بسم الله الرحمن الرحيم



WHITE BLOOD CELLS (WBC) LEUKOCYTES (2)



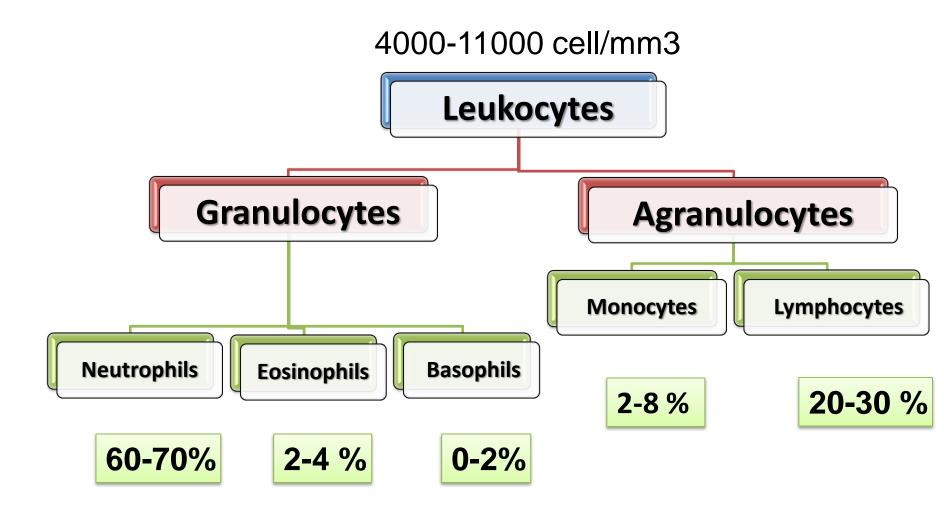
Dr. Abeer Al-Ghumlas

Objectives:

At the end of this lecture the student should be able to:

- 1. Eosinophils and Basophilophils Morphology and function
- 2. Describe monocyte and macrophage morphology and function
- 3. Describe lymphocyte formation
- 4. Describe the functions of the different types of lymphocytes
- 5. Recognize leucocytosis, leucopenia and leukaemia
- 6. Describe the reticuloendothelial system components and function

Types of WBCs



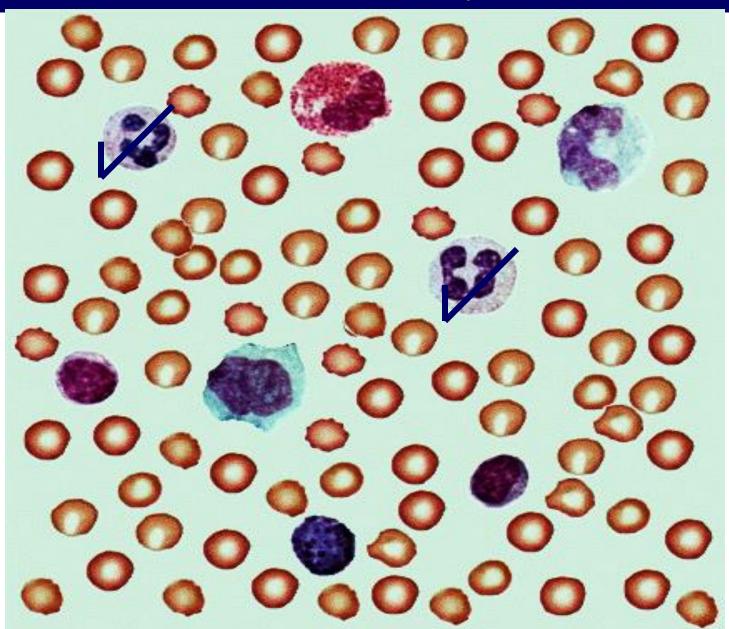
Genesis (Production) of WBCs- leucopoiesis)

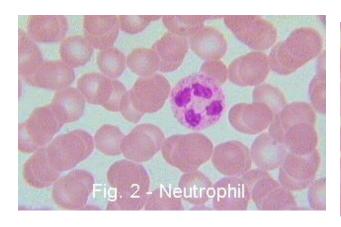
Sites of WBC formation

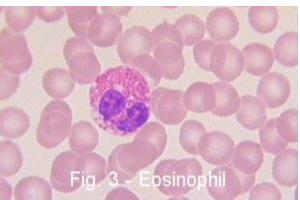
- Granulocytes (neutrophil, basophil, eosinophil):
 - bone marrow

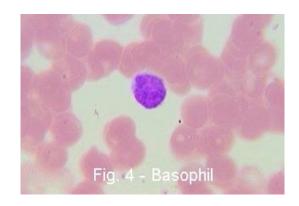
- Agranulocytes
 - lymphocytes- bone marrow, thymus, lymphoid tissues
 - monocytes bone marrow

