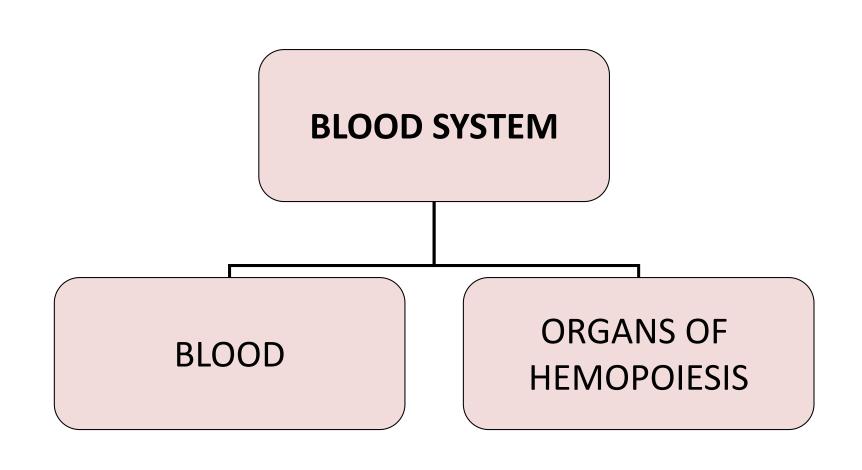
ORGANS OF HEMOLYMPHOID SYSTEM

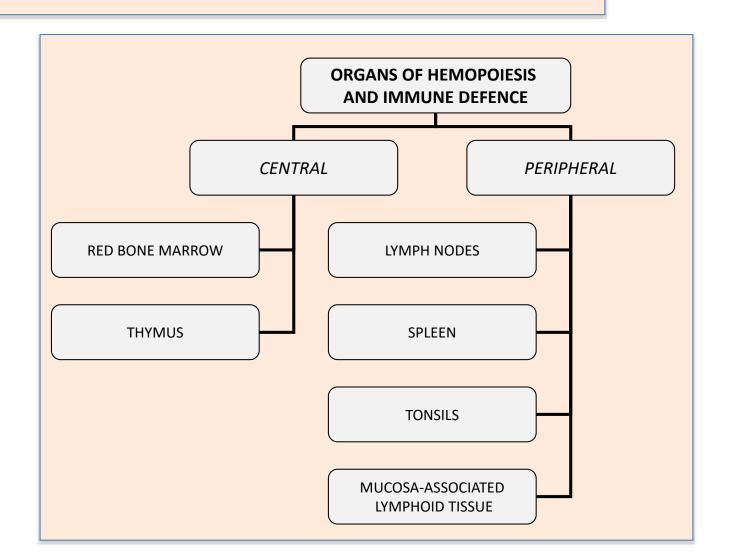
Department of Histology, Cytology and Embryology of the General Medicine Faculty

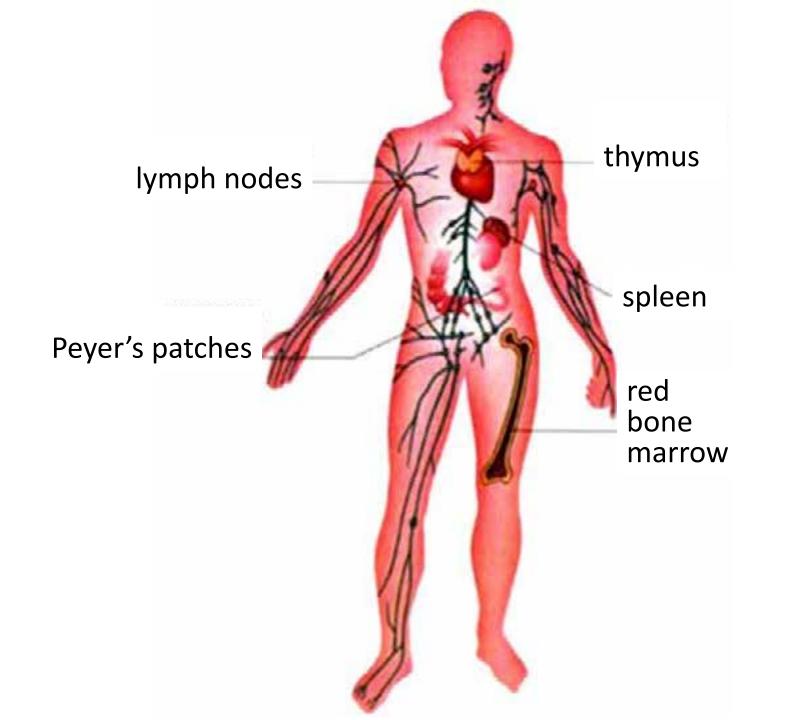
Pirogov Russian National Research Medical University



FUNCTIONS of organs of hemopoiesis and immune defence

- > Formation of blood cells
- > Immunological surveillance of host cells
- > Defence against microorganisms and foreign substances





HEMOPOIESIS

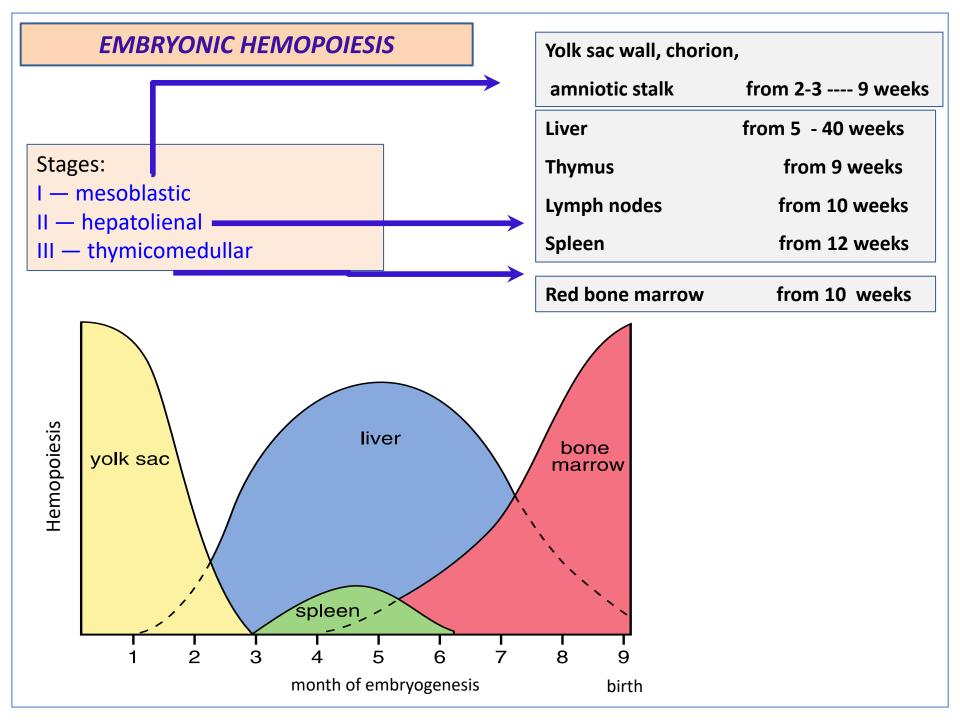
PRENATAL

POSTNATAL

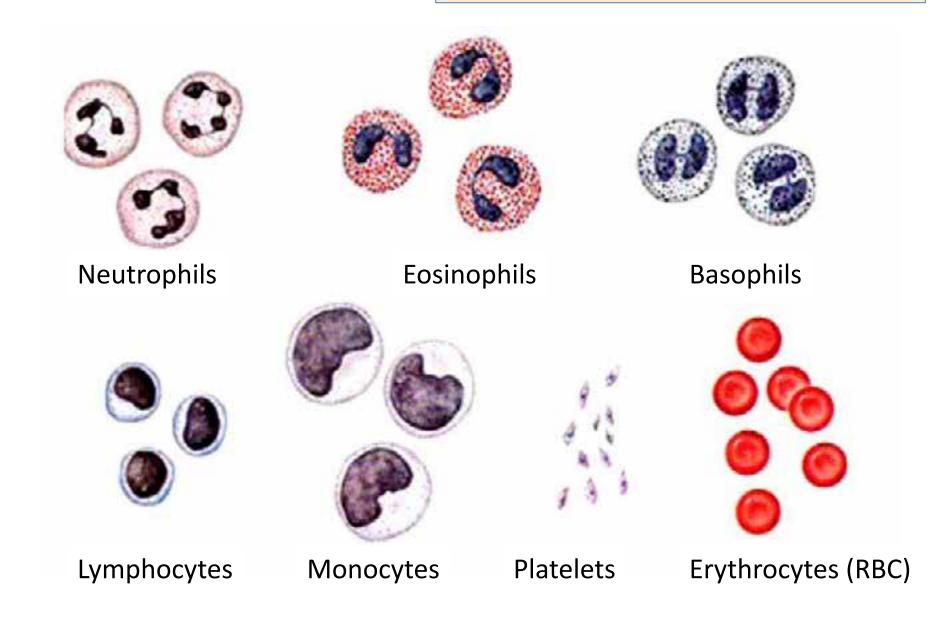
- > Histogenesis of blood as tissue
- > Blood regeneration
 - Renewal of blood cells
 - Replacement of blood cells

> Blood regeneration

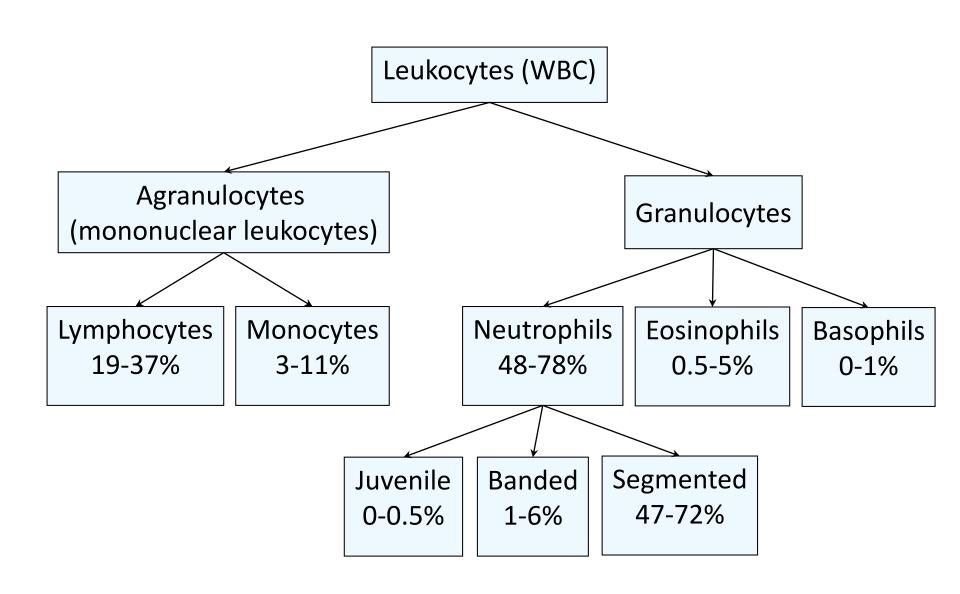
- Renewal of blood cells
- Replacement of blood cells



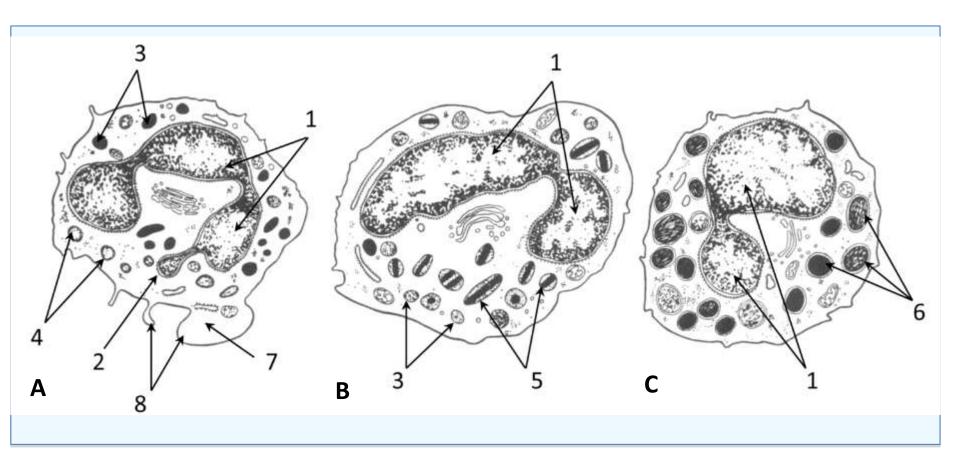
FORMED ELEMENTS OF THE BLOOD



WHITE BLOOD CELL COUNT DIFFERENTIAL



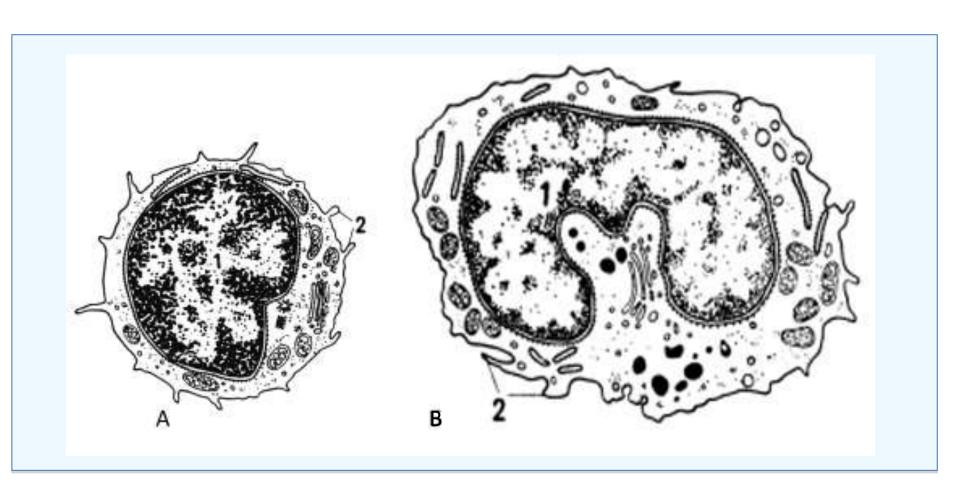
STRUCTURE OF GRANULOCYTES



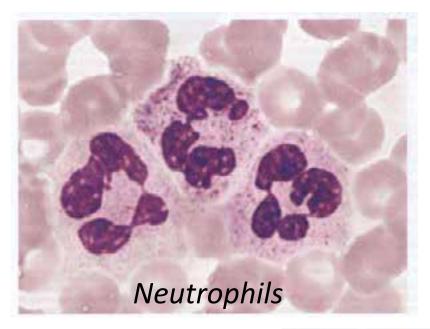
 $A-segmented\ neutrophil\ ("seg");\ B-eosinophil;\ C-basophil:$

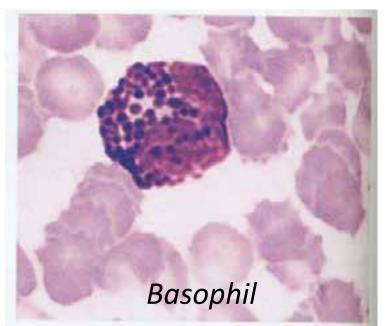
1 — segments of the nucleus; 2 — Barr body of the inactivated X chromosome (in females only); 3 — primary (asurophilic) granules; 4 — secondary (specific) granules; 5 — mature specific granules of the eosinophil, contain crystalloid; 6 — granules of the basophil, vary by size and density; 7 — peripheral zone that is free from organelles; 8 — microvilli and pseudopodia

STRUCTURE OF AGRANULOCYTES

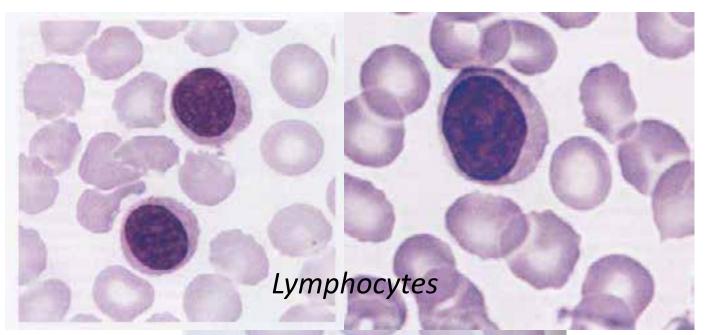


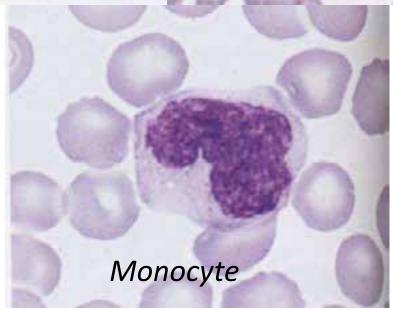
A — lymphocyte; B — monocyte: 1 —nucleus; 2 —microvilli and filopodia

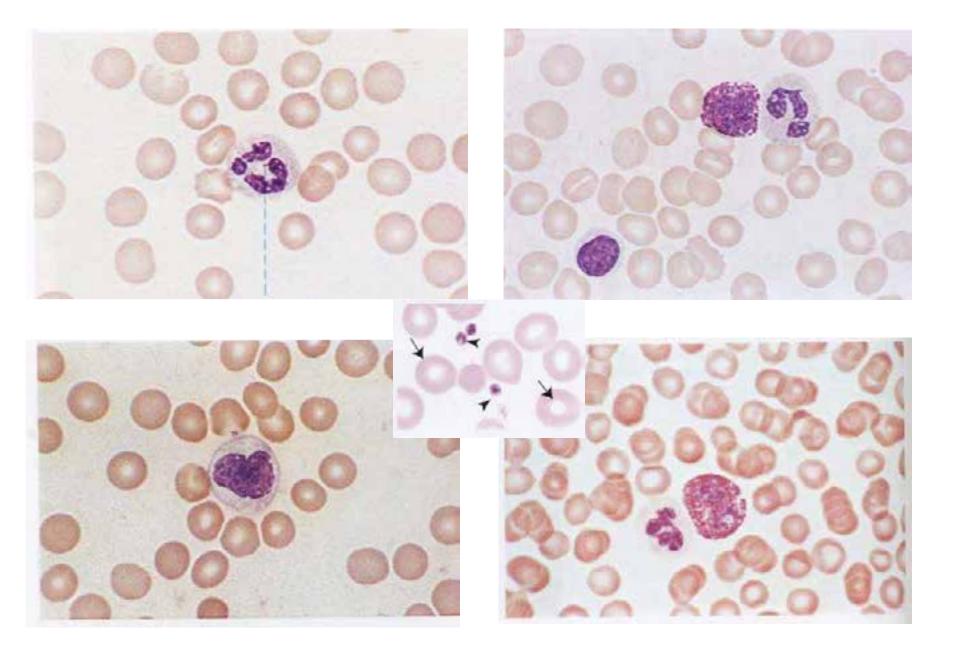


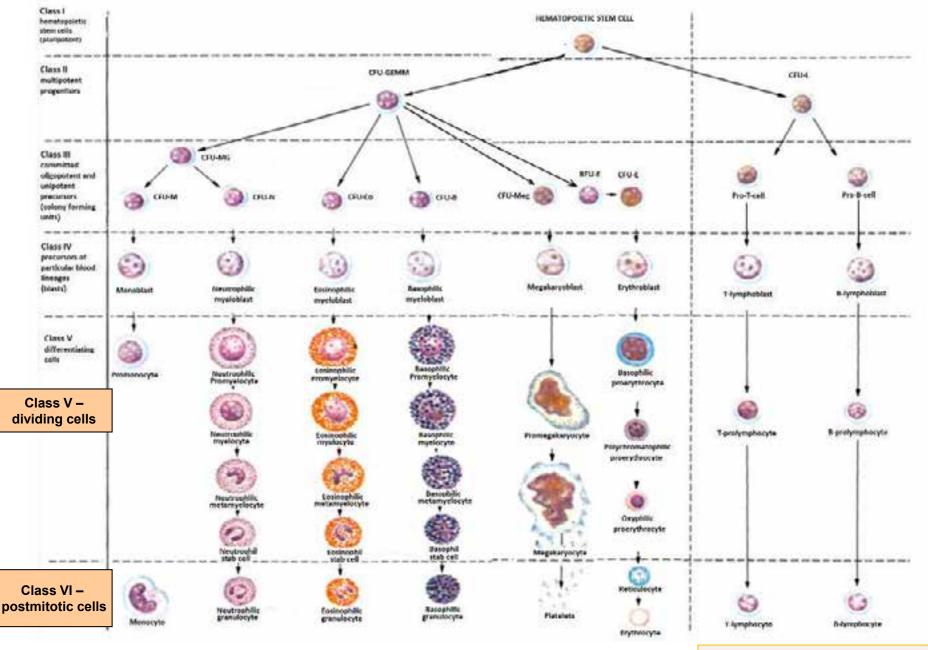






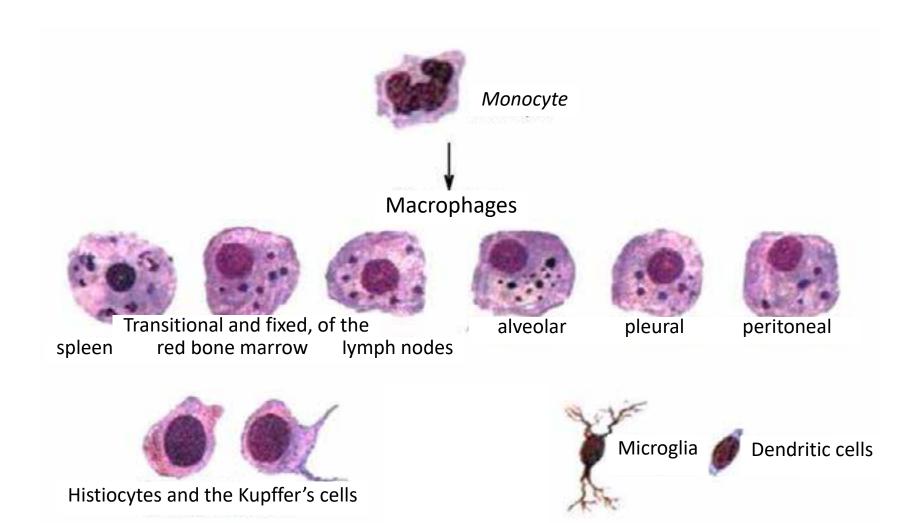


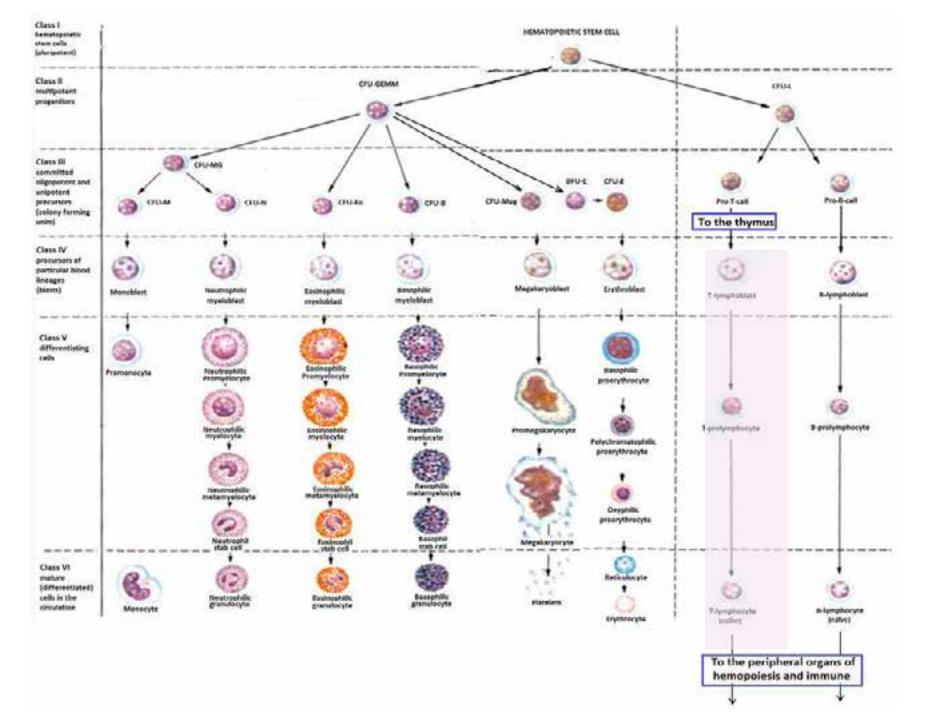


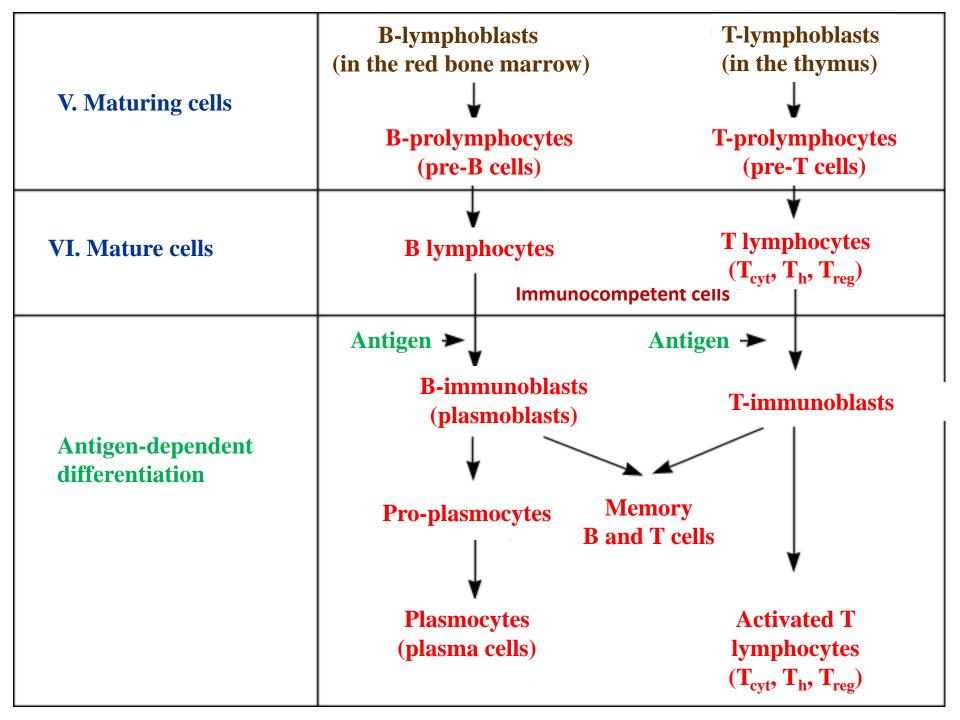


Complete differentiation inside tissues

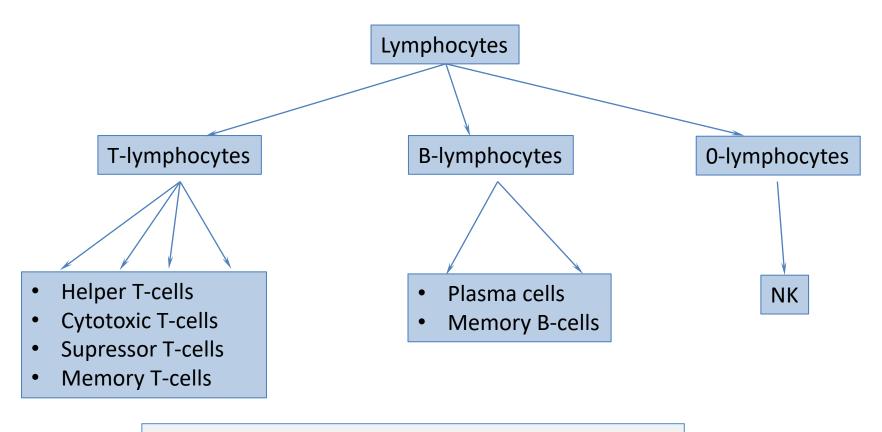
Complete differentiation in peripheral organs of hemopoiesis and immune defence







LYMPHOCYTE POPULATIONS



Percentage of lymphocyte types to the total number of lymphocytes in blood:

T-cells — 65—80 %,

B-cells -8-20%,

NK-cells — 5—20 %

LYMPHOCYTOPOIESIS IMMUNITY

Lymphocytes are the main cells of the immune system. They provide:

- humoral immunity (antibodies releasing)
- cell-mediated immunity (contact interaction with target cells)
- Regulation of the activity of other types of cells that are involved in immune response

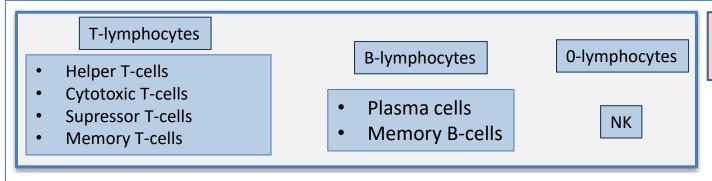
Humoral immunity –

neutralization and destruction of foreign agents/substances

Reaction : Antigen-Antibody

Cell-mediated immunity -

destruction of damaged host cells and foreign cells Reaction: damaged host cell/foreign cell-cytotoxic T-cell



FUNCTIONS OF LYMPHOCYTES

Cytotoxic (CD8+) T-cells — destroy virus-infected cells, tumor cells etc. — cell-mediated immunity reactions

Helper (CD4+) T-cells — when activated, synthesize and secrete cytokines (IL-1, IL-2, IL-4, IL-5, IL-6), regulate (stimulate) the intensity of the immune response

