

National Consortium for Health Science Education



The Endocrine System

Foundation Standard 1: Academic Foundation

Understand human anatomy, physiology, common diseases and disorders, and medical math principles.

1.13 Analyze basic structures and functions of human body systems

- Endocrine versus exocrine
- Structures of endocrine system
- Functions of endocrine system
- Hormones
- Regulation of hormones

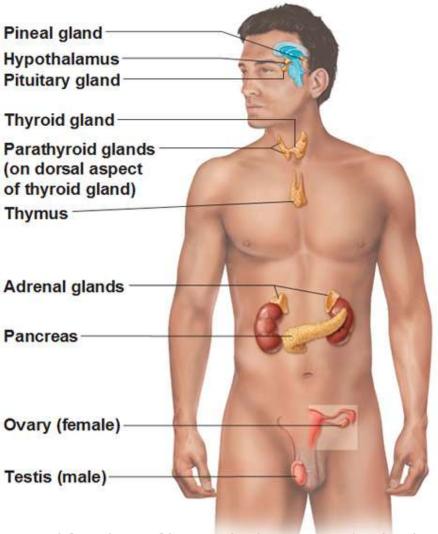
1.21 Describe common diseases and disorders of each body system

- Etiology
- Pathology
- Diagnosis
- Treatment
- Prevention





The Major Endocrine Organs



- 1.13 Analyze basic structures and functions of human body systems (endocrine).
- i. Endocrine (structures of endocrine system)





Endocrine vs Exocrine

Endocrine

- Ductless
- Secretions empty into the blood
- Secrete hormones
- Have long term control of target organs

Exocrine

- May or may not have ducts
- Secretions go directly to the target cells
- Secrete enzymes
- Have short term control



^{1.13} Analyze basic structures and functions of human body systems endocrine).

i. Endocrine (endocrine versus exocrine, functions of endocrine system)



The Endocrine System

DUCTLESS GLANDS

- Secrete chemical messengers (hormones)
 - Diffuse directly into the bloodstream
 - Interact with receptors inside/outside
 target cells
 - Involve growth, maturation, reproduction, metabolism, and human behavior





The Endocrine System *Major Glands and Organs*

- Hypothalamus
- Pituitary
- Thyroid
- Parathyroid
- Pineal

- Adrenal
- Gonads
 - Testes
 - Ovaries
- Pancreas
- Thymus



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The Endocrine System

Biofeedback mechanisms controls hormone levels

Negative feedback (minimizes change)

- If the hormone is high, the gland will stop producing it.
- If the hormone is low, the gland will produce more.

Positive feedback (the change)

- Stimulus is promoted until the hormone is no longer needed.
 - childbirth, labor stimulates the production of oxytocin until the baby is delivered. Oxytocin is no longer needed.



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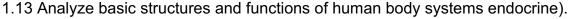
Hypothalamus

"Commander in Chief"

- Link between endocrine and nervous system
- <u>Direct</u> control of <u>posterior</u> pituitary gland
 - ADH and oxytocin
- Indirect control through release of regulatory factors
 - Target-anterior pituitary gland

Hormones

- ✓ CRH Corticotropin- releasing hormone
- √ TRH Thyrotropin-releasing hormone
- ✓ GH Growth hormone
 - GHIH Growth hormone inhibiting hormone
 - GHRH Growth hormone releasing hormone
- ✓ PH Prolactin-inhibiting hormone
- ✓ GnRH Gonadotropin releasing hormones

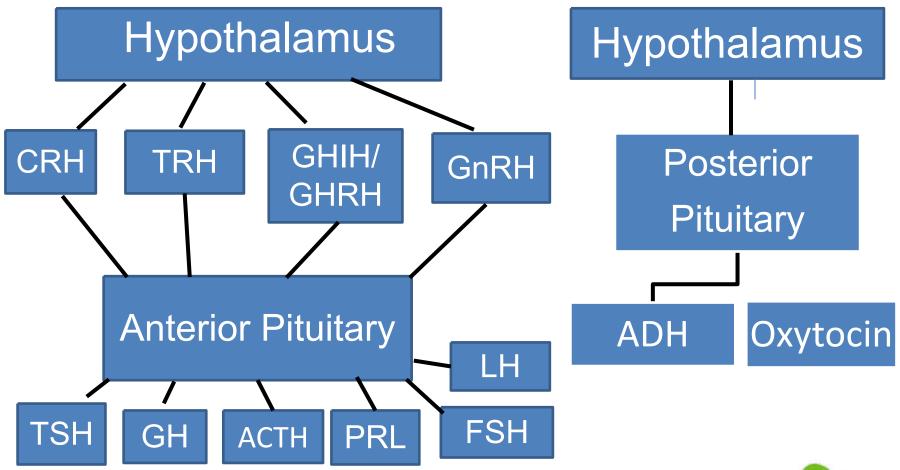


i. Endocrine, structures and functions of endocrine system, hormones)





