

Tissue concept and classification

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Tissues Concept and Classification

3

důvod

3. PŮVOD TKÁNĚ A JEJICH ROZDĚLENÍ

Tkáně lze definovat jako soustavu morfologicky shodných nebo velmi podobných buňek, které jsou schopny spolupráce, komunikace a vzájemné podpory. Tkaně je vyvíjejí ze zrajících se embryonálních a mezenchymálních buněk.

Mezenchym je základní embryonální tkáň, která vzniká z mezenchymu a tvoří základní strukturu všech tkání. Mezenchym je schopný diferenciací na různé typy tkání, jako jsou svaly, vazivo, kosti, chrupavka, kůže, sliznice, epitel a další.

Epitel je tkáň, která pokrývá povrch těla a tvoří vnitřní povrch všech dutin. Epitel je charakterizován těsnými spoji mezi buňkami a schopností regenerace. Epitel je rozdělen na jednoduchý a složený, plochý a sloupčitý, a dále podle tvaru buňek a způsobu uspořádání.

Epitelová tkáň je tvořena buňkami, které jsou těsně sešitými a mají společný povrch. Epitelová tkáň je rozdělena na jednoduchou a složenou, plochou a sloupčitou, a dále podle tvaru buňek a způsobu uspořádání.

Část II. Čtyři základní typy tkání

Epitelová tkáň

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Svalová tkáň

Svalová tkáň je tvořena svalovými vlákny, která jsou schopna kontrahovat a relaxovat. Svalová tkáň je rozdělena na hladkou, hladkou a hladkou, a dále podle tvaru vláken a způsobu uspořádání.

Vazivná tkáň

Vazivná tkáň je tvořena vazivnými buňkami a vláknem. Vazivná tkáň je rozdělena na volně vazivnou, hustou vazivnou, chrupavku, kosti, chrupavku, kůže, sliznice, epitel a další.

Chrupavková tkáň

Chrupavková tkáň je tvořena chrupavkovými buňkami a vláknem. Chrupavková tkáň je rozdělena na hyalinnou, elastickou, vláknitou a vláknitou, a dále podle tvaru buněk a způsobu uspořádání.

OVERVIEW OF TISSUES

Tissues are aggregates or groups of cells organized to perform one or more specific functions.

At the light microscope level, the cells and extracellular components of the various organs of the body exhibit a recognizable and often distinctive pattern of organization. This organized arrangement reflects the cooperative effort of cells performing a particular function. Therefore, an organized aggregation of cells that function in a collective manner is called a **tissue** (*Fr. tissu, amplex. T. tess, to weave*).

Although it is frequently said that the cell is the basic functional unit of the body, it is really the tissues, through the cellular

Epitelová tkáň

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Vazivná tkáň

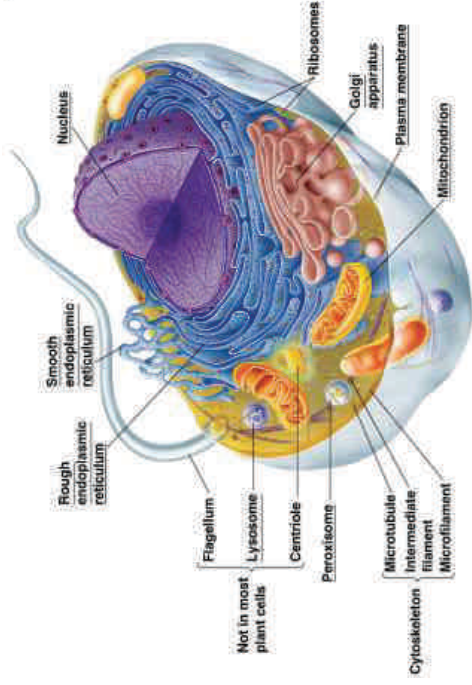
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Chrupavková tkáň

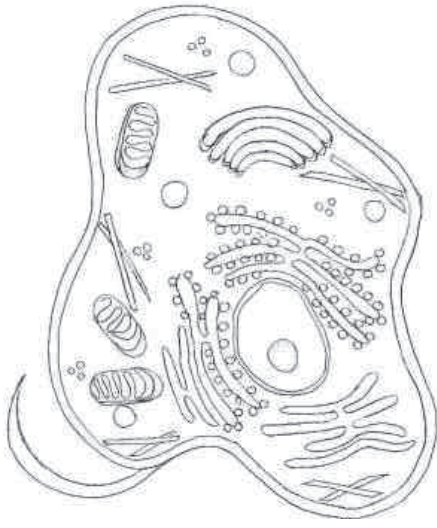
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■ Modern cell theory

- Cells are the **basic units** of any organism
- New cells **origin** only from **other cells**
- Cells **exchange energy** (open thermodynamic system)
- Genetic **information** is **inherited** in new generations
- Chemical and structural composition of cells is generally **identical**

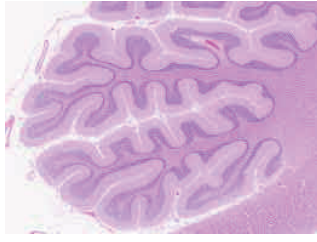
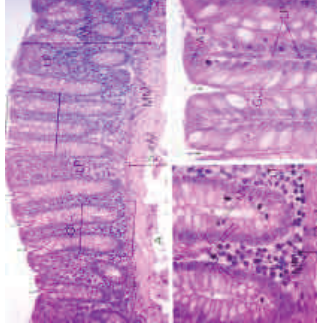
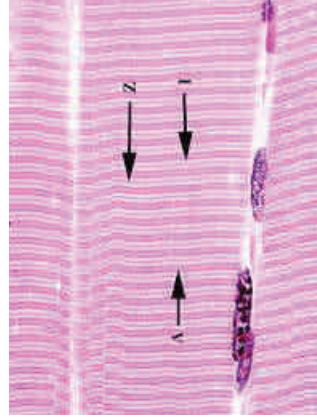


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How do these cells differ?

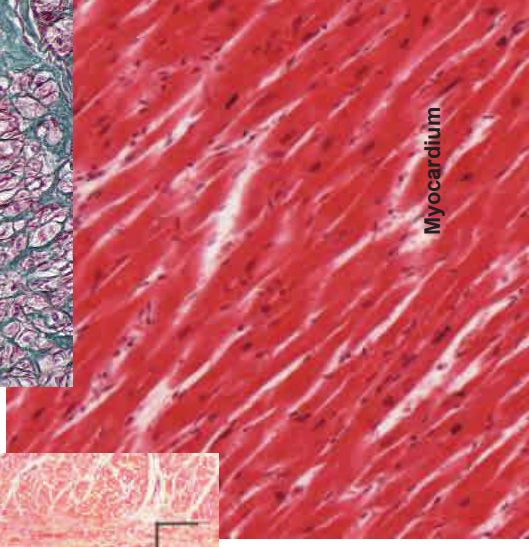
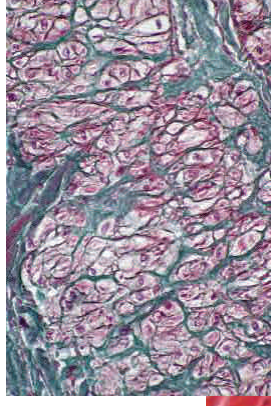
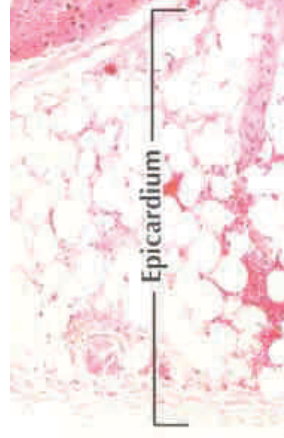
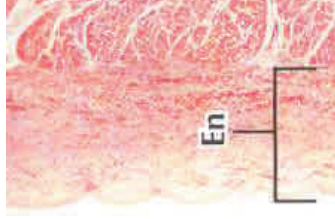
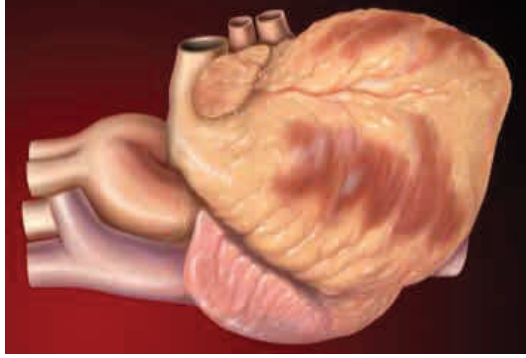
How the variability of a multicellular body develops?



- **Tissues and organs**

- 6×10^{13} **CELLS** of 200 different types

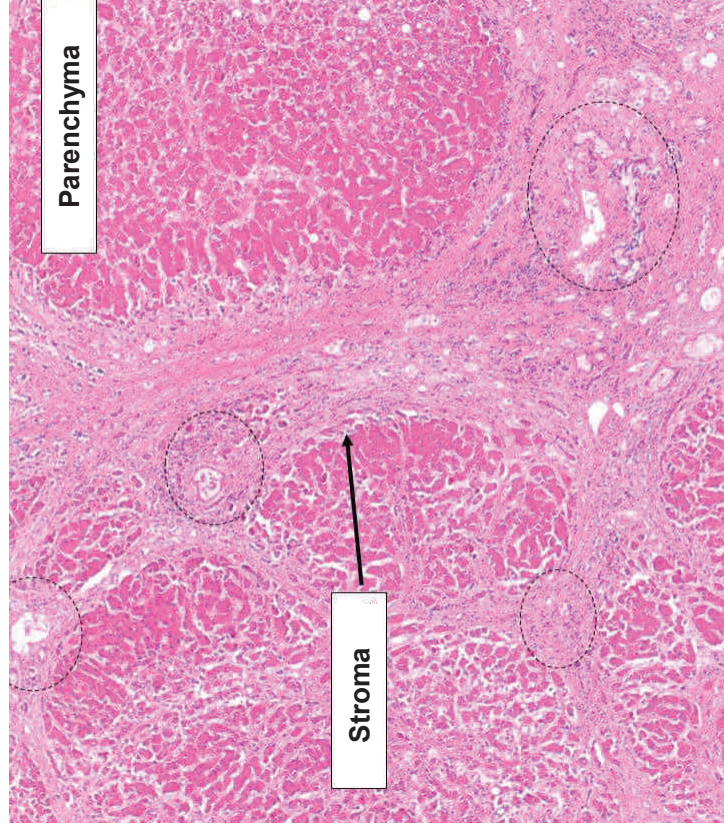
- cells form **functional, three-dimensional, organized** aggregations of morphologically similar cells and their products or derivatives - **TISSUES**
- tissues constitutes **ORGANS** and organ systems



- **Tissues and organs**

Parenchyma: functional component of a tissue (liver, lung, pancreatic, kidney parenchyma)

Stroma: surrounding, supportive tissue



LIVER

Parenchyma:

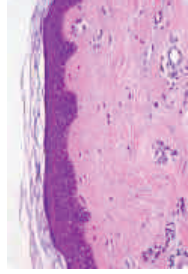
- Hepatocytes
- Sinusoids and adjacent structures

Stroma:

- Connective tissue and adjacent structures
- Vessels
- Nerves
- Bile ducts

Contemporary tissue classification

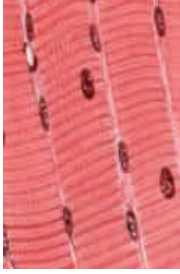
Based on **morphology** and **function**:



Epithelium

Continual, avascular layers of cells with different function, oriented to open space, with specific junctions and minimum of ECM and intercellular space.

Derivates of all three germ layers



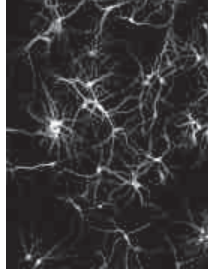
Muscle

Myofibrils → contraction

Mesoderm – skeletal muscle, myocard, mesenchyme

– smooth muscles

Rarely ectoderm (eg. m. sphincter a m. dilatator pupillae)

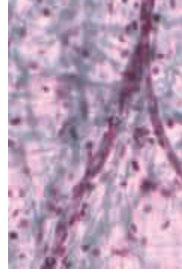


Nerve

Neurons and neuroglia

Reception and transmission of electric signals

Ectoderm, rarely mesoderm (microglia)



Connective

Dominant extracellular matrix

Connective tissue, cartilage, bone...

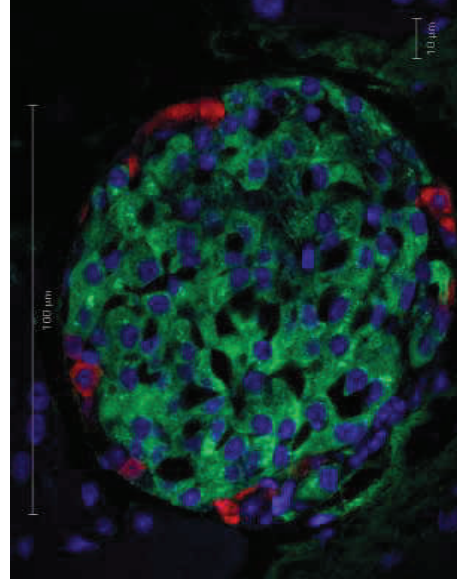
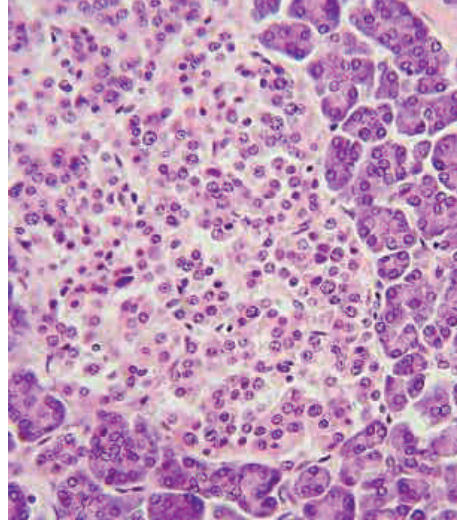
Mesenchyme

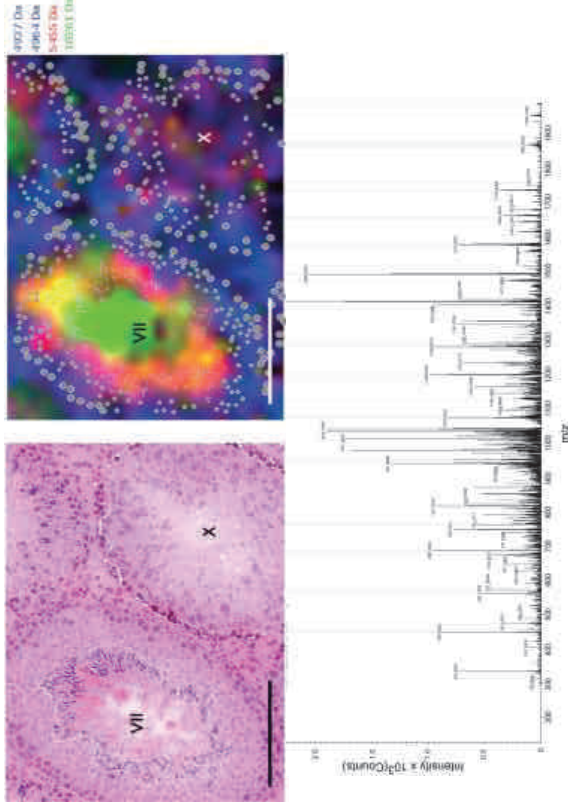
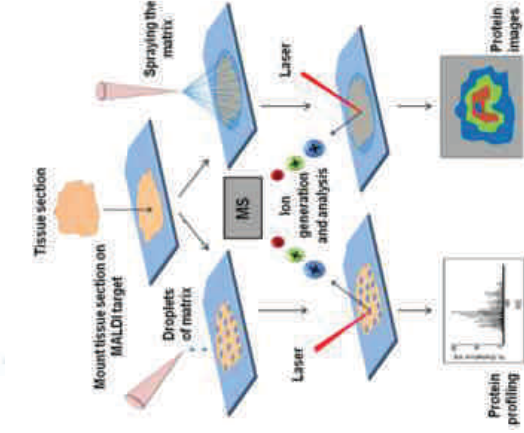
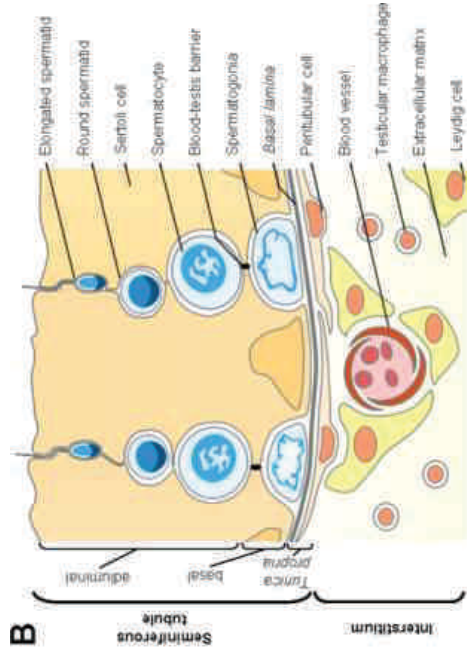
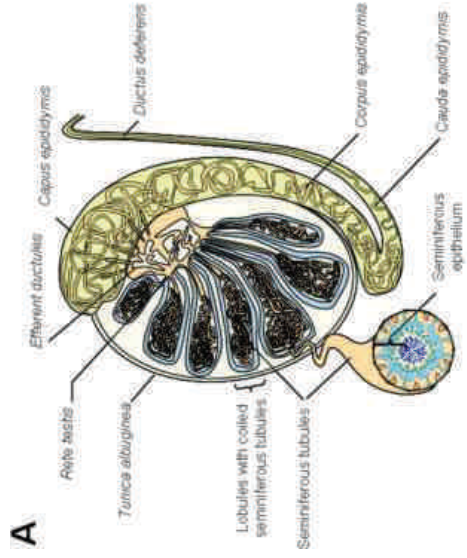
Definition of a tissue

Functional, three-dimensional, organized aggregation of **morphologically similar cells, their products and derivatives**



- classical histological definition is based on microscopic visualization

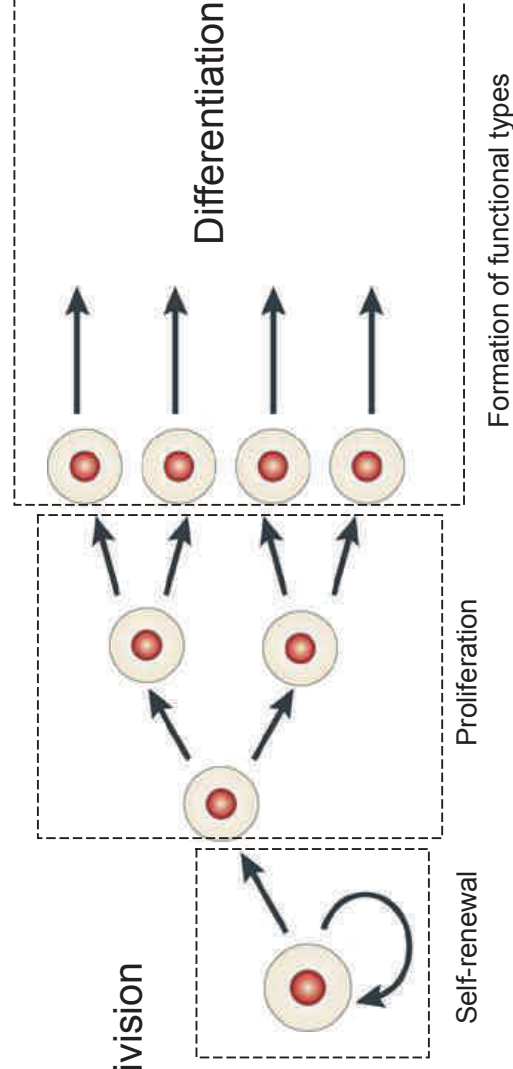




- Functional cells of tissues differentiate from stem cells

Stem cells are capable of **differentiation** and **self-renewal**

Asymmetric division



Stem cells

Totipotent

- Constitute all cells of the body incl. extraembryonic tissues
- Zygote and early stages

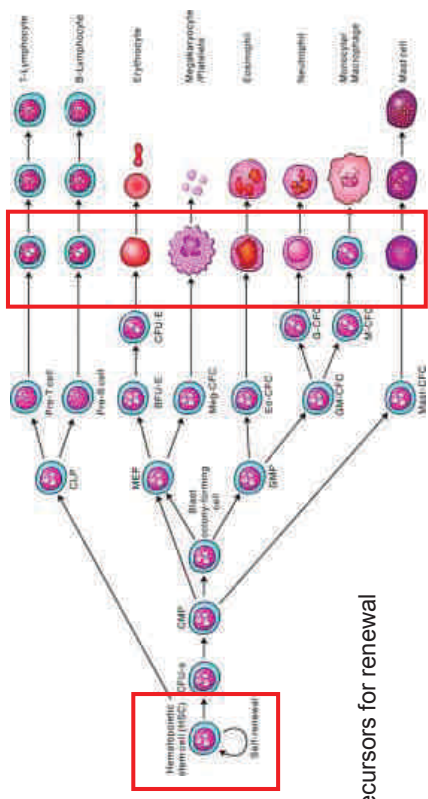


Pluripotent

- All cells in the body except for trophoblast
- Blastocyst – Inner cell mass - ICM (embryoblast)
- Embryonic stem cells

Multipotent

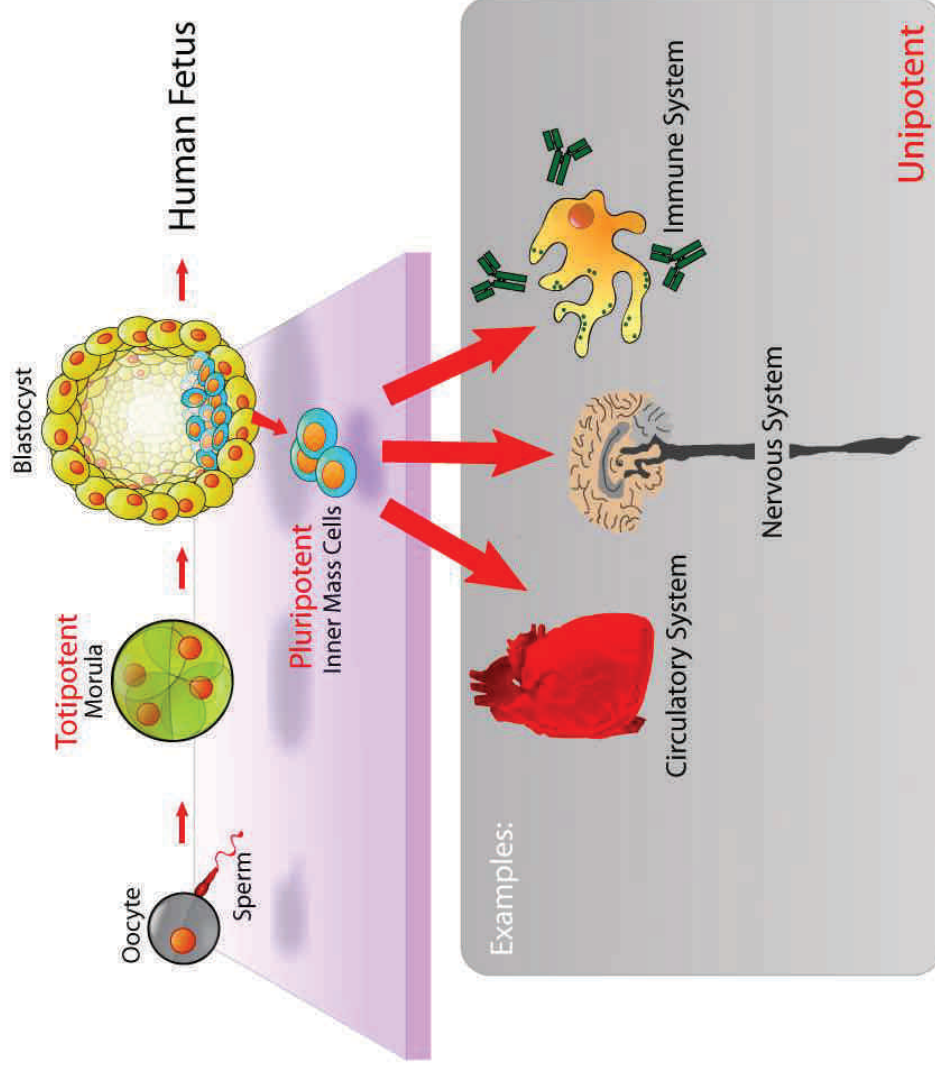
- Give rise to various cell types of a particular tissue
- Mesenchymal SC, hematopoietic SC



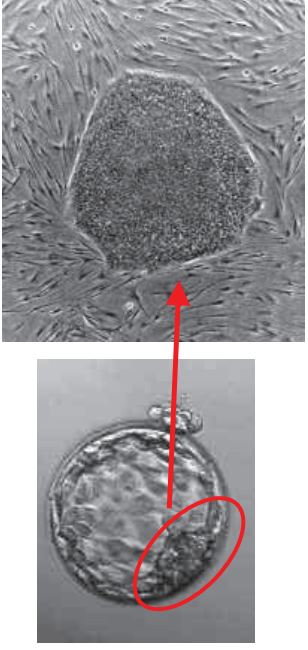
Oligo- a unipotent

- One or several cell types – hematopoietic, tissue precursors for renewal of intestinal epithelia, etc.

