Skin, mamma (structure and development)

Miloš Grim

Institute of Anatomy, First Faculty of Medicine, Charles University in Prague

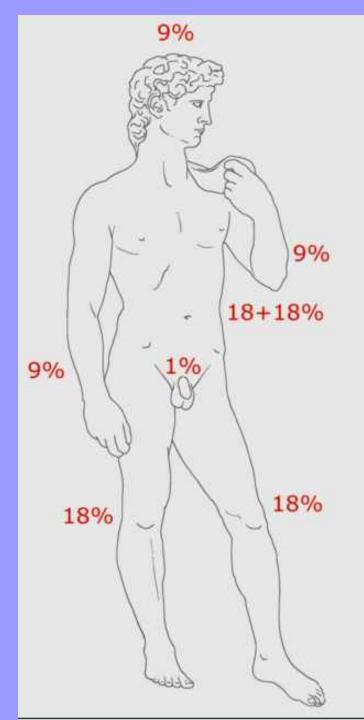
May 31, 2012



Body surface – 1.6 m^{2,} 16% of the body's weight

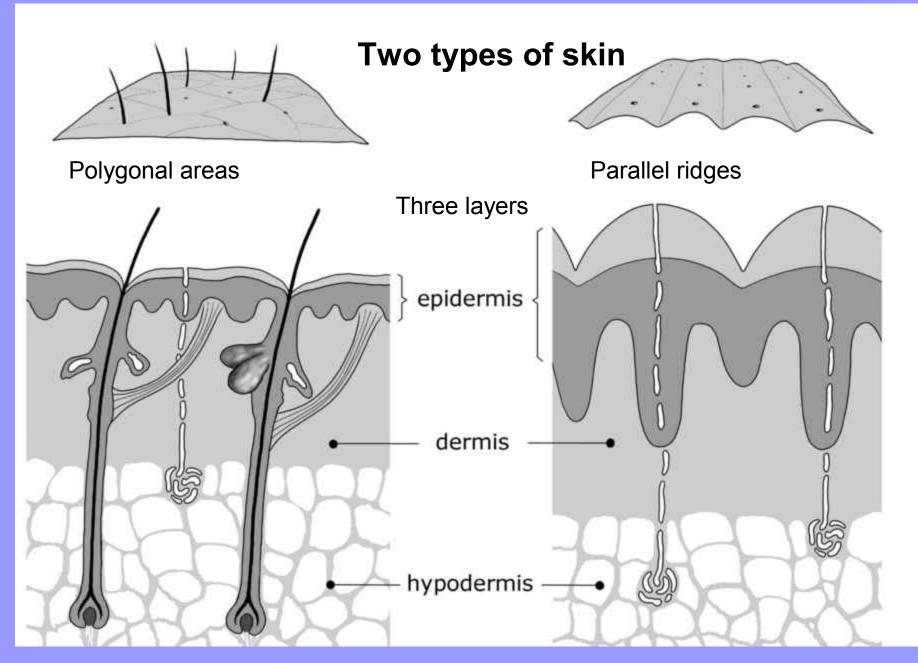
Many different functions:

- **Protection** against mechanical, chemical and thermal injuries, against invasion of many pathogenic microorganisms
- **Defense mechanisms** of the body (content of cells of immune system)
- Maintaining of body temperature (variable blood circulation, discharge of fluids (sweat)
- **Regulation of water balance** (protection against desiccation, route for loss of fluid and mineral salts via the secretion of its glands,
- Sense organ (perception of pressure, temperature and pain)
- **Communicating organ** (autonomic system, blushing, pallor, piloerection)
- Skin shows electrical resistance



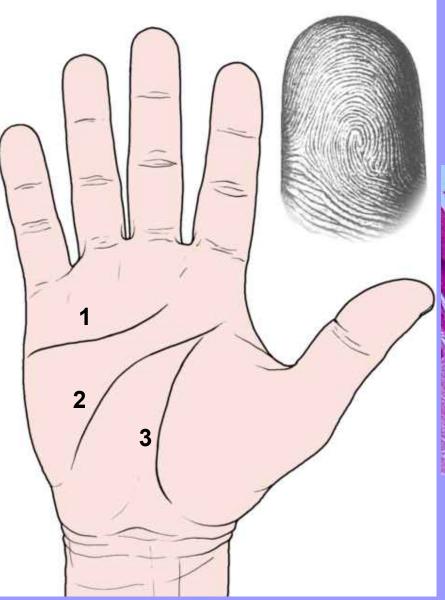
To determine the extent of the burn, the body surface area burned must be known. The area can be estimated using a formula, **the rule of nine**.



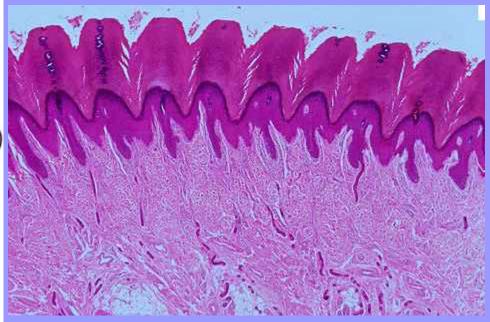


Hairy skin

Glabrous (hairless) skin

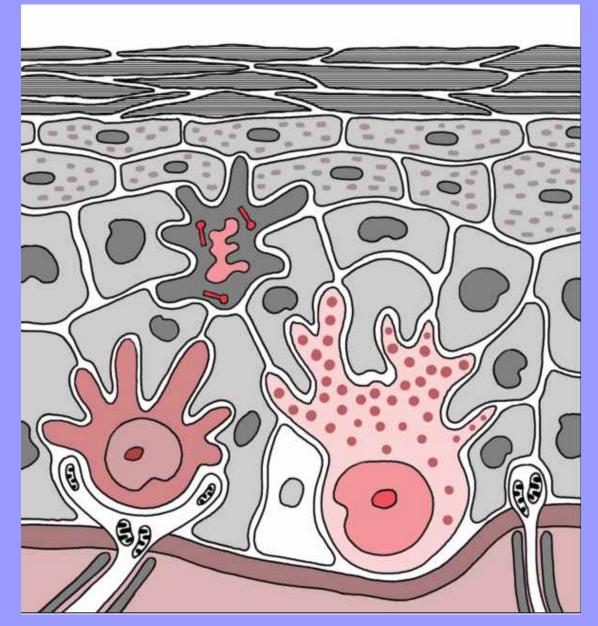


Palm of the hand: papillary ridges and larger flexure lines, fingerprint ridges: - whorl, loops



- 1 linea occlusionis digitorum trium ulnarium
- 2 linea manus clausae
- 3 linea oppositionis pollicis





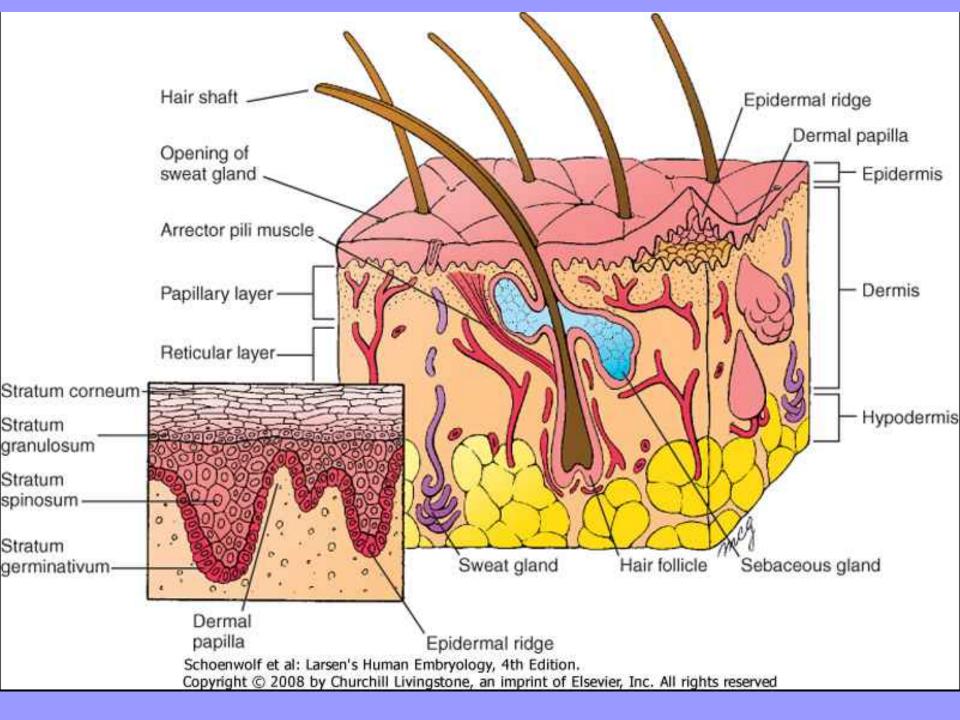
Keratinocytes

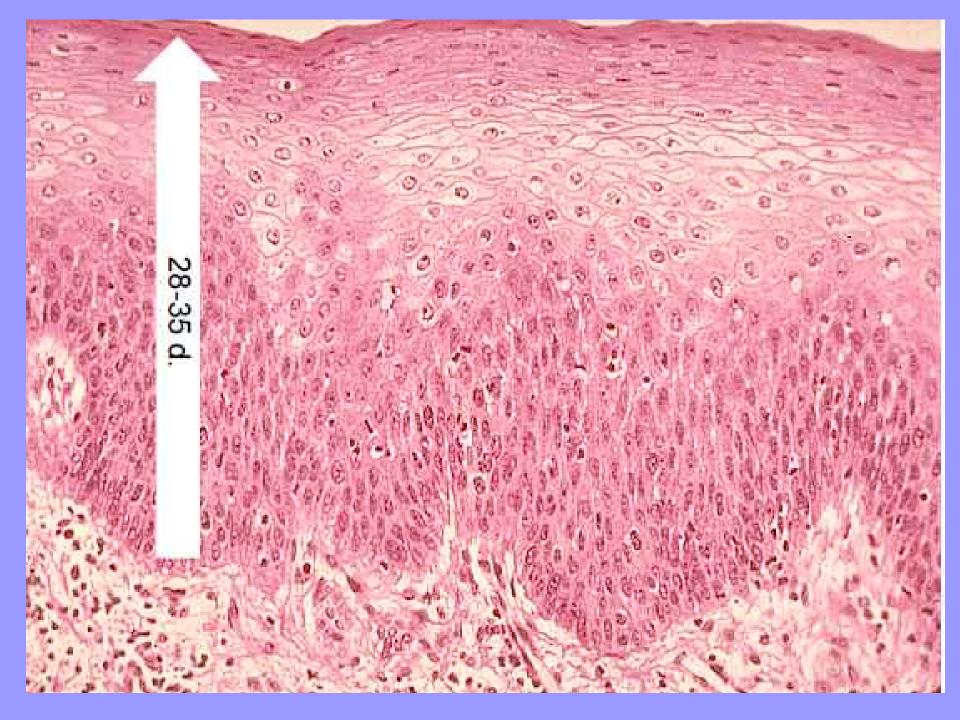
Langehans cells

Melanocytes

Merkel cells

Stratified keratinized squamous epithelium of the skin is formed by keratinocytes and epidermal immigrans





