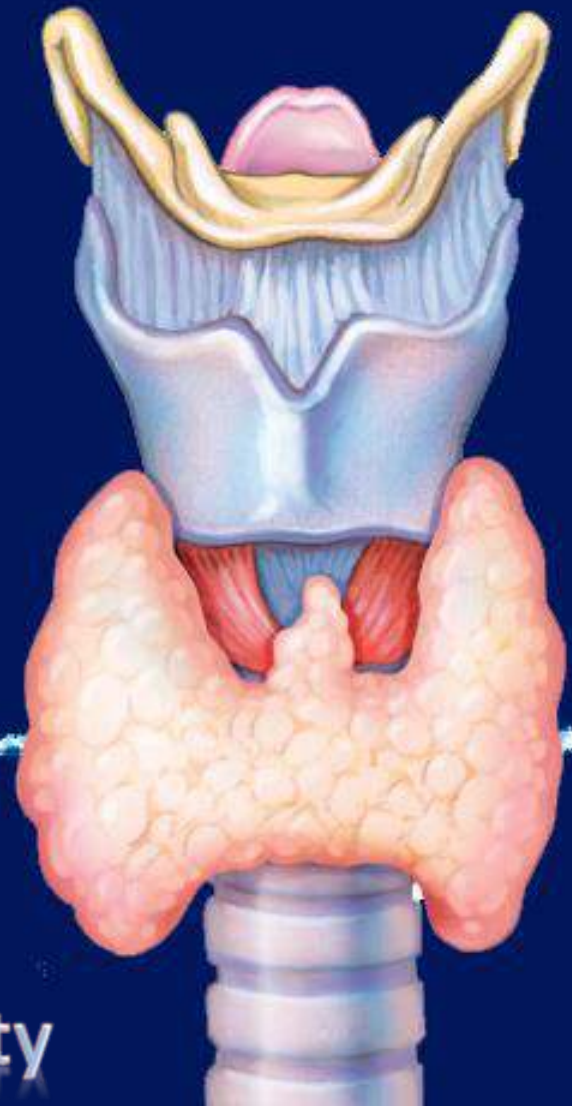


Thyroid gland

Dr. Nour A. Mohammed

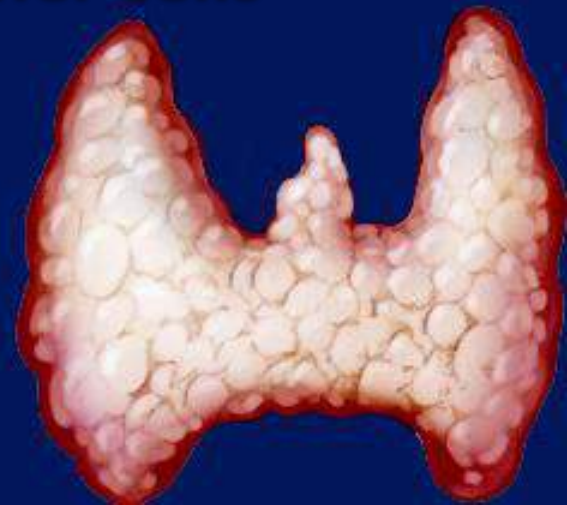
Associate professor of physiology

Faculty of Medicine, Muthah University

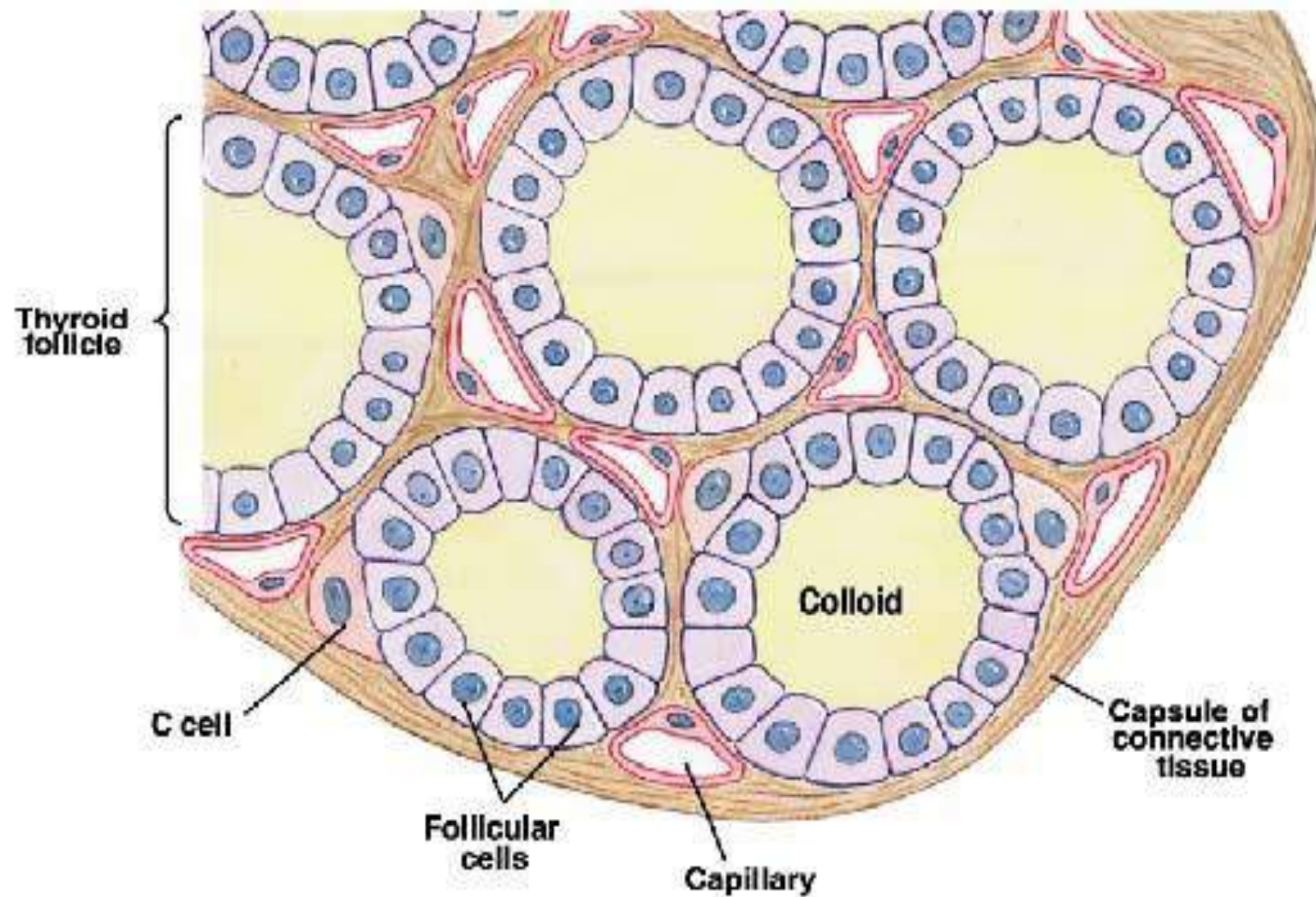


Structure

- It is formed of two lobes connected by a narrow isthmus .
- The gland is formed of thyroid follicles , each follicle is surrounded by a single layer of epithelial cells and its lumen is filled with a protein material called colloid (which is formed and secreted by follicular cells).
- In between the follicles there are other cells called parafollicular cells .
- The gland is richly supplied with blood vessels .



