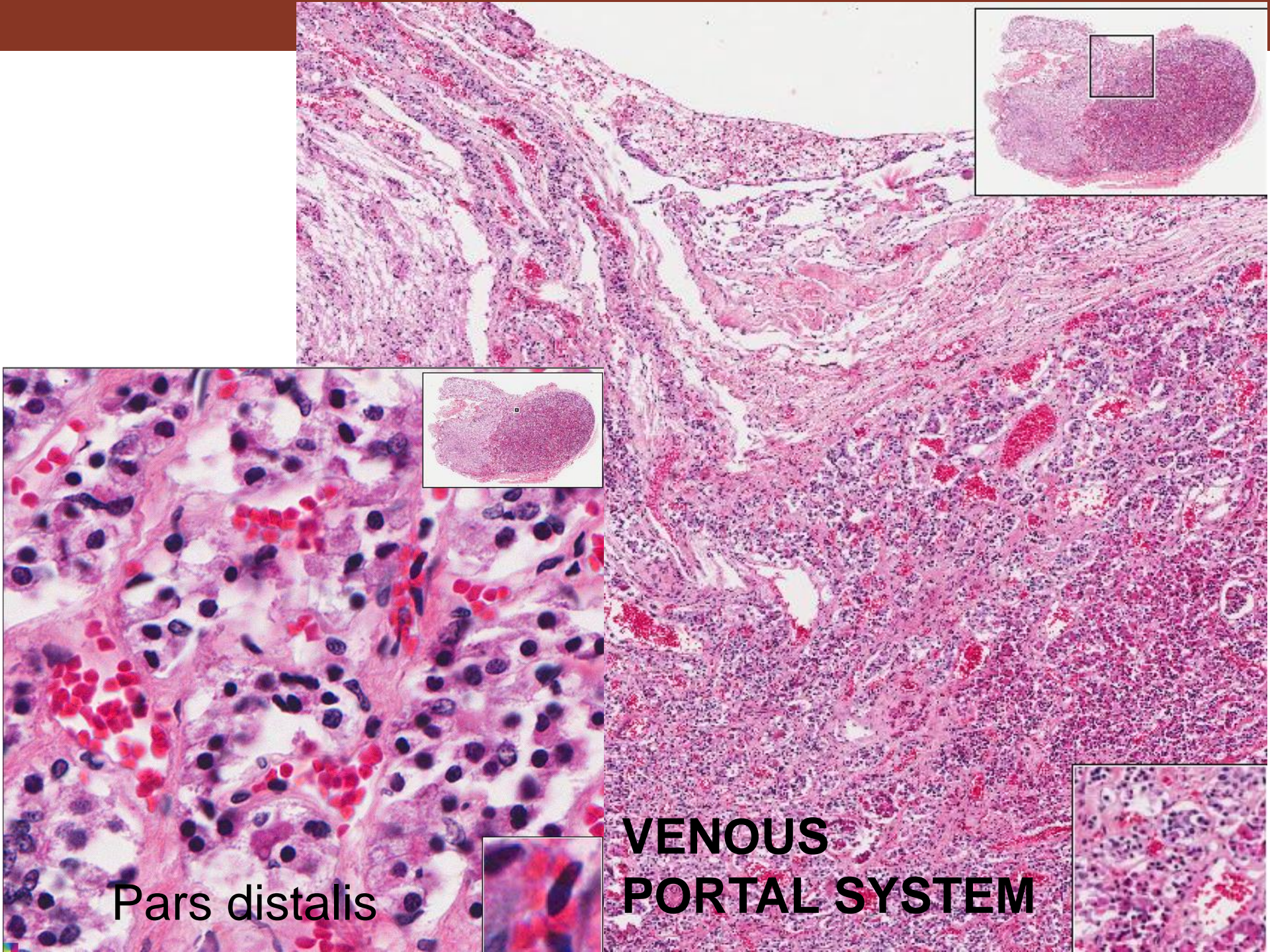


Releasing hormones are distributed in second capillary bed of venous portal system





**VENOUS
PORTAL SYSTEM**

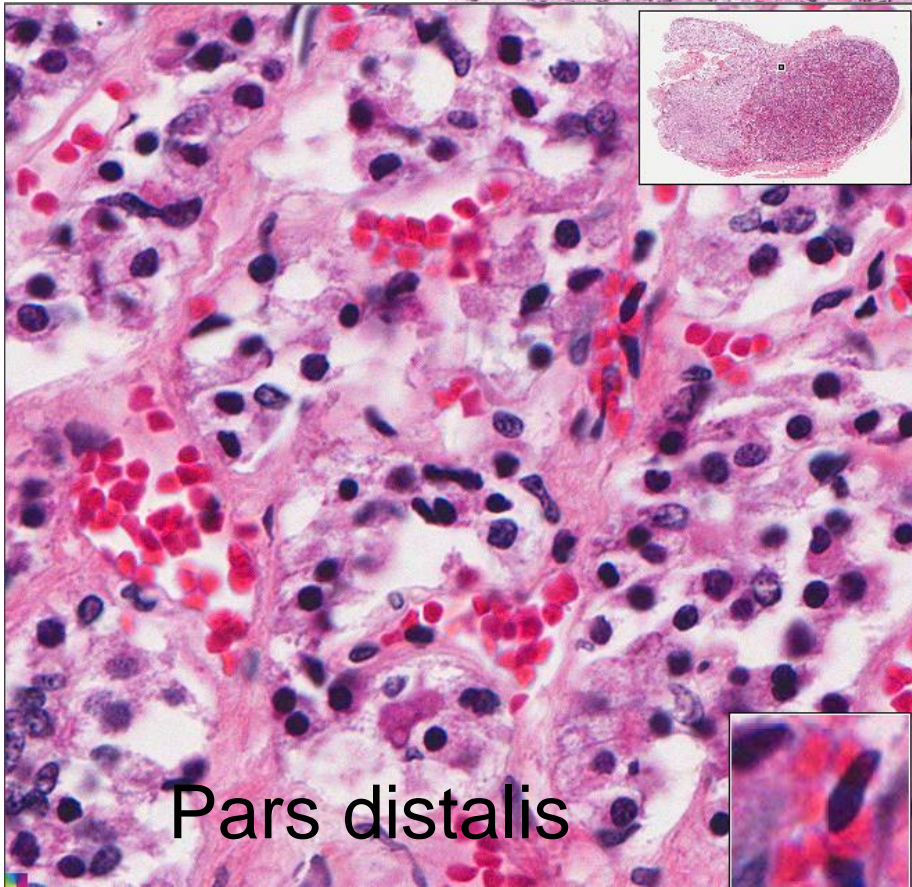
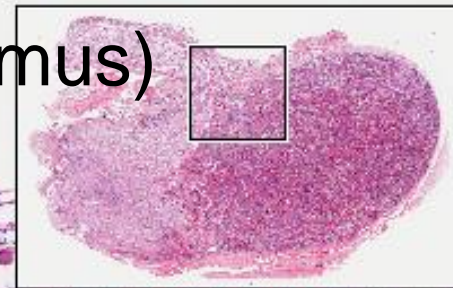


