

Chapter 12- The lymphatic system and body defenses

- I. The lymphatic system
 - A. Consists of two semi-independent parts
 1. Lymphatic vessels
 2. Lymphoid tissues and organs
 - B. Lymphatic system functions
 1. Transports escaped fluids back to the blood
 2. Plays essential roles in body defense and resistance to disease
- II. Lymphatic characteristics
 - A. Lymph- excess tissue fluid carried by lymphatic vessels
 - B. Properties of lymphatic vessels
 1. One way system toward the heart
 2. No pump
 3. Lymph moves toward the heart
 - a. Milking action of skeletal muscle
 - b. Rhythmic contraction of smooth muscle in vessel walls
- III. Relationship of lymphatic vessels to blood vessels
 - A. Lymphatic vessels
 1. Lymph capillaries
 - a. Walls overlap to form flap-like minivalves
 - b. Fluid leaks into lymph capillaries
 - c. Capillaries are anchored to connective tissue by filaments
 - d. Higher pressure on the inside closes minivalves
 - e. Fluid is forced along the vessel
 2. Lymphatic collecting vessels
 - a. Collect lymph from lymph capillaries
 - b. Carry lymph to and away from lymph nodes
 - c. Return fluid to circulatory veins near the heart
 - 1) Right lymphatic duct
 - 2) Thoracic duct
 - B. Lymph
 1. Harmful materials that enter lymph vessels
 - a. Bacteria
 - b. Viruses
 - c. Cancer cells
 - d. Cell debris
 - C. Lymph nodes
 1. Filter lymph before it is returned to the blood
 2. Defense cells within lymph nodes
 - a. Macrophages- engulf and destroy foreign substances
 - b. Lymphocytes- provide immune response to antigens

- D. Lymph node structure
 - 1. Most are kidney-shaped and less than 1 inch long
 - 2. Cortex
 - a. Outer part- contains follicles (collections of lymphocytes)
 - 3. Medulla
 - a. Inner part- contains phagocytic macrophages
 - E. Flow of lymph through nodes
 - 1. Lymph enters the convex side through afferent lymphatic vessels
 - 2. Lymph flows through a number of sinuses inside the node
 - 3. Lymph exits through efferent lymphatic vessels
 - 4. Fewer efferent than afferent vessels causes flow to be slowed
 - F. Other lymphoid organs
 - 1. Several other organs contribute to the lymphatic function
 - a. Spleen
 - 1) Located on the left side of the abdomen
 - 2) Filters blood
 - 3) Destroys worn out blood cells
 - 4) Forms blood cells in the fetus
 - 5) Acts as a blood reservoir
 - b. Thymus
 - 1) Located low in the throat, overlying the heart
 - 2) Functions at peak levels only during childhood
 - 3) Produces hormones (like thymosin) to program lymphocytes
 - c. Tonsils
 - 1) Small masses of lymphoid tissue around the pharynx
 - 2) Trap and remove bacteria and other foreign materials
 - 3) Tonsillitis is caused by congestion with bacteria
 - d. Peyer's patches
 - 1) Found in the wall of the small intestine
 - 2) Resemble tonsils in structure
 - 3) Capture and destroy bacteria in the intestine
 - G. Mucosa-associated lymphatic tissue (MALT)
 - 1. Includes
 - a. Peyer's patches
 - b. Tonsils
 - c. Other small accumulations of lymphoid tissue
 - 2. Acts as a sentinel to protect respiratory and digestive tracts
- IV. Body defenses
- A. The body is constantly in contact with bacteria, fungi, and viruses
 - B. The body has two defense systems for foreign materials
 - 1. Innate (nonspecific) defense system
 - 2. Adaptive (specific) defense system

- C. Immunity- specific resistance to disease
- D. Immune system
- E. Body defenses
 - 1. Innate defense system (nonspecific defense system)
 - a. Mechanisms protect against a variety of invaders
 - b. Responds immediately to protect body from foreign materials
 - 2. Adaptive defense system (specific defense system)
 - a. Specific defense is required for each type of invader
- F. Innate body defenses
 - 1. Innate body defenses are mechanical barriers to pathogens such as
 - a. Body surface coverings
 - 1) Intact skin
 - 2) Mucous membranes
 - b. Specialized human cells
 - c. Chemicals produced by the body
 - 2. Surface membrane barriers: first line of defense
 - a. Skin and mucous membranes
 - 1) Physical barrier to foreign materials
 - 2) Also provide protective secretions
 - a) pH of the skin is acidic to inhibit bacterial growth
 - b) Sebum is toxic to bacteria
 - c) Vaginal secretions are very acidic
 - b. Stomach mucosa
 - 1) Secretes hydrochloric acid
 - 2) Has protein-digesting enzymes
 - c. Saliva and lacrimal fluid contain lysozymes, an enzyme that destroy bacteria
 - d. Mucus traps microorganisms in digestive and respiratory pathways
 - 3. Cells and chemicals: second line of defense
 - a. Phagocytes
 - 1) Cells such as neutrophils and macrophages
 - 2) Engulf foreign material into a vacuole
 - 3) Enzymes from lysosomes digest the material
 - b. Natural killer cells
 - 1) Can lyse (disintegrate or dissolve) and kill cancer cells
 - 2) Can destroy virus-infected cells
 - c. Inflammatory response
 - 1) Triggered when body tissues are injured
 - 2) Four most common indicators of acute inflammation
 - a) Redness
 - b) Heat
 - c) Swelling

