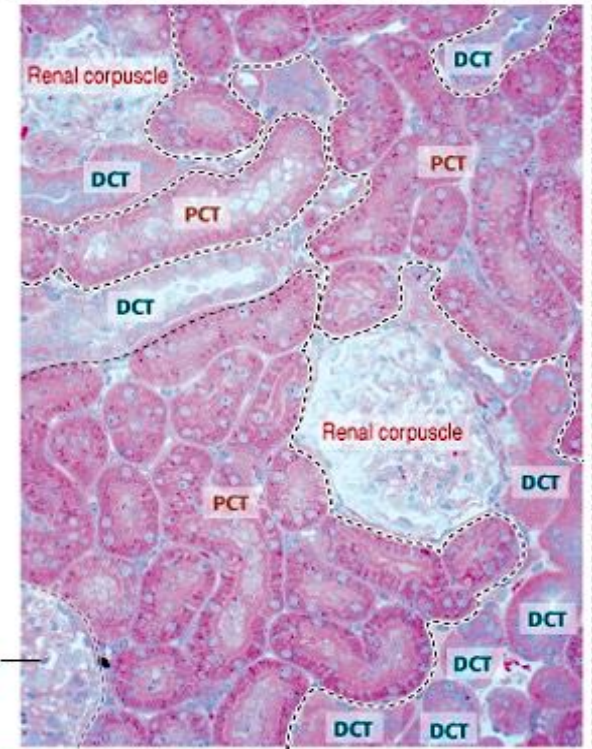
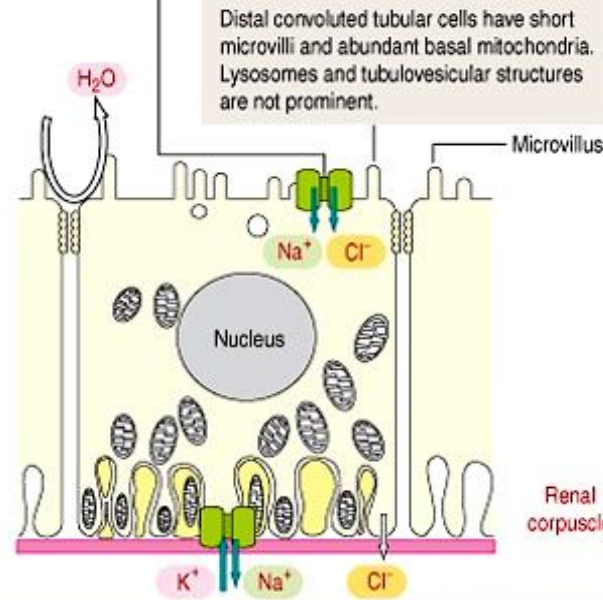


# Distal convoluted tubule (DCT)

Simple Short cuboid epithelium  
 Large lumen  
 Short microvillus  
 No brush border  
 Base: basal ridge + mitochondria  
 Macula densa

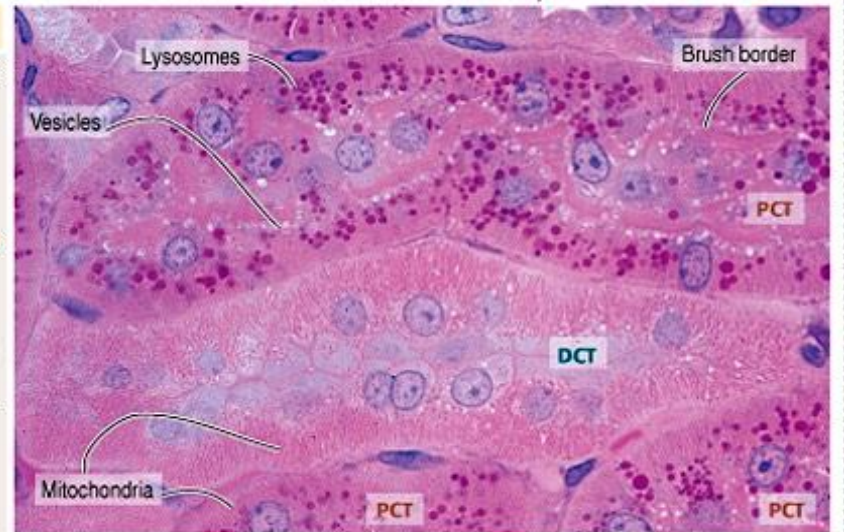
A **symport mechanism** (coupled transport of two or more solutes in the same direction) enables the reabsorption of NaCl. The DCT is impermeable to water.



## Identification parameters of PCTs and DCTs

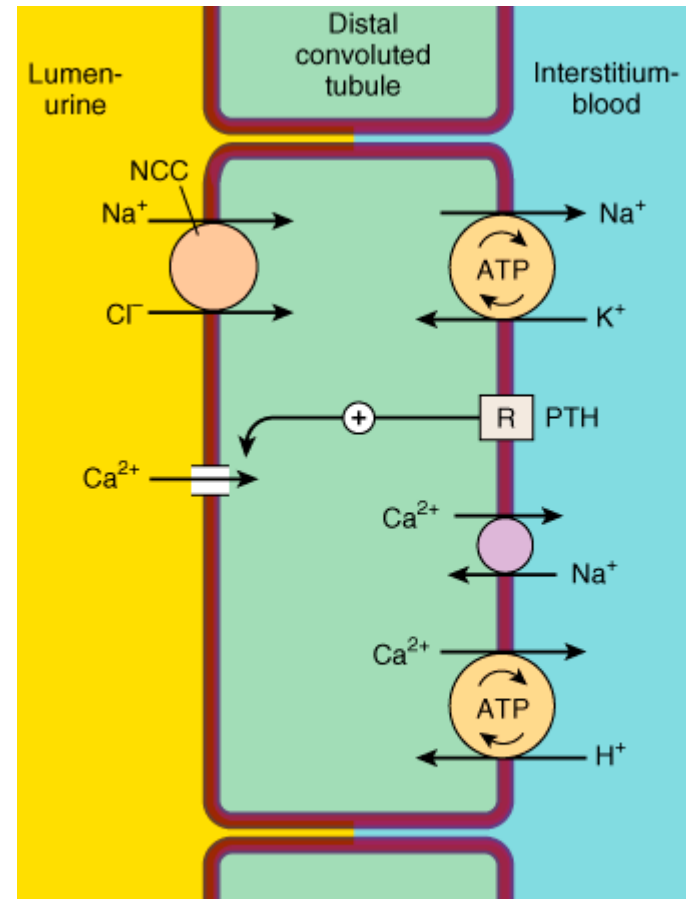
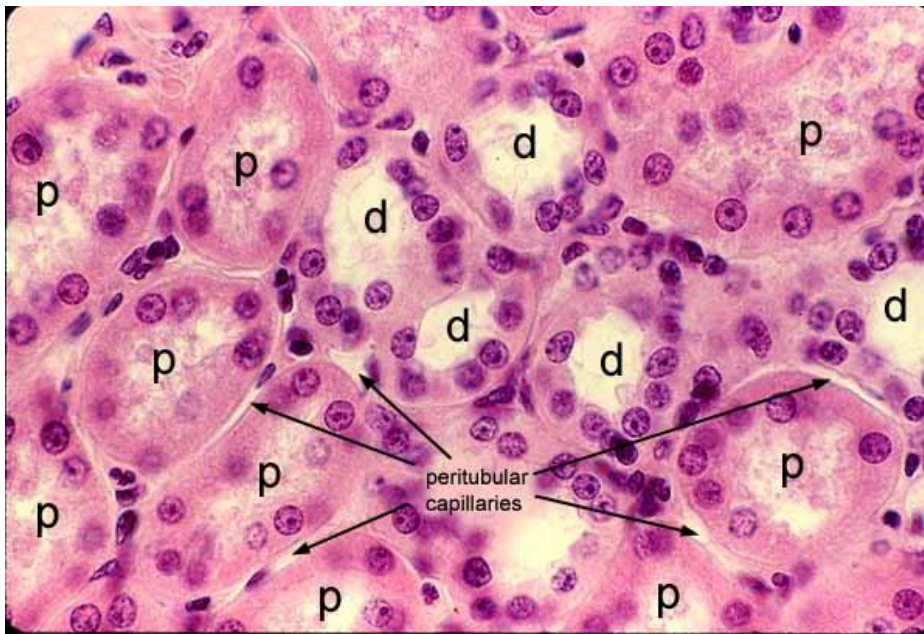
The identification of proximal convoluted tubules (PCTs) and DCTs is facilitated by the following parameters:

1. Both are adjacent to renal corpuscles.
2. PCTs contain cells with abundant **lysosomes** (stained dark in both light microscope illustrations).
3. The **apical domain** of PCTs has a prominent **brush border (microvilli)** and **vesicles**. In contrast, the apical domain of DCTs has sparse microvilli and vesicles.
4. Cells lining the PCTs and DCTs contain abundant basally located **mitochondria**.



## Distal convoluted tubule (DCT) functions:

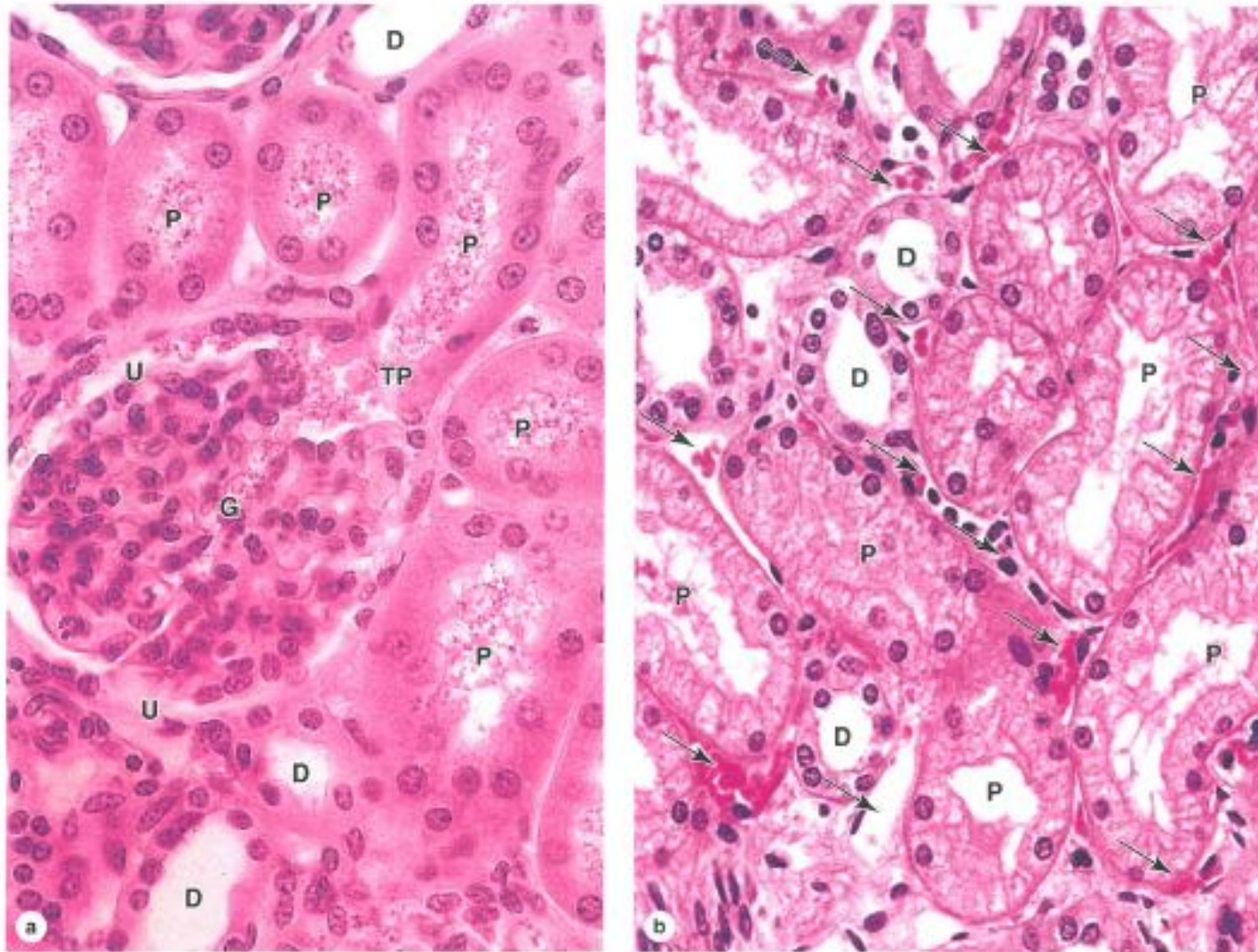
- Reabsorption of  $\text{Na}^+$  / water (by aldosterone)
- Reabsorption of bicarbonate
- Reabsorption of  $\text{Ca}^{2+}$
- Secretion of hydrogen / ammonium (acid-base balance)
- Secretion  $\text{K}^+$



Source: Katzung BG, Masters SB, Trevor AJ: *Basic & Clinical Pharmacology*, 11th Edition: <http://www.accessmedicine.com>

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**FIGURE 19-8** Renal cortex: proximal and distal convoluted tubules.

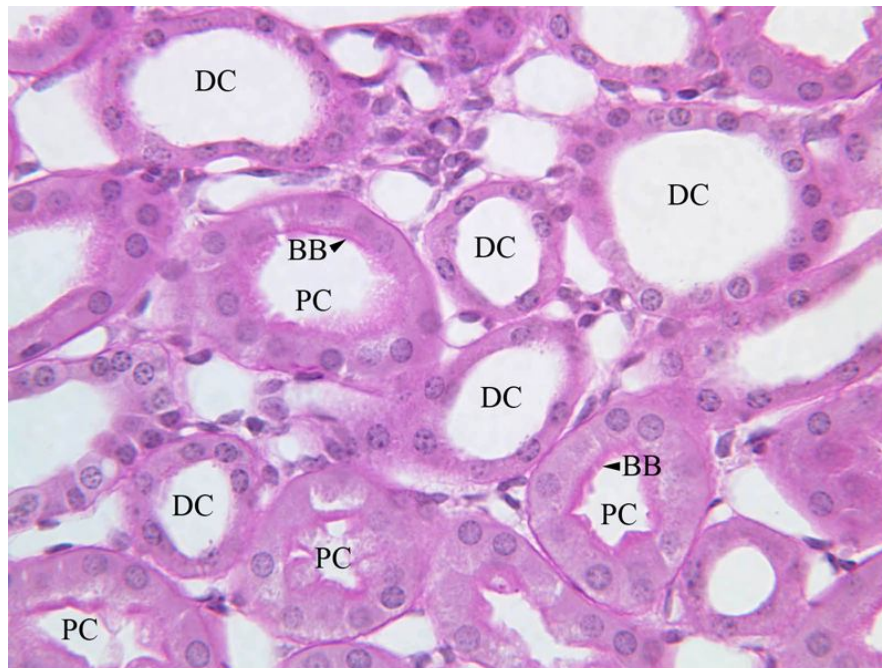
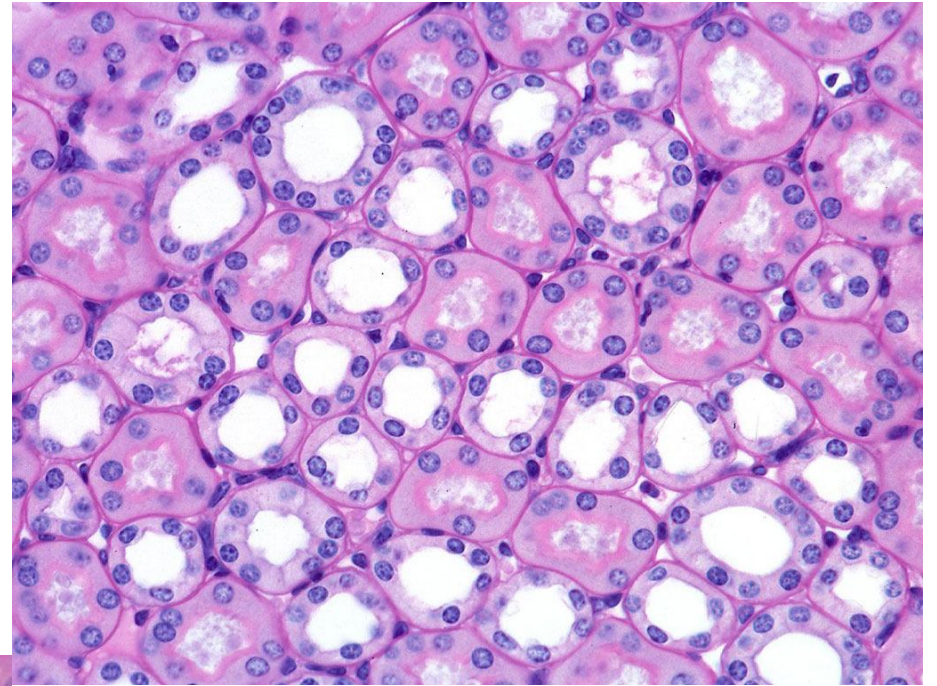


**(a)** The micrograph shows the continuity at a renal corpuscle's tubular pole (TP) between the simple cuboidal epithelium of a proximal convoluted tubule (P) and the simple squamous epithelium of the capsule's parietal layer. The urinary space (U) between the parietal layer and the glomerulus (G) drains into the lumen of the proximal tubule. The lumens of the proximal tubules appear filled, because of the long microvilli of the

brush border and aggregates of small plasma proteins bound to this structure. By contrast, the lumens of distal convoluted tubules (D) appear empty, lacking a brush border and protein.

**(b)** Here the abundant peritubular capillaries and draining venules (arrows) that surround the proximal (P) and distal (D) convoluted tubules are clearly seen. Both X400. H&E.

PCT & DCT



DC - distal convoluted tubule PC - proximal convoluted tubule BB - brush border

# Collecting tubule/duct

## Chief cell:

Cuboid / light cytoplasm / basal ridge / apical single cilia /

## Intercalated or dark cell:

Dark cuboid / apical microvillus / mitochondria

Collecting tube – collecting duct –  
duct of bellini (area cribrosa) –  
minor calyces

Single cilia in chief cell:

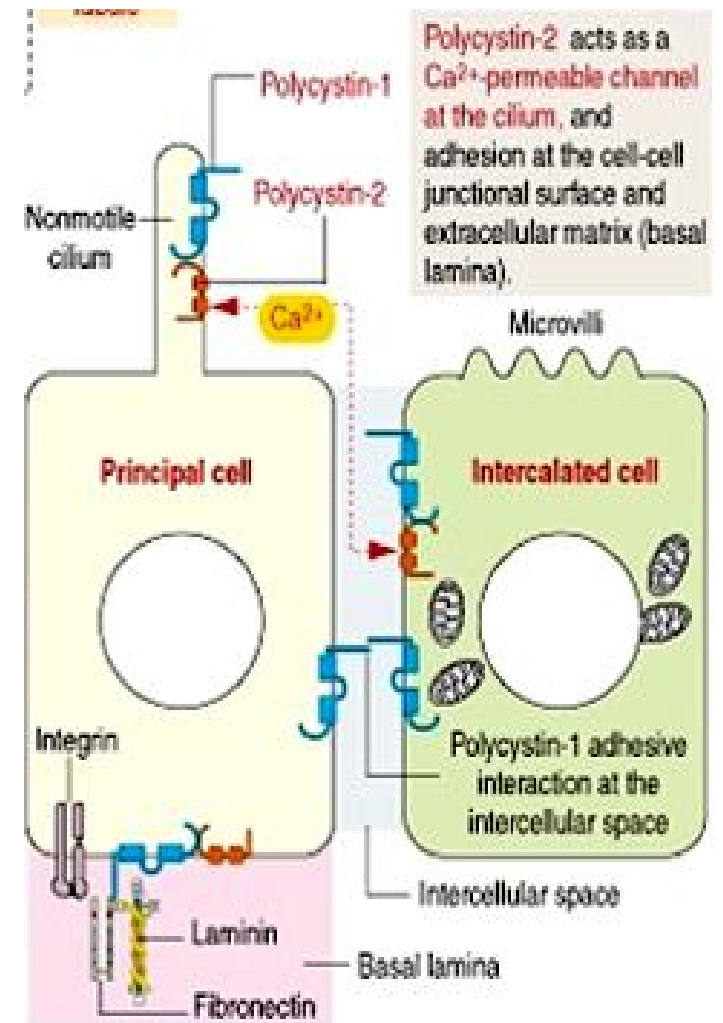
Have polycystin protein

### Functions:

Ca<sup>+</sup> channel

Adhesion protein in cell to cell junction

Attach cell to basal membrane



Chief cell :

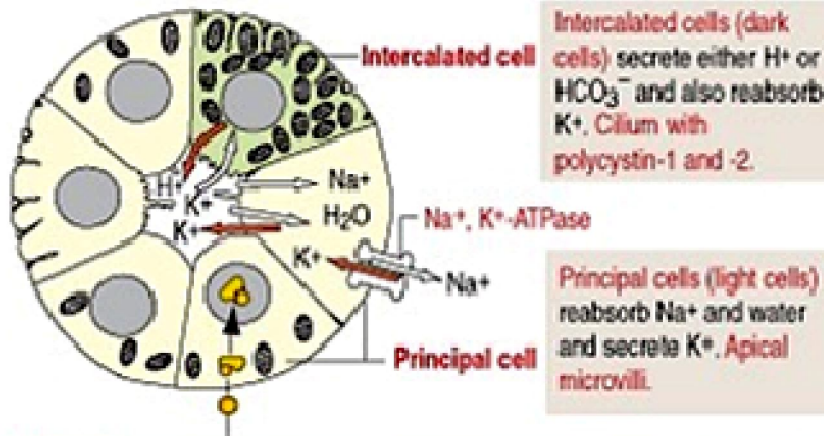
Reabsorption  $\text{Na}^+$  / water

Secretion  $\text{K}^+$

Dark cell :