<http://www.embryology.ch/anglais/evorimplantation/furchung01.html>



■ Stem cells in human body

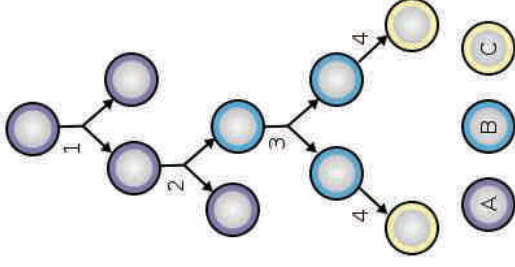
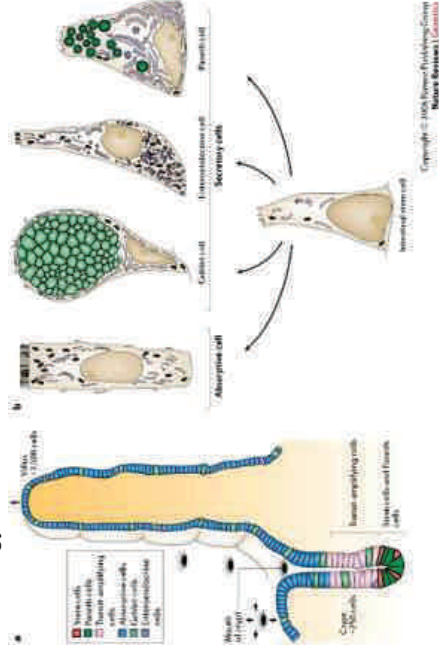


Embryonic stem cells (ESCs)

- embryoblast of blastocyst
- pluripotent
- modelling of early embryogenesis, regenerative medicine

Tissue (adult) stem cells

- regeneration and renewal of tissues
- GIT, CNS, mesenchyme
- regenerative medicine, cancer biology



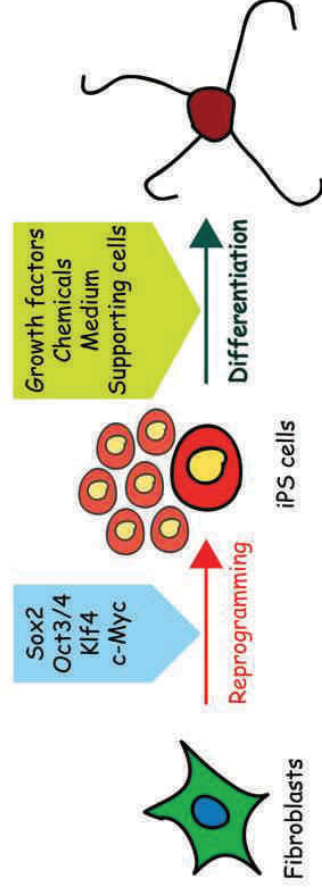
■ Stem cells as a research tool

Induced pluripotent stem cells (iPSC)

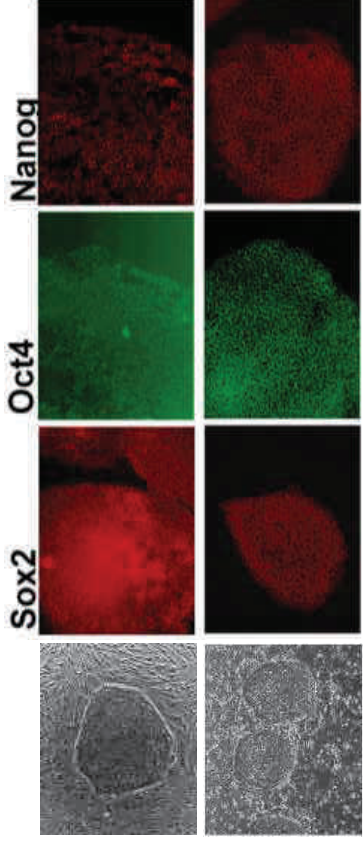
- adult differentiated cell (fibroblast) is reprogrammed into pluripotent state
- differentiation into desired cell type
- regenerative medicine, cell and gene therapy



Nobel prize 2012

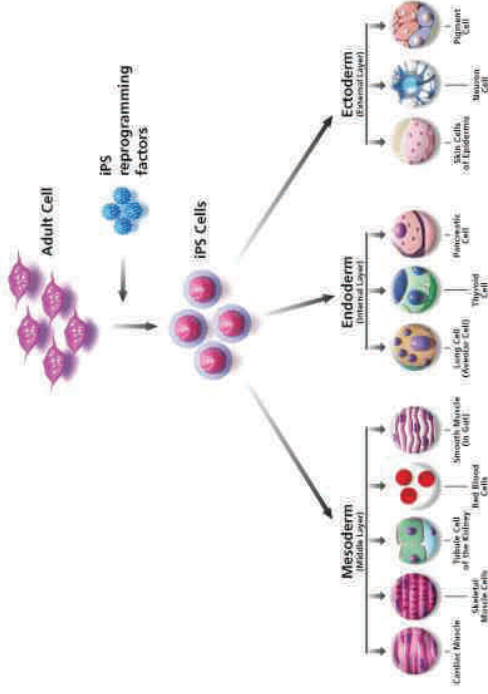


- Induced pluripotent stem cells share biological properties with embryonic stem cells



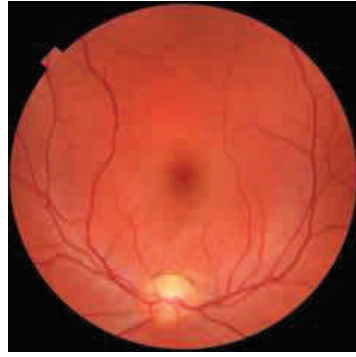
hESCs

hiPSCs



- Stem cells as a therapy

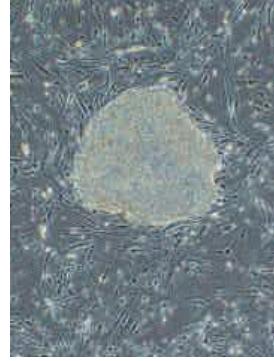
Age-related macular degeneration



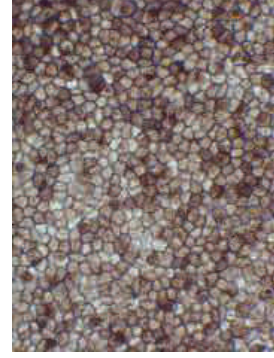
neovascularisation



hiPSCs



Retinal pigment epithelium

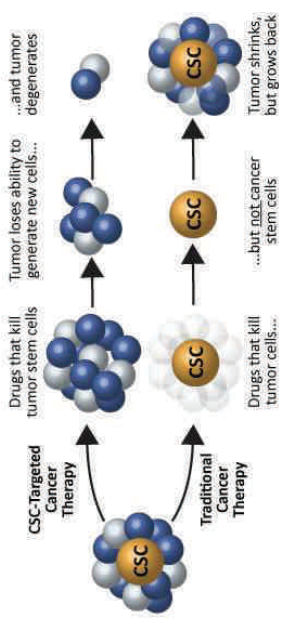


Clinical trial

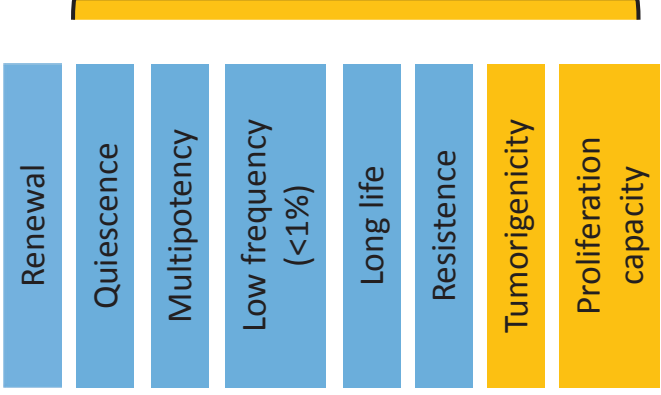
- Stem cells as a foe

Cancer stem cells

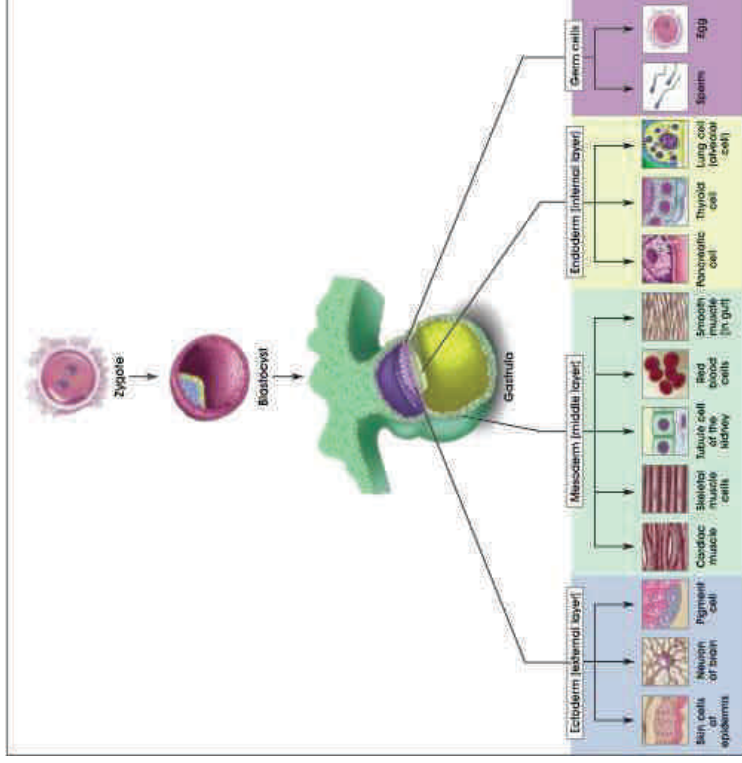
- solid tumor is always heterogeneous
- small population of cells with stem cell character can repopulate tumor tissue after cytotoxic therapy



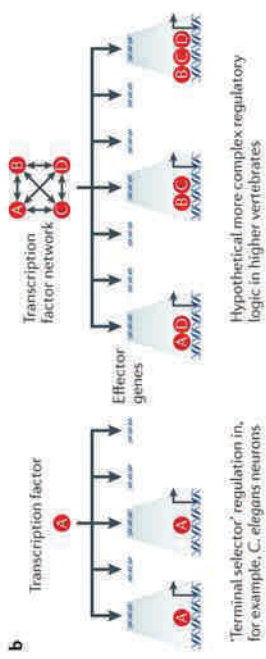
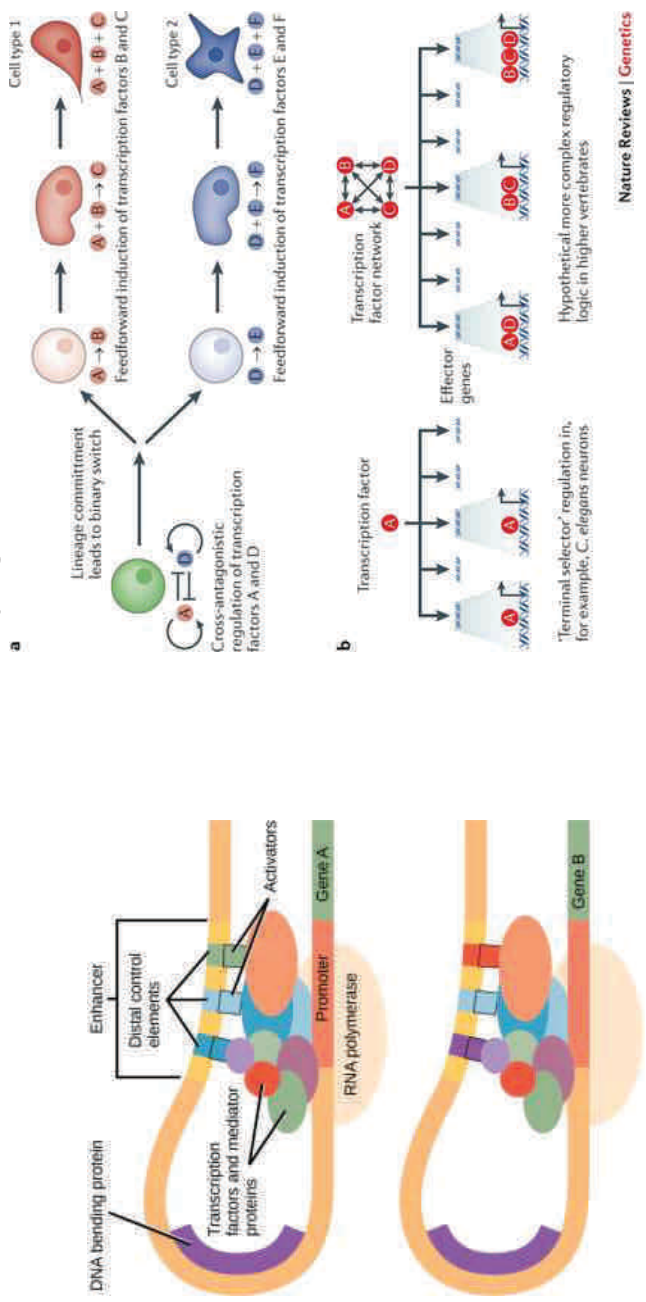
Tissue stem cells



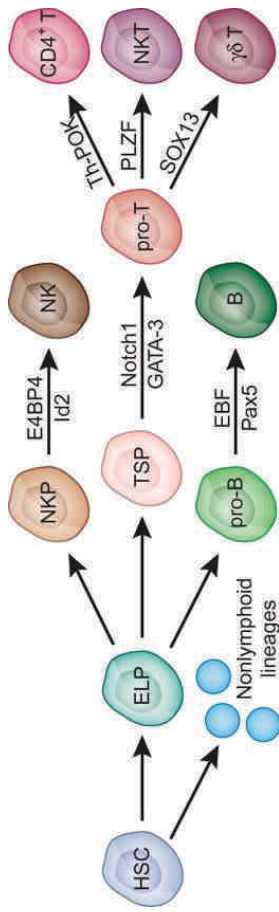
- Why are tissues different?



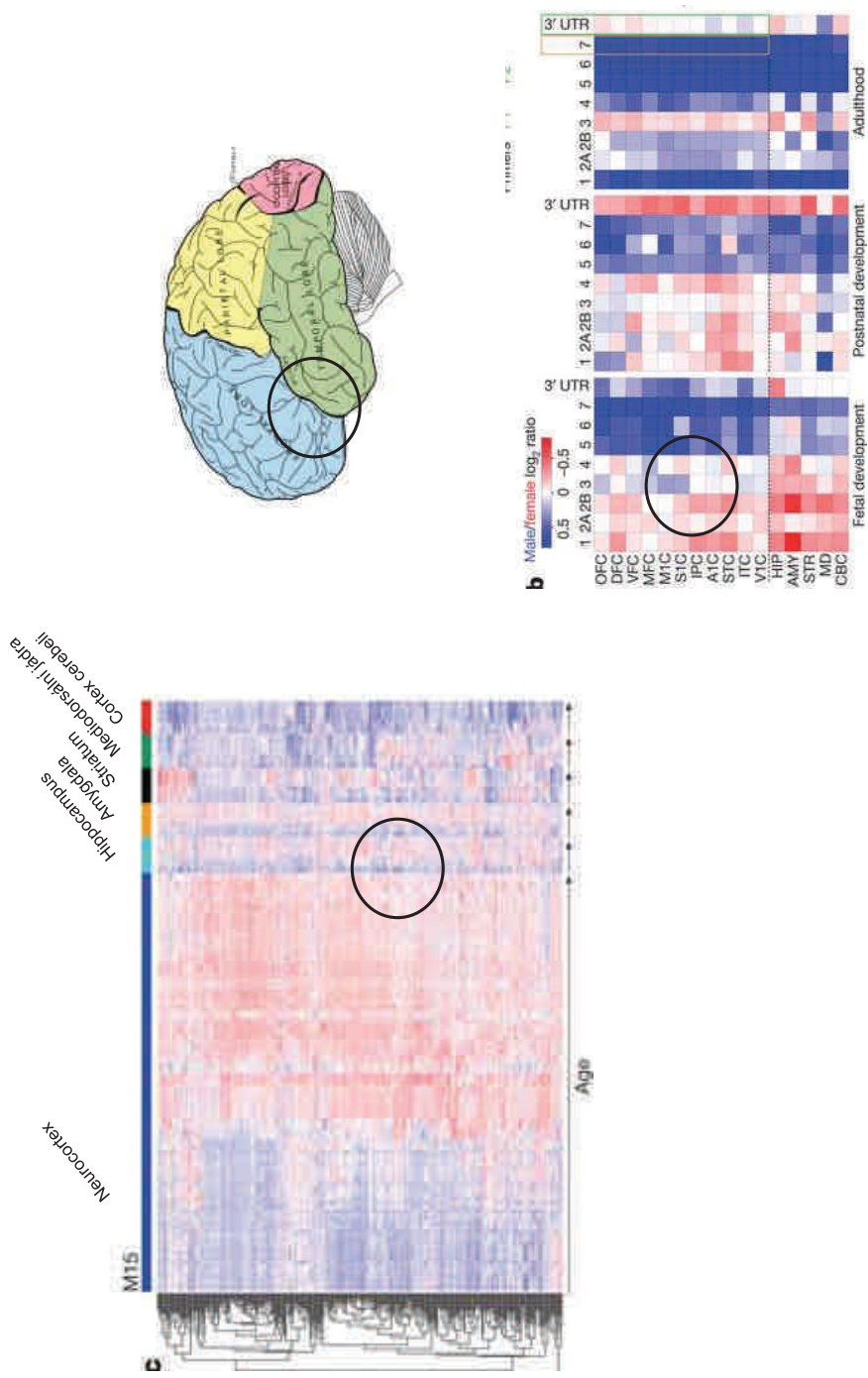
Differentiation is driven by gene transcription



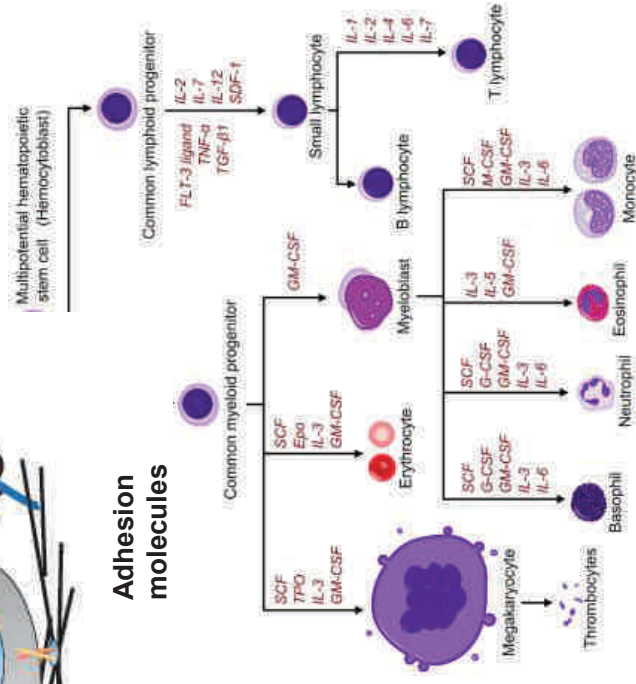
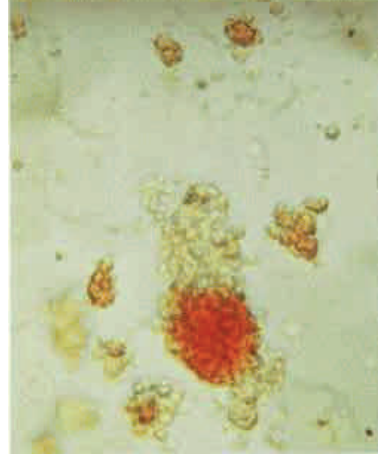
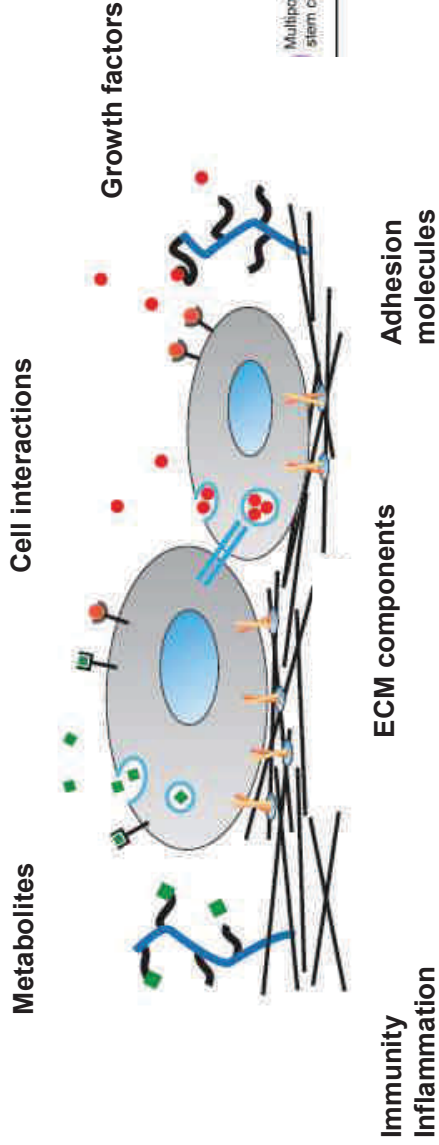
Nature Reviews | Genetics



Tissue differ in their genetic and epigenetic profile



Cells create unique microenvironment



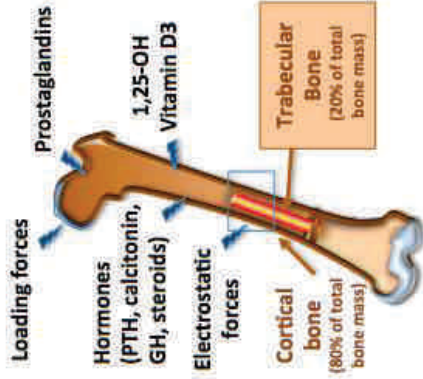
- Microenvironment regulates tissue function and reflects its tissue composition

Huge number of biological and physically-chemical parameters

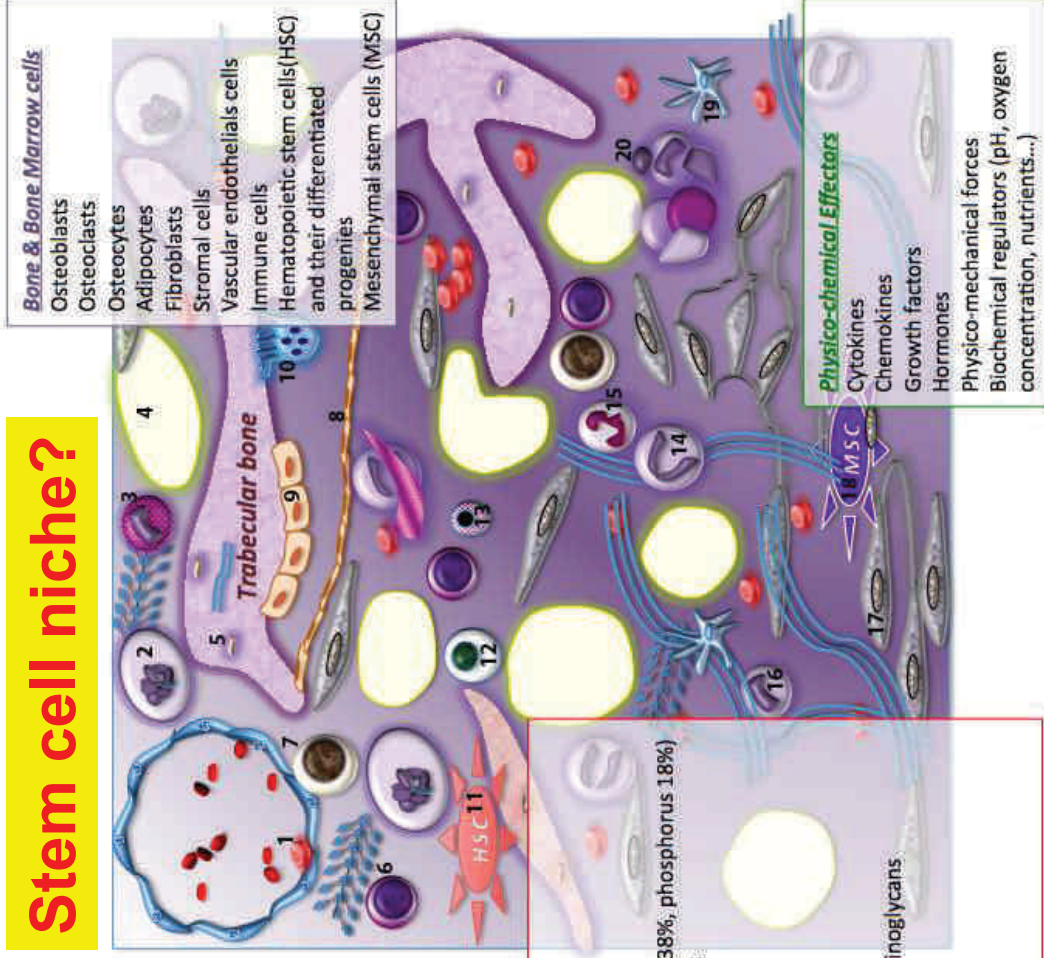
- Embryonic development
- Intercellular interaction
- Space organization (dimensionality)
- Gradient of morphogens
- Epigenetic profile
- Gene expression dynamics
- Partial pressure of gases
- ECM composition
- Mechanical stimulation
- Perfusion and interstitial flows
- Local immunity response
- Metabolites

Stem cell niche

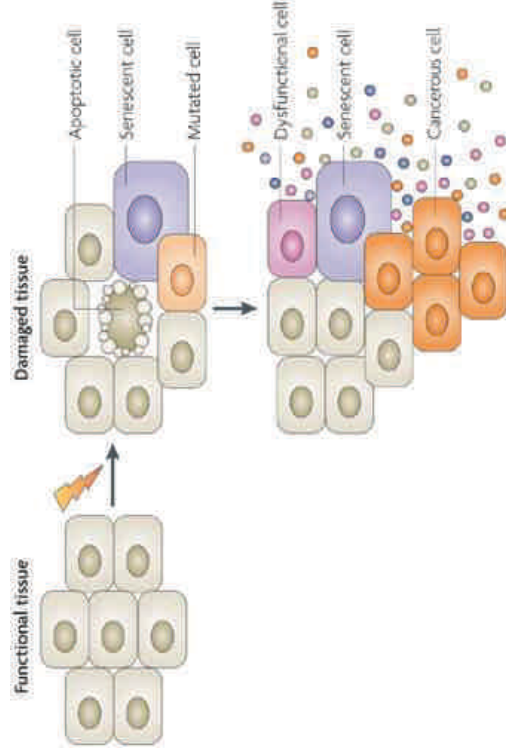
Bone



Stem cell niche?



