

一般病理學 (General Pathology)

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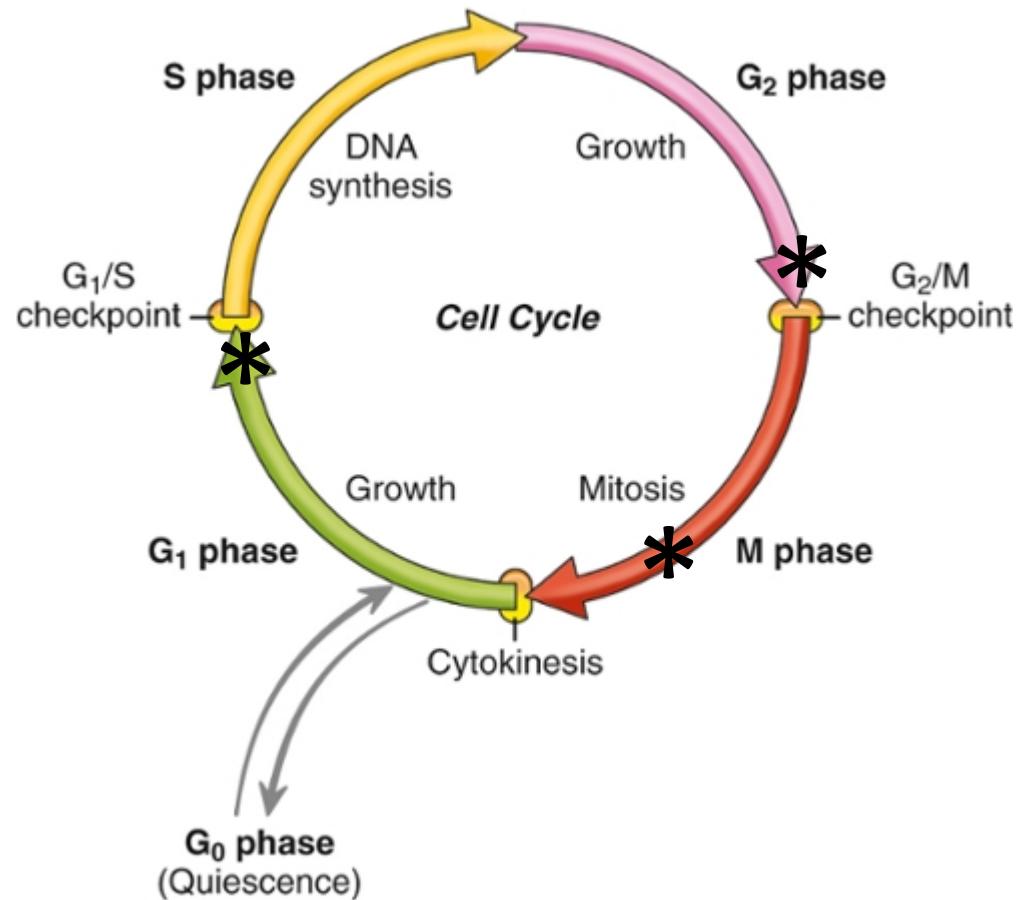
2018/6/8

General pathology

- Ch1: Mechanisms and Morphology of Cellular Injury, Adaptation, and Death
- Ch2: Vascular Disorders and Thrombosis
- Ch3: Inflammation and Healing
- Ch4: Mechanisms of Microbial Infections
- Ch5: Diseases of Immunity
- Ch6: Neoplasia and Tumor Biology

Neoplasia and Tumor Biology

Normal cell division cycle



- Interphase
 - G₁: presynthetic
 - S: DNA synthetic
 - G₂: premitotic
- M: mitosis and cytokinesis
- G₀: arrest

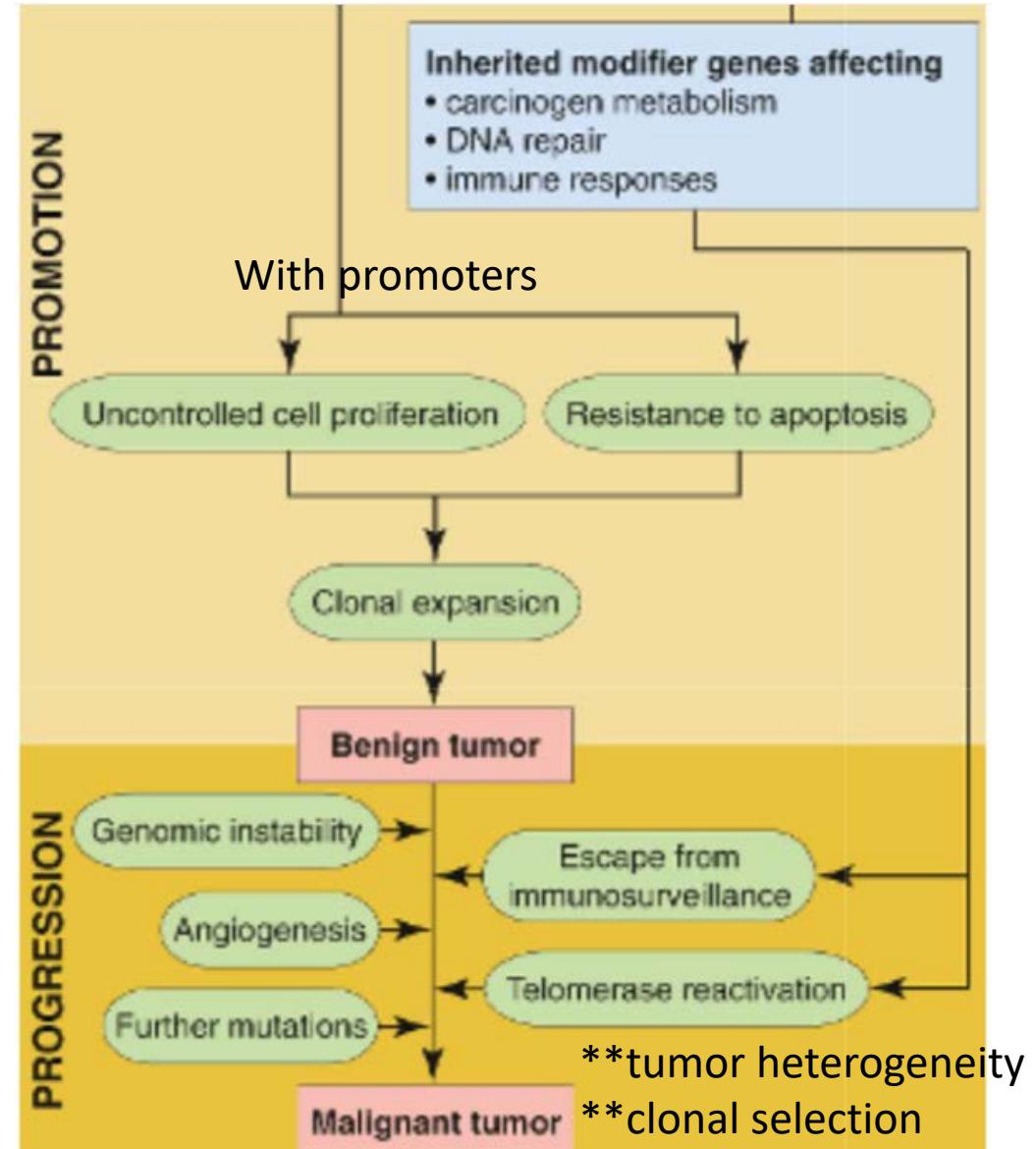
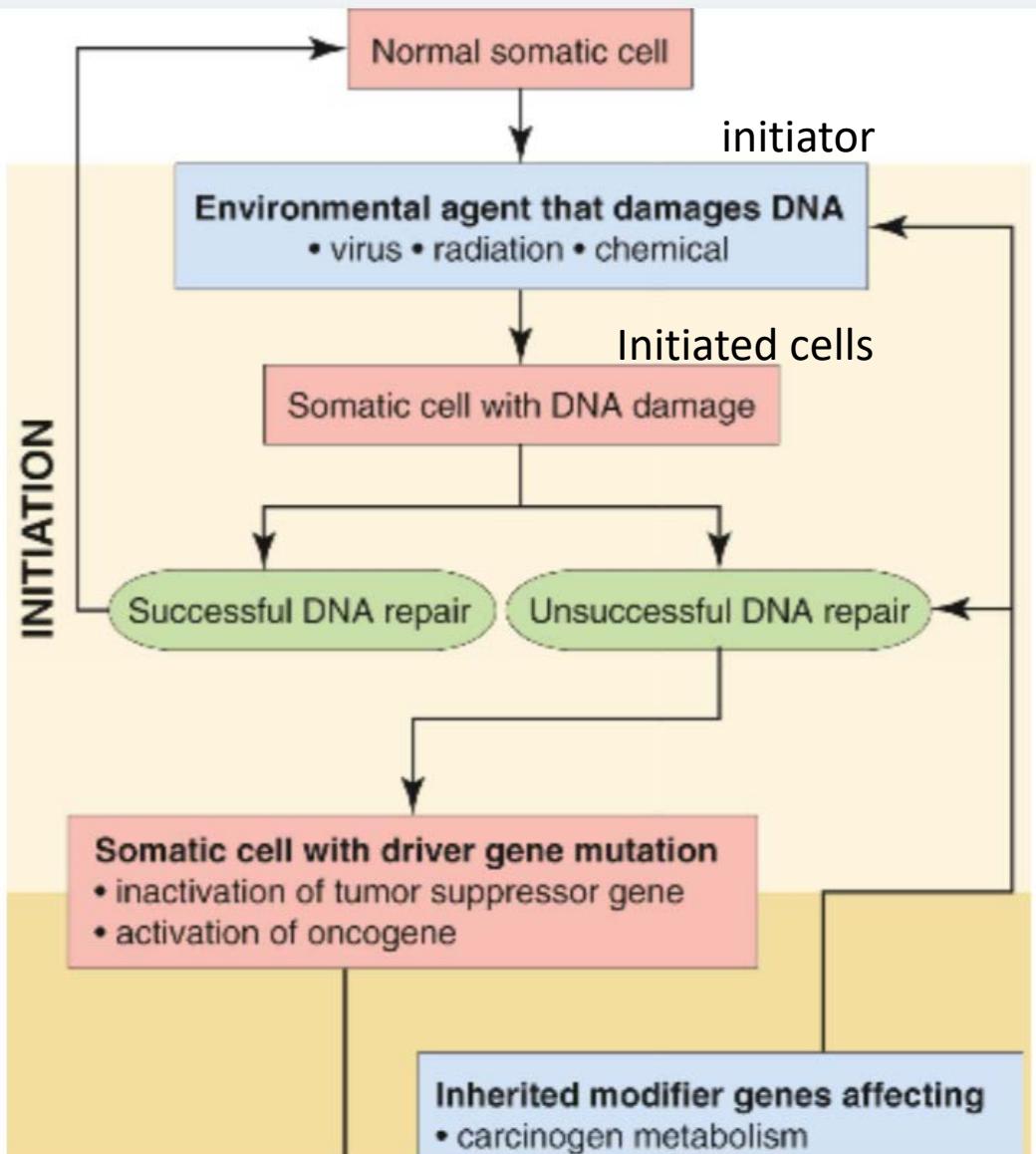
Checkpoints*

- G₁/S: DNA damage, cell size, nutrient, environment
- G₂/M: DNA replication
- Metaphase: spindle

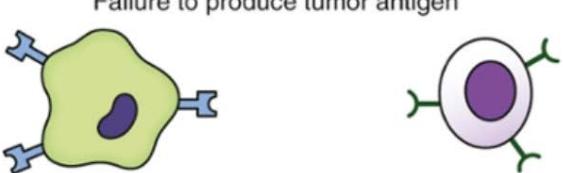
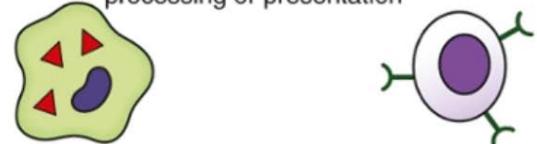
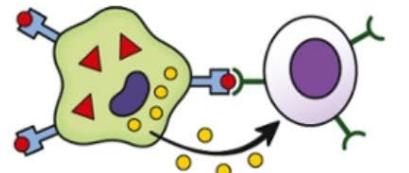
Stepwise tumor development

- Initiation → promotion → progression



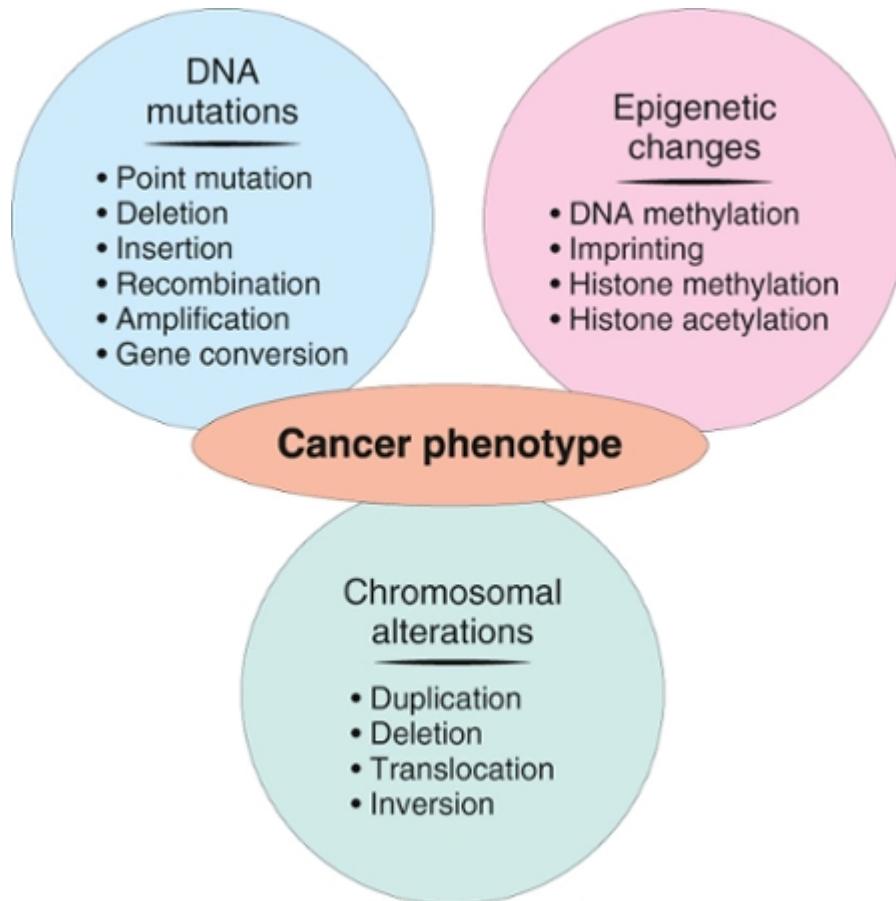


Evasion of immune response

Immune evasion by tumors	Failure to produce tumor antigen 	Lack of T lymphocyte recognition of tumor
	Mutations in genes needed for antigen processing or presentation 	Lack of T lymphocyte recognition of tumor
	Synthesis of immunosuppressive proteins 	Inhibition of T lymphocyte activation