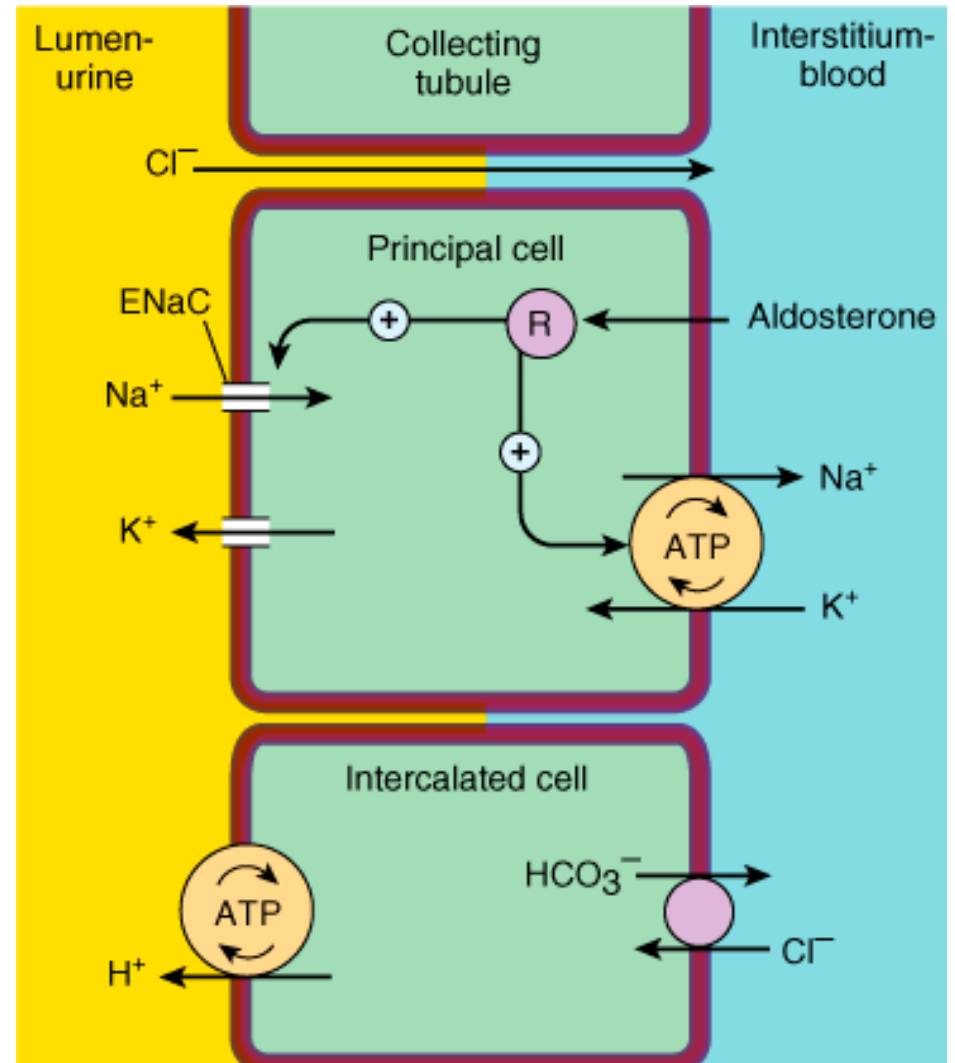
Reabsorption  $\text{K}^+$

Secretion  $\text{H}^+$  /  $\text{HCO}_3^-$

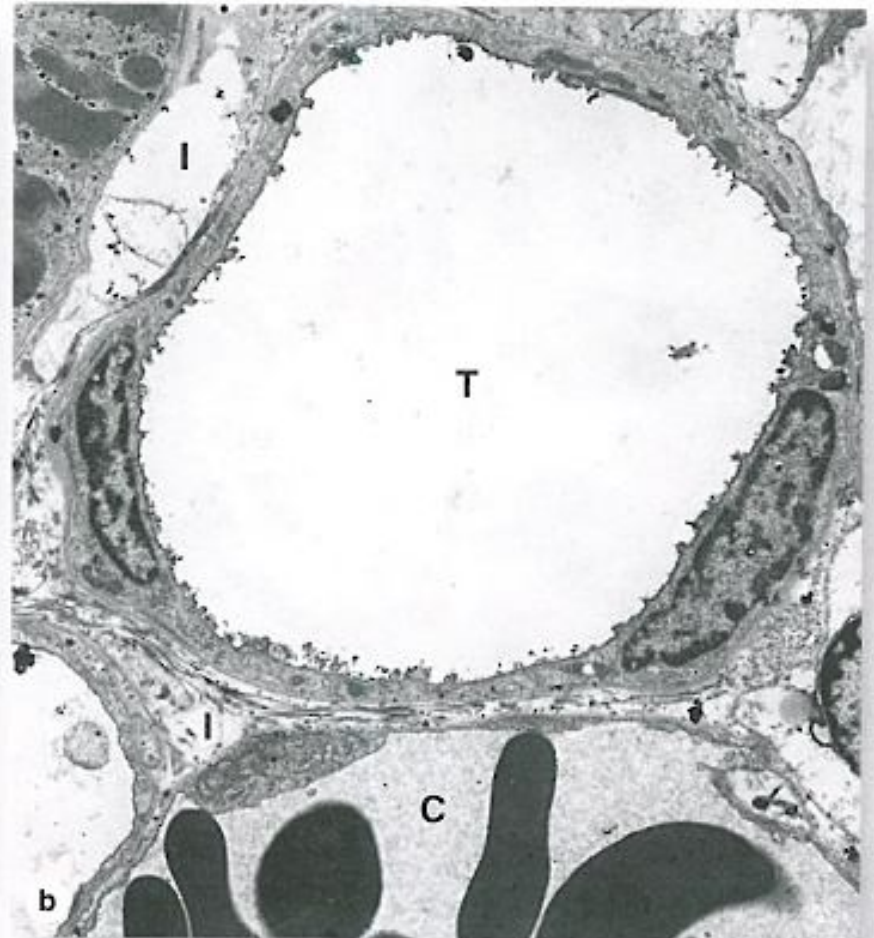
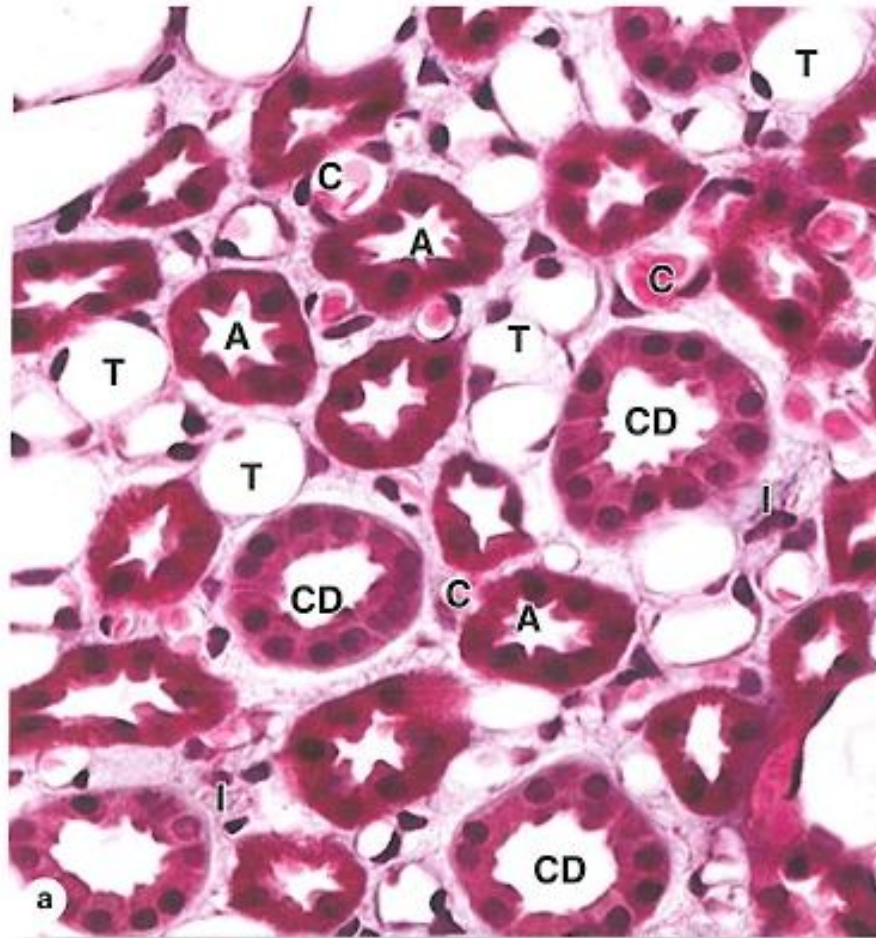


**Aldosterone** (from the zona glomerulosa of the adrenal gland cortex) stimulates the reabsorption of  $\text{Na}^+$  at the collecting tubule. Retention of  $\text{Na}^+$  results in water retention, helping to correct **hypovolemia** (decrease in total body water) and **hyponatremia** (decrease in total body  $\text{Na}^+$ ).

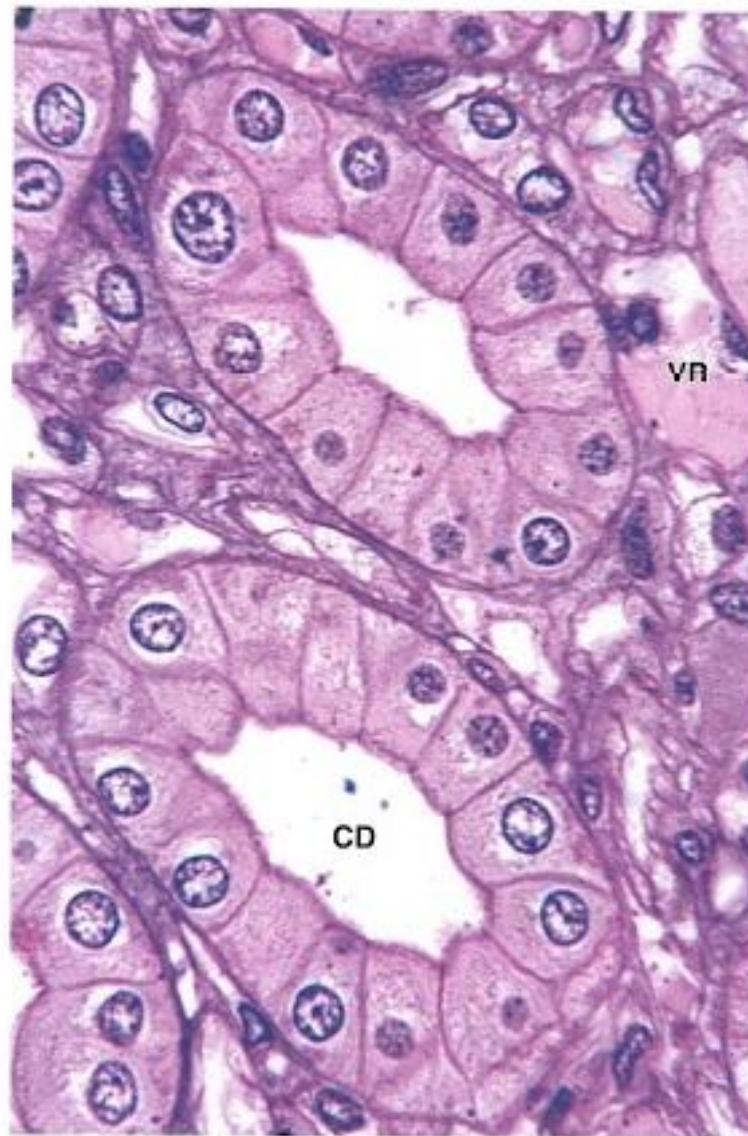
## Collecting tubule/duct



**FIGURE 19-11** Renal medulla: nephron loops and collecting ducts.



**FIGURE 19-14** Collecting ducts.



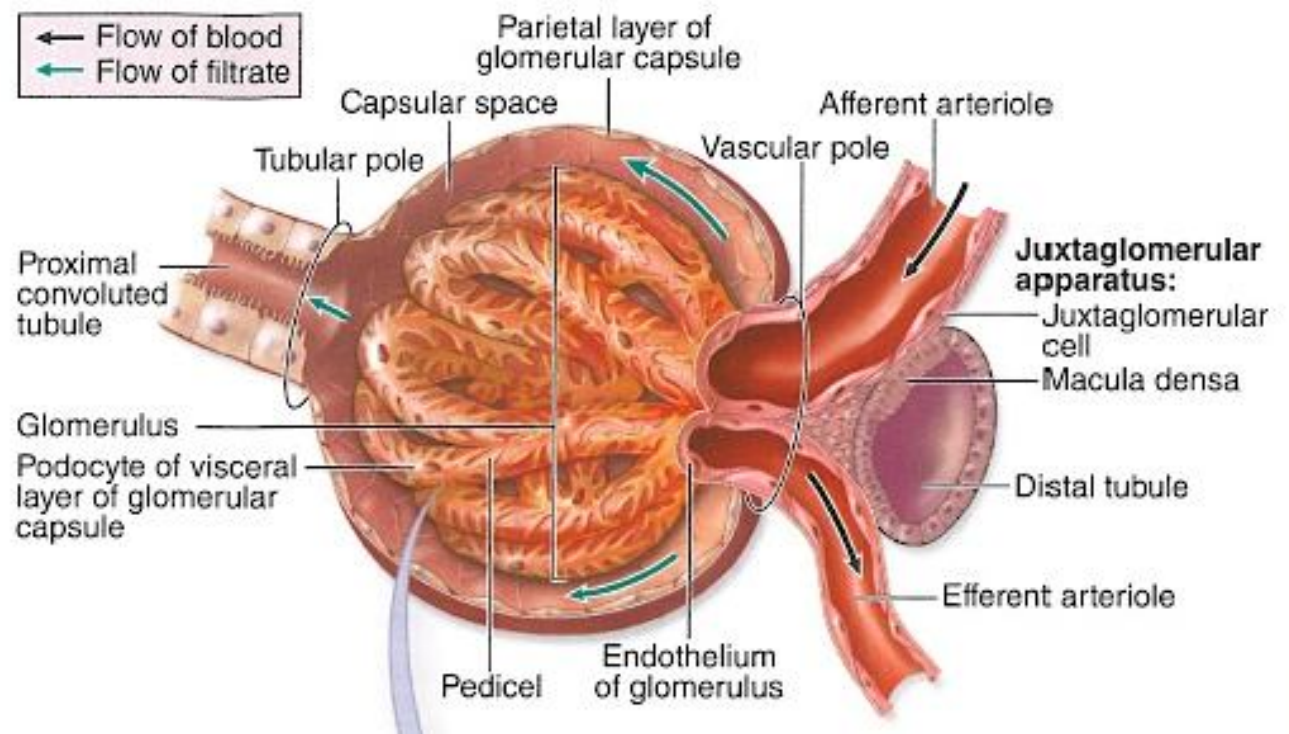
Pale-staining columnar **principal cells**, in which ADH-regulated aquaporins of the cell membrane allow more water reabsorption, are clearly seen in these transversely sectioned collecting ducts (**CD**), surrounded by interstitium with vasa recta (**VR**). X600. PT.



# Juxtaglomerular apparatus

Located in vascular pole  
Consist of 3 parts:

Macula densa  
Juxtaglomerular cell  
External mesangial cell



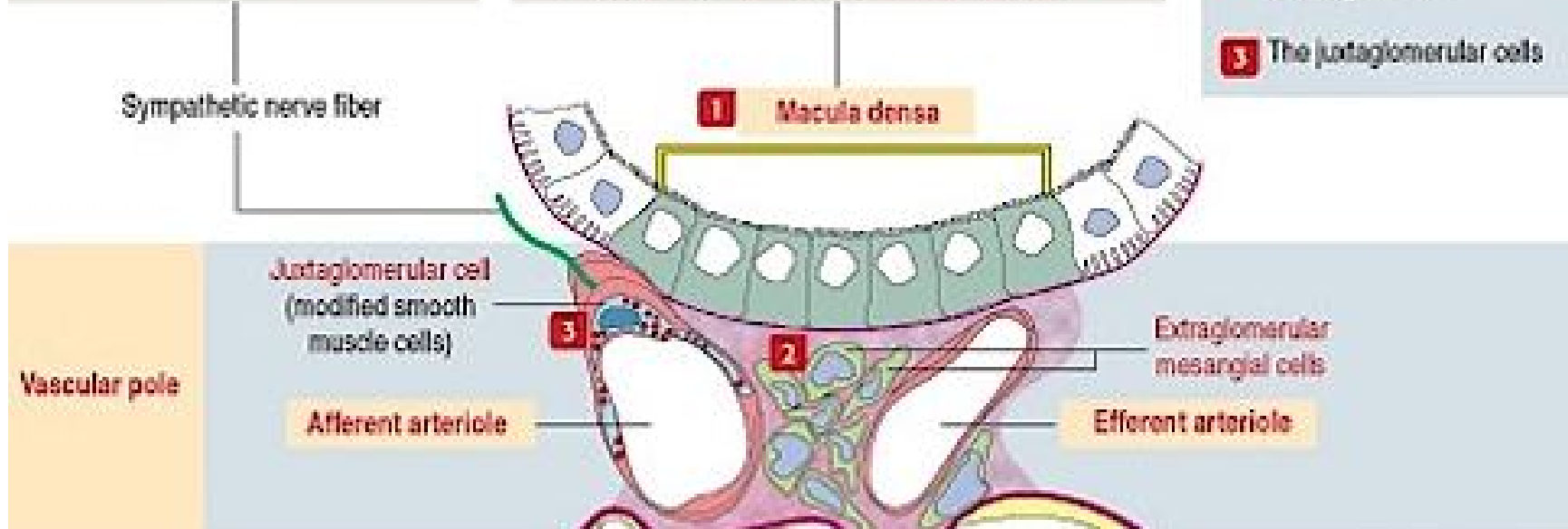
# Juxtaglomerular apparatus

- Macula densa:
- Modified cell of DCT
- Located around afferent arteriole
- Long / dark cell
- Central or apical nucleus
- Apical microvillus
- susceptible to low  $\text{Na}^+$  concentration

Sympathetic nerve fibers reach the afferent arteriole and innervate juxtaglomerular cells. An increase in sympathetic activity stimulates renin secretion.

The macula densa is a distinct epithelial region found at the thick ascending limb–distal convoluted tubule junction. The macula densa faces the triangular area formed by the afferent and efferent arterioles of the same nephron. The cells of the macula densa are in contact with extraglomerular mesangial cells.

- ### Components of the juxtaglomerular apparatus
- 1 The macula densa
  - 2 The extraglomerular mesangial cells
  - 3 The juxtaglomerular cells

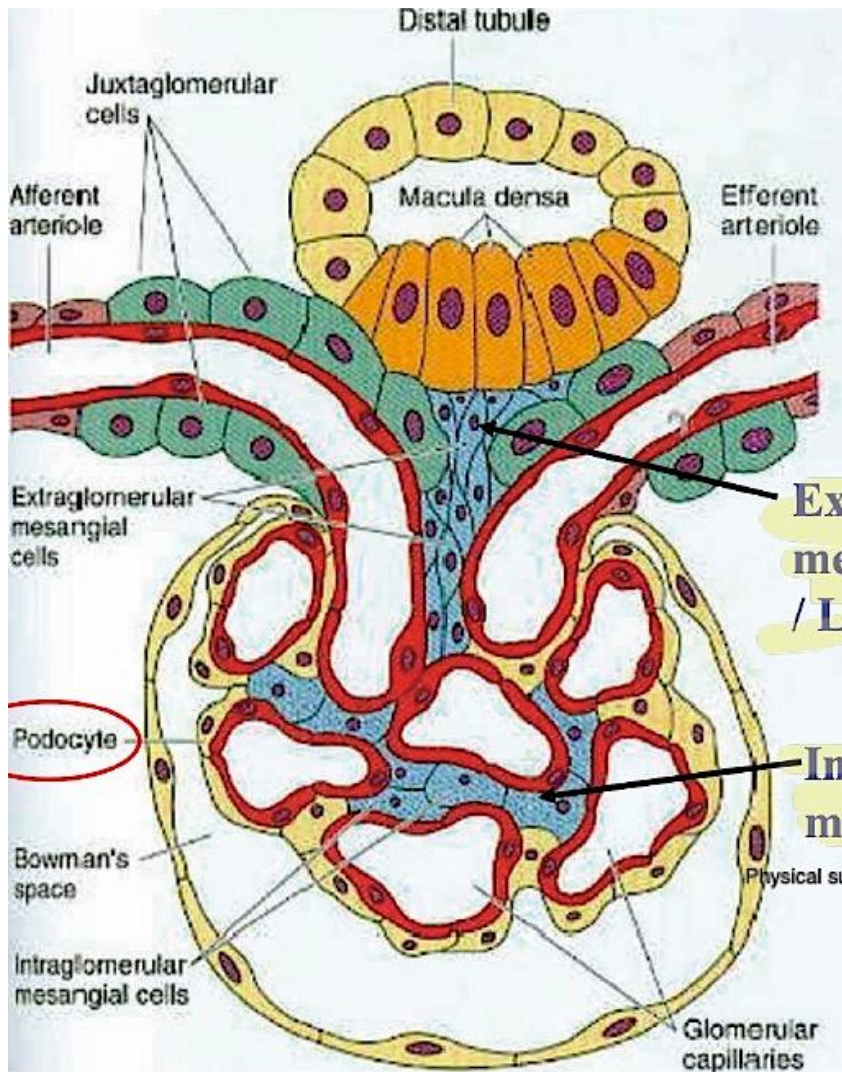


Functions:

Renin secretion / angiotensin I to angiotensin II convertor enzyme

**Juxtaglomerular cells:**

Modified smooth muscle cells of afferent arteriole  
Round nucleus  
Secretory granules in cytoplasm  
Rough ER / Golgi



**Extraglomerular  
mesangial cells  
/ Lacis cells**

**Intraglomerular  
mesangial cells**

Physical support for the capillary loops

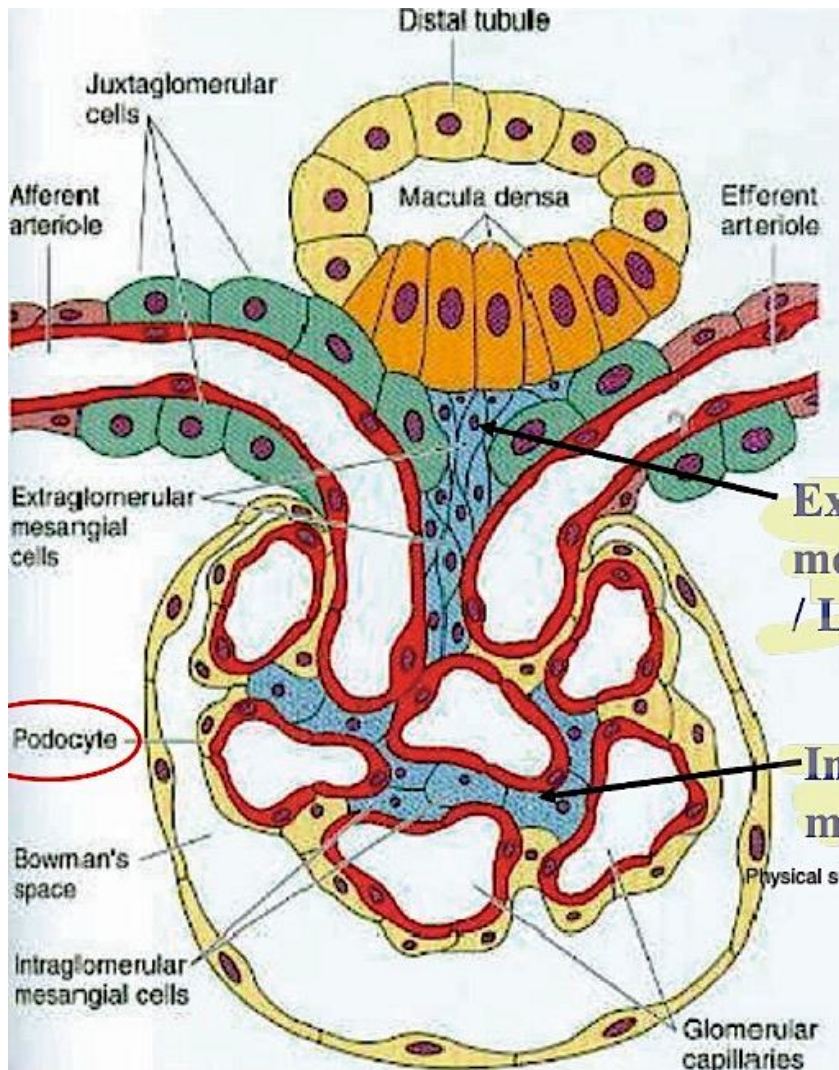
# Juxtaglomerular apparatus

External mesangial cell: polkissen / lacis cells

Occupied space between afferent & efferent arterioles & macula densa

Functions:

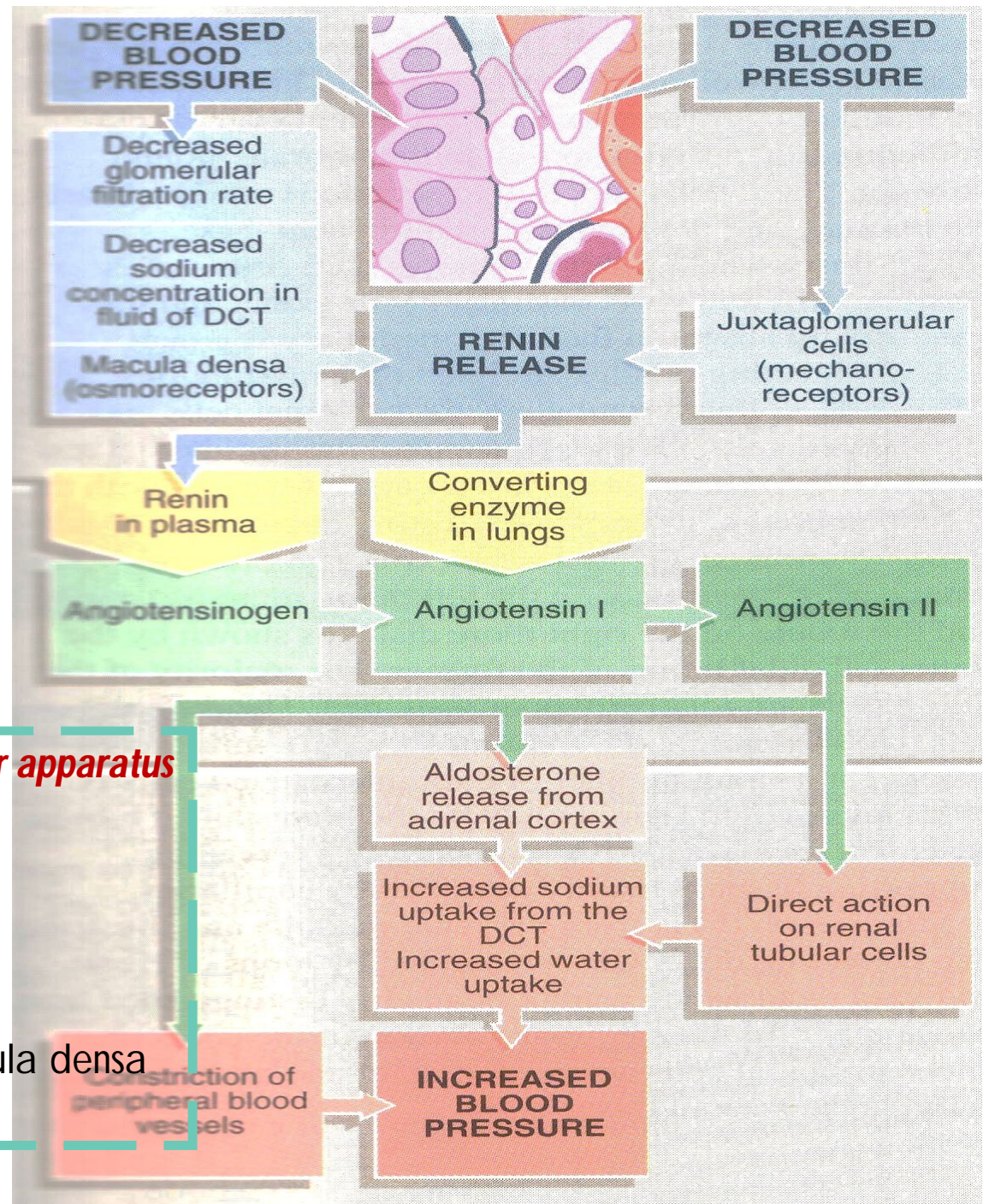
**Not clear** / **external glomeruli mesangial** /  
Secretion of **erythropoietin** probably /  
Supporting + contractile



**Extraglomerular  
mesangial cells  
/ Lacis cells**

**Intraglomerular  
mesangial cells**

Physical support for the capillary loops



**Stimulatory factors of Juxtaglomerular apparatus**

:

extracellular hypovolemic

↓ BP

decreased Na<sup>+</sup> concentration in macula densa

# Renin-angiotensin-aldosterone system

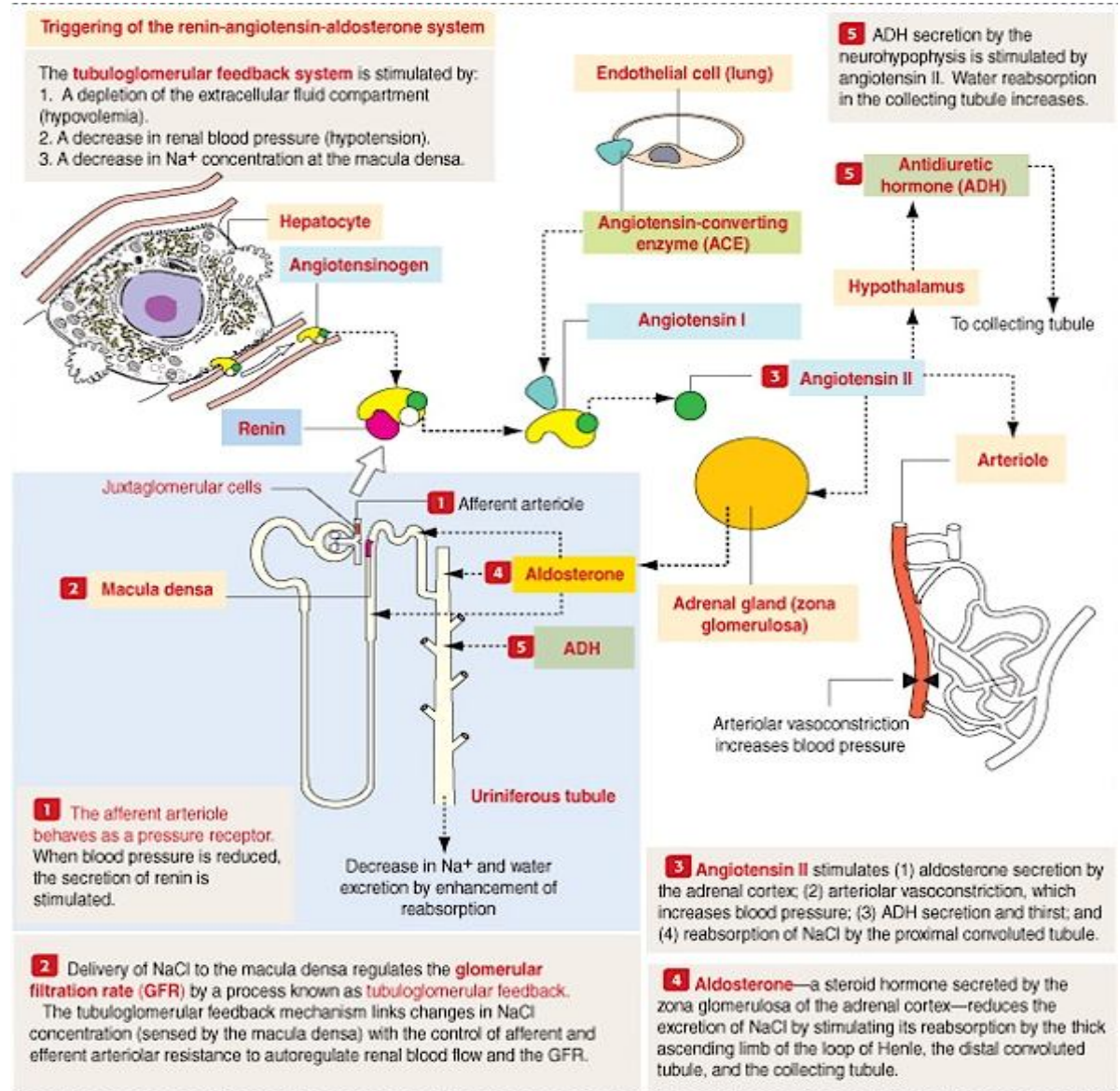
Angiotensin II functions:

- Smooth muscle of arteriole = vasoconstriction
- Adrenal gland = aldosterone secretion =

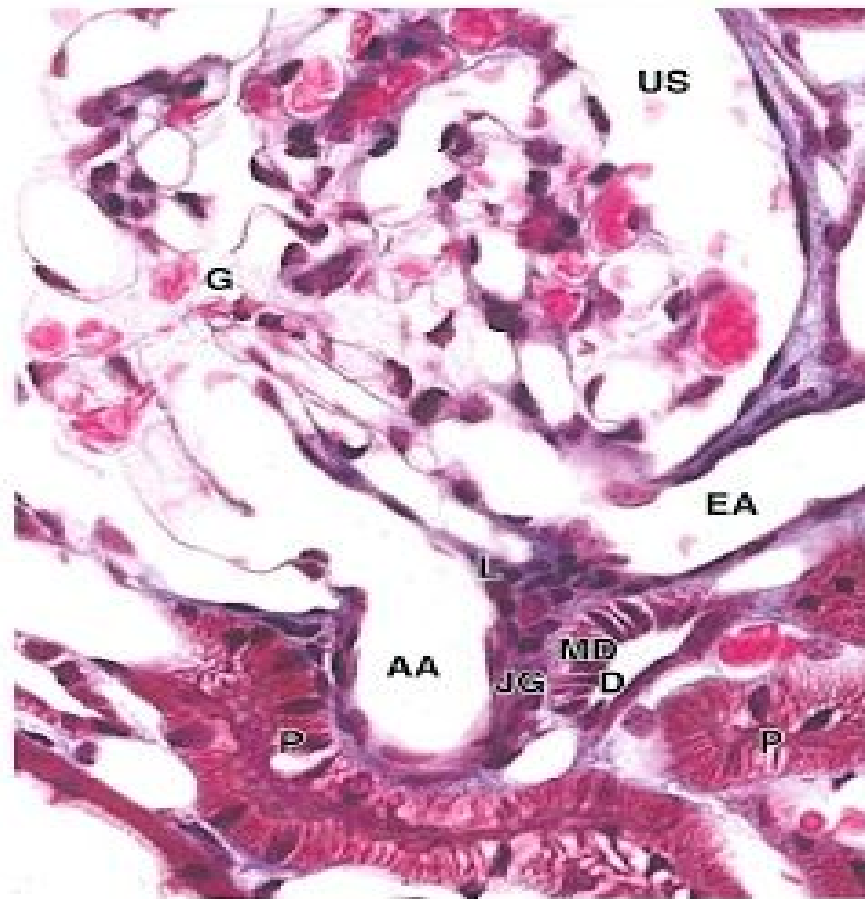
Reabsorption Na<sup>+</sup> in 3 zones:

Thick segment of ascending loop of Henle  
DCT  
Collecting tubule

- Hypothalamus = ADH secretion = water reabsorption  
In Collecting tubule



**FIGURE 19-12** Juxtaglomerular apparatus (JGA).



The JGA forms at the point of contact between a nephron's distal tubule (D) and the vascular pole of its glomerulus (G). At that point cells of the distal tubule become columnar as a thickened region called the macula densa (MD). Smooth muscle cells of the afferent arteriole's (AA) tunica media are converted from a contractile to a secretory morphology as juxtaglomerular granule cells (JG). Also present are lacis cells (L), which are extraglomerular mesangial cells adjacent to the macula densa, the afferent arteriole, and the efferent arteriole (EA). In this specimen the lumens of proximal tubules (P) appear filled and the urinary space (US) is somewhat swollen. X400. Mallory trichrome.

Renal interstitium:

Located between tubules / ducts / vessels in cortex and medulla

*In cortex:*

- ✓ Fibroblast like cell ( renal architecture / secretion erythropoietin )
- ✓ Macrophage

*In medulla:*

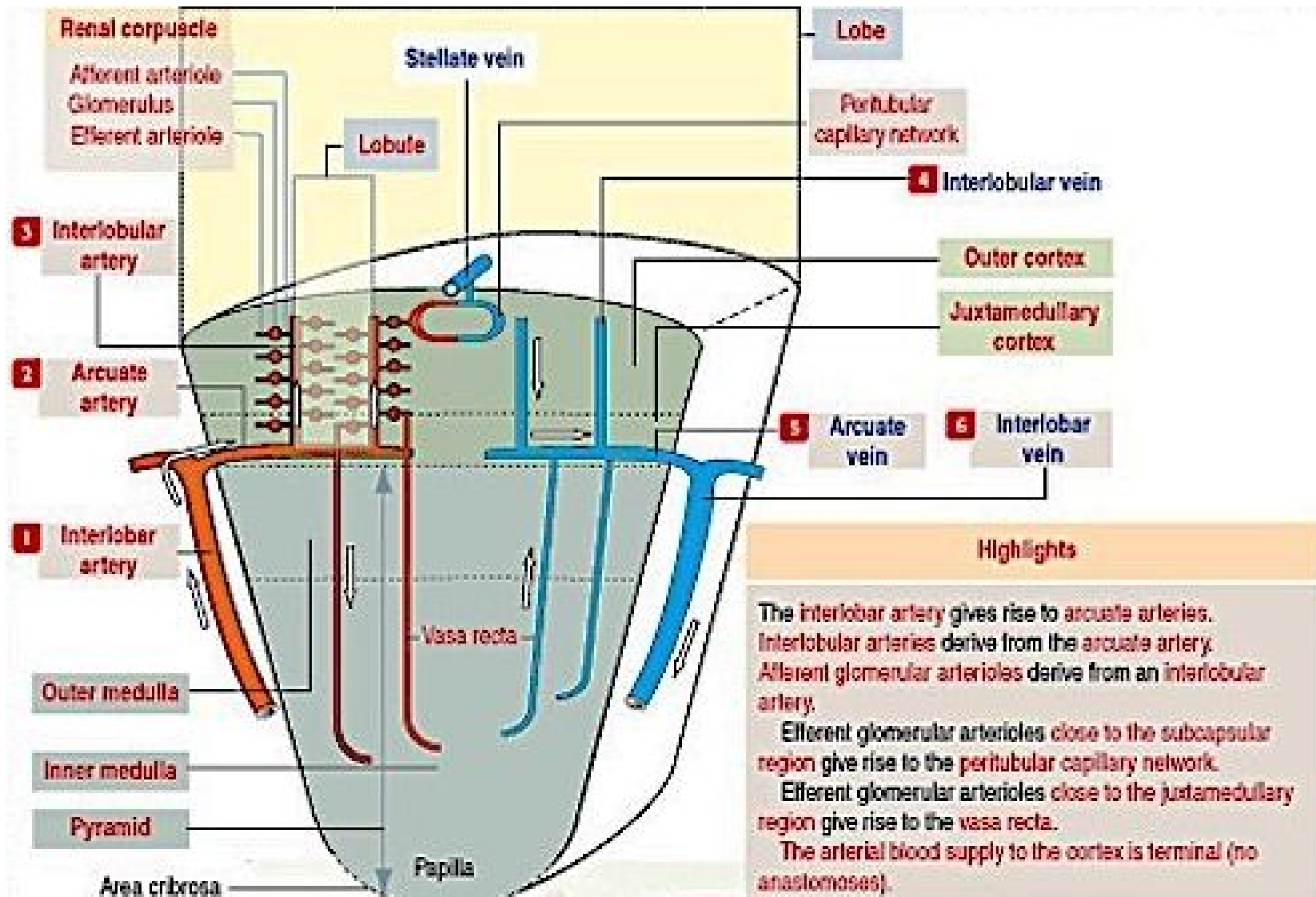
- ❖ Fibroblast
- ❖ Macrophage
- ❖ Interstitial cell: long nucleus / fat droplet / secretion medullipin I (vasodilator) / convert to medullipin II in liver



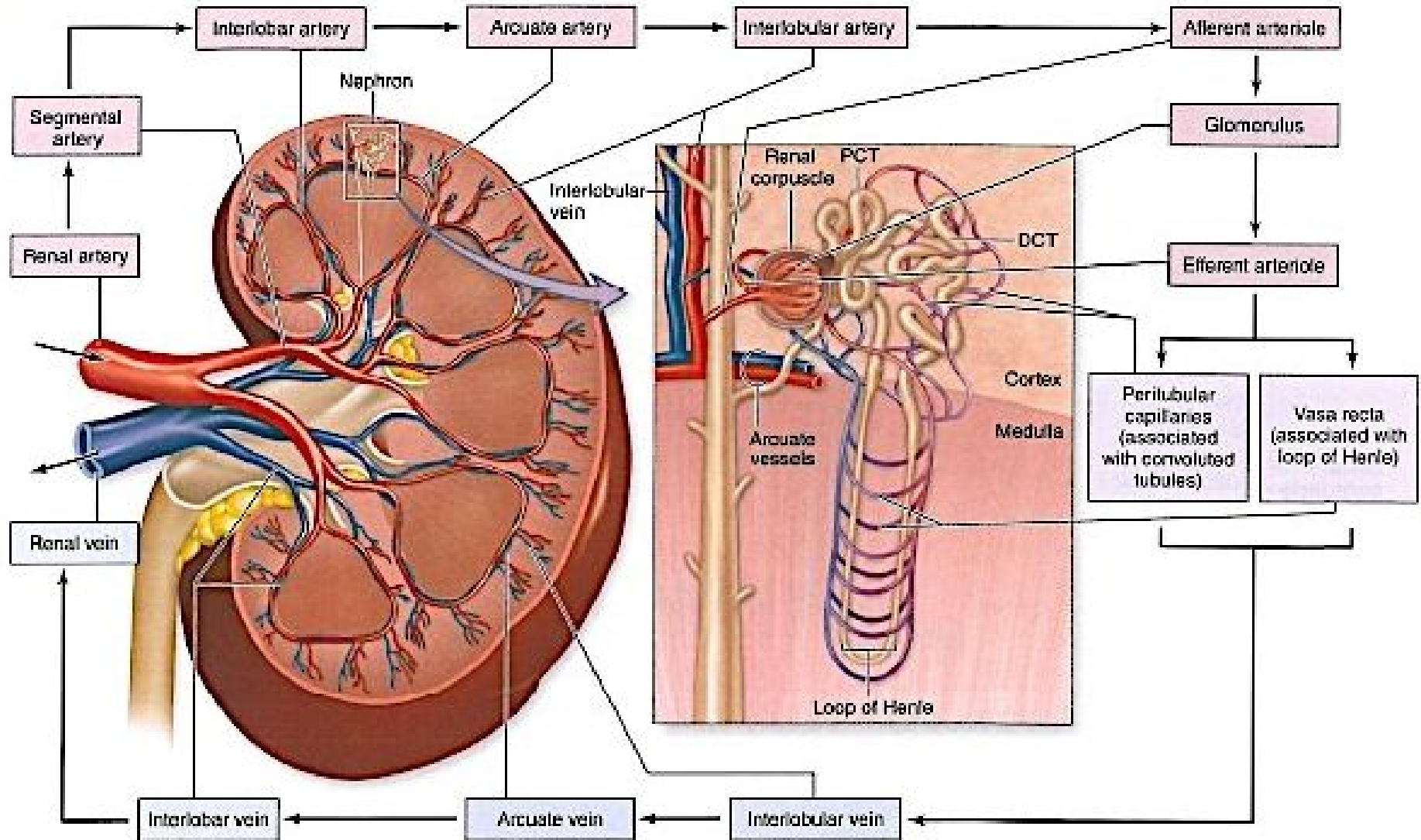
## Renal circulation

Vasa recta (artery) = continues epithelium

Vasa recta (vein) = fenestrated epithelium

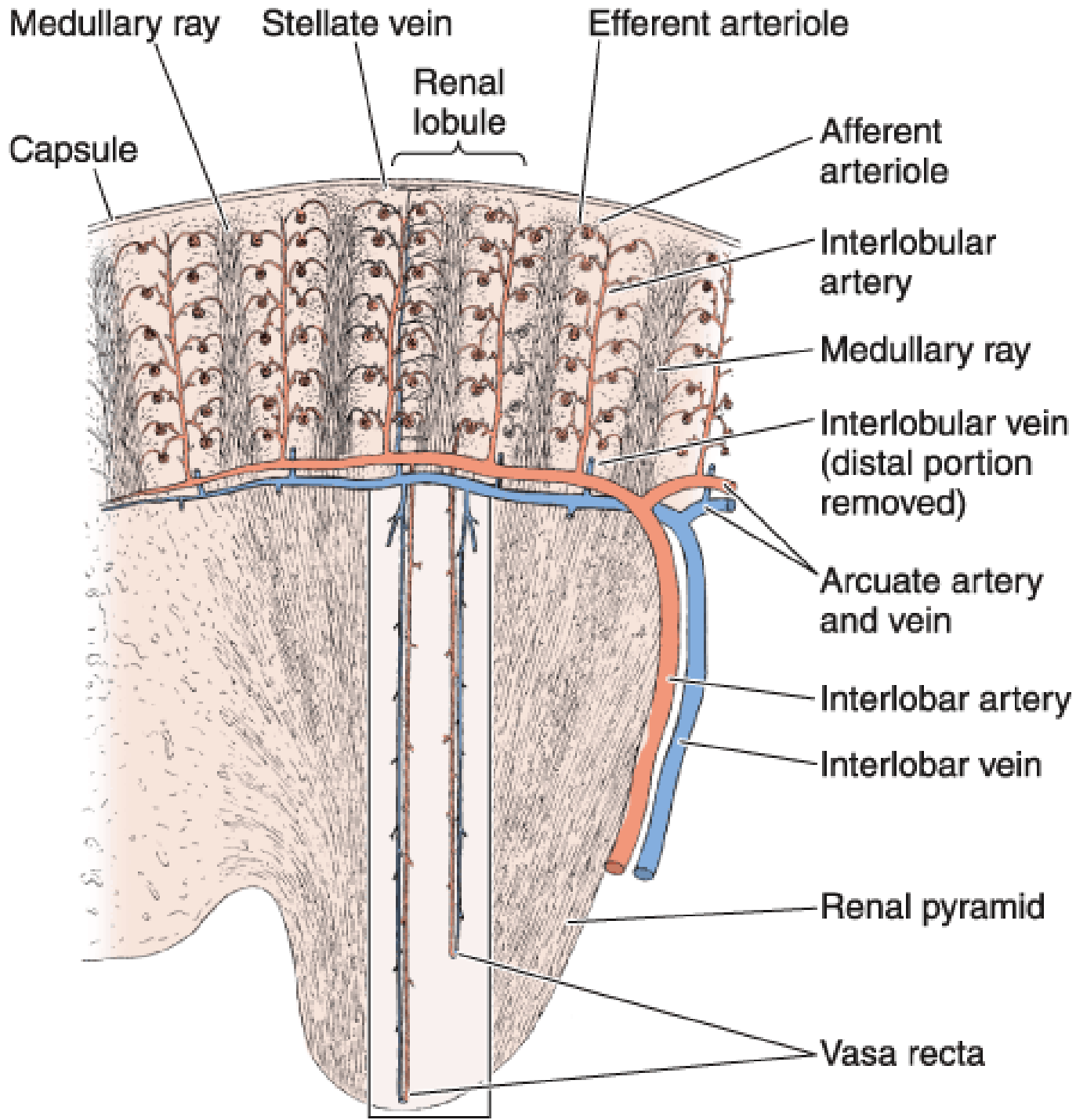


**FIGURE 19-3** Blood supply to the kidneys.



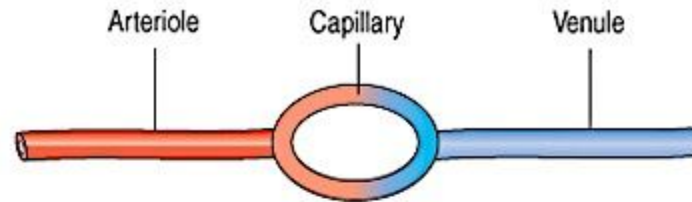
A coronal view (left) shows the major blood vessels diagrammatically, with their names. An expanded diagram (right) includes the microvascular components extending into the cortex, and medulla from the interlobular vessels are shown

on the right. Pink boxes indicate vessels with arterial blood and light blue indicate the venous return. The intervening lavender boxes and vessels are intermediate sites where most reabsorbed material reenters the blood.



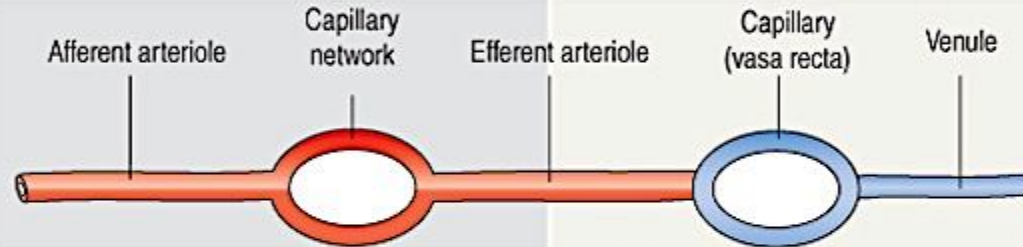
## Arterial and venous portal systems

In general, a capillary network is interposed between an arteriole and a venule.



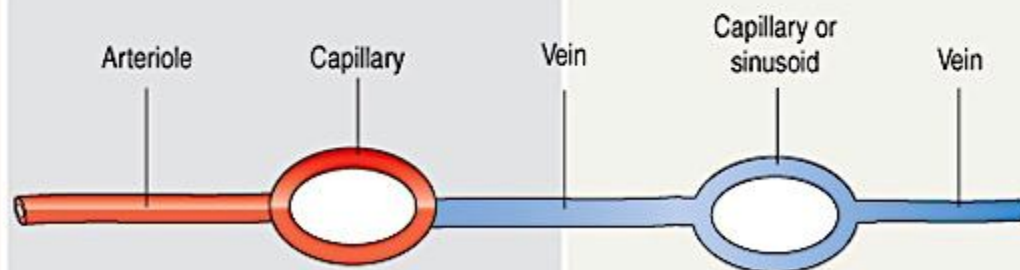
Typical arrangement

In the kidney, an arteriole is interposed between two capillary networks. An afferent arteriole gives rise to a mass of capillaries, the **glomerulus**. These capillaries coalesce to form an efferent arteriole, which gives rise to capillary networks (**peritubular capillary network and the vasa recta**) surrounding the nephrons.



