

MUSCLE TISSUES

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of the General Medicine Faculty, RNMR*

MUSCLE TISSUES

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graph TD; A[MUSCLE TISSUES] --> B[STRIATED MUSCLE]; A --> C[SMOOTH MUSCLE]; B --> D[skeletal]; B --> E[cardiac]; C --> F[smooth]; C --> G[myoneural];
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STRIATED MUSCLE

skeletal

cardiac

SMOOTH MUSCLE

smooth

myoneural

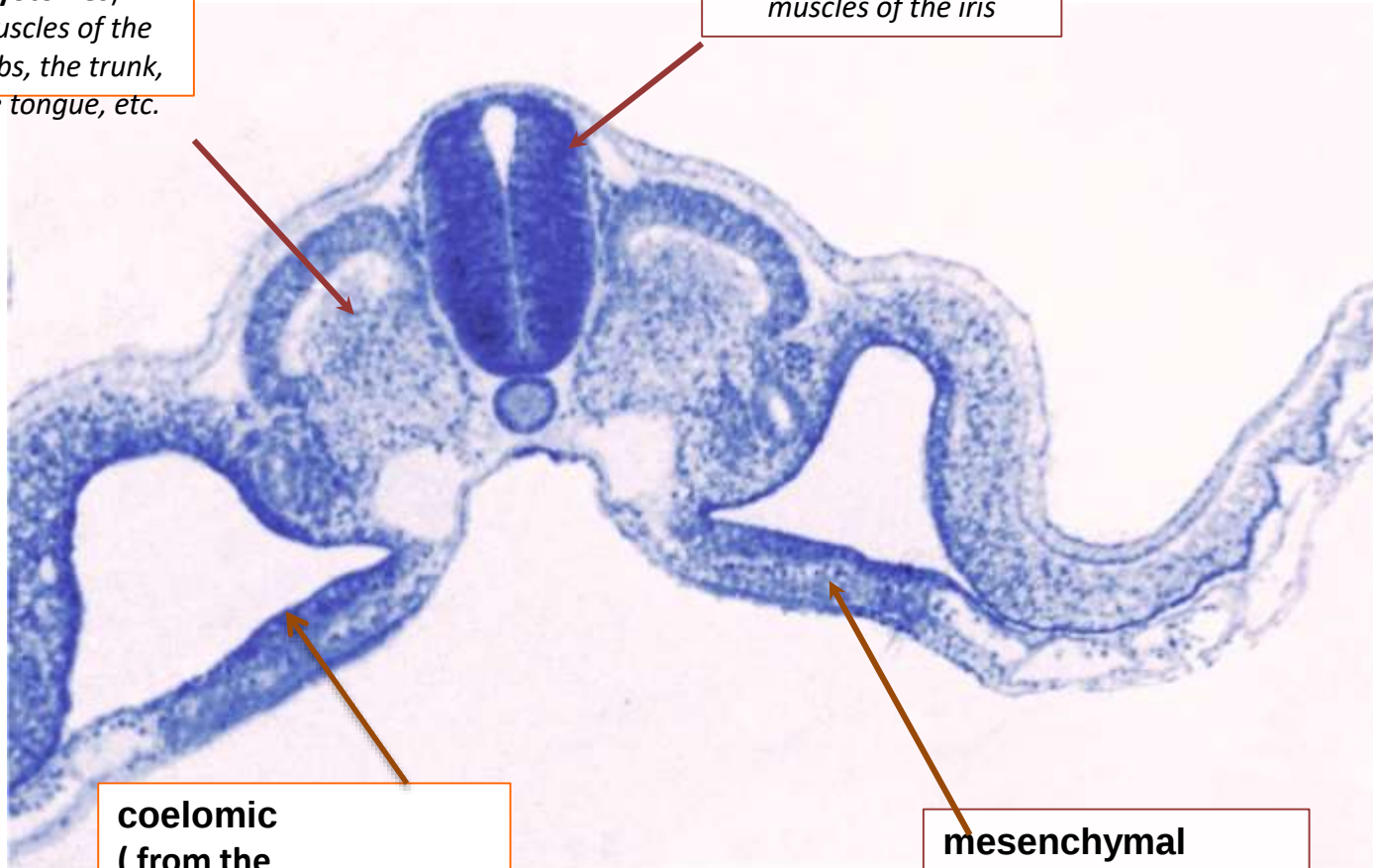
SOURCES OF MUSCLE TISSUE DEVELOPMENT

somatic

(from
myotomes) –
*muscles of the
limbs, the trunk,
the tongue, etc.*

neural

(from the mesenchyme
of neural crest) –
muscles of the iris



coelomic

(from the
myoepicardial plate of
visceral layer of
splanchnotome –
myocardium of the heart)

mesenchymal

(from mesenchyme of
mesodermal origin –
*muscle tissue of the
viscera, vessels, and the
endocardium*)

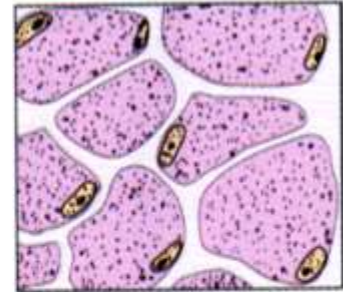
MUSCLE TISSUE TYPES

Skeletal muscle

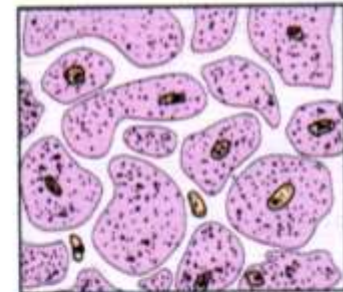


nuclei

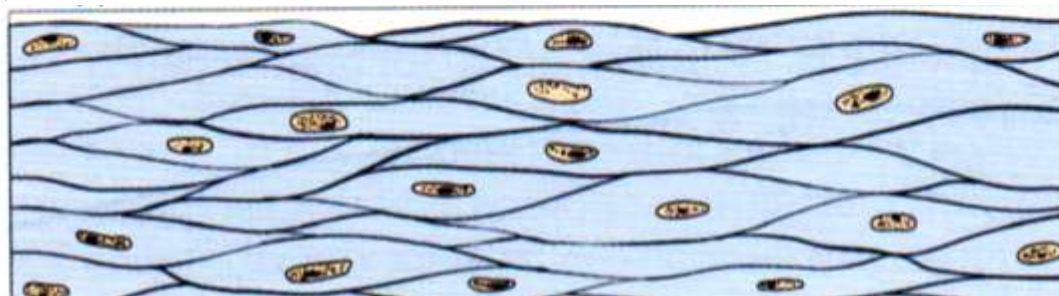
Cross sections



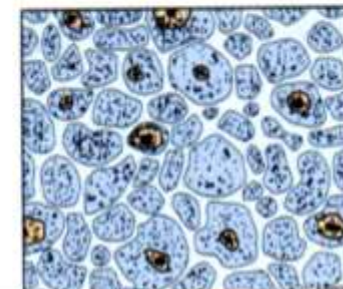
Cardiac muscle



Smooth muscle



intercalated discs



MUSCLE TISSUE TYPES

**BY
STRUCTURE**

STRIATED

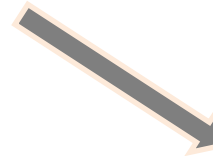


SKELETAL

CARDIAC

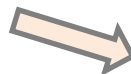
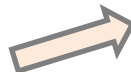


VOLUNTARY



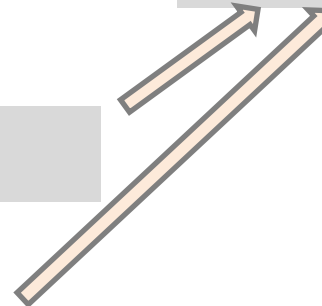
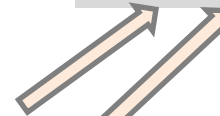
INVOLUNTARY

SMOOTH



VISCERAL

VASCULAR

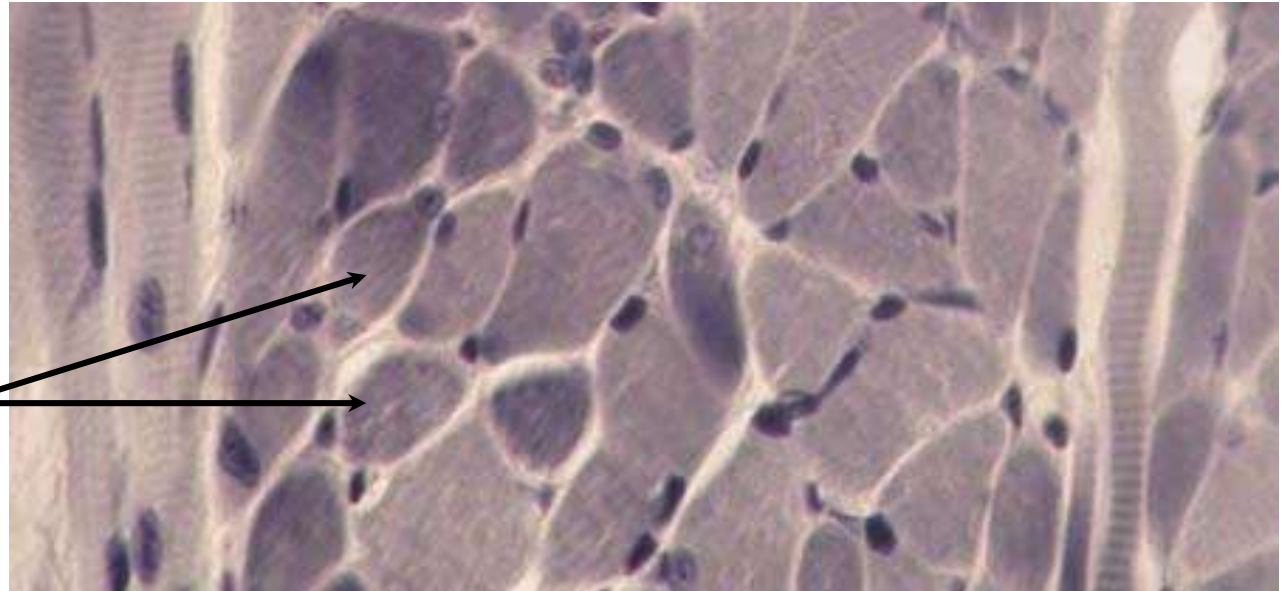


**BY MODE OF
CONTRACTION**

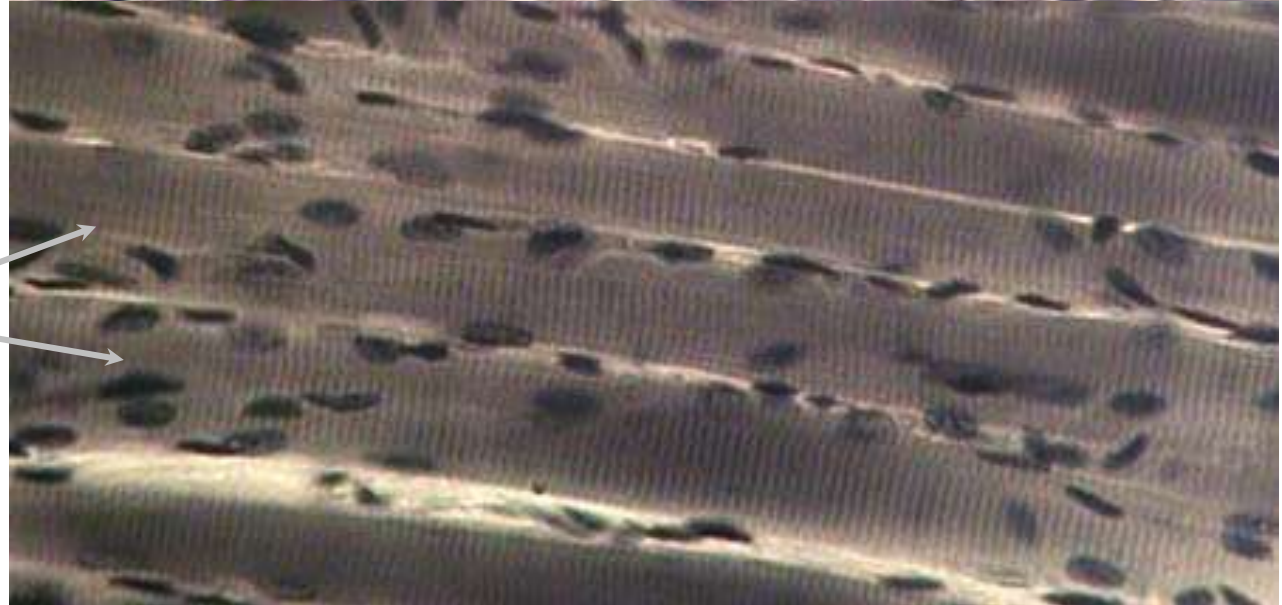
STRIATED SKELETAL MUSCLE TISSUE

Stained with H&E

Muscle fibers



Muscle fibers

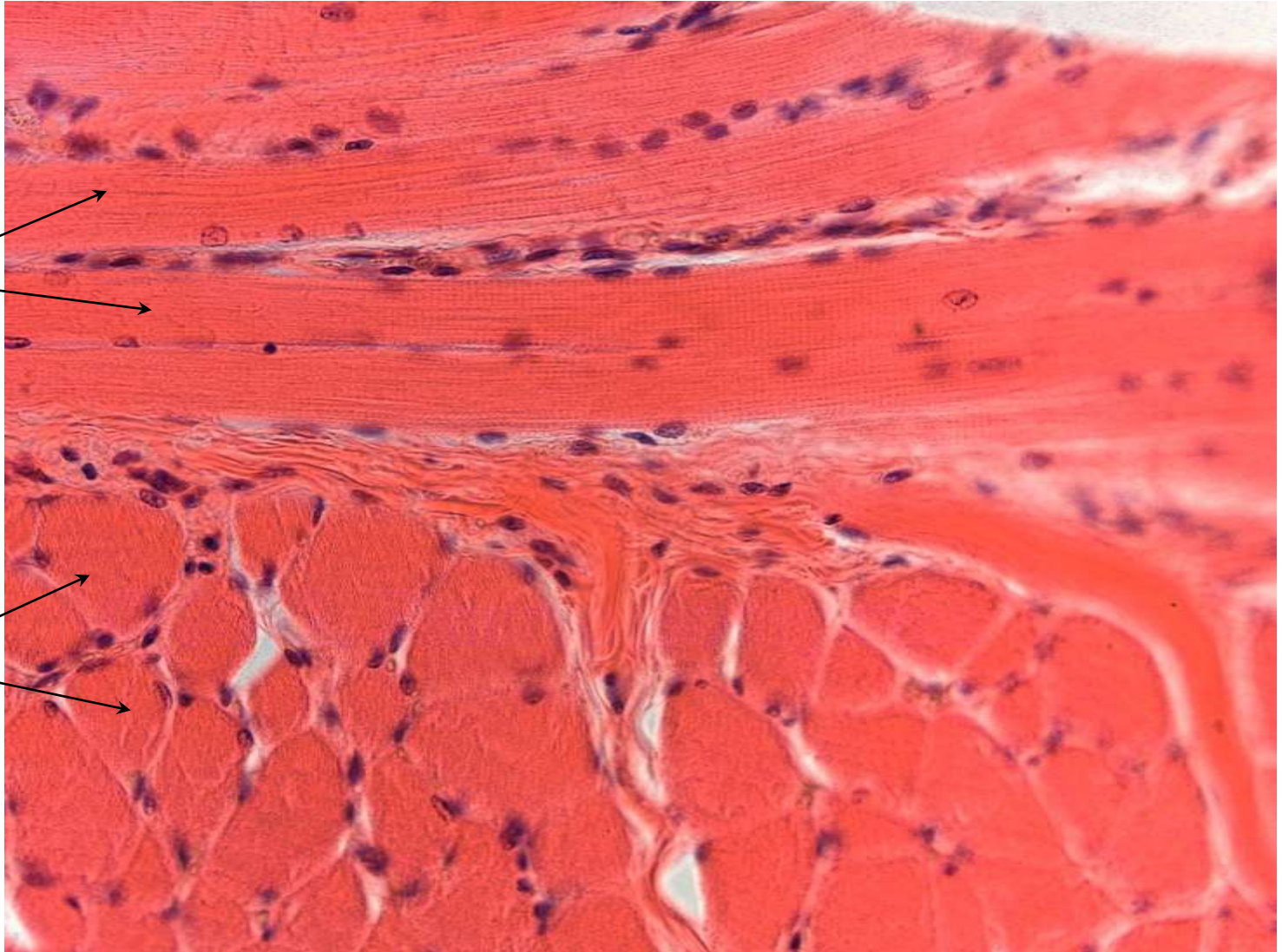


STRIATED SKELETAL MUSCLE TISSUE

Stained with H&E

Muscle fibers

Muscle fibers



EMBRYONIC DEVELOPMENT OF SKELETAL MUSCLE

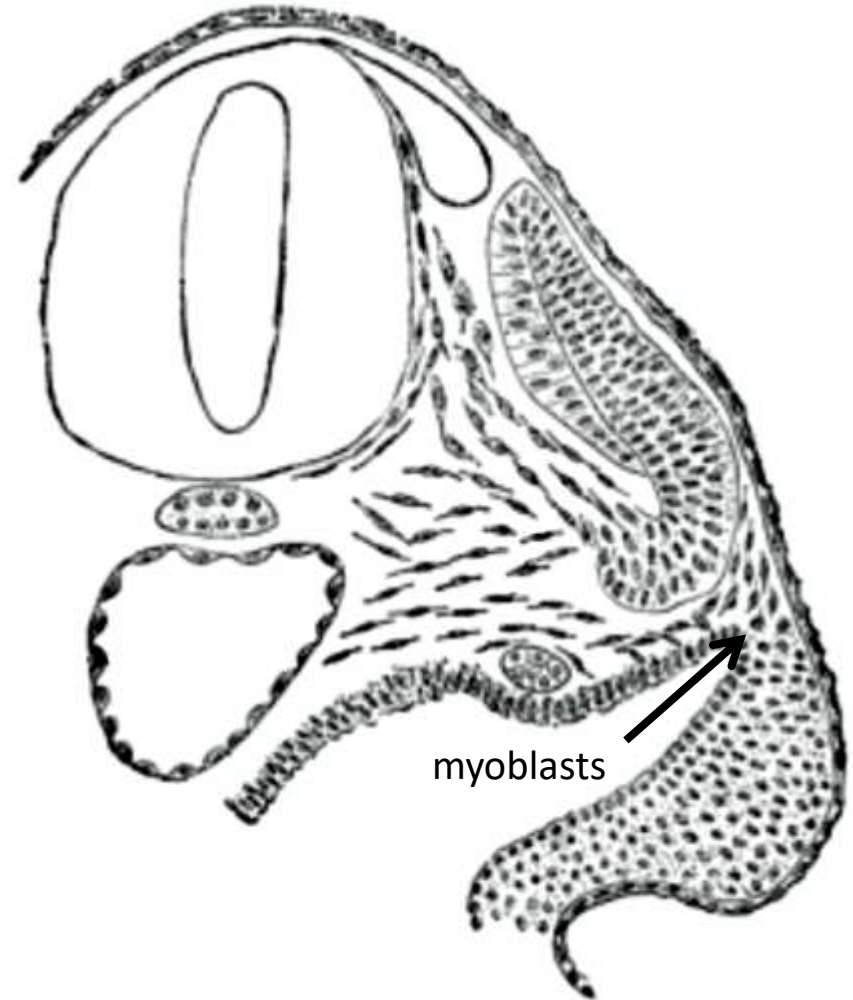
STAGES

1. Myoblasts originate from myotomes, undergo cell divisions and enlarge

2. Several hundreds myoblasts line up and fuse together to form a myotube (syncytium)

3. Myotubes mature to form skeletal muscle fibers

Addition of loose CT,
capillaries and nerves



EMBRYONIC DEVELOPMENT of striated skeletal muscle tissue

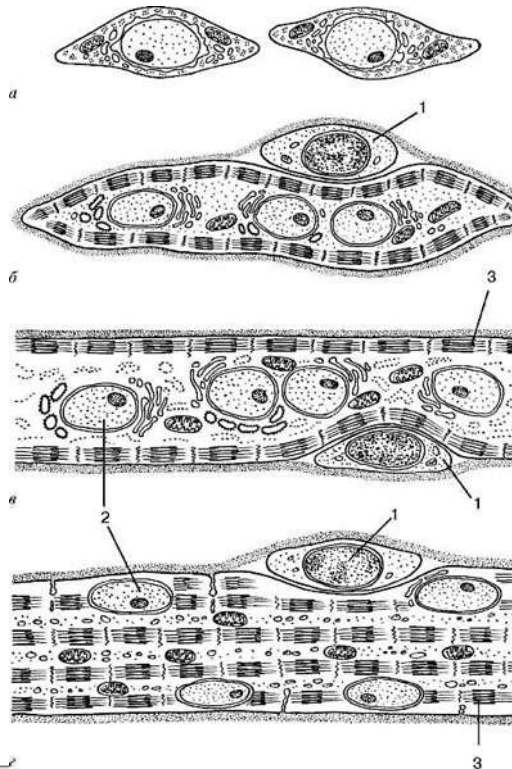
STAGES

1. Myoblasts

2. Myotubes

3. Muscle fibers

+ loose CT + capillaries+
nerves



CELL PROCESSES

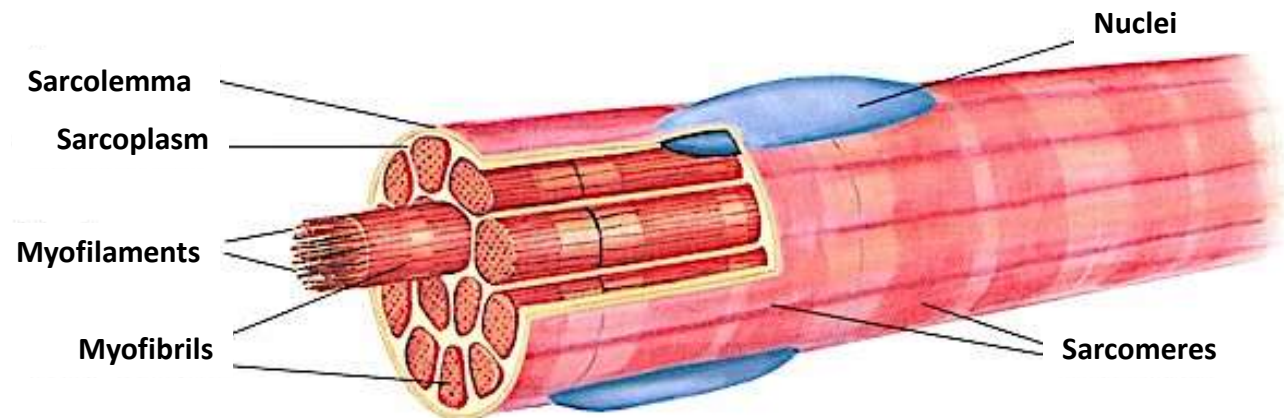
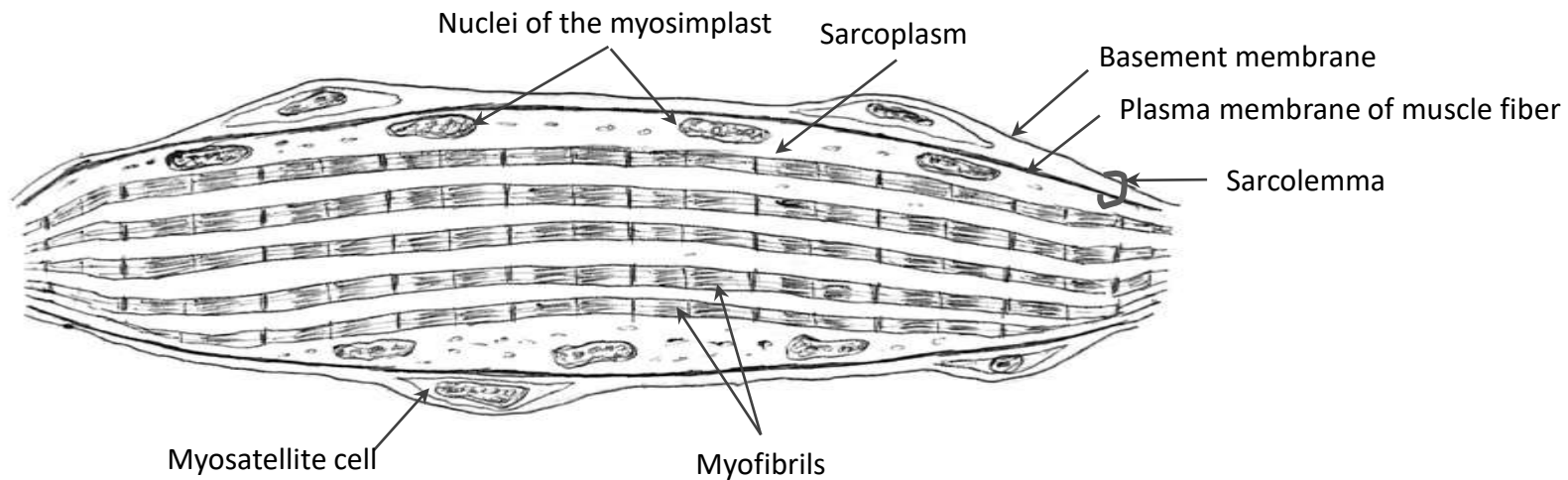
Proliferation