Section of thyroid gland

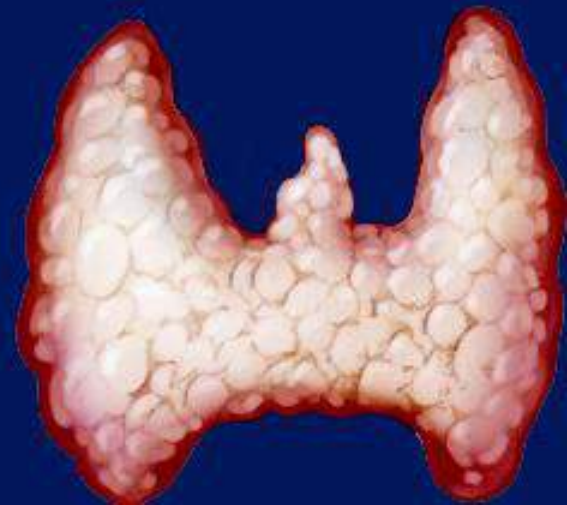


Thyroid hormones

1. Thyroxine (T_4) : tetraiodothyronine
2. Triiodothyronine (T_3)

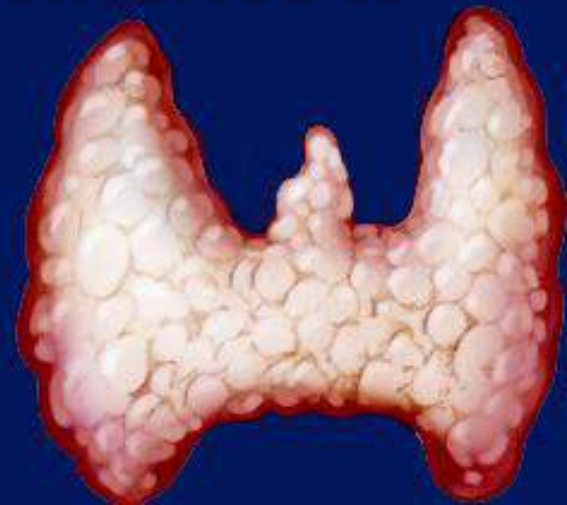
both T_3 & T_4 are formed by thyroid follicles

3. Calcitonin : secreted by parafollicular cells (C cells) it causes lowering of blood Ca^{++} level .



Transport of thyroid hormone

- Once T_3 and T_4 enter the circulation , they bound to plasma proteins and only less than 1% of the hormones are free .
- This free form of the hormone is the active form that can perform its actions .
- T_3 is more active than T_4 and T_4 is converted to T_3 inside target cells.



Mechanism of action :

- Thyroid hormone enter the cells , bind to the receptor in the nucleus → increase transcription of mRNA that stimulate the production of various enzymes in the ribosomes .



Actions of T_3 and T_4

1. *Metabolic function*

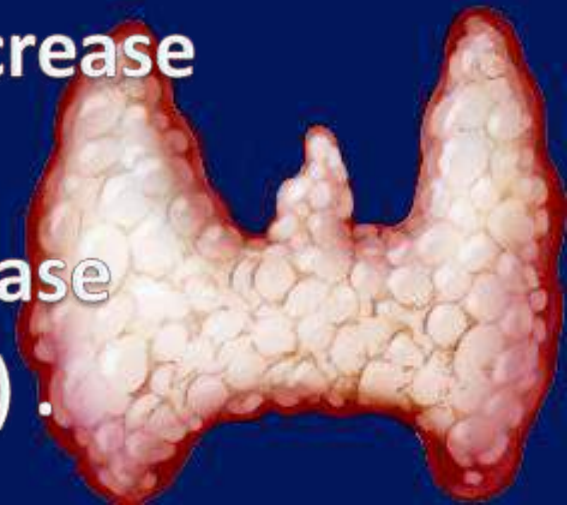
a. Calorigenic action :

Thyroid hormones increase O_2 consumption, heat production and basal metabolic rate (BMR).

b. On protein metabolism :

Normal level of thyroid hormones increase protein synthesis (anabolic effect) .

High level of thyroid hormones increase protein breakdown (catabolic effect) .



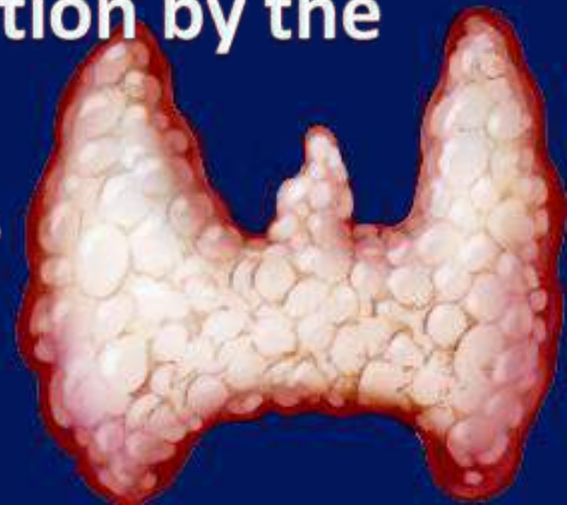
c. On carbohydrate metabolism :

Thyroid hormone increase glucose absorption from GIT so blood glucose increase after meal , but rapidly fall to normal level again due to increased uptake of glucose by the tissues to be used for energy production .

d. On lipid and cholesterol metabolism :

They lower blood lipid and cholesterol by increasing its removal from circulation by the liver.

e. Stimulate conversion of carotenes to vitamin A in the liver .

