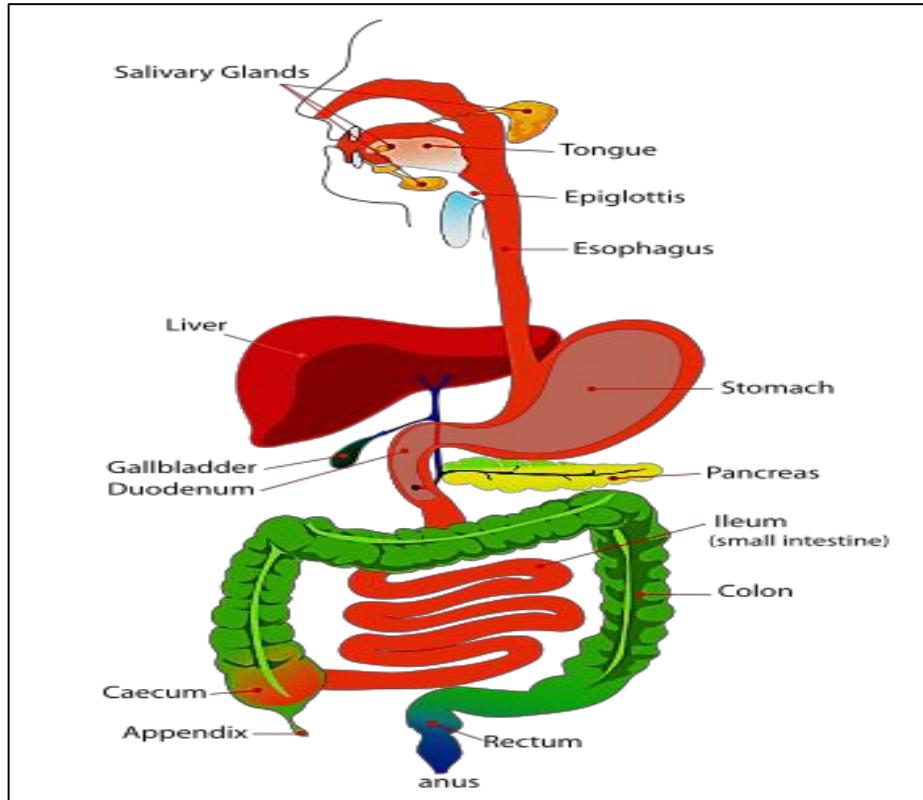


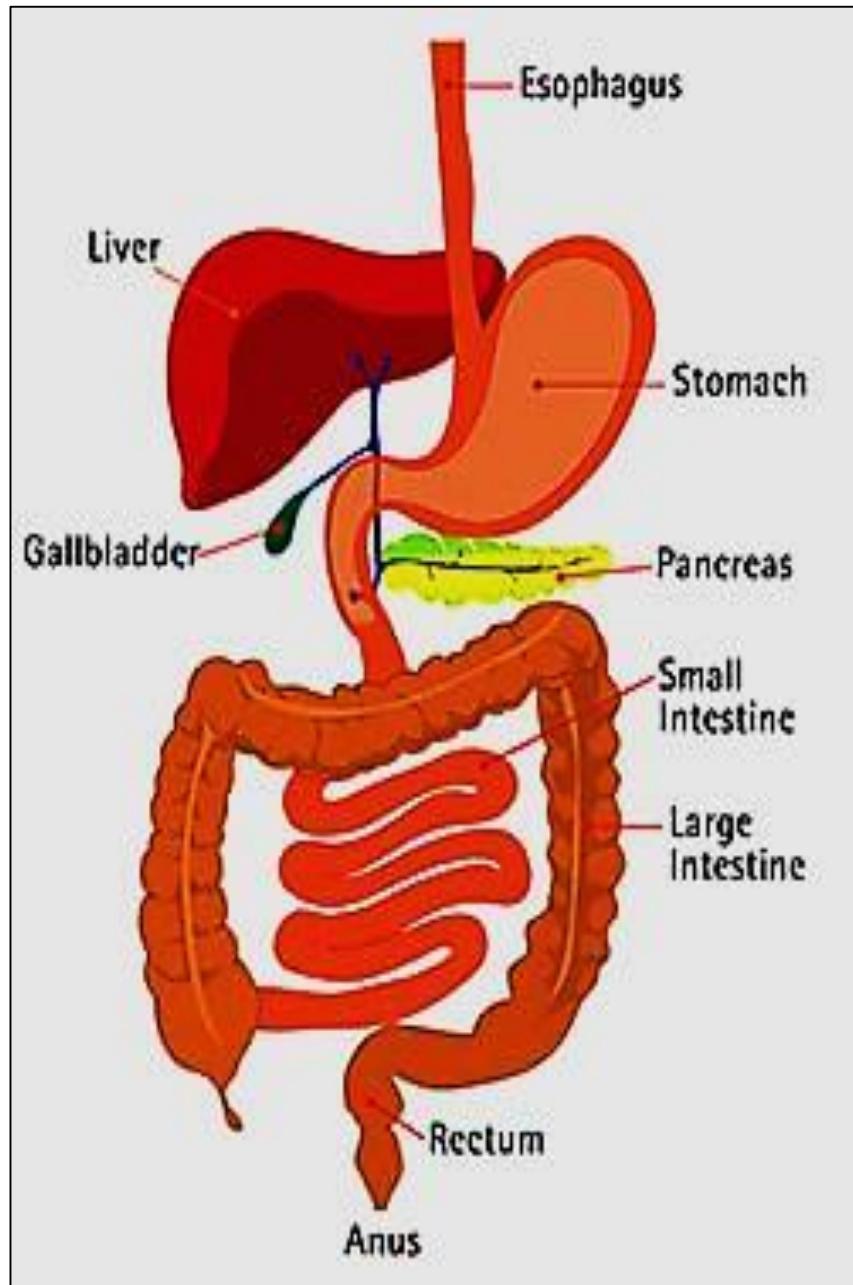
The Digestive system II



The gastro- intestinal tract:

Composed of:

- Esophagus
- Stomach
- Small intestine
- Large intestine
- Anal canal



General features of the wall of the GIT

its wall is composed of 4 layers:

Mucosa: *structure & its function and do **
→ the most inner layer

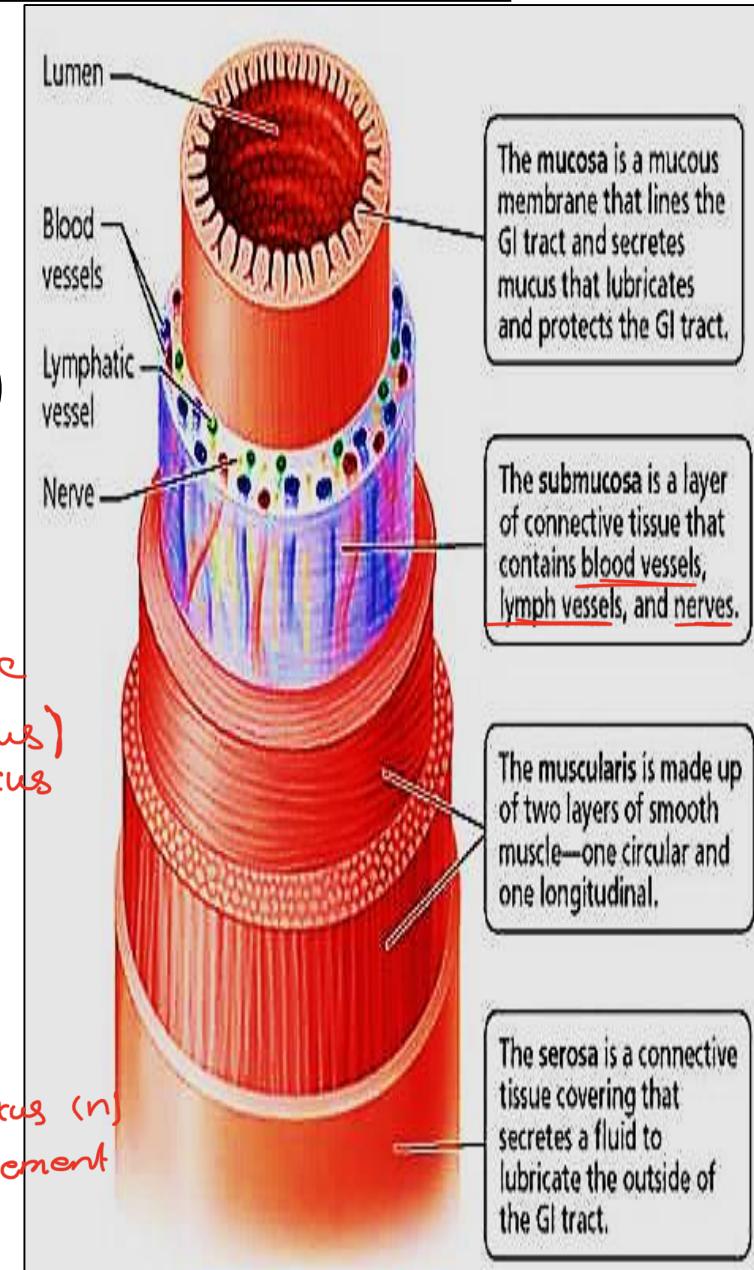
- Epithelium
- CT (Lamina propria, corium)
- Muscularis mucosa (s. ms.)

Submucosa: C.T. *contain BV + lymphatic
+ nerve plexus (besclus)
plexus*

Musculosa : 2 layers of
smooth muscles (IC & OL)

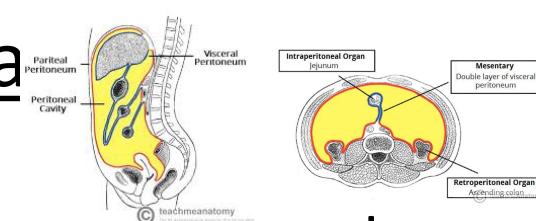
inner : circular +
outer : longitudinal ⇒ in between minteric plexus (n)
motor in peristalsis movement

Adventitia or serosa



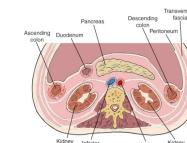
Adventitia vs. serosa

Serosa: double layer epithelial membrane



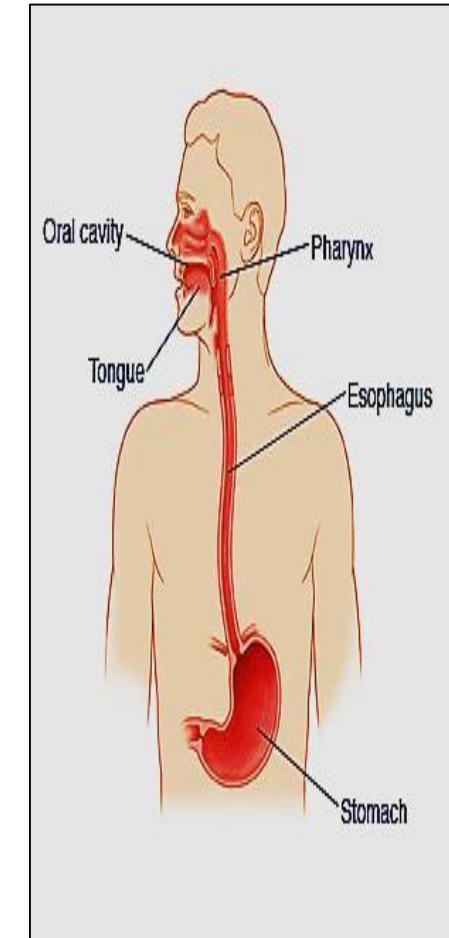
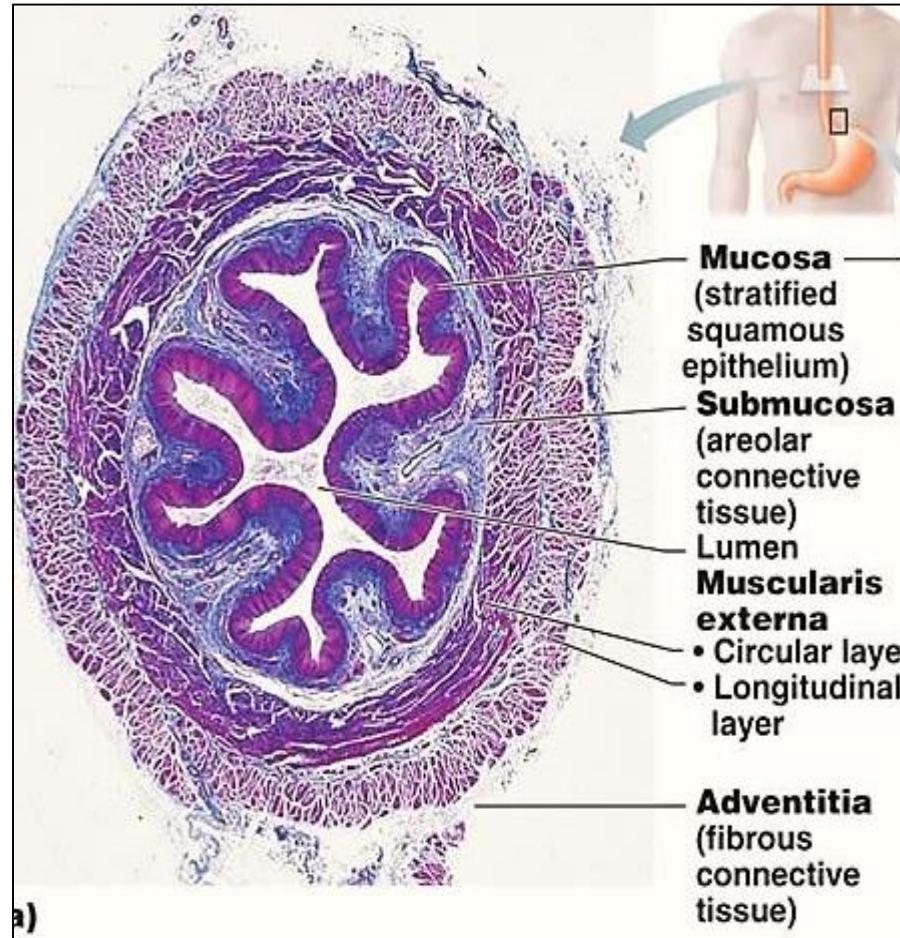
One layer is attached to the organ called **visceral layer**, the other layer will be close to the body cavity & called **partial layer**. In between these two epithelial layer is fluid called **serous for lubrication** (reduce friction)