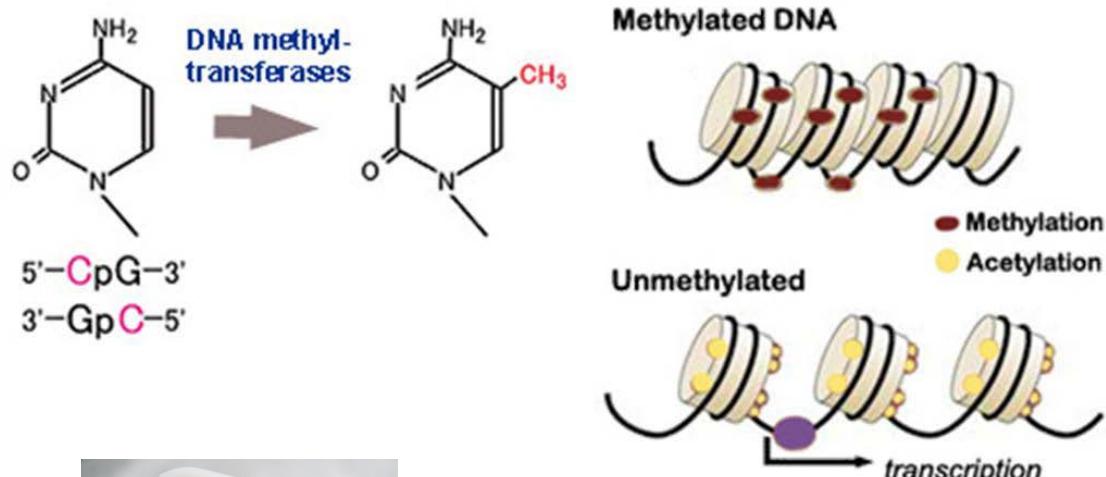
- Antigen masking
- Altered MHC expression
- Tolerance
- Immunosuppression
 - TGF- α (?) production
 - Fas ligand production -> nearby T cell apoptosis

Heritable alterations in cancer



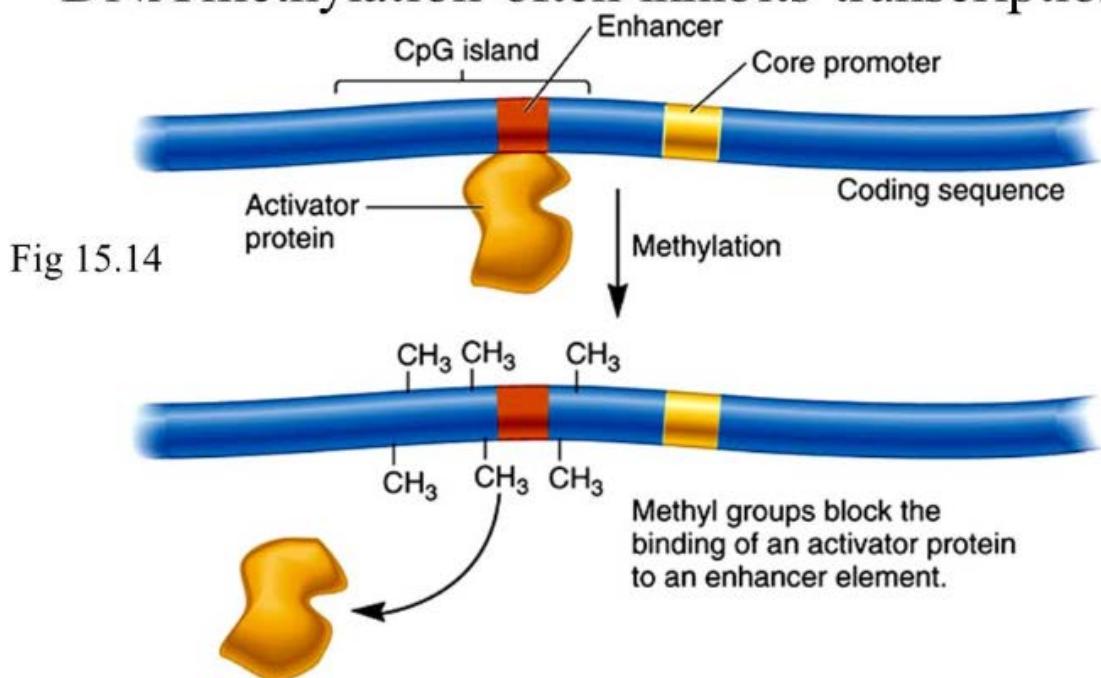
- DNA mutations
- Chromosomal alterations
- Epigenetic changes
 - DNA methylation
 - Imprinting
 - Histone modification
 - MicroRNA

DNA methylation often inhibits transcription (gene silencing)



*Image courtesy of the [cellscience](#) website.

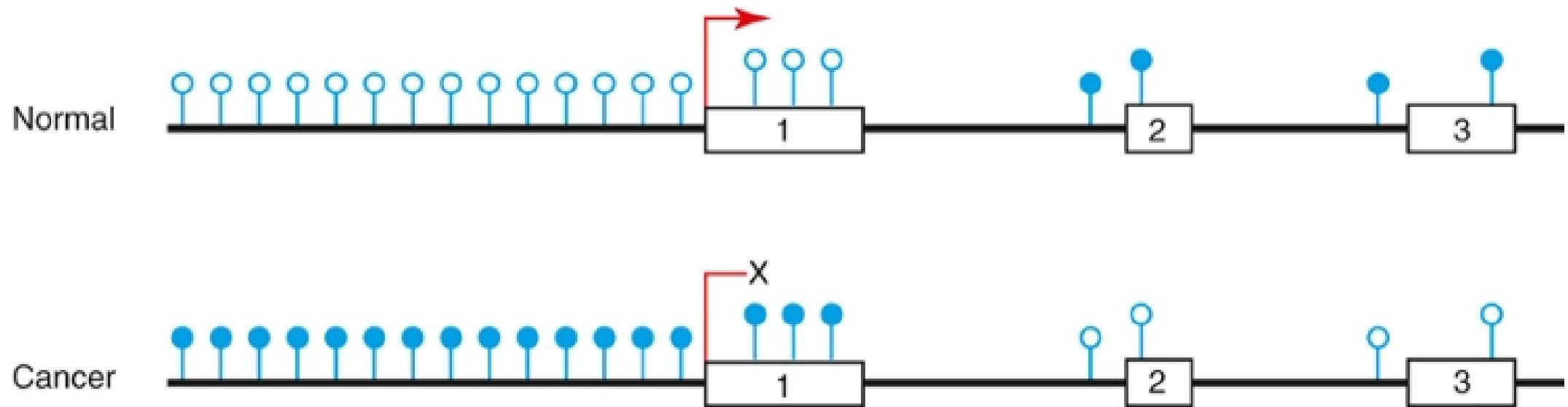
DNA methylation often inhibits transcription



(a) Methylation inhibits the binding of an activator protein.

CpG island methylation

HypOmethylation - O
Hypermethylation - S



抑癌基因 promoter 區CpG islands 的過度甲基化會抑制抑癌基因的表現
使細胞發生癌變的機率提高。

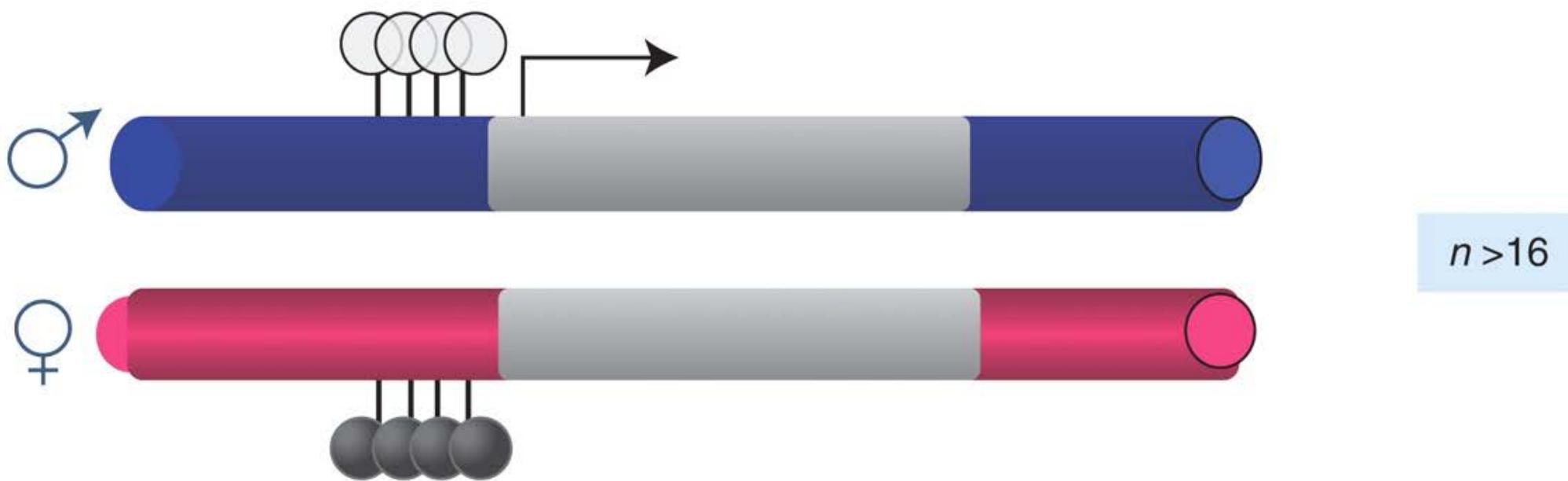
Imprinting

- 在一般二倍體生物的體細胞中擁有兩份基因組，通常這兩份基因組中的等位基因都能表現。
- 但少數（小於1%）的基因會受到銘印的影響，使其中一份基因失去作用。
- Maternal imprinting - 例如一種製造類胰島素的生長因子Insulin growth factor-2的基因，只有來自父親的等位基因能夠表現

Imprinting

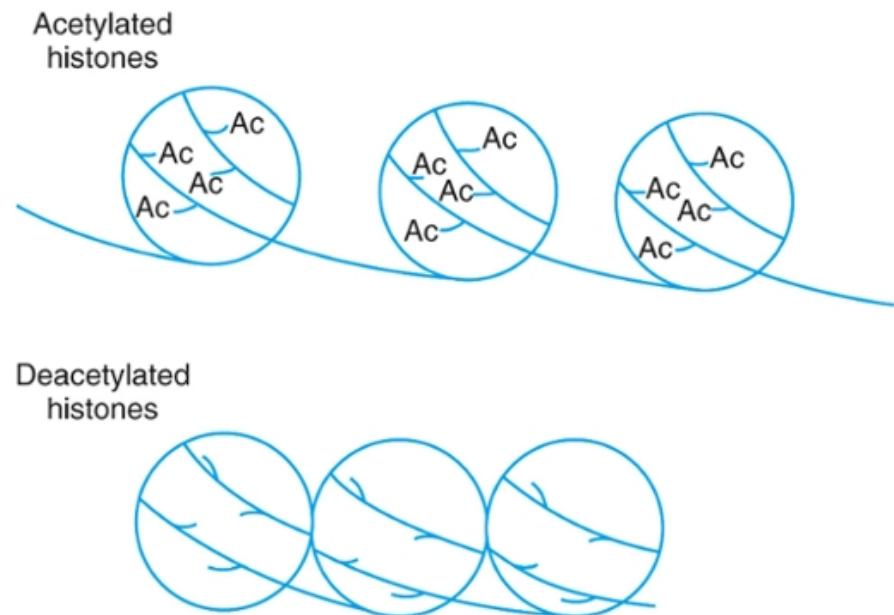
Cancer cells: lost imprinting
-> biallelic expression
-> higher than normal levels of growth-promoting gene products

A Maternally methylated DMRs and ICRs are located at promoters



Histone modification

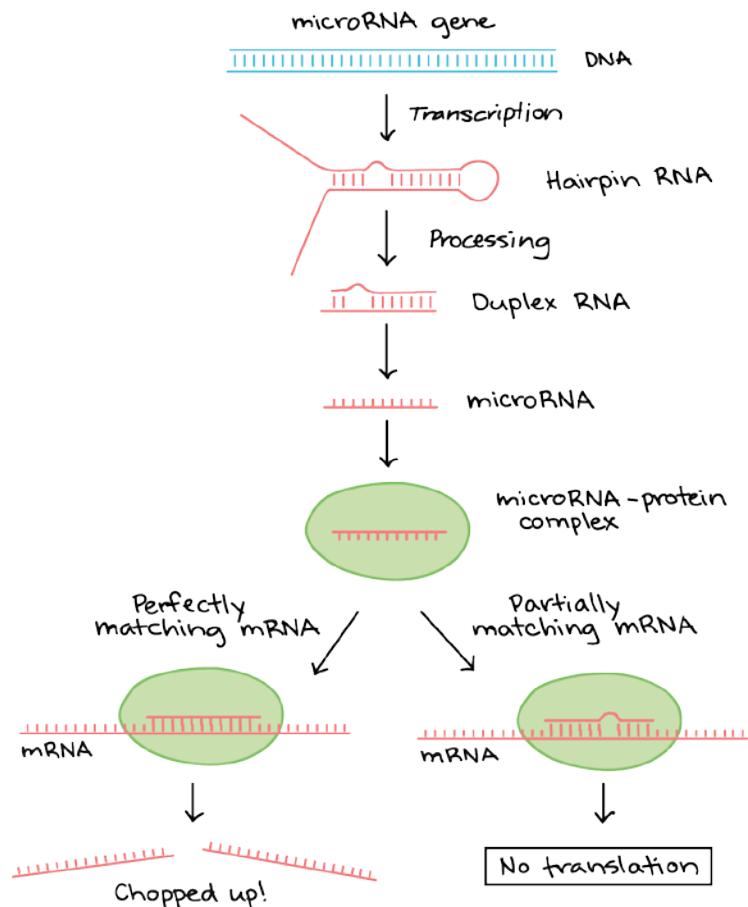
- Histone acetylation, methylation and phosphorylation alter transcription of associated DNA