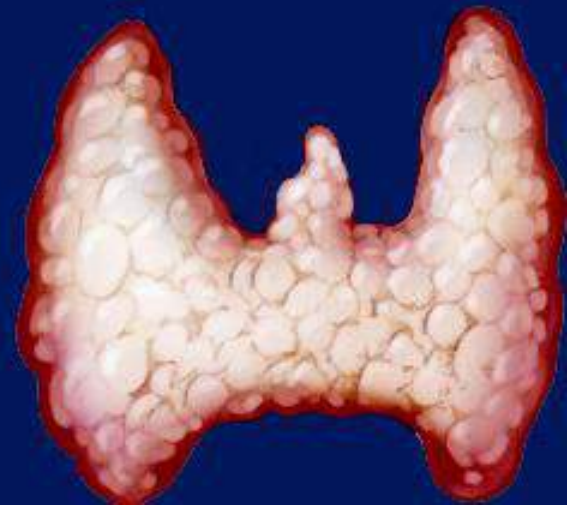


2. Effect on growth and development

Thyroid hormones are necessary for growth and maturation of most tissues.

3. On CNS

- Thyroid hormones are essential for normal brain development during fetal life and in children .
- In adult , they increase response of brain to catecholamines and increase activity of reticular activating system (RAS) .



4. On CVS

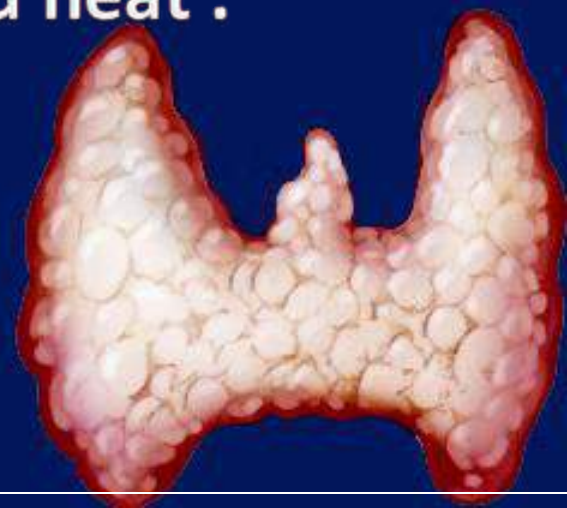
a. They increase all cardiac properties by increasing number and affinity of B adrenergic receptors (to catecholamines) and by direct effect which lead to :

- Increase heart rate (H.R.)
- Increase stroke volume (S.V.)
- Increase cardiac out put (COP)
- Increase systolic blood pressure .

b. Cutaneous V.D occurs by the produced heat .

↓ peripheral resistance causes decreased diastolic blood pressure .

c. Increased pulse pressure.



5. On respiration

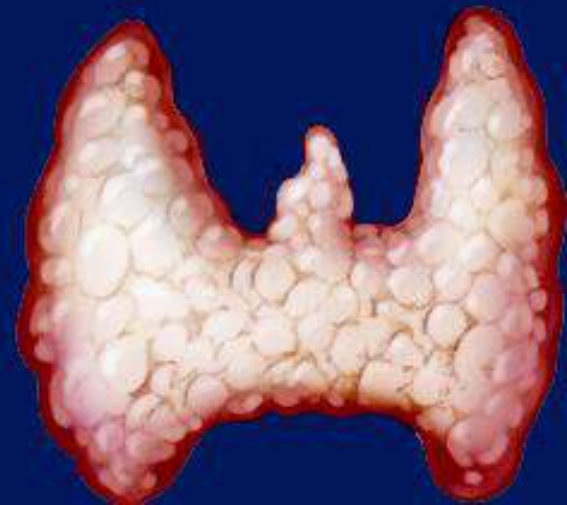
- shift of O_2 curve to Rt by increasing 2,3 DPG in RBCs
- Increase pulmonary ventilation due to increased metabolic rate with more O_2 utilization and more CO_2 formation (through activation of chemoreceptors) .

6. On GIT

- Increase appetite and food intake .
- Increase GIT motility .