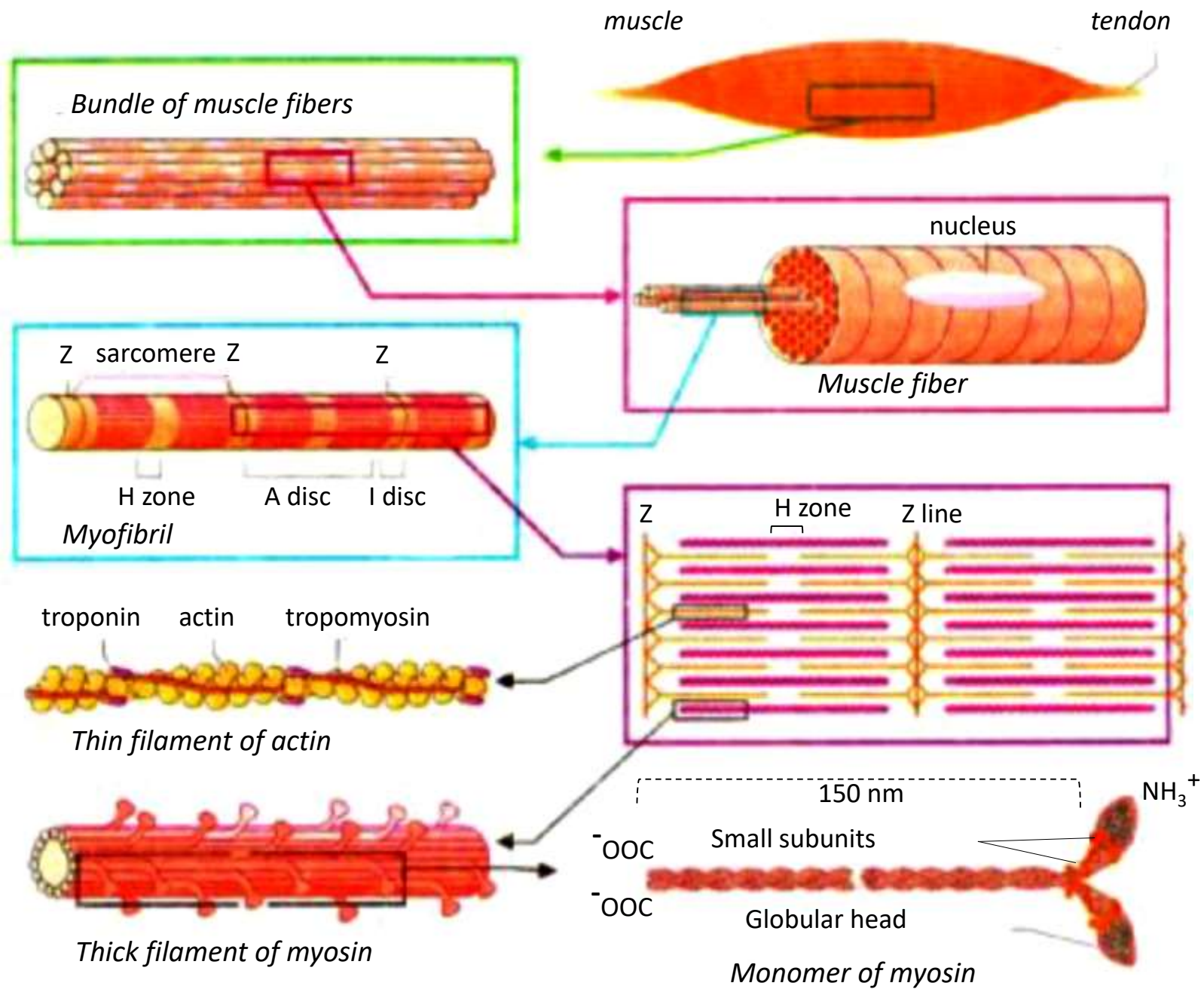
Proliferation and
differentiation

Differentiation

Growth

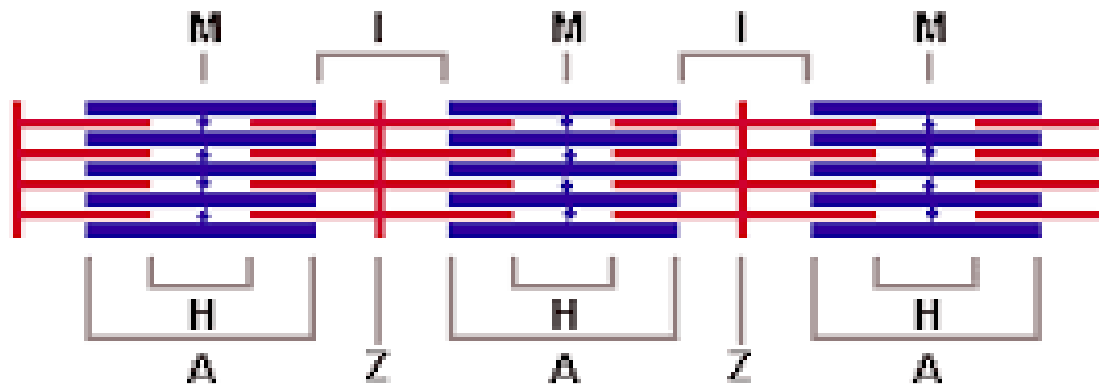
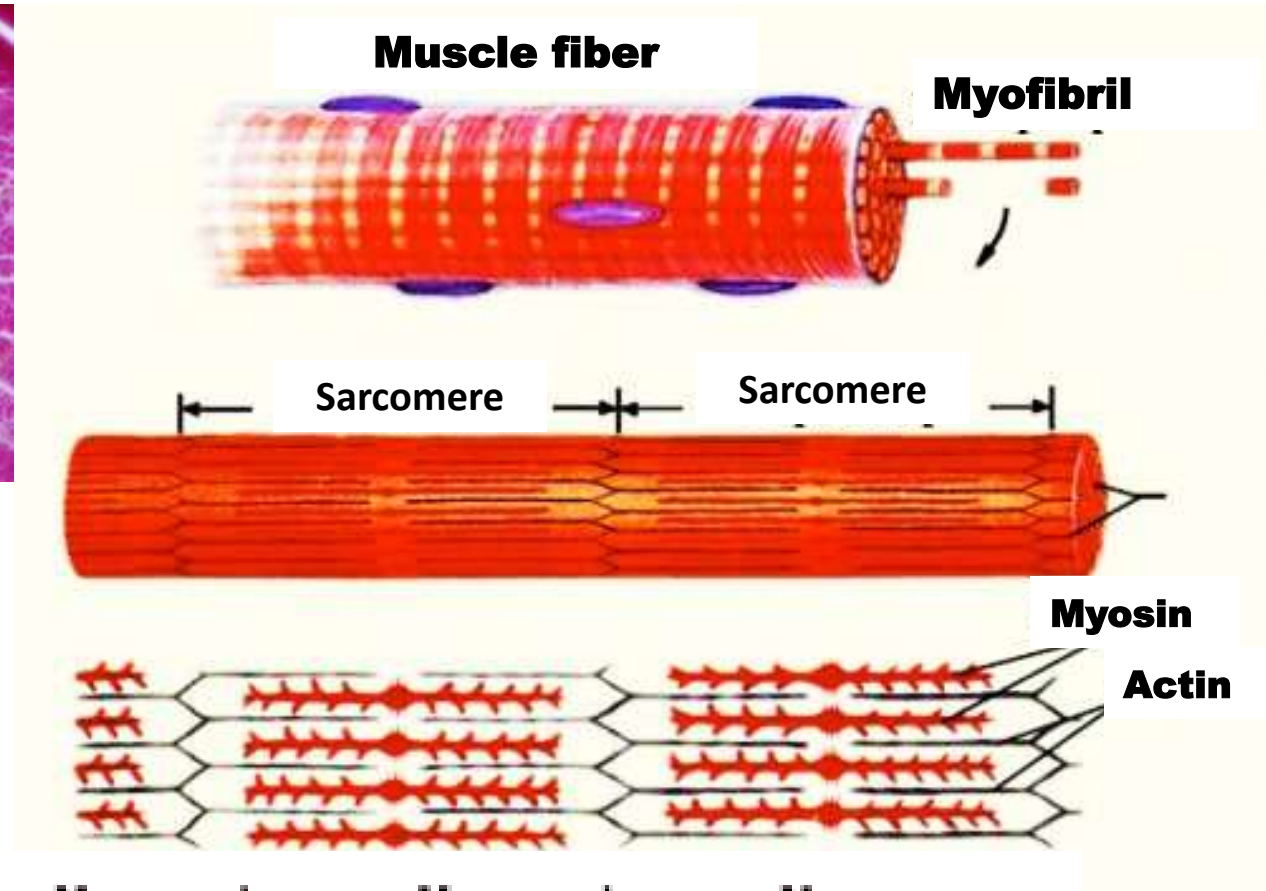
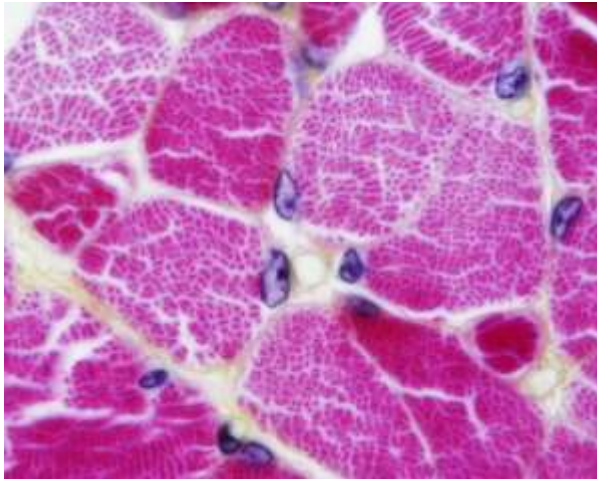
MUSCLE FIBER is structural and functional unit of skeletal muscle



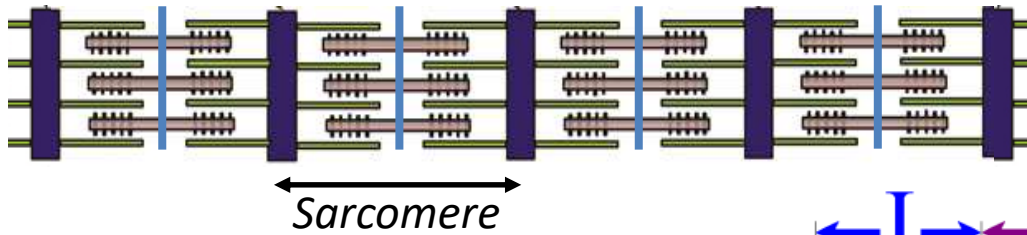


CONTRACTILE APPARATUS OF MUSCLE FIBER

MYOFIBRIL



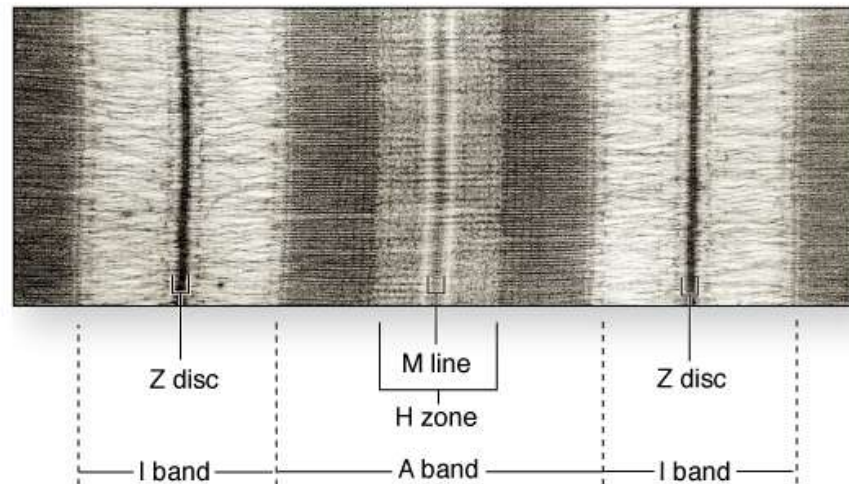
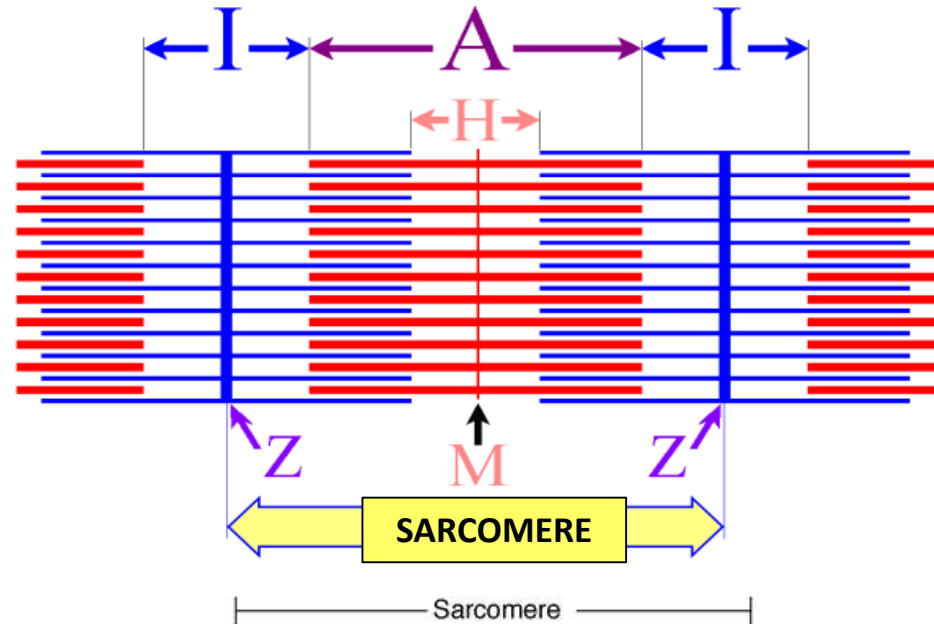
MYOFIBRIL



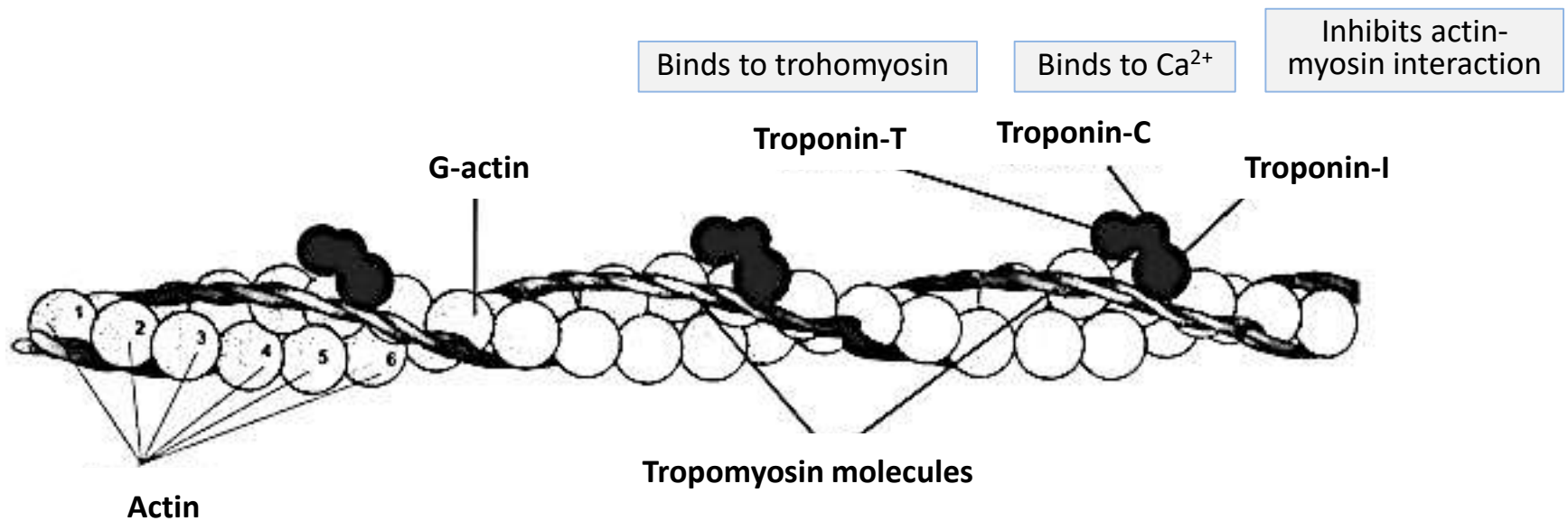
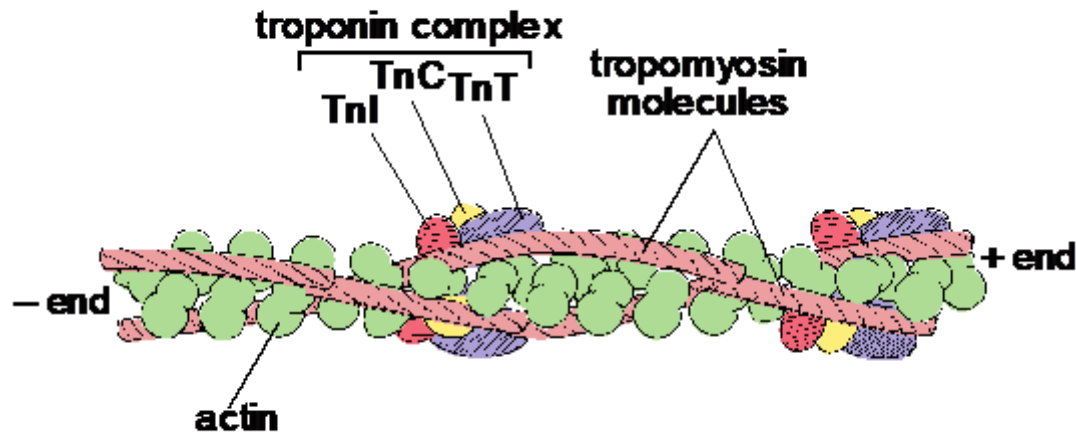
MYOFIBRIL STRUCTURE SARCOMERE STRUCTURE

Z line = telophragm

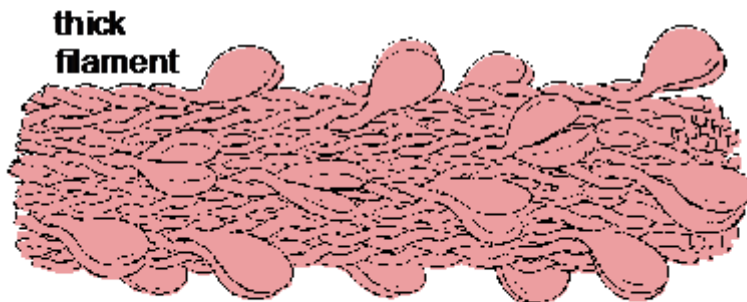
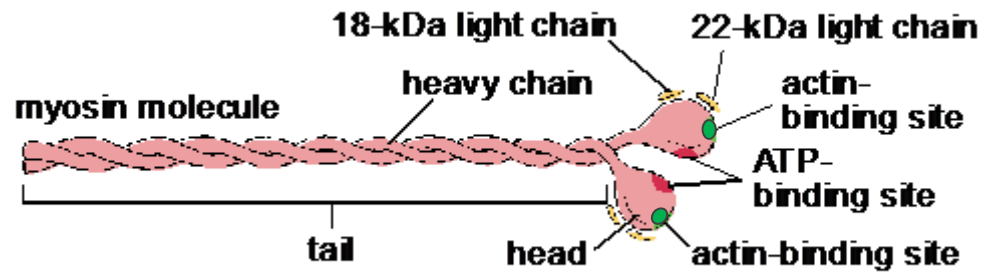
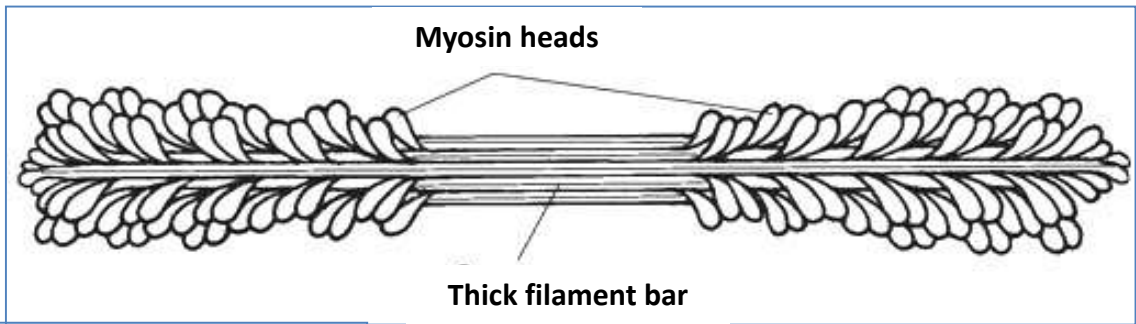
M line = mesophragm