Serosa will wrap organs that sit in a body cavity i.e. abdominal cavity e.g. **GIT organs within the peritoneum** i.e **intraperitoneal organs** (liver, stomach, spleen, 1st part pf duodenum, ileum, jejunum, transverse & sigmoid colon)



The esophagus

- Muscular tube connects the pharynx with stomach,
transport food
- Its wall consists of 4 layers:
 - **Mucosa**
 - **Submucosa:**
 - **Musculosa**
 - **Adventitia**



Mucosa

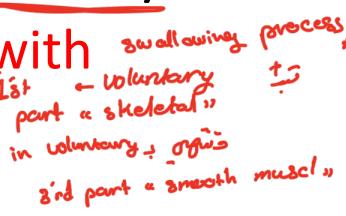
يُحْفَلُ الْمَعْصِنَةُ، كَبِيرٌ حَجْمٌ اِنْدَكِي

Epithelium: Non-keratinized stratified squamous epith.

Lamina propria: B.V., nerves, lymphatics (!Cardiac orifice)  For lubrication

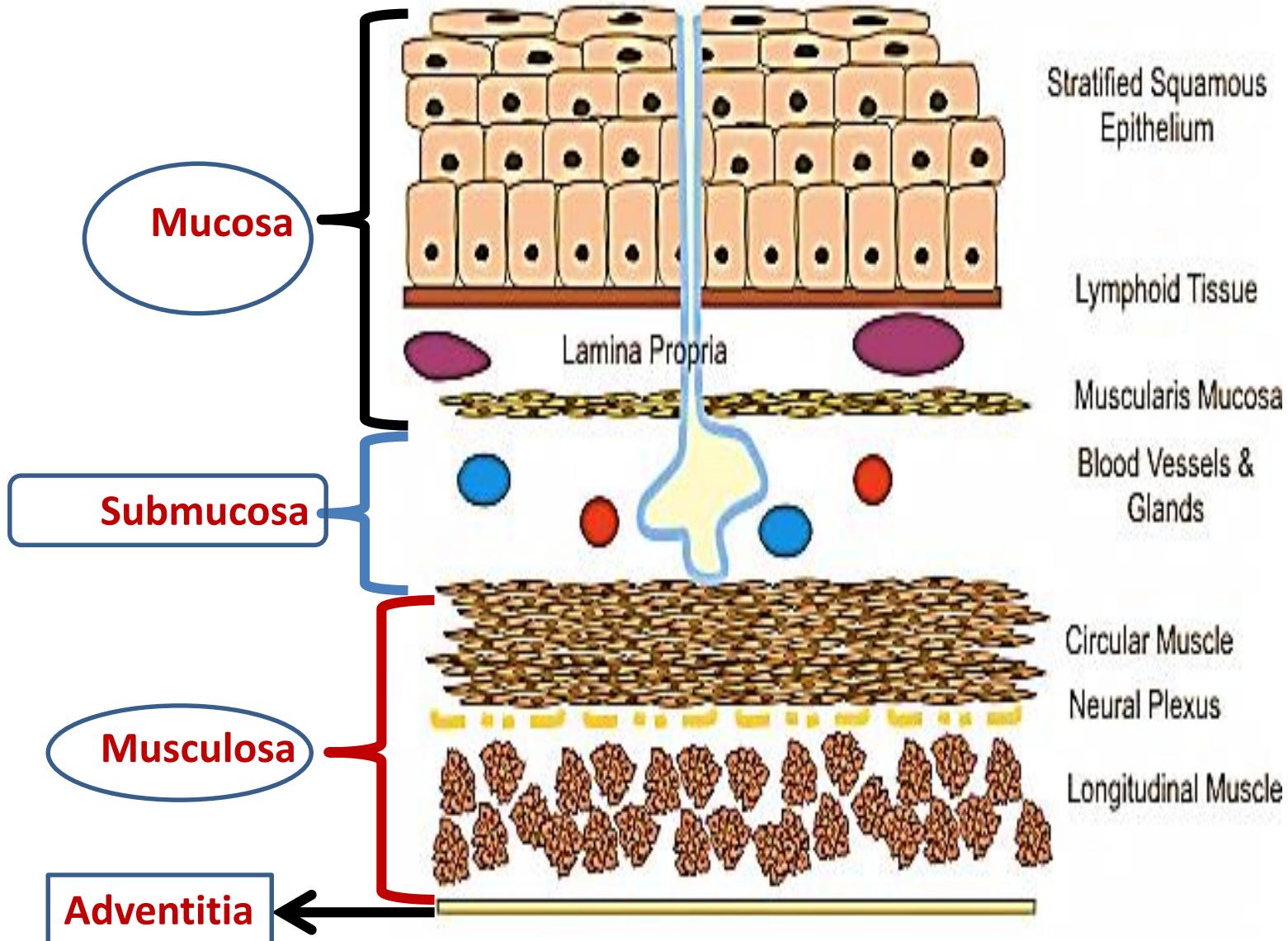
Muscularis mucosa: smooth ms.

Submucosa: loose C.T. contains BV, lymphatics, Meissner's plexus of nerves & esophageal mucous glands  lubrication 

Musculosa: IC & OL (OL: upper 1/3 Striated * , middle 1/3 mixed & lower 1/3 smooth ms.) NB: swallowing start with controllable motion but finishes with involuntary peristalsis  skeletal 
swallowing process
1st part = voluntary
in voluntary + organs
2nd part = "smooth muscle"

Adventitia: covers most of the esophagus  except the most distal portion which is located in the abdominal cavity is covered by serosa 
الْمَعْصِنَةُ فَوْرٌ
الْمَعْصِنَةُ مَطَاطِمٌ

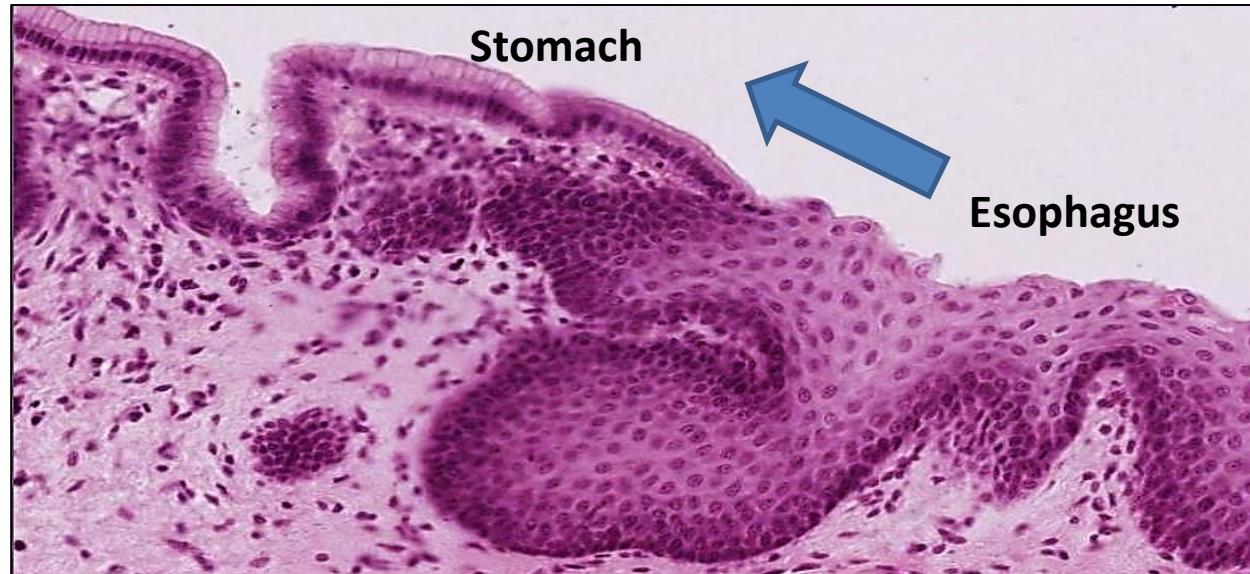
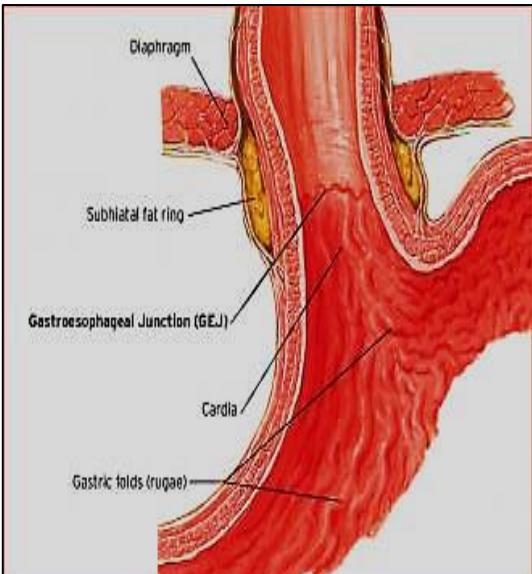
Layers of the wall of the esophagus