Pars distalis

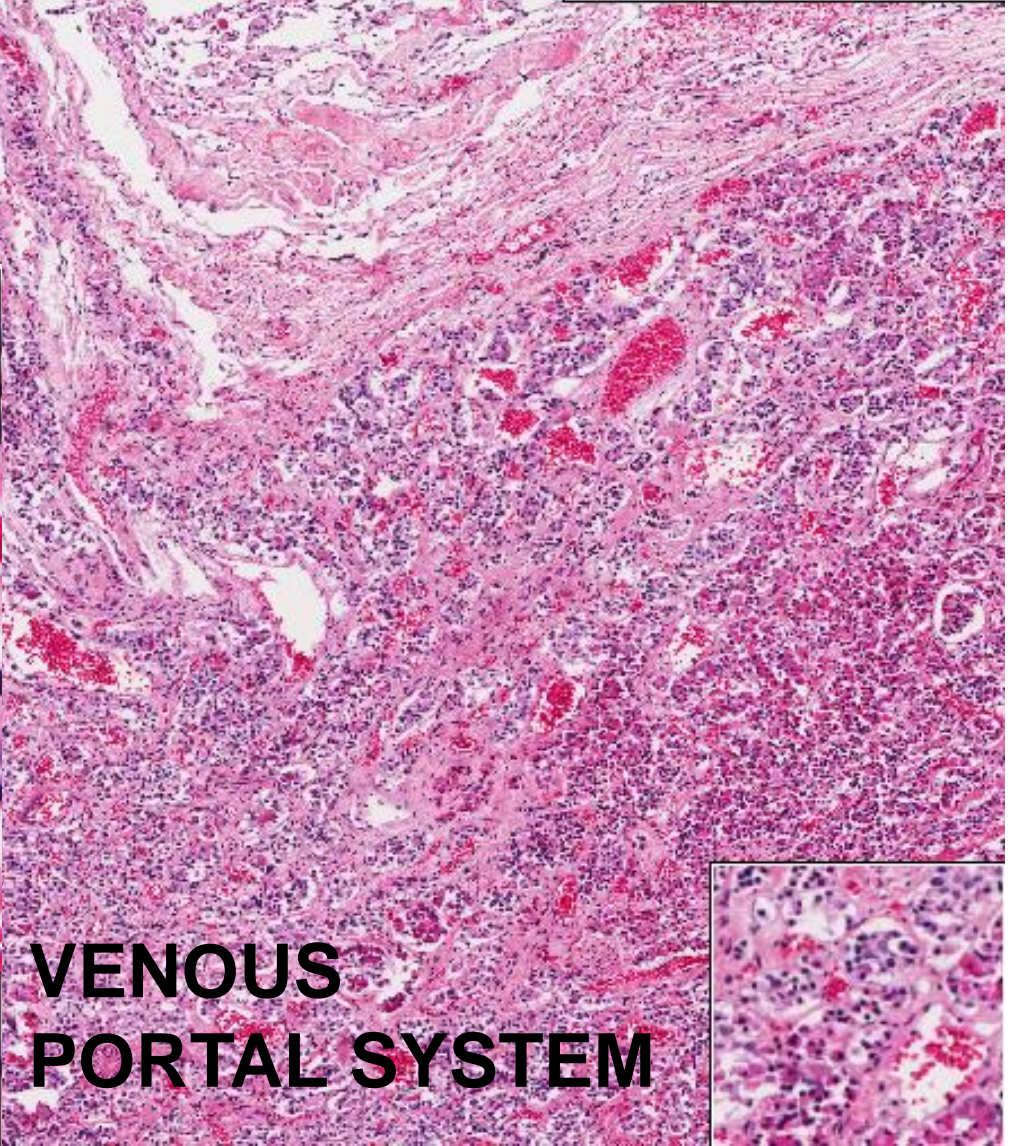
**VENOUS
PORTAL SYSTEM**

(1 st CAPILLARY in hypothalamus)

PORTAL VEIN
In stalk



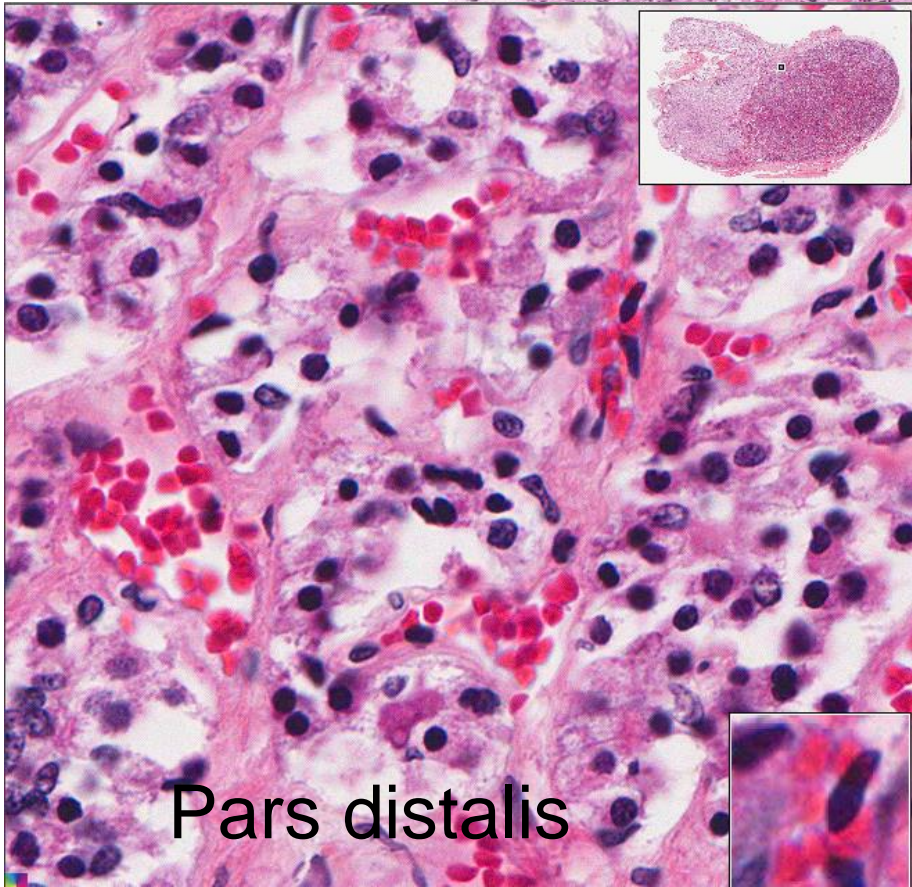
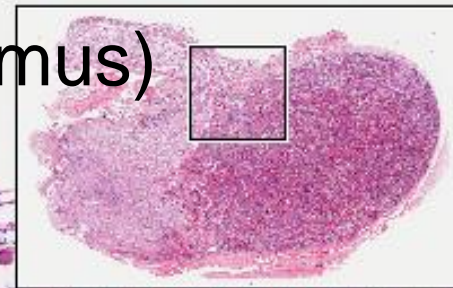
Pars distalis