MYOFILAMENTS STRUCTURE

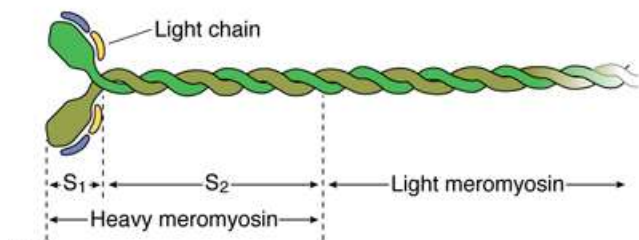


MYOFILAMENTS STRUCTURE

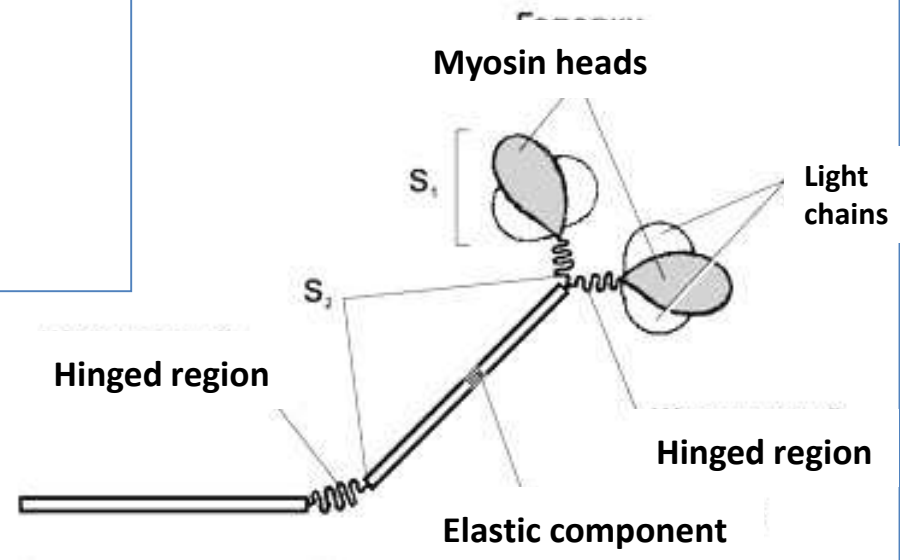


Myosin II

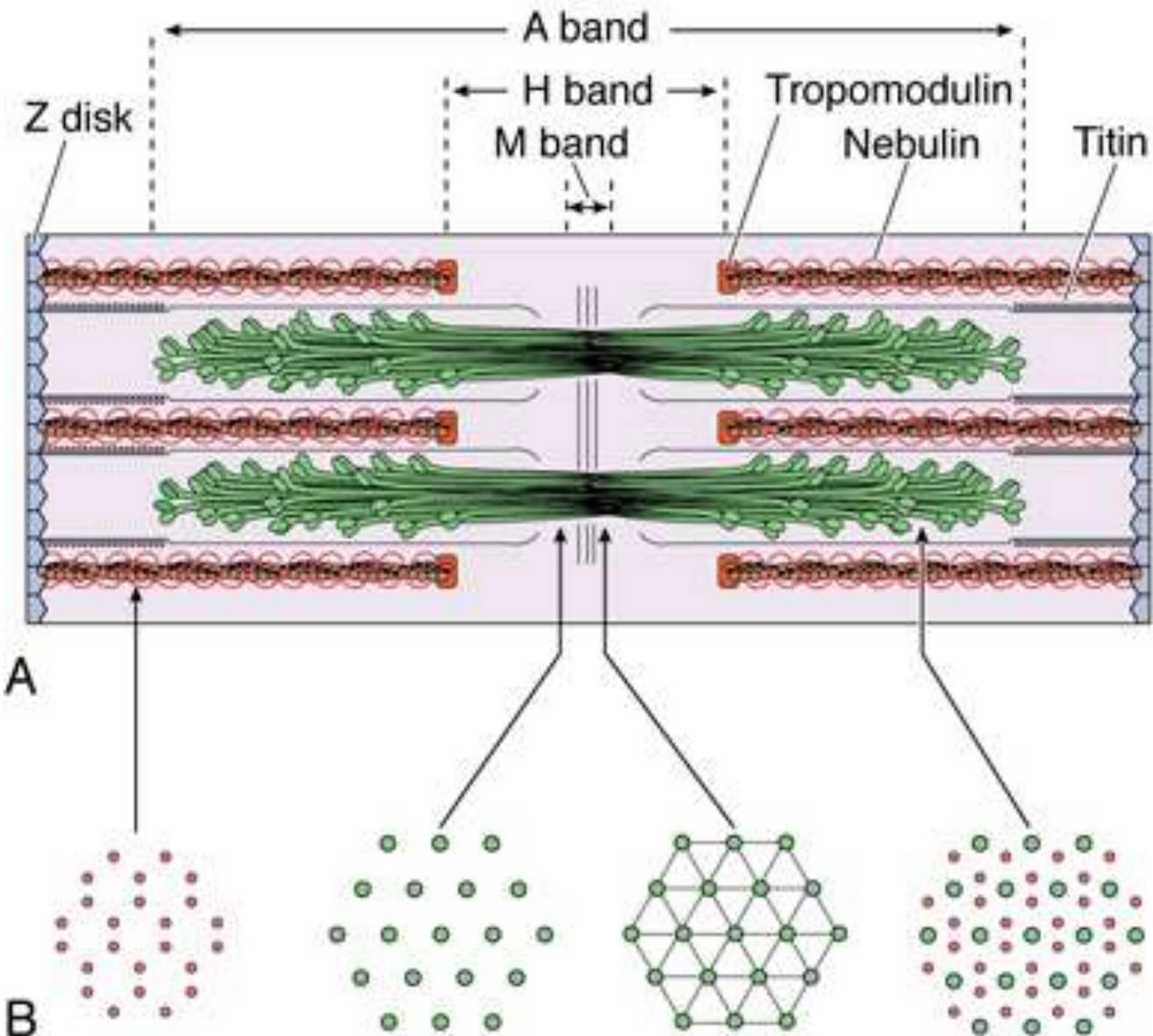
Myosin II molecule



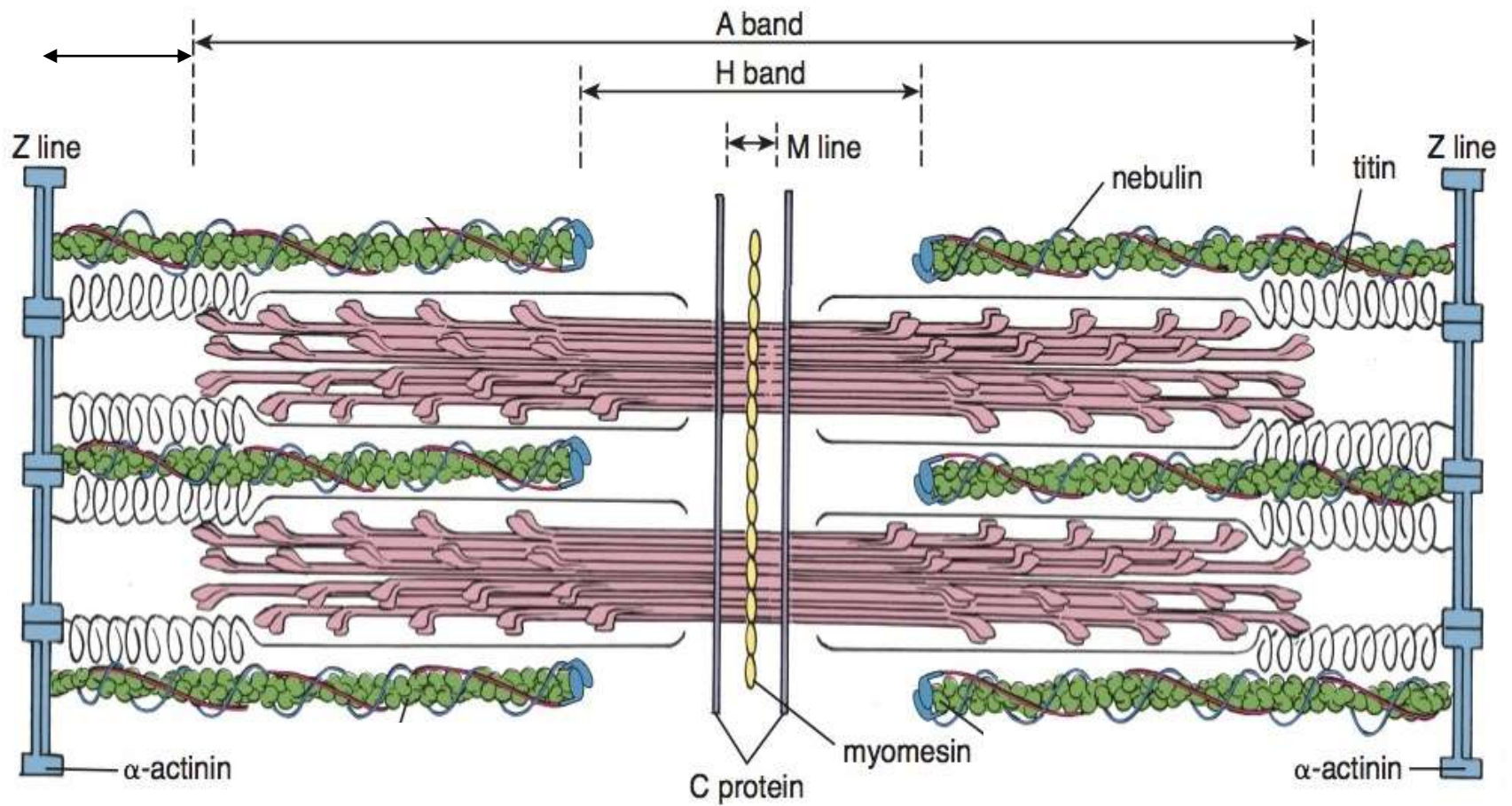
D



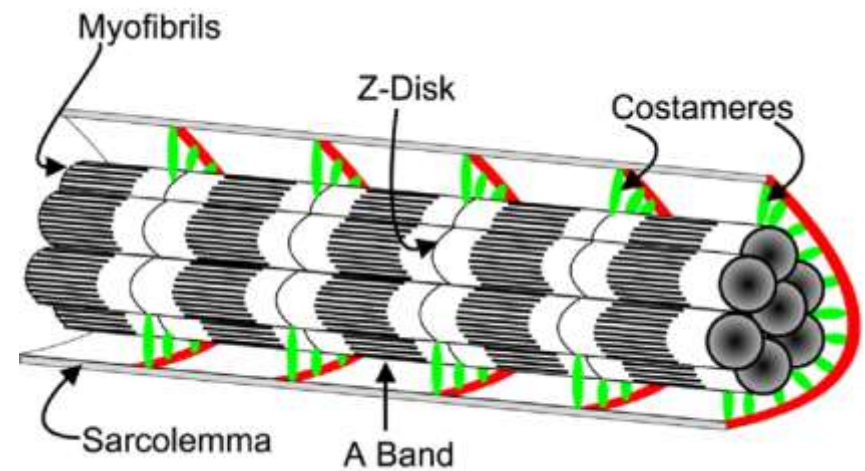
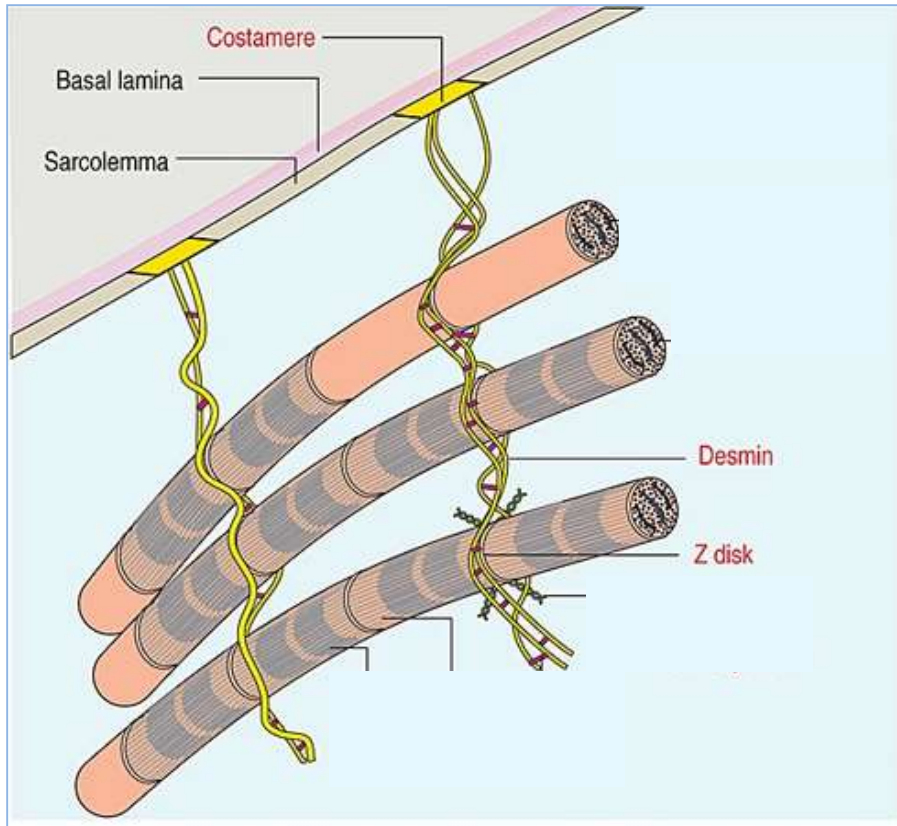
Sarcomere



MYOFIBRIL STRUCTURE

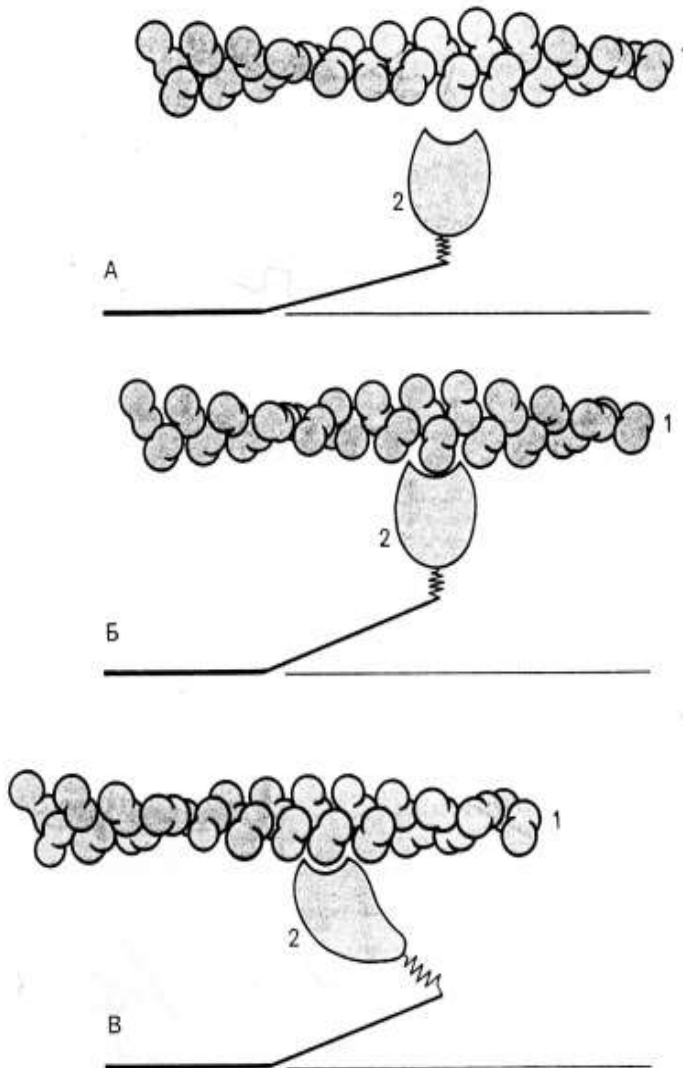


SIMPLAST CYTOSKELETON



CONTRACTILE MECHANISM *according to* **SLIDING FILAMENT MODEL (HUXLEY, 1954)**

shortening of the sarcomere is caused by an increase in the overlap of the thick and thin filaments



Mechanism of contraction is cyclic process:

In the resting muscle actin and myosin don't interact. The heads of myosin molecule are free from ATP; binding sites of actin mask by tropomyosin.

Ca^{2+} ions bind to TnC, changing the configuration of Tn Subunits and driving tropomyosin molecule deeper into the cleft between F-actin chains. This exposes the myosin binding site on G-actin.

ATP binds to the myosin.

Myosin head forms the cross-bridge with G-actin

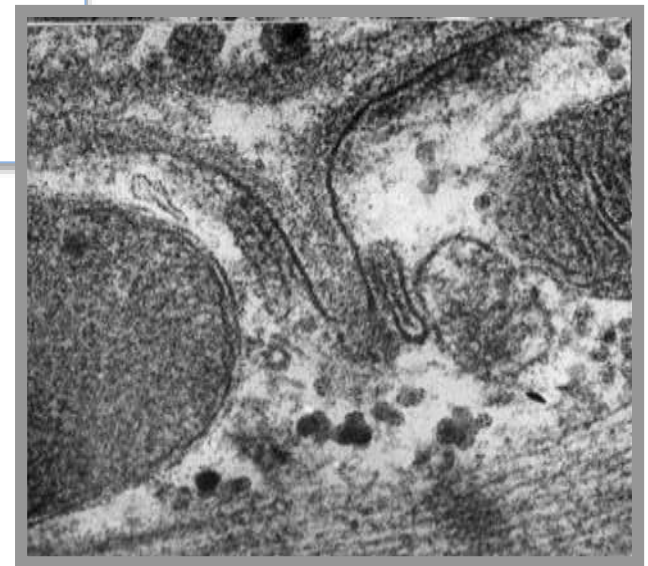
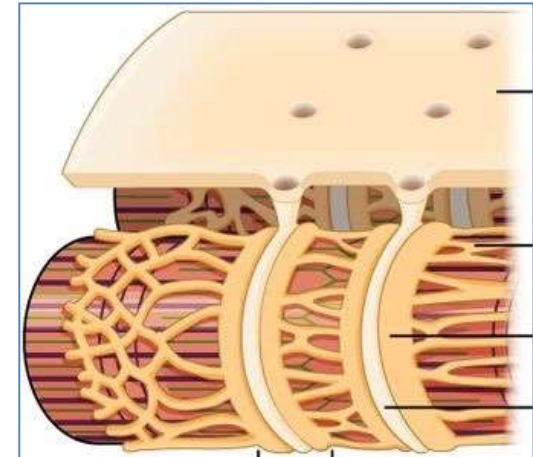
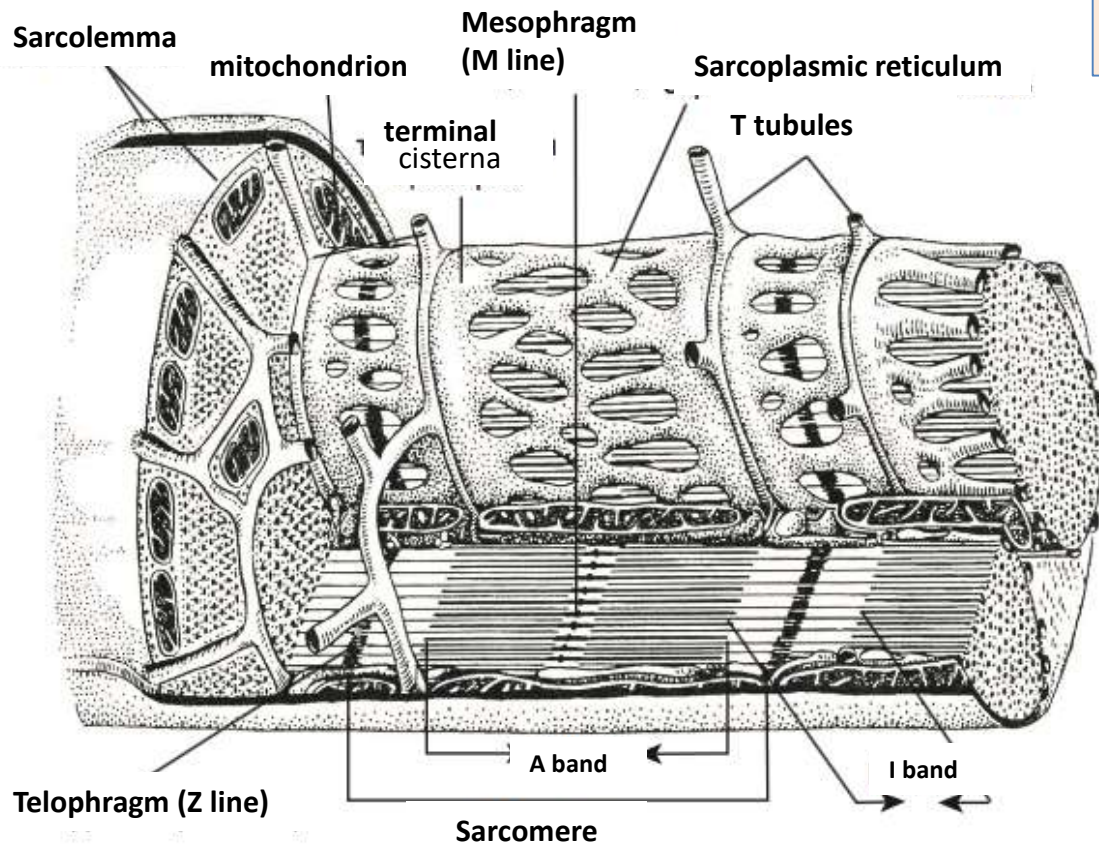
Hydrolysis of ATP. Energy is necessary to change angle between light and heavy meromyosins, it becomes shaper and bends toward H zone. Because myosin is bound to actin, actin filament is driven in the same direction (10 nM)

ADP and phosphate are lost from myosin head.

It causes the releasing myosin head from actin, myosin head resumes its original conformation.

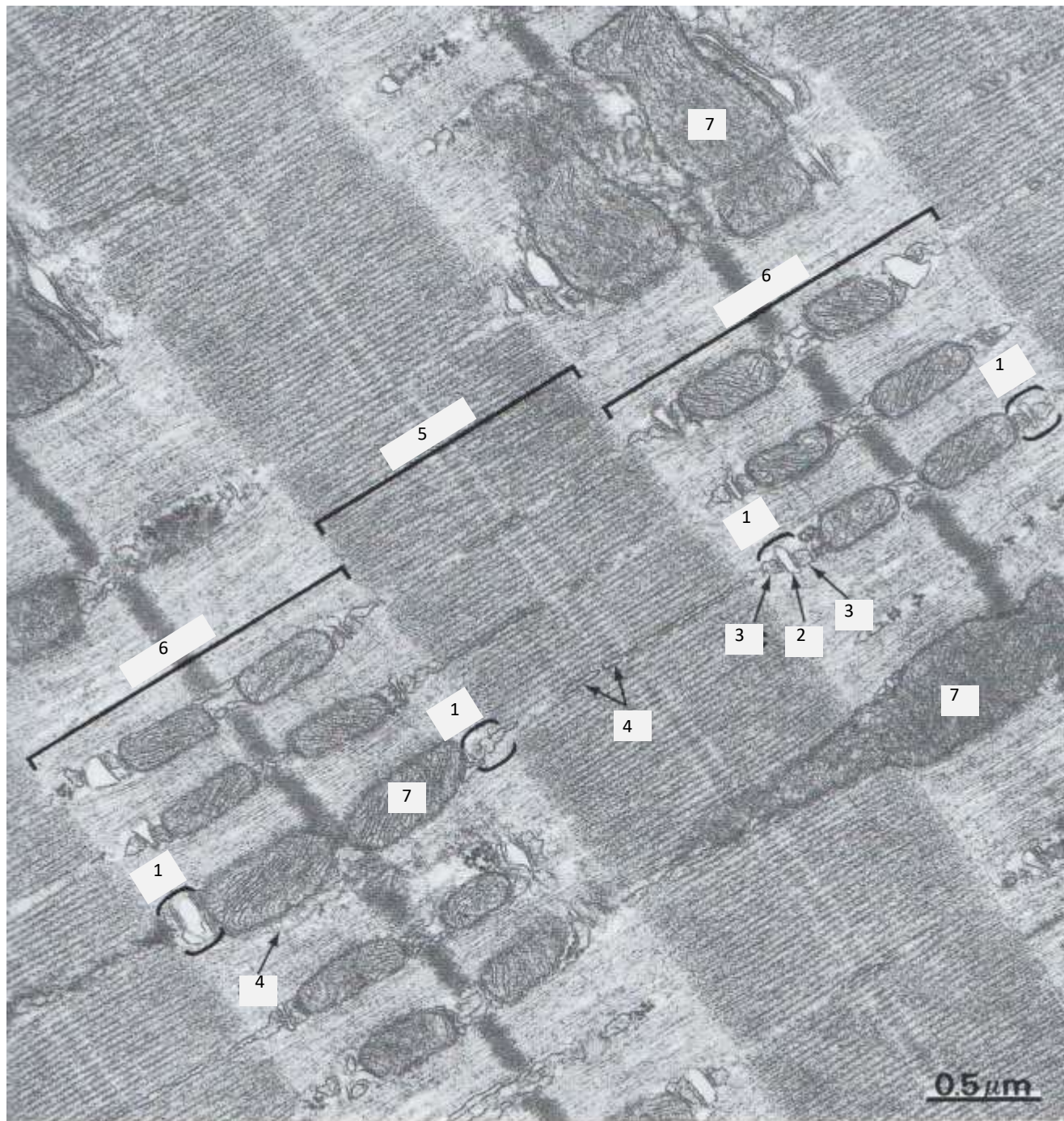
It's recoiled for the next stroke

REGULATION OF CONTRACTION: sarcoplasmic reticulum, T system

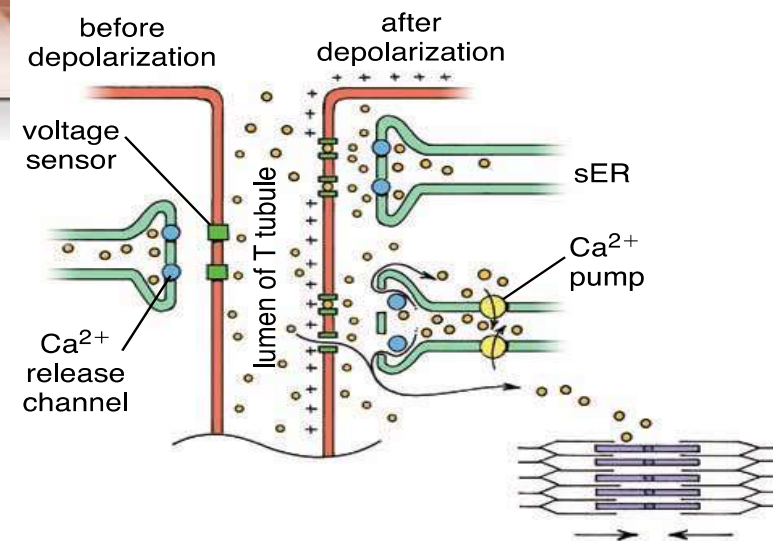
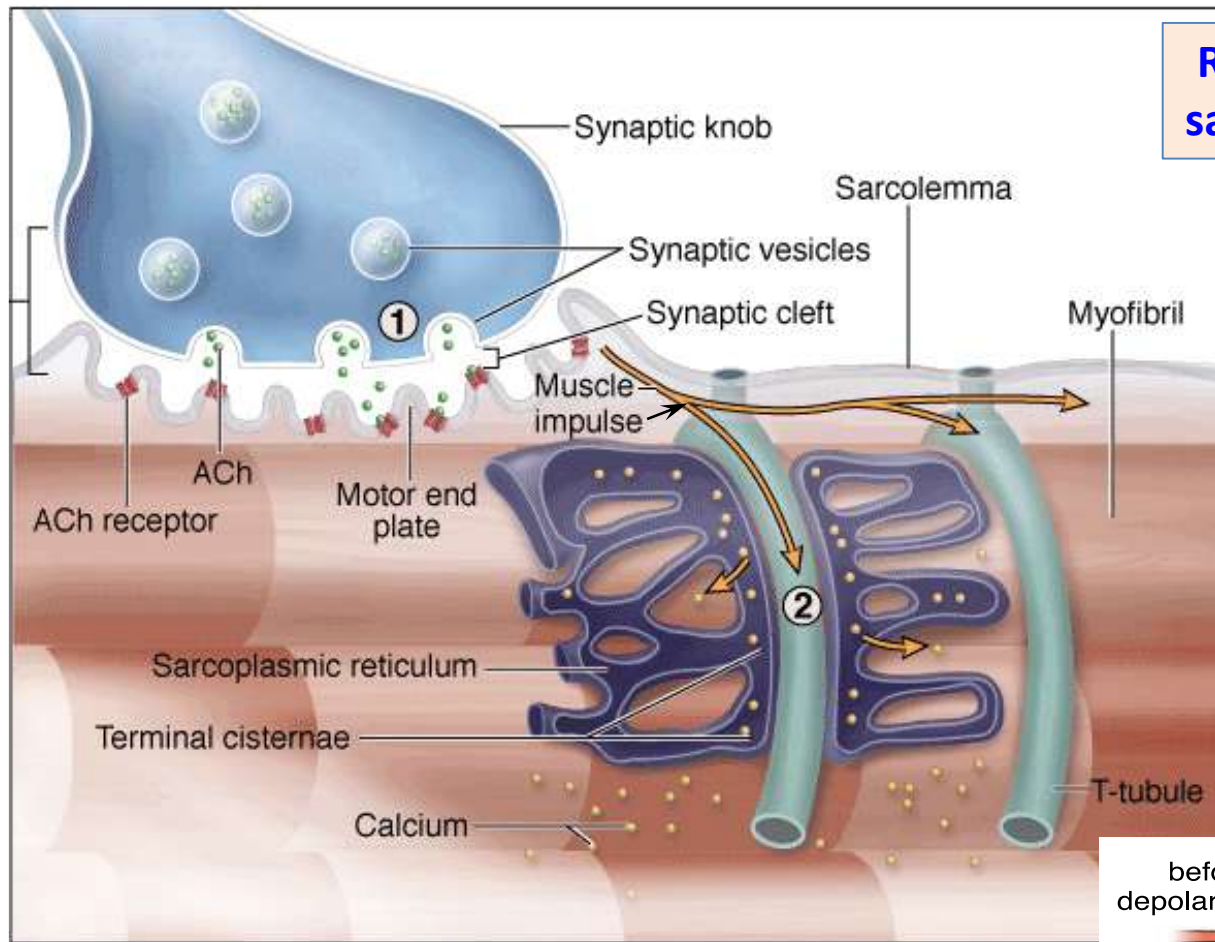


TRIAD:

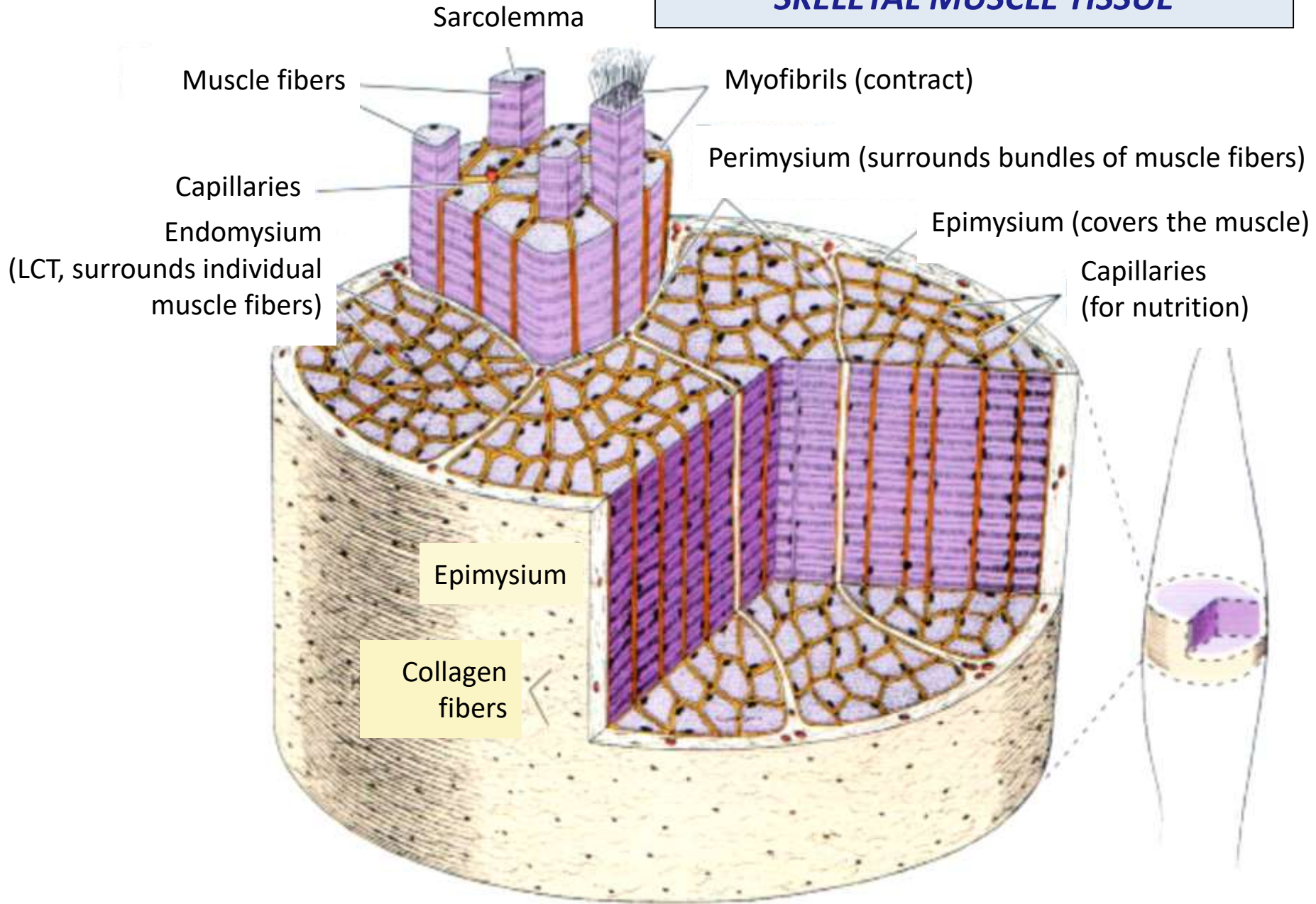
T-tubule and
2 terminal cisternae



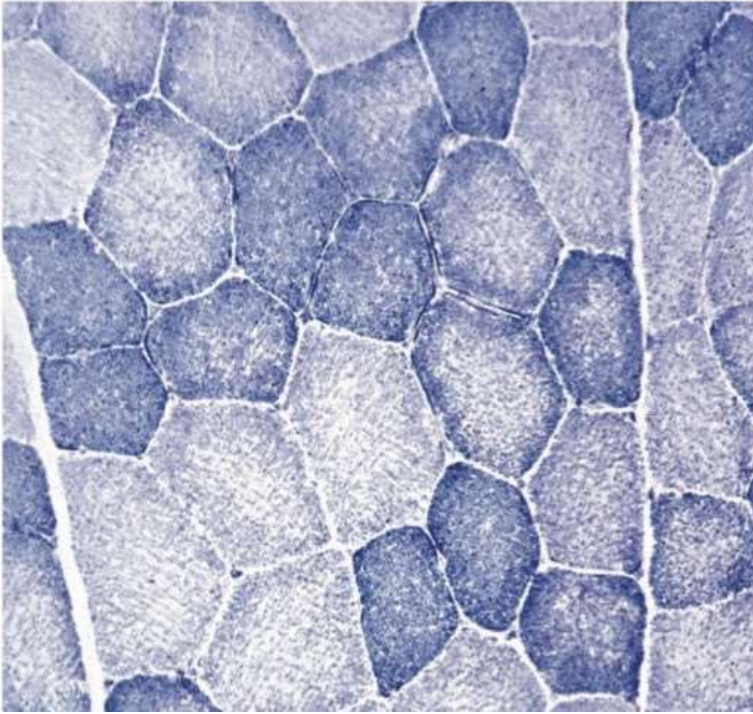
REGULATION OF CONTRACTION: sarcoplasmic reticulum, T system