Blood Film









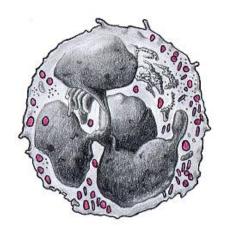


Fig. 8 - Neutrophil

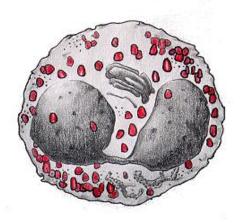


Fig. 9 - Eosinophil

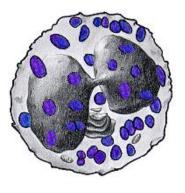
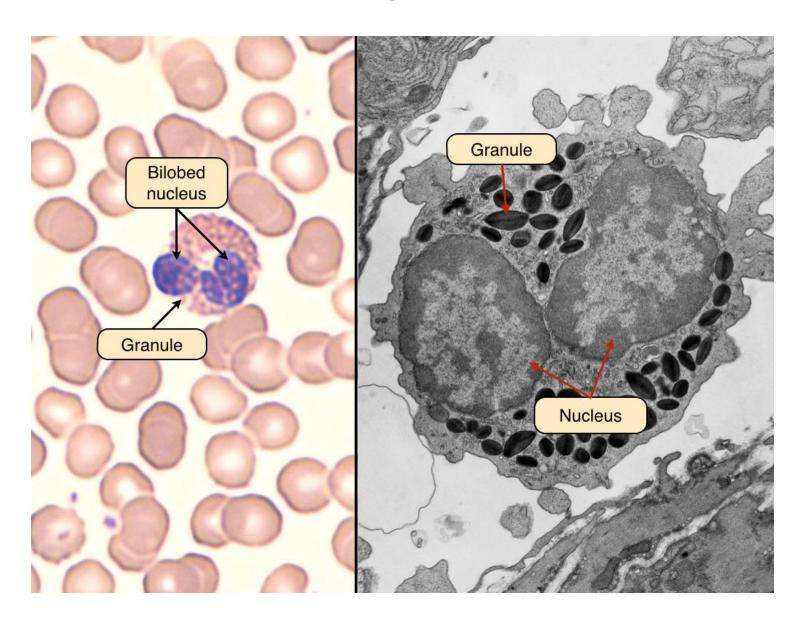


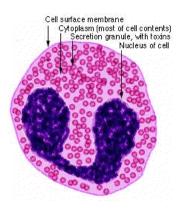
fig. 10 - Basophil

Cell	Features	Morphology	Function	%
Eosinophil	12-18um2 lobes nucleuscoarse redgranules	Fig. 3 - Eosinophil	Phagocytosis Parasitic Allergic	2.3%

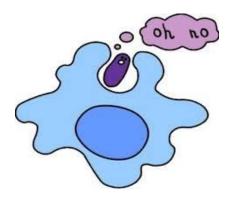
Eosinophils



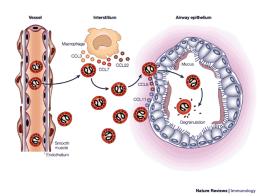
Eosinophil function:



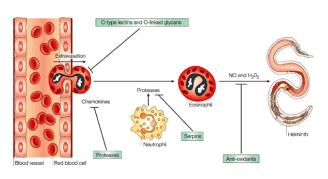
Phagocytosis



Allergic

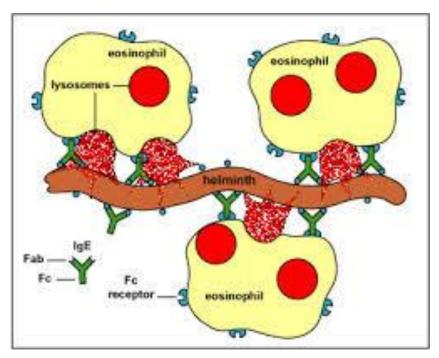


Parasitic



Nature Reviews | Immunology

Eosinophil function:





Eosinophils

Function:

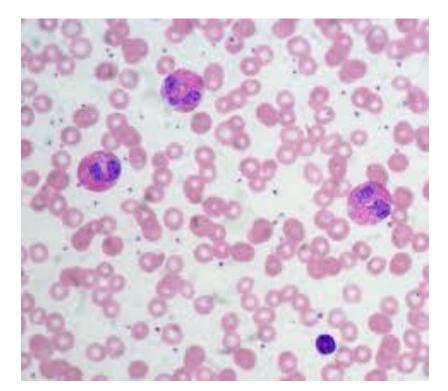
Phagocytosis:

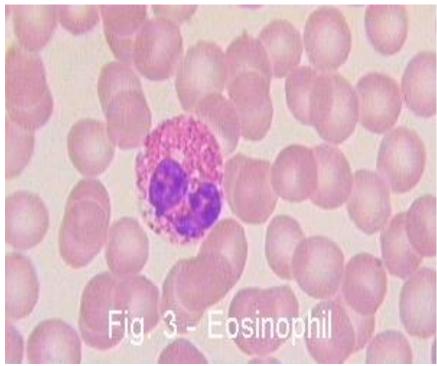
Phagocytosis is same as neutrophil, but less efficient

Chemotaxis:

eosinophil attracted towards chronic inflammation/allergic tissue (allergic disease of skin & lungs) By: eosinophil chemotactic factor

Phagocytose (& detoxify) antigen/antibody complexes





High eosinophil count Eosinophelia

Eosinophil function:

- · High eosinophil count:
 - Parasitic (hook worm, ascaris, bilharzia)
 - -Eosinophil attach themselves to parasites and releases substances (hydrolytic enzymes, superoxide to kill it)
 - Allergic (asthma, rhinitis, drug reaction)
 - -Allergic skin diseases



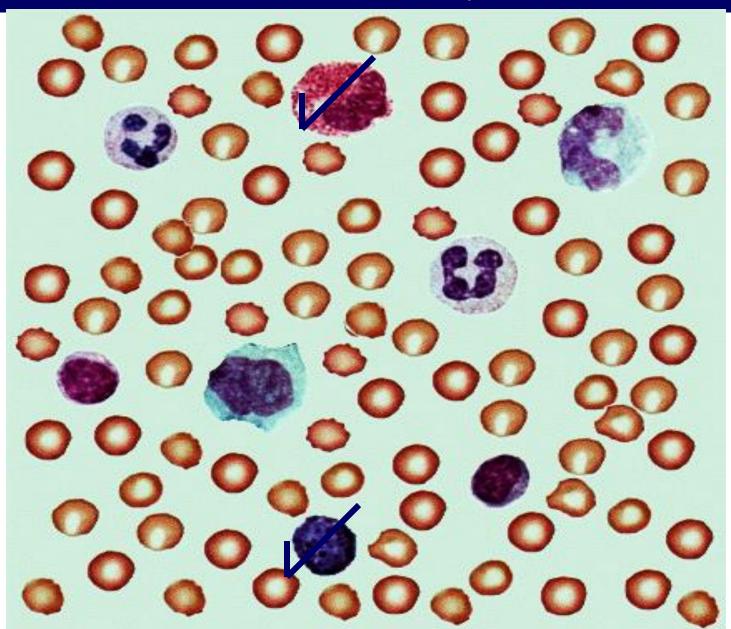
Granulocytes

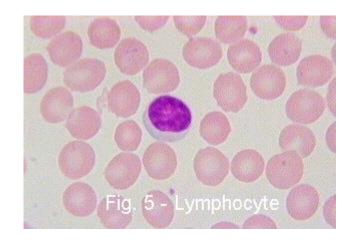
Cell	Features	Morphology	Function	%
Eosinophil	12-18um 2 lubes nucleus course red granules		Phagocytosis Paraellik Allergis	2.3%
Basophil	 10-14um, rarely segmented nucleus nucleus hidden by large round bluish granules 	Fig. 4 - Basophil	Secrets: heparin histamine serotonin bradykinin	0.4%

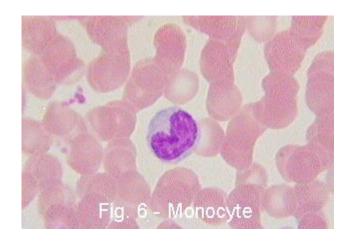
Basophils

- Heparin to prevent clotting,
 Histamine, bradykinin & serotinin to contribute to inflammation response
- The release of those substances cause local and vascular reactions characteristic of allergic manifestation

Blood Film







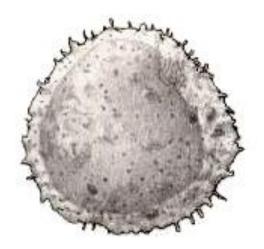


Fig. 11 - Lymphocyte

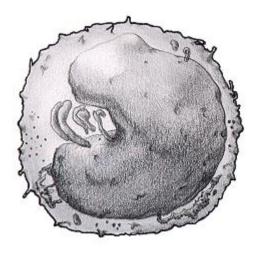
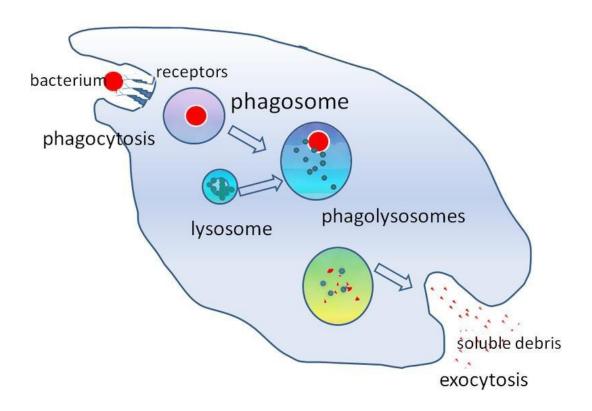