7. On sex functions :

- Thyroid hormone are essential for normal menstrual cycle & Spermatogenesis (normal fertility)



Regulation of thyroid hormone

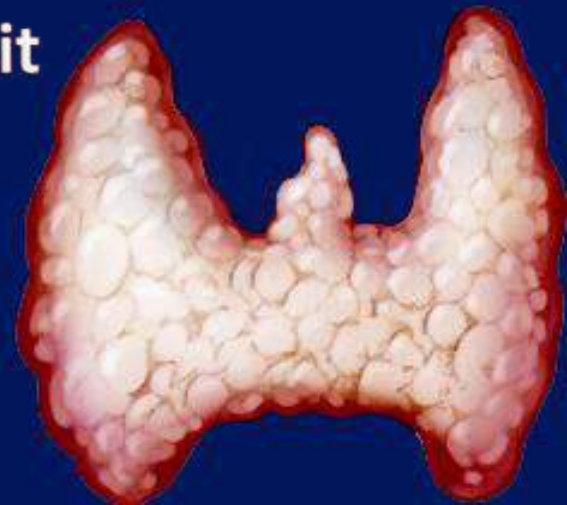
1. Hypothalamic regulation

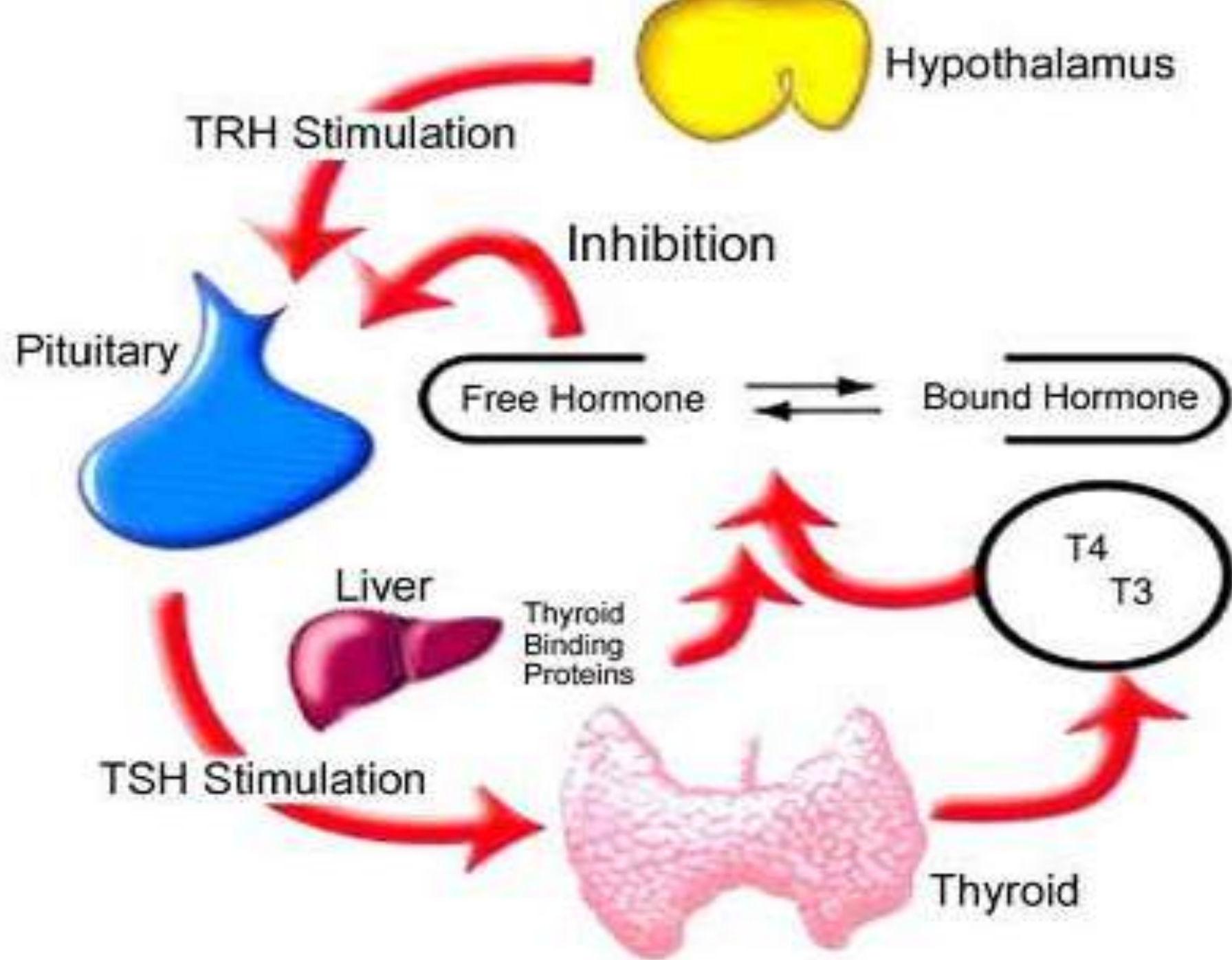
1. TRH (thyrotropin releasing hormone)

