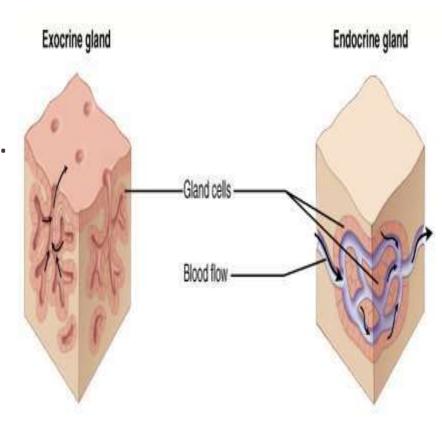


GLANDS:

An organ which secretes particular chemical substances for use in the body or for discharge into the surroundings.

- There are three types of glands in our body:
- Endocrine glands
- Exocrine glands
- Heterocrine glands



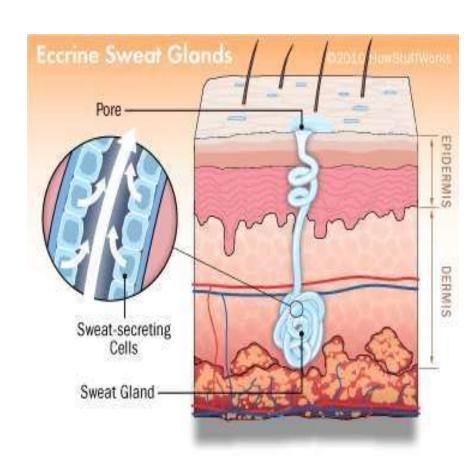
EXOCRINE GLANDS

Exocrine glands are glands that secrete their

products into ducts

EXAMPLE:

- Sweat glands
- Salivary glands
- Mammary glands
- > Stomach
- Liver

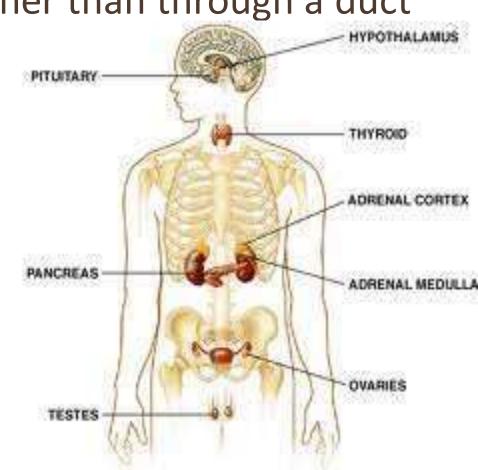


ENDOCRINE GLANDS

Glands that secrete their product (hormones) directly into the blood rather than through a duct

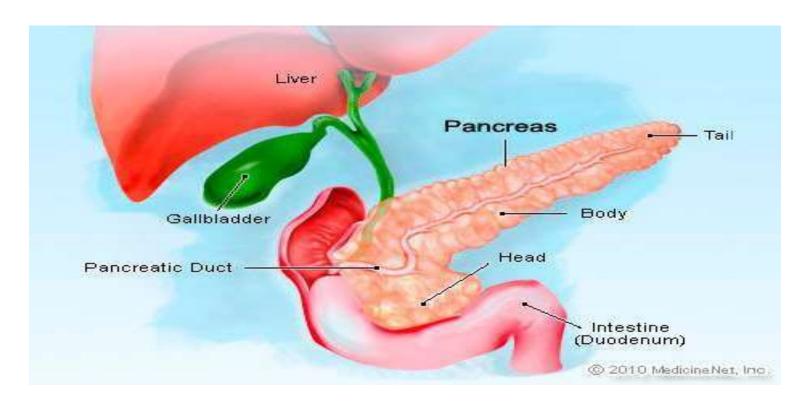
EXAMPLE:

- Pituitary gland
- Pancreas
- > Thyroid gland
- Adrenal glands



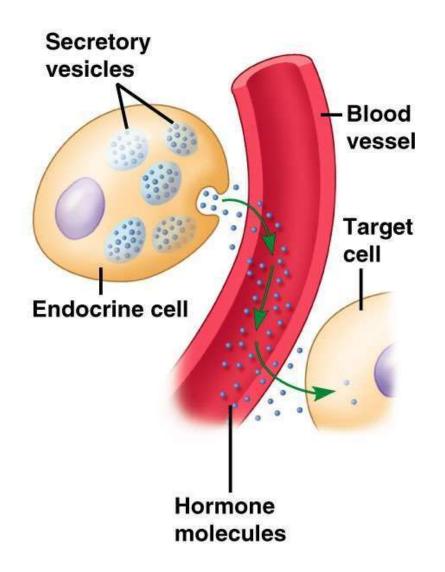
HETEROCRINE GLANDS

These are glands that perform both exocrine and endocrine functions. For example *pancreas*



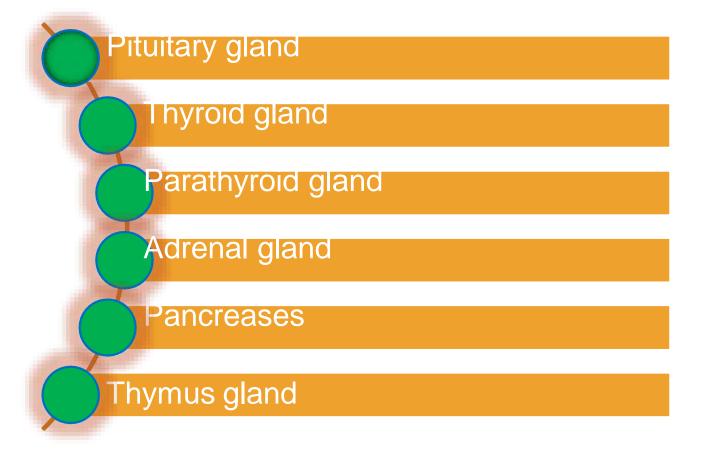
ENDOCRINE SYSTEM

- Consists of glands and
 Group of capillaries which
 Facilitates diffusion of *hormones* to
 Bloodstream
- They are commonly referred as the ductless glands, because the hormones secreted directly into bloodstream

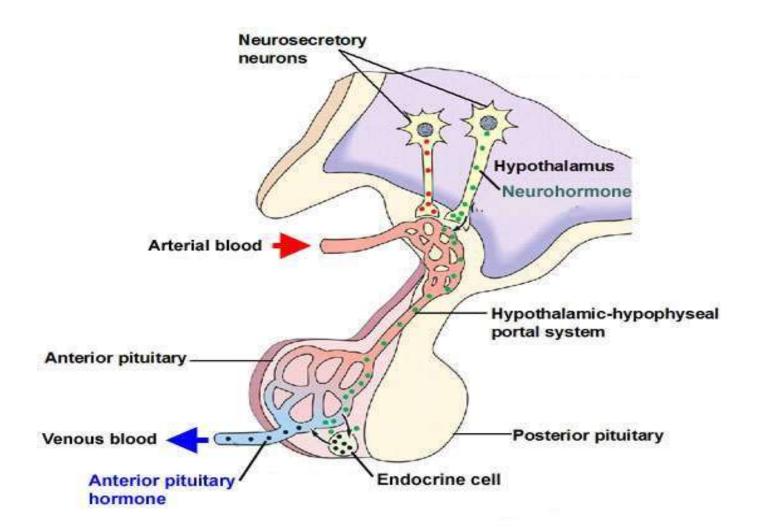


Endocrine system continue...