Fig. 12 - Monocyte

Morphology		Function		%
Monocytes	15-20umkidney shape nucleus	Fig. 6 - Monocyte	Phagocytosis Anti- inflammatory	5.3%

Defensive Functions of the Monocytes

- Directly:
 - phygocytosis of bacteria,
 dead cells etc



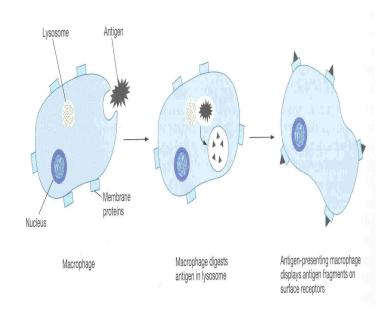
Defensive Functions of the Monocytes

Directly:

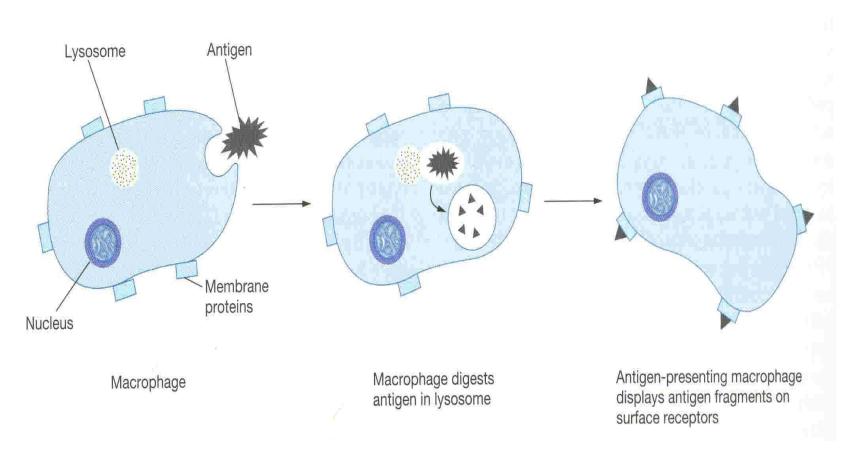
phygocytosis of bacteria,
 dead cells etc

Indirectly:

- Cooperates with lymphocytes by:
 - Recognizing the foreign body
 - Ingesting the foreign body
 - Processing the foreign body
 - Presenting it to lymphocytes



Indirect anti-inflammatory

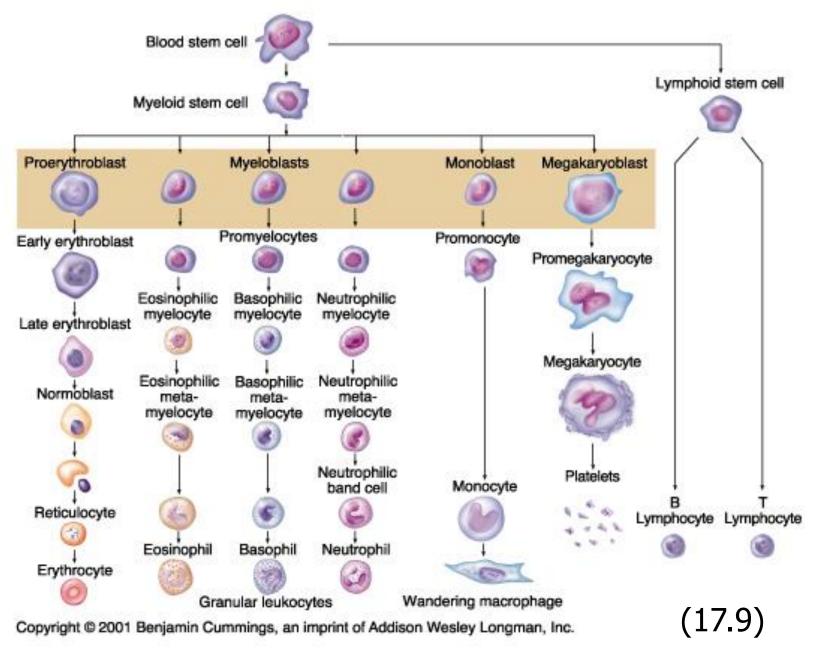


Function of Monocytes and Macrophages

- Macrophages are a powerful phagocytic Cells:
 - Ingest up to 100 bacteria,
 - Ingest larger particles as old RBC
 - Get rid of waste and survive
- Functions: anti-inflamatory
 - Directly: phygocytosis of bacteria, dead cells
 - Indirectly cooperating with lymphocytes by recognizing foreign body (take in foreign body process it and present it to lymphocytes)