Arterial portal system

In the **liver** and **hypophysis**, veins feed into an extensive capillary or sinusoid network draining into a vein. This distribution is called the **venous portal system**.



Venous portal system

## ***Calyces / pelvis / ureter / urinary bladder epithelium:***

Mucosa:

Calyces & pelvis = 2-3 layers

Ureter = 4-5 layers

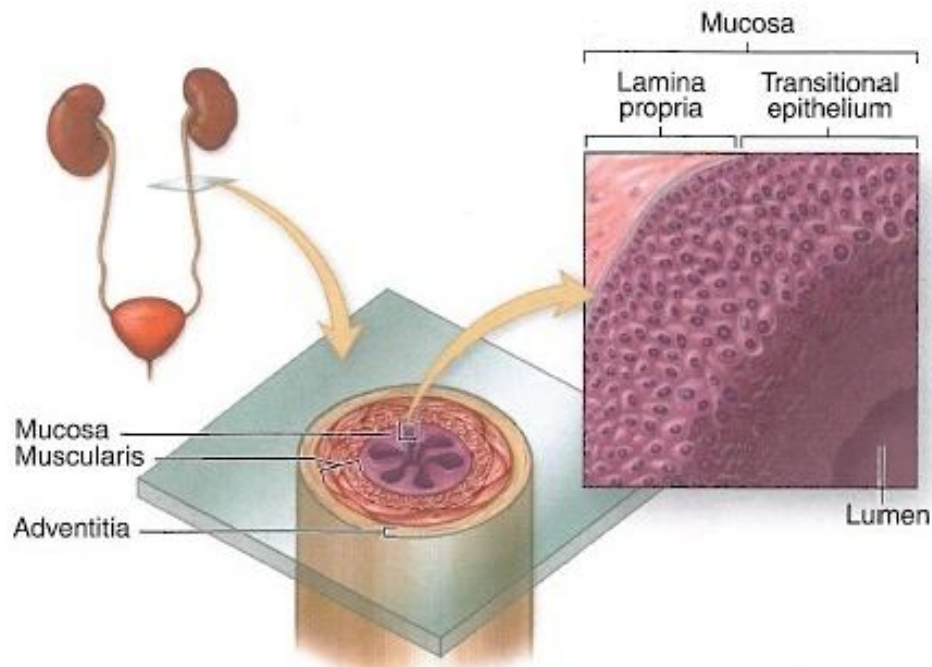
Bladder = 6-8 layers

Muscularis :

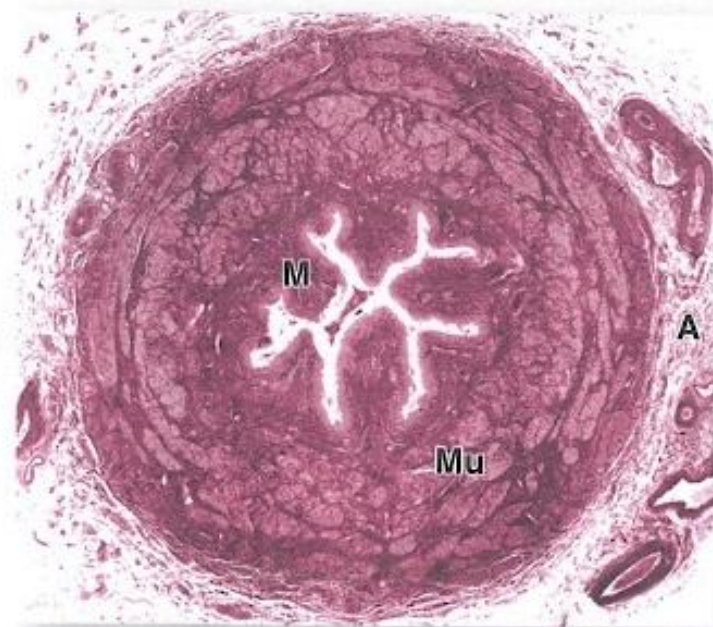
Sup. 2/3 of ureter = circular / longitudinal

Inf. 1/3 of ureter & bladder = longitudinal / circular / longitudinal

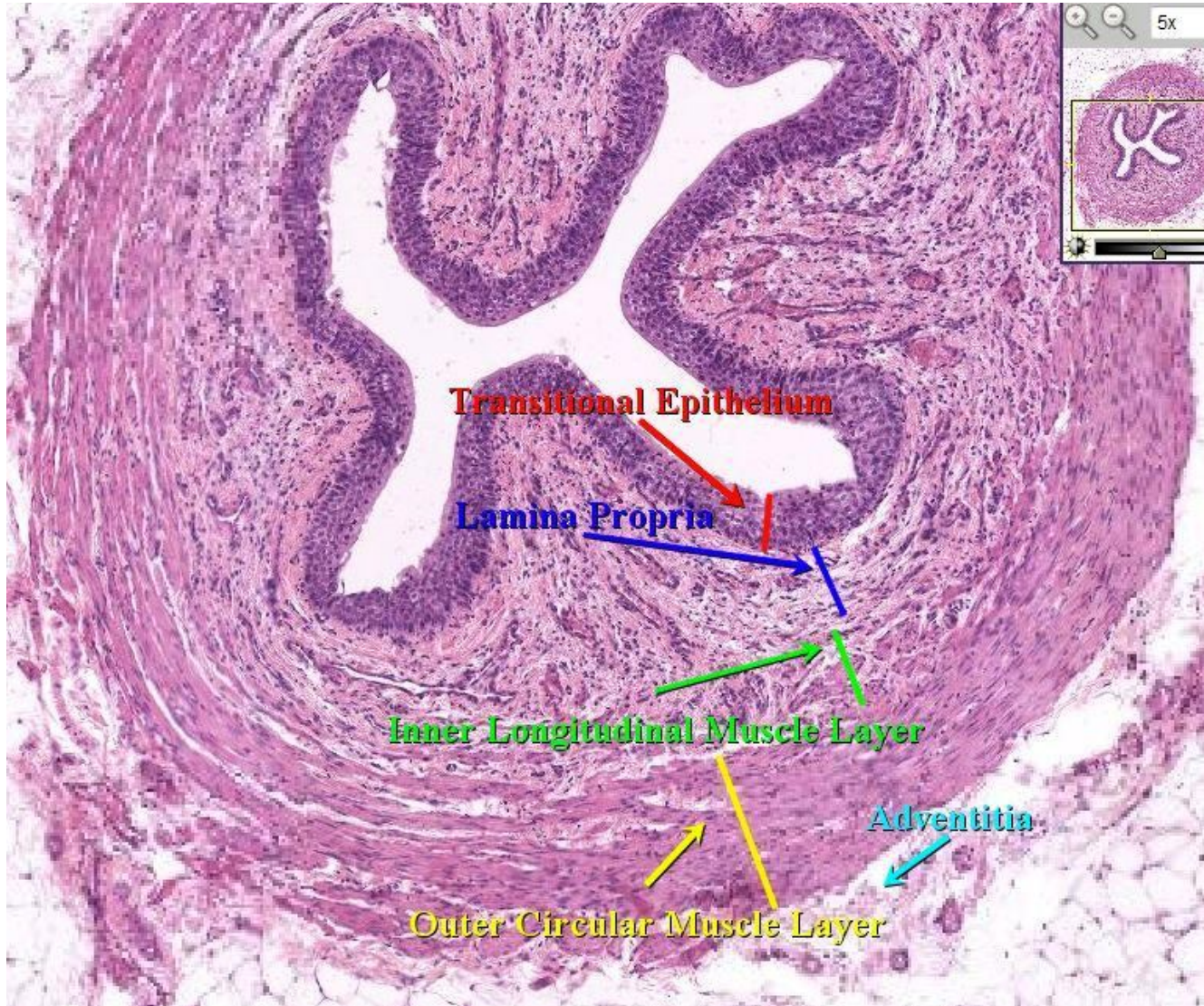
Adventitia : dense connective tissue / renal capsule continued



(a) Ureter cross section



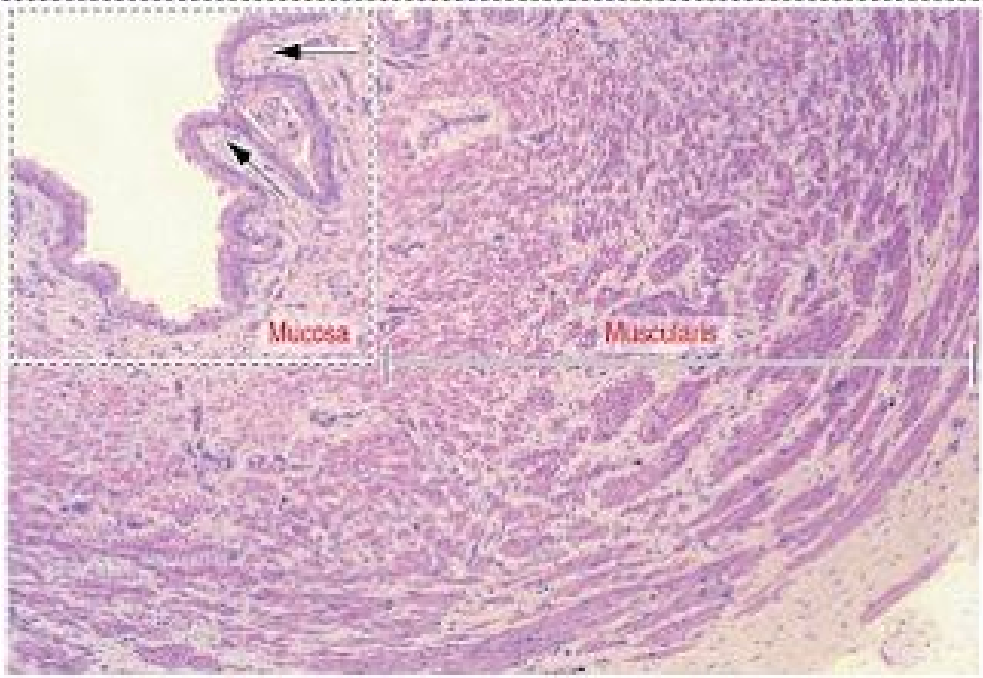
(b)



# Urinary bladder plaque

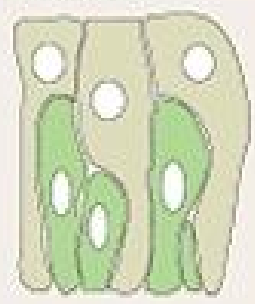
# Transmembrane protein in superficial cells

The **mucosa** of the urinary bladder is folded and lined with transitional epithelium (urothelium). Fibroelastic connective tissue extends into the folds (arrows).

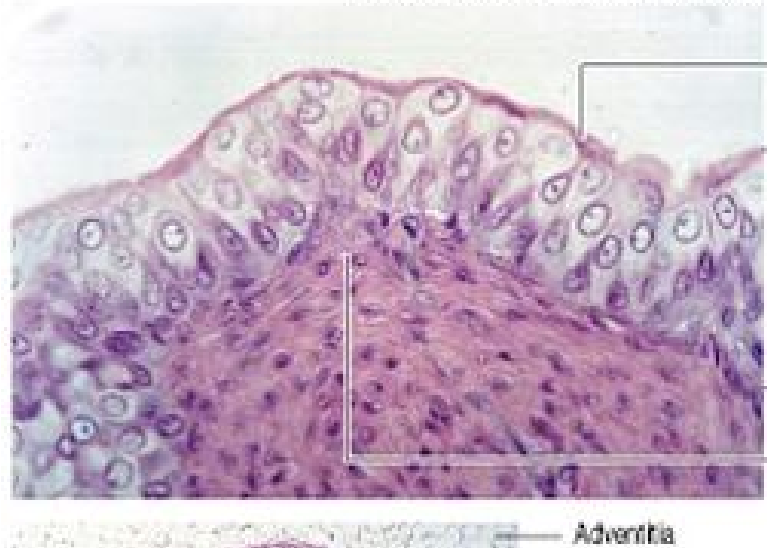
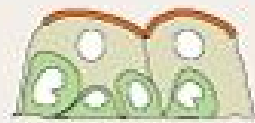


The **muscularis** contains numerous bundles of smooth muscle cells arranged irregularly as outer and inner longitudinal layers and a middle circular layer.

Urothelium of an empty urinary bladder



Urothelium of a urinary bladder filled with urine



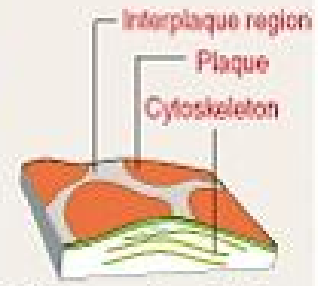
**Plaques**

**Urothelium**

The columnar-like epithelium can stretch and resemble a stratified squamous epithelium when urine is present in the urinary bladder.

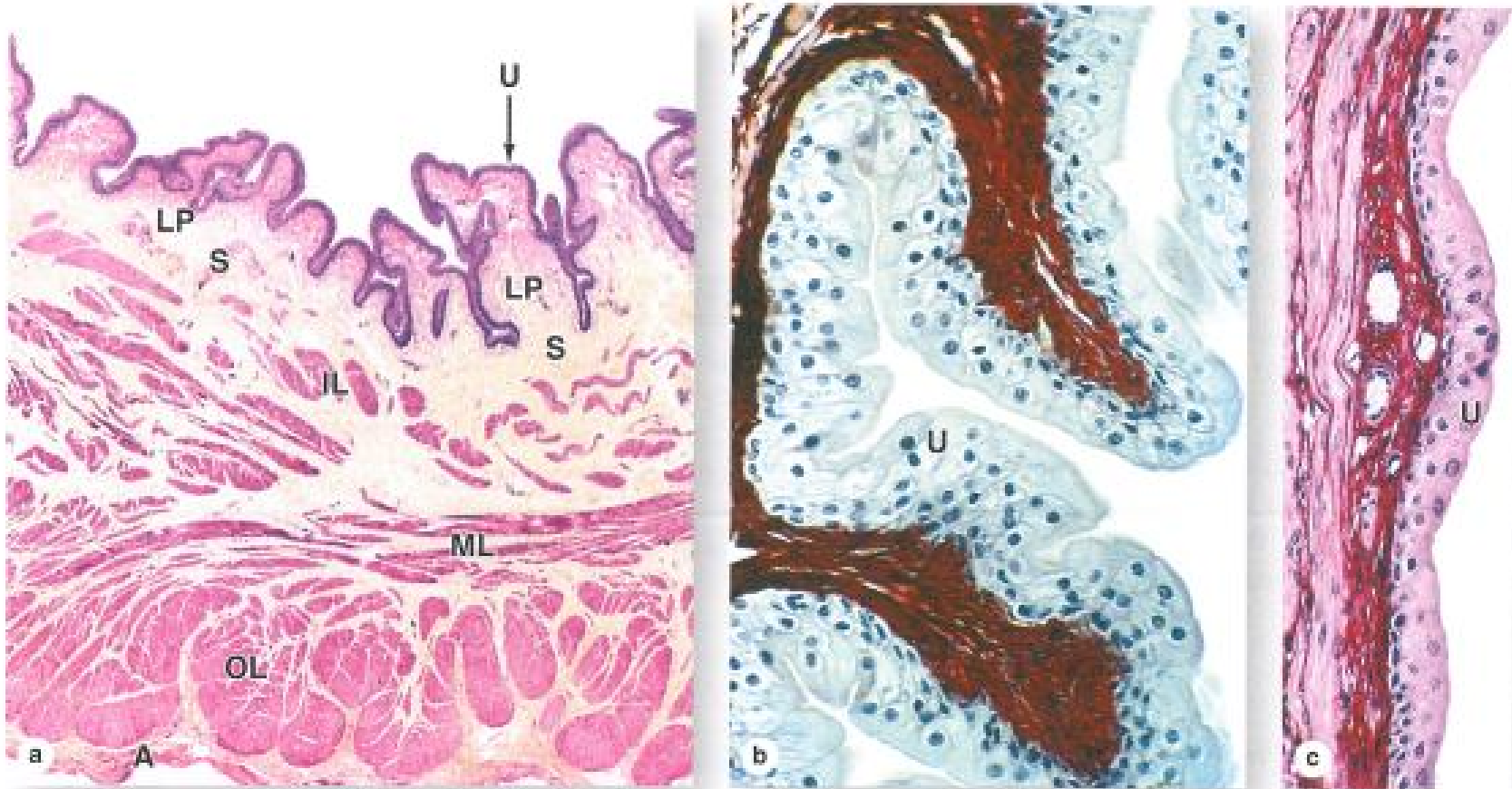
**Apical plaques** generate a thickened domain able to adjust to large changes in surface area.

Fibroelastic connective tissue



Plaques are formed by the aggregation of hexagonal intramembranous proteins to which cytoskeletal proteins are anchored on the cytoplasmic side.

**FIGURE 19-17** Bladder wall and urothelium.

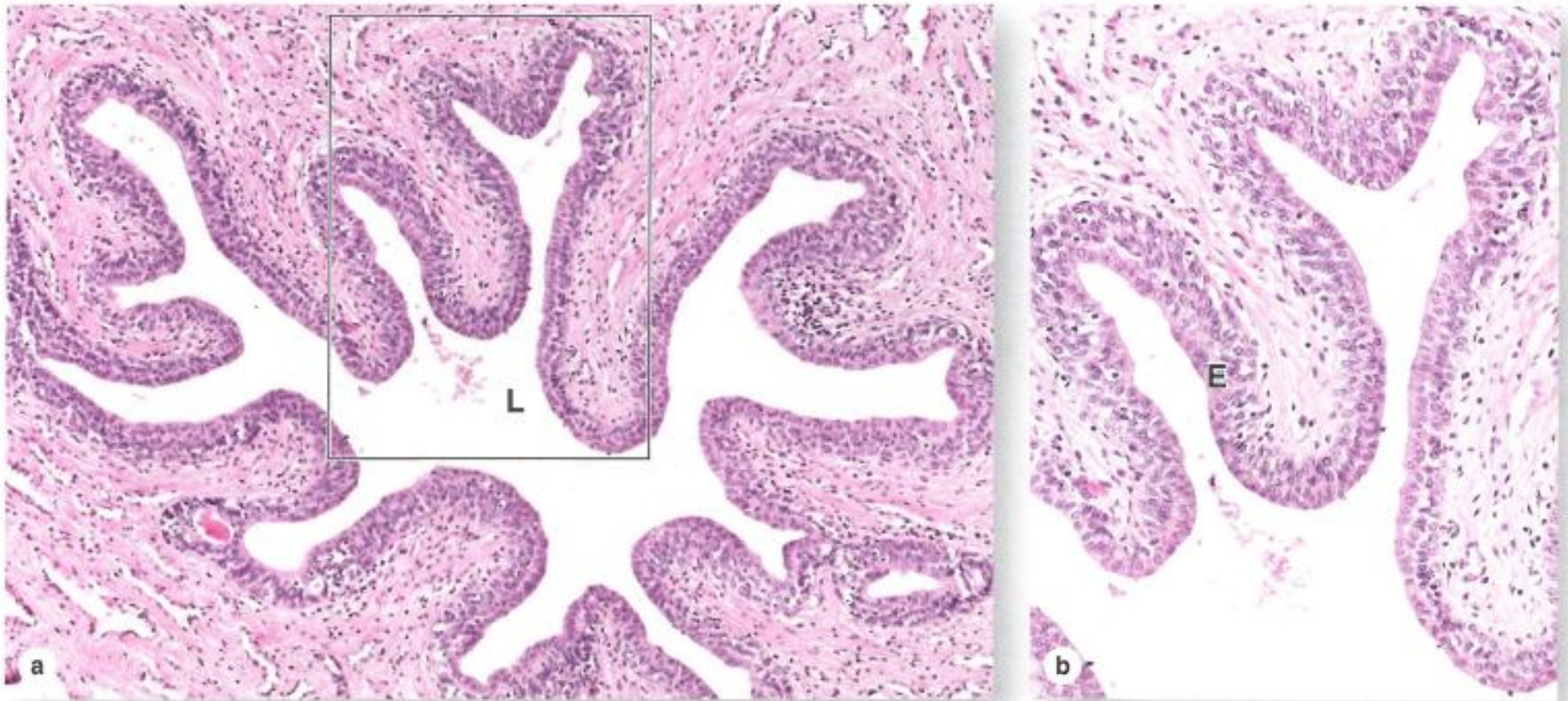


**(a)** In the neck of the bladder, near the urethra, the wall shows four layers: the mucosa with urothelium (**U**) and lamina propria (**LP**); the thin submucosa (**S**); inner, middle, and outer layers of smooth muscle (**IL**, **ML**, and **OL**); and the adventitia (**A**). X15. H&E.

**(b)** When the bladder is empty, the mucosa is highly folded and the urothelium (**U**) has bulbous umbrella cells. X250. PSH.  
**(c)** When the bladder is full, the mucosa is pulled smooth, the urothelium (**U**) is thinner, and the umbrella cells are flatter. X250. H&E.



**FIGURE 19-18 Urethra.**



The urethra is a fibromuscular tube that carries urine from the bladder to the exterior of the body.

**(a)** A transverse section shows that the mucosa has large longitudinal folds around the lumen (L). X50. H&E.

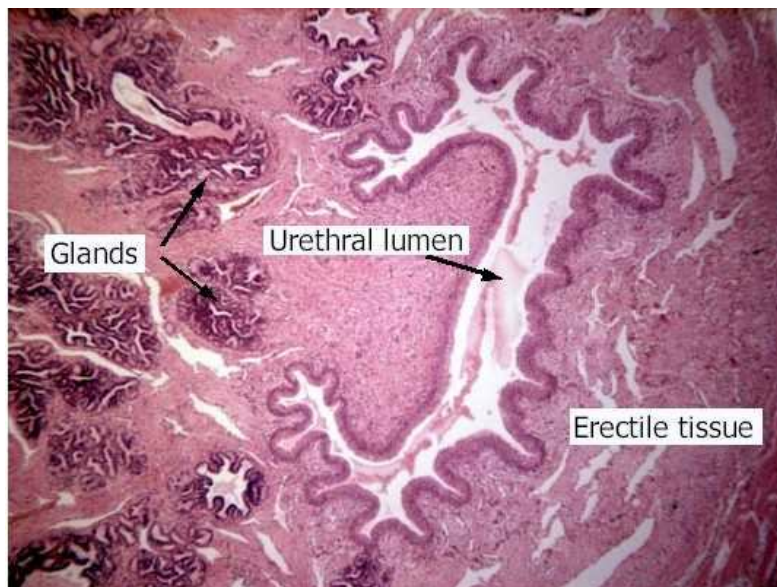
**(b)** A higher magnification of the enclosed area shows the unusual stratified columnar nature of the urethral epithelium (E).

This thick epithelial lining varies between stratified columnar in some areas and pseudostratified columnar elsewhere, but it becomes stratified squamous at the distal end of the urethra. X250. H&E.