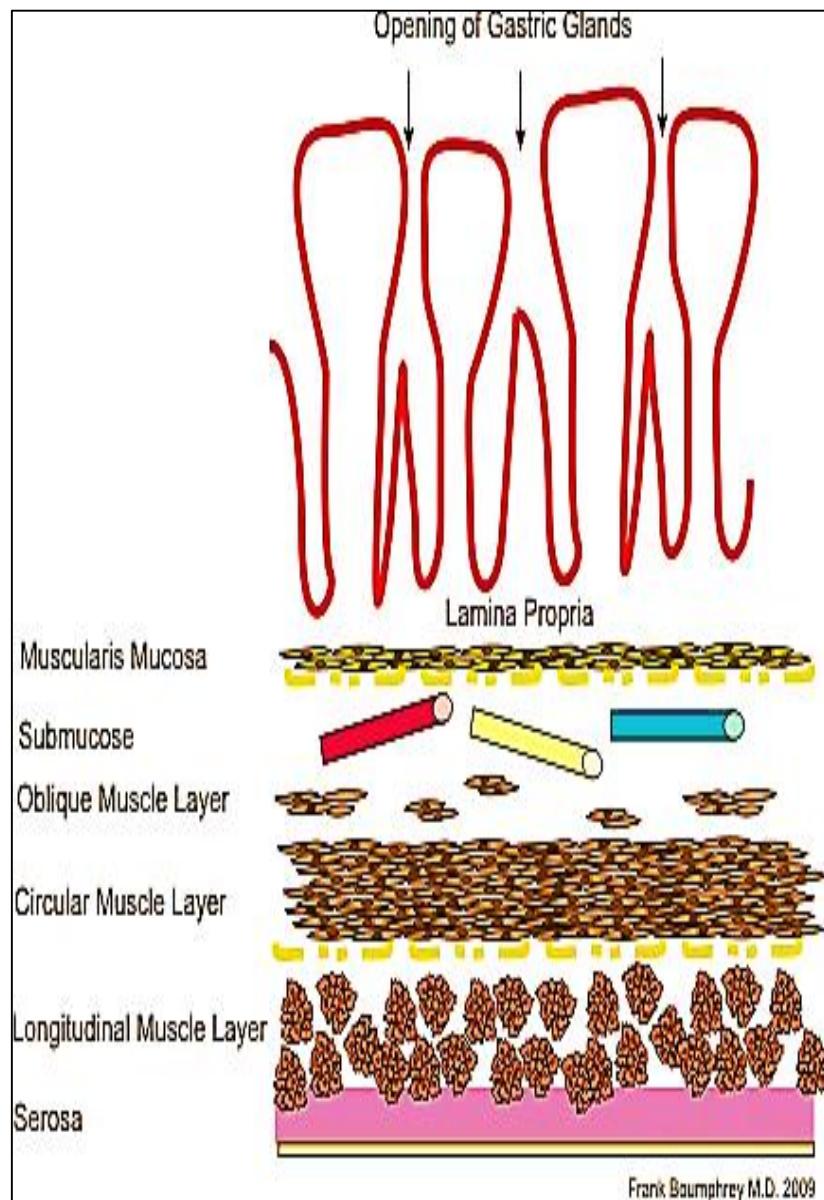


Changes at gastro- esophageal junction

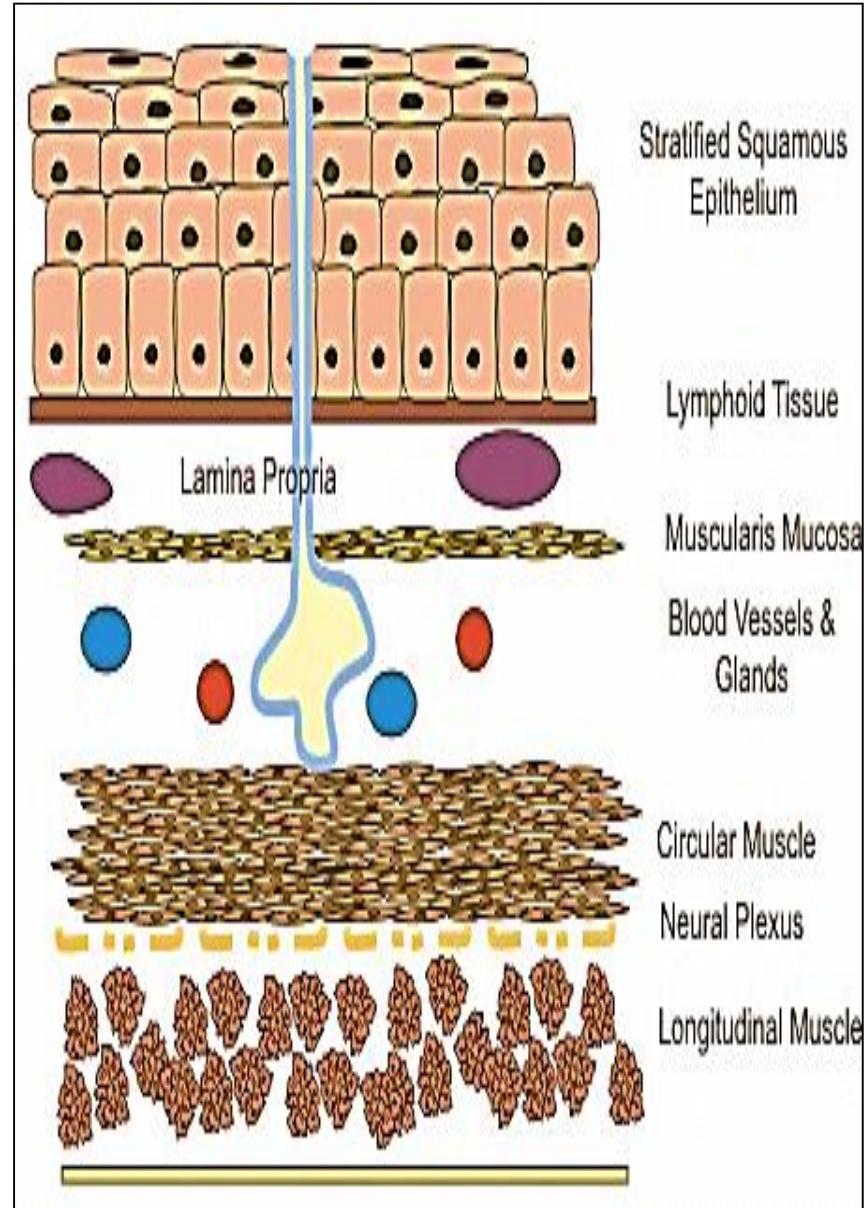
1. The stratified Squamous → simple columnar epithelium
2. The lamina propria of stomach is wide & contains gastric glands (branched tubular)
3. The esophageal glands in the submucosa of esophagus stops in that of stomach
4. The musculosa becomes more thick in stomach due to the appearance of inner oblique layer + middle circular + outer longitudinal



Layers of wall of stomach



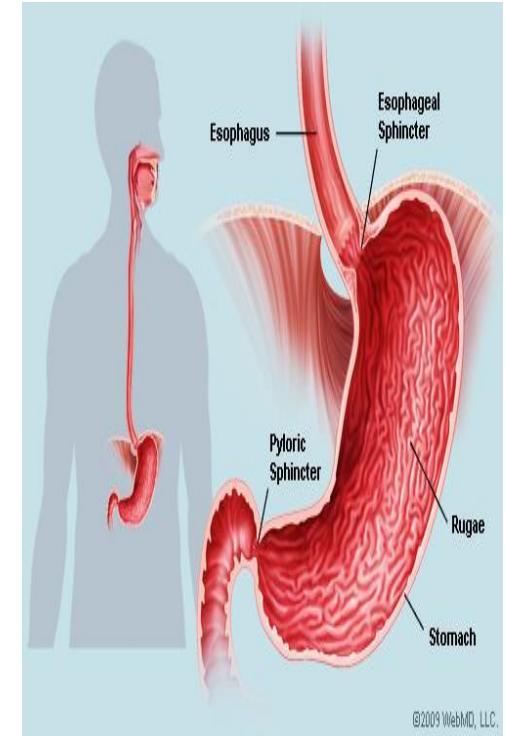
Layers of wall of esophagus



The stomach

- The most dilated part of the GIT
- The mucosa in empty stomach forms longitudinal folds called **gastric rugae**
- It acidifies & converts the food → chyme
- The mucosa of stomach contains gastric glands (cardiac, fundic , pyloric)
- These glands secrete gastric juice which contains:
 - Acid: HCl
 - Mucus
 - enzymes: pepsinogen, lipase

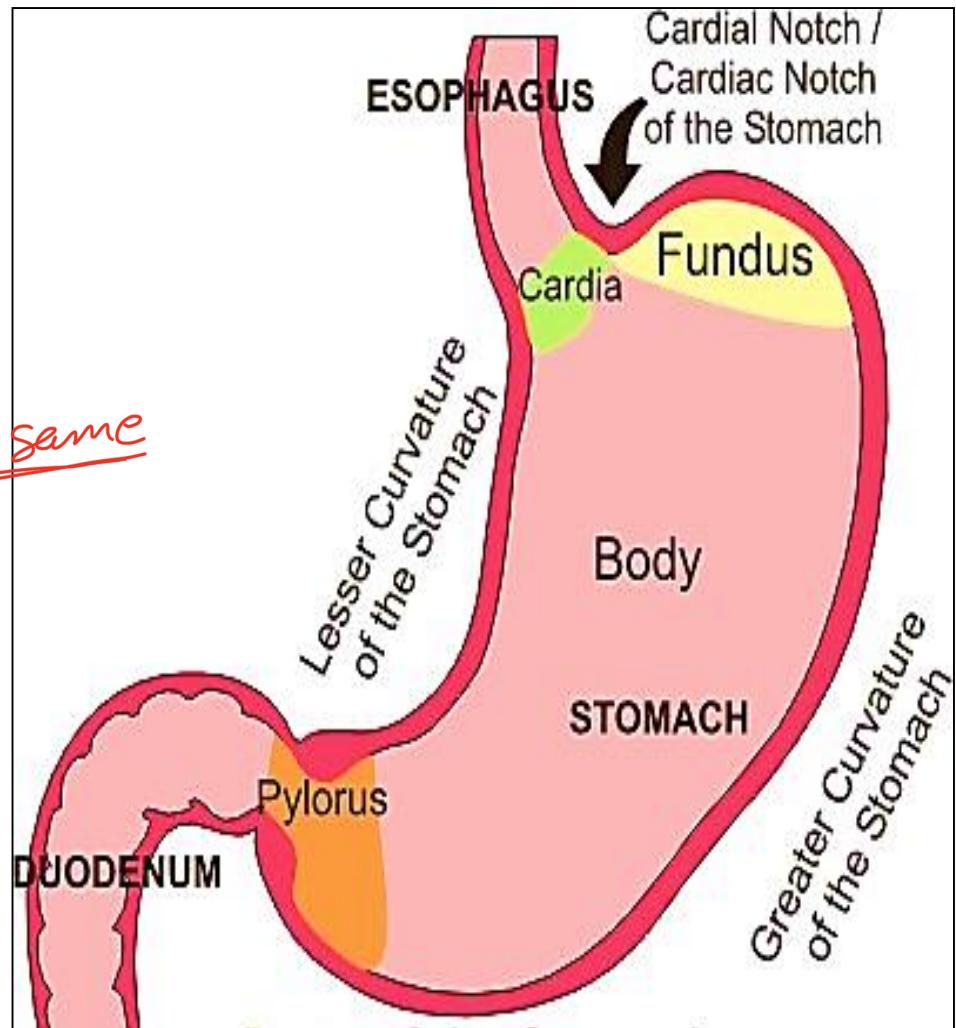
For digestion



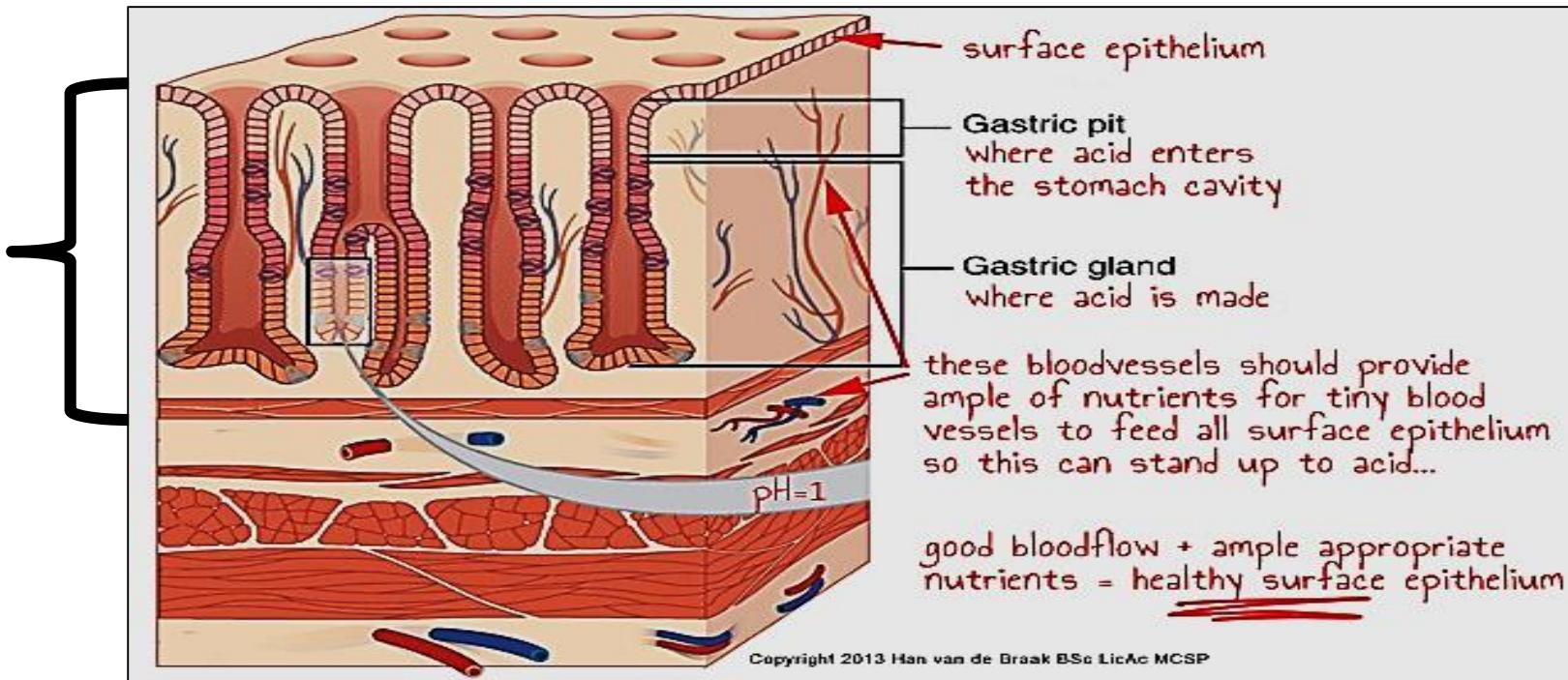
The stomach

The stomach is subdivided into 4 regions:

1. The cardiac region
 2. The fundus
 3. The body
 4. The pyloric region
- the same*



The fundus & body of the stomach

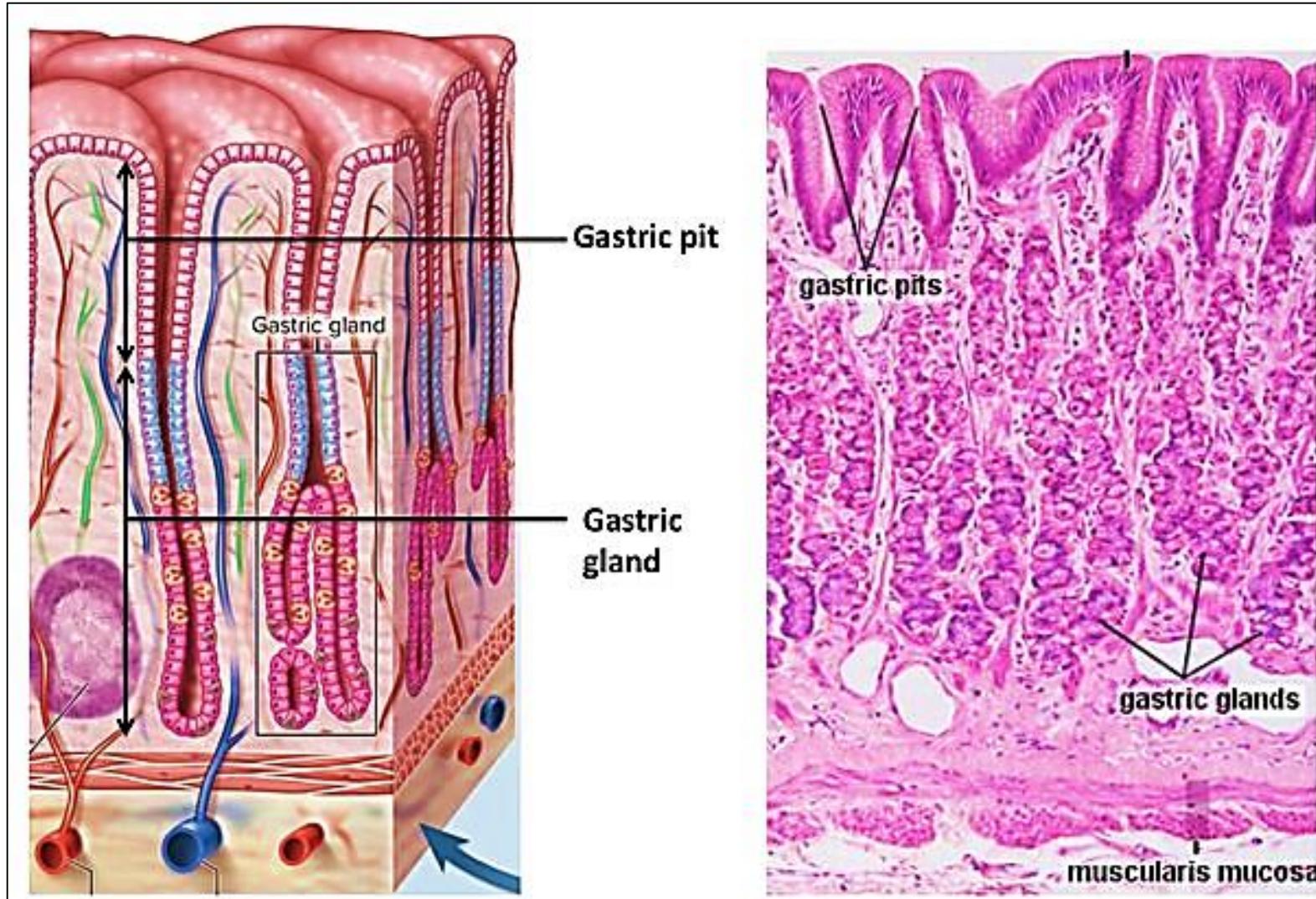


1- The mucosa:

- **epithelium:** simple columnar cells, these cells secrete **neutral mucus** for lubrication & protection*
- **lamina propria:** contains gastric glands & C.T. fills the spaces between the glands . It also contains B.V., lymphatics, nerves

simple tubular gland

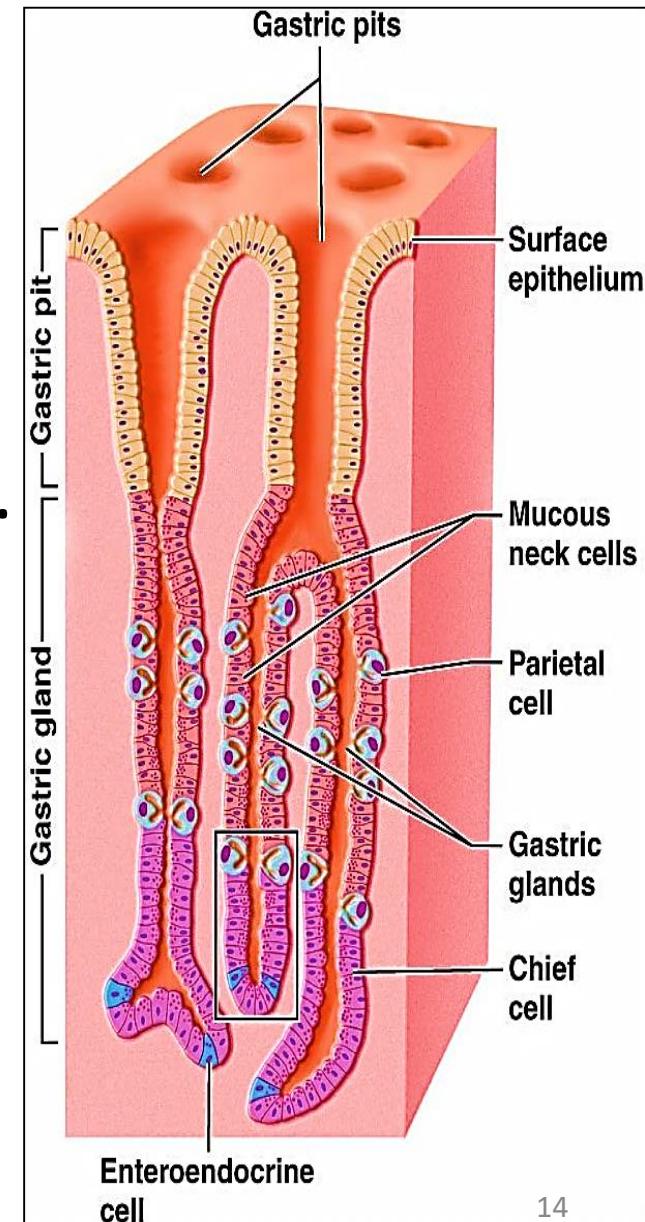
The gastric (fundic) glands



- **Muscularis mucosa:** layers of smooth muscles arranged as (IC & OL) inner circular & outer longitudinal

Gastric glands (fundus)

- simple branched tubular.
- occupy the entire thickness of the mucosa .
- They open onto the surface epithelium through gastric pits.
- through the pits the mucus, HCl & gastric enzymes reach the lumen of the stomach



- Each gland is formed of 3 parts: **isthmus, neck & base**
- 6 types of cells line the fundic glands:

1- Surface mucous cells (Foveolar cells):

cover the surface & line the gastric pits & isthmus. Their apical cytoplasm contains mucin granules.

They sec. neutral mucus for protection

(Gastric mucosal barrier)

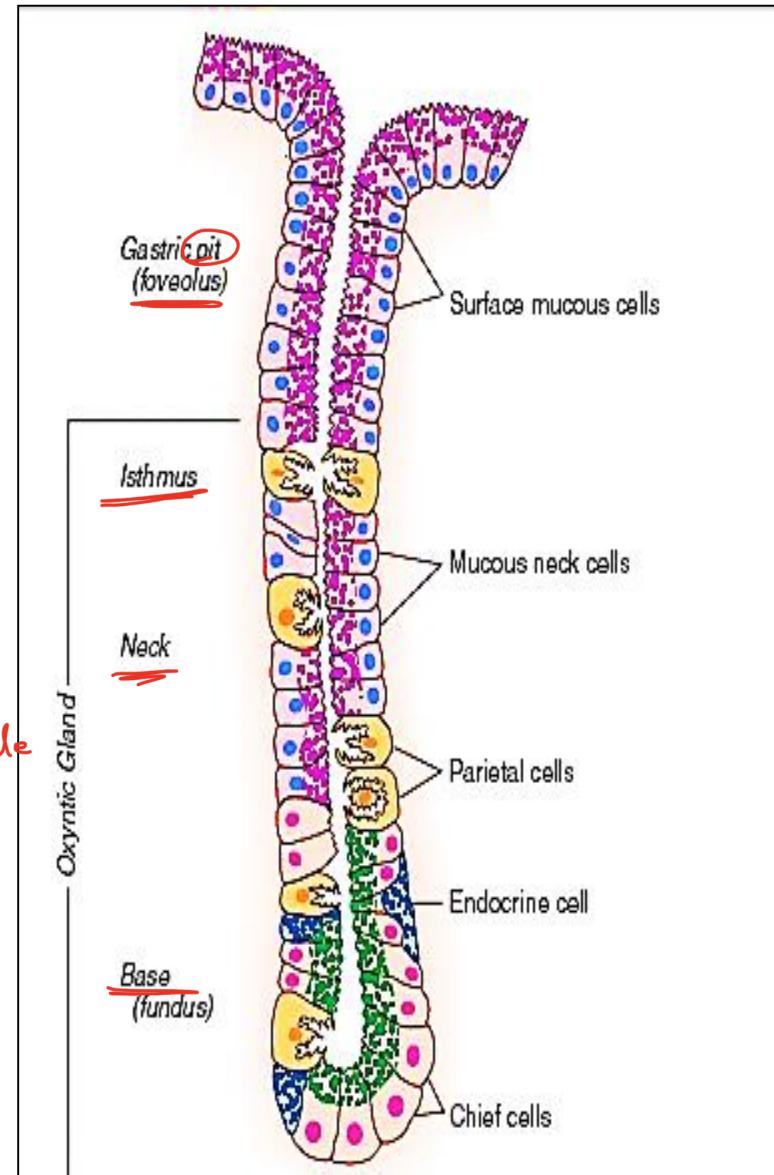
جاذب حامٍ ↪ thick neutral mucus ↪ تجزئ ↪ mucin granule
GMB ↪ in solvable

2- Mucous neck cell: present in

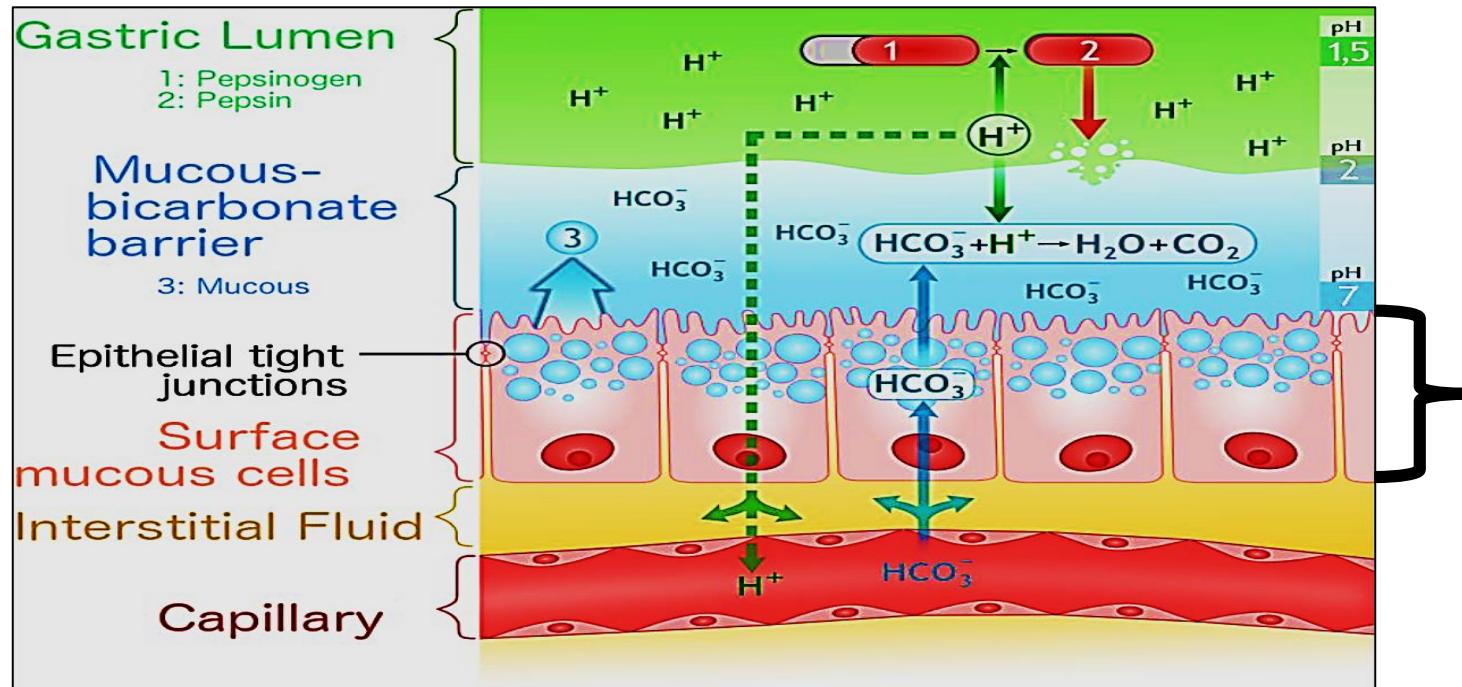
neck of gastric glands, ↪ secrete HCl
2-1.5 ↪ optimum pH HCl توجع داء المعدة
low columnar cells e foamy cytoplasm.