Morphology		Function		%
Eosinophil				
Basophil				
Monocytes				
Lymphocyte	round nucleus:small (5-8um)large (9-15um)	Fig. 5 - Lymphocyte	Central cell in immunity	30%

Hemopoiesis



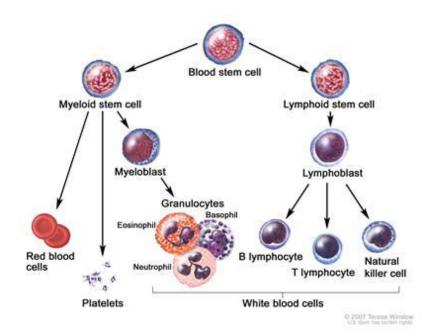
Lymphopoiesis Stem cell

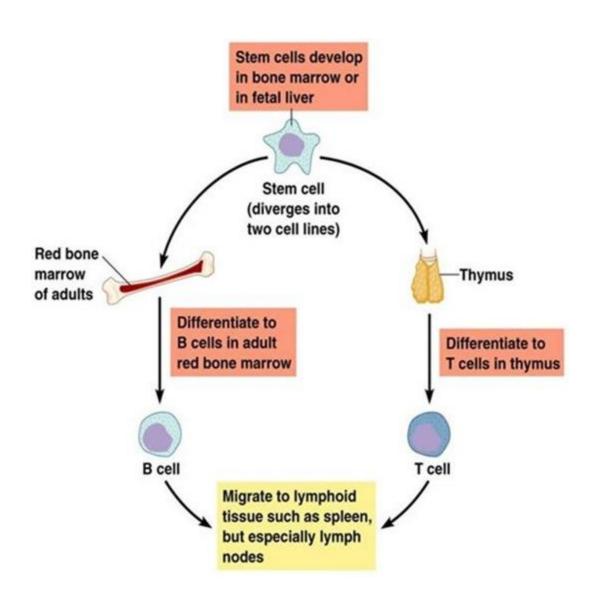
(thymus, lymphoid tissue & bone marrow)

lymphoblast

intermediate pyroninophilic blast cells

lymphocytes





Production & Life Span of WBCs

- Are synthesized in:
 - -Granulocytes & monocytes: Bone marrow.
 - Lymphocytes: Lymphoid tissues, thymus, bone marrow.
 - Life span:
 - -Granulocytes = 4-8 hrs (4-5 days in tissues).
 - Monocytes =10-20 hrs (enter tissues and become tissue macrophages, they can live for months).
 - –Lymphocytes = weeks to months.

B- Lymphocytes

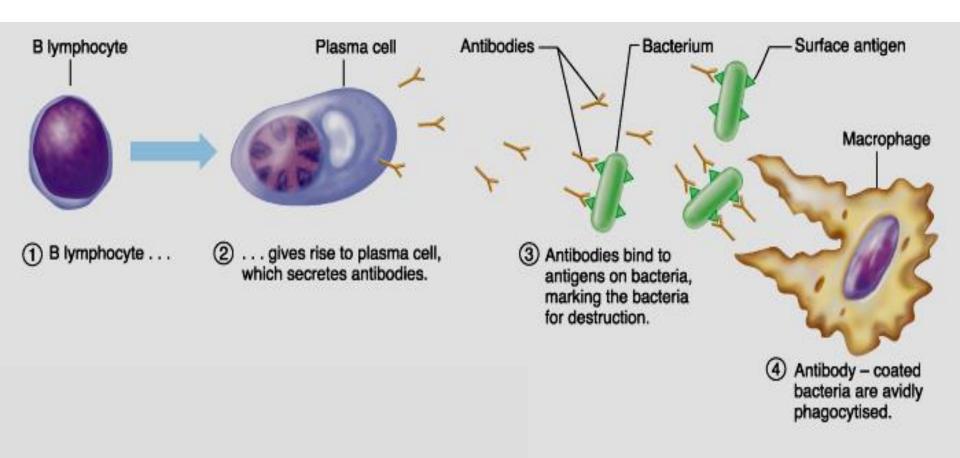
(thymus-independents)

Found in:

- Bone marrow, germinal layer of lymph node, red pulp of spleen
- Life span: 2-7 days
- Stimulation by antigen →
 large plasma cell (producers of
 antibody)
- Function: Humoral immunity.

