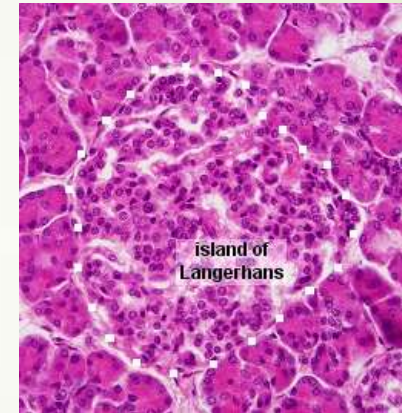
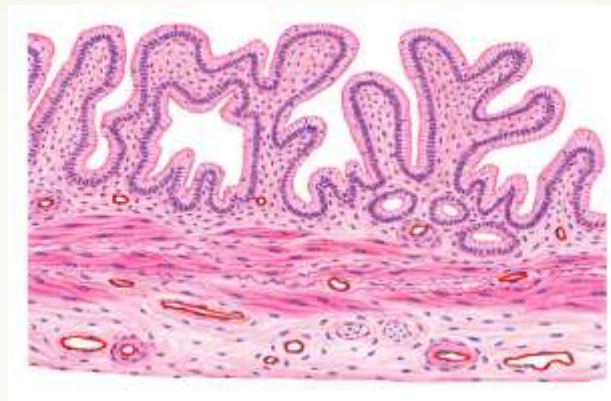
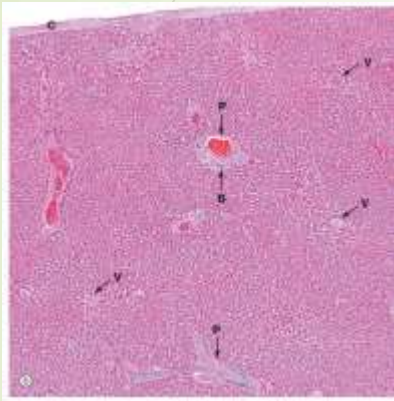


HISTOLOGI SISTEM ENTEROHEPATIK



dr. Ulfah Dian Indrayani, M.Sc
Bagian Histologi
Fakultas Kedokteran UNISSULA



Hepar

Vesica fellea

Exocrine Pancreas

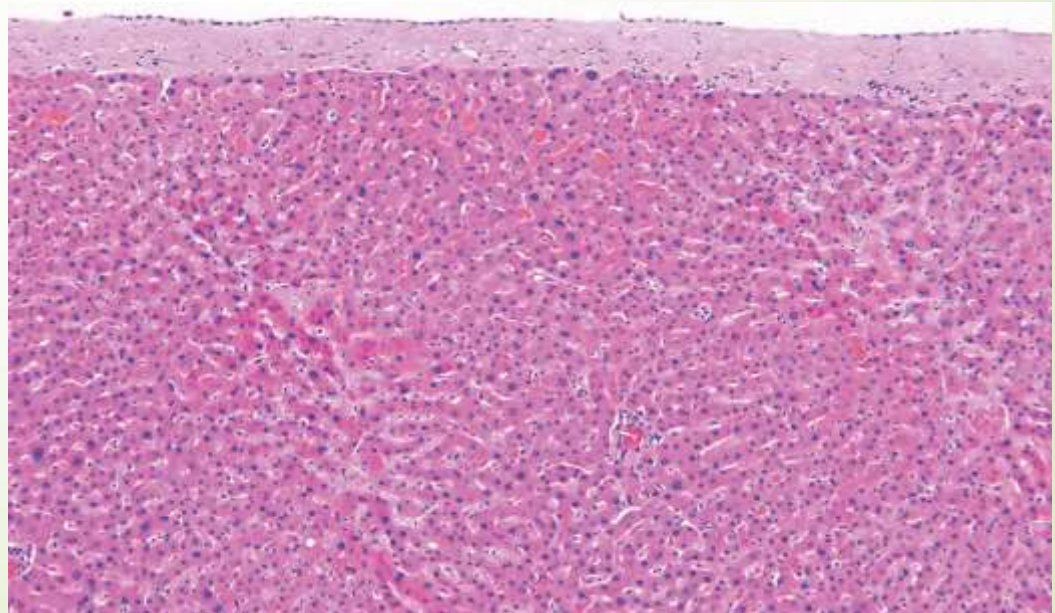


Learning objective: Hepar

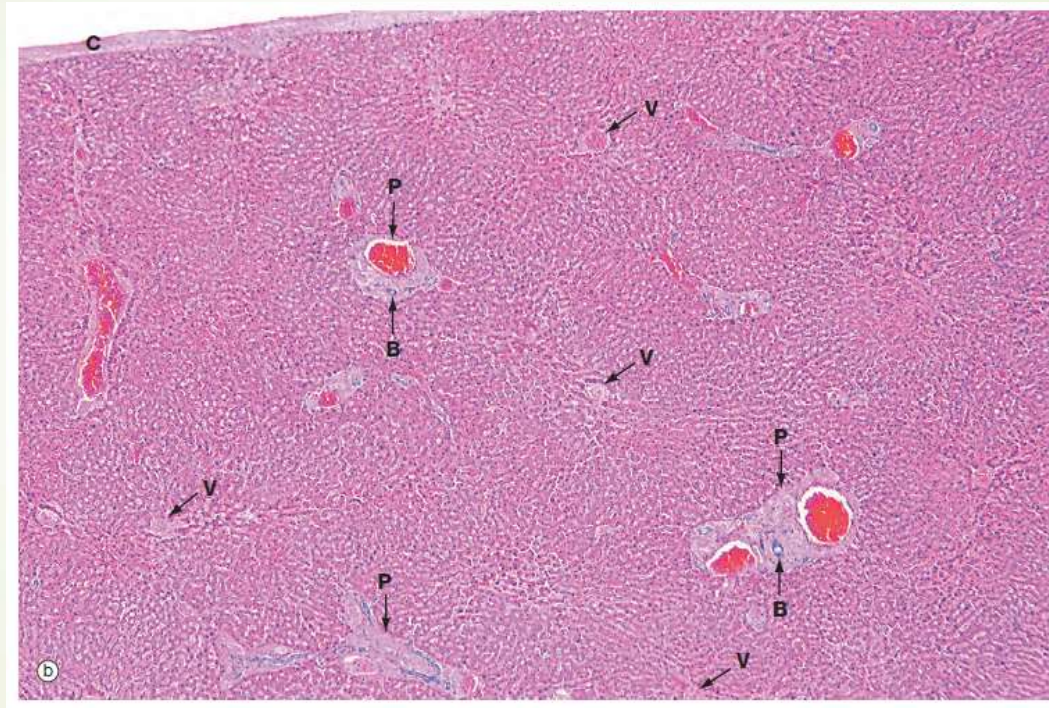
1. Overview of the hepar
2. Histology of arrangement of hepatic parenchyma
3. General organization of hepatic lobule
4. Structure and function of liver acinus
5. Histology of portal triads and central veins
6. Ultrastructure and function of hepatocytes
7. Ultrastructure of hepatic sinusoids
8. Ultrastructure of Space of Disse
9. Ultrastructure and function of bile canaliculi

Overview of the hepar

- ▶ the largest gland in the human body
- ▶ surrounded by a collagen-elastic fiber-containing capsule (of Glisson) and is lined by the peritoneum
- ▶ On the visceral surface is porta hepatis (gateway for hepatic ducts, portal vein, hepatic artery, lymphatics and nerves)
- ▶ Blood is supplied to the liver by two blood vessels (Portal veins, Hepatic artery)