Supressor T-cells (regulatory T-cells) — regulate the intensity of the immune response by suppressing the activity of helper T-cells; prevent the development of autoimmune reactions; protect the body from the undesirable consequences of the immune response, from excessive inflammation and auto-aggression

Plasma cells – synthesize antibodies that interact with soluble antigens, participate in the opsonization of foreign microorganisms, etc. – **humoral immunity reactions**

Memory T- and B-cells – provide a rapid immune response upon repeated invading of the antigen

NK cells — destruction of self cells that are inaccessible to the action of cytotoxic T-cells

Stages of T-cell and B-cell lymphopoiesis:

LYMPHOCYTOPOIESIS

- 1. **Medullary stage** first three classes
- 2. Antigen-independent differentiation stage
 - ✓ in the central organs immunogenesis (classes 4, 5 and 6)
 - Red bone marrow for B-lymphopoiesis
 - Thymus for T-lymphopoiesis
 - without encountering a foreign antigen
 - gene rearrangement occurs
 - T- and B-cell receptors and other receptors are formed

IMMUNOCYTOPOIESIS

3. Antigen-dependent differentiation stage

- √ in peripheral lymphoid organs
 - encounter with a foreign antigen occurs
 - activation, blast transformation, proliferation
 - completion of differentiation

HEMATOPOIETIC COMPONENT

Developing blood cells

MYELOID TISSUE:

- -erythrocytes,
- -platelets,
- -granulocytes,
- -monocytes

IYMPHOID TISSUF

-lymphocytes

ORGANS OF HEMOPOIESIS STRUCTURE

STROMAL COMPONENT

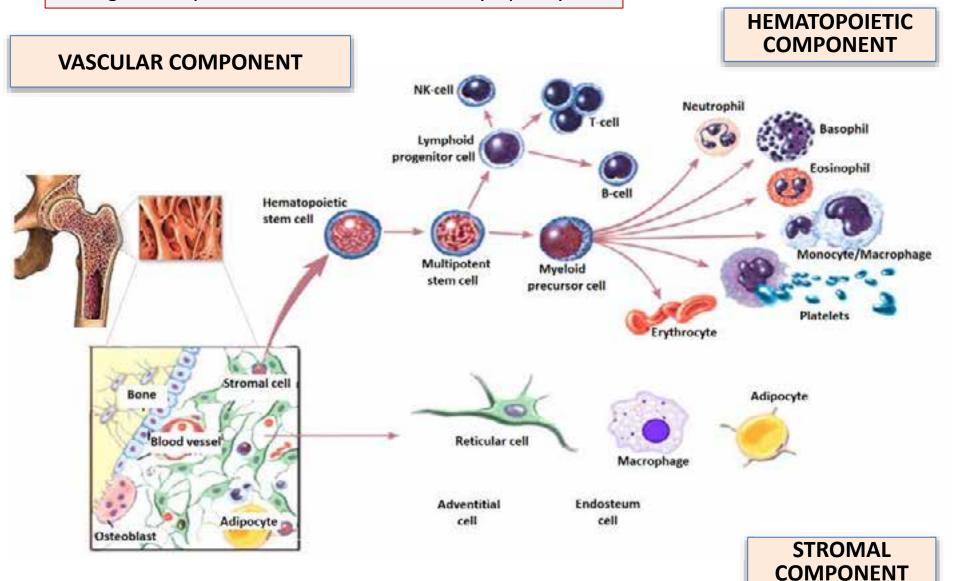
- Loose connective tissue
- macrophages
- antigen presenting cells
- adipocytes
- reticular tissue(epithelioreticular tissue thymus)

VASCULAR COMPONENT

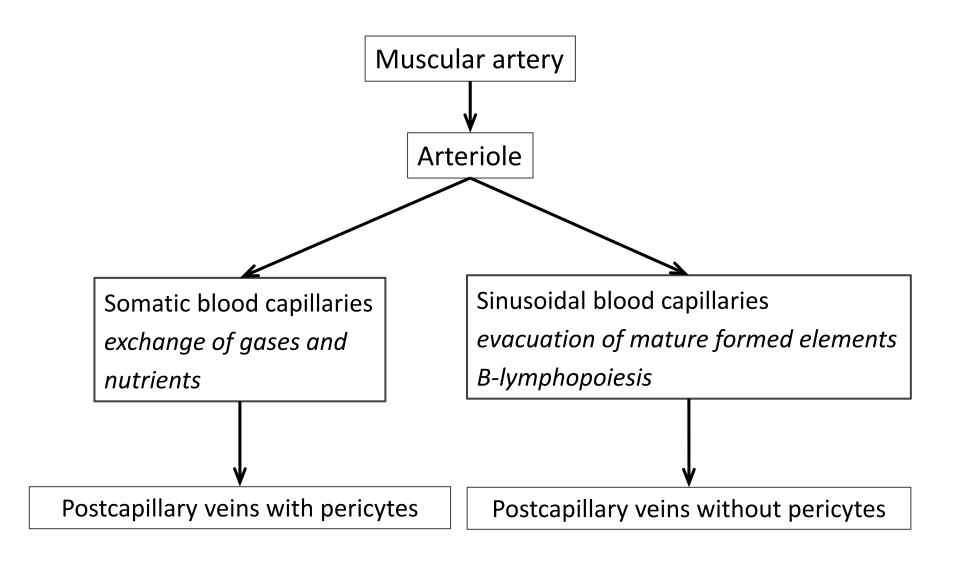
- -blood vessels (arteries and veins)
- -somatic type hemocapillaries
- -sinusoidal type hemocapillaries
- -venous sinuses (postcapillary venules)
- -postcapillary venules with high endothelium

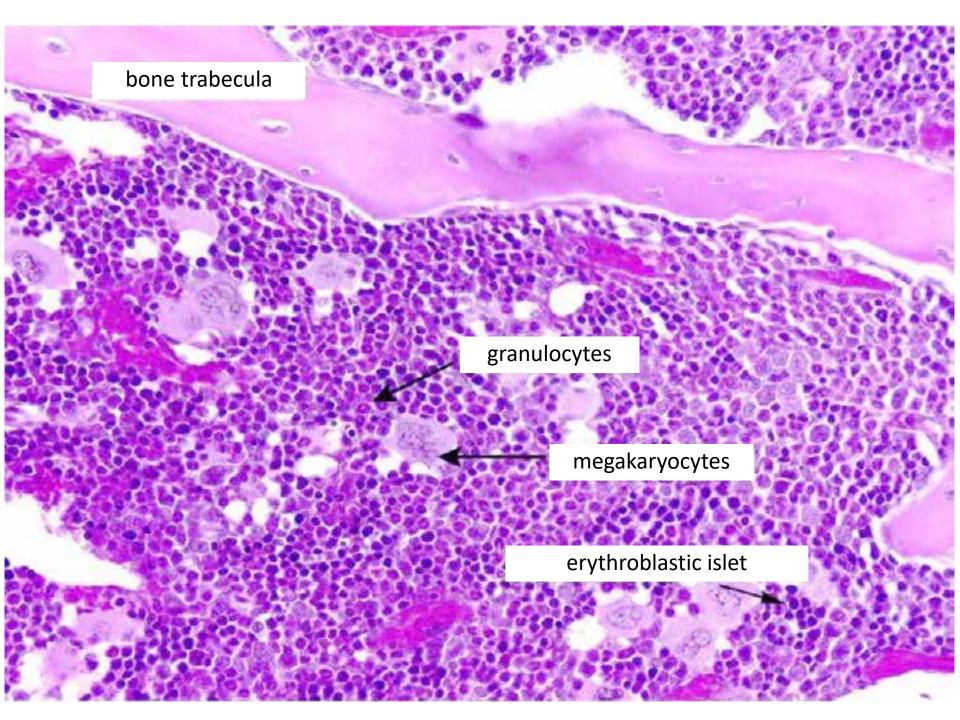
RED BONE MARROW

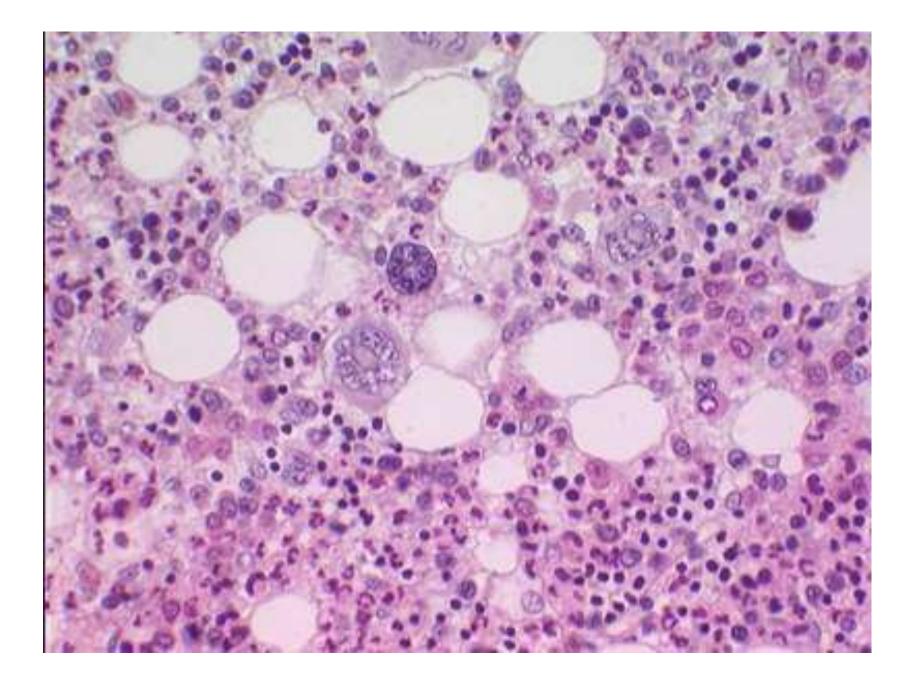
- formation of blood cells
- antigen-independent differentiation of B-lymphocytes



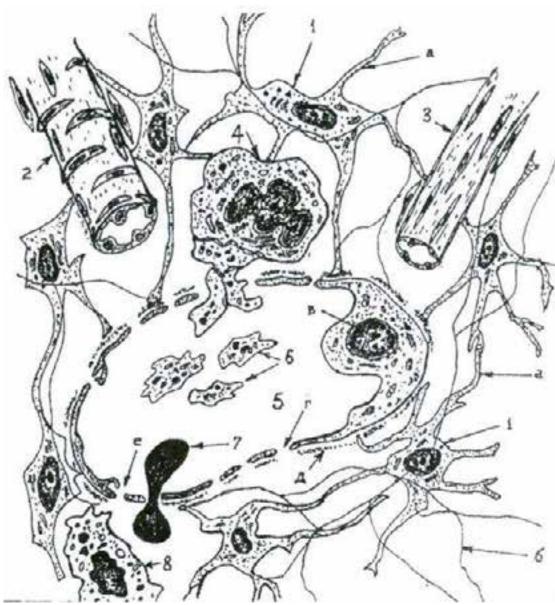
VASCULAR SYSTEM OF THE RED BONE MARROW







BLOOD-TISSUE BARRIER OF THE RED BONE MARROW



1- reticular cells

(a- processes,

б- reticular fibers)

2- precapillary arteriole,

3- postcapillary venule,

4- megakaryocyte

5- sinusoidal capillary

(B- endothelial cell nucleus,

г- migration pores,

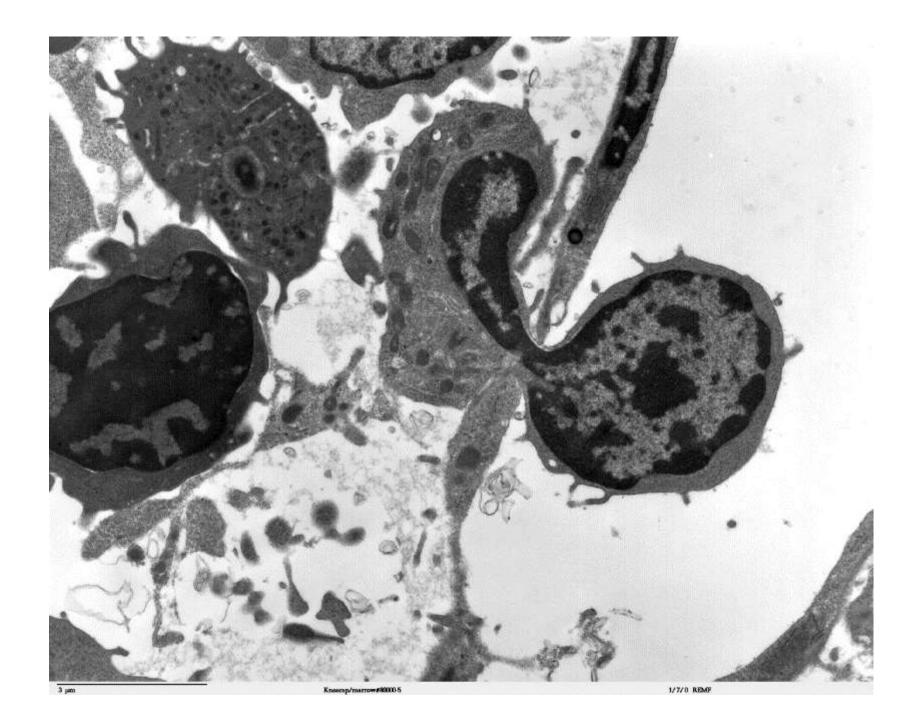
д- discontinuous

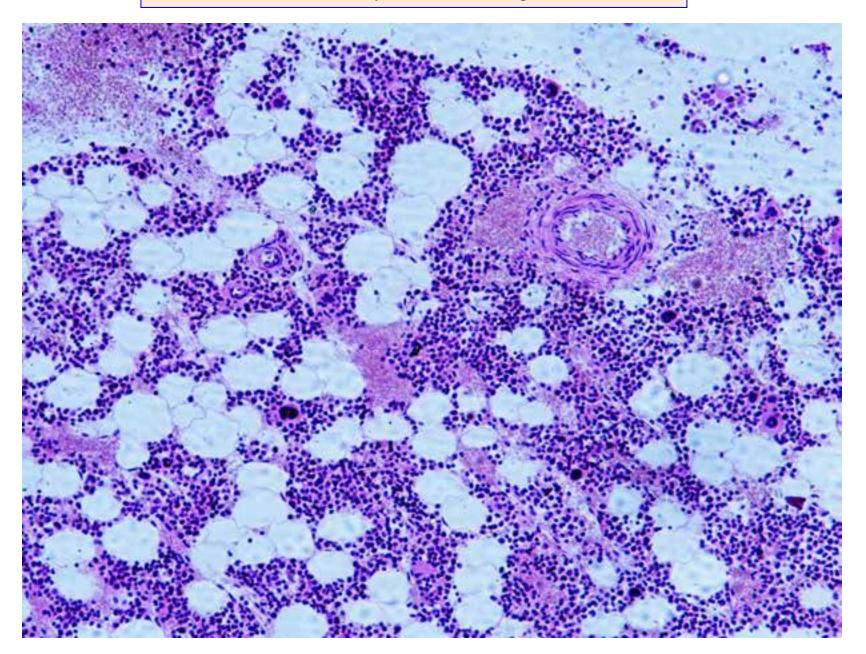
basement membrane)