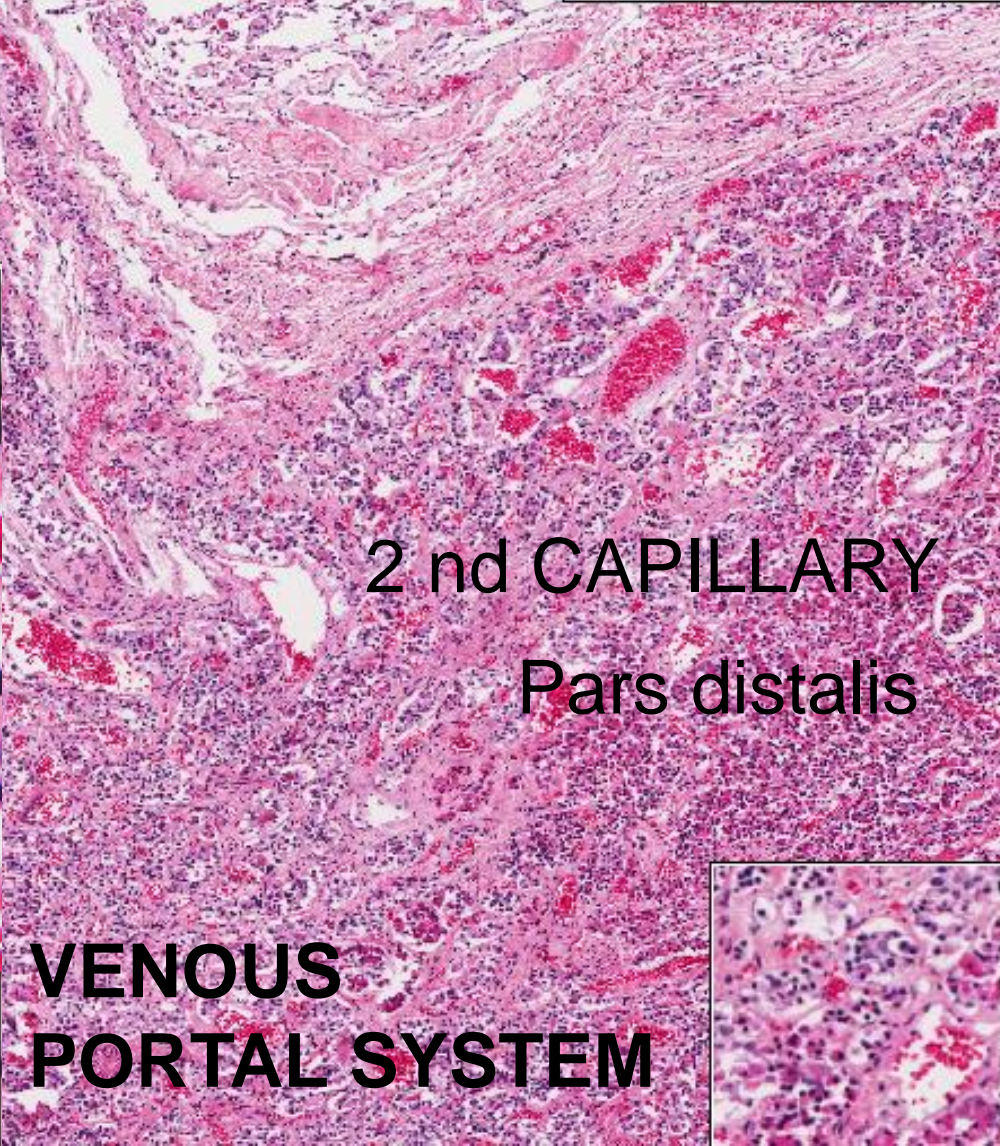
VENOUS
PORTAL SYSTEM

(1 st CAPILLARY in hypothalamus)