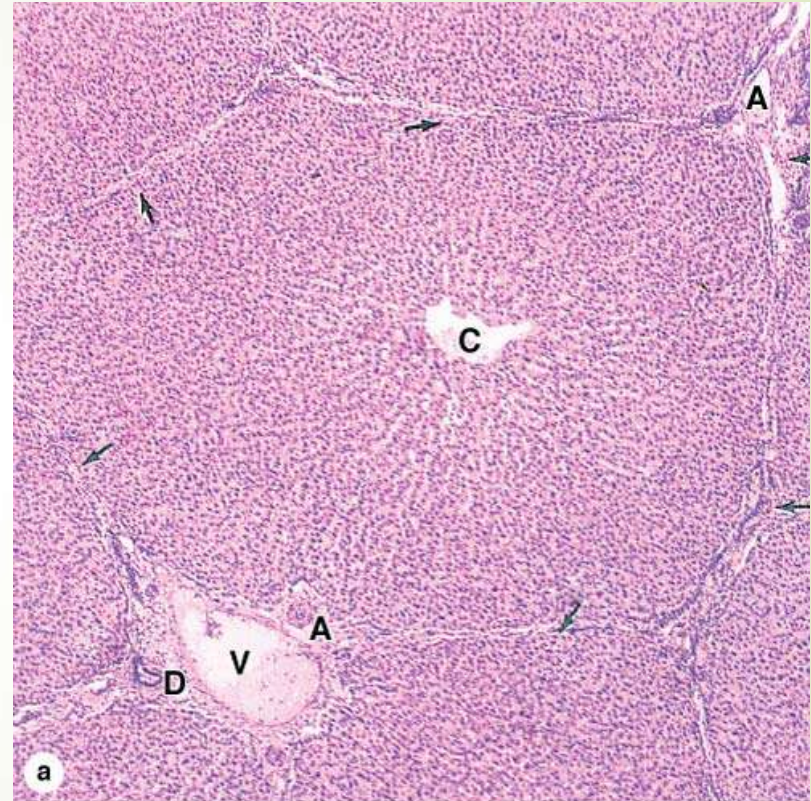
Histology of arrangement of hepatic parenchyma



- 80% of liver tissue is **parenchyma** and 20% is **stroma parenchyma** consisting of hepatocytes
- The liver parenchyma is organized as thousands of small ($\sim 0.7 \times 2$ mm) **hepatic lobules**

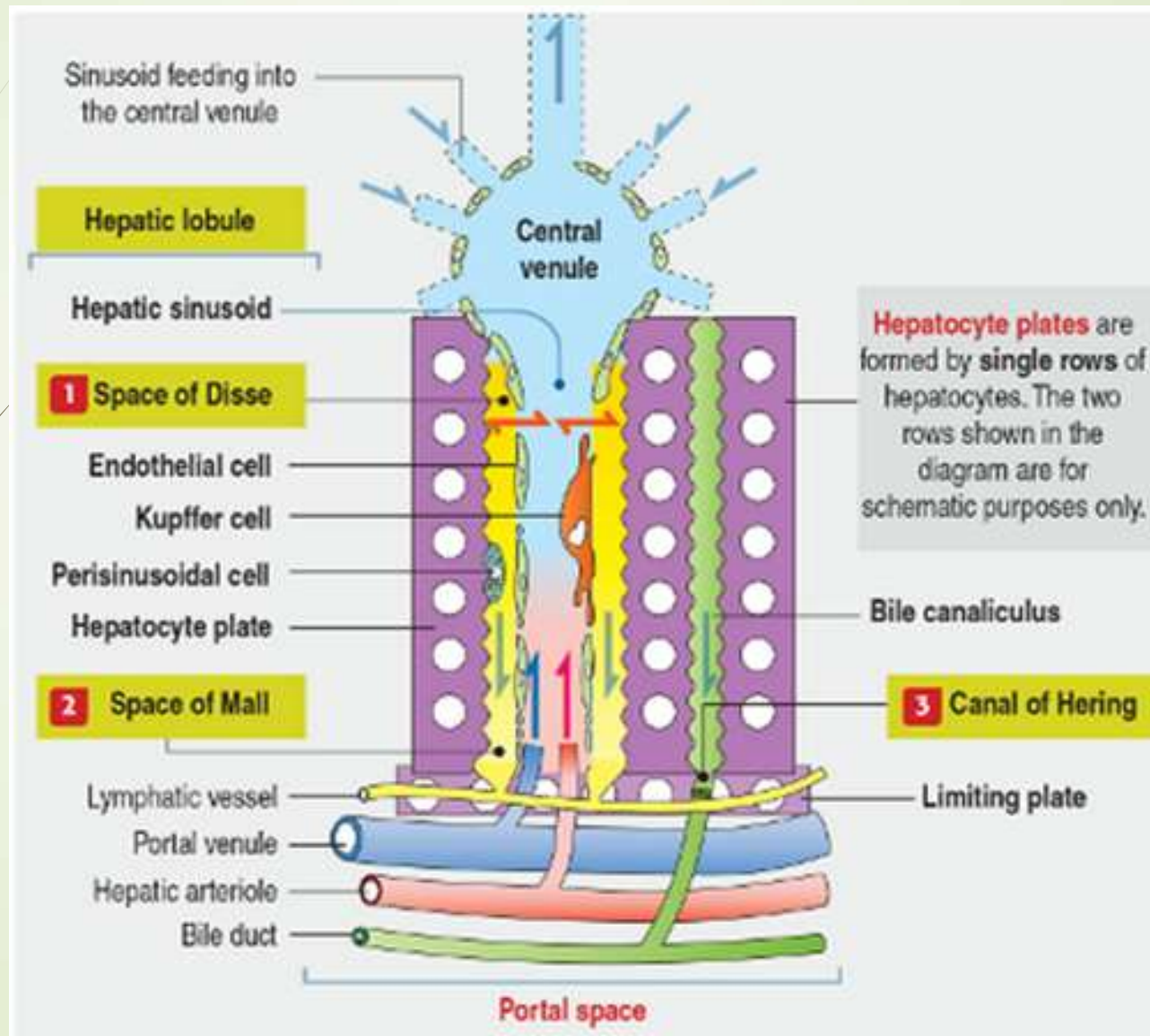
Hepatic lobule

- ▶ Hepatic lobuleles are polygonal/hexagonal units showing plates of hepatocytes radiating from a central venule



Source: Mescher AL: *Junqueira's Basic Histology: Text and Atlas, 12th Edition*: <http://www.accessmedicine.com>
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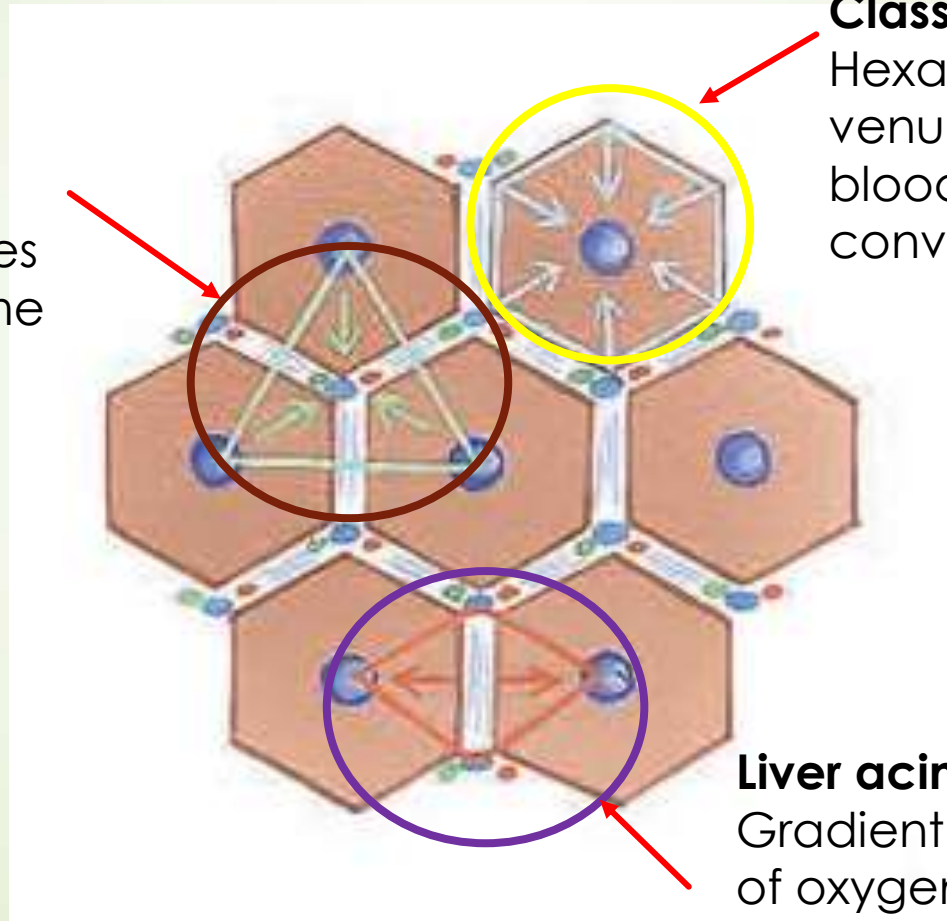
General organization of hepatic lobule



