

- Coordination of systems involve
 - Nervous System
 - Rapid response
 - Short lasting
 - Uses neurotransmitters
 - Endocrine System
 - Slow response
 - Long lasting
 - Uses hormones
- Homeostasis





What is a Hormone

- A specific chemical compound
- Produced by a specific tissue of the body
- Where it is released in the body fluids
- And carried to a distant target tissue
- Where it affects a pre-existing mechanism
- And is effective is small amounts.

Specific Chemical Substance

- Proteins and Polypeptides
 - Oxytocin
 - Insulin
- Biogenic amines
 - Thyroxine
 - Catecholamines
- Steroids
 - Estrogens
 - Progestins
 - Androgens
- Eicosanoids
 - Prostaglandins
 - Thromboxanes

Produced by a specific tissue

- Major Endocrine Organs are
 - Hypothalamus
 - Pituitary gland
 - Thyroid gland
 - Parathyroid gland
 - Thymus
 - Adrenal gland
 - Pancreas
 - Ovaries
 - Testes

Released into the body fluids

- Vascularity of endocrine tissue
- Autocrine glands local to same cells that released the hormone
- Paracrine glands local to adjacent cells
- Endocrine-Hormone release into interstitial space, lymphatics, and blood.
- Pheromone into the air



Carried to a distant target tissue

- Blood bound hormonal systems
 - Steroids carried on lipoproteins
 - Polypeptides and Proteins
 - Biogenic amines
- Inactivation System
- Half-life concept
 - Enovid
- Feedback Concept
- How is target tissue recognized
 - Cellular receptors
 - Testosterone Receptors and Sex Determination
 - "Penis by twelve" Syndrome

Effective in Small Amounts

- Physiological Dosage
- Pharmacological Dosage
- Distribution over time
- How were endocrine secretions discovered?

Parahormones & Pheromones

- Parahormones Carbon Dioxide
- Pheromones inter-individual hormone
 - Sex attractant in moths
 - Menstrual synchrony
 - Spontaneous abortion induction
 - Human Pheromone Change behavior
 - Sex attractant
 - Coital behavior
 - Production in the male
 - Production in the female



Pituitary Gland

- Location
 - Sella turcica
 - Floor of the brain
- Parts of the Pituitary Gland
 - Anterior Pituitary
 - Posterior Pituitary
 - Adenohypophysis
 - Neurohypophysis
 - Pars Nervosa
 - Pars Distalis
 - Pars intermedia
 - Pars Tuberalis



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Parts of the Pituitary

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Hormones of Acenohypophysis

- MSH Intermediate lobe
- Anterior Lobe Hormones
 - Basophilic and Acidophilic
 - Trophic and nontrophic hormones
 - Growth Hormone
 - Prolactin
 - Thyroid Stimulating Hormone TSH
 - AdrenoCorticoTrophic Hormone ACTH
 - Follicle Stimulating Hormone
 - Lutenizing Hormone
- Long Loop and Short Loop Feedback Systems
- Autocrine Feedback Systems

Hypothalamic Controls

- Hypothalamic Releasing Factors
 - Release stimulating factor
 - Release inhibitory factor
- Each Pituitary Hormone has a set or stimulating and inhibiting factors except the Gonadotropins.
- Prolactin Release Factor = Gonadotropin Inhibitory factor.













- Hypothalamic centers
 - Supraoptic nucleus
 - Paraventricular nucleus

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- Axonal Transport
- Pituicytes

Hormones of the Pars Nervosa

• Releasing factors

- Release hormones
- Release inhibiting hormones
- Oxytocin
 - Milk ejection mechanism
 - Uterine Contraction
 - Induction of labor
 - Orgasmic responses
 - Feedback mechanism Positive
- Vasopressin or ADH AntiDiuretic Hormone
 - Action on Distal Convoluted tubule and Collecting Duct
 - Pressor effects





- Prolactin Release Inhibitory Factor
- Prolactin Release Stimulating Factor
- Gonadotrophin Release Inhibiting Factor
- Prolactin hormone Pregnancy hormone
 - 199 amino acids
 - 20 minute half life
 - Receptor resembles growth hormone receptor
 - Increases milk production
 - Maintains corpus luteum
 - Inhibits ovary
 - Dopamine controls rate of release



- Protein mole. wgt. 22,000
- Bound to High Affinity Bound protein and Low Affinity Bound protein.
- Binding compensates for irrating secretion rates.
- Half life varies 6 to 20 minutes.
- Somatomedins produced by liver polypeptides growth factors
- Growth hormone increase IGF-I somatomedin
- What is growth?
- Uptake of Amino Acids



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- With the life cycle the rate of growth is not even.
- h • Infancy has the R highest rate decreasing until oft e spurt of growth caused by sexual maturity.



Years of age

Growth

- Growth Rates differ according the time of the life cyc
- Growth hormone and Thyroxin are the most active.
- Sex hormones govern growth spurt at sexual maturity.



Growth Hormone Effects

- Protein Anabolic
- Increased plasma phosphorus
- Increase absorption of in gut
- Diabetogenic
- Growth Periods
- Dwarfism
- Giantism
- Acromegly







- Excessive Production during childhood
- Different systems respond differently



- Progression of untreated acromegly
- irregular bone growth continues



Prior

Early Onset



Full Development







- Hands
- Feet
- Jaws



Posterior

Thyroid Lobes



- Infancy onset
- Persists throughout life
- Severe mental retardation

- Megaglossal tongue
- Druppy eyelids
- Lack of genital development
- Severe mental retardation

Graves Disease

Is it Hyperthyroid Hypothyroid of Euthyroid

Hyperthroidism Graves Disease

- Wasting of Temporalis and shoulder
- Myxedema in limbs

Exothalamia

- Fat accumulation behind eyes
- High TSH
- Patient previously had a thyroidectomy

Parathyroid Glands

- Adrenal Medulla
- Adrenal Cortex
 - Zona Glomerulosa
 - Zona Faciculata
 - <u>– Zona Reticularis</u> Medulla

Effects of Aucocorticoids

Effects of Gueocorticoids

Cushing's Syndrome

- Hyper-Adrenalism
- Primarily the Glucocorticoids

Adrenogenital Syndrome

- Adrenal tumor
- Pituitary Involvement???
- General Masculinization

- Low adrenal activity
- Gonocorticoid appear normal
- Increased pigmentation due to increased ACTH

- Classic Sex Hormones: Gonad and Adrenal
- Estrogen
- Progesterone
- Dihydrotestosterone
- Testosterone

- Follicles
- Estrogen
- Progesterone

- Mature Testis
- Semeniferous Tubules, Interstitial cells
- Testosterone
- Estrogen
- Inhibin