Hypothalamus



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Pituitary

"Master Gland"

- Secretes hormones that control other endocrine glands
- Structurally divided into two parts:
 - Posterior pituitary gland
 - Anterior pituitary gland





Pituitary

Posterior Pituitary Gland

- Oxytocin
- ADH Antidiuretic hormone (Vasopressin)

Anterior Pituitary Gland

- GH Growth hormone (Somatotropin)
- TSH Thyroid stimulating hormone (Thyrotropin)
- ACTH Adrenocorticotropic hormone
- LH Luteinizing hormone (female)
- FSH Follicle stimulating hormone
- Prolactin Lactogenic





Posterior Pituitary

ADH (antidiuretic hormone) = vasopressin

- Urination > 1 blood volume
 Water is reabsorbed in the tubules of the nephron
- Large amounts of ADH
 - $\downarrow \downarrow$ urination \rightarrow \uparrow blood pressure
- Insufficient ADH → diabetes insipidus
 Causing excessive urination → I fluids and electrolytes

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^{1.13} Analyze basic structures and functions of human body systems endocrine).

Endocrine (functions of endocrine system, hormones, regulation of hormones)



Posterior Pituitary

Oxytocin - positive feedback- increase the magnitude of change

- Stimulates the contraction of the smooth muscle of the uterus
- Stimulates the mammary glands forcing milk into the ducts

Indications for administration:

- Given to induce labor
- Given after delivery to constrict uterine blood vessels to minimize bleeding



National Consortium for Health Science Education Anterior Pituitary Gland

Growth Hormone (GH) Somatotropin

Stimulates growth of body cells

- Pituitary Dwarfism
 - Too little growth hormone (hGH)
 - Proportions are normal
- Gigantism
 - Excessive secretion of growth hormone (hGH)
- Acromegaly
 - Excess secretion of growth hormone (GH) after childhood

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Thyroid Gland

- Located in front of the trachea
- Secretes three hormones
 - T3 Triiodothyronine
 - ✓ Controls cell metabolism and growth
 - ✓ Contains 3 iodine atoms
 - T4 Thyroxine
 - ✓ Controls cell metabolism and growth
 - ✓ Contains 4 iodine atoms
 - Calcitonin
 - ✓ Decreases blood calcium
 - ✓ Stimulates bone development



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Thyroid

- Hypothyroidism
 - Hashimoto's thyroiditis
 - ✓ Most common cause
 - ✓ Women 30-50 years
 - ✓ Autoimmune
 - ✓ Low T4 and high TSH
 - ✓ Swelling of thyroid
 - ✓ Treated with synthetic thyroid hormones
 - ✓ May lead to goiters





Thyroid

- Hyposecretion of thyroid hormones during fetal development
 - Cretinism
 - ✓ Skeleton fails to grow
 - ✓ Usually severely mentally retarded
 - ✓ Retarded sexual development
 - ✓ Usually have a yellowish skin color
 - ✓ Hormone therapy must begin before 2 months to alleviate symptoms





Thyroid

- Hypersecretion of thyroid hormone
 - Grave's Disease
 - ✓ Symptoms
 - o hot
 - o tremors
 - sweating
 - muscle weakness
 - nervousness
 - irritability
 - bulging eyes





Parathyroid Glands

- Two small pairs of glands embedded in the posterior side of the thyroid
- Produces PTH (*Parathyroid Hormone*)
- Increases level of calcium in the blood:
 - stimulating bone-dissolving cells
 - kidneys to reabsorb calcium
 - intestines absorb calcium from food
- Calcium is important:
 - bone growth
 - blood clotting
 - muscle tone and contraction (including the heart)
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Parathyroid Glands

Hyperparathyroidism

- Hypercalcemia
 - leading to renal calculi
 - bone weakness
- Often caused by a tumor (adenoma)
- Treatment: surgical removal of the tumor

Hypoparathyroidism

- Hypocalcemia and elevated phosphorous
 - can lead to *tetany*
 - hyperirritability of the nervous system
 - seizures
 - death





