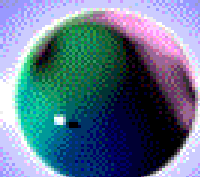


بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ





بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

”قالوا سبحانك لا علم لنا إلا ما

علمتنا إنك أنت العليم الحكيم“

صدق الله العظيم



3 - Erythropoiesis



Objectives;

Intended learning outcomes (ILOs)

After reviewing the PowerPoint presentation and the associated learning resources, the student should be able to:

- Describe the normal structure of Hemoglobin.
- Recognize the abnormal types of Hemoglobin.
- Know the definition, sites and stages of erythropoiesis.
- Enumerate the factors affecting erythropoiesis.
- Summarize the role of hypoxia & erythropoietin hormone in the process of erythropoiesis.
- Discuss the importance of vitamin B12 & folic acid as maturation factors for the RBCs.
- Discuss the mechanism of Vitamin B12 & folic acid absorption.

- Globular protein
- Heme + Globin

Hemoglobin (Hb)

Accounts for > 95% of protein in RBC

Main functions: transportation of respiratory gases. It carries ~ 98.5% of all O₂ ??

Hb Content of Blood

Concentration of Hb in the Blood

Measured as g/dl (grams per deciliter, or per 100 ml)

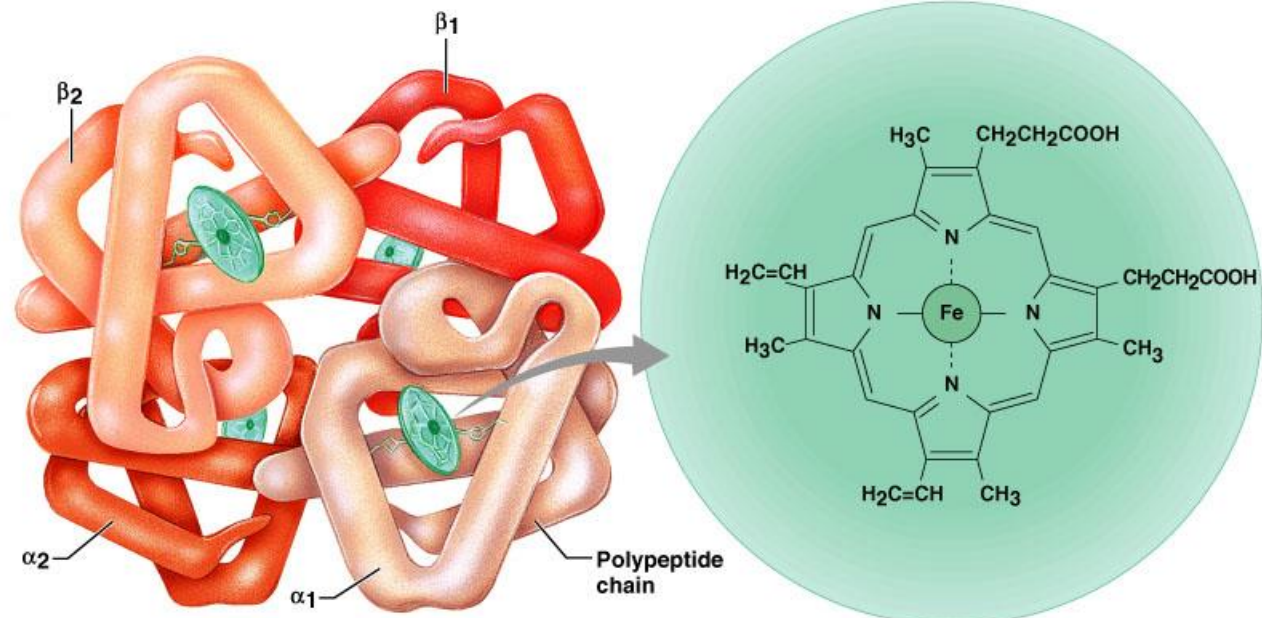
Average values:

Male: 13.5 – 17.5 g/dl (16 g/dl)

Female: 12.0 – 15.5 g/dl (14 g/dl)

Infants: 14.0 – 19.0 g/dl

N.B: Concentration of plasma proteins = 7 g/dl



(a) Hemoglobin

(b) Iron-containing heme group

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- ❑ Each gram of pure hemoglobin is capable of combining with 1.34 ml of oxygen.
- ❑ Therefore, in a normal man a maximum of about 20 milliliters of oxygen can be carried in combination with hemoglobin in each 100 milliliters of blood, and in a normal woman 19 milliliters of oxygen can be carried.

Types of Hemoglobin

Hb – A = Adult hemoglobin (98%)

2 alpha + 2 beta chains.

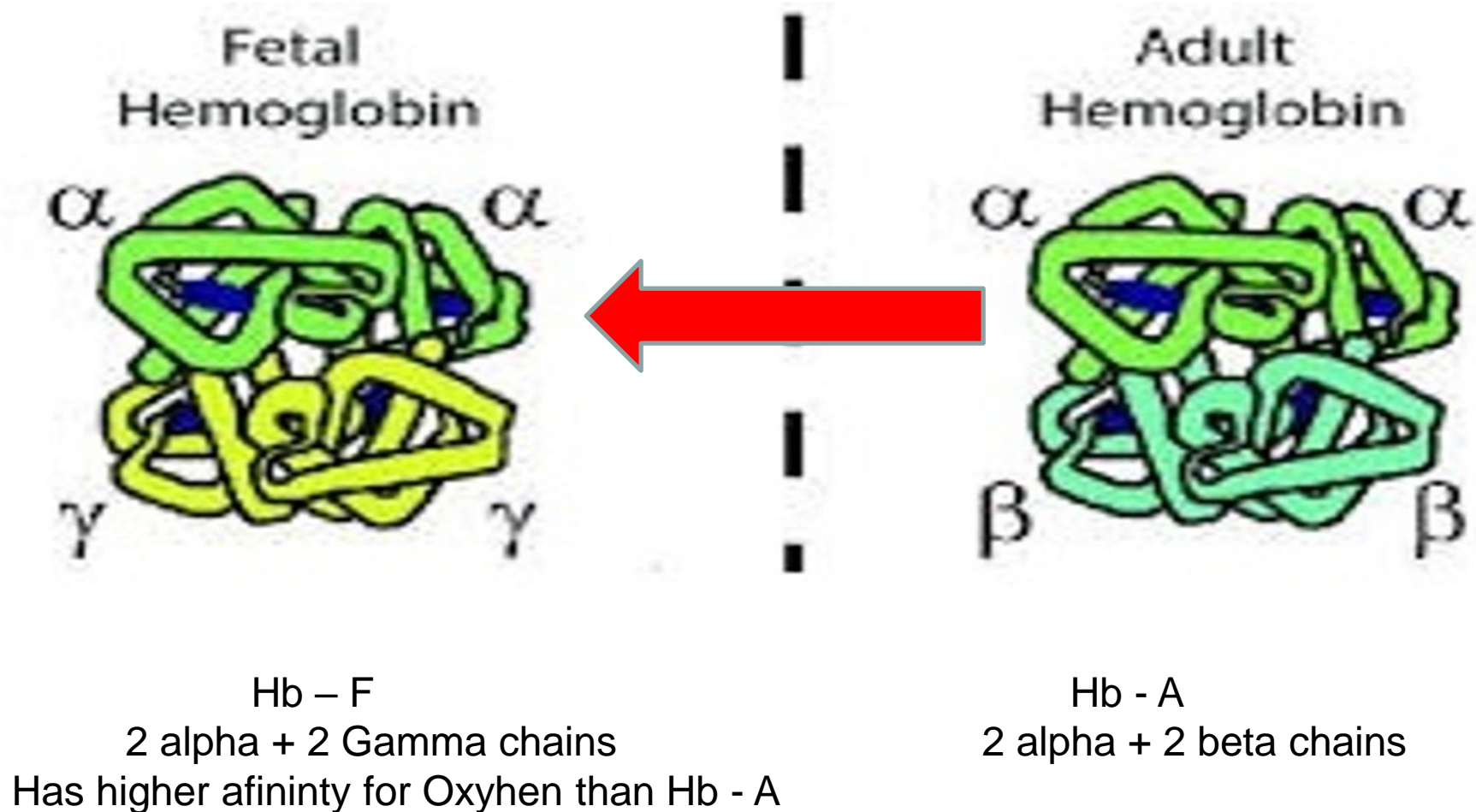
Hb – F = Fetal hemoglobin (Hemoglobin of intrauterine life)

2 alpha + 2 gamma chains.

