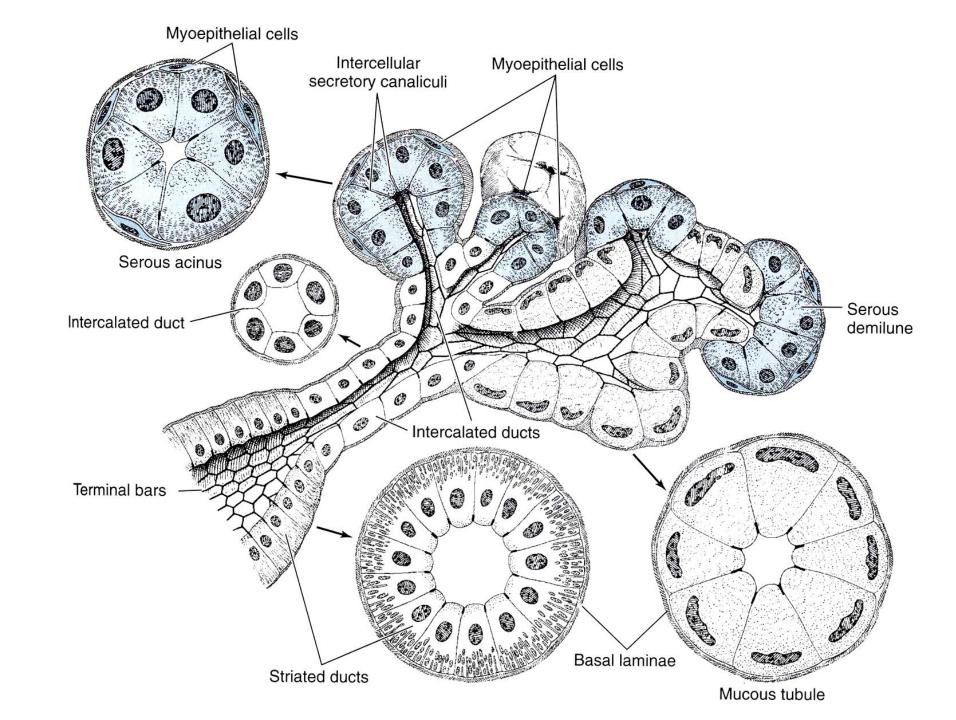
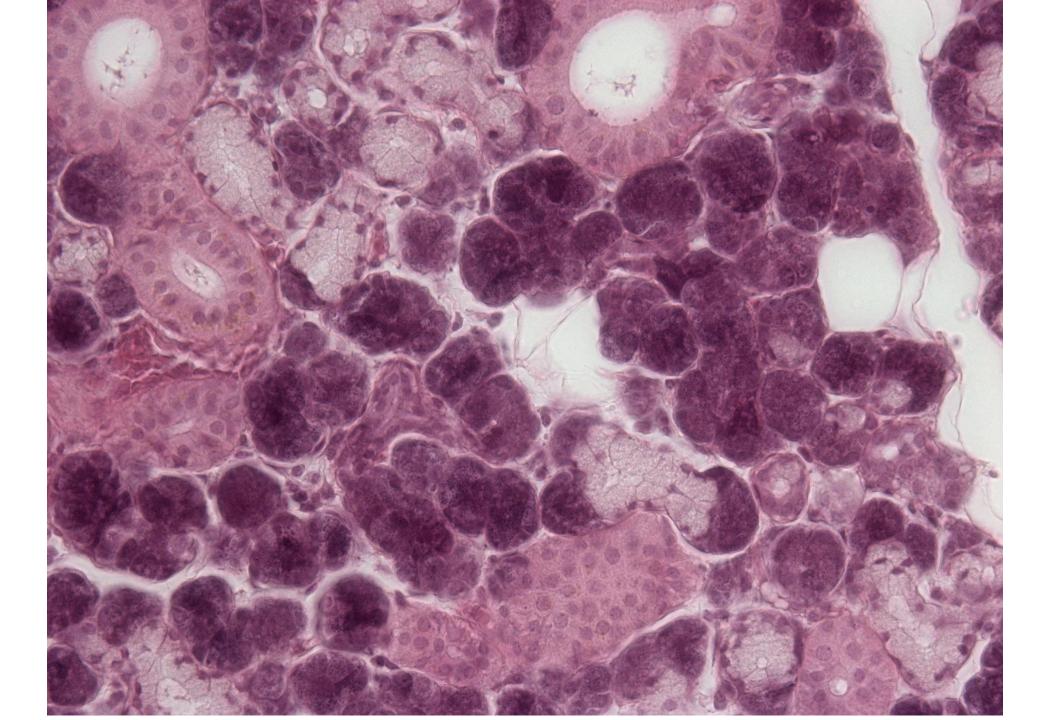
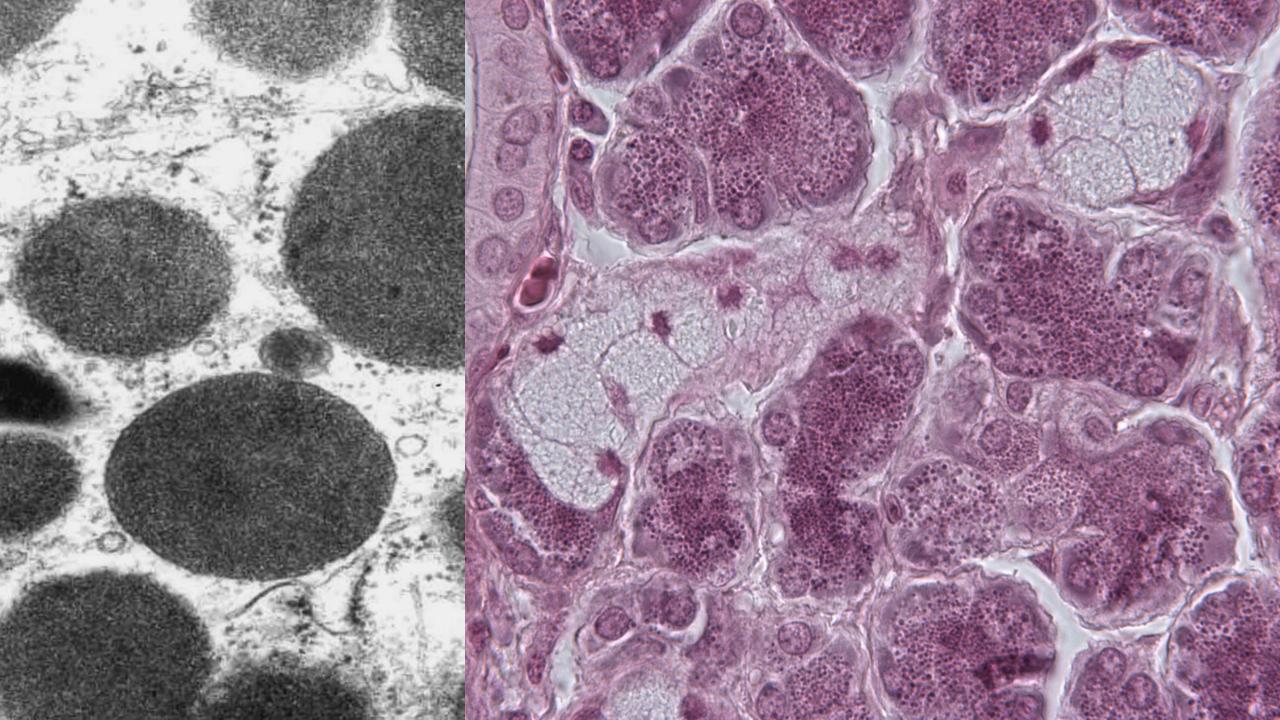
Salivary glands, pancreas, liver, gallbladder

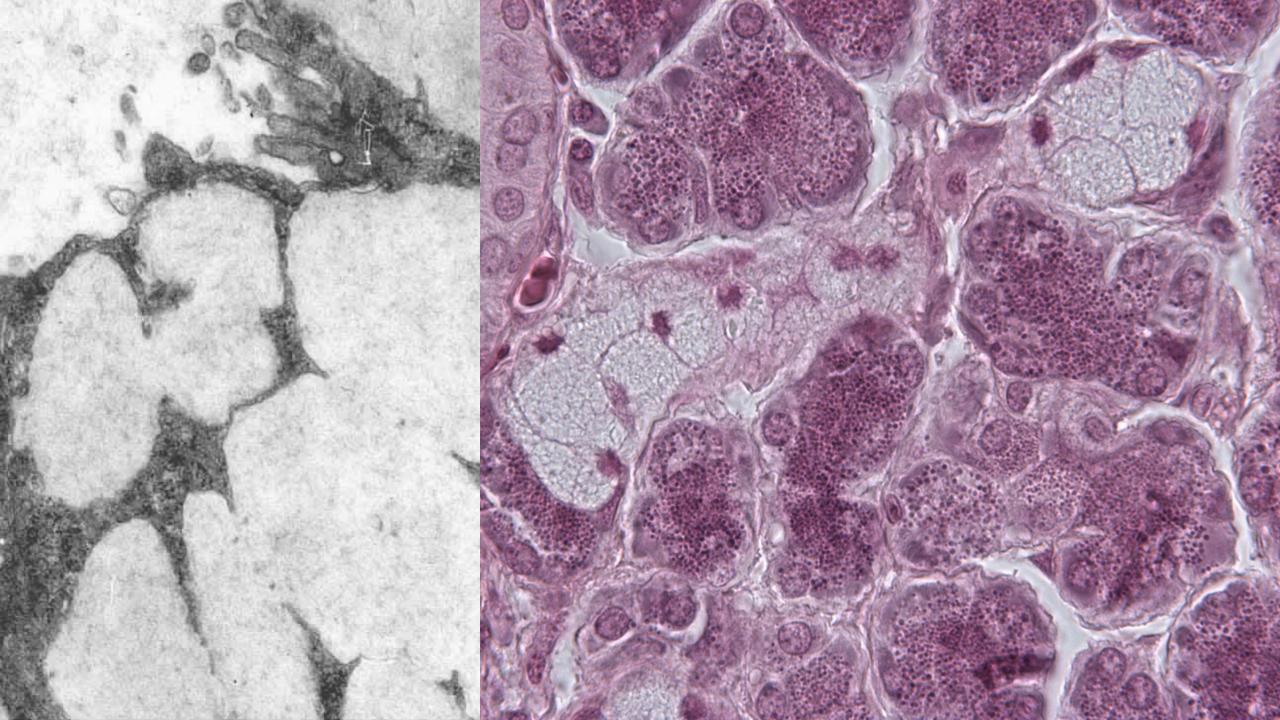
MUDr. Pavel Roštok

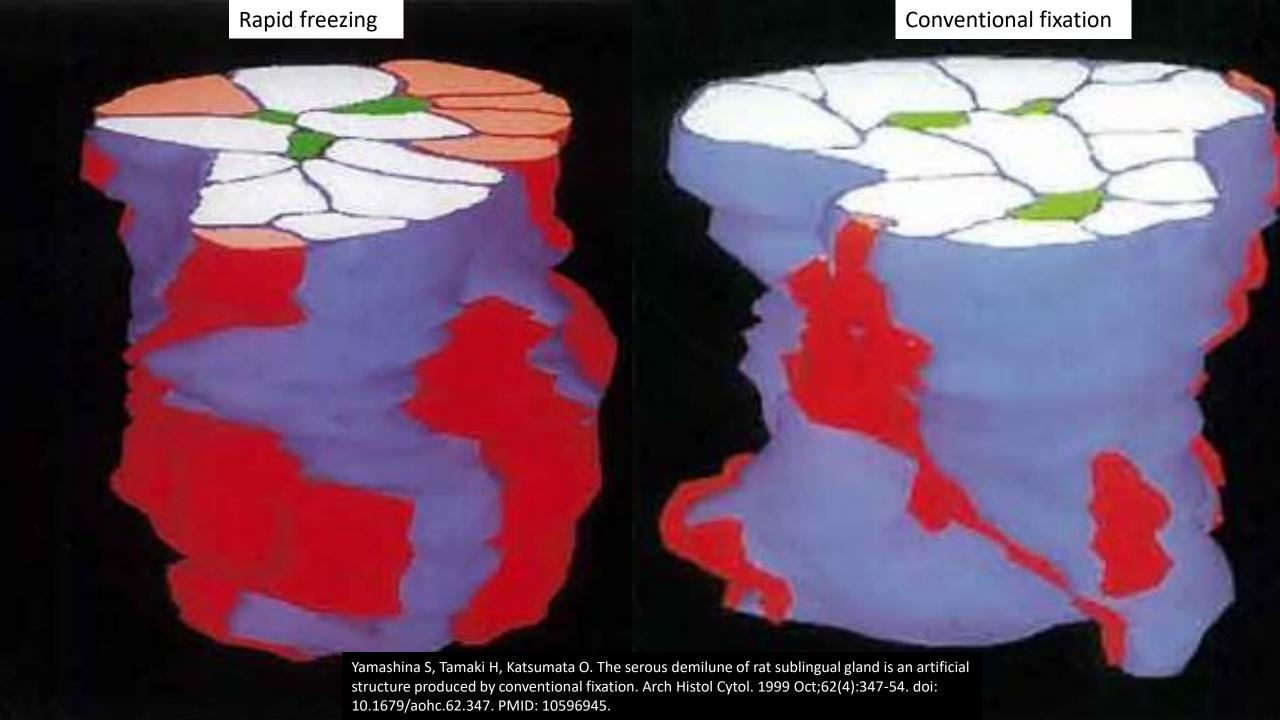
Salivary glands

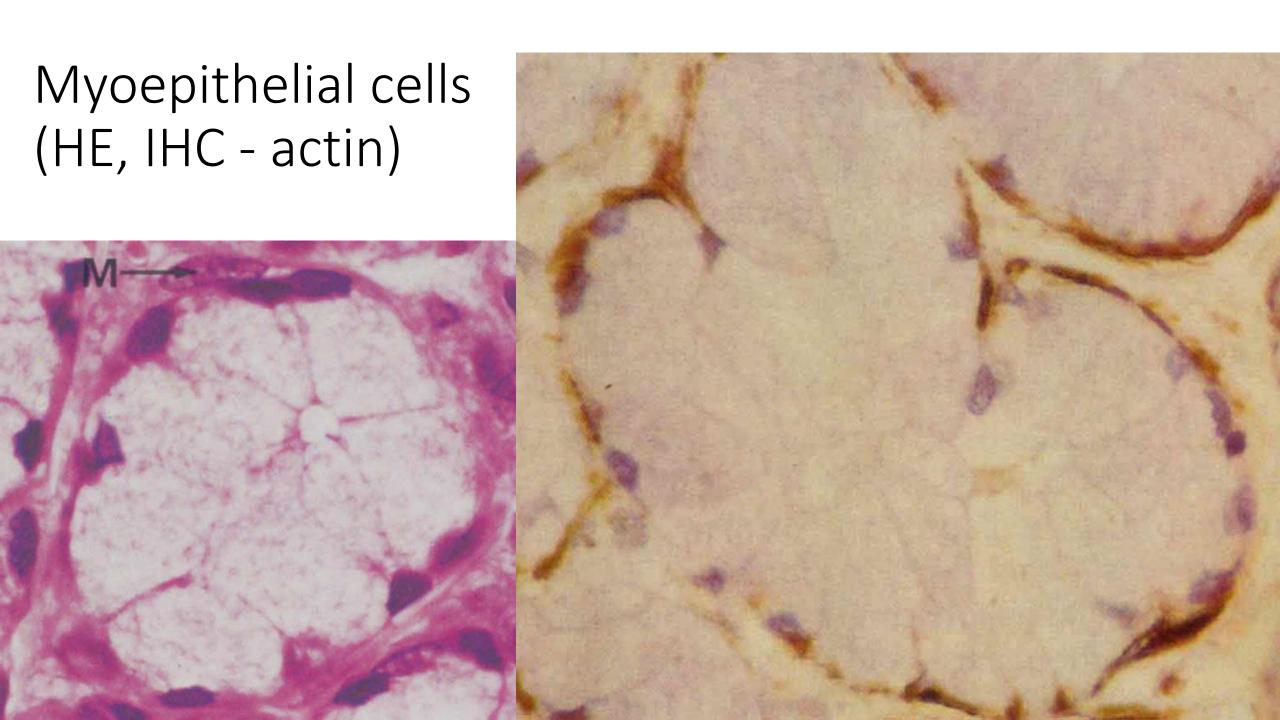








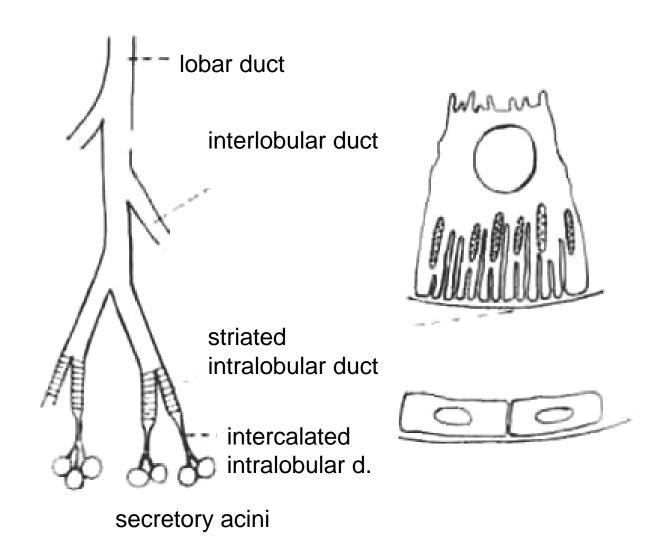




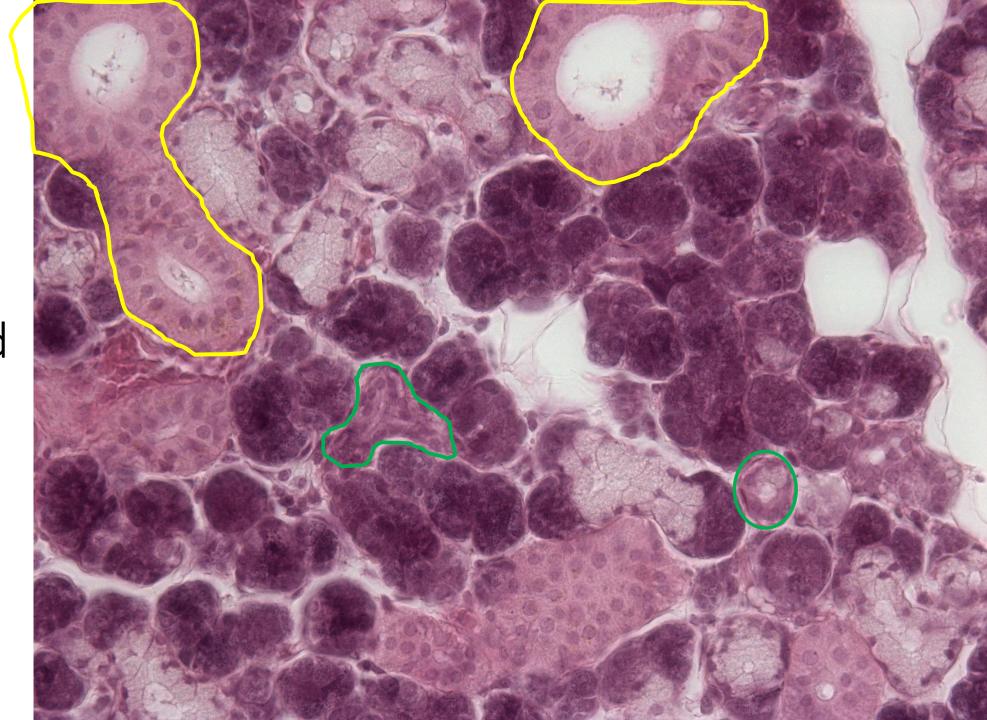
Salivary glands – secretory portion

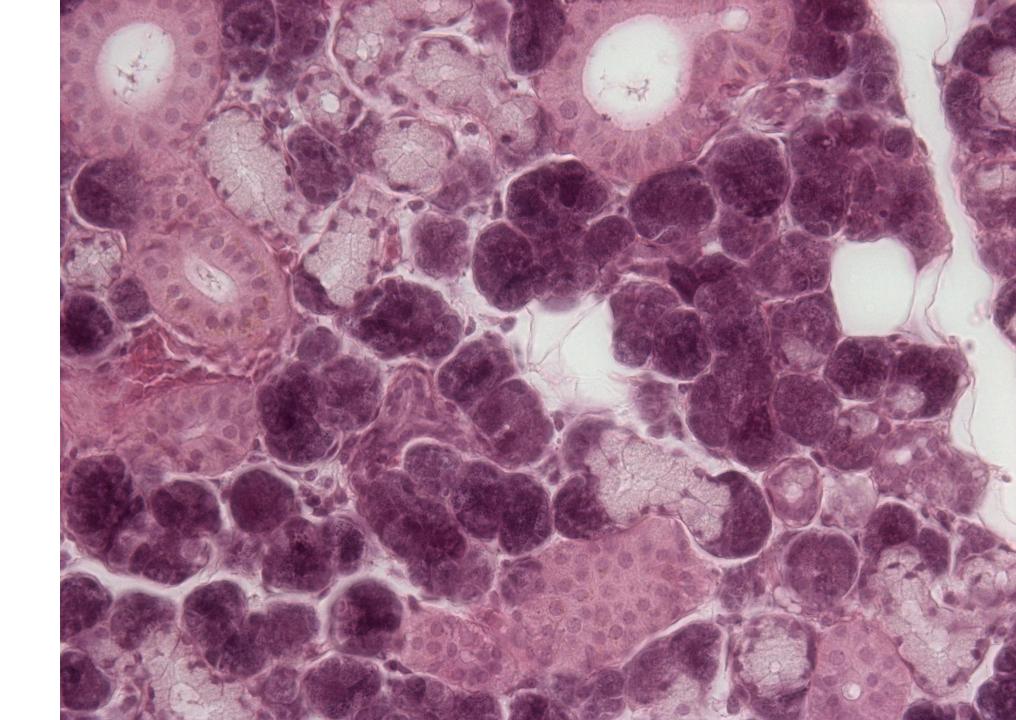
- Secretory portion (acini, tubules, demilunes)
- Produces protein (zymogen granules in serous cells), mucin (special glycoprotein in mucous cells)
- Myoepithelial cells are contractile