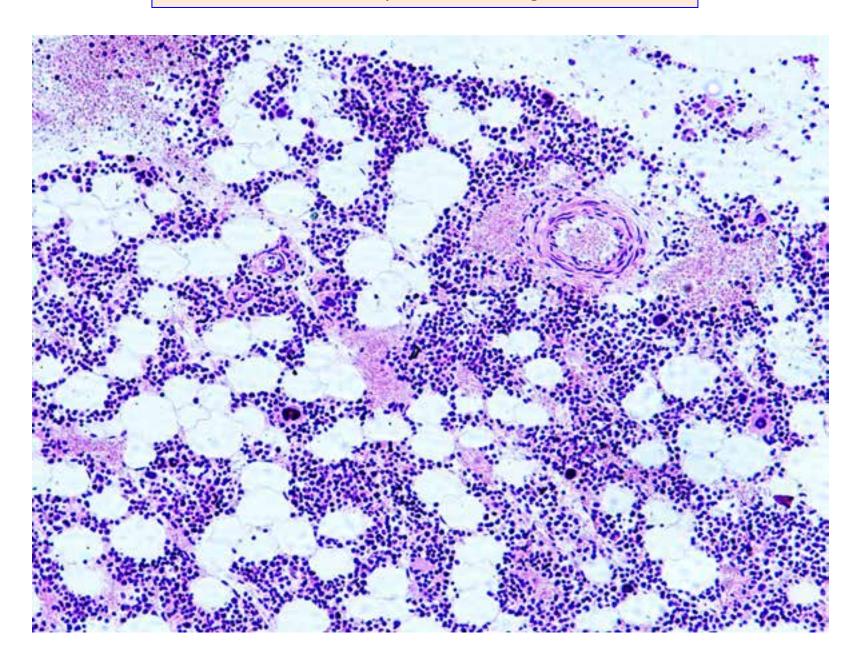
6- blood platelets

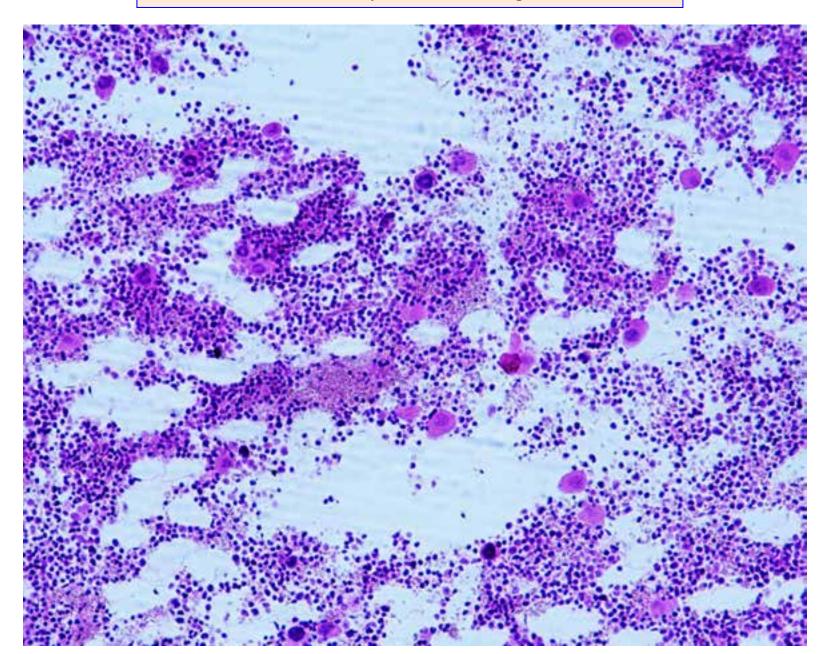
7- erythrocyte

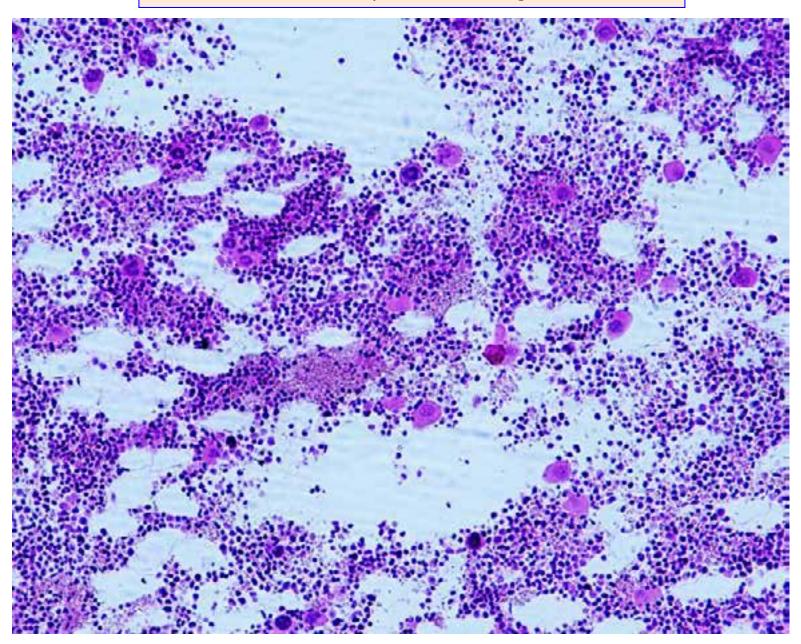
8- macrophage

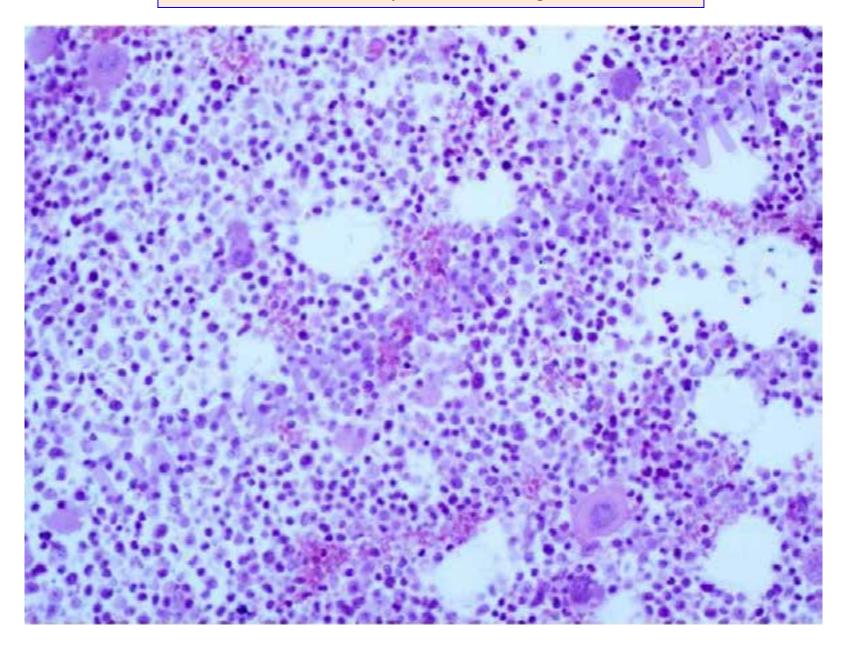


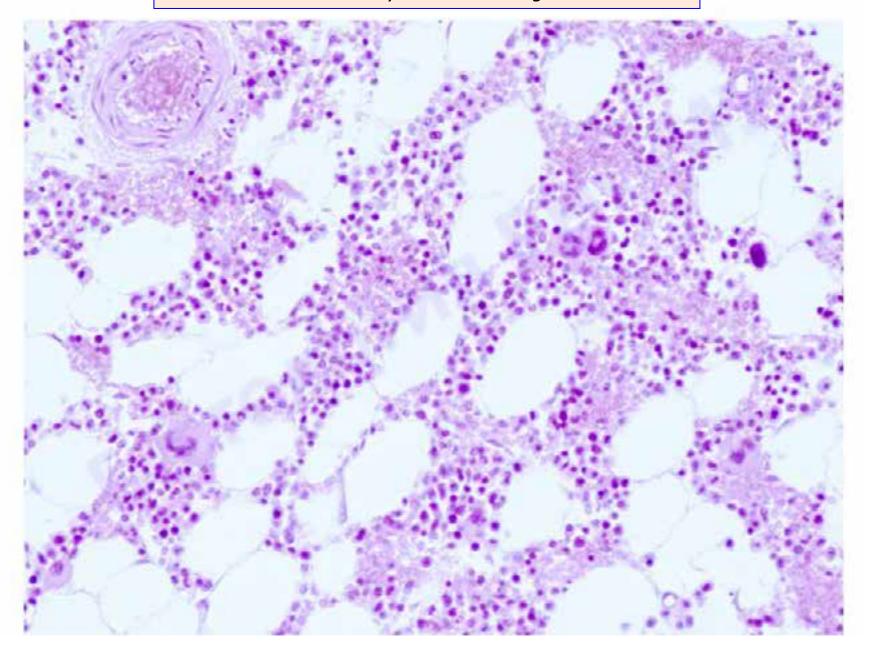


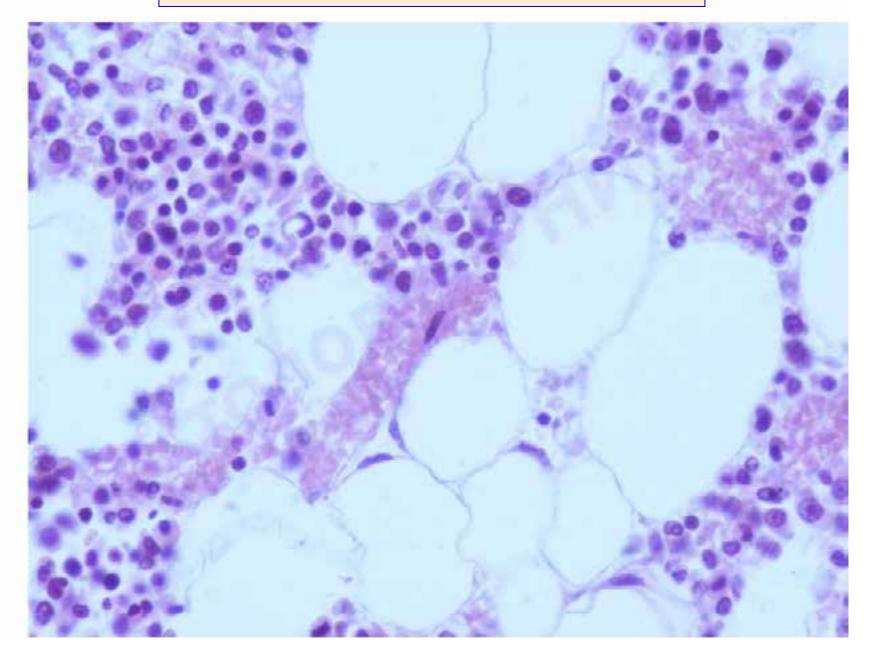


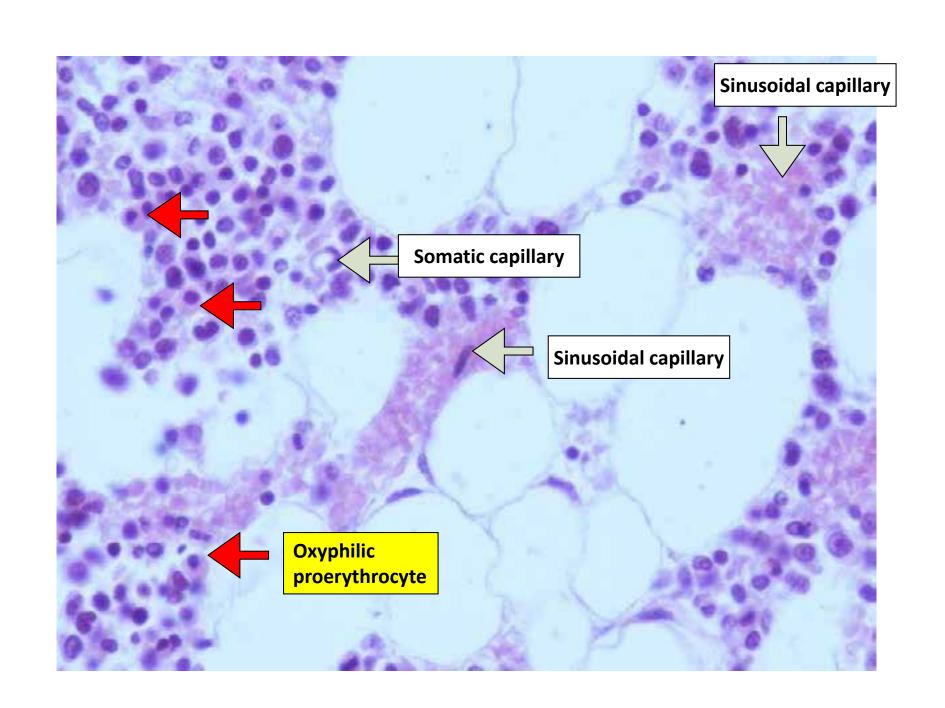


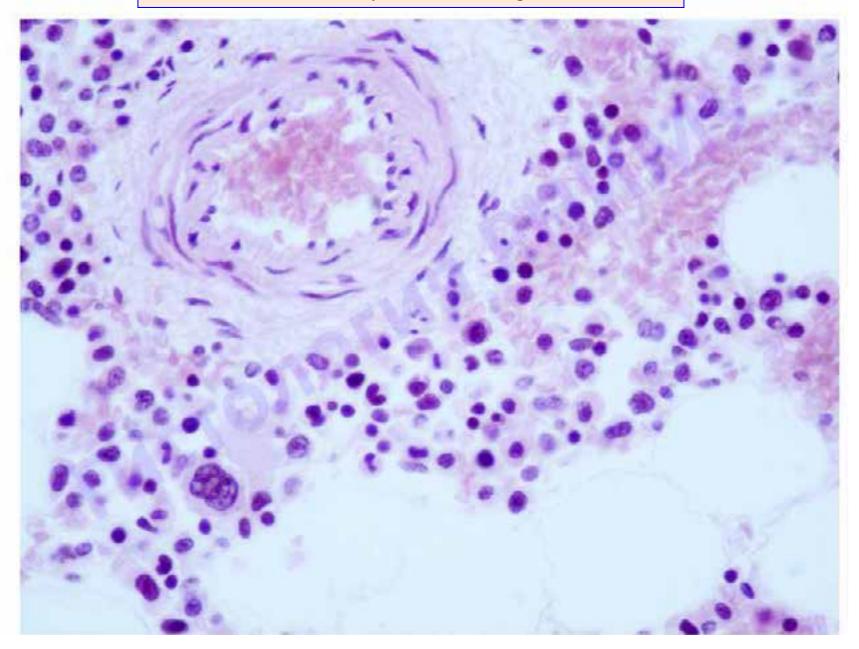


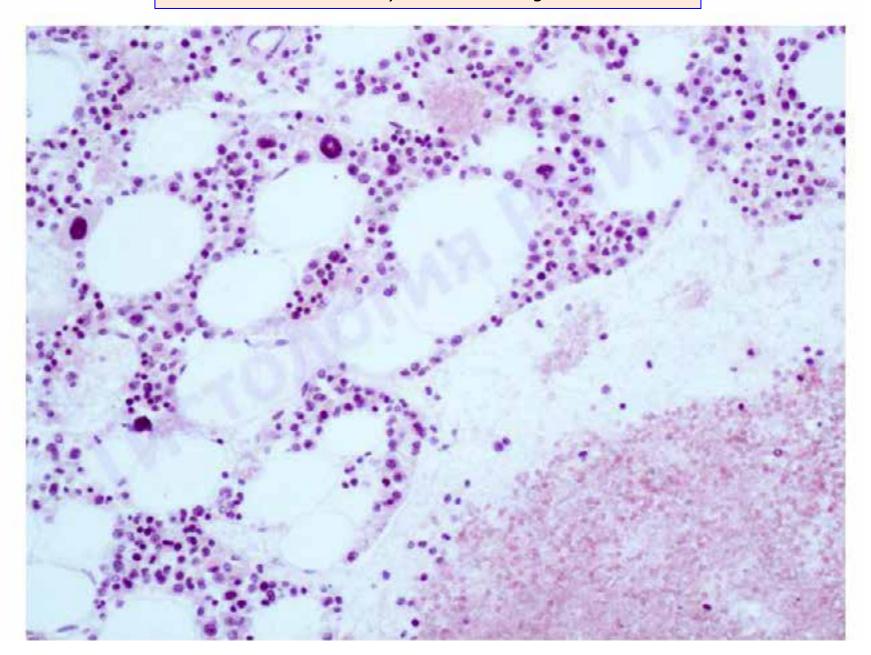


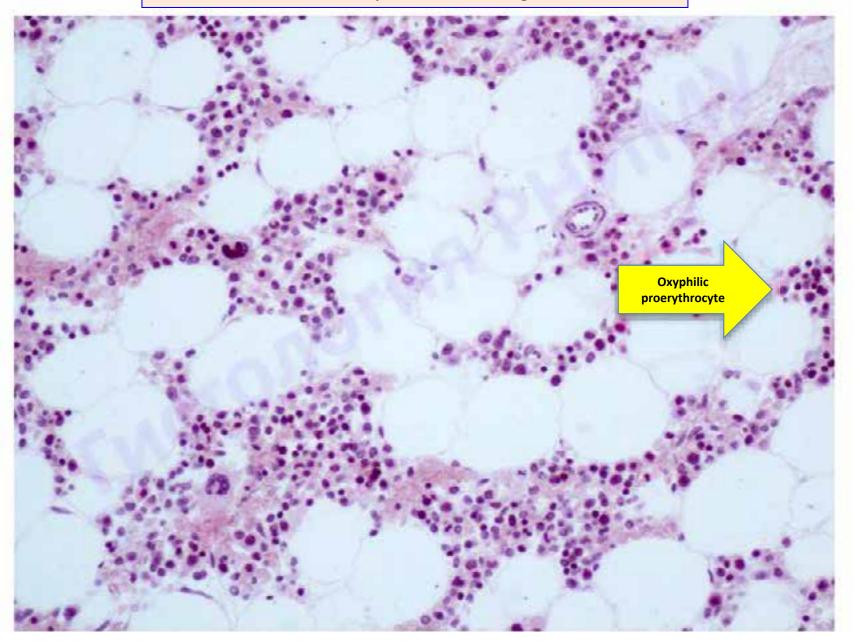


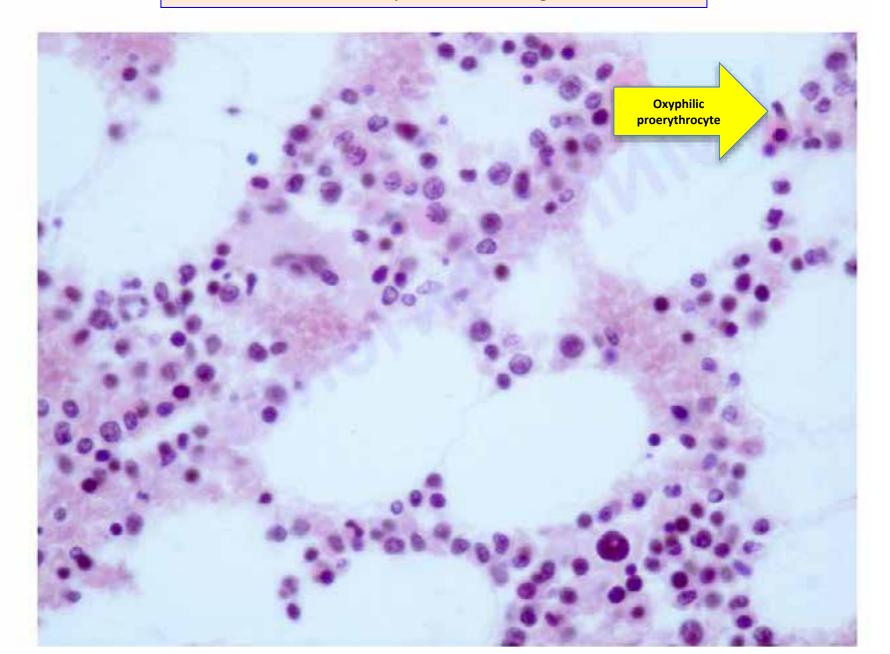


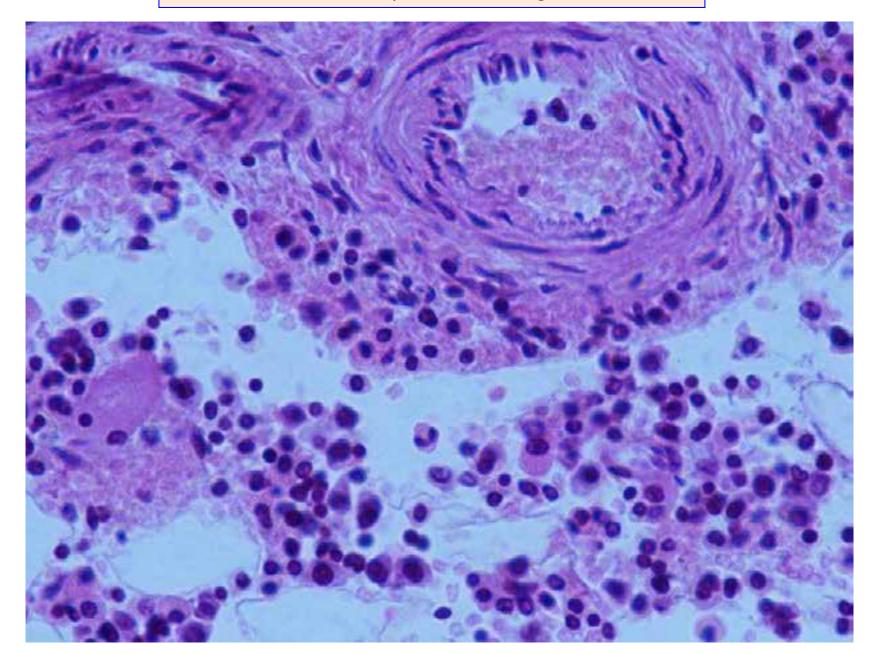


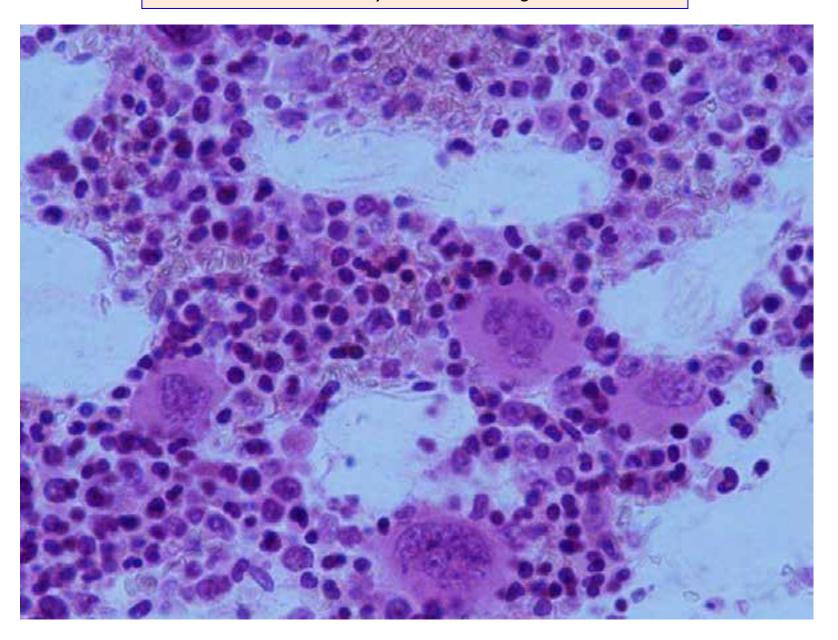


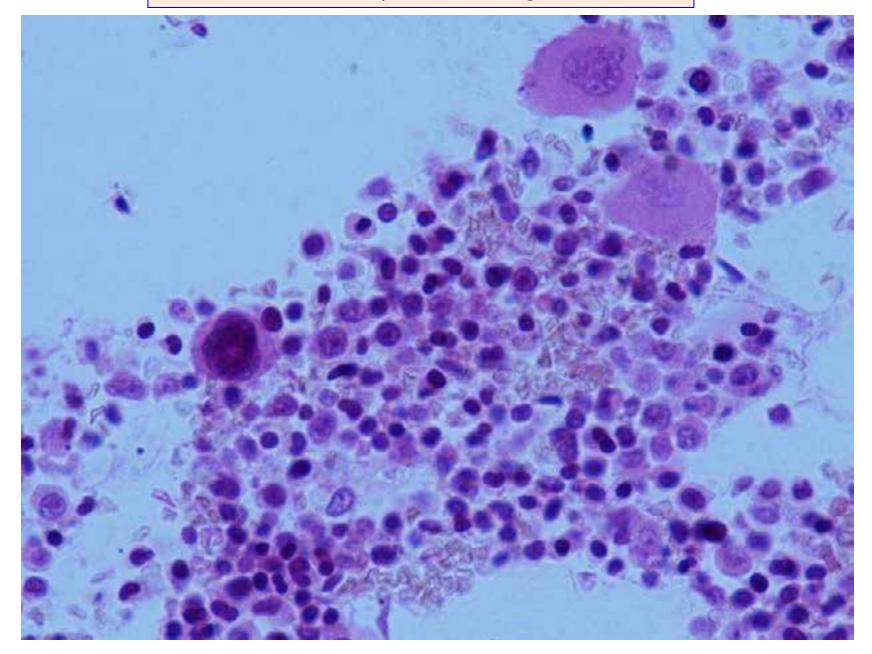


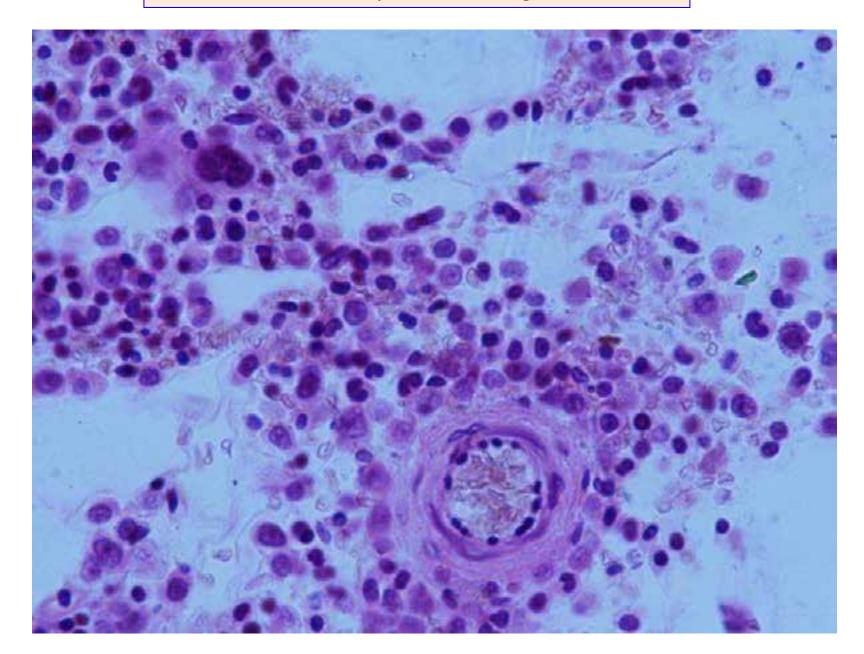


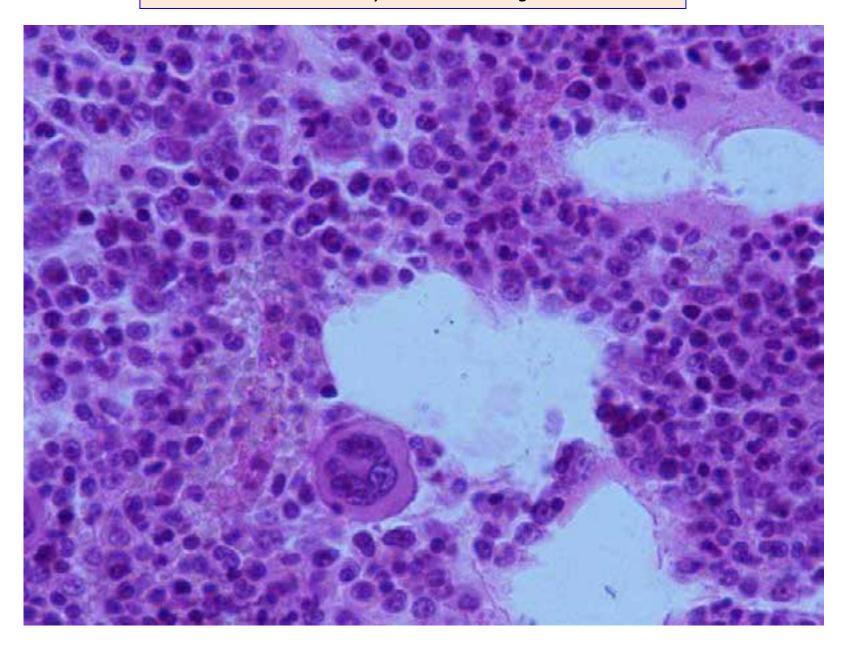


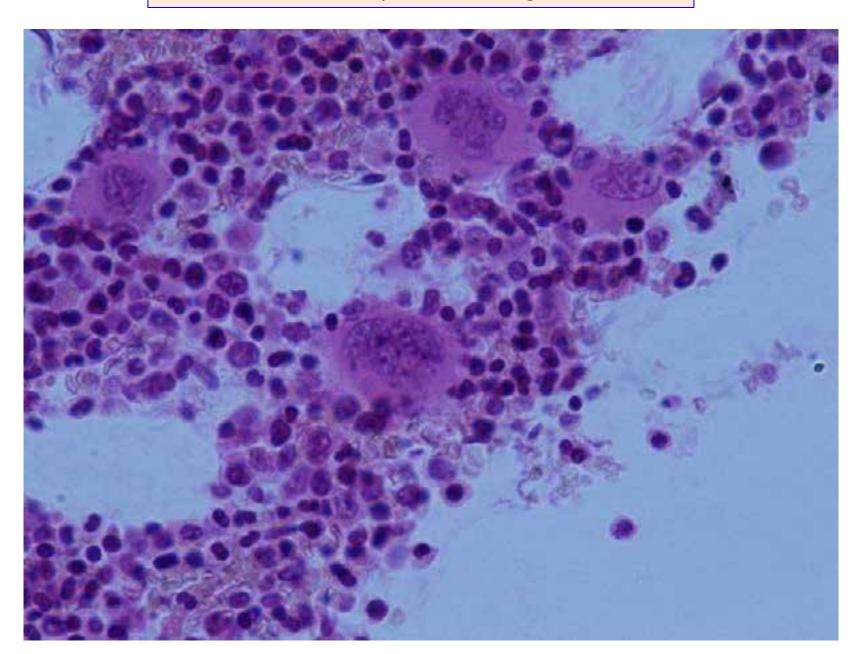




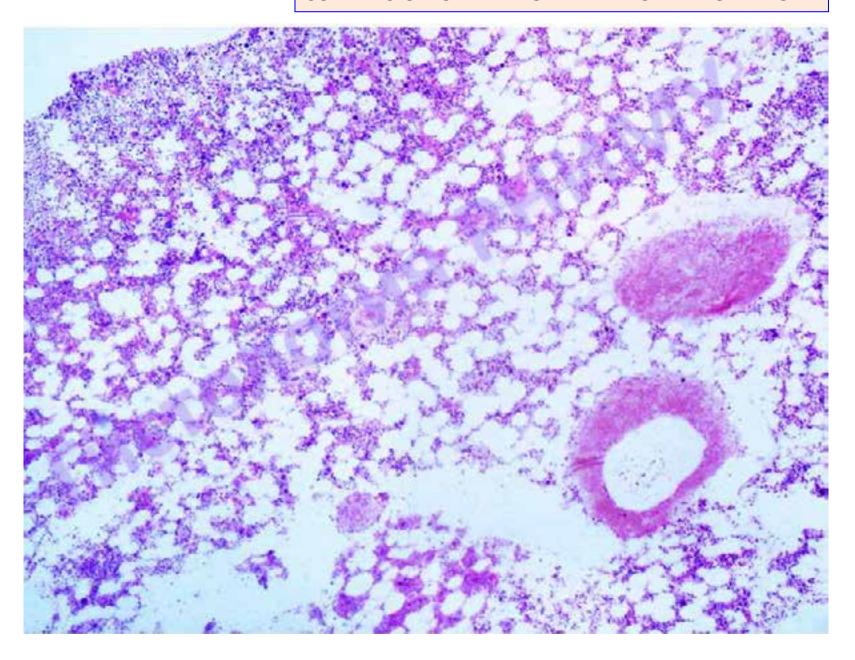




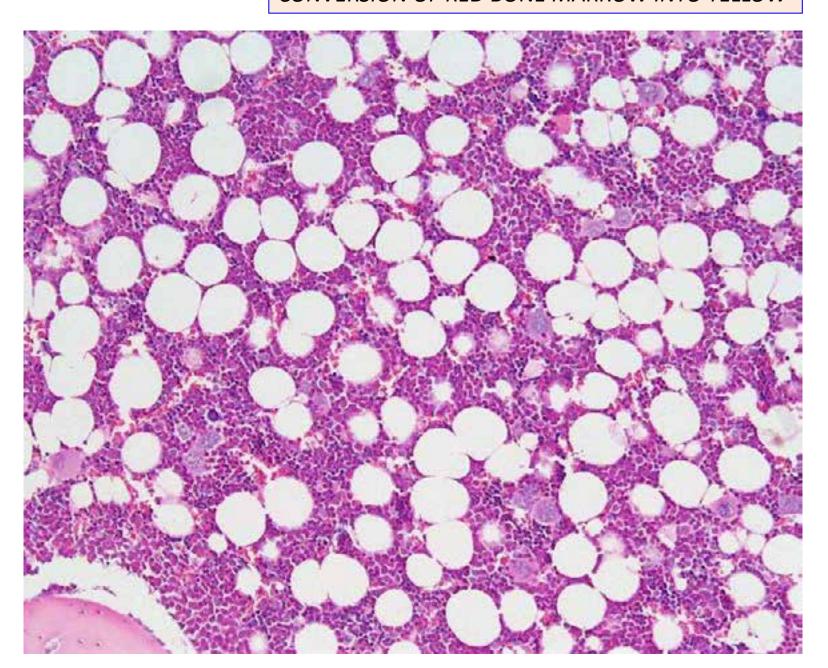




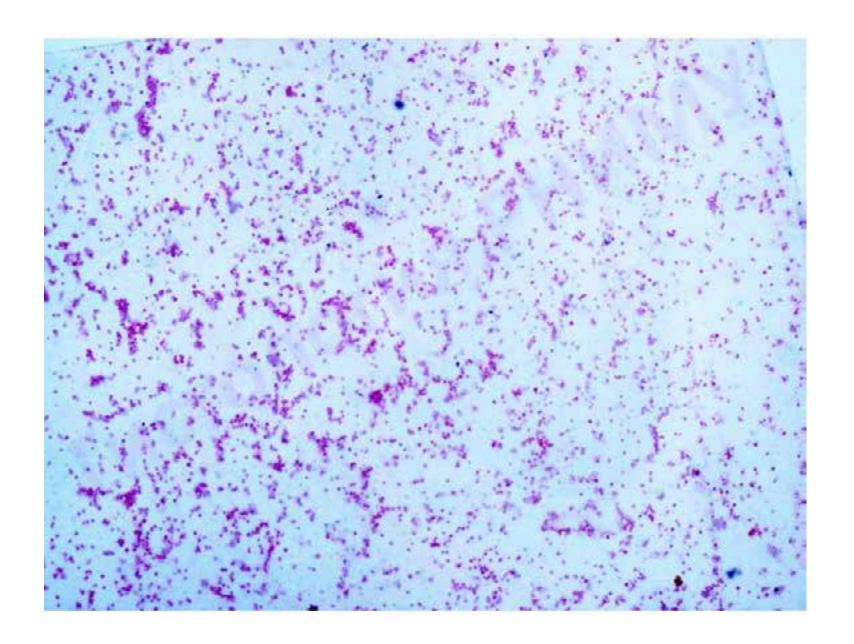
CONVERSION OF RED BONE MARROW INTO YELLOW



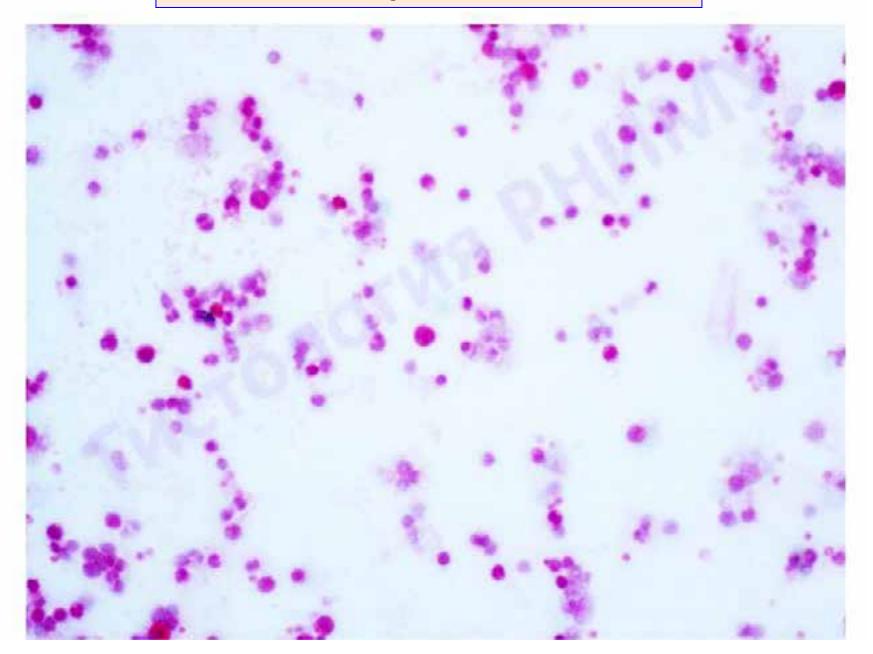
CONVERSION OF RED BONE MARROW INTO YELLOW



Slide №116. Smear of the red bone marrow staining Azur II – eosin



Slide №116. Smear of the red bone marrow staining Azur II – eosin



CENTRAL ORGANS OF HEMOPOIESIS

Antigen-independent differentiation and proliferation of T and B cells (exposure to antigens is excluded)

- 1 red bone marrow (in the cancellous portions of the flat bones and the epiphyses of the long bones; in children and adolescents also in the diaphyses)
- 2 thymus

PERIPHERAL ORGANS OF HEMOPOIESIS

Antigen-dependent differentiation and proliferation of T and B cells (is possible only after stimulation with an antigen)

- 1 mucosa-associated lymphoid tissue (*including the tonsils, the appendix, Peyer's patches, BALT etc.*)
- 2 lymph nodes
- 3 spleen

DEVELOPMENT OF THE THYMUS

PHARYNGEAL GUT EPITHELIUM

EPITHELIAL CORDS
ANTERIOR TO THE GUT

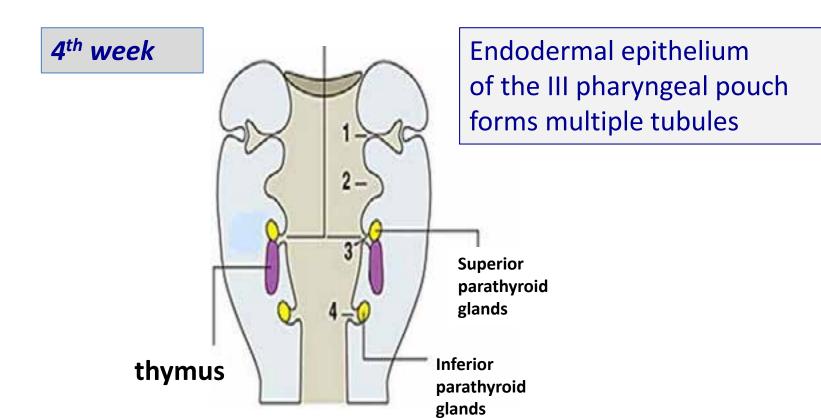
EPITHELIAL STROMA
OF THE THYMUS

T CELL PRECURSORS ARRIVE FROM THE RED BONE MARROW

THEY FORM CELL COLONIES
IN THE PRIMORDIAL THYMUS

LYMPHOID TISSUE OF THE THYMUS

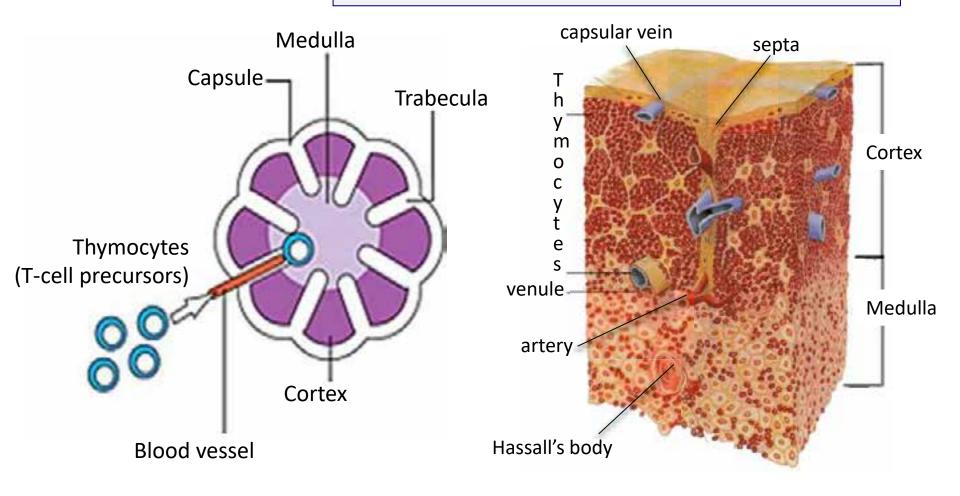
DEVELOPMENT OF THE THYMUS



7th week

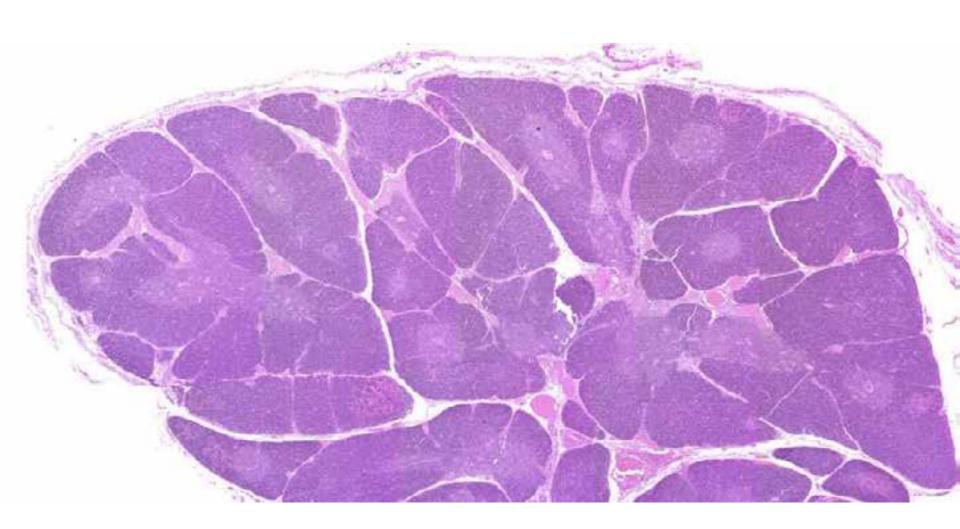
Epithelial tubular cords become submerged by the underlying mesenchyme 14th week