They secrete acidic mucus

أكتر اذرياً و تجزئ
isthmus neck ↪ HCl



Gastric mucosal barrier



- 1- Tight junctions** between the lining epithelial cells
- 2- A thick insoluble mucus covering** secreted by surface epithelial cells, forms a physical barrier that coats the entire surface of the gastric mucosa.
- 3- Bicarbonate ions**, secreted by the surface epithelial cells. The bicarbonate ions act to neutralize harsh acids that find access to cells

mucus layer اسنجاع احتراج H^+ سفع اولایا ته داد $\text{H}^+ + \text{HCO}_3^- \rightarrow \text{H}_2\text{CO}_3$ \leftarrow mucus \leftarrow سفع اولایا ته داد H_2CO_3 \leftarrow weak acid \Rightarrow H_2O CO_2

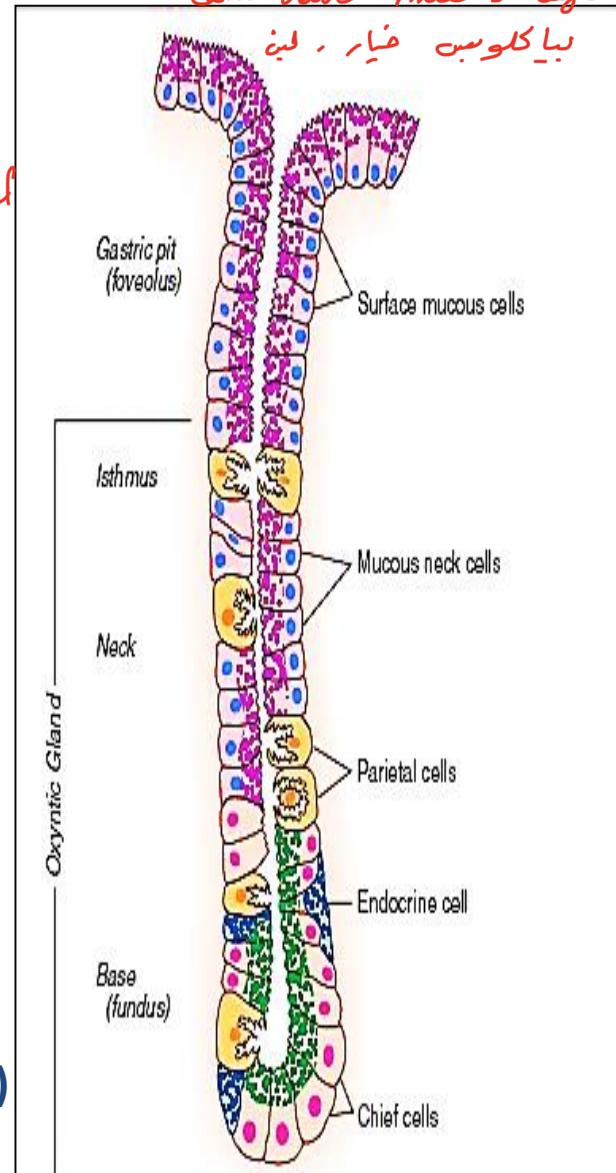
$\text{Cl}^- + \text{Na}^+ \rightarrow \text{NaCl}$

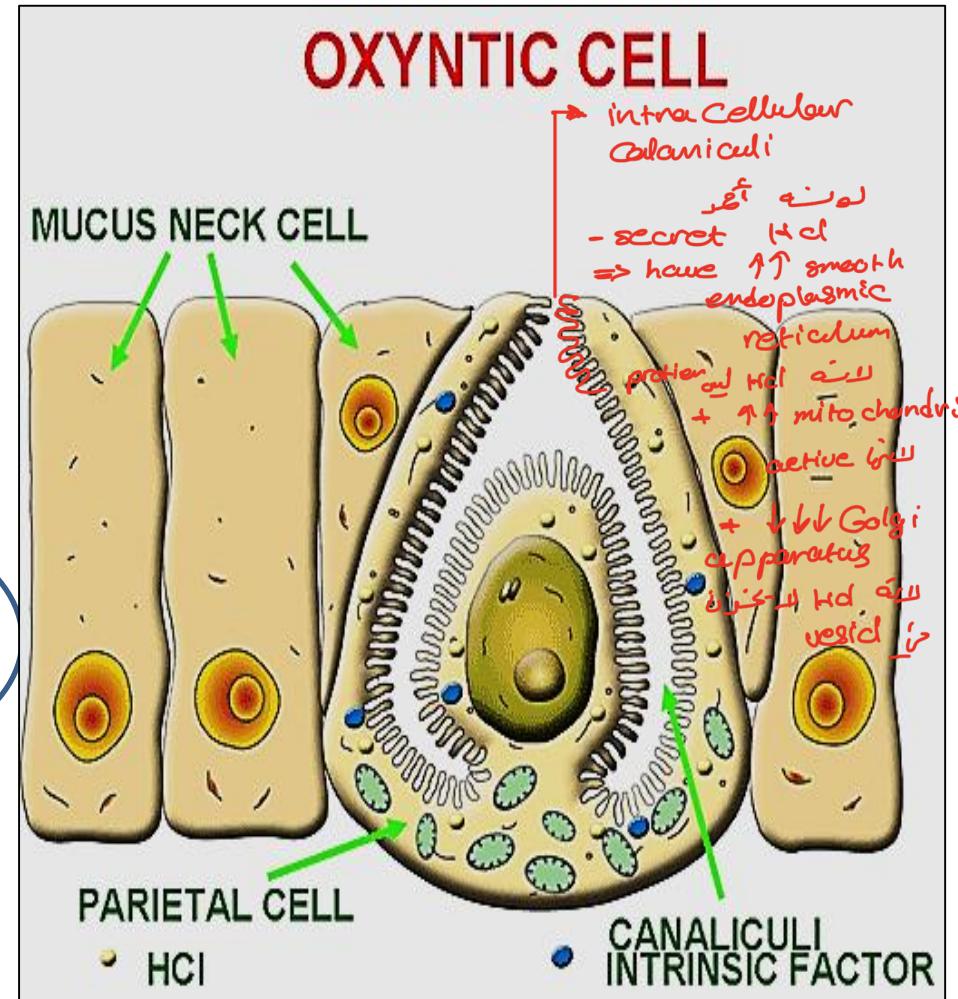
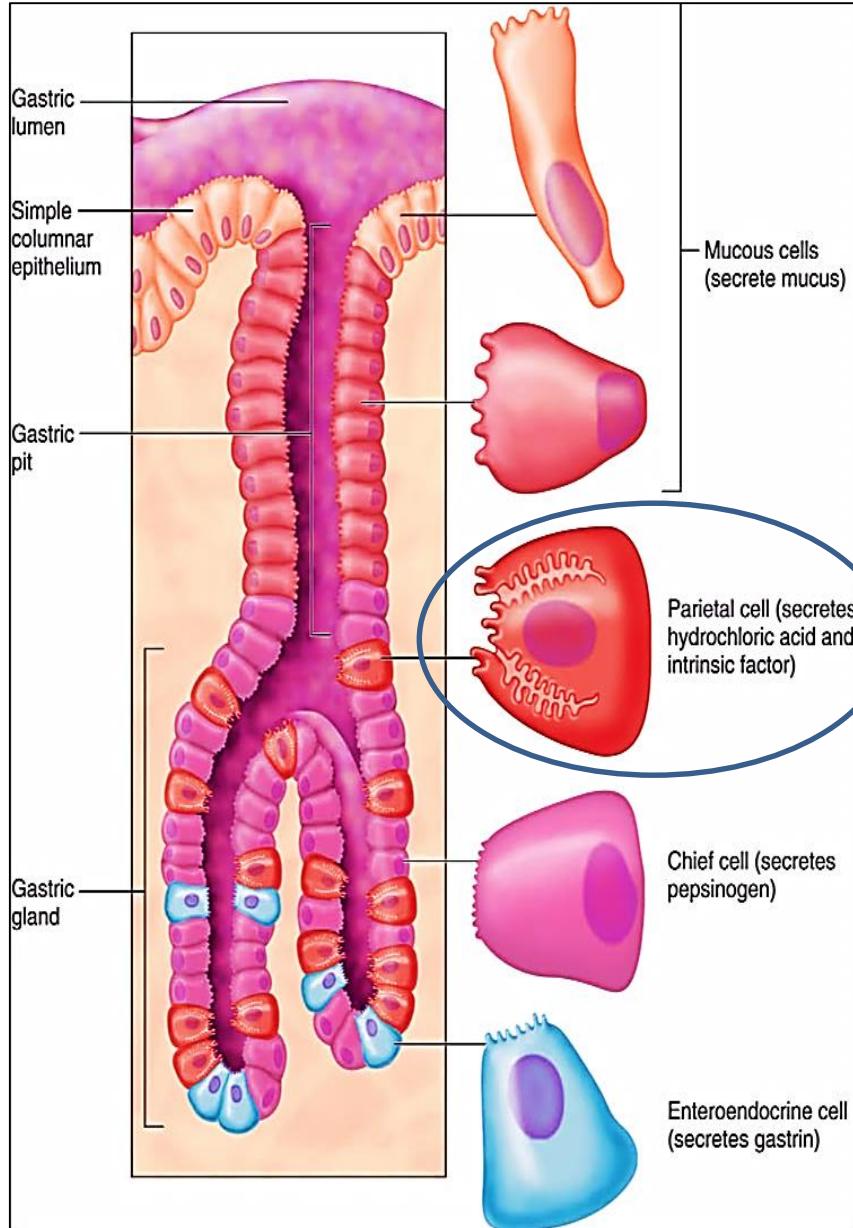
3- stem cells: present in neck region, low columnar. They differentiate to other gastric cells

patient with
ulcer / H-pylori
don't have mucus layer
is - so easily

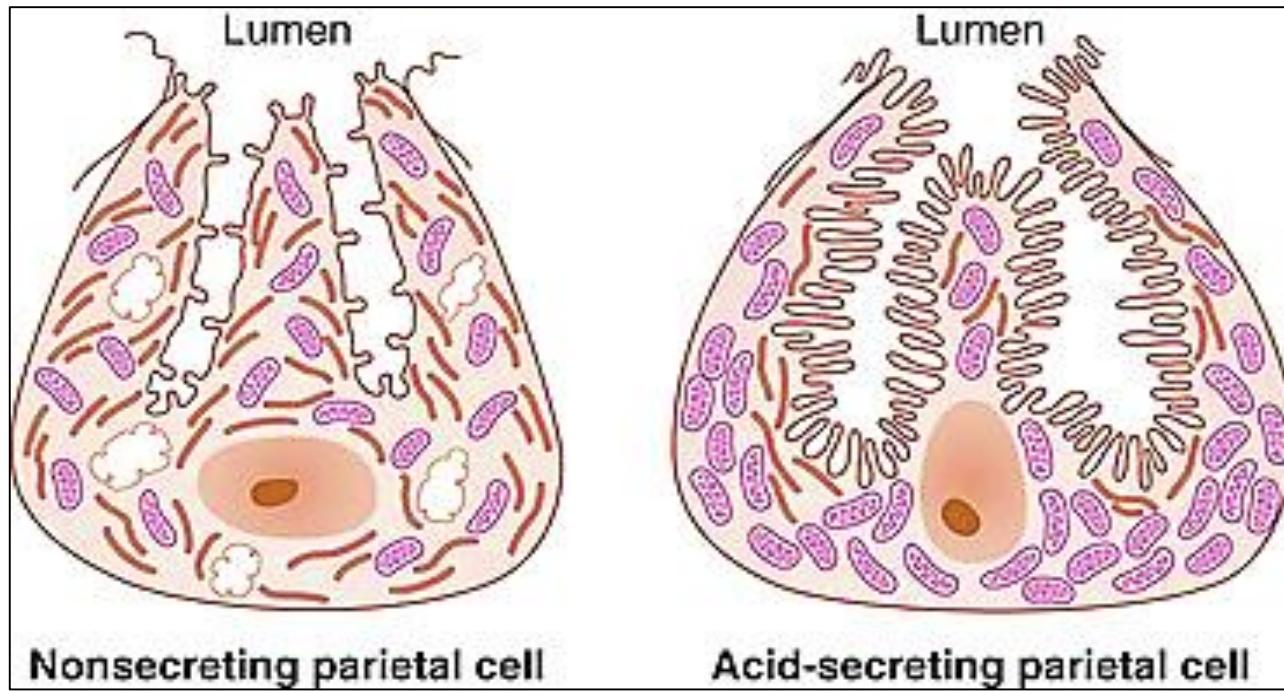
4- Parietal (oxyntic) cells : in isthmus + neck
*secret HCl