Dermis Stratum papillare

is composed of loose connective tissue forming fingerlike projections called *papillae*. They extend toward the epidermis and contain terminal networks of capillaries and tactile corpuscles (Meissner's corpuscles)

Stratum reticulare

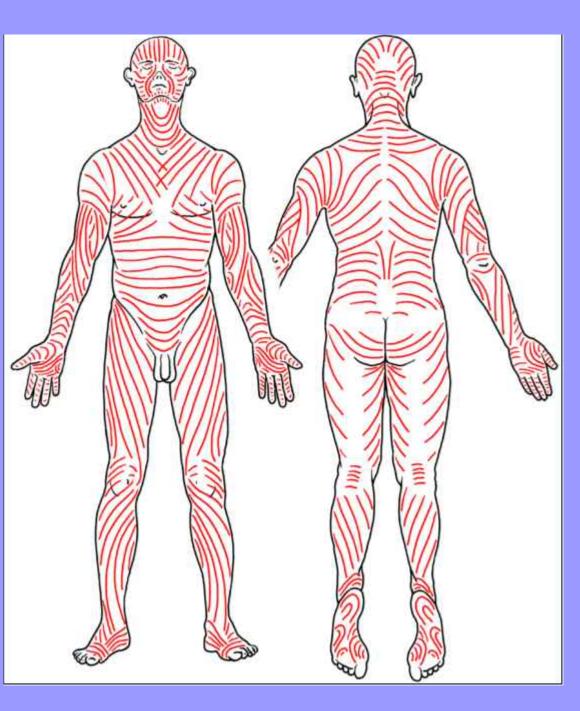
lies under the papillary region and is much thicker. It is composed of dense irregular connective tissue and receives its name from the containing collagenous, elastic and reticular fibres.

Epidermis

Papillary Dermis

rete subpapillare

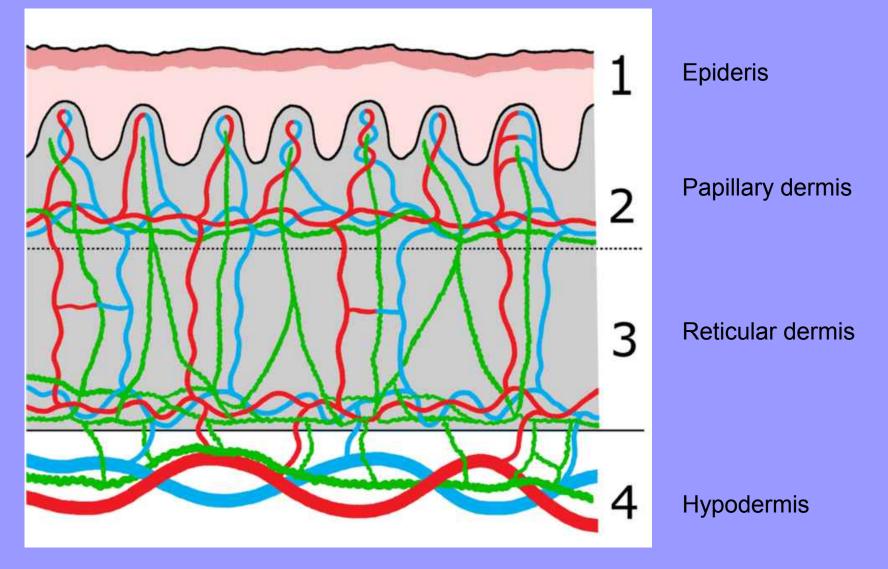
Reticular Dermis

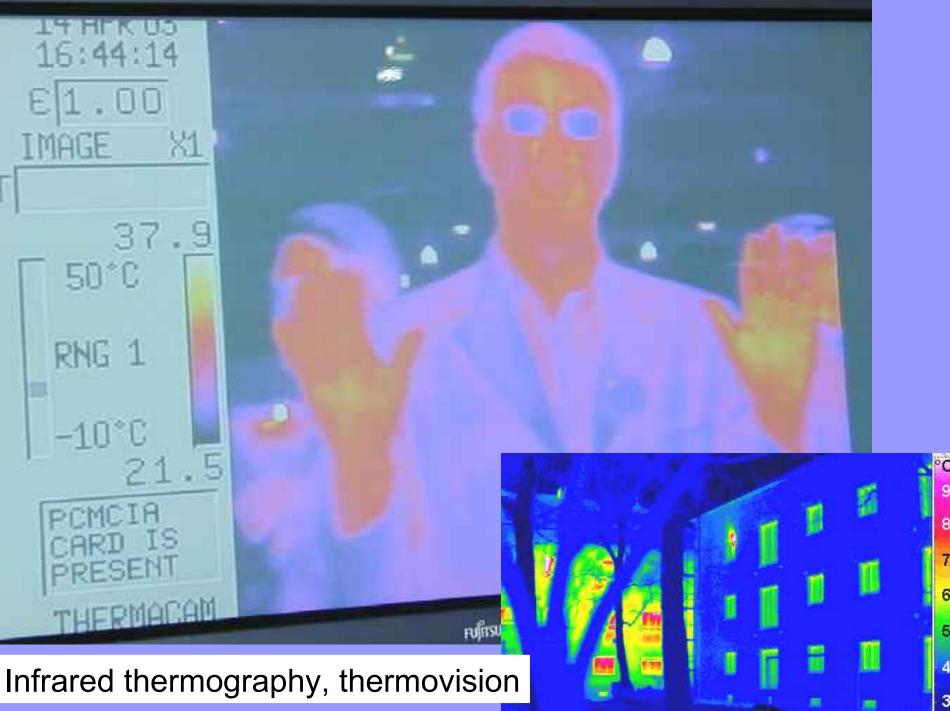


The direction of collagen fiber network of dermis differs in different parts of the body

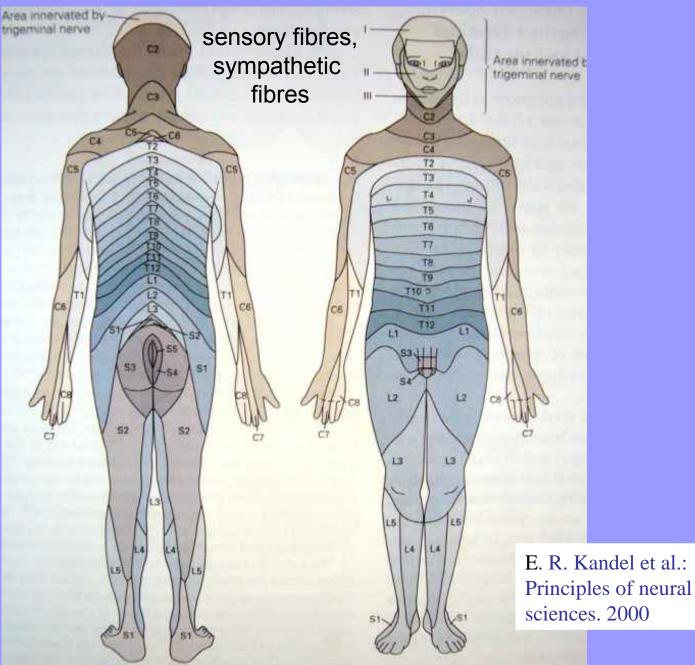
An incision in the course of lines produces slit, an incision at right angle to the course of lines produces gape

Systematic investigation have revealed a system of preferred lines for incisions in skin The distribution of microvascular plexuses and lymphatic collectors (green) in the skin