3 conceptual interpretations of the architecture of the hepatic lobule

Portal lobule:

Bile drainage pathway from adjacent lobules toward the same bile duct

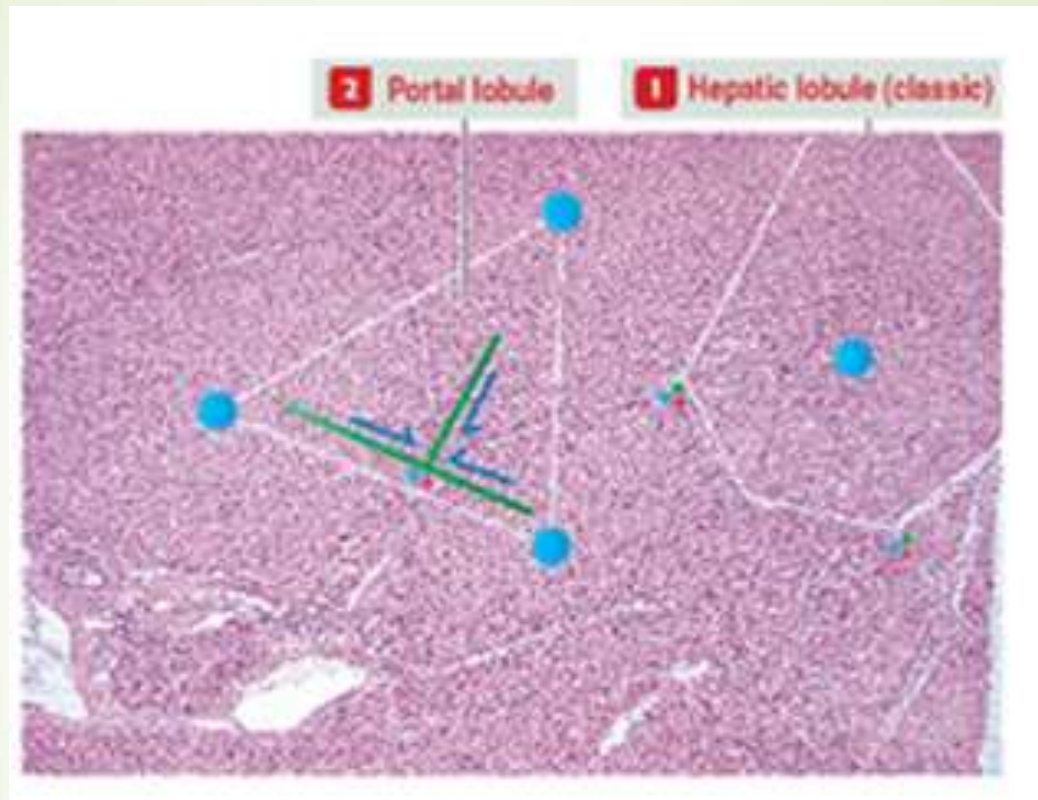


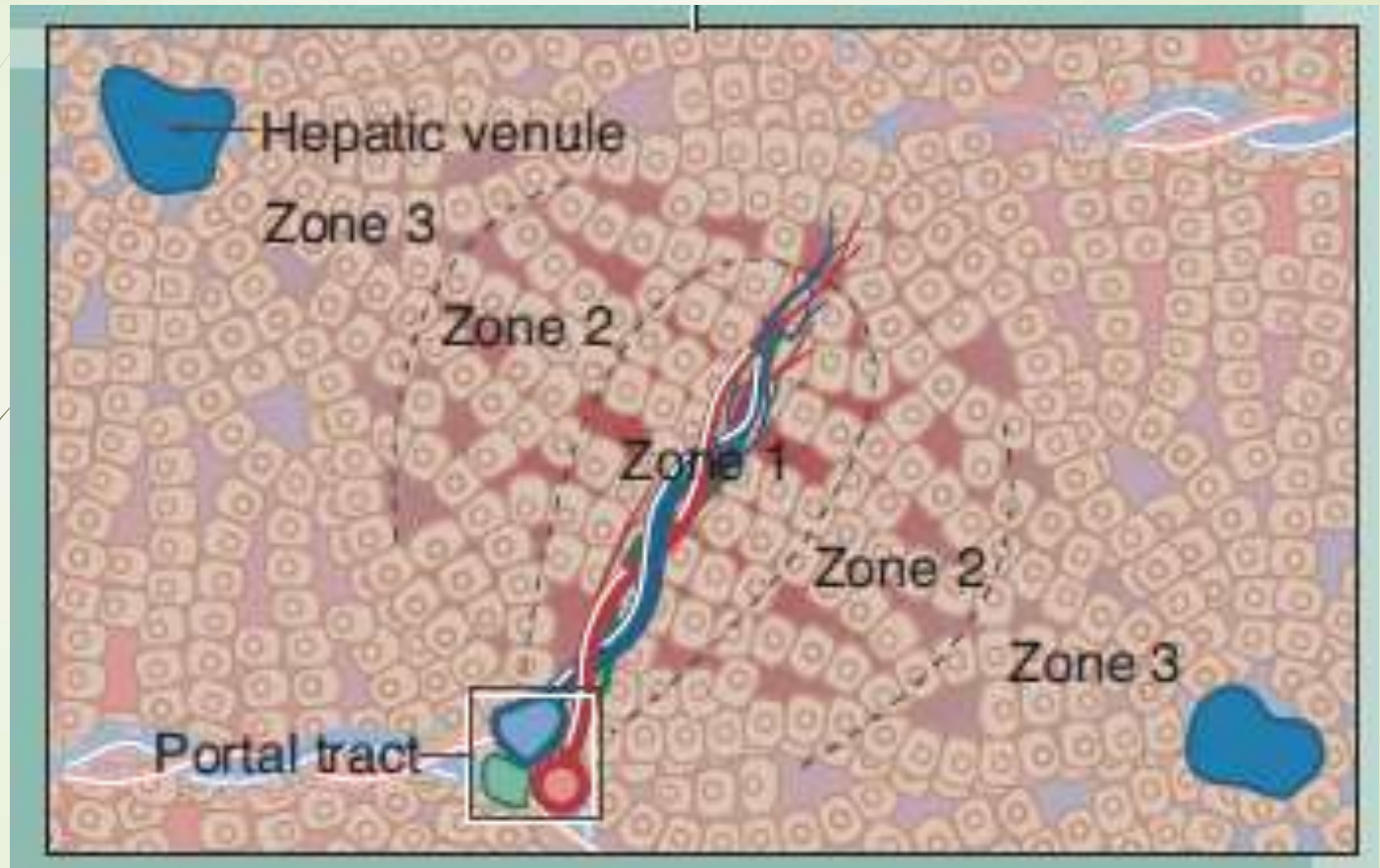
Classic lobule:

Hexagon with central venule to which blood sinusoid converge

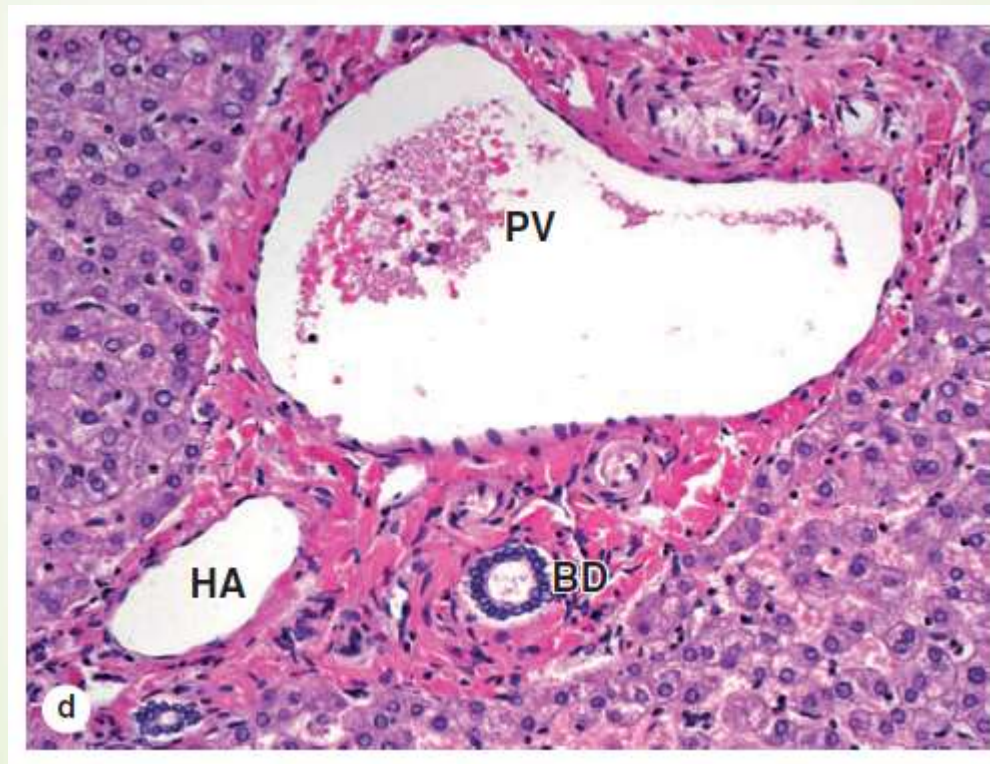
Liver acinus:

Gradient distribution of oxygen along the venous sinusoids of adjacent lobules

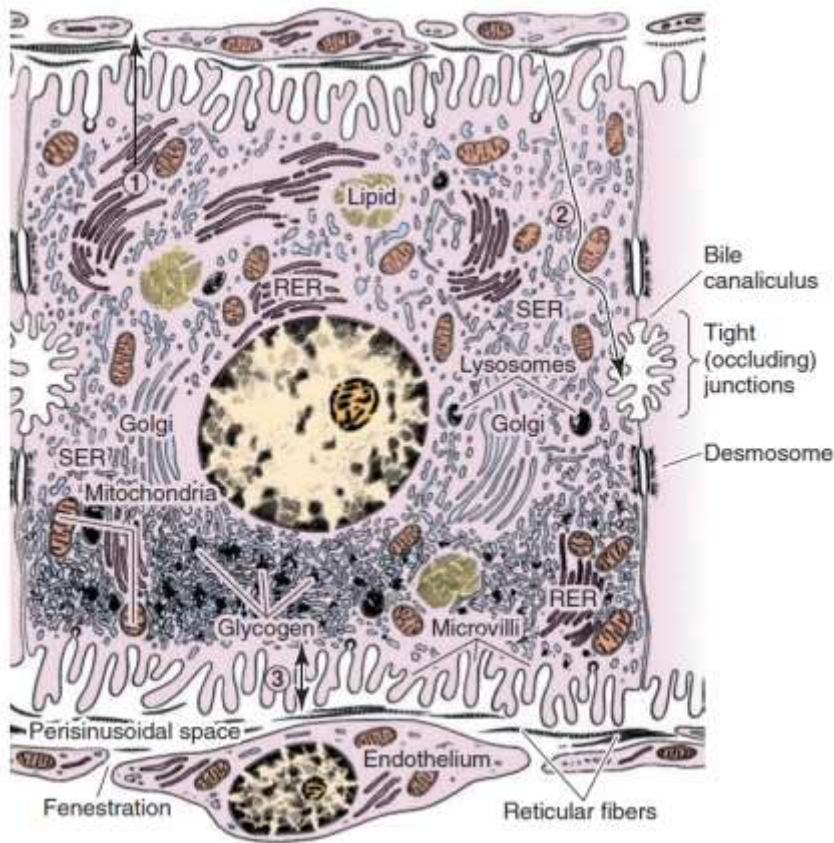




Histology of portal triads and central veins

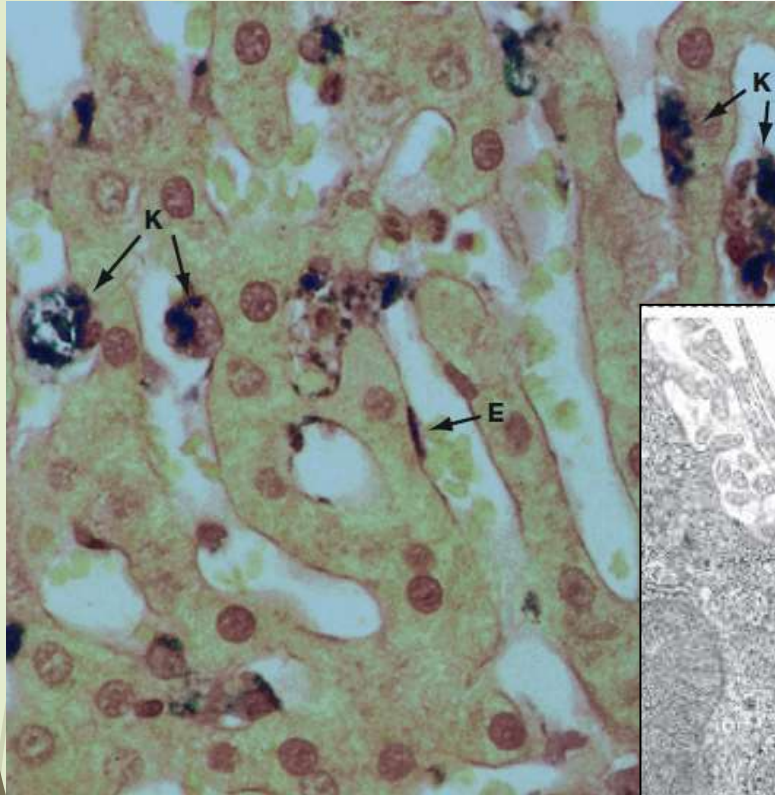


Ultrastructure and function of hepatocytes

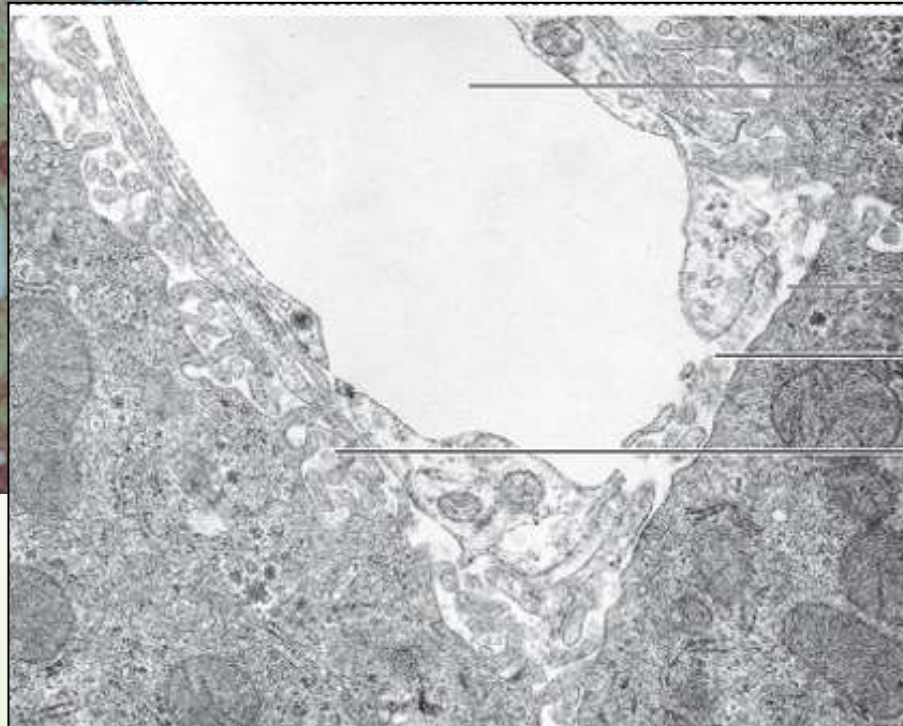


RER	Sintesis protein plasma
SER	Sintesis glikogen Sintesis lipid Sintesis empedu Memecah glikogen → glukosa Detoksifikasi lipid soluble drug
peroksi some	Enzim oksidase & katalase → $H_2O_2 \rightarrow H_2O + O_2$
lisosom	Menyimpan besi

Ultrastructure of hepatic sinusoids



Pear prussian blue



Lumen of a hepatic sinusoid

A discontinuous basement membrane supports the fenestrated endothelium lining a hepatic sinusoid

Fenestrated endothelium lining a hepatic sinusoid

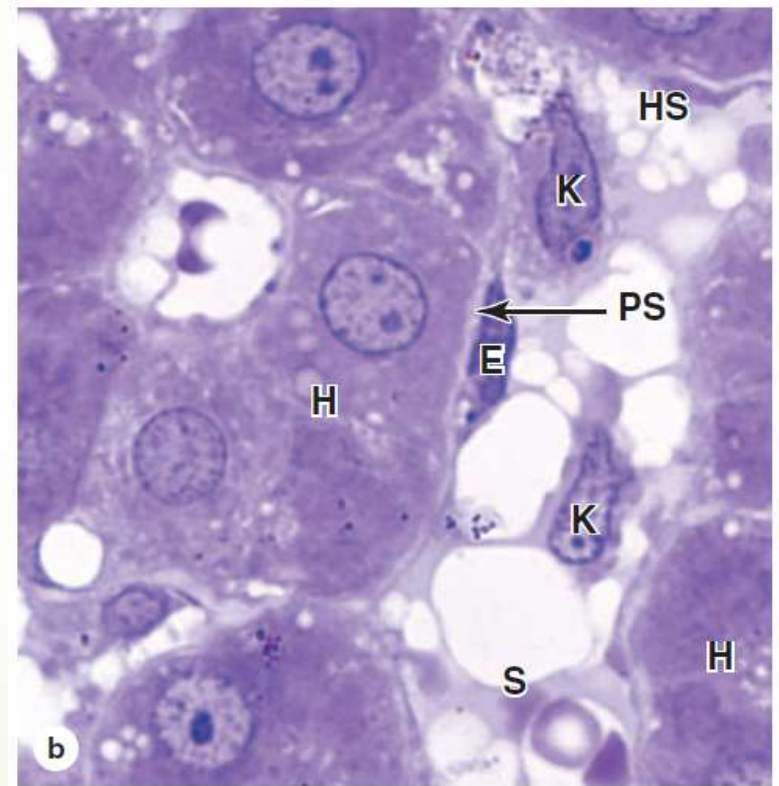
Microvilli of the basolateral membrane of a hepatocyte extending into the subendothelial space

Ultrastructure of space of disse

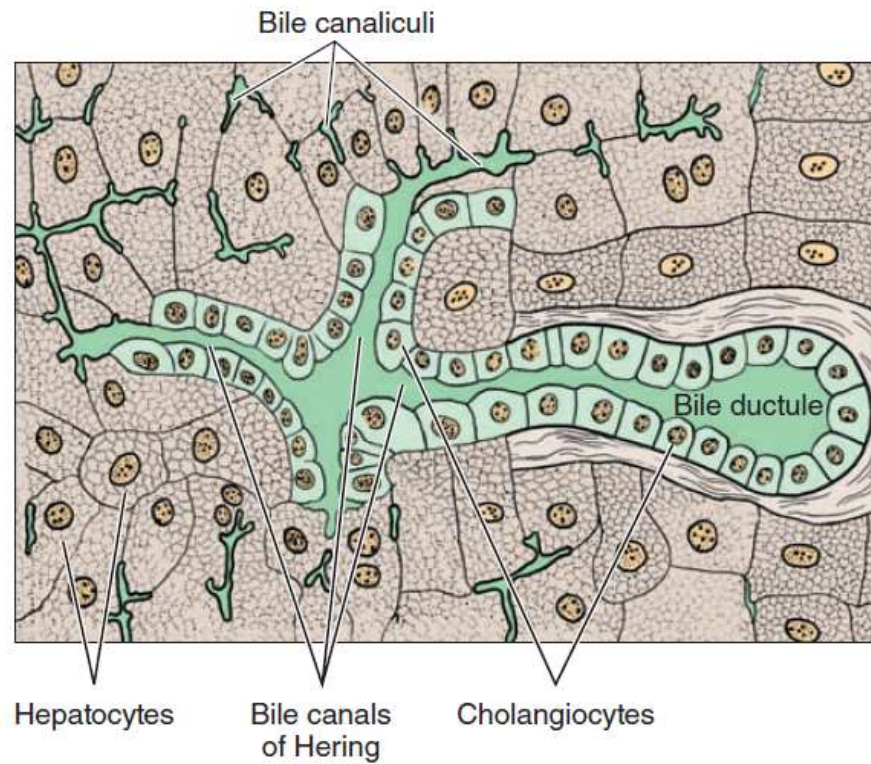
Ito cell

- Storage and release of retinoid
- Production and turnover of extracellular matrix
- The regulation of blood flow in the sinusoid

Remain in quiescent but can proliferate when activated by kupffer cell and hepatocytes



Ultrastructure of bile canaliculi



Liver regeneration

Ito cell, kupffer cell, endothelial cell

AKUT

- Excellent regenerative potential
- Endothel :VEGFR2
- Hepatocyte (HGF)

KRONIS

- Fibrogenesis → disrupt regenerative potential
- Perisinusoid → myofibroblas → TGF beta → fibrogenesis
- Hepatosit → TGF beta → EMT