- d) Pain
- 3) Results from a chain of events leading to the protection and healing
- 4) Functions of the inflammatory response
 - a) Prevents spread of damaging agents
 - b) Disposes of cell debris and pathogens
 - i. Phagocytosis
 - ii. Neutrophils move by diapedesis to clean up damaged tissue and/or pathogens
 - iii. Monocytes become macrophages and complete disposal of cell debris
 - c) Sets the stage for repair
- d. Antimicrobial proteins
 - 1) Attack microorganisms
 - 2) Hinder reproduction of microorganisms
 - 3) Most important
 - a) Complement proteins
 - i. A group of at least 20 plasma proteins
 - ii. Activated when they encounter and attach to cells (complement fixation)
 - iii. Damage foreign cell surfaces
 - iv. Release vasodilators and chemotaxis chemicals, cause opsonization
 - b) Interferon
 - i. Proteins secreted by virus-infected cells
 - ii. Bind to healthy cell surfaces to interfere with the ability of viruses to multiply
- e. Fever
 - 1) Abnormally high body temperature
 - 2) Hypothalamus heat regulation can be reset by pyrogens (secreted by white blood cells)
 - 3) High temperatures inhibit the release of iron and zinc from the liver and spleen needed by bacteria
 - 4) Fever also increases the speed of tissue repair
- 4. Adaptive defense system: third line of defense
 - a. Immune response is the immune system's response to a threat
 - b. Immunology is the study of immunity
 - c. Antibodies are proteins that protect from pathogens
 - d. Three aspects of adaptive defense
 - 1) Antigen specific- recognizes and acts against particular foreign substances
 - 2) Systemic- not restricted to the initial infection site

- 3) Memory- recognizes and mounts a stronger attack on previously encountered pathogens
- e. Types of immunity
- 1) Humoral immunity = antibody- mediated immunity
 - a) Provided by antibodies present in body fluids
 - 2) Cellular immunity = cell-mediated immunity
 - a) Targets virus-infected cells, cancer cells, and cells of foreign grafts
- f. Antigens (nonself)
- 1) Any substance capable of exciting the immune system and provoking an immune response
 - 2) Examples of common antigens
 - a) Foreign proteins (strongest)
 - b) Nucleic acids
 - c) Some lipids
 - d) Pollen grains
 - e) Microorganisms
 - 3) Self-antigens
 - a) Human cells have many surface proteins
 - b) Our immune cells do not attack our own proteins
 - c) Our cells in another person's body can trigger an immune response because they are foreign
 - i. Restricts donors for transplants
 - 4) Allergies
 - a) Many small molecules (called haptens or incomplete antigens) are not antigenic, but link up with our own proteins
 - b) The immune system may recognize and respond to a protein-hapten combination
 - c) The immune response is harmful rather than protective because it attacks our own cells
- g. Cells of the adaptive defense system
- 1) Lymphocytes respond to specific antigens
 - a) B lymphocytes (B cells)
 - b) T lymphocytes (T cells)
 - 2) Macrophages help lymphocytes
 - 3) Immunocompetent- cells become capable of responding to a specific antigen by binding to it
 - 4) Cells of the adaptive defense system
 - a) Lymphocytes
 - i. Originate from hemocytoblasts in the red bone marrow

- ii. B lymphocytes become immunocompetent in the bone marrow (remember B for Bone marrow)
 - iii. T lymphocytes become immunocompetent in the thymus (remember T for Thymus)
 - b) Macrophages
 - i. Arise from monocytes
 - ii. Become widely distributed lymphoid organs
 - iii. Secrete cytokines (proteins important in the immune response)
 - iv. Tend to remain fixed in the lymphoid organs
- h. Humoral (Antibody-mediated) immune response
 - 1) B lymphocytes with specific receptors bind to a specific antigen
 - 2) The binding event activates the lymphocyte to undergo clonal selection
 - 3) A large number of clones are produced (primary humoral response)
 - 4) Most B cells become plasma cells
 - a) Produce antibodies to destroy antigens
 - b) Activity lasts for 4 or 5 days
 - 5) Secondary humoral responses
 - a) Memory cells are long-lived
 - b) A second exposure causes rapid response
 - c) The secondary response is stronger and longer lasting
 - 6) Some B cells become long-lived memory cells (secondary humoral response)
 - 7) Active immunity
 - a) Occurs when B cells encounter antigens and produce antibodies
 - b) Active immunity can be
 - i. Naturally acquired during bacterial and viral infections
 - ii. Artificially acquired from vaccines
 - 8) Passive immunity
 - a) Occurs when antibodies are obtained from someone else
 - i. Conferred naturally from a mother to her fetus (naturally acquired)
 - ii. Conferred artificially from immune serum or gamma globulin (artificially acquired)
 - b) Immunological memory does not occur
 - c) Protection provided by "borrowed antibodies"