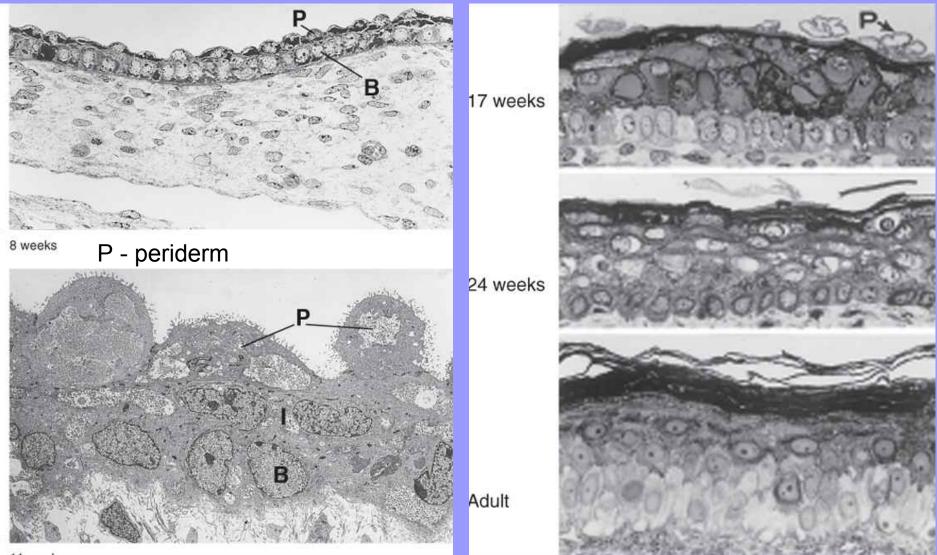




Segmental innervation (dermatomes) of the skin



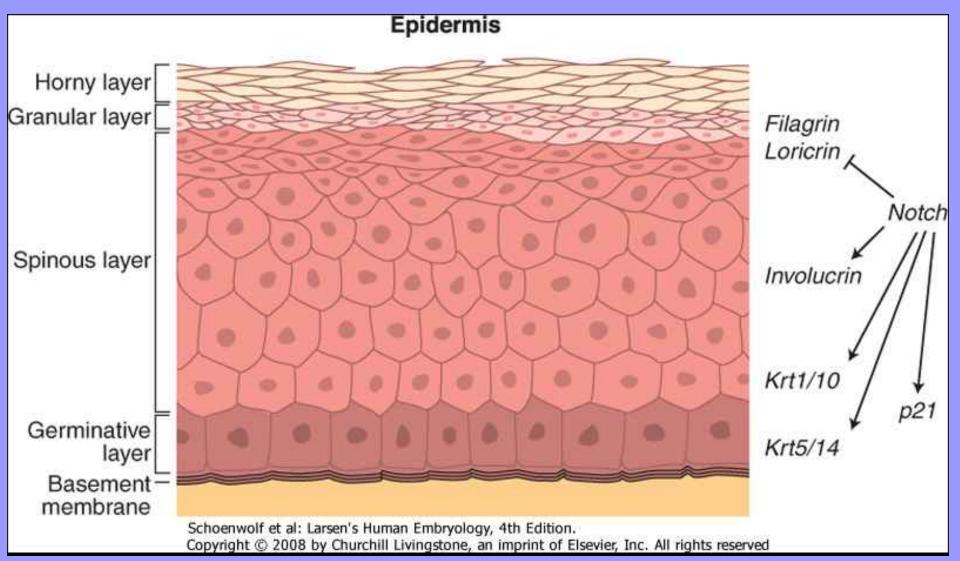
Development of the skin Differentiation od ectoderm into the primitive epidermis (week 8 -24)



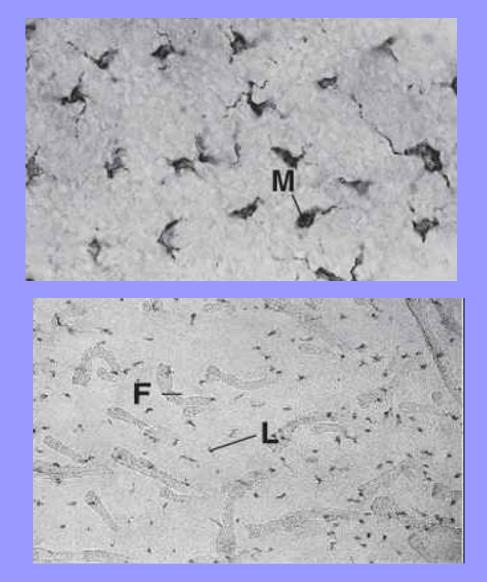
11 weeks

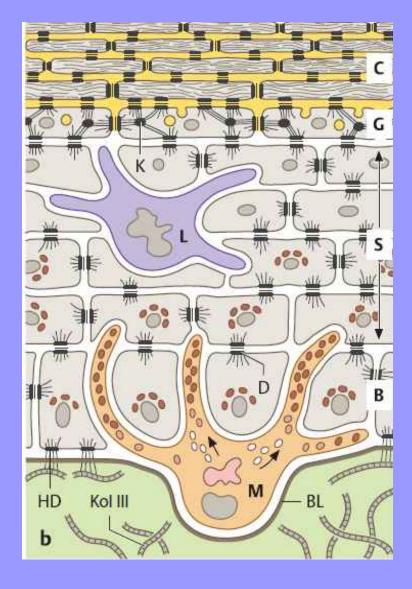
Differentiation of epidermis

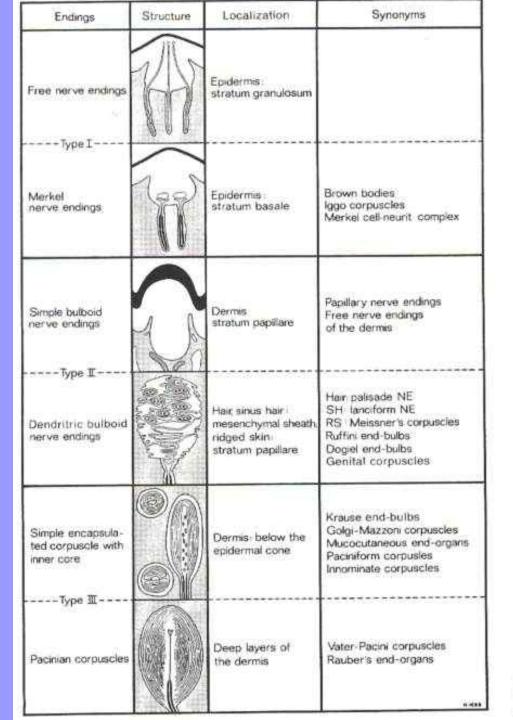
Different expression of Keratins and envelope protiens Is induced by Notch signaling



Colonization of epidermis by melanocytes (M) and Langerhans cells (L)







Classification of sensory receptors according to structure and localization

Abbildung 6: Klassifikation sensibler Nervenendigungen aus HALATA (1975).

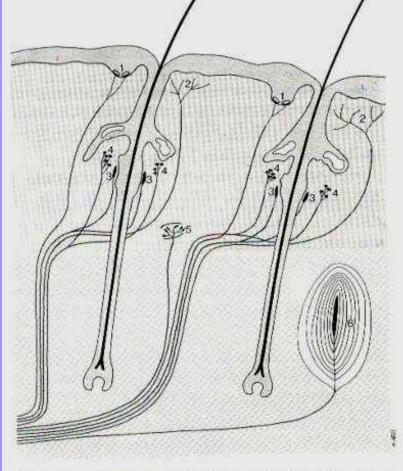


Abbildung 61: Schematische Darstellung der Innervation der behaarten Haut. Die Epidermis zwischen den Haarfollikeln enthält die sogenannten Tastscheiben oder auch Pinkus-Scheiben (1). In der Papillarschicht liegen freie Nervenendigungen (2). Die Lanugohaare sind meistens durch lanzettförmige Nervenendigungen (3) und Pilo-Ruffini Komplexe (4) innerviert. In der Tiefe der Dermis liegen zwischen den Haarfollikeln Ruffinische Körperchen (5) und im Fettpolster die Vater-Pacinischen Lamellenkörperchen (6) (aus HALATA, 1990a).

Sensory receptors in hairy skin

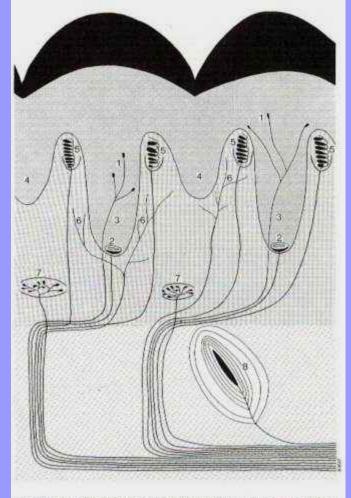


Abbildung 56: Schematische Darstellung der Innervation der Leistenhaut. Die freien Nervenendigungen in der Epidermis (1) liegen überwiegend in den Drüsenleisten. Die Merkelschen Nervenendigungen (2) findet man in der Basalschicht der Drüsenleiste. In den Bindegewebspapillen zwischen den Drüsen- (3) und Haftleisten (4) befinden sich Meissnersche Körperchen (5). Die freien Nervenendigungen (6) liegen in der Papillarschicht der Dermis, die Ruffinischen Körperchen (7) in der Retikularschicht. Große Vater-Pacinische Körperchen (8) findet man im Panniculus adiposus (aus HALATA, 1990a).

and in glabrous skin

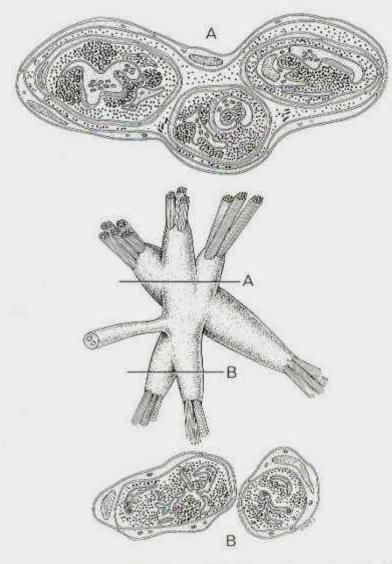
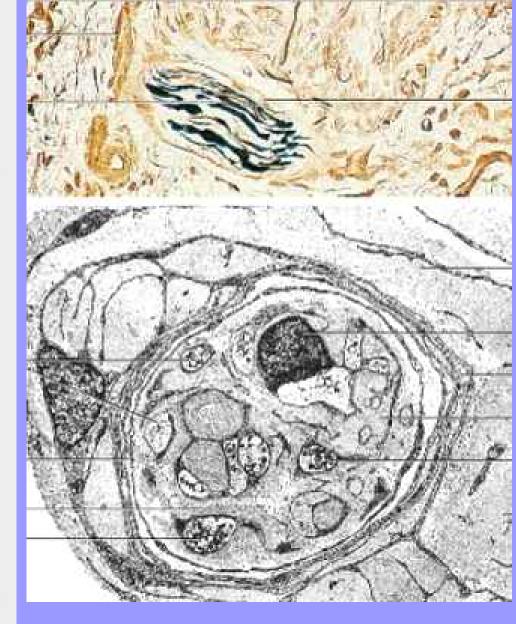


Abbildung 39: Halbschematische Darstellung eines Ruffinischen Körperchens aus der Gelenkkapsel. Das Körperchen besteht aus drei Zylindern, deren Längsachse parallel zur Richtung der kollagenen Fasern des Stratum fibrosum verläuft. Zwei afferente markhaltige Axone innervieren das Körperchen. A und B-Querschnitte durch die Zylinder. 1perineurale Kapsel, 2 – Nerventerminalen. Aus HALATA und MUNGER (1980b).



