GIT practical slides 2nd year 2021 LAB - 1

- <u>The assigned slides:</u>
- 1. Lip
- 2. Tongue x 2
- 3. Parotid gland
- 4. submandibular
- 5. Esophagus (dog)
- 6. Stomach (fundus)
- 7. Gastro-esophageal junction
- 8. Pyloro-duodenal junction
- 9. Recto-anal junction
- 10. Duodenum
- 11. Ileum
- 12. appendix
- 13. Colon (large intestine)
- 14. Liver
- 15. Pancreas



Labial glands

(minor salivary gland, secrete mucus to lubricate the oral cavity) **Minor salivary glands secrete 10% of saliva in a constant rate

Mucous membrane: Non-keratinized stratified squamous epithelium (there is no hair follicles, sweat glands, sebaceous glands in m.m)

Tongue



Circumvallate papillae



Fungiform papillae



**Info about fungiform papillae:
1) Mushroom-shaped 2) contain taste buds on the upper surface 3) found on ant 2/3 of the tongue among Filiform papillae

Foliate papillae

Taste buds



**Info about foliate papillae:

 Cuboidal-shaped 2) taste buds present on the lateral sides 3) contain Von Ebner glands
 found on sides of tongue 5) This type is at high risk for oral cancer Von Ebner glands

Filiform papillae

Epithelium : keratinized stratified squamous epithelium, No taste buds



**info about filiform papillae:

1) The only one contain NO taste buds 2) the only keratinized one 3) rough 4) mechanical receptor

Taste buds



1) Oval structure 2) inside it there is sensory cells 3) hairlets help the taste cells in determining what we taste

Parotid salivary gland



Striated ducts

Parotid gland

Prof Dr. Hala Elmazar, 2019 Submandibular salivary gland

Mixed muco-serous acini



**Submandibular salivary acini can present as mucus acini and serous acini OR crescent of Gianuzzi

Sublingual salivary gland



Most of sublingual acini is mucus acini (90%), crescent of Gianuzzi may present, serous acini present in a very little amount

Mucous acini

Section in the esophagus



Q:How do we know that this section in the esophagus not in other parts of GIT ?

A:through the presence of non-keratinized stratified squamous epithelium mucosa

Esophagus has thick epithelium to facilitate its function (transmition of the food from the oral cavity to the stomach), and help it to tolerate the passage of the different form of food 1) Mucosa 2) Submucosa 3) Musculosa with its 2 layers



Fundic glands in the stomach at higher magnification



In this section there is 2 types of cells can be identified:

1) Parietal cells (oxyntic cells): triangular in shape, secretes Hcl, red in color due to the presence of \uparrow mitochondria and \uparrow SER 2) chief cells (peptic): polyhedral, blue in color, The basal cytoplasm is basophilic due to \uparrow rER, while the apical part contains $\uparrow\uparrow$ zymogen granules for the storage of pepsinogen, protein secreting cells (secrete pepsinogen)

Gastro-esophageal junction



Q:How do we know that this section in the Gastro-esophageal junction not in other parts of GIT ?

A: through 1) the epithelium (stratified squamous in the esophagus, simple columnar in the stomach) 2) the presence of gastric glands

Gastro-duodenal junction



gastro-duodenal junction = pyloro-duodenal junction

Q:How do we know that this section in the Gastro-esophageal junction not in other parts of GIT ? A: through the thickness of Musculosa (IN the pylorus is Thicker, formed of 2 layers of muscles. Thick IC to form the p. sphincter & OL. IN the duodenum its thinner)

Recto-anal junction



There is an important difference between the intestinal glands and the gastric glands: the intestinal glands contain a large amount of goblet cells which secrete mucus help in the protection of the intestinal wall from the waste products, goblet cells **not found** in the gastric glands



Brunner's glands in the submucosa

Duodenum Intestinal villi & crypts



Goblet cells start to appear in the duodenum

**There's no goblet cells in the stomach **there is small amount of goblet cells in the duodenum **large numbers of goblet cells found in the large intestine

colon



Q: How to differentiate colon section from another section?

A: from the num. of goblet cells, colon contain numerous goblet cells

Intestinal crypts contain numerous goblet cells



Payers patches: lies in the side opposite to the mesenteric attachment, Can be considered as a MALT because it's a aggregations of lymph follicles

Colon- taenia coli



of the musculosa



Liver



Pancreas

Exocrine pancreas -



→ Islets of Langerhans

**islets of Langerhans present as aggregations in the middle of exocrine part

Hepatocytes in the Liver



Binucleated hepatocytes

Binucleated hepatocytes: present in the liver normally, its not a pathological landmark, active cells with high regeneration rate