VÝVODY VELKÝCH SLINNÝCH ŽLÁZ



Striated ducts (yellow) and intercalated ducts (green)

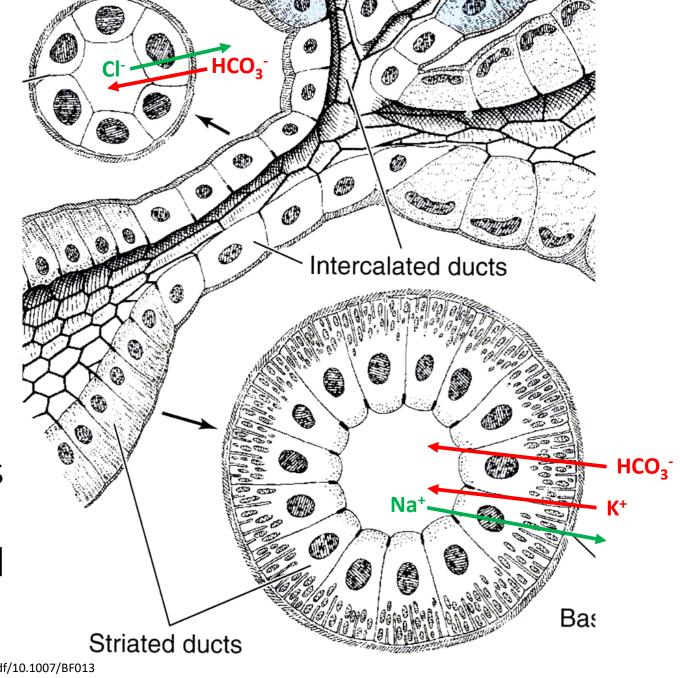




What happens in the intralobular portion of the duct system?

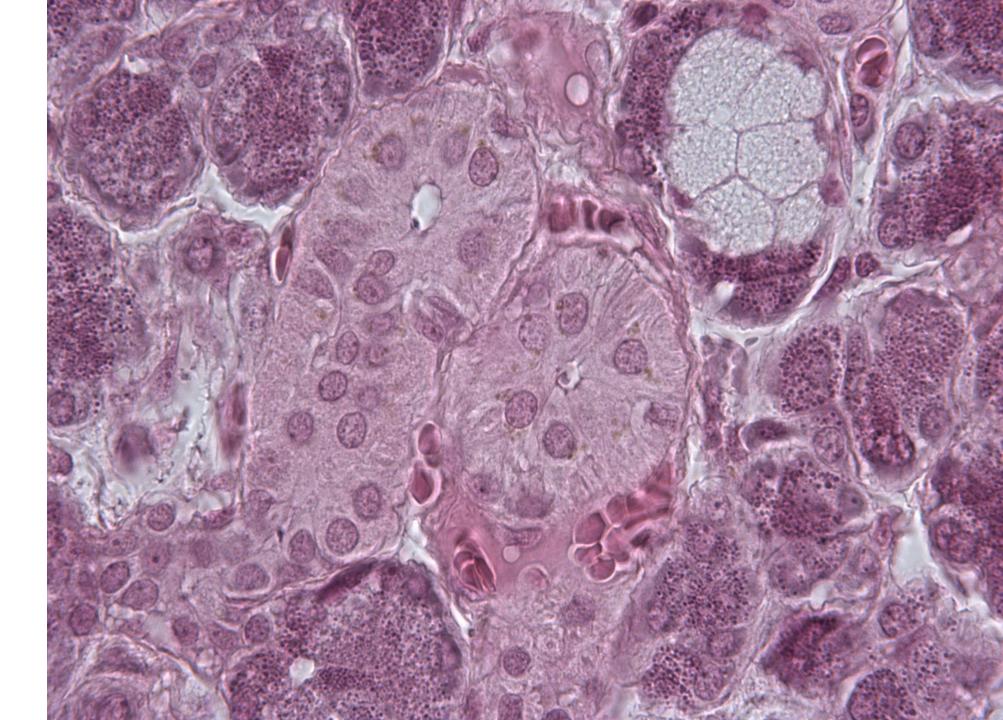
Reabsorption of ions causes the saliva to be hypotonic.

"The final saliva that enters the mouth, on average, contains 2-5 mEq/L of NaCl and 2-5 mg/ml protein"

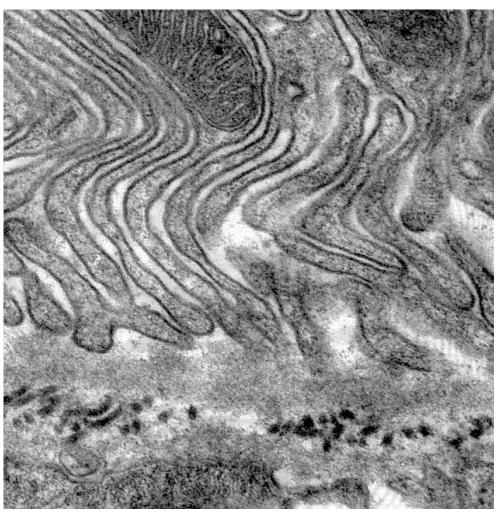


The Functions of Saliva, Kaplan et al., https://link.springer.com/content/pdf/10.1007/BF013 54542.pdf

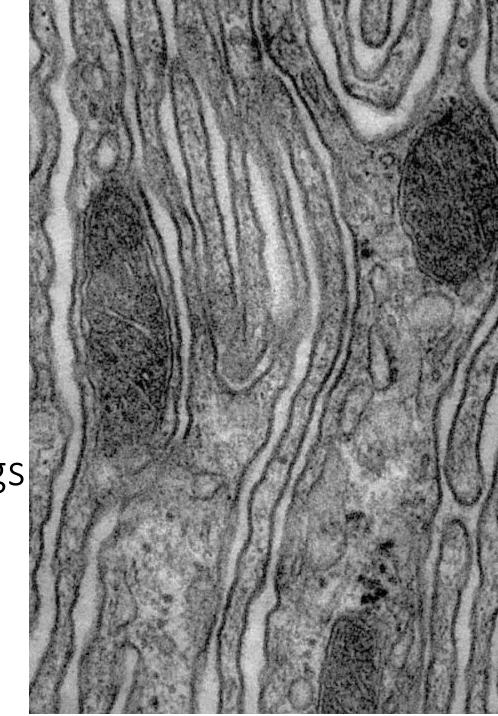
Striated duct



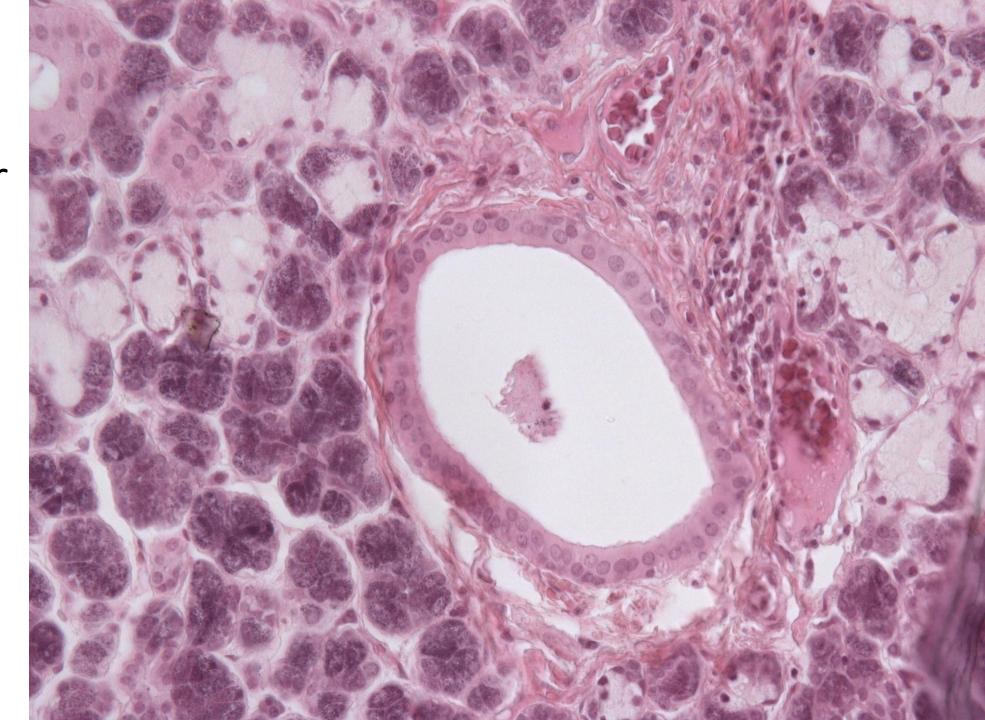
Striated duct – basal infoldings (a.k.a. basal labyrinth)



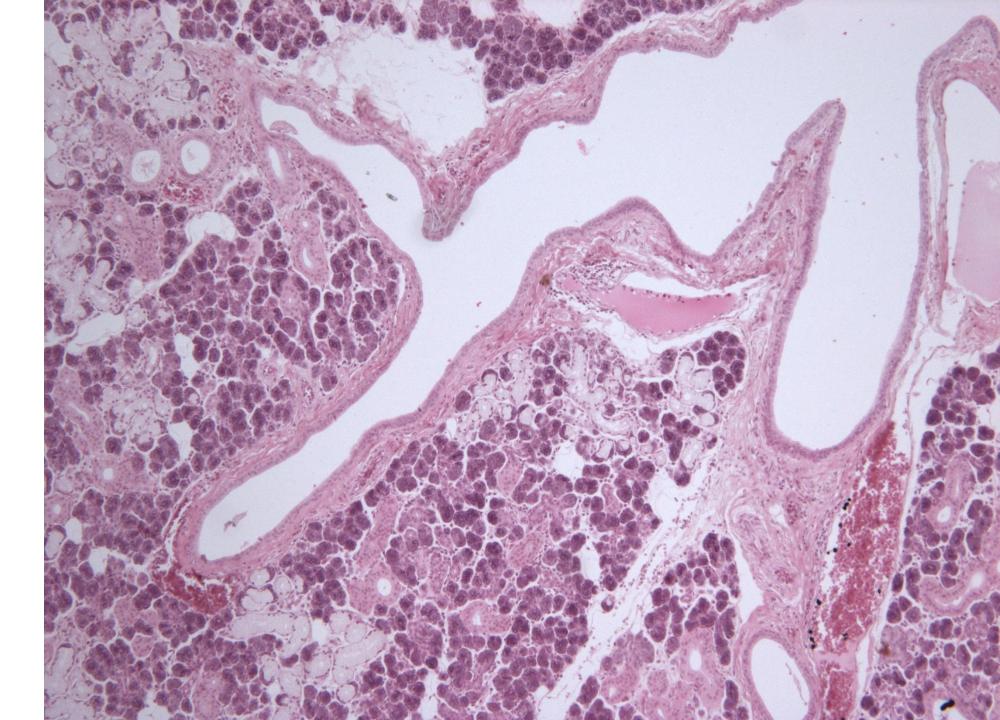
Mitochondria are inclosed in these infoldings

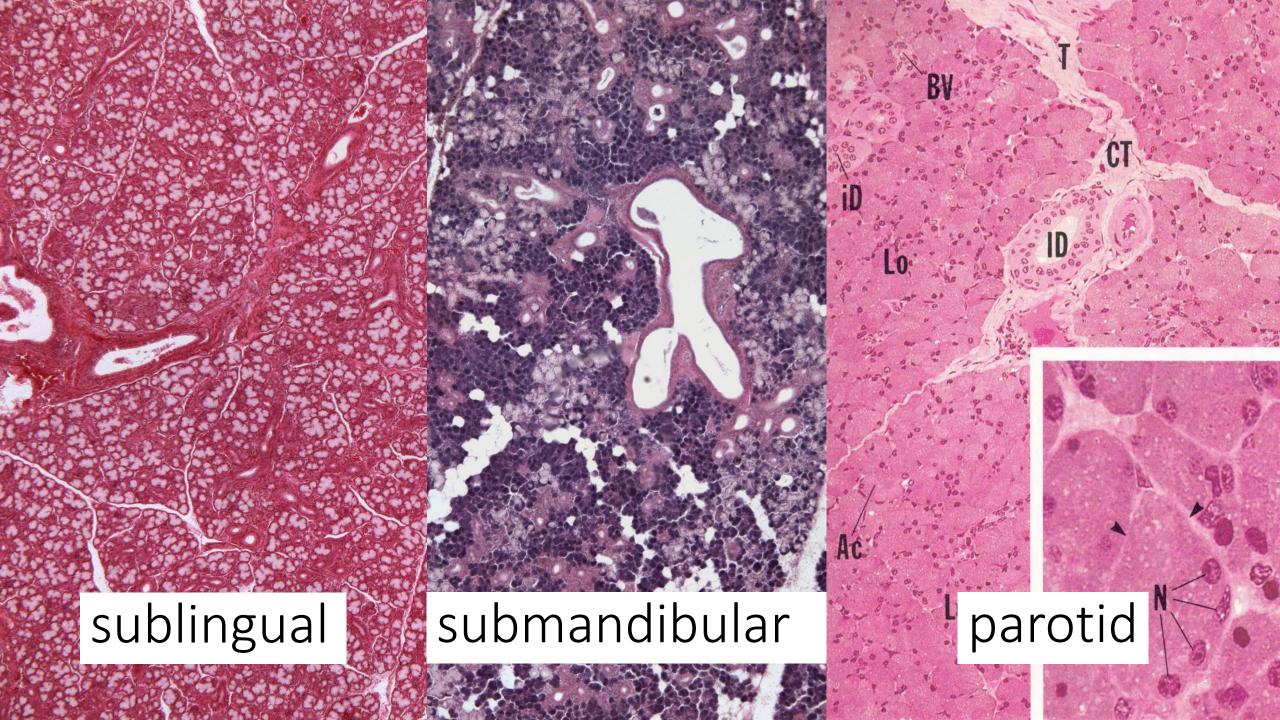


Interlobular duct

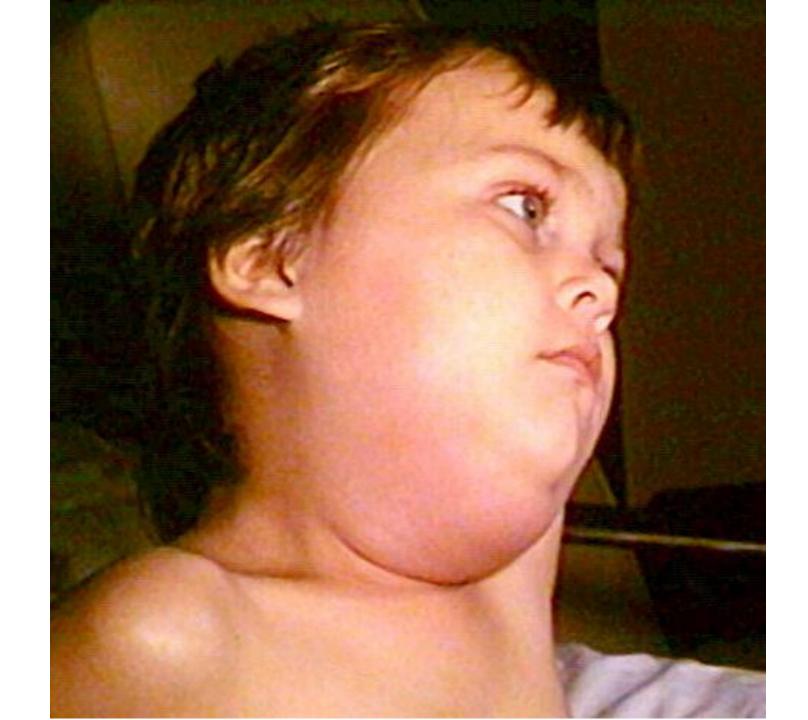


Lobar duct





Disease?