## **Male urethra:**

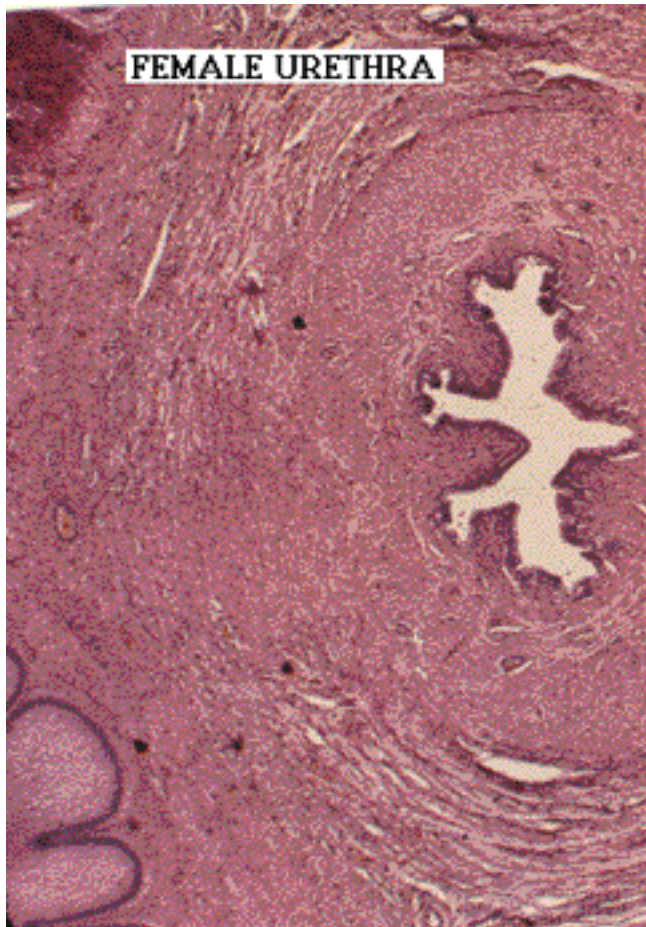
- Prostatic part = 3.5 cm / transitional epithelium
- Membranous part = 1.5 cm / pseudo stratified epithelium
- Spongios part = 15 cm / pseudo stratified & squamous stratified epithelium
- Navicular fossa = squamous stratified epithelium

Lamina propria = fibro elastic connective tissue / mucosal cells ( litters glands)



## *Female urethra: 4 cm*

- ✓ Near bladder = transitional epithelium
- ✓ End part = squamous stratified epithelium
- ✓ Lamina propria = mucosal cells ( litters glands)

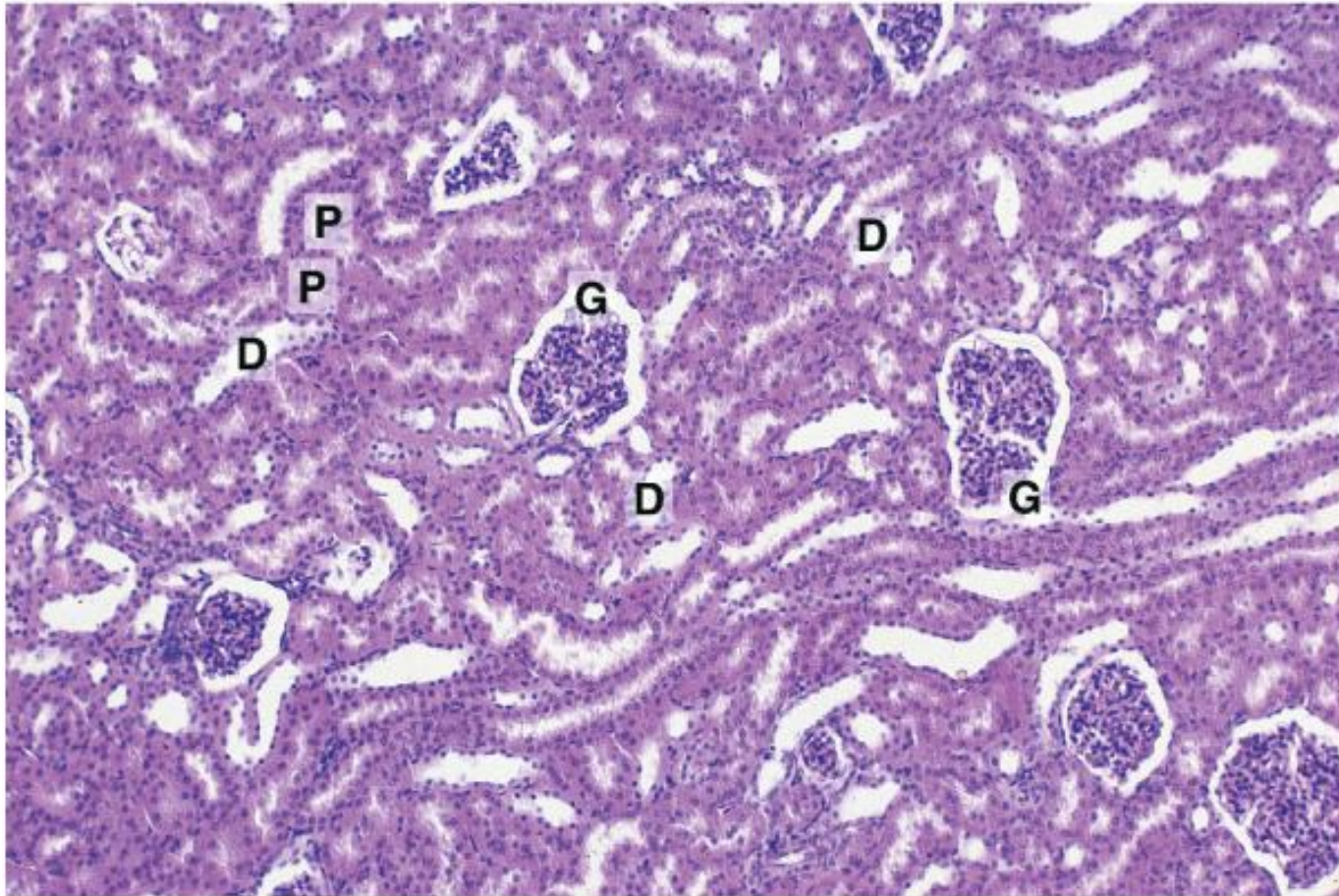




HISTOLOGY

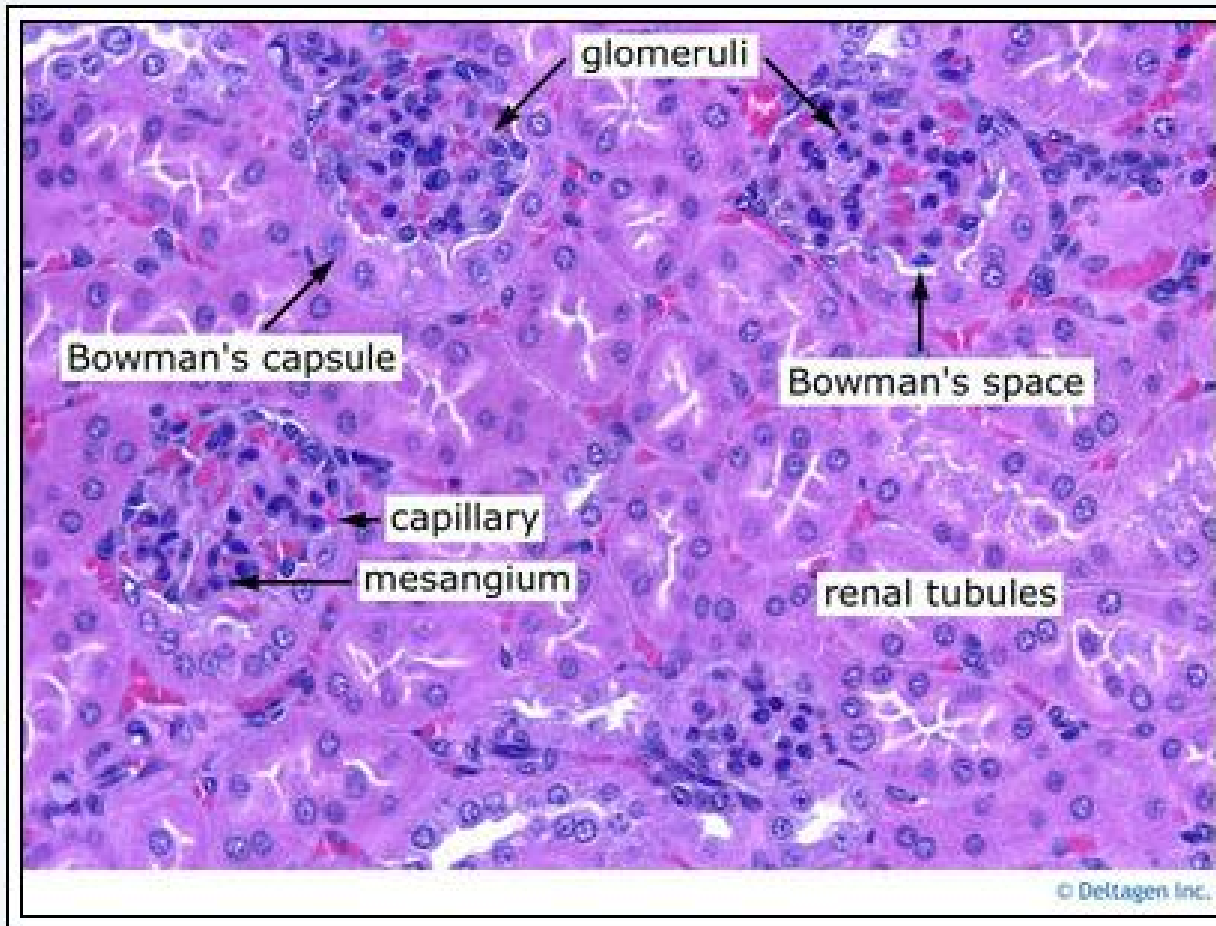
SAMPLES

**Urinary tract**



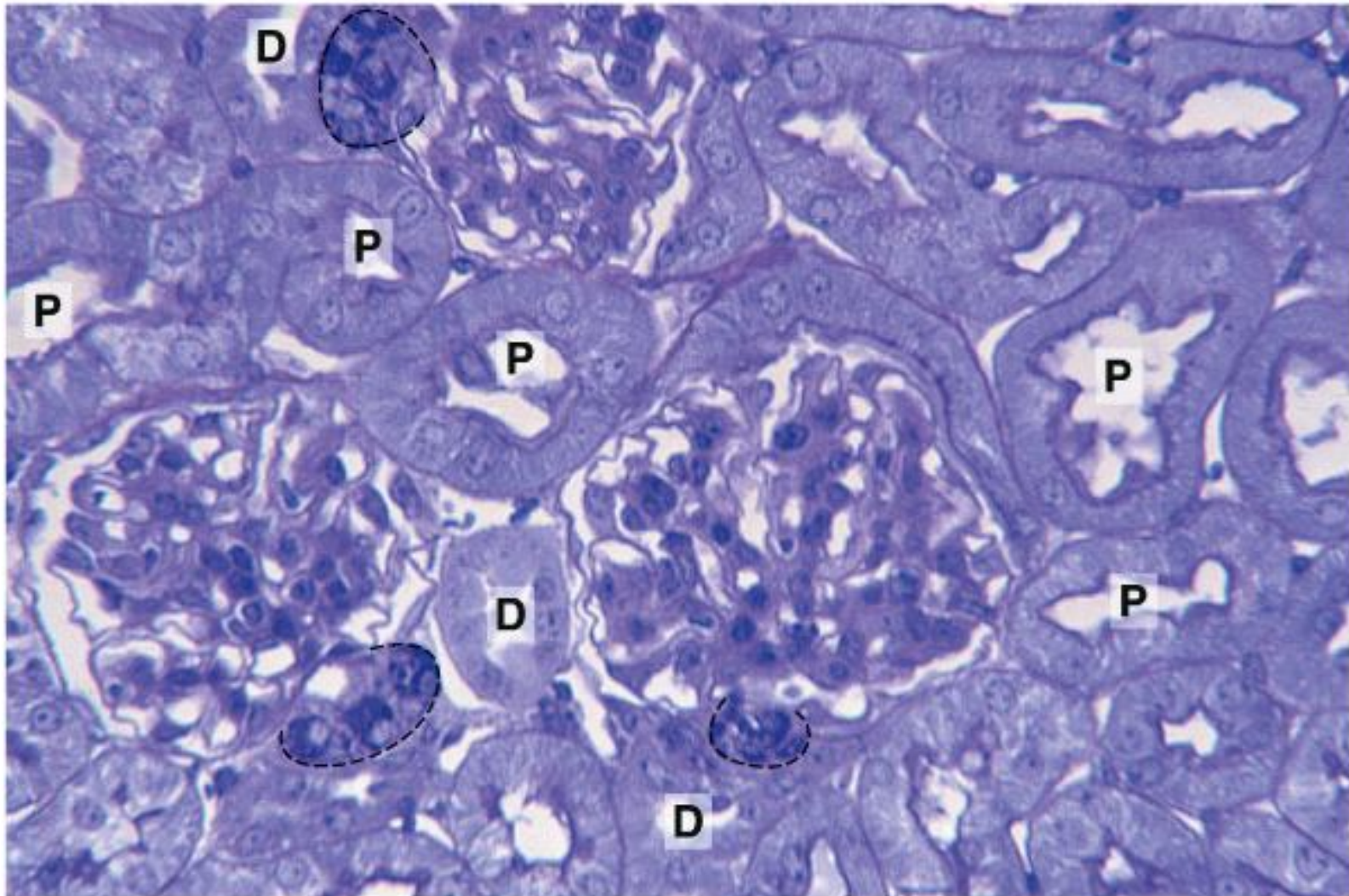
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Bird's-eye view of the renal cortex, which is composed mainly of proximal (P) and distal (D) convoluted tubules and renal glomeruli (G). Pararosaniline-toluidine blue (PT) stain. Low magnification.



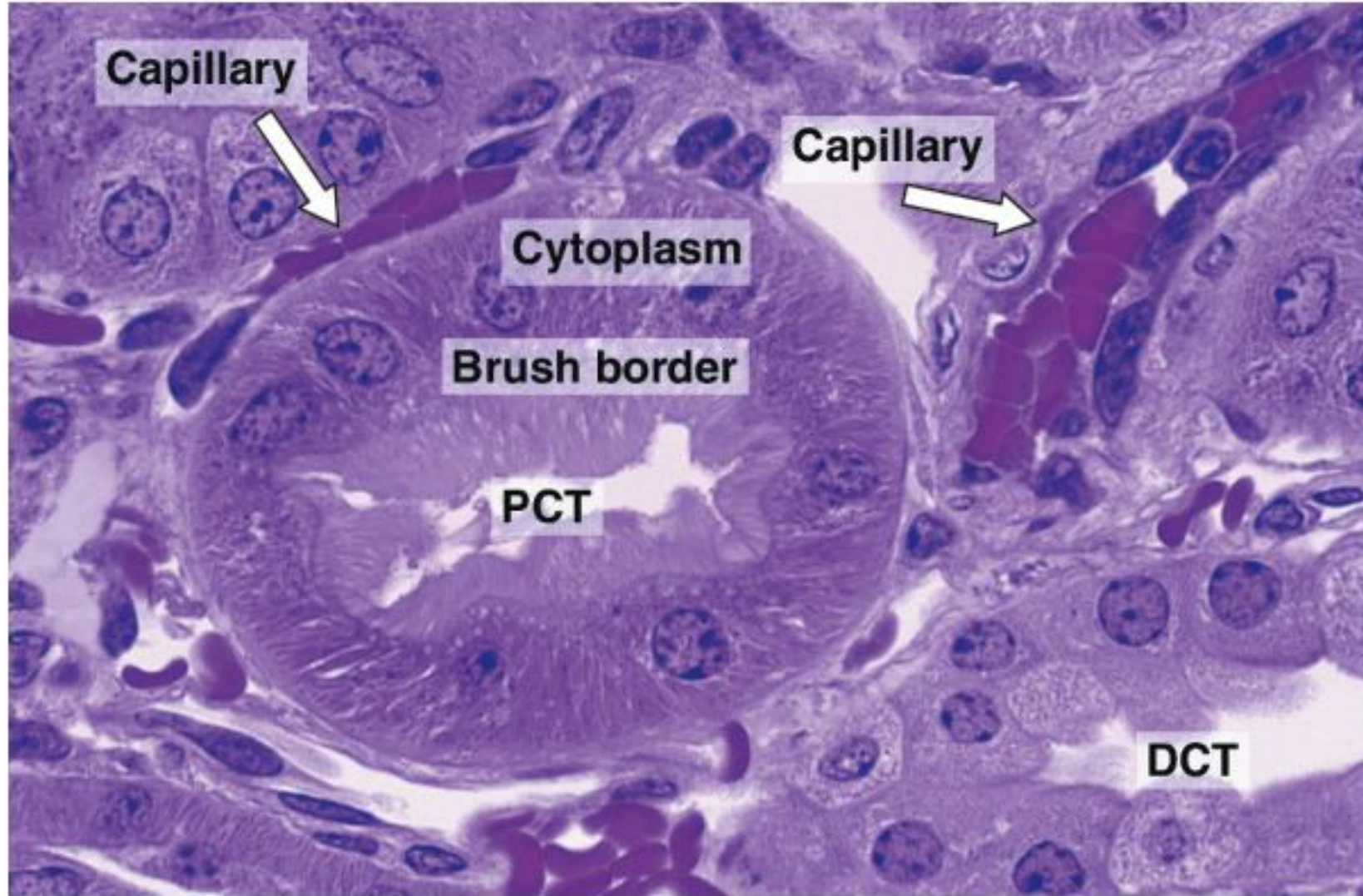
### **Kidney (labels) - histology slide**

This is a histology slide of the kidney.



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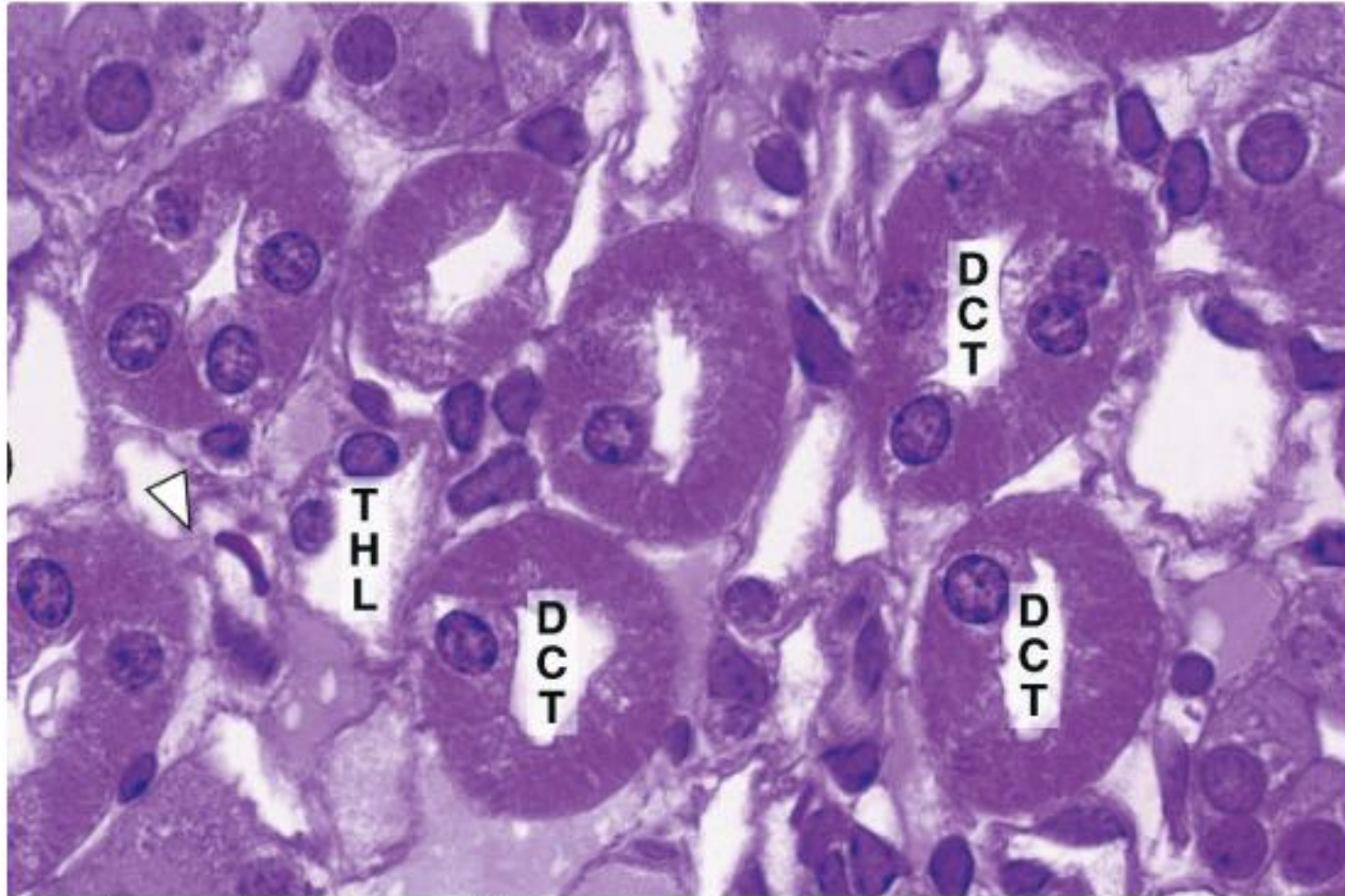
Renal cortex showing proximal (P) and distal (D) convoluted tubules. Sections can be seen through the vascular pole of three renal corpuscles where juxtaglomerular renin-secreting cells appear well stained (broken lines). PT stain. Medium magnification.



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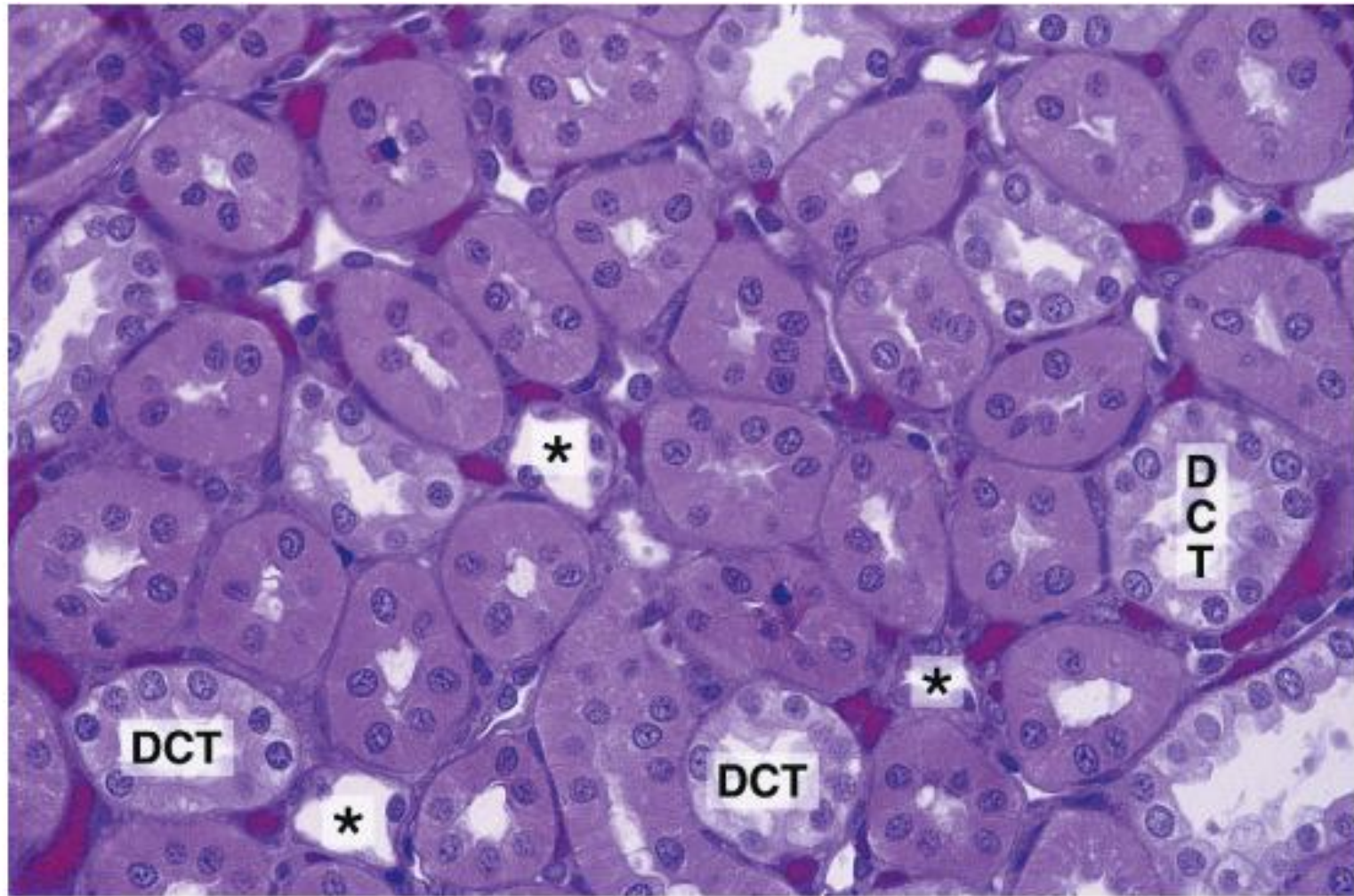
Renal cortex section showing a proximal convoluted tubule (PCT) with its large cuboidal cells presenting a brush border formed by numerous microvilli. Distal convoluted tubules (DCT) are also present. PT stain. Medium magnification.