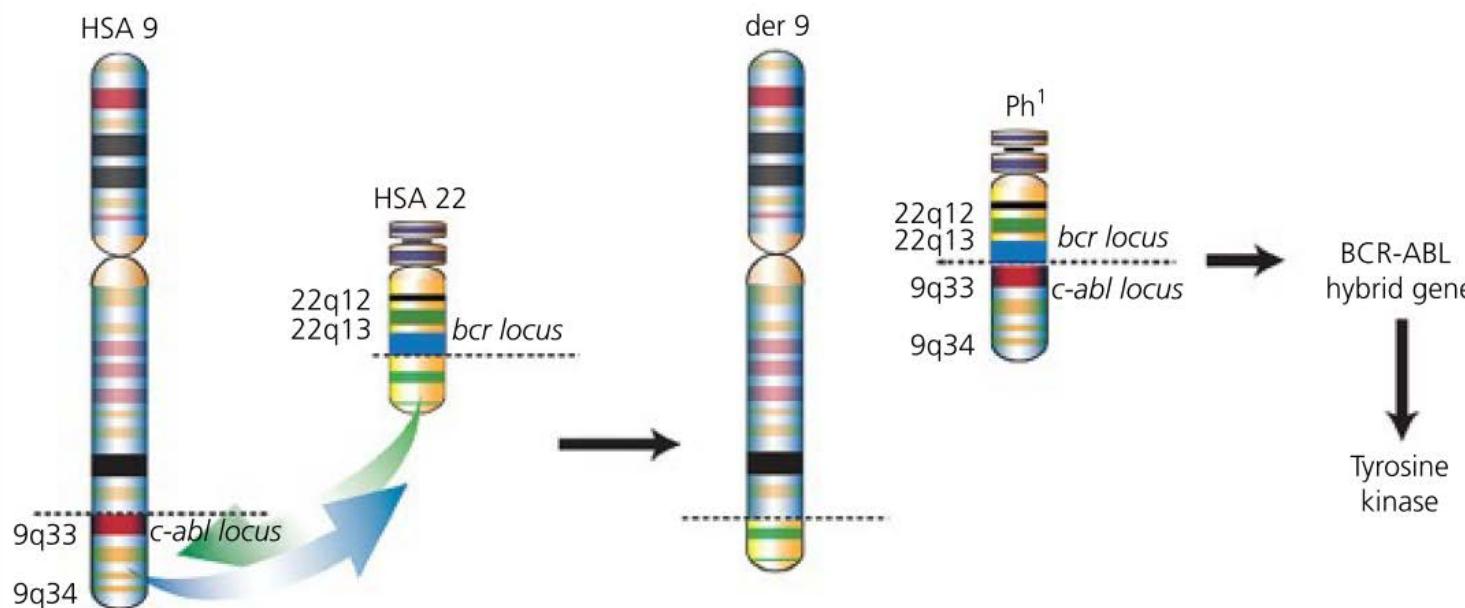
Histone acetylation
-> chromatin relaxation
-> ↑accessible to transcription factors

MicroRNA – noncoding RNA

- Post-translational modification
- Binding target mRNAs
 - mRNA degradation or translation repression
- ↓ Expression of target genes



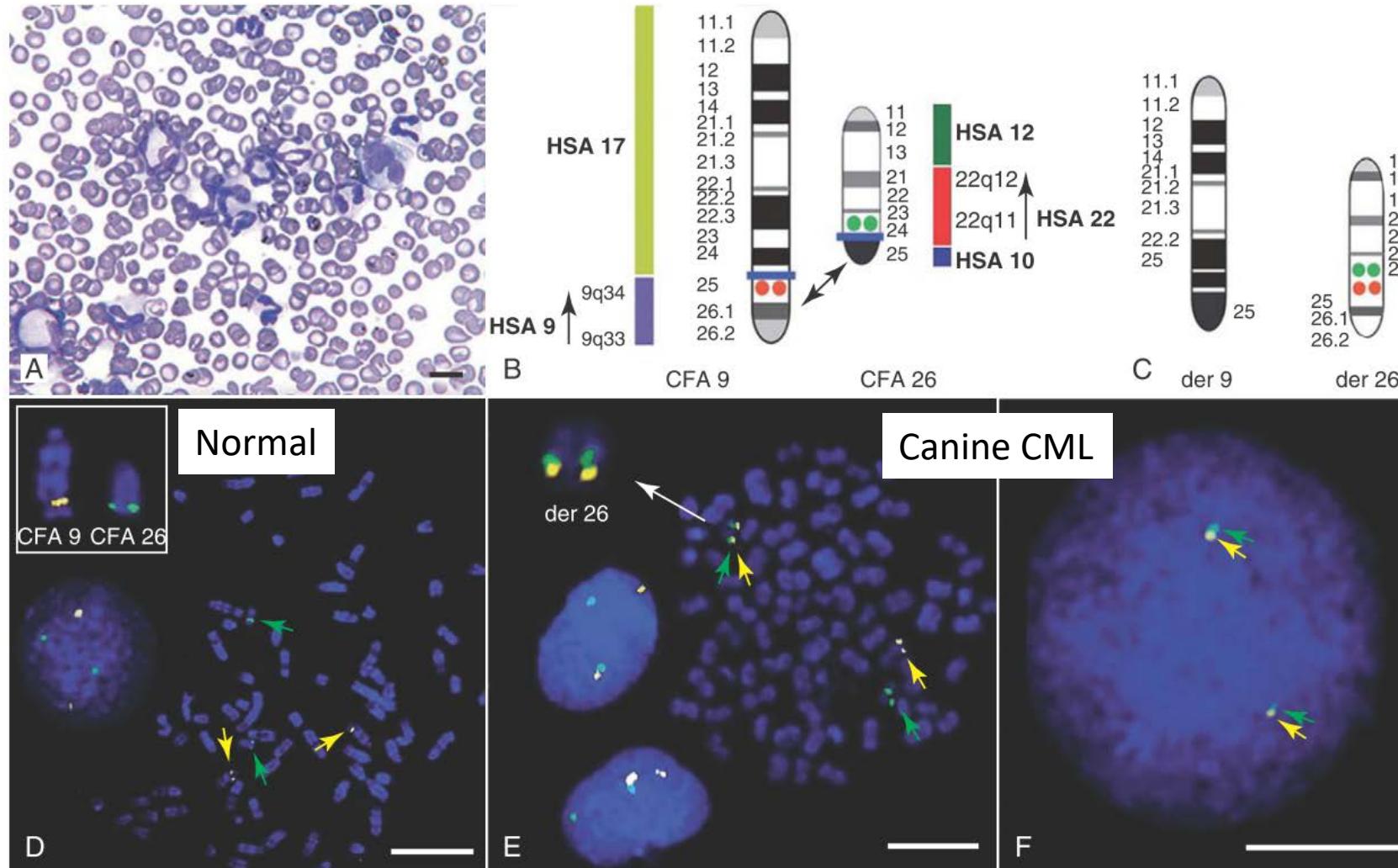
Chromosome translocation: Philadelphia chromosome t(9;22)(q34;q11) in human



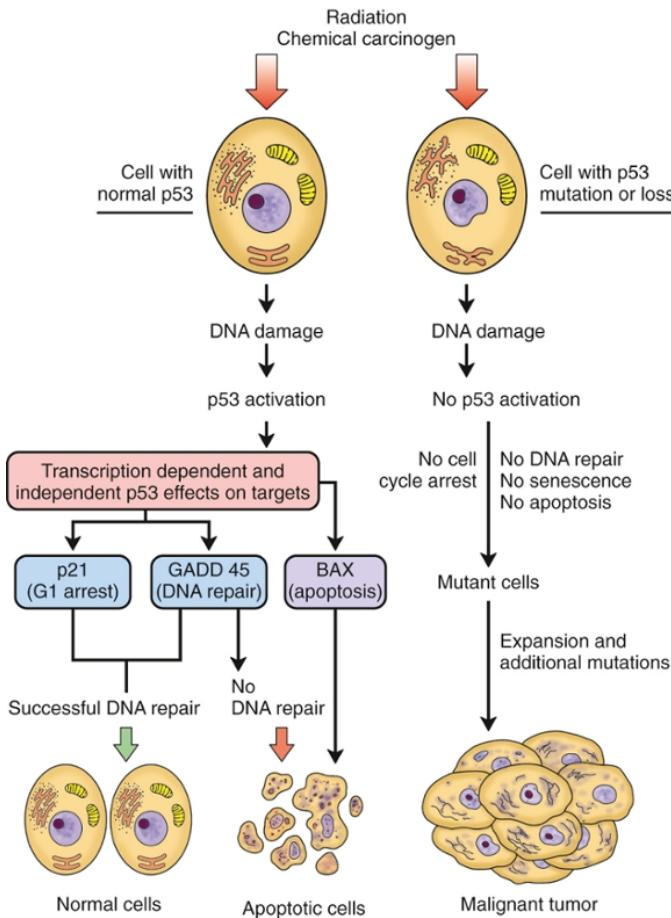
BCR-ABL fusion gene

- Chronic myeloid leukemia
- Acute lymphoblastic leukemia (uncommon)

BCR-ABL translocation in canine chronic myelogenous leukemia



Tumor suppressor genes: p53



P53- Genomic Guardian

DNA damage

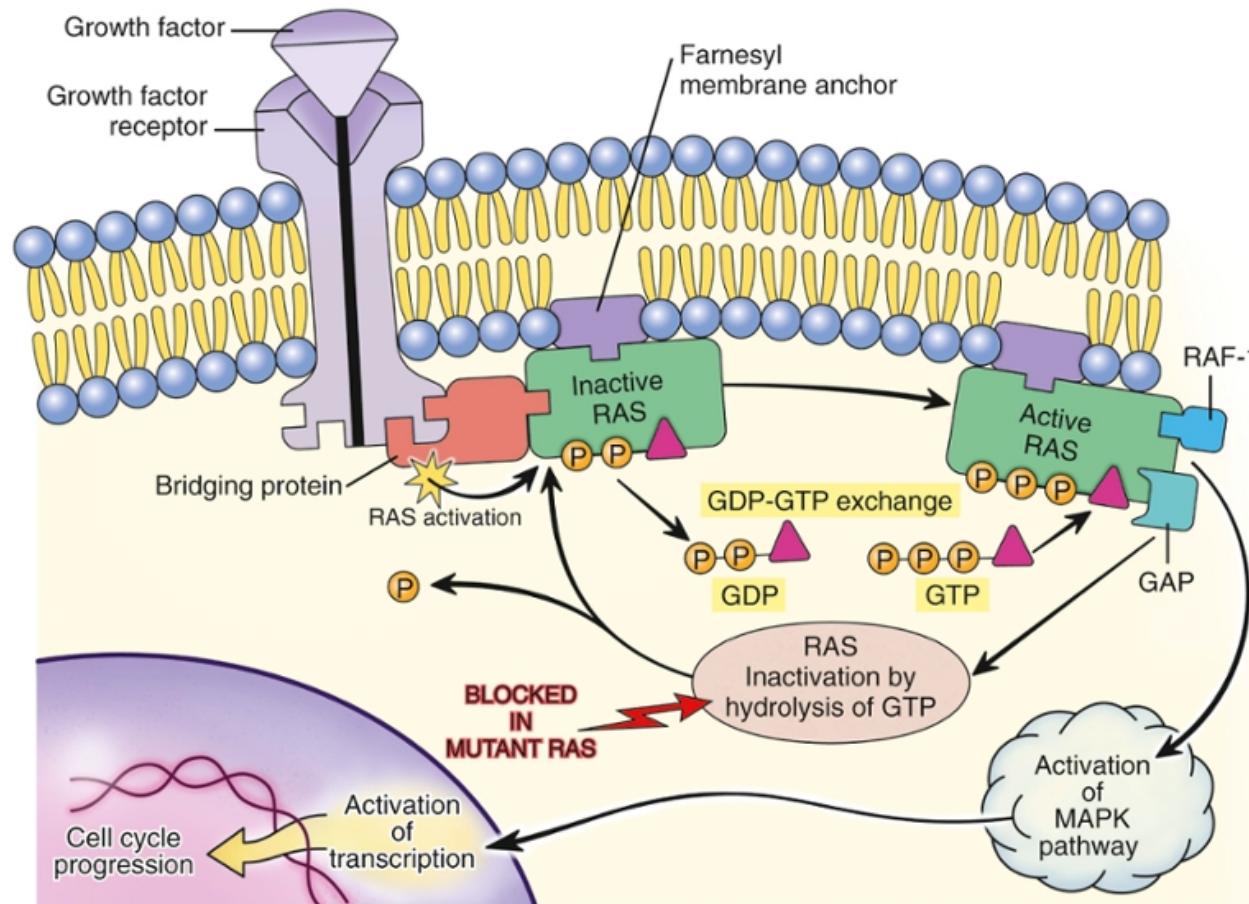
- > p53 activation
- > G1 cell cycle arrest at checkpoints
- > DNA repair