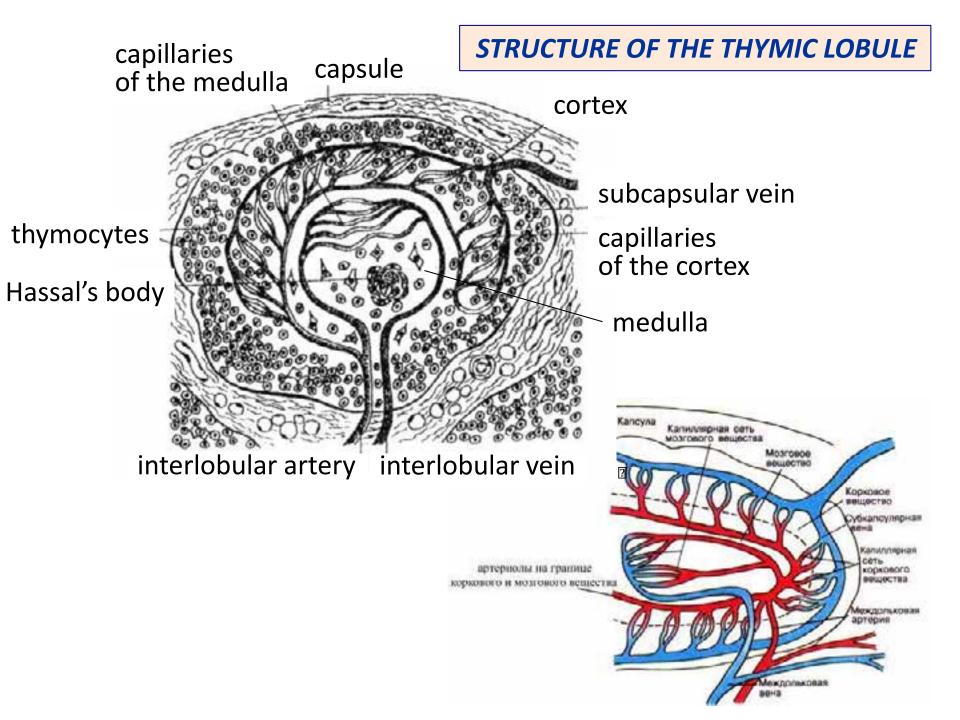
T cell precursors colonize the epithelial stroma of the thymus

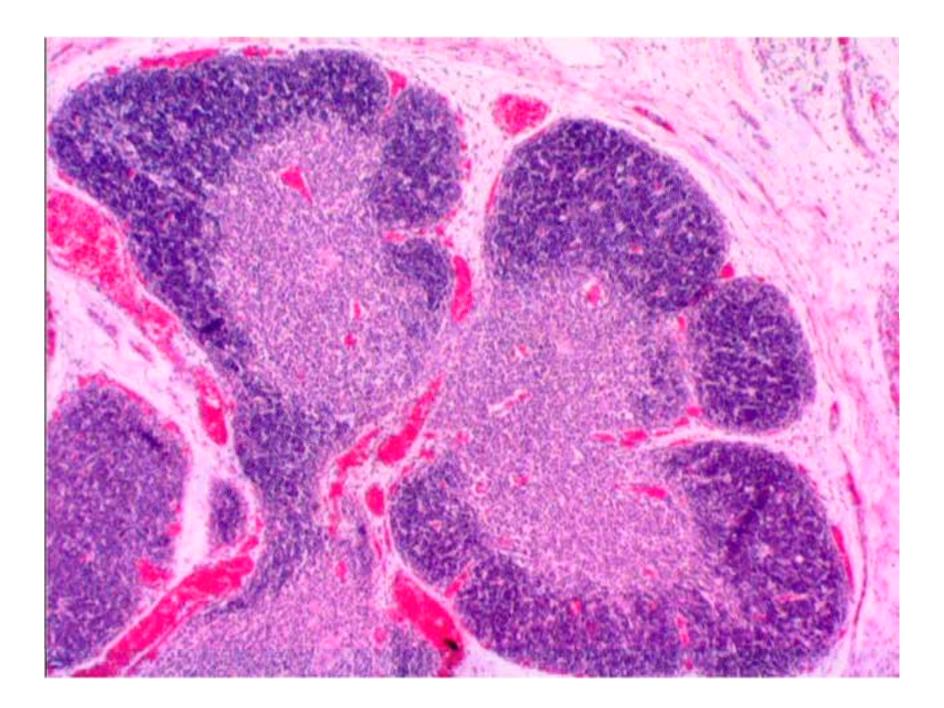


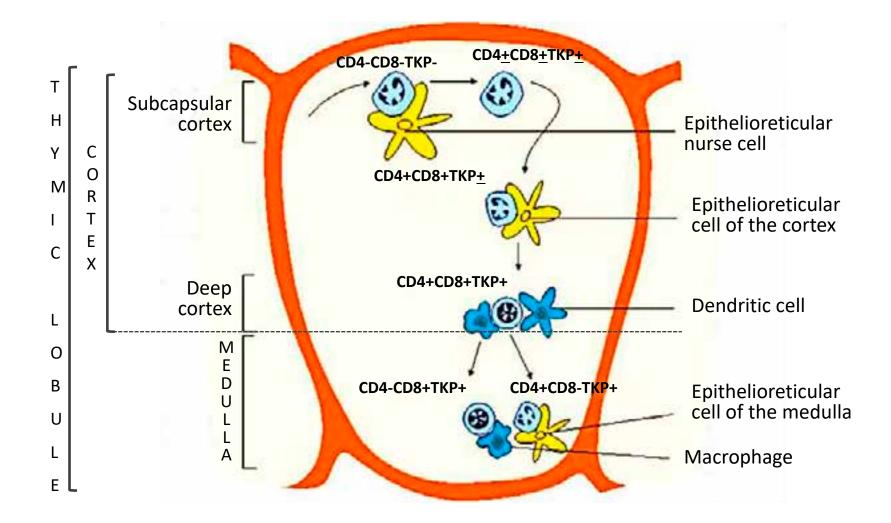
17th week

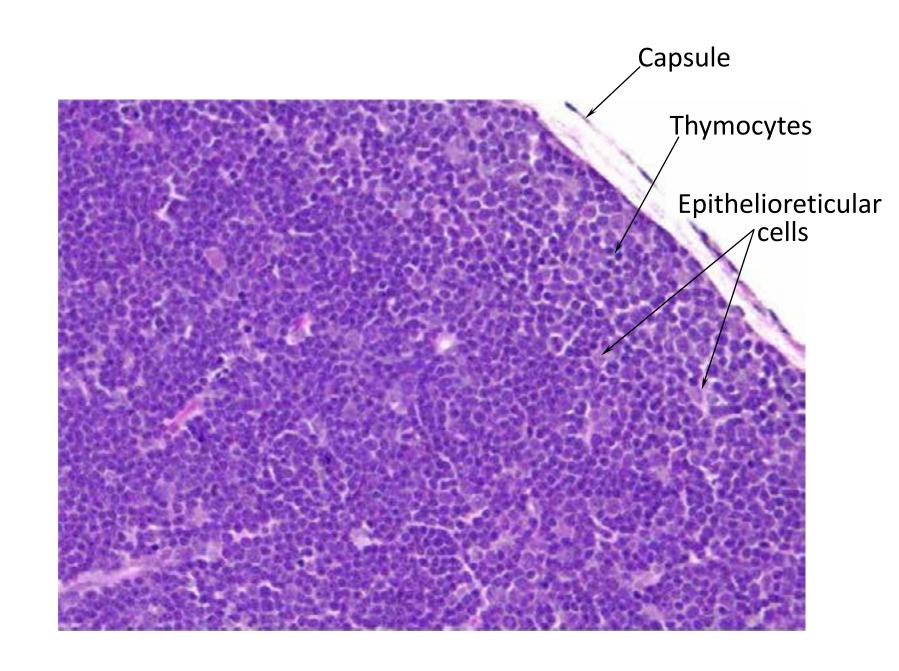
Beginning of T cell production

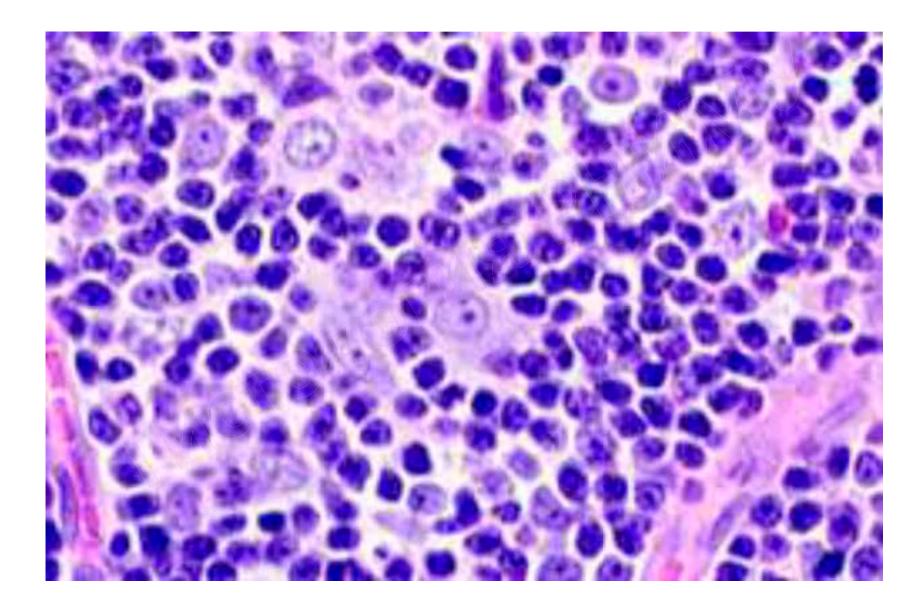


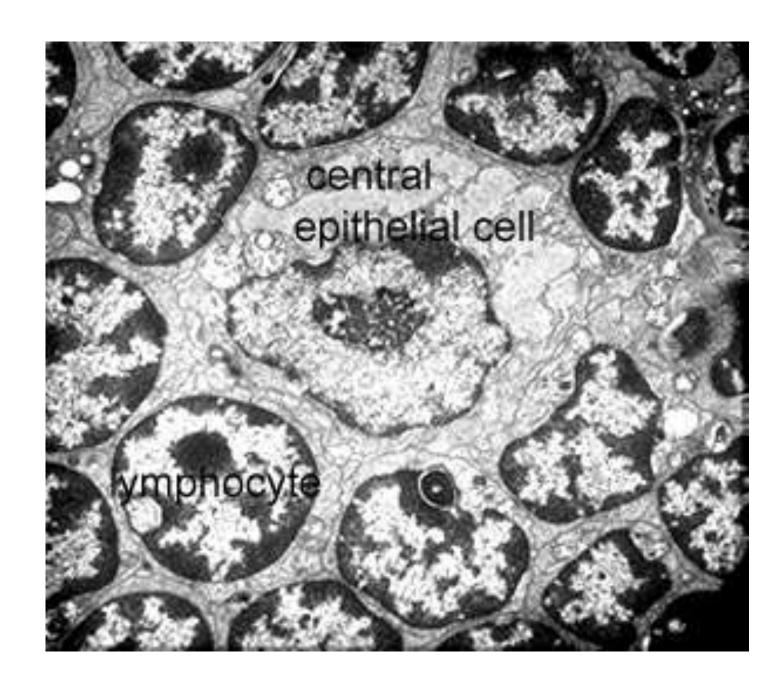








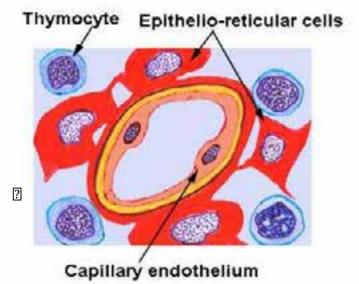


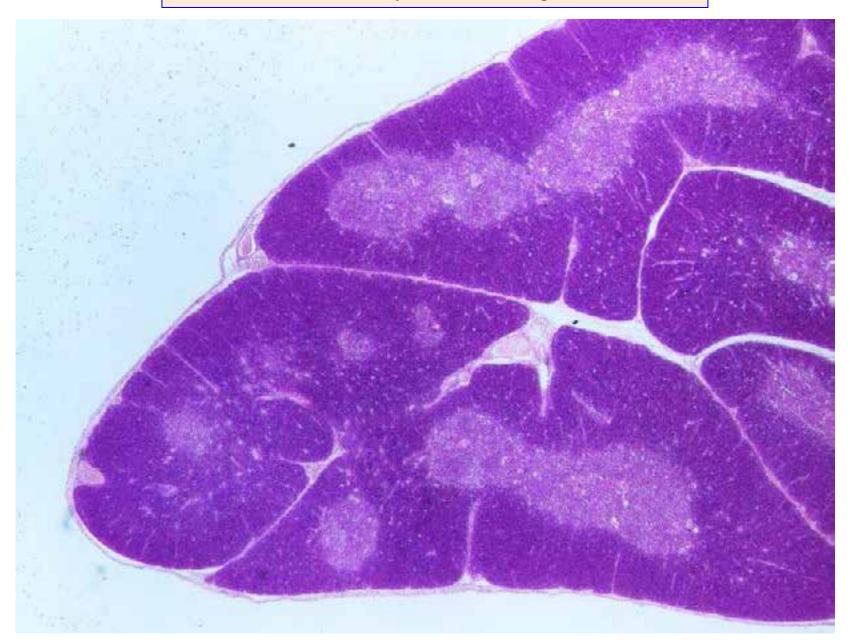


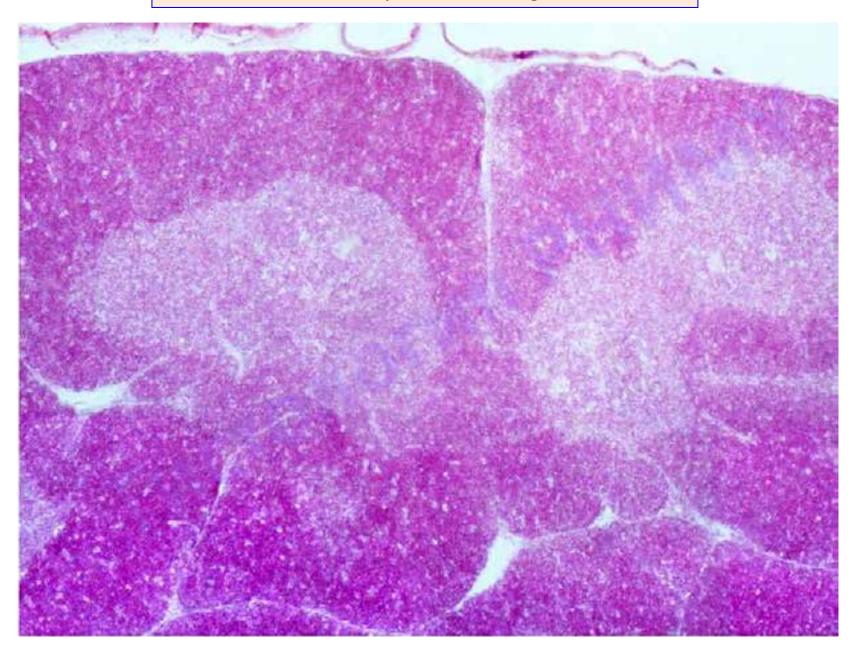
BLOOD-THYMUS BARRIER

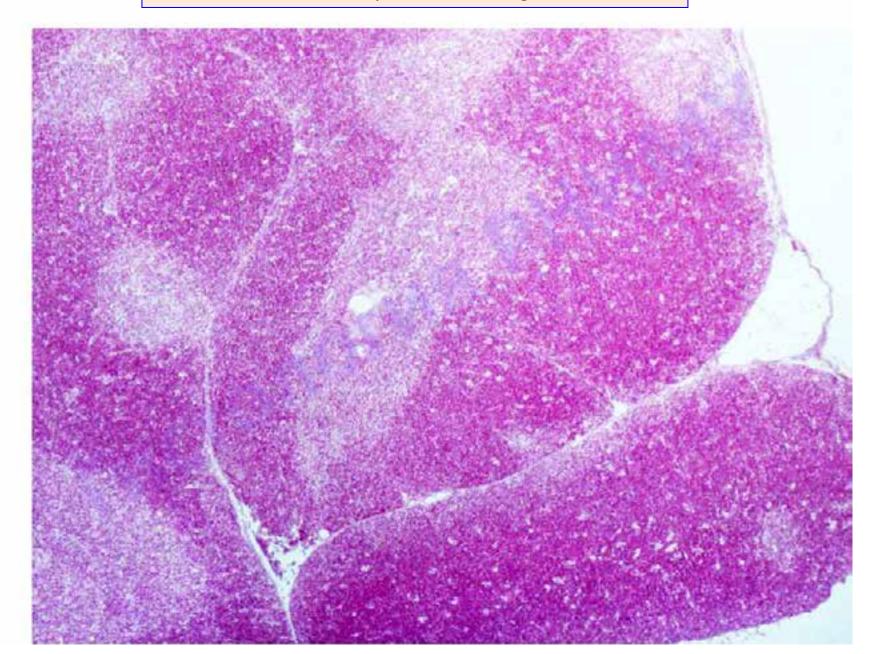


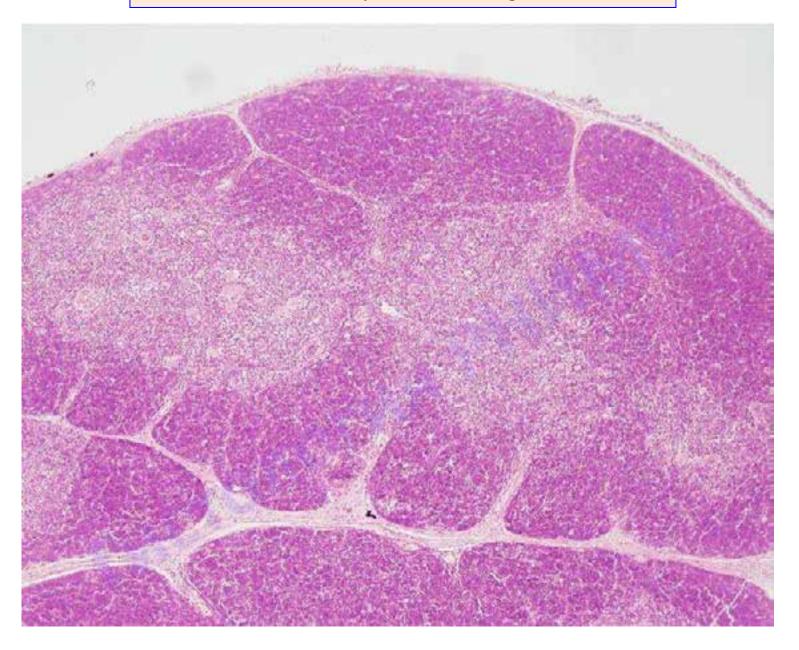
- 1- capillary of somatic type,
- 2- endothelial cell,
- 3- pericyte,
- 4- basement membrane of the capillary,
- 5- perivascular space,
- 6- macrophage,
- 7- basement membrane
- of the epithelioreticular cells,
- 8- epithelioreticular cells,
- 9- cell junctions
- (a: tight junctions; b: desmosomes),
- 10- thymocytes