Microenvironment is necessary for tissue homeostasis



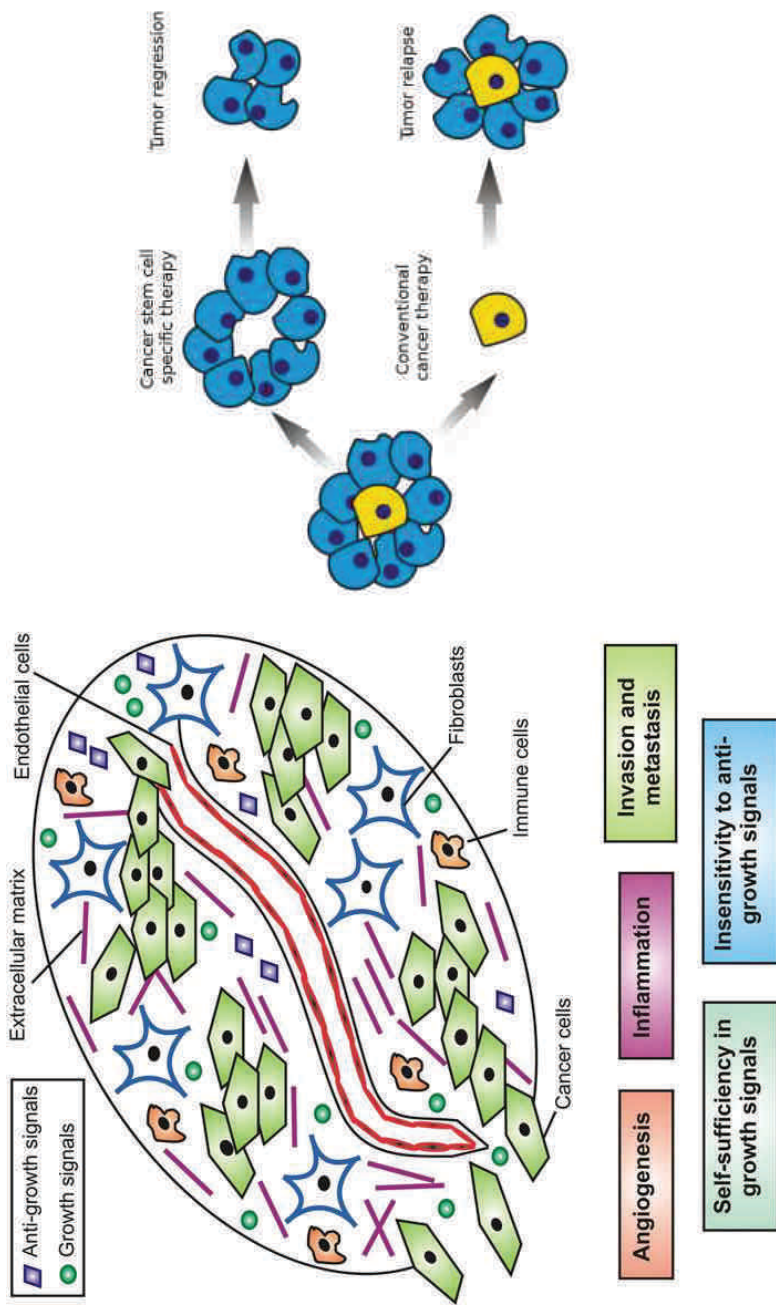
Apoptosis

Regeneration

Senescence

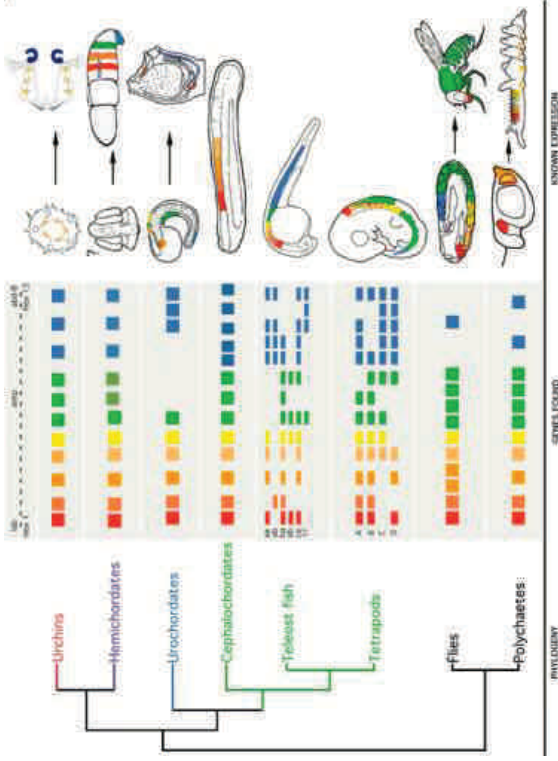
Transformation

Microenvironment is of clinical importance



Molecular principles of histogenesis

Hox complex



Hox genes

Highly conserved family of transcription regulators that determine body polarity, orientation and axis

Tissue differentiation along antero-posterior axis

doi:10.1038/sj.hdy.6800872

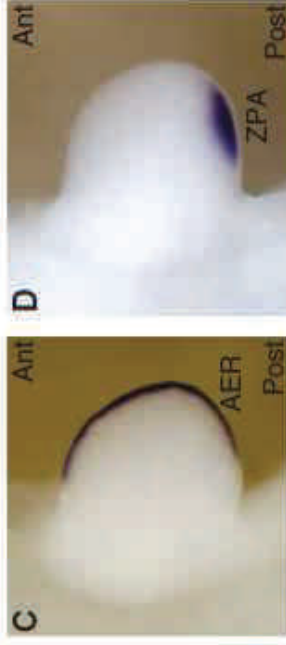
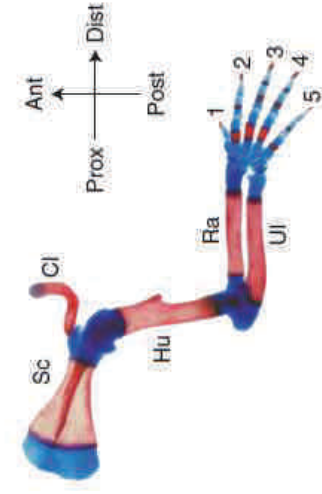
Human (39 genes)		
Cluster	Chromosome	# Hox genes
HoxA	7	11
HoxB	17	10
HoxC	12	9
HoxD	2	9

Congenital disorders and HOX genes

hand-foot-genital syndrome – mutation HOXA13
 synpolydactyly – mutation HOXD13

Microenvironment controls embryonic organogenesis

Apical ectodermal ridge (AER)



Zone of polarizing activity (ZPA)

A Progress zone



AER-FGF

Progenitor domains:

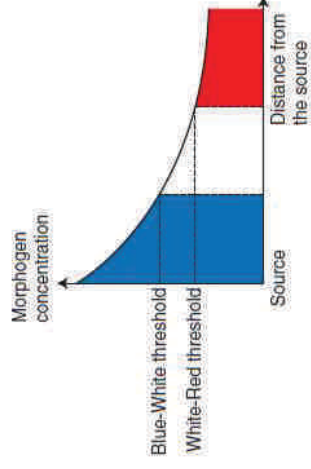
Stylopod

Zeugopod

Autopod



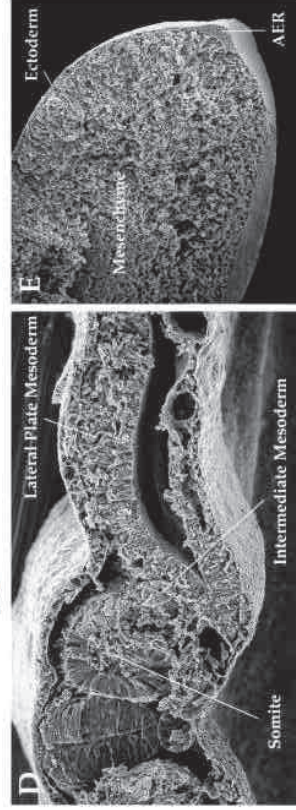
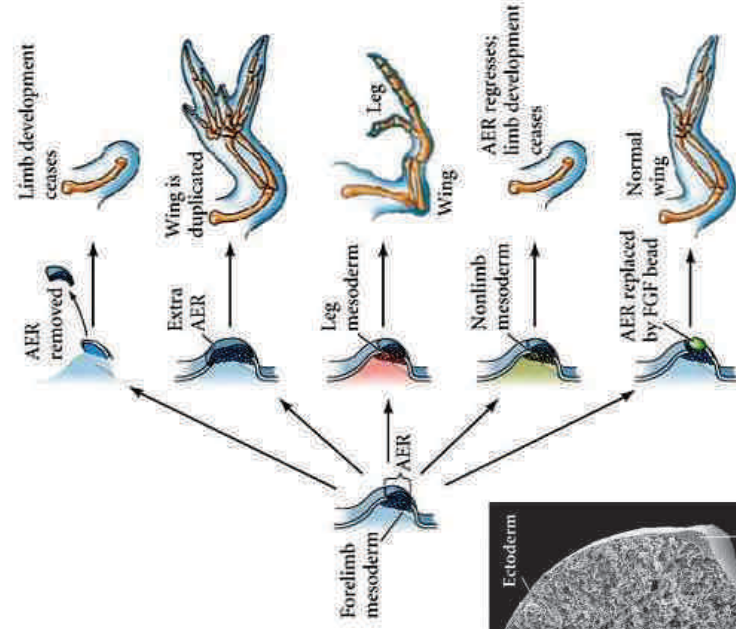
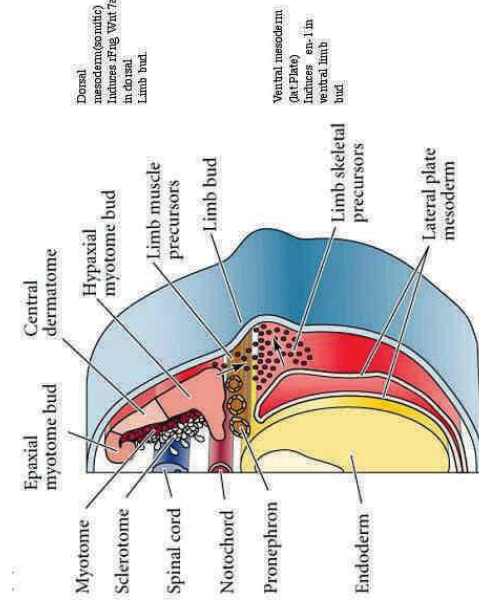
Lewis Wolpert



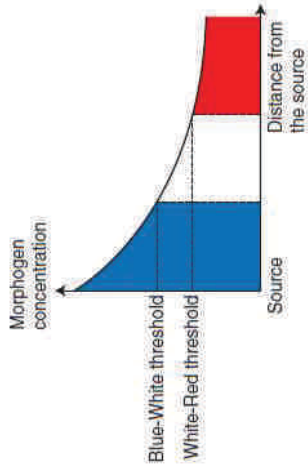
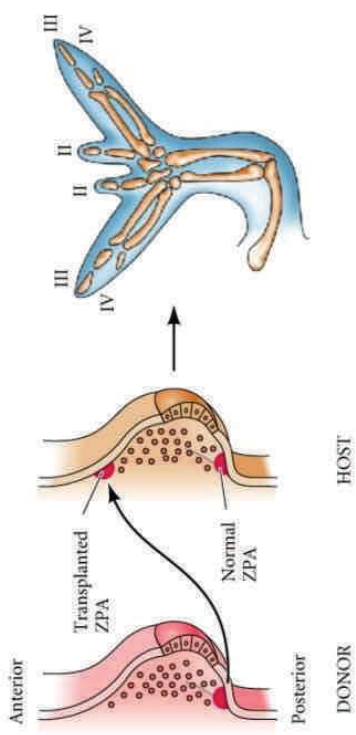
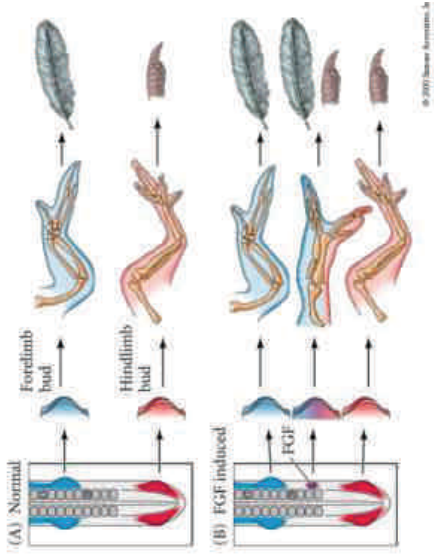
Temporo-spatial expression of different regulators determines final localization, orientation and morphology of a tissue.

French flag model

Manipulation with AER changes the instructions for limb development



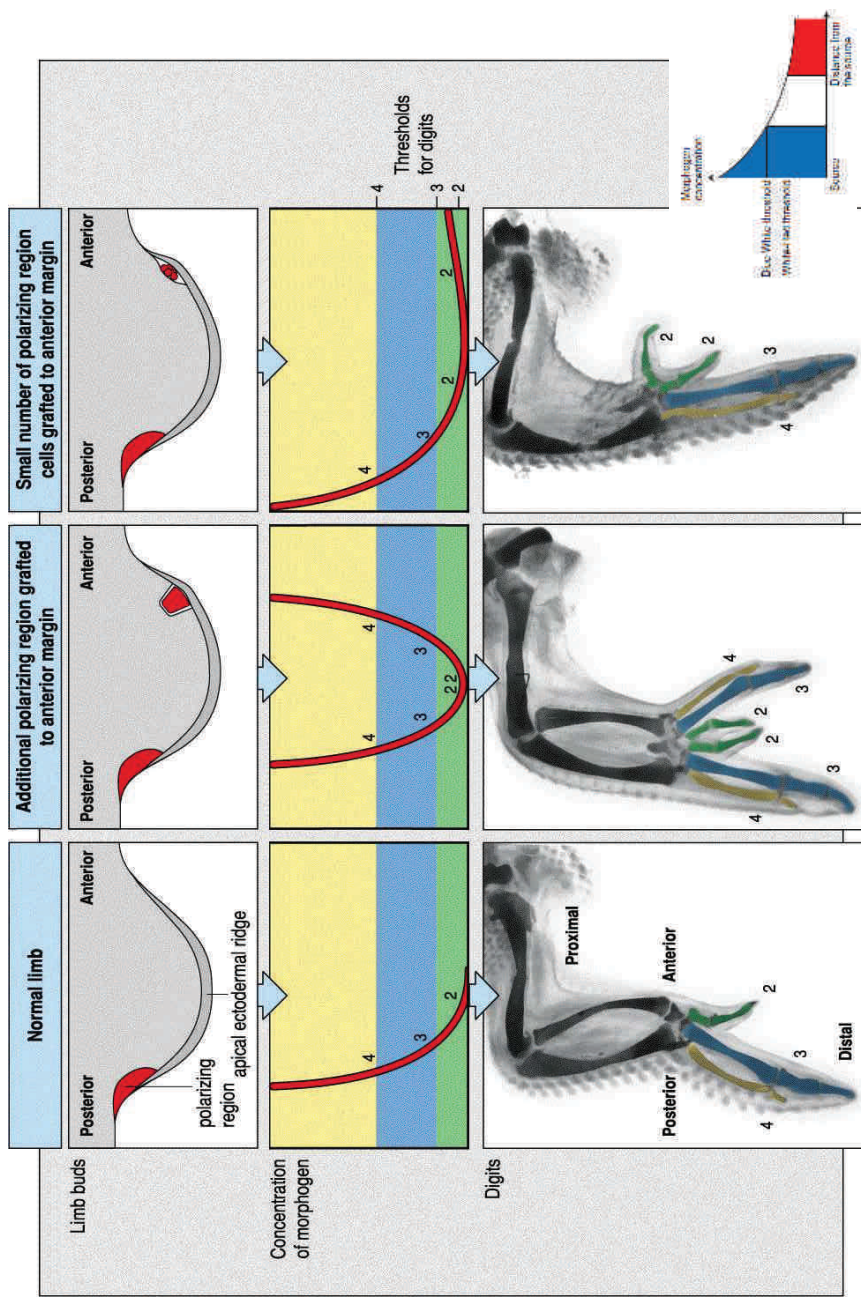
ZPA specifies positional information in limb bud



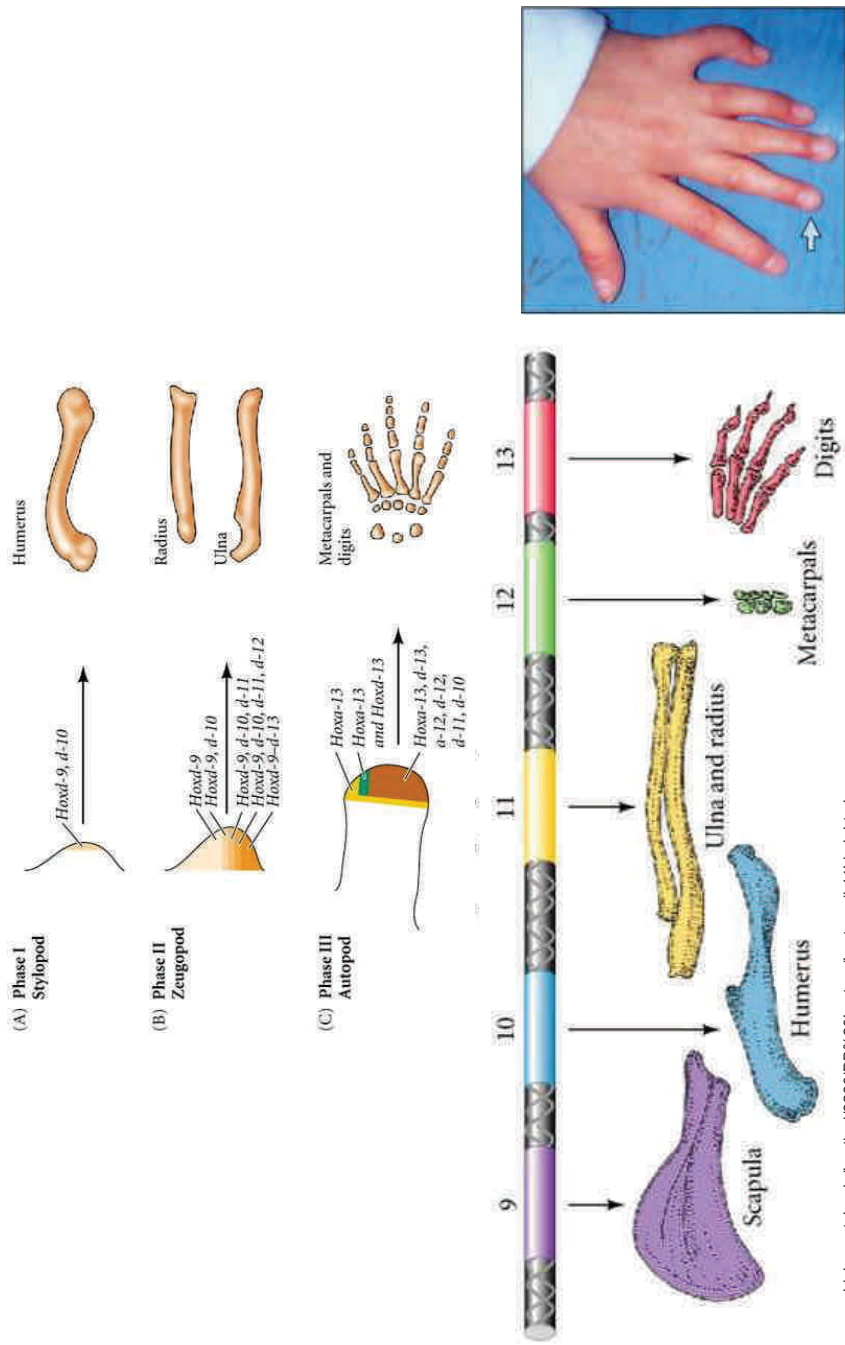
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<http://courses.biology.utah.edu/bastiani/3230/DB%20Lecture/Lectures/b14Limb.html>

Gradients of morphogenes from AER and ZPA defines limb formation

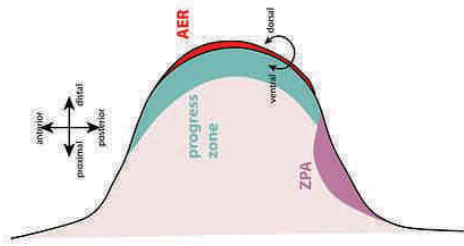
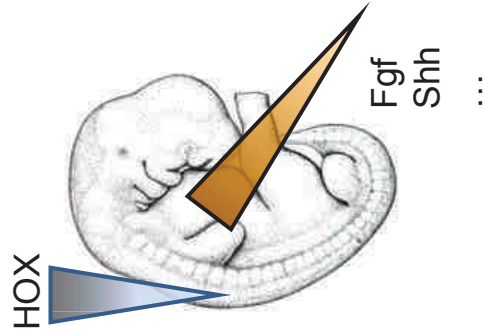


Hox pattern represent the transcription response and induces differentiation to cartilage and muscles



<http://courses.biology.utah.edu/bastiani/3230/DB%20Lecture/Lectures/b14Limb.html>