Ruffini´s corpuscle

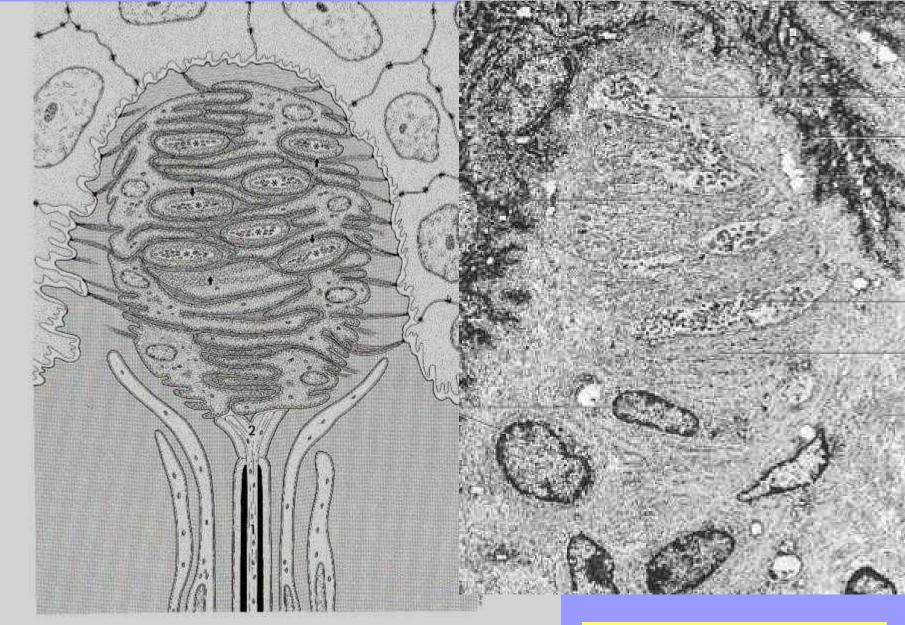


Abbildung 24: Halbschematische Darstellung eines Meissnerschen Körperchens in der Papillarschicht der Leistenhaut. Das afferente Axon (1) ist markhaltig und verzweigt sich (2). Die marklosen Äste weisen terminale Verdickungen auf (*), die von dünnen Ausläufern der terminalen Schwannschen Zellen (Pfeile) umgeben sind. Die Zellkerne der Schwannschen Zellen liegen in der Peripherie des Körperchens. Bündel kollagener Fibrillen der Papillarschicht ziehen durch die Spalten zwischen den terminalen Schwannschen Zellen hindurch und fixieren das Körperchen in seiner Lage. In Anlehnung an ANDRES und von DÜRING, 1973 und HALATA, 1975.

Meissner's corpuscle

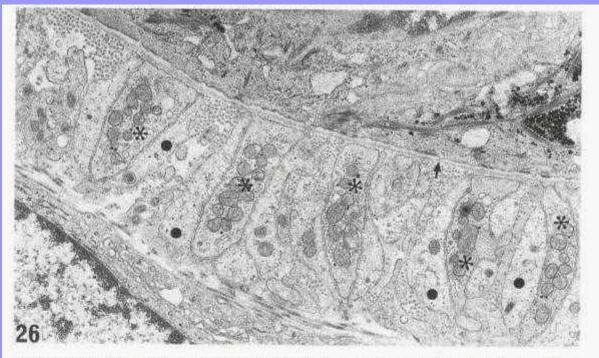
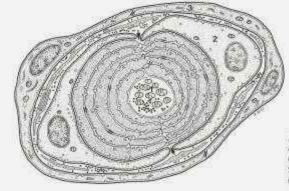


Abbildung 26: Lanugohaar aus dem oberen Abschnitt des Planum nasale der Hauskatze im Querschnitt. Die lanzettförmigen Nerventerminalen (*) enthalten Ansammlungen von Mitochondrien und haben Kontakt mit der Basallamina des Haarfollikels (Pfeile). Die zytoplasmatischen Lamellen der Schwannschen Zellen (Punkte) weisen Mikrovesikulationen auf-Hauskatze (Fells silvesteis E. catus): EM Bild, 11400 X.

Lancet-like sensory endings on hair follicle



Abbildung 27: Halbschematische Darstellung der Palisaden von lanzettförmigen Nervenendigungen eines Lanugohaares im Querschnitt. 1 – Haarschaft, 2 – basale Schicht des Haarfoflikelepithels, 3 – Nerventerminalen, 4 – Schwannsche Zellen mit ihren zytoplasmatischen Lamellen, 5 – Fibroblasten der Bindegewebskapsel des Haarfollikels, (Pfeile) – Basalfamina.



Pacinian corpuscle

Abbildung 32 Halbschematische Darstellung eines kleinen Pacinischen Körpercheits im Querschnitt, 1. - terminales Axen, 2. Schwannsche Zellen, 1. - perineurale Kapsei, (Pfeile) Längsspalten des Innenkolbersi.

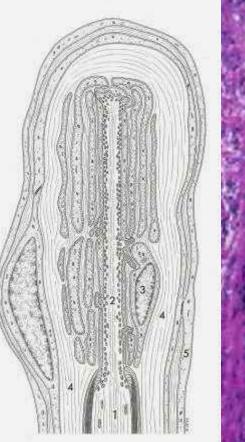
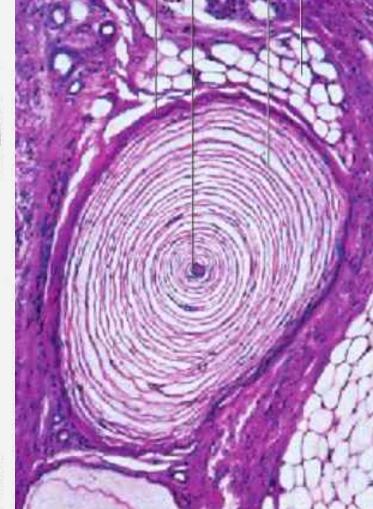
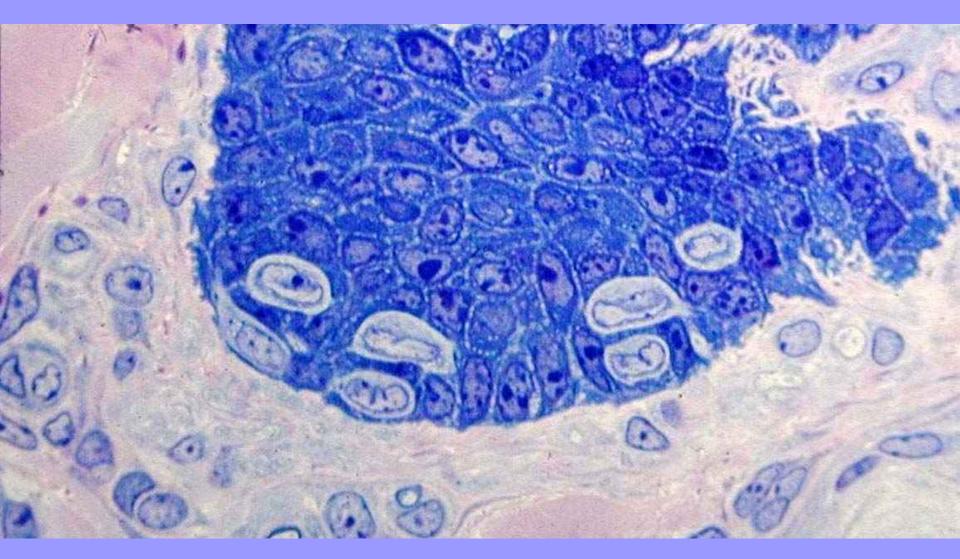


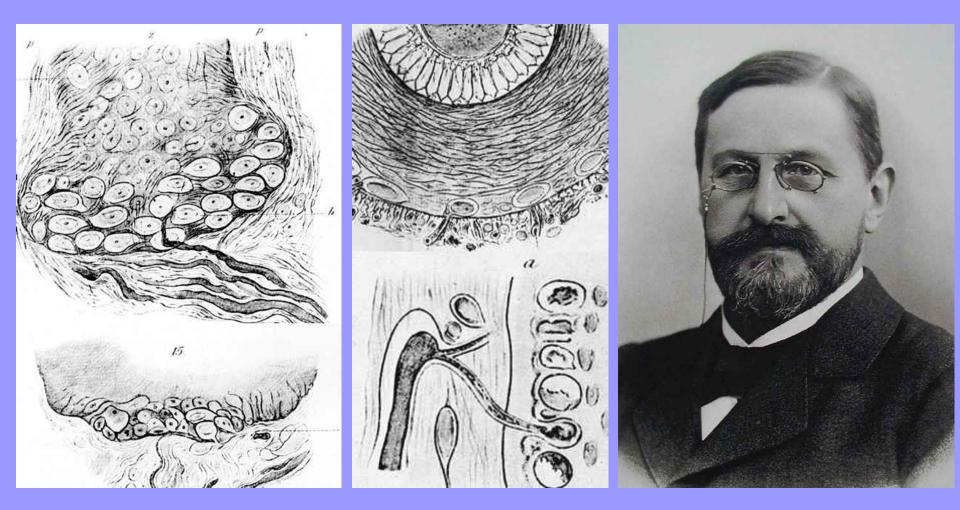
Abbildung 33 Haibschematische Dürstellung eines kleinen Pucinischen Körperchens im Längsschmitt. 1. – mark haltiges Axon, 2. – terminales Axon, 3. – terminale Schwanosche Zelle mit ihren zytoplasmatischen Lannellen, 4. – Subkapsularraum mit kollagenen Fibrillen, 5. – perinearale Kapsel



Merkel cells are large light cells in the basal layer of epidermis and in mucous membranes of ectodermal origin in vertebrates



F. S. Merkel (1875) : "Tastzellen" of the skin of birds and mammals



Merkel cells are transducers of tactile stimuli in slowly adapting mechanoreceptors of the skin

Halata Z, Grim M, Bauman K: Anat Rec 271A: 225, 2003 🎑

Human MCs represent 3.6 - 5.7% of basal epidermal cells from glabrous and hairy skin (Fradette et al., 2003)

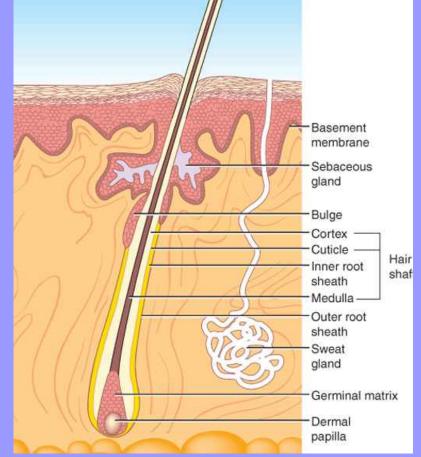
Skin appendages

are derived from the skin and serve a particular function including sensation, contractility, lubrication and heat loss.