Lymphocytes

 B lymphocytes transform into plasma cells and secrete antibodies



T-Lymphocytes

(thymus dependent)

Formed in:

- bone marrow or lymphoid tissues
- migrate to thymus
- Life span: 100-300 days.
- Circulate between blood, tissues, lymph.

T-Lymphocytes

(thymus dependent)

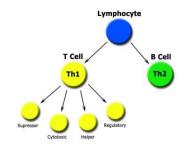
Types of T-lymphocytes

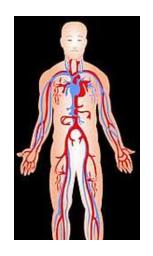
- T-helper
- T-cytotoxic
- T-suppressor

Functions

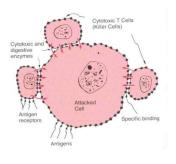
- Cellular immunity
 - graft rejection
 - delayed hypersensitivity.
- Help in antibody secretion.

Types of lymphocytes



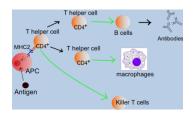


Killer T-cells (Cytotoxic)



- Release chemicals into the pathogen
- Kill the pathogen

Helper T- cells



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Release cytokines

- Activate B and T lymphocytes
- Activate macrophages

Memory T-cells

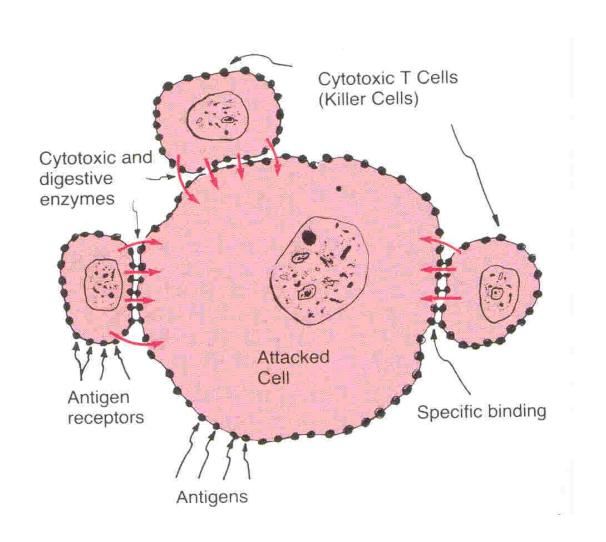


Suppressor T- cells



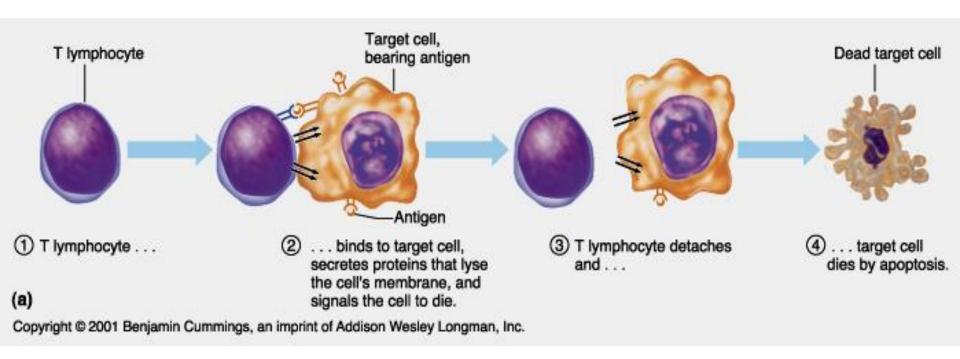
- Produced during infection
- Stay after infection

Killer T-cells (Cytotoxic)

