# Cellular adaptation (part 1): Disorders of CELL GROWTH

Dr. Ahmed Roshdi, PhD

Prof of Pathology, Sohag University

#### **OUTLINES**

# By the end of this lecture; students should be able to learn the following:

- Definition and factors affecting cell growth
- Types of cellular adaptation
- Define atrophy and provide examples and differentiate between atrophy, hypoplasia and involution
- Define hypertrophy and provide examples.
- Define hyperplasia and provide examples.

- Definition of growth: Growth is increase in size and/or weight of an organ or the whole body; resulting from
  - NUMBER of the cells
  - SIZE of the cells
  - BOTH NUMBER AND SIZE of the cells
- **Definition of differentiation:** 
  - Degree of STRUCTURAL and FUNCTIONAL maturity of the cells
- **Definition of adaptation:** 
  - > Adaptation refers to cellular changes in response to different environment conditions to adapt function.
  - > These changes may be PHYSIOLOGICAL (normal) PATHOLOGICAL (abnormal).

- Factors affecting growth and differentiation:
  - 1. Age: children have rapid rate of growth
  - 2. Type of tissue:
    - Thymus grows rapidly during childhood then stops growing or even regresses in adults.
    - Sex organs grow rapidly after puberty.

#### 3. Type of cells:

- Labile.....???
- Stable.....???
- Permanent.....???

- Factors affecting growth and differentiation:
  - 4. Genetic factors: Tall and short individuals
  - 5. Nutritional state of the body.
  - 6. Hormones:
    - growth hormone Giagantism
    - growth hormone → Critenism

7. Presence or absence of a chronic disease:

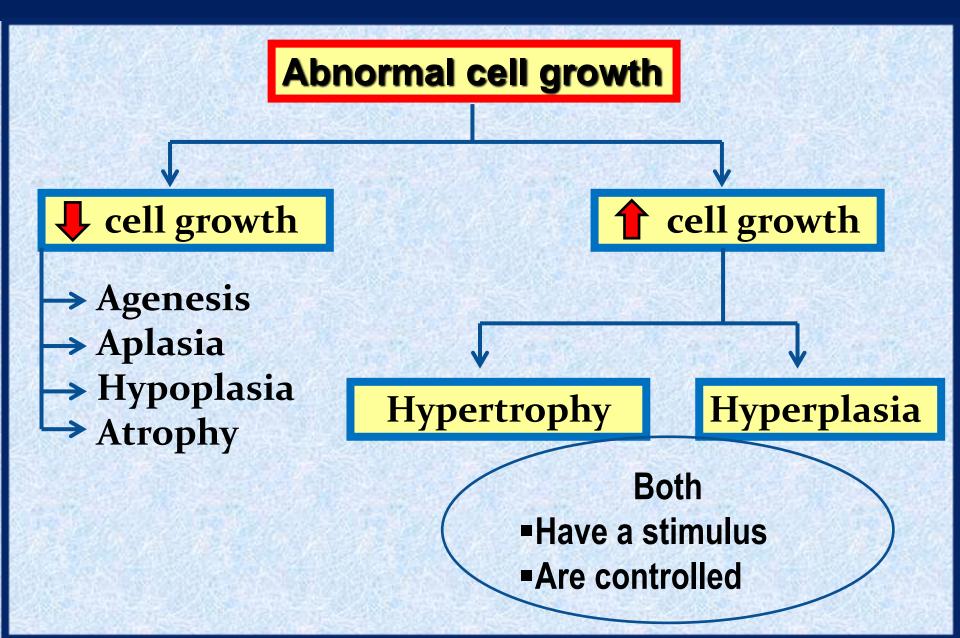
#### Features of normal growth:

- Coordinated growth
- Regular rate of growth
- Limited rate of growth

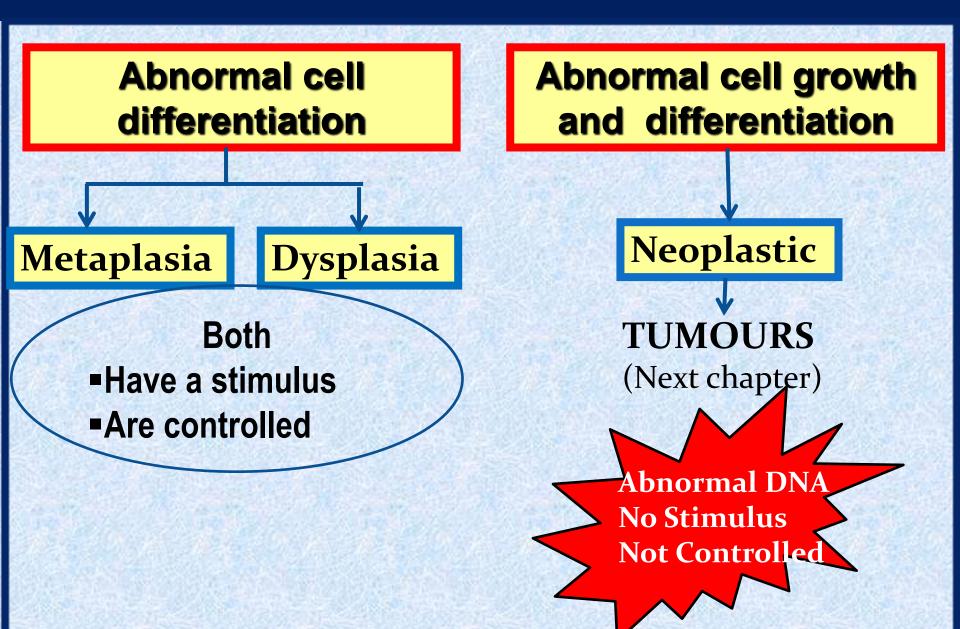
#### Reparative growth:

- Definition: Physiological replacement of damaged cells with new healthy cells.
- Features:
  - > It has a stimulus
  - It has a purpose
  - It is limited

#### CLASSIFICATION



#### CLASSIFICATION



# Abnormal cell GROWTH

#### Agenesis:

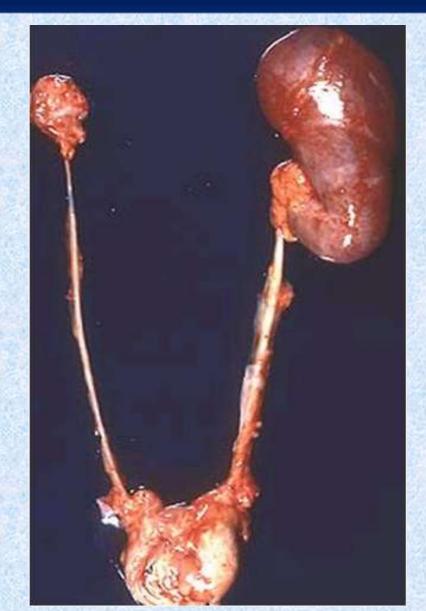
Completely absent organ: e.g. absent kidney

#### Aplasia:

Complete failure of development of an organ: e.g. Aplastic kidney

#### Hypoplasia:

 Failure of development of an organ to a full mature size: e.g. hypoplastic kidney, hypoplastic testis

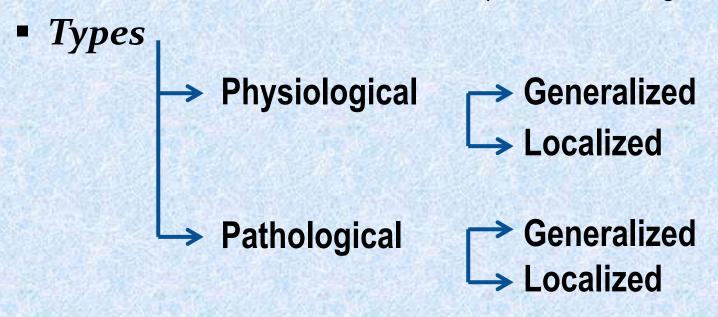


Hypoplastic kidney

### **ATROPHY**

- Atrophy:
  - Definition:

Acquired  $\displaystyle{\displaystyle}{\dashboxdynton}}}}}}}}}}}}}}}}}}}}}}}}}}$ 



#### • Atrophy:

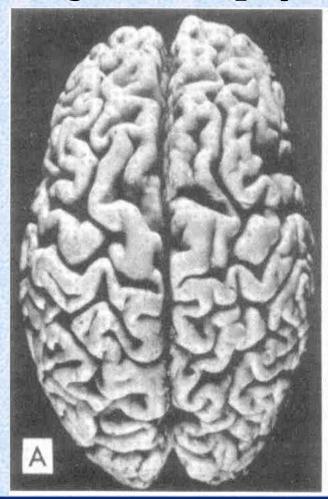
Physiological atrophy: Also called INVOLUTION