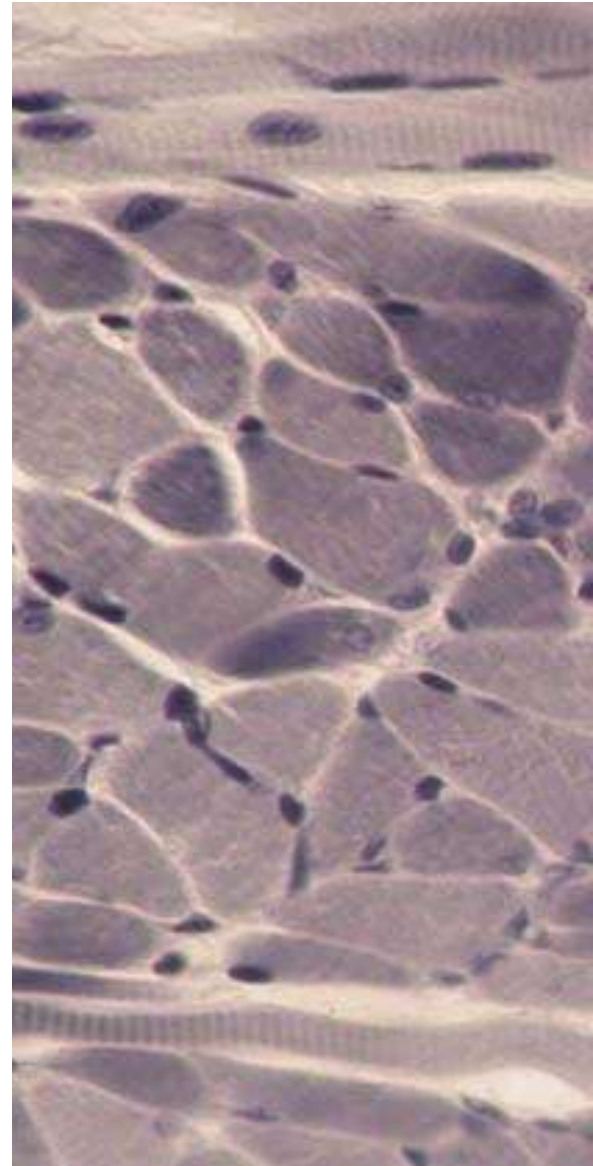
SKELETAL MUSCLE TISSUE



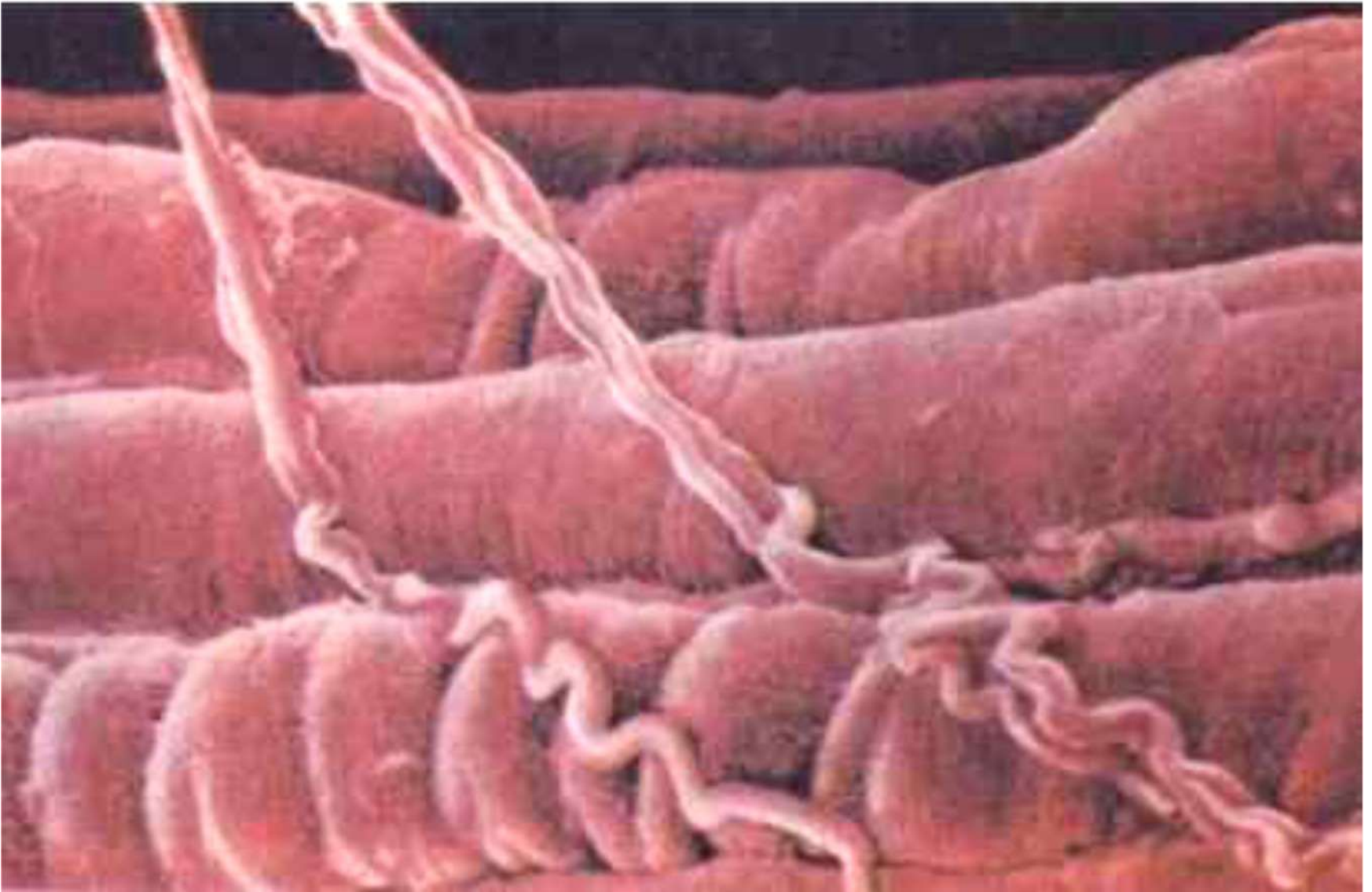
Types of muscle fibers



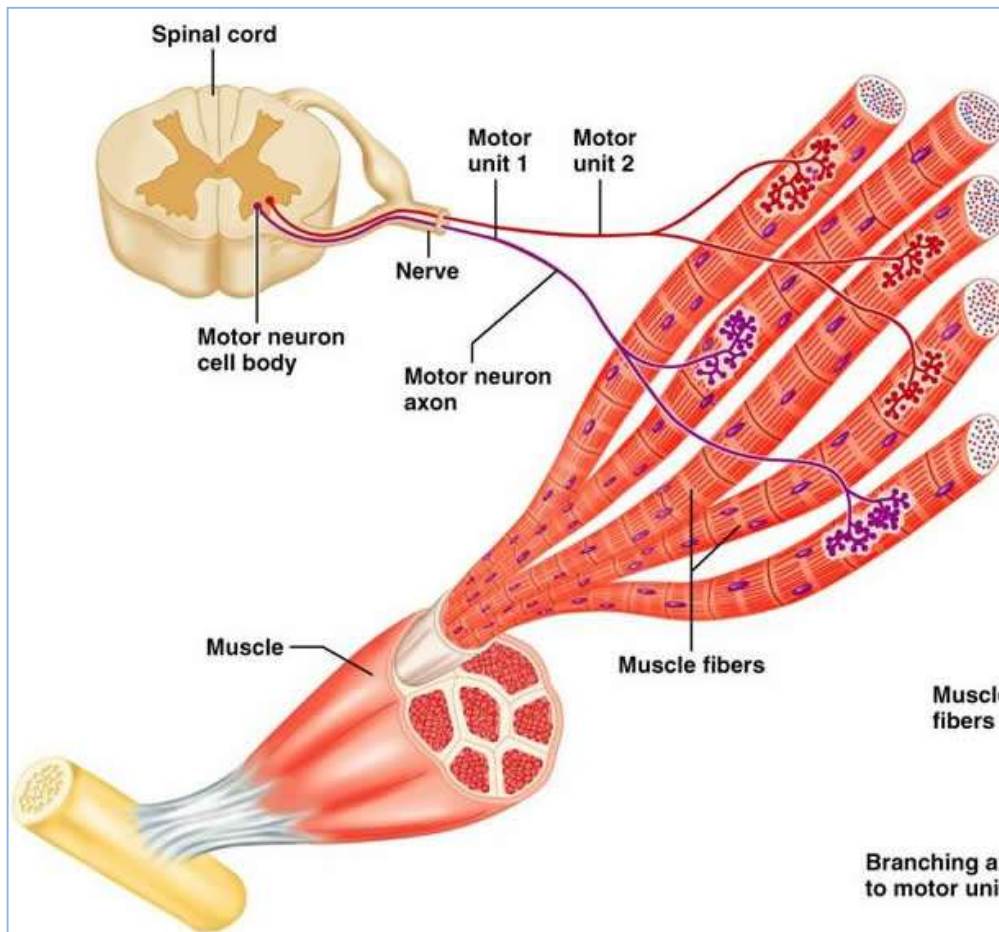
- Red
- White
- Intermediate



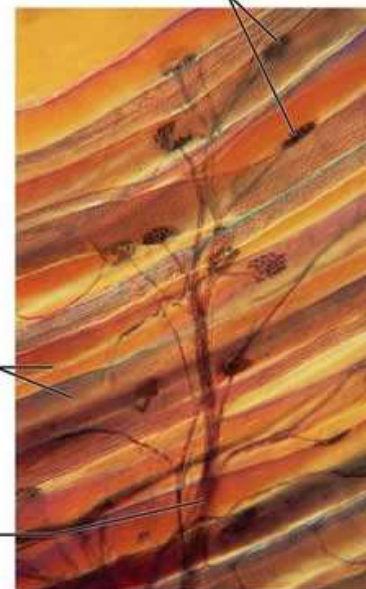
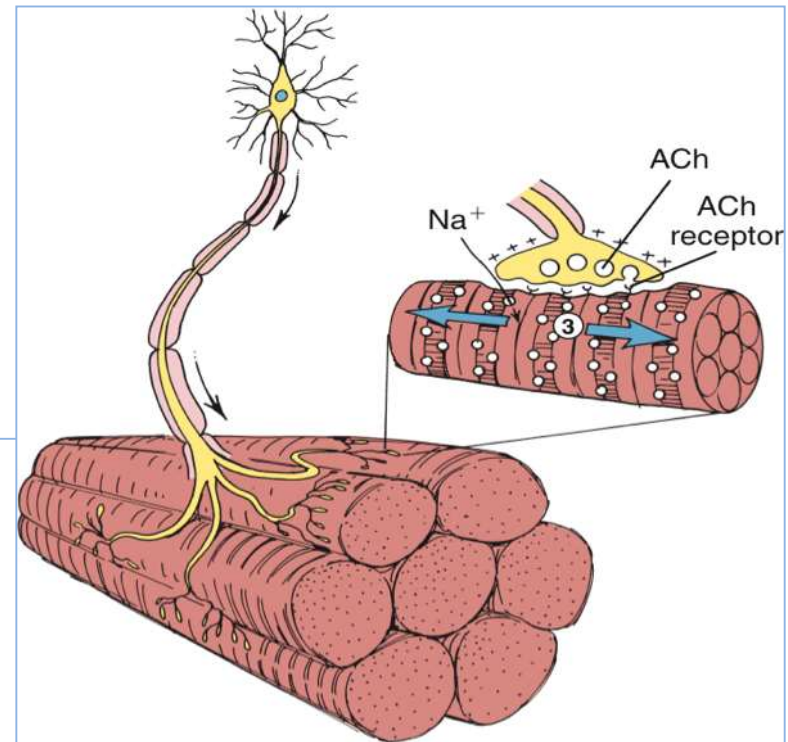
Innervation of Muscle fibers



MOTOR UNIT

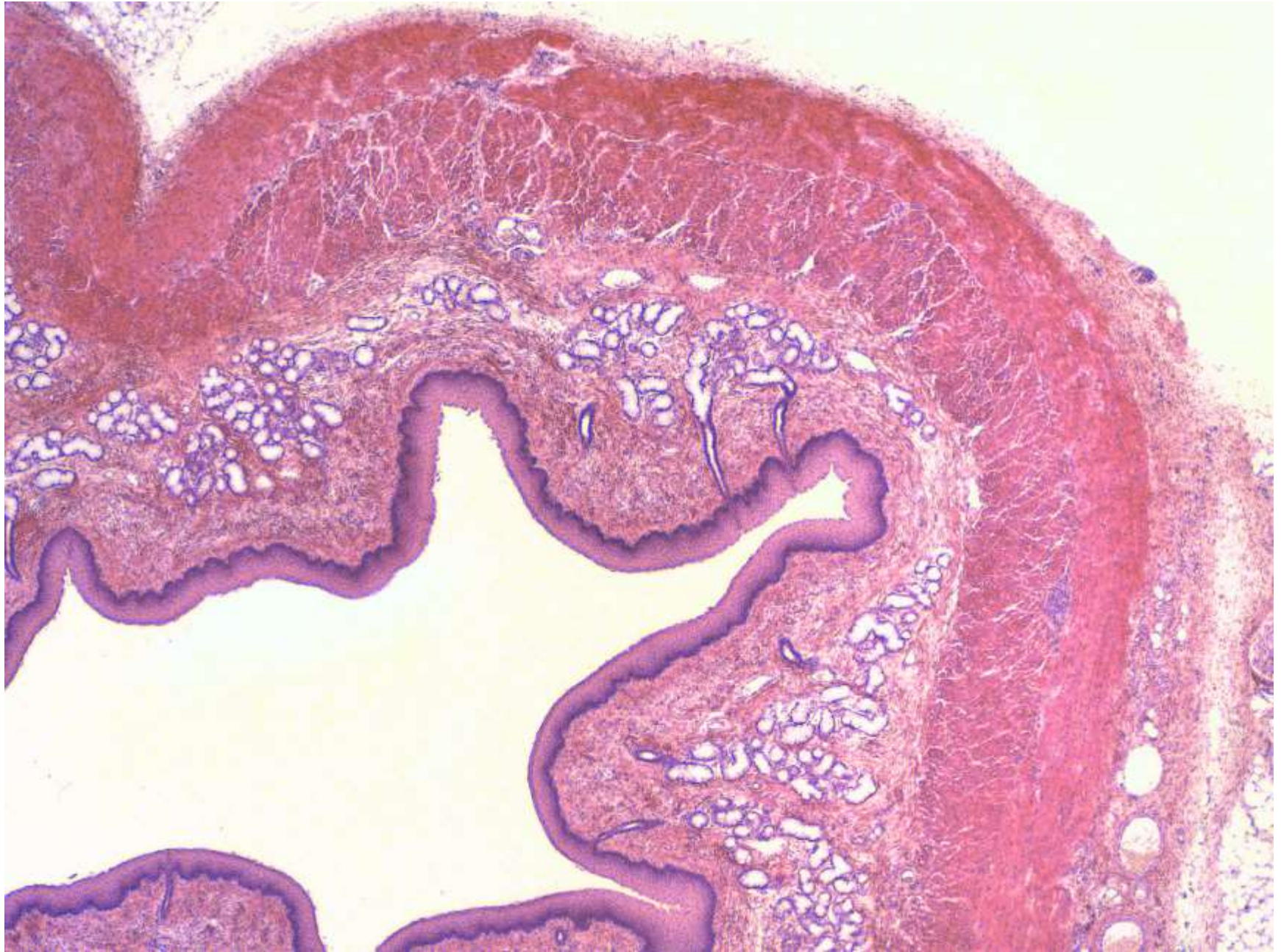


(a)



(b)

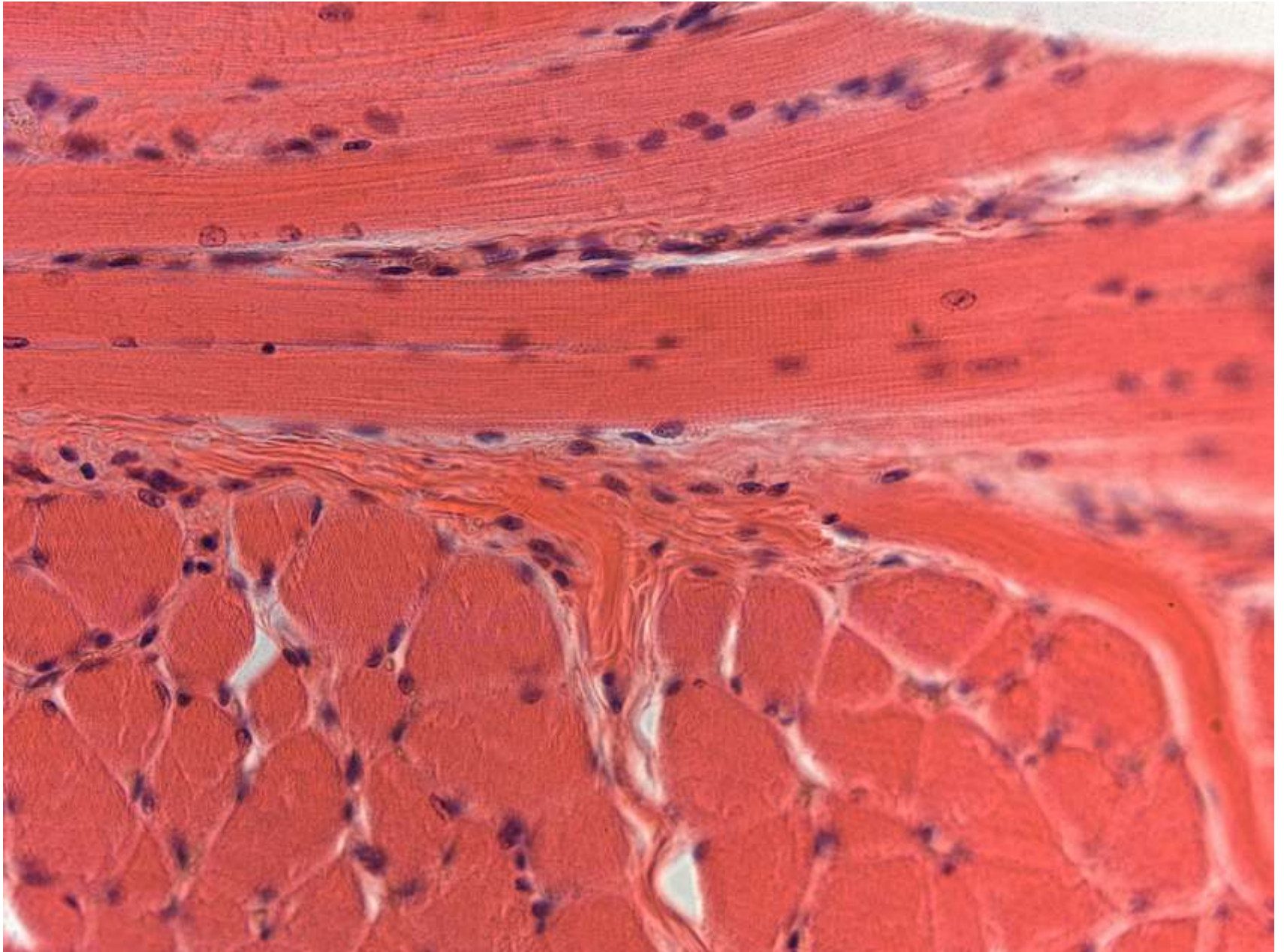
Slide №70 «Striated skeletal muscle tissue. Section of esophagus, H&E»



Slide №70 «Striated skeletal muscle tissue. Section of esophagus, H&E»



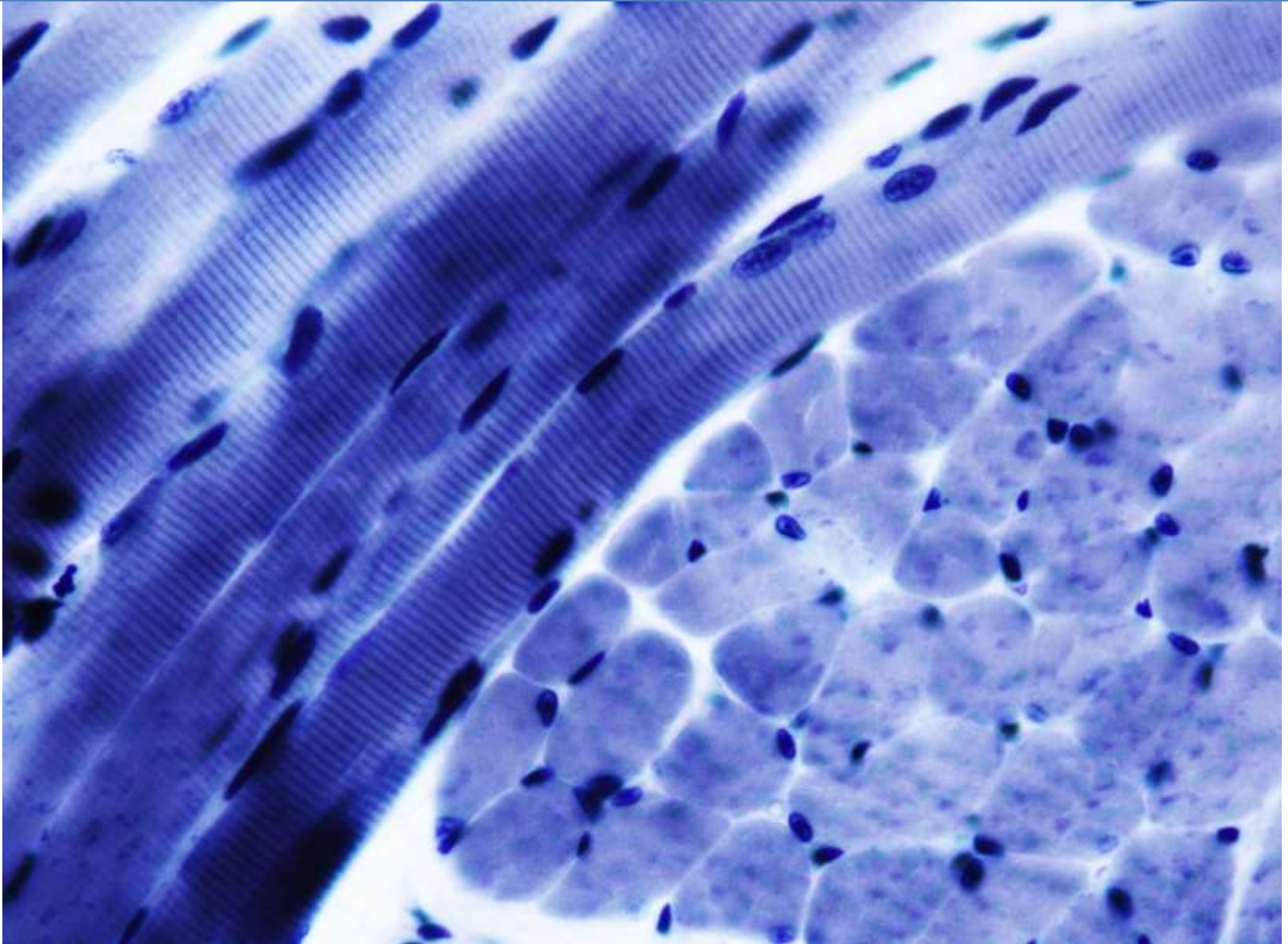
Slide №70 «Striated skeletal muscle tissue. Section of esophagus, H&E»



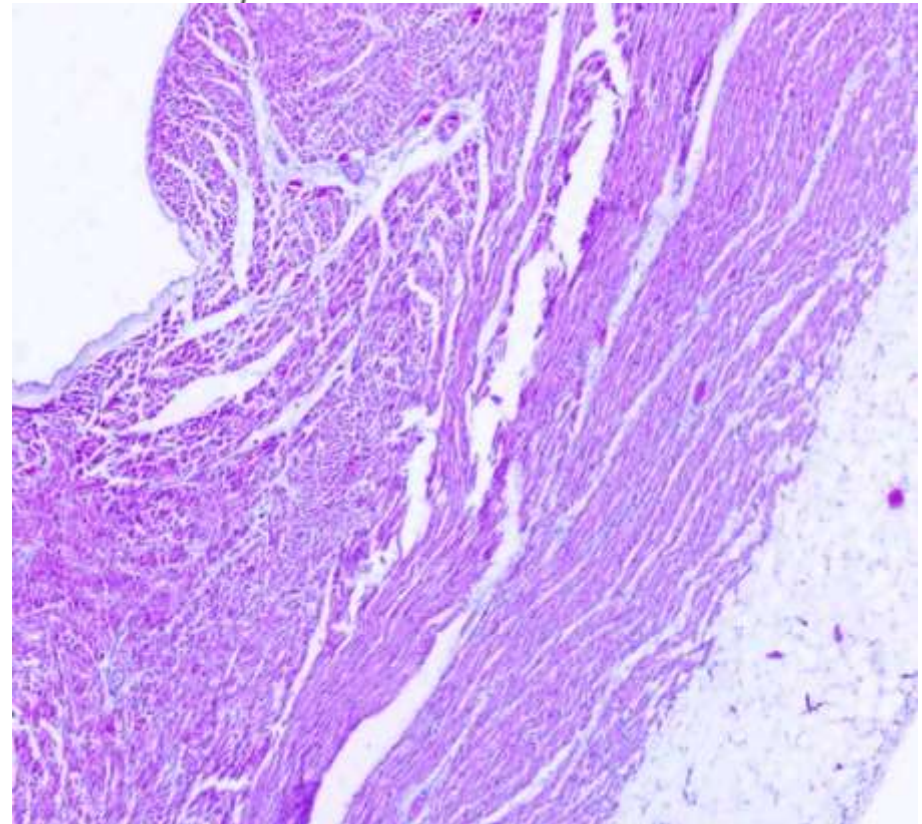
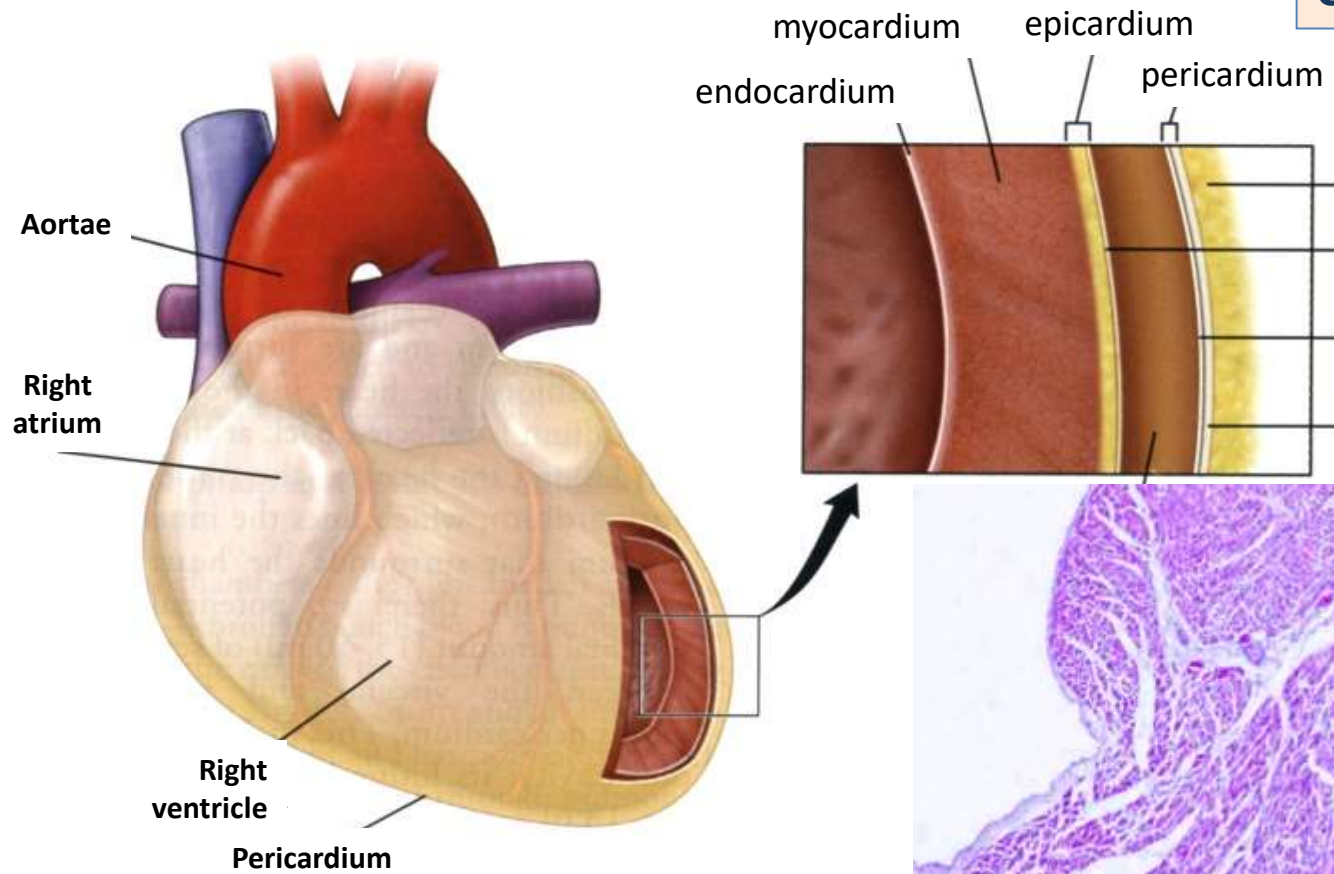
Slide №70a «Striated skeletal muscle tissue. Section of tongue» H&E