Tumor oncogenes

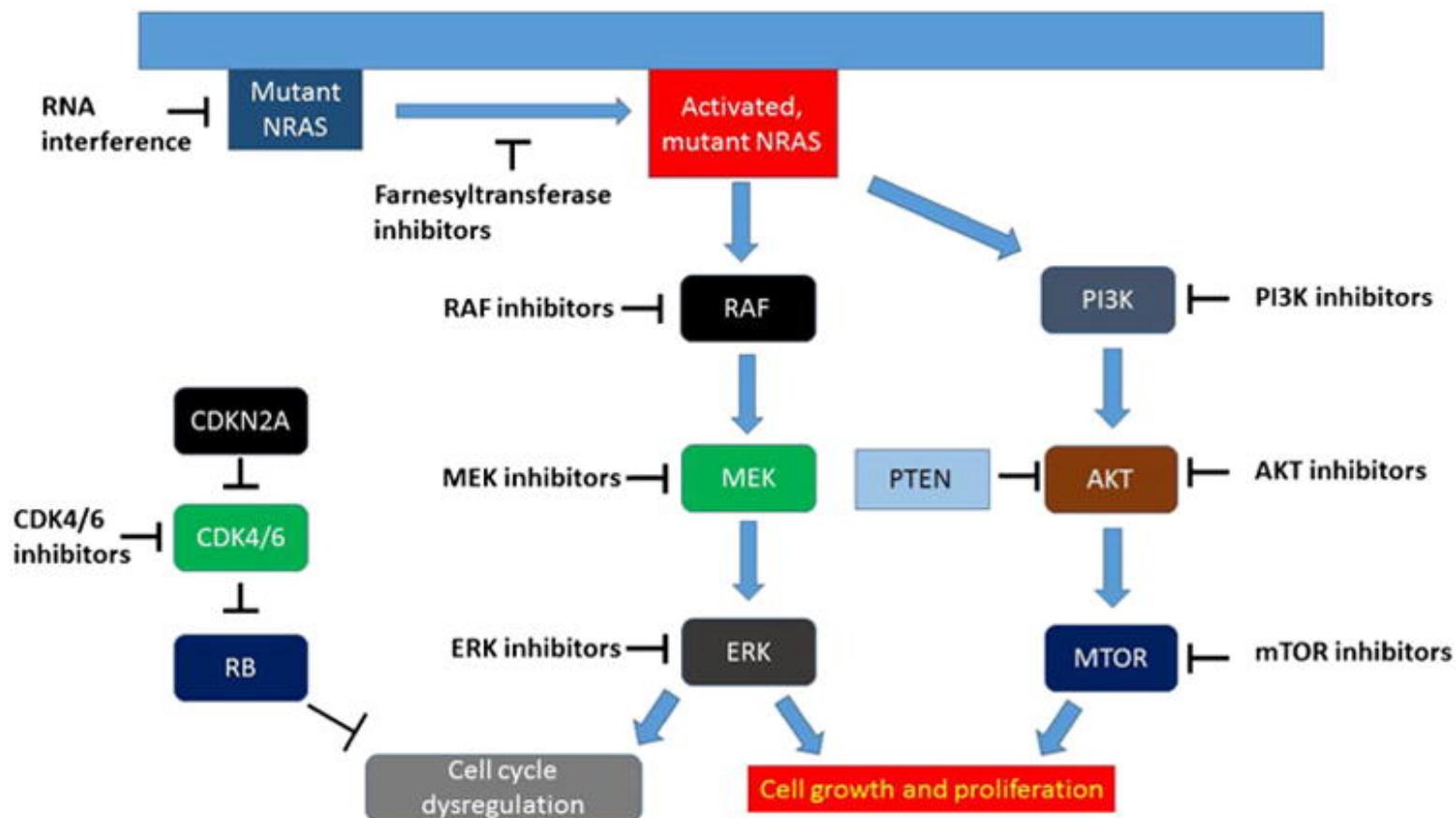
ONCOGENE	NAME	ABBREVIATION	
Growth factors	Platelet-derived growth factor	PDGF	
	Epidermal growth factor	EGF	Protein kinases
	Insulin-like growth factor-1	ILGF-1	Tyrosine kinase
	Vascular endothelial growth factor	VEGF	Tyrosine kinase
	Transforming growth factor-β	TGF-β	Serine-threonine kinase
	Interleukin-2	IL-2	Serine-threonine kinase
Growth factor receptors	PDGF receptor	PDGFR	G-protein signal transducers
	EGF receptor	EGFR, erbB-1	GTPase
	ILGF-1 receptor	ILGF-1R	GTPase
	VEGF receptor	VEGFR	GTPase
	IL-2 receptor	IL-2R	
	Hepatocyte growth factor receptor	met	Nuclear proteins
	Heregulin receptor	neu/erbB-2	Transcription factor
	Stem cell factor receptor	Kit	ets
			fos
			jun
			myb
			myc
			rel
<i>GTPase</i> , Guanosine triphosphatase.			

(Withrow and MacEwen's Small Animal Clinical Oncology, Fifth Edition)

Signal Transduction Oncogenes: RAS Family



RAS-RAF-MEK-MAPK pathway

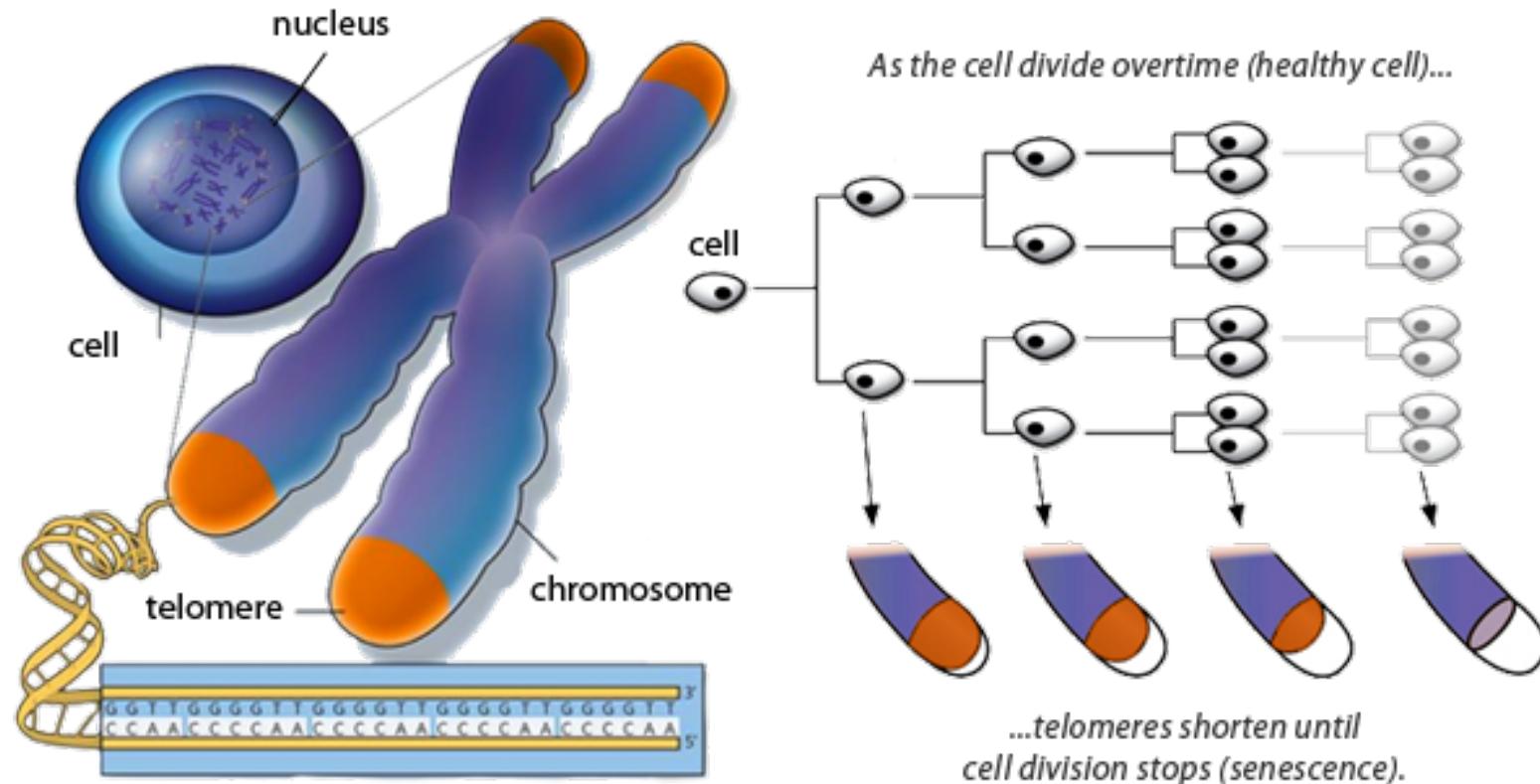


(Johnson, D. B., & Puzanov, I. (2015). Treatment of NRAS-mutant melanoma. *Current treatment options in oncology*, 16(4), 15.)

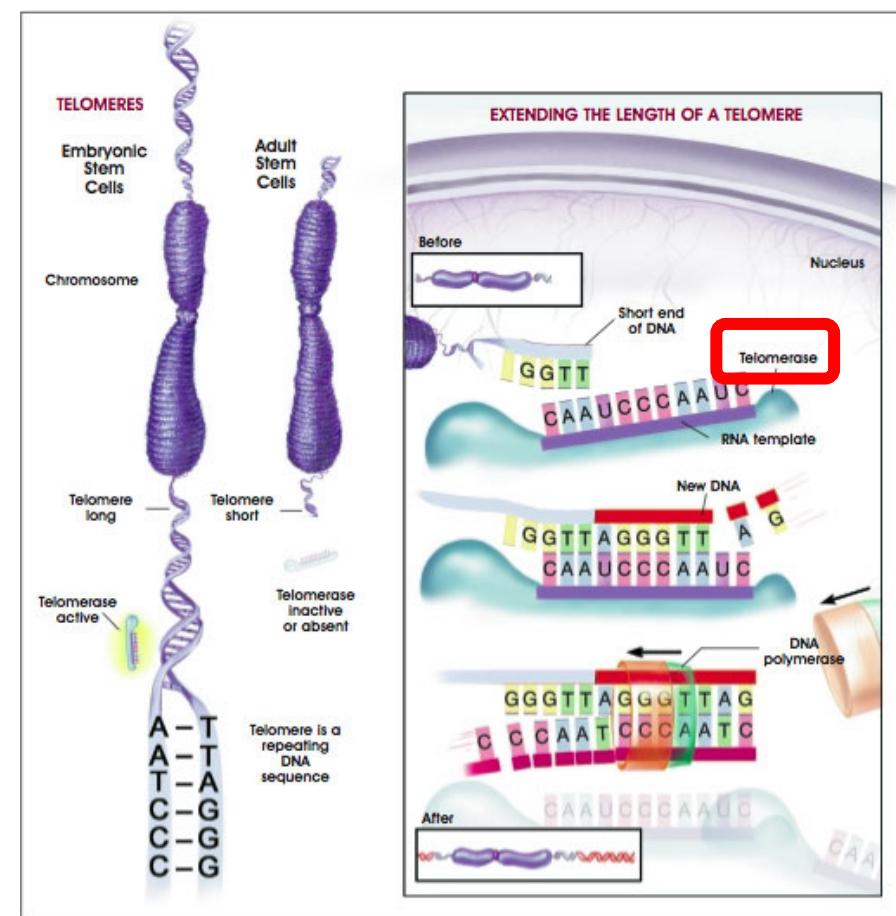
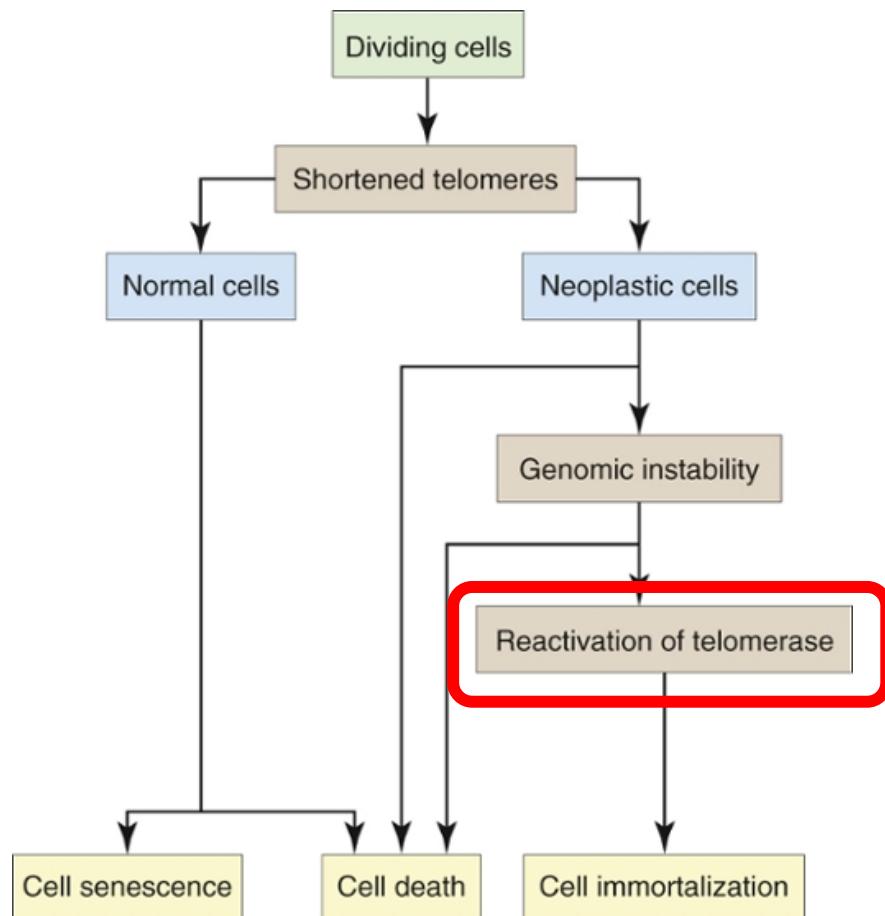
Selected experimental and approved treatment options for advanced NRAS-mutant melanoma

Agent (reference)	NRAS specific?	Response rate	OS (median)	FDA approved?
Binimetinib [2•]	Yes	20 % (6 of 30)	*	No
Binimetinib + LEE011 [3]	Yes	33 % (7 of 21)	*	No
IL-2 [4]	No	16 %	11.4 months	Yes
Ipilimumab [5•]	No	10.9 %	10.1 months ^a (2nd line +)	Yes
Pembrolizumab [6, 7•]	No	38 % (ipi naïve) 25 % (ipi pre-tx)	*	Yes ^b
Nivolumab [8, 9]	No	31 % (ipi naïve) 25 % (ipi pre-tx)	16.8 months	No

Normal cells: telomere shortening



Tumor: Reactivation of Telomerase



Mechanisms and Morphology of Cellular Injury, Adaptation, and Death

Adaptations that changes cell size, number or appearance

- Atrophy
- Hypertrophy
- Hyperplasia
- Metaplasia
 - Squamous metaplasia: chronic inflammation (mammary ducts/mastitis), hormonal imbalance (estrogen/prostate), Vit A deficiency or trauma
- Dysplasia

Pigments

Exogenous

- Carbon and other dusts
- Carotenoid pigments
- Tetracycline
 - Yellowish discoloration (with bright yellow fluorescence under UV light)

Nonhematogenous

- Melanin
- Lipofuscin: fat stain(+), PAS(+)
- Ceroid

Hematogenous

- Hemoglobin
- Hematin
 - Acid hematin
 - Parasitic hematin
- Hemosiderin
- Hematoidin
- Bilirubin
- Porphyria
 - Teeth, bone, urine: red-brown and fluoresce red under UV light

Vascular Disorders and Thrombosis

Endothelial cell functions and responses in homeostasis and disease

- Fluid distribution and blood flow*
- Hemostasis
- Inflammation
- Growth factors
- Fibrinolysis

Fluid distribution and blood flow

- Semipermeable membrane for fluid distribution
 - Interendothelial junctions
- Vasodilation
 - Nitric oxide
 - Prostacyclin (PGI_2)
 - Endothelial-derived hyperpolarizing factor
 - C-type natriuretic peptide
- Vasoconstriction
 - Endothelin
 - Reactive oxygen species
 - Angiotensin II
 - Products of prostaglandin H_2 (e.g., thromboxane A_2)

Shock

- Cardiogenic shock
- Hypovolemic shock
 - 35% to 45% blood loss: ↓ ↓ blood pressure and cardiac output
- Blood maldistribution
 - Anaphylactic shock
 - Neurogenic shock
 - Septic shock

Inflammation and Healing

Acute inflammatory response

- Fluidic (exudative) phase
 - Endothelial cell dynamics
 - Formation of endothelial cell gaps, in response to cytokines (IL-1 and TNF) and hypoxia
- Cellular phase