- **triangular in shape e acidophilic cytoplasm & rounded central nucleus.**
present mainly in the upper half of the glands. Few at the base of glands
- **E/M :** their apical surfaces show branching Intracellular canaliculi that open at the apex.
- ↑ mitochondria, ↑SER, **NO sec. granules**
- **They secret HCl & intrinsic factor(glycoprotein)** needed for vit. B12 absorption





Oxyntic cell secretes HCl & intrinsic factor showing tubulovesicular system



Showing tubulovesicular system in active vs resting parietal cell

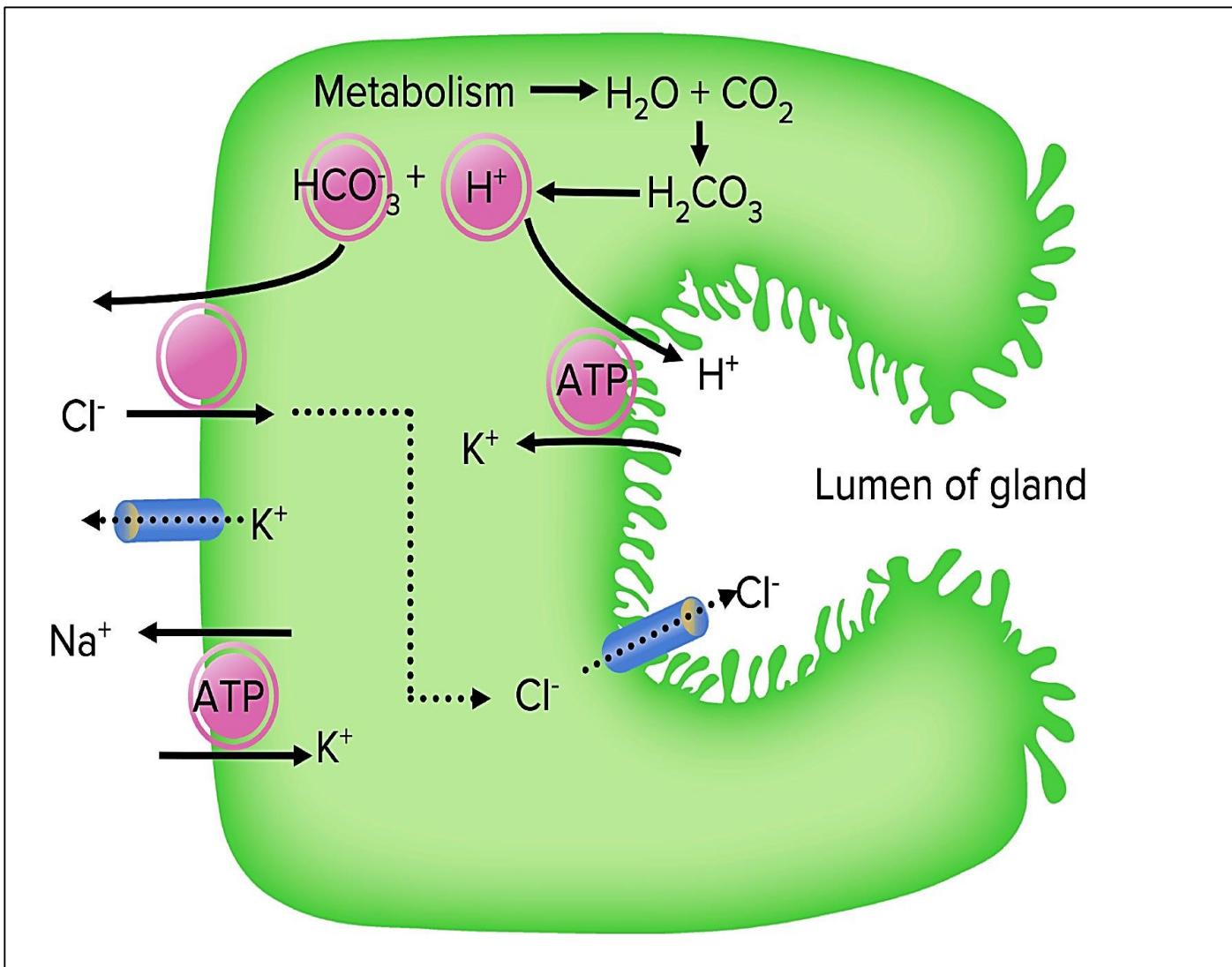
• تراكيبها نفسه تركيبة لا يزيد مساحتها لاحقاً ← cell membrane of parietal cell
 helps secretion ← cell membrane ينبع من → $H^+ \leftarrow HCl$ ← عيادة تفرز ←
 by proton pump ← معاكس ينبع ←

The system refers to a network of membrane bounded vesicles

remodel adjusting the need for acid production

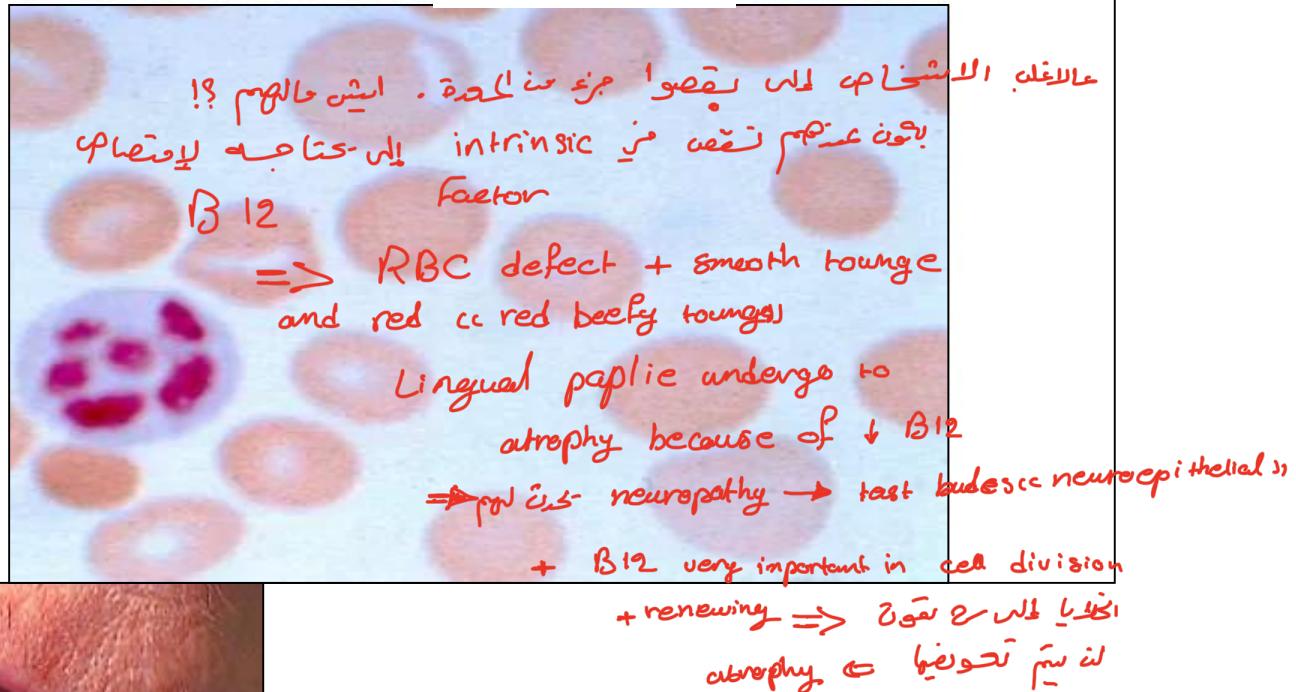
It plays role in proton pumps. It increase the surface area for proton pump when acid secretion is needed

Formation of HCl



Pernicious Anemia

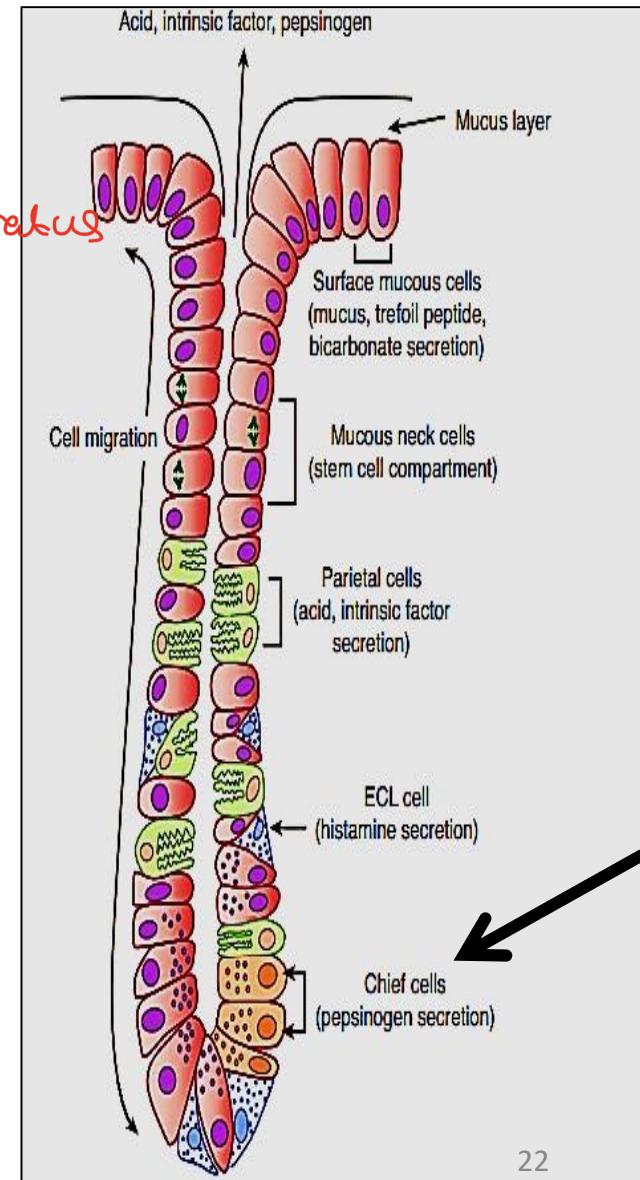
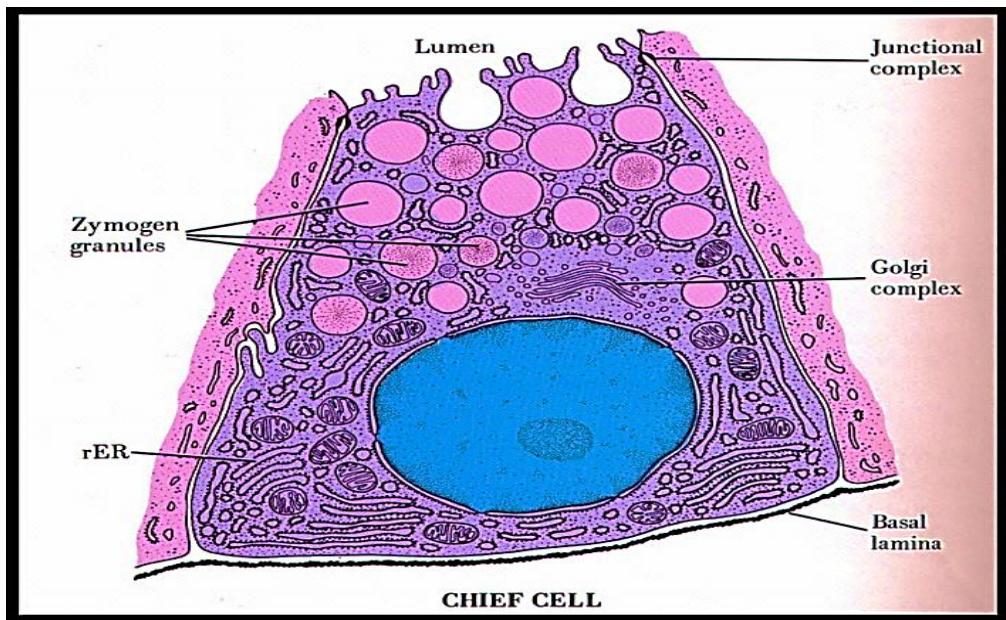
- Pernicious anemia is caused by a lack of intrinsic factor
- Intrinsic factor is a protein made in the stomach. It helps your body absorb vitamin B12, necessary for normal RBC production; RBCs are larger



One of the signs of pernicious anemia is red tongue with smooth surface (Beefy tongue)

5-Peptic (Chief, Zymogenic) cells: mainly at the base of gastric glands.
columnar cells e basal rounded nuclei.

- The basal cytoplasm is basophilic due to ↑rER, while the apical part contains ↑↑ zymogen granules + ↑↑ golgi apparatus
- E/M : protein secreting cells
- These cells secrete pepsinogen & G. lipase



6- Entero-endocrine cells :

- present in the base of the glands.
- Hormone secreting cells
- (diffuse neuroendocrine system)
النفخة السكرية تأتي من قاع الغدة وليس من الأعلى
epicardial و هي تفرز هرمونات
- Their secretions accumulates in the basal part to be released to the B.V.