PORTAL VEIN
In stalk

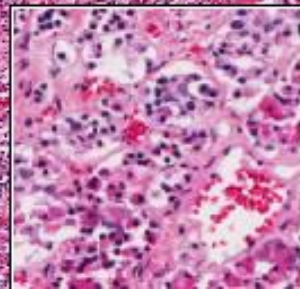


Pars distalis



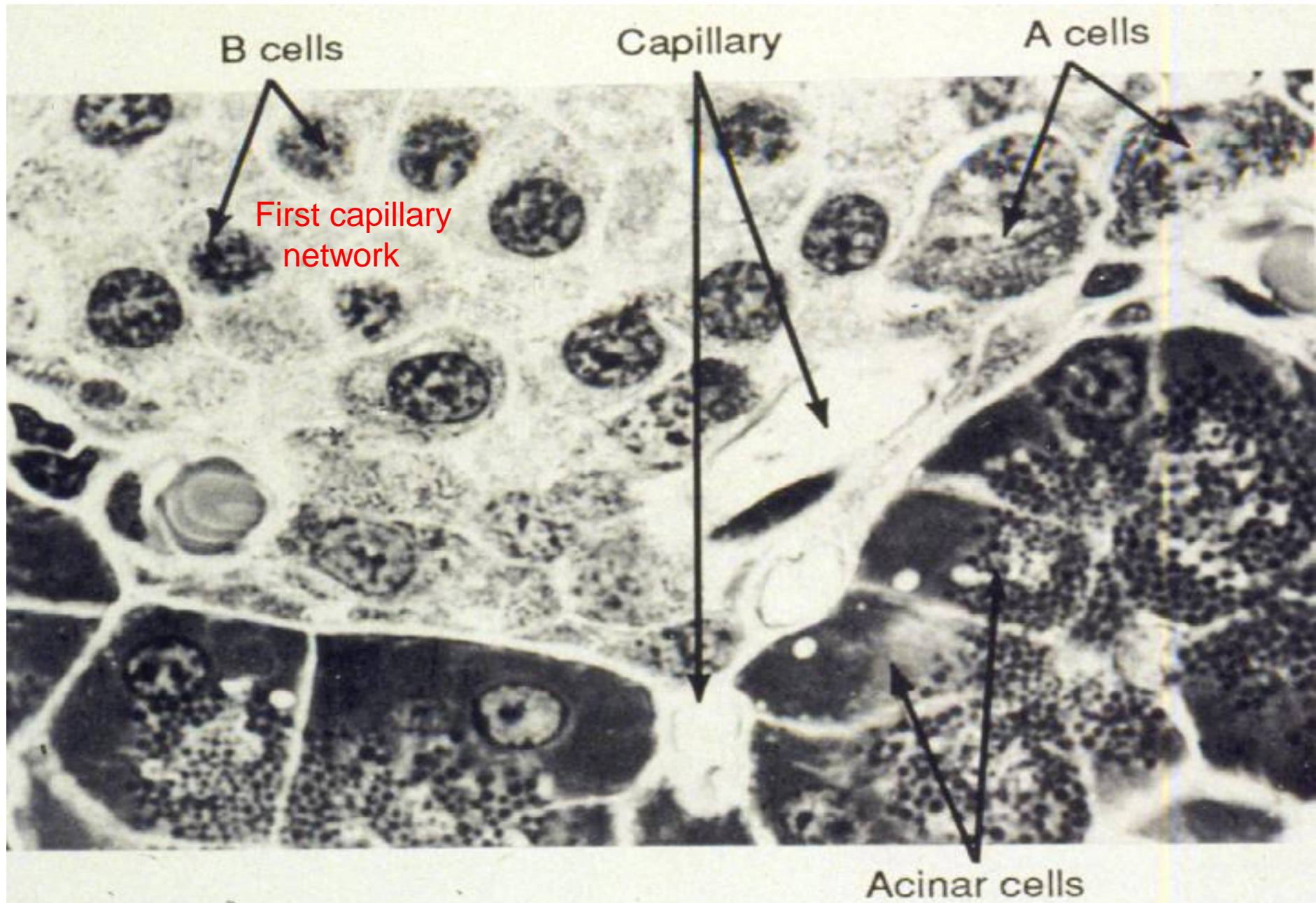
2 nd CAPILLARY
Pars distalis

**VENOUS
PORTAL SYSTEM**



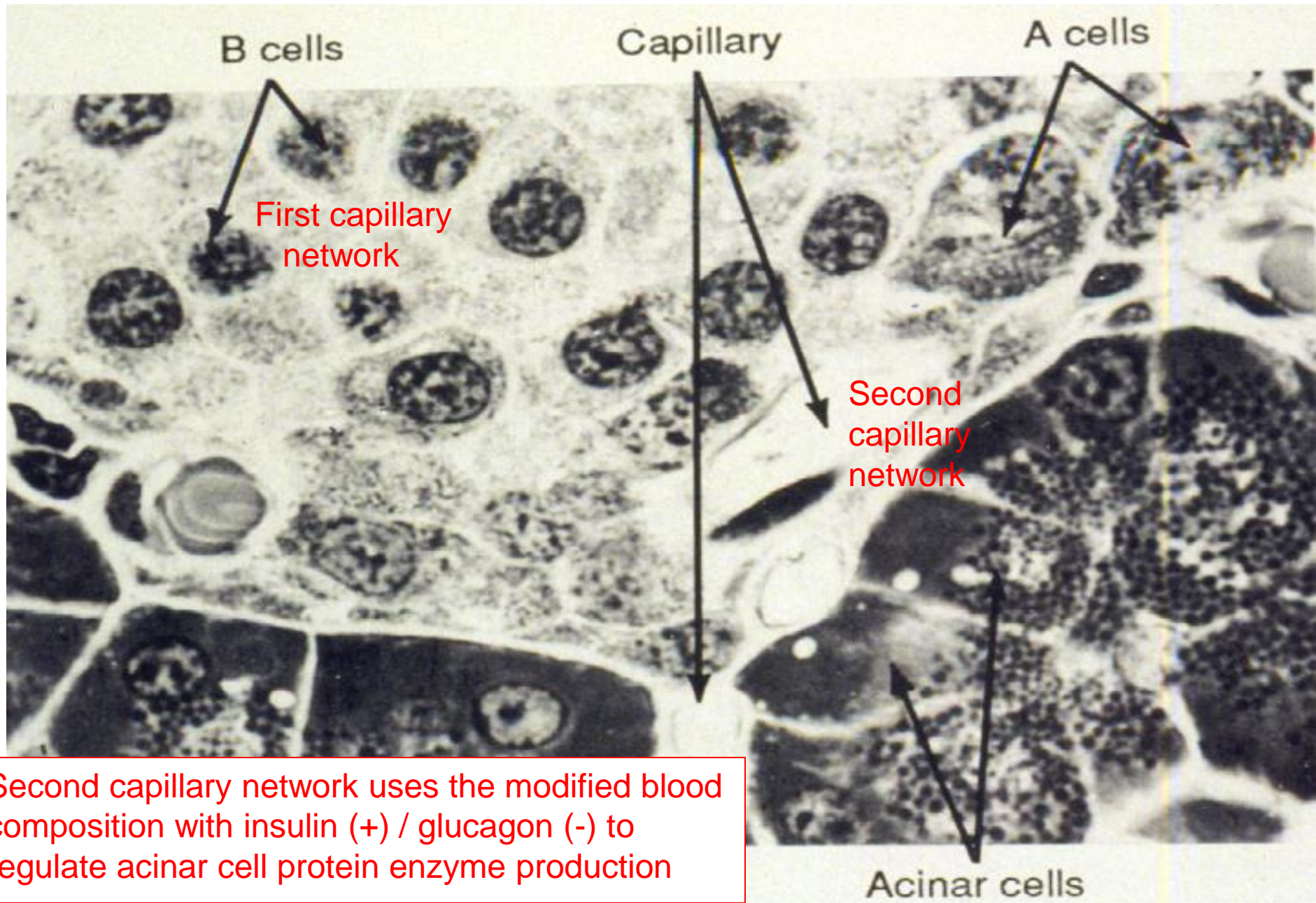
ISLETS Of

First capillary network of the **ARTERIAL PORTAL SYSTEM**



ISLETS Of

First capillary network of the **ARTERIAL PORTAL SYSTEM**



First capillary network

Second capillary network

Acinar cells

Second capillary network uses the modified blood composition with insulin (+) / glucagon (-) to regulate acinar cell protein enzyme production