- Exposure to cold **increase TRH** release
- Stress , emotions and warmth **decrease TRH**

2. Somatostatin

- It inhibit TSH secretion thus it inhibit thyroid hormone secretion .



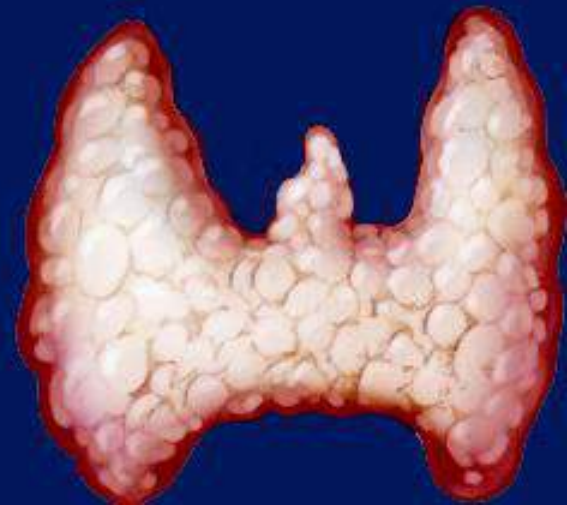


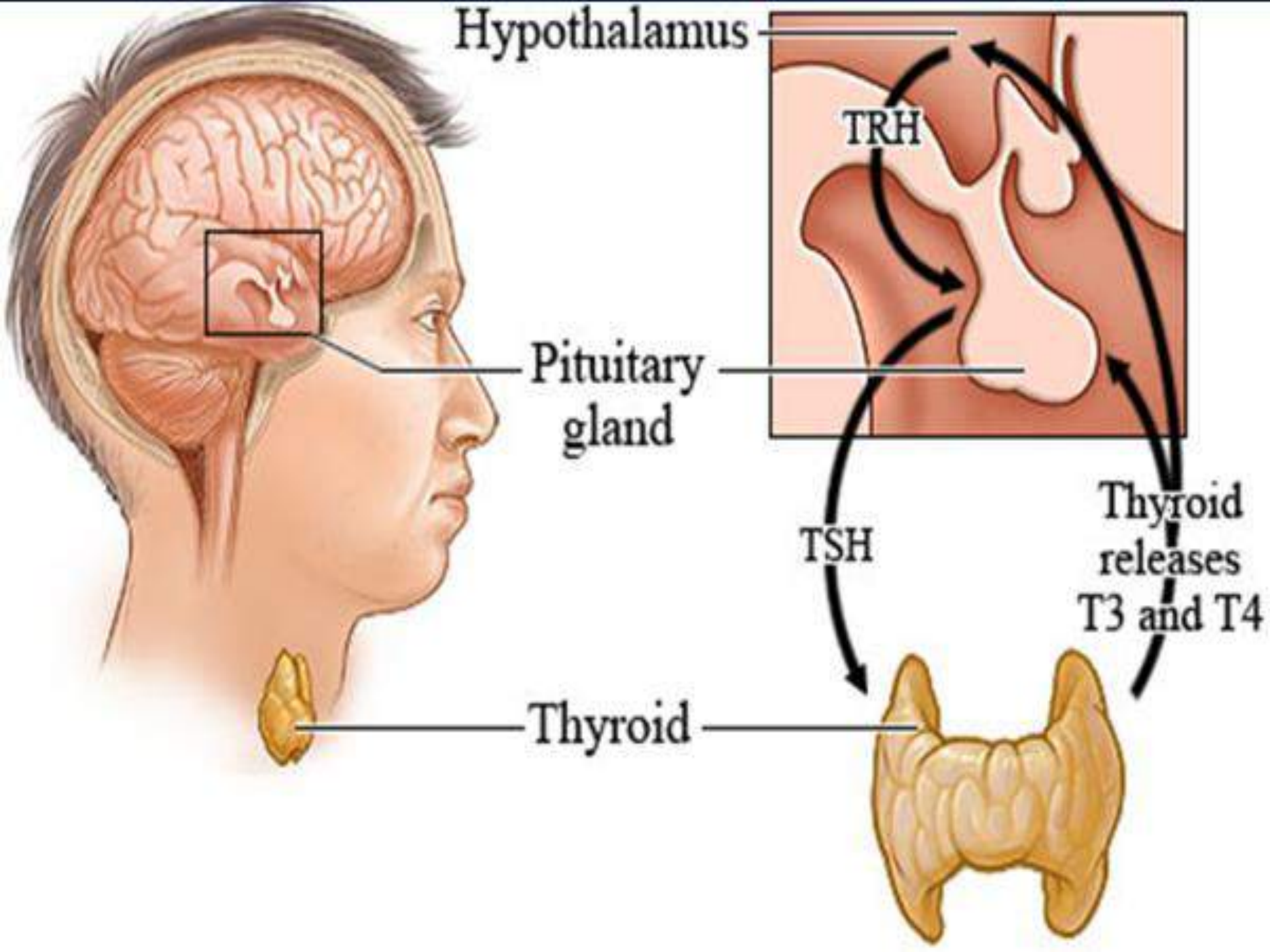
2. Pituitary regulation (TSH)