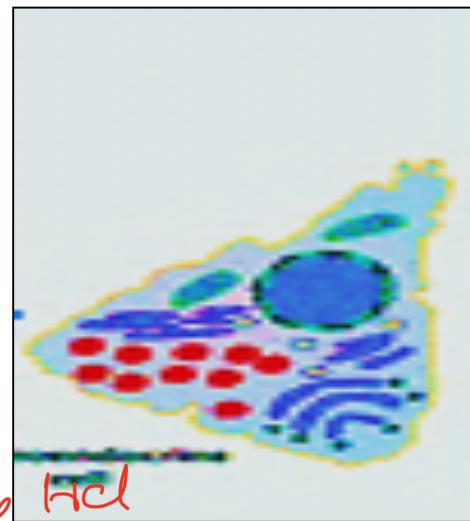
- They secrete:

✓ Gastrin

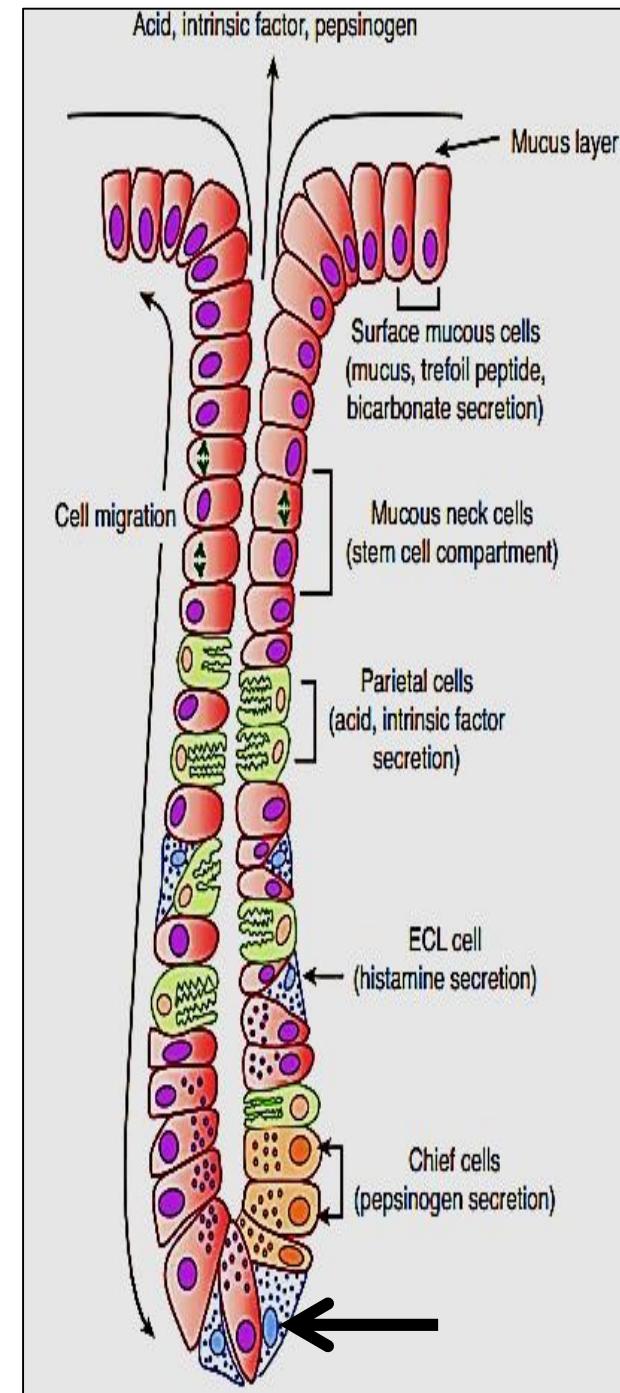
✓ Enteroglucagon

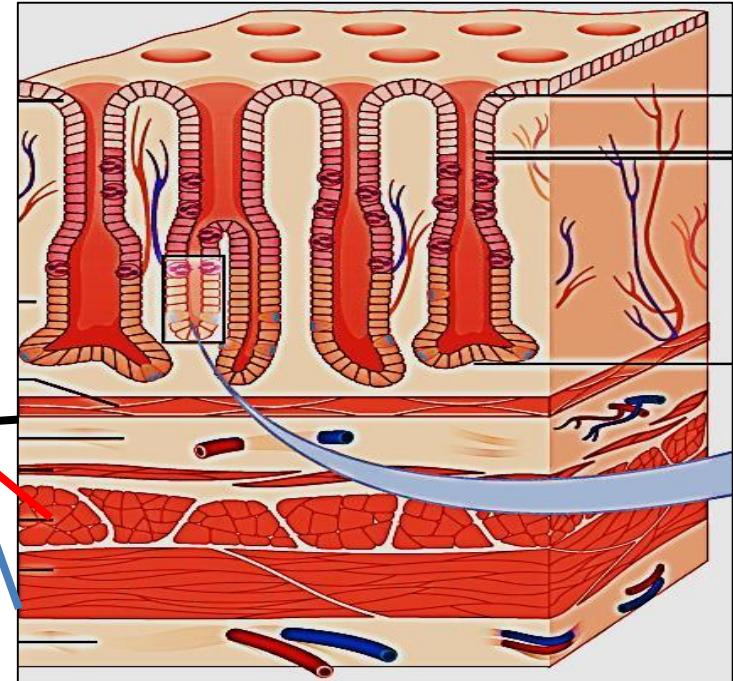
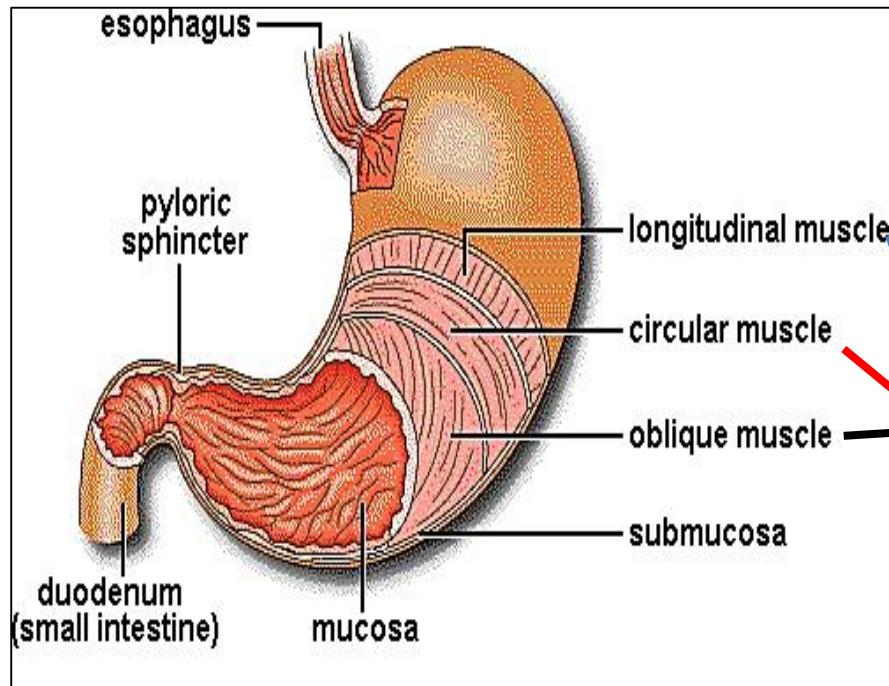
✓ Serotonin

✓ Somatostatin(D cells) ↓ HCl



Prof Dr H Elmazar





2- The submucosa: loose C.T. with B.V., lymphatics, meissner's plexus of nerves

3- The musculosa: formed of 3 layers of smooth ms.

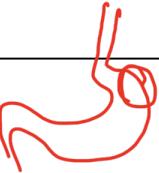
Inner oblique - middle circular - outer longitudinal.

Auerbach's plexus is present between middle & outer layers

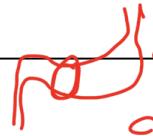
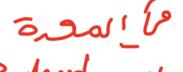
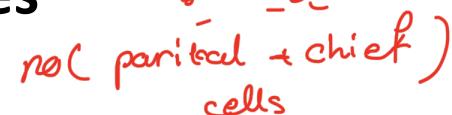
4- The Serosa: is the peritoneal covering, is formed simple squamous mesothelium & loose C.T. It contains B.V., lymphatics, & nerves

The difference between fundus & pylorus

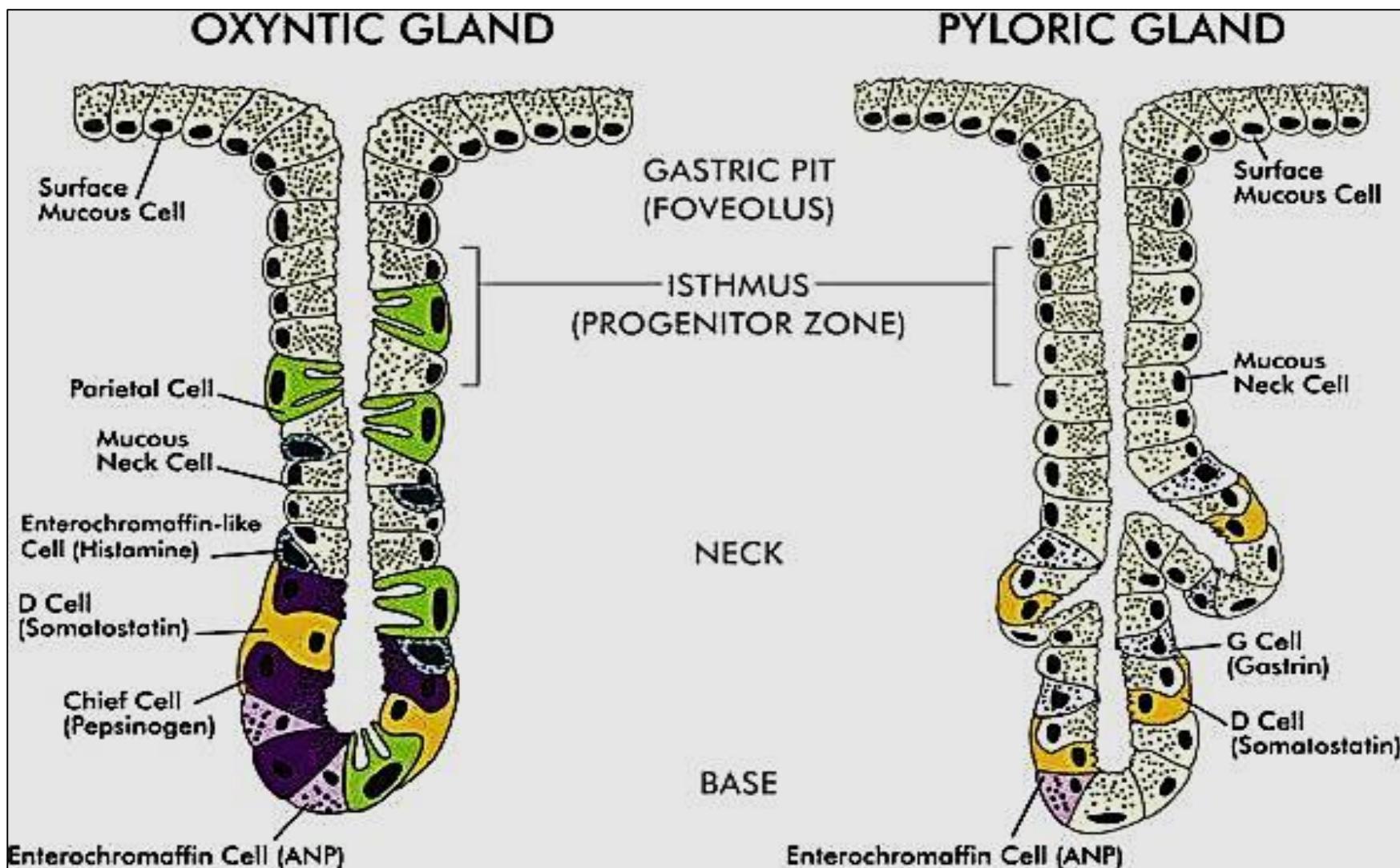
Fundus

- Thick mucosa 
جدران ط�اً طويلاً لازم تحيط
الجذور 
- Pits are narrow & short
- F. Glands are simple branched tubular & long
- occupy most of mucosal thickness
- Lined e 6 types of cells
- Corium: lymphocytic infiltration
- Musculosa: thinner formed of 3 layers of ms. (IO, MC, OL)