Hepar

Vesica fellea

Pankreas



Learning objective: Gall Bladder

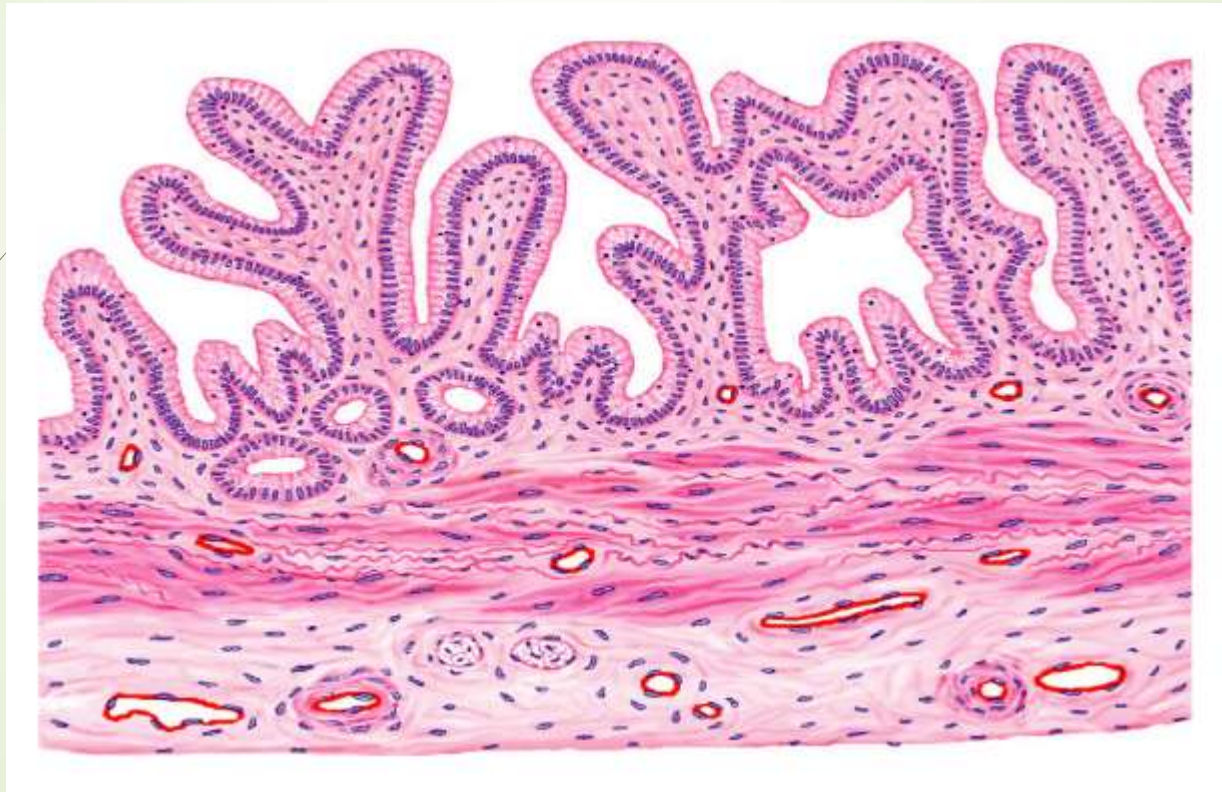
1. Overview of the gall bladder
 2. Histology of the gall bladder wall
 3. Ultrastructure and function of gallbladder mucosa
- 



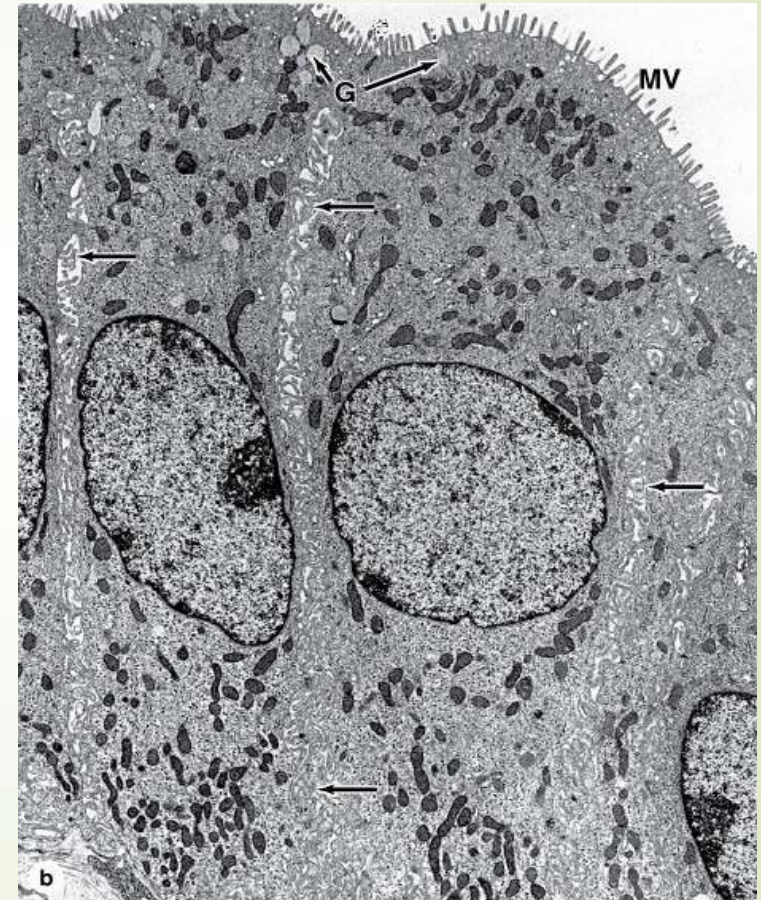
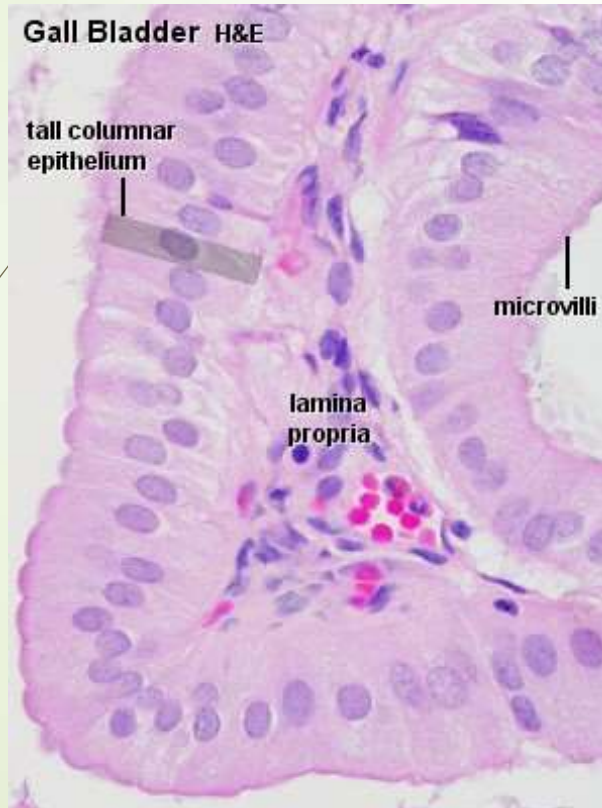
Overview of the gall bladder

- Mayor function :
 - Concentration and storage of bile between meals
 - Release of bile by contraction of muscularis

Histology of the gall bladder wall



Ultrastructure and function of gallbladder mucosa



Source: Mescher AL: *Junqueira's Basic Histology: Text and Atlas, 12th Edition*: <http://www.accessmedicine.com>
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A decorative graphic on the left side of the slide. It features a dark red arrow pointing to the right at the top. Below it, several thin, curved lines in shades of grey and brown sweep upwards and to the right, framing the text boxes.