Cytokines in acute inflammation

Cytokines in Acute Inflammation		
Cytokine	Principal Source	Principal role in acute inflammation
TNF	<ul style="list-style-type: none">• Macrophages• Mast cells• T lymphocytes	<ul style="list-style-type: none">• Leukocyte activation• Endothelial activation• Systemic acute phase response (next lecture)
IL-1	<ul style="list-style-type: none">• Macrophages• Endothelial cells• Some epithelial cells	<ul style="list-style-type: none">• Systemic acute phase response, greater role in fever
IL-6	<ul style="list-style-type: none">• Macrophages• ?others	<ul style="list-style-type: none">• Systemic acute phase response

Complement Cascade

病原被辨認：
微生物表面
與補體或抗體結合

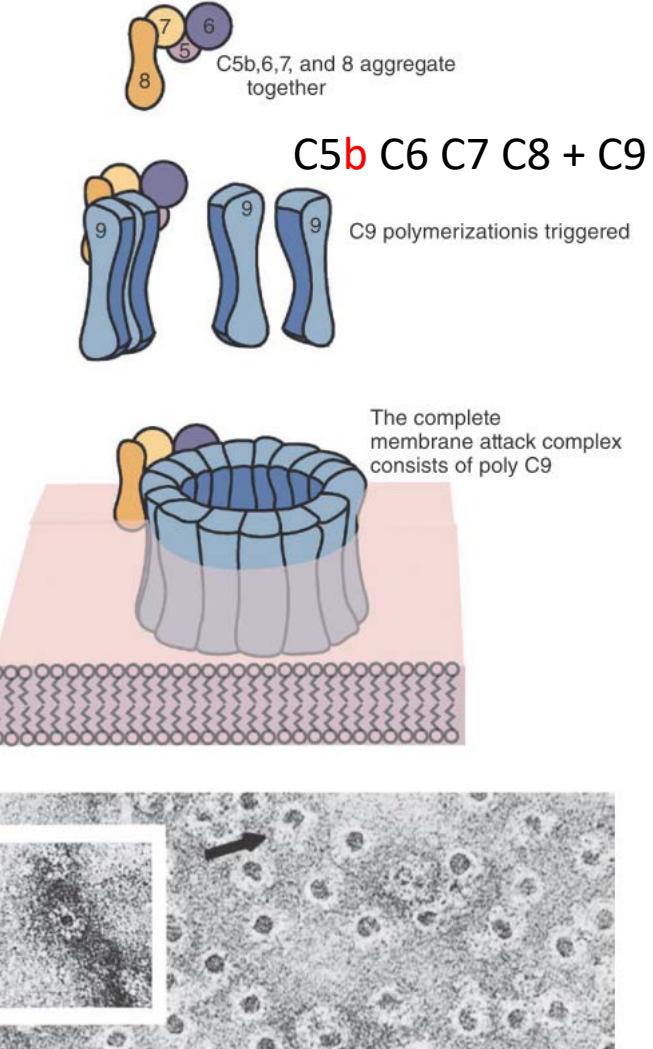
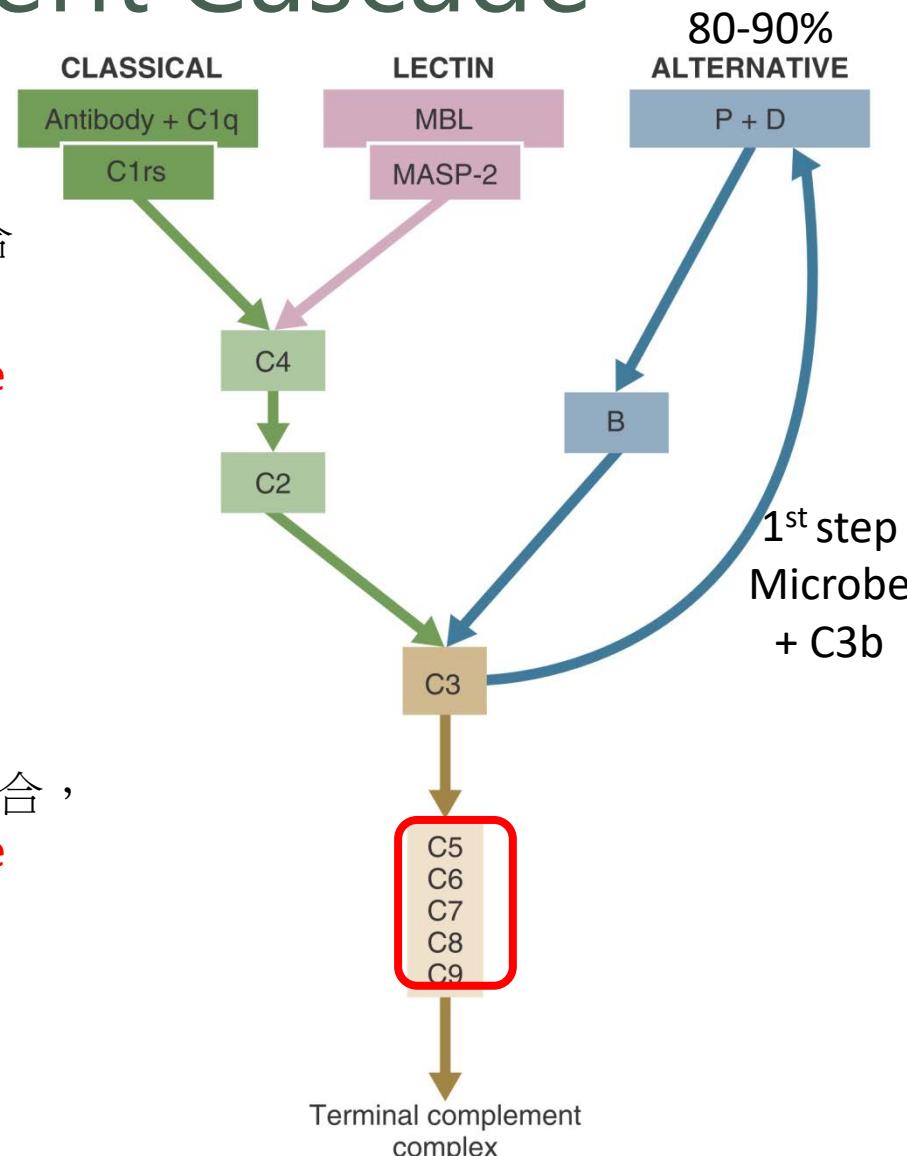
形成C3 convertase
 - C4b2a
 - C3bBb