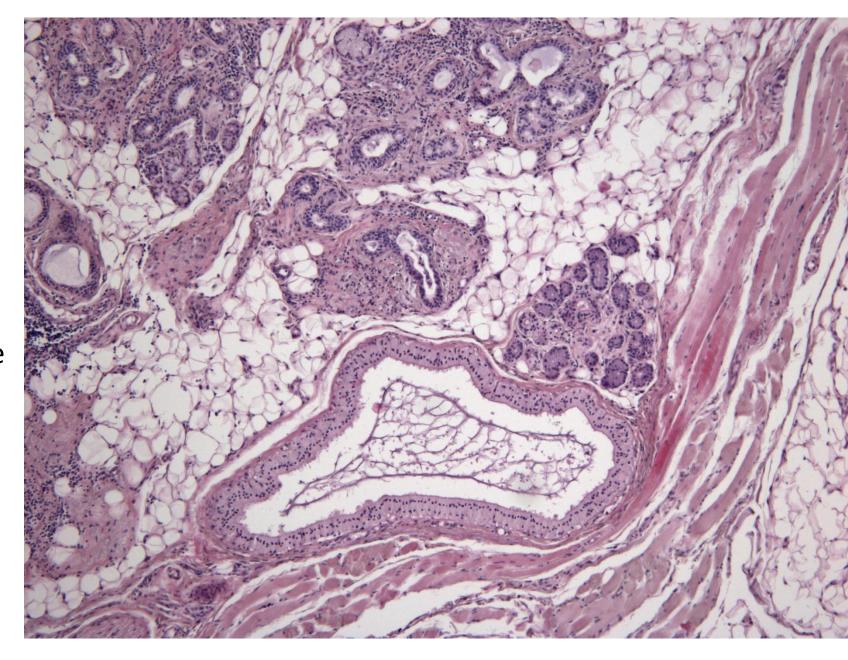


Major salivary glands

- Parotis
 - Completely serous, largest, adipose tissue
- Submandibularis
 - Predominantly serous, not so many intercalated ducts
- Sublingual
 - Predominantly mucous, multiple excretory ducts

Minor salivary glands

- Seromucous
 - Labial, buccal...
- Mucous
 - Palatine, Weber glands of the tongue
- Serous
 - Von Ebner glands of the tongue



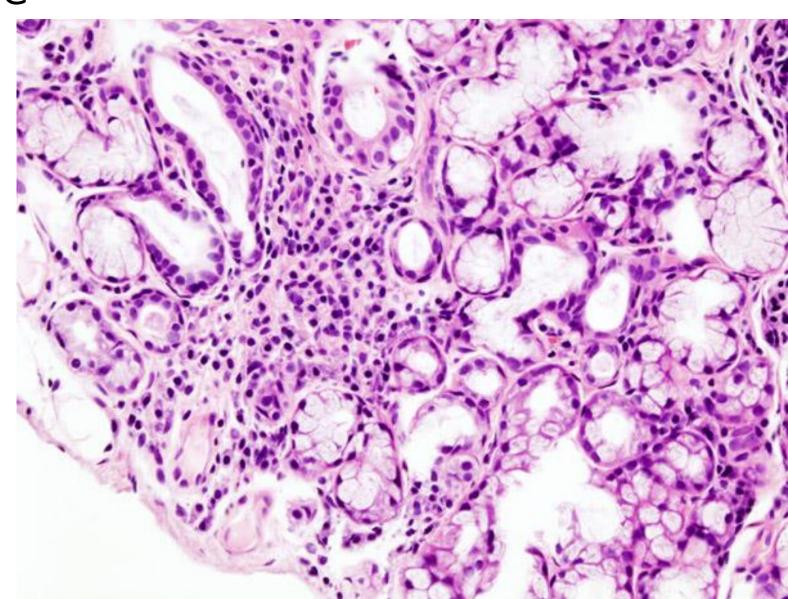
Saliva - function

- Moisture
- Taste
- Buffering pH
- Immunity (IgA, lysozyme, lactoferrin)
- Digestion (amylase, lipase)

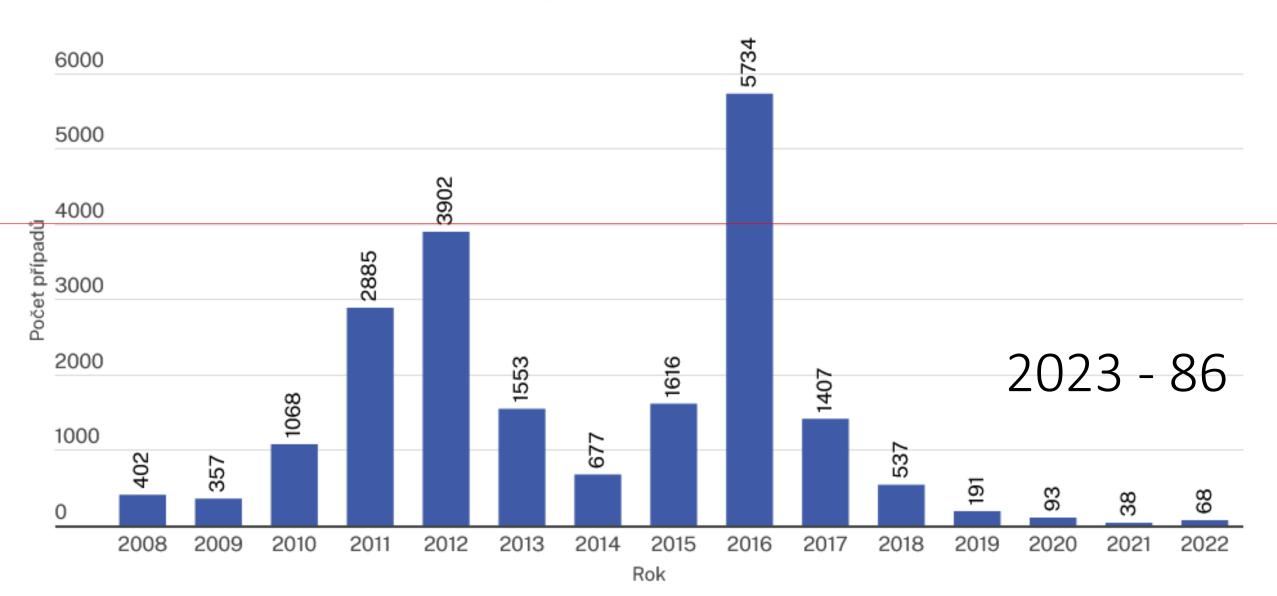


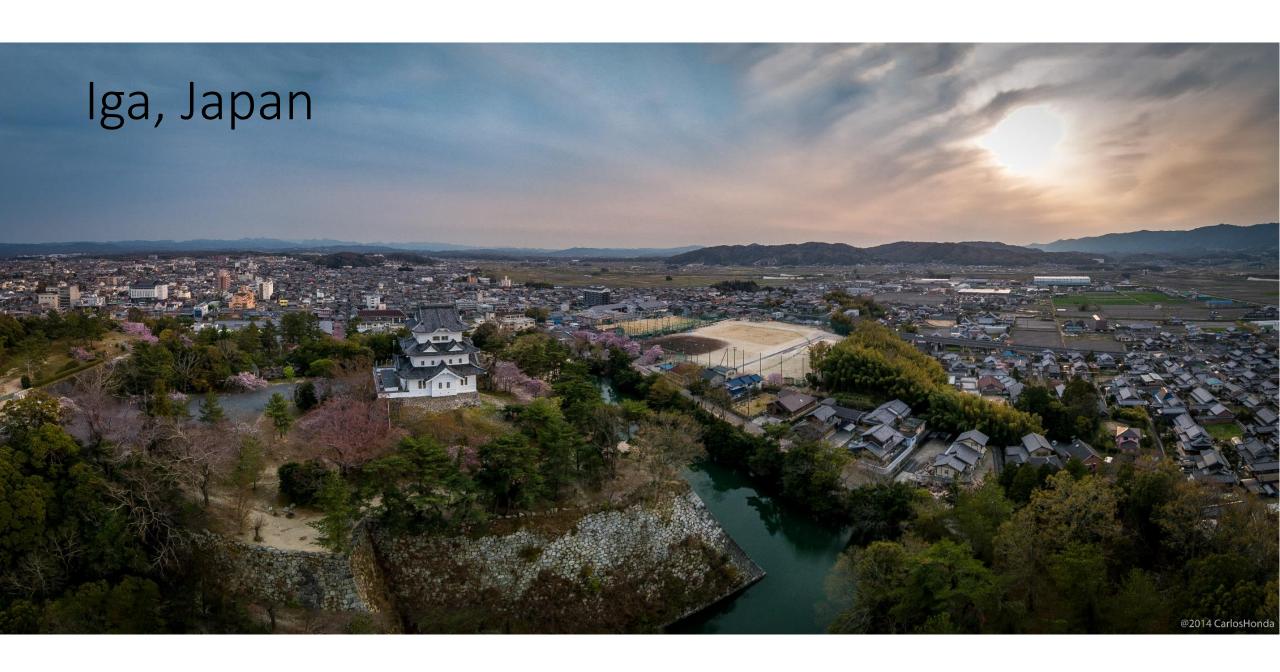
Sjögren syndrome

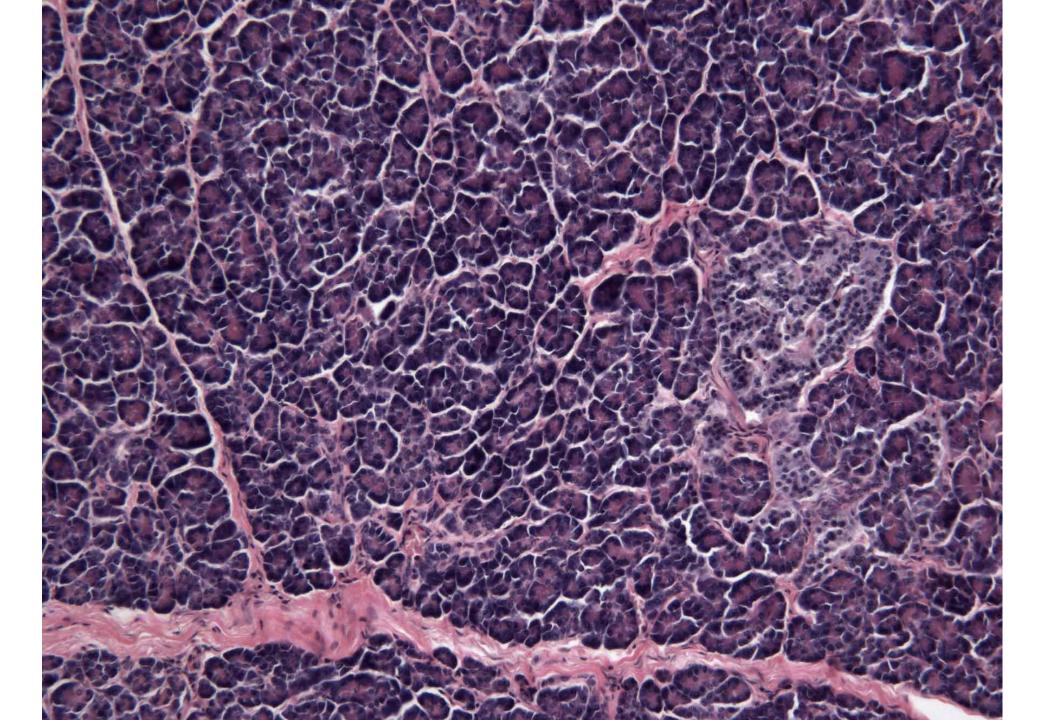
- Autoimmune disease
- Lymphocytic infiltrate
- Prevalence 40 100 per 100,000 people (uptodate.com)
- Symptoms?