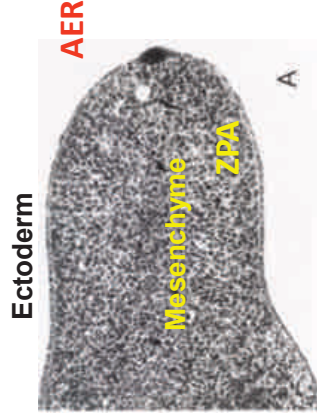
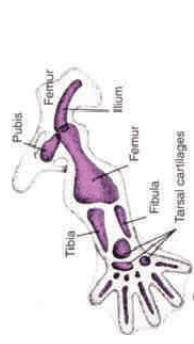
Thalidomid



Proliferation
↑
Vascularisation



Thalidomid



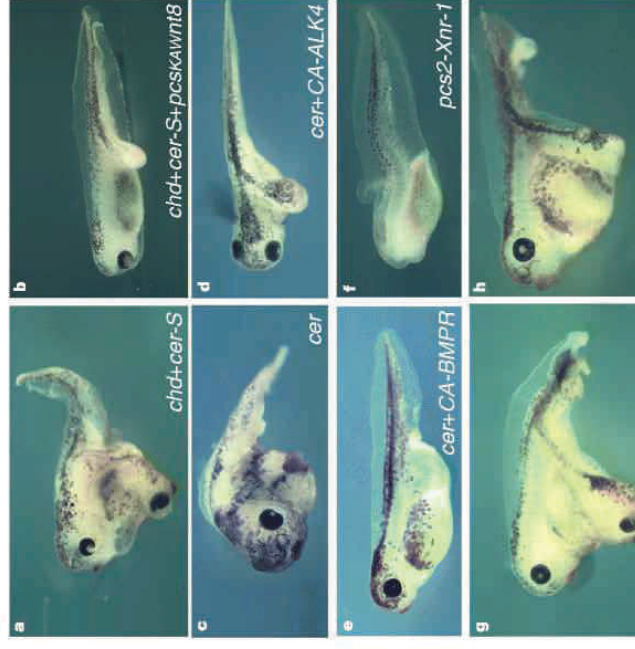
■ Morphogenes in notochord-neural tube formation



- Noggin *Xenopus laevis* notochord

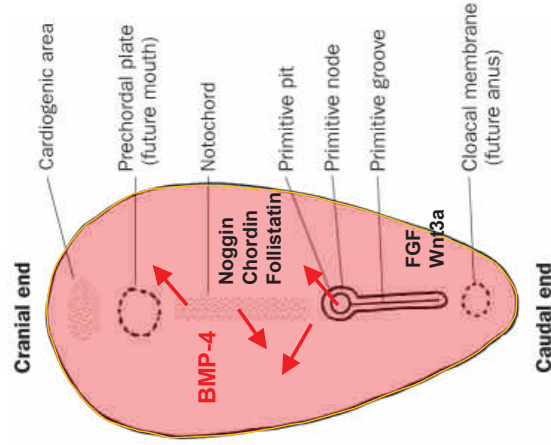
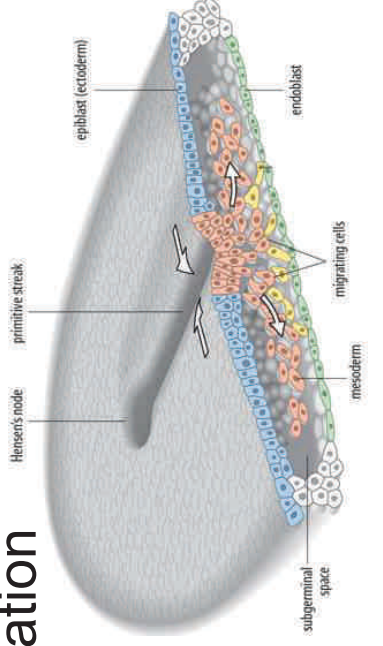
- Body axes
- Segmentation
- Limb buds

- Protein *Cerberus* induces head formation (*Danio reio*)



The head inducer *Cerberus* is a multifunctional antagonist of *Nodal*, *BMP* and *Wnt* signals
 Stefano Piccolo, Eric Agius, Luc Leyns, Subha Bhattacharyya, Horst Grunz, Tewlis Bouwmeester and E. M. De Robertis
Nature **397**, 707-710(25 February 1999)
 doi:10.1038/17820

■ Neurulation



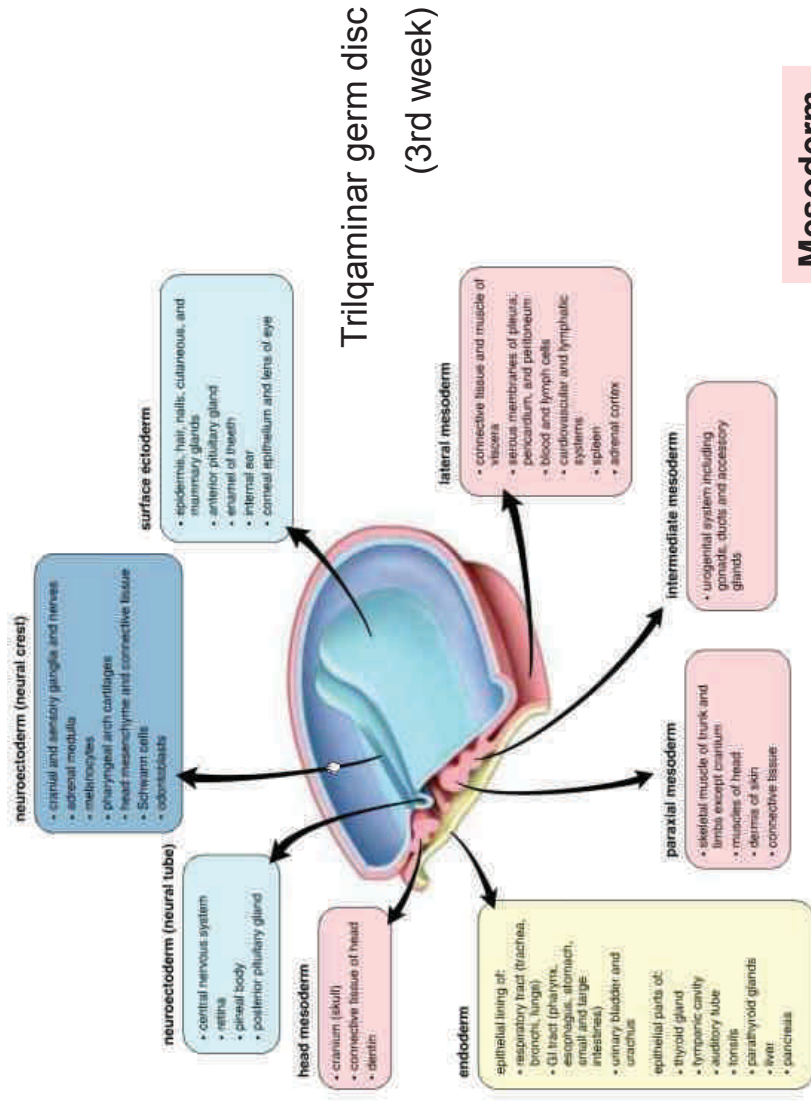
BMP-4

In whole embryo, ventralisation of endo- a mesoderm

- In developing notochord, primitive pit, prechordal mesoderm
- Inhibit BMP-4
- Neurulation of ectoderm, development of fore- and midbrain

- Caudal neural structures – hindbrain and spinal cord

Histogenesis and organogenesis



Trilaminar germ disc
(3rd week)

Ectoderm

Entoderm

Mesoderm

Embryonic development

Ectoderm

- Epidermis, hair nails, cutaneous and mammary glands
- Corneal epithelium and lens of eye
- Enamel of teeth
- Internal ear
- Anterior pituitary gland
- Epithelium of oral cavity and part of anal canal

Neuroectoderm

- **Neural tube** and derivatives
- CNS
- Retina
- Posterior pituitary gland
- Pineal body
- **Neural crest** and derivatives:
 - Cranial and sensory ganglia and nerves
 - Schwann cells
 - adrenal medulla
 - Enterodocrine cells
 - Melanocytes
 - Head mesenchyme and connective tissue
 - Odontoblasts

Mesoderm

- Connective tissue of head
- Cranium, dentin
- Skeletal muscle of trunk and limbs except cranium
- Dermis of skin
- Muscles of head

Intermediate

- Urogenital system + ducts, glands and gonads

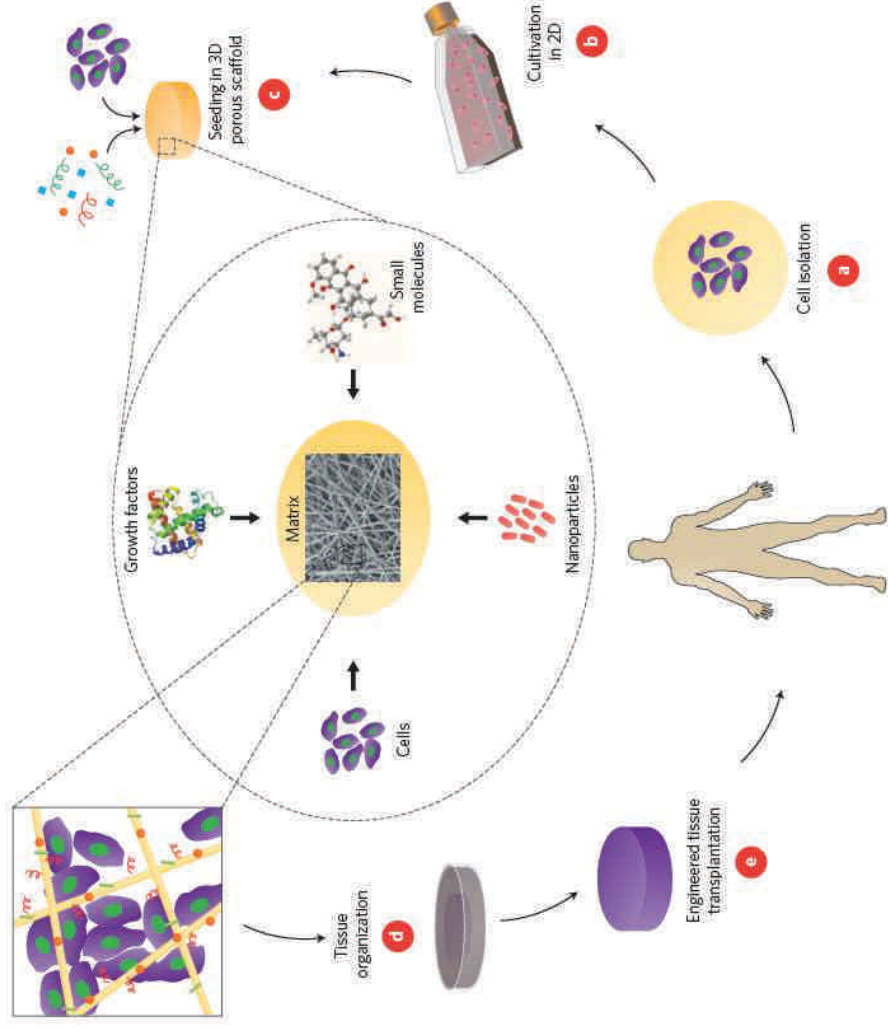
Lateral

- Visceral muscle and connective tissue
- Serous membranes of pleura, peritoneum and pericardium
- Blood cells, leukocytes
- Cardiovascular and lymphatic system
- Spleen
- Adrenal cortex

Endoderm

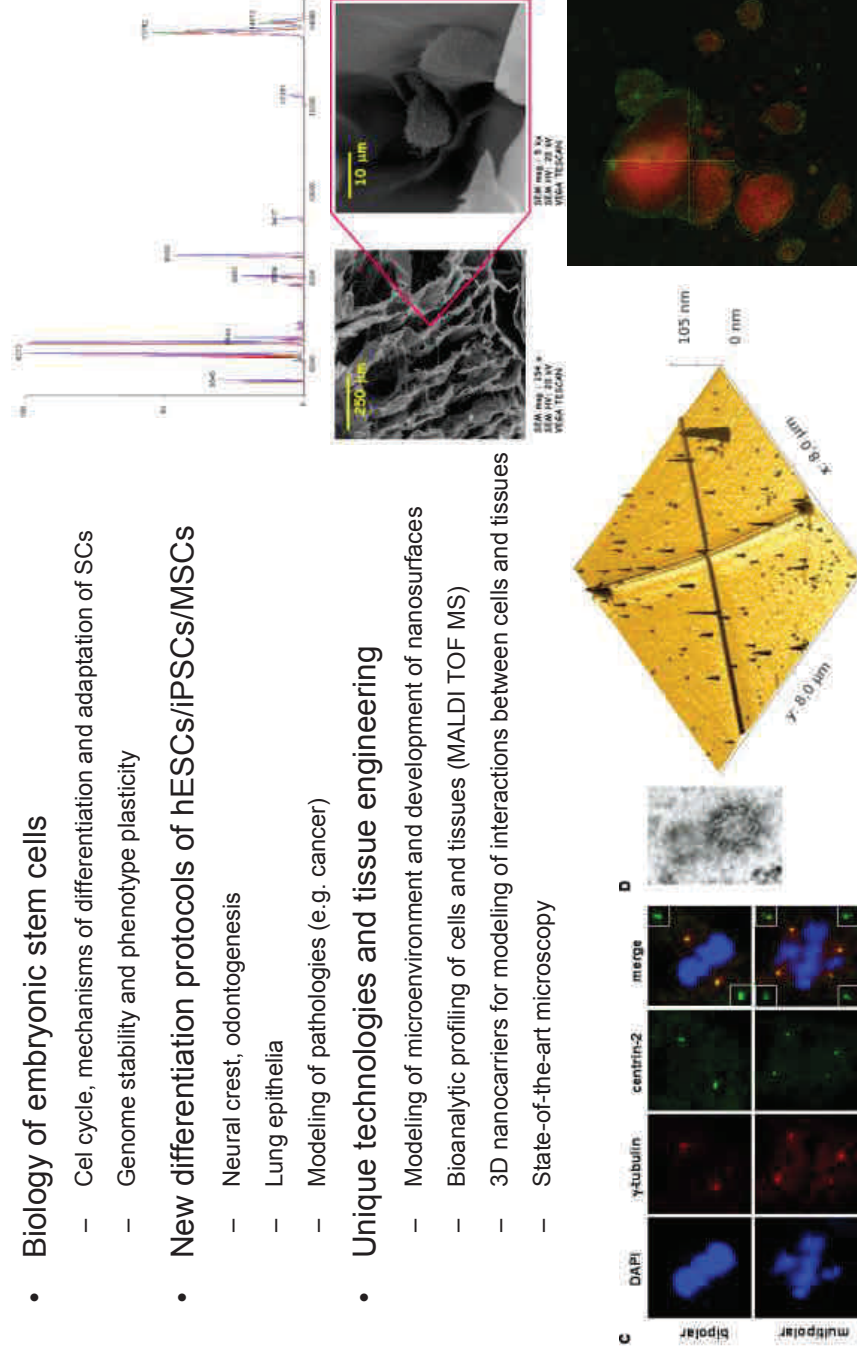
- GIT epithelium except oral cavity and part of anal canal
- Extramural glands of GIT
- Epithelium of bladder
- Epithelium of respiratory system
- Thyroid gland, parathyroid glands, thymus
- Tonsils
- Epithelium of cavum tympani and Eustachian tube

Tissue engineering

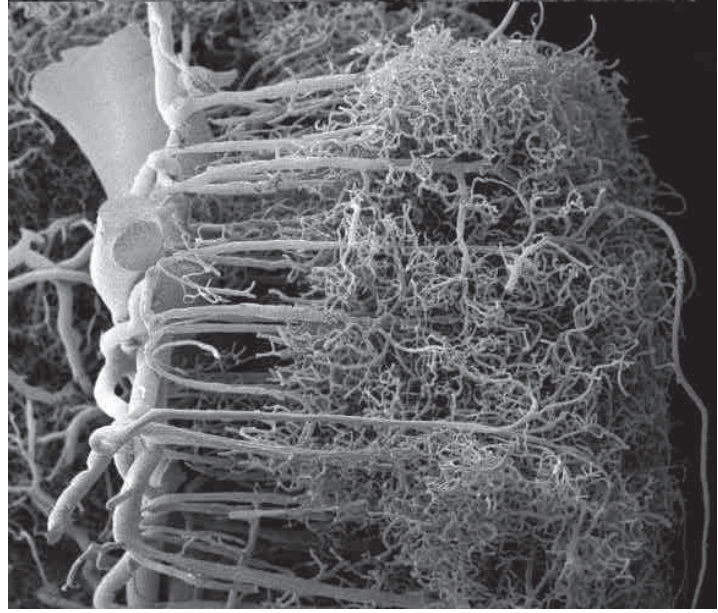


Current histology and tissue engineering at Dpt. of histology and embryology LF MU

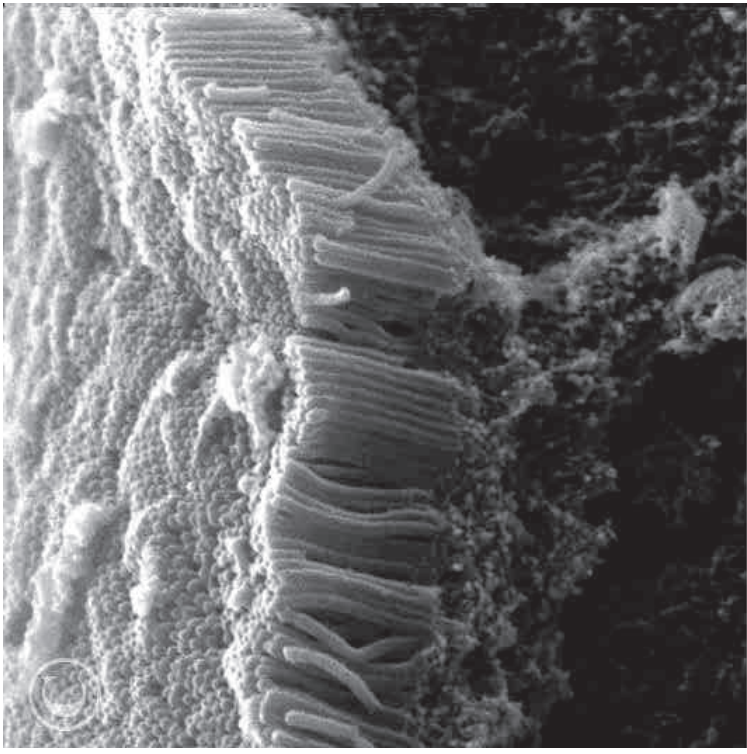
- Biology of embryonic stem cells
 - Cell cycle, mechanisms of differentiation and adaptation of SCs
 - Genome stability and phenotype plasticity
- New differentiation protocols of hESCs/iPSCs/MSCs
 - Neural crest, odontogenesis
 - Lung epithelia
 - Modeling of pathologies (e.g. cancer)
- Unique technologies and tissue engineering
 - Modeling of microenvironment and development of nanosurfaces
 - Bioanalytic profiling of cells and tissues (MALDI TOF MS)
 - 3D nanocarriers for modeling of interactions between cells and tissues
 - State-of-the-art microscopy



Break



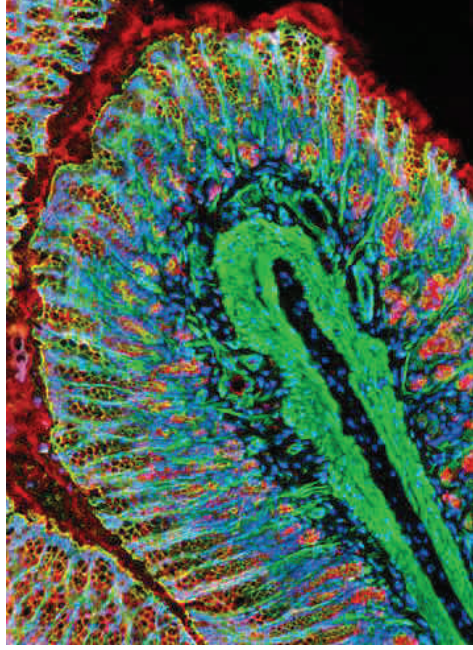
Isocortex vascularisation



PS200132 [RM] © www.visualphotos.com

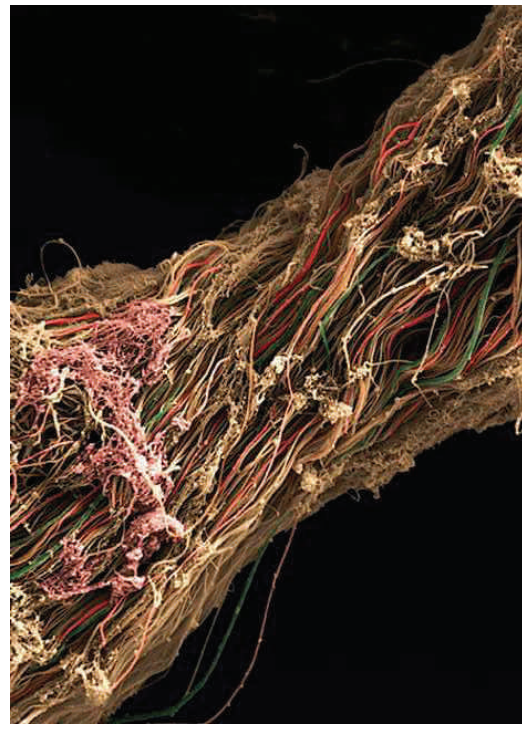
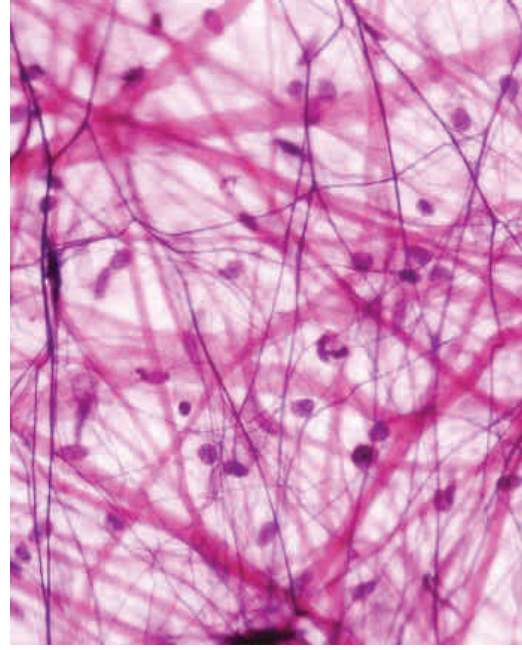
Microvilli on surface of small intestine

<http://www.livescience.com/14413-brain-images-portraits-mind.html>



6. Connective tissue

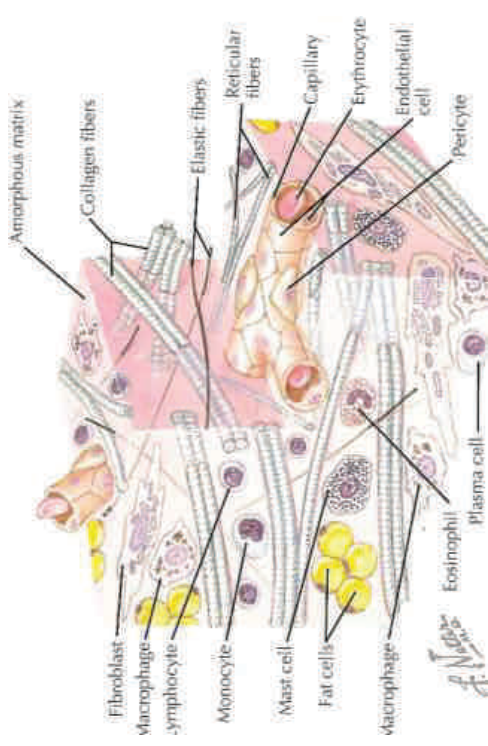
Not only a tissue glue...