切C3

C3b與C3 convertase組合，
形成C5 convertase

- C4b2a3b
- C3bBb3b

形成MAC



病原被辨認：
微生物表面
與補體或抗體結合

形成C3 convertase

- C4b2a
- C3bBb

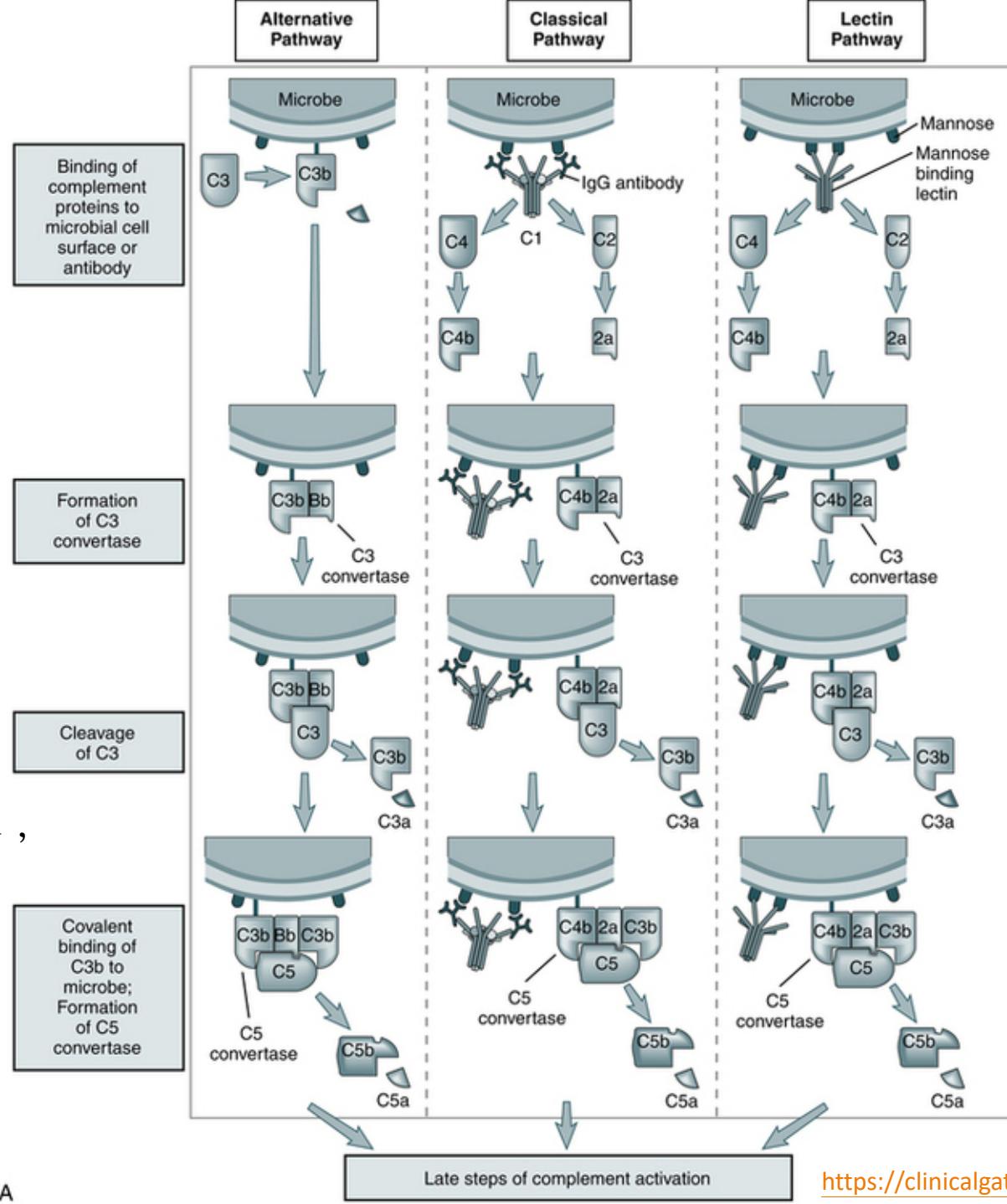
切C3

C3b與C3 convertase組合，

形成C5 convertase

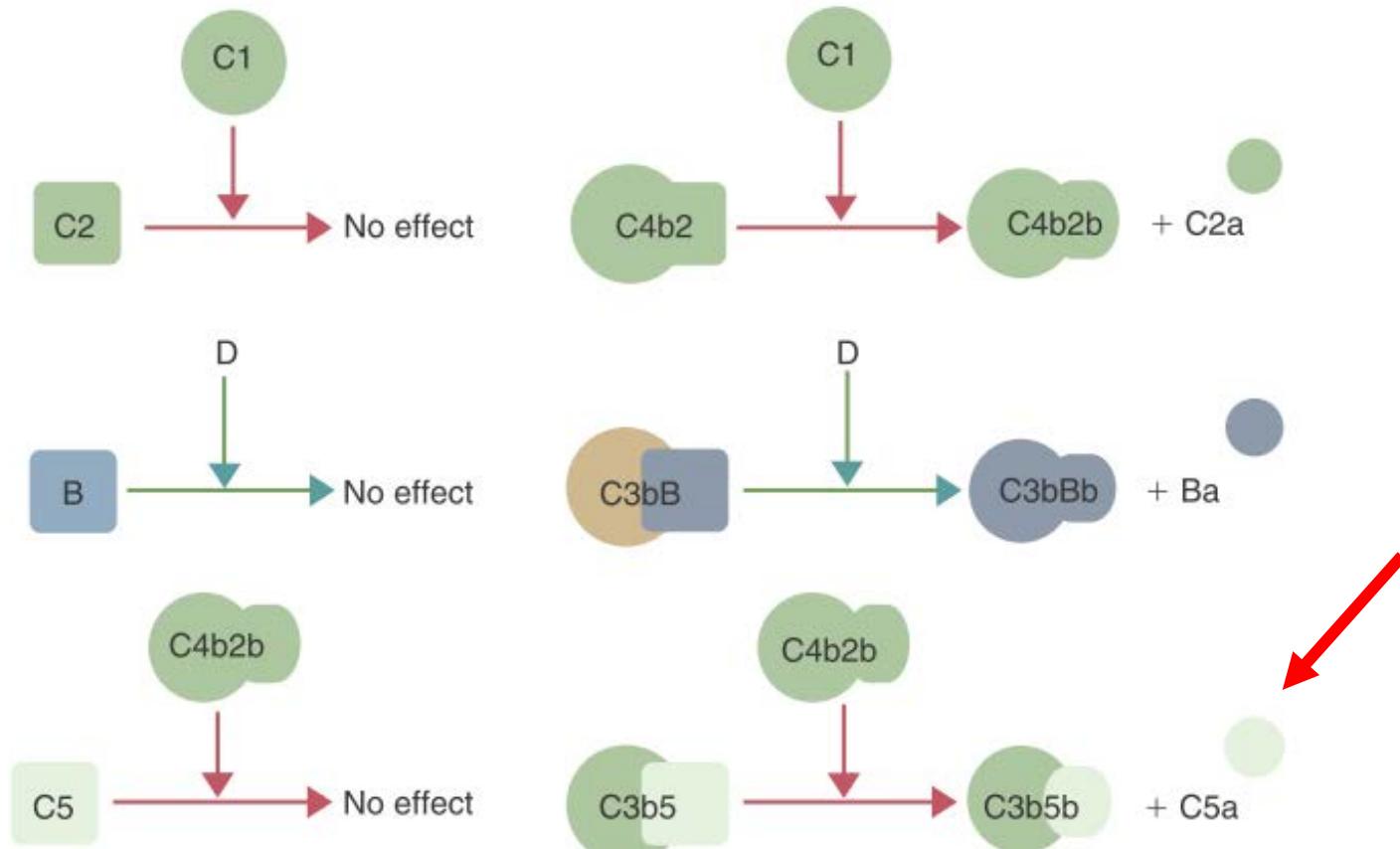
- C4b2a3b
- C3bBb3b

形成MAC



Anaphylatoxin

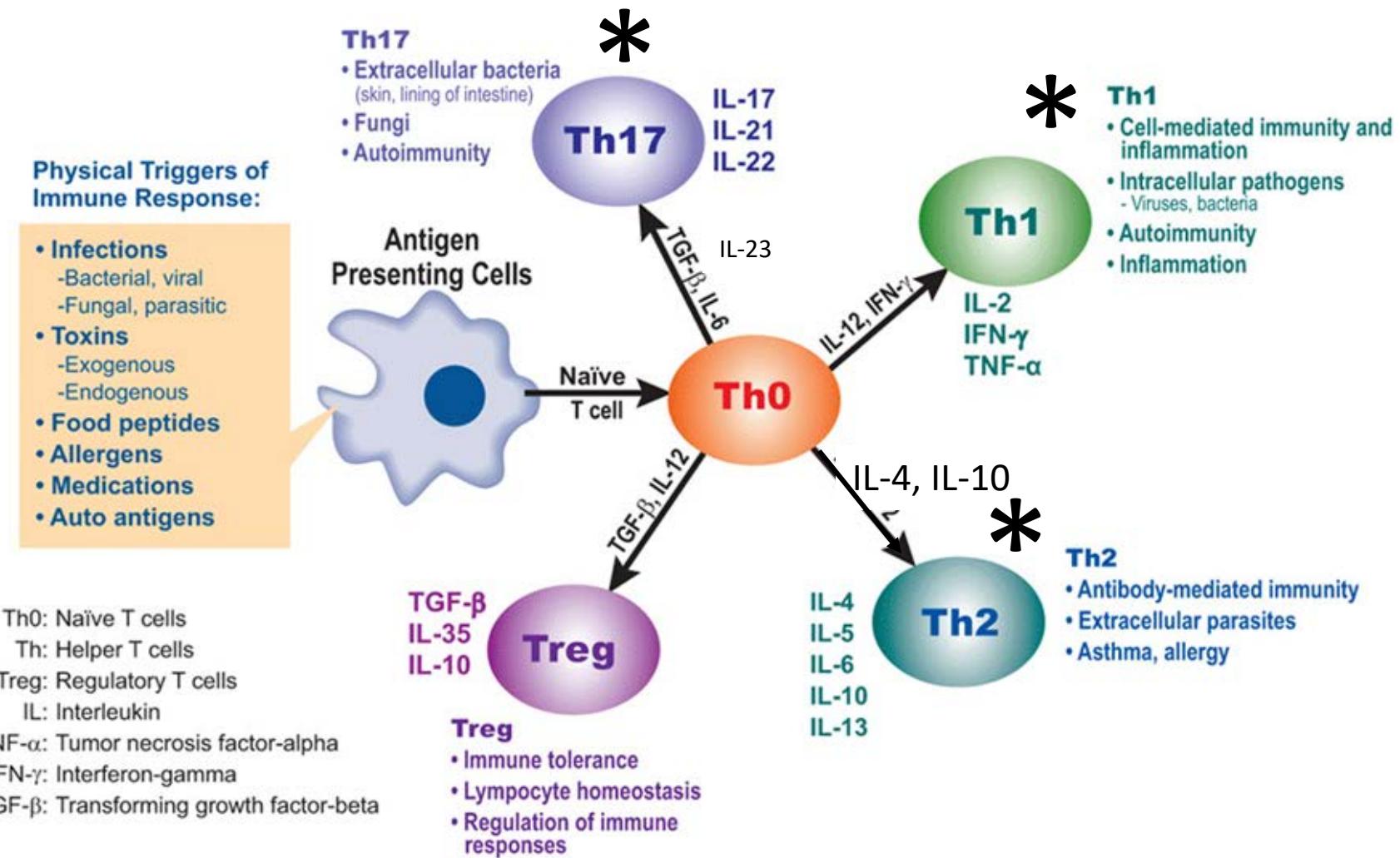
- C3a and C5a
- Shock



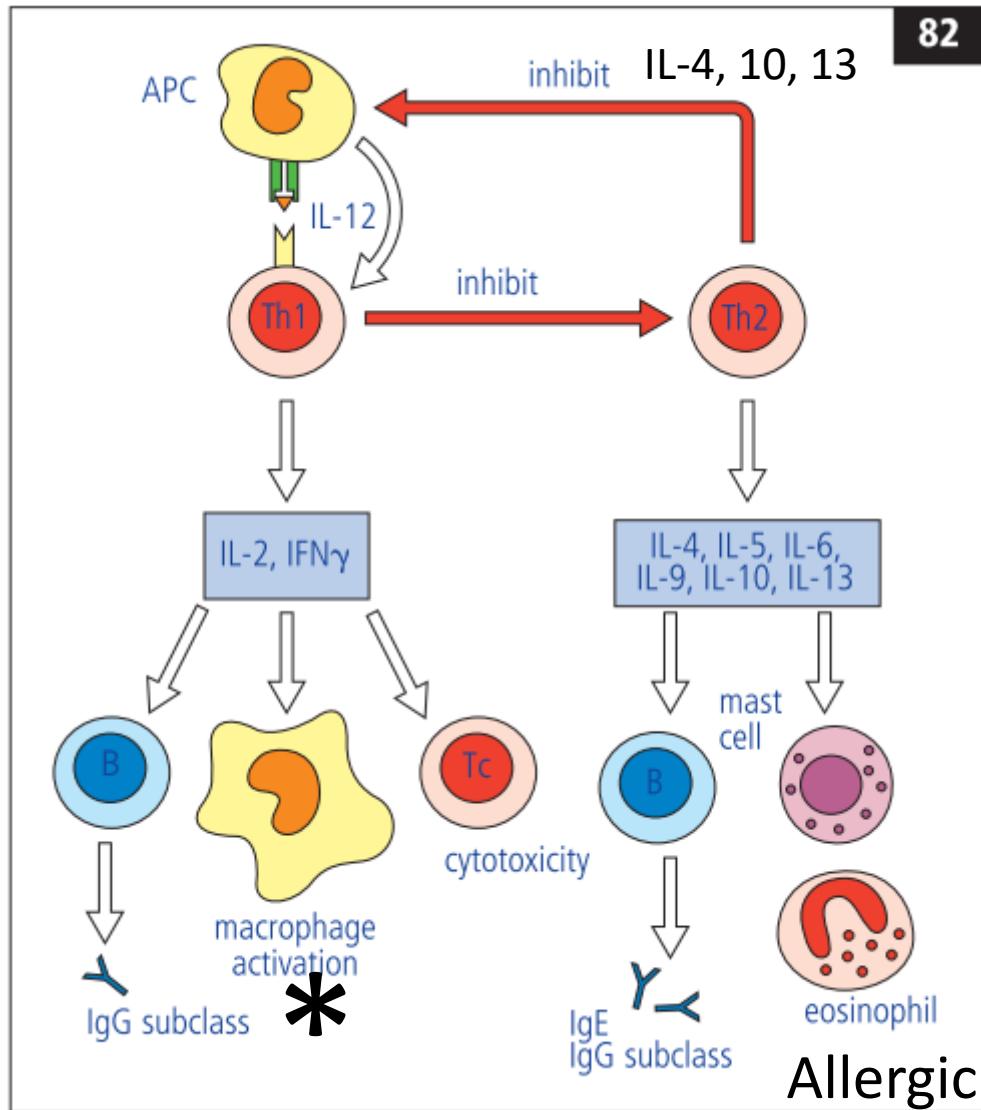
Chronic inflammatory response

- Healing by fibrosis
- Abscess formation
- Granulomatous inflammation and granuloma formation
 - Nodular (tuberculoid) granulomas
 - Diffuse (lepromatous) granulomas
 - Sarcoids of horses
 - Eosinophilic granulomas
 - Others

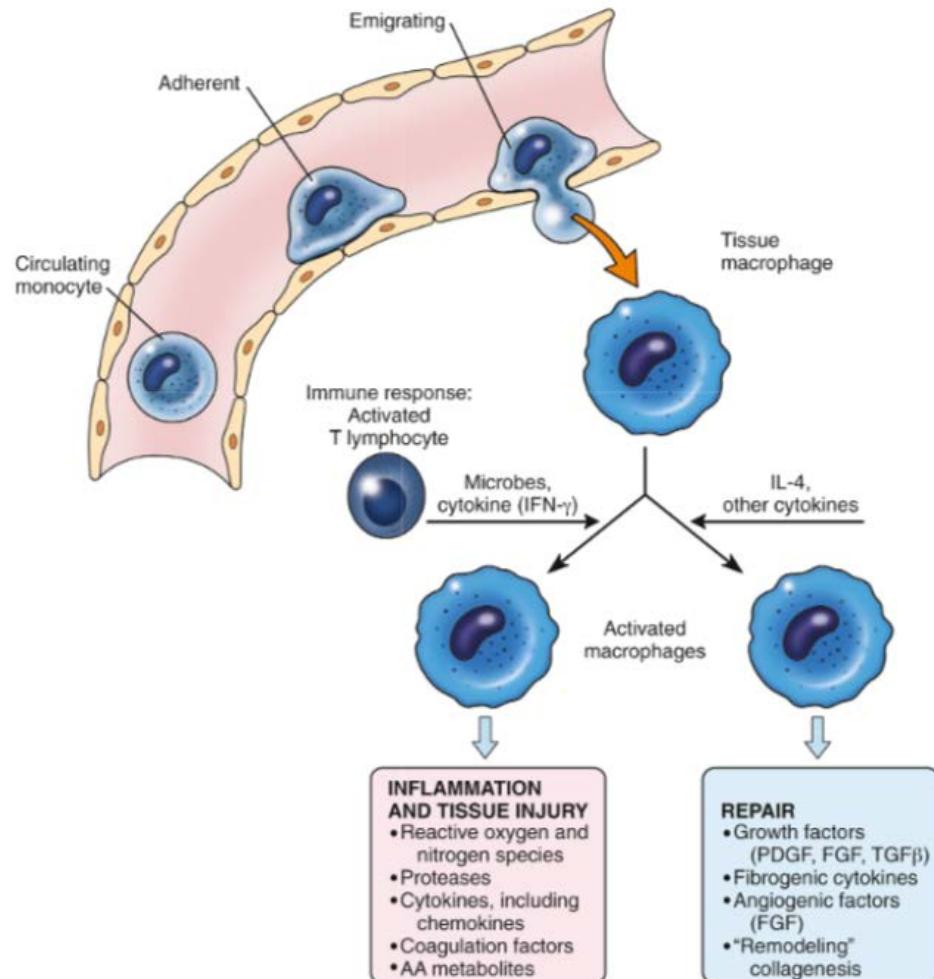
Lymphocytes: immunologic responses



CD4+ T helper lymphocytes

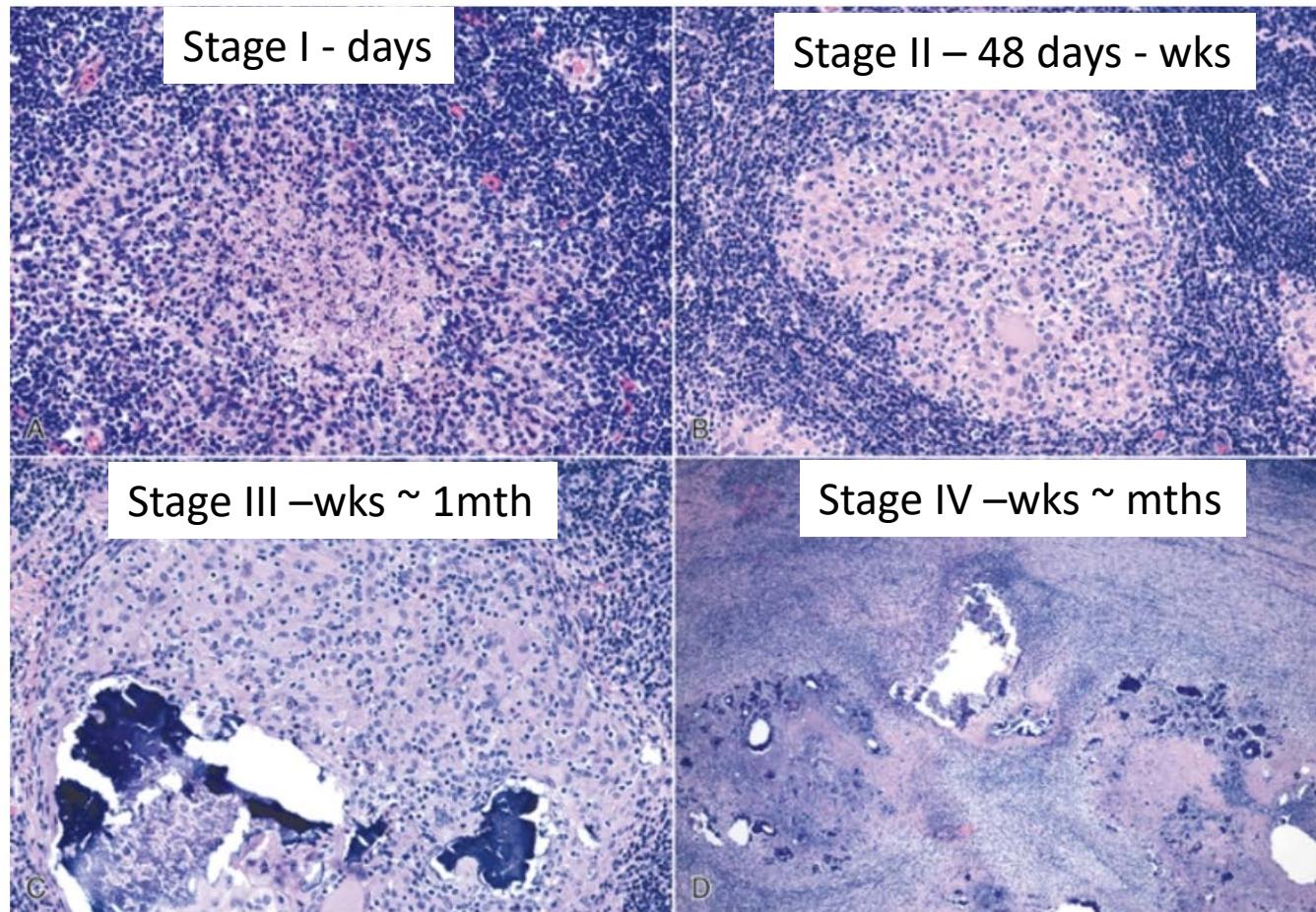


Activated macrophages in chronic inflammation



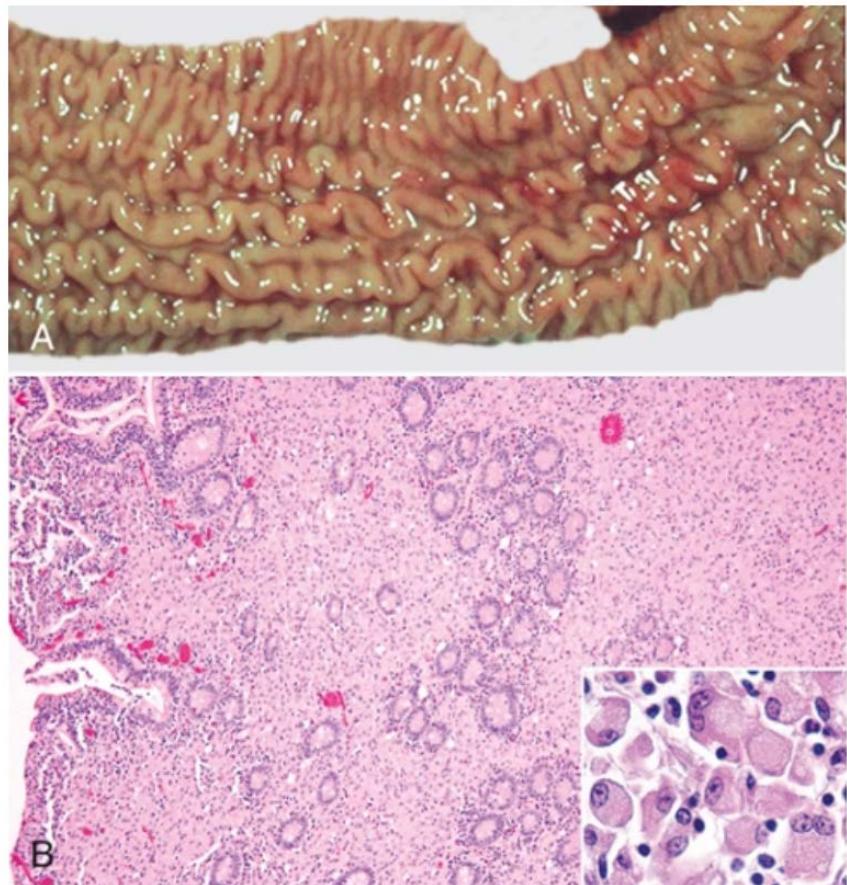
- Inflammation and tissue injury
 - Reactive oxygen and nitrogen species
 - Proteases
 - Cytokines, including chemokines
 - Coagulation factors
 - AA metabolites
- Repair
 - Growth factors (PDGF, FGF, TGF-beta)
 - Fibrogenic cytokines
 - Angiogenic factors (FGF)
 - "Remodeling" collagenesis

