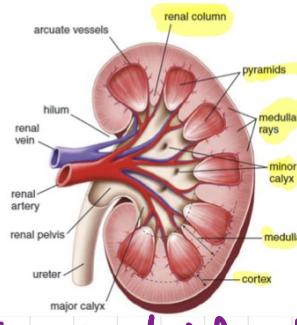


★ Histology of Urinary System.

- **Kidney**
 - stroma: capsule, trabeculae, reticular stroma.
 - parenchyma: uriniferous tubules.
 - General structure
 - cortex: forms columns between pyramids.
 - medulla: pyramids → papilla.
 - Lobe: medullary pyramid + cortical columns.
 - Lobule: central medullary ray + surrounding cortical tissue. (collecting duct & nephrons)



- **Uriniferous tubule**: functional unit, convoluted, densely packed, nephron + collecting duct, 1.3 million nephron in each kidney, a lot nephrons → 1 CD.

- **Nephron**: consist of: Renal Corpuscle, PCT, Loop of Henle, DCT.

- Types
 - Cortical: numerous, superficial cortex, short Henle.
 - Juxtaglomerular: near the junction of cortex & medulla, long Henle.
- ↓ number of nephrons slightly in older adults, accelerated by ↑ BP.
- Transplant: hypertrophy in proximal parts → ↑ filtration → Normal Renal function.

- **Renal Corpuscle**: oval to round, in cortex, filtration barrier function.

- **Bowman's capsule**: was a hollow epithelial sphere (blind end of nephron).

- 2 poles
 - Urinary pole: continuous with PCT.
 - Vascular pole: afferent & efferent arterioles.
- 2 layers
 - outer (parietal) (capsular epi): simple squamous epi.
 - inner (visceral) (glomerular epi): modified epithelium (podocyte).
 - urinary space: between 2 layers, receives the filtered fluid.

- **podocyte**: modified flat cells (stellate), primary cytoplasmic (major) & secondary (pedicled) which envelop glomerular capillaries & terminate around BM of glomerular capillaries.
- Between minor process → filtration slit closed by slit diaphragm.
- Filtration & Renewal of glomerular capillaries BM.

- **Glomerulus**: so tortuous capillary loop, thick BM, fenestrated endothelial Afferent & Efferent A.

- **Mesangial Cells**

- Location
 - intraglomerular: within stalk of capillary tuft.
 - extraglomerular: vascular pole.

- Function: structural support to BM & capillaries, immune defense & repair in glomerulus, maintain an optimal filtration rate by adjusting contraction in response to BP changes.

- **Blood Renal Barrier (filtration barrier)**: blood in glomerular/capsular space of Bowman's capsule.

- pores of capillary epi: prevent RBC pass.

- Continuous BM: basal lamina of capillaries + basal lamina of podocyte.

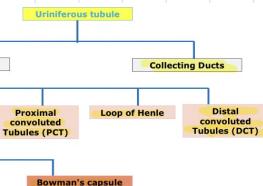
- Lamina rara externa: adjacent to epi.
- Lamina rara interna: adjacent to endothelium
- Intermediate zone: electron dense.
- electron lucent area.

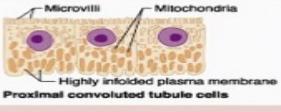
- Filtration slit & their diaphragms: composed of nephrins & glycoprotein & proteoglycans, restrict passage of larger than 70 kDa (kilodalton), small protein degenerated → AA → reabsorbed.

- **Function**
 - filtered blood plasma

- Allow water & ions to enter capsular space

- prevent large proteins from entering the capsular space.



Region of Tubule	Histological Features	Locations Major	
PCT	Simple cuboidal epithelium; cells well-stained, with numerous mitochondria, prominent basal folds and long microvilli, lumens often occluded	Cortex	
Loop of Henle Thick limbs	Simple cuboidal epithelium; no microvilli, but many mitochondria	Medullary rays and Medulla	
Loop of Henle Thin limbs	Simple squamous epithelium; few mitochondria	Medulla	
DCT	Simple cuboidal epithelium; cells smaller than in PCT, short microvilli and basolateral folds, more empty lumens (wide)	Cortex	
Collecting system Principal cells	Cuboidal to columnar pale-staining, distinct cell membranes	Medullary rays and medulla	
Intercalated cells	Few and scattered; slightly darker staining		

- **Loop of henle:** Between PCT & DCT, V-shaped

↳ The nuclei of the cells lining the thin Limbs bulge into the Lumen of the tubule → capillaries in cs.

- **Collecting ducts:** Between DCT & minor calyx.