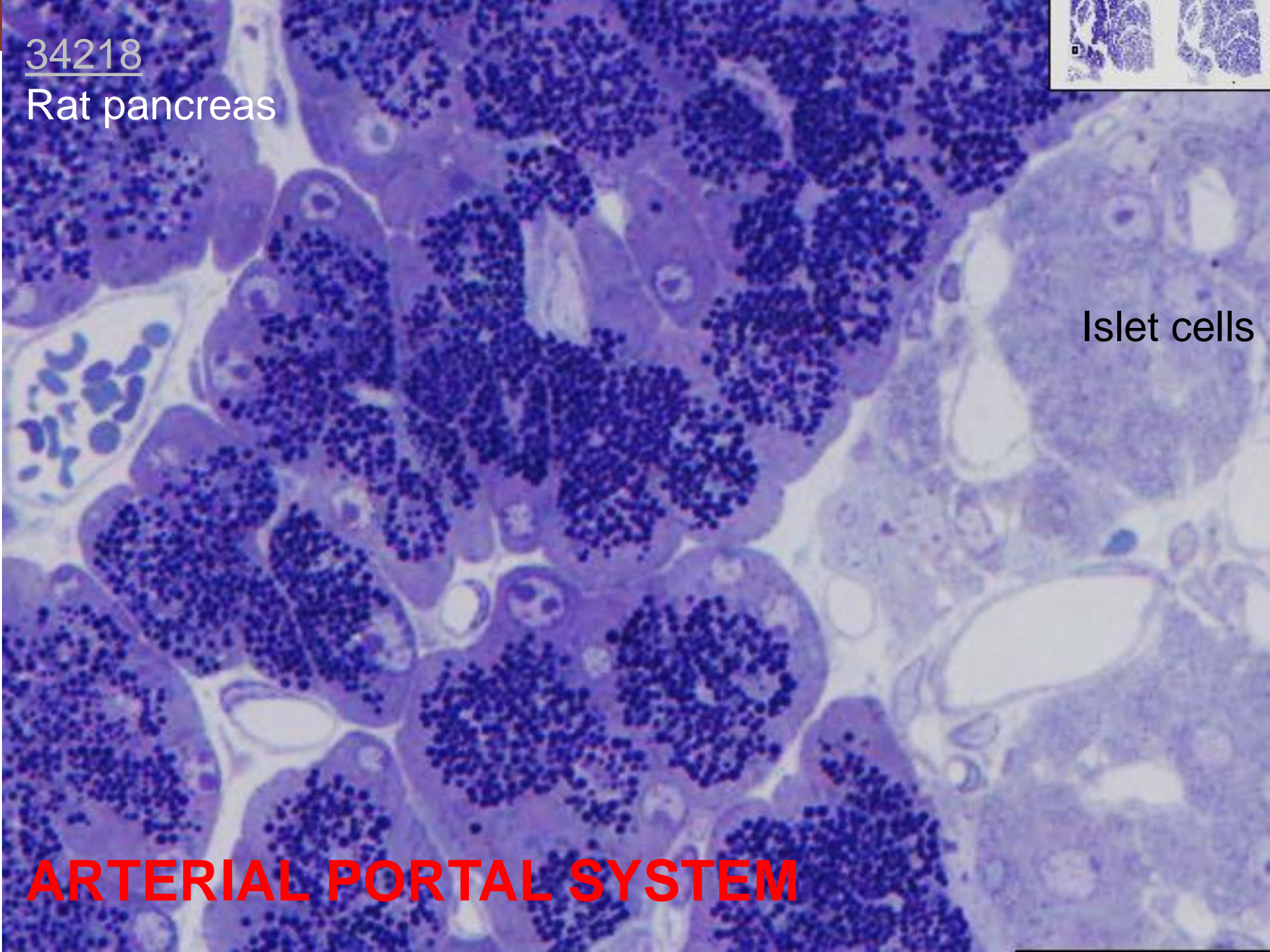
34218

Rat pancreas



Islet cells

ARTERIAL PORTAL SYSTEM



34218

Rat pancreas

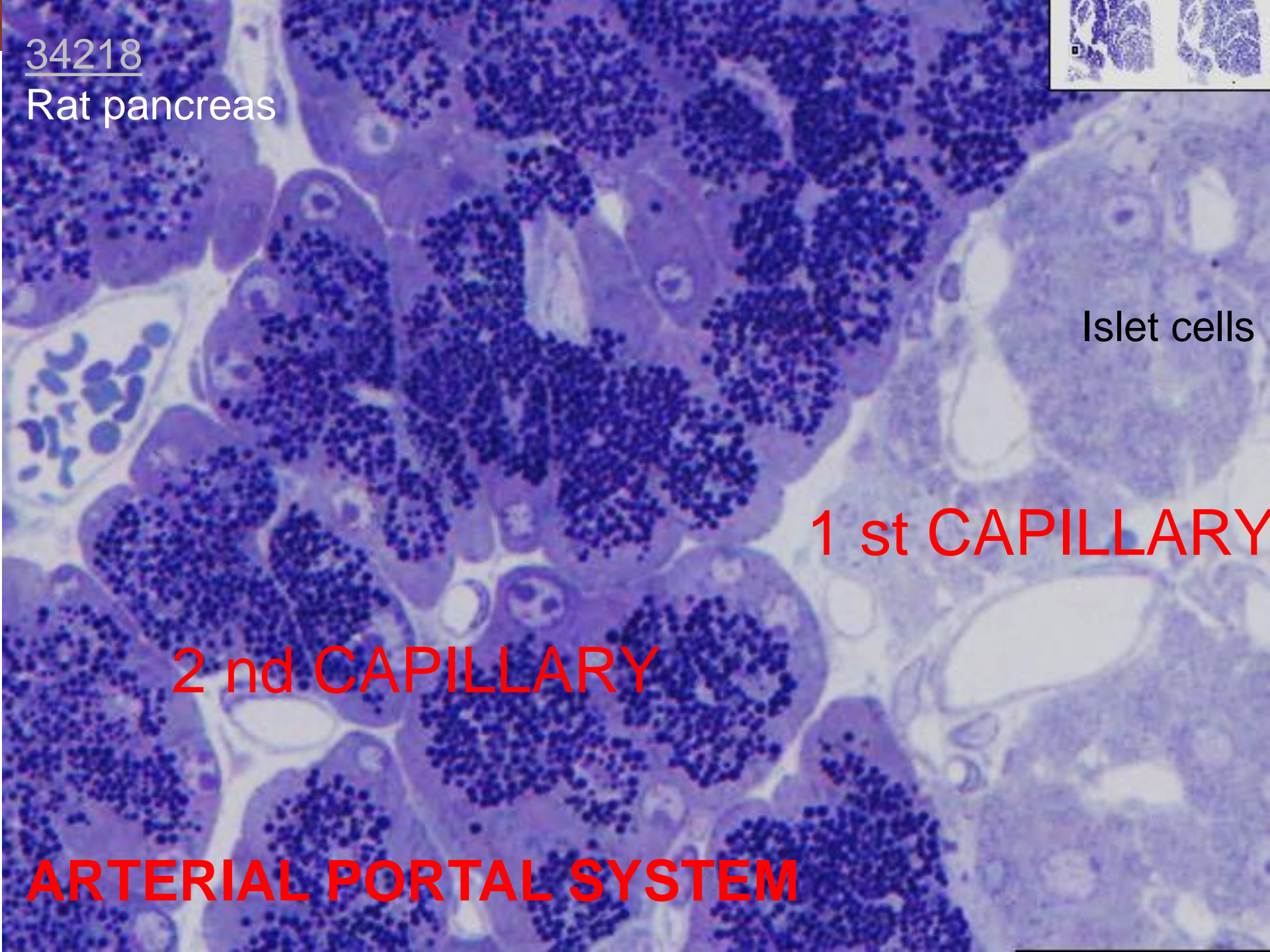


Islet cells

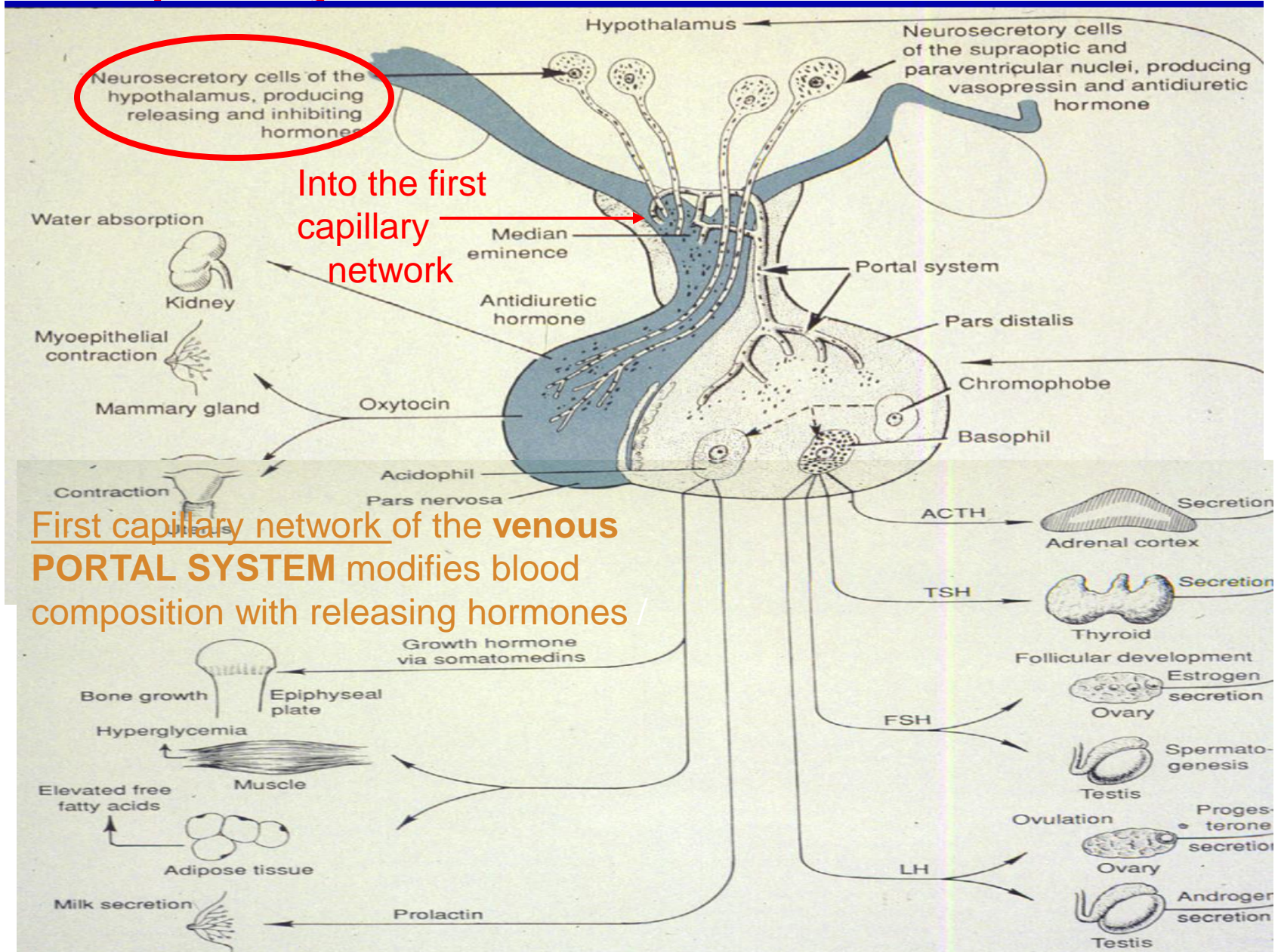
1 st CAPILLARY

2 nd CAPILLARY

ARTERIAL PORTAL SYSTEM



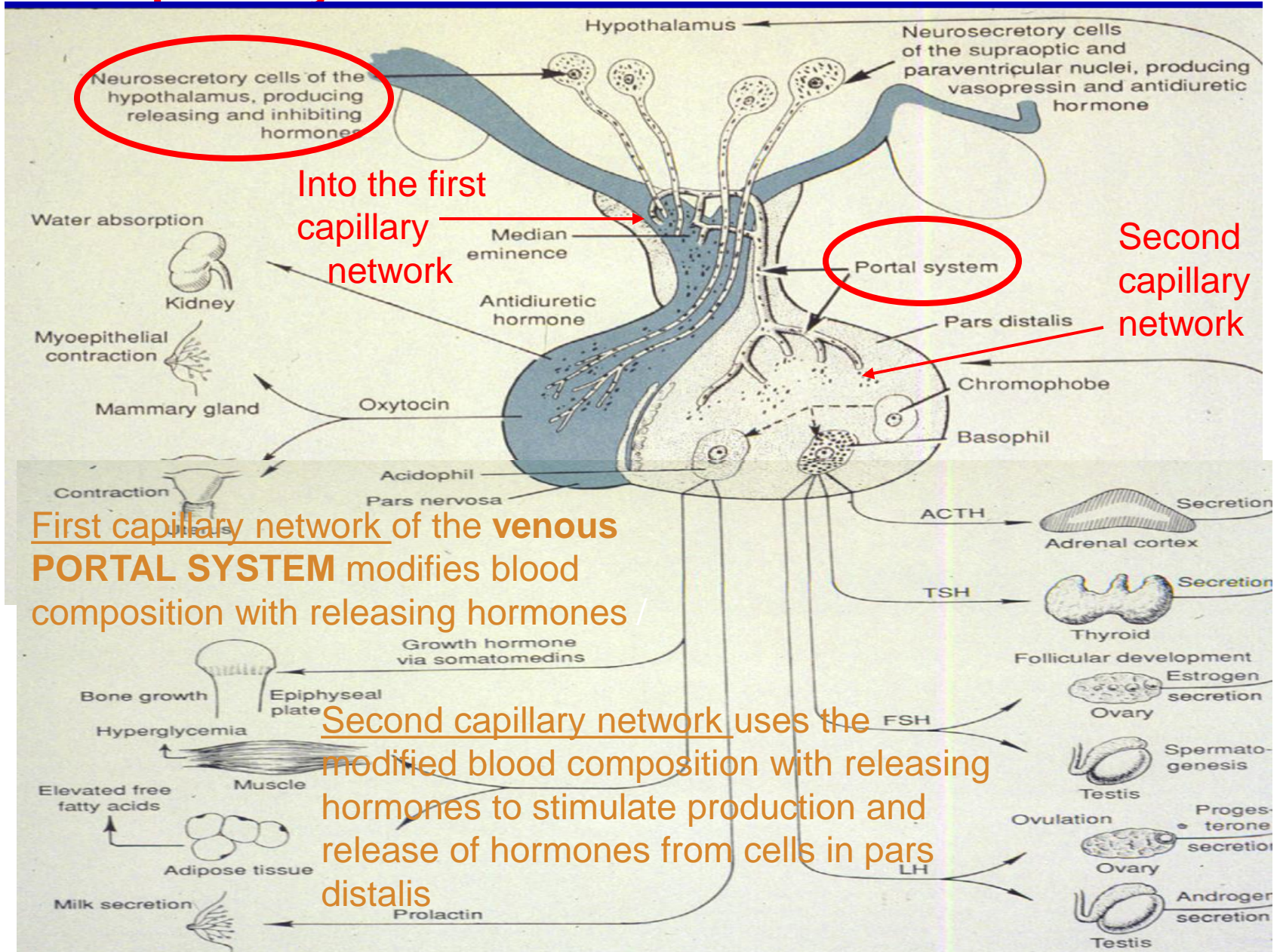
venous portal system



Into the first capillary network

First capillary network of the **venous PORTAL SYSTEM** modifies blood composition with releasing hormones /