■ Connective tissue

Mechanical and biological properties

→ surrounds other tissues, compartmentalization, support, physico-chemical environment, immunological support, storage



■ General composition of connective tissue (CT)

Cells and extracellular matrix

- **Cells**

Connective tissue – permanent and transient cell populations (fibroblasts/myofibroblasts, immune cells, adipocytes, adult stem cells)

Cartilage – chondroblasts/chondrocytes

Bone – osteoblasts/osteocytes/osteoclasts

- **Matrix** – fibrous and amorphous

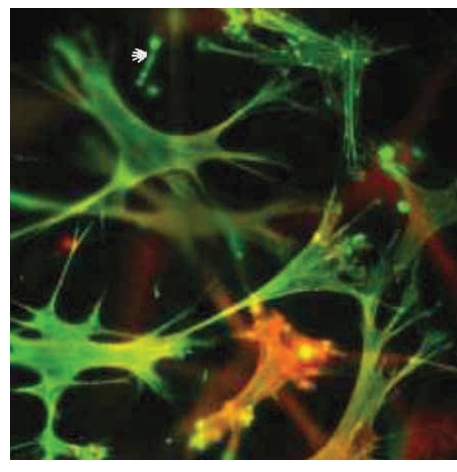
Fibrous component

- collagen
- reticular
- elastic

Amorphous component (amorphous ground substance)

- Complex matrix consisting of glycosaminoglycans, glycoproteins and proteoglycans,

depending on tissue type (connective × ligament × cartilage × bone)



■ Classification of CT

Embryonic CT

- Mesenchyme
- Jelly-like CT (Wharton jelly, dental pulp, stroma of iris)

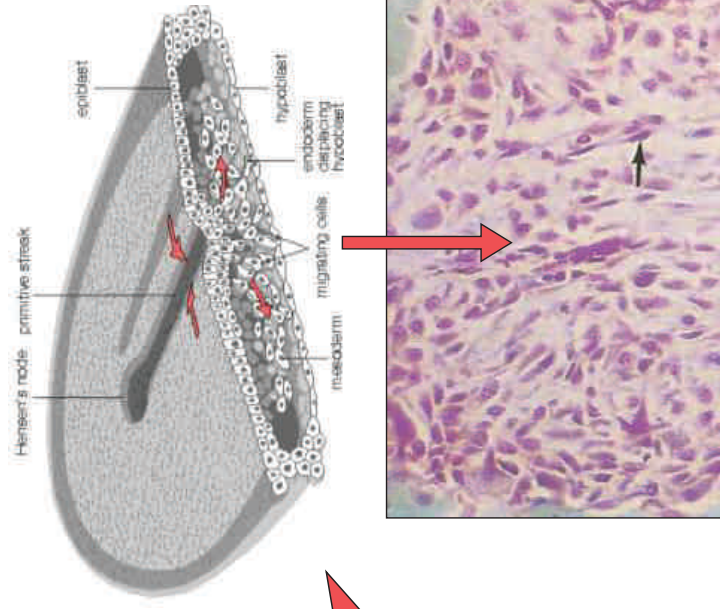
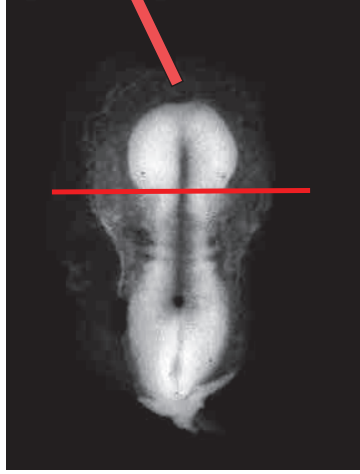
Adult CT

- Areolar (loose, interstitial) CT
 - Dense collagen irregular CT
 - Dense collagen regular CT
 - Fat (adipose tissue)
 - Cartilage
 - Bone
- CT
- Specialized CT
- Trophic CT (body liquids)
- Blood and hematopoietic tissue
 - Lymphatic tissue

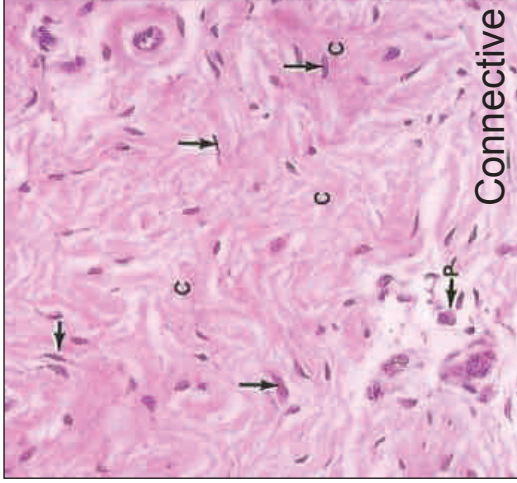
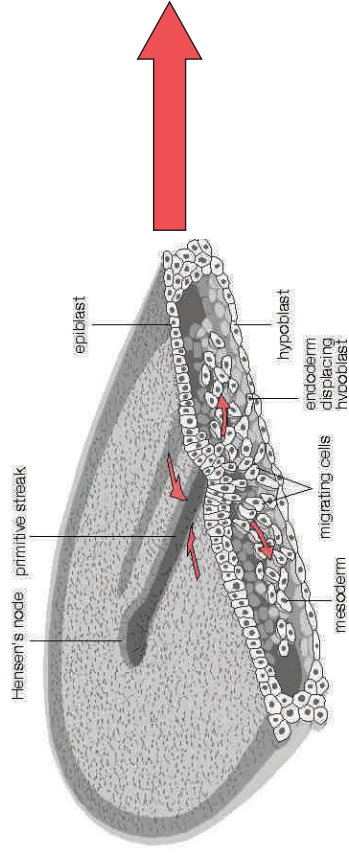
■ Embryonic origin of CT

- Mesenchyme = loose tissue between germ layers
- Complex network of star- or spindle-shaped cells
- Jelly-like amorphous ground substance

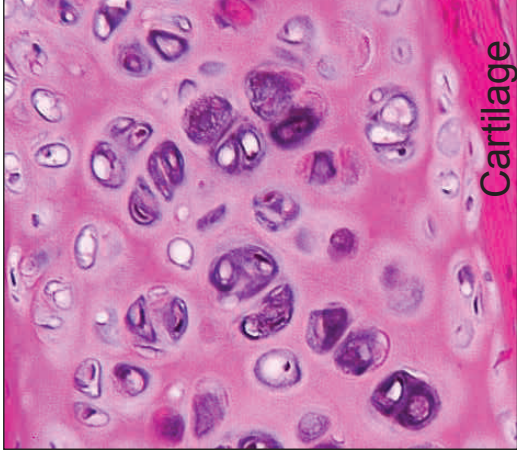
DAY 12 of embryonic development



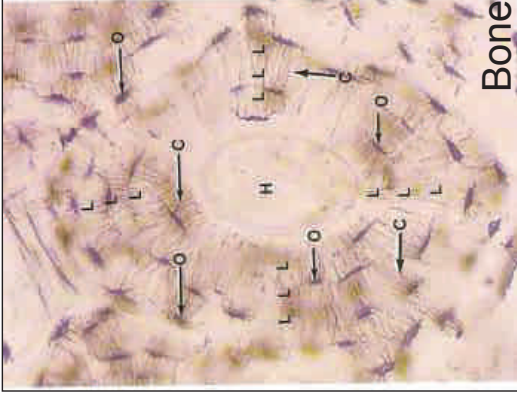
Basic derivatives of CT



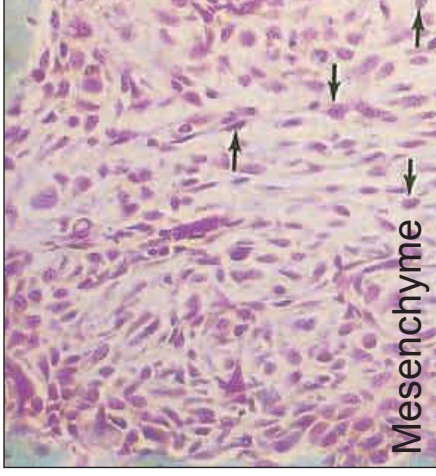
Connective



Cartilage



Bone

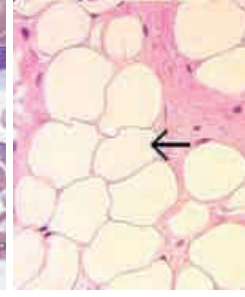
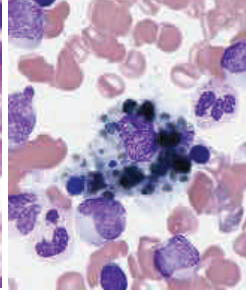
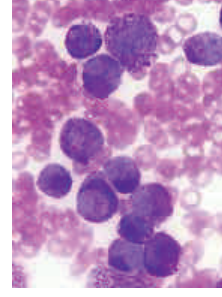
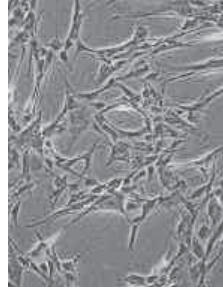


Mesenchyme

Cells of connective tissue

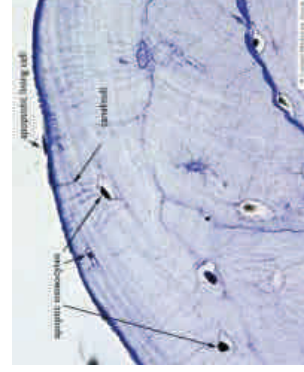
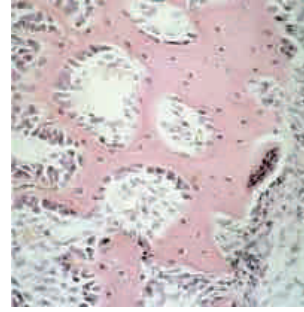
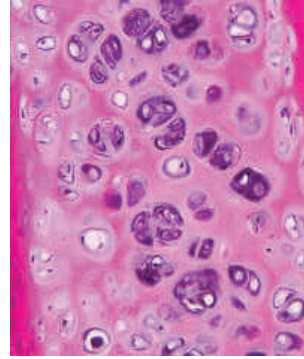
Cells

- Fibroblasts/fibrocytes/myofibroblasts
- Heparinocytes
- Macrophages of CT = histiocytes
- Plasma cells
- Lymphocytes
- Adipocytes
- Adult stem cells



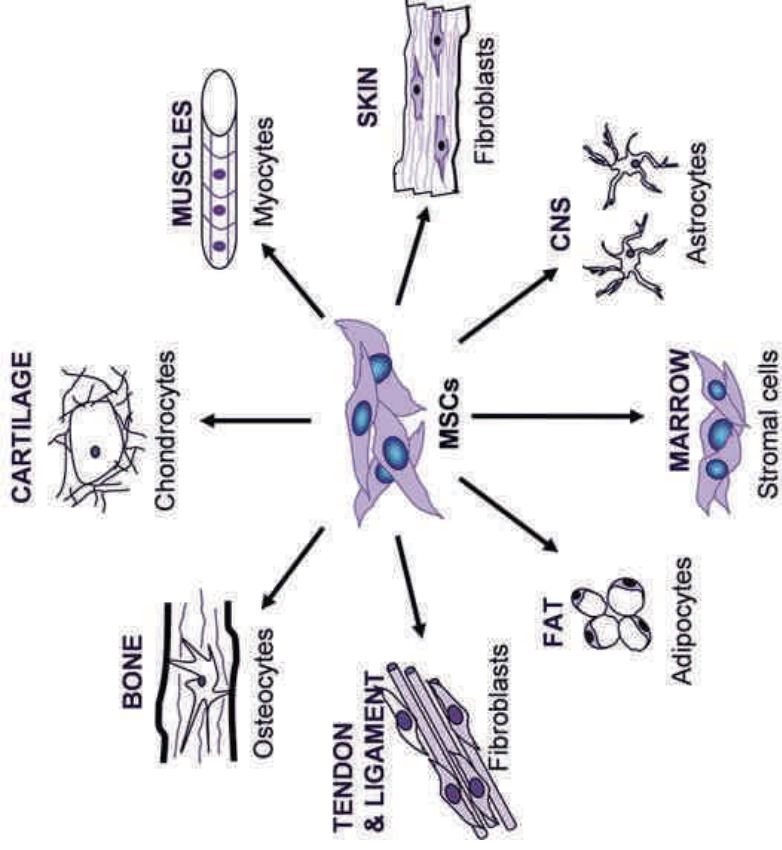
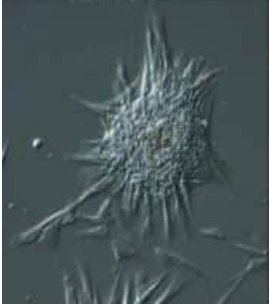
Extracellular matrix

- Fibrous compound
- Amorphous ground substance



■ Cells of connective tissue

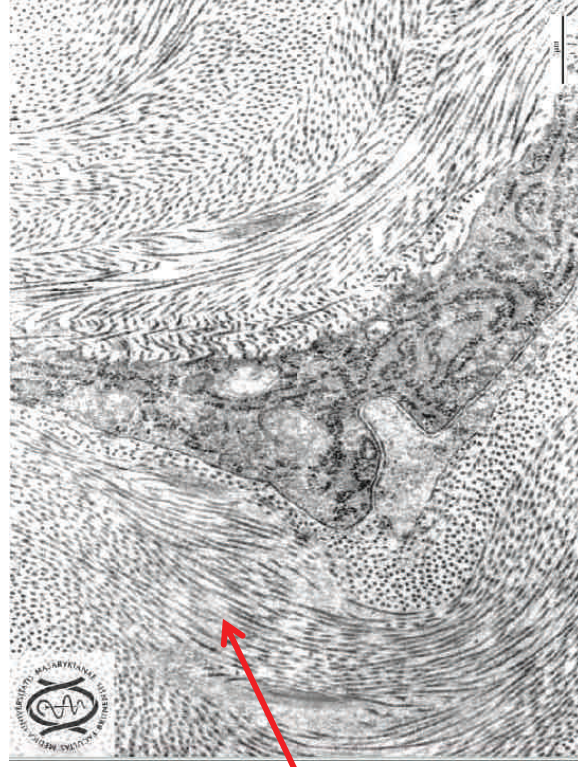
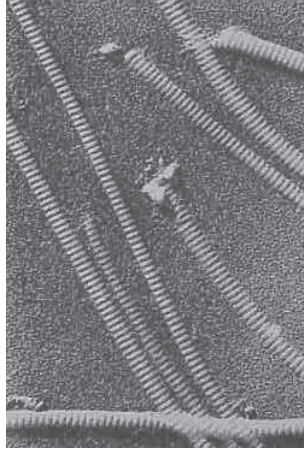
Mesenchymal (adult) stem cells



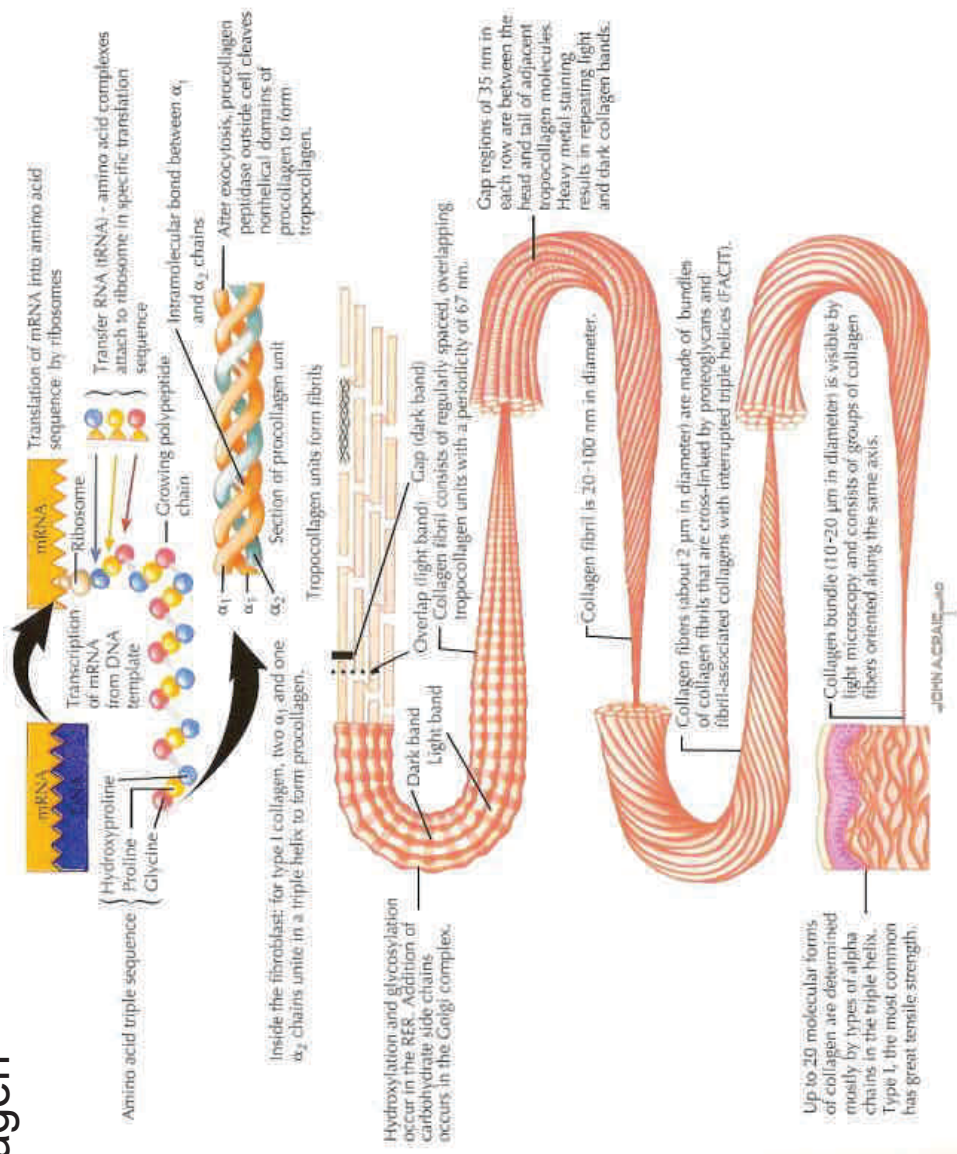
■ Extracellular matrix – fibrous component

Collagen fibers

- family of fibrous proteins encoded by >35 genes (2013)
- polymer – subunit = tropocollagen; triple helix
- different structural and mechanical properties (strength, elasticity, pliability...)
- most abundant protein in human body (30% dry weight)



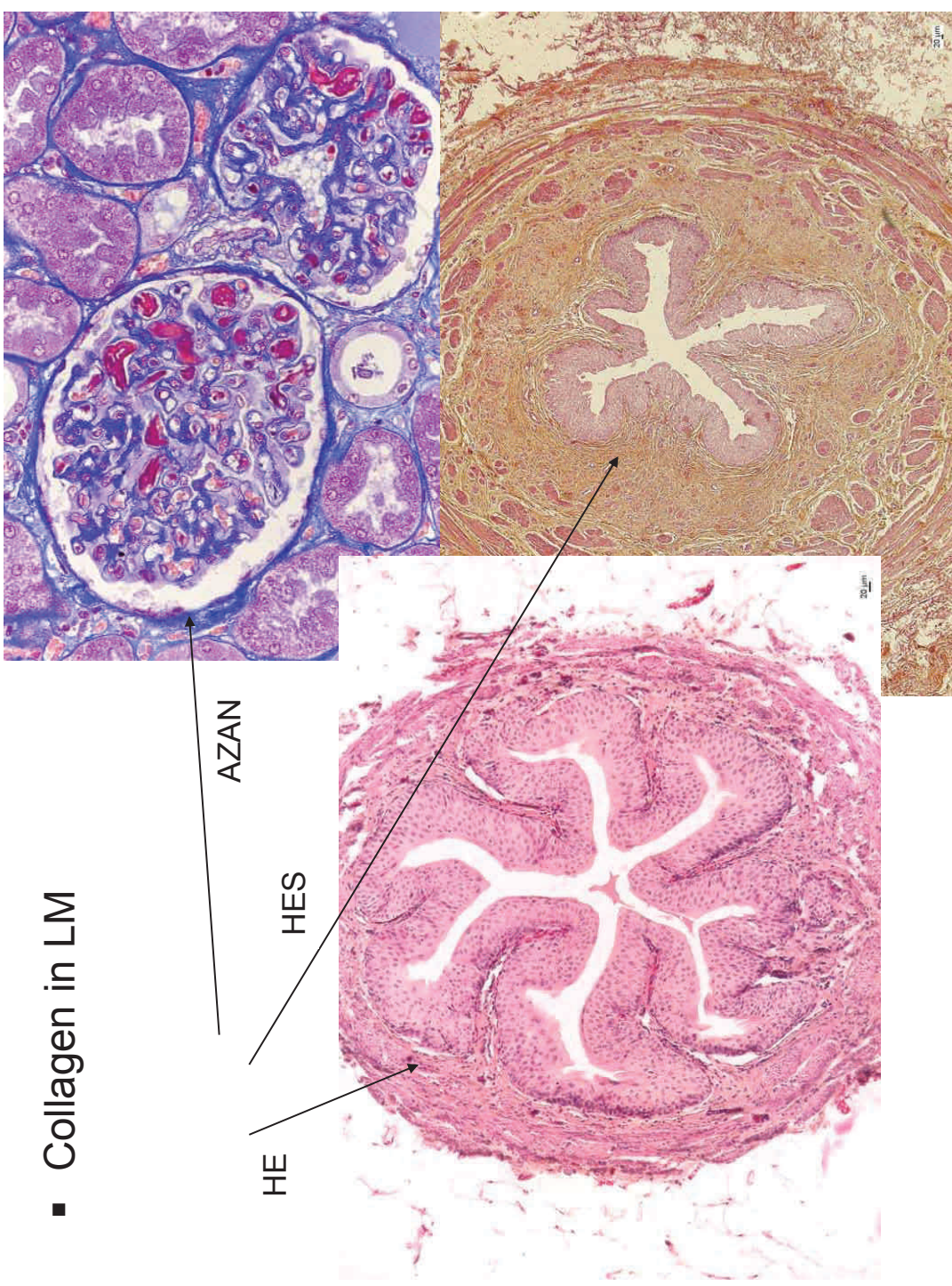
Collagen



Collagen

Type	Localization	Structure	Main function
I	Bone, tendons, meniscus, dentin, dermis, capsules of organs, loose CT 90% of type I	Fibrils (75nm) – fibers (1-20 μ m)	Resilience in pull
II	Hyaline and elastic cartilage	Fibrils (20nm)	Resilience in pressure
III	Skin, veins, smooth muscles, uterus, liver, spleen, kidney, lung	Like I, high content of proteoglycans and glycoproteins, reticular network	Shape formation
IV	Basal lamina of epithelium and endothelium, basal membranes	No fibrils or fibers	Mechanical support
V	Lamina of muscle cells and adipocytes, fetal membranes	Like IV	
VI	Interstitial tissue, chondrocytes – adhesion		Connecting dermis and epidermis
VII	Basal membrane of epithelium		
VIII	Some endothelia (Cornea)		
X	Growth plate, mineralized cartilage		Growth of bones, mineralization

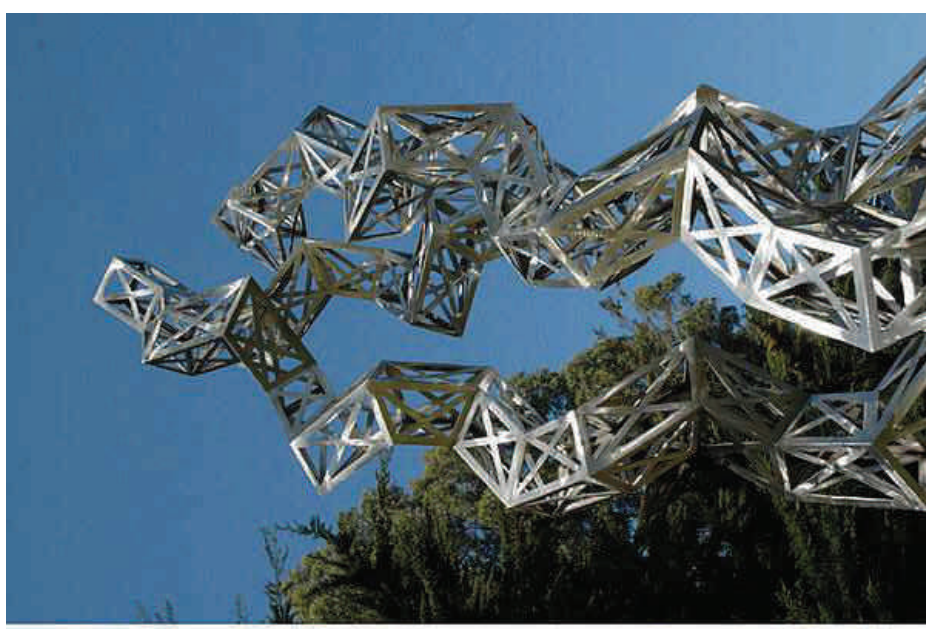
▪ Collagen in LM



Julian Voss-Andreee
"Unraveling
Collagen",

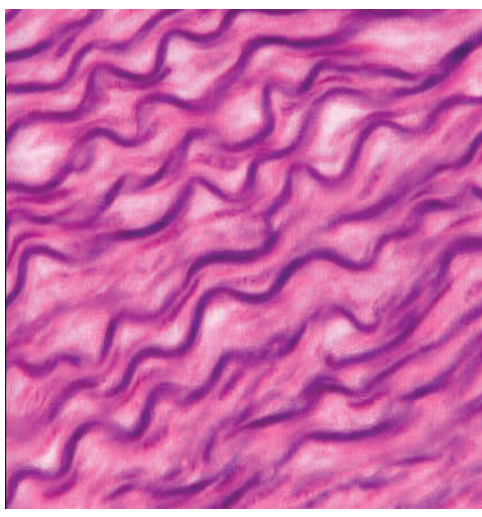
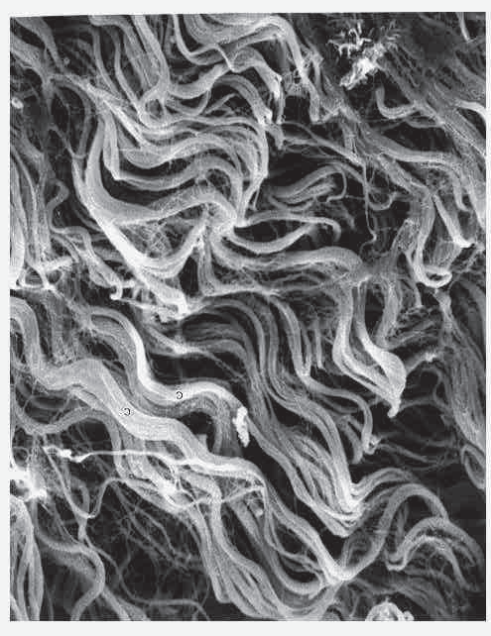
2005