Nodular (tuberculoid) granulomas: T_H-1 biased

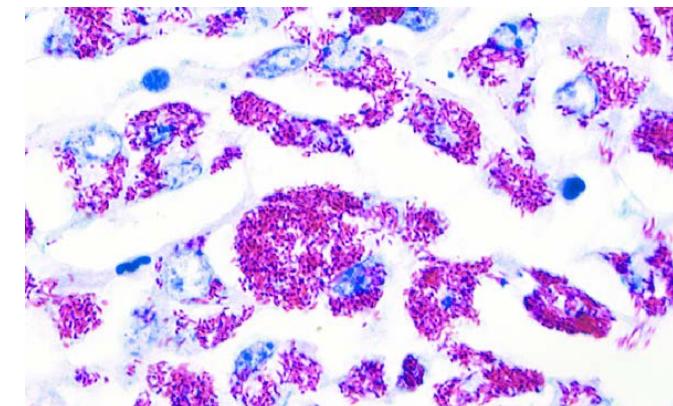


- Pathogens
 - *Mycobacterium bovis*
 - *Mycobacterium tuberculosis*
 - deep fungal infections, (i.g., coccidioidomycosis)
- Caseating granulomas
- Noncaseating granulomas

Diffuse (lepromatous) granulomas: T_H-2 biased



- Human: leprosy (*Mycobacterium leprae*)
- Cat: leprosy (*M lepraemurium*)
- Dog: leproid granuloma
- Cattle, sheep, goats: Johne's Disease (*Mycobacterium avium* subsp. *Paratuberculosis*)

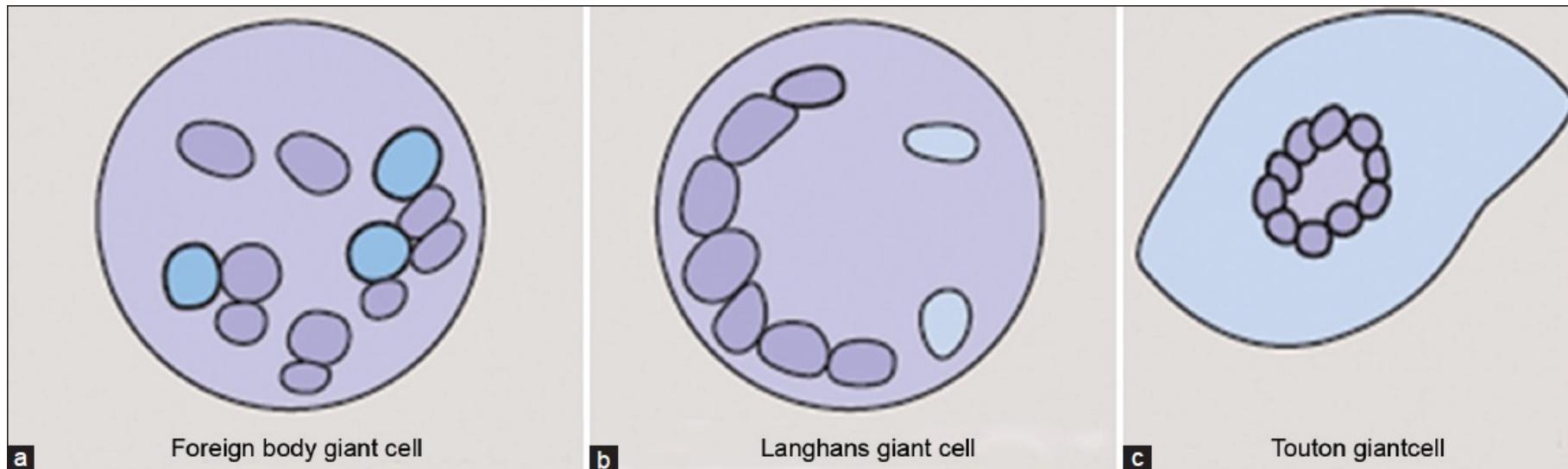


Epithelioid macrophages

- In response to foreign bodies or persistent intracellular pathogens
- ↓ Phagocytic capacity
- ↑ Presumed **secretory** capacity (↑ rER, Golgi complex, vesicles and vacuoles)

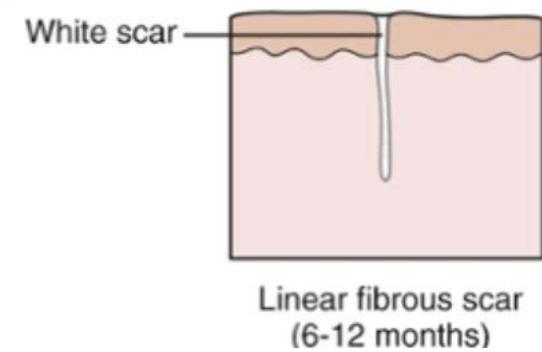
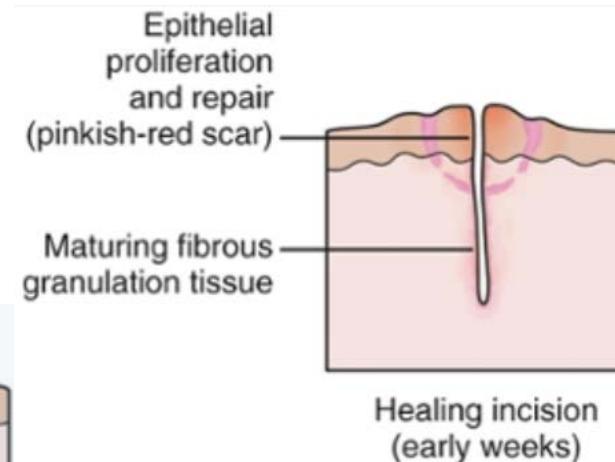
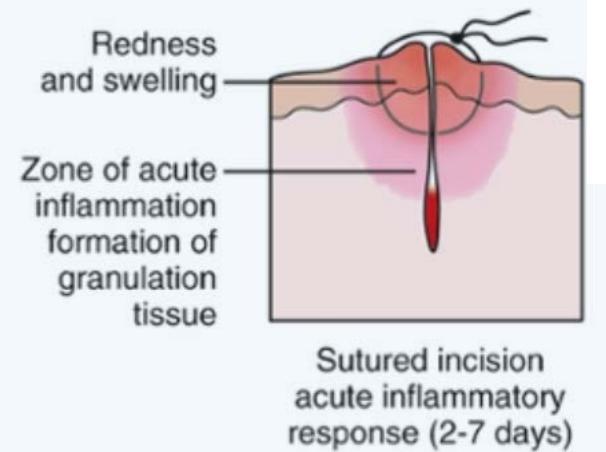
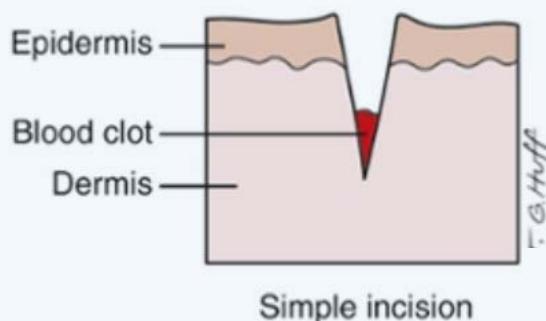
Multinucleated giant cells

- In response to foreign bodies or persistent intracellular pathogens
- Formed by fusion of two or more activated macrophages



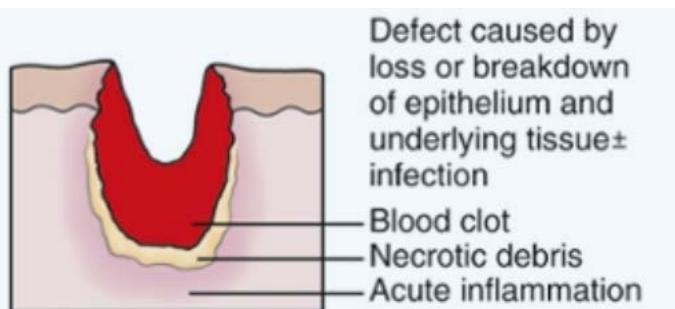
Wound healing and angiogenesis

- Wound healing by primary intention

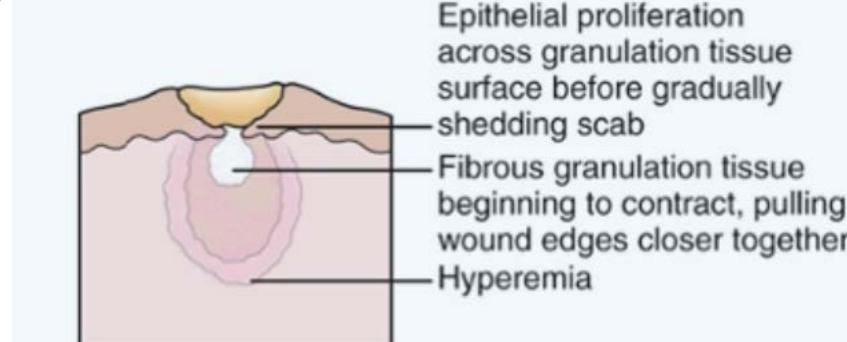


Wound healing and angiogenesis

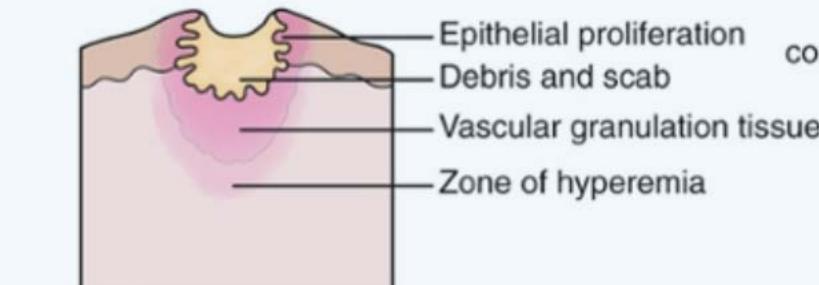
- Wound healing by secondary intention



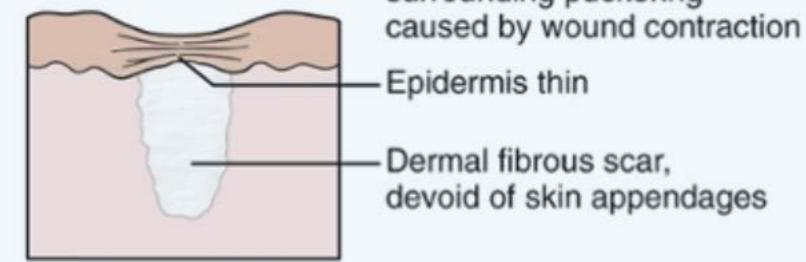
Ragged infected wound
(at 2-3 days)



Phase of granulation tissue maturation and wound contraction (about 3-6 weeks)



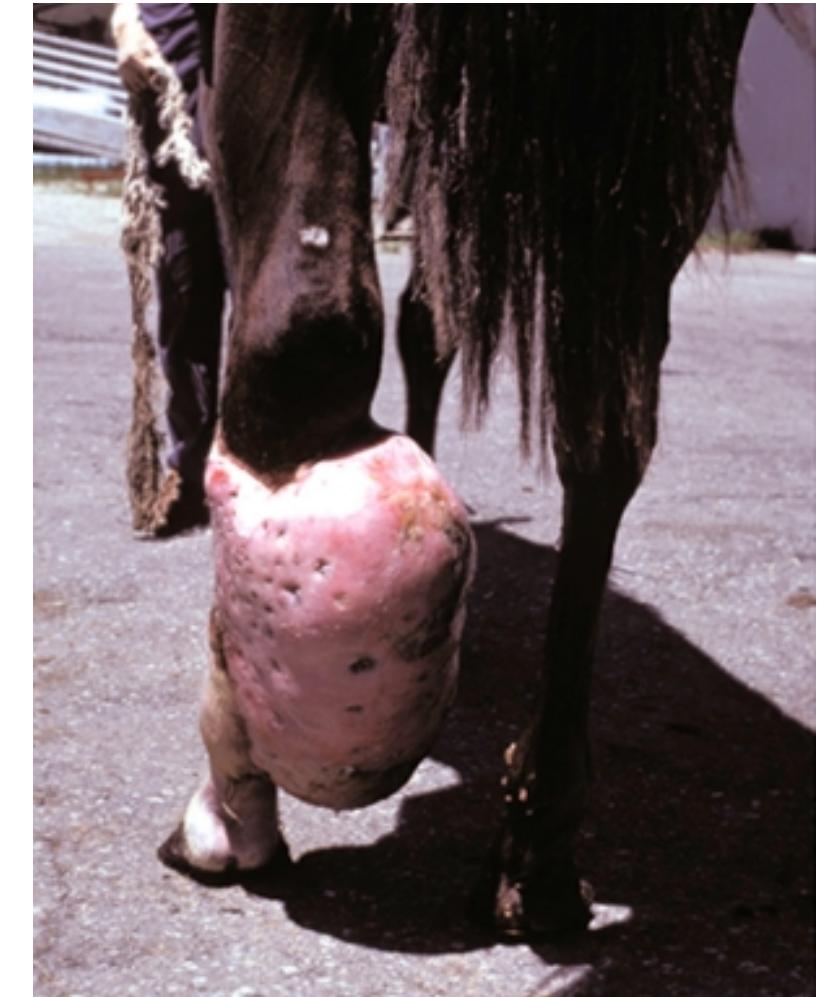
Phase of rapid proliferation of vascular granulation tissue
(about 1-2 weeks)