It consists of a number of glands:

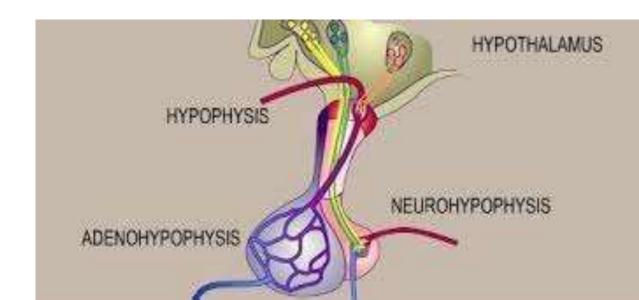


PITUITARY GLAND:



pituitary gland continue...

- The pituitary gland consists of:
- Adenohyphophysis: Anterior lobe. It is influenced by hormones which come from the hypothalamus.
- Neurohypophysis: Posterior lobe. It is influenced by neurons which convey hormones directly from hypothalamic nuclei for storage of posterior lobe



HORMONES:

Anterior lobe:

- Growth hormone (GH)
- × Prolactin
- Thyroid stimulating hormone (TSH)
- Adrenocorticotrophic hormone (ACTH)
- Follicle stimulating hormone (FSH)
- Luteinizing hormone (LH)

Intermediate lobe:

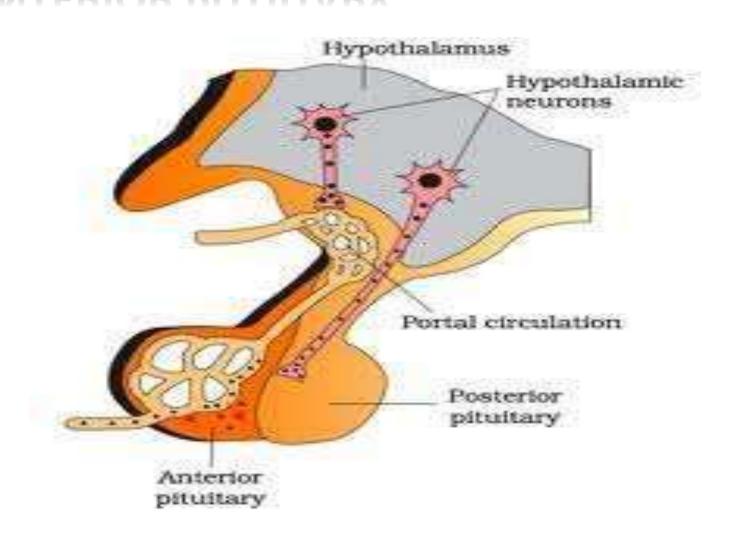
A and B melanocyte stimulating hormone

Posterior lobe:

- Vasopressin (ADH)
- 2. oxytocin



ANTERIOR PITUITARY



GROWTH HORMONE (GH):

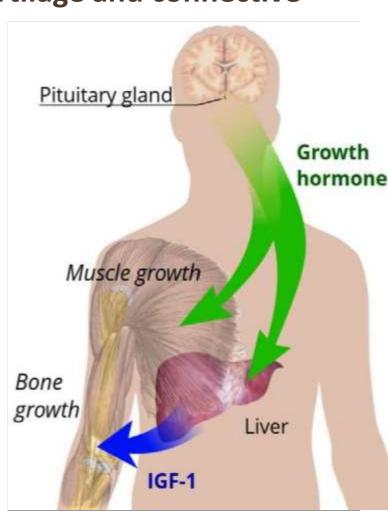
Action of growth hormone

1. Stimulating of growth of bones, cartilage and connective

tissue:

Somatomedins are synthesized in the liver, in response to stimulation by the GH

The effects of GH on skeletal growth are mediated by somatomedins



action of GH continue...

2. Effect on Protein and Mineral Metabolism:

On protein metabolism: GH is protein anabolic

hormone.

× On mineral metabolism:

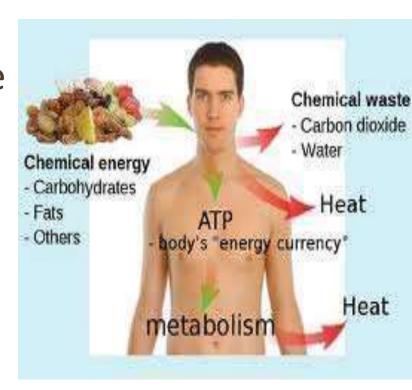
- Increase calcium absorption from GIT
- Decrease sodium, potassium, calcium and phosphorous excretion from kidney



action of GH continue...

3. Effect on carbohydrate and fat metabolism:

- On carbohydrate GH is diabetogenic, because it produce hyperglycemia
- On fat metabolism GH has catabolic effect i.e.
 Increases mobilization of fats from adipose tissues



CONTROL OF GROWTH HORMONE

The release of GH is primary under the control of two

hypothalamic hormones:

- GH releasing hormone
- ➤ GH inhibiting hormone
 Stimuli increases GH

Secretions by stimulating GHRH release. E.g. during **exercise** and **stress**

Stimuli decrease GH secretion by release of **GHIH** also called **Somatostatin**

DISEASES RELATED TO GROWTH HORMONE

1. Gigantism: It is due to overproduction of GH

during adolescence.

It is characterized:

× Tall stature

× Bilateral gynaecomastia.

× Large hand and feet.



diseases continue...

* Acromegaly: It is due excessive secretion of GH

during adulthood

It is characterized by:

- Broad, thick nose
- Thickening of the skin
- Prominent brow
- Pronathism: elongation and widening of the mandible



diseases continue...

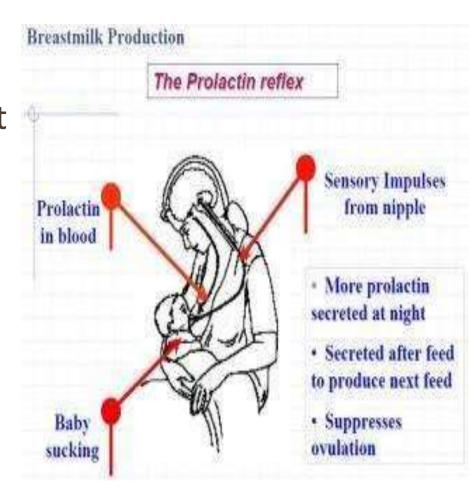
- 3. Dwarfism: Deficiency of GH secretion.
- Shortness of stature
- Small genitalia
- Delicate extremities.



2. Prolactin:

Actions of prolactin:

Prolactin plays an important role in the development of the mammary gland and in milk synthesis.



prolactin continue...

Control of prolactin secretion: A. *Stimulating factors*:

They act via stimulating Prolactin releasing factor. e.g. Exercise, emotional stress, pregnancy and breast feeding.