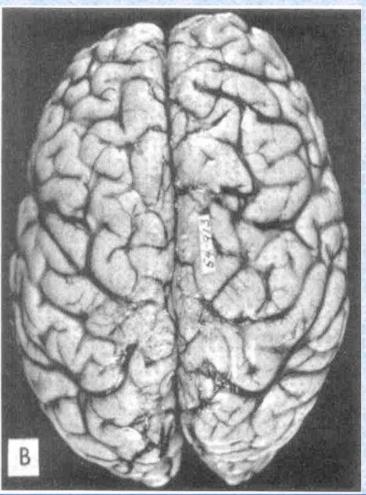
- Generalized: Usize and weight of the whole body; e.g. senile atrophy in old age
- Localized: size and weight of a certain organ; e.g.
  - In children: Remnants of tyhyroglossal duct, ductus arteriosus and umbilical vessels
  - In adults:
    - >Atrophy of thymus after the age of puberty.
    - >Atrophy of breast and ovaries after menopause.

#### • Atrophy:

- Generalized:
  - Definition: size and weight of the whole body due to a disease process.
  - Examples:
    - 1. Starvation atrophy: in chronic malnutrition
    - 2. Chronic debilitating disease (due to 1 rate of catabolism): e.g. tuberculosis, diabetes, thyrotoxicosis.
    - 3. Malignant cachexia: in malignant tumors.

• Atrophy:





#### • Atrophy:

- Localized:

  - Types:
    - 1. Ischemic atrophy
    - 2. Pressure atrophy
    - 3. Disuse atrophy
    - 4. Neuropathic atrophy
    - 5. Hormonal atrophy
    - 6. Idiopathic atrophy

#### • Atrophy:

- Localized:
  - 1.Ischemic atrophy:
    - Pathogenesis: blood supply and hypoxia gradual apoptosis of the ischemic cells
    - Examples:

      - Atherosclerosis of renal artery ischemic atrophy of kidney and fibrosis.

#### • Atrophy:

- Localized:
  - 2. Pressure atrophy:
    - Pathogenesis: Pressure on organ tissue ↓ blood supply and hypoxia → gradual organ ischemia
    - Examples:
      - Aortic aneurysm --- atrophy of sternum and vertebrae but not the inter-vertebral discs (they are avascular).
  - 3. Disuse atrophy:
    - Pathogenesis: Prolonged unused organ atrophy of its cells
    - Examples:
      - Prolonged limb immobilization 

         Atrophy of the affected muscles, ligaments and even bone.

#### • Atrophy:

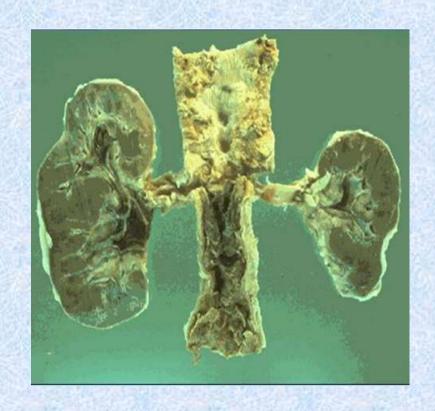
#### Pathological atrophy:

- Localized:
  - 4. Neuropathic atrophy:
    - Pathogenesis: Prolonged unused organ atrophy of its cells.

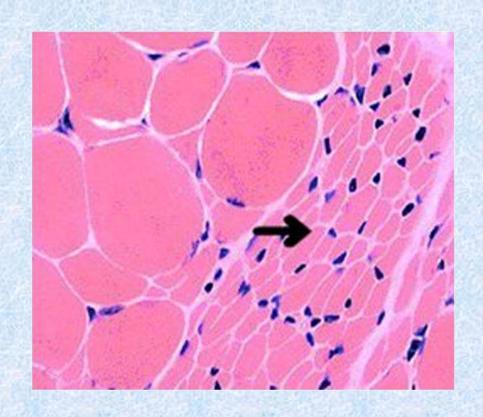
#### 5. Endocrine atrophy:

- Pathogenesis: depletion of a hormone 
   atrophy of this hormone dependent organ.
- <u>Example</u>: removal of ovaries ———— atrophy of breast and uterus.

#### • Atrophy:



Atrophic kidney



Muscle atrophy

## **HYPERPLASIA**

#### • Hyperplasia:

 Definition: Increased size of an organ or tissue due to increase in the NUMBER of its cell constituent.