Pylorus

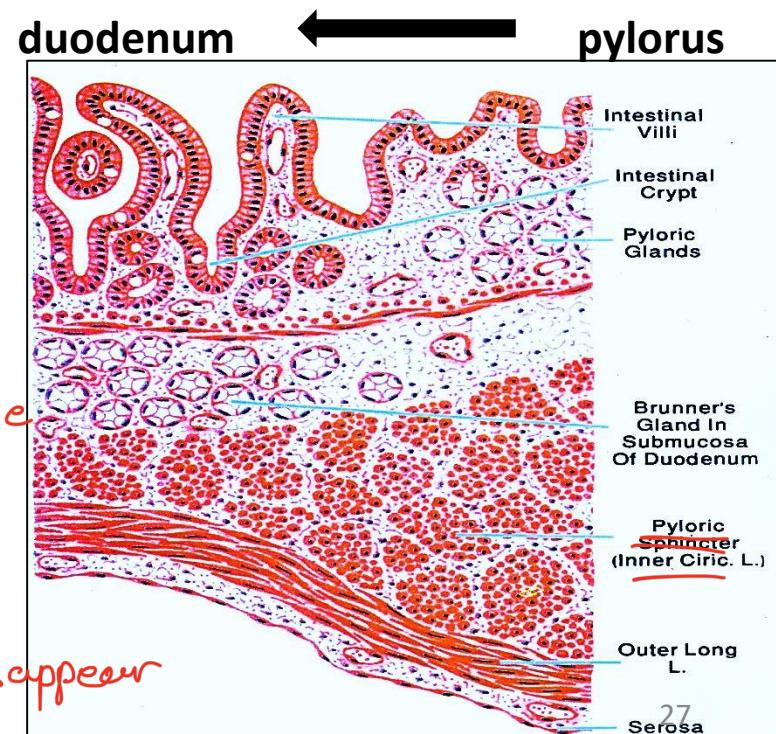
- Thin mucosa 
جدران سميكة على امتدادها
والأمعاء فاعدها
barrier 
- Pits are wide & long
- P. Glands are **coiled** branched tubular & short
 \Rightarrow gland 
- Occupy $\frac{1}{2}$ of mucosal thickness
- Lined e mucous secreting cells
No oxyntic, No peptic cells
- Lymphocytic infiltration & lymph nodules 
no (parietal + chief) cells 
- Thicker , formed of 2 layers of muscles. Thick IC to form the p. sphincter & OL

Difference between fundic & pyloric glands



Changes at gastro duodenal junction

- intestinal villi start to project from mucosa
- **Intestinal crypts** replace pyloric glands in the corium of duodenum
- **Surface columnar cells** with **brush border**. **Goblet cells** appear between cells
- **Muscularis mucosa**: pass unchanged
- Brunner's glands appear in duodenal submucosa ↳ alkaline mucus ⇒ neutralization acidic chyme
- Musculosa is **thinner** in the duodenum ↳ duodenal is thick; pyloric sphincter is a thin layer + apical layer disappear
- **Serosa** pass unchanged





Duodenum

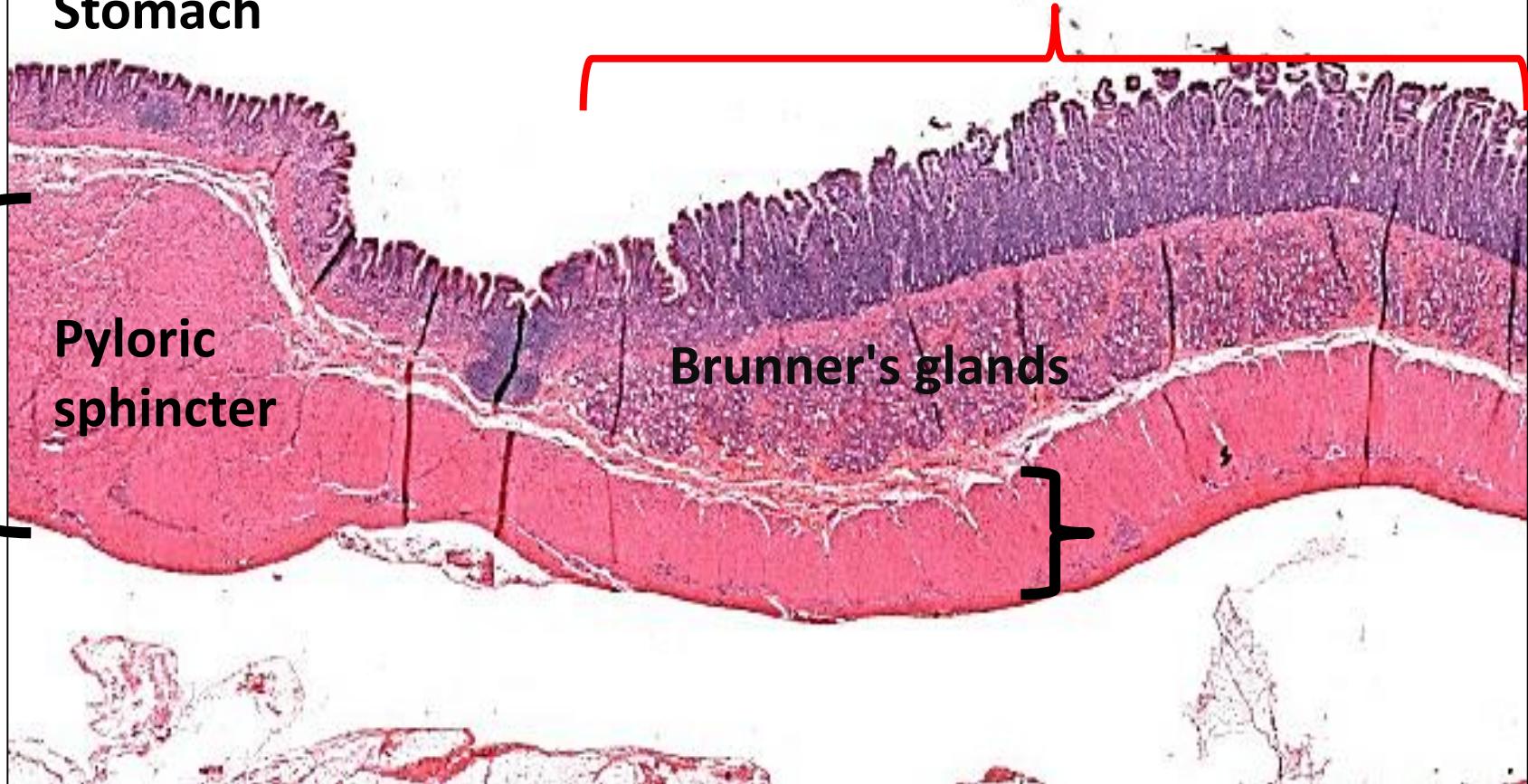
Stomach

{

Pyloric
sphincter

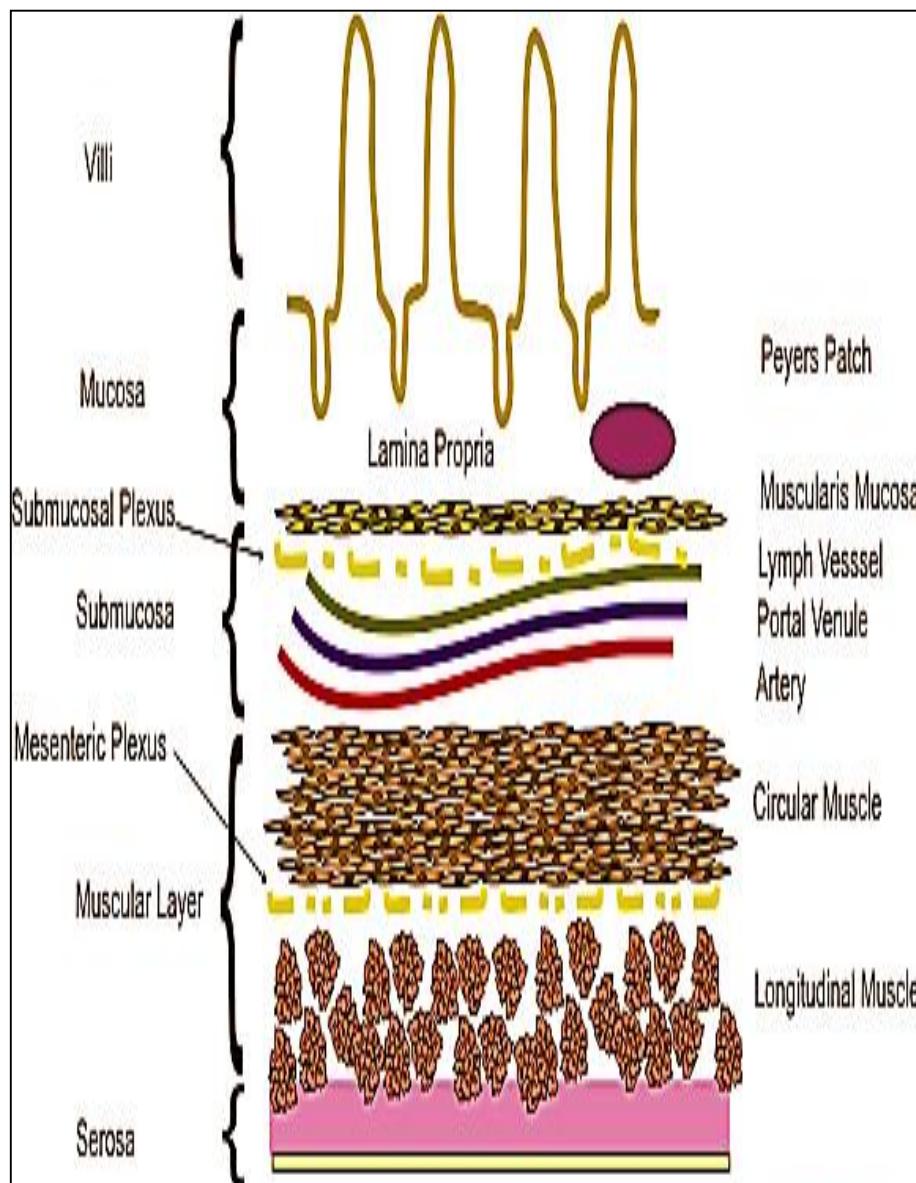
Brunner's glands

}

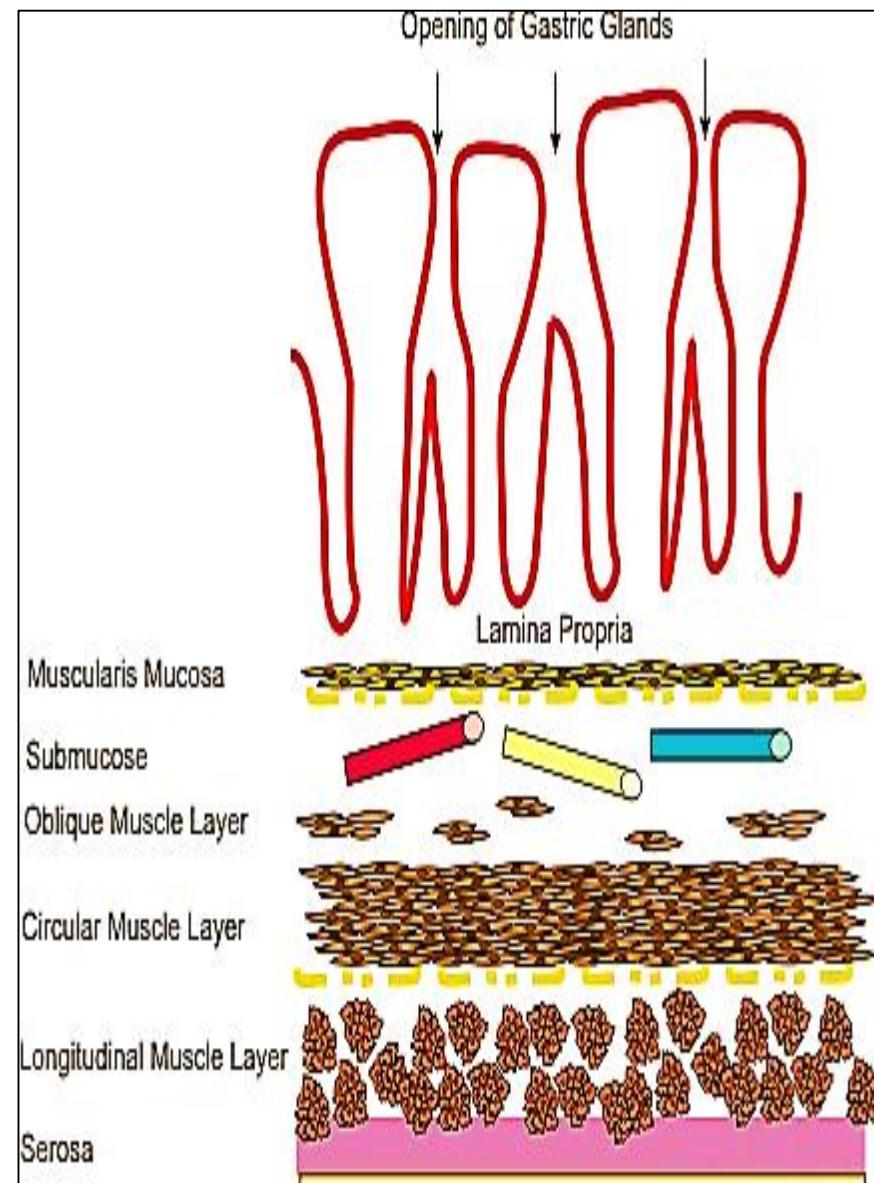


Gastro duodenal junction

Wall of intestine



Wall of stomach



Thank you