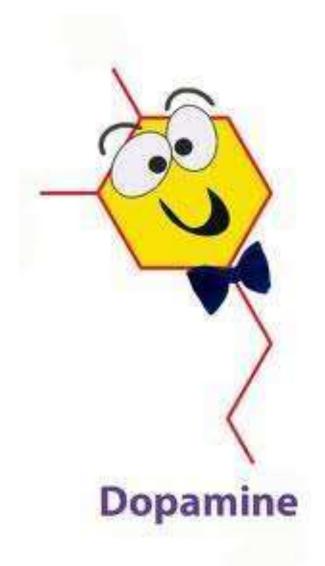




continue...

B. *Inhibitory factors*:

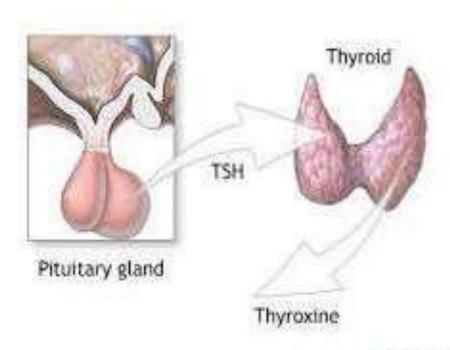
which is released by the hypothalamus inhibits prolactin secretion from the anterior pituitary Dopamine may be the main prolactin inhibiting factor.

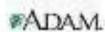


3. Thyroid-stimulating hormone (TSH):

It stimulates the **thyroid** gland to produce:

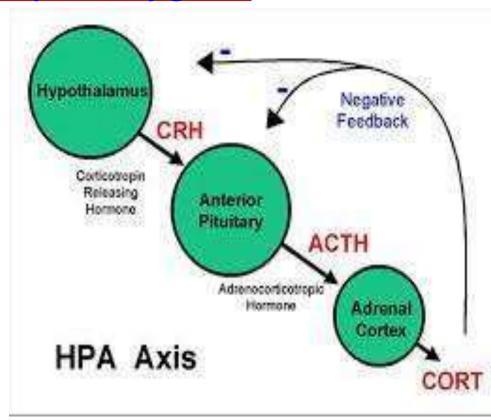
- \rightarrow **Thyroxin** (T₄), and
- Triiodothyronine (T₃)





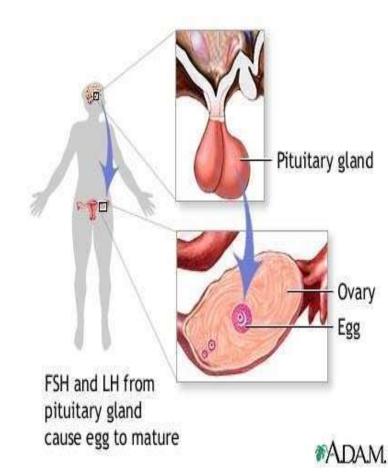
4. ADRENOCORTICOTROPHIC HORMONE(ACTH):

- **x** It is secreted by the **anterior pituitary gland**.
- It is often produced in response to biological stress.
- Its principal effects are increased production and release of <u>corticosteroids</u>.



5. FOLLICLE STIMULATING HORMONE(FSH):

- It is synthesized and secreted by <u>anterior pituitary gland</u>
- FSH regulates the development, growth, pubertal maturation and reproductive processes of the body



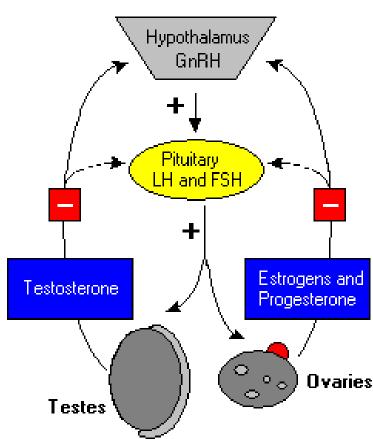
6. LUTEINIZING HORMONE(LH):

It is a hormone produced by the anterior pituitary

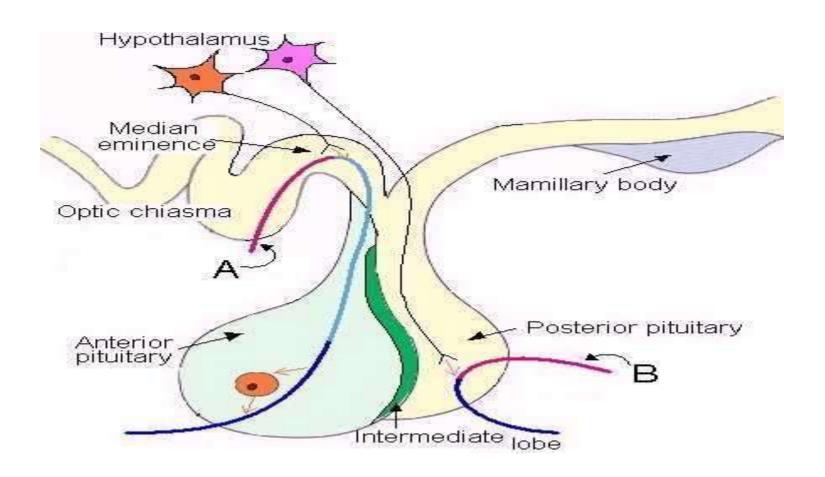
gland.

In females, an acute rise of LH triggers <u>ovulation</u> and development of the corpus luteum

In males, it stimulates the production of <u>testosterone</u>



INTERMEDIATE LOBE



intermediate lobe continue...

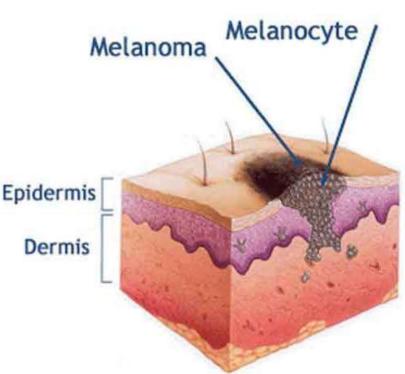
HORMONES OF INTERMEDIATE LOBE:

It secretes:

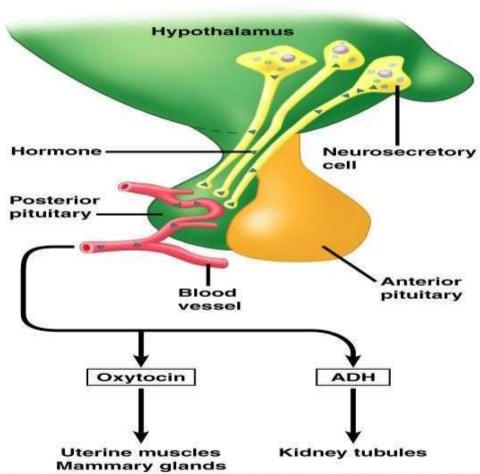
- α melanocyte stimulating hormon
- β melanocyte stimulating hormon

Function:

- They stimulate the production of melanin by melanocytes in skin and hair
- MSH signals to the brain have effects on appetite and sexual arousal.