venous portal system



Neurosecretory cells of the hypothalamus, producing releasing and inhibiting hormones

Into the first capillary network

Portal system

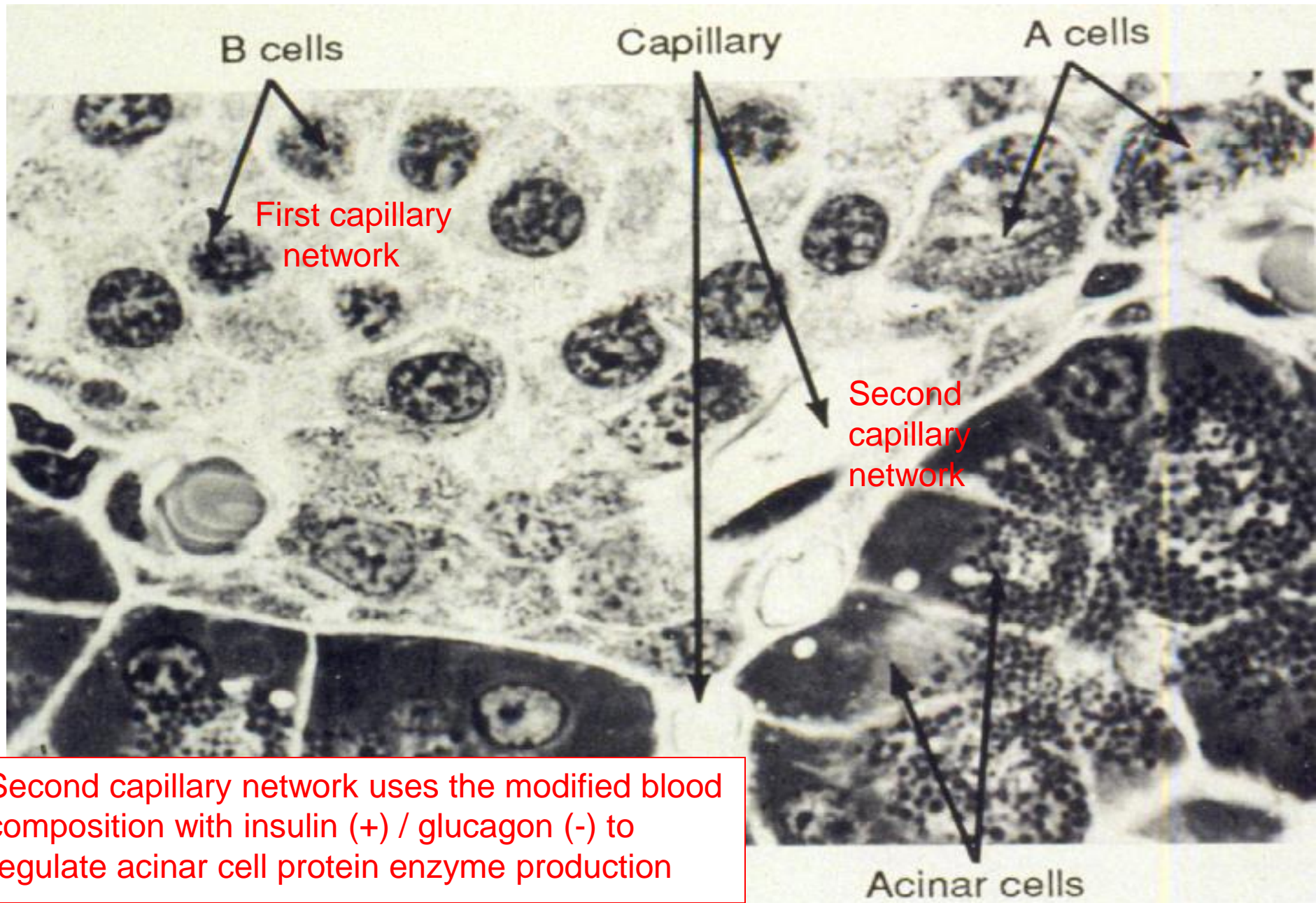
Second capillary network

First capillary network of the **venous PORTAL SYSTEM** modifies blood composition with releasing hormones

Second capillary network uses the modified blood composition with releasing hormones to stimulate production and release of hormones from cells in pars distalis