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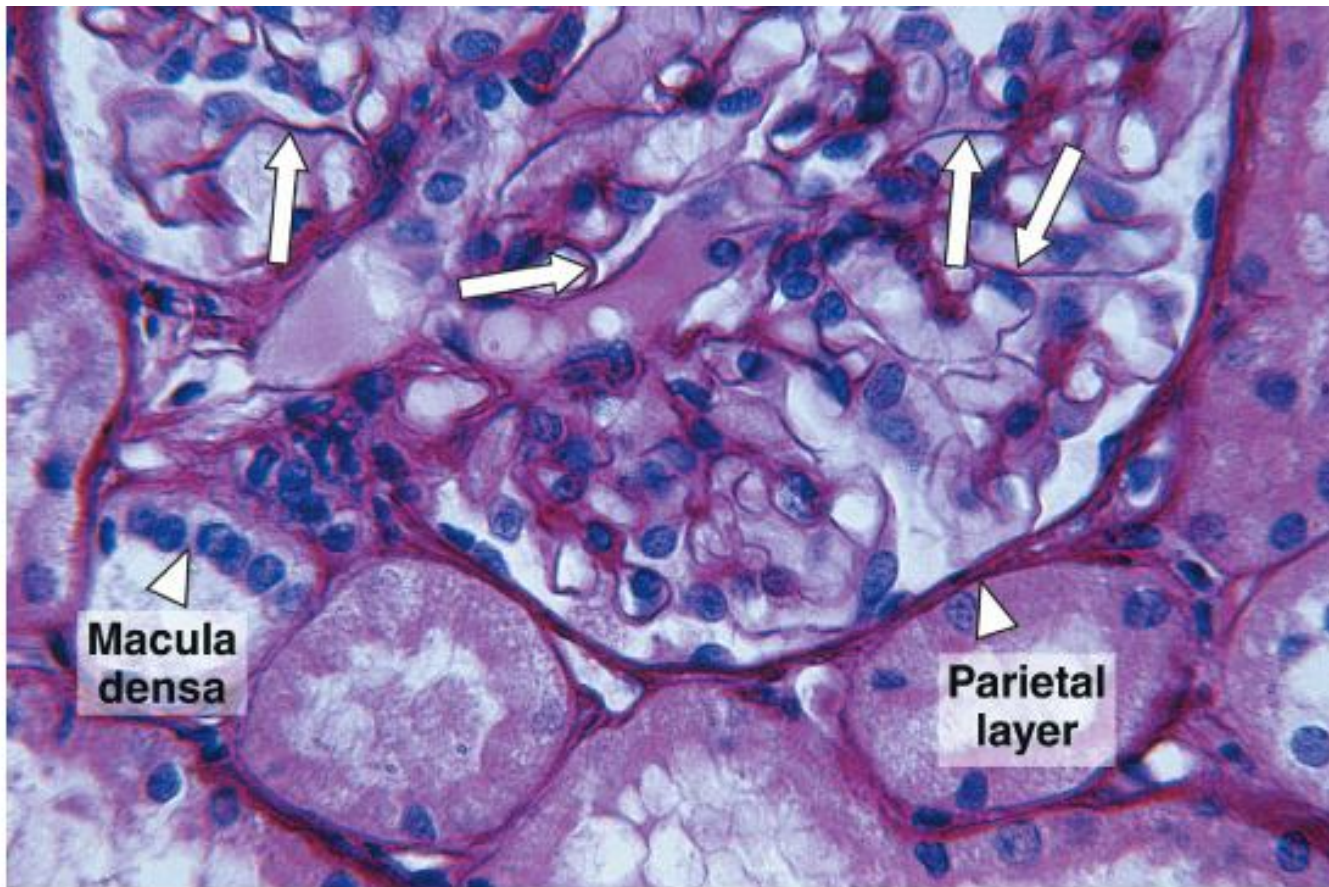
Distal convoluted tubules (DCT) characterized by the absence of brush border. Note also a thin portion of Henle's loop (THL) and a blood capillary (arrowhead). PT stain. Medium magnification.



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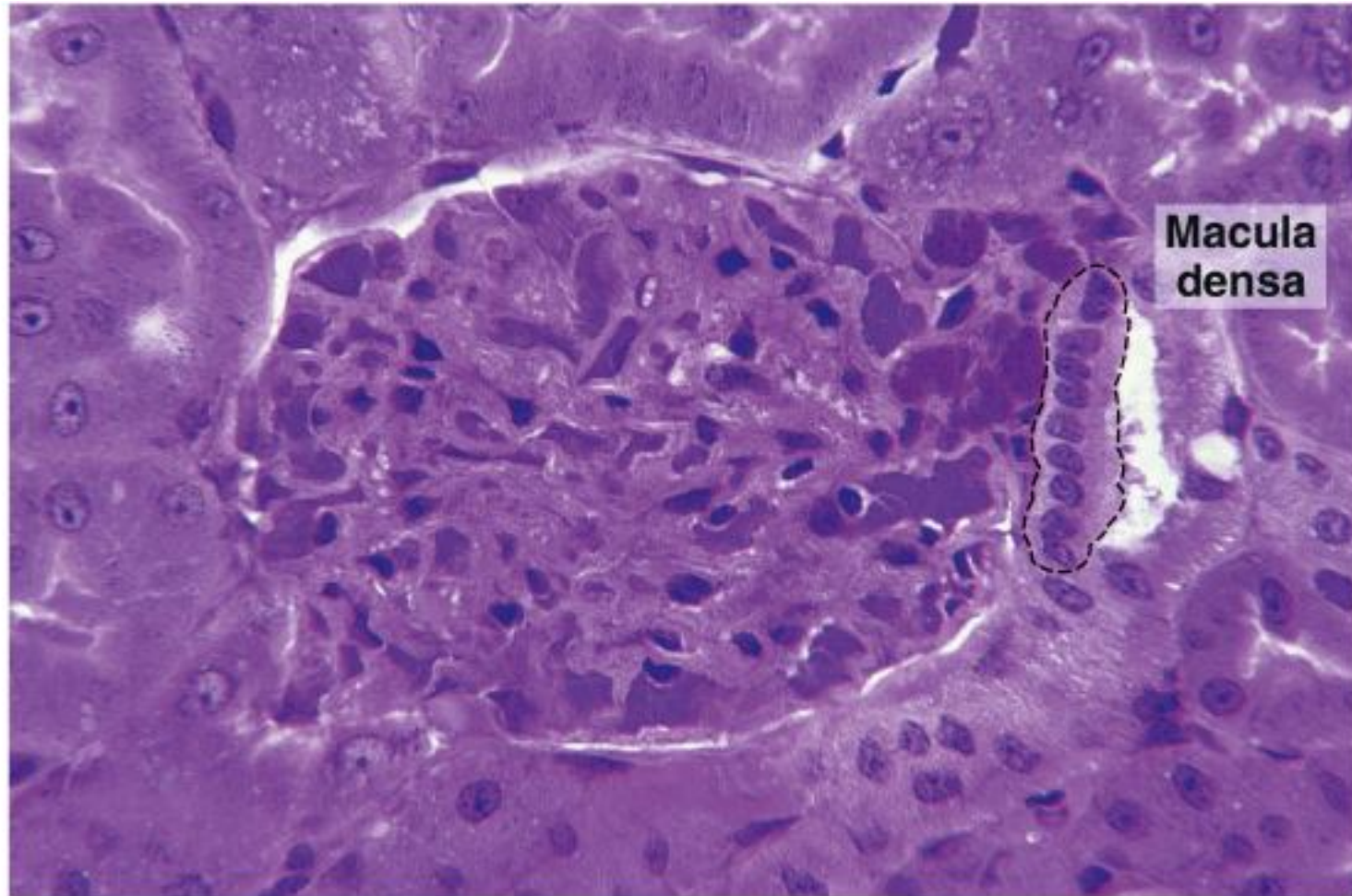
Region of the kidney consisting mainly of distal convoluted tubules (DCT) and thin segments of Henle's loop (asterisks).  
Capillaries filled with blood appear in red. PT stain. Medium magnification.

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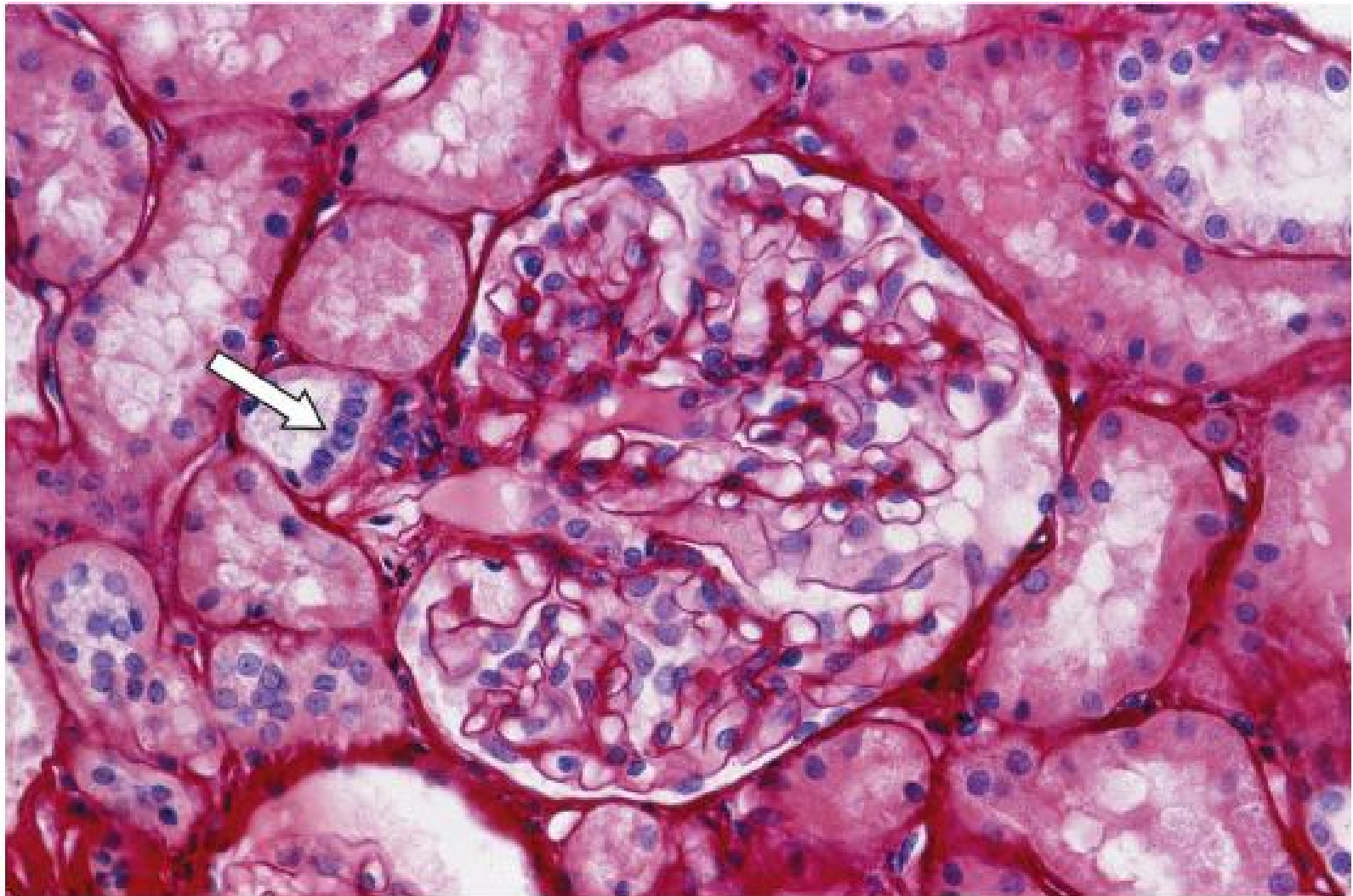
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Photomicrograph of a renal cortex showing parts of two renal corpuscles, macula densa, and distal and proximal convoluted tubules. The collagen type IV of the basement membrane of the glomerular capillaries is clearly visible (arrows). The collagen of the parietal layer of Bowman's capsule and the basal membrane of a distal tubule are shown by the arrowhead. Picrosirius stain. Medium magnification.



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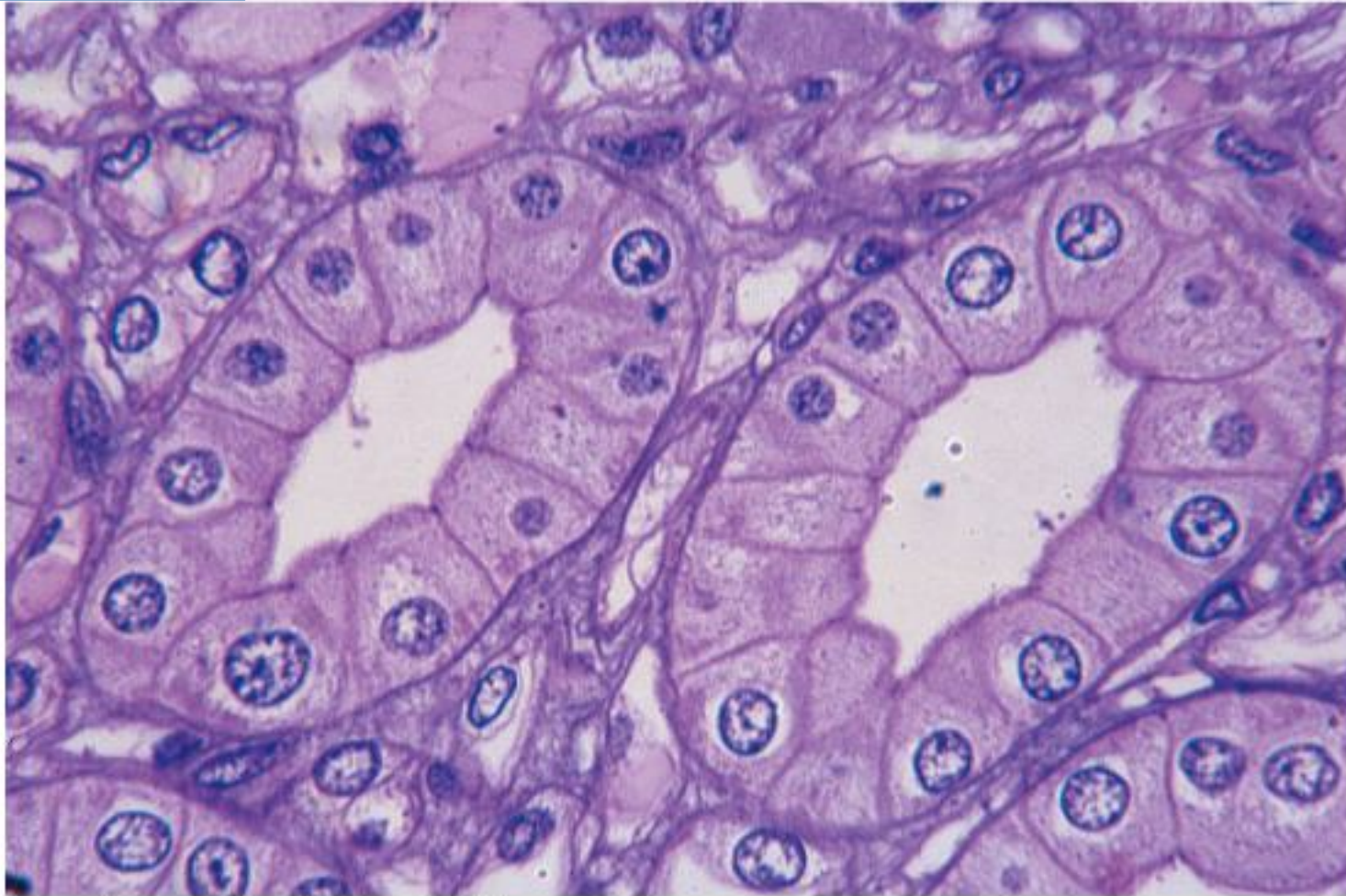
Renal cortex showing a distal convoluted tubule with a macula densa formed by closely packed epithelial cells (broken line). This structure is sensitive to the ionic concentration of the filtrate in the distal tubule and is believed to influence glomerular filtration. PT stain. Medium magnification.



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Photomicrograph of renal cortex. A macula densa is clearly seen (arrow) at the vascular pole of a renal corpuscle. Picrosirius-hematoxylin (PSH) stain. Medium magnification.

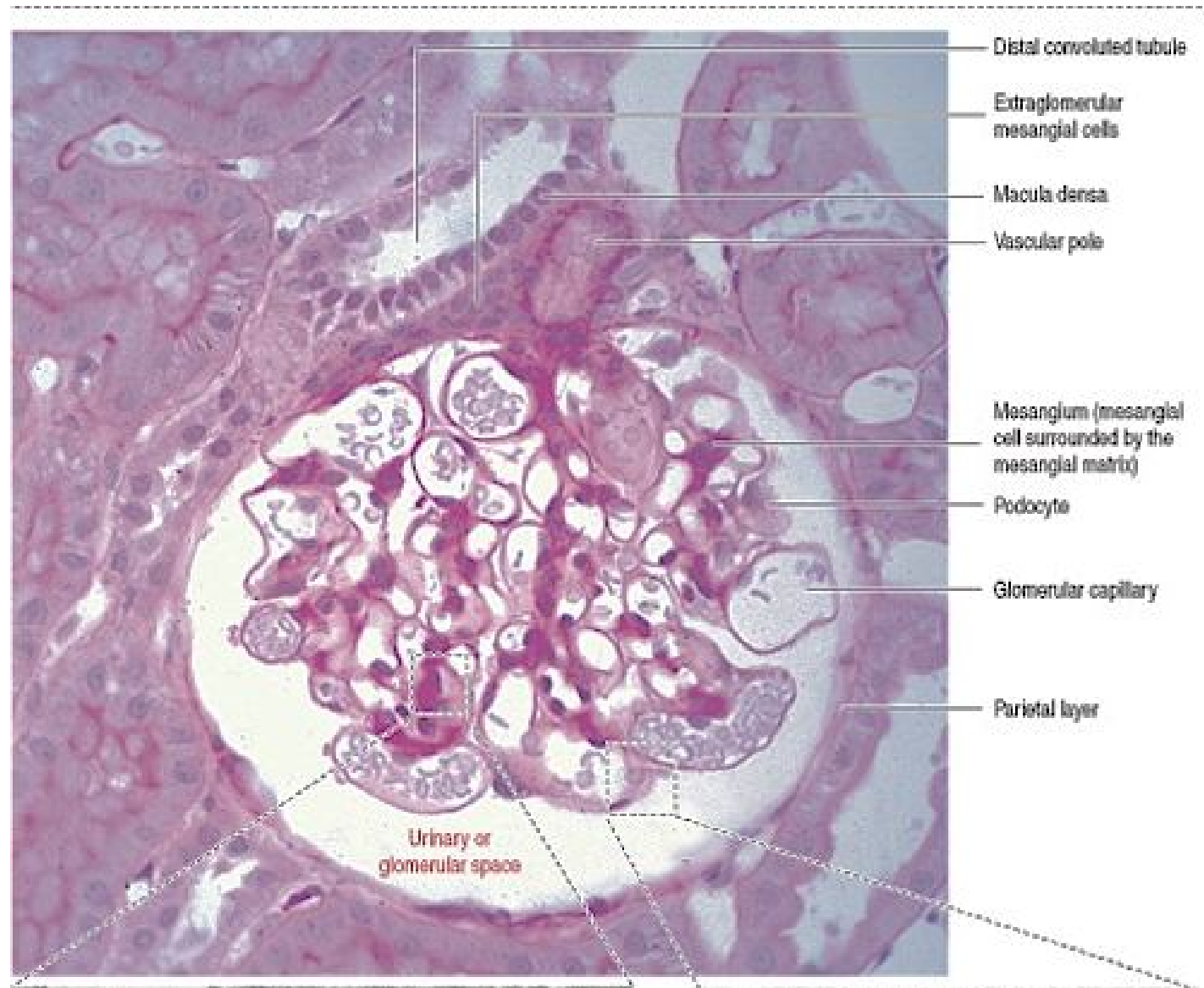
## Collecting ducts

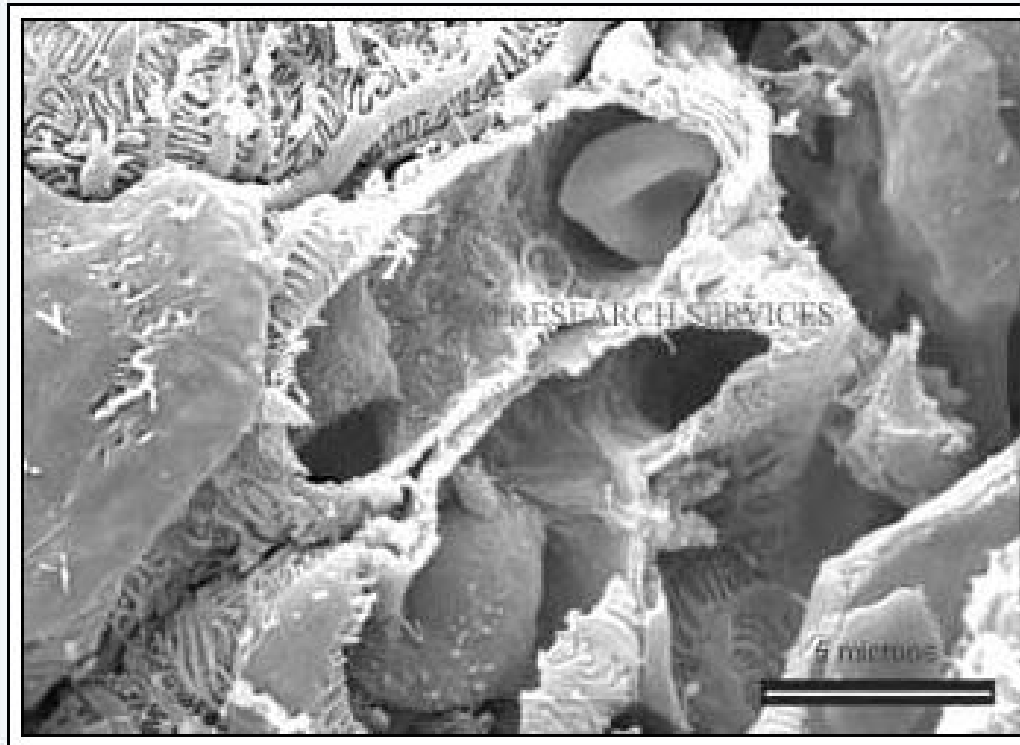


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Photomicrograph of renal medulla with two collecting ducts consisting of cuboidal cells resting on a basement membrane. In this hypertonic region of the kidney, because of the action of the hypophyseal antidiuretic hormone, water is reabsorbed, controlling the water balance of the body. PAS stain. Medium magnification.