Hb – A₂ (2%)

2 alpha + 2 delta chains.

Types of Hemoglobin



Abnormal types of Hemoglobin

Several types.

Examples:

Thalassemia: Decreased synthesis of the globin polypeptide chains.

Sickle cell anemia: Abnormal sequence of the amino acids in the globin polypeptide chains.



RBCs

Erythropoiesis

Definition

Sites

Stages

Factors

Definition: Formation of new RBCs.

Sites: Bone marrow.

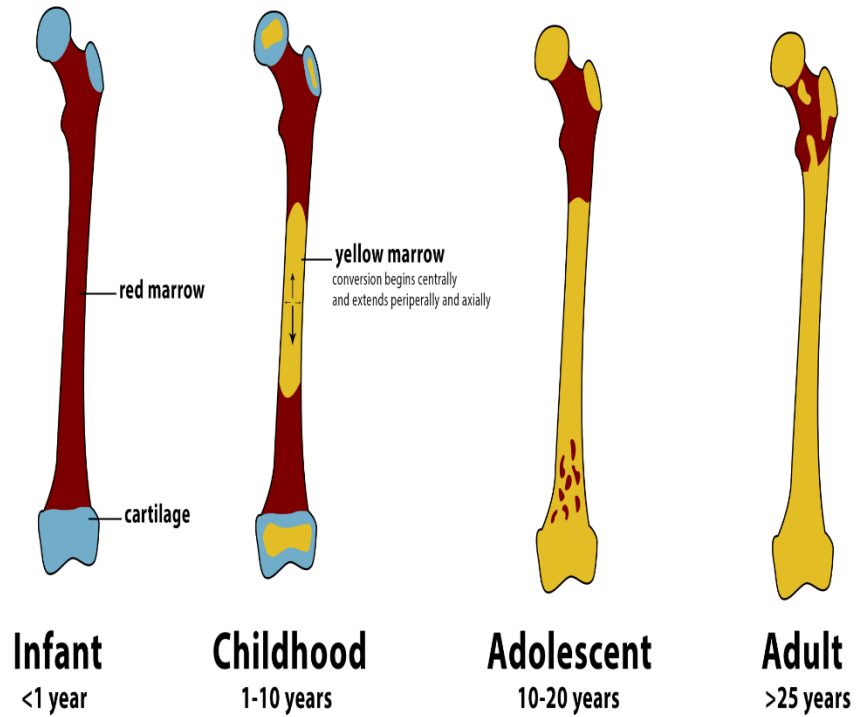
During intrauterine life: Liver – Spleen – Lymph nodes.

Before the age of 20 years: Bone marrow of all bones.

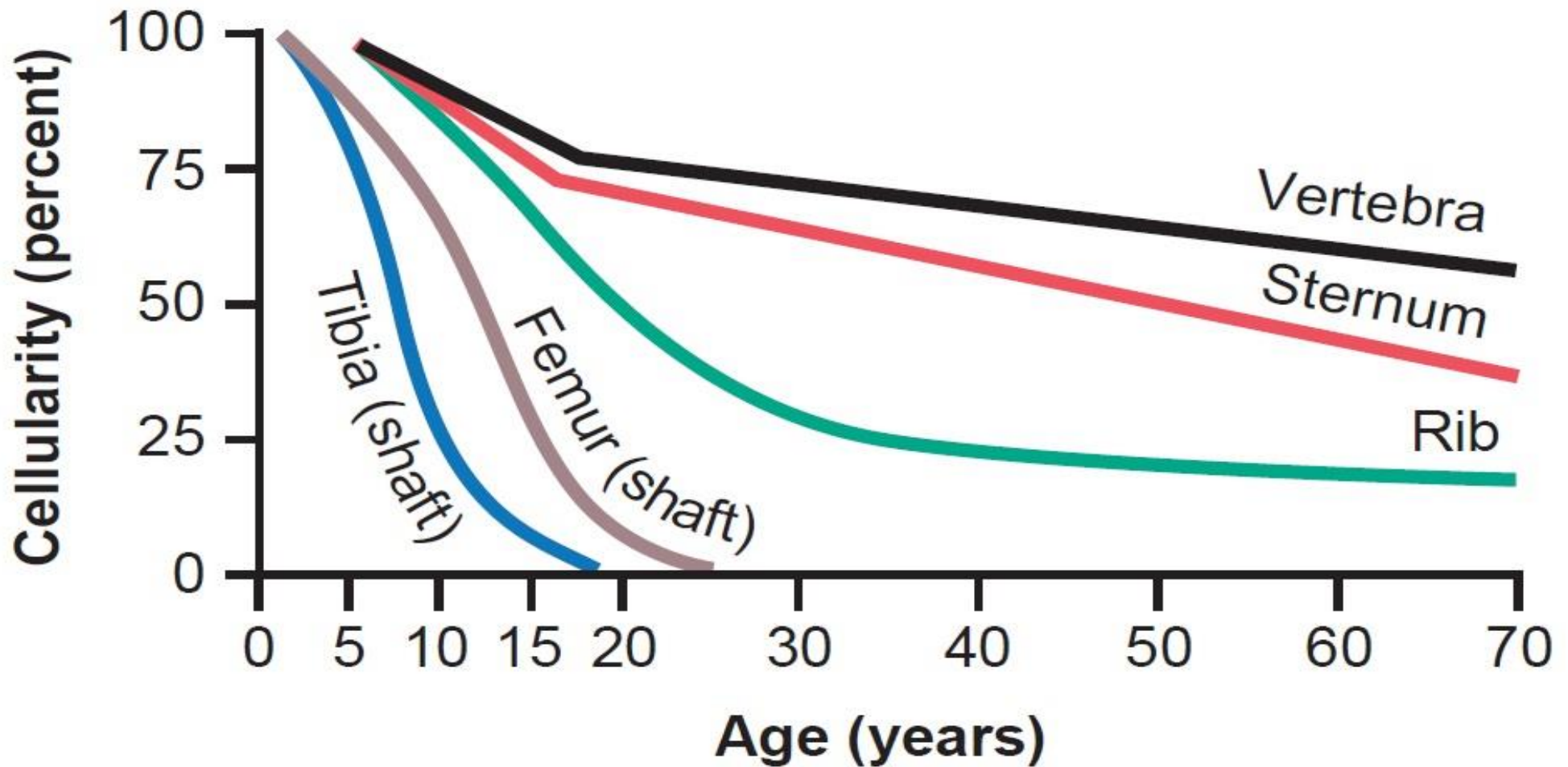
After the age of 20 years: Bone marrow of membranous bones only.