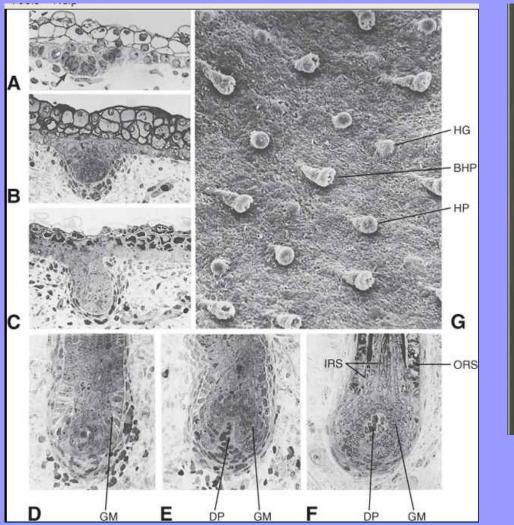
Hairs: lanugo, pili, capilli, cilia, supercilia, tragi, vibrissae, hirci, pubes, barba

Nails

Glands Sweat glands Apocrine glands Sebaceous glands



Development of hair follicle (month 3-10)





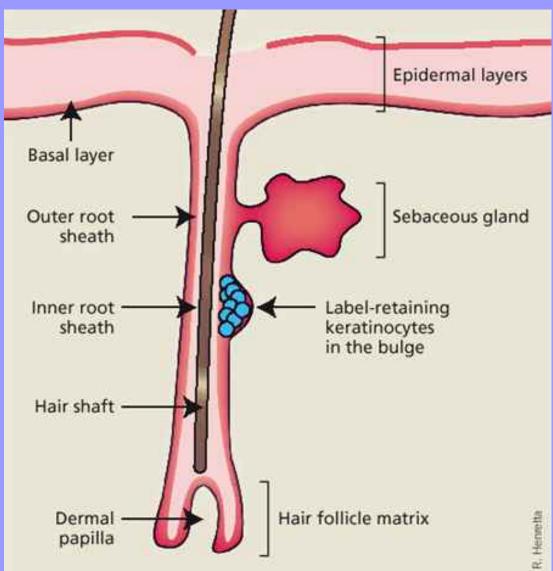
Shh signaling

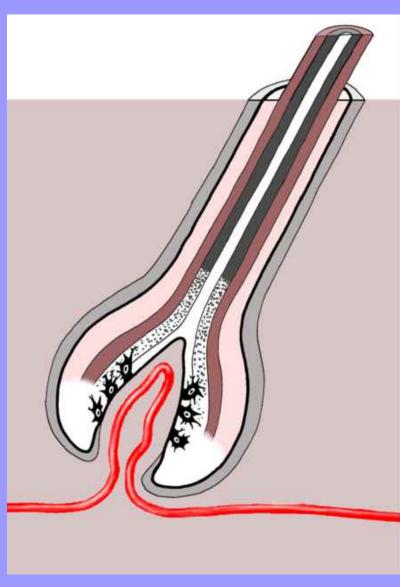
Growing hair follicles

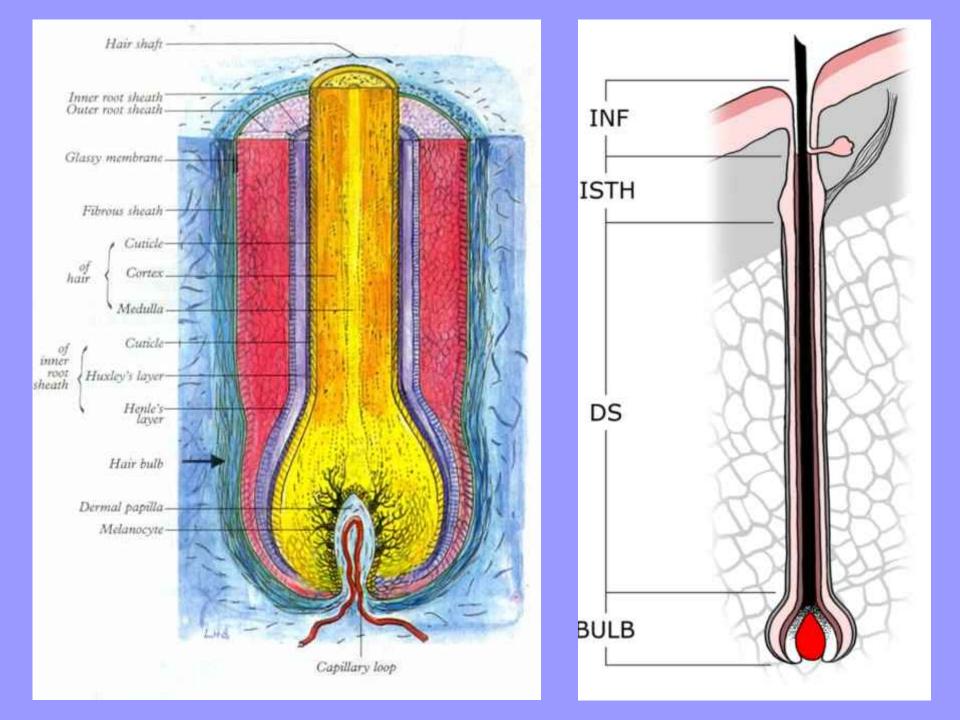
Math1 TRITC Ki67 FITC



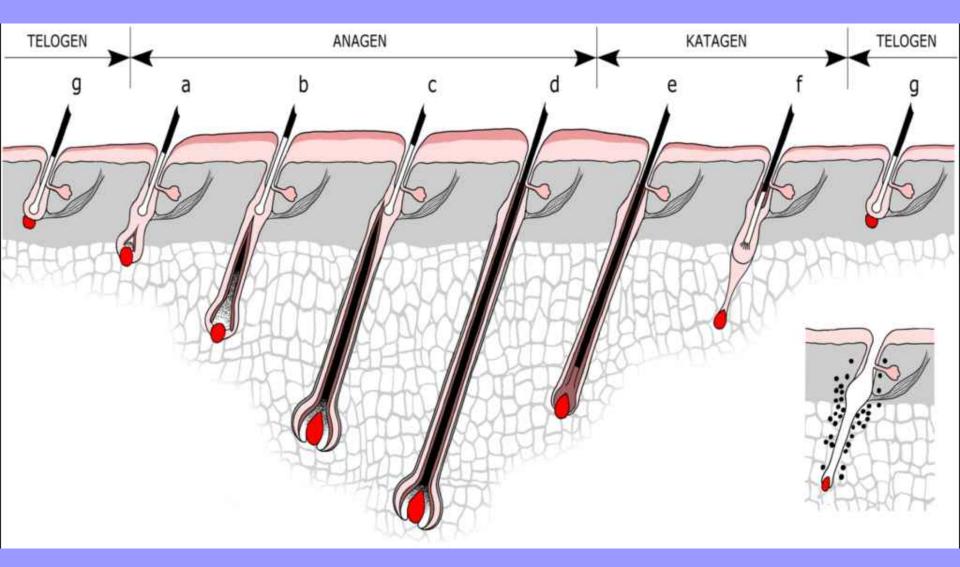
Hair follicle





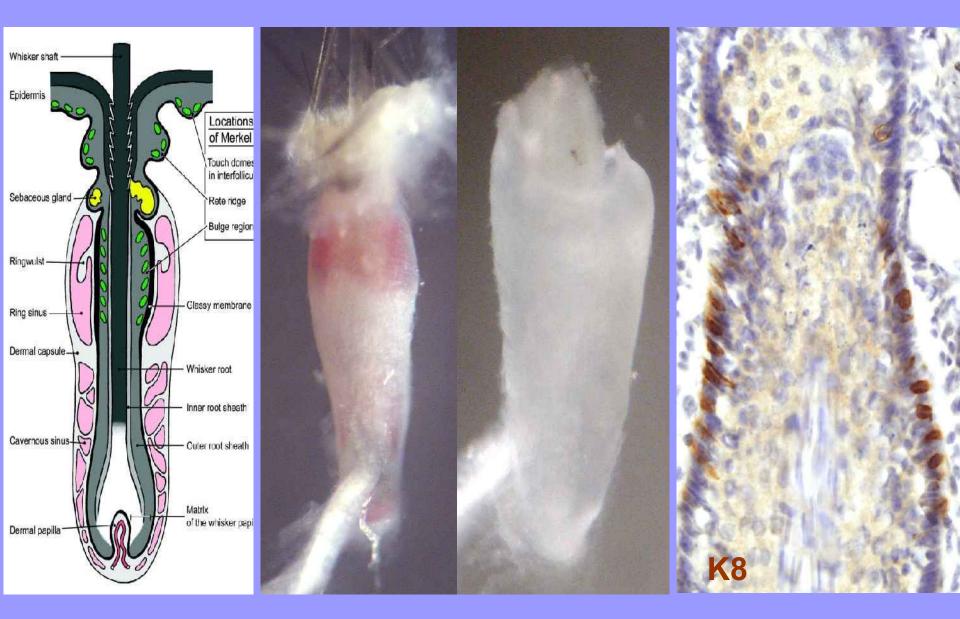


Hair cycle stages



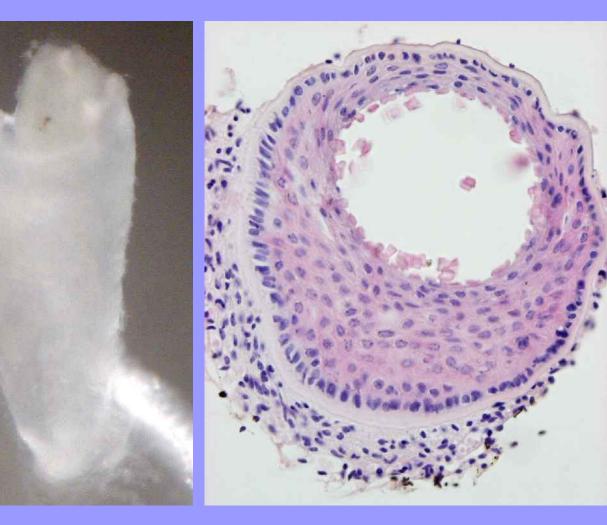


Merkel cells in whisker hair follicle

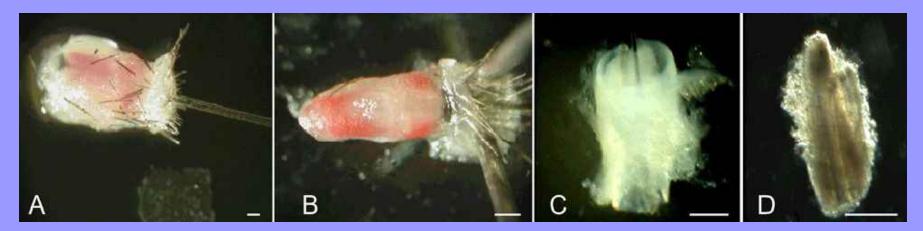




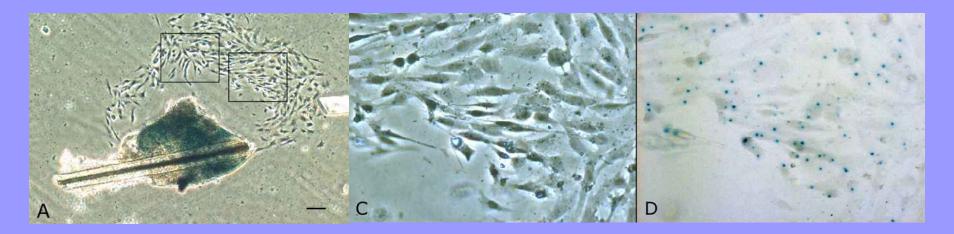
The follicle of sinus hair (whisker) blood sinus, innervation, bulge



Dissection of the bulge from adult whisker follicle

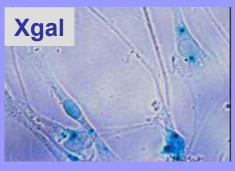


Xgal + NCCs emigrated 4 days after explantation

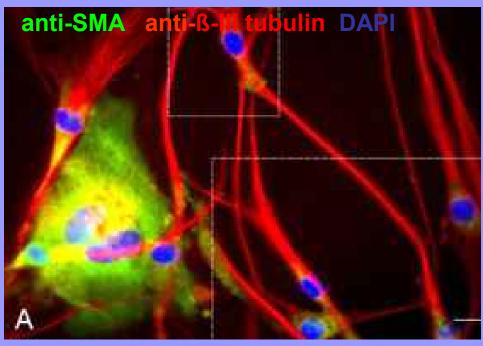


Bulge explant-derived NCCs are pluripotent

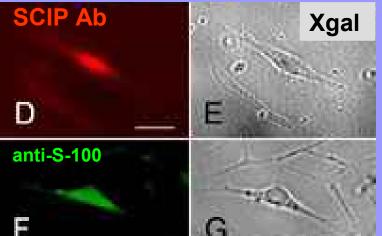




Smooth muscle cells Neurons



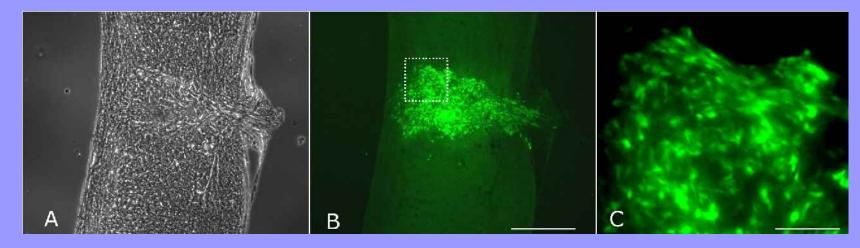
Schwann cells



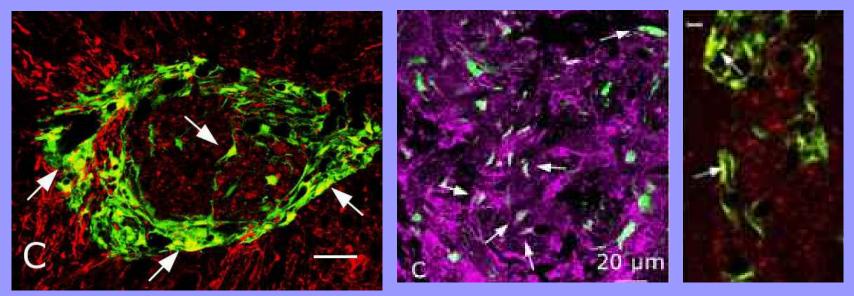
Melanocytes Chondrocytes

H MeIEM

Dev Dyn 231:258-269, 2004; Embryo Today 72:162-172, 2004 Supp. by LN 00A065 and VZ 111100003-3



Morphology of EPI-NCSC implants in the lesioned spinal cord



Nestin

GAD67

RIP



US008030072B2

(12) United States Patent Sieber-Blum et al.