Orange Memorial Park
Sculpture Garden, City of
South San Francisco, CA



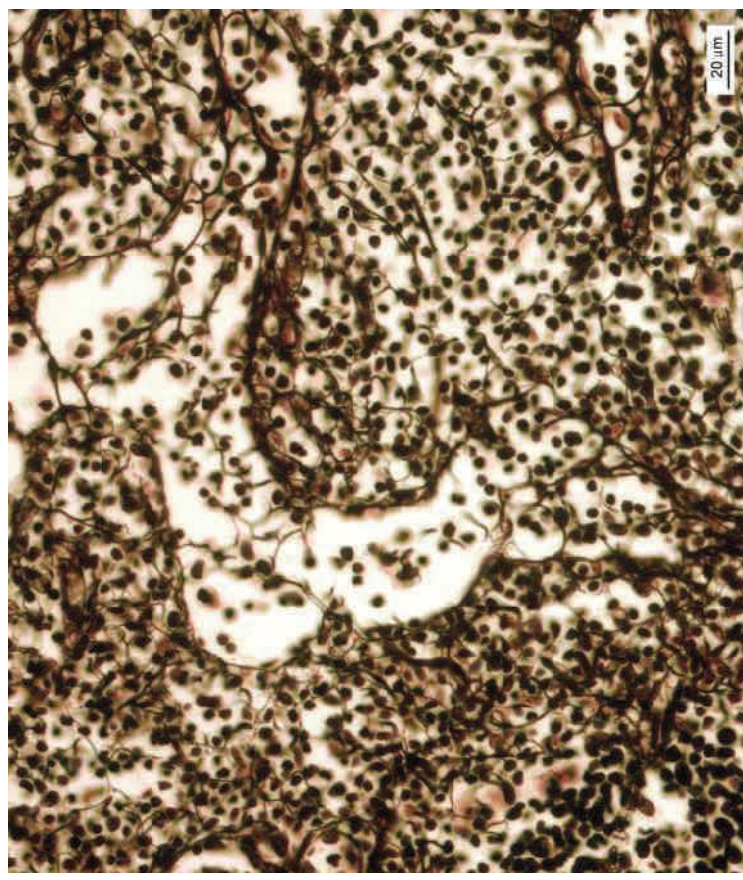
▪ Elastic fibers

- less abundant than collagen
- polymer – tropoelastin
- minimal tensile resistance, loss of elasticity if overstretched
- reduction of hysteresis = allow return back to original state after mechanic change



▪ Reticular fibers

- collagen 3D meshwork
- bone marrow, spleen, lymphatic nodules
- microenvironment for e.g. hematopoietic stem cells and progenitors

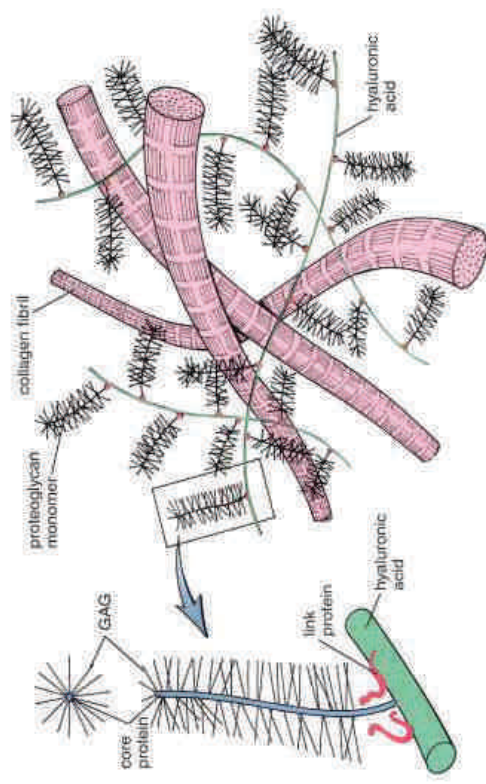
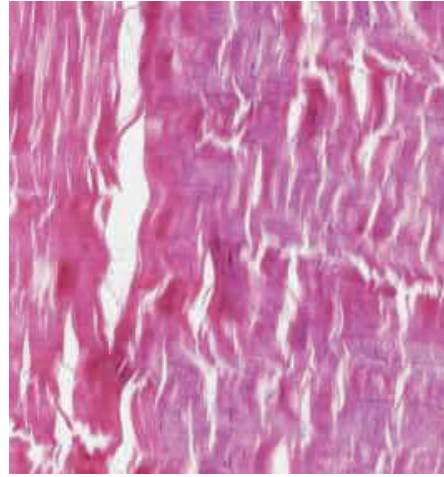




- **Extracellular matrix – ground matrix**

Amorphous extracellular matrix

Colorless, transparent, homogenous substance consisting of glycosaminoglycans, proteoglycans and structural glycoproteins



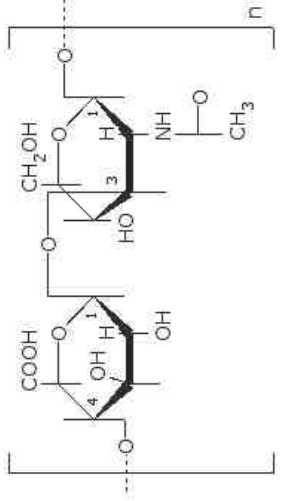
- **Glycosaminoglycans**

linear polysaccharides composed of two disaccharide subunits

- **uronic acid and hexosamine**

polysaccharides rich in hexosamines = acid mukopolysaccharides

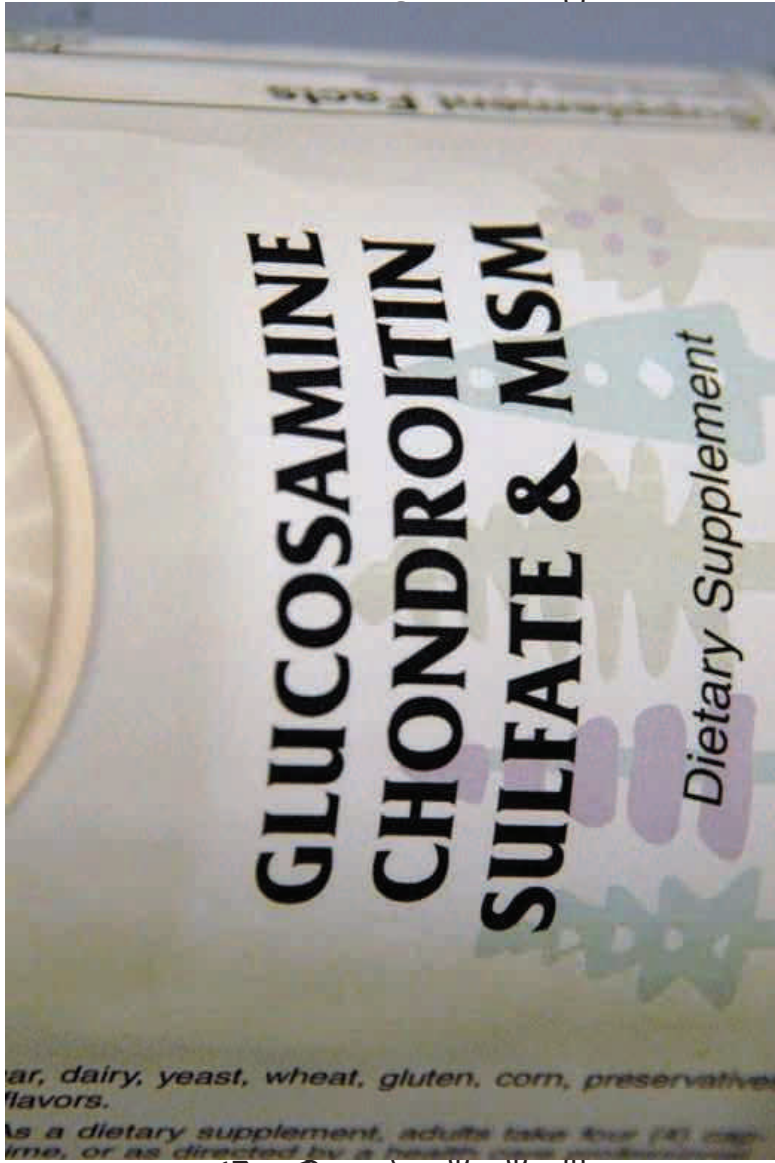
glucuronic or iduronic acid



glucosamin or galactosamin

- **Glycosaminoglycans**

They bind to protein structures (except for hyaluronic acid)



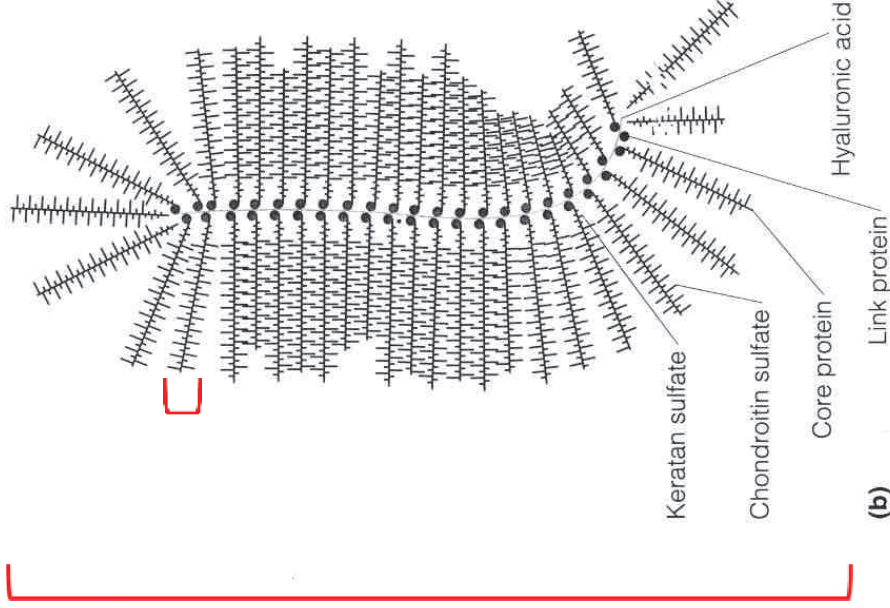
G
Hy
Ch
De
He
Ke

vitreum,
rta
psus

■ Proteoglycans

- protein + dominant linear saccharide component
- proteoglycan aggregates
- water-binding, volume dependent of hydration
- aggrecan (cartilage)
- syndecan
- fibroglycan

Figure 9.25b Proteoglycan structure in bovine cartilage



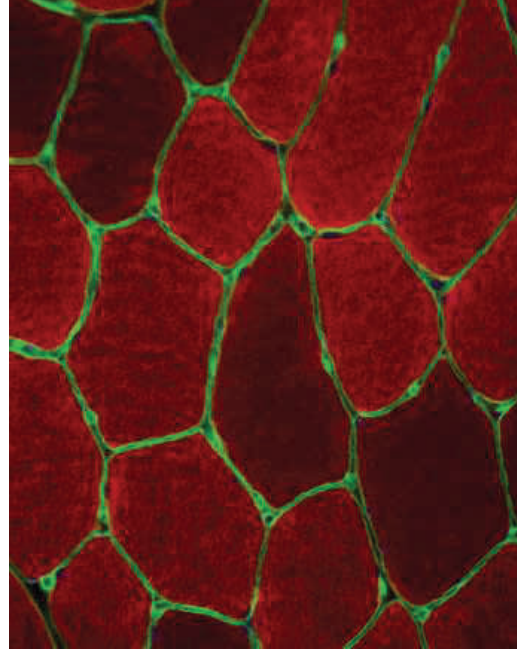
From Mathews and van Holde; *Biochemistry 2e*; © The Benjamin/Cummings Publishing Co., Inc.

■ Structural glycoproteins

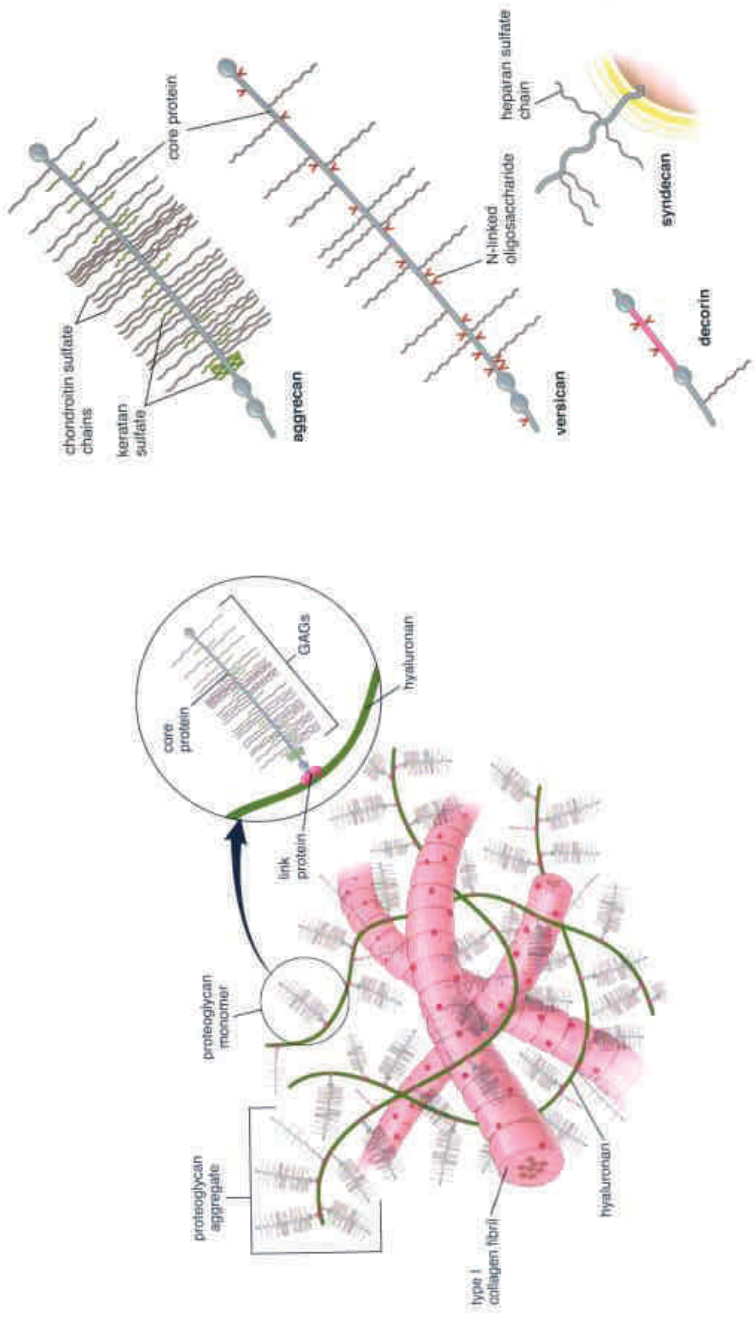
- dominant protein + branched saccharide component
- interaction between cells and ECM



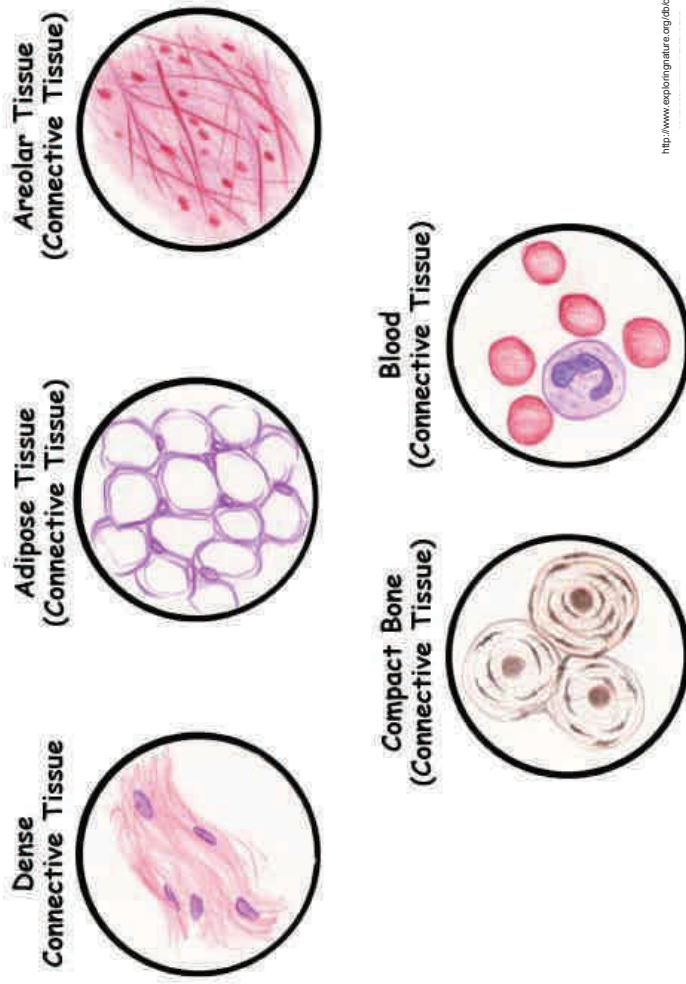
- **fibronectin** – connects collagen fibers and glykosaminoglycans, cell adhesion and migration
- **laminin** – basal lamina – epithelial integrity
- **chondronectin** – cartilage – adhesion of chondrocytes to collagen



- Composition of amorphous ground matrix

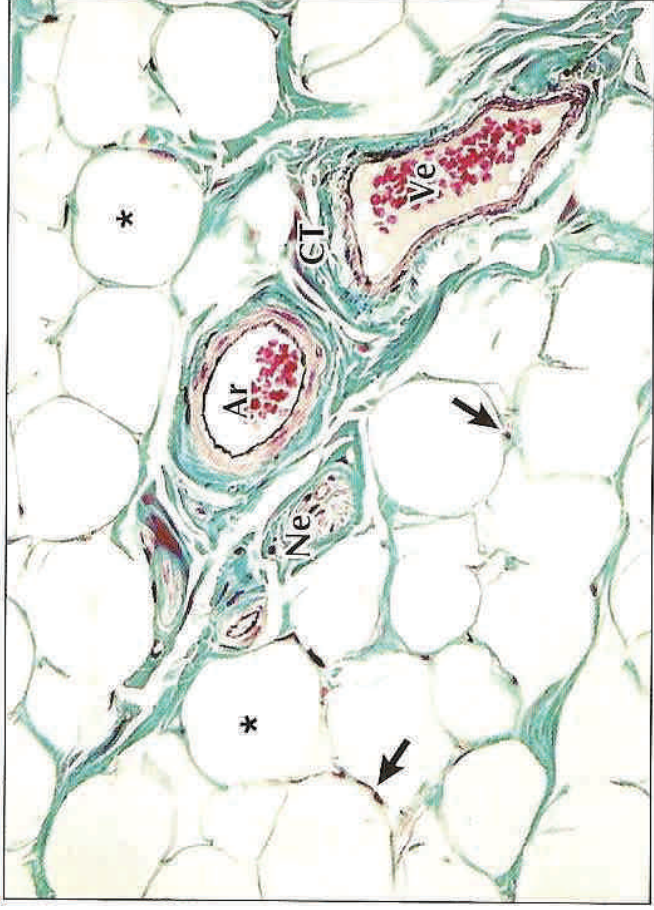


- Classification of specialized connective tissue



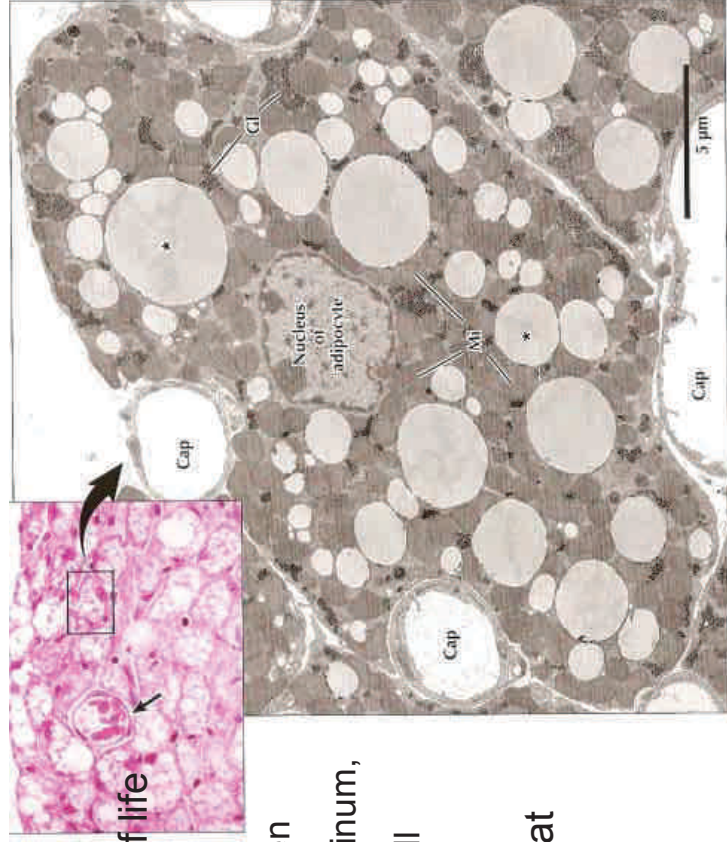
■ Adipose tissue

- Adipocytes, fibroblasts, reticular, collagen and elastic fibers, capillarie
- White and brown adipose tissue



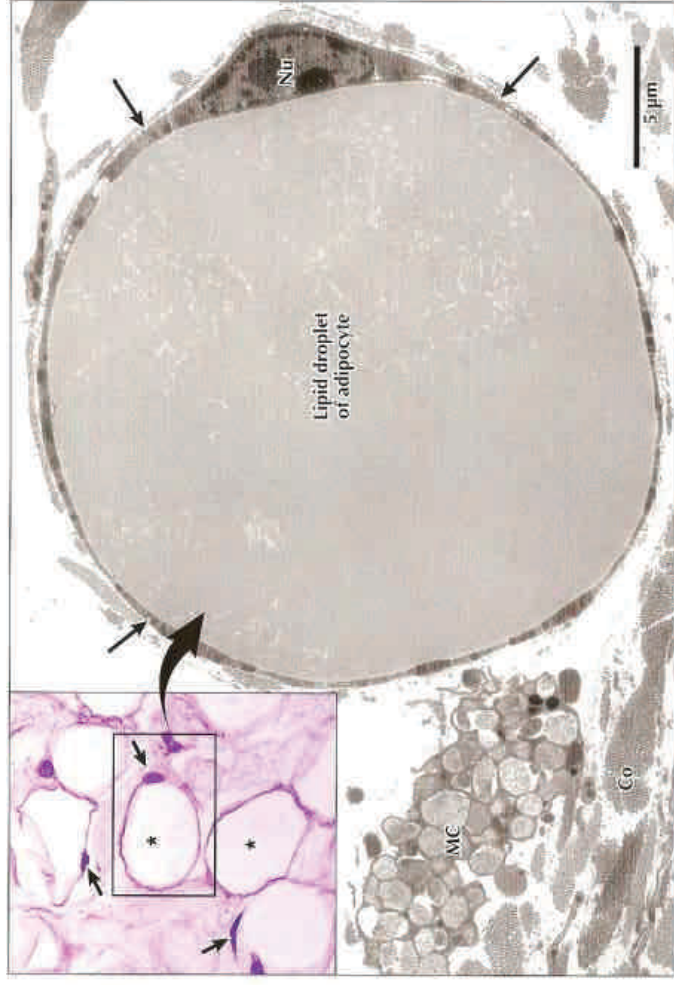
■ Brown adipose tissue

- fetus and child to 1st year of life
- fast source of energy
- typical localization – between shoulder blades, axilla, mediastinum, around kidneys, pancreas, small intestine
- small cells with numerous fat droplets