RBCs Erythropoiesis Sites

Normal bone marrow conversion



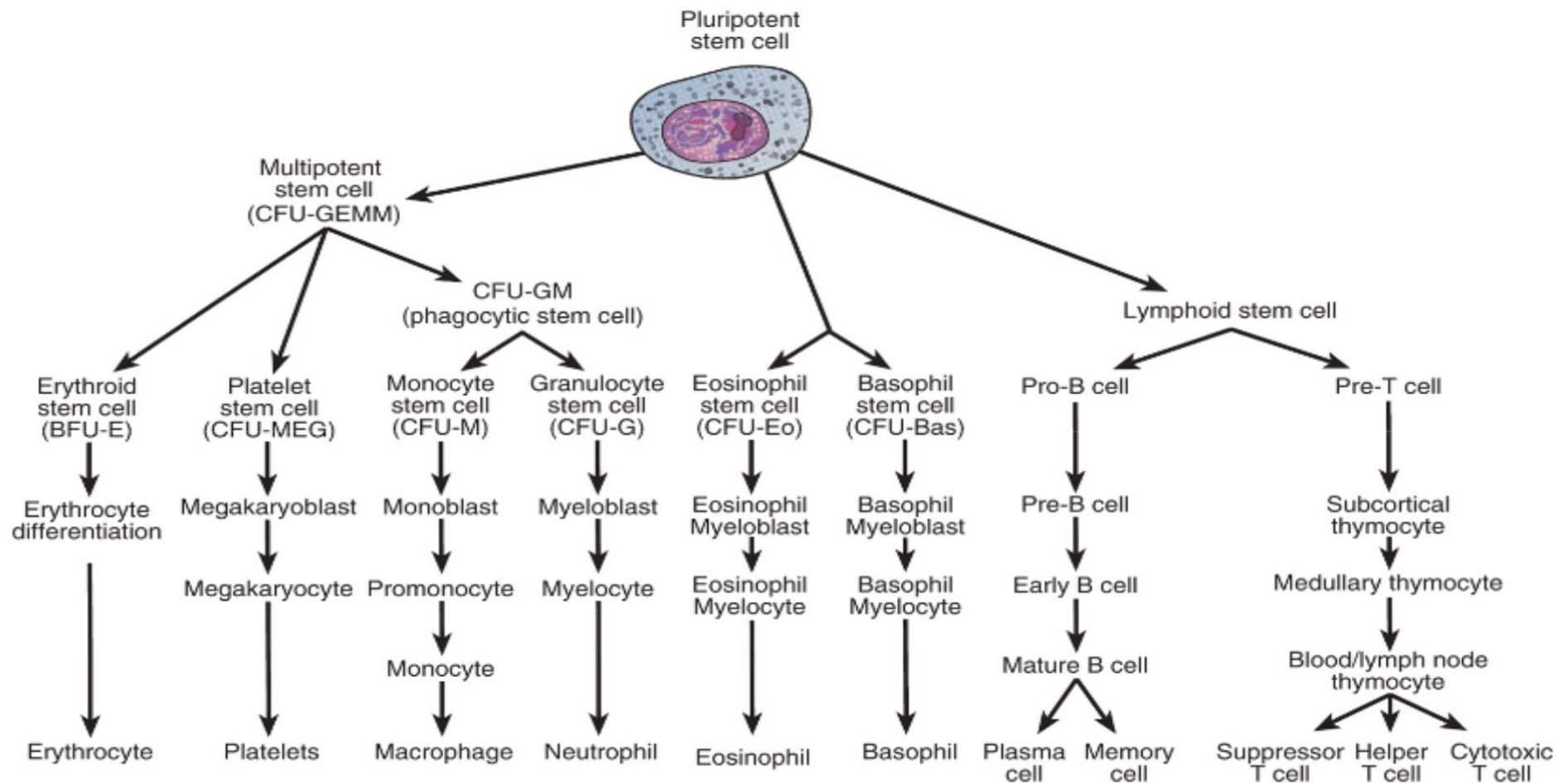
RBCs Erythropoiesis Sites



RBCs

Erythropoiesis

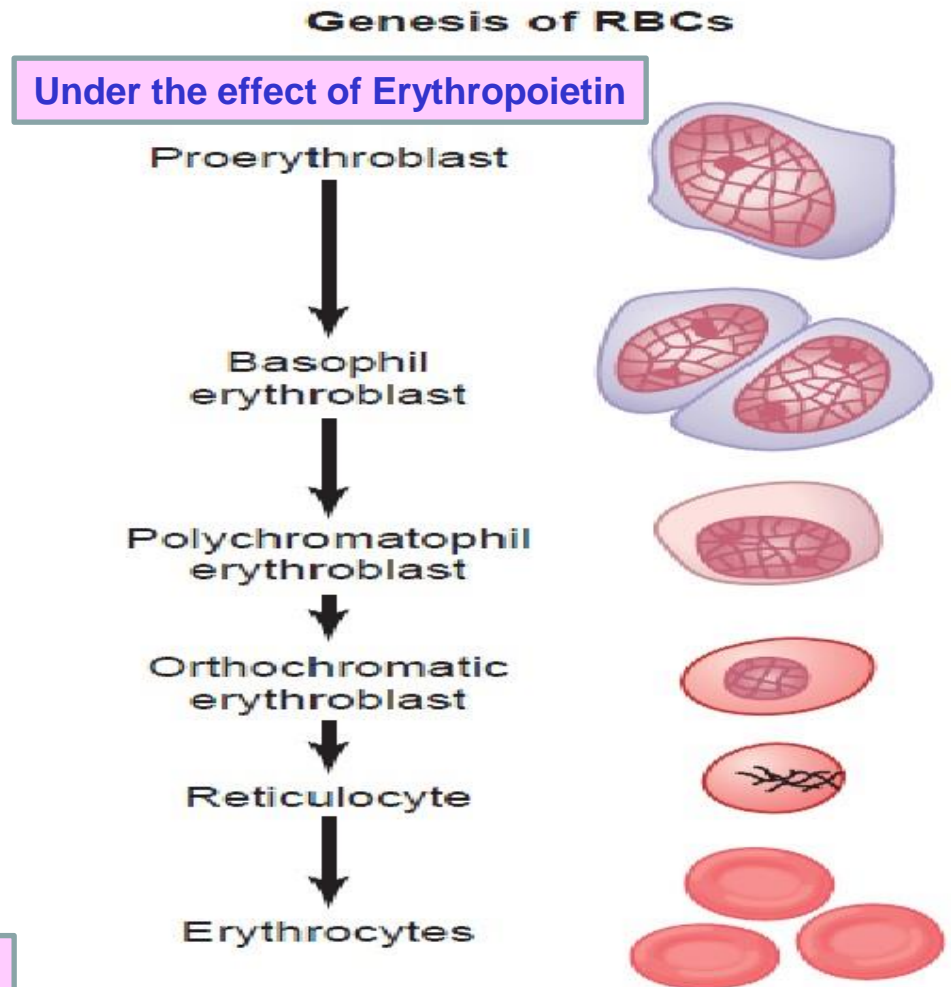
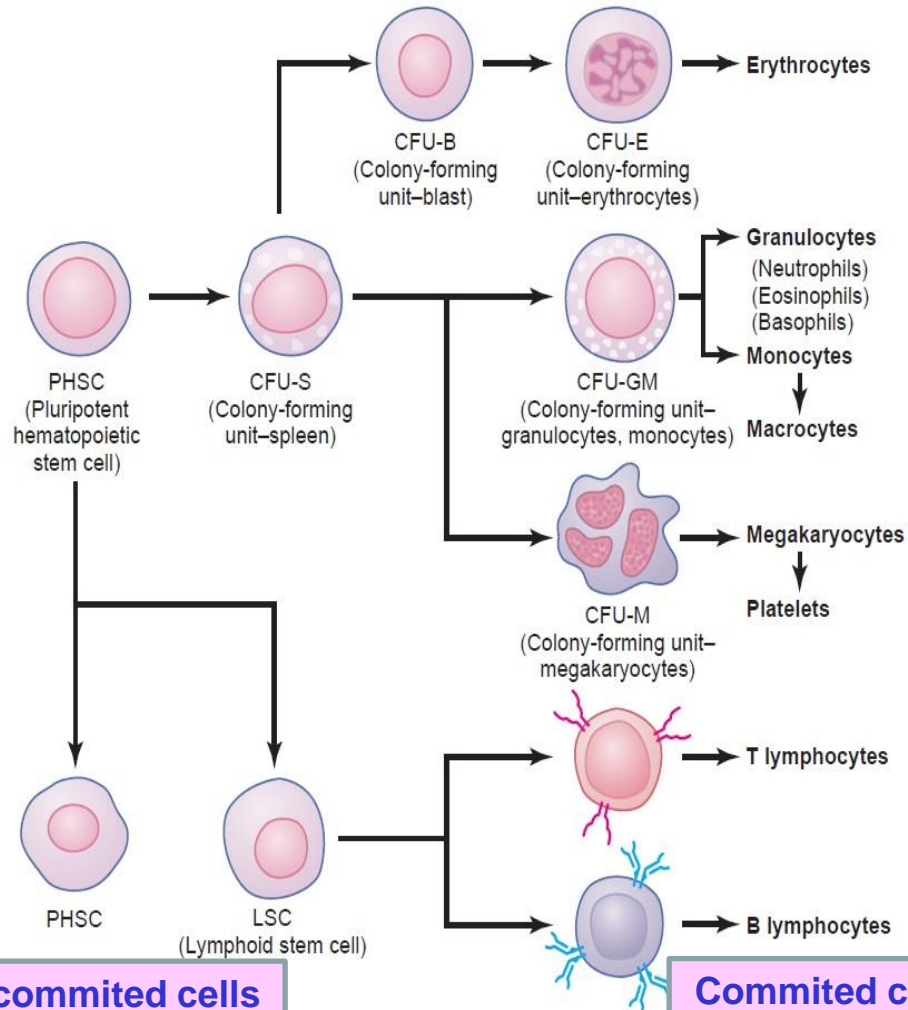
Stages