→ connecting tubules: extends from each nephron & several join together → collecting duct.
 → cortical collecting ducts: simple cuboidal, passes through cortical medullary rays.
 → Medullary collecting ducts: columnar cells, larger & straighter, parallel with Limbs & vasa recta.
 → papillary duct (Bellini): medullary merge → at the apex of pyramid.

- 2 cells
 - principle (Light): cuboidal → columnar distally, central round nuclei, basal infolding, short microvilli, reabsorb Na^+ & secrete K^+ , respond to Aldosterone & ADH.
 - intercalated (Dark): T organelles, well developed microvilli, No basal infoldings, Acid-Basic H^+ (A or a), HCO_3^- (B or B).

- **Juxta-glomerular complex:** regulation of systemic BP, Between Affrent/DCT

→ Macula densa: lining DCT close to vascular pole, columnar, prominent deeply stained nuclei, Na^+ .
 → Juxta-glomerular: Renin, Modified SM of Affrent, myoepithium with rounded nuclei & granular cytoplasm, mature & immature membrane-bound granules of Renin.
 → Extraglomerular mesangial (Lacis): pale nuclei, in triangular region Affrent/Effrent/macula densa apex is formed by glomerular mesangial cells of vascular pole.

- function: Erythropoietin, Renin, regulates GFR.

- **Urine formation:** filtration, Reabsorption, secretion

↳ 3 Layers: Thin BM, intermediate cuboidal, superficial umbrella cells (uroplakins protein → plaques that work as osmotic barrier → protect against hypertonic urine & dilution of stored urine).

- **Ureter:** Small muscular tube, pelvis → bladder

→ Mucosa: Transition L epi, loose CT (lamina propria).
 → Muscularis: inner longitudinal & outer circular.
 → Adventitia: CT, nerve, & BV.

- **Male urethra:**

→ prosthetic: transitional
 → Membranous: stratified/pseudo-columnar
 → spongy: membranous + stratified spongyous.

- **Urinary bladder**

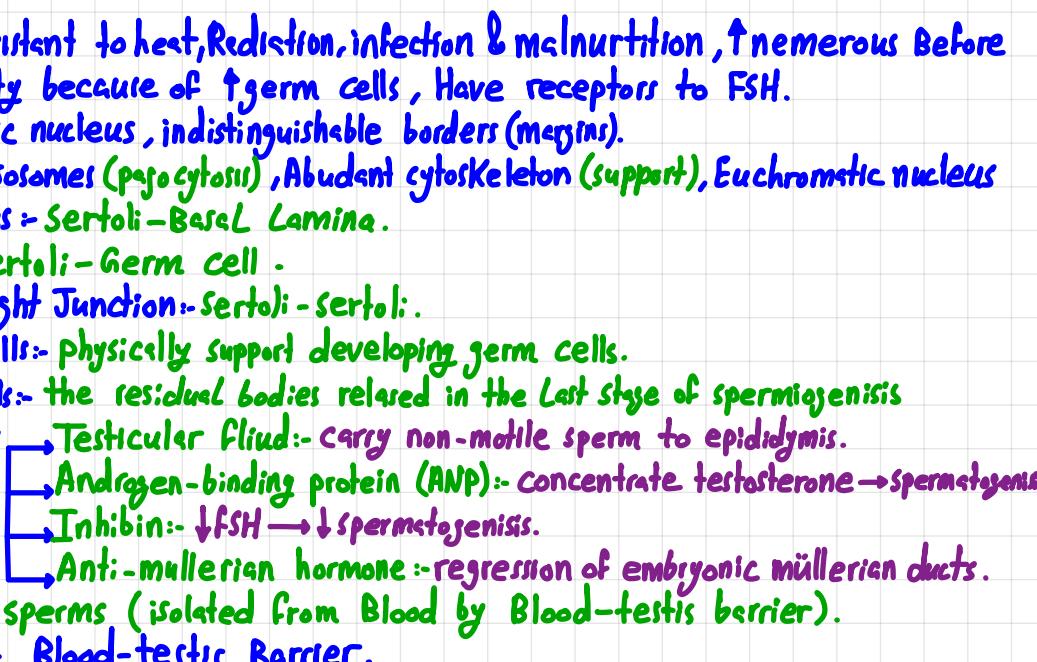
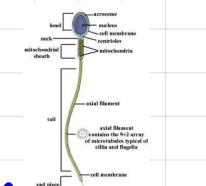
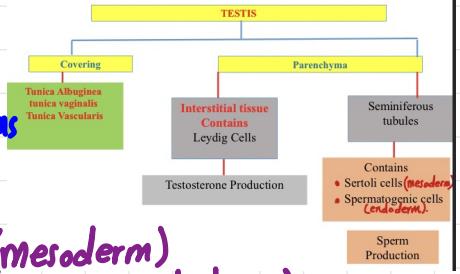
→ Mucosa: Transitional epi & Lamina propria.
 → Muscularis: inner & outer longitudinal + middle circular (detrusor)
 → Adventitia: CT, covered superiorly by serosa.
 → empty: folded mucosa, U has umbrella.
 → full: mucosa is pulled smooth, U is thin, flat umbrella.