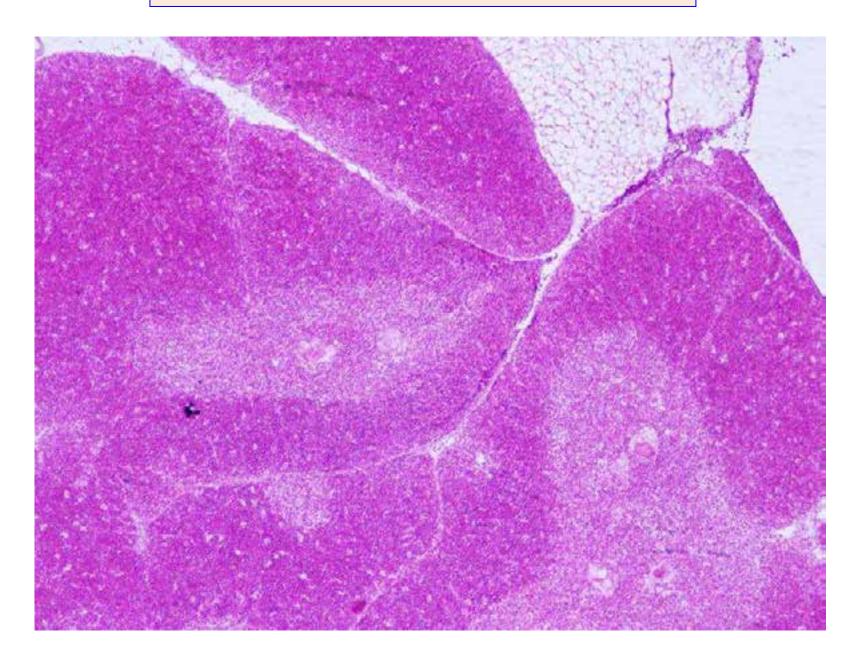


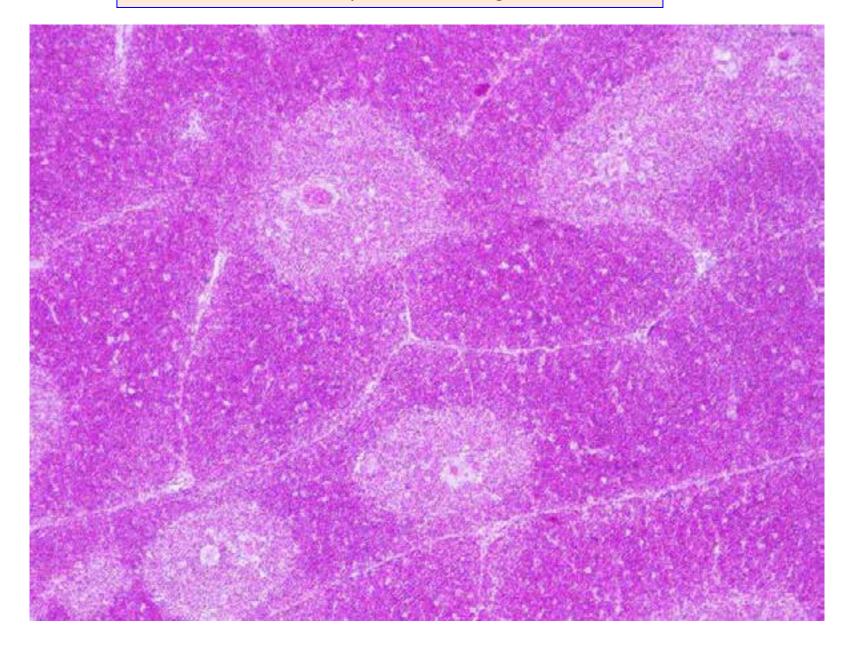


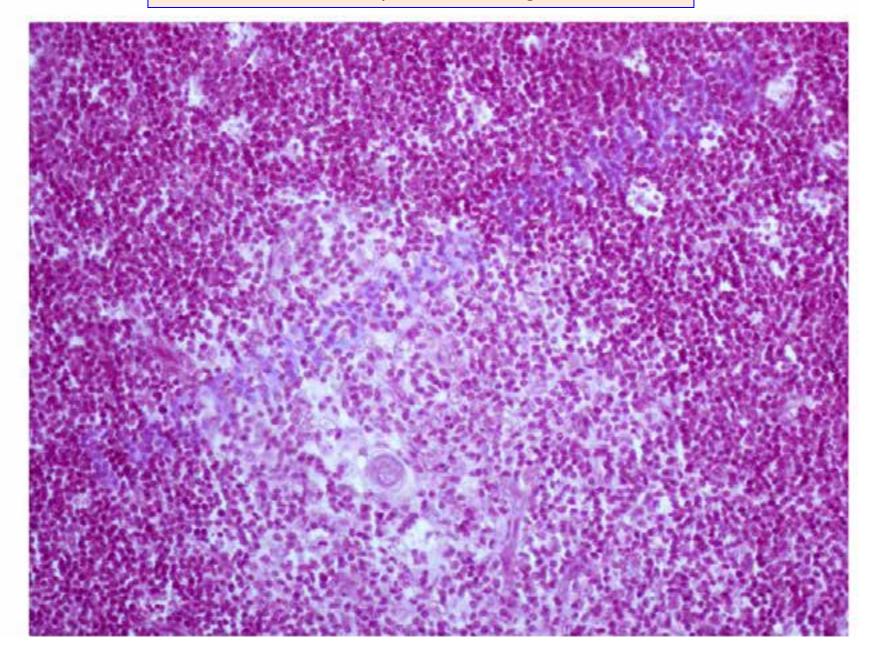


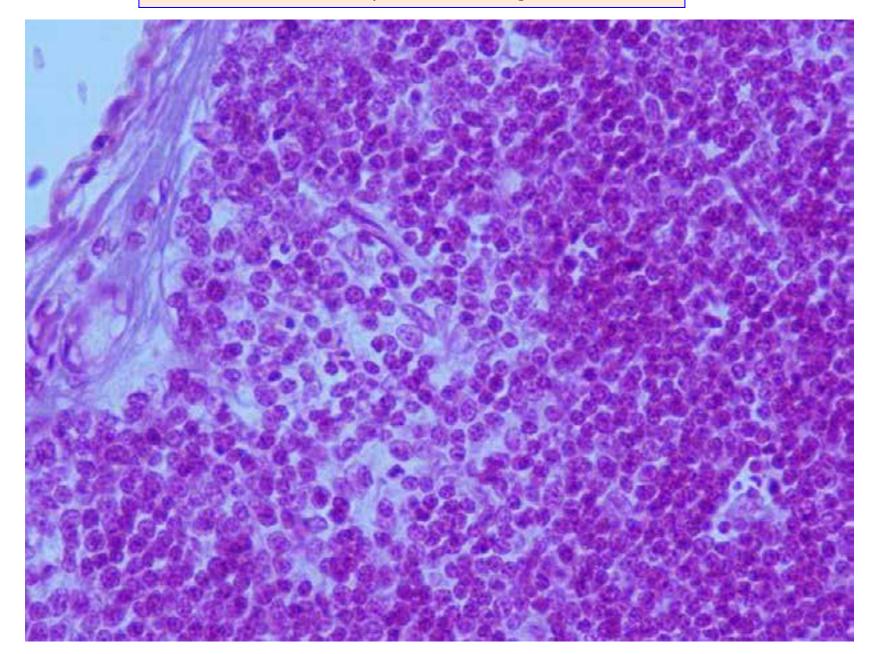


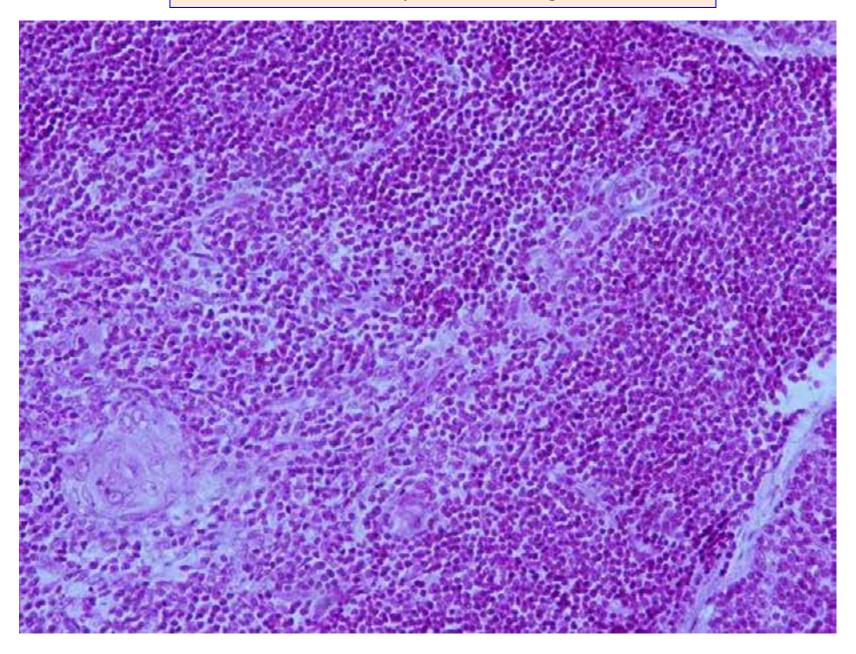


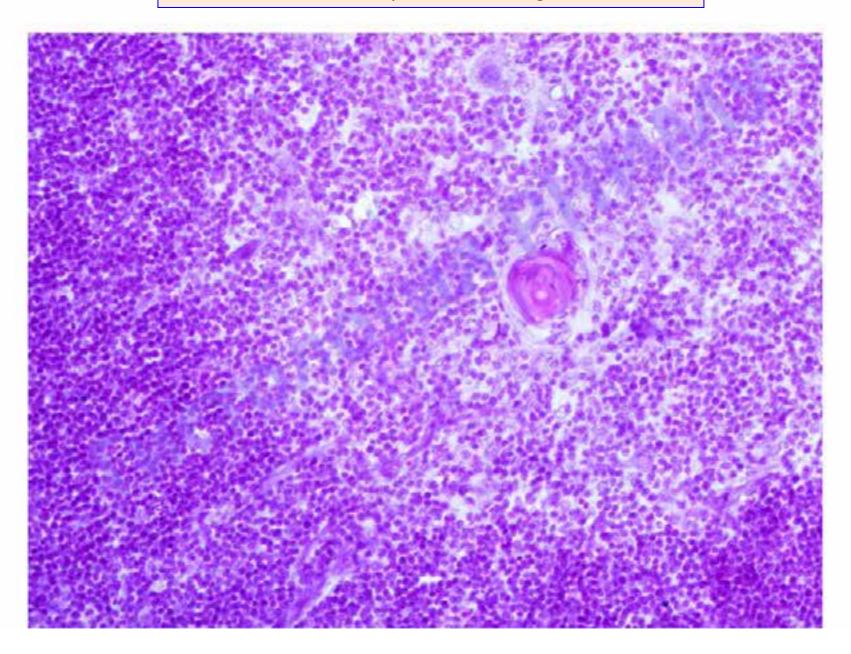


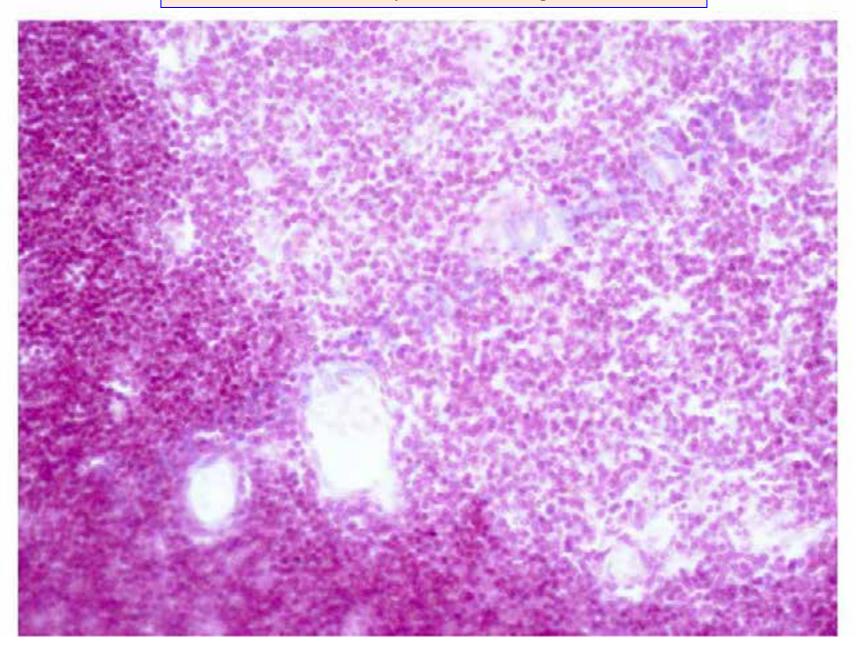


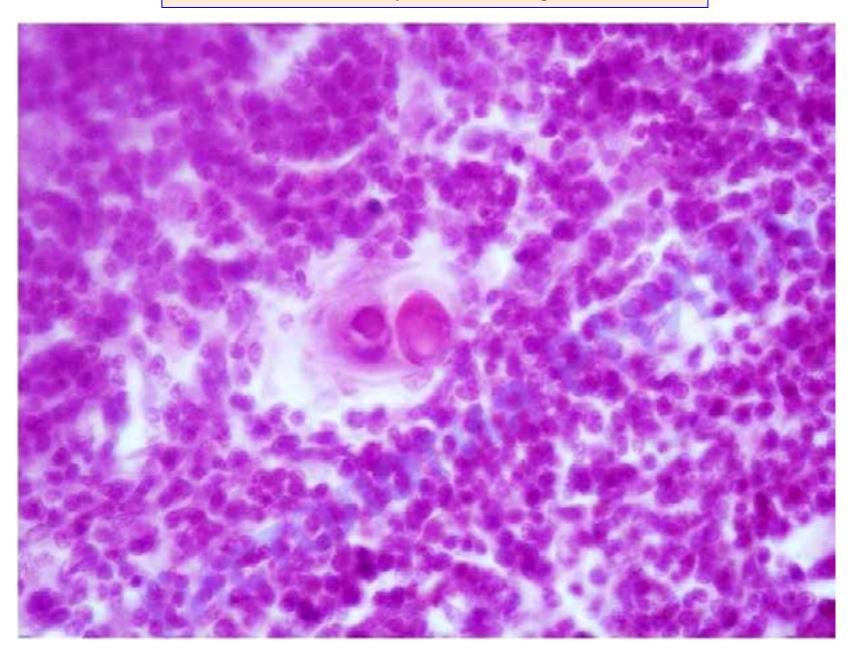


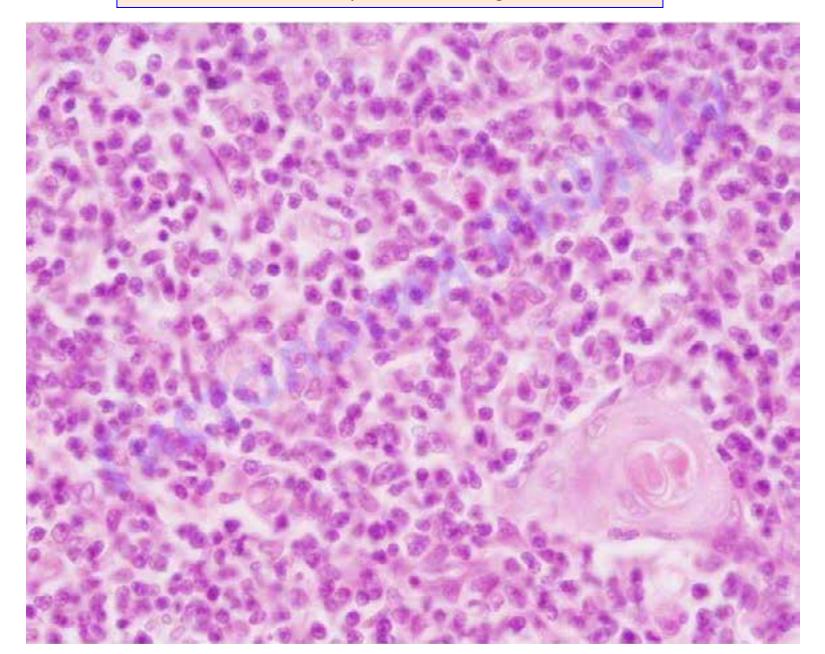


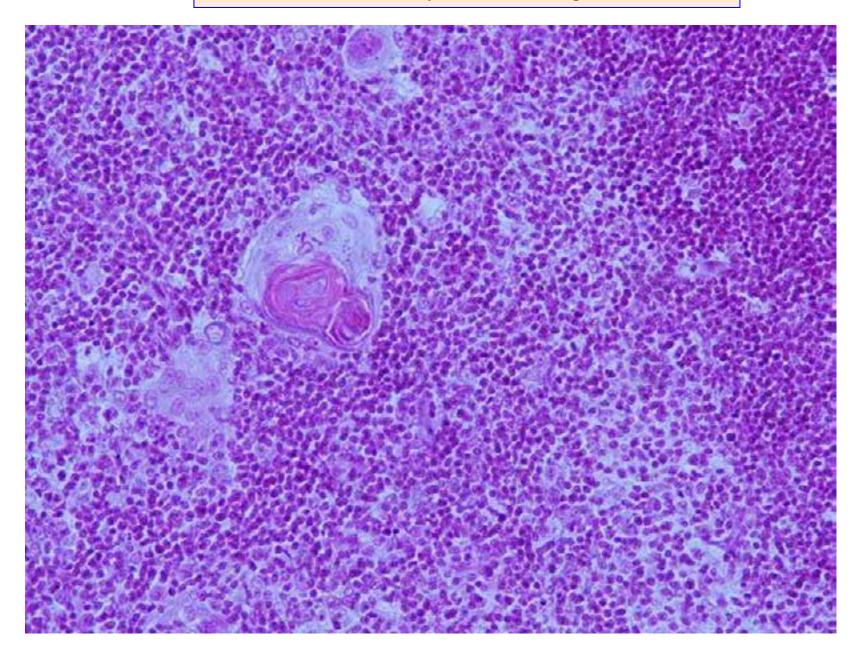


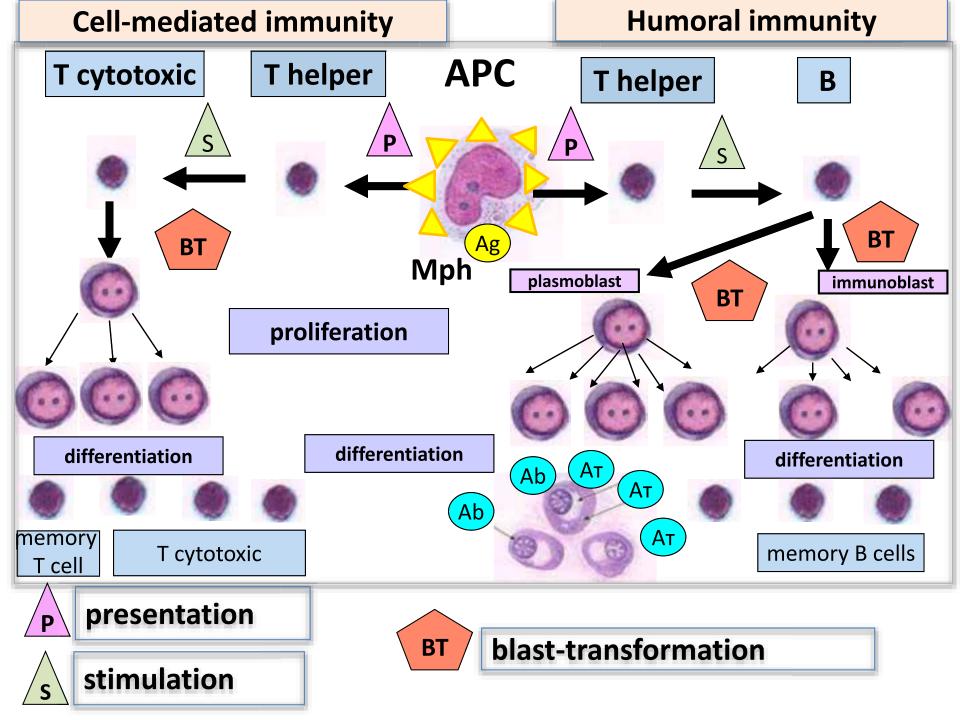


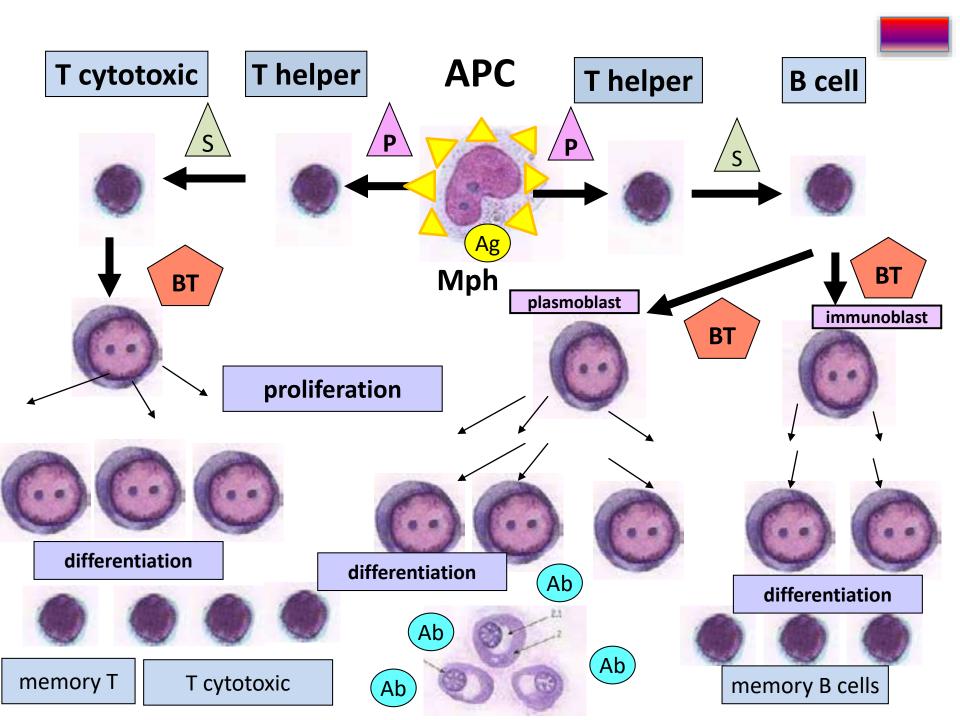












DEVELOPMENT OF THE LYMPH NODES

2-3 months of the intrauterine life

Lymph sacs are formed as expansions of the blood and lymph vessels
Surrounding mesenchyme gives rise to the reticular tissue, the capsule, and the
trabeculae of the lymph nodes
Marginal and medullary sinuses form

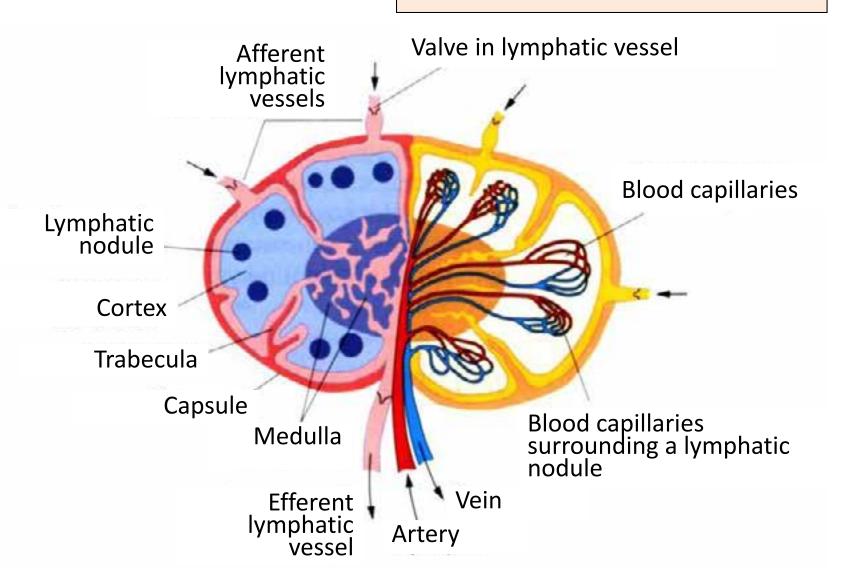
4th month

Cortical and medullary portions of the lymph nodes are formed (respectively, primary lymphatic nodules and medullary cords). B cells colonize the cortex, T cells colonize the paracortical zone

from the 6th month

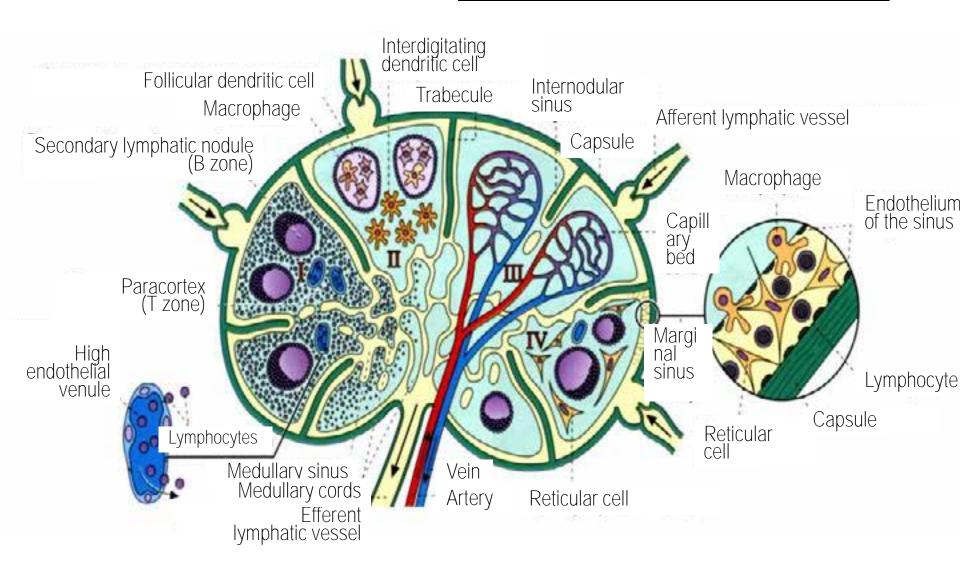
Lymph nodes acquire their definitive structure

STRUCTURE OF THE LYMPH NODE

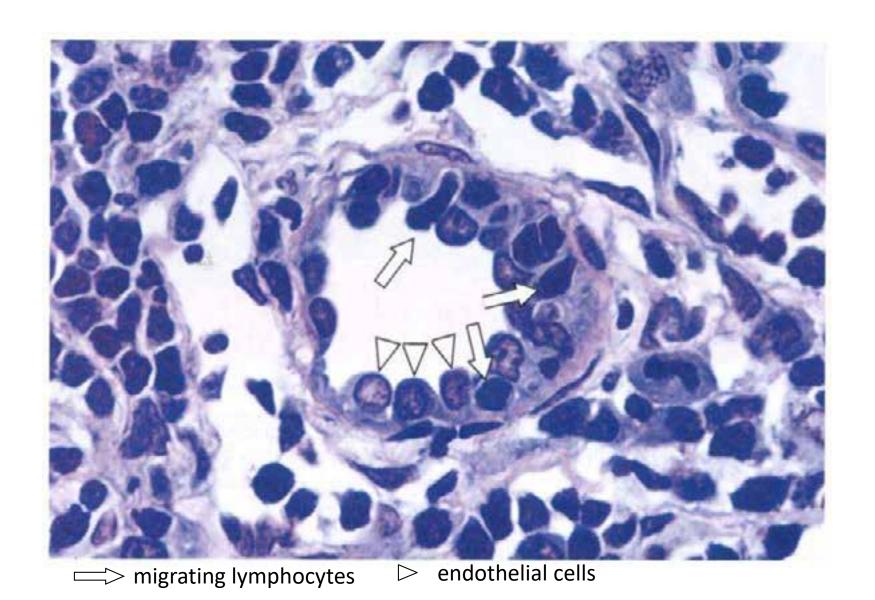




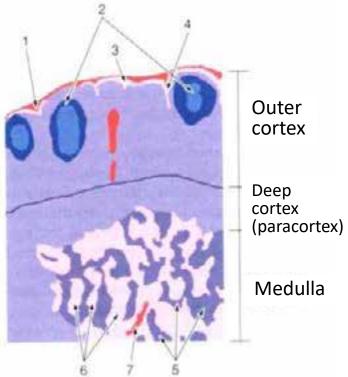
STRUCTURE OF THE LYMPH NODE



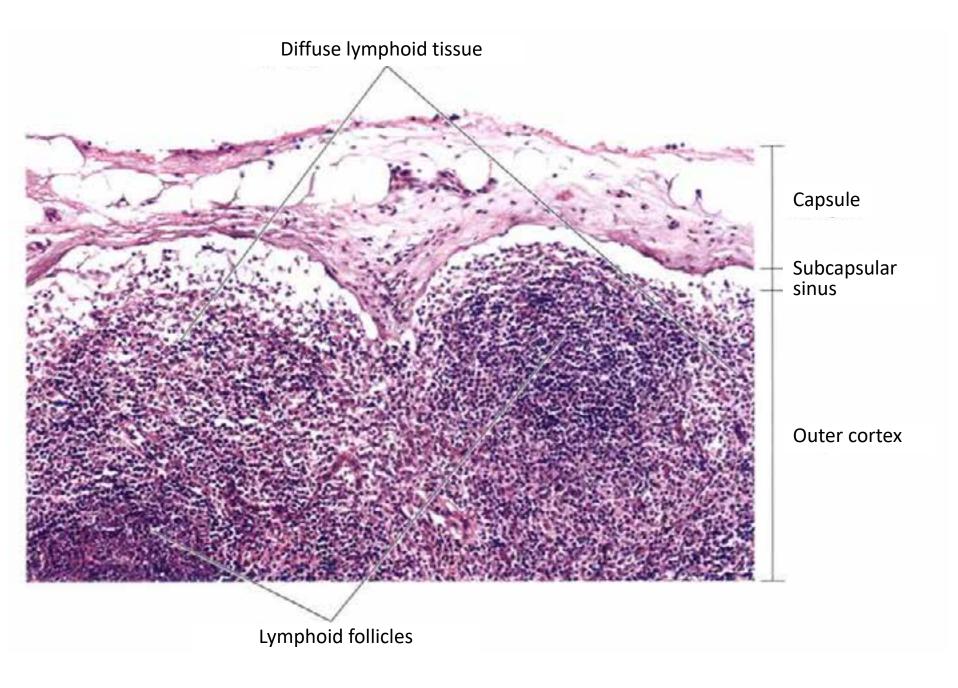
HIGH ENDOTHELIAL VENULE IN A LYMPH NODE

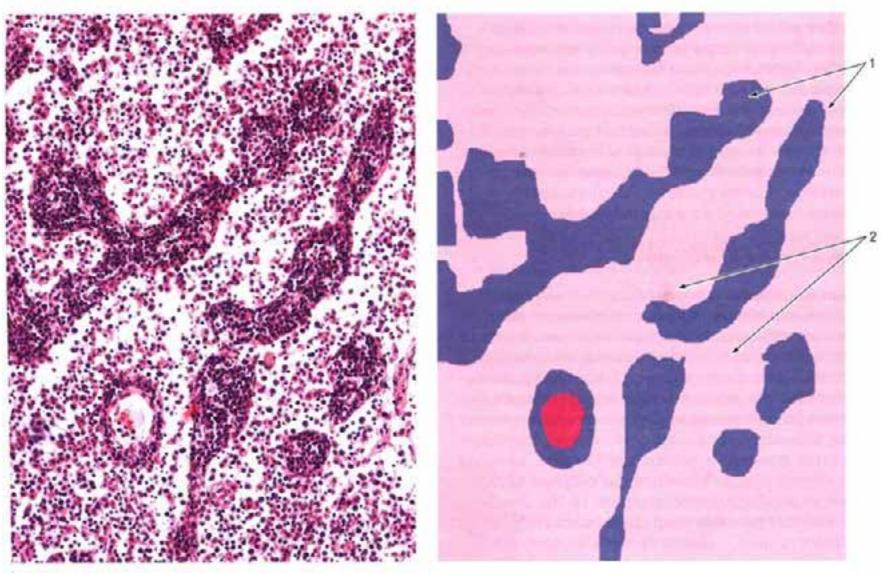




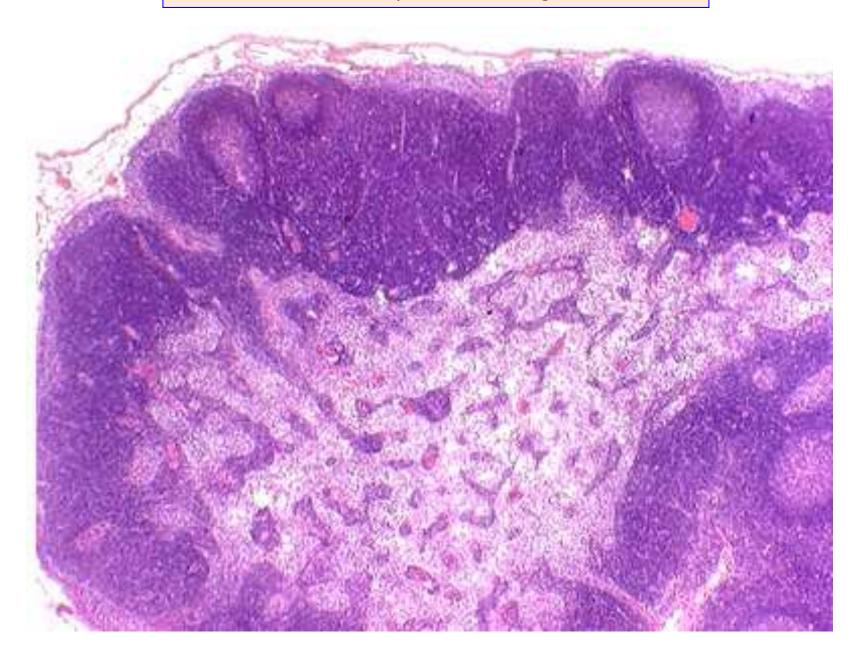


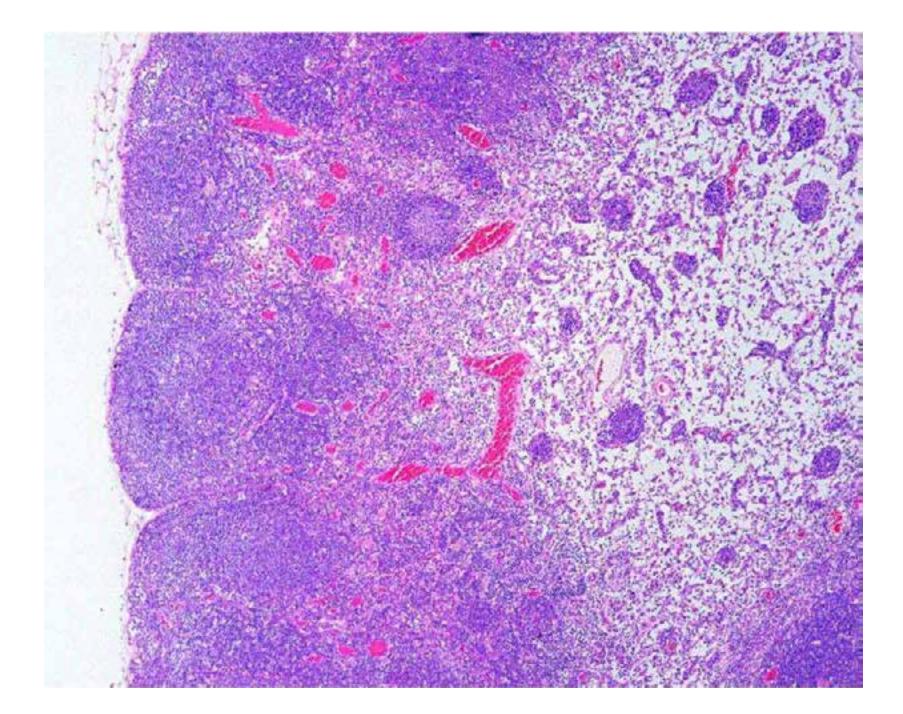
- 1- lymphatic nodule (lymphoid follicle),
- 2- germinal center of the lymphatic nodule,
- 3- subcapsular sinus,
- 4- internodular sinus,
- 5- medullary cords,
- 6- medullary sinus,
- 7- trabecula

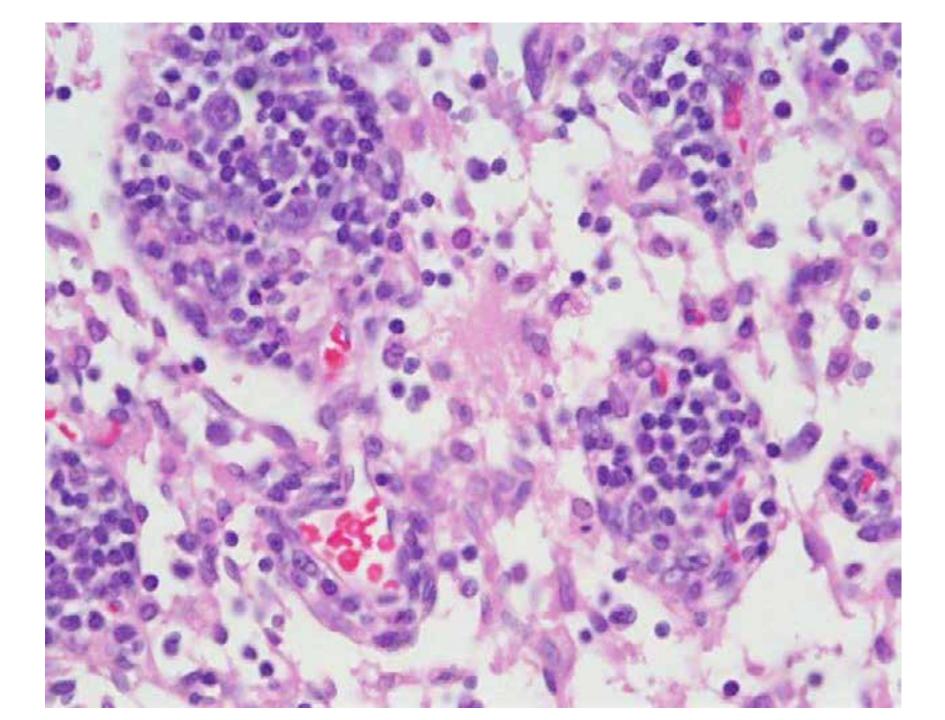


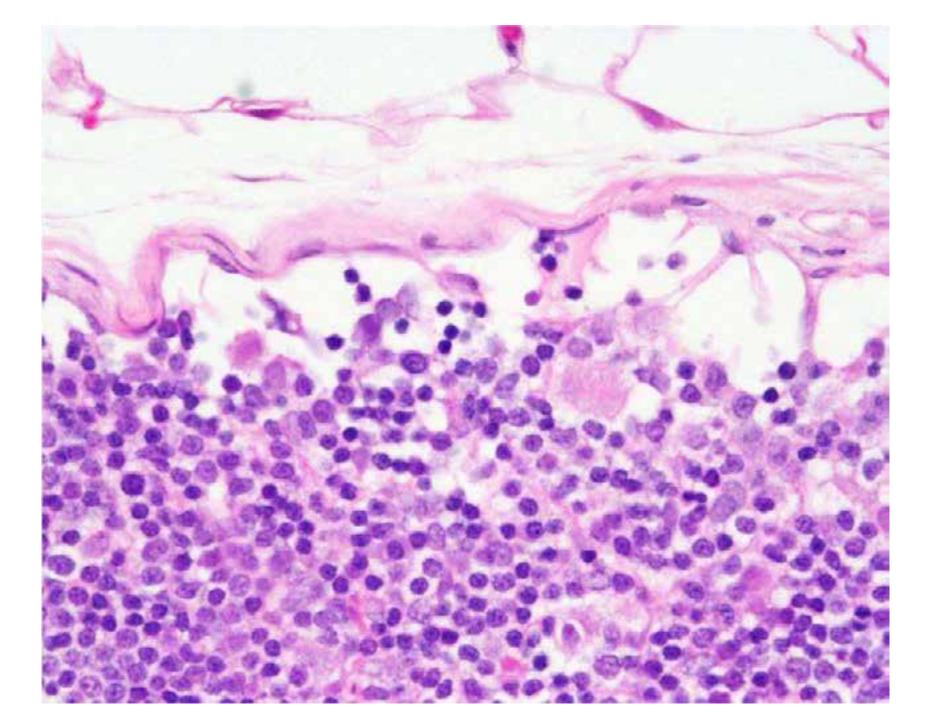


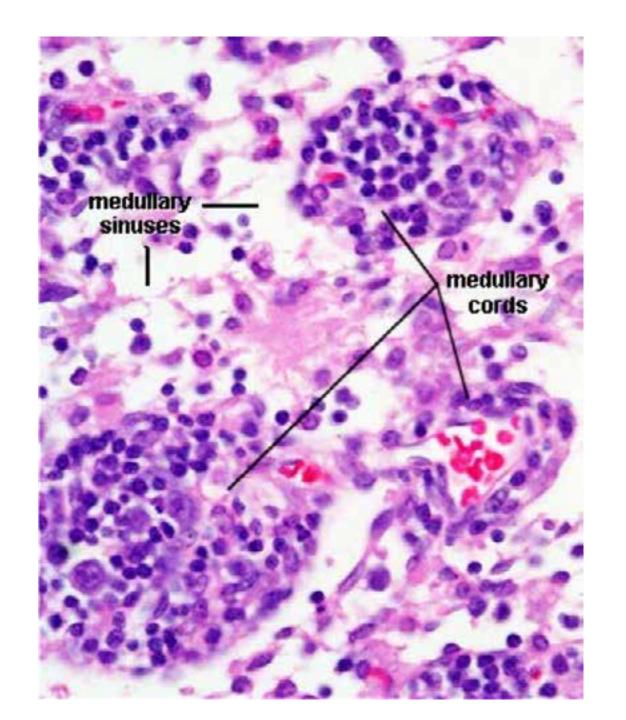
1- medullary cords, 2- medullary sinuses