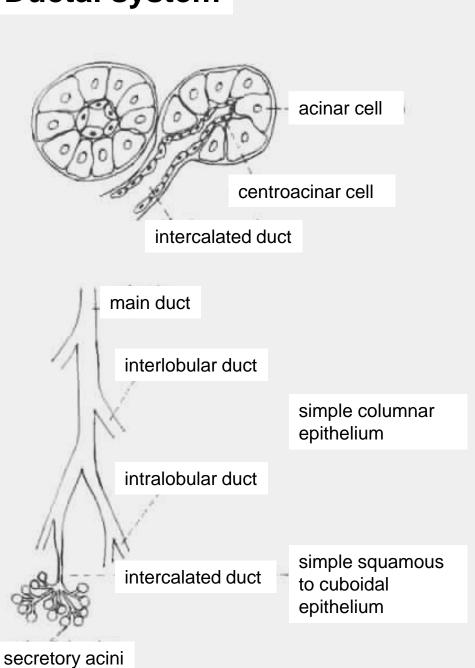
Počet případů příušnic v ČR

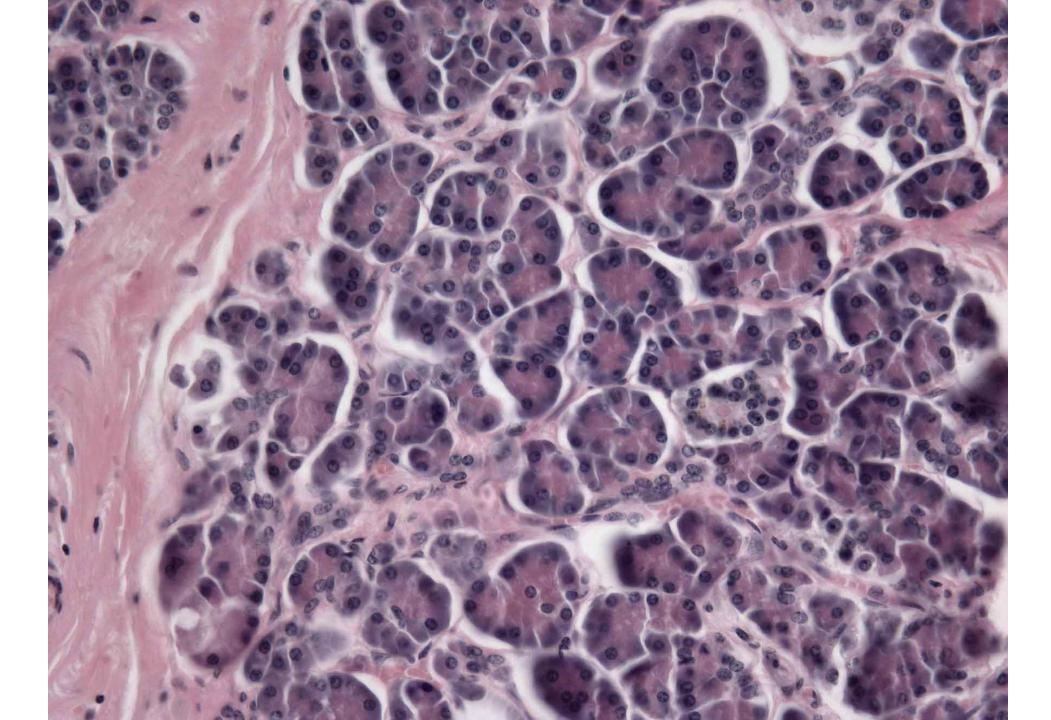


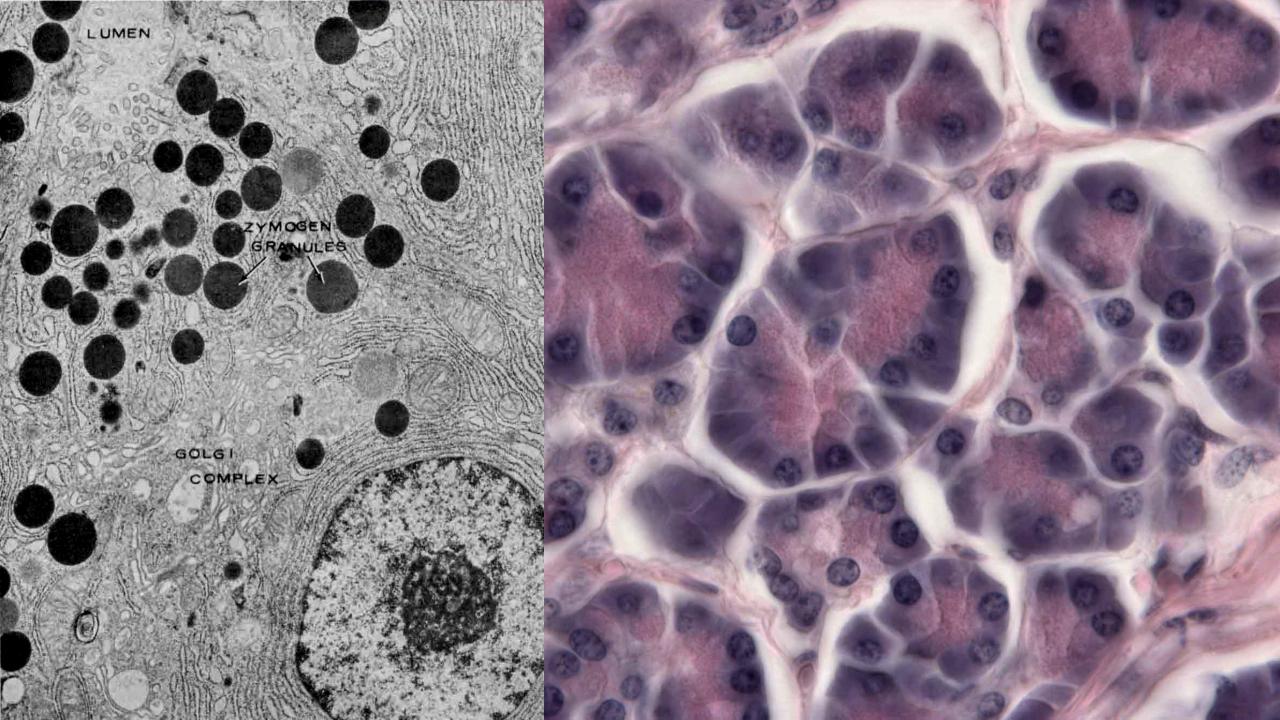




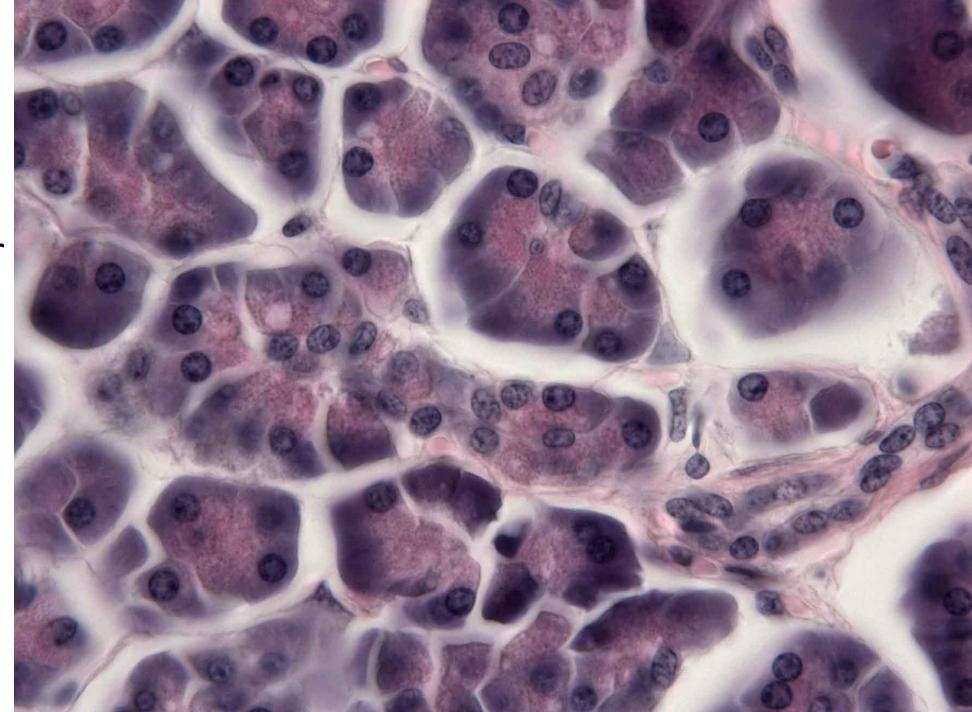
Ductal system

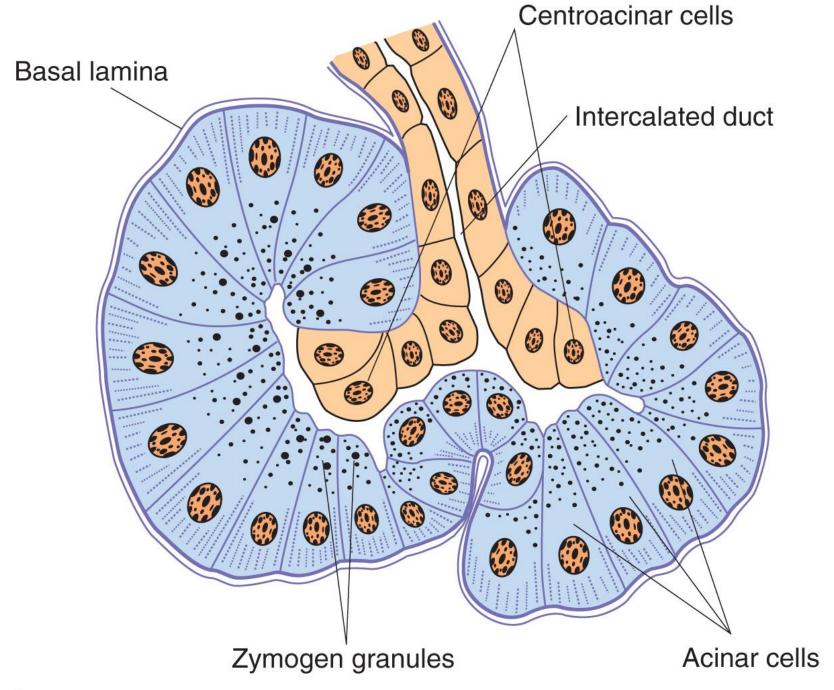




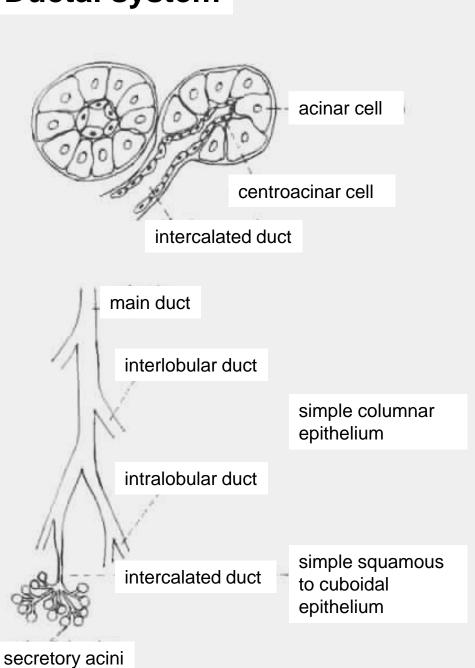


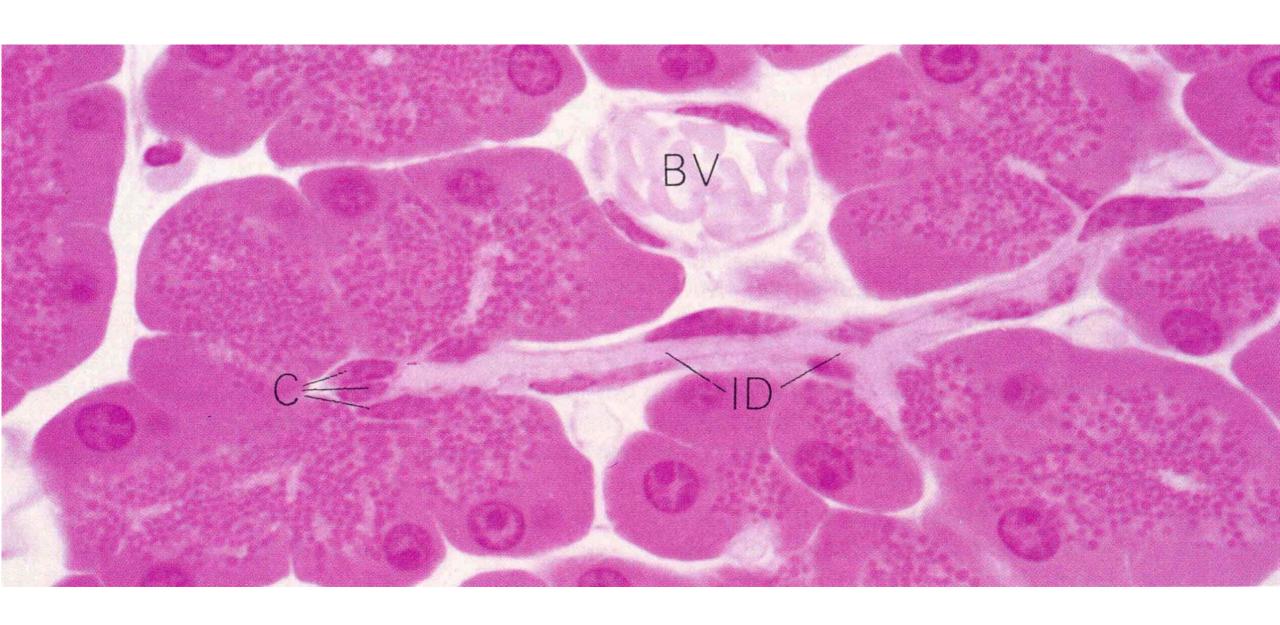
Centroacinar cells



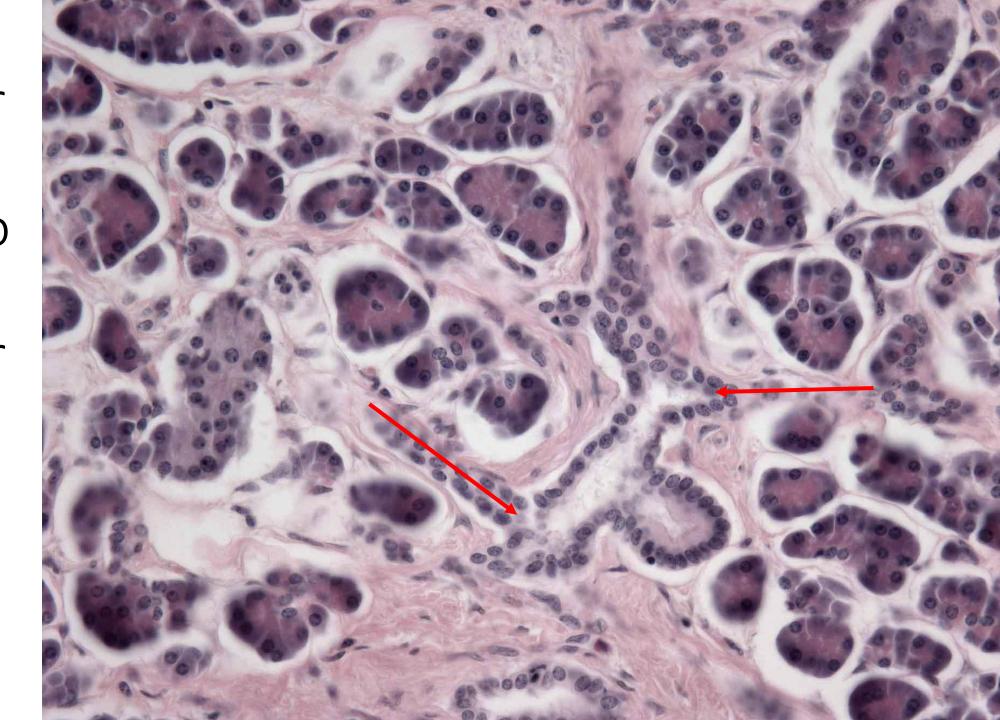


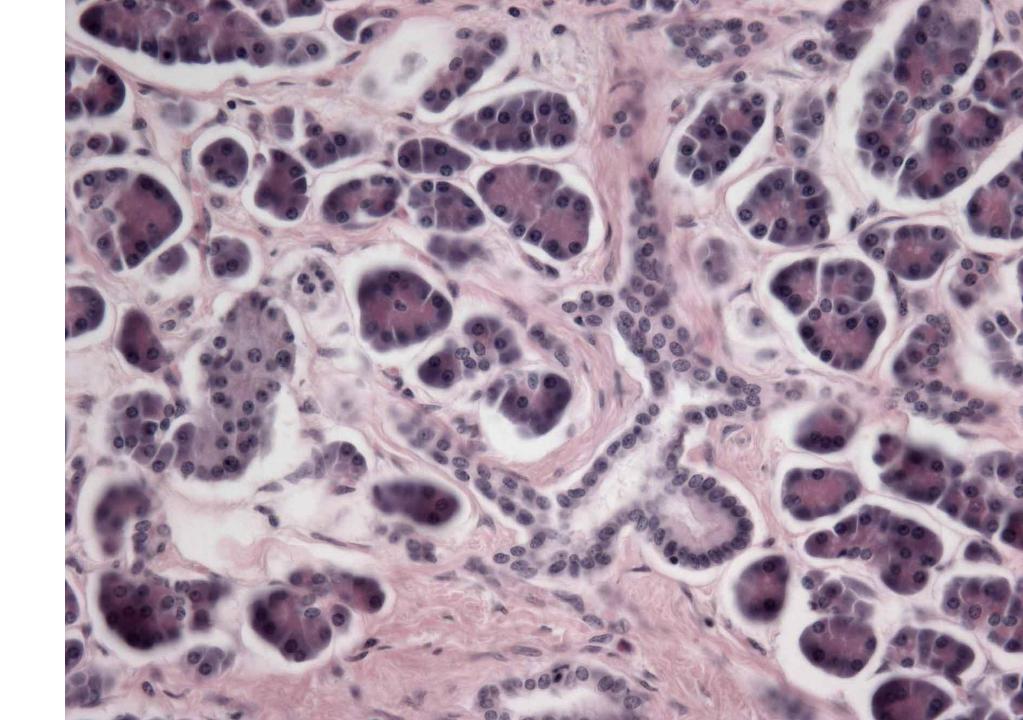
Ductal system

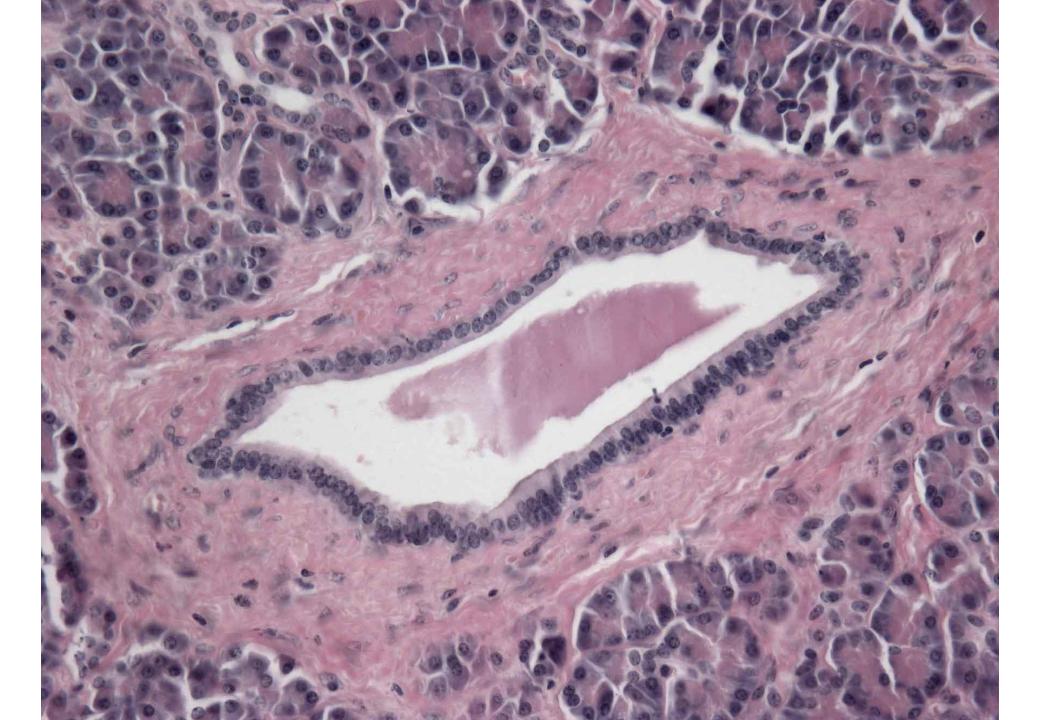




Intralobular ducts feeding into an interlobular duct.







Exocrine pancreas

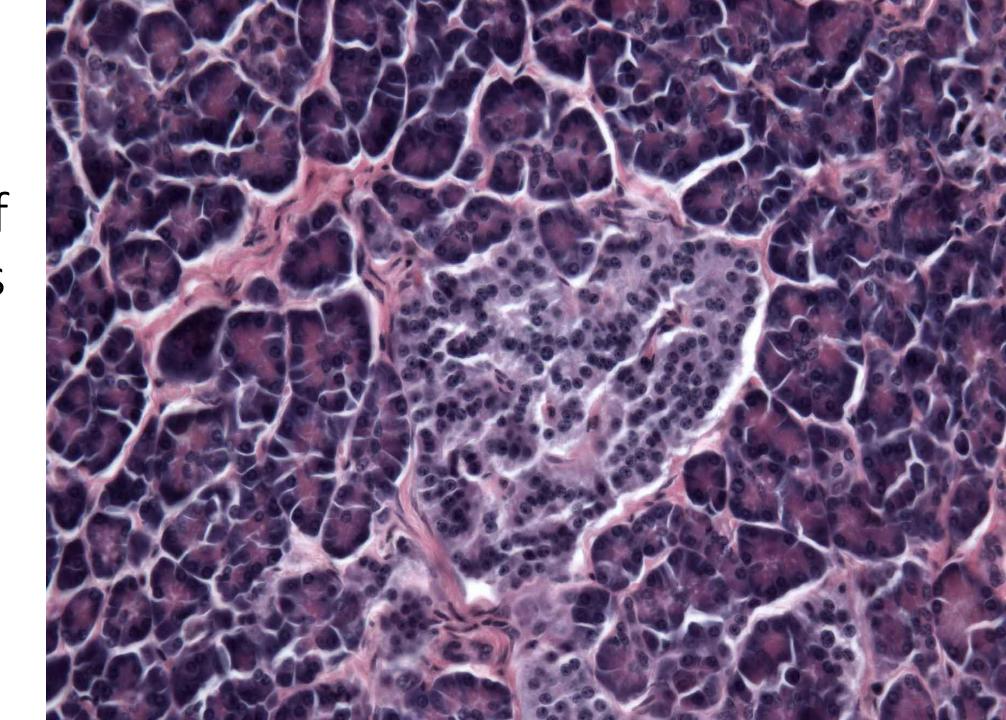
- Similar structure to the parotid, but with some differences:
 - Centroacinar cells, no striated ducts
 - Minimal connective tissue and adipose tissue
 - Controlled by secretin and cholecystokinin
- Zymogen granules contain a wide variety of enzymogens, that are activated in the intestine
 - Trypsinogen (becomes trypsin and activates other enzymes), chymotripsinogen, carboxypeptidase, aminopeptidase, elastase
 - Ribonuclease, deoxyribonuclease
 - Amylase
 - Lipases, phospholipases
 - Bicarbonate

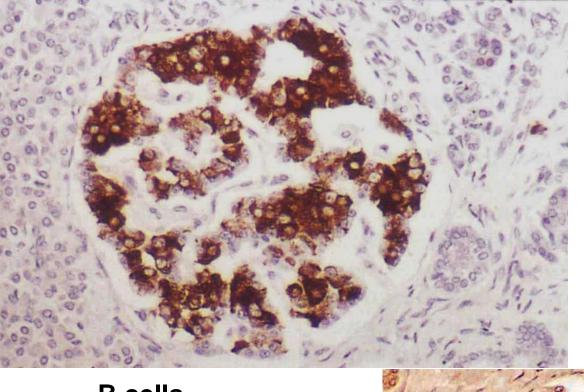
Beef pancreas and thymus are called the sweetbreads.

Even among nose-to-tail eating enthusiasts, beef pancreas often gets overlooked. (https://www.doctorkiltz.com/beef-pancreas/)