## Components of the renal corpuscle visualized by light and electron microscopy



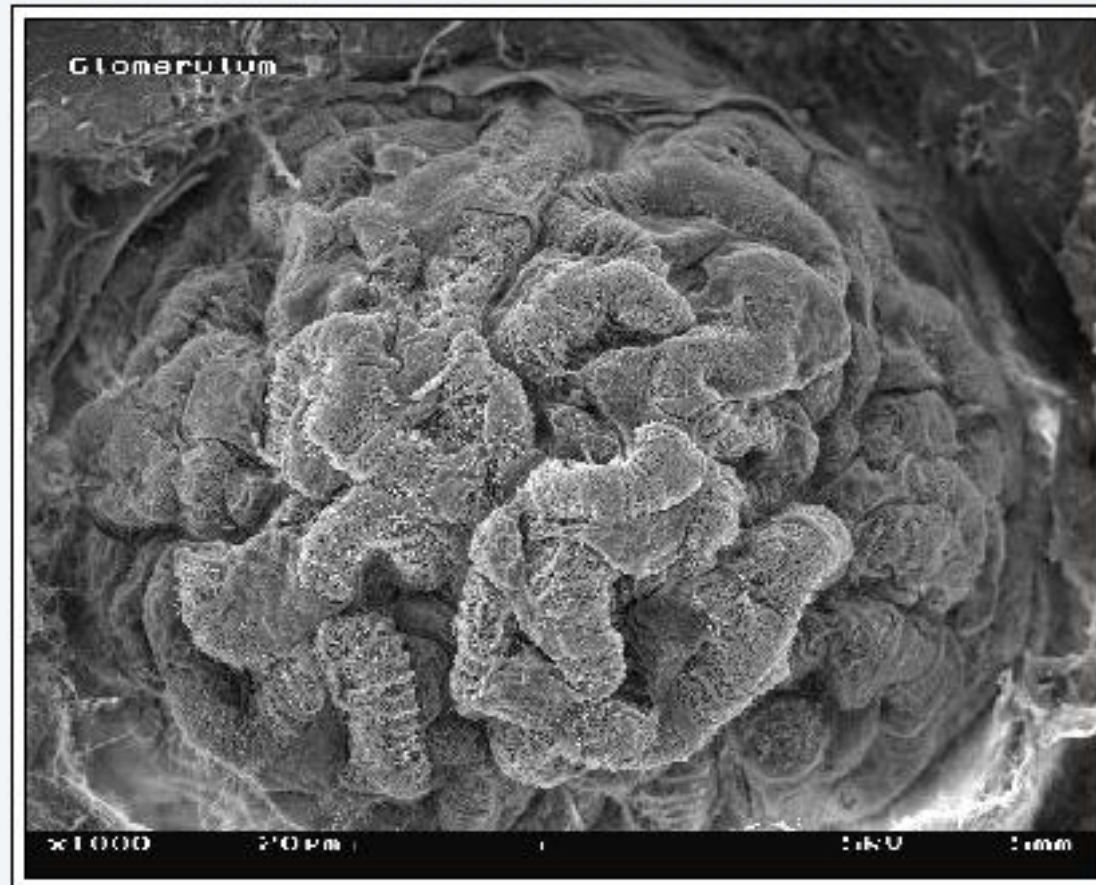


### **Glomerulus - SEM**

This is a scanning electron micrograph of a glomerulus.

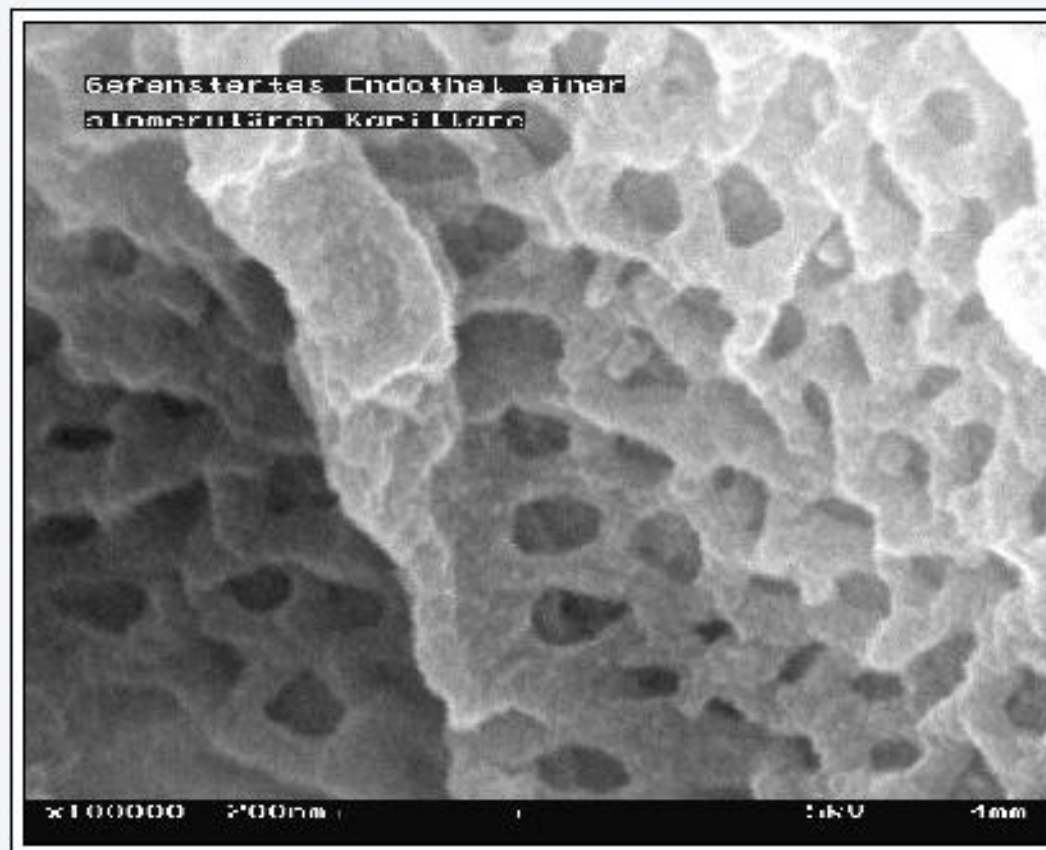
Image courtesy of EM Research Services, Newcastle University.





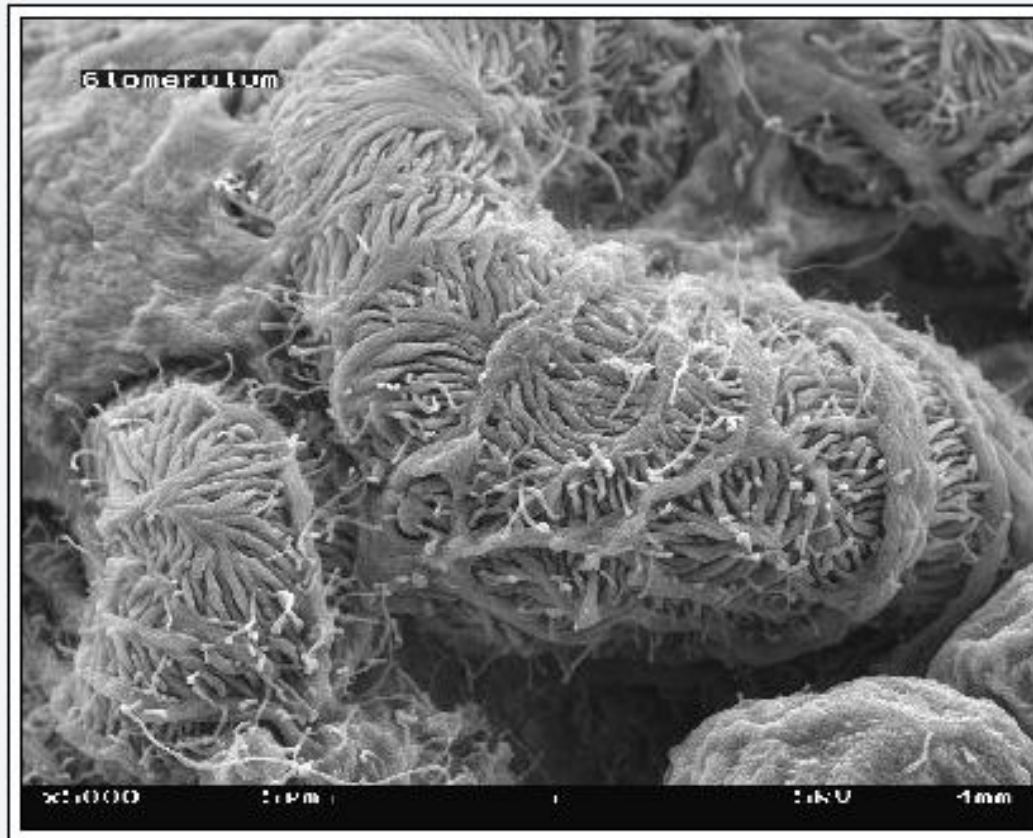
### **Kidney, mouse - SEM**

Glomerulum of mouse kidney in Scanning Electron Microscope. Magnification 1,000x.



### **Kidney, mouse - SEM**

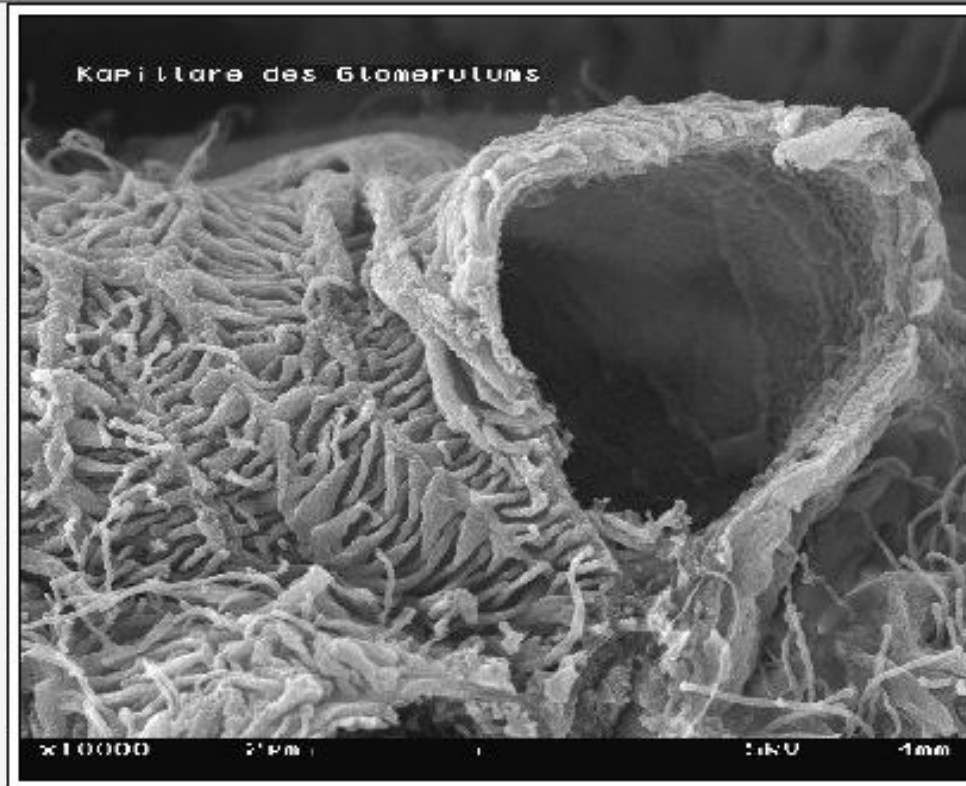
Inner view of fenestrae in capillary of glomerulus in Scanning Electron Microscope.  
Magnification 100,000x.



### **Kidney, mouse - SEM**

Glomerulum of mouse kidney in Scanning Electron Microscope.  
Magnification\_5,000x.

Image courtesy of Wikimedia Commons, user SecretDisc.



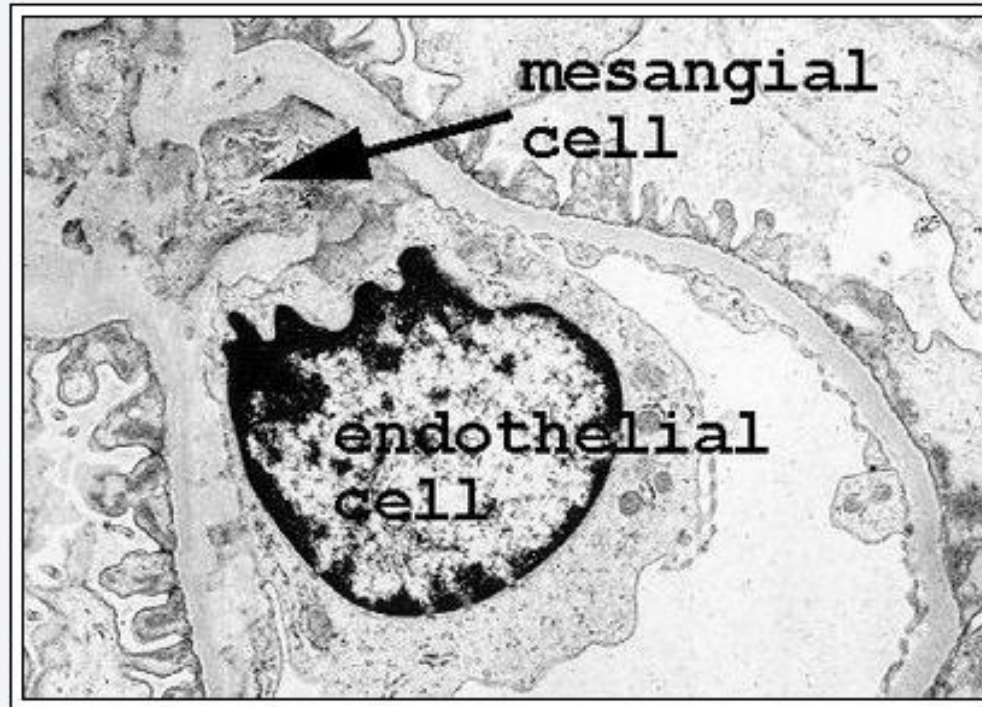
### **Kidney, mouse - SEM**

Glomerulum of mouse kidney with broken capillary in Scanning Electron Microscope. Magnification\_10,000x.

Image courtesy of Wikimedia Commons, user SecretDisc.

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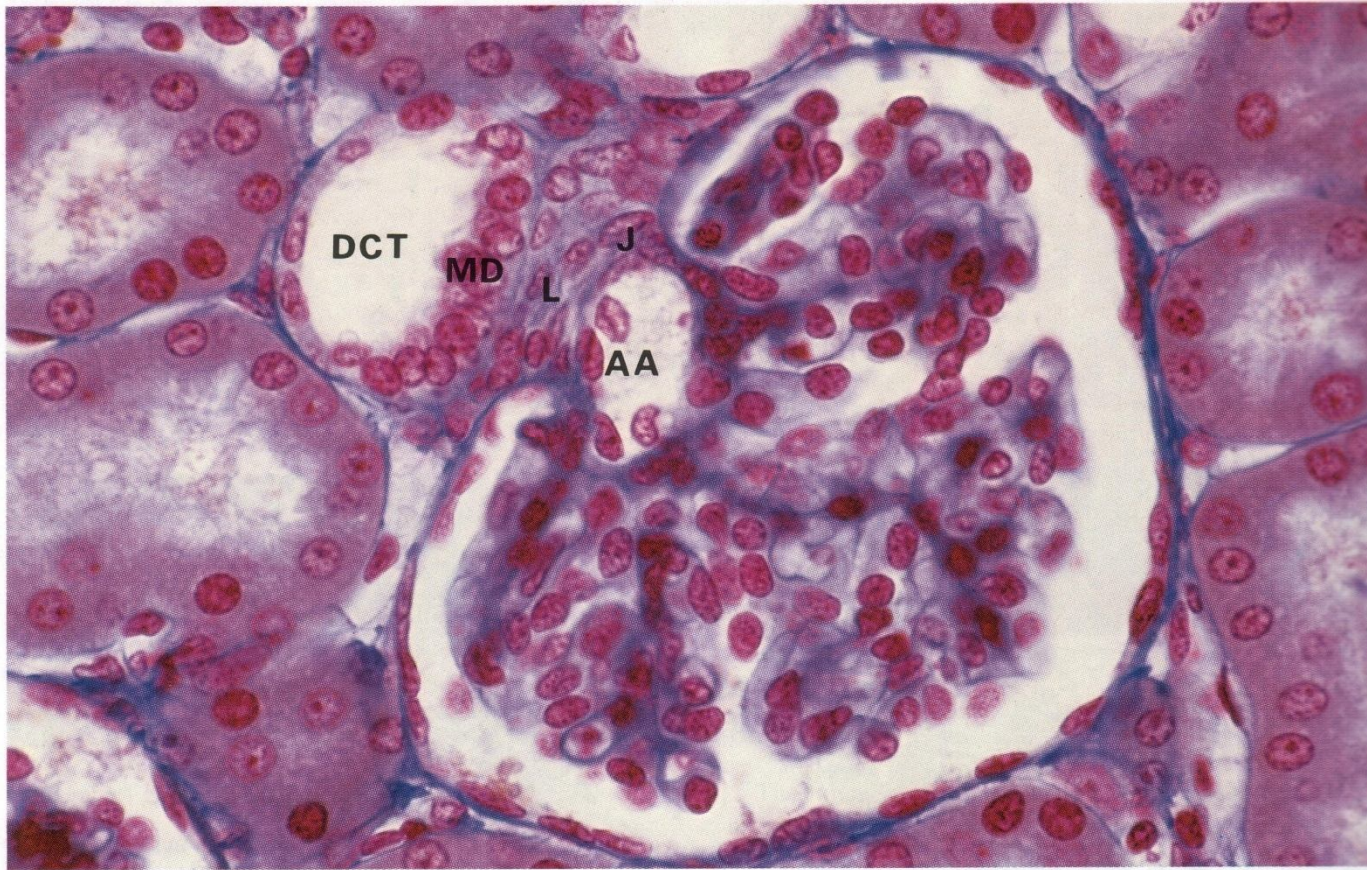
Front-



### **Kidney (labels) - EM**

This is an electron micrograph that shows a portion of 1 capillary loop with adjacent mesangium. The endothelial cell nucleus sits over the origin of the mesangium, which is where it is usually found. A few pores through the endothelial cytoplasm can be seen. The glomerular basement membrane lamina lucida externa is the thin lucent zone just under the foot processes of the visceral epithelial cell. The bulk of the basement membrane is the lamina densa.

## Juxtaglomerular cells and extramesangial cells



## URETER

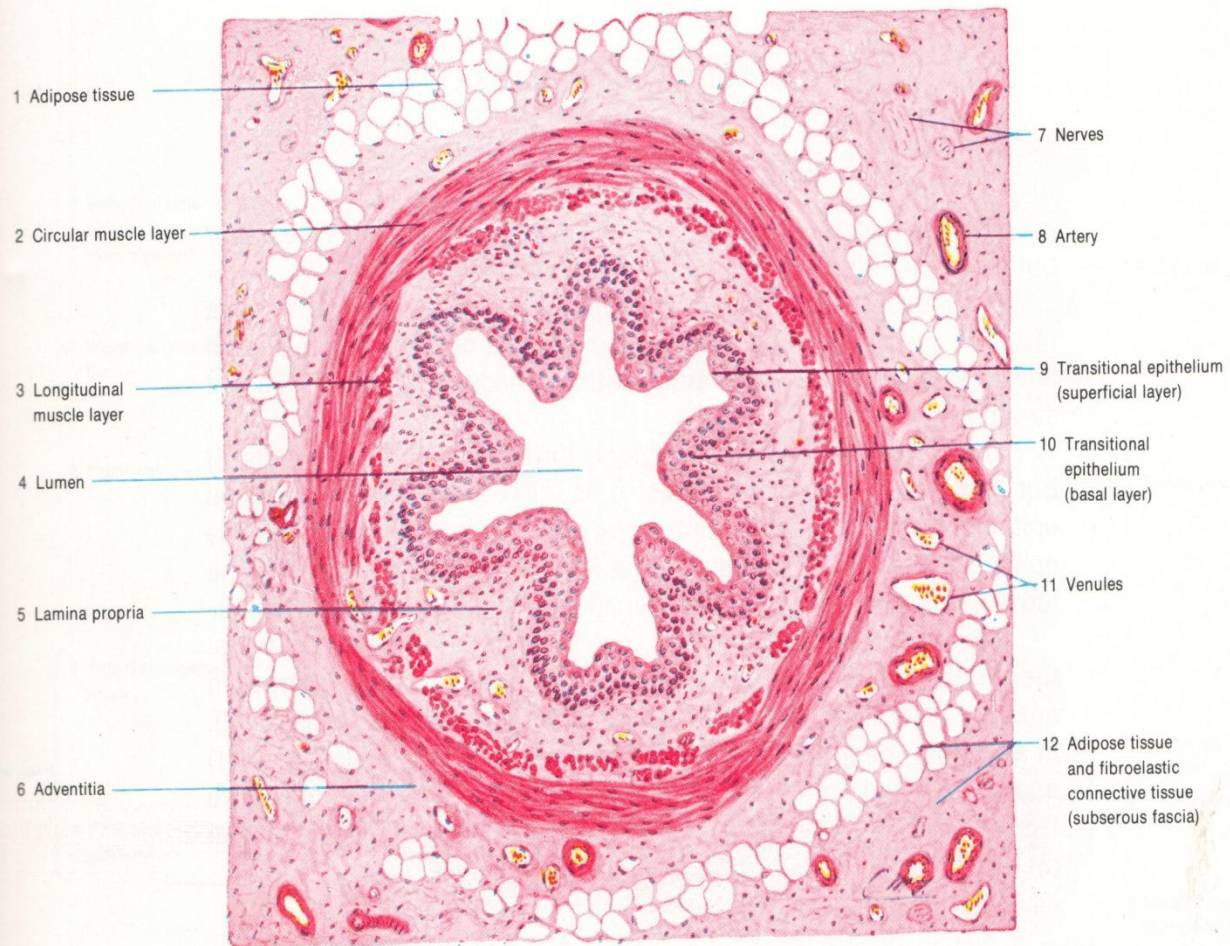
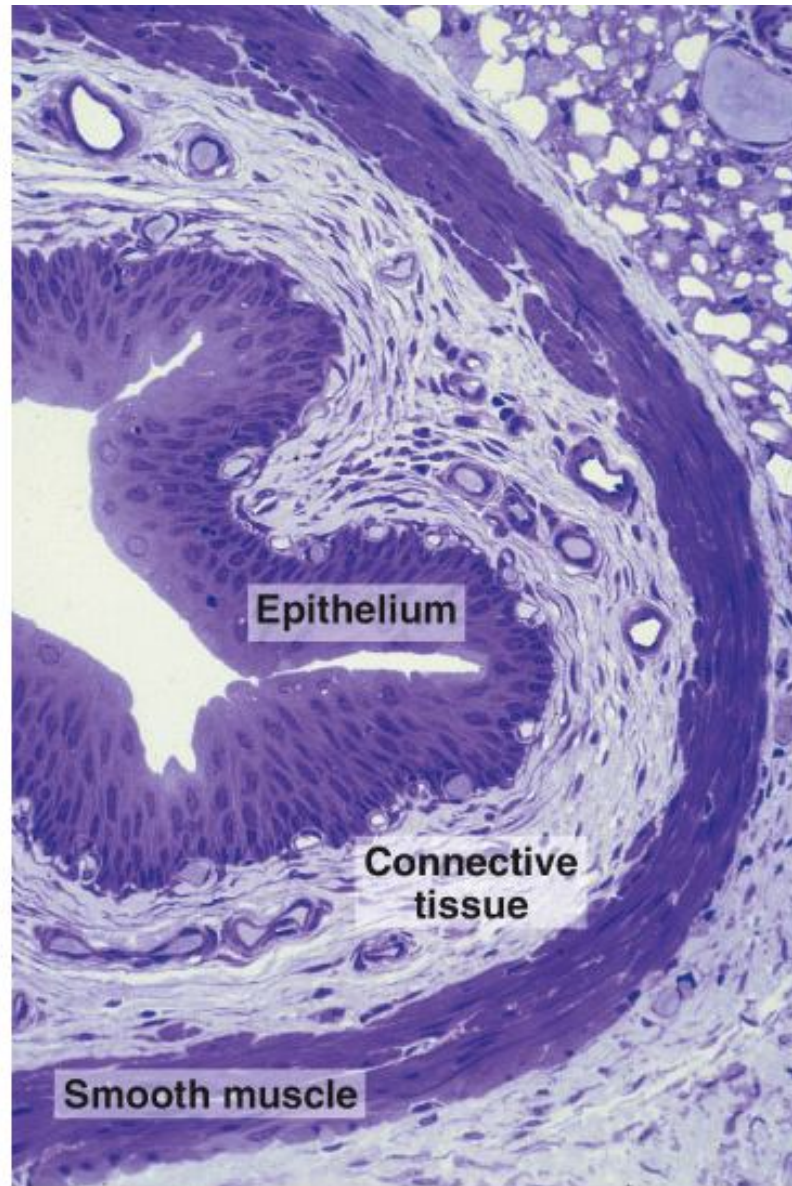


Fig. 1. *Transverse section.*  
Stain: hematoxylin-eosin. 50 $\times$ .

## Ureter



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Photomicrograph showing the main components of the ureter, which consists of an inner layer of transitional epithelium, a highly vascularized connective tissue, a smooth muscle layer, and an outer layer of connective tissue. PT stain. Low magnification.