3. Feedback regulation :

- \uparrow free T_3 and T_4 in blood inhibit TSH secretion by negative feedback on anterior pituitary and hypothalamus .

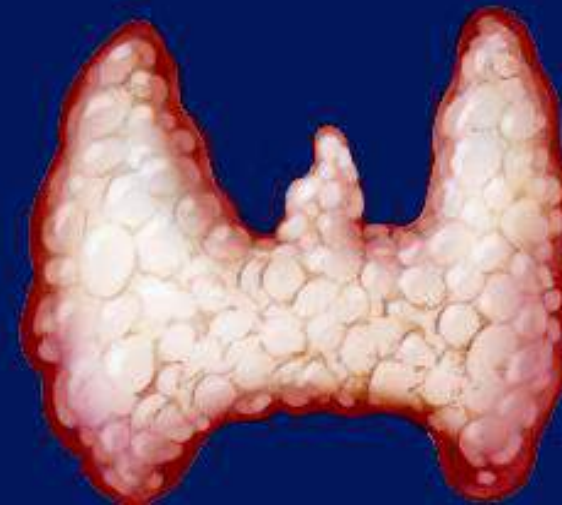
- Thus , when free T_3 and T_4 decreased in blood TSH secretion will be increased .





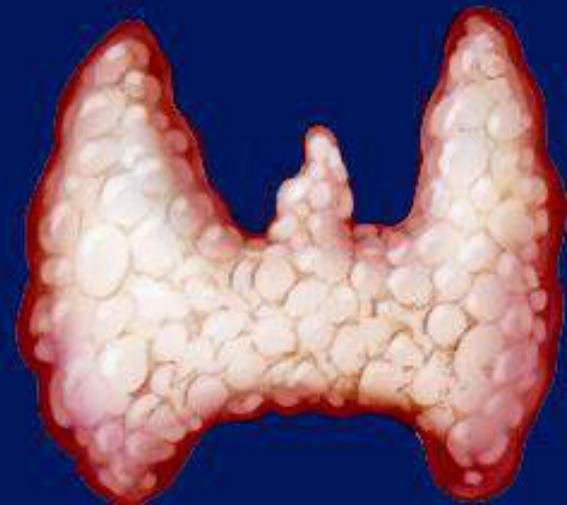
4. Blood iodide level :

- Adequate dietary iodine intake is essential for normal thyroid function .
- Decreased iodine intake \rightarrow \downarrow T3 and T4 synthesis and release \rightarrow \uparrow TSH \rightarrow \uparrow size of the gland = thyroid enlargement (goiter)
- Excess iodide in blood \rightarrow decreases thyroid hormone in blood as it inhibits thyroid hormone synthesis and release by blocking the action of TSH .