#### Features:

- > Occurs as a result of a specific stimulus.
- > It continues as the stimulus persists
- > Stops when the stimulus is removed.
- > Reversible cell proliferation
- > Has a useful purpose
- > Hyperplasia may be focal or diffuse

- Hyperplasia:
  - Examples:
  - A. Physiological: e.g.
    - Increased size of the breast after puberty, during pregnancy and lactation due to excess estrogen and progesterone
    - Increased in size of the gonads (ovary and testis) after puberty due to hormonal change.

#### • Hyperplasia:

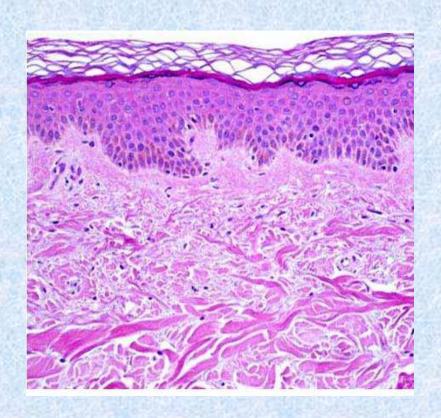
- B. Pathological: e.g.
  - 1. Compensatory hyperplasia: e.g.
    - Hyperplasia of bone marrow after hemorrhage or excessive haemolysis.
    - Hyperplasia of one kidney after surgical removal of other kidney.

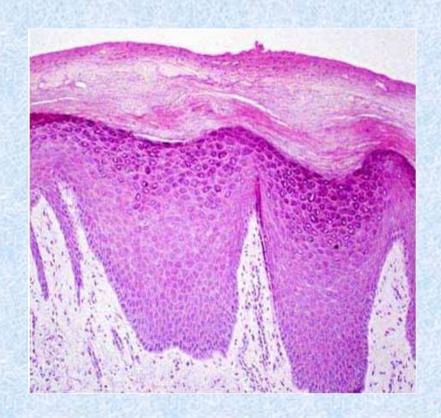
#### 2. Hormonal hyperplasia: e.g.

- > Endometrial and breast hyperplasia as a result of exposure to excess estrogenic stimulation.
- > Prostate hyperplasia in response to excess androgen
- Thyroid epithelial hyperplasia in response to excess TSH leading to thyrotoxicosis.

- Hyperplasia:
  - B. Pathological: e.g.
    - 3. Irritative hyperplasia e.g.
      - Hyperplasia of lymphoid tissue during chronic infection and toxemia which is due to antigenic stimulation.

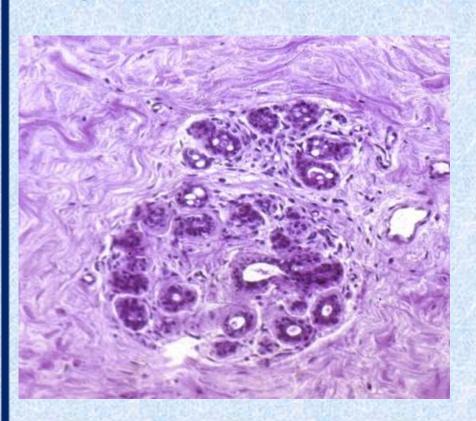
#### • Hyperplasia:

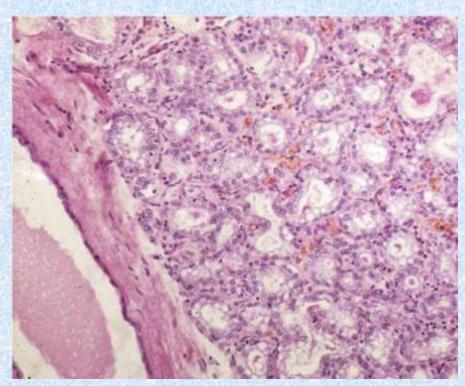




Please.....Comment???

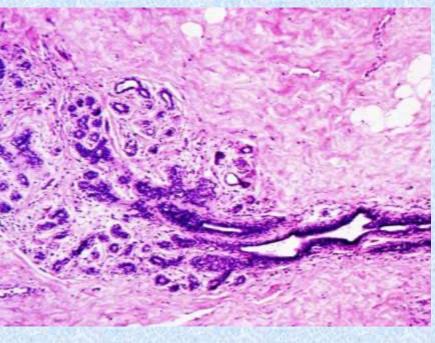
#### • Hyperplasia:

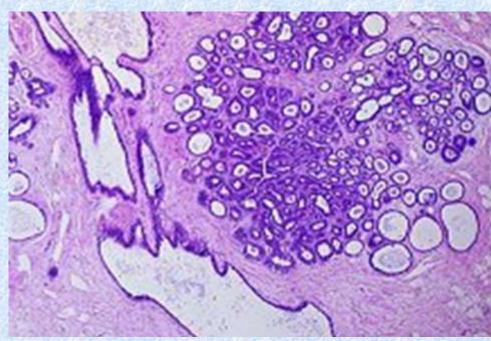




**Breast.....Comment???** 

• Hyperplasia:





Breast.....