POSTERIOR PITUITARY:

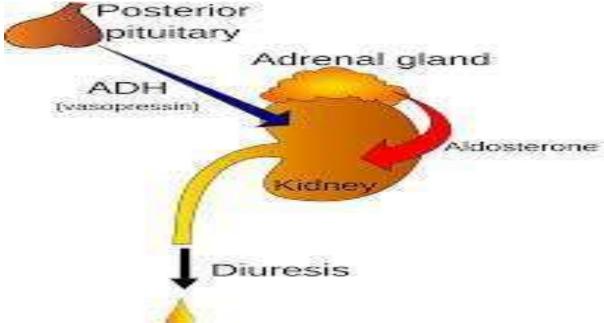


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HORMONES OF POSTERIOR PITUITARY:

A. Anti-diuretic hormone (ADH) /vasopressin:

- ➤ It is a hypothalamic hormone synthesized in the cells of the *supra optic nucleus*
- ADH is stored in the posterior pituitary



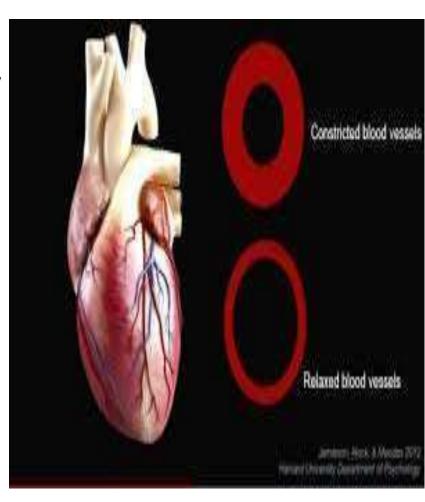
ADH continue...

Functions of ADH:

Its two primary functions-

- > To retain water in the body
- > To constrict blood vessel.





DISEASES RELATED TO ADH:

Diabetes Insipidus:

It is a **condition** characterized by-

- Excessive thirst
- Excretion of large amounts of severely diluted <u>urine</u>

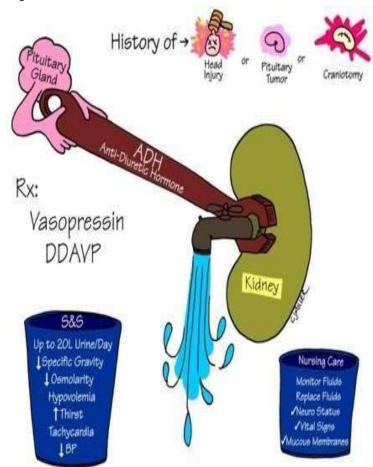


diseases continue...

Polyuria:

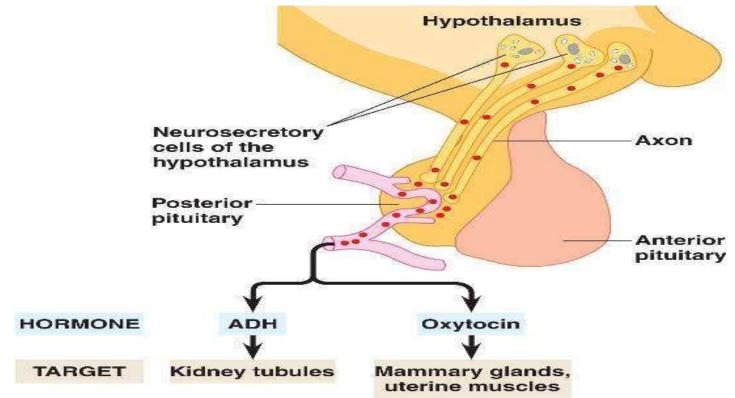
It is the excessive or abnormally

large production of <u>urine</u>
(at least 2.5 or 3L /in adults)



B. OXYTOCIN: -

- Oxytocin is synthesized in the hypothalamus
- Stored in the posterior lobe of pituitary gland



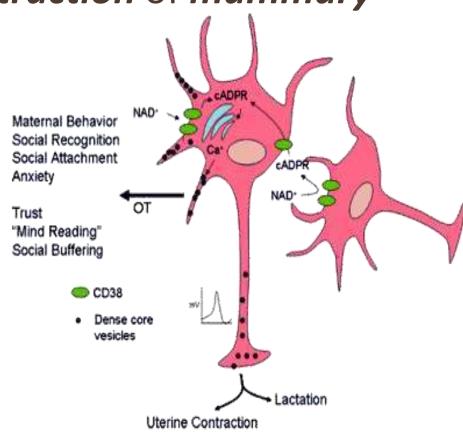
oxytocin continue...

Action of oxytocin:

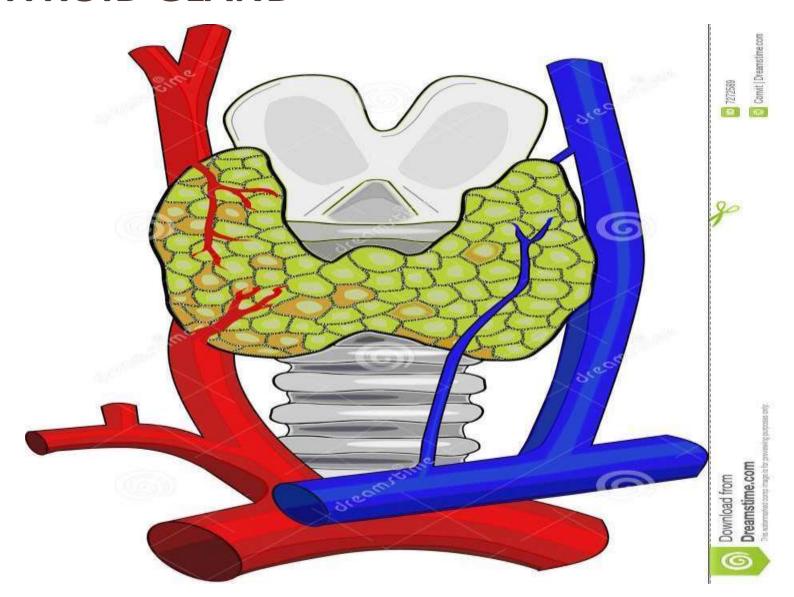
Oxytocin stimulates contraction of mammary

gland to produce milk.

Stimulate contraction of the smooth muscles of the uterus



THYROID GLAND



Thyroid gland continue...

ANATOMY OF THE THYROID GLAND: -

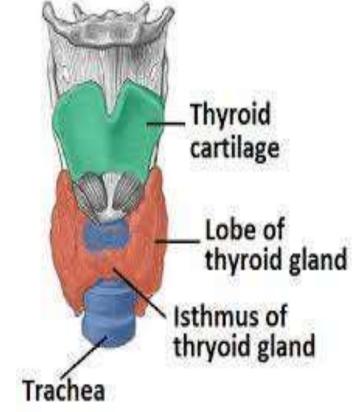
> The thyroid gland is situated in the **neck** in front

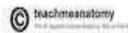
of the larynx and trachea

It weighs about 25g

It looks like butterfly in shape

- Consisting of two lobes
- The lobes are joined by a narrow *isthmus*





THYROID HORMONES

<u>Triiodothyronine</u> (T₃):

It affects almost every physiological process in the body:

- Growth and development,
- Metabolism,
- Body temperature, and
- Heart rate
- \rightarrow Thyroxin (T₄):
- Controls development and maturation
- Excess thyroxin results rapid development
- Deficiency of thyroxin results in delayed development

hormones continue...