Healed wound

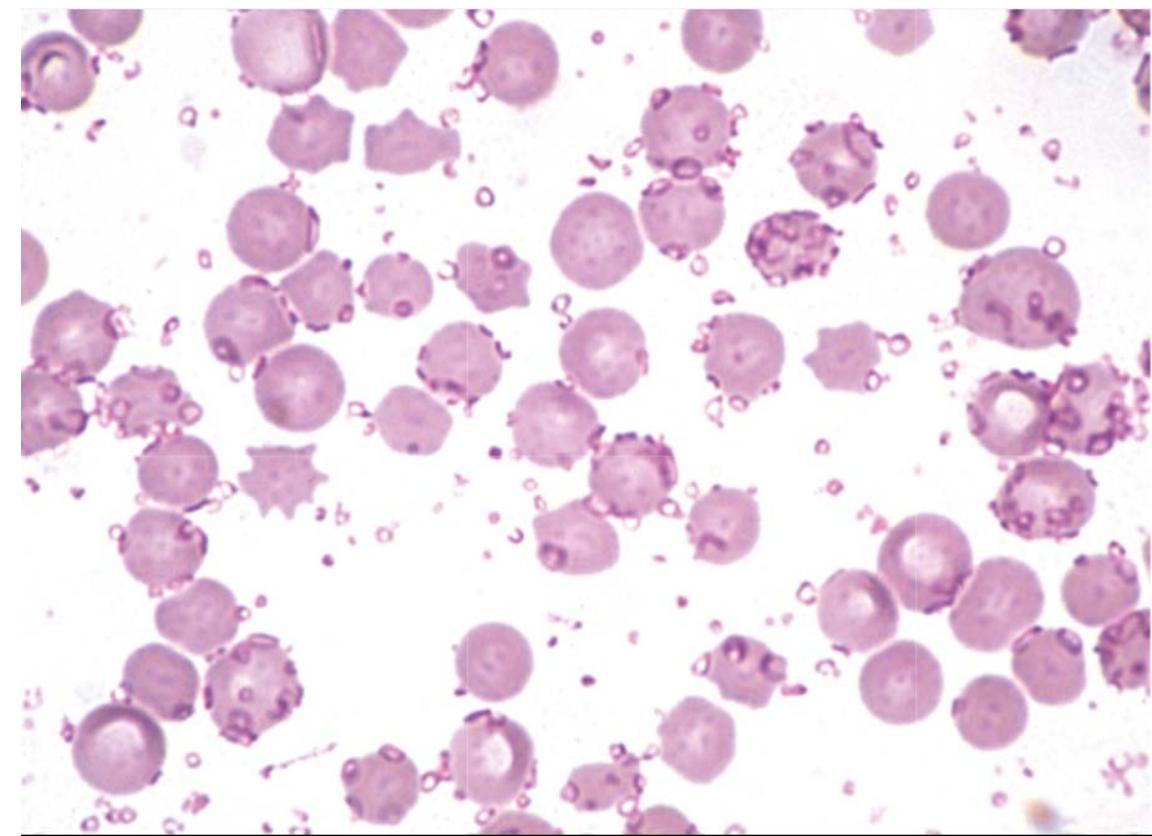
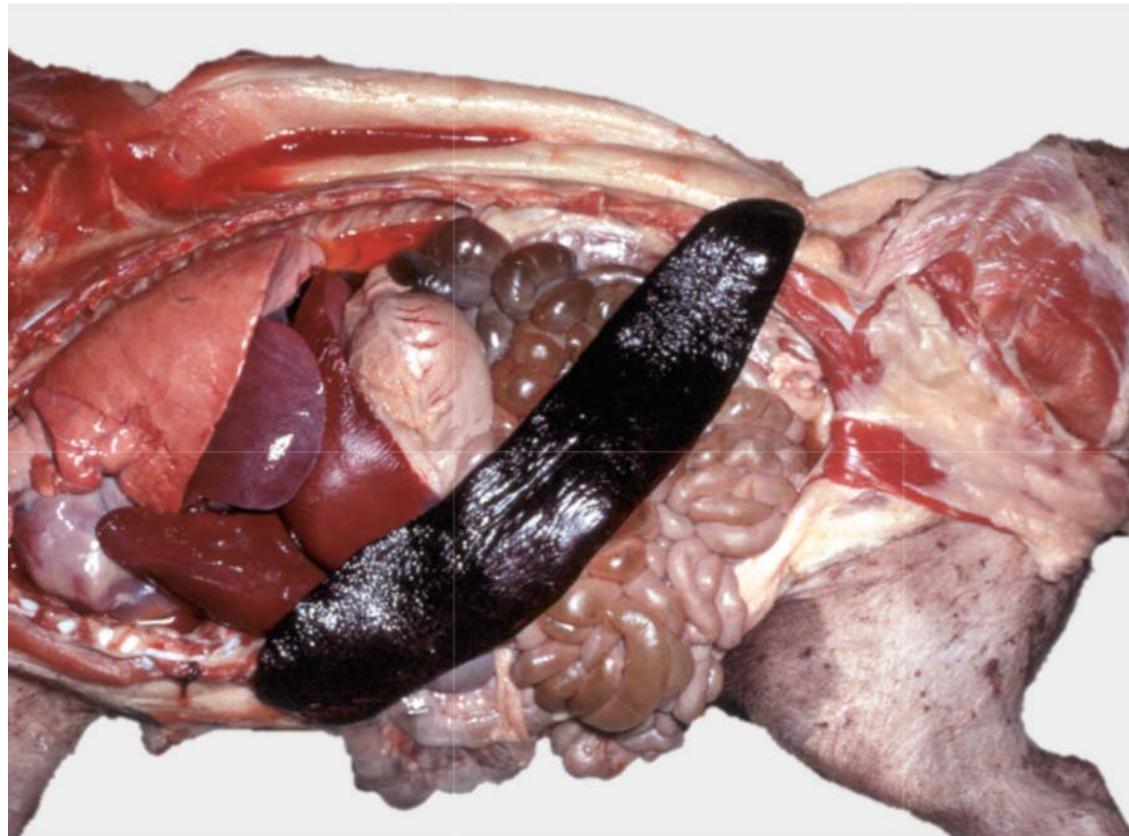
Granulation tissue

- Specific arrangement
 - Fibroblast parallel to wound surface
 - Fibroblast perpendicular to vessels
- Proud flesh in horses
 - Exuberant granulation tissue
 - Distal limbs



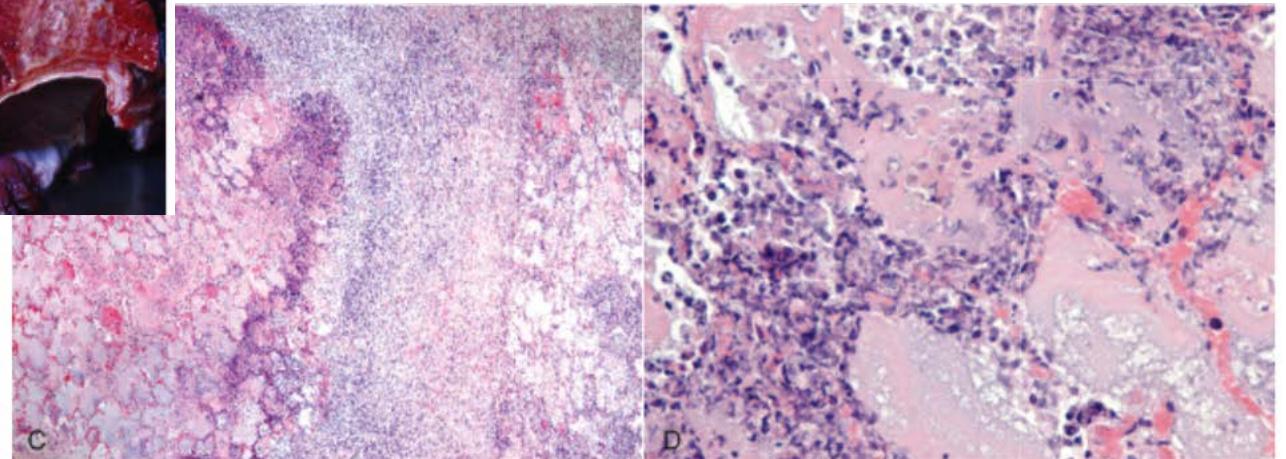
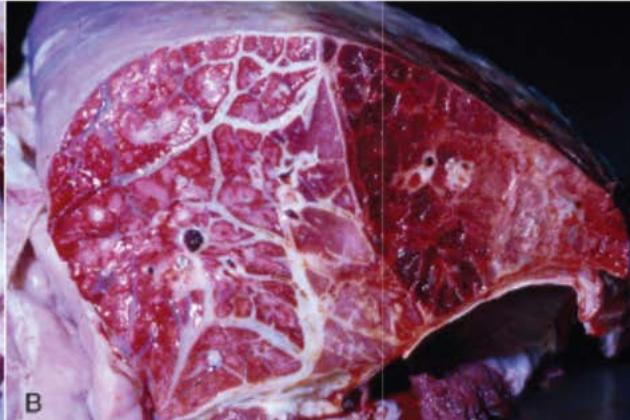
Mechanisms of Microbial Infections

Mycoplasma suis (formerly *Eperythrozoon suis*)



Contagious bovine pleuropneumonia

- *Mycoplasma mycoides* var. *mycoides* small colony
- Vasculitis -> lung thrombosis, ischemia, infarction

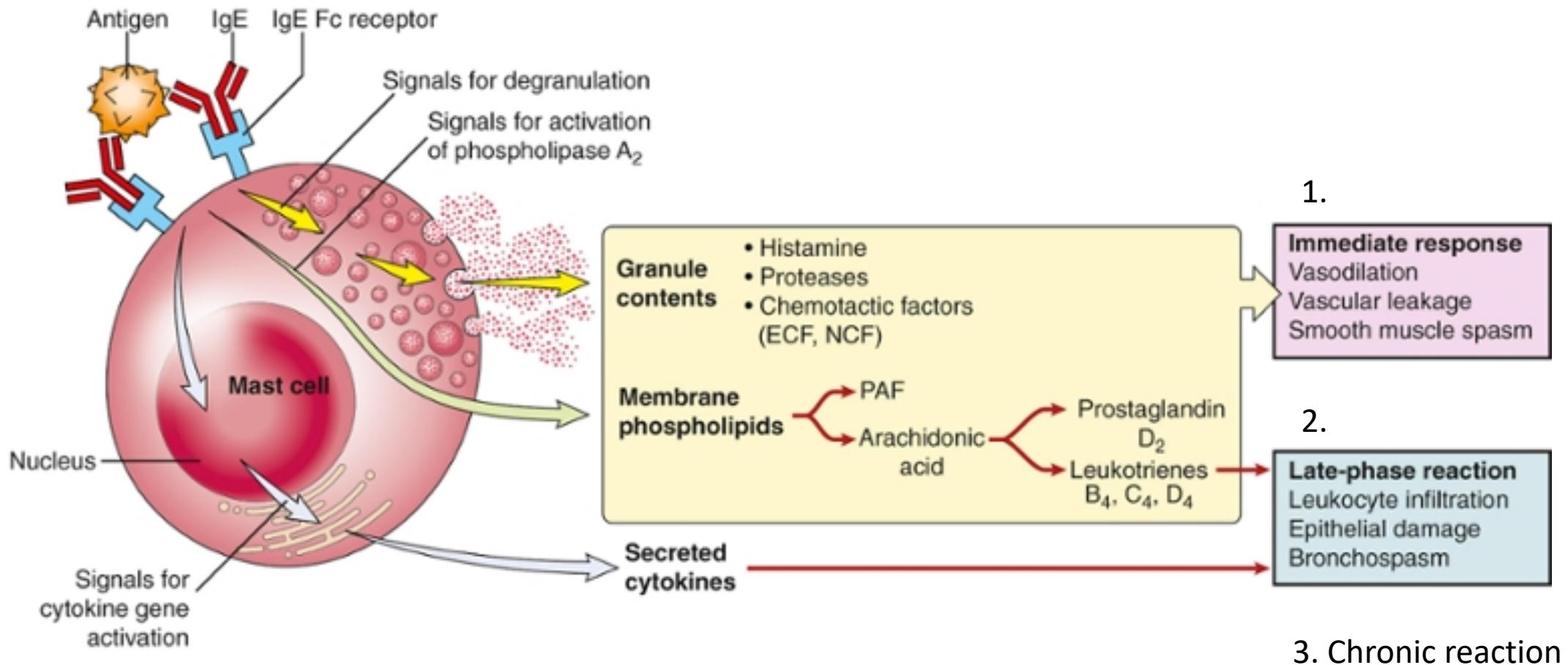


Diseases of Immunity

Type I (immediate) hypersensitivity

Items	Components
Immune component	IgE
Antigen	Allergens
Prototype	Anaphylaxis, allergies (atopic forms)
Mechanism	IgE -> vasodilation -> inflammatory cells
Lesions	Vasodilation, edema, smooth m contraction, inflammation

Degranulation and activation of mast cells



Type II (Ab-mediated) hypersensitivity

Items	Components
Immune component	IgG and IgM
Antigen	Cell- or matrix-associated antigens, cell surface receptor
Prototype	IMHA, isoerythrolysis, transfusion reaction, drug reaction, pemphigus
Mechanism	Binding and destroy target cells by activated complement or Fc receptors
Lesions	Cell lysis; inflammation

Type III (Immune-complex) hypersensitivity

Items	Components
Immune component	IgG and IgM
Antigen	Soluble Ag (e.g., bac/viral Ag)
Prototype	SLE, glomerulonephritis*, serum sickness, Arthus reaction
Mechanism	Deposition of IC -> inflammation
Lesions	Necrotizing vasculitis (fibrinoid necrosis); inflammation

Type IV (cell-mediated) hypersensitivity

Items	Components
Immune component	T lymphocytes
Antigen	Soluble Ag, contact Ag, Cell-associated Ag
Prototype	Contact dermatitis, transplant rejection, tuberculosis, chronic allergic diseases
Mechanism	Cytokine/macrophage activation; T-cell cytotoxicity
Lesions	Perivascular infiltrates, edema, cell destruction, granuloma