(10) Patent No.:	US 8,030,072 B2
(45) Date of Patent:	Oct. 4, 2011

(54) METHOD OF ISOLATING EPIDERMAL NEURAL CREST STEM CELLS

(75) Inventors: Maya Sieber-Blum, Brookfield, WI (US); Milos Grim, Prague (CZ)

(73) Assignees: Newcastle University, New Castle Upon Tyne (GB); Univerzita Karlova V Praze, Prague (CZ) Claudinot, S., et al., "Long-term renewal of hair follicles from clonogenic multipotent stem cells," PNAS 102:14677-14682 (2005). Fernandes, K.J., et al., "A dermal niche for multipotent adult skinderived precursor cells," Nature Cell Biology 6:11:1082-1093 (2004).

Ito, M., et al., "Stem cells in the hair follicle bulge contribute to wound repair but not to homeostasis of the epidermis," Nature Medicine 11:12:1351-1354 (2005).

Kruger, G.M., et al., "Neural Crest Stem Cells Persist in the Adult Gut but Undergo Changes in Self-Renewal, Neuronal Subtype

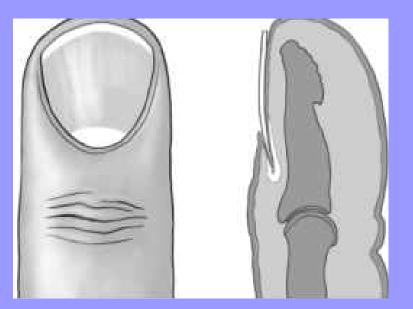
Primary Examiner — Thaian N Ton
(74) Attorney, Agent, or Firm — Quarles & Brady LLP; Sara
D. Vinarov

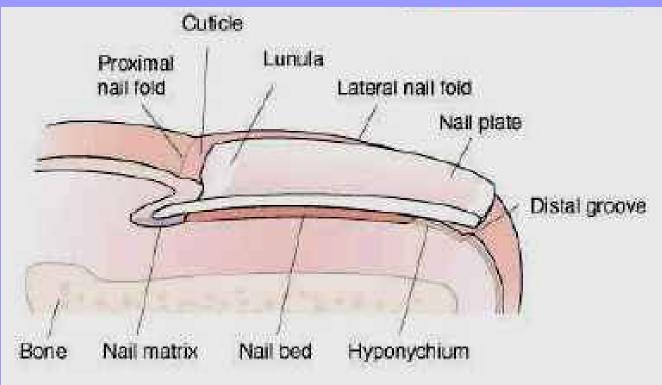
(57) **ABSTRACT**

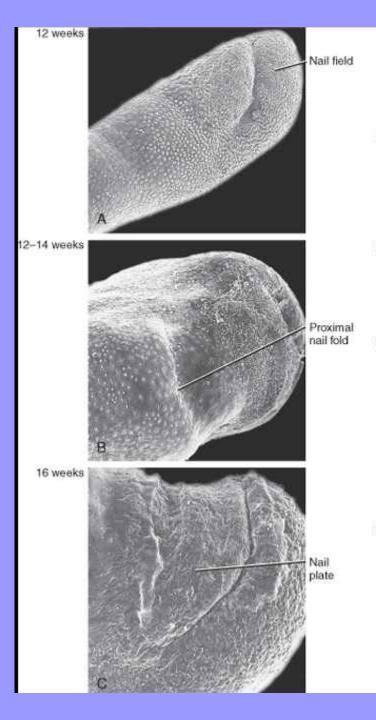
The present invention describes novel methods for isolating a substantially pure cell population of non-embryonic epidermal neural crest stem cells from the bulge-region of mammalian hair follicles. Also disclosed is the substantially pure cell population of follicular bulge-derived neural crest stem cells for medical research and therapeutic use.