Calcitonin: It is a hormone secreted by the C cells of the thyroid gland

Its main actions are:

- to increase bone calcium
- to decrease blood calcium levels

Calcitonin opposes the effects of parathyroid hormone, which acts to increase the blood level of calcium.

Thyroid gland continue...

Thyroid is not absolutely essential for life,

but its removal in adults leads to:

- Poor resistance to cold
- Mental and physical slowing.

and in children's:

- Mental retardation
- Dwarfism

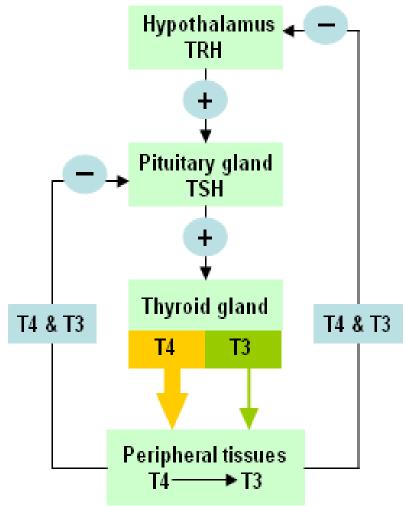


REGULATION OF THYROID SECRETION

Thyroid stimulating hormone (TSH) controls the regulation of

thyroid hormones.

✓ The release of TSH by the anterior lobe of the pituitary, is regulated by the hypothalamus via negative feedback mechanism.
It is a reaction that causes a decrease in function. It occurs in response to some kind of stimulus.



DISEASES RELATED TO THYROID GLAND

1. **GOITER**: -

Any enlargement of the thyroid gland is called goiter

Caused by *iodine deficiency*.

- × Swelling in the neck
- Breathing difficulties
- Cough
- **×** Hoarseness
- Swallowing difficulties

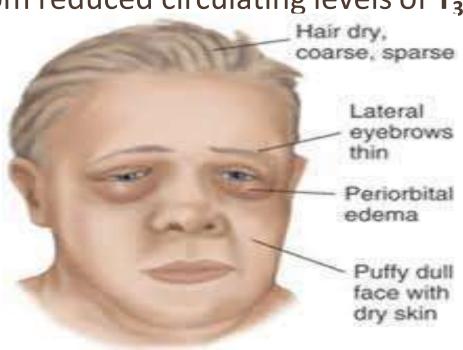


2. HYPOTHYROIDISM: -

It is the condition resulting from reduced circulating levels of T_3

and T_{4.}

- × Goiter
- × Puffiness of face with
- × Periorbital swelling
- Loss of scalp hairs
- Ptosis, i.e., drooping of upper eyelid.
- Dry, thickened, rough and yellow skin

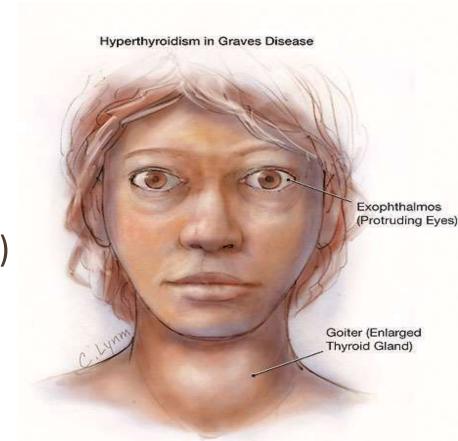


3. <u>HYPERTHYROIDISM/GRAVES DISEASE</u>: -

It is the condition resulting from increased circulating level

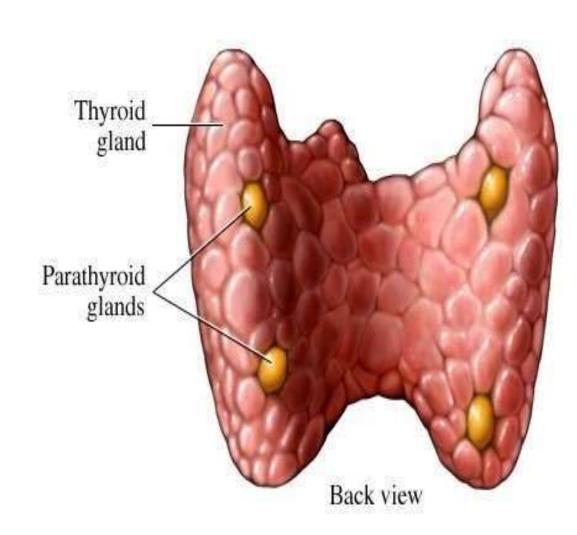
of T₃ and T₄

- Moderate enlargement of thyroid gland
- Exophthalmos(Lid retraction)



PARATHYROID GLANDS

- In humans there are4 parathyroid glands
- Parathyroid glands are
 essential for life,
 as their removal can
 cause death from
 asphyxia

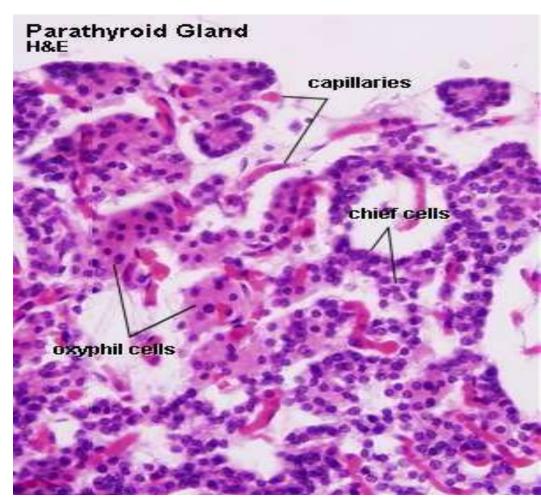


FUNCTION OF PARATHYROID HORMONE

Parathyroid glands contains chief cells which secrete

parathyroid hormone.

 The main function of parathyroid hormone
 is to increase the blood calcium level

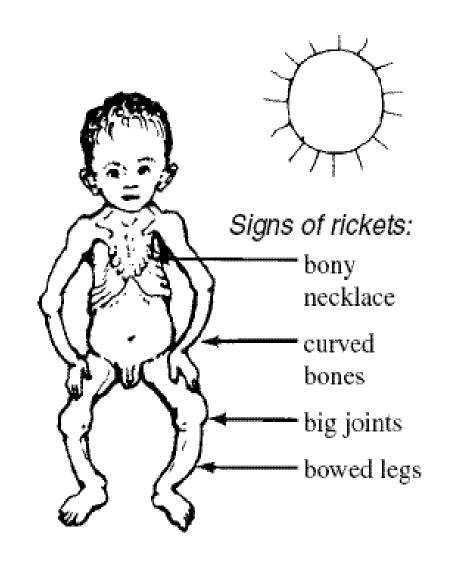


DISEASES RELATED TO PARATHYROID GLAND

1.RICKETS:

- It is a disease characterized mainly by bone deformities in young children's
- The disease of children sets in about 6th month of life