Hepar

Vesica fellea

Exocrine Pancreas




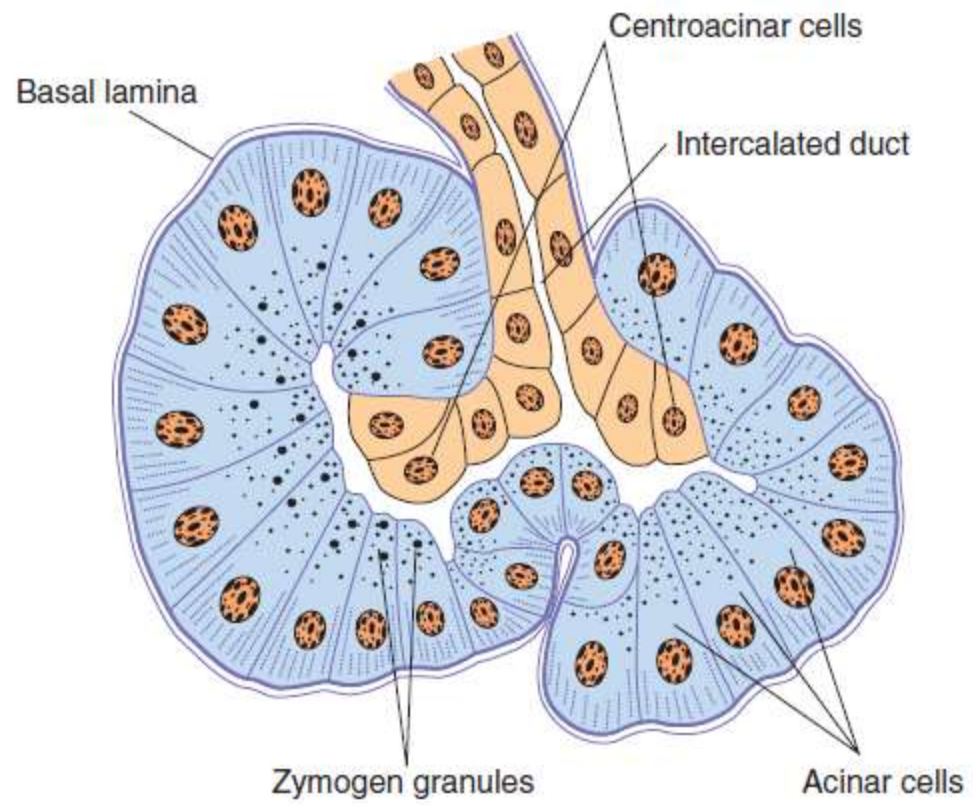
Learning objective: Exocrine Pancreas

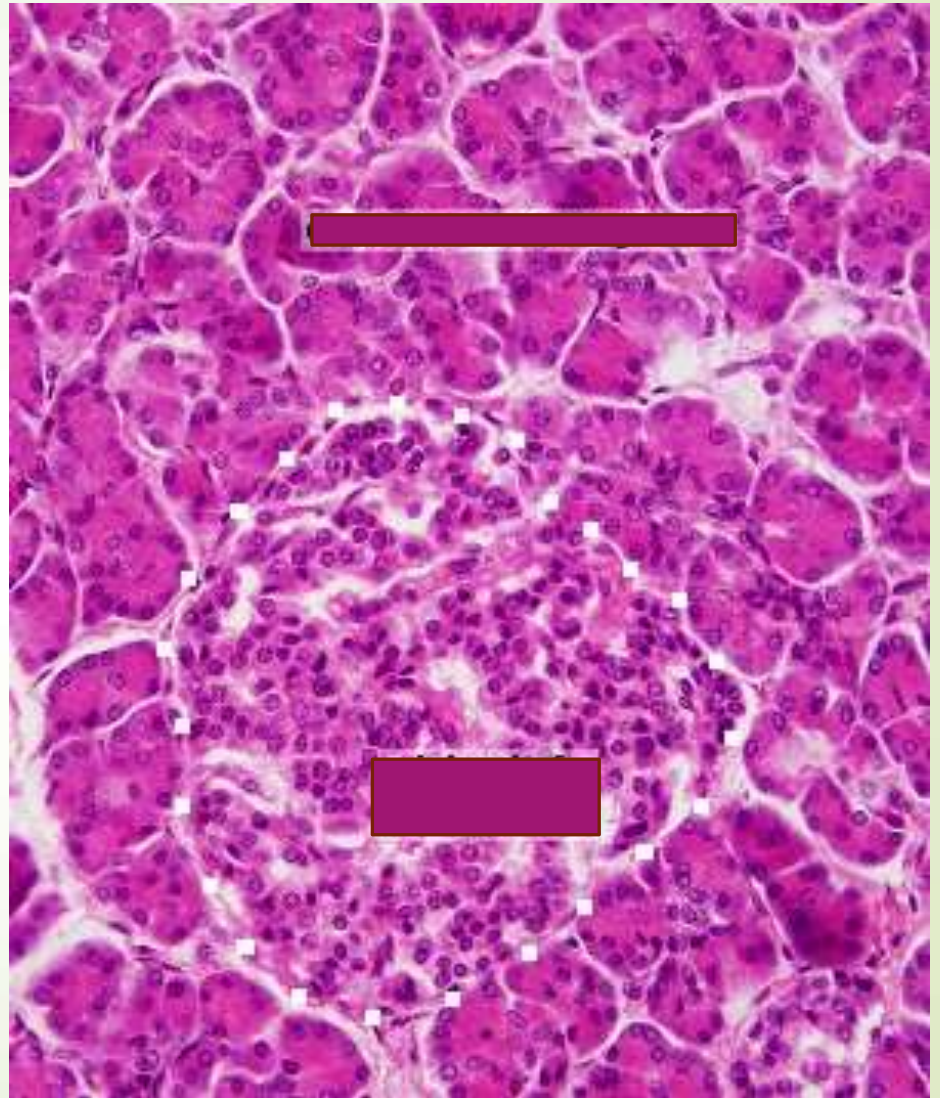
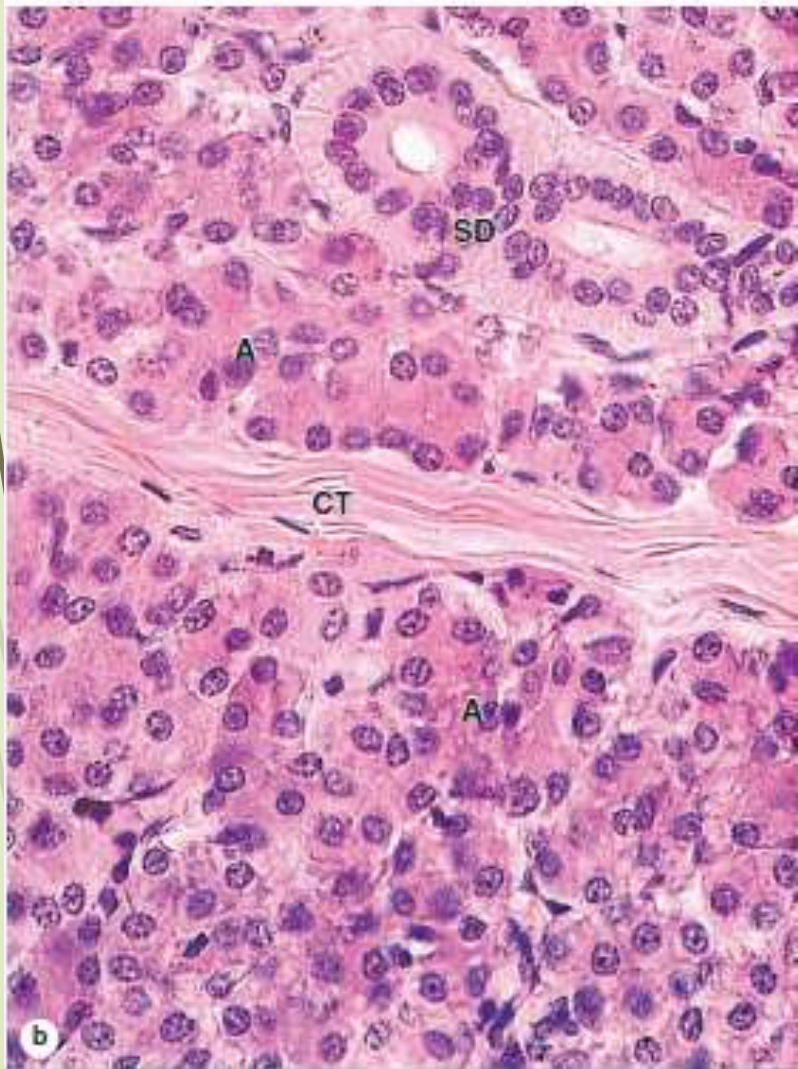
1. Overview of pancreas
 2. Histology and ultrastructure of Exocrine pancreas: Duct and Acini
- 



Overview of pancreas

- Surrounded by connective tissue
 - Lobulus are separated by connective tissue septa carrying blood and lymphatic vessels, nerves and excretory ducts
 - Functional histologic unit : ACINUS
- 