RBCs

Erythropoiesis

Stages



RBCs

Erythropoiesis

Factors

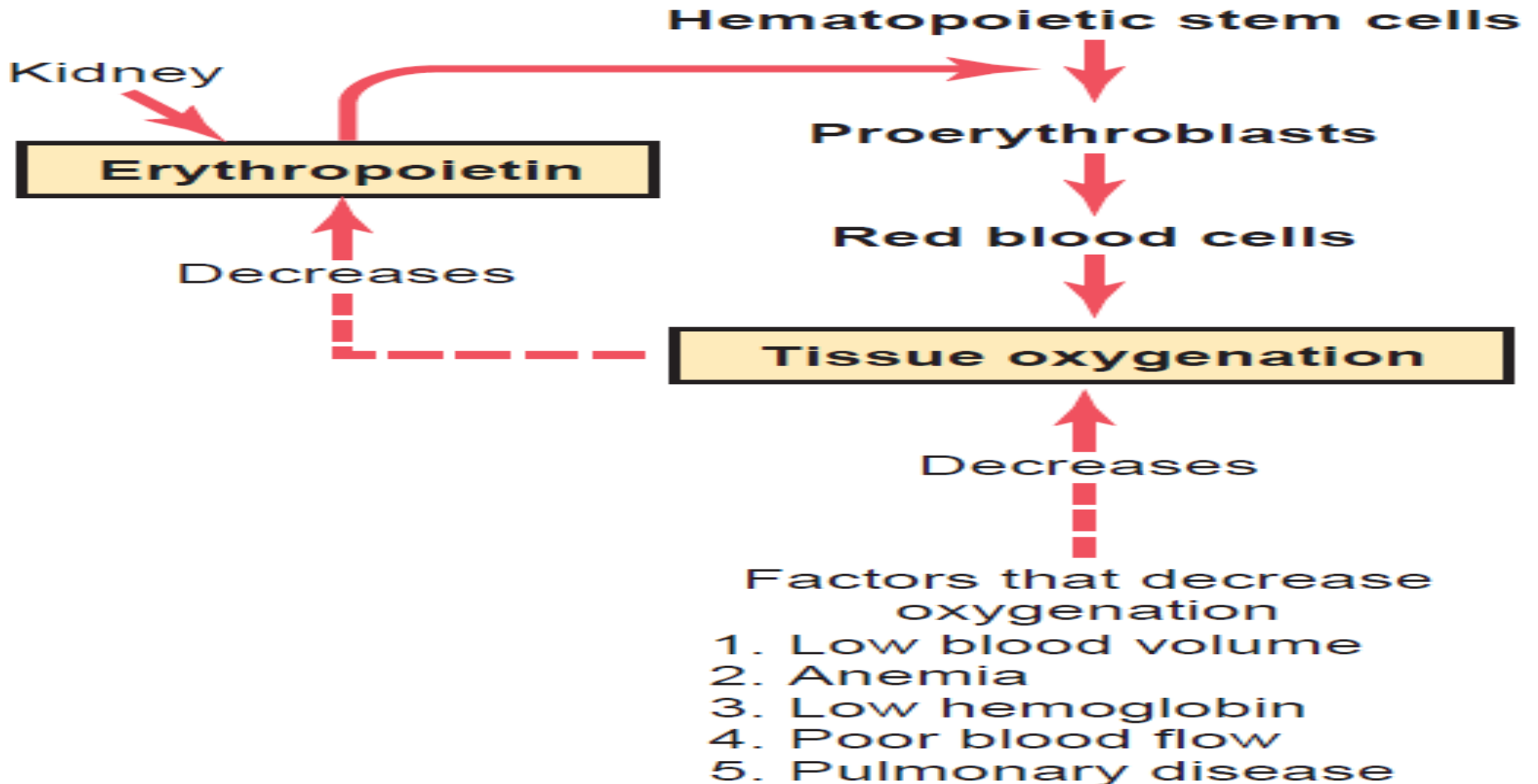
Oxygen supply to the tissues (Hypoxia).

Dietary requirements (**Vitamins** – **Iron** – Copper – Cobalt – Zinc – Other elements).

Healthy organs (Bone marrow – Liver – Kidney).

Hormones (Erythropoietin – Androgens – Thyroxin – Cortisol)

RBCs Erythropoiesis Factors Oxygen supply to the tissues (Hypoxia)



Causes of decreased Oxygen supply to the tissues (Hypoxia)

High Altitudes.

Cardiac or respiratory diseases.

Hematological disorders.

Relative deficiency (increased demands as in athletes).

Stagnation of blood flow (Thrombosis or Embolism).

Defective tissue utilization (e.g. Drugs & Toxins).

RBCs – Erythropoiesis -Factors

Oxygen supply to the tissues (Hypoxia) = Effect of erythropoietin

importance

Tissue oxygenation is the most essential regulator of RBCs production. The mechanism is via the stimulatory effect of hypoxia on the release of erythropoietin hormone.

Nature

Glycoprotein with a molecular weight = 34,000

Site of release

Mainly from the kidney (90%).
Small amount from the liver.

Site of action

Bone marrow.

Action

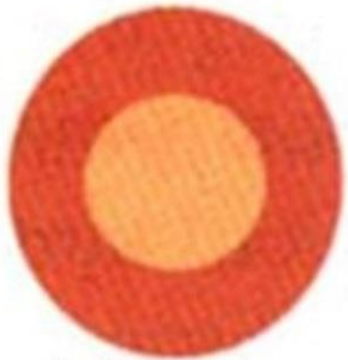
Stimulate the growth and differentiation of early hematopoietic stem cells

Clinical correlation

In severe renal diseases, the person becomes invariably very anemic as the liver cannot compensate for the role of kidneys in the release of erythropoietin.