- **Female urethra:** Transitional

→ stratified squamous before end LP → vascularized CT.

★Topic 2:- Male Reproductive system

- **Testis interstitial tissue**: Loose CT between seminiferous tubules, contains the interstitial cells of Leydig → Testosterone.
- **Seminiferous tubules**: Seminiferous epi rests on BM
 - Sertoli cells (mesoderm)
 - spermatogenic cells (endoderm)
 - myoid cells → peristalsis waves → movement of spermatozoa & testicular fluid.
- **Spermatogenic cells**: Male germ cells that replicate & migrate from BL → Lumen (endodermal)
 - ↳ Spermatogonia: initial germ cells, Rest on BL & +with sertoli, small rounded, $2n = 46$
 - ↳ Type A dark & pale: Dark type remains as a reserve & pale → B type.
 - ↳ Type B: Larger & lightly stained, +FSH $\xrightarrow{\text{mitotic}}$ primary spermatocytes
 - ↳ primary spermatocyte: Largest, 46 $\xrightarrow{\text{1st meiotic}}$, secondary spermatocyte.
 - ↳ secondary spermatocyte: 23, small, $\xrightarrow{\text{2nd meiotic}}$ 2 spermatids.
 - ↳ spermatids: small, 23, → mature sperm.
- **Spermatozae**: Lumina of seminiferous tubules
 - Head: nucleolus covered with acrosomal cap (lysosomes → penetration of ovum).
 - Neck: centrioles & connecting piece, 9 fibrous rings surrounding the Axoneme.
 - Middle piece: plasma membrane → mitochondrial sheath → fibrous sheath → Axoneme (9+2)
 - Tail
 - principle: plasma membrane → fibrous sheath → Axoneme (9+2)
 - End: plasma membrane → Axoneme (9+2).
- **Sertoli cells**: mesodermal, Resistant to heat, Radiation, infection & malnutrition, ↑ numerous Before puberty → ↓ After puberty because of ↑ germ cells, Have receptors to FSH.
 - LM: columnar epi, euchromatic nucleus, indistinguishable borders (margins).
 - EM: SER & RER (nutrition), Lysosomes (phagocytosis), Abundant cytoskeleton (support), Euchromatic nucleus
 - Borders
 - Hemidesmosomes: Sertoli-Basal Lamina.
 - Desmosome: Sertoli-Germ cell.
 - Gap Junction / Tight Junction: Sertoli-Sertoli.
 - Functions
 - Supporting cells: physically support developing germ cells.
 - phagocytic cells: the residual bodies released in the last stage of spermatogenesis
 - Secretory cells
 - Testicular fluid: carry non-motile sperm to epididymis.
 - Androgen-binding protein (ABP): concentrate testosterone → spermatogenesis
 - Inhibin: ↓ FSH → ↓ spermatogenesis.
 - Anti-mullerian hormone: regression of embryonic Müllerian ducts.
 - Nutrition: to sperms (isolated from Blood by Blood-testis barrier).
 - Formation of Blood-testis Barrier.
- **Blood-testis barrier**: Barrier that controls the passage of tissue fluids, from outside to inside the seminiferous tubule.
 - Basal Compartment: BL → tight Junction (Containing spermatogonia).
 - Adluminal Compartment: tight Junction → Lumen (primary, 2nd, spermatids).
 - Functions
 - passage of useful material for spermatogenesis (Test., vits, electrolytes).
 - prevent entrance of damaging substances (Ag, Ab, toxins).
 - prevent passage sperm → Blood → Autoimmune disease.



- **interstitial cells of Leydig**: found in groups between seminiferous tubules in interstitial CT, 3%, ↓ with age, Mesodermal, acidophilic cytoplasm, ↑ lipid droplets & lipochrome pigment.
EM: SRE (Hormone), developed Golgi apparatus (storage), Mitochondria (power).
function: Secretes testosterone under the effect of L.H of pituitary gland.

• The Epididymis

- Mucosa: pseudostratified columnar (round basal & columnar), Stereocilia (long branched microvilli).
- Musculosa: circular smooth muscle.
- Adventitia: Connective tissue layer.
- Functions
 - Site for storage & maturation of sperms.
 - Reabsorption of testicular fluid.
 - Phagocytosis & digestion of degenerative spermatozoa.