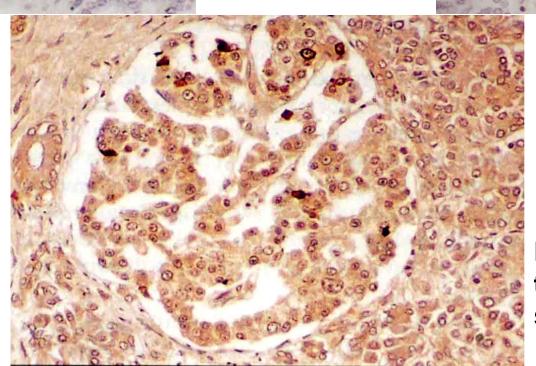


Endocrine
pancreas —
the islets of
Langerhans



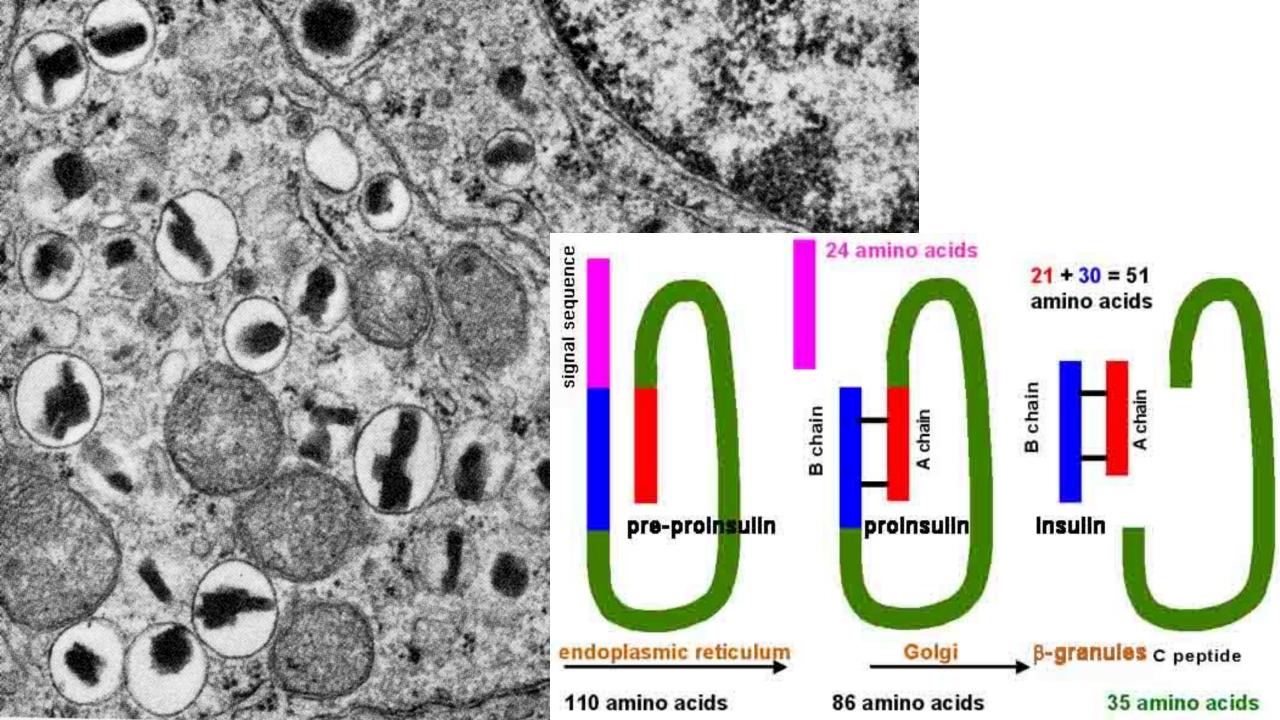


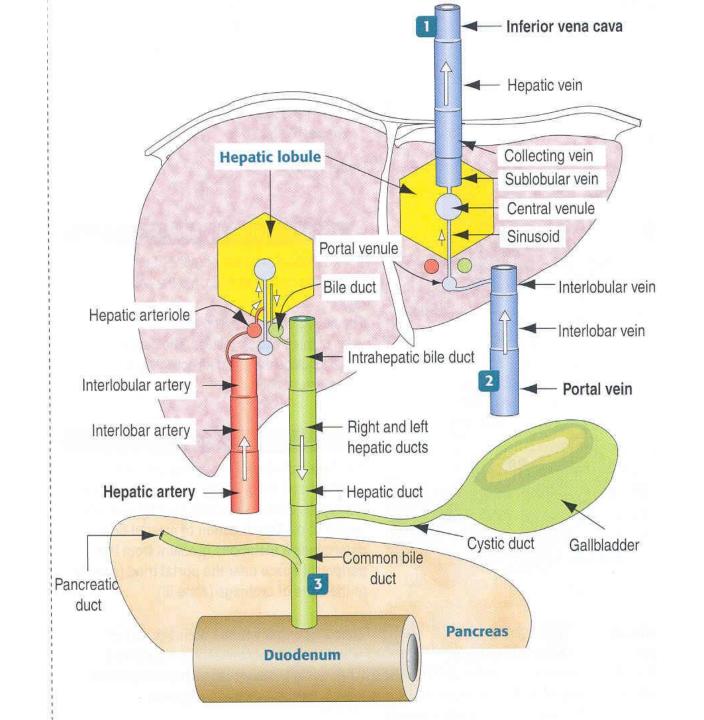
B cells approx. 70 % centrum, clusters



A cells to 20 % periphery, sheets

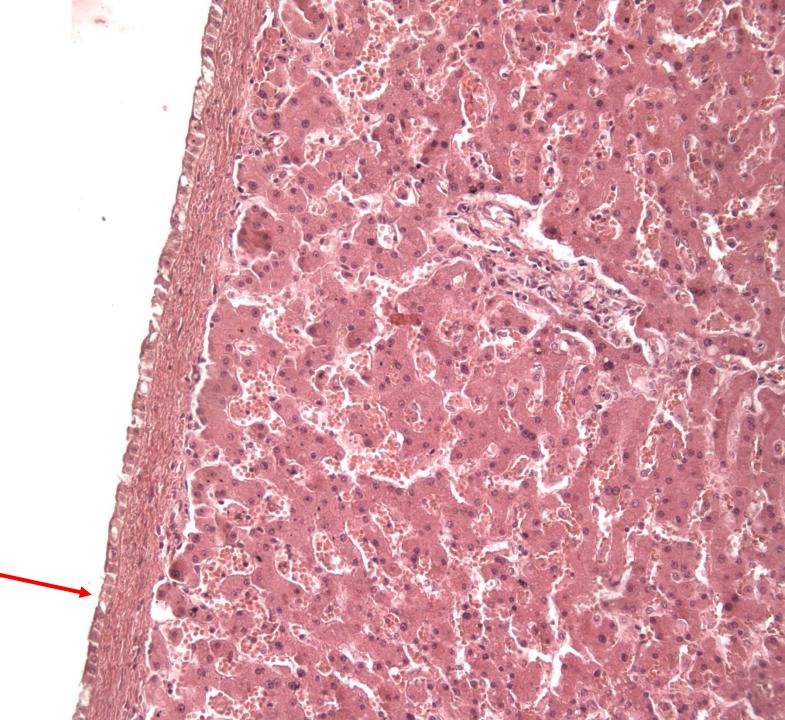
D cells to 5 % scattered

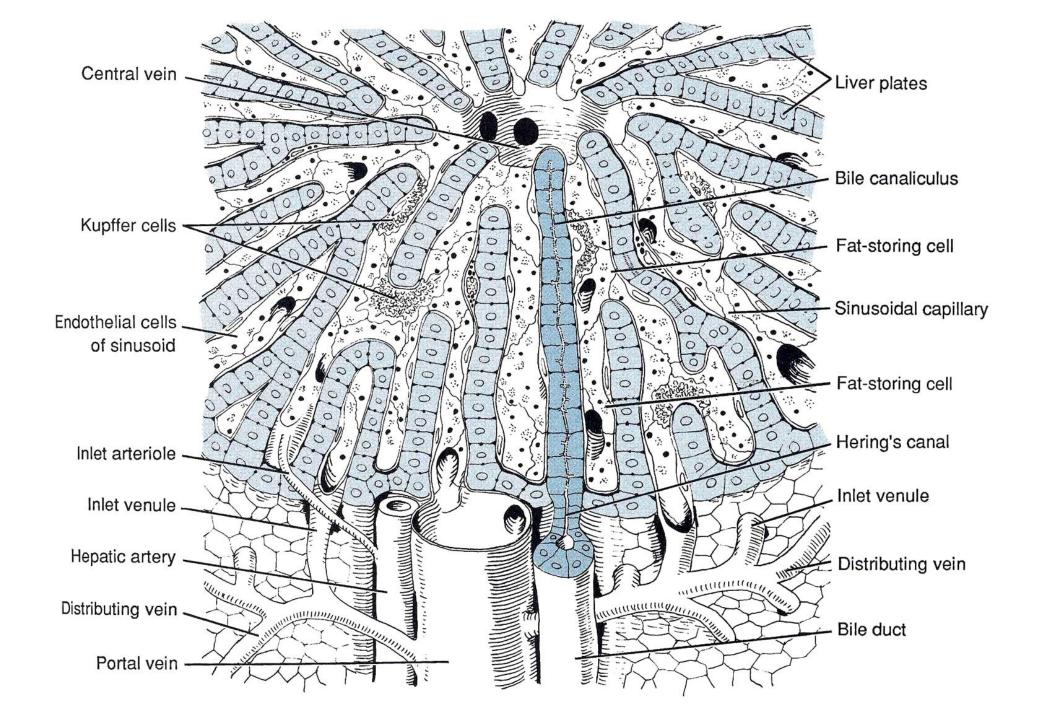


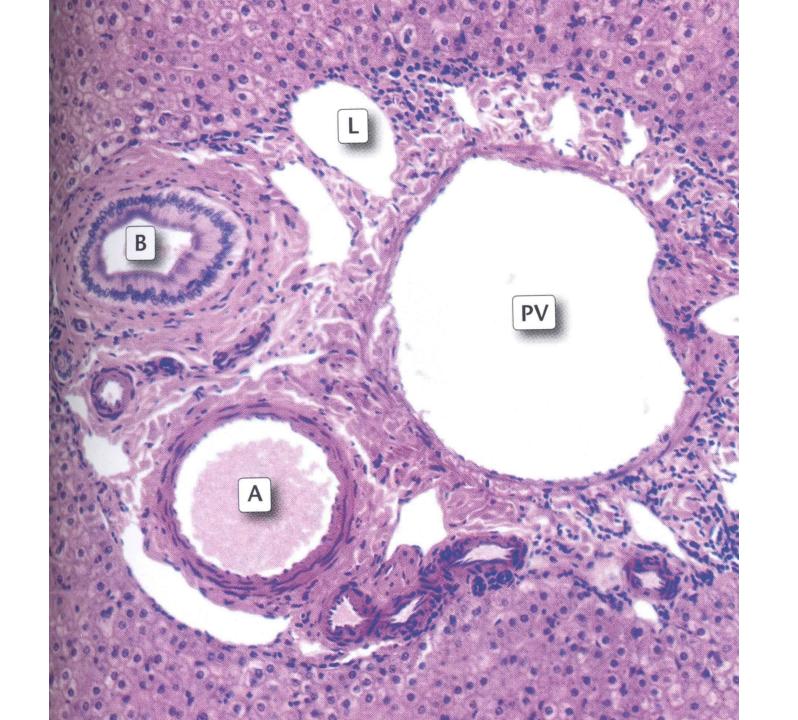


Liver (capsule, trabecular epitehlium)

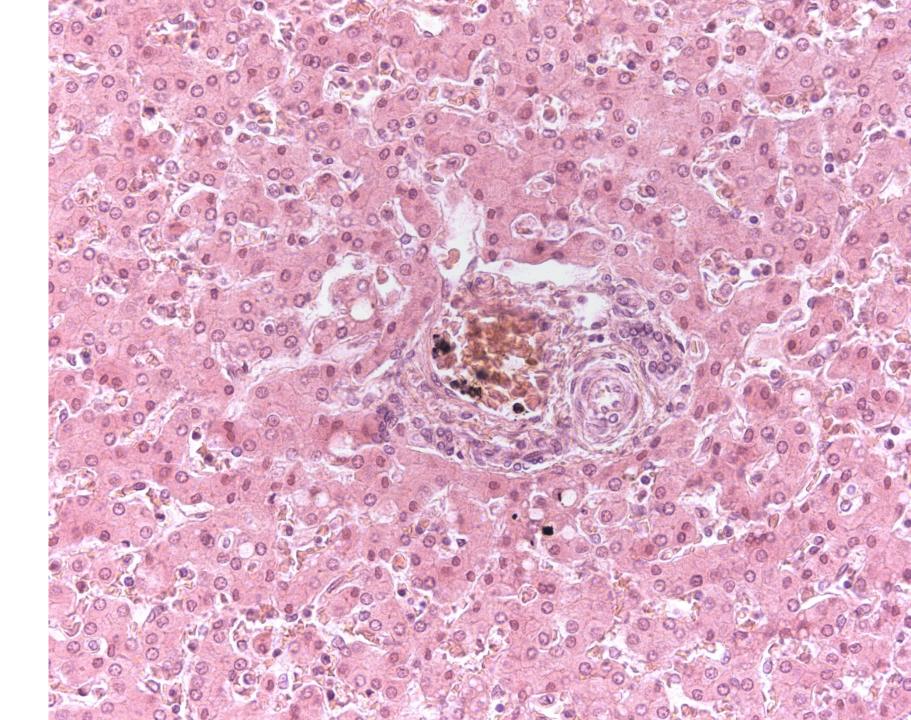
What's this?





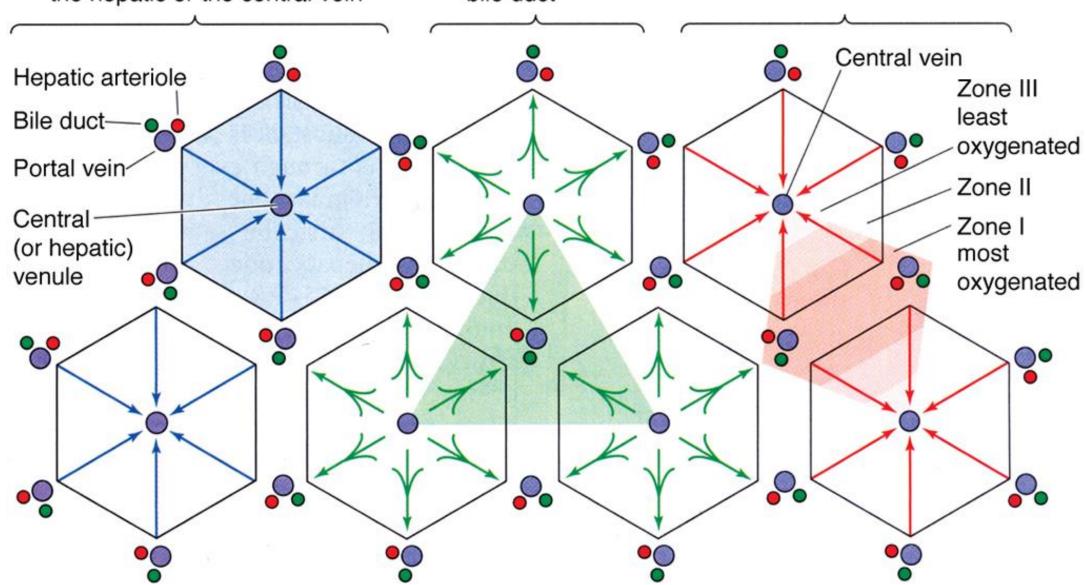


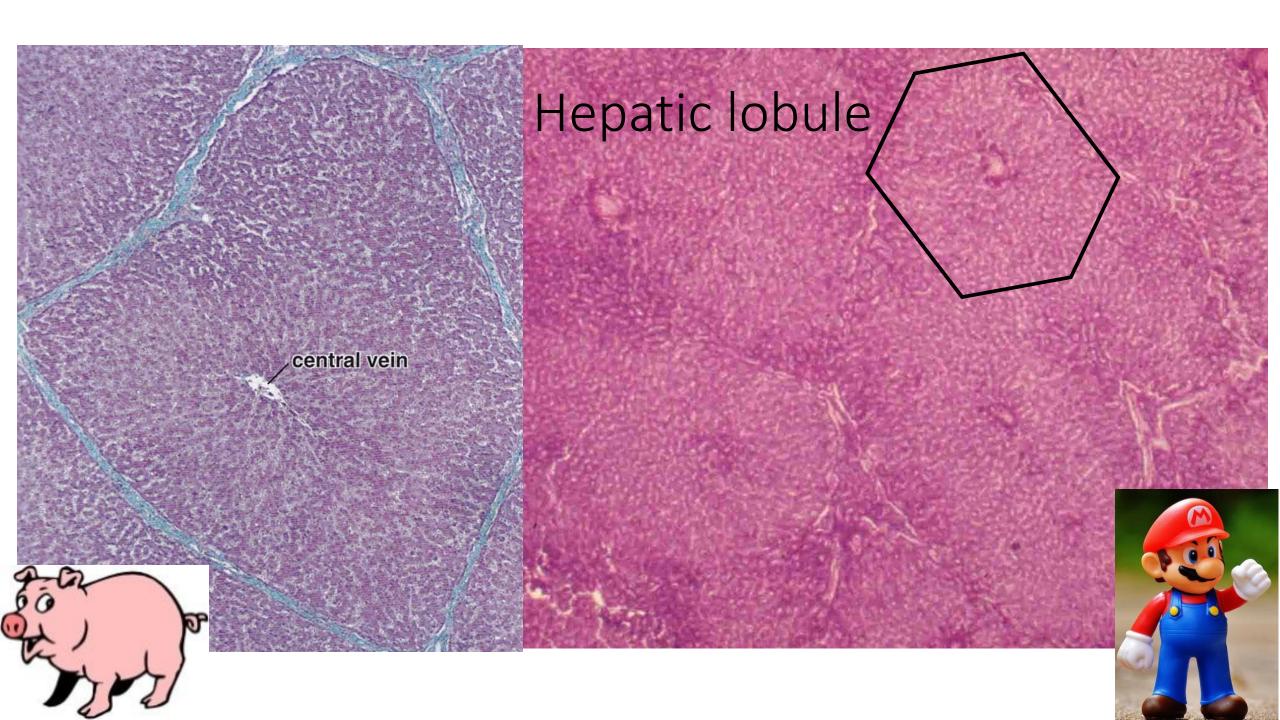
Portobiliary space, portal triad



a CLASSIC HEPATIC LOBULE Drains blood from the portal vein and the hepatic artery to the hepatic or the central vein

- b PORTAL LOBULE
 Drains bile from
 hepatocytes to the
 bile duct
- c PORTAL ACINUS Supplies oxygenated blood to hepatocytes

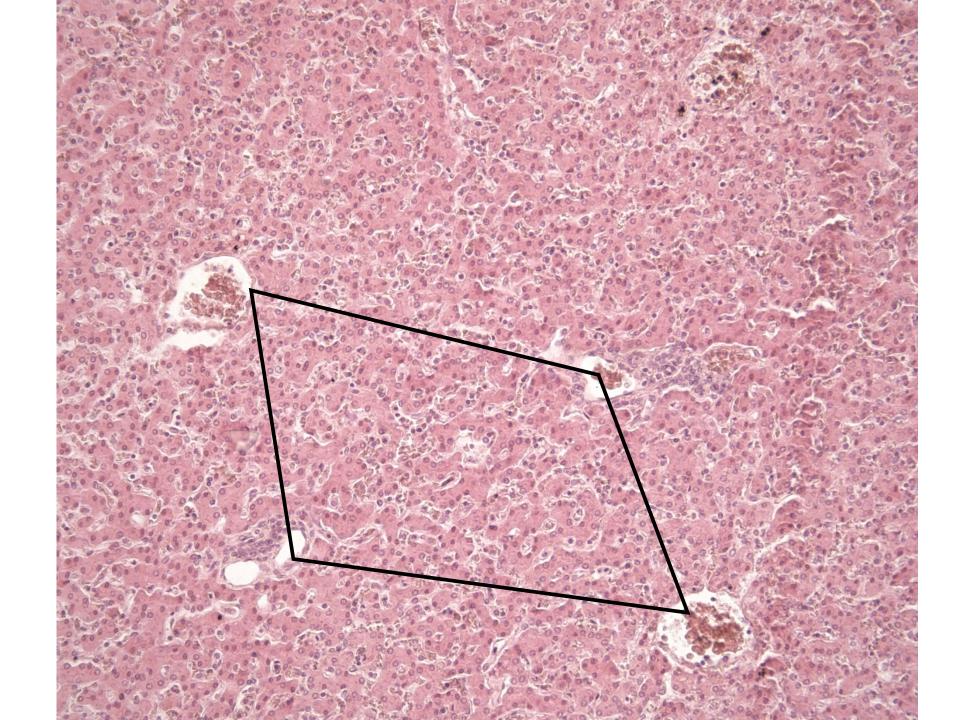




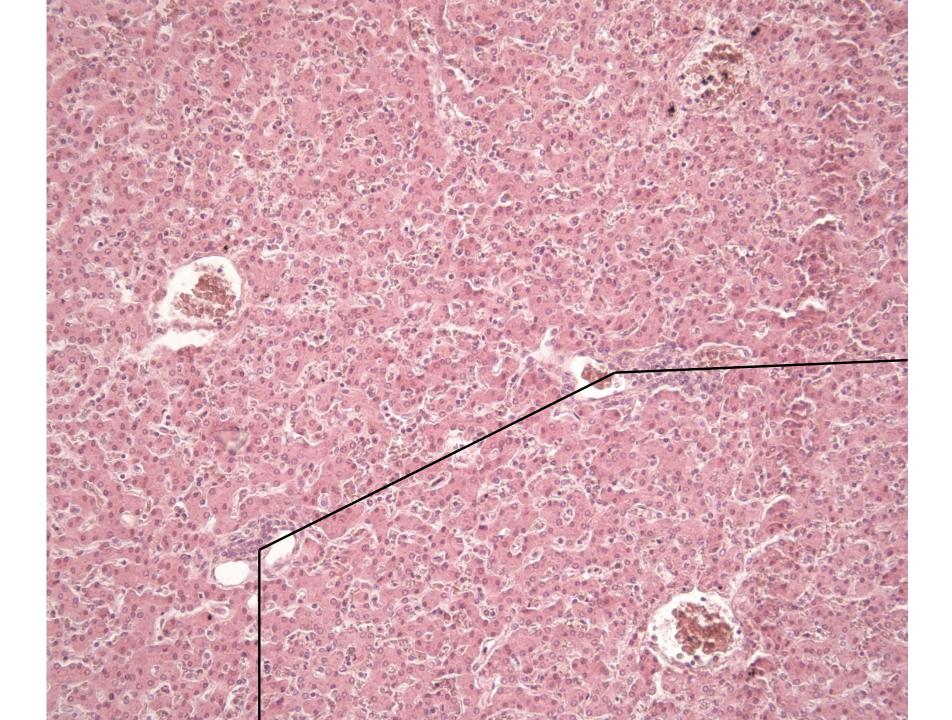
Portal lobule



Portal acinus



Classic hepatic lobule



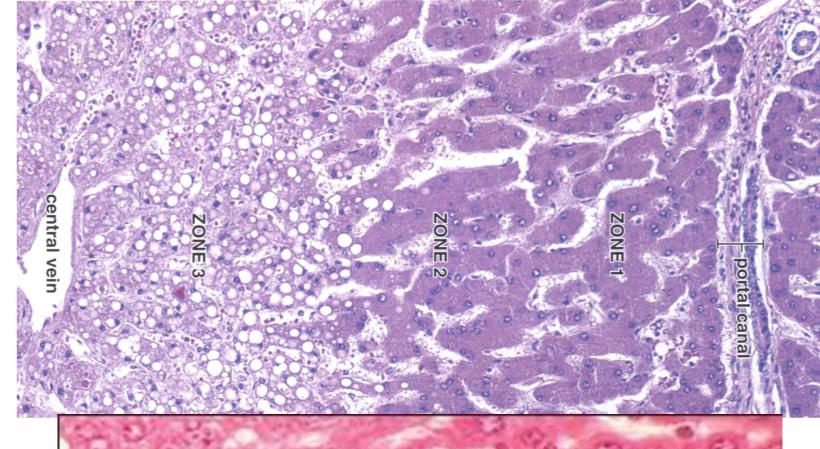
hypoxic damage to classic hepatic lobule

Pawlina, W.: Histology. A Text and Atlas, Wolters Kluwer 2016.

Sarma, V., Janmeda, P.:
Protective assessment of
Euphorbia neriifolia and its
isolated flavonoid against Nnitrosodiethylamine-induced
hepatic carcinogenesis in male
mice: A histopathological
analysis.

Toxicology International 21 (1), 2014: 37-43.