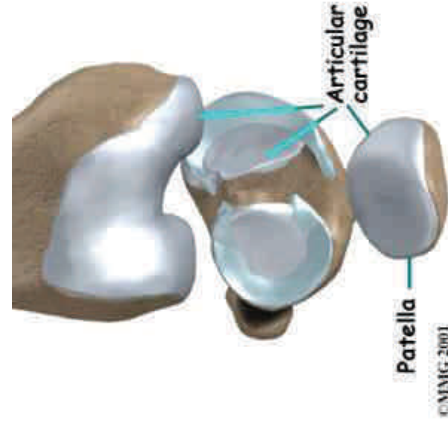
■ White adipose tissue

- adipocytes are actively formed until the 2nd year of life
- no innervations, but rich vascularisation
- adipocytes with only one lipid droplet
- leptin (adipokines)



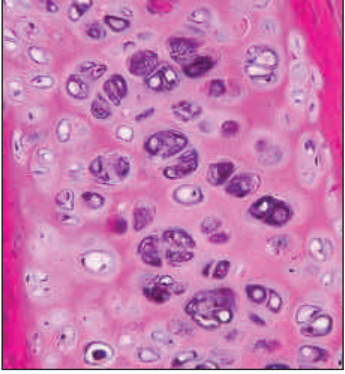
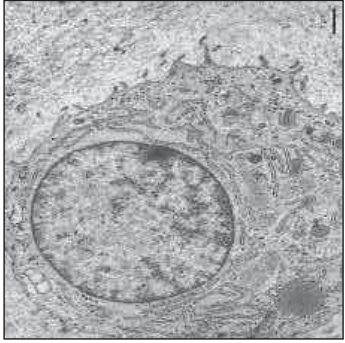
■ Cartilage

- specialized connective tissue with continuous ECM
- flexible, mechanically resistant
- avascular, no innervation
- support of soft tissues
- diarthrosis
- growth



■ Composition and structure

- perichondrium – connective tissue around cartilage (not present in joints)
- chondroblasts, chondrocytes
- extracellular matrix (collagen and elastic fibers, amorphous ground matrix)



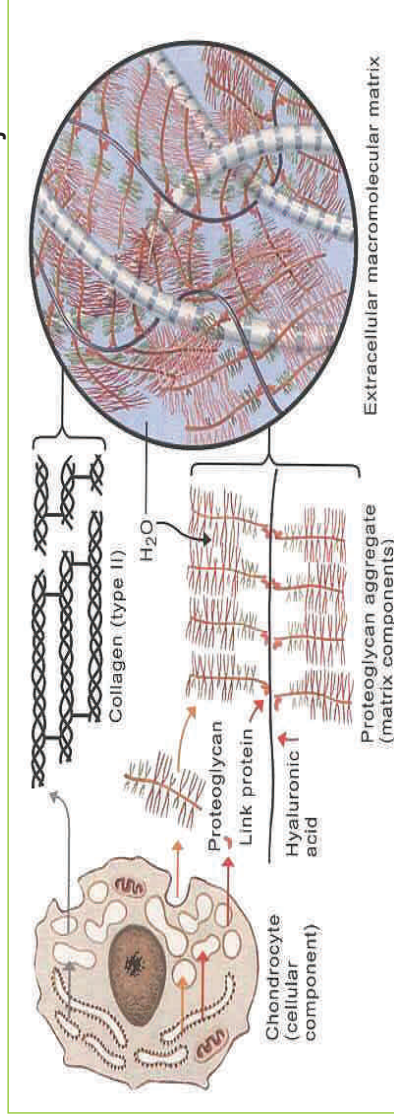
Collagen type II

Glykosaminoglycans

(Hyaluronic acid, chondroitinsulphate, keratansulphate)

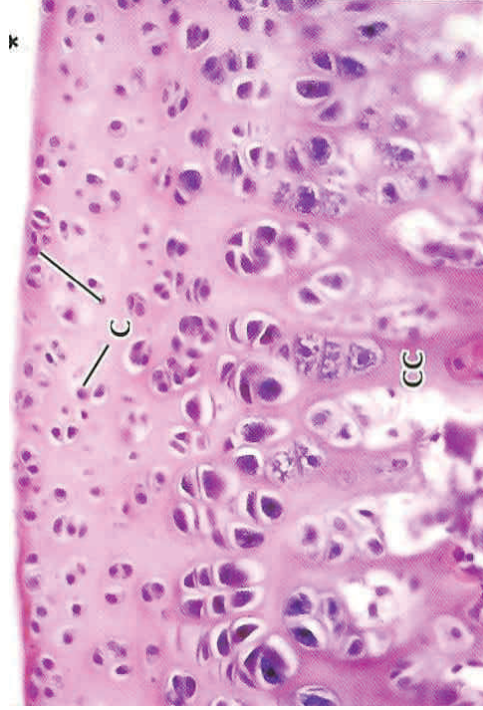
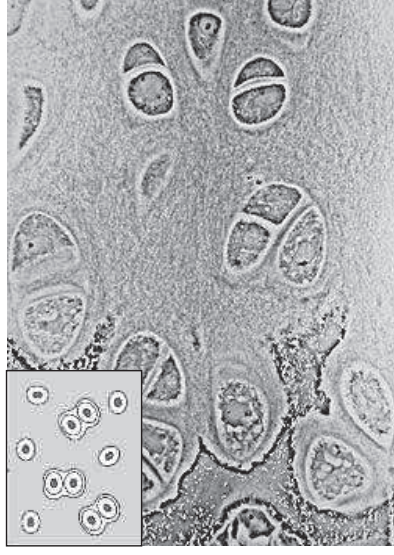
Proteoglycane aggregates

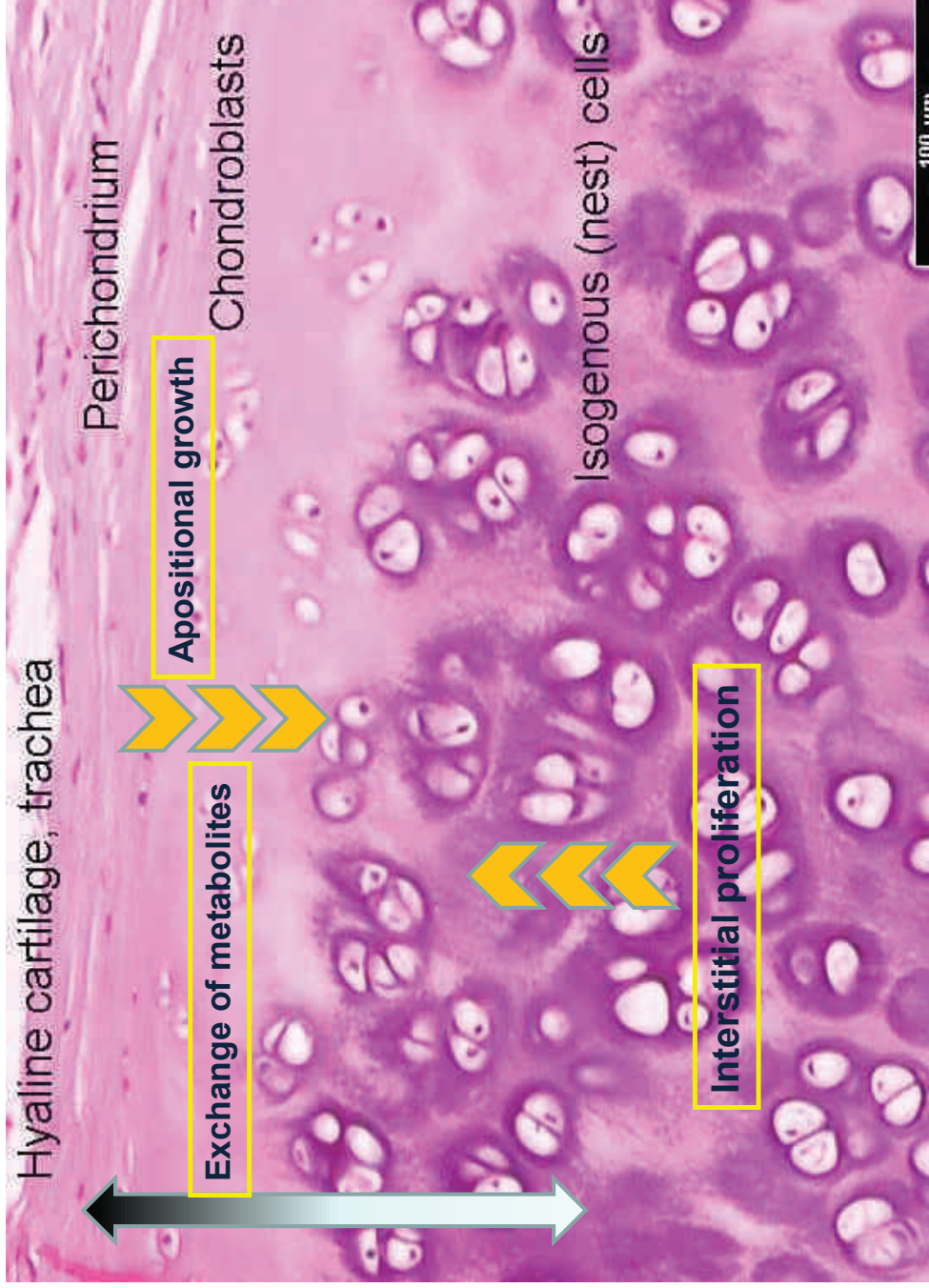
Hydrophilic character – holds water → low friction → smooth movement of joints



■ Hyaline cartilage

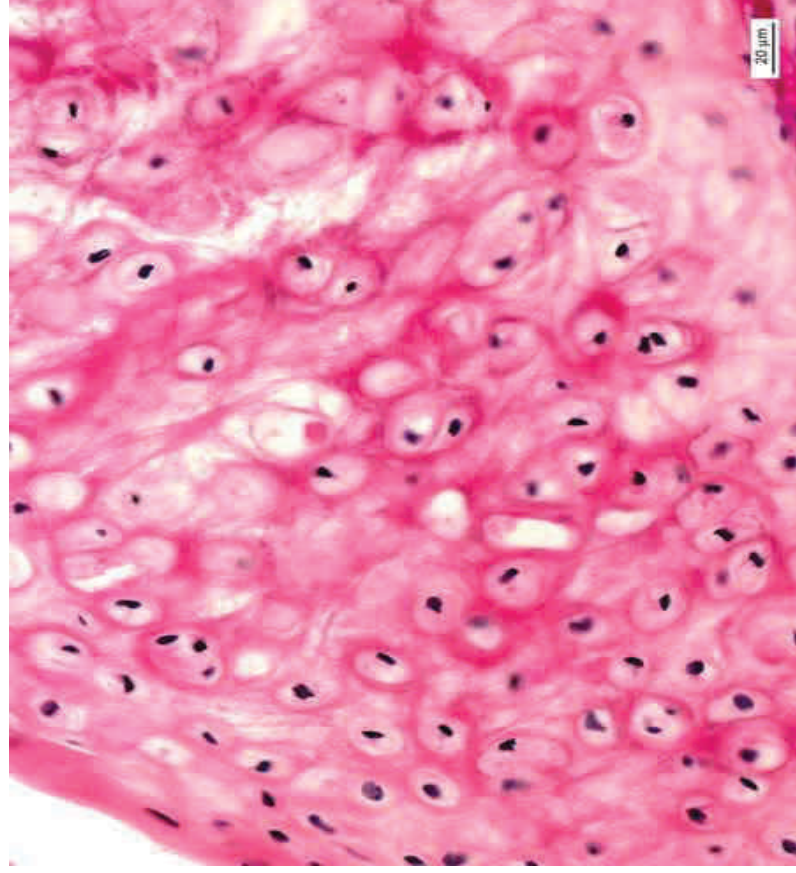
- most abundant
- temporary embryonal/fetal skeleton
- epiphyseal growth plate
- articulation (joints) respiratory passages
- isogenic groups





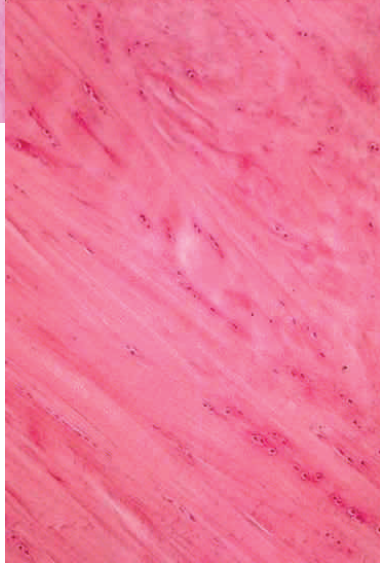
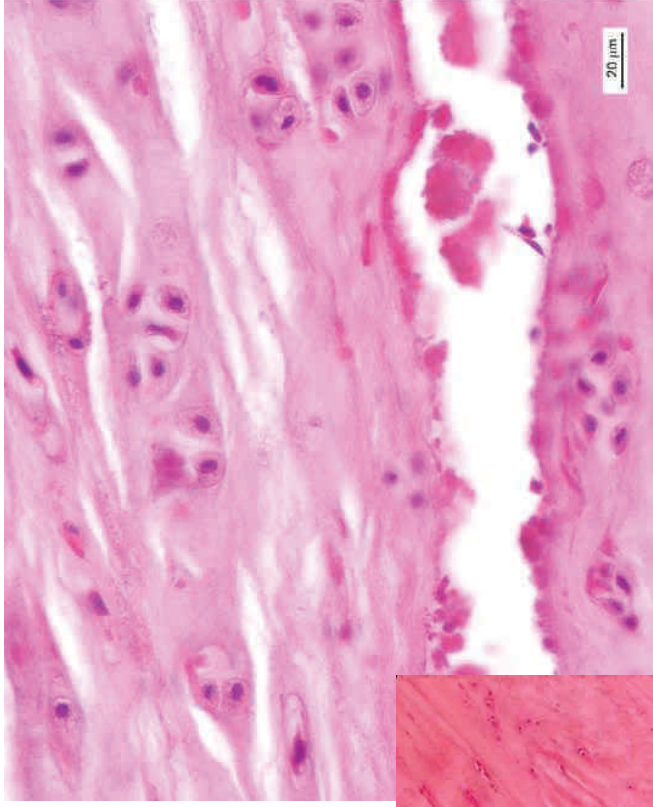
- Elastic cartilage

- Elastic fibers in matrix
- No isogenetic groups
- Auricula, meatus, larynx, epiglottis



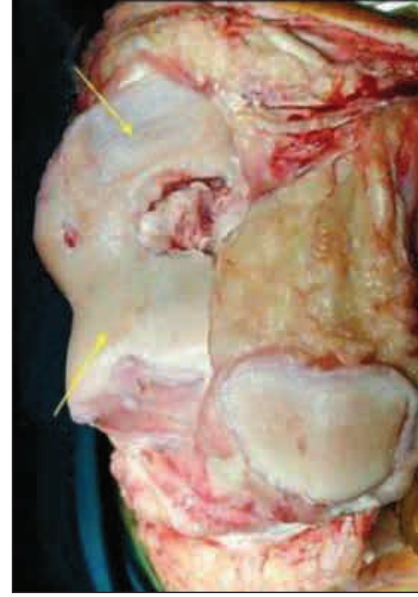
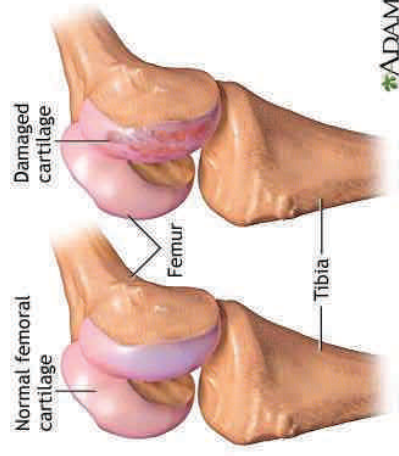
■ Fibrocartilage

- Fibrous compound dominant – collagen I and II – mechanical durability
- Minimum of amorphous matrix-fibers visible
- Intervertebral discs, symphysis pubis, articular discs, meniscus



■ Clinical correlations

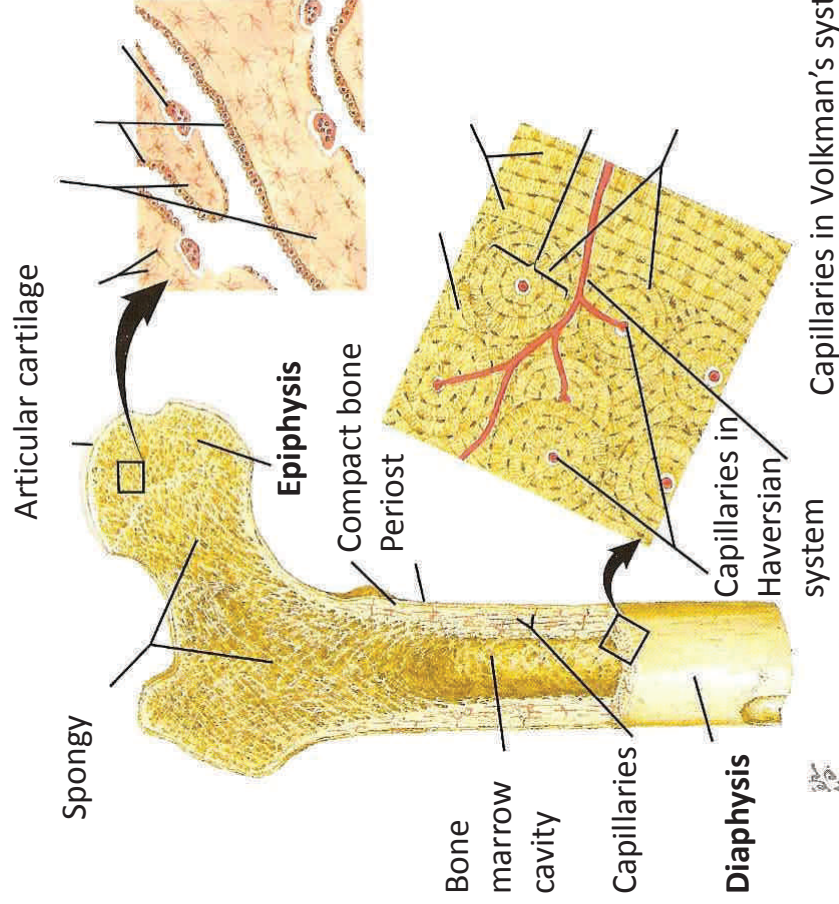
- Cartilage – no innervation, no vascularization – no spontaneous regeneration
- No migration of chondrocytes to site of damage
- Initiation of other degenerative events leading to cartilage erosion (arthritis)



Therapy:

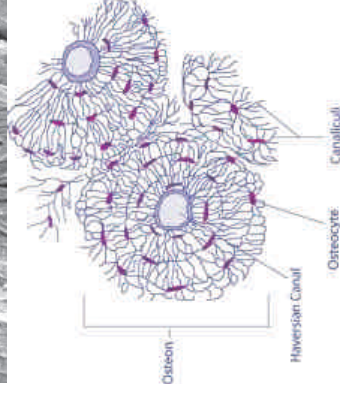
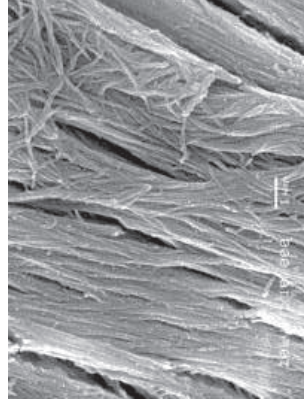
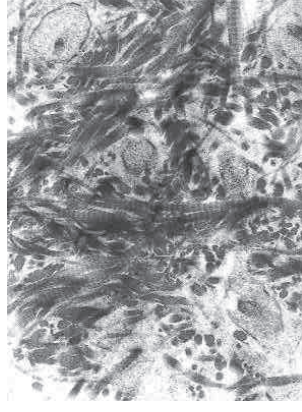
- joint mobility
- restoration of biochemical and biophysical parameters of cartilage
- prevention of further damage
- removal of damaged tissue, autologous transplantation, MSCs on biocompatible scaffolds

■ Bone



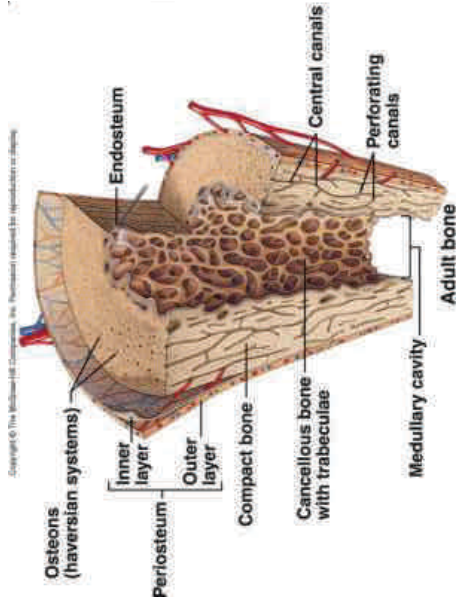
■ Histological classification of bone tissue

- **Primary (woven, fibrous)**
 - Temporary, growth and regeneration of bones, collagen fibrils woven
 - Replaced by secondary bone
 - Remains only in some parts of body - sutures of skull, *tuberositas ossium*, tooth cement
- **Secondary (lamellar)**
 - Lamellae – collagen fibers in concentric layers (3-7 μm) around a canal with capillaries = Haversian system (osteon)
 - Spongy (trabecular)
 - Trabeculae, similar to compact
 - Epiphyses of long bones, short bones, middle layer of flat bones of the skull (*diploë*)
 - Compact
 - Outer and inner coat lamellae typical Haversian systems
 - Volkmann's canals
 - Interstitial canals



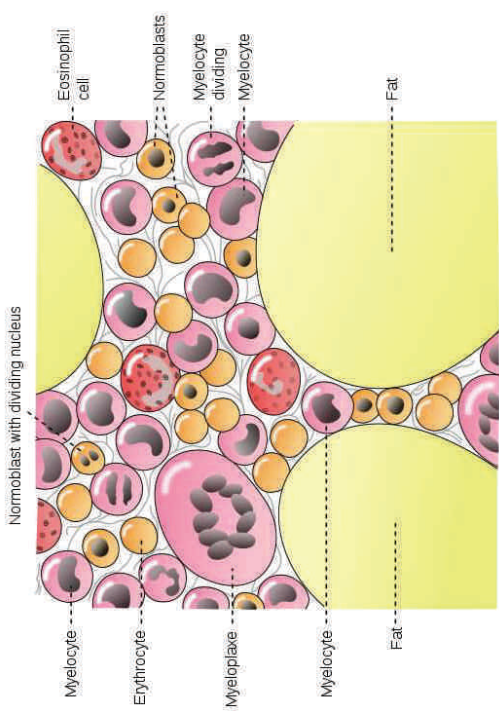
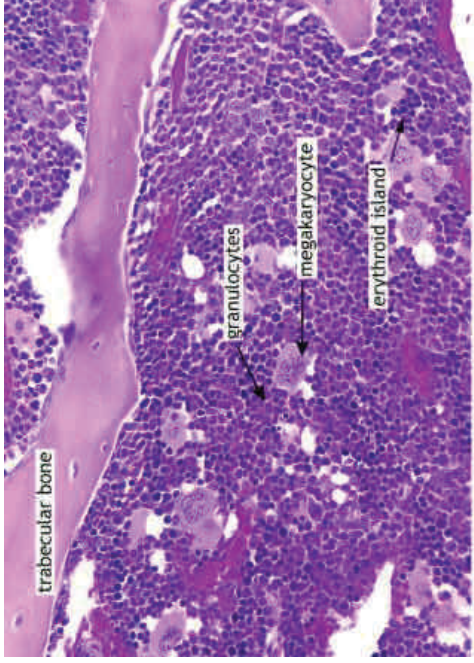
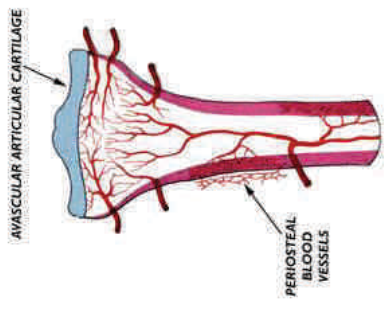
■ Surface of compact bone