Anemia of renal disease is treated with erythropoietin

Normocytic
normochromic



Other causes
Aplastic
Hemolytic
Acute hge

- MCV
- MCH

Microcytic
hypochromic



Iron deficiency
anemia

↓ MCV
↓ MCH

Macrocytic
hyperchromic



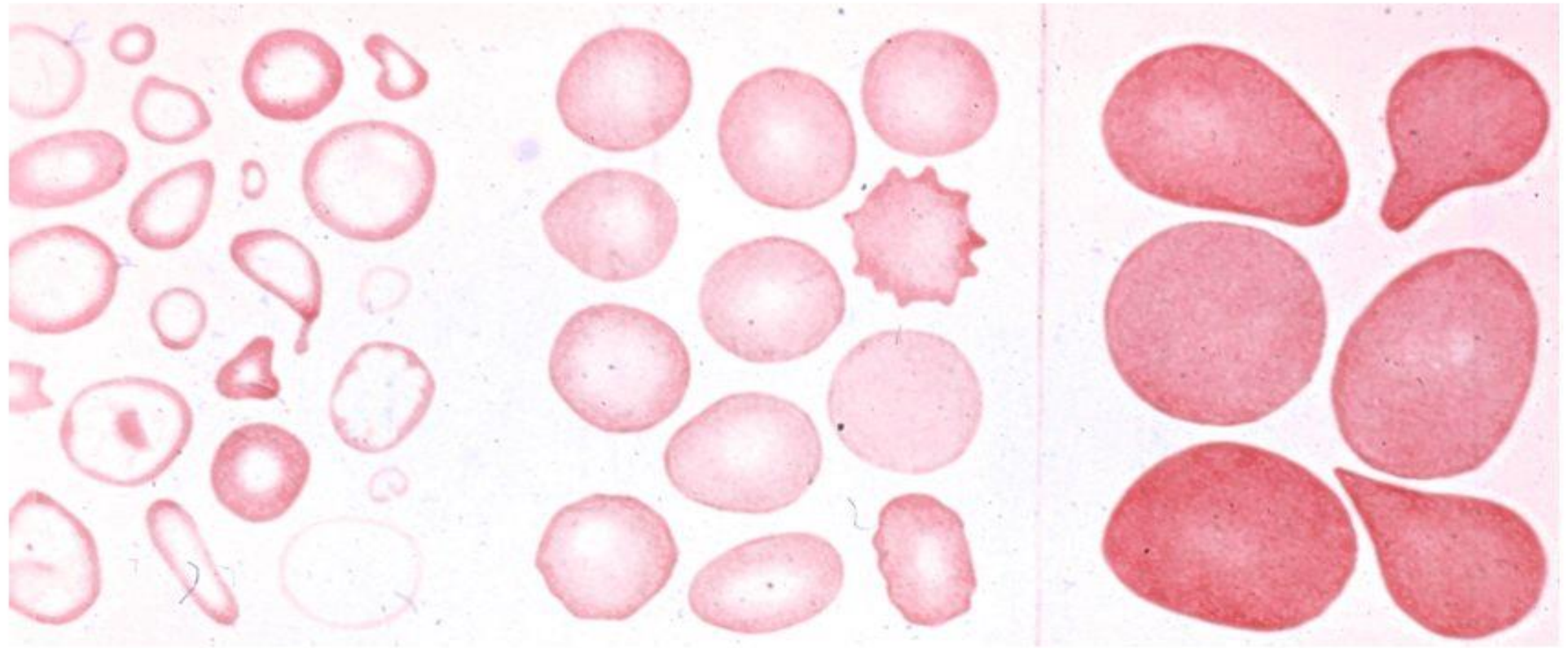
Folate or
vitamin B12
deficiency

↑ MCV
↑ MCHC

Hypochromic/Microcytic

Normochromic/Normocytic

Macrocytic(/Normochromic)



Vitamin B12 and folic acid (Maturation factors)

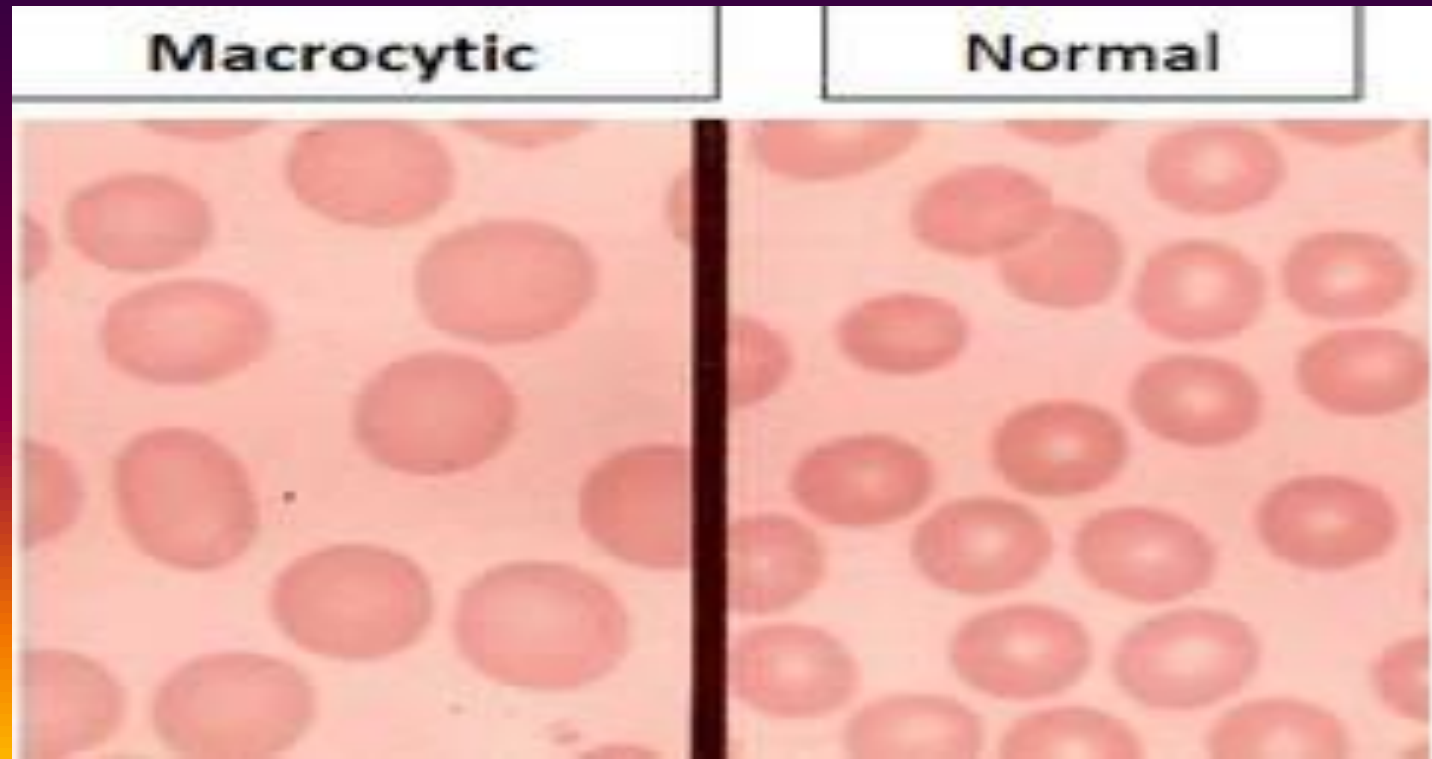
importance

Maturation factors for the RBCs.
Essential for DNA synthesis and maturation.

Manifestations of Deficiency

Macrocytic (megaloblastic anemia).
Abnormal large & fragile cells.

Blood film



Vitamin B12

Origin

Animal sources only (meat, liver,,, etc)

Storage

In the liver in large amounts, enough for around 3 -4 years

Causes of Deficiency

- 1 – Defective absorption (pernicious anemia).
- 2 – Defective storage (liver diseases).
- 3 – dietary deficiency (very rare).