Slide №70a «Striated skeletal muscle tissue. Section of tongue» H&E



CARDIAC MUSCLE TISSUE



Structural unit –
cardiomyocyte

STRIATED CARDIAC MUSCLE TISSUE

Iron hematoxylin

Contractile cardiomyocytes

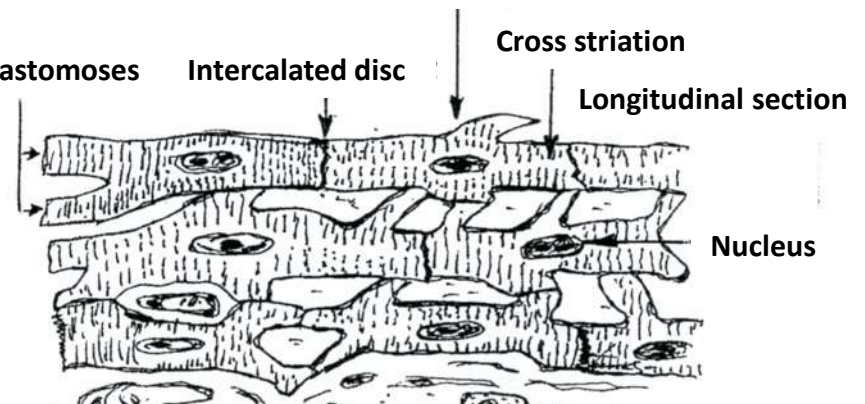
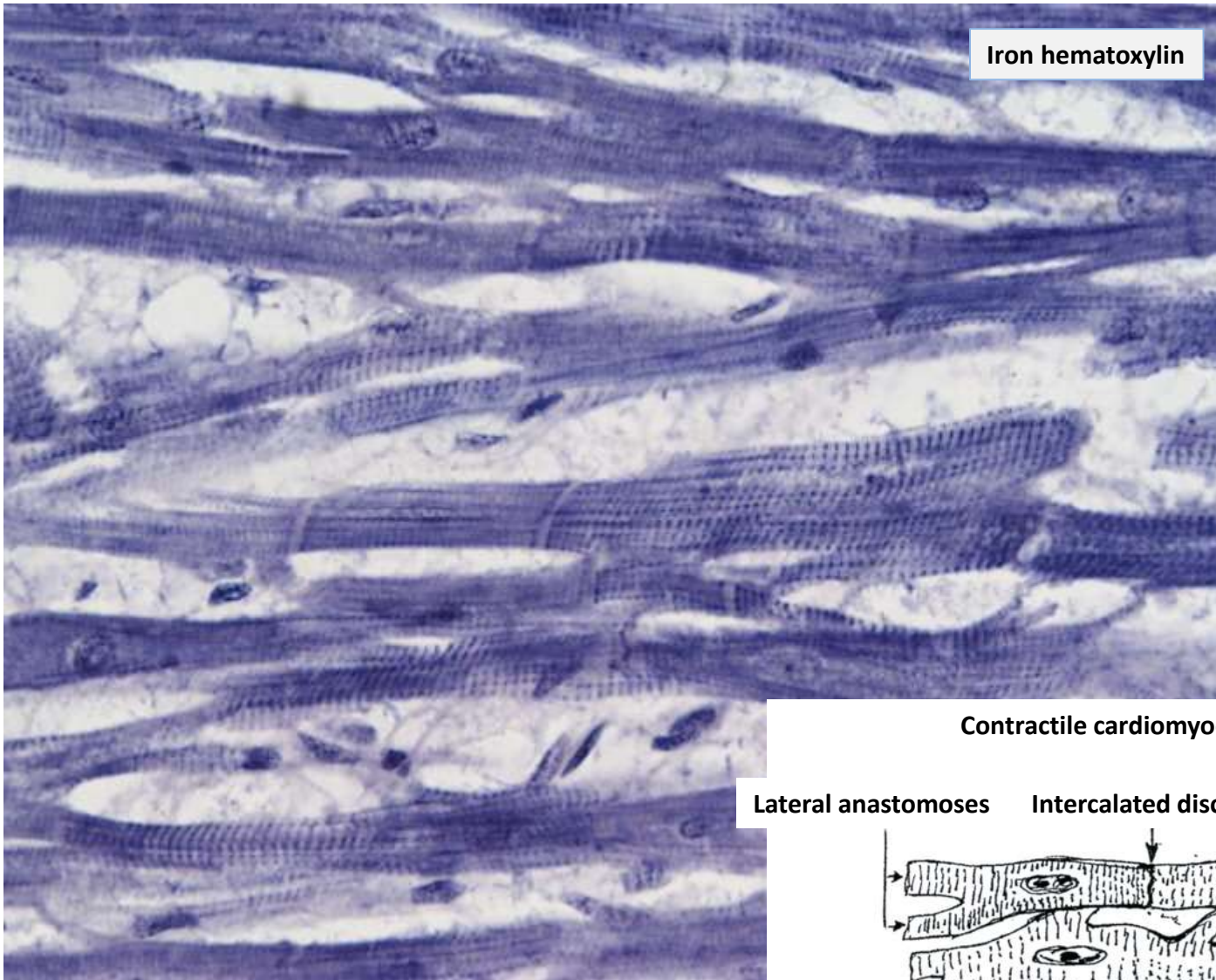
Lateral anastomoses

Intercalated disc

Cross striation

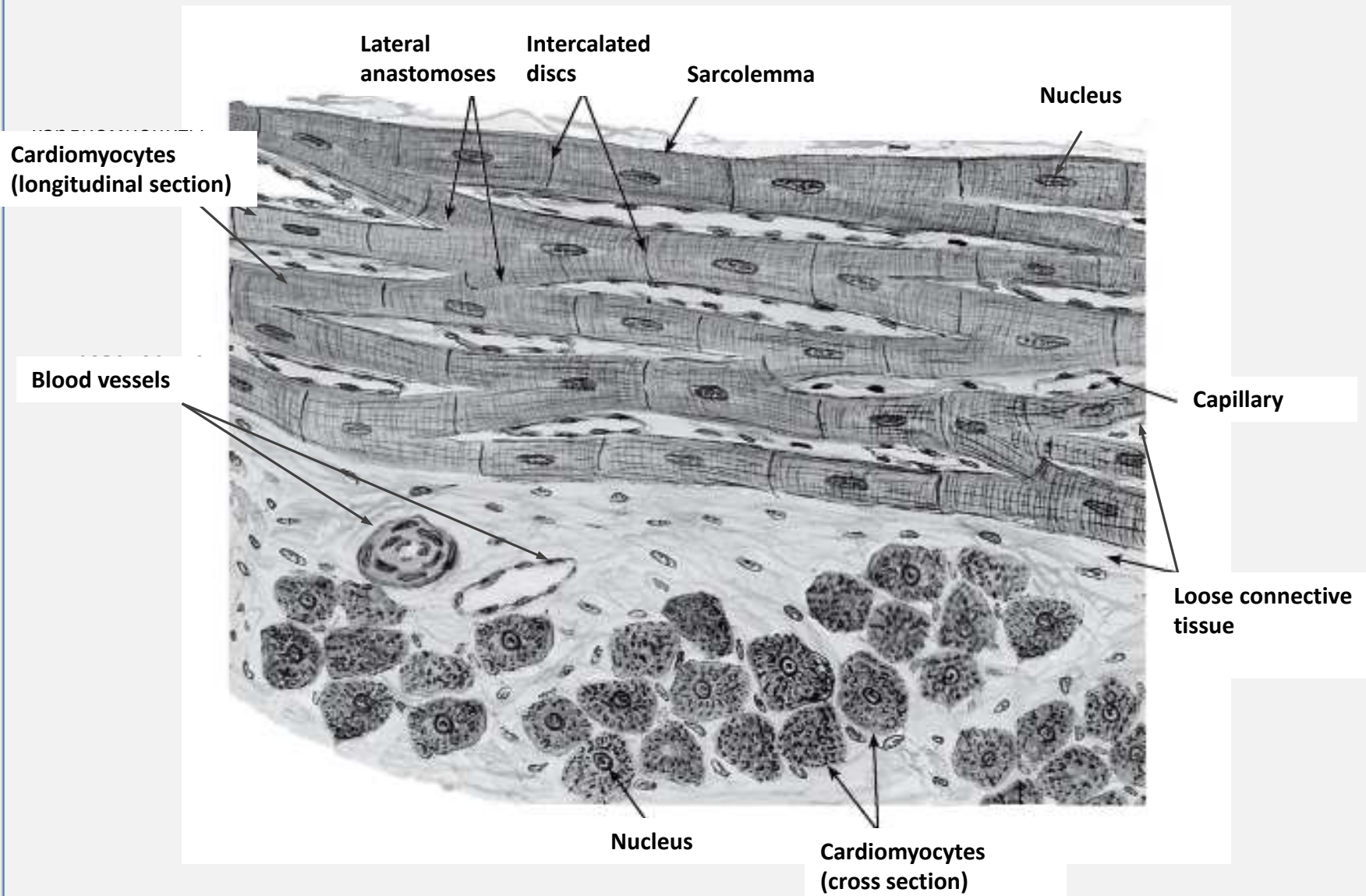
Longitudinal section

Nucleus



Structural and functional unit –
functional fiber

CARDIOMYOCYTES STRUCTURE (typical cardiomyocyte)





INTERCALATED DISC

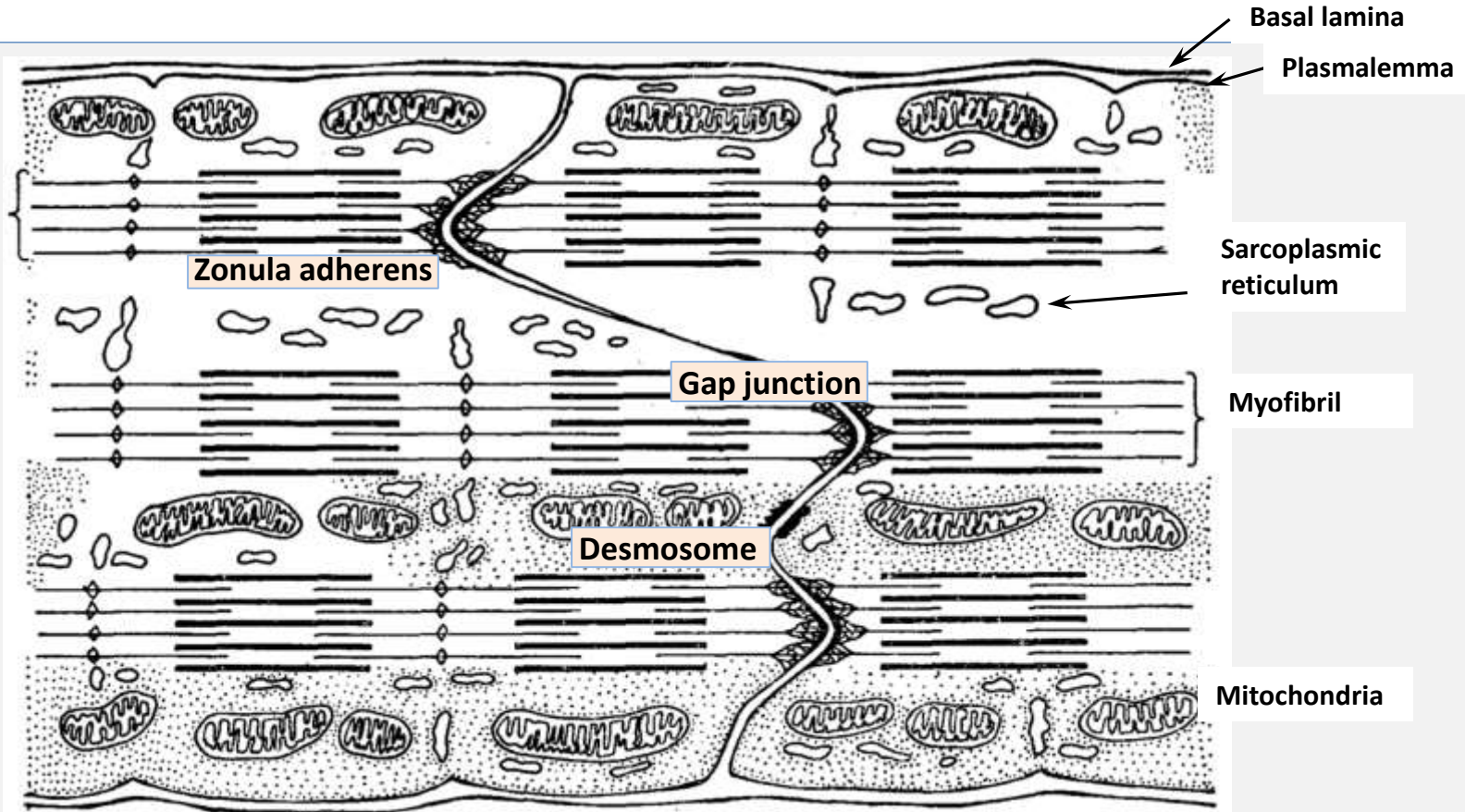
Lateral component:

Gap junction

Transverse component

Zonula adherens

Desmosome



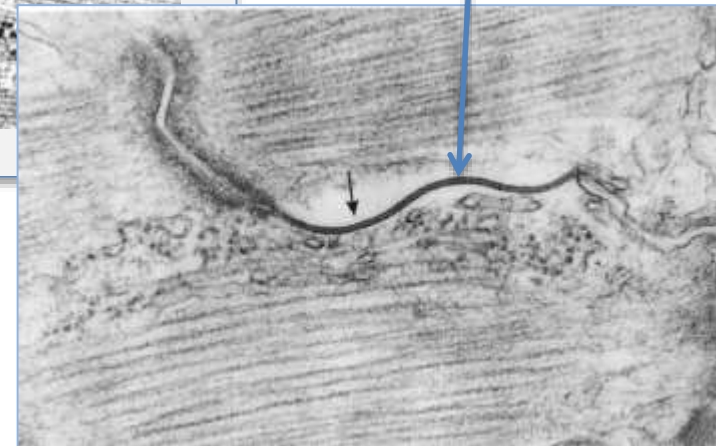
INTERCALATED DISC

Zonula adherens

Gap junction

Transverse
component

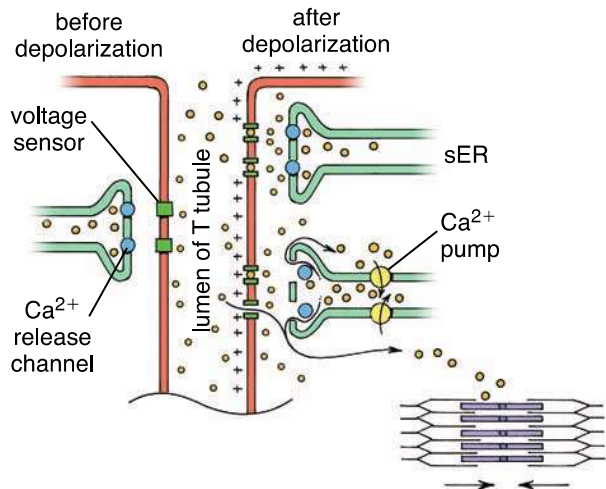
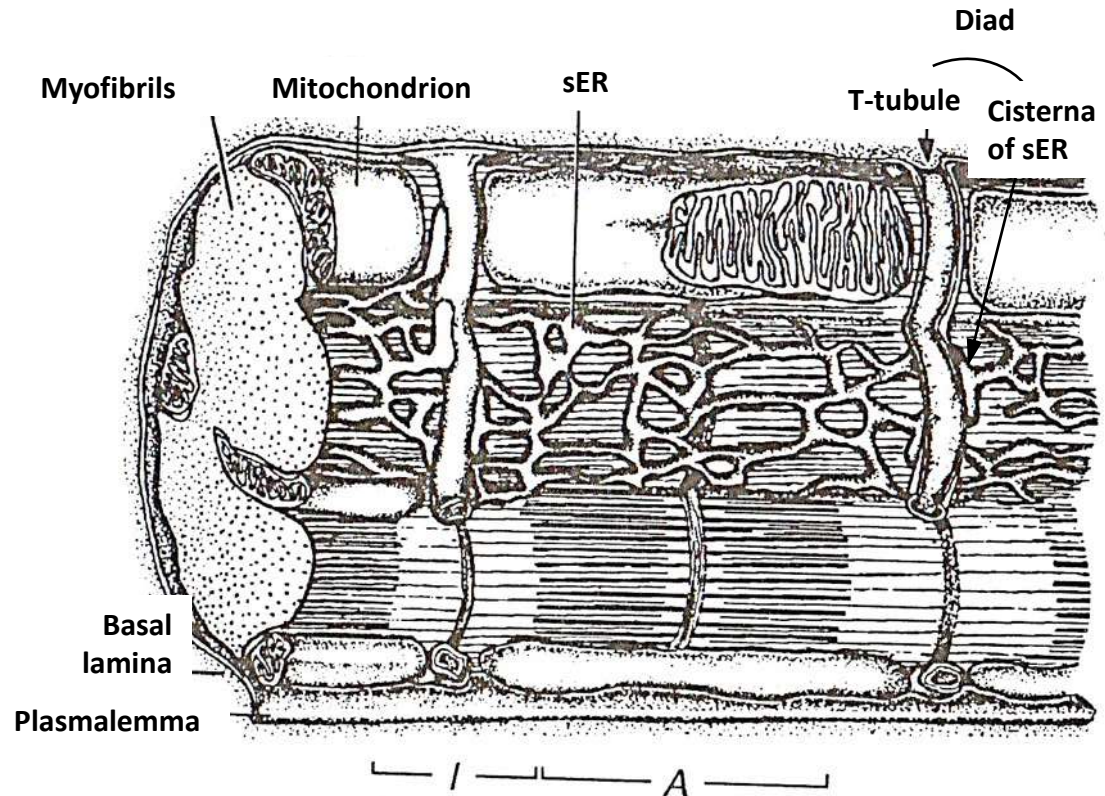
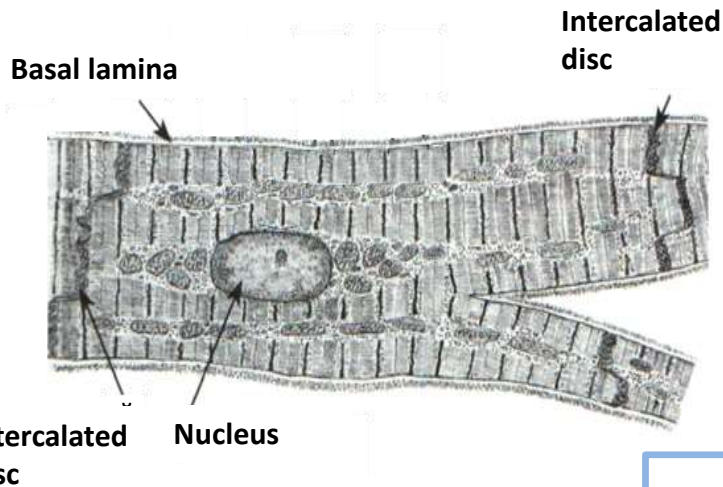
Lateral
component

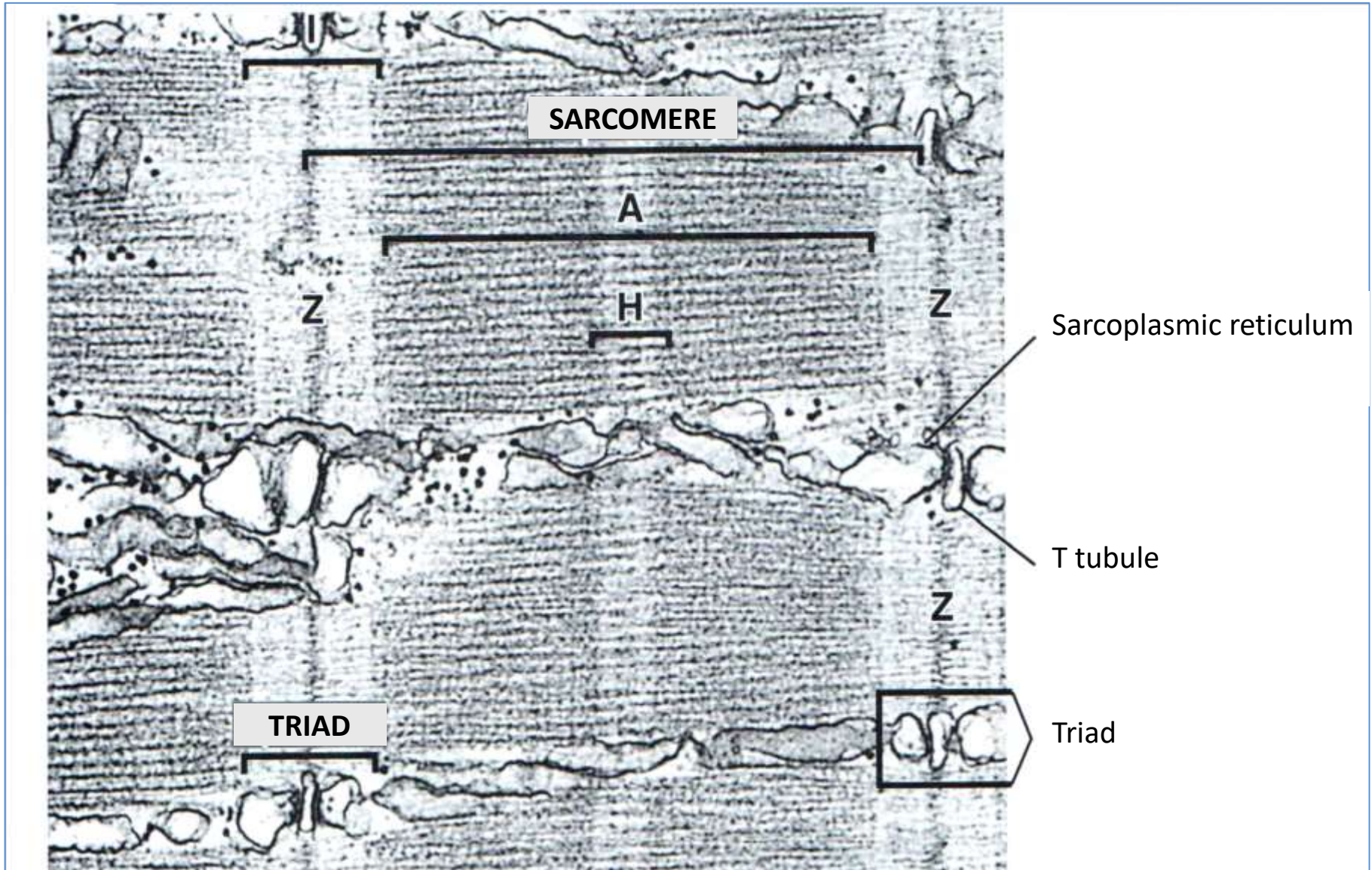


CARDIOMYOCYTE STRUCTURE (typical)

DIADS:
T-tubule
terminal cisterna
at the Z-disc level

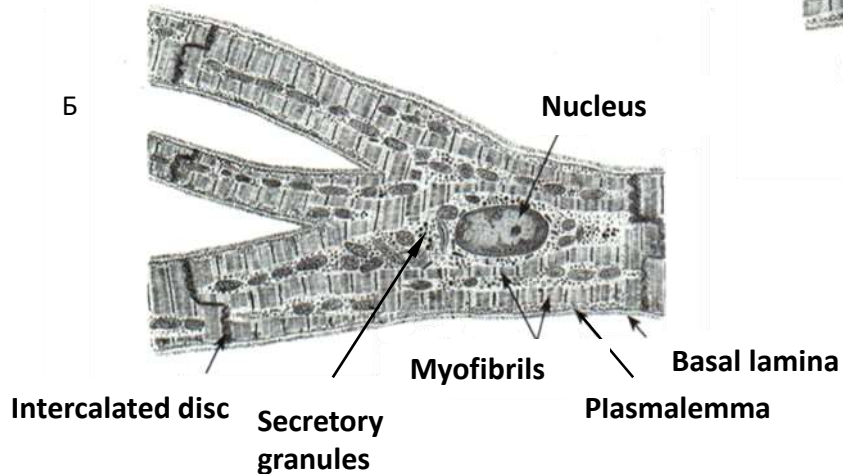
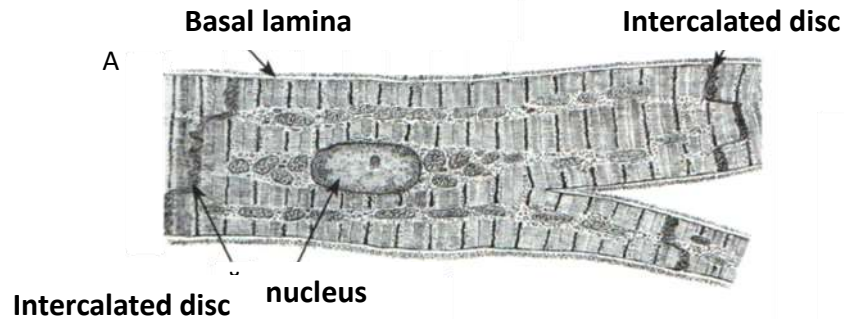
Ca^{2+} ions are released from sER
and intercellular environment