Goiter

Definition : goiter is non-inflammatory and non-malignant thyroid enlargement .



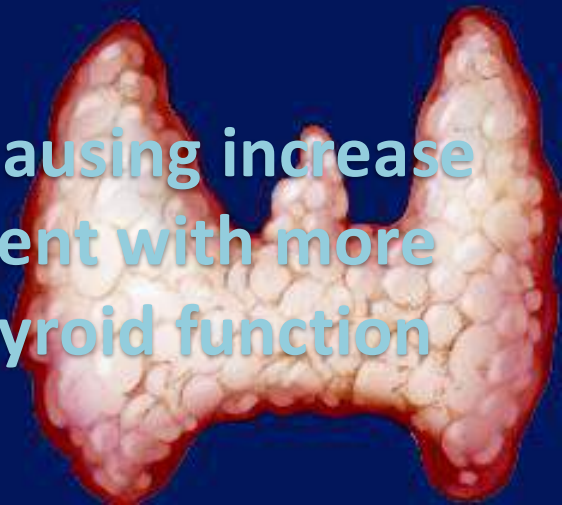
- **Types :**

1. **Simple goiter :**

It is associated with **normal thyroid function**

It is due to :

- **Mild iodine deficiency**
- **During puberty and pregnancy , due to increase need for iodine .**
- **Thyroid hormone decreased at first causing increase in TSH which causes thyroid enlargement with more formation of thyroid hormone thus thyroid function remains normal .**

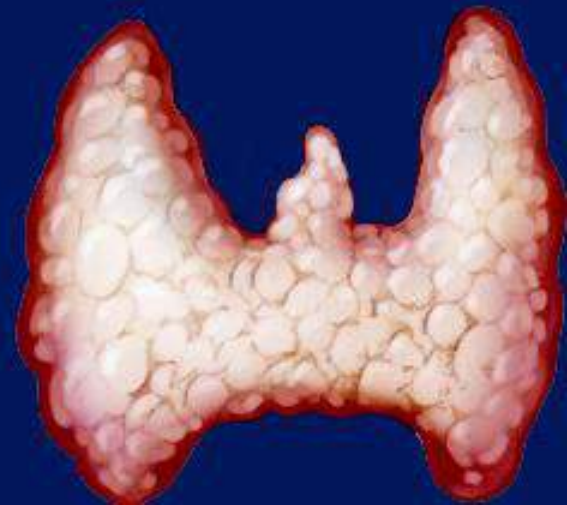


2. Colloid Goiter :

Cause : **severe iodine deficiency**

Here , the enlarged thyroid gland can't synthesize excess thyroid hormone due to severe iodine deficiency .

It is associated with **hypothyroidism** .



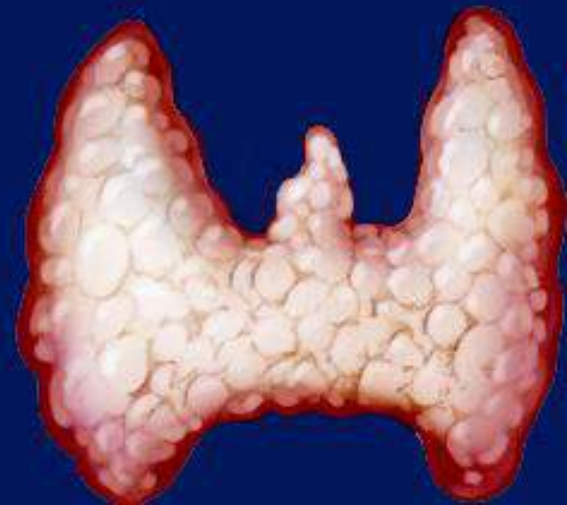
3. Toxic Goiter : This thyroid enlargement is associated with **thyroid hyper function** .

it is called **Graves' disease** .

it is an **auto immune disease** in which the immune system secretes auto antibodies called long- acting thyroid stimulators (**LATS**) .

These antibodies activate TSH receptors producing hyperthyroidism due to increased formation of thyroid hormone .

- **LATS** have long duration of action .





THank you