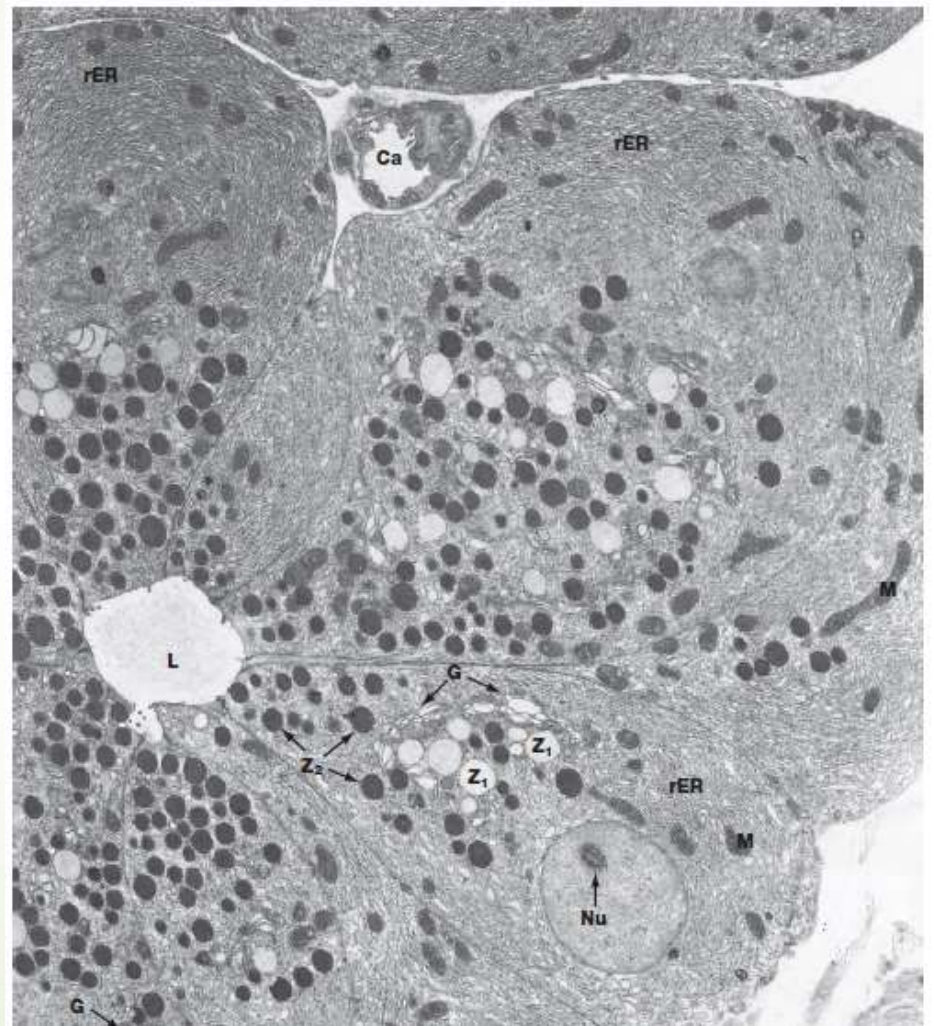
Pancreatic Acinar Cell

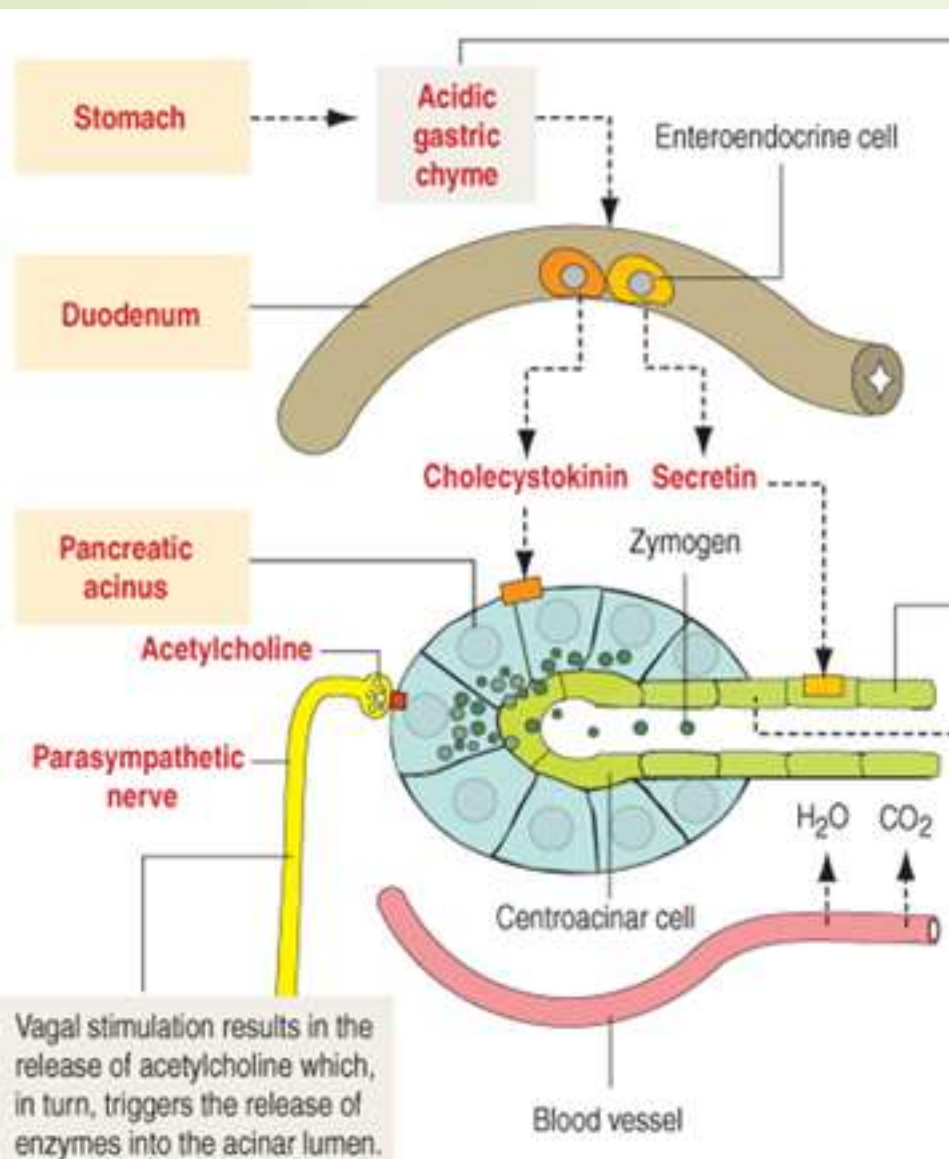
RER → synthesized inactive proenzyme

Golgi apparatus → concentrated in vesicle to form zymogen granules

Each zymogen contain several pancreatic enzymes

Damage to the pancreatic acinar cells releases pancreatic enzymes into the local tissues.





Vagal stimulation results in the release of acetylcholine which, in turn, triggers the release of enzymes into the acinar lumen.

Secretin and **cholecystikinin** are secreted into the blood by enteroendocrine cells of the **duodenum** when chyme enters the small intestine.

Acinar pancreatic cells secrete the inactive forms of the enzymes **trypsin**, **chymotrypsin**, and **carboxylpeptidases**. Active **amylase**, **lipase**, **cholesterol esterase**, and **phospholipase** are also secreted.

Acinar pancreatic cells secrete **trypsin inhibitor**, which prevents the activation of trypsin and other proteolytic enzymes within the acinar lumen and ducts.

Epithelial cells of the **intercalated duct** secrete **water** and **bicarbonate ions**.

The **secretion of bicarbonate ions and water is regulated by secretin** and involves the following steps:

1. Diffusion of CO_2 from a blood vessel into intercalated duct epithelial cells.
2. CO_2 binds to water and forms carbonic acid under the influence of carbonic anhydrase.
3. Carbonic acid dissociates into HCO_3^- and H^+ .
4. HCO_3^- is actively transported to the lumen of the duct.
5. H^+ and Na^+ are actively exchanged (cell-blood exchange) and Na^+ flows into the ductular lumen to achieve electrical neutrality.