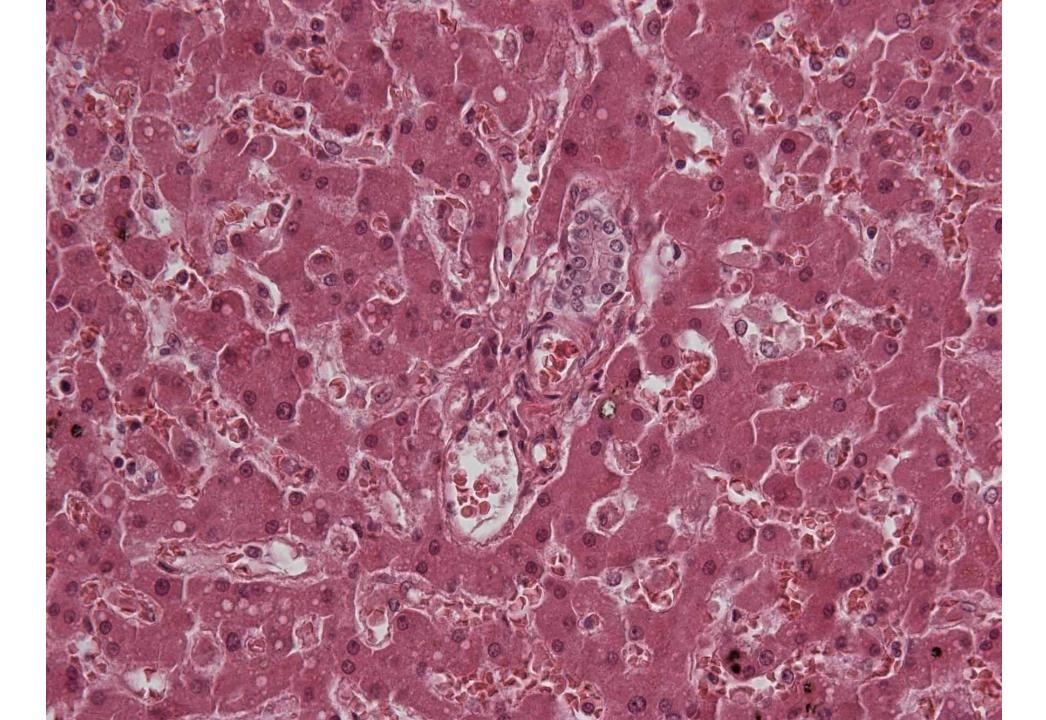
toxic damage to classic hepatic lobule



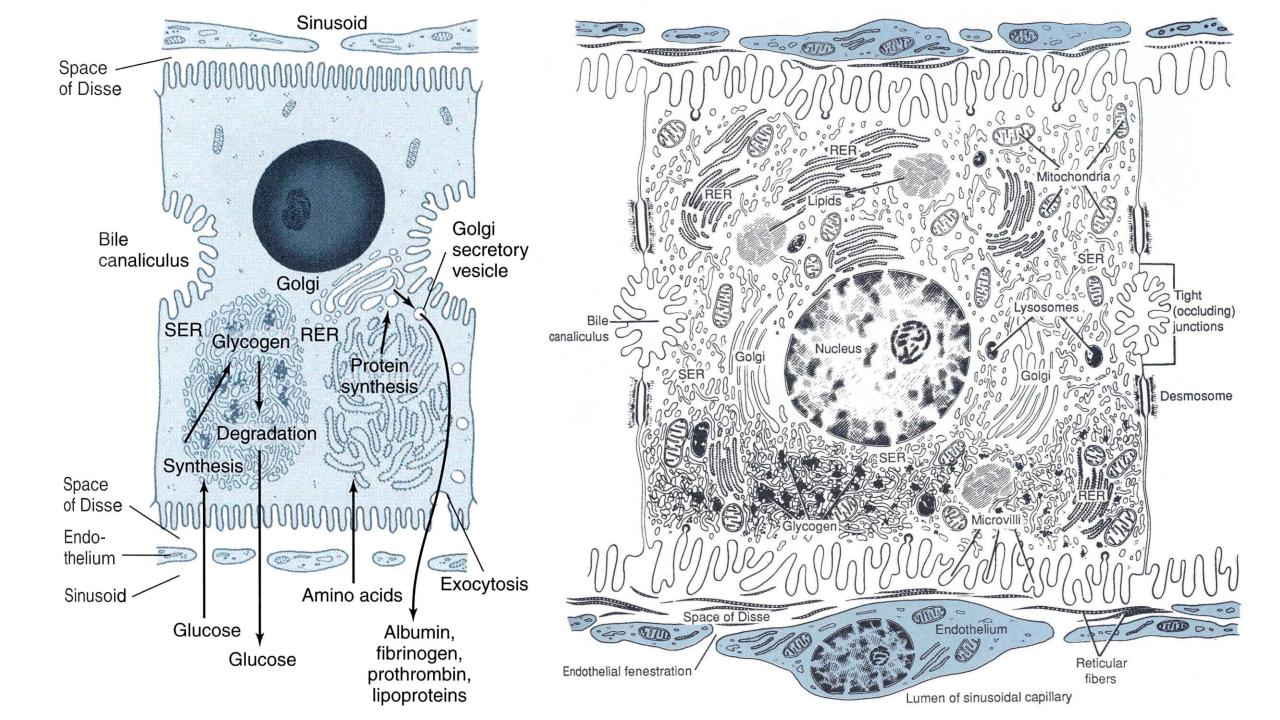


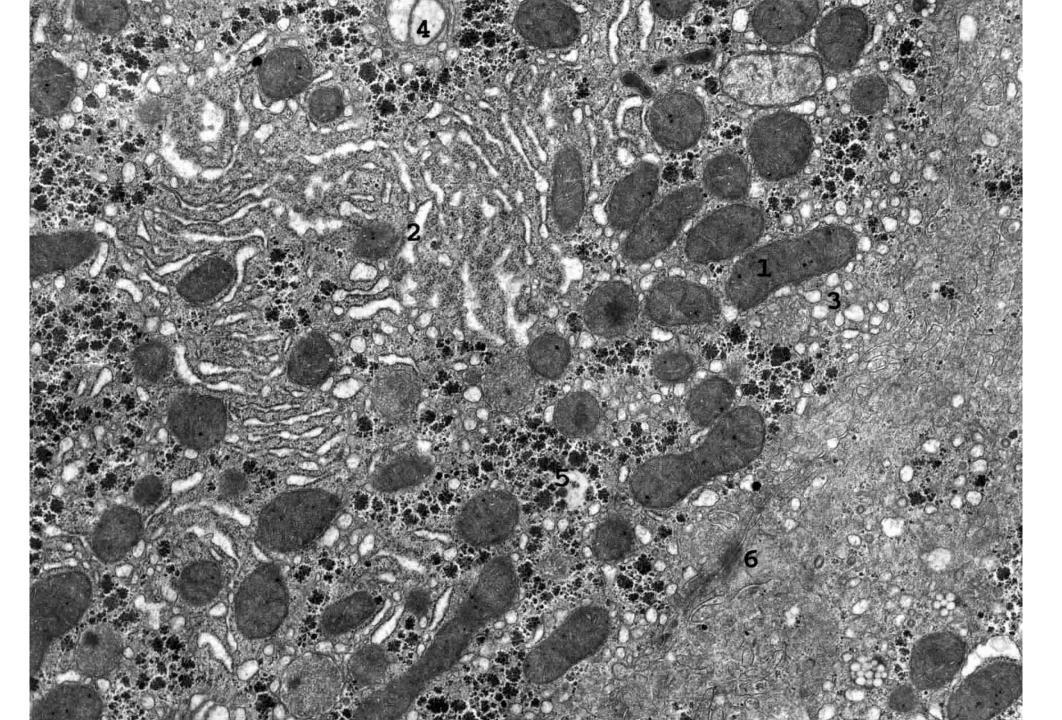
Liver

- Parenchyma of the liver is formed by trabecular epithelium (hepatocytes), between the trabecules there are sinusoids
- The liver has a functional (v. portae) and nutritional (a. hepatica propria) blood supply, branches of these travel in the portal spaces and blood finally mixes in the sinusoids
- Vessels of the portal space with a bile duct make up the portal triad (however, lymphatic vessels are traveling along as well)
- Classic liver lobule (6 portal triads surrounding a central vein), portal lobule (3 central veins surrounding a portal triad), portal acinus (2 adjacent portal triads and their 2 shared central veins)

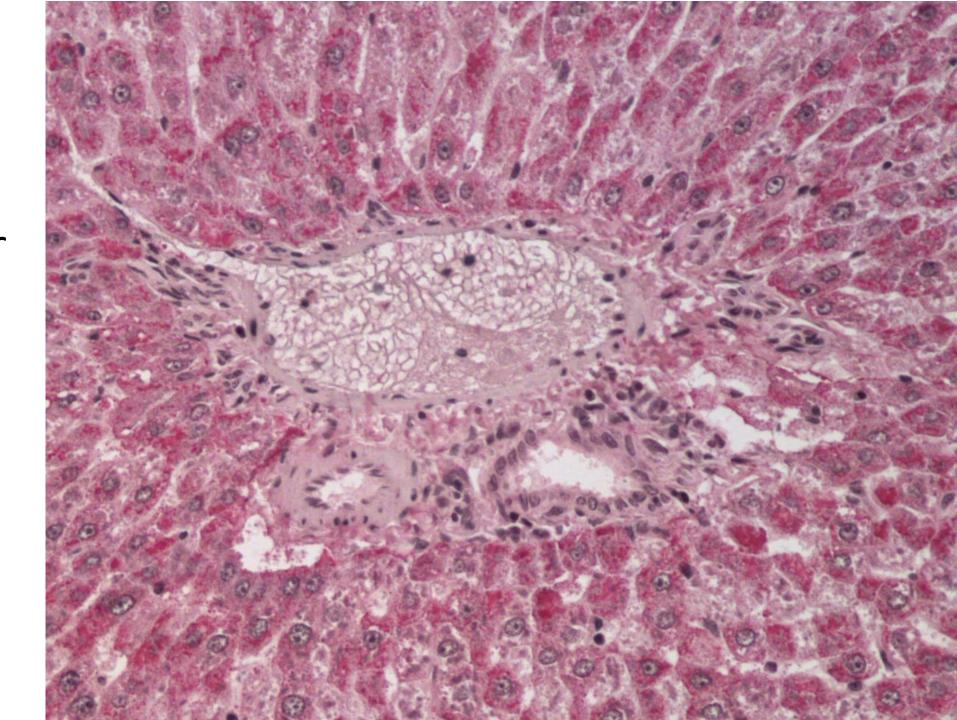








Best's carmine for glycogen

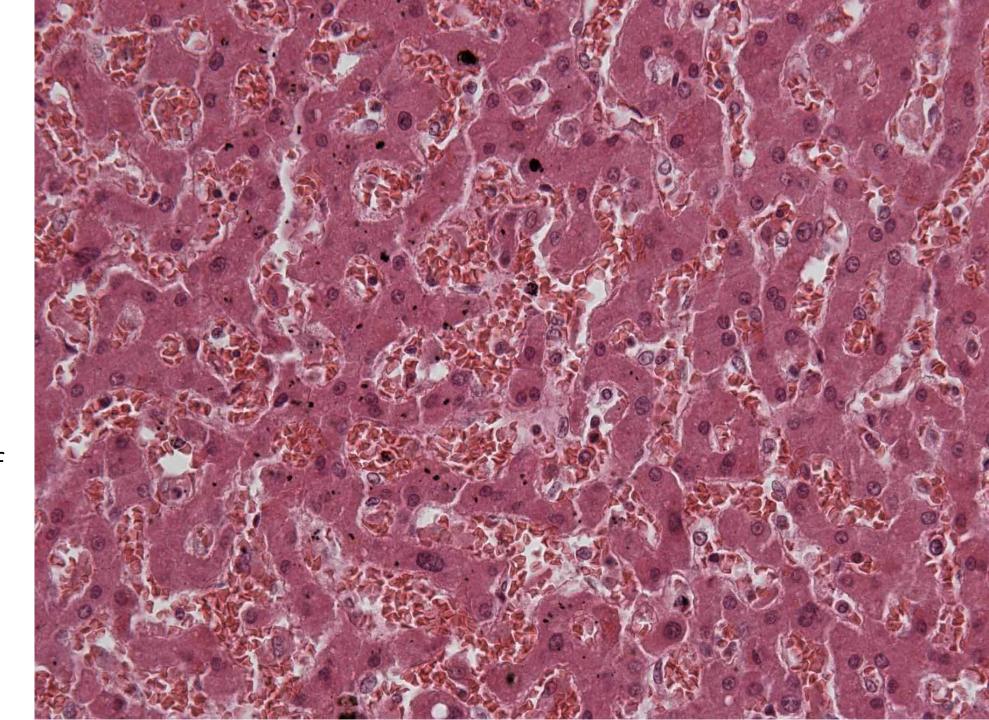


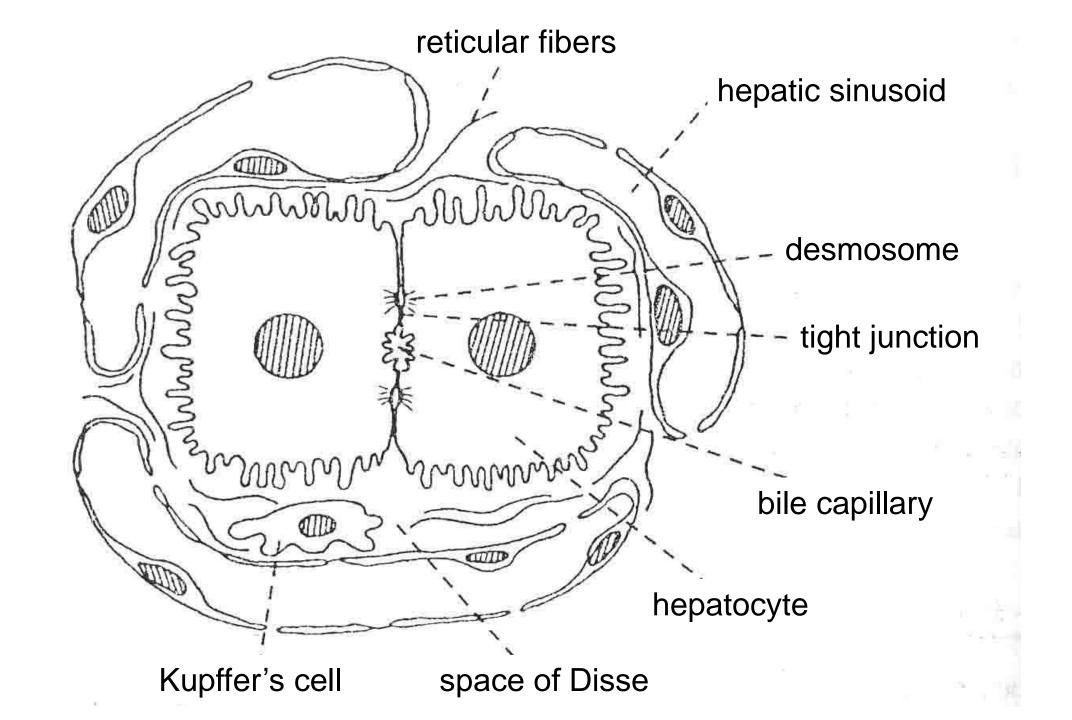
Hepatocytes

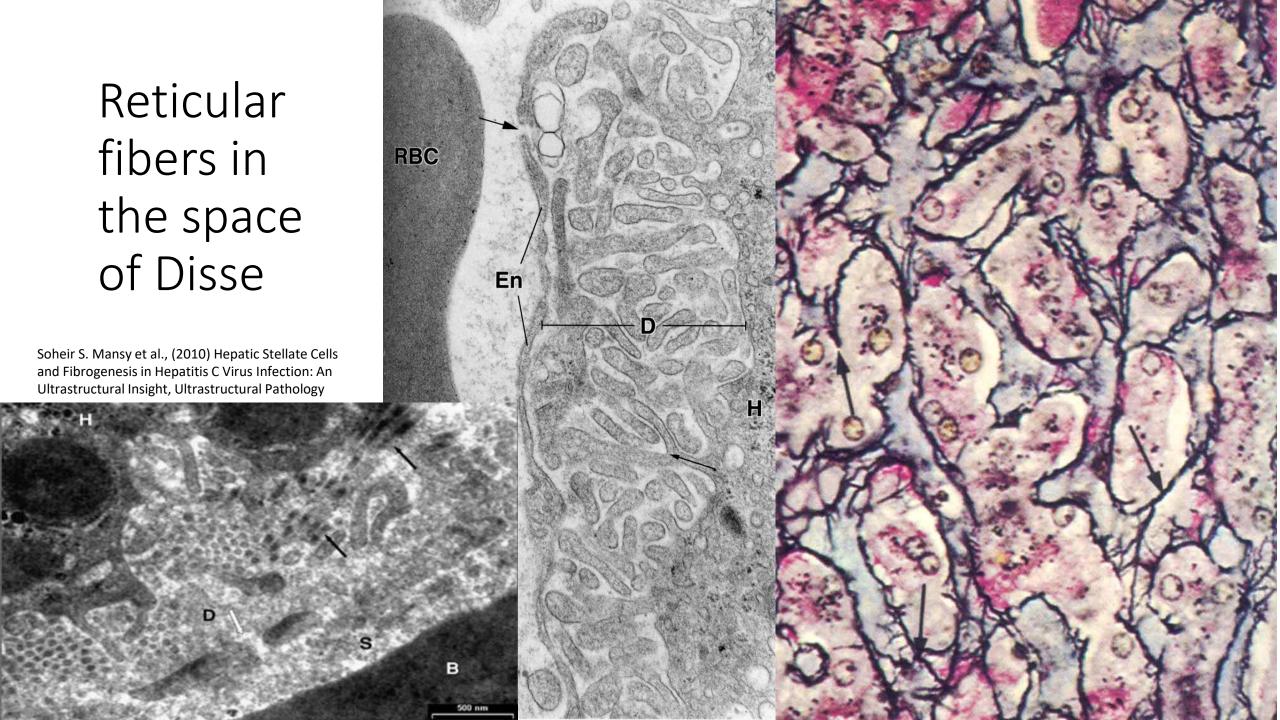
- Metabolic activity (extensive)
 - Synthesis (plasma proteins, glucose, lipoproteins, ketone bodies, bile)
 - Storage (vitamins A, D, K, E, iron, glycogen)
 - Degradation and excretion (billirubin, proteins to urea, xenobiotics)
- Well developed organelles and cellular junctions
- Microvilli on both apical (bile canaliculus) and basal (space of Disse towards the sinusoids) surfaces

Hepatic sinusoids

What are the most important characteristics of a sinusoid?

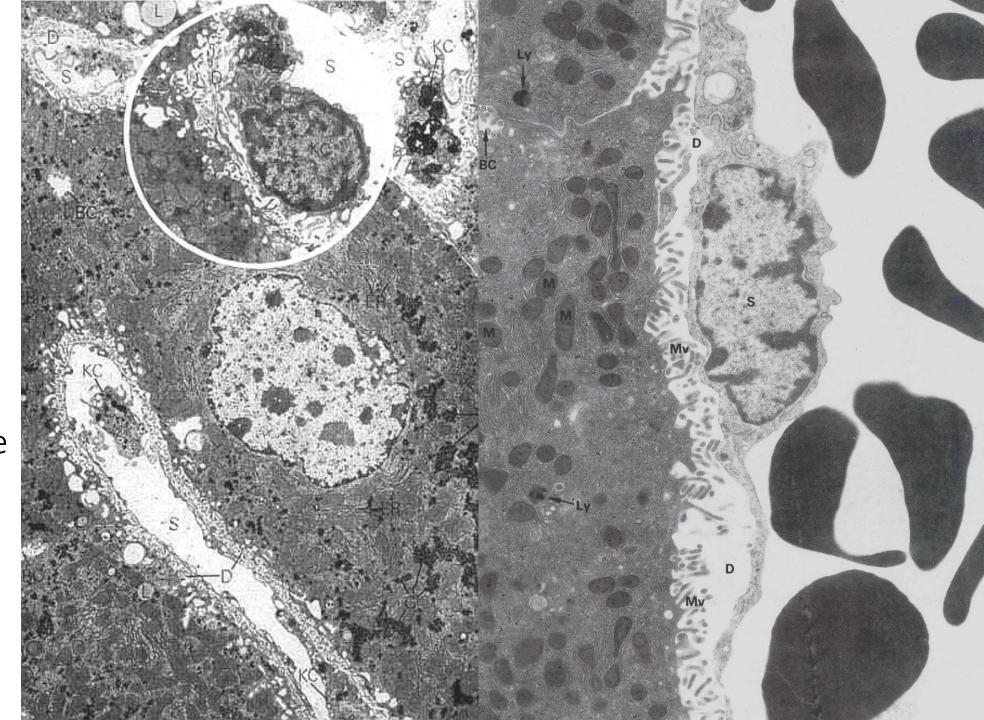




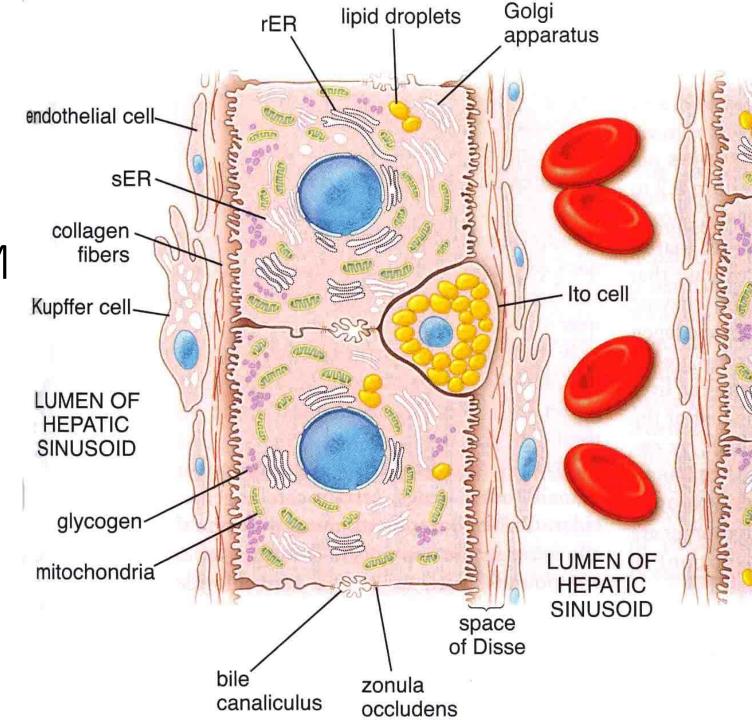


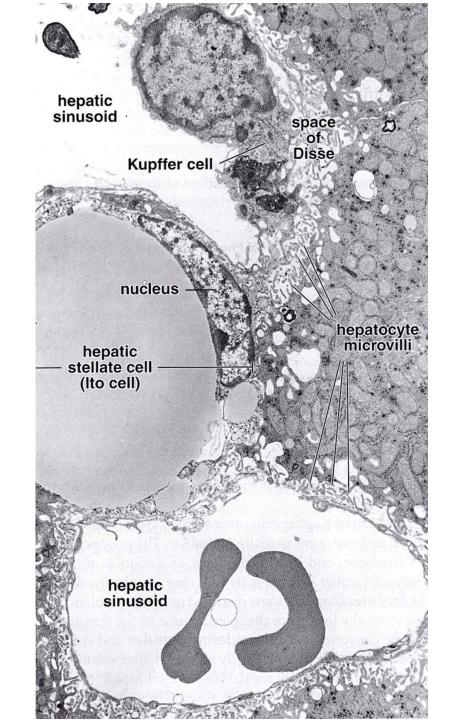
Spaces of Disse

What are the functions of the cells found in the space of Disse?