Nail

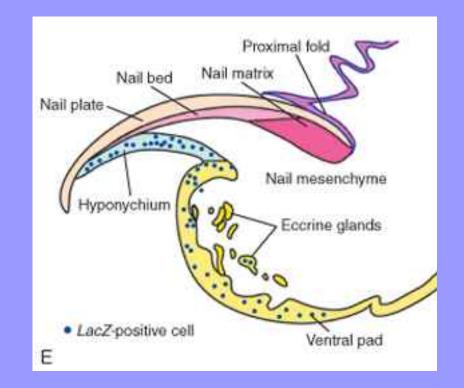
is a horn-like envelope covering the dorsal aspect of the terminal phalanges of fingers and toes







Development of the nails (between 12 and 14 weeks)

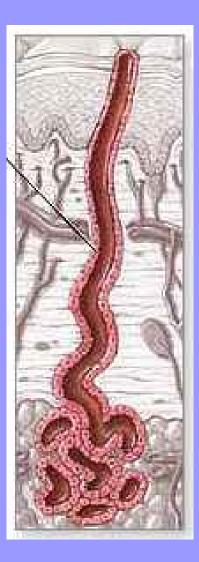


Eccrine sweat glands

unbranched long tubular structures with coiled secretory portion innervated with sympathetic cholinergic fibres.

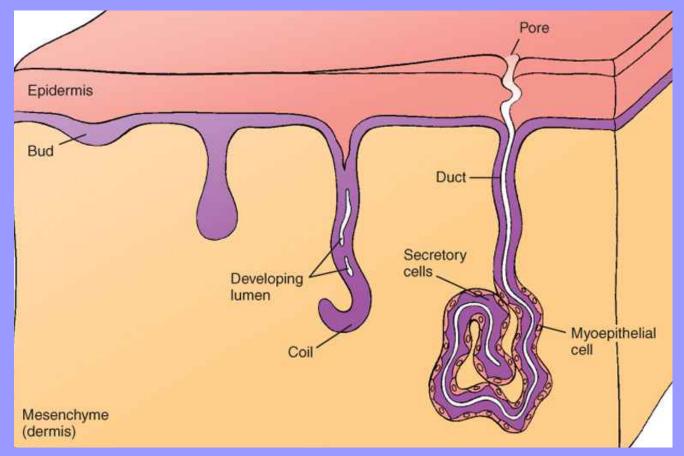
Sweat – hypotonic fluid with sodium and chloride ions. Daily production depends on thermal and emotional stimuli (400 ml – 10 l per day).Their frequency ranged from 80 to over 600/cm2. The total number: between 1.6 amd 4.5 milion. **Function: thermoregulation, excretion**

Apocrine sweat glands (glandulae circumanales, ceruminosae, nasales, axillares, ciliares) are larger are limited to axilla and perianal areas Apocrine gland secretions also contain pheromones that communicate information to other individuals by altering their hormonal balance..



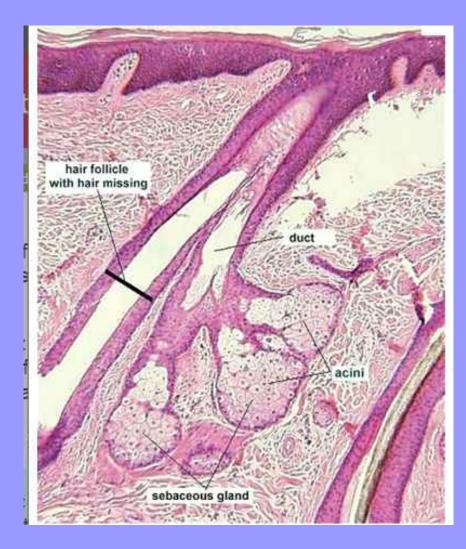
Development of sweat glands

elongated down growths appear at about 20 weeks, the outer cells differentiate into a layer of smooth muscle, the inner cells become the secretory cells of the gland.

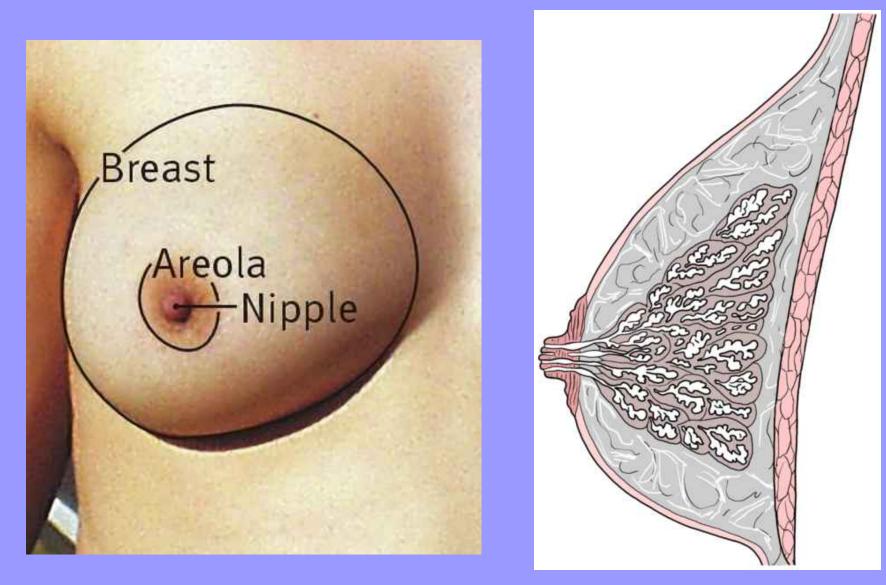


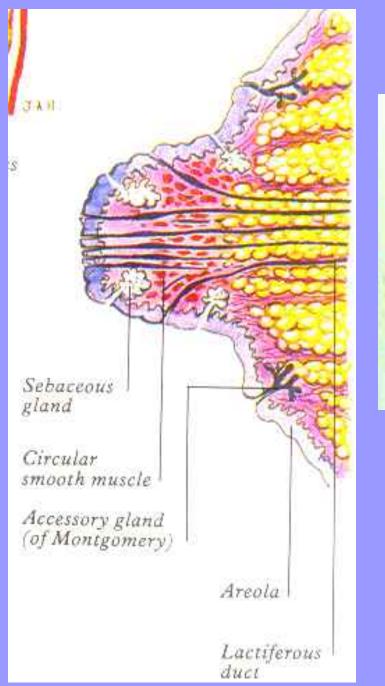
Sebaceous glands

small glands producing a mixture of fats and cellular debris, **sebum**, usually are attached to hair follicles. They are distributed over the entire body in hairy skin.

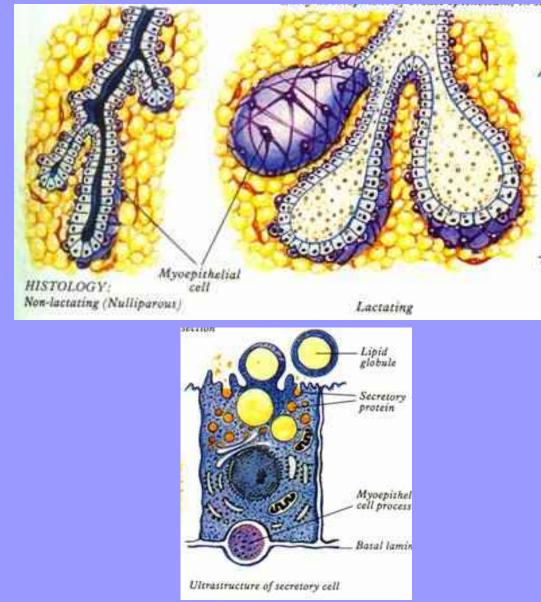


Female breast (mamma) and mammary gland





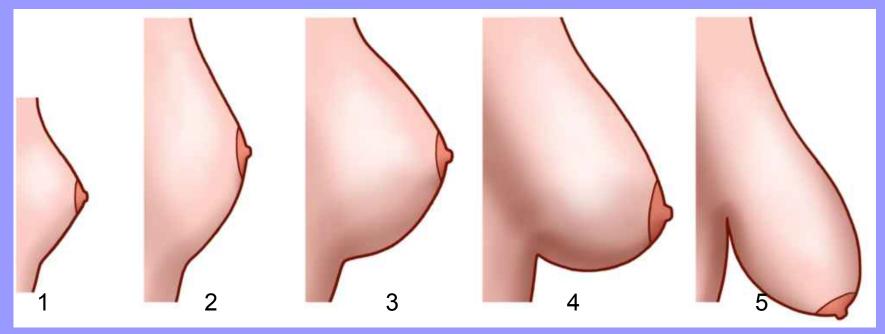
Mammary gland - structure



The breast and its different forms

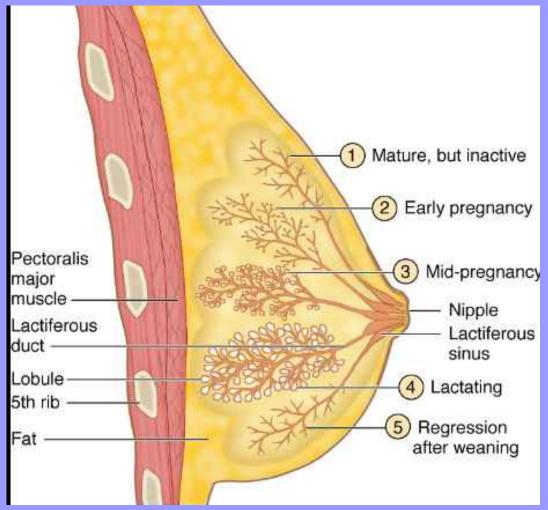
1 - mamma papilata, 2 - mamma disciformis, 3 - mamma spheroidea,

4 - mamma piriformis, 5 - mamma pendula



Effects of hormones

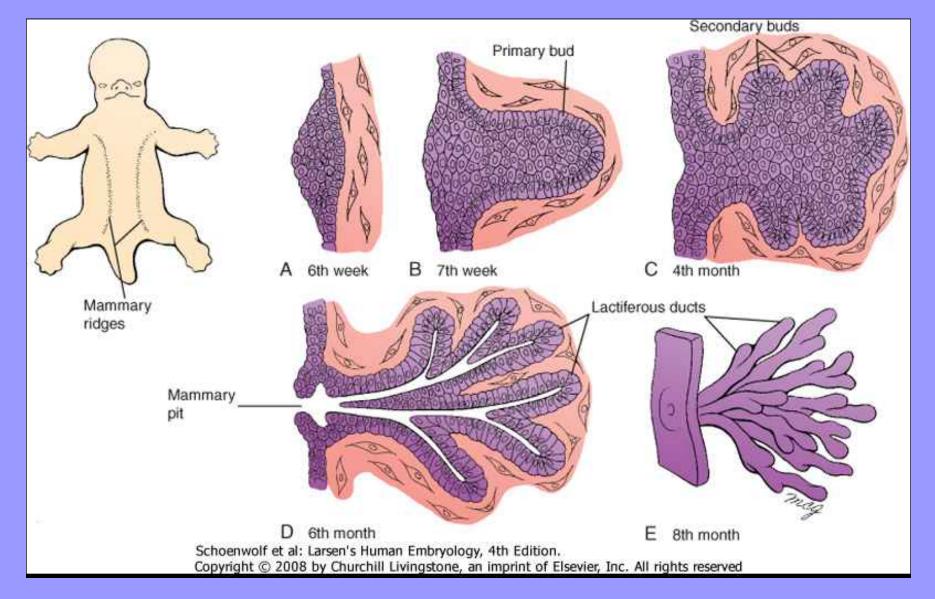
Estrogens affect the growth of the tubular system, **Progesterone** induces development of the alveoli. **Prolactin** stimulates milk production, **Oxytocin** controls release of milk. **Tactile stimulation** of the nipples maintains the release of prolactin and oxytocin (**neurohormonal reflex**)



(5) After weaning, the alveoli and ducts regress with apoptotic cell death.