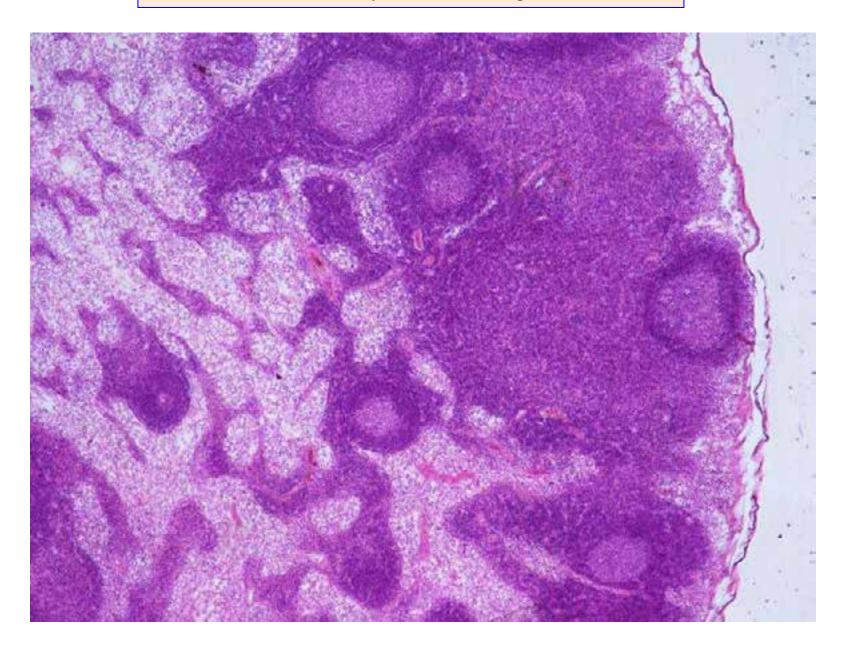




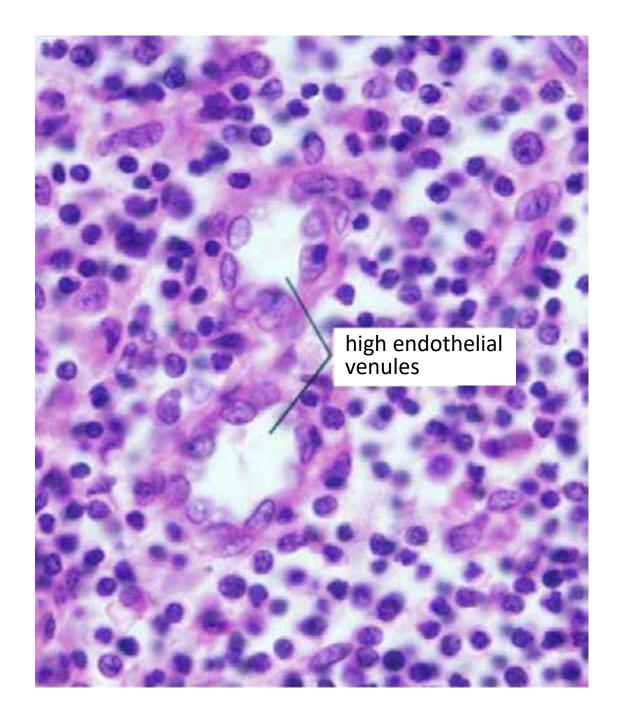


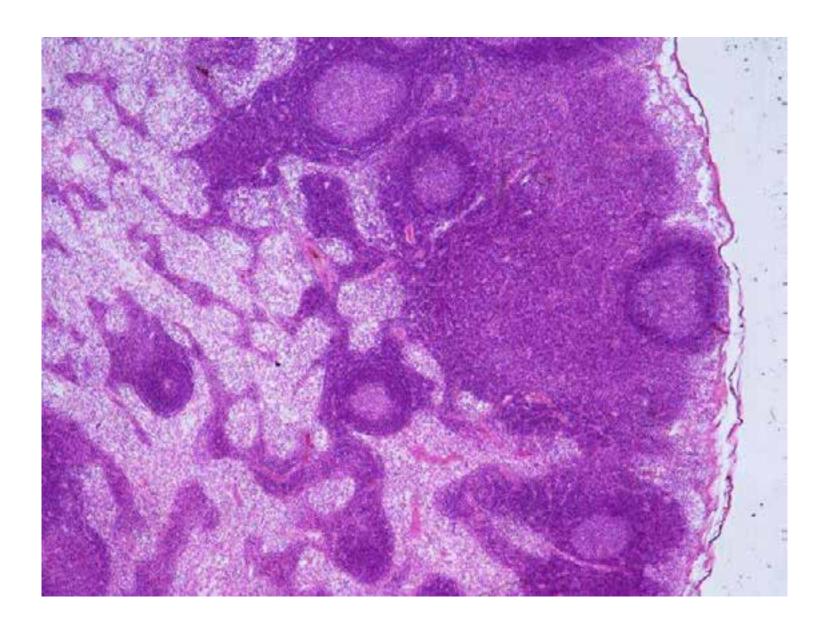


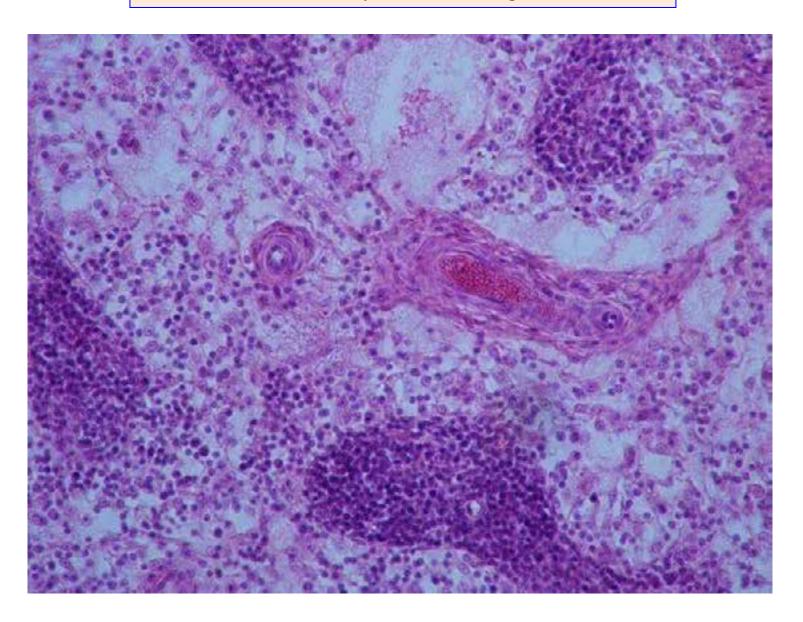


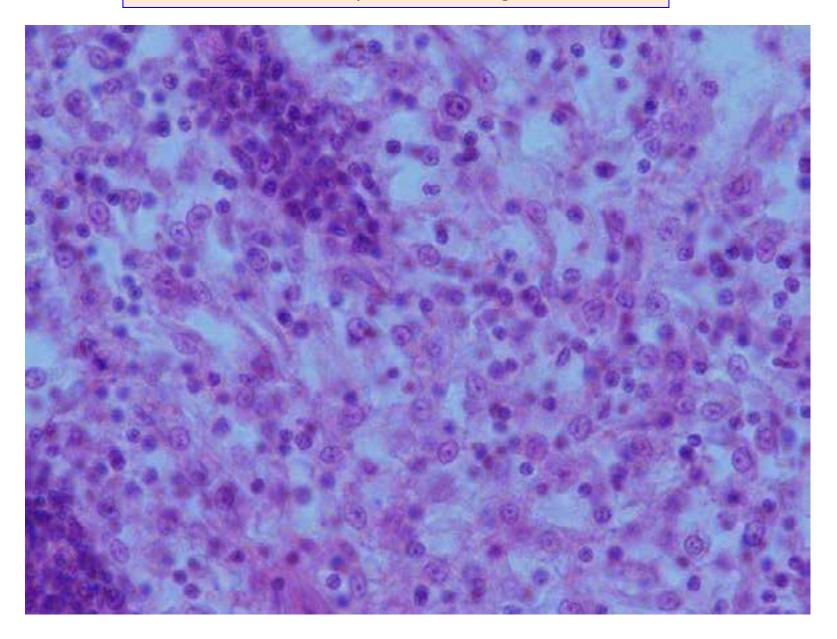


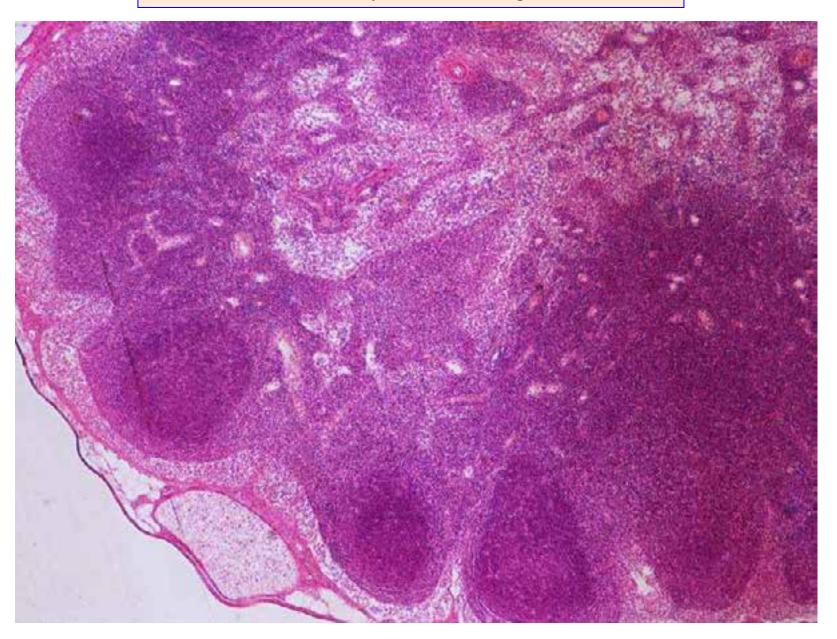


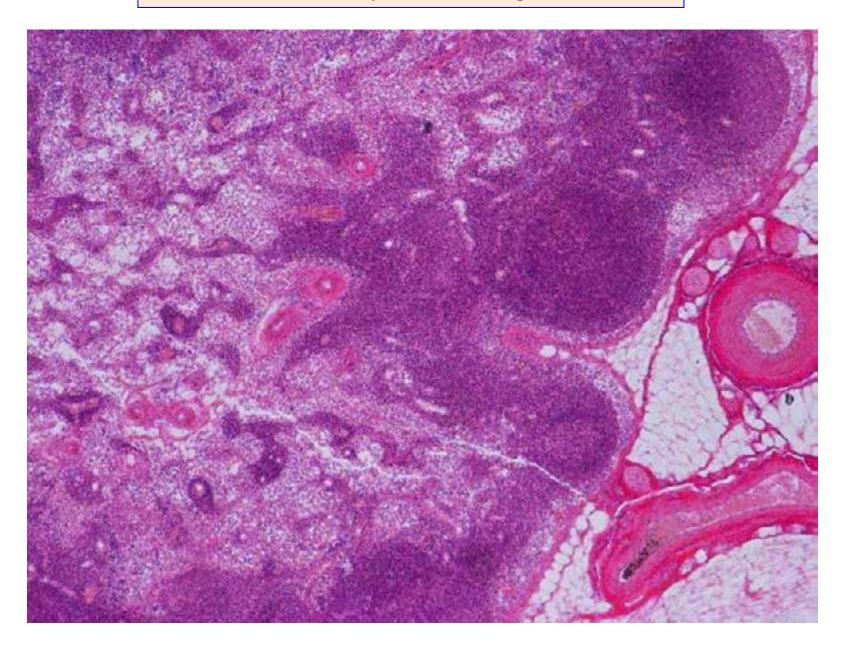


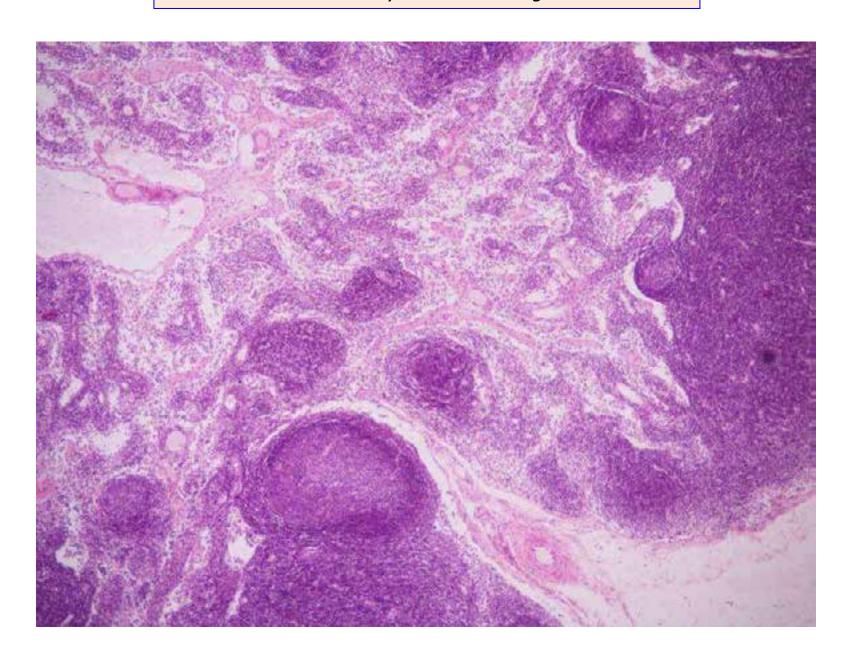












DEVELOPMENT OF THE SPLEEN

5th week of the intrauterine life

Splenic anlage segregates inside the mesenchyme of the dorsal mesentery A portion of the cells differentiate into reticular tissue

12th week

B cells emerge

3rd month

Sinusoidal capillaries emerge

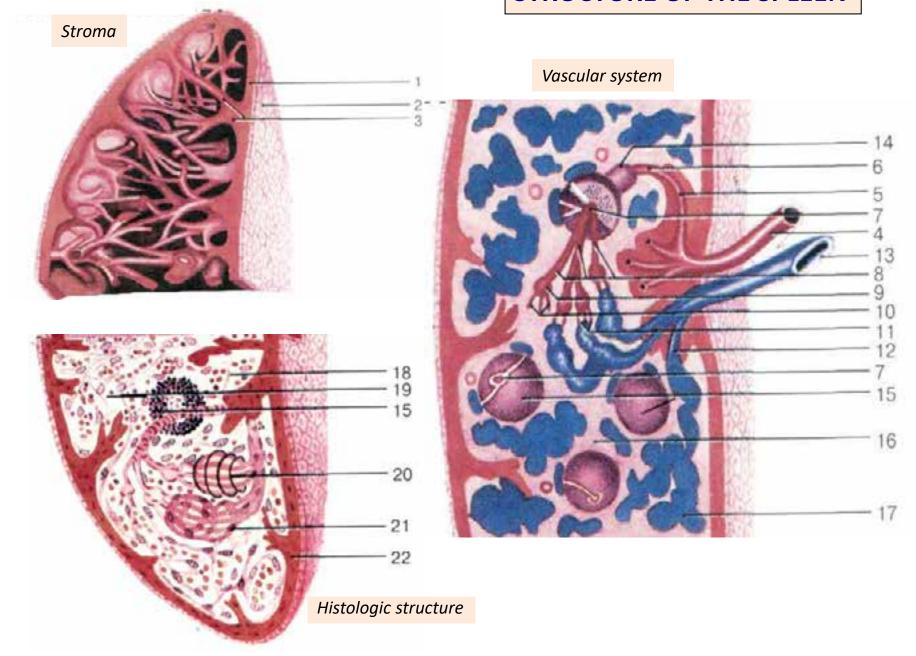
5th month

T and B zones are demarcated (respectively, lymphatic nodules and the red pulp) Splenic myelopoiesis reaches its maximum

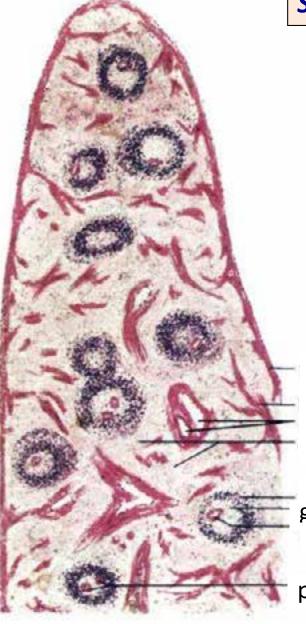
from the 6th month

The spleen acquires its definitive structure

STRUCTURE OF THE SPLEEN



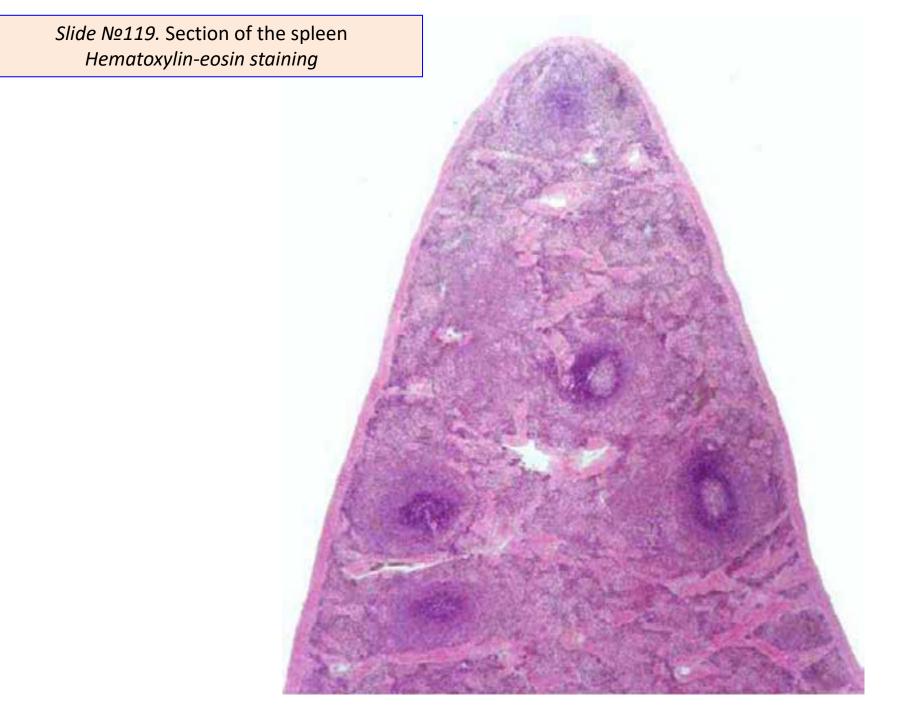
STRUCTURE OF THE SPLEEN



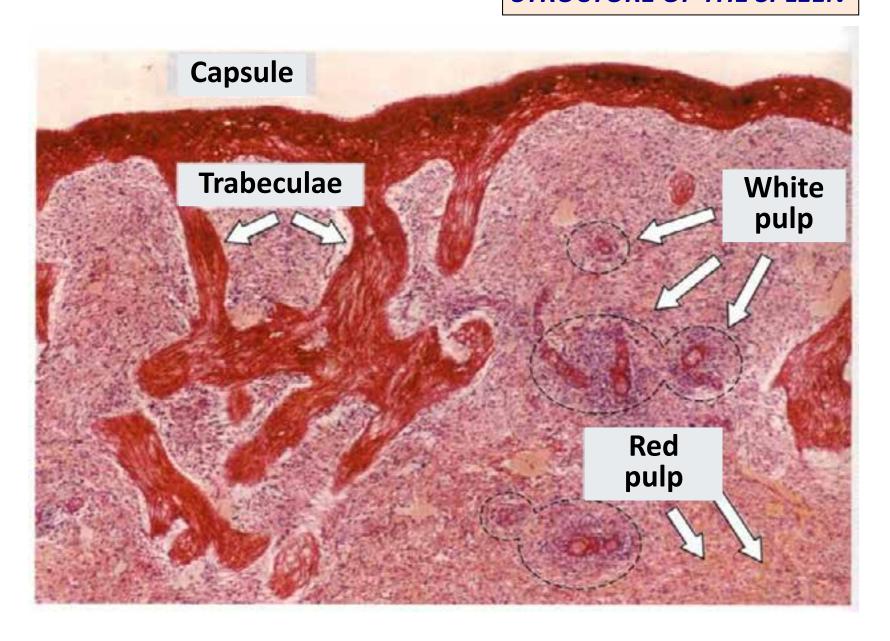
capsule trabecula trabecular artery and vein red pulp

marginal zone of a splenic nodule germinal center of a splenic nodule central artery

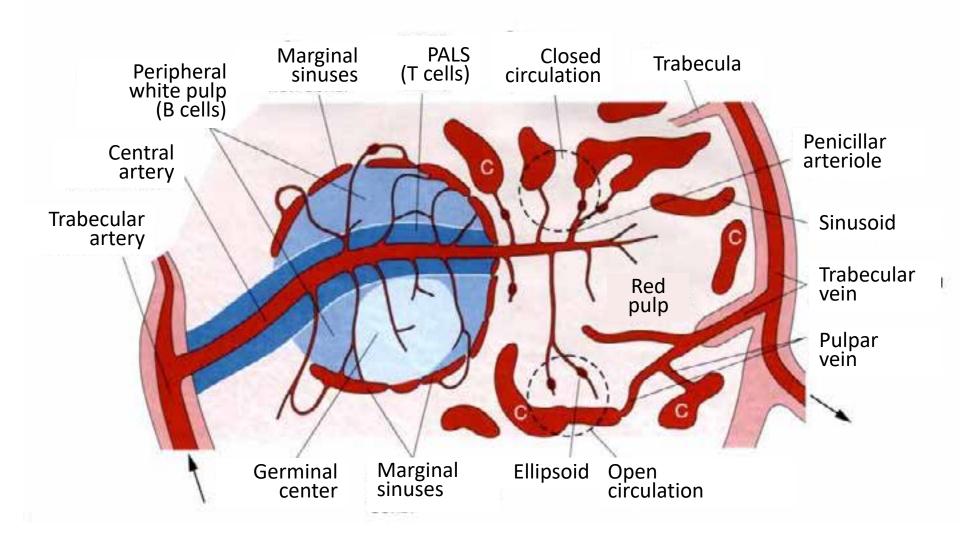
penicillar arteries



STRUCTURE OF THE SPLEEN



SPLENIC CIRCULATION



Closed circulation is a fast route, ensures nutrition and oxygenation of splenic tissues

splenic artery
trabecular arteries
pulpar arteries
central artery
penicillar arterioles
sheathed arterioles
arteriolar sphincters
blood capillaries

closed circulation

venous sinusoids

venous sphincters

trabecular veins

splenic vein

SPLENIC CIRCULATION

Open circulation is slow, ensures contacts of formed elements with macrophages, and contacts of macrophages with antigens