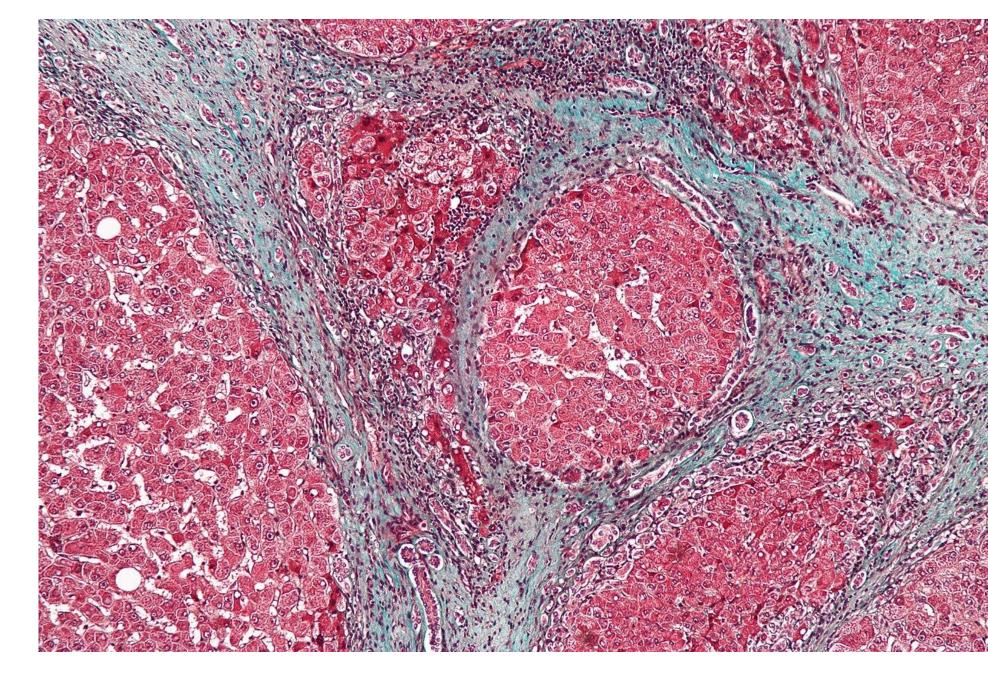


Ito cells (hepatic stellate cells) store vitamin A and fat and can participate in ECM production and inflammation. They probably play a role in liver cirrhosis, where they differentiate into myofibroblasts.

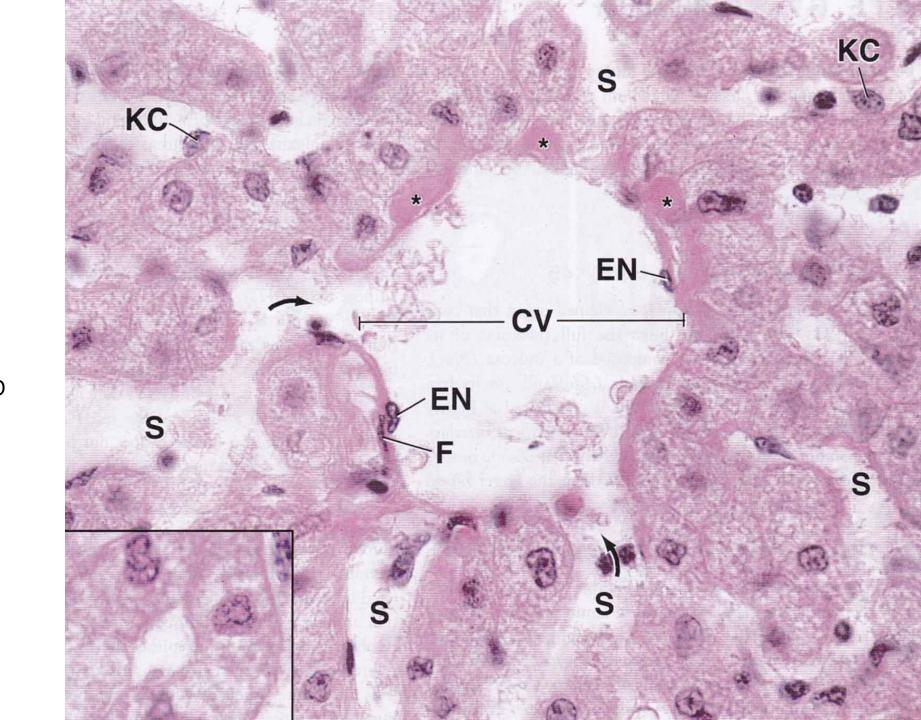


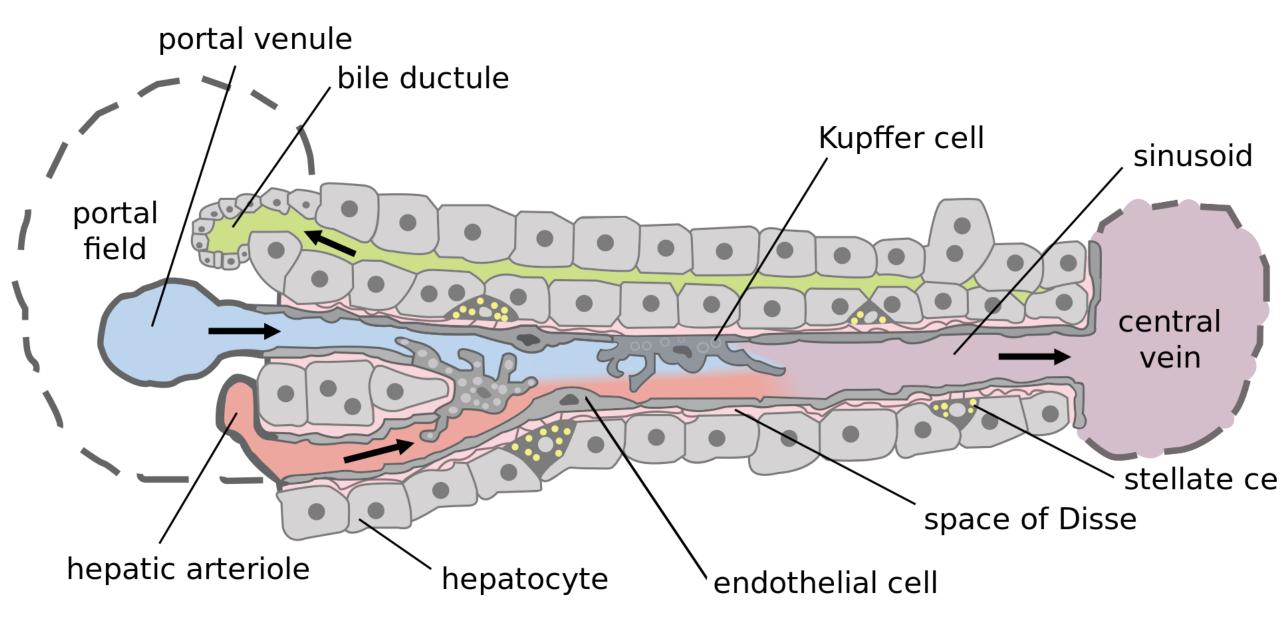


Liver cirrhosis is a disease caused by prolonged exposure to harmful factors (e.g. hepatitis viruses B and C, alcohol). In response, the connective tissue of liver proliferates and nodules form.



https://en.wikipedia.org/wiki/Cirrhos is#/media/File:Cirrhosis_high_mag.jp g Kupffer cells are liver macrophages. They line the sinusoids (but don't form cell junctions) and send their processes into the sinusoid lumen.

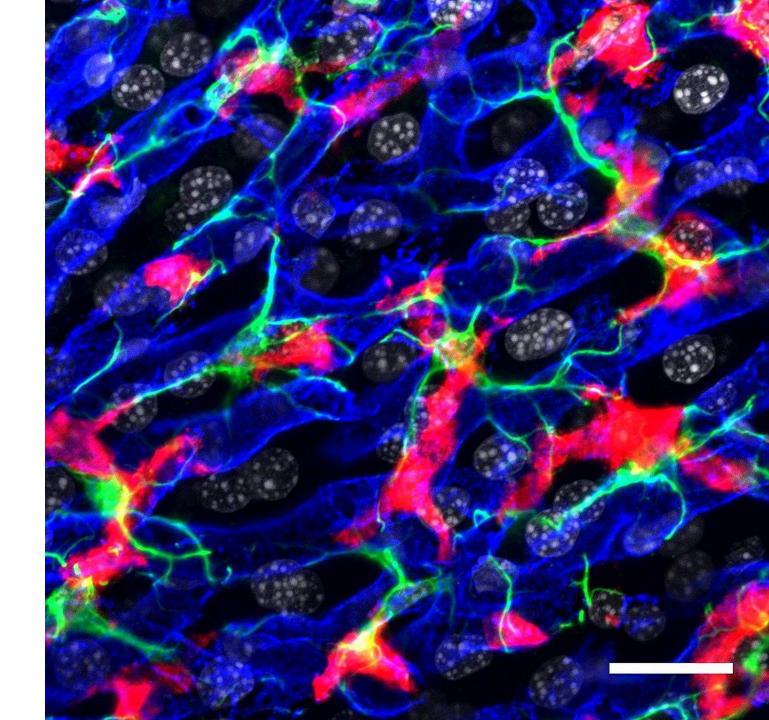


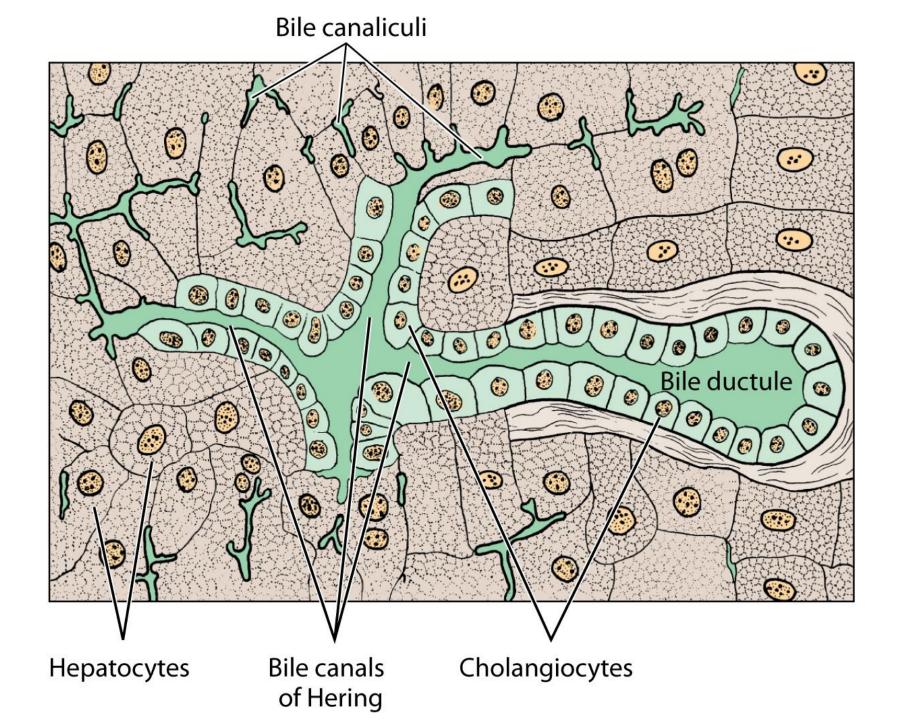


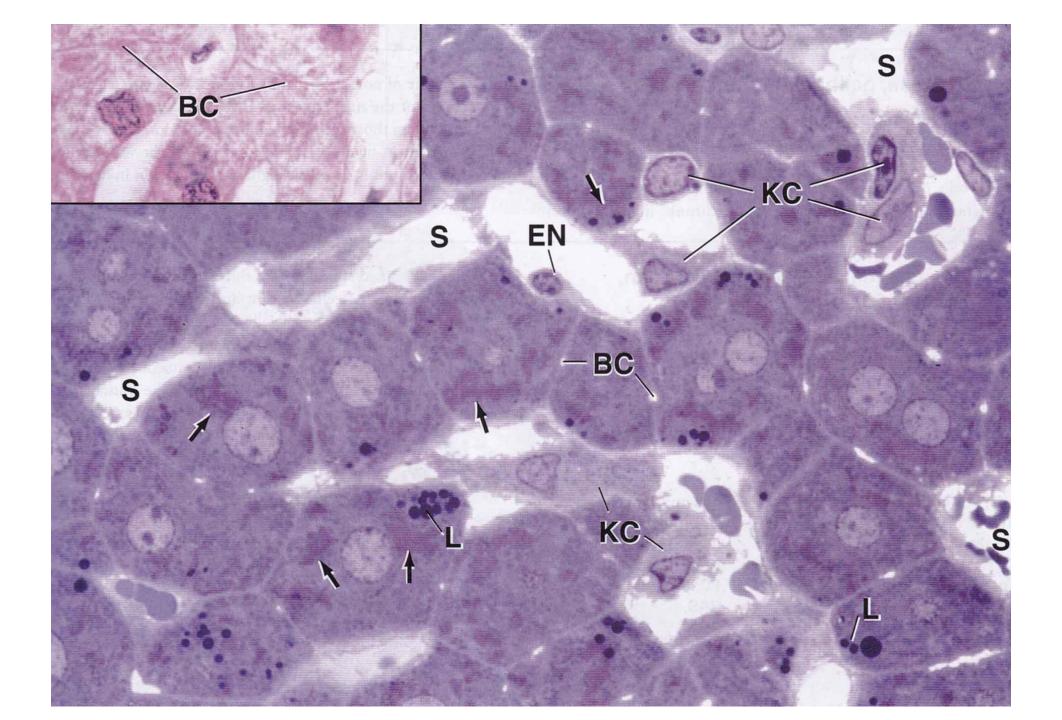
https://en.wikipedia.org/wiki/Kupffer_cell#/media/File:Hepatic _structure2.svg

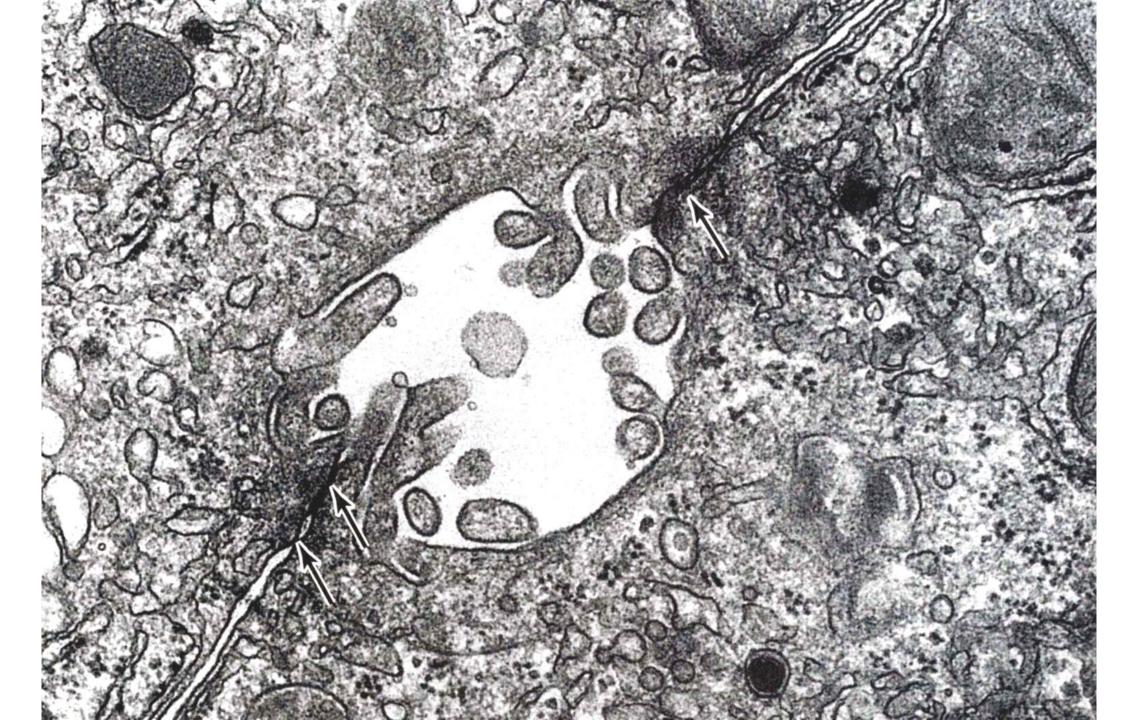
Ito cells – green Kupffer cells – red Endothelia – blue Nuclei – white

https://en.wikipedia.org/wiki/Kupffer_cell#/media/File:Interaction_betw een_Kupffer_cells,_Stellate_cells_and_endothelial_cells.jpg

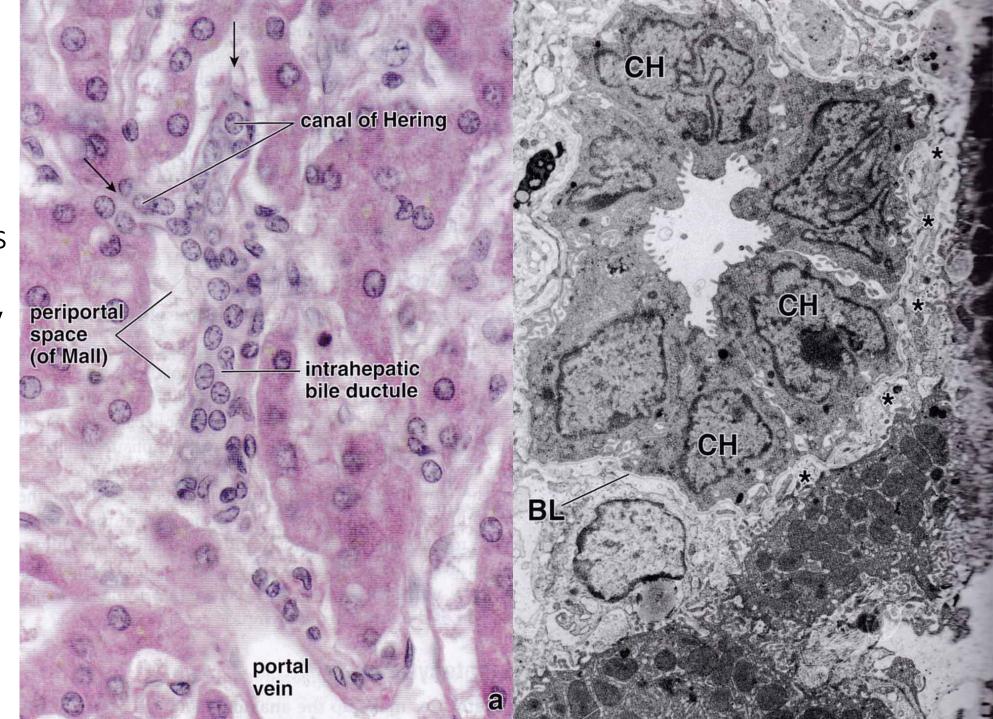




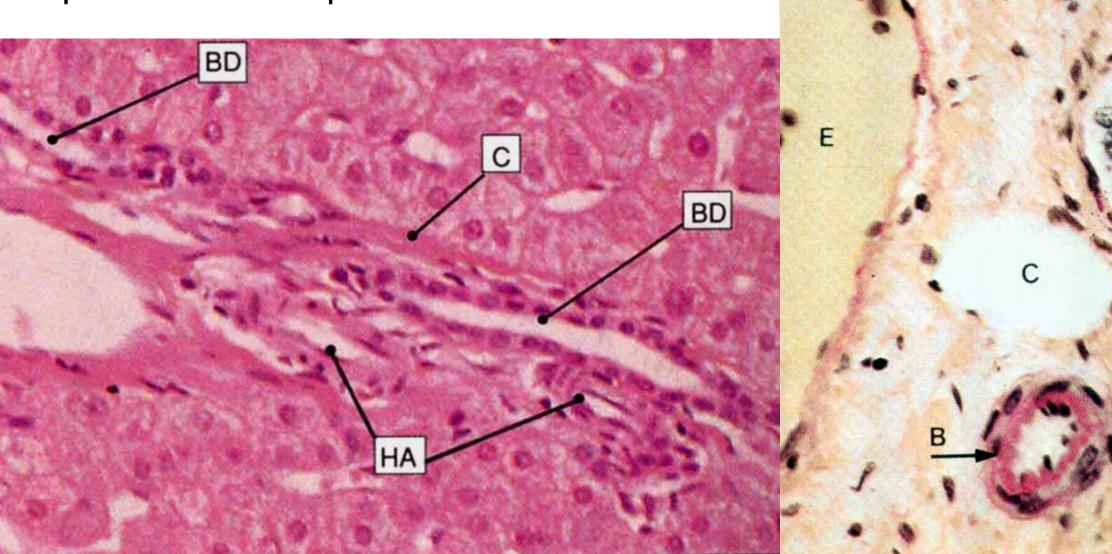




Canals of Hering are partially lined by cholangiocytes (simple cuboidal epithelium). They feed into intrahepatic bile ductules (completely lined by cholangiocytes).