Absorption

Intrinsic factor is secreted from the stomach to bind vitamin B12 and helps its absorption. Absorption occurs in the terminal ileum.

So macrocytic anemia occurs in:

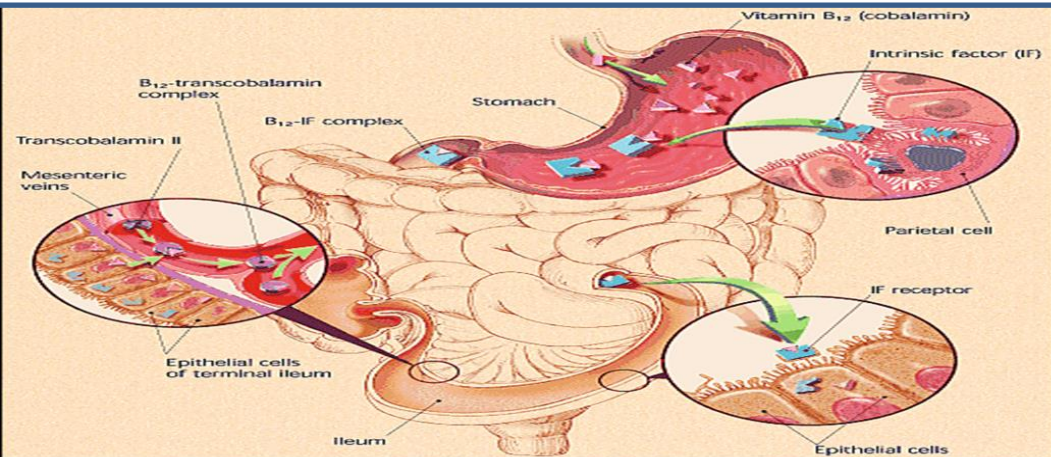
- 1 – Distal small intestinal diseases.
- 2 – Autoimmune deficiency of intrinsic factor (Pernicious anemia)

Small intestine Parts

Duodenum

Jejunum

Ileum



Folic acid

Origin

Animal and plant sources (meat, liver, fruits, vegetables). Easily destroyed by cooking.

Storage

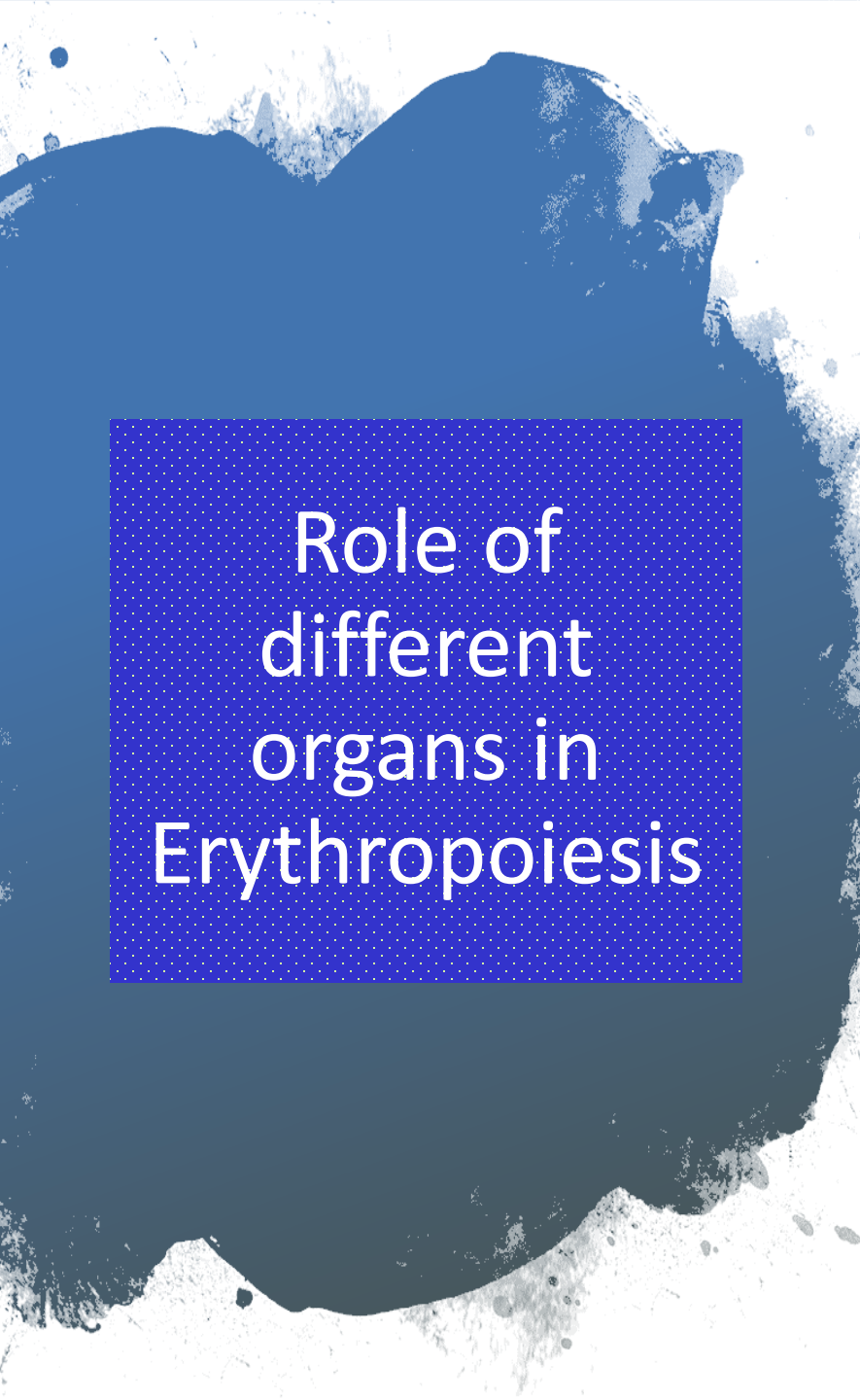
In the liver in very small amounts.

Causes of Deficiency

- 1 – dietary deficiency (Important cause).
- 2 – Defective absorption.
- 2 – Defective storage (liver diseases).

Absorption

Mainly in the jejunum.