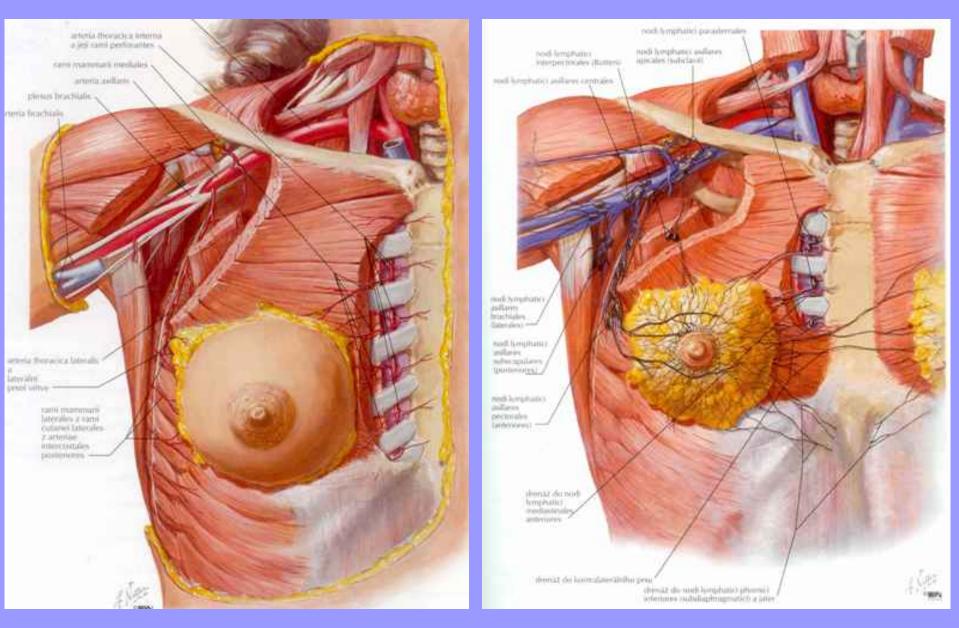
Mammary gland The sequence of changes that occur in the duct system and secretory units before, during, and after pregnancy and lactation.

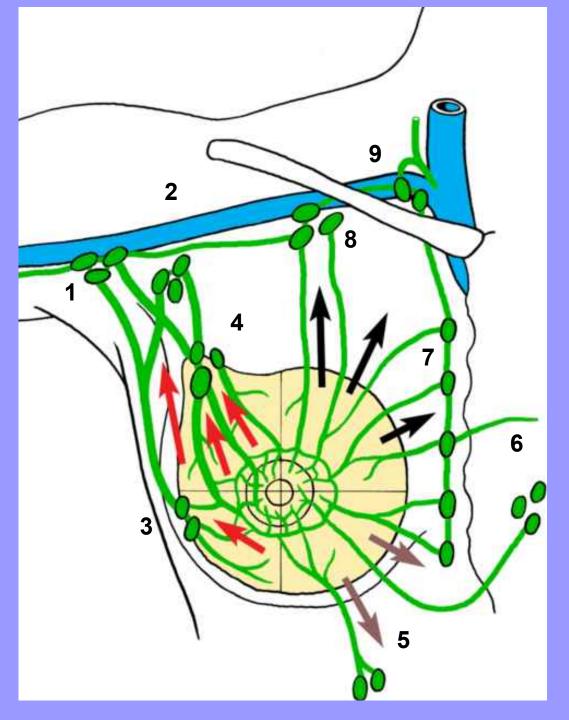
- Before pregnancy, the gland is inactive, with small ducts and only a few small secretory alveoli.
- (2) Alveoli develop and begin to grow early in a pregnancy.
- (3) By mid—pregnancy, the alveoli and ducts have become large and have dilated lumens. (
- (4) At parturition and during the time of lactation, the alveoli are greatly dilated and maximally active in production of milk components.



Development of the mammary glands. Mammary ridges at the 4th week A, B – ridge ectoderm forms primary buds, C,D - secondary buds become canalized to form lactiferous ducts

Mammary gland - blood supply and lymphatic drainage



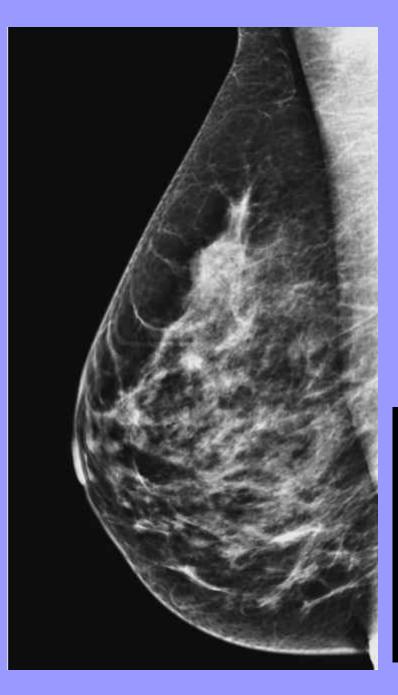


Lymphatic drainage of the breast.

Subareolar lymphatic plexus.

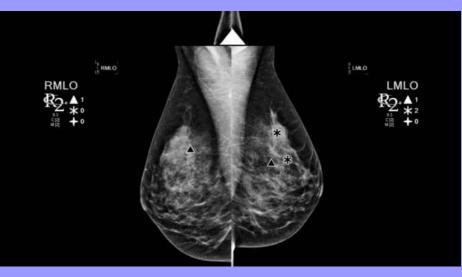
1- nodi axillares laterales,

- 2 nodi axillares centrales,
- 3 nodi axillares pectorales,
- 4 nodi interpectorales,
- 5 nodi phrenici inferiores,
- 6 nodi mediastinales ant.,
- 7 nodi parasternales,
- 8 nodi infraclaviculares,
- 9 nodi supraclaviculares,

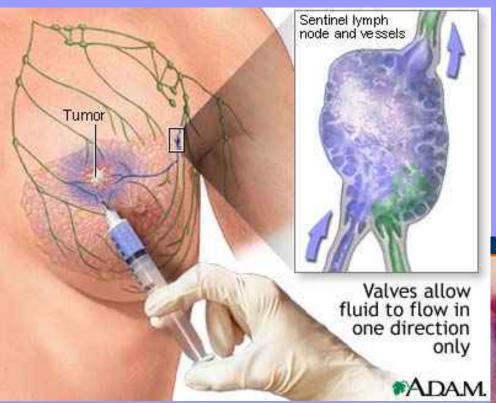


Mammography

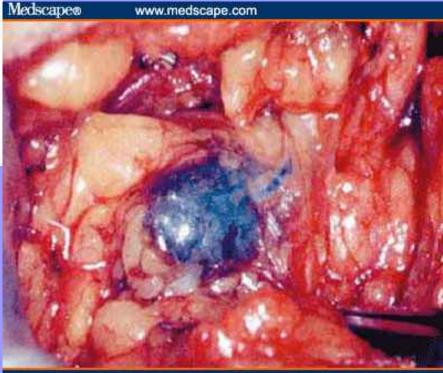
Radiographic technique used to detect breast masses and is used as a diagnostic and a screening tool. The goal of mammography is the early detection of breast cancer, typically through detection of characteristic masses and/or microcalcifications.



http://www.clarian.org/



Lymphatic mapping and sentinel lymphadenectomy is becoming an important surgical technique for assessing axillary status in breast cancer. Excision of the sentinel node provides a specimen for focused histopathologic analysis. Sentinel lymphatic node detection. Intraoperative mapping of the lymphatic tract draining to the sentinel node may use vital blue dye and/or radioactive tracer.



Source: Nat Clin Pract Oncol © 2005 Nature Publishing Group

http://img.medscape.com

Relationship Between the Lymphatic Drainage of the Breast and the Upper Extremity: A Postmortem Study. David Pavlista, and Oldrich Eliska Ann Surg Oncol Published online : 24 April 2012

Conclusions. Lymphatic drainage of the upper extremity and breast are closely related in the caudal part of the axilla, which could explain lymphedema after surgery if damaged.

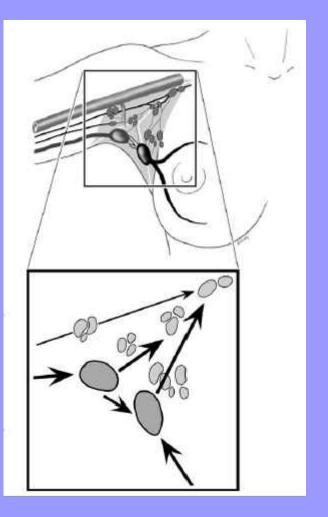


FIG. 5 Final scheme of lymphatic drainage of the breast and the upper extremity in axilla. Black arrows indicate direction of patent blue flow

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Good luck in the final exam !