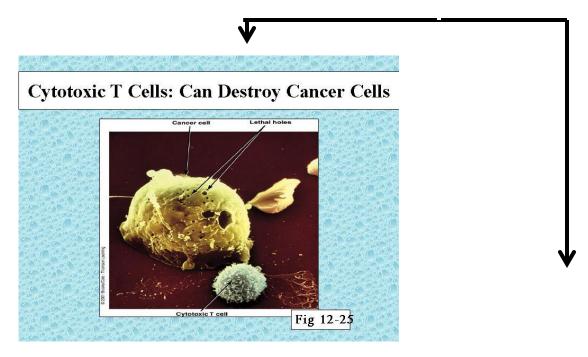


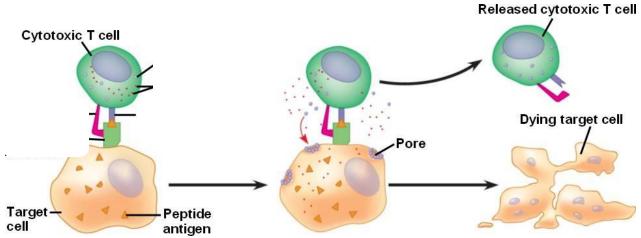
Lymphocytes

 T lymphocytes can attack foreign cells directly

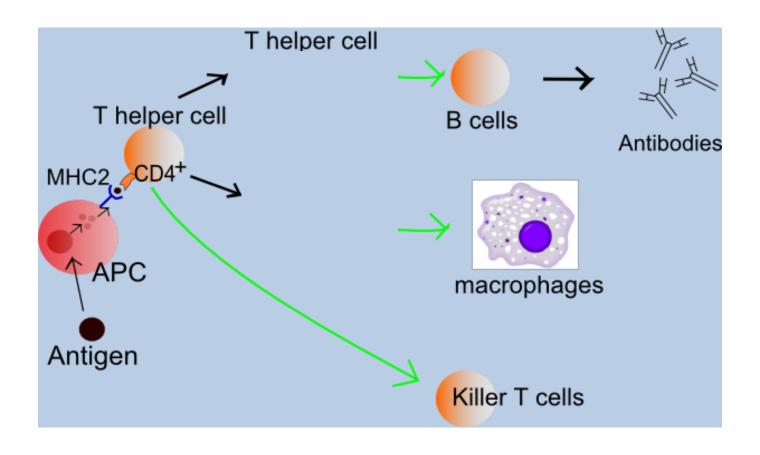


Killer T-cells (Cytotoxic)





Helper T- cells



Immune cells

Two types:

1.B-Lymphocytes

(Thymus independent, B-lymphocytes)

Produce antibodies

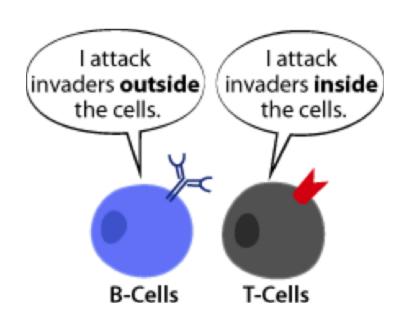
(Humoral Immunity)

2. T- lymphocytes

(Thymus dependent, T-lymphocytes)

Cellular mechanisms

(Cellular Immunity)



Cell	Features	Morphology	Function	%
Eosinophil	12-18um2 lobes nucleuscoarse redgranules	Fig. 3 - Eosinophil	Phagocytosis Parasitic Allergic	2.3%
Basophil	 10-14um, rarely segmented nucleusnucleus hidden by large round bluish granules 	Fig. 4 - Basophil	Secrets: heparin histamine serotonin bradykinin	4%
Monocytes	15-20umkidney shape nucleus	Fig. 6 - Monocyte		5.3%
Lymphocyte	round nucleus: small (5-8um)large (9-15um	Fig. 5 - Lymphocyte	Central cell in immunity	30%



Functions of Leucocytes- WBC Summary

 Defence of the body against infections and foreign invadors

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Neutrophils & monocytes (Blood macrophages)- Phgaocytosist/
+ Immunity
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Macrophage (RES) system ... Phagocytosis + Immunity
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Lymphcytes IMMUNITY

Complete blood count (CBC):

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAE
CBC With Differential/Platelet					
WBC	5.7		x10E3/uL	4.0-10.5	01
RBC	5.27		x10E6/uL	4.10-5.60	01
Hemoglobin	15.4		g/dL	12.5-17.0	01
Hematocrit	44.1		*	36.0-50.0	0.
MCV	84		fL	80-98	0
MCH	29.2		pg	27.0-34.0	0
MCHC	34.9		g/dL	32.0-36.0	0
RDW	13.7		용	11.7-15.0	0
Platelets	268		x10E3/uL	140-415	0
Neutrophils	47		8	40-74	0
Lymphs	46		*	14-46	0
Monocytes	6		*	4-13	0
Eos	1		*	0-7	0
Basos	0		*	0-3	0
Neutrophils (Absolute)	2.6		x10E3/uL	1.8-7.8	0
Lymphs (Absolute)	2.6		x10E3/uL	0.7-4.5	0
Monocytes (Absolute)	0.4		x10E3/uL	0.1-1.0	0
Eos (Absolute)	0.1		x10E3/uL	0.0-0.4	0
Baso (Absolute)	0.0		x10E3/uL	0.0-0.2	0
Immature Granulocytes	0		옿	0-1	0
Immature Grans (Abs)	0.0		x10E3/uL	0.0-0.1	0

WBC Diseases

Leukocytosis:

- -Increase in the total WBC count above the normal
- -Causes: Bacterial infection (tonsillitis, infected wound), appendicitis
- Acute bacterial infection: in neutrophils
- Chronic and viral infection: in lymphocytes

Leukocytosis

(Increased WBC Count)

Causes:

- Physiological
 - -Diurnal: ↓ morning ↑ evening
 - -After physical exercise
 - -Stress or Adrenaline injection
- Disease (pathological)
 - -Bacterial infections (tonsillitis, appendicitis
 - -Worms infestations

WBC Abnormalities

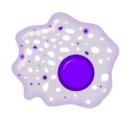
Decrease WBCs "Leukopenia"

- Causes:
 - Malnutrition
 - Typhoid fever
 - Irradiation injury.
 - Drugs depress the bone marrow (chemotherapy).
 - Deficiency of folic acid or Vit B12

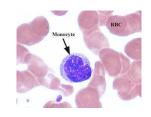
Increase WBCs "Leukaemia"

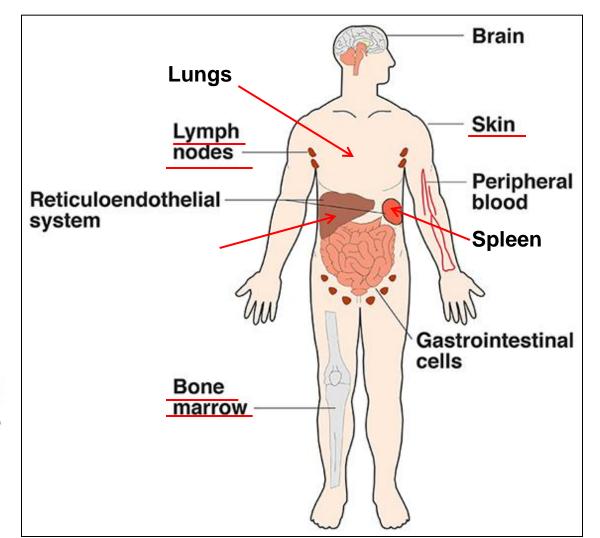
- Total WBC count
 - > 50,000 cells/mm3
- Neoplastic growth of the stem cells in the bone marrow or lymphoid tissues.
 - (Cancerous conditions involving WBCs)

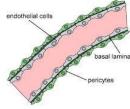


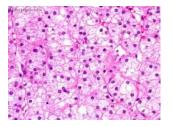


The Macrophage system Reticulo-endothelial System (RES)





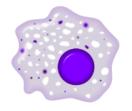


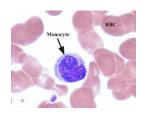


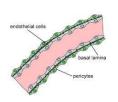
Reticulo-endothelial System (RES)

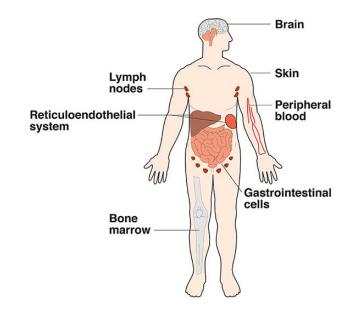
Definition:

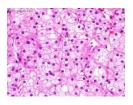
- Reticuloendothelial system is a network of cells located throughout the body.
- This network is an important part of the immune system
- This system is made up of highly phagocytic cells
- RES is widely distributed in the body.
- o These cells include:







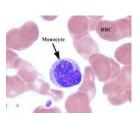


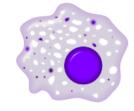


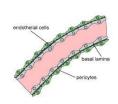
Reticulo-endothelial System (RES)

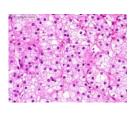
Cells of the RES:

- <u>Monocytes</u> (blood macrophages)
- <u>Macrophages</u> (Mobile and fixed in tissue)
- Endothelial cells in bone marrow, lymph nodes and spleen
- Reticular cells of lymph nodes spleen & bone marrow.



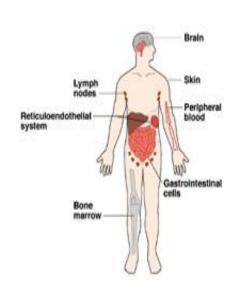






Cells of the RES - Distribution:

- Tissue Macrophages in skin
 SC tissues (histocytes)
- Tisssue Macrophages of lymph nodes
- Tissue macrophages in lungs
- Macrphages (kupffer cells) in the liver
- Macrphages in the spleen and bone marrow



Functions of Reticuloendothelial system

- 1. Phagocytosis:
 - Bacterial, dead cells, foreign particles
- 2. Breakdown of Hb
- 3. Storage of iron
- 4. Immune function:
 processing antigen and antibodies
 production (indirect)







THANK YOU