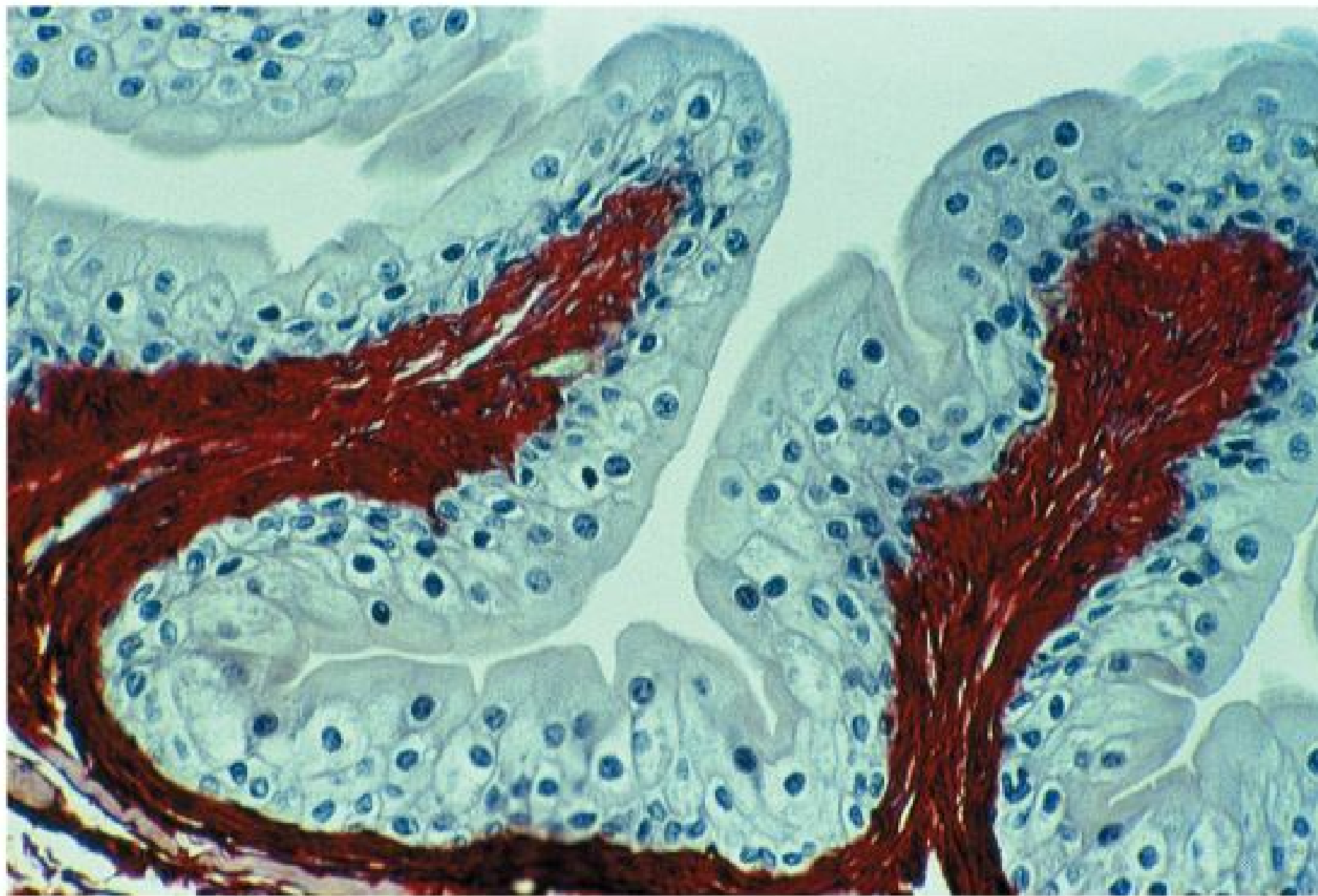




**Ureter (labels) - histology slide**

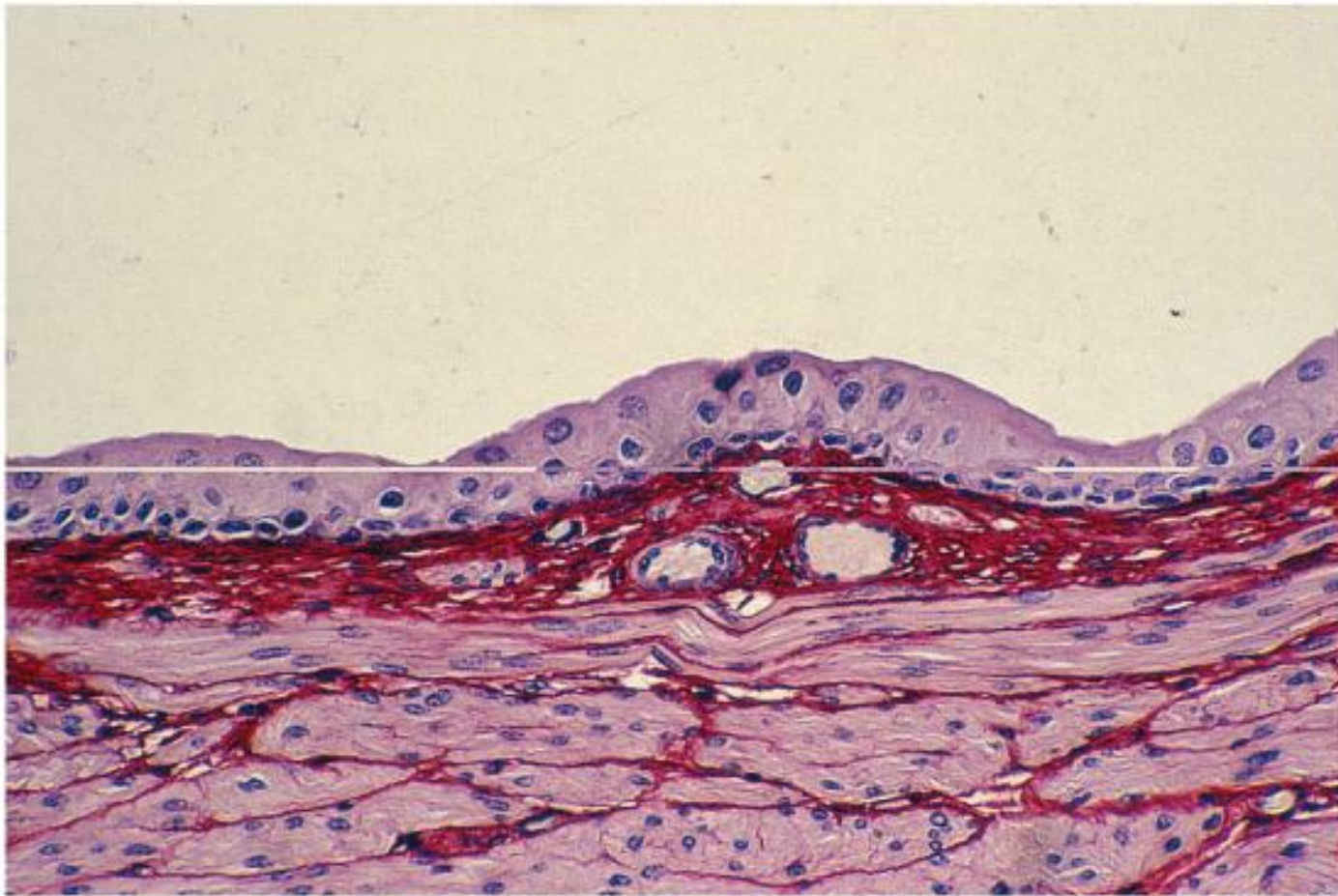
This is a histology slide of the ureter

# Bladder (empty)



A

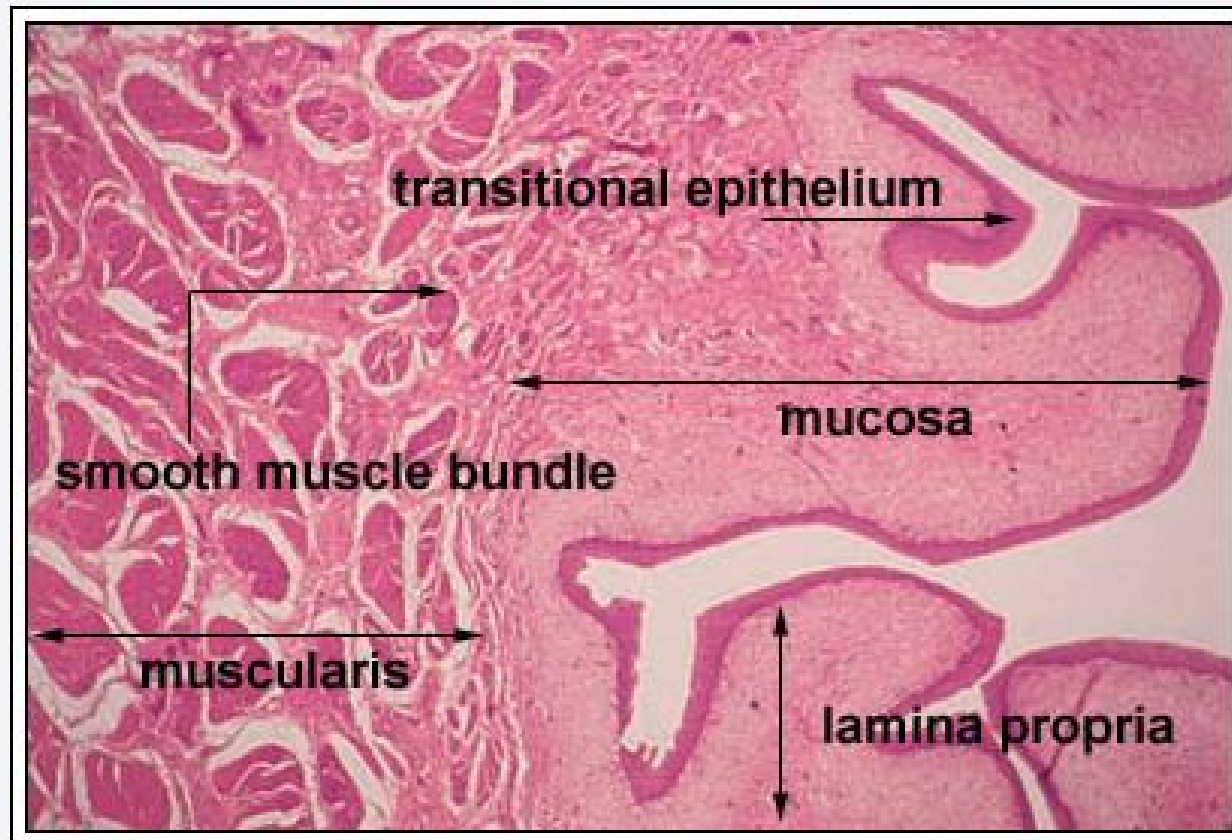
## Bladder (empty)



**B**

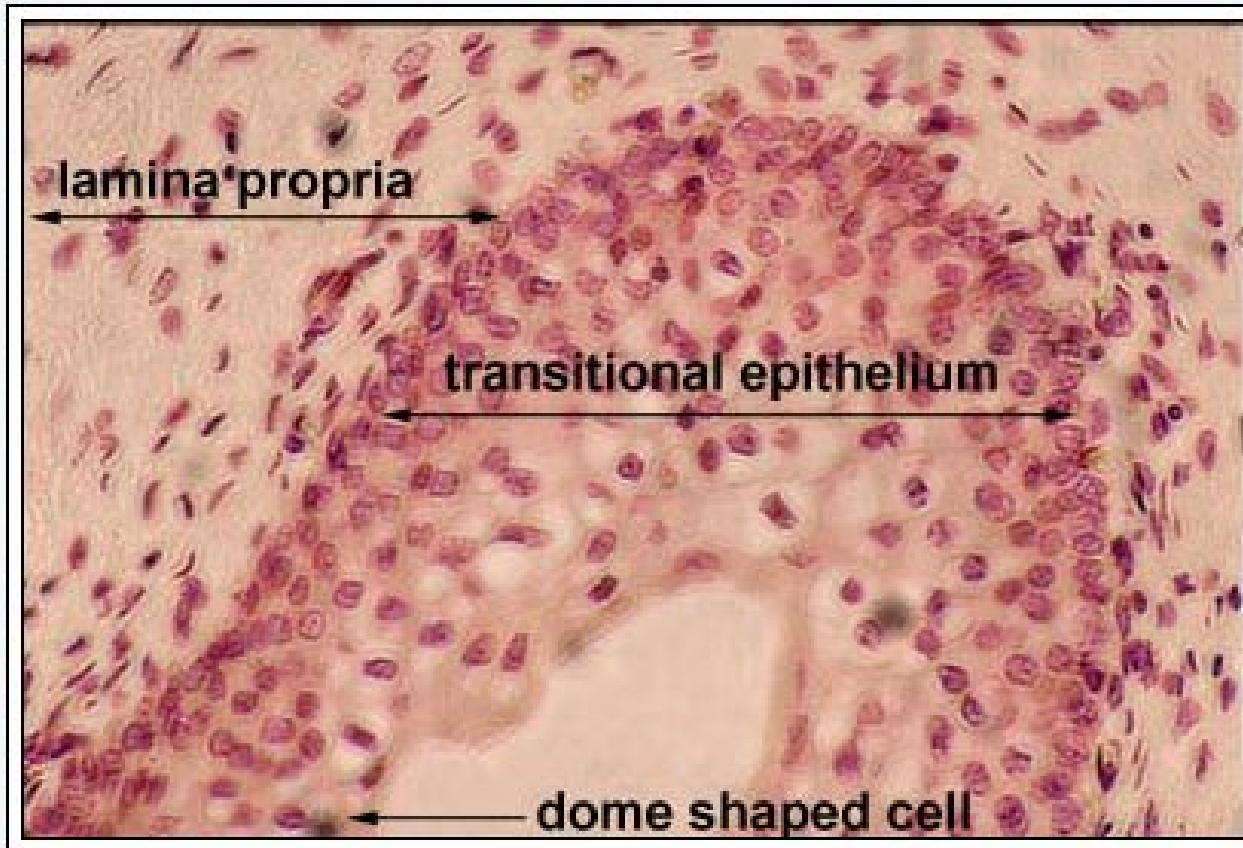
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Compare the structure of the transitional epithelium when the urinary bladder is empty (**A**) or full (**B**). When the bladder is full, the capacity of epithelial cells to slide upon one another reduces the thickness of the epithelium. As a result, the interior surface of the bladder increases. In **B**, note the thin strands of collagen fibers separating bundles of smooth muscle cells. PSH stain. Medium magnification.



### **Bladder (labels) - histology slide**

This histology slide is from the bladder.



### **Bladder (labels) - histology slide**

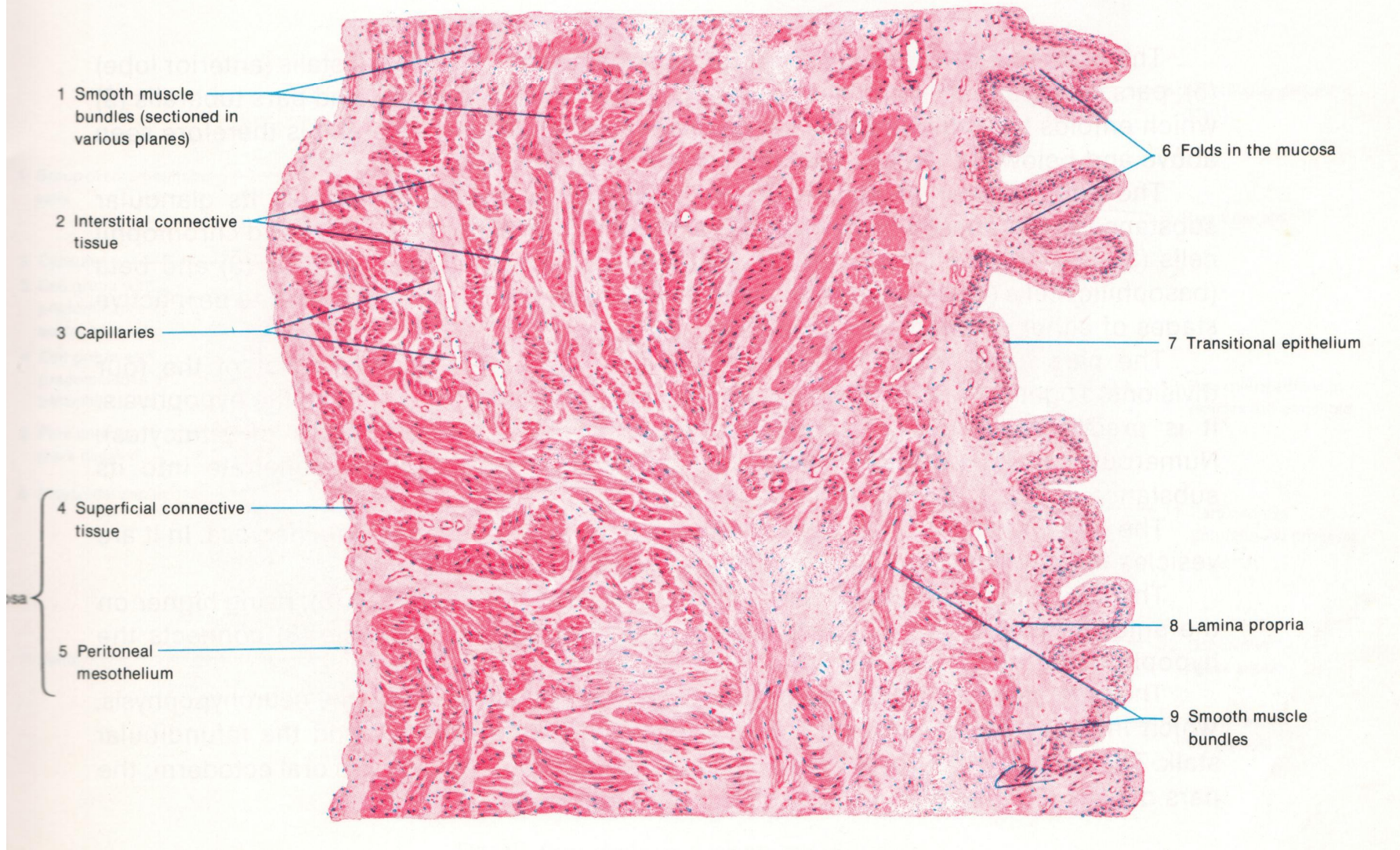
This histology slide is from the bladder.

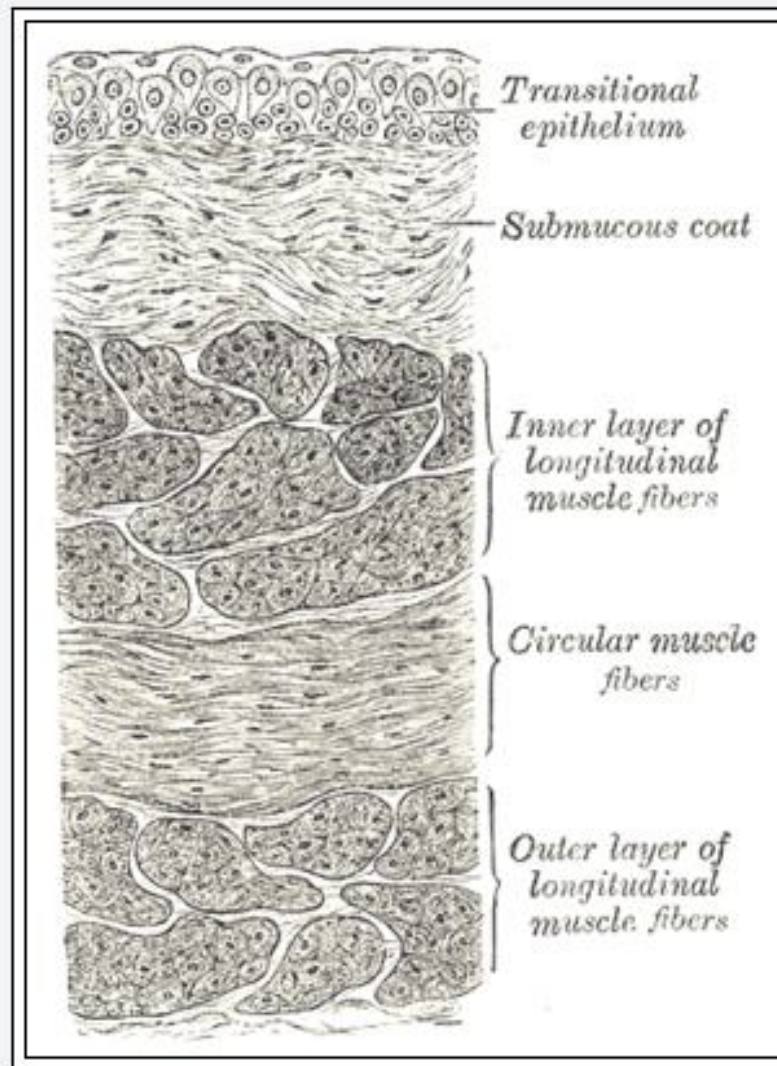
Fig. 1. Wall (transverse section). Stain: hematoxylin-eosin. 40 $\times$ .



Transverse section H&E 160x

### URINARY BLADDER (SUPERIOR PART)

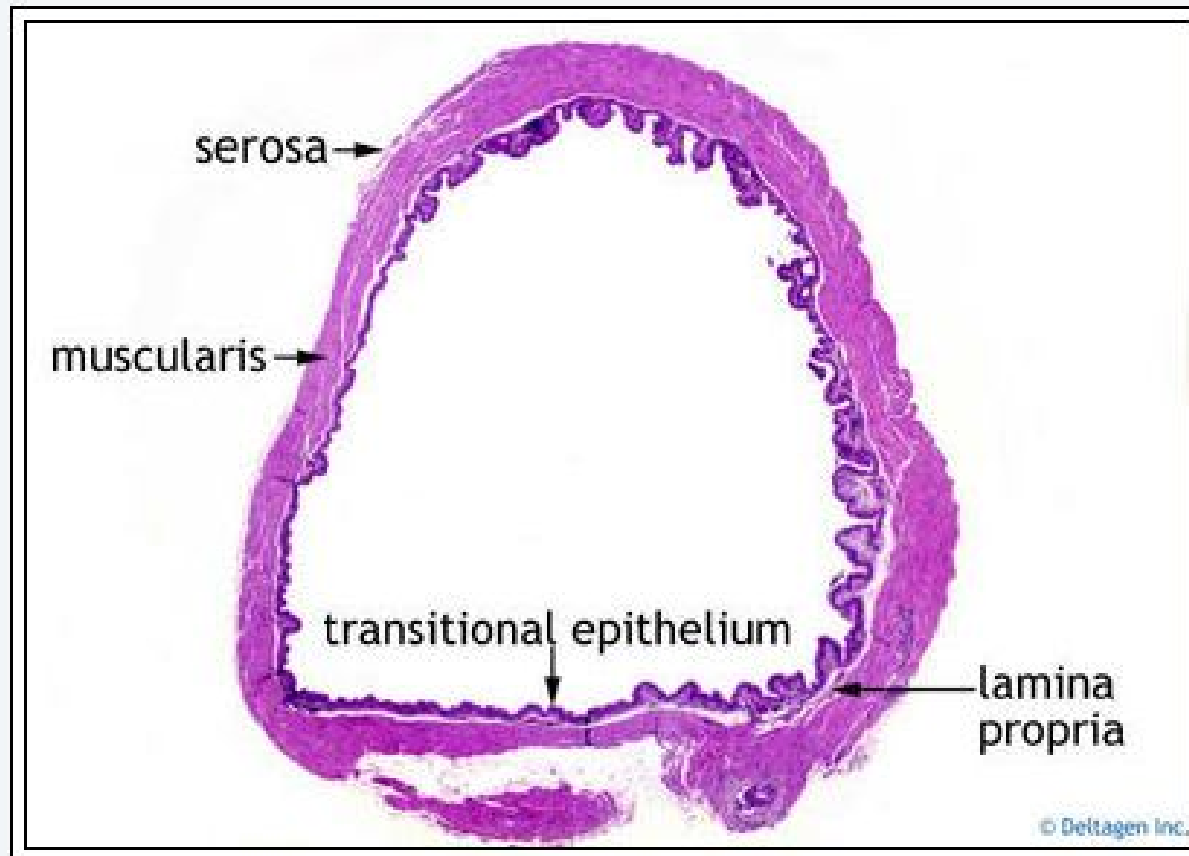




**Bladder (labels) - histology illustration**

Vertical section of bladder wall.





### **Bladder (labels) - histology**

This is a histology slide of the bladder.