Typical

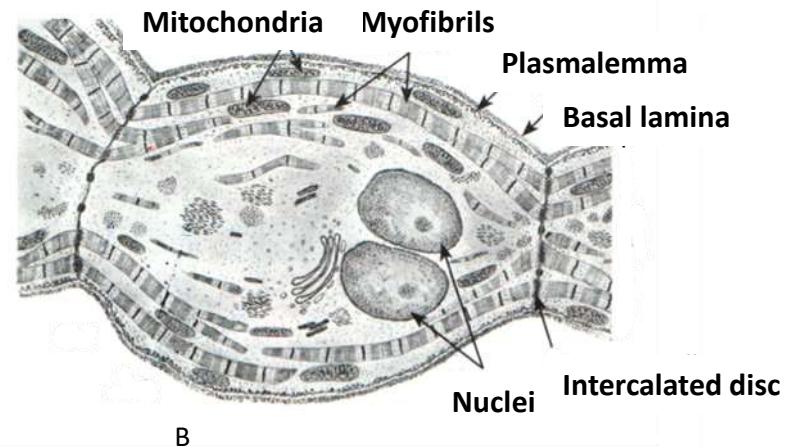
contractile
cardiomyocytes



Secretory

Production of
natriuretic factor

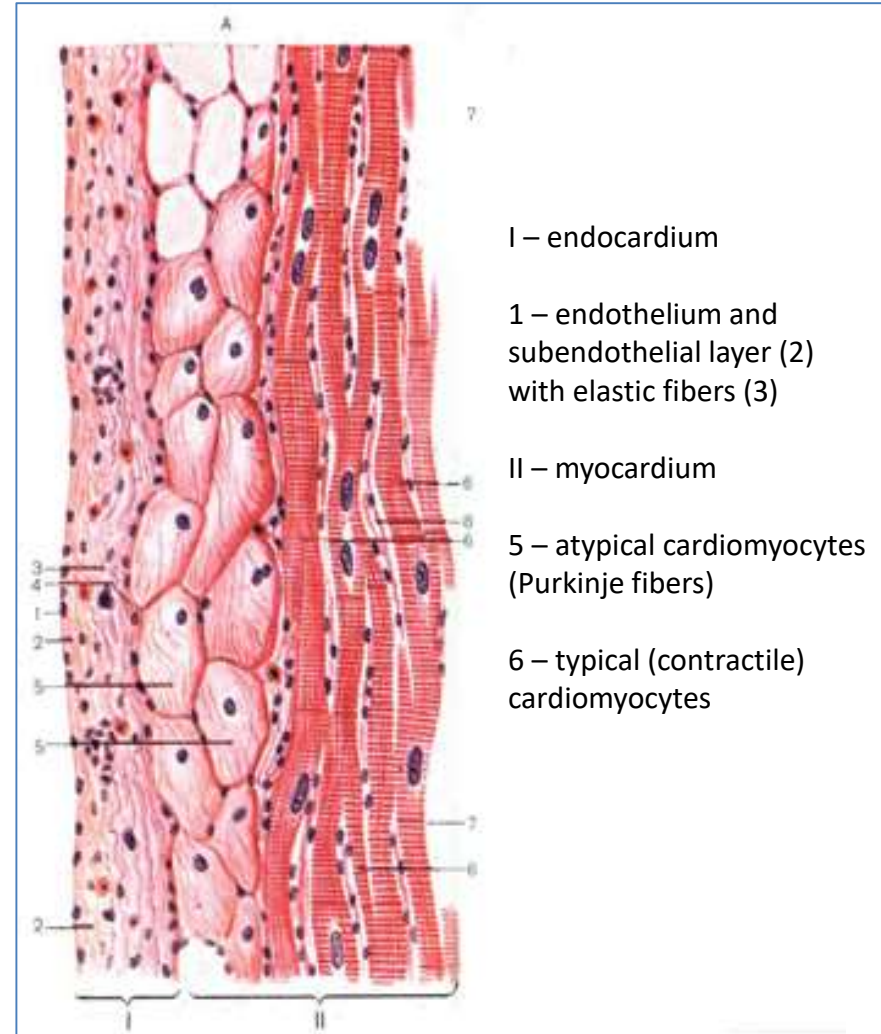
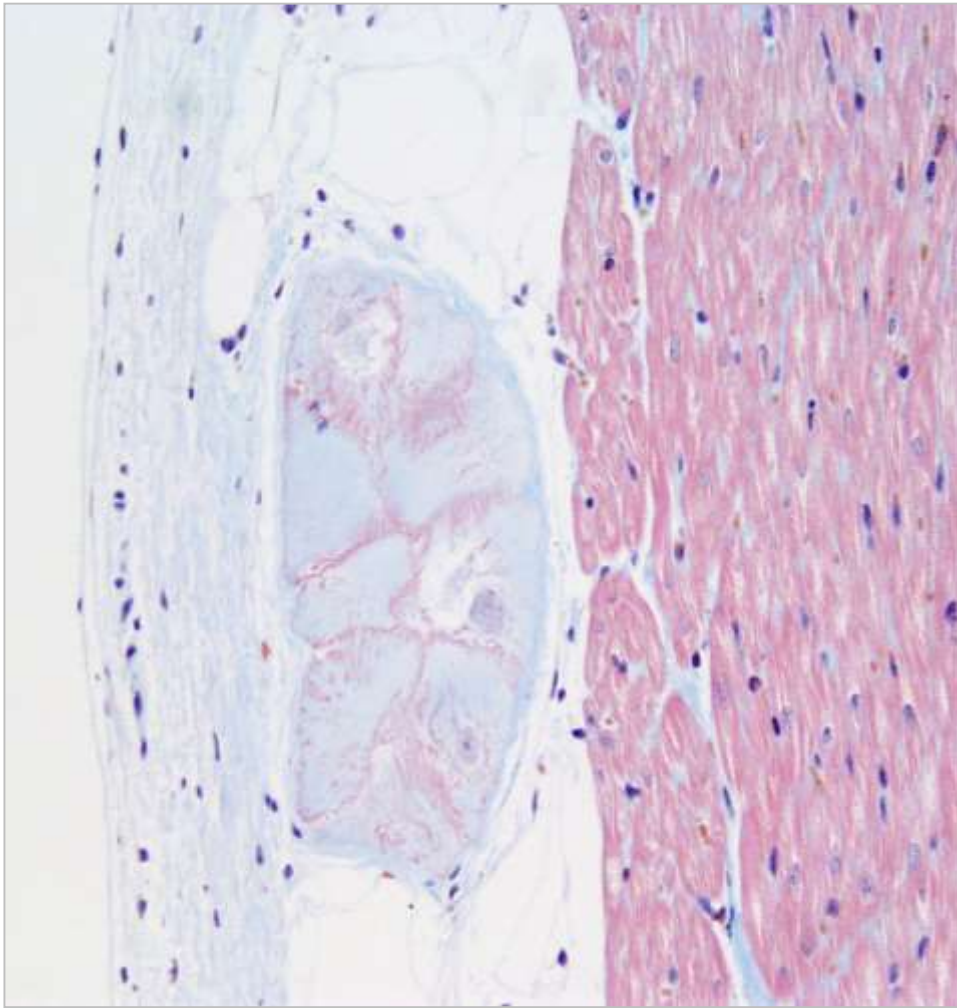
TYPES OF CARDIOMYOCYTES



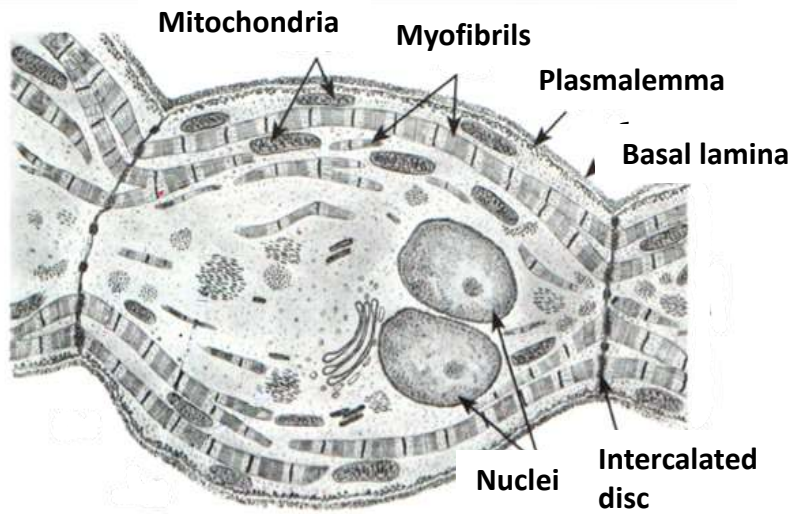
Atypical

Pacemaker or nodes;
Cardiac conducting
cells;
Purkinje cells

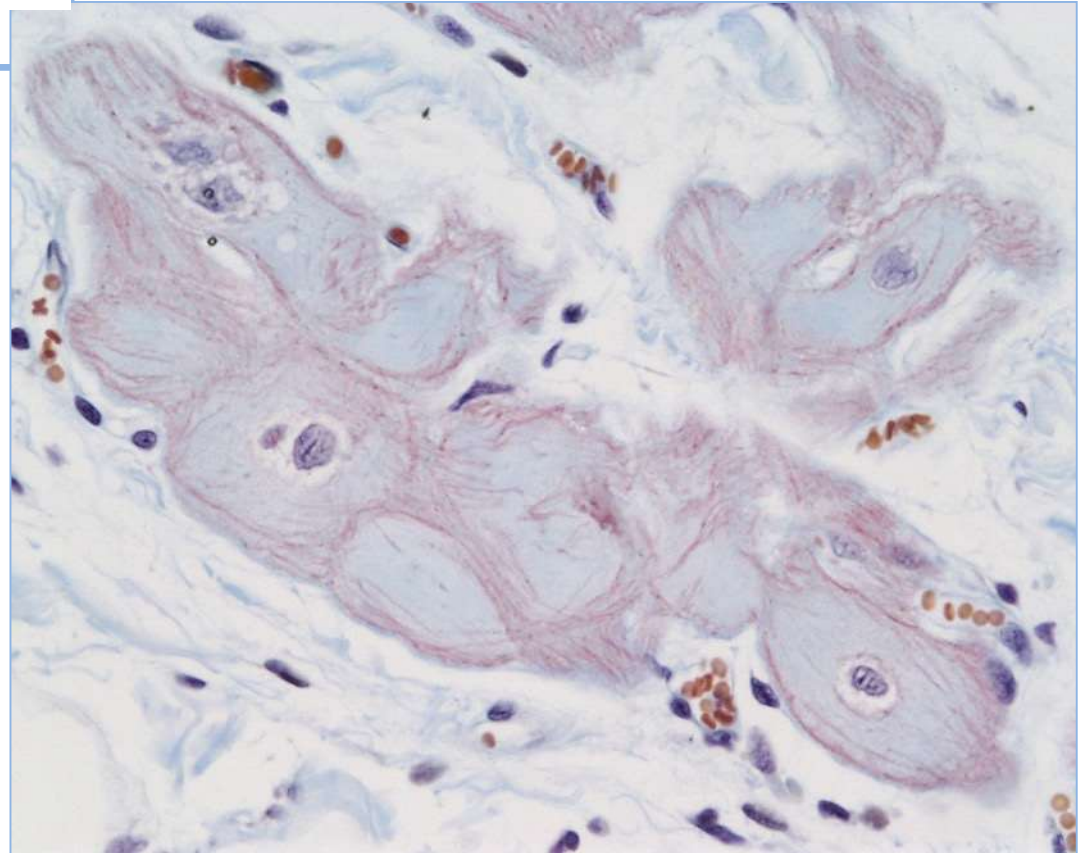
CARDIAC CONDUCTING CELLS



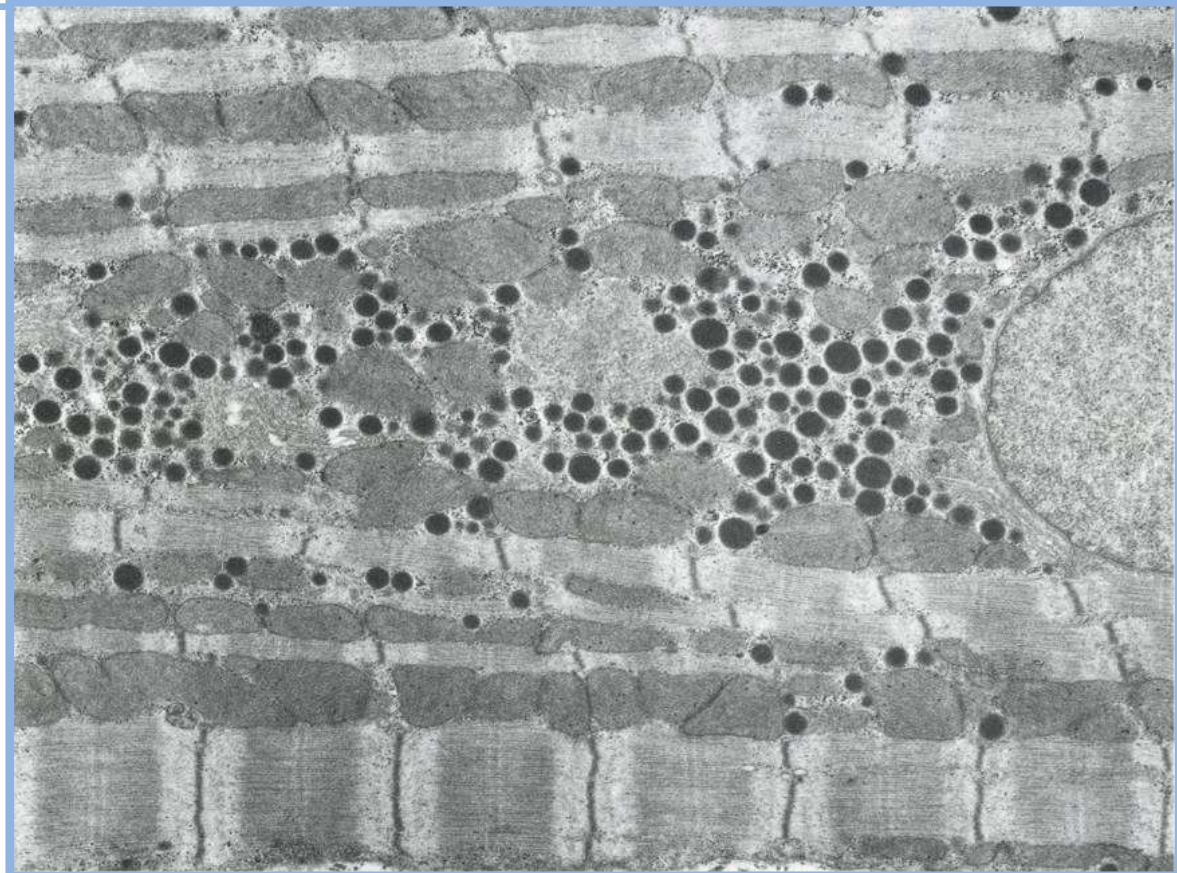
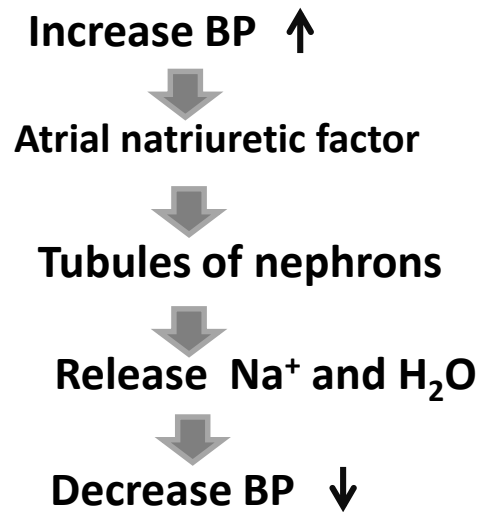
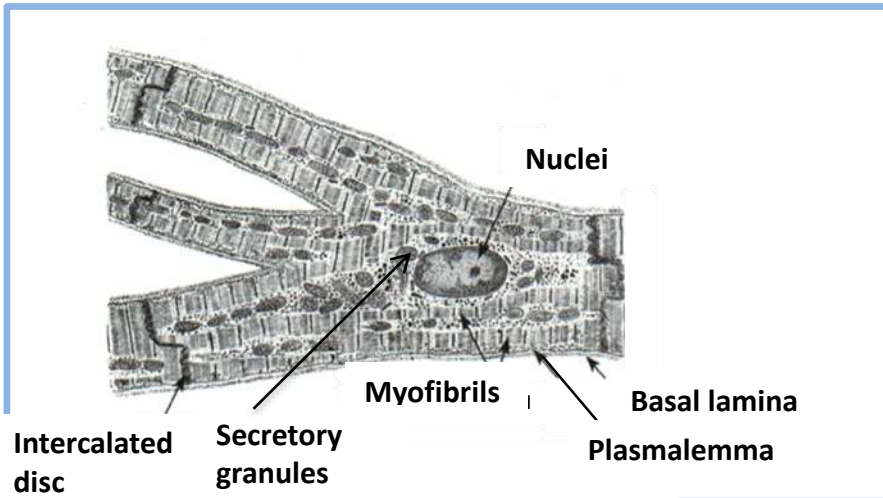
CARDIAC CONDUCTING CELLS

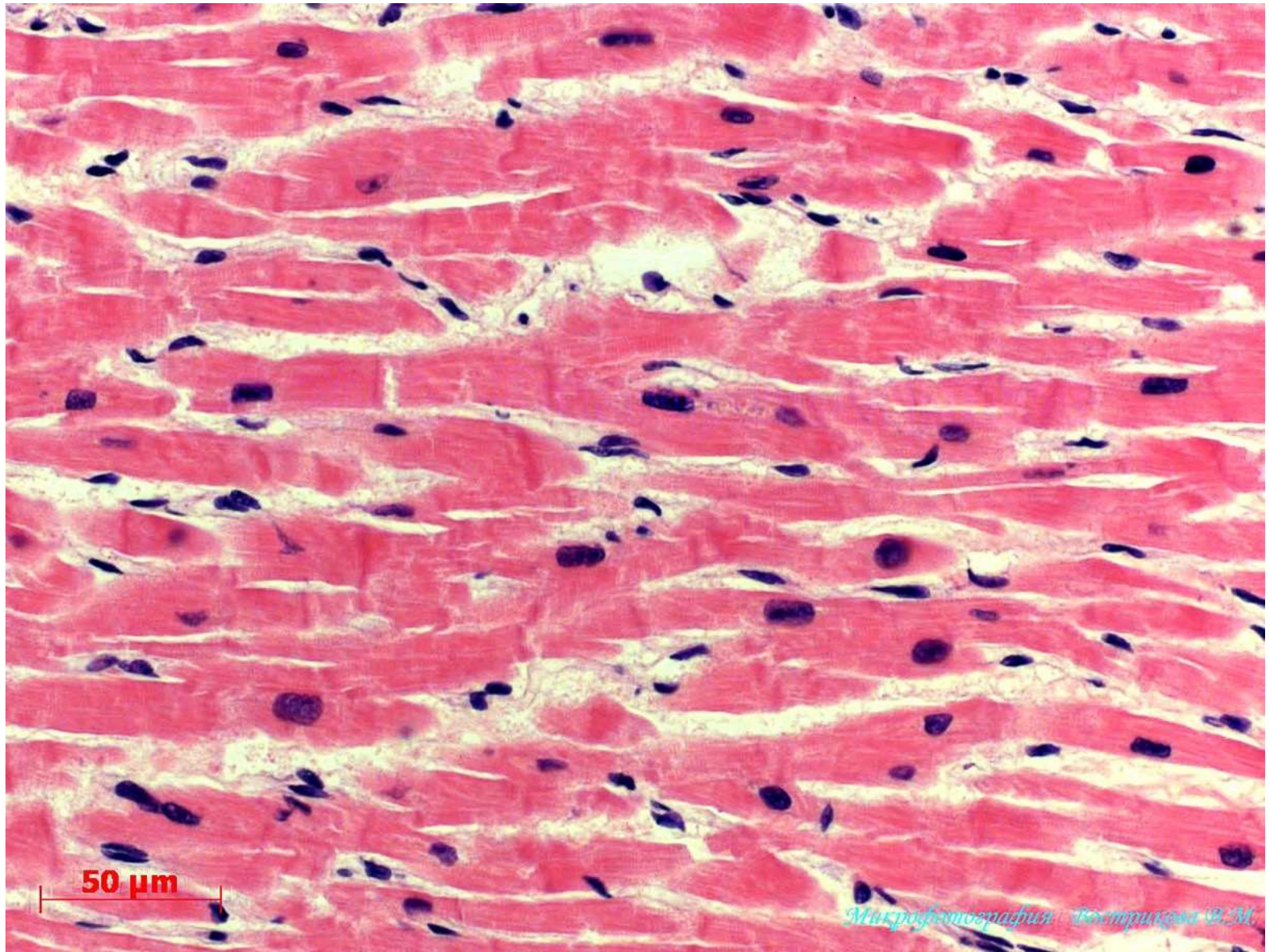


cardiac muscle tissue has an **AUTOMATISM** –
*the ability to generate an action potential
self-sufficiently and contract*