• Vas deferens

- Mucosa: pseudostratified columnar + stereocilia (↑ elastic fibers).
- Musculosa: well developed, thick circular between inner & outer longitudinal layers.
- Adventitia: connective tissue layer.

• Ejaculatory ducts: Ampulla of vas deferens + seminal vesicle → prostatic urethra.

- Mucosa: simple or pseudostatified columnar epi (secretory).
- No muscular coat: short distance, Between vas deferens & seminal vesicle & prostate.

• Seminal vesicle

- Mucosa: columnar or pseudostratified columnar epi, thin, branched, Anastomosing folds.
- Muscularis: inner circular & outer longitudinal layers of smooth muscle.
- Adventitia: thin fibroelastic connective tissue layer.
- Function: fluid (thick, yellow, alkaline, protein, Vit C) → nutrition & production of energy for sperm.

• prostate: 3o-5o tubulo-alveolar gland surrounding prostatic urethra.

- Stroma: capsule & trabeculae (fibromuscular CT & SM & Elastic).
- Parenchyma: glands
 - periurethral: smallest, around urethra.
 - Submucosal: around periurethral tissue.
 - Main prostatic: largest, outer, provide most prostatic secretions.
- Structure
 - glandular epi: differs.
 - acini & duct: simple columnar epi.
- Function: milky, alkaline secretion → smell (↑ acid phosphate).
- Clinical
 - Senile prostate: enlarged.
 - Carcinoma: outer glands, ↑ acid phosphate Dx.
 - Corpora amylacea: prostatic concretion (condensation of secretory) → calcified

★ Topic 3:- Female reproductive system

- **Uterus**:- pear-shaped structure attach to utrine tube (upper end) & Vagina (Lower end).
 - 3 regions:- fundus, Body, cervix (supra vaginal superiorly & vaginal inferiorly).
 - 3 Layers:- Mucosa (Endometrium), Muscular Layer (myometrium), external layer (perimetrium).

1 **Perimetrium** → Anterior portion of Body:- covered by adventitia (areolar CT).
Remaining portion:- serosa, simple squamous cell (mesothelium) resting on areolar CT.

2 **Myometrium**- thickest layer, SM + CT.

- stratum submucosa (inner) :- longitudinal & circular muscles.
- stratum vasculare (middle) :- longitudinal, circular, oblique & transversely, + vascularized (Arcuate Arteries)
- stratum subserosum (outer) :- longitudinal.
- During pregnancy
 - estrogen → Hyperplasia & hypertrophy & + collagen fibers.
 - corpus luteum → relaxin → ↓ activity of myometrium until parturition.
 - neurohypophysis (posterior pituitary) → oxytocin → strong contraction at labour.

3 **Endometrium** → Before puberty & menopause :- simple cuboidal, rudimentary tubular glands.
During reproductive years:- ciliated columnar, simple coiled tubular glands.
Layers → Functional:- sloughed off during menstruation, colloid helical arteries from Arcuate A
Basal:- regenerate functional layer, short straight arteries in stratum vasculare

- **Menstrual cycle**:- By estrogen & progestrone, 3 phases:- menstrual, proliferation, ovulation (lu), secretion.
 - proliferation (follicular) :- 5-14, theca cells of ovarian follicle → Estrogen, simple columnar, tubular glands (straight with narrow lumen + accumulate glycogen).
 - Secretory (Luteal) :- 15-28, corpus luteum → progestrone, highly coiled glands.
 - Menstrual :- no hormones → contract coiled A → No blood flow to functional layer → sloughed off
→ coiled A dilates again → rupture → blood removes patches of functional layer as menses.

- **Uterine cervix**
 - Mucosa
 - Endocervix (uterine part) :- columnar epi.
 - vaginal part :- stratified squamous non keratinized epi.
 - Transition (transformation zone) :- abrupt as a result of vaginal acidity, nabothian follicles or cysts (occlusion of mucosal glands ducts), + risk of cervical cancer.
 - The glands change secretory activity from thin alkaline fluid at mid cycle → + thick viscous after ovulation & formation of corpus luteum
 - Muscular :- inner circular & outer long muscle layer.

- **Uterine tube**
 - Mucosa :- many longitudinal folds prominent in ampulla, simple columnar (ciliated & non-ciliated)
 - peg cells :- non-ciliated, produce watery fluid which nourish spermatozoa, zygote.
 - muscularis :- inner circular & outer long → peristaltic movement with the beating of cilia help to propel oocyte to the uterus.

- **Vagina**
 - Mucosa :- stratified squamous non-keratinized, + glycogen → flora (lactic acid, dense CT, + vascularized)
 - secretion + elastic fibers (distention in parturition)
 - Muscular Layer :- circular & longitudinal SM.
 - Adventitia :- elastic fibers.