- Deformed bones
- Thick wrist and ankles
- Retarded growth

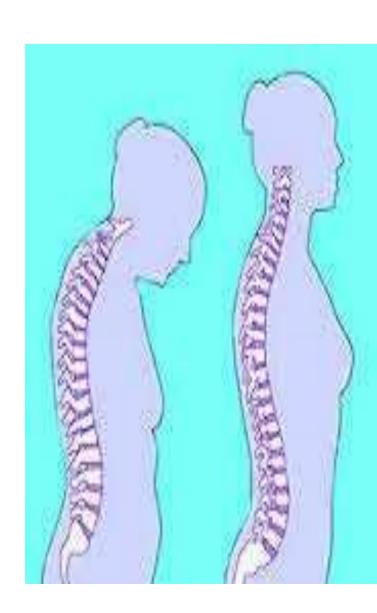


2. OSTEOMALACIA: -

- This is due to *inadequate*absorption of calcium

 due to deficiency of Vitamin D

 and Calcium in the diet
- The disease is limited to females, usually appears *after multiple pregnancies and lactation.*



3.<u>HYPOPARATHYROIDISM:</u>

It is an abnormally low level of calcium in the blood

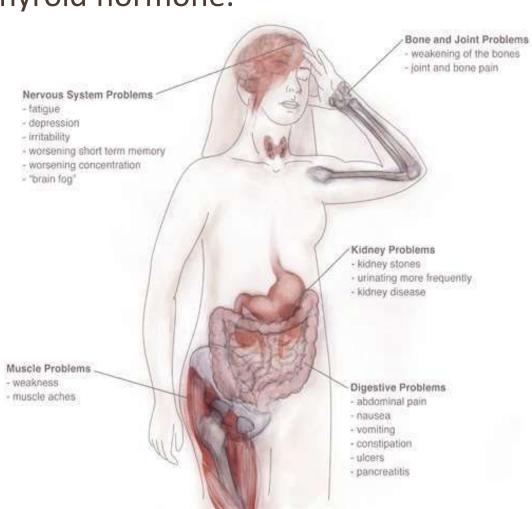
- Characteristic features: -
- Psychiatric disturbance
- Par aesthesia
- Development of cataract



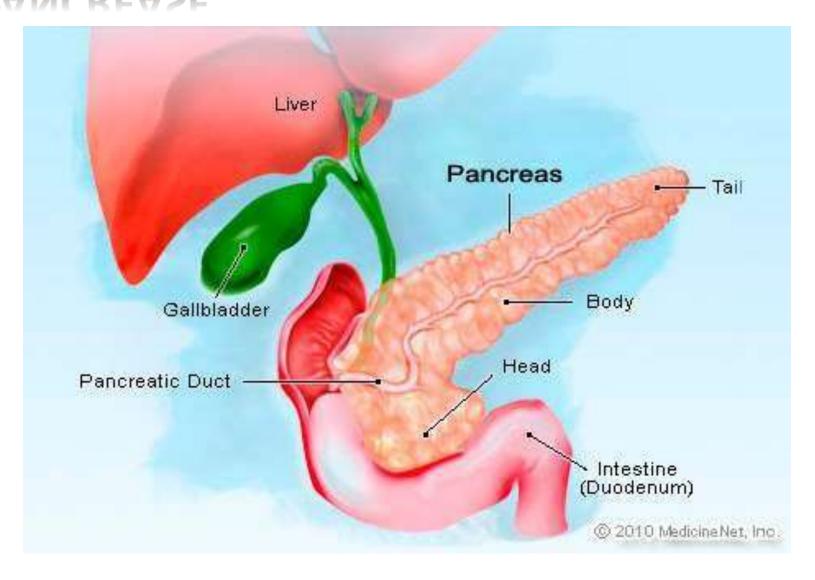
4. <u>HYPERPARATHYROIDISM</u>: -

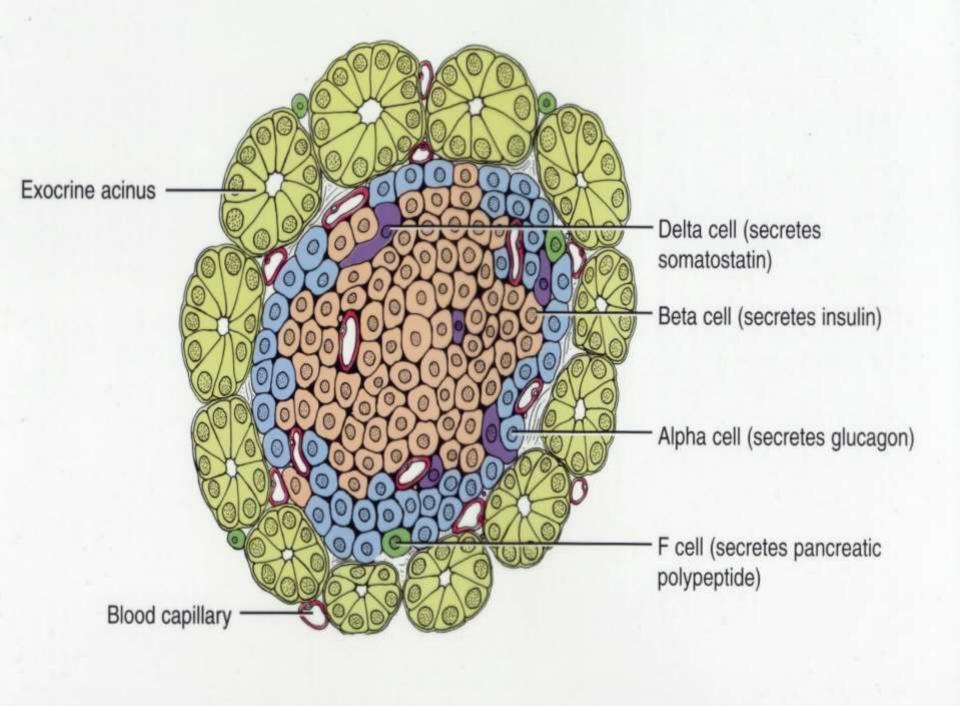
Excessive secretion of parathyroid hormone.

- Formation of renal calculi
- Polyuria
- Polydipsia
- Anorexia
- Muscle weakness
- General fatigue
- Calcification of soft tissue



PANCREASE





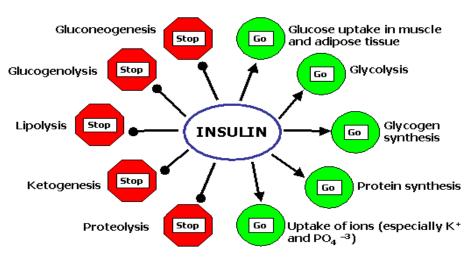
PANCREATIC HORMONES

1. INSULIN:

Actions:

- On carbohydrate metabolism:
- Insulin increases the glucose entry into most of body cells
- Insulin produce hypoglycemia
- On protein metabolism:

Actions of Insulin



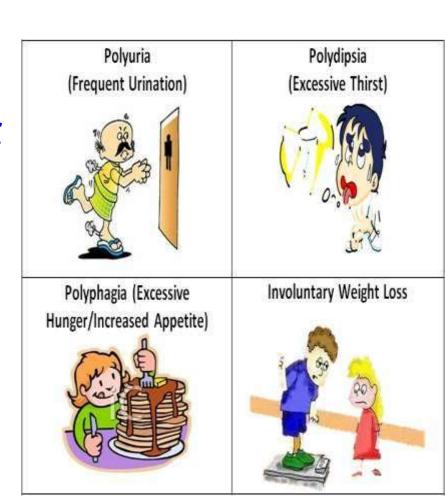
Modified from Clinical Blochemistry, A. Cawetal, Churchill Uvingstone, Edinburgh, 1995.