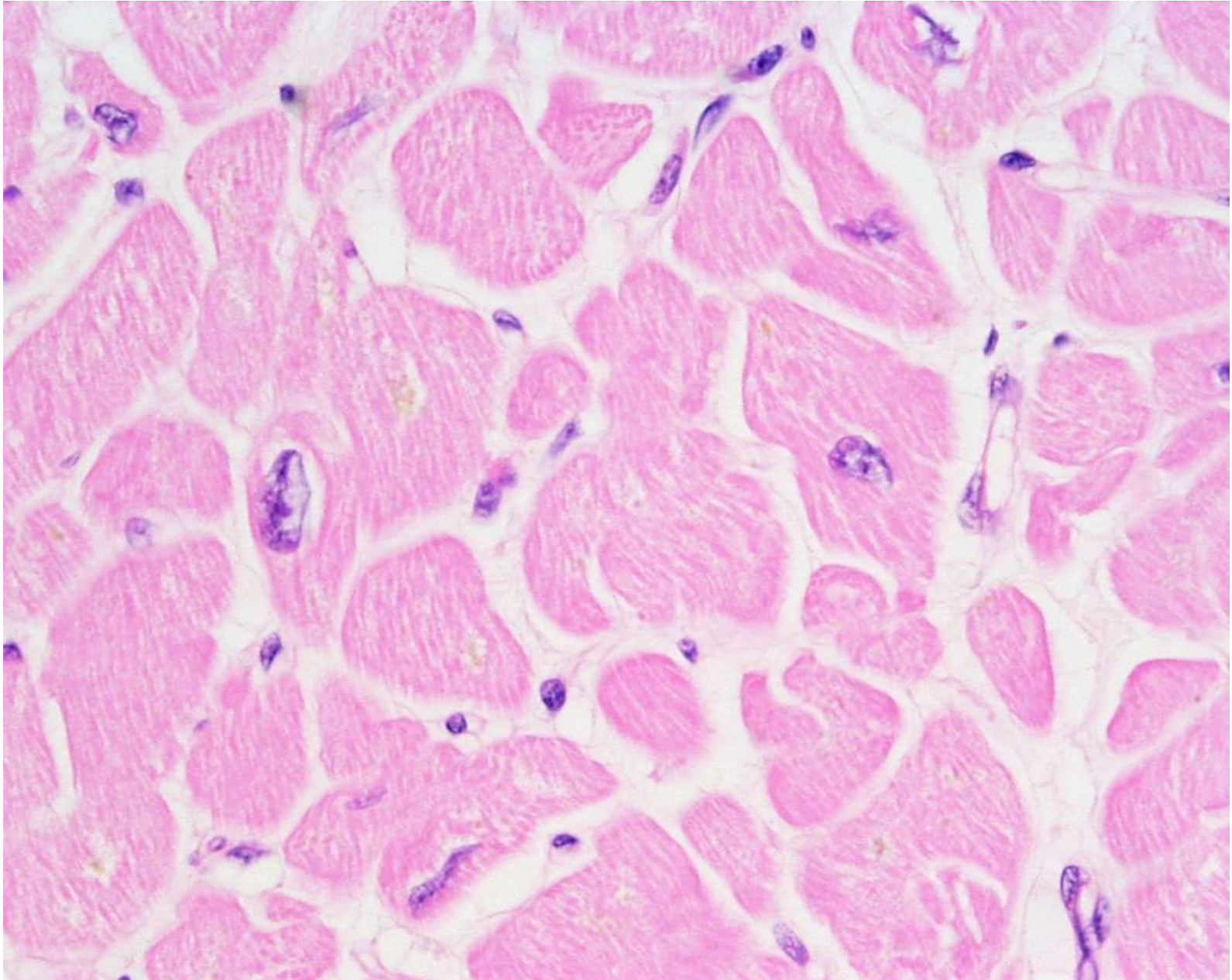


SECRETORY CARDIOMYOCYTES

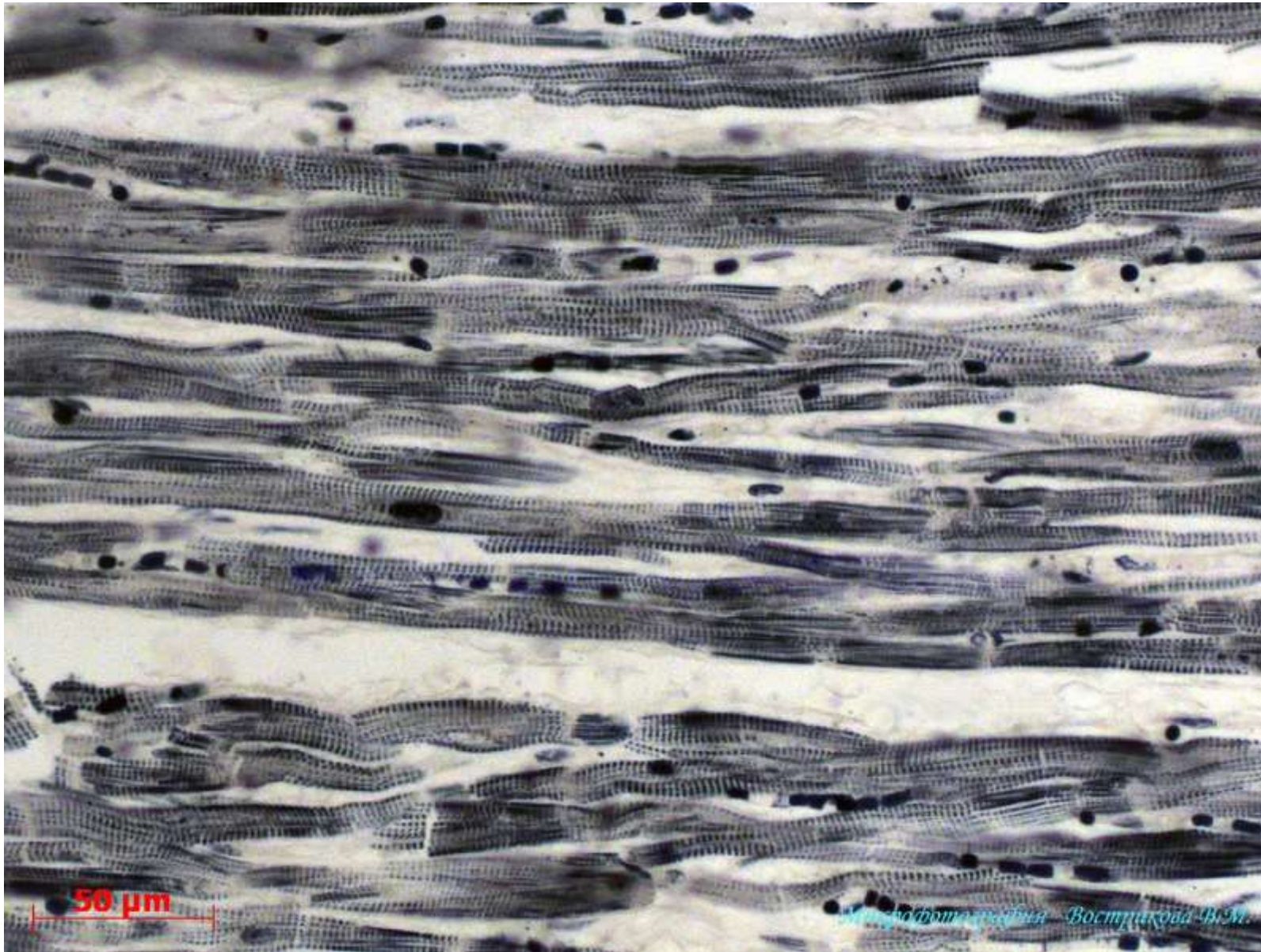




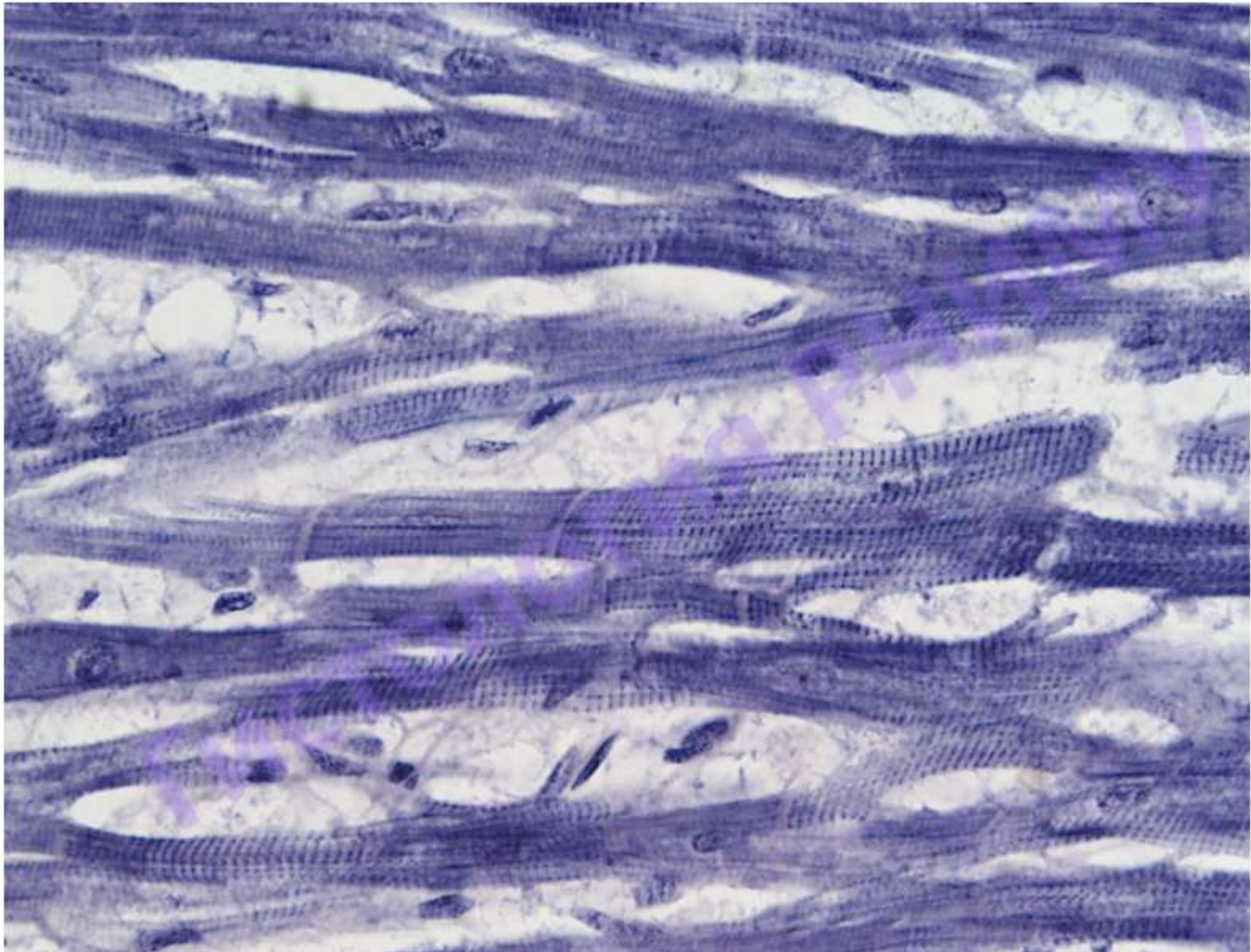
Slide № 71 «**STRIATED CARDIAC MUSCLE TISSUE**» H&E

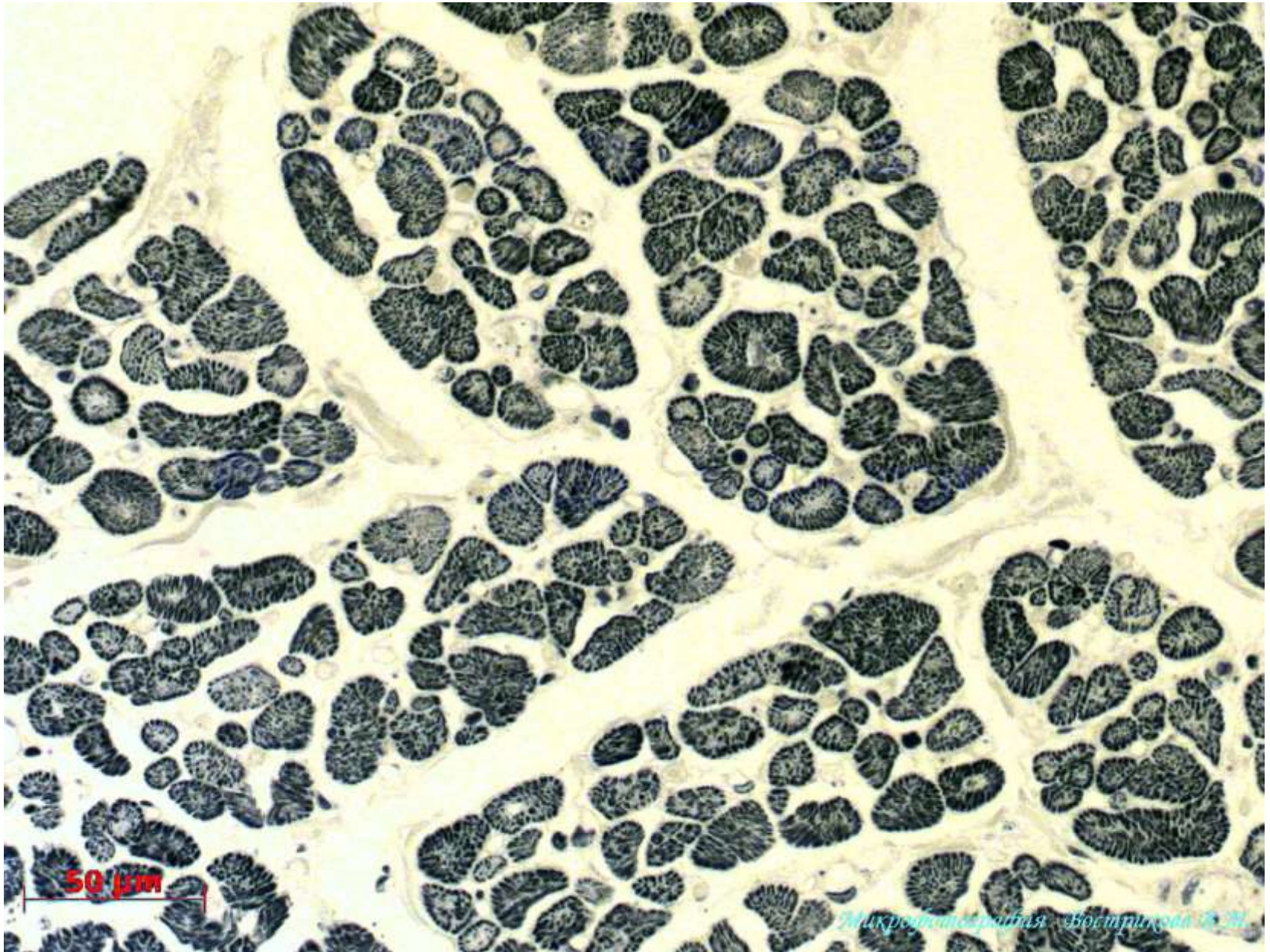


Slide № 71a «**STRIATED CARDIAC MUSCLE TISSUE**» *Iron hematoxylin*

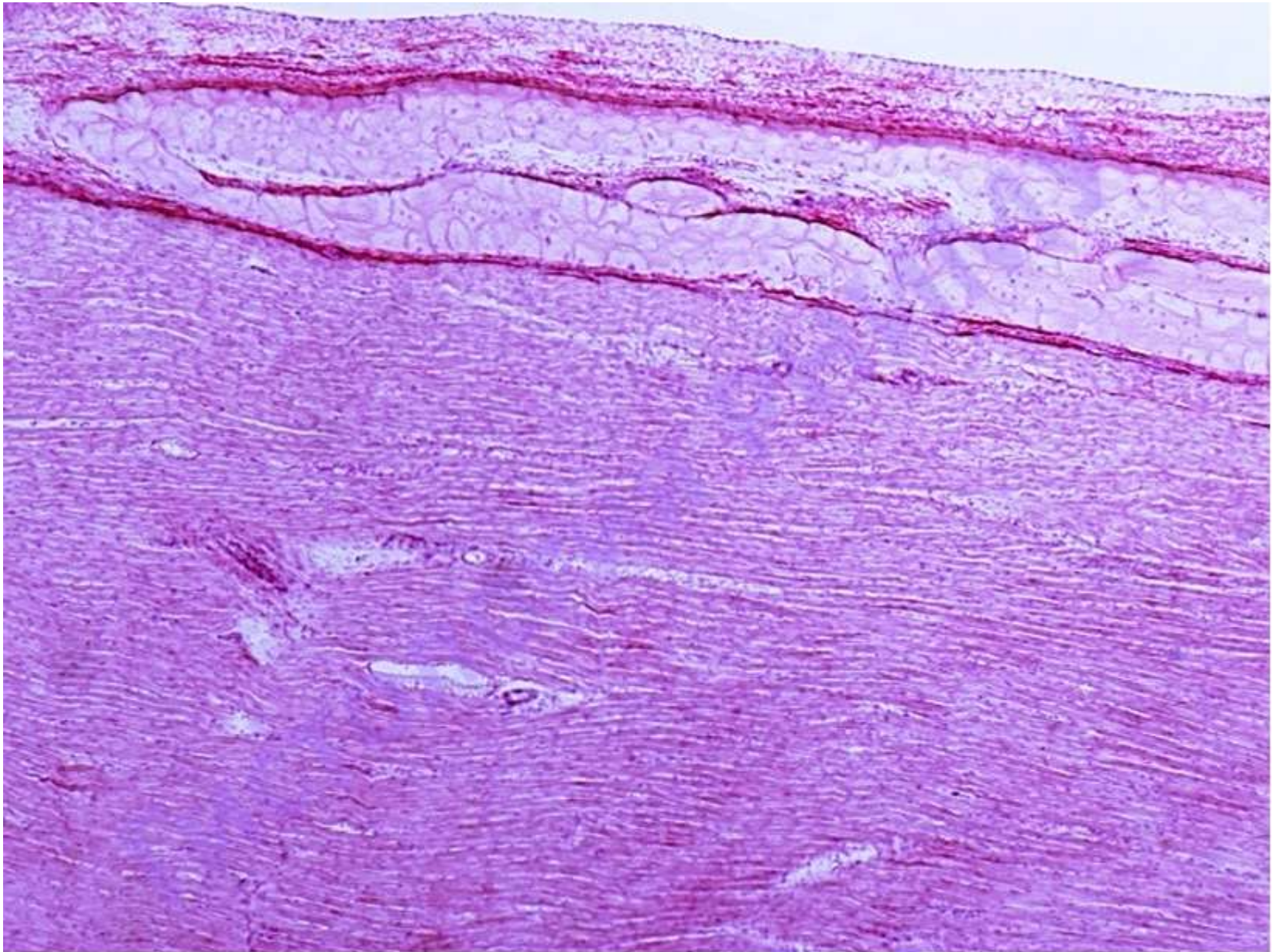


Slide № 71a «**STRIATED CARDIAC MUSCLE TISSUE**» *Iron hematoxylin*

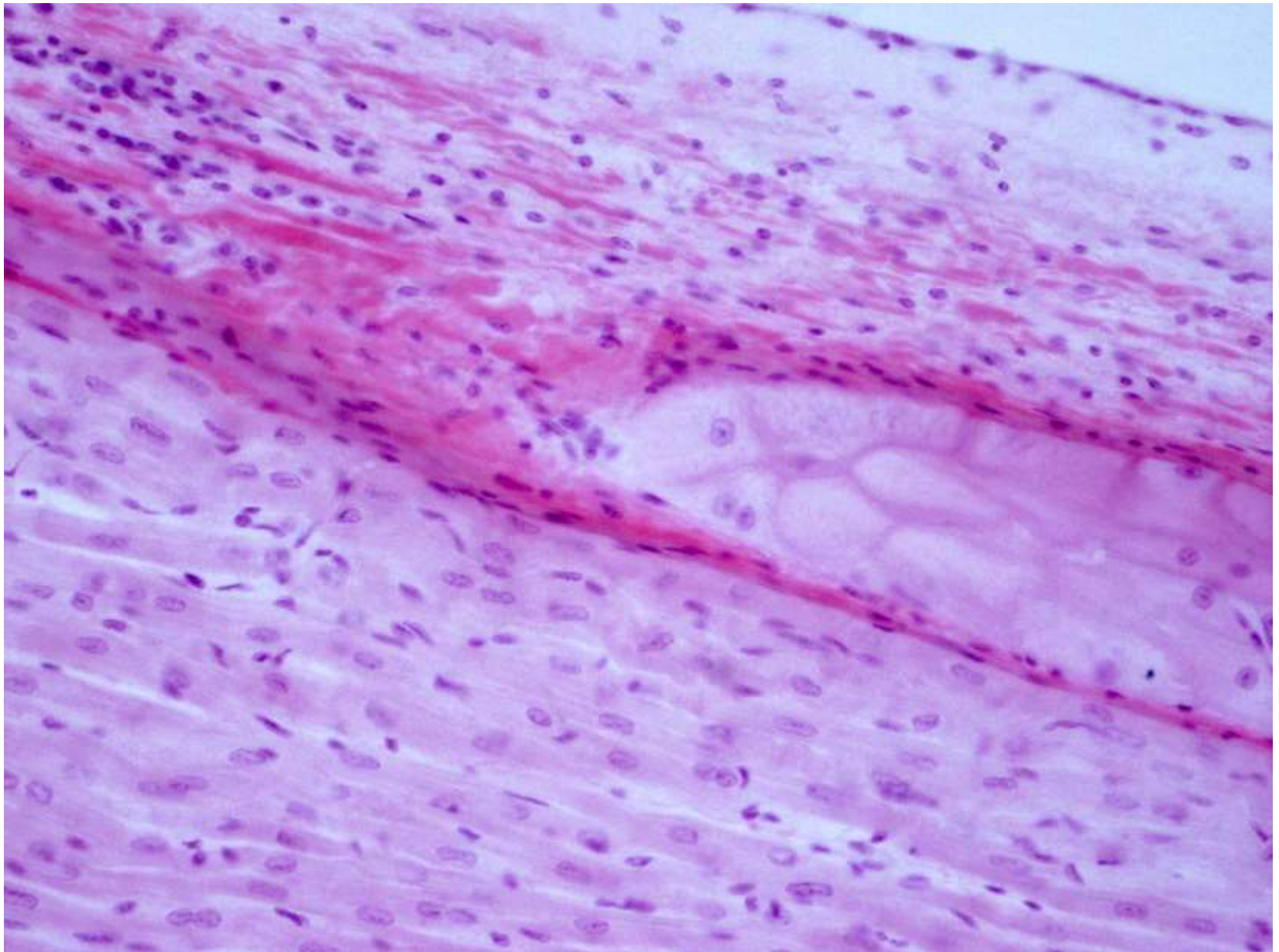


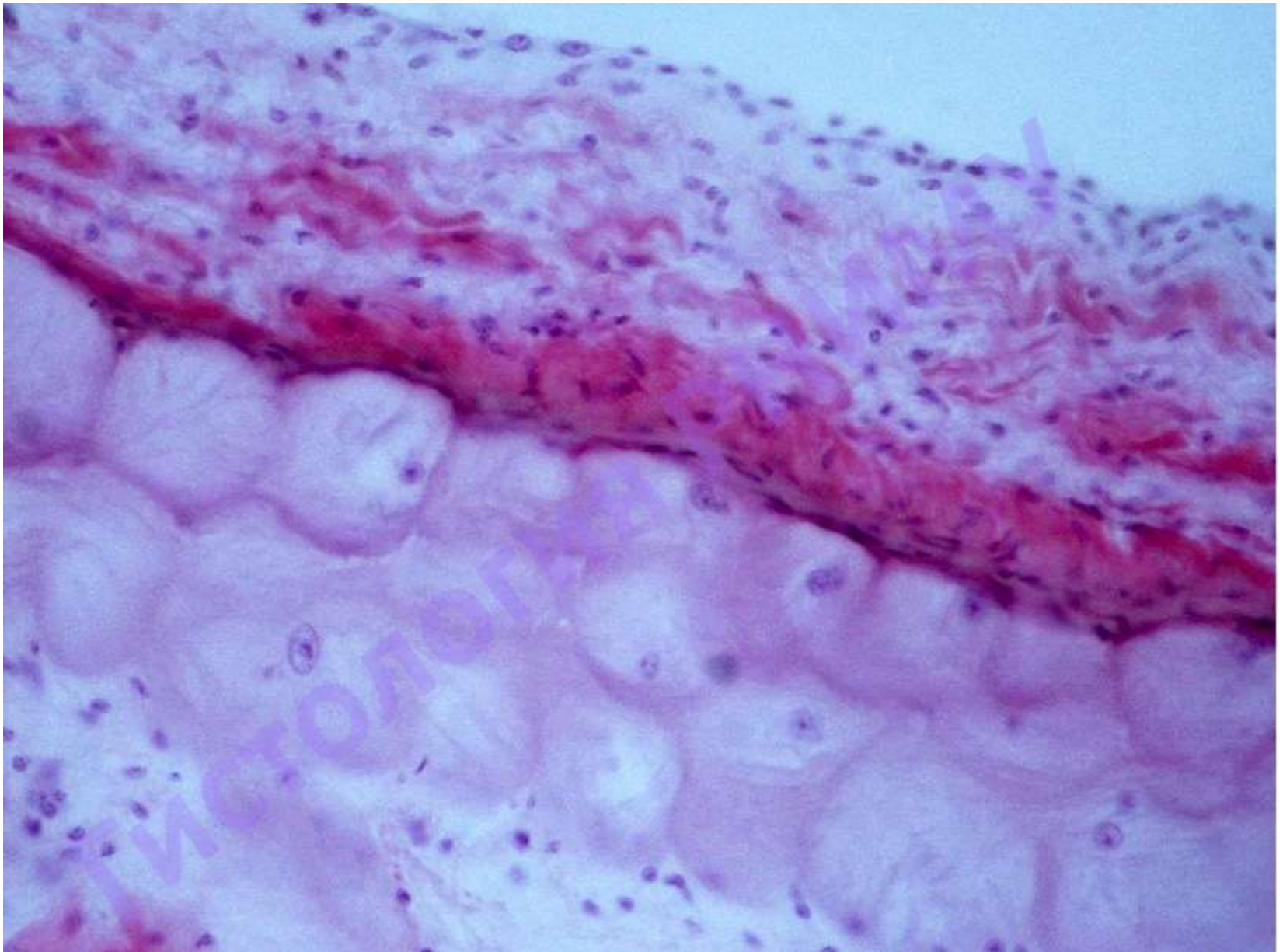


Slide № 107a «WALL OF THE HEART. CARDIAC CONDUCTING CELLS » H&E

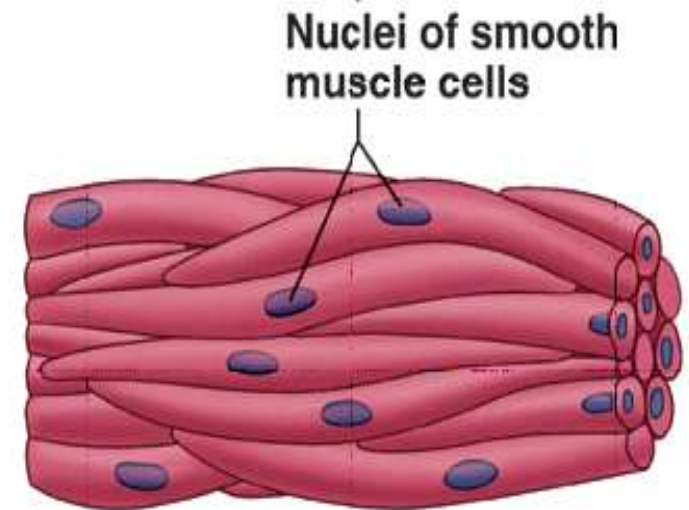
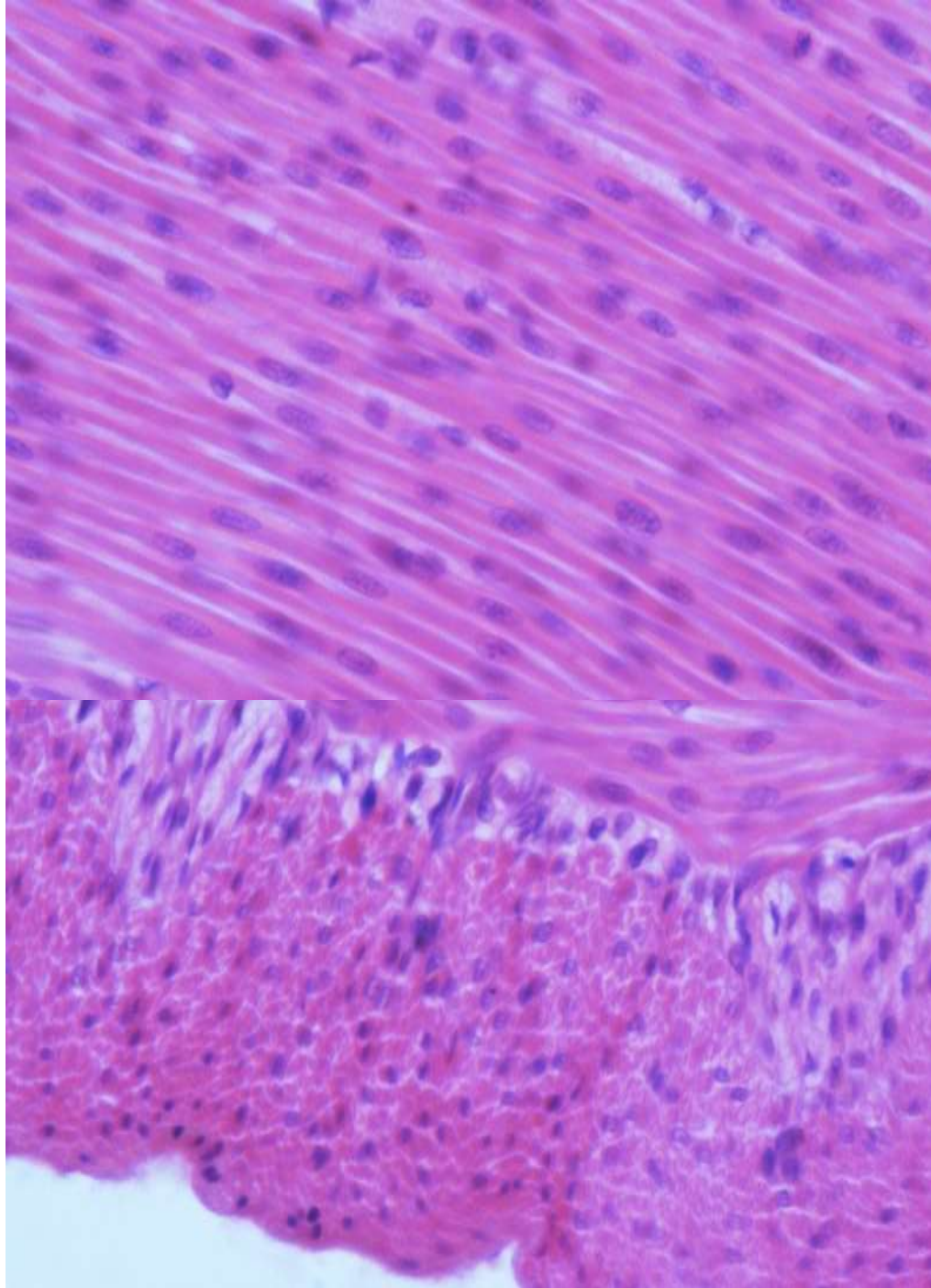