Comment???

• Hyperplasia:



Prostate......Comment???

# Hypertrophy

#### • Hypertrophy:

#### **Definition:**

Increase in size of an organ or tissue due to increase in the SIZE of its cell constituent.

#### • Hypertrophy:

#### **Features**

- The stimulus is always a mechanical.
- Occurs in permanent cells which cannot divide to compensate excessive functional demand.
- ■Hypertrophy should be distinguished from hyperplasia, in which there is in cell number.
- Hypertrophy and hyperplasia occur frequently together, e.g. enlargement of uterus during pregnancy.
- Pure hypertrophy without accompanying hyperplasia occurs only in athletic muscles.

#### • Hypertrophy:

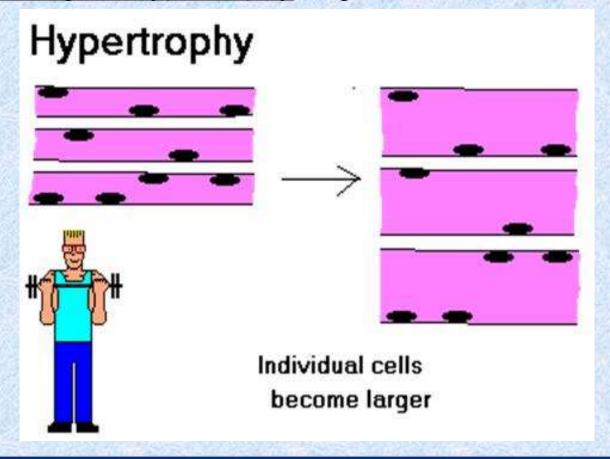
#### Types:

- A. Physiological hypertrophy: e.g.
  - Uterus in pregnancy.
  - Skeletal muscle: in muscles of the athlete due to the mechanical work overload.

• Hypertrophy:

Types:

A. Physiological hypertrophy: e.g.



#### • Hypertrophy:

#### Types:

B. Pathological hypertrophy: e.g.

#### □ Adaptive hypertrophy:

- Heart: hypertrophy of the left ventricle in hypertension and in aortic stenosis
- Stomach: as in congenital pyloric stenosis or healed peptic ulcer or stenosis by a tumour.
- ➤ Urinary bladder: Hypertrophy of urinary bladder due to urethral stricture by enlarged prostate

• Hypertrophy:

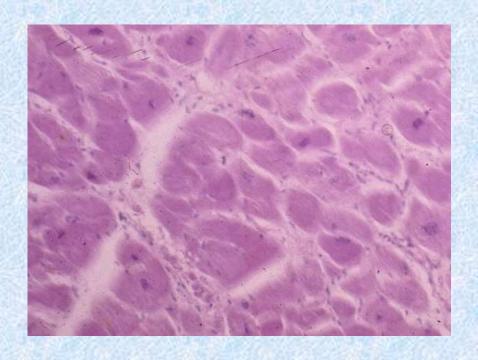


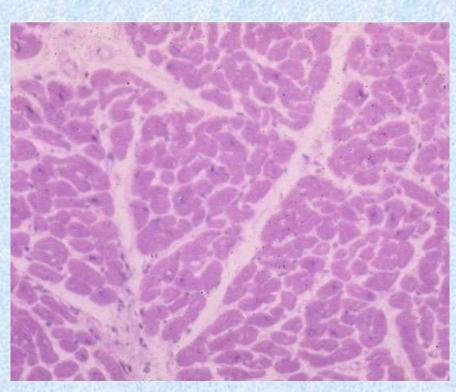


Myocardium.....

.Comment???

• Hypertrophy:





Myocardium......
Comment???

#### • Hypertrophy:

#### Types:

- B. Pathological hypertrophy: e.g.
  - Compensatory hypertrophy: in paired organs when one is pathologically destroyed or surgically removed; nepherectomy of one kidney leads to hypertrophy and enlarged size of the other kidney.

• Hypertrophy:

Which is more serious??

 $\Box$  ATROPHY

☐ HYPERPLSIA

☐ HYERTROPHY

#### **GOOD LUCK**

Dr. Ahmed Roshdi