open circulation

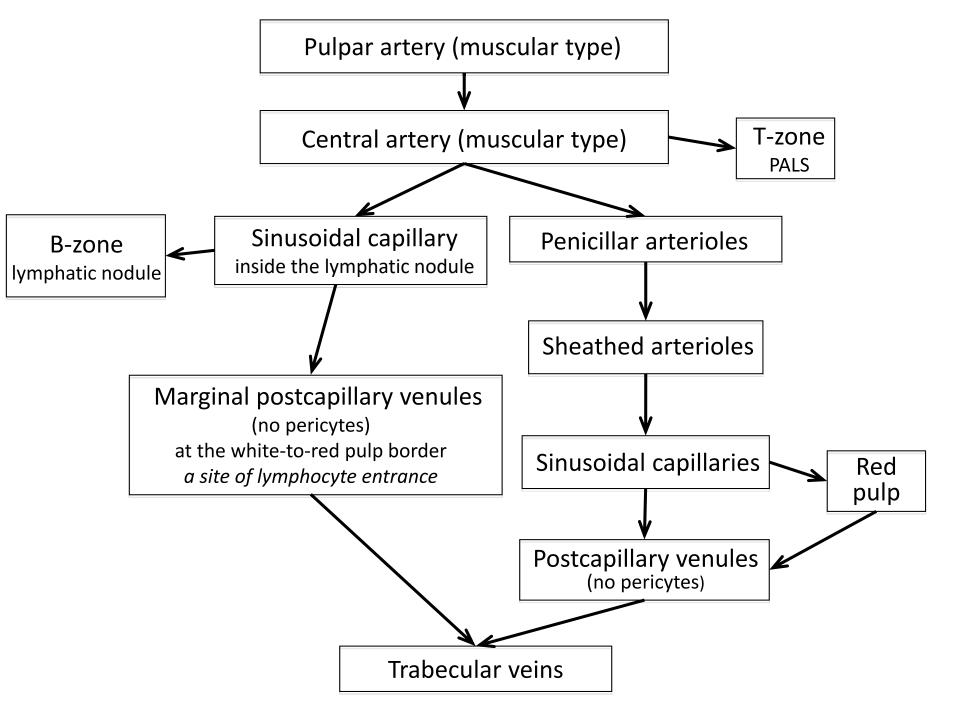
red pulp

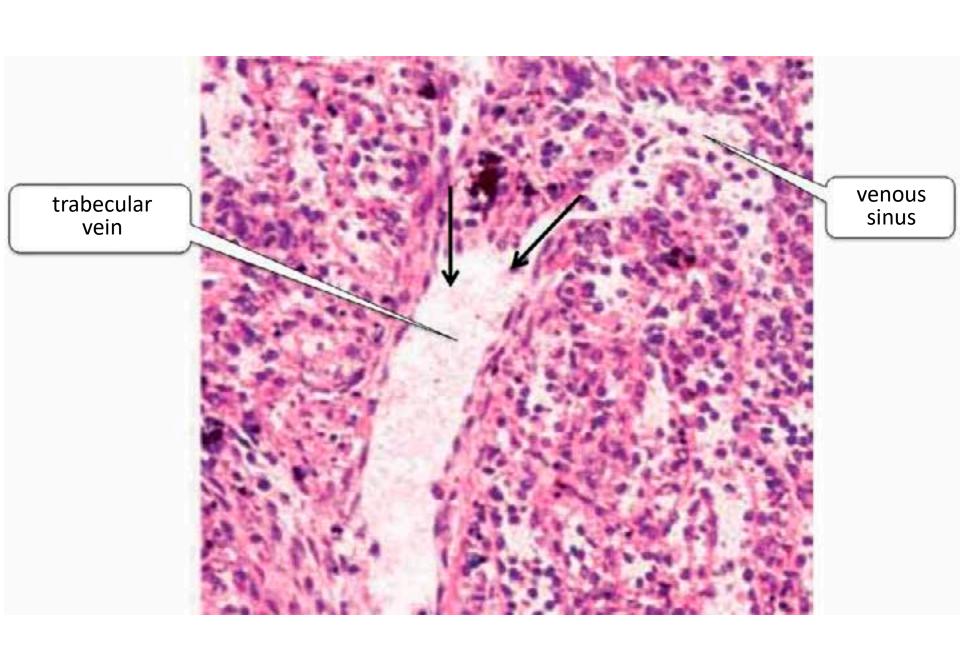
venous sinusoids

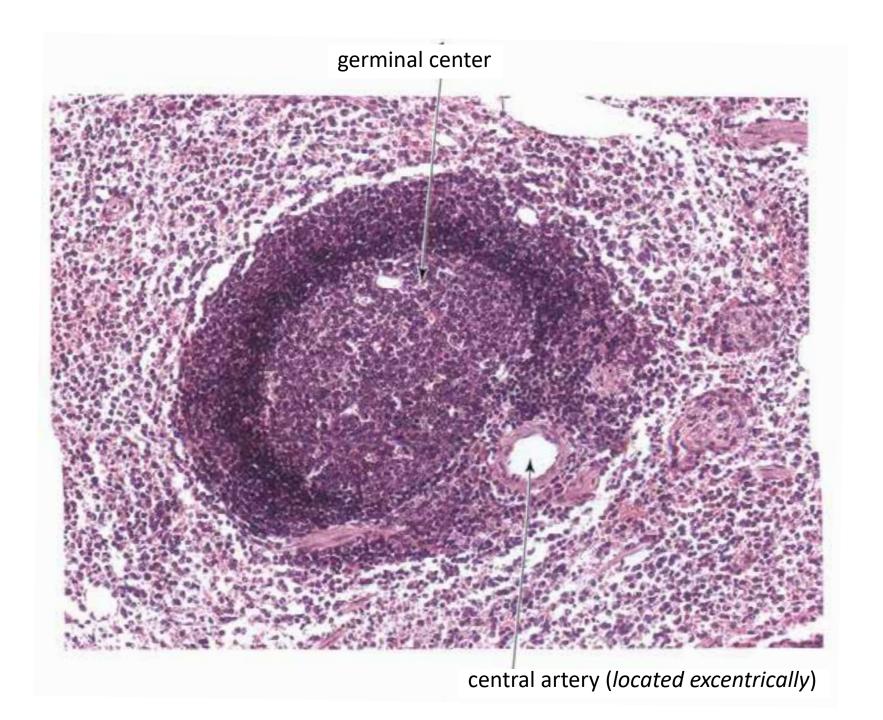
venous sphincters

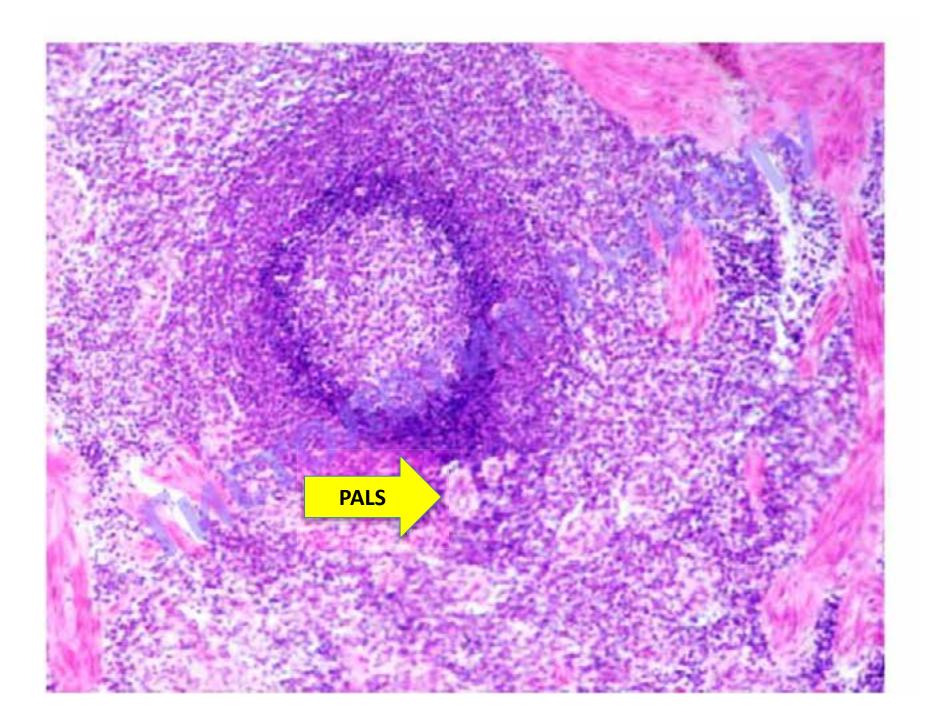
trabecular veins

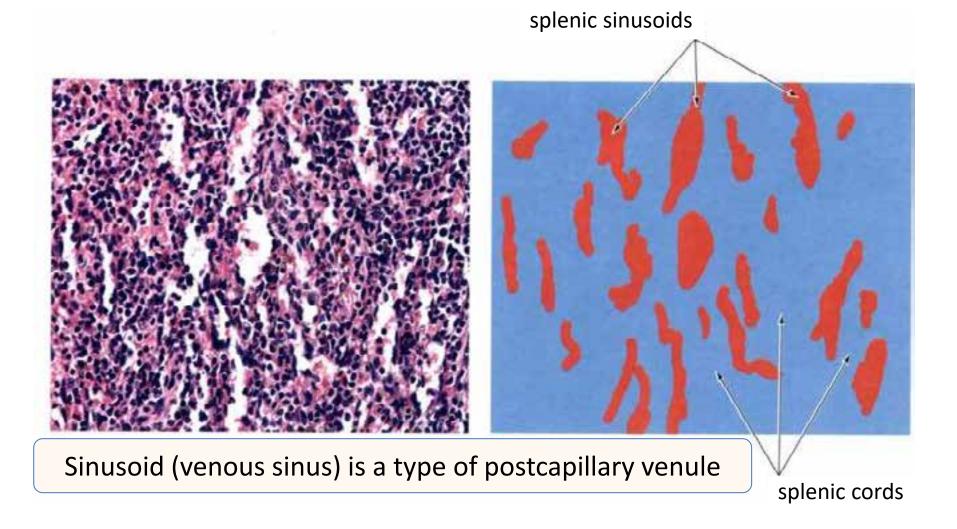
splenic vein



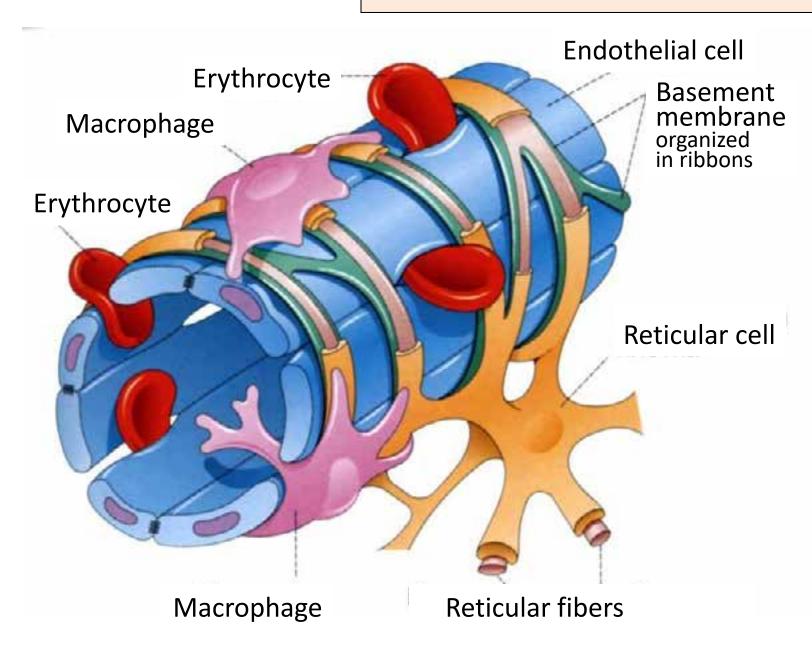




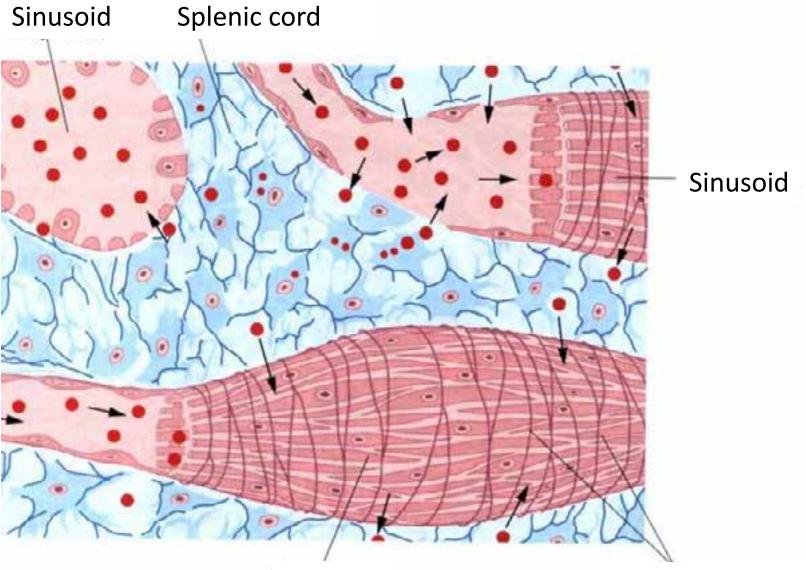




STRUCTURE OF SPLENIC SINUSOIDS

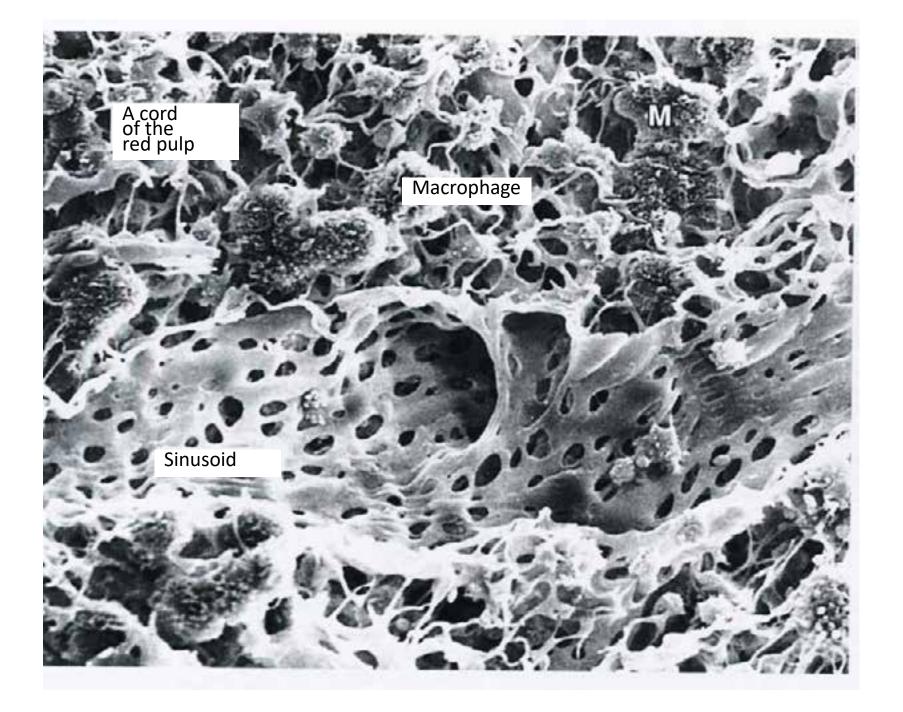


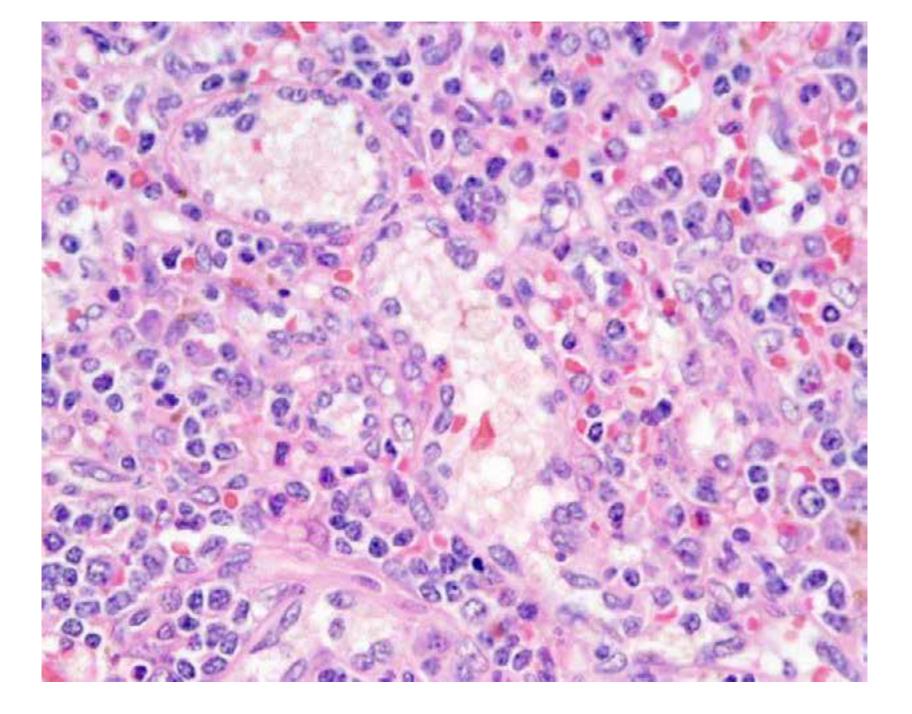
STRUCTURE OF THE RED PULP



Sinusoid

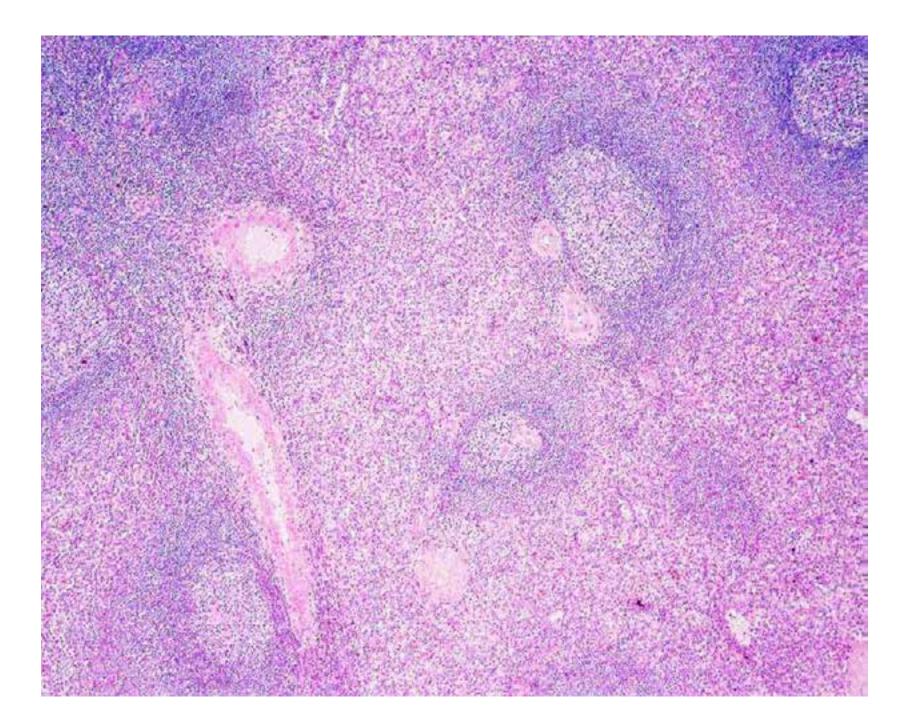
Reticular fibers

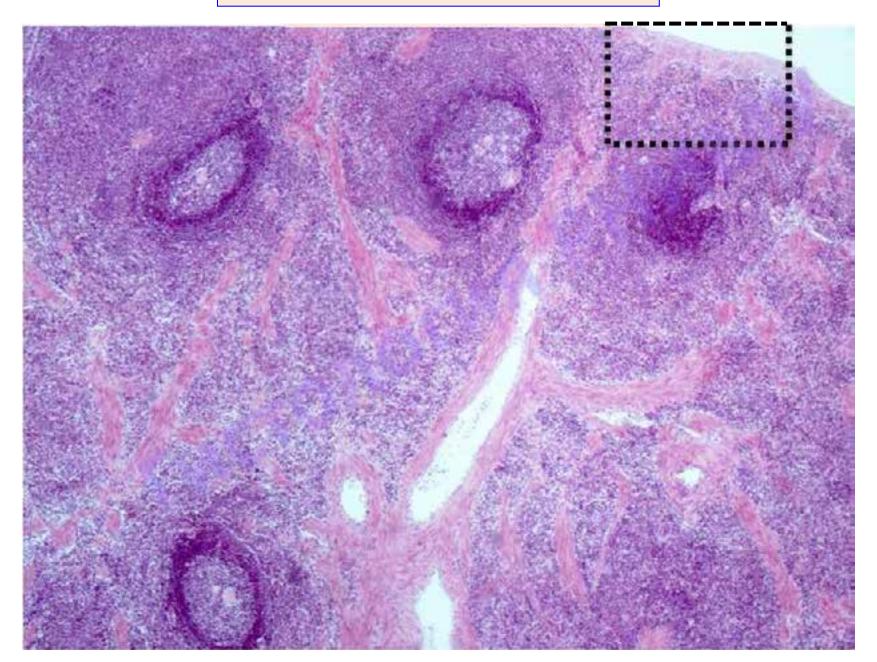


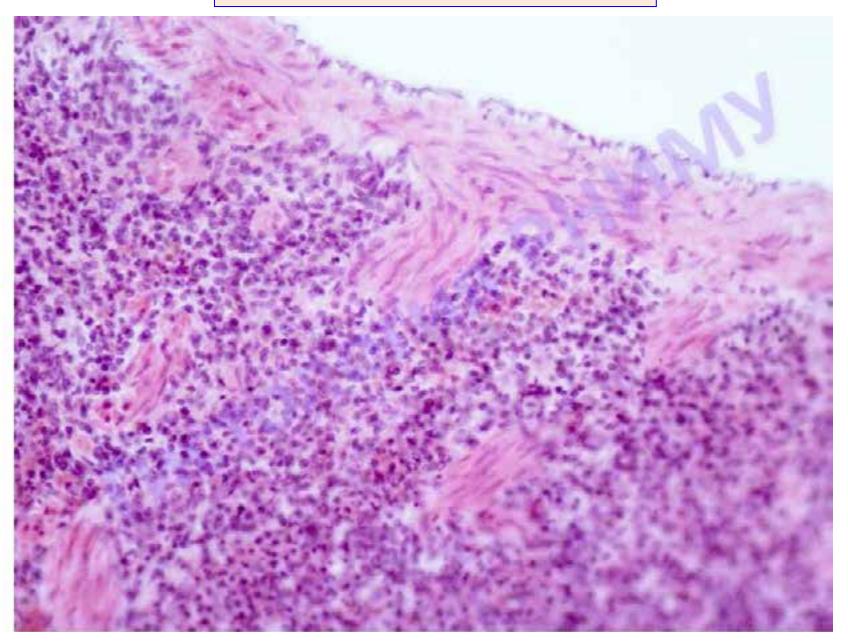


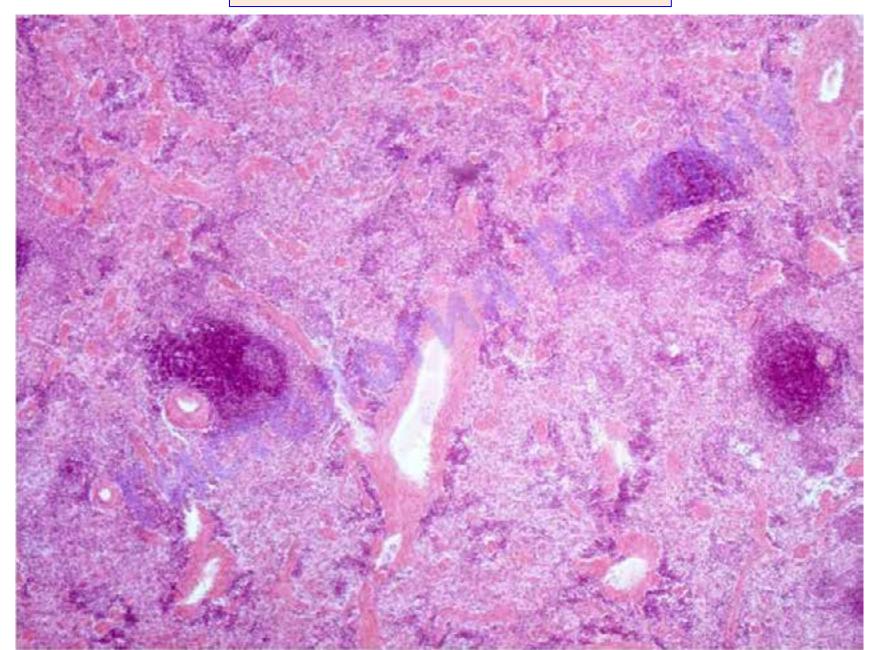
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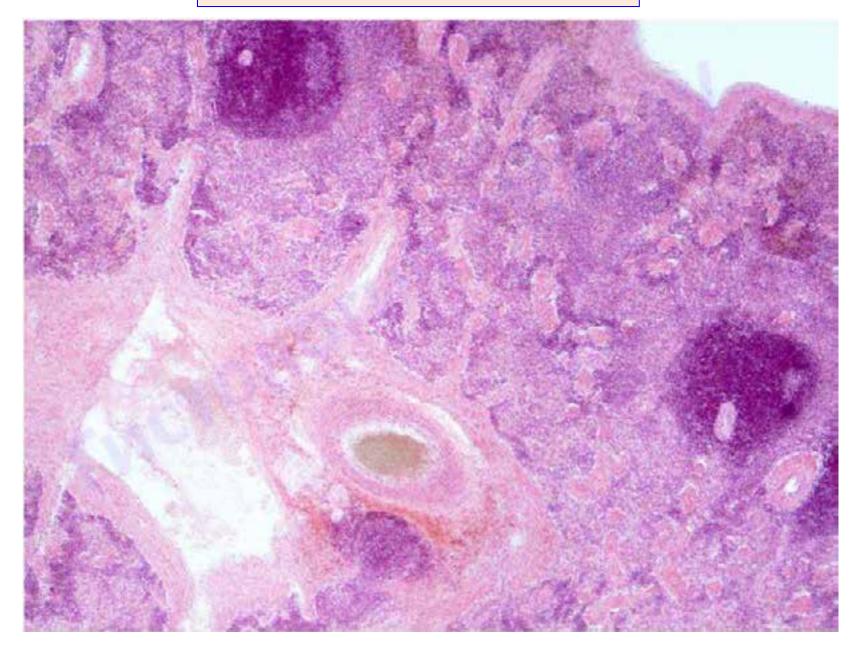
Marginal sinusoid

