



The spleen is connected to the:

greater curvature of the stomach by the **gastrosplenic ligament**, which contains the <u>short gastric</u> <u>gastroomental vessels</u>

left kidney by the **splenorenal ligament**, which contains the <u>splenic vessels</u>

Both these ligaments are parts of *the greater omentum*.



Splenic surfaces:

Lateral (diaphragmatic) Medial (renal / colic / gastric) Upper pole (postro superior) Lower pole (antro inferior)

The spleen is surrounded by visceral peritoneum except in the area of the hilum on the medial surface of the spleen

The splenic hilum is the entry point for the splenic vessels, and occasionally the *tail of the pancreas* reaches this area.

The arterial supply to the spleen is the *splenic artery from the celiac trunk.*





Splenic vesseles

gastrosplenic ligament, which contains the *short gastric / gastroomental vessels*

left kidney by the *splenorenal ligament*, which contains the *splenic vessels*



Fig. 4.106 Arterial supply to the spleen.

Embryology

Spleen

- The **spleen** develops as a circumscribed condensation of *mesenchymal* cells between the layers of the *dorsal mesentery*.
- Mesenchymal cells in the developing spleen differentiate to form the capsule, trabeculae, and reticular framework.
- Development involves establishment of mesenchymal trabeculae within a blood vascular network consisting of a large number of endothelial sinuses.
- > The splenic artery supplies the sinuses.
- The spleen initially consists of *several mesenchymal masses* that later *incompletely fuse*.



Figure 15.10 A. The positions of the spleen, stomach, and pancreas at the end of the fifth week. Note the position of the spleen and pancreas in the dorsal mesogastrium. B. Position of spleen and stomach at the 11th week. Note formation of the omental bursa (lesser peritoneal sac).





Spleen Histology

Blood filtration Secondary lymphatic organ Capsule: Connective tissue + <u>smooth muscle</u> Trabeculae Delete old RBC & platelets reticular tissue (reticular cell + reticular fiber) Lymphocyte Macrophage APCs

White pulp (20%) = lymphatic nodule + PALS Red pulp = sinusoid + splenic cord











Red pulp

Splenic Sinusoid: Endothelial cells (stave cell) Reticular fiber(wooden barrel) Fenestrate basal lamina

splenic cord (cord of Billroth) :
Reticular cell & fiber
Lymphocyte
Macrophage
Blood cells

Penicillar arteriole
Capillary(sheathed): APC
(macrophage + reticular cell & fiber)



The branching of each penicillar artery gives rise to capillaries surrounded by macrophages and reticular cells. Many macrophages contain phagocytosed red blood cells.

Macrophages derive from monocytes entering the capillary sheath from the blood and differentiating into macrophages.

The major function of the macrophage sheath is to remove aged cells and particles from the blood.

Red pulp

Splenic Sinusoid:

Endothelial cells (stave cell) Reticular fiber(wooden barrel) Fenestrate basal lamina



Diagram showing these components of *splenic sinuses* schematically, with the structures resembling a loosely organized *wooden barrel*.

In the open circulation mode of blood flow, blood cells dumped into the cords of the red pulp

move under pressure or by their own activity through the spaces between stave cells

reentering the vasculature and soon leaving the spleen via *the splenic vein*.

Cells that cannot squeeze between the **stave cells (Special elongated endothelial cells)**, mainly effete erythrocytes, are removed by macrophages.





Vascularization of the spleen



The white pulp consists of four components: (1) the central arteriole; (2) the PALS; (3) the corona formed by B cells and antigen-presenting cells; and (4) the germinal center.

The white pulp has the structural characteristics of an immune component (B and T cells and antigen-presenting cells).

the red pulp (open circulation).

7 The red pulp is formed by (1) the penicillar arteriole; (2) the macrophage-sheathed capillaries; (3) the splenic sinusoids; (4) reticular cells forming the stroma of the splenic cords (also known as cords of Billroth); and (5) all cell types of the circulating blood.











Spleen sinus - ME

Structure and function of splenic sinusoids.

The endothelial stave cells that line venous sinuses in red pulp are long cells oriented lengthwise along the sinuses. The elongated shape of the cells is difficult to appreciate from light micrographs (see Figure 14–26). **(a):** SEM clearly shows the parallel alignment of the stave cells (S), as well as many macrophages (M) in the surrounding red pulp (R). X500. **b):** Silver-stained sections of spleen show black reticular fibers surrounding the sinuses, oriented 90 degrees to the long axis of the sinuses (S). These fibers appear similar to those in the surrounding splenic cords (C). The basement membrane of the stave cells is incomplete and open to the passage of cells. X400. Silver.







Tonsils

Anatomy

Collections of lymphoid tissue in the mucosa of the pharynx surrounding the openings of the nasal and oral cavities are part of the body's defense system.

The largest of these collections form distinct masses (tonsils).



Tonsils occur mainly in three areas:

• *The pharyngeal tonsil,* known a s adenoids when enlarged, is in the midline on the roof of the nasopharynx.

• *The palatine tonsils* are on each side of the oropharynx between the palatoglossal and palatopharyngeal arches just posterior to the oropharyngeal isthmus. (The palatine tonsils are visible through the open mouth of a patient when the tongue is depressed.)

• *The lingual tonsils* refer collectively to numerous lymphoid nodules on the posterior one-third of the tongue.

Small lymphoid nodules also occur in the pharyngotympanic tube near its opening into the nasopharynx, and on the upper surface of the soft palate







WALDEYER'S RING An interrupted circle of protective lymphoid tissue at the upper ends of the respiratory and alimentary tracts Upper midline Pharyngeal in nasopharynx tonsil (adenoid) Around openings Tubal Tubal of auditory tube tonsil tonsil Either side of Palatine Palatine oropharynx tonsil tonsil Lingual tonsil Under mucosa of posterior third of tongue

Embryology

palatine tonsil

> The epithelial lining of the second pharyngeal pouch proliferates and forms buds that penetrate into the surrounding mesenchyme

> The buds are secondarily invaded by mesodermal tissue, forming the primordium of the **palatine tonsils**

During the third and fifth months, the tonsil is infiltrated by lymphatic tissue

> Part of the pouch remains and is found in the adult as the **tonsillar fossa**.



Histology

MALT = *mucous associated lymphocyte tissue*

Lymphocyte (B- cell) / T- helper CD4+ Plasma cell APC

Type MALT:

Diffuse lymphoid tissue Lymphoid nodule

Lymphoid nodule in:

Tonsils Peyer patches appendix



Palatine tonsils:

Squamous epithelium Tonsillar crypts (10-20) Incomplete capsule Lymphatic nodule













C. Mucosa-associated lymphoid tissue

Cells of the Immune System

Table 14–3. Approximate percentages of B and T cells in lymphoid organs.

Lymphoid Organ	T lymphocytes (%)	B lymphocytes (%)
Thymus	100	0
Bone marrow	10	90
Spleen	45	55
Lymph nodes	60	40
Blood	70	30