Outer layer of the adrenal gland

- Under the direction of the anterior pituitary [(Adrenocorticotropic Hormone (ACTH)]
 - Mineralocorticoids
 - Glucocortocoids
 - Gonadocorticoids



Endocrine (functions of endocrine system, hormones)



Mineralocorticoids

Aldosterone

Acts on the Kidneys:

- Regulates sodium reabsorption
- Regulates potassium excretion
- Increases water reabsorption



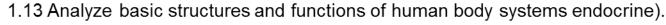
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Glucocortocoids

- Cortisol-hydrocortisone
- Cortisone
- Actions:
 - metabolism
 - increase blood glucose
 - help resist stress
 - anti-inflammatory to reduce immune responses



i. Endocrine (functions of endocrine system, hormones)





Gonadocorticoids (sex hormones)

Estrogens

Stimulate the development of female sexual characteristics

Androgens

- Stimulate the development of male sexual characteristics
- Stimulate the female sex drive



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Adrenal Medulla

Epinephrine (*Adrenaline*) **Norepinephrine**

- Actions:
 - Responsible for the "Fight or Flight" response
 - Helps the body cope with stress

 - √ ↑ respirations
 - Sweaty palms
 - Dry mouth



i. Endocrine (functions of endocrine system, hormones)





Addison's Disease

Insufficient Adrenocorticosteriods

- Cortisol
- Aldosterone

Causes:

- autoimmune
- infection
- cancer

Treatment:

- hormone replacement

Symptoms:

- weight loss
- muscle weakness
- fatigue
- low blood pressure
- hypoglycemia
- irritability
- depression
- skin pigmentation





Cushing's Syndrome

Over-secretion of Cortisol Causes:

- Medical steroid use (Prednisone)
- Pituitary (ACTH) or adrenal tumors
- Genetic





Cushing's Syndrome Symptoms

- upper body obesity
- round face
- bruising
- osteoporosis
- fatigue
- depression

- hypertension
- high blood sugar
- female-facial hair
- male –decreased fertility
- retention of sodium
 - causes tissue fluid build up (puffiness)

Treatment:

- if tumor, remove
- drugs to decrease cortisol level





Pancreas

A flat oblong organ located just posterior and slightly inferior to the stomach

- Both an exocrine and endocrine gland
 - Exocrine tissue of the pancreas
 - ✓ The bulk of the pancreas produces digestive enzymes
 - ✓ Pancreatic duct connects to the duodenum
 - Endocrine tissue of the pancreas
 - ✓ Islets of Langerhans release insulin and glucagon into the blood stream
 - ✓ Regulate blood glucose levels

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Pancreas

Types of Cells of the Islets of Langerhans

- Alpha Cells secrete glucagon
 - raises blood sugar
- Beta Cells secrete insulin
 - lowers blood sugar



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Diabetes Mellitus

- Disorder related to abnormal pancreatic hormones
- Diabetes from Greek "siphon" and mellitus for honey
- Symptoms include:
 - Polyuria excess urination
 - Hyperglycemia → glycosuria
 - ✓ glucose in the urine
 - Polydipsia excessive thirst
 - Polyphagia excessive eating





Type I Diabetes

- Insulin Dependent Diabetes Mellitus (IDDM)
 - Pancreas does not produce insulin due to the destruction of beta cells in the Islets of Langerhans
 - Requires regular injections of insulin to prevent death
 - Most commonly develops in individuals younger than 20 years old
 - √ (<u>Juvenile</u> <u>Onset</u> <u>Diabetes Mellitus</u>)
 - Appears to be an autoimmune disorder





Type II Diabetes

Non-Insulin Dependent Diabetes Mellitus (NIDDM)

- Also called maturity onset diabetes
- Most often occurs in individuals over 40
 - being seen more in a younger age group
- Affects the way the body processes glucose
- Most individuals are overweight or clinically obese

Treatment:

- Medications
- Diet
- Exercise
- Weight loss and control





Complications from Diabetes

- Atherosclerosis
- Heart disease
- Peripheral vascular disease
- Severe kidney damage
- Glaucoma and/or blindness
- Gangrene
- Ketoacidosis
- Weight loss
- Neuropathy





Other Glands

Thymus Gland

- Functions in the endocrine and lymphatic systems
 - Produces a hormone called <u>thymosin</u>
 - Hormone that supports function of WBCs
- Begins to atrophy at puberty

Pineal Gland

- Produces *melatonin*
- Regulates sleep patterns



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