- **Outer surface**
 - Synovial joint – hyaline cartilage
 - periosteum (perist) – membrane – dense CT, inner layer (osteoblasts) and outer layer (fibrous CT)
 - Inactive bone - fibrous CT in perist dominant
 - Collagen fibers – parallel to the bone surface
 - Sharpey's fibers fix perist to the bone



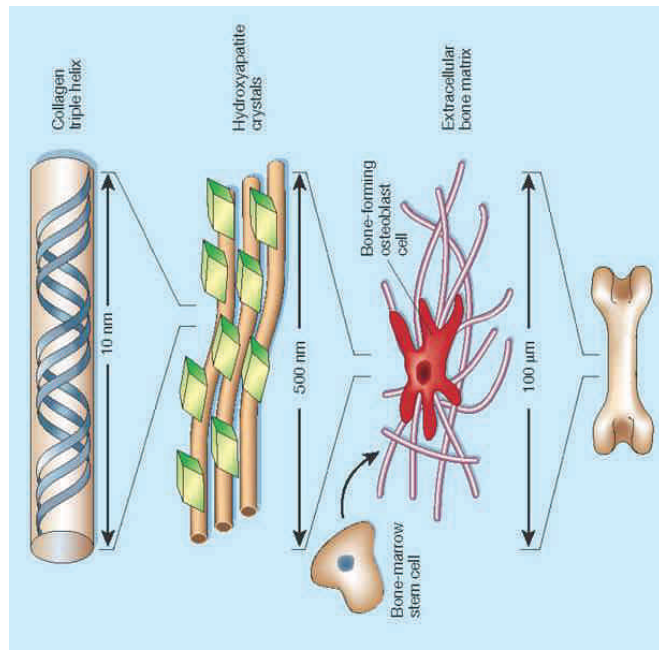
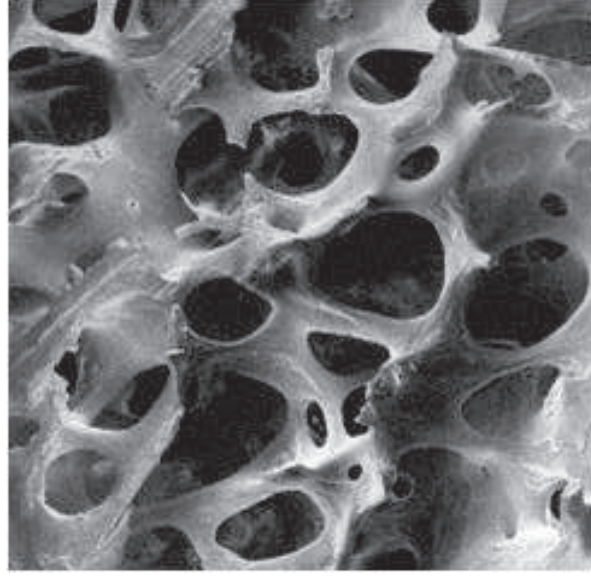
- **Inner surface – cavities lining**

- Medullar cavity
- Endosteum (endost) – single cell lining – bone remodeling
- Red bone marrow – hematopoiesis
- Yellow and gray bone marrow – adipocytes or CT
- Rich vascularisation



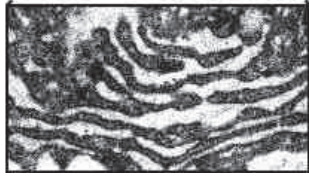
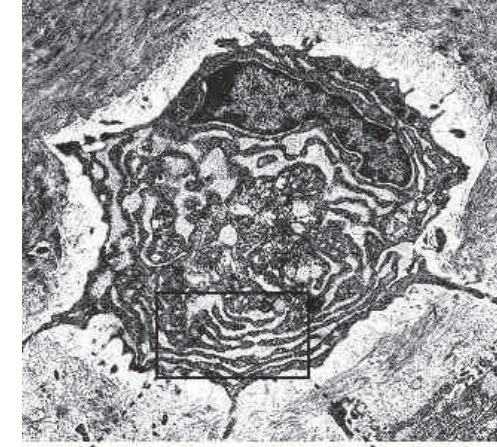
- **Bone matrix**

- 60% mineral compound, 24% organic compound 12% H₂O, 4% fat
- Crystals – calcium phosphate, hydroxyapatite

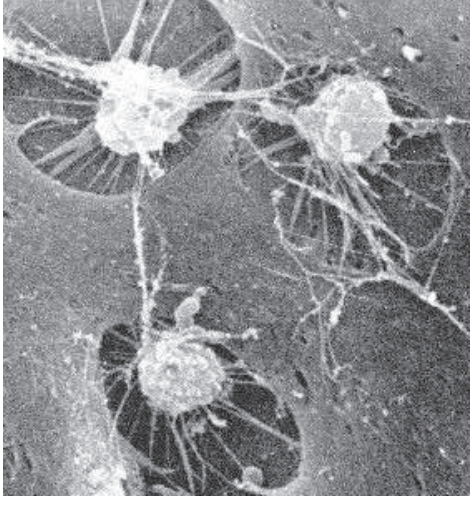


■ Cells

- **Osteoblasts**
- specialized bone cells
- produce ECM – collagen (I) and noncollagenous proteoglycans, glycoproteins
- osteocytes

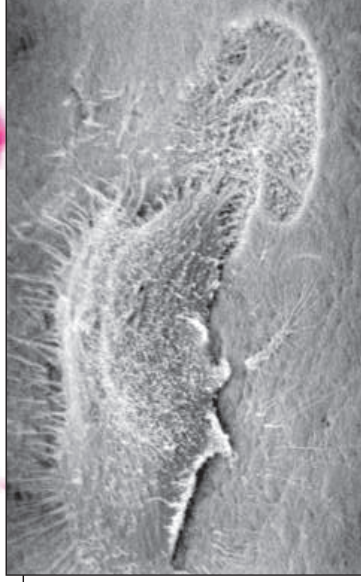
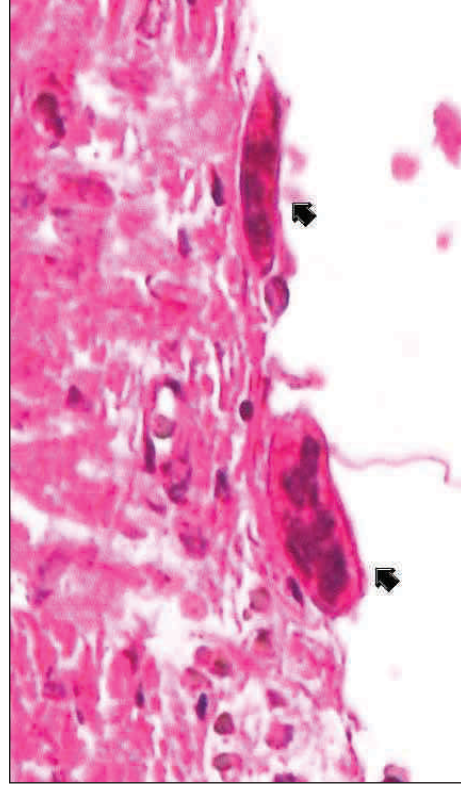
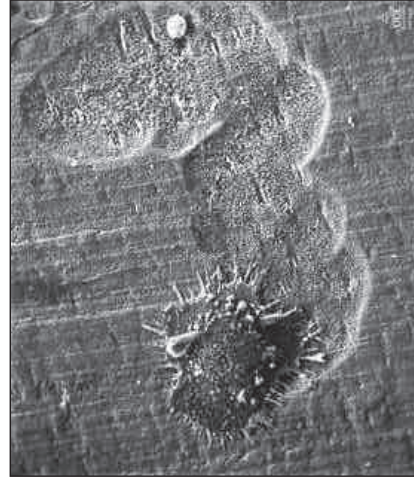


RER
-rough
endoplasmic
reticulum



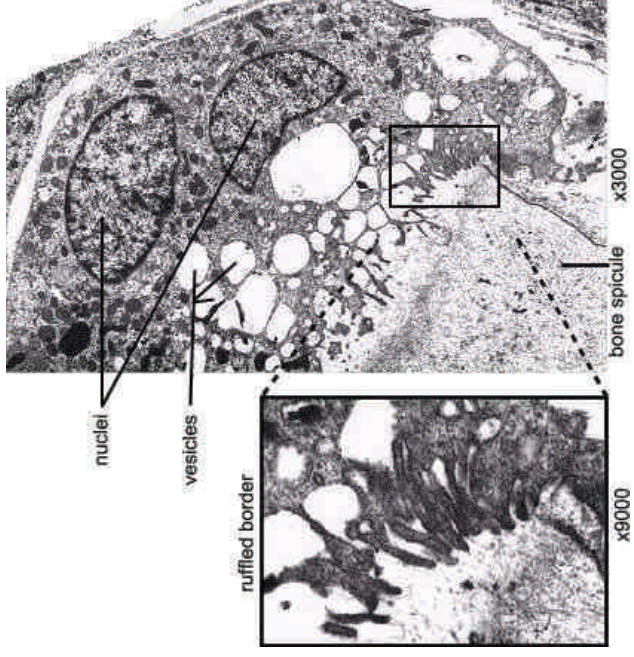
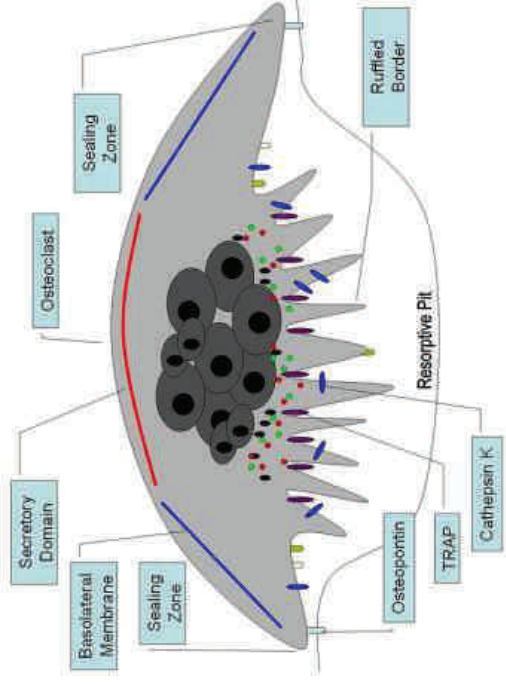
■ Cells

- **Osteoclasts**
- multinuclear, form by fusion of macrophages
- bone matrix resorption



■ Cells

- **Osteoclasts**
- Complex architecture
- Enzymes degrading organic matrix
- HCl



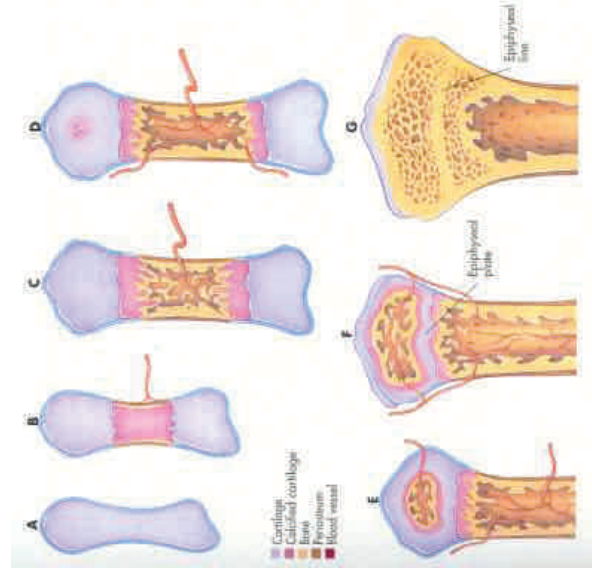
■ Ossification

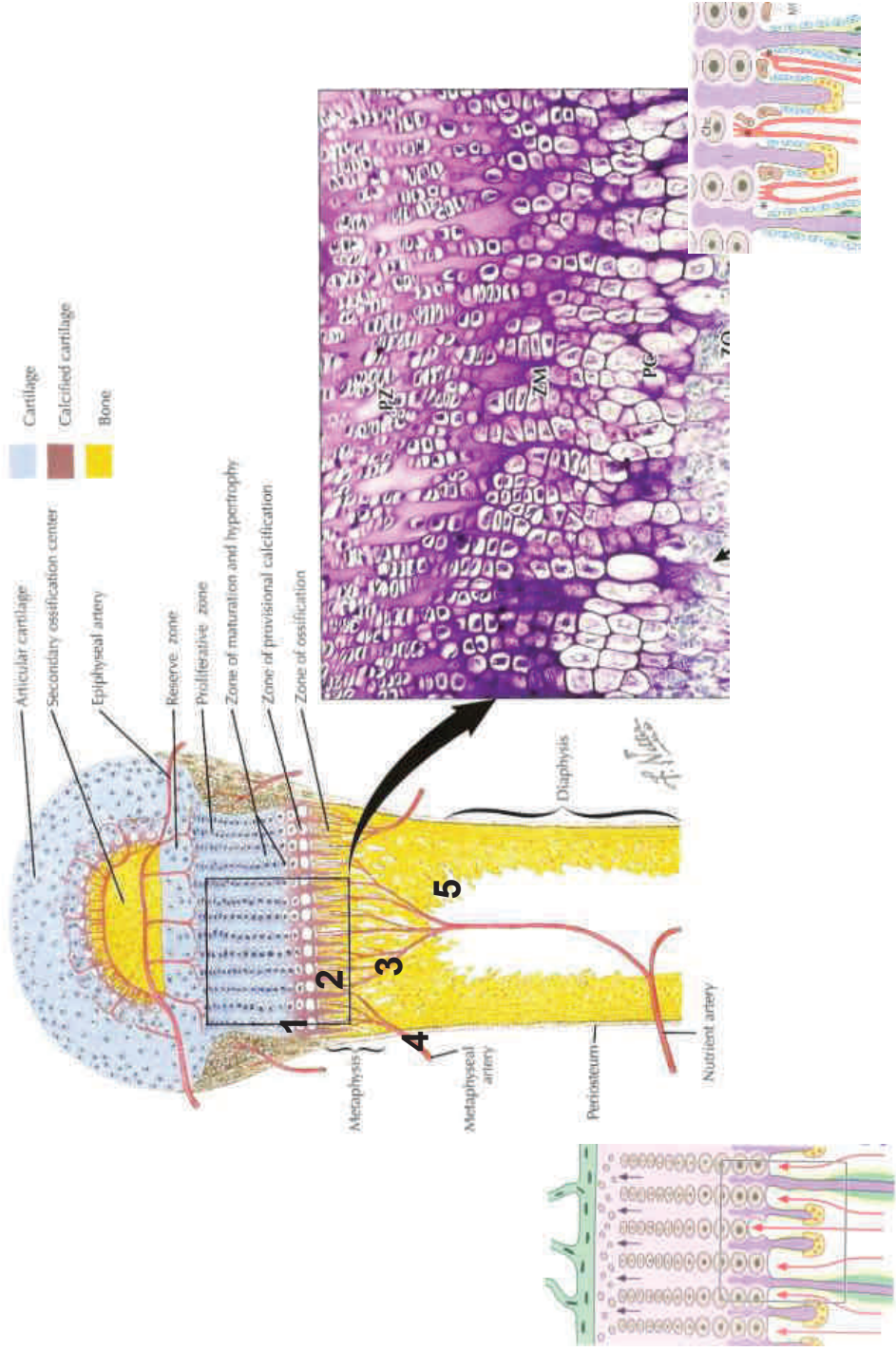
Intramembraneous

- Mesenchymal cells → osteoblasts
- Ossification center – rich vascularisation, differentiation of osteoblasts, synthesis of primary bone

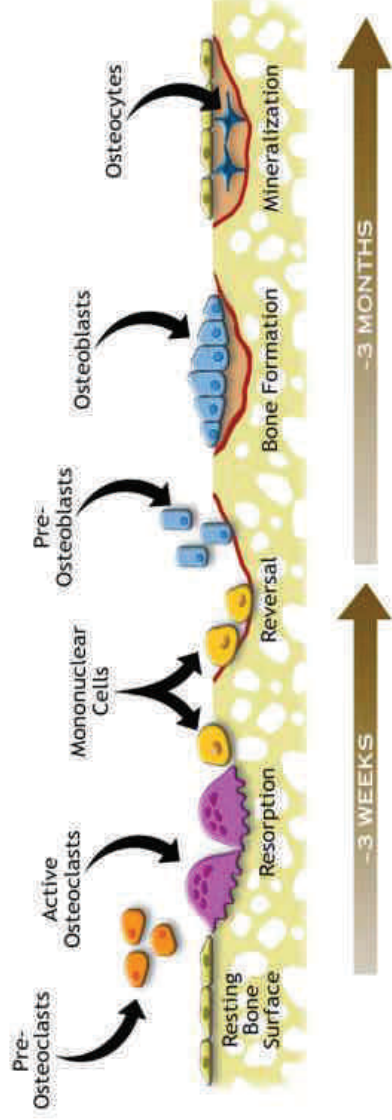
Endochondral

- Cartilage model
- Growth plate
- Primary and secondary ossification centers (diaphyse, epiphyses)





Bone Remodeling Cycle



- Clinical correlations

- **Fracture healing**

- Reactive Phase**

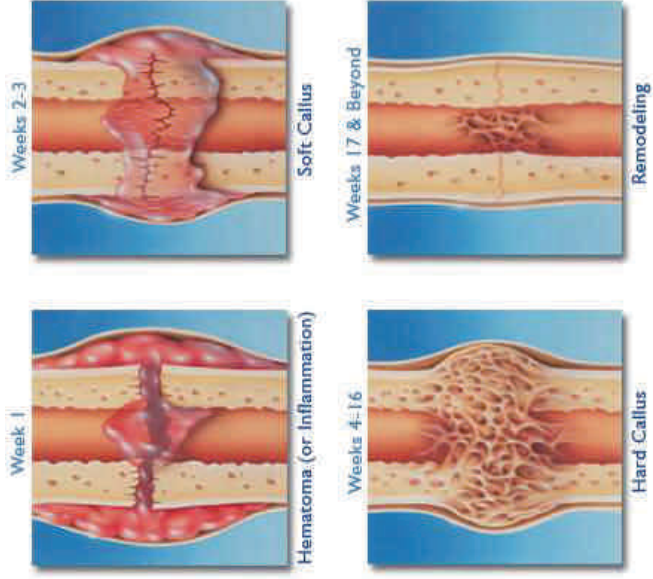
- Fracture and inflammatory phase
 - Granulation tissue formation

- Reparative Phase**

- Cartilage *callus* formation
 - Lamellar bone deposition

- Remodeling Phase**

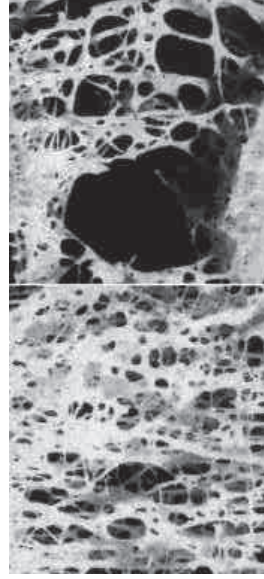
- Remodeling to original bone shape



- **Clinical correlations**

- imbalance in osteosynthesis and osteoresorption

- **OSTEOPOROSIS**



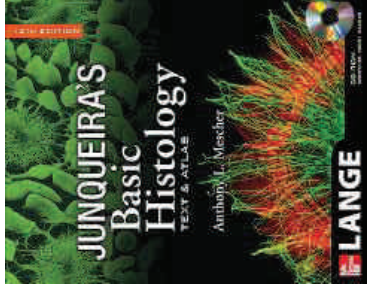
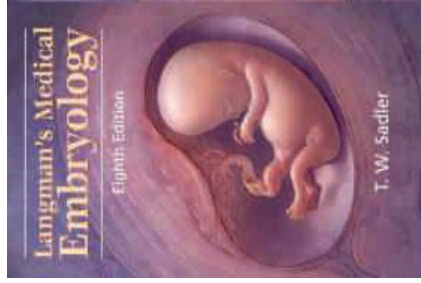
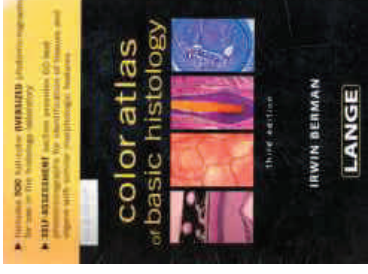
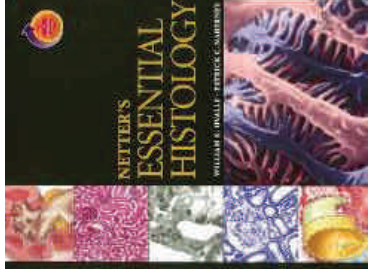
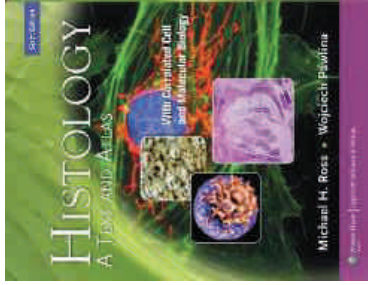
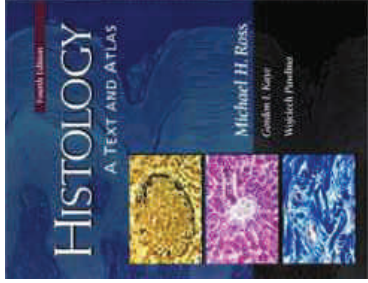
- **OSTEOPETROSIS**



- **REVMATOID ARTHRITIS**



- Further study

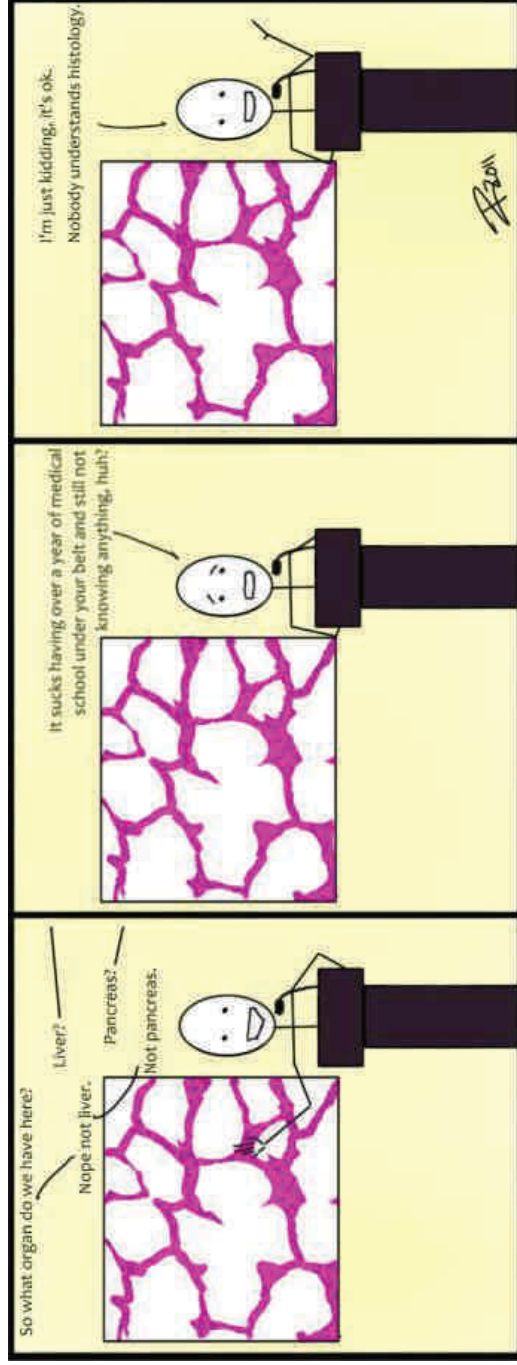


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or visit

<http://www.med.muni.cz/histology>

Thank you for your attention



However, you still need to learn it ;-)

Thank you for attention

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