Role of
different
organs in
Erythropoiesis

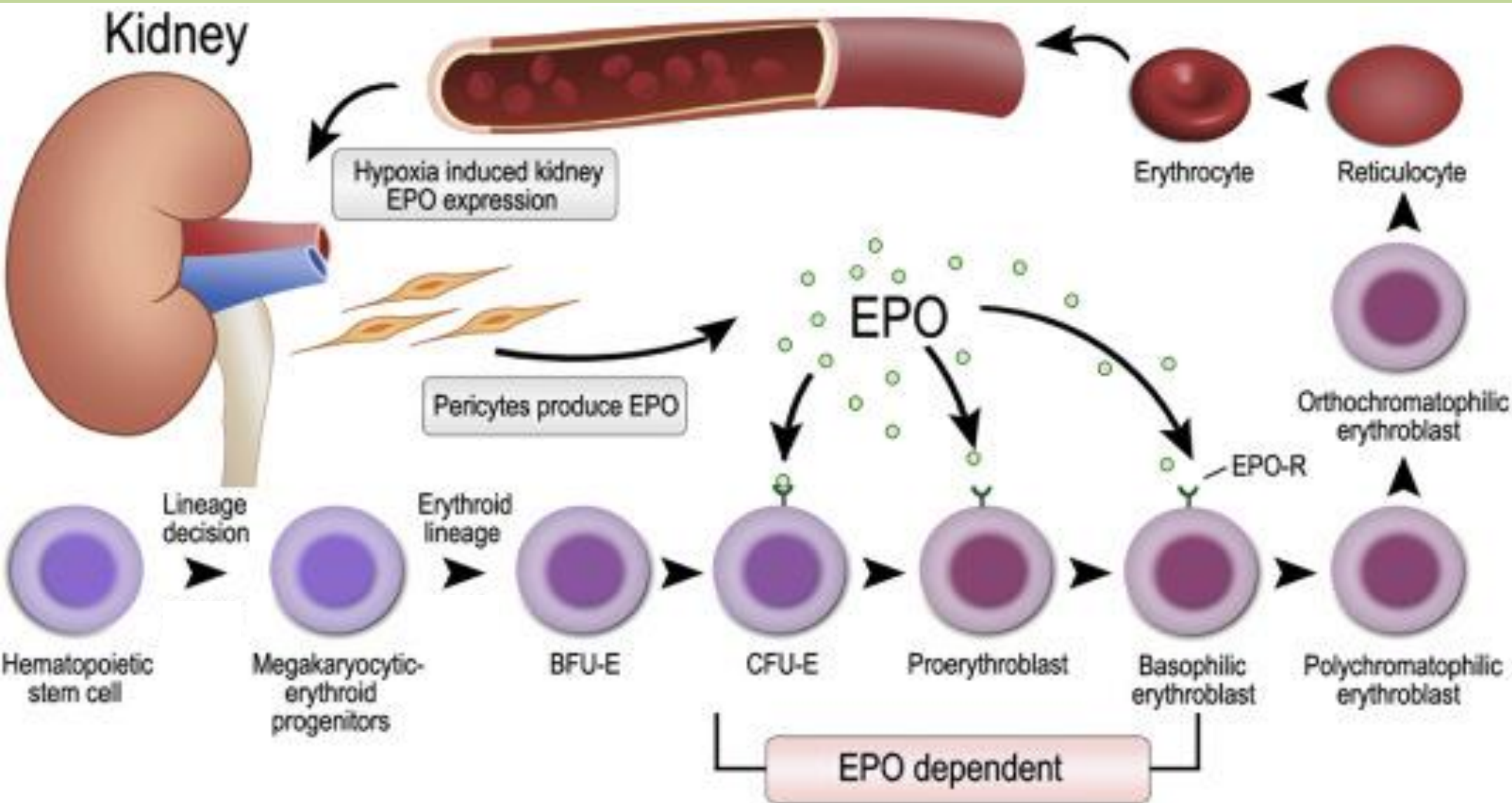
Role of Kidney

Role of bone marrow

Role of liver

Role of different organs in Erythropoiesis

Role of Kidney (Release of erythropoietin)



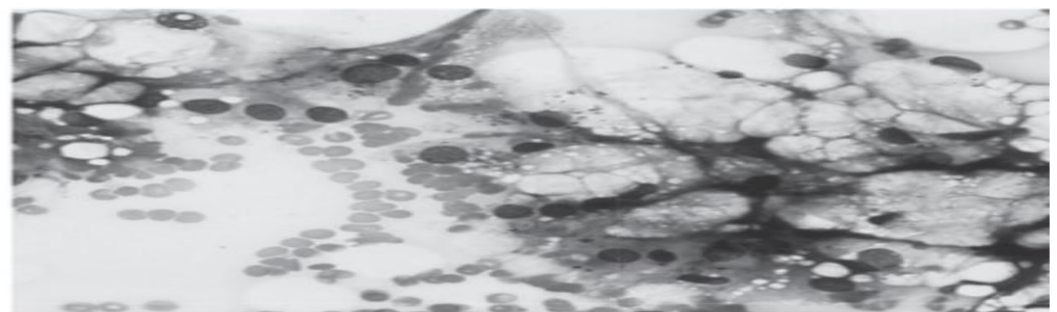
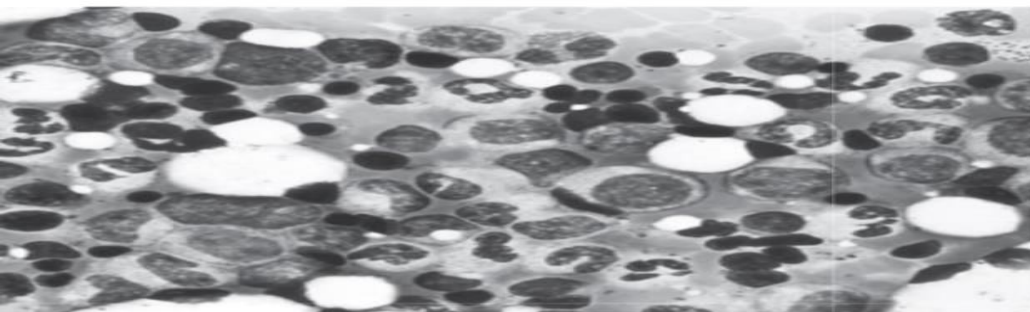
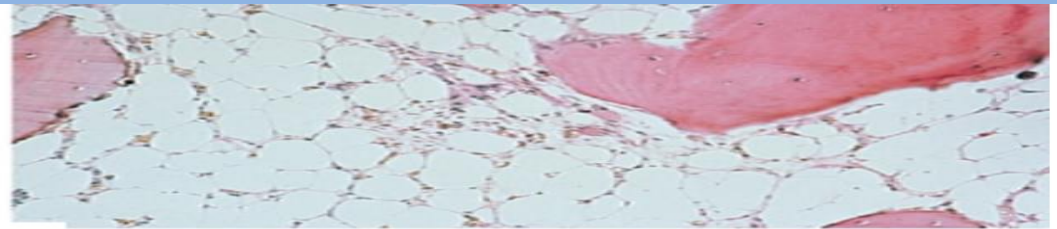
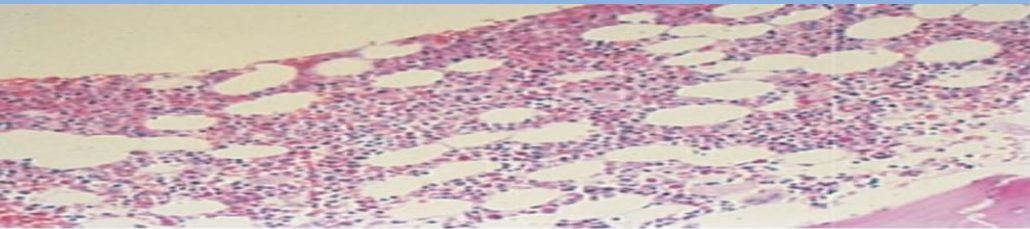
Role of different organs in Erythropoiesis