ISLETS Of LANGERHANS

First capillary network of the **ARTERIAL PORTAL SYSTEM**

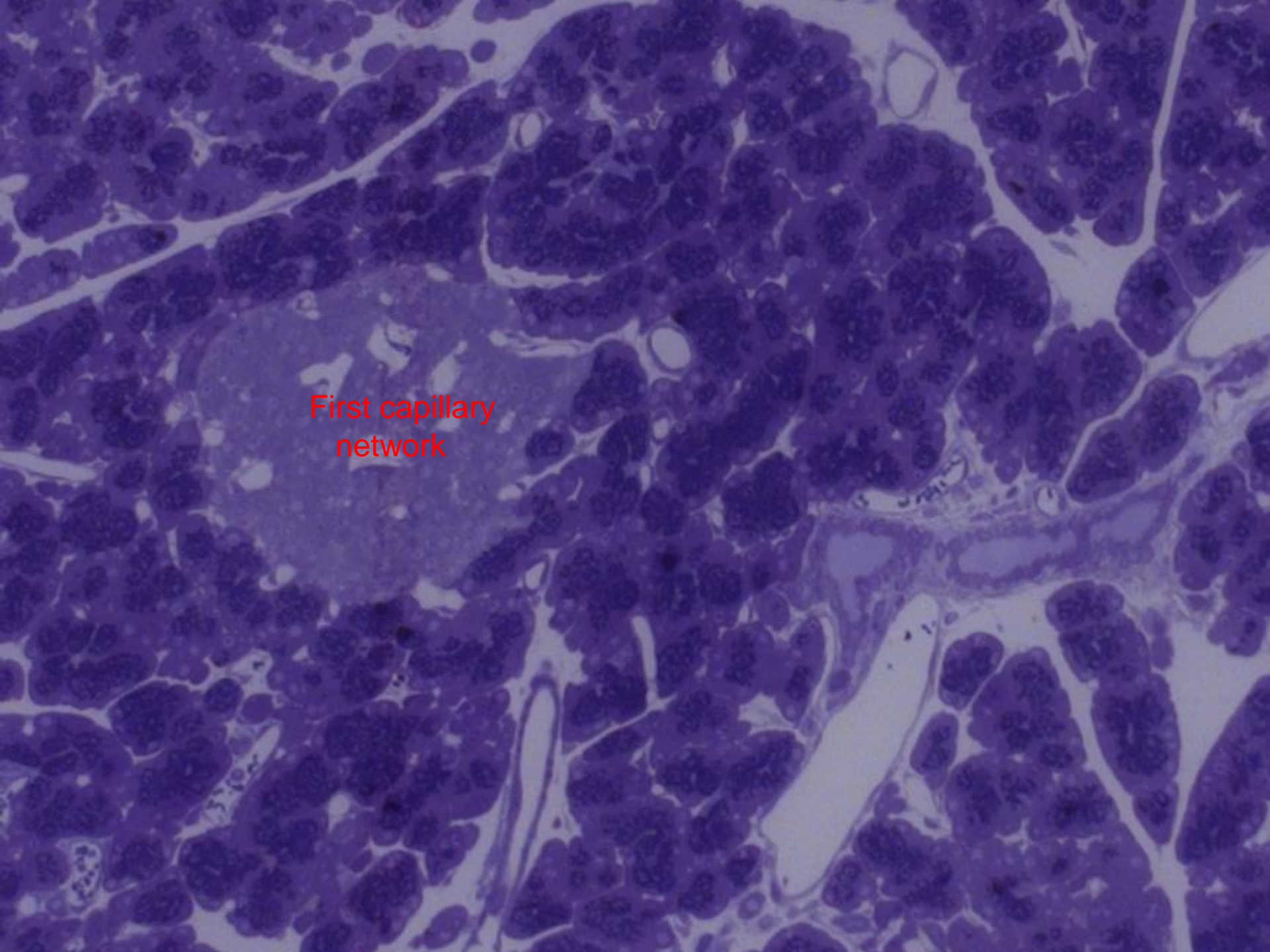


First capillary network

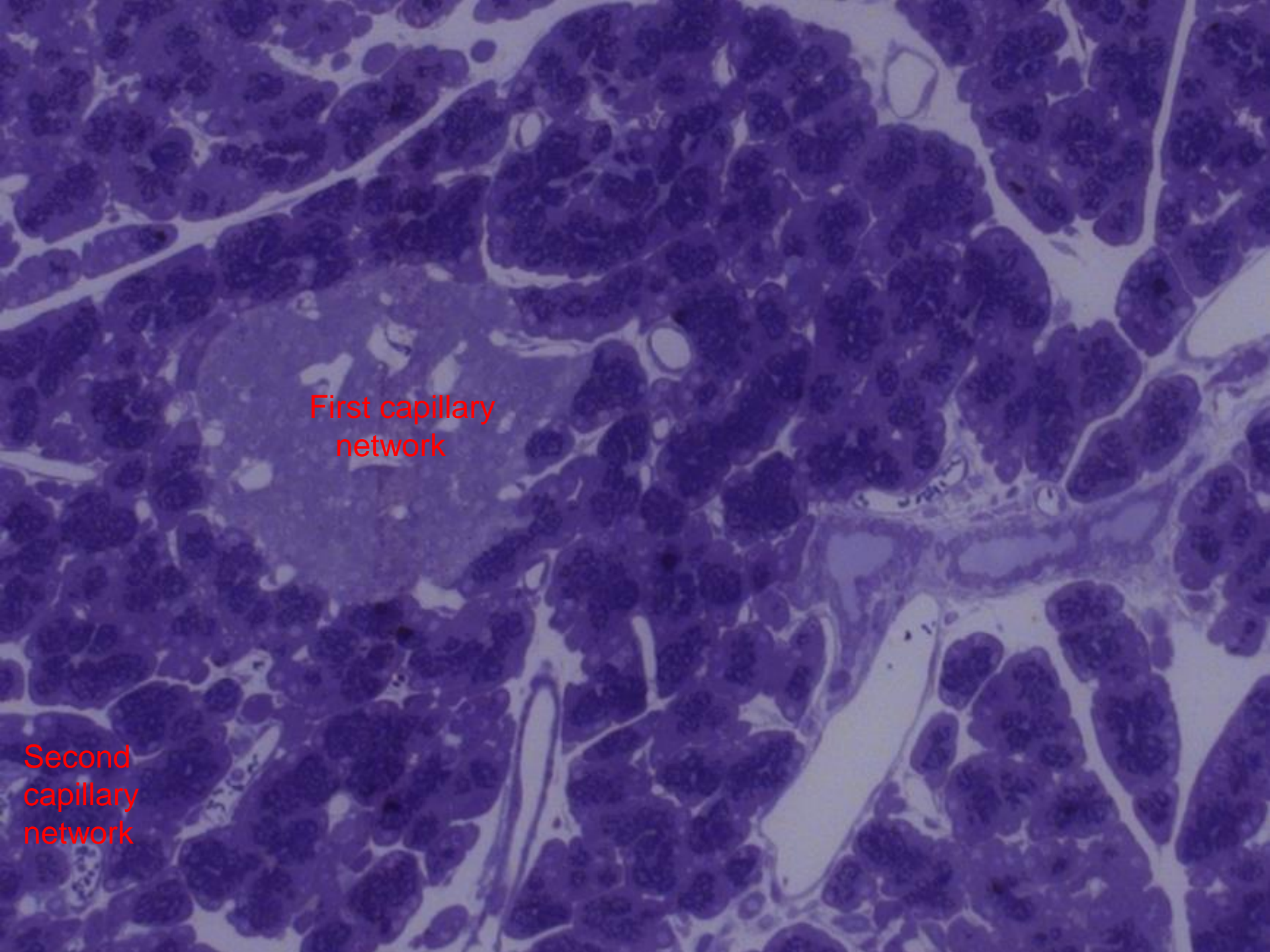
Second capillary network

Second capillary network uses the modified blood composition with insulin (+) / glucagon (-) to regulate acinar cell protein enzyme production

Acinar cells



First capillary
network



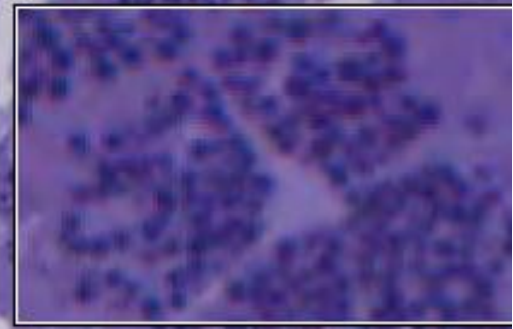
First capillary
network

Second
capillary
network

A histological micrograph of the pancreas stained with hematoxylin and eosin (H&E). The image shows numerous acinar cells, which are arranged in clusters and have a characteristic appearance with dark-staining nuclei and lighter-staining cytoplasm. A prominent feature is a circular structure in the upper left quadrant, labeled as the 'First capillary network'. This structure is composed of several small, interconnected blood vessels. The overall architecture is typical of the exocrine pancreas, where the acinar cells are responsible for the production and secretion of digestive enzymes.

First capillary
network

These ARTERIAL PORTAL SYSTEMS
(locally connecting the islets with
surrounding acinar cells) are the reason
why the islets are distributed
throughout the pancreas.