- d) Monoclonal antibodies
 - e) Antibodies prepared for clinical testing over diagnostic services
 - f) Produced from descendents of a single cell line
 - g) Examples of uses for monoclonal antibodies
 - i. Diagnosis of pregnancy
 - ii. Treatment after exposure to hepatitis and rabies
- 9) Antibodies (immunoglobulins or Igs)
- a) Soluble proteins secreted by B cells (plasma cells)
 - b) Carried in blood plasma
 - c) Capable of binding specifically to an antigen
 - d) Antibody structure
 - i. Four amino acid chains linked by disulfide bonds
 - ii. Two identical amino acid chains are linked to form a heavy chain
 - iii. The other two identical chains are light chains
 - iv. Specific antigen-binding sites are present
 - e) Antibody classes- antibodies of each class have slightly different roles, Five major immunoglobulin classes (MADGE)
 - i. IgM- can fix complement
 - ii. IgA- found mainly in mucus
 - iii. IgD - important in activation of B cell
 - iv. IgG- can cross the placental barrier and fix complement
 - v. IgE- involved in allergies
 - f) Antibody function
 - i. Antibodies inactivate antigens in a number of ways:
 - ii. Complement fixation
 - iii. Neutralization
 - iv. Agglutination
 - v. Precipitation
- i. Cellular (cell-mediated) immune response
- 1) Antigens must be presented by macrophages to an immunocompetent T cell (antigen presentation)
 - 2) T cells must recognize nonself and self (double recognition)
 - 3) After antigen binding, clones form as with B cells, but different classes of cells are produced
 - 4) T cell clones
 - a) Cytotoxic (killer) T cells

- i. Specialize in killing infected cells
 - ii. Insert a toxic chemical (perforin)
 - b) Helper T cells
 - i. Recruit other cells to fight the invaders
 - ii. Interact directly with B cells
 - c) Regulatory T cells
 - i. Release chemicals to suppress the activity of T and B cells
 - ii. Stop the immune response to prevent uncontrolled activity
 - d) A few members of each clone are memory cells
- V. Organ transplants and rejection
 - A. Major types of grafts
 1. Autografts- tissue transplanted from one site to another site on same person
 2. Isografts- tissue grafts from identical person (identical twin)
 3. Allografts- tissue taken from an unrelated donor
 4. Xenografts- tissue taken from a different animal species
 - B. Autografts and isografts are ideal donors
 - C. Xenografts are never successful
 - D. Allografts are more successful with a closer tissue match
- VI. Disorders of immunity: allergies (hypersensitivity)
 - A. Abnormal, vigorous immune responses
 - B. Types of allergies
 - C. Immediate hypersensitivity
 1. Triggered by release of histamine from IgE binding to mast cells
 2. Reactions begin within seconds of contact with allergen
 3. Anaphylactic shock- dangerous, systemic response
 - D. Types of allergies (continued)
 1. Delayed hypersensitivity
 - a. Triggered by the release of lymphokines from activated helper T cells
 - b. Symptoms usually appear 1-3 days after contact with the antigen
- VII. Disorders of immunity: immunodeficiency's
 - A. Production or function of immune cells or complement is abnormal
 - B. May be congenital or acquired
 - C. Includes AIDS (acquired immune deficiency syndrome)
 - D. The immune system does not distinguish between self and non-self
 - E. The body produces antibodies and sensitized T lymphocytes that attack its own tissues
 - F. Examples of autoimmune diseases
 1. Multiple sclerosis- white matter of brain and spinal cord are destroyed
 2. Myasthenia gravis- impairs communication between nerves and skeletal muscles
 3. Type 1 diabetes mellitus- destroys pancreatic beta cells that produce insulin

4. Rheumatoid arthritis- destroys joints
 5. Systemic lupus erythematosus (SLE)
 - a. Affects kidney, heart , lung and skin
 6. Glomerulonephritis- impairment of renal function
- G. Self tolerance breakdown
1. Inefficient lymphocyte programming
 2. Appearance of self-proteins in the circulation that have not been exposed to the immune system
 - a. Eggs
 - b. Sperm
 - c. Eye lens
 - d. Proteins in the thyroid gland
- H. Cross-reaction of antibodies produced against foreign antigens with self-antigens
1. Rheumatic fever
- VIII. Developmental aspects of the lymphatic system and body defenses
- A. Except of thymus and spleen, the lymphoid organs are poorly developed before birth
 - B. A newborn has no functioning lymphocytes at birth, only passive immunity from the mother
 - C. If lymphatics are removed or lost, severe edema results, but blood vessels grow back in time