Slide № 107a «WALL OF THE HEART. CARDIAC CONDUCTING CELLS » H&E



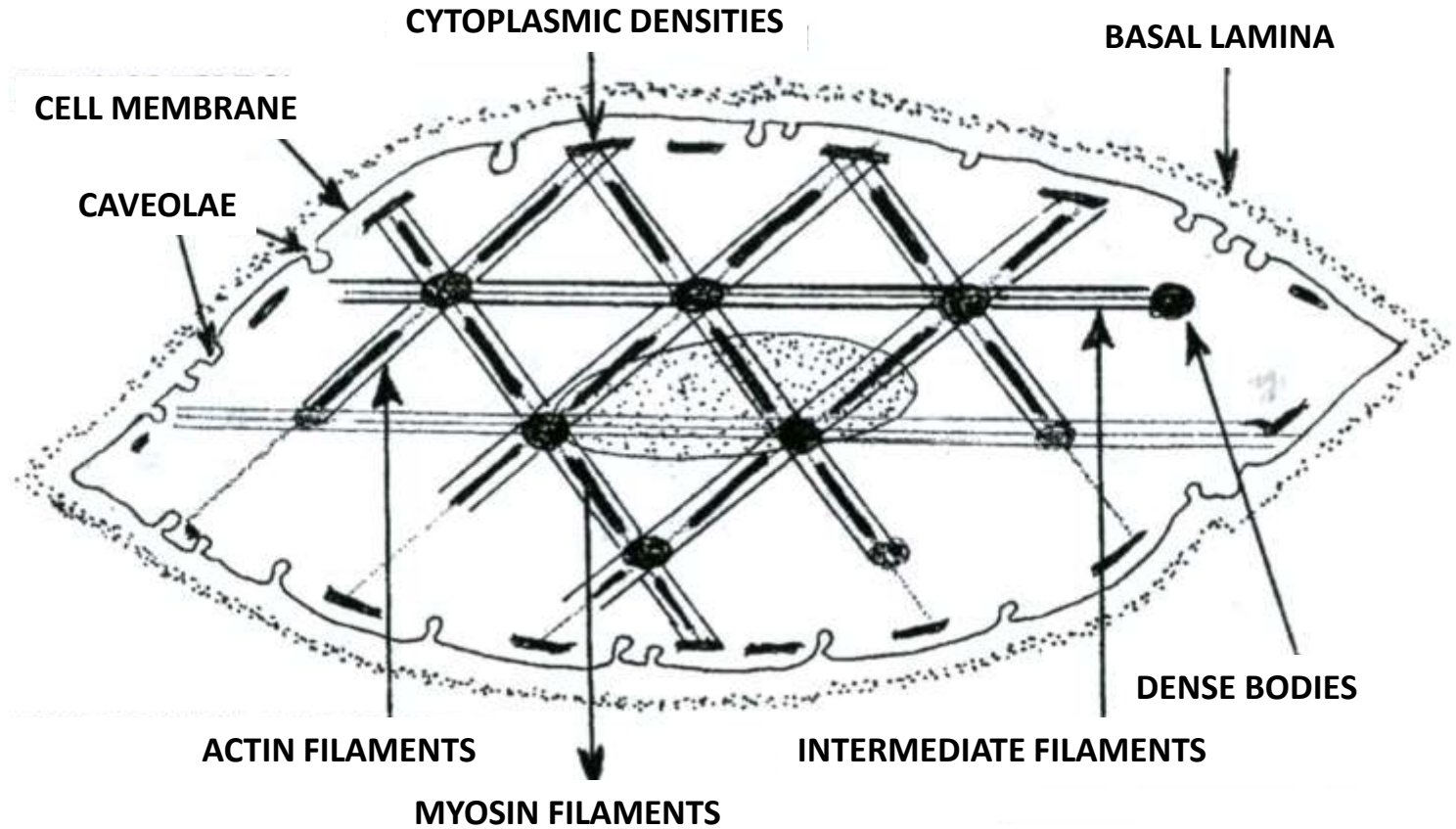


SMOOTH MUSCLE TISSUE

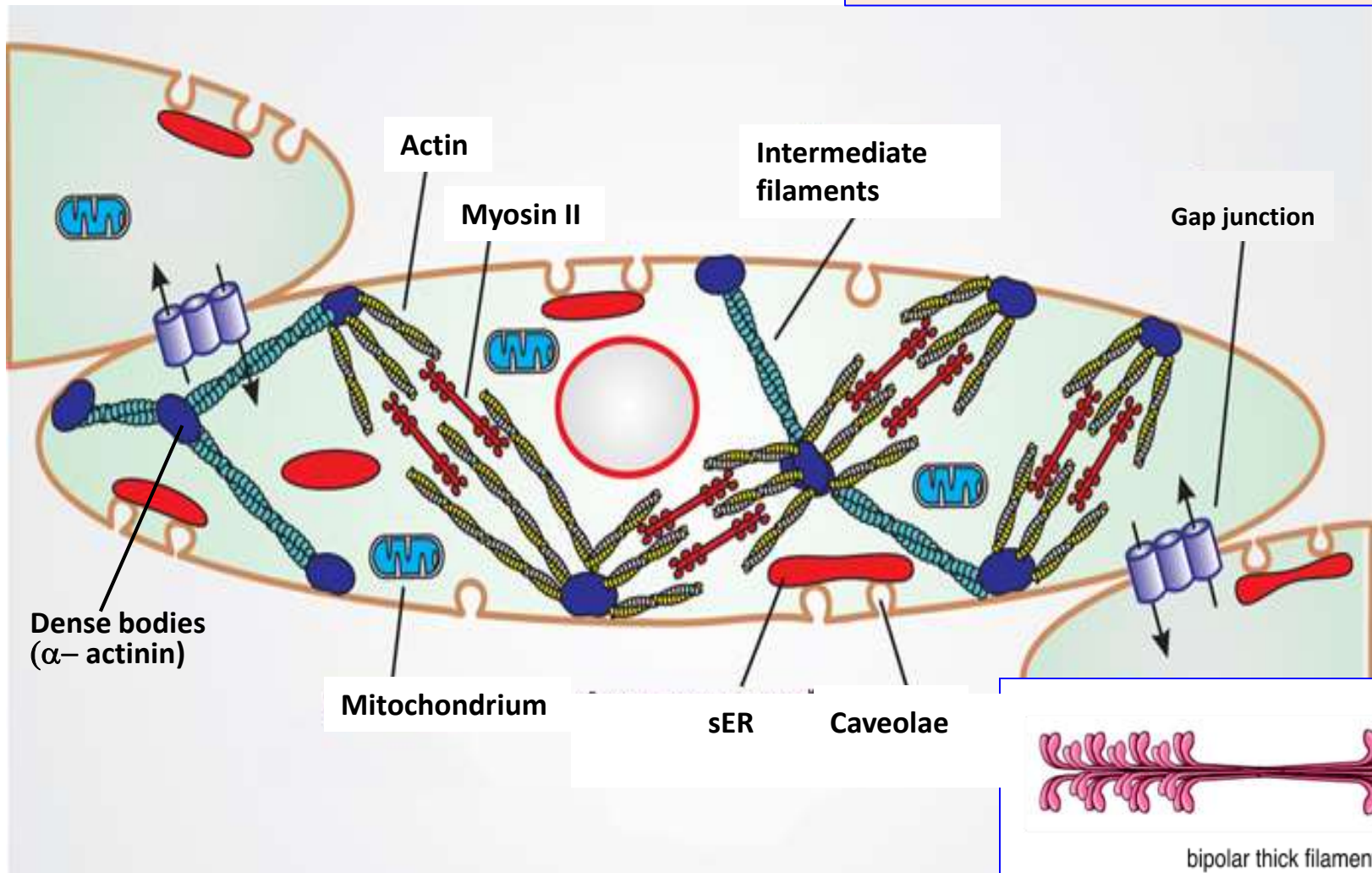


Structural and functional unit –
smooth muscle cell

STRUCTURE OF SMOOTH MUSCLE CELL

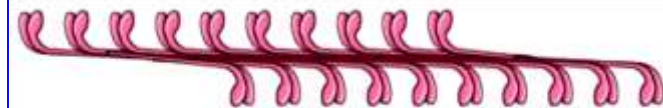


STRUCTURE OF SMOOTH MUSCLE CELL



bipolar thick filament

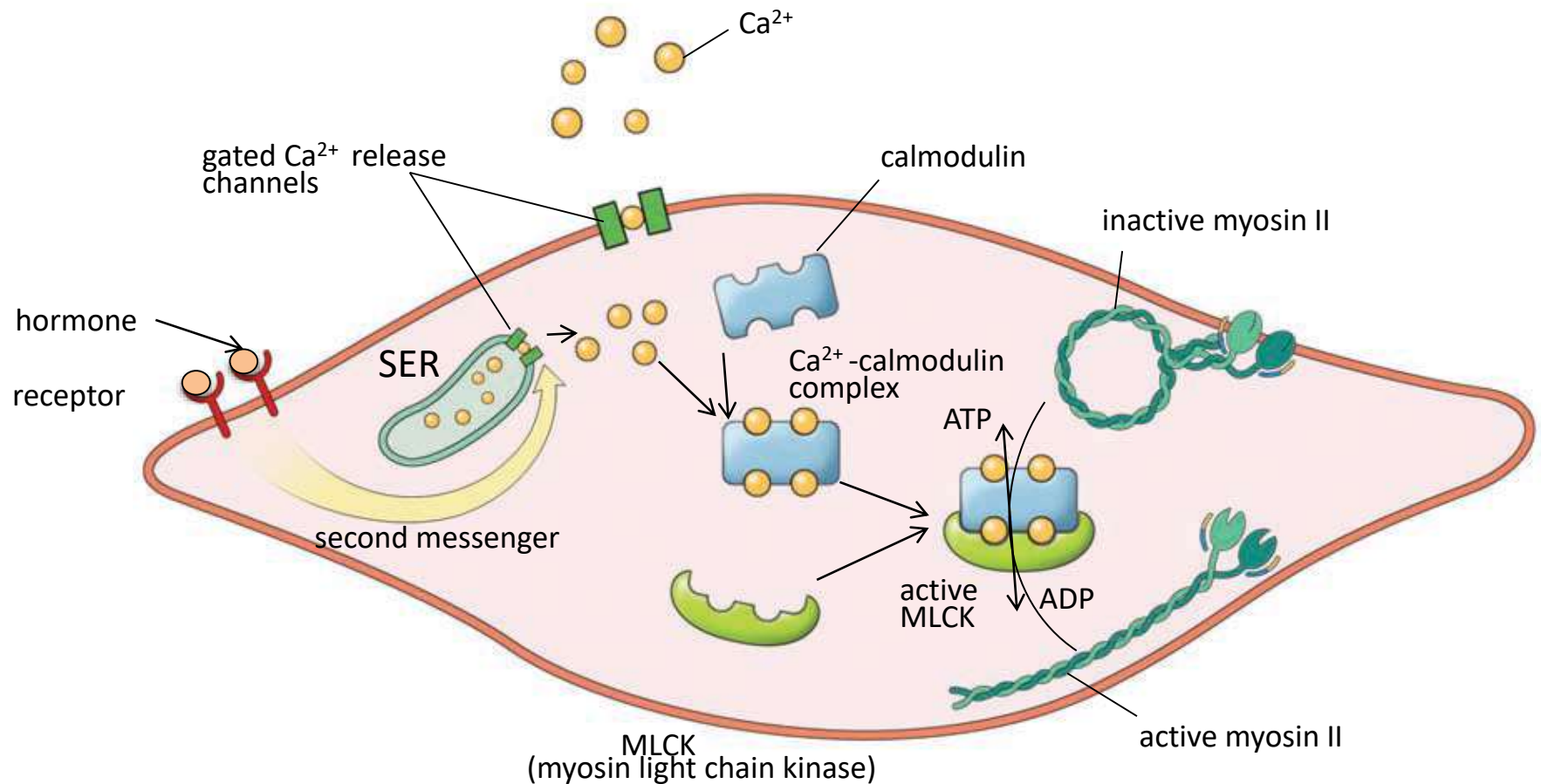
a



side-polar thick filament

b

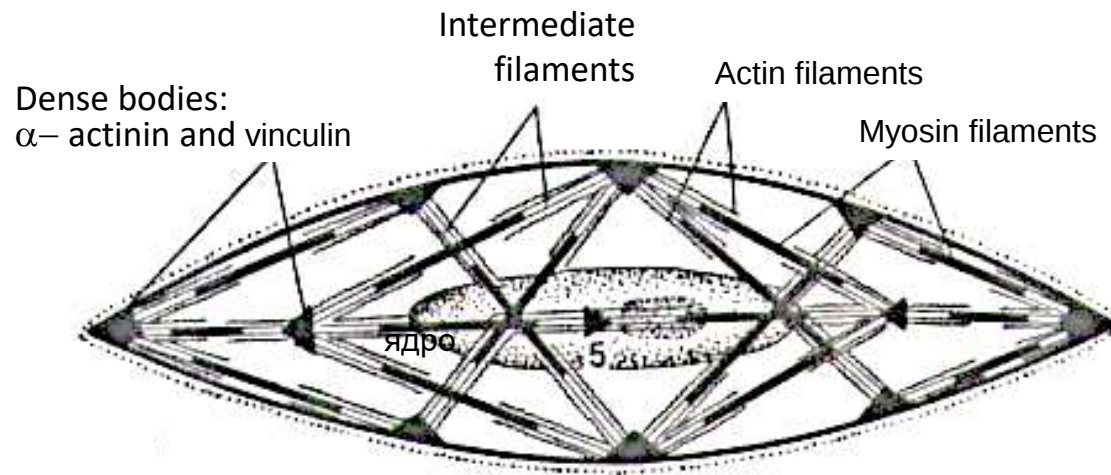
MECHANISM of SMOOTH MUSCLE CELL CONTRACTION



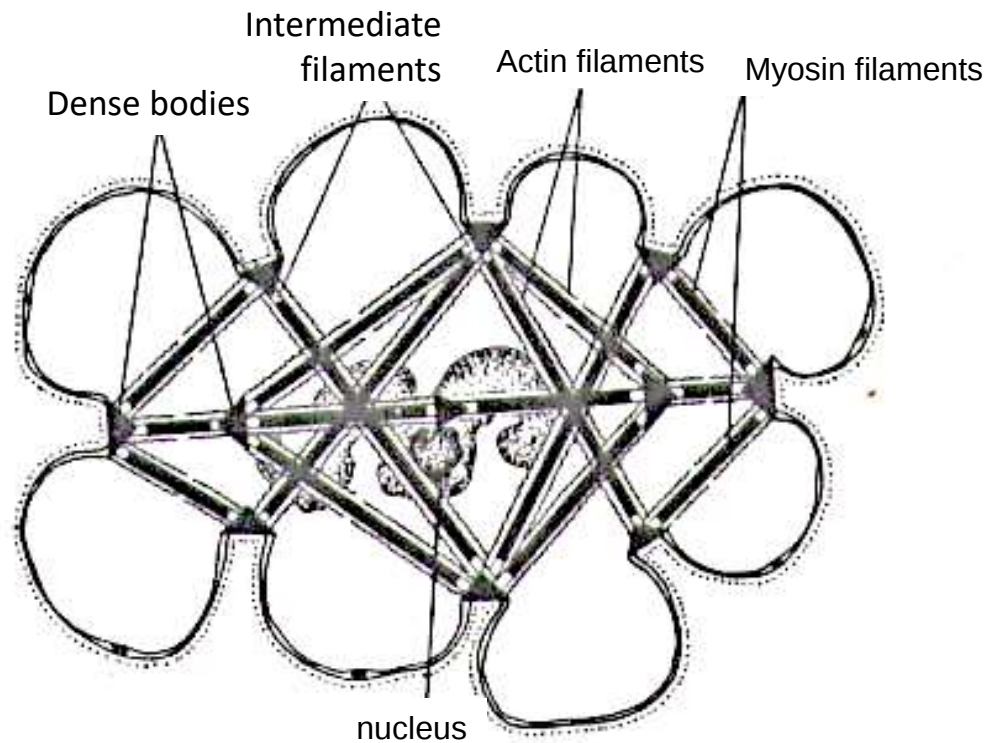
1. An increase in the Ca^{2+} level concentration within the cytosol is necessary to initiate smooth muscle contraction.
2. The intracellular Ca^{2+} binds to calmodulin to form the Ca^{2+} -calmodulin complex.
3. This complex then binds to myosin light chain kinase (MLCK) to phosphorylate one of the two regulatory light chains of the myosin molecule.
4. When phosphorylated, the myosin changes its conformation and the actin-binding site on the myosin head is activated, allowing it to attach to actin.
5. In the presence of ATP, the myosin head bends, producing contraction.

MODEL for SMOOTH MUSCLE CELL CONTRACTION

relaxed

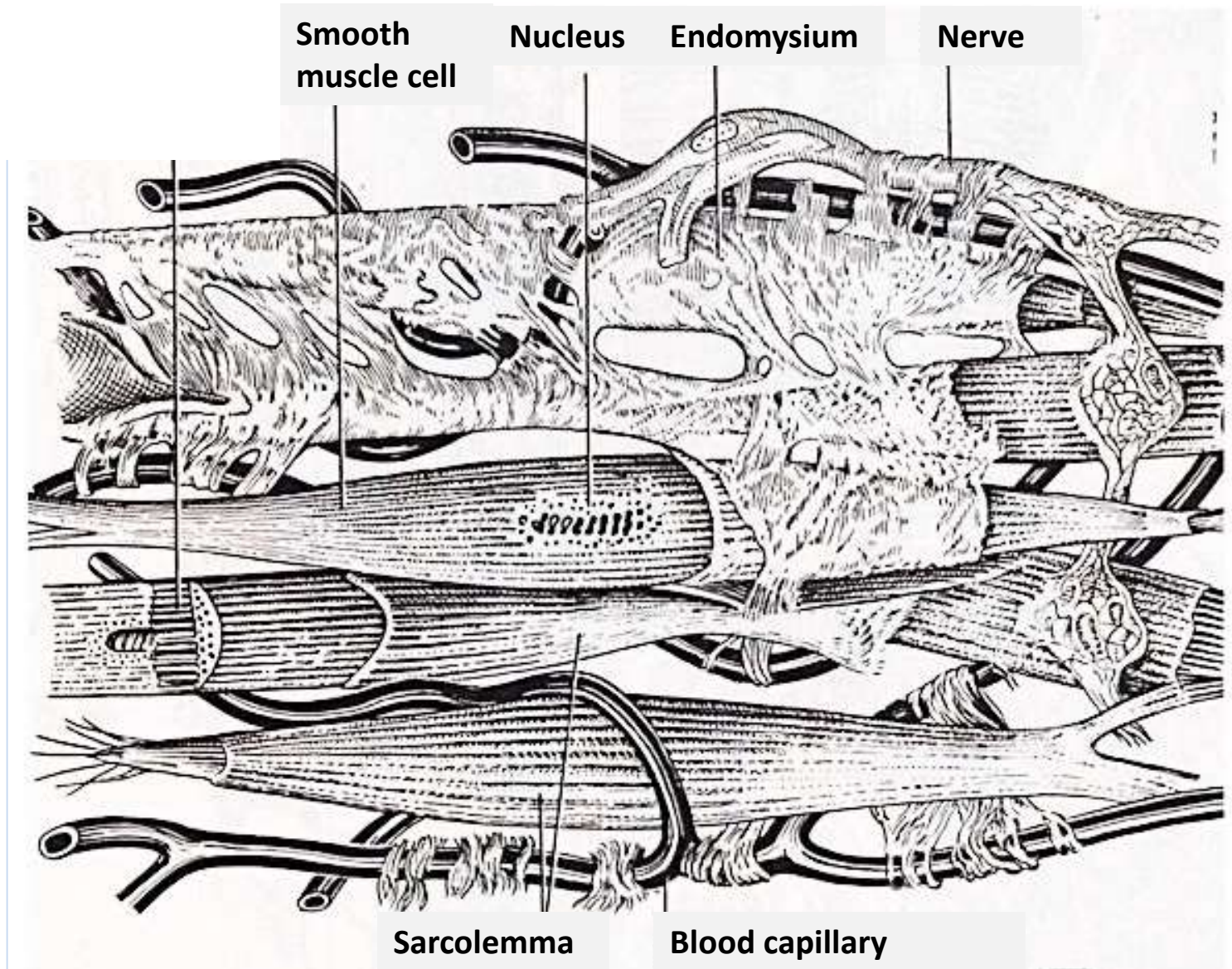


contracted

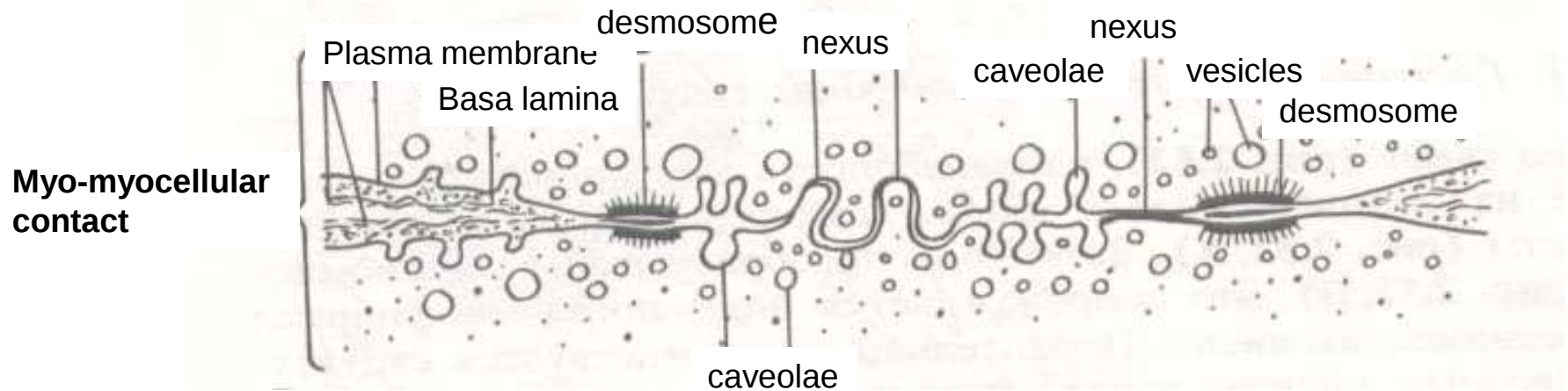
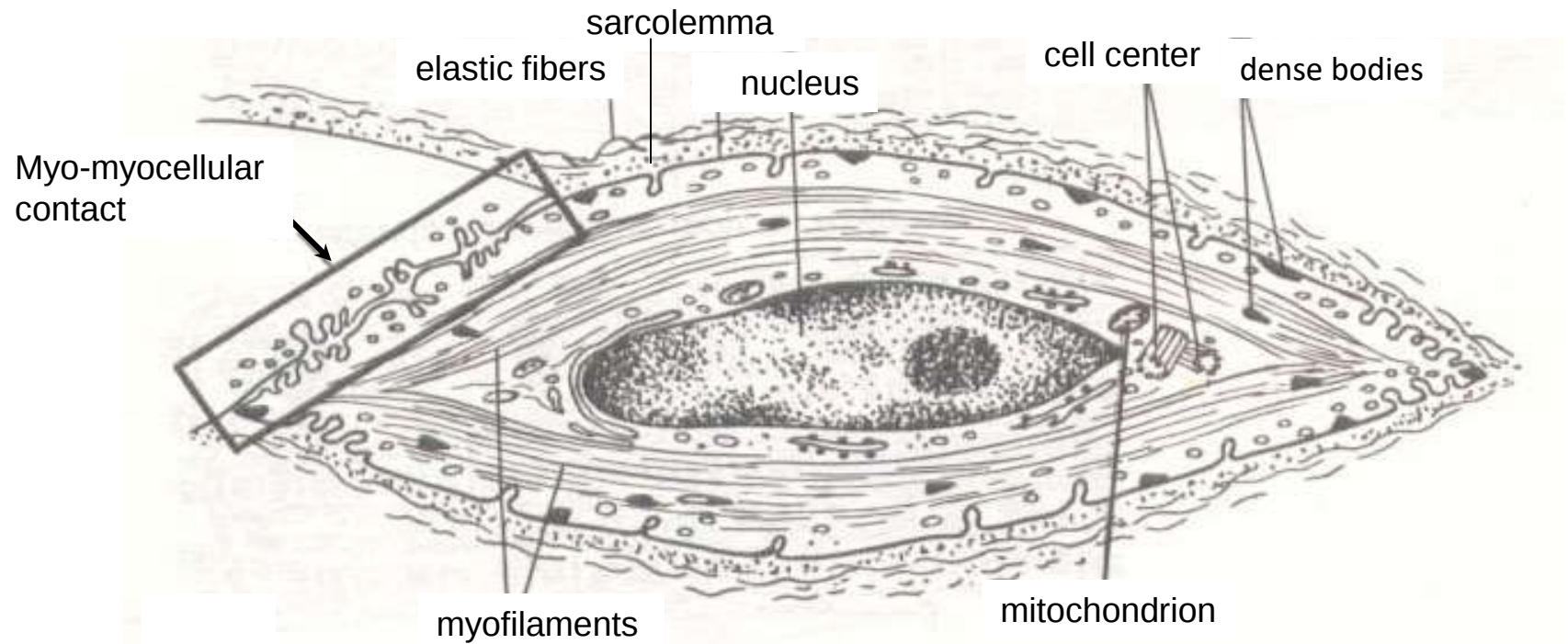




SMOOTH MUSCLE CELLS INTERACTION



SMOOTH MUSCLE CELLS INTERACTION

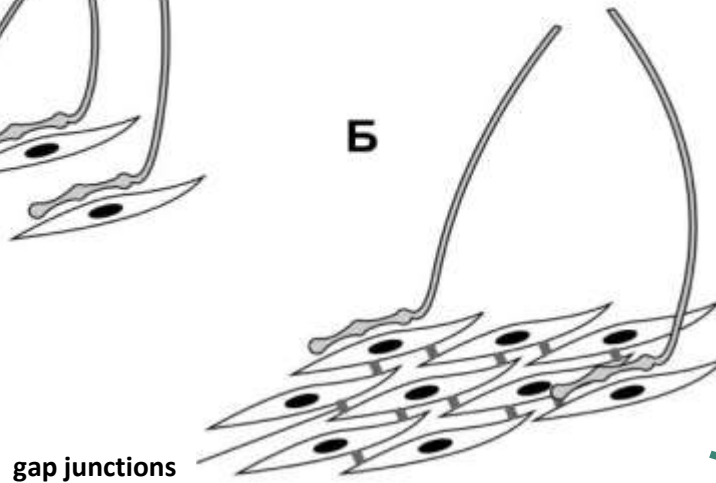
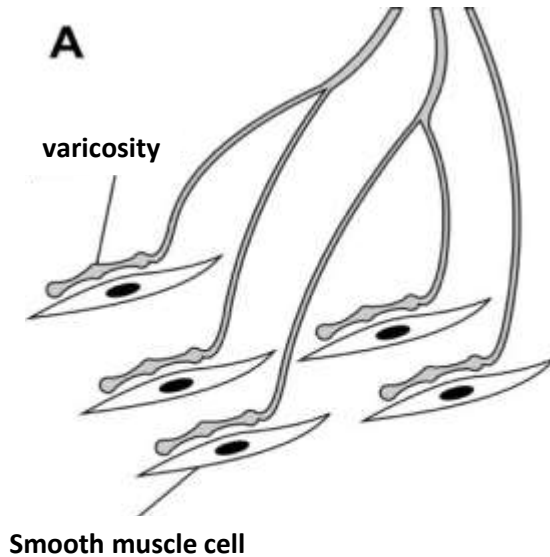


INNERVATION OF SMOOTH MUSCLE

Multiple innervated smooth muscles

Smooth muscle cells of iris and vas deferens have individual motor innervations. This allows fine regulation of muscle contraction.

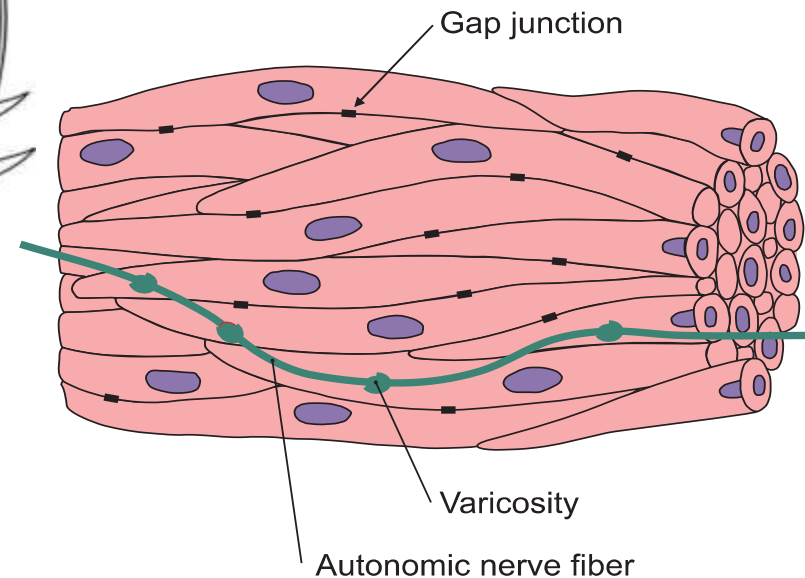
They belong to phasic muscles and have relatively high speed characteristics.



Singly innervated smooth muscles

Smooth muscle cells of digestive tract, uterus, ureter, urinary bladder have numerous gap junctions (nexuses) and unit to large functional cellular complex for synchronization of contraction.

They are tonic muscles.



Slide №72 «Smooth muscle. Section of small intestine» H&E