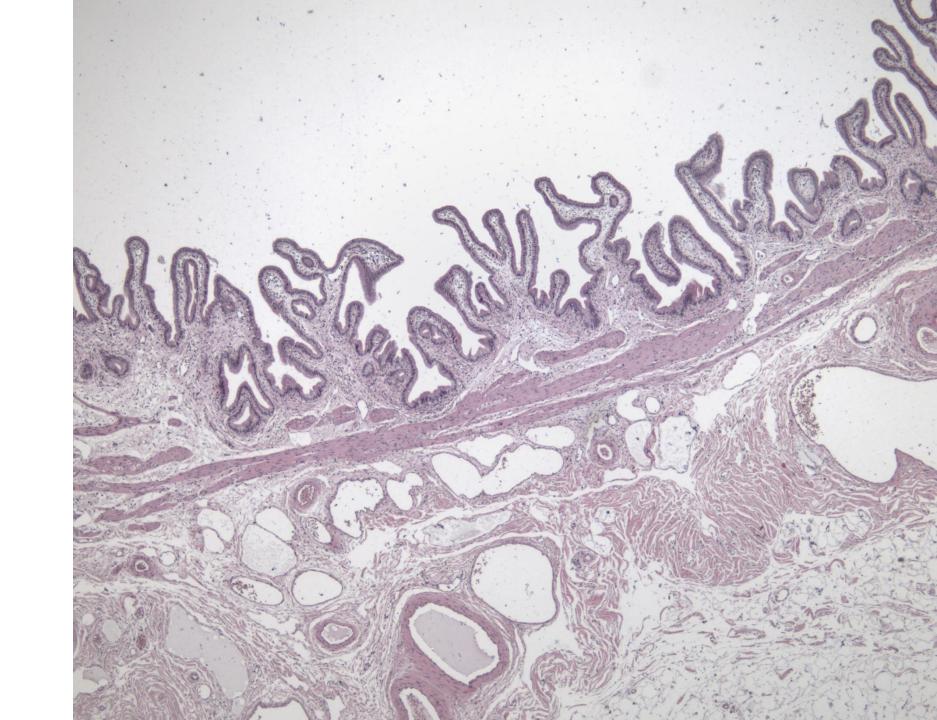
Interlobular bile ducts are a part of the portal triad.



In larger bile ducts the epithelium becomes columnar

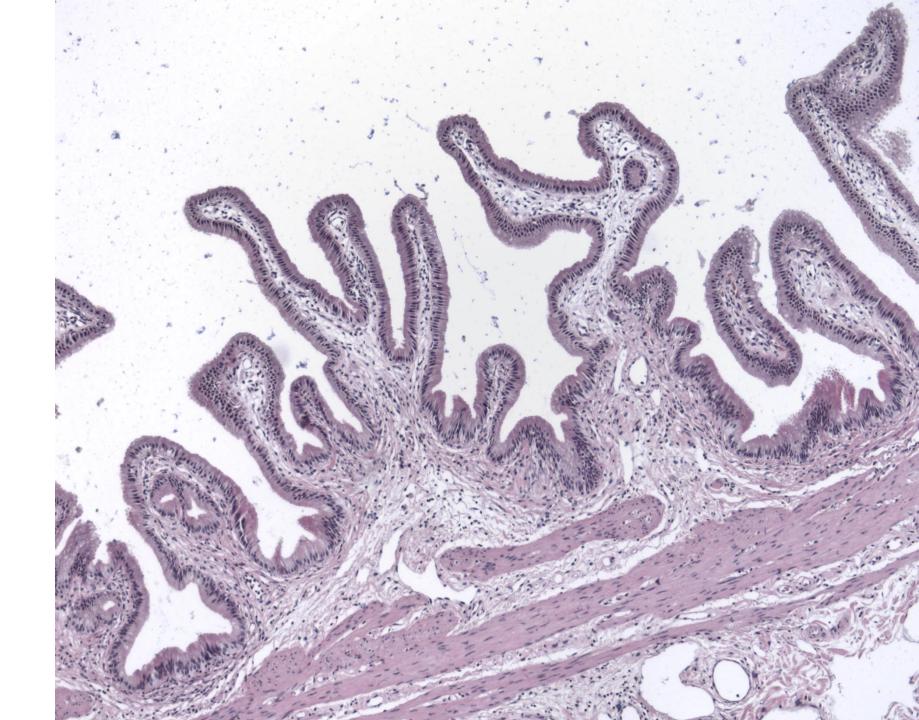


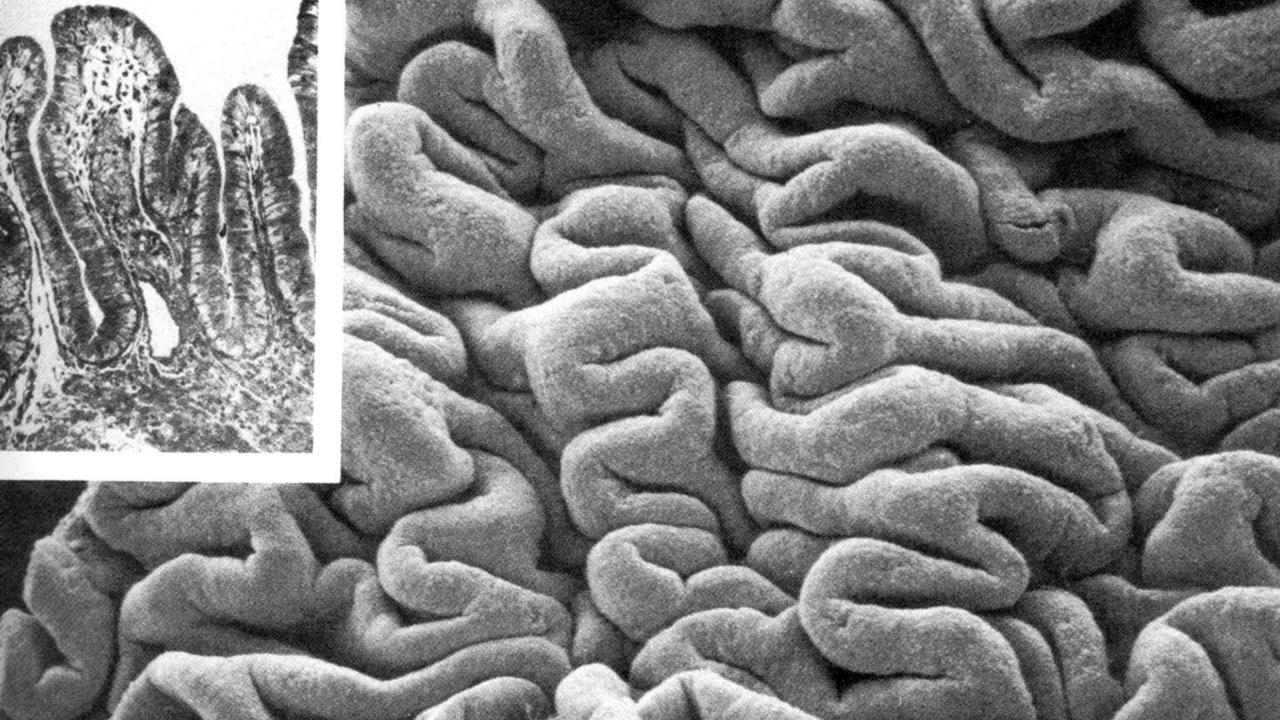
Gallbladder contains mucosa with folds, muscularis externa and thick adventitia or serosa.



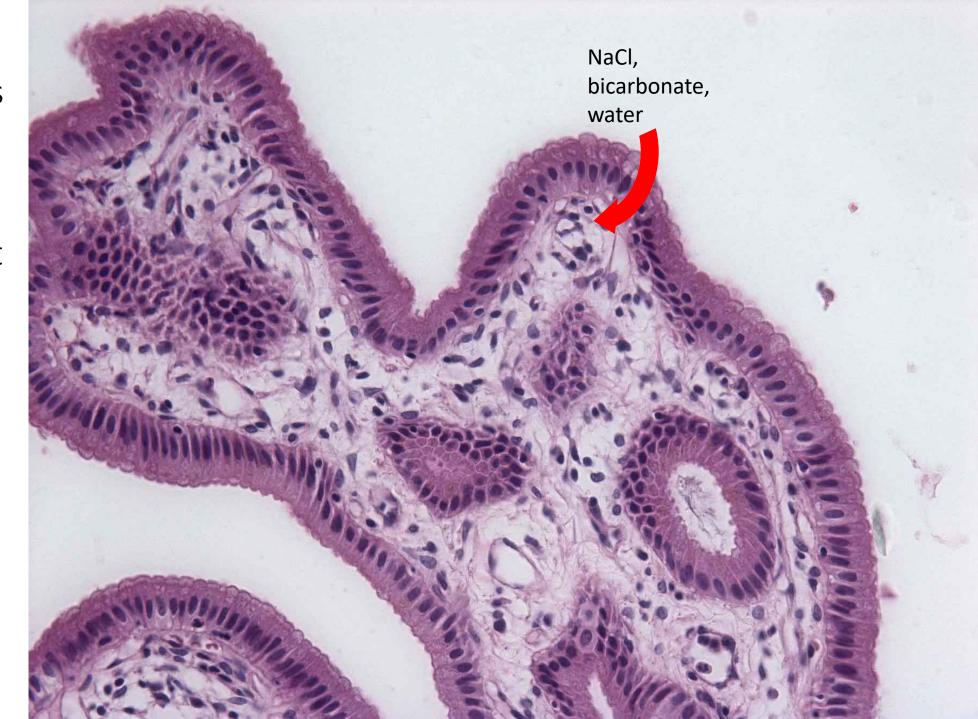
There is no muscularis mucosae.

The smooth muscle you see is muscularis externa.

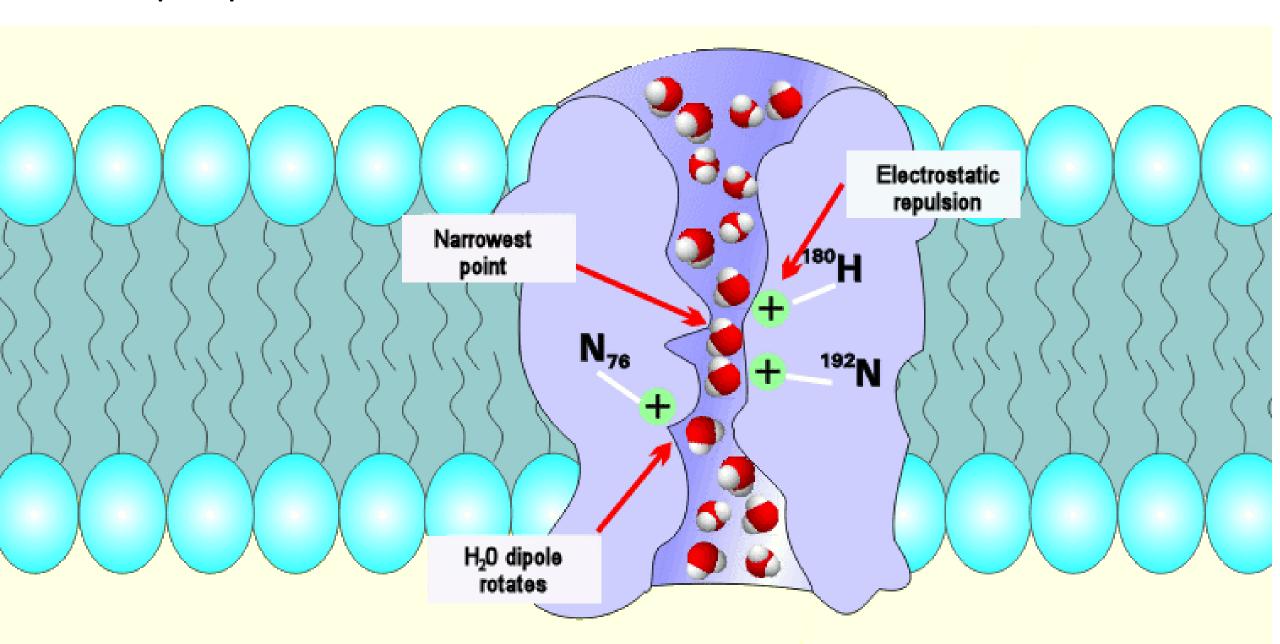


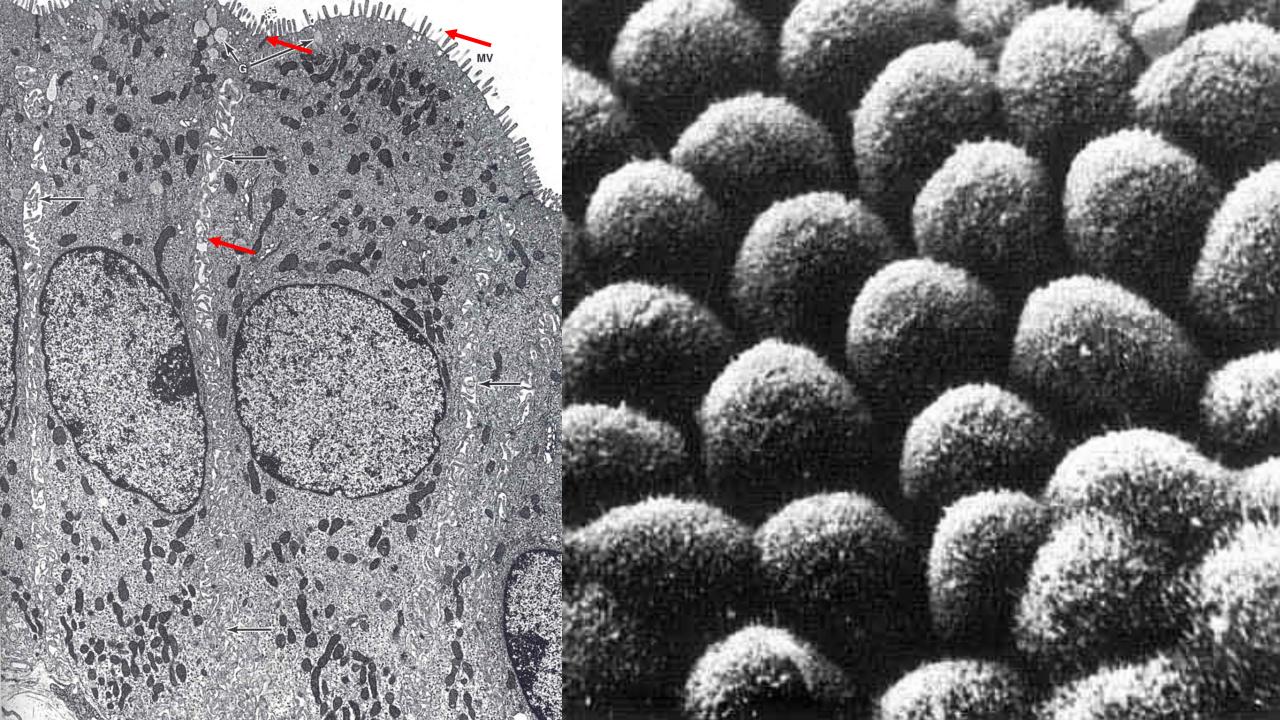


The epithelial cells actively transport electrolytes and contain aquaporins (about 90% of water can be absorbed). Note well developed capillary network.



Aquaporin

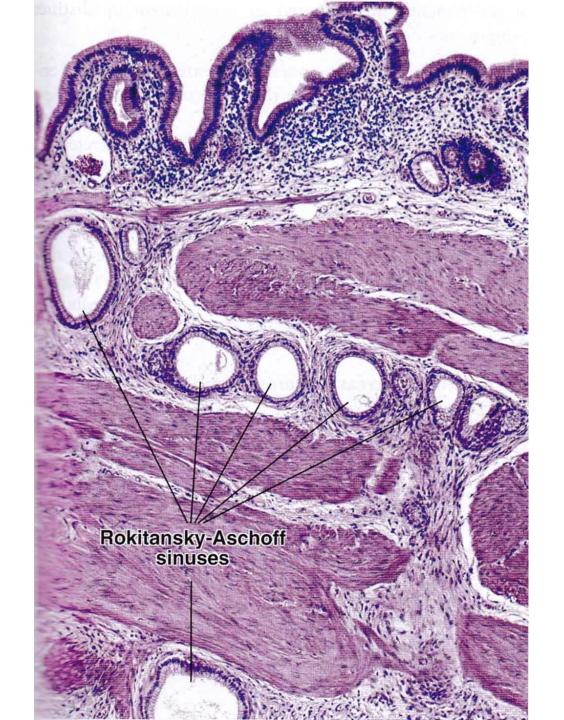




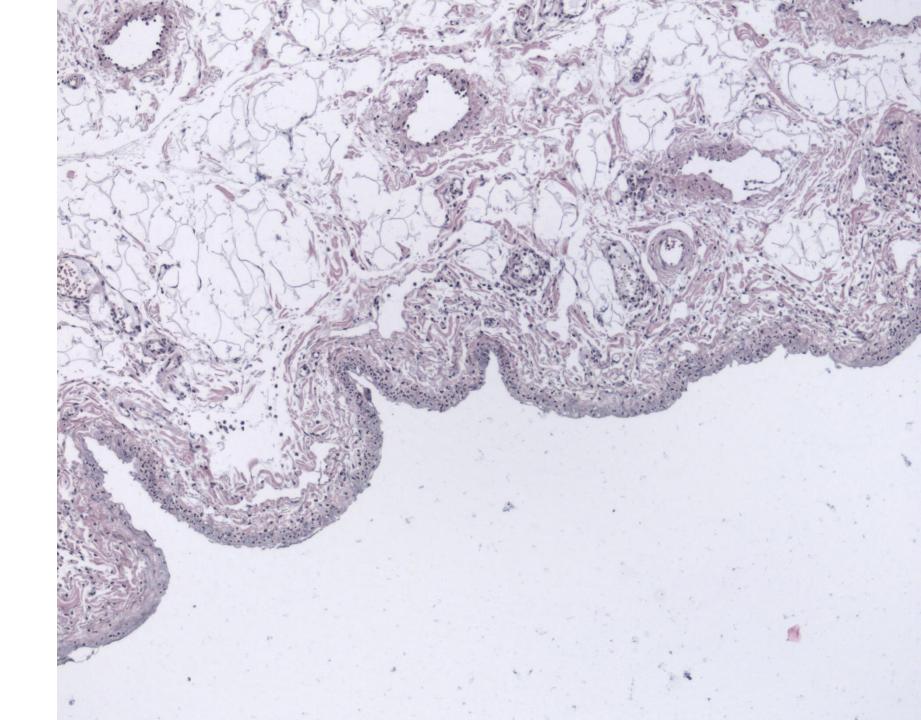
What are these made of?



Rokitansky-Aschoff sinuses are sometimes considered pathologic structures (result of chronic cholecystitis or damage caused by gallstones).



Is there adventitia or serosa on the gallbladder?



Gallbladder

- Three layers (mucosa, muscularis, adventitia/serosa)
- Mucosa contains simple columnar epithelium (cholangiocytes)
 provisioned with microvilli, junctional complexes and complex lateral
 plications and lamina propria containing a rich capillary network
- The principal function of the gallbladder is bile storage and concentration, epithelial cells are able to transport water and electrolytes into lamina propria, where the fluid is taken up by the capillaries