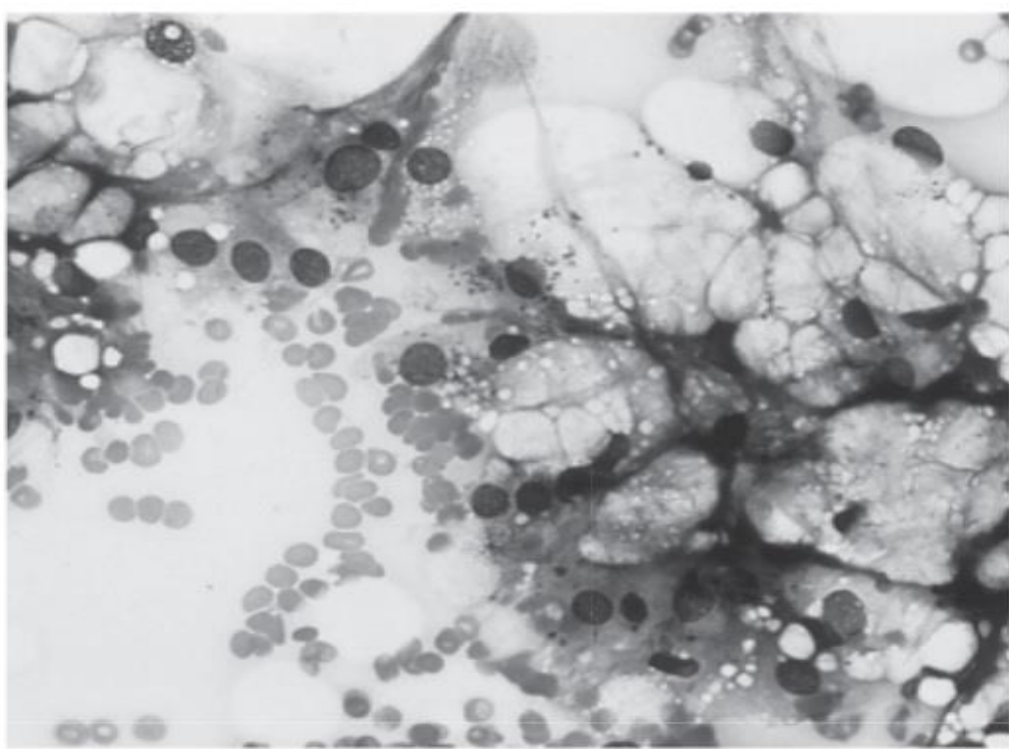
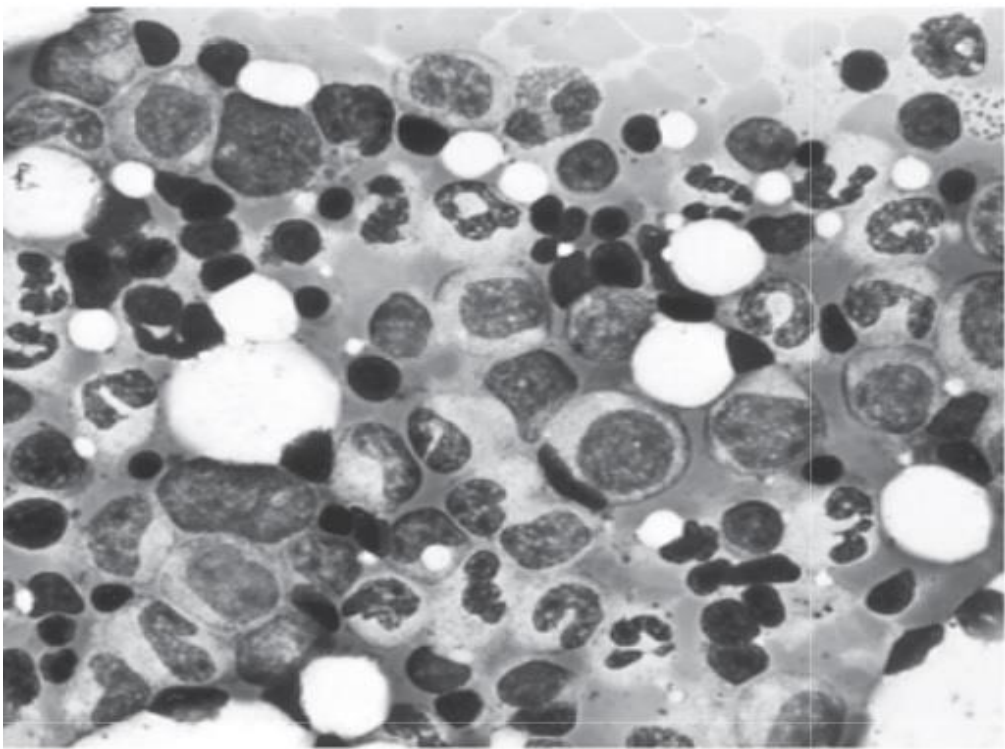
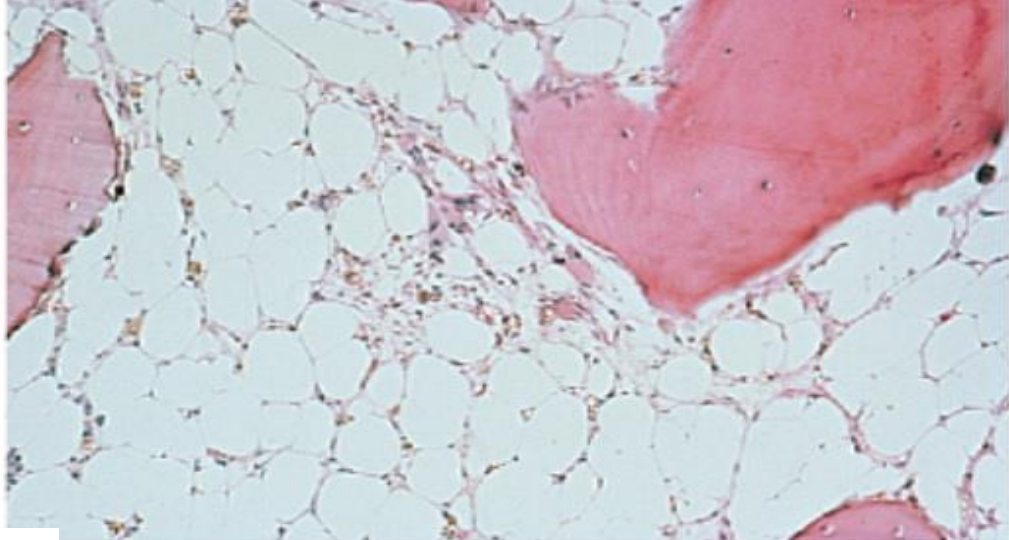
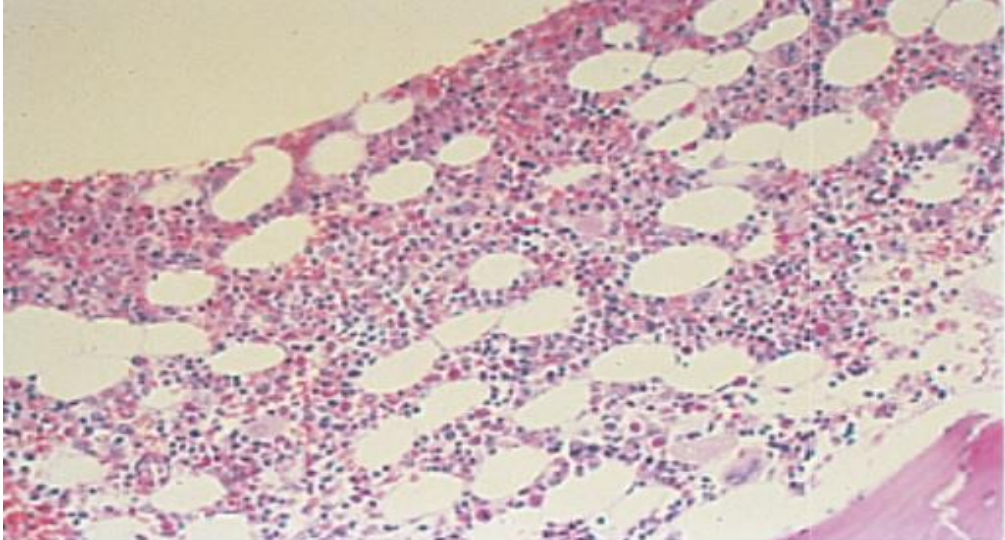
Role of Bone marrow (Site of formation)

Failure of the bone marrow to produce RBCs is known as Aplastic anemia.

Commonly associated with pancytopenia (decreased production of all types of blood cells).

Treatment depends on the cause.





Role of different organs in Erythropoiesis

Role of liver (Site of storage or synthesis of different substances)

Storage of	Synthesis of
Vitamin B12	Globin (protein part of the hemoglobin)
Ferritin (Storage form of Iron)	15% of Erythropoietin

Thank You