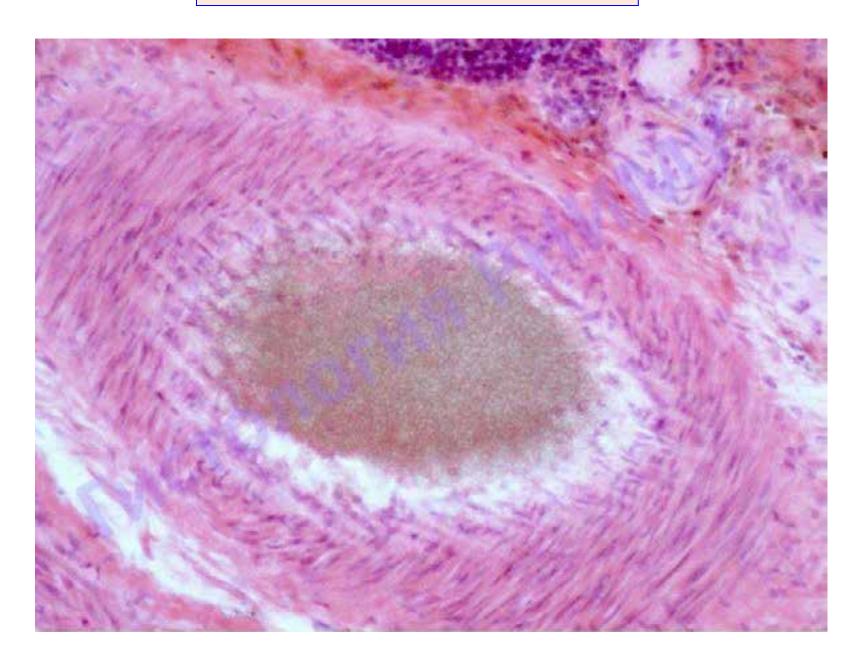


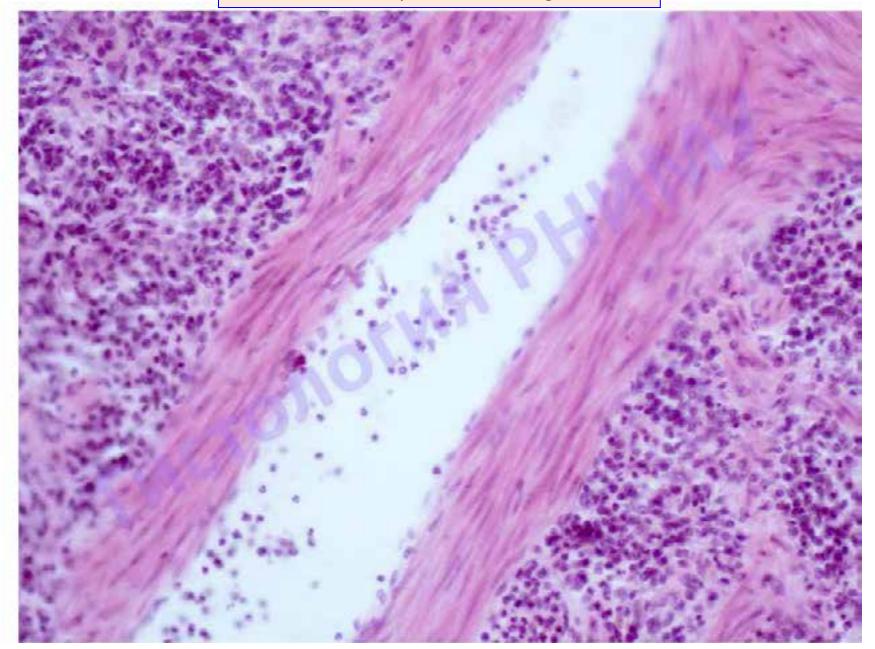


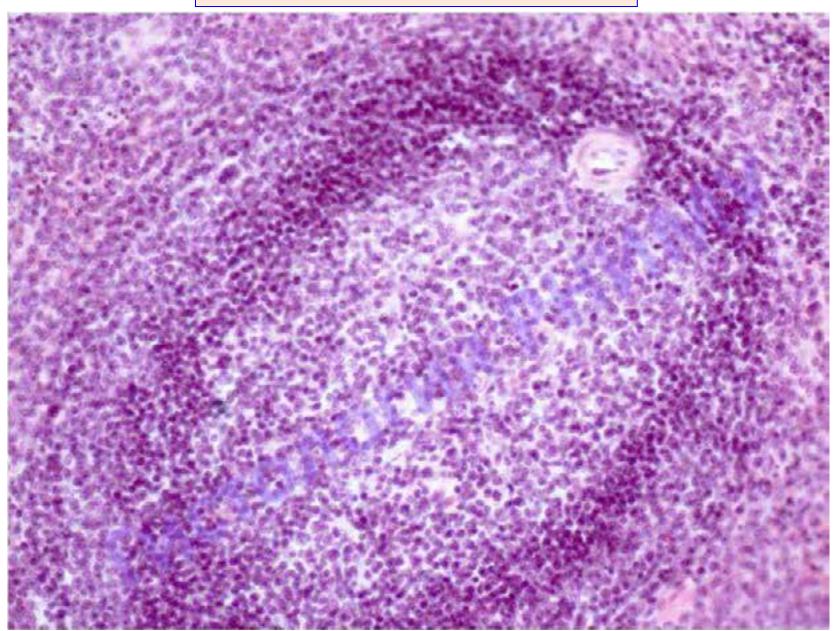


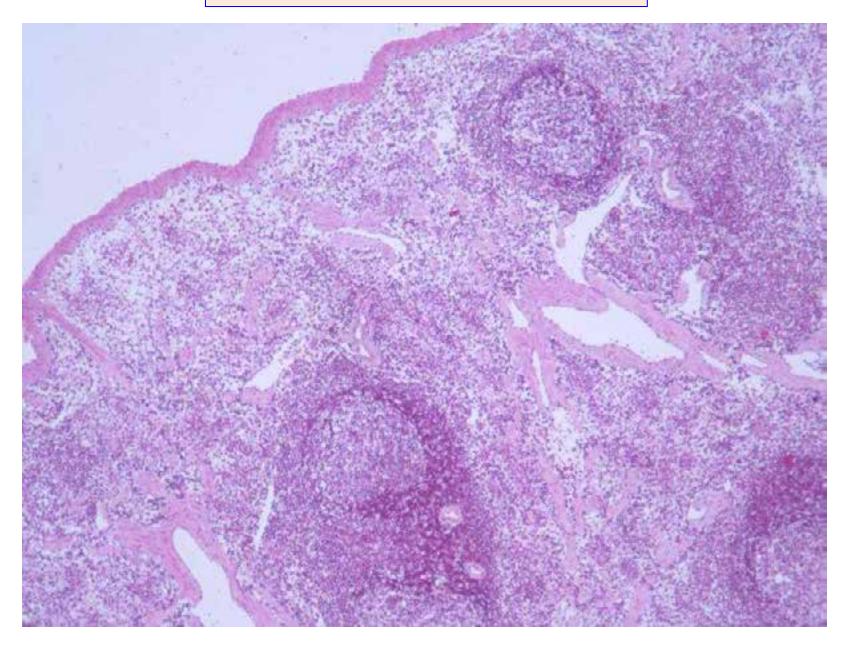


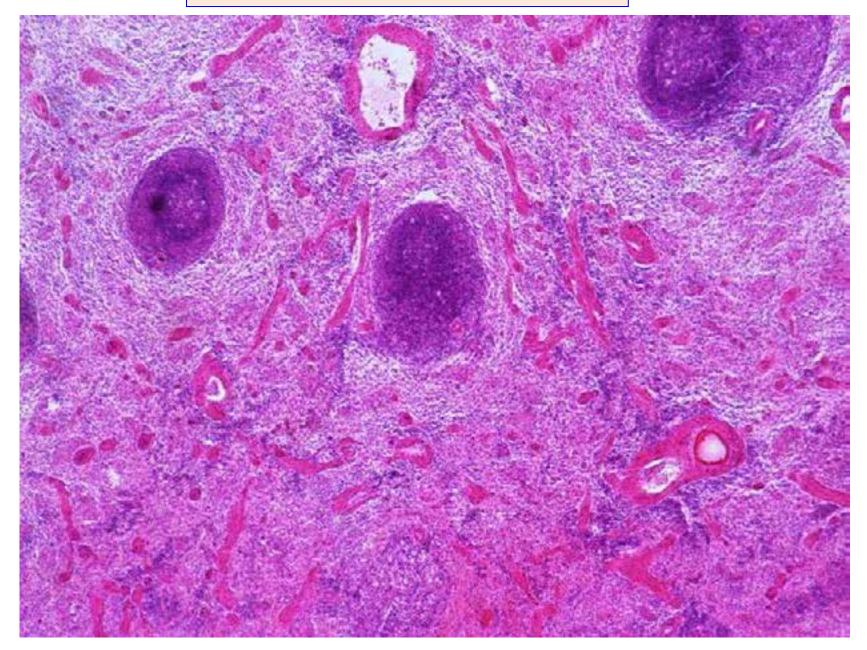


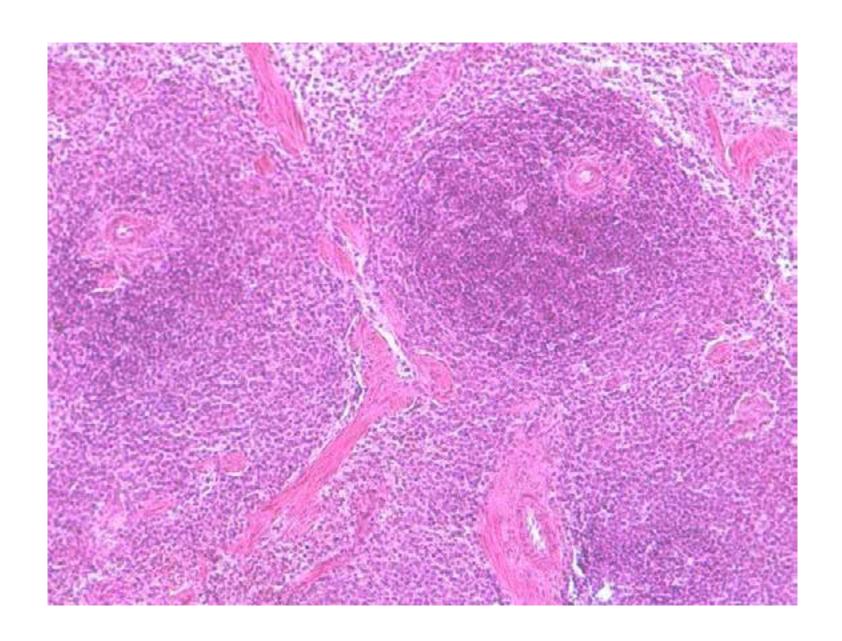




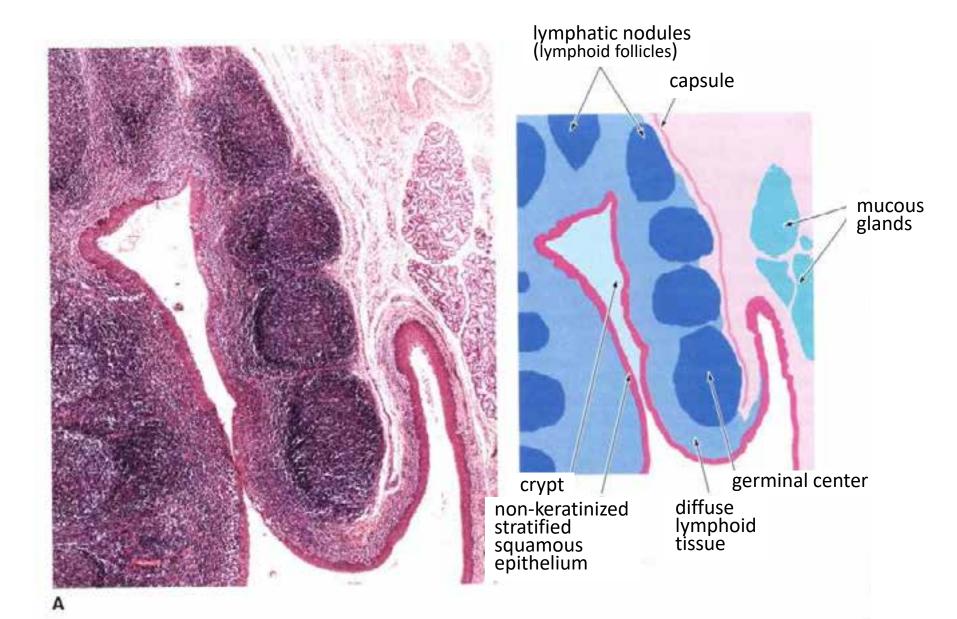




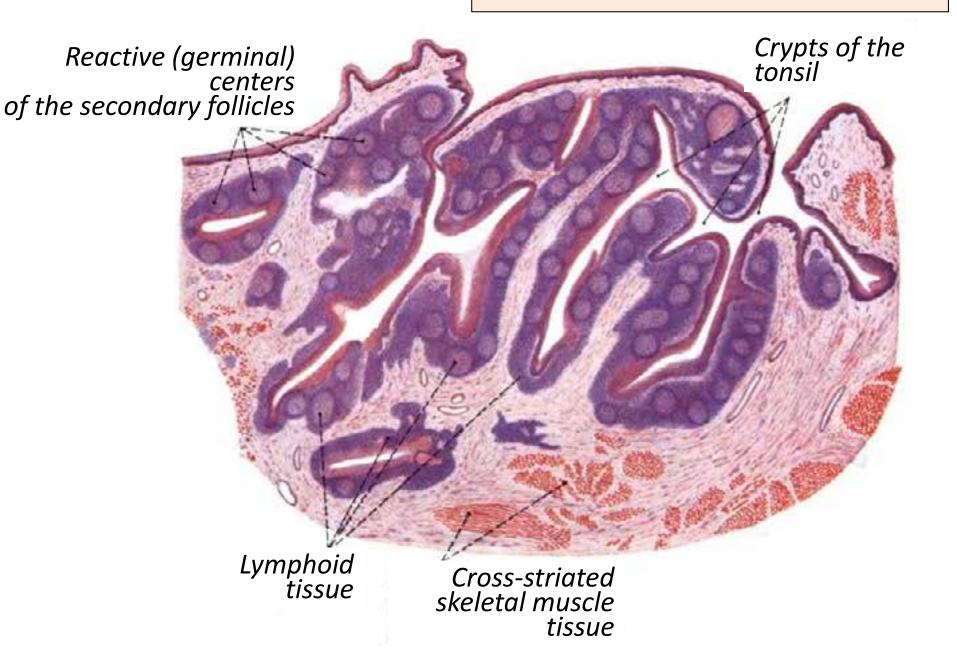




STRUCTURE OF THE PALATINE TONSIL



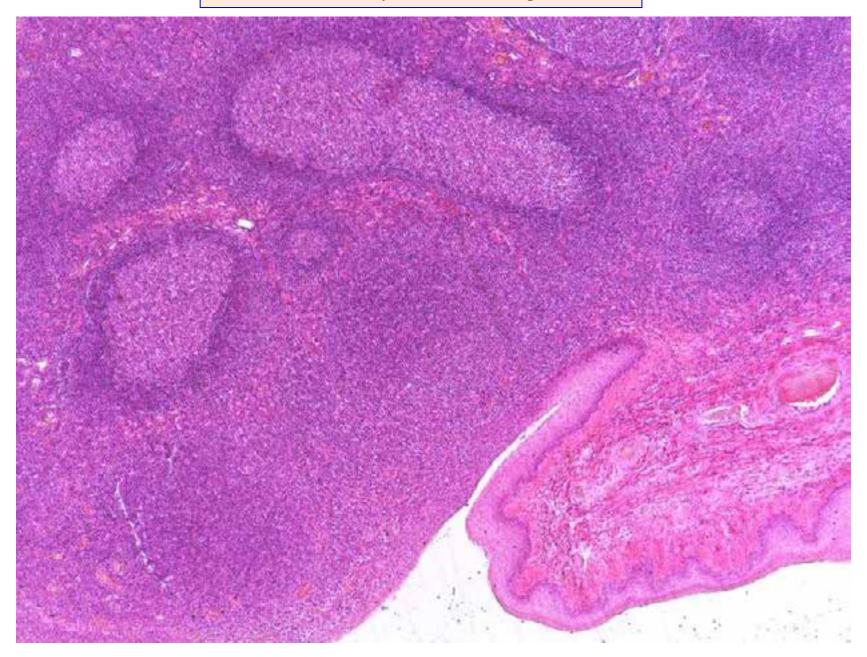
STRUCTURE OF THE PALATINE TONSIL



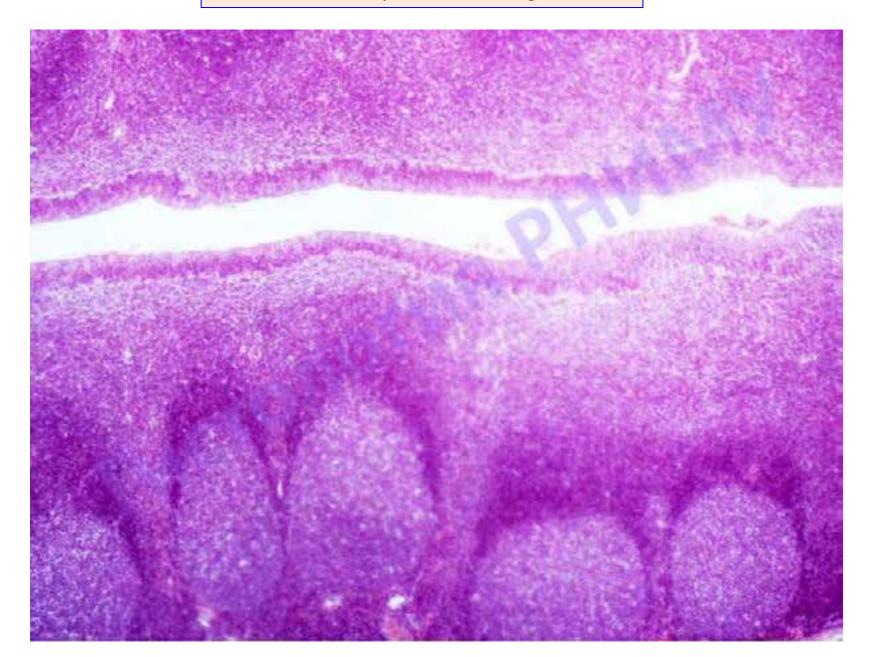


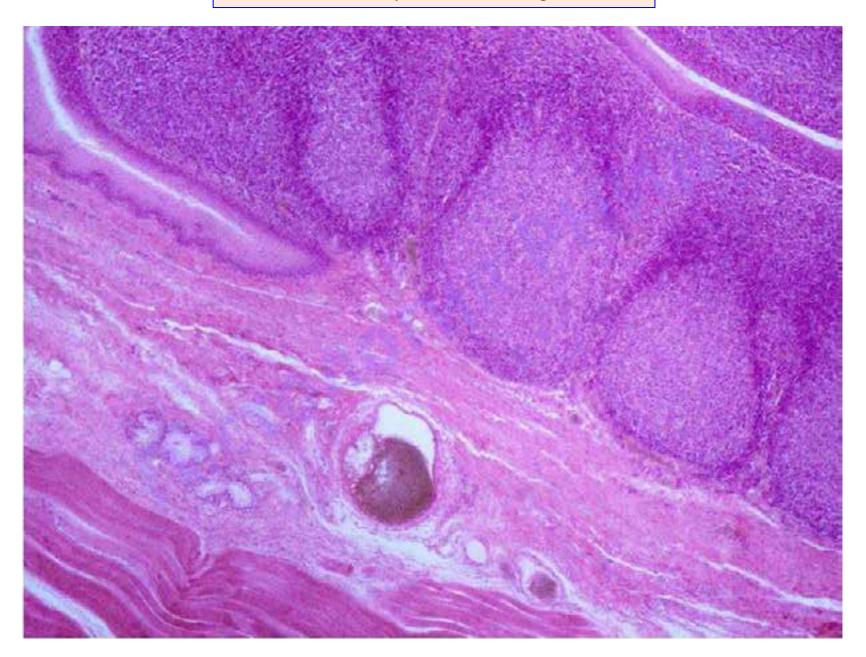


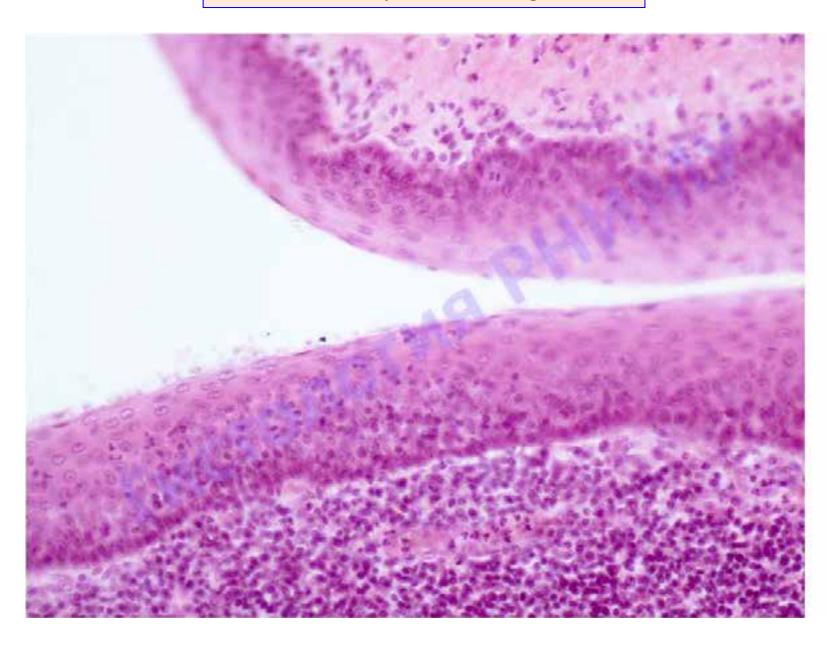


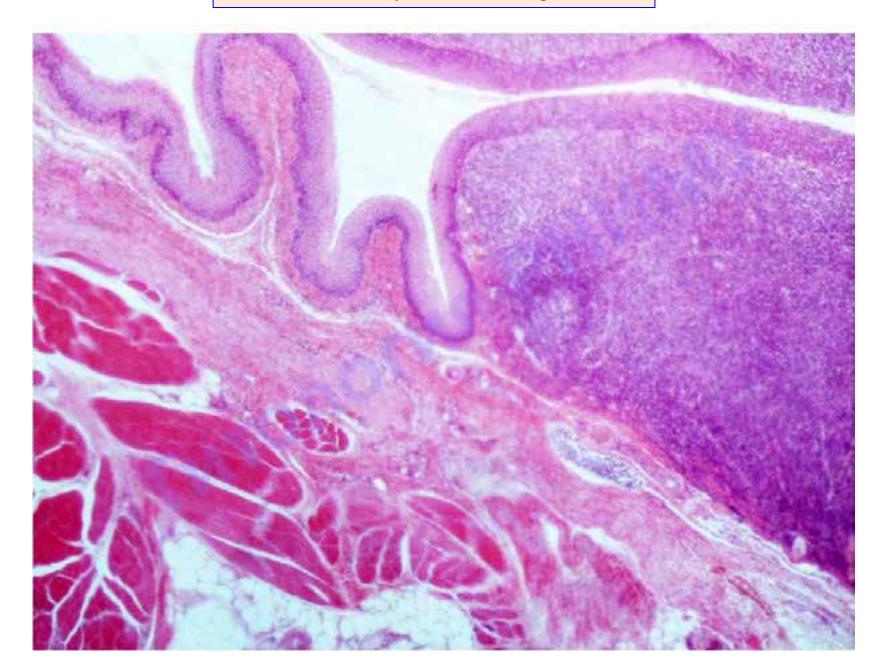


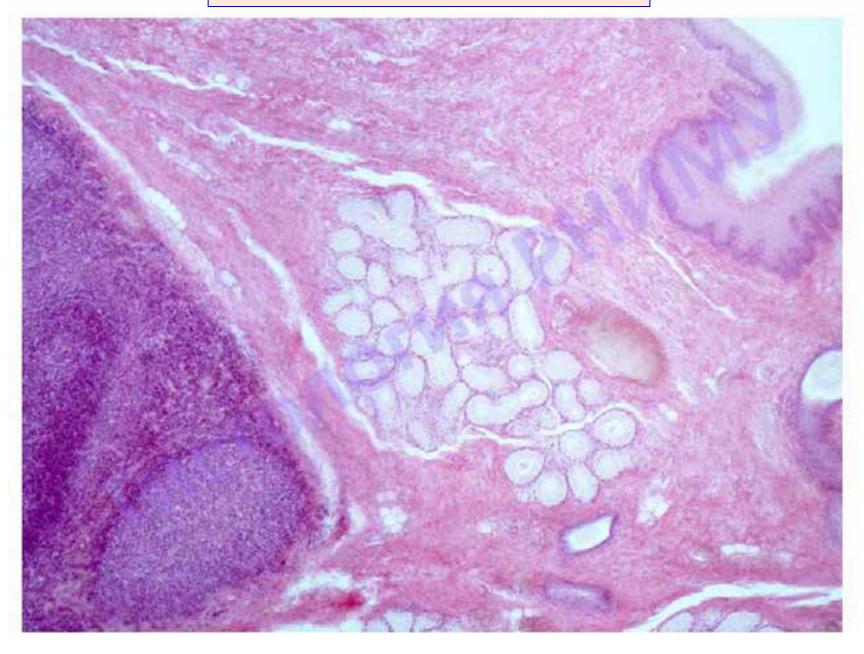


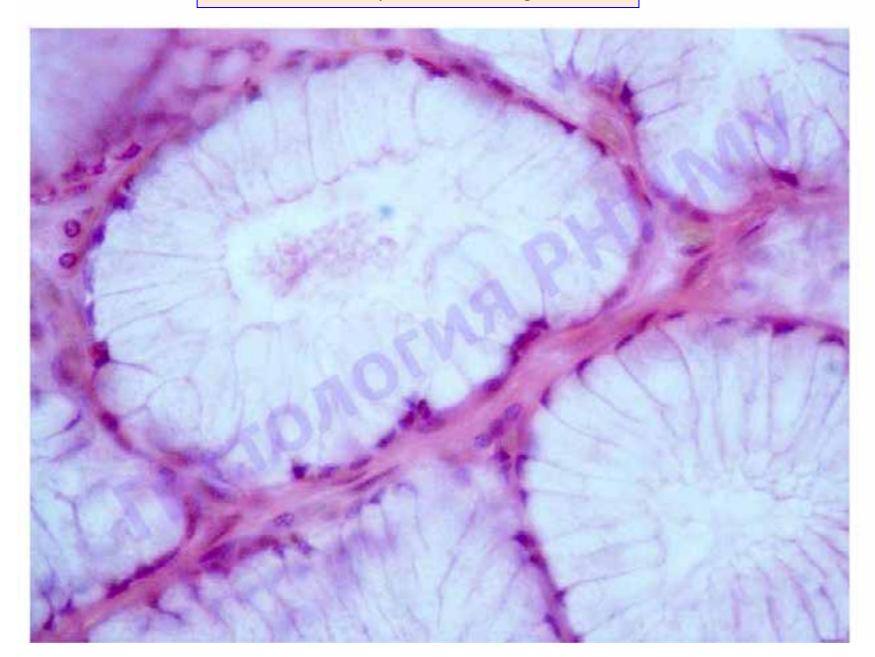


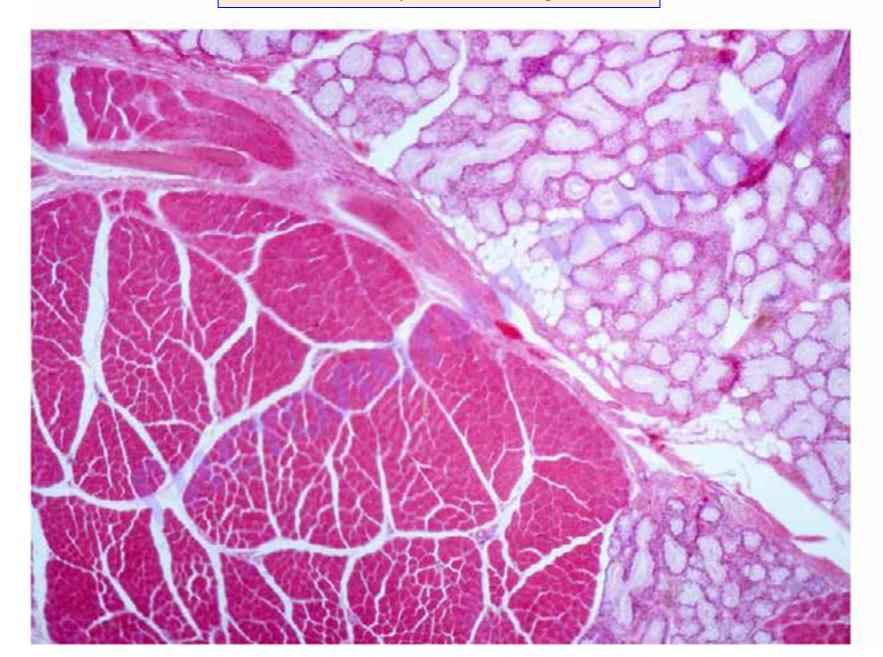


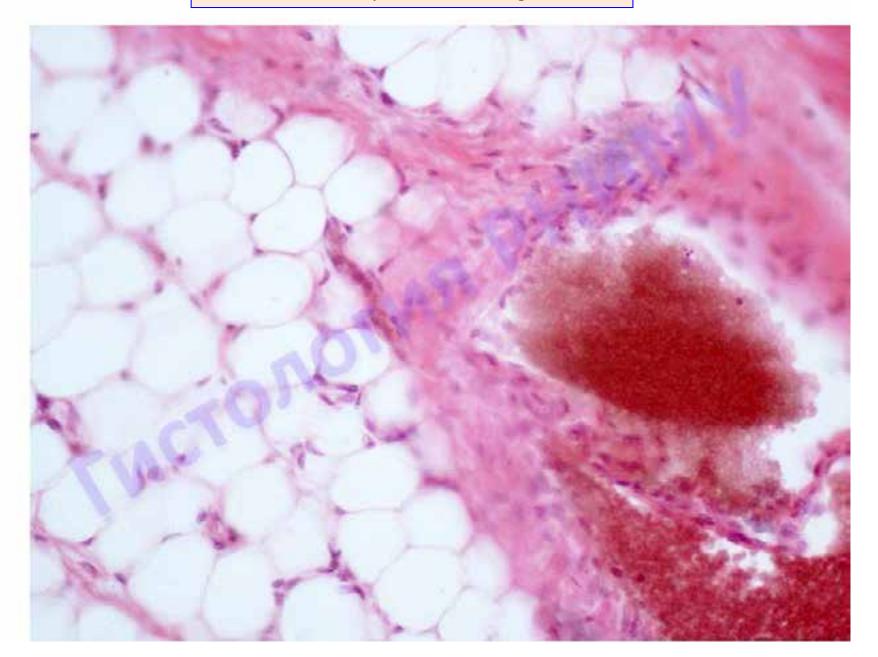




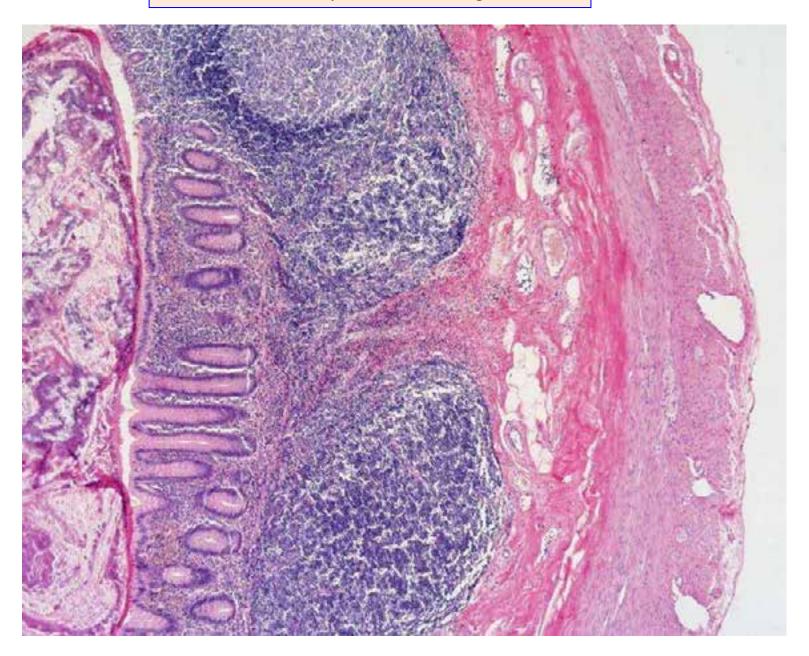


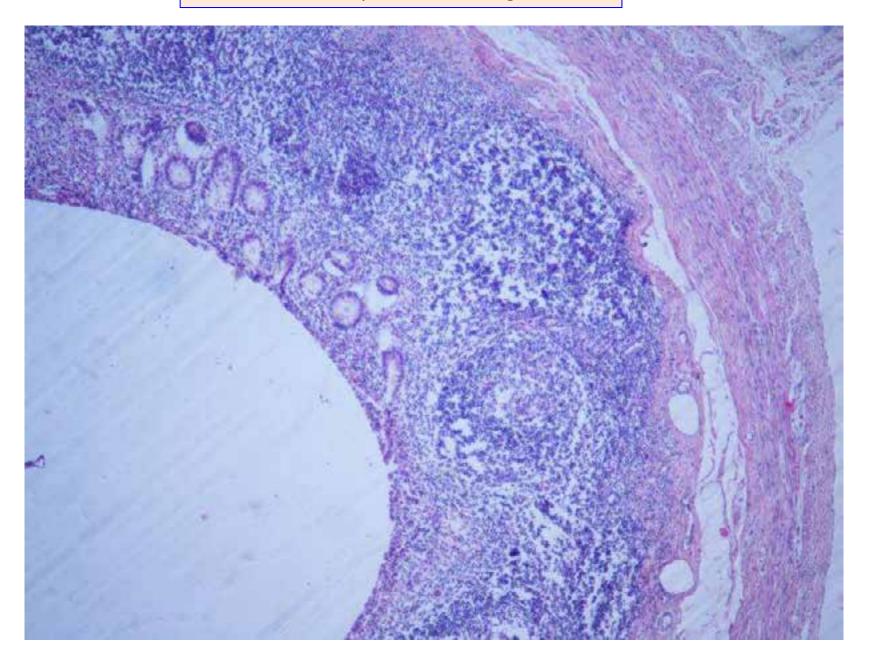


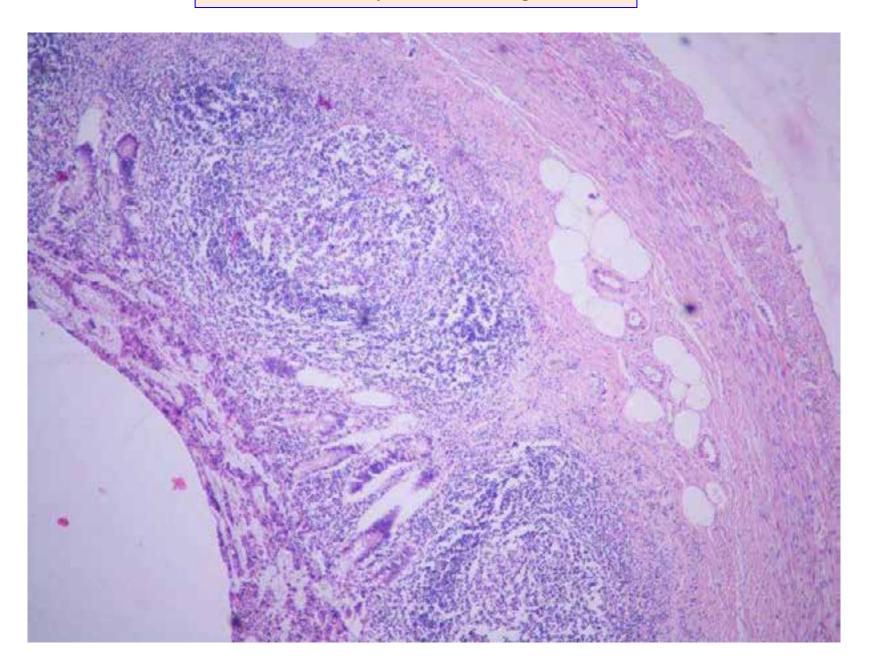












Lymphoid nodules of the gut