- Insulin promotes amino-acid uptake
- It decrease protein breakdown
- It promotes protein synthesis especially in muscles

DISEASES RELATED TO INSULIN: -

DIABETES MELLITUS

- * It is a group of metabolic diseases in which there are *high blood sugar* over a prolonged period.
- This high blood sugar produces the symptoms of
- ✓ <u>frequent urination</u>,
- <u>increased thirst</u>, and
- ✓ <u>increased hunger</u>.

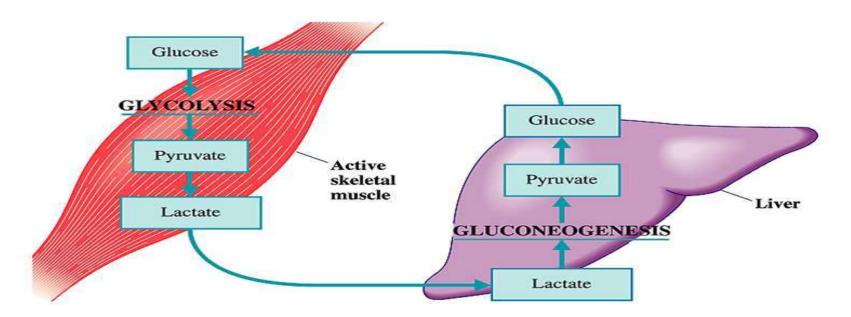


hormones continue...

2. GLUCAGON: -

Glucagon act mostly on the *liver and adipose tissues* where it antagonizes the actions of insulin

- Stimulate glycogenolysis
- Promotes gluconeogenesis



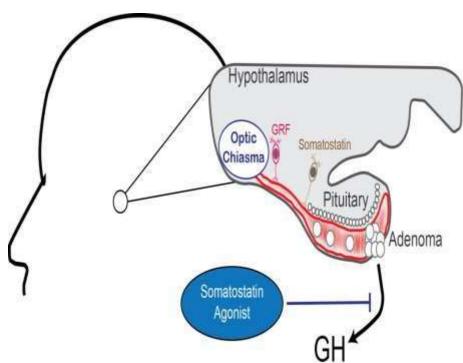
hormones continue...

3. SOMATOSTATIN:

A hormone that is widely distributed throughout the body, especially in the *hypothalamus and pancreas*

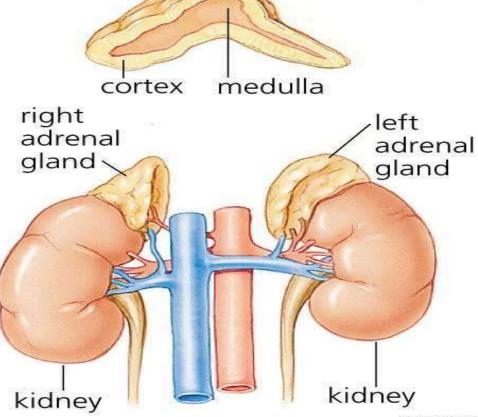
Action:

It regulates the endocrine and Nervous system functions



ADRENAL GLANDS

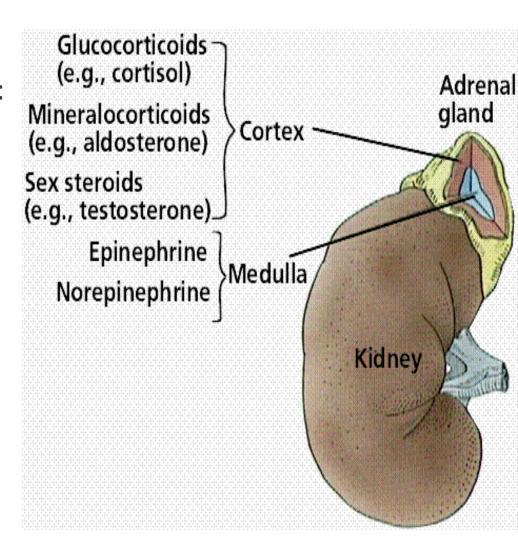
- There are two adrenal glands,
- About 4 cm long and 3 cm thick
- It has two parts:
- outer part is cortex and
- the inner part is medulla.



adrenal glands continue...

1. ADRENAL CORTEX: -

- It produces three hormones:
- Glucocorticoids
- Mineralocorticoids
- Sex hormones (androgens)These are collectively called
- as **adrenocorticoids**

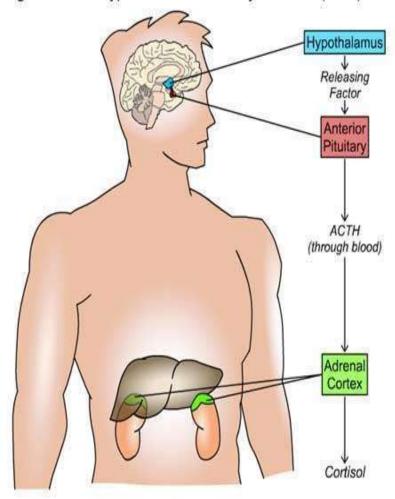


adrenal cortex continue...

A. Glucocorticoids: -

- Cortisol, corticosterone and cortisone are the main Glucocorticoids
- They are essential for life, regulating metabolism and stress
- They are high in between 4 to 8 am
- Lowest between midnight and 3 am

Figure AN-1: Hypothalamic-Pituitary-Adrenal (HPA) Axis



glucocorticoids continue...

Effects:

- Gluconeogenesis (formation of new sugar)
- Lipolysis (breakdown of triglycerides into fatty acids and glycerol for energy production).

In pathology and pharmacology:

- Have an anti-inflammatory action.
- Suppress the immune response.
- Suppress the response of tissue to injury.
- Delay wound healing.



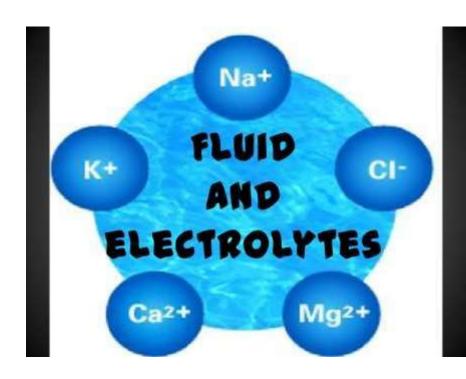


adrenal glands continue...

B. Mineralocorticoids (aldosterone): -

- > Aldosterone is the main mineralocorticoids
- It maintains

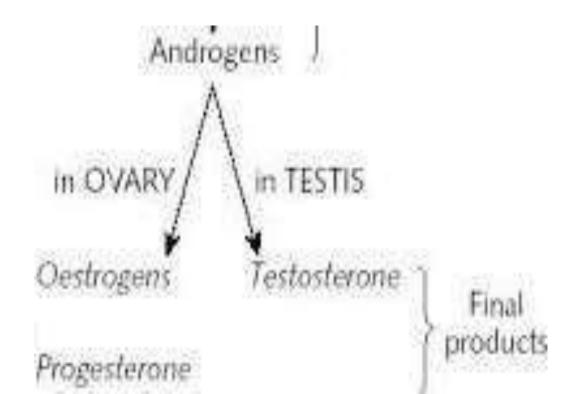
Water and electrolyte balance



adrenal glands continue...