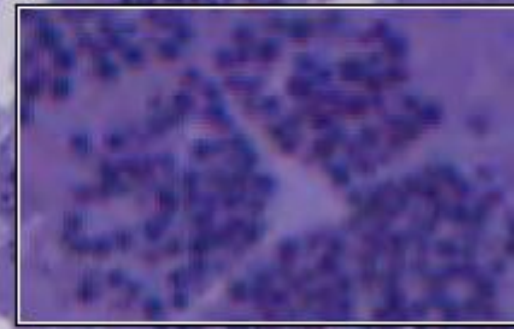


A light micrograph of a pancreatic islet, stained with hematoxylin and eosin (H&E). The islet is a cluster of endocrine cells, appearing as a lighter, more homogeneous mass compared to the surrounding acinar exocrine tissue. The islet is surrounded by a dense network of capillaries, which is highlighted by red text labels. The surrounding acinar cells are arranged in a lobular pattern with visible nuclei and cytoplasm.

First capillary network

Second capillary network

These ARTERIAL PORTAL SYSTEMS (locally connecting the islets with surrounding acinar cells) are the reason why the islets are distributed throughout the pancreas.





Ductless gland -
endocrine

This histological micrograph shows the pancreas, which is a mixed gland. The image displays two distinct types of glandular tissue. On the left, there is a large, rounded structure representing an endocrine gland, specifically the islets of Langerhans. These islets are composed of clusters of cells that lack ducts. On the right, the majority of the tissue consists of exocrine glands, which are organized into acini. Each acinus is a cluster of cells that surrounds a central duct. The acini cells are characterized by their polarized arrangement, with secretory granules (zymogen granules) located near the basal nucleus and a clear apical region where the duct is formed. The ducts are lined by a simple cuboidal epithelium. The overall appearance is that of a highly organized, functional organ with both endocrine and exocrine components.

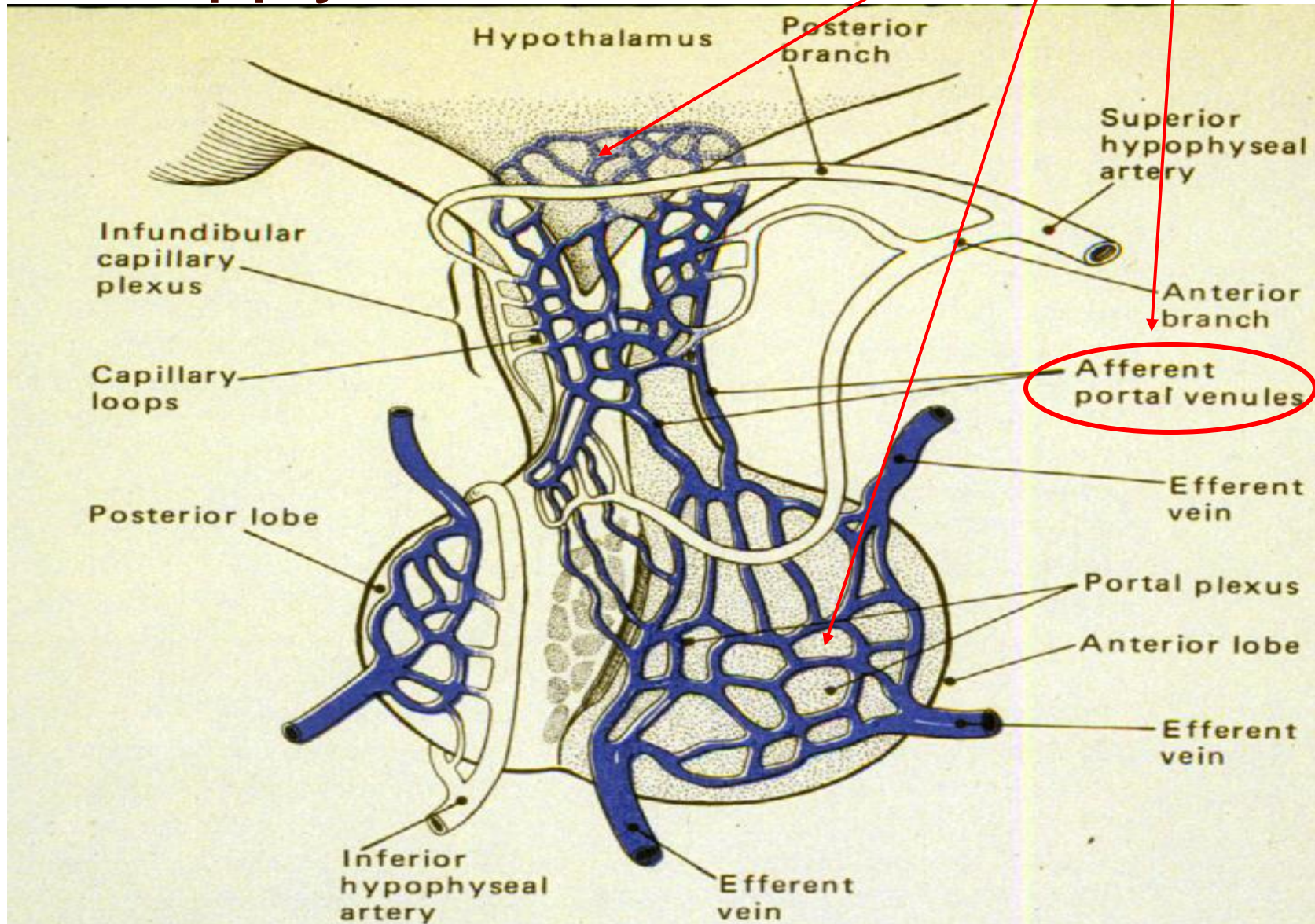
Gland with ducts -
exocrine



VENOUS PORTAL SYSTEM

Blood supply

PORTAL VEIN



Answers to questions in lab manual

1. What hormones do acidophils and basophils produce and what is the action of these hormones?
 - Acidophils: secrete somatotrophin (GH, growth hormone [stimulates body growth]) and prolactin (PRL [stimulates synthesis of milk])
 - Basophils: secrete ACTH [stimulates adrenal cortex], FSH [in females: stimulates release of estrogens; in males: stimulates production of sperm], LH [in females: egg maturation and release; in males: stimulates testes to secrete testosterone], TSH [stimulates thyroid gland to secrete thyroxine] (& hCG only during pregnancy)=
2. Where are the cell bodies for the nerve fibers in the pars nervosa?
 - Hypothalamus
3. What is their (parafollicular cells, “C cells”) function?
 - Secrete calcitonin – reduced blood calcium levels
4. What is the effect of thyroid hormones on carbohydrate metabolism? Where are high affinity thyroid hormone receptors located in a cell?
 - **Thyroid hormones increase the number and size of mitochondria and stimulate mitochondrial protein synthesis, helping to enhance metabolic activity**
5. Is this layer (zona glomerulosa) regulated by pituitary adrenocorticotrophin hormone (ACTH)?
 - Yes

Answers to questions in lab manual

6. Why would these cells have abundant lipid droplets? What organelle would you expect to also be abundant?

- Cholesterol precursors for steroid hormones stored in lipid droplets; SER

7. Is vascularization rich or sparse in this zone?

- Rich vascularization by wide capillaries.

8. Describe the arterial and venous blood flow to the adrenal gland.

- Peripheral arteries > cortical arteries > capillaries & sinusoids irrigating cortex > join medullary capillaries and arterioles > medullary fenestrated sinusoids with dual blood supply (arterial medullary blood and venous cortex blood) > medullary veins > suprarenal vein.

9. Is melatonin release highest in the light or dark period?

- Dark period

10. Where in the islets are alpha cells and beta cells located?

- Alpha cells are generally on the border of islets of Langerhans and beta cells are located throughout the islets.

Answers to questions in lab manual

11. What is the effect of glucagon on glycogen breakdown and storage of triglycerides in the liver?

- Glucagon increases the blood glucose levels by stimulating glycogen breakdown and gluconeogenesis in the liver.

12. Describe the symptoms associated with Grave's disease.

- Weight loss, nervousness, sweating, heat intolerance, and other features.

13. What is the most common cause of Cushing syndrome?

- The most common cause of Cushing syndrome is exogenous administration of glucocorticoids prescribed by a health care practitioner to treat other diseases.



ENDOCRINE SYSTEM **Part 1**

Dr. Larry Johnson