C. Sex hormones: -

- > Androgens are the main sex hormones
- They contribute to the onset of puberty



DISORDERS OF ADRENAL CORTEX

1. Cushing's syndrome: -

It is caused due to hyper secretion of glucocorticoids

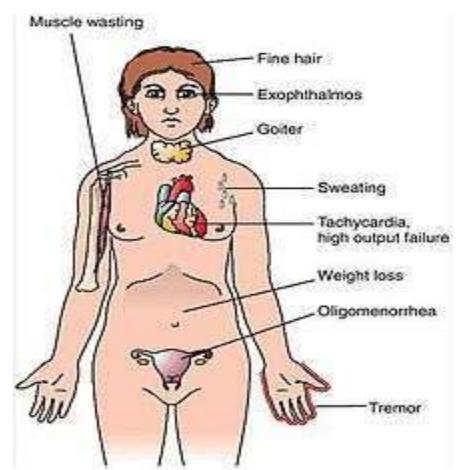
- Pain in face, neck and abdomen
- Pathological fractures
- Diminished protein synthesis
- Suppression of growth
- Hypertension
- Menstrual disturbance
- Peptic ulcers



disorders of adrenal cortex

2. Conn's syndrome: -

- This is due to excessive secretion of mineralocorticoids.
- It is usually caused by tumor affecting only one adrenal gland



disorders of adrenal cortex

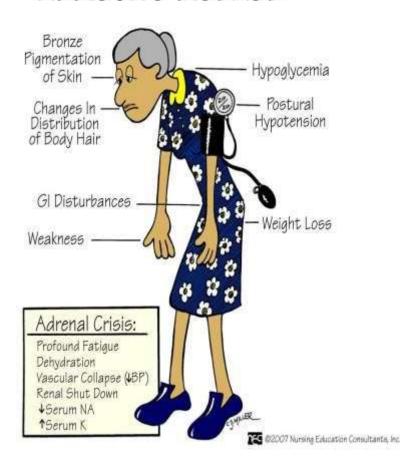
3. Addison's disease:

- It is due to hypo secretion of glucocorticoids and mineralocorticoids
- Caused by autoimmune disease

Effects:

- Muscle weakness.
- Vomiting and diarrhea.
- × Tiredness.
- Mental confusion.
- Low blood volume.
- Hypotension.
- Loss of body hairs in women.

ADDISON'S DISEASE

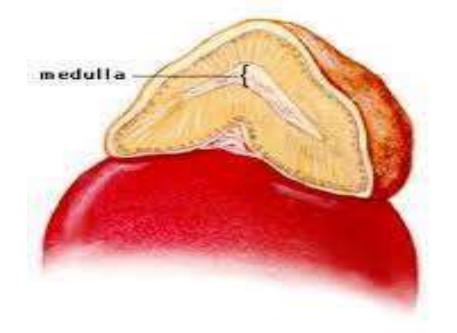


adrenal glands continue...

2. ADRENAL MEDULLA: -

- It is surrounded by the cortex
- It produces two hormones
- adrenaline and
- noradrenaline.

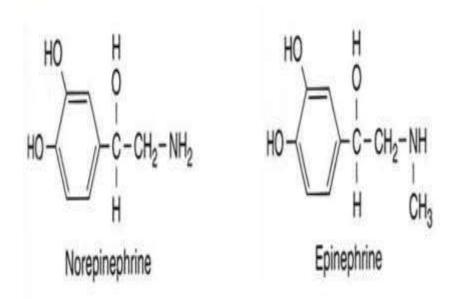




adrenal medulla continue...

Adrenaline and noradrenaline:

- Noradrenaline and adrenaline are released into the blood
- They are structurally very similar and have similar effects
- Together they potentiate by:
- Increasing heart rate
- Increasing blood pressure
- Increasing metabolic rate
- Dilating the pupils



DISORDERS OF ADRENAL MEDULLA: -

The effects of excess adrenaline and

noradrenaline are: -

- > Hypertension
- Hyperglycemia
- Raised metabolic rate
- Nervousness
- Headache



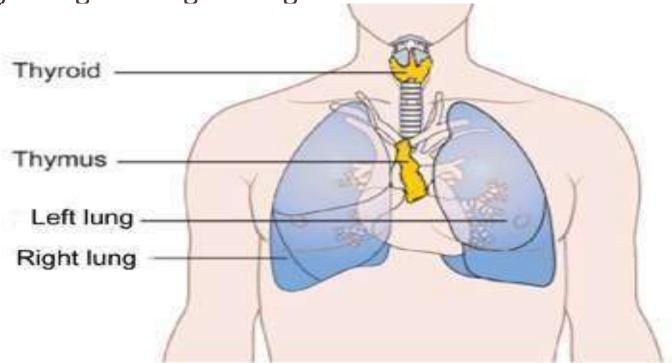


THYMUS GLAND

Thymus is located in the anterior part of the upper mediastinum

- At birth it weighs 10-12 gms
- During childhood and adolescence 20-30 gms

During old age it weighs 3-6 gms



thymus gland continue...

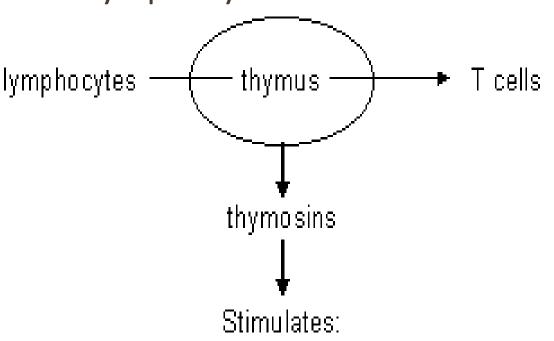
Functions:-

It initiates and maintain T- lymphocytes

HORMONE:-

Thymosin:-

 It is required for the development of T-lymphocytes for cell mediated immunity



- development of T cells
- other immune cells

CONCLUSION

In endocrine system we use to study and get knowledge about:

- ✓ various glands of our body
- Hormones secreted by them
- ✓ Their various functions



- ✓ Implementing the gained knowledge clinical area
- For the better and quality nursing care



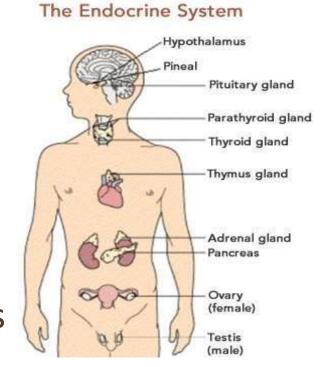
SUMMARY

So we discussed about the endocrine system and why it is important to us

In which we also studied about various gland:

- Pituitary gland
- Thyroid gland
- Parathyroid
- Adrenal glands
- Pancreas
- > Thymus gland

Their location, function and disorders



RECAPTUALISATION

- Define glands and their types?
- Enlist the hormones secreted by anterior pituitary?
- What is negative feedback mechanism?
- Define gynacomastia?
- What is gycogenolysis?



